

2020 MVP Health Care® Marketplace Formulary (List of Covered Drugs)

Please Read: This document contains information about the drugs we cover in this plan.

This formulary was updated on **June 1, 2020**. For more recent information or other questions, please contact the MVP Customer Care Center.

You can reach the Customer Care Center using the phone number listed on the back of your MVP Member ID Card, Monday – Friday, 8 am to 6 pm (Eastern Time), (TTY: **1-800-662-1220**).



For more detailed information about your MVP Health Care® (MVP) prescription drug coverage, please review your Certificate of Coverage or Summary Plan Description. Please be advised that this document is updated periodically, and changes may appear prior to their effective date to allow for member notification.

For the most recent information or other questions, please contact the MVP Customer Care Center at the phone number listed on the back of the MVP Member ID card.

How do I use the Formulary?

There are two ways to find a drug within this Formulary document. On your keyboard, press **CTRL+F** to bring up a search window.

1. **Search by Medical Condition** The drugs in this Formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, "Cardiovascular." If you know what your drug is used for, look for the category name in the document below. Then look under the category name for your drug.
2. **Search by Drug Name** If you are not sure of the category, look for your drug in the Index. The Index provides an alphabetical list of all the drugs, both brand name and generic, included in this document. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information.

Are there coverage restrictions?

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

PRIOR AUTHORIZATION (PA) MVP requires your physician to get prior authorization for certain drugs. This means that you will need to get approval from MVP before you fill your prescriptions. If you don't get approval, MVP may not cover the drug. Some drugs not listed on the formulary document follow approved MVP prior authorization policies. Please note that all new drugs will be excluded from the formulary and require prior authorization until reviewed by the MVP Pharmacy and Therapeutics (P&T) Committee. The P&T Committee recommends drugs to be excluded from coverage if they do not have significant clinical and/or therapeutic advantages over drugs currently covered by the Plan. The committee uses utilization, pharmacoeconomic and clinical data to develop the exclusions. However, not every member may be able to tolerate formulary drugs due to clinical ineffectiveness or adverse/allergic reactions. A formulary exception (prior authorization) process for these cases will allow members to receive otherwise non-covered medications.

QUANTITY LIMIT (QL) Some drugs in the formulary have a maximum quantity that may be received over a specified time period. The list of drugs with quantity limits is subject to change and drugs with them are marked by a "QL." The amount of drug covered is based on clinical

considerations. If you require more than the allowed quantity, the prescribing practitioner should initiate a request for coverage.

STEP THERAPY (ST) In some cases, MVP requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, MVP may not cover Drug B unless you try Drug A first. If Drug A does not work for you, MVP will then cover Drug B.

SPECIALTY DRUGS (SP) Specialty medications are used in the management of complex chronic or genetic conditions and certain catastrophic diseases. They are most often injectable medications but may also include oral agents. Drugs identified in the formulary as “SP” must be filled through the CVS Specialty Pharmacy or another pharmacy in the specialty network.

OVER THE COUNTER MEDICATIONS (OTC) Certain medications listed in the formulary are available over the counter. For these to be covered by insurance, a prescription is required.

MEDICAL (M) These drugs are covered under your Medical benefit. Typically, these products are obtained and administered by your physician. If you do not receive these medications from your physician, they must be obtained from CVS Specialty pharmacy, or another pharmacy in the specialty network.

AGE Some medications have age restrictions to ensure they are used in appropriate age groups. If you are outside of the age restriction but require the use of a drug with an age edit, your practitioner can submit a request for coverage and tell us why you need this drug.

More information

Your physician is the person best suited to help you make decisions about prescription drugs, and the prescription drug information here is intended for consumer guidance only. This information relates to the Prescription Drug Formulary, generally, and may not describe your specific coverage. Your Certificate of Coverage or Summary Plan Description determines your benefits, limitations and exclusions.

While every effort has been made to ensure accuracy, some information may be out of date. The Formulary is subject to change based on decisions made by the Pharmacy & Therapeutics (P&T) committee. New drugs are not covered until reviewed by the P&T committee. Medications with an over-the-counter equivalent are not a covered benefit. Drugs entering the market between 1938 and 1962 that were approved for safety but not effectiveness are called “DESI” drugs. DESI drugs are not covered on the MVP Marketplace Formulary.

The information contained in the MVP Marketplace Formulary is provided solely for the convenience of medical physicians. MVP does not warrant or assure accuracy of such information nor is it intended to be comprehensive in nature. The MVP Marketplace Formulary is not intended to be a substitute for the knowledge, expertise, skill, and judgement of the medical practitioner in his/her choice of prescription drugs. The document is subject to state-specific

regulations and rules, including, but not limited to, those regarding generic substitution, controlled substance schedules, preference for brands, and mandatory generics whenever applicable. MVP assumes no responsibility for the actions of any medical practitioner based upon reliance, in whole or part, on the information contained herein. The medical practitioner should consult the drug manufacturer's product literature or standard references for more detailed information.

Your employer may have limited your coverage of certain prescription drugs. In the case of some drugs, the Plan may limit coverage to a specific quantity or a specific course of treatment. The Plan may also require prior authorization on some covered drugs. If you need more information about policies regarding a specific drug, consult your physician or contact the MVP Customer Care Center. If the medication you take is not listed below, contact the CVS Caremark Customer Care Center at the phone number listed on your identification card.

MVP Exchange eff 06/03/2020

Drug Name Drug Tier Requirements/Limits ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS

AMPHETAMINES

ADDERALL TAB 5MG	3	
ADDERALL TAB 7.5MG	3	
ADDERALL TAB 10MG	3	
ADDERALL TAB 12.5MG	3	
ADDERALL TAB 15MG	3	
ADDERALL TAB 20MG	3	
ADDERALL TAB 30MG	3	
ADDERALL XR CAP 5MG	3	QL (60 caps / 30 days)
ADDERALL XR CAP 10MG	3	QL (60 caps / 30 days)
ADDERALL XR CAP 15MG	3	QL (60 caps / 30 days)
ADDERALL XR CAP 20MG	3	QL (60 caps / 30 days)
ADDERALL XR CAP 25MG	3	QL (60 caps / 30 days)
ADDERALL XR CAP 30MG	3	QL (60 caps / 30 days)
<i>amphetamine sulfate tab 5 mg</i>	2	
<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	2	QL (60 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	2	QL (60 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	2	QL (60 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	2	QL (60 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	2	QL (60 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	2	QL (60 caps / 30 days)
<i>amphetamine-dextroamphetamine tab 5 mg</i>	1	
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	1	
<i>amphetamine-dextroamphetamine tab 10 mg</i>	1	
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	1	
<i>amphetamine-dextroamphetamine tab 15 mg</i>	1	
<i>amphetamine-dextroamphetamine tab 20 mg</i>	1	
<i>amphetamine-dextroamphetamine tab 30 mg</i>	1	
DEXEDRINE CAP 5MG CR	3	QL (60 caps / 30 days)

PA - Prior Authorization QL - Quantity Limits ST - Step Therapy NM - Not available at mail-order SP - Specialty AGE - Age Limit ** - Subject to medical or pharmacy diabetic copay per contract/rider LA - Limited Access DL - Medication Restricted to a 30 day supply

Drug Name	Drug Tier	Requirements/Limits
DEXEDRINE CAP 10MG CR	3	QL (60 caps / 30 days)
DEXEDRINE CAP 15MG CR	3	QL (60 caps / 30 days)
<i>dextroamphetamine sulfate cap er 24hr 5 mg</i>	2	QL (60 caps / 30 days)
<i>dextroamphetamine sulfate cap er 24hr 10 mg</i>	2	QL (60 caps / 30 days)
<i>dextroamphetamine sulfate cap er 24hr 15 mg</i>	2	QL (60 caps / 30 days)
<i>dextroamphetamine sulfate oral solution 5 mg/5ml</i>	2	
<i>dextroamphetamine sulfate tab 5 mg</i>	2	
<i>dextroamphetamine sulfate tab 10 mg</i>	2	
MYDAYIS CAP 12.5MG	2	QL (60 caps / 30 days)
MYDAYIS CAP 25MG	2	QL (60 caps / 30 days)
MYDAYIS CAP 37.5MG	2	QL (60 caps / 30 days)
MYDAYIS CAP 50MG	2	QL (60 caps / 30 days)
PROCENTRA SOL 5MG/5ML	2	
VYVANSE CAP 10MG	2	QL (60 caps / 30 days)
VYVANSE CAP 20MG	2	QL (60 caps / 30 days)
VYVANSE CAP 30MG	2	QL (60 caps / 30 days)
VYVANSE CAP 40MG	2	QL (60 caps / 30 days)
VYVANSE CAP 50MG	2	QL (60 caps / 30 days)
VYVANSE CAP 60MG	2	QL (60 caps / 30 days)
VYVANSE CAP 70MG	2	QL (60 caps / 30 days)
VYVANSE CHW 10MG	2	QL (60 tabs / 30 days)
VYVANSE CHW 20MG	2	QL (60 tabs / 30 days)
VYVANSE CHW 30MG	2	QL (60 tabs / 30 days)
VYVANSE CHW 40MG	2	QL (60 tabs / 30 days)
VYVANSE CHW 50MG	2	QL (60 tabs / 30 days)
VYVANSE CHW 60MG	2	QL (60 tabs / 30 days)
<i>zenzedi tab 2.5mg</i>	2	
<i>zenzedi tab 5mg</i>	2	
<i>zenzedi tab 7.5mg</i>	2	
<i>zenzedi tab 10mg</i>	2	
<i>zenzedi tab 15mg</i>	2	
<i>zenzedi tab 20mg</i>	2	
<i>zenzedi tab 30mg</i>	2	

ANALEPTICS

<i>caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)</i>	1	NM
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ANOREXIANTS NON-AMPHETAMINE

ADIPEX-P CAP 37.5MG	3	NM, PA
ADIPEX-P TAB 37.5MG	3	NM, PA

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Drug Name	Drug Tier	Requirements/Limits
<i>benzphetamine hcl tab 25 mg</i>	1	QL (90 tablets per 30 days), NM
<i>benzphetamine hcl tab 50 mg</i>	1	QL (90 tablets per 30 days), NM
<i>diethylpropion hcl tab 25 mg</i>	1	QL (90 tablets per 30 days), NM
<i>diethylpropion hcl tab er 24hr 75 mg</i>	1	QL (30 tablets per 30 days), NM
LOMAIRA TAB 8MG	3	NM, PA
<i>phendimetrazine tartrate cap er 24hr 105 mg</i>	1	QL (30 capsules per 30 days), NM
<i>phendimetrazine tartrate tab 35 mg</i>	1	QL (90 tablets per 30 days), NM
<i>phentermine hcl cap 15 mg</i>	1	QL (30 capsules per 30 days), NM
<i>phentermine hcl cap 30 mg</i>	1	NM
<i>phentermine hcl cap 37.5 mg</i>	1	QL (30 capsules per 30 days), NM
<i>phentermine hcl tab 37.5 mg</i>	1	QL (30 tablets per 30 days), NM
QSYMIA CAP 3.75-23	3	NM, PA
QSYMIA CAP 7.5-46MG	3	NM, PA
QSYMIA CAP 11.25-69	3	NM, PA
QSYMIA CAP 15-92MG	3	NM, PA
ANTI-OBESITY AGENTS		
BELVIQ TAB 10MG	3	NM, PA
BELVIQ XR TAB 20MG	3	NM, PA
CONTRAVE TAB 8-90MG	3	NM, PA
SAXENDA INJ 18MG/3ML	3	PA
XENICAL CAP 120MG	3	NM, PA
ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS		
<i>atomoxetine hcl cap 10 mg (base equiv)</i>	2	QL (90 caps / 30 days)
<i>atomoxetine hcl cap 18 mg (base equiv)</i>	2	QL (90 caps / 30 days)
<i>atomoxetine hcl cap 25 mg (base equiv)</i>	2	QL (90 caps / 30 days)
<i>atomoxetine hcl cap 40 mg (base equiv)</i>	2	QL (90 caps / 30 days)
<i>atomoxetine hcl cap 60 mg (base equiv)</i>	2	QL (90 caps / 30 days)
<i>atomoxetine hcl cap 80 mg (base equiv)</i>	2	QL (90 caps / 30 days)
<i>atomoxetine hcl cap 100 mg (base equiv)</i>	2	QL (90 caps / 30 days)
<i>clonidine hcl tab er 12hr 0.1 mg</i>	2	
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i>	2	
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	2	
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	2	
INTUNIV TAB 1MG	3	
INTUNIV TAB 2MG	3	
INTUNIV TAB 3MG	3	
INTUNIV TAB 4MG	3	
KAPVAY TAB 0.1 MG	3	
STRATTERA CAP 10MG	3	QL (90 caps / 30 days)
STRATTERA CAP 18MG	3	QL (90 caps / 30 days)
STRATTERA CAP 25MG	3	QL (90 caps / 30 days)
STRATTERA CAP 40MG	3	QL (90 caps / 30 days)
STRATTERA CAP 60MG	3	QL (90 caps / 30 days)
STRATTERA CAP 80MG	3	QL (90 caps / 30 days)
STRATTERA CAP 100MG	3	QL (90 caps / 30 days)

DOPAMINE AND NOREPINEPHRINE REUPTAKE INHIBITORS (DNRIS)

SUNOSI TAB 75MG	2	QL (60 tabs / 30 days), PA
SUNOSI TAB 150MG	2	QL (60 tabs / 30 days), PA

STIMULANTS - MISC.

ADHANSIA XR CAP 25MG	3	QL (60 caps / 30 days)
ADHANSIA XR CAP 35MG	3	QL (60 caps / 30 days)
ADHANSIA XR CAP 45MG	3	QL (60 caps / 30 days)
ADHANSIA XR CAP 55MG	3	QL (60 caps / 30 days)
ADHANSIA XR CAP 70MG	3	QL (60 caps / 30 days)
ADHANSIA XR CAP 85MG	3	QL (60 caps / 30 days)
APTENSIO XR CAP 10MG	3	QL (60 caps / 30 days)
APTENSIO XR CAP 15MG	3	QL (60 caps / 30 days)
APTENSIO XR CAP 20MG	3	QL (60 caps / 30 days)
APTENSIO XR CAP 30MG	3	QL (60 caps / 30 days)
APTENSIO XR CAP 40MG	3	QL (60 caps / 30 days)
APTENSIO XR CAP 50MG	3	QL (60 caps / 30 days)
APTENSIO XR CAP 60MG	3	QL (60 caps / 30 days)
<i>armodafinil tab 50 mg</i>	2	QL (60 tabs / 30 days)
<i>armodafinil tab 150 mg</i>	2	QL (60 tabs / 30 days)
<i>armodafinil tab 200 mg</i>	2	QL (60 tabs / 30 days)
<i>armodafinil tab 250 mg</i>	2	QL (60 tabs / 30 days)
CONCERTA TAB 18MG	3	QL (60 tabs / 30 days)
CONCERTA TAB 27MG	3	QL (60 tabs / 30 days)
CONCERTA TAB 36MG	3	QL (60 tabs / 30 days)

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Drug Name	Drug Tier	Requirements/Limits
CONCERTA TAB 54MG	3	QL (60 tabs / 30 days)
DAYTRANA DIS 10MG/9HR	3	
DAYTRANA DIS 15MG/9HR	3	
DAYTRANA DIS 20MG/9HR	3	
DAYTRANA DIS 30MG/9HR	3	
<i>dexmethylphenidate hcl cap er 24 hr 5 mg</i>	2	QL (60 caps / 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 10 mg</i>	2	QL (60 caps / 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 15 mg</i>	2	QL (60 caps / 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 20 mg</i>	2	QL (60 caps / 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 25 mg</i>	2	QL (60 caps / 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 30 mg</i>	2	QL (60 caps / 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 35 mg</i>	2	QL (60 caps / 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 40 mg</i>	2	QL (60 caps / 30 days)
<i>dexmethylphenidate hcl tab 2.5 mg</i>	2	
<i>dexmethylphenidate hcl tab 5 mg</i>	2	
<i>dexmethylphenidate hcl tab 10 mg</i>	2	
FOCALIN TAB 2.5MG	3	
FOCALIN TAB 5MG	3	
FOCALIN TAB 10MG	3	
FOCALIN XR CAP 5MG	3	QL (60 caps / 30 days)
FOCALIN XR CAP 10MG	3	QL (60 caps / 30 days)
FOCALIN XR CAP 15MG	3	QL (60 caps / 30 days)
FOCALIN XR CAP 20MG	3	QL (60 caps / 30 days)
FOCALIN XR CAP 25MG	3	QL (60 caps / 30 days)
FOCALIN XR CAP 30MG	3	QL (60 caps / 30 days)
FOCALIN XR CAP 35MG	3	QL (60 caps / 30 days)
FOCALIN XR CAP 40MG	3	QL (60 caps / 30 days)
JORNAY PM CAP 20MG ER	3	QL (60 capsules per 30 days)
JORNAY PM CAP 40MG ER	3	QL (60 capsules per 30 days)
JORNAY PM CAP 60MG ER	3	QL (60 capsules per 30 days)
JORNAY PM CAP 80MG ER	3	QL (60 capsules per 30 days)
JORNAY PM CAP 100MG ER	3	QL (60 capsules per 30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>metadate tab 20mg er</i>	2	QL (60 tabs / 30 days)
METHYLIN SOL 5MG/5ML	3	
METHYLIN SOL 10MG/5ML	3	
METHYLPHENID TAB 72MG ER	3	QL (60 tabs / 30 days)
<i>methylphenidate hcl cap er 10 mg (cd)</i>	2	QL (60 caps / 30 days)
<i>methylphenidate hcl cap er 20 mg (cd)</i>	2	QL (60 caps / 30 days)
<i>methylphenidate hcl cap er 24hr 10 mg (la)</i>	2	QL (60 caps / 30 days)
<i>methylphenidate hcl cap er 24hr 20 mg (la)</i>	2	QL (60 caps / 30 days)
<i>methylphenidate hcl cap er 24hr 30 mg (la)</i>	2	QL (60 caps / 30 days)
<i>methylphenidate hcl cap er 24hr 40 mg (la)</i>	2	QL (60 caps / 30 days)
<i>methylphenidate hcl cap er 24hr 60 mg (la)</i>	2	QL (60 caps / 30 days)
<i>methylphenidate hcl cap er 30 mg (cd)</i>	2	QL (60 caps / 30 days)
<i>methylphenidate hcl cap er 40 mg (cd)</i>	2	QL (60 caps / 30 days)
<i>methylphenidate hcl cap er 50 mg (cd)</i>	2	QL (60 caps / 30 days)
<i>methylphenidate hcl cap er 60 mg (cd)</i>	2	QL (60 caps / 30 days)
<i>methylphenidate hcl chew tab 2.5 mg</i>	1	
<i>methylphenidate hcl chew tab 5 mg</i>	1	
<i>methylphenidate hcl chew tab 10 mg</i>	1	
<i>methylphenidate hcl soln 5 mg/5ml</i>	2	
<i>methylphenidate hcl soln 10 mg/5ml</i>	2	
<i>methylphenidate hcl tab 5 mg</i>	1	
<i>methylphenidate hcl tab 10 mg</i>	1	
<i>methylphenidate hcl tab 20 mg</i>	1	
<i>methylphenidate hcl tab er 10 mg</i>	2	QL (60 tabs / 30 days)
<i>methylphenidate hcl tab er 20 mg</i>	2	QL (60 tabs / 30 days)
<i>methylphenidate hcl tab er 24hr 18 mg</i>	2	QL (60 tabs / 30 days)
<i>methylphenidate hcl tab er 24hr 27 mg</i>	2	QL (60 tabs / 30 days)
<i>methylphenidate hcl tab er 24hr 36 mg</i>	2	QL (60 tabs / 30 days)
<i>methylphenidate hcl tab er 24hr 54 mg</i>	2	QL (60 tabs / 30 days)
<i>methylphenidate hcl tab er osmotic release (osm) 18 mg</i>	2	QL (60 tabs / 30 days)
<i>methylphenidate hcl tab er osmotic release (osm) 27 mg</i>	2	QL (60 tabs / 30 days)
<i>methylphenidate hcl tab er osmotic release (osm) 36 mg</i>	2	QL (60 tabs / 30 days)
<i>methylphenidate hcl tab er osmotic release (osm) 54 mg</i>	2	QL (60 tabs / 30 days)
<i>modafinil tab 100 mg</i>	2	QL (60 tabs / 30 days)
<i>modafinil tab 200 mg</i>	2	QL (60 tabs / 30 days)

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Drug Name	Drug Tier	Requirements/Limits
PROVIGIL TAB 100MG	3	QL (60 tabs / 30 days)
PROVIGIL TAB 200MG	3	QL (60 tabs / 30 days)
QUILLIVANT SUS 25MG/5ML	3	QL (360 mL / 30 days)
RELEXXII TAB 72MG	3	QL (60 tabs / 30 days)
RITALIN LA CAP 10MG	3	QL (60 caps / 30 days)
RITALIN LA CAP 20MG	3	QL (60 caps / 30 days)
RITALIN LA CAP 30MG	3	QL (60 caps / 30 days)
RITALIN LA CAP 40MG	3	QL (60 caps / 30 days)
RITALIN TAB 5MG	3	
RITALIN TAB 10MG	3	
RITALIN TAB 20MG	3	

ALLERGENIC EXTRACTS/BIOLOGICALS MISC

ALLERGENIC EXTRACTS

GRASTEK SUB 2800BAU	3	PA
ODACTRA SUB	3	PA
ORALAIR SUB 300 IR	3	PA
PALFORZIA CAP ESCALAT	3	NM, PA
PALFORZIA CAP LEVEL 1	3	NM, PA
PALFORZIA CAP LEVEL 2	3	NM, PA
PALFORZIA CAP LEVEL 3	3	NM, PA
PALFORZIA CAP LEVEL 4	3	NM, PA
PALFORZIA CAP LEVEL 5	3	NM, PA
PALFORZIA CAP LEVEL 6	3	NM, PA
PALFORZIA CAP LEVEL 7	3	NM, PA
PALFORZIA CAP LEVEL 8	3	NM, PA
PALFORZIA CAP LEVEL 9	3	NM, PA
PALFORZIA CAP LEVEL 10	3	NM, PA
PALFORZIA POW LEVEL 11	3	PA
PALFORZIA POW LEVEL 11	3	NM, PA
RAGWITEK SUB	3	PA

AMINOGLYCOSIDES

AMINOGLYCOSIDES

<i>amikacin sulfate inj 1 gm/4ml (250 mg/ml)</i>	1	NM
<i>amikacin sulfate inj 500 mg/2ml (250 mg/ml)</i>	1	NM
BETHKIS NEB 300/4ML	3	SP, PA
<i>gentamicin sulfate inj 10 mg/ml</i>	1	NM
<i>gentamicin sulfate inj 40 mg/ml</i>	1	NM
KITABIS PAK NEB 300/5ML	3	SP, PA
<i>neomycin sulfate tab 500 mg</i>	1	NM
<i>paromomycin sulfate cap 250 mg</i>	2	NM
TOBI NEB 300/5ML	3	SP, PA
TOBI PODHALR CAP 28MG	3	SP, PA

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Drug Name	Drug Tier	Requirements/Limits
<i>tobramycin nebu soln 300 mg/5ml</i>	2	SP, PA
<i>tobramycin sulfate for inj 1.2 gm</i>	1	NM
<i>tobramycin sulfate inj 1.2 gm/30ml (40 mg/ml) (base equiv)</i>	1	NM
<i>tobramycin sulfate inj 2 gm/50ml (40 mg/ml) (base equiv)</i>	1	NM
<i>tobramycin sulfate inj 10 mg/ml (base equivalent)</i>	1	NM
<i>tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv)</i>	1	NM

ANALGESICS - ANTI-INFLAMMATORY

ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES

HUMIRA INJ 10/0.1ML	2	SP, PA; Preferred agent for all FDA approved indications.
HUMIRA INJ 10MG/0.2	2	SP, PA; Preferred agent for all FDA approved indications.
HUMIRA INJ 20/0.2ML	2	SP, PA; Preferred agent for all FDA approved indications.
HUMIRA INJ 40/0.4ML	2	SP, PA; Preferred agent for all FDA approved indications.
HUMIRA KIT 20MG/0.4	2	SP, PA; Preferred agent for all FDA approved indications.
HUMIRA KIT 40MG/0.8	2	SP, PA; Preferred agent for all FDA approved indications.
HUMIRA PEDIA INJ CROHNS	2	SP, PA; Preferred agent for all FDA approved indications.
HUMIRA PEN INJ 40/0.4ML	2	SP, PA; Preferred agent for all FDA approved indications.
HUMIRA PEN INJ 40MG/0.8	2	SP, PA; Preferred agent for all FDA approved indications.
HUMIRA PEN INJ CD/UC/HS	2	SP, PA; Preferred agent for all FDA approved indications.
HUMIRA PEN INJ PS/UV	2	SP, PA; Preferred agent for all FDA approved indications.

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Drug Name	Drug Tier	Requirements/Limits
HUMIRA PEN KIT CD/UC/HS	2	SP, PA; Preferred agent for all FDA approved indications.
HUMIRA PEN KIT PS/UV	2	SP, PA; Preferred agent for all FDA approved indications.
ANTIRHEUMATIC - ENZYME INHIBITORS		
RINVOQ TAB 15MG ER	2	SP, PA; Preferred agent for Rheumatoid Arthritis
XELJANZ TAB 5MG	2	SP, PA; Preferred agent for Ulcerative Colitis (after failure of Humira); Preferred agent for Rheumatoid Arthritis
XELJANZ TAB 10MG	2	SP, PA; Preferred agent for Ulcerative Colitis (after failure of Humira)
XELJANZ XR TAB 11MG	2	SP, PA; Preferred agent for Ulcerative Colitis (after failure of Humira); Preferred agent for Rheumatoid Arthritis
XELJANZ XR TAB 22MG	2	SP, PA; Preferred agent for Ulcerative Colitis (after failure of Humira)
ANTIRHEUMATIC ANTIMETABOLITES		
OTREXUP INJ 10MG	3	SP, PA
OTREXUP INJ 12.5/0.4	3	SP, PA
OTREXUP INJ 15MG	3	SP, PA
OTREXUP INJ 17.5/0.4	3	SP, PA
OTREXUP INJ 20MG	3	SP, PA
OTREXUP INJ 22.5/0.4	3	SP, PA
OTREXUP INJ 25MG	3	SP, PA
RASUVO INJ 7.5MG	3	SP, PA
RASUVO INJ 10MG	3	SP, PA
RASUVO INJ 12.5MG	3	SP, PA
RASUVO INJ 15MG	3	SP, PA
RASUVO INJ 17.5MG	3	SP, PA
RASUVO INJ 20MG	3	SP, PA
RASUVO INJ 22.5MG	3	SP, PA
RASUVO INJ 25MG	3	SP, PA
RASUVO INJ 30MG	3	SP, PA
GOLD COMPOUNDS		
RIDAURA CAP 3MG	2	

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Drug Name	Drug Tier	Requirements/Limits
INTERLEUKIN-1 RECEPTOR ANTAGONIST (IL-1RA)		
KINERET INJ	3	PA
INTERLEUKIN-6 RECEPTOR INHIBITORS		
ACTEMRA INJ 162/0.9	3	SP, PA
ACTEMRA INJ ACTPEN	3	SP, PA
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)		
CELEBREX CAP 50MG	3	
CELEBREX CAP 100MG	3	
CELEBREX CAP 200MG	3	
CELEBREX CAP 400MG	3	
<i>celecoxib cap 50 mg</i>	1	
<i>celecoxib cap 100 mg</i>	1	
<i>celecoxib cap 200 mg</i>	1	
<i>celecoxib cap 400 mg</i>	1	
DAYPRO TAB 600MG	3	
<i>diclofenac potassium tab 50 mg</i>	1	
<i>diclofenac sodium tab delayed release 25 mg</i>	1	
<i>diclofenac sodium tab delayed release 50 mg</i>	1	
<i>diclofenac sodium tab delayed release 75 mg</i>	1	
<i>diclofenac sodium tab er 24hr 100 mg</i>	1	
<i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg</i>	2	
<i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg</i>	2	
EC-NAPROSYN TAB 375MG	3	
EC-NAPROXEN TAB 375MG	3	
EC-NAPROXEN TAB 500MG	3	
<i>etodolac cap 200 mg</i>	1	
<i>etodolac cap 300 mg</i>	1	
<i>etodolac tab 400 mg</i>	1	
<i>etodolac tab 500 mg</i>	1	
<i>etodolac tab er 24hr 400 mg</i>	1	
<i>etodolac tab er 24hr 500 mg</i>	1	
<i>etodolac tab er 24hr 600 mg</i>	1	
FELDENE CAP 10MG	3	
FELDENE CAP 20MG	3	
<i>fenoprofen calcium tab 600 mg</i>	2	
<i>flurbiprofen tab 50 mg</i>	1	
<i>flurbiprofen tab 100 mg</i>	1	
<i>ibu tab 400mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>ibu tab 600mg</i>	1	
<i>ibu tab 800mg</i>	1	
<i>ibuprofen tab 400 mg</i>	1	
<i>ibuprofen tab 600 mg</i>	1	
<i>ibuprofen tab 800 mg</i>	1	
<i>indomethacin cap 25 mg</i>	1	
<i>indomethacin cap 50 mg</i>	1	
<i>indomethacin cap er 75 mg</i>	1	
<i>ketoprofen cap er 24hr 200 mg</i>	2	
<i>ketorolac tromethamine inj 30 mg/ml</i>	1	NM
<i>ketorolac tromethamine tab 10 mg</i>	2	NM
<i>meclofenamate sodium cap 50 mg</i>	2	
<i>meclofenamate sodium cap 100 mg</i>	2	
<i>mefenamic acid cap 250 mg</i>	2	
<i>meloxicam tab 7.5 mg</i>	1	
<i>meloxicam tab 15 mg</i>	1	
MOBIC TAB 7.5MG	3	
MOBIC TAB 15MG	3	
<i>nabumetone tab 500 mg</i>	1	
<i>nabumetone tab 750 mg</i>	1	
NALFON TAB 600MG	3	
NAPROSYN SUS 125/5ML	3	
<i>naproxen dr tab 375mg</i>	1	
<i>naproxen dr tab 500mg</i>	1	
<i>naproxen sodium tab 275 mg</i>	1	
<i>naproxen sodium tab 550 mg</i>	1	
<i>naproxen tab 250 mg</i>	1	
<i>naproxen tab 375 mg</i>	1	
<i>naproxen tab 500 mg</i>	1	
<i>oxaprozin tab 600 mg</i>	1	
<i>piroxicam cap 10 mg</i>	1	
<i>piroxicam cap 20 mg</i>	1	
SPRIX SPR 15.75MG	3	QL (5 bottles / 23 days), NM, PA
<i>sulindac tab 150 mg</i>	1	
<i>sulindac tab 200 mg</i>	1	
<i>tolmetin sodium cap 400 mg</i>	1	
<i>tolmetin sodium tab 600 mg</i>	1	

PHOSPHODIESTERASE 4 (PDE4) INHIBITORS

OTEZLA TAB 10/20/30	2	SP, NM, PA; Preferred agent for Psoriasis and Psoriatic Arthritis
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Drug Name	Drug Tier	Requirements/Limits
OTEZLA TAB 30MG	2	SP, PA; Preferred agent for Psoriasis and Psoriatic Arthritis
PYRIMIDINE SYNTHESIS INHIBITORS		
ARAVA TAB 10MG	3	
ARAVA TAB 20MG	3	
<i>leflunomide tab 10 mg</i>	1	
<i>leflunomide tab 20 mg</i>	1	
SELECTIVE COSTIMULATION MODULATORS		
ORENCIA CLCK INJ 125MG/ML	2	SP, PA; Preferred agent for Rheumatoid Arthritis
ORENCIA INJ 50/0.4	2	SP, PA; Preferred agent for Rheumatoid Arthritis
ORENCIA INJ 87.5/0.7	2	SP, PA; Preferred agent for Rheumatoid Arthritis
ORENCIA INJ 125MG/ML	2	SP, PA; Preferred agent for Rheumatoid Arthritis
SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS		
ENBREL INJ 25/0.5ML	2	SP, PA; Preferred agent for Ankylosing Spondylitis, Psoriatic Arthritis, and Rheumatoid Arthritis
ENBREL INJ 25MG	2	SP, PA; Preferred agent for Ankylosing Spondylitis, Psoriatic Arthritis, and Rheumatoid Arthritis
ENBREL INJ 50MG/ML	2	SP, PA; Preferred agent for Ankylosing Spondylitis, Psoriatic Arthritis, and Rheumatoid Arthritis
ENBREL MINI INJ 50MG/ML	2	SP, PA; Preferred agent for Ankylosing Spondylitis, Psoriatic Arthritis, and Rheumatoid Arthritis
ENBREL SRCLK INJ 50MG/ML	2	SP, PA; Preferred agent for Ankylosing Spondylitis, Psoriatic Arthritis, and Rheumatoid Arthritis

Drug Name	Drug Tier	Requirements/Limits
ANALGESICS - NONNARCOTIC		
ANALGESIC COMBINATIONS		

<i>butalbital-acetaminophen tab 50-300 mg</i>	1	NM
<i>butalbital-acetaminophen tab 50-325 mg</i>	1	NM
<i>butalbital-acetaminophen-caffeine cap 50-300-40 mg</i>	1	NM
<i>butalbital-acetaminophen-caffeine tab 50-325-40 mg</i>	1	NM
<i>butalbital-aspirin-caffeine cap 50-325-40 mg</i>	1	NM
ESGIC TAB	3	NM
<i>tencon tab 50-325mg</i>	1	NM

SALICYLATES

<i>aspir-low tab 81mg ec</i>	1	AGE, NM
<i>aspirin adlt tab 81mg ec</i>	1	AGE, NM
<i>aspirin chld chw 81mg</i>	1	AGE, NM
<i>aspirin chw 81mg</i>	1	AGE, NM
<i>aspirin low chw 81mg</i>	1	AGE, NM
<i>aspirin low tab 81mg ec</i>	1	AGE, NM
<i>aspirin tab delayed release 81 mg</i>	1	AGE, NM
<i>aspirin-81 chw 81mg</i>	1	AGE, NM
<i>bayer low chw 81mg</i>	1	NM
<i>bayer low chw 81mg</i>	1	AGE, NM
<i>bayer low tab 81mg ec</i>	1	AGE, NM
<i>child asa chw 81mg</i>	1	AGE, NM
<i>child asa ls chw 81mg</i>	1	AGE, NM
<i>choline & magnesium salicylates liq 500 mg/5ml</i>	1	NM
<i>cvs aspirin tab 81mg ec</i>	1	AGE, NM
<i>diflunisal tab 500 mg</i>	1	
<i>ecotrin low tab 81mg ec</i>	1	AGE, NM
<i>eq child asa chw 81mg</i>	1	AGE, NM
<i>eq aspirin chw 81mg</i>	1	AGE, NM
<i>gnp aspirin chw 81mg</i>	1	AGE, NM
<i>gnp aspirin tab 81mg ec</i>	1	AGE, NM
<i>hm aspirin chw 81mg</i>	1	AGE, NM
<i>kls aspirin tab 81mg ec</i>	1	AGE, NM
<i>kp aspirin tab 81mg ec</i>	1	AGE, NM
<i>low dose asa tab 81mg</i>	1	AGE, NM
<i>miniprin low tab 81mg ec</i>	1	AGE, NM
<i>px aspirin chw 81mg</i>	1	AGE, NM
<i>px aspirin tab 81mg ec</i>	1	AGE, NM
<i>qc child asa chw 81mg</i>	1	AGE, NM

Drug Name	Drug Tier	Requirements/Limits
<i>ra aspirin chw 81mg</i>	1	AGE, NM
<i>ra aspirin tab 81mg ec</i>	1	AGE, NM
<i>ra child asa chw 81mg</i>	1	AGE, NM
<i>salsalate tab 500 mg</i>	1	
<i>salsalate tab 750 mg</i>	1	
<i>sb child asa chw 81mg</i>	1	AGE, NM
<i>sm aspirin chw 81mg</i>	1	AGE, NM
<i>sm aspirin tab 81mg ec</i>	1	AGE, NM
<i>sm child asa chw 81mg</i>	1	AGE, NM
<i>st joseph chw low 81mg</i>	1	AGE, NM
<i>tgt aspirin chw 81mg</i>	1	AGE, NM
<i>tgt aspirin chw child</i>	1	AGE, NM
<i>tgt aspirin tab 81mg</i>	1	AGE, NM
<i>tgt aspirin tab 81mg ec</i>	1	AGE, NM

ANALGESICS - OPIOID

OPIOID AGONISTS

ABSTRAL SUB 100MCG	3	QL (60 tabs / 30 days), NM, PA
ABSTRAL SUB 200MCG	3	QL (60 tabs / 30 days), NM, PA
ABSTRAL SUB 400MCG	3	QL (60 tabs / 30 days), NM, PA
ABSTRAL SUB 600MCG	3	QL (60 tabs / 30 days), NM, PA
ABSTRAL SUB 800MCG	3	QL (60 tabs / 30 days), NM, PA
ACTIQ LOZ 200MCG	3	QL (60 lozenges / 30 days), NM, PA
ACTIQ LOZ 400MCG	3	QL (60 ea / 30 days), NM, PA
ACTIQ LOZ 600MCG	3	QL (60 ea / 30 days), NM, PA
ACTIQ LOZ 800MCG	3	QL (60 ea / 30 days), NM, PA
ACTIQ LOZ 1200MCG	3	QL (60 ea / 30 days), NM, PA
ACTIQ LOZ 1600MCG	3	QL (60 lozenges / 30 days), NM, PA
ARYMO ER TAB 15MG	3	QL (90 ea / 30 days), NM, PA, ST
ARYMO ER TAB 30MG	3	QL (90 ea / 30 days), NM, PA, ST
ARYMO ER TAB 60MG	3	QL (90 ea / 30 days), NM, PA, ST

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Drug Name	Drug Tier	Requirements/Limits
CODEINE SULF TAB 30MG	3	NM
CODEINE SULF TAB 60MG	3	NM
<i>codeine sulfate tab 30 mg</i>	1	NM
CONZIP CAP 100MG	3	QL (30 caps / 30 days), NM
CONZIP CAP 200MG	3	QL (30 caps / 30 days), NM
CONZIP CAP 300MG	3	QL (30 caps / 30 days), NM
DEMEROL INJ 25MG/0.5	3	NM
DEMEROL INJ 75MG/1.5	3	NM
DEMEROL INJ 75MG/ML	3	NM
DEMEROL INJ 100/2ML	3	NM
DEMEROL INJ 100MG/ML	3	NM
DILAUDID LIQ 1MG/ML	3	NM
DILAUDID TAB 2MG	3	NM
DILAUDID TAB 4MG	3	NM
DILAUDID TAB 8MG	3	NM
DOLOPHINE TAB 5MG	3	NM, PA
DOLOPHINE TAB 10MG	3	NM, PA
DURAGESIC DIS 12MCG/HR	3	QL (20 patches / 30 days), NM
DURAGESIC DIS 25MCG/HR	3	QL (20 patches / 30 days), NM
DURAGESIC DIS 50MCG/HR	3	QL (20 patches / 30 days), NM
DURAGESIC DIS 75MCG/HR	3	QL (20 patches / 30 days), NM
DURAGESIC DIS 100MCG/H	3	QL (20 patches / 30 days), NM
EMBEDA CAP 20-0.8MG	3	QL (60 capsules per 30 days), NM, PA, ST
EMBEDA CAP 30-1.2MG	3	QL (60 capsules per 30 days), NM, PA, ST
EMBEDA CAP 50-2MG	3	QL (60 capsules per 30 days), NM, PA, ST
EMBEDA CAP 60-2.4MG	3	QL (60 capsules per 30 days), NM, PA, ST
EMBEDA CAP 80-3.2MG	3	QL (60 capsules per 30 days), NM, PA, ST
EMBEDA CAP 100-4MG	3	QL (60 capsules per 30 days), NM, PA, ST
<i>fentanyl citrate lozenge on a handle 200 mcg</i>	2	QL (60 ea / 30 days), NM, PA

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<i>fentanyl citrate lozenge on a handle 400 mcg</i>	2	QL (60 ea / 30 days), NM, PA
<i>fentanyl citrate lozenge on a handle 600 mcg</i>	2	QL (60 ea / 30 days), NM, PA
<i>fentanyl citrate lozenge on a handle 800 mcg</i>	2	QL (60 ea / 30 days), NM, PA
<i>fentanyl citrate lozenge on a handle 1200 mcg</i>	2	QL (60 ea / 30 days), NM, PA
<i>fentanyl citrate lozenge on a handle 1600 mcg</i>	2	QL (60 ea / 30 days), NM, PA
<i>fentanyl td patch 72hr 12 mcg/hr</i>	2	QL (20 patches / 30 days), NM
<i>fentanyl td patch 72hr 25 mcg/hr</i>	2	QL (20 patches / 30 days), NM
<i>fentanyl td patch 72hr 50 mcg/hr</i>	2	QL (20 patches / 30 days), NM
<i>fentanyl td patch 72hr 75 mcg/hr</i>	2	QL (20 patches / 30 days), NM
<i>fentanyl td patch 72hr 100 mcg/hr</i>	2	QL (20 patches / 30 days), NM
FENTORA TAB 100MCG	3	QL (60 ea / 30 days), NM, PA
FENTORA TAB 200MCG	3	QL (60 ea / 30 days), NM, PA
FENTORA TAB 400MCG	3	QL (60 tabs / 30 days), NM, PA
FENTORA TAB 600MCG	3	QL (60 tabs / 30 days), NM, PA
FENTORA TAB 800MCG	3	QL (60 tabs / 30 days), NM, PA
<i>hydrocodone bitartrate cap er 12hr abuse-deterrent 10 mg</i>	2	QL (60 caps / 30 days), NM, ST
<i>hydrocodone bitartrate cap er 12hr abuse-deterrent 15 mg</i>	2	QL (60 caps / 30 days), NM, ST
<i>hydrocodone bitartrate cap er 12hr abuse-deterrent 20 mg</i>	2	QL (60 caps / 30 days), NM, ST
<i>hydrocodone bitartrate cap er 12hr abuse-deterrent 30 mg</i>	2	QL (60 caps / 30 days), NM, ST
<i>hydrocodone bitartrate cap er 12hr abuse-deterrent 40 mg</i>	2	QL (60 caps / 30 days), NM, ST
<i>hydrocodone bitartrate cap er 12hr abuse-deterrent 50 mg</i>	2	QL (60 caps / 30 days), NM, ST
HYDROMORPHON SUP 3MG	3	NM
<i>hydromorphone hcl liqd 1 mg/ml</i>	1	NM
<i>hydromorphone hcl tab 2 mg</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>hydromorphone hcl tab 4 mg</i>	1	NM
<i>hydromorphone hcl tab 8 mg</i>	1	NM
HYSINGLA ER TAB 20 MG	3	QL (30 tabs / 30 days), NM, PA, ST
HYSINGLA ER TAB 30 MG	3	QL (30 tabs / 30 days), NM, PA, ST
HYSINGLA ER TAB 40 MG	3	QL (30 tabs / 30 days), NM, PA, ST
HYSINGLA ER TAB 60 MG	3	QL (30 tabs / 30 days), NM, PA, ST
HYSINGLA ER TAB 80 MG	3	QL (30 tabs / 30 days), NM, PA, ST
HYSINGLA ER TAB 100 MG	3	QL (30 tabs / 30 days), NM, PA, ST
HYSINGLA ER TAB 120 MG	3	QL (30 tabs / 30 days), NM, PA, ST
KADIAN CAP 10MG ER	3	QL (90 caps / 30 days), NM, PA, ST
KADIAN CAP 30MG ER	3	QL (90 caps / 30 days), NM, PA, ST
KADIAN CAP 40MG ER	3	QL (90 caps / 30 days), NM, PA, ST
KADIAN CAP 50MG ER	3	QL (90 caps / 30 days), NM, PA, ST
KADIAN CAP 200MG ER	3	QL (90 caps / 30 days), NM, PA, ST
LAZANDA SPR 100MCG	3	QL (7 bottles (56 doses) per 30 days), NM, PA
LAZANDA SPR 300MCG	3	QL (7 bottles (56 doses) per 30 days), NM, PA
LAZANDA SPR 400MCG	3	QL (7 bottles (56 doses) per 30 days), NM, PA
<i>meperidine hcl oral soln 50 mg/5ml</i>	1	NM
<i>meperidine hcl tab 50 mg</i>	1	NM
<i>meperidine hcl tab 100 mg</i>	1	NM
<i>methadone hcl conc 10 mg/ml</i>	2	NM, PA
<i>methadone hcl inj 10 mg/ml</i>	2	NM, PA
<i>methadone hcl soln 5 mg/5ml</i>	2	NM, PA
<i>methadone hcl soln 10 mg/5ml</i>	2	NM, PA
<i>methadone hcl tab 5 mg</i>	2	NM, PA
<i>methadone hcl tab 10 mg</i>	2	NM, PA
<i>methadone hcl tab for oral susp 40 mg</i>	2	NM, PA
<i>methadose tab 40mg</i>	2	NM, PA
<i>mitigo inj 10mg/ml</i>	2	NM
<i>mitigo inj 25mg/ml</i>	2	NM

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Drug Name	Drug Tier	Requirements/Limits
MORPHABOND TAB 15MG ER	3	QL (90 tabs / 30 days), NM, PA, ST
MORPHABOND TAB 30MG ER	3	QL (90 tabs / 30 days), NM, PA, ST
MORPHABOND TAB 60MG ER	3	QL (90 tabs / 30 days), NM, PA, ST
MORPHABOND TAB 100MG ER	3	QL (90 tabs / 30 days), NM, PA, ST
<i>morphine sulfate beads cap er 24hr 30 mg</i>	2	QL (30 caps / 30 days), NM, PA, ST
<i>morphine sulfate beads cap er 24hr 45 mg</i>	2	QL (30 caps / 30 days), NM, PA, ST
<i>morphine sulfate beads cap er 24hr 60 mg</i>	2	QL (30 caps / 30 days), NM, PA, ST
<i>morphine sulfate beads cap er 24hr 75 mg</i>	2	QL (30 caps / 30 days), NM, PA, ST
<i>morphine sulfate beads cap er 24hr 90 mg</i>	2	QL (30 caps / 30 days), NM, PA, ST
<i>morphine sulfate beads cap er 24hr 120 mg</i>	2	QL (30 caps / 30 days), NM, PA, ST
<i>morphine sulfate cap er 24hr 10 mg</i>	2	QL (90 caps / 30 days), NM, PA, ST
<i>morphine sulfate cap er 24hr 20 mg</i>	2	QL (90 caps / 30 days), NM, PA, ST
<i>morphine sulfate cap er 24hr 30 mg</i>	2	QL (90 caps / 30 days), NM, PA, ST
<i>morphine sulfate cap er 24hr 40 mg</i>	2	QL (90 caps / 30 days), NM, PA, ST
<i>morphine sulfate cap er 24hr 50 mg</i>	2	QL (90 caps / 30 days), NM, PA, ST
<i>morphine sulfate cap er 24hr 60 mg</i>	2	QL (90 caps / 30 days), NM, PA, ST
<i>morphine sulfate cap er 24hr 80 mg</i>	2	QL (90 caps / 30 days), NM, PA, ST
<i>morphine sulfate cap er 24hr 100 mg</i>	2	QL (90 caps / 30 days), NM, PA, ST
<i>morphine sulfate oral soln 10 mg/5ml</i>	1	NM
<i>morphine sulfate oral soln 20 mg/5ml</i>	1	NM
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	1	NM
<i>morphine sulfate suppos 5 mg</i>	2	NM
<i>morphine sulfate suppos 10 mg</i>	2	NM
<i>morphine sulfate suppos 20 mg</i>	2	NM
<i>morphine sulfate suppos 30 mg</i>	2	NM
<i>morphine sulfate tab 15 mg</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate tab 30 mg</i>	1	NM
<i>morphine sulfate tab er 15 mg</i>	2	QL (90 tabs / 30 days), NM, PA, ST
<i>morphine sulfate tab er 30 mg</i>	2	QL (90 tabs / 30 days), NM, PA, ST
<i>morphine sulfate tab er 60 mg</i>	2	QL (90 tabs / 30 days), NM, PA, ST
<i>morphine sulfate tab er 100 mg</i>	2	QL (90 tabs / 30 days), NM, PA, ST
<i>morphine sulfate tab er 200 mg</i>	2	QL (90 tabs / 30 days), NM, PA, ST
MS CONTIN TAB 15MG ER	3	QL (90 tabs / 30 days), NM, PA, ST
MS CONTIN TAB 30MG ER	3	QL (90 tabs / 30 days), NM, PA, ST
MS CONTIN TAB 60MG ER	3	QL (90 tabs / 30 days), NM, PA, ST
MS CONTIN TAB 100MG ER	3	QL (90 tabs / 30 days), NM, PA, ST
MS CONTIN TAB 200MG ER	3	QL (90 tabs / 30 days), NM, PA, ST
NUCYNTA ER TAB 50MG	3	QL (60 tabs / 30 days), NM
NUCYNTA ER TAB 100MG	3	QL (60 tabs / 30 days), NM
NUCYNTA ER TAB 150MG	3	QL (60 tabs / 30 days), NM
NUCYNTA ER TAB 200MG	3	QL (60 tablets per 30 days), NM
NUCYNTA ER TAB 250MG	3	QL (60 tablets per 30 days), NM
NUCYNTA ER TAB 250MG	3	QL (60 tabs / 30 days), NM
NUCYNTA TAB 50MG	3	NM
NUCYNTA TAB 75MG	3	NM
NUCYNTA TAB 100MG	3	NM
OPANA TAB 5MG	3	NM
OPANA TAB 10MG	3	NM
<i>oxycodone hcl cap 5 mg</i>	1	NM
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	1	NM
<i>oxycodone hcl soln 5 mg/5ml</i>	1	NM
<i>oxycodone hcl tab 5 mg</i>	1	NM
<i>oxycodone hcl tab 10 mg</i>	1	NM
<i>oxycodone hcl tab 15 mg</i>	1	NM

PA - Prior Authorization **QL** - Quantity Limits **ST** - Step Therapy **NM** - Not available at mail-order **SP** - Specialty **AGE** - Age Limit ****** - Subject to medical or pharmacy diabetic copay per contract/rider **LA** - Limited Access **DL** - Medication Restricted to a 30 day supply

Drug Name	Drug Tier	Requirements/Limits
<i>oxycodone hcl tab 20 mg</i>	1	NM
<i>oxycodone hcl tab 30 mg</i>	1	NM
<i>oxycodone hcl tab er 12hr deter 10 mg</i>	2	QL (90 tabs / 30 days), NM, PA, ST
<i>oxycodone hcl tab er 12hr deter 15 mg</i>	2	QL (90 tabs / 30 days), NM, PA, ST
<i>oxycodone hcl tab er 12hr deter 20 mg</i>	2	QL (90 tabs / 30 days), NM, PA, ST
<i>oxycodone hcl tab er 12hr deter 30 mg</i>	2	QL (90 tabs / 30 days), NM, PA, ST
<i>oxycodone hcl tab er 12hr deter 40 mg</i>	2	QL (90 tabs / 30 days), NM, PA, ST
<i>oxycodone hcl tab er 12hr deter 60 mg</i>	2	QL (90 tabs / 30 days), NM, PA, ST
<i>oxycodone hcl tab er 12hr deter 80 mg</i>	2	QL (90 tabs / 30 days), NM, PA, ST
OXYCONTIN TAB 10MG CR	3	QL (90 tabs / 30 days), NM, PA, ST
OXYCONTIN TAB 15MG CR	3	QL (90 tabs / 30 days), NM, PA, ST
OXYCONTIN TAB 20MG CR	3	QL (90 tabs / 30 days), NM, PA, ST
OXYCONTIN TAB 30MG CR	3	QL (90 tabs / 30 days), NM, PA, ST
OXYCONTIN TAB 40MG CR	3	QL (90 tabs / 30 days), NM, PA, ST
OXYCONTIN TAB 60MG CR	3	QL (90 tabs / 30 days), NM, PA, ST
OXYCONTIN TAB 80MG CR	3	QL (90 tabs / 30 days), NM, PA, ST
<i>oxymorphone hcl tab 5 mg</i>	2	NM
<i>oxymorphone hcl tab 10 mg</i>	2	NM
<i>oxymorphone hcl tab er 12hr 5 mg</i>	2	QL (90 tabs / 30 days), NM, PA, ST
<i>oxymorphone hcl tab er 12hr 7.5 mg</i>	2	QL (90 tabs / 30 days), NM, PA, ST
<i>oxymorphone hcl tab er 12hr 10 mg</i>	2	QL (90 tabs / 30 days), NM, PA, ST
<i>oxymorphone hcl tab er 12hr 15 mg</i>	2	QL (90 tabs / 30 days), NM, PA, ST
<i>oxymorphone hcl tab er 12hr 20 mg</i>	2	QL (90 tabs / 30 days), NM, PA, ST
<i>oxymorphone hcl tab er 12hr 30 mg</i>	2	QL (90 tabs / 30 days), NM, PA, ST

Drug Name	Drug Tier	Requirements/Limits
<i>oxymorphone hcl tab er 12hr 40 mg</i>	2	QL (90 tabs / 30 days), NM, PA, ST
ROXICODONE TAB 5MG	3	NM
ROXICODONE TAB 15MG	3	NM
ROXICODONE TAB 30MG	3	NM
<i>tramadol hcl cap er 24hr biphasic release 100 mg</i>	2	QL (30 caps / 30 days), NM
<i>tramadol hcl cap er 24hr biphasic release 150 mg</i>	2	QL (30 tablets per 30 days), NM
<i>tramadol hcl cap er 24hr biphasic release 200 mg</i>	2	QL (30 caps / 30 days), NM
<i>tramadol hcl cap er 24hr biphasic release 300 mg</i>	2	QL (30 caps / 30 days), NM
<i>tramadol hcl tab 50 mg</i>	1	NM
<i>tramadol hcl tab 100 mg</i>	3	NM
<i>tramadol hcl tab er 24hr 100 mg</i>	1	QL (30 tabs / 30 days), NM
<i>tramadol hcl tab er 24hr 200 mg</i>	1	QL (30 tabs / 30 days), NM
<i>tramadol hcl tab er 24hr 300 mg</i>	1	QL (30 tabs / 30 days), NM
<i>tramadol hcl tab er 24hr biphasic release 100 mg</i>	1	QL (30 tabs / 30 days), NM
<i>tramadol hcl tab er 24hr biphasic release 200 mg</i>	1	QL (30 tabs / 30 days), NM
<i>tramadol hcl tab er 24hr biphasic release 300 mg</i>	1	QL (30 tabs / 30 days), NM
ULTRAM TAB 50MG	3	NM
XTAMPZA ER CAP 9MG	3	QL (60 caps / 30 days), NM, PA, ST
XTAMPZA ER CAP 13.5MG	3	QL (60 caps / 30 days), NM, PA, ST
XTAMPZA ER CAP 18MG	3	QL (60 caps / 30 days), NM, PA, ST
XTAMPZA ER CAP 27MG	3	QL (60 caps / 30 days), NM, PA, ST
XTAMPZA ER CAP 36MG	3	QL (60 caps / 30 days), NM, PA, ST
ZOHYDRO ER CAP 10MG	3	QL (60 caps / 30 days), NM, ST
ZOHYDRO ER CAP 15MG	3	QL (60 caps / 30 days), NM, ST
ZOHYDRO ER CAP 20MG	3	QL (60 caps / 30 days), NM, ST

Drug Name	Drug Tier	Requirements/Limits
ZOHYDRO ER CAP 30MG	3	QL (60 caps / 30 days), NM, ST
ZOHYDRO ER CAP 40MG	3	QL (60 caps / 30 days), NM, ST
ZOHYDRO ER CAP 50MG	3	QL (60 caps / 30 days), NM, ST

OPIOID COMBINATIONS

<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	1	NM
<i>acetaminophen w/ codeine tab 300-15 mg</i>	1	NM
<i>acetaminophen w/ codeine tab 300-30 mg</i>	1	NM
<i>acetaminophen w/ codeine tab 300-60 mg</i>	1	NM
<i>butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg</i>	1	NM
<i>butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg</i>	1	NM
<i>endocet tab 2.5-325</i>	1	NM
<i>endocet tab 5-325mg</i>	1	NM
<i>endocet tab 7.5-325</i>	1	NM
<i>endocet tab 10-325mg</i>	1	NM
HYDRO/ACETA SOL 10-325MG	3	NM
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	1	NM
<i>hydrocodone-acetaminophen tab 5-300 mg</i>	1	NM
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	1	NM
<i>hydrocodone-acetaminophen tab 7.5-300 mg</i>	1	NM
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	1	NM
<i>hydrocodone-acetaminophen tab 10-300 mg</i>	1	NM
<i>hydrocodone-acetaminophen tab 10-325 mg</i>	1	NM
<i>hydrocodone-ibuprofen tab 5-200 mg</i>	1	NM
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>	1	NM
<i>hydrocodone-ibuprofen tab 10-200 mg</i>	1	NM
<i>lorcet hd tab 10-325mg</i>	1	NM
<i>lorcet plus tab 7.5-325</i>	1	NM
<i>lorcet tab 5-325mg</i>	1	NM
LORTAB ELX 10-300MG	3	NM
NORCO TAB 5-325MG	3	NM
NORCO TAB 7.5-325	3	NM
NORCO TAB 10-325MG	3	NM

Drug Name	Drug Tier	Requirements/Limits
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	1	NM
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	1	NM
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	1	NM
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	1	NM
<i>oxycodone-aspirin tab 4.8355-325 mg</i>	1	NM
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	1	NM
TYLENOL/COD TAB #3	3	NM
TYLENOL/COD TAB #4	3	NM
ULTRACET TAB 37.5-325	3	NM
<i>vicodin hp tab 10-300mg</i>	1	NM

OPIOID PARTIAL AGONISTS

BELBUCA MIS 75MCG	3	QL (60 films / 30 days), NM
BELBUCA MIS 150MCG	3	QL (60 films / 30 days), NM
BELBUCA MIS 300MCG	3	QL (60 films / 30 days), NM
BELBUCA MIS 450MCG	3	QL (60 films / 30 days), NM
BELBUCA MIS 600MCG	3	QL (60 films / 30 days), NM
BELBUCA MIS 750MCG	3	QL (60 films / 30 days), NM
BELBUCA MIS 900MCG	3	QL (60 films / 30 days), NM
BUNAVAIL MIS 2.1-0.3	3	NM
BUNAVAIL MIS 4.2-0.7	3	NM
BUNAVAIL MIS 6.3-1MG	3	NM
BUPRENEX INJ 0.3MG/ML	3	NM
<i>buprenorphine hcl inj 0.3 mg/ml (base equiv)</i>	2	NM
<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	2	NM
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	2	NM
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	2	NM
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	2	NM
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	2	NM
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	2	NM

Drug Name	Drug Tier	Requirements/Limits
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	2	NM
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	2	NM
<i>buprenorphine td patch weekly 5 mcg/hr</i>	2	QL (4 patches / 21 days), NM, PA, ST
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	2	QL (4 patches / 21 days), NM, PA, ST
<i>buprenorphine td patch weekly 10 mcg/hr</i>	2	QL (4 patches / 21 days), NM, PA, ST
<i>buprenorphine td patch weekly 15 mcg/hr</i>	2	QL (4 patches / 21 days), NM, PA, ST
<i>buprenorphine td patch weekly 20 mcg/hr</i>	2	QL (4 patches / 21 days), NM, PA, ST
<i>butorphanol tartrate nasal soln 10 mg/ml</i>	2	NM
BUTRANS DIS 5MCG/HR	3	QL (4 patches / 21 days), NM, PA, ST
BUTRANS DIS 7.5/HR	3	QL (4 patches / 21 days), NM, PA, ST
BUTRANS DIS 10MCG/HR	3	QL (4 patches / 21 days), NM, PA, ST
BUTRANS DIS 15MCG/HR	3	QL (4 patches / 21 days), NM, PA, ST
BUTRANS DIS 20MCG/HR	3	QL (4 patches / 21 days), NM, PA, ST
<i>nalbuphine hcl inj 10 mg/ml</i>	2	NM
<i>nalbuphine hcl inj 20 mg/ml</i>	2	NM
<i>pentazocine w/ naloxone tab 50-0.5 mg</i>	1	NM
ZUBSOLV SUB 0.7-0.18	3	NM
ZUBSOLV SUB 1.4-0.36	3	NM
ZUBSOLV SUB 2.9-0.71	3	NM
ZUBSOLV SUB 5.7-1.4	3	NM
ZUBSOLV SUB 8.6-2.1	3	NM
ZUBSOLV SUB 11.4-2.9	3	NM

ANDROGENS-ANABOLIC ANABOLIC STEROIDS

ANADROL-50 TAB 50MG	3	QL (30 tabs / 30 days), NM, PA
<i>oxandrolone tab 2.5 mg</i>	2	QL (60 tabs / 30 days), NM
<i>oxandrolone tab 10 mg</i>	2	QL (60 tabs / 30 days), NM

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Drug Name	Drug Tier	Requirements/Limits
ANDROGENS		
ANDRODERM DIS 2MG/24HR	3	QL (30 patches / 30 days), PA
ANDRODERM DIS 4MG/24HR	3	QL (30 ea / 30 days), PA
ANDROGEL GEL 1%(25MG)	3	QL (150 gm / 30 days)
ANDROGEL GEL 1%(50MG)	3	QL (150 gm / 30 days)
ANDROGEL GEL 1.62%	3	QL (150 gm / 30 days)
<i>danazol cap 50 mg</i>	1	NM
<i>danazol cap 100 mg</i>	1	NM
<i>danazol cap 200 mg</i>	1	NM
DEPO-TESTOST INJ 100MG/ML	3	QL (1 vial / 30 days), NM, PA
DEPO-TESTOST INJ 200MG/ML	3	QL (10 vials / 30 days), NM, PA
FORTESTA GEL 10MG/ACT	3	QL (60 gm / 30 days), PA
JATENZO CAP 158MG	3	PA
JATENZO CAP 198MG	3	PA
JATENZO CAP 237MG	3	PA
METHITEST TAB 10MG	3	QL (30 tabs / 30 days), PA
NATESTO GEL 5.5MG	3	QL (30 gm / 30 days), PA
STRIANT MIS 30MG	3	QL (60 buccal systems / 30 days), PA
TESTIM GEL 1%(50MG)	3	QL (150 gm / 30 days), PA
<i>testosterone cypionate im inj in oil 100 mg/ml</i>	2	QL (1 vial / 30 days), NM
<i>testosterone cypionate im inj in oil 200 mg/ml</i>	1	QL (10 vials / 30 days), NM
<i>testosterone enanthate im inj in oil 200 mg/ml</i>	1	QL (1 vial / 30 days), NM
<i>testosterone td gel 10mg/act (2%)</i>	2	QL (60 gm / 30 days)
<i>testosterone td gel 12.5 mg/act (1%)</i>	2	QL (150 gm / 30 days)
<i>testosterone td gel 20.25 mg/1.25gm (1.62%)</i>	2	QL (150 gm / 30 days)
<i>testosterone td gel 20.25 mg/act (1.62%)</i>	2	QL (150 gm / 30 days)
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	2	QL (150 gm / 30 days)
<i>testosterone td gel 40.5 mg/2.5gm (1.62%)</i>	2	QL (150 gm / 30 days)
<i>testosterone td gel 50 mg/5gm (1%)</i>	2	QL (150 gm / 30 days)
<i>testosterone td soln 30 mg/act</i>	2	QL (90 mL / 30 days)

Drug Name	Drug Tier	Requirements/Limits
VOGELXO GEL 1%(50MG)	3	QL (150 gm / 30 days), PA
VOGELXO GEL PUMP 1%	3	QL (150 gm / 30 days), PA
XYOSTED INJ 50/0.5	3	QL (10 pens / 30 days), PA
XYOSTED INJ 75/0.5	3	QL (10 pens / 30 days), PA
XYOSTED INJ 100/0.5	3	QL (10 pens / 30 days), PA

ANORECTAL AGENTS

INTRARECTAL STEROIDS

<i>colocort ene 100mg</i>	2	NM
CORTENEMA ENE 100MG	3	NM
CORTIFOAM AER 90MG	3	NM
<i>hydrocortisone enema 100 mg/60ml</i>	2	NM
UCERIS AER 2MG/ACT	3	NM

RECTAL COMBINATIONS

<i>hydrocortisone acetate w/ pramoxine perianal cream 1-1%</i>	1	NM
<i>lidocaine-hydrocortisone acetate perianal cream 3-0.5%</i>	2	NM
PROCTOFOAM AER HC 1%	3	NM

RECTAL STEROIDS

<i>hydrocortisone perianal cream 2.5%</i>	1	NM
<i>procto-med cre hc 2.5%</i>	1	NM
<i>proctosol hc cre 2.5%</i>	1	NM
<i>proctozone cre -hc 2.5%</i>	1	NM

VASODILATING AGENTS

RECTIV OIN 0.4%	3	NM
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ANTHELMINTICS

ANTHELMINTICS

<i>albendazole tab 200 mg</i>	2	NM
ALBENZA TAB 200MG	3	NM
BENZNIDAZOLE TAB 12.5MG	3	NM, PA
BENZNIDAZOLE TAB 100MG	3	NM, PA
BILTRICIDE TAB 600MG	3	NM
EMVERM CHW 100MG	3	QL (2 ea / 135 days), NM
<i>ivermectin tab 3 mg</i>	1	NM
<i>praziquantel tab 600 mg</i>	2	NM
STROMECTOL TAB 3MG	3	NM

Drug Name	Drug Tier	Requirements/Limits
ANTI-INFECTIVE AGENTS - MISC.		
ANTI-INFECTIVE AGENTS - MISC.		
AEMCOLO TAB 194MG	3	NM, PA
FLAGYL TAB 250MG	3	NM
FLAGYL TAB 500MG	3	NM
<i>metronidazole tab 250 mg</i>	1	NM
<i>metronidazole tab 500 mg</i>	1	NM
NEBUPENT INH 300MG	3	NM
<i>pentamidine isethionate for nebulization soln 300 mg</i>	2	NM
<i>pentamidine isethionate for soln 300 mg</i>	2	NM
PRIMSOL SOL 50MG/5ML	3	NM
<i>tinidazole tab 250 mg</i>	1	NM
<i>tinidazole tab 500 mg</i>	1	NM
<i>trimethoprim tab 100 mg</i>	1	NM
XIFAXAN TAB 200MG	3	NM, PA
XIFAXAN TAB 550MG	3	PA
ANTI-INFECTIVE MISC. - COMBINATIONS		
BACTRIM DS TAB 800-160	3	NM
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	1	NM
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	1	NM
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	1	NM
<i>sulfatrim pd sus 200-40/5</i>	1	NM
ANTIPROTOZOAL AGENTS		
ALINIA SUS 100/5ML	3	NM
ALINIA TAB 500MG	3	NM
<i>atovaquone susp 750 mg/5ml</i>	2	QL (140 mL / 180 days), NM
CARBAPENEMS		
<i>ertapenem sodium for inj 1 gm (base equivalent)</i>	2	NM
GLYCOPEPTIDES		
FIRVANQ SOL 25MG/ML	2	NM
FIRVANQ SOL 50MG/ML	2	NM
VANCOCIN CAP 250MG	3	NM
VANCOCIN HCL CAP 125MG	3	NM
<i>vancomycin hcl cap 125 mg (base equivalent)</i>	2	NM
<i>vancomycin hcl cap 250 mg (base equivalent)</i>	2	NM

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Drug Name	Drug Tier	Requirements/Limits
LEPROSTATICS		
<i>dapsone tab 25 mg</i>	1	
<i>dapsone tab 100 mg</i>	1	
LINCOSAMIDES		
<i>clindamycin hcl cap 75 mg</i>	1	NM
<i>clindamycin hcl cap 150 mg</i>	1	NM
<i>clindamycin hcl cap 300 mg</i>	1	NM
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	2	NM
MONOBACTAMS		
<i>aztreonam for inj 1 gm</i>	2	NM
<i>aztreonam for inj 2 gm</i>	2	NM
CAYSTON INH 75MG	3	SP, NM, PA
OXAZOLIDINONES		
<i>linezolid for susp 100 mg/5ml</i>	2	NM
<i>linezolid tab 600 mg</i>	2	NM
SIVEXTRO TAB 200MG	3	NM
ZYVOX SUS 100MG/5M	3	NM
ZYVOX TAB 600MG	3	NM
ANTIANGINAL AGENTS		
ANTIANGINALS-OTHER		
RANEXA TAB 500MG	3	
RANEXA TAB 1000MG	3	
<i>ranolazine tab er 12hr 500 mg</i>	2	
<i>ranolazine tab er 12hr 1000 mg</i>	2	
NITRATES		
DILATRATE SR CAP 40MG	3	
ISORDIL TAB 5MG	3	
ISORDIL TAB 40MG	3	
<i>isosorbide dinitrate tab 5 mg</i>	1	
<i>isosorbide dinitrate tab 10 mg</i>	1	
<i>isosorbide dinitrate tab 20 mg</i>	1	
<i>isosorbide dinitrate tab 30 mg</i>	1	
<i>isosorbide dinitrate tab 40 mg</i>	2	
<i>isosorbide mononitrate tab 20 mg</i>	1	
<i>isosorbide mononitrate tab er 24hr 30 mg</i>	1	
<i>isosorbide mononitrate tab er 24hr 60 mg</i>	1	
<i>isosorbide mononitrate tab er 24hr 120 mg</i>	1	
<i>minitran dis 0.1mg/hr</i>	1	
<i>minitran dis 0.2mg/hr</i>	1	
<i>minitran dis 0.4mg/hr</i>	1	
<i>minitran dis 0.6mg/hr</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
NITRO-BID OIN 2%	3	
NITRO-DUR DIS 0.1MG/HR	3	
NITRO-DUR DIS 0.2MG/HR	3	
NITRO-DUR DIS 0.3MG/HR	3	
NITRO-DUR DIS 0.4MG/HR	3	
NITRO-DUR DIS 0.6MG/HR	3	
NITRO-DUR DIS 0.8MG/HR	3	
<i>nitroglycerin sl tab 0.3 mg</i>	1	
<i>nitroglycerin sl tab 0.4 mg</i>	1	
<i>nitroglycerin sl tab 0.6 mg</i>	1	
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>	1	
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	1	
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	1	
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	1	
NITROSTAT SUB 0.3MG	2	
NITROSTAT SUB 0.4MG	2	
NITROSTAT SUB 0.6MG	2	

ANTIANXIETY AGENTS

ANTIANXIETY AGENTS - MISC.

<i>buspirone hcl tab 5 mg</i>	1	NM
<i>buspirone hcl tab 7.5 mg</i>	1	NM
<i>buspirone hcl tab 10 mg</i>	1	NM
<i>buspirone hcl tab 15 mg</i>	1	NM
<i>hydroxyzine hcl syrup 10 mg/5ml</i>	1	NM
<i>hydroxyzine hcl tab 10 mg</i>	1	NM
<i>hydroxyzine hcl tab 25 mg</i>	1	NM
<i>hydroxyzine hcl tab 50 mg</i>	1	NM
<i>hydroxyzine pamoate cap 25 mg</i>	1	NM
<i>hydroxyzine pamoate cap 50 mg</i>	1	NM
<i>hydroxyzine pamoate cap 100 mg</i>	1	NM
<i>meprobamate tab 200 mg</i>	1	NM
<i>meprobamate tab 400 mg</i>	1	NM

BENZODIAZEPINES

ALPRAZOLAM CON 1 MG/ML	2	NM
<i>alprazolam tab 0.5 mg</i>	1	NM
<i>alprazolam tab 0.5mg xr</i>	1	NM
<i>alprazolam tab 0.25 mg</i>	1	NM
<i>alprazolam tab 1 mg</i>	1	NM
<i>alprazolam tab 1mg xr</i>	1	NM
<i>alprazolam tab 2 mg</i>	1	NM
<i>alprazolam tab 2mg xr</i>	1	NM
<i>alprazolam tab 3mg xr</i>	1	NM
<i>alprazolam tab er 24hr 0.5 mg</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>alprazolam tab er 24hr 1 mg</i>	1	NM
<i>alprazolam tab er 24hr 2 mg</i>	1	NM
<i>alprazolam tab er 24hr 3 mg</i>	1	NM
<i>chlordiazepoxide hcl cap 5 mg</i>	1	NM
<i>chlordiazepoxide hcl cap 10 mg</i>	1	NM
<i>chlordiazepoxide hcl cap 25 mg</i>	1	NM
<i>clorazepate dipotassium tab 3.75 mg</i>	1	NM
<i>clorazepate dipotassium tab 7.5 mg</i>	1	NM
<i>clorazepate dipotassium tab 15 mg</i>	1	NM
<i>diazepam con 5mg/ml</i>	2	NM
<i>diazepam inj 5 mg/ml</i>	2	NM
<i>diazepam oral soln 1 mg/ml</i>	2	NM
<i>diazepam tab 2 mg</i>	1	NM
<i>diazepam tab 5 mg</i>	1	NM
<i>diazepam tab 10 mg</i>	1	NM
<i>lorazepam tab 0.5 mg</i>	1	NM
<i>lorazepam tab 1 mg</i>	1	NM
<i>lorazepam tab 2 mg</i>	1	NM
<i>oxazepam cap 10 mg</i>	1	NM
<i>oxazepam cap 15 mg</i>	1	NM
<i>oxazepam cap 30 mg</i>	1	NM
TRANXENE T TAB 7.5MG	3	NM
VALIUM TAB 2MG	3	NM
VALIUM TAB 5MG	3	NM
VALIUM TAB 10MG	3	NM
XANAX TAB 0.5MG	3	NM
XANAX TAB 0.25MG	3	NM
XANAX TAB 1MG	3	NM
XANAX TAB 2MG	3	NM
XANAX XR TAB 0.5MG	3	NM
XANAX XR TAB 1MG	3	NM
XANAX XR TAB 2MG	3	NM
XANAX XR TAB 3MG	3	NM

ANTIARRHYTHMICS

ANTIARRHYTHMICS TYPE I-A

<i>disopyramide phosphate cap 100 mg</i>	1	
<i>disopyramide phosphate cap 150 mg</i>	1	
NORPACE CAP 100MG	3	
NORPACE CAP 100MG CR	3	
NORPACE CAP 150MG	3	
NORPACE CAP 150MG CR	3	
<i>procainamide hcl inj 100 mg/ml</i>	2	NM
<i>quinidine gluconate tab er 324 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>quinidine sulfate tab 200 mg</i>	1	
<i>quinidine sulfate tab 300 mg</i>	1	
ANTIARRHYTHMICS TYPE I-B		
<i>mexiletine hcl cap 150 mg</i>	1	
<i>mexiletine hcl cap 200 mg</i>	1	
<i>mexiletine hcl cap 250 mg</i>	1	
ANTIARRHYTHMICS TYPE I-C		
<i>flecainide acetate tab 50 mg</i>	1	
<i>flecainide acetate tab 100 mg</i>	1	
<i>flecainide acetate tab 150 mg</i>	1	
<i>propafenone hcl cap er 12hr 225 mg</i>	2	
<i>propafenone hcl cap er 12hr 325 mg</i>	2	
<i>propafenone hcl cap er 12hr 425 mg</i>	2	
<i>propafenone hcl tab 150 mg</i>	1	
<i>propafenone hcl tab 225 mg</i>	1	
<i>propafenone hcl tab 300 mg</i>	1	
RYTHMOL SR CAP 225MG	3	
RYTHMOL SR CAP 325MG	3	
RYTHMOL SR CAP 425MG	3	
ANTIARRHYTHMICS TYPE III		
<i>amiodarone hcl tab 100 mg</i>	1	
<i>amiodarone hcl tab 200 mg</i>	1	
<i>amiodarone hcl tab 400 mg</i>	1	
<i>dofetilide cap 125 mcg (0.125 mg)</i>	2	
<i>dofetilide cap 250 mcg (0.25 mg)</i>	2	
<i>dofetilide cap 500 mcg (0.5 mg)</i>	2	
MULTAQ TAB 400MG	3	
<i>pacerone tab 100mg</i>	1	
<i>pacerone tab 200mg</i>	1	
<i>pacerone tab 400mg</i>	1	
TIKOSYN CAP 125MCG	3	
TIKOSYN CAP 250MCG	3	
TIKOSYN CAP 500MCG	3	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
ANTI-INFLAMMATORY AGENTS		
<i>cromolyn sodium soln nebu 20 mg/2ml</i>	2	
ANTIASTHMATIC - MONOCLONAL ANTIBODIES		
FASENRA PEN INJ 30MG/ML	2	SP, PA
NUCALA INJ 100MG/ML	3	SP, PA
BRONCHODILATORS - ANTICHOLINERGICS		
ATROVENT HFA AER 17MCG	2	
INCRUSE ELPT INH 62.5MCG	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>ipratropium bromide inhal soln 0.02%</i>	1	
SEEBRI NEOHA CAP 15.6MCG	3	
SPIRIVA AER 1.25MCG	2	
SPIRIVA CAP HANDIHLR	2	
SPIRIVA SPR 2.5MCG	2	
YUPELRI SOL	3	
LEUKOTRIENE MODULATORS		
ACCOLATE TAB 10MG	3	
ACCOLATE TAB 20MG	3	
<i>montelukast sodium chew tab 4 mg (base equiv)</i>	1	
<i>montelukast sodium chew tab 5 mg (base equiv)</i>	1	
<i>montelukast sodium oral granules packet 4 mg (base equiv)</i>	1	
<i>montelukast sodium tab 10 mg (base equiv)</i>	1	
SINGULAIR CHW 4MG	3	
SINGULAIR CHW 5MG	3	
SINGULAIR GRA 4MG	3	
SINGULAIR TAB 10MG	3	
<i>zafirlukast tab 10 mg</i>	1	
<i>zafirlukast tab 20 mg</i>	1	
SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
DALIRESP TAB 250MCG	3	
DALIRESP TAB 500MCG	3	
STEROID INHALANTS		
ARNUITY ELPT INH 50MCG	2	
ARNUITY ELPT INH 100MCG	2	
ARNUITY ELPT INH 200MCG	2	
<i>budesonide inhalation susp 0.5 mg/2ml</i>	2	
<i>budesonide inhalation susp 0.25 mg/2ml</i>	2	
<i>budesonide inhalation susp 1 mg/2ml</i>	2	
FLOVENT DISK AER 50MCG	2	
FLOVENT DISK AER 100MCG	2	
FLOVENT DISK AER 250MCG	2	
FLOVENT HFA AER 44MCG	2	
FLOVENT HFA AER 110MCG	2	
FLOVENT HFA AER 220MCG	2	
PULMICORT INH 90MCG	2	
PULMICORT INH 180MCG	2	
QVAR REDIHA AER 80MCG	2	
QVAR REDIHAL AER 40MCG	2	

Drug Name	Drug Tier	Requirements/Limits
SYMPATHOMIMETICS		
ADVAIR DISKU AER 100/50	3	
ADVAIR DISKU AER 250/50	3	
ADVAIR DISKU AER 500/50	3	
ADVAIR HFA AER 45/21	2	
ADVAIR HFA AER 115/21	2	
ADVAIR HFA AER 230/21	2	
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	1	
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	1	
<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	1	
<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i>	1	
<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	1	
<i>albuterol sulfate syrup 2 mg/5ml</i>	1	
<i>albuterol sulfate tab 2 mg</i>	1	
<i>albuterol sulfate tab 4 mg</i>	1	
<i>albuterol sulfate tab er 12hr 4 mg</i>	1	
<i>albuterol sulfate tab er 12hr 8 mg</i>	1	
ANORO ELLIPTA AER 62.5-25	2	
ARCAPTA CAP 75MCG	3	
BEVESPI AER 9-4.8MCG	2	
BREO ELLIPTA INH 100-25	2	
BREO ELLIPTA INH 200-25	2	
BROVANA NEB 15MCG	3	
COMBIVENT AER 20-100	2	
<i>fluticasone-salmeterol aer powder ba 55-14 mcg/act</i>	1	
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/dose</i>	1	
<i>fluticasone-salmeterol aer powder ba 113-14 mcg/act</i>	1	
<i>fluticasone-salmeterol aer powder ba 232-14 mcg/act</i>	1	
<i>fluticasone-salmeterol aer powder ba 250-50 mcg/dose</i>	1	
<i>fluticasone-salmeterol aer powder ba 500-50 mcg/dose</i>	1	
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	1	
<i>isoproterenol hcl inj 0.2 mg/ml</i>	2	NM

Drug Name	Drug Tier	Requirements/Limits
<i>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)</i>	2	
<i>levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)</i>	2	
<i>levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)</i>	2	
<i>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)</i>	2	
<i>levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)</i>	2	
<i>metaproterenol sulfate syrup 10 mg/5ml</i>	1	
PERFOROMIST NEB 20MCG	3	
PROAIR HFA AER	3	
PROAIR RESPI AER	3	
PROVENTIL AER HFA	3	
SEREVENT DIS AER 50MCG	3	
STRIVERDI AER 2.5MCG	3	
SYMBICORT AER 80-4.5	2	
SYMBICORT AER 160-4.5	2	
<i>terbutaline sulfate inj 1 mg/ml</i>	1	NM
<i>terbutaline sulfate tab 2.5 mg</i>	1	
<i>terbutaline sulfate tab 5 mg</i>	1	
TRELEGY AER ELLIPTA	2	
VENTOLIN HFA AER	3	
<i>wixela inhub aer 100/50</i>	1	
<i>wixela inhub aer 250/50</i>	1	
<i>wixela inhub aer 500/50</i>	1	
XOPENEX CONC NEB 1.25/0.5	3	
XOPENEX HFA AER	3	
XOPENEX NEB 0.31MG	3	
XOPENEX NEB 0.63MG	3	
XOPENEX NEB 1.25/3ML	3	
XANTHINES		
THEO-24 CAP 100MG CR	3	
THEO-24 CAP 200MG CR	3	
THEO-24 CAP 300MG CR	3	
THEO-24 CAP 400MG ER	3	
<i>theophylline soln 80 mg/15ml</i>	1	
<i>theophylline tab er 12hr 300 mg</i>	1	
<i>theophylline tab er 12hr 450 mg</i>	1	
<i>theophylline tab er 24hr 400 mg</i>	1	
<i>theophylline tab er 24hr 600 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
ANTICOAGULANTS		
COUMARIN ANTICOAGULANTS		
COUMADIN TAB 1MG	3	
COUMADIN TAB 2.5MG	3	
COUMADIN TAB 2MG	3	
COUMADIN TAB 3MG	3	
COUMADIN TAB 4MG	3	
COUMADIN TAB 5MG	3	
COUMADIN TAB 6MG	3	
COUMADIN TAB 7.5MG	3	
COUMADIN TAB 10MG	3	
<i>jantoven tab 1mg</i>	1	
<i>jantoven tab 2.5mg</i>	1	
<i>jantoven tab 2mg</i>	1	
<i>jantoven tab 3mg</i>	1	
<i>jantoven tab 4mg</i>	1	
<i>jantoven tab 5mg</i>	1	
<i>jantoven tab 6mg</i>	1	
<i>jantoven tab 7.5mg</i>	1	
<i>jantoven tab 10mg</i>	1	
<i>warfarin sodium tab 1 mg</i>	1	
<i>warfarin sodium tab 2 mg</i>	1	
<i>warfarin sodium tab 2.5 mg</i>	1	
<i>warfarin sodium tab 3 mg</i>	1	
<i>warfarin sodium tab 4 mg</i>	1	
<i>warfarin sodium tab 5 mg</i>	1	
<i>warfarin sodium tab 6 mg</i>	1	
<i>warfarin sodium tab 7.5 mg</i>	1	
<i>warfarin sodium tab 10 mg</i>	1	
DIRECT FACTOR XA INHIBITORS		
BEVYXXA CAP 40MG	3	
BEVYXXA CAP 80MG	3	
ELIQUIS ST P TAB 5MG	2	
ELIQUIS TAB 2.5MG	2	
ELIQUIS TAB 5MG	2	
XARELTO STAR TAB 15/20MG	2	NM
XARELTO TAB 2.5MG	2	
XARELTO TAB 10MG	2	
XARELTO TAB 15MG	2	
XARELTO TAB 20MG	2	
HEPARINS AND HEPARINOID-LIKE AGENTS		
ARIXTRA INJ 2.5/0.5	3	NM

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Drug Name	Drug Tier	Requirements/Limits
ARIXTRA INJ 5/0.4ML	3	NM
ARIXTRA INJ 7.5/0.6	3	NM
ARIXTRA INJ 10/0.8ML	3	NM
<i>enoxaparin sodium inj 30 mg/0.3ml</i>	2	NM
<i>enoxaparin sodium inj 40 mg/0.4ml</i>	2	NM
<i>enoxaparin sodium inj 60 mg/0.6ml</i>	2	NM
<i>enoxaparin sodium inj 80 mg/0.8ml</i>	2	NM
<i>enoxaparin sodium inj 100 mg/ml</i>	2	NM
<i>enoxaparin sodium inj 120 mg/0.8ml</i>	2	NM
<i>enoxaparin sodium inj 150 mg/ml</i>	2	NM
<i>enoxaparin sodium inj 300 mg/3ml</i>	2	NM
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	2	NM
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	2	NM
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	2	NM
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	2	NM
FRAGMIN INJ 2500/0.2	3	NM
FRAGMIN INJ 5000/0.2	3	NM
FRAGMIN INJ 7500/0.3	3	NM
FRAGMIN INJ 10000/ML	3	NM
FRAGMIN INJ 12500UNT	3	NM
FRAGMIN INJ 15000UNT	3	NM
FRAGMIN INJ 18000UNT	3	NM
FRAGMIN INJ 95000UNT	3	NM
<i>heparin sodium (porcine) inj 1000 unit/ml</i>	2	NM
<i>heparin sodium (porcine) inj 5000 unit/ml</i>	2	NM
<i>heparin sodium (porcine) inj 10000 unit/ml</i>	2	NM
<i>heparin sodium (porcine) inj 20000 unit/ml</i>	2	NM
<i>heparin sodium (porcine) pf inj 5000 unit/0.5ml</i>	2	NM
LOVENOX INJ 30/0.3ML	3	NM
LOVENOX INJ 40/0.4ML	3	NM
LOVENOX INJ 60/0.6ML	3	NM
LOVENOX INJ 80/0.8ML	3	NM
LOVENOX INJ 100MG/ML	3	NM
LOVENOX INJ 120/0.8	3	NM
LOVENOX INJ 150MG/ML	3	NM
LOVENOX INJ 300/3ML	3	NM

Drug Name	Drug Tier	Requirements/Limits
ANTICONVULSANTS		
AMPA GLUTAMATE RECEPTOR ANTAGONISTS		
FYCOMPA SUS 0.5MG/ML	3	
FYCOMPA TAB 2MG	3	
FYCOMPA TAB 4MG	3	
FYCOMPA TAB 6MG	3	
FYCOMPA TAB 8MG	3	
FYCOMPA TAB 10MG	3	
FYCOMPA TAB 12MG	3	
ANTICONVULSANTS - BENZODIAZEPINES		
<i>clobazam suspension 2.5 mg/ml</i>	2	
<i>clobazam tab 10 mg</i>	2	
<i>clobazam tab 20 mg</i>	2	
<i>clonazepam orally disintegrating tab 0.5 mg</i>	1	NM
<i>clonazepam orally disintegrating tab 0.25 mg</i>	1	NM
<i>clonazepam orally disintegrating tab 0.125 mg</i>	1	NM
<i>clonazepam orally disintegrating tab 1 mg</i>	1	NM
<i>clonazepam orally disintegrating tab 2 mg</i>	1	NM
<i>clonazepam tab 0.5 mg</i>	1	NM
<i>clonazepam tab 1 mg</i>	1	NM
<i>clonazepam tab 2 mg</i>	1	NM
DIASTAT ACDL GEL 5-10MG	3	NM
DIASTAT ACDL GEL 12.5-20	3	NM
DIASTAT PED GEL 2.5M GEL	3	NM
<i>diazepam rectal gel delivery system 2.5 mg</i>	1	NM
<i>diazepam rectal gel delivery system 10 mg</i>	1	NM
<i>diazepam rectal gel delivery system 20 mg</i>	1	NM
KLONOPIN TAB 0.5MG	3	NM
KLONOPIN TAB 1MG	3	NM
KLONOPIN TAB 2MG	3	NM
ONFI SUS 2.5MG/ML	3	
ONFI TAB 10MG	3	
ONFI TAB 20MG	3	
SYMPAZAN MIS 5MG	3	
SYMPAZAN MIS 10MG	3	
SYMPAZAN MIS 20MG	3	
ANTICONVULSANTS - MISC.		
APTiom TAB 200MG	3	
APTiom TAB 400MG	3	

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Drug Name	Drug Tier	Requirements/Limits
APTiom TAB 600MG	3	
APTiom TAB 800MG	3	
BANZEL SUS 40MG/ML	3	
BANZEL TAB 200MG	3	
BANZEL TAB 400MG	3	
BRIVIACT SOL 10MG/ML	3	
BRIVIACT TAB 10MG	3	
BRIVIACT TAB 25MG	3	
BRIVIACT TAB 50MG	3	
BRIVIACT TAB 75MG	3	
BRIVIACT TAB 100MG	3	
<i>carbamazepine cap er 12hr 100 mg</i>	2	
<i>carbamazepine cap er 12hr 200 mg</i>	2	
<i>carbamazepine cap er 12hr 300 mg</i>	2	
<i>carbamazepine chew tab 100 mg</i>	1	
<i>carbamazepine susp 100 mg/5ml</i>	1	
<i>carbamazepine tab 200 mg</i>	1	
<i>carbamazepine tab er 12hr 100 mg</i>	2	
<i>carbamazepine tab er 12hr 200 mg</i>	2	
<i>carbamazepine tab er 12hr 400 mg</i>	2	
CARBATROL CAP 100MG	3	
CARBATROL CAP 200MG	3	
CARBATROL CAP 300MG	3	
DIACOMIT CAP 250MG	3	PA
DIACOMIT CAP 500MG	3	PA
DIACOMIT PAK 250MG	3	PA
DIACOMIT PAK 500MG	3	PA
EPIDIOLEX SOL 100MG/ML	3	SP, PA
<i>epitol tab 200mg</i>	1	
<i>gabapentin cap 100 mg</i>	1	
<i>gabapentin cap 300 mg</i>	1	
<i>gabapentin cap 400 mg</i>	1	
<i>gabapentin oral soln 250 mg/5ml</i>	1	
<i>gabapentin tab 600 mg</i>	1	
<i>gabapentin tab 800 mg</i>	1	
KEPPRA SOL 100MG/ML	3	
KEPPRA TAB 250MG	3	
KEPPRA TAB 500MG	3	
KEPPRA TAB 750MG	3	
KEPPRA TAB 1000MG	3	
KEPPRA XR TAB 500MG	3	
KEPPRA XR TAB 750MG	3	
LAMICTAL CHW 5MG	3	

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Drug Name	Drug Tier	Requirements/Limits
LAMICTAL CHW 25MG	3	
LAMICTAL KIT START 35	3	NM
LAMICTAL KIT START 49	3	NM
LAMICTAL KIT START 98	3	NM
LAMICTAL ODT KIT	3	NM
LAMICTAL ODT TAB 25MG	3	
LAMICTAL ODT TAB 50MG	3	
LAMICTAL ODT TAB 100MG	3	
LAMICTAL ODT TAB 200MG	3	
LAMICTAL TAB 25MG	3	
LAMICTAL TAB 100MG	3	
LAMICTAL TAB 150MG	3	
LAMICTAL TAB 200MG	3	
LAMICTAL XR KIT	3	NM
LAMICTAL XR TAB 25MG	3	
LAMICTAL XR TAB 50MG	3	
LAMICTAL XR TAB 100MG	3	
LAMICTAL XR TAB 200MG	3	
LAMICTAL XR TAB 250MG	3	
LAMICTAL XR TAB 300MG	3	
<i>lamotrigine orally disintegrating tab 25 mg</i>	2	
<i>lamotrigine orally disintegrating tab 50 mg</i>	2	
<i>lamotrigine orally disintegrating tab 100 mg</i>	2	
<i>lamotrigine orally disintegrating tab 200 mg</i>	2	
<i>lamotrigine tab 25 mg</i>	1	
<i>lamotrigine tab 25 mg (42) & 100 mg (7) starter kit</i>	2	NM
<i>lamotrigine tab 35 x 25 mg starter kit</i>	2	NM
<i>lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit</i>	2	NM
<i>lamotrigine tab 100 mg</i>	1	
<i>lamotrigine tab 150 mg</i>	1	
<i>lamotrigine tab 200 mg</i>	1	
<i>lamotrigine tab chewable dispersible 5 mg</i>	1	
<i>lamotrigine tab chewable dispersible 25 mg</i>	1	
<i>lamotrigine tab er 24hr 25 mg</i>	2	
<i>lamotrigine tab er 24hr 50 mg</i>	2	
<i>lamotrigine tab er 24hr 100 mg</i>	2	
<i>lamotrigine tab er 24hr 200 mg</i>	2	
<i>lamotrigine tab er 24hr 250 mg</i>	2	
<i>lamotrigine tab er 24hr 300 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>levetiracetam oral soln 100 mg/ml</i>	1	
<i>levetiracetam tab 250 mg</i>	1	
<i>levetiracetam tab 500 mg</i>	1	
<i>levetiracetam tab 750 mg</i>	1	
<i>levetiracetam tab 1000 mg</i>	1	
<i>levetiracetam tab er 24hr 500 mg</i>	1	
<i>levetiracetam tab er 24hr 750 mg</i>	1	
LYRICA CAP 25MG	3	
LYRICA CAP 50MG	3	
LYRICA CAP 75MG	3	
LYRICA CAP 100MG	3	
LYRICA CAP 150MG	3	
LYRICA CAP 200MG	3	
LYRICA CAP 225MG	3	
LYRICA CAP 300MG	3	
LYRICA SOL 20MG/ML	3	
NEURONTIN CAP 100MG	3	
NEURONTIN CAP 300MG	3	
NEURONTIN CAP 400MG	3	
NEURONTIN SOL 250/5ML	3	
NEURONTIN TAB 600MG	3	
NEURONTIN TAB 800MG	3	
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i>	1	
<i>oxcarbazepine tab 150 mg</i>	1	
<i>oxcarbazepine tab 300 mg</i>	1	
<i>oxcarbazepine tab 600 mg</i>	1	
OXTELLAR XR TAB 150MG	3	
OXTELLAR XR TAB 300MG	3	
OXTELLAR XR TAB 600MG	3	
<i>pregabalin cap 25 mg</i>	2	
<i>pregabalin cap 50 mg</i>	2	
<i>pregabalin cap 75 mg</i>	2	
<i>pregabalin cap 100 mg</i>	2	
<i>pregabalin cap 150 mg</i>	2	
<i>pregabalin cap 200 mg</i>	2	
<i>pregabalin cap 225 mg</i>	2	
<i>pregabalin cap 300 mg</i>	2	
<i>pregabalin soln 20 mg/ml</i>	2	
<i>primidone tab 50 mg</i>	1	
<i>primidone tab 250 mg</i>	1	
QUDEXY XR CAP 25/24HR	3	
QUDEXY XR CAP 50/24HR	3	

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Drug Name	Drug Tier	Requirements/Limits
QUDEXY XR CAP 100/24HR	3	
QUDEXY XR CAP 150/24HR	3	
QUDEXY XR CAP 200/24HR	3	
<i>roweepra tab 500mg</i>	1	
<i>roweepra tab 750mg</i>	1	
<i>roweepra tab 1000mg</i>	1	
<i>roweepra xr tab 500mg xr</i>	1	
<i>roweepra xr tab 750mg xr</i>	1	
<i>subvenite kit start 35</i>	2	NM
<i>subvenite kit start 49</i>	2	NM
<i>subvenite kit start 98</i>	2	NM
<i>subvenite tab 25mg</i>	1	
<i>subvenite tab 100mg</i>	1	
<i>subvenite tab 150mg</i>	1	
<i>subvenite tab 200mg</i>	1	
TEGRETOL SUS 100/5ML	3	
TEGRETOL TAB 200MG	3	
TEGRETOL-XR TAB 100MG	3	
TEGRETOL-XR TAB 200MG	3	
TEGRETOL-XR TAB 400MG	3	
TOPAMAX SPR CAP 15MG	3	
TOPAMAX SPR CAP 25MG	3	
TOPAMAX TAB 25MG	3	
TOPAMAX TAB 50MG	3	
TOPAMAX TAB 100MG	3	
TOPAMAX TAB 200MG	3	
<i>topiramate cap er 24hr sprinkle 25 mg</i>	1	
<i>topiramate cap er 24hr sprinkle 50 mg</i>	1	
<i>topiramate cap er 24hr sprinkle 100 mg</i>	1	
<i>topiramate cap er 24hr sprinkle 150 mg</i>	1	
<i>topiramate cap er 24hr sprinkle 200 mg</i>	1	
<i>topiramate sprinkle cap 15 mg</i>	1	
<i>topiramate sprinkle cap 25 mg</i>	1	
<i>topiramate tab 25 mg</i>	1	
<i>topiramate tab 50 mg</i>	1	
<i>topiramate tab 100 mg</i>	1	
<i>topiramate tab 200 mg</i>	1	
TRILEPTAL SUS 300MG/5M	3	
TRILEPTAL TAB 150MG	3	
TRILEPTAL TAB 300MG	3	
TRILEPTAL TAB 600MG	3	
TROKENDI XR CAP 25MG	3	
TROKENDI XR CAP 50MG	3	

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Drug Name	Drug Tier	Requirements/Limits
TROKENDI XR CAP 100MG	3	
TROKENDI XR CAP 200MG	3	
VIMPAT SOL 10MG/ML	3	
VIMPAT TAB 50MG	3	
VIMPAT TAB 100MG	3	
VIMPAT TAB 150MG	3	
VIMPAT TAB 200MG	3	
<i>zonisamide cap 25 mg</i>	1	
<i>zonisamide cap 50 mg</i>	1	
<i>zonisamide cap 100 mg</i>	1	
CARBAMATES		
<i>felbamate susp 600 mg/5ml</i>	2	
<i>felbamate tab 400 mg</i>	2	
<i>felbamate tab 600 mg</i>	2	
GABA MODULATORS		
GABITRIL TAB 2MG	3	
GABITRIL TAB 4MG	3	
GABITRIL TAB 12MG	3	
GABITRIL TAB 16MG	3	
SABRIL POW 500MG	3	SP
SABRIL TAB 500MG	3	SP
<i>tiagabine hcl tab 2 mg</i>	2	
<i>tiagabine hcl tab 4 mg</i>	2	
<i>tiagabine hcl tab 12 mg</i>	2	
<i>tiagabine hcl tab 16 mg</i>	2	
<i>vigabatrin powd pack 500 mg</i>	2	SP
<i>vigabatrin tab 500 mg</i>	2	SP
<i>vigadrone pow 500mg</i>	2	SP
HYDANTOINS		
DILANTIN CAP 30MG	3	
DILANTIN CAP 100MG	3	
DILANTIN CHW 50MG	3	
DILANTIN-125 SUS 125/5ML	3	
PEGANONE TAB 250MG	2	
PHENYTEK CAP 200MG	2	
PHENYTEK CAP 300MG	2	
<i>phenytoin chew tab 50 mg</i>	1	
<i>phenytoin sodium extended cap 100 mg</i>	1	
<i>phenytoin sodium extended cap 200 mg</i>	1	
<i>phenytoin sodium extended cap 300 mg</i>	1	
<i>phenytoin susp 125 mg/5ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
SUCCINIMIDES		
CELONTIN CAP 300MG	2	
<i>ethosuximide cap 250 mg</i>	1	
<i>ethosuximide soln 250 mg/5ml</i>	1	
ZARONTIN CAP 250MG	3	
ZARONTIN SOL 250/5ML	3	
VALPROIC ACID		
DEPAKOTE ER TAB 250MG	3	
DEPAKOTE ER TAB 500MG	3	
DEPAKOTE SPR CAP 125MG	3	
DEPAKOTE TAB 125MG DR	3	
DEPAKOTE TAB 250MG DR	3	
DEPAKOTE TAB 500MG DR	3	
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	1	
<i>divalproex sodium tab delayed release 125 mg</i>	2	
<i>divalproex sodium tab delayed release 250 mg</i>	2	
<i>divalproex sodium tab delayed release 500 mg</i>	2	
<i>divalproex sodium tab er 24 hr 250 mg</i>	2	
<i>divalproex sodium tab er 24 hr 500 mg</i>	2	
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	1	
<i>valproic acid cap 250 mg</i>	1	
ANTIDEPRESSANTS		
ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS)		
<i>mirtazapine tab 7.5 mg</i>	1	
<i>mirtazapine tab 15 mg</i>	1	
<i>mirtazapine tab 30 mg</i>	1	
<i>mirtazapine tab 45 mg</i>	1	
REMERON TAB 15MG	3	
REMERON TAB 30MG	3	
ANTIDEPRESSANTS - MISC.		
<i>bupropion hcl tab 75 mg</i>	1	
<i>bupropion hcl tab 100 mg</i>	1	
<i>bupropion hcl tab er 12hr 100 mg</i>	1	
<i>bupropion hcl tab er 12hr 150 mg</i>	1	
<i>bupropion hcl tab er 12hr 200 mg</i>	1	
<i>bupropion hcl tab er 24hr 150 mg</i>	1	
<i>bupropion hcl tab er 24hr 300 mg</i>	1	
<i>maprotiline hcl tab 25 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>maprotiline hcl tab 50 mg</i>	1	
<i>maprotiline hcl tab 75 mg</i>	1	
WELLBUTRIN TAB 100MG SR	3	
WELLBUTRIN TAB 150MG SR	3	
WELLBUTRIN TAB 200MG SR	3	
MONOAMINE OXIDASE INHIBITORS (MAOIS)		
EMSAM DIS 6MG/24HR	3	
EMSAM DIS 9MG/24HR	3	
EMSAM DIS 12MG/24H	3	
MARPLAN TAB 10MG	3	
NARDIL TAB 15MG	3	
<i>phenelzine sulfate tab 15 mg</i>	1	
<i>tranylcypromine sulfate tab 10 mg</i>	1	
SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)		
CELEXA TAB 10MG	3	
CELEXA TAB 20MG	3	
CELEXA TAB 40MG	3	
<i>citalopram hydrobromide oral soln 10 mg/5ml</i>	1	
<i>citalopram hydrobromide tab 10 mg (base equiv)</i>	1	
<i>citalopram hydrobromide tab 20 mg (base equiv)</i>	1	
<i>citalopram hydrobromide tab 40 mg (base equiv)</i>	1	
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	1	
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	1	
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	1	
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	1	
<i>fluoxetine hcl cap 10 mg</i>	1	
<i>fluoxetine hcl cap 20 mg</i>	1	
<i>fluoxetine hcl cap 40 mg</i>	1	
<i>fluoxetine hcl cap delayed release 90 mg</i>	1	
<i>fluoxetine hcl solution 20 mg/5ml</i>	1	
<i>fluoxetine hcl tab 60 mg</i>	2	
<i>fluvoxamine maleate cap er 24hr 100 mg</i>	2	
<i>fluvoxamine maleate cap er 24hr 150 mg</i>	2	
<i>fluvoxamine maleate tab 25 mg</i>	1	
<i>fluvoxamine maleate tab 50 mg</i>	1	
<i>fluvoxamine maleate tab 100 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
LEXAPRO TAB 5MG	3	
LEXAPRO TAB 10MG	3	
LEXAPRO TAB 20MG	3	
<i>paroxetine hcl tab 10 mg</i>	1	
<i>paroxetine hcl tab 20 mg</i>	1	
<i>paroxetine hcl tab 30 mg</i>	1	
<i>paroxetine hcl tab 40 mg</i>	1	
<i>paroxetine hcl tab er 24hr 12.5 mg</i>	1	
<i>paroxetine hcl tab er 24hr 25 mg</i>	1	
<i>paroxetine hcl tab er 24hr 37.5 mg</i>	1	
PAXIL CR TAB 12.5MG	3	
PAXIL CR TAB 25MG	3	
PAXIL CR TAB 37.5MG	3	
PAXIL SUS 10MG/5ML	3	
PAXIL TAB 10MG	3	
PAXIL TAB 20MG	3	
PAXIL TAB 30MG	3	
PAXIL TAB 40MG	3	
PEXEVA TAB 10MG	3	
PEXEVA TAB 20MG	3	
PEXEVA TAB 30MG	3	
PEXEVA TAB 40MG	3	
PROZAC CAP 10MG	3	
PROZAC CAP 20MG	3	
PROZAC CAP 40MG	3	
<i>sertraline hcl oral concentrate for solution 20 mg/ml</i>	1	
<i>sertraline hcl tab 25 mg</i>	1	
<i>sertraline hcl tab 50 mg</i>	1	
<i>sertraline hcl tab 100 mg</i>	1	
ZOLOFT CON 20MG/ML	3	
ZOLOFT TAB 25MG	3	
ZOLOFT TAB 50MG	3	
ZOLOFT TAB 100MG	3	
SEROTONIN MODULATORS		
<i>nefazodone hcl tab 50 mg</i>	1	
<i>nefazodone hcl tab 100 mg</i>	1	
<i>nefazodone hcl tab 150 mg</i>	1	
<i>nefazodone hcl tab 200 mg</i>	1	
<i>nefazodone hcl tab 250 mg</i>	1	
<i>trazodone hcl tab 50 mg</i>	1	
<i>trazodone hcl tab 100 mg</i>	1	
<i>trazodone hcl tab 150 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>trazodone hcl tab 300 mg</i>	1	
TRINTELLIX TAB 5MG	2	
TRINTELLIX TAB 10MG	2	
TRINTELLIX TAB 20MG	2	
VIIBRYD KIT STARTER	2	NM
VIIBRYD TAB 10MG	2	
VIIBRYD TAB 20MG	2	
VIIBRYD TAB 40MG	2	
SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)		
CYMBALTA CAP 20MG	3	
CYMBALTA CAP 30MG	3	
CYMBALTA CAP 60MG	3	
DESVENLAFAX TAB 50MG ER	3	
DESVENLAFAX TAB 100MG ER	3	
<i>desvenlafaxine succinate tab er 24hr 25 mg (base equiv)</i>	2	
<i>desvenlafaxine succinate tab er 24hr 50 mg (base equiv)</i>	2	
<i>desvenlafaxine succinate tab er 24hr 100 mg (base equiv)</i>	2	
<i>desvenlafaxine tab er 24hr 50 mg</i>	2	
<i>desvenlafaxine tab er 24hr 100 mg</i>	2	
<i>duloxetine hcl enteric coated pellets cap 20 mg (base eq)</i>	1	
<i>duloxetine hcl enteric coated pellets cap 30 mg (base eq)</i>	1	
<i>duloxetine hcl enteric coated pellets cap 40 mg (base eq)</i>	1	
<i>duloxetine hcl enteric coated pellets cap 60 mg (base eq)</i>	1	
EFFEXOR XR CAP 37.5MG	3	
EFFEXOR XR CAP 75MG	3	
EFFEXOR XR CAP 150MG	3	
FETZIMA CAP 20MG	3	
FETZIMA CAP 40MG	3	
FETZIMA CAP 80MG	3	
FETZIMA CAP 120MG	3	
FETZIMA CAP TITRATIO	3	NM
KHEDEZLA TAB 50MG ER	3	
KHEDEZLA TAB 100MG ER	3	
PRISTIQ TAB 25MG	2	
PRISTIQ TAB 50MG	2	
PRISTIQ TAB 100MG	2	

Drug Name	Drug Tier	Requirements/Limits
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	1	
<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	1	
<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab 37.5 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab 100 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab er 24hr 37.5 mg (base equivalent)</i>	2	
<i>venlafaxine hcl tab er 24hr 75 mg (base equivalent)</i>	2	
<i>venlafaxine hcl tab er 24hr 150 mg (base equivalent)</i>	2	
<i>venlafaxine hcl tab er 24hr 225 mg (base equivalent)</i>	2	

TRICYCLIC AGENTS

<i>amitriptyline hcl tab 10 mg</i>	1	
<i>amitriptyline hcl tab 25 mg</i>	1	
<i>amitriptyline hcl tab 50 mg</i>	1	
<i>amitriptyline hcl tab 75 mg</i>	1	
<i>amitriptyline hcl tab 100 mg</i>	1	
<i>amitriptyline hcl tab 150 mg</i>	1	
<i>amoxapine tab 25 mg</i>	1	
<i>amoxapine tab 50 mg</i>	1	
<i>amoxapine tab 100 mg</i>	1	
<i>amoxapine tab 150 mg</i>	1	
ANAFRANIL CAP 25MG	3	
ANAFRANIL CAP 50MG	3	
ANAFRANIL CAP 75MG	3	
<i>clomipramine hcl cap 25 mg</i>	2	
<i>clomipramine hcl cap 50 mg</i>	2	
<i>clomipramine hcl cap 75 mg</i>	2	
<i>desipramine hcl tab 10 mg</i>	1	
<i>desipramine hcl tab 25 mg</i>	1	
<i>desipramine hcl tab 50 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>desipramine hcl tab 75 mg</i>	1	
<i>desipramine hcl tab 100 mg</i>	1	
<i>desipramine hcl tab 150 mg</i>	1	
<i>doxepin hcl cap 10 mg</i>	1	
<i>doxepin hcl cap 25 mg</i>	1	
<i>doxepin hcl cap 50 mg</i>	1	
<i>doxepin hcl cap 75 mg</i>	1	
<i>doxepin hcl cap 100 mg</i>	1	
<i>doxepin hcl cap 150 mg</i>	1	
<i>doxepin hcl conc 10 mg/ml</i>	1	
<i>imipramine hcl tab 10 mg</i>	1	
<i>imipramine hcl tab 25 mg</i>	1	
<i>imipramine hcl tab 50 mg</i>	1	
<i>imipramine pamoate cap 75 mg</i>	1	
<i>imipramine pamoate cap 100 mg</i>	1	
<i>imipramine pamoate cap 125 mg</i>	1	
<i>imipramine pamoate cap 150 mg</i>	1	
NORPRAMIN TAB 10MG	3	
NORPRAMIN TAB 25MG	3	
<i>nortriptyline hcl cap 10 mg</i>	1	
<i>nortriptyline hcl cap 25 mg</i>	1	
<i>nortriptyline hcl cap 50 mg</i>	1	
<i>nortriptyline hcl cap 75 mg</i>	1	
<i>nortriptyline hcl soln 10 mg/5ml</i>	1	
<i>protriptyline hcl tab 5 mg</i>	1	
<i>protriptyline hcl tab 10 mg</i>	1	
<i>trimipramine maleate cap 25 mg</i>	2	
<i>trimipramine maleate cap 50 mg</i>	2	
<i>trimipramine maleate cap 100 mg</i>	2	

ANTIDIABETICS

ALPHA-GLUCOSIDASE INHIBITORS

<i>acarbose tab 25 mg</i>	1	**
<i>acarbose tab 50 mg</i>	1	**
<i>acarbose tab 100 mg</i>	1	**
GLYSET TAB 25MG	2	**
GLYSET TAB 50MG	2	**
GLYSET TAB 100MG	2	**
<i>miglitol tab 25 mg</i>	2	**
<i>miglitol tab 50 mg</i>	2	**
<i>miglitol tab 100 mg</i>	2	**
PRECOSE TAB 25MG	3	**
PRECOSE TAB 50MG	3	**
PRECOSE TAB 100MG	3	**

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Drug Name	Drug Tier	Requirements/Limits
ANTIDIABETIC - AMYLIN ANALOGS		
SYMLINPEN 60 INJ 1000MCG	3	**
SYMLINPEN 120 INJ 1000MCG	3	**
ANTIDIABETIC COMBINATIONS		
ACTOPLUS MET TAB 15-500MG	3	**
ACTOPLUS MET TAB 15-850MG	3	**
DUETACT TAB 30-2MG	3	**
DUETACT TAB 30-4MG	3	**
<i>glipizide-metformin hcl tab 2.5-250 mg</i>	1	**
<i>glipizide-metformin hcl tab 2.5-500 mg</i>	1	**
<i>glipizide-metformin hcl tab 5-500 mg</i>	1	**
<i>glyburide-metformin tab 1.25-250 mg</i>	1	**
<i>glyburide-metformin tab 2.5-500 mg</i>	1	**
<i>glyburide-metformin tab 5-500 mg</i>	1	**
GLYXAMBI TAB 10-5 MG	2	**
GLYXAMBI TAB 25-5 MG	2	**
JANUMET TAB 50-500MG	2	**
JANUMET TAB 50-1000	2	**
JANUMET XR TAB 50-500MG	2	**
JANUMET XR TAB 50-1000	2	**
JANUMET XR TAB 100-1000	2	**
<i>pioglitazone hcl-glimepiride tab 30-2 mg</i>	2	**
<i>pioglitazone hcl-glimepiride tab 30-4 mg</i>	2	**
<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	2	**
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	2	**
SOLIQUA INJ 100/33	2	**
SYNJARDY TAB	2	**
SYNJARDY TAB 5-500MG	2	**
SYNJARDY TAB 5-1000MG	2	**
SYNJARDY TAB 12.5-500	2	**
SYNJARDY XR TAB	2	**
SYNJARDY XR TAB 5-1000MG	2	**
SYNJARDY XR TAB 10-1000	2	**
SYNJARDY XR TAB 25-1000	2	**
XIGDUO XR TAB 2.5-1000	2	**
XIGDUO XR TAB 5-500MG	2	**
XIGDUO XR TAB 5-1000MG	2	**
XIGDUO XR TAB 10-500MG	2	**
XIGDUO XR TAB 10-1000	2	**
BIGUANIDES		
FORTAMET TAB 500MG	3	PA; **

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Drug Name	Drug Tier	Requirements/Limits
FORTAMET TAB 1000MG	3	PA; **
GLUCOPHAGE TAB 500MG	3	**
GLUCOPHAGE TAB 500MG XR	3	**
GLUCOPHAGE TAB 750MG XR	3	**
GLUCOPHAGE TAB 850MG	3	**
GLUCOPHAGE TAB 1000MG	3	**
GLUMETZA TAB 500MG	3	PA; **
GLUMETZA TAB 1000MG	3	PA; **
<i>metformin hcl tab 500 mg</i>	1	**
<i>metformin hcl tab 850 mg</i>	1	**
<i>metformin hcl tab 1000 mg</i>	1	**
<i>metformin hcl tab er 24hr 500 mg</i>	1	**
<i>metformin hcl tab er 24hr 750 mg</i>	1	**
<i>metformin hcl tab er 24hr modified release 500 mg</i>	2	PA; **
<i>metformin hcl tab er 24hr modified release 1000 mg</i>	2	PA; **
<i>metformin hcl tab er 24hr osmotic 500 mg</i>	2	PA; **
<i>metformin hcl tab er 24hr osmotic 1000 mg</i>	2	PA; **
DIABETIC OTHER		
BAQSIMI ONE POW 3MG/DOSE	2	NM; **
<i>diazoxide susp 50 mg/ml</i>	2	**
GLUCAGEN INJ HYPOKIT	2	NM; **
GLUCAGON EMR SOL 1MG	2	NM; **
GLUCAGON KIT 1MG	2	NM; **
KORLYM TAB 300MG	3	PA; **
PROGLYCEM SUS 50MG/ML	2	**
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
JANUVIA TAB 25MG	2	**
JANUVIA TAB 50MG	2	**
JANUVIA TAB 100MG	2	**
DOPAMINE RECEPTOR AGONISTS - ANTIDIABETIC		
CYCLOSET TAB 0.8MG	3	**
INCRETIN MIMETIC AGENTS (GLP-1 RECEPTOR AGONISTS)		
BYDUREON BC INJ 2/0.85ML	3	**
BYDUREON PEN INJ 2MG	3	**
BYETTA INJ 5MCG	3	**
BYETTA INJ 10MCG	3	**
OZEMPIC INJ 2/1.5ML	2	**
TRULICITY INJ 0.75/0.5	2	**
TRULICITY INJ 1.5/0.5	2	**

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Drug Name	Drug Tier	Requirements/Limits
VICTOZA INJ 18MG/3ML	2	QL (3 pens / 30 days); **
INSULIN		
BASAGLAR INJ 100UNIT	2	**
FIASP FLEX INJ TOUCH	2	**
FIASP INJ 100/ML	2	**
HUMULIN R INJ U-500	2	**
LANTUS INJ 100/ML	2	**
LANTUS SOLOS INJ 100/ML	2	**
LEVEMIR INJ	2	**
LEVEMIR INJ FLEXTUOC	2	**
NOVOLIN70/30 INJ RELION	2	**
NOVOLIN INJ 70/30	2	**
NOVOLIN N INJ RELION	2	**
NOVOLIN N INJ U-100	2	**
NOVOLIN R INJ 100 UNIT	2	**
NOVOLIN R INJ RELION	2	**
NOVOLIN R INJ U-100	2	**
NOVOLOG INJ 100/ML	2	**
NOVOLOG INJ FLEXPEN	2	**
NOVOLOG INJ PENFILL	2	**
NOVOLOG MIX INJ 70/30	2	**
NOVOLOG MIX INJ FLEXPEN	2	**
TOUJEO MAX INJ 300IU/ML	2	**
TOUJEO SOLO INJ 300IU/ML	2	**
TRESIBA FLEX INJ 100UNIT	2	**
TRESIBA FLEX INJ 200UNIT	2	**
TRESIBA INJ 100UNIT	2	**
INSULIN SENSITIZING AGENTS		
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	2	**
<i>pioglitazone hcl tab 30 mg (base equiv)</i>	2	**
<i>pioglitazone hcl tab 45 mg (base equiv)</i>	2	**
MEGLITINIDE ANALOGUES		
<i>nateglinide tab 60 mg</i>	1	**
<i>nateglinide tab 120 mg</i>	1	**
<i>repaglinide tab 0.5 mg</i>	2	**
<i>repaglinide tab 1 mg</i>	2	**
<i>repaglinide tab 2 mg</i>	2	**
STARLIX TAB 60MG	3	**
STARLIX TAB 120MG	3	**
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS		
FARXIGA TAB 5MG	2	**
FARXIGA TAB 10MG	2	**

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Drug Name	Drug Tier	Requirements/Limits
JARDIANCE TAB 10MG	2	**
JARDIANCE TAB 25MG	2	**
SULFONYLUREAS		
AMARYL TAB 1MG	3	**
AMARYL TAB 2MG	3	**
AMARYL TAB 4MG	3	**
<i>glimepiride tab 1 mg</i>	1	**
<i>glimepiride tab 2 mg</i>	1	**
<i>glimepiride tab 4 mg</i>	1	**
<i>glipizide tab 5 mg</i>	1	**
<i>glipizide tab 10 mg</i>	1	**
<i>glipizide tab er 24hr 2.5 mg</i>	1	**
<i>glipizide tab er 24hr 5 mg</i>	1	**
<i>glipizide tab er 24hr 10 mg</i>	1	**
<i>glipizide xl tab 2.5mg</i>	1	**
<i>glipizide xl tab 5mg</i>	1	**
<i>glipizide xl tab 10mg</i>	1	**
GLUCOTROL TAB 5MG	3	**
GLUCOTROL TAB 10MG	3	**
GLUCOTROL XL TAB 2.5MG	3	**
GLUCOTROL XL TAB 5MG	3	**
GLUCOTROL XL TAB 10MG	3	**
<i>glyburide micronized tab 1.5 mg</i>	1	**
<i>glyburide micronized tab 3 mg</i>	1	**
<i>glyburide micronized tab 6 mg</i>	1	**
<i>glyburide tab 1.25 mg</i>	1	**
<i>glyburide tab 2.5 mg</i>	1	**
<i>glyburide tab 5 mg</i>	1	**
GLYNASE TAB 1.5MG	3	**
GLYNASE TAB 3MG	3	**
GLYNASE TAB 6MG	3	**
<i>tolbutamide tab 500 mg</i>	1	**

ANTIDIARRHEAL/PROBIOTIC AGENTS

ANTIPERISTALTIC AGENTS

<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	1	NM
<i>paregoric tincture 2 mg/5ml (morphine equivalent)</i>	2	NM

ANTIDOTES AND SPECIFIC ANTAGONISTS

ANTIDOTES - CHELATING AGENTS

CHEMET CAP 100MG	3	NM
<i>deferasirox tab 90 mg</i>	2	SP
<i>deferasirox tab 180 mg</i>	2	SP

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Drug Name	Drug Tier	Requirements/Limits
<i>deferasirox tab 360 mg</i>	2	SP
<i>deferasirox tab for oral susp 125 mg</i>	2	SP, PA
<i>deferasirox tab for oral susp 250 mg</i>	2	SP, PA
<i>deferasirox tab for oral susp 500 mg</i>	2	SP, PA
EXJADE TAB 125MG	3	SP, PA
EXJADE TAB 250MG	3	SP, PA
EXJADE TAB 500MG	3	SP, PA
FERRIPROX SOL 100MG/ML	3	
FERRIPROX TAB 500MG	3	
JADENU SPRKL GRA 90MG	3	SP
JADENU SPRKL GRA 180MG	3	SP
JADENU SPRKL GRA 360MG	3	SP
JADENU TAB 90MG	3	SP
JADENU TAB 180MG	3	SP
JADENU TAB 360MG	3	SP

OPIOID ANTAGONISTS

<i>naloxone hcl inj 0.4 mg/ml</i>	1	NM
<i>naloxone hcl inj 4 mg/10ml</i>	1	NM
<i>naloxone hcl soln cartridge 0.4 mg/ml</i>	1	NM
<i>naloxone hcl soln prefilled syringe 2 mg/2ml</i>	1	NM
<i>naloxone hcl solution auto-injector 2 mg/0.4ml</i>	2	NM
<i>naltrexone hcl tab 50 mg</i>	1	NM
NARCAN SPR	2	NM

ANTIEMETICS

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<i>ondansetron hcl oral soln 4 mg/5ml</i>	1	QL (225 mL / 30 days), NM
<i>ondansetron hcl tab 4 mg</i>	1	QL (45 tabs / 30 days), NM
<i>ondansetron hcl tab 8 mg</i>	1	QL (45 tabs / 30 days), NM
<i>ondansetron hcl tab 24 mg</i>	1	QL (14 tabs / 30 days), NM
<i>ondansetron orally disintegrating tab 4 mg</i>	1	QL (45 tabs / 30 days), NM
<i>ondansetron orally disintegrating tab 8 mg</i>	1	QL (45 tabs / 30 days), NM

5-HT3 RECEPTOR ANTAGONISTS

ANZEMET TAB 50MG	3	QL (14 tabs / 23 days), NM
<i>granisetron hcl tab 1 mg</i>	2	QL (14 tabs / 23 days), NM

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Drug Name	Drug Tier	Requirements/Limits
<i>ondansetron hcl inj 4 mg/2ml (2 mg/ml)</i>	1	NM
<i>ondansetron hcl inj 40 mg/20ml (2 mg/ml)</i>	1	NM
SANCUSO DIS 3.1MG	3	QL (2 patches / 23 days), NM
ZOFRAN SOL 4MG/5ML	3	QL (225mL / 30 days), NM
ZOFRAN TAB 4MG	3	QL (45 tablets / 30 days), NM
ZOFRAN TAB 4MG ODT	3	QL (45 tablets / 30 days), NM
ZOFRAN TAB 8MG	3	QL (45 tablets / 30 days), NM
ZOFRAN TAB 8MG ODT	3	QL (45 tablets / 30 days), NM

ANTIEMETICS - ANTICHOLINERGIC

<i>scopolamine td patch 72hr 1 mg/3days</i>	2	NM
TIGAN CAP 300MG	3	NM
TRANSDERM-SC DIS 1MG/3DAY	3	NM
<i>trimethobenzamide hcl cap 300 mg</i>	1	NM

ANTIEMETICS - MISCELLANEOUS

AKYNZEO CAP 300-0.5	3	QL (2 caps / 23 days), NM
BONJESTA TAB 20-20MG	3	QL (60 tabs / 30 days), NM
DICLEGIS TAB 10-10MG	3	QL (60 tabs / 30 days), NM
<i>dronabinol cap 2.5 mg</i>	2	NM
<i>dronabinol cap 5 mg</i>	2	NM
<i>dronabinol cap 10 mg</i>	2	NM
MARINOL CAP 2.5MG	3	NM
MARINOL CAP 5MG	3	NM
MARINOL CAP 10MG	3	NM

SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS

<i>aprepitant capsule 40 mg</i>	2	QL (1 cap / 21 days), NM
<i>aprepitant capsule 80 mg</i>	2	QL (8 caps / 21 days), NM
<i>aprepitant capsule 125 mg</i>	2	QL (2 ea / 21 days), NM
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	2	QL (6 caps / 21 days), NM
EMEND CAP 40MG	3	QL (1 ea / 21 days), NM
EMEND CAP 80MG	3	QL (8 caps / 21 days), NM

Drug Name	Drug Tier	Requirements/Limits
EMEND CAP 125MG	3	QL (2 caps / 21 days), NM
EMEND SUS 125MG	3	QL (2 kits / 23 days), NM
EMEND TRIPAC PAK 80 & 125	3	QL (6 caps / 21 days), NM
VARUBI TAB 90MG	3	QL (4 tabs / 30 days), NM

ANTIFUNGALS

ANTIFUNGALS

ANCOBON CAP 250MG	3	NM
ANCOBON CAP 500MG	3	NM
<i>griseofulvin microsize susp 125 mg/5ml</i>	1	NM
<i>griseofulvin microsize tab 500 mg</i>	1	NM
<i>griseofulvin ultramicrosize tab 125 mg</i>	1	NM
<i>griseofulvin ultramicrosize tab 250 mg</i>	1	NM
<i>nystatin tab 500000 unit</i>	1	NM
<i>terbinafine hcl tab 250 mg</i>	1	QL (112 tabs / year), NM

IMIDAZOLE-RELATED ANTIFUNGALS

CRESEMBA CAP 186 MG	3	NM
DIFLUCAN SUS 10MG/ML	3	NM
DIFLUCAN SUS 40MG/ML	3	NM
DIFLUCAN TAB 50MG	3	NM
DIFLUCAN TAB 100MG	3	NM
DIFLUCAN TAB 150MG	3	NM
DIFLUCAN TAB 200MG	3	NM
<i>fluconazole for susp 10 mg/ml</i>	1	NM
<i>fluconazole for susp 40 mg/ml</i>	1	NM
<i>fluconazole tab 50 mg</i>	1	NM
<i>fluconazole tab 100 mg</i>	1	NM
<i>fluconazole tab 150 mg</i>	1	NM
<i>fluconazole tab 200 mg</i>	1	NM
<i>itraconazole cap 100 mg</i>	2	NM, PA
<i>itraconazole oral soln 10 mg/ml</i>	2	NM, PA
<i>ketoconazole tab 200 mg</i>	1	NM
NOXAFIL SUS 40MG/ML	3	
NOXAFIL TAB 100MG	3	
SPORANOX CAP 100MG	3	NM, PA
SPORANOX CAP PULSEPAK	3	NM, PA
SPORANOX SOL 10MG/ML	3	NM, PA
TOLSURA CAP 65MG	3	NM, PA
VFEND SUS 40MG/ML	3	NM

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Drug Name	Drug Tier	Requirements/Limits
VFEND TAB 50MG	3	NM
VFEND TAB 200MG	3	NM
<i>voriconazole for susp 40 mg/ml</i>	2	NM
<i>voriconazole tab 50 mg</i>	2	NM
<i>voriconazole tab 200 mg</i>	2	NM

ANTIHIISTAMINES

ANTIHIISTAMINES - ETHANOLAMINES

<i>carbinoxamine maleate soln 4 mg/5ml</i>	1	NM
<i>carbinoxamine maleate tab 4 mg</i>	1	NM
<i>clemastine fumarate tab 2.68 mg</i>	1	NM

ANTIHIISTAMINES - NON-SEDATING

CLARINEX TAB 5MG	3	NM
<i>desloratadine tab 5 mg</i>	1	NM
<i>levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)</i>	1	NM
<i>levocetirizine dihydrochloride tab 5 mg</i>	1	NM

ANTIHIISTAMINES - PHENOTHIAZINES

<i>phenadoz sup 12.5mg</i>	1	NM
<i>phenadoz sup 25mg</i>	1	NM
<i>promethazine hcl suppos 12.5 mg</i>	1	NM
<i>promethazine hcl suppos 25 mg</i>	1	NM
<i>promethazine hcl syrup 6.25 mg/5ml</i>	1	NM
<i>promethazine hcl tab 12.5 mg</i>	1	NM
<i>promethazine hcl tab 25 mg</i>	1	NM
<i>promethazine hcl tab 50 mg</i>	1	NM
<i>promethegan sup 12.5mg</i>	1	NM
<i>promethegan sup 25mg</i>	1	NM
<i>promethegan sup 50mg</i>	1	NM

ANTIHIISTAMINES - PIPERIDINES

<i>cyproheptadine hcl syrup 2 mg/5ml</i>	1	NM
<i>cyproheptadine hcl tab 4 mg</i>	1	NM

ANTIHYPERLIPIDEMICS

ADENOSINE TRIPHOSPHATE-CITRATE LYASE (ACL) INHIBITORS

NEXLETOL TAB 180MG	3	PA
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ANTIHYPERLIPIDEMICS - COMBINATIONS

<i>ezetimibe-simvastatin tab 10-10 mg</i>	2	
<i>ezetimibe-simvastatin tab 10-20 mg</i>	2	
<i>ezetimibe-simvastatin tab 10-40 mg</i>	2	
<i>ezetimibe-simvastatin tab 10-80 mg</i>	2	
VYTORIN TAB 10-10MG	3	
VYTORIN TAB 10-20MG	3	
VYTORIN TAB 10-40MG	3	

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Drug Name	Drug Tier	Requirements/Limits
VYTORIN TAB 10-80MG	3	
ANTIHYPERLIPIDEMICS - MISC.		
LOVAZA CAP 1GM	3	
<i>omega-3-acid ethyl esters cap 1 gm</i>	1	
VASCEPA CAP 0.5GM	2	
VASCEPA CAP 1GM	2	
BILE ACID SEQUESTRANTS		
<i>cholestyramine light powder 4 gm/dose</i>	1	
<i>cholestyramine light powder packets 4 gm</i>	1	
<i>cholestyramine powder 4 gm/dose</i>	1	
<i>cholestyramine powder packets 4 gm</i>	1	
<i>colesevelam hcl packet for susp 3.75 gm</i>	2	
<i>colesevelam hcl tab 625 mg</i>	2	
COLESTID FLA GRA 5/7.5GM	3	
COLESTID FLA GRA 5GM	3	
COLESTID GRA 5GM	3	
COLESTID POW 5GM	3	
COLESTID TAB 1GM	3	
<i>colestipol hcl granule packets 5 gm</i>	1	
<i>colestipol hcl granules 5 gm</i>	1	
<i>colestipol hcl tab 1 gm</i>	1	
<i>prevalite pow 4gm</i>	1	
<i>prevalite pow 4gm pk</i>	1	
QUESTRAN POW 4GM LITE	3	
WELCHOL PAK 3.75GM	2	
WELCHOL TAB 625MG	2	
FIBRIC ACID DERIVATIVES		
ANTARA CAP 30MG	3	
ANTARA CAP 90MG	3	
<i>choline fenofibrate cap dr 45 mg (fenofibric acid equiv)</i>	1	
<i>choline fenofibrate cap dr 135 mg (fenofibric acid equiv)</i>	1	
<i>fenofibrate cap 50 mg</i>	1	
<i>fenofibrate cap 150 mg</i>	1	
<i>fenofibrate micronized cap 43 mg</i>	1	
<i>fenofibrate micronized cap 67 mg</i>	1	
<i>fenofibrate micronized cap 130 mg</i>	1	
<i>fenofibrate micronized cap 134 mg</i>	1	
<i>fenofibrate micronized cap 200 mg</i>	1	
<i>fenofibrate tab 48 mg</i>	1	
<i>fenofibrate tab 54 mg</i>	1	
<i>fenofibrate tab 145 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>fenofibrate tab 160 mg</i>	1	
FENOFIBRATE TAB 160MG	3	
<i>gemfibrozil tab 600 mg</i>	1	
LIPOFEN CAP 50MG	3	
LIPOFEN CAP 150MG	3	
LOPID TAB 600MG	3	
TRICOR TAB 48MG	3	
TRICOR TAB 145MG	3	
TRIGLIDE TAB 160MG	3	
TRILIPIX CAP 45MG	3	
TRILIPIX CAP 135MG	3	

HMG COA REDUCTASE INHIBITORS

<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	1	
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	1	
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	1	
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	1	
CRESTOR TAB 5MG	3	
CRESTOR TAB 10MG	3	
CRESTOR TAB 20MG	3	
CRESTOR TAB 40MG	3	
EZALLOR SPR CAP 5MG	3	
EZALLOR SPR CAP 10MG	3	
EZALLOR SPR CAP 20MG	3	
EZALLOR SPR CAP 40MG	3	
<i>fluvastatin sodium cap 20 mg (base equivalent)</i>	2	
<i>fluvastatin sodium cap 40 mg (base equivalent)</i>	2	
<i>fluvastatin sodium tab er 24 hr 80 mg (base equivalent)</i>	2	
LESCOL XL TAB 80MG	3	
LIPITOR TAB 10MG	3	
LIPITOR TAB 20MG	3	
LIPITOR TAB 40MG	3	
LIPITOR TAB 80MG	3	
LIVALO TAB 1MG	3	
LIVALO TAB 2MG	3	
LIVALO TAB 4MG	3	
<i>lovastatin tab 10 mg</i>	1	
<i>lovastatin tab 20 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>lovastatin tab 40 mg</i>	1	
PRAVACHOL TAB 20MG	3	
PRAVACHOL TAB 40MG	3	
<i>pravastatin sodium tab 10 mg</i>	1	
<i>pravastatin sodium tab 20 mg</i>	1	
<i>pravastatin sodium tab 40 mg</i>	1	
<i>pravastatin sodium tab 80 mg</i>	1	
<i>rosuvastatin calcium tab 5 mg</i>	1	
<i>rosuvastatin calcium tab 10 mg</i>	1	
<i>rosuvastatin calcium tab 20 mg</i>	1	
<i>rosuvastatin calcium tab 40 mg</i>	1	
<i>simvastatin tab 5 mg</i>	1	
<i>simvastatin tab 10 mg</i>	1	
<i>simvastatin tab 20 mg</i>	1	
<i>simvastatin tab 40 mg</i>	1	
<i>simvastatin tab 80 mg</i>	1	
ZOCOR TAB 10MG	3	
ZOCOR TAB 20MG	3	
ZOCOR TAB 40MG	3	
ZOCOR TAB 80MG	3	
ZYPITAMAG TAB 1MG	3	
ZYPITAMAG TAB 2MG	3	
ZYPITAMAG TAB 4MG	3	
INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS		
<i>ezetimibe tab 10 mg</i>	1	
ZETIA TAB 10MG	3	
NICOTINIC ACID DERIVATIVES		
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	2	
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	2	
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	2	
<i>niacor tab 500mg</i>	1	NM
NIASPAN TAB 500MG ER	3	
NIASPAN TAB 750MG ER	3	
NIASPAN TAB 1000 ER	3	
PROPROTEIN CONVERTASE SUBTILISIN/KEXIN TYPE 9 INHIBITORS		
PRALUENT INJ 75MG/ML	3	PA
PRALUENT INJ 150MG/ML	3	PA
REPATHA INJ 140MG/ML	3	PA
REPATHA PUSH INJ 420/3.5	3	PA
REPATHA SURE INJ 140MG/ML	3	PA

Drug Name	Drug Tier	Requirements/Limits
ANTIHYPERTENSIVES		
ACE INHIBITORS		
ACCUPRIL TAB 5MG	3	
ACCUPRIL TAB 10MG	3	
ACCUPRIL TAB 20MG	3	
ACCUPRIL TAB 40MG	3	
ALTACE CAP 1.25MG	3	
ALTACE CAP 2.5MG	3	
ALTACE CAP 5MG	3	
ALTACE CAP 10MG	3	
<i>benazepril hcl tab 5 mg</i>	1	
<i>benazepril hcl tab 10 mg</i>	1	
<i>benazepril hcl tab 20 mg</i>	1	
<i>benazepril hcl tab 40 mg</i>	1	
<i>captopril tab 12.5 mg</i>	1	
<i>captopril tab 25 mg</i>	1	
<i>captopril tab 50 mg</i>	1	
<i>captopril tab 100 mg</i>	1	
<i>enalapril maleate tab 2.5 mg</i>	1	
<i>enalapril maleate tab 5 mg</i>	1	
<i>enalapril maleate tab 10 mg</i>	1	
<i>enalapril maleate tab 20 mg</i>	1	
EPANED SOL 1MG/ML	3	
<i>fosinopril sodium tab 10 mg</i>	1	
<i>fosinopril sodium tab 20 mg</i>	1	
<i>fosinopril sodium tab 40 mg</i>	1	
<i>lisinopril tab 2.5 mg</i>	1	
<i>lisinopril tab 5 mg</i>	1	
<i>lisinopril tab 10 mg</i>	1	
<i>lisinopril tab 20 mg</i>	1	
<i>lisinopril tab 30 mg</i>	1	
<i>lisinopril tab 40 mg</i>	1	
LOTENSIN TAB 10MG	3	
LOTENSIN TAB 20MG	3	
LOTENSIN TAB 40MG	3	
<i>moexipril hcl tab 7.5 mg</i>	1	
<i>moexipril hcl tab 15 mg</i>	1	
<i>perindopril erbumine tab 2 mg</i>	1	
<i>perindopril erbumine tab 4 mg</i>	1	
<i>perindopril erbumine tab 8 mg</i>	1	
PRINIVIL TAB 5MG	3	
PRINIVIL TAB 10MG	3	
PRINIVIL TAB 20MG	3	

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Drug Name	Drug Tier	Requirements/Limits
QBRELIS SOL 1MG/ML	3	
<i>quinapril hcl tab 5 mg</i>	1	
<i>quinapril hcl tab 10 mg</i>	1	
<i>quinapril hcl tab 20 mg</i>	1	
<i>quinapril hcl tab 40 mg</i>	1	
<i>ramipril cap 1.25 mg</i>	1	
<i>ramipril cap 2.5 mg</i>	1	
<i>ramipril cap 5 mg</i>	1	
<i>ramipril cap 10 mg</i>	1	
<i>trandolapril tab 1 mg</i>	1	
<i>trandolapril tab 2 mg</i>	1	
<i>trandolapril tab 4 mg</i>	1	
VASOTEC TAB 2.5MG	3	
VASOTEC TAB 5MG	3	
VASOTEC TAB 10MG	3	
VASOTEC TAB 20MG	3	
ZESTRIL TAB 2.5MG	3	
ZESTRIL TAB 5MG	3	
ZESTRIL TAB 10MG	3	
ZESTRIL TAB 20MG	3	
ZESTRIL TAB 30MG	3	
ZESTRIL TAB 40MG	3	

AGENTS FOR PHEOCHROMOCYTOMA

DEMSEER CAP 250MG	3	NM
DIBENZYLINE CAP 10MG	2	NM
<i>phenoxybenzamine hcl cap 10 mg</i>	2	NM

ANGIOTENSIN II RECEPTOR ANTAGONISTS

ATACAND TAB 4MG	3	
ATACAND TAB 8MG	3	
ATACAND TAB 16MG	3	
ATACAND TAB 32MG	3	
AVAPRO TAB 75MG	3	
AVAPRO TAB 150MG	3	
AVAPRO TAB 300MG	3	
BENICAR TAB 5MG	3	
BENICAR TAB 20MG	3	
BENICAR TAB 40MG	3	
<i>candesartan cilexetil tab 4 mg</i>	1	
<i>candesartan cilexetil tab 8 mg</i>	1	
<i>candesartan cilexetil tab 16 mg</i>	1	
<i>candesartan cilexetil tab 32 mg</i>	1	
COZAAR TAB 25MG	3	
COZAAR TAB 50MG	3	

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Drug Name	Drug Tier	Requirements/Limits
COZAAR TAB 100MG	3	
DIOVAN TAB 40MG	3	
DIOVAN TAB 80MG	3	
DIOVAN TAB 160MG	3	
DIOVAN TAB 320MG	3	
EDARBI TAB 40MG	3	
EDARBI TAB 80MG	3	
<i>eprosartan mesylate tab 600 mg</i>	1	
<i>irbesartan tab 75 mg</i>	1	
<i>irbesartan tab 150 mg</i>	1	
<i>irbesartan tab 300 mg</i>	1	
<i>losartan potassium tab 25 mg</i>	1	
<i>losartan potassium tab 50 mg</i>	1	
<i>losartan potassium tab 100 mg</i>	1	
<i>olmesartan medoxomil tab 5 mg</i>	2	
<i>olmesartan medoxomil tab 20 mg</i>	2	
<i>olmesartan medoxomil tab 40 mg</i>	2	
<i>telmisartan tab 20 mg</i>	1	
<i>telmisartan tab 40 mg</i>	1	
<i>telmisartan tab 80 mg</i>	1	
<i>valsartan tab 40 mg</i>	1	
<i>valsartan tab 80 mg</i>	1	
<i>valsartan tab 160 mg</i>	1	
<i>valsartan tab 320 mg</i>	1	
ANTIADRENERGIC ANTIHYPERTENSIVES		
CARDURA TAB 1MG	3	
CARDURA TAB 2MG	3	
CARDURA TAB 4MG	3	
CARDURA TAB 8MG	3	
<i>clonidine hcl tab 0.1 mg</i>	1	
<i>clonidine hcl tab 0.2 mg</i>	1	
<i>clonidine hcl tab 0.3 mg</i>	1	
<i>clonidine td patch weekly 0.1 mg/24hr</i>	2	
<i>clonidine td patch weekly 0.2 mg/24hr</i>	2	
<i>clonidine td patch weekly 0.3 mg/24hr</i>	2	
<i>doxazosin mesylate tab 1 mg</i>	1	
<i>doxazosin mesylate tab 2 mg</i>	1	
<i>doxazosin mesylate tab 4 mg</i>	1	
<i>doxazosin mesylate tab 8 mg</i>	1	
<i>guanfacine hcl tab 1 mg</i>	1	
<i>guanfacine hcl tab 2 mg</i>	1	
<i>methyldopa tab 250 mg</i>	1	
<i>methyldopa tab 500 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
MINIPRESS CAP 1MG	3	
MINIPRESS CAP 2MG	3	
MINIPRESS CAP 5MG	3	
<i>prazosin hcl cap 1 mg</i>	1	
<i>prazosin hcl cap 2 mg</i>	1	
<i>prazosin hcl cap 5 mg</i>	1	
<i>terazosin hcl cap 1 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 2 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 5 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 10 mg (base equivalent)</i>	1	
ANTIHYPERTENSIVE COMBINATIONS		
ACCURETIC TAB 10-12.5	3	
ACCURETIC TAB 20-12.5	3	
ACCURETIC TAB 20-25MG	3	
<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	1	
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	2	
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	2	
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	2	
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	2	
<i>amlodipine besylate-valsartan tab 5-160 mg</i>	2	
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	2	
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	2	
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	2	
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg</i>	2	
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i>	2	
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i>	2	
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg</i>	2	
<i>atenolol & chlorthalidone tab 50-25 mg</i>	1	
<i>atenolol & chlorthalidone tab 100-25 mg</i>	1	
AVALIDE TAB 150-12.5	3	
AVALIDE TAB 300-12.5	3	
<i>benazepril & hydrochlorothiazide tab 5-6.25 mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	1	
BENICAR HCT TAB 20-12.5	3	
BENICAR HCT TAB 40-12.5	3	
BENICAR HCT TAB 40-25MG	3	
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	1	
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i>	1	
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i>	1	
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i>	1	
DIOVAN HCT TAB 80/12.5	3	
DIOVAN HCT TAB 160-12.5	3	
DIOVAN HCT TAB 160-25MG	3	
DIOVAN HCT TAB 320-12.5	3	
DIOVAN HCT TAB 320-25MG	3	
EDARBYCLOR TAB 40-12.5	3	
EDARBYCLOR TAB 40-25MG	3	
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	1	
EXFORGE TAB 5-160MG	3	
EXFORGE TAB 5-320MG	3	
EXFORGE TAB 10-160MG	3	
EXFORGE TAB 10-320MG	3	
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	1	
HYZAAR TAB 50-12.5	3	
HYZAAR TAB 100-12.5	3	
HYZAAR TAB 100-25	3	
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	1	
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	1	
LOTENSIN HCT TAB 10-12.5	3	
LOTENSIN HCT TAB 20-12.5	3	
LOTENSIN HCT TAB 20-25MG	3	
LOTREL CAP 5-10MG	3	
LOTREL CAP 5-20MG	3	
LOTREL CAP 10-20MG	3	
LOTREL CAP 10-40MG	3	
<i>methyldopa & hydrochlorothiazide tab 250-15 mg</i>	1	
<i>methyldopa & hydrochlorothiazide tab 250-25 mg</i>	1	
<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	1	
<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>metoprolol & hydrochlorothiazide tab 100-50 mg</i>	1	
MICARDIS HCT TAB 40/12.5	3	
MICARDIS HCT TAB 80-25MG	3	
MICARDIS HCT TAB 80/12.5	3	
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>	2	
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>	2	
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>	2	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>	2	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>	2	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>	2	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i>	2	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>	2	
<i>propranolol & hydrochlorothiazide tab 40-25 mg</i>	1	
<i>propranolol & hydrochlorothiazide tab 80-25 mg</i>	1	
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	1	
TARKA TAB 2-180 CR	3	
TARKA TAB 2-240 CR	3	
TARKA TAB 4-240 CR	3	
TEKTURN HCT TAB 150-12.5	3	
TEKTURN HCT TAB 150-25MG	3	
TEKTURN HCT TAB 300-12.5	3	
TEKTURN HCT TAB 300-25MG	3	
<i>telmisartan-amlodipine tab 40-5 mg</i>	1	
<i>telmisartan-amlodipine tab 40-10 mg</i>	1	
<i>telmisartan-amlodipine tab 80-5 mg</i>	1	
<i>telmisartan-amlodipine tab 80-10 mg</i>	1	
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	1	
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	1	
TENORETIC TAB 50	3	
TENORETIC TAB 100	3	
<i>trandolapril-verapamil hcl tab er 1-240 mg</i>	2	
<i>trandolapril-verapamil hcl tab er 2-180 mg</i>	2	
<i>trandolapril-verapamil hcl tab er 2-240 mg</i>	2	
<i>trandolapril-verapamil hcl tab er 4-240 mg</i>	2	
TRIBENZOR20- TAB 5-12.5MG	3	
TRIBENZOR40- TAB 5-12.5MG	3	
TRIBENZOR40- TAB 5-25MG	3	
TRIBENZOR40- TAB 10-12.5	3	
TRIBENZOR40- TAB 10-25MG	3	
TWYNSTA TAB 40-5MG	3	
TWYNSTA TAB 40-10MG	3	
TWYNSTA TAB 80-5MG	3	
TWYNSTA TAB 80-10MG	3	
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	1	
ZIAC TAB 2.5/6.25	3	
ZIAC TAB 5-6.25MG	3	
ZIAC TAB 10/6.25	3	
<i>DIRECT RENIN INHIBITORS</i>		
<i>aliskiren fumarate tab 150 mg (base equivalent)</i>	2	
<i>aliskiren fumarate tab 300 mg (base equivalent)</i>	2	
TEKTURNA TAB 150MG	3	
TEKTURNA TAB 300MG	3	
<i>SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)</i>		
<i>eplerenone tab 25 mg</i>	2	
<i>eplerenone tab 50 mg</i>	2	
<i>VASODILATORS</i>		
<i>hydralazine hcl tab 10 mg</i>	1	
<i>hydralazine hcl tab 25 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>hydralazine hcl tab 50 mg</i>	1	
<i>hydralazine hcl tab 100 mg</i>	1	
<i>minoxidil tab 2.5 mg</i>	1	
<i>minoxidil tab 10 mg</i>	1	

ANTIMALARIALS

ANTIMALARIAL COMBINATIONS

<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	2	QL (42 tabs / year), NM
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	2	QL (42 tabs / year), NM
COARTEM TAB 20-120MG	3	QL (24 tabs / year), NM
MALARONE TAB 62.5-25	3	QL (42 tabs / year), NM
MALARONE TAB 250-100	3	QL (42 tabs / year), NM

ANTIMALARIALS

<i>chloroquine phosphate tab 250 mg</i>	1	QL (16 tabs / year)
<i>chloroquine phosphate tab 500 mg</i>	1	QL (16 tabs / year)
<i>hydroxychloroquine sulfate tab 200 mg</i>	1	
<i>mefloquine hcl tab 250 mg</i>	1	QL (14 tabs / year)
PLAQUENIL TAB 200MG	3	
<i>primaquine phosphate tab 26.3 mg (15 mg base)</i>	2	QL (46 tabs / year), NM
PRIMAQUINE TAB 26.3MG	3	QL (46 tabs / year), NM
QUALAQUIN CAP 324MG	3	QL (84 caps / year), NM
<i>quinine sulfate cap 324 mg</i>	1	QL (84 caps / year), NM

ANTIMYASTHENIC/CHOLINERGIC AGENTS

ANTIMYASTHENIC/CHOLINERGIC AGENTS

FIRDAPSE TAB 10MG	3	NM, PA
GUANIDINE TAB 125MG	1	NM
<i>pyridostigmine bromide oral soln 60 mg/5ml</i>	2	NM
<i>pyridostigmine bromide tab 60 mg</i>	1	NM
<i>pyridostigmine bromide tab er 180 mg</i>	2	NM
RUZURGI TAB 10MG	3	PA

ANTIMYCOBACTERIAL AGENTS

ANTI TB COMBINATIONS

RIFAMATE CAP	3	NM
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ANTIMYCOBACTERIAL AGENTS

<i>cycloserine cap 250 mg</i>	2	NM
<i>ethambutol hcl tab 100 mg</i>	1	NM
<i>ethambutol hcl tab 400 mg</i>	1	NM
<i>isoniazid inj 100 mg/ml</i>	1	NM
<i>isoniazid syrup 50 mg/5ml</i>	1	
<i>isoniazid tab 100 mg</i>	1	
<i>isoniazid tab 300 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
MYCOBUTIN CAP 150MG	3	NM
PASER GRA 4GM	3	NM
PRETOMANID TAB 200MG	3	NM
PRIFTIN TAB 150MG	3	NM
<i>pyrazinamide tab 500 mg</i>	1	NM
<i>rifabutin cap 150 mg</i>	1	NM
<i>rifampin cap 150 mg</i>	1	NM
<i>rifampin cap 300 mg</i>	1	NM
SIRTURO TAB 100MG	3	NM
TRECTOR TAB 250MG	3	NM

ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

ALKYLATING AGENTS

ALKERAN TAB 2MG	2	NM
<i>cyclophosphamide cap 25 mg</i>	2	NM
<i>cyclophosphamide cap 50 mg</i>	2	NM
<i>cyclophosphamide for inj 1 gm</i>	1	NM
<i>cyclophosphamide for inj 2 gm</i>	1	NM
<i>cyclophosphamide for inj 500 mg</i>	1	NM
GLEOSTINE CAP 10MG	3	NM
GLEOSTINE CAP 40MG	3	NM
GLEOSTINE CAP 100MG	3	NM
LEUKERAN TAB 2MG	2	NM
<i>melphalan tab 2 mg</i>	2	NM
MYLERAN TAB 2MG	2	NM
TEMODAR CAP 5MG	3	NM
TEMODAR CAP 20MG	3	NM
TEMODAR CAP 100MG	3	NM
TEMODAR CAP 140MG	3	NM
TEMODAR CAP 180MG	3	NM
TEMODAR CAP 250MG	3	NM
<i>temozolomide cap 5 mg</i>	2	NM
<i>temozolomide cap 20 mg</i>	2	NM
<i>temozolomide cap 100 mg</i>	2	NM
<i>temozolomide cap 140 mg</i>	2	NM
<i>temozolomide cap 180 mg</i>	2	NM
<i>temozolomide cap 250 mg</i>	2	NM

ANTIMETABOLITES

<i>capecitabine tab 150 mg</i>	2	NM
<i>capecitabine tab 500 mg</i>	2	NM
<i>cytarabine inj 20 mg/ml</i>	1	NM
<i>cytarabine inj pf 20 mg/ml</i>	1	NM
<i>cytarabine inj pf 100 mg/ml</i>	1	NM
<i>mercaptopurine tab 50 mg</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>methotrexate sodium for inj 1 gm</i>	2	NM
<i>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</i>	2	NM
<i>methotrexate sodium inj 250 mg/10ml (25 mg/ml)</i>	2	NM
<i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i>	2	NM
<i>methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)</i>	2	NM
<i>methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)</i>	2	NM
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	1	NM
PURIXAN SUS 20MG/ML	3	NM
TABLOID TAB 40MG	2	NM
TREXALL TAB 5MG	3	NM
TREXALL TAB 7.5MG	3	NM
TREXALL TAB 10MG	3	NM
TREXALL TAB 15MG	3	NM
XELODA TAB 150MG	3	NM
XELODA TAB 500MG	3	NM
ANTINEOPLASTIC - BCL-2 INHIBITORS		
VENCLEXTA TAB 10MG	3	NM
VENCLEXTA TAB 50MG	3	NM
VENCLEXTA TAB 100MG	3	NM
VENCLEXTA TAB START PK	3	NM
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS		
DAURISMO TAB 25MG	3	NM, PA
DAURISMO TAB 100MG	3	NM, PA
ERIVEDGE CAP 150MG	3	NM
ODOMZO CAP 200MG	3	NM
ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS		
<i>abiraterone acetate tab 250 mg</i>	2	NM
<i>anastrozole tab 1 mg</i>	1	
ARIMIDEX TAB 1MG	3	
AROMASIN TAB 25MG	3	
<i>bicalutamide tab 50 mg</i>	1	NM
CASODEX TAB 50MG	3	NM
DEPO-PROVERA INJ 400/ML	3	NM
EMCYT CAP 140MG	2	NM
ERLEADA TAB 60MG	3	NM, PA
<i>exemestane tab 25 mg</i>	2	
FARESTON TAB 60MG	3	

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Drug Name	Drug Tier	Requirements/Limits
FEMARA TAB 2.5MG	3	
<i>flutamide cap 125 mg</i>	1	NM
<i>hydroxyprogesterone caproate im in oil 1.25 gm/5ml</i>	2	NM
<i>letrozole tab 2.5 mg</i>	1	
<i>leuprolide acetate inj kit 5 mg/ml</i>	2	SP, NM, PA
LYSODREN TAB 500MG	3	NM
<i>megestrol acetate susp 40 mg/ml</i>	2	NM
<i>megestrol acetate tab 20 mg</i>	2	NM
<i>megestrol acetate tab 40 mg</i>	2	NM
NILANDRON TAB 150MG	2	NM
<i>nilutamide tab 150 mg</i>	2	NM
NUBEQA TAB 300MG	3	NM, PA
SOLTAMOX SOL 10MG/5ML	3	
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	1	AGE
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	1	AGE
<i>toremifene citrate tab 60 mg (base equivalent)</i>	2	
XTANDI CAP 40MG	3	NM
YONSA TAB 125MG	3	NM
ZYTIGA TAB 250MG	3	NM
ZYTIGA TAB 500MG	3	NM
ANTINEOPLASTIC - IMMUNOMODULATORS		
POMALYST CAP 1MG	3	NM
POMALYST CAP 2MG	3	NM
POMALYST CAP 3MG	3	NM
POMALYST CAP 4MG	3	NM
ANTINEOPLASTIC - XPO1 INHIBITORS		
XPOVIO PAK 60MG	3	NM, PA
XPOVIO PAK 80MG	3	NM, PA
XPOVIO PAK 100MG	3	NM, PA
ANTINEOPLASTIC COMBINATIONS		
KISQALI 200 PAK FEMARA	2	NM
KISQALI 400 PAK FEMARA	2	NM
KISQALI 600 PAK FEMARA	2	NM
LONSURF TAB 15-6.14	3	NM
LONSURF TAB 20-8.19	3	NM
ANTINEOPLASTIC ENZYME INHIBITORS		
AFINITOR DIS TAB 2MG	3	NM
AFINITOR DIS TAB 3MG	3	NM
AFINITOR DIS TAB 5MG	3	NM

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Drug Name	Drug Tier	Requirements/Limits
AFINITOR TAB 2.5MG	3	NM
AFINITOR TAB 5MG	3	NM
AFINITOR TAB 7.5MG	3	NM
AFINITOR TAB 10MG	3	NM
ALECENSA CAP 150MG	3	NM
ALUNBRIG PAK	3	NM
ALUNBRIG TAB 30MG	3	NM
ALUNBRIG TAB 90MG	3	NM
ALUNBRIG TAB 180MG	3	NM
BALVERSA TAB 3MG	3	NM
BALVERSA TAB 4MG	3	NM
BALVERSA TAB 5MG	3	NM
BOSULIF TAB 100MG	3	NM
BOSULIF TAB 400MG	3	NM
BOSULIF TAB 500MG	3	NM
BRAFTOVI CAP 75MG	3	NM
BRUKINSA CAP 80MG	3	NM, PA
CABOMETYX TAB 20MG	2	NM
CABOMETYX TAB 40MG	2	NM
CABOMETYX TAB 60MG	2	NM
CAPRELSA TAB 100MG	3	NM
CAPRELSA TAB 300MG	3	NM
COMETRIQ KIT 60MG	3	NM, PA
COMETRIQ KIT 100MG	3	NM, PA
COMETRIQ KIT 140MG	3	NM, PA
COPIKTRA CAP 15MG	3	NM
COPIKTRA CAP 25MG	3	NM
COTELLIC TAB 20MG	3	NM
<i>everolimus tab 2.5 mg</i>	2	NM
<i>everolimus tab 5 mg</i>	2	NM
<i>everolimus tab 7.5 mg</i>	2	NM
FARYDAK CAP 10MG	3	NM
FARYDAK CAP 15MG	3	NM
FARYDAK CAP 20MG	3	NM
GILOTRIF TAB 20MG	3	NM
GILOTRIF TAB 30MG	3	NM
GILOTRIF TAB 40MG	3	NM
GLEEVEC TAB 100MG	3	NM
GLEEVEC TAB 400MG	3	NM
IBRANCE CAP 75MG	2	NM
IBRANCE CAP 100MG	2	NM
IBRANCE CAP 125MG	2	NM
IBRANCE TAB 75MG	2	NM

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Drug Name	Drug Tier	Requirements/Limits
IBRANCE TAB 100MG	2	NM
IBRANCE TAB 125MG	2	NM
ICLUSIG TAB 15MG	3	NM
ICLUSIG TAB 45MG	3	NM
IDHIFA TAB 50MG	3	NM
IDHIFA TAB 100MG	3	NM
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	2	NM
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	2	NM
IMBRUVICA CAP 70MG	3	NM
IMBRUVICA CAP 140MG	3	NM
IMBRUVICA TAB 140MG	3	NM
IMBRUVICA TAB 280MG	3	NM
IMBRUVICA TAB 420MG	3	NM
IMBRUVICA TAB 560MG	3	NM
INLYTA TAB 1MG	3	NM
INLYTA TAB 5MG	3	NM
IRESSA TAB 250MG	3	NM
JAKAFI TAB 5MG	3	NM, PA
JAKAFI TAB 10MG	3	NM, PA
JAKAFI TAB 15MG	3	NM, PA
JAKAFI TAB 20MG	3	NM, PA
JAKAFI TAB 25MG	3	NM, PA
KISQALI TAB 200DOSE	2	NM
KISQALI TAB 400DOSE	2	NM
KISQALI TAB 600DOSE	2	NM
LENVIMA CAP 4MG	3	NM
LENVIMA CAP 8 MG	3	NM
LENVIMA CAP 10 MG	3	NM
LENVIMA CAP 12MG	3	NM
LENVIMA CAP 14 MG	3	NM
LENVIMA CAP 18 MG	3	NM
LENVIMA CAP 20 MG	3	NM
LENVIMA CAP 24 MG	3	NM
LORBRENA TAB 25MG	3	NM
LORBRENA TAB 100MG	3	NM
LYNPARZA TAB 100MG	3	NM
LYNPARZA TAB 150MG	3	NM
MEKINIST TAB 0.5MG	3	NM
MEKINIST TAB 2MG	3	NM
MEKTOVI TAB 15MG	3	NM
NERLYNX TAB 40MG	3	NM

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Drug Name	Drug Tier	Requirements/Limits
NEXAVAR TAB 200MG	3	NM
NINLARO CAP 2.3MG	3	NM
NINLARO CAP 3MG	3	NM
NINLARO CAP 4MG	3	NM
PIQRAY 200MG TAB DOSE	3	NM
PIQRAY 250MG TAB DOSE	3	NM
PIQRAY 300MG TAB DOSE	3	NM
ROZLYTREK CAP 100MG	3	NM, PA
ROZLYTREK CAP 200MG	3	NM, PA
RUBRACA TAB 200MG	3	NM
RUBRACA TAB 250MG	3	NM
RUBRACA TAB 300MG	3	NM
RYDAPT CAP 25MG	3	NM
SPRYCEL TAB 20MG	3	NM
SPRYCEL TAB 50MG	3	NM
SPRYCEL TAB 70MG	3	NM
SPRYCEL TAB 80MG	3	NM
SPRYCEL TAB 100MG	3	NM
SPRYCEL TAB 140MG	3	NM
STIVARGA TAB 40MG	3	NM
SUTENT CAP 12.5MG	3	NM
SUTENT CAP 25MG	3	NM
SUTENT CAP 37.5MG	3	NM
SUTENT CAP 50MG	3	NM
TAFINLAR CAP 50MG	3	NM
TAFINLAR CAP 75MG	3	NM
TAGRISSO TAB 40MG	3	NM
TAGRISSO TAB 80MG	3	NM
TALZENNA CAP 0.25MG	3	NM
TALZENNA CAP 1MG	3	NM
TARCEVA TAB 25MG	3	NM
TARCEVA TAB 100MG	3	NM
TARCEVA TAB 150MG	3	NM
TASIGNA CAP 50MG	3	NM
TASIGNA CAP 150MG	3	NM
TASIGNA CAP 200MG	3	NM
TAZVERIK TAB 200MG	3	NM, PA
TIBSOVO TAB 250MG	3	NM, PA
TURALIO CAP 200MG	3	NM, PA
TYKERB TAB 250MG	3	NM
VERZENIO TAB 50MG	3	NM
VERZENIO TAB 100MG	3	NM
VERZENIO TAB 150MG	3	NM

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Drug Name	Drug Tier	Requirements/Limits
VERZENIO TAB 200MG	3	NM
VITRAKVI CAP 25MG	3	NM, PA
VITRAKVI CAP 100MG	3	NM, PA
VITRAKVI SOL 20MG/ML	3	NM, PA
VIZIMPRO TAB 15MG	3	NM, PA
VIZIMPRO TAB 30MG	3	NM, PA
VIZIMPRO TAB 45MG	3	NM, PA
VOTRIENT TAB 200MG	3	NM
XALKORI CAP 200MG	3	NM
XALKORI CAP 250MG	3	NM
XOSPATA TAB 40MG	3	NM, PA
ZEJULA CAP 100MG	3	NM
ZELBORAF TAB 240MG	3	NM
ZOLINZA CAP 100MG	3	NM, PA
ZYDELIG TAB 100MG	3	NM
ZYDELIG TAB 150MG	3	NM
ZYKADIA TAB 150MG	3	NM
ANTINEOPLASTIC ENZYMES		
ONCASPAR INJ 750/ML	3	SP, NM
ANTINEOPLASTICS MISC.		
ACTIMMUNE INJ 2MU/0.5	3	SP
<i>bexarotene cap 75 mg</i>	2	NM
HYDREA CAP 500MG	3	NM
<i>hydroxyurea cap 500 mg</i>	1	NM
INTRON A INJ 10MU	3	SP
INTRON A INJ 18MU	3	SP
INTRON A INJ 25MU	3	SP
INTRON A INJ 50MU	3	SP
MATULANE CAP 50MG	3	NM
SYLATRON KIT 200MCG	3	SP
SYLATRON KIT 300MCG	3	SP
SYLATRON KIT 600MCG	3	SP
TARGRETIN CAP 75MG	3	NM
<i>tretinoin cap 10 mg</i>	2	NM
CHEMOTHERAPY RESCUE/ANTIDOTE AGENTS		
<i>leucovorin calcium inj 100 mg/10ml (10 mg/ml)</i>	1	NM
<i>leucovorin calcium inj 500 mg/50ml (10 mg/ml)</i>	1	NM
<i>leucovorin calcium tab 5 mg</i>	1	NM
<i>leucovorin calcium tab 10 mg</i>	1	NM
<i>leucovorin calcium tab 15 mg</i>	1	NM
<i>leucovorin calcium tab 25 mg</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
MESNEX TAB 400MG	2	NM
MITOTIC INHIBITORS		
<i>etoposide cap 50 mg</i>	2	NM
TOPOISOMERASE I INHIBITORS		
HYCAMTIN CAP 0.25MG	3	NM
HYCAMTIN CAP 1MG	3	NM
ANTIPARKINSON AND RELATED THERAPY AGENTS		
ANTIPARKINSON ADJUVANTS		
<i>carbidopa tab 25 mg</i>	1	
LODOSYN TAB 25MG	3	
ANTIPARKINSON ANTICHOLINERGICS		
<i>benztropine mesylate tab 0.5 mg</i>	1	
<i>benztropine mesylate tab 1 mg</i>	1	
<i>benztropine mesylate tab 2 mg</i>	1	
<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i>	1	
<i>trihexyphenidyl hcl tab 2 mg</i>	1	
<i>trihexyphenidyl hcl tab 5 mg</i>	1	
ANTIPARKINSON COMT INHIBITORS		
COMTAN TAB 200MG	3	
<i>entacapone tab 200 mg</i>	2	
TASMAR TAB 100MG	3	
<i>tolcapone tab 100 mg</i>	2	
ANTIPARKINSON DOPAMINERGICS		
<i>amantadine hcl cap 100 mg</i>	1	
<i>amantadine hcl syrup 50 mg/5ml</i>	1	
<i>amantadine hcl tab 100 mg</i>	1	
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	1	
<i>carbidopa & levodopa orally disintegrating tab 10-100 mg</i>	1	
<i>carbidopa & levodopa orally disintegrating tab 25-100 mg</i>	1	
<i>carbidopa & levodopa orally disintegrating tab 25-250 mg</i>	1	
<i>carbidopa & levodopa tab 10-100 mg</i>	1	
<i>carbidopa & levodopa tab 25-100 mg</i>	1	
<i>carbidopa & levodopa tab 25-250 mg</i>	1	
<i>carbidopa & levodopa tab er 25-100 mg</i>	1	
<i>carbidopa & levodopa tab er 50-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	2	
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	2	
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	2	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	2	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	2	
DUOPA SUS 4.63-20	3	
INBRIJA CAP 42MG	3	SP
MIRAPEX ER TAB 0.75MG	3	
MIRAPEX ER TAB 0.375MG	3	
MIRAPEX ER TAB 1.5MG	3	
MIRAPEX ER TAB 2.25MG	3	
MIRAPEX ER TAB 3.75MG	3	
MIRAPEX ER TAB 3MG	3	
MIRAPEX ER TAB 4.5MG	3	
MIRAPEX TAB 0.5MG	3	
MIRAPEX TAB 0.25MG	3	
MIRAPEX TAB 0.75MG	3	
MIRAPEX TAB 0.125MG	3	
MIRAPEX TAB 1.5MG	3	
MIRAPEX TAB 1MG	3	
NEUPRO DIS 1MG/24HR	3	
NEUPRO DIS 2MG/24HR	3	
NEUPRO DIS 3MG/24HR	3	
NEUPRO DIS 4MG/24HR	3	
NEUPRO DIS 6MG/24HR	3	
NEUPRO DIS 8MG/24HR	3	
PARLODEL TAB 2.5MG	3	
<i>pramipexole dihydrochloride tab 0.5 mg</i>	2	
<i>pramipexole dihydrochloride tab 0.25 mg</i>	2	
<i>pramipexole dihydrochloride tab 0.75 mg</i>	2	
<i>pramipexole dihydrochloride tab 0.125 mg</i>	2	
<i>pramipexole dihydrochloride tab 1 mg</i>	2	
<i>pramipexole dihydrochloride tab 1.5 mg</i>	2	
<i>pramipexole dihydrochloride tab er 24hr 0.75 mg</i>	2	
<i>pramipexole dihydrochloride tab er 24hr 0.375 mg</i>	2	
<i>pramipexole dihydrochloride tab er 24hr 1.5 mg</i>	2	
<i>pramipexole dihydrochloride tab er 24hr 2.25 mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>pramipexole dihydrochloride tab er 24hr 3 mg</i>	2	
<i>pramipexole dihydrochloride tab er 24hr 3.75 mg</i>	2	
<i>pramipexole dihydrochloride tab er 24hr 4.5 mg</i>	2	
REQUIP XL TAB 6MG	3	
REQUIP XL TAB 8MG	3	
REQUIP XL TAB 12MG	3	
<i>ropinirole hydrochloride tab 0.5 mg</i>	2	
<i>ropinirole hydrochloride tab 0.25 mg</i>	2	
<i>ropinirole hydrochloride tab 1 mg</i>	2	
<i>ropinirole hydrochloride tab 2 mg</i>	2	
<i>ropinirole hydrochloride tab 3 mg</i>	2	
<i>ropinirole hydrochloride tab 4 mg</i>	2	
<i>ropinirole hydrochloride tab 5 mg</i>	2	
<i>ropinirole hydrochloride tab er 24hr 2 mg (base equivalent)</i>	2	
<i>ropinirole hydrochloride tab er 24hr 4 mg (base equivalent)</i>	2	
<i>ropinirole hydrochloride tab er 24hr 6 mg (base equivalent)</i>	2	
<i>ropinirole hydrochloride tab er 24hr 8 mg (base equivalent)</i>	2	
<i>ropinirole hydrochloride tab er 24hr 12 mg (base equivalent)</i>	2	
RYTARY CAP 95MG	3	
RYTARY CAP 145MG	3	
RYTARY CAP 195MG	3	
RYTARY CAP 245MG	3	
SINEMET CR TAB 25-100MG	3	
SINEMET CR TAB 50-200MG	3	
SINEMET TAB 10-100MG	3	
SINEMET TAB 25-100MG	3	
SINEMET TAB 25-250MG	3	
STALEVO 50 TAB	3	
STALEVO 75 TAB	3	
STALEVO 100 TAB	3	
STALEVO 125 TAB	3	
STALEVO 150 TAB	3	
STALEVO 200 TAB	3	
ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS		
AZILECT TAB 0.5MG	3	
AZILECT TAB 1MG	3	

Drug Name	Drug Tier	Requirements/Limits
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	2	
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	2	
<i>selegiline hcl cap 5 mg</i>	1	
<i>selegiline hcl tab 5 mg</i>	1	
XADAGO TAB 50MG	3	
XADAGO TAB 100MG	3	
ZELAPAR TAB 1.25MG	3	

ANTIPSYCHOTICS/ANTIMANIC AGENTS

ANTIMANIC AGENTS

<i>lithium carbonate cap 150 mg</i>	1	
<i>lithium carbonate cap 300 mg</i>	1	
<i>lithium carbonate cap 600 mg</i>	1	
<i>lithium carbonate tab 300 mg</i>	1	
<i>lithium carbonate tab er 300 mg</i>	1	
<i>lithium carbonate tab er 450 mg</i>	1	
LITHIUM SOL 8MEQ/5ML	3	
LITHOBID TAB 300MG CR	3	

ANTIPSYCHOTICS - MISC.

EQUETRO CAP 100MG	3	
EQUETRO CAP 200MG	3	
EQUETRO CAP 300MG	3	
GEODON CAP 40MG	3	
GEODON INJ 20MG	3	NM
LATUDA TAB 20MG	2	
LATUDA TAB 40MG	2	
LATUDA TAB 60MG	2	
LATUDA TAB 80MG	2	
LATUDA TAB 120MG	2	
NUPLAZID CAP 34MG	3	SP, PA
NUPLAZID TAB 10MG	3	SP, PA
VRAYLAR CAP 1.5-3MG	2	NM
VRAYLAR CAP 1.5MG	2	
VRAYLAR CAP 3MG	2	
VRAYLAR CAP 4.5MG	2	
VRAYLAR CAP 6MG	2	
<i>ziprasidone hcl cap 20 mg</i>	1	
<i>ziprasidone hcl cap 40 mg</i>	1	
<i>ziprasidone hcl cap 60 mg</i>	1	
<i>ziprasidone hcl cap 80 mg</i>	1	

BENZISOXAZOLES

INVEGA TAB 1.5MG	3	
INVEGA TAB 3MG	3	

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Drug Name	Drug Tier	Requirements/Limits
INVEGA TAB 6MG	3	
INVEGA TAB 9MG	3	
<i>paliperidone tab er 24hr 1.5 mg</i>	2	
<i>paliperidone tab er 24hr 3 mg</i>	2	
<i>paliperidone tab er 24hr 6 mg</i>	2	
<i>paliperidone tab er 24hr 9 mg</i>	2	
RISPERDAL SOL 1MG/ML	3	
RISPERDAL TAB 0.5MG	3	
RISPERDAL TAB 1MG	3	
RISPERDAL TAB 2MG	3	
RISPERDAL TAB 3MG	3	
RISPERDAL TAB 4MG	3	
<i>risperidone orally disintegrating tab 0.5 mg</i>	1	
<i>risperidone orally disintegrating tab 0.25 mg</i>	1	
<i>risperidone orally disintegrating tab 1 mg</i>	1	
<i>risperidone orally disintegrating tab 2 mg</i>	1	
<i>risperidone orally disintegrating tab 3 mg</i>	1	
<i>risperidone orally disintegrating tab 4 mg</i>	1	
<i>risperidone soln 1 mg/ml</i>	1	
<i>risperidone tab 0.5 mg</i>	1	
<i>risperidone tab 0.25 mg</i>	1	
<i>risperidone tab 1 mg</i>	1	
<i>risperidone tab 2 mg</i>	1	
<i>risperidone tab 3 mg</i>	1	
<i>risperidone tab 4 mg</i>	1	
BUTYROPHENONES		
<i>haloperidol decanoate im soln 50 mg/ml</i>	2	NM
<i>haloperidol decanoate im soln 100 mg/ml</i>	2	NM
<i>haloperidol lactate inj 5 mg/ml</i>	1	NM
<i>haloperidol lactate oral conc 2 mg/ml</i>	1	
<i>haloperidol tab 0.5 mg</i>	1	
<i>haloperidol tab 1 mg</i>	1	
<i>haloperidol tab 2 mg</i>	1	
<i>haloperidol tab 5 mg</i>	1	
<i>haloperidol tab 10 mg</i>	1	
<i>haloperidol tab 20 mg</i>	1	
DIBENZAPINES		
<i>clozapine orally disintegrating tab 12.5 mg</i>	2	NM
<i>clozapine orally disintegrating tab 25 mg</i>	2	NM
<i>clozapine orally disintegrating tab 100 mg</i>	2	NM
<i>clozapine orally disintegrating tab 150 mg</i>	2	NM
<i>clozapine orally disintegrating tab 200 mg</i>	2	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>clozapine tab 25 mg</i>	2	NM
<i>clozapine tab 50 mg</i>	2	NM
<i>clozapine tab 100 mg</i>	2	NM
<i>clozapine tab 200 mg</i>	2	NM
CLOZARIL TAB 25MG	3	NM
CLOZARIL TAB 100MG	3	NM
<i>loxapine succinate cap 5 mg</i>	1	
<i>loxapine succinate cap 10 mg</i>	1	
<i>loxapine succinate cap 25 mg</i>	1	
<i>loxapine succinate cap 50 mg</i>	1	
<i>olanzapine for im inj 10 mg</i>	2	NM
<i>olanzapine orally disintegrating tab 5 mg</i>	2	
<i>olanzapine orally disintegrating tab 10 mg</i>	2	
<i>olanzapine orally disintegrating tab 15 mg</i>	2	
<i>olanzapine orally disintegrating tab 20 mg</i>	2	
<i>olanzapine tab 2.5 mg</i>	2	
<i>olanzapine tab 5 mg</i>	2	
<i>olanzapine tab 7.5 mg</i>	2	
<i>olanzapine tab 10 mg</i>	2	
<i>olanzapine tab 15 mg</i>	2	
<i>olanzapine tab 20 mg</i>	2	
<i>quetiapine fumarate tab 25 mg</i>	1	
<i>quetiapine fumarate tab 50 mg</i>	1	
<i>quetiapine fumarate tab 100 mg</i>	1	
<i>quetiapine fumarate tab 200 mg</i>	1	
<i>quetiapine fumarate tab 300 mg</i>	1	
<i>quetiapine fumarate tab 400 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 50 mg</i>	2	
<i>quetiapine fumarate tab er 24hr 150 mg</i>	2	
<i>quetiapine fumarate tab er 24hr 200 mg</i>	2	
<i>quetiapine fumarate tab er 24hr 300 mg</i>	2	
<i>quetiapine fumarate tab er 24hr 400 mg</i>	2	
SAPHRIS SUB 2.5MG	3	
SAPHRIS SUB 5MG	3	
SAPHRIS SUB 10MG	3	
SEROQUEL TAB 25MG	3	
SEROQUEL TAB 50MG	3	
SEROQUEL TAB 100MG	3	
SEROQUEL TAB 200MG	3	
SEROQUEL TAB 300MG	3	
SEROQUEL TAB 400MG	3	
SEROQUEL XR TAB 50MG	3	
SEROQUEL XR TAB 150MG	3	

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Drug Name	Drug Tier	Requirements/Limits
SEROQUEL XR TAB 200MG	3	
SEROQUEL XR TAB 300MG	3	
SEROQUEL XR TAB 400MG	3	
VERSACLOZ SUS 50MG/ML	3	NM
ZYPREXA INJ 10MG	3	NM
ZYPREXA TAB 2.5MG	3	
ZYPREXA TAB 5MG	3	
ZYPREXA TAB 7.5MG	3	
ZYPREXA TAB 10MG	3	
ZYPREXA TAB 15MG	3	
ZYPREXA TAB 20MG	3	
ZYPREXA ZYDI TAB 5MG	3	
ZYPREXA ZYDI TAB 10MG	3	
ZYPREXA ZYDI TAB 15MG	3	
ZYPREXA ZYDI TAB 20MG	3	

PHENOTHIAZINES

<i>chlorpromazine hcl tab 10 mg</i>	1	
<i>compro sup 25mg</i>	1	NM
<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	1	
<i>fluphenazine hcl oral conc 5 mg/ml</i>	1	
<i>fluphenazine hcl tab 1 mg</i>	1	
<i>fluphenazine hcl tab 2.5 mg</i>	1	
<i>fluphenazine hcl tab 5 mg</i>	1	
<i>fluphenazine hcl tab 10 mg</i>	1	
<i>perphenazine tab 2 mg</i>	1	
<i>perphenazine tab 4 mg</i>	1	
<i>perphenazine tab 8 mg</i>	1	
<i>perphenazine tab 16 mg</i>	1	
<i>prochlorperazine maleate tab 5 mg (base equivalent)</i>	1	
<i>prochlorperazine maleate tab 10 mg (base equivalent)</i>	1	
<i>prochlorperazine suppos 25 mg</i>	1	NM
<i>thioridazine hcl tab 10 mg</i>	1	
<i>thioridazine hcl tab 25 mg</i>	1	
<i>thioridazine hcl tab 50 mg</i>	1	
<i>thioridazine hcl tab 100 mg</i>	1	
<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	1	
<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	1	
<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	1	
QUINOLINONE DERIVATIVES		
ABILIFY TAB 2MG	3	
ABILIFY TAB 5MG	3	
ABILIFY TAB 10MG	3	
ABILIFY TAB 15MG	3	
ABILIFY TAB 20MG	3	
ABILIFY TAB 30MG	3	
<i>aripiprazole oral solution 1 mg/ml</i>	2	
<i>aripiprazole orally disintegrating tab 10 mg</i>	2	
<i>aripiprazole orally disintegrating tab 15 mg</i>	2	
<i>aripiprazole tab 2 mg</i>	2	
<i>aripiprazole tab 5 mg</i>	2	
<i>aripiprazole tab 10 mg</i>	2	
<i>aripiprazole tab 15 mg</i>	2	
<i>aripiprazole tab 20 mg</i>	2	
<i>aripiprazole tab 30 mg</i>	2	
REXULTI TAB 0.5MG	3	
REXULTI TAB 0.25MG	3	
REXULTI TAB 1MG	3	
REXULTI TAB 2MG	3	
REXULTI TAB 3MG	3	
REXULTI TAB 4MG	3	
THIOXANTHENES		
<i>thiothixene cap 1 mg</i>	1	
<i>thiothixene cap 2 mg</i>	1	
<i>thiothixene cap 5 mg</i>	1	
<i>thiothixene cap 10 mg</i>	1	
ANTIVIRALS		
ANTIRETROVIRALS		
<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	2	
<i>abacavir sulfate tab 300 mg (base equiv)</i>	2	
<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	2	
<i>abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg</i>	2	
APTIVUS CAP 250MG	2	
APTIVUS SOL	2	
<i>atazanavir sulfate cap 150 mg (base equiv)</i>	2	
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	2	
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
ATRIPLA TAB	2	
BIKTARVY TAB	2	
CIMDUO TAB 300-300	2	
COMBIVIR TAB 150-300	3	
COMPLERA TAB	3	
CRIXIVAN CAP 200MG	2	
CRIXIVAN CAP 400MG	2	
DELSTRIGO TAB	3	
DESCOVY TAB 200/25	2	
<i>didanosine delayed release capsule 200 mg</i>	2	
<i>didanosine delayed release capsule 250 mg</i>	2	
<i>didanosine delayed release capsule 400 mg</i>	2	
DOVATO TAB 50-300MG	3	
EDURANT TAB 25MG	3	
<i>efavirenz cap 50 mg</i>	2	
<i>efavirenz cap 200 mg</i>	2	
<i>efavirenz tab 600 mg</i>	2	
EMTRIVA CAP 200MG	2	
EMTRIVA SOL 10MG/ML	2	
EPIVIR SOL 10MG/ML	3	
EPIVIR TAB 150MG	3	
EPIVIR TAB 300MG	3	
EPZICOM TAB 600-300	2	
EVOTAZ TAB 300-150	3	
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	2	
FUZEON INJ 90MG	2	
GENVOYA TAB	2	
INTELENCE TAB 25MG	3	
INTELENCE TAB 100MG	3	
INTELENCE TAB 200MG	3	
INVIRASE TAB 500MG	2	
ISENTRESS CHW 25MG	2	
ISENTRESS CHW 100MG	2	
ISENTRESS HD TAB 600MG	2	
ISENTRESS POW 100MG	2	
ISENTRESS TAB 400MG	2	
JULUCA TAB 50-25MG	3	
KALETRA SOL	3	
KALETRA TAB 100-25MG	3	
KALETRA TAB 200-50MG	3	
<i>lamivudine oral soln 10 mg/ml</i>	2	
<i>lamivudine tab 150 mg</i>	2	

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<i>lamivudine tab 300 mg</i>	2	
<i>lamivudine-zidovudine tab 150-300 mg</i>	2	
LEXIVA SUS 50MG/ML	3	
LEXIVA TAB 700MG	3	
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	2	
<i>nevirapine susp 50 mg/5ml</i>	2	
<i>nevirapine tab 200 mg</i>	2	
<i>nevirapine tab er 24hr 100 mg</i>	2	
<i>nevirapine tab er 24hr 400 mg</i>	2	
NORVIR POW 100MG	2	
NORVIR SOL 80MG/ML	2	
NORVIR TAB 100MG	2	
ODEFSEY TAB	3	
PIFELTRO TAB 100MG	3	
PREZCOBIX TAB 800-150	3	
PREZISTA SUS 100MG/ML	2	
PREZISTA TAB 75MG	2	
PREZISTA TAB 150MG	2	
PREZISTA TAB 600MG	2	
PREZISTA TAB 800MG	2	
RESCRIPTOR TAB 200MG	2	
RETROVIR CAP 100MG	3	
RETROVIR SYP 50MG/5ML	3	
REYATAZ CAP 150MG	3	
REYATAZ CAP 200MG	3	
REYATAZ CAP 300MG	3	
REYATAZ POW 50MG	3	
<i>ritonavir tab 100 mg</i>	2	
SELZENTRY SOL 20MG/ML	2	
SELZENTRY TAB 25MG	2	
SELZENTRY TAB 75MG	2	
SELZENTRY TAB 150MG	2	
SELZENTRY TAB 300MG	2	
<i>stavudine cap 15 mg</i>	2	
<i>stavudine cap 20 mg</i>	2	
<i>stavudine cap 30 mg</i>	2	
<i>stavudine cap 40 mg</i>	2	
STRIBILD TAB	3	
SUSTIVA CAP 50MG	3	
SUSTIVA CAP 200MG	3	
SUSTIVA TAB 600MG	3	
SYMFI LO TAB	2	

PA - Prior Authorization **QL** - Quantity Limits **ST** - Step Therapy **NM** - Not available at mail-order **SP** - Specialty **AGE** - Age Limit ****** - Subject to medical or pharmacy diabetic copay per contract/rider **LA** - Limited Access **DL** - Medication Restricted to a 30 day supply

Drug Name	Drug Tier	Requirements/Limits
SYMFI TAB	2	
SYMTUZA TAB	3	
<i>tenofovir disoproxil fumarate tab 300 mg</i>	2	SP
TIVICAY TAB 10MG	3	
TIVICAY TAB 25MG	3	
TIVICAY TAB 50MG	3	
TRIUMEQ TAB	3	
TRIZIVIR TAB	3	
TRUVADA TAB 100-150	2	
TRUVADA TAB 133-200	2	
TRUVADA TAB 167-250	2	
TRUVADA TAB 200-300	2	
TYBOST TAB 150MG	3	
VIDEX EC CAP 125MG	3	
VIDEX EC CAP 200MG	3	
VIDEX EC CAP 250MG	3	
VIDEX SOL 2GM	3	
VIRACEPT TAB 250MG	2	
VIRACEPT TAB 625MG	2	
VIRAMUNE SUS 50MG/5ML	3	
VIRAMUNE TAB 200MG	3	
VIRAMUNE XR TAB 400MG	3	
VIREAD POW 40MG/GM	2	SP
VIREAD TAB 150MG	2	SP
VIREAD TAB 200MG	2	SP
VIREAD TAB 250MG	2	SP
VIREAD TAB 300MG	2	SP
ZIAGEN SOL 20MG/ML	3	
ZIAGEN TAB 300MG	3	
<i>zidovudine cap 100 mg</i>	2	
<i>zidovudine syrup 10 mg/ml</i>	2	
<i>zidovudine tab 300 mg</i>	2	
CMV AGENTS		
PREVYMIS TAB 240MG	3	
PREVYMIS TAB 480MG	3	
<i>valganciclovir hcl for soln 50 mg/ml (base equiv)</i>	2	
<i>valganciclovir hcl tab 450 mg (base equivalent)</i>	2	
HEPATITIS AGENTS		
<i>adefovir dipivoxil tab 10 mg</i>	1	SP
BARACLUDE SOL	3	SP
BARACLUDE TAB 0.5MG	3	SP

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Drug Name	Drug Tier	Requirements/Limits
BARACLUDE TAB 1MG	3	SP
<i>entecavir tab 0.5 mg</i>	2	SP
<i>entecavir tab 1 mg</i>	2	SP
EPCLUSA TAB 400-100	2	SP, NM, PA
HARVONI TAB 90-400MG	2	SP, NM, PA
HEPSERA TAB 10MG	3	SP
<i>lamivudine tab 100 mg (hbv)</i>	2	SP
MAVYRET TAB 100-40MG	2	SP, NM, PA
PEGASYS INJ	2	SP, NM, PA
PEGASYS INJ 180MCG/M	2	SP, NM, PA
PEGASYS INJ PROCLICK	2	SP, NM, PA
<i>ribavirin cap 200 mg</i>	2	SP, NM, PA
<i>ribavirin tab 200 mg</i>	2	SP, NM, PA
SOVALDI TAB 400MG	3	SP, NM, PA
VEMLIDY TAB 25MG	3	SP
VOSEVI TAB	2	SP, NM, PA

HERPES AGENTS

<i>acyclovir cap 200 mg</i>	1	NM
<i>acyclovir susp 200 mg/5ml</i>	1	NM
<i>acyclovir tab 400 mg</i>	1	NM
<i>acyclovir tab 800 mg</i>	1	NM
<i>famciclovir tab 125 mg</i>	2	NM
<i>famciclovir tab 250 mg</i>	2	NM
<i>famciclovir tab 500 mg</i>	2	NM
<i>valacyclovir hcl tab 1 gm</i>	1	NM
<i>valacyclovir hcl tab 500 mg</i>	1	NM
VALTREX TAB 1GM	3	NM
VALTREX TAB 500MG	3	NM

INFLUENZA AGENTS

<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	1	QL (21 caps / 180 days), NM
<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	1	QL (21 caps / 180 days), NM
<i>oseltamivir phosphate cap 75 mg (base equiv)</i>	1	QL (21 caps / 180 days), NM
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	1	QL (180 mL / 180 days), NM
RELENZA MIS DISKHALE	3	QL (1 inhaler / 180 days), NM
<i>rimantadine hydrochloride tab 100 mg</i>	1	NM
TAMIFLU CAP 30MG	3	QL (21 caps / 180 days), NM
TAMIFLU CAP 45MG	3	QL (21 caps / 180 days), NM

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Drug Name	Drug Tier	Requirements/Limits
TAMIFLU CAP 75MG	3	QL (21 caps / 180 days), NM
TAMIFLU SUS 6MG/ML	3	QL (180 mL / 180 days), NM
XOFLUZA TAB 20MG	3	QL (2 tabs / 180 days), NM
XOFLUZA TAB 40MG	3	QL (2 tabs / 180 days), NM

BETA BLOCKERS

ALPHA-BETA BLOCKERS

<i>carvedilol phosphate cap er 24hr 10 mg</i>	2
<i>carvedilol phosphate cap er 24hr 20 mg</i>	2
<i>carvedilol phosphate cap er 24hr 40 mg</i>	2
<i>carvedilol phosphate cap er 24hr 80 mg</i>	2
<i>carvedilol tab 3.125 mg</i>	1
<i>carvedilol tab 6.25 mg</i>	1
<i>carvedilol tab 12.5 mg</i>	1
<i>carvedilol tab 25 mg</i>	1
COREG CR CAP 10MG	3
COREG CR CAP 20MG	3
COREG CR CAP 40MG	3
COREG CR CAP 80MG	3
<i>labetalol hcl tab 100 mg</i>	1
<i>labetalol hcl tab 200 mg</i>	1
<i>labetalol hcl tab 300 mg</i>	1

BETA BLOCKERS CARDIO-SELECTIVE

<i>acebutolol hcl cap 200 mg</i>	1
<i>acebutolol hcl cap 400 mg</i>	1
<i>atenolol tab 25 mg</i>	1
<i>atenolol tab 50 mg</i>	1
<i>atenolol tab 100 mg</i>	1
<i>betaxolol hcl tab 10 mg</i>	1
<i>betaxolol hcl tab 20 mg</i>	1
<i>bisoprolol fumarate tab 5 mg</i>	1
<i>bisoprolol fumarate tab 10 mg</i>	1
BYSTOLIC TAB 2.5MG	2
BYSTOLIC TAB 5MG	2
BYSTOLIC TAB 10MG	2
BYSTOLIC TAB 20MG	2
LOPRESSOR TAB 50MG	3
LOPRESSOR TAB 100MG	3
<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</i>	1

Drug Name	Drug Tier	Requirements/Limits
<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i>	1	
<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i>	1	
<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i>	1	
<i>metoprolol tartrate tab 25 mg</i>	1	
<i>metoprolol tartrate tab 37.5 mg</i>	1	
<i>metoprolol tartrate tab 50 mg</i>	1	
<i>metoprolol tartrate tab 75 mg</i>	1	
<i>metoprolol tartrate tab 100 mg</i>	1	
TOPROL XL TAB 25MG	3	
TOPROL XL TAB 50MG	3	
TOPROL XL TAB 100MG	3	
TOPROL XL TAB 200MG	3	
BETA BLOCKERS NON-SELECTIVE		
BETAPACE AF TAB 80MG	3	
BETAPACE AF TAB 120MG	3	
BETAPACE AF TAB 160MG	3	
BETAPACE TAB 80MG	3	
BETAPACE TAB 120MG	3	
BETAPACE TAB 160MG	3	
CORGARD TAB 20MG	3	
CORGARD TAB 40MG	3	
CORGARD TAB 80MG	3	
HEMANGEOL SOL 4.28/ML	3	
<i>nadolol tab 20 mg</i>	1	
<i>nadolol tab 40 mg</i>	1	
<i>nadolol tab 80 mg</i>	1	
<i>pindolol tab 5 mg</i>	1	
<i>pindolol tab 10 mg</i>	1	
<i>propranolol hcl cap er 24hr 60 mg</i>	1	
<i>propranolol hcl cap er 24hr 80 mg</i>	1	
<i>propranolol hcl cap er 24hr 120 mg</i>	1	
<i>propranolol hcl cap er 24hr 160 mg</i>	1	
<i>propranolol hcl oral soln 20 mg/5ml</i>	1	
<i>propranolol hcl oral soln 40 mg/5ml</i>	1	
<i>propranolol hcl tab 10 mg</i>	1	
<i>propranolol hcl tab 20 mg</i>	1	
<i>propranolol hcl tab 40 mg</i>	1	
<i>propranolol hcl tab 60 mg</i>	1	
<i>propranolol hcl tab 80 mg</i>	1	
<i>sorine tab 80mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>sorine tab 120mg</i>	1	
<i>sorine tab 160mg</i>	1	
<i>sorine tab 240mg</i>	1	
<i>sotalol hcl (afib/afl) tab 80 mg</i>	1	
<i>sotalol hcl (afib/afl) tab 120 mg</i>	1	
<i>sotalol hcl (afib/afl) tab 160 mg</i>	1	
<i>sotalol hcl tab 80 mg</i>	1	
<i>sotalol hcl tab 120 mg</i>	1	
<i>sotalol hcl tab 160 mg</i>	1	
<i>sotalol hcl tab 240 mg</i>	1	
SOTYLIZE SOL 5MG/ML	3	
<i>timolol maleate tab 5 mg</i>	1	
<i>timolol maleate tab 10 mg</i>	1	
<i>timolol maleate tab 20 mg</i>	1	

CALCIUM CHANNEL BLOCKERS

CALCIUM CHANNEL BLOCKER COMBINATIONS

CONSENSI TAB 2.5-200	3	PA
CONSENSI TAB 5-200MG	3	PA
CONSENSI TAB 10-200MG	3	PA

CALCIUM CHANNEL BLOCKERS

ADALAT CC TAB 30MG ER	3	
ADALAT CC TAB 60MG ER	3	
ADALAT CC TAB 90MG ER	3	
<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	1	
<i>amlodipine besylate tab 5 mg (base equivalent)</i>	1	
<i>amlodipine besylate tab 10 mg (base equivalent)</i>	1	
CARDIZEM CD CAP 120MG/24	3	
CARDIZEM CD CAP 180MG/24	3	
CARDIZEM CD CAP 240MG/24	3	
CARDIZEM CD CAP 300MG/24	3	
CARDIZEM LA TAB 120MG	3	
CARDIZEM LA TAB 180MG	3	
CARDIZEM LA TAB 240MG	3	
CARDIZEM LA TAB 300MG/24	3	
CARDIZEM LA TAB 360MG	3	
CARDIZEM LA TAB 420MG/24	3	
<i>cartia xt cap 120/24hr</i>	1	
<i>cartia xt cap 180/24hr</i>	1	
<i>cartia xt cap 240/24hr</i>	1	
<i>cartia xt cap 300/24hr</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>dilt-xr cap 120mg</i>	1	
<i>dilt-xr cap 180mg</i>	1	
<i>dilt-xr cap 240mg</i>	1	
<i>diltiazem hcl cap er 12hr 60 mg</i>	1	
<i>diltiazem hcl cap er 12hr 90 mg</i>	1	
<i>diltiazem hcl coated beads cap er 24hr 120 mg</i>	1	
<i>diltiazem hcl coated beads cap er 24hr 180 mg</i>	1	
<i>diltiazem hcl coated beads cap er 24hr 240 mg</i>	1	
<i>diltiazem hcl coated beads cap er 24hr 300 mg</i>	1	
<i>diltiazem hcl coated beads tab er 24hr 180 mg</i>	1	
<i>diltiazem hcl coated beads tab er 24hr 240 mg</i>	1	
<i>diltiazem hcl coated beads tab er 24hr 300 mg</i>	1	
<i>diltiazem hcl coated beads tab er 24hr 360 mg</i>	1	
<i>diltiazem hcl coated beads tab er 24hr 420 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 120 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 180 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 240 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 300 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i>	1	
<i>diltiazem hcl tab 30 mg</i>	1	
<i>diltiazem hcl tab 60 mg</i>	1	
<i>diltiazem hcl tab 90 mg</i>	1	
<i>diltiazem hcl tab 120 mg</i>	1	
<i>felodipine tab er 24hr 2.5 mg</i>	1	
<i>felodipine tab er 24hr 5 mg</i>	1	
<i>felodipine tab er 24hr 10 mg</i>	1	
<i>isradipine cap 2.5 mg</i>	1	
<i>isradipine cap 5 mg</i>	1	
KATERZIA SUS 1MG/ML	3	

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Drug Name	Drug Tier	Requirements/Limits
<i>matzim la tab 180mg/24</i>	1	
<i>matzim la tab 240mg/24</i>	1	
<i>matzim la tab 300mg/24</i>	1	
<i>matzim la tab 360mg/24</i>	1	
<i>matzim la tab 420mg/24</i>	1	
<i>nicardipine hcl cap 20 mg</i>	1	
<i>nicardipine hcl cap 30 mg</i>	1	
<i>nifedipine cap 10 mg</i>	1	
<i>nifedipine cap 20 mg</i>	1	
<i>nifedipine tab er 24hr 30 mg</i>	1	
<i>nifedipine tab er 24hr 60 mg</i>	1	
<i>nifedipine tab er 24hr 90 mg</i>	1	
<i>nifedipine tab er 24hr osmotic release 30 mg</i>	1	
<i>nifedipine tab er 24hr osmotic release 60 mg</i>	1	
<i>nifedipine tab er 24hr osmotic release 90 mg</i>	1	
<i>nimodipine cap 30 mg</i>	2	NM
<i>nisoldipine tab er 24hr 8.5 mg</i>	2	
<i>nisoldipine tab er 24hr 17 mg</i>	2	
<i>nisoldipine tab er 24hr 20 mg</i>	2	
<i>nisoldipine tab er 24hr 25.5 mg</i>	2	
<i>nisoldipine tab er 24hr 30 mg</i>	2	
<i>nisoldipine tab er 24hr 34 mg</i>	2	
<i>nisoldipine tab er 24hr 40 mg</i>	2	
NORVASC TAB 2.5MG	3	
NORVASC TAB 5MG	3	
NORVASC TAB 10MG	3	
NYMALIZE SOL 30/10ML	3	NM
NYMALIZE SOL 60/20ML	3	NM
PROCARDIA CAP 10MG	3	
PROCARDIA XL TAB 30MG CR	3	
PROCARDIA XL TAB 60MG CR	3	
PROCARDIA XL TAB 90MG CR	3	
SULAR TAB 8.5MG	3	
SULAR TAB 17MG	3	
SULAR TAB 34MG	3	
<i>taztia xt cap 120mg/24</i>	1	
<i>taztia xt cap 180mg/24</i>	1	
<i>taztia xt cap 240mg/24</i>	1	
<i>taztia xt cap 300mg er</i>	1	
<i>taztia xt cap 360mg/24</i>	1	

Drug Name	Drug Tier	Requirements/Limits
TIAZAC CAP 120MG/24	3	
TIAZAC CAP 180MG/24	3	
TIAZAC CAP 240MG/24	3	
TIAZAC CAP 300MG/24	3	
TIAZAC CAP 360MG/24	3	
TIAZAC CAP 420MG/24	3	
<i>verapamil hcl cap er 24hr 100 mg</i>	1	
<i>verapamil hcl cap er 24hr 120 mg</i>	1	
<i>verapamil hcl cap er 24hr 180 mg</i>	1	
<i>verapamil hcl cap er 24hr 200 mg</i>	1	
<i>verapamil hcl cap er 24hr 240 mg</i>	1	
<i>verapamil hcl cap er 24hr 300 mg</i>	1	
<i>verapamil hcl cap er 24hr 360 mg</i>	1	
<i>verapamil hcl tab 40 mg</i>	1	
<i>verapamil hcl tab 80 mg</i>	1	
<i>verapamil hcl tab 120 mg</i>	1	
<i>verapamil hcl tab er 120 mg</i>	1	
<i>verapamil hcl tab er 180 mg</i>	1	
<i>verapamil hcl tab er 240 mg</i>	1	
VERELAN CAP 120MG SR	3	
VERELAN CAP 180MG SR	3	
VERELAN CAP 240MG SR	3	
VERELAN CAP 360MG SR	3	
VERELAN PM CAP 100MG ER	3	
VERELAN PM CAP 200MG ER	3	
VERELAN PM CAP 300MG ER	3	

CARDIOTONICS

CARDIAC GLYCOSIDES

<i>digitek tab 0.25mg</i>	1	
<i>digitek tab 0.125mg</i>	1	
<i>digox tab 0.25mg</i>	1	
<i>digox tab 0.125mg</i>	1	
<i>digoxin oral soln 0.05 mg/ml</i>	1	
<i>digoxin tab 125 mcg (0.125 mg)</i>	1	
<i>digoxin tab 250 mcg (0.25 mg)</i>	1	
LANOXIN INJ 0.25MG/1	2	NM

CARDIOVASCULAR AGENTS - MISC.

CARDIOVASCULAR AGENTS MISC. - COMBINATIONS

<i>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 2.5-20 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>amlodipine besylate-atorvastatin calcium tab 2.5-40 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-10 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-20 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-40 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-80 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-10 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-20 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-40 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-80 mg</i>	1	
BIDIL TAB	3	
CADUET TAB 5-10MG	3	
CADUET TAB 5-20MG	3	
CADUET TAB 5-40MG	3	
CADUET TAB 5-80MG	3	
CADUET TAB 10-10MG	3	
CADUET TAB 10-20MG	3	
CADUET TAB 10-40MG	3	
CADUET TAB 10-80MG	3	
ENTRESTO TAB 24-26MG	3	
ENTRESTO TAB 49-51MG	3	
ENTRESTO TAB 97-103MG	3	

IMPOTENCE AGENTS

CAVERJECT IM KIT 10MCG	3	QL (6 each / 30 days), NM
CAVERJECT INJ 40MCG	3	QL (6 vials / 30 days), NM
CAVERJECT KIT 20MCG	3	QL (6 kits / 30 days), NM
EDEX KIT 10MCG	3	QL (6 each / 30 days), NM
EDEX KIT 20MCG	3	QL (6 kits / 30 days), NM
EDEX KIT 40MCG	3	QL (6 kits / 30 days), NM
MUSE SUP 125MCG	3	QL (6 sup / 30 days), NM

Drug Name	Drug Tier	Requirements/Limits
MUSE SUP 250MCG	3	QL (6 sup / 30 days), NM
MUSE SUP 500MCG	3	QL (6 sup / 30 days), NM
MUSE SUP 1000MCG	3	QL (6 sup / 30 days), NM
<i>sildenafil citrate tab 25 mg</i>	2	QL (4 tabs / 30 days), NM
<i>sildenafil citrate tab 50 mg</i>	2	QL (4 tabs / 30 days), NM
<i>sildenafil citrate tab 100 mg</i>	2	QL (4 tabs / 30 days), NM
<i>tadalafil tab 2.5 mg</i>	2	QL (4 tabs / 23 days), PA
<i>tadalafil tab 5 mg</i>	2	QL (4 tabs / 23 days), PA
<i>tadalafil tab 10 mg</i>	2	QL (4 tabs / 30 days), NM
<i>tadalafil tab 20 mg</i>	2	QL (4 tabs / 30 days), NM
<i>varденаfil hcl orally disintegrating tab 10 mg</i>	2	QL (4 tabs / 30 days), NM
<i>varденаfil hcl tab 2.5 mg</i>	2	QL (4 tabs / 30 days), NM
<i>varденаfil hcl tab 5 mg</i>	2	QL (4 tabs / 30 days), NM
<i>varденаfil hcl tab 10 mg</i>	2	QL (4 tabs / 30 days), NM
<i>varденаfil hcl tab 20 mg</i>	2	QL (4 tabs / 30 days), NM

PROSTAGLANDIN VASODILATORS

ORENITRAM TAB 0.25MG	3	SP, PA
ORENITRAM TAB 0.125MG	3	SP, PA
ORENITRAM TAB 1MG	3	SP, PA
ORENITRAM TAB 2.5MG	3	SP, PA
ORENITRAM TAB 5MG	3	SP, PA
TYVASO REFIL SOL 0.6MG/ML	3	SP, PA
TYVASO SOL 0.6MG/ML	3	SP, PA
TYVASO START SOL 0.6MG/ML	3	SP, PA
VENTAVIS SOL 10MCG/ML	3	SP, PA
VENTAVIS SOL 20MCG/ML	3	SP, PA

PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS

<i>ambrisentan tab 5 mg</i>	2	SP, PA
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Drug Name	Drug Tier	Requirements/Limits
<i>ambrisentan tab 10 mg</i>	2	SP, PA
LETAIRIS TAB 5MG	3	SP, PA
LETAIRIS TAB 10MG	3	SP, PA
OPSUMIT TAB 10MG	3	SP, PA
TRACLEER TAB 32MG	3	SP, PA
TRACLEER TAB 62.5MG	3	SP, PA
TRACLEER TAB 125MG	3	SP, PA
PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS		
ADCIRCA TAB 20MG	3	SP, PA
<i>alyq tab 20mg</i>	2	SP, PA
REVATIO SUS 10MG/ML	3	SP, PA
REVATIO TAB 20MG	3	SP, PA
<i>sildenafil citrate tab 20 mg</i>	2	SP, PA
<i>tadalafil tab 20 mg (pah)</i>	2	SP, PA
PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST		
UPTRAVI TAB 200/800	3	SP, NM, PA
UPTRAVI TAB 200MCG	3	SP, PA
UPTRAVI TAB 400MCG	3	SP, PA
UPTRAVI TAB 600MCG	3	SP, PA
UPTRAVI TAB 800MCG	3	SP, PA
UPTRAVI TAB 1000MCG	3	SP, PA
UPTRAVI TAB 1200MCG	3	SP, PA
UPTRAVI TAB 1400MCG	3	SP, PA
UPTRAVI TAB 1600MCG	3	SP, PA
PULMONARY HYPERTENSION - SOL GUANYLATE CYCLASE STIMULATOR		
ADEMPAS TAB 0.5MG	3	SP, PA
ADEMPAS TAB 1.5MG	3	SP, PA
ADEMPAS TAB 1MG	3	SP, PA
ADEMPAS TAB 2.5MG	3	SP, PA
ADEMPAS TAB 2MG	3	SP, PA
SINUS NODE INHIBITORS		
CORLANOR TAB 5MG	3	
CORLANOR TAB 7.5MG	3	
TRANSTHYRETIN STABILIZERS		
VYNDAMAX CAP 61MG	3	SP, PA
VYNDAQEL CAP 20MG	3	SP, PA
CEPHALOSPORINS		
CEPHALOSPORINS - 1ST GENERATION		
<i>cefadroxil cap 500 mg</i>	1	NM
<i>cefadroxil for susp 250 mg/5ml</i>	1	NM
<i>cefadroxil for susp 500 mg/5ml</i>	1	NM

PA - Prior Authorization QL - Quantity Limits ST - Step Therapy NM - Not available at mail-order SP - Specialty AGE - Age Limit ** - Subject to medical or pharmacy diabetic copay per contract/rider LA - Limited Access DL - Medication Restricted to a 30 day supply

Drug Name	Drug Tier	Requirements/Limits
<i>cefadroxil tab 1 gm</i>	1	NM
<i>cefazolin sodium for inj 1 gm</i>	1	NM
<i>cefazolin sodium for inj 10 gm</i>	1	NM
<i>cefazolin sodium for inj 500 mg</i>	1	NM
<i>cephalexin cap 250 mg</i>	1	NM
<i>cephalexin cap 500 mg</i>	1	NM
<i>cephalexin cap 750 mg</i>	1	NM
<i>cephalexin for susp 125 mg/5ml</i>	1	NM
<i>cephalexin for susp 250 mg/5ml</i>	1	NM
KEFLEX CAP 250MG	3	NM
KEFLEX CAP 500MG	3	NM
KEFLEX CAP 750MG	3	NM
CEPHALOSPORINS - 2ND GENERATION		
<i>cefaclor cap 250 mg</i>	1	NM
<i>cefaclor cap 500 mg</i>	1	NM
CEFACLOR ER TAB 500MG	2	NM
<i>cefaclor for susp 125 mg/5ml</i>	1	NM
<i>cefaclor for susp 250 mg/5ml</i>	1	NM
<i>cefaclor for susp 375 mg/5ml</i>	1	NM
<i>cefprozil for susp 125 mg/5ml</i>	1	NM
<i>cefprozil for susp 250 mg/5ml</i>	1	NM
<i>cefprozil tab 250 mg</i>	1	NM
<i>cefprozil tab 500 mg</i>	1	NM
<i>cefuroxime axetil tab 250 mg</i>	1	NM
<i>cefuroxime axetil tab 500 mg</i>	1	NM
CEPHALOSPORINS - 3RD GENERATION		
<i>cefdinir cap 300 mg</i>	1	NM
<i>cefdinir for susp 125 mg/5ml</i>	1	NM
<i>cefdinir for susp 250 mg/5ml</i>	1	NM
<i>cefixime for susp 100 mg/5ml</i>	2	NM
<i>cefixime for susp 200 mg/5ml</i>	2	NM
<i>cefpodoxime proxetil for susp 50 mg/5ml</i>	1	NM
<i>cefpodoxime proxetil for susp 100 mg/5ml</i>	1	NM
<i>cefpodoxime proxetil tab 100 mg</i>	1	NM
<i>cefpodoxime proxetil tab 200 mg</i>	1	NM
<i>ceftazidime for inj 1 gm</i>	2	NM
<i>ceftazidime for inj 2 gm</i>	2	NM
<i>ceftazidime for inj 6 gm</i>	2	NM
<i>ceftriaxone sodium for inj 1 gm</i>	2	NM, PA
<i>ceftriaxone sodium for inj 2 gm</i>	2	NM, PA
<i>ceftriaxone sodium for inj 10 gm</i>	2	NM, PA
<i>ceftriaxone sodium for inj 250 mg</i>	2	QL (4 vials / 23 days), NM

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Drug Name	Drug Tier	Requirements/Limits
<i>ceftriaxone sodium for inj 500 mg</i>	2	QL (8 vials / 23 days), NM
<i>ceftriaxone sodium for iv soln 1 gm</i>	2	NM, PA
<i>ceftriaxone sodium for iv soln 2 gm</i>	2	NM, PA
<i>ceftriaxone sodium in dextrose inj 20 mg/ml</i>	2	NM, PA
<i>ceftriaxone sodium in dextrose inj 40 mg/ml</i>	2	NM, PA
SPECTRACEF TAB 400MG	3	NM
SUPRAX CAP 400MG	3	NM
SUPRAX CHW 100MG	3	NM
SUPRAX CHW 200MG	3	NM
SUPRAX SUS 100/5ML	3	NM
SUPRAX SUS 200/5ML	3	NM
SUPRAX SUS 500/5ML	3	NM
<i>tazicef inj 1gm</i>	2	NM
<i>tazicef inj 2gm</i>	2	NM
<i>tazicef inj 6gm</i>	2	NM

CEPHALOSPORINS - 4TH GENERATION

<i>cefepime hcl for inj 1 gm</i>	2	NM
<i>cefepime hcl for inj 2 gm</i>	2	NM

CONTRACEPTIVES

COMBINATION CONTRACEPTIVES - ORAL

<i>altavera tab</i>	1
<i>alyacen tab 1/35</i>	1
<i>alyacen tab 7/7/7</i>	1
<i>amethia lo tab</i>	1
<i>amethia tab</i>	1
<i>amethyst tab 90-20mcg</i>	1
<i>apri tab</i>	1
<i>aranelle tab</i>	1
<i>ashlyna tab</i>	1
<i>aubra eq tab 0.1-0.02</i>	1
<i>aubra tab 0.1-0.02</i>	1
<i>aurovela 24 tab fe 1/20</i>	1
<i>aurovela fe tab 1/20</i>	1
<i>aurovela tab 1.5/30</i>	1
<i>aviane tab</i>	1
<i>azurette tab 28 day</i>	1
<i>balziva tab</i>	1
<i>bekyree tab</i>	1
BEYAZ TAB	3
<i>blisovi fe tab 1.5/30</i>	1

Drug Name	Drug Tier	Requirements/Limits
<i>briellyn tab</i>	1	
<i>camrese lo tab</i>	1	
<i>camrese tab</i>	1	
<i>caziant pak</i>	1	
<i>chateal eq tab 0.15/30</i>	1	
<i>chateal tab 0.15/30</i>	1	
<i>cryselle-28 tab 28 tabs</i>	1	
<i>cyclafem tab 1/35</i>	1	
<i>cyclafem tab 7/7/7</i>	1	
<i>cyred eq tab</i>	1	
<i>cyred tab</i>	1	
<i>dasetta tab 1/35</i>	1	
<i>dasetta tab 7/7/7</i>	1	
<i>daysee tab</i>	1	
<i>delyla tab 0.1-0.02</i>	1	
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	1	
<i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	1	
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i>	1	
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	1	
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	1	
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	1	
<i>elinest tab</i>	1	
<i>enpresse-28 tab</i>	1	
<i>enskyce tab</i>	1	
<i>estarylla tab 0.25-35</i>	1	
ESTROSTEP FE TAB	3	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	1	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	1	
FALESSA KIT	3	
<i>falmina tab</i>	1	
<i>fayosim tab</i>	1	
<i>femynor tab 0.25-35</i>	1	
GENERESS FE CHW	3	
<i>gianvi tab 3-0.02mg</i>	1	
<i>hailey 24 tab fe</i>	1	
<i>introvale tab</i>	1	

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<i>isibloom tab</i>	1	
<i>jasmiel tab 3-0.02mg</i>	1	
<i>jolessa tab</i>	1	
<i>juleber tab</i>	1	
<i>junel 1.5/30 tab</i>	1	
<i>junel 1/20 tab</i>	1	
<i>junel fe 24 tab 1/20</i>	1	
<i>junel fe tab 1.5/30</i>	1	
<i>junel fe tab 1/20</i>	1	
<i>kaitlib fe chw</i>	1	
<i>kariva tab 28 day</i>	1	
<i>kelnor 1/50 tab</i>	1	
<i>kelnor tab 1/35</i>	1	
<i>kurvelo tab 0.15/30</i>	1	
<i>larin 24 tab fe 1/20</i>	1	
<i>larin fe tab 1.5/30</i>	1	
<i>larin fe tab 1/20</i>	1	
<i>larin tab 1.5/30</i>	1	
<i>larin tab 1/20</i>	1	
<i>larissia tab</i>	1	
<i>layolis fe chw</i>	1	
<i>leena tab</i>	1	
<i>lessina tab</i>	1	
<i>levonest tab</i>	1	
<i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg</i>	1	
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	1	
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	1	
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	1	
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	1	
<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i>	1	
<i>levora-28 tab 0.15/30</i>	1	
<i>lillow tab 0.15/30</i>	1	
LO LOESTRIN TAB 1-10-10	2	
LOESTRIN 21 TAB 1.5/30	3	

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Drug Name	Drug Tier	Requirements/Limits
LOESTRIN FE TAB 1.5/30	3	
LOESTRIN FE TAB 1/20	3	
LOESTRIN TAB 1/20-21	3	
<i>loryna tab 3-0.02mg</i>	1	
LOSEASONIQUE TAB	3	
<i>low-ogestrel tab</i>	1	
<i>lutra tab</i>	1	
<i>marlissa tab 0.15/30</i>	1	
<i>melodetta chw 24 fe</i>	1	
<i>mibelas 24 chw fe</i>	1	
<i>microgestin tab 1.5/30</i>	1	
<i>microgestin tab 1/20</i>	1	
<i>microgestin tab fe1.5/30</i>	1	
<i>microgestin tab fe 1/20</i>	1	
<i>mili tab 0.25/35</i>	1	
MINASTRIN 24 CHW FE	3	
MIRCETTE TAB 28 DAY	3	
<i>mono-lynyah tab 0.25-35</i>	1	
NATAZIA TAB	3	
<i>necon tab 0.5/35</i>	1	
<i>norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i>	1	
<i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	1	
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>	1	
<i>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i>	1	
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	1	
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	1	
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	1	
<i>nortrel tab 0.5/35</i>	1	
<i>nortrel tab 1/35</i>	1	
<i>nortrel tab 7/7/7</i>	1	
<i>ocella tab 3-0.03mg</i>	1	
<i>ogestrel tab</i>	1	
<i>orsythia tab</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
ORTHO TRI- TAB CYCLN LO	3	
ORTHO-NOVUM TAB 1/35	3	
ORTHO-NOVUM TAB 7/7/7	3	
<i>philith tab 0.4-35</i>	1	
<i>pimtrea tab</i>	1	
<i>portia-28 tab</i>	1	
<i>previfem tab</i>	1	
QUARTETTE TAB	3	
<i>reclipsen tab</i>	1	
<i>rivelsa tab</i>	1	
SAFYRAL TAB	3	
SEASONIQUE TAB	3	
<i>setlakin tab</i>	1	
<i>sprintec 28 tab 28 day</i>	1	
<i>sronyx tab</i>	1	
<i>syeda tab 3-0.03mg</i>	1	
<i>tarina 24 fe tab</i>	1	
<i>tarina fe tab 1/20</i>	1	
<i>tarina fe tab 1/20 eq</i>	1	
TAYTULLA CAP 1MG/20MC	3	
<i>tilia fe tab</i>	1	
<i>tri femynor tab</i>	1	
<i>tri-estaryll tab</i>	1	
<i>tri-legest tab fe</i>	1	
<i>tri-linyah tab</i>	1	
<i>tri-lo tab estaryll</i>	1	
<i>tri-lo- tab marzia</i>	1	
<i>tri-lo- tab sprintec</i>	1	
<i>tri-mili tab</i>	1	
<i>tri-previfem tab</i>	1	
<i>tri-sprintec tab</i>	1	
<i>tri-vylibra tab</i>	1	
<i>tri-vylibra tab lo</i>	1	
<i>trivora-28 tab</i>	1	
<i>tydemy tab</i>	1	
<i>velivet pak</i>	1	
<i>vienva tab 0.1-20</i>	1	
<i>viorele tab</i>	1	
<i>vyfemla tab 0.4-35</i>	1	
<i>vylibra tab 0.25-35</i>	1	
<i>wera tab 0.5/35</i>	1	
<i>wymzya fe chw 0.4mg-35</i>	1	
YASMIN 28 TAB 3-0.03MG	3	

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Drug Name	Drug Tier	Requirements/Limits
YAZ TAB 3-0.02MG	3	
zarah tab 3-0.03mg	1	
zovia 1/35e tab	1	
COMBINATION CONTRACEPTIVES - TRANSDERMAL		
xulane dis 150-35	1	
COMBINATION CONTRACEPTIVES - VAGINAL		
etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr	2	
NUVARING MIS	3	
EMERGENCY CONTRACEPTIVES		
aftera tab 1.5mg	1	NM
econtra ez tab 1.5mg	1	NM
econtra os tab 1.5mg	1	NM
ELLA TAB 30MG	3	NM
levonorgestrel tab 1.5 mg	1	NM
my choice tab 1.5mg	1	NM
my way tab 1.5mg	1	NM
new day tab 1.5mg	1	NM
opcicon tab 1.5mg	1	NM
option 2 tab 1.5mg	1	NM
PLAN B TAB 1.5MG	3	NM
prevenza tab 1.5mg	1	NM
react tab 1.5mg	1	NM
take action tab 1.5mg	1	NM
PROGESTIN CONTRACEPTIVES - INJECTABLE		
DEPO-PROVERA INJ 150MG/ML	3	NM
DEPO-SQ PROV INJ 104	3	QL (6.154 injections / 300 days), NM
medroxyprogesterone acetate im susp 150 mg/ml	1	QL (4 injections / 300 days), NM
medroxyprogesterone acetate im susp prefilled syr 150 mg/ml	1	QL (4 injections / 300 days), NM
PROGESTIN CONTRACEPTIVES - ORAL		
camila tab 0.35mg	1	
deblitane tab 0.35mg	1	
errin tab 0.35mg	1	
heather tab 0.35mg	1	
incassia tab 0.35mg	1	
jencycla tab 0.35mg	1	
lyza tab 0.35mg	1	
nora-be tab 0.35mg	1	
norethindrone tab 0.35 mg	1	
norlyda tab 0.35mg	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>norlyroc tab 0.35mg</i>	1	
ORTHO MICRON TAB 0.35MG	3	
<i>sharobel tab 0.35mg</i>	1	
SLYND TAB 4MG	3	
<i>tulana tab 0.35mg</i>	1	

CORTICOSTEROIDS

GLUCOCORTICOSTEROIDS

<i>budesonide delayed release particles cap 3 mg</i>	2	NM
<i>budesonide tab er 24hr 9 mg</i>	2	NM
CORTEF TAB 5MG	3	NM
CORTEF TAB 10MG	3	NM
CORTEF TAB 20MG	3	NM
<i>cortisone acetate tab 25 mg</i>	1	NM
<i>decadron tab 0.5mg</i>	1	NM
<i>decadron tab 0.75mg</i>	1	NM
<i>decadron tab 4mg</i>	1	NM
<i>decadron tab 6mg</i>	1	NM
DEXAMETHASON CON 1MG/ML	3	NM
<i>dexamethasone elixir 0.5 mg/5ml</i>	1	NM
<i>dexamethasone sodium phosphate inj 10 mg/ml</i>	1	NM
<i>dexamethasone soln 0.5 mg/5ml</i>	1	NM
<i>dexamethasone tab 0.5 mg</i>	1	NM
<i>dexamethasone tab 0.75 mg</i>	1	NM
<i>dexamethasone tab 1 mg</i>	1	NM
<i>dexamethasone tab 1.5 mg</i>	1	NM
<i>dexamethasone tab 2 mg</i>	1	NM
<i>dexamethasone tab 4 mg</i>	1	NM
<i>dexamethasone tab 6 mg</i>	1	NM
EMFLAZA SUS 22.75/ML	3	NM, PA
EMFLAZA TAB 6MG	3	NM, PA
EMFLAZA TAB 18MG	3	NM, PA
EMFLAZA TAB 30MG	3	NM, PA
EMFLAZA TAB 36MG	3	NM, PA
ENTOCORT EC CAP 3MG DR	3	NM
<i>hydrocortisone tab 5 mg</i>	1	NM
<i>hydrocortisone tab 10 mg</i>	1	NM
<i>hydrocortisone tab 20 mg</i>	1	NM
MEDROL TAB 2MG	3	NM
MEDROL TAB 4MG	3	NM
MEDROL TAB 8MG	3	NM
MEDROL TAB 16MG	3	NM

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Drug Name	Drug Tier	Requirements/Limits
MEDROL TAB 32MG	3	NM
<i>methylprednisolone tab 4 mg</i>	1	NM
<i>methylprednisolone tab 8 mg</i>	1	NM
<i>methylprednisolone tab 16 mg</i>	1	NM
<i>methylprednisolone tab 32 mg</i>	1	NM
<i>methylprednisolone tab therapy pack 4 mg (21)</i>	1	NM
MILLIPRED DP PAK 5MG	3	NM
MILLIPRED TAB 5MG	3	NM
<i>prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)</i>	1	NM
<i>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</i>	1	NM
<i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</i>	1	NM
<i>prednisolone syrup 15 mg/5ml (usp solution equivalent)</i>	1	NM
<i>prednisone oral soln 5 mg/5ml</i>	1	NM
<i>prednisone tab 1 mg</i>	1	NM
<i>prednisone tab 2.5 mg</i>	1	NM
<i>prednisone tab 5 mg</i>	1	NM
<i>prednisone tab 10 mg</i>	1	NM
<i>prednisone tab 20 mg</i>	1	NM
<i>prednisone tab 50 mg</i>	1	NM
<i>prednisone tab therapy pack 5 mg (21)</i>	1	NM
<i>prednisone tab therapy pack 5 mg (48)</i>	1	NM
<i>prednisone tab therapy pack 10 mg (21)</i>	1	NM
<i>prednisone tab therapy pack 10 mg (48)</i>	1	NM
SOLU-CORTEF INJ 100MG	3	NM
SOLU-CORTEF INJ 250MG	3	NM
SOLU-CORTEF INJ 500MG	3	NM
SOLU-CORTEF INJ 1000MG	3	NM
SOLU-MEDROL INJ 1GM	3	NM
SOLU-MEDROL INJ 40MG	3	NM
SOLU-MEDROL INJ 125MG	3	NM
SOLU-MEDROL INJ 500MG	3	NM
SOLU-MEDROL INJ 1000MG	3	NM
UCERIS TAB 9MG	3	NM

MINERALOCORTICOIDS

<i>fludrocortisone acetate tab 0.1 mg</i>	1	
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COUGH/COLD/ALLERGY

ANTITUSSIVES

<i>benzonatate cap 100 mg</i>	1	NM
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Drug Name	Drug Tier	Requirements/Limits
<i>benzonatate cap 200 mg</i>	1	NM
<i>hydrocodone w/ homatropine syrup 5-1.5 mg/5ml</i>	1	NM
<i>hydrocodone w/ homatropine tab 5-1.5 mg</i>	1	NM
<i>hydromet syp 5-1.5/5</i>	1	NM

COUGH/COLD/ALLERGY COMBINATIONS

<i>bromfed dm syp</i>	1	NM
<i>hydrocod polst-chlorphen polst er susp 10-8 mg/5ml</i>	1	NM
<i>promethazine & phenylephrine syrup 6.25-5 mg/5ml</i>	1	NM
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	1	NM
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	1	NM
<i>promethazine-phenylephrine-codeine syrup 6.25-5-10 mg/5ml</i>	1	NM
<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	1	NM
TUXARIN ER TAB 54.3-8MG	3	NM, PA
TUZISTRA XR SUS	3	NM, PA

MISC. RESPIRATORY INHALANTS

HYPERMIST NEB 3.5%	3	NM, PA
sodium chloride soln nebu 0.9%	1	NM

MUCOLYTICS

<i>acetylcysteine inhal soln 10%</i>	2	NM
<i>acetylcysteine inhal soln 20%</i>	2	NM

DERMATOLOGICALS

ACNE PRODUCTS

<i>adapalene cream 0.1%</i>	2	NM
<i>adapalene gel 0.1%</i>	2	NM
<i>adapalene gel 0.3%</i>	2	NM
<i>adapalene pads 0.1%</i>	2	NM
<i>adapalene-benzoyl peroxide gel 0.1-2.5%</i>	2	NM
<i>amnestem cap 10mg</i>	2	NM
<i>amnestem cap 20mg</i>	2	NM
<i>amnestem cap 40mg</i>	2	NM
<i>benzepro aer 5.3%</i>	2	NM
<i>benziq wash liq 5.25%</i>	2	NM
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	2	NM
<i>bp 10-1 emu</i>	2	NM
<i>bp cleansing emu 10-4%</i>	1	NM
<i>bp foam aer 5.3%</i>	2	NM
<i>claravis cap 10mg</i>	2	NM

PA - Prior Authorization **QL** - Quantity Limits **ST** - Step Therapy **NM** - Not available at mail-order **SP** - Specialty **AGE** - Age Limit ****** - Subject to medical or pharmacy diabetic copay per contract/rider **LA** - Limited Access **DL** - Medication Restricted to a 30 day supply

Drug Name	Drug Tier	Requirements/Limits
<i>claravis cap 20mg</i>	2	NM
<i>claravis cap 30mg</i>	2	NM
<i>claravis cap 40mg</i>	2	NM
CLEOCIN-T LOT 1%	3	NM
<i>clindacin mis etz 1%</i>	1	NM
<i>clindacin-p pad 1%</i>	1	NM
<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i>	2	NM
<i>clindamycin phosphate lotion 1%</i>	1	NM
<i>clindamycin phosphate soln 1%</i>	1	NM
<i>clindamycin phosphate swab 1%</i>	1	NM
<i>clindamycin phosphate-benzoyl peroxide gel 1-5%</i>	2	NM
<i>dapsone gel 5%</i>	2	NM
<i>ery pad 2%</i>	1	NM
<i>erythromycin gel 2%</i>	1	NM
<i>erythromycin soln 2%</i>	1	NM
<i>isotretinoin cap 10 mg</i>	2	NM
<i>isotretinoin cap 20 mg</i>	2	NM
<i>isotretinoin cap 30 mg</i>	2	NM
<i>isotretinoin cap 40 mg</i>	2	NM
KLARON LOT 10%	3	NM
<i>myorisan cap 10mg</i>	2	NM
<i>myorisan cap 20mg</i>	2	NM
<i>myorisan cap 30mg</i>	2	NM
<i>myorisan cap 40mg</i>	2	NM
SOD SUL/SULF EMU 10-5%	3	NM
<i>sss 10-5 aer 10-5%</i>	2	NM
<i>sss cre 10%-5%</i>	2	NM
<i>sulfacetamide sodium lotion 10% (acne)</i>	2	NM
<i>sulfacetamide sodium w/ sulfur cleanser 9.8-4.8%</i>	2	NM
<i>sulfacetamide sodium w/ sulfur cleanser 10-2%</i>	2	NM
<i>sulfacetamide sodium w/ sulfur cleansing pad 10-4%</i>	2	NM
<i>sulfacetamide sodium w/ sulfur cream 9.8-4.8%</i>	2	NM
<i>sulfacetamide sodium w/ sulfur cream 10-2%</i>	2	NM
<i>sulfacetamide sodium w/ sulfur cream 10-5%</i>	2	NM
<i>sulfacetamide sodium w/ sulfur emulsion 10-5%</i>	2	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>sulfacetamide sodium w/ sulfur lotion 9.8-4.8%</i>	2	NM
<i>sulfacetamide sodium w/ sulfur lotion 10-5%</i>	2	NM
<i>sulfacetamide sodium w/ sulfur susp 8-4%</i>	2	NM
<i>sulfacetamide sodium w/ sulfur wash 9-4%</i>	2	NM
<i>sulfacetamide sodium w/ sulfur wash 9-4.5%</i>	2	NM
<i>sulfacleanse sus 8-4%</i>	2	NM
<i>sulfamez emu 10-1%</i>	2	NM
<i>tretinoin cream 0.1%</i>	2	NM
<i>tretinoin cream 0.05%</i>	2	NM
<i>tretinoin cream 0.025%</i>	2	NM
<i>tretinoin gel 0.01%</i>	2	NM
<i>tretinoin gel 0.05%</i>	2	NM
<i>tretinoin gel 0.025%</i>	2	NM
<i>zenatane cap 10mg</i>	2	NM
<i>zenatane cap 20mg</i>	2	NM
<i>zenatane cap 30mg</i>	2	NM
<i>zenatane cap 40mg</i>	2	NM
AGENTS FOR EXTERNAL GENITAL AND PERIANAL WARTS		
VEREGEN OIN 15%	3	NM
ANTI-INFLAMMATORY AGENTS - TOPICAL		
<i>diclofenac sodium gel 1%</i>	2	NM
<i>diclofenac sodium soln 1.5%</i>	1	NM
VOLTAREN GEL 1%	3	NM
ANTIBIOTICS - TOPICAL		
ALTABAX OIN 1%	3	NM
CENTANY OIN 2%	3	NM
CORTISPORIN CRE 0.5%	3	NM
CORTISPORIN OIN 1%	3	NM
<i>gentamicin sulfate oint 0.1%</i>	1	NM
<i>mupirocin oint 2%</i>	1	NM
ANTIFUNGALS - TOPICAL		
<i>ciclodan sol 8%</i>	1	QL (20 mL / year), NM
<i>ciclopirox gel 0.77%</i>	1	NM
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	1	NM
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	2	NM
<i>ciclopirox shampoo 1%</i>	1	NM
<i>ciclopirox solution 8%</i>	1	QL (20 mL / year), NM

Drug Name	Drug Tier	Requirements/Limits
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	1	NM
<i>clotrimazole w/ betamethasone lotion 1-0.05%</i>	1	NM
<i>econazole nitrate cream 1%</i>	2	NM
EXELDERM CRE 1%	3	NM
EXELDERM SOL 1%	3	NM
JUBLIA SOL 10%	3	NM, PA
KERYDIN SOL 5%	3	NM, PA
<i>ketoconazole cream 2%</i>	1	NM
<i>ketoconazole shampoo 2%</i>	1	NM
LOTRISONE CRE	3	NM
<i>luliconazole cream 1%</i>	2	NM
LUZU CRE 1%	3	NM
<i>naftifine hcl cream 1%</i>	2	NM
<i>naftifine hcl cream 2%</i>	2	NM
NAFTIN CRE 2%	3	NM
NAFTIN GEL 1%	3	NM
NAFTIN GEL 2%	3	NM
NIZORAL SHA 2%	3	NM
<i>nyamyc pow 100000</i>	1	NM
<i>nystatin cream 100000 unit/gm</i>	1	NM
<i>nystatin oint 100000 unit/gm</i>	1	NM
<i>nystatin topical powder 100000 unit/gm</i>	1	NM
<i>nystatin-triamcinolone cream 100000-0.1 unit/gm-%</i>	1	NM
<i>nystatin-triamcinolone oint 100000-0.1 unit/gm-%</i>	1	NM
<i>nystop pow 100000</i>	1	NM
PENLAC SOL 8%	3	QL (20 mL / year), NM, PA
<i>sulconazole nitrate cream 1%</i>	2	NM
ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL		
<i>diclofenac sodium (actinic keratoses) gel 3%</i>	2	NM, PA
EFUDEX CRE 5%	3	NM
<i>fluorouracil cream 0.5%</i>	2	NM
<i>fluorouracil cream 5%</i>	2	NM
<i>fluorouracil soln 2%</i>	2	NM
<i>fluorouracil soln 5%</i>	2	NM
PANRETIN GEL 0.1%	2	NM
PICATO GEL 0.05%	3	NM
PICATO GEL 0.015%	3	NM
TARGRETIN GEL 1%	3	NM

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Drug Name	Drug Tier	Requirements/Limits
TOLAK CRE 4%	3	NM
VALCHLOR GEL 0.016%	3	NM, PA
ANTIPRURITICS - TOPICAL		
<i>doxepin hcl cream 5%</i>	2	NM, PA
PRUDOXIN CRE 5%	3	NM, PA
ZONALON CRE 5%	3	NM, PA
ANTIPSORIATICS		
<i>acitretin cap 10 mg</i>	2	NM
<i>acitretin cap 17.5 mg</i>	2	NM
<i>acitretin cap 25 mg</i>	2	NM
<i>calcipotriene cream 0.005%</i>	2	NM
<i>calcipotriene oint 0.005%</i>	2	NM
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	2	NM
<i>calcitrene oin 0.005%</i>	2	NM
<i>calcitriol oint 3 mcg/gm</i>	2	NM
COSENTYX INJ 150MG/ML	2	SP, PA; Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis
COSENTYX INJ 300DOSE	2	SP, PA; Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis
COSENTYX PEN INJ 150MG/ML	2	SP, PA; Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis
COSENTYX PEN INJ 300DOSE	2	SP, PA; Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis
DOVONEX CRE 0.005%	3	NM
<i>methoxsalen rapid cap 10 mg</i>	2	NM
SKYRIZI INJ 150DOSE	2	SP, PA; Preferred agent for Psoriasis
SORIATANE CAP 10MG	3	NM
SORIATANE CAP 25MG	3	NM
STELARA INJ 45MG/0.5	2	SP, PA; Preferred agent for Crohn's Disease (after failure of Humira) and Psoriasis

Drug Name	Drug Tier	Requirements/Limits
STELARA INJ 90MG/ML	2	SP, PA; Preferred agent for Crohn's Disease (after failure of Humira) and Psoriasis
TALTZ INJ 80MG/ML	2	SP, PA; Preferred agent for Psoriasis
<i>tazarotene cream 0.1%</i>	2	NM
TAZORAC CRE 0.1%	3	NM
TAZORAC CRE 0.05%	3	NM
TAZORAC GEL 0.1%	3	NM
TAZORAC GEL 0.05%	3	NM
TREMFYA INJ 100MG/ML	2	SP, PA; Preferred agent for Psoriasis

ANTISEBORRHEIC PRODUCTS

<i>selenium sulfide lotion 2.5%</i>	1	NM
<i>selenium sulfide shampoo 2.3%</i>	2	NM
<i>selenium sulfide shampoo 2.25%</i>	2	NM
<i>sulfacetamide sodium cleansing gel 10%</i>	2	NM
<i>sulfacetamide sodium liquid 10%</i>	1	NM
<i>sulfacetamide sodium shampoo 10%</i>	1	NM

ANTIVIRALS - TOPICAL

<i>acyclovir cream 5%</i>	2	NM
<i>acyclovir oint 5%</i>	2	NM
DENAVIR CRE 1%	3	NM
ZOVIRAX CRE 5%	3	NM
ZOVIRAX OIN 5%	3	NM

BURN PRODUCTS

<i>mafenide acetate packet for topical soln 5% (50 gm)</i>	2	NM
SILVADENE CRE 1%	3	NM
<i>silver sulfadiazine cream 1%</i>	1	NM
<i>ssd cre 1%</i>	1	NM
SULFAMYLON CRE 85MG/GM	3	NM
SULFAMYLON PAK 5%	3	NM

CORTICOSTEROIDS - TOPICAL

<i>alclometasone dipropionate cream 0.05%</i>	1	NM
<i>alclometasone dipropionate oint 0.05%</i>	1	NM
<i>amcinonide cream 0.1%</i>	2	NM
<i>amcinonide lotion 0.1%</i>	2	NM
AMCINONIDE OIN 0.1%	2	NM
<i>betamethasone dipropionate augmented cream 0.05%</i>	1	NM

Drug Name	Drug Tier	Requirements/Limits
<i>betamethasone dipropionate augmented gel 0.05%</i>	1	NM
<i>betamethasone dipropionate augmented lotion 0.05%</i>	1	NM
<i>betamethasone dipropionate augmented oint 0.05%</i>	1	NM
<i>betamethasone dipropionate cream 0.05%</i>	1	NM
<i>betamethasone dipropionate lotion 0.05%</i>	1	NM
<i>betamethasone dipropionate oint 0.05%</i>	1	NM
<i>betamethasone valerate aerosol foam 0.12%</i>	1	NM
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	1	NM
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	1	NM
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	1	NM
<i>clobetasol e cre 0.05%</i>	2	NM
<i>clobetasol propionate cream 0.05%</i>	2	NM
<i>clobetasol propionate gel 0.05%</i>	2	NM
<i>clobetasol propionate lotion 0.05%</i>	2	NM
<i>clobetasol propionate oint 0.05%</i>	2	NM
<i>clobetasol propionate soln 0.05%</i>	2	NM
DERMA-SMOOTH OIL /FS BODY	3	NM
DERMA-SMOOTH OIL /FS SCLP	3	NM
<i>desonide cream 0.05%</i>	2	NM
<i>desonide lotion 0.05%</i>	2	NM
<i>desonide oint 0.05%</i>	2	NM
DESOWEN CRE 0.05%	3	NM
<i>desoximetasone cream 0.05%</i>	2	NM
<i>desoximetasone cream 0.25%</i>	2	NM
<i>desoximetasone gel 0.05%</i>	2	NM
<i>desoximetasone oint 0.05%</i>	2	NM
<i>desoximetasone oint 0.25%</i>	2	NM
<i>desoximetasone spray 0.25%</i>	2	NM
<i>diflorasone diacetate cream 0.05%</i>	2	NM
<i>diflorasone diacetate oint 0.05%</i>	2	NM
DIPROLENE AF CRE 0.05%	3	NM
DIPROLENE OIN 0.05%	3	NM
ELOCON CRE 0.1%	3	NM
EPIFOAM AER 1%	3	NM
<i>fluocinolone acetonide cream 0.01%</i>	1	NM
<i>fluocinolone acetonide cream 0.025%</i>	1	NM
<i>fluocinolone acetonide oil 0.01% (body oil)</i>	2	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>	2	NM
<i>fluocinolone acetonide oint 0.025%</i>	1	NM
<i>fluocinolone acetonide soln 0.01%</i>	1	NM
<i>fluocinonide cream 0.05%</i>	1	NM
<i>fluocinonide emulsified base cream 0.05%</i>	1	NM
<i>fluocinonide gel 0.05%</i>	1	NM
<i>fluocinonide oint 0.05%</i>	1	NM
<i>fluocinonide soln 0.05%</i>	1	NM
<i>flurandrenolide cream 0.05%</i>	2	NM
<i>flurandrenolide lotion 0.05%</i>	2	NM
<i>flurandrenolide oint 0.05%</i>	2	NM
<i>fluticasone propionate cream 0.05%</i>	1	NM
<i>fluticasone propionate lotion 0.05%</i>	1	NM
<i>fluticasone propionate oint 0.005%</i>	1	NM
<i>halobetasol propionate cream 0.05%</i>	2	NM
<i>halobetasol propionate oint 0.05%</i>	2	NM
<i>hydrocortisone butyrate cream 0.1%</i>	1	NM
<i>hydrocortisone butyrate lotion 0.1%</i>	2	NM
<i>hydrocortisone butyrate oint 0.1%</i>	1	NM
<i>hydrocortisone butyrate soln 0.1%</i>	1	NM
<i>hydrocortisone cream 2.5%</i>	1	NM
<i>hydrocortisone lotion 2.5%</i>	1	NM
<i>hydrocortisone oint 2.5%</i>	1	NM
<i>hydrocortisone valerate cream 0.2%</i>	1	NM
<i>hydrocortisone valerate oint 0.2%</i>	1	NM
<i>mometasone furoate cream 0.1%</i>	1	NM
<i>mometasone furoate oint 0.1%</i>	1	NM
<i>mometasone furoate solution 0.1% (lotion)</i>	1	NM
<i>prednicarbate cream 0.1%</i>	1	NM
<i>prednicarbate oint 0.1%</i>	1	NM
TEMOVATE CRE 0.05%	3	NM
TEMOVATE OIN 0.05%	3	NM
TEXACORT SOL 2.5%	3	NM
<i>triamcinolone acetonide aerosol soln 0.147 mg/gm</i>	2	NM
<i>triamcinolone acetonide cream 0.1%</i>	1	NM
<i>triamcinolone acetonide cream 0.5%</i>	1	NM
<i>triamcinolone acetonide cream 0.025%</i>	1	NM
<i>triamcinolone acetonide lotion 0.1%</i>	1	NM
<i>triamcinolone acetonide lotion 0.025%</i>	1	NM
<i>triamcinolone acetonide oint 0.1%</i>	1	NM
<i>triamcinolone acetonide oint 0.5%</i>	1	NM
<i>triamcinolone acetonide oint 0.025%</i>	1	NM

Drug Name	Drug Tier	Requirements/Limits
<i>triderm cre 0.1%</i>	1	NM
<i>triderm cre 0.5%</i>	1	NM
TRIDESILON CRE 0.05%	3	NM
ECZEMA AGENTS		
DUPIXENT INJ 200/1.14	3	SP, PA
DUPIXENT INJ 300/2ML	3	SP, NM, PA
EMOLLIENT/KERATOLYTIC AGENTS		
CEM-UREA SOL 45%	2	NM
<i>cerovel lot 40%</i>	2	NM
HYDRO 40 AER FOAM	3	NM
KERALAC CRE 47%	3	NM
<i>umecta mouss aer 40%</i>	2	NM
<i>urea cream 39%</i>	2	NM
<i>urea cream 40%</i>	2	NM
<i>urea cream 41%</i>	2	NM
<i>urea cream 45%</i>	2	NM
<i>urea cream 47%</i>	2	NM
<i>urea hydrati aer 35%</i>	1	NM
<i>urea in zinc undecylenate-lactic acid vehicle emulsion 50%</i>	2	NM
<i>urea lotion 40%</i>	2	NM
<i>urea nail gel 45%</i>	2	NM
<i>urea suspension 40%</i>	2	NM
<i>urea-c40 lot 40%</i>	2	NM
ENZYMES - TOPICAL		
SANTYL OIN 250/GM	3	QL (30 gm / 30 days), NM
IMMUNOMODULATING AGENTS - TOPICAL		
ALDARA CRE 5%	3	NM
<i>imiquimod cream 5%</i>	2	NM
IMMUNOSUPPRESSIVE AGENTS - TOPICAL		
ELIDEL CRE 1%	3	NM
<i>pimecrolimus cream 1%</i>	2	NM
PROTOPIC OIN 0.1%	3	NM
PROTOPIC OIN 0.03%	3	NM
<i>tacrolimus oint 0.1%</i>	2	NM
<i>tacrolimus oint 0.03%</i>	2	NM
KERATOLYTIC/ANTIMITOTIC AGENTS		
CONDYLOX GEL 0.5%	3	NM
PODOCON SOL 25%	3	NM
<i>podofilox soln 0.5%</i>	2	NM
PYROGALL ACD OIN	2	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>salicylic acid er film-forming soln 28.5%</i>	2	NM
LOCAL ANESTHETICS - TOPICAL		
<i>glydo gel 2%</i>	1	NM
<i>lido-sorb lot 3%</i>	2	NM
<i>lidocaine hcl cream 3%</i>	1	NM
<i>lidocaine hcl lotion 3%</i>	2	NM
<i>lidocaine hcl soln 4%</i>	1	NM
<i>lidocaine hcl urethral/mucosal gel 2%</i>	1	NM
<i>lidocaine hcl urethral/mucosal gel prefilled syringe 2%</i>	1	NM
<i>lidocaine oint 5%</i>	2	NM
<i>lidocaine patch 5%</i>	2	NM
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	2	NM
LIDODERM DIS 5%	3	NM
<i>7t lido gel 2%</i>	1	NM
MISC. TOPICAL		
DRYSOL SOL 20%	3	NM
XERAC-AC SOL 6.25%	3	NM
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - TOPICAL		
EUCRISA OIN 2%	2	NM
ROSACEA AGENTS		
<i>azelaic acid gel 15%</i>	2	NM
<i>doxycycline (rosacea) cap delayed release 40 mg</i>	1	NM, PA
FINACEA AER 15%	2	NM
FINACEA GEL 15%	3	NM
METROCREAM CRE 0.75%	3	NM
METROGEL GEL 1%	3	NM
METROLOTION LOT 0.75%	3	NM
<i>metronidazole cream 0.75%</i>	2	NM
<i>metronidazole gel 0.75%</i>	2	NM
<i>metronidazole gel 1%</i>	2	NM
<i>metronidazole lotion 0.75%</i>	2	NM
MIRVASO GEL 0.33%	3	NM
ORACEA CAP 40MG	3	NM, PA
RHOFADE CRE 1%	3	NM
<i>rosadan cre 0.75%</i>	2	NM
<i>rosadan gel 0.75%</i>	2	NM
SOOLANTRA CRE 1%	3	NM
SCABICIDES & PEDICULICIDES		
<i>crotan lot 10%</i>	2	NM
EURAX CRE 10%	3	NM
EURAX LOT 10%	3	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>lindane shampoo 1%</i>	1	NM
<i>malathion lotion 0.5%</i>	2	NM
NATROBA SUS 0.9%	3	NM
OVIDE LOT 0.5%	3	NM
<i>permethrin cream 5%</i>	1	NM
SKLICE LOT 0.5%	2	NM
<i>spinosad susp 0.9%</i>	2	NM
ULESFIA LOT 5%	3	NM

DIAGNOSTIC PRODUCTS

DIAGNOSTIC DRUGS

METOPIRONE CAP 250MG	3	NM
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DIAGNOSTIC TESTS

ONETOUCH TES ULTRA	2	QL (200 strips / 30 days), NM
ONETOUCH TES VERIO	2	QL (200 strips / 30 days), NM

DIGESTIVE AIDS

DIGESTIVE ENZYMES

CREON CAP 3000UNIT	2	
CREON CAP 6000UNIT	2	
CREON CAP 12000UNT	2	
CREON CAP 24000UNT	2	
CREON CAP 36000UNT	2	
PANCREAZE CAP 2600UNIT	3	
PANCREAZE CAP 4200UNIT	3	
PANCREAZE CAP 10500UNT	3	
PANCREAZE CAP 16800UNT	3	
PANCREAZE CAP 21000UNT	3	
PERTZYE CAP 4000UNIT	3	
PERTZYE CAP 8000UNIT	3	
PERTZYE CAP 16000U	3	
PERTZYE CAP 24000U	3	
SUCRAID SOL 8500/ML	3	
VIOKACE TAB 10440	3	
VIOKACE TAB 20880	3	
ZENPEP CAP 3000UNIT	3	
ZENPEP CAP 5000UNIT	3	
ZENPEP CAP 10000UNT	3	
ZENPEP CAP 15000UNT	3	
ZENPEP CAP 20000UNT	3	
ZENPEP CAP 25000	3	
ZENPEP CAP 40000	3	

Drug Name	Drug Tier	Requirements/Limits
DIURETICS		
CARBONIC ANHYDRASE INHIBITORS		
<i>acetazolamide cap er 12hr 500 mg</i>	1	
<i>acetazolamide sodium for inj 500 mg</i>	2	NM
<i>acetazolamide tab 125 mg</i>	1	
<i>acetazolamide tab 250 mg</i>	1	
<i>methazolamide tab 25 mg</i>	2	
<i>methazolamide tab 50 mg</i>	2	
DIURETIC COMBINATIONS		
<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	1	
DYAZIDE CAP 37.5-25	3	
MAXZIDE TAB 75-50	3	
MAXZIDE-25 TAB	3	
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	1	
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	1	
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	1	
<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	1	
LOOP DIURETICS		
<i>bumetanide tab 0.5 mg</i>	1	
<i>bumetanide tab 1 mg</i>	1	
<i>bumetanide tab 2 mg</i>	1	
<i>ethacrynic acid tab 25 mg</i>	2	
<i>furosemide inj 10 mg/ml</i>	1	NM
<i>furosemide oral soln 8 mg/ml</i>	1	
<i>furosemide oral soln 10 mg/ml</i>	1	
<i>furosemide tab 20 mg</i>	1	
<i>furosemide tab 40 mg</i>	1	
<i>furosemide tab 80 mg</i>	1	
LASIX TAB 20MG	3	
LASIX TAB 40MG	3	
LASIX TAB 80MG	3	
<i>torsemide tab 5 mg</i>	1	
<i>torsemide tab 10 mg</i>	1	
<i>torsemide tab 20 mg</i>	1	
<i>torsemide tab 100 mg</i>	1	
POTASSIUM SPARING DIURETICS		
ALDACTONE TAB 25MG	3	
ALDACTONE TAB 50MG	3	

Drug Name	Drug Tier	Requirements/Limits
ALDACTONE TAB 100MG	3	
<i>amiloride hcl tab 5 mg</i>	1	
<i>spironolactone tab 25 mg</i>	1	
<i>spironolactone tab 50 mg</i>	1	
<i>spironolactone tab 100 mg</i>	1	
<i>triamterene cap 50 mg</i>	2	
<i>triamterene cap 100 mg</i>	2	
THIAZIDES AND THIAZIDE-LIKE DIURETICS		
<i>chlorothiazide tab 250 mg</i>	1	
<i>chlorothiazide tab 500 mg</i>	1	
<i>chlorthalidone tab 25 mg</i>	1	
<i>chlorthalidone tab 50 mg</i>	1	
DIURIL SUS 250/5ML	3	
<i>hydrochlorothiazide cap 12.5 mg</i>	1	
<i>hydrochlorothiazide tab 12.5 mg</i>	1	
<i>hydrochlorothiazide tab 25 mg</i>	1	
<i>hydrochlorothiazide tab 50 mg</i>	1	
<i>indapamide tab 1.25 mg</i>	1	
<i>indapamide tab 2.5 mg</i>	1	
<i>metolazone tab 2.5 mg</i>	1	
<i>metolazone tab 5 mg</i>	1	
<i>metolazone tab 10 mg</i>	1	
ENDOCRINE AND METABOLIC AGENTS - MISC.		
BONE DENSITY REGULATORS		
ACTONEL TAB 5MG	3	
ACTONEL TAB 30MG	3	NM
ACTONEL TAB 35MG	3	
ACTONEL TAB 150MG	3	
<i>alendronate sodium oral soln 70 mg/75ml</i>	1	
<i>alendronate sodium tab 5 mg</i>	1	
<i>alendronate sodium tab 10 mg</i>	1	
<i>alendronate sodium tab 35 mg</i>	1	
<i>alendronate sodium tab 70 mg</i>	1	
ATELVIA TAB	3	
BONIVA TAB 150MG	3	
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	2	
<i>etidronate disodium tab 400 mg</i>	1	NM
FORTEO SOL 600/2.4	2	SP
FOSAMAX + D TAB 70-2800	3	
FOSAMAX + D TAB 70-5600	3	
FOSAMAX TAB 70MG	3	
<i>ibandronate sodium tab 150 mg (base equivalent)</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
MIACALCIN INJ 200/ML	3	NM
NATPARA INJ 25MCG	3	SP
NATPARA INJ 50MCG	3	SP
NATPARA INJ 75MCG	3	SP
NATPARA INJ 100MCG	3	SP
<i>risedronate sodium tab 5 mg</i>	2	
<i>risedronate sodium tab 30 mg</i>	2	NM
<i>risedronate sodium tab 35 mg</i>	2	
<i>risedronate sodium tab 150 mg</i>	2	
<i>risedronate sodium tab delayed release 35 mg</i>	2	
TERIPARATIDE INJ	2	
TYMLOS INJ	2	SP
FERTILITY REGULATORS		
CHOR GONADOT INJ 10000UNT	3	AGE, SP, NM
<i>clomiphene citrate tab 50 mg</i>	1	AGE, QL (30 tabs / 30 days), NM
FOLLISTIM AQ INJ 300UNIT	2	AGE, SP, NM, PA
FOLLISTIM AQ INJ 600UNIT	2	AGE, SP, NM, PA
FOLLISTIM AQ INJ 900UNIT	2	AGE, SP, NM, PA
GONAL-F INJ 450UNIT	3	AGE, SP, NM, PA
GONAL-F INJ 1050UNIT	3	AGE, SP, NM, PA
GONAL-F RFF INJ 75UNIT	3	AGE, SP, NM, PA
GONAL-F RFF INJ 300/0.5	3	AGE, SP, NM, PA
GONAL-F RFF INJ 450/0.75	3	AGE, SP, NM, PA
GONAL-F RFF INJ 900/1.5	3	AGE, SP, NM, PA
MENOPUR INJ 75UNIT	3	AGE, SP, NM, PA
NOVAREL INJ 5000UNIT	3	AGE, SP, NM
NOVAREL INJ 10000UNT	3	AGE, SP, NM
OVIDREL INJ	3	AGE, SP, NM
PREGNYL INJ 10000UNT	3	AGE, SP, NM
GNRH/LHRH ANTAGONISTS		
CETROTIDE KIT 0.25MG	3	AGE, SP, NM, PA
GANIRELIX AC INJ 250/0.5	3	AGE, SP, NM, PA
<i>ganirelix acetate soln prefilled syringe 250 mcg/0.5ml</i>	2	AGE, SP, NM, PA
ORILISSA TAB 150MG	3	NM
ORILISSA TAB 200MG	3	NM
GROWTH HORMONE RECEPTOR ANTAGONISTS		
SOMAVERT INJ 10MG	3	SP
SOMAVERT INJ 15MG	3	SP
SOMAVERT INJ 20MG	3	SP
SOMAVERT INJ 25MG	3	SP

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Drug Name	Drug Tier	Requirements/Limits
SOMAVERT INJ 30MG	3	SP
GROWTH HORMONE RELEASING HORMONES (GHRH)		
EGRIFTA SOL 1MG	3	
GROWTH HORMONES		
NUTROPIN AQ INJ 10MG/2ML	2	SP, PA
NUTROPIN AQ INJ 20MG/2ML	2	SP, PA
NUTROPIN AQ INJ NUSPIN 5	2	SP, PA
SEROSTIM INJ 4MG	3	SP, PA
SEROSTIM INJ 5MG	3	SP, PA
SEROSTIM INJ 6MG	3	SP, PA
ZOMACTON INJ 10MG	2	SP, PA
HORMONE RECEPTOR MODULATORS		
EVISTA TAB 60MG	3	
OSPHENA TAB 60MG	3	
<i>raloxifene hcl tab 60 mg</i>	1	AGE
LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS		
LUPANETA KIT 3.75-5	3	SP, NM
LUPANETA KIT 11.25-5	3	SP, NM
SYNAREL SOL 2MG/ML	2	NM
METABOLIC MODIFIERS		
<i>calcitriol cap 0.5 mcg</i>	2	
<i>calcitriol cap 0.25 mcg</i>	2	
<i>calcitriol oral soln 1 mcg/ml</i>	2	
CARNITOR SF SOL 1GM/10ML	3	
CARNITOR SOL 1GM/10ML	3	
CARNITOR TAB 330MG	3	
<i>cinacalcet hcl tab 30 mg (base equiv)</i>	2	SP
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	2	SP
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	2	SP
<i>doxercalciferol cap 0.5 mcg</i>	2	
<i>doxercalciferol cap 1 mcg</i>	2	
<i>doxercalciferol cap 2.5 mcg</i>	2	
GALAFOLD CAP 123MG	3	PA
<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	2	
<i>levocarnitine tab 330 mg</i>	2	
NITYR TAB 2MG	3	PA
NITYR TAB 5MG	3	PA
NITYR TAB 10MG	3	PA
ORFADIN CAP 2MG	3	PA
ORFADIN CAP 5MG	3	PA
ORFADIN CAP 10MG	3	PA
ORFADIN CAP 20MG	3	PA

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Drug Name	Drug Tier	Requirements/Limits
ORFADIN SUS 4MG/ML	3	PA
PALYNZIQ INJ 2.5/0.5	3	SP, PA
PALYNZIQ INJ 10/0.5ML	3	SP, PA
PALYNZIQ INJ 20MG/ML	3	SP, PA
<i>paricalcitol cap 1 mcg</i>	2	
<i>paricalcitol cap 2 mcg</i>	2	
<i>paricalcitol cap 4 mcg</i>	2	
RAVICTI LIQ 1.1GM/ML	3	SP, PA
RAYALDEE CAP 30MCG	3	
SENSIPAR TAB 30MG	3	SP
SENSIPAR TAB 60MG	3	SP
SENSIPAR TAB 90MG	3	SP
<i>sodium phenylbutyrate oral powder 3 gm/teaspoonful</i>	2	SP
<i>sodium phenylbutyrate tab 500 mg</i>	2	SP
STRENSIQ INJ 18/0.45	3	PA
STRENSIQ INJ 28/0.7ML	3	PA
STRENSIQ INJ 40MG/ML	3	PA
STRENSIQ INJ 80/0.8ML	3	PA
XURIDEN POW 2GM	3	PA

POSTERIOR PITUITARY HORMONES

DDAVP INJ 4MCG/ML	3	NM
DDAVP SOL 0.01%	3	
DDAVP SPR 0.01%	3	
DDAVP TAB 0.1MG	3	
DDAVP TAB 0.2MG	3	
<i>desmopressin acetate inj 4 mcg/ml</i>	2	NM
<i>desmopressin acetate nasal spray soln 0.01%</i>	2	
<i>desmopressin acetate nasal spray soln 0.01% (refrigerated)</i>	2	
<i>desmopressin acetate tab 0.1 mg</i>	1	
<i>desmopressin acetate tab 0.2 mg</i>	1	
STIMATE SOL 1.5MG/ML	2	SP

PROLACTIN INHIBITORS

<i>cabergoline tab 0.5 mg</i>	2	NM
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SOMATOSTATIC AGENTS

SIGNIFOR INJ 0.3MG/ML	3	PA
SIGNIFOR INJ 0.6MG/ML	3	PA
SIGNIFOR INJ 0.9MG/ML	3	PA
SOMATULINE INJ 60/0.2ML	3	SP, NM
SOMATULINE INJ 90/0.3ML	3	SP, NM
SOMATULINE INJ 120/.5ML	3	SP, NM

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Drug Name	Drug Tier	Requirements/Limits
VASOPRESSIN RECEPTOR ANTAGONISTS		
JYNARQUE PAK 45-15MG	3	NM, PA
JYNARQUE PAK 60-30MG	3	NM, PA
JYNARQUE PAK 90-30MG	3	NM, PA
JYNARQUE TAB 15MG	3	NM, PA
JYNARQUE TAB 30MG	3	NM, PA
SAMSCA TAB 15MG	3	QL (60 tabs / 180 days), NM
SAMSCA TAB 30MG	3	QL (60 tabs / 180 days), NM

ESTROGENS

ESTROGEN COMBINATIONS

ACTIVELLA TAB 1-0.5MG	3
<i>amabelz tab 0.5-0.1</i>	1
<i>amabelz tab 1-0.5mg</i>	1
ANGELIQ TAB 0.5-1MG	3
ANGELIQ TAB 0.25-0.5	3
BIJUVA CAP 1-100MG	3
CLIMARA PRO DIS WEEKLY	3
COMBIPATCH DIS	3
DUAVEE TAB 0.45-20	3
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	1
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	1
FEMHRT TAB 0.5-2.5	3
<i>fyavolv tab 0.5-2.5</i>	1
<i>fyavolv tab 1-5</i>	1
<i>jinteli tab 1mg-5mcg</i>	1
<i>lopreeza tab 1-0.5mg</i>	1
<i>mimvey tab 1-0.5mg</i>	1
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	1
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	1
PREFEST TAB	3
PREMPHASE TAB	3
PREMPRO TAB	3
PREMPRO TAB 0.3-1.5	3
PREMPRO TAB 0.45-1.5	3
PREMPRO TAB 0.625-5	3

ESTROGENS

ALORA DIS 0.05MG	3
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Drug Name	Drug Tier	Requirements/Limits
CLIMARA DIS 0.1MG	3	
CLIMARA DIS 0.05MG	3	
CLIMARA DIS 0.06MG	3	
CLIMARA DIS 0.025MG	3	
CLIMARA DIS 0.075MG	3	
CLIMARA DIS 0.0375MG	3	
DEPO-ESTRADI INJ 5MG/ML	3	NM
DIVIGEL GEL 0.5MG	3	
DIVIGEL GEL 0.25MG	3	
DIVIGEL GEL 0.75MG	3	
DIVIGEL GEL 1.25MG	3	
DIVIGEL GEL 1MG/GM	3	
ELESTRIN GEL 0.06%	3	
ESTRACE TAB 0.5MG	3	
ESTRACE TAB 1MG	3	
ESTRACE TAB 2MG	3	
<i>estradiol tab 0.5 mg</i>	1	
<i>estradiol tab 1 mg</i>	1	
<i>estradiol tab 2 mg</i>	1	
<i>estradiol td patch twice weekly 0.1 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.05 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.025 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.075 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.0375 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.1 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.05 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.06 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.025 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.075 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	1	
<i>estradiol valerate im in oil 20 mg/ml</i>	1	NM
<i>estradiol valerate im in oil 40 mg/ml</i>	1	NM
ESTROGEL GEL	3	
EVAMIST SPR 1.53MG	3	
MENEST TAB 0.3MG	3	
MENEST TAB 0.625MG	3	
MENEST TAB 1.25MG	3	
MENOSTAR DIS 14MCG	3	

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Drug Name	Drug Tier	Requirements/Limits
MINIVELLE DIS 0.1MG	3	
MINIVELLE DIS 0.05MG	3	
MINIVELLE DIS 0.025MG	3	
MINIVELLE DIS 0.075MG	3	
MINIVELLE DIS 0.0375MG	3	
PREMARIN TAB 0.3MG	3	
PREMARIN TAB 0.9MG	3	
PREMARIN TAB 0.45MG	3	
PREMARIN TAB 0.625MG	3	
PREMARIN TAB 1.25MG	3	
VIVELLE-DOT DIS 0.1MG	3	
VIVELLE-DOT DIS 0.05MG	3	
VIVELLE-DOT DIS 0.025MG	3	
VIVELLE-DOT DIS 0.075MG	3	
VIVELLE-DOT DIS 0.0375MG	3	

FLUOROQUINOLONES

FLUOROQUINOLONES

BAXDELA TAB 450MG	3	NM
CIPRO (5%) SUS 250MG/5	3	NM
CIPRO (10%) SUS 500MG/5	3	NM
<i>ciprofloxacin hcl tab 100 mg (base equiv)</i>	1	NM
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	1	NM
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	1	NM
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	1	NM
LEVAQUIN TAB 500MG	3	NM
LEVAQUIN TAB 750MG	3	NM
<i>levofloxacin oral soln 25 mg/ml</i>	1	NM
<i>levofloxacin tab 250 mg</i>	1	NM
<i>levofloxacin tab 500 mg</i>	1	NM
<i>levofloxacin tab 750 mg</i>	1	NM
<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	1	NM
<i>ofloxacin tab 300 mg</i>	1	NM
<i>ofloxacin tab 400 mg</i>	1	NM

GASTROINTESTINAL AGENTS - MISC.

5-HT4 RECEPTOR AGONISTS

MOTEGRITY TAB 1MG	3	
MOTEGRITY TAB 2MG	3	

AGENTS FOR CHRONIC IDIOPATHIC CONSTIPATION (CIC)

TRULANCE TAB 3MG	3	
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FARNESOID X RECEPTOR (FXR) AGONISTS

OALIVA TAB 5MG	3	SP, PA
OALIVA TAB 10MG	3	SP, PA

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Drug Name	Drug Tier	Requirements/Limits
GALLSTONE SOLUBILIZING AGENTS		
ACTIGALL CAP 300MG	3	
CHENODAL TAB 250MG	3	NM
URSO 250 TAB 250MG	3	
URSO FORTE TAB 500MG	3	
<i>ursodiol cap 300 mg</i>	2	
<i>ursodiol tab 250 mg</i>	2	
<i>ursodiol tab 500 mg</i>	2	
GASTROINTESTINAL ANTIALLERGY AGENTS		
<i>cromolyn sodium oral conc 100 mg/5ml</i>	2	
GASTROCROM CON 100/5ML	3	
GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS		
AMITIZA CAP 8MCG	2	
AMITIZA CAP 24MCG	2	
GASTROINTESTINAL STIMULANTS		
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	1	NM
<i>metoclopramide hcl tab 5 mg (base equivalent)</i>	1	NM
<i>metoclopramide hcl tab 10 mg (base equivalent)</i>	1	NM
INFLAMMATORY BOWEL AGENTS		
APRISO CAP 0.375GM	3	
ASACOL HD TAB 800MG	3	NM
AZULFIDINE TAB 500MG	3	
AZULFIDINE TAB 500MG EN	3	
<i>balsalazide disodium cap 750 mg</i>	1	NM
CANASA SUP 1000MG	3	NM
CIMZIA KIT	3	SP, NM, PA
CIMZIA KIT STARTER	3	SP, PA
CIMZIA PREFL KIT 200MG/ML	3	SP, PA
COLAZAL CAP 750MG	3	NM
<i>mesalamine cap er 24hr 0.375 gm</i>	2	
<i>mesalamine enema 4 gm</i>	2	NM
<i>mesalamine suppos 1000 mg</i>	2	NM
<i>mesalamine tab delayed release 1.2 gm</i>	2	
<i>mesalamine tab delayed release 800 mg</i>	2	NM
PENTASA CAP 250MG CR	2	
PENTASA CAP 500MG CR	2	
ROWASA KIT 4GM	3	NM
<i>sulfasalazine tab 500 mg</i>	1	
<i>sulfasalazine tab delayed release 500 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
INTESTINAL ACIDIFIERS		
<i>enulose sol 10gm/15</i>	1	
<i>generlac sol 10gm/15</i>	1	
<i>lactulose (encephalopathy) solution 10 gm/15ml</i>	1	
IRRITABLE BOWEL SYNDROME (IBS) AGENTS		
<i>aloseptron hcl tab 0.5 mg (base equiv)</i>	2	PA
<i>aloseptron hcl tab 1 mg (base equiv)</i>	2	PA
LINZESS CAP 72MCG	2	
LINZESS CAP 145MCG	2	
LINZESS CAP 290MCG	2	
VIBERZI TAB 75MG	3	PA
VIBERZI TAB 100MG	3	PA
PERIPHERAL OPIOID RECEPTOR ANTAGONISTS		
MOVANTIK TAB 12.5MG	3	NM
MOVANTIK TAB 25MG	3	NM
RELISTOR INJ 8/0.4ML	3	NM
RELISTOR INJ 12/0.6ML	3	NM
RELISTOR TAB 150MG	3	NM
PHOSPHATE BINDER AGENTS		
AURYXIA TAB 210MG	3	
<i>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</i>	1	
<i>calcium acetate (phosphate binder) tab 667 mg</i>	1	
FOSRENOL CHW 500MG	3	
FOSRENOL CHW 750MG	3	
FOSRENOL CHW 1000MG	3	
FOSRENOL POW 750MG	3	
FOSRENOL POW 1000MG	3	
<i>lanthanum carbonate chew tab 500 mg (elemental)</i>	2	
<i>lanthanum carbonate chew tab 750 mg (elemental)</i>	2	
<i>lanthanum carbonate chew tab 1000 mg (elemental)</i>	2	
PHOSLYRA SOL	3	
RENAGEL TAB 800MG	3	
REVELA POW 0.8GM	3	
REVELA POW 2.4GM	3	
REVELA TAB 800MG	3	
<i>sevelamer carbonate packet 0.8 gm</i>	2	
<i>sevelamer carbonate packet 2.4 gm</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>sevelamer carbonate tab 800 mg</i>	2	
<i>sevelamer hcl tab 800 mg</i>	2	
VELPHORO CHW 500MG	3	
SHORT BOWEL SYNDROME (SBS) AGENTS		
GATTEX KIT 5MG	3	SP, PA
TRYPTOPHAN HYDROXYLASE INHIBITORS		
XERMELO TAB 250MG	3	
GENITOURINARY AGENTS - MISCELLANEOUS		
ACIDIFIERS		
K-PHOS TAB NO 2	2	NM
ALKALINIZERS		
ORACIT SOL	2	NM
<i>potassium citrate tab er 5 meq (540 mg)</i>	2	NM
<i>potassium citrate tab er 10 meq (1080 mg)</i>	2	NM
<i>potassium citrate tab er 15 meq (1620 mg)</i>	2	NM
CYSTINOSIS AGENTS		
CYSTAGON CAP 50MG	2	SP
CYSTAGON CAP 150MG	2	SP
PROCYSBI CAP 25MG	3	PA
PROCYSBI CAP 75MG	3	PA
PROCYSBI GRA 75MG	3	PA
PROCYSBI GRA 300MG	3	PA
GENITOURINARY IRRIGANTS		
<i>argyl saline sol 0.9%</i>	2	NM
<i>curity salin sol 0.9% irr</i>	2	NM
<i>sodium chloride irrigation soln 0.9%</i>	2	NM
INTERSTITIAL CYSTITIS AGENTS		
ELMIRON CAP 100MG	3	NM
PROSTATIC HYPERTROPHY AGENTS		
<i>alfuzosin hcl tab er 24hr 10 mg</i>	1	
AVODART CAP 0.5MG	3	
CARDURA XL TAB 4MG	3	
CARDURA XL TAB 8MG	3	
<i>dutasteride cap 0.5 mg</i>	2	
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	2	
<i>finasteride tab 5 mg</i>	1	
FLOMAX CAP 0.4MG	3	
JALYN CAP	3	
PROSCAR TAB 5MG	3	
RAPAFLO CAP 4MG	3	
RAPAFLO CAP 8MG	3	
<i>silodosin cap 4 mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>silodosin cap 8 mg</i>	2	
<i>tamsulosin hcl cap 0.4 mg</i>	1	
UROXATRAL TAB 10MG	3	
URINARY ANALGESICS		
<i>phenazo tab 200mg</i>	1	NM
<i>phenazopyridine hcl tab 100 mg</i>	1	NM
<i>phenazopyridine hcl tab 200 mg</i>	1	NM
PYRIDIUM TAB 100MG	3	NM
PYRIDIUM TAB 200MG	3	NM
URINARY STONE AGENTS		
THIOLA TAB 100MG	3	
GOUT AGENTS		
GOUT AGENT COMBINATIONS		
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	1	
GOUT AGENTS		
<i>allopurinol tab 100 mg</i>	1	
<i>allopurinol tab 300 mg</i>	1	
<i>colchicine cap 0.6 mg</i>	2	QL (60 caps / 23 days), NM
<i>colchicine tab 0.6 mg</i>	2	QL (60 tabs / 23 days), NM
COLCRYS TAB 0.6MG	3	QL (60 tabs / 23 days), NM
<i>febuxostat tab 40 mg</i>	2	PA
<i>febuxostat tab 80 mg</i>	2	PA
GLOPERBA SOL 0.6/5ML	3	NM
MITIGARE CAP 0.6MG	3	QL (60 caps / 23 days), NM
ULORIC TAB 40MG	3	PA
ULORIC TAB 80MG	3	PA
ZYLOPRIM TAB 100MG	3	
ZYLOPRIM TAB 300MG	3	
URICOSURICS		
<i>probenecid tab 500 mg</i>	1	
HEMATOLOGICAL AGENTS - MISC.		
AMINOLEVULINATE SYNTHASE 1-DIRECTED SIRNA		
GIVLAARI INJ 189MG/ML	3	NM, PA
BRADYKININ B2 RECEPTOR ANTAGONISTS		
FIRAZYR INJ 30MG/3ML	3	SP, NM, PA
COMPLEMENT INHIBITORS		
HAEGARDA INJ 2000UNIT	3	SP, NM, PA
HAEGARDA INJ 3000UNIT	3	SP, NM, PA

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Drug Name	Drug Tier	Requirements/Limits
HEMATAOLOGIC - TYROSINE KINASE INHIBITORS		
TAVALISSE TAB 100MG	3	PA
TAVALISSE TAB 150MG	3	PA
HEMATORHEOLOGIC AGENTS		
<i>pentoxifylline tab er 400 mg</i>	1	
PLASMA KALLIKREIN INHIBITORS		
TAKHZYRO INJ 300/2ML	3	SP, PA
PLATELET AGGREGATION INHIBITORS		
AGGRENOX CAP 25-200MG	3	
AGRYLIN CAP 0.5MG	3	
<i>anagrelide hcl cap 0.5 mg</i>	1	
<i>anagrelide hcl cap 1 mg</i>	1	
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	2	
BRILINTA TAB 60MG	2	
BRILINTA TAB 90MG	2	
<i>cilostazol tab 50 mg</i>	1	
<i>cilostazol tab 100 mg</i>	1	
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	1	
<i>clopidogrel bisulfate tab 300 mg (base equiv)</i>	1	NM
<i>dipyridamole tab 25 mg</i>	1	
<i>dipyridamole tab 50 mg</i>	1	
<i>dipyridamole tab 75 mg</i>	1	
EFFIENT TAB 5MG	3	
EFFIENT TAB 10MG	3	
PLAVIX TAB 75MG	3	
<i>prasugrel hcl tab 5 mg (base equiv)</i>	2	
<i>prasugrel hcl tab 10 mg (base equiv)</i>	2	
ZONTIVITY TAB 2.08MG	3	
HEMATOPOIETIC AGENTS		
AGENTS FOR GAUCHER DISEASE		
CERDELGA CAP 84MG	3	SP, PA
<i>miglustat cap 100 mg</i>	2	SP, PA
ZAVESCA CAP 100MG	3	SP, PA
AGENTS FOR SICKLE CELL ANEMIA		
DROXIA CAP 200MG	2	
DROXIA CAP 300MG	2	
DROXIA CAP 400MG	2	
ENDARI POW 5GM	3	NM
OXBRYTA TAB 500MG	3	SP, PA

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Drug Name	Drug Tier	Requirements/Limits
COBALAMINS		
<i>cyanocobalamin inj 1000 mcg/ml</i>	1	NM
FOLIC ACID/FOLATES		
<i>fa-8 cap 800mcg</i>	1	AGE
<i>fa-8 tab 0.8mg</i>	1	AGE
<i>folate tab 400mcg</i>	1	AGE, NM
<i>folic acid cap 0.8 mg</i>	1	AGE
<i>folic acid tab 1 mg</i>	1	
<i>folic acid tab 400 mcg</i>	1	AGE, NM
<i>folic acid tab 800mcg</i>	1	AGE
<i>sm folic acd tab 400mcg</i>	1	AGE, NM
<i>yl folic aci tab 400mcg</i>	1	AGE, NM
HEMATOPOIETIC GROWTH FACTORS		
ARANESP INJ 10MCG	3	NM
ARANESP INJ 25MCG	3	NM
ARANESP INJ 40MCG	3	NM
ARANESP INJ 60MCG	3	NM
ARANESP INJ 100MCG	3	NM
ARANESP INJ 150MCG	3	NM
ARANESP INJ 200MCG	3	NM
ARANESP INJ 300MCG	3	NM
ARANESP INJ 500MCG	3	NM
DOPTelet TAB 20MG	3	SP, NM, PA
EPOGEN INJ 2000/ML	3	NM
EPOGEN INJ 3000/ML	3	NM
EPOGEN INJ 4000/ML	3	NM
EPOGEN INJ 10000/ML	3	NM
EPOGEN INJ 20000/ML	3	NM
FULPHILA INJ 6/0.6ML	3	NM
LEUKINE INJ 250MCG	3	NM
MIRCERA INJ 50MCG	3	NM
MIRCERA INJ 75MCG	3	NM
MIRCERA INJ 100MCG	3	NM
MIRCERA INJ 200MCG	3	NM
MIRCERA SOL 30/0.3ML	3	NM
MIRCERA SOL 150/0.3	3	NM
MULPLETA TAB 3MG	3	SP, NM, PA
NEULASTA INJ 6MG/0.6M	3	NM
NEULASTA KIT 6MG/0.6M	3	NM
NEUPOGEN INJ 300/0.5	3	NM
NEUPOGEN INJ 300MCG	3	NM
NEUPOGEN INJ 480/0.8	3	NM
NEUPOGEN INJ 480MCG	3	NM

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Drug Name	Drug Tier	Requirements/Limits
NIVESTYM INJ 300/0.5	2	NM
NIVESTYM INJ 300MCG	2	NM
NIVESTYM INJ 480/0.8	2	NM
NIVESTYM INJ 480MCG	2	NM
PROCRIT INJ 2000/ML	3	NM
PROCRIT INJ 3000/ML	3	NM
PROCRIT INJ 4000/ML	3	NM
PROCRIT INJ 10000/ML	3	NM
PROCRIT INJ 20000/ML	3	NM
PROCRIT INJ 40000/ML	3	NM
PROMACTA PAK 25MG	3	
PROMACTA POW 12.5MG	3	SP
PROMACTA TAB 12.5MG	3	SP
PROMACTA TAB 25MG	3	SP
PROMACTA TAB 50MG	3	SP
PROMACTA TAB 75MG	3	SP
REBLOZYL INJ 25MG	3	PA
REBLOZYL INJ 75MG	3	PA
RETACRIT INJ 2000UNIT	2	NM
RETACRIT INJ 3000UNIT	2	NM
RETACRIT INJ 4000UNIT	2	NM
RETACRIT INJ 10000UNT	2	NM
RETACRIT INJ 40000UNT	2	NM
UDENYCA INJ 6MG/.6ML	2	NM
ZARXIO INJ 300/0.5	3	NM
ZARXIO INJ 480/0.8	3	NM
ZIEXTENZO INJ 6/0.6ML	3	NM, PA

STEM CELL MOBILIZERS

MOZOBIL INJ	3	SP, NM
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HEMOSTATICS

HEMOSTATICS - SYSTEMIC

AMICAR SOL 0.25/ML	3	NM
AMICAR TAB 500MG	3	NM
AMICAR TAB 1000MG	3	NM
<i>aminocaproic acid tab 500 mg</i>	2	NM
<i>aminocaproic acid tab 1000 mg</i>	2	NM
LYSTEDA TAB 650MG	3	NM
<i>tranexamic acid tab 650 mg</i>	1	NM

HEMOSTATICS - TOPICAL

MONSELS FERR SOL SUBSULF	2	NM
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Drug Name	Drug Tier	Requirements/Limits
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
BARBITURATE HYPNOTICS		
BUTISOL SOD TAB 30MG	3	NM
<i>phenobarbital elixir 20 mg/5ml</i>	1	
<i>phenobarbital tab 15 mg</i>	1	
<i>phenobarbital tab 16.2 mg</i>	1	
<i>phenobarbital tab 30 mg</i>	1	
<i>phenobarbital tab 32.4 mg</i>	1	
<i>phenobarbital tab 60 mg</i>	1	
<i>phenobarbital tab 64.8 mg</i>	1	
<i>phenobarbital tab 97.2 mg</i>	1	
<i>phenobarbital tab 100 mg</i>	1	
HYPNOTICS - TRICYCLIC AGENTS		
<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i>	2	QL (30 tabs / 30 days), NM
<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i>	2	QL (30 tabs / 30 days), NM
SILENOR TAB 3MG	3	QL (30 tabs / 30 days), NM, PA
SILENOR TAB 6MG	3	QL (30 tabs / 30 days), NM, PA
NON-BARBITURATE HYPNOTICS		
AMBIEN CR TAB 6.25MG	3	QL (30 tabs / 30 days), NM, PA, ST
AMBIEN CR TAB 12.5MG	3	QL (30 tabs / 30 days), NM, PA, ST
AMBIEN TAB 5MG	3	QL (30 tabs / 30 days), NM, PA, ST
AMBIEN TAB 10MG	3	QL (30 tabs / 30 days), NM, PA, ST
DORAL TAB 15MG	3	QL (30 tabs / 30 days), NM
EDLUAR SUB 5MG	3	QL (30 tabs / 30 days), NM, PA, ST
EDLUAR SUB 10MG	3	QL (30 tabs / 30 days), NM, PA, ST
<i>estazolam tab 1 mg</i>	1	QL (30 tabs / 30 days), NM
<i>estazolam tab 2 mg</i>	1	QL (30 tabs / 30 days), NM
<i>eszopiclone tab 1 mg</i>	1	QL (30 tabs / 30 days), NM
<i>eszopiclone tab 2 mg</i>	1	QL (30 tabs / 30 days), NM

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Drug Name	Drug Tier	Requirements/Limits
<i>eszopiclone tab 3 mg</i>	1	QL (30 tabs / 30 days), NM
<i>flurazepam hcl cap 15 mg</i>	1	QL (30 caps / 30 days), NM
<i>flurazepam hcl cap 30 mg</i>	1	QL (30 caps / 30 days), NM
HALCION TAB 0.25MG	3	QL (30 tabs / 30 days), NM
INTERMEZZO SUB 1.75MG	3	QL (30 tabs / 30 days), NM, PA, ST
INTERMEZZO SUB 3.5MG	3	QL (30 tabs / 30 days), NM, PA, ST
LUNESTA TAB 1MG	3	QL (30 tabs / 30 days), NM, PA, ST
LUNESTA TAB 2MG	3	QL (30 tabs / 30 days), NM, PA, ST
LUNESTA TAB 3MG	3	QL (30 tabs / 30 days), NM, PA, ST
RESTORIL CAP 7.5MG	3	QL (30 caps / 30 days), NM
RESTORIL CAP 15MG	3	QL (30 caps / 30 days), NM
RESTORIL CAP 30MG	3	QL (30 caps / 30 days), NM
<i>temazepam cap 7.5 mg</i>	1	QL (30 caps / 30 days), NM
<i>temazepam cap 15 mg</i>	1	QL (30 caps / 30 days), NM
<i>temazepam cap 30 mg</i>	1	QL (30 caps / 30 days), NM
<i>triazolam tab 0.25 mg</i>	1	QL (30 tabs / 30 days), NM
<i>triazolam tab 0.125 mg</i>	1	QL (30 tabs / 30 days), NM
<i>zaleplon cap 5 mg</i>	1	QL (30 caps / 30 days), NM
<i>zaleplon cap 10 mg</i>	1	QL (30 caps / 30 days), NM
<i>zolpidem tartrate sl tab 1.75 mg</i>	2	QL (30 ea / 30 days), NM, PA, ST
<i>zolpidem tartrate sl tab 3.5 mg</i>	2	QL (30 ea / 30 days), NM, PA, ST
<i>zolpidem tartrate tab 5 mg</i>	1	QL (30 tabs / 30 days), NM
<i>zolpidem tartrate tab 10 mg</i>	1	QL (30 tabs / 30 days), NM

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Drug Name	Drug Tier	Requirements/Limits
<i>zolpidem tartrate tab er 6.25 mg</i>	1	NM
<i>zolpidem tartrate tab er 12.5 mg</i>	1	NM

OREXIN RECEPTOR ANTAGONISTS

BELSOMRA TAB 5MG	3	QL (30 ea / 30 days), NM, PA, ST
BELSOMRA TAB 10MG	3	QL (30 ea / 30 days), NM, PA, ST
BELSOMRA TAB 15MG	3	QL (30 ea / 30 days), NM, PA, ST
BELSOMRA TAB 20MG	3	QL (30 ea / 30 days), NM, PA, ST

SELECTIVE MELATONIN RECEPTOR AGONISTS

HETLIOZ CAP 20MG	3	PA
ROZEREM TAB 8MG	3	QL (30 tabs / 30 days), NM, PA, ST

LAXATIVES

LAXATIVE COMBINATIONS

COLYTE/FLAVR SOL PACKS	3	NM
<i>gavilyte-c sol</i>	1	NM
<i>gavilyte-g sol</i>	1	NM
<i>gavilyte-n sol flav pk</i>	1	NM
GOLYTELY SOL	3	NM
GOLYTELY SOL PINEAPPL	3	NM
NULYTELY SOL FLAV PKS	3	NM
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	1	NM
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	1	NM
PREPOPIK PAK	3	AGE, NM
SUPREP BOWEL SOL PREP KIT	3	AGE, NM
<i>trilyte sol</i>	1	NM

LAXATIVES - MISCELLANEOUS

<i>constulose sol 10gm/15</i>	1	
<i>lactulose solution 10 gm/15ml</i>	1	

MACROLIDES

AZITHROMYCIN

<i>azithromycin for susp 100 mg/5ml</i>	1	NM
<i>azithromycin for susp 200 mg/5ml</i>	1	NM
<i>azithromycin powd pack for susp 1 gm</i>	1	NM
<i>azithromycin tab 250 mg</i>	1	NM
<i>azithromycin tab 500 mg</i>	1	NM
<i>azithromycin tab 600 mg</i>	1	NM
ZITHROMAX POW 1GM PAK	3	NM

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Drug Name	Drug Tier	Requirements/Limits
ZITHROMAX SUS 100/5ML	3	NM
ZITHROMAX SUS 200/5ML	3	NM
ZITHROMAX TAB 250MG	3	NM
ZITHROMAX TAB 500MG	3	NM
ZITHROMAX TAB 600MG	3	NM
ZITHROMAX TAB TRI-PAK	3	NM
ZITHROMAX TAB Z-PAK	3	NM
CLARITHROMYCIN		
<i>clarithromycin for susp 125 mg/5ml</i>	1	NM
<i>clarithromycin for susp 250 mg/5ml</i>	1	NM
<i>clarithromycin tab 250 mg</i>	1	NM
<i>clarithromycin tab 500 mg</i>	1	NM
<i>clarithromycin tab er 24hr 500 mg</i>	1	NM
ERYTHROMYCINS		
<i>e.e.s. 400 tab 400mg</i>	1	NM
E.E.S. GRAN SUS 200/5ML	3	NM
<i>ery-tab tab 250mg ec</i>	1	NM
<i>ery-tab tab 333mg ec</i>	1	NM
<i>ery-tab tab 500mg ec</i>	1	NM
ERYPED SUS 200/5ML	3	NM
ERYPED SUS 400/5ML	3	NM
<i>erythromycin ethylsuccinate for susp 200 mg/5ml</i>	2	NM
<i>erythromycin ethylsuccinate for susp 400 mg/5ml</i>	2	NM
<i>erythromycin ethylsuccinate tab 400 mg</i>	1	NM
<i>erythromycin tab 250 mg</i>	1	NM
<i>erythromycin tab 500 mg</i>	1	NM
FIDAXOMICIN		
DIFICID TAB 200MG	3	NM
MIGRAINE PRODUCTS		
MIGRAINE COMBINATIONS		
<i>ergotamine w/ caffeine tab 1-100 mg</i>	2	NM
<i>sumatriptan-naproxen sodium tab 85-500 mg</i>	2	NM, PA
TREXIMET TAB 10-60MG	3	QL (9 tablets per 30 days), NM, PA
TREXIMET TAB 85-500MG	3	QL (9 tablets per 30 days), NM, PA
MIGRAINE PRODUCTS		
<i>dihydroergotamine mesylate inj 1 mg/ml</i>	2	QL (20 ampules / 30 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
<i>dihydroergotamine mesylate nasal spray 4 mg/ml</i>	2	QL (8mL per 30 days), NM, PA
ERGOMAR SUB 2MG	3	NM
MIGRAINE PRODUCTS - MONOCLONAL ANTIBODIES		
AIMOVIG INJ 70MG/ML	3	PA
AIMOVIG INJ 140MG/ML	3	PA
AJOVY INJ 225/1.5	3	PA
EMGALITY INJ 100MG/ML	3	PA
EMGALITY INJ 120MG/ML	3	PA
MIGRAINE PRODUCTS - NSAIDS		
CAMBIA POW 50MG	3	QL (9 packets / 45 days), NM
SEROTONIN AGONISTS		
<i>almotriptan malate tab 6.25 mg</i>	2	NM
<i>almotriptan malate tab 6.25 mg</i>	2	QL (12 tabs / 30 days), NM
<i>almotriptan malate tab 12.5 mg</i>	2	QL (8 ea / 30 days), NM
<i>almotriptan malate tab 12.5 mg</i>	2	QL (8 tabs / 30 days), NM
<i>eletriptan hydrobromide tab 20 mg (base equivalent)</i>	2	QL (12 tabs / 30 days), NM
<i>eletriptan hydrobromide tab 40 mg (base equivalent)</i>	2	QL (8 tabs / 30 days), NM
<i>frovatriptan succinate tab 2.5 mg (base equivalent)</i>	2	QL (12 tabs / 30 days), NM
IMITREX INJ 4MG/0.5	3	QL (6 inj per 30 days), NM, PA
IMITREX INJ 6MG/0.5	3	QL (4 inj per 30 days), NM, PA
IMITREX INJ 6MG/0.5	3	QL (4 inj per 30days), NM, PA
IMITREX SPR 5MG/ACT	3	QL (12 inhalers / 30 days), NM, PA
IMITREX SPR 20MG/ACT	3	QL (12 inhalers / 30 days), NM, PA
IMITREX TAB 25MG	3	QL (18 tabs / 30 days), NM, PA
IMITREX TAB 50MG	3	QL (30 tabs / 30 days), NM, PA
IMITREX TAB 100MG	3	QL (9 tabs / 30 days), NM, PA
MAXALT TAB 10MG	3	QL (12 tabs / 30 days), NM, PA

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Drug Name	Drug Tier	Requirements/Limits
MAXALT-MLT TAB 5MG	3	QL (12 tabs / 30 days), NM, PA
MAXALT-MLT TAB 10MG	3	QL (12 tabs / 30 days), NM, PA
<i>naratriptan hcl tab 1 mg (base equiv)</i>	1	QL (18 tabs / 30 days), NM
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	1	QL (9 tabs / 30 days), NM
ONZETRA XSAI MIS 11MG	3	QL (30 nosepieces / 30 days), NM, PA
RELPAK TAB 20MG	3	QL (12 tabs / 30 days), NM, PA
RELPAK TAB 40MG	3	QL (8 tabs / 30 days), NM, PA
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	2	QL (12 tabs / 30 days), NM
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	2	QL (12 tabs / 30 days), NM
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	2	QL (12 ea / 30 days), NM
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	2	QL (12 ea / 30 days), NM
<i>sumatriptan nasal spray 5 mg/act</i>	2	QL (12 inhalers / 30 days), NM
<i>sumatriptan nasal spray 20 mg/act</i>	2	QL (12 inhalers / 30 days), NM
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	2	QL (4 inj per 30 days), NM
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i>	2	QL (6 inj per 30 days), NM
<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i>	2	QL (4 inj per 30 days), NM
<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i>	2	QL (6 inj per 30 days), NM
<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i>	2	QL (4 inj per 30days), NM
<i>sumatriptan succinate solution prefilled syringe 6 mg/0.5ml</i>	2	QL (4 inj per 30 days), NM
<i>sumatriptan succinate tab 25 mg</i>	2	QL (18 tabs / 30 days), NM
<i>sumatriptan succinate tab 50 mg</i>	2	QL (18 tabs / 30 days), NM
<i>sumatriptan succinate tab 100 mg</i>	2	QL (9 tabs / 30 days), NM
SUMAVEL DOSE INJ 6MG/0.5	3	QL (12 injections / 30 days), NM, PA

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Drug Name	Drug Tier	Requirements/Limits
ZEMBRACE SYM INJ 3/0.5ML	3	NM, PA
<i>zolmitriptan orally disintegrating tab 2.5 mg</i>	1	QL (12 tabs / 30 days), NM
<i>zolmitriptan orally disintegrating tab 5 mg</i>	1	QL (8 tabs / 30 days), NM
<i>zolmitriptan tab 2.5 mg</i>	1	QL (12 tabs / 30 days), NM
<i>zolmitriptan tab 5 mg</i>	1	QL (8 tabs / 30 days), NM
ZOMIG SPR 2.5MG	3	QL (12 doses per 30 days), NM, PA
ZOMIG SPR 5MG	3	QL (12 doses per 30 days), NM, PA
ZOMIG TAB 2.5MG	3	QL (12 tabs / 30 days), NM, PA
ZOMIG TAB 5MG	3	QL (8 tabs / 30 days), NM, PA
ZOMIG ZMT TAB 2.5 MG	3	QL (12 tabs / 30 days), NM, PA
ZOMIG ZMT TAB 5MG ODT	3	QL (8 tabs / 30 days), NM, PA

MINERALS & ELECTROLYTES

FLUORIDE

FLUORABON DRO	3	AGE
<i>floritab chw 0.5mg f</i>	1	AGE
<i>floritab chw 0.25mg f</i>	1	AGE
<i>floritab chw 1mg f</i>	1	
<i>floritab chw 2.2mg</i>	1	
<i>floritab dro 0.125mg</i>	1	AGE
<i>flura-drops dro 0.25mg f</i>	1	AGE
<i>ludent chw 0.5mg f</i>	1	AGE
<i>ludent chw 0.25mg f</i>	1	AGE
<i>ludent chw 1mg f</i>	1	
<i>nafrinse chw 1mg f</i>	1	
<i>nafrinse dro 0.125mg</i>	1	AGE
<i>sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf)</i>	1	AGE
<i>sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf)</i>	1	AGE
<i>sodium fluoride chew tab 1 mg f (from 2.2 mg naf)</i>	1	
<i>sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)</i>	1	AGE

Drug Name	Drug Tier	Requirements/Limits
<i>sodium fluoride tab 0.5 mg f (from 1.1 mg naf)</i>	1	AGE
<i>sodium fluoride tab 1 mg f (from 2.2 mg naf)</i>	1	
MAGNESIUM		
MAGNEBIND TAB 400	2	NM
PHOSPHATE		
K-PHOS TAB	2	
POTASSIUM		
EFFER-K TAB 10MEQ	3	NM
EFFER-K TAB 20MEQ	3	NM
K-TAB TAB 8MEQ CR	3	
K-TAB TAB 20MEQ	3	
<i>klor-con 8 tab 8meq er</i>	1	
<i>klor-con 10 tab 10meq er</i>	1	
<i>klor-con m10 tab 10meq er</i>	1	
<i>klor-con m15 tab 15meq er</i>	1	
<i>klor-con m20 tab 20meq er</i>	1	
<i>klor-con pak 20meq</i>	1	
<i>klor-con spr cap 8meq</i>	1	
<i>klor-con spr cap 10meq</i>	1	
<i>potassium chloride cap er 8 meq</i>	1	
<i>potassium chloride cap er 10 meq</i>	1	
<i>potassium chloride microencapsulated crys er tab 10 meq</i>	1	
<i>potassium chloride microencapsulated crys er tab 20 meq</i>	1	
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	1	
<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	1	
<i>potassium chloride powder packet 20 meq</i>	1	
<i>potassium chloride tab er 8 meq (600 mg)</i>	1	
<i>potassium chloride tab er 10 meq</i>	1	
<i>potassium chloride tab er 20 meq (1500 mg)</i>	1	
SODIUM		
<i>sodium chloride inj 2.5 meq/ml (14.6%)</i>	2	NM
<i>sodium chloride preservative free (pf) inj 0.9%</i>	1	NM
ZINC		
GALZIN CAP 25MG	2	NM
GALZIN CAP 50MG	2	NM

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Drug Name	Drug Tier	Requirements/Limits
MISCELLANEOUS THERAPEUTIC CLASSES		
CHELATING AGENTS		
CUPRIMINE CAP 250MG	3	NM, PA
DEPEN TITRA TAB 250MG	3	NM
<i>penicillamine tab 250 mg</i>	2	NM
SYPRINE CAP 250MG	3	NM, PA
<i>trientine hcl cap 250 mg</i>	2	NM, PA
ENZYMES		
XIAFLEX INJ 0.9MG	3	NM
IMMUNOMODULATORS		
REVLIMID CAP 2.5MG	3	NM
REVLIMID CAP 5MG	3	NM
REVLIMID CAP 10MG	3	NM
REVLIMID CAP 15MG	3	NM
REVLIMID CAP 20MG	3	NM
REVLIMID CAP 25MG	3	NM
THALOMID CAP 50MG	3	
THALOMID CAP 100MG	3	
THALOMID CAP 150MG	3	
THALOMID CAP 200MG	3	
IMMUNOSUPPRESSIVE AGENTS		
ASTAGRAF XL CAP 0.5MG	3	
ASTAGRAF XL CAP 1MG	3	
ASTAGRAF XL CAP 5MG	3	
AZASAN TAB 75 MG	3	
AZASAN TAB 100MG	3	
<i>azathioprine tab 50 mg</i>	1	
CELLCEPT CAP 250MG	3	
CELLCEPT SUS 200MG/ML	3	
CELLCEPT TAB 500MG	3	
<i>cyclosporine cap 25 mg</i>	2	
<i>cyclosporine modified cap 25 mg</i>	2	
<i>cyclosporine modified cap 50 mg</i>	2	
<i>cyclosporine modified cap 100 mg</i>	2	
<i>cyclosporine modified oral soln 100 mg/ml</i>	2	
ENVARUSUS XR TAB 0.75MG	3	
ENVARUSUS XR TAB 1MG	3	
ENVARUSUS XR TAB 4MG	3	
<i>everolimus tab 0.5 mg</i>	2	
<i>everolimus tab 0.25 mg</i>	2	
<i>everolimus tab 0.75 mg</i>	2	
<i>gengraf cap 25mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>gengraf cap 100mg</i>	2	
<i>gengraf sol 100mg/ml</i>	2	
IMURAN TAB 50MG	3	
<i>mycophenolate mofetil cap 250 mg</i>	2	
<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	2	
<i>mycophenolate mofetil tab 500 mg</i>	2	
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	2	
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	2	
MYFORTIC TAB 180MG	3	
MYFORTIC TAB 360MG	3	
NEORAL CAP 25MG	3	
NEORAL CAP 100MG	3	
NEORAL SOL 100MG/ML	3	
PROGRAF CAP 0.5MG	3	
PROGRAF CAP 1MG	3	
PROGRAF CAP 5MG	3	
PROGRAF GRA 0.2MG	3	
PROGRAF GRA 1MG	3	
RAPAMUNE SOL 1MG/ML	3	
RAPAMUNE TAB 0.5MG	3	
RAPAMUNE TAB 1MG	3	
RAPAMUNE TAB 2MG	3	
SANDIMMUNE CAP 25MG	3	
SANDIMMUNE CAP 100MG	2	
SANDIMMUNE SOL 100MG/ML	3	
<i>sirolimus oral soln 1 mg/ml</i>	2	
<i>sirolimus tab 0.5 mg</i>	2	
<i>sirolimus tab 1 mg</i>	2	
<i>sirolimus tab 2 mg</i>	2	
<i>tacrolimus cap 0.5 mg</i>	2	
<i>tacrolimus cap 1 mg</i>	2	
<i>tacrolimus cap 5 mg</i>	2	
ZORTRESS TAB 0.5MG	3	
ZORTRESS TAB 0.25MG	3	
ZORTRESS TAB 0.75MG	3	
ZORTRESS TAB 1MG	3	
IRRIGATION SOLUTIONS		
<i>argyl saline sol 100ml</i>	1	NM
<i>water for irrigation, sterile irrigation soln</i>	1	NM

Drug Name	Drug Tier	Requirements/Limits
POTASSIUM REMOVING AGENTS		
<i>kionex sus 15gm/60</i>	1	NM
LOKELMA PAK 5GM	3	
LOKELMA PAK 10GM	3	
<i>sodium polystyrene sulfonate oral susp 15 gm/60ml</i>	1	NM
<i>sodium polystyrene sulfonate powder</i>	1	NM
<i>sodium polystyrene sulfonate rectal susp 30 gm/120ml</i>	1	NM
<i>sps sus 15gm/60</i>	1	NM
VELTASSA POW 8.4GM	3	
VELTASSA POW 16.8GM	3	
VELTASSA POW 25.2GM	3	
SYSTEMIC LUPUS ERYTHEMATOSUS AGENTS		
BENLYSTA INJ 200MG/ML	3	SP, PA
MOUTH/THROAT/DENTAL AGENTS		
ANESTHETICS TOPICAL ORAL		
<i>lidocaine hcl laryngotracheal soln 4%</i>	2	NM
<i>lidocaine hcl viscous soln 2%</i>	2	NM
ANTI-INFECTIVES - THROAT		
<i>clotrimazole troche 10 mg</i>	2	NM
<i>nystatin susp 100000 unit/ml</i>	1	NM
ANTISEPTICS - MOUTH/THROAT		
<i>chlorhexidine gluconate soln 0.12%</i>	2	NM
DEBACTEROL SOL 30-50%	2	NM
<i>paroex sol 0.12%</i>	2	NM
<i>periogard sol 0.12%</i>	2	NM
DENTAL PRODUCTS		
<i>cavarest gel 1.1%</i>	1	
<i>clinpro 5000 pst 1.1%</i>	1	
<i>denta 5000 cre plus</i>	1	
<i>denta 5000 cre plus 2pk</i>	1	
<i>dentagel gel 1.1%</i>	1	
<i>fluoridex pst 1.1%</i>	1	
PREVDNT 5000 PST 1.1%	3	
PREVDNT 5000 PST 1.1-5%	3	NM
PREVIDENT CRE 5000 PLS	3	
PREVIDENT GEL 1.1%	3	
PREVIDENT GEL 1.1% BER	3	
PREVIDENT GEL 1.1% MIN	3	
PREVIDENT PST 1.1%	3	
PREVIDENT SOL 0.2%	3	

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Drug Name	Drug Tier	Requirements/Limits
<i>sf 5000 plus cre 1.1%</i>	1	
<i>sf gel 1.1%</i>	1	
STEROIDS - MOUTH/THROAT/DENTAL		
<i>oralone dent pst 0.1%</i>	2	NM
<i>triamcinolone acetonide dental paste 0.1%</i>	2	NM
THROAT PRODUCTS - MISC.		
<i>cevimeline hcl cap 30 mg</i>	2	
EVOXAC CAP 30MG	3	
<i>pilocarpine hcl tab 5 mg</i>	2	
<i>pilocarpine hcl tab 7.5 mg</i>	2	
MULTIVITAMINS		
PED MULTI VITAMINS W/FL & FE		
<i>multi-vit/fe dro /fl 0.25</i>	1	NM
<i>multi-vit/fl dro /fe 0.25</i>	1	NM
<i>multivit/fl/ dro fe 0.25</i>	1	NM
PED MV W/ FLUORIDE		
FLORIVA DRO PLUS	3	NM
<i>multi vit/fl chw 0.25mg</i>	1	NM
<i>multi vit/fl dro 0.5mg/ml</i>	1	NM
<i>multi-vit/fl dro 0.5mg/ml</i>	1	NM
<i>multivit/fl chw 0.5mg</i>	1	NM
<i>multivit/fl chw 0.25mg</i>	1	NM
<i>multivit/fl chw 1mg</i>	1	NM
<i>multivit/fl dro 0.25mg</i>	1	NM
<i>multivit/fl sol 0.5mg/ml</i>	1	NM
<i>mvc-fluoride chw 0.5mg</i>	1	NM
<i>mvc-fluoride chw 0.25mg</i>	1	NM
<i>mvc-fluoride chw 1mg</i>	1	NM
<i>pediatric vitamins acd w/ fluoride soln 0.5 mg/ml</i>	1	NM
POLY-VI-FLOR CHW 0.5MG	3	NM
POLY-VI-FLOR CHW 0.25MG	3	NM
POLY-VI-FLOR CHW 1MG	3	NM
POLY-VI-FLOR MIS FS	3	NM
POLY-VI-FLOR MIS FS 0.5MG	3	NM
POLY-VI-FLOR MIS FS 0.25	3	NM
POLY-VI-FLOR SUS 0.25/ML	3	NM
TRI-VI-FLOR SUS 0.5MG/ML	3	NM
TRI-VI-FLOR SUS 0.25/ML	3	NM
TRI-VI-FLORO SUS 0.5MG/ML	3	NM
TRI-VI-FLORO SUS 0.25/ML	3	NM
<i>tri-vit/fluo dro 0.5mg</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>tri-vit/fluoro dro 0.25mg</i>	1	NM
<i>vit a/c/d/fl dro 0.25mg</i>	1	NM
PRENATAL VITAMINS		
ATABEX EC TAB 29-1MG	3	NM
ATABEX OB TAB 29-1MG	3	NM
AZESCO TAB 13-1MG	3	NM
BAL-CARE MIS DHA	3	NM
C-NATE DHA CAP 28-1-200	3	NM
CITRANATAL CAP HARMONY	3	NM
CITRANATAL MIS	3	NM
CITRANATAL MIS 90 DHA	3	NM
CITRANATAL MIS B-CALM	3	NM
CITRANATAL PAK ASSURE	3	NM
CITRANATAL PAK DHA	3	NM
CITRANATAL TAB BLOOM	3	NM
CITRANATAL TAB RX	3	NM
CO-NATAL FA TAB 29-1MG	3	NM
COMPLETE NAT PAK DHA	3	NM
COMPLETENATE CHW	3	NM
CONCEPT DHA CAP	3	NM
CONCEPT OB CAP	3	NM
DUET DHA 400 MIS 25-1-400	3	NM
DUET DHA MIS BALANCED	3	NM
<i>elite-ob tab</i>	1	NM
ENBRACE HR CAP	3	NM
FOLET DHA PAK	3	NM
FOLET ONE CAP 38-1-225	3	NM
FOLIVANE-OB CAP	3	NM
<i>inatal gt tab</i>	1	NM
KOSHR PRENAT TAB 30-1MG	3	NM
M-NATAL PLUS TAB	3	NM
M-VIT TAB 27-1MG	3	NM
MARNATAL-F CAP	3	NM
MYNATAL CAP	3	NM
MYNATAL PLUS TAB	3	NM
MYNATAL TAB	3	NM
MYNATAL TAB ADVANCE	3	NM
MYNATAL-Z TAB	3	NM
MYNATE 90 TAB PLUS	3	NM
NATACHEW CHW	3	NM
NATALVIT TAB 75-1MG	3	NM
NEEVO DHA CAP 27-1.13	3	NM
NEONATAL PLS TAB 27-1MG	3	NM

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Drug Name	Drug Tier	Requirements/Limits
NESTABS DHA PAK	3	NM
NESTABS ONE CAP	3	NM
NESTABS TAB	3	NM
NIVA-PLUS TAB	3	NM
O-CAL TAB PRENATAL	3	NM
OB COMPLETE CAP ONE	3	NM
OB COMPLETE CAP PETITE	3	NM
OB COMPLETE TAB	3	NM
OB COMPLETE TAB PREMIER	3	NM
OB COMPLETE/ CAP DHA	3	NM
OBSTETRIX EC TAB	3	NM
OBSTETRIX PAK DHA	3	NM
OBSTETR X ONE CAP 38-1-225	3	NM
PNV FOLIC AC TAB + IRON	3	NM
PNV PRENATAL TAB PLUS	3	NM
PNV TABS TAB 29-1MG	3	NM
<i>pnv-dha cap</i>	1	NM
PNV-DHA CAP DOCUSATE	3	NM
PNV-OMEGA CAP	3	NM
<i>pnv-select tab</i>	1	NM
PR NATAL 400 PAK	3	NM
PR NATAL 400 PAK EC	3	NM
PR NATAL 430 PAK	3	NM
PR NATAL 430 PAK EC	3	NM
PRENA1 CHW	3	NM
PRENA1 PEARL CAP	3	NM
PRENA 1 TRUE MIS	3	NM
PRENAISSANCE CAP	3	NM
PRENAISSANCE CAP PLUS	3	NM
PRENATA CHW 29-1MG	3	NM
<i>prenatabs rx tab</i>	1	NM
PRENATAL 19 CHW 29-1MG	3	NM
<i>prenatal 19 chw tab</i>	1	NM
<i>prenatal 19 tab</i>	1	NM
PRENATAL 19 TAB 29-1MG	3	NM
PRENATAL DHA PAK 27-1-250	3	NM
PRENATAL PLS MIS MV + DHA	3	NM
PRENATAL TAB 27-1MG	3	NM
PRENATAL VIT TAB LOW IRON	3	NM
PRENATAL+FE TAB 29-1MG	3	NM
PRENATAL-U CAP 106.5-1	3	NM
PRENATE CAP ESSENT	3	NM
PRENATE CAP PIXIE	3	NM

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Drug Name	Drug Tier	Requirements/Limits
PRENATE CAP RESTORE	3	NM
PRENATE CHW 0.6-0.4	3	NM
PRENATE DHA CAP	3	NM
PRENATE MINI CAP	3	NM
PREPLUS TAB 27-1MG	3	NM
PRETAB TAB 29-1MG	3	NM
PRIMACARE CAP	3	NM
PROVIDA OB CAP	3	NM
R-NATAL OB CAP 20-1-320	3	NM
REDICHEW RX CHW	3	NM
RELNATE DHA CAP	3	NM
SE-NATAL 19 CHW	3	NM
SE-NATAL 19 TAB	3	NM
SELECT-OB CHW	3	NM
SELECT-OB+ PAK DHA	3	NM
TARON-C DHA CAP	3	NM
TARON-PREX CAP	3	NM
THRIVITE 19 TAB	3	NM
THRIVITE RX TAB 29-1MG	3	NM
TRI-TABS DHA MIS	3	NM
TRICARE PRE CAP 27-1-500	3	NM
TRICARE TAB PRENATAL	3	NM
TRINATAL RX TAB 1	3	NM
<i>trinate tab</i>	1	NM
TRISTART DHA CAP	3	NM
TRISTART ONE CAP 35-1-215	3	NM
TRIVEEN-DUO PAK DHA	3	NM
VINATE DHA CAP 27-1.13	3	NM
VINATE II TAB	3	NM
VINATE M TAB	3	NM
VINATE ONE TAB	3	NM
VIRT-C DHA CAP	3	NM
VIRT-NATE CAP DHA	3	NM
VIRT-PN DHA CAP	3	NM
VIRT-PN PLUS CAP	3	NM
VITAFOL CAP ULTRA	3	NM
VITAFOL CHW GUMMIES	3	NM
VITAFOL FE+ CAP	3	NM
VITAFOL STRP MIS 1MG	3	NM
VITAFOL-NANO TAB	3	NM
VITAFOL-OB PAK +DHA	3	NM
VITAFOL-OB TAB 65-1MG	3	NM
VITAFOL-ONE CAP	3	NM

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Drug Name	Drug Tier	Requirements/Limits
VITAMEDMD CAP ONE RX	3	NM
VITAPEARL CAP	3	NM
VITATRUE MIS	3	NM
VIVA DHA CAP	3	NM
VOL-PLUS TAB	3	NM
VOL-TAB RX TAB	3	NM
VP-HEME OB MIS + DHA	3	NM
VP-PNV-DHA CAP	3	NM
ZATEAN-PN CAP DHA	3	NM
ZATEAN-PN CAP PLUS	3	NM

MUSCULOSKELETAL THERAPY AGENTS

CENTRAL MUSCLE RELAXANTS

<i>baclofen tab 5 mg</i>	1	NM
<i>baclofen tab 10 mg</i>	1	NM
<i>baclofen tab 20 mg</i>	1	NM
<i>carisoprodol tab 250 mg</i>	2	NM
<i>carisoprodol tab 350 mg</i>	2	NM
<i>chlorzoxazone tab 500 mg</i>	1	NM
<i>cyclobenzaprine hcl tab 5 mg</i>	1	NM
<i>cyclobenzaprine hcl tab 7.5 mg</i>	1	NM
<i>cyclobenzaprine hcl tab 10 mg</i>	1	NM
<i>fexmid tab 7.5mg</i>	1	NM
LORZONE TAB 375MG	3	NM
LORZONE TAB 750MG	3	NM
<i>metaxalone tab 800 mg</i>	2	NM
<i>methocarbamol tab 500 mg</i>	1	NM
<i>methocarbamol tab 750 mg</i>	1	NM
<i>orphenadrine citrate inj 30 mg/ml</i>	2	NM
<i>orphenadrine citrate tab er 12hr 100 mg</i>	2	NM
ROBAXIN INJ 100MG/ML	3	NM
ROBAXIN-750 TAB 750MG	3	NM
SOMA TAB 250MG	3	NM
SOMA TAB 350MG	3	NM
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	1	NM
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	1	NM
ZANAFLEX TAB 4MG	3	NM

DIRECT MUSCLE RELAXANTS

DANTRIUM CAP 25MG	3	NM
DANTRIUM CAP 50MG	3	NM
<i>dantrolene sodium cap 25 mg</i>	2	NM
<i>dantrolene sodium cap 50 mg</i>	2	NM
<i>dantrolene sodium cap 100 mg</i>	2	NM

Drug Name	Drug Tier	Requirements/Limits
MUSCLE RELAXANT COMBINATIONS		
<i>carisoprodol w/ aspirin & codeine tab 200-325-16 mg</i>	2	NM
NORGESIC TAB FORTE	3	NM
NASAL AGENTS - SYSTEMIC AND TOPICAL		
NASAL AGENT COMBINATIONS		
<i>azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act</i>	2	NM
DYMISTA SPR 137-50	3	NM
NASAL ANTIALLERGY		
ASTEPRO SPR 0.15%	2	NM
<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	1	NM
<i>azelastine hcl nasal spray 0.15% (205.5 mcg/spray)</i>	1	NM
<i>olopatadine hcl nasal soln 0.6%</i>	1	NM
PATANASE SPR 0.6%	3	NM
NASAL ANTICHOLINERGICS		
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	1	
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	1	
NASAL STEROIDS		
<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	1	NM
<i>mometasone furoate nasal susp 50 mcg/act</i>	1	NM
NASONEX SPR 50MCG/AC	3	NM, PA
OMNARIS SPR	3	NM, PA
QNASL AER 80MCG	3	NM, PA
QNASL CHILD SPR 40MCG	3	NM, PA
XHANCE MIS 93MCG	3	NM, PA
ZETONNA AER 37MCG	3	NM, PA
NEUROMUSCULAR AGENTS		
ALS AGENTS		
<i>riluzole tab 50 mg</i>	1	
TIGLUTIK SUS 50/10ML	3	PA
OPHTHALMIC AGENTS		
ARTIFICIAL TEARS AND LUBRICANTS		
LACRISERT MIS 5MG OP	3	NM
BETA-BLOCKERS - OPHTHALMIC		
<i>betaxolol hcl opth soln 0.5%</i>	1	
BETIMOL SOL 0.5%	3	

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Drug Name	Drug Tier	Requirements/Limits
BETIMOL SOL 0.25%	3	
BETOPTIC-S SUS 0.25% OP	3	
<i>carteolol hcl ophth soln 1%</i>	1	
COMBIGAN SOL 0.2/0.5%	3	
COSOPT PF SOL 2%-0.5%	3	
COSOPT SOL 22.3-6.8	3	
<i>dorzolamide hcl-timolol maleate ophth sol 22.3-6.8 mg/ml pf</i>	1	
<i>dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml</i>	1	
ISTALOL SOL 0.5% OP	3	
<i>levobunolol hcl ophth soln 0.5%</i>	1	
<i>timolol maleate ophth gel forming soln 0.5%</i>	1	
<i>timolol maleate ophth gel forming soln 0.25%</i>	1	
<i>timolol maleate ophth soln 0.5%</i>	1	
<i>timolol maleate ophth soln 0.5% (once-daily)</i>	1	
<i>timolol maleate ophth soln 0.25%</i>	1	
TIMOPTIC SOL 0.5% OP	3	
TIMOPTIC SOL 0.25% OP	3	
TIMOPTIC-XE SOL 0.5% OP	3	
TIMOPTIC-XE SOL 0.25% OP	3	
CYCLOPLEGIC MYDRIATICS		
ATROPINE SUL OIN 1% OP	3	
ATROPINE SUL SOL 1% OP	3	
CYCLOGYL SOL 0.5% OP	3	
CYCLOGYL SOL 1% OP	3	
CYCLOGYL SOL 2% OP	3	
<i>cyclopentolate hcl ophth soln 0.5%</i>	1	
<i>cyclopentolate hcl ophth soln 1%</i>	1	
<i>cyclopentolate hcl ophth soln 2%</i>	1	
ISOPTO ATROP SOL 1% OP	3	
<i>tropicamide ophth soln 0.5%</i>	1	
<i>tropicamide ophth soln 1%</i>	1	
MIOTICS		
ISOPTO CARP SOL 1% OP	3	
ISOPTO CARP SOL 2% OP	3	
ISOPTO CARP SOL 4% OP	3	
PHOSPHOLINE SOL 0.125%OP	2	
<i>pilocarpine hcl ophth soln 1%</i>	1	
<i>pilocarpine hcl ophth soln 2%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>pilocarpine hcl ophth soln 4%</i>	1	
OPHTHALMIC ADRENERGIC AGENTS		
ALPHAGAN P SOL 0.1%	3	
ALPHAGAN P SOL 0.15%	3	
<i>apraclonidine hcl ophth soln 0.5% (base equivalent)</i>	1	NM
<i>brimonidine tartrate ophth soln 0.2%</i>	1	
<i>brimonidine tartrate ophth soln 0.15%</i>	1	
IOPIDINE SOL 1% OP	3	NM
SIMBRINZA SUS 1-0.2%	3	
OPHTHALMIC ANTI-INFECTIVES		
<i>ak-poly-bac oin op</i>	1	NM
AZASITE SOL 1%	3	NM
<i>bacitracin ophth oint 500 unit/gm</i>	1	NM
<i>bacitracin-polymyxin b ophth oint</i>	1	NM
BESIVANCE SUS 0.6%	3	NM
BETADINE SOL 5% OP	3	NM
CILOXAN OIN 0.3% OP	3	NM
CILOXAN SOL 0.3% OP	3	NM
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	1	NM
<i>erythromycin ophth oint 5 mg/gm</i>	2	NM
<i>gatifloxacin ophth soln 0.5%</i>	2	NM
<i>gentak oin 0.3% op</i>	1	NM
<i>gentamicin sulfate ophth soln 0.3%</i>	1	NM
<i>levofloxacin ophth soln 0.5%</i>	1	NM
MOXEZA SOL 0.5%	3	NM
<i>moxifloxacin hcl ophth soln 0.5% (base eq) (2 times daily)</i>	2	NM
<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i>	1	NM
NATACYN SUS 5% OP	3	NM
<i>neo-polycin oin op</i>	1	NM
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	1	NM
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	1	NM
OCUFLOX DRO 0.3% OP	3	NM
<i>ofloxacin ophth soln 0.3%</i>	1	NM
<i>polycin oin op</i>	1	NM
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	1	NM
POLYTRIM SOL OP	3	NM
<i>sulfacetamide sodium ophth oint 10%</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>sulfacetamide sodium ophth soln 10%</i>	1	NM
<i>tobramycin ophth soln 0.3%</i>	1	NM
TOBREX OIN 0.3% OP	3	NM
TOBREX SOL 0.3% OP	3	NM
<i>trifluridine ophth soln 1%</i>	1	NM
VIGAMOX DRO 0.5%	3	NM
ZIRGAN GEL 0.15%	3	NM
ZYMAXID SOL 0.5%	3	NM
OPHTHALMIC IMMUNOMODULATORS		
RESTASIS EMU 0.05%	2	
RESTASIS MUL EMU 0.05%	2	
OPHTHALMIC INTEGRIN ANTAGONISTS		
XIIDRA DRO 5%	2	
OPHTHALMIC KINASE INHIBITORS		
RHOPRESSA SOL 0.02%	3	
ROCKLATAN DRO	2	
OPHTHALMIC NERVE GROWTH FACTORS		
OXERVATE SOL 20MCG/ML	3	NM, PA
OPHTHALMIC STEROIDS		
ALREX SUS 0.2%	3	NM
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	1	NM
BLEPHAMIDE OIN S.O.P.	3	NM
BLEPHAMIDE SUS OP	3	NM
<i>dexamethasone sodium phosphate ophth soln 0.1%</i>	1	NM
DUREZOL EMU 0.05%	3	NM
FLAREX SUS 0.1% OP	3	NM
<i>fluorometholone ophth susp 0.1%</i>	1	NM
FML FORTE SUS 0.25% OP	3	NM
FML OIN 0.1% OP	3	NM
INVELTYS SUS 1%	3	NM
LOTEMAX GEL 0.5%	3	NM
LOTEMAX OIN 0.5%	3	NM
LOTEMAX SM GEL 0.38%	3	NM
LOTEMAX SUS 0.5%	3	NM
MAXIDEX SUS 0.1% OP	3	NM
MAXITROL OIN 0.1% OP	3	NM
MAXITROL SUS 0.1% OP	3	NM
<i>neo-polycin oin hc 1%op</i>	1	NM
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	1	NM

Drug Name	Drug Tier	Requirements/Limits
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	1	NM
<i>neomycin-polymyxin-hc ophth susp</i>	1	NM
PRED MILD SUS 0.12% OP	3	NM
PRED SOD PHO SOL 1% OP	3	NM
PRED-G S.O.P OIN OP	3	NM
PRED-G SUS OP	3	NM
<i>prednisolone acetate ophth susp 1%</i>	1	NM
PREDNISOLONE SUS 1%	3	NM
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	1	NM
TOBRADEX OIN 0.3-0.1%	3	NM
TOBRADEX ST SUS 0.3-0.05	3	NM
TOBRADEX SUS 0.3-0.1%	3	NM
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	1	NM
ZYLET SUS 0.5-0.3%	3	NM
OPHTHALMICS - MISC.		
ACULAR LS SOL 0.4%	3	NM
ACULAR SOL 0.5% OP	3	NM
ACUVAIL SOL 0.45%	3	NM
ALOCRIAL SOL 2%	3	NM
ALOMIDE SOL 0.1% OP	3	NM
<i>azelastine hcl ophth soln 0.05%</i>	1	NM
AZOPT SUS 1% OP	3	
BEPREVE DRO 1.5%	3	NM
<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i>	1	NM
BROMSITE DRO 0.075%	3	NM
<i>cromolyn sodium ophth soln 4%</i>	1	NM
<i>diclofenac sodium ophth soln 0.1%</i>	1	NM
<i>dorzolamide hcl ophth soln 2%</i>	1	
DORZOLAMIDE SOL 2%	3	
<i>epinastine hcl ophth soln 0.05%</i>	1	NM
<i>flurbiprofen sodium ophth soln 0.03%</i>	1	NM
ILEVRO DRO 0.3% OP	3	NM
<i>ketorolac tromethamine ophth soln 0.4%</i>	2	NM
<i>ketorolac tromethamine ophth soln 0.5%</i>	2	NM
LASTACFT SOL 0.25%	3	NM
NEVANAC SUS 0.1%	3	NM
<i>olopatadine hcl ophth soln 0.1% (base equivalent)</i>	1	NM
<i>olopatadine hcl ophth soln 0.2% (base equivalent)</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
PATADAY SOL 0.2%	3	NM
PATANOL SOL 0.1% OP	3	NM
PAZEO DRO 0.7%	3	NM
PROLENSA SOL 0.07%	3	NM
TRUSOPT SOL 2% OP	3	
ZERVIAE DRO 0.24%	3	NM, PA

PROSTAGLANDINS - OPHTHALMIC

<i>bimatoprost ophth soln 0.03%</i>	1	
<i>latanoprost ophth soln 0.005%</i>	1	
LUMIGAN SOL 0.01%	2	
TRAVATAN Z DRO 0.004%	3	
<i>travoprost ophth soln 0.004%</i> <i>(benzalkonium free) (bak free)</i>	2	
XALATAN SOL 0.005%	3	
XELPROS EMU 0.005%	3	
ZIOPTAN DRO 0.0015%	3	

OTIC AGENTS

OTIC AGENTS - MISCELLANEOUS

<i>acetic acid otic soln 2%</i>	1	NM
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OTIC ANTI-INFECTIVES

CETRAXAL SOL 0.2%	3	NM
<i>ciprofloxacin hcl otic soln 0.2% (base equivalent)</i>	1	NM
<i>ofloxacin otic soln 0.3%</i>	1	NM

OTIC COMBINATIONS

CIPRO HC SUS OTIC	3	NM
CIPRODEX SUS 0.3-0.1%	3	NM
<i>ciprofloxacin-fluocinolone acetone (pf) otic soln 0.3-0.025%</i>	2	NM
COLY-MYCIN S SUS OTIC	3	NM
<i>neomycin-polymyxin-hc otic soln 1%</i>	1	NM
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	1	NM
OTOVEL DRO	3	NM

OTIC STEROIDS

DERMOTIC OIL 0.01%	3	NM
<i>flac oil 0.01%</i>	2	NM
<i>fluocinolone acetonide (otic) oil 0.01%</i>	2	NM
<i>hydrocortisone w/ acetic acid otic soln 1-2%</i>	1	NM

Drug Name	Drug Tier	Requirements/Limits
OXYTOCICS		
OXYTOCICS		
<i>methergine tab 0.2mg</i>	2	QL (28 tabs / year), NM
<i>methylergonovine maleate tab 0.2 mg</i>	2	QL (28 tabs / year), NM

PASSIVE IMMUNIZING AND TREATMENT AGENTS

IMMUNE SERUMS

HEPAGAM B INJ	2	SP, NM
HYPERHEP B INJ S/D	2	SP, NM
NABI-HB INJ	2	SP, NM
RHOPHYLAC INJ 1500/2ML	2	SP, NM
WINRHO SDF INJ 1500UNIT	2	SP, NM
WINRHO SDF INJ 2500UNIT	2	SP, NM
WINRHO SDF INJ 5000UNIT	2	SP, NM
WINRHO SDF INJ 15000UNT	2	SP, NM

PENICILLINS

AMINOPENICILLINS

<i>amoxicillin (trihydrate) cap 250 mg</i>	1	NM
<i>amoxicillin (trihydrate) cap 500 mg</i>	1	NM
<i>amoxicillin (trihydrate) chew tab 125 mg</i>	1	NM
<i>amoxicillin (trihydrate) chew tab 250 mg</i>	1	NM
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	1	NM
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	1	NM
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	1	NM
<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	1	NM
<i>amoxicillin (trihydrate) tab 500 mg</i>	1	NM
<i>amoxicillin (trihydrate) tab 875 mg</i>	1	NM
<i>ampicillin cap 500 mg</i>	1	NM

NATURAL PENICILLINS

<i>penicillin v potassium for soln 125 mg/5ml</i>	1	NM
<i>penicillin v potassium for soln 250 mg/5ml</i>	1	NM
<i>penicillin v potassium tab 250 mg</i>	1	NM
<i>penicillin v potassium tab 500 mg</i>	1	NM

PENICILLIN COMBINATIONS

<i>amoxicillin & k clavulanate chew tab 200-28.5 mg</i>	1	NM
<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	1	NM
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	1	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	1	NM
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	1	NM
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	1	NM
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	1	NM
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	1	NM
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	1	NM
<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	1	NM
AUGMENTIN SUS 125/5ML	3	NM
AUGMENTIN SUS 250/5ML	3	NM
AUGMENTIN SUS ES-600	3	NM
AUGMENTIN TAB 500MG	3	NM

PENICILLINASE-RESISTANT PENICILLINS

<i>dicloxacillin sodium cap 250 mg</i>	1	NM
<i>dicloxacillin sodium cap 500 mg</i>	1	NM

PROGESTINS

PROGESTINS

<i>medroxyprogesterone acetate tab 2.5 mg</i>	1	
<i>medroxyprogesterone acetate tab 5 mg</i>	1	
<i>medroxyprogesterone acetate tab 10 mg</i>	1	
MEGACE ES SUS 625/5ML	3	
<i>megestrol acetate susp 625 mg/5ml</i>	2	
<i>norethindrone acetate tab 5 mg</i>	1	
<i>progesterone im in oil 50 mg/ml</i>	1	NM
<i>progesterone micronized cap 100 mg</i>	1	
<i>progesterone micronized cap 200 mg</i>	1	
PROMETRIUM CAP 100MG	3	
PROMETRIUM CAP 200MG	3	
PROVERA TAB 5MG	3	
PROVERA TAB 10MG	3	

PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.

AGENTS FOR CHEMICAL DEPENDENCY

<i>acamprosate calcium tab delayed release 333 mg</i>	2	
ANTABUSE TAB 250MG	3	
ANTABUSE TAB 500MG	3	
<i>disulfiram tab 250 mg</i>	2	
<i>disulfiram tab 500 mg</i>	2	
LUCEMYRA TAB 0.18MG	3	QL (168 tabs / 180 days), NM

Drug Name	Drug Tier	Requirements/Limits
ANTI-CATAPLECTIC AGENTS		
XYREM SOL 500MG/ML	3	NM, PA
ANTIDEMENTIA AGENTS		
ARICEPT TAB 5MG	3	
ARICEPT TAB 10MG	3	
ARICEPT TAB 23MG	3	
<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	2	
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	2	
<i>donepezil hydrochloride tab 5 mg</i>	2	
<i>donepezil hydrochloride tab 10 mg</i>	2	
<i>donepezil hydrochloride tab 23 mg</i>	2	
EXELON DIS 4.6MG/24	3	
EXELON DIS 9.5MG/24	3	
EXELON DIS 13.3/24	3	
<i>galantamine hydrobromide cap er 24hr 8 mg</i>	1	
<i>galantamine hydrobromide cap er 24hr 16 mg</i>	1	
<i>galantamine hydrobromide cap er 24hr 24 mg</i>	1	
<i>galantamine hydrobromide oral soln 4 mg/ml</i>	1	
<i>galantamine hydrobromide tab 4 mg</i>	1	
<i>galantamine hydrobromide tab 8 mg</i>	1	
<i>galantamine hydrobromide tab 12 mg</i>	1	
<i>memantine hcl cap er 24hr 7 mg</i>	2	
<i>memantine hcl cap er 24hr 14 mg</i>	2	
<i>memantine hcl cap er 24hr 21 mg</i>	2	
<i>memantine hcl cap er 24hr 28 mg</i>	2	
<i>memantine hcl oral solution 2 mg/ml</i>	2	
<i>memantine hcl tab 5 mg</i>	2	
<i>memantine hcl tab 10 mg</i>	2	
<i>memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack</i>	2	NM
NAMENDA TAB 5-10MG	3	NM
NAMENDA TAB 5MG	3	
NAMENDA TAB 10MG	3	
NAMENDA XR CAP 7MG	3	
NAMENDA XR CAP 14MG	3	
NAMENDA XR CAP 21MG	3	
NAMENDA XR CAP 28MG	3	
NAMENDA XR CAP TITRATIO	3	NM

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Drug Name	Drug Tier	Requirements/Limits
NAMZARIC CAP	3	NM
NAMZARIC CAP 7-10MG	3	
NAMZARIC CAP 14-10MG	3	
NAMZARIC CAP 21-10MG	3	
NAMZARIC CAP 28-10MG	3	
RAZADYNE ER CAP 8MG	3	
RAZADYNE ER CAP 16MG	3	
RAZADYNE ER CAP 24MG	3	
RAZADYNE TAB 4MG	3	
RAZADYNE TAB 8MG	3	
RAZADYNE TAB 12MG	3	
<i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i>	2	
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	2	
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i>	2	
<i>rivastigmine tartrate cap 6 mg (base equivalent)</i>	2	
<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	2	
<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	2	
<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	2	
COMBINATION PSYCHOTHERAPEUTICS		
<i>olanzapine-fluoxetine hcl cap 3-25 mg</i>	2	
<i>olanzapine-fluoxetine hcl cap 6-25 mg</i>	2	
<i>olanzapine-fluoxetine hcl cap 6-50 mg</i>	2	
<i>olanzapine-fluoxetine hcl cap 12-25 mg</i>	2	
<i>olanzapine-fluoxetine hcl cap 12-50 mg</i>	2	
SYMBYAX CAP 3-25MG	3	
SYMBYAX CAP 6-25MG	3	
SYMBYAX CAP 6-50MG	3	
SYMBYAX CAP 12-50MG	3	
FIBROMYALGIA AGENTS		
SAVELLA MIS TITR PAK	3	NM
SAVELLA TAB 12.5MG	3	
SAVELLA TAB 25MG	3	
SAVELLA TAB 50MG	3	
SAVELLA TAB 100MG	3	
HYPOACTIVE SEXUAL DESIRE DISORDER (HSDD) AGENTS		
VYLEESI INJ 1.75/0.3	3	NM, PA
MOVEMENT DISORDER DRUG THERAPY		
AUSTEDO TAB 6MG	2	SP, PA
AUSTEDO TAB 9MG	2	SP, PA

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Drug Name	Drug Tier	Requirements/Limits
AUSTEDO TAB 12MG	2	SP, PA
INGREZZA CAP 40-80MG	3	NM, PA
INGREZZA CAP 40MG	3	PA
INGREZZA CAP 80MG	3	PA
<i>tetrabenazine tab 12.5 mg</i>	2	SP, PA
<i>tetrabenazine tab 25 mg</i>	2	SP, PA
XENAZINE TAB 12.5MG	3	SP, PA
XENAZINE TAB 25MG	3	SP, PA

MULTIPLE SCLEROSIS AGENTS

AMPYRA TAB 10MG	3	SP, PA
AUBAGIO TAB 7MG	2	SP
AUBAGIO TAB 14MG	2	SP
AVONEX PEN KIT 30MCG	2	SP
AVONEX PREFL KIT 30MCG	2	SP
BETASERON INJ 0.3MG	3	SP, PA
COPAXONE INJ 20MG/ML	2	SP
COPAXONE INJ 40MG/ML	2	SP
<i>dalfampridine tab er 12hr 10 mg</i>	2	SP
GILENYA CAP 0.5MG	2	SP
<i>glatiramer acetate soln prefilled syringe 20 mg/ml</i>	2	SP
<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	2	SP
<i>glatopa inj 20mg/ml</i>	2	SP
<i>glatopa inj 40mg/ml</i>	2	SP
MAVENCLAD PAK 10MG(4)	3	SP, NM, PA
MAVENCLAD PAK 10MG(5)	3	SP, NM, PA
MAVENCLAD PAK 10MG(6)	3	SP, NM, PA
MAVENCLAD PAK 10MG(7)	3	SP, NM, PA
MAVENCLAD PAK 10MG(8)	3	SP, NM, PA
MAVENCLAD PAK 10MG(9)	3	SP, NM, PA
MAVENCLAD PAK 10MG(10)	3	SP, NM, PA
MAYZENT TAB 0.25MG	2	SP
MAYZENT TAB 2MG	2	SP
PLEGRIDY INJ	2	SP
PLEGRIDY INJ PEN	2	SP
PLEGRIDY INJ STARTER	2	SP, NM
PLEGRIDY PEN INJ STARTER	2	SP, NM
REBIF INJ 22/0.5	2	SP
REBIF INJ 44/0.5	2	SP
REBIF REBIDO INJ 22/0.5	2	SP
REBIF REBIDO INJ 44/0.5	2	SP
REBIF REBIDO INJ TITRATN	2	SP

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Drug Name	Drug Tier	Requirements/Limits
REBIF TITRTN INJ PACK	2	SP
TECFIDERA CAP 120MG	2	SP
TECFIDERA CAP 240MG	2	SP
TECFIDERA MIS STARTER	2	SP, NM
VUMERITY CAP 231MG	3	SP, PA
VUMERITY CAP 231MG	3	SP, NM, PA
POSTHERPETIC NEURALGIA (PHN)/NEUROPATHIC PAIN AGENTS		
GRALISE STAR MIS 300/600	3	NM, PA
GRALISE TAB 300MG	3	PA
GRALISE TAB 600MG	3	PA
PSEUDOBULBAR AFFECT (PBA) AGENTS		
NUEDEXTA CAP 20-10MG	3	PA
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
<i>ergoloid mesylates tab 1 mg</i>	2	
<i>pimozide tab 1 mg</i>	2	
<i>pimozide tab 2 mg</i>	2	
RESTLESS LEG SYNDROME (RLS) AGENTS		
HORIZANT TAB 300MG ER	3	PA
HORIZANT TAB 600MG ER	3	PA
SMOKING DETERRENTS		
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	1	NM; Maximum 168 day supply per calendar year.
CHANTIX PAK 0.5& 1MG	2	NM; Maximum 168 day supply per calendar year.
CHANTIX PAK 1MG	2	NM; Maximum 168 day supply per calendar year.
CHANTIX TAB 0.5MG	2	NM; Maximum 168 day supply per calendar year.
CHANTIX TAB 1MG	2	NM; Maximum 168 day supply per calendar year.
<i>cvs nicotine dis 7mg/24hr</i>	1	NM; Maximum 168 day supply per calendar year.
<i>cvs nicotine dis 14mg/24h</i>	1	NM; Maximum 168 day supply per calendar year.
<i>cvs nicotine dis 21mg/24h</i>	1	NM; Maximum 168 day supply per calendar year.

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Drug Name	Drug Tier	Requirements/Limits
<i>cvs nicotine gum 2mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>cvs nicotine gum 2mg orig</i>	1	NM; Maximum 168 day supply per calendar year.
<i>cvs nicotine gum 2mgfruit</i>	1	NM; Maximum 168 day supply per calendar year.
<i>cvs nicotine gum 4mg cinn</i>	1	NM; Maximum 168 day supply per calendar year.
<i>cvs nicotine gum 4mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>cvs nicotine gum 4mg orig</i>	1	NM; Maximum 168 day supply per calendar year.
<i>cvs nicotine gum 4mgfruit</i>	1	NM; Maximum 168 day supply per calendar year.
<i>cvs nicotine loz 2mg</i>	1	NM; Maximum 168 day supply per calendar year.
<i>cvs nicotine loz 2mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>cvs nicotine loz 4mg cinn</i>	1	NM; Maximum 168 day supply per calendar year.
<i>cvs nicotine loz 4mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>eq nicotine dis 7mg/24hr</i>	1	NM; Maximum 168 day supply per calendar year.
<i>eq nicotine dis 14mg/24h</i>	1	NM; Maximum 168 day supply per calendar year.
<i>eq nicotine dis 21mg/24h</i>	1	NM; Maximum 168 day supply per calendar year.
<i>eq nicotine gum 2mg cinn</i>	1	NM; Maximum 168 day supply per calendar year.

Drug Name	Drug Tier	Requirements/Limits
<i>eq nicotine gum 2mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>eq nicotine gum 2mg orig</i>	1	NM; Maximum 168 day supply per calendar year.
<i>eq nicotine gum 2mgfruit</i>	1	NM; Maximum 168 day supply per calendar year.
<i>eq nicotine gum 4mg cinn</i>	1	NM; Maximum 168 day supply per calendar year.
<i>eq nicotine gum 4mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>eq nicotine gum 4mg orig</i>	1	NM; Maximum 168 day supply per calendar year.
<i>eq nicotine gum 4mg ref</i>	1	NM; Maximum 168 day supply per calendar year.
<i>eq nicotine gum 4mg strt</i>	1	NM; Maximum 168 day supply per calendar year.
<i>eq nicotine gum 4mgfruit</i>	1	NM; Maximum 168 day supply per calendar year.
<i>eq nicotine loz 2mg cher</i>	1	NM; Maximum 168 day supply per calendar year.
<i>eq nicotine loz 2mg cinn</i>	1	NM; Maximum 168 day supply per calendar year.
<i>eq nicotine loz 2mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>eq nicotine loz 4mg chry</i>	1	NM; Maximum 168 day supply per calendar year.
<i>eq nicotine loz 4mg cinn</i>	1	NM; Maximum 168 day supply per calendar year.
<i>eq nicotine loz 4mg mint</i>	1	NM; Maximum 168 day supply per calendar year.

Drug Name	Drug Tier	Requirements/Limits
<i>eql nicotine gum 2mg</i>	1	NM; Maximum 168 day supply per calendar year.
<i>eql nicotine loz 2mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>eql nicotine loz 4mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>gnp nicotine dis 7mg/24hr</i>	1	NM; Maximum 168 day supply per calendar year.
<i>gnp nicotine dis 14mg/24h</i>	1	NM; Maximum 168 day supply per calendar year.
<i>gnp nicotine gum 2mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>gnp nicotine gum 2mg orig</i>	1	NM; Maximum 168 day supply per calendar year.
<i>gnp nicotine gum 4mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>gnp nicotine gum 4mg orig</i>	1	NM; Maximum 168 day supply per calendar year.
<i>gnp nicotine loz 2mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>gnp nicotine loz 4mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>gnp nicotine loz mini 2mg</i>	1	NM; Maximum 168 day supply per calendar year.
<i>hm nicotine dis 7mg/24hr</i>	1	NM; Maximum 168 day supply per calendar year.
<i>hm nicotine dis 14mg/24h</i>	1	NM; Maximum 168 day supply per calendar year.
<i>hm nicotine dis 21mg/24h</i>	1	NM; Maximum 168 day supply per calendar year.

Drug Name	Drug Tier	Requirements/Limits
<i>hm nicotine gum 2mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>hm nicotine gum 4mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>hm nicotine loz 2mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>hm nicotine loz 4mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>kls quit2 gum 2mg</i>	1	NM; Maximum 168 day supply per calendar year.
<i>kls quit2 loz 2mg</i>	1	NM; Maximum 168 day supply per calendar year.
<i>kls quit4 gum 4mg</i>	1	NM; Maximum 168 day supply per calendar year.
<i>kls quit4 loz 4mg</i>	1	NM; Maximum 168 day supply per calendar year.
NICODERM CQ DIS 7MG/24HR	3	NM; Maximum 168 day supply per calendar year.
NICODERM CQ DIS 14MG/24H	3	NM; Maximum 168 day supply per calendar year.
NICODERM CQ DIS 21MG/24H	3	NM; Maximum 168 day supply per calendar year.
<i>nicorelief gum 2mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>nicorelief gum 2mg orig</i>	1	NM; Maximum 168 day supply per calendar year.
NICORETTE GUM 2MG	3	NM; Maximum 168 day supply per calendar year.
NICORETTE GUM 2MG CINN	3	NM; Maximum 168 day supply per calendar year.

Drug Name	Drug Tier	Requirements/Limits
NICORETTE GUM 2MG MINT	3	NM; Maximum 168 day supply per calendar year.
NICORETTE GUM 2MG ORIG	3	NM; Maximum 168 day supply per calendar year.
NICORETTE GUM 2MGFRUIT	3	NM; Maximum 168 day supply per calendar year.
NICORETTE GUM 4MG	3	NM; Maximum 168 day supply per calendar year.
NICORETTE GUM 4MG CINN	3	NM; Maximum 168 day supply per calendar year.
NICORETTE GUM 4MG MINT	3	NM; Maximum 168 day supply per calendar year.
NICORETTE GUM 4MG ORIG	3	NM; Maximum 168 day supply per calendar year.
NICORETTE GUM 4MGFRUIT	3	NM; Maximum 168 day supply per calendar year.
NICORETTE LOZ 2MG MINT	3	NM; Maximum 168 day supply per calendar year.
NICORETTE LOZ 4MG MINT	3	NM; Maximum 168 day supply per calendar year.
NICORETTE ST GUM 2MG MINT	3	NM; Maximum 168 day supply per calendar year.
NICORETTE ST GUM 2MG ORIG	3	NM; Maximum 168 day supply per calendar year.
NICORETTE ST GUM 4MG ORIG	3	NM; Maximum 168 day supply per calendar year.
<i>nicotine dis 7mg/24hr</i>	1	NM; Maximum 168 day supply per calendar year.
<i>nicotine dis step 1</i>	1	NM; Maximum 168 day supply per calendar year.

Drug Name	Drug Tier	Requirements/Limits
<i>nicotine gum 4mg</i>	1	NM; Maximum 168 day supply per calendar year.
<i>nicotine loz 2mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>nicotine loz 4mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>nicotine loz mini 2mg</i>	1	NM; Maximum 168 day supply per calendar year.
<i>nicotine pol loz 4mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>nicotine polacrilex gum 2 mg</i>	1	NM; Maximum 168 day supply per calendar year.
<i>nicotine polacrilex gum 4 mg</i>	1	NM; Maximum 168 day supply per calendar year.
<i>nicotine polacrilex lozenge 2 mg</i>	1	NM; Maximum 168 day supply per calendar year.
<i>nicotine polacrilex lozenge 4 mg</i>	1	NM; Maximum 168 day supply per calendar year.
NICOTINE SYS KIT TRANSDER	3	NM; Maximum 168 day supply per calendar year.
<i>nicotine td patch 24hr 7 mg/24hr</i>	1	NM; Maximum 168 day supply per calendar year.
<i>nicotine td patch 24hr 14 mg/24hr</i>	1	NM; Maximum 168 day supply per calendar year.
<i>nicotine td patch 24hr 21 mg/24hr</i>	1	NM; Maximum 168 day supply per calendar year.
NICOTROL INH	3	NM; Maximum 168 day supply per calendar year.
NICOTROL NS SPR 10MG/ML	3	NM; Maximum 168 day supply per calendar year.

Drug Name	Drug Tier	Requirements/Limits
<i>ra nicotine dis 7mg/24hr</i>	1	NM; Maximum 168 day supply per calendar year.
<i>ra nicotine dis 14mg/24h</i>	1	NM; Maximum 168 day supply per calendar year.
<i>ra nicotine dis 21mg/24h</i>	1	NM; Maximum 168 day supply per calendar year.
<i>ra nicotine gum 2mg</i>	1	NM; Maximum 168 day supply per calendar year.
<i>ra nicotine gum 2mg cinn</i>	1	NM; Maximum 168 day supply per calendar year.
<i>ra nicotine gum 2mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>ra nicotine gum 2mgfruit</i>	1	NM; Maximum 168 day supply per calendar year.
<i>ra nicotine gum 4mg</i>	1	NM; Maximum 168 day supply per calendar year.
<i>ra nicotine gum 4mg frut</i>	1	NM; Maximum 168 day supply per calendar year.
<i>ra nicotine gum 4mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>ra nicotine loz 2mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>ra nicotine loz 4mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>sm nicotine dis 7mg/24hr</i>	1	NM; Maximum 168 day supply per calendar year.
<i>sm nicotine dis 14mg/24h</i>	1	NM; Maximum 168 day supply per calendar year.
<i>sm nicotine dis 21mg/24h</i>	1	NM; Maximum 168 day supply per calendar year.

Drug Name	Drug Tier	Requirements/Limits
<i>sm nicotine gum 2mg</i>	1	NM; Maximum 168 day supply per calendar year.
<i>sm nicotine gum 2mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>sm nicotine gum 4mg</i>	1	NM; Maximum 168 day supply per calendar year.
<i>sm nicotine gum 4mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>sm nicotine loz 2mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>sm nicotine loz 4mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>sr nicotine gum 2mg</i>	1	NM; Maximum 168 day supply per calendar year.
<i>stop smoking gum 2mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>stop smoking gum 2mg orig</i>	1	NM; Maximum 168 day supply per calendar year.
<i>stop smoking gum 4mg</i>	1	NM; Maximum 168 day supply per calendar year.
<i>stop smoking loz 2mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>stop smoking loz 4mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>tgt nicotine dis 7mg/24hr</i>	1	NM; Maximum 168 day supply per calendar year.
<i>tgt nicotine dis 14mg/24h</i>	1	NM; Maximum 168 day supply per calendar year.
<i>tgt nicotine dis 21mg/24h</i>	1	NM; Maximum 168 day supply per calendar year.

Drug Name	Drug Tier	Requirements/Limits
<i>tgt nicotine gum 2mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>tgt nicotine gum 2mg orig</i>	1	NM; Maximum 168 day supply per calendar year.
<i>tgt nicotine gum 2mgfruit</i>	1	NM; Maximum 168 day supply per calendar year.
<i>tgt nicotine gum 4mg</i>	1	NM; Maximum 168 day supply per calendar year.
<i>tgt nicotine gum 4mg orig</i>	1	NM; Maximum 168 day supply per calendar year.
<i>tgt nicotine loz 2mg chry</i>	1	NM; Maximum 168 day supply per calendar year.
<i>tgt nicotine loz 2mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>tgt nicotine loz 4mg chry</i>	1	NM; Maximum 168 day supply per calendar year.
<i>tgt nicotine loz 4mg mint</i>	1	NM; Maximum 168 day supply per calendar year.
<i>thrive gum 2mg mint</i>	1	NM; Maximum 168 day supply per calendar year.

TRANSTHYRETIN AMYLOIDOSIS AGENTS

TEGSEDI INJ 284/1.5	3	PA
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VASOMOTOR SYMPTOM AGENTS

BRISDELLE CAP 7.5MG	3	
<i>paroxetine mesylate cap 7.5 mg (base equiv)</i>	2	

RESPIRATORY AGENTS - MISC.

CYSTIC FIBROSIS AGENTS

KALYDECO PAK 50MG	3	PA
KALYDECO PAK 75MG	3	PA
KALYDECO TAB 150MG	3	PA
ORKAMBI GRA 100-125	3	PA
ORKAMBI GRA 150-188	3	PA
ORKAMBI TAB 100-125	3	PA
ORKAMBI TAB 200-125	3	PA

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Drug Name	Drug Tier	Requirements/Limits
PULMOZYME SOL 1MG/ML	3	SP, PA
SYMDEKO TAB 100-150	3	PA
TRIKAFTA TAB	3	PA
PULMONARY FIBROSIS AGENTS		
ESBRIET CAP 267MG	3	SP, PA
ESBRIET TAB 267MG	3	SP, PA
ESBRIET TAB 801MG	3	SP, PA
OFEV CAP 100MG	3	SP, PA
OFEV CAP 150MG	3	SP, PA
SULFONAMIDES		
SULFONAMIDES		
SULFADIAZINE TAB 500MG	3	NM
TETRACYCLINES		
AMINOMETHYLCYCLINES		
NUZYRA TAB 150MG	3	NM
TETRACYCLINES		
<i>avidoxy tab 100mg</i>	2	NM
<i>coremino tab 45mg</i>	2	NM, PA
<i>coremino tab 90mg</i>	2	NM, PA
<i>coremino tab 135mg</i>	2	NM, PA
<i>demeclocycline hcl tab 150 mg</i>	2	NM
<i>demeclocycline hcl tab 300 mg</i>	2	NM
DORYX MPC TAB 120MG	3	NM, PA
DORYX TAB 50MG	3	NM, PA
DORYX TAB 200MG	3	NM, PA
<i>doxycycline hyclate cap 50 mg</i>	2	NM
<i>doxycycline hyclate cap 100 mg</i>	2	NM
<i>doxycycline hyclate tab 20 mg</i>	2	NM
<i>doxycycline hyclate tab 100 mg</i>	2	NM
<i>doxycycline hyclate tab delayed release 50 mg</i>	2	NM, PA
<i>doxycycline hyclate tab delayed release 75 mg</i>	2	NM, PA
<i>doxycycline hyclate tab delayed release 100 mg</i>	2	NM, PA
<i>doxycycline hyclate tab delayed release 150 mg</i>	2	NM, PA
<i>doxycycline hyclate tab delayed release 200 mg</i>	2	NM, PA
<i>doxycycline monohydrate cap 50 mg</i>	2	NM
<i>doxycycline monohydrate cap 75 mg</i>	2	NM
<i>doxycycline monohydrate cap 100 mg</i>	2	NM
<i>doxycycline monohydrate cap 150 mg</i>	2	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>doxycycline monohydrate for susp 25 mg/5ml</i>	2	NM
<i>doxycycline monohydrate tab 50 mg</i>	2	NM
<i>doxycycline monohydrate tab 75 mg</i>	2	NM
<i>doxycycline monohydrate tab 100 mg</i>	2	NM
<i>doxycycline monohydrate tab 150 mg</i>	2	NM
<i>minocycline hcl cap 50 mg</i>	1	NM
<i>minocycline hcl cap 75 mg</i>	1	NM
<i>minocycline hcl cap 100 mg</i>	1	NM
<i>minocycline hcl tab er 24hr 45 mg</i>	2	NM, PA
<i>minocycline hcl tab er 24hr 55 mg</i>	2	NM, PA
<i>minocycline hcl tab er 24hr 65 mg</i>	2	NM, PA
<i>minocycline hcl tab er 24hr 80 mg</i>	2	NM, PA
<i>minocycline hcl tab er 24hr 90 mg</i>	2	NM, PA
<i>minocycline hcl tab er 24hr 105 mg</i>	2	NM, PA
<i>minocycline hcl tab er 24hr 115 mg</i>	2	NM, PA
<i>minocycline hcl tab er 24hr 135 mg</i>	2	NM, PA
<i>mondoxyme nl cap 75mg</i>	2	NM
<i>mondoxyme nl cap 100mg</i>	2	NM
<i>morgidox cap 1x50mg</i>	2	NM
<i>morgidox cap 1x100mg</i>	2	NM
<i>morgidox cap 2x100mg</i>	2	NM
<i>okebo cap 75mg</i>	2	NM
SOLODYN TAB 55MG	3	NM, PA
SOLODYN TAB 65MG	3	NM, PA
SOLODYN TAB 80MG	3	NM, PA
SOLODYN TAB 105MG	3	NM, PA
SOLODYN TAB 115MG	3	NM, PA
<i>tetracycline hcl cap 250 mg</i>	2	NM
<i>tetracycline hcl cap 500 mg</i>	2	NM
VIBRAMYCIN SYP 50MG/5ML	3	NM

THYROID AGENTS

ANTITHYROID AGENTS

<i>methimazole tab 5 mg</i>	1
<i>methimazole tab 10 mg</i>	1
<i>propylthiouracil tab 50 mg</i>	1
TAPAZOLE TAB 5MG	3
TAPAZOLE TAB 10MG	3

THYROID HORMONES

ARMOUR THYRO TAB 15MG	3
ARMOUR THYRO TAB 30MG	3
ARMOUR THYRO TAB 60MG	3
ARMOUR THYRO TAB 90MG	3

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Drug Name	Drug Tier	Requirements/Limits
ARMOUR THYRO TAB 120MG	3	
ARMOUR THYRO TAB 180MG	3	
ARMOUR THYRO TAB 240MG	3	
ARMOUR THYRO TAB 300MG	3	
CYTOMEL TAB 5MCG	3	
CYTOMEL TAB 25MCG	3	
CYTOMEL TAB 50MCG	3	
<i>euthyrox tab 25mcg</i>	1	
<i>euthyrox tab 50mcg</i>	1	
<i>euthyrox tab 75mcg</i>	1	
<i>euthyrox tab 88mcg</i>	1	
<i>euthyrox tab 100mcg</i>	1	
<i>euthyrox tab 112mcg</i>	1	
<i>euthyrox tab 125mcg</i>	1	
<i>euthyrox tab 137mcg</i>	1	
<i>euthyrox tab 150mcg</i>	1	
<i>euthyrox tab 175mcg</i>	1	
<i>euthyrox tab 200mcg</i>	1	
<i>levo-t tab 25mcg</i>	1	
<i>levo-t tab 50mcg</i>	1	
<i>levo-t tab 75mcg</i>	1	
<i>levo-t tab 88mcg</i>	1	
<i>levo-t tab 100mcg</i>	1	
<i>levo-t tab 112mcg</i>	1	
<i>levo-t tab 125mcg</i>	1	
<i>levo-t tab 137mcg</i>	1	
<i>levo-t tab 150mcg</i>	1	
<i>levo-t tab 175mcg</i>	1	
<i>levo-t tab 200 mcg</i>	1	
<i>levo-t tab 300 mcg</i>	1	
<i>levothyroxine sodium tab 25 mcg</i>	1	
<i>levothyroxine sodium tab 50 mcg</i>	1	
<i>levothyroxine sodium tab 75 mcg</i>	1	
<i>levothyroxine sodium tab 88 mcg</i>	1	
<i>levothyroxine sodium tab 100 mcg</i>	1	
<i>levothyroxine sodium tab 112 mcg</i>	1	
<i>levothyroxine sodium tab 125 mcg</i>	1	
<i>levothyroxine sodium tab 137 mcg</i>	1	
<i>levothyroxine sodium tab 150 mcg</i>	1	
<i>levothyroxine sodium tab 175 mcg</i>	1	
<i>levothyroxine sodium tab 200 mcg</i>	1	
<i>levothyroxine sodium tab 300 mcg</i>	1	
<i>levoxyl tab 25mcg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>levoxyl tab 50mcg</i>	1	
<i>levoxyl tab 75mcg</i>	1	
<i>levoxyl tab 88mcg</i>	1	
<i>levoxyl tab 100mcg</i>	1	
<i>levoxyl tab 112mcg</i>	1	
<i>levoxyl tab 125mcg</i>	1	
<i>levoxyl tab 137mcg</i>	1	
<i>levoxyl tab 150mcg</i>	1	
<i>levoxyl tab 175mcg</i>	1	
<i>levoxyl tab 200mcg</i>	1	
<i>liothyronine sodium tab 5 mcg</i>	1	
<i>liothyronine sodium tab 25 mcg</i>	1	
<i>liothyronine sodium tab 50 mcg</i>	1	
NATURE THROI TAB 162.5MG	3	
NATURE-THROI TAB 16.25MG	3	
NATURE-THROI TAB 32.5MG	3	
NATURE-THROI TAB 48.75MG	3	
NATURE-THROI TAB 65MG	3	
NATURE-THROI TAB 81.25MG	3	
NATURE-THROI TAB 97.5MG	3	
NATURE-THROI TAB 113.75MG	3	
NATURE-THROI TAB 130MG	3	
NATURE-THROI TAB 146.25MG	3	
NATURE-THROI TAB 195MG	3	
NATURE-THROI TAB 260MG	3	
NATURE-THROI TAB 325MG	3	
<i>np thyroid tab 15mg</i>	1	
<i>np thyroid tab 30mg</i>	1	
<i>np thyroid tab 60mg</i>	1	
<i>np thyroid tab 90mg</i>	1	
<i>np thyroid tab 120mg</i>	1	
SYNTHROID TAB 25MCG	3	
SYNTHROID TAB 50MCG	3	
SYNTHROID TAB 75MCG	3	
SYNTHROID TAB 88MCG	3	
SYNTHROID TAB 100MCG	3	
SYNTHROID TAB 112MCG	3	
SYNTHROID TAB 125MCG	3	
SYNTHROID TAB 137MCG	3	
SYNTHROID TAB 150MCG	3	
SYNTHROID TAB 175MCG	3	
SYNTHROID TAB 200MCG	3	
SYNTHROID TAB 300MCG	3	

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Drug Name	Drug Tier	Requirements/Limits
<i>thyroid tab 15 mg (1/4 grain)</i>	1	
<i>thyroid tab 30 mg (1/2 grain)</i>	1	
<i>thyroid tab 60 mg (1 grain)</i>	1	
<i>thyroid tab 90 mg (1 1/2 grain)</i>	1	
<i>thyroid tab 120 mg (2 grain)</i>	1	
THYROLAR-1 TAB 60MG	3	
THYROLAR-1/2 TAB 30MG	3	
THYROLAR-1/4 TAB 15MG	3	
THYROLAR-2 TAB 120MG	3	
THYROLAR-3 TAB 180MG	3	
TIROSINT CAP 13MCG	3	
TIROSINT CAP 25MCG	3	
TIROSINT CAP 50MCG	3	
TIROSINT CAP 75MCG	3	
TIROSINT CAP 88MCG	3	
TIROSINT CAP 100MCG	3	
TIROSINT CAP 112MCG	3	
TIROSINT CAP 125MCG	3	
TIROSINT CAP 137MCG	3	
TIROSINT CAP 150MCG	3	
TIROSINT CAP 175MCG	3	
TIROSINT CAP 200	3	
TIROSINT-SOL SOL 13MCG/ML	3	
TIROSINT-SOL SOL 25MCG/ML	3	
TIROSINT-SOL SOL 50MCG/ML	3	
TIROSINT-SOL SOL 75MCG/ML	3	
TIROSINT-SOL SOL 88MCG/ML	3	
TIROSINT-SOL SOL 100MCG	3	
TIROSINT-SOL SOL 112MCG	3	
TIROSINT-SOL SOL 125MCG	3	
TIROSINT-SOL SOL 137MCG	3	
TIROSINT-SOL SOL 150MCG	3	
TIROSINT-SOL SOL 175MCG	3	
TIROSINT-SOL SOL 200MCG	3	
<i>unithroid tab 25mcg</i>	1	
<i>unithroid tab 50mcg</i>	1	
<i>unithroid tab 75mcg</i>	1	
<i>unithroid tab 88mcg</i>	1	
<i>unithroid tab 100mcg</i>	1	
<i>unithroid tab 112mcg</i>	1	
<i>unithroid tab 125mcg</i>	1	
<i>unithroid tab 137mcg</i>	1	
<i>unithroid tab 150mcg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>unithroid tab 175mcg</i>	1	
<i>unithroid tab 200mcg</i>	1	
<i>unithroid tab 300mcg</i>	1	
WESTHROID TAB 32.5MG	3	
WESTHROID TAB 65MG	3	
WESTHROID TAB 97.5MG	3	
WESTHROID TAB 130MG	3	
WESTHROID TAB 195MG	3	
WP THYROID TAB 16.25MG	3	
WP THYROID TAB 32.5MG	3	
WP THYROID TAB 48.75MG	3	
WP THYROID TAB 65MG	3	
WP THYROID TAB 81.25MG	3	
WP THYROID TAB 97.5MG	3	
WP THYROID TAB 113.75MG	3	
WP THYROID TAB 130MG	3	

ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS

ANTISPASMODICS

ANASPAZ TAB 0.125MG	3	
CUVPOSA SOL 1MG/5ML	3	
<i>dicyclomine hcl cap 10 mg</i>	1	NM
<i>dicyclomine hcl tab 20 mg</i>	1	NM
<i>ed-spaz tab 0.125mg</i>	1	
GLYCATATE TAB 1.5MG	3	NM
GLYCOPYRROLA TAB 1.5MG	3	NM
<i>glycopyrrolate tab 1 mg</i>	1	NM
<i>glycopyrrolate tab 2 mg</i>	1	NM
<i>hyoscyamine sulfate elixir 0.125 mg/5ml</i>	1	
<i>hyoscyamine sulfate sl tab 0.125 mg</i>	1	
<i>hyoscyamine sulfate tab 0.125 mg</i>	1	
<i>hyoscyamine sulfate tab disint 0.125 mg</i>	1	
<i>hyoscyamine sulfate tab er 12hr 0.375 mg</i>	1	
LEVBID TAB 0.375 ER	3	
LEVSIN INJ 0.5MG/ML	3	NM
LEVSIN TAB 0.125MG	3	
LEVSIN/SL SUB 0.125MG	3	
<i>methscopolamine bromide tab 2.5 mg</i>	2	NM
<i>methscopolamine bromide tab 5 mg</i>	2	NM
<i>nulev tab 0.125mg</i>	1	
<i>oscimin sr tab 0.375mg</i>	1	
<i>oscimin sub 0.125mg</i>	1	
<i>oscimin tab 0.125mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>pb-hyoscy-atrop-scopol elix 16.2-0.1037-0.0194-0.0065 mg/5ml</i>	2	NM
<i>propantheline bromide tab 15 mg</i>	1	NM
SYMAX DUOTAB TAB	3	
<i>symax-sr tab 0.375mg</i>	1	

H-2 ANTAGONISTS

<i>cimetidine hcl soln 300 mg/5ml</i>	1	
<i>cimetidine tab 200 mg</i>	1	NM
<i>cimetidine tab 300 mg</i>	1	
<i>cimetidine tab 400 mg</i>	1	
<i>cimetidine tab 800 mg</i>	1	
<i>famotidine for susp 40 mg/5ml</i>	1	
<i>famotidine tab 20 mg</i>	1	
<i>famotidine tab 40 mg</i>	1	
<i>nizatidine cap 150 mg</i>	1	
<i>nizatidine cap 300 mg</i>	1	
<i>nizatidine oral soln 15 mg/ml</i>	1	
PEPCID TAB 20MG	3	
PEPCID TAB 40MG	3	
<i>ranitidine hcl syrup 15 mg/ml (75 mg/5ml)</i>	1	
<i>ranitidine hcl tab 150 mg</i>	1	
<i>ranitidine hcl tab 300 mg</i>	1	

MISC. ANTI-ULCER

CARAFATE SUS 1GM/10ML	3	
CARAFATE TAB 1GM	3	
<i>sucralfate susp 1 gm/10ml</i>	2	
<i>sucralfate tab 1 gm</i>	2	

PROTON PUMP INHIBITORS

ACIPHEX SPR CAP 5MG	3	QL (60 caps / 30 days), PA
ACIPHEX SPR CAP 10MG	3	QL (60 caps / 30 days), PA
ACIPHEX TAB 20MG	3	QL (60 tabs / 30 days), PA
DEXILANT CAP 30MG DR	3	QL (60 caps / 30 days), PA
DEXILANT CAP 60MG DR	3	QL (60 caps / 30 days), PA
<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>	2	QL (60 caps / 30 days)
<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>	2	QL (60 caps / 30 days)
<i>esomeprazole magnesium for delayed release susp packet 10 mg</i>	2	QL (60 packets / 30 days)

PA - Prior Authorization **QL** - Quantity Limits **ST** - Step Therapy **NM** - Not available at mail-order **SP** - Specialty **AGE** - Age Limit ****** - Subject to medical or pharmacy diabetic copay per contract/rider **LA** - Limited Access **DL** - Medication Restricted to a 30 day supply

Drug Name	Drug Tier	Requirements/Limits
<i>esomeprazole magnesium for delayed release susp packet 20 mg</i>	2	QL (60 packets / 30 days)
<i>esomeprazole magnesium for delayed release susp packet 40 mg</i>	2	QL (60 packets / 30 days)
FIRST-OMEPRASUS 2MG/ML	3	AGE
<i>lansoprazole cap delayed release 15 mg</i>	1	QL (60 caps / 30 days)
<i>lansoprazole cap delayed release 30 mg</i>	1	QL (60 caps / 30 days)
LANSOPRAZOLE SUS 3MG/ML	3	AGE
<i>lansoprazole tab delayed release orally disintegrating 15 mg</i>	2	QL (60 ea / 30 days)
<i>lansoprazole tab delayed release orally disintegrating 30 mg</i>	2	QL (60 ea / 30 days)
NEXIUM CAP 20MG	3	QL (60 caps / 30 days), PA
NEXIUM CAP 40MG	3	QL (60 caps / 30 days), PA
NEXIUM GRA 2.5MG DR	3	QL (60 packets / 30 days), PA
NEXIUM GRA 5MG DR	3	QL (60 packets / 30 days), PA
NEXIUM GRA 10MG DR	3	QL (60 packets / 30 days), PA
NEXIUM GRA 20MG DR	3	QL (60 packets / 30 days), PA
NEXIUM GRA 40MG DR	3	QL (60 packets / 30 days), PA
OMEPRAZOLE + SUS SYRSPEND	3	AGE
<i>omeprazole cap delayed release 10 mg</i>	1	
<i>omeprazole cap delayed release 20 mg</i>	1	
<i>omeprazole cap delayed release 40 mg</i>	1	
<i>pantoprazole sodium ec tab 20 mg (base equiv)</i>	1	QL (60 tabs / 30 days)
<i>pantoprazole sodium ec tab 40 mg (base equiv)</i>	1	QL (60 tabs / 30 days)
PREVACID CAP 15MG DR	3	QL (60 caps / 30 days), PA
PREVACID CAP 30MG DR	3	QL (60 caps / 30 days), PA
PREVACID TAB 15MG STB	3	QL (60 ea / 30 days)
PREVACID TAB 30MG STB	3	QL (60 ea / 30 days)
PRILOSEC POW 2.5MG	3	QL (60 packets / 30 days), PA
PRILOSEC POW 10MG	3	QL (60 packets / 30 days), PA

PA - Prior Authorization **QL** - Quantity Limits **ST** - Step Therapy **NM** - Not available at mail-order **SP** - Specialty **AGE** - Age Limit ****** - Subject to medical or pharmacy diabetic copay per contract/rider **LA** - Limited Access **DL** - Medication Restricted to a 30 day supply

Drug Name	Drug Tier	Requirements/Limits
PROTONIX PAK	3	QL (60 packets / 30 days), PA
PROTONIX TAB 20MG	3	QL (60 tabs / 30 days), PA
PROTONIX TAB 40MG	3	QL (60 tabs / 30 days), PA
<i>rabeprazole sodium ec tab 20 mg</i>	2	QL (60 tabs / 30 days)

ULCER DRUGS - PROSTAGLANDINS

CYTOTEC TAB 100MCG	3	
CYTOTEC TAB 200MCG	3	
<i>misoprostol tab 100 mcg</i>	1	
<i>misoprostol tab 200 mcg</i>	1	

ULCER THERAPY COMBINATIONS

<i>amoxicillin cap-clarithro tab-lansopraz cap dr therapy pack</i>	2	NM
<i>omeppi cap 40-1100</i>	2	QL (60 caps / 30 days), PA
<i>omeprazole-sodium bicarbonate cap 40-1100 mg</i>	2	QL (60 caps / 30 days), PA
<i>omeprazole-sodium bicarbonate powd pack for susp 20-1680 mg</i>	2	PA
<i>omeprazole-sodium bicarbonate powd pack for susp 40-1680 mg</i>	2	PA
PYLERA CAP	3	NM
TALICIA CAP	3	NM, PA

URINARY ANTI-INFECTIVES

URINARY ANTI-INFECTIVES

HIPREX TAB 1GM	3	NM
MACROBID CAP 100MG	3	NM
MACRODANTIN CAP 25MG	3	NM
MACRODANTIN CAP 50MG	3	NM
MACRODANTIN CAP 100MG	3	NM
<i>methenamine hippurate tab 1 gm</i>	1	NM
MONUROL PAK GRANULES	3	NM
<i>nitrofurantoin macrocrystalline cap 25 mg</i>	1	NM
<i>nitrofurantoin macrocrystalline cap 50 mg</i>	1	NM
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	1	NM
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	1	NM

Drug Name	Drug Tier	Requirements/Limits
URINARY ANTISPASMODICS		
URINARY ANTISPASMODIC - ANTIMUSCARINICS		
(ANTICHOLINERGIC)		
<i>darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)</i>	2	
<i>darifenacin hydrobromide tab er 24hr 15 mg (base equiv)</i>	2	
DETROL LA CAP 2MG	3	
DETROL LA CAP 4MG	3	
DITROPAN XL TAB 5MG	3	
DITROPAN XL TAB 10MG	3	
ENABLEX TAB 7.5MG	3	
ENABLEX TAB 15MG	3	
GELNIQUE GEL 10%	3	
<i>oxybutynin chloride syrup 5 mg/5ml</i>	1	
<i>oxybutynin chloride tab 5 mg</i>	1	
<i>oxybutynin chloride tab er 24hr 5 mg</i>	1	
<i>oxybutynin chloride tab er 24hr 10 mg</i>	1	
<i>oxybutynin chloride tab er 24hr 15 mg</i>	1	
<i>solifenacin succinate tab 5 mg</i>	2	
<i>solifenacin succinate tab 10 mg</i>	2	
<i>tolterodine tartrate cap er 24hr 2 mg</i>	2	
<i>tolterodine tartrate cap er 24hr 4 mg</i>	2	
<i>tolterodine tartrate tab 1 mg</i>	2	
<i>tolterodine tartrate tab 2 mg</i>	2	
TOVIAZ TAB 4MG	3	
TOVIAZ TAB 8MG	3	
<i>trospium chloride cap er 24hr 60 mg</i>	2	
<i>trospium chloride tab 20 mg</i>	2	
VESICARE TAB 5MG	3	
VESICARE TAB 10MG	3	
URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS		
MYRBETRIQ TAB 25MG	2	
MYRBETRIQ TAB 50MG	2	
URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS		
<i>bethanechol chloride tab 5 mg</i>	1	NM
<i>bethanechol chloride tab 10 mg</i>	1	NM
<i>bethanechol chloride tab 25 mg</i>	1	NM
<i>bethanechol chloride tab 50 mg</i>	1	NM
URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS		
<i>flavoxate hcl tab 100 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
VAGINAL AND RELATED PRODUCTS		
MISCELLANEOUS VAGINAL PRODUCTS		
INTRAROSA SUP 6.5MG	3	
SPERMICIDES		
CONCEPTROL GEL 4%	3	NM
ENCARE SUP 100MG	3	NM
GYNOL II GEL 3%	3	NM
SHUR-SEAL GEL 2%	3	NM
TODAY SPONGE MIS	3	NM
VCF VAGINAL AER CONTRACP	3	NM
<i>vcf vaginal gel contrace</i>	1	NM
VCF VAGINAL MIS CONTRACP	3	NM
VAGINAL ANTI-INFECTIVES		
AVC CRE 15%	2	NM
CLEOCIN CRE 2% VAG	3	NM
CLEOCIN SUP 100MG	3	NM
<i>clindamycin phosphate vaginal cream 2%</i>	1	NM
CLINDESSE CRE 2%	2	NM
GYNAZOLE-1 CRE 2%	3	NM
<i>metronidazole vaginal gel 0.75%</i>	1	NM
<i>terconazole vaginal cream 0.4%</i>	1	NM
<i>terconazole vaginal cream 0.8%</i>	1	NM
<i>terconazole vaginal suppos 80 mg</i>	1	NM
<i>vandazole gel 0.75%</i>	1	NM
VAGINAL ESTROGENS		
ESTRACE VAG CRE 0.01%	3	
<i>estradiol vaginal cream 0.1 mg/gm</i>	2	
<i>estradiol vaginal tab 10 mcg</i>	2	
ESTRING MIS 2MG	2	
FEMRING MIS 0.1MG/24	3	
FEMRING MIS 0.05/24H	3	
PREMARIN VAG CRE 0.625MG	3	
VAGIFEM TAB 10MCG	3	
<i>yuvaferm tab 10mcg</i>	2	
VAGINAL PROGESTINS		
CRINONE GEL 8% VAG	3	AGE, NM
ENDOMETRIN SUP 100MG	3	AGE, NM
VASOPRESSORS		
ANAPHYLAXIS THERAPY AGENTS		
ADRENALIN INJ 1MG/ML	2	NM
ADRENALIN INJ 30/30ML	2	NM

Drug Name	Drug Tier	Requirements/Limits
<i>epinephrine inj 30 mg/30ml (1 mg/ml) (1:1000)</i>	2	NM
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	1	QL (2 pens / 23 days), NM
<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i>	1	QL (2 pens / 23 days), NM
<i>epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)</i>	1	QL (1 pen / 23 days), NM
EPIPEN 2-PAK INJ 0.3MG	2	QL (2 pens / 23 days), NM
EPIPEN-JR INJ 0.15MG	2	QL (2 pens / 23 days), NM
SYMJEPI INJ 0.3MG	3	QL (1 box / 30 days), NM, PA

NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS

NORTHERA CAP 100MG	3	SP, NM
NORTHERA CAP 200MG	3	SP, NM
NORTHERA CAP 300MG	3	SP, NM

VASOPRESSORS

EPINEPHRINE INJ 1MG/ML	2	NM
<i>midodrine hcl tab 2.5 mg</i>	1	NM
<i>midodrine hcl tab 5 mg</i>	1	NM
<i>midodrine hcl tab 10 mg</i>	1	NM

VITAMINS

OIL SOLUBLE VITAMINS

<i>ergocalciferol cap 1.25 mg (50000 unit)</i>	1	
MEPHYTON TAB 5MG	3	NM
<i>phytonadione inj 1 mg/0.5ml (2 mg/ml)</i>	1	NM
<i>phytonadione inj 10 mg/ml</i>	1	NM
<i>phytonadione tab 5 mg</i>	1	NM

WATER SOLUBLE VITAMINS

<i>pyridoxine hcl inj 100 mg/ml</i>	1	NM
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<i>acitretin cap 25 mg</i>	110
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ADDERALL XR CAP 20MG	1	<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	33
ADDERALL XR CAP 25MG	1	<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	33
ADDERALL XR CAP 30MG	1	<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	33
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ADEMPAS TAB 1MG	96	<i>albuterol sulfate tab er 12hr 8 mg</i>	33
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ALTACE CAP 10MG	60	AMITIZA CAP 8MCG	125
ALTACE CAP 2.5MG	60	<i>amitriptyline hcl tab 100 mg</i>	47
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<i>amlodipine besylate-olmesartan</i>	
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medoxomil tab 5-40 mg	63
<i>amlodipine besylate tab 10 mg (base</i>	
<i>equivalent)</i>	90
<i>amlodipine besylate tab 2.5 mg (base</i>	
<i>equivalent)</i>	90
<i>amlodipine besylate tab 5 mg (base</i>	
<i>equivalent)</i>	90
<i>amlodipine besylate-valsartan tab 10-</i>	
<i>160 mg</i>	63
<i>amlodipine besylate-valsartan tab 10-</i>	
<i>320 mg</i>	63
<i>amlodipine besylate-valsartan tab 5-</i>	
<i>160 mg</i>	63
<i>amlodipine besylate-valsartan tab 5-</i>	
<i>320 mg</i>	63
<i>amlodipine-valsartan-</i>	
<i>hydrochlorothiazide tab 10-160-12.5</i>	
<i>mg</i>	64
<i>amlodipine-valsartan-</i>	
<i>hydrochlorothiazide tab 10-160-25</i>	
<i>mg</i>	64
<i>amlodipine-valsartan-</i>	
<i>hydrochlorothiazide tab 10-320-25</i>	
<i>mg</i>	64
<i>amlodipine-valsartan-</i>	
<i>hydrochlorothiazide tab 5-160-12.5</i>	
<i>mg</i>	63
<i>amlodipine-valsartan-</i>	
<i>hydrochlorothiazide tab 5-160-25 mg</i>	
<i>.....</i>	64
<i>amnestem cap 10mg</i>	106
<i>amnestem cap 20mg</i>	106
<i>amnestem cap 40mg</i>	106
<i>amoxapine tab 100 mg</i>	47
<i>amoxapine tab 150 mg</i>	47
<i>amoxapine tab 25 mg</i>	47
<i>amoxapine tab 50 mg</i>	47
<i>amoxicillin (trihydrate) cap 250 mg</i>	154
<i>amoxicillin (trihydrate) cap 500 mg</i>	154
<i>amoxicillin (trihydrate) chew tab 125</i>	
<i>mg</i>	154
<i>amoxicillin (trihydrate) chew tab 250</i>	
<i>mg</i>	154
<i>amoxicillin (trihydrate) for susp 125</i>	
<i>mg/5ml</i>	154
<i>amoxicillin (trihydrate) for susp 200</i>	
<i>mg/5ml</i>	154
<i>amoxicillin (trihydrate) for susp 250</i>	
<i>mg/5ml</i>	154
<i>amoxicillin (trihydrate) for susp 400</i>	
<i>mg/5ml</i>	154
<i>amoxicillin (trihydrate) tab 500 mg.</i>	154
<i>amoxicillin (trihydrate) tab 875 mg.</i>	154
<i>amoxicillin & k clavulanate chew tab</i>	
<i>200-28.5 mg</i>	154
<i>amoxicillin & k clavulanate chew tab</i>	
<i>400-57 mg</i>	154

<i>amoxicillin & k clavulanate for susp</i>	
200-28.5 mg/5ml	154
<i>amoxicillin & k clavulanate for susp</i>	
250-62.5 mg/5ml	155
<i>amoxicillin & k clavulanate for susp</i>	
400-57 mg/5ml	155
<i>amoxicillin & k clavulanate for susp</i>	
600-42.9 mg/5ml	155
<i>amoxicillin & k clavulanate tab</i>	
250-125 mg	155
<i>amoxicillin & k clavulanate tab</i>	
500-125 mg	155
<i>amoxicillin & k clavulanate tab</i>	
875-125 mg	155
<i>amoxicillin & k clavulanate tab er 12hr</i>	
1000-62.5 mg	155
<i>amoxicillin cap-clarithro tab-lansopraz</i>	
cap dr therapy pack	177
<i>amphetamine-dextroamphetamine cap</i>	
er 24hr 10 mg	1
<i>amphetamine-dextroamphetamine cap</i>	
er 24hr 15 mg	1
<i>amphetamine-dextroamphetamine cap</i>	
er 24hr 20 mg	1
<i>amphetamine-dextroamphetamine cap</i>	
er 24hr 25 mg	1
<i>amphetamine-dextroamphetamine cap</i>	
er 24hr 30 mg	1
<i>amphetamine-dextroamphetamine cap</i>	
er 24hr 5 mg	1
<i>amphetamine-dextroamphetamine tab</i>	
10 mg	1
<i>amphetamine-dextroamphetamine tab</i>	
12.5 mg	1
<i>amphetamine-dextroamphetamine tab</i>	
15 mg	1
<i>amphetamine-dextroamphetamine tab</i>	
20 mg	1
<i>amphetamine-dextroamphetamine tab</i>	
30 mg	1
<i>amphetamine-dextroamphetamine tab</i>	
5 mg	1
<i>amphetamine-dextroamphetamine tab</i>	
7.5 mg	1
<i>amphetamine sulfate tab</i>	
5 mg	1
<i>ampicillin cap</i>	
500 mg	154
<i>AMPYRA TAB</i>	
10MG	158

<i>ANADROL-50 TAB</i>	
50MG	24
<i>ANAFRANIL CAP</i>	
25MG	47
<i>ANAFRANIL CAP</i>	
50MG	47
<i>ANAFRANIL CAP</i>	
75MG	47
<i>anagrelide hcl cap</i>	
0.5 mg	129
<i>anagrelide hcl cap</i>	
1 mg	129
<i>ANASPAZ TAB</i>	
0.125MG	174
<i>anastrozole tab</i>	
1 mg	70
<i>ANCOBON CAP</i>	
250MG	55
<i>ANCOBON CAP</i>	
500MG	55
<i>ANDRODERM DIS</i>	
2MG/24HR	25
<i>ANDRODERM DIS</i>	
4MG/24HR	25
<i>ANDROGEL GEL</i>	
1.62%	25
<i>ANDROGEL GEL</i>	
1%(25MG)	25
<i>ANDROGEL GEL</i>	
1%(50MG)	25
<i>ANGELIQ TAB</i>	
0.25-0.5	122
<i>ANGELIQ TAB</i>	
0.5-1MG	122
<i>ANORO ELLIPT AER</i>	
62.5-25	33
<i>ANTABUSE TAB</i>	
250MG	155
<i>ANTABUSE TAB</i>	
500MG	155
<i>ANTARA CAP</i>	
30MG	57
<i>ANTARA CAP</i>	
90MG	57
<i>ANZEMET TAB</i>	
50MG	53
<i>apraclonidine hcl ophth soln</i>	
0.5% (base equivalent)	150
<i>aprepitant capsule</i>	
125 mg	54
<i>aprepitant capsule</i>	
40 mg	54
<i>aprepitant capsule</i>	
80 mg	54
<i>aprepitant capsule therapy pack</i>	
80 & 125 mg	54
<i>APRISO CAP</i>	
0.375GM	125
<i>apri tab</i>	98
<i>APTENSIO XR CAP</i>	
10MG	4
<i>APTENSIO XR CAP</i>	
15MG	4
<i>APTENSIO XR CAP</i>	
20MG	4
<i>APTENSIO XR CAP</i>	
30MG	4
<i>APTENSIO XR CAP</i>	
40MG	4
<i>APTENSIO XR CAP</i>	
50MG	4
<i>APTENSIO XR CAP</i>	
60MG	4
<i>APTOM TAB</i>	
200MG	37
<i>APTOM TAB</i>	
400MG	37
<i>APTOM TAB</i>	
600MG	38
<i>APTOM TAB</i>	
800MG	38
<i>APTIVUS CAP</i>	
250MG	83
<i>APTIVUS SOL</i>	83
<i>aranelle tab</i>	98
<i>ARANESP INJ</i>	
100MCG	130

ARANESP INJ 10MCG	130	AROMASIN TAB 25MG.....	70
ARANESP INJ 150MCG	130	ARYMO ER TAB 15MG	14
ARANESP INJ 200MCG	130	ARYMO ER TAB 30MG	14
ARANESP INJ 25MCG	130	ARYMO ER TAB 60MG	14
ARANESP INJ 300MCG	130	ASACOL HD TAB 800MG.....	125
ARANESP INJ 40MCG	130	<i>ashlyna tab</i>	98
ARANESP INJ 500MCG	130	<i>aspirin-81 chw 81mg</i>	13
ARANESP INJ 60MCG	130	<i>aspirin adlt tab 81mg ec</i>	13
ARAVA TAB 10MG	12	<i>aspirin chld chw 81mg</i>	13
ARAVA TAB 20MG	12	<i>aspirin chw 81mg</i>	13
ARCAPTA CAP 75MCG	33	<i>aspirin-dipyridamole cap er 12hr 25-</i>	
<i>argyl saline sol 0.9%</i>	127	<i>200 mg</i>	129
<i>argyl saline sol 100ml</i>	141	<i>aspirin low chw 81mg</i>	13
ARICEPT TAB 10MG	156	<i>aspirin low tab 81mg ec</i>	13
ARICEPT TAB 23MG	156	<i>aspirin tab delayed release 81 mg</i>	13
ARICEPT TAB 5MG	156	<i>aspir-low tab 81mg ec</i>	13
ARIMIDEX TAB 1MG	70	ASTAGRAF XL CAP 0.5MG.....	140
<i>aripiprazole orally disintegrating tab 10</i>		ASTAGRAF XL CAP 1MG.....	140
<i>mg</i>	83	ASTAGRAF XL CAP 5MG.....	140
<i>aripiprazole orally disintegrating tab 15</i>		ASTEPRO SPR 0.15%	148
<i>mg</i>	83	ATABEX EC TAB 29-1MG	144
<i>aripiprazole oral solution 1 mg/ml</i>	83	ATABEX OB TAB 29-1MG	144
<i>aripiprazole tab 10 mg</i>	83	ATACAND TAB 16MG	61
<i>aripiprazole tab 15 mg</i>	83	ATACAND TAB 32MG	61
<i>aripiprazole tab 20 mg</i>	83	ATACAND TAB 4MG	61
<i>aripiprazole tab 2 mg</i>	83	ATACAND TAB 8MG	61
<i>aripiprazole tab 30 mg</i>	83	<i>atazanavir sulfate cap 150 mg (base</i>	
<i>aripiprazole tab 5 mg</i>	83	<i>equiv)</i>	83
ARIXTRA INJ 10/0.8ML	36	<i>atazanavir sulfate cap 200 mg (base</i>	
ARIXTRA INJ 2.5/0.5	35	<i>equiv)</i>	83
ARIXTRA INJ 5/0.4ML	36	<i>atazanavir sulfate cap 300 mg (base</i>	
ARIXTRA INJ 7.5/0.6	36	<i>equiv)</i>	83
<i>armodafinil tab 150 mg</i>	4	ATELVIA TAB	118
<i>armodafinil tab 200 mg</i>	4	<i>atenolol & chlorthalidone tab 100-25</i>	
<i>armodafinil tab 250 mg</i>	4	<i>mg</i>	64
<i>armodafinil tab 50 mg</i>	4	<i>atenolol & chlorthalidone tab 50-25 mg</i>	
ARMOUR THYRO TAB 120MG.....	171		64
ARMOUR THYRO TAB 15MG	170	<i>atenolol tab 100 mg</i>	88
ARMOUR THYRO TAB 180MG.....	171	<i>atenolol tab 25 mg</i>	88
ARMOUR THYRO TAB 240MG.....	171	<i>atenolol tab 50 mg</i>	88
ARMOUR THYRO TAB 300MG.....	171	<i>atomoxetine hcl cap 100 mg (base</i>	
ARMOUR THYRO TAB 30MG	170	<i>equiv)</i>	3
ARMOUR THYRO TAB 60MG	170	<i>atomoxetine hcl cap 10 mg (base</i>	
ARMOUR THYRO TAB 90MG	170	<i>equiv)</i>	3
ARNUITY ELPT INH 100MCG	32	<i>atomoxetine hcl cap 18 mg (base</i>	
ARNUITY ELPT INH 200MCG	32	<i>equiv)</i>	3
ARNUITY ELPT INH 50MCG	32		

<i>atomoxetine hcl cap 25 mg (base equiv)</i>	3	<i>avidoxy tab 100mg</i>	169
<i>atomoxetine hcl cap 40 mg (base equiv)</i>	3	AVODART CAP 0.5MG.....	127
<i>atomoxetine hcl cap 60 mg (base equiv)</i>	3	AVONEX PEN KIT 30MCG.....	158
<i>atomoxetine hcl cap 80 mg (base equiv)</i>	3	AVONEX PREFL KIT 30MCG.....	158
<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	58	AZASAN TAB 100MG.....	140
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	58	AZASAN TAB 75 MG.....	140
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	58	AZASITE SOL 1%	150
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	58	<i>azathioprine tab 50 mg</i>	140
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	68	<i>azelaic acid gel 15%</i>	115
<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	68	<i>azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act</i>	148
<i>atovaquone susp 750 mg/5ml</i>	27	<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	148
ATRIPLA TAB	84	<i>azelastine hcl nasal spray 0.15% (205.5 mcg/spray)</i>	148
ATROPINE SUL OIN 1% OP	149	<i>azelastine hcl ophth soln 0.05%</i>	152
ATROPINE SUL SOL 1% OP.....	149	AZESCO TAB 13-1MG.....	144
ATROVENT HFA AER 17MCG	31	AZILECT TAB 0.5MG	78
AUBAGIO TAB 14MG	158	AZILECT TAB 1MG.....	78
AUBAGIO TAB 7MG.....	158	<i>azithromycin for susp 100 mg/5ml</i> ..	134
<i>aubra eq tab 0.1-0.02</i>	98	<i>azithromycin for susp 200 mg/5ml</i> ..	134
<i>aubra tab 0.1-0.02</i>	98	<i>azithromycin powd pack for susp 1 gm</i>	134
AUGMENTIN SUS 125/5ML.....	155	<i>azithromycin tab 250 mg</i>	134
AUGMENTIN SUS 250/5ML.....	155	<i>azithromycin tab 500 mg</i>	134
AUGMENTIN SUS ES-600.....	155	<i>azithromycin tab 600 mg</i>	134
AUGMENTIN TAB 500MG	155	AZOPT SUS 1% OP	152
<i>aurovela 24 tab fe 1/20</i>	98	<i>aztreonam for inj 1 gm</i>	28
<i>aurovela fe tab 1/20</i>	98	<i>aztreonam for inj 2 gm</i>	28
<i>aurovela tab 1.5/30</i>	98	AZULFIDINE TAB 500MG	125
AURYXIA TAB 210MG.....	126	AZULFIDINE TAB 500MG EN	125
AUSTEDO TAB 12MG.....	158	<i>azurette tab 28 day</i>	98
AUSTEDO TAB 6MG	157	B	
AUSTEDO TAB 9MG	157	<i>bacitracin ophth oint 500 unit/gm</i> ...	150
AVALIDE TAB 150-12.5.....	64	<i>bacitracin-polymyxin b ophth oint</i> ...	150
AVALIDE TAB 300-12.5.....	64	<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	151
AVAPRO TAB 150MG.....	61	<i>baclofen tab 10 mg</i>	147
AVAPRO TAB 300MG.....	61	<i>baclofen tab 20 mg</i>	147
AVAPRO TAB 75MG	61	<i>baclofen tab 5 mg</i>	147
AVC CRE 15%.....	179	BACTRIM DS TAB 800-160	27
<i>aviane tab</i>	98	BAL-CARE MIS DHA	144
		<i>balsalazide disodium cap 750 mg</i> ...	125
		BALVERSA TAB 3MG	72
		BALVERSA TAB 4MG	72
		BALVERSA TAB 5MG	72
		<i>balziva tab</i>	98

BANZEL SUS 40MG/ML	38	BENZNIDAZOLE TAB 12.5MG	26
BANZEL TAB 200MG	38	<i>benzonatate cap 100 mg</i>	105
BANZEL TAB 400MG	38	<i>benzonatate cap 200 mg</i>	106
BAQSIMI ONE POW 3MG/DOSE	50	<i>benzoyl peroxide-erythromycin gel 5-3%</i>	106
BARACLUDE SOL.....	86	<i>benzphetamine hcl tab 25 mg</i>	3
BARACLUDE TAB 0.5MG	86	<i>benzphetamine hcl tab 50 mg</i>	3
BARACLUDE TAB 1MG.....	87	<i>benztropine mesylate tab 0.5 mg</i>	76
BASAGLAR INJ 100UNIT.....	51	<i>benztropine mesylate tab 1 mg</i>	76
BAXDELA TAB 450MG	124	<i>benztropine mesylate tab 2 mg</i>	76
<i>bayer low chw 81mg</i>	13	BEPREVE DRO 1.5%	152
<i>bayer low tab 81mg ec</i>	13	BESIVANCE SUS 0.6%	150
<i>bekyree tab</i>	98	BETADINE SOL 5% OP	150
BELBUCA MIS 150MCG	23	<i>betamethasone dipropionate augmented cream 0.05%</i>	111
BELBUCA MIS 300MCG	23	<i>betamethasone dipropionate augmented gel 0.05%</i>	112
BELBUCA MIS 450MCG	23	<i>betamethasone dipropionate augmented lotion 0.05%</i>	112
BELBUCA MIS 600MCG	23	<i>betamethasone dipropionate augmented oint 0.05%</i>	112
BELBUCA MIS 750MCG	23	<i>betamethasone dipropionate cream 0.05%</i>	112
BELBUCA MIS 75MCG	23	<i>betamethasone dipropionate lotion 0.05%</i>	112
BELBUCA MIS 900MCG	23	<i>betamethasone dipropionate oint 0.05%</i>	112
BELSOMRA TAB 10MG.....	134	<i>betamethasone valerate aerosol foam 0.12%</i>	112
BELSOMRA TAB 15MG.....	134	<i>betamethasone valerate cream 0.1% (base equivalent)</i>	112
BELSOMRA TAB 20MG.....	134	<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	112
BELSOMRA TAB 5MG	134	<i>betamethasone valerate oint 0.1% (base equivalent)</i>	112
BELVIQ TAB 10MG	3	BETAPACE AF TAB 120MG	89
BELVIQ XR TAB 20MG	3	BETAPACE AF TAB 160MG	89
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	64	BETAPACE AF TAB 80MG	89
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	64	BETAPACE TAB 120MG.....	89
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	64	BETAPACE TAB 160MG.....	89
<i>benazepril & hydrochlorothiazide tab 5-6.25 mg</i>	64	BETAPACE TAB 80MG	89
<i>benazepril hcl tab 10 mg</i>	60	BETASERON INJ 0.3MG	158
<i>benazepril hcl tab 20 mg</i>	60	<i>betaxolol hcl ophth soln 0.5%</i>	148
<i>benazepril hcl tab 40 mg</i>	60	<i>betaxolol hcl tab 10 mg</i>	88
<i>benazepril hcl tab 5 mg</i>	60	<i>betaxolol hcl tab 20 mg</i>	88
BENICAR HCT TAB 20-12.5.....	64	<i>bethanechol chloride tab 10 mg</i>	178
BENICAR HCT TAB 40-12.5.....	64	<i>bethanechol chloride tab 25 mg</i>	178
BENICAR HCT TAB 40-25MG	64		
BENICAR TAB 20MG	61		
BENICAR TAB 40MG	61		
BENICAR TAB 5MG	61		
BENLYSTA INJ 200MG/ML.....	142		
<i>benzeapro aer 5.3%</i>	106		
<i>benziq wash liq 5.25%</i>	106		
BENZNIDAZOLE TAB 100MG	26		

<i>bethanechol chloride tab 50 mg</i>	178	BRIVIACT SOL 10MG/ML	38
<i>bethanechol chloride tab 5 mg</i>	178	BRIVIACT TAB 100MG.....	38
BETHKIS NEB 300/4ML.....	7	BRIVIACT TAB 10MG	38
BETIMOL SOL 0.25%	149	BRIVIACT TAB 25MG	38
BETIMOL SOL 0.5%	148	BRIVIACT TAB 50MG	38
BETOPTIC-S SUS 0.25% OP.....	149	BRIVIACT TAB 75MG	38
BEVESPI AER 9-4.8MCG	33	<i>bromfed dm syp</i>	106
BEVYXXA CAP 40MG	35	<i>bromfenac sodium ophth soln 0.09%</i> (base equiv) (once-daily).....	152
BEVYXXA CAP 80MG	35	<i>bromocriptine mesylate tab 2.5 mg</i> (base equivalent)	76
<i>bexarotene cap 75 mg</i>	75	BROMSITE DRO 0.075%.....	152
BEYAZ TAB.....	98	BROVANA NEB 15MCG	33
<i>bicalutamide tab 50 mg</i>	70	BRUKINSA CAP 80MG	72
BIDIL TAB.....	94	<i>budesonide delayed release particles</i> cap 3 mg.....	104
BIJUVA CAP 1-100MG	122	<i>budesonide inhalation susp 0.25</i> mg/2ml.....	32
BIKTARVY TAB.....	84	<i>budesonide inhalation susp 0.5 mg/2ml</i>	32
BILTRICIDE TAB 600MG.....	26	<i>budesonide inhalation susp 1 mg/2ml</i>	32
<i>bimatoprost ophth soln 0.03%</i>	153	<i>budesonide tab er 24hr 9 mg</i>	104
<i>bisoprolol & hydrochlorothiazide tab</i> 10-6.25 mg	64	<i>bumetanide tab 0.5 mg</i>	117
<i>bisoprolol & hydrochlorothiazide tab</i> 2.5-6.25 mg	64	<i>bumetanide tab 1 mg</i>	117
<i>bisoprolol & hydrochlorothiazide tab 5-</i> 6.25 mg	64	<i>bumetanide tab 2 mg</i>	117
<i>bisoprolol fumarate tab 10 mg</i>	88	BUNAVAIL MIS 2.1-0.3	23
<i>bisoprolol fumarate tab 5 mg</i>	88	BUNAVAIL MIS 4.2-0.7	23
BLEPHAMIDE OIN S.O.P.	151	BUNAVAIL MIS 6.3-1MG.....	23
BLEPHAMIDE SUS OP.....	151	BUPRENEX INJ 0.3MG/ML.....	23
<i>blisovi fe tab 1.5/30</i>	98	<i>buprenorphine hcl inj 0.3 mg/ml (base</i> equiv).....	23
BONIVA TAB 150MG	118	<i>buprenorphine hcl-naloxone hcl sl film</i> 12-3 mg (base equiv)	23
BONJESTA TAB 20-20MG	54	<i>buprenorphine hcl-naloxone hcl sl film</i> 2-0.5 mg (base equiv)	23
BOSULIF TAB 100MG.....	72	<i>buprenorphine hcl-naloxone hcl sl film</i> 4-1 mg (base equiv)	23
BOSULIF TAB 400MG.....	72	<i>buprenorphine hcl-naloxone hcl sl film</i> 8-2 mg (base equiv)	23
BOSULIF TAB 500MG.....	72	<i>buprenorphine hcl-naloxone hcl sl tab</i> 2-0.5 mg (base equiv)	24
<i>bp 10-1 emu</i>	106	<i>buprenorphine hcl-naloxone hcl sl tab</i> 8-2 mg (base equiv)	24
<i>bp cleansing emu 10-4%</i>	106	<i>buprenorphine hcl sl tab 2 mg (base</i> equiv).....	23
<i>bp foam aer 5.3%</i>	106		
BRAFTOVI CAP 75MG.....	72		
BREO ELLIPTA INH 100-25	33		
BREO ELLIPTA INH 200-25	33		
<i>briellyn tab</i>	99		
BRILINTA TAB 60MG	129		
BRILINTA TAB 90MG.....	129		
<i>brimonidine tartrate ophth soln 0.15%</i>	150		
<i>brimonidine tartrate ophth soln 0.2%</i>	150		
BRISDELLE CAP 7.5MG.....	168		

<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	23
<i>buprenorphine td patch weekly 10 mcg/hr</i>	24
<i>buprenorphine td patch weekly 15 mcg/hr</i>	24
<i>buprenorphine td patch weekly 20 mcg/hr</i>	24
<i>buprenorphine td patch weekly 5 mcg/hr</i>	24
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	24
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	159
<i>bupropion hcl tab 100 mg</i>	43
<i>bupropion hcl tab 75 mg</i>	43
<i>bupropion hcl tab er 12hr 100 mg</i> ...	43
<i>bupropion hcl tab er 12hr 150 mg</i> ...	43
<i>bupropion hcl tab er 12hr 200 mg</i> ...	43
<i>bupropion hcl tab er 24hr 150 mg</i> ...	43
<i>bupropion hcl tab er 24hr 300 mg</i> ...	43
<i>buspirone hcl tab 10 mg</i>	29
<i>buspirone hcl tab 15 mg</i>	29
<i>buspirone hcl tab 5 mg</i>	29
<i>buspirone hcl tab 7.5 mg</i>	29
<i>butalbital-acetaminophen-caffeine cap 50-300-40 mg</i>	13
<i>butalbital-acetaminophen-caffeine tab 50-325-40 mg</i>	13
<i>butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg</i>	22
<i>butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg</i>	22
<i>butalbital-acetaminophen tab 50-300 mg</i>	13
<i>butalbital-acetaminophen tab 50-325 mg</i>	13
<i>butalbital-aspirin-caffeine cap 50-325-40 mg</i>	13
BUTISOL SOD TAB 30MG	132
<i>butorphanol tartrate nasal soln 10 mg/ml</i>	24
BUTRANS DIS 10MCG/HR	24
BUTRANS DIS 15MCG/HR	24
BUTRANS DIS 20MCG/HR	24
BUTRANS DIS 5MCG/HR	24
BUTRANS DIS 7.5/HR	24

BYDUREON BC INJ 2/0.85ML	50
BYDUREON PEN INJ 2MG	50
BYETTA INJ 10MCG	50
BYETTA INJ 5MCG	50
BYSTOLIC TAB 10MG	88
BYSTOLIC TAB 2.5MG	88
BYSTOLIC TAB 20MG	88
BYSTOLIC TAB 5MG	88
C	
<i>cabergoline tab 0.5 mg</i>	121
CABOMETYX TAB 20MG	72
CABOMETYX TAB 40MG	72
CABOMETYX TAB 60MG	72
CADUET TAB 10-10MG	94
CADUET TAB 10-20MG	94
CADUET TAB 10-40MG	94
CADUET TAB 10-80MG	94
CADUET TAB 5-10MG	94
CADUET TAB 5-20MG	94
CADUET TAB 5-40MG	94
CADUET TAB 5-80MG	94
<i>caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)</i>	2
<i>calcipotriene cream 0.005%</i>	110
<i>calcipotriene oint 0.005%</i>	110
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	110
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	118
<i>calcitrene oin 0.005%</i>	110
<i>calcitriol cap 0.25 mcg</i>	120
<i>calcitriol cap 0.5 mcg</i>	120
<i>calcitriol oint 3 mcg/gm</i>	110
<i>calcitriol oral soln 1 mcg/ml</i>	120
<i>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</i>	126
<i>calcium acetate (phosphate binder) tab 667 mg</i>	126
CAMBIA POW 50MG	136
<i>camila tab 0.35mg</i>	103
<i>camrese lo tab</i>	99
<i>camrese tab</i>	99
CANASA SUP 1000MG	125
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i>	64

<i>candesartan cilexetil- hydrochlorothiazide tab 32-12.5 mg</i>	64
<i>candesartan cilexetil- hydrochlorothiazide tab 32-25 mg</i>	.64
<i>candesartan cilexetil tab 16 mg</i>	61
<i>candesartan cilexetil tab 32 mg</i>	61
<i>candesartan cilexetil tab 4 mg</i>	61
<i>candesartan cilexetil tab 8 mg</i>	61
<i>capecitabine tab 150 mg</i>	69
<i>capecitabine tab 500 mg</i>	69
<i>CAPRELSA TAB 100MG</i>	72
<i>CAPRELSA TAB 300MG</i>	72
<i>captopril tab 100 mg</i>	60
<i>captopril tab 12.5 mg</i>	60
<i>captopril tab 25 mg</i>	60
<i>captopril tab 50 mg</i>	60
<i>CARAFATE SUS 1GM/10ML</i>	175
<i>CARAFATE TAB 1GM</i>	175
<i>carbamazepine cap er 12hr 100 mg</i>	..38
<i>carbamazepine cap er 12hr 200 mg</i>	..38
<i>carbamazepine cap er 12hr 300 mg</i>	..38
<i>carbamazepine chew tab 100 mg</i>	38
<i>carbamazepine susp 100 mg/5ml</i>	38
<i>carbamazepine tab 200 mg</i>	38
<i>carbamazepine tab er 12hr 100 mg</i>	..38
<i>carbamazepine tab er 12hr 200 mg</i>	..38
<i>carbamazepine tab er 12hr 400 mg</i>	..38
<i>CARBATROL CAP 100MG</i>	38
<i>CARBATROL CAP 200MG</i>	38
<i>CARBATROL CAP 300MG</i>	38
<i>carbidopa & levodopa orally disintegrating tab 10-100 mg</i>	76
<i>carbidopa & levodopa orally disintegrating tab 25-100 mg</i>	76
<i>carbidopa & levodopa orally disintegrating tab 25-250 mg</i>	76
<i>carbidopa & levodopa tab 10-100 mg</i>	76
<i>carbidopa & levodopa tab 25-100 mg</i>	76
<i>carbidopa & levodopa tab 25-250 mg</i>	76
<i>carbidopa & levodopa tab er 25-100 mg</i>	76
<i>carbidopa & levodopa tab er 50-200 mg</i>	76
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	76
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	76
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	77
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	77
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	77
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	77
<i>carbidopa tab 25 mg</i>	76
<i>carbinoxamine maleate soln 4 mg/5ml</i>	56
<i>carbinoxamine maleate tab 4 mg</i>	56
<i>CARDIZEM CD CAP 120MG/24</i>	90
<i>CARDIZEM CD CAP 180MG/24</i>	90
<i>CARDIZEM CD CAP 240MG/24</i>	90
<i>CARDIZEM CD CAP 300MG/24</i>	90
<i>CARDIZEM LA TAB 120MG</i>	90
<i>CARDIZEM LA TAB 180MG</i>	90
<i>CARDIZEM LA TAB 240MG</i>	90
<i>CARDIZEM LA TAB 300MG/24</i>	90
<i>CARDIZEM LA TAB 360MG</i>	90
<i>CARDIZEM LA TAB 420MG/24</i>	90
<i>CARDURA TAB 1MG</i>	62
<i>CARDURA TAB 2MG</i>	62
<i>CARDURA TAB 4MG</i>	62
<i>CARDURA TAB 8MG</i>	62
<i>CARDURA XL TAB 4MG</i>	127
<i>CARDURA XL TAB 8MG</i>	127
<i>carisoprodol tab 250 mg</i>	147
<i>carisoprodol tab 350 mg</i>	147
<i>carisoprodol w/ aspirin & codeine tab 200-325-16 mg</i>	148
<i>CARNITOR SF SOL 1GM/10ML</i>	120
<i>CARNITOR SOL 1GM/10ML</i>	120
<i>CARNITOR TAB 330MG</i>	120
<i>carteolol hcl ophth soln 1%</i>	149
<i>cartia xt cap 120/24hr</i>	90
<i>cartia xt cap 180/24hr</i>	90
<i>cartia xt cap 240/24hr</i>	90
<i>cartia xt cap 300/24hr</i>	90
<i>carvedilol phosphate cap er 24hr 10 mg</i>	88
<i>carvedilol phosphate cap er 24hr 20 mg</i>	88

<i>carvedilol phosphate cap er 24hr 40 mg</i>	88
<i>carvedilol phosphate cap er 24hr 80 mg</i>	88
<i>carvedilol tab 12.5 mg</i>	88
<i>carvedilol tab 25 mg</i>	88
<i>carvedilol tab 3.125 mg</i>	88
<i>carvedilol tab 6.25 mg</i>	88
<i>CASODEX TAB 50MG</i>	70
<i>cavarest gel 1.1%</i>	142
<i>CAVERJECT IM KIT 10MCG</i>	94
<i>CAVERJECT INJ 40MCG</i>	94
<i>CAVERJECT KIT 20MCG</i>	94
<i>CAYSTON INH 75MG</i>	28
<i>caziant pak</i>	99
<i>cefaclor cap 250 mg</i>	97
<i>cefaclor cap 500 mg</i>	97
<i>CEFACLOR ER TAB 500MG</i>	97
<i>cefaclor for susp 125 mg/5ml</i>	97
<i>cefaclor for susp 250 mg/5ml</i>	97
<i>cefaclor for susp 375 mg/5ml</i>	97
<i>cefadroxil cap 500 mg</i>	96
<i>cefadroxil for susp 250 mg/5ml</i>	96
<i>cefadroxil for susp 500 mg/5ml</i>	96
<i>cefadroxil tab 1 gm</i>	97
<i>cefazolin sodium for inj 10 gm</i>	97
<i>cefazolin sodium for inj 1 gm</i>	97
<i>cefazolin sodium for inj 500 mg</i>	97
<i>cefdinir cap 300 mg</i>	97
<i>cefdinir for susp 125 mg/5ml</i>	97
<i>cefdinir for susp 250 mg/5ml</i>	97
<i>cefepime hcl for inj 1 gm</i>	98
<i>cefepime hcl for inj 2 gm</i>	98
<i>cefixime for susp 100 mg/5ml</i>	97
<i>cefixime for susp 200 mg/5ml</i>	97
<i>cefpodoxime proxetil for susp 100 mg/5ml</i>	97
<i>cefpodoxime proxetil for susp 50 mg/5ml</i>	97
<i>cefpodoxime proxetil tab 100 mg</i>	97
<i>cefpodoxime proxetil tab 200 mg</i>	97
<i>cefprozil for susp 125 mg/5ml</i>	97
<i>cefprozil for susp 250 mg/5ml</i>	97
<i>cefprozil tab 250 mg</i>	97
<i>cefprozil tab 500 mg</i>	97
<i>ceftazidime for inj 1 gm</i>	97
<i>ceftazidime for inj 2 gm</i>	97
<i>ceftazidime for inj 6 gm</i>	97
<i>ceftriaxone sodium for inj 10 gm</i>	97
<i>ceftriaxone sodium for inj 1 gm</i>	97
<i>ceftriaxone sodium for inj 250 mg</i>	97
<i>ceftriaxone sodium for inj 2 gm</i>	97
<i>ceftriaxone sodium for inj 500 mg</i>	98
<i>ceftriaxone sodium for iv soln 1 gm</i>	98
<i>ceftriaxone sodium for iv soln 2 gm</i>	98
<i>ceftriaxone sodium in dextrose inj 20 mg/ml</i>	98
<i>ceftriaxone sodium in dextrose inj 40 mg/ml</i>	98
<i>cefuroxime axetil tab 250 mg</i>	97
<i>cefuroxime axetil tab 500 mg</i>	97
<i>CELEBREX CAP 100MG</i>	10
<i>CELEBREX CAP 200MG</i>	10
<i>CELEBREX CAP 400MG</i>	10
<i>CELEBREX CAP 50MG</i>	10
<i>celecoxib cap 100 mg</i>	10
<i>celecoxib cap 200 mg</i>	10
<i>celecoxib cap 400 mg</i>	10
<i>celecoxib cap 50 mg</i>	10
<i>CELEXA TAB 10MG</i>	44
<i>CELEXA TAB 20MG</i>	44
<i>CELEXA TAB 40MG</i>	44
<i>CELLCEPT CAP 250MG</i>	140
<i>CELLCEPT SUS 200MG/ML</i>	140
<i>CELLCEPT TAB 500MG</i>	140
<i>CELONTIN CAP 300MG</i>	43
<i>CEM-UREA SOL 45%</i>	114
<i>CENTANY OIN 2%</i>	108
<i>cephalexin cap 250 mg</i>	97
<i>cephalexin cap 500 mg</i>	97
<i>cephalexin cap 750 mg</i>	97
<i>cephalexin for susp 125 mg/5ml</i>	97
<i>cephalexin for susp 250 mg/5ml</i>	97
<i>CERDELGA CAP 84MG</i>	129
<i>cerovel lot 40%</i>	114
<i>CETRAXAL SOL 0.2%</i>	153
<i>CETROTIDE KIT 0.25MG</i>	119
<i>cevimeline hcl cap 30 mg</i>	143
<i>CHANTIX PAK 0.5& 1MG</i>	159
<i>CHANTIX PAK 1MG</i>	159
<i>CHANTIX TAB 0.5MG</i>	159
<i>CHANTIX TAB 1MG</i>	159
<i>chateal eq tab 0.15/30</i>	99
<i>chateal tab 0.15/30</i>	99

CHEMET CAP 100MG.....	52	CIMZIA KIT	125
CHENODAL TAB 250MG	125	CIMZIA KIT STARTER.....	125
<i>child asa chw 81mg</i>	13	CIMZIA PREFL KIT 200MG/ML	125
<i>child asa ls chw 81mg</i>	13	<i>cinacalcet hcl tab 30 mg (base equiv)</i>	
<i>chlordiazepoxide hcl cap 10 mg</i>	30		120
<i>chlordiazepoxide hcl cap 25 mg</i>	30	<i>cinacalcet hcl tab 60 mg (base equiv)</i>	
<i>chlordiazepoxide hcl cap 5 mg</i>	30		120
<i>chlorhexidine gluconate soln 0.12%</i>	142	<i>cinacalcet hcl tab 90 mg (base equiv)</i>	
<i>chloroquine phosphate tab 250 mg</i> ...	68		120
<i>chloroquine phosphate tab 500 mg</i> ...	68	CIPRO (10%) SUS 500MG/5	124
<i>chlorothiazide tab 250 mg</i>	118	CIPRO (5%) SUS 250MG/5	124
<i>chlorothiazide tab 500 mg</i>	118	CIPRODEX SUS 0.3-0.1%	153
<i>chlorpromazine hcl tab 10 mg</i>	82	<i>ciprofloxacin-fluocinolone acetone (pf)</i>	
<i>chlorthalidone tab 25 mg</i>	118	<i>otic soln 0.3-0.025%</i>	153
<i>chlorthalidone tab 50 mg</i>	118	<i>ciprofloxacin hcl ophth soln 0.3% (base</i>	
<i>chlorzoxazone tab 500 mg</i>	147	<i>equivalent)</i>	150
<i>cholestyramine light powder 4 gm/dose</i>		<i>ciprofloxacin hcl otic soln 0.2% (base</i>	
.....	57	<i>equivalent)</i>	153
<i>cholestyramine light powder packets 4</i>		<i>ciprofloxacin hcl tab 100 mg (base</i>	
<i>gm</i>	57	<i>equiv)</i>	124
<i>cholestyramine powder 4 gm/dose</i> ...	57	<i>ciprofloxacin hcl tab 250 mg (base</i>	
<i>cholestyramine powder packets 4 gm</i>	57	<i>equiv)</i>	124
<i>choline & magnesium salicylates liq</i>		<i>ciprofloxacin hcl tab 500 mg (base</i>	
<i>500 mg/5ml</i>	13	<i>equiv)</i>	124
<i>choline fenofibrate cap dr 135 mg</i>		<i>ciprofloxacin hcl tab 750 mg (base</i>	
<i>(fenofibric acid equiv)</i>	57	<i>equiv)</i>	124
<i>choline fenofibrate cap dr 45 mg</i>		CIPRO HC SUS OTIC	153
<i>(fenofibric acid equiv)</i>	57	<i>citalopram hydrobromide oral soln 10</i>	
CHOR GONADOT INJ 10000UNT	119	<i>mg/5ml</i>	44
<i>ciclodan sol 8%</i>	108	<i>citalopram hydrobromide tab 10 mg</i>	
<i>ciclopirox gel 0.77%</i>	108	<i>(base equiv)</i>	44
<i>ciclopirox olamine cream 0.77% (base</i>		<i>citalopram hydrobromide tab 20 mg</i>	
<i>equiv)</i>	108	<i>(base equiv)</i>	44
<i>ciclopirox olamine susp 0.77% (base</i>		<i>citalopram hydrobromide tab 40 mg</i>	
<i>equiv)</i>	108	<i>(base equiv)</i>	44
<i>ciclopirox shampoo 1%</i>	108	CITRANATAL CAP HARMONY	144
<i>ciclopirox solution 8%</i>	108	CITRANATAL MIS	144
<i>cilostazol tab 100 mg</i>	129	CITRANATAL MIS 90 DHA	144
<i>cilostazol tab 50 mg</i>	129	CITRANATAL MIS B-CALM.....	144
CILOXAN OIN 0.3% OP	150	CITRANATAL PAK ASSURE	144
CILOXAN SOL 0.3% OP	150	CITRANATAL PAK DHA	144
CIMDUO TAB 300-300	84	CITRANATAL TAB BLOOM	144
<i>cimetidine hcl soln 300 mg/5ml</i>	175	CITRANATAL TAB RX.....	144
<i>cimetidine tab 200 mg</i>	175	<i>claravis cap 10mg</i>	106
<i>cimetidine tab 300 mg</i>	175	<i>claravis cap 20mg</i>	107
<i>cimetidine tab 400 mg</i>	175	<i>claravis cap 30mg</i>	107
<i>cimetidine tab 800 mg</i>	175	<i>claravis cap 40mg</i>	107

CLARINEX TAB 5MG	56	clomipramine hcl cap 75 mg	47
clarithromycin for susp 125 mg/5ml	135	clonazepam orally disintegrating tab	
clarithromycin for susp 250 mg/5ml	135	0.125 mg	37
clarithromycin tab 250 mg	135	clonazepam orally disintegrating tab	
clarithromycin tab 500 mg	135	0.25 mg	37
clarithromycin tab er 24hr 500 mg ..	135	clonazepam orally disintegrating tab	
clemastine fumarate tab 2.68 mg	56	0.5 mg	37
CLEOCIN CRE 2% VAG	179	clonazepam orally disintegrating tab 1	
CLEOCIN SUP 100MG	179	mg	37
CLEOCIN-T LOT 1%	107	clonazepam orally disintegrating tab 2	
CLIMARA DIS 0.025MG	123	mg	37
CLIMARA DIS 0.0375MG	123	clonazepam tab 0.5 mg	37
CLIMARA DIS 0.05MG	123	clonazepam tab 1 mg	37
CLIMARA DIS 0.06MG	123	clonazepam tab 2 mg	37
CLIMARA DIS 0.075MG	123	clonidine hcl tab 0.1 mg	62
CLIMARA DIS 0.1MG	123	clonidine hcl tab 0.2 mg	62
CLIMARA PRO DIS WEEKLY	122	clonidine hcl tab 0.3 mg	62
clindacin mis etz 1%	107	clonidine hcl tab er 12hr 0.1 mg	3
clindacin-p pad 1%	107	clonidine td patch weekly 0.1 mg/24hr	
clindamycin hcl cap 150 mg	28		62
clindamycin hcl cap 300 mg	28	clonidine td patch weekly 0.2 mg/24hr	
clindamycin hcl cap 75 mg	28		62
clindamycin palmitate hcl for soln 75		clonidine td patch weekly 0.3 mg/24hr	
mg/5ml (base equiv)	28		62
clindamycin phosphate-benzoyl		clopidogrel bisulfate tab 300 mg (base	
peroxide gel 1-5%	107	equiv)	129
clindamycin phosphate lotion 1% ...	107	clopidogrel bisulfate tab 75 mg (base	
clindamycin phosphate soln 1%	107	equiv)	129
clindamycin phosphate swab 1% ...	107	clorazepate dipotassium tab 15 mg ..	30
clindamycin phosphate vaginal cream		clorazepate dipotassium tab 3.75 mg	30
2%	179	clorazepate dipotassium tab 7.5 mg	30
clindamycin phosph-benzoyl peroxide		clotrimazole troche 10 mg	142
(refrig) gel 1.2 (1)-5%	107	clotrimazole w/ betamethasone cream	
CLINDESSE CRE 2%	179	1-0.05%	109
clinpro 5000 pst 1.1%	142	clotrimazole w/ betamethasone lotion	
clobazam suspension 2.5 mg/ml	37	1-0.05%	109
clobazam tab 10 mg	37	clozapine orally disintegrating tab 100	
clobazam tab 20 mg	37	mg	80
clobetasol e cre 0.05%	112	clozapine orally disintegrating tab 12.5	
clobetasol propionate cream 0.05%	112	mg	80
clobetasol propionate gel 0.05%	112	clozapine orally disintegrating tab 150	
clobetasol propionate lotion 0.05%	112	mg	80
clobetasol propionate oint 0.05% ...	112	clozapine orally disintegrating tab 200	
clobetasol propionate soln 0.05% ...	112	mg	80
clomiphene citrate tab 50 mg	119	clozapine orally disintegrating tab 25	
clomipramine hcl cap 25 mg	47	mg	80
clomipramine hcl cap 50 mg	47	clozapine tab 100 mg	81

<i>clozapine tab 200 mg</i>	81	CONCERTA TAB 27MG	4
<i>clozapine tab 25 mg</i>	81	CONCERTA TAB 36MG	4
<i>clozapine tab 50 mg</i>	81	CONCERTA TAB 54MG	5
CLOZARIL TAB 100MG	81	CONDYLOX GEL 0.5%	114
CLOZARIL TAB 25MG	81	CONSENSI TAB 10-200MG	90
C-NATE DHA CAP 28-1-200	144	CONSENSI TAB 2.5-200	90
COARTEM TAB 20-120MG	68	CONSENSI TAB 5-200MG	90
<i>codeine sulfate tab 30 mg</i>	15	<i>constulose sol 10gm/15</i>	134
CODEINE SULF TAB 30MG	15	CONTRAVE TAB 8-90MG	3
CODEINE SULF TAB 60MG	15	CONZIP CAP 100MG	15
COLAZAL CAP 750MG	125	CONZIP CAP 200MG	15
<i>colchicine cap 0.6 mg</i>	128	CONZIP CAP 300MG	15
<i>colchicine tab 0.6 mg</i>	128	COPAXONE INJ 20MG/ML	158
<i>colchicine w/ probenecid tab 0.5-500</i> <i>mg</i>	128	COPAXONE INJ 40MG/ML	158
COLCRYS TAB 0.6MG	128	COPIKTRA CAP 15MG	72
<i>colesevelam hcl packet for susp 3.75</i> <i>gm</i>	57	COPIKTRA CAP 25MG	72
<i>colesevelam hcl tab 625 mg</i>	57	COREG CR CAP 10MG	88
COLESTID FLA GRA 5/7.5GM	57	COREG CR CAP 20MG	88
COLESTID FLA GRA 5GM	57	COREG CR CAP 40MG	88
COLESTID GRA 5GM	57	COREG CR CAP 80MG	88
COLESTID POW 5GM	57	<i>coremino tab 135mg</i>	169
COLESTID TAB 1GM	57	<i>coremino tab 45mg</i>	169
<i>colestipol hcl granule packets 5 gm</i> ..	57	<i>coremino tab 90mg</i>	169
<i>colestipol hcl granules 5 gm</i>	57	CORGARD TAB 20MG	89
<i>colestipol hcl tab 1 gm</i>	57	CORGARD TAB 40MG	89
<i>colocort ene 100mg</i>	26	CORGARD TAB 80MG	89
COLY-MYCIN S SUS OTIC	153	CORLANOR TAB 5MG	96
COLYTE/FLAVR SOL PACKS	134	CORLANOR TAB 7.5MG	96
COMBIGAN SOL 0.2/0.5%	149	CORTEF TAB 10MG	104
COMBIPATCH DIS	122	CORTEF TAB 20MG	104
COMBIVENT AER 20-100	33	CORTEF TAB 5MG	104
COMBIVIR TAB 150-300	84	CORTENEMA ENE 100MG	26
COMETRIQ KIT 100MG	72	CORTIFOAM AER 90MG	26
COMETRIQ KIT 140MG	72	<i>cortisone acetate tab 25 mg</i>	104
COMETRIQ KIT 60MG	72	CORTISPORIN CRE 0.5%	108
COMPLERA TAB	84	CORTISPORIN OIN 1%	108
COMPLETENATE CHW	144	COSENTYX INJ 150MG/ML	110
COMPLETE NAT PAK DHA	144	COSENTYX INJ 300DOSE	110
<i>compro sup 25mg</i>	82	COSENTYX PEN INJ 150MG/ML	110
COMTAN TAB 200MG	76	COSENTYX PEN INJ 300DOSE	110
CO-NATAL FA TAB 29-1MG	144	COSOPT PF SOL 2%-0.5%	149
CONCEPT DHA CAP	144	COSOPT SOL 22.3-6.8	149
CONCEPT OB CAP	144	COTELIC TAB 20MG	72
CONCEPTROL GEL 4%	179	COUMADIN TAB 10MG	35
CONCERTA TAB 18MG	4	COUMADIN TAB 1MG	35
		COUMADIN TAB 2.5MG	35
		COUMADIN TAB 2MG	35

COUMADIN TAB 3MG	35
COUMADIN TAB 4MG	35
COUMADIN TAB 5MG	35
COUMADIN TAB 6MG	35
COUMADIN TAB 7.5MG	35
COZAAR TAB 100MG	62
COZAAR TAB 25MG	61
COZAAR TAB 50MG	61
CREON CAP 12000UNT.....	116
CREON CAP 24000UNT.....	116
CREON CAP 3000UNIT	116
CREON CAP 36000UNT.....	116
CREON CAP 6000UNIT	116
CRESEMBA CAP 186 MG.....	55
CRESTOR TAB 10MG.....	58
CRESTOR TAB 20MG.....	58
CRESTOR TAB 40MG.....	58
CRESTOR TAB 5MG	58
CRINONE GEL 8% VAG	179
CRIXIVAN CAP 200MG	84
CRIXIVAN CAP 400MG	84
cromolyn sodium ophth soln 4%.....	152
cromolyn sodium oral conc 100 mg/5ml	125
cromolyn sodium soln nebu 20 mg/2ml	31
crotan lot 10%.....	115
cryselle-28 tab 28 tabs	99
CUPRIMINE CAP 250MG	140
curity salin sol 0.9% irr	127
CUVPOSA SOL 1MG/5ML	174
cvs aspirin tab 81mg ec	13
cvs nicotine dis 14mg/24h	159
cvs nicotine dis 21mg/24h	159
cvs nicotine dis 7mg/24hr	159
cvs nicotine gum 2mgfruit	160
cvs nicotine gum 2mg mint.....	160
cvs nicotine gum 2mg orig.....	160
cvs nicotine gum 4mg cinn	160
cvs nicotine gum 4mgfruit	160
cvs nicotine gum 4mg mint.....	160
cvs nicotine gum 4mg orig.....	160
cvs nicotine loz 2mg	160
cvs nicotine loz 2mg mint	160
cvs nicotine loz 4mg cinn.....	160
cvs nicotine loz 4mg mint	160
cyanocobalamin inj 1000 mcg/ml ...	130

<i>cyclafem tab 1/35</i>	99
<i>cyclafem tab 7/7/7</i>	99
<i>cyclobenzaprine hcl tab 10 mg</i>	147
<i>cyclobenzaprine hcl tab 5 mg</i>	147
<i>cyclobenzaprine hcl tab 7.5 mg</i>	147
CYCLOGYL SOL 0.5% OP	149
CYCLOGYL SOL 1% OP.....	149
CYCLOGYL SOL 2% OP.....	149
<i>cyclopentolate hcl ophth soln 0.5%.</i>	149
<i>cyclopentolate hcl ophth soln 1% ...</i>	149
<i>cyclopentolate hcl ophth soln 2% ...</i>	149
<i>cyclophosphamide cap 25 mg</i>	69
<i>cyclophosphamide cap 50 mg</i>	69
<i>cyclophosphamide for inj 1 gm.....</i>	69
<i>cyclophosphamide for inj 2 gm.....</i>	69
<i>cyclophosphamide for inj 500 mg</i>	69
<i>cycloserine cap 250 mg.....</i>	68
CYCLOSET TAB 0.8MG	50
<i>cyclosporine cap 25 mg</i>	140
<i>cyclosporine modified cap 100 mg ..</i>	140
<i>cyclosporine modified cap 25 mg</i>	140
<i>cyclosporine modified cap 50 mg</i>	140
<i>cyclosporine modified oral soln 100 mg/ml.....</i>	140
CYMBALTA CAP 20MG	46
CYMBALTA CAP 30MG	46
CYMBALTA CAP 60MG	46
<i>cyproheptadine hcl syrup 2 mg/5ml..</i>	56
<i>cyproheptadine hcl tab 4 mg</i>	56
<i>cyred eq tab</i>	99
<i>cyred tab</i>	99
CYSTAGON CAP 150MG	127
CYSTAGON CAP 50MG.....	127
<i>cytarabine inj 20 mg/ml.....</i>	69
<i>cytarabine inj pf 100 mg/ml</i>	69
<i>cytarabine inj pf 20 mg/ml</i>	69
CYTOMEL TAB 25MCG	171
CYTOMEL TAB 50MCG	171
CYTOMEL TAB 5MCG.....	171
CYTOTEC TAB 100MCG.....	177
CYTOTEC TAB 200MCG.....	177
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<i>dalfampridine tab er 12hr 10 mg</i>	158
DALIRESP TAB 250MCG	32
DALIRESP TAB 500MCG	32
<i>danazol cap 100 mg</i>	25
<i>danazol cap 200 mg</i>	25

<i>danazol cap 50 mg</i>	25	DEMEROL INJ 75MG/1.5.....	15
DANTRIUM CAP 25MG	147	DEMEROL INJ 75MG/ML	15
DANTRIUM CAP 50MG	147	DEMSEER CAP 250MG	61
<i>dantrolene sodium cap 100 mg</i>	147	DENAVIR CRE 1%	111
<i>dantrolene sodium cap 25 mg</i>	147	<i>denta 5000 cre plus</i>	142
<i>dantrolene sodium cap 50 mg</i>	147	<i>denta 5000 cre plus 2pk</i>	142
<i>dapsone gel 5%</i>	107	<i>dentagel gel 1.1%</i>	142
<i>dapsone tab 100 mg</i>	28	DEPAKOTE ER TAB 250MG.....	43
<i>dapsone tab 25 mg</i>	28	DEPAKOTE ER TAB 500MG.....	43
<i>darifenacin hydrobromide tab er 24hr</i>		DEPAKOTE SPR CAP 125MG.....	43
15 mg (base equiv)	178	DEPAKOTE TAB 125MG DR	43
<i>darifenacin hydrobromide tab er 24hr</i>		DEPAKOTE TAB 250MG DR	43
7.5 mg (base equiv)	178	DEPAKOTE TAB 500MG DR	43
<i>dasetta tab 1/35</i>	99	DEPEN TITRA TAB 250MG.....	140
<i>dasetta tab 7/7/7</i>	99	DEPO-ESTRADI INJ 5MG/ML	123
DAURISMO TAB 100MG.....	70	DEPO-PROVERA INJ 150MG/ML	103
DAURISMO TAB 25MG	70	DEPO-PROVERA INJ 400/ML	70
DAYPRO TAB 600MG.....	10	DEPO-SQ PROV INJ 104	103
<i>daysee tab</i>	99	DEPO-TESTOST INJ 100MG/ML	25
DAYTRANA DIS 10MG/9HR.....	5	DEPO-TESTOST INJ 200MG/ML	25
DAYTRANA DIS 15MG/9HR.....	5	DERMA-SMOOTH OIL /FS BODY.....	112
DAYTRANA DIS 20MG/9HR.....	5	DERMA-SMOOTH OIL /FS SCLP	112
DAYTRANA DIS 30MG/9HR.....	5	DERMOTIC OIL 0.01%	153
DDAVP INJ 4MCG/ML	121	DESCOVY TAB 200/25	84
DDAVP SOL 0.01%	121	<i>desipramine hcl tab 100 mg</i>	48
DDAVP SPR 0.01%	121	<i>desipramine hcl tab 10 mg</i>	47
DDAVP TAB 0.1MG	121	<i>desipramine hcl tab 150 mg</i>	48
DDAVP TAB 0.2MG	121	<i>desipramine hcl tab 25 mg</i>	47
DEBACTEROL SOL 30-50%	142	<i>desipramine hcl tab 50 mg</i>	47
<i>deblitane tab 0.35mg</i>	103	<i>desipramine hcl tab 75 mg</i>	48
<i>decadron tab 0.5mg</i>	104	<i>desloratadine tab 5 mg</i>	56
<i>decadron tab 0.75mg</i>	104	<i>desmopressin acetate inj 4 mcg/ml</i>	121
<i>decadron tab 4mg</i>	104	<i>desmopressin acetate nasal spray soln</i>	
<i>decadron tab 6mg</i>	104	0.01%	121
<i>deferasirox tab 180 mg</i>	52	<i>desmopressin acetate nasal spray soln</i>	
<i>deferasirox tab 360 mg</i>	53	0.01% (refrigerated).....	121
<i>deferasirox tab 90 mg</i>	52	<i>desmopressin acetate tab 0.1 mg</i> ...	121
<i>deferasirox tab for oral susp 125 mg</i>	53	<i>desmopressin acetate tab 0.2 mg</i> ...	121
<i>deferasirox tab for oral susp 250 mg</i>	53	<i>desogest-eth estrad & eth estrad tab</i>	
<i>deferasirox tab for oral susp 500 mg</i>	53	0.15-0.02/0.01 mg(21/5).....	99
DELSTRIGO TAB	84	<i>desogestrel & ethinyl estradiol tab 0.15</i>	
<i>delyla tab 0.1-0.02</i>	99	mg-30 mcg	99
<i>demeclocycline hcl tab 150 mg</i>	169	<i>desonide cream 0.05%</i>	112
<i>demeclocycline hcl tab 300 mg</i>	169	<i>desonide lotion 0.05%</i>	112
DEMEROL INJ 100/2ML	15	<i>desonide oint 0.05%</i>	112
DEMEROL INJ 100MG/ML	15	DESOWEN CRE 0.05%	112
DEMEROL INJ 25MG/0.5.....	15	<i>desoximetasone cream 0.05%</i>	112

<i>desoximetasone cream 0.25%</i>	112	<i>dexmethylphenidate hcl cap er 24 hr</i>	
<i>desoximetasone gel 0.05%</i>	112	35 mg	5
<i>desoximetasone oint 0.05%</i>	112	<i>dexmethylphenidate hcl cap er 24 hr</i>	
<i>desoximetasone oint 0.25%</i>	112	40 mg	5
<i>desoximetasone spray 0.25%</i>	112	<i>dexmethylphenidate hcl cap er 24 hr 5</i>	
<i>desvenlafaxine succinate tab er 24hr</i>		mg	5
100 mg (base equiv)	46	<i>dexmethylphenidate hcl tab 10 mg</i>	5
<i>desvenlafaxine succinate tab er 24hr</i>		<i>dexmethylphenidate hcl tab 2.5 mg</i>	5
25 mg (base equiv)	46	<i>dexmethylphenidate hcl tab 5 mg</i>	5
<i>desvenlafaxine succinate tab er 24hr</i>		<i>dextroamphetamine sulfate cap er 24hr</i>	
50 mg (base equiv)	46	10 mg	2
<i>desvenlafaxine tab er 24hr 100 mg</i> ..	46	<i>dextroamphetamine sulfate cap er 24hr</i>	
<i>desvenlafaxine tab er 24hr 50 mg</i>	46	15 mg	2
DESVENLAFAX TAB 100MG ER	46	<i>dextroamphetamine sulfate cap er 24hr</i>	
DESVENLAFAX TAB 50MG ER	46	5 mg	2
DETROL LA CAP 2MG	178	<i>dextroamphetamine sulfate oral</i>	
DETROL LA CAP 4MG	178	solution 5 mg/5ml	2
DEXAMETHASON CON 1MG/ML.....	104	<i>dextroamphetamine sulfate tab 10 mg</i> 2	
<i>dexamethasone elixir 0.5 mg/5ml</i> ...104		<i>dextroamphetamine sulfate tab 5 mg</i> .2	
<i>dexamethasone sodium phosphate inj</i>		DIACOMIT CAP 250MG.....	38
10 mg/ml	104	DIACOMIT CAP 500MG.....	38
<i>dexamethasone sodium phosphate</i>		DIACOMIT PAK 250MG.....	38
<i>ophth soln 0.1%</i>	151	DIACOMIT PAK 500MG.....	38
<i>dexamethasone soln 0.5 mg/5ml</i>104		DIASTAT ACDL GEL 12.5-20	37
<i>dexamethasone tab 0.5 mg</i>	104	DIASTAT ACDL GEL 5-10MG	37
<i>dexamethasone tab 0.75 mg</i>	104	DIASTAT PED GEL 2.5M GEL.....	37
<i>dexamethasone tab 1.5 mg</i>	104	<i>diazepam con 5mg/ml</i>	30
<i>dexamethasone tab 1 mg</i>	104	<i>diazepam inj 5 mg/ml</i>	30
<i>dexamethasone tab 2 mg</i>	104	<i>diazepam oral soln 1 mg/ml</i>	30
<i>dexamethasone tab 4 mg</i>	104	<i>diazepam rectal gel delivery system 10</i>	
<i>dexamethasone tab 6 mg</i>	104	mg	37
DEXEDRINE CAP 10MG CR	2	<i>diazepam rectal gel delivery system 2.5</i>	
DEXEDRINE CAP 15MG CR	2	mg	37
DEXEDRINE CAP 5MG CR	1	<i>diazepam rectal gel delivery system 20</i>	
DEXILANT CAP 30MG DR	175	mg	37
DEXILANT CAP 60MG DR	175	<i>diazepam tab 10 mg</i>	30
<i>dexmethylphenidate hcl cap er 24 hr</i>		<i>diazepam tab 2 mg</i>	30
10 mg	5	<i>diazepam tab 5 mg</i>	30
<i>dexmethylphenidate hcl cap er 24 hr</i>		<i>diazoxide susp 50 mg/ml</i>	50
15 mg	5	DIBENZYLINE CAP 10MG.....	61
<i>dexmethylphenidate hcl cap er 24 hr</i>		DICLEGIS TAB 10-10MG	54
20 mg	5	<i>diclofenac potassium tab 50 mg</i>	10
<i>dexmethylphenidate hcl cap er 24 hr</i>		<i>diclofenac sodium (actinic keratoses)</i>	
25 mg	5	gel 3%	109
<i>dexmethylphenidate hcl cap er 24 hr</i>		<i>diclofenac sodium gel 1%</i>	108
30 mg	5	<i>diclofenac sodium ophth soln 0.1%</i> .152	
		<i>diclofenac sodium soln 1.5%</i>	108

<i>diclofenac sodium tab delayed release</i> 25 mg.....	10	DILANTIN CAP 30MG	42
<i>diclofenac sodium tab delayed release</i> 50 mg.....	10	DILANTIN CHW 50MG	42
<i>diclofenac sodium tab delayed release</i> 75 mg.....	10	DILATRATE SR CAP 40MG	28
<i>diclofenac sodium tab er 24hr 100 mg</i>	10	DILAUDID LIQ 1MG/ML	15
<i>diclofenac w/ misoprostol tab delayed</i> <i>release 50-0.2 mg</i>	10	DILAUDID TAB 2MG	15
<i>diclofenac w/ misoprostol tab delayed</i> <i>release 75-0.2 mg</i>	10	DILAUDID TAB 4MG	15
<i>dicloxacillin sodium cap 250 mg</i>	155	DILAUDID TAB 8MG	15
<i>dicloxacillin sodium cap 500 mg</i>	155	<i>diltiazem hcl cap er 12hr 60 mg</i>	91
<i>dicyclomine hcl cap 10 mg</i>	174	<i>diltiazem hcl cap er 12hr 90 mg</i>	91
<i>dicyclomine hcl tab 20 mg</i>	174	<i>diltiazem hcl coated beads cap er 24hr</i> 120 mg.....	91
<i>didanosine delayed release capsule 200</i> mg	84	<i>diltiazem hcl coated beads cap er 24hr</i> 180 mg.....	91
<i>didanosine delayed release capsule 250</i> mg	84	<i>diltiazem hcl coated beads cap er 24hr</i> 240 mg.....	91
<i>didanosine delayed release capsule 400</i> mg	84	<i>diltiazem hcl coated beads cap er 24hr</i> 300 mg.....	91
<i>diethylpropion hcl tab 25 mg</i>	3	<i>diltiazem hcl coated beads tab er 24hr</i> 180 mg.....	91
<i>diethylpropion hcl tab er 24hr 75 mg</i> ..	3	<i>diltiazem hcl coated beads tab er 24hr</i> 240 mg.....	91
DIFICID TAB 200MG	135	<i>diltiazem hcl coated beads tab er 24hr</i> 300 mg.....	91
<i>diflorasone diacetate cream 0.05%</i>	112	<i>diltiazem hcl coated beads tab er 24hr</i> 360 mg.....	91
<i>diflorasone diacetate oint 0.05%</i>	112	<i>diltiazem hcl coated beads tab er 24hr</i> 420 mg.....	91
DIFLUCAN SUS 10MG/ML	55	<i>diltiazem hcl extended release beads</i> cap er 24hr 120 mg.....	91
DIFLUCAN SUS 40MG/ML	55	<i>diltiazem hcl extended release beads</i> cap er 24hr 180 mg.....	91
DIFLUCAN TAB 100MG.....	55	<i>diltiazem hcl extended release beads</i> cap er 24hr 240 mg.....	91
DIFLUCAN TAB 150MG.....	55	<i>diltiazem hcl extended release beads</i> cap er 24hr 300 mg.....	91
DIFLUCAN TAB 200MG.....	55	<i>diltiazem hcl extended release beads</i> cap er 24hr 360 mg.....	91
DIFLUCAN TAB 50MG.....	55	<i>diltiazem hcl extended release beads</i> cap er 24hr 420 mg.....	91
<i>diflunisal tab 500 mg</i>	13	<i>diltiazem hcl tab 120 mg</i>	91
<i>digitek tab 0.125mg</i>	93	<i>diltiazem hcl tab 30 mg</i>	91
<i>digitek tab 0.25mg</i>	93	<i>diltiazem hcl tab 60 mg</i>	91
<i>digoxin oral soln 0.05 mg/ml</i>	93	<i>diltiazem hcl tab 90 mg</i>	91
<i>digoxin tab 125 mcg (0.125 mg)</i>	93	<i>dilt-xr cap 120mg</i>	91
<i>digoxin tab 250 mcg (0.25 mg)</i>	93	<i>dilt-xr cap 180mg</i>	91
<i>digox tab 0.125mg</i>	93	<i>dilt-xr cap 240mg</i>	91
<i>digox tab 0.25mg</i>	93	DIOVAN HCT TAB 160-12.5	64
<i>dihydroergotamine mesylate inj 1</i> mg/ml.....	135		
<i>dihydroergotamine mesylate nasal</i> <i>spray 4 mg/ml</i>	136		
DILANTIN-125 SUS 125/5ML	42		
DILANTIN CAP 100MG	42		

DIOVAN HCT TAB 160-25MG	64	<i>donepezil hydrochloride orally</i>	
DIOVAN HCT TAB 320-12.5	64	<i>disintegrating tab 5 mg</i>	156
DIOVAN HCT TAB 320-25MG	64	<i>donepezil hydrochloride tab 10 mg</i>	156
DIOVAN HCT TAB 80/12.5	64	<i>donepezil hydrochloride tab 23 mg</i>	156
DIOVAN TAB 160MG	62	<i>donepezil hydrochloride tab 5 mg ...</i>	156
DIOVAN TAB 320MG	62	DOPTELET TAB 20MG	130
DIOVAN TAB 40MG	62	DORAL TAB 15MG	132
DIOVAN TAB 80MG	62	DORYX MPC TAB 120MG	169
<i>diphenoxylate w/ atropine tab 2.5-</i>		DORYX TAB 200MG	169
<i>0.025 mg</i>	52	DORYX TAB 50MG	169
DIPROLENE AF CRE 0.05%	112	<i>dorzolamide hcl ophth soln 2%</i>	152
DIPROLENE OIN 0.05%	112	<i>dorzolamide hcl-timolol maleate ophth</i>	
<i>dipyridamole tab 25 mg</i>	129	<i>sol 22.3-6.8 mg/ml pf</i>	149
<i>dipyridamole tab 50 mg</i>	129	<i>dorzolamide hcl-timolol maleate ophth</i>	
<i>dipyridamole tab 75 mg</i>	129	<i>soln 22.3-6.8 mg/ml</i>	149
<i>disopyramide phosphate cap 100 mg</i>	30	DORZOLAMIDE SOL 2%	152
<i>disopyramide phosphate cap 150 mg</i>	30	DOVATO TAB 50-300MG	84
<i>disulfiram tab 250 mg</i>	155	DOVONEX CRE 0.005%	110
<i>disulfiram tab 500 mg</i>	155	<i>doxazosin mesylate tab 1 mg</i>	62
DITROPAN XL TAB 10MG	178	<i>doxazosin mesylate tab 2 mg</i>	62
DITROPAN XL TAB 5MG	178	<i>doxazosin mesylate tab 4 mg</i>	62
DIURIL SUS 250/5ML	118	<i>doxazosin mesylate tab 8 mg</i>	62
<i>divalproex sodium cap delayed release</i>		<i>doxepin hcl (sleep) tab 3 mg (base</i>	
<i>sprinkle 125 mg</i>	43	<i>equiv)</i>	132
<i>divalproex sodium tab delayed release</i>		<i>doxepin hcl (sleep) tab 6 mg (base</i>	
<i>125 mg</i>	43	<i>equiv)</i>	132
<i>divalproex sodium tab delayed release</i>		<i>doxepin hcl cap 100 mg</i>	48
<i>250 mg</i>	43	<i>doxepin hcl cap 10 mg</i>	48
<i>divalproex sodium tab delayed release</i>		<i>doxepin hcl cap 150 mg</i>	48
<i>500 mg</i>	43	<i>doxepin hcl cap 25 mg</i>	48
<i>divalproex sodium tab er 24 hr 250 mg</i>		<i>doxepin hcl cap 50 mg</i>	48
.....	43	<i>doxepin hcl cap 75 mg</i>	48
<i>divalproex sodium tab er 24 hr 500 mg</i>		<i>doxepin hcl conc 10 mg/ml</i>	48
.....	43	<i>doxepin hcl cream 5%</i>	110
DIVIGEL GEL 0.25MG	123	<i>doxercalciferol cap 0.5 mcg</i>	120
DIVIGEL GEL 0.5MG	123	<i>doxercalciferol cap 1 mcg</i>	120
DIVIGEL GEL 0.75MG	123	<i>doxercalciferol cap 2.5 mcg</i>	120
DIVIGEL GEL 1.25MG	123	<i>doxycycline (rosacea) cap delayed</i>	
DIVIGEL GEL 1MG/GM	123	<i>release 40 mg</i>	115
<i>dofetilide cap 125 mcg (0.125 mg) ...</i>	31	<i>doxycycline hyclate cap 100 mg</i>	169
<i>dofetilide cap 250 mcg (0.25 mg)</i>	31	<i>doxycycline hyclate cap 50 mg</i>	169
<i>dofetilide cap 500 mcg (0.5 mg)</i>	31	<i>doxycycline hyclate tab 100 mg</i>	169
DOLOPHINE TAB 10MG	15	<i>doxycycline hyclate tab 20 mg</i>	169
DOLOPHINE TAB 5MG	15	<i>doxycycline hyclate tab delayed release</i>	
<i>donepezil hydrochloride orally</i>		<i>100 mg</i>	169
<i>disintegrating tab 10 mg</i>	156	<i>doxycycline hyclate tab delayed release</i>	
		<i>150 mg</i>	169

<i>doxycycline hyclate tab delayed release</i>	
200 mg	169
<i>doxycycline hyclate tab delayed release</i>	
50 mg	169
<i>doxycycline hyclate tab delayed release</i>	
75 mg	169
<i>doxycycline monohydrate cap 100 mg</i>	
.....	169
<i>doxycycline monohydrate cap 150 mg</i>	
.....	169
<i>doxycycline monohydrate cap 50 mg</i>	
.....	169
<i>doxycycline monohydrate cap 75 mg</i>	
.....	169
<i>doxycycline monohydrate for susp 25</i>	
mg/5ml	170
<i>doxycycline monohydrate tab 100 mg</i>	
.....	170
<i>doxycycline monohydrate tab 150 mg</i>	
.....	170
<i>doxycycline monohydrate tab 50 mg</i>	
.....	170
<i>doxycycline monohydrate tab 75 mg</i>	
.....	170
<i>dronabinol cap 10 mg</i>	54
<i>dronabinol cap 2.5 mg</i>	54
<i>dronabinol cap 5 mg</i>	54
<i>drospirenone-ethinyl estradiol tab 3-</i>	
0.02 mg	99
<i>drospirenone-ethinyl estradiol tab 3-</i>	
0.03 mg	99
<i>drospirenone-ethinyl estrad-</i>	
levomefolate tab 3-0.02-0.451 mg	99
<i>drospirenone-ethinyl estrad-</i>	
levomefolate tab 3-0.03-0.451 mg	99
DROXIA CAP 200MG	129
DROXIA CAP 300MG	129
DROXIA CAP 400MG	129
DRYSOL SOL 20%	115
DUAVEE TAB 0.45-20	122
DUETACT TAB 30-2MG	49
DUETACT TAB 30-4MG	49
DUET DHA 400 MIS 25-1-400	144
DUET DHA MIS BALANCED	144
<i>duloxetine hcl enteric coated pellets</i>	
cap 20 mg (base eq)	46

<i>duloxetine hcl enteric coated pellets</i>	
cap 30 mg (base eq)	46
<i>duloxetine hcl enteric coated pellets</i>	
cap 40 mg (base eq)	46
<i>duloxetine hcl enteric coated pellets</i>	
cap 60 mg (base eq)	46
DUOPA SUS 4.63-20	77
DUPIXENT INJ 200/1.14	114
DUPIXENT INJ 300/2ML	114
DURAGESIC DIS 100MCG/H	15
DURAGESIC DIS 12MCG/HR	15
DURAGESIC DIS 25MCG/HR	15
DURAGESIC DIS 50MCG/HR	15
DURAGESIC DIS 75MCG/HR	15
DUREZOL EMU 0.05%	151
<i>dutasteride cap 0.5 mg</i>	127
<i>dutasteride-tamsulosin hcl cap 0.5-0.4</i>	
mg	127
DYAZIDE CAP 37.5-25	117
DYMISTA SPR 137-50	148
E	
<i>e.e.s. 400 tab 400mg</i>	135
E.E.S. GRAN SUS 200/5ML	135
EC-NAPROSYN TAB 375MG	10
EC-NAPROXEN TAB 375MG	10
EC-NAPROXEN TAB 500MG	10
<i>econazole nitrate cream 1%</i>	109
<i>econtra ez tab 1.5mg</i>	103
<i>econtra os tab 1.5mg</i>	103
<i>ecotrin low tab 81mg ec</i>	13
EDARBI TAB 40MG	62
EDARBI TAB 80MG	62
EDARBYCLOR TAB 40-12.5	64
EDARBYCLOR TAB 40-25MG	64
EDEX KIT 10MCG	94
EDEX KIT 20MCG	94
EDEX KIT 40MCG	94
EDLUAR SUB 10MG	132
EDLUAR SUB 5MG	132
<i>ed-spaz tab 0.125mg</i>	174
EDURANT TAB 25MG	84
<i>efavirenz cap 200 mg</i>	84
<i>efavirenz cap 50 mg</i>	84
<i>efavirenz tab 600 mg</i>	84
EFFER-K TAB 10MEQ	139
EFFER-K TAB 20MEQ	139
EFFEXOR XR CAP 150MG	46

EFFEXOR XR CAP 37.5MG	46
EFFEXOR XR CAP 75MG	46
EFFIENT TAB 10MG	129
EFFIENT TAB 5MG	129
EFUDEX CRE 5%	109
EGRIFTA SOL 1MG.....	120
ELESTRIN GEL 0.06%	123
<i>eletriptan hydrobromide tab 20 mg</i> <i>(base equivalent)</i>	136
<i>eletriptan hydrobromide tab 40 mg</i> <i>(base equivalent)</i>	136
ELIDEL CRE 1%	114
<i>elinest tab</i>	99
ELIQUIS ST P TAB 5MG.....	35
ELIQUIS TAB 2.5MG	35
ELIQUIS TAB 5MG	35
<i>elite-ob tab</i>	144
ELLA TAB 30MG	103
ELMIRON CAP 100MG	127
ELOCON CRE 0.1%	112
EMBEDA CAP 100-4MG	15
EMBEDA CAP 20-0.8MG	15
EMBEDA CAP 30-1.2MG	15
EMBEDA CAP 50-2MG	15
EMBEDA CAP 60-2.4MG	15
EMBEDA CAP 80-3.2MG	15
EMCYT CAP 140MG.....	70
EMEND CAP 125MG	55
EMEND CAP 40MG.....	54
EMEND CAP 80MG.....	54
EMEND SUS 125MG.....	55
EMEND TRIPAC PAK 80 & 125	55
EMFLAZA SUS 22.75/ML.....	104
EMFLAZA TAB 18MG	104
EMFLAZA TAB 30MG	104
EMFLAZA TAB 36MG	104
EMFLAZA TAB 6MG	104
EMGALITY INJ 100MG/ML	136
EMGALITY INJ 120MG/ML	136
EMSAM DIS 12MG/24H	44
EMSAM DIS 6MG/24HR	44
EMSAM DIS 9MG/24HR	44
EMTRIVA CAP 200MG	84
EMTRIVA SOL 10MG/ML	84
EMVERM CHW 100MG	26
ENABLEX TAB 15MG	178
ENABLEX TAB 7.5MG	178

<i>enalapril maleate & hydrochlorothiazide</i> <i>tab 10-25 mg</i>	65
<i>enalapril maleate & hydrochlorothiazide</i> <i>tab 5-12.5 mg</i>	64
<i>enalapril maleate tab 10 mg</i>	60
<i>enalapril maleate tab 2.5 mg</i>	60
<i>enalapril maleate tab 20 mg</i>	60
<i>enalapril maleate tab 5 mg</i>	60
ENBRACE HR CAP	144
ENBREL INJ 25/0.5ML.....	12
ENBREL INJ 25MG	12
ENBREL INJ 50MG/ML.....	12
ENBREL MINI INJ 50MG/ML	12
ENBREL SRCLK INJ 50MG/ML.....	12
ENCARE SUP 100MG	179
ENDARI POW 5GM	129
<i>endocet tab 10-325mg</i>	22
<i>endocet tab 2.5-325</i>	22
<i>endocet tab 5-325mg</i>	22
<i>endocet tab 7.5-325</i>	22
ENDOMETRIN SUP 100MG	179
<i>enoxaparin sodium inj 100 mg/ml</i>	36
<i>enoxaparin sodium inj 120 mg/0.8ml</i>	36
<i>enoxaparin sodium inj 150 mg/ml</i>	36
<i>enoxaparin sodium inj 300 mg/3ml</i> ..	36
<i>enoxaparin sodium inj 30 mg/0.3ml</i> .	36
<i>enoxaparin sodium inj 40 mg/0.4ml</i> .	36
<i>enoxaparin sodium inj 60 mg/0.6ml</i> .	36
<i>enoxaparin sodium inj 80 mg/0.8ml</i> .	36
<i>enpresse-28 tab</i>	99
<i>enskyce tab</i>	99
<i>entacapone tab 200 mg</i>	76
<i>entecavir tab 0.5 mg</i>	87
<i>entecavir tab 1 mg</i>	87
ENTOCORT EC CAP 3MG DR.....	104
ENTRESTO TAB 24-26MG	94
ENTRESTO TAB 49-51MG	94
ENTRESTO TAB 97-103MG	94
<i>enulose sol 10gm/15</i>	126
ENVARUSUS XR TAB 0.75MG	140
ENVARUSUS XR TAB 1MG.....	140
ENVARUSUS XR TAB 4MG.....	140
EPANED SOL 1MG/ML	60
EPCLUSA TAB 400-100	87
EPIDIOLEX SOL 100MG/ML.....	38
EPIFOAM AER 1%.....	112
<i>epinastine hcl ophth soln 0.05%</i>	152

EPINEPHRINE INJ 1MG/ML.....	180	<i>eq nicotine loz 4mg mint</i>	161
<i>epinephrine inj 30 mg/30ml (1 mg/ml)</i>		EQUETRO CAP 100MG.....	79
<i>(1:1000)</i>	180	EQUETRO CAP 200MG.....	79
<i>epinephrine solution auto-injector 0.15</i>		EQUETRO CAP 300MG.....	79
<i>mg/0.15ml (1:1000).....</i>	180	<i>ergocalciferol cap 1.25 mg (50000 unit)</i>	
<i>epinephrine solution auto-injector 0.15</i>			180
<i>mg/0.3ml (1:2000).....</i>	180	<i>ergoloid mesylates tab 1 mg</i>	159
<i>epinephrine solution auto-injector 0.3</i>		ERGOMAR SUB 2MG	136
<i>mg/0.3ml (1:1000).....</i>	180	<i>ergotamine w/ caffeine tab 1-100 mg</i>	
EPIPEN 2-PAK INJ 0.3MG.....	180		135
EPIPEN-JR INJ 0.15MG.....	180	ERIVEDGE CAP 150MG.....	70
<i>epitol tab 200mg</i>	38	ERLEADA TAB 60MG	70
EPIVIR SOL 10MG/ML.....	84	<i>errin tab 0.35mg</i>	103
EPIVIR TAB 150MG.....	84	<i>ertapenem sodium for inj 1 gm (base</i>	
EPIVIR TAB 300MG.....	84	<i>equivalent).....</i>	27
<i>eplerenone tab 25 mg.....</i>	67	<i>ery pad 2%</i>	107
<i>eplerenone tab 50 mg.....</i>	67	ERYPED SUS 200/5ML.....	135
EPOGEN INJ 10000/ML.....	130	ERYPED SUS 400/5ML.....	135
EPOGEN INJ 2000/ML	130	<i>ery-tab tab 250mg ec</i>	135
EPOGEN INJ 20000/ML.....	130	<i>ery-tab tab 333mg ec</i>	135
EPOGEN INJ 3000/ML	130	<i>ery-tab tab 500mg ec</i>	135
EPOGEN INJ 4000/ML	130	<i>erythromycin ethylsuccinate for susp</i>	
<i>eprosartan mesylate tab 600 mg.....</i>	62	<i>200 mg/5ml.....</i>	135
EPZICOM TAB 600-300	84	<i>erythromycin ethylsuccinate for susp</i>	
<i>eq child asa chw 81mg</i>	13	<i>400 mg/5ml.....</i>	135
<i>eq aspirin chw 81mg.....</i>	13	<i>erythromycin ethylsuccinate tab 400</i>	
<i>eq nicotine gum 2mg</i>	162	<i>mg</i>	135
<i>eq nicotine loz 2mg mint</i>	162	<i>erythromycin gel 2%</i>	107
<i>eq nicotine loz 4mg mint</i>	162	<i>erythromycin ophth oint 5 mg/gm ..</i>	150
<i>eq nicotine dis 14mg/24h</i>	160	<i>erythromycin soln 2%.....</i>	107
<i>eq nicotine dis 21mg/24h</i>	160	<i>erythromycin tab 250 mg</i>	135
<i>eq nicotine dis 7mg/24hr.....</i>	160	<i>erythromycin tab 500 mg</i>	135
<i>eq nicotine gum 2mg cinn</i>	160	ESBRIET CAP 267MG	169
<i>eq nicotine gum 2mgfruit</i>	161	ESBRIET TAB 267MG	169
<i>eq nicotine gum 2mg mint.....</i>	161	ESBRIET TAB 801MG	169
<i>eq nicotine gum 2mg orig.....</i>	161	<i>escitalopram oxalate soln 5 mg/5ml</i>	
<i>eq nicotine gum 4mg cinn</i>	161	<i>(base equiv)</i>	44
<i>eq nicotine gum 4mgfruit</i>	161	<i>escitalopram oxalate tab 10 mg (base</i>	
<i>eq nicotine gum 4mg mint.....</i>	161	<i>equiv).....</i>	44
<i>eq nicotine gum 4mg orig.....</i>	161	<i>escitalopram oxalate tab 20 mg (base</i>	
<i>eq nicotine gum 4mg ref</i>	161	<i>equiv).....</i>	44
<i>eq nicotine gum 4mg strt</i>	161	<i>escitalopram oxalate tab 5 mg (base</i>	
<i>eq nicotine loz 2mg cher</i>	161	<i>equiv).....</i>	44
<i>eq nicotine loz 2mg cinn.....</i>	161	ESGIC TAB.....	13
<i>eq nicotine loz 2mg mint</i>	161	<i>esomeprazole magnesium cap delayed</i>	
<i>eq nicotine loz 4mg chry</i>	161	<i>release 20 mg (base eq).....</i>	175
<i>eq nicotine loz 4mg cinn.....</i>	161		

<i>esomeprazole magnesium cap delayed release 40 mg (base eq).....</i>	<i>175</i>	<i>estradiol valerate im in oil 20 mg/ml</i>	<i>123</i>
<i>esomeprazole magnesium for delayed release susp packet 10 mg</i>	<i>175</i>	<i>estradiol valerate im in oil 40 mg/ml</i>	<i>123</i>
<i>esomeprazole magnesium for delayed release susp packet 20 mg</i>	<i>176</i>	<i>ESTRING MIS 2MG</i>	<i>179</i>
<i>esomeprazole magnesium for delayed release susp packet 40 mg</i>	<i>176</i>	<i>ESTROGEL GEL</i>	<i>123</i>
<i>estarylla tab 0.25-35</i>	<i>99</i>	<i>ESTROSTEP FE TAB</i>	<i>99</i>
<i>estazolam tab 1 mg</i>	<i>132</i>	<i>eszopiclone tab 1 mg</i>	<i>132</i>
<i>estazolam tab 2 mg</i>	<i>132</i>	<i>eszopiclone tab 2 mg</i>	<i>132</i>
<i>ESTRACE TAB 0.5MG</i>	<i>123</i>	<i>eszopiclone tab 3 mg</i>	<i>133</i>
<i>ESTRACE TAB 1MG</i>	<i>123</i>	<i>ethacrynic acid tab 25 mg</i>	<i>117</i>
<i>ESTRACE TAB 2MG</i>	<i>123</i>	<i>ethambutol hcl tab 100 mg.....</i>	<i>68</i>
<i>ESTRACE VAG CRE 0.01%</i>	<i>179</i>	<i>ethambutol hcl tab 400 mg.....</i>	<i>68</i>
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	<i>122</i>	<i>ethosuximide cap 250 mg</i>	<i>43</i>
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	<i>122</i>	<i>ethosuximide soln 250 mg/5ml</i>	<i>43</i>
<i>estradiol tab 0.5 mg</i>	<i>123</i>	<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	<i>99</i>
<i>estradiol tab 1 mg</i>	<i>123</i>	<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	<i>99</i>
<i>estradiol tab 2 mg</i>	<i>123</i>	<i>etidronate disodium tab 400 mg.....</i>	<i>118</i>
<i>estradiol td patch twice weekly 0.025 mg/24hr.....</i>	<i>123</i>	<i>etodolac cap 200 mg</i>	<i>10</i>
<i>estradiol td patch twice weekly 0.0375 mg/24hr.....</i>	<i>123</i>	<i>etodolac cap 300 mg</i>	<i>10</i>
<i>estradiol td patch twice weekly 0.05 mg/24hr.....</i>	<i>123</i>	<i>etodolac tab 400 mg.....</i>	<i>10</i>
<i>estradiol td patch twice weekly 0.075 mg/24hr.....</i>	<i>123</i>	<i>etodolac tab 500 mg.....</i>	<i>10</i>
<i>estradiol td patch twice weekly 0.1 mg/24hr.....</i>	<i>123</i>	<i>etodolac tab er 24hr 400 mg</i>	<i>10</i>
<i>estradiol td patch weekly 0.025 mg/24hr.....</i>	<i>123</i>	<i>etodolac tab er 24hr 500 mg</i>	<i>10</i>
<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	<i>123</i>	<i>etodolac tab er 24hr 600 mg</i>	<i>10</i>
<i>estradiol td patch weekly 0.05 mg/24hr</i>	<i>123</i>	<i>etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr</i>	<i>103</i>
<i>estradiol td patch weekly 0.06 mg/24hr</i>	<i>123</i>	<i>etoposide cap 50 mg</i>	<i>76</i>
<i>estradiol td patch weekly 0.075 mg/24hr.....</i>	<i>123</i>	<i>EUCRISA OIN 2%</i>	<i>115</i>
<i>estradiol td patch weekly 0.1 mg/24hr</i>	<i>123</i>	<i>EURAX CRE 10%</i>	<i>115</i>
<i>estradiol vaginal cream 0.1 mg/gm.....</i>	<i>179</i>	<i>EURAX LOT 10%</i>	<i>115</i>
<i>estradiol vaginal tab 10 mcg</i>	<i>179</i>	<i>euthyrox tab 100mcg.....</i>	<i>171</i>
		<i>euthyrox tab 112mcg.....</i>	<i>171</i>
		<i>euthyrox tab 125mcg.....</i>	<i>171</i>
		<i>euthyrox tab 137mcg.....</i>	<i>171</i>
		<i>euthyrox tab 150mcg.....</i>	<i>171</i>
		<i>euthyrox tab 175mcg.....</i>	<i>171</i>
		<i>euthyrox tab 200mcg.....</i>	<i>171</i>
		<i>euthyrox tab 25mcg</i>	<i>171</i>
		<i>euthyrox tab 50mcg</i>	<i>171</i>
		<i>euthyrox tab 75mcg</i>	<i>171</i>
		<i>euthyrox tab 88mcg</i>	<i>171</i>
		<i>EVAMIST SPR 1.53MG.....</i>	<i>123</i>
		<i>everolimus tab 0.25 mg</i>	<i>140</i>
		<i>everolimus tab 0.5 mg</i>	<i>140</i>

<i>everolimus tab 0.75 mg</i>	140
<i>everolimus tab 2.5 mg</i>	72
<i>everolimus tab 5 mg</i>	72
<i>everolimus tab 7.5 mg</i>	72
EVISTA TAB 60MG	120
EVOTAZ TAB 300-150	84
EVOXAC CAP 30MG	143
EXELDERM CRE 1%	109
EXELDERM SOL 1%	109
EXELON DIS 13.3/24	156
EXELON DIS 4.6MG/24	156
EXELON DIS 9.5MG/24	156
<i>exemestane tab 25 mg</i>	70
EXFORGE TAB 10-160MG	65
EXFORGE TAB 10-320MG	65
EXFORGE TAB 5-160MG	65
EXFORGE TAB 5-320MG	65
EXJADE TAB 125MG	53
EXJADE TAB 250MG	53
EXJADE TAB 500MG	53
EZALLOR SPR CAP 10MG	58
EZALLOR SPR CAP 20MG	58
EZALLOR SPR CAP 40MG	58
EZALLOR SPR CAP 5MG	58
<i>ezetimibe-simvastatin tab 10-10 mg</i>	56
<i>ezetimibe-simvastatin tab 10-20 mg</i>	56
<i>ezetimibe-simvastatin tab 10-40 mg</i>	56
<i>ezetimibe-simvastatin tab 10-80 mg</i>	56
<i>ezetimibe tab 10 mg</i>	59
F	
<i>fa-8 cap 800mcg</i>	130
<i>fa-8 tab 0.8mg</i>	130
FALESSA KIT	99
<i>falmina tab</i>	99
<i>famciclovir tab 125 mg</i>	87
<i>famciclovir tab 250 mg</i>	87
<i>famciclovir tab 500 mg</i>	87
<i>famotidine for susp 40 mg/5ml</i>	175
<i>famotidine tab 20 mg</i>	175
<i>famotidine tab 40 mg</i>	175
FARESTON TAB 60MG	70
FARXIGA TAB 10MG	51
FARXIGA TAB 5MG	51
FARYDAK CAP 10MG	72
FARYDAK CAP 15MG	72
FARYDAK CAP 20MG	72
FASENRA PEN INJ 30MG/ML	31

<i>fayosim tab</i>	99
<i>febuxostat tab 40 mg</i>	128
<i>febuxostat tab 80 mg</i>	128
<i>felbamate susp 600 mg/5ml</i>	42
<i>felbamate tab 400 mg</i>	42
<i>felbamate tab 600 mg</i>	42
FELDENE CAP 10MG	10
FELDENE CAP 20MG	10
<i>felodipine tab er 24hr 10 mg</i>	91
<i>felodipine tab er 24hr 2.5 mg</i>	91
<i>felodipine tab er 24hr 5 mg</i>	91
FEMARA TAB 2.5MG	71
FEMHRT TAB 0.5-2.5	122
FEMRING MIS 0.05/24H	179
FEMRING MIS 0.1MG/24	179
<i>femynor tab 0.25-35</i>	99
<i>fenofibrate cap 150 mg</i>	57
<i>fenofibrate cap 50 mg</i>	57
<i>fenofibrate micronized cap 130 mg</i>	57
<i>fenofibrate micronized cap 134 mg</i>	57
<i>fenofibrate micronized cap 200 mg</i>	57
<i>fenofibrate micronized cap 43 mg</i>	57
<i>fenofibrate micronized cap 67 mg</i>	57
<i>fenofibrate tab 145 mg</i>	57
FENOFIBRATE TAB 160MG	58
<i>fenofibrate tab 160 mg</i>	58
<i>fenofibrate tab 48 mg</i>	57
<i>fenofibrate tab 54 mg</i>	57
<i>fenoprofen calcium tab 600 mg</i>	10
<i>fentanyl citrate lozenge on a handle</i> 1200 mcg	16
<i>fentanyl citrate lozenge on a handle</i> 1600 mcg	16
<i>fentanyl citrate lozenge on a handle</i> 200 mcg	15
<i>fentanyl citrate lozenge on a handle</i> 400 mcg	16
<i>fentanyl citrate lozenge on a handle</i> 600 mcg	16
<i>fentanyl citrate lozenge on a handle</i> 800 mcg	16
<i>fentanyl td patch 72hr 100 mcg/hr</i>	16
<i>fentanyl td patch 72hr 12 mcg/hr</i>	16
<i>fentanyl td patch 72hr 25 mcg/hr</i>	16
<i>fentanyl td patch 72hr 50 mcg/hr</i>	16
<i>fentanyl td patch 72hr 75 mcg/hr</i>	16
FENTORA TAB 100MCG	16

FENTORA TAB 200MCG	16	<i>fluocinolone acetonide (otic) oil 0.01%</i>	153
FENTORA TAB 400MCG	16	<i>fluocinolone acetonide cream 0.01%</i>	112
FENTORA TAB 600MCG	16	<i>fluocinolone acetonide cream 0.025%</i>	112
FENTORA TAB 800MCG	16	<i>fluocinolone acetonide oil 0.01% (body oil)</i>	112
FERRIPROX SOL 100MG/ML	53	<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>	113
FERRIPROX TAB 500MG	53	<i>fluocinolone acetonide oint 0.025%</i>	113
FETZIMA CAP 120MG	46	<i>fluocinolone acetonide soln 0.01%</i>	113
FETZIMA CAP 20MG	46	<i>fluocinonide cream 0.05%</i>	113
FETZIMA CAP 40MG	46	<i>fluocinonide emulsified base cream 0.05%</i>	113
FETZIMA CAP 80MG	46	<i>fluocinonide gel 0.05%</i>	113
FETZIMA CAP TITRATIO	46	<i>fluocinonide oint 0.05%</i>	113
<i>fexmid tab 7.5mg</i>	147	<i>fluocinonide soln 0.05%</i>	113
FIASP FLEX INJ TOUCH	51	FLUORABON DRO	138
FIASP INJ 100/ML	51	<i>fluoridex pst 1.1%</i>	142
FINACEA AER 15%	115	<i>fluoritab chw 0.25mg f</i>	138
FINACEA GEL 15%	115	<i>fluoritab chw 0.5mg f</i>	138
<i>finasteride tab 5 mg</i>	127	<i>fluoritab chw 1mg f</i>	138
FIRAZYR INJ 30MG/3ML	128	<i>fluoritab chw 2.2mg</i>	138
FIRDAPSE TAB 10MG	68	<i>fluoritab dro 0.125mg</i>	138
FIRST-OMEPRASUS 2MG/ML	176	<i>fluorometholone ophth susp 0.1%</i>	151
FIRVANQ SOL 25MG/ML	27	<i>fluorouracil cream 0.5%</i>	109
FIRVANQ SOL 50MG/ML	27	<i>fluorouracil cream 5%</i>	109
<i>flac oil 0.01%</i>	153	<i>fluorouracil soln 2%</i>	109
FLAGYL TAB 250MG	27	<i>fluorouracil soln 5%</i>	109
FLAGYL TAB 500MG	27	<i>fluoxetine hcl cap 10 mg</i>	44
FLAREX SUS 0.1% OP	151	<i>fluoxetine hcl cap 20 mg</i>	44
<i>flavoxate hcl tab 100 mg</i>	178	<i>fluoxetine hcl cap 40 mg</i>	44
<i>flecainide acetate tab 100 mg</i>	31	<i>fluoxetine hcl cap delayed release 90 mg</i>	44
<i>flecainide acetate tab 150 mg</i>	31	<i>fluoxetine hcl solution 20 mg/5ml</i>	44
<i>flecainide acetate tab 50 mg</i>	31	<i>fluoxetine hcl tab 60 mg</i>	44
FLOMAX CAP 0.4MG	127	<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	82
FLORIVA DRO PLUS	143	<i>fluphenazine hcl oral conc 5 mg/ml</i>	82
FLOVENT DISK AER 100MCG	32	<i>fluphenazine hcl tab 10 mg</i>	82
FLOVENT DISK AER 250MCG	32	<i>fluphenazine hcl tab 1 mg</i>	82
FLOVENT DISK AER 50MCG	32	<i>fluphenazine hcl tab 2.5 mg</i>	82
FLOVENT HFA AER 110MCG	32	<i>fluphenazine hcl tab 5 mg</i>	82
FLOVENT HFA AER 220MCG	32	<i>flura-drops dro 0.25mg f</i>	138
FLOVENT HFA AER 44MCG	32	<i>flurandrenolide cream 0.05%</i>	113
<i>fluconazole for susp 10 mg/ml</i>	55	<i>flurandrenolide lotion 0.05%</i>	113
<i>fluconazole for susp 40 mg/ml</i>	55	<i>flurandrenolide oint 0.05%</i>	113
<i>fluconazole tab 100 mg</i>	55		
<i>fluconazole tab 150 mg</i>	55		
<i>fluconazole tab 200 mg</i>	55		
<i>fluconazole tab 50 mg</i>	55		
<i>fludrocortisone acetate tab 0.1 mg</i>	105		
<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	148		

<i>flurazepam hcl cap 15 mg</i>	133
<i>flurazepam hcl cap 30 mg</i>	133
<i>flurbiprofen sodium ophth soln 0.03%</i>	152
<i>flurbiprofen tab 100 mg</i>	10
<i>flurbiprofen tab 50 mg</i>	10
<i>flutamide cap 125 mg</i>	71
<i>fluticasone propionate cream 0.05%</i>	113
<i>fluticasone propionate lotion 0.05%</i>	113
<i>fluticasone propionate oint 0.005%</i>	113
<i>fluticasone-salmeterol aer powder ba</i> <i>100-50 mcg/dose</i>	33
<i>fluticasone-salmeterol aer powder ba</i> <i>113-14 mcg/act</i>	33
<i>fluticasone-salmeterol aer powder ba</i> <i>232-14 mcg/act</i>	33
<i>fluticasone-salmeterol aer powder ba</i> <i>250-50 mcg/dose</i>	33
<i>fluticasone-salmeterol aer powder ba</i> <i>500-50 mcg/dose</i>	33
<i>fluticasone-salmeterol aer powder ba</i> <i>55-14 mcg/act</i>	33
<i>fluvastatin sodium cap 20 mg (base</i> <i>equivalent)</i>	58
<i>fluvastatin sodium cap 40 mg (base</i> <i>equivalent)</i>	58
<i>fluvastatin sodium tab er 24 hr 80 mg</i> <i>(base equivalent)</i>	58
<i>fluvoxamine maleate cap er 24hr 100</i> <i>mg</i>	44
<i>fluvoxamine maleate cap er 24hr 150</i> <i>mg</i>	44
<i>fluvoxamine maleate tab 100 mg</i>	44
<i>fluvoxamine maleate tab 25 mg</i>	44
<i>fluvoxamine maleate tab 50 mg</i>	44
<i>FML FORTE SUS 0.25% OP</i>	151
<i>FML OIN 0.1% OP</i>	151
<i>FOCALIN TAB 10MG</i>	5
<i>FOCALIN TAB 2.5MG</i>	5
<i>FOCALIN TAB 5MG</i>	5
<i>FOCALIN XR CAP 10MG</i>	5
<i>FOCALIN XR CAP 15MG</i>	5
<i>FOCALIN XR CAP 20MG</i>	5
<i>FOCALIN XR CAP 25MG</i>	5
<i>FOCALIN XR CAP 30MG</i>	5
<i>FOCALIN XR CAP 35MG</i>	5

<i>FOCALIN XR CAP 40MG</i>	5
<i>FOCALIN XR CAP 5MG</i>	5
<i>folate tab 400mcg</i>	130
<i>FOLET DHA PAK</i>	144
<i>FOLET ONE CAP 38-1-225</i>	144
<i>folic acid cap 0.8 mg</i>	130
<i>folic acid tab 1 mg</i>	130
<i>folic acid tab 400 mcg</i>	130
<i>folic acid tab 800mcg</i>	130
<i>FOLIVANE-OB CAP</i>	144
<i>FOLLISTIM AQ INJ 300UNIT</i>	119
<i>FOLLISTIM AQ INJ 600UNIT</i>	119
<i>FOLLISTIM AQ INJ 900UNIT</i>	119
<i>fondaparinux sodium subcutaneous inj</i> <i>10 mg/0.8ml</i>	36
<i>fondaparinux sodium subcutaneous inj</i> <i>2.5 mg/0.5ml</i>	36
<i>fondaparinux sodium subcutaneous inj</i> <i>5 mg/0.4ml</i>	36
<i>fondaparinux sodium subcutaneous inj</i> <i>7.5 mg/0.6ml</i>	36
<i>FORTAMET TAB 1000MG</i>	50
<i>FORTAMET TAB 500MG</i>	49
<i>FORTEO SOL 600/2.4</i>	118
<i>FORTESTA GEL 10MG/ACT</i>	25
<i>FOSAMAX + D TAB 70-2800</i>	118
<i>FOSAMAX + D TAB 70-5600</i>	118
<i>FOSAMAX TAB 70MG</i>	118
<i>fosamprenavir calcium tab 700 mg</i> <i>(base equiv)</i>	84
<i>fosinopril sodium & hydrochlorothiazide</i> <i>tab 10-12.5 mg</i>	65
<i>fosinopril sodium & hydrochlorothiazide</i> <i>tab 20-12.5 mg</i>	65
<i>fosinopril sodium tab 10 mg</i>	60
<i>fosinopril sodium tab 20 mg</i>	60
<i>fosinopril sodium tab 40 mg</i>	60
<i>FOSRENOL CHW 1000MG</i>	126
<i>FOSRENOL CHW 500MG</i>	126
<i>FOSRENOL CHW 750MG</i>	126
<i>FOSRENOL POW 1000MG</i>	126
<i>FOSRENOL POW 750MG</i>	126
<i>FRAGMIN INJ 10000/ML</i>	36
<i>FRAGMIN INJ 12500UNT</i>	36
<i>FRAGMIN INJ 15000UNT</i>	36
<i>FRAGMIN INJ 18000UNT</i>	36
<i>FRAGMIN INJ 2500/0.2</i>	36

FRAGMIN INJ 5000/0.2	36
FRAGMIN INJ 7500/0.3	36
FRAGMIN INJ 95000UNT	36
<i>frovatriptan succinate tab 2.5 mg (base equivalent)</i>	136
FULPHILA INJ 6/0.6ML	130
<i>furosemide inj 10 mg/ml</i>	117
<i>furosemide oral soln 10 mg/ml</i>	117
<i>furosemide oral soln 8 mg/ml</i>	117
<i>furosemide tab 20 mg</i>	117
<i>furosemide tab 40 mg</i>	117
<i>furosemide tab 80 mg</i>	117
FUZEON INJ 90MG	84
<i>fyavolv tab 0.5-2.5</i>	122
<i>fyavolv tab 1-5</i>	122
FYCOMPA SUS 0.5MG/ML	37
FYCOMPA TAB 10MG	37
FYCOMPA TAB 12MG	37
FYCOMPA TAB 2MG	37
FYCOMPA TAB 4MG	37
FYCOMPA TAB 6MG	37
FYCOMPA TAB 8MG	37
G	
<i>gabapentin cap 100 mg</i>	38
<i>gabapentin cap 300 mg</i>	38
<i>gabapentin cap 400 mg</i>	38
<i>gabapentin oral soln 250 mg/5ml</i>	38
<i>gabapentin tab 600 mg</i>	38
<i>gabapentin tab 800 mg</i>	38
GABITRIL TAB 12MG	42
GABITRIL TAB 16MG	42
GABITRIL TAB 2MG	42
GABITRIL TAB 4MG	42
GALAFOLD CAP 123MG	120
<i>galantamine hydrobromide cap er 24hr 16 mg</i>	156
<i>galantamine hydrobromide cap er 24hr 24 mg</i>	156
<i>galantamine hydrobromide cap er 24hr 8 mg</i>	156
<i>galantamine hydrobromide oral soln 4 mg/ml</i>	156
<i>galantamine hydrobromide tab 12 mg</i>	156
<i>galantamine hydrobromide tab 4 mg</i>	156

<i>galantamine hydrobromide tab 8 mg</i>	156
GALZIN CAP 25MG	139
GALZIN CAP 50MG	139
<i>ganirelix acetate soln prefilled syringe 250 mcg/0.5ml</i>	119
GANIRELIX AC INJ 250/0.5	119
GASTROCROM CON 100/5ML	125
<i>gatifloxacin ophth soln 0.5%</i>	150
GATTEX KIT 5MG	127
<i>gavilyte-c sol</i>	134
<i>gavilyte-g sol</i>	134
<i>gavilyte-n sol flav pk</i>	134
GELNIQUE GEL 10%	178
<i>gemfibrozil tab 600 mg</i>	58
GENERESS FE CHW	99
<i>generlac sol 10gm/15</i>	126
<i>gengraf cap 100mg</i>	141
<i>gengraf cap 25mg</i>	140
<i>gengraf sol 100mg/ml</i>	141
<i>gentak oin 0.3% op</i>	150
<i>gentamicin sulfate inj 10 mg/ml</i>	7
<i>gentamicin sulfate inj 40 mg/ml</i>	7
<i>gentamicin sulfate oint 0.1%</i>	108
<i>gentamicin sulfate ophth soln 0.3%</i>	150
GENVOYA TAB	84
GEODON CAP 40MG	79
GEODON INJ 20MG	79
<i>gianvi tab 3-0.02mg</i>	99
GILENYA CAP 0.5MG	158
GILOTRIF TAB 20MG	72
GILOTRIF TAB 30MG	72
GILOTRIF TAB 40MG	72
GIVLAARI INJ 189MG/ML	128
<i>glatiramer acetate soln prefilled syringe 20 mg/ml</i>	158
<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	158
<i>glatopa inj 20mg/ml</i>	158
<i>glatopa inj 40mg/ml</i>	158
GLEEVEC TAB 100MG	72
GLEEVEC TAB 400MG	72
GLEOSTINE CAP 100MG	69
GLEOSTINE CAP 10MG	69
GLEOSTINE CAP 40MG	69
<i>glimepiride tab 1 mg</i>	52
<i>glimepiride tab 2 mg</i>	52

<i>glimepiride tab 4 mg</i>	52	GLYNASE TAB 6MG.....	52
<i>glipizide-metformin hcl tab 2.5-250 mg</i>	49	GLYSET TAB 100MG	48
<i>glipizide-metformin hcl tab 2.5-500 mg</i>	49	GLYSET TAB 25MG	48
<i>glipizide-metformin hcl tab 5-500 mg</i>	49	GLYSET TAB 50MG	48
<i>glipizide tab 10 mg</i>	52	GLYXAMBI TAB 10-5 MG	49
<i>glipizide tab 5 mg</i>	52	GLYXAMBI TAB 25-5 MG	49
<i>glipizide tab er 24hr 10 mg</i>	52	<i>gnp aspirin chw 81mg</i>	13
<i>glipizide tab er 24hr 2.5 mg</i>	52	<i>gnp aspirin tab 81mg ec</i>	13
<i>glipizide tab er 24hr 5 mg</i>	52	<i>gnp nicotine dis 14mg/24h</i>	162
<i>glipizide xl tab 10mg</i>	52	<i>gnp nicotine dis 7mg/24hr</i>	162
<i>glipizide xl tab 2.5mg</i>	52	<i>gnp nicotine gum 2mg mint</i>	162
<i>glipizide xl tab 5mg</i>	52	<i>gnp nicotine gum 2mg orig</i>	162
GLOPERBA SOL 0.6/5ML.....	128	<i>gnp nicotine gum 4mg mint</i>	162
GLUCAGEN INJ HYPOKIT	50	<i>gnp nicotine gum 4mg orig</i>	162
GLUCAGON EMR SOL 1MG.....	50	<i>gnp nicotine loz 2mg mint</i>	162
GLUCAGON KIT 1MG	50	<i>gnp nicotine loz 4mg mint</i>	162
GLUCOPHAGE TAB 1000MG	50	<i>gnp nicotine loz mini 2mg</i>	162
GLUCOPHAGE TAB 500MG.....	50	GOLYTELY SOL.....	134
GLUCOPHAGE TAB 500MG XR.....	50	GOLYTELY SOL PINEAPPL	134
GLUCOPHAGE TAB 750MG XR.....	50	GONAL-F INJ 1050UNIT	119
GLUCOPHAGE TAB 850MG.....	50	GONAL-F INJ 450UNIT	119
GLUCOTROL TAB 10MG.....	52	GONAL-F RFF INJ 300/0.5	119
GLUCOTROL TAB 5MG	52	GONAL-F RFF INJ 450/0.75.....	119
GLUCOTROL XL TAB 10MG	52	GONAL-F RFF INJ 75UNIT	119
GLUCOTROL XL TAB 2.5MG	52	GONAL-F RFF INJ 900/1.5	119
GLUCOTROL XL TAB 5MG	52	GRALISE STAR MIS 300/600.....	159
GLUMETZA TAB 1000MG	50	GRALISE TAB 300MG	159
GLUMETZA TAB 500MG.....	50	GRALISE TAB 600MG	159
<i>glyburide-metformin tab 1.25-250 mg</i>	49	<i>granisetron hcl tab 1 mg</i>	53
<i>glyburide-metformin tab 2.5-500 mg</i>	49	GRASTEK SUB 2800BAU	7
<i>glyburide-metformin tab 5-500 mg</i> ...	49	<i>griseofulvin microsize susp 125 mg/5ml</i>	55
<i>glyburide micronized tab 1.5 mg</i>	52	<i>griseofulvin microsize tab 500 mg</i>	55
<i>glyburide micronized tab 3 mg</i>	52	<i>griseofulvin ultramicrosize tab 125 mg</i>	55
<i>glyburide micronized tab 6 mg</i>	52	<i>griseofulvin ultramicrosize tab 250 mg</i>	55
<i>glyburide tab 1.25 mg</i>	52	<i>guanfacine hcl tab 1 mg</i>	62
<i>glyburide tab 2.5 mg</i>	52	<i>guanfacine hcl tab 2 mg</i>	62
<i>glyburide tab 5 mg</i>	52	<i>guanfacine hcl tab er 24hr 1 mg (base</i> <i>equiv)</i>	3
GLYCATE TAB 1.5MG	174	<i>guanfacine hcl tab er 24hr 2 mg (base</i> <i>equiv)</i>	3
GLYCOPYRROLA TAB 1.5MG.....	174	<i>guanfacine hcl tab er 24hr 3 mg (base</i> <i>equiv)</i>	4
<i>glycopyrrolate tab 1 mg</i>	174	<i>guanfacine hcl tab er 24hr 4 mg (base</i> <i>equiv)</i>	4
<i>glycopyrrolate tab 2 mg</i>	174		
<i>glydo gel 2%</i>	115		
GLYNASE TAB 1.5MG.....	52		
GLYNASE TAB 3MG.....	52		

GUANIDINE TAB 125MG.....	68	<i>hm nicotine loz 4mg mint</i>	163
GYNAZOLE-1 CRE 2%	179	HORIZANT TAB 300MG ER	159
GYNOL II GEL 3%	179	HORIZANT TAB 600MG ER	159
H		HUMIRA INJ 10/0.1ML	8
HAEGARDA INJ 2000UNIT	128	HUMIRA INJ 10MG/0.2	8
HAEGARDA INJ 3000UNIT	128	HUMIRA INJ 20/0.2ML	8
<i>hailey 24 tab fe</i>	99	HUMIRA INJ 40/0.4ML	8
HALCION TAB 0.25MG.....	133	HUMIRA KIT 20MG/0.4	8
<i>halobetasol propionate cream 0.05%</i>		HUMIRA KIT 40MG/0.8	8
.....	113	HUMIRA PEDIA INJ CROHNS.....	8
<i>halobetasol propionate oint 0.05%</i> .	113	HUMIRA PEN INJ 40/0.4ML.....	8
<i>haloperidol decanoate im soln 100</i>		HUMIRA PEN INJ 40MG/0.8	8
<i>mg/ml</i>	80	HUMIRA PEN INJ CD/UC/HS	8
<i>haloperidol decanoate im soln 50</i>		HUMIRA PEN INJ PS/UV	8
<i>mg/ml</i>	80	HUMIRA PEN KIT CD/UC/HS	9
<i>haloperidol lactate inj 5 mg/ml</i>	80	HUMIRA PEN KIT PS/UV	9
<i>haloperidol lactate oral conc 2 mg/ml</i>	80	HUMULIN R INJ U-500	51
<i>haloperidol tab 0.5 mg</i>	80	HYCAMTIN CAP 0.25MG	76
<i>haloperidol tab 10 mg</i>	80	HYCAMTIN CAP 1MG.....	76
<i>haloperidol tab 1 mg</i>	80	<i>hydralazine hcl tab 100 mg</i>	68
<i>haloperidol tab 20 mg</i>	80	<i>hydralazine hcl tab 10 mg</i>	67
<i>haloperidol tab 2 mg</i>	80	<i>hydralazine hcl tab 25 mg</i>	67
<i>haloperidol tab 5 mg</i>	80	<i>hydralazine hcl tab 50 mg</i>	68
HARVONI TAB 90-400MG	87	HYDREA CAP 500MG.....	75
<i>heather tab 0.35mg</i>	103	HYDRO/ACETA SOL 10-325MG	22
HEMANGEOL SOL 4.28/ML.....	89	HYDRO 40 AER FOAM.....	114
HEPAGAM B INJ	154	<i>hydrochlorothiazide cap 12.5 mg</i>	118
<i>heparin sodium (porcine) inj 10000</i>		<i>hydrochlorothiazide tab 12.5 mg</i>	118
<i>unit/ml</i>	36	<i>hydrochlorothiazide tab 25 mg</i>	118
<i>heparin sodium (porcine) inj 1000</i>		<i>hydrochlorothiazide tab 50 mg</i>	118
<i>unit/ml</i>	36	<i>hydrocodone-acetaminophen soln 7.5-</i>	
<i>heparin sodium (porcine) inj 20000</i>		<i>325 mg/15ml</i>	22
<i>unit/ml</i>	36	<i>hydrocodone-acetaminophen tab 10-</i>	
<i>heparin sodium (porcine) inj 5000</i>		<i>300 mg</i>	22
<i>unit/ml</i>	36	<i>hydrocodone-acetaminophen tab 10-</i>	
<i>heparin sodium (porcine) pf inj 5000</i>		<i>325 mg</i>	22
<i>unit/0.5ml</i>	36	<i>hydrocodone-acetaminophen tab 5-300</i>	
HEPSERA TAB 10MG	87	<i>mg</i>	22
HETLIOZ CAP 20MG.....	134	<i>hydrocodone-acetaminophen tab 5-325</i>	
HIPREX TAB 1GM	177	<i>mg</i>	22
<i>hm aspirin chw 81mg</i>	13	<i>hydrocodone-acetaminophen tab 7.5-</i>	
<i>hm nicotine dis 14mg/24h</i>	162	<i>300 mg</i>	22
<i>hm nicotine dis 21mg/24h</i>	162	<i>hydrocodone-acetaminophen tab 7.5-</i>	
<i>hm nicotine dis 7mg/24hr</i>	162	<i>325 mg</i>	22
<i>hm nicotine gum 2mg mint</i>	163	<i>hydrocodone bitartrate cap er 12hr</i>	
<i>hm nicotine gum 4mg mint</i>	163	<i>abuse-deterrent 10 mg</i>	16
<i>hm nicotine loz 2mg mint</i>	163		

<i>hydrocodone bitartrate cap er 12hr</i>	
<i>abuse-deterrent 15 mg</i>	16
<i>hydrocodone bitartrate cap er 12hr</i>	
<i>abuse-deterrent 20 mg</i>	16
<i>hydrocodone bitartrate cap er 12hr</i>	
<i>abuse-deterrent 30 mg</i>	16
<i>hydrocodone bitartrate cap er 12hr</i>	
<i>abuse-deterrent 40 mg</i>	16
<i>hydrocodone bitartrate cap er 12hr</i>	
<i>abuse-deterrent 50 mg</i>	16
<i>hydrocodone-ibuprofen tab 10-200 mg</i>	
.....	22
<i>hydrocodone-ibuprofen tab 5-200 mg</i>	
.....	22
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>	
.....	22
<i>hydrocodone w/ homatropine syrup 5-1.5 mg/5ml</i>	106
<i>hydrocodone w/ homatropine tab 5-1.5 mg</i>	106
<i>hydrocod polst-chlorphen polst er susp 10-8 mg/5ml</i>	106
<i>hydrocortisone acetate w/ pramoxine perianal cream 1-1%</i>	26
<i>hydrocortisone butyrate cream 0.1%</i>	113
<i>hydrocortisone butyrate lotion 0.1%</i>	113
<i>hydrocortisone butyrate oint 0.1%</i>	113
<i>hydrocortisone butyrate soln 0.1%</i>	113
<i>hydrocortisone cream 2.5%</i>	113
<i>hydrocortisone enema 100 mg/60ml</i>	26
<i>hydrocortisone lotion 2.5%</i>	113
<i>hydrocortisone oint 2.5%</i>	113
<i>hydrocortisone perianal cream 2.5%</i>	26
<i>hydrocortisone tab 10 mg</i>	104
<i>hydrocortisone tab 20 mg</i>	104
<i>hydrocortisone tab 5 mg</i>	104
<i>hydrocortisone valerate cream 0.2%</i>	113
<i>hydrocortisone valerate oint 0.2%</i>	113
<i>hydrocortisone w/ acetic acid otic soln 1-2%</i>	153
<i>hydromet syp 5-1.5/5</i>	106
<i>hydromorphone hcl liqd 1 mg/ml</i>	16
<i>hydromorphone hcl tab 2 mg</i>	16
<i>hydromorphone hcl tab 4 mg</i>	17

<i>hydromorphone hcl tab 8 mg</i>	17
<i>HYDROMORPHON SUP 3MG</i>	16
<i>hydroxychloroquine sulfate tab 200 mg</i>	68
<i>hydroxyprogesterone caproate im in oil 1.25 gm/5ml</i>	71
<i>hydroxyurea cap 500 mg</i>	75
<i>hydroxyzine hcl syrup 10 mg/5ml</i>	29
<i>hydroxyzine hcl tab 10 mg</i>	29
<i>hydroxyzine hcl tab 25 mg</i>	29
<i>hydroxyzine hcl tab 50 mg</i>	29
<i>hydroxyzine pamoate cap 100 mg</i>	29
<i>hydroxyzine pamoate cap 25 mg</i>	29
<i>hydroxyzine pamoate cap 50 mg</i>	29
<i>hyoscyamine sulfate elixir 0.125 mg/5ml</i>	174
<i>hyoscyamine sulfate sl tab 0.125 mg</i>	174
<i>hyoscyamine sulfate tab 0.125 mg</i>	174
<i>hyoscyamine sulfate tab disint 0.125 mg</i>	174
<i>hyoscyamine sulfate tab er 12hr 0.375 mg</i>	174
<i>HYPERHEP B INJ S/D</i>	154
<i>HYPERSAL NEB 3.5%</i>	106
<i>HYSINGLA ER TAB 100 MG</i>	17
<i>HYSINGLA ER TAB 120 MG</i>	17
<i>HYSINGLA ER TAB 20 MG</i>	17
<i>HYSINGLA ER TAB 30 MG</i>	17
<i>HYSINGLA ER TAB 40 MG</i>	17
<i>HYSINGLA ER TAB 60 MG</i>	17
<i>HYSINGLA ER TAB 80 MG</i>	17
<i>HYZAAR TAB 100-12.5</i>	65
<i>HYZAAR TAB 100-25</i>	65
<i>HYZAAR TAB 50-12.5</i>	65
I	
<i>ibandronate sodium tab 150 mg (base equivalent)</i>	118
<i>IBRANCE CAP 100MG</i>	72
<i>IBRANCE CAP 125MG</i>	72
<i>IBRANCE CAP 75MG</i>	72
<i>IBRANCE TAB 100MG</i>	73
<i>IBRANCE TAB 125MG</i>	73
<i>IBRANCE TAB 75MG</i>	72
<i>ibuprofen tab 400 mg</i>	11
<i>ibuprofen tab 600 mg</i>	11
<i>ibuprofen tab 800 mg</i>	11

<i>ibu tab 400mg</i>	10	INLYTA TAB 5MG.....	73
<i>ibu tab 600mg</i>	11	INTELENCE TAB 100MG	84
<i>ibu tab 800mg</i>	11	INTELENCE TAB 200MG	84
ICLUSIG TAB 15MG	73	INTELENCE TAB 25MG	84
ICLUSIG TAB 45MG	73	INTERMEZZO SUB 1.75MG	133
IDHIFA TAB 100MG	73	INTERMEZZO SUB 3.5MG	133
IDHIFA TAB 50MG	73	INTRAROSA SUP 6.5MG	179
ILEVRO DRO 0.3% OP.....	152	INTRON A INJ 10MU	75
<i>imatinib mesylate tab 100 mg (base</i> <i>equivalent)</i>	73	INTRON A INJ 18MU	75
<i>imatinib mesylate tab 400 mg (base</i> <i>equivalent)</i>	73	INTRON A INJ 25MU	75
IMBRUVICA CAP 140MG	73	INTRON A INJ 50MU	75
IMBRUVICA CAP 70MG	73	<i>introvale tab</i>	99
IMBRUVICA TAB 140MG	73	INTUNIV TAB 1MG	4
IMBRUVICA TAB 280MG	73	INTUNIV TAB 2MG	4
IMBRUVICA TAB 420MG	73	INTUNIV TAB 3MG	4
IMBRUVICA TAB 560MG	73	INTUNIV TAB 4MG	4
<i>imipramine hcl tab 10 mg</i>	48	INVEGA TAB 1.5MG	79
<i>imipramine hcl tab 25 mg</i>	48	INVEGA TAB 3MG	79
<i>imipramine hcl tab 50 mg</i>	48	INVEGA TAB 6MG	80
<i>imipramine pamoate cap 100 mg</i>	48	INVEGA TAB 9MG	80
<i>imipramine pamoate cap 125 mg</i>	48	INVELTYS SUS 1%	151
<i>imipramine pamoate cap 150 mg</i>	48	INVIRASE TAB 500MG	84
<i>imipramine pamoate cap 75 mg</i>	48	IOPIDINE SOL 1% OP	150
<i>imiquimod cream 5%</i>	114	<i>ipratropium-albuterol nebu soln 0.5-</i> <i>2.5(3) mg/3ml</i>	33
IMITREX INJ 4MG/0.5	136	<i>ipratropium bromide inhal soln 0.02%</i>	32
IMITREX INJ 6MG/0.5	136	<i>ipratropium bromide nasal soln 0.03%</i> <i>(21 mcg/spray)</i>	148
IMITREX SPR 20MG/ACT	136	<i>ipratropium bromide nasal soln 0.06%</i> <i>(42 mcg/spray)</i>	148
IMITREX SPR 5MG/ACT	136	<i>irbesartan-hydrochlorothiazide tab</i> <i>150-12.5 mg</i>	65
IMITREX TAB 100MG	136	<i>irbesartan-hydrochlorothiazide tab</i> <i>300-12.5 mg</i>	65
IMITREX TAB 25MG	136	<i>irbesartan tab 150 mg</i>	62
IMITREX TAB 50MG	136	<i>irbesartan tab 300 mg</i>	62
IMURAN TAB 50MG	141	<i>irbesartan tab 75 mg</i>	62
<i>inatal gt tab</i>	144	IRESSA TAB 250MG.....	73
INBRIJA CAP 42MG	77	ISENTRESS CHW 100MG	84
<i>incassia tab 0.35mg</i>	103	ISENTRESS CHW 25MG	84
INCRUSE ELPT INH 62.5MCG	31	ISENTRESS HD TAB 600MG	84
<i>indapamide tab 1.25 mg</i>	118	ISENTRESS POW 100MG	84
<i>indapamide tab 2.5 mg</i>	118	ISENTRESS TAB 400MG	84
<i>indomethacin cap 25 mg</i>	11	<i>isibloom tab</i>	100
<i>indomethacin cap 50 mg</i>	11	<i>isoniazid inj 100 mg/ml</i>	68
<i>indomethacin cap er 75 mg</i>	11	<i>isoniazid syrup 50 mg/5ml</i>	68
INGREZZA CAP 40-80MG	158		
INGREZZA CAP 40MG	158		
INGREZZA CAP 80MG	158		
INLYTA TAB 1MG.....	73		

<i>isoniazid tab 100 mg</i>	68
<i>isoniazid tab 300 mg</i>	68
<i>isoproterenol hcl inj 0.2 mg/ml</i>	33
ISOPTO ATROP SOL 1% OP	149
ISOPTO CARP SOL 1% OP	149
ISOPTO CARP SOL 2% OP	149
ISOPTO CARP SOL 4% OP	149
ISORDIL TAB 40MG	28
ISORDIL TAB 5MG	28
<i>isosorbide dinitrate tab 10 mg</i>	28
<i>isosorbide dinitrate tab 20 mg</i>	28
<i>isosorbide dinitrate tab 30 mg</i>	28
<i>isosorbide dinitrate tab 40 mg</i>	28
<i>isosorbide dinitrate tab 5 mg</i>	28
<i>isosorbide mononitrate tab 20 mg</i> ...	28
<i>isosorbide mononitrate tab er 24hr 120</i> <i>mg</i>	28
<i>isosorbide mononitrate tab er 24hr 30</i> <i>mg</i>	28
<i>isosorbide mononitrate tab er 24hr 60</i> <i>mg</i>	28
<i>isotretinoin cap 10 mg</i>	107
<i>isotretinoin cap 20 mg</i>	107
<i>isotretinoin cap 30 mg</i>	107
<i>isotretinoin cap 40 mg</i>	107
<i>isradipine cap 2.5 mg</i>	91
<i>isradipine cap 5 mg</i>	91
ISTALOL SOL 0.5% OP	149
<i>itraconazole cap 100 mg</i>	55
<i>itraconazole oral soln 10 mg/ml</i>	55
<i>ivermectin tab 3 mg</i>	26
J	
JADENU SPRKL GRA 180MG	53
JADENU SPRKL GRA 360MG	53
JADENU SPRKL GRA 90MG	53
JADENU TAB 180MG	53
JADENU TAB 360MG	53
JADENU TAB 90MG	53
JAKAFI TAB 10MG	73
JAKAFI TAB 15MG	73
JAKAFI TAB 20MG	73
JAKAFI TAB 25MG	73
JAKAFI TAB 5MG	73
JALYN CAP	127
<i>jantoven tab 10mg</i>	35
<i>jantoven tab 1mg</i>	35
<i>jantoven tab 2.5mg</i>	35

<i>jantoven tab 2mg</i>	35
<i>jantoven tab 3mg</i>	35
<i>jantoven tab 4mg</i>	35
<i>jantoven tab 5mg</i>	35
<i>jantoven tab 6mg</i>	35
<i>jantoven tab 7.5mg</i>	35
JANUMET TAB 50-1000	49
JANUMET TAB 50-500MG	49
JANUMET XR TAB 100-1000	49
JANUMET XR TAB 50-1000	49
JANUMET XR TAB 50-500MG	49
JANUVIA TAB 100MG	50
JANUVIA TAB 25MG	50
JANUVIA TAB 50MG	50
JARDIANCE TAB 10MG	52
JARDIANCE TAB 25MG	52
<i>jasmiel tab 3-0.02mg</i>	100
JATENZO CAP 158MG	25
JATENZO CAP 198MG	25
JATENZO CAP 237MG	25
<i>jencycla tab 0.35mg</i>	103
<i>jinteli tab 1mg-5mcg</i>	122
<i>jolessa tab</i>	100
JORNAY PM CAP 100MG ER	5
JORNAY PM CAP 20MG ER	5
JORNAY PM CAP 40MG ER	5
JORNAY PM CAP 60MG ER	5
JORNAY PM CAP 80MG ER	5
JUBLIA SOL 10%	109
<i>juleber tab</i>	100
JULUCA TAB 50-25MG	84
<i>junel 1/20 tab</i>	100
<i>junel 1.5/30 tab</i>	100
<i>junel fe 24 tab 1/20</i>	100
<i>junel fe tab 1/20</i>	100
<i>junel fe tab 1.5/30</i>	100
JYNARQUE PAK 45-15MG	122
JYNARQUE PAK 60-30MG	122
JYNARQUE PAK 90-30MG	122
JYNARQUE TAB 15MG	122
JYNARQUE TAB 30MG	122
K	
KADIAN CAP 10MG ER	17
KADIAN CAP 200MG ER	17
KADIAN CAP 30MG ER	17
KADIAN CAP 40MG ER	17
KADIAN CAP 50MG ER	17

<i>kaitlib fe chw</i>	100	KLONOPIN TAB 0.5MG	37
KALETRA SOL	84	KLONOPIN TAB 1MG	37
KALETRA TAB 100-25MG	84	KLONOPIN TAB 2MG	37
KALETRA TAB 200-50MG	84	<i>klor-con 10 tab 10meq er</i>	139
KALYDECO PAK 50MG	168	<i>klor-con 8 tab 8meq er</i>	139
KALYDECO PAK 75MG	168	<i>klor-con m10 tab 10meq er</i>	139
KALYDECO TAB 150MG	168	<i>klor-con m15 tab 15meq er</i>	139
KAPVAY TAB 0.1 MG	4	<i>klor-con m20 tab 20meq er</i>	139
<i>kariva tab 28 day</i>	100	<i>klor-con pak 20meq</i>	139
KATERZIA SUS 1MG/ML	91	<i>klor-con spr cap 10meq</i>	139
KEFLEX CAP 250MG	97	<i>klor-con spr cap 8meq</i>	139
KEFLEX CAP 500MG	97	<i>kls aspirin tab 81mg ec</i>	13
KEFLEX CAP 750MG	97	<i>kls quit2 gum 2mg</i>	163
<i>kelnor 1/50 tab</i>	100	<i>kls quit2 loz 2mg</i>	163
<i>kelnor tab 1/35</i>	100	<i>kls quit4 gum 4mg</i>	163
KEPPRA SOL 100MG/ML	38	<i>kls quit4 loz 4mg</i>	163
KEPPRA TAB 1000MG	38	KORLYM TAB 300MG	50
KEPPRA TAB 250MG	38	KOSHR PRENAT TAB 30-1MG	144
KEPPRA TAB 500MG	38	<i>kp aspirin tab 81mg ec</i>	13
KEPPRA TAB 750MG	38	K-PHOS TAB	139
KEPPRA XR TAB 500MG	38	K-PHOS TAB NO 2	127
KEPPRA XR TAB 750MG	38	K-TAB TAB 20MEQ	139
KERALAC CRE 47%	114	K-TAB TAB 8MEQ CR	139
KERYDIN SOL 5%	109	<i>kurvelo tab 0.15/30</i>	100
<i>ketoconazole cream 2%</i>	109	L	
<i>ketoconazole shampoo 2%</i>	109	<i>labetalol hcl tab 100 mg</i>	88
<i>ketoconazole tab 200 mg</i>	55	<i>labetalol hcl tab 200 mg</i>	88
<i>ketoprofen cap er 24hr 200 mg</i>	11	<i>labetalol hcl tab 300 mg</i>	88
<i>ketorolac tromethamine inj 30 mg/ml</i>	11	LACRISERT MIS 5MG OP	148
<i>ketorolac tromethamine ophth soln</i> 0.4%	152	<i>lactulose (encephalopathy) solution 10</i> <i>gm/15ml</i>	126
<i>ketorolac tromethamine ophth soln</i> 0.5%	152	<i>lactulose solution 10 gm/15ml</i>	134
<i>ketorolac tromethamine tab 10 mg</i>	11	LAMICTAL CHW 25MG	39
KHEDEZLA TAB 100MG ER	46	LAMICTAL CHW 5MG	38
KHEDEZLA TAB 50MG ER	46	LAMICTAL KIT START 35	39
KINERET INJ	10	LAMICTAL KIT START 49	39
<i>kionex sus 15gm/60</i>	142	LAMICTAL KIT START 98	39
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KISQALI 400 PAK FEMARA	71	LAMICTAL ODT TAB 100MG	39
KISQALI 600 PAK FEMARA	71	LAMICTAL ODT TAB 200MG	39
KISQALI TAB 200DOSE	73	LAMICTAL ODT TAB 25MG	39
KISQALI TAB 400DOSE	73	LAMICTAL ODT TAB 50MG	39
KISQALI TAB 600DOSE	73	LAMICTAL TAB 100MG	39
KITABIS PAK NEB 300/5ML	7	LAMICTAL TAB 150MG	39
KLARON LOT 10%	107	LAMICTAL TAB 200MG	39
		LAMICTAL TAB 25MG	39
		LAMICTAL XR KIT	39

LAMICTAL XR TAB 100MG	39	<i>lansoprazole tab delayed release orally disintegrating 15 mg</i>	176
LAMICTAL XR TAB 200MG	39	<i>lansoprazole tab delayed release orally disintegrating 30 mg</i>	176
LAMICTAL XR TAB 250MG	39	<i>lanthanum carbonate chew tab 1000 mg (elemental)</i>	126
LAMICTAL XR TAB 25MG	39	<i>lanthanum carbonate chew tab 500 mg (elemental).....</i>	126
LAMICTAL XR TAB 300MG	39	<i>lanthanum carbonate chew tab 750 mg (elemental).....</i>	126
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<i>lamivudine oral soln 10 mg/ml</i>	84	LANTUS SOLOS INJ 100/ML.....	51
<i>lamivudine tab 100 mg (hbv).....</i>	87	<i>larin 24 tab fe 1/20</i>	100
<i>lamivudine tab 150 mg</i>	84	<i>larin fe tab 1/20.....</i>	100
<i>lamivudine tab 300 mg</i>	85	<i>larin fe tab 1.5/30</i>	100
<i>lamivudine-zidovudine tab 150-300 mg</i>	85	<i>larin tab 1/20</i>	100
<i>lamotrigine orally disintegrating tab 100 mg</i>	39	<i>larin tab 1.5/30.....</i>	100
<i>lamotrigine orally disintegrating tab 200 mg</i>	39	<i>larissia tab</i>	100
<i>lamotrigine orally disintegrating tab 25 mg</i>	39	LASIX TAB 20MG.....	117
<i>lamotrigine orally disintegrating tab 50 mg</i>	39	LASIX TAB 40MG.....	117
<i>lamotrigine tab 100 mg.....</i>	39	LASIX TAB 80MG.....	117
<i>lamotrigine tab 150 mg.....</i>	39	LASTACFT SOL 0.25%.....	152
<i>lamotrigine tab 200 mg.....</i>	39	<i>latanoprost ophth soln 0.005%</i>	153
<i>lamotrigine tab 25 mg</i>	39	LATUDA TAB 120MG	79
<i>lamotrigine tab 25 mg (42) & 100 mg (7) starter kit.....</i>	39	LATUDA TAB 20MG.....	79
<i>lamotrigine tab 35 x 25 mg starter kit</i>	39	LATUDA TAB 40MG.....	79
<i>lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit</i>	39	LATUDA TAB 60MG.....	79
<i>lamotrigine tab chewable dispersible 25 mg</i>	39	LATUDA TAB 80MG.....	79
<i>lamotrigine tab chewable dispersible 5 mg</i>	39	<i>layolis fe chw.....</i>	100
<i>lamotrigine tab er 24hr 100 mg</i>	39	LAZANDA SPR 100MCG	17
<i>lamotrigine tab er 24hr 200 mg</i>	39	LAZANDA SPR 300MCG	17
<i>lamotrigine tab er 24hr 250 mg</i>	39	LAZANDA SPR 400MCG	17
<i>lamotrigine tab er 24hr 25 mg</i>	39	<i>leena tab.....</i>	100
<i>lamotrigine tab er 24hr 300 mg</i>	39	<i>leflunomide tab 10 mg</i>	12
<i>lamotrigine tab er 24hr 50 mg</i>	39	<i>leflunomide tab 20 mg</i>	12
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<i>lansoprazole cap delayed release 15 mg</i>	176	LENVIMA CAP 12MG	73
<i>lansoprazole cap delayed release 30 mg</i>	176	LENVIMA CAP 14 MG	73
LANSOPRAZOLE SUS 3MG/ML	176	LENVIMA CAP 18 MG	73
		LENVIMA CAP 20 MG	73
		LENVIMA CAP 24 MG	73
		LENVIMA CAP 4MG	73
		LENVIMA CAP 8 MG	73
		LESCOL XL TAB 80MG.....	58
		<i>lessina tab.....</i>	100
		LETAIRIS TAB 10MG	96
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<i>letrozole tab 2.5 mg</i>	71	<i>levonest tab</i>	100
<i>leucovorin calcium inj 100 mg/10ml</i> (10 mg/ml)	75	<i>levonor-eth est tab 0.15-</i> <i>0.02/0.025/0.03 mg &eth est 0.01</i> <i>mg</i>	100
<i>leucovorin calcium inj 500 mg/50ml</i> (10 mg/ml)	75	<i>levonorgestrel & ethinyl estradiol (91-</i> <i>day) tab 0.15-0.03 mg</i>	100
<i>leucovorin calcium tab 10 mg</i>	75	<i>levonorgestrel & ethinyl estradiol tab</i> <i>0.15 mg-30 mcg</i>	100
<i>leucovorin calcium tab 15 mg</i>	75	<i>levonorgestrel & ethinyl estradiol tab</i> <i>0.1 mg-20 mcg</i>	100
<i>leucovorin calcium tab 25 mg</i>	75	<i>levonorgestrel-eth estra tab 0.05-</i> <i>30/0.075-40/0.125-30mg-mcg....</i>	100
<i>leucovorin calcium tab 5 mg</i>	75	<i>levonorgestrel-ethinyl estradiol</i> (continuous) <i>tab 90-20 mcg</i>	100
<i>LEUKERAN TAB 2MG</i>	69	<i>levonorgestrel tab 1.5 mg</i>	103
<i>LEUKINE INJ 250MCG</i>	130	<i>levonorg-eth est tab 0.1-0.02mg(84) &</i> <i>eth est tab 0.01mg(7)</i>	100
<i>leuprolide acetate inj kit 5 mg/ml</i>	71	<i>levonorg-eth est tab 0.15-0.03mg(84)</i> & <i>eth est tab 0.01mg(7)</i>	100
<i>levalbuterol hcl soln nebu 0.31 mg/3ml</i> (base equiv)	34	<i>levora-28 tab 0.15/30</i>	100
<i>levalbuterol hcl soln nebu 0.63 mg/3ml</i> (base equiv)	34	<i>levothyroxine sodium tab 100 mcg</i> .	171
<i>levalbuterol hcl soln nebu 1.25 mg/3ml</i> (base equiv)	34	<i>levothyroxine sodium tab 112 mcg</i> .	171
<i>levalbuterol hcl soln nebu conc 1.25</i> <i>mg/0.5ml (base equiv)</i>	34	<i>levothyroxine sodium tab 125 mcg</i> .	171
<i>levalbuterol tartrate inhal aerosol 45</i> <i>mcg/act (base equiv)</i>	34	<i>levothyroxine sodium tab 137 mcg</i> .	171
<i>LEVAQUIN TAB 500MG</i>	124	<i>levothyroxine sodium tab 150 mcg</i> .	171
<i>LEVAQUIN TAB 750MG</i>	124	<i>levothyroxine sodium tab 175 mcg</i> .	171
<i>LEVBID TAB 0.375 ER</i>	174	<i>levothyroxine sodium tab 200 mcg</i> .	171
<i>LEVEMIR INJ</i>	51	<i>levothyroxine sodium tab 25 mcg</i> ...	171
<i>LEVEMIR INJ FLEXTouc</i>	51	<i>levothyroxine sodium tab 300 mcg</i> .	171
<i>levetiracetam oral soln 100 mg/ml</i> ...	40	<i>levothyroxine sodium tab 50 mcg</i> ...	171
<i>levetiracetam tab 1000 mg</i>	40	<i>levothyroxine sodium tab 75 mcg</i> ...	171
<i>levetiracetam tab 250 mg</i>	40	<i>levothyroxine sodium tab 88 mcg</i> ...	171
<i>levetiracetam tab 500 mg</i>	40	<i>levo-t tab 100mcg</i>	171
<i>levetiracetam tab 750 mg</i>	40	<i>levo-t tab 112mcg</i>	171
<i>levetiracetam tab er 24hr 500 mg</i> ...	40	<i>levo-t tab 125mcg</i>	171
<i>levetiracetam tab er 24hr 750 mg</i> ...	40	<i>levo-t tab 137mcg</i>	171
<i>levobunolol hcl ophth soln 0.5%</i>	149	<i>levo-t tab 150mcg</i>	171
<i>levocarnitine oral soln 1 gm/10ml</i> (10%)	120	<i>levo-t tab 175mcg</i>	171
<i>levocarnitine tab 330 mg</i>	120	<i>levo-t tab 200 mcg</i>	171
<i>levocetirizine dihydrochloride soln 2.5</i> <i>mg/5ml (0.5 mg/ml)</i>	56	<i>levo-t tab 25mcg</i>	171
<i>levocetirizine dihydrochloride tab 5 mg</i>	56	<i>levo-t tab 300 mcg</i>	171
<i>levofloxacin ophth soln 0.5%</i>	150	<i>levo-t tab 50mcg</i>	171
<i>levofloxacin oral soln 25 mg/ml</i>	124	<i>levo-t tab 75mcg</i>	171
<i>levofloxacin tab 250 mg</i>	124	<i>levo-t tab 88mcg</i>	171
<i>levofloxacin tab 500 mg</i>	124	<i>levoxyl tab 100mcg</i>	172
<i>levofloxacin tab 750 mg</i>	124	<i>levoxyl tab 112mcg</i>	172
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<i>levoxyl tab 25mcg</i>	171	12.5 mg.....	65
<i>levoxyl tab 50mcg</i>	172	<i>lisinopril & hydrochlorothiazide tab 20-</i>	
<i>levoxyl tab 75mcg</i>	172	12.5 mg.....	65
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LEVSIN INJ 0.5MG/ML.....	174	<i>lisinopril tab 10 mg</i>	60
LEVSIN TAB 0.125MG	174	<i>lisinopril tab 2.5 mg</i>	60
LEXAPRO TAB 10MG	45	<i>lisinopril tab 20 mg</i>	60
LEXAPRO TAB 20MG	45	<i>lisinopril tab 30 mg</i>	60
LEXAPRO TAB 5MG.....	45	<i>lisinopril tab 40 mg</i>	60
LEXIVA SUS 50MG/ML	85	<i>lisinopril tab 5 mg</i>	60
LEXIVA TAB 700MG	85	<i>lithium carbonate cap 150 mg</i>	79
<i>lidocaine hcl cream 3%</i>	115	<i>lithium carbonate cap 300 mg</i>	79
<i>lidocaine hcl laryngotracheal soln 4%</i>		<i>lithium carbonate cap 600 mg</i>	79
.....	142	<i>lithium carbonate tab 300 mg</i>	79
<i>lidocaine hcl lotion 3%</i>	115	<i>lithium carbonate tab er 300 mg</i>	79
<i>lidocaine hcl soln 4%</i>	115	<i>lithium carbonate tab er 450 mg</i>	79
<i>lidocaine hcl urethral/mucosal gel 2%</i>		LITHIUM SOL 8MEQ/5ML.....	79
.....	115	LITHOBID TAB 300MG CR	79
<i>lidocaine hcl urethral/mucosal gel</i>		LIVALO TAB 1MG	58
<i>prefilled syringe 2%</i>	115	LIVALO TAB 2MG	58
<i>lidocaine hcl viscous soln 2%</i>	142	LIVALO TAB 4MG	58
<i>lidocaine-hydrocortisone acetate</i>		LODOSYN TAB 25MG	76
<i>perianal cream 3-0.5%</i>	26	LOESTRIN 21 TAB 1.5/30	100
<i>lidocaine oint 5%</i>	115	LOESTRIN FE TAB 1/20	101
<i>lidocaine patch 5%</i>	115	LOESTRIN FE TAB 1.5/30	101
<i>lidocaine-prilocaine cream 2.5-2.5%</i>		LOESTRIN TAB 1/20-21.....	101
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<i>lillow tab 0.15/30</i>	100	LOMAIRA TAB 8MG	3
<i>lindane shampoo 1%</i>	116	LONSURF TAB 15-6.14.....	71
<i>linezolid for susp 100 mg/5ml</i>	28	LONSURF TAB 20-8.19.....	71
<i>linezolid tab 600 mg</i>	28	LOPID TAB 600MG	58
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LINZESS CAP 290MCG	126	<i>mg/5ml (80-20 mg/ml)</i>	85
LINZESS CAP 72MCG	126	<i>lopreeza tab 1-0.5mg</i>	122
<i>liothyronine sodium tab 25 mcg</i>	172	LOPRESSOR TAB 100MG	88
<i>liothyronine sodium tab 50 mcg</i>	172	LOPRESSOR TAB 50MG	88
<i>liothyronine sodium tab 5 mcg</i>	172	<i>lorazepam tab 0.5 mg</i>	30
LIPITOR TAB 10MG.....	58	<i>lorazepam tab 1 mg</i>	30
LIPITOR TAB 20MG.....	58	<i>lorazepam tab 2 mg</i>	30
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<i>lorcet plus tab 7.5-325</i>	22
<i>lorcet tab 5-325mg</i>	22
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<i>loryna tab 3-0.02mg</i>	101
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<i>losartan potassium &</i> <i>hydrochlorothiazide tab 100-25 mg</i>	65
<i>losartan potassium &</i> <i>hydrochlorothiazide tab 50-12.5 mg</i>	65
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LOTEMAX OIN 0.5%	151
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LOTEMAX SUS 0.5%	151
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LOTENSIN TAB 10MG.....	60
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<i>lovastatin tab 20 mg</i>	58
<i>lovastatin tab 40 mg</i>	59
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LOVENOX INJ 150MG/ML.....	36
LOVENOX INJ 30/0.3ML	36
LOVENOX INJ 300/3ML	36
LOVENOX INJ 40/0.4ML	36
LOVENOX INJ 60/0.6ML	36
LOVENOX INJ 80/0.8ML	36

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<i>low-ogestrel tab</i>	101
<i>loxapine succinate cap 10 mg</i>	81
<i>loxapine succinate cap 25 mg</i>	81
<i>loxapine succinate cap 50 mg</i>	81
<i>loxapine succinate cap 5 mg</i>	81
LUCEMYRA TAB 0.18MG	155
<i>ludent chw 0.25mg f</i>	138
<i>ludent chw 0.5mg f</i>	138
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<i>matzim la tab 300mg/24.....</i>	92	MEKINIST TAB 2MG.....	73
<i>matzim la tab 360mg/24.....</i>	92	MEKTOVI TAB 15MG	73
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MAVENCLAD PAK 10MG(4)	158	<i>meloxicam tab 7.5 mg</i>	11
MAVENCLAD PAK 10MG(5)	158	<i>melphalan tab 2 mg</i>	69
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VYVANSE CHW 20MG	2
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<i>zenzedi tab 15mg</i>	2	ZOHYDRO ER CAP 10MG	21
<i>zenzedi tab 2.5mg</i>	2	ZOHYDRO ER CAP 15MG	21
<i>zenzedi tab 20mg</i>	2	ZOHYDRO ER CAP 20MG	21
<i>zenzedi tab 30mg</i>	2	ZOHYDRO ER CAP 30MG	22
<i>zenzedi tab 5mg</i>	2	ZOHYDRO ER CAP 40MG	22
<i>zenzedi tab 7.5mg</i>	2	ZOHYDRO ER CAP 50MG	22
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ZYDELIG TAB 100MG	75
ZYDELIG TAB 150MG	75
ZYKADIA TAB 150MG	75
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