



2026 Colorado Small Group Essential 5-Tier Prescription Drug List

Effective Jan. 1, 2026

This PDL is applicable to the following health insurance products offered by UnitedHealthcare:

- Choice
- Choice Plus
- Doctors Plan
- Navigate
- Select



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Healthcare®**



Please note: This Prescription Drug List (PDL) is accurate as of Jan. 1, 2026 and is subject to change after this date. Your estimated coverage and copayment/coinsurance may vary based on the benefit plan you choose and the effective date of the plan.

Understanding your Prescription Drug List (PDL)

What is a PDL?

This document includes both brand-name and generic prescription medications approved by the Food and Drug Administration (FDA). Medications are listed by common categories or classes and placed in tiers that represent the cost you pay out-of-pocket. Then, they are listed in alphabetical order.

About this PDL

Where differences exist between this PDL and your benefit plan documents, the benefit plan documents rule.

How do I use my PDL?

You and your doctor can check the PDL to help you select the most cost-effective prescription medications. This guide tells you if a medication is generic or a brand-name, and if there are coverage requirements or limits that apply. Bring this list with you when you see your doctor. If your medication is not listed here, please visit your plan's member website or call the toll-free phone number on your member ID card.

What are tiers?

Tiers are the different cost levels you pay for a medication. Your plan sets a cost for each tier. This is how much you will pay when you fill a prescription. See page 4 for more information.

When does the PDL change?

PDL changes typically occur 2-3 times per year. However, changes that have a positive impact for you – such as coverage for new medications or cost savings – may occur at any time. You can log in to your plan's member website listed on your member ID card at any time to check your medication coverage and lower-cost options.

Why are some medications excluded from coverage?

We review treatments based on their total value, including how well they work, how safe they are, their cost and whether options are available to treat the same or similar medical conditions. Certain medications may not be covered or be subject to prior authorization (sometimes referred to as precertification) if your plan covers other lower-cost medications. For example, there may be a lower-cost covered option or an over-the-counter medication that works the same way. In some cases, the same product can be made by 2 or more drug companies, but greatly vary in cost. In these instances, only the lower-cost product may be covered.

You should review your benefit plan documents to confirm if any medications are excluded from your plan. You can log in to your plan's member website listed on your member ID card at any time to check your medication coverage. Talk to your doctor to see if there are lower-cost options or over-the-counter medications available.

Who decides which medications are covered?

The UnitedHealthcare® Pharmacy and Therapeutics Committee, which includes both internal and external doctors and pharmacists, meets regularly to provide clinical reviews of all medications. Using this information, senior UnitedHealth Group® doctors and business leaders meet to evaluate overall health care value. They also set coverage and tier status for all medications.

Medication tips

What is the difference between brand-name and generic medications?

Generic medications contain the same active ingredients (what makes the medication work) as brand-name medications, but they often cost less. Once the patent for a brand-name medication ends, the FDA can approve a generic version with the same active ingredients. These types of medications are known as generic medications. Sometimes, the same company that makes a brand-name medication also makes the generic version.

What if my doctor writes a brand-name prescription?

If your doctor gives you a prescription for a brand-name medication, ask if a generic or lower-cost option is available and could be right for you. Generic medications are usually your lowest-cost option, but not always. For some plans, if a brand-name drug is filled, and a generic is available, your cost-share may be the copayment PLUS the cost difference between the brand-name drug and the generic.

What if I am taking a specialty medication?

Specialty medications are high-cost and are used to treat rare or complex conditions that require extra care and support. For most plans, these medications are managed through a specialty pharmacy. Take advantage of personalized support designed to help you get the most out of your treatment plan. To learn more, visit your plan's website or call the toll-free number on your member ID card.

Requesting a prior authorization

Before certain Prescription Drug Products are dispensed to you, your prescribing provider or your pharmacist is required to obtain prior authorization from us. Your prescribing provider can submit a request by phone to Optum Rx® or electronically by contacting us at uhcprovider.com. Your licensed physician may need to provide information on diagnosis and medication history and/or evidence in the form of documents, records or lab tests which establish that the use of the requested Prescription Drug Product meets plan criteria. You may determine whether a particular Prescription Drug Product is subject to prior authorization or step therapy requirements by visiting your plan's website or by calling at the toll-free phone number on the back of your member ID card.

If you disagree with a determination, you can request an appeal. The complaint and appeals process, including independent medical review, is described in the Certificate of Coverage under the Appeals and Complaints section. You may also call at the telephone number on your member ID card.

Over-the-counter (OTC) medications

An OTC medication may be the right option for some conditions. Talk to your doctor about available OTC options. Even though these medications may not be covered by your pharmacy benefit, they may cost less than a prescription medication.

Reading your PDL

The PDL gives you choices. This allows you and your doctor to decide your best course of treatment.

Tier information

Using lower-tier medications may lower your out-of-pocket cost. Your plan may have multiple or no tiers. Please note: If you have a high deductible plan, the tier cost levels may apply once you hit your deductible.

Drug Tier	Includes	Helpful Tips
Tier 1	\$ Preventive care drugs	Tier 1 products have no out-of-pocket costs.
Tier 2	\$ Lower-cost Medications that provide the highest overall value. Mostly generic drugs. Some brand-name drugs may also be included.	Use Tier 2 drugs for the lowest out-of-pocket costs.
Tiers 3 and 4	\$\$ Mid-range cost Medications that provide good overall value. A mix of brand-name and generic drugs.	Use Tier 3 or Tier 4 drugs, instead of Tier 5, to help your out-of-pocket costs.
Tier 5	\$\$\$ Highest-cost Medications that provide the lowest overall value. Mostly brand-name drugs, as well as some generics.	Many Tier 5 drugs have lower-cost options in Tiers 2, 3, or 4. Ask your doctor if they could work for you.

Drug list information

In this drug list, some medications are noted with programs next to them to help you see which ones may have specific coverage requirements or limits. Your plan sets how these medications may be covered for you.

Health Care Reform Preventive with prior authorization – May be part of health care reform preventive benefit and available at no cost to you if prior authorization criteria are met.

Prior authorization – Requires your doctor to provide information about why you are taking a medication before your plan can decide how it may be covered. PA criteria can be found at uhcprovider.com/en/prior-auth-advance-notification/adv-notification-plan-reqs.html.

Quantity limits – The largest quantity of medication covered per copayment or in a defined period of time. Quantity limits can be found at uhcprovider.com/en/resource-library/drug-lists-pharmacy.html.

Specialty medication – Specialty medications treat complex or rare conditions and may require special storage and handling. You may have to get these medications from a specialty pharmacy.

Step therapy – Requires prior authorization and may require you to try one or more other medications before the medication you are requesting may be covered. Step therapy criteria can be found at uhcprovider.com/en/resource-library/drug-lists-pharmacy/clinical-drug-step-therapy.html.

Questions

For the most current list of covered medications or if you have questions:



Call the toll-free phone number on your member ID card



Visit your plan's member website listed on your member ID card to:

- View your pharmacy benefit and coverage information, including prescription history
- View medication interactions and side effects
- Locate a participating retail pharmacy by ZIP code
- Look up possible lower-cost medication alternatives
- Compare medication pricing and options

And, if home delivery services are included in your pharmacy benefit, you can also:

- Refill prescriptions
- Check the status of your order
- Set up reminders for refills
- Manage your account



Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
1st Generation/Typical - Mood Disorder Drugs						
CHLORPROMAZ POW HCL	CHLORPROMAZINE HCL (BULK) POWDER	Tier 4				
ADASUVE INH 10MG	LOXAPINE AEROSOL POWDER BREATH ACTIVATED 10 MG	Tier 4				
CHLORPROMAZ TAB 100MG	CHLORPROMAZINE HCL TAB 100 MG	Tier 2		X		
CHLORPROMAZ TAB 10MG	CHLORPROMAZINE HCL TAB 10 MG	Tier 2		X		
CHLORPROMAZ TAB 200MG	CHLORPROMAZINE HCL TAB 200 MG	Tier 2		X		
CHLORPROMAZ TAB 25MG	CHLORPROMAZINE HCL TAB 25 MG	Tier 2		X		
CHLORPROMAZ TAB 50MG	CHLORPROMAZINE HCL TAB 50 MG	Tier 2		X		
FLUPHENAZINE CON 5MG/ML	FLUPHENAZINE HCL ORAL CONC 5 MG/ML	Tier 2				
FLUPHENAZINE ELX 2.5/5ML	FLUPHENAZINE HCL ELIXIR 2.5 MG/5ML	Tier 2				
FLUPHENAZINE TAB 10MG	FLUPHENAZINE HCL TAB 10 MG	Tier 2				
FLUPHENAZINE TAB 1MG	FLUPHENAZINE HCL TAB 1 MG	Tier 2				
FLUPHENAZINE TAB 2.5MG	FLUPHENAZINE HCL TAB 2.5 MG	Tier 2				
FLUPHENAZINE TAB 5MG	FLUPHENAZINE HCL TAB 5 MG	Tier 2				
HALOPERIDOL CON 2MG/ML	HALOPERIDOL LACTATE ORAL CONC 2 MG/ML	Tier 2				
HALOPERIDOL TAB 0.5MG	HALOPERIDOL TAB 0.5 MG	Tier 2				
HALOPERIDOL TAB 10MG	HALOPERIDOL TAB 10 MG	Tier 2				
HALOPERIDOL TAB 1MG	HALOPERIDOL TAB 1 MG	Tier 2				
HALOPERIDOL TAB 20MG	HALOPERIDOL TAB 20 MG	Tier 2				
HALOPERIDOL TAB 2MG	HALOPERIDOL TAB 2 MG	Tier 2				
HALOPERIDOL TAB 5MG	HALOPERIDOL TAB 5 MG	Tier 2				
LOXAPINE CAP 10MG	LOXAPINE SUCCINATE CAP 10 MG	Tier 2				
LOXAPINE CAP 25MG	LOXAPINE SUCCINATE CAP 25 MG	Tier 2				
LOXAPINE CAP 50MG	LOXAPINE SUCCINATE CAP 50 MG	Tier 2				
LOXAPINE CAP 5MG	LOXAPINE SUCCINATE CAP 5 MG	Tier 2				
MOLINDONE TAB HCL 10MG	MOLINDONE HCL TAB 10 MG	Tier 4				
MOLINDONE TAB HCL 25MG	MOLINDONE HCL TAB 25 MG	Tier 4				
MOLINDONE TAB HCL 5MG	MOLINDONE HCL TAB 5 MG	Tier 4				
PIMOZIDE TAB 1MG	PIMOZIDE TAB 1 MG	Tier 3				
PIMOZIDE TAB 2MG	PIMOZIDE TAB 2 MG	Tier 3				
THIORIDAZINE TAB 100MG	THIORIDAZINE HCL TAB 100 MG	Tier 2				
THIORIDAZINE TAB 10MG	THIORIDAZINE HCL TAB 10 MG	Tier 2				
THIORIDAZINE TAB 25MG	THIORIDAZINE HCL TAB 25 MG	Tier 2				
THIORIDAZINE TAB 50MG	THIORIDAZINE HCL TAB 50 MG	Tier 2				
THIOTHIXENE CAP 10MG	THIOTHIXENE CAP 10 MG	Tier 2				
THIOTHIXENE CAP 1MG	THIOTHIXENE CAP 1 MG	Tier 2				
THIOTHIXENE CAP 2MG	THIOTHIXENE CAP 2 MG	Tier 2				
THIOTHIXENE CAP 5MG	THIOTHIXENE CAP 5 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
TRIFLUOPERAZ TAB 10MG	TRIFLUOPERAZINE HCL TAB 10 MG (BASE EQUIVALENT)	Tier 2				
TRIFLUOPERAZ TAB 1MG	TRIFLUOPERAZINE HCL TAB 1 MG (BASE EQUIVALENT)	Tier 2				
TRIFLUOPERAZ TAB 2MG	TRIFLUOPERAZINE HCL TAB 2 MG (BASE EQUIVALENT)	Tier 2				
TRIFLUOPERAZ TAB 5MG	TRIFLUOPERAZINE HCL TAB 5 MG (BASE EQUIVALENT)	Tier 2				
2nd Generation/Atypical - Mood Disorder Drugs						
ARIPIRAZOLE SOL 1MG/ML	ARIPIRAZOLE ORAL SOLUTION 1 MG/ML	Tier 3				
ARIPIRAZOLE TAB 10MG	ARIPIRAZOLE TAB 10 MG	Tier 3				
ARIPIRAZOLE TAB 15MG	ARIPIRAZOLE TAB 15 MG	Tier 3				
ARIPIRAZOLE TAB 20MG	ARIPIRAZOLE TAB 20 MG	Tier 3				
ARIPIRAZOLE TAB 2MG	ARIPIRAZOLE TAB 2 MG	Tier 3				
ARIPIRAZOLE TAB 30MG	ARIPIRAZOLE TAB 30 MG	Tier 3				
ARIPIRAZOLE TAB 5MG	ARIPIRAZOLE TAB 5 MG	Tier 3				
ASENAPINE SUB 10MG	ASENAPINE MALEATE SL TAB 10 MG (BASE EQUIV)	Tier 4		X		
ASENAPINE SUB 2.5MG	ASENAPINE MALEATE SL TAB 2.5 MG (BASE EQUIV)	Tier 4		X		
ASENAPINE SUB 5MG	ASENAPINE MALEATE SL TAB 5 MG (BASE EQUIV)	Tier 4		X		
CAPLYTA CAP 10.5MG	LUMATEPERONE TOSYLATE CAP 10.5 MG	Tier 5	X	X	X	
CAPLYTA CAP 21MG	LUMATEPERONE TOSYLATE CAP 21 MG	Tier 5	X	X	X	
CAPLYTA CAP 42MG	LUMATEPERONE TOSYLATE CAP 42 MG	Tier 5	X	X	X	
CLOZAPINE TAB 100/ODT	CLOZAPINE ORALLY DISINTEGRATING TAB 100 MG	Tier 2				
CLOZAPINE TAB 12.5/ODT	CLOZAPINE ORALLY DISINTEGRATING TAB 12.5 MG	Tier 2				
CLOZAPINE TAB 150/ODT	CLOZAPINE ORALLY DISINTEGRATING TAB 150 MG	Tier 2				
CLOZAPINE TAB 200/ODT	CLOZAPINE ORALLY DISINTEGRATING TAB 200 MG	Tier 2				
CLOZAPINE TAB 25MG ODT	CLOZAPINE ORALLY DISINTEGRATING TAB 25 MG	Tier 2				
LURASIDONE TAB 120MG	LURASIDONE HCL TAB 120 MG	Tier 3		X		
LURASIDONE TAB 20MG	LURASIDONE HCL TAB 20 MG	Tier 3		X		
LURASIDONE TAB 40MG	LURASIDONE HCL TAB 40 MG	Tier 3		X		
LURASIDONE TAB 60MG	LURASIDONE HCL TAB 60 MG	Tier 3		X		
LURASIDONE TAB 80MG	LURASIDONE HCL TAB 80 MG	Tier 3		X		
NUPLAZID CAP 34MG	PIMAVANSERIN TARTRATE CAP 34 MG (BASE EQUIVALENT)	Tier 5	X	X		
NUPLAZID TAB 10MG	PIMAVANSERIN TARTRATE TAB 10 MG (BASE EQUIVALENT)	Tier 5	X	X		
OLANZAPINE TAB 10MG	OLANZAPINE TAB 10 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
OLANZAPINE TAB 10MG ODT	OLANZAPINE ORALLY DISINTEGRATING TAB 10 MG	Tier 3				
OLANZAPINE TAB 15MG	OLANZAPINE TAB 15 MG	Tier 2				
OLANZAPINE TAB 15MG ODT	OLANZAPINE ORALLY DISINTEGRATING TAB 15 MG	Tier 3				
OLANZAPINE TAB 2.5MG	OLANZAPINE TAB 2.5 MG	Tier 2				
OLANZAPINE TAB 20MG	OLANZAPINE TAB 20 MG	Tier 2				
OLANZAPINE TAB 20MG ODT	OLANZAPINE ORALLY DISINTEGRATING TAB 20 MG	Tier 3				
OLANZAPINE TAB 5MG	OLANZAPINE TAB 5 MG	Tier 2				
OLANZAPINE TAB 5MG ODT	OLANZAPINE ORALLY DISINTEGRATING TAB 5 MG	Tier 3				
OLANZAPINE TAB 7.5MG	OLANZAPINE TAB 7.5 MG	Tier 2				
QUETIAPINE TAB 100MG	QUETIAPINE FUMARATE TAB 100 MG	Tier 2				
QUETIAPINE TAB 150MG	QUETIAPINE FUMARATE TAB 150 MG	Tier 2				
QUETIAPINE TAB 150MG ER	QUETIAPINE FUMARATE TAB ER 24HR 150 MG	Tier 3				
QUETIAPINE TAB 200MG	QUETIAPINE FUMARATE TAB 200 MG	Tier 2				
QUETIAPINE TAB 200MG ER	QUETIAPINE FUMARATE TAB ER 24HR 200 MG	Tier 3				
QUETIAPINE TAB 25MG	QUETIAPINE FUMARATE TAB 25 MG	Tier 2				
QUETIAPINE TAB 300MG	QUETIAPINE FUMARATE TAB 300 MG	Tier 2				
QUETIAPINE TAB 300MG ER	QUETIAPINE FUMARATE TAB ER 24HR 300 MG	Tier 3				
QUETIAPINE TAB 400MG	QUETIAPINE FUMARATE TAB 400 MG	Tier 2				
QUETIAPINE TAB 400MG ER	QUETIAPINE FUMARATE TAB ER 24HR 400 MG	Tier 3				
QUETIAPINE TAB 50MG	QUETIAPINE FUMARATE TAB 50 MG	Tier 2				
QUETIAPINE TAB 50MG ER	QUETIAPINE FUMARATE TAB ER 24HR 50 MG	Tier 3				
REXULTI TAB 0.25MG	BREXPIRAZOLE TAB 0.25 MG	Tier 5		X		
REXULTI TAB 0.5MG	BREXPIRAZOLE TAB 0.5 MG	Tier 5		X		
REXULTI TAB 1MG	BREXPIRAZOLE TAB 1 MG	Tier 5		X		
REXULTI TAB 2MG	BREXPIRAZOLE TAB 2 MG	Tier 5		X		
REXULTI TAB 3MG	BREXPIRAZOLE TAB 3 MG	Tier 5		X		
REXULTI TAB 4MG	BREXPIRAZOLE TAB 4 MG	Tier 5		X		
RISPERIDONE SOL 1MG/ML	RISPERIDONE SOLN 1 MG/ML	Tier 2				
RISPERIDONE TAB 0.25 ODT	RISPERIDONE ORALLY DISINTEGRATING TAB 0.25 MG	Tier 2				
RISPERIDONE TAB 0.25MG	RISPERIDONE TAB 0.25 MG	Tier 2				
RISPERIDONE TAB 0.5MG	RISPERIDONE TAB 0.5 MG	Tier 2				
RISPERIDONE TAB 0.5MG OD	RISPERIDONE ORALLY DISINTEGRATING TAB 0.5 MG	Tier 2				
RISPERIDONE TAB 1MG	RISPERIDONE TAB 1 MG	Tier 2				
RISPERIDONE TAB 1MG ODT	RISPERIDONE ORALLY DISINTEGRATING TAB 1 MG	Tier 2				
RISPERIDONE TAB 2MG	RISPERIDONE TAB 2 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
RISPERIDONE TAB 2MG ODT	RISPERIDONE ORALLY DISINTEGRATING TAB 2 MG	Tier 2				
RISPERIDONE TAB 3MG	RISPERIDONE TAB 3 MG	Tier 2				
RISPERIDONE TAB 3MG ODT	RISPERIDONE ORALLY DISINTEGRATING TAB 3 MG	Tier 2				
RISPERIDONE TAB 4MG	RISPERIDONE TAB 4 MG	Tier 2				
RISPERIDONE TAB 4MG ODT	RISPERIDONE ORALLY DISINTEGRATING TAB 4 MG	Tier 2				
VRAYLAR CAP 1.5MG	CARIPRAZINE HCL CAP 1.5 MG (BASE EQUIVALENT)	Tier 5		X		
VRAYLAR CAP 3MG	CARIPRAZINE HCL CAP 3 MG (BASE EQUIVALENT)	Tier 5		X		
VRAYLAR CAP 4.5MG	CARIPRAZINE HCL CAP 4.5 MG (BASE EQUIVALENT)	Tier 5		X		
VRAYLAR CAP 6MG	CARIPRAZINE HCL CAP 6 MG (BASE EQUIVALENT)	Tier 5		X		
ZIPRASIDONE CAP 20MG	ZIPRASIDONE HCL CAP 20 MG	Tier 3				
ZIPRASIDONE CAP 40MG	ZIPRASIDONE HCL CAP 40 MG	Tier 3				
ZIPRASIDONE CAP 60MG	ZIPRASIDONE HCL CAP 60 MG	Tier 3				
ZIPRASIDONE CAP 80MG	ZIPRASIDONE HCL CAP 80 MG	Tier 3				
Alcohol Deterrents/Anti-craving - Antidotes/Deterrents/Protectants						
ACAMPRO CAL TAB 333MG	ACAMPROSATE CALCIUM TAB DELAYED RELEASE 333 MG	Tier 2				
DISULFIRAM TAB 250MG	DISULFIRAM TAB 250 MG	Tier 2				
DISULFIRAM TAB 500MG	DISULFIRAM TAB 500 MG	Tier 2				
Alkylating Agents - Chemotherapy Agents						
CYCLOPHOSPH CAP 25MG	CYCLOPHOSPHAMIDE CAP 25 MG	Tier 4				
CYCLOPHOSPH CAP 50MG	CYCLOPHOSPHAMIDE CAP 50 MG	Tier 4				
CYCLOPHOSPH TAB 25MG	CYCLOPHOSPHAMIDE TAB 25 MG	Tier 4				
CYCLOPHOSPH TAB 50MG	CYCLOPHOSPHAMIDE TAB 50 MG	Tier 4				
GLEOSTINE CAP 100MG	LOMUSTINE CAP 100 MG	Tier 4				X
GLEOSTINE CAP 10MG	LOMUSTINE CAP 10 MG	Tier 4				X
GLEOSTINE CAP 40MG	LOMUSTINE CAP 40 MG	Tier 4				X
HEPZATO/50MM INJ 50MG	MELPHALAN HCL FOR INTRA-ARTERIAL SOLN 50 MG (BASE EQUIV)	Tier 4				
HEPZATO/62MM INJ 50MG	MELPHALAN HCL FOR INTRA-ARTERIAL SOLN 50 MG (BASE EQUIV)	Tier 4				
LEUKERAN TAB 2MG	CHLORAMBUCIL TAB 2 MG	Tier 4				
LOMUSTINE CAP 100MG	LOMUSTINE CAP 100 MG	Tier 2				X
LOMUSTINE CAP 10MG	LOMUSTINE CAP 10 MG	Tier 2				X
LOMUSTINE CAP 40MG	LOMUSTINE CAP 40 MG	Tier 2				X
MATULANE CAP 50MG	PROCARBAZINE HCL CAP 50 MG	Tier 4				X
MELPHALAN TAB 2MG	MELPHALAN TAB 2 MG	Tier 4				X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
MYLERAN TAB 2MG	BUSULFAN TAB 2 MG	Tier 4				
TEMOZOLOMIDE CAP 100MG	TEMOZOLOMIDE CAP 100 MG	Tier 2				X
TEMOZOLOMIDE CAP 140MG	TEMOZOLOMIDE CAP 140 MG	Tier 2				X
TEMOZOLOMIDE CAP 180MG	TEMOZOLOMIDE CAP 180 MG	Tier 2				X
TEMOZOLOMIDE CAP 20MG	TEMOZOLOMIDE CAP 20 MG	Tier 2				X
TEMOZOLOMIDE CAP 250MG	TEMOZOLOMIDE CAP 250 MG	Tier 2				X
TEMOZOLOMIDE CAP 5MG	TEMOZOLOMIDE CAP 5 MG	Tier 2				X
VALCHLOR GEL 0.016%	MECHLORETHAMINE HCL GEL 0.016% (BASE EQUIVALENT)	Tier 4	X	X		X
Alpha-adrenergic Agonists - Blood Pressure Drugs						
CLONIDINE DIS 0.1/24HR	CLONIDINE TD PATCH WEEKLY 0.1 MG/24HR	Tier 4				
CLONIDINE DIS 0.2/24HR	CLONIDINE TD PATCH WEEKLY 0.2 MG/24HR	Tier 4				
CLONIDINE DIS 0.3/24HR	CLONIDINE TD PATCH WEEKLY 0.3 MG/24HR	Tier 4				
CLONIDINE TAB 0.1MG	CLONIDINE HCL TAB 0.1 MG	Tier 2				
CLONIDINE TAB 0.2MG	CLONIDINE HCL TAB 0.2 MG	Tier 2				
CLONIDINE TAB 0.3MG	CLONIDINE HCL TAB 0.3 MG	Tier 2				
GUANFACINE TAB 1MG	GUANFACINE HCL TAB 1 MG	Tier 2				
GUANFACINE TAB 2MG	GUANFACINE HCL TAB 2 MG	Tier 2				
METHYLDOPA TAB 250MG	METHYLDOPA TAB 250 MG	Tier 5	X		X	
METHYLDOPA TAB 500MG	METHYLDOPA TAB 500 MG	Tier 5	X		X	
MIDODRINE TAB 10MG	MIDODRINE HCL TAB 10 MG	Tier 2				
MIDODRINE TAB 2.5MG	MIDODRINE HCL TAB 2.5 MG	Tier 2				
MIDODRINE TAB 5MG	MIDODRINE HCL TAB 5 MG	Tier 2				
Alpha-adrenergic Blocking Agents - Blood Pressure Drugs						
CARDURA TAB 1MG	DOXAZOSIN MESYLATE TAB 1 MG	Tier 5				
CARDURA TAB 2MG	DOXAZOSIN MESYLATE TAB 2 MG	Tier 5				
CARDURA TAB 4MG	DOXAZOSIN MESYLATE TAB 4 MG	Tier 5				
CARDURA TAB 8MG	DOXAZOSIN MESYLATE TAB 8 MG	Tier 5				
DOXAZOSIN TAB 1MG	DOXAZOSIN MESYLATE TAB 1 MG	Tier 2				
DOXAZOSIN TAB 2MG	DOXAZOSIN MESYLATE TAB 2 MG	Tier 2				
DOXAZOSIN TAB 4MG	DOXAZOSIN MESYLATE TAB 4 MG	Tier 2				
DOXAZOSIN TAB 8MG	DOXAZOSIN MESYLATE TAB 8 MG	Tier 2				
MINIPRESS CAP 1MG	PRAZOSIN HCL CAP 1 MG	Tier 5				
MINIPRESS CAP 2MG	PRAZOSIN HCL CAP 2 MG	Tier 5				
MINIPRESS CAP 5MG	PRAZOSIN HCL CAP 5 MG	Tier 5				
PHENOXYBENZA CAP 10MG	PHENOXYBENZAMINE HCL CAP 10 MG	Tier 3				
PRAZOSIN HCL CAP 1MG	PRAZOSIN HCL CAP 1 MG	Tier 2				
PRAZOSIN HCL CAP 2MG	PRAZOSIN HCL CAP 2 MG	Tier 2				
PRAZOSIN HCL CAP 5MG	PRAZOSIN HCL CAP 5 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
Aminoglycosides - Antibiotics						
ARIKAYCE SUS	AMIKACIN SULFATE LIPOSOME INHAL SUSP 590 MG/8.4ML (BASE EQ)	Tier 5	X	X		X
GENTAMICIN CRE 0.1%	GENTAMICIN SULFATE CREAM 0.1%	Tier 2		X		
GENTAMICIN OIN 0.1%	GENTAMICIN SULFATE OINT 0.1%	Tier 2		X		
HUMATIN CAP 250MG	PAROMOMYCIN SULFATE CAP 250 MG	Tier 3				
NEOMYCIN TAB 500MG	NEOMYCIN SULFATE TAB 500 MG	Tier 2				
TOBRADEX OIN 0.3-0.1%	TOBRAMYCIN-DEXAMETHASONE OPHTH OINT 0.3-0.1%	Tier 4				
Aminosalicylates - Inflammatory Bowel Disease Drugs						
APRISO CAP 0.375GM	MESALAMINE CAP ER 24HR 0.375 GM	Tier 2				
BALSALAZIDE CAP 750MG	BALSALAZIDE DISODIUM CAP 750 MG	Tier 2				
MESALAMINE CAP 400MG DR	MESALAMINE CAP DR 400 MG	Tier 3				
MESALAMINE ENE 4GM	MESALAMINE ENEMA 4 GM	Tier 2				
MESALAMINE KIT 4GM	*MESALAMINE RECTAL ENEMA 4 GM & CLEANSER WIPE KIT**	Tier 2		X		
MESALAMINE SUP 1000MG	MESALAMINE SUPPOS 1000 MG	Tier 3		X		
MESALAMINE TAB 1.2GM	MESALAMINE TAB DELAYED RELEASE 1.2 GM	Tier 3				
Analgesics - Miscellaneous Analgesics						
BAC TAB	BUTALBITAL-ACETAMINOPHEN-CAFFEINE TAB 50-325-40 MG	Tier 2		X		
BUT/APAP/CAF CAP	BUTALBITAL-ACETAMINOPHEN-CAFFEINE CAP 50-325-40 MG	Tier 2		X		
BUT/APAP/CAF CAP	BUTALBITAL-ACETAMINOPHEN-CAFFEINE CAP 50-300-40 MG	Tier 4		X		
BUT/APAP/CAF SOL	BUTALBITAL-ACETAMINOPHEN-CAFFEINE SOLN 50-325-40 MG/15ML	Tier 3				
BUT/APAP/CAF TAB	BUTALBITAL-ACETAMINOPHEN-CAFFEINE TAB 50-325-40 MG	Tier 2		X		
BUT/ASA/CAFF CAP	BUTALBITAL-ASPIRIN-CAFFEINE CAP 50-325-40 MG	Tier 2				
BUTAL/APAP CAP 50-300MG	BUTALBITAL-ACETAMINOPHEN CAP 50-300 MG	Tier 2		X		
BUTAL/APAP TAB 50-325MG	BUTALBITAL-ACETAMINOPHEN TAB 50-325 MG	Tier 2				
DYCLOPRO SOL 0.5%	DYCLONINE HCL SOLN 0.5%	Tier 5				
EQ PAIN RELI TAB 500MG	ACETAMINOPHEN TAB 500 MG	Tier 2				
ESGIC CAP	BUTALBITAL-ACETAMINOPHEN-CAFFEINE CAP 50-325-40 MG	Tier 5		X		
ESGIC TAB	BUTALBITAL-ACETAMINOPHEN-CAFFEINE TAB 50-325-40 MG	Tier 5		X		
FIORICET CAP	BUTALBITAL-ACETAMINOPHEN-CAFFEINE CAP 50-300-40 MG	Tier 5		X		
TENCON TAB 50-325MG	BUTALBITAL-ACETAMINOPHEN TAB 50-325 MG	Tier 4				
TURPENTINE SOL SPIRITS	TURPENTINE SPIRIT	Tier 2				
Androgens - Hormone Replacement/Modifying Drugs						

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
DANAZOL CAP 100MG	DANAZOL CAP 100 MG	Tier 2				
DANAZOL CAP 200MG	DANAZOL CAP 200 MG	Tier 2				
DANAZOL CAP 50MG	DANAZOL CAP 50 MG	Tier 2				
DEPO-TESTOST INJ 100MG/ML	TESTOSTERONE CYPIONATE IM INJ IN OIL 100 MG/ML	Tier 4				
DEPO-TESTOST INJ 200MG/ML	TESTOSTERONE CYPIONATE IM INJ IN OIL 200 MG/ML	Tier 5				
FORTESTA GEL 10MG/ACT	TESTOSTERONE TD GEL 10MG/ACT (2%)	Tier 5	X	X		
KYZATREX CAP 100MG	TESTOSTERONE UNDECANOATE CAP 100 MG	Tier 5	X	X		
KYZATREX CAP 150MG	TESTOSTERONE UNDECANOATE CAP 150 MG	Tier 5	X	X		
KYZATREX CAP 200MG	TESTOSTERONE UNDECANOATE CAP 200 MG	Tier 5	X	X		
METHITEST TAB 10MG	METHYLTESTOSTERONE ORAL TAB 10 MG	Tier 3				
METHYLTESTOS CAP 10MG	METHYLTESTOSTERONE CAP 10 MG	Tier 3				
TESTIM GEL 1%(50MG)	TESTOSTERONE TD GEL 50 MG/5GM (1%)	Tier 3	X	X		
TESTOST CYP INJ 100MG/ML	TESTOSTERONE CYPIONATE IM INJ IN OIL 100 MG/ML	Tier 2				
TESTOST CYP INJ 200MG/ML	TESTOSTERONE CYPIONATE IM INJ IN OIL 200 MG/ML	Tier 2				
TESTOST ENAN INJ 200MG/ML	TESTOSTERONE ENANTHATE IM INJ IN OIL 200 MG/ML	Tier 2				
TESTOSTERONE GEL 1.62%	TESTOSTERONE TD GEL 20.25 MG/ACT (1.62%)	Tier 3	X	X		
Angioedema Agents						
FABHALTA CAP 200MG	IPTACOPAN HCL CAP 200 MG	Tier 4	X	X		X
VOYDEYA TAB 100MG	DANICOPAN TAB 100 MG	Tier 4	X	X		X
VOYDEYA TAB 50-100MG	DANICOPAN TAB THERAPY PACK 50 MG & 100 MG	Tier 4	X	X		X
ZILBRYSQ INJ 16.6MG	ZILUCOPLAN SODIUM SUBCUTANEOUS SOLN PREF SYR 16.6 MG/0.416ML	Tier 5	X	X		X
ZILBRYSQ INJ 23MG	ZILUCOPLAN SODIUM SUBCUTANEOUS SOLN PREF SYR 23 MG/0.574ML	Tier 5	X	X		X
ZILBRYSQ INJ 32.4MG	ZILUCOPLAN SODIUM SUBCUTANEOUS SOLN PREF SYR 32.4 MG/0.81ML	Tier 5	X	X		X
Angioedema Agents - Drugs to Treat Swelling Underneath the Skin						
BERINERT INJ 500UNIT	C1 ESTERASE INHIBITOR (HUMAN) FOR IV INJ KIT 500 UNIT	Tier 5	X	X	X	X
HAEGARDA INJ 2000UNIT	C1 ESTERASE INHIBITOR (HUMAN) FOR SUBCUTANEOUS INJ 2000 UNIT	Tier 4	X	X		X
HAEGARDA INJ 3000UNIT	C1 ESTERASE INHIBITOR (HUMAN) FOR SUBCUTANEOUS INJ 3000 UNIT	Tier 4	X	X		X
ICATIBANT INJ 30MG/3ML	ICATIBANT ACETATE SUBCUTANEOUS SOLN PREF SYR 30 MG/3ML	Tier 4	X	X		X
RUCONEST INJ 2100UNIT	C1 ESTERASE INHIBITOR (RECOMBINANT) FOR IV INJ 2100 UNIT	Tier 5	X	X		X
TAKHZYRO INJ 300/2ML	LANADELUMAB-FLYO INJ 300 MG/2ML (150 MG/ML)	Tier 4	X	X		X
Angiotensin II Receptor Antagonists - Blood Pressure Drugs						

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
CANDESARTAN TAB 16MG	CANDESARTAN CILEXETIL TAB 16 MG	Tier 4				
CANDESARTAN TAB 32MG	CANDESARTAN CILEXETIL TAB 32 MG	Tier 4				
CANDESARTAN TAB 4MG	CANDESARTAN CILEXETIL TAB 4 MG	Tier 4				
CANDESARTAN TAB 8MG	CANDESARTAN CILEXETIL TAB 8 MG	Tier 4				
IRBESARTAN TAB 150MG	IRBESARTAN TAB 150 MG	Tier 2				
IRBESARTAN TAB 300MG	IRBESARTAN TAB 300 MG	Tier 2				
IRBESARTAN TAB 75MG	IRBESARTAN TAB 75 MG	Tier 2				
LOSARTAN POT TAB 100MG	LOSARTAN POTASSIUM TAB 100 MG	Tier 2				
LOSARTAN POT TAB 25MG	LOSARTAN POTASSIUM TAB 25 MG	Tier 2				
LOSARTAN POT TAB 50MG	LOSARTAN POTASSIUM TAB 50 MG	Tier 2				
OLMESA MEDOX TAB 20MG	OLMESARTAN MEDOXOMIL TAB 20 MG	Tier 3				
OLMESA MEDOX TAB 40MG	OLMESARTAN MEDOXOMIL TAB 40 MG	Tier 3				
OLMESA MEDOX TAB 5MG	OLMESARTAN MEDOXOMIL TAB 5 MG	Tier 3				
TELMISARTAN TAB 20MG	TELMISARTAN TAB 20 MG	Tier 3				
TELMISARTAN TAB 40MG	TELMISARTAN TAB 40 MG	Tier 3				
TELMISARTAN TAB 80MG	TELMISARTAN TAB 80 MG	Tier 3				
VALSARTAN SOL 20MG/5ML	VALSARTAN ORAL SOLN 4 MG/ML	Tier 5	X			
VALSARTAN TAB 160MG	VALSARTAN TAB 160 MG	Tier 3				
VALSARTAN TAB 320MG	VALSARTAN TAB 320 MG	Tier 3				
VALSARTAN TAB 40MG	VALSARTAN TAB 40 MG	Tier 3				
VALSARTAN TAB 80MG	VALSARTAN TAB 80 MG	Tier 3				
Angiotensin-Converting Enzyme (ACE) Inhibitors - Blood Pressure Drugs						
BENAZEPRIL TAB 10MG	BENAZEPRIL HCL TAB 10 MG	Tier 2				
BENAZEPRIL TAB 20MG	BENAZEPRIL HCL TAB 20 MG	Tier 2				
BENAZEPRIL TAB 40MG	BENAZEPRIL HCL TAB 40 MG	Tier 2				
BENAZEPRIL TAB 5MG	BENAZEPRIL HCL TAB 5 MG	Tier 2				
CAPTOPRIL TAB 100MG	CAPTOPRIL TAB 100 MG	Tier 2				
CAPTOPRIL TAB 12.5MG	CAPTOPRIL TAB 12.5 MG	Tier 2				
CAPTOPRIL TAB 25MG	CAPTOPRIL TAB 25 MG	Tier 2				
CAPTOPRIL TAB 50MG	CAPTOPRIL TAB 50 MG	Tier 2				
ENALAPRIL SOL 1MG/ML	ENALAPRIL MALEATE ORAL SOLN 1 MG/ML	Tier 4	X			
ENALAPRIL TAB 10MG	ENALAPRIL MALEATE TAB 10 MG	Tier 2				
ENALAPRIL TAB 2.5MG	ENALAPRIL MALEATE TAB 2.5 MG	Tier 2				
ENALAPRIL TAB 20MG	ENALAPRIL MALEATE TAB 20 MG	Tier 2				
ENALAPRIL TAB 5MG	ENALAPRIL MALEATE TAB 5 MG	Tier 2				
EPANED SOL 1MG/ML	ENALAPRIL MALEATE ORAL SOLN 1 MG/ML	Tier 5	X			
FOSINOPRIL TAB 10MG	FOSINOPRIL SODIUM TAB 10 MG	Tier 2				
FOSINOPRIL TAB 20MG	FOSINOPRIL SODIUM TAB 20 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
FOSINOPRIL TAB 40MG	FOSINOPRIL SODIUM TAB 40 MG	Tier 2				
LISINOPRIL TAB 10MG	LISINOPRIL TAB 10 MG	Tier 2				
LISINOPRIL TAB 2.5MG	LISINOPRIL TAB 2.5 MG	Tier 2				
LISINOPRIL TAB 20MG	LISINOPRIL TAB 20 MG	Tier 2				
LISINOPRIL TAB 30MG	LISINOPRIL TAB 30 MG	Tier 2				
LISINOPRIL TAB 40MG	LISINOPRIL TAB 40 MG	Tier 2				
LISINOPRIL TAB 5MG	LISINOPRIL TAB 5 MG	Tier 2				
LOTENSIN TAB 10MG	BENAZEPRIL HCL TAB 10 MG	Tier 5				
LOTENSIN TAB 20MG	BENAZEPRIL HCL TAB 20 MG	Tier 5				
LOTENSIN TAB 40MG	BENAZEPRIL HCL TAB 40 MG	Tier 5				
MOEXIPRIL TAB 15MG	MOEXIPRIL HCL TAB 15 MG	Tier 2				
MOEXIPRIL TAB 7.5MG	MOEXIPRIL HCL TAB 7.5 MG	Tier 2				
PERINDOPRIL TAB 2MG	PERINDOPRIL ERBUMINE TAB 2 MG	Tier 3				
PERINDOPRIL TAB 4MG	PERINDOPRIL ERBUMINE TAB 4 MG	Tier 3				
PERINDOPRIL TAB 8MG	PERINDOPRIL ERBUMINE TAB 8 MG	Tier 3				
QBRELIS SOL 1MG/ML	LISINOPRIL ORAL SOLN 1 MG/ML	Tier 5	X			
QUINAPRIL TAB 10MG	QUINAPRIL HCL TAB 10 MG	Tier 2				
QUINAPRIL TAB 20MG	QUINAPRIL HCL TAB 20 MG	Tier 2				
QUINAPRIL TAB 40MG	QUINAPRIL HCL TAB 40 MG	Tier 2				
QUINAPRIL TAB 5MG	QUINAPRIL HCL TAB 5 MG	Tier 2				
RAMIPRIL CAP 1.25MG	RAMIPRIL CAP 1.25 MG	Tier 2				
RAMIPRIL CAP 10MG	RAMIPRIL CAP 10 MG	Tier 2				
RAMIPRIL CAP 2.5MG	RAMIPRIL CAP 2.5 MG	Tier 2				
RAMIPRIL CAP 5MG	RAMIPRIL CAP 5 MG	Tier 2				
TRANDOLAPRIL TAB 1MG	TRANDOLAPRIL TAB 1 MG	Tier 2				
TRANDOLAPRIL TAB 2MG	TRANDOLAPRIL TAB 2 MG	Tier 2				
TRANDOLAPRIL TAB 4MG	TRANDOLAPRIL TAB 4 MG	Tier 2				
Anthelmintics - Worm Infection Drugs						
ALBENDAZOLE TAB 200MG	ALBENDAZOLE TAB 200 MG	Tier 4		X		
BENZNIDAZOLE TAB 100MG	BENZNIDAZOLE TAB 100 MG	Tier 3		X		
BENZNIDAZOLE TAB 12.5MG	BENZNIDAZOLE TAB 12.5 MG	Tier 3		X		
BILTRICIDE TAB 600MG	PRAZIQUANTEL TAB 600 MG	Tier 5				
EGATEN TAB 250MG	TRICLABENDAZOLE TAB 250 MG	Tier 4				
EMVERM CHW 100MG	MEBENDAZOLE CHEW TAB 100 MG	Tier 5		X		
IVERMECTIN TAB 3MG	IVERMECTIN TAB 3 MG	Tier 2	X	X		
IVERMECTIN TAB 6MG	IVERMECTIN TAB 6 MG	Tier 2	X			
PRAZIQUANTEL TAB 600MG	PRAZIQUANTEL TAB 600 MG	Tier 3				
STROMECTOL TAB 3MG	IVERMECTIN TAB 3 MG	Tier 5	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
Anti-Cytomegalovirus (CMV) Agents - Miscellaneous Antiviral Drugs						
LIVTENCITY TAB 200MG	MARIBAVIR TAB 200 MG	Tier 5	X	X		X
PREVMIS PAK 120MG	LETERMOVIR PELLETT PACK 120 MG	Tier 4	X			
PREVMIS PAK 20MG	LETERMOVIR PELLETT PACK 20 MG	Tier 4	X			
PREVMIS TAB 240MG	LETERMOVIR TAB 240 MG	Tier 4	X			
PREVMIS TAB 480MG	LETERMOVIR TAB 480 MG	Tier 4	X			
VALGANCICLOV SOL 50MG/ML	VALGANCICLOVIR HCL FOR SOLN 50 MG/ML (BASE EQUIV)	Tier 2				
VALGANCICLOV TAB 450MG	VALGANCICLOVIR HCL TAB 450 MG (BASE EQUIVALENT)	Tier 5				
Anti-hepatitis B (HBV) Agents - Hepatitis B Drugs						
ADEFOV DIPIV TAB 10MG	ADEFOVIR DIPIVOXIL TAB 10 MG	Tier 4				
BARACLUDE SOL	ENTECAVIR ORAL SOLN 0.05 MG/ML	Tier 3				
ENTECAVIR TAB 0.5MG	ENTECAVIR TAB 0.5 MG	Tier 3				
ENTECAVIR TAB 1MG	ENTECAVIR TAB 1 MG	Tier 3				
LAMIVUDINE TAB 100MG	LAMIVUDINE TAB 100 MG (HBV)	Tier 2				
Anti-hepatitis C (HCV) Agents, Direct Acting Agents - Hepatitis C Drugs						
EPCLUSA PAK 150-375	SOFOBUVIR-VELPATASVIR PELLETT PACK 150-375 MG	Tier 4	X	X		X
EPCLUSA PAK 200-50MG	SOFOBUVIR-VELPATASVIR PELLETT PACK 200-50 MG	Tier 4	X	X		X
EPCLUSA TAB 200-50MG	SOFOBUVIR-VELPATASVIR TAB 200-50 MG	Tier 4	X	X		X
EPCLUSA TAB 400-100	SOFOBUVIR-VELPATASVIR TAB 400-100 MG	Tier 4	X	X		X
HARVONI PAK	LEDIPASVIR-SOFOBUVIR PELLETT PACK 33.75-150 MG	Tier 4	X	X	X	
HARVONI PAK 45-200MG	LEDIPASVIR-SOFOBUVIR PELLETT PACK 45-200 MG	Tier 4	X	X	X	
HARVONI TAB 45-200MG	LEDIPASVIR-SOFOBUVIR TAB 45-200 MG	Tier 4	X	X	X	X
HARVONI TAB 90-400MG	LEDIPASVIR-SOFOBUVIR TAB 90-400 MG	Tier 4	X	X	X	X
LEDIP-SOFOSB TAB 90-400MG	LEDIPASVIR-SOFOBUVIR TAB 90-400 MG	Tier 4	X	X	X	X
MAVYRET PAK 50-20MG	GLECAPREVIR-PIBRENTASVIR PELLETT PACK 50-20 MG	Tier 4	X	X		X
MAVYRET TAB 100-40MG	GLECAPREVIR-PIBRENTASVIR TAB 100-40 MG	Tier 4	X	X		X
SOFOS/VELPAT TAB 400-100	SOFOBUVIR-VELPATASVIR TAB 400-100 MG	Tier 4	X	X		X
SOVALDI PAK 150MG	SOFOBUVIR PELLETT PACK 150 MG	Tier 5	X	X	X	X
SOVALDI PAK 200MG	SOFOBUVIR PELLETT PACK 200 MG	Tier 5	X	X	X	X
VOSEVI TAB	SOFOBUVIR-VELPATASVIR-VOXILAPREVIR TAB 400-100-100 MG	Tier 4	X	X		X
ZEPATIER TAB 50-100MG	ELBASVIR-GRAZOPREVIR TAB 50-100 MG	Tier 4	X	X		X
Anti-hepatitis C (HCV) Agents, Other - Hepatitis C Drugs						
PEGASYS INJ	PEGINTERFERON ALFA-2A SOLN PREFILLED SYR 180 MCG/0.5ML	Tier 4				X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PEGASYS INJ 180MCG/M	PEGINTERFERON ALFA-2A INJ 180 MCG/ML	Tier 4				X
RIBAVIRIN CAP 200MG	RIBAVIRIN CAP 200 MG	Tier 2				
RIBAVIRIN TAB 200MG	RIBAVIRIN TAB 200 MG	Tier 2				
Anti-HIV Agents, Integrase Inhibitors (INSTI)						
DOVATO TAB 50-300MG	DOLUTEGRAVIR SODIUM-LAMIVUDINE TAB 50-300 MG (BASE EQ)	Tier 3		X		
Anti-HIV Agents, Integrase Inhibitors (INSTI) - HIV Drugs						
BIKTARVY TAB	BICTEGRAVIR-EMTRICITABINE-TENOFOVIR AF TAB 50-200-25 MG	Tier 5		X		
BIKTARVY TAB	BICTEGRAVIR-EMTRICITABINE-TENOFOVIR AF TAB 30-120-15 MG	Tier 5		X		
GENVOYA TAB	ELVITEGRAV-COBIC-EMTRICITAB-TENOFOV AF TAB 150-150-200-10 MG	Tier 5		X		
ISENTRESS CHW 100MG	RALTEGRAVIR POTASSIUM CHEW TAB 100 MG (BASE EQUIV)	Tier 3				
ISENTRESS CHW 25MG	RALTEGRAVIR POTASSIUM CHEW TAB 25 MG (BASE EQUIV)	Tier 3				
ISENTRESS POW 100MG	RALTEGRAVIR POTASSIUM PACKET FOR SUSP 100 MG (BASE EQUIV)	Tier 3				
ISENTRESS TAB 400MG	RALTEGRAVIR POTASSIUM TAB 400 MG (BASE EQUIV)	Tier 3				
ISENTRESS HD TAB 600MG	RALTEGRAVIR POTASSIUM TAB 600 MG (BASE EQUIV)	Tier 3				
STRIBILD TAB	ELVITEGRAV-COBIC-EMTRICITAB-TENOFOVDF TAB 150-150-200-300 MG	Tier 5		X		
TIVICAY TAB 10MG	DOLUTEGRAVIR SODIUM TAB 10 MG (BASE EQUIV)	Tier 4				
TIVICAY TAB 25MG	DOLUTEGRAVIR SODIUM TAB 25 MG (BASE EQUIV)	Tier 4				
TIVICAY TAB 50MG	DOLUTEGRAVIR SODIUM TAB 50 MG (BASE EQUIV)	Tier 4				
TIVICAY PD TAB 5MG	DOLUTEGRAVIR SODIUM TAB FOR ORAL SUSP 5 MG (BASE EQUIV)	Tier 4				
TRIUMEQ TAB	ABACAVIR-DOLUTEGRAVIR-LAMIVUDINE TAB 600-50-300 MG	Tier 3		X		
TRIUMEQ PD TAB	ABACAVIR-DOLUTEGRAVIR-LAMIVUDINE TAB FOR ORAL SUS 60-5-30 MG	Tier 3		X		
Anti-HIV Agents, Non-nucleoside Reverse Transcriptase Inhibitors (NNRTI) - HIV Drugs						
COMPLERA TAB	EMTRICITABINE-RILPIVIRINE-TENOFOVIR DF TAB 200-25-300 MG	Tier 5		X		
DELSTRIGO TAB	DORAVIRINE-LAMIVUDINE-TENOFOVIR DF TAB 100-300-300 MG	Tier 3		X		
EDURANT TAB 25MG	RILPIVIRINE HCL TAB 25 MG (BASE EQUIVALENT)	Tier 3				
EDURANT PED TAB 2.5MG	RILPIVIRINE HCL TAB FOR ORAL SUSP 2.5 MG (BASE EQUIVALENT)	Tier 3				
EFAVIR/EMTRI TAB TENOFOVI	EFAVIRENZ-EMTRICITABINE-TENOFOVIR DF TAB 600-200-300 MG	Tier 3		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
EFAVIR/LAMIV TAB TENOFOVI	EFAVIRENZ-LAMIVUDINE-TENOFOVIR DF TAB 600-300-300 MG	Tier 3		X		
EFAVIR/LAMIV TAB TENOFOVI	EFAVIRENZ-LAMIVUDINE-TENOFOVIR DF TAB 400-300-300 MG	Tier 3		X		
EFAVIRENZ CAP 200MG	EFAVIRENZ CAP 200 MG	Tier 3				
EFAVIRENZ CAP 50MG	EFAVIRENZ CAP 50 MG	Tier 3				
EFAVIRENZ TAB 600MG	EFAVIRENZ TAB 600 MG	Tier 3				
EMTRIC/RILPI TAB TENOF DF	EMTRICITABINE-RILPIVIRINE-TENOFOVIR DF TAB 200-25-300 MG	Tier 4		X		
ETRAVIRINE TAB 100MG	ETRAVIRINE TAB 100 MG	Tier 3				
ETRAVIRINE TAB 200MG	ETRAVIRINE TAB 200 MG	Tier 3				
INTELENCE TAB 100MG	ETRAVIRINE TAB 100 MG	Tier 5				
INTELENCE TAB 200MG	ETRAVIRINE TAB 200 MG	Tier 5				
INTELENCE TAB 25MG	ETRAVIRINE TAB 25 MG	Tier 3				
JULUCA TAB 50-25MG	DOLUTEGRAVIR SODIUM-RILPIVIRINE HCL TAB 50-25 MG (BASE EQ)	Tier 3		X		
NEVIRAPINE SUS 50MG/5ML	NEVIRAPINE SUSP 50 MG/5ML	Tier 2				
NEVIRAPINE TAB 200MG	NEVIRAPINE TAB 200 MG	Tier 2				
NEVIRAPINE TAB 400MG ER	NEVIRAPINE TAB ER 24HR 400 MG	Tier 4				
ODEFSEY TAB	EMTRICITABINE-RILPIVIRINE-TENOFOVIR AF TAB 200-25-25 MG	Tier 5		X		
PIFELTRO TAB 100MG	DORAVIRINE TAB 100 MG	Tier 4				
SYMFI TAB	EFAVIRENZ-LAMIVUDINE-TENOFOVIR DF TAB 600-300-300 MG	Tier 3		X		
SYMFI LO TAB	EFAVIRENZ-LAMIVUDINE-TENOFOVIR DF TAB 400-300-300 MG	Tier 3		X		
Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI)						
SUNLENCA TAB 300MG	LENACAPAVIR SODIUM TAB THERAPY PACK 4 X 300 MG	Tier 5		X		
SUNLENCA TAB 300MG	LENACAPAVIR SODIUM TAB THERAPY PACK 5 X 300 MG	Tier 5		X		
SUNLENCA TAB 300MG	LENACAPAVIR SODIUM TAB 300 MG	Tier 5		X		
YEZTUGO TAB 300MG	LENACAPAVIR SODIUM TAB 300 MG	Tier 5		X		
Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI) - HIV Drugs						
ABACA/LAMIVU TAB 600-300	ABACAVIR SULFATE-LAMIVUDINE TAB 600-300 MG	Tier 3		X		
ABACAVIR SOL 20MG/ML	ABACAVIR SULFATE SOLN 20 MG/ML (BASE EQUIV)	Tier 2				
ABACAVIR TAB 300MG	ABACAVIR SULFATE TAB 300 MG (BASE EQUIV)	Tier 2				
CIMDUO TAB 300-300	LAMIVUDINE-TENOFOVIR DISOPROXIL FUMARATE TAB 300-300 MG	Tier 3		X		
DESCOVY TAB 120-15MG	EMTRICITABINE-TENOFOVIR ALAFENAMIDE FUMARATE TAB 120-15 MG	Tier 5		X		
DESCOVY TAB 200/25MG	EMTRICITABINE-TENOFOVIR ALAFENAMIDE FUMARATE TAB 200-25 MG	Tier 5		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
EMTR/TEN DF TAB 100-150	EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE TAB 100-150 MG	Tier 2		X		
EMTR/TEN DF TAB 133-200	EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE TAB 133-200 MG	Tier 2		X		
EMTR/TEN DF TAB 167-250	EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE TAB 167-250 MG	Tier 2		X		
EMTR/TENOFOV TAB 200-300	EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE TAB 200-300 MG	Tier 1		X		
EMTRICITABIN CAP 200MG	EMTRICITABINE CAPS 200 MG	Tier 3				
EMTRIVA SOL 10MG/ML	EMTRICITABINE SOLN 10 MG/ML	Tier 3				
LAMIVUD/ZIDO TAB 150-300	LAMIVUDINE-ZIDOVUDINE TAB 150-300 MG	Tier 2				
LAMIVUDINE SOL 10MG/ML	LAMIVUDINE ORAL SOLN 10 MG/ML	Tier 2				
LAMIVUDINE TAB 150MG	LAMIVUDINE TAB 150 MG	Tier 2				
LAMIVUDINE TAB 300MG	LAMIVUDINE TAB 300 MG	Tier 2				
RETROVIR CAP 100MG	ZIDOVUDINE CAP 100 MG	Tier 5				
RETROVIR SYP 50MG/5ML	ZIDOVUDINE SYRUP 10 MG/ML	Tier 4				
TENOFOVIR TAB 300MG	TENOFOVIR DISOPROXIL FUMARATE TAB 300 MG	Tier 1				
TRIZIVIR TAB	ABACAVIR SULFATE-LAMIVUDINE-ZIDOVUDINE TAB 300-150-300 MG	Tier 5				
TRUVADA TAB 100-150	EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE TAB 100-150 MG	Tier 5		X		
TRUVADA TAB 133-200	EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE TAB 133-200 MG	Tier 5		X		
TRUVADA TAB 167-250	EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE TAB 167-250 MG	Tier 5		X		
VIREAD POW 40MG/GM	TENOFOVIR DISOPROXIL FUMARATE ORAL POWDER 40 MG/GM	Tier 4				
VIREAD TAB 150MG	TENOFOVIR DISOPROXIL FUMARATE TAB 150 MG	Tier 3				
VIREAD TAB 200MG	TENOFOVIR DISOPROXIL FUMARATE TAB 200 MG	Tier 3				
VIREAD TAB 250MG	TENOFOVIR DISOPROXIL FUMARATE TAB 250 MG	Tier 3				
ZIDOVUDINE CAP 100MG	ZIDOVUDINE CAP 100 MG	Tier 2				
ZIDOVUDINE SYP 50MG/5ML	ZIDOVUDINE SYRUP 10 MG/ML	Tier 2				
ZIDOVUDINE TAB 300MG	ZIDOVUDINE TAB 300 MG	Tier 2				
Anti-HIV Agents, Other - HIV Drugs						
FUZEON INJ 90MG	ENFUVIRTIDE FOR INJ 90 MG	Tier 5				
MARAVIROC TAB 150MG	MARAVIROC TAB 150 MG	Tier 3				
MARAVIROC TAB 300MG	MARAVIROC TAB 300 MG	Tier 3				
RUKOBIA TAB 600MG ER	FOSTEMSAVIR TROMETHAMINE TAB ER 12HR 600 MG	Tier 5				
SELZENTRY SOL 20MG/ML	MARAVIROC ORAL SOLN 20 MG/ML	Tier 3	X			
SELZENTRY TAB 150MG	MARAVIROC TAB 150 MG	Tier 5				
SELZENTRY TAB 25MG	MARAVIROC TAB 25 MG	Tier 3				
SELZENTRY TAB 300MG	MARAVIROC TAB 300 MG	Tier 5				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
SELZENTRY TAB 75MG	MARAVIROC TAB 75 MG	Tier 3				
TYBOST TAB 150MG	COBICISTAT TAB 150 MG	Tier 3				
Anti-HIV Agents, Protease Inhibitors - HIV Drugs						
APTIVUS CAP 250MG	TIPRANAVIR CAP 250 MG	Tier 3				
ATAZANAVIR CAP 150MG	ATAZANAVIR SULFATE CAP 150 MG (BASE EQUIV)	Tier 3				
ATAZANAVIR CAP 200MG	ATAZANAVIR SULFATE CAP 200 MG (BASE EQUIV)	Tier 3				
ATAZANAVIR CAP 300MG	ATAZANAVIR SULFATE CAP 300 MG (BASE EQUIV)	Tier 3				
DARUNAVIR TAB 600MG	DARUNAVIR TAB 600 MG	Tier 2				
DARUNAVIR TAB 800MG	DARUNAVIR TAB 800 MG	Tier 2				
EVOTAZ TAB 300-150	ATAZANAVIR SULFATE-COBICISTAT TAB 300-150 MG (BASE EQUIV)	Tier 3				
FOSAMPRENAVI TAB 700MG	FOSAMPRENAVIR CALCIUM TAB 700 MG (BASE EQUIV)	Tier 3				
KALETRA SOL	LOPINAVIR-RITONAVIR SOLN 400-100 MG/5ML (80-20 MG/ML)	Tier 4				
KALETRA TAB 100-25MG	LOPINAVIR-RITONAVIR TAB 100-25 MG	Tier 5				
KALETRA TAB 200-50MG	LOPINAVIR-RITONAVIR TAB 200-50 MG	Tier 5				
LEXIVA SUS 50MG/ML	FOSAMPRENAVIR CALCIUM SUSP 50 MG/ML (BASE EQUIV)	Tier 3				
LOPIN/RITON SOL 80-20/ML	LOPINAVIR-RITONAVIR SOLN 400-100 MG/5ML (80-20 MG/ML)	Tier 3				
LOPIN/RITON TAB 100-25MG	LOPINAVIR-RITONAVIR TAB 100-25 MG	Tier 3				
LOPIN/RITON TAB 200-50MG	LOPINAVIR-RITONAVIR TAB 200-50 MG	Tier 3				
NORVIR CAP 100MG	RITONAVIR CAP 100 MG	Tier 3				
NORVIR POW 100MG	RITONAVIR POWDER PACKET 100 MG	Tier 3				
PREZCOBIX TAB 675/150	DARUNAVIR-COBICISTAT TAB 675-150 MG	Tier 3				
PREZCOBIX TAB 800-150	DARUNAVIR-COBICISTAT TAB 800-150 MG	Tier 3				
PREZISTA SUS 100MG/ML	DARUNAVIR ORAL SUSP 100 MG/ML	Tier 3				
PREZISTA TAB 150MG	DARUNAVIR TAB 150 MG	Tier 3				
PREZISTA TAB 75MG	DARUNAVIR TAB 75 MG	Tier 3				
REYATAZ POW 50MG	ATAZANAVIR SULFATE ORAL POWDER PACKET 50 MG (BASE EQUIV)	Tier 3				
RITONAVIR TAB 100MG	RITONAVIR TAB 100 MG	Tier 3				
VIRACEPT TAB 250MG	NELFINAVIR MESYLATE TAB 250 MG	Tier 3				
VIRACEPT TAB 625MG	NELFINAVIR MESYLATE TAB 625 MG	Tier 3				
Anti-Inflammatories, Inhaled Corticosteroids - Asthma/Lung Drugs						
ARNUITY ELPT INH 100MCG	FLUTICASONE FUROATE AEROSOL POWDER BREATH ACTIV 100 MCG/ACT	Tier 3		X		
ARNUITY ELPT INH 200MCG	FLUTICASONE FUROATE AEROSOL POWDER BREATH ACTIV 200 MCG/ACT	Tier 3		X		
ARNUITY ELPT INH 50MCG	FLUTICASONE FUROATE AEROSOL POWDER BREATH ACTIV 50 MCG/ACT	Tier 3		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
BUDESONIDE SUS 0.25MG/2	BUDESONIDE INHALATION SUSP 0.25 MG/2ML	Tier 3		X		
BUDESONIDE SUS 0.5MG/2	BUDESONIDE INHALATION SUSP 0.5 MG/2ML	Tier 3		X		
BUDESONIDE SUS 1MG/2ML	BUDESONIDE INHALATION SUSP 1 MG/2ML	Tier 3		X		
FLUNISOLIDE SPR 0.025%	FLUNISOLIDE NASAL SOLN 25 MCG/ACT (0.025%)	Tier 4				
FLUTICASONE SPR 50MCG	FLUTICASONE PROPIONATE NASAL SUSP 50 MCG/ACT	Tier 3		X		
MOMETASONE SPR 50MCG	MOMETASONE FUROATE NASAL SUSP 50 MCG/ACT	Tier 4		X		
NUCALA INJ 100MG/ML	MEPOLIZUMAB SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML	Tier 5	X	X		X
NUCALA INJ 100MG/ML	MEPOLIZUMAB SUBCUTANEOUS SOLUTION PREF SYRINGE 100 MG/ML	Tier 5	X	X		X
NUCALA INJ 40MG/0.4	MEPOLIZUMAB SUBCUTANEOUS SOLUTION PREF SYRINGE 40 MG/0.4ML	Tier 5	X	X		
QVAR REDIHA AER 80MCG	BECLOMETHASONE DIPROP HFA BREATH ACT INH AER 80 MCG/ACT	Tier 3		X		
QVAR REDIHAL AER 40MCG	BECLOMETHASONE DIPROP HFA BREATH ACT INH AER 40 MCG/ACT	Tier 3		X		
ZETONNA AER 37MCG	CICLESONIDE NASAL AEROSOL SOLN 37 MCG/ACT (50 MCG/VALVE)	Tier 4		X		
Anti-Influenza Agents - Flu Drugs						
OSELTAMIVIR CAP 30MG	OSELTAMIVIR PHOSPHATE CAP 30 MG (BASE EQUIV)	Tier 3				
OSELTAMIVIR CAP 45MG	OSELTAMIVIR PHOSPHATE CAP 45 MG (BASE EQUIV)	Tier 3				
OSELTAMIVIR CAP 75MG	OSELTAMIVIR PHOSPHATE CAP 75 MG (BASE EQUIV)	Tier 3				
OSELTAMIVIR SUS 6MG/ML	OSELTAMIVIR PHOSPHATE FOR SUSP 6 MG/ML (BASE EQUIV)	Tier 3				
RELENZA MIS DISKHALE	ZANAMIVIR AEROSOL POWDER BREATH ACTIVATED 5 MG/ACT	Tier 4				
RIMANTADINE TAB 100MG	RIMANTADINE HYDROCHLORIDE TAB 100 MG	Tier 2				
XOFLUZA TAB 40MG	BALOXAVIR MARBOXIL TAB THERAPY PACK 1 X 40 MG (40 MG DOSE)	Tier 4		X		
XOFLUZA TAB 80MG	BALOXAVIR MARBOXIL TAB THERAPY PACK 1 X 80 MG (80 MG DOSE)	Tier 4		X		
Antiandrogens - Hormone Suppressants						
ABIRATERONE TAB 250MG	ABIRATERONE ACETATE TAB 250 MG	Tier 4		X		X
ABIRTEGA TAB 250MG	ABIRATERONE ACETATE TAB 250 MG	Tier 4		X		X
BICALUTAMIDE TAB 50MG	BICALUTAMIDE TAB 50 MG	Tier 2				
ERLEADA TAB 240MG	APALUTAMIDE TAB 240 MG	Tier 4	X	X		
ERLEADA TAB 60MG	APALUTAMIDE TAB 60 MG	Tier 4	X	X		X
NUBEQA TAB 300MG	DAROLUTAMIDE TAB 300 MG	Tier 4	X	X		X
ORGOVYX TAB 120MG	RELUGOLIX TAB 120 MG	Tier 5	X	X		X
XTANDI CAP 40MG	ENZALUTAMIDE CAP 40 MG	Tier 4	X	X		X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
Antiangiogenic Agents - Chemotherapy Agents						
LENALIDOMIDE CAP 10MG	LENALIDOMIDE CAP 10 MG	Tier 4	X	X		X
LENALIDOMIDE CAP 15MG	LENALIDOMIDE CAP 15 MG	Tier 4	X	X		X
LENALIDOMIDE CAP 2.5MG	LENALIDOMIDE CAPS 2.5 MG	Tier 4	X	X		X
LENALIDOMIDE CAP 20MG	LENALIDOMIDE CAP 20 MG	Tier 4	X	X		X
LENALIDOMIDE CAP 25MG	LENALIDOMIDE CAP 25 MG	Tier 4	X	X		X
LENALIDOMIDE CAP 5MG	LENALIDOMIDE CAP 5 MG	Tier 4	X	X		X
POMALYST CAP 1MG	POMALIDOMIDE CAP 1 MG	Tier 5	X	X		X
POMALYST CAP 2MG	POMALIDOMIDE CAP 2 MG	Tier 5	X	X		X
POMALYST CAP 3MG	POMALIDOMIDE CAP 3 MG	Tier 5	X	X		X
POMALYST CAP 4MG	POMALIDOMIDE CAP 4 MG	Tier 5	X	X		X
REVLIMID CAP 10MG	LENALIDOMIDE CAP 10 MG	Tier 4	X	X		X
REVLIMID CAP 15MG	LENALIDOMIDE CAP 15 MG	Tier 4	X	X		X
REVLIMID CAP 2.5MG	LENALIDOMIDE CAPS 2.5 MG	Tier 4	X	X		X
REVLIMID CAP 20MG	LENALIDOMIDE CAP 20 MG	Tier 4	X	X		X
REVLIMID CAP 25MG	LENALIDOMIDE CAP 25 MG	Tier 4	X	X		X
REVLIMID CAP 5MG	LENALIDOMIDE CAP 5 MG	Tier 4	X	X		X
THALOMID CAP 100MG	THALIDOMIDE CAP 100 MG	Tier 4	X	X		X
THALOMID CAP 150MG	THALIDOMIDE CAP 150 MG	Tier 4	X	X		X
THALOMID CAP 200MG	THALIDOMIDE CAP 200 MG	Tier 4	X	X		X
THALOMID CAP 50MG	THALIDOMIDE CAP 50 MG	Tier 4	X	X		X
Antiarrhythmics - Heart Regulation Drugs						
AMIODARONE TAB 100MG	AMIODARONE HCL TAB 100 MG	Tier 2				
AMIODARONE TAB 200MG	AMIODARONE HCL TAB 200 MG	Tier 2				
AMIODARONE TAB 400MG	AMIODARONE HCL TAB 400 MG	Tier 2				
BETAPACE AF TAB 120MG	SOTALOL HCL (AFIB/AFL) TAB 120 MG	Tier 5				
BETAPACE AF TAB 160MG	SOTALOL HCL (AFIB/AFL) TAB 160 MG	Tier 5				
BETAPACE AF TAB 80MG	SOTALOL HCL (AFIB/AFL) TAB 80 MG	Tier 5				
DISOPYRAMIDE CAP 100MG	DISOPYRAMIDE PHOSPHATE CAP 100 MG	Tier 2				
DISOPYRAMIDE CAP 150MG	DISOPYRAMIDE PHOSPHATE CAP 150 MG	Tier 2				
DOFETILIDE CAP 125MCG	DOFETILIDE CAP 125 MCG (0.125 MG)	Tier 3				
DOFETILIDE CAP 250MCG	DOFETILIDE CAP 250 MCG (0.25 MG)	Tier 3				
DOFETILIDE CAP 500MCG	DOFETILIDE CAP 500 MCG (0.5 MG)	Tier 3				
FLECAINIDE TAB 100MG	FLECAINIDE ACETATE TAB 100 MG	Tier 2				
FLECAINIDE TAB 150MG	FLECAINIDE ACETATE TAB 150 MG	Tier 2				
FLECAINIDE TAB 50MG	FLECAINIDE ACETATE TAB 50 MG	Tier 2				
MEXILETINE CAP 150MG	MEXILETINE HCL CAP 150 MG	Tier 2				
MEXILETINE CAP 200MG	MEXILETINE HCL CAP 200 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
MEXILETINE CAP 250MG	MEXILETINE HCL CAP 250 MG	Tier 2				
NORPACE CAP 100MG	DISOPYRAMIDE PHOSPHATE CAP 100 MG	Tier 5				
NORPACE CAP 100MG CR	DISOPYRAMIDE PHOSPHATE CAP ER 12HR 100 MG	Tier 3				
NORPACE CAP 150MG	DISOPYRAMIDE PHOSPHATE CAP 150 MG	Tier 5				
NORPACE CAP 150MG CR	DISOPYRAMIDE PHOSPHATE CAP ER 12HR 150 MG	Tier 3				
PACERONE TAB 100MG	AMIODARONE HCL TAB 100 MG	Tier 4				
PACERONE TAB 200MG	AMIODARONE HCL TAB 200 MG	Tier 5				
PACERONE TAB 400MG	AMIODARONE HCL TAB 400 MG	Tier 4				
PROPAFENONE CAP 225MG ER	PROPAFENONE HCL CAP ER 12HR 225 MG	Tier 5				
PROPAFENONE CAP 325MG ER	PROPAFENONE HCL CAP ER 12HR 325 MG	Tier 5				
PROPAFENONE CAP 425MG ER	PROPAFENONE HCL CAP ER 12HR 425 MG	Tier 5				
PROPAFENONE TAB 150MG	PROPAFENONE HCL TAB 150 MG	Tier 2				
PROPAFENONE TAB 225MG	PROPAFENONE HCL TAB 225 MG	Tier 2				
PROPAFENONE TAB 300MG	PROPAFENONE HCL TAB 300 MG	Tier 2				
QUINIDINE GL TAB 324MG CR	QUINIDINE GLUCONATE TAB ER 324 MG	Tier 2				
QUINIDINE GL TAB 324MG ER	QUINIDINE GLUCONATE TAB ER 324 MG	Tier 2				
QUINIDINE SU TAB 200MG	QUINIDINE SULFATE TAB 200 MG	Tier 2				
QUINIDINE SU TAB 300MG	QUINIDINE SULFATE TAB 300 MG	Tier 2				
SOTALOL TAB 120MG	SOTALOL HCL TAB 120 MG	Tier 2				
SOTALOL TAB 160MG	SOTALOL HCL TAB 160 MG	Tier 2				
SOTALOL TAB 80MG	SOTALOL HCL TAB 80 MG	Tier 2				
SOTALOL AF TAB 120MG	SOTALOL HCL (AFIB/AFL) TAB 120 MG	Tier 2				
SOTALOL AF TAB 160MG	SOTALOL HCL (AFIB/AFL) TAB 160 MG	Tier 2				
SOTALOL AF TAB 80MG	SOTALOL HCL (AFIB/AFL) TAB 80 MG	Tier 2				
SOTALOL HCL TAB 120MG	SOTALOL HCL TAB 120 MG	Tier 2				
SOTALOL HCL TAB 160MG	SOTALOL HCL TAB 160 MG	Tier 2				
SOTALOL HCL TAB 240MG	SOTALOL HCL TAB 240 MG	Tier 2				
SOTALOL HCL TAB 80MG	SOTALOL HCL TAB 80 MG	Tier 2				
SOTYLIZE SOL 5MG/ML	SOTALOL HCL ORAL SOLUTION 5 MG/ML	Tier 5	X			
TIKOSYN CAP 125MCG	DOFETILIDE CAP 125 MCG (0.125 MG)	Tier 5				
TIKOSYN CAP 250MCG	DOFETILIDE CAP 250 MCG (0.25 MG)	Tier 5				
TIKOSYN CAP 500MCG	DOFETILIDE CAP 500 MCG (0.5 MG)	Tier 5				
Antibacterials, Other						
VOWST CAP	FECAL MICROBIOTA SPORES, LIVE-BRPK CAPS	Tier 5	X	X		X
Antibacterials, Other - Antibiotics						
ALTABAX OIN 1%	RETAPAMULIN OINT 1%	Tier 4		X		
ARZOL SILVER MIS NITR APP	SILVER NITRATE-POTASSIUM NITRATE APPLICATOR 75-25%	Tier 4				
BENZALKONIUM SOL 50%	BENZALKONIUM CHLORIDE SOLN 50%	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
BENZALKONIUM SOL NF	BENZALKONIUM CHLORIDE SOLN	Tier 3				
CLEOCIN CAP 150MG	CLINDAMYCIN HCL CAP 150 MG	Tier 5				
CLEOCIN CAP 300MG	CLINDAMYCIN HCL CAP 300 MG	Tier 5				
CLEOCIN CAP 75MG	CLINDAMYCIN HCL CAP 75 MG	Tier 3				
CLEOCIN CRE 2% VAG	CLINDAMYCIN PHOSPHATE VAGINAL CREAM 2%	Tier 5				
CLEOCIN PED SOL 75MG/5ML	CLINDAMYCIN PALMITATE HCL FOR SOLN 75 MG/5ML (BASE EQUIV)	Tier 5				
CLINDAMYCIN CAP 150MG	CLINDAMYCIN HCL CAP 150 MG	Tier 2				
CLINDAMYCIN CAP 300MG	CLINDAMYCIN HCL CAP 300 MG	Tier 2				
CLINDAMYCIN CAP 75MG	CLINDAMYCIN HCL CAP 75 MG	Tier 2				
CLINDAMYCIN CRE 2% VAG	CLINDAMYCIN PHOSPHATE VAGINAL CREAM 2%	Tier 3				
CLINDAMYCIN SOL 75MG/5ML	CLINDAMYCIN PALMITATE HCL FOR SOLN 75 MG/5ML (BASE EQUIV)	Tier 3				
CLINDESSE CRE 2%	CLINDAMYCIN PHOSPHATE (ONE DOSE) VAGINAL CREAM 2%	Tier 3				
COLISTIMETH INJ 150MG	COLISTIMETHATE SOD FOR INJ 150 MG (COLISTIN BASE ACTIVITY)	Tier 2				
COLY-MYCIN M INJ 150MG	COLISTIMETHATE SOD FOR INJ 150 MG (COLISTIN BASE ACTIVITY)	Tier 5				
FEM PH GEL	ACETIC ACID-OXYQUINOLINE VAGINAL GEL 0.9-0.025%	Tier 5				
FIRVANQ SOL 25MG/ML	VANCOMYCIN HCL FOR ORAL SOLN 25 MG/ML (BASE EQUIVALENT)	Tier 5				
FIRVANQ SOL 50MG/ML	VANCOMYCIN HCL FOR ORAL SOLN 50 MG/ML (BASE EQUIVALENT)	Tier 5				
FOSFOMYCIN POW 3GM	FOSFOMYCIN TROMETHAMINE POWD PACK 3 GM (BASE EQUIVALENT)	Tier 4				
HIPREX TAB 1GM	METHENAMINE HIPPURATE TAB 1 GM	Tier 5				
IODINE TIN 2%	*IODINE TINCTURE**	Tier 2				
LIKMEZ SUS 500/5ML	METRONIDAZOLE SUSP 500 MG/5ML	Tier 5				
LINEZOLID SUS 100/5ML	LINEZOLID FOR SUSP 100 MG/5ML	Tier 3				
LINEZOLID TAB 600MG	LINEZOLID TAB 600 MG	Tier 3				
LUGOLS SOL IODINE	*IODINE SOLUTION**	Tier 4				
MACROBID CAP 100MG	NITROFURANTOIN MONOHYDRATE MACROCRYSTALLINE CAP 100 MG	Tier 5				
MACRODANTIN CAP 100MG	NITROFURANTOIN MACROCRYSTALLINE CAP 100 MG	Tier 5				
MACRODANTIN CAP 25MG	NITROFURANTOIN MACROCRYSTALLINE CAP 25 MG	Tier 5				
MACRODANTIN CAP 50MG	NITROFURANTOIN MACROCRYSTALLINE CAP 50 MG	Tier 5				
MAFENIDE ACE PAK 5%	MAFENIDE ACETATE PACKET FOR TOPICAL SOLN 5% (50 GM)	Tier 4				
METHENAM HIP TAB 1GM	METHENAMINE HIPPURATE TAB 1 GM	Tier 2				
METHENAM MAN TAB 1000MG	METHENAMINE MANDELATE TAB 1 GM	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
METHENAM MAN TAB 500MG	METHENAMINE MANDELATE TAB 0.5 GM	Tier 2				
METROCREAM CRE 0.75%	METRONIDAZOLE CREAM 0.75%	Tier 5				
METROLOTION LOT 0.75%	METRONIDAZOLE LOTION 0.75%	Tier 5				
METRONIDAZOL CAP 375MG	METRONIDAZOLE CAP 375 MG	Tier 2				
METRONIDAZOL CRE 0.75%	METRONIDAZOLE CREAM 0.75%	Tier 2				
METRONIDAZOL GEL 0.75%	METRONIDAZOLE GEL 0.75%	Tier 2				
METRONIDAZOL GEL 0.75%VAG	METRONIDAZOLE VAGINAL GEL 0.75%	Tier 3				
METRONIDAZOL LOT 0.75%	METRONIDAZOLE LOTION 0.75%	Tier 2				
METRONIDAZOL TAB 250MG	METRONIDAZOLE TAB 250 MG	Tier 2				
METRONIDAZOL TAB 500MG	METRONIDAZOLE TAB 500 MG	Tier 2				
MUPIROCIN CRE 2%	MUPIROCIN CALCIUM CREAM 2%	Tier 4		X		
MUPIROCIN OIN 2%	MUPIROCIN OINT 2%	Tier 2		X		
NITROFUR MAC CAP 100MG	NITROFURANTOIN MACROCRYSTALLINE CAP 100 MG	Tier 2				
NITROFUR MAC CAP 25MG	NITROFURANTOIN MACROCRYSTALLINE CAP 25 MG	Tier 2				
NITROFUR MAC CAP 50MG	NITROFURANTOIN MACROCRYSTALLINE CAP 50 MG	Tier 2				
NITROFURANTN CAP 100MG	NITROFURANTOIN MONOHYDRATE MACROCRYSTALLINE CAP 100 MG	Tier 2				
PHENOL LIQ	PHENOL LIQUID (BULK)	Tier 4				
PHENOL LIQ 89%	PHENOL LIQUID (BULK)	Tier 4				
PHENOL LIQ 89%	PHENOL LIQUID (BULK)	Tier 3				
SILVADENE CRE 1%	SILVER SULFADIAZINE CREAM 1%	Tier 5				
SILVER NITRA SOL 0.5%	SILVER NITRATE SOLN 0.5%	Tier 2				
SILVER SULFA CRE 1%	SILVER SULFADIAZINE CREAM 1%	Tier 2				
SSD CRE 1%	SILVER SULFADIAZINE CREAM 1%	Tier 2				
SULFAMYLN CRE 85MG/GM	MAFENIDE ACETATE CREAM 85 MG/GM	Tier 4				
TINIDAZOLE TAB 250MG	TINIDAZOLE TAB 250 MG	Tier 4				
TINIDAZOLE TAB 500MG	TINIDAZOLE TAB 500 MG	Tier 4				
TRIMETHOPRIM TAB 100MG	TRIMETHOPRIM TAB 100 MG	Tier 2				
VANCOCIN CAP 125MG	VANCOMYCIN HCL CAP 125 MG (BASE EQUIVALENT)	Tier 5				
VANCOCIN CAP 250MG	VANCOMYCIN HCL CAP 250 MG (BASE EQUIVALENT)	Tier 5				
VANCOMYCIN CAP 125MG	VANCOMYCIN HCL CAP 125 MG (BASE EQUIVALENT)	Tier 2				
VANCOMYCIN CAP 250MG	VANCOMYCIN HCL CAP 250 MG (BASE EQUIVALENT)	Tier 2				
VANCOMYCIN SOL 250/5ML	VANCOMYCIN HCL FOR ORAL SOLN 50 MG/ML (BASE EQUIVALENT)	Tier 2				
VANCOMYCIN SOL 25MG/ML	VANCOMYCIN HCL FOR ORAL SOLN 25 MG/ML (BASE EQUIVALENT)	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
VANCOMYCIN SOL 50MG/ML	VANCOMYCIN HCL FOR ORAL SOLN 50 MG/ML (BASE EQUIVALENT)	Tier 2				
VANDAZOLE GEL 0.75%	METRONIDAZOLE VAGINAL GEL 0.75%	Tier 5				
XACIATO GEL 2%	CLINDAMYCIN PHOSPHATE VAGINAL GEL 2%	Tier 3		X		
ZYVOX SUS 100MG/5M	LINEZOLID FOR SUSP 100 MG/5ML	Tier 5				
Anticholinergics - Parkinson's Disease Drugs						
BENZTROPINE TAB 0.5MG	BENZTROPINE MESYLATE TAB 0.5 MG	Tier 2				
BENZTROPINE TAB 1MG	BENZTROPINE MESYLATE TAB 1 MG	Tier 2				
BENZTROPINE TAB 2MG	BENZTROPINE MESYLATE TAB 2 MG	Tier 2				
TRIHEXYPHEN SOL 0.4MG/ML	TRIHEXYPHENIDYL HCL ORAL SOLN 0.4 MG/ML	Tier 2				
TRIHEXYPHEN TAB 2MG	TRIHEXYPHENIDYL HCL TAB 2 MG	Tier 2				
TRIHEXYPHEN TAB 5MG	TRIHEXYPHENIDYL HCL TAB 5 MG	Tier 2				
Anticoagulants - Blood Thinners						
ANTICOAGULNT SOL SOD CITR	ANTICOAGULANT SODIUM CITRATE SOLN 4%	Tier 4				
DABIGATRAN CAP 110MG	DABIGATRAN ETEXILATE MESYLATE CAP 110 MG (ETEXILATE BASE EQ)	Tier 3		X		
DABIGATRAN CAP 150MG	DABIGATRAN ETEXILATE MESYLATE CAP 150 MG (ETEXILATE BASE EQ)	Tier 3		X		
DABIGATRAN CAP 75MG	DABIGATRAN ETEXILATE MESYLATE CAP 75 MG (ETEXILATE BASE EQ)	Tier 3		X		
ELIQUIS CAP 0.15MG	APIXABAN CAP SPRINKLE 0.15 MG	Tier 3				
ELIQUIS TAB 0.5MG	APIXABAN TAB FOR ORAL SUSP 0.5 MG	Tier 3				
ELIQUIS TAB 1.5MG	APIXABAN TAB FOR ORAL SUSP PACK 3 X 0.5 MG (1.5 MG)	Tier 3				
ELIQUIS TAB 2.5MG	APIXABAN TAB 2.5 MG	Tier 3		X		
ELIQUIS TAB 2MG	APIXABAN TAB FOR ORAL SUSP PACK 4 X 0.5 MG (2 MG)	Tier 3				
ELIQUIS TAB 5MG	APIXABAN TAB 5 MG	Tier 3		X		
ELIQUIS ST P TAB 5MG	APIXABAN TAB STARTER PACK 5 MG	Tier 3		X		
ENOXAPARIN INJ 100MG/ML	ENOXAPARIN SODIUM INJ SOLN PREF SYR 100 MG/ML	Tier 3		X		
ENOXAPARIN INJ 120/0.8	ENOXAPARIN SODIUM INJ SOLN PREF SYR 120 MG/0.8ML	Tier 3		X		
ENOXAPARIN INJ 150MG/ML	ENOXAPARIN SODIUM INJ SOLN PREF SYR 150 MG/ML	Tier 3		X		
ENOXAPARIN INJ 30/0.3ML	ENOXAPARIN SODIUM INJ SOLN PREF SYR 30 MG/0.3ML	Tier 3		X		
ENOXAPARIN INJ 300/3ML	ENOXAPARIN SODIUM INJ 300 MG/3ML	Tier 3		X		
ENOXAPARIN INJ 40/0.4ML	ENOXAPARIN SODIUM INJ SOLN PREF SYR 40 MG/0.4ML	Tier 3		X		
ENOXAPARIN INJ 60/0.6ML	ENOXAPARIN SODIUM INJ SOLN PREF SYR 60 MG/0.6ML	Tier 3		X		
ENOXAPARIN INJ 80/0.8ML	ENOXAPARIN SODIUM INJ SOLN PREF SYR 80 MG/0.8ML	Tier 3		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ENOXAPARIN INJ 80MG/0.8	ENOXAPARIN SODIUM INJ SOLN PREF SYR 80 MG/0.8ML	Tier 3		X		
FONDAPARINUX INJ 10/0.8ML	FONDAPARINUX SODIUM SUBCUTANEOUS INJ 10 MG/0.8ML	Tier 3		X		
FONDAPARINUX INJ 2.5/0.5	FONDAPARINUX SODIUM SUBCUTANEOUS INJ 2.5 MG/0.5ML	Tier 3		X		
FONDAPARINUX INJ 5/0.4ML	FONDAPARINUX SODIUM SUBCUTANEOUS INJ 5 MG/0.4ML	Tier 3		X		
FONDAPARINUX INJ 7.5/0.6	FONDAPARINUX SODIUM SUBCUTANEOUS INJ 7.5 MG/0.6ML	Tier 3		X		
HEPARIN SOD INJ 1000/ML	HEPARIN SODIUM (PORCINE) PF INJ 1000 UNIT/ML	Tier 2				
HEPARIN SOD INJ 1000/ML	HEPARIN SODIUM (PORCINE) INJ 1000 UNIT/ML	Tier 2				
HEPARIN SOD INJ 10000/10	HEPARIN SODIUM (PORCINE) INJ 1000 UNIT/ML	Tier 2				
HEPARIN SOD INJ 10000/ML	HEPARIN SODIUM (PORCINE) INJ 10000 UNIT/ML	Tier 2				
HEPARIN SOD INJ 2000/2ML	HEPARIN SODIUM (PORCINE) PF INJ 1000 UNIT/ML	Tier 2				
HEPARIN SOD INJ 20000/ML	HEPARIN SODIUM (PORCINE) INJ 20000 UNIT/ML	Tier 2				
HEPARIN SOD INJ 30000/30	HEPARIN SODIUM (PORCINE) INJ 1000 UNIT/ML	Tier 2				
HEPARIN SOD INJ 5000/0.5	HEPARIN SODIUM (PORCINE) PF INJ 5000 UNIT/0.5ML	Tier 2				
HEPARIN SOD INJ 5000/0.5	HEPARIN SODIUM (PORCINE) INJ SOLN PREF SYR 5000 UNIT/0.5ML	Tier 2				
HEPARIN SOD INJ 5000/ML	HEPARIN SODIUM (PORCINE) INJ 5000 UNIT/ML	Tier 2				
HEPARIN SOD INJ 5000/ML	HEPARIN SODIUM (PORCINE) PF INJ 5000 UNIT/ML	Tier 2				
HEPARIN SOD INJ 50000/10	HEPARIN SODIUM (PORCINE) INJ 5000 UNIT/ML	Tier 2				
JANTOVEN TAB 10MG	WARFARIN SODIUM TAB 10 MG	Tier 2				
JANTOVEN TAB 1MG	WARFARIN SODIUM TAB 1 MG	Tier 2				
JANTOVEN TAB 2.5MG	WARFARIN SODIUM TAB 2.5 MG	Tier 2				
JANTOVEN TAB 2MG	WARFARIN SODIUM TAB 2 MG	Tier 2				
JANTOVEN TAB 3MG	WARFARIN SODIUM TAB 3 MG	Tier 2				
JANTOVEN TAB 4MG	WARFARIN SODIUM TAB 4 MG	Tier 2				
JANTOVEN TAB 5MG	WARFARIN SODIUM TAB 5 MG	Tier 2				
JANTOVEN TAB 6MG	WARFARIN SODIUM TAB 6 MG	Tier 2				
JANTOVEN TAB 7.5MG	WARFARIN SODIUM TAB 7.5 MG	Tier 2				
NOCLOT-50 SOL ACD-A	*ANTICOAGULANT CITRATE DEXTROSE SOLUTION A**	Tier 4				
RIVAROXABAN SUS 1MG/ML	RIVAROXABAN FOR SUSP 1 MG/ML	Tier 3		X		
RIVAROXABAN TAB 2.5MG	RIVAROXABAN TAB 2.5 MG	Tier 3		X		
TRICITRASOL CON	ANTICOAGULANT SODIUM CITRATE CONCENTRATE 46.7%	Tier 4				
WARFARIN TAB 10MG	WARFARIN SODIUM TAB 10 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
WARFARIN TAB 1MG	WARFARIN SODIUM TAB 1 MG	Tier 2				
WARFARIN TAB 2.5MG	WARFARIN SODIUM TAB 2.5 MG	Tier 2				
WARFARIN TAB 2MG	WARFARIN SODIUM TAB 2 MG	Tier 2				
WARFARIN TAB 3MG	WARFARIN SODIUM TAB 3 MG	Tier 2				
WARFARIN TAB 4MG	WARFARIN SODIUM TAB 4 MG	Tier 2				
WARFARIN TAB 5MG	WARFARIN SODIUM TAB 5 MG	Tier 2				
WARFARIN TAB 6MG	WARFARIN SODIUM TAB 6 MG	Tier 2				
WARFARIN TAB 7.5MG	WARFARIN SODIUM TAB 7.5 MG	Tier 2				
XARELTO SUS 1MG/ML	RIVAROXABAN FOR SUSP 1 MG/ML	Tier 3		X		
XARELTO TAB 10MG	RIVAROXABAN TAB 10 MG	Tier 3		X		
XARELTO TAB 15MG	RIVAROXABAN TAB 15 MG	Tier 3		X		
XARELTO TAB 2.5MG	RIVAROXABAN TAB 2.5 MG	Tier 3		X		
XARELTO TAB 20MG	RIVAROXABAN TAB 20 MG	Tier 3		X		
XARELTO STAR TAB 15/20MG	RIVAROXABAN TAB STARTER THERAPY PACK 15 MG & 20 MG	Tier 3		X		
Anticonvulsants, Other						
DIACOMIT CAP 250MG	STIRIPENTOL CAP 250 MG	Tier 5	X		X	X
DIACOMIT CAP 500MG	STIRIPENTOL CAP 500 MG	Tier 5	X		X	X
DIACOMIT PAK 250MG	STIRIPENTOL PACKET 250 MG	Tier 5	X		X	X
DIACOMIT PAK 500MG	STIRIPENTOL PACKET 500 MG	Tier 5	X		X	X
ZTALMY SUS 50MG/ML	GANAXOLONE SUSP 50 MG/ML	Tier 5	X			X
Anticonvulsants, Other - Seizure Control Drugs						
EPIDIOLEX SOL 100MG/ML	CANNABIDIOL SOLN 100 MG/ML	Tier 5	X			X
LEVETIRACETA SOL 100MG/ML	LEVETIRACETAM ORAL SOLN 100 MG/ML	Tier 2				
LEVETIRACETA SOL 500/5ML	LEVETIRACETAM ORAL SOLN 100 MG/ML	Tier 2				
LEVETIRACETA TAB 1000MG	LEVETIRACETAM TAB 1000 MG	Tier 2				
LEVETIRACETA TAB 250MG	LEVETIRACETAM TAB 250 MG	Tier 2				
LEVETIRACETA TAB 500MG	LEVETIRACETAM TAB 500 MG	Tier 2				
LEVETIRACETA TAB 500MG ER	LEVETIRACETAM TAB ER 24HR 500 MG	Tier 3				
LEVETIRACETA TAB 750MG	LEVETIRACETAM TAB 750 MG	Tier 2				
LEVETIRACETA TAB 750MG ER	LEVETIRACETAM TAB ER 24HR 750 MG	Tier 3				
NAYZILAM SPR 5MG	MIDAZOLAM NASAL SPRAY SOLN 5 MG/0.1 ML	Tier 4	X	X		
PHENOBARB ELX 20MG/5ML	PHENOBARBITAL ELIXIR 20 MG/5ML	Tier 2				
PHENOBARB SOL 20MG/5ML	PHENOBARBITAL ELIXIR 20 MG/5ML	Tier 2				
PHENOBARB TAB 100MG	PHENOBARBITAL TAB 100 MG	Tier 2				
PHENOBARB TAB 15MG	PHENOBARBITAL TAB 15 MG	Tier 2				
PHENOBARB TAB 16.2MG	PHENOBARBITAL TAB 16.2 MG	Tier 2				
PHENOBARB TAB 30MG	PHENOBARBITAL TAB 30 MG	Tier 2				
PHENOBARB TAB 32.4MG	PHENOBARBITAL TAB 32.4 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PHENOBARB TAB 60MG	PHENOBARBITAL TAB 60 MG	Tier 2				
PHENOBARB TAB 64.8MG	PHENOBARBITAL TAB 64.8 MG	Tier 2				
PHENOBARB TAB 97.2MG	PHENOBARBITAL TAB 97.2 MG	Tier 2				
ROWEEPRA TAB 500MG	LEVETIRACETAM TAB 500 MG	Tier 2				
Antidepressants, Other						
ZURZUVAE CAP 20MG	ZURANOLONE CAP 20 MG	Tier 4	X	X		X
ZURZUVAE CAP 25MG	ZURANOLONE CAP 25 MG	Tier 4	X	X		X
ZURZUVAE CAP 30MG	ZURANOLONE CAP 30 MG	Tier 4	X	X		X
Antidepressants, Other - Antidepressants						
BUPROPION TAB 100MG	BUPROPION HCL TAB 100 MG	Tier 2				
BUPROPION TAB 100MG SR	BUPROPION HCL TAB ER 12HR 100 MG	Tier 2				
BUPROPION TAB 150MG SR	BUPROPION HCL TAB ER 12HR 150 MG	Tier 2				
BUPROPION TAB 150MG XL	BUPROPION HCL TAB ER 24HR 150 MG	Tier 2				
BUPROPION TAB 200MG SR	BUPROPION HCL TAB ER 12HR 200 MG	Tier 2				
BUPROPION TAB 300MG XL	BUPROPION HCL TAB ER 24HR 300 MG	Tier 2				
BUPROPION TAB 75MG	BUPROPION HCL TAB 75 MG	Tier 2				
MIRTAZAPINE TAB 15MG	MIRTAZAPINE TAB 15 MG	Tier 2				
MIRTAZAPINE TAB 15MG ODT	MIRTAZAPINE ORALLY DISINTEGRATING TAB 15 MG	Tier 2				
MIRTAZAPINE TAB 30MG	MIRTAZAPINE TAB 30 MG	Tier 2				
MIRTAZAPINE TAB 30MG ODT	MIRTAZAPINE ORALLY DISINTEGRATING TAB 30 MG	Tier 2				
MIRTAZAPINE TAB 45MG	MIRTAZAPINE TAB 45 MG	Tier 2				
MIRTAZAPINE TAB 45MG ODT	MIRTAZAPINE ORALLY DISINTEGRATING TAB 45 MG	Tier 2				
MIRTAZAPINE TAB 7.5MG	MIRTAZAPINE TAB 7.5 MG	Tier 2				
SPRAVATO SOL 56MG DOS	ESKETAMINE HCL NASAL SOLN 28 MG/DEVICE X 2 (56 MG DOSE PACK)	Tier 5	X	X		
SPRAVATO SOL 84MG DOS	ESKETAMINE HCL NASAL SOLN 28 MG/DEVICE X 3 (84 MG DOSE PACK)	Tier 5	X	X		
Antidiabetic Agents						
BRENZAVVY TAB 20MG	BEXAGLIFLOZIN TAB 20 MG	Tier 4		X	X	
Antidiabetic Agents - Diabetic Drugs						
ACARBOSE TAB 100MG	ACARBOSE TAB 100 MG	Tier 2				
ACARBOSE TAB 25MG	ACARBOSE TAB 25 MG	Tier 2				
ACARBOSE TAB 50MG	ACARBOSE TAB 50 MG	Tier 2				
ALOG/PIOGLIT TAB 12.5-30	ALOGLIPTIN-PIOGLITAZONE TAB 12.5-30 MG	Tier 3		X		
ALOG/PIOGLIT TAB 25-15MG	ALOGLIPTIN-PIOGLITAZONE TAB 25-15 MG	Tier 3		X		
ALOG/PIOGLIT TAB 25-30MG	ALOGLIPTIN-PIOGLITAZONE TAB 25-30 MG	Tier 3		X		
ALOG/PIOGLIT TAB 25-45MG	ALOGLIPTIN-PIOGLITAZONE TAB 25-45 MG	Tier 3		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ALOGLIPTIN TAB 12.5MG	ALOGLIPTIN BENZOATE TAB 12.5 MG (BASE EQUIV)	Tier 3		X		
ALOGLIPTIN TAB 25MG	ALOGLIPTIN BENZOATE TAB 25 MG (BASE EQUIV)	Tier 3		X		
ALOGLIPTIN TAB 6.25MG	ALOGLIPTIN BENZOATE TAB 6.25 MG (BASE EQUIV)	Tier 3		X		
ALOGLIPTIN/ TAB METFORM	ALOGLIPTIN-METFORMIN HCL TAB 12.5-500 MG	Tier 3		X		
ALOGLIPTIN/ TAB METFORM	ALOGLIPTIN-METFORMIN HCL TAB 12.5-1000 MG	Tier 3		X		
BYDUREON BC INJ 2/0.85ML	EXENATIDE EXTENDED RELEASE SUSP AUTO-INJECTOR 2 MG/0.85ML	Tier 4	X	X		
BYETTA INJ 10MCG	EXENATIDE SOLN PEN-INJECTOR 10 MCG/0.04ML	Tier 4	X	X		
BYETTA INJ 5MCG	EXENATIDE SOLN PEN-INJECTOR 5 MCG/0.02ML	Tier 4	X	X		
DUETACT TAB 30-2MG	PIOGLITAZONE HCL-GLIMEPIRIDE TAB 30-2 MG	Tier 4		X		
DUETACT TAB 30-4MG	PIOGLITAZONE HCL-GLIMEPIRIDE TAB 30-4 MG	Tier 4		X		
EXENATIDE INJ 10MCG	EXENATIDE SOLN PEN-INJECTOR 10 MCG/0.04ML	Tier 4	X	X		
EXENATIDE INJ 5MCG	EXENATIDE SOLN PEN-INJECTOR 5 MCG/0.02ML	Tier 4	X	X		
GLIMEPIRIDE TAB 1MG	GLIMEPIRIDE TAB 1 MG	Tier 2				
GLIMEPIRIDE TAB 2MG	GLIMEPIRIDE TAB 2 MG	Tier 2				
GLIMEPIRIDE TAB 4MG	GLIMEPIRIDE TAB 4 MG	Tier 2				
GLIP/METFORM TAB 2.5-250	GLIPIZIDE-METFORMIN HCL TAB 2.5-250 MG	Tier 3				
GLIP/METFORM TAB 2.5-250M	GLIPIZIDE-METFORMIN HCL TAB 2.5-250 MG	Tier 3				
GLIP/METFORM TAB 2.5-500	GLIPIZIDE-METFORMIN HCL TAB 2.5-500 MG	Tier 3				
GLIP/METFORM TAB 2.5-500M	GLIPIZIDE-METFORMIN HCL TAB 2.5-500 MG	Tier 3				
GLIP/METFORM TAB 5-500MG	GLIPIZIDE-METFORMIN HCL TAB 5-500 MG	Tier 3				
GLIPIZIDE TAB 10MG	GLIPIZIDE TAB 10 MG	Tier 2				
GLIPIZIDE TAB 5MG	GLIPIZIDE TAB 5 MG	Tier 2				
GLIPIZIDE ER TAB 10MG	GLIPIZIDE TAB ER 24HR 10 MG	Tier 2				
GLIPIZIDE ER TAB 2.5MG	GLIPIZIDE TAB ER 24HR 2.5 MG	Tier 2				
GLIPIZIDE ER TAB 5MG	GLIPIZIDE TAB ER 24HR 5 MG	Tier 2				
GLIPIZIDE XL TAB 10MG	GLIPIZIDE TAB ER 24HR 10 MG	Tier 2				
GLIPIZIDE XL TAB 2.5MG	GLIPIZIDE TAB ER 24HR 2.5 MG	Tier 2				
GLIPIZIDE XL TAB 5MG	GLIPIZIDE TAB ER 24HR 5 MG	Tier 2				
GLUCOTROL XL TAB 10MG	GLIPIZIDE TAB ER 24HR 10 MG	Tier 5				
GLUCOTROL XL TAB 2.5MG	GLIPIZIDE TAB ER 24HR 2.5 MG	Tier 5				
GLUCOTROL XL TAB 5MG	GLIPIZIDE TAB ER 24HR 5 MG	Tier 5				
GLYB/METFORM TAB 1.25-250	GLYBURIDE-METFORMIN TAB 1.25-250 MG	Tier 2				
GLYB/METFORM TAB 2.5-500	GLYBURIDE-METFORMIN TAB 2.5-500 MG	Tier 2				
GLYB/METFORM TAB 5-500MG	GLYBURIDE-METFORMIN TAB 5-500 MG	Tier 2				
GLYBURID MCR TAB 1.5MG	GLYBURIDE MICRONIZED TAB 1.5 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
GLYBURID MCR TAB 3MG	GLYBURIDE MICRONIZED TAB 3 MG	Tier 2				
GLYBURID MCR TAB 6MG	GLYBURIDE MICRONIZED TAB 6 MG	Tier 2				
GLYBURIDE TAB 1.25MG	GLYBURIDE TAB 1.25 MG	Tier 2				
GLYBURIDE TAB 2.5MG	GLYBURIDE TAB 2.5 MG	Tier 2				
GLYBURIDE TAB 5MG	GLYBURIDE TAB 5 MG	Tier 2				
GLYNASE TAB 1.5MG	GLYBURIDE MICRONIZED TAB 1.5 MG	Tier 4				
GLYNASE TAB 3MG	GLYBURIDE MICRONIZED TAB 3 MG	Tier 5				
GLYNASE TAB 6MG	GLYBURIDE MICRONIZED TAB 6 MG	Tier 5				
GLYXAMBI TAB 10-5 MG	EMPAGLIFLOZIN-LINAGLIPTIN TAB 10-5 MG	Tier 3		X	X	
GLYXAMBI TAB 25-5 MG	EMPAGLIFLOZIN-LINAGLIPTIN TAB 25-5 MG	Tier 3		X	X	
JARDIANCE TAB 10MG	EMPAGLIFLOZIN TAB 10 MG	Tier 3		X		
JARDIANCE TAB 25MG	EMPAGLIFLOZIN TAB 25 MG	Tier 3		X		
JENTADUETO TAB 2.5-1000	LINAGLIPTIN-METFORMIN HCL TAB 2.5-1000 MG	Tier 3		X		
JENTADUETO TAB 2.5-500	LINAGLIPTIN-METFORMIN HCL TAB 2.5-500 MG	Tier 3		X		
JENTADUETO TAB 2.5-850	LINAGLIPTIN-METFORMIN HCL TAB 2.5-850 MG	Tier 3		X		
JENTADUETO TAB XR	LINAGLIPTIN-METFORMIN HCL TAB ER 24HR 2.5-1000 MG	Tier 3		X		
JENTADUETO TAB XR	LINAGLIPTIN-METFORMIN HCL TAB ER 24HR 5-1000 MG	Tier 3		X		
LIRAGLUTIDE INJ 18MG/3ML	LIRAGLUTIDE SOLN PEN-INJECTOR 18 MG/3ML (6 MG/ML)	Tier 3	X	X		
LIRAGLUTIDE INJ 18MG/3ML	LIRAGLUTIDE SOLN PEN-INJECTOR 18 MG/3ML (6 MG/ML)	Tier 4	X	X		
LIRAGLUTIDE INJ 18MG/3ML	LIRAGLUTIDE SOLN PEN-INJECTOR 18 MG/3ML (6 MG/ML)	Tier 2	X	X		
METFORMIN SOL 500/5ML	METFORMIN HCL ORAL SOLN 500 MG/5ML	Tier 4				
METFORMIN TAB 1000MG	METFORMIN HCL TAB 1000 MG	Tier 2				
METFORMIN TAB 500MG	METFORMIN HCL TAB 500 MG	Tier 2				
METFORMIN TAB 500MG ER	METFORMIN HCL TAB ER 24HR 500 MG	Tier 2				
METFORMIN TAB 750MG ER	METFORMIN HCL TAB ER 24HR 750 MG	Tier 2				
METFORMIN TAB 850MG	METFORMIN HCL TAB 850 MG	Tier 2				
MIGLITOL TAB 100MG	MIGLITOL TAB 100 MG	Tier 3				
MIGLITOL TAB 25MG	MIGLITOL TAB 25 MG	Tier 3				
MIGLITOL TAB 50MG	MIGLITOL TAB 50 MG	Tier 3				
MOUNJARO INJ 10MG/0.5	TIRZEPATIDE SOLN AUTO-INJECTOR 10 MG/0.5ML	Tier 4	X	X		
MOUNJARO INJ 12.5/0.5	TIRZEPATIDE SOLN AUTO-INJECTOR 12.5 MG/0.5ML	Tier 4	X	X		
MOUNJARO INJ 15MG/0.5	TIRZEPATIDE SOLN AUTO-INJECTOR 15 MG/0.5ML	Tier 4	X	X		
MOUNJARO INJ 2.5/0.5	TIRZEPATIDE SOLN AUTO-INJECTOR 2.5 MG/0.5ML	Tier 4	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
MOUNJARO INJ 5MG/0.5	TIRZEPATIDE SOLN AUTO-INJECTOR 5 MG/0.5ML	Tier 4	X	X		
MOUNJARO INJ 7.5/0.5	TIRZEPATIDE SOLN AUTO-INJECTOR 7.5 MG/0.5ML	Tier 4	X	X		
NATEGLINIDE TAB 120MG	NATEGLINIDE TAB 120 MG	Tier 3		X		
NATEGLINIDE TAB 60MG	NATEGLINIDE TAB 60 MG	Tier 3		X		
OZEMPIC INJ 2MG/3ML	SEMAGLUTIDE SOLN PEN-INJ 0.25 OR 0.5 MG/DOSE (2 MG/3ML)	Tier 4	X			
OZEMPIC INJ 4MG/3ML	SEMAGLUTIDE SOLN PEN-INJ 1 MG/DOSE (4 MG/3ML)	Tier 4	X	X		
OZEMPIC INJ 8MG/3ML	SEMAGLUTIDE SOLN PEN-INJ 2 MG/DOSE (8 MG/3ML)	Tier 4	X	X		
PIOGLIT/GLIM TAB 30-2MG	PIOGLITAZONE HCL-GLIMEPIRIDE TAB 30-2 MG	Tier 2		X		
PIOGLIT/GLIM TAB 30-4MG	PIOGLITAZONE HCL-GLIMEPIRIDE TAB 30-4 MG	Tier 2		X		
PIOGLITA/MET TAB 15-500MG	PIOGLITAZONE HCL-METFORMIN HCL TAB 15-500 MG	Tier 3		X		
PIOGLITA/MET TAB 15-850MG	PIOGLITAZONE HCL-METFORMIN HCL TAB 15-850 MG	Tier 3		X		
PIOGLITAZONE TAB 15MG	PIOGLITAZONE HCL TAB 15 MG (BASE EQUIV)	Tier 2		X		
PIOGLITAZONE TAB 30MG	PIOGLITAZONE HCL TAB 30 MG (BASE EQUIV)	Tier 2		X		
PIOGLITAZONE TAB 45MG	PIOGLITAZONE HCL TAB 45 MG (BASE EQUIV)	Tier 2		X		
REPAGLINIDE TAB 0.5MG	REPAGLINIDE TAB 0.5 MG	Tier 3		X		
REPAGLINIDE TAB 1MG	REPAGLINIDE TAB 1 MG	Tier 3		X		
REPAGLINIDE TAB 2MG	REPAGLINIDE TAB 2 MG	Tier 3		X		
RYBELSUS TAB 14MG	SEMAGLUTIDE TAB 14 MG	Tier 4	X	X		
RYBELSUS TAB 3MG	SEMAGLUTIDE TAB 3 MG	Tier 4	X	X		
RYBELSUS TAB 7MG	SEMAGLUTIDE TAB 7 MG	Tier 4	X	X		
SAXA/METFOR TAB 2.5-1000	SAXAGLIPTIN-METFORMIN HCL TAB ER 24HR 2.5-1000 MG	Tier 3		X		
SAXA/METFOR TAB 5-1000MG	SAXAGLIPTIN-METFORMIN HCL TAB ER 24HR 5-1000 MG	Tier 3		X		
SAXA/METFOR TAB 5-500MG	SAXAGLIPTIN-METFORMIN HCL TAB ER 24HR 5-500 MG	Tier 3		X		
SAXAGLIPTIN TAB 2.5MG	SAXAGLIPTIN HCL TAB 2.5 MG (BASE EQUIV)	Tier 3		X		
SAXAGLIPTIN TAB 5MG	SAXAGLIPTIN HCL TAB 5 MG (BASE EQUIV)	Tier 3		X		
SYNJARDY TAB	EMPAGLIFLOZIN-METFORMIN HCL TAB 12.5-1000 MG	Tier 3		X		
SYNJARDY TAB 12.5-500	EMPAGLIFLOZIN-METFORMIN HCL TAB 12.5-500 MG	Tier 3		X		
SYNJARDY TAB 5-1000MG	EMPAGLIFLOZIN-METFORMIN HCL TAB 5-1000 MG	Tier 3		X		
SYNJARDY TAB 5-500MG	EMPAGLIFLOZIN-METFORMIN HCL TAB 5-500 MG	Tier 3		X		
SYNJARDY XR TAB	EMPAGLIFLOZIN-METFORMIN HCL TAB ER 24HR 12.5-1000 MG	Tier 3		X		
SYNJARDY XR TAB 10-1000	EMPAGLIFLOZIN-METFORMIN HCL TAB ER 24HR 10-1000 MG	Tier 3		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
SYNJARDY XR TAB 25-1000	EMPAGLIFLOZIN-METFORMIN HCL TAB ER 24HR 25-1000 MG	Tier 3		X		
SYNJARDY XR TAB 5-1000MG	EMPAGLIFLOZIN-METFORMIN HCL TAB ER 24HR 5-1000 MG	Tier 3		X		
TRADJENTA TAB 5MG	LINAGLIPTIN TAB 5 MG	Tier 3		X		
TRIJARDY XR TAB	EMPAGLIFLOZIN-LINAGLIPTIN-METFORMIN TAB ER 24HR 10-5-1000 MG	Tier 3		X		
TRIJARDY XR TAB	EMPAGLIFLOZIN-LINAGLIPTIN-METFORMIN TAB ER 24HR 12.5-2.5-1000MG	Tier 3		X		
TRIJARDY XR TAB	EMPAGLIFLOZIN-LINAGLIPTIN-METFORMIN TAB ER 24HR 25-5-1000 MG	Tier 3		X		
TRIJARDY XR TAB	EMPAGLIFLOZIN-LINAGLIPTIN-METFORMIN TAB ER 24HR 5-2.5-1000MG	Tier 3		X		
TRULICITY INJ 0.75/0.5	DULAGLUTIDE SOLN AUTO-INJECTOR 0.75 MG/0.5ML	Tier 4	X	X		
TRULICITY INJ 1.5/0.5	DULAGLUTIDE SOLN AUTO-INJECTOR 1.5 MG/0.5ML	Tier 4	X	X		
TRULICITY INJ 3/0.5	DULAGLUTIDE SOLN AUTO-INJECTOR 3 MG/0.5ML	Tier 4	X	X		
TRULICITY INJ 4.5/0.5	DULAGLUTIDE SOLN AUTO-INJECTOR 4.5 MG/0.5ML	Tier 4	X	X		
Antiemetics, Other - Nausea and Vomiting Drugs						
AKYNZEO CAP 300-0.5	NETUPITANT-PALONOSETRON CAP 300-0.5 MG	Tier 5		X		
HYDROXYZ PAM CAP 100MG	HYDROXYZINE PAMOATE CAP 100 MG	Tier 2				
HYDROXYZ PAM CAP 25MG	HYDROXYZINE PAMOATE CAP 25 MG	Tier 2				
HYDROXYZ PAM CAP 50MG	HYDROXYZINE PAMOATE CAP 50 MG	Tier 2				
METOCLOPRAM SOL 10/10ML	METOCLOPRAMIDE HCL SOLN 5 MG/5ML (10 MG/10ML) (BASE EQUIV)	Tier 2				
METOCLOPRAM SOL 5MG/5ML	METOCLOPRAMIDE HCL SOLN 5 MG/5ML (10 MG/10ML) (BASE EQUIV)	Tier 2				
METOCLOPRAM TAB 10MG	METOCLOPRAMIDE HCL TAB 10 MG (BASE EQUIVALENT)	Tier 2				
METOCLOPRAM TAB 5MG	METOCLOPRAMIDE HCL TAB 5 MG (BASE EQUIVALENT)	Tier 2				
PERPHENAZINE TAB 16MG	PERPHENAZINE TAB 16 MG	Tier 2				
PERPHENAZINE TAB 2MG	PERPHENAZINE TAB 2 MG	Tier 2				
PERPHENAZINE TAB 4MG	PERPHENAZINE TAB 4 MG	Tier 2				
PERPHENAZINE TAB 8MG	PERPHENAZINE TAB 8 MG	Tier 2				
PROCHLORPER SUP 25MG	PROCHLORPERAZINE SUPPOS 25 MG	Tier 2				
PROCHLORPER TAB 10MG	PROCHLORPERAZINE MALEATE TAB 10 MG (BASE EQUIVALENT)	Tier 2				
PROCHLORPER TAB 5MG	PROCHLORPERAZINE MALEATE TAB 5 MG (BASE EQUIVALENT)	Tier 2				
REGLAN TAB 10MG	METOCLOPRAMIDE HCL TAB 10 MG (BASE EQUIVALENT)	Tier 5				
REGLAN TAB 5MG	METOCLOPRAMIDE HCL TAB 5 MG (BASE EQUIVALENT)	Tier 5				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
SCOPOLAMINE DIS 1MG/3DAY	SCOPOLAMINE TD PATCH 72HR 1 MG/3DAYS	Tier 4				
TRIMETHOBENZ CAP 300MG	TRIMETHOBENZAMIDE HCL CAP 300 MG	Tier 2				
Antiestrogens/Modifiers						
ORSERDU TAB 86MG	ELACESTRANT HYDROCHLORIDE TAB 86 MG	Tier 4	X	X		X
Antiestrogens/Modifiers - Chemotherapy Agents						
EMCYT CAP 140MG	ESTRAMUSTINE PHOSPHATE SODIUM CAP 140 MG	Tier 4				
TAMOXIFEN TAB 10MG	TAMOXIFEN CITRATE TAB 10 MG (BASE EQUIVALENT)	Tier 2				
TAMOXIFEN TAB 20MG	TAMOXIFEN CITRATE TAB 20 MG (BASE EQUIVALENT)	Tier 2^				
TOREMIFENE TAB 60MG	TOREMIFENE CITRATE TAB 60 MG (BASE EQUIVALENT)	Tier 4				
Antifungals - Fungal Infection Drugs						
ANCOBON CAP 250MG	FLUCYTOSINE CAP 250 MG	Tier 5				
ANCOBON CAP 500MG	FLUCYTOSINE CAP 500 MG	Tier 4				
CICLODAN SOL 8%	CICLOPIROX SOLUTION 8%	Tier 2				
CICLOPIROX CRE 0.77%	CICLOPIROX OLAMINE CREAM 0.77% (BASE EQUIV)	Tier 2				
CICLOPIROX GEL 0.77%	CICLOPIROX GEL 0.77%	Tier 2				
CICLOPIROX SHA 1%	CICLOPIROX SHAMPOO 1%	Tier 3				
CICLOPIROX SOL 8%	CICLOPIROX SOLUTION 8%	Tier 2				
CICLOPIROX SUS 0.77%	CICLOPIROX OLAMINE SUSP 0.77% (BASE EQUIV)	Tier 2				
CLOTRIMAZOLE TRO 10MG	CLOTRIMAZOLE TROCHE 10 MG	Tier 2				
CRESEMBA CAP 186MG	ISAVUCONAZONIUM SULFATE CAP 186 MG	Tier 4				
CRESEMBA CAP 74.5MG	ISAVUCONAZONIUM SULFATE CAP 74.5 MG	Tier 4				
ECONAZOLE CRE 1%	ECONAZOLE NITRATE CREAM 1%	Tier 3				
EXELDERM CRE 1%	SULCONAZOLE NITRATE CREAM 1%	Tier 4				
EXELDERM SOL 1%	SULCONAZOLE NITRATE SOLUTION 1%	Tier 4				
EXODERM LOT 25-1%	SODIUM THIOSULFATE-SALICYLIC ACID LOTION 25-1%	Tier 4				
FLUCONAZOLE SUS 10MG/ML	FLUCONAZOLE FOR SUSP 10 MG/ML	Tier 2				
FLUCONAZOLE SUS 40MG/ML	FLUCONAZOLE FOR SUSP 40 MG/ML	Tier 2				
FLUCONAZOLE TAB 100MG	FLUCONAZOLE TAB 100 MG	Tier 2				
FLUCONAZOLE TAB 150MG	FLUCONAZOLE TAB 150 MG	Tier 2				
FLUCONAZOLE TAB 200MG	FLUCONAZOLE TAB 200 MG	Tier 2				
FLUCONAZOLE TAB 50MG	FLUCONAZOLE TAB 50 MG	Tier 2				
FLUCYTOSINE CAP 250MG	FLUCYTOSINE CAP 250 MG	Tier 2				
FLUCYTOSINE CAP 500MG	FLUCYTOSINE CAP 500 MG	Tier 2				
GRISEOFULVIN SUS 125/5ML	GRISEOFULVIN MICROSIZE SUSP 125 MG/5ML	Tier 2				
GRISEOFULVIN TAB MICR 500	GRISEOFULVIN MICROSIZE TAB 500 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
GRISEOFULVIN TAB ULTR 125	GRISEOFULVIN ULTRAMICROSIZED TAB 125 MG	Tier 2				
GRISEOFULVIN TAB ULTR 250	GRISEOFULVIN ULTRAMICROSIZED TAB 250 MG	Tier 2				
GYNAZOLE-1 CRE 2%	BUTOCONAZOLE NITRATE (ONE DOSE) VAGINAL CREAM 2%	Tier 4				
HC/IDOQUIN CRE 1-1%	IDOQUINOL-HC CREAM 1-1%	Tier 2				
ITRACONAZOLE CAP 100MG	ITRACONAZOLE CAP 100 MG	Tier 2		X		
ITRACONAZOLE SOL 10MG/ML	ITRACONAZOLE ORAL SOLN 10 MG/ML	Tier 3		X		
KETOCONAZOLE AER 2%	KETOCONAZOLE FOAM 2%	Tier 5			X	
KETOCONAZOLE CRE 2%	KETOCONAZOLE CREAM 2%	Tier 2		X		
KETOCONAZOLE SHA 2%	KETOCONAZOLE SHAMPOO 2%	Tier 2				
KETOCONAZOLE TAB 200MG	KETOCONAZOLE TAB 200 MG	Tier 2				
KETODAN AER 2%	KETOCONAZOLE FOAM 2%	Tier 5			X	
KLAYESTA POW 100000	NYSTATIN TOPICAL POWDER 100000 UNIT/GM	Tier 2		X		
MICO-ZN-PETR OIN	MICONAZOLE-ZINC OXIDE-WHITE PETROLATUM OINT 0.25-15-81.35%	Tier 5				
MICONAZOLE 3 SUP 200MG	MICONAZOLE NITRATE VAGINAL SUPPOS 200 MG	Tier 2				
NOXAFIL PAK 300MG	POSACONAZOLE FOR DELAYED RELEASE SUSP PACKET 300 MG	Tier 3				
NOXAFIL SUS 40MG/ML	POSACONAZOLE SUSP 40 MG/ML	Tier 5		X		
NYAMYC POW 100000	NYSTATIN TOPICAL POWDER 100000 UNIT/GM	Tier 2		X		
NYSTAT/TRIAM CRE	NYSTATIN-TRIAMCINOLONE CREAM 100000-0.1 UNIT/GM-%	Tier 3				
NYSTAT/TRIAM OIN	NYSTATIN-TRIAMCINOLONE OINT 100000-0.1 UNIT/GM-%	Tier 3				
NYSTATIN CRE 100000	NYSTATIN CREAM 100000 UNIT/GM	Tier 2		X		
NYSTATIN OIN 100000	NYSTATIN OINT 100000 UNIT/GM	Tier 2		X		
NYSTATIN OIN 100000U	NYSTATIN OINT 100000 UNIT/GM	Tier 2		X		
NYSTATIN POW	NYSTATIN (BULK) POWDER	Tier 4				
NYSTATIN POW 100000	NYSTATIN TOPICAL POWDER 100000 UNIT/GM	Tier 2		X		
NYSTATIN POW 100MU	NYSTATIN (BULK) POWDER	Tier 4				
NYSTATIN POW 10BU	NYSTATIN (BULK) POWDER	Tier 4				
NYSTATIN POW 150MU	NYSTATIN (BULK) POWDER	Tier 4				
NYSTATIN POW 1BU	NYSTATIN (BULK) POWDER	Tier 4				
NYSTATIN POW 2BU	NYSTATIN (BULK) POWDER	Tier 4				
NYSTATIN POW 500MU	NYSTATIN (BULK) POWDER	Tier 4				
NYSTATIN POW 50MU	NYSTATIN (BULK) POWDER	Tier 4				
NYSTATIN POW 5BU	NYSTATIN (BULK) POWDER	Tier 4				
NYSTATIN SUS 100000	NYSTATIN SUSP 100000 UNIT/ML	Tier 2				
NYSTATIN TAB 500000	NYSTATIN TAB 500000 UNIT	Tier 2				
NYSTOP POW 100000	NYSTATIN TOPICAL POWDER 100000 UNIT/GM	Tier 2		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ORAVIG TAB 50MG	MICONAZOLE BUCCAL TAB 50 MG (MOUTH-THROAT)	Tier 5				
POSACONAZOLE SUS 200/5ML	POSACONAZOLE SUSP 40 MG/ML	Tier 3		X		
POSACONAZOLE SUS 40MG/ML	POSACONAZOLE SUSP 40 MG/ML	Tier 3		X		
POSACONAZOLE TAB 100MG DR	POSACONAZOLE TAB DELAYED RELEASE 100 MG	Tier 3				
SPORANOX CAP 100MG	ITRACONAZOLE CAP 100 MG	Tier 5		X		
SPORANOX SOL 10MG/ML	ITRACONAZOLE ORAL SOLN 10 MG/ML	Tier 5		X		
SULCONAZOLE CRE 1%	SULCONAZOLE NITRATE CREAM 1%	Tier 4				
SULCONAZOLE SOL 1%	SULCONAZOLE NITRATE SOLUTION 1%	Tier 4				
TERBINAFINE TAB 250MG	TERBINAFINE HCL TAB 250 MG	Tier 2				
TERCONAZOLE CRE 0.4%	TERCONAZOLE VAGINAL CREAM 0.4%	Tier 2				
TERCONAZOLE CRE 0.8%	TERCONAZOLE VAGINAL CREAM 0.8%	Tier 2				
TERCONAZOLE SUP 80MG	TERCONAZOLE VAGINAL SUPPOS 80 MG	Tier 2				
VFEND SUS 40MG/ML	VORICONAZOLE FOR SUSP 40 MG/ML	Tier 5		X		
VFEND TAB 50MG	VORICONAZOLE TAB 50 MG	Tier 4		X		
VIVJOA CAP 150MG	OTSECONAZOLE CAP THERAPY PACK 150 MG (12 WEEKS)	Tier 4	X	X		
VORICONAZOLE SUS 40MG/ML	VORICONAZOLE FOR SUSP 40 MG/ML	Tier 2		X		
VORICONAZOLE TAB 200MG	VORICONAZOLE TAB 200 MG	Tier 2		X		
VORICONAZOLE TAB 50MG	VORICONAZOLE TAB 50 MG	Tier 2		X		
VUSION OIN	MICONAZOLE-ZINC OXIDE-WHITE PETROLATUM OINT 0.25-15-81.35%	Tier 5				
XOLEGEL KIT COREPAK	KETOCONAZOLE GEL 2% & HYDROCORTISONE GEL 1% KIT	Tier 4				
Antigout Agents - Gout Drugs						
ALLOPURINOL TAB 100MG	ALLOPURINOL TAB 100 MG	Tier 2				
ALLOPURINOL TAB 300MG	ALLOPURINOL TAB 300 MG	Tier 2				
COLCHICINE CAP 0.6MG	COLCHICINE CAP 0.6 MG	Tier 3				
COLCHICINE TAB 0.6MG	COLCHICINE TAB 0.6 MG	Tier 3				
FEBUXOSTAT TAB 40MG	FEBUXOSTAT TAB 40 MG	Tier 4				
FEBUXOSTAT TAB 80MG	FEBUXOSTAT TAB 80 MG	Tier 4				
GLOPERBA SOL 0.6/5ML	COLCHICINE ORAL SOLN 0.6 MG/5ML	Tier 5	X			
MITIGARE CAP 0.6MG	COLCHICINE CAP 0.6 MG	Tier 3				
PROBEN/COLCH TAB 500-0.5	COLCHICINE W/ PROBENECID TAB 0.5-500 MG	Tier 2				
PROBENECID TAB 500MG	PROBENECID TAB 500 MG	Tier 2				
Antitherpetic Agents - Herpes Drugs						
ACYCLOVIR CAP 200MG	ACYCLOVIR CAP 200 MG	Tier 2				
ACYCLOVIR OIN 5%	ACYCLOVIR OINT 5%	Tier 4		X		
ACYCLOVIR SUS 200/5ML	ACYCLOVIR SUSP 200 MG/5ML	Tier 2				
ACYCLOVIR TAB 400MG	ACYCLOVIR TAB 400 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ACYCLOVIR TAB 800MG	ACYCLOVIR TAB 800 MG	Tier 2				
DENAVIR CRE 1%	PENCICLOVIR CREAM 1%	Tier 5				
FAMCICLOVIR TAB 125MG	FAMCICLOVIR TAB 125 MG	Tier 3				
FAMCICLOVIR TAB 250MG	FAMCICLOVIR TAB 250 MG	Tier 3				
FAMCICLOVIR TAB 500MG	FAMCICLOVIR TAB 500 MG	Tier 3				
VALACYCLOVIR TAB 1GM	VALACYCLOVIR HCL TAB 1 GM	Tier 2		X		
VALACYCLOVIR TAB 500MG	VALACYCLOVIR HCL TAB 500 MG	Tier 2		X		
Antihistamines - Drugs to Treat Allergies						
ALLERGY RELF TAB 25MG	DIPHENHYDRAMINE HCL TAB 25 MG	Tier 2				
AZELASTINE SPR 0.1%	AZELASTINE HCL NASAL SPRAY 0.1% (137 MCG/SPRAY)	Tier 3				
CARBINOXAMIN SOL 4MG/5ML	CARBINOXAMINE MALEATE SOLN 4 MG/5ML	Tier 2				
CARBINOXAMIN TAB 4MG	CARBINOXAMINE MALEATE TAB 4 MG	Tier 2				
CARBAZOL SOL 4MG/5ML	CARBINOXAMINE MALEATE SOLN 4 MG/5ML	Tier 3				
CLEMASTINE TAB 2.68MG	CLEMASTINE FUMARATE TAB 2.68 MG	Tier 2				
CLEMAZ TAB 2.68MG	CLEMASTINE FUMARATE TAB 2.68 MG	Tier 4				
CLEMSZA TAB 2.68MG	CLEMASTINE FUMARATE TAB 2.68 MG	Tier 4				
CYPROHEPTAD SYP 2MG/5ML	CYPROHEPTADINE HCL SYRUP 2 MG/5ML	Tier 2				
CYPROHEPTAD TAB 4MG	CYPROHEPTADINE HCL TAB 4 MG	Tier 2				
DIPHENHYDRAM ELX 12.5/5ML	DIPHENHYDRAMINE HCL ELIXIR 12.5 MG/5ML	Tier 2				
LEVOCETIRIZI SOL 2.5/5ML	LEVOCETIRIZINE DIHYDROCHLORIDE SOLN 2.5 MG/5ML (0.5 MG/ML)	Tier 4				
LEVOCETIRIZI TAB 5MG	LEVOCETIRIZINE DIHYDROCHLORIDE TAB 5 MG	Tier 2				
OLOPATADINE SPR 0.6%	OLOPATADINE HCL NASAL SOLN 0.6%	Tier 4				
PROMETHAZINE SOL 12.5/10	PROMETHAZINE HCL ORAL SOLN 6.25 MG/5ML	Tier 2				
PROMETHAZINE SOL 6.25/5ML	PROMETHAZINE HCL ORAL SOLN 6.25 MG/5ML	Tier 2				
PROMETHAZINE SUP 12.5MG	PROMETHAZINE HCL SUPPOS 12.5 MG	Tier 2				
PROMETHAZINE SUP 25MG	PROMETHAZINE HCL SUPPOS 25 MG	Tier 2				
PROMETHAZINE TAB 12.5MG	PROMETHAZINE HCL TAB 12.5 MG	Tier 2				
PROMETHAZINE TAB 25MG	PROMETHAZINE HCL TAB 25 MG	Tier 2				
PROMETHAZINE TAB 50MG	PROMETHAZINE HCL TAB 50 MG	Tier 2				
PROMETHEGAN SUP 12.5MG	PROMETHAZINE HCL SUPPOS 12.5 MG	Tier 4				
PROMETHEGAN SUP 25MG	PROMETHAZINE HCL SUPPOS 25 MG	Tier 4				
PROMETHEGAN SUP 50MG	PROMETHAZINE HCL SUPPOS 50 MG	Tier 4				
Antileukotrienes - Asthma/Lung Drugs						
ACCOLATE TAB 10MG	ZAFIRLUKAST TAB 10 MG	Tier 5				
ACCOLATE TAB 20MG	ZAFIRLUKAST TAB 20 MG	Tier 5				
MONTELUKAST CHW 4MG	MONTELUKAST SODIUM CHEW TAB 4 MG (BASE EQUIV)	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
MONTELUKAST CHW 5MG	MONTELUKAST SODIUM CHEW TAB 5 MG (BASE EQUIV)	Tier 2				
MONTELUKAST GRA 4MG	MONTELUKAST SODIUM ORAL GRANULES PACKET 4 MG (BASE EQUIV)	Tier 3				
MONTELUKAST TAB 10MG	MONTELUKAST SODIUM TAB 10 MG (BASE EQUIV)	Tier 2				
SINGULAIR GRA 4MG	MONTELUKAST SODIUM ORAL GRANULES PACKET 4 MG (BASE EQUIV)	Tier 4				
ZAFIRLUKAST TAB 10MG	ZAFIRLUKAST TAB 10 MG	Tier 2				
ZAFIRLUKAST TAB 20MG	ZAFIRLUKAST TAB 20 MG	Tier 2				
Antimetabolites - Chemotherapy Agents						
CAPECITABINE TAB 150MG	CAPECITABINE TAB 150 MG	Tier 3				X
CAPECITABINE TAB 500MG	CAPECITABINE TAB 500 MG	Tier 3				X
DROXIA CAP 200MG	HYDROXYUREA CAP 200 MG	Tier 2				
DROXIA CAP 300MG	HYDROXYUREA CAP 300 MG	Tier 2				
DROXIA CAP 400MG	HYDROXYUREA CAP 400 MG	Tier 2				
HYDROXYUREA CAP 500MG	HYDROXYUREA CAP 500 MG	Tier 2				
MERCAPTOPUR TAB 50MG	MERCAPTOPURINE TAB 50 MG	Tier 2				
MERCAPTOPURI SUS 20MG/ML	MERCAPTOPURINE SUSP 2000 MG/100ML (20 MG/ML)	Tier 4				X
PURIXAN SUS 20MG/ML	MERCAPTOPURINE SUSP 2000 MG/100ML (20 MG/ML)	Tier 5				X
TABLOID TAB 40MG	THIOGUANINE TAB 40 MG	Tier 4				X
Antimycobacterials, Other - Miscellaneous Anti-Infectives						
DAPSONE TAB 100MG	DAPSONE TAB 100 MG	Tier 3				
DAPSONE TAB 25MG	DAPSONE TAB 25 MG	Tier 3				
MYCIBUTIN CAP 150MG	RIFABUTIN CAP 150 MG	Tier 5				
PRETOMANID TAB 200MG	PRETOMANID TAB 200 MG	Tier 5				
RIFABUTIN CAP 150MG	RIFABUTIN CAP 150 MG	Tier 2				
Antineoplastics - Drugs to Treat Cancer						
JAYPIRCA TAB 100MG	PIRTOBRUTINIB TAB 100 MG	Tier 5	X	X		X
JAYPIRCA TAB 50MG	PIRTOBRUTINIB TAB 50 MG	Tier 5	X	X		X
Antineoplastics, Other						
AKEEGA TAB 100/500	NIRAPARIB TOSYLATE-ABIRATERONE ACETATE TAB 100-500 MG	Tier 5	X	X	X	X
AKEEGA TAB 50/500MG	NIRAPARIB TOSYLATE-ABIRATERONE ACETATE TAB 50-500 MG	Tier 5	X	X	X	X
REVUFORJ TAB 110MG	REVUMENIB CITRATE TAB 110 MG	Tier 5	X	X		X
REVUFORJ TAB 160MG	REVUMENIB CITRATE TAB 160 MG	Tier 5	X	X		X
REVUFORJ TAB 25MG	REVUMENIB CITRATE TAB 25 MG	Tier 5	X	X		X
Antineoplastics, Other - Chemotherapy Agents						
AUGTYRO CAP 160MG	REPOTRECTINIB CAP 160 MG	Tier 4	X	X		X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
AUGTYRO CAP 40MG	REPOTRECTINIB CAP 40 MG	Tier 4	X	X		X
AVMAPKI PAK FAKZYNJA	AVUTOMETINIB CAP 0.8 MG & DEFACTINIB TAB 200 MG THERAPY PACK	Tier 5	X	X		X
COPIKTRA CAP 15MG	DUVELISIB CAP 15 MG	Tier 5	X	X		X
COPIKTRA CAP 25MG	DUVELISIB CAP 25 MG	Tier 5	X	X		X
FRUZAQLA CAP 1MG	FRUQUINTINIB CAP 1 MG	Tier 5	X	X	X	X
FRUZAQLA CAP 5MG	FRUQUINTINIB CAP 5 MG	Tier 5	X	X	X	X
GOMEKLI CAP 1MG	MIRDAMETINIB CAP 1 MG	Tier 5	X	X		X
GOMEKLI CAP 2MG	MIRDAMETINIB CAP 2 MG	Tier 5	X	X		X
GOMEKLI TAB 1MG	MIRDAMETINIB TAB FOR ORAL SUSP 1 MG	Tier 5	X	X		X
INQOVI TAB 35-100MG	DECITABINE-CEDAZURIDINE TAB 35-100 MG	Tier 5	X	X		X
ITOVEBI TAB 3MG	INAVOLISIB TAB 3 MG	Tier 4	X	X		X
ITOVEBI TAB 9MG	INAVOLISIB TAB 9 MG	Tier 4	X	X		X
IWILFIN TAB 192MG	EFLORNITHINE HCL TAB 192 MG	Tier 4	X	X		X
KISQALI TAB 200DOSE	RIBOCICLIB SUCCINATE TAB PACK 200 MG DAILY DOSE	Tier 4	X	X		X
KISQALI TAB 400DOSE	RIBOCICLIB SUCCINATE TAB PACK 400 MG DAILY DOSE (200 MG TAB)	Tier 4	X	X		X
KISQALI TAB 600DOSE	RIBOCICLIB SUCCINATE TAB PACK 600 MG DAILY DOSE (200 MG TAB)	Tier 4	X	X		X
KISQALI 200 PAK FEMARA	RIBOCICLIB 200 MG DOSE (200 MG TAB) & LETROZOLE 2.5 MG TBPk	Tier 5	X	X		X
KISQALI 400 PAK FEMARA	RIBOCICLIB 400 MG DOSE (200 MG TAB) & LETROZOLE 2.5 MG TBPk	Tier 5	X	X		X
KISQALI 600 PAK FEMARA	RIBOCICLIB 600 MG DOSE (200 MG TAB) & LETROZOLE 2.5 MG TBPk	Tier 5	X	X		X
KOSELUGO CAP 10MG	SELUMETINIB SULFATE CAP 10 MG	Tier 4	X	X		X
KOSELUGO CAP 25MG	SELUMETINIB SULFATE CAP 25 MG	Tier 4	X	X		X
KOSELUGO CAP 5MG	SELUMETINIB SULFATE CAP SPRINKLE 5 MG	Tier 4				
KOSELUGO CAP 7.5MG	SELUMETINIB SULFATE CAP SPRINKLE 7.5 MG	Tier 4				
KRAZATI TAB 200MG	ADAGRASIB TAB 200 MG	Tier 5	X	X		X
LEUCOVOR CA TAB 10MG	LEUCOVORIN CALCIUM TAB 10 MG	Tier 2				
LEUCOVOR CA TAB 15MG	LEUCOVORIN CALCIUM TAB 15 MG	Tier 2				
LEUCOVOR CA TAB 25MG	LEUCOVORIN CALCIUM TAB 25 MG	Tier 2				
LEUCOVOR CA TAB 5MG	LEUCOVORIN CALCIUM TAB 5 MG	Tier 2				
LORBRENA TAB 100MG	LORLATINIB TAB 100 MG	Tier 5	X	X	X	X
LORBRENA TAB 25MG	LORLATINIB TAB 25 MG	Tier 5	X	X	X	X
LUMAKRAS TAB 120MG	SOTORASIB TAB 120 MG	Tier 5	X	X		X
LUMAKRAS TAB 240MG	SOTORASIB TAB 240 MG	Tier 5	X	X		X
LUMAKRAS TAB 320MG	SOTORASIB TAB 320 MG	Tier 5	X	X		X
NINLARO CAP 2.3MG	IXAZOMIB CITRATE CAP 2.3 MG (BASE EQUIVALENT)	Tier 4	X	X		X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
NINLARO CAP 3MG	IXAZOMIB CITRATE CAP 3 MG (BASE EQUIVALENT)	Tier 4	X	X		X
NINLARO CAP 4MG	IXAZOMIB CITRATE CAP 4 MG (BASE EQUIVALENT)	Tier 4	X	X		X
OGSIVEO TAB 100MG	NIROGACESTAT HYDROBROMIDE TAB 100 MG	Tier 4	X			X
OGSIVEO TAB 150MG	NIROGACESTAT HYDROBROMIDE TAB 150 MG	Tier 4	X			X
OGSIVEO TAB 50MG	NIROGACESTAT HYDROBROMIDE TAB 50 MG	Tier 4	X	X		X
OJJAARA TAB 100MG	MOMELOTINIB DIHYDROCHLORIDE TAB 100 MG	Tier 5	X	X		X
OJJAARA TAB 150MG	MOMELOTINIB DIHYDROCHLORIDE TAB 150 MG	Tier 5	X	X		X
OJJAARA TAB 200MG	MOMELOTINIB DIHYDROCHLORIDE TAB 200 MG	Tier 5	X	X		X
ONUREG TAB 200MG	AZACITIDINE TAB 200 MG	Tier 4	X	X		X
ONUREG TAB 300MG	AZACITIDINE TAB 300 MG	Tier 4	X	X		X
PIQRAY 200MG TAB DOSE	ALPELISIB TAB THERAPY PACK 200 MG DAILY DOSE	Tier 4	X	X		X
PIQRAY 250MG TAB DOSE	ALPELISIB TAB PACK 250 MG DAILY DOSE (200 MG & 50 MG TABS)	Tier 4	X	X		X
PIQRAY 300MG TAB DOSE	ALPELISIB TAB PACK 300 MG DAILY DOSE (2X150 MG TAB)	Tier 4	X	X		X
ROMVIMZA CAP 14MG	VIMSELTINIB CAP 14 MG	Tier 4	X	X		X
ROMVIMZA CAP 20MG	VIMSELTINIB CAP 20 MG	Tier 4	X	X		X
ROMVIMZA CAP 30MG	VIMSELTINIB CAP 30 MG	Tier 4	X	X		X
ROZLYTREK CAP 100MG	ENTRECTINIB CAP 100 MG	Tier 4	X	X		X
ROZLYTREK CAP 200MG	ENTRECTINIB CAP 200 MG	Tier 4	X	X		X
ROZLYTREK PAK 50MG	ENTRECTINIB PELLETT PACK 50 MG	Tier 3	X	X		X
SCEMBLIX TAB 100MG	ASCIMINIB HCL TAB 100 MG	Tier 5	X	X		X
SCEMBLIX TAB 20MG	ASCIMINIB HCL TAB 20 MG	Tier 5	X	X		X
SCEMBLIX TAB 40MG	ASCIMINIB HCL TAB 40 MG	Tier 5	X	X		X
SYNRIBO INJ 3.5MG	OMACETAXINE MEPESUCCINATE FOR INJ 3.5 MG	Tier 4				X
TAZVERIK TAB 200MG	TAZEMETOSTAT HBR TAB 200 MG	Tier 5	X	X		X
TRUQAP PAK 160MG	CAPIVASERTIB TAB THERAPY PACK 160 MG	Tier 4	X	X		X
TRUQAP PAK 200MG	CAPIVASERTIB TAB THERAPY PACK 200 MG	Tier 4	X	X		X
TRUQAP TAB 160MG	CAPIVASERTIB TAB 160 MG	Tier 4	X	X		X
TRUQAP TAB 200MG	CAPIVASERTIB TAB 200 MG	Tier 4	X	X		X
VANFLYTA TAB 177MG	QUIZARTINIB DIHYDROCHLORIDE TAB 177 MG	Tier 5	X	X		X
VANFLYTA TAB 26.5MG	QUIZARTINIB DIHYDROCHLORIDE TAB 26.5 MG	Tier 5	X	X		X
VERZENIO TAB 100MG	ABEMACICLIB TAB 100 MG	Tier 4	X	X		X
VERZENIO TAB 150MG	ABEMACICLIB TAB 150 MG	Tier 4	X	X		X
VERZENIO TAB 200MG	ABEMACICLIB TAB 200 MG	Tier 4	X	X		X
VERZENIO TAB 50MG	ABEMACICLIB TAB 50 MG	Tier 4	X	X		X
VORANIGO TAB 10MG	VORASIDENIB TAB 10 MG	Tier 4	X	X		X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
VORANIGO TAB 40MG	VORASIDENIB TAB 40 MG	Tier 4	X	X		X
WELIREG TAB 40MG	BELZUTIFAN TAB 40 MG	Tier 5	X	X		X
XPOVIO PAK 40MG	SELINEXOR TAB THERAPY PACK 40 MG (80 MG ONCE WEEKLY)	Tier 5	X	X		X
XPOVIO PAK 40MG	SELINEXOR TAB THERAPY PACK 40 MG (40 MG TWICE WEEKLY)	Tier 5	X	X		X
XPOVIO PAK 40MG	SELINEXOR TAB THERAPY PACK 40 MG (40 MG ONCE WEEKLY)	Tier 5	X	X		X
XPOVIO PAK 40MG	SELINEXOR TAB THERAPY PACK 10 MG (40 MG ONCE WEEKLY)	Tier 5	X	X		X
XPOVIO PAK 50MG	SELINEXOR TAB THERAPY PACK 50 MG (100 MG ONCE WEEKLY)	Tier 5	X	X		X
XPOVIO PAK 60MG	SELINEXOR TAB THERAPY PACK 20 MG (60 MG TWICE WEEKLY)	Tier 5	X	X		X
XPOVIO PAK 60MG	SELINEXOR TAB THERAPY PACK 60 MG (60 MG ONCE WEEKLY)	Tier 5	X	X		X
XPOVIO PAK 80MG	SELINEXOR TAB THERAPY PACK 20 MG (80 MG TWICE WEEKLY)	Tier 5	X	X		X
ZOLINZA CAP 100MG	VORINOSTAT CAP 100 MG	Tier 4	X	X		X
Antiparkinson Agents, Other - Parkinson's Disease Drugs						
AMANTADINE CAP 100MG	AMANTADINE HCL CAP 100 MG	Tier 2				
AMANTADINE SOL 100/10ML	AMANTADINE HCL SOLN 50 MG/5ML	Tier 2				
AMANTADINE SOL 50MG/5ML	AMANTADINE HCL SOLN 50 MG/5ML	Tier 2				
AMANTADINE TAB 100MG	AMANTADINE HCL TAB 100 MG	Tier 2				
COMTAN TAB 200MG	ENTACAPONE TAB 200 MG	Tier 5				
ENTACAPONE TAB 200MG	ENTACAPONE TAB 200 MG	Tier 2				
Antiprotozoals - Protozoal Infection Drugs						
ALINIA SUS 100/5ML	NITAZOXANIDE FOR SUSP 100 MG/5ML	Tier 3		X		
ARAKODA TAB 100MG	TAFENOQUINE SUCCINATE TAB 100 MG (BASE EQUIVALENT)	Tier 5		X		
ATOVAQ/PROGU TAB 250-100	ATOVAQUONE-PROGUANIL HCL TAB 250-100 MG	Tier 3				
ATOVAQ/PROGU TAB 62.5-25	ATOVAQUONE-PROGUANIL HCL TAB 62.5-25 MG	Tier 3				
ATOVAQUONE SUS 750/5ML	ATOVAQUONE SUSP 750 MG/5ML	Tier 3				
CHLOROQUINE TAB 250MG	CHLOROQUINE PHOSPHATE TAB 250 MG	Tier 2				
CHLOROQUINE TAB 500MG	CHLOROQUINE PHOSPHATE TAB 500 MG	Tier 2				
COARTEM TAB 20-120MG	ARTEMETHER-LUMEFANTRINE TAB 20-120 MG	Tier 3				
DARAPRIM TAB 25MG	PYRIMETHAMINE TAB 25 MG	Tier 5	X			X
HYDROXYCHLOR TAB 100MG	HYDROXYCHLOROQUINE SULFATE TAB 100 MG	Tier 2				
HYDROXYCHLOR TAB 200MG	HYDROXYCHLOROQUINE SULFATE TAB 200 MG	Tier 2				
HYDROXYCHLOR TAB 300MG	HYDROXYCHLOROQUINE SULFATE TAB 300 MG	Tier 2				
HYDROXYCHLOR TAB 400MG	HYDROXYCHLOROQUINE SULFATE TAB 400 MG	Tier 2				
IMPAVIDO CAP 50MG	MILTEFOSINE CAP 50 MG	Tier 3		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
KRINTAFEL TAB 150MG	TAFENOQUINE SUCCINATE TAB 150 MG (BASE EQUIVALENT)	Tier 2		X		
LAMPIT TAB 120MG	NIFURTIMOX TAB 120 MG	Tier 5		X		
LAMPIT TAB 30MG	NIFURTIMOX TAB 30 MG	Tier 5		X		
MALARONE TAB 250-100	ATOVAQUONE-PROGUANIL HCL TAB 250-100 MG	Tier 5				
MALARONE TAB 62.5-25	ATOVAQUONE-PROGUANIL HCL TAB 62.5-25 MG	Tier 5				
MEFLOQUINE TAB 250MG	MEFLOQUINE HCL TAB 250 MG	Tier 2				
NITAZOXANIDE TAB 500MG	NITAZOXANIDE TAB 500 MG	Tier 3		X		
PENTAMIDINE INH 300MG	PENTAMIDINE ISETHIONATE FOR NEBULIZATION SOLN 300 MG	Tier 3				
PRIMAQUINE TAB 26.3MG	PRIMAQUINE PHOSPHATE TAB 26.3 MG (15 MG BASE)	Tier 2				
PYRIMETHAMIN TAB 25MG	PYRIMETHAMINE TAB 25 MG	Tier 4	X			X
QUALAQUIN CAP 324MG	QUININE SULFATE CAP 324 MG	Tier 5				
QUININE SULF CAP 324MG	QUININE SULFATE CAP 324 MG	Tier 2				
Antispasmodics, Gastrointestinal - Bowel Treatment Drugs						
BELLA/OPIUM SUP 16.2-60	BELLADONNA ALKALOIDS & OPIUM SUPPOS 16.2-60 MG	Tier 2				
Antispasmodics, Gastrointestinal - Stomach and Intestine Drugs						
ANASPAZ TAB 0.125MG	HYOSCYAMINE SULFATE TAB DISINT 0.125 MG	Tier 3				
CUVPOSA SOL 1MG/5ML	GLYCOPYRROLATE ORAL SOLN 1 MG/5ML	Tier 5				
DICYCLOMINE CAP 10MG	DICYCLOMINE HCL CAP 10 MG	Tier 2				
DICYCLOMINE SOL 10MG/5ML	DICYCLOMINE HCL ORAL SOLN 10 MG/5ML	Tier 2				
DICYCLOMINE TAB 20MG	DICYCLOMINE HCL TAB 20 MG	Tier 2				
GLYCOPYRROL TAB 1MG	GLYCOPYRROLATE TAB 1 MG	Tier 2				
GLYCOPYRROL TAB 2MG	GLYCOPYRROLATE TAB 2 MG	Tier 2				
GLYCOPYRROLA SOL 1MG/5ML	GLYCOPYRROLATE ORAL SOLN 1 MG/5ML	Tier 4				
HYOSCYAMINE DRO 0.125/ML	HYOSCYAMINE SULFATE SOLN 0.125 MG/ML	Tier 2				
HYOSCYAMINE ELX 0.125/5	HYOSCYAMINE SULFATE ELIXIR 0.125 MG/5ML	Tier 2				
HYOSCYAMINE SUB 0.125MG	HYOSCYAMINE SULFATE SL TAB 0.125 MG	Tier 2				
HYOSCYAMINE TAB 0.125MG	HYOSCYAMINE SULFATE TAB DISINT 0.125 MG	Tier 2				
HYOSCYAMINE TAB 0.125MG	HYOSCYAMINE SULFATE TAB 0.125 MG	Tier 2				
HYOSCYAMINE TAB 0.375 ER	HYOSCYAMINE SULFATE TAB ER 12HR 0.375 MG	Tier 2				
HYOSCYAMINE TAB 0.375 SR	HYOSCYAMINE SULFATE TAB ER 12HR 0.375 MG	Tier 2				
HYOSYNE DRO 0.125/ML	HYOSCYAMINE SULFATE SOLN 0.125 MG/ML	Tier 2				
HYOSYNE ELX 0.125/5	HYOSCYAMINE SULFATE ELIXIR 0.125 MG/5ML	Tier 2				
LEVBIID TAB 0.375 ER	HYOSCYAMINE SULFATE TAB ER 12HR 0.375 MG	Tier 5				
LEVSIN TAB 0.125MG	HYOSCYAMINE SULFATE TAB 0.125 MG	Tier 5				
LEVSIN/SL SUB 0.125MG	HYOSCYAMINE SULFATE SL TAB 0.125 MG	Tier 5				
METHSCOPOLAM TAB 2.5MG	METHSCOPOLAMINE BROMIDE TAB 2.5 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
METHSCOPOLAM TAB 5MG	METHSCOPOLAMINE BROMIDE TAB 5 MG	Tier 2				
NULEV TAB 0.125MG	HYOSCYAMINE SULFATE TAB DISINT 0.125 MG	Tier 5				
OSCIMIN SUB 0.125MG	HYOSCYAMINE SULFATE SL TAB 0.125 MG	Tier 5				
OSCIMIN TAB 0.125MG	HYOSCYAMINE SULFATE TAB 0.125 MG	Tier 5				
Antispasmodics, Urinary - Bladder Control Drugs						
FLAVOXATE TAB 100MG	FLAVOXATE HCL TAB 100 MG	Tier 2				
MIRABEGRON TAB 25MG ER	MIRABEGRON TAB ER 24 HR 25 MG	Tier 4			X	
MIRABEGRON TAB 50MG ER	MIRABEGRON TAB ER 24 HR 50 MG	Tier 4			X	
OXYBUTYNIN SOL 5MG/5ML	OXYBUTYNIN CHLORIDE SOLUTION 5 MG/5ML	Tier 2				
OXYBUTYNIN TAB 10MG ER	OXYBUTYNIN CHLORIDE TAB ER 24HR 10 MG	Tier 3				
OXYBUTYNIN TAB 15MG ER	OXYBUTYNIN CHLORIDE TAB ER 24HR 15 MG	Tier 3				
OXYBUTYNIN TAB 2.5MG	OXYBUTYNIN CHLORIDE TAB 2.5 MG	Tier 5				
OXYBUTYNIN TAB 5MG	OXYBUTYNIN CHLORIDE TAB 5 MG	Tier 2				
OXYBUTYNIN TAB 5MG ER	OXYBUTYNIN CHLORIDE TAB ER 24HR 5 MG	Tier 3				
SOLIFENACIN TAB 10MG	SOLIFENACIN SUCCINATE TAB 10 MG	Tier 3				
SOLIFENACIN TAB 5MG	SOLIFENACIN SUCCINATE TAB 5 MG	Tier 3				
TOLTERODINE TAB 1MG	TOLTERODINE TARTRATE TAB 1 MG	Tier 4				
TOLTERODINE TAB 2MG	TOLTERODINE TARTRATE TAB 2 MG	Tier 4				
TROSPIMUM CL TAB 20MG	TROSPIMUM CHLORIDE TAB 20 MG	Tier 4				
Antithyroid Agents - Thyroid Suppressing Drugs						
METHIMAZOLE TAB 10MG	METHIMAZOLE TAB 10 MG	Tier 2				
METHIMAZOLE TAB 5MG	METHIMAZOLE TAB 5 MG	Tier 2				
PROPYLTHIOUR TAB 50MG	PROPYLTHIOURACIL TAB 50 MG	Tier 2				
Antituberculars - Tuberculosis Drugs						
CYCLOSERINE CAP 250MG	CYCLOSERINE CAP 250 MG	Tier 2				
ETHAMBUTOL TAB 100MG	ETHAMBUTOL HCL TAB 100 MG	Tier 2				
ETHAMBUTOL TAB 400MG	ETHAMBUTOL HCL TAB 400 MG	Tier 2				
ISONIAZID SYP 50MG/5ML	ISONIAZID SYRUP 50 MG/5ML	Tier 2				
ISONIAZID TAB 100MG	ISONIAZID TAB 100 MG	Tier 2				
ISONIAZID TAB 300MG	ISONIAZID TAB 300 MG	Tier 2				
MYAMBUTOL TAB 400MG	ETHAMBUTOL HCL TAB 400 MG	Tier 5				
PRIFTIN TAB 150MG	RIFAPENTINE TAB 150 MG	Tier 3				
PYRAZINAMIDE TAB 500MG	PYRAZINAMIDE TAB 500 MG	Tier 2				
RIFAMPIN CAP 150MG	RIFAMPIN CAP 150 MG	Tier 2				
RIFAMPIN CAP 300MG	RIFAMPIN CAP 300 MG	Tier 2				
SIRTURO TAB 100MG	BEDAQUILINE FUMARATE TAB 100 MG (BASE EQUIV)	Tier 3				
SIRTURO TAB 20MG	BEDAQUILINE FUMARATE TAB 20 MG (BASE EQUIV)	Tier 3				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
TRECTOR TAB 250MG	ETHIONAMIDE TAB 250 MG	Tier 3				
Antivirals						
TEMBEXA SUS 10MG/ML	BRINCIDOFOVIR ORAL SUSP 10 MG/ML	Tier 5				
TEMBEXA TAB 100MG	BRINCIDOFOVIR TAB 100 MG	Tier 5				
Antivirals - Drugs to Treat Viral Infections						
LAGEVRIO CAP 200MG	MOLNUPIRAVIR CAP 200 MG	Tier 4		X		
PAXLOVID PAK	NIRMATRELVIR TAB 6 X 150 MG & RITONAVIR TAB 5 X 100 MG PAK	Tier 4		X		
PAXLOVID TAB 150-100	NIRMATRELVIR TAB 10 X 150 MG & RITONAVIR TAB 10 X 100 MG PAK	Tier 4		X		
PAXLOVID TAB 300-100	NIRMATRELVIR TAB 20 X 150 MG & RITONAVIR TAB 10 X 100 MG PAK	Tier 4		X		
RIBAVIRIN INH 6GM	RIBAVIRIN FOR INHAL SOLN 6 GM	Tier 4				
VIRAZOLE INH 6GM	RIBAVIRIN FOR INHAL SOLN 6 GM	Tier 5				
Anxiolytics, Other - Anxiety Drugs						
BUSPIRONE TAB 10MG	BUSPIRONE HCL TAB 10 MG	Tier 2				
BUSPIRONE TAB 15MG	BUSPIRONE HCL TAB 15 MG	Tier 2				
BUSPIRONE TAB 30MG	BUSPIRONE HCL TAB 30 MG	Tier 2				
BUSPIRONE TAB 5MG	BUSPIRONE HCL TAB 5 MG	Tier 2				
BUSPIRONE TAB 7.5MG	BUSPIRONE HCL TAB 7.5 MG	Tier 2				
HYDROXYZ HCL SYP 10MG/5ML	HYDROXYZINE HCL SYRUP 10 MG/5ML	Tier 2				
HYDROXYZ HCL TAB 10MG	HYDROXYZINE HCL TAB 10 MG	Tier 2				
HYDROXYZ HCL TAB 25MG	HYDROXYZINE HCL TAB 25 MG	Tier 2				
HYDROXYZ HCL TAB 50MG	HYDROXYZINE HCL TAB 50 MG	Tier 2				
HYDROXYZINE SOL 10MG/5ML	HYDROXYZINE HCL SYRUP 10 MG/5ML	Tier 2				
HYDROXYZINE SYP 10MG/5ML	HYDROXYZINE HCL SYRUP 10 MG/5ML	Tier 2				
MEPROBAMATE TAB 200MG	MEPROBAMATE TAB 200 MG	Tier 2				
MEPROBAMATE TAB 400MG	MEPROBAMATE TAB 400 MG	Tier 2				
Aromatase Inhibitors, 3rd Generation - Chemotherapy Agents						
ANASTROZOLE TAB 1MG	ANASTROZOLE TAB 1 MG	Tier 2^				
EXEMESTANE TAB 25MG	EXEMESTANE TAB 25 MG	Tier 3^				
LETROZOLE TAB 2.5MG	LETROZOLE TAB 2.5 MG	Tier 2^				
Attention Deficit Hyperactivity Disorder Agents, Amphetamines - ADHD Drugs						
AMPHET/DEXTR CAP 10MG ER	AMPHETAMINE-DEXTROAMPHETAMINE CAP ER 24HR 10 MG	Tier 3		X		
AMPHET/DEXTR CAP 12.5 ER	AMPHETAMINE-DEXTROAMPHETAMINE 3-BEAD CAP ER 24HR 12.5 MG	Tier 4		X		
AMPHET/DEXTR CAP 15MG ER	AMPHETAMINE-DEXTROAMPHETAMINE CAP ER 24HR 15 MG	Tier 3		X		
AMPHET/DEXTR CAP 20MG ER	AMPHETAMINE-DEXTROAMPHETAMINE CAP ER 24HR 20 MG	Tier 3		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
AMPHET/DEXTR CAP 25MG ER	AMPHETAMINE-DEXTROAMPHETAMINE CAP ER 24HR 25 MG	Tier 3		X		
AMPHET/DEXTR CAP 25MG ER	AMPHETAMINE-DEXTROAMPHETAMINE 3-BEAD CAP ER 24HR 25 MG	Tier 4		X		
AMPHET/DEXTR CAP 30MG ER	AMPHETAMINE-DEXTROAMPHETAMINE CAP ER 24HR 30 MG	Tier 3		X		
AMPHET/DEXTR CAP 37.5 ER	AMPHETAMINE-DEXTROAMPHETAMINE 3-BEAD CAP ER 24HR 37.5 MG	Tier 4		X		
AMPHET/DEXTR CAP 50MG ER	AMPHETAMINE-DEXTROAMPHETAMINE 3-BEAD CAP ER 24HR 50 MG	Tier 4		X		
AMPHET/DEXTR CAP 5MG ER	AMPHETAMINE-DEXTROAMPHETAMINE CAP ER 24HR 5 MG	Tier 3		X		
AMPHET/DEXTR TAB 10MG	AMPHETAMINE-DEXTROAMPHETAMINE TAB 10 MG	Tier 2				
AMPHET/DEXTR TAB 12.5MG	AMPHETAMINE-DEXTROAMPHETAMINE TAB 12.5 MG	Tier 2				
AMPHET/DEXTR TAB 15MG	AMPHETAMINE-DEXTROAMPHETAMINE TAB 15 MG	Tier 2				
AMPHET/DEXTR TAB 20MG	AMPHETAMINE-DEXTROAMPHETAMINE TAB 20 MG	Tier 2				
AMPHET/DEXTR TAB 30MG	AMPHETAMINE-DEXTROAMPHETAMINE TAB 30 MG	Tier 2				
AMPHET/DEXTR TAB 5MG	AMPHETAMINE-DEXTROAMPHETAMINE TAB 5 MG	Tier 2				
AMPHET/DEXTR TAB 7.5MG	AMPHETAMINE-DEXTROAMPHETAMINE TAB 7.5 MG	Tier 2				
AMPHETAMINE TAB 10MG	AMPHETAMINE SULFATE TAB 10 MG	Tier 3				
AMPHETAMINE TAB 5MG	AMPHETAMINE SULFATE TAB 5 MG	Tier 3				
DEXTROAMPHET CAP 10MG ER	DEXTROAMPHETAMINE SULFATE CAP ER 24HR 10 MG	Tier 4		X		
DEXTROAMPHET CAP 15MG ER	DEXTROAMPHETAMINE SULFATE CAP ER 24HR 15 MG	Tier 4		X		
DEXTROAMPHET CAP 5MG ER	DEXTROAMPHETAMINE SULFATE CAP ER 24HR 5 MG	Tier 3		X		
DEXTROAMPHET SOL 5MG/5ML	DEXTROAMPHETAMINE SULFATE ORAL SOLUTION 5 MG/5ML	Tier 2				
DEXTROAMPHET TAB 10MG	DEXTROAMPHETAMINE SULFATE TAB 10 MG	Tier 3				
DEXTROAMPHET TAB 5MG	DEXTROAMPHETAMINE SULFATE TAB 5 MG	Tier 3				
LISDEXAMFETA CAP 10MG	LISDEXAMFETAMINE DIMESYLATE CAP 10 MG	Tier 4		X		
LISDEXAMFETA CAP 20MG	LISDEXAMFETAMINE DIMESYLATE CAP 20 MG	Tier 4		X		
LISDEXAMFETA CAP 30MG	LISDEXAMFETAMINE DIMESYLATE CAP 30 MG	Tier 4		X		
LISDEXAMFETA CAP 40MG	LISDEXAMFETAMINE DIMESYLATE CAP 40 MG	Tier 4		X		
LISDEXAMFETA CAP 50MG	LISDEXAMFETAMINE DIMESYLATE CAP 50 MG	Tier 4		X		
LISDEXAMFETA CAP 60MG	LISDEXAMFETAMINE DIMESYLATE CAP 60 MG	Tier 4		X		
LISDEXAMFETA CAP 70MG	LISDEXAMFETAMINE DIMESYLATE CAP 70 MG	Tier 4		X		
LISDEXAMFETA CHW 10MG	LISDEXAMFETAMINE DIMESYLATE CHEW TAB 10 MG	Tier 4		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
LISDEXAMFETA CHW 20MG	LISDEXAMFETAMINE DIMESYLATE CHEW TAB 20 MG	Tier 4		X		
LISDEXAMFETA CHW 30MG	LISDEXAMFETAMINE DIMESYLATE CHEW TAB 30 MG	Tier 4		X		
LISDEXAMFETA CHW 40MG	LISDEXAMFETAMINE DIMESYLATE CHEW TAB 40 MG	Tier 4		X		
LISDEXAMFETA CHW 50MG	LISDEXAMFETAMINE DIMESYLATE CHEW TAB 50 MG	Tier 4		X		
LISDEXAMFETA CHW 60MG	LISDEXAMFETAMINE DIMESYLATE CHEW TAB 60 MG	Tier 4		X		
METHAMPHETAM TAB 5MG	METHAMPHETAMINE HCL TAB 5 MG	Tier 2				
XELSTRYM PAD 13.5/9HR	DEXTROAMPHETAMINE TD PATCH 13.5 MG/9HR	Tier 5	X	X		
XELSTRYM PAD 18MG/9HR	DEXTROAMPHETAMINE TD PATCH 18 MG/9HR	Tier 5	X	X		
XELSTRYM PAD 4.5MG/9H	DEXTROAMPHETAMINE TD PATCH 4.5 MG/9HR	Tier 5	X	X		
XELSTRYM PAD 9MG/9HR	DEXTROAMPHETAMINE TD PATCH 9 MG/9HR	Tier 5	X	X		
Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines - ADHD Drugs						
ATOMOXETINE CAP 100MG	ATOMOXETINE HCL CAP 100 MG (BASE EQUIV)	Tier 5		X		
ATOMOXETINE CAP 10MG	ATOMOXETINE HCL CAP 10 MG (BASE EQUIV)	Tier 5		X		
ATOMOXETINE CAP 18MG	ATOMOXETINE HCL CAP 18 MG (BASE EQUIV)	Tier 5		X		
ATOMOXETINE CAP 25MG	ATOMOXETINE HCL CAP 25 MG (BASE EQUIV)	Tier 5		X		
ATOMOXETINE CAP 40MG	ATOMOXETINE HCL CAP 40 MG (BASE EQUIV)	Tier 5		X		
ATOMOXETINE CAP 60MG	ATOMOXETINE HCL CAP 60 MG (BASE EQUIV)	Tier 5		X		
ATOMOXETINE CAP 80MG	ATOMOXETINE HCL CAP 80 MG (BASE EQUIV)	Tier 5		X		
AZSTARYS CAP 26.1-5.2	SERDEXMETHYLPHENIDATE- DEXMETHYLPHENIDATE CAP 26.1-5.2 MG	Tier 4		X	X	
AZSTARYS CAP 39.2-7.8	SERDEXMETHYLPHENIDATE- DEXMETHYLPHENIDATE CAP 39.2-7.8 MG	Tier 4		X	X	
AZSTARYS CAP 52.3-10.	SERDEXMETHYLPHENIDATE- DEXMETHYLPHENIDATE CAP 52.3-10.4 MG	Tier 4		X	X	
CLONIDINE TAB 0.1MG ER	CLONIDINE HCL TAB ER 12HR 0.1 MG	Tier 3				
DEXMETHYLPH TAB 10MG	DEXMETHYLPHENIDATE HCL TAB 10 MG	Tier 2				
DEXMETHYLPH TAB 2.5MG	DEXMETHYLPHENIDATE HCL TAB 2.5 MG	Tier 2				
DEXMETHYLPH TAB 5MG	DEXMETHYLPHENIDATE HCL TAB 5 MG	Tier 2				
DEXMETHYLPHE CAP 10MG ER	DEXMETHYLPHENIDATE HCL CAP ER 24 HR 10 MG	Tier 3		X		
DEXMETHYLPHE CAP 15MG ER	DEXMETHYLPHENIDATE HCL CAP ER 24 HR 15 MG	Tier 3		X		
DEXMETHYLPHE CAP 20MG ER	DEXMETHYLPHENIDATE HCL CAP ER 24 HR 20 MG	Tier 3		X		
DEXMETHYLPHE CAP 25MG ER	DEXMETHYLPHENIDATE HCL CAP ER 24 HR 25 MG	Tier 3		X		
DEXMETHYLPHE CAP 30MG ER	DEXMETHYLPHENIDATE HCL CAP ER 24 HR 30 MG	Tier 3		X		
DEXMETHYLPHE CAP 35MG ER	DEXMETHYLPHENIDATE HCL CAP ER 24 HR 35 MG	Tier 3		X		
DEXMETHYLPHE CAP 40MG ER	DEXMETHYLPHENIDATE HCL CAP ER 24 HR 40 MG	Tier 3		X		
DEXMETHYLPHE CAP 5MG ER	DEXMETHYLPHENIDATE HCL CAP ER 24 HR 5 MG	Tier 3		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
GUANFACINE TAB 1MG ER	GUANFACINE HCL TAB ER 24HR 1 MG (BASE EQUIV)	Tier 3				
GUANFACINE TAB 2MG ER	GUANFACINE HCL TAB ER 24HR 2 MG (BASE EQUIV)	Tier 3				
GUANFACINE TAB 3MG ER	GUANFACINE HCL TAB ER 24HR 3 MG (BASE EQUIV)	Tier 3				
GUANFACINE TAB 4MG ER	GUANFACINE HCL TAB ER 24HR 4 MG (BASE EQUIV)	Tier 3				
JORNAY PM CAP 100MG ER	METHYLPHENIDATE HCL CAP DELAYED ER 24HR 100 MG (PM)	Tier 4		X	X	
JORNAY PM CAP 20MG ER	METHYLPHENIDATE HCL CAP DELAYED ER 24HR 20 MG (PM)	Tier 4		X	X	
JORNAY PM CAP 40MG ER	METHYLPHENIDATE HCL CAP DELAYED ER 24HR 40 MG (PM)	Tier 4		X	X	
JORNAY PM CAP 60MG ER	METHYLPHENIDATE HCL CAP DELAYED ER 24HR 60 MG (PM)	Tier 4		X	X	
JORNAY PM CAP 80MG ER	METHYLPHENIDATE HCL CAP DELAYED ER 24HR 80 MG (PM)	Tier 4		X	X	
METHYLPHENID CAP 10MG CD	METHYLPHENIDATE HCL CAP ER 10 MG (CD)	Tier 3		X		
METHYLPHENID CAP 10MG LA	METHYLPHENIDATE HCL CAP ER 24HR 10 MG (LA)	Tier 3		X		
METHYLPHENID CAP 20MG CD	METHYLPHENIDATE HCL CAP ER 20 MG (CD)	Tier 3		X		
METHYLPHENID CAP 20MG LA	METHYLPHENIDATE HCL CAP ER 24HR 20 MG (LA)	Tier 3		X		
METHYLPHENID CAP 30MG CD	METHYLPHENIDATE HCL CAP ER 30 MG (CD)	Tier 3		X		
METHYLPHENID CAP 30MG LA	METHYLPHENIDATE HCL CAP ER 24HR 30 MG (LA)	Tier 3		X		
METHYLPHENID CAP 40MG CD	METHYLPHENIDATE HCL CAP ER 40 MG (CD)	Tier 3		X		
METHYLPHENID CAP 40MG LA	METHYLPHENIDATE HCL CAP ER 24HR 40 MG (LA)	Tier 3		X		
METHYLPHENID CAP 50MG CD	METHYLPHENIDATE HCL CAP ER 50 MG (CD)	Tier 3		X		
METHYLPHENID CAP 60MG CD	METHYLPHENIDATE HCL CAP ER 60 MG (CD)	Tier 3		X		
METHYLPHENID CAP 60MG LA	METHYLPHENIDATE HCL CAP ER 24HR 60 MG (LA)	Tier 3				
METHYLPHENID CHW 10MG	METHYLPHENIDATE HCL CHEW TAB 10 MG	Tier 4				
METHYLPHENID CHW 2.5MG	METHYLPHENIDATE HCL CHEW TAB 2.5 MG	Tier 4				
METHYLPHENID CHW 5MG	METHYLPHENIDATE HCL CHEW TAB 5 MG	Tier 4				
METHYLPHENID SOL 10MG/5ML	METHYLPHENIDATE HCL SOLN 10 MG/5ML	Tier 2				
METHYLPHENID SOL 5MG/5ML	METHYLPHENIDATE HCL SOLN 5 MG/5ML	Tier 2				
METHYLPHENID TAB 10MG	METHYLPHENIDATE HCL TAB 10 MG	Tier 2				
METHYLPHENID TAB 10MG ER	METHYLPHENIDATE HCL TAB ER 10 MG	Tier 3		X		
METHYLPHENID TAB 18MG OSM	METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 18 MG	Tier 3		X		
METHYLPHENID TAB 20MG	METHYLPHENIDATE HCL TAB 20 MG	Tier 2				
METHYLPHENID TAB 20MG ER	METHYLPHENIDATE HCL TAB ER 20 MG	Tier 3		X		
METHYLPHENID TAB 27MG OSM	METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 27 MG	Tier 3		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
METHYLPHENID TAB 36MG OSM	METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 36 MG	Tier 3		X		
METHYLPHENID TAB 54MG OSM	METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 54 MG	Tier 3		X		
METHYLPHENID TAB 5MG	METHYLPHENIDATE HCL TAB 5 MG	Tier 2				
ONYDA XR SUS 0.1MG/ML	CLONIDINE HCL EXTENDED RELEASE SUSP 0.1 MG/ML	Tier 4		X		
Benign Prostatic Hypertrophy Agents - Prostate Drugs						
ALFUZOSIN TAB 10MG ER	ALFUZOSIN HCL TAB ER 24HR 10 MG	Tier 2				
CARDURA XL TAB 4MG	DOXAZOSIN MESYLATE TAB ER 24 HR 4 MG (BASE EQUIV)	Tier 4				
CARDURA XL TAB 8MG	DOXAZOSIN MESYLATE TAB ER 24 HR 8 MG (BASE EQUIV)	Tier 4				
DUTASTERIDE CAP 0.5MG	DUTASTERIDE CAP 0.5 MG	Tier 3				
FINASTERIDE TAB 5MG	FINASTERIDE TAB 5 MG	Tier 2				
SILODOSIN CAP 4MG	SILODOSIN CAP 4 MG	Tier 4				
SILODOSIN CAP 8MG	SILODOSIN CAP 8 MG	Tier 4				
TADALAFIL TAB 2.5MG	TADALAFIL TAB 2.5 MG	Tier 3		X		
TADALAFIL TAB 5MG	TADALAFIL TAB 5 MG	Tier 3		X		
TAMSULOSIN CAP 0.4MG	TAMSULOSIN HCL CAP 0.4 MG	Tier 2				
TERAZOSIN CAP 10MG	TERAZOSIN HCL CAP 10 MG (BASE EQUIVALENT)	Tier 2				
TERAZOSIN CAP 1MG	TERAZOSIN HCL CAP 1 MG (BASE EQUIVALENT)	Tier 2				
TERAZOSIN CAP 2MG	TERAZOSIN HCL CAP 2 MG (BASE EQUIVALENT)	Tier 2				
TERAZOSIN CAP 5MG	TERAZOSIN HCL CAP 5 MG (BASE EQUIVALENT)	Tier 2				
Benzodiazepines - Anxiety Drugs						
ALPRAZOLAM CON 1 MG/ML	ALPRAZOLAM CONC 1 MG/ML	Tier 2				
ALPRAZOLAM TAB 0.25 ODT	ALPRAZOLAM ORALLY DISINTEGRATING TAB 0.25 MG	Tier 2				
ALPRAZOLAM TAB 0.25MG	ALPRAZOLAM TAB 0.25 MG	Tier 2				
ALPRAZOLAM TAB 0.5MG	ALPRAZOLAM TAB 0.5 MG	Tier 2				
ALPRAZOLAM TAB 0.5MG ER	ALPRAZOLAM TAB ER 24HR 0.5 MG	Tier 2				
ALPRAZOLAM TAB 0.5MG OD	ALPRAZOLAM ORALLY DISINTEGRATING TAB 0.5 MG	Tier 2				
ALPRAZOLAM TAB 0.5MG XR	ALPRAZOLAM TAB ER 24HR 0.5 MG	Tier 2				
ALPRAZOLAM TAB 1MG	ALPRAZOLAM TAB 1 MG	Tier 2				
ALPRAZOLAM TAB 1MG ER	ALPRAZOLAM TAB ER 24HR 1 MG	Tier 2				
ALPRAZOLAM TAB 1MG ODT	ALPRAZOLAM ORALLY DISINTEGRATING TAB 1 MG	Tier 2				
ALPRAZOLAM TAB 1MG XR	ALPRAZOLAM TAB ER 24HR 1 MG	Tier 2				
ALPRAZOLAM TAB 2MG	ALPRAZOLAM TAB 2 MG	Tier 2				
ALPRAZOLAM TAB 2MG ER	ALPRAZOLAM TAB ER 24HR 2 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ALPRAZOLAM TAB 2MG ODT	ALPRAZOLAM ORALLY DISINTEGRATING TAB 2 MG	Tier 2				
ALPRAZOLAM TAB 2MG XR	ALPRAZOLAM TAB ER 24HR 2 MG	Tier 2				
ALPRAZOLAM TAB 3MG ER	ALPRAZOLAM TAB ER 24HR 3 MG	Tier 2				
ALPRAZOLAM TAB 3MG XR	ALPRAZOLAM TAB ER 24HR 3 MG	Tier 2				
CHLORDIAZEP CAP 10MG	CHLORDIAZEPOXIDE HCL CAP 10 MG	Tier 2				
CHLORDIAZEP CAP 25MG	CHLORDIAZEPOXIDE HCL CAP 25 MG	Tier 2				
CHLORDIAZEP CAP 5MG	CHLORDIAZEPOXIDE HCL CAP 5 MG	Tier 2				
CLONAZEP ODT TAB 0.125MG	CLONAZEPAM ORALLY DISINTEGRATING TAB 0.125 MG	Tier 2				
CLONAZEP ODT TAB 0.25MG	CLONAZEPAM ORALLY DISINTEGRATING TAB 0.25 MG	Tier 2				
CLONAZEP ODT TAB 0.5MG	CLONAZEPAM ORALLY DISINTEGRATING TAB 0.5 MG	Tier 2				
CLONAZEP ODT TAB 1MG	CLONAZEPAM ORALLY DISINTEGRATING TAB 1 MG	Tier 2				
CLONAZEP ODT TAB 2MG	CLONAZEPAM ORALLY DISINTEGRATING TAB 2 MG	Tier 2				
CLONAZEPAM TAB 0.5MG	CLONAZEPAM TAB 0.5 MG	Tier 2				
CLONAZEPAM TAB 1MG	CLONAZEPAM TAB 1 MG	Tier 2				
CLONAZEPAM TAB 2MG	CLONAZEPAM TAB 2 MG	Tier 2				
CLORAZ DIPOT TAB 15MG	CLORAZEPATE DIPOTASSIUM TAB 15 MG	Tier 2				
CLORAZ DIPOT TAB 3.75MG	CLORAZEPATE DIPOTASSIUM TAB 3.75 MG	Tier 2				
CLORAZ DIPOT TAB 7.5MG	CLORAZEPATE DIPOTASSIUM TAB 7.5 MG	Tier 2				
DIAZEPAM CON 25MG/5ML	DIAZEPAM CONC 5 MG/ML	Tier 2				
DIAZEPAM CON 5MG/ML	DIAZEPAM CONC 5 MG/ML	Tier 2				
DIAZEPAM SOL 5MG/5ML	DIAZEPAM ORAL SOLN 1 MG/ML	Tier 2				
DIAZEPAM TAB 10MG	DIAZEPAM TAB 10 MG	Tier 2				
DIAZEPAM TAB 2MG	DIAZEPAM TAB 2 MG	Tier 2				
DIAZEPAM TAB 5MG	DIAZEPAM TAB 5 MG	Tier 2				
ESTAZOLAM TAB 1MG	ESTAZOLAM TAB 1 MG	Tier 2				
ESTAZOLAM TAB 2MG	ESTAZOLAM TAB 2 MG	Tier 2				
HALCION TAB 0.25MG	TRIAZOLAM TAB 0.25 MG	Tier 5				
LORAZEPAM CON 2MG/ML	LORAZEPAM CONC 2 MG/ML	Tier 2				
LORAZEPAM TAB 0.5MG	LORAZEPAM TAB 0.5 MG	Tier 2				
LORAZEPAM TAB 1MG	LORAZEPAM TAB 1 MG	Tier 2				
LORAZEPAM TAB 2MG	LORAZEPAM TAB 2 MG	Tier 2				
MIDAZOLAM SYP 2MG/ML	MIDAZOLAM HCL SYRUP 2 MG/ML (BASE EQUIVALENT)	Tier 2				
OXAZEPAM CAP 10MG	OXAZEPAM CAP 10 MG	Tier 2				
OXAZEPAM CAP 15MG	OXAZEPAM CAP 15 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
OXAZEPAM CAP 30MG	OXAZEPAM CAP 30 MG	Tier 2				
TRIAZOLAM TAB 0.125MG	TRIAZOLAM TAB 0.125 MG	Tier 2				
TRIAZOLAM TAB 0.25MG	TRIAZOLAM TAB 0.25 MG	Tier 2				
Beta-adrenergic Blocking Agents - Blood Pressure Drugs						
ACEBUTOLOL CAP 200MG	ACEBUTOLOL HCL CAP 200 MG	Tier 2				
ACEBUTOLOL CAP 400MG	ACEBUTOLOL HCL CAP 400 MG	Tier 2				
ATENOLOL TAB 100MG	ATENOLOL TAB 100 MG	Tier 2				
ATENOLOL TAB 25MG	ATENOLOL TAB 25 MG	Tier 2				
ATENOLOL TAB 50MG	ATENOLOL TAB 50 MG	Tier 2				
BETAXOLOL TAB 10MG	BETAXOLOL HCL TAB 10 MG	Tier 2				
BETAXOLOL TAB 20MG	BETAXOLOL HCL TAB 20 MG	Tier 2				
BISOPROL FUM TAB 10MG	BISOPROLOL FUMARATE TAB 10 MG	Tier 2				
BISOPROL FUM TAB 2.5MG	BISOPROLOL FUMARATE TAB 2.5 MG	Tier 2				
BISOPROL FUM TAB 5MG	BISOPROLOL FUMARATE TAB 5 MG	Tier 2				
CARVEDILOL TAB 12.5MG	CARVEDILOL TAB 12.5 MG	Tier 2				
CARVEDILOL TAB 25MG	CARVEDILOL TAB 25 MG	Tier 2				
CARVEDILOL TAB 3.125MG	CARVEDILOL TAB 3.125 MG	Tier 2				
CARVEDILOL TAB 6.25MG	CARVEDILOL TAB 6.25 MG	Tier 2				
KAPSPARGO CAP 100MG	METOPROLOL SUCC CAP ER 24HR SPRINKLE 100 MG (TARTRATE EQUIV)	Tier 5				
KAPSPARGO CAP 200MG	METOPROLOL SUCC CAP ER 24HR SPRINKLE 200 MG (TARTRATE EQUIV)	Tier 5				
KAPSPARGO CAP 25MG	METOPROLOL SUCC CAP ER 24HR SPRINKLE 25 MG (TARTRATE EQUIV)	Tier 5				
KAPSPARGO CAP 50MG	METOPROLOL SUCC CAP ER 24HR SPRINKLE 50 MG (TARTRATE EQUIV)	Tier 5				
LABETALOL TAB 100MG	LABETALOL HCL TAB 100 MG	Tier 2				
LABETALOL TAB 200MG	LABETALOL HCL TAB 200 MG	Tier 2				
LABETALOL TAB 300MG	LABETALOL HCL TAB 300 MG	Tier 2				
LABETALOL TAB 400MG	LABETALOL HCL TAB 400 MG	Tier 2				
LOPRESSOR TAB 100MG	METOPROLOL TARTRATE TAB 100 MG	Tier 5				
LOPRESSOR TAB 50MG	METOPROLOL TARTRATE TAB 50 MG	Tier 5				
METOPROL SUC TAB 100MG ER	METOPROLOL SUCCINATE TAB ER 24HR 100 MG (TARTRATE EQUIV)	Tier 3				
METOPROL SUC TAB 200MG ER	METOPROLOL SUCCINATE TAB ER 24HR 200 MG (TARTRATE EQUIV)	Tier 3				
METOPROL SUC TAB 25MG ER	METOPROLOL SUCCINATE TAB ER 24HR 25 MG (TARTRATE EQUIV)	Tier 2				
METOPROL SUC TAB 50MG ER	METOPROLOL SUCCINATE TAB ER 24HR 50 MG (TARTRATE EQUIV)	Tier 3				
METOPROL TAR TAB 100MG	METOPROLOL TARTRATE TAB 100 MG	Tier 2				
METOPROL TAR TAB 25MG	METOPROLOL TARTRATE TAB 25 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
METOPROL TAR TAB 50MG	METOPROLOL TARTRATE TAB 50 MG	Tier 2				
NADOLOL TAB 20MG	NADOLOL TAB 20 MG	Tier 2				
NADOLOL TAB 40MG	NADOLOL TAB 40 MG	Tier 2				
NADOLOL TAB 80MG	NADOLOL TAB 80 MG	Tier 2				
NEBIVOLOL TAB 10MG	NEBIVOLOL HCL TAB 10 MG (BASE EQUIVALENT)	Tier 4				
NEBIVOLOL TAB 2.5MG	NEBIVOLOL HCL TAB 2.5 MG (BASE EQUIVALENT)	Tier 4				
NEBIVOLOL TAB 20MG	NEBIVOLOL HCL TAB 20 MG (BASE EQUIVALENT)	Tier 4				
NEBIVOLOL TAB 5MG	NEBIVOLOL HCL TAB 5 MG (BASE EQUIVALENT)	Tier 4				
PINDOLOL TAB 10MG	PINDOLOL TAB 10 MG	Tier 2				
PINDOLOL TAB 5MG	PINDOLOL TAB 5 MG	Tier 2				
PROPRANOLOL CAP 120MG ER	PROPRANOLOL HCL CAP ER 24HR 120 MG	Tier 3				
PROPRANOLOL CAP 160MG ER	PROPRANOLOL HCL CAP ER 24HR 160 MG	Tier 3				
PROPRANOLOL CAP 60MG ER	PROPRANOLOL HCL CAP ER 24HR 60 MG	Tier 3				
PROPRANOLOL CAP 80MG ER	PROPRANOLOL HCL CAP ER 24HR 80 MG	Tier 3				
PROPRANOLOL SOL 20MG/5ML	PROPRANOLOL HCL ORAL SOLN 20 MG/5ML	Tier 2				
PROPRANOLOL SOL 40MG/5ML	PROPRANOLOL HCL ORAL SOLN 40 MG/5ML	Tier 2				
PROPRANOLOL TAB 10MG	PROPRANOLOL HCL TAB 10 MG	Tier 2				
PROPRANOLOL TAB 20MG	PROPRANOLOL HCL TAB 20 MG	Tier 2				
PROPRANOLOL TAB 40MG	PROPRANOLOL HCL TAB 40 MG	Tier 2				
PROPRANOLOL TAB 60MG	PROPRANOLOL HCL TAB 60 MG	Tier 2				
PROPRANOLOL TAB 80MG	PROPRANOLOL HCL TAB 80 MG	Tier 2				
TIMOLOL MAL TAB 10MG	TIMOLOL MALEATE TAB 10 MG	Tier 2				
TIMOLOL MAL TAB 20MG	TIMOLOL MALEATE TAB 20 MG	Tier 2				
TIMOLOL MAL TAB 5MG	TIMOLOL MALEATE TAB 5 MG	Tier 2				
Beta-Lactam, Cephalosporins - Antibiotics						
CEFACLOL CAP 250MG	CEFACLOL CAP 250 MG	Tier 2				
CEFACLOL CAP 500MG	CEFACLOL CAP 500 MG	Tier 2				
CEFACLOL ER TAB 500MG	CEFACLOL MONOHYDRATE TAB ER 12HR 500 MG	Tier 2				
CEFADROXIL CAP 500MG	CEFADROXIL CAP 500 MG	Tier 2				
CEFADROXIL SUS 250/5ML	CEFADROXIL FOR SUSP 250 MG/5ML	Tier 2				
CEFADROXIL SUS 500/5ML	CEFADROXIL FOR SUSP 500 MG/5ML	Tier 2				
CEFADROXIL TAB 1GM	CEFADROXIL TAB 1 GM	Tier 2				
CEFDINIR CAP 300MG	CEFDINIR CAP 300 MG	Tier 2				
CEFDINIR SUS 125/5ML	CEFDINIR FOR SUSP 125 MG/5ML	Tier 2				
CEFDINIR SUS 250/5ML	CEFDINIR FOR SUSP 250 MG/5ML	Tier 2				
CEFIXIME CAP 400MG	CEFIXIME CAP 400 MG	Tier 4				
CEFIXIME SUS 100/5ML	CEFIXIME FOR SUSP 100 MG/5ML	Tier 4				
CEFIXIME SUS 200/5ML	CEFIXIME FOR SUSP 200 MG/5ML	Tier 4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
CEFODO PROX SUS 100/5ML	CEFODOXIME PROXETIL FOR SUSP 100 MG/5ML	Tier 2				
CEFODO PROX SUS 50MG/5ML	CEFODOXIME PROXETIL FOR SUSP 50 MG/5ML	Tier 2				
CEFODOXIME TAB 100MG	CEFODOXIME PROXETIL TAB 100 MG	Tier 2				
CEFODOXIME TAB 200MG	CEFODOXIME PROXETIL TAB 200 MG	Tier 2				
CEFPROZIL SUS 125/5ML	CEFPROZIL FOR SUSP 125 MG/5ML	Tier 2				
CEFPROZIL SUS 250/5ML	CEFPROZIL FOR SUSP 250 MG/5ML	Tier 2				
CEFPROZIL TAB 250MG	CEFPROZIL TAB 250 MG	Tier 2				
CEFPROZIL TAB 500MG	CEFPROZIL TAB 500 MG	Tier 2				
CEFUROXIME TAB 250MG	CEFUROXIME AXETIL TAB 250 MG	Tier 2				
CEFUROXIME TAB 500MG	CEFUROXIME AXETIL TAB 500 MG	Tier 2				
CEPHALEXIN CAP 250MG	CEPHALEXIN CAP 250 MG	Tier 2				
CEPHALEXIN CAP 500MG	CEPHALEXIN CAP 500 MG	Tier 2				
CEPHALEXIN CAP 750MG	CEPHALEXIN CAP 750 MG	Tier 2				
CEPHALEXIN SUS 125/5ML	CEPHALEXIN FOR SUSP 125 MG/5ML	Tier 2				
CEPHALEXIN SUS 250/5ML	CEPHALEXIN FOR SUSP 250 MG/5ML	Tier 2				
CEPHALEXIN TAB 250MG	CEPHALEXIN TAB 250 MG	Tier 2				
CEPHALEXIN TAB 500MG	CEPHALEXIN TAB 500 MG	Tier 2				
Beta-Lactam, Penicillins - Antibiotics						
AMOX/K CLAV CHW 200MG	AMOXICILLIN & K CLAVULANATE CHEW TAB 200-28.5 MG	Tier 2				
AMOX/K CLAV CHW 400MG	AMOXICILLIN & K CLAVULANATE CHEW TAB 400-57 MG	Tier 2				
AMOX/K CLAV SUS 200/5ML	AMOXICILLIN & K CLAVULANATE FOR SUSP 200-28.5 MG/5ML	Tier 2				
AMOX/K CLAV SUS 250/5ML	AMOXICILLIN & K CLAVULANATE FOR SUSP 250-62.5 MG/5ML	Tier 2				
AMOX/K CLAV SUS 400/5ML	AMOXICILLIN & K CLAVULANATE FOR SUSP 400-57 MG/5ML	Tier 2				
AMOX/K CLAV SUS 600/5ML	AMOXICILLIN & K CLAVULANATE FOR SUSP 600-42.9 MG/5ML	Tier 2				
AMOX/K CLAV TAB 250-125	AMOXICILLIN & K CLAVULANATE TAB 250-125 MG	Tier 2				
AMOX/K CLAV TAB 500-125	AMOXICILLIN & K CLAVULANATE TAB 500-125 MG	Tier 2				
AMOX/K CLAV TAB 875-125	AMOXICILLIN & K CLAVULANATE TAB 875-125 MG	Tier 2				
AMOXICILLIN CAP 250MG	AMOXICILLIN (TRIHYDRATE) CAP 250 MG	Tier 2				
AMOXICILLIN CAP 500MG	AMOXICILLIN (TRIHYDRATE) CAP 500 MG	Tier 2				
AMOXICILLIN CHW 125MG	AMOXICILLIN (TRIHYDRATE) CHEW TAB 125 MG	Tier 2				
AMOXICILLIN CHW 250MG	AMOXICILLIN (TRIHYDRATE) CHEW TAB 250 MG	Tier 2				
AMOXICILLIN SUS 125/5ML	AMOXICILLIN (TRIHYDRATE) FOR SUSP 125 MG/5ML	Tier 2				
AMOXICILLIN SUS 200/5ML	AMOXICILLIN (TRIHYDRATE) FOR SUSP 200 MG/5ML	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
AMOXICILLIN SUS 250/5ML	AMOXICILLIN (TRIHYDRATE) FOR SUSP 250 MG/5ML	Tier 2				
AMOXICILLIN SUS 400/5ML	AMOXICILLIN (TRIHYDRATE) FOR SUSP 400 MG/5ML	Tier 2				
AMOXICILLIN TAB 500MG	AMOXICILLIN (TRIHYDRATE) TAB 500 MG	Tier 2				
AMOXICILLIN TAB 875MG	AMOXICILLIN (TRIHYDRATE) TAB 875 MG	Tier 2				
AMPICILLIN CAP 500MG	AMPICILLIN CAP 500 MG	Tier 2				
DICLOXACILL CAP 250MG	DICLOXACILLIN SODIUM CAP 250 MG	Tier 2				
DICLOXACILL CAP 500MG	DICLOXACILLIN SODIUM CAP 500 MG	Tier 2				
PENICILLIN VK SOL 125/5ML	PENICILLIN V POTASSIUM FOR SOLN 125 MG/5ML	Tier 2				
PENICILLIN VK SOL 250/5ML	PENICILLIN V POTASSIUM FOR SOLN 250 MG/5ML	Tier 2				
PENICILLIN VK TAB 250MG	PENICILLIN V POTASSIUM TAB 250 MG	Tier 2				
PENICILLIN VK TAB 500MG	PENICILLIN V POTASSIUM TAB 500 MG	Tier 2				
Blood Formation Modifiers - Blood Formation Drugs						
ALVAIZ TAB 18MG	ELTROMBOPAG CHOLINE TAB 18 MG (BASE EQUIV)	Tier 5	X			X
ALVAIZ TAB 36MG	ELTROMBOPAG CHOLINE TAB 36 MG (BASE EQUIV)	Tier 5	X			X
ALVAIZ TAB 54MG	ELTROMBOPAG CHOLINE TAB 54 MG (BASE EQUIV)	Tier 5	X			X
ALVAIZ TAB 9MG	ELTROMBOPAG CHOLINE TAB 9 MG (BASE EQUIV)	Tier 5	X			X
ANAGRELIDE CAP 0.5MG	ANAGRELIDE HCL CAP 0.5 MG	Tier 2				
ANAGRELIDE CAP 1MG	ANAGRELIDE HCL CAP 1 MG	Tier 2				
ARANESP INJ 100MCG	DARBEPOETIN ALFA SOLN INJ 100 MCG/ML	Tier 4		X		X
ARANESP INJ 100MCG	DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 100 MCG/0.5ML	Tier 4		X		X
ARANESP INJ 10MCG	DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 10 MCG/0.4ML	Tier 4		X		X
ARANESP INJ 150MCG	DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 150 MCG/0.3ML	Tier 4		X		X
ARANESP INJ 200MCG	DARBEPOETIN ALFA SOLN INJ 200 MCG/ML	Tier 4		X		X
ARANESP INJ 200MCG	DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 200 MCG/0.4ML	Tier 4		X		X
ARANESP INJ 25MCG	DARBEPOETIN ALFA SOLN INJ 25 MCG/ML	Tier 4		X		X
ARANESP INJ 25MCG	DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 25 MCG/0.42ML	Tier 4		X		X
ARANESP INJ 300MCG	DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 300 MCG/0.6ML	Tier 4		X		X
ARANESP INJ 40MCG	DARBEPOETIN ALFA SOLN INJ 40 MCG/ML	Tier 4		X		X
ARANESP INJ 40MCG	DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 40 MCG/0.4ML	Tier 4		X		X
ARANESP INJ 500MCG	DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 500 MCG/ML	Tier 4		X		X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ARANESP INJ 60MCG	DARBEPOETIN ALFA SOLN INJ 60 MCG/ML	Tier 4		X		X
ARANESP INJ 60MCG	DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 60 MCG/0.3ML	Tier 4		X		X
DOPTELET TAB 20MG	AVATROMBOPAG MALEATE TAB 20 MG (BASE EQUIV)	Tier 5	X	X		X
DOPTELET SPR CAP 10MG	AVATROMBOPAG MALEATE CAP SPRINKLE 10 MG (BASE EQUIV)	Tier 5	X			X
ELTROMBOPAG POW 12.5MG	ELTROMBOPAG OLAMINE POWDER PACK FOR SUSP 12.5 MG (BASE EQ)	Tier 2	X	X		X
ELTROMBOPAG POW 25MG	ELTROMBOPAG OLAMINE POWDER PACK FOR SUSP 25 MG (BASE EQUIV)	Tier 2	X	X		
EMPAVELI INJ 1080MG	PEGCETACOPLAN SUBCUTANEOUS SOLN 1080 MG/20ML (54 MG/ML)	Tier 4	X	X		X
GRANIX INJ 300/1ML	TBO-FILGRASTIM SUBCUTANEOUS INJ 300 MCG/ML	Tier 5				
GRANIX INJ 480/1.6	TBO-FILGRASTIM SUBCUTANEOUS INJ 480 MCG/1.6ML (300 MCG/ML)	Tier 5				
JESDUVROQ TAB 1MG	DAPRODUSTAT TAB 1 MG	Tier 5	X			
JESDUVROQ TAB 2MG	DAPRODUSTAT TAB 2 MG	Tier 5	X			
JESDUVROQ TAB 4MG	DAPRODUSTAT TAB 4 MG	Tier 5	X			
JESDUVROQ TAB 6MG	DAPRODUSTAT TAB 6 MG	Tier 5	X			
JESDUVROQ TAB 8MG	DAPRODUSTAT TAB 8 MG	Tier 5	X			
LEUKINE INJ 250MCG	SARGRAMOSTIM LYOPHILIZED FOR INJ 250 MCG	Tier 4				
MOZOBIL INJ	PLERIXAFOR SUBCUTANEOUS INJ 24 MG/1.2ML (20 MG/ML)	Tier 5				X
MULPLETA TAB 3MG	LUSUTROMBOPAG TAB 3 MG	Tier 5	X	X		X
NEULASTA INJ 6MG/0.6M	PEGFILGRASTIM SOLN PREFILLED SYRINGE 6 MG/0.6ML	Tier 4				
NIVESTYM INJ 300/0.5	FILGRASTIM-AAFI SOLN PREFILLED SYRINGE 300 MCG/0.5ML	Tier 4				
NIVESTYM INJ 300MCG	FILGRASTIM-AAFI INJ 300 MCG/ML	Tier 4				
NIVESTYM INJ 480/0.8	FILGRASTIM-AAFI SOLN PREFILLED SYRINGE 480 MCG/0.8ML	Tier 4				
NIVESTYM INJ 480MCG	FILGRASTIM-AAFI INJ 480 MCG/1.6ML (300 MCG/ML)	Tier 4				
PLERIXAFOR INJ 24/1.2ML	PLERIXAFOR SUBCUTANEOUS INJ 24 MG/1.2ML (20 MG/ML)	Tier 4				X
PROMACTA POW 12.5MG	ELTROMBOPAG OLAMINE POWDER PACK FOR SUSP 12.5 MG (BASE EQ)	Tier 5	X	X		X
PROMACTA POW 25MG	ELTROMBOPAG OLAMINE POWDER PACK FOR SUSP 25 MG (BASE EQUIV)	Tier 5	X	X		
RETACRIT INJ 10000UNT	EPOETIN ALFA-EPBX INJ 10000 UNIT/ML	Tier 4		X		X
RETACRIT INJ 20000UNI	EPOETIN ALFA-EPBX INJ 20000 UNIT/ML	Tier 4				
RETACRIT INJ 2000UNIT	EPOETIN ALFA-EPBX INJ 2000 UNIT/ML	Tier 4		X		X
RETACRIT INJ 3000UNIT	EPOETIN ALFA-EPBX INJ 3000 UNIT/ML	Tier 4		X		X
RETACRIT INJ 40000UNT	EPOETIN ALFA-EPBX INJ 40000 UNIT/ML	Tier 4		X		X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
RETACRIT INJ 4000UNIT	EPOETIN ALFA-EPBX INJ 4000 UNIT/ML	Tier 4		X		X
UDENYCA INJ 6MG/.6ML	PEGFILGRASTIM-CBQV SOLN PREFILLED SYRINGE 6 MG/0.6ML	Tier 4				
UDENYCA INJ 6MG/0.6	PEGFILGRASTIM-CBQV SOLN AUTO-INJECTOR 6 MG/0.6ML	Tier 4				
XOLREMDI CAP 100MG	MAVORIXAFOR CAP 100 MG	Tier 4	X	X		X
ZARXIO INJ 300/0.5	FILGRASTIM-SNDZ SOLN PREFILLED SYRINGE 300 MCG/0.5ML	Tier 4				
ZARXIO INJ 480/0.8	FILGRASTIM-SNDZ SOLN PREFILLED SYRINGE 480 MCG/0.8ML	Tier 4				
Bronchodilators, Anticholinergic - Asthma/Lung Drugs						
ATROVENT HFA AER 17MCG	IPRATROPIUM BROMIDE HFA INHAL AEROSOL 17 MCG/ACT	Tier 4		X		
IPRATROPIUM SOL 0.02%INH	IPRATROPIUM BROMIDE INHAL SOLN 0.02%	Tier 2				
IPRATROPIUM SPR 0.03%	IPRATROPIUM BROMIDE NASAL SOLN 0.03% (21 MCG/SPRAY)	Tier 2				
IPRATROPIUM SPR 0.06%	IPRATROPIUM BROMIDE NASAL SOLN 0.06% (42 MCG/SPRAY)	Tier 2				
SPIRIVA CAP HANDIHLR	TIOTROPIUM BROMIDE INHAL CAP 18 MCG (BASE EQUIV)	Tier 3		X		
SPIRIVA RESP AER 1.25MCG	TIOTROPIUM BROMIDE INHAL AEROSOL 1.25 MCG/ACT	Tier 3		X		
SPIRIVA RESP AER 2.5MCG	TIOTROPIUM BROMIDE INHAL AEROSOL 2.5 MCG/ACT	Tier 3		X		
YUPELRI SOL	REVEFENACIN INHALATION SOLUTION 175 MCG/3ML	Tier 5	X	X		
Bronchodilators, Sympathomimetic - Asthma/Lung Drugs						
ALBUTEROL AER HFA	ALBUTEROL SULFATE INHAL AERO 108 MCG/ACT (90MCG BASE EQUIV)	Tier 3		X		
ALBUTEROL NEB 0.083%	ALBUTEROL SULFATE SOLN NEBU 0.083% (2.5 MG/3ML)	Tier 2				
ALBUTEROL NEB 0.5%	ALBUTEROL SULFATE SOLN NEBU 0.5% (5 MG/ML)	Tier 2				
ALBUTEROL NEB 0.5%	ALBUTEROL SULFATE SOLN NEBU 0.5% (5 MG/ML)	Tier 4				
ALBUTEROL NEB 0.63MG/3	ALBUTEROL SULFATE SOLN NEBU 0.63 MG/3ML (BASE EQUIV)	Tier 2				
ALBUTEROL NEB 1.25MG/3	ALBUTEROL SULFATE SOLN NEBU 1.25 MG/3ML (BASE EQUIV)	Tier 2				
ALBUTEROL SYP 2MG/5ML	ALBUTEROL SULFATE SYRUP 2 MG/5ML	Tier 2				
ALBUTEROL TAB 2MG	ALBUTEROL SULFATE TAB 2 MG	Tier 4	X			
ALBUTEROL TAB 4MG	ALBUTEROL SULFATE TAB 4 MG	Tier 4	X			
ARFORMOTEROL NEB 15/2ML	ARFORMOTEROL TARTRATE SOLN NEBU 15 MCG/2ML (BASE EQUIV)	Tier 5		X		
AUVI-Q INJ 0.15MG	EPINEPHRINE SOLUTION AUTO-INJECTOR 0.15 MG/0.15ML (1:1000)	Tier 3		X		
AUVI-Q INJ 0.1MG	EPINEPHRINE SOLUTION AUTO-INJECTOR 0.1 MG/0.1ML	Tier 3		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
AUVI-Q INJ 0.3MG	EPINEPHRINE SOLUTION AUTO-INJECTOR 0.3 MG/0.3ML (1:1000)	Tier 3		X		
EPINEPHRINE INJ 0.15MG	EPINEPHRINE SOLUTION AUTO-INJECTOR 0.15 MG/0.3ML (1:2000)	Tier 2		X		
EPINEPHRINE INJ 0.15MG	EPINEPHRINE SOLUTION AUTO-INJECTOR 0.15 MG/0.15ML (1:1000)	Tier 2		X		
EPINEPHRINE INJ 0.3MG	EPINEPHRINE SOLUTION AUTO-INJECTOR 0.3 MG/0.3ML (1:1000)	Tier 2		X		
EPINEPHRINE INJ 0.3MG	EPINEPHRINE SOLUTION PREFILLED SYRINGE 0.3 MG/0.3ML (1:1000)	Tier 3				
LEVALBUTEROL AER 45/ACT	LEVALBUTEROL TARTRATE INHAL AEROSOL 45 MCG/ACT (BASE EQUIV)	Tier 4		X		
LEVALBUTEROL NEB 0.31MG	LEVALBUTEROL HCL SOLN NEBU 0.31 MG/3ML (BASE EQUIV)	Tier 4		X		
LEVALBUTEROL NEB 0.63MG	LEVALBUTEROL HCL SOLN NEBU 0.63 MG/3ML (BASE EQUIV)	Tier 4		X		
LEVALBUTEROL NEB 1.25/0.5	LEVALBUTEROL HCL SOLN NEBU CONC 1.25 MG/0.5ML (BASE EQUIV)	Tier 4		X		
LEVALBUTEROL NEB 1.25MG	LEVALBUTEROL HCL SOLN NEBU 1.25 MG/3ML (BASE EQUIV)	Tier 4		X		
NEFFY SPR 1MG	EPINEPHRINE NASAL SPRAY 1 MG/0.1ML	Tier 5		X		
NEFFY SPR 2MG	EPINEPHRINE NASAL SPRAY 2 MG/0.1ML	Tier 5		X		
SEREVENT DIS AER 50MCG	SALMETEROL XINAFOATE AER POW BA 50 MCG/ACT (BASE EQUIV)	Tier 3		X		
STRIVERDI AER 2.5MCG	OLODATEROL HCL INHAL AEROSOL SOLN 2.5 MCG/ACT (BASE EQUIV)	Tier 3		X		
SYMJEPI INJ 0.15MG	EPINEPHRINE SOLN PREFILLED SYRINGE 0.15 MG/0.3ML (1:2000)	Tier 3				
SYMJEPI INJ 0.3MG	EPINEPHRINE SOLUTION PREFILLED SYRINGE 0.3 MG/0.3ML (1:1000)	Tier 3				
TERBUTALINE TAB 2.5MG	TERBUTALINE SULFATE TAB 2.5 MG	Tier 2				
TERBUTALINE TAB 5MG	TERBUTALINE SULFATE TAB 5 MG	Tier 2				
XOPENEX HFA AER	LEVALBUTEROL TARTRATE INHAL AEROSOL 45 MCG/ACT (BASE EQUIV)	Tier 4		X		
Calcitonin Gene-Related Peptide (CGRP) Receptor Antagonist - Migraine Drugs						
AIMOVIG INJ 140MG/ML	ERENUMAB-AOOE SUBCUTANEOUS SOLN AUTO-INJECTOR 140 MG/ML	Tier 4	X	X	X	
AIMOVIG INJ 70MG/ML	ERENUMAB-AOOE SUBCUTANEOUS SOLN AUTO-INJECTOR 70 MG/ML	Tier 4	X	X	X	
EMGALITY INJ 100MG/ML	GALCANEZUMAB-GNLM SUBCUTANEOUS SOLN PREFILLED SYR 100 MG/ML	Tier 4	X	X	X	
EMGALITY INJ 120MG/ML	GALCANEZUMAB-GNLM SUBCUTANEOUS SOLN AUTO-INJECTOR 120 MG/ML	Tier 4	X	X	X	
EMGALITY INJ 120MG/ML	GALCANEZUMAB-GNLM SUBCUTANEOUS SOLN PREFILLED SYR 120 MG/ML	Tier 4	X	X	X	
NURTEC TAB 75MG ODT	RIMEGEPANT SULFATE TAB DISINT 75 MG	Tier 4	X	X	X	
QULIPTA TAB 10MG	ATOGEPAANT TAB 10 MG	Tier 4	X	X	X	
QULIPTA TAB 30MG	ATOGEPAANT TAB 30 MG	Tier 4	X	X	X	

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
QULIPTA TAB 60MG	ATOGEPAANT TAB 60 MG	Tier 4	X	X	X	
UBRELVY TAB 100MG	UBROGEPANT TAB 100 MG	Tier 4	X	X	X	
UBRELVY TAB 50MG	UBROGEPANT TAB 50 MG	Tier 4	X	X	X	
ZAVZPRET SPR 10MG	ZAVEGEPANT HCL NASAL SPRAY 10 MG/ACT	Tier 5	X	X	X	
Calcium Channel Blocking Agents - Blood Pressure Drugs						
AMLODIPINE TAB 10MG	AMLODIPINE BESYLATE TAB 10 MG (BASE EQUIVALENT)	Tier 2				
AMLODIPINE TAB 2.5MG	AMLODIPINE BESYLATE TAB 2.5 MG (BASE EQUIVALENT)	Tier 2				
AMLODIPINE TAB 5MG	AMLODIPINE BESYLATE TAB 5 MG (BASE EQUIVALENT)	Tier 2				
CARTIA XT CAP 120/24HR	DILTIAZEM HCL COATED BEADS CAP ER 24HR 120 MG	Tier 3				
CARTIA XT CAP 180/24HR	DILTIAZEM HCL COATED BEADS CAP ER 24HR 180 MG	Tier 3				
CARTIA XT CAP 240/24HR	DILTIAZEM HCL COATED BEADS CAP ER 24HR 240 MG	Tier 3				
CARTIA XT CAP 300/24HR	DILTIAZEM HCL COATED BEADS CAP ER 24HR 300 MG	Tier 3				
DILT-XR CAP 120MG	DILTIAZEM HCL CAP ER 24HR 120 MG	Tier 2				
DILT-XR CAP 180MG	DILTIAZEM HCL CAP ER 24HR 180 MG	Tier 2				
DILT-XR CAP 240MG	DILTIAZEM HCL CAP ER 24HR 240 MG	Tier 2				
DILTIAZEM CAP 120MG ER	DILTIAZEM HCL CAP ER 12HR 120 MG	Tier 2				
DILTIAZEM CAP 120MG ER	DILTIAZEM HCL COATED BEADS CAP ER 24HR 120 MG	Tier 3				
DILTIAZEM CAP 120MG ER	DILTIAZEM HCL CAP ER 24HR 120 MG	Tier 2				
DILTIAZEM CAP 120MG ER	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 120 MG	Tier 3				
DILTIAZEM CAP 120MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 120 MG	Tier 3				
DILTIAZEM CAP 180MG ER	DILTIAZEM HCL COATED BEADS CAP ER 24HR 180 MG	Tier 3				
DILTIAZEM CAP 180MG ER	DILTIAZEM HCL CAP ER 24HR 180 MG	Tier 2				
DILTIAZEM CAP 180MG ER	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 180 MG	Tier 3				
DILTIAZEM CAP 180MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 180 MG	Tier 3				
DILTIAZEM CAP 240MG ER	DILTIAZEM HCL COATED BEADS CAP ER 24HR 240 MG	Tier 3				
DILTIAZEM CAP 240MG ER	DILTIAZEM HCL CAP ER 24HR 240 MG	Tier 2				
DILTIAZEM CAP 240MG ER	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 240 MG	Tier 3				
DILTIAZEM CAP 240MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 240 MG	Tier 3				
DILTIAZEM CAP 300MG ER	DILTIAZEM HCL COATED BEADS CAP ER 24HR 300 MG	Tier 3				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
DILTIAZEM CAP 300MG ER	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 300 MG	Tier 3				
DILTIAZEM CAP 360MG CD	DILTIAZEM HCL COATED BEADS CAP ER 24HR 360 MG	Tier 3				
DILTIAZEM CAP 360MG ER	DILTIAZEM HCL COATED BEADS CAP ER 24HR 360 MG	Tier 3				
DILTIAZEM CAP 360MG ER	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 360 MG	Tier 3				
DILTIAZEM CAP 420MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 420 MG	Tier 3				
DILTIAZEM CAP 60MG ER	DILTIAZEM HCL CAP ER 12HR 60 MG	Tier 2				
DILTIAZEM CAP 90MG ER	DILTIAZEM HCL CAP ER 12HR 90 MG	Tier 2				
DILTIAZEM TAB 120MG	DILTIAZEM HCL TAB 120 MG	Tier 2				
DILTIAZEM TAB 120MG ER	DILTIAZEM HCL TAB ER 24HR 120 MG	Tier 3				
DILTIAZEM TAB 240MG ER	DILTIAZEM HCL TAB ER 24HR 240 MG	Tier 3				
DILTIAZEM TAB 300MG ER	DILTIAZEM HCL TAB ER 24HR 300 MG	Tier 3				
DILTIAZEM TAB 30MG	DILTIAZEM HCL TAB 30 MG	Tier 2				
DILTIAZEM TAB 360MG ER	DILTIAZEM HCL TAB ER 24HR 360 MG	Tier 3				
DILTIAZEM TAB 60MG	DILTIAZEM HCL TAB 60 MG	Tier 2				
DILTIAZEM TAB 90MG	DILTIAZEM HCL TAB 90 MG	Tier 2				
DILTIAZEM ER TAB 180MG	DILTIAZEM HCL TAB ER 24HR 180 MG	Tier 3				
DILTIAZEM ER TAB 240MG	DILTIAZEM HCL TAB ER 24HR 240 MG	Tier 3				
DILTIAZEM ER TAB 300MG	DILTIAZEM HCL TAB ER 24HR 300 MG	Tier 3				
DILTIAZEM ER TAB 360MG	DILTIAZEM HCL TAB ER 24HR 360 MG	Tier 3				
DILTIAZEM ER TAB 420MG	DILTIAZEM HCL TAB ER 24HR 420 MG	Tier 3				
FELODIPINE TAB 10MG ER	FELODIPINE TAB ER 24HR 10 MG	Tier 2				
FELODIPINE TAB 2.5MG ER	FELODIPINE TAB ER 24HR 2.5 MG	Tier 2				
FELODIPINE TAB 5MG ER	FELODIPINE TAB ER 24HR 5 MG	Tier 2				
ISRADIPINE CAP 2.5MG	ISRADIPINE CAP 2.5 MG	Tier 2				
ISRADIPINE CAP 5MG	ISRADIPINE CAP 5 MG	Tier 2				
MATZIM LA TAB 180MG/24	DILTIAZEM HCL TAB ER 24HR 180 MG	Tier 3				
MATZIM LA TAB 240MG/24	DILTIAZEM HCL TAB ER 24HR 240 MG	Tier 3				
MATZIM LA TAB 300MG/24	DILTIAZEM HCL TAB ER 24HR 300 MG	Tier 3				
MATZIM LA TAB 360MG/24	DILTIAZEM HCL TAB ER 24HR 360 MG	Tier 3				
MATZIM LA TAB 420MG/24	DILTIAZEM HCL TAB ER 24HR 420 MG	Tier 3				
NICARDIPINE CAP 20MG	NICARDIPINE HCL CAP 20 MG	Tier 2				
NICARDIPINE CAP 30MG	NICARDIPINE HCL CAP 30 MG	Tier 2				
NIFEDIPINE CAP 10MG	NIFEDIPINE CAP 10 MG	Tier 2				
NIFEDIPINE CAP 20MG	NIFEDIPINE CAP 20 MG	Tier 2				
NIFEDIPINE TAB 30MG ER	NIFEDIPINE TAB ER 24HR OSMOTIC RELEASE 30 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
NIFEDIPINE TAB 30MG ER	NIFEDIPINE TAB ER 24HR 30 MG	Tier 2				
NIFEDIPINE TAB 60MG ER	NIFEDIPINE TAB ER 24HR OSMOTIC RELEASE 60 MG	Tier 2				
NIFEDIPINE TAB 60MG ER	NIFEDIPINE TAB ER 24HR 60 MG	Tier 2				
NIFEDIPINE TAB 90MG ER	NIFEDIPINE TAB ER 24HR OSMOTIC RELEASE 90 MG	Tier 2				
NIFEDIPINE TAB 90MG ER	NIFEDIPINE TAB ER 24HR 90 MG	Tier 2				
NIMODIPINE CAP 30MG	NIMODIPINE CAP 30 MG	Tier 2				
NIMODIPINE SOL 60/20ML	NIMODIPINE ORAL SOLN 60 MG/20ML (3 MG/ML)	Tier 3				
NISOLDIPINE TAB 17MG ER	NISOLDIPINE TAB ER 24HR 17 MG	Tier 3				
NISOLDIPINE TAB 20MG ER	NISOLDIPINE TAB ER 24HR 20 MG	Tier 3				
NISOLDIPINE TAB 25.5MG	NISOLDIPINE TAB ER 24HR 25.5 MG	Tier 3				
NISOLDIPINE TAB 30MG ER	NISOLDIPINE TAB ER 24HR 30 MG	Tier 3				
NISOLDIPINE TAB 34MG ER	NISOLDIPINE TAB ER 24HR 34 MG	Tier 3				
NISOLDIPINE TAB 40MG ER	NISOLDIPINE TAB ER 24HR 40 MG	Tier 3				
NISOLDIPINE TAB 8.5MG ER	NISOLDIPINE TAB ER 24HR 8.5 MG	Tier 3				
NORLIQVA SOL 1MG/ML	AMLODIPINE BESYLATE ORAL SOLN 1 MG/ML (BASE EQUIVALENT)	Tier 5	X			
NYMALIZE SOL	NIMODIPINE ORAL SOLN 6 MG/ML	Tier 3				
SULAR TAB 17MG ER	NISOLDIPINE TAB ER 24HR 17 MG	Tier 5				
SULAR TAB 34MG ER	NISOLDIPINE TAB ER 24HR 34 MG	Tier 5				
SULAR TAB 8.5MG ER	NISOLDIPINE TAB ER 24HR 8.5 MG	Tier 5				
TAZTIA XT CAP 120MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 120 MG	Tier 3				
TAZTIA XT CAP 180MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 180 MG	Tier 3				
TAZTIA XT CAP 240MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 240 MG	Tier 3				
TAZTIA XT CAP 300MG ER	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 300 MG	Tier 3				
TAZTIA XT CAP 360MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 360 MG	Tier 3				
TIADYLT CAP 120MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 120 MG	Tier 3				
TIADYLT CAP 180MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 180 MG	Tier 3				
TIADYLT CAP 240MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 240 MG	Tier 3				
TIADYLT CAP 300MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 300 MG	Tier 3				
TIADYLT CAP 360MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 360 MG	Tier 3				
TIADYLT CAP 420MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 420 MG	Tier 3				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
TIAZAC CAP 120MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 120 MG	Tier 5				
TIAZAC CAP 180MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 180 MG	Tier 5				
TIAZAC CAP 240MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 240 MG	Tier 5				
TIAZAC CAP 300MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 300 MG	Tier 5				
TIAZAC CAP 360MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 360 MG	Tier 5				
TIAZAC CAP 420MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 420 MG	Tier 5				
VERAPAMIL CAP 100MG ER	VERAPAMIL HCL CAP ER 24HR 100 MG	Tier 4				
VERAPAMIL CAP 120MG ER	VERAPAMIL HCL CAP ER 24HR 120 MG	Tier 2				
VERAPAMIL CAP 120MG SR	VERAPAMIL HCL CAP ER 24HR 120 MG	Tier 2				
VERAPAMIL CAP 180MG ER	VERAPAMIL HCL CAP ER 24HR 180 MG	Tier 2				
VERAPAMIL CAP 180MG SR	VERAPAMIL HCL CAP ER 24HR 180 MG	Tier 2				
VERAPAMIL CAP 200MG ER	VERAPAMIL HCL CAP ER 24HR 200 MG	Tier 4				
VERAPAMIL CAP 240MG ER	VERAPAMIL HCL CAP ER 24HR 240 MG	Tier 2				
VERAPAMIL CAP 240MG SR	VERAPAMIL HCL CAP ER 24HR 240 MG	Tier 2				
VERAPAMIL CAP 300MG ER	VERAPAMIL HCL CAP ER 24HR 300 MG	Tier 4				
VERAPAMIL CAP 360MG SR	VERAPAMIL HCL CAP ER 24HR 360 MG	Tier 2				
VERAPAMIL TAB 120MG	VERAPAMIL HCL TAB 120 MG	Tier 2				
VERAPAMIL TAB 120MG ER	VERAPAMIL HCL TAB ER 120 MG	Tier 2				
VERAPAMIL TAB 180MG ER	VERAPAMIL HCL TAB ER 180 MG	Tier 2				
VERAPAMIL TAB 240MG ER	VERAPAMIL HCL TAB ER 240 MG	Tier 2				
VERAPAMIL TAB 40MG	VERAPAMIL HCL TAB 40 MG	Tier 2				
VERAPAMIL TAB 80MG	VERAPAMIL HCL TAB 80 MG	Tier 2				
VERELAN CAP 120MG SR	VERAPAMIL HCL CAP ER 24HR 120 MG	Tier 5				
VERELAN CAP 180MG SR	VERAPAMIL HCL CAP ER 24HR 180 MG	Tier 5				
VERELAN CAP 240MG SR	VERAPAMIL HCL CAP ER 24HR 240 MG	Tier 5				
VERELAN CAP 360MG SR	VERAPAMIL HCL CAP ER 24HR 360 MG	Tier 5				
VERELAN PM CAP 100MG ER	VERAPAMIL HCL CAP ER 24HR 100 MG	Tier 5				
VERELAN PM CAP 200MG ER	VERAPAMIL HCL CAP ER 24HR 200 MG	Tier 5				
VERELAN PM CAP 300MG ER	VERAPAMIL HCL CAP ER 24HR 300 MG	Tier 5				
Calcium Channel Modifying Agents - Seizure Control Drugs						
CELONTIN CAP 300MG	METHSUXIMIDE CAP 300 MG	Tier 5				
ETHOSUXIMIDE CAP 250MG	ETHOSUXIMIDE CAP 250 MG	Tier 2				
ETHOSUXIMIDE SOL 250/5ML	ETHOSUXIMIDE SOLN 250 MG/5ML	Tier 2				
METHSUXIMIDE CAP 300MG	METHSUXIMIDE CAP 300 MG	Tier 3				
ZARONTIN CAP 250MG	ETHOSUXIMIDE CAP 250 MG	Tier 5				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ZARONTIN SOL 250/5ML	ETHOSUXIMIDE SOLN 250 MG/5ML	Tier 5				
ZONISADE SUS 100MG/5	ZONISAMIDE ORAL SUSP 100 MG/5ML (20 MG/ML)	Tier 5	X			
ZONISAMIDE CAP 100MG	ZONISAMIDE CAP 100 MG	Tier 2				
ZONISAMIDE CAP 25MG	ZONISAMIDE CAP 25 MG	Tier 2				
ZONISAMIDE CAP 50MG	ZONISAMIDE CAP 50 MG	Tier 2				
Cardiovascular Agents, Other						
CAMZYOS CAP 10MG	MAVACAMTEN CAP 10 MG	Tier 5	X	X		X
CAMZYOS CAP 15MG	MAVACAMTEN CAP 15 MG	Tier 5	X	X		X
CAMZYOS CAP 2.5MG	MAVACAMTEN CAP 2.5 MG	Tier 5	X	X		X
CAMZYOS CAP 5MG	MAVACAMTEN CAP 5 MG	Tier 5	X	X		X
LODOCO TAB 0.5MG	COLCHICINE (CARDIOVASCULAR) TAB 0.5 MG	Tier 5		X		
Cardiovascular Agents, Other - Miscellaneous Cardiac Drugs						
ACCURETIC TAB 10-12.5	QUINAPRIL-HYDROCHLOROTHIAZIDE TAB 10-12.5 MG	Tier 5				
ACCURETIC TAB 20-12.5	QUINAPRIL-HYDROCHLOROTHIAZIDE TAB 20-12.5 MG	Tier 5				
AMILOR/HCTZ TAB 5-50	AMILORIDE & HYDROCHLOROTHIAZIDE TAB 5-50 MG	Tier 2				
AMLOD/BENAZP CAP 10-20MG	AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 10-20 MG	Tier 2				
AMLOD/BENAZP CAP 10-40MG	AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 10-40 MG	Tier 2				
AMLOD/BENAZP CAP 2.5-10MG	AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 2.5-10 MG	Tier 2				
AMLOD/BENAZP CAP 5-10MG	AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 5-10 MG	Tier 2				
AMLOD/BENAZP CAP 5-20MG	AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 5-20 MG	Tier 2				
AMLOD/BENAZP CAP 5-40MG	AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 5-40 MG	Tier 2				
AMLOD/VALSAR TAB 10-160MG	AMLODIPINE BESYLATE-VALSARTAN TAB 10-160 MG	Tier 3				
AMLOD/VALSAR TAB 10-320MG	AMLODIPINE BESYLATE-VALSARTAN TAB 10-320 MG	Tier 3				
AMLOD/VALSAR TAB 5-160MG	AMLODIPINE BESYLATE-VALSARTAN TAB 5-160 MG	Tier 3				
AMLOD/VALSAR TAB 5-320MG	AMLODIPINE BESYLATE-VALSARTAN TAB 5-320 MG	Tier 3				
ASPRUZO SPR GRA 1000MG	RANOLAZINE ER GRANULES PACKET 1000 MG	Tier 5	X			
ASPRUZO SPR GRA 500MG	RANOLAZINE ER GRANULES PACKET 500 MG	Tier 5	X			
ATENOL/CHLOR TAB 100-25MG	ATENOLOL & CHLORTHALIDONE TAB 100-25 MG	Tier 2				
ATENOL/CHLOR TAB 50-25MG	ATENOLOL & CHLORTHALIDONE TAB 50-25 MG	Tier 2				
BENAZEP/HCTZ TAB 10-12.5	BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 10-12.5 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
BENAZEPR/HCTZ TAB 20-12.5	BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 20-12.5 MG	Tier 2				
BENAZEPR/HCTZ TAB 20-25MG	BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 20-25 MG	Tier 2				
BENAZEPR/HCTZ TAB 5-6.25MG	BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 5-6.25 MG	Tier 2				
BISOPRIL/HCTZ TAB 10/6.25	BISOPROLOL & HYDROCHLOROTHIAZIDE TAB 10-6.25 MG	Tier 2				
BISOPRIL/HCTZ TAB 2.5/6.25	BISOPROLOL & HYDROCHLOROTHIAZIDE TAB 2.5-6.25 MG	Tier 2				
BISOPRIL/HCTZ TAB 5-6.25MG	BISOPROLOL & HYDROCHLOROTHIAZIDE TAB 5-6.25 MG	Tier 2				
CANDESA/HCTZ TAB 16-12.5	CANDESARTAN CILEXETIL- HYDROCHLOROTHIAZIDE TAB 16-12.5 MG	Tier 4				
CANDESA/HCTZ TAB 32-12.5	CANDESARTAN CILEXETIL- HYDROCHLOROTHIAZIDE TAB 32-12.5 MG	Tier 4				
CANDESA/HCTZ TAB 32-25MG	CANDESARTAN CILEXETIL- HYDROCHLOROTHIAZIDE TAB 32-25 MG	Tier 4				
CAPTOPR/HCTZ TAB 25-15MG	CAPTAPRIL & HYDROCHLOROTHIAZIDE TAB 25-15 MG	Tier 2				
CAPTOPR/HCTZ TAB 25-25MG	CAPTAPRIL & HYDROCHLOROTHIAZIDE TAB 25-25 MG	Tier 2				
CAPTOPR/HCTZ TAB 50-15MG	CAPTAPRIL & HYDROCHLOROTHIAZIDE TAB 50-15 MG	Tier 2				
CAPTOPR/HCTZ TAB 50-25MG	CAPTAPRIL & HYDROCHLOROTHIAZIDE TAB 50-25 MG	Tier 2				
CORLANOR SOL 5MG/5ML	IVABRADINE HCL ORAL SOLN 5 MG/5ML (BASE EQUIV)	Tier 4	X	X		
CORLANOR TAB 5MG	IVABRADINE HCL TAB 5 MG (BASE EQUIV)	Tier 4	X	X		
CORLANOR TAB 7.5MG	IVABRADINE HCL TAB 7.5 MG (BASE EQUIV)	Tier 4	X	X		
DEMSE CAP 250MG	METYROSINE CAP 250 MG	Tier 5	X			
DIGOXIN SOL 50MCG/ML	DIGOXIN ORAL SOLN 0.05 MG/ML	Tier 2				
DIGOXIN TAB 0.0625MG	DIGOXIN TAB 62.5 MCG (0.0625 MG)	Tier 2				
DIGOXIN TAB 0.125MG	DIGOXIN TAB 125 MCG (0.125 MG)	Tier 2				
DIGOXIN TAB 0.25MG	DIGOXIN TAB 250 MCG (0.25 MG)	Tier 2				
ENALAPR/HCTZ TAB 10-25MG	ENALAPRIL MALEATE & HYDROCHLOROTHIAZIDE TAB 10-25 MG	Tier 2				
ENALAPR/HCTZ TAB 5-12.5MG	ENALAPRIL MALEATE & HYDROCHLOROTHIAZIDE TAB 5-12.5 MG	Tier 2				
ENTRESTO CAP 15-16MG	SACUBITRIL-VALSARTAN SPRINKLE CAP 15-16 MG	Tier 5	X	X		
ENTRESTO CAP 6-6MG	SACUBITRIL-VALSARTAN SPRINKLE CAP 6-6 MG	Tier 5	X	X		
FOSINOP/HCTZ TAB 10/12.5	FOSINOPRIL SODIUM & HYDROCHLOROTHIAZIDE TAB 10-12.5 MG	Tier 2				
FOSINOP/HCTZ TAB 20/12.5	FOSINOPRIL SODIUM & HYDROCHLOROTHIAZIDE TAB 20-12.5 MG	Tier 2				
IRBESAR/HCTZ TAB 150-12.5	IRBESARTAN-HYDROCHLOROTHIAZIDE TAB 150-12.5 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
IRBESAR/HCTZ TAB 300-12.5	IRBESARTAN-HYDROCHLOROTHIAZIDE TAB 300-12.5 MG	Tier 2				
ISOSO/HYDRAL TAB 20-37.5	ISOSORBIDE DINITRATE-HYDRALAZINE HCL TAB 20-37.5 MG	Tier 3				
IVABRADINE TAB 5MG	IVABRADINE HCL TAB 5 MG (BASE EQUIV)	Tier 4	X	X		
IVABRADINE TAB 7.5MG	IVABRADINE HCL TAB 7.5 MG (BASE EQUIV)	Tier 4	X	X		
LANOXIN TAB 0.0625MG	DIGOXIN TAB 62.5 MCG (0.0625 MG)	Tier 5				
LANOXIN TAB 0.125MG	DIGOXIN TAB 125 MCG (0.125 MG)	Tier 4				
LANOXIN TAB 0.25MG	DIGOXIN TAB 250 MCG (0.25 MG)	Tier 4				
LISINOP/HCTZ TAB 10-12.5	LISINOPRIL & HYDROCHLOROTHIAZIDE TAB 10-12.5 MG	Tier 2				
LISINOP/HCTZ TAB 20-12.5	LISINOPRIL & HYDROCHLOROTHIAZIDE TAB 20-12.5 MG	Tier 2				
LISINOP/HCTZ TAB 20-25MG	LISINOPRIL & HYDROCHLOROTHIAZIDE TAB 20-25 MG	Tier 2				
LOSARTAN/HCT TAB 100-12.5	LOSARTAN POTASSIUM & HYDROCHLOROTHIAZIDE TAB 100-12.5 MG	Tier 2				
LOSARTAN/HCT TAB 100-25	LOSARTAN POTASSIUM & HYDROCHLOROTHIAZIDE TAB 100-25 MG	Tier 2				
LOSARTAN/HCT TAB 50-12.5	LOSARTAN POTASSIUM & HYDROCHLOROTHIAZIDE TAB 50-12.5 MG	Tier 2				
LOTENSIN HCT TAB 10-12.5	BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 10-12.5 MG	Tier 5				
LOTENSIN HCT TAB 20-12.5	BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 20-12.5 MG	Tier 5				
LOTENSIN HCT TAB 20-25MG	BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 20-25 MG	Tier 5				
MAXZIDE TAB 75-50	TRIAMTERENE & HYDROCHLOROTHIAZIDE TAB 75-50 MG	Tier 5				
MAXZIDE-25 TAB	TRIAMTERENE & HYDROCHLOROTHIAZIDE TAB 37.5-25 MG	Tier 5				
METOPRL/HCTZ TAB 100-25MG	METOPROLOL & HYDROCHLOROTHIAZIDE TAB 100-25 MG	Tier 2				
METOPRL/HCTZ TAB 100-50MG	METOPROLOL & HYDROCHLOROTHIAZIDE TAB 100-50 MG	Tier 2				
METOPRL/HCTZ TAB 50-25MG	METOPROLOL & HYDROCHLOROTHIAZIDE TAB 50-25 MG	Tier 2				
METYROSINE CAP 250MG	METYROSINE CAP 250 MG	Tier 4	X			
OLM MED/HCTZ TAB 20-12.5	OLMESARTAN MEDOXOMIL-HYDROCHLOROTHIAZIDE TAB 20-12.5 MG	Tier 3				
OLM MED/HCTZ TAB 40-12.5	OLMESARTAN MEDOXOMIL-HYDROCHLOROTHIAZIDE TAB 40-12.5 MG	Tier 3				
OLM MED/HCTZ TAB 40-25MG	OLMESARTAN MEDOXOMIL-HYDROCHLOROTHIAZIDE TAB 40-25 MG	Tier 3				
PENTOXIFYLLI TAB 400MG ER	PENTOXIFYLLINE TAB ER 400 MG	Tier 2				
QNAPRIL/HCTZ TAB 10-12.5	QUINAPRIL-HYDROCHLOROTHIAZIDE TAB 10-12.5 MG	Tier 3				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
QNAPRIL/HCTZ TAB 20-12.5	QUINAPRIL-HYDROCHLOROTHIAZIDE TAB 20-12.5 MG	Tier 3				
QNAPRIL/HCTZ TAB 20-25MG	QUINAPRIL-HYDROCHLOROTHIAZIDE TAB 20-25 MG	Tier 3				
RANOLAZINE TAB 1000MG	RANOLAZINE TAB ER 12HR 1000 MG	Tier 3				
RANOLAZINE TAB 500MG ER	RANOLAZINE TAB ER 12HR 500 MG	Tier 3				
SACUB/VALSAR TAB 24-26MG	SACUBITRIL-VALSARTAN TAB 24-26 MG	Tier 4	X	X		
SACUB/VALSAR TAB 49-51MG	SACUBITRIL-VALSARTAN TAB 49-51 MG	Tier 4	X	X		
SACUB/VALSAR TAB 97-103MG	SACUBITRIL-VALSARTAN TAB 97-103 MG	Tier 4	X	X		
SPIRONO/HCTZ TAB 25/25	SPIRONOLACTONE & HYDROCHLOROTHIAZIDE TAB 25-25 MG	Tier 2				
TELMISA/HCTZ TAB 40-12.5	TELMISARTAN-HYDROCHLOROTHIAZIDE TAB 40-12.5 MG	Tier 3				
TELMISA/HCTZ TAB 80-12.5	TELMISARTAN-HYDROCHLOROTHIAZIDE TAB 80-12.5 MG	Tier 3				
TELMISA/HCTZ TAB 80-25MG	TELMISARTAN-HYDROCHLOROTHIAZIDE TAB 80-25 MG	Tier 3				
TRANDO/VERAP TAB 1-240 ER	TRANDOLAPRIL-VERAPAMIL HCL TAB ER 1-240 MG	Tier 4				
TRANDO/VERAP TAB 2-180 ER	TRANDOLAPRIL-VERAPAMIL HCL TAB ER 2-180 MG	Tier 4				
TRANDO/VERAP TAB 2-240 ER	TRANDOLAPRIL-VERAPAMIL HCL TAB ER 2-240 MG	Tier 4				
TRANDO/VERAP TAB 4-240 ER	TRANDOLAPRIL-VERAPAMIL HCL TAB ER 4-240 MG	Tier 4				
TRIAMT/HCTZ CAP 37.5-25	TRIAMTERENE & HYDROCHLOROTHIAZIDE CAP 37.5-25 MG	Tier 2				
TRIAMT/HCTZ TAB 37.5-25	TRIAMTERENE & HYDROCHLOROTHIAZIDE TAB 37.5-25 MG	Tier 2				
TRIAMT/HCTZ TAB 75-50MG	TRIAMTERENE & HYDROCHLOROTHIAZIDE TAB 75-50 MG	Tier 2				
VALSART/HCTZ TAB 160-12.5	VALSARTAN-HYDROCHLOROTHIAZIDE TAB 160-12.5 MG	Tier 2				
VALSART/HCTZ TAB 160-25MG	VALSARTAN-HYDROCHLOROTHIAZIDE TAB 160-25 MG	Tier 2				
VALSART/HCTZ TAB 320-12.5	VALSARTAN-HYDROCHLOROTHIAZIDE TAB 320-12.5 MG	Tier 2				
VALSART/HCTZ TAB 320-25MG	VALSARTAN-HYDROCHLOROTHIAZIDE TAB 320-25 MG	Tier 2				
VALSART/HCTZ TAB 80-12.5	VALSARTAN-HYDROCHLOROTHIAZIDE TAB 80-12.5 MG	Tier 2				
VECAMYL TAB 2.5MG	MECAMYLAMINE HCL TAB 2.5 MG	Tier 5	X			
VYNDAMAX CAP 61MG	TAFAMIDIS CAP 61 MG	Tier 4	X	X		X
VYNDAQEL CAP 20MG	TAFAMIDIS MEGLUMINE (CARDIAC) CAP 20 MG	Tier 4	X	X		X
Central Nervous System, Other						
DAYBUE SOL 200MG/ML	TROFINETIDE ORAL SOLN 200 MG/ML	Tier 4	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
RELYVRIO PAK 3-1GM	SODIUM PHENYL BUTYRATE-TAURURSODIOL POWD PACK 3-1 GM	Tier 5				X
SKYCLARYS CAP 50MG	OMAVELOXOLONE CAP 50 MG	Tier 4	X	X		X
VYLEESI INJ 1.75/0.3	BREMELANOTIDE ACET SUBCUTANEOUS SOLN AUTO-INJ 1.75 MG/0.3ML	Tier 5	X	X		
Central Nervous System, Other - Miscellaneous Central Nervous System Drugs						
ADDYI TAB 100MG	FLIBANSERIN TAB 100 MG	Tier 5	X	X		
AUSTEDO TAB 12MG	DEUTETRABENAZINE TAB 12 MG	Tier 4	X	X		X
AUSTEDO TAB 6MG	DEUTETRABENAZINE TAB 6 MG	Tier 4	X	X		X
AUSTEDO TAB 9MG	DEUTETRABENAZINE TAB 9 MG	Tier 4	X	X		X
AUSTEDO XR TAB 12MG	DEUTETRABENAZINE TAB ER 24HR 12 MG	Tier 4	X	X		X
AUSTEDO XR TAB 18MG	DEUTETRABENAZINE TAB ER 24HR 18 MG	Tier 4	X	X		X
AUSTEDO XR TAB 24MG	DEUTETRABENAZINE TAB ER 24HR 24 MG	Tier 4	X	X		X
AUSTEDO XR TAB 30MG ER	DEUTETRABENAZINE TAB ER 24HR 30 MG	Tier 4	X	X		X
AUSTEDO XR TAB 36MG ER	DEUTETRABENAZINE TAB ER 24HR 36 MG	Tier 4	X	X		X
AUSTEDO XR TAB 42MG ER	DEUTETRABENAZINE TAB ER 24HR 42 MG	Tier 4	X	X		X
AUSTEDO XR TAB 48MG ER	DEUTETRABENAZINE TAB ER 24HR 48 MG	Tier 4	X	X		X
AUSTEDO XR TAB 6MG	DEUTETRABENAZINE TAB ER 24HR 6 MG	Tier 4	X	X		X
AUSTEDO XR TAB TITR KIT	DEUTETRABENAZINE TAB ER TITRATION PACK 12 & 18 & 24 & 30 MG	Tier 4	X			X
AUSTEDO XR TAB TITR KIT	DEUTETRABENAZINE TAB ER TITRATION PACK 6 MG & 12 MG & 24 MG	Tier 4	X	X		X
CAFFEINE CIT SOL 20MG/ML	CAFFEINE CITRATE ORAL SOLN 60 MG/3ML (10 MG/ML BASE EQUIV)	Tier 2				
CAFFEINE CIT SOL 60MG/3ML	CAFFEINE CITRATE ORAL SOLN 60 MG/3ML (10 MG/ML BASE EQUIV)	Tier 2				
EXSERVAN MIS 50MG	RILUZOLE ORAL FILM 50 MG	Tier 5	X			X
INGREZZA CAP 40-80MG	VALBENAZINE TOSYLATE CAP THERAPY PACK 40 MG (7) & 80 MG (21)	Tier 4	X	X		X
INGREZZA CAP 40MG	VALBENAZINE TOSYLATE CAP 40 MG (BASE EQUIV)	Tier 4	X	X		X
INGREZZA CAP 40MG	VALBENAZINE TOSYLATE CAPSULE SPRINKLE 40 MG (BASE EQUIV)	Tier 4	X	X		X
INGREZZA CAP 60MG	VALBENAZINE TOSYLATE CAP 60 MG (BASE EQUIV)	Tier 4	X	X		
INGREZZA CAP 60MG	VALBENAZINE TOSYLATE CAPSULE SPRINKLE 60 MG (BASE EQUIV)	Tier 4	X	X		X
INGREZZA CAP 80MG	VALBENAZINE TOSYLATE CAP 80 MG (BASE EQUIV)	Tier 4	X	X		X
INGREZZA CAP 80MG	VALBENAZINE TOSYLATE CAPSULE SPRINKLE 80 MG (BASE EQUIV)	Tier 4	X	X		X
NUEDEXTA CAP 20-10MG	DEXTROMETHORPHAN HBR-QUINIDINE SULFATE CAP 20-10 MG	Tier 3	X	X		
RADICAVA ORS SUS 105/5ML	EDARAVONE ORAL SUSP 105 MG/5ML	Tier 5	X	X		X
RADICAVA ORS SUS STARTER	EDARAVONE ORAL SUSP 105 MG/5ML	Tier 5	X	X		X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
RILUZOLE TAB 50MG	RILUZOLE TAB 50 MG	Tier 2				X
TEGLUTIK SUS 50/10ML	RILUZOLE SUSP 50 MG/10ML	Tier 5	X			
TETRABENAZIN TAB 12.5MG	TETRABENAZINE TAB 12.5 MG	Tier 4	X			X
TETRABENAZIN TAB 25MG	TETRABENAZINE TAB 25 MG	Tier 4	X			X
TIGLUTIK SUS 50/10ML	RILUZOLE SUSP 50 MG/10ML	Tier 5	X			
Cholinesterase Inhibitors - Alzheimer's Disease and Dementia Drugs						
DONEPEZIL TAB 10MG	DONEPEZIL HYDROCHLORIDE TAB 10 MG	Tier 2				
DONEPEZIL TAB 10MG ODT	DONEPEZIL HYDROCHLORIDE ORALLY DISINTEGRATING TAB 10 MG	Tier 2				
DONEPEZIL TAB 23MG	DONEPEZIL HYDROCHLORIDE TAB 23 MG	Tier 2				
DONEPEZIL TAB 5MG	DONEPEZIL HYDROCHLORIDE TAB 5 MG	Tier 2				
DONEPEZIL TAB 5MG ODT	DONEPEZIL HYDROCHLORIDE ORALLY DISINTEGRATING TAB 5 MG	Tier 2				
DONEPEZIL TAB ODT 10MG	DONEPEZIL HYDROCHLORIDE ORALLY DISINTEGRATING TAB 10 MG	Tier 2				
DONEPEZIL TAB ODT 5MG	DONEPEZIL HYDROCHLORIDE ORALLY DISINTEGRATING TAB 5 MG	Tier 2				
GALANTAMINE CAP 16MG ER	GALANTAMINE HYDROBROMIDE CAP ER 24HR 16 MG	Tier 2				
GALANTAMINE CAP 24MG ER	GALANTAMINE HYDROBROMIDE CAP ER 24HR 24 MG	Tier 2				
GALANTAMINE CAP 8MG ER	GALANTAMINE HYDROBROMIDE CAP ER 24HR 8 MG	Tier 2				
GALANTAMINE SOL 4MG/ML	GALANTAMINE HYDROBROMIDE ORAL SOLN 4 MG/ML	Tier 2				
GALANTAMINE TAB 12MG	GALANTAMINE HYDROBROMIDE TAB 12 MG	Tier 2				
GALANTAMINE TAB 4MG	GALANTAMINE HYDROBROMIDE TAB 4 MG	Tier 2				
GALANTAMINE TAB 8MG	GALANTAMINE HYDROBROMIDE TAB 8 MG	Tier 2				
RIVASTIGMINE CAP 1.5MG	RIVASTIGMINE TARTRATE CAP 1.5 MG (BASE EQUIVALENT)	Tier 2				
RIVASTIGMINE CAP 3MG	RIVASTIGMINE TARTRATE CAP 3 MG (BASE EQUIVALENT)	Tier 2				
RIVASTIGMINE CAP 4.5MG	RIVASTIGMINE TARTRATE CAP 4.5 MG (BASE EQUIVALENT)	Tier 2				
RIVASTIGMINE CAP 6MG	RIVASTIGMINE TARTRATE CAP 6 MG (BASE EQUIVALENT)	Tier 2				
RIVASTIGMINE DIS 13.3/24	RIVASTIGMINE TD PATCH 24HR 13.3 MG/24HR	Tier 4				
RIVASTIGMINE DIS 4.6MG/24	RIVASTIGMINE TD PATCH 24HR 4.6 MG/24HR	Tier 4				
RIVASTIGMINE DIS 9.5MG/24	RIVASTIGMINE TD PATCH 24HR 9.5 MG/24HR	Tier 4				
Cystic Fibrosis Agents - Drugs to treat Cystic Fibrosis						
KALYDECO GRA 13.4MG	IVACAFTOR PACKET 13.4 MG	Tier 4	X	X		
KALYDECO GRA 5.8MG	IVACAFTOR PACKET 5.8 MG	Tier 4	X	X		
KALYDECO PAK 25MG	IVACAFTOR PACKET 25 MG	Tier 4	X	X		X
KALYDECO PAK 50MG	IVACAFTOR PACKET 50 MG	Tier 4	X	X		X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
KALYDECO PAK 75MG	IVACAFOR PACKET 75 MG	Tier 4	X	X		X
ORKAMBI GRA 100-125	LUMACAFOR-IVACAFOR GRANULES PACKET 100-125 MG	Tier 3	X	X		X
ORKAMBI GRA 150-188	LUMACAFOR-IVACAFOR GRANULES PACKET 150-188 MG	Tier 3	X	X		X
ORKAMBI GRA 75-94MG	LUMACAFOR-IVACAFOR GRANULES PACKET 75-94 MG	Tier 3	X	X		
ORKAMBI TAB 100-125	LUMACAFOR-IVACAFOR TAB 100-125 MG	Tier 4	X	X		X
ORKAMBI TAB 200-125	LUMACAFOR-IVACAFOR TAB 200-125 MG	Tier 4	X	X		X
SYMDEKO TAB 100-150	TEZACAFOR-IVACAFOR 100-150 MG & IVACAFOR 150 MG TAB TBPB	Tier 4	X	X		X
SYMDEKO TAB 50-75MG	TEZACAFOR-IVACAFOR 50-75 MG & IVACAFOR 75 MG TAB TBPB	Tier 4	X	X		
TOBRAMYCIN NEB 300/4ML	TOBRAMYCIN NEBU SOLN 300 MG/4ML	Tier 4	X	X		X
TRIKAFOR PAK 59.5MG	ELEXACAF-TEZACAF-IVACAF 80-40-60 MG& IVACAF 59.5MG THPB GRAN	Tier 4	X	X		X
TRIKAFOR PAK 75MG	ELEXACAF-TEZACAF-IVACAF 100-50-75 MG& IVACAF 75MG THPB GRAN	Tier 4	X	X		X
TRIKAFOR TAB	ELEXACAF-TEZACAF-IVACAF 50-25-37.5 MG & IVACAFOR 75 MG TBPB	Tier 4	X	X		X
TRIKAFOR TAB	ELEXACAF-TEZACAF-IVACAF 100-50-75 MG & IVACAFOR 150 MG TBPB	Tier 4	X	X		X
Dental and Oral Agents						
DEBACTEROL SOL 30-50%	SULFURIC ACID-SULFONATED PHENOLICS SOLN 30-50%	Tier 3				
Dental and Oral Agents - Drugs to Treat Mouth and Throat Conditions						
AQUORAL SPR	*ARTIFICIAL SALIVA - SOLUTION***	Tier 4	X			
AQUORAL SPR	*ARTIFICIAL SALIVA - SOLUTION***	Tier 4				
CAPHOSOL SOL	*ARTIFICIAL SALIVA - SOLUTION***	Tier 4				
CEVIMELINE CAP 30MG	CEVIMELINE HCL CAP 30 MG	Tier 2				
CHLORHEX GLU SOL 0.12%	CHLORHEXIDINE GLUCONATE SOLN 0.12%	Tier 2				
CLINPRO 5000 PST 1.1%	SODIUM FLUORIDE PASTE 1.1%	Tier 4				
DENTA 5000 CRE PLUS	SODIUM FLUORIDE CREAM 1.1%	Tier 5				
DENTA 5000 CRE PLUS 2PK	SODIUM FLUORIDE CREAM 1.1%	Tier 5				
DENTA 5000 GEL PLUS SEN	SODIUM FLUORIDE-POTASSIUM NITRATE GEL 1.1-5%	Tier 4				
DENTAGEL GEL 1.1%	SODIUM FLUORIDE GEL 1.1% (0.5% F)	Tier 5				
EASYGEL GEL 0.4%	STANNOUS FLUORIDE GEL 0.4%	Tier 4				
EASYGEL GEL 0.4%CHRY	STANNOUS FLUORIDE GEL 0.4%	Tier 4				
EASYGEL GEL 0.4%CITR	STANNOUS FLUORIDE GEL 0.4%	Tier 4				
EASYGEL GEL 0.4%MINT	STANNOUS FLUORIDE GEL 0.4%	Tier 4				
FLUORID SENS GEL 1.1-5%	SODIUM FLUORIDE-POTASSIUM NITRATE GEL 1.1-5%	Tier 4				
FLUORIDEX CON DLY REN	STANNOUS FLUORIDE CONC 0.63%	Tier 4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
FLUORIDEX PST 1.1%	SODIUM FLUORIDE PASTE 1.1%	Tier 4				
FLUORMX 5000 GEL SENSITIV	SODIUM FLUORIDE-POTASSIUM NITRATE GEL 1.1-5%	Tier 4				
FLUORMX 5000 PST 1.1%	SODIUM FLUORIDE PASTE 1.1%	Tier 4				
FRAICHE 5000 GEL 1.1%	SODIUM FLUORIDE GEL 1.1% (0.5% F)	Tier 5				
JUST RIGHT PST 5000	SODIUM FLUORIDE PASTE 1.1%	Tier 4				
KOURZEQ PST 0.1%	TRIAMCINOLONE ACETONIDE DENTAL PASTE 0.1%	Tier 3				
MUCOSITISRX POW	*ARTIFICIAL SALIVA - PACKET***	Tier 4				
NA FL/K NITR GEL 1.1-5%	SODIUM FLUORIDE-POTASSIUM NITRATE GEL 1.1-5%	Tier 2				
ORALONE DENT PST 0.1%	TRIAMCINOLONE ACETONIDE DENTAL PASTE 0.1%	Tier 3				
PERIDEX SOL 0.12%	CHLORHEXIDINE GLUCONATE SOLN 0.12%	Tier 5				
PERIOGARD SOL 0.12%	CHLORHEXIDINE GLUCONATE SOLN 0.12%	Tier 2				
PILOCARPINE TAB 5MG	PILOCARPINE HCL TAB 5 MG	Tier 2				
PILOCARPINE TAB 75MG	PILOCARPINE HCL TAB 75 MG	Tier 2				
PREVDNT 5000 CRE 1.1% PLS	SODIUM FLUORIDE CREAM 1.1%	Tier 5				
PREVDNT 5000 GEL 1.1-5%	SODIUM FLUORIDE-POTASSIUM NITRATE GEL 1.1-5%	Tier 4				
PREVDNT 5000 GEL 1.1% DRY	SODIUM FLUORIDE GEL 1.1% (0.5% F)	Tier 5				
PREVDNT 5000 PST 1.1%	SODIUM FLUORIDE PASTE 1.1%	Tier 4				
PREVDNT 5000 PST 1.1% KID	SODIUM FLUORIDE PASTE 1.1%	Tier 4				
PREVIDENT GEL 1.1% BER	SODIUM FLUORIDE GEL 1.1% (0.5% F)	Tier 5				
PREVIDENT GEL 1.1% MIN	SODIUM FLUORIDE GEL 1.1% (0.5% F)	Tier 5				
PREVIDENT SOL 0.2%	SODIUM FLUORIDE RINSE 0.2%	Tier 4				
SALAGEN TAB 5MG	PILOCARPINE HCL TAB 5 MG	Tier 5				
SALAGEN TAB 75MG	PILOCARPINE HCL TAB 75 MG	Tier 5				
SF GEL 1.1%	SODIUM FLUORIDE GEL 1.1% (0.5% F)	Tier 2				
SF 5000 PLUS CRE 1.1%	SODIUM FLUORIDE CREAM 1.1%	Tier 2				
SOD FLUORIDE GEL 1.1-5%	SODIUM FLUORIDE-POTASSIUM NITRATE GEL 1.1-5%	Tier 2				
SOD FLUORIDE GEL 1.1%	SODIUM FLUORIDE GEL 1.1% (0.5% F)	Tier 2				
SOD FLUORIDE PST 1.1%	SODIUM FLUORIDE PASTE 1.1%	Tier 2				
SOD FLUORIDE SOL 0.2%MINT	SODIUM FLUORIDE RINSE 0.2%	Tier 2				
SODIUM FLUOR CRE 1.1%	SODIUM FLUORIDE CREAM 1.1%	Tier 2				
SODIUM FLUOR CRE 5000 PLS	SODIUM FLUORIDE CREAM 1.1%	Tier 2				
SODIUM FLUOR CRE 5000 PPM	SODIUM FLUORIDE CREAM 1.1%	Tier 2				
SODIUM FLUOR GEL 1.1%	SODIUM FLUORIDE GEL 1.1% (0.5% F)	Tier 2				
TRIAMCINOLON PST 0.1%	TRIAMCINOLONE ACETONIDE DENTAL PASTE 0.1%	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
TRIAMCINOLON PST DEN 0.1%	TRIAMCINOLONE ACETONIDE DENTAL PASTE 0.1%	Tier 2				
Dermatitis and Pruitus Agents						
HYFTOR GEL 0.2%	SIROLIMUS GEL 0.2%	Tier 5	X	X		
Dermatological Agents - Drugs to Treat Skin Conditions						
ACUTANE CAP 10MG	ISOTRETINOIN CAP 10 MG	Tier 3				
ACUTANE CAP 20MG	ISOTRETINOIN CAP 20 MG	Tier 3				
ACUTANE CAP 30MG	ISOTRETINOIN CAP 30 MG	Tier 3				
ACUTANE CAP 40MG	ISOTRETINOIN CAP 40 MG	Tier 3				
ACITRETIN CAP 10MG	ACITRETIN CAP 10 MG	Tier 2				
ACITRETIN CAP 175MG	ACITRETIN CAP 17.5 MG	Tier 2				
ACITRETIN CAP 25MG	ACITRETIN CAP 25 MG	Tier 2				
ADAPAL/BEN P GEL 0.1-2.5%	ADAPALENE-BENZOYL PEROXIDE GEL 0.1-2.5%	Tier 4		X		
ADBRY INJ 150MG/ML	TRALOKINUMAB-LDRM SUBCUTANEOUS SOLN PREFILLED SYR 150 MG/ML	Tier 4	X	X		X
ADBRY INJ 300/2ML	TRALOKINUMAB-LDRM SUBCUTANEOUS SOLN AUTO-INJECTOR 300 MG/2ML	Tier 3	X	X		X
AKLIEF CRE 0.005%	TRIFAROTENE CREAM 0.005%	Tier 5	X	X		
AMELUZ GEL 10%	AMINOLEVULINIC ACID HCL GEL 10%	Tier 4				
AMNESTEEM CAP 10MG	ISOTRETINOIN CAP 10 MG	Tier 3				
AMNESTEEM CAP 20MG	ISOTRETINOIN CAP 20 MG	Tier 3				
AMNESTEEM CAP 30MG	ISOTRETINOIN CAP 30 MG	Tier 3				
AMNESTEEM CAP 40MG	ISOTRETINOIN CAP 40 MG	Tier 3				
ANALPRAM HC CRE 2.5-1%	HYDROCORTISONE ACETATE W/ PRAMOXINE PERIANAL CREAM 2.5-1%	Tier 5				
ANALPRM SNGL CRE HC 2.5-1	HYDROCORTISONE ACETATE W/ PRAMOXINE PERIANAL CREAM 2.5-1%	Tier 5				
ANTISEPTIC SOL 4%	CHLORHEXIDINE GLUCONATE SOLN 4%	Tier 2				
ARTISS KIT 10ML	*FIBRIN SEALANT COMPONENT KIT 10 ML***	Tier 4				
ARTISS KIT 2ML	*FIBRIN SEALANT COMPONENT KIT 2 ML***	Tier 4				
ARTISS KIT 4ML	*FIBRIN SEALANT COMPONENT KIT 4 ML***	Tier 4				
ARTISS SOL 10ML	*FIBRIN SEALANT COMPONENT SOLUTION***	Tier 4				
ARTISS SOL 2ML	*FIBRIN SEALANT COMPONENT SOLUTION***	Tier 4				
ARTISS SOL 4ML	*FIBRIN SEALANT COMPONENT SOLUTION***	Tier 4				
AVAR CLEANSE LIQ 10-5%	SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 10-5%	Tier 5				
AZELAIC ACID GEL 15%	AZELAIC ACID GEL 15%	Tier 4				
BENZON TIN NF	BENZON TINCTURE	Tier 2				
BORIC ACID GRA	BORIC ACID GRANULES	Tier 2				
BRIMONIDINE GEL 0.33%	BRIMONIDINE TARTRATE GEL 0.33% (BASE EQUIVALENT)	Tier 4	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
CALCIPOTRIEN CRE 0.005%	CALCIPOTRIENE CREAM 0.005%	Tier 3		X		
CALCIPOTRIEN OIN 0.005%	CALCIPOTRIENE OINT 0.005%	Tier 3				
CALCIPOTRIEN SOL 0.005%	CALCIPOTRIENE SOLN 0.005% (50 MCG/ML)	Tier 2		X		
CALCITRENE OIN 0.005%	CALCIPOTRIENE OINT 0.005%	Tier 4				
CALCITRIOL OIN 3MCG/GM	CALCITRIOL OINT 3 MCG/GM	Tier 2		X		
CLARAVIS CAP 10MG	ISOTRETINOIN CAP 10 MG	Tier 3				
CLARAVIS CAP 20MG	ISOTRETINOIN CAP 20 MG	Tier 3				
CLARAVIS CAP 30MG	ISOTRETINOIN CAP 30 MG	Tier 3				
CLARAVIS CAP 40MG	ISOTRETINOIN CAP 40 MG	Tier 3				
CLINDACIN AER 1%	CLINDAMYCIN PHOSPHATE FOAM 1%	Tier 4				
CLINDACIN MIS ETZ 1%	CLINDAMYCIN PHOSPHATE SWAB 1%	Tier 2				
CLINDACIN-P PAD 1%	CLINDAMYCIN PHOSPHATE SWAB 1%	Tier 2				
CLINDAMY/BEN GEL 1.2-5%	CLINDAMYCIN PHOSPH-BENZOYL PEROXIDE (REFRIG) GEL 1.2 (1)-5%	Tier 4		X		
CLINDAMYCIN AER 1%	CLINDAMYCIN PHOSPHATE FOAM 1%	Tier 4				
CLINDAMYCIN GEL 1%	CLINDAMYCIN PHOSPHATE GEL 1% (TWICE-DAILY)	Tier 3		X		
CLINDAMYCIN GEL 1%	CLINDAMYCIN PHOSPHATE GEL 1% (ONCE-DAILY)	Tier 3		X		
CLINDAMYCIN LOT 1%	CLINDAMYCIN PHOSPHATE LOTION 1%	Tier 4				
CLINDAMYCIN MIS 1%	CLINDAMYCIN PHOSPHATE SWAB 1%	Tier 2				
CLINDAMYCIN SOL 1%	CLINDAMYCIN PHOSPHATE SOLN 1%	Tier 2				
CLOTRIM/BETA CRE 1-0.05%	CLOTRIMAZOLE W/ BETAMETHASONE CREAM 1-0.05%	Tier 2				
CLOTRIM/BETA CRE DIPROP	CLOTRIMAZOLE W/ BETAMETHASONE CREAM 1-0.05%	Tier 2				
CLOTRIM/BETA LOT DIPROP	CLOTRIMAZOLE W/ BETAMETHASONE LOTION 1-0.05%	Tier 2				
COAL TAR SOL 20%	COAL TAR SOLN 20%	Tier 2				
CONDYLOX GEL 0.5%	PODOFILOX GEL 0.5%	Tier 5				
CORTANE-B LOT	HYDROCORTISONE-PRAMOXINE-CHLOROXYLENOL LOT 10-10-1MG/ML	Tier 5				
COSENTYX INJ 150MG/ML	SECUKINUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 150 MG/ML	Tier 4	X	X		X
COSENTYX INJ 300DOSE	SECUKINUMAB SUBCUTANEOUS PREF SYR 150 MG/ML (300 MG DOSE)	Tier 4	X	X		X
COSENTYX INJ 75MG/0.5	SECUKINUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 75 MG/0.5ML	Tier 4	X	X		X
COSENTYX PEN INJ 150MG/ML	SECUKINUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 150 MG/ML	Tier 4	X	X		X
COSENTYX PEN INJ 300DOSE	SECUKINUMAB SUBCUTANEOUS AUTO-INJ 150 MG/ML (300 MG DOSE)	Tier 4	X	X		X
COSENTYX UNO INJ 300/2ML	SECUKINUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 300 MG/2ML	Tier 4	X	X		X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
DICLOFENAC GEL 3%	DICLOFENAC SODIUM (ACTINIC KERATOSES) GEL 3%	Tier 3	X	X		
DRYSOL SOL 20%	ALUMINUM CHLORIDE SOLN 20%	Tier 5				
DUPIXENT INJ 200/1.14	DUPILUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 200 MG/1.14ML	Tier 4	X	X		X
DUPIXENT INJ 200MG	DUPILUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 200 MG/1.14ML	Tier 4	X	X		X
DUPIXENT INJ 300/2ML	DUPILUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 300 MG/2ML	Tier 4	X	X		X
DUPIXENT INJ 300/2ML	DUPILUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 300 MG/2ML	Tier 4	X	X		X
EBGLYSS INJ 250/2ML	LEBRIKIZUMAB-LBKZ SUBCUTANEOUS SOLN AUTO-INJECT 250 MG/2ML	Tier 4	X	X		X
EBGLYSS INJ 250/2ML	LEBRIKIZUMAB-LBKZ SOLUTION PREFILLED SYRINGE 250 MG/2ML	Tier 4	X	X		X
EFUDEX CRE 5%	FLUOROURACIL CREAM 5%	Tier 5				
ENSTILAR AER	CALCIPOTRIENE-BETAMETHASONE DIPROPIONATE FOAM 0.005-0.064%	Tier 5		X		
EPIFOAM AER 1%	PRAMOXINE-HC AEROSOL FOAM 1-1%	Tier 3				
ERY PAD 2%	ERYTHROMYCIN PADS 2%	Tier 2				
ERY/BENZOYL GEL 3-5%	BENZOYL PEROXIDE-ERYTHROMYCIN GEL 5-3%	Tier 2		X		
ERYGEL GEL 2%	ERYTHROMYCIN GEL 2%	Tier 4				
ERYTHROMYCIN GEL 2%	ERYTHROMYCIN GEL 2%	Tier 2				
ERYTHROMYCIN SOL 2%	ERYTHROMYCIN SOLN 2%	Tier 2				
EUCRISA OIN 2%	CRISABOROLE OINT 2%	Tier 4		X	X	
FINACEA AER 15%	AZELAIC ACID FOAM 15%	Tier 5				
FLUOROURACIL CRE 5%	FLUOROURACIL CREAM 5%	Tier 2				
FLUOROURACIL SOL 2%	FLUOROURACIL SOLN 2%	Tier 2				
FLUOROURACIL SOL 5%	FLUOROURACIL SOLN 5%	Tier 2				
HALUCORT GEL	*DERMATOLOGICAL PRODUCTS MISC - GEL**	Tier 4	X			
HC PRAMOXINE CRE 2.5-1%	HYDROCORTISONE ACETATE W/ PRAMOXINE PERIANAL CREAM 2.5-1%	Tier 2				
IMIQUIMOD CRE 5%	IMIQUIMOD CREAM 5%	Tier 2				
ISOTRETINOIN CAP 10MG	ISOTRETINOIN CAP 10 MG	Tier 3				
ISOTRETINOIN CAP 20MG	ISOTRETINOIN CAP 20 MG	Tier 3				
ISOTRETINOIN CAP 30MG	ISOTRETINOIN CAP 30 MG	Tier 3				
ISOTRETINOIN CAP 40MG	ISOTRETINOIN CAP 40 MG	Tier 3				
KLARON LOT 10%	SULFACETAMIDE SODIUM LOTION 10% (ACNE)	Tier 5				
LITFULO CAP 50MG	RITLECITINIB TOSYLATE CAP 50 MG (BASE EQUIV)	Tier 5	X	X		X
METHOXSALEN CAP 10MG	METHOXSALEN RAPID CAP 10 MG	Tier 2				
METHYL SALIC LIQ	*METHYL SALICYLATE LIQUID**	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
MIRVASO GEL 0.33%	BRIMONIDINE TARTRATE GEL 0.33% (BASE EQUIVALENT)	Tier 4	X	X		
NEMLUVIO INJ 30MG	NEMOLIZUMAB-ILTO FOR SUBCUTANEOUS AUTO-INJECTOR 30 MG	Tier 4	X	X		X
NEUAC GEL 1.2-5%	CLINDAMYCIN PHOSPH-BENZOYL PEROXIDE (REFRIG) GEL 1.2 (1)-5%	Tier 4		X		
OVACE PLUS CRE 10%	SULFACETAMIDE SODIUM CREAM 10%	Tier 4				
OVACE PLUS GEL 10% WASH	SULFACETAMIDE SODIUM CLEANSING GEL 10%	Tier 4				
OVACE PLUS LIQ 10% WASH	SULFACETAMIDE SODIUM LIQUID 10%	Tier 5				
OVACE PLUS SHA 10%	SULFACETAMIDE SODIUM SHAMPOO 10%	Tier 4				
OVACE WASH LIQ 10%	SULFACETAMIDE SODIUM LIQUID 10%	Tier 5				
PIMECROLIMUS CRE 1%	PIMECROLIMUS CREAM 1%	Tier 4		X		
PODOCON-25 SOL	PODOPHYLLUM RESIN SOLN 25%	Tier 4				
PODOFILOX GEL 0.5%	PODOFILOX GEL 0.5%	Tier 4				
PODOFILOX SOL 0.5%	PODOFILOX SOLN 0.5%	Tier 2				
PRAMOSONE CRE 1-1%	PRAMOXINE-HC CREAM 1-1%	Tier 3				
PRAMOSONE LOT 1-1%	PRAMOXINE-HC LOTION 1-1%	Tier 3				
PRAMOSONE LOT 1%	PRAMOXINE-HC LOTION 1-1%	Tier 3				
PRAMOSONE LOT 2.5%	PRAMOXINE-HC LOTION 1-2.5%	Tier 3				
PYROGALL ACD OIN	PYROGALLOL-CHLOROBUTANOL OINT 25-2%	Tier 3				
REGRANEX GEL 0.01%	BECAPLERMIN GEL 0.01%	Tier 3	X	X		
SANTYL OIN 250/GM	COLLAGENASE OINT 250 UNIT/GM	Tier 5		X		
SELENIUM SUL LOT 2.5%	SELENIUM SULFIDE LOTION 2.5%	Tier 2				
SOD SUL/SULF CRE 10-2%	SULFACETAMIDE SODIUM W/ SULFUR CREAM 10-2%	Tier 2				
SOD SUL/SULF CRE 10-5%	SULFACETAMIDE SODIUM W/ SULFUR CREAM 10-5%	Tier 2				
SOD SUL/SULF EMU 10-5%	SULFACETAMIDE SODIUM-SULFUR IN UREA EMULSION 10-5%	Tier 2				
SOD SUL/SULF LIQ 10-5%	SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 10-5%	Tier 2				
SOD SUL/SULF LIQ 9-4%	SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 9-4%	Tier 2				
SOD SUL/SULF LIQ WASH	SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 9-4%	Tier 2				
SOD SUL/SULF LOT 10-5%	SULFACETAMIDE SODIUM W/ SULFUR LOTION 10-5%	Tier 2				
SOD SUL/SULF SUS 10-5%	SULFACETAMIDE SODIUM W/ SULFUR SUSP 10-5%	Tier 2				
SOD SULFACET GEL 10%	SULFACETAMIDE SODIUM CLEANSING GEL 10%	Tier 2				
SOD SULFACET SHA 10%	SULFACETAMIDE SODIUM SHAMPOO 10%	Tier 2				
SODIUM SULFA LIQ 10% WASH	SULFACETAMIDE SODIUM LIQUID 10%	Tier 2				
SOOLANTRA CRE 1%	IVERMECTIN CREAM 1%	Tier 5		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
SOTYKTU TAB 6MG	DEUCRAVACITINIB TAB 6 MG	Tier 4	X	X		X
SPEVIGO INJ 150/1ML	SPESOLIMAB-SBZO SUBCUTANEOUS SOLN PREF SYR 150 MG/ML	Tier 5	X	X		X
SPEVIGO INJ 300/2ML	SPESOLIMAB-SBZO SUBCUTANEOUS SOLN PREF SYR 300 MG/2ML	Tier 5	X	X		X
SSS CRE 10%-5%	SULFACETAMIDE SODIUM W/ SULFUR CREAM 10-5%	Tier 2				
SSS 10-5 AER 10-5%	SULFACETAMIDE SODIUM W/ SULFUR FOAM 10-5%	Tier 5				
STEQEYMA INJ 45/0.5ML	USTEKINUMAB-STBA SOLN PREFILLED SYRINGE 45 MG/0.5ML	Tier 4	X	X		X
STEQEYMA INJ 90MG/ML	USTEKINUMAB-STBA SOLN PREFILLED SYRINGE 90 MG/ML	Tier 4	X	X		X
SULFAC SULFR PAD 9.8-4.8%	SULFACETAMIDE SODIUM W/ SULFUR CLEANSING CLOTH 9.8-4.8%	Tier 5				
SULFACETAMID LOT 10%	SULFACETAMIDE SODIUM LOTION 10% (ACNE)	Tier 2				
SULFACLEANSE SUS 8-4%	SULFACETAMIDE SODIUM W/ SULFUR SUSP 8-4%	Tier 5				
TACROLIMUS OIN 0.03%	TACROLIMUS OINT 0.03%	Tier 3		X		
TACROLIMUS OIN 0.1%	TACROLIMUS OINT 0.1%	Tier 3		X		
TAZAROTENE CRE 0.05%	TAZAROTENE CREAM 0.05%	Tier 4	X	X		
TAZAROTENE CRE 0.1%	TAZAROTENE CREAM 0.1%	Tier 4	X	X		
TAZAROTENE GEL 0.05%	TAZAROTENE GEL 0.05%	Tier 4	X	X		
TAZAROTENE GEL 0.1%	TAZAROTENE GEL 0.1%	Tier 4	X	X		
TISSEEL KIT 10ML	*FIBRIN SEALANT COMPONENT KIT 10 ML***	Tier 4				
TISSEEL KIT 2ML	*FIBRIN SEALANT COMPONENT KIT 2 ML***	Tier 4				
TISSEEL KIT 4ML	*FIBRIN SEALANT COMPONENT KIT 4 ML***	Tier 4				
TREMFYA INJ 100MG/ML	GUSELKUMAB SOLN PREFILLED SYRINGE 100 MG/ML	Tier 4	X	X		X
TREMFYA INJ 100MG/ML	GUSELKUMAB SOLN AUTO-INJECTOR 100 MG/ML	Tier 4	X	X		X
TREMFYA INJ 100MG/ML	GUSELKUMAB SOLN PEN-INJECTOR 100 MG/ML	Tier 4	X	X		X
TREMFYA INJ 200/2ML	GUSELKUMAB SOLN AUTO-INJECTOR 200 MG/2ML	Tier 4	X	X		
TREMFYA INJ 200/2ML	GUSELKUMAB SOLN PREFILLED SYRINGE 200 MG/2ML	Tier 4	X	X		
TRETINOIN CRE 0.025%	TRETINOIN CREAM 0.025%	Tier 4		X		
TRETINOIN CRE 0.05%	TRETINOIN CREAM 0.05%	Tier 4		X		
TRETINOIN CRE 0.1%	TRETINOIN CREAM 0.1%	Tier 4		X		
VIT C BRIGHT DRO 10%	*EMOLLIENT - LIQUID**	Tier 4				
VIT C BRIGHT DRO 15%	*EMOLLIENT - LIQUID**	Tier 4				
VTAMA CRE 1%	TAPINAROF CREAM 1%	Tier 5	X	X		
WEZLANA INJ 45/0.5ML	USTEKINUMAB-AUUB INJ 45 MG/0.5ML	Tier 4	X	X		X
WEZLANA INJ 45/0.5ML	USTEKINUMAB-AUUB SOLN PREFILLED SYRINGE 45 MG/0.5ML	Tier 4	X	X		X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
WEZLANA INJ 90MG/ML	USTEKINUMAB-AUUB SOLN PREFILLED SYRINGE 90 MG/ML	Tier 4	X	X		X
YESINTEK INJ 45/0.5ML	USTEKINUMAB-KFCE SOLN PREFILLED SYRINGE 45 MG/0.5ML	Tier 4	X	X		X
YESINTEK INJ 45/0.5ML	USTEKINUMAB-KFCE SUBCUTANEOUS SOLN 45 MG/0.5ML	Tier 4	X	X		X
YESINTEK INJ 90MG/ML	USTEKINUMAB-KFCE SOLN PREFILLED SYRINGE 90 MG/ML	Tier 4	X	X		X
ZACLIR LOT 8%	BENZOYL PEROXIDE LOTION 8%	Tier 4				
ZENATANE CAP 10MG	ISOTRETINOIN CAP 10 MG	Tier 3				
ZENATANE CAP 20MG	ISOTRETINOIN CAP 20 MG	Tier 3				
ZENATANE CAP 30MG	ISOTRETINOIN CAP 30 MG	Tier 3				
ZENATANE CAP 40MG	ISOTRETINOIN CAP 40 MG	Tier 3				
ZORYVE CRE 0.15%	ROFLUMILAST CREAM 0.15%	Tier 5	X	X		
ZORYVE CRE 0.3%	ROFLUMILAST CREAM 0.3%	Tier 5	X	X		
Dermatological Agents - Skin Agents						
B & C OIN	*BALSAM PERU-CASTOR OIL OINT***	Tier 4				
BALSAM PERU/ OIN CASTOR	*BALSAM PERU-CASTOR OIL OINT***	Tier 2				
CIBINQO TAB 100MG	ABROCITINIB TAB 100 MG	Tier 4	X	X		X
CIBINQO TAB 200MG	ABROCITINIB TAB 200 MG	Tier 4	X	X		X
CIBINQO TAB 50MG	ABROCITINIB TAB 50 MG	Tier 4	X	X		X
CVS GLYCERIN LIQ PURE	GLYCERIN TOPICAL LIQUID	Tier 2				
FILSUEZ GEL 10%	BIRCH TRITERPENES GEL 10%	Tier 5	X	X		X
GORDOFILM SOL	SALICYLIC & LACTIC ACIDS SOLN 16.7-16.7%	Tier 3				
HYDRO 40 AER FOAM	UREA FOAM 40%	Tier 4				
INOVA KIT 4%	*BENZOYL PEROXIDE PAD 4% & VITAMIN E TOPICAL 5% KIT***	Tier 5				
INOVA KIT 8%	*BENZOYL PEROXIDE PAD 8% & VITAMIN E TOPICAL 5% KIT***	Tier 5				
INOVA 4/1 KIT ACNE CON	*BENZOYL PEROX PAD 4% & SALICYLIC AC PAD 1% & VIT E 5% KIT*	Tier 4				
INOVA 8/2 KIT ACNE CON	*BENZOYL PEROX PAD 8% & SALICYLIC AC PAD 2% & VIT E 5% KIT*	Tier 4				
KLISYRI OIN 1% (250)	TIRBANIBULIN OINTMENT 1%	Tier 5		X	X	
KLISYRI OIN 1% (350)	TIRBANIBULIN OINTMENT 1%	Tier 5		X	X	
PRONAL GEL 40-10%	UREA-LACTIC ACID GEL 40-10%	Tier 4				
SALVAX DUO KIT PLUS	SALICYLIC ACID FOAM 6% & UREA IN LACTIC ACID FOAM 35% KIT	Tier 4				
SCALACORT DK KIT	*HC LOT 2% & SAL ACID-SULFUR SHAMPOO 2-2% & SHAMPOO KIT***	Tier 4				
URAMAXIN GEL 45%	UREA GEL 45%	Tier 5				
UREA CRE 20%	UREA CREAM 20%	Tier 2				
UREA CRE 40%	UREA CREAM 40%	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
UREA CRE 45%	UREA CREAM 45%	Tier 2				
UREA LOT 40%	UREA LOTION 40%	Tier 2				
UREA NAIL GEL 45%	UREA GEL 45%	Tier 2				
UREMEZ-40 CRE 40%	UREA CREAM 40%	Tier 4				
VENELEX OIN	*BALSAM PERU-CASTOR OIL OINT***	Tier 4				
XIRUN GEL 40-10%	UREA-LACTIC ACID GEL 40-10%	Tier 4				
ZACARE KIT KIT 4%	BENZOYL PEROXIDE LOTION 4% & HYALURONATE SODIUM GEL 0.2% KIT	Tier 4				
ZACARE KIT KIT 8%	BENZOYL PEROXIDE LOTION 8% & HYALURONATE SODIUM GEL 0.2% KIT	Tier 4				
ZORYVE MIS 0.3%	ROFLUMILAST FOAM 0.3%	Tier 5	X	X		
Diabetes - Glucose Monitoring						
ACCU-CHEK KIT FASTCLIX	*LANCETS KIT***	Tier 2				
ACCU-CHEK KIT GUIDE	*BLOOD GLUCOSE MONITORING KIT W/ DEVICE***	Tier 3				
ACCU-CHEK KIT GUIDE ME	*BLOOD GLUCOSE MONITORING KIT W/ DEVICE***	Tier 3				
ACCU-CHEK KIT SOFTCLIX	*LANCETS KIT***	Tier 2				
ACCU-CHEK LIQ GUIDE	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 4				
ACCU-CHEK LIQ SMART	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 2				
ACCU-CHEK SOL	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 2				
ACCU-CHEK TES GUIDE	GLUCOSE BLOOD TEST STRIP	Tier 3		X		
ACCUTREND SOL GLUCOSE	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 2				
ADVCATE SAFE MIS LANC 21G	*LANCETS***	Tier 4				
ADVCATE SAFE MIS LANC 23G	*LANCETS***	Tier 4				
ADVCATE SAFE MIS LANC 28G	*LANCETS***	Tier 4				
AIMSCO TWIST MIS 32G	*LANCETS***	Tier 4				
AIMSCO TWIST MIS 33G	*LANCETS***	Tier 4				
AQINJECT PEN MIS 32GX5/32	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
AQUALANCE MIS 30G	*LANCETS***	Tier 4				
ASSURE CMFRT MIS 28G	*LANCETS***	Tier 4				
AUM MINI PEN MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
AUM MINI PEN MIS 32GX5MM	INSULIN PEN NEEDLE 32 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
AUM MINI PEN MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
AUM READYGRD MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
BD PEN NEEDL MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
BD PEN NEEDL MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 3		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
CAREFINE MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
CAREFINE MIS 32GX5MM	INSULIN PEN NEEDLE 32 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
CAREFINE MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
CARESENS SOL CONTROL	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 3				
CARESENS 30G MIS LANCETS	*LANCETS***	Tier 4				
CARESENS S LIQ CON A/B	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 4				
CARETOUCH MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
CARETOUCH MIS 32GX5MM	INSULIN PEN NEEDLE 32 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
CARETOUCH MIS LANC 26G	*LANCETS***	Tier 4				
CARETOUCH MIS LANC 28G	*LANCETS***	Tier 4				
CARETOUCH MIS LANC 30G	*LANCETS***	Tier 4				
CARETOUCH MIS TWIST 28	*LANCETS***	Tier 4				
CARETOUCH MIS TWIST 30	*LANCETS***	Tier 4				
CARETOUCH MIS TWIST 33	*LANCETS***	Tier 4				
CHEMSTRIP TES UGK	*URINE GLUCOSE-KETONES TEST STRIPS***	Tier 4				
CHEMSTRIP K TES	ACETONE (URINE) TEST STRIP	Tier 3				
CHOSEN MIS 30G	*LANCETS***	Tier 4				
CHOSEN MIS SAFE 28G	*LANCETS***	Tier 4				
COAGUCHEK MIS LANCETS	*LANCETS***	Tier 4				
COMFORT EZ MIS 28G	*LANCETS***	Tier 4				
COMFORT EZ MIS 30GX8MM	INSULIN PEN NEEDLE 30 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
COMFORT TCH MIS LANC 28G	*LANCETS***	Tier 4				
COMFORT TCH MIS LANC 30G	*LANCETS***	Tier 4				
COMFORT TCH MIS LANC 31G	*LANCETS***	Tier 4				
COMFORT TOUC MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
COMFORT TOUC MIS 32GX5MM	INSULIN PEN NEEDLE 32 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
COMFORT TOUC MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
CONTOUR KIT NEXT	*BLOOD GLUCOSE MONITORING KIT W/ DEVICE***	Tier 2				
CONTOUR KIT NEXT EZ	*BLOOD GLUCOSE MONITORING KIT W/ DEVICE***	Tier 2				
CONTOUR TES NEXT	GLUCOSE BLOOD TEST STRIP	Tier 2		X		
CONTOUR NEXT KIT GEN	*BLOOD GLUCOSE MONITORING KIT W/ DEVICE***	Tier 2				
CONTOUR NEXT KIT ONE	*BLOOD GLUCOSE MONITORING KIT***	Tier 2				
CONTOUR NEXT KIT ONE	*BLOOD GLUCOSE MONITORING KIT W/ DEVICE***	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
CONTOUR PLUS KIT BLUE	*BLOOD GLUCOSE MONITORING KIT W/ DEVICE***	Tier 2				
CONTOUR PLUS LIQ LEVEL 1	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 3				
CONTOUR PLUS LIQ LEVEL 2	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 3				
CONTOUR PLUS TES BLD GLUC	GLUCOSE BLOOD TEST STRIP	Tier 2		X		
CONTROL SOL LIQ HI/MID/L	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 4				
CONTROL SOL LIQ LEVEL 2	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 4				
CVS KETONE TES CARE	*URINE GLUCOSE-KETONES TEST STRIPS***	Tier 3				
CVS LANCETS MIS ORIGINAL	*LANCETS***	Tier 4				
CVS LANCETS MIS THIN 26G	*LANCETS***	Tier 4				
CVS LANCETS MIS THIN 33G	*LANCETS***	Tier 4				
DEXCOM G6 MIS RECEIVER	*CONTINUOUS GLUCOSE SYSTEM RECEIVER***	Tier 4	X	X		
DEXCOM G6 MIS SENSOR	*CONTINUOUS GLUCOSE SYSTEM SENSOR***	Tier 4	X	X		
DEXCOM G7 MIS 15 DAY	*CONTINUOUS GLUCOSE SYSTEM SENSOR***	Tier 4	X			
DEXCOM G7 MIS RECEIVER	*CONTINUOUS GLUCOSE SYSTEM RECEIVER***	Tier 4	X	X		
DEXCOM G7 MIS SENSOR	*CONTINUOUS GLUCOSE SYSTEM SENSOR***	Tier 4	X	X		
DIASTIX TES REAGENT	GLUCOSE URINE TEST-(GLUCOSE OXIDASE) STRIP	Tier 4				
DIASTIX TES STRIPS	GLUCOSE URINE TEST-(GLUCOSE OXIDASE) STRIP	Tier 4				
DROPSAFE MIS LANC 23G	*LANCETS***	Tier 4				
EASY COMFORT MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
EASY TOUCH LIQ HEALTHPR	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 4				
EASYMAX LIQ NORM/HIG	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 4				
EASYMAX 15 LIQ LEVEL2-3	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 4				
EASYMAX 15 SOL LEVEL 2	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 4				
EMBECTA NANO MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
EMBECTA UF MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
ENLITE GLUCO MIS SENSOR	*CONTINUOUS GLUCOSE SYSTEM SENSOR***	Tier 4	X			
FASTCLIX MIS LANCETS	*LANCETS***	Tier 2				
FINGERSTIX MIS LANCETS	*LANCETS***	Tier 4				
FORA TEST GO TES ADV VOIC	KETONE BLOOD TEST STRIP	Tier 4				
FREE LIBRE2 KIT PLUS/SEN	*CONTINUOUS GLUCOSE SYSTEM SENSOR***	Tier 4	X			
FREE LIBRE3 KIT PLUS/SEN	*CONTINUOUS GLUCOSE SYSTEM SENSOR***	Tier 4	X			
FREESTY LIBR KIT 2 SENSOR	*CONTINUOUS GLUCOSE SYSTEM SENSOR***	Tier 4	X	X		
FREESTY LIBR KIT 3 SENSOR	*CONTINUOUS GLUCOSE SYSTEM SENSOR***	Tier 4	X	X		
FREESTY LIBR KIT SENSOR	*CONTINUOUS GLUCOSE SYSTEM SENSOR***	Tier 4	X	X		
FREESTY LIBR MIS 2 READER	*CONTINUOUS GLUCOSE SYSTEM RECEIVER***	Tier 4	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
FREESTY LIBR MIS 3 READER	*CONTINUOUS GLUCOSE SYSTEM RECEIVER***	Tier 4	X			
FREESTY LIBR MIS READER	*CONTINUOUS GLUCOSE SYSTEM RECEIVER***	Tier 4	X	X		
FREESTYLE MIS READER	*CONTINUOUS GLUCOSE SYSTEM RECEIVER***	Tier 4	X	X		
GENTLE-LET MIS 26G	*LANCETS***	Tier 4				
GENTLE-LET MIS 28G	*LANCETS***	Tier 4				
GENTLE-LET MIS LANCETS	*LANCETS***	Tier 4				
GNP PEN NEED MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
GNP PEN NEED MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
GUARDIAN MIS SENSOR 3	*CONTINUOUS GLUCOSE SYSTEM SENSOR***	Tier 4	X	X		
GUARDIAN 4 MIS SENSOR	*CONTINUOUS GLUCOSE SYSTEM SENSOR***	Tier 4	X	X		
IHEALTH LIQ CONTROL	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 4				
INSUPEN MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
INSUPEN32G MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
KETO-DIASTIX TES	*URINE GLUCOSE-KETONES TEST STRIPS***	Tier 4				
KETONE TES	ACETONE (URINE) TEST STRIP	Tier 3				
KETOSTIX TES STRIP	ACETONE (URINE) TEST STRIP	Tier 3				
LANCET ULTRA MIS THIN 30G	*LANCETS***	Tier 4				
LANCETS MIS 28G	*LANCETS***	Tier 4				
LANCETS MIS 28G THIN	*LANCETS***	Tier 4				
LANCETS MICR MIS THIN 33G	*LANCETS***	Tier 4				
LANCETS SUPR MIS THIN 28G	*LANCETS***	Tier 4				
MEDISENSE LIQ GLUC-KET	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 4				
MICROLET MIS LANCETS	*LANCETS***	Tier 4				
MM TWIST MIS LANCETS	*LANCETS***	Tier 4				
MOBILE LANCE MIS 30G	*LANCETS***	Tier 4				
NEUTEK 2TEK SOL CONTROL	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 4				
NOVOFINE MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
NOVOFINE AUT MIS 30GX8MM	INSULIN PEN NEEDLE 30 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
NOVOFINE PLS MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
ONETOUCH LIQ ULT CONT	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 2				
ONETOUCH LIQ ULTRA	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 2				
ONETOUCH LIQ VERIO	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 2				
ONETOUCH MIS 30G	*LANCETS***	Tier 2				
ONETOUCH MIS LANCETS	*LANCETS***	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ONETOUCH DEL MIS LANC DEV	*LANCETS***	Tier 2				
ONETOUCH DEL MIS PLUS 30G	*LANCETS***	Tier 2				
ONETOUCH DEL MIS PLUS 33G	*LANCETS***	Tier 2				
ONETOUCH US MIS 2 30G	*LANCETS***	Tier 2				
PEN NEEDLE MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
PEN NEEDLE MIS 32GX5MM	INSULIN PEN NEEDLE 32 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
PEN NEEDLE MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
PEN NEEDLES MIS 30GX5/16	INSULIN PEN NEEDLE 30 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
PEN NEEDLES MIS 30GX8MM	INSULIN PEN NEEDLE 30 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
PEN NEEDLES MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
PEN NEEDLES MIS 32GX5/32	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
PEN NEEDLES MIS 32GX5MM	INSULIN PEN NEEDLE 32 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
PEN NEEDLES MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
PENTIPS MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
PENTIPS MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
PERFECT POIN MIS LANC 28G	*LANCETS***	Tier 4				
PERFECT POIN MIS LANC 30G	*LANCETS***	Tier 4				
PIP CONTROL LIQ	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 4				
PRECISION LIQ GLUC/KET	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 3				
PRECISN XTRA TES KETONE	KETONE BLOOD TEST STRIP	Tier 4				
PRO COMFORT MIS LANC 30G	*LANCETS***	Tier 4				
PSS SAFE LAN MIS	*LANCETS***	Tier 4				
PSS SEL LANC MIS	*LANCETS***	Tier 4				
PURE COMFORT MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
QUICK TOUCH MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
QUICK TOUCH MIS 32GX5MM	INSULIN PEN NEEDLE 32 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
QUICK TOUCH MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
QUINTET CONT SOL HGH/NORM	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 4				
RELION ULTRA MIS THIN 30G	*LANCETS***	Tier 4				
SAFE-T-LANCE MIS 21G	*LANCETS***	Tier 4				
SAFE-T-LANCE MIS 25G	*LANCETS***	Tier 4				
SAFE-T-LANCE MIS HI FLOW	*LANCETS***	Tier 4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
SAFE-T-LANCE MIS LOW FLOW	*LANCETS***	Tier 4				
SAFE-T-LANCE MIS NOR FLOW	*LANCETS***	Tier 4				
SAFE-T-PRO MIS LANCETS	*LANCETS***	Tier 2				
SAFE-T-PRO MIS PLUS	*LANCETS***	Tier 2				
SAFETY 21G MIS LANCETS	*LANCETS***	Tier 4				
SAFETY 23G MIS LANCETS	*LANCETS***	Tier 4				
SAFETY 28G MIS LANCETS	*LANCETS***	Tier 4				
SINGLE-LET MIS 23G	*LANCETS***	Tier 4				
SOFTCLIX MIS LANCETS	*LANCETS***	Tier 2				
SURE COMFORT MIS 32GX5/32	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
TECHLITE MIS LANC 26G	*LANCETS***	Tier 4				
THINLETS GP MIS 26G	*LANCETS***	Tier 4				
TRUE COMFORT MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
TRUPLUS LANC MIS 26G	*LANCETS***	Tier 4				
TRUPLUS LANC MIS 28G	*LANCETS***	Tier 4				
TRUPLUS LANC MIS 30G	*LANCETS***	Tier 4				
TRUPLUS LANC MIS 33G	*LANCETS***	Tier 4				
TWIST LANCET MIS 30G	*LANCETS***	Tier 4				
TWIST LANCET MIS 30G MULT	*LANCETS***	Tier 4				
ULTIGUARD MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
ULTIGUARD MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
ULTRA THIN MIS LANC 28G	*LANCETS***	Tier 4				
ULTRA THIN MIS LANC 30G	*LANCETS***	Tier 4				
ULTRA THIN MIS LANCETS	*LANCETS***	Tier 4				
UNIFINE PNTP MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
UNIFINE PROT MIS 30GX8MM	INSULIN PEN NEEDLE 30 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
UNIFINE PROT MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
UNILET LANCET MIS 30G	*LANCETS***	Tier 4				
UNILET LANCET MIS 33G	*LANCETS***	Tier 4				
VERIFINE MIS UNIV 28G	*LANCETS***	Tier 4				
VERIFINE MIS UNIV 30G	*LANCETS***	Tier 4				
VERIFINE MIS UNIV 33G	*LANCETS***	Tier 4				
VERIFINE LAN MIS MINI 21G	*LANCETS***	Tier 4				
VERIFINE LAN MIS MINI 23G	*LANCETS***	Tier 4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
VERIFINE LAN MIS MINI 28G	*LANCETS***	Tier 4				
VERIFINE LAN MIS MINI 30G	*LANCETS***	Tier 4				
VERIFINE PEN MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
VERIFINE PEN MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
VIVAGUARD LIQ CONTROL	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 4				
VIVAGUARD MIS 28G	*LANCETS***	Tier 4				
VIVAGUARD MIS 30G	*LANCETS***	Tier 4				
Diabetic/Endocrine Blood: Glucose Monitoring						
AUTOLET LANC MIS DEVICE	*LANCET DEVICES***	Tier 4		X		
AUTOLET LITE MIS LANCING	*LANCET DEVICES***	Tier 4		X		
CARETOUCH MIS EJECTOR	*LANCET DEVICES***	Tier 4		X		
CHOSEN MIS LANCING	*LANCET DEVICES***	Tier 4		X		
CVS LANCING MIS DEVICE	*LANCET DEVICES***	Tier 4		X		
FLOW-EZE MIS VENTED	HYPODERMIC NEEDLES (DISPOSABLE)	Tier 4				
GENTLE-LET MIS PLATFORM	*LANCETS MISC.***	Tier 4				
IHEALTH LANC MIS DEVICE	*LANCET DEVICES***	Tier 4		X		
LANCET CARRY MIS CASE	*LANCETS MISC.***	Tier 4				
MICROLET MIS NEXT	*LANCET DEVICES***	Tier 4		X		
MINI LANCING MIS DEVICE	*LANCET DEVICES***	Tier 4		X		
MM LANCING MIS DEVICE	*LANCET DEVICES***	Tier 4		X		
ONETOUCH MIS LANC DEV	*LANCET DEVICES***	Tier 2		X		
ONETOUCH DEL MIS LANC DEV	*LANCET DEVICES***	Tier 2		X		
PSS SEL PLAT MIS	*LANCETS MISC.***	Tier 4				
TRUEDRAW MIS LANC DEV	*LANCET DEVICES***	Tier 4		X		
VIVAGUARD MIS LANCING	*LANCET DEVICES***	Tier 4		X		
Diuretics, Carbonic Anhydrase Inhibitors - Cardiac Drugs						
DICHLORPHENA TAB 50MG	DICHLORPHENAMIDE TAB 50 MG	Tier 4	X	X		X
Diuretics, Loop - Cardiac Drugs						
BUMETANIDE TAB 0.5MG	BUMETANIDE TAB 0.5 MG	Tier 2				
BUMETANIDE TAB 1MG	BUMETANIDE TAB 1 MG	Tier 2				
BUMETANIDE TAB 2MG	BUMETANIDE TAB 2 MG	Tier 2				
BUMEX TAB 0.5MG	BUMETANIDE TAB 0.5 MG	Tier 4				
ETHACRYNIC TAB ACD 25MG	ETHACRYNIC ACID TAB 25 MG	Tier 5				
FUROSEMIDE SOL 10MG/ML	FUROSEMIDE ORAL SOLN 10 MG/ML	Tier 2				
FUROSEMIDE SOL 40MG/5ML	FUROSEMIDE ORAL SOLN 8 MG/ML	Tier 2				
FUROSEMIDE TAB 20MG	FUROSEMIDE TAB 20 MG	Tier 2				
FUROSEMIDE TAB 40MG	FUROSEMIDE TAB 40 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
FUROSEMIDE TAB 80MG	FUROSEMIDE TAB 80 MG	Tier 2				
LASIX TAB 20MG	FUROSEMIDE TAB 20 MG	Tier 5				
LASIX TAB 40MG	FUROSEMIDE TAB 40 MG	Tier 5				
LASIX TAB 80MG	FUROSEMIDE TAB 80 MG	Tier 5				
TORSEMIDE TAB 100MG	TORSEMIDE TAB 100 MG	Tier 2				
TORSEMIDE TAB 10MG	TORSEMIDE TAB 10 MG	Tier 2				
TORSEMIDE TAB 20MG	TORSEMIDE TAB 20 MG	Tier 2				
TORSEMIDE TAB 5MG	TORSEMIDE TAB 5 MG	Tier 2				
Diuretics, Potassium-sparing - Cardiac Drugs						
AMILORIDE TAB 5MG	AMILORIDE HCL TAB 5 MG	Tier 2				
CAROSPIR SUS 25MG/5ML	SPIRONOLACTONE SUSP 25 MG/5ML	Tier 5	X			
EPLERENONE TAB 25MG	EPLERENONE TAB 25 MG	Tier 3				
EPLERENONE TAB 50MG	EPLERENONE TAB 50 MG	Tier 3				
SPIRONOLACT TAB 100MG	SPIRONOLACTONE TAB 100 MG	Tier 2				
SPIRONOLACT TAB 25MG	SPIRONOLACTONE TAB 25 MG	Tier 2				
SPIRONOLACT TAB 50MG	SPIRONOLACTONE TAB 50 MG	Tier 2				
SPIRONOLACTO SUS 25MG/5ML	SPIRONOLACTONE SUSP 25 MG/5ML	Tier 4	X			
TRIAMTERENE CAP 100MG	TRIAMTERENE CAP 100 MG	Tier 4				
TRIAMTERENE CAP 50MG	TRIAMTERENE CAP 50 MG	Tier 4				
Diuretics, Thiazide - Cardiac Drugs						
CHLOROTHIAZI POW	CHLOROTHIAZIDE (BULK) POWDER	Tier 4				
CHLORTHALID TAB 25MG	CHLORTHALIDONE TAB 25 MG	Tier 2				
CHLORTHALID TAB 50MG	CHLORTHALIDONE TAB 50 MG	Tier 2				
DIURIL SUS 250/5ML	CHLOROTHIAZIDE SUSP 250 MG/5ML	Tier 3				
HYDROCHLOROT CAP 12.5MG	HYDROCHLOROTHIAZIDE CAP 12.5 MG	Tier 2				
HYDROCHLOROT TAB 12.5MG	HYDROCHLOROTHIAZIDE TAB 12.5 MG	Tier 2				
HYDROCHLOROT TAB 25MG	HYDROCHLOROTHIAZIDE TAB 25 MG	Tier 2				
HYDROCHLOROT TAB 50MG	HYDROCHLOROTHIAZIDE TAB 50 MG	Tier 2				
INDAPAMIDE TAB 1.25MG	INDAPAMIDE TAB 1.25 MG	Tier 2				
INDAPAMIDE TAB 2.5MG	INDAPAMIDE TAB 2.5 MG	Tier 2				
METOLAZONE TAB 10MG	METOLAZONE TAB 10 MG	Tier 2				
METOLAZONE TAB 2.5MG	METOLAZONE TAB 2.5 MG	Tier 2				
METOLAZONE TAB 5MG	METOLAZONE TAB 5 MG	Tier 2				
Dopamine Agonists - Parkinson's Disease Drugs						
BROMOCRIPTIN CAP 5MG	BROMOCRIPTINE MESYLATE CAP 5 MG (BASE EQUIVALENT)	Tier 2				
BROMOCRIPTIN TAB 2.5MG	BROMOCRIPTINE MESYLATE TAB 2.5 MG (BASE EQUIVALENT)	Tier 2				
PRAMIPEXOLE TAB 0.125MG	PRAMIPEXOLE DIHYDROCHLORIDE TAB 0.125 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PRAMIPEXOLE TAB 0.25MG	PRAMIPEXOLE DIHYDROCHLORIDE TAB 0.25 MG	Tier 2				
PRAMIPEXOLE TAB 0.5MG	PRAMIPEXOLE DIHYDROCHLORIDE TAB 0.5 MG	Tier 2				
PRAMIPEXOLE TAB 0.75MG	PRAMIPEXOLE DIHYDROCHLORIDE TAB 0.75 MG	Tier 2				
PRAMIPEXOLE TAB 1.5MG	PRAMIPEXOLE DIHYDROCHLORIDE TAB 1.5 MG	Tier 2				
PRAMIPEXOLE TAB 1MG	PRAMIPEXOLE DIHYDROCHLORIDE TAB 1 MG	Tier 2				
ROPINIROLE TAB 0.25MG	ROPINIROLE HYDROCHLORIDE TAB 0.25 MG	Tier 2				
ROPINIROLE TAB 0.5MG	ROPINIROLE HYDROCHLORIDE TAB 0.5 MG	Tier 2				
ROPINIROLE TAB 1MG	ROPINIROLE HYDROCHLORIDE TAB 1 MG	Tier 2				
ROPINIROLE TAB 2MG	ROPINIROLE HYDROCHLORIDE TAB 2 MG	Tier 2				
ROPINIROLE TAB 3MG	ROPINIROLE HYDROCHLORIDE TAB 3 MG	Tier 2				
ROPINIROLE TAB 4MG	ROPINIROLE HYDROCHLORIDE TAB 4 MG	Tier 2				
ROPINIROLE TAB 5MG	ROPINIROLE HYDROCHLORIDE TAB 5 MG	Tier 2				
Dopamine Precursors/L-Amino Acid Decarboxylase Inhibitors - Parkinson's Disease Drugs						
CARB/LEVO TAB 10-100MG	CARBIDOPA & LEVODOPA TAB 10-100 MG	Tier 2				
CARB/LEVO TAB 10-100MG	CARBIDOPA & LEVODOPA ORALLY DISINTEGRATING TAB 10-100 MG	Tier 2				
CARB/LEVO TAB 25-100MG	CARBIDOPA & LEVODOPA TAB 25-100 MG	Tier 2				
CARB/LEVO TAB 25-100MG	CARBIDOPA & LEVODOPA ORALLY DISINTEGRATING TAB 25-100 MG	Tier 2				
CARB/LEVO TAB 25-250MG	CARBIDOPA & LEVODOPA TAB 25-250 MG	Tier 2				
CARB/LEVO TAB 25-250MG	CARBIDOPA & LEVODOPA ORALLY DISINTEGRATING TAB 25-250 MG	Tier 2				
CARB/LEVO 50 TAB /ENTACAP	CARBIDOPA-LEVODOPA-ENTACAPONE TABS 12.5-50-200 MG	Tier 2				
CARB/LEVO 75 TAB /ENTACAP	CARBIDOPA-LEVODOPA-ENTACAPONE TABS 18.75-75-200 MG	Tier 2				
CARB/LEVO ER TAB 25-100MG	CARBIDOPA & LEVODOPA TAB ER 25-100 MG	Tier 2				
CARB/LEVO ER TAB 50-200MG	CARBIDOPA & LEVODOPA TAB ER 50-200 MG	Tier 2				
CARB/LEVO100 TAB /ENTACAP	CARBIDOPA-LEVODOPA-ENTACAPONE TABS 25-100-200 MG	Tier 2				
CARB/LEVO125 TAB /ENTACAP	CARBIDOPA-LEVODOPA-ENTACAPONE TABS 31.25-125-200 MG	Tier 2				
CARB/LEVO150 TAB /ENTACAP	CARBIDOPA-LEVODOPA-ENTACAPONE TABS 37.5-150-200 MG	Tier 2				
CARB/LEVO200 TAB /ENTACAP	CARBIDOPA-LEVODOPA-ENTACAPONE TABS 50-200-200 MG	Tier 2				
CARBIDOPA TAB 25MG	CARBIDOPA TAB 25 MG	Tier 2				
CREXONT CAP 35-140MG	CARBIDOPA & LEVODOPA CAP ER 35-140 MG	Tier 5			X	
CREXONT CAP 52.5-210	CARBIDOPA & LEVODOPA CAP ER 52.5-210 MG	Tier 5			X	
CREXONT CAP 70-280MG	CARBIDOPA & LEVODOPA CAP ER 70-280 MG	Tier 5			X	
CREXONT CAP 87.5-350	CARBIDOPA & LEVODOPA CAP ER 87.5-350 MG	Tier 5			X	
DUOPA SUS 4.63-20	CARBIDOPA-LEVODOPA ENTERAL SUSP 4.63-20 MG/ML	Tier 5	X			

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
SINEMET TAB 10-100MG	CARBIDOPA & LEVODOPA TAB 10-100 MG	Tier 5				
SINEMET TAB 25-100MG	CARBIDOPA & LEVODOPA TAB 25-100 MG	Tier 5				
STALEVO 100 TAB	CARBIDOPA-LEVODOPA-ENTACAPONE TABS 25-100-200 MG	Tier 5				
STALEVO 125 TAB	CARBIDOPA-LEVODOPA-ENTACAPONE TABS 31.25-125-200 MG	Tier 5				
STALEVO 150 TAB	CARBIDOPA-LEVODOPA-ENTACAPONE TABS 37.5-150-200 MG	Tier 5				
STALEVO 200 TAB	CARBIDOPA-LEVODOPA-ENTACAPONE TABS 50-200-200 MG	Tier 5				
STALEVO 50 TAB	CARBIDOPA-LEVODOPA-ENTACAPONE TABS 12.5-50-200 MG	Tier 5				
STALEVO 75 TAB	CARBIDOPA-LEVODOPA-ENTACAPONE TABS 18.75-75-200 MG	Tier 5				
Dyslipidemics, Fibric Acid Derivatives - Cholesterol Control Drugs						
FENOFIBRATE CAP 130MG	FENOFIBRATE MICRONIZED CAP 130 MG	Tier 3				
FENOFIBRATE CAP 134MG	FENOFIBRATE MICRONIZED CAP 134 MG	Tier 3				
FENOFIBRATE CAP 200MG	FENOFIBRATE MICRONIZED CAP 200 MG	Tier 3				
FENOFIBRATE CAP 43MG	FENOFIBRATE MICRONIZED CAP 43 MG	Tier 3				
FENOFIBRATE CAP 67MG	FENOFIBRATE MICRONIZED CAP 67 MG	Tier 3				
FENOFIBRATE TAB 145MG	FENOFIBRATE TAB 145 MG	Tier 3				
FENOFIBRATE TAB 160MG	FENOFIBRATE TAB 160 MG	Tier 3				
FENOFIBRATE TAB 48MG	FENOFIBRATE TAB 48 MG	Tier 3				
FENOFIBRATE TAB 54MG	FENOFIBRATE TAB 54 MG	Tier 3				
GEMFIBROZIL TAB 600MG	GEMFIBROZIL TAB 600 MG	Tier 2				
LOPID TAB 600MG	GEMFIBROZIL TAB 600 MG	Tier 5				
Dyslipidemics, HMG CoA Reductase Inhibitors - Cholesterol Control Drugs						
ATORVALIQ SUS 20MG/5ML	ATORVASTATIN CALCIUM SUSP 20 MG/5ML (4MG/ML) (BASE EQUIV)	Tier 5	X			
ATORVASTATIN TAB 10MG	ATORVASTATIN CALCIUM TAB 10 MG (BASE EQUIVALENT)	Tier 2^				
ATORVASTATIN TAB 20MG	ATORVASTATIN CALCIUM TAB 20 MG (BASE EQUIVALENT)	Tier 2^				
ATORVASTATIN TAB 40MG	ATORVASTATIN CALCIUM TAB 40 MG (BASE EQUIVALENT)	Tier 2				
ATORVASTATIN TAB 80MG	ATORVASTATIN CALCIUM TAB 80 MG (BASE EQUIVALENT)	Tier 2				
EZALLOR SPR CAP 10MG	ROSUVASTATIN CALCIUM SPRINKLE CAP 10 MG (BASE EQUIVALENT)	Tier 4	X			
EZALLOR SPR CAP 20MG	ROSUVASTATIN CALCIUM SPRINKLE CAP 20 MG (BASE EQUIVALENT)	Tier 4	X			
EZALLOR SPR CAP 40MG	ROSUVASTATIN CALCIUM SPRINKLE CAP 40 MG (BASE EQUIVALENT)	Tier 4	X			
EZALLOR SPR CAP 5MG	ROSUVASTATIN CALCIUM SPRINKLE CAP 5 MG (BASE EQUIVALENT)	Tier 4	X			

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
FLOLIPID SUS 20MG/5ML	SIMVASTATIN SUSP 20 MG/5ML (4 MG/ML)	Tier 5	X			
FLOLIPID SUS 40MG/5ML	SIMVASTATIN SUSP 40 MG/5ML (8 MG/ML)	Tier 5	X			
FLUVASTATIN CAP 20MG	FLUVASTATIN SODIUM CAP 20 MG (BASE EQUIVALENT)	Tier 2				
FLUVASTATIN CAP 40MG	FLUVASTATIN SODIUM CAP 40 MG (BASE EQUIVALENT)	Tier 2				
LOVASTATIN TAB 10MG	LOVASTATIN TAB 10 MG	Tier 1				
LOVASTATIN TAB 20MG	LOVASTATIN TAB 20 MG	Tier 1				
LOVASTATIN TAB 40MG	LOVASTATIN TAB 40 MG	Tier 1				
PRAVASTATIN TAB 10MG	PRAVASTATIN SODIUM TAB 10 MG	Tier 2				
PRAVASTATIN TAB 20MG	PRAVASTATIN SODIUM TAB 20 MG	Tier 2				
PRAVASTATIN TAB 40MG	PRAVASTATIN SODIUM TAB 40 MG	Tier 2				
PRAVASTATIN TAB 80MG	PRAVASTATIN SODIUM TAB 80 MG	Tier 2				
ROSUVASTATIN TAB 10MG	ROSUVASTATIN CALCIUM TAB 10 MG	Tier 3				
ROSUVASTATIN TAB 20MG	ROSUVASTATIN CALCIUM TAB 20 MG	Tier 3				
ROSUVASTATIN TAB 40MG	ROSUVASTATIN CALCIUM TAB 40 MG	Tier 3				
ROSUVASTATIN TAB 5MG	ROSUVASTATIN CALCIUM TAB 5 MG	Tier 3				
SIMVASTATIN TAB 10MG	SIMVASTATIN TAB 10 MG	Tier 2^				
SIMVASTATIN TAB 20MG	SIMVASTATIN TAB 20 MG	Tier 2^				
SIMVASTATIN TAB 40MG	SIMVASTATIN TAB 40 MG	Tier 2^				
SIMVASTATIN TAB 5MG	SIMVASTATIN TAB 5 MG	Tier 2^				
SIMVASTATIN TAB 80MG	SIMVASTATIN TAB 80 MG	Tier 2				
Dyslipidemics, Other - Miscellaneous Cholesterol Control Drugs						
CHOLESTYRAM POW 4GM	CHOLESTYRAMINE POWDER 4 GM/DOSE	Tier 2				
CHOLESTYRAM POW 4GM	CHOLESTYRAMINE POWDER PACKETS 4 GM	Tier 2				
CHOLESTYRAM POW 4GM LITE	CHOLESTYRAMINE LIGHT POWDER PACKETS 4 GM	Tier 2				
CHOLESTYRAM POW 4GM LITE	CHOLESTYRAMINE LIGHT POWDER 4 GM/DOSE	Tier 2				
COLESEVELAM PAK 3.75GM	COLESEVELAM HCL PACKET FOR SUSP 3.75 GM	Tier 3				
COLESEVELAM TAB 625MG	COLESEVELAM HCL TAB 625 MG	Tier 3				
COLESTID GRA 5GM	COLESTIPOL HCL GRANULES 5 GM	Tier 4				
COLESTID TAB 1GM	COLESTIPOL HCL TAB 1 GM	Tier 5				
COLESTID FLA GRA 5/7.5GM	COLESTIPOL HCL GRANULE PACKETS 5 GM	Tier 5				
COLESTID FLA GRA 5GM	COLESTIPOL HCL GRANULES 5 GM	Tier 4				
COLESTIPOL GRA 5GM	COLESTIPOL HCL GRANULE PACKETS 5 GM	Tier 2				
COLESTIPOL GRA 5GM	COLESTIPOL HCL GRANULES 5 GM	Tier 2				
COLESTIPOL TAB 1GM	COLESTIPOL HCL TAB 1 GM	Tier 2				
EZETIMIBE TAB 10MG	EZETIMIBE TAB 10 MG	Tier 3				
NEXLETOL TAB 180MG	BEMPEDOIC ACID TAB 180 MG	Tier 3	X	X	X	
NEXLIZET TAB 180/10MG	BEMPEDOIC ACID-EZETIMIBE TAB 180-10 MG	Tier 3	X	X	X	

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
NIACIN TAB 500MG ER	NIACIN TAB ER 500 MG (ANTIHYPERLIPIDEMIC)	Tier 4				
NIACIN ER TAB 1000MG	NIACIN TAB ER 1000 MG (ANTIHYPERLIPIDEMIC)	Tier 4				
NIACIN ER TAB 500MG	NIACIN TAB ER 500 MG (ANTIHYPERLIPIDEMIC)	Tier 4				
NIACIN ER TAB 500MG ER	NIACIN TAB ER 500 MG (ANTIHYPERLIPIDEMIC)	Tier 4				
NIACIN ER TAB 750MG	NIACIN TAB ER 750 MG (ANTIHYPERLIPIDEMIC)	Tier 4				
OMEGA-3-ACID CAP 1GM	OMEGA-3-ACID ETHYL ESTERS CAP 1 GM	Tier 3				
PREVALITE POW 4GM	CHOLESTYRAMINE LIGHT POWDER 4 GM/DOSE	Tier 2				
PREVALITE POW 4GM PK	CHOLESTYRAMINE LIGHT POWDER PACKETS 4 GM	Tier 2				
QUESTRAN POW 4GM	CHOLESTYRAMINE POWDER PACKETS 4 GM	Tier 5				
QUESTRAN POW 4GM	CHOLESTYRAMINE POWDER 4 GM/DOSE	Tier 5				
QUESTRAN POW 4GM LITE	CHOLESTYRAMINE LIGHT POWDER 4 GM/DOSE	Tier 5				
REPATHA INJ 140MG/ML	EVOLOCUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 140 MG/ML	Tier 3		X		
REPATHA PUSH INJ 420/3.5	EVOLOCUMAB SUBCUTANEOUS SOLN CARTRIDGE/INFUSOR 420 MG/3.5ML	Tier 3		X		
REPATHA SURE INJ 140MG/ML	EVOLOCUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 140 MG/ML	Tier 3		X		
Electrolyte/Mineral Replacement - Vitamin, Mineral and Body Fluid Deficiency Drugs						
ADVERA LIQ CHOCOLAT	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
ADVERA LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
ARGINAID PAK CHERRY	*NUTRITIONAL SUPPLEMENT PACK**	Tier 4				
ARGINAID PAK ORANGE	*NUTRITIONAL SUPPLEMENT PACK**	Tier 4				
ATABEX EC TAB 29-1MG	*PRENATAL VIT W/ DSS-IRON CARBONYL-FA TAB DR 29-1 MG***	Tier 4				
BOOST LIQ ORIGINAL	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4	X			
BOOST BREEZE LIQ 2-FLAVOR	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
BOOST HI-PRO LIQ CHOCOLAT	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
BOOST PLUS LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4	X			
BRAINSUSTAIN PAK	*NUTRITIONAL SUPPLEMENT PACK**	Tier 4				
CALCIFOL WAF	CA CARB-FOLIC ACID-VIT D-B6-B12-BORON-MAG WAFER 1342-1.6 MG	Tier 4				
CARGLUMIC TAB 200MG	CARGLUMIC ACID SOLUBLE TAB 200 MG	Tier 4	X			X
COMPLEAT LIQ PEPTIDE	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
COMPLEAT LIQ STND 1.4	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4	X			
CVS NUTRITIO LIQ CHOCOLAT	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
CVS NUTRITIO LIQ CHOCOLAT	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
CVS NUTRITIO LIQ STRABERY	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
CVS NUTRITIO LIQ STRABERY	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
CVS NUTRITIO LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 2				
CVS NUTRITIO LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
CYTRA K GRA CRYSTALS	POTASSIUM CITRATE & CITRIC ACID POWDER PACK 3300-1002 MG	Tier 2				
DOJOLVI LIQ 100%	TRIHEPTANOIN ORAL LIQUID 100%	Tier 5	X			X
EAA SUPPLEME POW	*NUTRITIONAL SUPPLEMENT PACK**	Tier 4	X			
EAA SUPPLEME POW TROPICAL	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3	X			
EFFER-K TAB 10MEQ	POTASSIUM BICARBONATE-CITRIC ACID EFFER TAB 10 MEQ	Tier 3				
EFFER-K TAB 20MEQ	POTASSIUM BICARBONATE-CITRIC ACID EFFER TAB 20 MEQ	Tier 3				
EFFER-K TAB 25MEQ EF	POTASSIUM BICARBONATE EFFER TAB 25 MEQ	Tier 2				
ENDARI POW 5GM	GLUTAMINE (SICKLE CELL) POWD PACK 5 GM	Tier 5	X	X		
ENSURE LIQ CHOCOLAT	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4	X			
ENSURE ENLIV LIQ STRAWBER	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4	X			
ENSURE ENLIV LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4	X			
ENSURE HP LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
ENSURE ORIGI LIQ FIBER	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4	X			
ENSURE ORIGN LIQ CHOCOLAT	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
ENSURE ORIGN LIQ CHOCOLAT	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4	X			
ENSURE ORIGN LIQ STRAWBER	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
ENSURE PLUS LIQ BUT PECN	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
ENSURE PLUS LIQ CHOCOLAT	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
ENSURE PLUS LIQ DRK CHOC	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
ENSURE PLUS LIQ STRAWBER	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
ENSURE PLUS LIQ STRWBRY	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4	X			
ENSURE PLUS LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
ENSURE PLUS LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4	X			
ENSURE SURGE LIQ IMMUNO	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
ENU NUTRITIO LIQ CHOCOLAT	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4	X			
ENU NUTRITIO LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4	X			
FLORIVA DRO 0.25MG	SODIUM FLUORIDE-VITAMIN D LIQD DROPS 0.25 MG/ML-400 UNIT/ML	Tier 4				
FLUORIDE CHW 0.25MG F	SODIUM FLUORIDE CHEW TAB 0.25 MG F (FROM 0.55 MG NAF)	Tier 1				
FLUORIDE CHW 0.5MG F	SODIUM FLUORIDE CHEW TAB 0.5 MG F (FROM 1.1 MG NAF)	Tier 1				
FLUORIDE CHW 1MG F	SODIUM FLUORIDE CHEW TAB 1 MG F (FROM 2.2 MG NAF)	Tier 1				
FT IMMUNE CHW SUPPORT	*MULTIPLE VITAMINS W/ MINERALS CHEW TAB**	Tier 2				
GA GEL PAK	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3	X			
GALZIN CAP 25MG	ZINC ACETATE CAP 25 MG (ELEMENTAL ZINC)	Tier 4				
GALZIN CAP 50MG	ZINC ACETATE CAP 50 MG (ELEMENTAL ZINC)	Tier 4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
GLUCERNA LIQ BUT PECA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
GLUCERNA LIQ CHOCOLAT	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
GLUCERNA LIQ STRAWBER	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
GLUCOSE CTRL LIQ MAX PROT	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
GLUCOSE SUP LIQ 1.2	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
GLYCOSADE PAK	*NUTRITIONAL SUPPLEMENT PACK**	Tier 4	X			
GLYTACTIN LIQ RES/LITE	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
GLYTACTIN LIQ RESTOR10	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
GLYTACTIN LIQ RTD 10	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
GLYTACTIN LIQ RTD 15	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
GLYTACTIN PAK BTMK/DLT	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3	X			
GLYTACTIN PAK SWIRL 15	*NUTRITIONAL SUPPLEMENT PACK**	Tier 4				
GLYTACTIN PAK SWIRL 15	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3				
GLYTACTIN POW APPLE	*NUTRITIONAL SUPPLEMENT PACK**	Tier 4				
GLYTACTIN POW BD 20/20	*NUTRITIONAL SUPPLEMENT PACK**	Tier 4				
GLYTACTIN POW BETMLK15	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3				
GLYTACTIN POW BETMLK15	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3	X			
GLYTACTIN POW BLD 10PE	*NUTRITIONAL SUPPLEMENT PACK**	Tier 4				
GLYTACTIN POW BLD PKU	*NUTRITIONAL SUPPLEMENT PACK**	Tier 4				
GLYTACTIN POW PUNCH	*NUTRITIONAL SUPPLEMENT PACK**	Tier 4				
GLYTACTIN POW RESTOR 5	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3				
GLYTACTIN POW RST LT10	*NUTRITIONAL SUPPLEMENT PACK**	Tier 4				
GLYTACTIN POW TROPICAL	*NUTRITIONAL SUPPLEMENT PACK**	Tier 4				
GLYTACTIN 15 LIQ RTD LITE	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
GNP ELECTROL SOL UNFLAVOR	*ORAL ELECTROLYTE SOLUTION***	Tier 2				
HCU COOLER LIQ	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
HCU GEL PAK	*NUTRITIONAL SUPPLEMENT PACK**	Tier 4	X			
HEMATINIC/FA TAB	FERROUS FUMARATE-FOLIC ACID TAB 324-1 MG	Tier 2				
HOMACTIN AA POW PLUS	*NUTRITIONAL SUPPLEMENT PACK**	Tier 4	X			
INATAL GT TAB	*PRENATAL VIT W/ DSS-IRON CARBONYL-FA TAB 90-1 MG***	Tier 3				
ISOLEUCINE PAK 50MG	ISOLEUCINE ORAL POWDER PACKET 50 MG	Tier 3				
ISOLEUCINE POW 1000	ISOLEUCINE ORAL POWDER PACKET 1 GM	Tier 3				
JUVEN POW	*NUTRITIONAL SUPPLEMENT PACK**	Tier 4				
K CITRATE SOL CITR ACID	POTASSIUM CITRATE & CITRIC ACID SOLN 1100-334 MG/5ML	Tier 2				
K-PHOS TAB	POTASSIUM PHOSPHATE MONOBASIC TAB 500 MG	Tier 3				
K-PHOS TAB NEUTRAL	POT PHOS MONOBASIC W/SOD PHOS DI & MONOBAS TAB 155-852-130MG	Tier 3				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
K-PHOS TAB NO 2	POTASSIUM & SODIUM ACID PHOSPHATES TAB 305-700 MG	Tier 3				
K-PRIME TAB 25MEQ EF	POTASSIUM BICARBONATE EFFER TAB 25 MEQ	Tier 4				
K-TAB TAB 20MEQ	POTASSIUM CHLORIDE TAB ER 20 MEQ (1500 MG)	Tier 4				
KATE FARMS LIQ 1.0	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
KATE FARMS LIQ 1.0 CHOC	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
KATE FARMS LIQ 1.0 VAN	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
KATE FARMS LIQ 1.4	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
KATE FARMS LIQ 1.4	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4	X			
KATE FARMS LIQ 1.5	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
KATE FARMS LIQ CHOCOLAT	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
KATE FARMS LIQ STRAWBER	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
KATE FARMS LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
KETOVIE LIQ PEPTIDE	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4	X			
KETOVIE LIQ UNFLAVOR	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4	X			
KETOVIE 3:1 LIQ UNFLAVOR	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4	X			
KETOVIE 4:1 LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4	X			
KLOR-CON PAK 20MEQ	POTASSIUM CHLORIDE POWDER PACKET 20 MEQ	Tier 2				
KLOR-CON 10 TAB 10MEQ ER	POTASSIUM CHLORIDE TAB ER 10 MEQ	Tier 2				
KLOR-CON 8 TAB 8MEQ ER	POTASSIUM CHLORIDE TAB ER 8 MEQ (600 MG)	Tier 2				
KLOR-CON M10 TAB 10MEQ ER	POTASSIUM CHLORIDE MICROENCAPSULATED CRYST ER TAB 10 MEQ	Tier 2				
KLOR-CON M15 TAB 15MEQ ER	POTASSIUM CHLORIDE MICROENCAPSULATED CRYST ER TAB 15 MEQ	Tier 2				
KLOR-CON M20 TAB 20MEQ ER	POTASSIUM CHLORIDE MICROENCAPSULATED CRYST ER TAB 20 MEQ	Tier 2				
KLOR-CON/EF TAB 25MEQ	POTASSIUM BICARBONATE EFFER TAB 25 MEQ	Tier 2				
L-CARNITINE CAP 500MG	LEVOCARNITINE L-TARTRATE CAP 500 MG	Tier 2				
L-GLUTAMINE POW 5GM	GLUTAMINE (SICKLE CELL) POWD PACK 5 GM	Tier 4	X	X		
L-LYSINE TAB 500MG	LYSINE TAB 500 MG	Tier 3	X			
L-TYROSINE CAP 500MG	TYROSINE CAP 500 MG	Tier 3	X			
L-TYROSINE CAP 500MG	TYROSINE CAP 500 MG	Tier 3				
LEVOCARNITIN SOL 1GM/10ML	LEVOCARNITINE ORAL SOLN 1 GM/10ML (10%)	Tier 2				
LEVOCARNITIN TAB 330MG	LEVOCARNITINE TAB 330 MG	Tier 2				
LIQ HOPE PEP LIQ BERRY	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
MAGNESIUM PL CAP 200MG	MAGNESIUM CAP 100 MG	Tier 2				
MCT PRO-CAL PAK	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3				
MIFEPREX TAB 200MG	MIFEPRISTONE TAB 200 MG	Tier 4				
MIFEPRISTONE TAB 200MG	MIFEPRISTONE TAB 200 MG	Tier 2				
MMA/PA GEL PAK	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3	X			

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
MMA/PA GEL POW	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3	X			
MSUD COOLER LIQ	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
MSUD COOLER LIQ	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
MSUD GEL PAK UNFLAVOR	*NUTRITIONAL SUPPLEMENT PACK**	Tier 4	X			
NEONATAL FE TAB	*PRENATAL VITAMIN W/ IRON-FOLIC ACID TAB 90-1 MG***	Tier 4				
NEPRO/CARB LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4	X			
OPTICLEANSE PAK GHI	*NUTRITIONAL SUPPLEMENT PACK**	Tier 4	X			
OPTICLEANSE PAK PLUS	*NUTRITIONAL SUPPLEMENT PACK**	Tier 4	X			
ORACIT SOL	SODIUM CITRATE & CITRIC ACID SOLN 490-640 MG/5ML	Tier 3				
ORAL CITRATE SOL	SODIUM CITRATE & CITRIC ACID SOLN 490-640 MG/5ML	Tier 3				
OSMOLITE LIQ 1.0 CAL	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
PEDI PEPTIDE LIQ 1.0	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
PEDI PEPTIDE LIQ 1.5	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
PEDI PEPTIDE LIQ 1.5 VAN	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
PEDI STANDAR LIQ 1.2 CHOC	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
PEDI STANDAR LIQ 1.2 VAN	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
PEDIALYTE SOL ADV CARE	*ORAL ELECTROLYTE SOLUTION***	Tier 4				
PEDIALYTE SOL FRUIT PU	*ORAL ELECTROLYTE SOLUTION***	Tier 4				
PEPTAMEN AF LIQ UNFLAVOR	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4	X			
PERATIVE LIQ 1.3 CAL	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
PHENYLADE POW GMP ULTR	*NUTRITIONAL SUPPLEMENT PACK**	Tier 4				
PHENYLALANIN PAK 50MG	PHENYLALANINE PACKET 50 MG	Tier 3				
PHOSPHA 250 TAB NEUTRAL	POT PHOS MONOBASIC W/SOD PHOS DI & MONOBAS TAB 155-852-130MG	Tier 3				
PHOSPHO-TRIN TAB 250 NEUT	POT PHOS MONOBASIC W/SOD PHOS DI & MONOBAS TAB 155-852-130MG	Tier 2				
PHOSPHOROUS TAB	POT PHOS MONOBASIC W/SOD PHOS DI & MONOBAS TAB 155-852-130MG	Tier 2				
PHOXILLUM SOL B22K/40	*BICARB-K 22-4 MEQ/L WITH PHOS 1 MMOL/L SOLN (CRRT)***	Tier 4				
PHOXILLUM SOL BK4/2.5	*BICARB-K-CA 32-4-2.5 MEQ/L WITH PHOS 1 MMOL/L SOLN (CRRT)*	Tier 4				
PIVOT LIQ 1.5 CAL	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
PKU AIR20 LIQ GOLD	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
PKU AIR20 LIQ GREEN	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
PKU AIR20 LIQ YELLOW	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
PKU COOLER LIQ 15 ORNGE	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
PKU COOLER LIQ 15 PRPLE	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
PKU COOLR 10 LIQ ORANGE	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PKU COOLR 10 LIQ PURPLE	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
PKU COOLR 10 LIQ RED	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
PKU COOLR 10 LIQ WHITE	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
PKU COOLR 15 LIQ RED	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
PKU COOLR 15 LIQ WHITE	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
PKU COOLR 20 LIQ ORANGE	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
PKU COOLR 20 LIQ PURPLE	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
PKU COOLR 20 LIQ RED	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
PKU COOLR 20 LIQ WHITE	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
PKU GEL PAK	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3	X			
PKU SPHERE POW 15	*NUTRITIONAL SUPPLEMENT PACK**	Tier 4				
PKU SPHERE POW 20	*NUTRITIONAL SUPPLEMENT PACK**	Tier 4				
POT CHLORIDE CAP 10MEQ ER	POTASSIUM CHLORIDE CAP ER 10 MEQ	Tier 2				
POT CHLORIDE CAP 8MEQ ER	POTASSIUM CHLORIDE CAP ER 8 MEQ	Tier 2				
POT CHLORIDE POW 20MEQ	POTASSIUM CHLORIDE POWDER PACKET 20 MEQ	Tier 2				
POT CHLORIDE SOL 10%	POTASSIUM CHLORIDE ORAL SOLN 10% (20 MEQ/15ML)	Tier 2				
POT CHLORIDE SOL 20%	POTASSIUM CHLORIDE ORAL SOLN 20% (40 MEQ/15ML)	Tier 2				
POT CHLORIDE TAB 10MEQ ER	POTASSIUM CHLORIDE TAB ER 10 MEQ	Tier 2				
POT CHLORIDE TAB 15MEQ ER	POTASSIUM CHLORIDE TAB ER 15 MEQ	Tier 3				
POT CHLORIDE TAB 20MEQ ER	POTASSIUM CHLORIDE TAB ER 20 MEQ (1500 MG)	Tier 2				
POT CHLORIDE TAB 8MEQ ER	POTASSIUM CHLORIDE TAB ER 8 MEQ (600 MG)	Tier 2				
POT CITRA ER TAB 1080MG	POTASSIUM CITRATE TAB ER 10 MEQ (1080 MG)	Tier 2				
POT CITRA ER TAB 1620MG	POTASSIUM CITRATE TAB ER 15 MEQ (1620 MG)	Tier 2				
POT CITRA ER TAB 540MG	POTASSIUM CITRATE TAB ER 5 MEQ (540 MG)	Tier 2				
POT CL MICRO TAB 10MEQ CR	POTASSIUM CHLORIDE MICROENCAPSULATED CRYST ER TAB 10 MEQ	Tier 2				
POT CL MICRO TAB 10MEQ ER	POTASSIUM CHLORIDE MICROENCAPSULATED CRYST ER TAB 10 MEQ	Tier 2				
POT CL MICRO TAB 15MEQ ER	POTASSIUM CHLORIDE MICROENCAPSULATED CRYST ER TAB 15 MEQ	Tier 2				
POT CL MICRO TAB 20MEQ ER	POTASSIUM CHLORIDE MICROENCAPSULATED CRYST ER TAB 20 MEQ	Tier 2				
PPA/MMA POW EXPRESS	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3	X			
PRENA 1 TRUE MIS	*PRENAT W/O A W/FE CHEL-FA TAB 30-1.4 MG & DHA CAP 300MG PK*	Tier 4				
PRENA1 CHW	*PRENAT W/ B2-B6-B12-D3-FOLIC ACID CHEW TAB 1.4 MG**	Tier 4				
PRISMASOL SOL 0/0/1.2	*BICARB 32 MEQ/L SOLN WITH MG 1.2 MEQ/L (CRRT)***	Tier 4				
PRISMASOL SOL 0/2.5	*BICARB 32 MEQ/L-DEXT SOLN WITH CA 2.5 MEQ/L (CRRT)***	Tier 4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PRISMASOL SOL 2/0	*BICARB 32 MEQ/L-DEXT SOLN WITH K 2 MEQ/L (CRRT)***	Tier 4				
PRISMASOL SOL 2/3.5	*BICARB 32 MEQ/L-DEXT SOLN WITH K-CA 2-3.5 MEQ/L (CRRT)**	Tier 4				
PRISMASOL SOL 4/0/1.2	*BICARB 32 MEQ/L-DEXT SOLN WITH K-MG 4-1.2 MEQ/L (CRRT)**	Tier 4				
PRISMASOL SOL 4/2.5	*BICARB 32 MEQ/L-DEXT SOLN WITH K-CA 4-2.5 MEQ/L (CRRT)**	Tier 4				
PRISMASOL SOL B22GK4/0	*BICARB 22 MEQ/L-DEXT SOLN WITH K 4 MEQ/L (CRRT)***	Tier 4				
PRO-STAT LIQ FIBER	*AMINO ACIDS-PROTEIN HYDROLYSATE LIQUID***	Tier 4				
PROMOTE 1.0 LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
PROMOTE 1.0 LIQ W/ FIBER	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
PROSOURCE LIQ PLUS	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4	X			
PROSOURCE LIQ PLUS	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
PROSOURCE LIQ ZAC	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
PROTALITY LIQ CHOCOLAT	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4	X			
PROTALITY LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4	X			
PROTEINEX LIQ	*AMINO ACIDS-PROTEIN HYDROLYSATE LIQUID***	Tier 3				
PROTEINEX LIQ COC PINE	*AMINO ACIDS-PROTEIN HYDROLYSATE LIQUID***	Tier 4				
PROTEINEX LIQ P18	*AMINO ACIDS-PROTEIN HYDROLYSATE LIQUID***	Tier 3				
PROTEINEX-18 LIQ LEM/LIME	*AMINO ACIDS-PROTEIN HYDROLYSATE LIQUID***	Tier 3				
PULMOCARE LIQ 1.5 VAN	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
PUSH 20+ ADV LIQ APPLE	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
PUSH 20+ ADV LIQ BLK CHRY	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
PUSH 20+ ADV LIQ ORANGE	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
RENAL SUPPRT LIQ 1.8	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4	X			
S.O.S. 20 POW	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3				
S.O.S. 25 POW	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3				
SERACAL POW	*NUTRITIONAL SUPPLEMENT PACK**	Tier 4	X			
SOD CHLORIDE GRA	SODIUM CHLORIDE GRANULES	Tier 4				
SOD CITRATE SOL CITR ACID	SODIUM CITRATE & CITRIC ACID SOLN 500-334 MG/5ML	Tier 2				
SOD FLUORIDE CHW 0.25MG F	SODIUM FLUORIDE CHEW TAB 0.25 MG F (FROM 0.55 MG NAF)	Tier 1				
SOD FLUORIDE CHW 0.5MG F	SODIUM FLUORIDE CHEW TAB 0.5 MG F (FROM 1.1 MG NAF)	Tier 1				
SOD FLUORIDE CHW 1MG F	SODIUM FLUORIDE CHEW TAB 1 MG F (FROM 2.2 MG NAF)	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
SOD FLUORIDE DRO 0.5MG/ML	SODIUM FLUORIDE SOLN 0.5 MG/ML F (FROM 1.1 MG/ML NAF)	Tier 2				
SOD FLUORIDE TAB 0.5MG F	SODIUM FLUORIDE TAB 0.5 MG F (FROM 1.1 MG NAF)	Tier 1				
SOD FLUORIDE TAB 1MG F	SODIUM FLUORIDE TAB 1 MG F (FROM 2.2 MG NAF)	Tier 1				
TAURINE CAP 500MG	TAURINE CAP 500 MG	Tier 3				
TRI-VIT/FLUO DRO 0.25MG	*PEDIATRIC VITAMINS ACD W/ FLUORIDE SOLN 0.25 MG/ML***	Tier 2				
TRI-VIT/FLUO DRO 0.5MG	*PEDIATRIC VITAMINS ACD W/ FLUORIDE SOLN 0.5 MG/ML***	Tier 2				
TRICITRATES SOL	POT & SOD CITRATES W/ CIT AC SOLN 550-500-334 MG/5ML	Tier 2				
TYLACTIN POW RESTOR5	*NUTRITIONAL SUPPLEMENT PACK**	Tier 4				
TYLACTIN RTD LIQ 15 CHOC	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4	X			
TYR COOLER LIQ RED	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
TYR GEL PAK UNFLAVOR	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3	X			
TYROSINE PAK 1000MG	TYROSINE ORAL POWDER PACKET 1000 MG	Tier 3	X			
UROCIT-K 10 TAB	POTASSIUM CITRATE TAB ER 10 MEQ (1080 MG)	Tier 5				
UROCIT-K 15 TAB	POTASSIUM CITRATE TAB ER 15 MEQ (1620 MG)	Tier 5				
UROCIT-K 5 TAB	POTASSIUM CITRATE TAB ER 5 MEQ (540 MG)	Tier 5				
VITAL 1.0 LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
VITAL 1.5 CA LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
VITAL AF 1.2 LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
VITAL HP LIQ 1.0 CAL	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4				
VITAL PEPTID LIQ 1.5 VAN	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 4	X			
VITAMIN C TAB 500MG	ASCORBIC ACID TAB 500 MG	Tier 2				
VITAMIN D CAP 125MCG	CHOLECALCIFEROL CAP 125 MCG (5000 UNIT)	Tier 2				
VITATRUE MIS	*PRENAT W/O A W/FE CHEL-FA TAB 30-1.4 MG & DHA CAP 300MG PK*	Tier 4				
VIVONEX POW PEDIATRI	*NUTRITIONAL SUPPLEMENT PACK**	Tier 4				
VIVONEX PLUS POW	*NUTRITIONAL SUPPLEMENT PACK**	Tier 4				
WES-PHOS 250 TAB NEUTRAL	POT PHOS MONOBASIC W/SOD PHOS DI & MONOBAS TAB 155-852-130MG	Tier 2				
Electrolyte/Mineral/Metal Modifiers						
CHEMET CAP 100MG	SUCCIMER CAP 100 MG	Tier 3				
DEFERASIROX GRA 180MG	DEFERASIROX GRANULES PACKET 180 MG	Tier 4	X			X
DEFERASIROX GRA 360MG	DEFERASIROX GRANULES PACKET 360 MG	Tier 4	X			X
DEFERASIROX GRA 90MG	DEFERASIROX GRANULES PACKET 90 MG	Tier 4	X			X
DEFERASIROX TAB 125MG	DEFERASIROX TAB FOR ORAL SUSP 125 MG	Tier 4	X			X
DEFERASIROX TAB 180MG	DEFERASIROX TAB 180 MG	Tier 4	X			X
DEFERASIROX TAB 250MG	DEFERASIROX TAB FOR ORAL SUSP 250 MG	Tier 4	X			X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
DEFERASIROX TAB 360MG	DEFERASIROX TAB 360 MG	Tier 4	X			X
DEFERASIROX TAB 500MG	DEFERASIROX TAB FOR ORAL SUSP 500 MG	Tier 4	X			X
DEFERASIROX TAB 90MG	DEFERASIROX TAB 90 MG	Tier 4	X			X
DEFERIPRONE TAB 1000MG	DEFERIPRONE TAB 1000 MG	Tier 5	X			
DEFERIPRONE TAB 500MG	DEFERIPRONE TAB 500 MG	Tier 4	X			X
LOKELMA PAK 10GM	SODIUM ZIRCONIUM CYCLOSILICATE FOR SUSP PACKET 10 GM	Tier 4	X	X		
LOKELMA PAK 5GM	SODIUM ZIRCONIUM CYCLOSILICATE FOR SUSP PACKET 5 GM	Tier 4	X	X		
SOD POLY SUL POW	*SODIUM POLYSTYRENE SULFONATE POWDER**	Tier 2				
SPS SUS 15GM/60	SODIUM POLYSTYRENE SULFONATE SUSP 15 GM/60ML	Tier 4				
SPS SUS 30GM/120	SODIUM POLYSTYRENE SULFONATE RECTAL SUSP 30 GM/120ML	Tier 4				
TOLVAPTAN PAK 15MG	TOLVAPTAN TAB THERAPY PACK 15 MG	Tier 4	X	X		X
TOLVAPTAN PAK 30-15MG	TOLVAPTAN TAB THERAPY PACK 30 & 15 MG	Tier 4	X	X		
TOLVAPTAN PAK 45-15MG	TOLVAPTAN TAB THERAPY PACK 45 & 15 MG	Tier 4	X	X		X
TOLVAPTAN PAK 60-30MG	TOLVAPTAN TAB THERAPY PACK 60 & 30 MG	Tier 4	X	X		X
TOLVAPTAN PAK 90-30MG	TOLVAPTAN TAB THERAPY PACK 90 & 30 MG	Tier 4	X	X		X
TOLVAPTAN TAB 15MG	TOLVAPTAN TAB 15 MG	Tier 4	X			X
TOLVAPTAN TAB 30MG	TOLVAPTAN TAB 30 MG	Tier 4	X	X		X
TOLVAPTAN TAB 30MG	TOLVAPTAN TAB 30 MG	Tier 4	X			X
TRIENTINE CAP 500MG	TRIENTINE HCL CAP 500 MG	Tier 5	X			
VELTASSA POW 16.8GM	PATIROMER SORBITE X CALCIUM FOR SUSP PACKET 16.8 GM (BASE EQ)	Tier 4	X	X		
VELTASSA POW 1GM	PATIROMER SORBITE X CALCIUM FOR SUSP PACKET 1 GM (BASE EQ)	Tier 4	X	X		
VELTASSA POW 25.2GM	PATIROMER SORBITE X CALCIUM FOR SUSP PACKET 25.2 GM (BASE EQ)	Tier 4	X	X		
VELTASSA POW 8.4GM	PATIROMER SORBITE X CALCIUM FOR SUSP PACKET 8.4 GM (BASE EQ)	Tier 4	X	X		
Emetogenic Therapy Adjuncts - Nausea and Vomiting Drugs						
ANZEMET TAB 50MG	DOLASETRON MESYLATE TAB 50 MG	Tier 5		X		
APREPITANT CAP 125MG	APREPITANT CAPSULE 125 MG	Tier 3		X		
APREPITANT CAP 40MG	APREPITANT CAPSULE 40 MG	Tier 3		X		
APREPITANT CAP 80MG	APREPITANT CAPSULE 80 MG	Tier 3		X		
APREPITANT PAK 125 & 80	APREPITANT CAPSULE THERAPY PACK 80 & 125 MG	Tier 3		X		
DRONABINOL CAP 10MG	DRONABINOL CAP 10 MG	Tier 2				
DRONABINOL CAP 2.5MG	DRONABINOL CAP 2.5 MG	Tier 2				
DRONABINOL CAP 5MG	DRONABINOL CAP 5 MG	Tier 2				
EMEND SUS 125MG	APREPITANT FOR ORAL SUSP 125 MG (125 MG/5ML)	Tier 3		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
GRANISETRON TAB 1MG	GRANISETRON HCL TAB 1 MG	Tier 3				
ONDANSETRON SOL 4MG/5ML	ONDANSETRON HCL ORAL SOLN 4 MG/5ML	Tier 2				
ONDANSETRON TAB 24MG	ONDANSETRON HCL TAB 24 MG	Tier 2				
ONDANSETRON TAB 4MG	ONDANSETRON HCL TAB 4 MG	Tier 2				
ONDANSETRON TAB 4MG ODT	ONDANSETRON ORALLY DISINTEGRATING TAB 4 MG	Tier 2				
ONDANSETRON TAB 8MG	ONDANSETRON HCL TAB 8 MG	Tier 2				
ONDANSETRON TAB 8MG ODT	ONDANSETRON ORALLY DISINTEGRATING TAB 8 MG	Tier 2				
SYNDROS SOL 5MG/ML	DRONABINOL SOLN 5 MG/ML	Tier 5	X	X		
Enzyme Inhibitors - Chemotherapy Agents						
ETOPOSIDE CAP 50MG	ETOPOSIDE CAP 50 MG	Tier 2				X
HYCAMTIN CAP 0.25MG	TOPOTECAN HCL CAP 0.25 MG (BASE EQUIV)	Tier 4	X	X		X
HYCAMTIN CAP 1MG	TOPOTECAN HCL CAP 1 MG (BASE EQUIV)	Tier 4	X	X		X
LYTGOBI TAB 4MG	FUTIBATINIB TAB THERAPY PACK 4 MG (12 MG DAILY DOSE)	Tier 5	X	X		X
LYTGOBI TAB 4MG	FUTIBATINIB TAB THERAPY PACK 4 MG (16 MG DAILY DOSE)	Tier 5	X	X		X
LYTGOBI TAB 4MG	FUTIBATINIB TAB THERAPY PACK 4 MG (20 MG DAILY DOSE)	Tier 5	X	X		X
PEMAZYRE TAB 13.5MG	PEMIGATINIB TAB 13.5 MG	Tier 5	X	X		X
PEMAZYRE TAB 4.5MG	PEMIGATINIB TAB 4.5 MG	Tier 5	X	X		X
PEMAZYRE TAB 9MG	PEMIGATINIB TAB 9 MG	Tier 5	X	X		X
ZYDELIG TAB 150MG	IDELALISIB TAB 150 MG	Tier 5	X	X		X
Enzyme Replacements/Modifiers - Enzyme Replacements/Modifying Drugs						
EVRYSDI SOL	RISDIPLAM FOR SOLN 0.75 MG/ML	Tier 4	X	X		X
EVRYSDI TAB 5MG	RISDIPLAM TAB 5 MG	Tier 4	X	X		X
Ergot Alkaloids - Migraine Drugs						
DIHYDROERGOT CRY MESYLATE	DIHYDROERGOTAMINE MESYLATE CRYSTALS	Tier 4				
DIHYDROERGOT INJ 1MG/ML	DIHYDROERGOTAMINE MESYLATE INJ 1 MG/ML	Tier 2				
ERGOT/CAFFEN TAB 1-100MG	ERGOTAMINE W/ CAFFEINE TAB 1-100 MG	Tier 4				
MIGERGOT SUP 2/100	ERGOTAMINE W/ CAFFEINE SUPPOS 2-100 MG	Tier 4				
Estrogens - Hormone Replacement/Modifying Drugs						
ABIGALE TAB 1-0.5MG	ESTRADIOL & NORETHINDRONE ACETATE TAB 1-0.5 MG	Tier 2				
ABIGALE LO TAB 0.5-0.1	ESTRADIOL & NORETHINDRONE ACETATE TAB 0.5-0.1 MG	Tier 3				
ACTIVELLA TAB 1-0.5MG	ESTRADIOL & NORETHINDRONE ACETATE TAB 1-0.5 MG	Tier 5				
AFIRMELLE TAB 0.1-0.02	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG	Tier 1				
ALORA DIS 0.025MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.025 MG/24HR	Tier 4		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ALORA DIS 0.075MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.075 MG/24HR	Tier 4		X		
ALORA DIS 0.1MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.1 MG/24HR	Tier 4		X		
ALTAVERA TAB	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	Tier 1				
ALYACEN TAB 1/35	NORETHINDRONE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG	Tier 1				
ALYACEN TAB 7/7/7	NORETHINDRONE-ETH ESTRADIOL TAB 0.5-35/0.75-35/1-35 MG-MCG	Tier 1				
AMABELZ TAB 0.5-0.1	ESTRADIOL & NORETHINDRONE ACETATE TAB 0.5-0.1 MG	Tier 3				
AMABELZ TAB 1-0.5MG	ESTRADIOL & NORETHINDRONE ACETATE TAB 1-0.5 MG	Tier 2				
AMETHIA TAB	LEVONORG-ETH EST TAB 0.15-0.03MG(84) & ETH EST TAB 0.01MG(7)	Tier 1				
AMETHYST TAB 90-20MCG	LEVONORGESTREL-ETHINYL ESTRADIOL (CONTINUOUS) TAB 90-20 MCG	Tier 1				
ANGELIQ TAB 0.25-0.5	DROSPIRENONE-ESTRADIOL TAB 0.25-0.5 MG	Tier 4				
ANGELIQ TAB 0.5-1MG	DROSPIRENONE-ESTRADIOL TAB 0.5-1 MG	Tier 4				
ANNOVERA MIS	SEGESTERONE ACE-ETHINYL ESTRADIOL VA RING 0.15-0.013 MG/24HR	Tier 4		X		
APRI TAB	DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	Tier 1				
ARANELLE TAB	NORETHINDRONE-ETH ESTRADIOL TAB 0.5-35/1-35/0.5-35 MG-MCG	Tier 1				
ASHLYNA TAB	LEVONORG-ETH EST TAB 0.15-0.03MG(84) & ETH EST TAB 0.01MG(7)	Tier 1				
AUBRA EQ TAB 0.1-0.02	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG	Tier 1				
AUROVELA TAB 1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG	Tier 1				
AUROVELA TAB 1/20	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1 MG-20 MCG	Tier 1				
AUROVELA 24 TAB FE 1/20	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24)	Tier 1				
AUROVELA FE TAB 1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	Tier 1				
AUROVELA FE TAB 1/20	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	Tier 1				
AVIANE TAB	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG	Tier 1				
AYUNA TAB	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	Tier 1				
AZURETTE TAB	DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5)	Tier 1				
BALZIVA TAB	NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.4 MG-35 MCG	Tier 1				
BIJUVA CAP 0.5-100	ESTRADIOL-PROGESTERONE CAP 0.5-100 MG	Tier 4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
BIJUVA CAP 1-100MG	ESTRADIOL-PROGESTERONE CAP 1-100 MG	Tier 4				
BLISOVI 24 TAB FE 1/20	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24)	Tier 1				
BLISOVI FE TAB 1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	Tier 1				
BLISOVI FE TAB 1/20	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	Tier 1				
BRIELLYN TAB	NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.4 MG-35 MCG	Tier 1				
CAMRESE TAB	LEVONORG-ETH EST TAB 0.15-0.03MG(84) & ETH EST TAB 0.01MG(7)	Tier 1				
CAMRESE LO TAB	LEVONORG-ETH EST TAB 0.1-0.02MG(84) & ETH EST TAB 0.01MG(7)	Tier 1				
CHARLOTTE 24 CHW FE 1/20	NORETHINDRONE ACE-ETH ESTRADIOL-FE CHEW TAB 1 MG-20 MCG (24)	Tier 1				
CHATEAL EQ TAB 0.15/30	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	Tier 1				
CLIMARA PRO DIS WEEKLY	ESTRADIOL-LEVONORGESTREL TD PATCH WEEKLY 0.045-0.015 MG/DAY	Tier 4		X		
COMBIPATCH DIS	ESTRADIOL-NORETHINDRONE ACE TD PTTW 0.05-0.14 MG/DAY	Tier 4		X		
COMBIPATCH DIS	ESTRADIOL-NORETHINDRONE ACE TD PTTW 0.05-0.25 MG/DAY	Tier 4		X		
CONJ ESTROGN TAB 0.3MG	ESTROGENS, CONJUGATED TAB 0.3 MG	Tier 5				
CONJ ESTROGN TAB 0.45MG	ESTROGENS, CONJUGATED TAB 0.45 MG	Tier 5				
CONJ ESTROGN TAB 0.625MG	ESTROGENS, CONJUGATED TAB 0.625 MG	Tier 5				
CONJ ESTROGN TAB 0.9MG	ESTROGENS, CONJUGATED TAB 0.9 MG	Tier 5				
CONJ ESTROGN TAB 1.25MG	ESTROGENS, CONJUGATED TAB 1.25 MG	Tier 5				
COVARYX TAB 1.25-2.5	ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 1.25-2.5 MG	Tier 3				
COVARYX HS TAB	ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 0.625-1.25 MG	Tier 4				
CRYSSELLE-28 TAB 28 TABS	NORGESTREL & ETHINYL ESTRADIOL TAB 0.3 MG-30 MCG	Tier 1				
CYRED EQ TAB	DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	Tier 1				
DASETTA TAB 1/35	NORETHINDRONE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG	Tier 1				
DASETTA TAB 7/7/7	NORETHINDRONE-ETH ESTRADIOL TAB 0.5-35/0.75-35/1-35 MG-MCG	Tier 1				
DAYSEE TAB	LEVONORG-ETH EST TAB 0.15-0.03MG(84) & ETH EST TAB 0.01MG(7)	Tier 1				
DELESTROGEN INJ 10MG/ML	ESTRADIOL VALERATE IM IN OIL 10 MG/ML	Tier 5				
DELESTROGEN INJ 20MG/ML	ESTRADIOL VALERATE IM IN OIL 20 MG/ML	Tier 5				
DELESTROGEN INJ 40MG/ML	ESTRADIOL VALERATE IM IN OIL 40 MG/ML	Tier 5				
DELYLA TAB 0.1-0.02	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
DEPO-ESTRADI INJ 5MG/ML	ESTRADIOL CYPIONATE IM IN OIL 5 MG/ML	Tier 4				
DESO/ETHINYL TAB ESTRADIO	DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5)	Tier 1				
DIVIGEL GEL 0.25MG	ESTRADIOL TD GEL 0.25 MG/0.25GM (0.1%)	Tier 4				
DIVIGEL GEL 0.5MG	ESTRADIOL TD GEL 0.5 MG/0.5GM (0.1%)	Tier 4				
DIVIGEL GEL 0.75MG	ESTRADIOL TD GEL 0.75 MG/0.75GM (0.1%)	Tier 4				
DIVIGEL GEL 1.25MG	ESTRADIOL TD GEL 1.25 MG/1.25GM (0.1%)	Tier 4				
DIVIGEL GEL 1MG/GM	ESTRADIOL TD GEL 1 MG/GM (0.1%)	Tier 4				
DOLISHALE TAB 90-20MCG	LEVONORGESTREL-ETHINYL ESTRADIOL (CONTINUOUS) TAB 90-20 MCG	Tier 1				
DOTTI DIS 0.025MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.025 MG/24HR	Tier 3		X		
DOTTI DIS 0.0375MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.0375 MG/24HR	Tier 3		X		
DOTTI DIS 0.05MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.05 MG/24HR	Tier 3		X		
DOTTI DIS 0.075MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.075 MG/24HR	Tier 3		X		
DOTTI DIS 0.1MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.1 MG/24HR	Tier 3		X		
DROS/ETH EST TAB LEVOMEFO	DROSPIRENONE-ETHINYL ESTRAD-LEVOMEFOLATE TAB 3-0.03-0.451 MG	Tier 1				
DUAVEE TAB 0.45-20	CONJUGATED ESTROGENS-BAZEDOXIFENE TAB 0.45-20 MG	Tier 5		X		
EEMT TAB 1.25-2.5	ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 1.25-2.5 MG	Tier 3				
EEMT HS TAB	ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 0.625-1.25 MG	Tier 4				
ELESTRIN GEL 0.06%	ESTRADIOL GEL 0.06% (0.52 MG/0.87 GM METERED-DOSE PUMP)	Tier 4				
ELINEST TAB	NORGESTREL & ETHINYL ESTRADIOL TAB 0.3 MG-30 MCG	Tier 1				
ELURYNG MIS	ETONOGESTREL-ETHINYL ESTRADIOL VA RING 0.12-0.015 MG/24HR	Tier 1				
ENILLORING MIS	ETONOGESTREL-ETHINYL ESTRADIOL VA RING 0.12-0.015 MG/24HR	Tier 1				
ENPRESSE-28 TAB	LEVONORGESTREL-ETH ESTRA TAB 0.05-30/0.075-40/0.125-30MG-MCG	Tier 1				
ENSKYCE TAB	DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	Tier 1				
EST ESTROGEN TAB MTEST HS	ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 0.625-1.25 MG	Tier 2				
ESTARYLLA TAB 0.25-35	NORGESTIMATE & ETHINYL ESTRADIOL TAB 0.25 MG-35 MCG	Tier 1				
ESTRA/NORETH TAB 0.5-0.1	ESTRADIOL & NORETHINDRONE ACETATE TAB 0.5-0.1 MG	Tier 3				
ESTRA/NORETH TAB 1-0.5MG	ESTRADIOL & NORETHINDRONE ACETATE TAB 1-0.5 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ESTRAD VAL INJ 10MG/ML	ESTRADIOL VALERATE IM IN OIL 10 MG/ML	Tier 2				
ESTRAD VAL INJ 20MG/ML	ESTRADIOL VALERATE IM IN OIL 20 MG/ML	Tier 2				
ESTRAD VAL INJ 40MG/ML	ESTRADIOL VALERATE IM IN OIL 40 MG/ML	Tier 2				
ESTRADIOL CRE 0.01%	ESTRADIOL VAGINAL CREAM 0.01%	Tier 5				
ESTRADIOL DIS 0.025MG	ESTRADIOL TD PATCH WEEKLY 0.025 MG/24HR	Tier 2		X		
ESTRADIOL DIS 0.025MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.025 MG/24HR	Tier 3		X		
ESTRADIOL DIS 0.0375MG	ESTRADIOL TD PATCH WEEKLY 0.0375 MG/24HR (37.5 MCG/24HR)	Tier 2		X		
ESTRADIOL DIS 0.0375MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.0375 MG/24HR	Tier 3		X		
ESTRADIOL DIS 0.05MG	ESTRADIOL TD PATCH WEEKLY 0.05 MG/24HR	Tier 2		X		
ESTRADIOL DIS 0.05MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.05 MG/24HR	Tier 3		X		
ESTRADIOL DIS 0.06MG	ESTRADIOL TD PATCH WEEKLY 0.06 MG/24HR	Tier 2		X		
ESTRADIOL DIS 0.075MG	ESTRADIOL TD PATCH WEEKLY 0.075 MG/24HR	Tier 2		X		
ESTRADIOL DIS 0.075MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.075 MG/24HR	Tier 3		X		
ESTRADIOL DIS 0.1MG	ESTRADIOL TD PATCH WEEKLY 0.1 MG/24HR	Tier 2		X		
ESTRADIOL DIS 0.1MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.1 MG/24HR	Tier 3		X		
ESTRADIOL GEL 0.06%	ESTRADIOL GEL 0.06% (0.75 MG/1.25 GM METERED-DOSE PUMP)	Tier 4		X		
ESTRADIOL GEL 0.25MG	ESTRADIOL TD GEL 0.25 MG/0.25GM (0.1%)	Tier 4				
ESTRADIOL GEL 0.5MG	ESTRADIOL TD GEL 0.5 MG/0.5GM (0.1%)	Tier 4				
ESTRADIOL GEL 0.75MG	ESTRADIOL TD GEL 0.75 MG/0.75GM (0.1%)	Tier 4				
ESTRADIOL GEL 1.25MG	ESTRADIOL TD GEL 1.25 MG/1.25GM (0.1%)	Tier 4				
ESTRADIOL GEL 1MG/GM	ESTRADIOL TD GEL 1 MG/GM (0.1%)	Tier 4				
ESTRADIOL TAB 0.5MG	ESTRADIOL TAB 0.5 MG	Tier 2				
ESTRADIOL TAB 10MCG	ESTRADIOL VAGINAL TAB 10 MCG	Tier 3				
ESTRADIOL TAB 1MG	ESTRADIOL TAB 1 MG	Tier 2				
ESTRADIOL TAB 2MG	ESTRADIOL TAB 2 MG	Tier 2				
ESTRATEST FS TAB 1.25-2.5	ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 1.25-2.5 MG	Tier 2				
ESTRATEST HS TAB	ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 0.625-1.25 MG	Tier 4				
ESTRING MIS 7.5/24HR	ESTRADIOL VAGINAL RING 2 MG (7.5 MCG/24HRS)	Tier 3		X		
ESTROG/MTEST TAB 1.25-2.5	ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 1.25-2.5 MG	Tier 2				
ESTROGEL GEL 0.06%	ESTRADIOL GEL 0.06% (0.75 MG/1.25 GM METERED-DOSE PUMP)	Tier 4		X		
ETHY ETH EST TAB 1-35	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ETHYNODIOL TAB 1-50	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-50 MCG	Tier 1				
ETONOGESTREL MIS ETHY EST	ETONOGESTREL-ETHINYL ESTRADIOL VA RING 0.12-0.015 MG/24HR	Tier 1				
EVAMIST SPR 1.53MG	ESTRADIOL TRANSDERMAL SPRAY 1.53 MG/SPRAY	Tier 3				
FALMINA TAB	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG	Tier 1				
FEIRZA TAB 1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	Tier 1				
FEIRZA TAB 1/20	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	Tier 1				
FEMRING MIS 0.05/24H	ESTRADIOL ACETATE VAGINAL RING 0.05 MG/24HR	Tier 5		X		
FEMRING MIS 0.1MG/24	ESTRADIOL ACETATE VAGINAL RING 0.1 MG/24HR	Tier 5		X		
FINZALA CHW FE 1/20	NORETHINDRONE ACE-ETH ESTRADIOL-FE CHEW TAB 1 MG-20 MCG (24)	Tier 1				
FYAVOLV TAB 0.5-2.5	NORETHINDRONE ACETATE-ETHINYL ESTRADIOL TAB 0.5 MG-2.5 MCG	Tier 2				
FYAVOLV TAB 1-5	NORETHINDRONE ACETATE-ETHINYL ESTRADIOL TAB 1 MG-5 MCG	Tier 2				
GALBRIELA CHW	NORETHINDRONE & ETHINYL ESTRADIOL-FE CHEW TAB 0.8 MG-25 MCG	Tier 1				
HAILEY TAB 1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG	Tier 1				
HAILEY 24 TAB FE	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24)	Tier 1				
HAILEY FE TAB 1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	Tier 1				
HAILEY FE TAB 1/20	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	Tier 1				
HALOETTE MIS	ETONOGESTREL-ETHINYL ESTRADIOL VA RING 0.12-0.015 MG/24HR	Tier 1				
ICLEVIA TAB	LEVONORGESTREL & ETHINYL ESTRADIOL (91-DAY) TAB 0.15-0.03 MG	Tier 1				
IMVEXXY MAIN SUP 10MCG	ESTRADIOL VAGINAL INSERT 10 MCG	Tier 3		X		
IMVEXXY MAIN SUP 4MCG	ESTRADIOL VAGINAL INSERT 4 MCG	Tier 3		X		
IMVEXXY STRT SUP 10MCG	ESTRADIOL VAGINAL INSERT STARTER PACK 10 MCG	Tier 3		X		
IMVEXXY STRT SUP 4MCG	ESTRADIOL VAGINAL INSERT STARTER PACK 4 MCG	Tier 3		X		
INTROVALE TAB	LEVONORGESTREL & ETHINYL ESTRADIOL (91-DAY) TAB 0.15-0.03 MG	Tier 1				
ISIBLOOM TAB	DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	Tier 1				
JAIMIESS TAB	LEVONORG-ETH EST TAB 0.15-0.03MG(84) & ETH EST TAB 0.01MG(7)	Tier 1				
JINTELI TAB 1MG-5MCG	NORETHINDRONE ACETATE-ETHINYL ESTRADIOL TAB 1 MG-5 MCG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
JOLESSA TAB	LEVONORGESTREL & ETHINYL ESTRADIOL (91-DAY) TAB 0.15-0.03 MG	Tier 1				
JOYEUX TAB 0.1-20	LEVONORGESTREL-ETHINYL ESTRADIOL-FE TAB 0.1 MG-20 MCG (21)	Tier 1				
JULEBER TAB	DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	Tier 1				
JUNEL 1.5/30 TAB	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG	Tier 1				
JUNEL 1/20 TAB	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1 MG-20 MCG	Tier 1				
JUNEL FE TAB 1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	Tier 1				
JUNEL FE TAB 1/20	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	Tier 1				
JUNEL FE 24 TAB 1/20	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24)	Tier 1				
KAITLIB FE CHW	NORETHINDRONE & ETHINYL ESTRADIOL-FE CHEW TAB 0.8 MG-25 MCG	Tier 1				
KALLIGA TAB	DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	Tier 1				
KARIVA TAB 28 DAY	DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5)	Tier 1				
KELNOR TAB 1/35	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG	Tier 1				
KELNOR 1/50 TAB	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-50 MCG	Tier 1				
KURVELO TAB 0.15/30	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	Tier 1				
LARIN TAB 1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG	Tier 1				
LARIN TAB 1/20	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1 MG-20 MCG	Tier 1				
LARIN 24 TAB FE 1/20	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24)	Tier 1				
LARIN FE TAB 1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	Tier 1				
LARIN FE TAB 1/20	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	Tier 1				
LAYOLIS FE CHW	NORETHINDRONE & ETHINYL ESTRADIOL-FE CHEW TAB 0.8 MG-25 MCG	Tier 1				
LEENA TAB	NORETHINDRONE-ETH ESTRADIOL TAB 0.5-35/1-35/0.5-35 MG-MCG	Tier 1				
LESSINA TAB	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG	Tier 1				
LEVO-ETH EST TAB 90-20MCG	LEVONORGESTREL-ETHINYL ESTRADIOL (CONTINUOUS) TAB 90-20 MCG	Tier 1				
LEVONEST TAB	LEVONORGESTREL-ETH ESTRA TAB 0.05-30/0.075-40/0.125-30MG-MCG	Tier 1				
LEVONOR/ETHI TAB	LEVONORGESTREL-ETH ESTRA TAB 0.05-30/0.075-40/0.125-30MG-MCG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
LEVONOR/ETHI TAB 0.1-0.02	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG	Tier 1				
LEVONOR/ETHI TAB 0.1-20	LEVONORGESTREL-ETHINYL ESTRADIOL-FE TAB 0.1 MG-20 MCG (21)	Tier 1				
LEVONOR/ETHI TAB ESTRADIO	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	Tier 1				
LEVONOR/ETHI TAB ESTRADIO	LEVONORGESTREL & ETHINYL ESTRADIOL (91-DAY) TAB 0.15-0.03 MG	Tier 1				
LEVONOR/ETHI TAB ESTRADIO	LEVONORG-ETH EST TAB 0.1-0.02MG(84) & ETH EST TAB 0.01MG(7)	Tier 1				
LEVONOR/ETHI TAB ESTRADIO	LEVONORG-ETH EST TAB 0.15-0.03MG(84) & ETH EST TAB 0.01MG(7)	Tier 1				
LEVONOR/ETHI TAB ESTRADIO	LEVONOR-ETH EST TAB 0.15-0.02/0.025/0.03 MG &ETH EST 0.01 MG	Tier 1				
LEVORA-28 TAB 0.15/30	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	Tier 1				
LO LOESTRIN TAB 1-10-10	NORETHIN-ETH ESTRADIOL-FE TAB 1 MG-10 MCG (24)/10 MCG (2)	Tier 1				
LOJAIMIESS TAB	LEVONORG-ETH EST TAB 0.1-0.02MG(84) & ETH EST TAB 0.01MG(7)	Tier 1				
LOW-OGESTREL TAB	NORGESTREL & ETHINYL ESTRADIOL TAB 0.3 MG-30 MCG	Tier 1				
LUIZZA TAB 1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG	Tier 1				
LUIZZA 1/20 TAB	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1 MG-20 MCG	Tier 1				
LUTERA TAB	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG	Tier 1				
LYLLANA DIS 0.025MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.025 MG/24HR	Tier 3		X		
LYLLANA DIS 0.0375MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.0375 MG/24HR	Tier 3		X		
LYLLANA DIS 0.05MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.05 MG/24HR	Tier 3		X		
LYLLANA DIS 0.075MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.075 MG/24HR	Tier 3		X		
LYLLANA DIS 0.1MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.1 MG/24HR	Tier 3		X		
MARLISSA TAB 0.15/30	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	Tier 1				
MENEST TAB 0.3MG	ESTERIFIED ESTROGENS TAB 0.3 MG	Tier 4				
MENEST TAB 0.625MG	ESTERIFIED ESTROGENS TAB 0.625 MG	Tier 4				
MENEST TAB 1.25MG	ESTERIFIED ESTROGENS TAB 1.25 MG	Tier 4				
MENEST TAB 2.5MG	ESTERIFIED ESTROGENS TAB 2.5 MG	Tier 4				
MENOSTAR DIS 14MCG	ESTRADIOL TD PATCH WEEKLY 14 MCG/24HR	Tier 4		X		
MIBELAS 24 CHW FE	NORETHINDRONE ACE-ETH ESTRADIOL-FE CHEW TAB 1 MG-20 MCG (24)	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
MICROGESTIN TAB 1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG	Tier 1				
MICROGESTIN TAB 1/20	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1 MG-20 MCG	Tier 1				
MICROGESTIN TAB FE 1/20	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	Tier 1				
MICROGESTIN TAB FE1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	Tier 1				
MILI TAB 0.25/35	NORGESTIMATE & ETHINYL ESTRADIOL TAB 0.25 MG-35 MCG	Tier 1				
MIMVEY TAB 1-0.5MG	ESTRADIOL & NORETHINDRONE ACETATE TAB 1-0.5 MG	Tier 2				
MINZOYA TAB 0.1-20	LEVONORGESTREL-ETHINYL ESTRADIOL-FE TAB 0.1 MG-20 MCG (21)	Tier 1				
MONO-LINYAH TAB 0.25-35	NORGESTIMATE & ETHINYL ESTRADIOL TAB 0.25 MG-35 MCG	Tier 1				
MYFEMBREE TAB	RELUGOLIX-ESTRADIOL-NORETHINDRONE ACETATE TAB 40-1-0.5 MG	Tier 3	X	X		
NATAZIA TAB	ESTRADIOL VALERATE-DIENOGEST TAB 3 MG /2-2 MG/2-3 MG/1 MG	Tier 2				
NECON TAB 0.5/35	NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.5 MG-35 MCG	Tier 1				
NOR/EST/FF TAB 1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	Tier 1				
NORE/ETH/FER CHW 0.4MG-35	NORETHINDRONE & ETHINYL ESTRADIOL-FE CHEW TAB 0.4 MG-35 MCG	Tier 1				
NORELGE/ETHI DIS 150/35	NORELGESTROMIN-ETHINYL ESTRADIOL TD PTWK 150-35 MCG/24HR	Tier 1				
NORETH/ETHIN CHW FE	NORETHINDRONE & ETHINYL ESTRADIOL-FE CHEW TAB 0.8 MG-25 MCG	Tier 1				
NORETH/ETHIN CHW FE 1/20	NORETHINDRONE ACE-ETH ESTRADIOL-FE CHEW TAB 1 MG-20 MCG (24)	Tier 1				
NORETH/ETHIN TAB 0.5-2.5	NORETHINDRONE ACETATE-ETHINYL ESTRADIOL TAB 0.5 MG-2.5 MCG	Tier 2				
NORETH/ETHIN TAB 1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG	Tier 1				
NORETH/ETHIN TAB 1/20	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1 MG-20 MCG	Tier 1				
NORETH/ETHIN TAB 1MG-5MCG	NORETHINDRONE ACETATE-ETHINYL ESTRADIOL TAB 1 MG-5 MCG	Tier 2				
NORETH/ETHIN TAB FE	NORETHINDRONE AC-ETHINYL ESTRAD-FE TAB 1-20/1-30/1-35 MG-MCG	Tier 1				
NORETH/ETHIN TAB FE 1/20	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	Tier 1				
NORGEST/ETHI TAB 0.25/35	NORGESTIMATE & ETHINYL ESTRADIOL TAB 0.25 MG-35 MCG	Tier 1				
NORGEST/ETHI TAB ESTRADIO	NORGESTIMATE-ETH ESTRAD TAB 0.18-25/0.215-25/0.25-25 MG-MCG	Tier 3				
NORGEST/ETHI TAB ESTRADIO	NORGESTIMATE-ETH ESTRAD TAB 0.18-35/0.215-35/0.25-35 MG-MCG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
NORTREL TAB 0.5/35	NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.5 MG-35 MCG	Tier 1				
NORTREL TAB 1/35	NORETHINDRONE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG	Tier 1				
NORTREL TAB 7/7/7	NORETHINDRONE-ETH ESTRADIOL TAB 0.5-35/0.75-35/1-35 MG-MCG	Tier 1				
NYLIA TAB 1/35	NORETHINDRONE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG	Tier 1				
NYLIA TAB 7/7/7	NORETHINDRONE-ETH ESTRADIOL TAB 0.5-35/0.75-35/1-35 MG-MCG	Tier 1				
PHILITH TAB 0.4-35	NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.4 MG-35 MCG	Tier 1				
PIMTREA TAB	DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5)	Tier 1				
PORTIA-28 TAB	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	Tier 1				
PREMARIN TAB 0.3MG	ESTROGENS, CONJUGATED TAB 0.3 MG	Tier 5				
PREMARIN TAB 0.45MG	ESTROGENS, CONJUGATED TAB 0.45 MG	Tier 5				
PREMARIN TAB 0.625MG	ESTROGENS, CONJUGATED TAB 0.625 MG	Tier 5				
PREMARIN TAB 0.9MG	ESTROGENS, CONJUGATED TAB 0.9 MG	Tier 5				
PREMARIN TAB 1.25MG	ESTROGENS, CONJUGATED TAB 1.25 MG	Tier 5				
PREMARIN VAG CRE 0.625MG	ESTROGENS, CONJUGATED VAGINAL CREAM 0.625 MG/GM	Tier 4				
PREMPHASE TAB	CONJ EST 0.625(14)/CONJ EST-MEDROXYPRO AC TAB 0.625-5MG(14)	Tier 4				
PREMPRO TAB	CONJUGATED ESTROGEN-MEDROXYPROGEST ACETATE TAB 0.625-2.5 MG	Tier 5				
PREMPRO TAB 0.3-1.5	CONJUGATED ESTROGEN-MEDROXYPROGEST ACETATE TAB 0.3-1.5 MG	Tier 5				
PREMPRO TAB 0.45-1.5	CONJUGATED ESTROGEN-MEDROXYPROGEST ACETATE TAB 0.45-1.5 MG	Tier 5				
PREMPRO TAB 0.625-5	CONJUGATED ESTROGEN-MEDROXYPROGEST ACETATE TAB 0.625-5 MG	Tier 5				
RECLIPSEN TAB	DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	Tier 1				
RIVELSA TAB	LEVONOR-ETH EST TAB 0.15-0.02/0.025/0.03 MG & ETH EST 0.01 MG	Tier 1				
ROSYRAH TAB	LEVONOR-ETH EST TAB 0.15-0.02/0.025/0.03 MG & ETH EST 0.01 MG	Tier 1				
SETLAKIN TAB	LEVONORGESTREL & ETHINYL ESTRADIOL (91-DAY) TAB 0.15-0.03 MG	Tier 1				
SIMLIYA TAB 28 DAY	DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5)	Tier 1				
SIMPESSE TAB	LEVONORG-ETH EST TAB 0.15-0.03MG(84) & ETH EST TAB 0.01MG(7)	Tier 1				
SPRINTEC 28 TAB 28 DAY	NORGESTIMATE & ETHINYL ESTRADIOL TAB 0.25 MG-35 MCG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
SRONYX TAB	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG	Tier 1				
TARINA 24 FE TAB	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24)	Tier 1				
TARINA FE TAB 1/20 EQ	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	Tier 1				
TILIA FE TAB	NORETHINDRONE AC-ETHINYL ESTRAD-FE TAB 1-20/1-30/1-35 MG-MCG	Tier 1				
TRI-ESTARYLL TAB	NORGESTIMATE-ETH ESTRAD TAB 0.18-35/0.215-35/0.25-35 MG-MCG	Tier 1				
TRI-LEGEST TAB FE	NORETHINDRONE AC-ETHINYL ESTRAD-FE TAB 1-20/1-30/1-35 MG-MCG	Tier 1				
TRI-LINYAH TAB	NORGESTIMATE-ETH ESTRAD TAB 0.18-35/0.215-35/0.25-35 MG-MCG	Tier 1				
TRI-LO TAB ESTARYLL	NORGESTIMATE-ETH ESTRAD TAB 0.18-25/0.215-25/0.25-25 MG-MCG	Tier 3				
TRI-LO- TAB MARZIA	NORGESTIMATE-ETH ESTRAD TAB 0.18-25/0.215-25/0.25-25 MG-MCG	Tier 3				
TRI-LO- TAB SPRINTEC	NORGESTIMATE-ETH ESTRAD TAB 0.18-25/0.215-25/0.25-25 MG-MCG	Tier 3				
TRI-LO-MILI TAB	NORGESTIMATE-ETH ESTRAD TAB 0.18-25/0.215-25/0.25-25 MG-MCG	Tier 3				
TRI-MILI TAB	NORGESTIMATE-ETH ESTRAD TAB 0.18-35/0.215-35/0.25-35 MG-MCG	Tier 1				
TRI-NYMYO TAB	NORGESTIMATE-ETH ESTRAD TAB 0.18-35/0.215-35/0.25-35 MG-MCG	Tier 1				
TRI-SPRINTEC TAB	NORGESTIMATE-ETH ESTRAD TAB 0.18-35/0.215-35/0.25-35 MG-MCG	Tier 1				
TRI-VYLIBRA TAB	NORGESTIMATE-ETH ESTRAD TAB 0.18-35/0.215-35/0.25-35 MG-MCG	Tier 1				
TRI-VYLIBRA TAB LO	NORGESTIMATE-ETH ESTRAD TAB 0.18-25/0.215-25/0.25-25 MG-MCG	Tier 3				
TRIVORA-28 TAB	LEVONORGESTREL-ETH ESTRA TAB 0.05-30/0.075-40/0.125-30MG-MCG	Tier 1				
TURQOZ TAB	NORGESTREL & ETHINYL ESTRADIOL TAB 0.3 MG-30 MCG	Tier 1				
TYBLUME CHW 0.1-0.02	LEVONORGESTREL & ETHINYL ESTRADIOL CHEW TAB 0.1 MG-20 MCG	Tier 2				
TYDEMY TAB	DROSPIRENONE-ETHINYL ESTRAD-LEVOMEFOLATE TAB 3-0.03-0.451 MG	Tier 1				
VALTYA 1/35 TAB	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG	Tier 1				
VALTYA 1/50 TAB	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-50 MCG	Tier 1				
VELIVET PAK	DESOGEST-ETHIN EST TAB 0.1-0.025/0.125-0.025/0.15-0.025MG-MG	Tier 1				
VIENVA TAB 0.1-20	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG	Tier 1				
VIORELE TAB	DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5)	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
VOLNEA TAB	DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5)	Tier 1				
VYFEMLA TAB 0.4-35	NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.4 MG-35 MCG	Tier 1				
VYLIBRA TAB 0.25-35	NORGESTIMATE & ETHINYL ESTRADIOL TAB 0.25 MG-35 MCG	Tier 1				
WERA TAB 0.5/35	NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.5 MG-35 MCG	Tier 1				
WYMZYA FE CHW 0.4MG-35	NORETHINDRONE & ETHINYL ESTRADIOL-FE CHEW TAB 0.4 MG-35 MCG	Tier 1				
XARAH FE TAB	NORETHINDRONE AC-ETHINYL ESTRAD-FE TAB 1-20/1-30/1-35 MG-MCG	Tier 1				
XELRIA FE CHW 0.4MG-35	NORETHINDRONE & ETHINYL ESTRADIOL-FE CHEW TAB 0.4 MG-35 MCG	Tier 1				
XULANE DIS 150-35	NORELGESTROMIN-ETHINYL ESTRADIOL TD PTWK 150-35 MCG/24HR	Tier 1				
YASMIN 28 TAB 3-0.03MG	DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.03 MG	Tier 3				
YAZ TAB 3-0.02MG	DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.02 MG	Tier 3				
YUVAFEM TAB 10MCG	ESTRADIOL VAGINAL TAB 10 MCG	Tier 3				
ZAFEMY DIS 150/35	NORELGESTROMIN-ETHINYL ESTRADIOL TD PTWK 150-35 MCG/24HR	Tier 1				
ZOVIA 1/35 TAB	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG	Tier 1				
Fibromyalgia Agents - Drugs to Treat Muscle and Soft Tissue Pain						
DULOXETINE CAP 20MG DR	DULOXETINE HCL ENTERIC COATED PELLETS CAP 20 MG (BASE EQ)	Tier 3				
DULOXETINE CAP 30MG DR	DULOXETINE HCL ENTERIC COATED PELLETS CAP 30 MG (BASE EQ)	Tier 3				
DULOXETINE CAP 60MG DR	DULOXETINE HCL ENTERIC COATED PELLETS CAP 60 MG (BASE EQ)	Tier 3				
LYRICA SOL 20MG/ML	PREGABALIN SOLN 20 MG/ML	Tier 4	X			
PREGABALIN CAP 100MG	PREGABALIN CAP 100 MG	Tier 3				
PREGABALIN CAP 150MG	PREGABALIN CAP 150 MG	Tier 3				
PREGABALIN CAP 200MG	PREGABALIN CAP 200 MG	Tier 3				
PREGABALIN CAP 225MG	PREGABALIN CAP 225 MG	Tier 3				
PREGABALIN CAP 25MG	PREGABALIN CAP 25 MG	Tier 3				
PREGABALIN CAP 300MG	PREGABALIN CAP 300 MG	Tier 3				
PREGABALIN CAP 50MG	PREGABALIN CAP 50 MG	Tier 3				
PREGABALIN CAP 75MG	PREGABALIN CAP 75 MG	Tier 3				
PREGABALIN SOL 20MG/ML	PREGABALIN SOLN 20 MG/ML	Tier 4				
SAVELLA MIS TITR PAK	MILNACIPRAN HCL TAB 12.5 MG (5) & 25 MG (8) & 50 MG (42) PAK	Tier 5		X		
SAVELLA TAB 100MG	MILNACIPRAN HCL TAB 100 MG	Tier 5		X		
SAVELLA TAB 12.5MG	MILNACIPRAN HCL TAB 12.5 MG	Tier 5		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
SAVELLA TAB 25MG	MILNACIPRAN HCL TAB 25 MG	Tier 5		X		
SAVELLA TAB 50MG	MILNACIPRAN HCL TAB 50 MG	Tier 5		X		
GABA Receptor Modulators - Drugs for Sleeping						
ESZOPICLONE TAB 1MG	ESZOPICLONE TAB 1 MG	Tier 3				
ESZOPICLONE TAB 2MG	ESZOPICLONE TAB 2 MG	Tier 3				
ESZOPICLONE TAB 3MG	ESZOPICLONE TAB 3 MG	Tier 3				
FLURAZEPAM CAP 15MG	FLURAZEPAM HCL CAP 15 MG	Tier 2				
FLURAZEPAM CAP 30MG	FLURAZEPAM HCL CAP 30 MG	Tier 2				
RESTORIL CAP 15MG	TEMAZEPAM CAP 15 MG	Tier 5				
RESTORIL CAP 22.5MG	TEMAZEPAM CAP 22.5 MG	Tier 5				
RESTORIL CAP 30MG	TEMAZEPAM CAP 30 MG	Tier 5				
RESTORIL CAP 7.5MG	TEMAZEPAM CAP 7.5 MG	Tier 5				
TEMAZEPAM CAP 15MG	TEMAZEPAM CAP 15 MG	Tier 2				
TEMAZEPAM CAP 22.5MG	TEMAZEPAM CAP 22.5 MG	Tier 2				
TEMAZEPAM CAP 30MG	TEMAZEPAM CAP 30 MG	Tier 2				
TEMAZEPAM CAP 7.5MG	TEMAZEPAM CAP 7.5 MG	Tier 2				
ZALEPLON CAP 10MG	ZALEPLON CAP 10 MG	Tier 2				
ZALEPLON CAP 5MG	ZALEPLON CAP 5 MG	Tier 2				
ZOLPIDEM TAB 10MG	ZOLPIDEM TARTRATE TAB 10 MG	Tier 2				
ZOLPIDEM TAB 5MG	ZOLPIDEM TARTRATE TAB 5 MG	Tier 2				
ZOLPIDEM ER TAB 12.5MG	ZOLPIDEM TARTRATE TAB ER 12.5 MG	Tier 3				
ZOLPIDEM ER TAB 6.25MG	ZOLPIDEM TARTRATE TAB ER 6.25 MG	Tier 3				
Gamma-Aminobutyric Acid (GABA) Augmenting Agents - Seizure Control Drugs						
CLOBAZAM SUS 2.5MG/ML	CLOBAZAM SUSPENSION 2.5 MG/ML	Tier 4	X			
CLOBAZAM TAB 10MG	CLOBAZAM TAB 10 MG	Tier 3	X			
CLOBAZAM TAB 20MG	CLOBAZAM TAB 20 MG	Tier 3	X			
DIASTAT ACDL GEL 12.5-20	DIAZEPAM RECTAL GEL DELIVERY SYSTEM 20 MG	Tier 5		X		
DIASTAT ACDL GEL 5-10MG	DIAZEPAM RECTAL GEL DELIVERY SYSTEM 10 MG	Tier 5		X		
DIASTAT PED GEL 2.5M GEL	DIAZEPAM RECTAL GEL DELIVERY SYSTEM 2.5 MG	Tier 3		X		
DIAZEPAM GEL 10MG	DIAZEPAM RECTAL GEL DELIVERY SYSTEM 10 MG	Tier 2		X		
DIAZEPAM GEL 2.5MG	DIAZEPAM RECTAL GEL DELIVERY SYSTEM 2.5 MG	Tier 2		X		
DIAZEPAM GEL 20MG	DIAZEPAM RECTAL GEL DELIVERY SYSTEM 20 MG	Tier 2		X		
GABAPENTIN CAP 100MG	GABAPENTIN CAP 100 MG	Tier 2				
GABAPENTIN CAP 300MG	GABAPENTIN CAP 300 MG	Tier 2				
GABAPENTIN CAP 400MG	GABAPENTIN CAP 400 MG	Tier 2				
GABAPENTIN SOL 250/5ML	GABAPENTIN ORAL SOLN 250 MG/5ML	Tier 2				
GABAPENTIN TAB 600MG	GABAPENTIN TAB 600 MG	Tier 2				
GABAPENTIN TAB 800MG	GABAPENTIN TAB 800 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
LIBERVANT MIS 10MG	DIAZEPAM BUCCAL FILM 10 MG	Tier 4	X	X		
LIBERVANT MIS 12.5MG	DIAZEPAM BUCCAL FILM 12.5 MG	Tier 4	X	X		
LIBERVANT MIS 15MG	DIAZEPAM BUCCAL FILM 15 MG	Tier 4	X	X		
LIBERVANT MIS 5MG	DIAZEPAM BUCCAL FILM 5 MG	Tier 4	X	X		
LIBERVANT MIS 7.5MG	DIAZEPAM BUCCAL FILM 7.5 MG	Tier 4	X	X		
ONFI SUS 2.5MG/ML	CLOBAZAM SUSPENSION 2.5 MG/ML	Tier 5	X			
ONFI TAB 10MG	CLOBAZAM TAB 10 MG	Tier 5	X			
ONFI TAB 20MG	CLOBAZAM TAB 20 MG	Tier 5	X			
PRIMIDONE TAB 125MG	PRIMIDONE TAB 125 MG	Tier 2	X			
PRIMIDONE TAB 250MG	PRIMIDONE TAB 250 MG	Tier 2				
PRIMIDONE TAB 50MG	PRIMIDONE TAB 50 MG	Tier 2				
SYMPAZAN MIS 10MG	CLOBAZAM ORAL FILM 10 MG	Tier 5	X			
SYMPAZAN MIS 20MG	CLOBAZAM ORAL FILM 20 MG	Tier 5	X			
SYMPAZAN MIS 5MG	CLOBAZAM ORAL FILM 5 MG	Tier 5	X			
TIAGABINE TAB 12MG	TIAGABINE HCL TAB 12 MG	Tier 2				
TIAGABINE TAB 16MG	TIAGABINE HCL TAB 16 MG	Tier 2				
TIAGABINE TAB 2MG	TIAGABINE HCL TAB 2 MG	Tier 2				
TIAGABINE TAB 4MG	TIAGABINE HCL TAB 4 MG	Tier 2				
VALPROIC ACD CAP 250MG	VALPROIC ACID CAP 250 MG	Tier 2				
VALPROIC ACD SOL 250/5ML	VALPROATE SODIUM ORAL SOLN 250 MG/5ML (BASE EQUIV)	Tier 2				
VALTOCO SPR 10MG	DIAZEPAM NASAL SPRAY 10 MG/0.1 ML	Tier 4	X	X		
VALTOCO SPR 15MG	DIAZEPAM NASAL SPRAY THER PACK 2 X 7.5 MG/0.1ML (15 MG DOSE)	Tier 4	X	X		
VALTOCO SPR 20MG	DIAZEPAM NASAL SPRAY THER PACK 2 X 10 MG/0.1ML (20 MG DOSE)	Tier 4	X	X		
VALTOCO SPR 5MG	DIAZEPAM NASAL SPRAY 5 MG/0.1 ML	Tier 4	X	X		
VIGABATRIN PAK 500MG	VIGABATRIN POWD PACK 500 MG	Tier 4	X	X		X
VIGABATRIN TAB 500MG	VIGABATRIN TAB 500 MG	Tier 4	X	X		X
VIGADRONE POW 500MG	VIGABATRIN POWD PACK 500 MG	Tier 4	X	X		X
VIGADRONE TAB 500MG	VIGABATRIN TAB 500 MG	Tier 4	X	X		X
VIGAFYDE SOL 100MG/ML	VIGABATRIN ORAL SOLN 100 MG/ML	Tier 4	X	X		X
VIGODER POW 500MG	VIGABATRIN POWD PACK 500 MG	Tier 4	X	X		X
Gastrointestinal Agents, Other						
SUFLAVE SOL	PEG 3350-KCL-NACL-NA SULFATE-MAG SULFATE FOR SOLN 178.7 GM	Tier 4		X		
Gastrointestinal Agents, Other - Miscellaneous Gastrointestinal Drugs						
ALVIMOPAN CAP 12MG	ALVIMOPAN CAP 12 MG	Tier 4				
CROMOLYN SOD CON 100/5ML	CROMOLYN SODIUM ORAL CONC 100 MG/5ML	Tier 2				
CTEXLI TAB 250MG	CHENODIOL (BASDS) TAB 250 MG	Tier 5	X	X	X	X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
DIPHEN/ATROP LIQ 2.5/5	DIPHENOXYLATE W/ ATROPINE LIQ 2.5-0.025 MG/5ML	Tier 2				
DIPHEN/ATROP TAB 2.5MG	DIPHENOXYLATE W/ ATROPINE TAB 2.5-0.025 MG	Tier 2				
ENTEREG CAP 12MG	ALVIMOPAN CAP 12 MG	Tier 5				
GATTEX KIT 5MG	TEDUGLUTIDE (RDNA) FOR INJ KIT 5 MG	Tier 4	X	X		X
IQIRVO TAB 80MG	ELAFIBRANOR TAB 80 MG	Tier 5	X	X	X	X
LIVDELZI CAP 10MG	SELADELPAR LYSINE CAP 10 MG	Tier 5	X	X	X	X
LIVMARLI TAB 10MG	MARALIXIBAT CHLORIDE TAB 10 MG	Tier 5	X	X		X
LIVMARLI TAB 15MG	MARALIXIBAT CHLORIDE TAB 15 MG	Tier 5	X	X		X
LIVMARLI TAB 20MG	MARALIXIBAT CHLORIDE TAB 20 MG	Tier 5	X	X		X
LIVMARLI TAB 30MG	MARALIXIBAT CHLORIDE TAB 30 MG	Tier 5	X	X		X
LOMOTIL TAB 2.5MG	DIPHENOXYLATE W/ ATROPINE TAB 2.5-0.025 MG	Tier 5				
MILK OF MAGN SUS 1200/15	MAGNESIUM HYDROXIDE SUSP 400 MG/5ML	Tier 2				
MYALEPT INJ 11.3MG	METRELEPTIN FOR SUBCUTANEOUS INJ 11.3 MG	Tier 5	X	X		X
OMECLAMOX- MIS PAK	AMOXICILLIN CAP-CLARITHRO TAB W/ OMEPRAZ CAP DR THERAPY PACK	Tier 5		X		
OPIUM TIN 10MG/ML	OPIUM TINCTURE 1% (10 MG/ML) (MORPHINE EQUIV)	Tier 2				
PROBIOTIC CAP ACIDOPHI	*LACTOBACILLUS CAP**	Tier 2				
PROBIOTIC AD CAP FORMULA	*PROBIOTIC PRODUCT - CAP**	Tier 2				
PRUCALOPRIDE TAB 1MG	PRUCALOPRIDE SUCCINATE TAB 1 MG (BASE EQUIVALENT)	Tier 4	X	X		
PRUCALOPRIDE TAB 2MG	PRUCALOPRIDE SUCCINATE TAB 2 MG (BASE EQUIVALENT)	Tier 4	X	X		
RELISTOR INJ 12/0.6ML	METHYLNALTREXONE BROMIDE INJ 12 MG/0.6ML (20 MG/ML)	Tier 5	X	X		
RELISTOR INJ 12/0.6ML	METHYLNALTREXONE BROMIDE SOLN PREF SYR 12 MG/0.6ML	Tier 5	X	X		
RELISTOR INJ 8/0.4ML	METHYLNALTREXONE BROMIDE SOLN PREF SYR 8 MG/0.4ML	Tier 5	X	X		
REZDIFFRA TAB 100MG	RESMETIROM 100 MG TAB	Tier 5	X	X		
REZDIFFRA TAB 60MG	RESMETIROM 60 MG TAB	Tier 5	X	X		
REZDIFFRA TAB 80MG	RESMETIROM 80 MG TAB	Tier 5	X	X		
SYMPROIC TAB 0.2MG	NALDEMEDINE TOSYLATE TAB 0.2 MG (BASE EQUIVALENT)	Tier 3	X	X		
URSODIOL CAP 300MG	URSODIOL CAP 300 MG	Tier 2				
URSODIOL TAB 250MG	URSODIOL TAB 250 MG	Tier 2				
URSODIOL TAB 500MG	URSODIOL TAB 500 MG	Tier 2				
VOQUEZNA PAK DUAL PAK	AMOXICILLIN CAP 500 MG & VONOPRAZAN TAB 20 MG THERAPY PACK	Tier 5		X	X	
VOQUEZNA PAK TRIP PK	AMOXICILLIN CAP & CLARITHROMYCIN TAB & VONOPRAZAN TAB PACK	Tier 5		X	X	
XERMELO TAB 250MG	TELOTTRISTAT ETHYL TAB 250 MG (AS TELOTTRISTAT ETIPRATE)	Tier 5	X	X		X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
Genetic or Enzyme Disorder: Replacement, Modifiers, Treatment						
BETAINE ANHY POW	*BETAINE POWDER FOR ORAL SOLUTION***	Tier 4				X
CERDELGA CAP 84MG	ELIGLUSTAT TARTRATE CAP 84 MG (BASE EQUIVALENT)	Tier 4	X			X
CHOLBAM CAP 250MG	CHOLIC ACID CAP 250 MG	Tier 4	X	X		X
CHOLBAM CAP 50MG	CHOLIC ACID CAP 50 MG	Tier 4	X	X		X
CREON CAP 12000UNT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 12000-38000-60000 UNIT	Tier 3				
CREON CAP 24000UNT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 24000-76000-120000 UNIT	Tier 3				
CREON CAP 3000UNIT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 3000-9500-15000 UNIT	Tier 3				
CREON CAP 36000UNT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 36000-114000-180000 UNIT	Tier 4				
CREON CAP 36000UNT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 36000-114000-180000 UNIT	Tier 3				
CREON CAP 6000UNIT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 6000-19000-30000 UNIT	Tier 3				
CYSTADANE POW	*BETAINE POWDER FOR ORAL SOLUTION***	Tier 5				X
CYSTAGON CAP 150MG	CYSTEAMINE BITARTRATE CAP 150 MG	Tier 4				X
CYSTAGON CAP 50MG	CYSTEAMINE BITARTRATE CAP 50 MG	Tier 4				X
GALAFOLD CAP 123MG	MIGALASTAT HCL CAP 123 MG (BASE EQUIVALENT)	Tier 5	X	X		X
GLYCEROL PHE LIQ 1.1GM/ML	GLYCEROL PHENYLBUTYRATE LIQUID 1.1 GM/ML	Tier 5	X	X	X	X
MIGLUSTAT CAP 100MG	MIGLUSTAT CAP 100 MG	Tier 5				X
OCALIVA TAB 10MG	OBETICHOLIC ACID TAB 10 MG	Tier 5	X	X	X	X
OCALIVA TAB 5MG	OBETICHOLIC ACID TAB 5 MG	Tier 5	X	X	X	X
OPFOLD CAP 65MG	MIGLUSTAT (GAA DEFICIENCY) CAP 65 MG	Tier 4	X	X		X
ORFADIN CAP 10MG	NITISINONE CAP 10 MG	Tier 4	X			X
ORFADIN CAP 20MG	NITISINONE CAP 20 MG	Tier 4	X			X
ORFADIN CAP 2MG	NITISINONE CAP 2 MG	Tier 4	X			X
ORFADIN CAP 5MG	NITISINONE CAP 5 MG	Tier 4	X			X
ORFADIN SUS 4MG/ML	NITISINONE SUSP 4 MG/ML	Tier 4	X			X
PERTZE CAP 16000U	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 16000-57500-60500 UNIT	Tier 5			X	
PERTZE CAP 24000U	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 24000-86250-90750 UNIT	Tier 5			X	
PERTZE CAP 4000UNIT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 4000-14375-15125 UNIT	Tier 5			X	
PERTZE CAP 8000UNIT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 8000-28750-30250 UNIT	Tier 5			X	
PHENYLBUTYRA POW SODIUM	SODIUM PHENYLBUTYRATE ORAL POWDER 3 GM/ TEASPOONFUL	Tier 2	X			X
PROCYSBI GRA 300MG	CYSTEAMINE BITARTRATE DELAYED RELEASE GRANULES PACKET 300 MG	Tier 5				X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PROCYSBI GRA 75MG	CYSTEAMINE BITARTRATE DELAYED RELEASE GRANULES PACKET 75 MG	Tier 5				X
SAPROPTERIN POW 100MG	SAPROPTERIN DIHYDROCHLORIDE POWDER PACKET 100 MG	Tier 4	X	X		X
SAPROPTERIN POW 500MG	SAPROPTERIN DIHYDROCHLORIDE POWDER PACKET 500 MG	Tier 4	X	X		X
SAPROPTERIN TAB 100MG	SAPROPTERIN DIHYDROCHLORIDE TAB 100 MG	Tier 4	X	X		X
SODIUM PHENY TAB 500MG	SODIUM PHENYLBUTYRATE TAB 500 MG	Tier 5	X			X
STRENSIQ INJ 18/0.45	ASFOTASE ALFA SUBCUTANEOUS INJ 18 MG/0.45ML	Tier 4	X	X		X
STRENSIQ INJ 28/0.7ML	ASFOTASE ALFA SUBCUTANEOUS INJ 28 MG/0.7ML	Tier 4	X	X		X
STRENSIQ INJ 40MG/ML	ASFOTASE ALFA SUBCUTANEOUS INJ 40 MG/ML	Tier 4	X	X		X
STRENSIQ INJ 80/0.8ML	ASFOTASE ALFA SUBCUTANEOUS INJ 80 MG/0.8ML	Tier 4	X	X		X
SUCRAID SOL 8500/ML	SACROSIDASE SOLN 8500 UNIT/ML	Tier 4	X			X
TEGSEDI INJ 284/1.5	INOTERSEN SOD SUBCUTANEOUS PREF SYR 284 MG/1.5ML (BASE EQ)	Tier 4	X	X		X
VOXZOGO INJ 0.4MG	VOSORITIDE FOR SUBCUTANEOUS INJ 0.4 MG	Tier 5	X	X		X
VOXZOGO INJ 0.56MG	VOSORITIDE FOR SUBCUTANEOUS INJ 0.56 MG	Tier 5	X	X		X
VOXZOGO INJ 1.2MG	VOSORITIDE FOR SUBCUTANEOUS INJ 1.2 MG	Tier 5	X	X		X
WAINUA INJ 45/0.8ML	EPLONTERSEN SODIUM SUBCUTANEOUS SOLN AUTO-INJ 45 MG/0.8ML	Tier 4	X	X		X
XPHOZAH TAB 20MG	TENAPANOR HCL TAB 20 MG	Tier 5	X	X		
XPHOZAH TAB 30MG	TENAPANOR HCL TAB 30 MG	Tier 5	X	X		
XURIDEN POW 2GM	URIDINE TRIACETATE ORAL GRANULES PACKET 2 GM	Tier 4	X	X		X
YORVIPATH INJ 168/0.56	PALOPEGTERIPARATIDE PEN-INJ 168 MCG/0.56ML (TERIPARATIDE EQ)	Tier 5	X	X		X
YORVIPATH INJ 294/0.98	PALOPEGTERIPARATIDE PEN-INJ 294 MCG/0.98ML (TERIPARATIDE EQ)	Tier 5	X	X		X
YORVIPATH INJ 420/1.4	PALOPEGTERIPARATIDE PEN-INJ 420 MCG/1.4ML (TERIPARATIDE EQ)	Tier 5	X	X		X
ZELVYSIA POW 100MG	SAPROPTERIN DIHYDROCHLORIDE POWDER PACKET 100 MG	Tier 4	X	X		X
ZELVYSIA POW 500MG	SAPROPTERIN DIHYDROCHLORIDE POWDER PACKET 500 MG	Tier 4	X	X		X
ZENPEP CAP 10000UNT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 10000-32000-42000 UNIT	Tier 3				
ZENPEP CAP 15000UNT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 15000-47000-63000 UNIT	Tier 3				
ZENPEP CAP 20000UNT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 20000-63000-84000 UNIT	Tier 3				
ZENPEP CAP 25000UNT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 25000-79000-105000 UNIT	Tier 3				
ZENPEP CAP 3000UNIT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 3000-10000-14000 UNIT	Tier 3				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ZENPEP CAP 40000UNT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 40000-126000-168000 UNIT	Tier 3				
ZENPEP CAP 5000UNIT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 5000-17000-24000 UNIT	Tier 3				
ZENPEP CAP 60000UNT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 60000-189600-252600 UNIT	Tier 3				
Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment						
ATTRUBY PAK 356MG	ACORAMIDIS HCL TAB PACK 356 MG (712 MG TWICE DAILY)	Tier 4	X	X		X
Genitourinary Agents, Other - Miscellaneous Bladder, Genital, and Kidney Conditions Drugs						
AVANAFIL TAB 100MG	AVANAFIL TAB 100 MG	Tier 4	X	X		
AVANAFIL TAB 200MG	AVANAFIL TAB 200 MG	Tier 4	X	X		
AVANAFIL TAB 50MG	AVANAFIL TAB 50 MG	Tier 4	X	X		
BETHANECHOL TAB 10MG	BETHANECHOL CHLORIDE TAB 10 MG	Tier 2				
BETHANECHOL TAB 25MG	BETHANECHOL CHLORIDE TAB 25 MG	Tier 2				
BETHANECHOL TAB 50MG	BETHANECHOL CHLORIDE TAB 50 MG	Tier 2				
BETHANECHOL TAB 5MG	BETHANECHOL CHLORIDE TAB 5 MG	Tier 2				
CAVERJECT INJ 20MCG	ALPROSTADIL FOR INJ 20 MCG	Tier 4		X		
CAVERJECT INJ 40MCG	ALPROSTADIL FOR INJ 40 MCG	Tier 4		X		
CAVERJECT IM KIT 10MCG	ALPROSTADIL FOR INJ KIT 10 MCG	Tier 4		X		
CAVERJECT IM KIT 20MCG	ALPROSTADIL FOR INJ KIT 20 MCG	Tier 4		X		
CERVIDIL VAG MIS 10MG INS	DINOPROSTONE VAGINAL INSERTS 10 MG	Tier 4				
DEPEN TITRA TAB 250MG	PENICILLAMINE TAB 250 MG	Tier 4				X
EDEX KIT 10MCG	ALPROSTADIL FOR INJ KIT 10 MCG	Tier 4		X		
EDEX KIT 20MCG	ALPROSTADIL FOR INJ KIT 20 MCG	Tier 4		X		
EDEX KIT 40MCG	ALPROSTADIL FOR INJ KIT 40 MCG	Tier 4		X		
ENCARE SUP 100MG	NONOXYNOL-9 VAGINAL SUPPOS 100 MG	Tier 1				
FILSPARI TAB 200MG	SPARSENTAN TAB 200 MG	Tier 5	X	X		X
FILSPARI TAB 400MG	SPARSENTAN TAB 400 MG	Tier 5	X	X		X
GYNOL II GEL 3%	NONOXYNOL-9 GEL 3%	Tier 1				
LITHOSTAT TAB 250MG	ACETOHYDROXAMIC ACID TAB 250 MG	Tier 4				
ME/NAPHOS/MB TAB HYO 1	*METHENAMINE-HYOSCAMINE-METH BLUE-SOD PHOS TAB 81.6 MG***	Tier 2				
MUSE SUP 1000MCG	ALPROSTADIL URETHRAL PELLETT 1000 MCG	Tier 4		X		
MUSE SUP 250MCG	ALPROSTADIL URETHRAL PELLETT 250 MCG	Tier 4		X		
MUSE SUP 500MCG	ALPROSTADIL URETHRAL PELLETT 500 MCG	Tier 4		X		
PENICILLAMIN TAB 250MG	PENICILLAMINE TAB 250 MG	Tier 4				X
PHENAZO TAB 200MG	PHENAZOPYRIDINE HCL TAB 200 MG	Tier 2				
PHENAZOPYRID TAB 100MG	PHENAZOPYRIDINE HCL TAB 100 MG	Tier 2				
PHENAZOPYRID TAB 200MG	PHENAZOPYRIDINE HCL TAB 200 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PREPIDIL GEL 0.5MG/3G	DINOPROSTONE CERVICAL GEL 0.5 MG/3GM	Tier 4				
PYRIDIUM TAB 100MG	PHENAZOPYRIDINE HCL TAB 100 MG	Tier 4				
PYRIDIUM TAB 200MG	PHENAZOPYRIDINE HCL TAB 200 MG	Tier 4				
RIVFLOZA INJ 128/0.8	NEDOSIRAN SODIUM SUBCUTANEOUS SOLN PREF SYR 128 MG/0.8ML	Tier 5	X	X		X
RIVFLOZA INJ 160MG/ML	NEDOSIRAN SODIUM SUBCUTANEOUS SOLN PREF SYR 160 MG/ML	Tier 5	X	X		X
RIVFLOZA INJ 80/0.5ML	NEDOSIRAN SODIUM SUBCUTANEOUS SOLN 80 MG/0.5ML	Tier 5	X	X		X
SILDENAFIL TAB 100MG	SILDENAFIL CITRATE TAB 100 MG	Tier 3		X		
SILDENAFIL TAB 25MG	SILDENAFIL CITRATE TAB 25 MG	Tier 3		X		
SILDENAFIL TAB 50MG	SILDENAFIL CITRATE TAB 50 MG	Tier 3		X		
STENDRA TAB 100MG	AVANAFIL TAB 100 MG	Tier 5	X	X		
STENDRA TAB 200MG	AVANAFIL TAB 200 MG	Tier 5	X	X		
STENDRA TAB 50MG	AVANAFIL TAB 50 MG	Tier 5	X	X		
TADALAFIL TAB 10MG	TADALAFIL TAB 10 MG	Tier 3		X		
TADALAFIL TAB 20MG	TADALAFIL TAB 20 MG	Tier 3		X		
TIOPRONIN TAB 100MG	TIOPRONIN TAB 100 MG	Tier 4				X
TIOPRONIN TAB 100MG DR	TIOPRONIN TAB DELAYED RELEASE 100 MG	Tier 4				X
TIOPRONIN TAB 300MG DR	TIOPRONIN TAB DELAYED RELEASE 300 MG	Tier 4				X
TODAY SPONGE MIS	NONOXYNOL-9 VAGINAL SPONGE 1000 MG	Tier 1				
URELLE TAB	*METHENAMINE-HYOSC-METH BLUE-SOD PHOS-PHEN SAL TAB 81 MG***	Tier 5				
URETRON D/S TAB	*METHENAMINE-HYOS-METH BLUE-SOD PHOS-PHEN SAL TAB 81.6 MG***	Tier 5				
URIMAR-T TAB	*METHENAMINE-HYOSC-METH BLUE-SOD PHOS-PHEN SAL TAB 120 MG***	Tier 5				
URO-458 TAB	*METHENAMINE-HYOSC-METH BLUE-SOD PHOS-PHEN SAL TAB 81 MG***	Tier 5				
UROGESIC- TAB BLUE	*METHENAMINE-HYOSCAMINE-METH BLUE-SOD PHOS TAB 81.6 MG***	Tier 3				
VARDENAFIL TAB 10MG	VARDENAFIL HCL TAB 10 MG	Tier 4		X		
VARDENAFIL TAB 10MG ODT	VARDENAFIL HCL ORALLY DISINTEGRATING TAB 10 MG	Tier 4		X		
VARDENAFIL TAB 2.5MG	VARDENAFIL HCL TAB 2.5 MG	Tier 4		X		
VARDENAFIL TAB 20MG	VARDENAFIL HCL TAB 20 MG	Tier 4		X		
VARDENAFIL TAB 5MG	VARDENAFIL HCL TAB 5 MG	Tier 4		X		
VCF VAGINAL GEL CONTRACE	NONOXYNOL-9 GEL 4%	Tier 1				
VCF VAGINAL MIS CONTRACP	NONOXYNOL-9 FILM 28%	Tier 1				
VILEVEV MB TAB 81MG	*METHENAMINE-HYOSC-METH BLUE-SOD PHOS-PHEN SAL TAB 81 MG***	Tier 5				

Glucocorticoids - Drugs to Treat Inflammation

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ANALPRAM HC CRE 1-1%	HYDROCORTISONE ACETATE W/ PRAMOXINE PERIANAL CREAM 1-1%	Tier 5				
ANALPRAM HC LOT 2.5%	HYDROCORTISONE ACETATE W/ PRAMOXINE PERIANAL LOTN 2.5-1%	Tier 4				
ANALPRAM-HC CRE 1-1%	HYDROCORTISONE ACETATE W/ PRAMOXINE PERIANAL CREAM 1-1%	Tier 5				
ANALPRAM-HC LOT 2.5%	HYDROCORTISONE ACETATE W/ PRAMOXINE PERIANAL LOTN 2.5-1%	Tier 4				
ANUCORT-HC SUP 25MG	HYDROCORTISONE ACETATE SUPPOS 25 MG	Tier 3				
ANUSOL-HC CRE 2.5%	HYDROCORTISONE PERIANAL CREAM 2.5%	Tier 5				
BUDESONIDE AER 2MG/ACT	BUDESONIDE RECTAL FOAM 2 MG/ACT	Tier 3				
BUDESONIDE CAP 3MG DR	BUDESONIDE DELAYED RELEASE PARTICLES CAP 3 MG	Tier 3				
CORTENEMA ENE 100MG	HYDROCORTISONE ENEMA 100 MG/60ML	Tier 5				
CORTIFOAM AER 90MG	HYDROCORTISONE ACETATE PERIANAL FOAM 10% (90 MG/DOSE)	Tier 3				
HC PRAMOXINE CRE 1-1%	HYDROCORTISONE ACETATE W/ PRAMOXINE PERIANAL CREAM 1-1%	Tier 2				
HC PRAMOXINE CRE 2.5-1%	PRAMOXINE-HC CREAM 1-2.5%	Tier 2				
HEMMOREX-HC SUP 25MG	HYDROCORTISONE ACETATE SUPPOS 25 MG	Tier 4				
HYDROCORT ENE 100MG	HYDROCORTISONE ENEMA 100 MG/60ML	Tier 2				
HYDROCORT AC SUP 25MG	HYDROCORTISONE ACETATE SUPPOS 25 MG	Tier 3				
HYDROCORT AC SUP 30MG	HYDROCORTISONE ACETATE SUPPOS 30 MG	Tier 3				
HYDROCORTISO CRE 2.5%	HYDROCORTISONE PERIANAL CREAM 2.5%	Tier 2				
PRAMOSONE CRE 1-2.5%	PRAMOXINE-HC CREAM 1-2.5%	Tier 5				
PRAMOSONE OIN 1%	PRAMOXINE-HC OINT 1-1%	Tier 3				
PRAMOSONE OIN 2.5%	PRAMOXINE-HC OINT 1-2.5%	Tier 5				
PROCTO-MED CRE HC 2.5%	HYDROCORTISONE PERIANAL CREAM 2.5%	Tier 2				
PROCTOFOAM AER HC 1%	HYDROCORTISONE ACETATE W/ PRAMOXINE PERIANAL FOAM 1-1%	Tier 3				
PROCTOSOL HC CRE 2.5%	HYDROCORTISONE PERIANAL CREAM 2.5%	Tier 5				
PROCTOZONE CRE -HC 2.5%	HYDROCORTISONE PERIANAL CREAM 2.5%	Tier 5				
Glutamate Reducing Agents - Seizure Control Drugs						
FELBAMATE SUS 600/5ML	FELBAMATE SUSP 600 MG/5ML	Tier 2				
FELBAMATE TAB 400MG	FELBAMATE TAB 400 MG	Tier 2				
FELBAMATE TAB 600MG	FELBAMATE TAB 600 MG	Tier 2				
FELBATOL TAB 400MG	FELBAMATE TAB 400 MG	Tier 5	X			
FELBATOL TAB 600MG	FELBAMATE TAB 600 MG	Tier 5	X			
FYCOMPA SUS 0.5MG/ML	PERAMPANEL SUSP 0.5 MG/ML	Tier 5	X			
LAMICTAL XR KIT	LAMOTRIGINE TAB ER 24HR 21 X 25 MG & 7 X 50 MG TITRATION KIT	Tier 4	X			
LAMICTAL XR KIT	LAMOTRIGINE TAB ER 24HR 50 (14) & 100 MG(14) & 200 MG(7) KIT	Tier 4	X			

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
LAMICTAL XR KIT	LAMOTRIGINE TAB ER 24HR 25 (14) & 50 MG (14) & 100 MG(7) KIT	Tier 4	X			
LAMOTRIGINE CHW 25MG	LAMOTRIGINE TAB CHEWABLE DISPERSIBLE 25 MG	Tier 2				
LAMOTRIGINE CHW 5MG	LAMOTRIGINE TAB CHEWABLE DISPERSIBLE 5 MG	Tier 2				
LAMOTRIGINE KIT START 35	LAMOTRIGINE TAB 35 X 25 MG STARTER KIT	Tier 2				
LAMOTRIGINE KIT START 49	LAMOTRIGINE TAB 25 MG (42) & 100 MG (7) STARTER KIT	Tier 2				
LAMOTRIGINE KIT START 98	LAMOTRIGINE TAB 84 X 25 MG & 14 X 100 MG STARTER KIT	Tier 2				
LAMOTRIGINE TAB 100MG	LAMOTRIGINE TAB 100 MG	Tier 2				
LAMOTRIGINE TAB 150MG	LAMOTRIGINE TAB 150 MG	Tier 2				
LAMOTRIGINE TAB 200MG	LAMOTRIGINE TAB 200 MG	Tier 2				
LAMOTRIGINE TAB 25MG	LAMOTRIGINE TAB 25 MG	Tier 2				
PERAMPANEL TAB 10MG	PERAMPANEL TAB 10 MG	Tier 4	X			
PERAMPANEL TAB 12MG	PERAMPANEL TAB 12 MG	Tier 4	X			
PERAMPANEL TAB 2MG	PERAMPANEL TAB 2 MG	Tier 4	X			
PERAMPANEL TAB 4MG	PERAMPANEL TAB 4 MG	Tier 4	X			
PERAMPANEL TAB 6MG	PERAMPANEL TAB 6 MG	Tier 4	X			
PERAMPANEL TAB 8MG	PERAMPANEL TAB 8 MG	Tier 4	X			
SUBVENITE KIT START 35	LAMOTRIGINE TAB 35 X 25 MG STARTER KIT	Tier 2				
SUBVENITE KIT START 49	LAMOTRIGINE TAB 25 MG (42) & 100 MG (7) STARTER KIT	Tier 2				
SUBVENITE KIT START 98	LAMOTRIGINE TAB 84 X 25 MG & 14 X 100 MG STARTER KIT	Tier 2				
SUBVENITE TAB 100MG	LAMOTRIGINE TAB 100 MG	Tier 2				
SUBVENITE TAB 150MG	LAMOTRIGINE TAB 150 MG	Tier 2				
SUBVENITE TAB 200MG	LAMOTRIGINE TAB 200 MG	Tier 2				
SUBVENITE TAB 25MG	LAMOTRIGINE TAB 25 MG	Tier 2				
TOPIRAMATE CAP 15MG	TOPIRAMATE SPRINKLE CAP 15 MG	Tier 2				
TOPIRAMATE CAP 25MG	TOPIRAMATE SPRINKLE CAP 25 MG	Tier 2				
TOPIRAMATE CAP 50MG	TOPIRAMATE SPRINKLE CAP 50 MG	Tier 2				
TOPIRAMATE TAB 100MG	TOPIRAMATE TAB 100 MG	Tier 2				
TOPIRAMATE TAB 200MG	TOPIRAMATE TAB 200 MG	Tier 2				
TOPIRAMATE TAB 25MG	TOPIRAMATE TAB 25 MG	Tier 2				
TOPIRAMATE TAB 50MG	TOPIRAMATE TAB 50 MG	Tier 2				
Glycemic Agents - Diabetic Drugs						
BAQSIMI ONE POW 3MG/DOSE	GLUCAGON NASAL POWDER 3 MG/DOSE	Tier 3		X		
BAQSIMI TWO POW 3MG/DOSE	GLUCAGON NASAL POWDER 3 MG/DOSE	Tier 3		X		
DIAZOXIDE SUS 50MG/ML	DIAZOXIDE SUSP 50 MG/ML	Tier 4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
GLUCAGEN INJ HYPOKIT	GLUCAGON HCL FOR INJ 1 MG	Tier 3				
GLUCAGON INJ 1MG	GLUCAGON FOR INJ 1 MG	Tier 3				
GLUCAGON EMR SOL 1MG	GLUCAGON HCL FOR INJ 1 MG	Tier 3				
GVOKE HYPO 1 INJ 0.5/.1ML	GLUCAGON SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.5 MG/0.1ML	Tier 3		X		
GVOKE HYPO 1 INJ 1/0.2ML	GLUCAGON SUBCUTANEOUS SOLUTION AUTO-INJECTOR 1 MG/0.2ML	Tier 3		X		
GVOKE HYPO 2 INJ 0.5/.1ML	GLUCAGON SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.5 MG/0.1ML	Tier 3		X		
GVOKE HYPO 2 INJ 1/0.2ML	GLUCAGON SUBCUTANEOUS SOLUTION AUTO-INJECTOR 1 MG/0.2ML	Tier 3		X		
GVOKE KIT SOL 1/0.2ML	GLUCAGON SUBCUTANEOUS SOLN 1 MG/0.2ML	Tier 3				
GVOKE PFS INJ 0.5/.1ML	GLUCAGON SUBCUTANEOUS SOLN PREF SYRINGE 0.5 MG/0.1ML	Tier 3				
GVOKE PFS INJ 1/0.2ML	GLUCAGON SUBCUTANEOUS SOLN PREF SYRINGE 1 MG/0.2ML	Tier 3				
PROGLYCEM SUS 50MG/ML	DIAZOXIDE SUSP 50 MG/ML	Tier 5				
ZEGALOGUE INJ 0.6/0.6	DASIGLUCAGON HCL SUBCUTANEOUS SOLN AUTO-INJ 0.6 MG/0.6ML	Tier 3		X		
ZEGALOGUE INJ 0.6/0.6	DASIGLUCAGON HCL SUBCUTANEOUS SOLN PREF SYRINGE 0.6 MG/0.6ML	Tier 3		X		
Hemostasis Agents - Drugs to Stop Bleeding						
ADVATE INJ 1000UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 1000 UNIT	Tier 4				X
ADVATE INJ 1500UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 1500 UNIT	Tier 4				X
ADVATE INJ 2000UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 2000 UNIT	Tier 4				X
ADVATE INJ 250UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 250 UNIT	Tier 4				X
ADVATE INJ 3000UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 3000 UNIT	Tier 4				X
ADVATE INJ 4000UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 4000 UNIT	Tier 4				X
ADVATE INJ 500UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 500 UNIT	Tier 4				X
ADYNOVATE INJ 1000UNIT	ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 1000 UNIT	Tier 5				X
ADYNOVATE INJ 1500UNIT	ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 1500 UNIT	Tier 5				X
ADYNOVATE INJ 2000UNIT	ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 2000 UNIT	Tier 5				X
ADYNOVATE INJ 250UNIT	ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 250 UNIT	Tier 5				X
ADYNOVATE INJ 3000UNIT	ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 3000 UNIT	Tier 5				X
ADYNOVATE INJ 500UNIT	ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 500 UNIT	Tier 5				X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ADYNOVATE INJ 750UNIT	ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 750 UNIT	Tier 5				X
AFSTYLA KIT 1000UNIT	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 1000 UNIT	Tier 5				
AFSTYLA KIT 1500UNIT	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 1500 UNIT	Tier 5				X
AFSTYLA KIT 2000UNIT	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 2000 UNIT	Tier 5				
AFSTYLA KIT 2500UNIT	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 2500 UNIT	Tier 5				X
AFSTYLA KIT 250UNIT	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 250 UNIT	Tier 5				
AFSTYLA KIT 3000UNIT	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 3000 UNIT	Tier 5				
AFSTYLA KIT 500UNIT	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 500 UNIT	Tier 5				
ALPHANATE INJ 1000UNIT	ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 1000 UNIT	Tier 4				X
ALPHANATE INJ 1500UNIT	ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 1500 UNIT	Tier 4				X
ALPHANATE INJ 2000UNIT	ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 2000 UNIT	Tier 4				X
ALPHANATE INJ 250 UNIT	ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 250 UNIT	Tier 4				X
ALPHANATE INJ 500 UNIT	ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 500 UNIT	Tier 4				X
ALPHANINE SD INJ 1000UNIT	COAGULATION FACTOR IX FOR INJ 1000 UNIT	Tier 4				X
ALPHANINE SD INJ 1500UNIT	COAGULATION FACTOR IX FOR INJ 1500 UNIT	Tier 4				X
ALPHANINE SD INJ 500UNIT	COAGULATION FACTOR IX FOR INJ 500 UNIT	Tier 4				X
ALPROLIX INJ 1000UNIT	COAGULATION FACTOR IX (RECOMB) (RFIXFC) FOR INJ 1000 UNIT	Tier 5				X
ALPROLIX INJ 2000UNIT	COAGULATION FACTOR IX (RECOMB) (RFIXFC) FOR INJ 2000 UNIT	Tier 5				X
ALPROLIX INJ 250UNIT	COAGULATION FACTOR IX (RECOMB) (RFIXFC) FOR INJ 250 UNIT	Tier 4				X
ALPROLIX INJ 3000UNIT	COAGULATION FACTOR IX (RECOMB) (RFIXFC) FOR INJ 3000 UNIT	Tier 5				X
ALPROLIX INJ 4000UNIT	COAGULATION FACTOR IX (RECOMB) (RFIXFC) FOR INJ 4000 UNIT	Tier 5				X
ALPROLIX INJ 500UNIT	COAGULATION FACTOR IX (RECOMB) (RFIXFC) FOR INJ 500 UNIT	Tier 5				X
ALTUVIIIIO INJ 1000UNIT	ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 1000 UNIT	Tier 5				X
ALTUVIIIIO INJ 2000UNIT	ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 2000 UNIT	Tier 5				X
ALTUVIIIIO INJ 250 UNIT	ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 250 UNIT	Tier 5				X
ALTUVIIIIO INJ 250UNIT	ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 250 UNIT	Tier 5				X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ALTUVIII INJ 3000UNIT	ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 3000 UNIT	Tier 5				X
ALTUVIII INJ 4000UNIT	ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 4000 UNIT	Tier 5				X
ALTUVIII INJ 500UNIT	ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 500 UNIT	Tier 5				X
AMINOCAPR AC TAB 1000MG	AMINOCAPROIC ACID TAB 1000 MG	Tier 4				
AMINOCAPR AC TAB 500MG	AMINOCAPROIC ACID TAB 500 MG	Tier 4				
AMINOCAPROIC SOL 0.25/ML	AMINOCAPROIC ACID ORAL SOLN 0.25 GM/ML	Tier 4				
ASTRINGYN SOL 259MG/GM	FERRIC SUBSULFATE SOLN 259 MG/GM	Tier 4				
BENEFIX INJ 1000UNIT	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ KIT 1000 UNIT	Tier 4				X
BENEFIX INJ 2000UNIT	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ KIT 2000 UNIT	Tier 4				X
BENEFIX INJ 250UNIT	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ KIT 250 UNIT	Tier 4				X
BENEFIX INJ 3000UNIT	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ KIT 3000 UNIT	Tier 4				X
BENEFIX INJ 500UNIT	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ KIT 500 UNIT	Tier 4				X
COAGADEX INJ 250UNIT	COAGULATION FACTOR X (HUMAN) FOR INJ 250 UNIT	Tier 4				X
COAGADEX INJ 500UNIT	COAGULATION FACTOR X (HUMAN) FOR INJ 500 UNIT	Tier 4				X
CORIFACT KIT	FACTOR XIII CONCENTRATE (HUMAN) FOR INJ KIT 1000-1600 UNIT	Tier 4				X
FEIBA INJ	ANTIINHIBITOR COAGULANT COMPLEX FOR IV SOLN 1000 UNIT	Tier 4				X
FEIBA INJ	ANTIINHIBITOR COAGULANT COMPLEX FOR IV SOLN 2500 UNIT	Tier 4				X
FEIBA INJ	ANTIINHIBITOR COAGULANT COMPLEX FOR IV SOLN 500 UNIT	Tier 4				X
HEMLIBRA INJ 105/0.7	EMICIZUMAB-KXWH SUBCUTANEOUS SOLN 105 MG/0.7ML (150 MG/ML)	Tier 4	X			X
HEMLIBRA INJ 150/ML	EMICIZUMAB-KXWH SUBCUTANEOUS SOLN 150 MG/ML	Tier 4	X			X
HEMLIBRA INJ 300/2ML	EMICIZUMAB-KXWH SUBCUTANEOUS SOLN 300 MG/2ML (150 MG/ML)	Tier 4	X			X
HEMLIBRA INJ 30MG/ML	EMICIZUMAB-KXWH SUBCUTANEOUS SOLN 30 MG/ML	Tier 4	X			X
HEMLIBRA INJ 60/0.4	EMICIZUMAB-KXWH SUBCUTANEOUS SOLN 60 MG/0.4ML (150 MG/ML)	Tier 4	X			X
HEMOFIL M INJ 1000UNIT	ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 1000 UNIT	Tier 4				X
HEMOFIL M INJ 1700UNIT	ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 1700 UNIT	Tier 4				X
HEMOFIL M INJ 250UNIT	ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 250 UNIT	Tier 4				X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
HEMOFIL M INJ 500UNIT	ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 500 UNIT	Tier 4				X
HUMATE-P SOL 2400UNIT	ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 1000-2400 UNIT	Tier 4				X
HUMATE-P SOL 250-600	ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 250-600 UNIT	Tier 4				X
HUMATE-P SOL 500-1200	ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 500-1200 UNIT	Tier 4				X
HYMPAVZI INJ 150MG/ML	MARSTACIMAB-HNCQ SUBCUTANEOUS SOLN AUTO-INJ 150 MG/ML	Tier 4	X	X		X
IDELVION SOL 1000UNIT	COAGULATION FACTOR IX (RECOMB) (RIX-FP) FOR INJ 1000 UNIT	Tier 5				X
IDELVION SOL 2000UNIT	COAGULATION FACTOR IX (RECOMB) (RIX-FP) FOR INJ 2000 UNIT	Tier 5				X
IDELVION SOL 250UNIT	COAGULATION FACTOR IX (RECOMB) (RIX-FP) FOR INJ 250 UNIT	Tier 5				X
IDELVION SOL 3500UNIT	COAGULATION FACTOR IX (RECOMB) (RIX-FP) FOR INJ 3500 UNIT	Tier 5				X
IDELVION SOL 500UNIT	COAGULATION FACTOR IX (RECOMB) (RIX-FP) FOR INJ 500 UNIT	Tier 5				X
JIVI INJ 1000UNIT	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII PEG-AUCL)FOR INJ 1000 UNIT	Tier 5				X
JIVI INJ 2000UNIT	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII PEG-AUCL)FOR INJ 2000 UNIT	Tier 5				X
JIVI INJ 3000UNIT	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII PEG-AUCL)FOR INJ 3000 UNIT	Tier 5				X
JIVI INJ 4000UNIT	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII PEG-AUCL)FOR INJ 4000 UNIT	Tier 5				X
JIVI INJ 500 UNIT	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII PEG-AUCL) FOR INJ 500 UNIT	Tier 5				X
KOATE INJ 1000UNIT	ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 1000 UNIT	Tier 4				X
KOATE INJ 250UNIT	ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 250 UNIT	Tier 4				X
KOATE INJ 500 UNIT	ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 500 UNIT	Tier 4				X
KOATE-DVI INJ 1000UNIT	ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 1000 UNIT	Tier 4				X
KOGENATE FS INJ 1000UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ KIT 1000 UNIT	Tier 4				X
KOGENATE FS INJ 2000UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ KIT 2000 UNIT	Tier 4				X
KOGENATE FS INJ 250UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ KIT 250 UNIT	Tier 4				X
KOGENATE FS INJ 3000UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ KIT 3000 UNIT	Tier 4				X
KOGENATE FS INJ 500UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ KIT 500 UNIT	Tier 4				X
KOVALTRY INJ 1000UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 1000 UNIT	Tier 4				X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
KOVALTRY INJ 2000UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 2000 UNIT	Tier 4				X
KOVALTRY INJ 250UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 250 UNIT	Tier 4				X
KOVALTRY INJ 3000UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 3000 UNIT	Tier 4				X
KOVALTRY INJ 500UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 500 UNIT	Tier 4				X
MONSELS FERR SOL SUBSULF	*FERRIC SUBSULFATE SOLN**	Tier 4				
NOVOEIGHT INJ 1000UNIT	ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 1000 UNIT	Tier 4				X
NOVOEIGHT INJ 1500UNIT	ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 1500 UNIT	Tier 4				X
NOVOEIGHT INJ 2000UNIT	ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 2000 UNIT	Tier 4				X
NOVOEIGHT INJ 250UNIT	ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 250 UNIT	Tier 4				X
NOVOEIGHT INJ 3000UNIT	ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 3000 UNIT	Tier 4				X
NOVOEIGHT INJ 500UNIT	ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 500 UNIT	Tier 4				X
NOVOSEVEN RT INJ 1MG	COAGULATION FACTOR VIIA (RECOMB) FOR INJ 1 MG (1000 MCG)	Tier 4				X
NOVOSEVEN RT INJ 2MG	COAGULATION FACTOR VIIA (RECOMB) FOR INJ 2 MG (2000 MCG)	Tier 4				X
NOVOSEVEN RT INJ 5MG	COAGULATION FACTOR VIIA (RECOMB) FOR INJ 5 MG (5000 MCG)	Tier 4				X
NOVOSEVEN RT INJ 8MG	COAGULATION FACTOR VIIA (RECOMB) FOR INJ 8 MG (8000 MCG)	Tier 4				X
NUWIQ INJ 1000UNIT	ANTIHEMOPHILIC FACT RCMB (BDD-RFVIII,SIM) FOR INJ 1000 UNIT	Tier 4				X
NUWIQ INJ 1500UNIT	ANTIHEMOPHILIC FACT RCMB (BDD-RFVIII,SIM) FOR INJ 1500 UNIT	Tier 4				
NUWIQ INJ 2000UNIT	ANTIHEMOPHILIC FACT RCMB (BDD-RFVIII,SIM) FOR INJ 2000 UNIT	Tier 4				X
NUWIQ INJ 2500UNIT	ANTIHEMOPHILIC FACT RCMB (BDD-RFVIII,SIM) FOR INJ 2500 UNIT	Tier 4				X
NUWIQ INJ 250UNIT	ANTIHEMOPHILIC FACTOR RCMB (BDD-RFVIII,SIM) FOR INJ 250 UNIT	Tier 4				X
NUWIQ INJ 3000UNIT	ANTIHEMOPHILIC FACT RCMB (BDD-RFVIII,SIM) FOR INJ 3000 UNIT	Tier 4				X
NUWIQ INJ 4000UNIT	ANTIHEMOPHILIC FACT RCMB (BDD-RFVIII,SIM) FOR INJ 4000 UNIT	Tier 4				X
NUWIQ INJ 500UNIT	ANTIHEMOPHILIC FACTOR RCMB (BDD-RFVIII,SIM) FOR INJ 500 UNIT	Tier 4				X
NUWIQ KIT 1000UNIT	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII,SIM) FOR INJ KIT 1000 UNIT	Tier 4				X
NUWIQ KIT 1500UNIT	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII,SIM) FOR INJ KIT 1500 UNIT	Tier 4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
NUWIQ KIT 2000UNIT	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII,SIM) FOR INJ KIT 2000 UNIT	Tier 4				X
NUWIQ KIT 2500UNIT	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII,SIM) FOR INJ KIT 2500 UNIT	Tier 4				X
NUWIQ KIT 250UNIT	ANTIHEMOPHIL FACT RCMB (BDD-RFVIII,SIM) FOR INJ KIT 250 UNIT	Tier 4				X
NUWIQ KIT 3000UNIT	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII,SIM) FOR INJ KIT 3000 UNIT	Tier 4				X
NUWIQ KIT 4000UNIT	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII,SIM) FOR INJ KIT 4000 UNIT	Tier 4				X
NUWIQ KIT 500UNIT	ANTIHEMOPHIL FACT RCMB (BDD-RFVIII,SIM) FOR INJ KIT 500 UNIT	Tier 4				X
OBIZUR INJ 500 UNIT	ANTIHEMOPHILIC FACTOR (RECOMB PORC) RPFVIII FOR INJ 500 UNIT	Tier 5				X
PROFILNINE INJ 1000UNIT	FACTOR IX COMPLEX FOR INJ 1000 UNIT	Tier 4				X
PROFILNINE INJ 1500UNIT	FACTOR IX COMPLEX FOR INJ 1500 UNIT	Tier 4				X
PROFILNINE INJ 500UNIT	FACTOR IX COMPLEX FOR INJ 500 UNIT	Tier 4				X
PYRUKYND TAB 20MG	MITAPIVAT SULFATE TAB 20 MG	Tier 5	X	X		X
PYRUKYND TAB 20MGX5MG	MITAPIVAT SULFATE TAB THERAPY PACK 7 X 20 MG & 7 X 5 MG	Tier 5	X	X		X
PYRUKYND TAB 50MG	MITAPIVAT SULFATE TAB 50 MG	Tier 5	X	X		X
PYRUKYND TAB 50MGX20M	MITAPIVAT SULFATE TAB THERAPY PACK 7 X 50 MG & 7 X 20 MG	Tier 5	X	X		X
PYRUKYND TAB 5MG	MITAPIVAT SULFATE TAB 5 MG	Tier 5	X	X		X
PYRUKYND TAB 5MG TP	MITAPIVAT SULFATE TAB THERAPY PACK 5 MG	Tier 5	X	X		X
RECOMBIMATE INJ	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ 1241-1800 UNIT	Tier 4				X
RECOMBIMATE INJ	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ 1801-2400 UNIT	Tier 4				X
RECOMBIMATE INJ 220-400	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ 220-400 UNIT	Tier 4				X
RECOMBIMATE INJ 401-800	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ 401-800 UNIT	Tier 4				X
RECOMBIMATE INJ 801-1240	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ 801-1240 UNIT	Tier 4				X
RECOTHROM SOL 20000UNT	THROMBIN (RECOMBINANT) FOR SOLN 20000 UNIT	Tier 4				
RECOTHROM SOL 5000UNIT	THROMBIN (RECOMBINANT) FOR SOLN 5000 UNIT	Tier 4				
RIXUBIS INJ 1000UNIT	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 1000 UNIT	Tier 4				X
RIXUBIS INJ 2000UNIT	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 2000 UNIT	Tier 4				X
RIXUBIS INJ 250 UNIT	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 250 UNIT	Tier 4				X
RIXUBIS INJ 3000UNIT	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 3000 UNIT	Tier 4				X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
RIXUBIS INJ 500UNIT	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 500 UNIT	Tier 4				X
TAVALISSE TAB 100MG	FOSTAMATINIB DISODIUM TAB 100 MG (BASE EQUIVALENT)	Tier 5	X	X		X
TAVALISSE TAB 150MG	FOSTAMATINIB DISODIUM TAB 150 MG (BASE EQUIVALENT)	Tier 5	X	X		X
THROMBIN KIT 5000UNIT	THROMBIN FOR SOLN KIT 5000 UNIT	Tier 4				
THROMBIN-JMI KIT 20000UNT	THROMBIN FOR SOLN KIT 20000 UNIT	Tier 4				
THROMBIN-JMI KIT 5000UNIT	THROMBIN FOR SOLN KIT 5000 UNIT	Tier 4				
THROMBOGEN KIT 10000UNT	THROMBIN FOR SOLN KIT 10000 UNIT	Tier 4				
THROMBOGEN SOL 10000UNT	THROMBIN FOR SOLN 10000 UNIT	Tier 4				
THROMBOGEN SOL 1000UNIT	THROMBIN FOR SOLN 1000 UNIT	Tier 4				
TRANEX ACID TAB 650MG	TRANEXAMIC ACID TAB 650 MG	Tier 3		X		
TRETEN INJ	COAGULATION FACTOR XIII A-SUBUNIT FOR INJ 2500 UNIT	Tier 5				X
VONVENDI INJ 1300UNIT	VON WILLEBRAND FACTOR (RECOMBINANT) FOR INJ 1300 UNIT	Tier 4				X
VONVENDI INJ 650UNIT	VON WILLEBRAND FACTOR (RECOMBINANT) FOR INJ 650 UNIT	Tier 4				X
WILATE INJ	ANTHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 500-500 UNIT KIT	Tier 4				
WILATE INJ	ANTHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 1000-1000 UNIT KIT	Tier 4				
Histamine2 (H2) Receptor Antagonists - Ulcer and Stomach Acid Drugs						
CIMETIDINE SOL 300/5ML	CIMETIDINE HCL SOLN 300 MG/5ML	Tier 2				
CIMETIDINE TAB 200MG	CIMETIDINE TAB 200 MG	Tier 2				
CIMETIDINE TAB 300MG	CIMETIDINE TAB 300 MG	Tier 2				
CIMETIDINE TAB 400MG	CIMETIDINE TAB 400 MG	Tier 2				
CIMETIDINE TAB 800MG	CIMETIDINE TAB 800 MG	Tier 2				
FAMOTIDINE SUS 40MG/5ML	FAMOTIDINE FOR SUSP 40 MG/5ML	Tier 2				
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) - Hormone Replacement/Modifying Drugs						
ALA-SCALP LOT 2%	HYDROCORTISONE LOTION 2%	Tier 5				
ALCLOMETASON CRE 0.05%	ALCLOMETASONE DIPROPIONATE CREAM 0.05%	Tier 2				
ALCLOMETASON OIN 0.05%	ALCLOMETASONE DIPROPIONATE OINT 0.05%	Tier 2				
AMCINONIDE CRE 0.1%	AMCINONIDE CREAM 0.1%	Tier 4				
AMCINONIDE LOT 0.1%	AMCINONIDE LOTION 0.1%	Tier 4				
AMCINONIDE OIN 0.1%	AMCINONIDE OINT 0.1%	Tier 2				
APEXICON E CRE 0.05%	DIFLORASONE DIACETATE EMOLLIENT BASE CREAM 0.05%	Tier 3		X		
BETA DIPROP CRE 0.05%	BETAMETHASONE DIPROPIONATE AUGMENTED CREAM 0.05%	Tier 2				
BETA DIPROP GEL 0.05%	BETAMETHASONE DIPROPIONATE AUGMENTED GEL 0.05%	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
BETA DIPROP LOT 0.05%	BETAMETHASONE DIPROPIONATE AUGMENTED LOTION 0.05%	Tier 4				
BETA DIPROP OIN 0.05%	BETAMETHASONE DIPROPIONATE AUGMENTED OINT 0.05%	Tier 4				
BETAMETH DIP CRE 0.05%	BETAMETHASONE DIPROPIONATE CREAM 0.05%	Tier 3				
BETAMETH DIP LOT 0.05%	BETAMETHASONE DIPROPIONATE LOTION 0.05%	Tier 2				
BETAMETH DIP OIN 0.05%	BETAMETHASONE DIPROPIONATE OINT 0.05%	Tier 3				
BETAMETH VAL CRE 0.1%	BETAMETHASONE VALERATE CREAM 0.1% (BASE EQUIVALENT)	Tier 2				
BETAMETH VAL LOT 0.1%	BETAMETHASONE VALERATE LOTION 0.1% (BASE EQUIVALENT)	Tier 2				
BETAMETH VAL OIN 0.1%	BETAMETHASONE VALERATE OINT 0.1% (BASE EQUIVALENT)	Tier 2				
CAPEX SHA 0.01%	FLUOCINOLONE ACETONIDE SHAMPOO 0.01%	Tier 3				
CLOBETASOL CRE 0.05%	CLOBETASOL PROPIONATE CREAM 0.05%	Tier 3		X		
CLOBETASOL GEL 0.05%	CLOBETASOL PROPIONATE GEL 0.05%	Tier 3		X		
CLOBETASOL OIN 0.05%	CLOBETASOL PROPIONATE OINT 0.05%	Tier 3		X		
CLOBETASOL SOL 0.05%	CLOBETASOL PROPIONATE SOLN 0.05%	Tier 2		X		
CLOBETASOL SPR 0.05%	CLOBETASOL PROPIONATE SPRAY 0.05%	Tier 2		X		
CLOBETASOL E CRE 0.05%	CLOBETASOL PROPIONATE EMOLLIENT BASE CREAM 0.05%	Tier 3		X		
CLOCORTOLONE CRE 0.1%	CLOCORTOLONE PIVALATE CREAM 0.1%	Tier 4		X	X	
CORDRAN 80X3 TAP 4MCG/CM	FLURANDRENOLIDE TAPE 4 MCG/SQCM	Tier 4		X		
CORTEF TAB 10MG	HYDROCORTISONE TAB 10 MG	Tier 5				
CORTEF TAB 20MG	HYDROCORTISONE TAB 20 MG	Tier 5				
CORTEF TAB 5MG	HYDROCORTISONE TAB 5 MG	Tier 5				
DERMA-SMOOTH OIL /FS BODY	FLUOCINOLONE ACETONIDE OIL 0.01% (BODY OIL)	Tier 5		X		
DERMA-SMOOTH OIL /FS SCLP	FLUOCINOLONE ACETONIDE OIL 0.01% (SCALP OIL)	Tier 5				
DESONIDE CRE 0.05%	DESONIDE CREAM 0.05%	Tier 3		X		
DESONIDE LOT 0.05%	DESONIDE LOTION 0.05%	Tier 4		X		
DESONIDE OIN 0.05%	DESONIDE OINT 0.05%	Tier 3		X		
DESOWEN CRE 0.05%	DESONIDE CREAM 0.05%	Tier 4		X		
DESOXIMETAS CRE 0.05%	DESOXIMETASONE CREAM 0.05%	Tier 2		X		
DESOXIMETAS CRE 0.25%	DESOXIMETASONE CREAM 0.25%	Tier 2		X		
DESOXIMETAS GEL 0.05%	DESOXIMETASONE GEL 0.05%	Tier 4		X		
DESOXIMETAS OIN 0.05%	DESOXIMETASONE OINT 0.05%	Tier 4		X		
DESOXIMETAS OIN 0.25%	DESOXIMETASONE OINT 0.25%	Tier 4		X		
DEXAMETHASON CON 1MG/ML	DEXAMETHASONE CONC 1 MG/ML	Tier 2				
DEXAMETHASON ELX 0.5/5ML	DEXAMETHASONE ELIXIR 0.5 MG/5ML	Tier 2				
DEXAMETHASON SOL 0.5/5ML	DEXAMETHASONE SOLN 0.5 MG/5ML	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
DEXAMETHASON TAB 0.5MG	DEXAMETHASONE TAB 0.5 MG	Tier 2				
DEXAMETHASON TAB 0.75MG	DEXAMETHASONE TAB 0.75 MG	Tier 2				
DEXAMETHASON TAB 1.5MG	DEXAMETHASONE TAB 1.5 MG	Tier 2				
DEXAMETHASON TAB 10-DAY	DEXAMETHASONE TAB THERAPY PACK 1.5 MG (35)	Tier 4				
DEXAMETHASON TAB 13-DAY	DEXAMETHASONE TAB THERAPY PACK 1.5 MG (51)	Tier 4				
DEXAMETHASON TAB 1MG	DEXAMETHASONE TAB 1 MG	Tier 2				
DEXAMETHASON TAB 2MG	DEXAMETHASONE TAB 2 MG	Tier 2				
DEXAMETHASON TAB 4MG	DEXAMETHASONE TAB 4 MG	Tier 2				
DEXAMETHASON TAB 6-DAY	DEXAMETHASONE TAB THERAPY PACK 1.5 MG (21)	Tier 4				
DEXAMETHASON TAB 6MG	DEXAMETHASONE TAB 6 MG	Tier 2				
DIFLORASONE CRE 0.05%	DIFLORASONE DIACETATE CREAM 0.05%	Tier 4		X		
DIPROLENE OIN 0.05%	BETAMETHASONE DIPROPIONATE AUGMENTED OINT 0.05%	Tier 5				
FLUDROCORT TAB 0.1MG	FLUDROCORTISONE ACETATE TAB 0.1 MG	Tier 2				
FLUOCIN ACET CRE 0.01%	FLUOCINOLONE ACETONIDE CREAM 0.01%	Tier 4		X		
FLUOCIN ACET CRE 0.025%	FLUOCINOLONE ACETONIDE CREAM 0.025%	Tier 4		X		
FLUOCIN ACET OIL 0.01%	FLUOCINOLONE ACETONIDE OIL 0.01% (BODY OIL)	Tier 4		X		
FLUOCIN ACET OIL 0.01% SC	FLUOCINOLONE ACETONIDE OIL 0.01% (SCALP OIL)	Tier 4				
FLUOCIN ACET OIL 0.01%BDY	FLUOCINOLONE ACETONIDE OIL 0.01% (BODY OIL)	Tier 4		X		
FLUOCIN ACET OIL BODY	FLUOCINOLONE ACETONIDE OIL 0.01% (BODY OIL)	Tier 4		X		
FLUOCIN ACET OIL SCALP	FLUOCINOLONE ACETONIDE OIL 0.01% (SCALP OIL)	Tier 4				
FLUOCIN ACET OIN 0.025%	FLUOCINOLONE ACETONIDE OINT 0.025%	Tier 3		X		
FLUOCIN ACET SOL 0.01%	FLUOCINOLONE ACETONIDE SOLN 0.01%	Tier 2		X		
FLUOCINONIDE CRE 0.05%	FLUOCINONIDE CREAM 0.05%	Tier 2				
FLUOCINONIDE CRE E 0.05%	FLUOCINONIDE EMULSIFIED BASE CREAM 0.05%	Tier 2				
FLUOCINONIDE GEL 0.05%	FLUOCINONIDE GEL 0.05%	Tier 2				
FLUOCINONIDE OIN 0.05%	FLUOCINONIDE OINT 0.05%	Tier 2				
FLUOCINONIDE SOL 0.05%	FLUOCINONIDE SOLN 0.05%	Tier 2				
FLURANDRENOL CRE 0.05%	FLURANDRENOLIDE CREAM 0.05%	Tier 4		X	X	
FLURANDRENOL LOT 0.05%	FLURANDRENOLIDE LOTION 0.05%	Tier 4		X	X	
FLUTICASONE CRE 0.05%	FLUTICASONE PROPIONATE CREAM 0.05%	Tier 2				
FLUTICASONE OIN 0.005%	FLUTICASONE PROPIONATE OINT 0.005%	Tier 2				
HALOBETASOL CRE 0.05%	HALOBETASOL PROPIONATE CREAM 0.05%	Tier 3		X		
HALOBETASOL OIN 0.05%	HALOBETASOL PROPIONATE OINT 0.05%	Tier 3		X		
HALOG OIN 0.1%	HALCINONIDE OINT 0.1%	Tier 4		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
HC BUTYRATE CRE 0.1%	HYDROCORTISONE BUTYRATE CREAM 0.1%	Tier 2				
HC BUTYRATE OIN 0.1%	HYDROCORTISONE BUTYRATE OINT 0.1%	Tier 2				
HC BUTYRATE SOL 0.1%	HYDROCORTISONE BUTYRATE SOLN 0.1%	Tier 2				
HC VALERATE CRE 0.2%	HYDROCORTISONE VALERATE CREAM 0.2%	Tier 3		X		
HC VALERATE OIN 0.2%	HYDROCORTISONE VALERATE OINT 0.2%	Tier 4		X		
HYDROCORT CRE 2.5%	HYDROCORTISONE CREAM 2.5%	Tier 2				
HYDROCORT LOT 2.5%	HYDROCORTISONE LOTION 2.5%	Tier 2				
HYDROCORT OIN 1%	HYDROCORTISONE OINT 1%	Tier 2				
HYDROCORT OIN 2.5%	HYDROCORTISONE OINT 2.5%	Tier 2				
HYDROCORT TAB 10MG	HYDROCORTISONE TAB 10 MG	Tier 2				
HYDROCORT TAB 20MG	HYDROCORTISONE TAB 20 MG	Tier 2				
HYDROCORT TAB 5MG	HYDROCORTISONE TAB 5 MG	Tier 2				
HYDROCORTISO LOT 2%	HYDROCORTISONE LOTION 2%	Tier 5				
MEDROL TAB 16MG	METHYLPREDNISOLONE TAB 16 MG	Tier 5				
MEDROL TAB 2MG	METHYLPREDNISOLONE TAB 2 MG	Tier 3				
MEDROL TAB 4MG	METHYLPREDNISOLONE TAB 4 MG	Tier 5				
MEDROL TAB 4MG	METHYLPREDNISOLONE TAB THERAPY PACK 4 MG (21)	Tier 5				
MEDROL TAB 8MG	METHYLPREDNISOLONE TAB 8 MG	Tier 5				
METHYLPRED TAB 16MG	METHYLPREDNISOLONE TAB 16 MG	Tier 2				
METHYLPRED TAB 32MG	METHYLPREDNISOLONE TAB 32 MG	Tier 2				
METHYLPRED TAB 4MG	METHYLPREDNISOLONE TAB THERAPY PACK 4 MG (21)	Tier 2				
METHYLPRED TAB 4MG	METHYLPREDNISOLONE TAB 4 MG	Tier 2				
METHYLPRED TAB 8MG	METHYLPREDNISOLONE TAB 8 MG	Tier 2				
MOMETASONE CRE 0.1%	MOMETASONE FUROATE CREAM 0.1%	Tier 2				
MOMETASONE OIN 0.1%	MOMETASONE FUROATE OINT 0.1%	Tier 2				
MOMETASONE SOL 0.1%	MOMETASONE FUROATE SOLUTION 0.1% (LOTION)	Tier 2				
NUCORT LOT 2%	HYDROCORTISONE ACETATE LOTION 2%	Tier 4				
ORAPRED ODT TAB 10MG	PREDNISOLONE SOD PHOS ORALLY DISINTEGR TAB 10 MG (BASE EQ)	Tier 5				
ORAPRED ODT TAB 15MG	PREDNISOLONE SOD PHOS ORALLY DISINTEGR TAB 15 MG (BASE EQ)	Tier 5				
ORAPRED ODT TAB 30MG	PREDNISOLONE SOD PHOS ORALLY DISINTEGR TAB 30 MG (BASE EQ)	Tier 5				
PANDEL CRE 0.1%	HYDROCORTISONE PROBUTATE CREAM 0.1%	Tier 4				
PEDIAPRED SOL 5MG/5ML	PREDNISOLONE SOD PHOSPHATE ORAL SOLN 5 MG/5ML (BASE EQUIV)	Tier 3				
PREDNISOLONE SOL 15MG/5ML	PREDNISOLONE SOD PHOSPHATE ORAL SOLN 15 MG/5ML (BASE EQUIV)	Tier 2				
PREDNISOLONE SOL 15MG/5ML	PREDNISOLONE SOLN 15 MG/5ML	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PREDNISOLONE TAB 10MG ODT	PREDNISOLONE SOD PHOS ORALLY DISINTEGR TAB 10 MG (BASE EQ)	Tier 4				
PREDNISOLONE TAB 15MG ODT	PREDNISOLONE SOD PHOS ORALLY DISINTEGR TAB 15 MG (BASE EQ)	Tier 4				
PREDNISOLONE TAB 30MG ODT	PREDNISOLONE SOD PHOS ORALLY DISINTEGR TAB 30 MG (BASE EQ)	Tier 4				
PREDNISOLONE TAB 5MG	PREDNISOLONE TAB 5 MG	Tier 4				
PREDNISONE CON 5MG/ML	PREDNISONE CONC 5 MG/ML	Tier 2				
PREDNISONE PAK 10MG	PREDNISONE TAB THERAPY PACK 10 MG (21)	Tier 2				
PREDNISONE PAK 10MG	PREDNISONE TAB THERAPY PACK 10 MG (48)	Tier 2				
PREDNISONE PAK 5MG	PREDNISONE TAB THERAPY PACK 5 MG (21)	Tier 2				
PREDNISONE PAK 5MG	PREDNISONE TAB THERAPY PACK 5 MG (48)	Tier 2				
PREDNISONE SOL 5MG/5ML	PREDNISONE ORAL SOLN 5 MG/5ML	Tier 2				
PREDNISONE TAB 10MG	PREDNISONE TAB 10 MG	Tier 2				
PREDNISONE TAB 1MG	PREDNISONE TAB 1 MG	Tier 2				
PREDNISONE TAB 2.5MG	PREDNISONE TAB 2.5 MG	Tier 2				
PREDNISONE TAB 20MG	PREDNISONE TAB 20 MG	Tier 2				
PREDNISONE TAB 50MG	PREDNISONE TAB 50 MG	Tier 2				
PREDNISONE TAB 5MG	PREDNISONE TAB 5 MG	Tier 2				
TAPERDEX PAK 12-DAY	DEXAMETHASONE TAB THERAPY PACK 1.5 MG (49)	Tier 4				
TAPERDEX PAK 6 DAY	DEXAMETHASONE TAB THERAPY PACK 1.5 MG (21)	Tier 5				
TAPERDEX PAK 7-DAY	DEXAMETHASONE TAB THERAPY PACK 1.5 MG (27)	Tier 4				
TEXACORT SOL 2.5%	HYDROCORTISONE SOLN 2.5%	Tier 3				
TOPICORT CRE 0.05%	DESOXIMETASONE CREAM 0.05%	Tier 5		X		
TOPICORT CRE 0.25%	DESOXIMETASONE CREAM 0.25%	Tier 5		X		
TOPICORT GEL 0.05%	DESOXIMETASONE GEL 0.05%	Tier 5		X		
TOPICORT OIN 0.05%	DESOXIMETASONE OINT 0.05%	Tier 5		X		
TOPICORT OIN 0.25%	DESOXIMETASONE OINT 0.25%	Tier 5		X		
TOPICORT SPR 0.25%	DESOXIMETASONE SPRAY 0.25%	Tier 5				
TRIAMCINOLON AER SPRAY	TRIAMCINOLONE ACETONIDE AEROSOL SOLN 0.147 MG/GM	Tier 3		X		
TRIAMCINOLON CRE 0.025%	TRIAMCINOLONE ACETONIDE CREAM 0.025%	Tier 2				
TRIAMCINOLON CRE 0.1%	TRIAMCINOLONE ACETONIDE CREAM 0.1%	Tier 2				
TRIAMCINOLON CRE 0.5%	TRIAMCINOLONE ACETONIDE CREAM 0.5%	Tier 2		X		
TRIAMCINOLON LOT 0.025%	TRIAMCINOLONE ACETONIDE LOTION 0.025%	Tier 2				
TRIAMCINOLON LOT 0.1%	TRIAMCINOLONE ACETONIDE LOTION 0.1%	Tier 2				
TRIAMCINOLON OIN 0.025%	TRIAMCINOLONE ACETONIDE OINT 0.025%	Tier 2				
TRIAMCINOLON OIN 0.1%	TRIAMCINOLONE ACETONIDE OINT 0.1%	Tier 2				
TRIAMCINOLON OIN 0.5%	TRIAMCINOLONE ACETONIDE OINT 0.5%	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
TRIDERM CRE 0.5%	TRIAMCINOLONE ACETONIDE CREAM 0.5%	Tier 2		X		
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)						
NGENLA INJ 24/1.2ML	SOMATROGON-GHLA SOLUTION PEN-INJECTOR 24 MG/1.2ML (20 MG/ML)	Tier 5	X	X		X
NGENLA INJ 60/1.2ML	SOMATROGON-GHLA SOLUTION PEN-INJECTOR 60 MG/1.2ML (50 MG/ML)	Tier 5	X	X		X
VEOZAH TAB 45MG	FEZOLINETANT TAB 45 MG	Tier 5	X	X		
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) - Hormone Replacement/Modifying Drugs						
DESMOPRESSIN INJ 40/10ML	DESMOPRESSIN ACETATE INJ 4 MCG/ML	Tier 2				
DESMOPRESSIN INJ 4MCG/ML	DESMOPRESSIN ACETATE PRESERVATIVE FREE (PF) INJ 4 MCG/ML	Tier 2				
DESMOPRESSIN INJ 4MCG/ML	DESMOPRESSIN ACETATE INJ 4 MCG/ML	Tier 2				
DESMOPRESSIN SPR 0.01%	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	Tier 2				
DESMOPRESSIN SPR 0.01%	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01%	Tier 2				
DESMOPRESSIN TAB 0.1MG	DESMOPRESSIN ACETATE TAB 0.1 MG	Tier 2				
DESMOPRESSIN TAB 0.2MG	DESMOPRESSIN ACETATE TAB 0.2 MG	Tier 2				
INCRELEX INJ 40MG/4ML	MECASERMIN INJ 40 MG/4ML (10 MG/ML)	Tier 4	X	X		X
NOC DURNA SUB 27.7MCG	DESMOPRESSIN ACETATE SUBLINGUAL TAB 27.7 MCG	Tier 4	X	X		
NOC DURNA SUB 55.3MCG	DESMOPRESSIN ACETATE SUBLINGUAL TAB 55.3 MCG	Tier 4	X	X		
NORDITROPIN INJ 10/1.5ML	SOMATROPIN SOLUTION PEN-INJECTOR 10 MG/1.5ML	Tier 4	X	X		X
NORDITROPIN INJ 15/1.5ML	SOMATROPIN SOLUTION PEN-INJECTOR 15 MG/1.5ML	Tier 4	X	X		X
NORDITROPIN INJ 30/3ML	SOMATROPIN SOLUTION PEN-INJECTOR 30 MG/3ML	Tier 4	X	X		X
NORDITROPIN INJ 5/1.5ML	SOMATROPIN SOLUTION PEN-INJECTOR 5 MG/1.5ML	Tier 4	X	X		X
OMNITROPE INJ 10/1.5ML	SOMATROPIN SOLUTION CARTRIDGE 10 MG/1.5ML	Tier 4	X	X		X
OMNITROPE INJ 5.8MG	SOMATROPIN FOR INJ 5.8 MG	Tier 4	X	X		X
OMNITROPE INJ 5/1.5ML	SOMATROPIN SOLUTION CARTRIDGE 5 MG/1.5ML	Tier 4	X	X		X
SKYTROFA INJ 0.7MG	LONAPEGSOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 0.7 MG	Tier 5	X			X
SKYTROFA INJ 1.4MG	LONAPEGSOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 1.4 MG	Tier 5	X			X
SKYTROFA INJ 1.8MG	LONAPEGSOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 1.8 MG	Tier 5	X			X
SKYTROFA INJ 11MG	LONAPEGSOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 11 MG	Tier 5	X	X		X
SKYTROFA INJ 13.3MG	LONAPEGSOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CART 13.3 MG	Tier 5	X	X		X
SKYTROFA INJ 2.1MG	LONAPEGSOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 2.1 MG	Tier 5	X			X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
SKYTROFA INJ 2.5MG	LONAPEGSOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 2.5 MG	Tier 5	X			X
SKYTROFA INJ 3.6MG	LONAPEGSOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 3.6 MG	Tier 5	X	X		X
SKYTROFA INJ 3MG	LONAPEGSOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 3 MG	Tier 5	X	X		X
SKYTROFA INJ 4.3MG	LONAPEGSOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 4.3 MG	Tier 5	X	X		X
SKYTROFA INJ 5.2MG	LONAPEGSOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 5.2 MG	Tier 5	X	X		X
SKYTROFA INJ 6.3MG	LONAPEGSOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 6.3 MG	Tier 5	X	X		X
SKYTROFA INJ 7.6MG	LONAPEGSOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 7.6 MG	Tier 5	X	X		X
SKYTROFA INJ 9.1MG	LONAPEGSOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 9.1 MG	Tier 5	X	X		X
ZOMACTON INJ 5MG	SOMATROPIN FOR SUBCUTANEOUS INJ 5 MG	Tier 5	X	X		X
ZORBTIVE INJ 8.8MG	SOMATROPIN (NON-REFRIGERATED) FOR SUBCUTANEOUS INJ 8.8 MG	Tier 5	X	X		X
Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins) - Hormone Replacement/Modifying Drugs						
MIFEPRISTONE TAB 300MG	MIFEPRISTONE TAB 300 MG	Tier 5	X	X		X
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Thyroid Replacement Drugs						
ARMOUR THYRO TAB 120MG	THYROID TAB 120 MG (2 GRAIN)	Tier 4				
ARMOUR THYRO TAB 15MG	THYROID TAB 15 MG (1/4 GRAIN)	Tier 4				
ARMOUR THYRO TAB 180MG	THYROID TAB 180 MG (3 GRAIN)	Tier 4				
ARMOUR THYRO TAB 240MG	THYROID TAB 240 MG (4 GRAIN)	Tier 4				
ARMOUR THYRO TAB 300MG	THYROID TAB 300 MG (5 GRAIN)	Tier 4				
ARMOUR THYRO TAB 30MG	THYROID TAB 30 MG (1/2 GRAIN)	Tier 4				
ARMOUR THYRO TAB 60MG	THYROID TAB 60 MG (1 GRAIN)	Tier 4				
ARMOUR THYRO TAB 90MG	THYROID TAB 90 MG (1 1/2 GRAIN)	Tier 4				
ERMEZA SOL 150/5ML	LEVOTHYROXINE SODIUM ORAL SOLUTION 150 MCG/5ML	Tier 4	X			
EUTHYROX TAB 100MCG	LEVOTHYROXINE SODIUM TAB 100 MCG	Tier 2				
EUTHYROX TAB 112MCG	LEVOTHYROXINE SODIUM TAB 112 MCG	Tier 2				
EUTHYROX TAB 125MCG	LEVOTHYROXINE SODIUM TAB 125 MCG	Tier 2				
EUTHYROX TAB 137MCG	LEVOTHYROXINE SODIUM TAB 137 MCG	Tier 2				
EUTHYROX TAB 150MCG	LEVOTHYROXINE SODIUM TAB 150 MCG	Tier 2				
EUTHYROX TAB 175MCG	LEVOTHYROXINE SODIUM TAB 175 MCG	Tier 2				
EUTHYROX TAB 200MCG	LEVOTHYROXINE SODIUM TAB 200 MCG	Tier 2				
EUTHYROX TAB 25MCG	LEVOTHYROXINE SODIUM TAB 25 MCG	Tier 2				
EUTHYROX TAB 50MCG	LEVOTHYROXINE SODIUM TAB 50 MCG	Tier 2				
EUTHYROX TAB 75MCG	LEVOTHYROXINE SODIUM TAB 75 MCG	Tier 2				
EUTHYROX TAB 88MCG	LEVOTHYROXINE SODIUM TAB 88 MCG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
EVEXITHROID TAB 120MG	THYROID TAB 120 MG (2 GRAIN)	Tier 4				
EVEXITHROID TAB 15MG	THYROID TAB 15 MG (1/4 GRAIN)	Tier 4				
EVEXITHROID TAB 180MG	THYROID TAB 180 MG (3 GRAIN)	Tier 4				
EVEXITHROID TAB 30MG	THYROID TAB 30 MG (1/2 GRAIN)	Tier 4				
EVEXITHROID TAB 60MG	THYROID TAB 60 MG (1 GRAIN)	Tier 4				
EVEXITHROID TAB 90MG	THYROID TAB 90 MG (1 1/2 GRAIN)	Tier 4				
LEVO-T TAB 100MCG	LEVOTHYROXINE SODIUM TAB 100 MCG	Tier 2				
LEVO-T TAB 112MCG	LEVOTHYROXINE SODIUM TAB 112 MCG	Tier 2				
LEVO-T TAB 125MCG	LEVOTHYROXINE SODIUM TAB 125 MCG	Tier 2				
LEVO-T TAB 137MCG	LEVOTHYROXINE SODIUM TAB 137 MCG	Tier 2				
LEVO-T TAB 150MCG	LEVOTHYROXINE SODIUM TAB 150 MCG	Tier 2				
LEVO-T TAB 175MCG	LEVOTHYROXINE SODIUM TAB 175 MCG	Tier 2				
LEVO-T TAB 200MCG	LEVOTHYROXINE SODIUM TAB 200 MCG	Tier 2				
LEVO-T TAB 25MCG	LEVOTHYROXINE SODIUM TAB 25 MCG	Tier 2				
LEVO-T TAB 300 MCG	LEVOTHYROXINE SODIUM TAB 300 MCG	Tier 2				
LEVO-T TAB 50MCG	LEVOTHYROXINE SODIUM TAB 50 MCG	Tier 2				
LEVO-T TAB 75MCG	LEVOTHYROXINE SODIUM TAB 75 MCG	Tier 2				
LEVO-T TAB 88MCG	LEVOTHYROXINE SODIUM TAB 88 MCG	Tier 2				
LEVOTHYROXIN TAB 100MCG	LEVOTHYROXINE SODIUM TAB 100 MCG	Tier 2				
LEVOTHYROXIN TAB 112MCG	LEVOTHYROXINE SODIUM TAB 112 MCG	Tier 2				
LEVOTHYROXIN TAB 125MCG	LEVOTHYROXINE SODIUM TAB 125 MCG	Tier 2				
LEVOTHYROXIN TAB 137MCG	LEVOTHYROXINE SODIUM TAB 137 MCG	Tier 2				
LEVOTHYROXIN TAB 150MCG	LEVOTHYROXINE SODIUM TAB 150 MCG	Tier 2				
LEVOTHYROXIN TAB 175MCG	LEVOTHYROXINE SODIUM TAB 175 MCG	Tier 2				
LEVOTHYROXIN TAB 200MCG	LEVOTHYROXINE SODIUM TAB 200 MCG	Tier 2				
LEVOTHYROXIN TAB 25MCG	LEVOTHYROXINE SODIUM TAB 25 MCG	Tier 2				
LEVOTHYROXIN TAB 300MCG	LEVOTHYROXINE SODIUM TAB 300 MCG	Tier 2				
LEVOTHYROXIN TAB 50MCG	LEVOTHYROXINE SODIUM TAB 50 MCG	Tier 2				
LEVOTHYROXIN TAB 75MCG	LEVOTHYROXINE SODIUM TAB 75 MCG	Tier 2				
LEVOTHYROXIN TAB 88MCG	LEVOTHYROXINE SODIUM TAB 88 MCG	Tier 2				
LEVOXYL TAB 100MCG	LEVOTHYROXINE SODIUM TAB 100 MCG	Tier 3				
LEVOXYL TAB 112MCG	LEVOTHYROXINE SODIUM TAB 112 MCG	Tier 3				
LEVOXYL TAB 125MCG	LEVOTHYROXINE SODIUM TAB 125 MCG	Tier 3				
LEVOXYL TAB 137MCG	LEVOTHYROXINE SODIUM TAB 137 MCG	Tier 3				
LEVOXYL TAB 150MCG	LEVOTHYROXINE SODIUM TAB 150 MCG	Tier 3				
LEVOXYL TAB 175MCG	LEVOTHYROXINE SODIUM TAB 175 MCG	Tier 3				
LEVOXYL TAB 200MCG	LEVOTHYROXINE SODIUM TAB 200 MCG	Tier 3				
LEVOXYL TAB 25MCG	LEVOTHYROXINE SODIUM TAB 25 MCG	Tier 3				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
LEVOXYL TAB 50MCG	LEVOTHYROXINE SODIUM TAB 50 MCG	Tier 3				
LEVOXYL TAB 75MCG	LEVOTHYROXINE SODIUM TAB 75 MCG	Tier 3				
LEVOXYL TAB 88MCG	LEVOTHYROXINE SODIUM TAB 88 MCG	Tier 3				
LIOMNY TAB 25MCG	LIOETHYRONINE SODIUM TAB 25 MCG	Tier 3				
LIOMNY TAB 50MCG	LIOETHYRONINE SODIUM TAB 50 MCG	Tier 3				
LIOMNY TAB 5MCG	LIOETHYRONINE SODIUM TAB 5 MCG	Tier 3				
LIOETHYRONINE TAB 25MCG	LIOETHYRONINE SODIUM TAB 25 MCG	Tier 3				
LIOETHYRONINE TAB 50MCG	LIOETHYRONINE SODIUM TAB 50 MCG	Tier 3				
LIOETHYRONINE TAB 5MCG	LIOETHYRONINE SODIUM TAB 5 MCG	Tier 3				
NIVA THYROID TAB 120MG	THYROID TAB 120 MG (2 GRAIN)	Tier 4				
NIVA THYROID TAB 15MG	THYROID TAB 15 MG (1/4 GRAIN)	Tier 4				
NIVA THYROID TAB 30MG	THYROID TAB 30 MG (1/2 GRAIN)	Tier 4				
NIVA THYROID TAB 60MG	THYROID TAB 60 MG (1 GRAIN)	Tier 4				
NIVA THYROID TAB 90MG	THYROID TAB 90 MG (1 1/2 GRAIN)	Tier 4				
NP THYROID TAB 120MG	THYROID TAB 120 MG (2 GRAIN)	Tier 2				
NP THYROID TAB 15MG	THYROID TAB 15 MG (1/4 GRAIN)	Tier 2				
NP THYROID TAB 30MG	THYROID TAB 30 MG (1/2 GRAIN)	Tier 2				
NP THYROID TAB 60MG	THYROID TAB 60 MG (1 GRAIN)	Tier 2				
NP THYROID TAB 90MG	THYROID TAB 90 MG (1 1/2 GRAIN)	Tier 2				
RENTHYROID TAB 120MG	THYROID TAB 120 MG (2 GRAIN)	Tier 4				
RENTHYROID TAB 15MG	THYROID TAB 15 MG (1/4 GRAIN)	Tier 4				
RENTHYROID TAB 30MG	THYROID TAB 30 MG (1/2 GRAIN)	Tier 4				
RENTHYROID TAB 60MG	THYROID TAB 60 MG (1 GRAIN)	Tier 4				
RENTHYROID TAB 90MG	THYROID TAB 90 MG (1 1/2 GRAIN)	Tier 4				
THYROID TAB 120MG	THYROID TAB 120 MG (2 GRAIN)	Tier 2				
THYROID TAB 15MG	THYROID TAB 15 MG (1/4 GRAIN)	Tier 2				
THYROID TAB 30MG	THYROID TAB 30 MG (1/2 GRAIN)	Tier 2				
THYROID TAB 60MG	THYROID TAB 60 MG (1 GRAIN)	Tier 2				
THYROID TAB 90MG	THYROID TAB 90 MG (1 1/2 GRAIN)	Tier 2				
UNITHROID TAB 100MCG	LEVOTHYROXINE SODIUM TAB 100 MCG	Tier 2				
UNITHROID TAB 112MCG	LEVOTHYROXINE SODIUM TAB 112 MCG	Tier 2				
UNITHROID TAB 125MCG	LEVOTHYROXINE SODIUM TAB 125 MCG	Tier 2				
UNITHROID TAB 137MCG	LEVOTHYROXINE SODIUM TAB 137 MCG	Tier 2				
UNITHROID TAB 150MCG	LEVOTHYROXINE SODIUM TAB 150 MCG	Tier 2				
UNITHROID TAB 175MCG	LEVOTHYROXINE SODIUM TAB 175 MCG	Tier 2				
UNITHROID TAB 200MCG	LEVOTHYROXINE SODIUM TAB 200 MCG	Tier 2				
UNITHROID TAB 25MCG	LEVOTHYROXINE SODIUM TAB 25 MCG	Tier 2				
UNITHROID TAB 300MCG	LEVOTHYROXINE SODIUM TAB 300 MCG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
UNITHROID TAB 50MCG	LEVOTHYROXINE SODIUM TAB 50 MCG	Tier 2				
UNITHROID TAB 75MCG	LEVOTHYROXINE SODIUM TAB 75 MCG	Tier 2				
UNITHROID TAB 88MCG	LEVOTHYROXINE SODIUM TAB 88 MCG	Tier 2				
Hormonal Agents, Suppressant (Adrenal) - Drugs to Regulate Hormones						
LYSODREN TAB 500MG	MITOTANE TAB 500 MG	Tier 4				
Hormonal Agents, Suppressant (Pituitary) - Hormone Suppressants						
CABERGOLINE TAB 0.5MG	CABERGOLINE TAB 0.5 MG	Tier 3				
FIRMAGON INJ 120MG	DEGARELIX ACETATE FOR INJ 120 MG/VIAL (240 MG DOSE)	Tier 5				X
FIRMAGON INJ 80MG	DEGARELIX ACETATE FOR INJ 80 MG (BASE EQUIV)	Tier 5				X
LEUPROLIDE INJ 14 DAY	LEUPROLIDE ACETATE INJ KIT 1 MG/0.2ML (5 MG/ML)	Tier 2	X			
LEUPROLIDE INJ 1MG/0.2	LEUPROLIDE ACETATE INJ KIT 1 MG/0.2ML (5 MG/ML)	Tier 2	X			
LEUPROLIDE KIT 14 DAY	LEUPROLIDE ACETATE INJ KIT 1 MG/0.2ML (5 MG/ML)	Tier 2	X			
LEUPROLIDE KIT 1MG/0.2	LEUPROLIDE ACETATE INJ KIT 1 MG/0.2ML (5 MG/ML)	Tier 2	X			
OCTREOTIDE INJ 1000/5ML	OCTREOTIDE ACETATE INJ 200 MCG/ML (0.2 MG/ML)	Tier 2	X			X
OCTREOTIDE INJ 1000MCG	OCTREOTIDE ACETATE INJ 1000 MCG/ML (1 MG/ML)	Tier 2	X			X
OCTREOTIDE INJ 100MCG	OCTREOTIDE ACETATE INJ 100 MCG/ML (0.1 MG/ML)	Tier 2	X			X
OCTREOTIDE INJ 100MCG	OCTREOTIDE ACETATE SUBCUTANEOUS SOLN PREF SYR 100 MCG/ML	Tier 2	X			X
OCTREOTIDE INJ 200MCG	OCTREOTIDE ACETATE INJ 200 MCG/ML (0.2 MG/ML)	Tier 2	X			X
OCTREOTIDE INJ 5000/5ML	OCTREOTIDE ACETATE INJ 1000 MCG/ML (1 MG/ML)	Tier 2	X			X
OCTREOTIDE INJ 500MCG	OCTREOTIDE ACETATE INJ 500 MCG/ML (0.5 MG/ML)	Tier 2	X			X
OCTREOTIDE INJ 500MCG	OCTREOTIDE ACETATE SUBCUTANEOUS SOLN PREF SYR 500 MCG/ML	Tier 2	X			X
OCTREOTIDE INJ 50MCG/ML	OCTREOTIDE ACETATE INJ 50 MCG/ML (0.05 MG/ML)	Tier 2	X			X
OCTREOTIDE INJ 50MCG/ML	OCTREOTIDE ACETATE SUBCUTANEOUS SOLN PREF SYR 50 MCG/ML	Tier 2	X			X
ORIAHNN CAP	ELAGOLIX-ESTRAD-NORETH 300-1-0.5MG & ELAGOLIX 300MG CAP PACK	Tier 3	X	X		
ORILISSA TAB 150MG	ELAGOLIX SODIUM TAB 150 MG (BASE EQUIV)	Tier 3	X	X		
ORILISSA TAB 200MG	ELAGOLIX SODIUM TAB 200 MG (BASE EQUIV)	Tier 3	X	X		
SYNAREL SOL 2MG/ML	NAFARELIN ACETATE NASAL SOLN 2 MG/ML (200 MCG/ACT) (BASE EQ)	Tier 3				
Immune Suppressants						

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
SKYRIZI INJ 150MG/ML	RISANKIZUMAB-RZAA SOLN PREFILLED SYRINGE 150 MG/ML	Tier 4	X	X		X
SKYRIZI PEN INJ 150MG/ML	RISANKIZUMAB-RZAA SOLN AUTO-INJECTOR 150 MG/ML	Tier 4	X	X		X
Immune Suppressants - Immune System Drugs						
ADALIMU-ADAZ INJ 10/0.1ML	ADALIMUMAB-ADAZ SOLN PREFILLED SYRINGE 10 MG/0.1ML	Tier 4	X	X		X
ADALIMU-ADAZ INJ 20/0.2ML	ADALIMUMAB-ADAZ SOLN PREFILLED SYRINGE 20 MG/0.2ML	Tier 4	X	X		X
ADALIMU-ADAZ INJ 40/0.4ML	ADALIMUMAB-ADAZ SOLN AUTO-INJECTOR 40 MG/0.4ML	Tier 4	X	X		X
ADALIMU-ADAZ INJ 40/0.4ML	ADALIMUMAB-ADAZ SOLN PREFILLED SYRINGE 40 MG/0.4ML	Tier 4	X	X		X
ADALIMU-ADAZ INJ 80/0.8ML	ADALIMUMAB-ADAZ SOLN AUTO-INJECTOR 80 MG/0.8ML	Tier 4	X			X
AMJEVITA INJ 20/0.2ML	ADALIMUMAB-ATTO SOLN PREFILLED SYRINGE 20 MG/0.2ML	Tier 4	X			X
AMJEVITA INJ 40/0.4ML	ADALIMUMAB-ATTO SOLN PREFILLED SYRINGE 40 MG/0.4ML	Tier 4	X	X		X
AMJEVITA INJ 40/0.4ML	ADALIMUMAB-ATTO SOLN AUTO-INJECTOR 40 MG/0.4ML	Tier 4	X	X		X
AMJEVITA INJ 80/0.8ML	ADALIMUMAB-ATTO SOLN AUTO-INJECTOR 80 MG/0.8ML	Tier 4	X	X		X
AZASAN TAB 100MG	AZATHIOPRINE TAB 100 MG	Tier 5				
AZASAN TAB 75 MG	AZATHIOPRINE TAB 75 MG	Tier 5				
AZATHIOPRINE TAB 100MG	AZATHIOPRINE TAB 100 MG	Tier 4				
AZATHIOPRINE TAB 50MG	AZATHIOPRINE TAB 50 MG	Tier 2				
AZATHIOPRINE TAB 75MG	AZATHIOPRINE TAB 75 MG	Tier 4				
CIMZIA PREFL KIT 200MG/ML	CERTOLIZUMAB PEGOL PREFILLED SYRINGE KIT 200 MG/ML	Tier 4	X	X		X
CIMZIA START KIT 200MG/ML	CERTOLIZUMAB PEGOL PREFILLED SYRINGE KIT 200 MG/ML	Tier 4	X	X		X
CYCLOSPORINE CAP 100MG	CYCLOSPORINE CAP 100 MG	Tier 2				
CYCLOSPORINE CAP 100MG MD	CYCLOSPORINE MODIFIED CAP 100 MG	Tier 2				
CYCLOSPORINE CAP 25MG	CYCLOSPORINE CAP 25 MG	Tier 2				
CYCLOSPORINE CAP 25MG MOD	CYCLOSPORINE MODIFIED CAP 25 MG	Tier 2				
CYCLOSPORINE CAP 50MG MOD	CYCLOSPORINE MODIFIED CAP 50 MG	Tier 2				
CYCLOSPORINE SOL MODIFIED	CYCLOSPORINE MODIFIED ORAL SOLN 100 MG/ML	Tier 2				
ENBREL INJ 25/0.5ML	ETANERCEPT SUBCUTANEOUS SOLN PREFILLED SYRINGE 25 MG/0.5ML	Tier 4	X	X		X
ENBREL INJ 25MG	ETANERCEPT SUBCUTANEOUS INJ 25 MG/0.5ML	Tier 4	X	X		X
ENBREL INJ 50MG/ML	ETANERCEPT SUBCUTANEOUS SOLN PREFILLED SYRINGE 50 MG/ML	Tier 4	X	X		X
ENBREL MINI INJ 50MG/ML	ETANERCEPT SUBCUTANEOUS SOLUTION CARTRIDGE 50 MG/ML	Tier 4	X	X		X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ENBREL SRCLK INJ 50MG/ML	ETANERCEPT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 50 MG/ML	Tier 4	X	X		X
GENGRAF CAP 100MG	CYCLOSPORINE MODIFIED CAP 100 MG	Tier 2				
GENGRAF CAP 25MG	CYCLOSPORINE MODIFIED CAP 25 MG	Tier 2				
GENGRAF SOL 100MG/ML	CYCLOSPORINE MODIFIED ORAL SOLN 100 MG/ML	Tier 2				
JYLAMVO SOL 2MG/ML	METHOTREXATE ORAL SOLN 2 MG/ML	Tier 5	X			
KINERET INJ	ANAKINRA SUBCUTANEOUS SOLN PREFILLED SYRINGE 100 MG/0.67ML	Tier 5	X	X	X	X
METHOTREXATE INJ 1GM	METHOTREXATE SODIUM FOR INJ 1 GM	Tier 2				
METHOTREXATE INJ 1GM/40ML	METHOTREXATE SODIUM INJ PF 1000 MG/40ML (25 MG/ML)	Tier 2				
METHOTREXATE INJ 250/10ML	METHOTREXATE SODIUM INJ PF 250 MG/10ML (25 MG/ML)	Tier 2				
METHOTREXATE INJ 25MG/ML	METHOTREXATE SODIUM INJ 50 MG/2ML (25 MG/ML)	Tier 2				
METHOTREXATE INJ 25MG/ML	METHOTREXATE SODIUM INJ PF 1000 MG/40ML (25 MG/ML)	Tier 2				
METHOTREXATE INJ 25MG/ML	METHOTREXATE SODIUM INJ 250 MG/10ML (25 MG/ML)	Tier 2				
METHOTREXATE INJ 50MG/2ML	METHOTREXATE SODIUM INJ PF 50 MG/2ML (25 MG/ML)	Tier 2				
METHOTREXATE INJ 50MG/2ML	METHOTREXATE SODIUM INJ 50 MG/2ML (25 MG/ML)	Tier 2				
METHOTREXATE TAB 2.5MG	METHOTREXATE SODIUM TAB 2.5 MG (BASE EQUIV)	Tier 2				
MYCOPHENOLAT CAP 250MG	MYCOPHENOLATE MOFETIL CAP 250 MG	Tier 2				
MYCOPHENOLAT SUS 200MG/ML	MYCOPHENOLATE MOFETIL FOR ORAL SUSP 200 MG/ML	Tier 2				
MYCOPHENOLAT TAB 500MG	MYCOPHENOLATE MOFETIL TAB 500 MG	Tier 2				
MYCOPHENOLIC TAB 180MG DR	MYCOPHENOLATE SODIUM TAB DR 180 MG (MYCOPHENOLIC ACID EQUIV)	Tier 4				
MYCOPHENOLIC TAB 360MG DR	MYCOPHENOLATE SODIUM TAB DR 360 MG (MYCOPHENOLIC ACID EQUIV)	Tier 4				
MYHIBBIN SUS 200MG/ML	MYCOPHENOLATE MOFETIL ORAL SUSP 200 MG/ML	Tier 2				
OLUMIANT TAB 1MG	BARICITINIB TAB 1 MG	Tier 5	X	X	X	
OLUMIANT TAB 2MG	BARICITINIB TAB 2 MG	Tier 5	X	X	X	X
OLUMIANT TAB 4MG	BARICITINIB TAB 4 MG	Tier 5	X	X	X	
OMVOH INJ 100/200	MIRIKIZUMAB-MRKZ SUBCUTANEOUS AUTO-INJ 100 MG/ML & 200MG/2ML	Tier 4	X	X		X
OMVOH INJ 100/200	MIRIKIZUMAB-MRKZ SUBCUTANEOUS PREF SYR 100 MG/ML & 200MG/2ML	Tier 4	X	X		X
OMVOH INJ 100MG/ML	MIRIKIZUMAB-MRKZ SUBCUTANEOUS SOLN AUTO-INJECTOR 100 MG/ML	Tier 4	X	X		X
OMVOH INJ 100MG/ML	MIRIKIZUMAB-MRKZ SUBCUTANEOUS SOL PREFILL SYRINGE 100 MG/ML	Tier 4	X	X		X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ORENCIA INJ 125MG/ML	ABATACEPT SUBCUTANEOUS SOLN PREFILLED SYRINGE 125 MG/ML	Tier 5	X	X	X	X
ORENCIA INJ 50/0.4ML	ABATACEPT SUBCUTANEOUS SOLN PREFILLED SYRINGE 50 MG/0.4ML	Tier 5	X	X	X	X
ORENCIA INJ 87.5/0.7	ABATACEPT SUBCUTANEOUS SOLN PREFILLED SYRINGE 87.5 MG/0.7ML	Tier 5	X	X	X	X
ORENCIA CLCK INJ 125MG/ML	ABATACEPT SUBCUTANEOUS SOLN AUTO-INJECTOR 125 MG/ML	Tier 5	X	X	X	X
PROGRAF CAP 0.5MG	TACROLIMUS CAP 0.5 MG	Tier 5				
PROGRAF CAP 1MG	TACROLIMUS CAP 1 MG	Tier 5				
PROGRAF CAP 5MG	TACROLIMUS CAP 5 MG	Tier 5				
PROGRAF GRA 0.2MG	TACROLIMUS PACKET FOR SUSP 0.2 MG	Tier 5	X			
PROGRAF GRA 1MG	TACROLIMUS PACKET FOR SUSP 1 MG	Tier 5	X			
RAPAMUNE SOL 1MG/ML	SIROLIMUS ORAL SOLN 1 MG/ML	Tier 5				
RASUVO INJ 10MG	METHOTREXATE SOLN PF AUTO-INJECTOR 10 MG/0.2ML	Tier 3		X		
RASUVO INJ 12.5MG	METHOTREXATE SOLN PF AUTO-INJECTOR 12.5 MG/0.25ML	Tier 3		X		
RASUVO INJ 15MG	METHOTREXATE SOLN PF AUTO-INJECTOR 15 MG/0.3ML	Tier 3		X		
RASUVO INJ 175MG	METHOTREXATE SOLN PF AUTO-INJECTOR 175 MG/0.35ML	Tier 3		X		
RASUVO INJ 20MG	METHOTREXATE SOLN PF AUTO-INJECTOR 20 MG/0.4ML	Tier 3		X		
RASUVO INJ 22.5MG	METHOTREXATE SOLN PF AUTO-INJECTOR 22.5 MG/0.45ML	Tier 3		X		
RASUVO INJ 25MG	METHOTREXATE SOLN PF AUTO-INJECTOR 25 MG/0.5ML	Tier 3		X		
RASUVO INJ 30MG	METHOTREXATE SOLN PF AUTO-INJECTOR 30 MG/0.6ML	Tier 3		X		
RASUVO INJ 7.5MG	METHOTREXATE SOLN PF AUTO-INJECTOR 7.5 MG/0.15ML	Tier 3		X		
SANDIMMUNE SOL 100MG/ML	CYCLOSPORINE ORAL SOLN 100 MG/ML	Tier 5				
SIMPONI INJ 100MG/ML	GOLIMUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 100 MG/ML	Tier 4	X	X		X
SIMPONI INJ 100MG/ML	GOLIMUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 100 MG/ML	Tier 4	X	X		X
SIMPONI INJ 50/0.5ML	GOLIMUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 50 MG/0.5ML	Tier 4	X	X		X
SIMPONI INJ 50/0.5ML	GOLIMUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 50 MG/0.5ML	Tier 4	X	X		X
SIROLIMUS SOL 1MG/ML	SIROLIMUS ORAL SOLN 1 MG/ML	Tier 4				
SIROLIMUS TAB 0.5MG	SIROLIMUS TAB 0.5 MG	Tier 2				
SIROLIMUS TAB 1MG	SIROLIMUS TAB 1 MG	Tier 2				
SIROLIMUS TAB 2MG	SIROLIMUS TAB 2 MG	Tier 2				
SKYRIZI INJ 180/1.2	RISANKIZUMAB-RZAA SUBCUTANEOUS SOLN CARTRIDGE 180 MG/1.2ML	Tier 4	X	X		X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
SKYRIZI INJ 360/2.4	RISANKIZUMAB-RZAA SUBCUTANEOUS SOLN CARTRIDGE 360 MG/2.4ML	Tier 4	X	X		X
STELARA INJ 45/0.5ML	USTEKINUMAB SOLN PREFILLED SYRINGE 45 MG/0.5ML	Tier 3	X	X		X
STELARA INJ 90MG/ML	USTEKINUMAB SOLN PREFILLED SYRINGE 90 MG/ML	Tier 3	X	X		X
TACROLIMUS CAP 0.5MG	TACROLIMUS CAP 0.5 MG	Tier 2				
TACROLIMUS CAP 1MG	TACROLIMUS CAP 1 MG	Tier 2				
TACROLIMUS CAP 5MG	TACROLIMUS CAP 5 MG	Tier 2				
TREXALL TAB 10MG	METHOTREXATE SODIUM TAB 10 MG (BASE EQUIV)	Tier 3				
TREXALL TAB 15MG	METHOTREXATE SODIUM TAB 15 MG (BASE EQUIV)	Tier 3				
TREXALL TAB 5MG	METHOTREXATE SODIUM TAB 5 MG (BASE EQUIV)	Tier 3				
TREXALL TAB 7.5MG	METHOTREXATE SODIUM TAB 7.5 MG (BASE EQUIV)	Tier 3				
USTEKINUMAB INJ 45/0.5ML	USTEKINUMAB SOLN PREFILLED SYRINGE 45 MG/0.5ML	Tier 3	X	X		X
USTEKINUMAB INJ 90MG/ML	USTEKINUMAB SOLN PREFILLED SYRINGE 90 MG/ML	Tier 3	X	X		X
XATMEP SOL 2.5MG/ML	METHOTREXATE ORAL SOLN 2.5 MG/ML	Tier 5	X			
XELJANZ SOL 1MG/ML	TOFACITINIB CITRATE ORAL SOLN 1 MG/ML (BASE EQUIVALENT)	Tier 4	X	X		X
XELJANZ TAB 10MG	TOFACITINIB CITRATE TAB 10 MG (BASE EQUIVALENT)	Tier 4	X	X		X
XELJANZ TAB 5MG	TOFACITINIB CITRATE TAB 5 MG (BASE EQUIVALENT)	Tier 4	X	X		X
XELJANZ XR TAB 11MG	TOFACITINIB CITRATE TAB ER 24HR 11 MG (BASE EQUIVALENT)	Tier 4	X	X		X
XELJANZ XR TAB 22MG	TOFACITINIB CITRATE TAB ER 24HR 22 MG (BASE EQUIVALENT)	Tier 4	X	X		
Immunological Agents, Other						
BIMZELX INJ 160MG/ML	BIMEKIZUMAB-BKZX SUBCUTANEOUS SOLN PREFILLED SYR 160 MG/ML	Tier 5	X	X	X	X
BIMZELX INJ 160MG/ML	BIMEKIZUMAB-BKZX SUBCUTANEOUS SOLN AUTO-INJECTOR 160 MG/ML	Tier 5	X	X	X	X
BIMZELX INJ 320MG/2	BIMEKIZUMAB-BKZX SUBCUTANEOUS SOLN AUTO-INJECTOR 320 MG/2ML	Tier 5	X	X	X	X
BIMZELX INJ 320MG/2	BIMEKIZUMAB-BKZX SUBCUTANEOUS SOLN PREFILLED SYR 320 MG/2ML	Tier 5	X	X	X	X
JOENJA TAB 70MG	LENIOLISIB PHOSPHATE TAB 70 MG	Tier 4	X	X		X
VIJOICE GRA 50MG	ALPELISIB (PROS) ORAL GRANULES PACKET 50 MG	Tier 5	X	X		X
VIJOICE TAB 125MG	ALPELISIB (PROS) TAB THERAPY PACK 125 MG DAILY DOSE	Tier 5	X	X		X
VIJOICE TAB 250MG	ALPELISIB (PROS) PAK 250 MG DAILY DOSE (200 MG & 50 MG TABS)	Tier 5	X	X		X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
VIJOICE TAB 50MG	ALPELISIB (PROS) TAB THERAPY PACK 50 MG DAILY DOSE	Tier 5	X	X		X
VYVGART INJ HYTRULO	EFGARTIGIMOD ALF-HYALUR-QVFC PREF SYR 1000-10000 MG-UNIT/5ML	Tier 5	X	X		X
Immunomodulators - Immune System Drugs						
ACTEMRA INJ 162/0.9	TOCILIZUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 162 MG/0.9ML	Tier 5	X	X	X	X
ACTEMRA INJ ACTPEN	TOCILIZUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 162 MG/0.9ML	Tier 5	X	X	X	X
ACTIMMUNE INJ 2MU/0.5	INTERFERON GAMMA-1B INJ 100 MCG/0.5ML (2000000 UNIT/0.5ML)	Tier 4	X	X		X
ALFERON N INJ 5MU/ML	INTERFERON ALFA-N3 INJ 5000000 UNIT/ML	Tier 4				
ARCALYST INJ 220MG	RILONACEPT FOR INJ 220 MG	Tier 4	X	X		X
BENLYSTA INJ 200MG/ML	BELIMUMAB SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/ML	Tier 4	X	X		X
BENLYSTA INJ 200MG/ML	BELIMUMAB SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/ML	Tier 4	X	X		X
BEYFORTUS INJ 100MG/ML	NIRSEVIMAB-ALIP IM SOLN PREFILLED SYRINGE 100 MG/ML	Tier 1				
BEYFORTUS INJ 50/0.5ML	NIRSEVIMAB-ALIP IM SOLN PREFILLED SYRINGE 50 MG/0.5ML	Tier 1				
ENFLONISIA INJ 105MG	CLESROVIMAB-CFOR IM SOLN PREFILLED SYRINGE 105 MG/0.7ML	Tier 1				
ENTYVIO PEN INJ 108/0.68	VEDOLIZUMAB SOLN AUTO-INJECTOR 108 MG/0.68ML	Tier 4	X	X		X
LEFLUNOMIDE TAB 10MG	LEFLUNOMIDE TAB 10 MG	Tier 2				
LEFLUNOMIDE TAB 20MG	LEFLUNOMIDE TAB 20 MG	Tier 2				
OTEZLA TAB 10/20	APREMILAST TAB STARTER THERAPY PACK 4 X 10 MG & 51 X 20 MG	Tier 4	X	X		
OTEZLA TAB 10/20/30	APREMILAST TAB STARTER THERAPY PACK 10 MG & 20 MG & 30 MG	Tier 4	X	X		X
OTEZLA TAB 20MG	APREMILAST TAB 20 MG	Tier 4	X	X		
OTEZLA TAB 30MG	APREMILAST TAB 30 MG	Tier 4	X	X		X
RINVOQ TAB 15MG ER	UPADACITINIB TAB ER 24HR 15 MG	Tier 4	X	X		X
RINVOQ TAB 30MG ER	UPADACITINIB TAB ER 24HR 30 MG	Tier 4	X	X		X
RINVOQ TAB 45MG ER	UPADACITINIB TAB ER 24HR 45 MG	Tier 4	X	X		X
RINVOQ LQ SOL 1MG/ML	UPADACITINIB ORAL SOLN 1 MG/ML	Tier 4	X	X		X
TAKHZYRO INJ 150MG/ML	LANADELUMAB-FLYO SOLN PREF SYRINGE 150 MG/ML	Tier 4	X	X		X
TAKHZYRO INJ 300/2ML	LANADELUMAB-FLYO SOLN PREF SYRINGE 300 MG/2ML (150 MG/ML)	Tier 4	X	X		X
TYENNE INJ 162/0.9	TOCILIZUMAB-AAZG SUBCUTANEOUS SOLN AUTO-INJ 162 MG/0.9ML	Tier 5	X		X	X
TYENNE INJ 162MG	TOCILIZUMAB-AAZG SUBCUTANEOUS SOLN PREF SYR 162 MG/0.9ML	Tier 5	X		X	X
Insulins - Diabetic Drugs						

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ADMIX NEEDLE MIS 18GX1.5"	NEEDLE (DISP) 18 X 1-1/2"	Tier 3				
BD BLNT FILL MIS 18GX1.5	NEEDLE (DISP) 18 X 1-1/2"	Tier 3				
BD ECLIPSE MIS 18GX1.5"	NEEDLE (DISP) 18 X 1-1/2"	Tier 3				
HUMALOG INJ 100/ML	INSULIN LISPRO SOLN CARTRIDGE 100 UNIT/ML	Tier 3		X		
HUMALOG JR INJ 100/ML	INSULIN LISPRO SOLN PEN-INJECTOR 100 UNIT/ML (0.5 UNIT DIAL)	Tier 3		X		
HUMALOG KWIK INJ 100/ML	INSULIN LISPRO SOLN PEN-INJECTOR 100 UNIT/ML (1 UNIT DIAL)	Tier 3		X		
HUMALOG KWIK INJ 200/ML	INSULIN LISPRO SOLN PEN-INJECTOR 200 UNIT/ML	Tier 3		X		
HUMALOG MIX INJ 50/50	INSULIN LISPRO PROTAMINE & LISPRO INJ 100 UNIT/ML (50-50)	Tier 3		X		
HUMALOG MIX INJ 50/50KWP	INSULIN LISPRO PROT & LISPRO SUS PEN-INJ 100 UNIT/ML (50-50)	Tier 3		X		
HUMALOG MIX INJ 75/25KWP	INSULIN LISPRO PROT & LISPRO SUS PEN-INJ 100 UNIT/ML (75-25)	Tier 3		X		
HUMALOG MIX SUS 75/25	INSULIN LISPRO PROT & LISPRO INJ 100 UNIT/ML (75-25)	Tier 3		X		
HUMULIN INJ 70/30	INSULIN NPH ISOPHANE & REGULAR HUMAN INJ 100 UNIT/ML (70-30)	Tier 3		X		
HUMULIN INJ 70/30KWP	INSULIN NPH & REGULAR SUSP PEN-INJ 100 UNIT/ML (70-30)	Tier 3		X		
HUMULIN N INJ U-100	INSULIN NPH (HUMAN) (ISOPHANE) INJ 100 UNIT/ML	Tier 3		X		
HUMULIN N INJ U-100KWP	INSULIN NPH (HUMAN) (ISOPHANE) SUSP PEN-INJECTOR 100 UNIT/ML	Tier 3		X		
HUMULIN R INJ U-100	INSULIN REGULAR (HUMAN) INJ 100 UNIT/ML	Tier 2		X		
HUMULIN R INJ U-100	INSULIN REGULAR (HUMAN) INJ 100 UNIT/ML	Tier 3		X		
HUMULIN R INJ U-500	INSULIN REGULAR (HUMAN) INJ 500 UNIT/ML	Tier 3		X		
HUMULIN R INJ U-500	INSULIN REGULAR (HUMAN) SOLN PEN-INJECTOR 500 UNIT/ML	Tier 3		X		
HYPO NEEDLE MIS 18GX1.5"	NEEDLE (DISP) 18 X 1-1/2"	Tier 3				
HYPO NEEDLE MIS 18GX1"	NEEDLE (DISP) 18 X 1"	Tier 3				
INSULIN LISP INJ 100/ML	INSULIN LISPRO INJ SOLN 100 UNIT/ML	Tier 3		X		
INSULIN LISP INJ 100/ML	INSULIN LISPRO SOLN PEN-INJECTOR 100 UNIT/ML (1 UNIT DIAL)	Tier 3		X		
INSULIN LISP INJ JUNIOR	INSULIN LISPRO SOLN PEN-INJECTOR 100 UNIT/ML (0.5 UNIT DIAL)	Tier 3		X		
INSULIN LISP INJ PROTAMIN	INSULIN LISPRO PROT & LISPRO SUS PEN-INJ 100 UNIT/ML (75-25)	Tier 3		X		
LANTUS INJ 100/ML	INSULIN GLARGINE INJ 100 UNIT/ML	Tier 3		X		
LANTUS SOLOS INJ 100/ML	INSULIN GLARGINE SOLN PEN-INJECTOR 100 UNIT/ML	Tier 3		X		
LYUMJEV INJ 100UT/ML	INSULIN LISPRO-AABC INJ 100 UNIT/ML	Tier 3		X		
LYUMJEV KWPN INJ 100UT/ML	INSULIN LISPRO-AABC SOLN PEN-INJ 100 UNIT/ML (1 UNIT DIAL)	Tier 3		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
LYUMJEV KWPN INJ 200UT/ML	INSULIN LISPRO-AABC SOLN PEN-INJECTOR 200 UNIT/ML	Tier 3		X		
MYXREDLIN SOL 1UNIT/ML	INSULIN REGULAR (HUMAN) IN NACL 0.9% IV SOLN 100 UNIT/100ML	Tier 4				
NOVOLIN R INJ 100 UNIT	INSULIN REGULAR (HUMAN) SOLN PEN-INJECTOR 100 UNIT/ML	Tier 3		X	X	
NOVOLOG INJ RELION	INSULIN ASPART INJ SOLN 100 UNIT/ML	Tier 5		X	X	
POLY HUB MIS 18GX1.5"	NEEDLE (DISP) 18 X 1-1/2"	Tier 3				
POLY HUB MIS 18GX1"	NEEDLE (DISP) 18 X 1"	Tier 3				
SAFTY NEEDLE MIS 18GX1.5"	NEEDLE (DISP) 18 X 1-1/2"	Tier 3				
SAFTY NEEDLE MIS 18GX1"	NEEDLE (DISP) 18 X 1"	Tier 3				
SOLIQUA INJ 100/33	INSULIN GLARGINE-LIXISENATIDE SOL PEN-INJ 100-33 UNIT-MCG/ML	Tier 3		X		
TOUJEO MAX INJ 300/ML	INSULIN GLARGINE SOLN PEN-INJECTOR 300 UNIT/ML (2 UNIT DIAL)	Tier 4		X		
TOUJEO SOLO INJ 300/ML	INSULIN GLARGINE SOLN PEN-INJECTOR 300 UNIT/ML (1 UNIT DIAL)	Tier 4		X		
VENT NEEDLE MIS 18GX1"	NEEDLE (DISP) 18 X 1"	Tier 3				
Irritable Bowel Syndrome Agents - Bowel Treatment Drugs						
ALOSETRON TAB 0.5MG	ALOSETRON HCL TAB 0.5 MG (BASE EQUIV)	Tier 3	X	X		
ALOSETRON TAB 1MG	ALOSETRON HCL TAB 1 MG (BASE EQUIV)	Tier 3	X	X		
LINZESS CAP 145MCG	LINACLOTIDE CAP 145 MCG	Tier 3	X	X		
LINZESS CAP 290MCG	LINACLOTIDE CAP 290 MCG	Tier 3	X	X		
LINZESS CAP 72MCG	LINACLOTIDE CAP 72 MCG	Tier 3	X	X		
LUBIPROSTONE CAP 24MCG	LUBIPROSTONE CAP 24 MCG	Tier 3	X	X		
LUBIPROSTONE CAP 8MCG	LUBIPROSTONE CAP 8 MCG	Tier 3	X	X		
VIBERZI TAB 100MG	ELUXADOLINE TAB 100 MG	Tier 5	X	X		
VIBERZI TAB 75MG	ELUXADOLINE TAB 75 MG	Tier 5	X	X		
Laxatives - Bowel Treatment Drugs						
CLEARLAX POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	Tier 1				
CVS PURELAX POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	Tier 1				
DAILY FIBER POW 43%	PSYLLIUM POWDER 43%	Tier 2				
EQ CLEARLAX POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	Tier 1				
EQL CLEARLAX POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	Tier 1				
FT CLEARLAX POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	Tier 1				
GAVILAX POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	Tier 1				
GENTLELAX POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
GLYCOLAX POW 3350 NF	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	Tier 1				
GNP CLEARLAX POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	Tier 1				
HM CLEARLAX POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	Tier 1				
LAXACLEAR POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	Tier 1				
MINERAL OIL HEAVY	MINERAL OIL	Tier 2				
MM CLEARLAX POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	Tier 1				
NATURA-LAX POW 3350 NF	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	Tier 1				
PEG 3350 POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	Tier 1				
POLYETH GLYC POW 3350	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	Tier 1				
POLYETH GLYC POW 3350 NF	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	Tier 1				
RA LAXATIVE POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	Tier 1				
SM CLEARLAX POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	Tier 1				
SMOOTH LAX POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	Tier 1				
SMOOTH LAX POW 3350	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	Tier 1				
SUTAB TAB	SOD SULFATE-MG SULFATE-POT CHLORIDE TAB 1479-225-188 MG	Tier 4				
TRUE LAXATIV POW 3350	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	Tier 1				
WAL-MUCIL POW 43%	PSYLLIUM POWDER 43%	Tier 2				
Laxatives - Drugs to treat Constipation						
BASE A PEG POW 1450	POLYETHYLENE GLYCOL 1450 POWDER	Tier 4				
BISACODYL TAB 5MG DR	BISACODYL TAB DELAYED RELEASE 5 MG	Tier 1				
BISACODYL TAB 5MG EC	BISACODYL TAB DELAYED RELEASE 5 MG	Tier 1				
CITROMA SOL LEMONY	MAGNESIUM CITRATE SOLN	Tier 1				
CLENPIQ SOL	SOD PICOSULFATE-MG OX-CITRIC AC SOL 10 MG-3.5 GM-12 GM/175ML	Tier 4		X		
CONSTULOSE SOL 10GM/15	LACTULOSE SOLUTION 10 GM/15ML	Tier 2				
CVS C-LAX TAB 5MG	BISACODYL TAB DELAYED RELEASE 5 MG	Tier 1				
ENULOSE SOL 10GM/15	LACTULOSE (ENCEPHALOPATHY) SOLUTION 10 GM/15ML	Tier 2				
EQ LAXATIVE CHW 15MG	SENNOSIDES CHEW TAB 15 MG	Tier 2				
EQL GENTLE TAB LAXATIVE	BISACODYL TAB DELAYED RELEASE 5 MG	Tier 1				
FT LAXATIVE TAB 5MG EC	BISACODYL TAB DELAYED RELEASE 5 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
FT MAG CITRA SOL CHERRY	MAGNESIUM CITRATE SOLN	Tier 1				
FT MAG CITRA SOL LEMON	MAGNESIUM CITRATE SOLN	Tier 1				
GAVILYTE-C SOL	PEG 3350-KCL-NA BICARB-NACL-NA SULFATE FOR SOLN 240 GM	Tier 2				
GAVILYTE-G SOL	PEG 3350-KCL-NA BICARB-NACL-NA SULFATE FOR SOLN 236 GM	Tier 2		X		
GAVILYTE-N SOL FLAV PK	PEG 3350-KCL-SOD BICARB-NACL FOR SOLN 420 GM	Tier 2		X		
GENERLAC SOL 10/15ML	LACTULOSE (ENCEPHALOPATHY) SOLUTION 10 GM/15ML	Tier 2				
GENERLAC SOL 10GM/15	LACTULOSE (ENCEPHALOPATHY) SOLUTION 10 GM/15ML	Tier 2				
GENTLE LAXAT TAB 5MG EC	BISACODYL TAB DELAYED RELEASE 5 MG	Tier 1				
GNP GNTL LAX TAB 5MG EC	BISACODYL TAB DELAYED RELEASE 5 MG	Tier 1				
GNP LAXATIVE TAB 5MG EC	BISACODYL TAB DELAYED RELEASE 5 MG	Tier 1				
GNP MAG CITR SOL CHERRY	MAGNESIUM CITRATE SOLN	Tier 1				
GOLYTELY SOL	PEG 3350-KCL-NA BICARB-NACL-NA SULFATE FOR SOLN 236 GM	Tier 2		X		
KP BISACODYL TAB 5MG EC	BISACODYL TAB DELAYED RELEASE 5 MG	Tier 1				
KRISTALOSE PAK 10GM	LACTULOSE ORAL CRYSTAL PACKET 10 GM	Tier 5				
KRISTALOSE PAK 20GM	LACTULOSE ORAL CRYSTAL PACKET 20 GM	Tier 4				
LACTULOSE PAK 20GM	LACTULOSE ORAL CRYSTAL PACKET 20 GM	Tier 4				
LACTULOSE SOL 10/15ML	LACTULOSE SOLUTION 10 GM/15ML	Tier 2				
LACTULOSE SOL 10GM/15	LACTULOSE SOLUTION 10 GM/15ML	Tier 2				
LACTULOSE SOL 10GM/15	LACTULOSE (ENCEPHALOPATHY) SOLUTION 10 GM/15ML	Tier 2				
LACTULOSE SOL 20/30ML	LACTULOSE SOLUTION 10 GM/15ML	Tier 2				
LAXATIVE TAB 5MG EC	BISACODYL TAB DELAYED RELEASE 5 MG	Tier 1				
MAG CITRATE SOL CHERRY	MAGNESIUM CITRATE SOLN	Tier 1				
MAG CITRATE SOL GRAPE	MAGNESIUM CITRATE SOLN	Tier 1				
MAG CITRATE SOL LEMON	MAGNESIUM CITRATE SOLN	Tier 1				
MOVIPREP SOL	PEG 3350-KCL-NACL-NA SULFATE-NA ASCORBATE-C FOR SOLN 100 GM	Tier 5		X		
PEG 3350 POW	POLYETHYLENE GLYCOL 3350 POWDER	Tier 4				
PEG-3350 SOL ELECTROL	PEG 3350-KCL-NA BICARB-NACL-NA SULFATE FOR SOLN 236 GM	Tier 2		X		
PEG-3350/KCL SOL /SODIUM	PEG 3350-KCL-SOD BICARB-NACL FOR SOLN 420 GM	Tier 2		X		
PEG-PREP KIT	BISACODYL TAB & PEG 3350-KCL-SOD BICARB-NACL FOR SOLN KIT	Tier 5				
PEG/NASUL/C/ SOL NACL/POT	PEG 3350-KCL-NACL-NA SULFATE-NA ASCORBATE-C FOR SOLN 100 GM	Tier 4		X		
PLENVU SOL	PEG 3350-KCL-NACL-NA SULFATE-NA ASCORBATE-C FOR SOLN 140 GM	Tier 4		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
POLY GLYCOL LIQ 1450	POLYETHYLENE GLYCOL 1450 LIQUID	Tier 4				
POLYETH GLYC POW 1450	POLYETHYLENE GLYCOL 1450 POWDER	Tier 4				
QC LAXATIVE TAB 5MG EC	BISACODYL TAB DELAYED RELEASE 5 MG	Tier 1				
RA LAXATIVE TAB 5MG EC	BISACODYL TAB DELAYED RELEASE 5 MG	Tier 1				
SODIUM/POTAS SOL MAGNESIU	SOD SULFATE-POT SULF-MG SULF ORAL SOL 175-3.13-1.6 GM/177ML	Tier 4		X		
SUPREP BOWEL SOL PREP KIT	SOD SULFATE-POT SULF-MG SULF ORAL SOL 175-3.13-1.6 GM/177ML	Tier 4		X		
WOMANS LAXAT TAB 5MG EC	BISACODYL TAB DELAYED RELEASE 5 MG	Tier 1				
WOMENS LAXAT TAB 5MG EC	BISACODYL TAB DELAYED RELEASE 5 MG	Tier 1				
Local Anesthetics						
GLYDO GEL 2%	LIDOCAINE HCL URETHRAL/MUCOSAL GEL PREFILLED SYRINGE 2%	Tier 2				
LIDO/PRILOCN CRE 2.5-2.5%	LIDOCAINE-PRILOCAINE CREAM 2.5-2.5%	Tier 2				
LIDOCAINE DIS 5% PATCH	LIDOCAINE PATCH 5%	Tier 4	X	X		
LIDOCAINE GEL 2%	LIDOCAINE HCL URETHRAL/MUCOSAL GEL PREFILLED SYRINGE 2%	Tier 2				
LIDOCAINE GEL 2% JELLY	LIDOCAINE HCL URETHRAL/MUCOSAL GEL 2%	Tier 2				
LIDOCAINE GEL 2% JELLY	LIDOCAINE HCL URETHRAL/MUCOSAL GEL PREFILLED SYRINGE 2%	Tier 2				
LIDOCAINE OIN 5%	LIDOCAINE OINT 5%	Tier 3		X		
LIDOCAINE SOL 2% ORAL	LIDOCAINE HCL VISCOUS SOLN 2%	Tier 2				
LIDOCAINE SOL 2% VISC	LIDOCAINE HCL VISCOUS SOLN 2%	Tier 2				
LIDOCAINE SOL 4%	LIDOCAINE HCL SOLN 4%	Tier 2				
LIDOCAINE SOL 4%	LIDOCAINE HCL LARYNGOTRACHEAL SOLN 4%	Tier 2				
ZTLIDO PAD 1.8%	LIDOCAINE PATCH 1.8% (36 MG)	Tier 4	X	X		
Macrolides - Antibiotics						
AZITHROMYCIN POW 1GM PAK	AZITHROMYCIN POWD PACK FOR SUSP 1 GM	Tier 2				
AZITHROMYCIN SUS 100/5ML	AZITHROMYCIN FOR SUSP 100 MG/5ML	Tier 2				
AZITHROMYCIN SUS 200/5ML	AZITHROMYCIN FOR SUSP 200 MG/5ML	Tier 2				
AZITHROMYCIN TAB 250MG	AZITHROMYCIN TAB 250 MG	Tier 2				
AZITHROMYCIN TAB 500MG	AZITHROMYCIN TAB 500 MG	Tier 2				
AZITHROMYCIN TAB 600MG	AZITHROMYCIN TAB 600 MG	Tier 2				
CLARITHROMYC SUS 125/5ML	CLARITHROMYCIN FOR SUSP 125 MG/5ML	Tier 3				
CLARITHROMYC SUS 250/5ML	CLARITHROMYCIN FOR SUSP 250 MG/5ML	Tier 3				
CLARITHROMYC TAB 250MG	CLARITHROMYCIN TAB 250 MG	Tier 2				
CLARITHROMYC TAB 500MG	CLARITHROMYCIN TAB 500 MG	Tier 2				
CLARITHROMYC TAB 500MG ER	CLARITHROMYCIN TAB ER 24HR 500 MG	Tier 3				
DIFICID SUS	FIDAXOMICIN FOR SUSP 40 MG/ML	Tier 5		X		
E.E.S. GRAN SUS 200/5ML	ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 200 MG/5ML	Tier 4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ERY-TAB TAB 250MG EC	ERYTHROMYCIN TAB DELAYED RELEASE 250 MG	Tier 5				
ERY-TAB TAB 333MG EC	ERYTHROMYCIN TAB DELAYED RELEASE 333 MG	Tier 5				
ERY-TAB TAB 500MG EC	ERYTHROMYCIN TAB DELAYED RELEASE 500 MG	Tier 5				
ERYPED SUS 200/5ML	ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 200 MG/5ML	Tier 4				
ERYPED SUS 400/5ML	ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 400 MG/5ML	Tier 5				
ERYTHROCIN TAB 250MG	ERYTHROMYCIN STEARATE TAB 250 MG	Tier 3				
ERYTHROM ETH SUS 200/5ML	ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 200 MG/5ML	Tier 2				
ERYTHROM ETH SUS 400/5ML	ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 400 MG/5ML	Tier 4				
ERYTHROM ETH TAB 400MG	ERYTHROMYCIN ETHYLSUCCINATE TAB 400 MG	Tier 2				
ERYTHROMYCIN CAP 250MG DR	ERYTHROMYCIN W/ DELAYED RELEASE PARTICLES CAP 250 MG	Tier 2				
ERYTHROMYCIN TAB 250MG BS	ERYTHROMYCIN TAB 250 MG	Tier 2				
ERYTHROMYCIN TAB 250MG EC	ERYTHROMYCIN TAB DELAYED RELEASE 250 MG	Tier 4				
ERYTHROMYCIN TAB 333MG EC	ERYTHROMYCIN TAB DELAYED RELEASE 333 MG	Tier 4				
ERYTHROMYCIN TAB 500MG BS	ERYTHROMYCIN TAB 500 MG	Tier 2				
ERYTHROMYCIN TAB 500MG EC	ERYTHROMYCIN TAB DELAYED RELEASE 500 MG	Tier 4				
FIDAXOMICIN TAB 200MG	FIDAXOMICIN TAB 200 MG	Tier 5		X		
ZITHROMAX POW 1GM PAK	AZITHROMYCIN POWD PACK FOR SUSP 1 GM	Tier 5				
ZITHROMAX SUS 100/5ML	AZITHROMYCIN FOR SUSP 100 MG/5ML	Tier 5				
ZITHROMAX SUS 200/5ML	AZITHROMYCIN FOR SUSP 200 MG/5ML	Tier 5				
ZITHROMAX TAB 250MG	AZITHROMYCIN TAB 250 MG	Tier 5				
ZITHROMAX TAB 500MG	AZITHROMYCIN TAB 500 MG	Tier 5				
ZITHROMAX TAB TRI-PAK	AZITHROMYCIN TAB 500 MG	Tier 5				
ZITHROMAX TAB Z-PAK	AZITHROMYCIN TAB 250 MG	Tier 5				
Mast Cell Stabilizers - Drugs for the Lungs						
CROMOLYN SOD NEB 20MG/2ML	CROMOLYN SODIUM SOLN NEBU 20 MG/2ML	Tier 2				
Metabolic Bone Disease Agents - Osteoporosis (Bone Loss) Drugs						
ALENDRONATE SOL 70/75ML	ALENDRONATE SODIUM ORAL SOLN 70 MG/75ML	Tier 2				
ALENDRONATE TAB 10MG	ALENDRONATE SODIUM TAB 10 MG	Tier 2				
ALENDRONATE TAB 35MG	ALENDRONATE SODIUM TAB 35 MG	Tier 2				
ALENDRONATE TAB 70MG	ALENDRONATE SODIUM TAB 70 MG	Tier 2				
BONSITY INJ 560/2.24	TERIPARATIDE SOLN PEN-INJ 560 MCG/2.24ML	Tier 5	X			X
CALCITONIN INJ 200/ML	CALCITONIN (SALMON) INJ 200 UNIT/ML	Tier 4				
CALCITONIN INJ 400/2ML	CALCITONIN (SALMON) INJ 200 UNIT/ML	Tier 4				
CALCITONIN SPR 200/ACT	CALCITONIN (SALMON) NASAL SOLN 200 UNIT/ACT	Tier 3				
CINACALCET TAB 30MG	CINACALCET HCL TAB 30 MG (BASE EQUIV)	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
CINACALCET TAB 60MG	CINACALCET HCL TAB 60 MG (BASE EQUIV)	Tier 2				
CINACALCET TAB 90MG	CINACALCET HCL TAB 90 MG (BASE EQUIV)	Tier 2				
FOSAMAX TAB 70MG	ALENDRONATE SODIUM TAB 70 MG	Tier 5				
FOSAMAX + D TAB 70-2800	ALENDRONATE SODIUM-CHOLECALCIFEROL TAB 70-2800 MG-UNIT	Tier 4				
FOSAMAX + D TAB 70-5600	ALENDRONATE SODIUM-CHOLECALCIFEROL TAB 70-5600 MG-UNIT	Tier 4				
IBANDRONATE TAB 150MG	IBANDRONATE SODIUM TAB 150 MG (BASE EQUIVALENT)	Tier 3				
MIACALCIN INJ 200/ML	CALCITONIN (SALMON) INJ 200 UNIT/ML	Tier 4				
MIACALCIN INJ 400/2ML	CALCITONIN (SALMON) INJ 200 UNIT/ML	Tier 4				
RISEDRONATE TAB 150MG	RISEDRONATE SODIUM TAB 150 MG	Tier 5		X		
RISEDRONATE TAB 30MG	RISEDRONATE SODIUM TAB 30 MG	Tier 5				
RISEDRONATE TAB 35MG	RISEDRONATE SODIUM TAB 35 MG	Tier 5		X		
RISEDRONATE TAB 5MG	RISEDRONATE SODIUM TAB 5 MG	Tier 5				
TERIPARATIDE INJ 560/2.24	TERIPARATIDE SOLN PEN-INJ 560 MCG/2.24ML	Tier 5	X			X
TYMLOS INJ	ABALOPARATIDE SUBCUTANEOUS SOLN PEN-INJECTOR 3120 MCG/1.56ML	Tier 5	X			X
Metabolic Bone Disease Agents - Other						
CALCITRIOL CAP 0.25MCG	CALCITRIOL CAP 0.25 MCG	Tier 2				
CALCITRIOL CAP 0.5MCG	CALCITRIOL CAP 0.5 MCG	Tier 2				
CALCITRIOL SOL 1MCG/ML	CALCITRIOL ORAL SOLN 1 MCG/ML	Tier 2				
DOXERCALCIF CAP 0.5MCG	DOXERCALCIFEROL CAP 0.5 MCG	Tier 2				
DOXERCALCIF CAP 1MCG	DOXERCALCIFEROL CAP 1 MCG	Tier 2				
DOXERCALCIF CAP 2.5MCG	DOXERCALCIFEROL CAP 2.5 MCG	Tier 2				
PARICALCITOL CAP 1 MCG	PARICALCITOL CAP 1 MCG	Tier 2				
PARICALCITOL CAP 2 MCG	PARICALCITOL CAP 2 MCG	Tier 2				
PARICALCITOL CAP 4 MCG	PARICALCITOL CAP 4 MCG	Tier 2				
ZEMPLAR CAP 1MCG	PARICALCITOL CAP 1 MCG	Tier 5				
ZEMPLAR CAP 2MCG	PARICALCITOL CAP 2 MCG	Tier 5				
Miscellaneous Therapeutic Agents						
1ML SYRINGE MIS 29G	INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 5/16"	Tier 3		X		
2-DEOXY-D POW -GLUCOSE	2-DEOXY-D-GLUCOSE POWDER	Tier 5				
ADAPTADERM GEL	*GEL BASE - GEL**	Tier 4				
AERCHMBR PLS MIS FLOW-VU	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 4				
AERCHMBR PLS MIS INTERMED	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 4				
AERCHMBR PLS MIS LRG MASK	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 4				
AERCHMBR PLS MIS MED MASK	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
AERCHMBR PLS MIS SM MASK	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 4				
AEROCHAMBER MIS PLUS	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 4				
AEROCHAMBER MIS 2GO	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 4				
AEROCHAMBER MIS HOLDING	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 4				
AEROCHAMBER MIS MTHPIECE	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 4				
ALCOH-WIPE MIS 12"X12"	*ALCOHOL SHEETS***	Tier 4				
ALPAWASH OIN	POLYETHYLENE GLYCOL OINTMENT	Tier 4				
ALYFTREK TAB	VANZACAFOR-TEZACAFOR-DEUTIVACAFOR TAB 10-50-125 MG	Tier 5	X	X		X
ALYFTREK TAB 4-20-50	VANZACAFOR-TEZACAFOR-DEUTIVACAFOR TAB 4-20-50 MG	Tier 5	X	X		X
AMINO ACTION TAB	*AMINO ACIDS TAB***	Tier 3	X			
ANASTROZOLE POW	ANASTROZOLE (BULK) POWDER	Tier 4				
ANDEMBRY INJ 200/1.2	GARADACIMAB-GXII SOLN AUTO-INJECTOR 200 MG/1.2ML	Tier 4	X	X		X
ANHYDROUS GEL BASE	*GEL BASE - GEL**	Tier 4				
AQINJECT PEN MIS 31GX3/16	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
AQNEURSA POW 1GM	LEVACETYLLEUCINE FOR SUSP PACKET 1 GM	Tier 5	X	X		X
ARGININE PAK 500MG	ARGININE POWDER PACKET 500 MG	Tier 3				
ARGININE TAB 500MG	ARGININE TAB 500 MG	Tier 3	X			
ASSURE ID MIS 30GX5MM	INSULIN PEN NEEDLE 30 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
ASSURE ID MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
ATROPINE POW SULFATE	ATROPINE SULFATE POWDER	Tier 4				
AUM MINI PEN MIS 32GX8MM	INSULIN PEN NEEDLE 32 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
AUM MINI PEN MIS 33GX4MM	INSULIN PEN NEEDLE 33 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
AUM MINI PEN MIS 33GX5MM	INSULIN PEN NEEDLE 33 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
AUM MINI PEN MIS 33GX6MM	INSULIN PEN NEEDLE 33 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
AUM SAFETY MIS 31GX4MM	INSULIN PEN NEEDLE 31 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
AUM SAFETY MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
AUTOSHIELD MIS 30GX5MM	INSULIN PEN NEEDLE 30 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
AXONA POW	*DIETARY MANAGEMENT PRODUCT - PACKET***	Tier 3				
BACOCALMINE LIQ	*PHARMACEUTICAL EXCIPIENTS (BULK) LIQUID**	Tier 4				
BASE CRE LIPOSOME	*CREAM BASE LIPOSOMIC**	Tier 4				
BD ECLIPSE MIS 23GX1"	NEEDLE (DISP) 23 X 1"	Tier 3				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
BD ECLIPSE MIS 25GX5/8"	NEEDLE (DISP) 25 X 5/8"	Tier 3				
BD NEEDLE MIS 30G X 1"	NEEDLE (DISP) 30 X 1"	Tier 4				
BD NEEDLE MIS 30GX1/2"	NEEDLE (DISP) 30 X 1/2"	Tier 3				
BD NEEDLES MIS 27GX1/2"	NEEDLE (DISP) 27 X 1/2"	Tier 3				
BD PEN NEEDL MIS 29GX12.7	INSULIN PEN NEEDLE 29 G X 12.7 MM (1/2")	Tier 3		X		
BD PEN NEEDL MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
BD PEN NEEDL MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
BD SAFETY MIS 23GX1.5"	NEEDLE (DISP) 23 X 1-1/2"	Tier 3				
BD SHARPS MIS 1.4QT	*SHARPS CONTAINER - MISC***	Tier 4				
BD SHARPS MIS 3.3QT	*SHARPS CONTAINER - MISC***	Tier 4				
BD SHARPS MIS 5.1L	*SHARPS CONTAINER - MISC***	Tier 4				
BENEPROTEIN POW UNFLAVOR	*PROTEIN ORAL POWDER***	Tier 4				
BIGFOOT UNIT KIT PROGRAM	*BLOOD GLUCOSE MONITOR KIT W/ MONITOR DEVICE & DIGITAL APP**	Tier 4				
BISMUTH SUBC POW	BISMUTH SUBCARBONATE POWDER	Tier 4				
BISOPROL FUM POW	BISOPROLOL FUMARATE (BULK) POWDER	Tier 4				
BOOST SOOTHE LIQ PCH/MINT	*PROTEIN ORAL LIQUID***	Tier 4	X			
BOOST SOOTHE LIQ PCH/MINT	*PROTEIN ORAL LIQUID***	Tier 4				
BOOST SOOTHE LIQ STR/KIWI	*PROTEIN ORAL LIQUID***	Tier 4				
BOOST SOOTHE LIQ STR/KIWI	*PROTEIN ORAL LIQUID***	Tier 4	X			
BUPIVACAINE POW HCL	BUPIVACAINE HCL POWDER	Tier 4				
CALCIUM POW FOLINATE	LEUCOVORIN CALCIUM POWDER	Tier 5				
CAM PRO COMP BAR GLYTACTI	*NUTRITIONAL SUPPLEMENT BAR**	Tier 4				
CAM PRO COMP BAR GLYTACTI	*NUTRITIONAL SUPPLEMENT BAR**	Tier 3				
CARBOGEL GEL 940	*CARBOMER GEL BASE**	Tier 4				
CARBOHOL GEL 940	*CARBOMER GEL BASE**	Tier 3				
CARBOMER GEL AQUEOUS	*CARBOMER GEL BASE**	Tier 4				
CARBOMER GEL HYDROALC	*CARBOMER GEL BASE**	Tier 4				
CAREFINE MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
CAREPOINT SA MIS 23GX1"	NEEDLE (DISP) 23 X 1"	Tier 3				
CAREPOINT SA MIS 23GX11/2	NEEDLE (DISP) 23 X 1-1/2"	Tier 3				
CAREPOINT SA MIS 25GX1"	NEEDLE (DISP) 25 X 1"	Tier 3				
CAREPOINT SA MIS 25GX11/2	NEEDLE (DISP) 25 X 1-1/2"	Tier 3				
CAREPOINT SA MIS 25GX5/8"	NEEDLE (DISP) 25 X 5/8"	Tier 3				
CARETOUCH MIS 27GX1.5"	NEEDLE (DISP) 27 X 1-1/2"	Tier 3				
CARETOUCH MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
CARETOUCH MIS 31GX6MM	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
CARETOUCH MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 3		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
CAYA DPR	*DIAPHRAGM ARC-SPRING***	Tier 1				
CEQUR SIMPL KIT PATCH 2U	INJECTION DEVICE FOR INSULIN	Tier 4			X	
CHEMSIL K-51 GEL	*GEL BASE - GEL**	Tier 4				
CHEMSTRIP BG MIS LOG	*BLOOD GLUCOSE MONITORING MISC.***	Tier 2				
CHERRY SYP	CHERRY SYRUP	Tier 4				
CHOLESTYRAMI POW	CHOLESTYRAMINE (BULK) POWDER	Tier 4	X			
CHOLESTYRAMI POW RESIN	CHOLESTYRAMINE (BULK) POWDER	Tier 4	X			
CISPLATIN POW	CISPLATIN (BULK) POWDER	Tier 4				
CITRULLINE POW (L)	CITRULLINE (BULK) POWDER	Tier 4				
CITRULLINE POW 1000	CITRULLINE ORAL PACKET 1 GM	Tier 3	X			
CLOPIDOGREL POW BISULFAT	CLOPIDOGREL BISULFATE (BULK) POWDER	Tier 4				
CLOVAGEL GEL	*GEL BASE - GEL**	Tier 4				
CO Q 10 CAP 100MG	COENZYME Q10 CAP 100 MG	Tier 2				
CO Q-10 CAP 100MG	COENZYME Q10 CAP 100 MG	Tier 2				
CO Q-10 CAP 200MG	COENZYME Q10 CAP 200 MG	Tier 2	X			
CO Q-10 CAP 50MG	COENZYME Q10 CAP 50 MG	Tier 3	X			
COENZYME Q10 CAP 100MG	COENZYME Q10 CAP 100 MG	Tier 2	X			
COENZYME Q10 CAP 100MG	COENZYME Q10 CAP 100 MG	Tier 3				
COENZYME Q10 CAP 200MG	COENZYME Q10 CAP 200 MG	Tier 2				
COENZYME Q10 CAP 200MG	COENZYME Q10 CAP 200 MG	Tier 3				
COENZYME Q10 CAP 30MG	COENZYME Q10 CAP 30 MG	Tier 2				
COENZYME Q10 CAP 50MG	COENZYME Q10 CAP 50 MG	Tier 3				
COENZYME Q10 CAP 50MG	COENZYME Q10 CAP 50 MG	Tier 3	X			
COENZYME Q10 TAB 200MG	COENZYME Q10 TAB 200 MG	Tier 3				
COLLODION LIQ FLEXIBLE	COLLODION FLEXIBLE	Tier 4				
COMFORT EZ MIS 31GX4MM	INSULIN PEN NEEDLE 31 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
COMFORT EZ MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
COMFORT TOUC MIS 31GX4MM	INSULIN PEN NEEDLE 31 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
COMFORT TOUC MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
COMFORT TOUC MIS 31GX6MM	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
COMFORT TOUC MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
COMFORT TOUC MIS 32GX8MM	INSULIN PEN NEEDLE 32 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
COMFORT TOUC MIS 33GX1/4"	INSULIN PEN NEEDLE 33 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
COMFORT TOUC MIS 33GX3/16	INSULIN PEN NEEDLE 33 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
COMFORT TOUC MIS 33GX5/32	INSULIN PEN NEEDLE 33 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
COMPLEAT ORG LIQ PLNT BAS	*NUTRITIONAL SUPPLEMENT LIQUID (ENTERAL)**	Tier 4	X			

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
COMPLEAT PED LIQ PLNT BAS	*NUTRITIONAL SUPPLEMENT LIQUID (ENTERAL)**	Tier 4	X			
CONDOMS MIS	*CONDOMS - MALE***	Tier 1		X		
CONTOUR HIGH LIQ CONTROL	*BLOOD GLUCOSE CALIBRATION - LIQUID - HIGH***	Tier 4				
CONTOUR LOW LIQ CONTROL	*BLOOD GLUCOSE CALIBRATION - LIQUID - LOW***	Tier 3				
CONTOUR NEXT SOL LEVEL 1	*BLOOD GLUCOSE CALIBRATION - LIQUID - LOW***	Tier 3				
CONTOUR NEXT SOL LEVEL 2	*BLOOD GLUCOSE CALIBRATION - LIQUID - NORMAL***	Tier 3				
CONTOUR NORM LIQ CONTROL	*BLOOD GLUCOSE CALIBRATION - LIQUID - NORMAL***	Tier 3				
CONTROL HIGH SOL UNISTrip	*BLOOD GLUCOSE CALIBRATION - LIQUID - HIGH***	Tier 4				
CONTROL LOW SOL UNISTrip	*BLOOD GLUCOSE CALIBRATION - LIQUID - LOW***	Tier 4				
COQ-10 CAP 100MG	COENZYME Q10 CAP 100 MG	Tier 2	X			
COQ10 CAP 100MG	COENZYME Q10 CAP 100 MG	Tier 2				
COQ10 CAP 200MG	COENZYME Q10 CAP 200 MG	Tier 2	X			
CORN OIL	CORN OIL (BULK)	Tier 4				
CORN SYP	CORN SYRUP	Tier 4				
CORTROSYN INJ 0.25MG	COSYNTROPIN FOR INJ 0.25 MG	Tier 5				
COSYNTROPIN INJ 0.25MG	COSYNTROPIN FOR INJ 0.25 MG	Tier 2				
CREAM BASE CRE NIOSOMES	*CREAM BASE NIOSOMES**	Tier 4				
CREAM-HEAVY CRE BASE	*CREAM BASE NIOSOMES**	Tier 4				
CRENESSITY CAP 100MG	CRINECERFONT CAP 100 MG	Tier 5	X	X		X
CRENESSITY CAP 25MG	CRINECERFONT CAP 25 MG	Tier 5	X	X		X
CRENESSITY CAP 50MG	CRINECERFONT CAP 50 MG	Tier 5	X	X		X
CRENESSITY SOL 50MG/ML	CRINECERFONT ORAL SOLN 50 MG/ML	Tier 5	X	X		X
CRYOSERV SOL	*DIMETHYL SULFOXIDE - SOLUTION***	Tier 4				
CVS ADVANTAG POW /IRON	*INFANT FOODS POWDER**	Tier 3				
CVS COQ-10 CAP 100MG	COENZYME Q10 CAP 100 MG	Tier 2				
CVS COQ-10 CAP 200MG	COENZYME Q10 CAP 200 MG	Tier 2	X			
CVS COQ-10 CAP 50MG	COENZYME Q10 CAP 50 MG	Tier 2				
CVS COQ-10 CAP 50MG	COENZYME Q10 CAP 50 MG	Tier 2	X			
CVS SENSITIV POW /IRON	*INFANT FOODS POWDER**	Tier 3				
CVS TENDER POW /IRON	*INFANT FOODS POWDER**	Tier 3				
CVS TODDLER POW INFANT	*INFANT FOODS POWDER**	Tier 3				
CYCLOPHOSPHA POW	CYCLOPHOSPHAMIDE (BULK) POWDER	Tier 5				
CYCLOSPORINE POW	CYCLOSPORINE (BULK) POWDER	Tier 5				
CYCLOSPORINE POW A	CYCLOSPORINE (BULK) POWDER	Tier 5				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
CYSTINE PAK 500MG	CYSTINE PACKET 500 MG	Tier 3	X			
DERMASHIELD GEL HYDROGEL	*GEL BASE - GEL**	Tier 4				
DEXCOM G6 MIS TRANSMIT	*CONTINUOUS GLUCOSE SYSTEM TRANSMITTER***	Tier 4	X	X		
DIABECIN HR CRE	LIDOCAINE-BENZALKONIUM (PODIATRIC) CREAM 4.12-0.13%	Tier 4				
DIABETES KIT ADD-ON	*BLOOD GLUCOSE MONITOR KIT W/ MONITOR DEVICE & DIGITAL APP**	Tier 4				
DIABETES KIT SOLUTION	*BLOOD GLUCOSE MONITOR KIT W/ MONITOR DEVICE & DIGITAL APP**	Tier 4				
DIHYDROERGOT POW MESYLATE	DIHYDROERGOTAMINE MESYLATE POWDER	Tier 4				
DIMETHYL SOL SULFOXID	*DIMETHYL SULFOXIDE - SOLUTION***	Tier 4				
DOXYCYCLINE POW HYCLATE	DOXYCYCLINE HYCLATE POWDER	Tier 4				
DR BROWNS POW GOOD ST	*INFANT FOODS POWDER**	Tier 3				
DROPLET MICR MIS 34GX9/64	INSULIN PEN NEEDLE 34 G X 3.5 MM (9/64")	Tier 3		X		
DROPSAFE MIS SICURA	NEEDLE (DISP) 25 X 1"	Tier 3				
DUREX MIS TROPICAL	CONDOMS LATEX LUBRICATED	Tier 1		X		
DUREX EXTRA MIS SENSITIV	CONDOMS LATEX LUBRICATED	Tier 1		X		
EASIVENT MIS	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 4				
EASIVENT MIS MASK LG	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 4				
EASIVENT MIS MASK SM	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 4				
EASIVENT MIS MASK MED	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 4				
EASY COMFORT MIS 0.3/31G	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16"	Tier 3		X		
EASY COMFORT MIS 0.3/31G	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 1/2"	Tier 3		X		
EASY COMFORT MIS 29GX4MM	INSULIN PEN NEEDLE 29 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
EASY COMFORT MIS 29GX5MM	INSULIN PEN NEEDLE 29 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
EASY COMFORT MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
EASY COMFORT MIS 31GX6MM	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
EASY COMFORT MIS SHARPS	*SHARPS CONTAINER - MISC***	Tier 4				
EASYMAX SOL NORMAL	*BLOOD GLUCOSE CALIBRATION - LIQUID - NORMAL***	Tier 4				
EC-RX DHEA CRE 10%	*PRASTERONE (DHEA) CREAM 10% (COMPOUND KIT)***	Tier 4				
EC-RX DHEA CRE 4%	*PRASTERONE (DHEA) CREAM 4% (COMPOUND KIT)***	Tier 4				
ECLIPSE NDL MIS 21GX1"	NEEDLE (DISP) 21 X 1"	Tier 3				
ECLIPSE NDLE MIS 21GX1.5"	NEEDLE (DISP) 21 X 1-1/2"	Tier 3				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ECLIPSE NDLE MIS 25GX1.5"	NEEDLE (DISP) 25 X 1-1/2"	Tier 3				
EMBECTA AUTO MIS DUO	INSULIN PEN NEEDLE 30 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
EMBECTA UF MIS 29GX12.7	INSULIN PEN NEEDLE 29 G X 12.7 MM (1/2")	Tier 3		X		
EMBECTA UF MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
EMBECTA UF MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
EMBRACE SOL LOW	*BLOOD GLUCOSE CALIBRATION - LIQUID - LOW***	Tier 4				
EN GENTLEASE POW FUSS/GAS	*INFANT FOODS POWDER**	Tier 3				
ENFA NUTRAMI CON LIPIL	*INFANT FOODS CONC**	Tier 3				
ENFA NUTRAMI LIQ	*INFANT FOODS LIQUID**	Tier 3				
ENFA NUTRAMI LIQ DHA/ARA	*INFANT FOODS LIQUID**	Tier 3	X			
ENFA NUTRAMI LIQ DHA/ARA	*INFANT FOODS LIQUID**	Tier 4				
ENFA NUTRAMI POW PROB/LGG	*INFANT FOODS POWDER**	Tier 3				
ENFA NUTRAMI POW TOD/ENFL	*INFANT FOODS POWDER**	Tier 3				
ENFA PREGEST LIQ LIPIL	*INFANT FOODS LIQUID**	Tier 3				
ENFA PROSOBE CON LIPIL	*INFANT FOODS CONC**	Tier 3	X			
ENFA PROSOBE LIQ LIPIL	*INFANT FOODS LIQUID**	Tier 3				
ENFA PROSOBE LIQ SENSITIV	*INFANT FOODS LIQUID**	Tier 4				
ENFAGROW POW PREMIUM	*INFANT FOODS POWDER**	Tier 3				
ENFAGROW POW PREMIUM	*INFANT FOODS POWDER**	Tier 3	X			
ENFAGROW PRM POW TODDLER	*INFANT FOODS POWDER**	Tier 3				
ENFAMIL LIQ DHA/ARA	*INFANT FOODS LIQUID**	Tier 4	X			
ENFAMIL LIQ GENTLEAS	*INFANT FOODS LIQUID**	Tier 3				
ENFAMIL LIQ GENTLEAS	*INFANT FOODS LIQUID**	Tier 4				
ENFAMIL LIQ PREMATUR	*INFANT FOODS LIQUID**	Tier 3	X			
ENFAMIL POW ENSPIRE	*INFANT FOODS POWDER**	Tier 3				
ENFAMIL POW REGULINE	*INFANT FOODS POWDER**	Tier 3				
ENFAMIL AR LIQ LIPIL	*INFANT FOODS LIQUID**	Tier 3				
ENFAMIL AR POW SPIT-UP	*INFANT FOODS POWDER**	Tier 3				
ENFAMIL HUMA CON HIGH PRO	*INFANT FOODS CONC**	Tier 4				
ENFAMIL HUMA CON STD PROT	*INFANT FOODS CONC**	Tier 4				
ENFAMIL HUMA LIQ FORTIFIE	*INFANT FOODS LIQUID**	Tier 3				
ENFAMIL HUMA POW FORTIFIE	*INFANT FOODS PACKET**	Tier 3				
ENFAMIL INFA LIQ FORMULA	*INFANT FOODS LIQUID**	Tier 4				
ENFAMIL INFA POW FORMULA	*INFANT FOODS POWDER**	Tier 3				
ENFAMIL LIPI LIQ GENTLEAS	*INFANT FOODS LIQUID**	Tier 3				
ENFAMIL NEUR LIQ ENFACARE	*INFANT FOODS LIQUID**	Tier 4				
ENFAMIL NEUR LIQ INFANT	*INFANT FOODS LIQUID**	Tier 4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ENFAMIL NEUR POW ENFACARE	*INFANT FOODS POWDER**	Tier 3				
ENFAMIL NEUR POW GENTLEAS	*INFANT FOODS POWDER**	Tier 3				
ENFAMIL NEUR POW SENSITIV	*INFANT FOODS POWDER**	Tier 3				
ENFAMIL PREM CON LIPIIL	*INFANT FOODS CONC**	Tier 3				
ENFAMIL PREM LIQ INFANT	*INFANT FOODS LIQUID**	Tier 3	X			
ENFAMIL PREM POW INFANT	*INFANT FOODS POWDER**	Tier 3				
ENFAMIL PREM POW NEWBORN	*INFANT FOODS POWDER**	Tier 3				
ENFAMIL SOY POW PROSOBEE	*INFANT FOODS POWDER**	Tier 3				
ENFAROW LIQ NEUROPRO	*INFANT FOODS LIQUID**	Tier 4	X			
ENFAROW NEXT LIQ VANILLA	*INFANT FOODS LIQUID**	Tier 4				
ENTERAGAM POW 5GM	SERUM-DERIVED BOVINE IMMUNOGLOB/ PROTEIN ISOLATE 5 GM PACKET	Tier 3				
ERGOLOID MES TAB 1MG ORAL	ERGOLOID MESYLATES TAB 1 MG	Tier 2				
ESSENTRA MIS 9X9"	*ALCOHOL SHEETS***	Tier 4				
ETHOSUXIMIDE POW	ETHOSUXIMIDE (BULK) POWDER	Tier 4				
ETHYLPARABEN POW	*BULK CHEMICALS - POWDER**	Tier 5				
ETOPOSIDE POW	ETOPOSIDE (BULK) POWDER	Tier 5				
FC2 FEMALE MIS CONDOM	*CONDOMS - FEMALE***	Tier 1		X		
FE PYROPHOSP POW	*BULK CHEMICALS - POWDER**	Tier 5				
FEMCAP MIS 22MM	CERVICAL CAP 22 MM	Tier 1				
FEMCAP MIS 26MM	CERVICAL CAP 26 MM	Tier 1				
FEMCAP MIS 30MM	CERVICAL CAP 30 MM	Tier 1				
FIRDAPSE TAB 10MG	AMIFAMPRIDINE PHOSPHATE TAB 10 MG (BASE EQUIVALENT)	Tier 4	X	X		X
FISH OIL CAP 300MG	*OMEGA-3 FATTY ACIDS CAP 300 MG**	Tier 2				
FLAVOR BLEND SUS	*ORAL VEHICLES - SUSP***	Tier 4				
FLAVOR PLUS LIQ	*ORAL VEHICLES***	Tier 4				
FLAVOR SWEET SYP	*ORAL VEHICLES - SYRUP***	Tier 4				
FLEXICHAMBER MIS	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 4				
FLEXICHAMBER MIS MASK LRG	*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS***	Tier 3				
FLEXICHAMBER MIS MASK SM	*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS***	Tier 3				
FLUOROURACIL POW	FLUOROURACIL (BULK) POWDER	Tier 5				
FOLIC ACID POW	FOLIC ACID POWDER	Tier 4				
FOOD COLOR LIQ BLUE	DYE FDC BLUE 1 (BRILLIANT BLUE FCF) - LIQUID	Tier 4				
FORA TEST GO MIS ADV MOBL	*BLOOD GLUCOSE/KETONE MONITORING DEVICES***	Tier 4				
FORANE SOL	ISOFLURANE INHAL SOLN	Tier 3				
FORMALDEHYDE SOL 10%	FORMALDEHYDE SOLUTION 10%	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
FORMALDEHYDE SOL 37%	FORMALDEHYDE SOLUTION 37%	Tier 2				
FORTISCARE SOL CNTL HI	*BLOOD GLUCOSE CALIBRATION - LIQUID - HIGH***	Tier 3				
FORTISCARE SOL CNTL LOW	*BLOOD GLUCOSE CALIBRATION - LIQUID - LOW***	Tier 3				
FORTISCARE SOL CNTL NML	*BLOOD GLUCOSE CALIBRATION - LIQUID - NORMAL***	Tier 3				
FREEDOM GEL CEPAPRO	*GEL BASE - GEL**	Tier 4				
FREEDOM GEL SILOMAC	*GEL BASE - GEL**	Tier 4				
FT CO Q-10 CAP 100MG	COENZYME Q10 CAP 100 MG	Tier 2				
FT CO Q-10 CAP 200MG	COENZYME Q10 CAP 200 MG	Tier 2				
G-PREPROTEIN LIQ	*AMINO ACIDS ORAL LIQUID***	Tier 3	X			
GERBER GOOD CON SOY/IRON	*INFANT FOODS CONC**	Tier 3	X			
GERBER GOOD CON W/IRON	*INFANT FOODS CONC**	Tier 3	X			
GERBER GOOD LIQ SOY/IRON	*INFANT FOODS LIQUID**	Tier 3	X			
GERBER GOOD LIQ W/IRON	*INFANT FOODS LIQUID**	Tier 3	X			
GERBER GOOD POW SOY/IRON	*INFANT FOODS POWDER**	Tier 3	X			
GERBER GOOD POW W/IRON	*INFANT FOODS POWDER**	Tier 3	X			
GLIPIZIDE POW	GLIPIZIDE POWDER	Tier 4				
GLUCOSE SUP LIQ 1.2	*NUTRITIONAL SUPPLEMENT LIQUID (ENTERAL)**	Tier 4	X			
GLUTARALDEHY SOL 25%	GLUTARAL SOLN 25%	Tier 2				
GLYBURIDE POW	GLYBURIDE POWDER	Tier 4				
GLYCERIN LIQ	GLYCERIN LIQUID	Tier 3				
GLYCERIN LIQ	GLYCERIN LIQUID	Tier 4				
GLYCEROL LIQ FORMAL	GLYCERIN LIQUID	Tier 4				
GLYTAC COMPL BAR 10PE	*NUTRITIONAL SUPPLEMENT BAR**	Tier 4				
GNP PEN NEED MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
GNP PEN NEED MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
GNP ULTICARE MIS 31GX5/16	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
GOOD START CON SOY/IRON	*INFANT FOODS CONC**	Tier 3	X			
GOOD START CON W/IRON	*INFANT FOODS CONC**	Tier 3	X			
GOOD START LIQ SOY/IRON	*INFANT FOODS LIQUID**	Tier 3	X			
GOOD START LIQ W/IRON	*INFANT FOODS LIQUID**	Tier 3	X			
GOOD START POW NATURAL	*INFANT FOODS POWDER**	Tier 3				
GOOD START POW SOY PLS2	*INFANT FOODS POWDER**	Tier 3	X			
GOOD START POW SOY/IRON	*INFANT FOODS POWDER**	Tier 3	X			
GOOD START POW W/IRON	*INFANT FOODS POWDER**	Tier 3	X			
GOOD START 2 CON W/IRON	*INFANT FOODS CONC**	Tier 3				
GOOD START 2 LIQ W/IRON	*INFANT FOODS LIQUID**	Tier 3				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
GOOD START 2 POW SOY/IRON	*INFANT FOODS POWDER**	Tier 3	X			
GUARDIAN MIS LINK 3	*CONTINUOUS GLUCOSE SYSTEM TRANSMITTER***	Tier 4	X	X		
GUARDIAN 4 MIS TRANSMIT	*CONTINUOUS GLUCOSE SYSTEM TRANSMITTER***	Tier 4	X	X		
GUARDIAN CON MIS TRANSMIT	*CONTINUOUS GLUCOSE SYSTEM TRANSMITTER***	Tier 4	X	X		
GUARDIAN RT MIS CHARGER	*CONTINUOUS GLUCOSE MONITOR SUPPLIES***	Tier 4	X			
GUARDIAN RT MIS TST PLUG	*CONTINUOUS GLUCOSE MONITOR SUPPLIES***	Tier 4	X			
HEPARIN LOCK INJ 100/ML	HEPARIN SODIUM (PORCINE) LOCK FLUSH IV SOLN 100 UNIT/ML	Tier 2				
HEPARIN LOCK INJ 100/ML	HEPARIN SODIUM (PORCINE) LOCK FLUSH PF IV SOLN 100 UNIT/ML	Tier 2				
HEPARIN LOCK INJ 10UNT/ML	HEPARIN SODIUM (PORCINE) LOCK FLUSH IV SOLN 10 UNIT/ML	Tier 2				
HEPARIN LOCK INJ 10UNT/ML	HEPARIN SODIUM (PORCINE) LOCK FLUSH PF IV SOLN 10 UNIT/ML	Tier 2				
HERNEXEOS TAB 60MG	ZONGERTINIB TAB 60 MG	Tier 5	X	X		X
HOLDING CHAM MIS ADULT	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 4				
HOLDING CHAM MIS CHILD	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 4				
HORMONE BASE CRE NIOSOMES	*HORMONE CREAM BASE NIOSOMES**	Tier 4				
HORMONE HEAV CRE NIOSOMES	*HORMONE CREAM BASE NIOSOMES**	Tier 4				
HYDROGEL GEL	*CARBOMER GEL BASE**	Tier 4				
HYDROXYUREA POW	HYDROXYUREA (BULK) POWDER	Tier 5				
HYPO NEEDLE MIS 20GX1"	NEEDLE (DISP) 20 X 1"	Tier 3				
HYPO NEEDLE MIS 22GX1"	NEEDLE (DISP) 22 X 1"	Tier 3				
HYPO NEEDLE MIS 23GX1.5"	NEEDLE (DISP) 23 X 1-1/2"	Tier 3				
HYPO NEEDLE MIS 23GX1"	NEEDLE (DISP) 23 X 1"	Tier 3				
HYPO NEEDLE MIS 25GX1.5"	NEEDLE (DISP) 25 X 1-1/2"	Tier 3				
HYPO NEEDLE MIS 25GX1"	NEEDLE (DISP) 25 X 1"	Tier 3				
HYPO NEEDLE MIS 25GX5/8"	NEEDLE (DISP) 25 X 5/8"	Tier 3				
IGG 2000 CWP CAP	*PROTEIN CAP***	Tier 4				
IGG 2000 CWP POW	*PROTEIN ORAL POWDER***	Tier 4				
IGG PURE POW	*PROTEIN ORAL POWDER***	Tier 4				
IMPACT PEPT LIQ 1.5	*NUTRITIONAL SUPPLEMENT LIQUID (ENTERAL)**	Tier 4	X			
INBRIJA CAP 42MG	LEVODOPA INHAL POWDER CAP 42 MG	Tier 4	X	X		X
INFANT FORM POW /IRON	*INFANT FOODS POWDER**	Tier 3				
INFINITY SOL HIGH CON	*BLOOD GLUCOSE CALIBRATION - LIQUID - HIGH***	Tier 3				
INFINITY SOL LOW CON	*BLOOD GLUCOSE CALIBRATION - LIQUID - LOW***	Tier 3				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
INPEN 100EL MIS BLUE-HUM	INJECTION DEVICE FOR INSULIN	Tier 4			X	
INPEN 100EL MIS GREY-HUM	INJECTION DEVICE FOR INSULIN	Tier 4			X	
INPEN 100EL MIS PINK HUM	INJECTION DEVICE FOR INSULIN	Tier 4			X	
INPEN 100NN MIS BLUE NOV	INJECTION DEVICE FOR INSULIN	Tier 4			X	
INPEN 100NN MIS GREY NOV	INJECTION DEVICE FOR INSULIN	Tier 4			X	
INPEN 100NN MIS PINK NOV	INJECTION DEVICE FOR INSULIN	Tier 4			X	
INPEN BLUE MIS HUMALOG	INJECTION DEVICE FOR INSULIN	Tier 4			X	
INPEN BLUE MIS NOVO/FIA	INJECTION DEVICE FOR INSULIN	Tier 4			X	
INPEN GREY MIS HUMALOG	INJECTION DEVICE FOR INSULIN	Tier 4			X	
INPEN GREY MIS NOVO/FIA	INJECTION DEVICE FOR INSULIN	Tier 4			X	
INPEN PINK MIS HUMALOG	INJECTION DEVICE FOR INSULIN	Tier 4			X	
INPEN PINK MIS NOVO/FIA	INJECTION DEVICE FOR INSULIN	Tier 4			X	
INS SYR U500 MIS 0.5/31G	INSULIN SYRINGE/NEEDLE U-500 0.5 ML 31G X 6MM (15/64")	Tier 3		X		
INS SYR U500 MIS 31GX6MM	INSULIN SYRINGE/NEEDLE U-500 0.5 ML 31G X 6MM (15/64")	Tier 3		X		
INSPIREASE MIS DD SYST	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 4				
INSPIREASE MIS RES BAG	*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - BAGS***	Tier 3				
INSULIN SYRG MIS 0.3/29G	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 29 X 1/2"	Tier 3		X		
INSULIN SYRG MIS 0.3/30G	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 30 X 1/2"	Tier 3		X		
INSULIN SYRG MIS 0.3/30G	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 30 X 5/16"	Tier 3		X		
INSULIN SYRG MIS 0.3/31G	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 15/64"	Tier 3		X		
INSULIN SYRG MIS 0.3/31G	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16"	Tier 3		X		
INSULIN SYRG MIS 0.3ML/31	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16"	Tier 3		X		
INSULIN SYRG MIS 0.5/28G	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 28 X 1/2"	Tier 3		X		
INSULIN SYRG MIS 0.5/29G	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 29 X 1/2"	Tier 3		X		
INSULIN SYRG MIS 0.5/29G	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 29 X 5/16"	Tier 3		X		
INSULIN SYRG MIS 0.5/30G	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 1/2"	Tier 3		X		
INSULIN SYRG MIS 0.5/30G	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 5/16"	Tier 3		X		
INSULIN SYRG MIS 0.5/31G	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 15/64"	Tier 3		X		
INSULIN SYRG MIS 0.5/31G	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16"	Tier 3		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
INSULIN SYRG MIS 1/2ML/30	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 5/16"	Tier 3		X		
INSULIN SYRG MIS 1/2ML/31	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16"	Tier 3		X		
INSULIN SYRG MIS 1ML/27G	INSULIN SYRINGE/NEEDLE U-100 1 ML 27 X 5/8"	Tier 3		X		
INSULIN SYRG MIS 1ML/28G	INSULIN SYRINGE/NEEDLE U-100 1 ML 28 X 1/2"	Tier 3		X		
INSULIN SYRG MIS 1ML/28G	INSULIN SYRINGE/NEEDLE U-100 1 ML 28 X 5/16"	Tier 3		X		
INSULIN SYRG MIS 1ML/29G	INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 1/2"	Tier 3		X		
INSULIN SYRG MIS 1ML/29G	INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 5/16"	Tier 3		X		
INSULIN SYRG MIS 1ML/30G	INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 1/2"	Tier 3		X		
INSULIN SYRG MIS 1ML/30G	INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 5/16"	Tier 3		X		
INSULIN SYRG MIS 1ML/31G	INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 15/64"	Tier 3		X		
INSULIN SYRG MIS 1ML/31G	INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 5/16"	Tier 3		X		
INSULIN SYRG MIS 1ML/32G	INSULIN SYRINGE/NEEDLE U-100 1 ML 32 X 5/16"	Tier 3		X		
INSULIN SYRG MIS 27GX1/2"	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 27 X 1/2"	Tier 3		X		
INSULIN SYRG MIS 27GX1/2"	INSULIN SYRINGE/NEEDLE U-100 1 ML 27 X 1/2"	Tier 3		X		
INSULIN SYRG MIS 28GX1/2"	INSULIN SYRINGE/NEEDLE U-100 1 ML 28 X 1/2"	Tier 3		X		
INSULIN SYRG MIS 28GX1/2"	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 28 X 1/2"	Tier 3		X		
INSULIN SYRG MIS 28GX12MM	INSULIN SYRINGE/NEEDLE U-100 1 ML 28 X 1/2"	Tier 3		X		
INSULIN SYRG MIS 29GX1/2"	INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 1/2"	Tier 3		X		
INSULIN SYRG MIS 29GX1/2"	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 29 X 1/2"	Tier 3		X		
INSULIN SYRG MIS 29GX12MM	INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 1/2"	Tier 3		X		
INSULIN SYRG MIS 29GX12MM	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 29 X 1/2"	Tier 3		X		
INSULIN SYRG MIS 30GX1/2"	INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 1/2"	Tier 3		X		
INSULIN SYRG MIS 30GX12MM	INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 1/2"	Tier 3		X		
INSULIN SYRG MIS 30GX5/16	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 5/16"	Tier 3		X		
INSULIN SYRG MIS 30GX5/16	INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 5/16"	Tier 3		X		
INSULIN SYRG MIS 30GX8MM	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 5/16"	Tier 3		X		
INSULIN SYRG MIS 30GX8MM	INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 5/16"	Tier 3		X		
INSULIN SYRG MIS 31GX5/16	INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 5/16"	Tier 3		X		
INSULIN SYRG MIS 31GX5/16	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16"	Tier 3		X		
INSULIN SYRG MIS 31GX5/16	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16"	Tier 3		X		
INSULIN SYRG MIS 31GX8MM	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16"	Tier 3		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
INSULIN SYRG MIS 31GX8MM	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16"	Tier 3		X		
INSULIN SYRG MIS 31GX8MM	INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 5/16"	Tier 3		X		
INSUPEN MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
INSUPEN MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
IODINE SOL STRONG	IODINE SOLUTION STRONG 5% (LUGOL'S)	Tier 2				
IODINE SOL STRONG	IODINE SOLUTION STRONG (LUGOL'S) (BULK)	Tier 4				
ISOFLURANE SOL	ISOFLURANE INHAL SOLN	Tier 2				
JOURNAVX TAB 50MG	SUZETRIGINE TAB 50 MG	Tier 5		X		
KATE FARMS LIQ 1.5	*NUTRITIONAL SUPPLEMENT LIQUID (ENTERAL)**	Tier 4				
KRISGEL 100 GEL	KRISGEL 100 GEL	Tier 4				
KT TAPE MIS CGM PTCH	*CONTINUOUS GLUCOSE MONITOR SUPPLIES***	Tier 4	X			
L-ARGININE CAP 500MG	ARGININE CAP 500 MG	Tier 3				
L-ASPARAGINE POW MONOHYDR	*BULK CHEMICALS - POWDER**	Tier 5				
L-CITRULLINE CAP 600MG	CITRULLINE CAP 600 MG	Tier 3	X			
L-CITRULLINE POW	CITRULLINE (BULK) POWDER	Tier 4				
L-LYSINE HCL TAB 500MG	LYSINE HCL TAB 500 MG	Tier 3	X			
LANOLIN ANHY OIN	LANOLIN ANHYDROUS OINTMENT	Tier 4				
LECITHIN GEL	PREMIUM LECITHIN ORGANOGEL BASE GEL	Tier 4				
LECITHIN GRA	LECITHIN GRANULES	Tier 2				
LEUCINE PAK 100MG	LEUCINE ORAL POWDER PACKET 100 MG	Tier 3				
LEUCOVORIN POW CALCIUM	LEUCOVORIN CALCIUM POWDER	Tier 5				
LIMBREL CAP 250MG	FLAVOCOXID CAP 250 MG	Tier 3				
LIMBREL CAP 500MG	FLAVOCOXID CAP 500 MG	Tier 3				
LIMBREL250 CAP 250-50MG	FLAVOCOXID-CITRATED ZINC BISGLYCINATE CAP 250-50 MG	Tier 3				
LIMBREL500 CAP 500-50MG	FLAVOCOXID-CITRATED ZINC BISGLYCINATE CAP 500-50 MG	Tier 3				
LIPODERM HMW GEL PCCA	*GEL BASE - GEL**	Tier 4				
LIPOLAYER CRE	*CREAM BASE LIPOSOMIC**	Tier 4				
LIPOZYME CRE	*CREAM BASE LIPOSOMIC**	Tier 4				
LIQ PROTEIN LIQ FORTIFIE	*INFANT FOODS LIQUID**	Tier 2				
LIQUACEL LIQ	*AMINO ACIDS ORAL LIQUID***	Tier 4				
LIQUACEL LIQ	*AMINO ACIDS ORAL LIQUID***	Tier 4	X			
LIQUACEL LIQ APPLE	*AMINO ACIDS ORAL LIQUID***	Tier 4				
LIQUACEL LIQ GING ALE	*AMINO ACIDS ORAL LIQUID***	Tier 4				
LIQUACEL LIQ LEMON	*AMINO ACIDS ORAL LIQUID***	Tier 4				
LIQUACEL LIQ ORANGE	*AMINO ACIDS ORAL LIQUID***	Tier 4				
LIQUACEL LIQ PUMP+GO	*AMINO ACIDS ORAL LIQUID***	Tier 4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
LOVASTATIN POW	LOVASTATIN (BULK) POWDER	Tier 4				
LOVO-ODF LIQ CUSTOM	*PHARMACEUTICAL EXCIPIENTS (BULK) LIQUID**	Tier 4				
LUBRAJEL NP GEL	*GEL BASE - GEL**	Tier 4				
LUGOLS SOL	IODINE SOLUTION STRONG (LUGOL'S) (BULK)	Tier 3				
LYSINE TAB 1000MG	LYSINE HCL TAB 1000 MG	Tier 3	X			
MAGNESIUM POW BISGLYCI	MAGNESIUM GLYCINATE (BULK) POWDER	Tier 4				
MAGNESIUM POW GLYCINAT	MAGNESIUM GLYCINATE (BULK) POWDER	Tier 4				
MASK VORTEX/ MIS FROG	*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS***	Tier 3				
MASK VORTEX/ MIS LADY BUG	*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS***	Tier 3				
MAXICOMFORT MIS 27GX1/2	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 27 X 1/2"	Tier 3		X		
MAXICOMFORT MIS 27GX1/2"	INSULIN SYRINGE/NEEDLE U-100 1 ML 27 X 1/2"	Tier 3		X		
MAXICOMFORT MIS 31GX1/4"	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
MAXPRO-18G LIQ	*PROTEIN ORAL LIQUID***	Tier 4				
MELATOL PEDI LIQ 1MG/ML	MELATONIN LIQUID 1 MG/ML	Tier 4				
MERCAPTOPURI POW	MERCAPTOPURINE (BULK) POWDER	Tier 5				
MERCAPTOPURI POW	MERCAPTOPURINE MONOHYDRATE (BULK) POWDER	Tier 5				
MERCAPTOPURI POW MONOHYDR	MERCAPTOPURINE MONOHYDRATE (BULK) POWDER	Tier 5				
METHERGINE TAB 0.2MG	METHYLERGONOVINE MALEATE TAB 0.2 MG	Tier 5		X		
METHIONINE POW	METHIONINE ORAL PACKET 100 MG	Tier 3	X			
METHOTREXATE POW	METHOTREXATE POWDER	Tier 4				
METHYLERGON TAB 0.2MG	METHYLERGONOVINE MALEATE TAB 0.2 MG	Tier 2		X		
METHYLPRED POW ACETATE	METHYLPREDNISOLONE ACETATE POWDER	Tier 4				
METOPIRONE CAP 250MG	METYRAPONE CAP 250 MG	Tier 4				
MICONAZOLE POW NITRATE	MICONAZOLE NITRATE POWDER	Tier 4				
MICROCHAMBER MIS	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 4				
MIDAZOLAM POW	MIDAZOLAM (BULK) POWDER	Tier 4				
MINIMED 630G MIS TRANSMIT	*CONTINUOUS GLUCOSE SYSTEM TRANSMITTER***	Tier 4	X			
MIPLYFFA CAP 124MG	ARIMOCLOMOL CITRATE CAP 124 MG	Tier 5	X	X		X
MIPLYFFA CAP 47MG	ARIMOCLOMOL CITRATE CAP 47 MG	Tier 5	X	X		X
MIPLYFFA CAP 62MG	ARIMOCLOMOL CITRATE CAP 62 MG	Tier 5	X	X		X
MIPLYFFA CAP 93MG	ARIMOCLOMOL CITRATE CAP 93 MG	Tier 5	X	X		X
MITOMYCIN POW	MITOMYCIN (BULK) POWDER	Tier 5				
MUCOLOX LIQ	*PHARMACEUTICAL EXCIPIENTS (BULK) LIQUID**	Tier 4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
NEEDL COLLEC MIS DISPOSAL	*SHARPS CONTAINER - MISC***	Tier 4				
NEEDLE COLLE MIS DISPOSAL	*SHARPS CONTAINER - MISC***	Tier 4				
NITROFURANTN SUS 25MG/5ML	NITROFURANTOIN SUSP 25 MG/5ML	Tier 4				
NORDIPEN 5 MIS DEVICE	*INJECTION DEVICE - MISC***	Tier 4				
NORDIPEN DEL MIS SYSTEM	*INJECTION DEVICE - MISC***	Tier 4				
NOVAFILM GEL	*GEL BASE - GEL**	Tier 4				
NOVOPEN ECHO MIS	INJECTION DEVICE FOR INSULIN	Tier 4				
NZ WHEY PROT POW ISOLATE	*PROTEIN ORAL POWDER***	Tier 4				
OCCLUSADERM GEL PCCA	*GEL BASE - GEL**	Tier 4				
OMNIFLEX DPR	*DIAPHRAGMS***	Tier 1				
OMNIPOD 5 DX KIT INT G7G6	*INSULIN INFUSION DISPOSABLE PUMP KIT***	Tier 3	X	X		
OMNIPOD 5 DX MIS POD G7G6	*INSULIN INFUSION DISPOSABLE PUMP RESERVOIR***	Tier 3	X	X		
OMNIPOD 5 DX MIS POD G7G6	*INSULIN INFUSION DISPOSABLE PUMP RESERVOIR***	Tier 3	X			
OMNIPOD 5 G7 KIT INTRO	*INSULIN INFUSION DISPOSABLE PUMP KIT***	Tier 3	X	X		
OMNIPOD 5 G7 MIS PODS	*INSULIN INFUSION DISPOSABLE PUMP RESERVOIR***	Tier 3	X	X		
OMNIPOD 5 L2 KIT INTRO G6	*INSULIN INFUSION DISPOSABLE PUMP KIT***	Tier 3	X			
OMNIPOD 5 L2 MIS PODS G6	*INSULIN INFUSION DISPOSABLE PUMP RESERVOIR***	Tier 3	X			
ONETOUCH LIQ VERIO 4	*BLOOD GLUCOSE CALIBRATION - LIQUID - HIGH***	Tier 2				
ORA-BLEND SUS	*ORAL VEHICLES - SUSP***	Tier 4				
ORA-BLEND SF SUS	*ORAL VEHICLES - SUSP***	Tier 4				
ORA-PLUS LIQ	*ORAL VEHICLES***	Tier 4				
ORA-SWEET SYP	*ORAL VEHICLES - SYRUP***	Tier 3				
ORA-SWEET SF SYP	*ORAL VEHICLES - SYRUP***	Tier 4				
ORAPENN SD LIQ SWEET	*ORAL VEHICLES***	Tier 4				
ORLYNVAH TAB 500-500	SULOPENEM ETZADROXIL-PROBENECID TAB 500-500 MG	Tier 5		X		
OSELTAMIVIR POW	OSELTAMIVIR PHOSPHATE (BULK) POWDER	Tier 4				
PALFORZIA CAP 1-3YRS	PEANUT POWDER-DNFP STARTER PACK 0.5 & 1 & 1.5 & 3 MG	Tier 5	X	X		
PALFORZIA CAP 4-17YRS	PEANUT POWDER-DNFP STARTER PACK 0.5 & 1 & 1.5 & 3 & 6 MG	Tier 5	X	X		
PALFORZIA CAP ESCALAT	PEANUT POWDER-DNFP STARTER PACK 0.5 & 1 & 1.5 & 3 & 6 MG	Tier 5	X	X		
PALFORZIA CAP LEVEL 0	PEANUT POWDER-DNFP CAP SPRINKLE PACK 1 X 1 MG (1 MG DOSE)	Tier 5	X			
PALFORZIA CAP LEVEL 1	PEANUT POWDER-DNFP CAP SPRINKLE PACK 3 X 1 MG (3 MG DOSE)	Tier 5	X	X		
PALFORZIA CAP LEVEL 10	PEANUT POWDER-DNFP PACK 2 X 20 MG & 2 X 100 MG (240 MG DOSE)	Tier 5	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PALFORZIA CAP LEVEL 2	PEANUT POWDER-DNFP CAP SPRINKLE PACK 6 X 1 MG (6 MG DOSE)	Tier 5	X	X		
PALFORZIA CAP LEVEL 3	PEANUT POWDER-DNFP PACK 2 X 1 MG & 10 MG (12 MG DOSE)	Tier 5	X	X		
PALFORZIA CAP LEVEL 4	PEANUT POWDER-DNFP CAP SPRINKLE PACK 20 MG (20 MG DOSE)	Tier 5	X	X		
PALFORZIA CAP LEVEL 5	PEANUT POWDER-DNFP CAP SPRINKLE PACK 2 X 20 MG (40 MG DOSE)	Tier 5	X	X		
PALFORZIA CAP LEVEL 6	PEANUT POWDER-DNFP CAP SPRINKLE PACK 4 X 20 MG (80 MG DOSE)	Tier 5	X	X		
PALFORZIA CAP LEVEL 7	PEANUT POWDER-DNFP PACK 20 MG & 100 MG (120 MG DOSE)	Tier 5	X	X		
PALFORZIA CAP LEVEL 8	PEANUT POWDER-DNFP PACK 3 X 20 MG & 100 MG (160 MG DOSE)	Tier 5	X	X		
PALFORZIA CAP LEVEL 9	PEANUT POWDER-DNFP PACK 2 X 100 MG (200 MG DOSE)	Tier 5	X	X		
PALFORZIA POW LEVEL 11	PEANUT ALLERGEN POWDER-DNFP TITRATION PACKET 300 MG	Tier 5	X	X		
PALFORZIA POW LEVEL 11	PEANUT ALLERGEN POWDER-DNFP MAINTENANCE PACKET 300 MG	Tier 5	X	X		
PARI VORTEX MIS ADL MASK	*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS***	Tier 3				
PCCA ACACIA SYP BASE	ACACIA SYRUP	Tier 4				
PCCA COBASE OIN #1	COBASE #1 OINTMENT BASE	Tier 4				
PCCA CUSTOM CRE LIPO-MAX	*CREAM BASE LIPOSOMIC**	Tier 4				
PCCA LIPOSOM CRE DRY	*CREAM BASE LIPOSOMIC**	Tier 4				
PCCA LIPOSOM CRE NORMAL	*CREAM BASE LIPOSOMIC**	Tier 4				
PCCA LIPOSOM CRE OILY	*CREAM BASE LIPOSOMIC**	Tier 4				
PCCA LIPOSOM CRE SENSITIV	*CREAM BASE LIPOSOMIC**	Tier 4				
PCCA SWEET SYP -SF	*ORAL VEHICLES - SYRUP***	Tier 4				
PCCA SYRUP SYP VEHICLE	*ORAL VEHICLES - SYRUP***	Tier 4				
PCCA-PLUS SUS	*ORAL VEHICLES - SUSP***	Tier 4				
PEG BASE OIN	POLYETHYLENE GLYCOL OINTMENT	Tier 4				
PEN NEEDLE MIS 29GX3/16	INSULIN PEN NEEDLE 29 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
PEN NEEDLE MIS 29GX5/16	INSULIN PEN NEEDLE 29 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
PEN NEEDLE MIS 31GX4MM	INSULIN PEN NEEDLE 31 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
PEN NEEDLE MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
PEN NEEDLE MIS 31GX6MM	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
PEN NEEDLE MIS 33GX4MM	INSULIN PEN NEEDLE 33 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
PEN NEEDLE MIS 33GX5/32	INSULIN PEN NEEDLE 33 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
PEN NEEDLE MIS 33GX5MM	INSULIN PEN NEEDLE 33 G X 5 MM (1/5" OR 3/16")	Tier 3		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PEN NEEDLE MIS 33GX6MM	INSULIN PEN NEEDLE 33 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
PEN NEEDLES MIS 29GX1/2"	INSULIN PEN NEEDLE 29 G X 12 MM (1/2")	Tier 3		X		
PEN NEEDLES MIS 29GX10MM	INSULIN PEN NEEDLE 29 G X 10 MM	Tier 3		X		
PEN NEEDLES MIS 29GX12.7	INSULIN PEN NEEDLE 29 G X 12.7 MM (1/2")	Tier 3		X		
PEN NEEDLES MIS 29GX12MM	INSULIN PEN NEEDLE 29 G X 12 MM (1/2")	Tier 3		X		
PEN NEEDLES MIS 30GX3/16	INSULIN PEN NEEDLE 30 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
PEN NEEDLES MIS 30GX5MM	INSULIN PEN NEEDLE 30 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
PEN NEEDLES MIS 31GX1/4"	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
PEN NEEDLES MIS 31GX3/16	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
PEN NEEDLES MIS 31GX5/16	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
PEN NEEDLES MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
PEN NEEDLES MIS 31GX6MM	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
PEN NEEDLES MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
PEN NEEDLES MIS 32GX8MM	INSULIN PEN NEEDLE 32 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
PEN NEEDLES MIS 33GX5/32	INSULIN PEN NEEDLE 33 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
PENTIPS MIS 29GX12MM	INSULIN PEN NEEDLE 29 G X 12 MM (1/2")	Tier 3		X		
PENTIPS MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
PENTIPS MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
PEPTICATE POW	*INFANT FOODS POWDER**	Tier 3				
PERFECT POIN MIS 25GX1"	NEEDLE (DISP) 25 X 1"	Tier 3				
PETROLATUM GEL WHITE	WHITE PETROLATUM TOPICAL GEL	Tier 2				
PETROLATUM OIN WHITE	WHITE PETROLATUM OINTMENT	Tier 4				
PETROLATUM OIN YELLOW	PETROLATUM OINTMENT	Tier 4				
PHENYL-FREE POW 1	*INFANT FOODS POWDER**	Tier 3	X			
PKU EASY TAB MICROTAB	*NUTRITIONAL SUPPLEMENT TABS DELAYED RELEASE**	Tier 4				
PKU EASY TAB PLUS	*NUTRITIONAL SUPPLEMENT TABS DELAYED RELEASE**	Tier 4				
PKU GOLIKE POW PL 4-16	*AMINO ACIDS PACK***	Tier 4				
PKU GOLIKE POW PLUS 16+	*AMINO ACIDS PACK***	Tier 4				
PLO GEL MEDIFLO	PREMIUM LECITHIN ORGANOGEAL BASE GEL	Tier 4				
PLO MEDIFLO GEL 30	PREMIUM LECITHIN ORGANOGEAL BASE GEL	Tier 4				
PLO MEDIFLO KIT 30 KIT	PREMIUM LECITHIN ORGANOGEAL BASE KIT	Tier 4				
PLO MEDIFLO KIT KIT	PREMIUM LECITHIN ORGANOGEAL BASE KIT	Tier 4				
PLO TRANSDER CRE	*TRANSDERMAL BASE CREAM**	Tier 4				
PLO20 GEL FLOWABLE	PREMIUM LECITHIN ORGANOGEAL BASE GEL	Tier 4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PLO20 GEL NON-FLOW	PREMIUM LECITHIN ORGANOGEL BASE GEL	Tier 4				
POLY HUB MIS 20GX1"	NEEDLE (DISP) 20 X 1"	Tier 3				
POLY HUB MIS 21GX1.5"	NEEDLE (DISP) 21 X 1-1/2"	Tier 3				
POLY HUB MIS 21GX1"	NEEDLE (DISP) 21 X 1"	Tier 3				
POLY HUB MIS 22GX1.5"	NEEDLE (DISP) 22 X 1-1/2"	Tier 3				
POLY HUB MIS 22GX1"	NEEDLE (DISP) 22 X 1"	Tier 3				
POLY HUB MIS 23GX1.5"	NEEDLE (DISP) 23 X 1-1/2"	Tier 3				
POLY HUB MIS 23GX1"	NEEDLE (DISP) 23 X 1"	Tier 3				
POLY HUB MIS 25GX1.5"	NEEDLE (DISP) 25 X 1-1/2"	Tier 3				
POLY HUB MIS 25GX1"	NEEDLE (DISP) 25 X 1"	Tier 3				
POLY HUB MIS 25GX5/8"	NEEDLE (DISP) 25 X 5/8"	Tier 3				
POLY HUB MIS 27GX1/2"	NEEDLE (DISP) 27 X 1/2"	Tier 3				
POLY HUB MIS 30GX1/2"	NEEDLE (DISP) 30 X 1/2"	Tier 3				
POLYETH GLYC OIN 8000	POLYETHYLENE GLYCOL 8000 OINT	Tier 4				
POLYMAC GEL PROGEL	*GEL BASE - GEL**	Tier 4				
POLYOX POW WSR-301	*BULK CHEMICALS - POWDER**	Tier 5				
POLYOX WSR POW -301	*BULK CHEMICALS - POWDER**	Tier 5				
POLYPEG OIN BASE	POLYETHYLENE GLYCOL OINTMENT	Tier 4				
POLYSORBATE LIQ 80	POLYSORBATE 80 LIQ	Tier 4				
POLYSORBATE LIQ 80	POLYSORBATE 80 LIQ	Tier 3				
POT IODIDE SOL 1GM/ML	POTASSIUM IODIDE ORAL SOLN 1 GM/ML	Tier 2				
POT PHOSPHAT GRA DIBASIC	POTASSIUM PHOSPHATE DIBASIC GRANULES	Tier 4				
PRE PROTEIN POW	*PROTEIN ORAL POWDER***	Tier 3				
PRE PROTEIN TAB	*AMINO ACIDS TAB***	Tier 3	X			
PREGESTIMIL POW	*INFANT FOODS POWDER**	Tier 3				
PREPROTEIN LIQ	*AMINO ACIDS ORAL LIQUID***	Tier 3				
PREPROTEIN LIQ 20	*AMINO ACIDS ORAL LIQUID***	Tier 3				
PREVENT DROP MIS 31GX1/4"	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
PREVENT DROP MIS 31GX5/16	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
PREVENT SAFE MIS 31GX1/4"	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
PREVENT SAFE MIS 31GX5/16	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
PRO COMFORT MIS 0.5/30G	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 5/16"	Tier 3		X		
PRO COMFORT MIS 0.5/31G	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16"	Tier 3		X		
PRO COMFORT MIS 1ML/30G	INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 5/16"	Tier 3		X		
PRO COMFORT MIS 1ML/31G	INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 5/16"	Tier 3		X		
PROCEL POW	*PROTEIN ORAL POWDER***	Tier 4	X			

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PROCEL POW CHOCOLAT	*PROTEIN ORAL POWDER***	Tier 4	X			
PROCEL 100 POW	*PROTEIN ORAL POWDER***	Tier 4	X			
PROCHAMBER MIS VHC	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 4				
PROGESTERONE POW MICRONIZ	PROGESTERONE MICRONIZED (BULK) POWDER	Tier 4				
PROSOURCE LIQ NO CARB	*PROTEIN ORAL LIQUID***	Tier 4				
PROSOURCE LIQ TF FREE	*PROTEIN LIQUID (ENTERAL)***	Tier 4	X			
PROSOURCE LIQ TF20	*PROTEIN LIQUID (ENTERAL)***	Tier 4				
PROSYMINIC POW	*PROTEIN ORAL POWDER***	Tier 4				
PROTEIN CHW 500MG	PROTEIN CHEW TAB 500 MG	Tier 2				
PROTEIN CHW 500MG	PROTEIN CHEW TAB 500 MG	Tier 3				
PROTEIN POW 80%	PROTEIN POWDER 80%	Tier 3				
PROTEIN POW 80%	PROTEIN POWDER 80%	Tier 2	X			
PROTEIN POW 90%	*PROTEIN ORAL POWDER***	Tier 2	X			
PURAMINO POW DHA/ARA	*INFANT FOODS POWDER**	Tier 3				
PURE BLISS LIQ ORG/IRON	*INFANT FOODS LIQUID**	Tier 4				
PURE COMFORT MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
PURE COMFORT MIS 31GX6MM	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
PURIFIED LIQ WATER	*DISTILLED WATER***	Tier 4				
PYRIDOSTIGMI TAB ER 105MG	PYRIDOSTIGMINE BROMIDE TAB ER 24HR 105 MG (PROTECTIVE)	Tier 4				
QFITLIA INJ 20/0.2ML	FITUSIRAN SODIUM SUBCUTANEOUS SOLN 20 MG/0.2ML	Tier 5	X	X	X	X
QFITLIA INJ 50/0.5ML	FITUSIRAN SODIUM SUBCUTANEOUS SOLN AUTO-INJ 50 MG/0.5ML	Tier 5	X	X	X	X
QUICK TOUCH MIS 29GX12.7	INSULIN PEN NEEDLE 29 G X 12.7 MM (1/2")	Tier 3		X		
QUICK TOUCH MIS 31GX4MM	INSULIN PEN NEEDLE 31 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
QUICK TOUCH MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
QUICK TOUCH MIS 31GX6MM	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
QUICK TOUCH MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
QUICK TOUCH MIS 32GX8MM	INSULIN PEN NEEDLE 32 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
QUICK TOUCH MIS 33GX4MM	INSULIN PEN NEEDLE 33 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
QUICK TOUCH MIS 33GX5MM	INSULIN PEN NEEDLE 33 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
QUICK TOUCH MIS 33GX6MM	INSULIN PEN NEEDLE 33 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
QUICK TOUCH MIS 33GX8MM	INSULIN PEN NEEDLE 33 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
RA L-LYSINE TAB 1000MG	LYSINE HCL TAB 1000 MG	Tier 3				
RA L-LYSINE TAB 500MG	LYSINE HCL TAB 500 MG	Tier 3				
RA PEN NEEDL MIS 31GX3/16	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 3		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
RADIOGARDASE CAP 0.5GM	PRUSSIAN BLUE INSOLUBLE CAP 0.5 GM	Tier 4				
RASPBERRY SYP	RASPBERRY SYRUP	Tier 4				
RAYA SURE MIS 29GX12MM	INSULIN PEN NEEDLE 29 G X 12 MM (1/2")	Tier 3		X		
RAYA SURE MIS 31GX4MM	INSULIN PEN NEEDLE 31 G X 4 MM (1/6" OR 5/32")	Tier 3		X		
RAYA SURE MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
RAYA SURE MIS 31GX6MM	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
RAYA SURE MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
RAYASAL CRE 5.9%	SALICYLIC ACID CREAM 5.9%	Tier 4				
REAL FOOD LIQ BLENDS	*NUTRITIONAL SUPPLEMENT LIQUID (ENTERAL)**	Tier 4				
REFRESH AA15 LIQ PKU LEMO	*AMINO ACIDS ORAL LIQUID***	Tier 3	X			
REFRESH AA15 LIQ PKU ORG	*AMINO ACIDS ORAL LIQUID***	Tier 3	X			
REFRESH AA15 LIQ TYR ORG	*AMINO ACIDS ORAL LIQUID***	Tier 4	X			
RENAL SUPPRT LIQ 1.8	*NUTRITIONAL SUPPLEMENT LIQUID (ENTERAL)**	Tier 4	X			
RIBAVIRIN POW	RIBAVIRIN (BULK) POWDER	Tier 5				
SAFETYGLIDE MIS 21GX1.5"	NEEDLE (DISP) 21 X 1-1/2"	Tier 3				
SAFETYGLIDE MIS 21GX1"	NEEDLE (DISP) 21 X 1"	Tier 3				
SAFTY NEEDLE MIS 19GX1.5"	NEEDLE (DISP) 19 X 1-1/2"	Tier 3				
SAFTY NEEDLE MIS 19GX1"	NEEDLE (DISP) 19 X 1"	Tier 3				
SAFTY NEEDLE MIS 20GX1.5"	NEEDLE (DISP) 20 X 1-1/2"	Tier 3				
SAFTY NEEDLE MIS 20GX1"	NEEDLE (DISP) 20 X 1"	Tier 3				
SAFTY NEEDLE MIS 21GX1.5"	NEEDLE (DISP) 21 X 1-1/2"	Tier 3				
SAFTY NEEDLE MIS 21GX1"	NEEDLE (DISP) 21 X 1"	Tier 3				
SAFTY NEEDLE MIS 22GX1.5"	NEEDLE (DISP) 22 X 1-1/2"	Tier 3				
SAFTY NEEDLE MIS 22GX1"	NEEDLE (DISP) 22 X 1"	Tier 3				
SAFTY NEEDLE MIS 23GX1"	NEEDLE (DISP) 23 X 1"	Tier 3				
SAFTY NEEDLE MIS 25GX1"	NEEDLE (DISP) 25 X 1"	Tier 3				
SAFTY NEEDLE MIS 25GX5/8"	NEEDLE (DISP) 25 X 5/8"	Tier 3				
SALICATE LIQ 10%	SALICYLIC ACID LIQUID 10%	Tier 4				
SALICYLIC AC SOL 26%	SALICYLIC ACID SOLN 26%	Tier 2				
SECURESAFE MIS 29GX1/2"	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 29 X 1/2"	Tier 3		X		
SECURESAFE MIS 29GX1/2"	INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 1/2"	Tier 3		X		
SEVOFLURANE SOL	SEVOFLURANE INHAL SOLN	Tier 2				
SHARP CONTAI MIS	*SHARPS CONTAINER - MISC***	Tier 4				
SHARPS COLL MIS 0.05GAL	*SHARPS CONTAINER - MISC***	Tier 4				
SHARPS COLL MIS 5.4QT	*SHARPS CONTAINER - MISC***	Tier 4				
SHARPS COLL MIS 6.9QT	*SHARPS CONTAINER - MISC***	Tier 4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
SHARPS COLL MIS 8.2QT	*SHARPS CONTAINER - MISC***	Tier 4				
SHARPS CONT MIS 1 QT	*SHARPS CONTAINER - MISC***	Tier 4				
SHARPS CONTA MIS 0.05L	*SHARPS CONTAINER - MISC***	Tier 4				
SHARPS UNIV MIS CONTAINER	*SHARPS CONTAINER - MISC***	Tier 4				
SIMILAC LIQ SENSITIV	*INFANT FOODS LIQUID**	Tier 4				
SIMILAC POW NEOSURE	*INFANT FOODS POWDER**	Tier 3				
SIMILAC 360 LIQ 5 HMO	*INFANT FOODS LIQUID**	Tier 4				
SIMILAC 360 LIQ SENS HMO	*INFANT FOODS LIQUID**	Tier 4				
SIMILAC 360 POW 5 HMO	*INFANT FOODS POWDER**	Tier 3				
SIMILAC 360 POW SENSITIV	*INFANT FOODS POWDER**	Tier 3				
SIMILAC ADV LIQ KOSHER	*INFANT FOODS LIQUID**	Tier 4				
SIMILAC ALIM LIQ IMMUNE	*INFANT FOODS LIQUID**	Tier 4				
SIMILAC ALIM POW TODDLER	*INFANT FOODS POWDER**	Tier 3				
SIMILAC SOY LIQ ISOMIL	*INFANT FOODS LIQUID**	Tier 4				
SIMILAC SOY POW ISOMIL	*INFANT FOODS POWDER**	Tier 3				
SIMILAC SPEC LIQ PREMATURE	*INFANT FOODS LIQUID**	Tier 4				
SIMILAC TOTL POW CMFT/IRO	*INFANT FOODS POWDER**	Tier 3				
SIMPLE SYP	SIMPLE - SYRUP	Tier 4				
SIMPLGEL 30 GEL	*GEL BASE - GEL**	Tier 4				
SIROLIMUS POW	SIROLIMUS (BULK) POWDER	Tier 5				
SOD PYROPHOS POW ANHYDROU	*BULK CHEMICALS - POWDER**	Tier 5				
SODIUM POW CHLORIDE	SODIUM CHLORIDE POWDER	Tier 4				
SOHONOS CAP 1.5MG	PALOVAROTENE CAP 1.5 MG	Tier 5	X	X		X
SOHONOS CAP 10MG	PALOVAROTENE CAP 10 MG	Tier 5	X	X		X
SOHONOS CAP 1MG	PALOVAROTENE CAP 1 MG	Tier 5	X	X		X
SOHONOS CAP 2.5MG	PALOVAROTENE CAP 2.5 MG	Tier 5	X	X		X
SOHONOS CAP 5MG	PALOVAROTENE CAP 5 MG	Tier 5	X	X		X
SSKI SOL 1GM/ML	POTASSIUM IODIDE ORAL SOLN 1 GM/ML	Tier 4				
SURE COMFORT MIS 31GX1/4	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
SURE COMFORT MIS 31GX3/16	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
SURE COMFORT MIS 31GX5/16	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
SUSPENDRX SUS SWEET	*ORAL VEHICLES - SUSP***	Tier 4				
SUSPENDRX SUS UNSWEET	*ORAL VEHICLES - SUSP***	Tier 4				
SUSPENSION SUS VEHICLE	*ORAL VEHICLES - SUSP***	Tier 4				
SYRG/NEEDLE MIS 29GX12.5	INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 1/2"	Tier 3		X		
SYRG/NEEDLE MIS 31GX8MM	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16"	Tier 3		X		
SYRG/NEEDLE MIS 31GX8MM	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16"	Tier 3		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
SYRG/NEEDLE MIS 31GX8MM	INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 5/16"	Tier 3		X		
SYRPALTA SYP	*ORAL VEHICLES - SYRUP***	Tier 4				
SYRPALTA SYP	SIMPLE - SYRUP	Tier 4				
SYRSPEND SF LIQ	*ORAL VEHICLES***	Tier 4				
SYRSPEND SF SUS PH4	*ORAL VEHICLES FOR SUSP***	Tier 4				
SYRUP SYP VEHICLE	*ORAL VEHICLES - SYRUP***	Tier 4				
SYRUP SF SYP VEHICLE	*ORAL VEHICLES - SYRUP***	Tier 4				
TACROLIMUS POW	TACROLIMUS (BULK) POWDER	Tier 5				
TACROLIMUS POW MONOHYD	TACROLIMUS (BULK) POWDER	Tier 5				
TDC MAX CRE	*TRANSDERMAL BASE CREAM**	Tier 4				
TERBUTALINE POW SULFATE	TERBUTALINE SULFATE POWDER	Tier 4				
TERRELL SOL	ISOFLURANE INHAL SOLN	Tier 2				
TESTOSTERONE CRY YAM	TESTOSTERONE MICRONIZED (BULK) CRYSTALS	Tier 4				
TESTOSTERONE POW	TESTOSTERONE (BULK) POWDER	Tier 4				
TESTOSTERONE POW CYPIONAT	TESTOSTERONE CYPIONATE (BULK) POWDER	Tier 4				
TESTOSTERONE POW ENANTHAT	TESTOSTERONE ENANTHATE (BULK) POWDER	Tier 4				
TESTOSTERONE POW MICRONIZ	TESTOSTERONE MICRONIZED (BULK) POWDER	Tier 4				
TESTOSTERONE POW SOY	TESTOSTERONE MICRONIZED (BULK) POWDER	Tier 4				
TESTOSTERONE POW SOY	TESTOSTERONE (BULK) POWDER	Tier 4				
THIOGUANINE POW	THIOGUANINE (BULK) POWDER	Tier 5				
THIOTEPA POW	THIOTEPA (BULK) POWDER	Tier 5				
TODDLER BEGI POW IRON	*INFANT FOODS POWDER**	Tier 3				
TOMMY GEL GEL	*GEL BASE - GEL**	Tier 4				
TRANSDERMAL CRE PAIN BAS	*TRANSDERMAL BASE CREAM**	Tier 4				
TRICHLOROACE CRY ACID	TRICHLOROACETIC ACID (BULK) CRYSTALS	Tier 4				
TRICHOSOL SOL	*EXTERNAL VEHICLES - SOLUTION***	Tier 4				
TROJAN MIS BARESKIN	CONDOMS LATEX LUBRICATED	Tier 1		X		
TROJAN MAGN MIS	CONDOMS LATEX LUBRICATED	Tier 1		X		
TROJAN ULTRA MIS RIBBED	CONDOMS LATEX LUBRICATED	Tier 1		X		
TROJAN ULTRA MIS THIN	CONDOMS LATEX LUBRICATED	Tier 1		X		
TROJAN-ENZ MIS LUBRICAT	CONDOMS LATEX LUBRICATED	Tier 1		X		
TROJAN-ENZ MIS W/SPERMI	CONDOMS LATEX LUBRICATED	Tier 1		X		
TRUE COVER MIS CONDOM	CONDOMS LATEX LUBRICATED	Tier 1		X		
TRUE METRIX SOL LEVEL 1	*BLOOD GLUCOSE CALIBRATION - LIQUID - LOW***	Tier 3				
TRUE METRIX SOL LEVEL 2	*BLOOD GLUCOSE CALIBRATION - LIQUID - NORMAL***	Tier 3				
TRUE METRIX SOL LEVEL 3	*BLOOD GLUCOSE CALIBRATION - LIQUID - HIGH***	Tier 3				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
TRYNGOLZA INJ 80MG/0.8	OLEZARSEN SOD SUBCUT SOLN AUTO-INJECT 80 MG/0.8ML (BASE EQ)	Tier 5	X	X		X
TWIIST KIT REFILL	*INSULIN INFUSION DISPOSABLE PUMP RESERVOIR KIT***	Tier 3	X	X		
TWIIST KIT STARTER	*INSULIN INFUSION DISPOSABLE PUMP KIT***	Tier 3	X	X		
TWIIST REFIL KIT INFUSION	*INSULIN INFUSION DISPOSABLE PUMP RESERVOIR/INFUS SET KIT***	Tier 3	X	X		
ULTANE SOL	SEVOFLURANE INHAL SOLN	Tier 4				
UNIFINE PNTP MIS 29GX12MM	INSULIN PEN NEEDLE 29 G X 12 MM (1/2")	Tier 3		X		
UNIFINE PNTP MIS 31GX3/16	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
UNIFINE PNTP MIS 31GX5/16	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
UNIFINE PNTP MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
UNIFINE PNTP MIS 31GX6MM	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
UNIFINE PNTP MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
UNIFINE PROT MIS 30GX5MM	INSULIN PEN NEEDLE 30 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
UNIFINE SAFE MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
UNIFINE SAFE MIS 31GX6MM	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 3		X		
UNIFINE SAFE MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
UNISPEND ANH SUS SWEETENE	*ORAL VEHICLES - SUSP***	Tier 4				
UNJURY POW CHICKEN	*PROTEIN ORAL POWDER***	Tier 4				
UNJURY POW CHOCOLAT	*PROTEIN ORAL POWDER***	Tier 4				
UNJURY POW STRAWBRY	*PROTEIN ORAL POWDER***	Tier 4				
UNJURY POW UNFLAVOR	*PROTEIN ORAL POWDER***	Tier 4				
UNJURY POW VANILLA	*PROTEIN ORAL POWDER***	Tier 4				
UREA POW	UREA POWDER	Tier 4				
UREA PRILLED BEA	UREA BEADS	Tier 4				
VALINE PAK 50MG	VALINE ORAL POWDER PACKET 50 MG	Tier 3				
VALINE 1000 POW	VALINE ORAL POWDER PACKET 1 GM	Tier 3				
VANRAFIA TAB 0.75MG	ATRASENTAN HCL TAB 0.75 MG	Tier 5	X	X		X
VEGAPRO POW	*PROTEIN ORAL POWDER***	Tier 4				
VERIFINE PEN MIS 29GX12MM	INSULIN PEN NEEDLE 29 G X 12 MM (1/2")	Tier 3		X		
VERIFINE PEN MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 3		X		
VERIFINE PEN MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 3		X		
VERISAFE MIS 23GX1.5"	NEEDLE (DISP) 23 X 1-1/2"	Tier 3				
VERISAFE MIS 25GX1"	NEEDLE (DISP) 25 X 1"	Tier 3				
VERSABASE GEL	VERSABASE GEL	Tier 4				
VERSAFREE SYP	*ORAL VEHICLES - SYRUP***	Tier 4				
VERSAPENN AG GEL ANHYDROU	*TRANSDERMAL BASE GEL**	Tier 4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
VERSAPENN AL GEL ANHYDROU	*TRANSDERMAL BASE GEL**	Tier 4				
VERSAPLUS SYP	*ORAL VEHICLES - SYRUP***	Tier 4				
VERSAPRO GEL ANHYDROU	*GEL BASE - GEL**	Tier 4				
VISTOGARD PAK 10GM	URIDINE TRIACETATE ORAL GRANULES PACKET 10 GM	Tier 4		X		
VITATROCHE GRA BASE SF	*TROCHE BASE GRANULES***	Tier 4				
VORTEX CHAMB MIS PEDI MAS	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 4				
VORTEX MASK MIS PEDS MED	*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS***	Tier 3				
VORTEX MASK MIS PEDS SML	*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS***	Tier 3				
VORTEX VALVD MIS CHAMBER	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 4				
VORTEX VALVD MIS CHAMBER	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 3				
VORTEX VALVE MIS CHAMBER	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 3				
VORTEX/MASK MIS CHILDS	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 3				
VORTEX/MASK MIS TODDLER	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 3				
WA-001 EXPER OIL SOIL SUR	ETHOXYLATED MACADAMIA NUT OIL	Tier 4				
WHEY PROTEIN POW CON	*PROTEIN ORAL POWDER***	Tier 2	X			
WHEY PROTEIN POW CON	*PROTEIN ORAL POWDER***	Tier 2				
WHEY PROTEIN POW COOKIES	*PROTEIN ORAL PACK***	Tier 3	X			
WHEY PROTEIN POW STRAWBER	*PROTEIN ORAL POWDER***	Tier 3				
WIDE-SEAL DPR KIT 60	DIAPHRAGM WIDE SEAL 60 MM	Tier 1				
WIDE-SEAL DPR KIT 65	DIAPHRAGM WIDE SEAL 65 MM	Tier 1				
WIDE-SEAL DPR KIT 70	DIAPHRAGM WIDE SEAL 70 MM	Tier 1				
WIDE-SEAL DPR KIT 75	DIAPHRAGM WIDE SEAL 75 MM	Tier 1				
WIDE-SEAL DPR KIT 80	DIAPHRAGM WIDE SEAL 80 MM	Tier 1				
WIDE-SEAL DPR KIT 85	DIAPHRAGM WIDE SEAL 85 MM	Tier 1				
WIDE-SEAL DPR KIT 90	DIAPHRAGM WIDE SEAL 90 MM	Tier 1				
WIDE-SEAL DPR KIT 95	DIAPHRAGM WIDE SEAL 95 MM	Tier 1				
XPHE MAXAMUM PAK ORANGE	*AMINO ACIDS PACK***	Tier 4				
XPHE MAXAMUM PAK UNFLAVOR	*AMINO ACIDS PACK***	Tier 4				
ZELSUVMI GEL 10.3%	BERDAZIMER SODIUM GEL 10.3%	Tier 5	X	X		
ZOKINVY CAP 50MG	LONAFARNIB CAP 50 MG	Tier 4	X	X		X
ZOKINVY CAP 75MG	LONAFARNIB CAP 75 MG	Tier 4	X	X		X
Molecular Target Inhibitors - Chemotherapy Agents						
ALECENSA CAP 150MG	ALECTINIB HCL CAP 150 MG (BASE EQUIVALENT)	Tier 4	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ALUNBRIG PAK	BRIGATINIB TAB INITIATION THERAPY PACK 90 MG & 180 MG	Tier 4	X	X		X
ALUNBRIG TAB 180MG	BRIGATINIB TAB 180 MG	Tier 4	X	X		X
ALUNBRIG TAB 30MG	BRIGATINIB TAB 30 MG	Tier 4	X	X		X
ALUNBRIG TAB 90MG	BRIGATINIB TAB 90 MG	Tier 4	X	X		X
AYVAKIT TAB 100MG	AVAPRITINIB TAB 100 MG	Tier 5	X	X		X
AYVAKIT TAB 200MG	AVAPRITINIB TAB 200 MG	Tier 5	X	X		X
AYVAKIT TAB 25MG	AVAPRITINIB TAB 25 MG	Tier 5	X	X		X
AYVAKIT TAB 300MG	AVAPRITINIB TAB 300 MG	Tier 5	X	X		X
AYVAKIT TAB 50MG	AVAPRITINIB TAB 50 MG	Tier 5	X	X		X
BOSULIF CAP 100MG	BOSUTINIB CAP 100 MG	Tier 4	X	X	X	X
BOSULIF CAP 50MG	BOSUTINIB CAP 50 MG	Tier 4	X	X	X	X
BRUKINSA CAP 80MG	ZANUBRUTINIB CAP 80 MG	Tier 5	X	X	X	X
BRUKINSA TAB 160MG	ZANUBRUTINIB TAB 160 MG	Tier 5		X		X
CABOMETYX TAB 20MG	CABOZANTINIB S-MALATE TAB 20 MG (BASE EQUIVALENT)	Tier 4	X	X		X
CABOMETYX TAB 40MG	CABOZANTINIB S-MALATE TAB 40 MG (BASE EQUIVALENT)	Tier 4	X	X		X
CABOMETYX TAB 60MG	CABOZANTINIB S-MALATE TAB 60 MG (BASE EQUIVALENT)	Tier 4	X	X		X
CALQUENCE TAB 100MG	ACALABRUTINIB MALEATE TAB 100 MG	Tier 4	X	X		X
CAPRELSA TAB 100MG	VANDETANIB TAB 100 MG	Tier 4	X	X		X
CAPRELSA TAB 300MG	VANDETANIB TAB 300 MG	Tier 4	X	X		X
COMETRIQ KIT 100MG	CABOZANTINIB S-MAL CAP 1 X 80 MG & 1 X 20 MG (100 DOSE) KIT	Tier 4	X	X		X
COMETRIQ KIT 140MG	CABOZANTINIB S-MAL CAP 1 X 80 MG & 3 X 20 MG (140 DOSE) KIT	Tier 4	X	X		X
COMETRIQ KIT 60MG	CABOZANTINIB S-MALATE CAP 3 X 20 MG (60 MG DOSE) KIT	Tier 4	X	X		X
COTELLIC TAB 20MG	COBIMETINIB FUMARATE TAB 20 MG (BASE EQUIVALENT)	Tier 5	X	X		X
DASATINIB TAB 100MG	DASATINIB TAB 100 MG	Tier 4	X	X		X
DASATINIB TAB 140MG	DASATINIB TAB 140 MG	Tier 4	X	X		X
DASATINIB TAB 20MG	DASATINIB TAB 20 MG	Tier 4	X	X		X
DASATINIB TAB 50MG	DASATINIB TAB 50 MG	Tier 4	X	X		X
DASATINIB TAB 70MG	DASATINIB TAB 70 MG	Tier 4	X	X		X
DASATINIB TAB 80MG	DASATINIB TAB 80 MG	Tier 4	X	X		X
DAURISMO TAB 100MG	GLASDEGIB MALEATE TAB 100 MG (BASE EQUIVALENT)	Tier 4	X	X		X
DAURISMO TAB 25MG	GLASDEGIB MALEATE TAB 25 MG (BASE EQUIVALENT)	Tier 4	X	X		X
ERIVEDGE CAP 150MG	VISMODEGIB CAP 150 MG	Tier 4	X	X		X
ERLOTINIB TAB 100MG	ERLOTINIB HCL TAB 100 MG (BASE EQUIVALENT)	Tier 4	X	X		X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ERLOTINIB TAB 150MG	ERLOTINIB HCL TAB 150 MG (BASE EQUIVALENT)	Tier 4	X	X		X
ERLOTINIB TAB 25MG	ERLOTINIB HCL TAB 25 MG (BASE EQUIVALENT)	Tier 4	X	X		X
EVEROLIMUS TAB 10MG	EVEROLIMUS TAB 10 MG	Tier 4	X	X		X
EVEROLIMUS TAB 2.5MG	EVEROLIMUS TAB 2.5 MG	Tier 4	X	X		X
EVEROLIMUS TAB 2MG	EVEROLIMUS TAB FOR ORAL SUSP 2 MG	Tier 4	X	X		X
EVEROLIMUS TAB 3MG	EVEROLIMUS TAB FOR ORAL SUSP 3 MG	Tier 4	X	X		X
EVEROLIMUS TAB 5MG	EVEROLIMUS TAB 5 MG	Tier 4	X	X		X
EVEROLIMUS TAB 5MG	EVEROLIMUS TAB FOR ORAL SUSP 5 MG	Tier 4	X	X		X
EVEROLIMUS TAB 7.5MG	EVEROLIMUS TAB 7.5 MG	Tier 4	X	X		X
GAVRETO CAP 100MG	PRALSETINIB CAP 100 MG	Tier 5	X	X		X
GEFITINIB TAB 250MG	GEFITINIB TAB 250 MG	Tier 5	X	X		X
GILOTRIF TAB 20MG	AFATINIB DIMALEATE TAB 20 MG (BASE EQUIVALENT)	Tier 5	X	X		X
GILOTRIF TAB 30MG	AFATINIB DIMALEATE TAB 30 MG (BASE EQUIVALENT)	Tier 5	X	X		X
GILOTRIF TAB 40MG	AFATINIB DIMALEATE TAB 40 MG (BASE EQUIVALENT)	Tier 5	X	X		X
ICLUSIG TAB 15MG	PONATINIB HCL TAB 15 MG (BASE EQUIV)	Tier 5	X	X		X
ICLUSIG TAB 45MG	PONATINIB HCL TAB 45 MG (BASE EQUIV)	Tier 5	X	X		X
IDHIFA TAB 100MG	ENASIDENIB MESYLATE TAB 100 MG (BASE EQUIVALENT)	Tier 4	X	X		X
IDHIFA TAB 50MG	ENASIDENIB MESYLATE TAB 50 MG (BASE EQUIVALENT)	Tier 4	X	X		X
IMATINIB MES TAB 100MG	IMATINIB MESYLATE TAB 100 MG (BASE EQUIVALENT)	Tier 2		X		X
IMATINIB MES TAB 400MG	IMATINIB MESYLATE TAB 400 MG (BASE EQUIVALENT)	Tier 2		X		X
IMBRUVICA CAP 140MG	IBRUTINIB CAP 140 MG	Tier 4	X	X		X
IMBRUVICA CAP 70MG	IBRUTINIB CAP 70 MG	Tier 4	X	X		X
IMBRUVICA SUS 70MG/ML	IBRUTINIB ORAL SUSP 70 MG/ML	Tier 4	X	X		X
IMBRUVICA TAB 420MG	IBRUTINIB TAB 420 MG	Tier 4	X	X		X
IMKELDI SOL 80MG/ML	IMATINIB MESYLATE ORAL SOLN 80 MG/ML (BASE EQUIVALENT)	Tier 5	X	X		X
INLYTA TAB 1MG	AXITINIB TAB 1 MG	Tier 5	X	X		X
INLYTA TAB 5MG	AXITINIB TAB 5 MG	Tier 5	X	X		X
IRESSA TAB 250MG	GEFITINIB TAB 250 MG	Tier 5	X	X		X
JAKAFI TAB 10MG	RUXOLITINIB PHOSPHATE TAB 10 MG (BASE EQUIVALENT)	Tier 4	X	X		X
JAKAFI TAB 15MG	RUXOLITINIB PHOSPHATE TAB 15 MG (BASE EQUIVALENT)	Tier 4	X	X		X
JAKAFI TAB 20MG	RUXOLITINIB PHOSPHATE TAB 20 MG (BASE EQUIVALENT)	Tier 4	X	X		X
JAKAFI TAB 25MG	RUXOLITINIB PHOSPHATE TAB 25 MG (BASE EQUIVALENT)	Tier 4	X	X		X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
JAKAFI TAB 5MG	RUXOLITINIB PHOSPHATE TAB 5 MG (BASE EQUIVALENT)	Tier 4	X	X		X
LAPATINIB TAB 250MG	LAPATINIB DITOSYLATE TAB 250 MG (BASE EQUIV)	Tier 4	X	X		X
LAZCLUZE TAB 240MG	LAZERTINIB MESYLATE TAB 240 MG	Tier 5	X	X		X
LAZCLUZE TAB 80MG	LAZERTINIB MESYLATE TAB 80 MG	Tier 5	X	X		X
LENVIMA CAP 10 MG	LENVATINIB CAP THERAPY PACK 10 MG (10 MG DAILY DOSE)	Tier 4	X	X		X
LENVIMA CAP 12MG	LENVATINIB CAP THERAPY PACK 3 X 4 MG (12 MG DAILY DOSE)	Tier 4	X	X		X
LENVIMA CAP 14 MG	LENVATINIB CAP THERAPY PACK 10 & 4 MG (14 MG DAILY DOSE)	Tier 4	X	X		X
LENVIMA CAP 18 MG	LENVATINIB CAP THER PACK 10 MG & 2 X 4 MG (18 MG DAILY DOSE)	Tier 4	X	X		X
LENVIMA CAP 20 MG	LENVATINIB CAP THERAPY PACK 2 X 10 MG (20 MG DAILY DOSE)	Tier 4	X	X		X
LENVIMA CAP 24 MG	LENVATINIB CAP THER PACK 2 X 10 MG & 4 MG (24 MG DAILY DOSE)	Tier 4	X	X		X
LENVIMA CAP 4MG	LENVATINIB CAP THERAPY PACK 4 MG (4 MG DAILY DOSE)	Tier 4	X	X		X
LENVIMA CAP 8 MG	LENVATINIB CAP THERAPY PACK 2 X 4 MG (8 MG DAILY DOSE)	Tier 4	X	X		X
LYNPARZA TAB 100MG	OLAPARIB TAB 100 MG	Tier 4	X	X		X
LYNPARZA TAB 150MG	OLAPARIB TAB 150 MG	Tier 4	X	X		X
MEKINIST SOL 0.05/ML	TRAMETINIB DIMETHYL SULFOXIDE FOR SOLN 0.05 MG/ML (BASE EQ)	Tier 5		X	X	X
MEKINIST TAB 0.5MG	TRAMETINIB DIMETHYL SULFOXIDE TAB 0.5 MG (BASE EQUIVALENT)	Tier 5	X	X	X	X
MEKINIST TAB 2MG	TRAMETINIB DIMETHYL SULFOXIDE TAB 2 MG (BASE EQUIVALENT)	Tier 5	X	X	X	X
NERLYNX TAB 40MG	NERATINIB MALEATE TAB 40 MG (BASE EQUIVALENT)	Tier 4	X	X		X
NILOTINB HCL CAP 150MG	NILOTINIB HCL CAP 150 MG (BASE EQUIVALENT)	Tier 4	X	X	X	X
NILOTINB HCL CAP 200MG	NILOTINIB HCL CAP 200 MG (BASE EQUIVALENT)	Tier 4	X	X	X	X
NILOTINB HCL CAP 50MG	NILOTINIB HCL CAP 50 MG (BASE EQUIVALENT)	Tier 4	X	X	X	X
ODOMZO CAP 200MG	SONIDEIGIB PHOSPHATE CAP 200 MG (BASE EQUIVALENT)	Tier 4	X	X		X
OJEMDA SUS 25MG/ML	TOVORAFENIB FOR ORAL SUSP 25 MG/ML	Tier 5	X	X		X
OJEMDA TAB 100MG	TOVORAFENIB TAB 100 MG	Tier 5	X	X		X
PAZOPANIB TAB 400MG	PAZOPANIB HCL TAB 400 MG (BASE EQUIV)	Tier 5	X			
RETEVMO CAP 40MG	SELPERCATINIB CAP 40 MG	Tier 5	X	X		X
RETEVMO CAP 80MG	SELPERCATINIB CAP 80 MG	Tier 5	X			X
RETEVMO TAB 120MG	SELPERCATINIB TAB 120 MG	Tier 5	X	X		X
RETEVMO TAB 160MG	SELPERCATINIB TAB 160 MG	Tier 5	X	X		X
RETEVMO TAB 40MG	SELPERCATINIB TAB 40 MG	Tier 5	X	X		X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
RETEVMO TAB 80MG	SELPERCATINIB TAB 80 MG	Tier 5	X	X		X
REZLIDHIA CAP 150MG	OLUTASIDENIB CAP 150 MG	Tier 4	X	X		X
RYDAPT CAP 25MG	MIDOSTAURIN CAP 25 MG	Tier 4	X	X		X
SORAFENIB TAB 200MG	SORAFENIB TOSYLATE TAB 200 MG (BASE EQUIVALENT)	Tier 4	X	X		X
STIVARGA TAB 40MG	REGORAFENIB TAB 40 MG	Tier 4	X	X		X
SUNITINIB CAP 12.5MG	SUNITINIB MALATE CAP 12.5 MG (BASE EQUIVALENT)	Tier 4	X	X		X
SUNITINIB CAP 25MG	SUNITINIB MALATE CAP 25 MG (BASE EQUIVALENT)	Tier 4	X	X		X
SUNITINIB CAP 37.5MG	SUNITINIB MALATE CAP 37.5 MG (BASE EQUIVALENT)	Tier 4	X	X		X
SUNITINIB CAP 50MG	SUNITINIB MALATE CAP 50 MG (BASE EQUIVALENT)	Tier 4	X	X		X
TABRECTA TAB 150MG	CAPMATINIB HCL TAB 150 MG	Tier 5	X	X		X
TABRECTA TAB 200MG	CAPMATINIB HCL TAB 200 MG	Tier 5	X	X		X
TAFINLAR CAP 50MG	DABRAFENIB MESYLATE CAP 50 MG (BASE EQUIVALENT)	Tier 5	X	X	X	X
TAFINLAR CAP 75MG	DABRAFENIB MESYLATE CAP 75 MG (BASE EQUIVALENT)	Tier 5	X	X	X	X
TAFINLAR TAB 10MG	DABRAFENIB MESYLATE TAB FOR ORAL SUSP 10 MG (BASE EQUIV)	Tier 5		X	X	X
TAGRISSO TAB 40MG	OSIMERTINIB MESYLATE TAB 40 MG (BASE EQUIVALENT)	Tier 5	X	X		X
TAGRISSO TAB 80MG	OSIMERTINIB MESYLATE TAB 80 MG (BASE EQUIVALENT)	Tier 5	X	X		X
TIBSOVO TAB 250MG	IVOSIDENIB TAB 250 MG	Tier 4	X	X		X
TORPENZ TAB 10MG	EVEROLIMUS TAB 10 MG	Tier 4	X	X		X
TORPENZ TAB 2.5MG	EVEROLIMUS TAB 2.5 MG	Tier 4	X	X		X
TORPENZ TAB 5MG	EVEROLIMUS TAB 5 MG	Tier 4	X	X		X
TORPENZ TAB 7.5MG	EVEROLIMUS TAB 7.5 MG	Tier 4	X	X		X
TUKYSA TAB 150MG	TUCATINIB TAB 150 MG	Tier 4	X	X		X
TUKYSA TAB 50MG	TUCATINIB TAB 50 MG	Tier 4	X	X		X
TURALIO CAP 125MG	PEXIDARTINIB HCL CAP 125 MG (BASE EQUIVALENT)	Tier 4	X	X		X
VENCLEXTA TAB 100MG	VENETOCLAX TAB 100 MG	Tier 4	X	X		X
VENCLEXTA TAB 10MG	VENETOCLAX TAB 10 MG	Tier 4	X	X		X
VENCLEXTA TAB 50MG	VENETOCLAX TAB 50 MG	Tier 4	X	X		X
VENCLEXTA TAB START PK	VENETOCLAX TAB THERAPY STARTER PACK 10 & 50 & 100 MG	Tier 4	X	X		X
VITRAKVI CAP 100MG	LAROTRECTINIB SULFATE CAP 100 MG (BASE EQUIVALENT)	Tier 4	X	X		X
VITRAKVI CAP 25MG	LAROTRECTINIB SULFATE CAP 25 MG (BASE EQUIVALENT)	Tier 4	X	X		X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
VITRAKVI SOL 20MG/ML	LAROTRECTINIB SULFATE ORAL SOLN 20 MG/ML (BASE EQUIVALENT)	Tier 4	X	X		X
VIZIMPRO TAB 15MG	DACOMITINIB TAB 15 MG	Tier 5	X	X		X
VIZIMPRO TAB 30MG	DACOMITINIB TAB 30 MG	Tier 5	X	X		X
VIZIMPRO TAB 45MG	DACOMITINIB TAB 45 MG	Tier 5	X	X		X
XOSPATA TAB 40MG	GILTERITINIB FUMARATE TABLET 40 MG (BASE EQUIVALENT)	Tier 5	X	X		X
ZELBORAF TAB 240MG	VEMURAFENIB TAB 240 MG	Tier 4	X	X		X
ZYDELIG TAB 100MG	IDELALISIB TAB 100 MG	Tier 5	X	X		X
Monoamine Oxidase B (MAO-B) Inhibitors - Parkinson's Disease Drugs						
SELEGILINE CAP 5MG	SELEGILINE HCL CAP 5 MG	Tier 2				
SELEGILINE TAB 5MG	SELEGILINE HCL TAB 5 MG	Tier 2				
Monoamine Oxidase Inhibitors - Antidepressants						
MARPLAN TAB 10MG	ISOCARBOXAZID TAB 10 MG	Tier 5				
NARDIL TAB 15MG	PHENELZINE SULFATE TAB 15 MG	Tier 5				
PARNATE TAB 10MG	TRANLYCYPROMINE SULFATE TAB 10 MG	Tier 5				
PHENELZINE TAB 15MG	PHENELZINE SULFATE TAB 15 MG	Tier 2				
TRANLYCYPROM TAB 10MG	TRANLYCYPROMINE SULFATE TAB 10 MG	Tier 2				
Mood Stabilizers - Mood Disorder Drugs						
DEPAKOTE TAB 125MG DR	DIVALPROEX SODIUM TAB DELAYED RELEASE 125 MG	Tier 5	X			
DEPAKOTE TAB 250MG DR	DIVALPROEX SODIUM TAB DELAYED RELEASE 250 MG	Tier 5	X			
DEPAKOTE TAB 500MG DR	DIVALPROEX SODIUM TAB DELAYED RELEASE 500 MG	Tier 5	X			
DEPAKOTE ER TAB 250MG	DIVALPROEX SODIUM TAB ER 24 HR 250 MG	Tier 5	X			
DEPAKOTE ER TAB 500MG	DIVALPROEX SODIUM TAB ER 24 HR 500 MG	Tier 5	X			
DEPAKOTE SPR CAP 125MG	DIVALPROEX SODIUM CAP DELAYED RELEASE SPRINKLE 125 MG	Tier 5	X			
DIVALPROEX CAP 125MG DR	DIVALPROEX SODIUM CAP DELAYED RELEASE SPRINKLE 125 MG	Tier 3				
DIVALPROEX TAB 125MG DR	DIVALPROEX SODIUM TAB DELAYED RELEASE 125 MG	Tier 2				
DIVALPROEX TAB 250MG DR	DIVALPROEX SODIUM TAB DELAYED RELEASE 250 MG	Tier 2				
DIVALPROEX TAB 250MG ER	DIVALPROEX SODIUM TAB ER 24 HR 250 MG	Tier 3				
DIVALPROEX TAB 500MG DR	DIVALPROEX SODIUM TAB DELAYED RELEASE 500 MG	Tier 2				
DIVALPROEX TAB 500MG ER	DIVALPROEX SODIUM TAB ER 24 HR 500 MG	Tier 3				
LITHIUM SOL 8MEQ/5ML	LITHIUM ORAL SOLUTION 8 MEQ/5ML	Tier 2				
LITHIUM CARB CAP 150MG	LITHIUM CARBONATE CAP 150 MG	Tier 2				
LITHIUM CARB CAP 300MG	LITHIUM CARBONATE CAP 300 MG	Tier 2				
LITHIUM CARB CAP 600MG	LITHIUM CARBONATE CAP 600 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
LITHIUM CARB TAB 300MG	LITHIUM CARBONATE TAB 300 MG	Tier 2				
LITHIUM CARB TAB 300MG ER	LITHIUM CARBONATE TAB ER 300 MG	Tier 2				
LITHIUM CARB TAB 450MG ER	LITHIUM CARBONATE TAB ER 450 MG	Tier 2				
LITHOBID TAB 300MG	LITHIUM CARBONATE TAB ER 300 MG	Tier 5	X			
Multiple Sclerosis Agents						
MAVENCLAD PAK 10MG(10)	CLADRIBINE TAB THERAPY PACK 10 MG (10 TABS)	Tier 5	X	X	X	X
MAVENCLAD PAK 10MG(4)	CLADRIBINE TAB THERAPY PACK 10 MG (4 TABS)	Tier 5	X	X	X	X
MAVENCLAD PAK 10MG(5)	CLADRIBINE TAB THERAPY PACK 10 MG (5 TABS)	Tier 5	X	X	X	X
MAVENCLAD PAK 10MG(6)	CLADRIBINE TAB THERAPY PACK 10 MG (6 TABS)	Tier 5	X	X	X	X
MAVENCLAD PAK 10MG(7)	CLADRIBINE TAB THERAPY PACK 10 MG (7 TABS)	Tier 5	X	X	X	X
MAVENCLAD PAK 10MG(8)	CLADRIBINE TAB THERAPY PACK 10 MG (8 TABS)	Tier 5	X	X	X	X
MAVENCLAD PAK 10MG(9)	CLADRIBINE TAB THERAPY PACK 10 MG (9 TABS)	Tier 5	X	X	X	X
Multiple Sclerosis Agents - Multiple Sclerosis Drugs						
AVONEX PEN KIT 30MCG	INTERFERON BETA-1A IM AUTO-INJECTOR KIT 30 MCG/0.5ML	Tier 4	X	X		X
AVONEX PREFL KIT 30MCG	INTERFERON BETA-1A IM PREFILLED SYRINGE KIT 30 MCG/0.5ML	Tier 4	X	X		X
BAFIERTAM CAP 95MG	MONOMETHYL FUMARATE CAPSULE DELAYED RELEASE 95 MG	Tier 4	X	X		X
BETASERON INJ 0.3MG	INTERFERON BETA-1B FOR INJ KIT 0.3 MG	Tier 4	X	X		X
DALFAMPRIDIN TAB 10MG ER	DALFAMPRIDINE TAB ER 12HR 10 MG	Tier 4	X	X		X
DIMETHYL FUM CAP 120MG DR	DIMETHYL FUMARATE CAPSULE DELAYED RELEASE 120 MG	Tier 2	X	X		X
DIMETHYL FUM CAP 240MG DR	DIMETHYL FUMARATE CAPSULE DELAYED RELEASE 240 MG	Tier 2	X	X		X
DIMETHYL FUM CAP STARTER	DIMETHYL FUMARATE CAPSULE DR STARTER PACK 120 MG & 240 MG	Tier 2	X	X		X
FINGOLIMOD CAP 0.5MG	FINGOLIMOD HCL CAP 0.5 MG (BASE EQUIV)	Tier 2	X	X		X
GLATIRAMER INJ 20MG/ML	GLATIRAMER ACETATE SOLN PREFILLED SYRINGE 20 MG/ML	Tier 4	X	X		X
GLATIRAMER INJ 20MG/ML	GLATIRAMER ACETATE SOLN PREFILLED SYRINGE 20 MG/ML	Tier 5	X	X		X
GLATIRAMER INJ 40MG/ML	GLATIRAMER ACETATE SOLN PREFILLED SYRINGE 40 MG/ML	Tier 4	X	X		X
GLATIRAMER INJ 40MG/ML	GLATIRAMER ACETATE SOLN PREFILLED SYRINGE 40 MG/ML	Tier 5	X	X		X
GLATOPA INJ 20MG/ML	GLATIRAMER ACETATE SOLN PREFILLED SYRINGE 20 MG/ML	Tier 4	X	X		X
GLATOPA INJ 40MG/ML	GLATIRAMER ACETATE SOLN PREFILLED SYRINGE 40 MG/ML	Tier 4	X	X		X
KESIMPTA INJ 20/.4ML	OFATUMUMAB SOLN AUTO-INJECTOR 20 MG/0.4ML	Tier 4	X	X		X
MAYZENT PAK STARTER	SIPONIMOD FUMARATE TAB 0.25 MG (12) STARTER PACK	Tier 5	X	X		X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
MAYZENT PAK STARTER	SIPONIMOD FUMARATE TAB 0.25 MG (7) STARTER PACK	Tier 5	X	X		X
MAYZENT TAB 0.25MG	SIPONIMOD FUMARATE TAB 0.25 MG (BASE EQUIV)	Tier 5	X	X		X
MAYZENT TAB 1MG	SIPONIMOD FUMARATE TAB 1 MG (BASE EQUIV)	Tier 5	X	X		X
MAYZENT TAB 2MG	SIPONIMOD FUMARATE TAB 2 MG (BASE EQUIV)	Tier 5	X	X		X
PLEGRIDY INJ	PEGINTERFERON BETA-1A SOLN PREFILLED SYRINGE 125 MCG/0.5ML	Tier 5	X	X		X
PLEGRIDY INJ	PEGINTERFERON BETA-1A IM SOLN PREFILLED SYR 125 MCG/0.5ML	Tier 5	X	X		
PLEGRIDY INJ PEN	PEGINTERFERON BETA-1A SOLN AUTO-INJECTOR 125 MCG/0.5ML	Tier 5	X	X		X
PLEGRIDY INJ STARTER	PEGINTERFERON BETA-1A SOLN PREF SYR 63 & 94 MCG/0.5ML PACK	Tier 5	X	X		X
PLEGRIDY PEN INJ STARTER	PEGINTERFERON BETA-1A SOLN AUTO-INJ 63 & 94 MCG/0.5ML PACK	Tier 5	X	X		X
TERIFLUNOMID TAB 14MG	TERIFLUNOMIDE TAB 14 MG	Tier 4	X	X		X
TERIFLUNOMID TAB 7MG	TERIFLUNOMIDE TAB 7 MG	Tier 4	X	X		X
ZEPOSIA CAP 0.92MG	OZANIMOD HCL CAP 0.92 MG	Tier 5	X	X	X	X
ZEPOSIA CAP STR KIT	OZANIMOD CAP PACK 4 X 0.23 MG & 3 X 0.46 MG & 21 X 0.92 MG	Tier 5	X	X	X	X
ZEPOSIA 7DAY CAP STR PACK	OZANIMOD CAP PACK 4 X 0.23 MG & 3 X 0.46 MG	Tier 5	X	X	X	X
N-methyl-D-aspartate (NMDA) Receptor Antagonist - Alzheimer's Disease and Dementia Drugs						
MEMANT TITRA PAK 5-10MG	MEMANTINE HCL TAB 28 X 5 MG & 21 X 10 MG TITRATION PACK	Tier 2				
MEMANTINE SOL 2MG/ML	MEMANTINE HCL ORAL SOLUTION 2 MG/ML	Tier 5				
MEMANTINE TAB HCL 10MG	MEMANTINE HCL TAB 10 MG	Tier 2				
MEMANTINE TAB HCL 5MG	MEMANTINE HCL TAB 5 MG	Tier 2				
MEMANTINE HC CAP 14MG ER	MEMANTINE HCL CAP ER 24HR 14 MG	Tier 2				
MEMANTINE HC CAP 21MG ER	MEMANTINE HCL CAP ER 24HR 21 MG	Tier 2				
MEMANTINE HC CAP 28MG ER	MEMANTINE HCL CAP ER 24HR 28 MG	Tier 2				
MEMANTINE HC CAP 7MG ER	MEMANTINE HCL CAP ER 24HR 7 MG	Tier 2				
MEMANTINE HC SOL 2MG/ML	MEMANTINE HCL ORAL SOLUTION 2 MG/ML	Tier 5				
Nonsteroidal Anti-Inflammatory Drugs - Pain/Anti-Inflammatory Drugs						
ASPIRIN CHW 81MG	ASPIRIN CHEW TAB 81 MG	Tier 1				
ASPIRIN TAB 81MG	ASPIRIN TAB DELAYED RELEASE 81 MG	Tier 1				
ASPIRIN TAB 81MG EC	ASPIRIN TAB DELAYED RELEASE 81 MG	Tier 1				
ASPIRIN 81 TAB 81MG EC	ASPIRIN TAB DELAYED RELEASE 81 MG	Tier 1				
ASPIRIN ADLT TAB 81MG	ASPIRIN TAB DELAYED RELEASE 81 MG	Tier 1				
ASPIRIN ADLT TAB 81MG EC	ASPIRIN TAB DELAYED RELEASE 81 MG	Tier 1				
ASPIRIN CHLD CHW 81MG	ASPIRIN CHEW TAB 81 MG	Tier 1				
ASPIRIN EC TAB 81MG	ASPIRIN TAB DELAYED RELEASE 81 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ASPIRIN LOW CHW 81MG	ASPIRIN CHEW TAB 81 MG	Tier 1				
ASPIRIN LOW TAB 81MG	ASPIRIN TAB DELAYED RELEASE 81 MG	Tier 1				
ASPIRIN LOW TAB 81MG EC	ASPIRIN TAB DELAYED RELEASE 81 MG	Tier 1				
ASPIRIN REGI TAB 81MG	ASPIRIN TAB DELAYED RELEASE 81 MG	Tier 1				
ASPIRIN-81 CHW 81MG	ASPIRIN CHEW TAB 81 MG	Tier 1				
BAYER LOW CHW 81MG	ASPIRIN CHEW TAB 81 MG	Tier 1				
CELECOXIB CAP 100MG	CELECOXIB CAP 100 MG	Tier 3				
CELECOXIB CAP 200MG	CELECOXIB CAP 200 MG	Tier 3				
CELECOXIB CAP 400MG	CELECOXIB CAP 400 MG	Tier 3				
CELECOXIB CAP 50MG	CELECOXIB CAP 50 MG	Tier 3				
CVS ASPIRIN TAB 81MG EC	ASPIRIN TAB DELAYED RELEASE 81 MG	Tier 1				
DAYPRO TAB 600MG	OXAPROZIN TAB 600 MG	Tier 5				
DICLO/MISOPR TAB 50-0.2MG	DICLOFENAC W/ MISOPROSTOL TAB DELAYED RELEASE 50-0.2 MG	Tier 4				
DICLO/MISOPR TAB 75-0.2MG	DICLOFENAC W/ MISOPROSTOL TAB DELAYED RELEASE 75-0.2 MG	Tier 4				
DICLOFEN POT TAB 50MG	DICLOFENAC POTASSIUM TAB 50 MG	Tier 3				
DICLOFENAC TAB 100MG ER	DICLOFENAC SODIUM TAB ER 24HR 100 MG	Tier 4				
DICLOFENAC TAB 25MG DR	DICLOFENAC SODIUM TAB DELAYED RELEASE 25 MG	Tier 2				
DICLOFENAC TAB 50MG DR	DICLOFENAC SODIUM TAB DELAYED RELEASE 50 MG	Tier 2				
DICLOFENAC TAB 75MG DR	DICLOFENAC SODIUM TAB DELAYED RELEASE 75 MG	Tier 2				
DIFLUNISAL TAB 500MG	DIFLUNISAL TAB 500 MG	Tier 4				
EC-NAPROSYN TAB 375MG	NAPROXEN TAB EC 375 MG	Tier 4				
EC-NAPROSYN TAB 500MG	NAPROXEN TAB EC 500 MG	Tier 5				
EC-NAPROXEN TAB 375MG	NAPROXEN TAB EC 375 MG	Tier 2				
EC-NAPROXEN TAB 500MG	NAPROXEN TAB EC 500 MG	Tier 2				
EQ ASPIRIN CHW 81MG	ASPIRIN CHEW TAB 81 MG	Tier 1				
EQL ASPIRIN CHW 81MG	ASPIRIN CHEW TAB 81 MG	Tier 1				
ETODOLAC CAP 200MG	ETODOLAC CAP 200 MG	Tier 3				
ETODOLAC CAP 300MG	ETODOLAC CAP 300 MG	Tier 3				
ETODOLAC TAB 400MG	ETODOLAC TAB 400 MG	Tier 3				
ETODOLAC TAB 500MG	ETODOLAC TAB 500 MG	Tier 3				
ETODOLAC ER TAB 400MG	ETODOLAC TAB ER 24HR 400 MG	Tier 4				
ETODOLAC ER TAB 500MG	ETODOLAC TAB ER 24HR 500 MG	Tier 4				
ETODOLAC ER TAB 600MG	ETODOLAC TAB ER 24HR 600 MG	Tier 4				
FLURBIPROFEN TAB 100MG	FLURBIPROFEN TAB 100 MG	Tier 2				
FLURBIPROFEN TAB 50MG	FLURBIPROFEN TAB 50 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
FT ASPIRIN CHW 81MG	ASPIRIN CHEW TAB 81 MG	Tier 1				
FT ASPIRIN TAB 81MG	ASPIRIN TAB DELAYED RELEASE 81 MG	Tier 1				
GNP ASPIRIN CHW 81MG	ASPIRIN CHEW TAB 81 MG	Tier 1				
GNP ASPIRIN TAB 81MG	ASPIRIN TAB DELAYED RELEASE 81 MG	Tier 1				
GNP ASPIRIN TAB 81MG EC	ASPIRIN TAB DELAYED RELEASE 81 MG	Tier 1				
GOODSENSE TAB 81MG EC	ASPIRIN TAB DELAYED RELEASE 81 MG	Tier 1				
IBU TAB 400MG	IBUPROFEN TAB 400 MG	Tier 2				
IBU TAB 600MG	IBUPROFEN TAB 600 MG	Tier 2				
IBU TAB 800MG	IBUPROFEN TAB 800 MG	Tier 2				
IBUPROFEN TAB 200MG	IBUPROFEN TAB 200 MG	Tier 2				
IBUPROFEN TAB 400MG	IBUPROFEN TAB 400 MG	Tier 2				
IBUPROFEN TAB 600MG	IBUPROFEN TAB 600 MG	Tier 2				
IBUPROFEN TAB 800MG	IBUPROFEN TAB 800 MG	Tier 2				
INDOCIN SUP 50MG	INDOMETHACIN SUPPOS 50 MG	Tier 5	X			
INDOMETHACIN CAP 25MG	INDOMETHACIN CAP 25 MG	Tier 2				
INDOMETHACIN CAP 50MG	INDOMETHACIN CAP 50 MG	Tier 2				
INDOMETHACIN CAP 75MG ER	INDOMETHACIN CAP ER 75 MG	Tier 3				
INDOMETHACIN SUP 50MG	INDOMETHACIN SUPPOS 50 MG	Tier 4	X			
KETOROLAC TAB 10MG	KETOROLAC TROMETHAMINE TAB 10 MG	Tier 2				
KLS ASPIRIN TAB 81MG EC	ASPIRIN TAB DELAYED RELEASE 81 MG	Tier 1				
KP ASPIRIN TAB 81MG EC	ASPIRIN TAB DELAYED RELEASE 81 MG	Tier 1				
LOW DOSE ASA TAB 81MG	ASPIRIN TAB DELAYED RELEASE 81 MG	Tier 1				
LURBIPR TAB 100MG	FLURBIPROFEN TAB 100 MG	Tier 4				
LURBIRO TAB 100MG	FLURBIPROFEN TAB 100 MG	Tier 4				
MECLOFEN SOD CAP 100MG	MECLOFENAMATE SODIUM CAP 100 MG	Tier 4				
MECLOFEN SOD CAP 50MG	MECLOFENAMATE SODIUM CAP 50 MG	Tier 4				
MEFENAM ACID CAP 250MG	MEFENAMIC ACID CAP 250 MG	Tier 4				
MELOXICAM SUS 7.5/5ML	MELOXICAM SUSP 7.5 MG/5ML	Tier 5	X			
MELOXICAM TAB 15MG	MELOXICAM TAB 15 MG	Tier 2				
MELOXICAM TAB 7.5MG	MELOXICAM TAB 7.5 MG	Tier 2				
MM ASPIRIN TAB LOW DOSE	ASPIRIN TAB DELAYED RELEASE 81 MG	Tier 1				
NABUMETONE TAB 500MG	NABUMETONE TAB 500 MG	Tier 2				
NABUMETONE TAB 750MG	NABUMETONE TAB 750 MG	Tier 2				
NAPROXEN TAB 250MG	NAPROXEN TAB 250 MG	Tier 2				
NAPROXEN TAB 375MG	NAPROXEN TAB 375 MG	Tier 2				
NAPROXEN TAB 500MG	NAPROXEN TAB 500 MG	Tier 2				
NAPROXEN DR TAB 375MG	NAPROXEN TAB EC 375 MG	Tier 2				
NAPROXEN DR TAB 500MG	NAPROXEN TAB EC 500 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
NAPROXEN SOD TAB 275MG	NAPROXEN SODIUM TAB 275 MG	Tier 3				
NAPROXEN SOD TAB 550MG	NAPROXEN SODIUM TAB 550 MG	Tier 3				
OXAPROZIN TAB 600MG	OXAPROZIN TAB 600 MG	Tier 3				
PIROXICAM CAP 10MG	PIROXICAM CAP 10 MG	Tier 3				
PIROXICAM CAP 20MG	PIROXICAM CAP 20 MG	Tier 3				
QC ASPIRIN CHW 81MG	ASPIRIN CHEW TAB 81 MG	Tier 1				
QC CHILD ASA CHW 81MG	ASPIRIN CHEW TAB 81 MG	Tier 1				
RA ASPIRIN CHW 81MG	ASPIRIN CHEW TAB 81 MG	Tier 1				
RA ASPIRIN TAB 81MG EC	ASPIRIN TAB DELAYED RELEASE 81 MG	Tier 1				
SALSALATE TAB 500MG	SALSALATE TAB 500 MG	Tier 2				
SALSALATE TAB 750MG	SALSALATE TAB 750 MG	Tier 2				
SM ASPIRIN CHW 81MG	ASPIRIN CHEW TAB 81 MG	Tier 1				
SM ASPIRIN TAB 81MG EC	ASPIRIN TAB DELAYED RELEASE 81 MG	Tier 1				
SM CHILD ASA CHW 81MG	ASPIRIN CHEW TAB 81 MG	Tier 1				
ST JOSEPH CHW LOW 81MG	ASPIRIN CHEW TAB 81 MG	Tier 1				
ST JOSEPH TAB LOW 81MG	ASPIRIN TAB DELAYED RELEASE 81 MG	Tier 1				
SULINDAC TAB 150MG	SULINDAC TAB 150 MG	Tier 2				
SULINDAC TAB 200MG	SULINDAC TAB 200 MG	Tier 2				
Ophthalmic Agents, Other - Miscellaneous Eye Drugs						
AKTEN GEL 3.5% OP	LIDOCAINE HCL OPTH GEL 3.5%	Tier 4				
ALCAINE SOL 0.5% OP	PROPARACAINE HCL OPTH SOLN 0.5%	Tier 4				
ALTACAINE SOL 0.5% OP	TETRACAINE HCL OPTH SOLN 0.5%	Tier 4				
ALTAFRIN SOL 10% OP	PHENYLEPHRINE HCL OPTH SOLN 10%	Tier 2				
ALTAFRIN SOL 2.5% OP	PHENYLEPHRINE HCL OPTH SOLN 2.5%	Tier 2				
ATROPINE SUL OIN 1% OP	ATROPINE SULFATE OPTH OINT 1%	Tier 2				
ATROPINE SUL SOL 1% OP	ATROPINE SULFATE OPTH SOLN 1%	Tier 2				
BACIT/POLYMY OIN OP	BACITRACIN-POLYMYXIN B OPTH OINT	Tier 2				
CYCLOGYL SOL 0.5% OP	CYCLOPENTOLATE HCL OPTH SOLN 0.5%	Tier 5				
CYCLOGYL SOL 1% OP	CYCLOPENTOLATE HCL OPTH SOLN 1%	Tier 5				
CYCLOGYL SOL 2% OP	CYCLOPENTOLATE HCL OPTH SOLN 2%	Tier 5				
CYCLOPENTOL SOL 1% OP	CYCLOPENTOLATE HCL OPTH SOLN 1%	Tier 2				
CYSTADROPS SOL 0.37%	CYSTEAMINE HCL OPTH SOLN 0.37% (BASE EQUIVALENT)	Tier 5	X	X		
CYSTARAN SOL 0.44%	CYSTEAMINE HCL OPTH SOLN 0.44% (BASE EQUIVALENT)	Tier 4	X	X		X
GELFILM MIS OP	GELATIN ADSORBABLE OPTH FILM	Tier 3				
LACRISERT MIS 5MG OP	*ARTIFICIAL TEAR OPTH INSERT***	Tier 3				
MIEBO DRO 1.3GM/ML	PERFLUOROHEXYLOCTANE OPTH SOLN 1.338 GM/ML	Tier 5	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
NEO-POLYCIN OIN OP	NEOMYCIN-BACITRAC ZN-POLYMYX 5(3.5)MG-400UNT-10000UNT OP OIN	Tier 4				
NEO/BAC/POLY OIN OP	NEOMYCIN-BACITRAC ZN-POLYMYX 5(3.5)MG-400UNT-10000UNT OP OIN	Tier 2				
NEO/POLY/GRA SOL OP	NEOMYCIN-POLYMY-GRAMICID OP SOL 1.75-10000-0.025MG-UNT-MG/ML	Tier 2				
OXERVATE SOL 20MCG/ML	CENEGERMIN-BKBJ OPHTH SOLN 0.002% (20 MCG/ML)	Tier 5	X	X		X
PHENYLEPHRIN SOL 10% OP	PHENYLEPHRINE HCL OPHTH SOLN 10%	Tier 2				
PHENYLEPHRIN SOL 2.5% OP	PHENYLEPHRINE HCL OPHTH SOLN 2.5%	Tier 2				
POLYCIN OIN OP	BACITRACIN-POLYMYXIN B OPHTH OINT	Tier 4				
POLYMYXIN B/ SOL TRIMETHP	POLYMYXIN B-TRIMETHOPRIM OPHTH SOLN 10000 UNIT/ML-0.1%	Tier 2				
PROPARACAINE SOL 0.5% OP	PROPARACAINE HCL OPHTH SOLN 0.5%	Tier 2				
RESTASIS EMU 0.05% OP	CYCLOSPORINE (OPHTH) EMULSION 0.05%	Tier 5	X	X		
RHOPRESSA SOL 0.02%	NETARSUDIL DIMESYLATE OPHTH SOLN 0.02%	Tier 4		X		
ROCKLATAN DRO	NETARSUDIL DIMESYLATE-LATANOPROST OPHTH SOLN 0.02-0.005%	Tier 4		X		
TETRACAINE SOL 0.5% OP	TETRACAINE HCL OPHTH SOLN 0.5%	Tier 2				
TOBRA/DEXAME SUS 0.3-0.1%	TOBRAMYCIN-DEXAMETHASONE OPHTH SUSP 0.3-0.1%	Tier 3				
VERKAZIA EMU 0.1% OP	CYCLOSPORINE (OPHTH) EMULSION 0.1%	Tier 5	X	X		
XIIDRA DRO 5%	LIFITEGRAST OPHTH SOLN 5%	Tier 5	X	X		
Ophthalmic Anti-allergy Agents - Allergy, Infection and Inflammation Drugs						
ALOCRI SOL 2%	NEDOCROMIL SODIUM OPHTH SOLN 2%	Tier 4				
AZELASTINE DRO 0.05%	AZELASTINE HCL OPHTH SOLN 0.05%	Tier 2				
CROMOLYN SOD SOL 4% OP	CROMOLYN SODIUM OPHTH SOLN 4%	Tier 2				
CYCLOMYDRIL SOL OP	CYCLOPENTOLATE W/ PHENYLEPHRINE OPHTH SOLN 0.2-1%	Tier 4				
EPINASTINE DRO 0.05%	EPINASTINE HCL OPHTH SOLN 0.05%	Tier 5		X		
Ophthalmic Anti-Inflammatories - Allergy, Infection and Inflammation Drugs						
ACULAR SOL 0.5% OP	KETOROLAC TROMETHAMINE OPHTH SOLN 0.5%	Tier 5				
ACULAR LS SOL 0.4% OP	KETOROLAC TROMETHAMINE OPHTH SOLN 0.4%	Tier 5				
ALOMIDE SOL 0.1% OP	LODOXAMIDE TROMETHAMINE OPHTH SOLN 0.1%	Tier 4				
ALREX SUS 0.2%	LOTEPREDNOL ETABONATE OPHTH SUSP 0.2%	Tier 5		X		
BROMFENAC DRO 0.09% OP	BROMFENAC SODIUM OPHTH SOLN 0.09% (BASE EQUIV) (ONCE-DAILY)	Tier 4				
DEXAMETH PHO SOL 0.1% OP	DEXAMETHASONE SODIUM PHOSPHATE OPHTH SOLN 0.1%	Tier 2				
DICLOFENAC SOL 0.1% OP	DICLOFENAC SODIUM OPHTH SOLN 0.1%	Tier 2				
DIFLUPREDNAT EMU 0.05%	DIFLUPREDNATE OPHTH EMULSION 0.05%	Tier 4				
EYSUVIS DRO 0.25%	LOTEPREDNOL ETABONATE OPHTH SUSP 0.25%	Tier 5		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
FLAREX SUS 0.1% OP	FLUOROMETHOLONE ACETATE OPHTH SUSP 0.1%	Tier 3				
FLUOROMETHOL SUS 0.1% OP	FLUOROMETHOLONE OPHTH SUSP 0.1%	Tier 2				
FLURBIPROFEN SOL 0.03% OP	FLURBIPROFEN SODIUM OPHTH SOLN 0.03%	Tier 2				
FML FORTE SUS 0.25% OP	FLUOROMETHOLONE OPHTH SUSP 0.25%	Tier 4				
FML LIQUIFLM SUS 0.1% OP	FLUOROMETHOLONE OPHTH SUSP 0.1%	Tier 5				
INVELTYS SUS 1%	LOTEPREDNOL ETABONATE OPHTH SUSP 1%	Tier 4				
KETOROLAC SOL 0.4% OP	KETOROLAC TROMETHAMINE OPHTH SOLN 0.4%	Tier 2				
KETOROLAC SOL 0.5% OP	KETOROLAC TROMETHAMINE OPHTH SOLN 0.5%	Tier 2				
LOTEMAX OIN 0.5%	LOTEPREDNOL ETABONATE OPHTH OINT 0.5%	Tier 4				
LOTEMAX SM GEL 0.38%	LOTEPREDNOL ETABONATE OPHTH GEL 0.38%	Tier 4		X		
LOTEPREDNOL SUS 0.2%	LOTEPREDNOL ETABONATE OPHTH SUSP 0.2%	Tier 4		X		
LOTEPREDNOL SUS 0.5%	LOTEPREDNOL ETABONATE OPHTH SUSP 0.5%	Tier 4		X		
MAXIDEX SUS 0.1% OP	DEXAMETHASONE OPHTH SUSP 0.1%	Tier 3				
MAXITROL OIN 0.1% OP	NEOMYCIN-POLYMYXIN-DEXAMETHASONE OPHTH OINT 0.1%	Tier 5				
MAXITROL SUS 0.1% OP	NEOMYCIN-POLYMYXIN-DEXAMETHASONE OPHTH SUSP 0.1%	Tier 5				
MITOSOL KIT 0.2MG	MITOMYCIN FOR OPHTH SOLN KIT 0.2 MG	Tier 4				
NEO-POLYCIN OIN HC 1%OP	BACITRACIN-POLYMYXIN-NEOMYCIN-HC OPHTH OINT 1%	Tier 4				
NEO/POLY/BAC OIN /HC 1%OP	BACITRACIN-POLYMYXIN-NEOMYCIN-HC OPHTH OINT 1%	Tier 2				
NEO/POLY/DEX OIN 0.1% OP	NEOMYCIN-POLYMYXIN-DEXAMETHASONE OPHTH OINT 0.1%	Tier 2				
NEO/POLY/DEX SUS 0.1% OP	NEOMYCIN-POLYMYXIN-DEXAMETHASONE OPHTH SUSP 0.1%	Tier 2				
NEO/POLY/HC SUS OP	NEOMYCIN-POLYMYXIN-HC OPHTH SUSP	Tier 2				
NEVANAC SUS 0.1% OP	NEPAFENAC OPHTH SUSP 0.1%	Tier 5				
PRED MILD SUS 0.12% OP	PREDNISOLONE ACETATE OPHTH SUSP 0.12%	Tier 4				
PRED SOD PHO SOL 1% OP	PREDNISOLONE SODIUM PHOSPHATE OPHTH SOLN 1%	Tier 2				
PREDNISOLONE SUS 1% OP	PREDNISOLONE ACETATE OPHTH SUSP 1%	Tier 2				
SULF/PRED NA SOL OP	SULFACETAMIDE SODIUM-PREDNISOLONE OPHTH SOLN 10-0.23(0.25)%	Tier 2				
ZYLET SUS 0.5-0.3%	LOTEPREDNOL ETABONATE-TOBRAMYCIN OPHTH SUSP 0.5-0.3%	Tier 4				
Ophthalmic Antibiotics - Drugs to treat Eye Infections						
AZASITE SOL 1%	AZITHROMYCIN OPHTH SOLN 1%	Tier 4				
BACITRACIN OIN OP	BACITRACIN OPHTH OINT 500 UNIT/GM	Tier 2				
BESIVANCE SUS 0.6%	BESIFLOXACIN HCL OPHTH SUSP 0.6% (BASE EQUIV)	Tier 4				
BETADINE SOL 5% OP	POVIDONE-IODINE OPHTH SOLN 5%	Tier 4				
CILOXAN OIN 0.3% OP	CIPROFLOXACIN HCL OPHTH OINT 0.3%	Tier 4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
CIPROFLOXACIN SOL 0.3% OP	CIPROFLOXACIN HCL OPHTH SOLN 0.3% (BASE EQUIVALENT)	Tier 2				
ERYTHROMYCIN OIN 5MG/GM	ERYTHROMYCIN OPHTH OINT 5 MG/GM	Tier 2^				
GATIFLOXACIN SOL 0.5%	GATIFLOXACIN OPHTH SOLN 0.5%	Tier 4				
GENTAMICIN SOL 0.3% OP	GENTAMICIN SULFATE OPHTH SOLN 0.3%	Tier 2		X		
LEVOFLOXACIN SOL 0.5%	LEVOFLOXACIN OPHTH SOLN 0.5%	Tier 2				
LEVOFLOXACIN SOL 1.5%	LEVOFLOXACIN OPHTH SOLN 1.5%	Tier 2				
MOXIFLOXACIN SOL 0.5%	MOXIFLOXACIN HCL OPHTH SOLN 0.5% (BASE EQ) (2 TIMES DAILY)	Tier 4				
MOXIFLOXACIN SOL 0.5%	MOXIFLOXACIN HCL OPHTH SOLN 0.5% (BASE EQUIV)	Tier 4				
MOXIFLOXACIN SOL HCL 0.5%	MOXIFLOXACIN HCL OPHTH SOLN 0.5% (BASE EQUIV)	Tier 4				
OCUFLOX DRO 0.3% OP	OFLOXACIN OPHTH SOLN 0.3%	Tier 5				
OFLOXACIN DRO 0.3% OP	OFLOXACIN OPHTH SOLN 0.3%	Tier 2				
SULFACET SOD OIN 10% OP	SULFACETAMIDE SODIUM OPHTH OINT 10%	Tier 2				
SULFACET SOD SOL 10% OP	SULFACETAMIDE SODIUM OPHTH SOLN 10%	Tier 2				
TOBRAMYCIN SOL 0.3% OP	TOBRAMYCIN OPHTH SOLN 0.3%	Tier 2		X		
TOBREX OIN 0.3% OP	TOBRAMYCIN OPHTH OINT 0.3%	Tier 4		X		
XDEMZY DRO 0.25%	LOTILANER OPHTH SOLN 0.25%	Tier 5	X	X		
Ophthalmic Antiglaucoma Agents - Glaucoma Drugs						
ACETAZOLAMID CAP 500MG ER	ACETAZOLAMIDE CAP ER 12HR 500 MG	Tier 2				
ACETAZOLAMID TAB 125MG	ACETAZOLAMIDE TAB 125 MG	Tier 2				
ACETAZOLAMID TAB 250MG	ACETAZOLAMIDE TAB 250 MG	Tier 2				
ALPHAGAN P SOL 0.1% OP	BRIMONIDINE TARTRATE OPHTH SOLN 0.1%	Tier 3		X		
ALPHAGAN P SOL 0.15% OP	BRIMONIDINE TARTRATE OPHTH SOLN 0.15%	Tier 5		X		
APRACLOINIDIN SOL 0.5% OP	APRACLOINIDINE HCL OPHTH SOLN 0.5% (BASE EQUIVALENT)	Tier 2				
BETAXOLOL SOL 0.5% OP	BETAXOLOL HCL OPHTH SOLN 0.5%	Tier 2				
BETIMOL SOL 0.25% OP	TIMOLOL OPHTH SOLN 0.25%	Tier 3		X		
BETIMOL SOL 0.5% OP	TIMOLOL OPHTH SOLN 0.5%	Tier 5		X		
BETOPTIC-S SUS 0.25% OP	BETAXOLOL HCL OPHTH SUSP 0.25%	Tier 4				
BRIMONIDINE SOL 0.15% OP	BRIMONIDINE TARTRATE OPHTH SOLN 0.15%	Tier 3		X		
BRIMONIDINE SOL 0.2% OP	BRIMONIDINE TARTRATE OPHTH SOLN 0.2%	Tier 2				
BRINZOLAMIDE SUS 1%	BRINZOLAMIDE OPHTH SUSP 1%	Tier 3		X		
BRINZOLAMIDE SUS 1% OP	BRINZOLAMIDE OPHTH SUSP 1%	Tier 3		X		
CARTEOLOL SOL 1% OP	CARTEOLOL HCL OPHTH SOLN 1%	Tier 2				
COMBIGAN SOL 0.2/0.5%	BRIMONIDINE TARTRATE-TIMOLOL MALEATE OPHTH SOLN 0.2-0.5%	Tier 3		X		
COSOPT SOL 2-0.5%OP	DORZOLAMIDE HCL-TIMOLOL MALEATE OPHTH SOLN 2-0.5%	Tier 5				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
DORZOL/TIMOL SOL 2-0.5%OP	DORZOLAMIDE HCL-TIMOLOL MALEATE OPTH SOLN 2-0.5%	Tier 3				
DORZOLAMIDE SOL 2% OP	DORZOLAMIDE HCL OPTH SOLN 2%	Tier 2				
DORZOLAMIDE SOL 2% OP	DORZOLAMIDE HCL OPTH SOLN 2%	Tier 5				
IOPIDINE SOL 1% OP	APRACLOPIDINE HCL OPTH SOLN 1% (BASE EQUIVALENT)	Tier 4				
ISTALOL SOL 0.5% OP	TIMOLOL MALEATE OPTH SOLN 0.5% (ONCE-DAILY)	Tier 5				
LEVOBUNOLOL SOL 0.5% OP	LEVOBUNOLOL HCL OPTH SOLN 0.5%	Tier 2				
METHAZOLAMID TAB 25MG	METHAZOLAMIDE TAB 25 MG	Tier 2				
METHAZOLAMID TAB 50MG	METHAZOLAMIDE TAB 50 MG	Tier 2				
PHOSPHOLINE SOL 0.125%OP	ECHOTHIOPHATE IODIDE OPTH FOR SOLN 0.125%	Tier 3				
PILOCARPINE SOL 1% OP	PILOCARPINE HCL OPTH SOLN 1%	Tier 2				
PILOCARPINE SOL 2% OP	PILOCARPINE HCL OPTH SOLN 2%	Tier 2				
PILOCARPINE SOL 4% OP	PILOCARPINE HCL OPTH SOLN 4%	Tier 2				
TIMOLOL GEL SOL 0.25% OP	TIMOLOL MALEATE OPTH GEL FORMING SOLN 0.25%	Tier 2				
TIMOLOL GEL SOL 0.5% OP	TIMOLOL MALEATE OPTH GEL FORMING SOLN 0.5%	Tier 2				
TIMOLOL HEMI SOL 0.5% OP	TIMOLOL OPTH SOLN 0.5%	Tier 3		X		
TIMOLOL MAL SOL 0.25% OP	TIMOLOL MALEATE PRESERVATIVE FREE OPTH SOLN 0.25%	Tier 3				
TIMOLOL MAL SOL 0.25% OP	TIMOLOL MALEATE OPTH SOLN 0.25%	Tier 2				
TIMOLOL MAL SOL 0.5% OP	TIMOLOL MALEATE PRESERVATIVE FREE OPTH SOLN 0.5%	Tier 3				
TIMOLOL MAL SOL 0.5% OP	TIMOLOL MALEATE OPTH SOLN 0.5%	Tier 2				
TIMOLOL MALE SOL 0.5%	TIMOLOL MALEATE OPTH SOLN 0.5% (ONCE-DAILY)	Tier 4				
TIMOLOL MALE SOL 0.5% OP	TIMOLOL MALEATE OPTH SOLN 0.5% (ONCE-DAILY)	Tier 4				
TIMOPTIC OCU SOL 0.25% OP	TIMOLOL MALEATE PRESERVATIVE FREE OPTH SOLN 0.25%	Tier 5				
TIMOPTIC OCU SOL 0.5% OP	TIMOLOL MALEATE PRESERVATIVE FREE OPTH SOLN 0.5%	Tier 5				
Ophthalmic Antivirals - Drugs to treat Eye Infections						
NATACYN SUS 5% OP	NATAMYCIN OPTH SUSP 5%	Tier 5				
TRIFLURIDINE SOL 1% OP	TRIFLURIDINE OPTH SOLN 1%	Tier 2				
ZIRGAN GEL 0.15%	GANCICLOVIR OPTH GEL 0.15%	Tier 5				
Ophthalmic Prostaglandin and Prostanoid Analogs - Glaucoma Drugs						
BIMATOPROST SOL 0.03% OP	BIMATOPROST OPTH SOLN 0.03%	Tier 3		X		
LATANOPROST SOL 0.005%	LATANOPROST OPTH SOLN 0.005%	Tier 2				
LUMIGAN SOL 0.01% OP	BIMATOPROST OPTH SOLN 0.01%	Tier 3		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
TAFLUPROST SOL 0.0015%	TAFLUPROST PRESERVATIVE FREE (PF) OPHTH SOLN 0.0015%	Tier 4		X	X	
TRAVOPROST DRO 0.004%	TRAVOPROST OPHTH SOLN 0.004% (BENZALKONIUM FREE) (BAK FREE)	Tier 4		X		
XELPROS EMU 0.005%	LATANOPROST OPHTH EMULSION 0.005%	Tier 4		X		
ZIOPATAN DRO 0.0015%	TAFLUPROST PRESERVATIVE FREE (PF) OPHTH SOLN 0.0015%	Tier 4		X	X	
Opioid Analgesics, Long-acting - Opioid Pain Relievers						
BELBUCA MIS 150MCG	BUPRENORPHINE HCL BUCCAL FILM 150 MCG (BASE EQUIVALENT)	Tier 4	X	X		
BELBUCA MIS 300MCG	BUPRENORPHINE HCL BUCCAL FILM 300 MCG (BASE EQUIVALENT)	Tier 4	X	X		
BELBUCA MIS 450MCG	BUPRENORPHINE HCL BUCCAL FILM 450 MCG (BASE EQUIVALENT)	Tier 4	X	X		
BELBUCA MIS 600MCG	BUPRENORPHINE HCL BUCCAL FILM 600 MCG (BASE EQUIVALENT)	Tier 4	X	X		
BELBUCA MIS 750MCG	BUPRENORPHINE HCL BUCCAL FILM 750 MCG (BASE EQUIVALENT)	Tier 4	X	X		
BELBUCA MIS 75MCG	BUPRENORPHINE HCL BUCCAL FILM 75 MCG (BASE EQUIVALENT)	Tier 4	X	X		
BELBUCA MIS 900MCG	BUPRENORPHINE HCL BUCCAL FILM 900 MCG (BASE EQUIVALENT)	Tier 4	X	X		
BUPRENORPHIN DIS 10MCG/HR	BUPRENORPHINE TD PATCH WEEKLY 10 MCG/HR	Tier 4	X	X		
BUPRENORPHIN DIS 15MCG/HR	BUPRENORPHINE TD PATCH WEEKLY 15 MCG/HR	Tier 4	X	X		
BUPRENORPHIN DIS 20MCG/HR	BUPRENORPHINE TD PATCH WEEKLY 20 MCG/HR	Tier 4	X	X		
BUPRENORPHIN DIS 5MCG/HR	BUPRENORPHINE TD PATCH WEEKLY 5 MCG/HR	Tier 4	X	X		
BUPRENORPHIN DIS 7.5/HR	BUPRENORPHINE TD PATCH WEEKLY 7.5 MCG/HR	Tier 4	X	X		
FENTANYL DIS 100MCG/H	FENTANYL TD PATCH 72HR 100 MCG/HR	Tier 3	X	X		
FENTANYL DIS 12MCG/HR	FENTANYL TD PATCH 72HR 12 MCG/HR	Tier 3	X	X		
FENTANYL DIS 25MCG/HR	FENTANYL TD PATCH 72HR 25 MCG/HR	Tier 3	X	X		
FENTANYL DIS 50MCG/HR	FENTANYL TD PATCH 72HR 50 MCG/HR	Tier 3	X	X		
FENTANYL DIS 75MCG/HR	FENTANYL TD PATCH 72HR 75 MCG/HR	Tier 3	X	X		
HYDROCODONE CAP 10MG ER	HYDROCODONE BITARTRATE CAP ER 12HR 10 MG	Tier 4	X	X		
HYDROCODONE CAP 15MG ER	HYDROCODONE BITARTRATE CAP ER 12HR 15 MG	Tier 4	X	X		
HYDROCODONE CAP 20MG ER	HYDROCODONE BITARTRATE CAP ER 12HR 20 MG	Tier 4	X	X		
HYDROCODONE CAP 30MG ER	HYDROCODONE BITARTRATE CAP ER 12HR 30 MG	Tier 4	X	X		
HYDROCODONE CAP 40MG ER	HYDROCODONE BITARTRATE CAP ER 12HR 40 MG	Tier 4	X	X		
HYDROCODONE CAP 50MG ER	HYDROCODONE BITARTRATE CAP ER 12HR 50 MG	Tier 4	X	X		
HYDROCODONE TAB 100MG ER	HYDROCODONE BITARTRATE TAB ER 24HR DETER 100 MG	Tier 4	X	X		
HYDROCODONE TAB 120MG ER	HYDROCODONE BITARTRATE TAB ER 24HR DETER 120 MG	Tier 4	X	X		
HYDROCODONE TAB 20MG ER	HYDROCODONE BITARTRATE TAB ER 24HR DETER 20 MG	Tier 4	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
HYDROCODONE TAB 30MG ER	HYDROCODONE BITARTRATE TAB ER 24HR DETER 30 MG	Tier 4	X	X		
HYDROCODONE TAB 40MG ER	HYDROCODONE BITARTRATE TAB ER 24HR DETER 40 MG	Tier 4	X	X		
HYDROCODONE TAB 60MG ER	HYDROCODONE BITARTRATE TAB ER 24HR DETER 60 MG	Tier 4	X	X		
HYDROCODONE TAB 80MG ER	HYDROCODONE BITARTRATE TAB ER 24HR DETER 80 MG	Tier 4	X	X		
HYDROMORPHON TAB 12MG ER	HYDROMORPHONE HCL TAB ER 24HR 12 MG	Tier 4	X	X		
HYDROMORPHON TAB 16MG ER	HYDROMORPHONE HCL TAB ER 24HR 16 MG	Tier 4	X	X		
HYDROMORPHON TAB 32MG ER	HYDROMORPHONE HCL TAB ER 24HR 32 MG	Tier 4	X	X		
HYDROMORPHON TAB 8MG ER	HYDROMORPHONE HCL TAB ER 24HR 8 MG	Tier 4	X	X		
METHADONE CON 10MG/ML	METHADONE HCL CONC 10 MG/ML	Tier 2		X		
METHADONE SOL 10MG/5ML	METHADONE HCL SOLN 10 MG/5ML	Tier 2	X	X		
METHADONE SOL 5MG/5ML	METHADONE HCL SOLN 5 MG/5ML	Tier 2	X	X		
METHADONE TAB 10MG	METHADONE HCL TAB 10 MG	Tier 2	X	X		
METHADONE TAB 40MG	METHADONE HCL TAB FOR ORAL SUSP 40 MG	Tier 2		X		
METHADONE TAB 5MG	METHADONE HCL TAB 5 MG	Tier 2	X	X		
METHADOSE CON 10MG/ML	METHADONE HCL CONC 10 MG/ML	Tier 4		X		
METHADOSE TAB 40MG	METHADONE HCL TAB FOR ORAL SUSP 40 MG	Tier 2		X		
METHADOSE SF CON 10MG/ML	METHADONE HCL CONC 10 MG/ML	Tier 4		X		
MORPHINE SUL CAP 100MG ER	MORPHINE SULFATE CAP ER 24HR 100 MG	Tier 4	X	X		
MORPHINE SUL CAP 10MG ER	MORPHINE SULFATE CAP ER 24HR 10 MG	Tier 4	X	X		
MORPHINE SUL CAP 120MG ER	MORPHINE SULFATE BEADS CAP ER 24HR 120 MG	Tier 4	X	X		
MORPHINE SUL CAP 20MG ER	MORPHINE SULFATE CAP ER 24HR 20 MG	Tier 4	X	X		
MORPHINE SUL CAP 30MG ER	MORPHINE SULFATE BEADS CAP ER 24HR 30 MG	Tier 4	X	X		
MORPHINE SUL CAP 30MG ER	MORPHINE SULFATE CAP ER 24HR 30 MG	Tier 4	X	X		
MORPHINE SUL CAP 45MG ER	MORPHINE SULFATE BEADS CAP ER 24HR 45 MG	Tier 4	X	X		
MORPHINE SUL CAP 50MG ER	MORPHINE SULFATE CAP ER 24HR 50 MG	Tier 4	X	X		
MORPHINE SUL CAP 60MG ER	MORPHINE SULFATE BEADS CAP ER 24HR 60 MG	Tier 4	X	X		
MORPHINE SUL CAP 60MG ER	MORPHINE SULFATE CAP ER 24HR 60 MG	Tier 4	X	X		
MORPHINE SUL CAP 75MG ER	MORPHINE SULFATE BEADS CAP ER 24HR 75 MG	Tier 4	X	X		
MORPHINE SUL CAP 80MG ER	MORPHINE SULFATE CAP ER 24HR 80 MG	Tier 4	X	X		
MORPHINE SUL CAP 90MG ER	MORPHINE SULFATE BEADS CAP ER 24HR 90 MG	Tier 4	X	X		
MORPHINE SUL TAB 100MG ER	MORPHINE SULFATE TAB ER 100 MG	Tier 2	X	X		
MORPHINE SUL TAB 15MG ER	MORPHINE SULFATE TAB ER 15 MG	Tier 2	X	X		
MORPHINE SUL TAB 200MG ER	MORPHINE SULFATE TAB ER 200 MG	Tier 2	X	X		
MORPHINE SUL TAB 30MG ER	MORPHINE SULFATE TAB ER 30 MG	Tier 2	X	X		
MORPHINE SUL TAB 60MG ER	MORPHINE SULFATE TAB ER 60 MG	Tier 2	X	X		
NUCYNTA ER TAB 100MG	TAPENTADOL HCL TAB ER 12HR 100 MG	Tier 4	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
NUCYNTA ER TAB 150MG	TAPENTADOL HCL TAB ER 12HR 150 MG	Tier 4	X	X		
NUCYNTA ER TAB 200MG	TAPENTADOL HCL TAB ER 12HR 200 MG	Tier 4	X	X		
NUCYNTA ER TAB 250MG	TAPENTADOL HCL TAB ER 12HR 250 MG	Tier 4	X	X		
NUCYNTA ER TAB 50MG	TAPENTADOL HCL TAB ER 12HR 50 MG	Tier 4	X	X		
OXYMORPHONE TAB 10MG ER	OXYMORPHONE HCL TAB ER 12HR 10 MG	Tier 4	X	X		
OXYMORPHONE TAB 15MG ER	OXYMORPHONE HCL TAB ER 12HR 15 MG	Tier 4	X	X		
OXYMORPHONE TAB 20MG ER	OXYMORPHONE HCL TAB ER 12HR 20 MG	Tier 4	X	X		
OXYMORPHONE TAB 30MG ER	OXYMORPHONE HCL TAB ER 12HR 30 MG	Tier 4	X	X		
OXYMORPHONE TAB 40MG ER	OXYMORPHONE HCL TAB ER 12HR 40 MG	Tier 4	X	X		
OXYMORPHONE TAB 5MG ER	OXYMORPHONE HCL TAB ER 12HR 5 MG	Tier 4	X	X		
OXYMORPHONE TAB 7.5MG ER	OXYMORPHONE HCL TAB ER 12HR 7.5 MG	Tier 4	X	X		
TRAMADOL HCL TAB 100MG ER	TRAMADOL HCL TAB ER 24HR 100 MG	Tier 3		X		
TRAMADOL HCL TAB 100MG ER	TRAMADOL HCL TAB ER 24HR BIPHASIC RELEASE 100 MG	Tier 3		X		
TRAMADOL HCL TAB 200MG ER	TRAMADOL HCL TAB ER 24HR 200 MG	Tier 3		X		
TRAMADOL HCL TAB 200MG ER	TRAMADOL HCL TAB ER 24HR BIPHASIC RELEASE 200 MG	Tier 3		X		
TRAMADOL HCL TAB 300MG ER	TRAMADOL HCL TAB ER 24HR 300 MG	Tier 3		X		
TRAMADOL HCL TAB 300MG ER	TRAMADOL HCL TAB ER 24HR BIPHASIC RELEASE 300 MG	Tier 3		X		
XTAMPZA ER CAP 13.5MG	OXYCODONE CAP ER 12HR ABUSE-DETERRENT 13.5 MG	Tier 5	X	X		
XTAMPZA ER CAP 18MG	OXYCODONE CAP ER 12HR ABUSE-DETERRENT 18 MG	Tier 5	X	X		
XTAMPZA ER CAP 27MG	OXYCODONE CAP ER 12HR ABUSE-DETERRENT 27 MG	Tier 5	X	X		
XTAMPZA ER CAP 36MG	OXYCODONE CAP ER 12HR ABUSE-DETERRENT 36 MG	Tier 5	X	X		
XTAMPZA ER CAP 9MG	OXYCODONE CAP ER 12HR ABUSE-DETERRENT 9 MG	Tier 5	X	X		
Opioid Analgesics, Short-acting - Opioid Pain Relievers						
APAP/CODEINE SOL 120-12/5	ACETAMINOPHEN W/ CODEINE SOLN 120-12 MG/5ML	Tier 2				
APAP/CODEINE TAB 300-15MG	ACETAMINOPHEN W/ CODEINE TAB 300-15 MG	Tier 2				
APAP/CODEINE TAB 300-30MG	ACETAMINOPHEN W/ CODEINE TAB 300-30 MG	Tier 2				
APAP/CODEINE TAB 300-60MG	ACETAMINOPHEN W/ CODEINE TAB 300-60 MG	Tier 2				
ASCOMP/COD CAP 30MG	BUTALBITAL-ASPIRIN-CAFF W/ CODEINE CAP 50-325-40-30 MG	Tier 2				
BUT/APAP/CAF CAP CODEINE	BUTALBITAL-ACETAMINOPHEN-CAFF W/ COD CAP 50-325-40-30 MG	Tier 2		X		
BUT/ASA/CAF/ CAP CODEINE	BUTALBITAL-ASPIRIN-CAFF W/ CODEINE CAP 50-325-40-30 MG	Tier 2				
BUTORPHANOL SOL 10MG/ML	BUTORPHANOL TARTRATE NASAL SOLN 10 MG/ML	Tier 3		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
CODEINE SULF TAB 15MG	CODEINE SULFATE TAB 15 MG	Tier 2				
CODEINE SULF TAB 30MG	CODEINE SULFATE TAB 30 MG	Tier 2				
CODEINE SULF TAB 60MG	CODEINE SULFATE TAB 60 MG	Tier 2				
ENDOCET TAB 10-325MG	OXYCODONE W/ ACETAMINOPHEN TAB 10-325 MG	Tier 2				
ENDOCET TAB 2.5-325	OXYCODONE W/ ACETAMINOPHEN TAB 2.5-325 MG	Tier 2				
ENDOCET TAB 5-325MG	OXYCODONE W/ ACETAMINOPHEN TAB 5-325 MG	Tier 2				
ENDOCET TAB 7.5-325	OXYCODONE W/ ACETAMINOPHEN TAB 7.5-325 MG	Tier 2				
FENTANYL OT LOZ 1200MCG	FENTANYL CITRATE LOZENGE ON A HANDLE 1200 MCG	Tier 3	X	X		
FENTANYL OT LOZ 1600MCG	FENTANYL CITRATE LOZENGE ON A HANDLE 1600 MCG	Tier 3	X	X		
FENTANYL OT LOZ 200MCG	FENTANYL CITRATE LOZENGE ON A HANDLE 200 MCG	Tier 3	X	X		
FENTANYL OT LOZ 400MCG	FENTANYL CITRATE LOZENGE ON A HANDLE 400 MCG	Tier 3	X	X		
FENTANYL OT LOZ 600MCG	FENTANYL CITRATE LOZENGE ON A HANDLE 600 MCG	Tier 3	X	X		
FENTANYL OT LOZ 800MCG	FENTANYL CITRATE LOZENGE ON A HANDLE 800 MCG	Tier 3	X	X		
HYDRO/ACETA SOL 10-325MG	HYDROCODONE-ACETAMINOPHEN SOLN 10-325 MG/15ML	Tier 3				
HYDRO/APAP SOL	HYDROCODONE-ACETAMINOPHEN SOLN 10-300 MG/15ML	Tier 2				
HYDROCO/APAP SOL 7.5-325	HYDROCODONE-ACETAMINOPHEN SOLN 7.5-325 MG/15ML	Tier 3				
HYDROCO/APAP TAB 10-325MG	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	Tier 2				
HYDROCO/APAP TAB 2.5-325	HYDROCODONE-ACETAMINOPHEN TAB 2.5-325 MG	Tier 2				
HYDROCO/APAP TAB 5-325MG	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	Tier 2				
HYDROCO/APAP TAB 7.5-325	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	Tier 2				
HYDROCOD/IBU TAB 10-200MG	HYDROCODONE-IBUPROFEN TAB 10-200 MG	Tier 2				
HYDROCOD/IBU TAB 5-200MG	HYDROCODONE-IBUPROFEN TAB 5-200 MG	Tier 2				
HYDROCOD/IBU TAB 7.5-200	HYDROCODONE-IBUPROFEN TAB 7.5-200 MG	Tier 2				
HYDROMORPHON LIQ 1MG/ML	HYDROMORPHONE HCL LIQD 1 MG/ML	Tier 2				
HYDROMORPHON SUP 3MG	HYDROMORPHONE HCL SUPPOS 3 MG	Tier 2				
HYDROMORPHON TAB 2MG	HYDROMORPHONE HCL TAB 2 MG	Tier 2				
HYDROMORPHON TAB 4MG	HYDROMORPHONE HCL TAB 4 MG	Tier 2				
HYDROMORPHON TAB 8MG	HYDROMORPHONE HCL TAB 8 MG	Tier 2				
MEPERIDINE SOL 50MG/5ML	MEPERIDINE HCL ORAL SOLN 50 MG/5ML	Tier 2				
MEPERIDINE TAB 50MG	MEPERIDINE HCL TAB 50 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
MORPHINE SUL SOL 100/5ML	MORPHINE SULFATE ORAL SOLN 100 MG/5ML (20 MG/ML)	Tier 2				
MORPHINE SUL SOL 10MG/5ML	MORPHINE SULFATE ORAL SOLN 10 MG/5ML	Tier 2				
MORPHINE SUL SOL 20MG/5ML	MORPHINE SULFATE ORAL SOLN 20 MG/5ML	Tier 2				
MORPHINE SUL SOL 20MG/ML	MORPHINE SULFATE ORAL SOLN 100 MG/5ML (20 MG/ML)	Tier 2				
MORPHINE SUL SUP 10MG	MORPHINE SULFATE SUPPOS 10 MG	Tier 2				
MORPHINE SUL SUP 20MG	MORPHINE SULFATE SUPPOS 20 MG	Tier 2				
MORPHINE SUL SUP 30MG	MORPHINE SULFATE SUPPOS 30 MG	Tier 2				
MORPHINE SUL SUP 5MG	MORPHINE SULFATE SUPPOS 5 MG	Tier 2				
MORPHINE SUL TAB 15MG	MORPHINE SULFATE TAB 15 MG	Tier 2				
MORPHINE SUL TAB 30MG	MORPHINE SULFATE TAB 30 MG	Tier 2				
NUCYNTA TAB 100MG	TAPENTADOL HCL TAB 100 MG	Tier 5		X		
NUCYNTA TAB 50MG	TAPENTADOL HCL TAB 50 MG	Tier 5		X		
NUCYNTA TAB 75MG	TAPENTADOL HCL TAB 75 MG	Tier 5		X		
OXYCOD/APAP TAB 10-325MG	OXYCODONE W/ ACETAMINOPHEN TAB 10-325 MG	Tier 2				
OXYCOD/APAP TAB 2.5-325	OXYCODONE W/ ACETAMINOPHEN TAB 2.5-325 MG	Tier 2				
OXYCOD/APAP TAB 5-325MG	OXYCODONE W/ ACETAMINOPHEN TAB 5-325 MG	Tier 2				
OXYCOD/APAP TAB 7.5-325	OXYCODONE W/ ACETAMINOPHEN TAB 7.5-325 MG	Tier 2				
OXYCODONE CAP 5MG	OXYCODONE HCL CAP 5 MG	Tier 2				
OXYCODONE CON 100/5ML	OXYCODONE HCL CONC 100 MG/5ML (20 MG/ML)	Tier 2				
OXYCODONE SOL 5MG/5ML	OXYCODONE HCL SOLN 5 MG/5ML	Tier 2				
OXYCODONE TAB 10MG	OXYCODONE HCL TAB 10 MG	Tier 2				
OXYCODONE TAB 15MG	OXYCODONE HCL TAB 15 MG	Tier 2				
OXYCODONE TAB 20MG	OXYCODONE HCL TAB 20 MG	Tier 2				
OXYCODONE TAB 30MG	OXYCODONE HCL TAB 30 MG	Tier 2				
OXYCODONE TAB 5MG	OXYCODONE HCL TAB 5 MG	Tier 2		X		
OXYMORPHONE TAB HCL 10MG	OXYMORPHONE HCL TAB 10 MG	Tier 3		X		
OXYMORPHONE TAB HCL 5MG	OXYMORPHONE HCL TAB 5 MG	Tier 3		X		
PENTAZ/NALOX TAB 50-0.5MG	PENTAZOCINE W/ NALOXONE HCL TAB 50-0.5 MG	Tier 2				
PERCOCET TAB 10-325MG	OXYCODONE W/ ACETAMINOPHEN TAB 10-325 MG	Tier 5				
PERCOCET TAB 2.5-325	OXYCODONE W/ ACETAMINOPHEN TAB 2.5-325 MG	Tier 5				
PERCOCET TAB 5-325MG	OXYCODONE W/ ACETAMINOPHEN TAB 5-325 MG	Tier 5				
PERCOCET TAB 7.5-325	OXYCODONE W/ ACETAMINOPHEN TAB 7.5-325 MG	Tier 5				
TRAMADL/APAP TAB 37.5-325	TRAMADOL-ACETAMINOPHEN TAB 37.5-325 MG	Tier 2		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
TRAMADOL HCL TAB 50MG	TRAMADOL HCL TAB 50 MG	Tier 2				
Opioid Dependence Treatments - Antidotes/Deterrents/Protectants						
BUPREN/NALOX MIS 12-3MG	BUPRENORPHINE HCL-NALOXONE HCL SL FILM 12-3 MG (BASE EQUIV)	Tier 3		X		
BUPREN/NALOX MIS 2-0.5MG	BUPRENORPHINE HCL-NALOXONE HCL SL FILM 2-0.5 MG (BASE EQUIV)	Tier 3		X		
BUPREN/NALOX MIS 4-1MG	BUPRENORPHINE HCL-NALOXONE HCL SL FILM 4-1 MG (BASE EQUIV)	Tier 3		X		
BUPREN/NALOX MIS 8-2MG	BUPRENORPHINE HCL-NALOXONE HCL SL FILM 8-2 MG (BASE EQUIV)	Tier 3		X		
BUPREN/NALOX SUB 2-0.5MG	BUPRENORPHINE HCL-NALOXONE HCL SL TAB 2-0.5 MG (BASE EQUIV)	Tier 3				
BUPREN/NALOX SUB 8-2MG	BUPRENORPHINE HCL-NALOXONE HCL SL TAB 8-2 MG (BASE EQUIV)	Tier 3				
BUPRENORPHIN SUB 2MG	BUPRENORPHINE HCL SL TAB 2 MG (BASE EQUIV)	Tier 2		X		
BUPRENORPHIN SUB 8MG	BUPRENORPHINE HCL SL TAB 8 MG (BASE EQUIV)	Tier 2		X		
NALTREXONE TAB 50MG	NALTREXONE HCL TAB 50 MG	Tier 2				
ZUBSOLV SUB 0.7-0.18	BUPRENORPHINE HCL-NALOXONE HCL SL TAB 0.7-0.18 MG (BASE EQ)	Tier 3		X		
ZUBSOLV SUB 1.4-0.36	BUPRENORPHINE HCL-NALOXONE HCL SL TAB 1.4-0.36 MG (BASE EQ)	Tier 3		X		
ZUBSOLV SUB 11.4-2.9	BUPRENORPHINE HCL-NALOXONE HCL SL TAB 11.4-2.9 MG (BASE EQ)	Tier 3		X		
ZUBSOLV SUB 2.9-0.71	BUPRENORPHINE HCL-NALOXONE HCL SL TAB 2.9-0.71 MG (BASE EQ)	Tier 3		X		
ZUBSOLV SUB 5.7-1.4	BUPRENORPHINE HCL-NALOXONE HCL SL TAB 5.7-1.4 MG (BASE EQ)	Tier 3		X		
ZUBSOLV SUB 8.6-2.1	BUPRENORPHINE HCL-NALOXONE HCL SL TAB 8.6-2.1 MG (BASE EQ)	Tier 3		X		
Opioid Reversal Agents - Antidotes/Deterrents/Protectants						
FT NALOXONE SPR 4MG	NALOXONE HCL NASAL SPRAY 4 MG/0.1ML	Tier 2		X		
GNP NALOXONE SPR 4MG	NALOXONE HCL NASAL SPRAY 4 MG/0.1ML	Tier 2		X		
KLOXXADO SPR 8MG	NALOXONE HCL NASAL SPRAY 8 MG/0.1ML	Tier 2		X		
NALOXONE INJ 0.4MG/ML	NALOXONE HCL INJ 0.4 MG/ML	Tier 2				
NALOXONE INJ 0.4MG/ML	NALOXONE HCL INJ 4 MG/10ML	Tier 2				
NALOXONE INJ 0.4MG/ML	NALOXONE HCL SOLN CARTRIDGE 0.4 MG/ML	Tier 2				
NALOXONE INJ 4MG/10ML	NALOXONE HCL INJ 4 MG/10ML	Tier 2				
NALOXONE SPR	NALOXONE HCL NASAL SPRAY 4 MG/0.1ML	Tier 2		X		
NALOXONE SPR 4MG	NALOXONE HCL NASAL SPRAY 4 MG/0.1ML	Tier 2		X		
NALOXONE HCL INJ 0.4MG/ML	NALOXONE HCL SOLN PREFILLED SYRINGE 0.4 MG/ML	Tier 2				
NALOXONE HCL INJ 1MG/ML	NALOXONE HCL SOLN PREFILLED SYRINGE 2 MG/2ML	Tier 2				
NALOXONE HCL INJ 2MG/2ML	NALOXONE HCL SOLN PREFILLED SYRINGE 2 MG/2ML	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
NALOXONE HCL SPR 4MG	NALOXONE HCL NASAL SPRAY 4 MG/0.1ML	Tier 2		X		
NARCAN SPR 4MG	NALOXONE HCL NASAL SPRAY 4 MG/0.1ML	Tier 2		X		
OPVEE SPR 2.7/0.1	NALMEFENE HCL NASAL SPRAY 2.7 MG/0.1ML (BASE EQUIV)	Tier 2		X		
REXTOVY SPR 4/0.25ML	NALOXONE HCL NASAL SPRAY 4 MG/0.25ML	Tier 2		X		
RIVIVE SPR 3/0.1ML	NALOXONE HCL NASAL SPRAY 3 MG/0.1ML	Tier 3		X		
ZIMHI SOL	NALOXONE HCL SOLN PREFILLED SYRINGE 5 MG/0.5ML	Tier 3		X		
Otic Agents - Drugs for the Ear						
ACETIC ACID SOL 2% OTIC	ACETIC ACID OTIC SOLN 2%	Tier 2				
CETRAXAL SOL 0.2%	CIPROFLOXACIN HCL OTIC SOLN 0.2% (BASE EQUIVALENT)	Tier 4				
CIPRO/DEXA SUS 0.3-0.1%	CIPROFLOXACIN-DEXAMETHASONE OTIC SUSP 0.3-0.1%	Tier 5				
CIPROFLOXACIN SOL 0.2%	CIPROFLOXACIN HCL OTIC SOLN 0.2% (BASE EQUIVALENT)	Tier 2				
CORTISPORIN SUS -TC OTIC	NEOMYCIN-COLISTIN-HC-THONZONIUM OTIC SUSP 3.3-3-10-0.5 MG/ML	Tier 4				
DERMOTIC OIL 0.01%	FLUOCINOLONE ACETONIDE (OTIC) OIL 0.01%	Tier 5				
FLAC OIL 0.01%	FLUOCINOLONE ACETONIDE (OTIC) OIL 0.01%	Tier 2				
FLUOCIN ACET OIL 0.01%	FLUOCINOLONE ACETONIDE (OTIC) OIL 0.01%	Tier 2				
FLUOCIN ACET OIL EAR0.01%	FLUOCINOLONE ACETONIDE (OTIC) OIL 0.01%	Tier 2				
HC/ACET ACID SOL 1-2%OTIC	HYDROCORTISONE W/ ACETIC ACID OTIC SOLN 1-2%	Tier 2				
NEO/POLY/HC SOL 1% OTIC	NEOMYCIN-POLYMYXIN-HC OTIC SOLN 1%	Tier 2				
NEO/POLY/HC SUS 1% OTIC	NEOMYCIN-POLYMYXIN-HC OTIC SUSP 3.5 MG/ML-10000 UNIT/ML-1%	Tier 2				
PRAMOTIC DRO 1-0.1%	PRAMOXINE-CHLOROXYLENOL OTIC LIQUID 1-0.1%	Tier 4				
Otic Agents - Drugs to Treat Ear Conditions						
OFLOXACIN DRO 0.3%OTIC	OFLOXACIN OTIC SOLN 0.3%	Tier 3				
Parasympathomimetics - Myasthenia Gravis Drugs						
MESTINON SOL 60MG/5ML	PYRIDOSTIGMINE BROMIDE ORAL SOLN 60 MG/5ML	Tier 5				
PYRIDOSTIGM TAB 60MG	PYRIDOSTIGMINE BROMIDE TAB 60 MG	Tier 2				
PYRIDOSTIGMI SOL 60MG/5ML	PYRIDOSTIGMINE BROMIDE ORAL SOLN 60 MG/5ML	Tier 4				
PYRIDOSTIGMI TAB ER 180MG	PYRIDOSTIGMINE BROMIDE TAB ER 180 MG	Tier 2				
Pediculicides/Scabicides - Scabies and Lice Drugs						
CROTAN LOT 10%	CROTAMITON LOTION 10%	Tier 4				
ELIMITE CRE 5%	PERMETHRIN CREAM 5%	Tier 5				
MALATHION LOT 0.5%	MALATHION LOTION 0.5%	Tier 2				
OVIDE LOT 0.5%	MALATHION LOTION 0.5%	Tier 5				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PERMETHRIN CRE 5%	PERMETHRIN CREAM 5%	Tier 2				
PRURADIK LOT 10%	CROTAMITON LOTION 10%	Tier 4				
SPINOSAD SUS 0.9%	SPINOSAD SUSP 0.9%	Tier 4				
SULF LIME SOL	SULFURATED LIME SOLUTION	Tier 2				
Phosphate Binders - Phosphate-Removing Agents						
CALC ACETATE CAP 667MG	CALCIUM ACETATE (PHOSPHATE BINDER) CAP 667 MG (169 MG CA)	Tier 2				
CALC ACETATE TAB 667MG	CALCIUM ACETATE (PHOSPHATE BINDER) TAB 667 MG	Tier 2				
FOSRENOL POW 1000MG	LANTHANUM CARBONATE ORAL POWDER PACK 1000 MG (ELEMENTAL)	Tier 4			X	
FOSRENOL POW 750MG	LANTHANUM CARBONATE ORAL POWDER PACK 750 MG (ELEMENTAL)	Tier 4			X	
LANTHANUM CHW 1000MG	LANTHANUM CARBONATE CHEW TAB 1000 MG (ELEMENTAL)	Tier 4			X	
LANTHANUM CHW 500MG	LANTHANUM CARBONATE CHEW TAB 500 MG (ELEMENTAL)	Tier 4			X	
LANTHANUM CHW 750MG	LANTHANUM CARBONATE CHEW TAB 750 MG (ELEMENTAL)	Tier 4			X	
SEVELAM CARB POW 0.8GM	SEVELAMER CARBONATE PACKET 0.8 GM	Tier 3	X			
SEVELAM CARB POW 2.4GM	SEVELAMER CARBONATE PACKET 2.4 GM	Tier 3	X			
SEVELAM CARB TAB 800MG	SEVELAMER CARBONATE TAB 800 MG	Tier 3				
VELPHORO CHW 500MG	SUCROFERRIC OXYHYDROXIDE CHEW TAB 500 MG	Tier 5			X	
Phosphodiesterase Inhibitors, Airways Disease - Drugs for the Lungs						
ELIXOPHYLLIN ELX 80/15ML	THEOPHYLLINE ELIXIR 80 MG/15ML	Tier 4				
ROFLUMILAST TAB 250MCG	ROFLUMILAST TAB 250 MCG	Tier 3		X		
ROFLUMILAST TAB 500MCG	ROFLUMILAST TAB 500 MCG	Tier 3		X		
THEO-24 CAP 100MG CR	THEOPHYLLINE CAP ER 24HR 100 MG	Tier 4				
THEO-24 CAP 200MG CR	THEOPHYLLINE CAP ER 24HR 200 MG	Tier 4				
THEO-24 CAP 300MG CR	THEOPHYLLINE CAP ER 24HR 300 MG	Tier 4				
THEO-24 CAP 400MG ER	THEOPHYLLINE CAP ER 24HR 400 MG	Tier 4				
THEOPHYLLINE ELX 80/15ML	THEOPHYLLINE ELIXIR 80 MG/15ML	Tier 2				
THEOPHYLLINE SOL 80/15ML	THEOPHYLLINE SOLN 80 MG/15ML	Tier 2				
THEOPHYLLINE TAB 100MG ER	THEOPHYLLINE TAB ER 12HR 100 MG	Tier 2				
THEOPHYLLINE TAB 200MG ER	THEOPHYLLINE TAB ER 12HR 200 MG	Tier 2				
THEOPHYLLINE TAB 300MG ER	THEOPHYLLINE TAB ER 12HR 300 MG	Tier 2				
THEOPHYLLINE TAB 400MG ER	THEOPHYLLINE TAB ER 24HR 400 MG	Tier 2				
THEOPHYLLINE TAB 450MG ER	THEOPHYLLINE TAB ER 12HR 450 MG	Tier 2				
THEOPHYLLINE TAB 600MG ER	THEOPHYLLINE TAB ER 24HR 600 MG	Tier 2				
Platelet Modifying Agents - Platelet Modifying Drugs						
ASA/DIPYRIDA CAP 25-200MG	ASPIRIN-DIPYRIDAMOLE CAP ER 12HR 25-200 MG	Tier 4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
CABLIVI KIT 11MG	CAPLACIZUMAB-YHDP FOR INJ KIT 11 MG	Tier 4	X	X		X
CILOSTAZOL TAB 100MG	CILOSTAZOL TAB 100 MG	Tier 2				
CILOSTAZOL TAB 50MG	CILOSTAZOL TAB 50 MG	Tier 2				
CLOPIDOGREL TAB 300MG	CLOPIDOGREL BISULFATE TAB 300 MG (BASE EQUIV)	Tier 2				
CLOPIDOGREL TAB 75MG	CLOPIDOGREL BISULFATE TAB 75 MG (BASE EQUIV)	Tier 2				
DIPYRIDAMOLE TAB 25MG	DIPYRIDAMOLE TAB 25 MG	Tier 2				
DIPYRIDAMOLE TAB 50MG	DIPYRIDAMOLE TAB 50 MG	Tier 2				
DIPYRIDAMOLE TAB 75MG	DIPYRIDAMOLE TAB 75 MG	Tier 2				
PRASUGREL TAB 10MG	PRASUGREL HCL TAB 10 MG (BASE EQUIV)	Tier 4				
PRASUGREL TAB 5MG	PRASUGREL HCL TAB 5 MG (BASE EQUIV)	Tier 4				
TICAGRELOR TAB 60MG	TICAGRELOR TAB 60 MG	Tier 4		X		
TICAGRELOR TAB 90MG	TICAGRELOR TAB 90 MG	Tier 4		X		
ZONTIVITY TAB 2.08MG	VORAPAXAR SULFATE TAB 2.08 MG (BASE EQUIVALENT)	Tier 5		X		
Progesterone Agonists/Antagonists - Hormone Replacement/Modifying Drugs						
ELLA TAB 30MG	ULIPRISTAL ACETATE TAB 30 MG	Tier 1		X		
Progestins						
OPILL TAB 0.075MG	NORGESTREL TAB 0.075 MG	Tier 1				
Progestins - Hormone Replacement/Modifying Drugs						
AFTERA TAB 1.5MG	LEVONORGESTREL TAB 1.5 MG	Tier 1				
CAMILA TAB 0.35MG	NORETHINDRONE TAB 0.35 MG	Tier 1				
CRINONE GEL 4% VAG	PROGESTERONE VAGINAL GEL 4%	Tier 5			X	
CRINONE GEL 8% VAG	PROGESTERONE VAGINAL GEL 8%	Tier 5			X	
CURAE TAB 1.5MG	LEVONORGESTREL TAB 1.5 MG	Tier 1				
DEBLITANE TAB 0.35MG	NORETHINDRONE TAB 0.35 MG	Tier 1				
DEPO-PROVERA INJ 150MG/ML	MEDROXYPROGESTERONE ACETATE IM SUSP 150 MG/ML	Tier 5		X		
DEPO-PROVERA INJ 150MG/ML	MEDROXYPROGESTERONE ACETATE IM SUSP PREFILLED SYR 150 MG/ML	Tier 5		X		
DEPO-SQ PROV INJ 104	MEDROXYPROGESTERONE ACETATE SUSP PREF SYR 104 MG/0.65ML	Tier 1		X		
ECONTRA OS TAB 1.5MG	LEVONORGESTREL TAB 1.5 MG	Tier 1				
EMZAHH TAB 0.35MG	NORETHINDRONE TAB 0.35 MG	Tier 1				
ENDOMETRIN SUP 100MG	PROGESTERONE VAGINAL INSERT 100 MG	Tier 3				
ERRIN TAB 0.35MG	NORETHINDRONE TAB 0.35 MG	Tier 1				
GALLIFREY TAB 5MG	NORETHINDRONE ACETATE TAB 5 MG	Tier 2				
HEATHER TAB 0.35MG	NORETHINDRONE TAB 0.35 MG	Tier 1				
HER STYLE TAB 1.5MG	LEVONORGESTREL TAB 1.5 MG	Tier 1				
INCASSIA TAB 0.35MG	NORETHINDRONE TAB 0.35 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
JENCYCLA TAB 0.35MG	NORETHINDRONE TAB 0.35 MG	Tier 1				
LEVONORGESTR TAB 1.5MG	LEVONORGESTREL TAB 1.5 MG	Tier 1				
LYLEQ TAB 0.35MG	NORETHINDRONE TAB 0.35 MG	Tier 1				
LYZA TAB 0.35MG	NORETHINDRONE TAB 0.35 MG	Tier 1				
MEDROXYPR AC INJ 150MG/ML	MEDROXYPROGESTERONE ACETATE IM SUSP 150 MG/ML	Tier 1		X		
MEDROXYPR AC INJ 150MG/ML	MEDROXYPROGESTERONE ACETATE IM SUSP PREFILLED SYR 150 MG/ML	Tier 1		X		
MEDROXYPR AC TAB 10MG	MEDROXYPROGESTERONE ACETATE TAB 10 MG	Tier 2				
MEDROXYPR AC TAB 2.5MG	MEDROXYPROGESTERONE ACETATE TAB 2.5 MG	Tier 2				
MEDROXYPR AC TAB 5MG	MEDROXYPROGESTERONE ACETATE TAB 5 MG	Tier 2				
MEGESTROL SUS 625MG/5M	MEGESTROL ACETATE SUSP 625 MG/5ML	Tier 4				
MEGESTROL AC SUS 40MG/ML	MEGESTROL ACETATE SUSP 40 MG/ML	Tier 2				
MEGESTROL AC TAB 20MG	MEGESTROL ACETATE TAB 20 MG	Tier 2				
MEGESTROL AC TAB 40MG	MEGESTROL ACETATE TAB 40 MG	Tier 2				
MELEYA TAB 0.35MG	NORETHINDRONE TAB 0.35 MG	Tier 1				
MY CHOICE TAB 1.5MG	LEVONORGESTREL TAB 1.5 MG	Tier 1				
MY WAY TAB 1.5MG	LEVONORGESTREL TAB 1.5 MG	Tier 1				
NEW DAY TAB 1.5MG	LEVONORGESTREL TAB 1.5 MG	Tier 1				
NORA-BE TAB 0.35MG	NORETHINDRONE TAB 0.35 MG	Tier 1				
NORETHIN ACE TAB 5MG	NORETHINDRONE ACETATE TAB 5 MG	Tier 2				
NORETHINDRON TAB 0.35MG	NORETHINDRONE TAB 0.35 MG	Tier 1				
NORLYROC TAB 0.35MG	NORETHINDRONE TAB 0.35 MG	Tier 1				
OPICON TAB 1.5MG	LEVONORGESTREL TAB 1.5 MG	Tier 1				
OPTION 2 TAB 1.5MG	LEVONORGESTREL TAB 1.5 MG	Tier 1				
ORQUIDEA TAB 0.35MG	NORETHINDRONE TAB 0.35 MG	Tier 1				
PLAN B TAB 1.5MG	LEVONORGESTREL TAB 1.5 MG	Tier 1				
PROGESTERONE CAP 100MG	PROGESTERONE CAP 100 MG	Tier 3				
PROGESTERONE CAP 200MG	PROGESTERONE CAP 200 MG	Tier 3				
PROGESTERONE INJ 50MG/ML	PROGESTERONE IM IN OIL 50 MG/ML	Tier 2				
PROGESTERONE SUP 100MG	PROGESTERONE VAGINAL INSERT 100 MG	Tier 3				
PROVERA TAB 10MG	MEDROXYPROGESTERONE ACETATE TAB 10 MG	Tier 5				
PROVERA TAB 2.5MG	MEDROXYPROGESTERONE ACETATE TAB 2.5 MG	Tier 5				
PROVERA TAB 5MG	MEDROXYPROGESTERONE ACETATE TAB 5 MG	Tier 5				
REACT TAB 1.5MG	LEVONORGESTREL TAB 1.5 MG	Tier 1				
SHAROBEL TAB 0.35MG	NORETHINDRONE TAB 0.35 MG	Tier 1				
SLYND TAB 4MG	DROSPIRENONE TAB 4 MG	Tier 5	X		X	
TAKE ACTION TAB 1.5MG	LEVONORGESTREL TAB 1.5 MG	Tier 1				

Protectants - Ulcer and Stomach Acid Drugs

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
CYTOTEC TAB 100MCG	MISOPROSTOL TAB 100 MCG	Tier 5				
CYTOTEC TAB 200MCG	MISOPROSTOL TAB 200 MCG	Tier 5				
MISOPROSTOL TAB 100MCG	MISOPROSTOL TAB 100 MCG	Tier 2				
MISOPROSTOL TAB 200MCG	MISOPROSTOL TAB 200 MCG	Tier 2				
SUCRALFATE SUS 1GM/10ML	SUCRALFATE SUSP 1 GM/10ML	Tier 4				
SUCRALFATE TAB 1GM	SUCRALFATE TAB 1 GM	Tier 2				
Proton Pump Inhibitors - Ulcer and Stomach Acid Drugs						
ESOMEPRAZOLE GRA 10MG DR	ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 10 MG	Tier 5	X	X	X	
ESOMEPRAZOLE GRA 2.5MG	ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACK 2.5 MG	Tier 5	X	X	X	
ESOMEPRAZOLE GRA 2.5MG DR	ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACK 2.5 MG	Tier 5	X	X	X	
ESOMEPRAZOLE GRA 20MG DR	ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 20 MG	Tier 5	X	X	X	
ESOMEPRAZOLE GRA 40MG DR	ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 40 MG	Tier 5	X	X	X	
ESOMEPRAZOLE GRA 5MG	ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 5 MG	Tier 5	X	X	X	
ESOMEPRAZOLE GRA 5MG DR	ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 5 MG	Tier 5	X	X	X	
FIRST-OMEPRASUS 2MG/ML	*OMEPRAZOLE SUSP 2 MG/ML (COMPOUND KIT)**	Tier 4	X			
FIRST-PANTPR SUS 4MG/ML	*PANTOPRAZOLE SODIUM SUSP 4 MG/ML (COMPOUND KIT)**	Tier 4				
LANSOPRAZOLE SUS 3MG/ML	*LANSOPRAZOLE SUSP 3 MG/ML (COMPOUND KIT)**	Tier 4	X			
LANSOPRAZOLE TAB 15MG ODT	LANSOPRAZOLE TAB DELAYED RELEASE ORALLY DISINTEGRATING 15 MG	Tier 4	X	X	X	
LANSOPRAZOLE TAB 30MG ODT	LANSOPRAZOLE TAB DELAYED RELEASE ORALLY DISINTEGRATING 30 MG	Tier 4	X	X	X	
NEXIUM GRA 10MG DR	ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 10 MG	Tier 5	X	X	X	
NEXIUM GRA 2.5MG DR	ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACK 2.5 MG	Tier 5	X	X	X	
NEXIUM GRA 20MG DR	ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 20 MG	Tier 5	X	X	X	
NEXIUM GRA 40MG DR	ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 40 MG	Tier 5	X	X	X	
NEXIUM GRA 5MG DR	ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 5 MG	Tier 5	X	X	X	
OMEPRAZOLE CAP 10MG	OMEPRAZOLE CAP DELAYED RELEASE 10 MG	Tier 2				
OMEPRAZOLE CAP 20MG	OMEPRAZOLE CAP DELAYED RELEASE 20 MG	Tier 2				
OMEPRAZOLE CAP 40MG	OMEPRAZOLE CAP DELAYED RELEASE 40 MG	Tier 2				
PANTOPRAZOLE TAB 20MG	PANTOPRAZOLE SODIUM EC TAB 20 MG (BASE EQUIV)	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PANTOPRAZOLE TAB 40MG	PANTOPRAZOLE SODIUM EC TAB 40 MG (BASE EQUIV)	Tier 2				
RABEPRAZOLE TAB 20MG	RABEPRAZOLE SODIUM EC TAB 20 MG	Tier 3		X		
VOQUEZNA TAB 10MG	VONOPRAZAN FUMARATE TAB 10 MG	Tier 5	X	X		
VOQUEZNA TAB 20MG	VONOPRAZAN FUMARATE TAB 20 MG	Tier 5	X	X		
Pulmonary Antihypertensives - Asthma/Lung Drugs						
ADEMPAS TAB 0.5MG	RIOCIGUAT TAB 0.5 MG	Tier 4	X	X		X
ADEMPAS TAB 1.5MG	RIOCIGUAT TAB 1.5 MG	Tier 4	X	X		X
ADEMPAS TAB 1MG	RIOCIGUAT TAB 1 MG	Tier 4	X	X		X
ADEMPAS TAB 2.5MG	RIOCIGUAT TAB 2.5 MG	Tier 4	X	X		X
ADEMPAS TAB 2MG	RIOCIGUAT TAB 2 MG	Tier 4	X	X		X
AMBRISENTAN TAB 10MG	AMBRISENTAN TAB 10 MG	Tier 4	X	X		X
AMBRISENTAN TAB 5MG	AMBRISENTAN TAB 5 MG	Tier 4	X	X		X
BOSENTAN TAB 125MG	BOSENTAN TAB 125 MG	Tier 4	X	X		X
BOSENTAN TAB 32MG	BOSENTAN TAB FOR ORAL SUSP 32 MG	Tier 4	X	X		X
BOSENTAN TAB 62.5MG	BOSENTAN TAB 62.5 MG	Tier 4	X	X		X
OPSUMIT TAB 10MG	MACITENTAN TAB 10 MG	Tier 4	X	X		X
ORENITRAM TAB 0.125MG	TREPROSTINIL DIOLAMINE TAB ER 0.125 MG (BASE EQUIV)	Tier 5	X	X		X
ORENITRAM TAB 0.25MG	TREPROSTINIL DIOLAMINE TAB ER 0.25 MG (BASE EQUIV)	Tier 5	X	X		X
ORENITRAM TAB 1MG	TREPROSTINIL DIOLAMINE TAB ER 1 MG (BASE EQUIV)	Tier 5	X	X		X
ORENITRAM TAB 2.5MG	TREPROSTINIL DIOLAMINE TAB ER 2.5 MG (BASE EQUIV)	Tier 5	X	X		X
ORENITRAM TAB 5MG	TREPROSTINIL DIOLAMINE TAB ER 5 MG (BASE EQUIV)	Tier 5	X	X		X
ORENITRAM TAB MONTH 1	TREPROSTINIL TAB ER TITR PK (MO1) 126 X0.125MG & 42 X0.25MG	Tier 5	X	X		X
ORENITRAM TAB MONTH 2	TREPROSTINIL TAB ER TITR PK (MO2) 126 X0.125MG & 210 X0.25MG	Tier 5	X	X		X
ORENITRAM TAB MONTH 3	TREPROSTINIL TAB ER TITR PK(MO3)126X0.125MG&42X0.25MG&84X1MG	Tier 5	X	X		X
SILDENAFIL SUS 10MG/ML	SILDENAFIL CITRATE FOR SUSPENSION 10 MG/ML	Tier 5	X	X		X
SILDENAFIL TAB 20MG	SILDENAFIL CITRATE TAB 20 MG	Tier 2		X		X
TADALAFIL TAB 20MG	TADALAFIL TAB 20 MG (PAH)	Tier 2	X	X		X
TADLIQ SUS 20MG/5ML	TADALAFIL ORAL SUSP 20 MG/5ML (PAH)	Tier 5	X	X		X
TRACLEER TAB 125MG	BOSENTAN TAB 125 MG	Tier 4	X	X		X
TRACLEER TAB 32MG	BOSENTAN TAB FOR ORAL SUSP 32 MG	Tier 5	X	X		X
TRACLEER TAB 62.5MG	BOSENTAN TAB 62.5 MG	Tier 4	X	X		X
TYVASO SOL 0.6MG/ML	TREPROSTINIL INHALATION SOLUTION 0.6 MG/ML	Tier 4	X			X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
TYVASO DPI POW 16-32-48	TREPROSTINIL INH POWD 112 X 16MCG & 112 X 32MCG & 28 X 48MCG	Tier 4	X	X		X
TYVASO DPI POW 16-32MCG	TREPROSTINIL INH POWDER 112 X 16MCG & 84 X 32MCG	Tier 4	X	X		X
TYVASO DPI POW 16MCG	TREPROSTINIL INH POWDER 16 MCG/CARTRIDGE	Tier 4	X	X		X
TYVASO DPI POW 32MCG	TREPROSTINIL INH POWDER 32 MCG/CARTRIDGE	Tier 4	X	X		X
TYVASO DPI POW 48MCG	TREPROSTINIL INH POWDER 48 MCG/CARTRIDGE	Tier 4	X	X		X
TYVASO DPI POW 64MCG	TREPROSTINIL INH POWDER 64 MCG/CARTRIDGE	Tier 4	X	X		X
TYVASO RF KT SOL 0.6MG/ML	TREPROSTINIL INHALATION SOLUTION 0.6 MG/ML	Tier 4	X			X
TYVASO ST KT SOL 0.6MG/ML	TREPROSTINIL INHALATION SOLUTION 0.6 MG/ML	Tier 4	X			X
UPTRAVI TAB 1000MCG	SELEXIPAG TAB 1000 MCG	Tier 5	X	X		
UPTRAVI TAB 1200MCG	SELEXIPAG TAB 1200 MCG	Tier 5	X	X		
UPTRAVI TAB 1400MCG	SELEXIPAG TAB 1400 MCG	Tier 5	X	X		
UPTRAVI TAB 1600MCG	SELEXIPAG TAB 1600 MCG	Tier 5	X	X		
UPTRAVI TAB 200MCG	SELEXIPAG TAB 200 MCG	Tier 5	X	X		
UPTRAVI TAB 400MCG	SELEXIPAG TAB 400 MCG	Tier 5	X	X		
UPTRAVI TAB 600MCG	SELEXIPAG TAB 600 MCG	Tier 5	X	X		
UPTRAVI TAB 800MCG	SELEXIPAG TAB 800 MCG	Tier 5	X	X		
UPTRAVI PACK TAB 200/800	SELEXIPAG TAB THERAPY PACK 200 MCG (140) & 800 MCG (60)	Tier 5	X	X		
VENTAVIS SOL 10MCG/ML	ILOPROST INHALATION SOLUTION 10 MCG/ML	Tier 4	X			X
VENTAVIS SOL 20MCG/ML	ILOPROST INHALATION SOLUTION 20 MCG/ML	Tier 4	X			X
Pulmonary Fibrosis Agents - Drugs to treat Pulmonary Fibrosis						
PIRFENIDONE TAB 267MG	PIRFENIDONE TAB 267 MG	Tier 4	X	X		X
PIRFENIDONE TAB 801MG	PIRFENIDONE TAB 801 MG	Tier 4	X	X		X
Quinolones - Antibiotics						
BAXDELA TAB 450MG	DELAFLORACIN MEGLUMINE TAB 450 MG (BASE EQUIV)	Tier 5				
CIPRO TAB 250MG	CIPROFLOXACIN HCL TAB 250 MG (BASE EQUIV)	Tier 5				
CIPRO TAB 500MG	CIPROFLOXACIN HCL TAB 500 MG (BASE EQUIV)	Tier 5				
CIPRO (10%) SUS 500MG/5	CIPROFLOXACIN FOR ORAL SUSP 500 MG/5ML (10%) (10 GM/100ML)	Tier 4				
CIPRO (5%) SUS 250MG/5	CIPROFLOXACIN FOR ORAL SUSP 250 MG/5ML (5%) (5 GM/100ML)	Tier 4				
CIPROFLOXACIN TAB 100MG	CIPROFLOXACIN HCL TAB 100 MG (BASE EQUIV)	Tier 2				
CIPROFLOXACIN TAB 250MG	CIPROFLOXACIN HCL TAB 250 MG (BASE EQUIV)	Tier 2				
CIPROFLOXACIN TAB 500MG	CIPROFLOXACIN HCL TAB 500 MG (BASE EQUIV)	Tier 2				
CIPROFLOXACIN TAB 750MG	CIPROFLOXACIN HCL TAB 750 MG (BASE EQUIV)	Tier 2				
LEVOFLOXACIN SOL 25MG/ML	LEVOFLOXACIN ORAL SOLN 25 MG/ML	Tier 2				
LEVOFLOXACIN TAB 250MG	LEVOFLOXACIN TAB 250 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
LEVOFLOXACIN TAB 500MG	LEVOFLOXACIN TAB 500 MG	Tier 2				
LEVOFLOXACIN TAB 750MG	LEVOFLOXACIN TAB 750 MG	Tier 2				
MOXIFLOXACIN TAB 400MG	MOXIFLOXACIN HCL TAB 400 MG (BASE EQUIV)	Tier 4				
OFLOXACIN TAB 300MG	OFLOXACIN TAB 300 MG	Tier 2				
OFLOXACIN TAB 400MG	OFLOXACIN TAB 400 MG	Tier 2				
XEPI CRE 1%	OZENOXACIN CREAM 1%	Tier 4		X		
Respiratory Tract Agents, Other - Asthma/Lung Drugs						
ACETYLCYST SOL 10%	ACETYLCYSTEINE INHAL SOLN 10%	Tier 2				
ACETYLCYST SOL 20%	ACETYLCYSTEINE INHAL SOLN 20%	Tier 2				
ADVAIR HFA AER 115/21	FLUTICASONE-SALMETEROL INHAL AEROSOL 115-21 MCG/ACT	Tier 4		X		
ADVAIR HFA AER 230/21	FLUTICASONE-SALMETEROL INHAL AEROSOL 230-21 MCG/ACT	Tier 4		X		
ADVAIR HFA AER 45/21	FLUTICASONE-SALMETEROL INHAL AEROSOL 45-21 MCG/ACT	Tier 4		X		
AIRSUPRA AER 90-80MCG	ALBUTEROL-BUDESONIDE INHALATION AEROSOL 90-80 MCG/ACT	Tier 4		X		
ANORO ELLIPT AER 62.5-25	UMECLIDINIUM-VILANTEROL AERO POWD BA 62.5-25 MCG/ACT	Tier 4		X		
BEVESPI AER 9-4.8MCG	GLYCOPYRROLATE-FORMOTEROL FUMARATE AEROSOL 9-4.8 MCG/ACT	Tier 3		X		
BREO ELLIPTA INH 100-25	FLUTICASONE FUROATE-VILANTEROL AERO POWD BA 100-25 MCG/ACT	Tier 4		X		
BREO ELLIPTA INH 200-25	FLUTICASONE FUROATE-VILANTEROL AERO POWD BA 200-25 MCG/ACT	Tier 4		X		
BREO ELLIPTA INH 50-25MCG	FLUTICASONE FUROATE-VILANTEROL AERO POWD BA 50-25 MCG/ACT	Tier 4		X		
BREZTRI AERO AER SPHERE	BUDESONIDE-GLYCOPYRROLATE-FORMOTEROL AERS 160-9-4.8 MCG/ACT	Tier 4		X		
CODEINE/GG SOL 10-100/5	GUAIFENESIN-CODEINE SOLN 100-10 MG/5ML	Tier 2				
COMBIVENT AER 20-100	IPRATROPIUM-ALBUTEROL INHAL AEROSOL SOLN 20-100 MCG/ACT	Tier 5		X		
FASENRA PEN INJ 30MG/ML	BENRALIZUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 30 MG/ML	Tier 5	X	X		
FLUTIC/SALME AER 100/50	FLUTICASONE-SALMETEROL AER POWDER BA 100-50 MCG/ACT	Tier 4		X		
FLUTIC/SALME AER 250/50	FLUTICASONE-SALMETEROL AER POWDER BA 250-50 MCG/ACT	Tier 4		X		
FLUTIC/SALME AER 500/50	FLUTICASONE-SALMETEROL AER POWDER BA 500-50 MCG/ACT	Tier 4		X		
FLUTIC/SALME INH 113/14	FLUTICASONE-SALMETEROL AER POWDER BA 113-14 MCG/ACT	Tier 4		X		
FLUTIC/SALME INH 232/14	FLUTICASONE-SALMETEROL AER POWDER BA 232-14 MCG/ACT	Tier 4		X		
FLUTIC/SALME INH 55/14	FLUTICASONE-SALMETEROL AER POWDER BA 55-14 MCG/ACT	Tier 4		X		
G TUSSIN AC LIQ 100-10/5	GUAIFENESIN-CODEINE SOLN 100-10 MG/5ML	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
GG/CODEINE SOL 100-10/5	GUAIFENESIN-CODEINE SOLN 100-10 MG/5ML	Tier 2				
GG/CODEINE SOL 200-20MG	GUAIFENESIN-CODEINE SOLN 100-10 MG/5ML	Tier 2				
GRASSTK SUB 2800BAU	TIMOTHY GRASS POLLEN ALLERGEN EXT SL TAB 2800 BAU	Tier 5	X	X		
GUAIFENESIN SYP 100-10/5	GUAIFENESIN-CODEINE SOLN 100-10 MG/5ML	Tier 2				
HYD POL/CPM SUS 10-8/5ML	HYDROCOD POLST-CHLORPHEN POLST ER SUSP 10-8 MG/5ML	Tier 4	X	X		
HYDROC/HOMAT TAB 5-1.5MG	HYDROCODONE BITART-HOMATROPINE METHYLBROMIDE TAB 5-1.5 MG	Tier 2	X			
HYDROCOD/HOM SYP 5-1.5/5	HYDROCODONE BITART-HOMATROPINE METHYLBROM SOLN 5-1.5 MG/5ML	Tier 2	X	X		
HYDROMET SYP 5-1.5/5	HYDROCODONE BITART-HOMATROPINE METHYLBROM SOLN 5-1.5 MG/5ML	Tier 2	X	X		
HYPERSAL NEB 3.5%	SODIUM CHLORIDE SOLN NEBU 3.5%	Tier 3				
HYPERSAL NEB 7%	SODIUM CHLORIDE SOLN NEBU 7%	Tier 3				
IPRATROPIUM/ SOL ALBUTER	IPRATROPIUM-ALBUTEROL NEBU SOLN 0.5-2.5(3) MG/3ML	Tier 3				
KALYDECO TAB 150MG	IVACAFTOR TAB 150 MG	Tier 4	X	X		X
MAXI-TUSS AC SOL	GUAIFENESIN-CODEINE SOLN 100-10 MG/5ML	Tier 2				
NEBUSAL NEB 3%	SODIUM CHLORIDE SOLN NEBU 3%	Tier 4				
NEOTUSS PLUS LIQ	PHENYLEPHRINE-CHLORPHEN-DM LIQUID 7.5-4-30 MG/5ML	Tier 4				
ODACTRA SUB	*DUST MITE MIXED EXT SL TAB 12 SQ-HDM***	Tier 5	X	X		
ORALAIR SUB 300 IR	*GRASS MIXED POLLEN EXT SL TAB 300 IR (INDEX OF REACTIVITY)*	Tier 5	X	X		
ORALAIR ADLT SUB 300 IR	*GRASS MIXED POLLEN EXT SL TAB 300 IR (INDEX OF REACTIVITY)*	Tier 5	X	X		
ORALAIR CHLD SUB 100 IR	*GRASS MIXED POLLEN EXT SL TAB 100 IR (INDEX OF REACTIVITY)*	Tier 5	X	X		
PIRFENIDONE CAP 267MG	PIRFENIDONE CAP 267 MG	Tier 3	X	X		X
PIRFENIDONE TAB 534MG	PIRFENIDONE TAB 534 MG	Tier 4	X	X		
PROMETH VC SYP 6.25-5/5	PROMETHAZINE & PHENYLEPHRINE SYRUP 6.25-5 MG/5ML	Tier 2				
PROMETH VC/ SYP CODEINE	PROMETHAZINE-PHENYLEPHRINE-CODEINE SYRUP 6.25-5-10 MG/5ML	Tier 2	X	X		
PROMETH/COD SOL 6.25-10	PROMETHAZINE W/ CODEINE SYRUP 6.25-10 MG/5ML	Tier 2	X	X		
PROMETH/PE SOL 6.25-5/5	PROMETHAZINE & PHENYLEPHRINE SYRUP 6.25-5 MG/5ML	Tier 2				
PULMOSAL NEB 7%	SODIUM CHLORIDE SOLN NEBU 7%	Tier 3				
PULMOZYME SOL 1MG/ML	DORNASE ALFA INHAL SOLN 2.5 MG/2.5ML	Tier 4	X	X		X
RAGWITEK SUB	SHORT RAGWEED POLLEN ALLERGEN EXTRACT SL TAB 12 AMB A 1-U	Tier 5	X	X		
SOD CHLORIDE NEB 0.9%	SODIUM CHLORIDE SOLN NEBU 0.9%	Tier 2				
SOD CHLORIDE NEB 10%	SODIUM CHLORIDE SOLN NEBU 10%	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
SOD CHLORIDE NEB 3%	SODIUM CHLORIDE SOLN NEBU 3%	Tier 2				
SOD CHLORIDE NEB 7%	SODIUM CHLORIDE SOLN NEBU 7%	Tier 2				
STIOLTO AER 2.5-2.5	TIOTROPIUM BR-OLODATEROL INHAL AERO SOLN 2.5-2.5 MCG/ACT	Tier 3		X		
SYMBICORT AER 160-4.5	BUDESONIDE-FORMOTEROL FUMARATE DIHYD AEROSOL 160-4.5 MCG/ACT	Tier 4		X		
SYMBICORT AER 80-4.5	BUDESONIDE-FORMOTEROL FUMARATE DIHYD AEROSOL 80-4.5 MCG/ACT	Tier 4		X		
TEZSPIRE INJ 210MG	TEZEPELUMAB-EKKO SUBCUTANEOUS SOLN AUTO-INJ 210 MG/1.91ML	Tier 5	X	X		X
TRELEGY AER 100MCG	FLUTICASONE-UMECLIDINIUM-VILANTEROL AEPB 100-62.5-25 MCG/ACT	Tier 4		X		
TRELEGY AER 200MCG	FLUTICASONE-UMECLIDINIUM-VILANTEROL AEPB 200-62.5-25 MCG/ACT	Tier 4		X		
TUXARIN ER TAB 54.3-8MG	CODEINE PHOS-CHLORPHENIRAMINE MALEATE TAB ER 12HR 54.3-8 MG	Tier 4	X	X		
WIXELA INHUB AER 100/50	FLUTICASONE-SALMETEROL AER POWDER BA 100-50 MCG/ACT	Tier 4		X		
WIXELA INHUB AER 250/50	FLUTICASONE-SALMETEROL AER POWDER BA 250-50 MCG/ACT	Tier 4		X		
WIXELA INHUB AER 500/50	FLUTICASONE-SALMETEROL AER POWDER BA 500-50 MCG/ACT	Tier 4		X		
XOLAIR INJ 150MG/ML	OMALIZUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 150 MG/ML	Tier 4	X	X		X
XOLAIR INJ 150MG/ML	OMALIZUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 150 MG/ML	Tier 4	X	X		X
XOLAIR INJ 300/2ML	OMALIZUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 300 MG/2ML	Tier 4	X	X		X
XOLAIR INJ 300/2ML	OMALIZUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 300 MG/2ML	Tier 4	X	X		X
XOLAIR INJ 75/0.5	OMALIZUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 75 MG/0.5ML	Tier 4	X	X		X
XOLAIR INJ 75/0.5	OMALIZUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 75 MG/0.5ML	Tier 4	X	X		X
Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions						
ADRENALIN SOL 1:1000	EPINEPHRINE HCL NASAL SOLN 0.1%	Tier 3				
BENZONATATE CAP 100MG	BENZONATATE CAP 100 MG	Tier 2				
BENZONATATE CAP 200MG	BENZONATATE CAP 200 MG	Tier 2				
BPM-PSE-DM SYP 2-30-10	PSEUDOEPHED-BROMPHEN-DM SYRUP 30-2-10 MG/5ML	Tier 2				
BROM/PSE/DM SYP	PSEUDOEPHED-BROMPHEN-DM SYRUP 30-2-10 MG/5ML	Tier 2				
BROM/PSE/DM SYP 2-30-10	PSEUDOEPHED-BROMPHEN-DM SYRUP 30-2-10 MG/5ML	Tier 2				
BROM/PSE/DM SYP 2/30/10	PSEUDOEPHED-BROMPHEN-DM SYRUP 30-2-10 MG/5ML	Tier 2				
BROMFED DM SOL 2-30-10	PSEUDOEPHED-BROMPHEN-DM SYRUP 30-2-10 MG/5ML	Tier 4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
EPINEPHRINE SOL 30/30ML	EPINEPHRINE HCL NASAL SOLN 0.1%	Tier 2				
PROMETHAZINE SOL DM	PROMETHAZINE-DM SYRUP 6.25-15 MG/5ML	Tier 2				
PROMETHAZINE SYP DM	PROMETHAZINE-DM SYRUP 6.25-15 MG/5ML	Tier 2				
Retinoids - Chemotherapy Agents						
BEXAROTENE CAP 75MG	BEXAROTENE CAP 75 MG	Tier 4				X
BEXAROTENE GEL 1%	BEXAROTENE GEL 1%	Tier 5		X		X
PANRETIN GEL 0.1%	ALITRETINOIN GEL 0.1%	Tier 4				
TRETINOIN CAP 10MG	TRETINOIN CAP 10 MG	Tier 4		X		X
Selective Estrogen Receptor Modifying Agents - Hormone Replacement/Modifying Drugs						
OSPHENA TAB 60MG	OSPEMIFENE TAB 60 MG	Tier 4	X	X		
RALOXIFENE TAB 60MG	RALOXIFENE HCL TAB 60 MG	Tier 3^				
Serotonin (5-HT) Receptor Agonists - Migraine Drugs						
ALMOTRIP MAL TAB 12.5MG	ALMOTRIPTAN MALATE TAB 12.5 MG	Tier 5		X		
ALMOTRIP MAL TAB 6.25MG	ALMOTRIPTAN MALATE TAB 6.25 MG	Tier 5		X		
ALMOTRIPTAN TAB 12.5MG	ALMOTRIPTAN MALATE TAB 12.5 MG	Tier 5		X		
ALMOTRIPTAN TAB 6.25MG	ALMOTRIPTAN MALATE TAB 6.25 MG	Tier 5		X		
ELETRIPTAN TAB 20MG	ELETRIPTAN HYDROBROMIDE TAB 20 MG (BASE EQUIVALENT)	Tier 4		X		
ELETRIPTAN TAB 40MG	ELETRIPTAN HYDROBROMIDE TAB 40 MG (BASE EQUIVALENT)	Tier 4		X		
FROVATRIPTAN TAB 2.5MG	FROVATRIPTAN SUCCINATE TAB 2.5 MG (BASE EQUIVALENT)	Tier 4		X		
IMITREX SPR 20MG/ACT	SUMATRIPTAN NASAL SPRAY 20 MG/ACT	Tier 5		X		
IMITREX SPR 5MG/ACT	SUMATRIPTAN NASAL SPRAY 5 MG/ACT	Tier 5		X		
NARATRIPTAN TAB 1MG	NARATRIPTAN HCL TAB 1 MG (BASE EQUIV)	Tier 2		X		
NARATRIPTAN TAB 2.5MG	NARATRIPTAN HCL TAB 2.5 MG (BASE EQUIV)	Tier 2		X		
RIZATRIPTAN TAB 10MG	RIZATRIPTAN BENZOATE TAB 10 MG (BASE EQUIVALENT)	Tier 2		X		
RIZATRIPTAN TAB 10MG ODT	RIZATRIPTAN BENZOATE ORAL DISINTEGRATING TAB 10 MG (BASE EQ)	Tier 2		X		
RIZATRIPTAN TAB 5MG	RIZATRIPTAN BENZOATE TAB 5 MG (BASE EQUIVALENT)	Tier 2		X		
RIZATRIPTAN TAB 5MG ODT	RIZATRIPTAN BENZOATE ORAL DISINTEGRATING TAB 5 MG (BASE EQ)	Tier 2		X		
SUMATRIPTAN INJ 4MG/0.5	SUMATRIPTAN SUCCINATE SOLUTION AUTO-INJECTOR 4 MG/0.5ML	Tier 2		X		
SUMATRIPTAN INJ 4MG/0.5	SUMATRIPTAN SUCCINATE SOLUTION CARTRIDGE 4 MG/0.5ML	Tier 2		X		
SUMATRIPTAN INJ 6/0.5ML	SUMATRIPTAN SUCCINATE INJ 6 MG/0.5ML	Tier 2		X		
SUMATRIPTAN INJ 6MG/.5ML	SUMATRIPTAN SUCCINATE INJ 6 MG/0.5ML	Tier 2		X		
SUMATRIPTAN INJ 6MG/.5ML	SUMATRIPTAN SUCCINATE SOLUTION AUTO-INJECTOR 6 MG/0.5ML	Tier 2		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
SUMATRIPTAN INJ 6MG/0.5	SUMATRIPTAN SUCCINATE SOLUTION AUTO-INJECTOR 6 MG/0.5ML	Tier 2		X		
SUMATRIPTAN INJ 6MG/0.5	SUMATRIPTAN SUCCINATE INJ 6 MG/0.5ML	Tier 2		X		
SUMATRIPTAN INJ 6MG/0.5	SUMATRIPTAN SUCCINATE SOLUTION CARTRIDGE 6 MG/0.5ML	Tier 2		X		
SUMATRIPTAN SPR 20MG/ACT	SUMATRIPTAN NASAL SPRAY 20 MG/ACT	Tier 3		X		
SUMATRIPTAN SPR 5MG/ACT	SUMATRIPTAN NASAL SPRAY 5 MG/ACT	Tier 3		X		
SUMATRIPTAN TAB 100MG	SUMATRIPTAN SUCCINATE TAB 100 MG	Tier 2		X		
SUMATRIPTAN TAB 25MG	SUMATRIPTAN SUCCINATE TAB 25 MG	Tier 2		X		
SUMATRIPTAN TAB 50MG	SUMATRIPTAN SUCCINATE TAB 50 MG	Tier 2		X		
ZOLMITRIPTAN TAB 2.5 MG	ZOLMITRIPTAN ORALLY DISINTEGRATING TAB 2.5 MG	Tier 4		X		
ZOLMITRIPTAN TAB 2.5MG	ZOLMITRIPTAN TAB 2.5 MG	Tier 3		X		
ZOLMITRIPTAN TAB 5MG	ZOLMITRIPTAN TAB 5 MG	Tier 3		X		
ZOLMITRIPTAN TAB 5MG ODT	ZOLMITRIPTAN ORALLY DISINTEGRATING TAB 5 MG	Tier 4		X		
ZOMIG SPR 2.5MG	ZOLMITRIPTAN NASAL SPRAY 2.5 MG/SPRAY UNIT	Tier 4		X		
ZOMIG SPR 5MG	ZOLMITRIPTAN NASAL SPRAY 5 MG/SPRAY UNIT	Tier 3		X		
Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm						
BACLOFEN TAB 10MG	BACLOFEN TAB 10 MG	Tier 2				
BACLOFEN TAB 20MG	BACLOFEN TAB 20 MG	Tier 2				
CARISOPRODOL TAB 350MG	CARISOPRODOL TAB 350 MG	Tier 2				
CHLORZOXAZON TAB 500MG	CHLORZOXAZONE TAB 500 MG	Tier 2				
CYCLOBENZAPR TAB 10MG	CYCLOBENZAPRINE HCL TAB 10 MG	Tier 2				
CYCLOBENZAPR TAB 5MG	CYCLOBENZAPRINE HCL TAB 5 MG	Tier 2				
DANTRIUM CAP 25MG	DANTROLENE SODIUM CAP 25 MG	Tier 5				
DANTROLENE CAP 100MG	DANTROLENE SODIUM CAP 100 MG	Tier 2				
DANTROLENE CAP 25MG	DANTROLENE SODIUM CAP 25 MG	Tier 2				
DANTROLENE CAP 50MG	DANTROLENE SODIUM CAP 50 MG	Tier 2				
METHOCARBAM TAB 500MG	METHOCARBAMOL TAB 500 MG	Tier 2				
METHOCARBAM TAB 750MG	METHOCARBAMOL TAB 750 MG	Tier 2				
ORPHENADRINE TAB 100MG ER	ORPHENADRINE CITRATE TAB ER 12HR 100 MG	Tier 3				
TANLOR TAB 1000MG	METHOCARBAMOL TAB 1000 MG	Tier 4				
TIZANIDINE CAP 2MG	TIZANIDINE HCL CAP 2 MG (BASE EQUIVALENT)	Tier 4				
TIZANIDINE CAP 4MG	TIZANIDINE HCL CAP 4 MG (BASE EQUIVALENT)	Tier 4				
TIZANIDINE CAP 6MG	TIZANIDINE HCL CAP 6 MG (BASE EQUIVALENT)	Tier 4				
TIZANIDINE TAB 2MG	TIZANIDINE HCL TAB 2 MG (BASE EQUIVALENT)	Tier 2				
TIZANIDINE TAB 4MG	TIZANIDINE HCL TAB 4 MG (BASE EQUIVALENT)	Tier 2				
ZANAFLEX CAP 2MG	TIZANIDINE HCL CAP 2 MG (BASE EQUIVALENT)	Tier 5				
ZANAFLEX CAP 4MG	TIZANIDINE HCL CAP 4 MG (BASE EQUIVALENT)	Tier 5				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ZANAFLEX CAP 6MG	TIZANIDINE HCL CAP 6 MG (BASE EQUIVALENT)	Tier 5				
ZANAFLEX TAB 4MG	TIZANIDINE HCL TAB 4 MG (BASE EQUIVALENT)	Tier 5				
Skeletal Muscle Relaxants - Pain/Swelling Management Drugs						
BACLOFEN SOL 10MG/5ML	BACLOFEN ORAL SOLN 10 MG/5ML	Tier 4	X			
BACLOFEN SOL 5MG/5ML	BACLOFEN ORAL SOLN 5 MG/5ML	Tier 4				
BACLOFEN SUS 25MG/5ML	BACLOFEN SUSP 25 MG/5ML	Tier 4	X			
BACLOFEN TAB 5MG	BACLOFEN TAB 5 MG	Tier 2				
FLEQSUVY SUS 25MG/5ML	BACLOFEN SUSP 25 MG/5ML	Tier 5	X			
OZOBAX SOL 5MG/5ML	BACLOFEN ORAL SOLN 5 MG/5ML	Tier 5				
OZOBAX DS SOL 10MG/5ML	BACLOFEN ORAL SOLN 10 MG/5ML	Tier 5	X			
Sleep Disorders, Other - Drugs for Sleeping						
ARMODAFINIL TAB 150MG	ARMODAFINIL TAB 150 MG	Tier 3		X		
ARMODAFINIL TAB 200MG	ARMODAFINIL TAB 200 MG	Tier 3		X		
ARMODAFINIL TAB 250MG	ARMODAFINIL TAB 250 MG	Tier 3		X		
ARMODAFINIL TAB 50MG	ARMODAFINIL TAB 50 MG	Tier 3		X		
BELSOMRA TAB 10MG	SUVOREXANT TAB 10 MG	Tier 5		X		
BELSOMRA TAB 15MG	SUVOREXANT TAB 15 MG	Tier 5		X		
BELSOMRA TAB 20MG	SUVOREXANT TAB 20 MG	Tier 5		X		
BELSOMRA TAB 5MG	SUVOREXANT TAB 5 MG	Tier 5		X		
HETLIOZ CAP 20MG	TASIMELTEON CAPSULE 20 MG	Tier 5	X	X		X
HETLIOZ LQ SUS 4MG/ML	TASIMELTEON ORAL SUSP 4 MG/ML	Tier 5	X	X		X
LUMRYZ PAK 6GM	SODIUM OXYBATE PACK FOR ORAL ER SUSP 6 GM	Tier 5	X	X		X
LUMRYZ PAK 7.5GM	SODIUM OXYBATE PACK FOR ORAL ER SUSP 7.5 GM	Tier 5	X	X		X
LUMRYZ PAK 9GM	SODIUM OXYBATE PACK FOR ORAL ER SUSP 9 GM	Tier 5	X	X		X
LUMRYZ PAK STARTER	SODIUM OXYBATE PACK FOR ER SUSP 4.5 & 6 & 7.5 GM STARTER PAK	Tier 5	X	X		X
LUMRYZ PKG 4.5GM	SODIUM OXYBATE PACK FOR ORAL ER SUSP 4.5 GM	Tier 5	X	X		X
MODAFINIL TAB 100MG	MODAFINIL TAB 100 MG	Tier 3		X		
MODAFINIL TAB 200MG	MODAFINIL TAB 200 MG	Tier 3		X		
RAMELTEON TAB 8MG	RAMELTEON TAB 8 MG	Tier 5		X		
SOD OXYBATE SOL 500MG/ML	SODIUM OXYBATE ORAL SOLUTION 500 MG/ML	Tier 5	X	X		X
SUNOSI TAB 150MG	SOLRIAMFETOL HCL TAB 150 MG (BASE EQUIV)	Tier 3	X	X		
SUNOSI TAB 75MG	SOLRIAMFETOL HCL TAB 75 MG (BASE EQUIV)	Tier 3	X	X		
TASIMELTEON CAP 20MG	TASIMELTEON CAPSULE 20 MG	Tier 5	X	X		X
WAKIX TAB 17.8MG	PITOLISANT HCL TAB 17.8 MG (BASE EQUIVALENT)	Tier 5	X	X		X
WAKIX TAB 4.45MG	PITOLISANT HCL TAB 4.45 MG (BASE EQUIVALENT)	Tier 5	X	X		X

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
XYWAV SOL 0.5GM/ML	CALCIUM, MAG, POTASSIUM, & SOD OXYBATES ORAL SOLN 500 MG/ML	Tier 5	X	X		X
Smoking Cessation Agents - Deterrents						
BUPROPION TAB 150MG SR	BUPROPION HCL (SMOKING DETERRENT) TAB ER 12HR 150 MG	Tier 1				
CVS NICOTINE DIS 14MG/24H	NICOTINE TD PATCH 24HR 14 MG/24HR	Tier 1				
CVS NICOTINE DIS 21MG/24H	NICOTINE TD PATCH 24HR 21 MG/24HR	Tier 1				
CVS NICOTINE DIS 7MG/24HR	NICOTINE TD PATCH 24HR 7 MG/24HR	Tier 1				
CVS NICOTINE GUM 2MG CINN	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
CVS NICOTINE GUM 2MG MINT	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
CVS NICOTINE GUM 2MG ORIG	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
CVS NICOTINE GUM 2MGFRUIT	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
CVS NICOTINE GUM 4MG	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
CVS NICOTINE GUM 4MG CINN	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
CVS NICOTINE GUM 4MG MINT	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
CVS NICOTINE GUM 4MG ORIG	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
CVS NICOTINE GUM 4MGFRUIT	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
CVS NICOTINE LOZ 2MG	NICOTINE POLACRILEX LOZENGE 2 MG	Tier 1				
CVS NICOTINE LOZ 2MG MINT	NICOTINE POLACRILEX LOZENGE 2 MG	Tier 1				
CVS NICOTINE LOZ 4MG MINT	NICOTINE POLACRILEX LOZENGE 4 MG	Tier 1				
EQ NICOTINE DIS 14MG/24H	NICOTINE TD PATCH 24HR 14 MG/24HR	Tier 1				
EQ NICOTINE DIS 21MG/24H	NICOTINE TD PATCH 24HR 21 MG/24HR	Tier 1				
EQ NICOTINE DIS 7MG/24HR	NICOTINE TD PATCH 24HR 7 MG/24HR	Tier 1				
EQ NICOTINE GUM 2MG CINN	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
EQ NICOTINE GUM 2MG MINT	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
EQ NICOTINE GUM 2MGFRUIT	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
EQ NICOTINE GUM 4MG CINN	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
EQ NICOTINE GUM 4MG MINT	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
EQ NICOTINE GUM 4MG ORIG	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
EQ NICOTINE GUM 4MGFRUIT	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
EQ NICOTINE LOZ 2MG CINN	NICOTINE POLACRILEX LOZENGE 2 MG	Tier 1				
EQ NICOTINE LOZ 2MG MINT	NICOTINE POLACRILEX LOZENGE 2 MG	Tier 1				
EQ NICOTINE LOZ 4MG CINN	NICOTINE POLACRILEX LOZENGE 4 MG	Tier 1				
EQ NICOTINE LOZ 4MG MINT	NICOTINE POLACRILEX LOZENGE 4 MG	Tier 1				
FT NICOTINE DIS 14MG/24H	NICOTINE TD PATCH 24HR 14 MG/24HR	Tier 1				
FT NICOTINE DIS 21MG/24H	NICOTINE TD PATCH 24HR 21 MG/24HR	Tier 1				
FT NICOTINE DIS 7MG/24HR	NICOTINE TD PATCH 24HR 7 MG/24HR	Tier 1				
FT NICOTINE GUM 2MG	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
FT NICOTINE GUM 4MG	NICOTINE POLACRILEX GUM 4 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
FT NICOTINE LOZ 2MG	NICOTINE POLACRILEX LOZENGE 2 MG	Tier 1				
FT NICOTINE LOZ 4MG	NICOTINE POLACRILEX LOZENGE 4 MG	Tier 1				
GNP NICOTINE DIS 14MG/24H	NICOTINE TD PATCH 24HR 14 MG/24HR	Tier 1				
GNP NICOTINE DIS 21MG/24H	NICOTINE TD PATCH 24HR 21 MG/24HR	Tier 1				
GNP NICOTINE DIS 7MG/24HR	NICOTINE TD PATCH 24HR 7 MG/24HR	Tier 1				
GNP NICOTINE GUM 2MG MINT	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
GNP NICOTINE GUM 2MG ORIG	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
GNP NICOTINE GUM 4MG FRT	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
GNP NICOTINE GUM 4MG MINT	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
GNP NICOTINE GUM 4MG ORIG	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
GNP NICOTINE LOZ 2MG MINT	NICOTINE POLACRILEX LOZENGE 2 MG	Tier 1				
GNP NICOTINE LOZ 4MG CHER	NICOTINE POLACRILEX LOZENGE 4 MG	Tier 1				
GNP NICOTINE LOZ 4MG MINT	NICOTINE POLACRILEX LOZENGE 4 MG	Tier 1				
GNP NICOTINE LOZ MINI 2MG	NICOTINE POLACRILEX LOZENGE 2 MG	Tier 1				
HABITROL DIS 21MG/24H	NICOTINE TD PATCH 24HR 21 MG/24HR	Tier 1				
HM NICOTINE GUM 2MG	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
HM NICOTINE GUM 4MG FRT	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
HM NICOTINE LOZ 2MG MINT	NICOTINE POLACRILEX LOZENGE 2 MG	Tier 1				
KLS QUIT2 GUM 2MG	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
KLS QUIT2 LOZ 2MG	NICOTINE POLACRILEX LOZENGE 2 MG	Tier 1				
KLS QUIT4 GUM 4MG	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
KLS QUIT4 LOZ 4MG	NICOTINE POLACRILEX LOZENGE 4 MG	Tier 1				
NICODERM CQ DIS 14MG/24H	NICOTINE TD PATCH 24HR 14 MG/24HR	Tier 1				
NICODERM CQ DIS 21MG/24H	NICOTINE TD PATCH 24HR 21 MG/24HR	Tier 1				
NICODERM CQ DIS 7MG/24HR	NICOTINE TD PATCH 24HR 7 MG/24HR	Tier 1				
NICORETTE GUM 2MG	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
NICORETTE GUM 2MG CINN	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
NICORETTE GUM 2MG MINT	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
NICORETTE GUM 2MG ORIG	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
NICORETTE GUM 2MGFRUIT	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
NICORETTE GUM 4MG	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
NICORETTE GUM 4MG CINN	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
NICORETTE GUM 4MG MINT	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
NICORETTE GUM 4MG ORIG	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
NICORETTE GUM 4MGFRUIT	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
NICORETTE LOZ 2MG	NICOTINE POLACRILEX LOZENGE 2 MG	Tier 1				
NICORETTE LOZ 2MG MINT	NICOTINE POLACRILEX LOZENGE 2 MG	Tier 1				
NICORETTE LOZ 4MG	NICOTINE POLACRILEX LOZENGE 4 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
NICORETTE LOZ 4MG MINT	NICOTINE POLACRILEX LOZENGE 4 MG	Tier 1				
NICORETTE ST GUM 2MG MINT	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
NICORETTE ST GUM 2MG ORIG	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
NICORETTE ST GUM 4MG ORIG	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
NICOTINE DIS 14MG/24H	NICOTINE TD PATCH 24HR 14 MG/24HR	Tier 1				
NICOTINE DIS 21MG/24H	NICOTINE TD PATCH 24HR 21 MG/24HR	Tier 1				
NICOTINE DIS 7MG/24HR	NICOTINE TD PATCH 24HR 7 MG/24HR	Tier 1				
NICOTINE GUM 2MG	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
NICOTINE GUM 2MGFRUIT	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
NICOTINE GUM 4MG	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
NICOTINE LOZ 2MG MINT	NICOTINE POLACRILEX LOZENGE 2 MG	Tier 1				
NICOTINE LOZ 4MG CINN	NICOTINE POLACRILEX LOZENGE 4 MG	Tier 1				
NICOTINE LOZ 4MG MINT	NICOTINE POLACRILEX LOZENGE 4 MG	Tier 1				
NICOTINE LOZ MINI 2MG	NICOTINE POLACRILEX LOZENGE 2 MG	Tier 1				
NICOTINE POL GUM 2MG	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
NICOTINE POL GUM 2MG CINN	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
NICOTINE POL GUM 2MG MINT	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
NICOTINE POL GUM 2MG ORIG	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
NICOTINE POL GUM 2MG REF	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
NICOTINE POL GUM 2MG STRT	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
NICOTINE POL GUM 2MGFRUIT	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
NICOTINE POL GUM 4MG	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
NICOTINE POL GUM 4MG CINN	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
NICOTINE POL GUM 4MG MINT	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
NICOTINE POL GUM 4MG ORIG	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
NICOTINE POL GUM 4MG REF	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
NICOTINE POL GUM 4MG STRT	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
NICOTINE POL GUM 4MGFRUIT	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
NICOTINE POL LOZ 2MG CHRY	NICOTINE POLACRILEX LOZENGE 2 MG	Tier 1				
NICOTINE POL LOZ 2MG CINN	NICOTINE POLACRILEX LOZENGE 2 MG	Tier 1				
NICOTINE POL LOZ 2MG MINI	NICOTINE POLACRILEX LOZENGE 2 MG	Tier 1				
NICOTINE POL LOZ 2MG MINT	NICOTINE POLACRILEX LOZENGE 2 MG	Tier 1				
NICOTINE POL LOZ 4MG CHRY	NICOTINE POLACRILEX LOZENGE 4 MG	Tier 1				
NICOTINE POL LOZ 4MG CINN	NICOTINE POLACRILEX LOZENGE 4 MG	Tier 1				
NICOTINE POL LOZ 4MG MINT	NICOTINE POLACRILEX LOZENGE 4 MG	Tier 1				
NICOTINE SYS KIT TRANSDER	NICOTINE TD PATCH 24 HR KIT 21-14-7 MG/24HR	Tier 1				
NICOTINE TD DIS 14MG/24H	NICOTINE TD PATCH 24HR 14 MG/24HR	Tier 1				
NICOTINE TD DIS 21MG/24H	NICOTINE TD PATCH 24HR 21 MG/24HR	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
NICOTINE TD DIS 7MG/24HR	NICOTINE TD PATCH 24HR 7 MG/24HR	Tier 1				
NICOTINE TD DIS STEP 1	NICOTINE TD PATCH 24HR 21 MG/24HR	Tier 1				
NICOTINE TD DIS STEP 2	NICOTINE TD PATCH 24HR 14 MG/24HR	Tier 1				
NICOTINE TD DIS STEP 3	NICOTINE TD PATCH 24HR 7 MG/24HR	Tier 1				
NICOTROL NS SPR 10MG/ML	NICOTINE NASAL SPRAY 10 MG/ML (0.5 MG/SPRAY)	Tier 1				
QC NICOTINE DIS 14MG/24H	NICOTINE TD PATCH 24HR 14 MG/24HR	Tier 1				
QC NICOTINE DIS 21MG/24H	NICOTINE TD PATCH 24HR 21 MG/24HR	Tier 1				
RA NICOTINE DIS 21MG/24H	NICOTINE TD PATCH 24HR 21 MG/24HR	Tier 1				
RA NICOTINE GUM 4MG	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
RA NICOTINE LOZ 2MG MINT	NICOTINE POLACRILEX LOZENGE 2 MG	Tier 1				
RA NICOTINE LOZ 4MG MINT	NICOTINE POLACRILEX LOZENGE 4 MG	Tier 1				
SM NICOTINE DIS 14MG/24H	NICOTINE TD PATCH 24HR 14 MG/24HR	Tier 1				
SM NICOTINE DIS 21MG/24H	NICOTINE TD PATCH 24HR 21 MG/24HR	Tier 1				
SM NICOTINE DIS 7MG/24HR	NICOTINE TD PATCH 24HR 7 MG/24HR	Tier 1				
SM NICOTINE GUM 2MG	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
SM NICOTINE GUM 2MG MINT	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
SM NICOTINE GUM 4MG	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
SM NICOTINE GUM 4MG MINT	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
SM NICOTINE LOZ 2MG CHRY	NICOTINE POLACRILEX LOZENGE 2 MG	Tier 1				
SM NICOTINE LOZ 2MG CINN	NICOTINE POLACRILEX LOZENGE 2 MG	Tier 1				
SM NICOTINE LOZ 2MG MINT	NICOTINE POLACRILEX LOZENGE 2 MG	Tier 1				
SM NICOTINE LOZ 4MG	NICOTINE POLACRILEX LOZENGE 4 MG	Tier 1				
SM NICOTINE LOZ 4MG CINN	NICOTINE POLACRILEX LOZENGE 4 MG	Tier 1				
SM NICOTINE LOZ 4MG MINT	NICOTINE POLACRILEX LOZENGE 4 MG	Tier 1				
STOP SMOKING GUM 2MG MINT	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
STOP SMOKING GUM 2MG ORIG	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
STOP SMOKING GUM 4MG	NICOTINE POLACRILEX GUM 4 MG	Tier 1				
STOP SMOKING LOZ 2MG MINT	NICOTINE POLACRILEX LOZENGE 2 MG	Tier 1				
STOP SMOKING LOZ 4MG MINT	NICOTINE POLACRILEX LOZENGE 4 MG	Tier 1				
THRIVE GUM 2MG MINT	NICOTINE POLACRILEX GUM 2 MG	Tier 1				
VARENICLINE TAB 0.5& 1MG	VARENICLINE TARTRATE TAB 11 X 0.5 MG & 42 X 1 MG START PACK	Tier 1				
VARENICLINE TAB 0.5MG	VARENICLINE TARTRATE TAB 0.5 MG (BASE EQUIV)	Tier 1				
VARENICLINE TAB 1MG	VARENICLINE TARTRATE TAB 1 MG (BASE EQUIV)	Tier 1				
Sodium Channel Agents - Seizure Control Drugs						
CARBAMAZEPIN CAP 100MG ER	CARBAMAZEPINE CAP ER 12HR 100 MG	Tier 3				
CARBAMAZEPIN CAP 200MG ER	CARBAMAZEPINE CAP ER 12HR 200 MG	Tier 3				
CARBAMAZEPIN CAP 300MG ER	CARBAMAZEPINE CAP ER 12HR 300 MG	Tier 3				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
CARBAMAZEPIN CHW 100MG	CARBAMAZEPINE CHEW TAB 100 MG	Tier 2				
CARBAMAZEPIN CHW 200MG	CARBAMAZEPINE CHEW TAB 200 MG	Tier 2				
CARBAMAZEPIN SUS 100/5ML	CARBAMAZEPINE SUSP 100 MG/5ML	Tier 2				
CARBAMAZEPIN TAB 100MG ER	CARBAMAZEPINE TAB ER 12HR 100 MG	Tier 3				
CARBAMAZEPIN TAB 200MG	CARBAMAZEPINE TAB 200 MG	Tier 2				
CARBAMAZEPIN TAB 200MG ER	CARBAMAZEPINE TAB ER 12HR 200 MG	Tier 3				
CARBAMAZEPIN TAB 400MG ER	CARBAMAZEPINE TAB ER 12HR 400 MG	Tier 3				
DILANTIN CAP 100MG	PHENYTOIN SODIUM EXTENDED CAP 100 MG	Tier 4				
DILANTIN CAP 30MG	PHENYTOIN SODIUM EXTENDED CAP 30 MG	Tier 4				
DILANTIN CHW 50MG	PHENYTOIN CHEW TAB 50 MG	Tier 4				
DILANTIN-125 SUS 125/5ML	PHENYTOIN SUSP 125 MG/5ML	Tier 4				
EPITOL TAB 200MG	CARBAMAZEPINE TAB 200 MG	Tier 2				
ESLICARBAZEP TAB 200MG	ESLICARBAZEPINE ACETATE TAB 200 MG	Tier 5	X			
ESLICARBAZEP TAB 400MG	ESLICARBAZEPINE ACETATE TAB 400 MG	Tier 5	X			
ESLICARBAZEP TAB 600MG	ESLICARBAZEPINE ACETATE TAB 600 MG	Tier 5	X			
ESLICARBAZEP TAB 800MG	ESLICARBAZEPINE ACETATE TAB 800 MG	Tier 5	X			
LACOSAMIDE SOL 100/10ML	LACOSAMIDE ORAL SOLUTION 10 MG/ML	Tier 3				
LACOSAMIDE SOL 10MG/ML	LACOSAMIDE ORAL SOLUTION 10 MG/ML	Tier 3				
LACOSAMIDE SOL 150/15ML	LACOSAMIDE ORAL SOLUTION 10 MG/ML	Tier 3				
LACOSAMIDE SOL 200/20ML	LACOSAMIDE ORAL SOLUTION 10 MG/ML	Tier 3				
LACOSAMIDE SOL 50/5ML	LACOSAMIDE ORAL SOLUTION 10 MG/ML	Tier 3				
LACOSAMIDE SOL 50MG/5ML	LACOSAMIDE ORAL SOLUTION 10 MG/ML	Tier 3				
LACOSAMIDE TAB 100MG	LACOSAMIDE TAB 100 MG	Tier 3				
LACOSAMIDE TAB 150MG	LACOSAMIDE TAB 150 MG	Tier 3				
LACOSAMIDE TAB 200MG	LACOSAMIDE TAB 200 MG	Tier 3				
LACOSAMIDE TAB 50MG	LACOSAMIDE TAB 50 MG	Tier 3				
MOTPOLY XR CAP 100MG	LACOSAMIDE CAP ER 24HR 100 MG	Tier 5	X			
MOTPOLY XR CAP 150MG	LACOSAMIDE CAP ER 24HR 150 MG	Tier 5	X			
MOTPOLY XR CAP 200MG	LACOSAMIDE CAP ER 24HR 200 MG	Tier 5	X			
OXCARBAZEPIN SUS 300/5ML	OXCARBAZEPINE SUSP 300 MG/5ML (60 MG/ML)	Tier 2				
OXCARBAZEPIN TAB 150MG	OXCARBAZEPINE TAB 150 MG	Tier 2				
OXCARBAZEPIN TAB 300MG	OXCARBAZEPINE TAB 300 MG	Tier 2				
OXCARBAZEPIN TAB 600MG	OXCARBAZEPINE TAB 600 MG	Tier 2				
PHENYTEK CAP 200MG	PHENYTOIN SODIUM EXTENDED CAP 200 MG	Tier 2				
PHENYTEK CAP 300MG	PHENYTOIN SODIUM EXTENDED CAP 300 MG	Tier 5				
PHENYTOIN CHW 50MG	PHENYTOIN CHEW TAB 50 MG	Tier 2				
PHENYTOIN SUS 125/5ML	PHENYTOIN SUSP 125 MG/5ML	Tier 2				
PHENYTOIN EX CAP 100MG	PHENYTOIN SODIUM EXTENDED CAP 100 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PHENYTOIN EX CAP 200MG	PHENYTOIN SODIUM EXTENDED CAP 200 MG	Tier 2				
PHENYTOIN EX CAP 300MG	PHENYTOIN SODIUM EXTENDED CAP 300 MG	Tier 2				
RUFINAMIDE SUS 40MG/ML	RUFINAMIDE SUSP 40 MG/ML	Tier 4				
RUFINAMIDE TAB 200MG	RUFINAMIDE TAB 200 MG	Tier 4	X			
RUFINAMIDE TAB 400MG	RUFINAMIDE TAB 400 MG	Tier 4	X			
TEGRETOL SUS 100/5ML	CARBAMAZEPINE SUSP 100 MG/5ML	Tier 5				
TEGRETOL TAB 200MG	CARBAMAZEPINE TAB 200 MG	Tier 5				
VIMPAT SOL 10MG/ML	LACOSAMIDE ORAL SOLUTION 10 MG/ML	Tier 5	X			
SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/Serotonin and Norepinephrine Reuptake Inhibitor) - Antidepressants						
CITALOPRAM SOL 10MG/5ML	CITALOPRAM HYDROBROMIDE ORAL SOLN 10 MG/5ML	Tier 2				
CITALOPRAM TAB 10MG	CITALOPRAM HYDROBROMIDE TAB 10 MG (BASE EQUIV)	Tier 2				
CITALOPRAM TAB 20MG	CITALOPRAM HYDROBROMIDE TAB 20 MG (BASE EQUIV)	Tier 2				
CITALOPRAM TAB 40MG	CITALOPRAM HYDROBROMIDE TAB 40 MG (BASE EQUIV)	Tier 2				
DESVENLAFAX TAB 100MG ER	DESVENLAFAXINE SUCCINATE TAB ER 24HR 100 MG (BASE EQUIV)	Tier 4		X		
DESVENLAFAX TAB 25MG ER	DESVENLAFAXINE SUCCINATE TAB ER 24HR 25 MG (BASE EQUIV)	Tier 4		X		
DESVENLAFAX TAB 50MG ER	DESVENLAFAXINE SUCCINATE TAB ER 24HR 50 MG (BASE EQUIV)	Tier 4		X		
DRIZALMA CAP 20MG DR	DULOXETINE HCL CAP DELAYED RELEASE SPRINKLE 20 MG (BASE EQ)	Tier 5		X		
DRIZALMA CAP 30MG DR	DULOXETINE HCL CAP DELAYED RELEASE SPRINKLE 30 MG (BASE EQ)	Tier 5		X		
DRIZALMA CAP 40MG DR	DULOXETINE HCL CAP DELAYED RELEASE SPRINKLE 40 MG (BASE EQ)	Tier 5		X		
DRIZALMA CAP 60MG DR	DULOXETINE HCL CAP DELAYED RELEASE SPRINKLE 60 MG (BASE EQ)	Tier 5		X		
ESCITALOPRAM SOL 5MG/5ML	ESCITALOPRAM OXALATE SOLN 5 MG/5ML (BASE EQUIV)	Tier 3				
ESCITALOPRAM TAB 10MG	ESCITALOPRAM OXALATE TAB 10 MG (BASE EQUIV)	Tier 2				
ESCITALOPRAM TAB 20MG	ESCITALOPRAM OXALATE TAB 20 MG (BASE EQUIV)	Tier 2				
ESCITALOPRAM TAB 5MG	ESCITALOPRAM OXALATE TAB 5 MG (BASE EQUIV)	Tier 2				
FLUOXETINE CAP 10MG	FLUOXETINE HCL CAP 10 MG	Tier 2				
FLUOXETINE CAP 20MG	FLUOXETINE HCL CAP 20 MG	Tier 2				
FLUOXETINE CAP 40MG	FLUOXETINE HCL CAP 40 MG	Tier 2				
FLUOXETINE CAP 90MG DR	FLUOXETINE HCL CAP DELAYED RELEASE 90 MG	Tier 4		X		
FLUOXETINE SOL 20MG/5ML	FLUOXETINE HCL SOLUTION 20 MG/5ML	Tier 2				
FLUOXETINE TAB 10MG	FLUOXETINE HCL TAB 10 MG	Tier 4		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
FLUOXETINE TAB 20MG	FLUOXETINE HCL TAB 20 MG	Tier 4				
FLUOXETINE TAB 60MG	FLUOXETINE HCL TAB 60 MG	Tier 4				
FLUVOXAMINE CAP 100MG ER	FLUVOXAMINE MALEATE CAP ER 24HR 100 MG	Tier 5		X		
FLUVOXAMINE CAP 150MG ER	FLUVOXAMINE MALEATE CAP ER 24HR 150 MG	Tier 5		X		
FLUVOXAMINE TAB 100MG	FLUVOXAMINE MALEATE TAB 100 MG	Tier 2				
FLUVOXAMINE TAB 25MG	FLUVOXAMINE MALEATE TAB 25 MG	Tier 2				
FLUVOXAMINE TAB 50MG	FLUVOXAMINE MALEATE TAB 50 MG	Tier 2				
NEFAZODONE TAB 100MG	NEFAZODONE HCL TAB 100 MG	Tier 2				
NEFAZODONE TAB 150MG	NEFAZODONE HCL TAB 150 MG	Tier 2				
NEFAZODONE TAB 200MG	NEFAZODONE HCL TAB 200 MG	Tier 2				
NEFAZODONE TAB 250MG	NEFAZODONE HCL TAB 250 MG	Tier 2				
NEFAZODONE TAB 50MG	NEFAZODONE HCL TAB 50 MG	Tier 2				
OLANZA/FLUOX CAP 12-25MG	OLANZAPINE-FLUOXETINE HCL CAP 12-25 MG	Tier 3		X		
OLANZA/FLUOX CAP 12-50MG	OLANZAPINE-FLUOXETINE HCL CAP 12-50 MG	Tier 3		X		
OLANZA/FLUOX CAP 3-25MG	OLANZAPINE-FLUOXETINE HCL CAP 3-25 MG	Tier 3		X		
OLANZA/FLUOX CAP 6-25MG	OLANZAPINE-FLUOXETINE HCL CAP 6-25 MG	Tier 3		X		
OLANZA/FLUOX CAP 6-50MG	OLANZAPINE-FLUOXETINE HCL CAP 6-50 MG	Tier 3		X		
PAROXETIN ER TAB 12.5MG	PAROXETINE HCL TAB ER 24HR 12.5 MG	Tier 4		X		
PAROXETIN ER TAB 37.5MG	PAROXETINE HCL TAB ER 24HR 37.5 MG	Tier 4		X		
PAROXETINE SUS 10MG/5ML	PAROXETINE HCL ORAL SUSP 10 MG/5ML (BASE EQUIV)	Tier 4				
PAROXETINE TAB 10MG	PAROXETINE HCL TAB 10 MG	Tier 2				
PAROXETINE TAB 20MG	PAROXETINE HCL TAB 20 MG	Tier 2				
PAROXETINE TAB 25MG ER	PAROXETINE HCL TAB ER 24HR 25 MG	Tier 4		X		
PAROXETINE TAB 30MG	PAROXETINE HCL TAB 30 MG	Tier 2				
PAROXETINE TAB 40MG	PAROXETINE HCL TAB 40 MG	Tier 2				
PAXIL SUS 10MG/5ML	PAROXETINE HCL ORAL SUSP 10 MG/5ML (BASE EQUIV)	Tier 5				
SERTRALINE CON 20MG/ML	SERTRALINE HCL ORAL CONCENTRATE FOR SOLUTION 20 MG/ML	Tier 2				
SERTRALINE TAB 100MG	SERTRALINE HCL TAB 100 MG	Tier 2				
SERTRALINE TAB 25MG	SERTRALINE HCL TAB 25 MG	Tier 2				
SERTRALINE TAB 50MG	SERTRALINE HCL TAB 50 MG	Tier 2				
SYMBYAX CAP 3-25MG	OLANZAPINE-FLUOXETINE HCL CAP 3-25 MG	Tier 5		X		
SYMBYAX CAP 6-25MG	OLANZAPINE-FLUOXETINE HCL CAP 6-25 MG	Tier 5		X		
TRAZODONE TAB 100MG	TRAZODONE HCL TAB 100 MG	Tier 2				
TRAZODONE TAB 150MG	TRAZODONE HCL TAB 150 MG	Tier 2				
TRAZODONE TAB 300MG	TRAZODONE HCL TAB 300 MG	Tier 2				
TRAZODONE TAB 50MG	TRAZODONE HCL TAB 50 MG	Tier 2				
TRINTELLIX TAB 10MG	VORTIOXETINE HBR TAB 10 MG (BASE EQUIV)	Tier 5		X	X	

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
TRINTELLIX TAB 20MG	VORTIOXETINE HBR TAB 20 MG (BASE EQUIV)	Tier 5		X	X	
TRINTELLIX TAB 5MG	VORTIOXETINE HBR TAB 5 MG (BASE EQUIV)	Tier 5		X	X	
VENLAFAXINE CAP 150MG ER	VENLAFAXINE HCL CAP ER 24HR 150 MG (BASE EQUIVALENT)	Tier 2				
VENLAFAXINE CAP 37.5 ER	VENLAFAXINE HCL CAP ER 24HR 37.5 MG (BASE EQUIVALENT)	Tier 2				
VENLAFAXINE CAP 75MG ER	VENLAFAXINE HCL CAP ER 24HR 75 MG (BASE EQUIVALENT)	Tier 2				
VENLAFAXINE TAB 100MG	VENLAFAXINE HCL TAB 100 MG (BASE EQUIVALENT)	Tier 2				
VENLAFAXINE TAB 25MG	VENLAFAXINE HCL TAB 25 MG (BASE EQUIVALENT)	Tier 2				
VENLAFAXINE TAB 37.5MG	VENLAFAXINE HCL TAB 37.5 MG (BASE EQUIVALENT)	Tier 2				
VENLAFAXINE TAB 50MG	VENLAFAXINE HCL TAB 50 MG (BASE EQUIVALENT)	Tier 2				
VENLAFAXINE TAB 75MG	VENLAFAXINE HCL TAB 75 MG (BASE EQUIVALENT)	Tier 2				
VILAZODONE TAB 10MG	VILAZODONE HCL TAB 10 MG	Tier 4		X		
VILAZODONE TAB 20MG	VILAZODONE HCL TAB 20 MG	Tier 4		X		
VILAZODONE TAB 40MG	VILAZODONE HCL TAB 40 MG	Tier 4		X		
Sulfonamides - Antibiotics						
BACTRIM TAB 400-80MG	SULFAMETHOXAZOLE-TRIMETHOPRIM TAB 400-80 MG	Tier 5				
BACTRIM DS TAB 800-160	SULFAMETHOXAZOLE-TRIMETHOPRIM TAB 800-160 MG	Tier 5				
SMZ-TMP SUS 200-40/5	SULFAMETHOXAZOLE-TRIMETHOPRIM SUSP 200-40 MG/5ML	Tier 2				
SMZ-TMP TAB 400-80MG	SULFAMETHOXAZOLE-TRIMETHOPRIM TAB 400-80 MG	Tier 2				
SMZ/TMP DS TAB 800-160	SULFAMETHOXAZOLE-TRIMETHOPRIM TAB 800-160 MG	Tier 2				
SULFADIAZINE TAB 500MG	SULFADIAZINE TAB 500 MG	Tier 2				
SULFASALAZIN TAB 500MG	SULFASALAZINE TAB 500 MG	Tier 2				
SULFASALAZIN TAB 500MG DR	SULFASALAZINE TAB DELAYED RELEASE 500 MG	Tier 2				
SULFATRIM PD SUS 200-40/5	SULFAMETHOXAZOLE-TRIMETHOPRIM SUSP 200-40 MG/5ML	Tier 2				
Tetracyclines - Antibiotics						
AVIDOXY TAB 100MG	DOXYCYCLINE MONOHYDRATE TAB 100 MG	Tier 5				
AVIDOXY DK KIT	*DOXYCYCLINE TAB 100 MG & SUNCREEN & SAL ACID WASH 2% KIT**	Tier 4				
DEMECLOCYCL TAB 150MG	DEMECLOCYCLINE HCL TAB 150 MG	Tier 2				
DEMECLOCYCL TAB 300MG	DEMECLOCYCLINE HCL TAB 300 MG	Tier 2				
DOXYCYC MONO CAP 100MG	DOXYCYCLINE MONOHYDRATE CAP 100 MG	Tier 2				
DOXYCYC MONO CAP 50MG	DOXYCYCLINE MONOHYDRATE CAP 50 MG	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
DOXYCYC MONO TAB 100MG	DOXYCYCLINE MONOHYDRATE TAB 100 MG	Tier 2				
DOXYCYC MONO TAB 150MG	DOXYCYCLINE MONOHYDRATE TAB 150 MG	Tier 2				
DOXYCYC MONO TAB 50MG	DOXYCYCLINE MONOHYDRATE TAB 50 MG	Tier 2				
DOXYCYC MONO TAB 75MG	DOXYCYCLINE MONOHYDRATE TAB 75 MG	Tier 2				
DOXYCYCL HYC CAP 100MG	DOXYCYCLINE HYCLATE CAP 100 MG	Tier 3				
DOXYCYCL HYC CAP 50MG	DOXYCYCLINE HYCLATE CAP 50 MG	Tier 3				
DOXYCYCL HYC TAB 100MG	DOXYCYCLINE HYCLATE TAB 100 MG	Tier 3				
DOXYCYCL HYC TAB 20MG	DOXYCYCLINE HYCLATE TAB 20 MG	Tier 2				
DOXYCYCLINE SUS 25MG/5ML	DOXYCYCLINE MONOHYDRATE FOR SUSP 25 MG/5ML	Tier 4				
MINOCYCLINE CAP 100MG	MINOCYCLINE HCL CAP 100 MG	Tier 2				
MINOCYCLINE CAP 50MG	MINOCYCLINE HCL CAP 50 MG	Tier 2				
MINOCYCLINE CAP 75MG	MINOCYCLINE HCL CAP 75 MG	Tier 2				
MINOCYCLINE TAB 105MG ER	MINOCYCLINE HCL TAB ER 24HR 105 MG	Tier 3				
MINOCYCLINE TAB 115MG ER	MINOCYCLINE HCL TAB ER 24HR 115 MG	Tier 3				
MINOCYCLINE TAB 135MG ER	MINOCYCLINE HCL TAB ER 24HR 135 MG	Tier 3				
MINOCYCLINE TAB 45MG ER	MINOCYCLINE HCL TAB ER 24HR 45 MG	Tier 3				
MINOCYCLINE TAB 55MG ER	MINOCYCLINE HCL TAB ER 24HR 55 MG	Tier 3				
MINOCYCLINE TAB 65MG ER	MINOCYCLINE HCL TAB ER 24HR 65 MG	Tier 3				
MINOCYCLINE TAB 80MG ER	MINOCYCLINE HCL TAB ER 24HR 80 MG	Tier 3				
MINOCYCLINE TAB 90MG ER	MINOCYCLINE HCL TAB ER 24HR 90 MG	Tier 3				
NUZYRA TAB 150MG	OMADACYCLINE TOSYLATE TAB 150 MG (BASE EQUIVALENT)	Tier 5		X		
TETRACYCLINE CAP 250MG	TETRACYCLINE HCL CAP 250 MG	Tier 4				
TETRACYCLINE CAP 500MG	TETRACYCLINE HCL CAP 500 MG	Tier 4				
VIBRAMYCIN CAP 100MG	DOXYCYCLINE HYCLATE CAP 100 MG	Tier 5				
VIBRAMYCIN SUS 25MG/5ML	DOXYCYCLINE MONOHYDRATE FOR SUSP 25 MG/5ML	Tier 5				
Treatment Adjuncts - Supportive Chemotherapy Drugs						
MESNA TAB 400MG	MESNA TAB 400 MG	Tier 5				
MESNEX TAB 400MG	MESNA TAB 400 MG	Tier 5				
Treatment-Resistant - Mood Disorder Drugs						
CLOZAPINE TAB 100MG	CLOZAPINE TAB 100 MG	Tier 2				
CLOZAPINE TAB 200MG	CLOZAPINE TAB 200 MG	Tier 2				
CLOZAPINE TAB 25MG	CLOZAPINE TAB 25 MG	Tier 2				
CLOZAPINE TAB 50MG	CLOZAPINE TAB 50 MG	Tier 2				
CLOZARIL TAB 100MG	CLOZAPINE TAB 100 MG	Tier 5				
CLOZARIL TAB 200MG	CLOZAPINE TAB 200 MG	Tier 5				
CLOZARIL TAB 25MG	CLOZAPINE TAB 25 MG	Tier 5				
CLOZARIL TAB 50MG	CLOZAPINE TAB 50 MG	Tier 5				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
Tricyclics - Antidepressants						
AMITRIPTYLIN TAB 100MG	AMITRIPTYLINE HCL TAB 100 MG	Tier 2				
AMITRIPTYLIN TAB 10MG	AMITRIPTYLINE HCL TAB 10 MG	Tier 2				
AMITRIPTYLIN TAB 150MG	AMITRIPTYLINE HCL TAB 150 MG	Tier 2				
AMITRIPTYLIN TAB 25MG	AMITRIPTYLINE HCL TAB 25 MG	Tier 2				
AMITRIPTYLIN TAB 50MG	AMITRIPTYLINE HCL TAB 50 MG	Tier 2				
AMITRIPTYLIN TAB 75MG	AMITRIPTYLINE HCL TAB 75 MG	Tier 2				
AMOXAPINE TAB 100MG	AMOXAPINE TAB 100 MG	Tier 2				
AMOXAPINE TAB 150MG	AMOXAPINE TAB 150 MG	Tier 2				
AMOXAPINE TAB 25MG	AMOXAPINE TAB 25 MG	Tier 2				
AMOXAPINE TAB 50MG	AMOXAPINE TAB 50 MG	Tier 2				
CDP/AMITRIP TAB 10-25MG	CHLORDIAZEPOXIDE-AMITRIPTYLINE TAB 10-25 MG	Tier 2				
CDP/AMITRIP TAB 5-12.5MG	CHLORDIAZEPOXIDE-AMITRIPTYLINE TAB 5-12.5 MG	Tier 2				
CLOMIPRAMINE CAP 25MG	CLOMIPRAMINE HCL CAP 25 MG	Tier 4				
CLOMIPRAMINE CAP 50MG	CLOMIPRAMINE HCL CAP 50 MG	Tier 4				
CLOMIPRAMINE CAP 75MG	CLOMIPRAMINE HCL CAP 75 MG	Tier 4				
DESIPRAMINE TAB 100MG	DESIPRAMINE HCL TAB 100 MG	Tier 2				
DESIPRAMINE TAB 10MG	DESIPRAMINE HCL TAB 10 MG	Tier 2				
DESIPRAMINE TAB 150MG	DESIPRAMINE HCL TAB 150 MG	Tier 2				
DESIPRAMINE TAB 25MG	DESIPRAMINE HCL TAB 25 MG	Tier 2				
DESIPRAMINE TAB 50MG	DESIPRAMINE HCL TAB 50 MG	Tier 2				
DESIPRAMINE TAB 75MG	DESIPRAMINE HCL TAB 75 MG	Tier 2				
DOXEPIN HCL CAP 100MG	DOXEPIN HCL CAP 100 MG	Tier 2				
DOXEPIN HCL CAP 10MG	DOXEPIN HCL CAP 10 MG	Tier 2				
DOXEPIN HCL CAP 150MG	DOXEPIN HCL CAP 150 MG	Tier 2				
DOXEPIN HCL CAP 25MG	DOXEPIN HCL CAP 25 MG	Tier 2				
DOXEPIN HCL CAP 50MG	DOXEPIN HCL CAP 50 MG	Tier 2				
DOXEPIN HCL CAP 75MG	DOXEPIN HCL CAP 75 MG	Tier 2				
DOXEPIN HCL CON 10MG/ML	DOXEPIN HCL CONC 10 MG/ML	Tier 2				
IMIPRAM HCL TAB 10MG	IMIPRAMINE HCL TAB 10 MG	Tier 2				
IMIPRAM HCL TAB 25MG	IMIPRAMINE HCL TAB 25 MG	Tier 2				
IMIPRAM HCL TAB 50MG	IMIPRAMINE HCL TAB 50 MG	Tier 2				
IMIPRAM PAM CAP 100MG	IMIPRAMINE PAMOATE CAP 100 MG	Tier 2				
IMIPRAM PAM CAP 125MG	IMIPRAMINE PAMOATE CAP 125 MG	Tier 2				
IMIPRAM PAM CAP 150MG	IMIPRAMINE PAMOATE CAP 150 MG	Tier 2				
IMIPRAM PAM CAP 75MG	IMIPRAMINE PAMOATE CAP 75 MG	Tier 2				
NORPRAMIN TAB 10MG	DESIPRAMINE HCL TAB 10 MG	Tier 5				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
NORPRAMIN TAB 25MG	DESIPRAMINE HCL TAB 25 MG	Tier 5				
NORTRIPTYLIN CAP 10MG	NORTRIPTYLINE HCL CAP 10 MG	Tier 2				
NORTRIPTYLIN CAP 25MG	NORTRIPTYLINE HCL CAP 25 MG	Tier 2				
NORTRIPTYLIN CAP 50MG	NORTRIPTYLINE HCL CAP 50 MG	Tier 2				
NORTRIPTYLIN CAP 75MG	NORTRIPTYLINE HCL CAP 75 MG	Tier 2				
NORTRIPTYLIN SOL 10MG/5ML	NORTRIPTYLINE HCL SOLN 10 MG/5ML	Tier 2				
PERPHEN/AMIT TAB 2-10MG	PERPHENAZINE-AMITRIPTYLINE TAB 2-10 MG	Tier 2				
PERPHEN/AMIT TAB 2-25MG	PERPHENAZINE-AMITRIPTYLINE TAB 2-25 MG	Tier 2				
PERPHEN/AMIT TAB 4-10MG	PERPHENAZINE-AMITRIPTYLINE TAB 4-10 MG	Tier 2				
PERPHEN/AMIT TAB 4-25MG	PERPHENAZINE-AMITRIPTYLINE TAB 4-25 MG	Tier 2				
PERPHEN/AMIT TAB 4-50MG	PERPHENAZINE-AMITRIPTYLINE TAB 4-50 MG	Tier 2				
PROTRIPTYLIN TAB 10MG	PROTRIPTYLINE HCL TAB 10 MG	Tier 2				
PROTRIPTYLIN TAB 5MG	PROTRIPTYLINE HCL TAB 5 MG	Tier 2				
TRIMIPRAMINE CAP 100MG	TRIMIPRAMINE MALEATE CAP 100 MG	Tier 5				
TRIMIPRAMINE CAP 25MG	TRIMIPRAMINE MALEATE CAP 25 MG	Tier 5				
TRIMIPRAMINE CAP 50MG	TRIMIPRAMINE MALEATE CAP 50 MG	Tier 5				
Vaccines						
ABRYVO INJ	RSV PRE-FUSION F A&B VAC RECOMB FOR IM SOLN 120 MCG/0.5ML	Tier 1				
ABRYVO INJ 120MCG	RSV PRE-FUSION F A&B VAC RECOMB FOR IM SOLN 120 MCG/0.5ML	Tier 1				
ACTHIB INJ	HAEMOPHILUS B POLYSACCHARIDE CONJUGATE VACCINE FOR INJ	Tier 1				
ADACEL INJ	TET TOX-DIPH-ACELL PERTUSS AD INJ 5-2-15.5 LF-LF-MCG/0.5ML	Tier 1				
ADACEL INJ	TET-DIPH-ACELL PERTUSS AD PREF SYR 5-2-15.5 LF-MCG/0.5ML	Tier 1				
AFLURIA INJ 2025-26	INFLUENZA VIRUS VACCINE SPLIT PF SUSP PREF SYRINGE 0.5 ML	Tier 1				
AFLURIA INJ 2025-26	INFLUENZA VIRUS VACCINE SPLIT IM SUSP	Tier 1				
AREXVY INJ 120MCG	RSVPREF3 VACCINE RECOMB ADJUVANTED FOR IM SUSP 120 MCG/0.5ML	Tier 1				
BEXSERO INJ	MENINGOCOCCAL VAC B (RECOMB OMV ADJUV) INJ PREFILLED SYRINGE	Tier 1				
BOOSTRIX INJ	TET TOX-DIPH-ACELL PERTUSS AD INJ 5-2.5-18.5 LF-LF-MCG/0.5ML	Tier 1				
BOOSTRIX INJ	TET-DIPH-ACELL PERTUSS AD PREF SYR 5-2.5-18.5 LF-MCG/0.5ML	Tier 1				
CAPVAXIVE INJ 0.5ML	PNEUMOCOCCAL 21-VALENT CONJUGATE VACCINE SOLN PREF SYR 0.5ML	Tier 1				
COMIRNATY INJ 30/.3ML	COVID-19 MRNA VAC TRIS-PFIZER IM SUSP PREF SYR 30 MCG/0.3ML	Tier 1				
COMIRNATY 5- INJ 11/25-26	COVID-19 MRNA VAC TRIS-S 5-11Y-PFIZER IM SUSP 10 MCG/0.3ML	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
DAPTACEL INJ	DIPH, ACELLULAR PERT & TET TOX INJ 15 LF-23 MCG-5 LF/0.5ML	Tier 1				
DENGXVAXIA SUS	DENGUE VIRUS VACCINE LIVE TETRAVALENT FOR SUBCUTANEOUS SUSP	Tier 1				
ENGRIX-B INJ 10/0.5ML	HEPATITIS B VACCINE (RECOMBINANT) SUSP PREF SYR 10 MCG/0.5ML	Tier 1				
ENGRIX-B INJ 20MCG/ML	HEPATITIS B VACCINE (RECOMBINANT) SUSP 20 MCG/ML	Tier 1				
ENGRIX-B INJ 20MCG/ML	HEPATITIS B VACCINE (RECOMBINANT) SUSP PREF SYR 20 MCG/ML	Tier 1				
FLUAD INJ 2025-26	INFLUENZA VAC TYPE A&B SURFACE ANT ADJ SUSP PREF SYR 0.5 ML	Tier 1				
FLUARIX INJ 2025-26	INFLUENZA VIRUS VACCINE SPLIT PF SUSP PREF SYRINGE 0.5 ML	Tier 1				
FLUCELVAX INJ 2025-26	INFLUENZA VIRUS VAC TISS-CULT SUBUNIT SUSP PREF SYR 0.5 ML	Tier 1				
FLULAVAL INJ 2025-26	INFLUENZA VIRUS VACCINE SPLIT PF SUSP PREF SYRINGE 0.5 ML	Tier 1				
FLUMIST NASA LIQ 2025-26	INFLUENZA VIRUS VACCINE LIVE INTRANASAL LIQUID	Tier 1				
FLUZONE INJ 2025-26	INFLUENZA VIRUS VACCINE SPLIT PF SUSP PREF SYRINGE 0.5 ML	Tier 1				
FLUZONE INJ 2025-26	INFLUENZA VIRUS VACCINE SPLIT IM SUSP	Tier 1				
FLUZONE HD INJ 2025-26	INFLUENZA VIRUS VAC SPLIT HIGH-DOSE PF SUSP PREF SYR 0.5ML	Tier 1				
GARDASIL 9 INJ	HUMAN PAPILLOMAVIRUS (HPV) 9-VALENT RECOMB VAC IM SUSP	Tier 1				
GARDASIL 9 INJ	HUMAN PAPILLOMAVIRUS (HPV) 9-VALENT RECOMB VAC SUSP PREF SYR	Tier 1				
HAVRIX INJ 1440UNIT	HEPATITIS A VACCINE SUSP PREFILLED SYR 1440 EL UNIT/ML	Tier 1				
HAVRIX INJ 720UNIT	HEPATITIS A VACCINE SUSP PREFILLED SYR 720 EL UNIT/0.5ML	Tier 1				
HEPLISAV-B INJ 20/0.5ML	HEPATITIS B VACCINE RECOMB ADJUVANTED PREF SYR 20 MCG/0.5ML	Tier 1				
HIBERIX SOL 10MCG	HAEMOPHILUS B POLYSACCHARIDE CONJUGATE VAC FOR INJ 10 MCG	Tier 1				
INFANRIX INJ	DIPH, ACELLULAR PERT & TET TOX INJ 25 LF-58 MCG-10 LF/0.5ML	Tier 1				
IPOL INJ INACTIVE	POLIOVIRUS VACCINE, IPV INJ SUSP	Tier 1				
M-M-R II INJ	MEASLES-MUMPS-RUBELLA VIRUS VACCINES FOR INJ SOLN	Tier 1				
MENQUADFI INJ	MENINGOCOCCAL (A, C, Y, AND W-135) TETANUS CONJUGATE VACCINE	Tier 1				
MENVEO INJ	MENINGOCOCCAL (A, C, Y, AND W-135) OLIGO CONJ VAC FOR INJ	Tier 1				
MENVEO SOL	MENINGOCOCCAL (A, C, Y, AND W-135) OLIGO CONJ VAC IM SOLN	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
MNEXSPIKE INJ 2025-26	COVID-19 MRNA VACCINE-MODERNA IM SUSP PREF SYR 10 MCG/0.2ML	Tier 1				
PEDIARIX INJ 0.5ML	DIPH-TET TOX-ACELL PERT-HEP B-POLIO IPV VAC SUSP PREF SYR	Tier 1				
PEDVAX HIB INJ	HAEMOPHILUS B POLYSACCHARIDE CONJ VAC IM SUSP 7.5 MCG/0.5 ML	Tier 1				
PENBRAYA INJ	MENINGOCOCCAL ACYW (TET CONJ)-MENING B (RCMB) VACC FOR INJ	Tier 1				
PENMENVY INJ	MENINGOCOCCAL ACWY (OLIGO CONJ)-MENING B (RCMB) VACC FOR INJ	Tier 1				
PENTACEL INJ	DIPH-AC PER-TET TOX AD-POLIOV-HAEMOPH B POLY VAC FOR IM SUSP	Tier 1				
PNEUMOVAX 23 INJ 25/0.5	PNEUMOCOCCAL VACCINE POLYVALENT SOLN PREF SYR 25 MCG/0.5ML	Tier 1				
PNEUMOVAX 23 INJ 25/0.5	PNEUMOCOCCAL VACCINE POLYVALENT INJ SOLN 25 MCG/0.5ML	Tier 1				
PREHEVBRIO SUS 10MCG/ML	HEPATITIS B VACCINE 3-ANTIGEN (RECOMBINANT) SUSP 10 MCG/ML	Tier 1				
PREVNAR 20 INJ	PNEUMOCOCCAL 20-VALENT CONJUGATE VACCINE SUS PREF SYR 0.5 ML	Tier 1				
PRIORIX INJ	MEASLES-MUMPS-RUBELLA VIRUS VACCINES FOR SUBCUTANEOUS SUSP	Tier 1				
PROQUAD INJ	MEASLES-MUMPS-RUBELLA-VARICELLA VIRUS VACCINES FOR SUSP	Tier 1				
QUADRACEL INJ	DIPH-TETANUS TOX AD-ACELL PERT & POLIO VIRUS, IPV VAC INJ	Tier 1				
QUADRACEL INJ 0.5ML	DIPH-TETANUS TOX AD-ACELL PERT & POLIO VIRUS, IPV VAC INJ	Tier 1				
RECOMBIVA HB INJ 10MCG/ML	HEPATITIS B VACCINE (RECOMBINANT) SUSP PREF SYR 10 MCG/ML	Tier 1				
RECOMBIVA HB INJ 10MCG/ML	HEPATITIS B VACCINE (RECOMBINANT) SUSP 10 MCG/ML	Tier 1				
RECOMBIVA HB INJ 5MCG/0.5	HEPATITIS B VACCINE (RECOMBINANT) SUSP PREF SYR 5 MCG/0.5ML	Tier 1				
RECOMBIVA HB INJ 5MCG/0.5	HEPATITIS B VACCINE (RECOMBINANT) SUSP 5 MCG/0.5ML	Tier 1				
RECOMBIVA-HB INJ 40MCG/ML	HEPATITIS B VACCINE (RECOMBINANT) SUSP 40 MCG/ML	Tier 1				
ROTARIX SUS	ROTAVIRUS VACCINE, LIVE ORAL SUSP	Tier 1				
ROTATEQ SOL	ROTAVIRUS VACCINE, LIVE ORAL PENTAVALENT SOLN	Tier 1				
SHINGRIX INJ 50/0.5ML	ZOSTER VAC RECOMBINANT ADJUVANTED FOR IM INJ 50 MCG/0.5ML	Tier 1				
SPIKEVAX INJ 2025-26	COVID-19 MRNA VACCINE-MODERNA IM SUSP PREF SYR 50 MCG/0.5ML	Tier 1				
SPIKEVAX INJ 2025-26	COVID-19 MRNA VAC 6MO-11YR-MODERNA IM SUSP PFS 25 MCG/0.25ML	Tier 1				
TDVAX INJ 2-2 LF	TETANUS-DIPHTheria TOXoids (TD) INJ 2-2 LF/0.5ML	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
TENIVAC INJ 5-2LF	TETANUS-DIPHTHERIA TOXOIDS (TD) INJ 5-2 LF/0.5ML	Tier 1				
TRUMENBA INJ	MENINGOCOCCAL GROUP B VAC (RECOMB) IM SUSP PREFILLED SYR	Tier 1				
TWINRIX INJ	HEP A-HEP B VACCINE SUSP PREF SYR 720-20 ELU-MCG/ML	Tier 1				
VAQTA INJ 25/0.5ML	HEPATITIS A VACCINE SUSP PREFILLED SYR 25 UNIT/0.5ML	Tier 1				
VAQTA INJ 25/0.5ML	HEPATITIS A VACCINE INJ SUSP 25 UNIT/0.5ML	Tier 1				
VAQTA INJ 50UNT/ML	HEPATITIS A VACCINE SUSP PREFILLED SYR 50 UNIT/ML	Tier 1				
VAQTA INJ 50UNT/ML	HEPATITIS A VACCINE INJ SUSP 50 UNIT/ML	Tier 1				
VARIVAX INJ	VARICELLA VIRUS VAC LIVE FOR INJ 1350 PFU/0.5ML	Tier 1				
VAXELIS INJ	DIPH-TET TOX-AC PERT AD-POLIO IPV-HIB-HEPATITIS B RECMB SUSP	Tier 1				
VAXELIS INJ	DIPH-TET TOX-AC PERT AD-POLIO IPV-HIB-HEP B REC SUSP PRE SYR	Tier 1				
VAXNEUVANCE INJ	PNEUMOCOCCAL 15-VALENT CONJUGATE VACCINE SUS PREF SYR 0.5 ML	Tier 1				
Vasodilators, Direct-acting Arterial - Chest Pain Drugs						
HYDRALAZINE TAB 100MG	HYDRALAZINE HCL TAB 100 MG	Tier 2				
HYDRALAZINE TAB 10MG	HYDRALAZINE HCL TAB 10 MG	Tier 2				
HYDRALAZINE TAB 25MG	HYDRALAZINE HCL TAB 25 MG	Tier 2				
HYDRALAZINE TAB 50MG	HYDRALAZINE HCL TAB 50 MG	Tier 2				
MINOXIDIL TAB 10MG	MINOXIDIL TAB 10 MG	Tier 2				
MINOXIDIL TAB 2.5MG	MINOXIDIL TAB 2.5 MG	Tier 2				
Vasodilators, Direct-acting Arterial/Venous - Chest Pain Drugs						
ISOSORB DIN TAB 10MG	ISOSORBIDE DINITRATE TAB 10 MG	Tier 2				
ISOSORB DIN TAB 20MG	ISOSORBIDE DINITRATE TAB 20 MG	Tier 2				
ISOSORB DIN TAB 30MG	ISOSORBIDE DINITRATE TAB 30 MG	Tier 2				
ISOSORB DIN TAB 5MG	ISOSORBIDE DINITRATE TAB 5 MG	Tier 2				
ISOSORB MONO TAB 10MG	ISOSORBIDE MONONITRATE TAB 10 MG	Tier 2				
ISOSORB MONO TAB 120MG ER	ISOSORBIDE MONONITRATE TAB ER 24HR 120 MG	Tier 2				
ISOSORB MONO TAB 20MG	ISOSORBIDE MONONITRATE TAB 20 MG	Tier 2				
ISOSORB MONO TAB 30MG ER	ISOSORBIDE MONONITRATE TAB ER 24HR 30 MG	Tier 2				
ISOSORB MONO TAB 60MG ER	ISOSORBIDE MONONITRATE TAB ER 24HR 60 MG	Tier 2				
NITRO-BID OIN 2%	NITROGLYCERIN OINT 2%	Tier 3				
NITRO-DUR DIS 0.1MG/HR	NITROGLYCERIN TD PATCH 24HR 0.1 MG/HR	Tier 4				
NITRO-DUR DIS 0.2MG/HR	NITROGLYCERIN TD PATCH 24HR 0.2 MG/HR	Tier 4				
NITRO-DUR DIS 0.3MG/HR	NITROGLYCERIN TD PATCH 24HR 0.3 MG/HR	Tier 4				
NITRO-DUR DIS 0.4MG/HR	NITROGLYCERIN TD PATCH 24HR 0.4 MG/HR	Tier 4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
NITRO-DUR DIS 0.6MG/HR	NITROGLYCERIN TD PATCH 24HR 0.6 MG/HR	Tier 4				
NITRO-DUR DIS 0.8MG/HR	NITROGLYCERIN TD PATCH 24HR 0.8 MG/HR	Tier 4				
NITRO-TIME CAP 2.5MG ER	NITROGLYCERIN CAP ER 2.5 MG	Tier 4				
NITRO-TIME CAP 6.5MG ER	NITROGLYCERIN CAP ER 6.5 MG	Tier 4				
NITRO-TIME CAP 9MG ER	NITROGLYCERIN CAP ER 9 MG	Tier 4				
NITROGLYCER DIS 0.1MG/HR	NITROGLYCERIN TD PATCH 24HR 0.1 MG/HR	Tier 2				
NITROGLYCER DIS 0.2MG/HR	NITROGLYCERIN TD PATCH 24HR 0.2 MG/HR	Tier 2				
NITROGLYCER DIS 0.4MG/HR	NITROGLYCERIN TD PATCH 24HR 0.4 MG/HR	Tier 2				
NITROGLYCER DIS 0.6MG/HR	NITROGLYCERIN TD PATCH 24HR 0.6 MG/HR	Tier 2				
NITROGLYCERI OIN 0.4%	NITROGLYCERIN OINT 0.4%	Tier 5		X		
NITROGLYCERI SUB 0.6MG	NITROGLYCERIN SL TAB 0.6 MG	Tier 2				
NITROGLYCERN SUB 0.3MG	NITROGLYCERIN SL TAB 0.3 MG	Tier 2				
NITROGLYCERN SUB 0.4MG	NITROGLYCERIN SL TAB 0.4 MG	Tier 2				
NITROSTAT SUB 0.3MG	NITROGLYCERIN SL TAB 0.3 MG	Tier 5				
NITROSTAT SUB 0.4MG	NITROGLYCERIN SL TAB 0.4 MG	Tier 5				
NITROSTAT SUB 0.6MG	NITROGLYCERIN SL TAB 0.6 MG	Tier 5				
Vitamins						
3232A INFANT POW FORMULA	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
3232A INFANT POW FORMULA	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3	X			
ATABEX OB TAB 29-1MG	*PRENATAL VIT W/ FE BISGLYCINATE CHELATE-FA TAB 29-1 MG***	Tier 4				
BCAD 1 POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3	X			
BCAD 2 POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
BLENDED MEAL MIS PEDIATRI	*NUTRITIONAL SUPPLEMENT MISC**	Tier 4	X			
BLENDED MEAL MIS PEDIATRI	*NUTRITIONAL SUPPLEMENT MISC**	Tier 4				
BLENDED MEAL MIS SQSH/CRT	*NUTRITIONAL SUPPLEMENT MISC**	Tier 4	X			
BLENDED MEAL MIS SQSH/CRT	*NUTRITIONAL SUPPLEMENT MISC**	Tier 4				
C-NATE DHA CAP 28-1-200	*PRENATAL VIT W/ FE FUM-FA-OMEGA 3 CAP 28-1-200 MG***	Tier 4				
CHICKEN/PEAS POW CARROTS	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
CHICKEN/PEAS POW PEDIATRI	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
CITRANATAL CAP HARMONY	*PRENAT W/O A W/FE FUM-FE CBN-DSS-FA-DHA CAP 27-1-260 MG***	Tier 4				
CITRANATAL CAP MEDLEY	*PRENAT W/O A W/FE FUM-FE CBN-FA-DHA CAP 27-1-200 MG***	Tier 4				
CITRANATAL MIS 90 DHA	*PRENAT W/O A W/FECBN-FEGL-DSS-FA TAB 90 &DHA CAP 300MG PAK*	Tier 5				
CITRANATAL MIS B-CALM	*PRENAT W/O A W/FECBN-FEGLU-FA TAB 20-1 MG & VIT B6 TAB PAK*	Tier 4				
CITRANATAL PAK ASSURE	*PRENAT W/O A W/FECBN-FEGL-DSS-FA TAB & DHA CAP 300 MG PACK*	Tier 5				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
CO-NATAL FA TAB 29-1MG	*PRENATAL VIT W/ FE FUMARATE-FA TAB 29-1 MG***	Tier 3				
COD LIVER CAP OIL	*COD LIVER OIL CAP***	Tier 2				
COMPLETE NAT PAK DHA	*PRENAT-FE BIS-FE PROT SUCC-FA-CA TAB & OMEGA 3 CAP 200 PK**	Tier 3				
COMPLETENATE CHW	*PRENATAL VIT W/ FE FUMARATE-FA CHEW TAB 29-1 MG***	Tier 4				
COMPLEX ESSE POW MSD	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3	X			
CONCEPT DHA CAP	*PRENATAL W/FE FUM-FE POLY -FA-OMEGA 3 CAP 53.5-38-1 MG***	Tier 5				
CONCEPT OB CAP	*PRENATAL W/O A W/FE FUM-FE POLY-FA CAP 130-92.4-1 MG***	Tier 5				
CYANOCOBALAM INJ 10000MCG	CYANOCOBALAMIN INJ 1000 MCG/ML	Tier 2				
CYANOCOBALAM INJ 1000MCG	CYANOCOBALAMIN INJ 1000 MCG/ML	Tier 2				
CYANOCOBALAM INJ 30000MCG	CYANOCOBALAMIN INJ 1000 MCG/ML	Tier 2				
CYANOCOBALAM SPR 500MCG	CYANOCOBALAMIN NASAL SPRAY 500 MCG/0.1ML	Tier 4				
DODEX INJ	CYANOCOBALAMIN INJ 1000 MCG/ML	Tier 5				
DRISDOL CAP 50000UNT	ERGOCALCIFEROL CAP 1.25 MG (50000 UNIT)	Tier 5				
DUET DHA 400 MIS 25-1-400	*PRENAT W/FE POLY-NA FERED-FA TAB 25-1 & OMEGA CAP 400 MG***	Tier 4				
ELECARE JR POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3	X			
ELECARE JR POW VANILLA	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3	X			
ELITE-OB TAB	*PRENATAL VIT W/ IRON CARBONYL-FA TAB 50-1.25 MG***	Tier 4				
ENBRACE HR CAP	*PRENATAL VIT W/ FE GLY CYS-FA-OMEGA 3 FATTY ACIDS CAP***	Tier 4				
ENCALA POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3	X			
ENSURE ORIGN POW VANILLA	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
ENU PRO3 POW PLUS	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
EQUACARE JR POW CHOCOLA	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
EQUACARE JR POW UNFLAVO	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
EQUACARE JR POW VANILLA	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
ESSENTIAL POW CARE JR	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3	X			
FA-8 CAP 800MCG	FOLIC ACID CAP 0.8 MG	Tier 1				
FLORAFOL PED SOL 0.25/ML	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE SOLN 0.25 MG/ML***	Tier 4				
FLOTREX CHW	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 1 MG***	Tier 4				
FOLIC ACID TAB 1000MCG	FOLIC ACID TAB 1 MG	Tier 2				
FOLIC ACID TAB 1MG	FOLIC ACID TAB 1 MG	Tier 2				
FOLIC ACID TAB 400MCG	FOLIC ACID TAB 400 MCG	Tier 1				
FOLIC ACID TAB 800MCG	FOLIC ACID TAB 800 MCG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
FOLIVANE-OB CAP	*PRENATAL W/O A W/FE FUM-FE POLY-FA CAP 85-1 MG***	Tier 5				
FT FOLIC ACI TAB 400MCG	FOLIC ACID TAB 400 MCG	Tier 1				
GA POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3	X			
GLYTACTIN POW BETTRMLK	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
HCY 1 POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3	X			
HCY 2 POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
KALE/QUINOA POW BERRIES	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
KALE/QUINOA POW PEDIATRI	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
KOSHR PRENAT TAB 30-1MG	*PRENATAL VIT W/ IRON CARBONYL-FA TAB 30-1 MG***	Tier 2				
LIPISTART POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
LMD POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3	X			
M-NATAL PLUS TAB	*PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG***	Tier 4				
MALTOCARB POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
METHIONINE CAP 200MG	*NUTRITIONAL SUPPLEMENT CAPS**	Tier 3	X			
MULTI VIT/FL CHW 0.25MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.25 MG***	Tier 2				
MULTI-VIT/FL DRO /FE 0.25	*PEDIATRIC MULTIPLE VITAMINS W/ FL-FE DROPS 0.25-10 MG/ML**	Tier 2				
MULTI-VIT/FL DRO 0.5MG/ML	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE SOLN 0.5 MG/ML***	Tier 2				
MULTIVIT/FL CHW 0.25MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.25 MG***	Tier 2				
MULTIVIT/FL CHW 0.5MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.5 MG***	Tier 2				
MULTIVIT/FL CHW 1MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 1 MG***	Tier 2				
MULTIVIT/FL DRO 0.25MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE SOLN 0.25 MG/ML***	Tier 2				
NAC CAP 600MG	ACETYLCYSTEINE CAP 600 MG	Tier 2				
NASCOBAL SPR 500MCG	CYANOCOBALAMIN NASAL SPRAY 500 MCG/0.1ML	Tier 5				
NATACHEW CHW	*PRENATAL VIT W/ FE FUM-FE BISGLYCIN-FA CHEW TAB 28-1 MG***	Tier 4				
NATAL PNV TAB	*PRENATAL VIT W/ FE GLUCONATE-FA TAB 6-0.5 MG***	Tier 4				
NEOCATE INFT POW DHA/ARA	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3	X			
NEOCATE SYNE POW JUNIOR	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3	X			
NEONATAL TAB COMPLETE	*PRENATAL VIT W/ FE FUMARATE-FA TAB 29-1 MG***	Tier 4				
NEONATAL TAB COMPLTE	*PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG***	Tier 4				
NEONATAL TAB PLUS	*PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG***	Tier 4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
NEONATAL 19 TAB	*PRENATAL VITAMIN-FOLIC ACID TAB 1 MG**	Tier 4				
NEONATAL PLS TAB 27-1MG	*PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG***	Tier 4				
NEONATAL/DHA MIS	*PRENATAL MV W/FE FUM-FA TAB 29-1 MG & DHA CAP 200 MG PACK *	Tier 4				
NESTABS TAB	*PRENATAL VIT W/O VIT A W/ FE BISGLYCINATE-FA TAB 32-1 MG***	Tier 4				
NESTABS DHA PAK	*PRENAT W/O A W/ FE BISGLYC-FA TAB 32-1 MG & OMEGA CAP PACK*	Tier 4				
NESTABS ONE CAP	*PRENAT W/O A W/FECBN-BISG-METHYLF-DHA CAP 38-1-225 MG**	Tier 4				
NIVA-PLUS TAB	*PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG***	Tier 4				
OA 1 POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3	X			
OA 2 POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
OB COMPLETE CAP ONE	*PRENATAL W/O A W/FECBN-FE ASP GLYC-FA-FISH CAP 50-1-476 MG*	Tier 4				
OB COMPLETE CAP PETITE	*PRENAT W/O A W/FECBN-FEASPGLYC-FA-OMEGA CAP 35-5-1-200 MG**	Tier 4				
OB COMPLETE TAB	*PRENATAL VIT W/ IRON CARBONYL-FA TAB 50-1.25 MG***	Tier 4				
OB COMPLETE TAB PREMIER	*PRENATAL VIT W/ FE CBN-FE ASP GLYC-FA TAB 30-20-1 MG***	Tier 4				
OB COMPLETE/ CAP DHA	*PRENAT W/ IRON CBN-FE ASP GLYC-FA-OMEGA CAP 30-10-1-200 MG*	Tier 4				
ONE VITE TAB 1MG PLUS	*PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG***	Tier 4				
ONENATAL RX TAB	*PRENATAL MULTIVITAMINS & MINERALS W/ IRON & FA TAB 1 MG***	Tier 4				
PFD 2 POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
PFD TODDLER POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3	X			
PFD TODDLER POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
PHENYL-FREE POW 2	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
PHENYL-FREE POW 2HP	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
PHENYLADE POW ESSNTL	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
PHENYLADE POW GMP	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
PHENYLADE60 POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
PHENYLADE60 POW DRNK MIX	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
PHENYLD GMP POW DHA/FIBR	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
PHYTONADIONE TAB 5MG	PHYTONADIONE TAB 5 MG	Tier 4		X		
PKU EASY POW SHAKE&GO	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
PKU START POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
PKU TRIO POW UNFLAVOR	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3	X			
PKU TRIO POW VANILLA	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3	X			

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PNV 27-CA/FE TAB /FA	*PRENATAL VIT W/ FE FUMARATE-FA TAB 60-1 MG***	Tier 2				
PNV-DHA CAP	*PRENAT W/O A W/FEFUM-METHFOL-FA-DHA CAP 27-0.6-0.4-300 MG**	Tier 5				
PNV-DHA CAP DOCUSATE	*PRENATAL W/O VIT A W/ FE FUM-DSS-FA-DHA CAP 27-1.25-300 MG*	Tier 4				
PNV-OMEGA CAP	*PRENAT W/O A W/ FE FUMARATE-METHYLFOLATE-FA-OMEGA 3 CAP***	Tier 4				
PNV-SELECT TAB	*PRENATAL VIT W/ FE FUM-METHYLFOLATE-FA TAB 27-0.6-0.4 MG***	Tier 4				
POLY-VI-FLOR CHW W/IRON	*PEDIATRIC MULTIPLE VITAMINS W/ FL-FE CHEW TAB 0.5-10 MG**	Tier 4				
POLY-VI-FLOR SUS /IRON	*PEDIATRIC MULTIPLE VITAMIN W/ FL-FE SUSP 0.25-7 MG/ML**	Tier 4				
PORTAGEN POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
PREKUNIL TAB	*NUTRITIONAL SUPPLEMENT TABS**	Tier 4				
PREMESISRX TAB	*PRENATAL W/ CALCIUM-VIT B6-VIT B12-FA-GINGER TAB 1 MG***	Tier 4				
PRENA1 PEARL CAP	*PRENAT W/OA W/FEFUM-NA FERED-FA-DHA CAP ER 30-1.4-200 MG***	Tier 4				
PRENAISSANCE CAP	*PRENATAL W/O VIT A W/ FE FUM-DSS-FA-DHA CAP 29-1.25-325 MG*	Tier 3				
PRENAISSANCE CAP PLUS	*PRENATAL W/O A W/FE CBN-DSS-FA-DHA CAP 28-1-250 MG***	Tier 3				
PRENATAL TAB 27-1MG	*PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG***	Tier 2				
PRENATAL TAB PLUS	*PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG***	Tier 2				
PRENATAL 19 CHW 29-1MG	*PRENATAL VIT W/ FE FUMARATE-FA CHEW TAB 29-1 MG***	Tier 2				
PRENATAL 19 CHW TAB	*PRENATAL VIT W/ FE FUMARATE-FA CHEW TAB 29-1 MG***	Tier 2				
PRENATAL 19 TAB 29-1MG	*PRENATAL VIT W/ DSS-FE FUMARATE-FA TAB 29-1 MG***	Tier 2				
PRENATAL-U CAP 106.5-1	*PRENATAL W/O A VIT W/ FE FUMARATE-FA CAP 106.5-1 MG***	Tier 3				
PRENATE CAP ENHANCE	*PRENAT W/O A W/FEFUM-METHFOL-FA-DHA CAP 28-0.6-0.4-400 MG**	Tier 5				
PRENATE CAP ESSENT	*PRENAT W/O A W/FEASPG-METHFOL-FA-DHA CAP 18-0.6-0.4-300 MG*	Tier 4				
PRENATE CAP PIXIE	*PRENAT W/O A W/FEASPG-METHFOL-FA-DHA CAP 10-0.6-0.4-200 MG*	Tier 4				
PRENATE CAP RESTORE	*PRENAT W/O A W/FEFUM-METHFOL-FA-DHA CAP 27-0.6-0.4-400 MG**	Tier 5				
PRENATE CHW 0.6-0.4	*PRENAT MV & MIN W/ L-METHYLFOLATE-FA CHEW TAB 0.6-0.4 MG***	Tier 4				
PRENATE TAB ELITE	*PRENATAL W/ FE ASP GLY-L METHYLFOL-FA TAB 20-0.6-0.4 MG***	Tier 4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PRENATE AM TAB 1MG	*PRENATAL W/ CALCIUM-VIT B6-VIT B12-FA-GINGER TAB 1 MG***	Tier 4				
PRENATE DHA CAP	*PRENAT W/O A W/FEASPG-METHFOL-FA-DHA CAP 18-0.6-0.4-300 MG*	Tier 4				
PRENATE MINI CAP	*PRENAT W/OA W/FECB-FEASP-METH-FA-DHA CAP 18-0.6-0.4-350 MG*	Tier 4				
PRENATVITE TAB COMPLETE	*PRENATAL MULTIVITAMINS & MINERALS W/ IRON & FA TAB 1 MG***	Tier 4				
PRENATVITE TAB PLUS	*PRENATAL MULTIVITAMINS & MINERALS W/ IRON & FA TAB 1 MG***	Tier 4				
PRENATVITE TAB RX	*PRENATAL MULTIVITAMINS & MINERALS W/IRON & FA TAB 0.8 MG***	Tier 4				
PRIMACARE CAP	*PRENAT W/O A W/FEASP-METHLF-FA-OMEG CAP 30-0.75-0.25-470MG*	Tier 4				
PROT COOKIE MIS OATRAISN	*NUTRITIONAL SUPPLEMENT MISC**	Tier 3				
PROVIDA OB CAP	*PRENATAL W/O A W/FE FUM-FE POLY-FA CAP 20-20-1.25 MG***	Tier 4				
QUFLORA PED CHW 0.25MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.25 MG***	Tier 4				
QUFLORA PED CHW 0.5MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.5 MG***	Tier 4				
QUFLORA PED CHW 1MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 1 MG***	Tier 4				
QUFLORA PED DRO 0.25MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE SOLN 0.25 MG/ML***	Tier 4				
QUFLORA PED DRO 0.5MG/ML	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE SOLN 0.5 MG/ML***	Tier 4				
RELNATE DHA CAP	*PRENATAL VIT W/ FE FUM-FA-OMEGA 3 CAP 28-1-200 MG***	Tier 4				
RENASTART POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
RENASTART POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3	X			
SCANDICAL POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3	X			
SCANDISHAKE POW VANILLA	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3	X			
SE-NATAL 19 CHW	*PRENATAL VIT W/ FE FUMARATE-FA CHEW TAB 29-1 MG***	Tier 4				
SE-NATAL 19 TAB	*PRENATAL VIT W/ DSS-FE FUMARATE-FA TAB 29-1 MG***	Tier 4				
SELECT-OB CHW	*PRENATAL VIT W/ FE POLYSAC CMLX-FA CHEW TAB 29-1 MG***	Tier 5				
SELECT-OB CHW	*PRENAT W/ FEPOLYCMLX-METHYLFOL-FA CHEW TAB 29-0.6-0.4 MG**	Tier 4				
SELECT-OB+ PAK DHA	*PRENATAL MV W/FE POLY-FA CHW 29-1 MG & DHA CAP 250 MG PAK *	Tier 4				
SERACAL POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3	X			
TARON-C DHA CAP	*PRENATAL W/FE FUM-FE POLY -FA-OMEGA 3 CAP 35-1 MG***	Tier 5				
THRIVITE RX TAB 29-1MG	*PRENATAL VIT W/ IRON CARBONYL-FA TAB 29-1 MG***	Tier 4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
TRI-VI-FLORO SUS 0.25/ML	*PED VIT ACD & L-METHYLFOLATE W/ FLUORIDE SUSP 0.25 MG/ML***	Tier 4				
TRI-VI-FLORO SUS 0.5MG/ML	*PED VIT ACD & L-METHYLFOLATE W/ FLUORIDE SUSP 0.5 MG/ML***	Tier 4				
TRICARE TAB PRENATAL	*PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG***	Tier 4				
TRINATAL RX TAB 1	*PRENATAL VIT W/ FE FUMARATE-FA TAB 60-1 MG***	Tier 4				
TRINATE TAB	*PRENATAL VIT W/ FE FUMARATE-FA TAB 28-1 MG***	Tier 4				
TRISTART DHA CAP	*PRENAT W/O A W/FECBN-METHYLF-FA-DHA CAP 31-0.6-0.4-200 MG**	Tier 4				
TYROS 1 POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3	X			
TYROS 2 POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
UCD TRIO POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3	X			
VITAFOL CAP ULTRA	*PRENAT W/FE POLY-METHYLFOL-FA-DHA CAP 29-0.6-0.4-200 MG***	Tier 4				
VITAFOL CHW GUMMIES	*PRENAT VIT W/ FE PHOS-FA-OMEGA CHEW TAB 3.33-0.333-34.8 MG*	Tier 4				
VITAFOL FE+ CAP	*PRENAT W/FE POLY-METHYLFOL-FA-DHA CAP 90-0.6-0.4-200 MG***	Tier 4				
VITAFOL STRP MIS 1MG	*PRENATAL W/ B6-B12-CHOLECALCIFEROL-FOLIC ACID FILM 1 MG**	Tier 4				
VITAFOL-NANO TAB	*PRENATAL W/O A W/ FEFUM-L METHYLFOL-FA TAB 18-0.6-0.4 MG***	Tier 4				
VITAFOL-OB PAK +DHA	*PRENATAL MV W/FE FUM-FA TAB 65-1 MG & DHA CAP 250 MG PACK *	Tier 4				
VITAFOL-OB TAB 65-1MG	*PRENATAL VIT W/ FE FUMARATE-FA TAB 65-1 MG***	Tier 4				
VITAFOL-ONE CAP	*PRENATAL MV W/ FE POLYSAC CMLPX-FA-DHA CAP 29-1-200 MG***	Tier 4				
VITAMED MD CAP ONE RX	*PRENAT W/O A W/FEFUM-METHFOL-FA-DHA CAP 30-0.6-0.4-200 MG**	Tier 5				
VITAMIN B-12 TAB 1000MCG	CYANOCOBALAMIN TAB 1000 MCG	Tier 2				
VITAMIN B12 TAB 100MCG	CYANOCOBALAMIN TAB 100 MCG	Tier 2				
VITAMIN D CAP 1.25MG	ERGOCALCIFEROL CAP 1.25 MG (50000 UNIT)	Tier 2				
VITAMIN D CAP 50000	ERGOCALCIFEROL CAP 1.25 MG (50000 UNIT)	Tier 2				
VITAMIN D CAP 50000UNT	ERGOCALCIFEROL CAP 1.25 MG (50000 UNIT)	Tier 2				
VITAPEARL CAP	*PRENAT W/OA W/FEFUM-NA FERED-FA-DHA CAP ER 30-1.4-200 MG***	Tier 4				
VITATHELY TAB	*PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG***	Tier 4				
VIVA DHA CAP	*PRENATAL VIT W/ FE FUM-FA-OMEGA 3 CAP 28-1-200 MG***	Tier 4				
VIVONEX POW PEDIATRI	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3	X			
WESCAP-C DHA CAP	*PRENATAL W/FE FUM-FE POLY -FA-OMEGA 3 CAP 53.5-38-1 MG***	Tier 5				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
WESCAP-PN CAP DHA	*PRENAT W/O A W/FEFUM-METHFOL-FA-DHA CAP 27-0.6-0.4-300 MG**	Tier 5				
WESNATAL DHA PAK COMPLETE	*PRENAT-FE BIS-FE PROT SUCC-FA-CA TAB & OMEGA 3 CAP 200 PK**	Tier 3				
WESNATE DHA CAP	*PRENATAL VIT W/ FE FUM-FA-OMEGA 3 CAP 28-1-200 MG***	Tier 4				
WESTGEL DHA CAP	*PRENAT W/O A W/FECBN-METHYLF-FA-DHA CAP 31-0.6-0.4-200 MG**	Tier 4				
WHEAT GERM OIL	*WHEAT GERM - OIL***	Tier 2				
WND 1 POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3	X			
WND 2 POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 3				
Vitamins - Vitamin, Mineral and Body Fluid Deficiency Drugs						
CYANOCOBAL POW	CYANOCOBALAMIN (BULK) POWDER	Tier 4				
CYANOCOBALAM CRY	CYANOCOBALAMIN (BULK) CRYSTALS	Tier 4				
CYANOCOBALAM SOL 2000MCG	CYANOCOBALAMIN INJ 2000 MCG/ML	Tier 4				

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ACACIA SYRUP.....	157	ACETAZOLAMIDE TAB 125 MG.....	178	ADALIMUMAB-ADAZ SOLN AUTO- INJECTOR 80 MG/0.8ML.....	131
ACALABRUTINIB MALEATE TAB 100 MG.....	166	ACETAZOLAMIDE TAB 250 MG.....	178	ADALIMUMAB-ADAZ SOLN PREFILLED SYRINGE 10 MG/0.1ML.....	131
ACAMPRO CAL TAB 333MG.....	9	ACETAZOLAMID TAB 125MG.....	178	ADALIMUMAB-ADAZ SOLN PREFILLED SYRINGE 20 MG/0.2ML.....	131
ACAMPROSATE CALCIUM TAB DELAYED RELEASE 333 MG.....	9	ACETAZOLAMID TAB 250MG.....	178	ADALIMUMAB-ADAZ SOLN PREFILLED SYRINGE 40 MG/0.4ML.....	131
ACARBOSE TAB 25 MG.....	28	ACETIC ACID OTIC SOLN 2%.....	186	ADALIMUMAB-ATTO SOLN AUTO- INJECTOR 40 MG/0.4ML.....	131
ACARBOSE TAB 25MG.....	28	ACETIC ACID-OXYQUINOLINE VAGINAL GEL 0.9-0.025%.....	23	ADALIMUMAB-ATTO SOLN AUTO- INJECTOR 80 MG/0.8ML.....	131
		ACETIC ACID SOL 2% OTIC.....	186	ADALIMUMAB-ATTO SOLN PREFILLED SYRINGE 20 MG/0.2ML.....	131
		ACETOHYDROXAMIC ACID TAB 250 MG.....	111	ADALIMUMAB-ATTO SOLN PREFILLED SYRINGE 40 MG/0.4ML.....	131
		ACETONE (URINE) TEST STRIP.....	75	ADAPAL/BEN P GEL 0.1-2.5%.....	68
		ACETONE (URINE) TEST STRIP.....	77		
		ACETONE (URINE) TEST STRIP.....	77		
		ACETYLCYSTEINE CAP 600 MG.....	215		
		ACETYLCYSTEINE INHAL SOLN 10%.....	193		
		ACETYLCYSTEINE INHAL SOLN 20%.....	193		
		ACETYLCYST SOL 10%.....	193		
		ACETYLCYST SOL 20%.....	193		





ALOGLIPTIN-PIOGLITAZONE TAB 25-45 MG.....	28	ALPRAZOLAM TAB 0.5MG.....	47	ALTUVIIIO INJ 1000UNIT.....	116
ALOGLIPTIN TAB 6.25MG.....	29	ALPRAZOLAM TAB 0.5MG ER.....	47	ALTUVIIIO INJ 2000UNIT.....	116
ALOGLIPTIN TAB 12.5MG.....	29	ALPRAZOLAM TAB 0.5MG OD.....	47	ALTUVIIIO INJ 3000UNIT.....	117
ALOGLIPTIN TAB 25MG.....	29	ALPRAZOLAM TAB 0.5MG XR.....	47	ALTUVIIIO INJ 4000UNIT.....	117
ALOGLIPTIN/ TAB METFORM.....	29	ALPRAZOLAM TAB 0.25 MG.....	47	ALUMINUM CHLORIDE SOLN 20%.....	70
ALOGLIPTIN/ TAB METFORM.....	29	ALPRAZOLAM TAB 0.25MG.....	47	ALUNBRIG PAK.....	166
ALOG/PIOGLIT TAB 12.5-30.....	28	ALPRAZOLAM TAB 0.25 ODT.....	47	ALUNBRIG TAB 30MG.....	166
ALOG/PIOGLIT TAB 25-15MG.....	28	ALPRAZOLAM TAB 1 MG.....	47	ALUNBRIG TAB 90MG.....	166
ALOG/PIOGLIT TAB 25-30MG.....	28	ALPRAZOLAM TAB 1MG.....	47	ALUNBRIG TAB 180MG.....	166
ALOG/PIOGLIT TAB 25-45MG.....	28	ALPRAZOLAM TAB 1MG ER.....	47	ALVAIZ TAB 9MG.....	52
ALOMIDE SOL 0.1% OP.....	176	ALPRAZOLAM TAB 1MG ODT.....	47	ALVAIZ TAB 18MG.....	52
ALORA DIS 0.1MG.....	95	ALPRAZOLAM TAB 1MG XR.....	47	ALVAIZ TAB 36MG.....	52
ALORA DIS 0.025MG.....	94	ALPRAZOLAM TAB 2 MG.....	47	ALVAIZ TAB 54MG.....	52
ALORA DIS 0.075MG.....	95	ALPRAZOLAM TAB 2MG.....	47	ALVIMOPAN CAP 12 MG.....	107
ALOSETRON HCL TAB 0.5 MG (BASE EQUIV).....	137	ALPRAZOLAM TAB 2MG ER.....	47	ALVIMOPAN CAP 12 MG.....	108
ALOSETRON HCL TAB 1 MG (BASE EQUIV).....	137	ALPRAZOLAM TAB 2MG ODT.....	48	ALVIMOPAN CAP 12MG.....	107
ALOSETRON TAB 0.5MG.....	137	ALPRAZOLAM TAB 2MG XR.....	48	ALYACEN TAB 1/35.....	95
ALOSETRON TAB 1MG.....	137	ALPRAZOLAM TAB 3MG ER.....	48	ALYACEN TAB 7/7/7.....	95
ALPAWASH OIN.....	143	ALPRAZOLAM TAB 3MG XR.....	48	ALYFTREK TAB.....	143
ALPELISIB (PROS) ORAL GRANULES PACKET 50 MG.....	134	ALPRAZOLAM TAB 3MG XR.....	48	ALYFTREK TAB 4-20-50.....	143
ALPELISIB (PROS) PAK 250 MG DAILY DOSE (200 MG & 50 MG TABS).....	134	ALPRAZOLAM TAB ER 24HR 0.5 MG.....	47	AMABELZ TAB 0.5-0.1.....	95
ALPELISIB (PROS) TAB THERAPY PACK 50 MG DAILY DOSE.....	135	ALPRAZOLAM TAB ER 24HR 0.5 MG.....	47	AMABELZ TAB 1-0.5MG.....	95
ALPELISIB (PROS) TAB THERAPY PACK 125 MG DAILY DOSE.....	134	ALPRAZOLAM TAB ER 24HR 1 MG.....	47	AMANTADINE CAP 100MG.....	40
ALPELISIB TAB PACK 250 MG DAILY DOSE (200 MG & 50 MG TABS).....	39	ALPRAZOLAM TAB ER 24HR 1 MG.....	47	AMANTADINE HCL CAP 100 MG.....	40
ALPELISIB TAB PACK 300 MG DAILY DOSE (2X150 MG TAB).....	39	ALPRAZOLAM TAB ER 24HR 2 MG.....	47	AMANTADINE HCL SOLN 50 MG/5ML.....	40
ALPELISIB TAB THERAPY PACK 200 MG DAILY DOSE.....	39	ALPRAZOLAM TAB ER 24HR 2 MG.....	48	AMANTADINE HCL SOLN 50 MG/5ML.....	40
ALPHAGAN P SOL 0.1% OP.....	178	ALPRAZOLAM TAB ER 24HR 3 MG.....	48	AMANTADINE HCL TAB 100 MG.....	40
ALPHAGAN P SOL 0.15% OP.....	178	ALPRAZOLAM TAB ER 24HR 3 MG.....	48	AMANTADINE SOL 50MG/5ML.....	40
ALPHANATE INJ 250 UNIT.....	116	ALPROLIX INJ 250UNIT.....	116	AMANTADINE SOL 100/10ML.....	40
ALPHANATE INJ 500 UNIT.....	116	ALPROLIX INJ 500UNIT.....	116	AMANTADINE TAB 100MG.....	40
ALPHANATE INJ 1000UNIT.....	116	ALPROLIX INJ 1000UNIT.....	116	AMBRISANTAN TAB 5 MG.....	191
ALPHANATE INJ 1500UNIT.....	116	ALPROLIX INJ 2000UNIT.....	116	AMBRISANTAN TAB 5MG.....	191
ALPHANATE INJ 2000UNIT.....	116	ALPROLIX INJ 3000UNIT.....	116	AMBRISANTAN TAB 10 MG.....	191
ALPHANINE SD INJ 500UNIT.....	116	ALPROLIX INJ 4000UNIT.....	116	AMBRISANTAN TAB 10MG.....	191
ALPHANINE SD INJ 1000UNIT.....	116	ALPROSTADIL FOR INJ 20 MCG.....	111	AMCINONIDE CRE 0.1%.....	121
ALPHANINE SD INJ 1500UNIT.....	116	ALPROSTADIL FOR INJ 40 MCG.....	111	AMCINONIDE CREAM 0.1%.....	121
ALPRAZOLAM CON 1 MG/ML.....	47	ALPROSTADIL FOR INJ KIT 10 MCG.....	111	AMCINONIDE LOT 0.1%.....	121
ALPRAZOLAM CONC 1 MG/ML.....	47	ALPROSTADIL FOR INJ KIT 10 MCG.....	111	AMCINONIDE LOTION 0.1%.....	121
ALPRAZOLAM ORALLY DISINTEGRATING TAB 0.5 MG.....	47	ALPROSTADIL FOR INJ KIT 20 MCG.....	111	AMCINONIDE OIN 0.1%.....	121
ALPRAZOLAM ORALLY DISINTEGRATING TAB 0.25 MG.....	47	ALPROSTADIL FOR INJ KIT 20 MCG.....	111	AMCINONIDE OINT 0.1%.....	121
ALPRAZOLAM ORALLY DISINTEGRATING TAB 1 MG.....	47	ALPROSTADIL FOR INJ KIT 40 MCG.....	111	AMELUZ GEL 10%.....	68
ALPRAZOLAM ORALLY DISINTEGRATING TAB 2 MG.....	48	ALPROSTADIL URETHRAL PELLETT 250 MCG.....	111	AMETHIA TAB.....	95
ALPRAZOLAM TAB 0.5 MG.....	47	ALPROSTADIL URETHRAL PELLETT 500 MCG.....	111	AMETHYST TAB 90-20MCG.....	95
		ALPROSTADIL URETHRAL PELLETT 1000 MCG.....	111	AMIFAMPRIDINE PHOSPHATE TAB 10 MG (BASE EQUIVALENT).....	149
		ALREX SUS 0.2%.....	176	AMIKACIN SULFATE LIPOSOME INHAL SUSP 590 MG/8.4ML (BASE EQ).....	11
		ALTABAX OIN 1%.....	22	AMILOR/HCTZ TAB 5-50.....	60
		ALTACAIN SOL 0.5% OP.....	175	AMILORIDE HCL TAB 5 MG.....	81
		ALTAFRIN SOL 2.5% OP.....	175	AMILORIDE & HYDROCHLOROTHIAZIDE TAB 5-50 MG.....	60
		ALTAFRIN SOL 10% OP.....	175	AMILORIDE TAB 5MG.....	81
		ALTAVERA TAB.....	95	*AMINO ACIDS ORAL LIQUID***.....	150
		ALTUVIIIO INJ 250 UNIT.....	116	*AMINO ACIDS ORAL LIQUID***.....	154
		ALTUVIIIO INJ 250UNIT.....	116	*AMINO ACIDS ORAL LIQUID***.....	154
		ALTUVIIIO INJ 500UNIT.....	117		

*AMINO ACIDS ORAL LIQUID***	154	AMITRIPTYLIN TAB 150MG	208	AMOXAPINE TAB 150 MG	208
*AMINO ACIDS ORAL LIQUID***	154	AMJEVITA INJ 20/0.2ML	131	AMOXAPINE TAB 150MG	208
*AMINO ACIDS ORAL LIQUID***	154	AMJEVITA INJ 40/0.4ML	131	AMOXICILLIN CAP 250MG	51
*AMINO ACIDS ORAL LIQUID***	154	AMJEVITA INJ 40/0.4ML	131	AMOXICILLIN CAP 500MG	51
*AMINO ACIDS ORAL LIQUID***	154	AMJEVITA INJ 80/0.8ML	131	AMOXICILLIN CAP 500 MG & VONOPRAZAN TAB 20 MG THERAPY PACK	108
*AMINO ACIDS ORAL LIQUID***	159	AMLOD/BENAZP CAP 2.5-10MG	60	AMOXICILLIN CAP & CLARITHROMYCIN TAB & VONOPRAZAN TAB PACK	108
*AMINO ACIDS ORAL LIQUID***	159	AMLOD/BENAZP CAP 5-10MG	60	AMOXICILLIN CAP-CLARITHRO TAB W/ OMEPAZ CAP DR THERAPY PACK	108
*AMINO ACIDS ORAL LIQUID***	161	AMLOD/BENAZP CAP 5-20MG	60	AMOXICILLIN CHW 125MG	51
*AMINO ACIDS ORAL LIQUID***	161	AMLOD/BENAZP CAP 5-40MG	60	AMOXICILLIN CHW 250MG	51
*AMINO ACIDS ORAL LIQUID***	161	AMLOD/BENAZP CAP 10-20MG	60	AMOXICILLIN & K CLAVULANATE CHEW TAB 200-28.5 MG	51
*AMINO ACIDS PACK***	158	AMLOD/BENAZP CAP 10-40MG	60	AMOXICILLIN & K CLAVULANATE CHEW TAB 400-57 MG	51
*AMINO ACIDS PACK***	158	AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 2.5-10 MG	60	AMOXICILLIN & K CLAVULANATE FOR SUSP 200-28.5 MG/5ML	51
*AMINO ACIDS PACK***	165	AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 5-10 MG	60	AMOXICILLIN & K CLAVULANATE FOR SUSP 250-62.5 MG/5ML	51
*AMINO ACIDS PACK***	165	AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 5-20 MG	60	AMOXICILLIN & K CLAVULANATE FOR SUSP 250-62.5 MG/5ML	51
*AMINO ACIDS-PROTEIN HYDROLYSATE LIQUID***	91	AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 5-40 MG	60	AMOXICILLIN & K CLAVULANATE FOR SUSP 400-57 MG/5ML	51
*AMINO ACIDS-PROTEIN HYDROLYSATE LIQUID***	91	AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 10-20 MG	60	AMOXICILLIN & K CLAVULANATE FOR SUSP 400-57 MG/5ML	51
*AMINO ACIDS-PROTEIN HYDROLYSATE LIQUID***	91	AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 10-40 MG	60	AMOXICILLIN & K CLAVULANATE FOR SUSP 600-42.9 MG/5ML	51
*AMINO ACIDS-PROTEIN HYDROLYSATE LIQUID***	91	AMLODIPINE BESYLATE ORAL SOLN 1 MG/ML (BASE EQUIVALENT)	58	AMOXICILLIN & K CLAVULANATE TAB 250-125 MG	51
*AMINO ACIDS TAB***	143	AMLODIPINE BESYLATE TAB 2.5 MG (BASE EQUIVALENT)	56	AMOXICILLIN & K CLAVULANATE TAB 500-125 MG	51
*AMINO ACIDS TAB***	159	AMLODIPINE BESYLATE TAB 5 MG (BASE EQUIVALENT)	56	AMOXICILLIN & K CLAVULANATE TAB 875-125 MG	51
AMINO ACTION TAB	143	AMLODIPINE BESYLATE TAB 10 MG (BASE EQUIVALENT)	56	AMOXICILLIN SUS 125/5ML	51
AMINOCAPR AC TAB 500MG	117	AMLODIPINE BESYLATE-TAB 5-160 MG	60	AMOXICILLIN SUS 200/5ML	51
AMINOCAPR AC TAB 1000MG	117	AMLODIPINE BESYLATE-TAB 5-320 MG	60	AMOXICILLIN SUS 250/5ML	52
AMINOCAPROIC ACID ORAL SOLN 0.25 GM/ML	117	AMLODIPINE BESYLATE-TAB 10-160 MG	60	AMOXICILLIN SUS 400/5ML	52
AMINOCAPROIC ACID TAB 500 MG	117	AMLODIPINE BESYLATE-TAB 10-320 MG	60	AMOXICILLIN TAB 500MG	52
AMINOCAPROIC ACID TAB 1000 MG	117	AMLODIPINE BESYLATE-TAB 10-320 MG	60	AMOXICILLIN TAB 875MG	52
AMINOCAPROIC SOL 0.25/ML	117	AMLODIPINE BESYLATE-TAB 10-320 MG	60	AMOXICILLIN (TRIHYDRATE) CAP 250 MG	51
AMINOLEVULINIC ACID HCL GEL 10%	68	AMLODIPINE BESYLATE-TAB 10-320 MG	60	AMOXICILLIN (TRIHYDRATE) CAP 500 MG	51
AMIODARONE HCL TAB 100 MG	21	AMLODIPINE BESYLATE-TAB 10-320 MG	60	AMOXICILLIN (TRIHYDRATE) CHEW TAB 125 MG	51
AMIODARONE HCL TAB 100 MG	22	AMLODIPINE BESYLATE-TAB 10-320 MG	60	AMOXICILLIN (TRIHYDRATE) CHEW TAB 250 MG	51
AMIODARONE HCL TAB 200 MG	21	AMLODIPINE BESYLATE-TAB 10-320 MG	60	AMOXICILLIN (TRIHYDRATE) FOR SUSP 125 MG/5ML	51
AMIODARONE HCL TAB 200 MG	22	AMLODIPINE BESYLATE-TAB 10-320 MG	60	AMOXICILLIN (TRIHYDRATE) FOR SUSP 200 MG/5ML	51
AMIODARONE HCL TAB 400 MG	21	AMLODIPINE BESYLATE-TAB 10-320 MG	60	AMOXICILLIN (TRIHYDRATE) FOR SUSP 250 MG/5ML	52
AMIODARONE HCL TAB 400 MG	22	AMLODIPINE BESYLATE-TAB 10-320 MG	60	AMOXICILLIN (TRIHYDRATE) FOR SUSP 400 MG/5ML	52
AMIODARONE TAB 100MG	21	AMLODIPINE BESYLATE-TAB 10-320 MG	60	AMOXICILLIN (TRIHYDRATE) TAB 500 MG	52
AMIODARONE TAB 200MG	21	AMLODIPINE BESYLATE-TAB 10-320 MG	60	AMOXICILLIN (TRIHYDRATE) TAB 875 MG	52
AMIODARONE TAB 400MG	21	AMLODIPINE BESYLATE-TAB 10-320 MG	60	AMOX/K CLAV CHW 200MG	51
AMITRIPTYLINE HCL TAB 10 MG	208	AMLODIPINE BESYLATE-TAB 10-320 MG	60	AMOX/K CLAV CHW 400MG	51
AMITRIPTYLINE HCL TAB 25 MG	208	AMLODIPINE BESYLATE-TAB 10-320 MG	60	AMOX/K CLAV SUS 200/5ML	51
AMITRIPTYLINE HCL TAB 50 MG	208	AMLODIPINE BESYLATE-TAB 10-320 MG	60	AMOX/K CLAV SUS 250/5ML	51
AMITRIPTYLINE HCL TAB 75 MG	208	AMLODIPINE BESYLATE-TAB 10-320 MG	60		
AMITRIPTYLINE HCL TAB 100 MG	208	AMLODIPINE BESYLATE-TAB 10-320 MG	60		
AMITRIPTYLINE HCL TAB 150 MG	208	AMLODIPINE BESYLATE-TAB 10-320 MG	60		
AMITRIPTYLIN TAB 10MG	208	AMLODIPINE BESYLATE-TAB 10-320 MG	60		
AMITRIPTYLIN TAB 25MG	208	AMLODIPINE BESYLATE-TAB 10-320 MG	60		
AMITRIPTYLIN TAB 50MG	208	AMLODIPINE BESYLATE-TAB 10-320 MG	60		
AMITRIPTYLIN TAB 75MG	208	AMLODIPINE BESYLATE-TAB 10-320 MG	60		
AMITRIPTYLIN TAB 100MG	208	AMLODIPINE BESYLATE-TAB 10-320 MG	60		

AMOX/K CLAV SUS 400/5ML	51	AMPHET/DEXTR TAB 12.5MG.....	44	ANTIHEMOPHIL FACT RCMB(BDD-	
AMOX/K CLAV SUS 600/5ML	51	AMPHET/DEXTR TAB 15MG	44	RFVIII,SIM) FOR INJ KIT 2000 UNIT	120
AMOX/K CLAV TAB 250-125	51	AMPHET/DEXTR TAB 20MG	44	ANTIHEMOPHIL FACT RCMB(BDD-	
AMOX/K CLAV TAB 500-125.....	51	AMPHET/DEXTR TAB 30MG	44	RFVIII,SIM) FOR INJ KIT 2500 UNIT.....	120
AMOX/K CLAV TAB 875-125	51	AMPICILLIN CAP 500 MG.....	52	ANTIHEMOPHIL FACT RCMB(BDD-	
AMPHETAMINE-DEXTROAMPHETAMINE		AMPICILLIN CAP 500MG	52	RFVIII,SIM) FOR INJ KIT 3000 UNIT	120
3-BEAD CAP ER 24HR 12.5 MG.....	43	ANAGRELIDE CAP 0.5MG	52	ANTIHEMOPHIL FACT RCMB(BDD-	
AMPHETAMINE-DEXTROAMPHETAMINE		ANAGRELIDE CAP 1MG	52	RFVIII,SIM) FOR INJ KIT 4000 UNIT	120
3-BEAD CAP ER 24HR 25 MG	44	ANAGRELIDE HCL CAP 0.5 MG.....	52	ANTIHEMOPHILIC FACTOR (HUMAN)	
AMPHETAMINE-DEXTROAMPHETAMINE		ANAGRELIDE HCL CAP 1 MG.....	52	FOR INJ 250 UNIT.....	117
3-BEAD CAP ER 24HR 37.5 MG.....	44	ANAKINRA SUBCUTANEOUS SOLN		ANTIHEMOPHILIC FACTOR (HUMAN)	
AMPHETAMINE-DEXTROAMPHETAMINE		PREFILLED SYRINGE 100 MG/0.67ML	132	FOR INJ 250 UNIT.....	118
3-BEAD CAP ER 24HR 50 MG	44	ANALPRAM HC CRE 1-1%	113	ANTIHEMOPHILIC FACTOR (HUMAN)	
AMPHETAMINE-DEXTROAMPHETAMINE		ANALPRAM-HC CRE 1-1%.....	113	FOR INJ 500 UNIT	118
CAP ER 24HR 5 MG	44	ANALPRAM HC CRE 2.5-1%.....	68	ANTIHEMOPHILIC FACTOR (HUMAN)	
AMPHETAMINE-DEXTROAMPHETAMINE		ANALPRAM HC LOT 2.5%	113	FOR INJ 500 UNIT	118
CAP ER 24HR 10 MG	43	ANALPRAM-HC LOT 2.5%	113	ANTIHEMOPHILIC FACTOR (HUMAN)	
AMPHETAMINE-DEXTROAMPHETAMINE		ANALPRM SNGL CRE HC 2.5-1.....	68	FOR INJ 1000 UNIT	117
CAP ER 24HR 15 MG	43	ANASPAZ TAB 0.125MG	41	ANTIHEMOPHILIC FACTOR (HUMAN)	
AMPHETAMINE-DEXTROAMPHETAMINE		ANASTROZOLE (BULK) POWDER.....	143	FOR INJ 1000 UNIT	118
CAP ER 24HR 20 MG.....	43	ANASTROZOLE POW	143	ANTIHEMOPHILIC FACTOR (HUMAN)	
AMPHETAMINE-DEXTROAMPHETAMINE		ANASTROZOLE TAB 1 MG.....	43	FOR INJ 1000 UNIT	118
CAP ER 24HR 25 MG	44	ANASTROZOLE TAB 1MG	43	ANTIHEMOPHILIC FACTOR (HUMAN)	
AMPHETAMINE-DEXTROAMPHETAMINE		ANCOBON CAP 250MG	33	FOR INJ 1700 UNIT	117
CAP ER 24HR 30 MG.....	44	ANCOBON CAP 500MG	33	ANTIHEMOPHILIC FACTOR RCMB (BDD-	
AMPHETAMINE-DEXTROAMPHETAMINE		ANDEMBRY INJ 200/1.2.....	143	RFVIII,SIM) FOR INJ 250 UNIT	119
TAB 5 MG.....	44	ANGELIQ TAB 0.5-1MG.....	95	ANTIHEMOPHILIC FACTOR RCMB (BDD-	
AMPHETAMINE-DEXTROAMPHETAMINE		ANGELIQ TAB 0.25-0.5.....	95	RFVIII,SIM) FOR INJ 500 UNIT	119
TAB 7.5 MG	44	ANHYDROUS GEL BASE.....	143	ANTIHEMOPHILIC FACTOR RECOMB	
AMPHETAMINE-DEXTROAMPHETAMINE		ANNOVERA MIS.....	95	PEGYLATED FOR INJ 250 UNIT	115
TAB 10 MG.....	44	ANORO ELLIPT AER 62.5-25.....	193	ANTIHEMOPHILIC FACTOR RECOMB	
AMPHETAMINE-DEXTROAMPHETAMINE		*ANTICOAGULANT CITRATE DEXTROSE		PEGYLATED FOR INJ 500 UNIT	115
TAB 12.5 MG.....	44	SOLUTION A**	26	ANTIHEMOPHILIC FACTOR RECOMB	
AMPHETAMINE-DEXTROAMPHETAMINE		ANTICOAGULANT SODIUM CITRATE		PEGYLATED FOR INJ 750 UNIT	116
TAB 15 MG.....	44	CONCENTRATE 46.7%.....	26	ANTIHEMOPHILIC FACTOR RECOMB	
AMPHETAMINE-DEXTROAMPHETAMINE		ANTICOAGULANT SODIUM CITRATE		PEGYLATED FOR INJ 1000 UNIT	115
TAB 20 MG	44	SOLN 4%.....	25	ANTIHEMOPHILIC FACTOR RECOMB	
AMPHETAMINE-DEXTROAMPHETAMINE		ANTICOAGULNT SOL SOD CITR	25	PEGYLATED FOR INJ 1500 UNIT	115
TAB 30 MG	44	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII		ANTIHEMOPHILIC FACTOR RECOMB	
AMPHETAMINE SULFATE TAB 5 MG	44	PEG-AUCL) FOR INJ 500 UNIT	118	PEGYLATED FOR INJ 2000 UNIT.....	115
AMPHETAMINE SULFATE TAB 10 MG	44	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII		ANTIHEMOPHILIC FACTOR RECOMB	
AMPHETAMINE TAB 5MG.....	44	PEG-AUCL)FOR INJ 1000 UNIT	118	PEGYLATED FOR INJ 3000 UNIT.....	115
AMPHETAMINE TAB 10MG	44	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII		ANTIHEMOPHILIC FACTOR (RECOMB	
AMPHET/DEXTR CAP 5MG ER.....	44	PEG-AUCL)FOR INJ 2000 UNIT	118	PORC) RPFVIII FOR INJ 500 UNIT.....	120
AMPHET/DEXTR CAP 10MG ER.....	43	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII		ANTIHEMOPHILIC FACTOR RECOMB	
AMPHET/DEXTR CAP 12.5 ER.....	43	PEG-AUCL)FOR INJ 3000 UNIT	118	(RAHF-PFM) FOR INJ 250 UNIT	115
AMPHET/DEXTR CAP 15MG ER.....	43	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII		ANTIHEMOPHILIC FACTOR RECOMB	
AMPHET/DEXTR CAP 20MG ER.....	43	PEG-AUCL)FOR INJ 4000 UNIT	118	(RAHF-PFM) FOR INJ 250 UNIT	119
AMPHET/DEXTR CAP 25MG ER.....	44	ANTIHEMOPHIL FACT RCMB (BDD-		ANTIHEMOPHILIC FACTOR RECOMB	
AMPHET/DEXTR CAP 25MG ER.....	44	RFVIII,SIM) FOR INJ KIT 250 UNIT	120	(RAHF-PFM) FOR INJ 500 UNIT.....	115
AMPHET/DEXTR CAP 30MG ER.....	44	ANTIHEMOPHIL FACT RCMB (BDD-		ANTIHEMOPHILIC FACTOR RECOMB	
AMPHET/DEXTR CAP 37.5 ER.....	44	RFVIII,SIM) FOR INJ KIT 500 UNIT	120	(RAHF-PFM) FOR INJ 500 UNIT.....	119
AMPHET/DEXTR CAP 50MG ER.....	44	ANTIHEMOPHIL FACT RCMB(BDD-		ANTIHEMOPHILIC FACTOR RECOMB	
AMPHET/DEXTR TAB 5MG.....	44	RFVIII,SIM) FOR INJ KIT 1000 UNIT.....	119	(RAHF-PFM) FOR INJ 1000 UNIT.....	115
AMPHET/DEXTR TAB 7.5MG	44	ANTIHEMOPHIL FACT RCMB(BDD-		ANTIHEMOPHILIC FACTOR RECOMB	
AMPHET/DEXTR TAB 10MG	44	RFVIII,SIM) FOR INJ KIT 1500 UNIT	119	(RAHF-PFM) FOR INJ 1000 UNIT.....	118

ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 1500 UNIT.....	115	ANTIHEMOPHILIC FACT RCMB (BDD-RFVIII,SIM) FOR INJ 2000 UNIT.....	119	ANZEMET TAB 50MG.....	93
ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 2000 UNIT.....	115	ANTIHEMOPHILIC FACT RCMB (BDD-RFVIII,SIM) FOR INJ 2500 UNIT.....	119	APALUTAMIDE TAB 60 MG.....	20
ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 2000 UNIT.....	119	ANTIHEMOPHILIC FACT RCMB (BDD-RFVIII,SIM) FOR INJ 3000 UNIT.....	119	APALUTAMIDE TAB 240 MG.....	20
ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 3000 UNIT.....	115	ANTIHEMOPHILIC FACT RCMB (BDD-RFVIII,SIM) FOR INJ 4000 UNIT.....	119	APAP/CODEINE SOL 120-12/5.....	182
ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 3000 UNIT.....	119	ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 250 UNIT.....	119	APAP/CODEINE TAB 300-15MG.....	182
ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 4000 UNIT.....	115	ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 500 UNIT.....	119	APAP/CODEINE TAB 300-30MG.....	182
ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ 220-400 UNIT.....	120	ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 1000 UNIT.....	119	APAP/CODEINE TAB 300-60MG.....	182
ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ 401-800 UNIT.....	120	ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 1500 UNIT.....	119	APEXICON E CRE 0.05%.....	121
ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ 801-1240 UNIT.....	120	ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 2000 UNIT.....	119	APIXABAN CAP SPRINKLE 0.15 MG.....	25
ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ 1241-1800 UNIT.....	120	ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 3000 UNIT.....	119	APIXABAN TAB 2.5 MG.....	25
ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ 1801-2400 UNIT.....	120	ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 250 UNIT.....	116	APIXABAN TAB 5 MG.....	25
ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ KIT 250 UNIT.....	118	ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 250 UNIT.....	116	APIXABAN TAB FOR ORAL SUSP 0.5 MG.....	25
ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ KIT 500 UNIT.....	118	ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 500 UNIT.....	117	APIXABAN TAB FOR ORAL SUSP PACK 3 X 0.5 MG (1.5 MG).....	25
ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ KIT 1000 UNIT.....	118	ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 1000 UNIT.....	116	APIXABAN TAB FOR ORAL SUSP PACK 4 X 0.5 MG (2 MG).....	25
ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ KIT 2000 UNIT.....	118	ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 2000 UNIT.....	116	APIXABAN TAB STARTER PACK 5 MG.....	25
ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ KIT 3000 UNIT.....	118	ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 3000 UNIT.....	117	APRACLONIDINE HCL OPTH SOLN 0.5% (BASE EQUIVALENT).....	178
ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 250-600 UNIT.....	118	ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 4000 UNIT.....	117	APRACLONIDINE HCL OPTH SOLN 1% (BASE EQUIVALENT).....	179
ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 250 UNIT.....	116	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 250 UNIT.....	116	APRACLONIDIN SOL 0.5% OP.....	178
ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 500-500 UNIT KIT.....	121	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 500 UNIT.....	116	APREMILAST TAB 20 MG.....	135
ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 500-1200 UNIT.....	118	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 1000 UNIT.....	116	APREMILAST TAB 30 MG.....	135
ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 500 UNIT.....	116	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 1500 UNIT.....	116	APREMILAST TAB STARTER THERAPY PACK 4 X 10 MG & 51 X 20 MG.....	135
ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 1000-1000 UNIT KIT.....	121	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 2000 UNIT.....	116	APREMILAST TAB STARTER THERAPY PACK 10 MG & 20 MG & 30 MG.....	135
ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 1000-2400 UNIT.....	118	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 2500 UNIT.....	116	APREPITANT CAP 40MG.....	93
ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 1000 UNIT.....	116	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 3000 UNIT.....	116	APREPITANT CAP 80MG.....	93
ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 1500 UNIT.....	116	ANTIINHIBITOR COAGULANT COMPLEX FOR IV SOLN 500 UNIT.....	117	APREPITANT CAP 125MG.....	93
ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 2000 UNIT.....	116	ANTIINHIBITOR COAGULANT COMPLEX FOR IV SOLN 1000 UNIT.....	117	APREPITANT CAPSULE 40 MG.....	93
ANTIHEMOPHILIC FACT RCMB (BDD-RFVIII,SIM) FOR INJ 1000 UNIT.....	119	ANTIINHIBITOR COAGULANT COMPLEX FOR IV SOLN 2500 UNIT.....	117	APREPITANT CAPSULE 80 MG.....	93
ANTIHEMOPHILIC FACT RCMB (BDD-RFVIII,SIM) FOR INJ 1500 UNIT.....	119	ANTISEPTIC SOL 4%.....	68	APREPITANT CAPSULE 125 MG.....	93
		ANUCORT-HC SUP 25MG.....	113	APREPITANT CAPSULE THERAPY PACK 80 & 125 MG.....	93
		ANUSOL-HC CRE 2.5%.....	113	APREPITANT FOR ORAL SUSP 125 MG (125 MG/5ML).....	93
				APREPITANT PAK 125 & 80.....	93
				APRISO CAP 0.375GM.....	11
				APRI TAB.....	95
				APTIVUS CAP 250MG.....	19
				AQINJECT PEN MIS 31GX3/16.....	143
				AQINJECT PEN MIS 32GX5/32.....	74
				AQNEURSA POW 1GM.....	143
				AQUALANCE MIS 30G.....	74
				AQUORAL SPR.....	66
				AQUORAL SPR.....	66
				ARAKODA TAB 100MG.....	40
				ARANELLE TAB.....	95
				ARANESP INJ 10MCG.....	52
				ARANESP INJ 25MCG.....	52
				ARANESP INJ 25MCG.....	52
				ARANESP INJ 40MCG.....	52
				ARANESP INJ 40MCG.....	52
				ARANESP INJ 60MCG.....	53

ARANESP INJ 60MCG.....	53	ARNUITY ELPT INH 50MCG.....	19	ASPIRIN CHEW TAB 81 MG.....	175
ARANESP INJ 100MCG.....	52	ARNUITY ELPT INH 100MCG.....	19	ASPIRIN CHEW TAB 81 MG.....	175
ARANESP INJ 100MCG.....	52	ARNUITY ELPT INH 200MCG.....	19	ASPIRIN CHEW TAB 81 MG.....	175
ARANESP INJ 150MCG.....	52	ARTEMETHER-LUMEFANTRINE TAB 20- 120 MG.....	40	ASPIRIN CHEW TAB 81 MG.....	175
ARANESP INJ 200MCG.....	52	*ARTIFICIAL SALIVA - PACKET***.....	67	ASPIRIN CHLD CHW 81MG.....	172
ARANESP INJ 200MCG.....	52	*ARTIFICIAL SALIVA - SOLUTION***.....	66	ASPIRIN CHW 81MG.....	172
ARANESP INJ 300MCG.....	52	*ARTIFICIAL SALIVA - SOLUTION***.....	66	ASPIRIN-DIPYRIDAMOLE CAP ER 12HR 25-200 MG.....	187
ARANESP INJ 500MCG.....	52	*ARTIFICIAL SALIVA - SOLUTION***.....	66	ASPIRIN EC TAB 81MG.....	172
ARCALYST INJ 220MG.....	135	*ARTIFICIAL TEAR OPTH INSERT***.....	175	ASPIRIN LOW CHW 81MG.....	173
AREXVY INJ 120MCG.....	209	ARTISS KIT 2ML.....	68	ASPIRIN LOW TAB 81MG.....	173
ARFORMOTEROL NEB 15/2ML.....	54	ARTISS KIT 4ML.....	68	ASPIRIN LOW TAB 81MG EC.....	173
ARFORMOTEROL TARTRATE SOLN NEBU 15 MCG/2ML (BASE EQUIV).....	54	ARTISS KIT 10ML.....	68	ASPIRIN REGI TAB 81MG.....	173
ARGINAID PAK CHERRY.....	85	ARTISS SOL 2ML.....	68	ASPIRIN TAB 81MG.....	172
ARGINAID PAK ORANGE.....	85	ARTISS SOL 4ML.....	68	ASPIRIN TAB 81MG EC.....	172
ARGININE CAP 500 MG.....	154	ARTISS SOL 10ML.....	68	ASPIRIN TAB DELAYED RELEASE 81 MG...172	
ARGININE PAK 500MG.....	143	ARZOL SILVER MIS NITR APP.....	22	ASPIRIN TAB DELAYED RELEASE 81 MG...172	
ARGININE POWDER PACKET 500 MG.....	143	ASA/DIPYRIDA CAP 25-200MG.....	187	ASPIRIN TAB DELAYED RELEASE 81 MG...172	
ARGININE TAB 500 MG.....	143	ASCIMINIB HCL TAB 20 MG.....	39	ASPIRIN TAB DELAYED RELEASE 81 MG...172	
ARGININE TAB 500MG.....	143	ASCIMINIB HCL TAB 40 MG.....	39	ASPIRIN TAB DELAYED RELEASE 81 MG...172	
ARIKAYCE SUS.....	11	ASCIMINIB HCL TAB 100 MG.....	39	ASPIRIN TAB DELAYED RELEASE 81 MG...172	
ARIMOCLOMOL CITRATE CAP 47 MG.....	155	ASCOMP/COD CAP 30MG.....	182	ASPIRIN TAB DELAYED RELEASE 81 MG...173	
ARIMOCLOMOL CITRATE CAP 62 MG.....	155	ASCORBIC ACID TAB 500 MG.....	92	ASPIRIN TAB DELAYED RELEASE 81 MG...173	
ARIMOCLOMOL CITRATE CAP 93 MG.....	155	ASENAPINE MALEATE SL TAB 2.5 MG (BASE EQUIV).....	7	ASPIRIN TAB DELAYED RELEASE 81 MG...173	
ARIMOCLOMOL CITRATE CAP 124 MG.....	155	ASENAPINE MALEATE SL TAB 5 MG (BASE EQUIV).....	7	ASPIRIN TAB DELAYED RELEASE 81 MG...174	
ARIPIPRAZOLE ORAL SOLUTION 1 MG/ML ..	7	ASENAPINE MALEATE SL TAB 10 MG (BASE EQUIV).....	7	ASPIRIN TAB DELAYED RELEASE 81 MG...174	
ARIPIPRAZOLE SOL 1MG/ML.....	7	ASENAPINE SUB 2.5MG.....	7	ASPIRIN TAB DELAYED RELEASE 81 MG...174	
ARIPIPRAZOLE TAB 2 MG.....	7	ASENAPINE SUB 5MG.....	7	ASPIRIN TAB DELAYED RELEASE 81 MG...174	
ARIPIPRAZOLE TAB 2MG.....	7	ASENAPINE SUB 10MG.....	7	ASPIRIN TAB DELAYED RELEASE 81 MG...174	
ARIPIPRAZOLE TAB 5 MG.....	7	ASFOTASE ALFA SUBCUTANEOUS INJ 18 MG/0.45ML.....	110	ASPIRIN TAB DELAYED RELEASE 81 MG...174	
ARIPIPRAZOLE TAB 5MG.....	7	ASFOTASE ALFA SUBCUTANEOUS INJ 28 MG/0.7ML.....	110	ASPIRIN TAB DELAYED RELEASE 81 MG...175	
ARIPIPRAZOLE TAB 10 MG.....	7	ASFOTASE ALFA SUBCUTANEOUS INJ 40 MG/ML.....	110	ASPIRIN TAB DELAYED RELEASE 81 MG...175	
ARIPIPRAZOLE TAB 10MG.....	7	ASFOTASE ALFA SUBCUTANEOUS INJ 80 MG/0.8ML.....	110	ASPRUZYO SPR GRA 500MG.....	60
ARIPIPRAZOLE TAB 15 MG.....	7	ASHLYNA TAB.....	95	ASPRUZYO SPR GRA 1000MG.....	60
ARIPIPRAZOLE TAB 15MG.....	7	ASPIRIN-81 CHW 81MG.....	173	ASSURE CMFRT MIS 28G.....	74
ARIPIPRAZOLE TAB 20 MG.....	7	ASPIRIN 81 TAB 81MG EC.....	172	ASSURE ID MIS 30GX5MM.....	143
ARIPIPRAZOLE TAB 20MG.....	7	ASPIRIN ADLT TAB 81MG.....	172	ASSURE ID MIS 31GX5MM.....	143
ARIPIPRAZOLE TAB 30 MG.....	7	ASPIRIN ADLT TAB 81MG EC.....	172	ASTRINGYN SOL 259MG/GM.....	117
ARIPIPRAZOLE TAB 30MG.....	7	ASPIRIN CHEW TAB 81 MG.....	172	ATABEX EC TAB 29-1MG.....	85
ARMODAFINIL TAB 50 MG.....	198	ASPIRIN CHEW TAB 81 MG.....	172	ATABEX OB TAB 29-1MG.....	213
ARMODAFINIL TAB 50MG.....	198	ASPIRIN CHEW TAB 81 MG.....	173	ATAZANAVIR CAP 150MG.....	19
ARMODAFINIL TAB 150 MG.....	198	ASPIRIN CHEW TAB 81 MG.....	173	ATAZANAVIR CAP 200MG.....	19
ARMODAFINIL TAB 150MG.....	198	ASPIRIN CHEW TAB 81 MG.....	173	ATAZANAVIR CAP 300MG.....	19
ARMODAFINIL TAB 200 MG.....	198	ASPIRIN CHEW TAB 81 MG.....	173	ATAZANAVIR SULFATE CAP 150 MG (BASE EQUIV).....	19
ARMODAFINIL TAB 200MG.....	198	ASPIRIN CHEW TAB 81 MG.....	173	ATAZANAVIR SULFATE CAP 200 MG (BASE EQUIV).....	19
ARMODAFINIL TAB 250 MG.....	198	ASPIRIN CHEW TAB 81 MG.....	173	ATAZANAVIR SULFATE CAP 300 MG (BASE EQUIV).....	19
ARMODAFINIL TAB 250MG.....	198	ASPIRIN CHEW TAB 81 MG.....	174	ATAZANAVIR SULFATE-COBICISTAT TAB 300-150 MG (BASE EQUIV).....	19
ARMOUR THYRO TAB 15MG.....	127	ASPIRIN CHEW TAB 81 MG.....	175		
ARMOUR THYRO TAB 30MG.....	127	ASPIRIN CHEW TAB 81 MG.....	175		
ARMOUR THYRO TAB 60MG.....	127				
ARMOUR THYRO TAB 90MG.....	127				
ARMOUR THYRO TAB 120MG.....	127				
ARMOUR THYRO TAB 180MG.....	127				
ARMOUR THYRO TAB 240MG.....	127				
ARMOUR THYRO TAB 300MG.....	127				

ATAZANAVIR SULFATE ORAL POWDER PACKET 50 MG (BASE EQUIV)	19	ATOVAQUONE-PROGUANIL HCL TAB 62.5-25 MG.....	40	AUVI-Q INJ 0.15MG	54
ATENOL/CHLOR TAB 50-25MG.....	60	ATOVAQUONE-PROGUANIL HCL TAB 62.5-25 MG.....	41	AVANAFIL TAB 50 MG	111
ATENOL/CHLOR TAB 100-25MG	60	ATOVAQUONE-PROGUANIL HCL TAB 250-100 MG.....	40	AVANAFIL TAB 50 MG	112
ATENOLOL & CHLORTHALIDONE TAB 50-25 MG	60	ATOVAQUONE-PROGUANIL HCL TAB 250-100 MG.....	41	AVANAFIL TAB 50MG	111
ATENOLOL & CHLORTHALIDONE TAB 100-25 MG	60	ATOVAQUONE SUS 750/5ML.....	40	AVANAFIL TAB 100 MG.....	111
ATENOLOL TAB 25 MG	49	ATOVAQUONE SUSP 750 MG/5ML	40	AVANAFIL TAB 100 MG.....	112
ATENOLOL TAB 25MG.....	49	ATRASENTAN HCL TAB 0.75 MG.....	164	AVANAFIL TAB 100MG	111
ATENOLOL TAB 50 MG	49	ATROPINE POW SULFATE	143	AVANAFIL TAB 200 MG.....	111
ATENOLOL TAB 50MG.....	49	ATROPINE SULFATE OPTH OINT 1%	175	AVANAFIL TAB 200 MG.....	112
ATENOLOL TAB 100 MG.....	49	ATROPINE SULFATE OPTH SOLN 1%.....	175	AVANAFIL TAB 200MG	111
ATENOLOL TAB 100MG	49	ATROPINE SULFATE POWDER.....	143	AVAPRITINIB TAB 25 MG.....	166
ATOGEPAANT TAB 10 MG	55	ATROPINE SUL OIN 1% OP	175	AVAPRITINIB TAB 50 MG.....	166
ATOGEPAANT TAB 30 MG.....	55	ATROPINE SUL SOL 1% OP	175	AVAPRITINIB TAB 100 MG	166
ATOGEPAANT TAB 60 MG.....	56	ATROVENT HFA AER 17MCG.....	54	AVAPRITINIB TAB 200 MG	166
ATOMOXETINE CAP 10MG	45	ATTRUBY PAK 356MG	111	AVAPRITINIB TAB 300 MG	166
ATOMOXETINE CAP 18MG	45	AUBRA EQ TAB 0.1-0.02	95	AVAR CLEANSE LIQ 10-5%	68
ATOMOXETINE CAP 25MG	45	AUGTYRO CAP 40MG	38	AVATROMBOPAG MALEATE CAP SPRINKLE 10 MG (BASE EQUIV)	53
ATOMOXETINE CAP 40MG.....	45	AUGTYRO CAP 160MG	37	AVATROMBOPAG MALEATE TAB 20 MG (BASE EQUIV).....	53
ATOMOXETINE CAP 60MG.....	45	AUM MINI PEN MIS 32GX4MM	74	AVIANE TAB.....	95
ATOMOXETINE CAP 80MG.....	45	AUM MINI PEN MIS 32GX5MM	74	AVIDOXY DK KIT	206
ATOMOXETINE CAP 100MG.....	45	AUM MINI PEN MIS 32GX6MM	74	AVIDOXY TAB 100MG	206
ATOMOXETINE HCL CAP 10 MG (BASE EQUIV).....	45	AUM MINI PEN MIS 32GX8MM	143	AVMAPKI PAK FAKZYNJA	38
ATOMOXETINE HCL CAP 18 MG (BASE EQUIV).....	45	AUM MINI PEN MIS 33GX4MM	143	AVONEX PEN KIT 30MCG	171
ATOMOXETINE HCL CAP 25 MG (BASE EQUIV).....	45	AUM MINI PEN MIS 33GX5MM	143	AVONEX PREFL KIT 30MCG.....	171
ATOMOXETINE HCL CAP 40 MG (BASE EQUIV).....	45	AUM MINI PEN MIS 33GX6MM	143	AVUTOMETINIB CAP 0.8 MG & DEFACTINIB TAB 200 MG THERAPY PACK...	38
ATOMOXETINE HCL CAP 60 MG (BASE EQUIV).....	45	AUM READYGRD MIS 32GX4MM.....	74	AXITINIB TAB 1 MG	167
ATOMOXETINE HCL CAP 80 MG (BASE EQUIV).....	45	AUM SAFETY MIS 31GX4MM	143	AXITINIB TAB 5 MG	167
ATOMOXETINE HCL CAP 100 MG (BASE EQUIV).....	45	AUM SAFETY MIS 31GX5MM	143	AXONA POW	143
ATORVALIQ SUS 20MG/5ML	83	AUROVELA 24 TAB FE 1/20	95	AYUNA TAB.....	95
ATORVASTATIN CALCIUM SUSP 20 MG/5ML (4MG/ML) (BASE EQUIV).....	83	AUROVELA FE TAB 1.5/30	95	AYVAKIT TAB 25MG	166
ATORVASTATIN CALCIUM TAB 10 MG (BASE EQUIVALENT).....	83	AUROVELA FE TAB 1/20	95	AYVAKIT TAB 50MG	166
ATORVASTATIN CALCIUM TAB 20 MG (BASE EQUIVALENT).....	83	AUROVELA TAB 1.5/30	95	AYVAKIT TAB 100MG.....	166
ATORVASTATIN CALCIUM TAB 40 MG (BASE EQUIVALENT).....	83	AUROVELA TAB 1/20	95	AYVAKIT TAB 200MG	166
ATORVASTATIN CALCIUM TAB 80 MG (BASE EQUIVALENT).....	83	AUSTEDO TAB 6MG	64	AYVAKIT TAB 300MG	166
ATORVASTATIN TAB 10MG	83	AUSTEDO TAB 9MG	64	AZACITIDINE TAB 200 MG	39
ATORVASTATIN TAB 20MG	83	AUSTEDO TAB 12MG	64	AZACITIDINE TAB 300 MG	39
ATORVASTATIN TAB 40MG.....	83	AUSTEDO XR TAB 6MG	64	AZASAN TAB 75 MG	131
ATORVASTATIN TAB 80MG.....	83	AUSTEDO XR TAB 12MG.....	64	AZASAN TAB 100MG	131
ATOVAQ/PROGU TAB 62.5-25	40	AUSTEDO XR TAB 18MG.....	64	AZASITE SOL 1%	177
ATOVAQ/PROGU TAB 250-100	40	AUSTEDO XR TAB 24MG.....	64	AZATHIOPRINE TAB 50 MG	131
		AUSTEDO XR TAB 30MG ER	64	AZATHIOPRINE TAB 50MG.....	131
		AUSTEDO XR TAB 36MG ER	64	AZATHIOPRINE TAB 75 MG.....	131
		AUSTEDO XR TAB 42MG ER.....	64	AZATHIOPRINE TAB 75MG	131
		AUSTEDO XR TAB 48MG ER	64	AZATHIOPRINE TAB 100 MG	131
		AUSTEDO XR TAB TITR KIT.....	64	AZATHIOPRINE TAB 100 MG	131
		AUTOLET LANC MIS DEVICE.....	80	AZATHIOPRINE TAB 100MG.....	131
		AUTOLET LITE MIS LANCING.....	80	AZELAIC ACID FOAM 15%.....	70
		AUTOSHIELD MIS 30GX5MM	143	AZELAIC ACID GEL 15%.....	68
		AUVI-Q INJ 0.1MG	54	AZELAIC ACID GEL 15%.....	68
		AUVI-Q INJ 0.3MG.....	55	AZELASTINE DRO 0.05%.....	176

AZELASTINE HCL NASAL SPRAY 0.1% (137 MCG/SPRAY)	36	BAC TAB.....	11	BELBUCA MIS 300MCG	180
AZELASTINE HCL OPTH SOLN 0.05%.....	176	BACTRIM DS TAB 800-160	206	BELBUCA MIS 450MCG	180
AZELASTINE SPR 0.1%	36	BACTRIM TAB 400-80MG	206	BELBUCA MIS 600MCG	180
AZITHROMYCIN FOR SUSP 100 MG/5ML ..	140	BAFIERTAM CAP 95MG	171	BELBUCA MIS 750MCG	180
AZITHROMYCIN FOR SUSP 100 MG/5ML ..	141	BALOXAVIR MARBOXIL TAB THERAPY PACK 1 X 40 MG (40 MG DOSE).....	20	BELBUCA MIS 900MCG	180
AZITHROMYCIN FOR SUSP 200 MG/5ML ..	140	BALOXAVIR MARBOXIL TAB THERAPY PACK 1 X 80 MG (80 MG DOSE).....	20	BELIMUMAB SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/ML.....	135
AZITHROMYCIN FOR SUSP 200 MG/5ML ..	141	BALSALAZIDE CAP 750MG	11	BELIMUMAB SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/ML	135
AZITHROMYCIN OPTH SOLN 1%.....	177	BALSALAZIDE DISODIUM CAP 750 MG	11	BELLADONNA ALKALOIDS & OPIUM SUPPOS 16.2-60 MG	41
AZITHROMYCIN POW 1GM PAK	140	*BALSAM PERU-CASTOR OIL OINT***	73	BELLA/OPIUM SUP 16.2-60	41
AZITHROMYCIN POWD PACK FOR SUSP 1 GM	140	*BALSAM PERU-CASTOR OIL OINT***	73	BELSOMRA TAB 5MG.....	198
AZITHROMYCIN POWD PACK FOR SUSP 1 GM	141	*BALSAM PERU-CASTOR OIL OINT***	74	BELSOMRA TAB 10MG	198
AZITHROMYCIN SUS 100/5ML.....	140	BALSAM PERU/ OIN CASTOR.....	73	BELSOMRA TAB 15MG.....	198
AZITHROMYCIN SUS 200/5ML.....	140	BALZIVA TAB.....	95	BELSOMRA TAB 20MG	198
AZITHROMYCIN TAB 250 MG	140	BAQSIMI ONE POW 3MG/DOSE	114	BELZUTIFAN TAB 40 MG	40
AZITHROMYCIN TAB 250 MG	141	BAQSIMI TWO POW 3MG/DOSE.....	114	BEMPEDOIC ACID-EZETIMIBE TAB 180- 10 MG	84
AZITHROMYCIN TAB 250 MG	141	BARACLUDE SOL.....	15	BEMPEDOIC ACID TAB 180 MG.....	84
AZITHROMYCIN TAB 250MG.....	140	BARICITINIB TAB 1 MG.....	132	BENAZEPRIL/HCTZ TAB 5-6.25MG.....	61
AZITHROMYCIN TAB 500 MG	140	BARICITINIB TAB 2 MG	132	BENAZEPRIL/HCTZ TAB 10-12.5	60
AZITHROMYCIN TAB 500 MG	141	BARICITINIB TAB 4 MG	132	BENAZEPRIL/HCTZ TAB 20-12.5	61
AZITHROMYCIN TAB 500 MG	141	BASE A PEG POW 1450	138	BENAZEPRIL/HCTZ TAB 20-25MG	61
AZITHROMYCIN TAB 500MG.....	140	BASE CRE LIPOSOME.....	143	BENAZEPRIL HCL TAB 5 MG.....	13
AZITHROMYCIN TAB 600 MG	140	BAXDELA TAB 450MG.....	192	BENAZEPRIL HCL TAB 10 MG.....	13
AZITHROMYCIN TAB 600MG.....	140	BAYER LOW CHW 81MG	173	BENAZEPRIL HCL TAB 10 MG.....	14
AZSTARYS CAP 26.1-5.2	45	BCAD 1 POW	213	BENAZEPRIL HCL TAB 20 MG	13
AZSTARYS CAP 39.2-7.8	45	BCAD 2 POW	213	BENAZEPRIL HCL TAB 20 MG	14
AZSTARYS CAP 52.3-10.....	45	B & C OIN.....	73	BENAZEPRIL HCL TAB 20 MG	13
AZURETTE TAB.....	95	BD BLNT FILL MIS 18GX1.5	136	BENAZEPRIL HCL TAB 40 MG	13
BACIT/POLYMY OIN OP.....	175	BD ECLIPSE MIS 18GX1.5"	136	BENAZEPRIL HCL TAB 40 MG	14
BACITRACIN OIN OP.....	177	BD ECLIPSE MIS 23GX1"	143	BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 5-6.25 MG	61
BACITRACIN OPTH OINT 500 UNIT/GM ..	177	BD ECLIPSE MIS 25GX5/8"	144	BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 10-12.5 MG.....	60
BACITRACIN-POLYMYXIN B OPTH OINT .	175	BD ECLIPSE MIS 30GX1"	144	BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 10-12.5 MG.....	62
BACITRACIN-POLYMYXIN B OPTH OINT .	176	BD NEEDLE MIS 30GX1/2"	144	BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 20-12.5 MG	61
BACITRACIN-POLYMYXIN-NEOMYCIN- HC OPTH OINT 1%	177	BD NEEDLE MIS 30GX1/2"	144	BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 20-12.5 MG	62
BACITRACIN-POLYMYXIN-NEOMYCIN- HC OPTH OINT 1%	177	BD PEN NEEDL MIS 29GX12.7	144	BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 20-25 MG	61
BACLOFEN ORAL SOLN 5 MG/5ML.....	198	BD PEN NEEDL MIS 31GX5MM	144	BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 20-25 MG	62
BACLOFEN ORAL SOLN 5 MG/5ML.....	198	BD PEN NEEDL MIS 31GX8MM	144	BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 20-25 MG	61
BACLOFEN ORAL SOLN 10 MG/5ML	198	BD PEN NEEDL MIS 32GX4MM	74	BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 20-25 MG	62
BACLOFEN ORAL SOLN 10 MG/5ML	198	BD PEN NEEDL MIS 32GX6MM	74	BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 20-25 MG	61
BACLOFEN SOL 5MG/5ML	198	BD SAFETY MIS 23GX1.5"	144	BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 20-25 MG	62
BACLOFEN SOL 10MG/5ML	198	BD SHARPS MIS 1.4QT	144	BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 20-25 MG	61
BACLOFEN SUS 25MG/5ML	198	BD SHARPS MIS 3.3QT	144	BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 20-25 MG	62
BACLOFEN SUSP 25 MG/5ML	198	BD SHARPS MIS 5.1L	144	BENAZEPRIL TAB 5MG	13
BACLOFEN TAB 5 MG.....	198	BECAPLERMIN GEL 0.01%.....	71	BENAZEPRIL TAB 10MG.....	13
BACLOFEN TAB 5MG	198	BECLOMETHASONE DIPROP HFA BREATH ACT INH AER 40 MCG/ACT	20	BENAZEPRIL TAB 20MG.....	13
BACLOFEN TAB 10 MG	197	BECLOMETHASONE DIPROP HFA BREATH ACT INH AER 80 MCG/ACT	20	BENAZEPRIL TAB 40MG.....	13
BACLOFEN TAB 10MG.....	197	BEDAQUILINE FUMARATE TAB 20 MG (BASE EQUIV).....	42	BENEFIX INJ 250UNIT	117
BACLOFEN TAB 20 MG	197	BEDAQUILINE FUMARATE TAB 100 MG (BASE EQUIV).....	42	BENEFIX INJ 500UNIT	117
BACLOFEN TAB 20MG.....	197	BELBUCA MIS 75MCG.....	180	BENEFIX INJ 1000UNIT	117
BACOCALMINE LIQ.....	143	BELBUCA MIS 150MCG	180	BENEFIX INJ 2000UNIT	117
				BENEFIX INJ 3000UNIT	117
				BENEPROTEIN POW UNFLAVOR	144
				BENLYSTA INJ 200MG/ML	135

BENLYSTA INJ 200MG/ML	135	BETAMETHASONE DIPROPIONATE AUGMENTED GEL 0.05%	121	BEYFORTUS INJ 100MG/ML	135
BENRALIZUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 30 MG/ML	193	BETAMETHASONE DIPROPIONATE AUGMENTED LOTION 0.05%	122	BICALUTAMIDE TAB 50 MG	20
BENZALKONIUM CHLORIDE SOLN	23	BETAMETHASONE DIPROPIONATE AUGMENTED OINT 0.05%	122	BICALUTAMIDE TAB 50MG	20
BENZALKONIUM CHLORIDE SOLN 50%	22	BETAMETHASONE DIPROPIONATE AUGMENTED OINT 0.05%	123	*BICARB 22 MEQ/L-DEXT SOLN WITH K 4 MEQ/L (CRRT)***	91
BENZALKONIUM SOL 50%	22	BETAMETHASONE DIPROPIONATE AUGMENTED OINT 0.05%	122	*BICARB 32 MEQ/L-DEXT SOLN WITH CA 2.5 MEQ/L (CRRT)***	90
BENZALKONIUM SOL NF	23	BETAMETHASONE DIPROPIONATE CREAM 0.05%	122	*BICARB 32 MEQ/L-DEXT SOLN WITH K 2 MEQ/L (CRRT)***	91
BENZNIDAZOLE TAB 12.5 MG	14	BETAMETHASONE DIPROPIONATE LOTION 0.05%	122	*BICARB 32 MEQ/L-DEXT SOLN WITH K-CA 2-3.5 MEQ/L (CRRT)**	91
BENZNIDAZOLE TAB 12.5MG	14	BETAMETHASONE DIPROPIONATE OINT 0.05%	122	*BICARB 32 MEQ/L-DEXT SOLN WITH K-CA 4-2.5 MEQ/L (CRRT)**	91
BENZNIDAZOLE TAB 100 MG	14	BETAMETHASONE VALERATE CREAM 0.1% (BASE EQUIVALENT)	122	*BICARB 32 MEQ/L-DEXT SOLN WITH K-MG 4-1.2 MEQ/L (CRRT)**	91
BENZIN TINCTURE	68	BETAMETHASONE VALERATE LOTION 0.1% (BASE EQUIVALENT)	122	*BICARB 32 MEQ/L SOLN WITH MG 1.2 MEQ/L (CRRT)***	90
BENZIN TIN NF	68	BETAMETHASONE VALERATE OINT 0.1% (BASE EQUIVALENT)	122	*BICARB-K 22-4 MEQ/L WITH PHOS 1 MMOL/L SOLN (CRRT)***	89
BENZONATATE CAP 100 MG	195	BETAMETH DIP CRE 0.05%	122	*BICARB-K-CA 32-4-2.5 MEQ/L WITH PHOS 1 MMOL/L SOLN (CRRT)*	89
BENZONATATE CAP 100MG	195	BETAMETH DIP LOT 0.05%	122	BICTEGRVIR-EMTRICITABINE- TENOFVIR AF TAB 30-120-15 MG	16
BENZONATATE CAP 200 MG	195	BETAMETH DIP OIN 0.05%	122	BICTEGRVIR-EMTRICITABINE- TENOFVIR AF TAB 50-200-25 MG	16
BENZONATATE CAP 200MG	195	BETAMETH VAL CRE 0.1%	122	BIGFOOT UNIT KIT PROGRAM	144
BENZOYL PEROXIDE-ERYTHROMYCIN GEL 5-3%	70	BETAMETH VAL LOT 0.1%	122	BIJUVA CAP 0.5-100	95
BENZOYL PEROXIDE LOTION 4% & HYALURONATE SODIUM GEL 0.2% KIT	74	BETAMETH VAL OIN 0.1%	122	BIJUVA CAP 1-100MG	96
BENZOYL PEROXIDE LOTION 8%	73	BETAPACE AF TAB 80MG	21	BIKTARVY TAB	16
BENZOYL PEROXIDE LOTION 8% & HYALURONATE SODIUM GEL 0.2% KIT	74	BETAPACE AF TAB 120MG	21	BIKTARVY TAB	16
*BENZOYL PEROXIDE PAD 4% & VITAMIN E TOPICAL 5% KIT***	73	BETAPACE AF TAB 160MG	21	BILTRICIDE TAB 600MG	14
*BENZOYL PEROXIDE PAD 8% & VITAMIN E TOPICAL 5% KIT***	73	BETASERON INJ 0.3MG	171	BIMATOPROST OPHTH SOLN 0.01%	179
BENZOYL PEROX PAD 4% & SALICYLIC AC PAD 1% & VIT E 5% KIT	73	BETAXOLOL HCL OPHTH SOLN 0.5%	178	BIMATOPROST OPHTH SOLN 0.03%	179
BENZOYL PEROX PAD 8% & SALICYLIC AC PAD 2% & VIT E 5% KIT	73	BETAXOLOL HCL OPHTH SUSP 0.25%	178	BIMATOPROST SOL 0.03% OP	179
BENZTROPINE MESYLATE TAB 0.5 MG	25	BETAXOLOL HCL TAB 10 MG	49	BIMEKIZUMAB-BKZX SUBCUTANEOUS SOLN AUTO-INJECTOR 160 MG/ML	134
BENZTROPINE MESYLATE TAB 1 MG	25	BETAXOLOL HCL TAB 20 MG	49	BIMEKIZUMAB-BKZX SUBCUTANEOUS SOLN AUTO-INJECTOR 320 MG/2ML	134
BENZTROPINE MESYLATE TAB 2 MG	25	BETAXOLOL SOL 0.5% OP	178	BIMEKIZUMAB-BKZX SUBCUTANEOUS SOLN PREFILLED SYR 160 MG/ML	134
BENZTROPINE TAB 0.5MG	25	BETAXOLOL TAB 10MG	49	BIMEKIZUMAB-BKZX SUBCUTANEOUS SOLN PREFILLED SYR 320 MG/2ML	134
BENZTROPINE TAB 1MG	25	BETHANECHOL CHLORIDE TAB 5 MG	111	BIMZELX INJ 160MG/ML	134
BENZTROPINE TAB 2MG	25	BETHANECHOL CHLORIDE TAB 10 MG	111	BIMZELX INJ 160MG/ML	134
BERDAZIMER SODIUM GEL 10.3%	165	BETHANECHOL CHLORIDE TAB 25 MG	111	BIMZELX INJ 320MG/2	134
BERINERT INJ 500UNIT	12	BETHANECHOL CHLORIDE TAB 50 MG	111	BIMZELX INJ 320MG/2	134
BESIFLOXACIN HCL OPHTH SUSP 0.6% (BASE EQUIV)	177	BETHANECHOL TAB 5MG	111	BIRCH TRITERPENES GEL 10%	73
BESIVANCE SUS 0.6%	177	BETHANECHOL TAB 10MG	111	BISACODYL TAB 5MG DR	138
BETADINE SOL 5% OP	177	BETHANECHOL TAB 25MG	111	BISACODYL TAB 5MG EC	138
BETA DIPROP CRE 0.05%	121	BETHANECHOL TAB 50MG	111	BISACODYL TAB DELAYED RELEASE 5 MG	138
BETA DIPROP GEL 0.05%	121	BETIMOL SOL 0.5% OP	178	BISACODYL TAB DELAYED RELEASE 5 MG	138
BETA DIPROP LOT 0.05%	122	BETIMOL SOL 0.25% OP	178	BISACODYL TAB DELAYED RELEASE 5 MG	138
BETA DIPROP OIN 0.05%	122	BETOPTIC-S SUS 0.25% OP	178	BISACODYL TAB DELAYED RELEASE 5 MG	139
BETAINE ANHY POW	109	BEVESPIAER 9-4.8MCG	193	BISACODYL TAB DELAYED RELEASE 5 MG	139
*BETAINE POWDER FOR ORAL SOLUTION***	109	BEXAGLIFLOZIN TAB 20 MG	28		
*BETAINE POWDER FOR ORAL SOLUTION***	109	BEXAROTENE CAP 75 MG	196		
BETAMETHASONE DIPROPIONATE AUGMENTED CREAM 0.05%	121	BEXAROTENE CAP 75MG	196		
		BEXAROTENE GEL 1%	196		
		BEXAROTENE GEL 1%	196		
		BEXSERO INJ	209		
		BEYFORTUS INJ 50/0.5ML	135		

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BISACODYL TAB DELAYED RELEASE 5 MG .139	*BLOOD GLUCOSE CALIBRATION - LIQUID*** 76	*BLOOD GLUCOSE CALIBRATION - LIQUID - NORMAL*** 147
BISACODYL TAB DELAYED RELEASE 5 MG .140	*BLOOD GLUCOSE CALIBRATION - LIQUID*** 76	*BLOOD GLUCOSE CALIBRATION - LIQUID - NORMAL*** 150
BISACODYL TAB DELAYED RELEASE 5 MG .140	*BLOOD GLUCOSE CALIBRATION - LIQUID*** 76	*BLOOD GLUCOSE CALIBRATION - LIQUID - NORMAL*** 163
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BISOPRL/HCTZ TAB 2.5/6.25.....61	*BLOOD GLUCOSE CALIBRATION - LIQUID*** 77	*BLOOD GLUCOSE MONITORING KIT W/ DEVICE*** 74
BISOPRL/HCTZ TAB 5-6.25MG.....61	*BLOOD GLUCOSE CALIBRATION - LIQUID*** 77	*BLOOD GLUCOSE MONITORING KIT W/ DEVICE*** 75
BISOPRL/HCTZ TAB 10/6.25 61	*BLOOD GLUCOSE CALIBRATION - LIQUID*** 77	*BLOOD GLUCOSE MONITORING KIT W/ DEVICE*** 75
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BISOPROL FUM TAB 2.5MG 49	*BLOOD GLUCOSE CALIBRATION - LIQUID*** 77	*BLOOD GLUCOSE MONITORING KIT W/ DEVICE*** 76
BISOPROL FUM TAB 5MG 49	*BLOOD GLUCOSE CALIBRATION - LIQUID*** 78	*BLOOD GLUCOSE MONITORING MISC.***145
BISOPROL FUM TAB 10MG 49	*BLOOD GLUCOSE CALIBRATION - LIQUID*** 78	*BLOOD GLUCOSE MONITOR KIT W/ MONITOR DEVICE & DIGITAL APP** 144
BISOPROLOL FUMARATE (BULK) POWDER 144	*BLOOD GLUCOSE CALIBRATION - LIQUID*** 78	*BLOOD GLUCOSE MONITOR KIT W/ MONITOR DEVICE & DIGITAL APP** 147
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BISOPROLOL & HYDROCHLOROTHIAZIDE TAB 5-6.25 MG .. 61	*BLOOD GLUCOSE CALIBRATION - LIQUID - HIGH*** 151	BOOST LIQ ORIGINAL 85
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		BOSULIF CAP 100MG 166

BOSUTINIB CAP 50 MG	166	BROM/PSE/DM SYP	195	BUPRENORPHINE HCL BUCCAL FILM	
BOSUTINIB CAP 100 MG	166	BROM/PSE/DM SYP 2-30-10	195	300 MCG (BASE EQUIVALENT)	180
BPM-PSE-DM SYP 2-30-10	195	BROM/PSE/DM SYP 2/30/10	195	BUPRENORPHINE HCL BUCCAL FILM	
BRAINSUSTAIN PAK	85	BRUKINSA CAP 80MG	166	450 MCG (BASE EQUIVALENT)	180
BREMELANOTIDE ACET SUBCUTANEOUS		BRUKINSA TAB 160MG	166	BUPRENORPHINE HCL BUCCAL FILM	
SOLN AUTO-INJ 1.75 MG/0.3ML	64	BUDESONIDE AER 2MG/ACT	113	600 MCG (BASE EQUIVALENT)	180
BRENZAVVY TAB 20MG	28	BUDESONIDE CAP 3MG DR	113	BUPRENORPHINE HCL BUCCAL FILM 750	
BREO ELLIPTA INH 50-25MCG	193	BUDESONIDE DELAYED RELEASE		MCG (BASE EQUIVALENT)	180
BREO ELLIPTA INH 100-25	193	PARTICLES CAP 3 MG	113	BUPRENORPHINE HCL BUCCAL FILM	
BREO ELLIPTA INH 200-25	193	BUDESONIDE-FORMOTEROL FUMARATE		900 MCG (BASE EQUIVALENT)	180
BREXPIRAZOLE TAB 0.5 MG	8	DIHYD AEROSOL 80-4.5 MCG/ACT	195	BUPRENORPHINE HCL-NALOXONE HCL	
BREXPIRAZOLE TAB 0.25 MG	8	BUDESONIDE-FORMOTEROL FUMARATE		SL FILM 2-0.5 MG (BASE EQUIV)	185
BREXPIRAZOLE TAB 1 MG	8	DIHYD AEROSOL 160-4.5 MCG/ACT	195	BUPRENORPHINE HCL-NALOXONE HCL	
BREXPIRAZOLE TAB 2 MG	8	BUDESONIDE-GLYCOPYRROLATE-		SL FILM 4-1 MG (BASE EQUIV)	185
BREXPIRAZOLE TAB 3 MG	8	FORMOTEROL AERS 160-9-4.8 MCG/ACT ..	193	BUPRENORPHINE HCL-NALOXONE HCL	
BREXPIRAZOLE TAB 4 MG	8	BUDESONIDE INHALATION SUSP 0.5		SL FILM 8-2 MG (BASE EQUIV)	185
BREZTRI AERO AER SPHERE	193	MG/2ML	20	BUPRENORPHINE HCL-NALOXONE HCL	
BRIELLYN TAB	96	BUDESONIDE INHALATION SUSP 0.25		SL FILM 12-3 MG (BASE EQUIV)	185
BRIGATINIB TAB 30 MG	166	MG/2ML	20	BUPRENORPHINE HCL-NALOXONE HCL	
BRIGATINIB TAB 90 MG	166	BUDESONIDE INHALATION SUSP 1 MG/2ML	20	SL TAB 0.7-0.18 MG (BASE EQ)	185
BRIGATINIB TAB 180 MG	166	BUDESONIDE RECTAL FOAM 2 MG/ACT	113	BUPRENORPHINE HCL-NALOXONE HCL	
BRIGATINIB TAB INITIATION THERAPY		BUDESONIDE SUS 0.5MG/2	20	SL TAB 1.4-0.36 MG (BASE EQ)	185
PACK 90 MG & 180 MG	166	BUDESONIDE SUS 0.25MG/2	20	BUPRENORPHINE HCL-NALOXONE HCL	
BRIMONIDINE GEL 0.33%	68	BUDESONIDE SUS 1MG/2ML	20	SL TAB 2-0.5 MG (BASE EQUIV)	185
BRIMONIDINE SOL 0.2% OP	178	*BULK CHEMICALS - POWDER**	149	BUPRENORPHINE HCL-NALOXONE HCL	
BRIMONIDINE SOL 0.15% OP	178	*BULK CHEMICALS - POWDER**	149	SL TAB 2.9-0.71 MG (BASE EQ)	185
BRIMONIDINE TARTRATE GEL 0.33%		*BULK CHEMICALS - POWDER**	154	BUPRENORPHINE HCL-NALOXONE HCL	
(BASE EQUIVALENT)	68	*BULK CHEMICALS - POWDER**	159	SL TAB 5.7-1.4 MG (BASE EQ)	185
BRIMONIDINE TARTRATE GEL 0.33%		*BULK CHEMICALS - POWDER**	159	BUPRENORPHINE HCL-NALOXONE HCL	
(BASE EQUIVALENT)	71	*BULK CHEMICALS - POWDER**	162	SL TAB 8-2 MG (BASE EQUIV)	185
BRIMONIDINE TARTRATE OPHTH SOLN		BUMETANIDE TAB 0.5 MG	80	BUPRENORPHINE HCL-NALOXONE HCL	
0.1%	178	BUMETANIDE TAB 0.5 MG	80	SL TAB 8.6-2.1 MG (BASE EQ)	185
BRIMONIDINE TARTRATE OPHTH SOLN		BUMETANIDE TAB 0.5MG	80	BUPRENORPHINE HCL-NALOXONE HCL	
0.2%	178	BUMETANIDE TAB 1 MG	80	SL TAB 11.4-2.9 MG (BASE EQ)	185
BRIMONIDINE TARTRATE OPHTH SOLN		BUMETANIDE TAB 1MG	80	BUPRENORPHINE HCL SL TAB 2 MG	
0.15%	178	BUMETANIDE TAB 2 MG	80	(BASE EQUIV)	185
BRIMONIDINE TARTRATE OPHTH SOLN		BUMETANIDE TAB 2MG	80	BUPRENORPHINE HCL SL TAB 8 MG	
0.15%	178	BUMEX TAB 0.5MG	80	(BASE EQUIV)	185
BRIMONIDINE TARTRATE-TIMOLOL		BUPIVACAINE HCL POWDER	144	BUPRENORPHINE TD PATCH WEEKLY 5	
MALEATE OPHTH SOLN 0.2-0.5%	178	BUPIVACAINE POW HCL	144	MCG/HR	180
BRINCIDOFOVIR ORAL SUSP 10 MG/ML ..	43	BUPREN/NALOX MIS 2-0.5MG	185	BUPRENORPHINE TD PATCH WEEKLY 7.5	
BRINCIDOFOVIR TAB 100 MG	43	BUPREN/NALOX MIS 4-1MG	185	MCG/HR	180
BRINZOLAMIDE OPHTH SUSP 1%	178	BUPREN/NALOX MIS 8-2MG	185	BUPRENORPHINE TD PATCH WEEKLY 10	
BRINZOLAMIDE OPHTH SUSP 1%	178	BUPREN/NALOX MIS 12-3MG	185	MCG/HR	180
BRINZOLAMIDE SUS 1%	178	BUPREN/NALOX SUB 2-0.5MG	185	BUPRENORPHINE TD PATCH WEEKLY 15	
BRINZOLAMIDE SUS 1% OP	178	BUPREN/NALOX SUB 8-2MG	185	MCG/HR	180
BROMFED DM SOL 2-30-10	195	BUPRENORPHIN DIS 5MCG/HR	180	BUPRENORPHINE TD PATCH WEEKLY 20	
BROMFENAC DRO 0.09% OP	176	BUPRENORPHIN DIS 7.5/HR	180	MCG/HR	180
BROMFENAC SODIUM OPHTH SOLN		BUPRENORPHIN DIS 10MCG/HR	180	BUPRENORPHIN SUB 2MG	185
0.09% (BASE EQUIV) (ONCE-DAILY)	176	BUPRENORPHIN DIS 15MCG/HR	180	BUPRENORPHIN SUB 8MG	185
BROMOCRIPTIN CAP 5MG	81	BUPRENORPHIN DIS 20MCG/HR	180	BUPROPION HCL (SMOKING	
BROMOCRIPTINE MESYLATE CAP 5 MG		BUPRENORPHINE HCL BUCCAL FILM 75		DETERRENT) TAB ER 12HR 150 MG	199
(BASE EQUIVALENT)	81	MCG (BASE EQUIVALENT)	180	BUPROPION HCL TAB 75 MG	28
BROMOCRIPTINE MESYLATE TAB 2.5 MG		BUPRENORPHINE HCL BUCCAL FILM 150		BUPROPION HCL TAB 100 MG	28
(BASE EQUIVALENT)	81	MCG (BASE EQUIVALENT)	180	BUPROPION HCL TAB ER 12HR 100 MG	28
BROMOCRIPTIN TAB 2.5MG	81			BUPROPION HCL TAB ER 12HR 150 MG	28
				BUPROPION HCL TAB ER 12HR 200 MG	28

BUPROPION HCL TAB ER 24HR 150 MG.....	28	BUT/APAP/CAF SOL.....	11	CALCIPOTRIENE SOLN 0.005% (50 MCG/ML).....	69
BUPROPION HCL TAB ER 24HR 300 MG.....	28	BUT/APAP/CAF TAB.....	11	CALCIPOTRIEN OIN 0.005%.....	69
BUPROPION TAB 75MG.....	28	BUT/ASA/CAF/ CAP CODEINE.....	182	CALCIPOTRIEN SOL 0.005%.....	69
BUPROPION TAB 100MG.....	28	BUT/ASA/CAFF CAP.....	11	CALCITONIN INJ 200/ML.....	141
BUPROPION TAB 100MG SR.....	28	BUTOCONAZOLE NITRATE (ONE DOSE)		CALCITONIN INJ 400/2ML.....	141
BUPROPION TAB 150MG SR.....	28	VAGINAL CREAM 2%.....	34	CALCITONIN (SALMON) INJ 200 UNIT/ML	141
BUPROPION TAB 150MG SR.....	199	BUTORPHANOL SOL 10MG/ML.....	182	CALCITONIN (SALMON) INJ 200 UNIT/ML	141
BUPROPION TAB 150MG XL.....	28	BUTORPHANOL TARTRATE NASAL SOLN		CALCITONIN (SALMON) INJ 200 UNIT/ML	142
BUPROPION TAB 200MG SR.....	28	10 MG/ML.....	182	CALCITONIN (SALMON) INJ 200 UNIT/ML	142
BUPROPION TAB 300MG XL.....	28	BYDUREON BC INJ 2/0.85ML.....	29	CALCITONIN (SALMON) NASAL SOLN	
BUSPIRONE HCL TAB 5 MG.....	43	BYETTA INJ 5MCG.....	29	200 UNIT/ACT.....	141
BUSPIRONE HCL TAB 7.5 MG.....	43	BYETTA INJ 10MCG.....	29	CALCITONIN SPR 200/ACT.....	141
BUSPIRONE HCL TAB 10 MG.....	43	C1 ESTERASE INHIBITOR (HUMAN) FOR		CALCITRENE OIN 0.005%.....	69
BUSPIRONE HCL TAB 15 MG.....	43	IV INJ KIT 500 UNIT.....	12	CALCITRIOL CAP 0.5 MCG.....	142
BUSPIRONE HCL TAB 30 MG.....	43	C1 ESTERASE INHIBITOR (HUMAN) FOR		CALCITRIOL CAP 0.5MCG.....	142
BUSPIRONE TAB 5MG.....	43	SUBCUTANEOUS INJ 2000 UNIT.....	12	CALCITRIOL CAP 0.25 MCG.....	142
BUSPIRONE TAB 7.5MG.....	43	C1 ESTERASE INHIBITOR (HUMAN) FOR		CALCITRIOL CAP 0.25MCG.....	142
BUSPIRONE TAB 10MG.....	43	SUBCUTANEOUS INJ 3000 UNIT.....	12	CALCITRIOL OIN 3MCG/GM.....	69
BUSPIRONE TAB 15MG.....	43	C1 ESTERASE INHIBITOR		CALCITRIOL OINT 3 MCG/GM.....	69
BUSPIRONE TAB 30MG.....	43	(RECOMBINANT) FOR IV INJ 2100 UNIT....	12	CALCITRIOL ORAL SOLN 1 MCG/ML.....	142
BUSULFAN TAB 2 MG.....	10	CABERGOLINE TAB 0.5 MG.....	130	CALCITRIOL SOL 1MCG/ML.....	142
BUTAL/APAP CAP 50-300MG.....	11	CABERGOLINE TAB 0.5MG.....	130	CALCIUM ACETATE (PHOSPHATE	
BUTAL/APAP TAB 50-325MG.....	11	CABLIVI KIT 11MG.....	188	BINDER) CAP 667 MG (169 MG CA).....	187
BUTALBITAL-ACETAMINOPHEN-		CABOMETYX TAB 20MG.....	166	CALCIUM ACETATE (PHOSPHATE	
CAFFEINE CAP 50-300-40 MG.....	11	CABOMETYX TAB 40MG.....	166	BINDER) TAB 667 MG.....	187
BUTALBITAL-ACETAMINOPHEN-		CABOMETYX TAB 60MG.....	166	CALCIUM, MAG, POTASSIUM, & SOD	
CAFFEINE CAP 50-300-40 MG.....	11	CABOZANTINIB S-MALATE CAP 3 X 20		OXYBATES ORAL SOLN 500 MG/ML.....	199
BUTALBITAL-ACETAMINOPHEN-		MG (60 MG DOSE) KIT.....	166	CALCIUM POW FOLINATE.....	144
CAFFEINE CAP 50-325-40 MG.....	11	CABOZANTINIB S-MALATE TAB 20 MG		CALQUENCE TAB 100MG.....	166
BUTALBITAL-ACETAMINOPHEN-		(BASE EQUIVALENT).....	166	CAMILA TAB 0.35MG.....	188
CAFFEINE CAP 50-325-40 MG.....	11	CABOZANTINIB S-MALATE TAB 40 MG		CAM PRO COMP BAR GLYTACTI.....	144
BUTALBITAL-ACETAMINOPHEN-		(BASE EQUIVALENT).....	166	CAM PRO COMP BAR GLYTACTI.....	144
CAFFEINE SOLN 50-325-40 MG/15ML.....	11	CABOZANTINIB S-MALATE TAB 60 MG		CAMRESE LO TAB.....	96
BUTALBITAL-ACETAMINOPHEN-		(BASE EQUIVALENT).....	166	CAMRESE TAB.....	96
CAFFEINE TAB 50-325-40 MG.....	11	CABOZANTINIB S-MAL CAP 1 X 80 MG & 1		CAMZYOS CAP 2.5MG.....	60
BUTALBITAL-ACETAMINOPHEN-		X 20 MG (100 DOSE) KIT.....	166	CAMZYOS CAP 5MG.....	60
CAFFEINE TAB 50-325-40 MG.....	11	CABOZANTINIB S-MAL CAP 1 X 80 MG &		CAMZYOS CAP 10MG.....	60
BUTALBITAL-ACETAMINOPHEN-		3 X 20 MG (140 DOSE) KIT.....	166	CAMZYOS CAP 15MG.....	60
CAFFEINE TAB 50-325-40 MG.....	11	CA CARB-FOLIC ACID-VIT D-B6-B12-		CANDESA/HCTZ TAB 16-12.5.....	61
BUTALBITAL-ACETAMINOPHEN-CAFF W/		BORON-MAG WAFER 1342-1.6 MG.....	85	CANDESA/HCTZ TAB 32-12.5.....	61
COD CAP 50-325-40-30 MG.....	182	CAFFEINE CITRATE ORAL SOLN 60		CANDESA/HCTZ TAB 32-25MG.....	61
BUTALBITAL-ACETAMINOPHEN CAP 50-		MG/3ML (10 MG/ML BASE EQUIV).....	64	CANDESARTAN CILEXETIL-	
300 MG.....	11	CAFFEINE CITRATE ORAL SOLN 60		HYDROCHLOROTHIAZIDE TAB 16-12.5 MG..	61
BUTALBITAL-ACETAMINOPHEN TAB 50-		MG/3ML (10 MG/ML BASE EQUIV).....	64	CANDESARTAN CILEXETIL-	
325 MG.....	11	CAFFEINE CIT SOL 20MG/ML.....	64	HYDROCHLOROTHIAZIDE TAB 32-12.5 MG..	61
BUTALBITAL-ACETAMINOPHEN TAB 50-		CAFFEINE CIT SOL 60MG/3ML.....	64	CANDESARTAN CILEXETIL-	
325 MG.....	11	CALC ACETATE CAP 667MG.....	187	HYDROCHLOROTHIAZIDE TAB 32-25 MG...	61
BUTALBITAL-ASPIRIN-CAFFEINE CAP		CALC ACETATE TAB 667MG.....	187	CANDESARTAN CILEXETIL TAB 4 MG.....	13
50-325-40 MG.....	11	CALCIFOL WAF.....	85	CANDESARTAN CILEXETIL TAB 8 MG.....	13
BUTALBITAL-ASPIRIN-CAFF W/ CODEINE		CALCIPOTRIEN CRE 0.005%.....	69	CANDESARTAN CILEXETIL TAB 16 MG.....	13
CAP 50-325-40-30 MG.....	182	CALCIPOTRIENE-BETAMETHASONE		CANDESARTAN CILEXETIL TAB 32 MG.....	13
BUTALBITAL-ASPIRIN-CAFF W/ CODEINE		DIPROPIONATE FOAM 0.005-0.064%.....	70	CANDESARTAN TAB 4MG.....	13
CAP 50-325-40-30 MG.....	182	CALCIPOTRIENE CREAM 0.005%.....	69	CANDESARTAN TAB 8MG.....	13
BUT/APAP/CAF CAP.....	11	CALCIPOTRIENE OINT 0.005%.....	69	CANDESARTAN TAB 16MG.....	13
BUT/APAP/CAF CAP.....	11	CALCIPOTRIENE OINT 0.005%.....	69	CANDESARTAN TAB 32MG.....	13
BUT/APAP/CAF CAP CODEINE.....	182				

CANNABIDIOL SOLN 100 MG/ML.....	27	CARBAMAZEPINE TAB ER 12HR 100 MG	203	CARBIDOPA & LEVODOPA TAB ER 50-200	
CAPECITABINE TAB 150 MG.....	37	CARBAMAZEPINE TAB ER 12HR 200 MG....	203	MG.....	82
CAPECITABINE TAB 150MG.....	37	CARBAMAZEPINE TAB ER 12HR 400 MG....	203	CARBIDOPA TAB 25 MG.....	82
CAPECITABINE TAB 500 MG.....	37	CARBAMAZEPIN SUS 100/5ML.....	203	CARBIDOPA TAB 25MG.....	82
CAPECITABINE TAB 500MG.....	37	CARBAMAZEPIN TAB 100MG ER.....	203	CARBINOXAMINE MALEATE SOLN 4	
CAPEX SHA 0.01%.....	122	CARBAMAZEPIN TAB 200MG.....	203	MG/5ML.....	36
CAPHOSOL SOL.....	66	CARBAMAZEPIN TAB 200MG ER.....	203	CARBINOXAMINE MALEATE SOLN 4	
CAPIVASERTIB TAB 160 MG.....	39	CARBAMAZEPIN TAB 400MG ER.....	203	MG/5ML.....	36
CAPIVASERTIB TAB 200 MG.....	39	CARBIDOPA & LEVODOPA CAP ER 35-140		CARBINOXAMINE MALEATE TAB 4 MG.....	36
CAPIVASERTIB TAB THERAPY PACK 160 MG	39	MG.....	82	CARBINOXAMIN SOL 4MG/5ML.....	36
CAPIVASERTIB TAB THERAPY PACK 200 MG	39	CARBIDOPA & LEVODOPA CAP ER 52.5-		CARBINOXAMIN TAB 4MG.....	36
CAPLACIZUMAB-YHDP FOR INJ KIT 11 MG	188	210 MG.....	82	CARB/LEVO 50 TAB /ENTACAP.....	82
CAPLYTA CAP 10.5MG.....	7	CARBIDOPA & LEVODOPA CAP ER 70-280		CARB/LEVO 75 TAB /ENTACAP.....	82
CAPLYTA CAP 21MG.....	7	MG.....	82	CARB/LEVO100 TAB /ENTACAP.....	82
CAPLYTA CAP 42MG.....	7	CARBIDOPA & LEVODOPA CAP ER 87.5-		CARB/LEVO125 TAB /ENTACAP.....	82
CAPMATINIB HCL TAB 150 MG.....	169	350 MG.....	82	CARB/LEVO150 TAB /ENTACAP.....	82
CAPMATINIB HCL TAB 200 MG.....	169	CARBIDOPA-LEVODOPA-ENTACAPONE		CARB/LEVO200 TAB /ENTACAP.....	82
CAPRELSA TAB 100MG.....	166	TABS 12.5-50-200 MG.....	82	CARB/LEVO ER TAB 25-100MG.....	82
CAPRELSA TAB 300MG.....	166	CARBIDOPA-LEVODOPA-ENTACAPONE		CARB/LEVO ER TAB 50-200MG.....	82
CAPTOPR/HCTZ TAB 25-15MG.....	61	TABS 12.5-50-200 MG.....	83	CARB/LEVO TAB 10-100MG.....	82
CAPTOPR/HCTZ TAB 25-25MG.....	61	CARBIDOPA-LEVODOPA-ENTACAPONE		CARB/LEVO TAB 10-100MG.....	82
CAPTOPR/HCTZ TAB 50-15MG.....	61	TABS 18.75-75-200 MG.....	82	CARB/LEVO TAB 25-100MG.....	82
CAPTOPR/HCTZ TAB 50-25MG.....	61	CARBIDOPA-LEVODOPA-ENTACAPONE		CARB/LEVO TAB 25-100MG.....	82
CAPTOPRIL & HYDROCHLOROTHIAZIDE		TABS 18.75-75-200 MG.....	83	CARB/LEVO TAB 25-250MG.....	82
TAB 25-15 MG.....	61	CARBIDOPA-LEVODOPA-ENTACAPONE		CARB/LEVO TAB 25-250MG.....	82
CAPTOPRIL & HYDROCHLOROTHIAZIDE		TABS 25-100-200 MG.....	82	CARBOGEL GEL 940.....	144
TAB 25-25 MG.....	61	CARBIDOPA-LEVODOPA-ENTACAPONE		CARBOHOL GEL 940.....	144
CAPTOPRIL & HYDROCHLOROTHIAZIDE		TABS 25-100-200 MG.....	83	CARBOMER GEL AQUEOUS.....	144
TAB 50-15 MG.....	61	CARBIDOPA-LEVODOPA-ENTACAPONE		*CARBOMER GEL BASE**.....	144
CAPTOPRIL & HYDROCHLOROTHIAZIDE		TABS 31.25-125-200 MG.....	82	*CARBOMER GEL BASE**.....	144
TAB 50-25 MG.....	61	CARBIDOPA-LEVODOPA-ENTACAPONE		*CARBOMER GEL BASE**.....	144
CAPTOPRIL TAB 12.5 MG.....	13	TABS 31.25-125-200 MG.....	83	*CARBOMER GEL BASE**.....	144
CAPTOPRIL TAB 12.5MG.....	13	CARBIDOPA-LEVODOPA-ENTACAPONE		*CARBOMER GEL BASE**.....	151
CAPTOPRIL TAB 25 MG.....	13	TABS 37.5-150-200 MG.....	82	CARBOMER GEL HYDROALC.....	144
CAPTOPRIL TAB 25MG.....	13	CARBIDOPA-LEVODOPA-ENTACAPONE		CARBZAH SOL 4MG/5ML.....	36
CAPTOPRIL TAB 50 MG.....	13	TABS 37.5-150-200 MG.....	83	CARDURA TAB 1MG.....	10
CAPTOPRIL TAB 50MG.....	13	CARBIDOPA-LEVODOPA-ENTACAPONE		CARDURA TAB 2MG.....	10
CAPTOPRIL TAB 100 MG.....	13	TABS 50-200-200 MG.....	82	CARDURA TAB 4MG.....	10
CAPTOPRIL TAB 100MG.....	13	CARBIDOPA-LEVODOPA-ENTACAPONE		CARDURA TAB 8MG.....	10
CAPVAXIVE INJ 0.5ML.....	209	TABS 50-200-200 MG.....	83	CARDURA XL TAB 4MG.....	47
CARBAMAZEPIN CAP 100MG ER.....	202	CARBIDOPA-LEVODOPA ENTERAL SUSP		CARDURA XL TAB 8MG.....	47
CARBAMAZEPIN CAP 200MG ER.....	202	4.63-20 MG/ML.....	82	CAREFINE MIS 31GX8MM.....	144
CARBAMAZEPIN CAP 300MG ER.....	202	CARBIDOPA & LEVODOPA ORALLY		CAREFINE MIS 32GX4MM.....	75
CARBAMAZEPIN CHW 100MG.....	203	DISINTEGRATING TAB 10-100 MG.....	82	CAREFINE MIS 32GX5MM.....	75
CARBAMAZEPIN CHW 200MG.....	203	CARBIDOPA & LEVODOPA ORALLY		CAREFINE MIS 32GX6MM.....	75
CARBAMAZEPINE CAP ER 12HR 100 MG....	202	DISINTEGRATING TAB 25-100 MG.....	82	CAREPOINT SA MIS 23GX1".....	144
CARBAMAZEPINE CAP ER 12HR 200 MG....	202	CARBIDOPA & LEVODOPA ORALLY		CAREPOINT SA MIS 23GX11/2.....	144
CARBAMAZEPINE CAP ER 12HR 300 MG....	202	DISINTEGRATING TAB 25-250 MG.....	82	CAREPOINT SA MIS 25GX1".....	144
CARBAMAZEPINE CHEW TAB 100 MG.....	203	CARBIDOPA & LEVODOPA TAB 10-100 MG..	82	CAREPOINT SA MIS 25GX5/8".....	144
CARBAMAZEPINE CHEW TAB 200 MG.....	203	CARBIDOPA & LEVODOPA TAB 10-100 MG..	83	CAREPOINT SA MIS 25GX11/2.....	144
CARBAMAZEPINE SUSP 100 MG/5ML.....	203	CARBIDOPA & LEVODOPA TAB 25-100 MG..	82	CARESENS 30G MIS LANCETS.....	75
CARBAMAZEPINE SUSP 100 MG/5ML.....	204	CARBIDOPA & LEVODOPA TAB 25-100 MG..	83	CARESENS S LIQ CON A/B.....	75
CARBAMAZEPINE TAB 200 MG.....	203	CARBIDOPA & LEVODOPA TAB 25-250 MG..	82	CARESENS SOL CONTROL.....	75
CARBAMAZEPINE TAB 200 MG.....	203	CARBIDOPA & LEVODOPA TAB ER 25-100		CARETOUCH MIS 27GX1.5".....	144
CARBAMAZEPINE TAB 200 MG.....	204	MG.....	82	CARETOUCH MIS 31GX5MM.....	144

CARETOUCH MIS 31GX6MM	144	CEFADROXIL FOR SUSP 500 MG/5ML	50	CEPHALEXIN CAP 750MG.....	51
CARETOUCH MIS 31GX8MM	144	CEFADROXIL SUS 250/5ML	50	CEPHALEXIN FOR SUSP 125 MG/5ML.....	51
CARETOUCH MIS 32GX4MM	75	CEFADROXIL SUS 500/5ML.....	50	CEPHALEXIN FOR SUSP 250 MG/5ML.....	51
CARETOUCH MIS 32GX5MM	75	CEFADROXIL TAB 1 GM.....	50	CEPHALEXIN SUS 125/5ML	51
CARETOUCH MIS EJECTOR	80	CEFADROXIL TAB 1GM	50	CEPHALEXIN SUS 250/5ML	51
CARETOUCH MIS LANC 26G	75	CEFDINIR CAP 300 MG	50	CEPHALEXIN TAB 250 MG.....	51
CARETOUCH MIS LANC 28G	75	CEFDINIR CAP 300MG.....	50	CEPHALEXIN TAB 250MG.....	51
CARETOUCH MIS LANC 30G	75	CEFDINIR FOR SUSP 125 MG/5ML	50	CEPHALEXIN TAB 500 MG	51
CARETOUCH MIS TWIST 28	75	CEFDINIR FOR SUSP 250 MG/5ML	50	CEPHALEXIN TAB 500MG.....	51
CARETOUCH MIS TWIST 30	75	CEFDINIR SUS 125/5ML	50	CEQUR SIMPL KIT PATCH 2U	145
CARETOUCH MIS TWIST 33	75	CEFDINIR SUS 250/5ML	50	CERDELGA CAP 84MG	109
CARGLUMIC ACID SOLUBLE TAB 200 MG...85		CEFIXIME CAP 400 MG	50	CERTOLIZUMAB PEGOL PREFILLED	
CARGLUMIC TAB 200MG.....	85	CEFIXIME CAP 400MG	50	SYRINGE KIT 200 MG/ML.....	131
CARIPRAZINE HCL CAP 1.5 MG (BASE		CEFIXIME FOR SUSP 100 MG/5ML.....	50	CERTOLIZUMAB PEGOL PREFILLED	
EQUIVALENT).....	9	CEFIXIME FOR SUSP 200 MG/5ML.....	50	SYRINGE KIT 200 MG/ML.....	131
CARIPRAZINE HCL CAP 3 MG (BASE		CEFIXIME SUS 100/5ML	50	CERVICAL CAP 22 MM	149
EQUIVALENT).....	9	CEFIXIME SUS 200/5ML	50	CERVICAL CAP 26 MM	149
CARIPRAZINE HCL CAP 4.5 MG (BASE		CEFPODO PROX SUS 50MG/5ML	51	CERVICAL CAP 30 MM	149
EQUIVALENT).....	9	CEFPODO PROX SUS 100/5ML.....	51	CERVIDIL VAG MIS 10MG INS.....	111
CARIPRAZINE HCL CAP 6 MG (BASE		CEFPODOXIME PROXETIL FOR SUSP 50		CETRAXAL SOL 0.2%.....	186
EQUIVALENT).....	9	MG/5ML	51	CEVIMELINE CAP 30MG	66
CARISOPRODOL TAB 350 MG.....	197	CEFPODOXIME PROXETIL FOR SUSP 100		CEVIMELINE HCL CAP 30 MG.....	66
CARISOPRODOL TAB 350MG	197	MG/5ML	51	CHARLOTTE 24 CHW FE 1/20.....	96
CAROSPIR SUS 25MG/5ML.....	81	CEFPODOXIME PROXETIL TAB 100 MG	51	CHATEAL EQ TAB 0.15/30	96
CARTEOLOL HCL OPTH SOLN 1%.....	178	CEFPODOXIME PROXETIL TAB 200 MG	51	CHEMET CAP 100MG.....	92
CARTEOLOL SOL 1% OP.....	178	CEFPODOXIME TAB 100MG.....	51	CHEMSIL K-51 GEL.....	145
CARTIA XT CAP 120/24HR	56	CEFPODOXIME TAB 200MG.....	51	CHEMSTRIP BG MIS LOG	145
CARTIA XT CAP 180/24HR	56	CEFPROZIL FOR SUSP 125 MG/5ML.....	51	CHEMSTRIP K TES	75
CARTIA XT CAP 240/24HR	56	CEFPROZIL FOR SUSP 250 MG/5ML	51	CHEMSTRIP TES UGK	75
CARTIA XT CAP 300/24HR	56	CEFPROZIL SUS 125/5ML	51	CHENODIOL (BASDS) TAB 250 MG.....	107
CARVEDILOL TAB 3.125 MG	49	CEFPROZIL SUS 250/5ML.....	51	CHERRY SYP	145
CARVEDILOL TAB 3.125MG.....	49	CEFPROZIL TAB 250 MG	51	CHERRY SYRUP	145
CARVEDILOL TAB 6.25 MG	49	CEFPROZIL TAB 250MG.....	51	CHICKEN/PEAS POW CARROTS.....	213
CARVEDILOL TAB 6.25MG	49	CEFPROZIL TAB 500 MG	51	CHICKEN/PEAS POW PEDIATRI.....	213
CARVEDILOL TAB 12.5 MG	49	CEFPROZIL TAB 500MG.....	51	CHLORAMBUCIL TAB 2 MG.....	9
CARVEDILOL TAB 12.5MG.....	49	CEFUROXIME AXETIL TAB 250 MG.....	51	CHLORDIAZEP CAP 5MG.....	48
CARVEDILOL TAB 25 MG	49	CEFUROXIME AXETIL TAB 500 MG	51	CHLORDIAZEP CAP 10MG.....	48
CARVEDILOL TAB 25MG	49	CEFUROXIME TAB 250MG.....	51	CHLORDIAZEP CAP 25MG	48
CAVERJECT IM KIT 10MCG	111	CEFUROXIME TAB 500MG	51	CHLORDIAZEPOXIDE-AMITRIPTYLINE	
CAVERJECT IM KIT 20MCG	111	CELECOXIB CAP 50 MG.....	173	TAB 5-12.5 MG.....	208
CAVERJECT INJ 20MCG	111	CELECOXIB CAP 50MG	173	CHLORDIAZEPOXIDE-AMITRIPTYLINE	
CAVERJECT INJ 40MCG	111	CELECOXIB CAP 100 MG.....	173	TAB 10-25 MG	208
CAYA DPR	145	CELECOXIB CAP 100MG	173	CHLORDIAZEPOXIDE HCL CAP 5 MG	48
CDP/AMITRIP TAB 5-12.5MG	208	CELECOXIB CAP 200 MG	173	CHLORDIAZEPOXIDE HCL CAP 10 MG	48
CDP/AMITRIP TAB 10-25MG	208	CELECOXIB CAP 200MG	173	CHLORDIAZEPOXIDE HCL CAP 25 MG	48
CEFACLOR CAP 250 MG.....	50	CELECOXIB CAP 400 MG	173	CHLORHEX GLU SOL 0.12%	66
CEFACLOR CAP 250MG	50	CELECOXIB CAP 400MG	173	CHLORHEXIDINE GLUCONATE SOLN 0.12% 66	
CEFACLOR CAP 500 MG	50	CELONTIN CAP 300MG.....	59	CHLORHEXIDINE GLUCONATE SOLN 0.12% 67	
CEFACLOR CAP 500MG.....	50	CENEGERMIN-BKBJ OPTH SOLN		CHLORHEXIDINE GLUCONATE SOLN 0.12% 67	
CEFACLOR ER TAB 500MG	50	0.002% (20 MCG/ML)	176	CHLORHEXIDINE GLUCONATE SOLN 4% ...68	
CEFACLOR MONOHYDRATE TAB ER 12HR		CEPHALEXIN CAP 250 MG	51	CHLOROQUINE PHOSPHATE TAB 250 MG...40	
500 MG	50	CEPHALEXIN CAP 250MG.....	51	CHLOROQUINE PHOSPHATE TAB 500 MG...40	
CEFADROXIL CAP 500 MG	50	CEPHALEXIN CAP 500 MG.....	51	CHLOROQUINE TAB 250MG.....	40
CEFADROXIL CAP 500MG	50	CEPHALEXIN CAP 500MG	51	CHLOROQUINE TAB 500MG	40
CEFADROXIL FOR SUSP 250 MG/5ML.....	50	CEPHALEXIN CAP 750 MG	51	CHLOROTHIAZIDE (BULK) POWDER.....	81

CHLOROTHIAZIDE SUSP 250 MG/5ML.....	81	CICLESONIDE NASAL AEROSOL SOLN 37		CIPROFLOXACIN HCL OTIC SOLN 0.2%	
CHLOROTHAZI POW	81	MCG/ACT (50 MCG/VALVE)	20	(BASE EQUIVALENT).....	186
CHLORPROMAZINE HCL (BULK) POWDER...	6	CICLODAN SOL 8%.....	33	CIPROFLOXACIN HCL OTIC SOLN 0.2%	
CHLORPROMAZINE HCL TAB 10 MG	6	CICLOPIROX CRE 0.77%	33	(BASE EQUIVALENT).....	186
CHLORPROMAZINE HCL TAB 25 MG	6	CICLOPIROX GEL 0.77%	33	CIPROFLOXACIN HCL TAB 100 MG (BASE	
CHLORPROMAZINE HCL TAB 50 MG	6	CICLOPIROX GEL 0.77%	33	EQUIV).....	192
CHLORPROMAZINE HCL TAB 100 MG	6	CICLOPIROX OLAMINE CREAM 0.77%		CIPROFLOXACIN HCL TAB 250 MG (BASE	
CHLORPROMAZINE HCL TAB 200 MG.....	6	(BASE EQUIV).....	33	EQUIV).....	192
CHLORPROMAZ POW HCL	6	CICLOPIROX OLAMINE SUSP 0.77%		CIPROFLOXACIN HCL TAB 250 MG (BASE	
CHLORPROMAZ TAB 10MG.....	6	(BASE EQUIV).....	33	EQUIV).....	192
CHLORPROMAZ TAB 25MG.....	6	CICLOPIROX SHA 1%.....	33	CIPROFLOXACIN HCL TAB 500 MG (BASE	
CHLORPROMAZ TAB 50MG	6	CICLOPIROX SHAMPOO 1%.....	33	EQUIV).....	192
CHLORPROMAZ TAB 100MG	6	CICLOPIROX SOL 8%	33	CIPROFLOXACIN HCL TAB 500 MG (BASE	
CHLORPROMAZ TAB 200MG	6	CICLOPIROX SOLUTION 8%	33	EQUIV).....	192
CHLORTHALIDONE TAB 25 MG.....	81	CICLOPIROX SOLUTION 8%	33	CIPROFLOXACIN HCL TAB 750 MG (BASE	
CHLORTHALIDONE TAB 50 MG	81	CICLOPIROX SUS 0.77%	33	EQUIV).....	192
CHLORTHALID TAB 25MG.....	81	CILOSTAZOL TAB 50 MG	188	CIPROFLOXACN SOL 0.2%	186
CHLORTHALID TAB 50MG	81	CILOSTAZOL TAB 50MG	188	CIPROFLOXACN SOL 0.3% OP	178
CHLORZOXAZONE TAB 500 MG.....	197	CILOSTAZOL TAB 100 MG.....	188	CIPROFLOXACN TAB 100MG.....	192
CHLORZOXAZON TAB 500MG.....	197	CILOSTAZOL TAB 100MG.....	188	CIPROFLOXACN TAB 250MG.....	192
CHOLBAM CAP 50MG.....	109	CILOXAN OIN 0.3% OP.....	177	CIPROFLOXACN TAB 500MG	192
CHOLBAM CAP 250MG.....	109	CIMDUO TAB 300-300	17	CIPROFLOXACN TAB 750MG.....	192
CHOLECALCIFEROL CAP 125 MCG (5000		CIMETIDINE HCL SOLN 300 MG/5ML	121	CIPRO TAB 250MG	192
UNIT)	92	CIMETIDINE SOL 300/5ML	121	CIPRO TAB 500MG.....	192
CHOLESTYRAMINE (BULK) POWDER	145	CIMETIDINE TAB 200 MG.....	121	CISPLATIN (BULK) POWDER.....	145
CHOLESTYRAMINE (BULK) POWDER	145	CIMETIDINE TAB 200MG	121	CISPLATIN POW	145
CHOLESTYRAMINE LIGHT POWDER 4		CIMETIDINE TAB 300 MG.....	121	CITALOPRAM HYDROBROMIDE ORAL	
GM/DOSE.....	84	CIMETIDINE TAB 300MG	121	SOLN 10 MG/5ML	204
CHOLESTYRAMINE LIGHT POWDER 4		CIMETIDINE TAB 400 MG.....	121	CITALOPRAM HYDROBROMIDE TAB 10	
GM/DOSE.....	85	CIMETIDINE TAB 400MG	121	MG (BASE EQUIV)	204
CHOLESTYRAMINE LIGHT POWDER 4		CIMETIDINE TAB 800 MG.....	121	CITALOPRAM HYDROBROMIDE TAB 20	
GM/DOSE.....	85	CIMETIDINE TAB 800MG	121	MG (BASE EQUIV)	204
CHOLESTYRAMINE LIGHT POWDER		CIMZIA PREFL KIT 200MG/ML.....	131	CITALOPRAM HYDROBROMIDE TAB 40	
PACKETS 4 GM.....	84	CIMZIA START KIT 200MG/ML.....	131	MG (BASE EQUIV)	204
CHOLESTYRAMINE LIGHT POWDER		CINACALCET HCL TAB 30 MG (BASE		CITALOPRAM SOL 10MG/5ML	204
PACKETS 4 GM.....	85	EQUIV).....	141	CITALOPRAM TAB 10MG	204
CHOLESTYRAMINE POWDER 4 GM/DOSE ..	84	CINACALCET HCL TAB 60 MG (BASE		CITALOPRAM TAB 20MG	204
CHOLESTYRAMINE POWDER 4 GM/DOSE ..	85	EQUIV).....	142	CITALOPRAM TAB 40MG.....	204
CHOLESTYRAMINE POWDER PACKETS 4		CINACALCET HCL TAB 90 MG (BASE		CITRANATAL CAP HARMONY	213
GM.....	84	EQUIV).....	142	CITRANATAL CAP MEDLEY.....	213
CHOLESTYRAMINE POWDER PACKETS 4		CINACALCET TAB 30MG	141	CITRANATAL MIS 90 DHA.....	213
GM.....	85	CINACALCET TAB 60MG	142	CITRANATAL MIS B-CALM	213
CHOLESTYRAMI POW.....	145	CINACALCET TAB 90MG	142	CITRANATAL PAK ASSURE	213
CHOLESTYRAMI POW RESIN	145	CIPRO (5%) SUS 250MG/5	192	CITROMA SOL LEMONY.....	138
CHOLESTYRAM POW 4GM	84	CIPRO (10%) SUS 500MG/5.....	192	CITRULLINE (BULK) POWDER	145
CHOLESTYRAM POW 4GM	84	CIPRO/DEXA SUS 0.3-0.1%.....	186	CITRULLINE (BULK) POWDER	154
CHOLESTYRAM POW 4GM LITE.....	84	CIPROFLOXACIN-DEXAMETHASONE		CITRULLINE CAP 600 MG	154
CHOLESTYRAM POW 4GM LITE.....	84	OTIC SUSP 0.3-0.1%.....	186	CITRULLINE ORAL PACKET 1 GM	145
CHOLIC ACID CAP 50 MG.....	109	CIPROFLOXACIN FOR ORAL SUSP 250		CITRULLINE POW 1000.....	145
CHOLIC ACID CAP 250 MG.....	109	MG/5ML (5%) (5 GM/100ML)	192	CITRULLINE POW (L)	145
CHOSEN MIS 30G.....	75	CIPROFLOXACIN FOR ORAL SUSP 500		CLADRIBINE TAB THERAPY PACK 10 MG	
CHOSEN MIS LANCING.....	80	MG/5ML (10%) (10 GM/100ML).....	192	(4 TABS).....	171
CHOSEN MIS SAFE 28G.....	75	CIPROFLOXACIN HCL OPHTH OINT 0.3% ..	177	CLADRIBINE TAB THERAPY PACK 10 MG	
CIBINQO TAB 50MG	73	CIPROFLOXACIN HCL OPHTH SOLN 0.3%		(5 TABS).....	171
CIBINQO TAB 100MG	73	(BASE EQUIVALENT).....	178	CLADRIBINE TAB THERAPY PACK 10 MG	
CIBINQO TAB 200MG	73			(6 TABS)	171

CLADRIBINE TAB THERAPY PACK 10 MG (7 TABS).....	171	CLINDAMYCIN HCL CAP 300 MG	23	CLOBETASOL PROPIONATE SPRAY 0.05% ..	122
CLADRIBINE TAB THERAPY PACK 10 MG (8 TABS).....	171	CLINDAMYCIN LOT 1%.....	69	CLOBETASOL SOL 0.05%	122
CLADRIBINE TAB THERAPY PACK 10 MG (9 TABS)	171	CLINDAMYCIN MIS 1%.....	69	CLOBETASOL SPR 0.05%.....	122
CLADRIBINE TAB THERAPY PACK 10 MG (10 TABS)	171	CLINDAMYCIN PALMITATE HCL FOR SOLN 75 MG/5ML (BASE EQUIV)	23	CLOCORTOLONE CRE 0.1%	122
CLARAVIS CAP 10MG	69	CLINDAMYCIN PALMITATE HCL FOR SOLN 75 MG/5ML (BASE EQUIV)	23	CLOCORTOLONE PIVALATE CREAM 0.1% ..	122
CLARAVIS CAP 20MG.....	69	CLINDAMYCIN PHOSPHATE FOAM 1%	69	CLOMIPRAMINE CAP 25MG.....	208
CLARAVIS CAP 30MG.....	69	CLINDAMYCIN PHOSPHATE FOAM 1%	69	CLOMIPRAMINE CAP 50MG	208
CLARAVIS CAP 40MG.....	69	CLINDAMYCIN PHOSPHATE GEL 1% (ONCE-DAILY)	69	CLOMIPRAMINE CAP 75MG.....	208
CLARITHROMYCIN FOR SUSP 125 MG/5ML	140	CLINDAMYCIN PHOSPHATE GEL 1% (TWICE-DAILY)	69	CLOMIPRAMINE HCL CAP 25 MG	208
CLARITHROMYCIN FOR SUSP 250 MG/5ML	140	CLINDAMYCIN PHOSPHATE LOTION 1%	69	CLOMIPRAMINE HCL CAP 50 MG	208
CLARITHROMYCIN TAB 250 MG	140	CLINDAMYCIN PHOSPHATE (ONE DOSE) VAGINAL CREAM 2%.....	23	CLOMIPRAMINE HCL CAP 75 MG	208
CLARITHROMYCIN TAB 500 MG	140	CLINDAMYCIN PHOSPHATE SOLN 1%.....	69	CLONAZEPAM ORALLY DISINTEGRATING TAB 0.5 MG.....	48
CLARITHROMYCIN TAB ER 24HR 500 MG ..	140	CLINDAMYCIN PHOSPHATE SWAB 1%.....	69	CLONAZEPAM ORALLY DISINTEGRATING TAB 0.25 MG	48
CLARITHROMYC SUS 125/5ML.....	140	CLINDAMYCIN PHOSPHATE SWAB 1%.....	69	CLONAZEPAM ORALLY DISINTEGRATING TAB 0.125 MG	48
CLARITHROMYC SUS 250/5ML	140	CLINDAMYCIN PHOSPHATE SWAB 1%.....	69	CLONAZEPAM ORALLY DISINTEGRATING TAB 1 MG	48
CLARITHROMYC TAB 250MG	140	CLINDAMYCIN PHOSPHATE VAGINAL CREAM 2%	23	CLONAZEPAM ORALLY DISINTEGRATING TAB 2 MG.....	48
CLARITHROMYC TAB 500MG	140	CLINDAMYCIN PHOSPHATE VAGINAL CREAM 2%	23	CLONAZEPAM TAB 0.5 MG	48
CLARITHROMYC TAB 500MG ER	140	CLINDAMYCIN PHOSPHATE VAGINAL GEL 2%.....	25	CLONAZEPAM TAB 0.5MG.....	48
CLEARLAX POW	137	CLINDAMYCIN PHOSPHATE VAGINAL GEL 2%.....	25	CLONAZEPAM TAB 1 MG	48
CLEMASTINE FUMARATE TAB 2.68 MG.....	36	CLINDAMYCIN PHOSPH-BENZOYL PEROXIDE (REFRIG) GEL 1.2 (1)-5%.....	69	CLONAZEPAM TAB 1MG.....	48
CLEMASTINE FUMARATE TAB 2.68 MG.....	36	CLINDAMYCIN PHOSPH-BENZOYL PEROXIDE (REFRIG) GEL 1.2 (1)-5%.....	71	CLONAZEPAM TAB 2 MG	48
CLEMASTINE FUMARATE TAB 2.68 MG.....	36	CLINDAMYCIN SOL 1%.....	69	CLONAZEPAM TAB 2MG.....	48
CLEMASTINE TAB 2.68MG	36	CLINDAMYCIN SOL 75MG/5ML.....	23	CLONAZEP ODT TAB 0.5MG	48
CLEMASZ TAB 2.68MG	36	CLINDESSE CRE 2%.....	23	CLONAZEP ODT TAB 0.25MG.....	48
CLEMSZA TAB 2.68MG	36	CLINPRO 5000 PST 1.1%	66	CLONAZEP ODT TAB 0.125MG.....	48
CLENPIQ SOL	138	CLOBAZAM ORAL FILM 5 MG	107	CLONAZEP ODT TAB 1MG	48
CLEOCIN CAP 75MG	23	CLOBAZAM ORAL FILM 10 MG.....	107	CLONAZEP ODT TAB 2MG	48
CLEOCIN CAP 150MG.....	23	CLOBAZAM ORAL FILM 20 MG.....	107	CLONIDINE DIS 0.1/24HR.....	10
CLEOCIN CAP 300MG	23	CLOBAZAM SUS 2.5MG/ML	106	CLONIDINE DIS 0.2/24HR.....	10
CLEOCIN CRE 2% VAG	23	CLOBAZAM SUSPENSION 2.5 MG/ML.....	107	CLONIDINE DIS 0.3/24HR.....	10
CLEOCIN PED SOL 75MG/5ML.....	23	CLOBAZAM TAB 10 MG.....	106	CLONIDINE HCL EXTENDED RELEASE SUSP 0.1 MG/ML	47
CLESROVIMAB-CFOR IM SOLN PREFILLED SYRINGE 105 MG/0.7ML.....	135	CLOBAZAM TAB 10 MG.....	107	CLONIDINE HCL TAB 0.1 MG	10
CLIMARA PRO DIS WEEKLY	96	CLOBAZAM TAB 10MG	106	CLONIDINE HCL TAB 0.2 MG	10
CLINDACIN AER 1%	69	CLOBAZAM TAB 20 MG.....	106	CLONIDINE HCL TAB 0.3 MG	10
CLINDACIN MIS ETZ 1%.....	69	CLOBAZAM TAB 20 MG.....	107	CLONIDINE HCL TAB ER 12HR 0.1 MG	45
CLINDACIN-P PAD 1%.....	69	CLOBAZAM TAB 20MG	106	CLONIDINE TAB 0.1MG	10
CLINDAMY/BEN GEL 1.2-5%	69	CLOBAZAM TAB 20 MG.....	107	CLONIDINE TAB 0.1MG ER	45
CLINDAMYCIN AER 1%.....	69	CLOBAZAM TAB 20MG	106	CLONIDINE TAB 0.2MG	10
CLINDAMYCIN CAP 75MG	23	CLOBETASOL CRE 0.05%	122	CLONIDINE TAB 0.3MG	10
CLINDAMYCIN CAP 150MG	23	CLOBETASOL E CRE 0.05%.....	122	CLONIDINE TD PATCH WEEKLY 0.1 MG/24HR	10
CLINDAMYCIN CAP 300MG.....	23	CLOBETASOL GEL 0.05%	122	CLONIDINE TD PATCH WEEKLY 0.2 MG/24HR	10
CLINDAMYCIN CRE 2% VAG.....	23	CLOBETASOL OIN 0.05%.....	122	CLONIDINE TD PATCH WEEKLY 0.3 MG/24HR	10
CLINDAMYCIN GEL 1%.....	69	CLOBETASOL PROPIONATE CREAM 0.05% ..	122	CLOPIDOGREL BISULFATE (BULK) POWDER	145
CLINDAMYCIN GEL 1%.....	69	CLOBETASOL PROPIONATE EMOLLIENT BASE CREAM 0.05%.....	122	CLOPIDOGREL BISULFATE TAB 75 MG (BASE EQUIV).....	188
CLINDAMYCIN HCL CAP 75 MG.....	23	CLOBETASOL PROPIONATE GEL 0.05%....	122		
CLINDAMYCIN HCL CAP 75 MG.....	23	CLOBETASOL PROPIONATE OINT 0.05%....	122		
CLINDAMYCIN HCL CAP 150 MG.....	23	CLOBETASOL PROPIONATE SOLN 0.05% ..	122		
CLINDAMYCIN HCL CAP 150 MG.....	23				
CLINDAMYCIN HCL CAP 300 MG	23				





CYANOCOBALAMIN NASAL SPRAY 500 MCG/0.1ML	214	CYCLOSPORINE (OPHTH) EMULSION 0.05%	176	DANAZOL CAP 200 MG	12
CYANOCOBALAMIN NASAL SPRAY 500 MCG/0.1ML	215	CYCLOSPORINE ORAL SOLN 100 MG/ML	133	DANAZOL CAP 200MG	12
CYANOCOBALAMIN TAB 100 MCG	219	CYCLOSPORINE POW	146	DANICOPAN TAB 100 MG	12
CYANOCOBALAMIN TAB 1000 MCG	219	CYCLOSPORINE POW A	146	DANICOPAN TAB THERAPY PACK 50 MG & 100 MG	12
CYANOCOBALAM SOL 2000MCG	220	CYCLOSPORINE SOL MODIFIED	131	DANTRIUM CAP 25MG	197
CYANOCOBALAM SPR 500MCG	214	CYPROHEPTADINE HCL SYRUP 2 MG/5ML	36	DANTROLENE CAP 25MG	197
CYANOCOBAL POW	220	CYPROHEPTADINE HCL TAB 4 MG	36	DANTROLENE CAP 50MG	197
CYCLOBENZAPRINE HCL TAB 5 MG	197	CYPROHEPTAD SYP 2MG/5ML	36	DANTROLENE CAP 100MG	197
CYCLOBENZAPRINE HCL TAB 10 MG	197	CYPROHEPTAD TAB 4MG	36	DANTROLENE SODIUM CAP 25 MG	197
CYCLOBENZAPR TAB 5MG	197	CYRED EQ TAB	96	DANTROLENE SODIUM CAP 25 MG	197
CYCLOBENZAPR TAB 10MG	197	CYSTADANE POW	109	DANTROLENE SODIUM CAP 50 MG	197
CYCLOGYL SOL 0.5% OP	175	CYSTADROPS SOL 0.37%	175	DANTROLENE SODIUM CAP 100 MG	197
CYCLOGYL SOL 1% OP	175	CYSTAGON CAP 50MG	109	DAPRODUSTAT TAB 1 MG	53
CYCLOGYL SOL 2% OP	175	CYSTAGON CAP 150MG	109	DAPRODUSTAT TAB 2 MG	53
CYCLOMYDRIL SOL OP	176	CYSTARAN SOL 0.44%	175	DAPRODUSTAT TAB 4 MG	53
CYCLOPENTOLATE HCL OPTH SOLN 0.5%	175	CYSTEAMINE BITARTRATE CAP 50 MG	109	DAPRODUSTAT TAB 6 MG	53
CYCLOPENTOLATE HCL OPTH SOLN 1%	175	CYSTEAMINE BITARTRATE CAP 150 MG	109	DAPRODUSTAT TAB 8 MG	53
CYCLOPENTOLATE HCL OPTH SOLN 1%	175	CYSTEAMINE BITARTRATE DELAYED RELEASE GRANULES PACKET 75 MG	110	DAPSONE TAB 25 MG	37
CYCLOPENTOLATE HCL OPTH SOLN 2%	175	CYSTEAMINE BITARTRATE DELAYED RELEASE GRANULES PACKET 300 MG	109	DAPSONE TAB 25MG	37
CYCLOPENTOLATE W/ PHENYLEPHRINE OPTH SOLN 0.2-1%	176	CYSTEAMINE HCL OPTH SOLN 0.37% (BASE EQUIVALENT)	175	DAPSONE TAB 100 MG	37
CYCLOPENTOL SOL 1% OP	175	CYSTEAMINE HCL OPTH SOLN 0.44% (BASE EQUIVALENT)	175	DAPSONE TAB 100MG	37
CYCLOPHOSPHAMIDE (BULK) POWDER	146	CYSTINE PACKET 500 MG	147	DAPTACEL INJ	210
CYCLOPHOSPHAMIDE CAP 25 MG	9	CYSTINE PAK 500MG	147	DARAPRIM TAB 25MG	40
CYCLOPHOSPHAMIDE CAP 50 MG	9	CYTOTEC TAB 100MCG	190	DARBEPOETIN ALFA SOLN INJ 25 MCG/ML	52
CYCLOPHOSPHAMIDE TAB 25 MG	9	CYTOTEC TAB 200MCG	190	DARBEPOETIN ALFA SOLN INJ 40 MCG/ML	52
CYCLOPHOSPHAMIDE TAB 50 MG	9	CYTRA K GRA CRYSTALS	86	DARBEPOETIN ALFA SOLN INJ 60 MCG/ML	53
CYCLOPHOSPHA POW	146	DABIGATRAN CAP 75MG	25	DARBEPOETIN ALFA SOLN INJ 100 MCG/ML	52
CYCLOPHOSPH CAP 25MG	9	DABIGATRAN CAP 110MG	25	DARBEPOETIN ALFA SOLN INJ 200 MCG/ML	52
CYCLOPHOSPH CAP 50MG	9	DABIGATRAN CAP 150MG	25	DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 10 MCG/0.4ML	52
CYCLOPHOSPH TAB 25MG	9	DABIGATRAN CAP 150MG	25	DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 25 MCG/0.42ML	52
CYCLOPHOSPH TAB 50MG	9	DABIGATRAN ETEXILATE MESYLATE CAP 75 MG (ETEXILATE BASE EQ)	25	DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 40 MCG/0.4ML	52
CYCLOSERINE CAP 250 MG	42	DABIGATRAN ETEXILATE MESYLATE CAP 110 MG (ETEXILATE BASE EQ)	25	DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 60 MCG/0.3ML	53
CYCLOSERINE CAP 250MG	42	DABIGATRAN ETEXILATE MESYLATE CAP 150 MG (ETEXILATE BASE EQ)	25	DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 100 MCG/0.5ML	52
CYCLOSPORINE (BULK) POWDER	146	DABRAFENIB MESYLATE CAP 50 MG (BASE EQUIVALENT)	169	DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 150 MCG/0.3ML	52
CYCLOSPORINE (BULK) POWDER	146	DABRAFENIB MESYLATE CAP 75 MG (BASE EQUIVALENT)	169	DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 200 MCG/0.4ML	52
CYCLOSPORINE CAP 25 MG	131	DABRAFENIB MESYLATE CAP 75 MG (BASE EQUIVALENT)	169	DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 300 MCG/0.6ML	52
CYCLOSPORINE CAP 25MG	131	DABRAFENIB MESYLATE TAB FOR ORAL SUSP 10 MG (BASE EQUIV)	169	DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 500 MCG/ML	52
CYCLOSPORINE CAP 25MG MOD	131	DACOMITINIB TAB 15 MG	170	DAROLUTAMIDE TAB 300 MG	20
CYCLOSPORINE CAP 50MG MOD	131	DACOMITINIB TAB 30 MG	170	DARUNAVIR-COBICISTAT TAB 675-150 MG	19
CYCLOSPORINE CAP 100 MG	131	DACOMITINIB TAB 45 MG	170	DARUNAVIR-COBICISTAT TAB 800-150 MG	19
CYCLOSPORINE CAP 100MG	131	DAILY FIBER POW 43%	137	DARUNAVIR ORAL SUSP 100 MG/ML	19
CYCLOSPORINE CAP 100MG MD	131	DALFAMPRIDINE TAB ER 12HR 10 MG	171	DARUNAVIR TAB 75 MG	19
CYCLOSPORINE MODIFIED CAP 25 MG	131	DALFAMPRIDIN TAB 10MG ER	171	DARUNAVIR TAB 150 MG	19
CYCLOSPORINE MODIFIED CAP 25 MG	132	DANAZOL CAP 50 MG	12	DARUNAVIR TAB 600 MG	19
CYCLOSPORINE MODIFIED CAP 50 MG	131	DANAZOL CAP 50MG	12		
CYCLOSPORINE MODIFIED CAP 100 MG	131	DANAZOL CAP 100 MG	12		
CYCLOSPORINE MODIFIED CAP 100 MG	132	DANAZOL CAP 100MG	12		
CYCLOSPORINE MODIFIED ORAL SOLN 100 MG/ML	131				
CYCLOSPORINE MODIFIED ORAL SOLN 100 MG/ML	132				
CYCLOSPORINE (OPHTH) EMULSION 0.1%	176				

DARUNAVIR TAB 600MG	19	DEGARELIX ACETATE FOR INJ 120 MG/ VIAL (240 MG DOSE)	130	DESIPRAMINE TAB 100MG	208
DARUNAVIR TAB 800 MG	19	DELAFOXACIN MEGLUMINE TAB 450 MG (BASE EQUIV)	192	DESIPRAMINE TAB 150MG	208
DARUNAVIR TAB 800MG	19	DELESTROGEN INJ 10MG/ML	96	DESMOPRESSIN ACETATE INJ 4 MCG/ML ..	126
DASATINIB TAB 20 MG	166	DELESTROGEN INJ 20MG/ML	96	DESMOPRESSIN ACETATE INJ 4 MCG/ML ..	126
DASATINIB TAB 20MG	166	DELESTROGEN INJ 40MG/ML	96	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01%	126
DASATINIB TAB 50 MG	166	DELSTRIGO TAB	16	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	126
DASATINIB TAB 50MG	166	DELYLA TAB 0.1-0.02	96	DESMOPRESSIN ACETATE PRESERVATIVE FREE (PF) INJ 4 MCG/ML ..	126
DASATINIB TAB 70 MG	166	DEMECLOCYCLINE HCL TAB 150 MG	206	DESMOPRESSIN ACETATE SUBLINGUAL TAB 27.7 MCG	126
DASATINIB TAB 80 MG	166	DEMECLOCYCLINE HCL TAB 300 MG	206	DESMOPRESSIN ACETATE SUBLINGUAL TAB 55.3 MCG	126
DASATINIB TAB 80MG	166	DEMECLOCYCL TAB 150MG	206	DESMOPRESSIN ACETATE TAB 0.1 MG	126
DASATINIB TAB 100 MG	166	DEMECLOCYCL TAB 300MG	206	DESMOPRESSIN ACETATE TAB 0.2 MG	126
DASATINIB TAB 100MG	166	DEMSEER CAP 250MG	61	DESMOPRESSIN INJ 4MCG/ML	126
DASATINIB TAB 140 MG	166	DENAVIR CRE 1%	36	DESMOPRESSIN INJ 4MCG/ML	126
DASATINIB TAB 140MG	166	DENGUE VIRUS VACCINE LIVE TETRAVALENT FOR SUBCUTANEOUS SUSP	210	DESMOPRESSIN INJ 40/10ML	126
DASETTA TAB 1/35	96	DENGVAXIA SUS	210	DESMOPRESSIN SPR 0.01%	126
DASETTA TAB 7/7/7	96	DENTA 5000 CRE PLUS	66	DESMOPRESSIN SPR 0.01%	126
DASIGLUCAGON HCL SUBCUTANEOUS SOLN AUTO-INJ 0.6 MG/0.6ML	115	DENTA 5000 CRE PLUS 2PK	66	DESMOPRESSIN TAB 0.1MG	126
DASIGLUCAGON HCL SUBCUTANEOUS SOLN PREF SYRINGE 0.6 MG/0.6ML	115	DENTA 5000 GEL PLUS SEN	66	DESMOPRESSIN TAB 0.2MG	126
DAURISMO TAB 25MG	166	DENTAGEL GEL 1.1%	66	DESO/ETHINYL TAB ESTRADIO	97
DAURISMO TAB 100MG	166	DEPAKOTE ER TAB 250MG	170	DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5)	95
DAYBUE SOL 200MG/ML	63	DEPAKOTE ER TAB 500MG	170	DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5)	97
DAYPRO TAB 600MG	173	DEPAKOTE SPR CAP 125MG	170	DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5)	100
DAYSEE TAB	96	DEPAKOTE TAB 125MG DR	170	DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5)	103
DEBACTEROL SOL 30-50%	66	DEPAKOTE TAB 250MG DR	170	DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5)	103
DEBLITANE TAB 0.35MG	188	DEPAKOTE TAB 500MG DR	170	DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5)	104
DECITABINE-CEDAZURIDINE TAB 35-100 MG	38	DEPEN TITRA TAB 250MG	111	DESOGEST-ETHIN EST TAB 0.1-0.025/0.125-0.025/0.15-0.025MG-MG ..	104
DEFERASIROX GRA 90MG	92	DEPO-ESTRADI INJ 5MG/ML	97	DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	95
DEFERASIROX GRA 180MG	92	DEPO-PROVERA INJ 150MG/ML	188	DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	96
DEFERASIROX GRA 360MG	92	DEPO-PROVERA INJ 150MG/ML	188	DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	97
DEFERASIROX GRANULES PACKET 90 MG ..	92	DEPO-SQ PROV INJ 104	188	DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	99
DEFERASIROX GRANULES PACKET 180 MG ..	92	DEPO-TESTOST INJ 100MG/ML	12	DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	100
DEFERASIROX GRANULES PACKET 360 MG ..	92	DEPO-TESTOST INJ 200MG/ML	12	DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	103
DEFERASIROX TAB 90 MG	93	DERMASHIELD GEL HYDROGEL	147	DESONIDE CRE 0.05%	122
DEFERASIROX TAB 90MG	93	DERMA-SMOOTH OIL /FS BODY	122	DESONIDE CREAM 0.05%	122
DEFERASIROX TAB 125MG	92	DERMA-SMOOTH OIL /FS SCLP	122		
DEFERASIROX TAB 180 MG	92	*DERMATOLOGICAL PRODUCTS MISC - GEL**	70		
DEFERASIROX TAB 180MG	92	DERMOTIC OIL 0.01%	186		
DEFERASIROX TAB 250MG	92	DESCOVY TAB 120-15MG	17		
DEFERASIROX TAB 360 MG	93	DESCOVY TAB 200/25MG	17		
DEFERASIROX TAB 360MG	93	DESIPRAMINE HCL TAB 10 MG	208		
DEFERASIROX TAB 500MG	93	DESIPRAMINE HCL TAB 10 MG	208		
DEFERASIROX TAB FOR ORAL SUSP 125 MG ..	92	DESIPRAMINE HCL TAB 25 MG	208		
DEFERASIROX TAB FOR ORAL SUSP 250 MG ..	92	DESIPRAMINE HCL TAB 25 MG	209		
DEFERASIROX TAB FOR ORAL SUSP 500 MG ..	93	DESIPRAMINE HCL TAB 50 MG	208		
DEFERIPRONE TAB 500 MG	93	DESIPRAMINE HCL TAB 75 MG	208		
DEFERIPRONE TAB 500MG	93	DESIPRAMINE HCL TAB 100 MG	208		
DEFERIPRONE TAB 1000 MG	93	DESIPRAMINE HCL TAB 150 MG	208		
DEFERIPRONE TAB 1000MG	93	DESIPRAMINE TAB 10MG	208		
DEGARELIX ACETATE FOR INJ 80 MG (BASE EQUIV)	130	DESIPRAMINE TAB 25MG	208		
		DESIPRAMINE TAB 50MG	208		
		DESIPRAMINE TAB 75MG	208		

DESONIDE CREAM 0.05%.....	122	DEXAMETHASONE TAB 0.5 MG	123	DEXMETHYLPHENIDATE HCL CAP ER 24	
DESONIDE LOT 0.05%.....	122	DEXAMETHASONE TAB 0.75 MG	123	HR 30 MG	45
DESONIDE LOTION 0.05%.....	122	DEXAMETHASONE TAB 1.5 MG.....	123	DEXMETHYLPHENIDATE HCL CAP ER 24	
DESONIDE OIN 0.05%.....	122	DEXAMETHASONE TAB 1 MG.....	123	HR 35 MG	45
DESONIDE OINT 0.05%	122	DEXAMETHASONE TAB 2 MG.....	123	DEXMETHYLPHENIDATE HCL CAP ER 24	
DESOWEN CRE 0.05%.....	122	DEXAMETHASONE TAB 4 MG	123	HR 40 MG	45
DESOXIMETAS CRE 0.05%	122	DEXAMETHASONE TAB 6 MG	123	DEXMETHYLPHENIDATE HCL TAB 2.5 MG... 45	
DESOXIMETAS CRE 0.25%	122	DEXAMETHASONE TAB THERAPY PACK		DEXMETHYLPHENIDATE HCL TAB 5 MG. 45	
DESOXIMETAS GEL 0.05%.....	122	1.5 MG (21).....	123	DEXMETHYLPHENIDATE HCL TAB 10 MG ... 45	
DESOXIMETAS OIN 0.05%	122	DEXAMETHASONE TAB THERAPY PACK		DEXMETHYLPH TAB 2.5MG.....	45
DESOXIMETAS OIN 0.25%	122	1.5 MG (21).....	125	DEXMETHYLPH TAB 5MG	45
DESOXIMETASONE CREAM 0.05%.....	122	DEXAMETHASONE TAB THERAPY PACK		DEXMETHYLPH TAB 10MG	45
DESOXIMETASONE CREAM 0.05%.....	125	1.5 MG (27).....	125	DEXTROAMPHETAMINE SULFATE CAP ER	
DESOXIMETASONE CREAM 0.25%	122	DEXAMETHASONE TAB THERAPY PACK		24HR 5 MG	44
DESOXIMETASONE CREAM 0.25%	125	1.5 MG (35).....	123	DEXTROAMPHETAMINE SULFATE CAP ER	
DESOXIMETASONE GEL 0.05%	122	DEXAMETHASONE TAB THERAPY PACK		24HR 10 MG	44
DESOXIMETASONE GEL 0.05%	125	1.5 MG (49).....	125	DEXTROAMPHETAMINE SULFATE CAP ER	
DESOXIMETASONE OINT 0.05%	122	DEXAMETHASONE TAB THERAPY PACK		24HR 15 MG	44
DESOXIMETASONE OINT 0.05%	125	1.5 MG (51).....	123	DEXTROAMPHETAMINE SULFATE ORAL	
DESOXIMETASONE OINT 0.25%	122	DEXAMETHASON SOL 0.5/5ML	122	SOLUTION 5 MG/5ML.....	44
DESOXIMETASONE OINT 0.25%	125	DEXAMETHASON TAB 0.5MG	123	DEXTROAMPHETAMINE SULFATE TAB 5 MG 44	
DESOXIMETASONE SPRAY 0.25%.....	125	DEXAMETHASON TAB 0.75MG	123	DEXTROAMPHETAMINE SULFATE TAB 10	
DESVENLAFAXINE SUCCINATE TAB ER		DEXAMETHASON TAB 1.5MG.....	123	MG.....	44
24HR 25 MG (BASE EQUIV).....	204	DEXAMETHASON TAB 1MG	123	DEXTROAMPHETAMINE TD PATCH 4.5	
DESVENLAFAXINE SUCCINATE TAB ER		DEXAMETHASON TAB 2MG	123	MG/9HR.....	45
24HR 50 MG (BASE EQUIV)	204	DEXAMETHASON TAB 4MG	123	DEXTROAMPHETAMINE TD PATCH 9	
DESVENLAFAXINE SUCCINATE TAB ER		DEXAMETHASON TAB 6-DAY.....	123	MG/9HR.....	45
24HR 100 MG (BASE EQUIV)	204	DEXAMETHASON TAB 6MG	123	DEXTROAMPHETAMINE TD PATCH 13.5	
DESVENLAFAX TAB 25MG ER	204	DEXAMETHASON TAB 10-DAY	123	MG/9HR.....	45
DESVENLAFAX TAB 50MG ER	204	DEXAMETHASON TAB 13-DAY.....	123	DEXTROAMPHETAMINE TD PATCH 18	
DESVENLAFAX TAB 100MG ER.....	204	DEXAMETH PHO SOL 0.1% OP.....	176	MG/9HR.....	45
DEUCRAVACITINIB TAB 6 MG.....	72	DEXCOM G6 MIS RECEIVER	76	DEXTROAMPHET CAP 5MG ER	44
DEUTETRABENAZINE TAB 6 MG	64	DEXCOM G6 MIS SENSOR.....	76	DEXTROAMPHET CAP 10MG ER	44
DEUTETRABENAZINE TAB 9 MG	64	DEXCOM G6 MIS TRANSMIT.....	147	DEXTROAMPHET CAP 15MG ER	44
DEUTETRABENAZINE TAB 12 MG.....	64	DEXCOM G7 MIS 15 DAY	76	DEXTROAMPHET SOL 5MG/5ML.....	44
DEUTETRABENAZINE TAB ER 24HR 6 MG .. 64		DEXCOM G7 MIS RECEIVER.....	76	DEXTROAMPHET TAB 5MG.....	44
DEUTETRABENAZINE TAB ER 24HR 12 MG .. 64		DEXCOM G7 MIS SENSOR.....	76	DEXTROAMPHET TAB 10MG.....	44
DEUTETRABENAZINE TAB ER 24HR 18 MG .. 64		DEXMETHYLPHE CAP 5MG ER	45	DEXTROMETHORPHAN HBR-QUINIDINE	
DEUTETRABENAZINE TAB ER 24HR 24 MG .. 64		DEXMETHYLPHE CAP 10MG ER	45	SULFATE CAP 20-10 MG.....	64
DEUTETRABENAZINE TAB ER 24HR 30 MG .. 64		DEXMETHYLPHE CAP 15MG ER	45	DIABECIN HR CRE.....	147
DEUTETRABENAZINE TAB ER 24HR 36 MG .. 64		DEXMETHYLPHE CAP 20MG ER	45	DIABETES KIT ADD-ON	147
DEUTETRABENAZINE TAB ER 24HR 42 MG .. 64		DEXMETHYLPHE CAP 25MG ER	45	DIABETES KIT SOLUTION	147
DEUTETRABENAZINE TAB ER 24HR 48 MG .. 64		DEXMETHYLPHE CAP 30MG ER	45	DIACOMIT CAP 250MG	27
DEUTETRABENAZINE TAB ER TITRATION		DEXMETHYLPHE CAP 35MG ER	45	DIACOMIT CAP 500MG.....	27
PACK 6 MG & 12 MG & 24 MG	64	DEXMETHYLPHE CAP 40MG ER.....	45	DIACOMIT PAK 250MG.....	27
DEUTETRABENAZINE TAB ER TITRATION		DEXMETHYLPHENIDATE HCL CAP ER 24		DIACOMIT PAK 500MG	27
PACK 12 & 18 & 24 & 30 MG	64	HR 5 MG.....	45	*DIAPHRAGM ARC-SPRING***	145
DEXAMETHASON CON 1MG/ML	122	DEXMETHYLPHENIDATE HCL CAP ER 24		*DIAPHRAGMS***	156
DEXAMETHASONE CONC 1 MG/ML.....	122	HR 10 MG.....	45	DIAPHRAGM WIDE SEAL 60 MM	165
DEXAMETHASONE ELIXIR 0.5 MG/5ML ... 122		DEXMETHYLPHENIDATE HCL CAP ER 24		DIAPHRAGM WIDE SEAL 65 MM	165
DEXAMETHASON ELX 0.5/5ML	122	HR 15 MG.....	45	DIAPHRAGM WIDE SEAL 70 MM	165
DEXAMETHASONE OPHTH SUSP 0.1%	177	DEXMETHYLPHENIDATE HCL CAP ER 24		DIAPHRAGM WIDE SEAL 75 MM.....	165
DEXAMETHASONE SODIUM PHOSPHATE		HR 20 MG	45	DIAPHRAGM WIDE SEAL 80 MM	165
OPHTH SOLN 0.1%	176	DEXMETHYLPHENIDATE HCL CAP ER 24		DIAPHRAGM WIDE SEAL 85 MM	165
DEXAMETHASONE SOLN 0.5 MG/5ML.....	122	HR 25 MG.....	45	DIAPHRAGM WIDE SEAL 90 MM	165
				DIAPHRAGM WIDE SEAL 95 MM	165

DIASTAT ACDL GEL 5-10MG.....	106	DICLOFENAC SODIUM TAB DELAYED RELEASE 50 MG.....	173	DIHYDROERGOT CRY MESYLATE	94
DIASTAT ACDL GEL 12.5-20	106	DICLOFENAC SODIUM TAB DELAYED RELEASE 75 MG.....	173	DIHYDROERGOT INJ 1MG/ML	94
DIASTAT PED GEL 2.5M GEL.....	106	DICLOFENAC SODIUM TAB ER 24HR 100 MG.....	173	DIHYDROERGOT POW MESYLATE.....	147
DIASTIX TES REAGENT	76	DICLOFENAC SOL 0.1% OP.....	176	DILANTIN-125 SUS 125/5ML	203
DIASTIX TES STRIPS.....	76	DICLOFENAC TAB 25MG DR.....	173	DILANTIN CAP 30MG	203
DIAZEPAM BUCCAL FILM 5 MG	107	DICLOFENAC TAB 50MG DR.....	173	DILANTIN CAP 100MG.....	203
DIAZEPAM BUCCAL FILM 7.5 MG	107	DICLOFENAC TAB 75MG DR.....	173	DILANTIN CHW 50MG	203
DIAZEPAM BUCCAL FILM 10 MG	107	DICLOFENAC TAB 100MG ER.....	173	DILTIAZEM CAP 60MG ER.....	57
DIAZEPAM BUCCAL FILM 12.5 MG	107	DICLOFENAC W/ MISOPROSTOL TAB DELAYED RELEASE 50-0.2 MG	173	DILTIAZEM CAP 90MG ER.....	57
DIAZEPAM BUCCAL FILM 15 MG	107	DICLOFENAC W/ MISOPROSTOL TAB DELAYED RELEASE 75-0.2 MG	173	DILTIAZEM CAP 120MG/24	56
DIAZEPAM CON 5MG/ML	48	DICLOFEN POT TAB 50MG	173	DILTIAZEM CAP 120MG ER.....	56
DIAZEPAM CON 25MG/5ML.....	48	DICLO/MISOPR TAB 50-0.2MG	173	DILTIAZEM CAP 120MG ER.....	56
DIAZEPAM CONC 5 MG/ML	48	DICLO/MISOPR TAB 75-0.2MG.....	173	DILTIAZEM CAP 120MG ER.....	56
DIAZEPAM CONC 5 MG/ML	48	DICLOXACILL CAP 250MG.....	52	DILTIAZEM CAP 120MG ER.....	56
DIAZEPAM GEL 2.5MG	106	DICLOXACILL CAP 500MG	52	DILTIAZEM CAP 180MG/24	56
DIAZEPAM GEL 10MG.....	106	DICLOXACILLIN SODIUM CAP 250 MG	52	DILTIAZEM CAP 180MG ER.....	56
DIAZEPAM GEL 20MG.....	106	DICLOXACILLIN SODIUM CAP 500 MG	52	DILTIAZEM CAP 180MG ER.....	56
DIAZEPAM NASAL SPRAY 5 MG/0.1 ML.....	107	DICYCLOMINE CAP 10MG	41	DILTIAZEM CAP 180MG ER.....	56
DIAZEPAM NASAL SPRAY 10 MG/0.1 ML	107	DICYCLOMINE HCL CAP 10 MG	41	DILTIAZEM CAP 240MG/24	56
DIAZEPAM NASAL SPRAY THER PACK 2 X 7.5 MG/0.1ML (15 MG DOSE)	107	DICYCLOMINE HCL ORAL SOLN 10 MG/5ML.....	41	DILTIAZEM CAP 240MG ER	56
DIAZEPAM NASAL SPRAY THER PACK 2 X 10 MG/0.1ML (20 MG DOSE)	107	DICYCLOMINE HCL TAB 20 MG	41	DILTIAZEM CAP 240MG ER	56
DIAZEPAM ORAL SOLN 1 MG/ML	48	DICYCLOMINE SOL 10MG/5ML	41	DILTIAZEM CAP 240MG ER	56
DIAZEPAM RECTAL GEL DELIVERY SYSTEM 2.5 MG	106	DICYCLOMINE TAB 20MG.....	41	DILTIAZEM CAP 300MG ER	56
DIAZEPAM RECTAL GEL DELIVERY SYSTEM 2.5 MG	106	*DIETARY MANAGEMENT PRODUCT - PACKET***	143	DILTIAZEM CAP 300MG ER	57
DIAZEPAM RECTAL GEL DELIVERY SYSTEM 10 MG.....	106	DIFICID SUS	140	DILTIAZEM CAP 360MG CD.....	57
DIAZEPAM RECTAL GEL DELIVERY SYSTEM 10 MG.....	106	DIFLORASONE CRE 0.05%	123	DILTIAZEM CAP 360MG ER	57
DIAZEPAM RECTAL GEL DELIVERY SYSTEM 20 MG.....	106	DIFLORASONE DIACETATE CREAM 0.05%	123	DILTIAZEM CAP 360MG ER	57
DIAZEPAM RECTAL GEL DELIVERY SYSTEM 20 MG.....	106	DIFLORASONE DIACETATE EMOLLIENT BASE CREAM 0.05%.....	121	DILTIAZEM CAP 420MG/24	57
DIAZEPAM SOL 5MG/5ML	48	DIFLUNISAL TAB 500 MG.....	173	DILTIAZEM ER TAB 180MG	57
DIAZEPAM TAB 2 MG	48	DIFLUNISAL TAB 500MG	173	DILTIAZEM ER TAB 240MG	57
DIAZEPAM TAB 2MG	48	DIFLUPREDNAT EMU 0.05%.....	176	DILTIAZEM ER TAB 300MG.....	57
DIAZEPAM TAB 5 MG	48	DIFLUPREDNATE OPTH EMULSION 0.05%.....	176	DILTIAZEM ER TAB 360MG.....	57
DIAZEPAM TAB 5MG	48	DIGOXIN ORAL SOLN 0.05 MG/ML	61	DILTIAZEM ER TAB 420MG	57
DIAZEPAM TAB 10 MG.....	48	DIGOXIN SOL 50MCG/ML	61	DILTIAZEM HCL CAP ER 12HR 60 MG	57
DIAZEPAM TAB 10MG	48	DIGOXIN TAB 0.25MG.....	61	DILTIAZEM HCL CAP ER 12HR 90 MG	57
DIAZOXIDE SUS 50MG/ML	114	DIGOXIN TAB 0.125MG.....	61	DILTIAZEM HCL CAP ER 12HR 120 MG	56
DIAZOXIDE SUSP 50 MG/ML.....	114	DIGOXIN TAB 0.0625MG	61	DILTIAZEM HCL CAP ER 24HR 120 MG	56
DIAZOXIDE SUSP 50 MG/ML.....	115	DIGOXIN TAB 62.5 MCG (0.0625 MG)	61	DILTIAZEM HCL CAP ER 24HR 120 MG	56
DICHLORPHENAMIDE TAB 50 MG.....	80	DIGOXIN TAB 62.5 MCG (0.0625 MG)	62	DILTIAZEM HCL CAP ER 24HR 180 MG	56
DICHLORPHENA TAB 50MG	80	DIGOXIN TAB 125 MCG (0.125 MG).....	61	DILTIAZEM HCL CAP ER 24HR 180 MG	56
DICLOFENAC GEL 3%	70	DIGOXIN TAB 125 MCG (0.125 MG).....	62	DILTIAZEM HCL CAP ER 24HR 240 MG	56
DICLOFENAC POTASSIUM TAB 50 MG	173	DIGOXIN TAB 250 MCG (0.25 MG)	61	DILTIAZEM HCL CAP ER 24HR 240 MG	56
DICLOFENAC SODIUM (ACTINIC KERATOSES) GEL 3%.....	70	DIGOXIN TAB 250 MCG (0.25 MG)	62	DILTIAZEM HCL COATED BEADS CAP ER 24HR 120 MG.....	56
DICLOFENAC SODIUM OPTH SOLN 0.1%	176	DIHYDROERGOTAMINE MESYLATE CRYSTALS.....	94	DILTIAZEM HCL COATED BEADS CAP ER 24HR 180 MG.....	56
DICLOFENAC SODIUM TAB DELAYED RELEASE 25 MG	173	DIHYDROERGOTAMINE MESYLATE INJ 1 MG/ML.....	94	DILTIAZEM HCL COATED BEADS CAP ER 24HR 180 MG.....	56
		DIHYDROERGOTAMINE MESYLATE POWDER	147	DILTIAZEM HCL COATED BEADS CAP ER 24HR 240 MG.....	56

DILTIAZEM HCL COATED BEADS CAP ER 24HR 300 MG	56	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 420 MG	58	DIPHENHYDRAM ELX 12.5/5ML	36
DILTIAZEM HCL COATED BEADS CAP ER 24HR 300 MG	56	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 420 MG	59	DIPHENHYDRAMINE HCL ELIXIR 12.5 MG/5ML	36
DILTIAZEM HCL COATED BEADS CAP ER 24HR 360 MG	57	DILTIAZEM HCL TAB 30 MG	57	DIPHENHYDRAMINE HCL TAB 25 MG	36
DILTIAZEM HCL COATED BEADS CAP ER 24HR 360 MG	57	DILTIAZEM HCL TAB 60 MG	57	DIPHENOXYLATE W/ ATROPINE LIQ 2.5- 0.025 MG/5ML	108
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 120 MG	56	DILTIAZEM HCL TAB 90 MG	57	DIPHENOXYLATE W/ ATROPINE TAB 2.5- 0.025 MG	108
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 120 MG	56	DILTIAZEM HCL TAB 120 MG	57	DIPHENOXYLATE W/ ATROPINE TAB 2.5- 0.025 MG	108
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 120 MG	58	DILTIAZEM HCL TAB ER 24HR 120 MG	57	DIPH-TETANUS TOX AD-ACELL PERT & POLIO VIRUS, IPV VAC INJ	211
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 120 MG	58	DILTIAZEM HCL TAB ER 24HR 180 MG	57	DIPH-TETANUS TOX AD-ACELL PERT & POLIO VIRUS, IPV VAC INJ	211
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 120 MG	59	DILTIAZEM HCL TAB ER 24HR 240 MG	57	DIPH-TET TOX-ACELL PERT-HEP B-POLIO IPV VAC SUSP PREF SYR	211
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 180 MG	56	DILTIAZEM HCL TAB ER 24HR 240 MG	57	DIPH-TET TOX-AC PERT AD-POLIO IPV- HIB-HEPATITIS B RECMB SUSP	212
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 180 MG	56	DILTIAZEM HCL TAB ER 24HR 300 MG	57	DIPH-TET TOX-AC PERT AD-POLIO IPV- HIB-HEP B REC SUSP PRE SYR	212
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 180 MG	58	DILTIAZEM HCL TAB ER 24HR 300 MG	57	DIPROLENE OIN 0.05%	123
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 180 MG	58	DILTIAZEM HCL TAB ER 24HR 360 MG	57	DIPYRIDAMOLE TAB 25 MG	188
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 180 MG	59	DILTIAZEM HCL TAB ER 24HR 360 MG	57	DIPYRIDAMOLE TAB 25MG	188
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 240 MG	56	DILTIAZEM HCL TAB ER 24HR 420 MG	57	DIPYRIDAMOLE TAB 50 MG	188
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 240 MG	56	DILTIAZEM TAB 30MG	57	DIPYRIDAMOLE TAB 50MG	188
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 240 MG	58	DILTIAZEM TAB 60MG	57	DIPYRIDAMOLE TAB 75 MG	188
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 240 MG	58	DILTIAZEM TAB 90MG	57	DIPYRIDAMOLE TAB 75MG	188
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 240 MG	58	DILTIAZEM TAB 120MG	57	DISOPYRAMIDE CAP 100MG	21
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 240 MG	59	DILTIAZEM TAB 120MG ER	57	DISOPYRAMIDE CAP 150MG	21
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 240 MG	56	DILTIAZEM TAB 240MG ER	57	DISOPYRAMIDE PHOSPHATE CAP 100 MG ..	21
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 240 MG	56	DILTIAZEM TAB 300MG ER	57	DISOPYRAMIDE PHOSPHATE CAP 100 MG ..	22
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 240 MG	58	DILTIAZEM TAB 360MG ER	57	DISOPYRAMIDE PHOSPHATE CAP 150 MG ..	21
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 240 MG	58	DILT-XR CAP 120MG	56	DISOPYRAMIDE PHOSPHATE CAP 150 MG ..	22
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 240 MG	58	DILT-XR CAP 180MG	56	DISOPYRAMIDE PHOSPHATE CAP ER 12HR 100 MG	22
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 240 MG	59	DILT-XR CAP 240MG	56	DISOPYRAMIDE PHOSPHATE CAP ER 12HR 150 MG	22
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 300 MG	57	DIMETHYL FUMARATE CAPSULE DELAYED RELEASE 120 MG	171	*DISTILLED WATER***	160
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 300 MG	58	DIMETHYL FUMARATE CAPSULE DELAYED RELEASE 240 MG	171	DISULFIRAM TAB 250 MG	9
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 300 MG	58	DIMETHYL FUMARATE CAPSULE DR STARTER PACK 120 MG & 240 MG	171	DISULFIRAM TAB 250MG	9
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 300 MG	58	DIMETHYL FUM CAP 120MG DR	171	DISULFIRAM TAB 500 MG	9
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 300 MG	58	DIMETHYL FUM CAP 240MG DR	171	DISULFIRAM TAB 500MG	9
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 300 MG	59	DIMETHYL FUM CAP STARTER	171	DIURIL SUS 250/5ML	81
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 360 MG	57	DIMETHYL SOL SULFOXID	147	DIVALPROEX CAP 125MG DR	170
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 360 MG	58	*DIMETHYL SULFOXIDE - SOLUTION*** ..	146	DIVALPROEX SODIUM CAP DELAYED RELEASE SPRINKLE 125 MG	170
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 360 MG	59	*DIMETHYL SULFOXIDE - SOLUTION*** ..	147	DIVALPROEX SODIUM CAP DELAYED RELEASE SPRINKLE 125 MG	170
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 360 MG	59	DINOPROSTONE CERVICAL GEL 0.5 MG/3GM	112	DIVALPROEX SODIUM TAB DELAYED RELEASE 125 MG	170
DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 420 MG	57	DINOPROSTONE VAGINAL INSERTS 10 MG	111	DIVALPROEX SODIUM TAB DELAYED RELEASE 125 MG	170
		DIPH, ACELLULAR PERT & TET TOX INJ 15 LF-23 MCG-5 LF/0.5ML	210	DIVALPROEX SODIUM TAB DELAYED RELEASE 125 MG	170
		DIPH, ACELLULAR PERT & TET TOX INJ 25 LF-58 MCG-10 LF/0.5ML	210	DIVALPROEX SODIUM TAB DELAYED RELEASE 250 MG	170
		DIPH-AC PER-TET TOX AD-POLIOV- HAEMOPH B POLY VAC FOR IM SUSP	211	DIVALPROEX SODIUM TAB DELAYED RELEASE 250 MG	170
		DIPHEN/ATROP LIQ 2.5/5	108		
		DIPHEN/ATROP TAB 2.5MG	108		

DIVALPROEX SODIUM TAB DELAYED RELEASE 500 MG	170	DONEPEZIL HYDROCHLORIDE TAB 10 MG ..	65	DOXEPIN HCL CAP 100 MG	208
DIVALPROEX SODIUM TAB DELAYED RELEASE 500 MG	170	DONEPEZIL HYDROCHLORIDE TAB 23 MG ..	65	DOXEPIN HCL CAP 100MG	208
DIVALPROEX SODIUM TAB ER 24 HR 250 MG	170	DONEPEZIL TAB 5MG	65	DOXEPIN HCL CAP 150 MG	208
DIVALPROEX SODIUM TAB ER 24 HR 250 MG	170	DONEPEZIL TAB 5MG ODT	65	DOXEPIN HCL CAP 150MG	208
DIVALPROEX SODIUM TAB ER 24 HR 500 MG	170	DONEPEZIL TAB 10MG	65	DOXEPIN HCL CON 10MG/ML	208
DIVALPROEX SODIUM TAB ER 24 HR 500 MG	170	DONEPEZIL TAB 10MG ODT	65	DOXEPIN HCL CONC 10 MG/ML	208
DIVALPROEX SODIUM TAB ER 24 HR 500 MG	170	DONEPEZIL TAB 23MG	65	DOXERCALCIF CAP 0.5MCG	142
DIVALPROEX TAB 125MG DR	170	DONEPEZIL TAB ODT 5MG	65	DOXERCALCIF CAP 1MCG	142
DIVALPROEX TAB 250MG DR	170	DONEPEZIL TAB ODT 10MG	65	DOXERCALCIF CAP 2.5MCG	142
DIVALPROEX TAB 250MG ER	170	DOPTelet SPR CAP 10MG	53	DOXERCALCIFEROL CAP 0.5 MCG	142
DIVALPROEX TAB 500MG DR	170	DOPTelet TAB 20MG	53	DOXERCALCIFEROL CAP 1 MCG	142
DIVALPROEX TAB 500MG ER	170	DORAVIRINE-LAMIVUDINE-TENOFOVIR DF TAB 100-300-300 MG	16	DOXERCALCIFEROL CAP 2.5 MCG	142
DIVIGEL GEL 0.5MG	97	DORAVIRINE TAB 100 MG	17	DOXYCYCL HYC CAP 50MG	207
DIVIGEL GEL 0.25MG	97	DORNASE ALFA INHAL SOLN 2.5 MG/2.5ML	194	DOXYCYCL HYC CAP 100MG	207
DIVIGEL GEL 0.75MG	97	DORZOLAMIDE HCL OPTH SOLN 2%	179	DOXYCYCL HYC TAB 20MG	207
DIVIGEL GEL 1.25MG	97	DORZOLAMIDE HCL OPTH SOLN 2%	179	DOXYCYCL HYC TAB 100MG	207
DIVIGEL GEL 1MG/GM	97	DORZOLAMIDE HCL-TIMOLOL MALEATE OPHTH SOLN 2-0.5%	178	DOXYCYCLINE HYCLATE CAP 50 MG	207
DODEx INJ	214	DORZOLAMIDE HCL-TIMOLOL MALEATE OPHTH SOLN 2-0.5%	179	DOXYCYCLINE HYCLATE CAP 100 MG	207
DOFETILIDE CAP 125MCG	21	DORZOLAMIDE SOL 2% OP	179	DOXYCYCLINE HYCLATE CAP 100 MG	207
DOFETILIDE CAP 125 MCG (0.125 MG)	21	DORZOLAMIDE SOL 2% OP	179	DOXYCYCLINE HYCLATE CAP 100 MG	207
DOFETILIDE CAP 125 MCG (0.125 MG)	22	DORZOL/TIMOL SOL 2-0.5%OP	179	DOXYCYCLINE HYCLATE POWDER	147
DOFETILIDE CAP 250MCG	21	DOTTI DIS 0.1MG	97	DOXYCYCLINE HYCLATE TAB 20 MG	207
DOFETILIDE CAP 250 MCG (0.25 MG)	21	DOTTI DIS 0.05MG	97	DOXYCYCLINE HYCLATE TAB 100 MG	207
DOFETILIDE CAP 250 MCG (0.25 MG)	22	DOTTI DIS 0.025MG	97	DOXYCYCLINE MONOHYDRATE CAP 50 MG	206
DOFETILIDE CAP 500MCG	21	DOTTI DIS 0.075MG	97	DOXYCYCLINE MONOHYDRATE CAP 100 MG	206
DOFETILIDE CAP 500 MCG (0.5 MG)	21	DOTTI DIS 0.0375MG	97	DOXYCYCLINE MONOHYDRATE FOR SUSP 25 MG/5ML	207
DOFETILIDE CAP 500 MCG (0.5 MG)	22	DOVATO TAB 50-300MG	16	DOXYCYCLINE MONOHYDRATE FOR SUSP 25 MG/5ML	207
DOJOLVI LIQ 100%	86	DOXAZOSIN MESYLATE TAB 1 MG	10	DOXYCYCLINE MONOHYDRATE TAB 50 MG	207
DOLASETRON MESYLATE TAB 50 MG	93	DOXAZOSIN MESYLATE TAB 1 MG	10	DOXYCYCLINE MONOHYDRATE TAB 75 MG	207
DOLISHALE TAB 90-20MCG	97	DOXAZOSIN MESYLATE TAB 2 MG	10	DOXYCYCLINE MONOHYDRATE TAB 100 MG	206
DOLUTEGRAVIR SODIUM-LAMIVUDINE TAB 50-300 MG (BASE EQ)	16	DOXAZOSIN MESYLATE TAB 2 MG	10	DOXYCYCLINE MONOHYDRATE TAB 100 MG	207
DOLUTEGRAVIR SODIUM-RILPIVIRINE HCL TAB 50-25 MG (BASE EQ)	17	DOXAZOSIN MESYLATE TAB 4 MG	10	DOXYCYCLINE MONOHYDRATE TAB 100 MG	207
DOLUTEGRAVIR SODIUM TAB 10 MG (BASE EQUIV)	16	DOXAZOSIN MESYLATE TAB 4 MG	10	DOXYCYCLINE MONOHYDRATE TAB 150 MG	207
DOLUTEGRAVIR SODIUM TAB 25 MG (BASE EQUIV)	16	DOXAZOSIN MESYLATE TAB 8 MG	10	DOXYCYCLINE POW HYCLATE	147
DOLUTEGRAVIR SODIUM TAB 50 MG (BASE EQUIV)	16	DOXAZOSIN MESYLATE TAB 8 MG	10	DOXYCYCLINE SUS 25MG/5ML	207
DOLUTEGRAVIR SODIUM TAB FOR ORAL SUSP 5 MG (BASE EQUIV)	16	DOXAZOSIN MESYLATE TAB ER 24 HR 4 MG (BASE EQUIV)	47	*DOXYCYCLINE TAB 100 MG & SUNCREEN & SAL ACID WASH 2% KIT**	206
DONEPEZIL HYDROCHLORIDE ORALLY DISINTEGRATING TAB 5 MG	65	DOXAZOSIN MESYLATE TAB ER 24 HR 8 MG (BASE EQUIV)	47	DOXYCYC MONO CAP 50MG	206
DONEPEZIL HYDROCHLORIDE ORALLY DISINTEGRATING TAB 5 MG	65	DOXAZOSIN TAB 1MG	10	DOXYCYC MONO CAP 100MG	206
DONEPEZIL HYDROCHLORIDE ORALLY DISINTEGRATING TAB 10 MG	65	DOXAZOSIN TAB 2MG	10	DOXYCYC MONO CAP 100MG	207
DONEPEZIL HYDROCHLORIDE ORALLY DISINTEGRATING TAB 10 MG	65	DOXAZOSIN TAB 4MG	10	DOXYCYC MONO TAB 50MG	207
DONEPEZIL HYDROCHLORIDE ORALLY DISINTEGRATING TAB 10 MG	65	DOXAZOSIN TAB 8MG	10	DOXYCYC MONO TAB 75MG	207
DONEPEZIL HYDROCHLORIDE TAB 5 MG ...	65	DOXEPIN HCL CAP 10 MG	208	DOXYCYC MONO TAB 100MG	207
		DOXEPIN HCL CAP 10MG	208	DOXYCYC MONO TAB 150MG	207
		DOXEPIN HCL CAP 25 MG	208	DR BROWNS POW GOOD ST	147
		DOXEPIN HCL CAP 25MG	208	DRISDOL CAP 50000UNT	214
		DOXEPIN HCL CAP 50 MG	208	DRIZALMA CAP 20MG DR	204
		DOXEPIN HCL CAP 50MG	208	DRIZALMA CAP 30MG DR	204
		DOXEPIN HCL CAP 75 MG	208	DRIZALMA CAP 40MG DR	204
		DOXEPIN HCL CAP 75MG	208	DRIZALMA CAP 60MG DR	204

DRONABINOL CAP 2.5 MG	93	DUOPA SUS 4.63-20.....	82	EC-NAPROSYN TAB 375MG.....	173
DRONABINOL CAP 2.5MG.....	93	DUPILUMAB SUBCUTANEOUS SOLN		EC-NAPROSYN TAB 500MG	173
DRONABINOL CAP 5 MG	93	AUTO-INJECTOR 200 MG/1.14ML.....	70	EC-NAPROXEN TAB 375MG.....	173
DRONABINOL CAP 5MG	93	DUPILUMAB SUBCUTANEOUS SOLN		EC-NAPROXEN TAB 500MG	173
DRONABINOL CAP 10 MG	93	AUTO-INJECTOR 300 MG/2ML	70	ECONAZOLE CRE 1%	33
DRONABINOL CAP 10MG	93	DUPILUMAB SUBCUTANEOUS SOLN		ECONAZOLE NITRATE CREAM 1%.....	33
DRONABINOL SOLN 5 MG/ML	94	PREFILLED SYRINGE 200 MG/1.14ML	70	ECONTRA OS TAB 1.5MG	188
DROPLET MICR MIS 34GX9/64	147	DUPILUMAB SUBCUTANEOUS SOLN		EC-RX DHEA CRE 4%	147
DROPSAFE MIS LANC 23G	76	PREFILLED SYRINGE 300 MG/2ML	70	EC-RX DHEA CRE 10%	147
DROPSAFE MIS SICURA.....	147	DUPIXENT INJ 200/1.14	70	EDARAVONE ORAL SUSP 105 MG/5ML	64
DROS/ETH EST TAB LEVOMEFO.....	97	DUPIXENT INJ 200MG.....	70	EDARAVONE ORAL SUSP 105 MG/5ML	64
DROSPIRENONE-ESTRADIOL TAB 0.5-1 MG.95		DUPIXENT INJ 300/2ML	70	EDEX KIT 10MCG	111
DROSPIRENONE-ESTRADIOL TAB 0.25-		DUPIXENT INJ 300/2ML	70	EDEX KIT 20MCG	111
0.5 MG	95	DUREX EXTRA MIS SENSITIV	147	EDEX KIT 40MCG	111
DROSPIRENONE-ETHINYL ESTRADIOL		DUREX MIS TROPICAL	147	EDURANT PED TAB 2.5MG.....	16
TAB 3-0.02 MG	105	*DUST MITE MIXED EXT SL TAB 12 SQ-		EDURANT TAB 25MG	16
DROSPIRENONE-ETHINYL ESTRADIOL		HDM***	194	EEMT HS TAB.....	97
TAB 3-0.03 MG	105	DUTASTERIDE CAP 0.5 MG.....	47	EEMT TAB 1.25-2.5	97
DROSPIRENONE-ETHINYL ESTRAD-		DUTASTERIDE CAP 0.5MG	47	E.E.S. GRAN SUS 200/5ML	140
LEVOMEFOLATE TAB 3-0.03-0.451 MG.	97	DUVELISIB CAP 15 MG.....	38	EFAVIR/EMTRI TAB TENOFOVI	16
DROSPIRENONE-ETHINYL ESTRAD-		DUVELISIB CAP 25 MG.....	38	EFAVIRENZ CAP 50 MG	17
LEVOMEFOLATE TAB 3-0.03-0.451 MG.	104	DYCLONINE HCL SOLN 0.5%.....	11	EFAVIRENZ CAP 50MG.....	17
DROSPIRENONE TAB 4 MG.....	189	DYCLOPRO SOL 0.5%	11	EFAVIRENZ CAP 200 MG	17
DROXIA CAP 200MG	37	DYE FDC BLUE 1 (BRILLIANT BLUE FCF) -		EFAVIRENZ CAP 200MG	17
DROXIA CAP 300MG	37	LIQUID.....	149	EFAVIRENZ-EMTRICITABINE-TENOFOVIR	
DROXIA CAP 400MG.....	37	EAA SUPPLEME POW.....	86	DF TAB 600-200-300 MG	16
DRYSOL SOL 20%	70	EAA SUPPLEME POW TROPICAL	86	EFAVIRENZ-LAMIVUDINE-TENOFOVIR	
DUAVEE TAB 0.45-20.....	97	EASIVENT MIS	147	DF TAB 400-300-300 MG	17
DUETACT TAB 30-2MG	29	EASIVENT MIS MASK LG	147	EFAVIRENZ-LAMIVUDINE-TENOFOVIR	
DUETACT TAB 30-4MG	29	EASIVENT MIS MASK MED	147	DF TAB 400-300-300 MG	17
DUET DHA 400 MIS 25-1-400	214	EASIVENT MIS MASK SM.....	147	EFAVIRENZ-LAMIVUDINE-TENOFOVIR	
DULAGLUTIDE SOLN AUTO-INJECTOR		EASY COMFORT MIS 0.3/31G	147	DF TAB 600-300-300 MG	17
0.75 MG/0.5ML.....	32	EASY COMFORT MIS 0.3/31G	147	EFAVIRENZ-LAMIVUDINE-TENOFOVIR	
DULAGLUTIDE SOLN AUTO-INJECTOR		EASY COMFORT MIS 29GX4MM.....	147	DF TAB 600-300-300 MG	17
1.5 MG/0.5ML	32	EASY COMFORT MIS 29GX5MM.....	147	EFAVIRENZ TAB 600 MG	17
DULAGLUTIDE SOLN AUTO-INJECTOR 3		EASY COMFORT MIS 31GX5MM	147	EFAVIRENZ TAB 600MG.....	17
MG/0.5ML	32	EASY COMFORT MIS 31GX6MM	147	EFAVIR/LAMIV TAB TENOFOVI	17
DULAGLUTIDE SOLN AUTO-INJECTOR		EASY COMFORT MIS 32GX4MM.....	76	EFAVIR/LAMIV TAB TENOFOVI	17
4.5 MG/0.5ML.....	32	EASY COMFORT MIS SHARPS	147	EFFER-K TAB 10MEQ	86
DULOXETINE CAP 20MG DR	105	EASYGEL GEL 0.4%	66	EFFER-K TAB 20MEQ	86
DULOXETINE CAP 30MG DR	105	EASYGEL GEL 0.4%CHRY	66	EFFER-K TAB 25MEQ EF	86
DULOXETINE CAP 60MG DR	105	EASYGEL GEL 0.4%CITR	66	EFGARTIGIMOD ALF-HYALUR-QVFC	
DULOXETINE HCL CAP DELAYED		EASYGEL GEL 0.4%MINT.....	66	PREF SYR 1000-10000 MG-UNIT/5ML	135
RELEASE SPRINKLE 20 MG (BASE EQ)	204	EASYMAX 15 LIQ LEVEL2-3	76	EFLORNITHINE HCL TAB 192 MG.....	38
DULOXETINE HCL CAP DELAYED		EASYMAX 15 SOL LEVEL 2	76	EFUDEX CRE 5%.....	70
RELEASE SPRINKLE 30 MG (BASE EQ)	204	EASYMAX LIQ NORM/HIG	76	EGATEN TAB 250MG	14
DULOXETINE HCL CAP DELAYED		EASYMAX SOL NORMAL	147	ELACESTRANT HYDROCHLORIDE TAB 86	
RELEASE SPRINKLE 40 MG (BASE EQ)	204	EASY TOUCH LIQ HEALTHPR.....	76	MG	33
DULOXETINE HCL CAP DELAYED		EBGLYSS INJ 250/2ML.....	70	ELAFIBRANOR TAB 80 MG	108
RELEASE SPRINKLE 60 MG (BASE EQ)	204	EBGLYSS INJ 250/2ML.....	70	ELAGOLIX-ESTRAD-NORETH 300-1-	
DULOXETINE HCL ENTERIC COATED		ECHOTHIOPHATE IODIDE OPHTH FOR		0.5MG & ELAGOLIX 300MG CAP PACK.....	130
PELLETS CAP 20 MG (BASE EQ).....	105	SOLN 0.125%.....	179	ELAGOLIX SODIUM TAB 150 MG (BASE	
DULOXETINE HCL ENTERIC COATED		ECLIPSE NDLE MIS 21GX1.5".....	147	EQUIV).....	130
PELLETS CAP 30 MG (BASE EQ).....	105	ECLIPSE NDLE MIS 25GX1.5"	148	ELAGOLIX SODIUM TAB 200 MG (BASE	
DULOXETINE HCL ENTERIC COATED		ECLIPSE NDL MIS 21GX1"	147	EQUIV).....	130
PELLETS CAP 60 MG (BASE EQ).....	105			ELBASVIR-GRAZOPREVIR TAB 50-100 MG..	15

ELECARE JR POW	214	EMBECTA AUTO MIS DUO	148	EMTRICITABINE CAPS 200 MG	18
ELECARE JR POW VANILLA	214	EMBECTA NANO MIS 32GX4MM.....	76	EMTRICITABINE-RILPIVIRINE-	
ELESTRIN GEL 0.06%.....	97	EMBECTA UF MIS 29GX12.7.....	148	TENOFOVIR AF TAB 200-25-25 MG.....	17
ELETRIPTAN HYDROBROMIDE TAB 20 MG		EMBECTA UF MIS 31GX5MM	148	EMTRICITABINE-RILPIVIRINE-	
(BASE EQUIVALENT).....	196	EMBECTA UF MIS 31GX8MM	148	TENOFOVIR DF TAB 200-25-300 MG.....	16
ELETRIPTAN HYDROBROMIDE TAB 40		EMBECTA UF MIS 32GX6MM	76	EMTRICITABINE-RILPIVIRINE-	
MG (BASE EQUIVALENT)	196	EMBRACE SOL LOW.....	148	TENOFOVIR DF TAB 200-25-300 MG.....	17
ELETRIPTAN TAB 20MG.....	196	EMCYT CAP 140MG	33	EMTRICITABINE SOLN 10 MG/ML	18
ELETRIPTAN TAB 40MG.....	196	EMEND SUS 125MG	93	EMTRICITABINE-TENOFOVIR	
ELEXACAF-TEZACAF-IVACAF 50-25-37.5		EMGALITY INJ 100MG/ML	55	ALAFENAMIDE FUMARATE TAB 120-15 MG..	17
MG & IVACAF 75 MG TBPk.....	66	EMGALITY INJ 120MG/ML.....	55	EMTRICITABINE-TENOFOVIR	
ELEXACAF-TEZACAF-IVACAF 80-40-60		EMGALITY INJ 120MG/ML.....	55	ALAFENAMIDE FUMARATE TAB 200-25 MG..	17
MG& IVACAF 59.5MG THPK GRAN	66	EMICIZUMAB-KXWH SUBCUTANEOUS		EMTRICITABINE-TENOFOVIR	
ELEXACAF-TEZACAF-IVACAF 100-50-75		SOLN 30 MG/ML	117	DISOPROXIL FUMARATE TAB 100-150 MG ..	18
MG& IVACAF 75MG THPK GRAN	66	EMICIZUMAB-KXWH SUBCUTANEOUS		EMTRICITABINE-TENOFOVIR	
ELEXACAF-TEZACAF-IVACAF 100-50-75		SOLN 60 MG/0.4ML (150 MG/ML)	117	DISOPROXIL FUMARATE TAB 100-150 MG ..	18
MG & IVACAF 150 MG TBPk.....	66	EMICIZUMAB-KXWH SUBCUTANEOUS		EMTRICITABINE-TENOFOVIR	
ELIGLUSTAT TARTRATE CAP 84 MG		SOLN 105 MG/0.7ML (150 MG/ML)	117	DISOPROXIL FUMARATE TAB 133-200 MG ..	18
(BASE EQUIVALENT).....	109	EMICIZUMAB-KXWH SUBCUTANEOUS		EMTRICITABINE-TENOFOVIR	
ELIMITE CRE 5%.....	186	SOLN 150 MG/ML.....	117	DISOPROXIL FUMARATE TAB 133-200 MG ..	18
ELINEST TAB.....	97	EMICIZUMAB-KXWH SUBCUTANEOUS		EMTRICITABINE-TENOFOVIR	
ELIQUIS CAP 0.15MG	25	SOLN 300 MG/2ML (150 MG/ML).....	117	DISOPROXIL FUMARATE TAB 167-250 MG ..	18
ELIQUIS ST P TAB 5MG.....	25	*EMOLLIENT - LIQUID**	72	EMTRICITABINE-TENOFOVIR	
ELIQUIS TAB 0.5MG.....	25	*EMOLLIENT - LIQUID**	72	DISOPROXIL FUMARATE TAB 167-250 MG ..	18
ELIQUIS TAB 1.5MG.....	25	EMPAGLIFLOZIN-LINAGLIP-		EMTRICITABINE-TENOFOVIR	
ELIQUIS TAB 2.5MG.....	25	METFORMIN TAB ER 24HR 12.5-2.5-1000MG	32	DISOPROXIL FUMARATE TAB 200-300 MG ..	18
ELIQUIS TAB 2MG.....	25	EMPAGLIFLOZIN-LINAGLIPTIN-		EMTRICITABINE-TENOFOVIR	
ELIQUIS TAB 5MG.....	25	METFORMIN TAB ER 24HR 5-2.5-1000MG ..	32	DISOPROXIL FUMARATE TAB 200-300 MG ..	18
ELITE-OB TAB.....	214	EMPAGLIFLOZIN-LINAGLIPTIN-		EMTRICITABINE-TENOFOVIR	
ELIXOPHYLLIN ELX 80/15ML.....	187	METFORMIN TAB ER 24HR 10-5-1000 MG ..	32	DISOPROXIL FUMARATE TAB 200-300 MG ..	18
ELLA TAB 30MG.....	188	EMPAGLIFLOZIN-LINAGLIPTIN-		EMTRICITABINE-TENOFOVIR	
ELTROMBOPAG CHOLINE TAB 9 MG		METFORMIN TAB ER 24HR 25-5-1000 MG ..	32	DISOPROXIL FUMARATE TAB 200-300 MG ..	18
(BASE EQUIV).....	52	EMPAGLIFLOZIN-LINAGLIPTIN TAB 10-5		EMTRICITABINE-TENOFOVIR	
ELTROMBOPAG CHOLINE TAB 18 MG		MG.....	30	DISOPROXIL FUMARATE TAB 200-300 MG ..	18
(BASE EQUIV).....	52	EMPAGLIFLOZIN-LINAGLIPTIN TAB 25-5		EMTRICITABINE-TENOFOVIR	
ELTROMBOPAG CHOLINE TAB 36 MG		MG.....	30	DISOPROXIL FUMARATE TAB 200-300 MG ..	18
(BASE EQUIV).....	52	EMPAGLIFLOZIN-METFORMIN HCL TAB		EMTRICITABINE-TENOFOVIR	
ELTROMBOPAG CHOLINE TAB 54 MG		5-500 MG	31	DISOPROXIL FUMARATE TAB 200-300 MG ..	18
(BASE EQUIV).....	52	EMPAGLIFLOZIN-METFORMIN HCL TAB		EMTRICITABINE-TENOFOVIR	
ELTROMBOPAG OLAMINE POWDER PACK		5-1000 MG	31	DISOPROXIL FUMARATE TAB 200-300 MG ..	18
FOR SUSP 12.5 MG (BASE EQ)	53	EMPAGLIFLOZIN-METFORMIN HCL TAB		EMTRICITABINE-TENOFOVIR	
ELTROMBOPAG OLAMINE POWDER PACK		12.5-500 MG	31	DISOPROXIL FUMARATE TAB 200-300 MG ..	18
FOR SUSP 12.5 MG (BASE EQ)	53	EMPAGLIFLOZIN-METFORMIN HCL TAB		EMTRICITABINE-TENOFOVIR	
ELTROMBOPAG OLAMINE POWDER PACK		12.5-1000 MG	31	DISOPROXIL FUMARATE TAB 200-300 MG ..	18
FOR SUSP 25 MG (BASE EQUIV).....	53	EMPAGLIFLOZIN-METFORMIN HCL TAB		DISOPROXIL FUMARATE TAB 200-300 MG ..	18
ELTROMBOPAG OLAMINE POWDER PACK		ER 24HR 5-1000 MG	32	DISOPROXIL FUMARATE TAB 200-300 MG ..	18
FOR SUSP 25 MG (BASE EQUIV).....	53	EMPAGLIFLOZIN-METFORMIN HCL TAB		DISOPROXIL FUMARATE TAB 200-300 MG ..	18
ELTROMBOPAG POW 12.5MG	53	ER 24HR 10-1000 MG.....	31	DISOPROXIL FUMARATE TAB 200-300 MG ..	18
ELTROMBOPAG POW 25MG	53	EMPAGLIFLOZIN-METFORMIN HCL TAB		DISOPROXIL FUMARATE TAB 200-300 MG ..	18
ELURYNG MIS.....	97	ER 24HR 12.5-1000 MG	31	DISOPROXIL FUMARATE TAB 200-300 MG ..	18
ELUXADOLINE TAB 75 MG	137	EMPAGLIFLOZIN-METFORMIN HCL TAB		DISOPROXIL FUMARATE TAB 200-300 MG ..	18
ELUXADOLINE TAB 100 MG	137	ER 24HR 25-1000 MG.....	32	DISOPROXIL FUMARATE TAB 200-300 MG ..	18
ELVITEGRAV-COBIC-EMTRICITAB-		EMPAGLIFLOZIN TAB 10 MG	30	DISOPROXIL FUMARATE TAB 200-300 MG ..	18
TENOFOV AF TAB 150-150-200-10 MG	16	EMPAGLIFLOZIN TAB 25 MG	30	DISOPROXIL FUMARATE TAB 200-300 MG ..	18
ELVITEGRAV-COBIC-EMTRICITAB-		EMPAVELI INJ 1080MG.....	53	DISOPROXIL FUMARATE TAB 200-300 MG ..	18
TENOFOVDF TAB 150-150-200-300 MG.....	16	EMTRICITABIN CAP 200MG	18	DISOPROXIL FUMARATE TAB 200-300 MG ..	18

ENBREL INJ 25/0.5ML	131	EN GENTLEASE POW FUSS/GAS	148	ENTECAVIR TAB 0.5 MG	15
ENBREL INJ 25MG	131	ENGERIX-B INJ 10/0.5ML	210	ENTECAVIR TAB 0.5MG	15
ENBREL INJ 50MG/ML	131	ENGERIX-B INJ 20MCG/ML	210	ENTECAVIR TAB 1 MG	15
ENBREL MINI INJ 50MG/ML	131	ENGERIX-B INJ 20MCG/ML	210	ENTECAVIR TAB 1MG	15
ENBREL SRCLK INJ 50MG/ML	132	ENILLORING MIS	97	ENTERAGAM POW 5GM	149
ENCALA POW	214	ENLITE GLUCO MIS SENSOR	76	ENTEREG CAP 12MG	108
ENCARE SUP 100MG	111	ENOXAPARIN INJ 30/0.3ML	25	ENTRECTINIB CAP 100 MG	39
ENDARI POW 5GM	86	ENOXAPARIN INJ 40/0.4ML	25	ENTRECTINIB CAP 200 MG	39
ENDOCET TAB 2.5-325	183	ENOXAPARIN INJ 60/0.6ML	25	ENTRECTINIB PELLET PACK 50 MG	39
ENDOCET TAB 5-325MG	183	ENOXAPARIN INJ 80/0.8ML	25	ENTRESTO CAP 6-6MG	61
ENDOCET TAB 7.5-325	183	ENOXAPARIN INJ 80MG/0.8	26	ENTRESTO CAP 15-16MG	61
ENDOCET TAB 10-325MG	183	ENOXAPARIN INJ 100MG/ML	25	ENTYVIO PEN INJ 108/0.68	135
ENDOMETRIN SUP 100MG	188	ENOXAPARIN INJ 120/0.8	25	ENULOSE SOL 10GM/15	138
ENFAGROW POW PREMIUM	148	ENOXAPARIN INJ 150MG/ML	25	ENU NUTRITIO LIQ CHOCOLAT	86
ENFAGROW POW PREMIUM	148	ENOXAPARIN INJ 300/3ML	25	ENU NUTRITIO LIQ VANILLA	86
ENFAGROW PRM POW TODDLER	148	ENOXAPARIN SODIUM INJ 300 MG/3ML ..	25	ENU PRO3 POW PLUS	214
ENFAMIL AR LIQ LIPIL	148	ENOXAPARIN SODIUM INJ SOLN PREF		ENZALUTAMIDE CAP 40 MG	20
ENFAMIL AR POW SPIT-UP	148	SYR 30 MG/0.3ML	25	EPANED SOL 1MG/ML	13
ENFAMIL HUMA CON HIGH PRO	148	ENOXAPARIN SODIUM INJ SOLN PREF		EPCLUSA PAK 150-37.5	15
ENFAMIL HUMA CON STD PROT	148	SYR 40 MG/0.4ML	25	EPCLUSA PAK 200-50MG	15
ENFAMIL HUMA LIQ FORTIFIE	148	ENOXAPARIN SODIUM INJ SOLN PREF		EPCLUSA TAB 200-50MG	15
ENFAMIL HUMA POW FORTIFIE	148	SYR 60 MG/0.6ML	25	EPCLUSA TAB 400-100	15
ENFAMIL INFA LIQ FORMULA	148	ENOXAPARIN SODIUM INJ SOLN PREF		EPIDIOLEX SOL 100MG/ML	27
ENFAMIL INFA POW FORMULA	148	SYR 80 MG/0.8ML	25	EPIFOAM AER 1%	70
ENFAMIL LIPI LIQ GENTLEAS	148	ENOXAPARIN SODIUM INJ SOLN PREF		EPINASTINE DRO 0.05%	176
ENFAMIL LIQ DHA/ARA	148	SYR 80 MG/0.8ML	26	EPINASTINE HCL OPTH SOLN 0.05%	176
ENFAMIL LIQ GENTLEAS	148	ENOXAPARIN SODIUM INJ SOLN PREF		EPINEPHRINE HCL NASAL SOLN 0.1%	195
ENFAMIL LIQ GENTLEAS	148	SYR 100 MG/ML	25	EPINEPHRINE HCL NASAL SOLN 0.1%	196
ENFAMIL LIQ PREMATUR	148	ENOXAPARIN SODIUM INJ SOLN PREF		EPINEPHRINE INJ 0.3MG	55
ENFAMIL NEUR LIQ ENFACARE	148	SYR 120 MG/0.8ML	25	EPINEPHRINE INJ 0.3MG	55
ENFAMIL NEUR LIQ INFANT	148	ENOXAPARIN SODIUM INJ SOLN PREF		EPINEPHRINE INJ 0.15MG	55
ENFAMIL NEUR POW ENFACARE	149	SYR 150 MG/ML	25	EPINEPHRINE INJ 0.15MG	55
ENFAMIL NEUR POW GENTLEAS	149	ENPRESSE-28 TAB	97	EPINEPHRINE NASAL SPRAY 1 MG/0.1ML ..	55
ENFAMIL NEUR POW SENSITIV	149	ENSKYCE TAB	97	EPINEPHRINE NASAL SPRAY 2 MG/0.1ML ..	55
ENFAMIL POW ENSPIRE	148	ENSTILAR AER	70	EPINEPHRINE SOL 30/30ML	196
ENFAMIL POW REGULINE	148	ENSURE ENLIV LIQ STRAWBER	86	EPINEPHRINE SOLN PREFILLED	
ENFAMIL PREM CON LIPIL	149	ENSURE ENLIV LIQ VANILLA	86	SYRINGE 0.15 MG/0.3ML (1:2000)	55
ENFAMIL PREM LIQ INFANT	149	ENSURE HP LIQ VANILLA	86	EPINEPHRINE SOLUTION AUTO-	
ENFAMIL PREM POW INFANT	149	ENSURE LIQ CHOCOLAT	86	INJECTOR 0.1 MG/0.1ML	54
ENFAMIL PREM POW NEWBORN	149	ENSURE ORIGI LIQ FIBER	86	EPINEPHRINE SOLUTION AUTO-	
ENFAMIL SOY POW PROSOBEE	149	ENSURE ORIGN LIQ CHOCOLAT	86	INJECTOR 0.3 MG/0.3ML (1:1000)	55
ENFA NUTRAMI CON LIPIL	148	ENSURE ORIGN LIQ CHOCOLAT	86	EPINEPHRINE SOLUTION AUTO-	
ENFA NUTRAMI LIQ	148	ENSURE ORIGN LIQ STRAWBER	86	INJECTOR 0.3 MG/0.3ML (1:1000)	55
ENFA NUTRAMI LIQ DHA/ARA	148	ENSURE ORIGN POW VANILLA	214	EPINEPHRINE SOLUTION AUTO-	
ENFA NUTRAMI LIQ DHA/ARA	148	ENSURE PLUS LIQ BUT PECN	86	INJECTOR 0.15 MG/0.3ML (1:2000)	55
ENFA NUTRAMI POW PROB/LGG	148	ENSURE PLUS LIQ CHOCOLAT	86	EPINEPHRINE SOLUTION AUTO-	
ENFA NUTRAMI POW TOD/ENFL	148	ENSURE PLUS LIQ DRK CHOC	86	INJECTOR 0.15 MG/0.15ML (1:1000)	54
ENFA PREGEST LIQ LIPIL	148	ENSURE PLUS LIQ STRAWBER	86	EPINEPHRINE SOLUTION AUTO-	
ENFA PROSOBE CON LIPIL	148	ENSURE PLUS LIQ STRWBERY	86	INJECTOR 0.15 MG/0.15ML (1:1000)	55
ENFA PROSOBE LIQ LIPIL	148	ENSURE PLUS LIQ VANILLA	86	EPINEPHRINE SOLUTION PREFILLED	
ENFA PROSOBE LIQ SENSITIV	148	ENSURE SURGE LIQ IMMUNO	86	SYRINGE 0.3 MG/0.3ML (1:1000)	55
ENFAROW LIQ NEUROPRO	149	ENTACAPONE TAB 200 MG	40	EPITOL TAB 200MG	203
ENFAROW NEXT LIQ VANILLA	149	ENTACAPONE TAB 200 MG	40	EPLERENONE TAB 25 MG	81
ENFLONSIA INJ 105MG	135	ENTACAPONE TAB 200MG	40	EPLERENONE TAB 25MG	81
ENFUVIRTIDE FOR INJ 90 MG	18	ENTECAVIR ORAL SOLN 0.05 MG/ML	15		

EPLERENONE TAB 50 MG	81	ERLOTINIB HCL TAB 25 MG (BASE EQUIVALENT).....	167	ERYTHROMYCIN TAB DELAYED RELEASE 333 MG.....	141
EPLERENONE TAB 50MG.....	81	ERLOTINIB HCL TAB 100 MG (BASE EQUIVALENT).....	166	ERYTHROMYCIN TAB DELAYED RELEASE 333 MG.....	141
EPLONTERSEN SODIUM SUBCUTANEOUS SOLN AUTO-INJ 45 MG/0.8ML.....	110	ERLOTINIB HCL TAB 150 MG (BASE EQUIVALENT).....	167	ERYTHROMYCIN TAB DELAYED RELEASE 500 MG	141
EPOETIN ALFA-EPBX INJ 2000 UNIT/ML ...	53	ERLOTINIB TAB 25MG.....	167	ERYTHROMYCIN TAB DELAYED RELEASE 500 MG	141
EPOETIN ALFA-EPBX INJ 3000 UNIT/ML ...	53	ERLOTINIB TAB 100MG	166	ERYTHROMYCIN W/ DELAYED RELEASE PARTICLES CAP 250 MG	141
EPOETIN ALFA-EPBX INJ 4000 UNIT/ML ...	54	ERLOTINIB TAB 150MG	167	ESCITALOPRAM OXALATE SOLN 5 MG/5ML (BASE EQUIV).....	204
EPOETIN ALFA-EPBX INJ 10000 UNIT/ML ..	53	ERMEZA SOL 150/5ML	127	ESCITALOPRAM OXALATE TAB 5 MG (BASE EQUIV).....	204
EPOETIN ALFA-EPBX INJ 40000 UNIT/ML ..	53	ERRIN TAB 0.35MG.....	188	ESCITALOPRAM OXALATE TAB 10 MG (BASE EQUIV).....	204
EQ ASPIRIN CHW 81MG.....	173	ERY/BENZOYL GEL 3-5%	70	ESCITALOPRAM OXALATE TAB 20 MG (BASE EQUIV).....	204
EQ CLEARLAX POW	137	ERYGEL GEL 2%.....	70	ESCITALOPRAM SOL 5MG/5ML.....	204
EQL ASPIRIN CHW 81MG.....	173	ERY PAD 2%	70	ESCITALOPRAM TAB 5MG.....	204
EQ LAXATIVE CHW 15MG	138	ERYPED SUS 200/5ML	141	ESCITALOPRAM TAB 10MG	204
EQL CLEARLAX POW	137	ERYPED SUS 400/5ML	141	ESCITALOPRAM TAB 20MG	204
EQL GENTLE TAB LAXATIVE	138	ERY-TAB TAB 250MG EC.....	141	ESGIC CAP	11
EQ NICOTINE DIS 7MG/24HR	199	ERY-TAB TAB 333MG EC.....	141	ESGIC TAB	11
EQ NICOTINE DIS 14MG/24H	199	ERY-TAB TAB 500MG EC.....	141	ESKETAMINE HCL NASAL SOLN 28 MG/ DEVICE X 2 (56 MG DOSE PACK)	28
EQ NICOTINE DIS 21MG/24H	199	ERYTHROCIN TAB 250MG	141	ESKETAMINE HCL NASAL SOLN 28 MG/ DEVICE X 3 (84 MG DOSE PACK)	28
EQ NICOTINE GUM 2MG CINN	199	ERYTHROM ETH SUS 200/5ML.....	141	ESLICARBAZEPINE ACETATE TAB 200 MG ..	203
EQ NICOTINE GUM 2MGFRUIT.....	199	ERYTHROM ETH SUS 400/5ML.....	141	ESLICARBAZEPINE ACETATE TAB 400 MG ..	203
EQ NICOTINE GUM 2MG MINT	199	ERYTHROM ETH TAB 400MG.....	141	ESLICARBAZEPINE ACETATE TAB 600 MG ..	203
EQ NICOTINE GUM 4MG CINN	199	ERYTHROMYCIN CAP 250MG DR.....	141	ESLICARBAZEPINE ACETATE TAB 800 MG ..	203
EQ NICOTINE GUM 4MGFRUIT.....	199	ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 200 MG/5ML	140	ESLICARBAZEP TAB 200MG	203
EQ NICOTINE GUM 4MG MINT	199	ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 200 MG/5ML	141	ESLICARBAZEP TAB 400MG	203
EQ NICOTINE GUM 4MG ORIG	199	ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 200 MG/5ML	141	ESLICARBAZEP TAB 600MG	203
EQ NICOTINE LOZ 2MG CINN	199	ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 400 MG/5ML	141	ESLICARBAZEP TAB 800MG	203
EQ NICOTINE LOZ 2MG MINT	199	ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 400 MG/5ML	141	ESOMEPRAZOLE GRA 2.5MG.....	190
EQ NICOTINE LOZ 4MG CINN.....	199	ERYTHROMYCIN ETHYLSUCCINATE TAB 400 MG	141	ESOMEPRAZOLE GRA 2.5MG DR	190
EQ NICOTINE LOZ 4MG MINT.....	199	ERYTHROMYCIN GEL 2%.....	70	ESOMEPRAZOLE GRA 5MG	190
EQ PAIN RELI TAB 500MG.....	11	ERYTHROMYCIN GEL 2%.....	70	ESOMEPRAZOLE GRA 5MG DR.....	190
EQUACARE JR POW CHOCOLA.....	214	ERYTHROMYCIN OIN 5MG/GM	178	ESOMEPRAZOLE GRA 10MG DR.....	190
EQUACARE JR POW UNFLAVO	214	ERYTHROMYCIN OPHTH OINT 5 MG/GM ..	178	ESOMEPRAZOLE GRA 20MG DR.....	190
EQUACARE JR POW VANILLA	214	ERYTHROMYCIN PADS 2%	70	ESOMEPRAZOLE GRA 40MG DR	190
ERENUMAB-AOOE SUBCUTANEOUS SOLN AUTO-INJECTOR 70 MG/ML.....	55	ERYTHROMYCIN SOL 2%.....	70	ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACK 2.5 MG.....	190
ERENUMAB-AOOE SUBCUTANEOUS SOLN AUTO-INJECTOR 140 MG/ML.....	55	ERYTHROMYCIN SOLN 2%.....	70	ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACK 2.5 MG.....	190
ERGOCALCIFEROL CAP 1.25 MG (50000 UNIT)	214	ERYTHROMYCIN STEARATE TAB 250 MG ..	141	ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACK 2.5 MG.....	190
ERGOCALCIFEROL CAP 1.25 MG (50000 UNIT)	219	ERYTHROMYCIN TAB 250 MG	141	ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 5 MG.....	190
ERGOCALCIFEROL CAP 1.25 MG (50000 UNIT)	219	ERYTHROMYCIN TAB 250MG BS	141	ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 5 MG.....	190
ERGOCALCIFEROL CAP 1.25 MG (50000 UNIT)	219	ERYTHROMYCIN TAB 250MG EC	141	ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 5 MG.....	190
ERGOLOID MES TAB 1MG ORAL	149	ERYTHROMYCIN TAB 333MG EC	141	ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 5 MG.....	190
ERGOLOID MESYLATES TAB 1 MG.....	149	ERYTHROMYCIN TAB 500 MG	141	ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 5 MG.....	190
ERGOTAMINE W/ CAFFEINE SUPPOS 2-100 MG.....	94	ERYTHROMYCIN TAB 500MG BS	141		
ERGOTAMINE W/ CAFFEINE TAB 1-100 MG ..	94	ERYTHROMYCIN TAB 500MG EC.....	141		
ERGOT/CAFFEN TAB 1-100MG.....	94	ERYTHROMYCIN TAB DELAYED RELEASE 250 MG.....	141		
ERIVEDGE CAP 150MG.....	166	ERYTHROMYCIN TAB DELAYED RELEASE 250 MG.....	141		
ERLEADA TAB 60MG	20				
ERLEADA TAB 240MG	20				

ESTRADIOL VAGINAL INSERT STARTER PACK 10 MCG	99	ETANERCEPT SUBCUTANEOUS SOLUTION CARTRIDGE 50 MG/ML	131	ETONOGESTREL-ETHINYL ESTRADIOL VA RING 0.12-0.015 MG/24HR.....	99
ESTRADIOL VAGINAL RING 2 MG (7.5 MCG/24HRS).....	98	ETHACRYNIC ACID TAB 25 MG	80	ETONOGESTREL MIS ETHY EST.....	99
ESTRADIOL VAGINAL TAB 10 MCG.....	98	ETHACRYNIC TAB ACD 25MG	80	ETOPOSIDE (BULK) POWDER.....	149
ESTRADIOL VAGINAL TAB 10 MCG.....	105	ETHAMBUTOL HCL TAB 100 MG.....	42	ETOPOSIDE CAP 50 MG.....	94
ESTRADIOL VALERATE-DIENOGEST TAB 3 MG /2-2 MG/2-3 MG/1 MG	102	ETHAMBUTOL HCL TAB 400 MG	42	ETOPOSIDE CAP 50MG	94
ESTRADIOL VALERATE IM IN OIL 10 MG/ML	96	ETHAMBUTOL HCL TAB 400 MG	42	ETOPOSIDE POW	149
ESTRADIOL VALERATE IM IN OIL 10 MG/ML	98	ETHAMBUTOL TAB 100MG	42	ETRAVIRINE TAB 25 MG.....	17
ESTRADIOL VALERATE IM IN OIL 20 MG/ ML	96	ETHAMBUTOL TAB 400MG.....	42	ETRAVIRINE TAB 100 MG	17
ESTRADIOL VALERATE IM IN OIL 20 MG/ ML	98	ETHIONAMIDE TAB 250 MG.....	43	ETRAVIRINE TAB 100MG.....	17
ESTRADIOL VALERATE IM IN OIL 40 MG/ ML	96	ETHOSUXIMIDE (BULK) POWDER.....	149	ETRAVIRINE TAB 200 MG	17
ESTRADIOL VALERATE IM IN OIL 40 MG/ ML	98	ETHOSUXIMIDE CAP 250 MG	59	ETRAVIRINE TAB 200 MG	17
ESTRAD VAL INJ 10MG/ML	98	ETHOSUXIMIDE CAP 250 MG	59	ETRAVIRINE TAB 200MG.....	17
ESTRAD VAL INJ 20MG/ML	98	ETHOSUXIMIDE CAP 250MG.....	59	EUCRISA OIN 2%.....	70
ESTRAD VAL INJ 40MG/ML	98	ETHOSUXIMIDE POW	149	EUTHYROX TAB 25MCG	127
ESTRAMUSTINE PHOSPHATE SODIUM CAP 140 MG.....	33	ETHOSUXIMIDE SOL 250/5ML.....	59	EUTHYROX TAB 50MCG	127
ESTRA/NORETH TAB 0.5-0.1	97	ETHOSUXIMIDE SOLN 250 MG/5ML	59	EUTHYROX TAB 75MCG	127
ESTRA/NORETH TAB 1-0.5MG.....	97	ETHOXLATED MACADAMIA NUT OIL	165	EUTHYROX TAB 88MCG.....	127
ESTRATEST FS TAB 1.25-2.5	98	ETHY ETH EST TAB 1-35	98	EUTHYROX TAB 100MCG.....	127
ESTRATEST HS TAB	98	ETHYL PARABEN POW	149	EUTHYROX TAB 112MCG	127
ESTRING MIS 7.5/24HR	98	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG.....	98	EUTHYROX TAB 125MCG	127
ESTROGEL GEL 0.06%	98	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG.....	100	EUTHYROX TAB 137MCG	127
ESTROGENS, CONJUGATED TAB 0.3 MG ...	96	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG.....	105	EUTHYROX TAB 150MCG.....	127
ESTROGENS, CONJUGATED TAB 0.3 MG ...	103	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-50 MCG.....	99	EUTHYROX TAB 175MCG	127
ESTROGENS, CONJUGATED TAB 0.9 MG ...	96	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-50 MCG.....	100	EUTHYROX TAB 200MCG.....	127
ESTROGENS, CONJUGATED TAB 0.9 MG ...	103	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-50 MCG.....	104	EVAMIST SPR 1.53MG	99
ESTROGENS, CONJUGATED TAB 0.45 MG ...	96	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-50 MCG.....	104	EVEROLIMUS TAB 2.5 MG	167
ESTROGENS, CONJUGATED TAB 0.625 MG .	103	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-50 MCG.....	99	EVEROLIMUS TAB 2.5 MG	169
ESTROGENS, CONJUGATED TAB 0.625 MG	103	ETODOLAC CAP 200 MG	173	EVEROLIMUS TAB 2.5MG	167
ESTROGENS, CONJUGATED TAB 1.25 MG ...	96	ETODOLAC CAP 200MG	173	EVEROLIMUS TAB 2MG	167
ESTROGENS, CONJUGATED TAB 1.25 MG ...	103	ETODOLAC CAP 300 MG	173	EVEROLIMUS TAB 3MG	167
ESTROGENS, CONJUGATED VAGINAL CREAM 0.625 MG/GM.....	103	ETODOLAC CAP 300MG	173	EVEROLIMUS TAB 5 MG.....	167
ESTROG/MTEST TAB 1.25-2.5	98	ETODOLAC ER TAB 400MG	173	EVEROLIMUS TAB 5 MG.....	169
ESZOPICLONE TAB 1 MG	106	ETODOLAC ER TAB 500MG	173	EVEROLIMUS TAB 5MG	167
ESZOPICLONE TAB 1MG	106	ETODOLAC ER TAB 600MG	173	EVEROLIMUS TAB 5MG	167
ESZOPICLONE TAB 2 MG.....	106	ETODOLAC TAB 400 MG	173	EVEROLIMUS TAB 5MG	167
ESZOPICLONE TAB 2MG	106	ETODOLAC TAB 400MG.....	173	EVEROLIMUS TAB 7.5 MG	167
ESZOPICLONE TAB 3 MG.....	106	ETODOLAC TAB 500 MG	173	EVEROLIMUS TAB 7.5 MG	169
ESZOPICLONE TAB 3MG	106	ETODOLAC TAB 500MG.....	173	EVEROLIMUS TAB 7.5MG.....	167
ETANERCEPT SUBCUTANEOUS INJ 25 MG/0.5ML	131	ETODOLAC TAB ER 24HR 400 MG	173	EVEROLIMUS TAB 10 MG.....	167
ETANERCEPT SUBCUTANEOUS SOLN PREFILLED SYRINGE 25 MG/0.5ML.....	131	ETODOLAC TAB ER 24HR 500 MG	173	EVEROLIMUS TAB 10 MG.....	169
ETANERCEPT SUBCUTANEOUS SOLN PREFILLED SYRINGE 50 MG/ML.....	131	ETODOLAC TAB ER 24HR 600 MG	173	EVEROLIMUS TAB 10MG	167
ETANERCEPT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 50 MG/ML ...	132	ETONOGESTREL-ETHINYL ESTRADIOL VA RING 0.12-0.015 MG/24HR.....	97	EVEROLIMUS TAB FOR ORAL SUSP 2 MG...167	
		ETONOGESTREL-ETHINYL ESTRADIOL VA RING 0.12-0.015 MG/24HR.....	97	EVEROLIMUS TAB FOR ORAL SUSP 3 MG ..167	
		ETONOGESTREL-ETHINYL ESTRADIOL VA RING 0.12-0.015 MG/24HR.....	99	EVEROLIMUS TAB FOR ORAL SUSP 5 MG ..167	
				EVEXITHROID TAB 15MG	128
				EVEXITHROID TAB 30MG	128
				EVEXITHROID TAB 60MG.....	128
				EVEXITHROID TAB 90MG.....	128
				EVEXITHROID TAB 120MG	128
				EVEXITHROID TAB 180MG	128
				EVOLOCUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 140 MG/ML.....	85
				EVOLOCUMAB SUBCUTANEOUS SOLN CARTRIDGE/INFUSOR 420 MG/3.5ML.....	85

EVOLUCUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 140 MG/ML.....	85	FEIBA INJ.....	117	FENTANYL CITRATE LOZENGE ON A HANDLE 1600 MCG.....	183
EVOTAZ TAB 300-150.....	19	FEIBA INJ.....	117	FENTANYL DIS 12MCG/HR.....	180
EVRYSDI SOL.....	94	FEIBA INJ.....	117	FENTANYL DIS 25MCG/HR.....	180
EVRYSDI TAB 5MG.....	94	FEIRZA TAB 1.5/30.....	99	FENTANYL DIS 50MCG/HR.....	180
EXELDERM CRE 1%.....	33	FEIRZA TAB 1/20.....	99	FENTANYL DIS 75MCG/HR.....	180
EXELDERM SOL 1%.....	33	FELBAMATE SUS 600/5ML.....	113	FENTANYL DIS 100MCG/H.....	180
EXEMESTANE TAB 25 MG.....	43	FELBAMATE SUSP 600 MG/5ML.....	113	FENTANYL OT LOZ 200MCG.....	183
EXEMESTANE TAB 25MG.....	43	FELBAMATE TAB 400 MG.....	113	FENTANYL OT LOZ 400MCG.....	183
EXENATIDE EXTENDED RELEASE SUSP AUTO-INJECTOR 2 MG/0.85ML.....	29	FELBAMATE TAB 400MG.....	113	FENTANYL OT LOZ 600MCG.....	183
EXENATIDE INJ 5MCG.....	29	FELBAMATE TAB 600 MG.....	113	FENTANYL OT LOZ 800MCG.....	183
EXENATIDE INJ 10MCG.....	29	FELBAMATE TAB 600 MG.....	113	FENTANYL OT LOZ 1200MCG.....	183
EXENATIDE SOLN PEN-INJECTOR 5 MCG/0.02ML.....	29	FELBAMATE TAB 600MG.....	113	FENTANYL OT LOZ 1600MCG.....	183
EXENATIDE SOLN PEN-INJECTOR 5 MCG/0.02ML.....	29	FELBATOL TAB 400MG.....	113	FENTANYL TD PATCH 72HR 12 MCG/HR.....	180
EXENATIDE SOLN PEN-INJECTOR 10 MCG/0.04ML.....	29	FELBATOL TAB 600MG.....	113	FENTANYL TD PATCH 72HR 25 MCG/HR.....	180
EXENATIDE SOLN PEN-INJECTOR 10 MCG/0.04ML.....	29	FELODIPINE TAB 2.5MG ER.....	57	FENTANYL TD PATCH 72HR 50 MCG/HR.....	180
EXODERM LOT 25-1%.....	33	FELODIPINE TAB 5MG ER.....	57	FENTANYL TD PATCH 72HR 75 MCG/HR.....	180
EXSERVAN MIS 50MG.....	64	FELODIPINE TAB 10MG ER.....	57	FENTANYL TD PATCH 72HR 100 MCG/HR.....	180
*EXTERNAL VEHICLES - SOLUTION***.....	163	FELODIPINE TAB ER 24HR 2.5 MG.....	57	FE PYROPHOSP POW.....	149
EYSUVIS DRO 0.25%.....	176	FELODIPINE TAB ER 24HR 5 MG.....	57	*FERRIC SUBSULFATE SOLN**.....	119
EZALLOR SPR CAP 5MG.....	83	FELODIPINE TAB ER 24HR 10 MG.....	57	FERRIC SUBSULFATE SOLN 259 MG/GM.....	117
EZALLOR SPR CAP 10MG.....	83	FEMCAP MIS 22MM.....	149	FERROUS FUMARATE-FOLIC ACID TAB 324-1 MG.....	87
EZALLOR SPR CAP 20MG.....	83	FEMCAP MIS 26MM.....	149	FEZOLINETANT TAB 45 MG.....	126
EZALLOR SPR CAP 40MG.....	83	FEMCAP MIS 30MM.....	149	*FIBRIN SEALANT COMPONENT KIT 2 ML***.....	68
EZETIMIBE TAB 10 MG.....	84	FEM PH GEL.....	23	*FIBRIN SEALANT COMPONENT KIT 2 ML***.....	72
EZETIMIBE TAB 10MG.....	84	FEMRING MIS 0.1MG/24.....	99	*FIBRIN SEALANT COMPONENT KIT 4 ML***.....	68
FA-8 CAP 800MCG.....	214	FEMRING MIS 0.05/24H.....	99	*FIBRIN SEALANT COMPONENT KIT 4 ML***.....	72
FABHALTA CAP 200MG.....	12	FENOFIBRATE CAP 43MG.....	83	*FIBRIN SEALANT COMPONENT KIT 10 ML***.....	68
FACTOR IX COMPLEX FOR INJ 500 UNIT.....	120	FENOFIBRATE CAP 67MG.....	83	*FIBRIN SEALANT COMPONENT KIT 10 ML***.....	72
FACTOR IX COMPLEX FOR INJ 1000 UNIT.....	120	FENOFIBRATE CAP 130MG.....	83	*FIBRIN SEALANT COMPONENT SOLUTION***.....	68
FACTOR IX COMPLEX FOR INJ 1500 UNIT.....	120	FENOFIBRATE CAP 134MG.....	83	*FIBRIN SEALANT COMPONENT SOLUTION***.....	68
FACTOR XIII CONCENTRATE (HUMAN) FOR INJ KIT 1000-1600 UNIT.....	117	FENOFIBRATE CAP 200MG.....	83	*FIBRIN SEALANT COMPONENT SOLUTION***.....	68
FALMINA TAB.....	99	FENOFIBRATE CAP 200MG.....	83	FIDAXOMICIN FOR SUSP 40 MG/ML.....	140
FAMCICLOVIR TAB 125 MG.....	36	FENOFIBRATE CAP 200MG.....	83	FIDAXOMICIN TAB 200 MG.....	141
FAMCICLOVIR TAB 125MG.....	36	FENOFIBRATE CAP 200MG.....	83	FIDAXOMICIN TAB 200MG.....	141
FAMCICLOVIR TAB 250 MG.....	36	FENOFIBRATE CAP 200MG.....	83	FILGRASTIM-AAFI INJ 300 MCG/ML.....	53
FAMCICLOVIR TAB 250MG.....	36	FENOFIBRATE CAP 200MG.....	83	FILGRASTIM-AAFI INJ 480 MCG/1.6ML (300 MCG/ML).....	53
FAMCICLOVIR TAB 500 MG.....	36	FENOFIBRATE CAP 200MG.....	83	FILGRASTIM-AAFI SOLN PREFILLED SYRINGE 300 MCG/0.5ML.....	53
FAMCICLOVIR TAB 500MG.....	36	FENOFIBRATE CAP 200MG.....	83	FILGRASTIM-AAFI SOLN PREFILLED SYRINGE 480 MCG/0.8ML.....	53
FAMOTIDINE FOR SUSP 40 MG/5ML.....	121	FENOFIBRATE CAP 200MG.....	83	FILGRASTIM-SNDZ SOLN PREFILLED SYRINGE 300 MCG/0.5ML.....	54
FAMOTIDINE SUS 40MG/5ML.....	121	FENOFIBRATE CAP 200MG.....	83	FILGRASTIM-SNDZ SOLN PREFILLED SYRINGE 480 MCG/0.8ML.....	54
FASENRA PEN INJ 30MG/ML.....	193	FENOFIBRATE CAP 200MG.....	83		
FASTCLIX MIS LANCETS.....	76	FENOFIBRATE CAP 200MG.....	83		
FC2 FEMALE MIS CONDOM.....	149	FENOFIBRATE CAP 200MG.....	83		
FEBUXOSTAT TAB 40 MG.....	35	FENOFIBRATE CAP 200MG.....	83		
FEBUXOSTAT TAB 40MG.....	35	FENOFIBRATE CAP 200MG.....	83		
FEBUXOSTAT TAB 80 MG.....	35	FENOFIBRATE CAP 200MG.....	83		
FEBUXOSTAT TAB 80MG.....	35	FENOFIBRATE CAP 200MG.....	83		
FECAL MICROBIOTA SPORES, LIVE-BRPK CAPS.....	22	FENTANYL CITRATE LOZENGE ON A HANDLE 200 MCG.....	183		
		FENTANYL CITRATE LOZENGE ON A HANDLE 400 MCG.....	183		
		FENTANYL CITRATE LOZENGE ON A HANDLE 600 MCG.....	183		
		FENTANYL CITRATE LOZENGE ON A HANDLE 800 MCG.....	183		
		FENTANYL CITRATE LOZENGE ON A HANDLE 1200 MCG.....	183		

FILSPARI TAB 200MG.....	111	FLUARIX INJ 2025-26.....	210	FLUOCINOLONE ACETONIDE OINT 0.025%123	
FILSPARI TAB 400MG.....	111	FLUCELVAX INJ 2025-26.....	210	FLUOCINOLONE ACETONIDE (OTIC) OIL	
FILSUEZ GEL 10%.....	73	FLUCONAZOLE FOR SUSP 10 MG/ML.....	33	0.01%.....	186
FINACEA AER 15%.....	70	FLUCONAZOLE FOR SUSP 40 MG/ML.....	33	FLUOCINOLONE ACETONIDE (OTIC) OIL	
FINASTERIDE TAB 5 MG.....	47	FLUCONAZOLE SUS 10MG/ML.....	33	0.01%.....	186
FINASTERIDE TAB 5MG.....	47	FLUCONAZOLE SUS 40MG/ML.....	33	FLUOCINOLONE ACETONIDE (OTIC) OIL	
FINGERSTIX MIS LANCETS.....	76	FLUCONAZOLE TAB 50 MG.....	33	0.01%.....	186
FINGOLIMOD CAP 0.5MG.....	171	FLUCONAZOLE TAB 50MG.....	33	FLUOCINOLONE ACETONIDE (OTIC) OIL	
FINGOLIMOD HCL CAP 0.5 MG (BASE		FLUCONAZOLE TAB 100 MG.....	33	0.01%.....	186
EQUIV).....	171	FLUCONAZOLE TAB 100MG.....	33	FLUOCINOLONE ACETONIDE SHAMPOO	
FINZALA CHW FE 1/20.....	99	FLUCONAZOLE TAB 150 MG.....	33	0.01%.....	122
FIORICET CAP.....	11	FLUCONAZOLE TAB 150MG.....	33	FLUOCINOLONE ACETONIDE SOLN 0.01%.	123
FIRDAPSE TAB 10MG.....	149	FLUCONAZOLE TAB 200 MG.....	33	FLUOCINONIDE CRE 0.05%.....	123
FIRMAGON INJ 80MG.....	130	FLUCONAZOLE TAB 200MG.....	33	FLUOCINONIDE CREAM 0.05%.....	123
FIRMAGON INJ 120MG.....	130	FLUCYTOSINE CAP 250 MG.....	33	FLUOCINONIDE CRE E 0.05%.....	123
FIRST-OMEPRASUS 2MG/ML.....	190	FLUCYTOSINE CAP 250 MG.....	33	FLUOCINONIDE EMULSIFIED BASE	
FIRST-PANTPR SUS 4MG/ML.....	190	FLUCYTOSINE CAP 250MG.....	33	CREAM 0.05%.....	123
FIRVANQ SOL 25MG/ML.....	23	FLUCYTOSINE CAP 500 MG.....	33	FLUOCINONIDE GEL 0.05%.....	123
FIRVANQ SOL 50MG/ML.....	23	FLUCYTOSINE CAP 500 MG.....	33	FLUOCINONIDE GEL 0.05%.....	123
FISH OIL CAP 300MG.....	149	FLUCYTOSINE CAP 500MG.....	33	FLUOCINONIDE OIN 0.05%.....	123
FITUSIRAN SODIUM SUBCUTANEOUS		FLUDROCORTISONE ACETATE TAB 0.1 MG	123	FLUOCINONIDE OINT 0.05%.....	123
SOLN 20 MG/0.2ML.....	160	FLUDROCORT TAB 0.1MG.....	123	FLUOCINONIDE SOL 0.05%.....	123
FITUSIRAN SODIUM SUBCUTANEOUS		FLULAVAL INJ 2025-26.....	210	FLUOCINONIDE SOLN 0.05%.....	123
SOLN AUTO-INJ 50 MG/0.5ML.....	160	FLUMIST NASA LIQ 2025-26.....	210	FLUORIDE CHW 0.5MG F.....	86
FLAC OIL 0.01%.....	186	FLUNISOLIDE NASAL SOLN 25 MCG/ACT		FLUORIDE CHW 0.25MG F.....	86
FLAREX SUS 0.1% OP.....	177	(0.025%).....	20	FLUORIDE CHW 1MG F.....	86
FLAVOCOVID CAP 250 MG.....	154	FLUNISOLIDE SPR 0.025%.....	20	FLUORIDEX CON DLY REN.....	66
FLAVOCOVID CAP 500 MG.....	154	FLUOCIN ACET CRE 0.01%.....	123	FLUORIDEX PST 1.1%.....	67
FLAVOCOVID-CITRATED ZINC		FLUOCIN ACET CRE 0.025%.....	123	FLUORID SENS GEL 1.1-5%.....	66
BISGLYCINATE CAP 250-50 MG.....	154	FLUOCIN ACET OIL 0.01%.....	123	FLUORMX 5000 GEL SENSITIV.....	67
FLAVOCOVID-CITRATED ZINC		FLUOCIN ACET OIL 0.01%.....	186	FLUORMX 5000 PST 1.1%.....	67
BISGLYCINATE CAP 500-50 MG.....	154	FLUOCIN ACET OIL 0.01%BDY.....	123	FLUOROMETHOLONE ACETATE OPTH	
FLAVOR BLEND SUS.....	149	FLUOCIN ACET OIL 0.01% SC.....	123	SUSP 0.1%.....	177
FLAVOR PLUS LIQ.....	149	FLUOCIN ACET OIL BODY.....	123	FLUOROMETHOLONE OPTH SUSP 0.1% ..	177
FLAVOR SWEET SYP.....	149	FLUOCIN ACET OIL EAR0.01%.....	186	FLUOROMETHOLONE OPTH SUSP 0.1% ..	177
FLAVOXATE HCL TAB 100 MG.....	42	FLUOCIN ACET OIL SCALP.....	123	FLUOROMETHOLONE OPTH SUSP 0.25%.	177
FLAVOXATE TAB 100MG.....	42	FLUOCIN ACET OIN 0.025%.....	123	FLUOROMETHOL SUS 0.1% OP.....	177
FLECAINIDE ACETATE TAB 50 MG.....	21	FLUOCIN ACET SOL 0.01%.....	123	FLUOROURACIL (BULK) POWDER.....	149
FLECAINIDE ACETATE TAB 100 MG.....	21	FLUOCINOLONE ACETONIDE CREAM		FLUOROURACIL CRE 5%.....	70
FLECAINIDE ACETATE TAB 150 MG.....	21	0.01%.....	123	FLUOROURACIL CREAM 5%.....	70
FLECAINIDE TAB 50MG.....	21	FLUOCINOLONE ACETONIDE CREAM		FLUOROURACIL CREAM 5%.....	70
FLECAINIDE TAB 100MG.....	21	0.025%.....	123	FLUOROURACIL POW.....	149
FLECAINIDE TAB 150MG.....	21	FLUOCINOLONE ACETONIDE OIL 0.01%		FLUOROURACIL SOL 2%.....	70
FLEQSUVY SUS 25MG/5ML.....	198	(BODY OIL).....	122	FLUOROURACIL SOL 5%.....	70
FLEXICHAMBER MIS.....	149	FLUOCINOLONE ACETONIDE OIL 0.01%		FLUOROURACIL SOLN 2%.....	70
FLEXICHAMBER MIS MASK LRG.....	149	(BODY OIL).....	123	FLUOROURACIL SOLN 5%.....	70
FLEXICHAMBER MIS MASK SM.....	149	FLUOCINOLONE ACETONIDE OIL 0.01%		FLUOXETINE CAP 10MG.....	204
FLIBANSERIN TAB 100 MG.....	64	(BODY OIL).....	123	FLUOXETINE CAP 20MG.....	204
FLOLIPID SUS 20MG/5ML.....	84	FLUOCINOLONE ACETONIDE OIL 0.01%		FLUOXETINE CAP 40MG.....	204
FLOLIPID SUS 40MG/5ML.....	84	(BODY OIL).....	123	FLUOXETINE CAP 90MG DR.....	204
FLORAFOL PED SOL 0.25/ML.....	214	FLUOCINOLONE ACETONIDE OIL 0.01%		FLUOXETINE HCL CAP 10 MG.....	204
FLORIVA DRO 0.25MG.....	86	(SCALP OIL).....	122	FLUOXETINE HCL CAP 20 MG.....	204
FLOTREX CHW.....	214	FLUOCINOLONE ACETONIDE OIL 0.01%		FLUOXETINE HCL CAP 40 MG.....	204
FLOW-EZE MIS VENTED.....	80	(SCALP OIL).....	123	FLUOXETINE HCL CAP DELAYED	
FLUAD INJ 2025-26.....	210	FLUOCINOLONE ACETONIDE OIL 0.01%		RELEASE 90 MG.....	204
		(SCALP OIL).....	123	FLUOXETINE HCL SOLUTION 20 MG/5ML.	204

FLUOXETINE HCL TAB 10 MG	204	FLUTICASONE-SALMETEROL AER POWDER BA 55-14 MCG/ACT	193	FML FORTE SUS 0.25% OP	177
FLUOXETINE HCL TAB 20 MG	205	FLUTICASONE-SALMETEROL AER POWDER BA 100-50 MCG/ACT	193	FML LIQUIFLM SUS 0.1% OP	177
FLUOXETINE HCL TAB 60 MG	205	FLUTICASONE-SALMETEROL AER POWDER BA 100-50 MCG/ACT	195	FOLIC ACID CAP 0.8 MG	214
FLUOXETINE SOL 20MG/5ML	204	FLUTICASONE-SALMETEROL AER POWDER BA 113-14 MCG/ACT	193	FOLIC ACID POW	149
FLUOXETINE TAB 10MG	204	FLUTICASONE-SALMETEROL AER POWDER BA 232-14 MCG/ACT	193	FOLIC ACID POWDER	149
FLUOXETINE TAB 20MG	205	FLUTICASONE-SALMETEROL AER POWDER BA 250-50 MCG/ACT	193	FOLIC ACID TAB 1 MG	214
FLUOXETINE TAB 60MG	205	FLUTICASONE-SALMETEROL AER POWDER BA 250-50 MCG/ACT	195	FOLIC ACID TAB 1 MG	214
FLUPHENAZINE CON 5MG/ML	6	FLUTICASONE-SALMETEROL AER POWDER BA 500-50 MCG/ACT	193	FOLIC ACID TAB 1MG	214
FLUPHENAZINE ELX 2.5/5ML	6	FLUTICASONE-SALMETEROL AER POWDER BA 500-50 MCG/ACT	195	FOLIC ACID TAB 400 MCG	214
FLUPHENAZINE HCL ELIXIR 2.5 MG/5ML	6	FLUTICASONE-SALMETEROL AER POWDER BA 500-50 MCG/ACT	195	FOLIC ACID TAB 400 MCG	215
FLUPHENAZINE HCL ORAL CONC 5 MG/ML	6	FLUTICASONE-SALMETEROL INHAL AEROSOL 45-21 MCG/ACT	193	FOLIC ACID TAB 400MCG	214
FLUPHENAZINE HCL TAB 1 MG	6	FLUTICASONE-SALMETEROL INHAL AEROSOL 115-21 MCG/ACT	193	FOLIC ACID TAB 800 MCG	214
FLUPHENAZINE HCL TAB 2.5 MG	6	FLUTICASONE-SALMETEROL INHAL AEROSOL 230-21 MCG/ACT	193	FOLIC ACID TAB 800MCG	214
FLUPHENAZINE HCL TAB 5 MG	6	FLUTICASONE SPR 50MCG	20	FOLIC ACID TAB 1000MCG	214
FLUPHENAZINE HCL TAB 10 MG	6	FLUTICASONE-UMECLIDINIUM- VILANTEROL AEPB 100-62.5-25 MCG/ACT	195	FOLIVANE-OB CAP	215
FLUPHENAZINE TAB 1MG	6	FLUTICASONE-UMECLIDINIUM- VILANTEROL AEPB 100-62.5-25 MCG/ACT	195	FONDAPARINUX INJ 2.5/0.5	26
FLUPHENAZINE TAB 2.5MG	6	FLUTIC/SALME AER 100/50	193	FONDAPARINUX INJ 5/0.4ML	26
FLUPHENAZINE TAB 5MG	6	FLUTIC/SALME AER 250/50	193	FONDAPARINUX INJ 7.5/0.6	26
FLUPHENAZINE TAB 10MG	6	FLUTIC/SALME AER 500/50	193	FONDAPARINUX INJ 10/0.8ML	26
FLURANDRENOL CRE 0.05%	123	FLUTIC/SALME INH 55/14	193	FONDAPARINUX SODIUM SUBCUTANEOUS INJ 2.5 MG/0.5ML	26
FLURANDRENOLIDE CREAM 0.05%	123	FLUTIC/SALME INH 113/14	193	FONDAPARINUX SODIUM SUBCUTANEOUS INJ 5 MG/0.4ML	26
FLURANDRENOLIDE LOTION 0.05%	123	FLUTIC/SALME INH 232/14	193	FONDAPARINUX SODIUM SUBCUTANEOUS INJ 5 MG/0.4ML	26
FLURANDRENOLIDE TAPE 4 MCG/SQCM	122	FLUVASTATIN CAP 20MG	84	FONDAPARINUX SODIUM SUBCUTANEOUS INJ 7.5 MG/0.6ML	26
FLURANDRENOL LOT 0.05%	123	FLUVASTATIN CAP 40MG	84	FONDAPARINUX SODIUM SUBCUTANEOUS INJ 10 MG/0.8ML	26
FLURAZEPAM CAP 15MG	106	FLUVASTATIN SODIUM CAP 20 MG (BASE EQUIVALENT)	84	FOOD COLOR LIQ BLUE	149
FLURAZEPAM CAP 30MG	106	FLUVASTATIN SODIUM CAP 40 MG (BASE EQUIVALENT)	84	FORANE SOL	149
FLURAZEPAM HCL CAP 15 MG	106	FLUVOXAMINE CAP 100MG ER	205	FORA TEST GO MIS ADV MOBL	149
FLURAZEPAM HCL CAP 30 MG	106	FLUVOXAMINE CAP 150MG ER	205	FORA TEST GO TES ADV VOIC	76
FLURBIPROFEN SODIUM OPTH SOLN 0.03%	177	FLUVOXAMINE MALEATE CAP ER 24HR 100 MG	205	FORMALDEHYDE SOL 10%	149
FLURBIPROFEN SOL 0.03% OP	177	FLUVOXAMINE MALEATE CAP ER 24HR 150 MG	205	FORMALDEHYDE SOL 37%	150
FLURBIPROFEN TAB 50 MG	173	FLUVOXAMINE MALEATE TAB 25 MG	205	FORMALDEHYDE SOLUTION 10%	149
FLURBIPROFEN TAB 50MG	173	FLUVOXAMINE MALEATE TAB 50 MG	205	FORMALDEHYDE SOLUTION 37%	150
FLURBIPROFEN TAB 100 MG	173	FLUVOXAMINE MALEATE TAB 100 MG	205	FORTESTA GEL 10MG/ACT	12
FLURBIPROFEN TAB 100 MG	174	FLUVOXAMINE TAB 25MG	205	FORTISCARE SOL CNTL HI	150
FLURBIPROFEN TAB 100 MG	174	FLUVOXAMINE TAB 50MG	205	FORTISCARE SOL CNTL LOW	150
FLURBIPROFEN TAB 100MG	173	FLUVOXAMINE TAB 100MG	205	FORTISCARE SOL CNTL NML	150
FLUTICASONE CRE 0.05%	123	FLUZONE HD INJ 2025-26	210	FOSAMAX + D TAB 70-2800	142
FLUTICASONE FUROATE AEROSOL POWDER BREATH ACTIV 50 MCG/ACT	19	FLUZONE INJ 2025-26	210	FOSAMAX + D TAB 70-5600	142
FLUTICASONE FUROATE AEROSOL POWDER BREATH ACTIV 100 MCG/ACT	19	FLUZONE INJ 2025-26	210	FOSAMAX TAB 70MG	142
FLUTICASONE FUROATE AEROSOL POWDER BREATH ACTIV 200 MCG/ACT	19			FOSAMPRENAVIR CALCIUM SUSP 50 MG/ML (BASE EQUIV)	19
FLUTICASONE FUROATE-VILANTEROL AERO POWD BA 50-25 MCG/ACT	193			FOSAMPRENAVIR CALCIUM TAB 700 MG (BASE EQUIV)	19
FLUTICASONE FUROATE-VILANTEROL AERO POWD BA 100-25 MCG/ACT	193			FOSAMPRENAVI TAB 700MG	19
FLUTICASONE FUROATE-VILANTEROL AERO POWD BA 200-25 MCG/ACT	193			FOSFOMYCIN POW 3GM	23
FLUTICASONE OIN 0.005%	123			FOSFOMYCIN TROMETHAMINE POWD PACK 3 GM (BASE EQUIVALENT)	23
FLUTICASONE PROPIONATE CREAM 0.05%	123			FOSINOP/HCTZ TAB 10/12.5	61
FLUTICASONE PROPIONATE NASAL SUSP 50 MCG/ACT	20			FOSINOP/HCTZ TAB 20/12.5	61
FLUTICASONE PROPIONATE OINT 0.005%	123			FOSINOPRIL SODIUM & HYDROCHLOROTHIAZIDE TAB 10-12.5 MG	61
				FOSINOPRIL SODIUM & HYDROCHLOROTHIAZIDE TAB 20-12.5 MG	61

FOSINOPRIL SODIUM TAB 10 MG	13	FUROSEMIDE TAB 20 MG	80	GALCANEZUMAB-GNLM	
FOSINOPRIL SODIUM TAB 20 MG.....	13	FUROSEMIDE TAB 20 MG	81	SUBCUTANEOUS SOLN PREFILLED SYR	
FOSINOPRIL SODIUM TAB 40 MG.....	14	FUROSEMIDE TAB 20MG	80	100 MG/ML	55
FOSINOPRIL TAB 10MG.....	13	FUROSEMIDE TAB 40 MG	80	GALCANEZUMAB-GNLM	
FOSINOPRIL TAB 20MG.....	13	FUROSEMIDE TAB 40 MG	81	SUBCUTANEOUS SOLN PREFILLED SYR	
FOSINOPRIL TAB 40MG.....	14	FUROSEMIDE TAB 40MG.....	80	120 MG/ML	55
FOSRENOL POW 750MG	187	FUROSEMIDE TAB 80 MG	81	GALLIFREY TAB 5MG	188
FOSRENOL POW 1000MG	187	FUROSEMIDE TAB 80 MG	81	GALZIN CAP 25MG.....	86
FOSTAMATINIB DISODIUM TAB 100 MG		FUROSEMIDE TAB 80MG.....	81	GALZIN CAP 50MG	86
(BASE EQUIVALENT).....	121	FUTIBATINIB TAB THERAPY PACK 4 MG		GANAXOLONE SUSP 50 MG/ML	27
FOSTAMATINIB DISODIUM TAB 150 MG		(12 MG DAILY DOSE).....	94	GANCICLOVIR OPHTH GEL 0.15%.....	179
(BASE EQUIVALENT).....	121	FUTIBATINIB TAB THERAPY PACK 4 MG		GA POW	215
FOSTEMSAVIR TROMETHAMINE TAB ER		(16 MG DAILY DOSE).....	94	GARADACIMAB-GXII SOLN AUTO-	
12HR 600 MG	18	FUTIBATINIB TAB THERAPY PACK 4 MG		INJECTOR 200 MG/1.2ML	143
FRAICHE 5000 GEL 1.1%.....	67	(20 MG DAILY DOSE).....	94	GARDASIL 9 INJ	210
FREEDOM GEL CEPAPRO.....	150	FUZEON INJ 90MG.....	18	GARDASIL 9 INJ	210
FREEDOM GEL SILOMAC.....	150	FYAVOLV TAB 0.5-2.5.....	99	GATIFLOXACIN OPHTH SOLN 0.5%.....	178
FREE LIBRE2 KIT PLUS/SEN	76	FYAVOLV TAB 1-5.....	99	GATIFLOXACIN SOL 0.5%.....	178
FREE LIBRE3 KIT PLUS/SEN	76	FYCOMPA SUS 0.5MG/ML.....	113	GATTEX KIT 5MG	108
FREESTYLE MIS READER.....	77	GABAPENTIN CAP 100 MG	106	GA VILAX POW	137
FREESTY LIBR KIT 2 SENSOR	76	GABAPENTIN CAP 100MG	106	GA VILYTE-C SOL	139
FREESTY LIBR KIT 3 SENSOR	76	GABAPENTIN CAP 300 MG.....	106	GA VILYTE-G SOL	139
FREESTY LIBR KIT SENSOR.....	76	GABAPENTIN CAP 300MG	106	GA VILYTE-N SOL FLAV PK	139
FREESTY LIBR MIS 2 READER.....	76	GABAPENTIN CAP 400 MG.....	106	GA VRETO CAP 100MG	167
FREESTY LIBR MIS 3 READER.....	77	GABAPENTIN CAP 400MG	106	GEFITINIB TAB 250 MG	167
FREESTY LIBR MIS READER.....	77	GABAPENTIN CAP 400MG	106	GEFITINIB TAB 250 MG	167
FROVATRIPTAN SUCCINATE TAB 2.5 MG		GABAPENTIN ORAL SOLN 250 MG/5ML ..	106	GEFITINIB TAB 250MG	167
(BASE EQUIVALENT).....	196	GABAPENTIN SOL 250/5ML	106	GELATIN ADSORBABLE OPHTH FILM	175
FROVATRIPTAN TAB 2.5MG	196	GABAPENTIN TAB 600 MG	106	*GEL BASE - GEL**	142
FRUQUINTINIB CAP 1 MG.....	38	GABAPENTIN TAB 600MG	106	*GEL BASE - GEL**	143
FRUQUINTINIB CAP 5 MG.....	38	GABAPENTIN TAB 800 MG.....	106	*GEL BASE - GEL**	145
FRUZAQLA CAP 1MG	38	GABAPENTIN TAB 800MG	106	*GEL BASE - GEL**	145
FRUZAQLA CAP 5MG.....	38	GA GEL PAK	86	*GEL BASE - GEL**	147
FT ASPIRIN CHW 81MG	174	GALAFOLD CAP 123MG	109	*GEL BASE - GEL**	150
FT ASPIRIN TAB 81MG	174	GALANTAMINE CAP 8MG ER.....	65	*GEL BASE - GEL**	150
FT CLEARLAX POW	137	GALANTAMINE CAP 16MG ER.....	65	*GEL BASE - GEL**	154
FT CO Q-10 CAP 100MG.....	150	GALANTAMINE CAP 24MG ER.....	65	*GEL BASE - GEL**	155
FT CO Q-10 CAP 200MG.....	150	GALANTAMINE HYDROBROMIDE CAP ER		*GEL BASE - GEL**	156
FT FOLIC ACI TAB 400MCG	215	24HR 8 MG	65	*GEL BASE - GEL**	156
FT IMMUNE CHW SUPPORT	86	GALANTAMINE HYDROBROMIDE CAP ER		*GEL BASE - GEL**	159
FT LAXATIVE TAB 5MG EC	138	24HR 16 MG	65	*GEL BASE - GEL**	162
FT MAG CITRA SOL CHERRY	139	GALANTAMINE HYDROBROMIDE CAP ER		*GEL BASE - GEL**	163
FT MAG CITRA SOL LEMON	139	24HR 24 MG	65	*GEL BASE - GEL**	165
FT NALOXONE SPR 4MG	185	GALANTAMINE HYDROBROMIDE ORAL		GELFILM MIS OP.....	175
FT NICOTINE DIS 7MG/24HR	199	SOLN 4 MG/ML	65	GEMFIBROZIL TAB 600 MG	83
FT NICOTINE DIS 14MG/24H.....	199	GALANTAMINE HYDROBROMIDE TAB 4 MG.	65	GEMFIBROZIL TAB 600 MG	83
FT NICOTINE DIS 21MG/24H.....	199	GALANTAMINE HYDROBROMIDE TAB 8 MG.	65	GEMFIBROZIL TAB 600MG	83
FT NICOTINE GUM 2MG.....	199	GALANTAMINE HYDROBROMIDE TAB 12 MG	65	GENERLAC SOL 10/15ML	139
FT NICOTINE GUM 4MG	199	GALANTAMINE SOL 4MG/ML.....	65	GENERLAC SOL 10GM/15.....	139
FT NICOTINE LOZ 2MG	200	GALANTAMINE TAB 4MG.....	65	GENGRAF CAP 25MG	132
FT NICOTINE LOZ 4MG	200	GALANTAMINE TAB 8MG.....	65	GENGRAF CAP 100MG	132
FUROSEMIDE ORAL SOLN 8 MG/ML.....	80	GALANTAMINE TAB 12MG.....	65	GENGRAF SOL 100MG/ML.....	132
FUROSEMIDE ORAL SOLN 10 MG/ML.....	80	GALBRIELA CHW.....	99	GENTAMICIN CRE 0.1%	11
FUROSEMIDE SOL 10MG/ML	80	GALCANEZUMAB-GNLM		GENTAMICIN OIN 0.1%.....	11
FUROSEMIDE SOL 40MG/5ML.....	80	SUBCUTANEOUS SOLN AUTO-INJECTOR		GENTAMICIN SOL 0.3% OP.....	178
		120 MG/ML	55		

GENTAMICIN SULFATE CREAM 0.1%	11	GLIMEPIRIDE TAB 4 MG	29	GLUCAGON SUBCUTANEOUS SOLUTION	
GENTAMICIN SULFATE OINT 0.1%	11	GLIMEPIRIDE TAB 4MG	29	AUTO-INJECTOR 0.5 MG/0.1ML	115
GENTAMICIN SULFATE OPTH SOLN 0.3%	178	GLIPIZIDE ER TAB 2.5MG	29	GLUCAGON SUBCUTANEOUS SOLUTION	
GENTLE LAXAT TAB 5MG EC	139	GLIPIZIDE ER TAB 5MG	29	AUTO-INJECTOR 1 MG/0.2ML	115
GENTLELAX POW	137	GLIPIZIDE ER TAB 10MG	29	GLUCAGON SUBCUTANEOUS SOLUTION	
GENTLE-LET MIS 26G	77	GLIPIZIDE-METFORMIN HCL TAB 2.5-		AUTO-INJECTOR 1 MG/0.2ML	115
GENTLE-LET MIS 28G	77	250 MG	29	GLUCERNA LIQ BUT PECA	87
GENTLE-LET MIS LANCETS	77	GLIPIZIDE-METFORMIN HCL TAB 2.5-		GLUCERNA LIQ CHOCOLAT	87
GENTLE-LET MIS PLATFORM	80	250 MG	29	GLUCERNA LIQ STRAWBER	87
GENVOYA TAB	16	GLIPIZIDE-METFORMIN HCL TAB 2.5-		GLUCOSE BLOOD TEST STRIP	74
GERBER GOOD CON SOY/IRON	150	500 MG	29	GLUCOSE BLOOD TEST STRIP	75
GERBER GOOD CON W/IRON	150	GLIPIZIDE-METFORMIN HCL TAB 2.5-		GLUCOSE BLOOD TEST STRIP	76
GERBER GOOD LIQ SOY/IRON	150	500 MG	29	GLUCOSE CTRL LIQ MAX PROT	87
GERBER GOOD LIQ W/IRON	150	GLIPIZIDE-METFORMIN HCL TAB 5-500		GLUCOSE SUP LIQ 1.2	87
GERBER GOOD POW SOY/IRON	150	MG	29	GLUCOSE SUP LIQ 1.2	150
GERBER GOOD POW W/IRON	150	GLIPIZIDE POW	150	GLUCOSE URINE TEST-(GLUCOSE	
GG/CODEINE SOL 100-10/5	194	GLIPIZIDE POWDER	150	OXIDASE) STRIP	76
GG/CODEINE SOL 200-20MG	194	GLIPIZIDE TAB 5 MG	29	GLUCOSE URINE TEST-(GLUCOSE	
GILOTRIF TAB 20MG	167	GLIPIZIDE TAB 5MG	29	OXIDASE) STRIP	76
GILOTRIF TAB 30MG	167	GLIPIZIDE TAB 10 MG	29	GLUCOTROL XL TAB 2.5MG	29
GILOTRIF TAB 40MG	167	GLIPIZIDE TAB 10MG	29	GLUCOTROL XL TAB 5MG	29
GILTERITINIB FUMARATE TABLET 40 MG		GLIPIZIDE TAB ER 24HR 2.5 MG	29	GLUCOTROL XL TAB 10MG	29
(BASE EQUIVALENT)	170	GLIPIZIDE TAB ER 24HR 2.5 MG	29	GLUTAMINE (SICKLE CELL) POWD PACK	
GLASDEGIB MALEATE TAB 25 MG (BASE		GLIPIZIDE TAB ER 24HR 2.5 MG	29	5 GM	86
EQUIVALENT)	166	GLIPIZIDE TAB ER 24HR 5 MG	29	GLUTAMINE (SICKLE CELL) POWD PACK	
GLASDEGIB MALEATE TAB 100 MG (BASE		GLIPIZIDE TAB ER 24HR 5 MG	29	5 GM	88
EQUIVALENT)	166	GLIPIZIDE TAB ER 24HR 5 MG	29	GLUTARALDEHY SOL 25%	150
GLATIRAMER ACETATE SOLN PREFILLED		GLIPIZIDE TAB ER 24HR 10 MG	29	GLUTARAL SOLN 25%	150
SYRINGE 20 MG/ML	171	GLIPIZIDE TAB ER 24HR 10 MG	29	GLYB/METFORM TAB 1.25-250	29
GLATIRAMER ACETATE SOLN PREFILLED		GLIPIZIDE TAB ER 24HR 10 MG	29	GLYB/METFORM TAB 2.5-500	29
SYRINGE 20 MG/ML	171	GLIPIZIDE XL TAB 2.5MG	29	GLYB/METFORM TAB 5-500MG	29
GLATIRAMER ACETATE SOLN PREFILLED		GLIPIZIDE XL TAB 5MG	29	GLYBURIDE-METFORMIN TAB 1.25-250 MG	29
SYRINGE 20 MG/ML	171	GLIPIZIDE XL TAB 10MG	29	GLYBURIDE-METFORMIN TAB 2.5-500 MG	29
GLATIRAMER ACETATE SOLN PREFILLED		GLIP/METFORM TAB 2.5-250	29	GLYBURIDE-METFORMIN TAB 5-500 MG	29
SYRINGE 40 MG/ML	171	GLIP/METFORM TAB 2.5-250M	29	GLYBURIDE MICRONIZED TAB 1.5 MG	29
GLATIRAMER ACETATE SOLN PREFILLED		GLIP/METFORM TAB 2.5-500	29	GLYBURIDE MICRONIZED TAB 1.5 MG	30
SYRINGE 40 MG/ML	171	GLIP/METFORM TAB 2.5-500M	29	GLYBURIDE MICRONIZED TAB 3 MG	30
GLATIRAMER ACETATE SOLN PREFILLED		GLIP/METFORM TAB 5-500MG	29	GLYBURIDE MICRONIZED TAB 3 MG	30
SYRINGE 40 MG/ML	171	GLOPERBA SOL 0.6/5ML	35	GLYBURIDE MICRONIZED TAB 6 MG	30
GLATIRAMER INJ 20MG/ML	171	GLUCAGEN INJ HYPOKIT	115	GLYBURIDE MICRONIZED TAB 6 MG	30
GLATIRAMER INJ 20MG/ML	171	GLUCAGON EMR SOL 1MG	115	GLYBURIDE POW	150
GLATIRAMER INJ 40MG/ML	171	GLUCAGON FOR INJ 1 MG	115	GLYBURIDE POWDER	150
GLATIRAMER INJ 40MG/ML	171	GLUCAGON HCL FOR INJ 1 MG	115	GLYBURIDE TAB 1.25 MG	30
GLATOPA INJ 20MG/ML	171	GLUCAGON HCL FOR INJ 1 MG	115	GLYBURIDE TAB 1.25MG	30
GLATOPA INJ 40MG/ML	171	GLUCAGON INJ 1MG	115	GLYBURIDE TAB 2.5 MG	30
GLECAPREVIR-PIBRENTASVIR PELLET		GLUCAGON NASAL POWDER 3 MG/DOSE	114	GLYBURIDE TAB 2.5MG	30
PACK 50-20 MG	15	GLUCAGON NASAL POWDER 3 MG/DOSE	114	GLYBURIDE TAB 5 MG	30
GLECAPREVIR-PIBRENTASVIR TAB 100-		GLUCAGON SUBCUTANEOUS SOLN 1		GLYBURIDE TAB 5MG	30
40 MG	15	MG/0.2ML	115	GLYBURID MCR TAB 1.5MG	29
GLEOSTINE CAP 10MG	9	GLUCAGON SUBCUTANEOUS SOLN PREF		GLYBURID MCR TAB 3MG	30
GLEOSTINE CAP 40MG	9	SYRINGE 0.5 MG/0.1ML	115	GLYBURID MCR TAB 6MG	30
GLEOSTINE CAP 100MG	9	GLUCAGON SUBCUTANEOUS SOLN PREF		GLYCERIN LIQ	150
GLIMEPIRIDE TAB 1 MG	29	SYRINGE 1 MG/0.2ML	115	GLYCERIN LIQ	150
GLIMEPIRIDE TAB 1MG	29	GLUCAGON SUBCUTANEOUS SOLUTION		GLYCERIN LIQUID	150
GLIMEPIRIDE TAB 2 MG	29	AUTO-INJECTOR 0.5 MG/0.1ML	115	GLYCERIN LIQUID	150
GLIMEPIRIDE TAB 2MG	29				

GLYCERIN LIQUID	150	GNP NICOTINE GUM 2MG MINT	200	GRISEOFULVIN TAB ULTR 125.....	34
GLYCERIN TOPICAL LIQUID	73	GNP NICOTINE GUM 2MG ORIG	200	GRISEOFULVIN TAB ULTR 250	34
GLYCEROL LIQ FORMAL	150	GNP NICOTINE GUM 4MG FRT	200	GRISEOFULVIN ULTRAMICROSIZ TAB	
GLYCEROL PHE LIQ 1.1GM/ML	109	GNP NICOTINE GUM 4MG MINT	200	125 MG	34
GLYCEROL PHENYL BUTYRATE LIQUID 1.1		GNP NICOTINE GUM 4MG ORIG	200	GRISEOFULVIN ULTRAMICROSIZ TAB	
GM/ML	109	GNP NICOTINE LOZ 2MG MINT	200	250 MG	34
GLYCOLAX POW 3350 NF	138	GNP NICOTINE LOZ 4MG CHER	200	G TUSSIN AC LIQ 100-10/5	193
GLYCOPYRROLA SOL 1MG/5ML	41	GNP NICOTINE LOZ 4MG MINT	200	GUAIFENESIN-CODEINE SOLN 100-10	
GLYCOPYRROLATE-FORMOTEROL		GNP NICOTINE LOZ MINI 2MG	200	MG/5ML	193
FUMARATE AEROSOL 9-4.8 MCG/ACT	193	GNP PEN NEED MIS 31GX5MM	150	GUAIFENESIN-CODEINE SOLN 100-10	
GLYCOPYRROLATE ORAL SOLN 1 MG/5ML .	41	GNP PEN NEED MIS 31GX8MM	150	MG/5ML	193
GLYCOPYRROLATE ORAL SOLN 1 MG/5ML .	41	GNP PEN NEED MIS 32GX4MM	77	GUAIFENESIN-CODEINE SOLN 100-10	
GLYCOPYRROLATE TAB 1 MG	41	GNP PEN NEED MIS 32GX6MM	77	MG/5ML	194
GLYCOPYRROLATE TAB 2 MG	41	GNP ULTICARE MIS 31GX5/16	150	GUAIFENESIN-CODEINE SOLN 100-10	
GLYCOPYRROL TAB 1MG	41	GOLIMUMAB SUBCUTANEOUS SOLN		MG/5ML	194
GLYCOPYRROL TAB 2MG	41	AUTO-INJECTOR 50 MG/0.5ML	133	GUAIFENESIN-CODEINE SOLN 100-10	
GLYCOSADE PAK	87	GOLIMUMAB SUBCUTANEOUS SOLN		MG/5ML	194
GLYDO GEL 2%	140	AUTO-INJECTOR 100 MG/ML	133	GUAIFENESIN-CODEINE SOLN 100-10	
GLYNASE TAB 1.5MG	30	GOLIMUMAB SUBCUTANEOUS SOLN		MG/5ML	194
GLYNASE TAB 3MG	30	PREFILLED SYRINGE 50 MG/0.5ML	133	GUAIFENESIN SYP 100-10/5	194
GLYNASE TAB 6MG	30	GOLIMUMAB SUBCUTANEOUS SOLN		GUANFACINE HCL TAB 1 MG	10
GLYTAC COMPL BAR 10PE	150	PREFILLED SYRINGE 100 MG/ML	133	GUANFACINE HCL TAB 2 MG	10
GLYTACTIN 15 LIQ RTD LITE	87	GOLYTELY SOL	139	GUANFACINE HCL TAB ER 24HR 1 MG	
GLYTACTIN LIQ RES/LITE	87	GOMEKLI CAP 1MG	38	(BASE EQUIV)	46
GLYTACTIN LIQ RESTOR10	87	GOMEKLI CAP 2MG	38	GUANFACINE HCL TAB ER 24HR 2 MG	
GLYTACTIN LIQ RTD 10	87	GOMEKLI TAB 1MG	38	(BASE EQUIV)	46
GLYTACTIN LIQ RTD 15	87	GOODSENSE TAB 81MG EC	174	GUANFACINE HCL TAB ER 24HR 3 MG	
GLYTACTIN PAK BTMK/DLT	87	GOOD START 2 CON W/IRON	150	(BASE EQUIV)	46
GLYTACTIN PAK SWIRL 15	87	GOOD START 2 LIQ W/IRON	150	GUANFACINE HCL TAB ER 24HR 4 MG	
GLYTACTIN PAK SWIRL 15	87	GOOD START 2 POW SOY/IRON	151	(BASE EQUIV)	46
GLYTACTIN POW APPLE	87	GOOD START CON SOY/IRON	150	GUANFACINE TAB 1MG	10
GLYTACTIN POW BD 20/20	87	GOOD START CON W/IRON	150	GUANFACINE TAB 1MG ER	46
GLYTACTIN POW BETMLK15	87	GOOD START LIQ SOY/IRON	150	GUANFACINE TAB 2MG	10
GLYTACTIN POW BETMLK15	87	GOOD START LIQ W/IRON	150	GUANFACINE TAB 2MG ER	46
GLYTACTIN POW BETRMLK	215	GOOD START POW NATURAL	150	GUANFACINE TAB 3MG ER	46
GLYTACTIN POW BLD 10PE	87	GOOD START POW SOY/IRON	150	GUANFACINE TAB 4MG ER	46
GLYTACTIN POW BLD PKU	87	GOOD START POW SOY PLS2	150	GUARDIAN 4 MIS SENSOR	77
GLYTACTIN POW PUNCH	87	GOOD START POW W/IRON	150	GUARDIAN 4 MIS TRANSMIT	151
GLYTACTIN POW RESTOR 5	87	GORDOFILM SOL	73	GUARDIAN CON MIS TRANSMIT	151
GLYTACTIN POW RST LT10	87	G-PREPROTEIN LIQ	150	GUARDIAN MIS LINK 3	151
GLYTACTIN POW TROPICAL	87	GRANISETRON HCL TAB 1 MG	94	GUARDIAN MIS SENSOR 3	77
GLYXAMBI TAB 10-5 MG	30	GRANISETRON TAB 1MG	94	GUARDIAN RT MIS CHARGER	151
GLYXAMBI TAB 25-5 MG	30	GRANIX INJ 300/1ML	53	GUARDIAN RT MIS TST PLUG	151
GNP ASPIRIN CHW 81MG	174	GRANIX INJ 480/1.6	53	GUSELKUMAB SOLN AUTO-INJECTOR	
GNP ASPIRIN TAB 81MG	174	*GRASS MIXED POLLEN EXT SL TAB 100		100 MG/ML	72
GNP ASPIRIN TAB 81MG EC	174	IR (INDEX OF REACTIVITY)*	194	GUSELKUMAB SOLN AUTO-INJECTOR	
GNP CLEARLAX POW	138	*GRASS MIXED POLLEN EXT SL TAB 300		200 MG/2ML	72
GNP ELECTROL SOL UNFLAVOR	87	IR (INDEX OF REACTIVITY)*	194	GUSELKUMAB SOLN PEN-INJECTOR 100	
GNP GNTL LAX TAB 5MG EC	139	*GRASS MIXED POLLEN EXT SL TAB 300		MG/ML	72
GNP LAXATIVE TAB 5MG EC	139	IR (INDEX OF REACTIVITY)*	194	GUSELKUMAB SOLN PREFILLED	
GNP MAG CITR SOL CHERRY	139	GRASSTEK SUB 2800BAU	194	SYRINGE 100 MG/ML	72
GNP NALOXONE SPR 4MG	185	GRISEOFULVIN MICROSIZ SUSP 125		GUSELKUMAB SOLN PREFILLED	
GNP NICOTINE DIS 7MG/24HR	200	MG/5ML	33	SYRINGE 200 MG/2ML	72
GNP NICOTINE DIS 14MG/24H	200	GRISEOFULVIN MICROSIZ TAB 500 MG	33	GVOKE HYPO 1 INJ 0.5/1ML	115
GNP NICOTINE DIS 21MG/24H	200	GRISEOFULVIN SUS 125/5ML	33	GVOKE HYPO 1 INJ 1/0.2ML	115
		GRISEOFULVIN TAB MICR 500	33	GVOKE HYPO 2 INJ 0.5/1ML	115

GVOKE HYPO 2 INJ 1/0.2ML	115	*HC LOT 2% & SAL ACID-SULFUR		HEPARIN SODIUM (PORCINE) INJ SOLN	
GVOKE KIT SOL 1/0.2ML	115	SHAMPOO 2-2% & SHAMPOO KIT***	73	PREF SYR 5000 UNIT/0.5ML	26
GVOKE PFS INJ 0.5/1ML	115	HC PRAMOXINE CRE 1-1%	113	HEPARIN SODIUM (PORCINE) LOCK	
GVOKE PFS INJ 1/0.2ML	115	HC PRAMOXINE CRE 2.5-1%	70	FLUSH IV SOLN 10 UNIT/ML	151
GYNAZOLE-1 CRE 2%	34	HC PRAMOXINE CRE 2.5-1%	113	HEPARIN SODIUM (PORCINE) LOCK	
GYNOL II GEL 3%	111	HCU COOLER LIQ	87	FLUSH IV SOLN 100 UNIT/ML	151
HABITROL DIS 21MG/24H	200	HCU GEL PAK	87	HEPARIN SODIUM (PORCINE) LOCK	
HAEGARDA INJ 2000UNIT	12	HC VALERATE CRE 0.2%	124	FLUSH PF IV SOLN 10 UNIT/ML	151
HAEGARDA INJ 3000UNIT	12	HC VALERATE OIN 0.2%	124	HEPARIN SODIUM (PORCINE) LOCK	
HAEMOPHILUS B POLYSACCHARIDE		HCY 1 POW	215	FLUSH PF IV SOLN 100 UNIT/ML	151
CONJUGATE VACCINE FOR INJ	209	HCY 2 POW	215	HEPARIN SODIUM (PORCINE) PF INJ	
HAEMOPHILUS B POLYSACCHARIDE		HEATHER TAB 0.35MG	188	1000 UNIT/ML	26
CONJUGATE VAC FOR INJ 10 MCG	210	HEMATINIC/FA TAB	87	HEPARIN SODIUM (PORCINE) PF INJ	
HAEMOPHILUS B POLYSACCHARIDE		HEMLIBRA INJ 30MG/ML	117	1000 UNIT/ML	26
CONJ VAC IM SUSP 7.5 MCG/0.5 ML	211	HEMLIBRA INJ 60/0.4	117	HEPARIN SODIUM (PORCINE) PF INJ	
HAILEY 24 TAB FE	99	HEMLIBRA INJ 105/0.7	117	5000 UNIT/0.5ML	26
HAILEY FE TAB 1.5/30	99	HEMLIBRA INJ 150/ML	117	HEPARIN SODIUM (PORCINE) PF INJ	
HAILEY FE TAB 1/20	99	HEMLIBRA INJ 300/2ML	117	5000 UNIT/ML	26
HAILEY TAB 1.5/30	99	HEMMOREX-HC SUP 25MG	113	HEPATITIS A VACCINE INJ SUSP 25	
HALCINONIDE OINT 0.1%	123	HEMOFIL M INJ 250UNIT	117	UNIT/0.5ML	212
HALCION TAB 0.25MG	48	HEMOFIL M INJ 500UNIT	118	HEPATITIS A VACCINE INJ SUSP 50	
HALOBETASOL CRE 0.05%	123	HEMOFIL M INJ 1000UNIT	117	UNIT/ML	212
HALOBETASOL OIN 0.05%	123	HEMOFIL M INJ 1700UNIT	117	HEPATITIS A VACCINE SUSP PREFILLED	
HALOBETASOL PROPIONATE CREAM		HEP A-HEP B VACCINE SUSP PREF SYR		SYR 25 UNIT/0.5ML	212
0.05%	123	720-20 ELU-MCG/ML	212	HEPATITIS A VACCINE SUSP PREFILLED	
HALOBETASOL PROPIONATE OINT 0.05%	123	HEPARIN LOCK INJ 10UNT/ML	151	SYR 50 UNIT/ML	212
HALOETTE MIS	99	HEPARIN LOCK INJ 10UNT/ML	151	HEPATITIS A VACCINE SUSP PREFILLED	
HALOG OIN 0.1%	123	HEPARIN LOCK INJ 100/ML	151	SYR 720 EL UNIT/0.5ML	210
HALOPERIDOL CON 2MG/ML	6	HEPARIN LOCK INJ 100/ML	151	HEPATITIS A VACCINE SUSP PREFILLED	
HALOPERIDOL LACTATE ORAL CONC 2		HEPARIN SOD INJ 1000/ML	26	SYR 1440 EL UNIT/ML	210
MG/ML	6	HEPARIN SOD INJ 1000/ML	26	HEPATITIS B VACCINE 3-ANTIGEN	
HALOPERIDOL TAB 0.5 MG	6	HEPARIN SOD INJ 2000/2ML	26	(RECOMBINANT) SUSP 10 MCG/ML	211
HALOPERIDOL TAB 0.5MG	6	HEPARIN SOD INJ 5000/0.5	26	HEPATITIS B VACCINE RECOMB	
HALOPERIDOL TAB 1 MG	6	HEPARIN SOD INJ 5000/0.5	26	ADJUVANTED PREF SYR 20 MCG/0.5ML	210
HALOPERIDOL TAB 1MG	6	HEPARIN SOD INJ 5000/ML	26	HEPATITIS B VACCINE (RECOMBINANT)	
HALOPERIDOL TAB 2 MG	6	HEPARIN SOD INJ 5000/ML	26	SUSP 5 MCG/0.5ML	211
HALOPERIDOL TAB 2MG	6	HEPARIN SOD INJ 10000/10	26	HEPATITIS B VACCINE (RECOMBINANT)	
HALOPERIDOL TAB 5 MG	6	HEPARIN SOD INJ 10000/ML	26	SUSP 10 MCG/ML	211
HALOPERIDOL TAB 5MG	6	HEPARIN SOD INJ 20000/ML	26	HEPATITIS B VACCINE (RECOMBINANT)	
HALOPERIDOL TAB 10 MG	6	HEPARIN SOD INJ 30000/30	26	SUSP 20 MCG/ML	210
HALOPERIDOL TAB 10MG	6	HEPARIN SOD INJ 50000/10	26	HEPATITIS B VACCINE (RECOMBINANT)	
HALOPERIDOL TAB 20 MG	6	HEPARIN SODIUM (PORCINE) INJ 1000	26	SUSP 40 MCG/ML	211
HALOPERIDOL TAB 20MG	6	UNIT/ML	26	HEPATITIS B VACCINE (RECOMBINANT)	
HALUCORT GEL	70	HEPARIN SODIUM (PORCINE) INJ 1000	26	SUSP PREF SYR 5 MCG/0.5ML	211
HARVONI PAK	15	UNIT/ML	26	HEPATITIS B VACCINE (RECOMBINANT)	
HARVONI PAK 45-200MG	15	HEPARIN SODIUM (PORCINE) INJ 1000	26	SUSP PREF SYR 10 MCG/0.5ML	210
HARVONI TAB 45-200MG	15	UNIT/ML	26	HEPATITIS B VACCINE (RECOMBINANT)	
HARVONI TAB 90-400MG	15	HEPARIN SODIUM (PORCINE) INJ 5000	26	SUSP PREF SYR 10 MCG/ML	211
HAVRIX INJ 720UNIT	210	UNIT/ML	26	HEPATITIS B VACCINE (RECOMBINANT)	
HAVRIX INJ 1440UNIT	210	HEPARIN SODIUM (PORCINE) INJ 5000	26	SUSP PREF SYR 20 MCG/ML	210
HC/ACET ACID SOL 1-2%OTIC	186	UNIT/ML	26	HEPLISAV-B INJ 20/0.5ML	210
HC BUTYRATE CRE 0.1%	124	HEPARIN SODIUM (PORCINE) INJ 10000	26	HEPZATO/50MM INJ 50MG	9
HC BUTYRATE OIN 0.1%	124	UNIT/ML	26	HEPZATO/62MM INJ 50MG	9
HC BUTYRATE SOL 0.1%	124	HEPARIN SODIUM (PORCINE) INJ 20000	26	HERNEXEOS TAB 60MG	151
HC/IDOQUIN CRE 1-1%	34	UNIT/ML	26	HER STYLE TAB 1.5MG	188

HIBERIX SOL 10MCG	210	HYDROCHLOROTHIAZIDE TAB 50 MG	81	HYDROCODONE BITARTRATE TAB ER	
HIPREX TAB 1GM	23	HYDROCHLOROT TAB 12.5MG	81	24HR DETER 100 MG	180
HM CLEARLAX POW	138	HYDROCHLOROT TAB 25MG	81	HYDROCODONE BITARTRATE TAB ER	
HM NICOTINE GUM 2MG	200	HYDROCHLOROT TAB 50MG	81	24HR DETER 120 MG	180
HM NICOTINE GUM 4MG FRT	200	HYDROC/HOMAT TAB 5-1.5MG	194	HYDROCODONE CAP 10MG ER	180
HM NICOTINE LOZ 2MG MINT	200	HYDROCO/APAP SOL 7.5-325	183	HYDROCODONE CAP 15MG ER	180
HOLDING CHAM MIS ADULT	151	HYDROCO/APAP TAB 2.5-325	183	HYDROCODONE CAP 20MG ER	180
HOLDING CHAM MIS CHILD	151	HYDROCO/APAP TAB 5-325MG	183	HYDROCODONE CAP 30MG ER	180
HOMACTIN AA POW PLUS	87	HYDROCO/APAP TAB 7.5-325	183	HYDROCODONE CAP 40MG ER	180
HORMONE BASE CRE NIOSOMES	151	HYDROCO/APAP TAB 10-325MG	183	HYDROCODONE CAP 50MG ER	180
*HORMONE CREAM BASE NIOSOMES**	151	HYDROCOD/HOM SYP 5-1.5/5	194	HYDROCODONE-IBUPROFEN TAB 5-200	
*HORMONE CREAM BASE NIOSOMES**	151	HYDROCOD/IBU TAB 5-200MG	183	MG	183
HORMONE HEAV CRE NIOSOMES	151	HYDROCOD/IBU TAB 7.5-200	183	HYDROCODONE-IBUPROFEN TAB 7.5-	
HUMALOG INJ 100/ML	136	HYDROCOD/IBU TAB 10-200MG	183	200 MG	183
HUMALOG JR INJ 100/ML	136	HYDROCODONE-ACETAMINOPHEN		HYDROCODONE-IBUPROFEN TAB 10-200	
HUMALOG KWIK INJ 100/ML	136	SOLN 7.5-325 MG/15ML	183	MG	183
HUMALOG KWIK INJ 200/ML	136	HYDROCODONE-ACETAMINOPHEN		HYDROCODONE TAB 20MG ER	180
HUMALOG MIX INJ 50/50	136	SOLN 10-300 MG/15ML	183	HYDROCODONE TAB 30MG ER	181
HUMALOG MIX INJ 50/50KWP	136	HYDROCODONE-ACETAMINOPHEN		HYDROCODONE TAB 40MG ER	181
HUMALOG MIX INJ 75/25KWP	136	SOLN 10-325 MG/15ML	183	HYDROCODONE TAB 60MG ER	181
HUMALOG MIX SUS 75/25	136	HYDROCODONE-ACETAMINOPHEN TAB		HYDROCODONE TAB 80MG ER	181
HUMAN PAPILLOMAVIRUS (HPV)		2.5-325 MG	183	HYDROCODONE TAB 100MG ER	180
9-VALENT RECOMB VAC IM SUSP	210	HYDROCODONE-ACETAMINOPHEN TAB		HYDROCODONE TAB 120MG ER	180
HUMAN PAPILLOMAVIRUS (HPV)		5-325 MG	183	HYDROCOD POLST-CHLORPHEN POLST	
9-VALENT RECOMB VAC SUSP PREF SYR	210	HYDROCODONE-ACETAMINOPHEN TAB		ER SUSP 10-8 MG/5ML	194
HUMATE-P SOL 250-600	118	7.5-325 MG	183	HYDROCORT AC SUP 25MG	113
HUMATE-P SOL 500-1200	118	HYDROCODONE-ACETAMINOPHEN TAB		HYDROCORT AC SUP 30MG	113
HUMATE-P SOL 2400UNIT	118	10-325 MG	183	HYDROCORT CRE 2.5%	124
HUMATIN CAP 250MG	11	HYDROCODONE BITART-HOMATROPINE		HYDROCORT ENE 100MG	113
HUMULIN INJ 70/30	136	METHYLBROMIDE TAB 5-1.5 MG	194	HYDROCORTISO CRE 2.5%	113
HUMULIN INJ 70/30KWP	136	HYDROCODONE BITART-HOMATROPINE		HYDROCORTISO LOT 2%	124
HUMULIN N INJ U-100	136	METHYLBROM SOLN 5-1.5 MG/5ML	194	HYDROCORTISONE ACETATE LOTION 2%	124
HUMULIN N INJ U-100KWP	136	HYDROCODONE BITART-HOMATROPINE		HYDROCORTISONE ACETATE PERIANAL	
HUMULIN R INJ U-100	136	METHYLBROM SOLN 5-1.5 MG/5ML	194	FOAM 10% (90 MG/DOSE)	113
HUMULIN R INJ U-100	136	HYDROCODONE BITARTRATE CAP ER		HYDROCORTISONE ACETATE SUPPOS 25	
HUMULIN R INJ U-500	136	12HR 10 MG	180	MG	113
HUMULIN R INJ U-500	136	HYDROCODONE BITARTRATE CAP ER		HYDROCORTISONE ACETATE SUPPOS 25	
HYCAMTIN CAP 0.25MG	94	12HR 15 MG	180	MG	113
HYCAMTIN CAP 1MG	94	HYDROCODONE BITARTRATE CAP ER		HYDROCORTISONE ACETATE SUPPOS 25	
HYD POL/CPM SUS 10-8/5ML	194	12HR 20 MG	180	MG	113
HYDRALAZINE HCL TAB 10 MG	212	HYDROCODONE BITARTRATE CAP ER		HYDROCORTISONE ACETATE SUPPOS 30	
HYDRALAZINE HCL TAB 25 MG	212	12HR 30 MG	180	MG	113
HYDRALAZINE HCL TAB 50 MG	212	HYDROCODONE BITARTRATE CAP ER		HYDROCORTISONE ACETATE W/	
HYDRALAZINE HCL TAB 100 MG	212	12HR 40 MG	180	PRAMOXINE PERIANAL CREAM 1-1%	113
HYDRALAZINE TAB 10MG	212	HYDROCODONE BITARTRATE CAP ER		HYDROCORTISONE ACETATE W/	
HYDRALAZINE TAB 25MG	212	12HR 50 MG	180	PRAMOXINE PERIANAL CREAM 1-1%	113
HYDRALAZINE TAB 50MG	212	HYDROCODONE BITARTRATE TAB ER		HYDROCORTISONE ACETATE W/	
HYDRALAZINE TAB 100MG	212	24HR DETER 20 MG	180	PRAMOXINE PERIANAL CREAM 1-1%	113
HYDRO 40 AER FOAM	73	HYDROCODONE BITARTRATE TAB ER		HYDROCORTISONE ACETATE W/	
HYDRO/ACETA SOL 10-325MG	183	24HR DETER 30 MG	181	PRAMOXINE PERIANAL CREAM 2.5-1%	68
HYDRO/APAP SOL	183	HYDROCODONE BITARTRATE TAB ER		HYDROCORTISONE ACETATE W/	
HYDROCHLOROT CAP 12.5MG	81	24HR DETER 40 MG	181	PRAMOXINE PERIANAL CREAM 2.5-1%	68
HYDROCHLOROTHIAZIDE CAP 12.5 MG	81	HYDROCODONE BITARTRATE TAB ER		HYDROCORTISONE ACETATE W/	
HYDROCHLOROTHIAZIDE TAB 12.5 MG	81	24HR DETER 60 MG	181	PRAMOXINE PERIANAL CREAM 2.5-1%	70
HYDROCHLOROTHIAZIDE TAB 25 MG	81	HYDROCODONE BITARTRATE TAB ER		HYDROCORTISONE ACETATE W/	
		24HR DETER 80 MG	181	PRAMOXINE PERIANAL FOAM 1-1%	113

HYDROCORTISONE ACETATE W/ PRAMOXINE PERIANAL LOTN 2.5-1%	113	HYDROMORPHONE HCL TAB ER 24HR 12 MG	181	HYOSCYAMINE ELX 0.125/5.	41
HYDROCORTISONE ACETATE W/ PRAMOXINE PERIANAL LOTN 2.5-1%	113	HYDROMORPHONE HCL TAB ER 24HR 16 MG	181	HYOSCYAMINE SUB 0.125MG	41
HYDROCORTISONE BUTYRATE CREAM 0.1%	124	HYDROMORPHONE HCL TAB ER 24HR 32 MG	181	HYOSCYAMINE SULFATE ELIXIR 0.125 MG/5ML	41
HYDROCORTISONE BUTYRATE OINT 0.1%	124	HYDROMORPHON LIQ 1MG/ML	183	HYOSCYAMINE SULFATE ELIXIR 0.125 MG/5ML	41
HYDROCORTISONE BUTYRATE SOLN 0.1%	124	HYDROMORPHON SUP 3MG	183	HYOSCYAMINE SULFATE SL TAB 0.125 MG ..	41
HYDROCORTISONE CREAM 2.5%	124	HYDROMORPHON TAB 2MG	183	HYOSCYAMINE SULFATE SL TAB 0.125 MG ..	41
HYDROCORTISONE ENEMA 100 MG/60ML	113	HYDROMORPHON TAB 4MG	183	HYOSCYAMINE SULFATE SL TAB 0.125 MG ..	42
HYDROCORTISONE ENEMA 100 MG/60ML	113	HYDROMORPHON TAB 8MG	183	HYOSCYAMINE SULFATE SOLN 0.125 MG/ML	41
HYDROCORTISONE LOTION 2%	121	HYDROMORPHON TAB 8MG ER	181	HYOSCYAMINE SULFATE SOLN 0.125 MG/ML	41
HYDROCORTISONE LOTION 2%	124	HYDROMORPHON TAB 12MG ER	181	HYOSCYAMINE SULFATE TAB 0.125 MG	41
HYDROCORTISONE LOTION 2.5%	124	HYDROMORPHON TAB 16MG ER	181	HYOSCYAMINE SULFATE TAB 0.125 MG	41
HYDROCORTISONE OINT 1%	124	HYDROMORPHON TAB 32MG ER	181	HYOSCYAMINE SULFATE TAB 0.125 MG	42
HYDROCORTISONE OINT 2.5%	124	HYDROXYCHLOROQUINE SULFATE TAB 100 MG	40	HYOSCYAMINE SULFATE TAB DISINT 0.125 MG	41
HYDROCORTISONE PERIANAL CREAM 2.5%	113	HYDROXYCHLOROQUINE SULFATE TAB 200 MG	40	HYOSCYAMINE SULFATE TAB DISINT 0.125 MG	41
HYDROCORTISONE PERIANAL CREAM 2.5%	113	HYDROXYCHLOROQUINE SULFATE TAB 300 MG	40	HYOSCYAMINE SULFATE TAB DISINT 0.125 MG	42
HYDROCORTISONE PERIANAL CREAM 2.5%	113	HYDROXYCHLOROQUINE SULFATE TAB 400 MG	40	HYOSCYAMINE SULFATE TAB ER 12HR 0.375 MG	41
HYDROCORTISONE PERIANAL CREAM 2.5%	113	HYDROXYCHLOR TAB 100MG	40	HYOSCYAMINE SULFATE TAB ER 12HR 0.375 MG	41
HYDROCORTISONE PERIANAL CREAM 2.5%	113	HYDROXYCHLOR TAB 200MG	40	HYOSCYAMINE SULFATE TAB ER 12HR 0.375 MG	41
HYDROCORTISONE PERIANAL CREAM 2.5%	113	HYDROXYCHLOR TAB 300MG	40	HYOSCYAMINE TAB 0.125MG	41
HYDROCORTISONE-PRAMOXINE- CHLOROXYLENOL LOT 10-10-1MG/ML	69	HYDROXYCHLOR TAB 400MG	40	HYOSCYAMINE TAB 0.125MG	41
HYDROCORTISONE PROBUTATE CREAM 0.1%	124	HYDROXYUREA (BULK) POWDER	151	HYOSCYAMINE TAB 0.375 ER	41
HYDROCORTISONE SOLN 2.5%	125	HYDROXYUREA CAP 200 MG	37	HYOSCYAMINE TAB 0.375 SR	41
HYDROCORTISONE TAB 5 MG	122	HYDROXYUREA CAP 300 MG	37	HYOSYNE DRO 0.125/ML	41
HYDROCORTISONE TAB 5 MG	124	HYDROXYUREA CAP 400 MG	37	HYOSYNE ELX 0.125/5	41
HYDROCORTISONE TAB 10 MG	122	HYDROXYUREA CAP 500 MG	37	HYPERSAL NEB 3.5%	194
HYDROCORTISONE TAB 10 MG	124	HYDROXYUREA CAP 500MG	37	HYPERSAL NEB 7%	194
HYDROCORTISONE TAB 20 MG	122	HYDROXYUREA POW	151	HYPODERMIC NEEDLES (DISPOSABLE) ...	80
HYDROCORTISONE TAB 20 MG	124	HYDROXYZ HCL SYP 10MG/5ML	43	HYPO NEEDLE MIS 18GX1"	136
HYDROCORTISONE VALERATE CREAM 0.2%	124	HYDROXYZ HCL TAB 10MG	43	HYPO NEEDLE MIS 18GX1.5"	136
HYDROCORTISONE VALERATE OINT 0.2%	124	HYDROXYZ HCL TAB 25MG	43	HYPO NEEDLE MIS 20GX1"	151
HYDROCORTISONE W/ ACETIC ACID OTIC SOLN 1-2%	186	HYDROXYZ HCL TAB 50MG	43	HYPO NEEDLE MIS 22GX1"	151
HYDROCORT LOT 2.5%	124	HYDROXYZINE HCL SYRUP 10 MG/5ML	43	HYPO NEEDLE MIS 23GX1"	151
HYDROCORT OIN 1%	124	HYDROXYZINE HCL SYRUP 10 MG/5ML	43	HYPO NEEDLE MIS 23GX1.5"	151
HYDROCORT OIN 2.5%	124	HYDROXYZINE HCL TAB 10 MG	43	HYPO NEEDLE MIS 25GX1"	151
HYDROCORT TAB 5MG	124	HYDROXYZINE HCL TAB 25 MG	43	HYPO NEEDLE MIS 25GX1.5"	151
HYDROCORT TAB 10MG	124	HYDROXYZINE HCL TAB 50 MG	43	HYPO NEEDLE MIS 25GX5/8"	151
HYDROCORT TAB 20MG	124	HYDROXYZINE PAMOATE CAP 25 MG	32	IBANDRONATE SODIUM TAB 150 MG (BASE EQUIVALENT)	142
HYDROGEL GEL	151	HYDROXYZINE PAMOATE CAP 50 MG	32	IBANDRONATE TAB 150MG	142
HYDROMET SYP 5-1.5/5	194	HYDROXYZINE PAMOATE CAP 100 MG	32	IBRUTINIB CAP 70 MG	167
HYDROMORPHONE HCL LIQD 1 MG/ML	183	HYDROXYZINE SOL 10MG/5ML	43	IBRUTINIB CAP 140 MG	167
HYDROMORPHONE HCL SUPPOS 3 MG	183	HYDROXYZINE SYP 10MG/5ML	43	IBRUTINIB ORAL SUSP 70 MG/ML	167
HYDROMORPHONE HCL TAB 2 MG	183	HYDROXYZ PAM CAP 25MG	32	IBRUTINIB TAB 420 MG	167
HYDROMORPHONE HCL TAB 4 MG	183	HYDROXYZ PAM CAP 50MG	32	IBUPROFEN TAB 200 MG	174
HYDROMORPHONE HCL TAB 8 MG	183	HYDROXYZ PAM CAP 100MG	32	IBUPROFEN TAB 200MG	174
HYDROMORPHONE HCL TAB ER 24HR 8 MG	181	HYFTOR GEL 0.2%	68	IBUPROFEN TAB 400 MG	174
		HYMPAVZINJ 150MG/ML	118		
		HYOSCYAMINE DRO 0.125/ML	41		

IBUPROFEN TAB 400 MG.....	174	IMIPRAMINE PAMOATE CAP 125 MG	208	*INFANT FOODS LIQUID**	148
IBUPROFEN TAB 400MG	174	IMIPRAMINE PAMOATE CAP 150 MG	208	*INFANT FOODS LIQUID**	148
IBUPROFEN TAB 600 MG.....	174	IMIPRAM PAM CAP 75MG	208	*INFANT FOODS LIQUID**	148
IBUPROFEN TAB 600 MG.....	174	IMIPRAM PAM CAP 100MG.....	208	*INFANT FOODS LIQUID**	148
IBUPROFEN TAB 600MG	174	IMIPRAM PAM CAP 125MG	208	*INFANT FOODS LIQUID**	148
IBUPROFEN TAB 800 MG.....	174	IMIPRAM PAM CAP 150MG.....	208	*INFANT FOODS LIQUID**	148
IBUPROFEN TAB 800 MG.....	174	IMIQUIMOD CRE 5%	70	*INFANT FOODS LIQUID**	148
IBUPROFEN TAB 800MG	174	IMIQUIMOD CREAM 5%.....	70	*INFANT FOODS LIQUID**	148
IBU TAB 400MG	174	IMITREX SPR 5MG/ACT	196	*INFANT FOODS LIQUID**	148
IBU TAB 600MG	174	IMITREX SPR 20MG/ACT	196	*INFANT FOODS LIQUID**	149
IBU TAB 800MG	174	IMKELDI SOL 80MG/ML	167	*INFANT FOODS LIQUID**	149
ICATIBANT ACETATE SUBCUTANEOUS		IMPACT PEPT LIQ 1.5	151	*INFANT FOODS LIQUID**	149
SOLN PREF SYR 30 MG/3ML	12	IMPAVIDO CAP 50MG.....	40	*INFANT FOODS LIQUID**	150
ICATIBANT INJ 30MG/3ML	12	IMVEXXY MAIN SUP 4MCG	99	*INFANT FOODS LIQUID**	150
ICLEVIA TAB	99	IMVEXXY MAIN SUP 10MCG	99	*INFANT FOODS LIQUID**	150
ICLUSIG TAB 15MG	167	IMVEXXY STRT SUP 4MCG.....	99	*INFANT FOODS LIQUID**	150
ICLUSIG TAB 45MG	167	IMVEXXY STRT SUP 10MCG.....	99	*INFANT FOODS LIQUID**	150
IDELALISIB TAB 100 MG	170	INATAL GT TAB.....	87	*INFANT FOODS LIQUID**	154
IDELALISIB TAB 150 MG	94	INAVOLISIB TAB 3 MG	38	*INFANT FOODS LIQUID**	160
IDELVION SOL 250UNIT	118	INAVOLISIB TAB 9 MG	38	*INFANT FOODS LIQUID**	162
IDELVION SOL 500UNIT.....	118	INBRIJA CAP 42MG	151	*INFANT FOODS LIQUID**	162
IDELVION SOL 1000UNIT.....	118	INCASSIA TAB 0.35MG.....	188	*INFANT FOODS LIQUID**	162
IDELVION SOL 2000UNIT	118	INCAREX INJ 40MG/4ML.....	126	*INFANT FOODS LIQUID**	162
IDELVION SOL 3500UNIT.....	118	INDAPAMIDE TAB 1.25 MG	81	*INFANT FOODS LIQUID**	162
IDHIFA TAB 50MG.....	167	INDAPAMIDE TAB 1.25MG.....	81	*INFANT FOODS LIQUID**	162
IDHIFA TAB 100MG	167	INDAPAMIDE TAB 2.5 MG	81	*INFANT FOODS LIQUID**	162
IGG 2000 CWP CAP	151	INDAPAMIDE TAB 2.5MG.....	81	*INFANT FOODS PACKET**	148
IGG 2000 CWP POW	151	INDOCIN SUP 50MG.....	174	*INFANT FOODS POWDER**	146
IGG PURE POW.....	151	INDOMETHACIN CAP 25 MG	174	*INFANT FOODS POWDER**	146
IHEALTH LANC MIS DEVICE	80	INDOMETHACIN CAP 25MG.....	174	*INFANT FOODS POWDER**	146
IHEALTH LIQ CONTROL.....	77	INDOMETHACIN CAP 50 MG.....	174	*INFANT FOODS POWDER**	146
ILOPROST INHALATION SOLUTION 10		INDOMETHACIN CAP 50MG	174	*INFANT FOODS POWDER**	147
MCG/ML	192	INDOMETHACIN CAP 75MG ER	174	*INFANT FOODS POWDER**	148
ILOPROST INHALATION SOLUTION 20		INDOMETHACIN CAP ER 75 MG.....	174	*INFANT FOODS POWDER**	148
MCG/ML	192	INDOMETHACIN SUP 50MG	174	*INFANT FOODS POWDER**	148
IMATINIB MES TAB 100MG.....	167	INDOMETHACIN SUPPOS 50 MG.....	174	*INFANT FOODS POWDER**	148
IMATINIB MES TAB 400MG	167	INDOMETHACIN SUPPOS 50 MG.....	174	*INFANT FOODS POWDER**	148
IMATINIB MESYLATE ORAL SOLN 80 MG/		INFANRIX INJ.....	210	*INFANT FOODS POWDER**	148
ML (BASE EQUIVALENT).....	167	*INFANT FOODS CONC**	148	*INFANT FOODS POWDER**	148
IMATINIB MESYLATE TAB 100 MG (BASE		*INFANT FOODS CONC**	148	*INFANT FOODS POWDER**	148
EQUIVALENT).....	167	*INFANT FOODS CONC**	148	*INFANT FOODS POWDER**	148
IMATINIB MESYLATE TAB 400 MG (BASE		*INFANT FOODS CONC**	148	*INFANT FOODS POWDER**	148
EQUIVALENT).....	167	*INFANT FOODS CONC**	149	*INFANT FOODS POWDER**	149
IMBRUVICA CAP 70MG	167	*INFANT FOODS CONC**	150	*INFANT FOODS POWDER**	149
IMBRUVICA CAP 140MG	167	*INFANT FOODS CONC**	150	*INFANT FOODS POWDER**	149
IMBRUVICA SUS 70MG/ML	167	*INFANT FOODS CONC**	150	*INFANT FOODS POWDER**	149
IMBRUVICA TAB 420MG	167	*INFANT FOODS CONC**	150	*INFANT FOODS POWDER**	149
IMIPRAM HCL TAB 10MG.....	208	*INFANT FOODS CONC**	150	*INFANT FOODS POWDER**	149
IMIPRAM HCL TAB 25MG.....	208	*INFANT FOODS LIQUID**	148	*INFANT FOODS POWDER**	150
IMIPRAM HCL TAB 50MG	208	*INFANT FOODS LIQUID**	148	*INFANT FOODS POWDER**	150
IMIPRAMINE HCL TAB 10 MG	208	*INFANT FOODS LIQUID**	148	*INFANT FOODS POWDER**	150
IMIPRAMINE HCL TAB 25 MG	208	*INFANT FOODS LIQUID**	148	*INFANT FOODS POWDER**	150
IMIPRAMINE HCL TAB 50 MG	208	*INFANT FOODS LIQUID**	148	*INFANT FOODS POWDER**	150
IMIPRAMINE PAMOATE CAP 75 MG	208	*INFANT FOODS LIQUID**	148	*INFANT FOODS POWDER**	150
IMIPRAMINE PAMOATE CAP 100 MG.....	208	*INFANT FOODS LIQUID**	148	*INFANT FOODS POWDER**	151

*INFANT FOODS POWDER**	151	*INJECTION DEVICE - MISC***	156	*INSULIN INFUSION DISPOSABLE PUMP	
*INFANT FOODS POWDER**	158	*INJECTION DEVICE - MISC***	156	RESERVOIR KIT***	164
*INFANT FOODS POWDER**	158	INLYTA TAB 1MG	167	INSULIN LISP INJ 100/ML	136
*INFANT FOODS POWDER**	159	INLYTA TAB 5MG	167	INSULIN LISP INJ 100/ML	136
*INFANT FOODS POWDER**	160	INOTERSEN SOD SUBCUTANEOUS PREF		INSULIN LISP INJ JUNIOR	136
*INFANT FOODS POWDER**	162	SYR 284 MG/1.5ML (BASE EQ)	110	INSULIN LISP INJ PROTAMIN.	136
*INFANT FOODS POWDER**	162	INOVA 4/1 KIT ACNE CON.	73	INSULIN LISPRO-AABC INJ 100 UNIT/ML	136
*INFANT FOODS POWDER**	162	INOVA 8/2 KIT ACNE CON	73	INSULIN LISPRO-AABC SOLN PEN-INJ	
*INFANT FOODS POWDER**	162	INOVA KIT 4%	73	100 UNIT/ML (1 UNIT DIAL)	136
*INFANT FOODS POWDER**	162	INOVA KIT 8%	73	INSULIN LISPRO-AABC SOLN PEN-	
*INFANT FOODS POWDER**	162	INPEN 100EL MIS BLUE-HUM	152	INJECTOR 200 UNIT/ML	137
*INFANT FOODS POWDER**	162	INPEN 100EL MIS GREY-HUM	152	INSULIN LISPRO INJ SOLN 100 UNIT/ML	136
*INFANT FOODS POWDER**	163	INPEN 100EL MIS PINK HUM	152	INSULIN LISPRO PROTAMINE & LISPRO	
INFANT FORM POW /IRON	151	INPEN 100NN MIS BLUE NOV	152	INJ 100 UNIT/ML (50-50)	136
INFINITY SOL HIGH CON	151	INPEN 100NN MIS GREY NOV	152	INSULIN LISPRO PROT & LISPRO INJ 100	
INFINITY SOL LOW CON	151	INPEN 100NN MIS PINK NOV	152	UNIT/ML (75-25)	136
INFLUENZA VAC TYPE A&B SURFACE ANT		INPEN BLUE MIS HUMALOG	152	INSULIN LISPRO PROT & LISPRO SUS	
ADJ SUSP PREF SYR 0.5 ML	210	INPEN BLUE MIS NOVO/FIA	152	PEN-INJ 100 UNIT/ML (50-50)	136
INFLUENZA VIRUS VACCINE LIVE		INPEN GREY MIS HUMALOG	152	INSULIN LISPRO PROT & LISPRO SUS	
INTRANASAL LIQUID	210	INPEN GREY MIS NOVO/FIA	152	PEN-INJ 100 UNIT/ML (75-25)	136
INFLUENZA VIRUS VACCINE SPLIT IM		INPEN PINK MIS HUMALOG	152	INSULIN LISPRO PROT & LISPRO SUS	
SUSP	209	INPEN PINK MIS NOVO/FIA	152	PEN-INJ 100 UNIT/ML (75-25)	136
INFLUENZA VIRUS VACCINE SPLIT IM		INQOVI TAB 35-100MG	38	INSULIN LISPRO SOLN CARTRIDGE 100	
SUSP	210	INSPIREASE MIS DD SYST	152	UNIT/ML	136
INFLUENZA VIRUS VACCINE SPLIT PF		INSPIREASE MIS RES BAG	152	INSULIN LISPRO SOLN PEN-INJECTOR	
SUSP PREF SYRINGE 0.5 ML	209	INS SYR U500 MIS 0.5/31G	152	100 UNIT/ML (0.5 UNIT DIAL)	136
INFLUENZA VIRUS VACCINE SPLIT PF		INS SYR U500 MIS 31GX6MM	152	INSULIN LISPRO SOLN PEN-INJECTOR	
SUSP PREF SYRINGE 0.5 ML	210	INSULIN ASPART INJ SOLN 100 UNIT/ML	137	100 UNIT/ML (0.5 UNIT DIAL)	136
INFLUENZA VIRUS VACCINE SPLIT PF		INSULIN GLARGINE INJ 100 UNIT/ML	136	INSULIN LISPRO SOLN PEN-INJECTOR	
SUSP PREF SYRINGE 0.5 ML	210	INSULIN GLARGINE-LIXISENATIDE SOL		100 UNIT/ML (1 UNIT DIAL)	136
INFLUENZA VIRUS VAC SPLIT HIGH-		PEN-INJ 100-33 UNIT-MCG/ML	137	INSULIN LISPRO SOLN PEN-INJECTOR	
DOSE PF SUSP PREF SYR 0.5ML	210	INSULIN GLARGINE SOLN PEN-		100 UNIT/ML (1 UNIT DIAL)	136
INFLUENZA VIRUS VAC TISS-CULT		INJECTOR 100 UNIT/ML	136	INSULIN LISPRO SOLN PEN-INJECTOR	
SUBUNIT SUSP PREF SYR 0.5 ML	210	INSULIN GLARGINE SOLN PEN-		200 UNIT/ML	136
INGREZZA CAP 40-80MG	64	INJECTOR 300 UNIT/ML (1 UNIT DIAL)	137	INSULIN NPH (HUMAN) (ISOPHANE) INJ	
INGREZZA CAP 40MG	64	INSULIN GLARGINE SOLN PEN-		100 UNIT/ML	136
INGREZZA CAP 40MG	64	INJECTOR 300 UNIT/ML (2 UNIT DIAL)	137	INSULIN NPH (HUMAN) (ISOPHANE)	
INGREZZA CAP 60MG	64	*INSULIN INFUSION DISPOSABLE PUMP		SUSP PEN-INJECTOR 100 UNIT/ML	136
INGREZZA CAP 60MG	64	KIT***	156	INSULIN NPH ISOPHANE & REGULAR	
INGREZZA CAP 60MG	64	*INSULIN INFUSION DISPOSABLE PUMP		HUMAN INJ 100 UNIT/ML (70-30)	136
INGREZZA CAP 80MG	64	KIT***	156	INSULIN NPH & REGULAR SUSP PEN-INJ	
INGREZZA CAP 80MG	64	*INSULIN INFUSION DISPOSABLE PUMP		100 UNIT/ML (70-30)	136
INJECTION DEVICE FOR INSULIN	145	KIT***	156	INSULIN PEN NEEDLE 29 G X 4 MM (1/6"	
INJECTION DEVICE FOR INSULIN	152	*INSULIN INFUSION DISPOSABLE PUMP		OR 5/32")	147
INJECTION DEVICE FOR INSULIN	152	KIT***	164	INSULIN PEN NEEDLE 29 G X 5 MM (1/5"	
INJECTION DEVICE FOR INSULIN	152	*INSULIN INFUSION DISPOSABLE PUMP		OR 3/16")	147
INJECTION DEVICE FOR INSULIN	152	RESERVOIR***	156	INSULIN PEN NEEDLE 29 G X 5 MM (1/5"	
INJECTION DEVICE FOR INSULIN	152	*INSULIN INFUSION DISPOSABLE PUMP		OR 3/16")	157
INJECTION DEVICE FOR INSULIN	152	RESERVOIR***	156	INSULIN PEN NEEDLE 29 G X 8 MM (1/3"	
INJECTION DEVICE FOR INSULIN	152	*INSULIN INFUSION DISPOSABLE PUMP		OR 5/16")	157
INJECTION DEVICE FOR INSULIN	152	RESERVOIR***	156	INSULIN PEN NEEDLE 29 G X 10 MM	158
INJECTION DEVICE FOR INSULIN	152	*INSULIN INFUSION DISPOSABLE PUMP		INSULIN PEN NEEDLE 29 G X 12.7 MM	
INJECTION DEVICE FOR INSULIN	152	RESERVOIR***	156	(1/2")	144
INJECTION DEVICE FOR INSULIN	152	*INSULIN INFUSION DISPOSABLE PUMP		INSULIN PEN NEEDLE 29 G X 12.7 MM	
INJECTION DEVICE FOR INSULIN	152	RESERVOIR/INFUS SET KIT***	164	(1/2")	148
INJECTION DEVICE FOR INSULIN	156			INSULIN PEN NEEDLE 29 G X 12.7 MM	
				(1/2")	158

INSULIN SYRG MIS 30GX1/2".....	153	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 5/16".....	153	INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 5/16".....	153
INSULIN SYRG MIS 30GX5/16.....	153	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 5/16".....	153	INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 5/16".....	153
INSULIN SYRG MIS 30GX8MM.....	153	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 5/16".....	153	INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 5/16".....	153
INSULIN SYRG MIS 30GX8MM.....	153	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 5/16".....	153	INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 5/16".....	153
INSULIN SYRG MIS 30GX12MM.....	153	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 5/16".....	159	INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 5/16".....	159
INSULIN SYRG MIS 31GX5/16.....	153	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16".....	152	INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 5/16".....	153
INSULIN SYRG MIS 31GX5/16.....	153	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16".....	153	INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 5/16".....	153
INSULIN SYRG MIS 31GX8MM.....	154	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16".....	153	INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 5/16".....	153
INSULIN SYRG MIS 31GX8MM.....	154	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16".....	153	INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 5/16".....	154
INSULIN SYRINGE/NEEDLE U-100 0.3 ML 29 X 1/2".....	152	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16".....	154	INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 5/16".....	159
INSULIN SYRINGE/NEEDLE U-100 0.3 ML 30 X 1/2".....	152	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16".....	159	INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 5/16".....	163
INSULIN SYRINGE/NEEDLE U-100 0.3 ML 30 X 5/16".....	152	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16".....	162	INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 15/64".....	153
INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 1/2".....	147	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 15/64".....	152	INSULIN SYRINGE/NEEDLE U-500 0.5 ML 31G X 6MM (15/64").....	152
INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16".....	147	INSULIN SYRINGE/NEEDLE U-100 1 ML 27 X 1/2".....	153	INSULIN SYRINGE/NEEDLE U-500 0.5 ML 31G X 6MM (15/64").....	152
INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16".....	152	INSULIN SYRINGE/NEEDLE U-100 1 ML 27 X 1/2".....	155	INSUPEN32G MIS 32GX6MM.....	77
INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16".....	153	INSULIN SYRINGE/NEEDLE U-100 1 ML 27 X 5/8".....	153	INSUPEN MIS 31GX5MM.....	154
INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16".....	153	INSULIN SYRINGE/NEEDLE U-100 1 ML 28 X 1/2".....	153	INSUPEN MIS 31GX8MM.....	154
INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16".....	162	INSULIN SYRINGE/NEEDLE U-100 1 ML 28 X 1/2".....	153	INSUPEN MIS 32GX4MM.....	77
INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 15/64".....	152	INSULIN SYRINGE/NEEDLE U-100 1 ML 28 X 1/2".....	153	INTELENCE TAB 25MG.....	17
INSULIN SYRINGE/NEEDLE U-100 1/2 ML 27 X 1/2".....	153	INSULIN SYRINGE/NEEDLE U-100 1 ML 28 X 5/16".....	153	INTELENCE TAB 100MG.....	17
INSULIN SYRINGE/NEEDLE U-100 1/2 ML 27 X 1/2".....	155	INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 1/2".....	153	INTELENCE TAB 200MG.....	17
INSULIN SYRINGE/NEEDLE U-100 1/2 ML 28 X 1/2".....	152	INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 1/2".....	153	INTERFERON ALFA-N3 INJ 5000000 UNIT/ML.....	135
INSULIN SYRINGE/NEEDLE U-100 1/2 ML 28 X 1/2".....	153	INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 5/16".....	142	INTERFERON BETA-1A IM AUTO- INJECTOR KIT 30 MCG/0.5ML.....	171
INSULIN SYRINGE/NEEDLE U-100 1/2 ML 29 X 1/2".....	152	INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 1/2".....	153	INTERFERON BETA-1A IM PREFILLED SYRINGE KIT 30 MCG/0.5ML.....	171
INSULIN SYRINGE/NEEDLE U-100 1/2 ML 29 X 1/2".....	153	INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 1/2".....	153	INTERFERON BETA-1B FOR INJ KIT 0.3 MG 171	
INSULIN SYRINGE/NEEDLE U-100 1/2 ML 29 X 5/16".....	152	INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 1/2".....	153	INTERFERON GAMMA-1B INJ 100 MCG/0.5ML (2000000 UNIT/0.5ML).....	135
INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 1/2".....	152	INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 1/2".....	153	INTROVALE TAB.....	99
INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 5/16".....	152	INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 1/2".....	153	INVELTYS SUS 1%.....	177
INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 1/2".....	152	INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 1/2".....	153	IODINE SOL STRONG.....	154
INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 5/16".....	152	INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 1/2".....	153	IODINE SOL STRONG.....	154
		INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 1/2".....	153	*IODINE SOLUTION**.....	23
				IODINE SOLUTION STRONG 5% (LUGOL'S) (BULK).....	154
				IODINE SOLUTION STRONG (LUGOL'S) (BULK).....	155
				IODINE TIN 2%.....	23
				*IODINE TINCTURE**.....	23
				IDOQUINOL-HC CREAM 1-1%.....	34
				IOPIDINE SOL 1% OP.....	179

IPOL INJ INACTIVE.....	210	ISOSORB DIN TAB 5MG	212	ITRACONAZOLE CAP 100 MG	35
IPRATROPIUM-ALBUTEROL INHAL		ISOSORB DIN TAB 10MG	212	ITRACONAZOLE CAP 100MG	34
AEROSOL SOLN 20-100 MCG/ACT	193	ISOSORB DIN TAB 20MG	212	ITRACONAZOLE ORAL SOLN 10 MG/ML	34
IPRATROPIUM-ALBUTEROL NEBU SOLN		ISOSORB DIN TAB 30MG	212	ITRACONAZOLE ORAL SOLN 10 MG/ML	35
0.5-2.5(3) MG/3ML	194	ISOSORBIDE DINITRATE-HYDRALAZINE		ITRACONAZOLE SOL 10MG/ML.....	34
IPRATROPIUM BROMIDE HFA INHAL		HCL TAB 20-37.5 MG	62	IVABRADINE HCL ORAL SOLN 5 MG/5ML	
AEROSOL 17 MCG/ACT.....	54	ISOSORBIDE DINITRATE TAB 5 MG	212	(BASE EQUIV).....	61
IPRATROPIUM BROMIDE INHAL SOLN		ISOSORBIDE DINITRATE TAB 10 MG	212	IVABRADINE HCL TAB 5 MG (BASE EQUIV) .	61
0.02%	54	ISOSORBIDE DINITRATE TAB 20 MG	212	IVABRADINE HCL TAB 5 MG (BASE EQUIV) .	62
IPRATROPIUM BROMIDE NASAL SOLN		ISOSORBIDE DINITRATE TAB 30 MG	212	IVABRADINE HCL TAB 7.5 MG (BASE EQUIV) 61	
0.03% (21 MCG/SPRAY)	54	ISOSORBIDE MONONITRATE TAB 10 MG ..	212	IVABRADINE HCL TAB 7.5 MG (BASE EQUIV) 62	
IPRATROPIUM BROMIDE NASAL SOLN		ISOSORBIDE MONONITRATE TAB 20 MG ..	212	IVABRADINE TAB 5MG	62
0.06% (42 MCG/SPRAY).....	54	ISOSORBIDE MONONITRATE TAB ER		IVABRADINE TAB 7.5MG	62
IPRATROPIUM SOL 0.02%INH.....	54	24HR 30 MG.....	212	IVACAFITOR PACKET 5.8 MG	65
IPRATROPIUM/ SOL ALBUTER	194	ISOSORBIDE MONONITRATE TAB ER		IVACAFITOR PACKET 13.4 MG	65
IPRATROPIUM SPR 0.03%	54	24HR 60 MG.....	212	IVACAFITOR PACKET 25 MG	65
IPRATROPIUM SPR 0.06%.....	54	ISOSORBIDE MONONITRATE TAB ER		IVACAFITOR PACKET 50 MG	65
IPTACOPAN HCL CAP 200 MG.....	12	24HR 120 MG	212	IVACAFITOR PACKET 75 MG	66
IQIRVO TAB 80MG	108	ISOSORB MONO TAB 10MG	212	IVACAFITOR TAB 150 MG	194
IRBESAR/HCTZ TAB 150-12.5	61	ISOSORB MONO TAB 20MG	212	IVERMECTIN CREAM 1%	71
IRBESAR/HCTZ TAB 300-12.5	62	ISOSORB MONO TAB 30MG ER.....	212	IVERMECTIN TAB 3 MG	14
IRBESARTAN-HYDROCHLOROTHIAZIDE		ISOSORB MONO TAB 60MG ER.....	212	IVERMECTIN TAB 3 MG	14
TAB 150-12.5 MG	61	ISOSORB MONO TAB 120MG ER.....	212	IVERMECTIN TAB 3MG	14
IRBESARTAN-HYDROCHLOROTHIAZIDE		ISOTRETINOIN CAP 10 MG	68	IVERMECTIN TAB 6 MG	14
TAB 300-12.5 MG	62	ISOTRETINOIN CAP 10 MG	68	IVERMECTIN TAB 6MG.....	14
IRBESARTAN TAB 75 MG	13	ISOTRETINOIN CAP 10 MG	69	IVOSIDENIB TAB 250 MG	169
IRBESARTAN TAB 75MG.....	13	ISOTRETINOIN CAP 10 MG	70	IWILFIN TAB 192MG	38
IRBESARTAN TAB 150 MG	13	ISOTRETINOIN CAP 10 MG	73	IXAZOMIB CITRATE CAP 2.3 MG (BASE	
IRBESARTAN TAB 150MG.....	13	ISOTRETINOIN CAP 10MG	70	EQUIVALENT).....	38
IRBESARTAN TAB 300 MG.....	13	ISOTRETINOIN CAP 20 MG	68	IXAZOMIB CITRATE CAP 3 MG (BASE	
IRBESARTAN TAB 300MG	13	ISOTRETINOIN CAP 20 MG	68	EQUIVALENT).....	39
IRESSA TAB 250MG	167	ISOTRETINOIN CAP 20 MG	69	IXAZOMIB CITRATE CAP 4 MG (BASE	
ISAVUCONAZONIUM SULFATE CAP 74.5 MG 33		ISOTRETINOIN CAP 20 MG	70	EQUIVALENT).....	39
ISAVUCONAZONIUM SULFATE CAP 186 MG 33		ISOTRETINOIN CAP 20 MG	73	JAIMIESS TAB	99
ISENTRESS CHW 25MG	16	ISOTRETINOIN CAP 20MG.....	70	JAKAFI TAB 5MG.....	168
ISENTRESS CHW 100MG	16	ISOTRETINOIN CAP 30 MG	68	JAKAFI TAB 10MG.....	167
ISENTRESS HD TAB 600MG	16	ISOTRETINOIN CAP 30 MG	68	JAKAFI TAB 15MG.....	167
ISENTRESS POW 100MG	16	ISOTRETINOIN CAP 30 MG	69	JAKAFI TAB 20MG	167
ISENTRESS TAB 400MG.....	16	ISOTRETINOIN CAP 30 MG	70	JAKAFI TAB 25MG	167
ISIBLOOM TAB.....	99	ISOTRETINOIN CAP 30 MG	73	JANTOVEN TAB 1MG	26
ISOCARBOXAZID TAB 10 MG.....	170	ISOTRETINOIN CAP 30MG.....	70	JANTOVEN TAB 2.5MG	26
ISOFLURANE INHAL SOLN.....	149	ISOTRETINOIN CAP 40 MG	68	JANTOVEN TAB 2MG	26
ISOFLURANE INHAL SOLN.....	154	ISOTRETINOIN CAP 40 MG	68	JANTOVEN TAB 3MG	26
ISOFLURANE INHAL SOLN.....	163	ISOTRETINOIN CAP 40 MG	69	JANTOVEN TAB 4MG	26
ISOFLURANE SOL.....	154	ISOTRETINOIN CAP 40 MG	70	JANTOVEN TAB 5MG	26
ISOLEUCINE ORAL POWDER PACKET 1 GM .	87	ISOTRETINOIN CAP 40 MG	73	JANTOVEN TAB 6MG	26
ISOLEUCINE ORAL POWDER PACKET 50 MG	87	ISOTRETINOIN CAP 40MG.....	70	JANTOVEN TAB 7.5MG	26
ISOLEUCINE PAK 50MG	87	ISRADIPINE CAP 2.5 MG	57	JANTOVEN TAB 10MG	26
ISOLEUCINE POW 1000.....	87	ISRADIPINE CAP 2.5MG.....	57	JARDIANCE TAB 10MG.....	30
ISONIAZID SYP 50MG/5ML.....	42	ISRADIPINE CAP 5 MG.....	57	JARDIANCE TAB 25MG.....	30
ISONIAZID SYRUP 50 MG/5ML	42	ISRADIPINE CAP 5MG	57	JAYPIRCA TAB 50MG.....	37
ISONIAZID TAB 100 MG.....	42	ISTALOL SOL 0.5% OP	179	JAYPIRCA TAB 100MG	37
ISONIAZID TAB 100MG	42	ITOVEBI TAB 3MG.....	38	JENCYCLA TAB 0.35MG.....	189
ISONIAZID TAB 300 MG	42	ITOVEBI TAB 9MG.....	38	JENTADUETO TAB 2.5-500	30
ISONIAZID TAB 300MG.....	42	ITRACONAZOLE CAP 100 MG	34	JENTADUETO TAB 2.5-850	30
ISOSO/HYDRAL TAB 20-37.5.....	62				

JENTADUETO TAB 2.5-1000	30	KATE FARMS LIQ 1.4	88	KLOR-CON 10 TAB 10MEQ ER	88
JENTADUETO TAB XR	30	KATE FARMS LIQ 1.5	88	KLOR-CON/EF TAB 25MEQ	88
JENTADUETO TAB XR	30	KATE FARMS LIQ 1.5	154	KLOR-CON M10 TAB 10MEQ ER	88
JESDUVROQ TAB 1MG	53	KATE FARMS LIQ CHOCOLAT	88	KLOR-CON M15 TAB 15MEQ ER	88
JESDUVROQ TAB 2MG	53	KATE FARMS LIQ STRAWBER	88	KLOR-CON M20 TAB 20MEQ ER	88
JESDUVROQ TAB 4MG	53	KATE FARMS LIQ VANILLA	88	KLOR-CON PAK 20MEQ	88
JESDUVROQ TAB 6MG	53	K CITRATE SOL CITR ACD	87	KLOXXADO SPR 8MG	185
JESDUVROQ TAB 8MG	53	KELNOR 1/50 TAB	100	KLS ASPIRIN TAB 81MG EC	174
JINTELI TAB 1MG-5MCG	99	KELNOR TAB 1/35	100	KLS QUIT2 GUM 2MG	200
JIVI INJ 500 UNIT	118	KESIMPTA INJ 20/4ML	171	KLS QUIT2 LOZ 2MG	200
JIVI INJ 1000UNIT	118	KETOCONAZOLE AER 2%	34	KLS QUIT4 GUM 4MG	200
JIVI INJ 2000UNIT	118	KETOCONAZOLE CRE 2%	34	KLS QUIT4 LOZ 4MG	200
JIVI INJ 3000UNIT	118	KETOCONAZOLE CREAM 2%	34	KOATE-DVI INJ 1000UNIT	118
JIVI INJ 4000UNIT	118	KETOCONAZOLE FOAM 2%	34	KOATE INJ 250UNIT	118
JOENJA TAB 70MG	134	KETOCONAZOLE FOAM 2%	34	KOATE INJ 500 UNIT	118
JOLESSA TAB	100	KETOCONAZOLE GEL 2% &		KOATE INJ 1000UNIT	118
JORNAY PM CAP 20MG ER	46	HYDROCORTISONE GEL 1% KIT	35	KOGENATE FS INJ 250UNIT	118
JORNAY PM CAP 40MG ER	46	KETOCONAZOLE SHA 2%	34	KOGENATE FS INJ 500UNIT	118
JORNAY PM CAP 60MG ER	46	KETOCONAZOLE SHAMPOO 2%	34	KOGENATE FS INJ 1000UNIT	118
JORNAY PM CAP 80MG ER	46	KETOCONAZOLE TAB 200 MG	34	KOGENATE FS INJ 2000UNIT	118
JORNAY PM CAP 100MG ER	46	KETOCONAZOLE TAB 200MG	34	KOGENATE FS INJ 3000UNIT	118
JOURNAVX TAB 50MG	154	KETODAN AER 2%	34	KOSELUGO CAP 5MG	38
JOYEAX TAB 0.1-20	100	KETO-DIASTIX TES	77	KOSELUGO CAP 7.5MG	38
JULEBER TAB	100	KETONE BLOOD TEST STRIP	76	KOSELUGO CAP 10MG	38
JULUCA TAB 50-25MG	17	KETONE BLOOD TEST STRIP	78	KOSELUGO CAP 25MG	38
JUNEL 1.5/30 TAB	100	KETONE TES	77	KOSHR PRENAT TAB 30-1MG	215
JUNEL 1/20 TAB	100	KETOROLAC SOL 0.4% OP	177	KOURZEQ PST 0.1%	67
JUNEL FE 24 TAB 1/20	100	KETOROLAC SOL 0.5% OP	177	KOVALTRY INJ 250UNIT	119
JUNEL FE TAB 1.5/30	100	KETOROLAC TAB 10MG	174	KOVALTRY INJ 500UNIT	119
JUNEL FE TAB 1/20	100	KETOROLAC TROMETHAMINE OPHTH		KOVALTRY INJ 1000UNIT	118
JUST RIGHT PST 5000	67	SOLN 0.4%	176	KOVALTRY INJ 2000UNIT	119
JUVEN POW	87	KETOROLAC TROMETHAMINE OPHTH		KOVALTRY INJ 3000UNIT	119
JYLAMVO SOL 2MG/ML	132	SOLN 0.4%	177	KP ASPIRIN TAB 81MG EC	174
KAITLIB FE CHW	100	KETOROLAC TROMETHAMINE OPHTH		KP BISACODYL TAB 5MG EC	139
KALE/QUINOA POW BERRIES	215	SOLN 0.5%	176	K-PHOS TAB	87
KALE/QUINOA POW PEDIATRI	215	KETOROLAC TROMETHAMINE OPHTH		K-PHOS TAB NEUTRAL	87
KALETRA SOL	19	SOLN 0.5%	177	K-PHOS TAB NO 2	88
KALETRA TAB 100-25MG	19	KETOROLAC TROMETHAMINE TAB 10 MG	174	K-PRIME TAB 25MEQ EF	88
KALETRA TAB 200-50MG	19	KETOSTIX TES STRIP	77	KRAZATI TAB 200MG	38
KALLIGA TAB	100	KETOVIE 3:1 LIQ UNFLAVOR	88	KRINTAFEL TAB 150MG	41
KALYDECO GRA 5.8MG	65	KETOVIE 4:1 LIQ VANILLA	88	KRISGEL 100 GEL	154
KALYDECO GRA 13.4MG	65	KETOVIE LIQ PEPTIDE	88	KRISGEL 100 GEL	154
KALYDECO PAK 25MG	65	KETOVIE LIQ UNFLAVOR	88	KRISTALOSE PAK 10GM	139
KALYDECO PAK 50MG	65	KINERET INJ	132	KRISTALOSE PAK 20GM	139
KALYDECO PAK 75MG	66	KISQALI 200 PAK FEMARA	38	K-TAB TAB 20MEQ	88
KALYDECO TAB 150MG	194	KISQALI 400 PAK FEMARA	38	KT TAPE MIS CGM PTCH	154
KAPSPARGO CAP 25MG	49	KISQALI 600 PAK FEMARA	38	KURVELO TAB 0.15/30	100
KAPSPARGO CAP 50MG	49	KISQALI TAB 200DOSE	38	KYZATREX CAP 100MG	12
KAPSPARGO CAP 100MG	49	KISQALI TAB 400DOSE	38	KYZATREX CAP 150MG	12
KAPSPARGO CAP 200MG	49	KISQALI TAB 600DOSE	38	KYZATREX CAP 200MG	12
KARIVA TAB 28 DAY	100	KLARON LOT 10%	70	LABETALOL HCL TAB 100 MG	49
KATE FARMS LIQ 1.0	88	KLAYESTA POW 100000	34	LABETALOL HCL TAB 200 MG	49
KATE FARMS LIQ 1.0 CHOC	88	KLISYRI OIN 1% (250)	73	LABETALOL HCL TAB 300 MG	49
KATE FARMS LIQ 1.0 VAN	88	KLISYRI OIN 1% (350)	73	LABETALOL HCL TAB 400 MG	49
KATE FARMS LIQ 1.4	88	KLOR-CON 8 TAB 8MEQ ER	88	LABETALOL TAB 100MG	49

LABETALOL TAB 200MG	49	LAMICTAL XR KIT	114	LANADELUMAB-FLYO INJ 300 MG/2ML (150 MG/ML).....	12
LABETALOL TAB 300MG	49	LAMIVUDINE ORAL SOLN 10 MG/ML	18	LANADELUMAB-FLYO SOLN PREF SYRINGE 150 MG/ML	135
LABETALOL TAB 400MG	49	LAMIVUDINE SOL 10MG/ML.....	18	LANADELUMAB-FLYO SOLN PREF SYRINGE 300 MG/2ML (150 MG/ML)	135
LACOSAMIDE CAP ER 24HR 100 MG	203	LAMIVUDINE TAB 100MG.....	15	LANCET CARRY MIS CASE	80
LACOSAMIDE CAP ER 24HR 150 MG.....	203	LAMIVUDINE TAB 100 MG (HBV).....	15	*LANCET DEVICES***	80
LACOSAMIDE CAP ER 24HR 200 MG	203	LAMIVUDINE TAB 150 MG.....	18	*LANCET DEVICES***	80
LACOSAMIDE ORAL SOLUTION 10 MG/ML	203	LAMIVUDINE TAB 150MG	18	*LANCET DEVICES***	80
LACOSAMIDE ORAL SOLUTION 10 MG/ML	203	LAMIVUDINE TAB 300 MG	18	*LANCET DEVICES***	80
LACOSAMIDE ORAL SOLUTION 10 MG/ML	203	LAMIVUDINE TAB 300MG.....	18	*LANCET DEVICES***	80
LACOSAMIDE ORAL SOLUTION 10 MG/ML	203	LAMIVUDINE-TENOFOVIR DISOPROXIL FUMARATE TAB 300-300 MG.....	17	*LANCET DEVICES***	80
LACOSAMIDE ORAL SOLUTION 10 MG/ML	203	LAMIVUDINE-ZIDOVUDINE TAB 150-300 MG	18	*LANCET DEVICES***	80
LACOSAMIDE ORAL SOLUTION 10 MG/ML	204	LAMIVUD/ZIDO TAB 150-300	18	*LANCET DEVICES***	80
LACOSAMIDE SOL 10MG/ML	203	LAMOTRIGINE CHW 5MG	114	*LANCET DEVICES***	80
LACOSAMIDE SOL 50/5ML	203	LAMOTRIGINE CHW 25MG.....	114	*LANCET DEVICES***	80
LACOSAMIDE SOL 50MG/5ML.....	203	LAMOTRIGINE KIT START 35	114	*LANCET DEVICES***	80
LACOSAMIDE SOL 100/10ML	203	LAMOTRIGINE KIT START 49	114	*LANCET DEVICES***	80
LACOSAMIDE SOL 150/15ML	203	LAMOTRIGINE KIT START 98	114	*LANCET DEVICES***	80
LACOSAMIDE SOL 200/20ML.....	203	LAMOTRIGINE TAB 25 MG	114	*LANCET DEVICES***	80
LACOSAMIDE TAB 50 MG	203	LAMOTRIGINE TAB 25 MG	114	*LANCETS***	74
LACOSAMIDE TAB 50MG.....	203	LAMOTRIGINE TAB 25 MG	114	*LANCETS***	74
LACOSAMIDE TAB 100 MG.....	203	LAMOTRIGINE TAB 25MG.....	114	*LANCETS***	74
LACOSAMIDE TAB 100MG	203	LAMOTRIGINE TAB 25 MG (42) & 100 MG (7) STARTER KIT	114	*LANCETS***	74
LACOSAMIDE TAB 150 MG	203	LAMOTRIGINE TAB 25 MG (42) & 100 MG (7) STARTER KIT	114	*LANCETS***	74
LACOSAMIDE TAB 150MG	203	LAMOTRIGINE TAB 35 X 25 MG STARTER KIT.....	114	*LANCETS***	74
LACOSAMIDE TAB 200 MG.....	203	LAMOTRIGINE TAB 35 X 25 MG STARTER KIT.....	114	*LANCETS***	75
LACOSAMIDE TAB 200MG	203	LAMOTRIGINE TAB 84 X 25 MG & 14 X 100 MG STARTER KIT.....	114	*LANCETS***	75
LACRISERT MIS 5MG OP.....	175	LAMOTRIGINE TAB 84 X 25 MG & 14 X 100 MG STARTER KIT.....	114	*LANCETS***	75
*LACTOBACILLUS CAP**	108	LAMOTRIGINE TAB 100 MG	114	*LANCETS***	75
LACTULOSE (ENCEPHALOPATHY) SOLUTION 10 GM/15ML	138	LAMOTRIGINE TAB 100 MG	114	*LANCETS***	75
LACTULOSE (ENCEPHALOPATHY) SOLUTION 10 GM/15ML	139	LAMOTRIGINE TAB 100MG	114	*LANCETS***	75
LACTULOSE (ENCEPHALOPATHY) SOLUTION 10 GM/15ML	139	LAMOTRIGINE TAB 150 MG	114	*LANCETS***	75
LACTULOSE (ENCEPHALOPATHY) SOLUTION 10 GM/15ML	139	LAMOTRIGINE TAB 150 MG	114	*LANCETS***	75
LACTULOSE ORAL CRYSTAL PACKET 10 GM.....	139	LAMOTRIGINE TAB 150MG.....	114	*LANCETS***	75
LACTULOSE ORAL CRYSTAL PACKET 20 GM.....	139	LAMOTRIGINE TAB 200 MG.....	114	*LANCETS***	75
LACTULOSE ORAL CRYSTAL PACKET 20 GM.....	139	LAMOTRIGINE TAB 200 MG.....	114	*LANCETS***	76
LACTULOSE PAK 20GM	139	LAMOTRIGINE TAB 200MG	114	*LANCETS***	76
LACTULOSE SOL 10/15ML	139	LAMOTRIGINE TAB CHEWABLE DISPERSIBLE 5 MG	114	*LANCETS***	76
LACTULOSE SOL 10GM/15.....	139	LAMOTRIGINE TAB CHEWABLE DISPERSIBLE 25 MG	114	*LANCETS***	76
LACTULOSE SOL 10GM/15.....	139	LAMOTRIGINE TAB ER 24HR 21 X 25 MG & 7 X 50 MG TITRATION KIT	113	*LANCETS***	77
LACTULOSE SOL 20/30ML.....	139	LAMOTRIGINE TAB ER 24HR 25 (14) & 50 MG (14) & 100 MG(7) KIT.....	114	*LANCETS***	77
LACTULOSE SOLUTION 10 GM/15ML	138	LAMOTRIGINE TAB ER 24HR 50 (14) & 100 MG(14) & 200 MG(7) KIT.....	113	*LANCETS***	77
LACTULOSE SOLUTION 10 GM/15ML	139	LAMPIT TAB 30MG.....	41	*LANCETS***	77
LACTULOSE SOLUTION 10 GM/15ML	139	LAMPIT TAB 120MG.....	41	*LANCETS***	77
LAGEVRIO CAP 200MG	43				
LAMICTAL XR KIT	113				
LAMICTAL XR KIT	113				

*LANCETS***	77	*LANCETS MISC.***	80	LAXATIVE TAB 5MG EC	139
*LANCETS***	77	*LANCETS MISC.***	80	LAYOLIS FE CHW	100
*LANCETS***	77	LANCETS SUPR MIS THIN 28G	77	LAZCLUZE TAB 80MG	168
*LANCETS***	77	LANCET ULTRA MIS THIN 30G	77	LAZCLUZE TAB 240MG	168
*LANCETS***	77	LANOLIN ANHYDROUS OINTMENT	154	LAZERTINIB MESYLATE TAB 80 MG	168
*LANCETS***	78	LANOLIN ANHY OIN	154	LAZERTINIB MESYLATE TAB 240 MG	168
*LANCETS***	78	LANOXIN TAB 0.25MG	62	L-CARNITINE CAP 500MG	88
*LANCETS***	78	LANOXIN TAB 0.125MG	62	L-CITRULLINE CAP 600MG	154
*LANCETS***	78	LANOXIN TAB 0.0625MG	62	L-CITRULLINE POW	154
*LANCETS***	78	LANSOPRAZOLE SUS 3MG/ML	190	LEBRIKIZUMAB-LBKZ SOLUTION	
*LANCETS***	78	*LANSOPRAZOLE SUSP 3 MG/ML		PREFILLED SYRINGE 250 MG/2ML	70
*LANCETS***	78	(COMPOUND KIT)**	190	LEBRIKIZUMAB-LBKZ SUBCUTANEOUS	
*LANCETS***	78	LANSOPRAZOLE TAB 15MG ODT	190	SOLN AUTO-INJECT 250 MG/2ML	70
*LANCETS***	78	LANSOPRAZOLE TAB 30MG ODT	190	LECITHIN GEL	154
*LANCETS***	78	LANSOPRAZOLE TAB DELAYED RELEASE		LECITHIN GRA	154
*LANCETS***	78	ORALLY DISINTEGRATING 15 MG	190	LECITHIN GRANULES	154
*LANCETS***	78	LANSOPRAZOLE TAB DELAYED RELEASE		LEDIPASVIR-SOFOSBUVIR PELLETT PACK	
*LANCETS***	78	ORALLY DISINTEGRATING 30 MG	190	33.75-150 MG	15
*LANCETS***	79	LANTHANUM CARBONATE CHEW TAB		LEDIPASVIR-SOFOSBUVIR PELLETT PACK	
*LANCETS***	79	500 MG (ELEMENTAL)	187	45-200 MG	15
*LANCETS***	79	LANTHANUM CARBONATE CHEW TAB		LEDIPASVIR-SOFOSBUVIR TAB 45-200 MG	15
*LANCETS***	79	750 MG (ELEMENTAL)	187	LEDIPASVIR-SOFOSBUVIR TAB 90-400 MG	15
*LANCETS***	79	LANTHANUM CARBONATE CHEW TAB		LEDIPASVIR-SOFOSBUVIR TAB 90-400 MG	15
*LANCETS***	79	1000 MG (ELEMENTAL)	187	LEDIP-SOFOSB TAB 90-400MG	15
*LANCETS***	79	LANTHANUM CARBONATE ORAL		LEENA TAB	100
*LANCETS***	79	POWDER PACK 750 MG (ELEMENTAL)	187	LEFLUNOMIDE TAB 10 MG	135
*LANCETS***	79	LANTHANUM CARBONATE ORAL		LEFLUNOMIDE TAB 10MG	135
*LANCETS***	79	POWDER PACK 1000 MG (ELEMENTAL)	187	LEFLUNOMIDE TAB 20 MG	135
*LANCETS***	79	LANTHANUM CHW 500MG	187	LEFLUNOMIDE TAB 20MG	135
*LANCETS***	79	LANTHANUM CHW 750MG	187	LENACAPAVIR SODIUM TAB 300 MG	17
*LANCETS***	79	LANTHANUM CHW 1000MG	187	LENACAPAVIR SODIUM TAB 300 MG	17
*LANCETS***	79	LANTUS INJ 100/ML	136	LENACAPAVIR SODIUM TAB THERAPY	
*LANCETS***	79	LANTUS SOLOS INJ 100/ML	136	PACK 4 X 300 MG	17
*LANCETS***	79	LAPATINIB DITOSYLATE TAB 250 MG		LENACAPAVIR SODIUM TAB THERAPY	
*LANCETS***	79	(BASE EQUIV)	168	PACK 5 X 300 MG	17
*LANCETS***	79	LAPATINIB TAB 250MG	168	LENALIDOMIDE CAP 2.5MG	21
*LANCETS***	79	L-ARGININE CAP 500MG	154	LENALIDOMIDE CAP 5 MG	21
*LANCETS***	79	LARIN 24 TAB FE 1/20	100	LENALIDOMIDE CAP 5 MG	21
*LANCETS***	79	LARIN FE TAB 1.5/30	100	LENALIDOMIDE CAP 5MG	21
*LANCETS***	79	LARIN FE TAB 1/20	100	LENALIDOMIDE CAP 10 MG	21
*LANCETS***	79	LARIN TAB 1.5/30	100	LENALIDOMIDE CAP 10 MG	21
*LANCETS***	79	LARIN TAB 1/20	100	LENALIDOMIDE CAP 10MG	21
*LANCETS***	79	LAROTRECTINIB SULFATE CAP 25 MG		LENALIDOMIDE CAP 15 MG	21
*LANCETS***	79	(BASE EQUIVALENT)	169	LENALIDOMIDE CAP 15 MG	21
*LANCETS***	79	LAROTRECTINIB SULFATE CAP 100 MG		LENALIDOMIDE CAP 15MG	21
*LANCETS***	80	(BASE EQUIVALENT)	169	LENALIDOMIDE CAP 20 MG	21
*LANCETS***	80	LAROTRECTINIB SULFATE ORAL SOLN		LENALIDOMIDE CAP 20 MG	21
*LANCETS***	80	20 MG/ML (BASE EQUIVALENT)	170	LENALIDOMIDE CAP 20MG	21
*LANCETS***	80	LASIX TAB 20MG	81	LENALIDOMIDE CAP 25 MG	21
*LANCETS***	80	LASIX TAB 40MG	81	LENALIDOMIDE CAP 25 MG	21
*LANCETS***	80	LASIX TAB 80MG	81	LENALIDOMIDE CAP 25MG	21
*LANCETS KIT***	74	L-ASPARAGINE POW MONOHYDR	154	LENALIDOMIDE CAPS 2.5 MG	21
*LANCETS KIT***	74	LATANOPROST OPHTH EMULSION 0.005%	180	LENALIDOMIDE CAPS 2.5 MG	21
LANCETS MICR MIS THIN 33G	77	LATANOPROST OPHTH SOLN 0.005%	179	LENIOLISIB PHOSPHATE TAB 70 MG	134
LANCETS MIS 28G	77	LATANOPROST SOL 0.005%	179		
LANCETS MIS 28G THIN	77	LAXACLEAR POW	138		
*LANCETS MISC.***	80				

LENVATINIB CAP THERAPY PACK 2 X 4 MG (8 MG DAILY DOSE).....	168	LEUPROLIDE KIT 1MG/0.2	130	LEVOFLOXACIN OPHTH SOLN 1.5%.....	178
LENVATINIB CAP THERAPY PACK 2 X 10 MG (20 MG DAILY DOSE)	168	LEUPROLIDE KIT 14 DAY	130	LEVOFLOXACIN ORAL SOLN 25 MG/ML ...	192
LENVATINIB CAP THERAPY PACK 3 X 4 MG (12 MG DAILY DOSE).....	168	LEVACETYLLEUCINE FOR SUSP PACKET 1 GM	143	LEVOFLOXACIN SOL 0.5%	178
LENVATINIB CAP THERAPY PACK 4 MG (4 MG DAILY DOSE).....	168	LEVALBUTEROL AER 45/ACT.....	55	LEVOFLOXACIN SOL 1.5%	178
LENVATINIB CAP THERAPY PACK 10 & 4 MG (14 MG DAILY DOSE).....	168	LEVALBUTEROL HCL SOLN NEBU 0.31 MG/3ML (BASE EQUIV).....	55	LEVOFLOXACIN SOL 25MG/ML.....	192
LENVATINIB CAP THERAPY PACK 10 MG (10 MG DAILY DOSE).....	168	LEVALBUTEROL HCL SOLN NEBU 0.63 MG/3ML (BASE EQUIV).....	55	LEVOFLOXACIN TAB 250 MG	192
LENVATINIB CAP THERAPY PACK 10 MG & 4 MG (24 MG DAILY DOSE)	168	LEVALBUTEROL HCL SOLN NEBU 1.25 MG/3ML (BASE EQUIV).....	55	LEVOFLOXACIN TAB 250MG.....	192
LENVATINIB CAP THERAPY PACK 10 MG & 2 X 4 MG (18 MG DAILY DOSE).....	168	LEVALBUTEROL HCL SOLN NEBU 1.25 MG/3ML (BASE EQUIV).....	55	LEVOFLOXACIN TAB 500 MG	193
LENVIMA CAP 4MG	168	LEVALBUTEROL HCL SOLN NEBU CONC 1.25 MG/0.5ML (BASE EQUIV)	55	LEVOFLOXACIN TAB 500MG.....	193
LENVIMA CAP 8 MG.....	168	LEVALBUTEROL NEB 0.31MG	55	LEVOFLOXACIN TAB 750 MG	193
LENVIMA CAP 10 MG.....	168	LEVALBUTEROL NEB 0.63MG	55	LEVOFLOXACIN TAB 750MG	193
LENVIMA CAP 12MG	168	LEVALBUTEROL NEB 1.25/0.5	55	LEVONEST TAB.....	100
LENVIMA CAP 14 MG.....	168	LEVALBUTEROL NEB 1.25MG	55	LEVONOR-ETH EST TAB 0.15- 0.02/0.025/0.03 MG & ETH EST 0.01 MG....	101
LENVIMA CAP 18 MG.....	168	LEVALBUTEROL TARTRATE INHAL AEROSOL 45 MCG/ACT (BASE EQUIV).....	55	LEVONOR-ETH EST TAB 0.15- 0.02/0.025/0.03 MG & ETH EST 0.01 MG....	103
LENVIMA CAP 20 MG	168	LEVALBUTEROL TARTRATE INHAL AEROSOL 45 MCG/ACT (BASE EQUIV).....	55	LEVONOR-ETH EST TAB 0.15- 0.02/0.025/0.03 MG & ETH EST 0.01 MG....	103
LENVIMA CAP 24 MG.....	168	LEVBIID TAB 0.375 ER.....	41	LEVONOR/ETHI TAB	100
LESSINA TAB.....	100	LEVETIRACETAM ORAL SOLN 100 MG/ML..	27	LEVONOR/ETHI TAB 0.1-0.02	101
LETERMOVIR PELLET PACK 20 MG.....	15	LEVETIRACETAM ORAL SOLN 100 MG/ML..	27	LEVONOR/ETHI TAB 0.1-20	101
LETERMOVIR PELLET PACK 120 MG	15	LEVETIRACETAM TAB 250 MG	27	LEVONOR/ETHI TAB ESTRADIO	101
LETERMOVIR TAB 240 MG	15	LEVETIRACETAM TAB 500 MG	27	LEVONOR/ETHI TAB ESTRADIO	101
LETERMOVIR TAB 480 MG	15	LEVETIRACETAM TAB 500 MG	28	LEVONOR/ETHI TAB ESTRADIO	101
LETROZOLE TAB 2.5 MG.....	43	LEVETIRACETAM TAB 750 MG	27	LEVONOR/ETHI TAB ESTRADIO	101
LETROZOLE TAB 2.5MG	43	LEVETIRACETAM TAB 1000 MG.....	27	LEVONOR/ETHI TAB ESTRADIO	101
LEUCINE ORAL POWDER PACKET 100 MG .	154	LEVETIRACETAM TAB ER 24HR 500 MG	27	LEVONOR/ETHI TAB ESTRADIO	101
LEUCINE PAK 100MG	154	LEVETIRACETAM TAB ER 24HR 750 MG	27	LEVONORGESTREL-ETH ESTRA TAB 0.05-30/0.075-40/0.125-30MG-MCG.....	97
LEUCOVOR CA TAB 5MG	38	LEVETIRACETA SOL 100MG/ML	27	LEVONORGESTREL-ETH ESTRA TAB 0.05-30/0.075-40/0.125-30MG-MCG.....	100
LEUCOVOR CA TAB 10MG	38	LEVETIRACETA SOL 500/5ML	27	LEVONORGESTREL-ETH ESTRA TAB 0.05-30/0.075-40/0.125-30MG-MCG.....	100
LEUCOVOR CA TAB 15MG	38	LEVETIRACETA TAB 250MG.....	27	LEVONORGESTREL-ETH ESTRA TAB 0.05-30/0.075-40/0.125-30MG-MCG.....	104
LEUCOVOR CA TAB 25MG	38	LEVETIRACETA TAB 500MG	27	LEVONORGESTREL & ETHINYL ESTRADIOL (91-DAY) TAB 0.15-0.03 MG	99
LEUCOVORIN CALCIUM POWDER	144	LEVETIRACETA TAB 500MG ER	27	LEVONORGESTREL & ETHINYL ESTRADIOL (91-DAY) TAB 0.15-0.03 MG	99
LEUCOVORIN CALCIUM POWDER	154	LEVETIRACETA TAB 750MG.....	27	LEVONORGESTREL & ETHINYL ESTRADIOL (91-DAY) TAB 0.15-0.03 MG	100
LEUCOVORIN CALCIUM TAB 5 MG.....	38	LEVETIRACETA TAB 750MG ER	27	LEVONORGESTREL & ETHINYL ESTRADIOL (91-DAY) TAB 0.15-0.03 MG	101
LEUCOVORIN CALCIUM TAB 10 MG.....	38	LEVETIRACETA TAB 1000MG	27	LEVONORGESTREL & ETHINYL ESTRADIOL (91-DAY) TAB 0.15-0.03 MG	103
LEUCOVORIN CALCIUM TAB 15 MG.....	38	LEVOBUNOLOL HCL OPHTH SOLN 0.5% ...	179	LEVONORGESTREL & ETHINYL ESTRADIOL CHEW TAB 0.1 MG-20 MCG....	104
LEUCOVORIN CALCIUM TAB 25 MG.....	38	LEVOBUNOLOL SOL 0.5% OP	179	LEVONORGESTREL-ETHINYL ESTRADIOL (CONTINUOUS) TAB 90-20 MCG.....	95
LEUCOVORIN POW CALCIUM.....	154	LEVOCARNITINE L-TARTRATE CAP 500 MG. 88		LEVONORGESTREL-ETHINYL ESTRADIOL (CONTINUOUS) TAB 90-20 MCG.....	97
LEUKERAN TAB 2MG	9	LEVOCARNITINE ORAL SOLN 1 GM/10ML (10%).....	88	LEVONORGESTREL-ETHINYL ESTRADIOL (CONTINUOUS) TAB 90-20 MCG.....	100
LEUKINE INJ 250MCG	53	LEVOCARNITINE TAB 330 MG	88	LEVONORGESTREL-ETHINYL ESTRADIOL-FE TAB 0.1 MG-20 MCG (21) ...	100
LEUPROLIDE ACETATE INJ KIT 1 MG/0.2ML (5 MG/ML).....	130	LEVOCARNITIN SOL 1GM/10ML	88	LEVONORGESTREL-ETHINYL ESTRADIOL-FE TAB 0.1 MG-20 MCG (21) ...	101
LEUPROLIDE ACETATE INJ KIT 1 MG/0.2ML (5 MG/ML).....	130	LEVOCARNITIN TAB 330MG	88		
LEUPROLIDE ACETATE INJ KIT 1 MG/0.2ML (5 MG/ML).....	130	LEVOCETIRIZINE DIHYDROCHLORIDE SOLN 2.5 MG/5ML (0.5 MG/ML).....	36		
LEUPROLIDE ACETATE INJ KIT 1 MG/0.2ML (5 MG/ML).....	130	LEVOCETIRIZINE DIHYDROCHLORIDE TAB 5 MG.....	36		
LEUPROLIDE ACETATE INJ KIT 1 MG/0.2ML (5 MG/ML).....	130	LEVOCETIRIZI SOL 2.5/5ML.....	36		
LEUPROLIDE INJ 1MG/0.2	130	LEVOCETIRIZI TAB 5MG	36		
LEUPROLIDE INJ 14 DAY.....	130	LEVODOPA INHAL POWDER CAP 42 MG....	151		
		LEVO-ETH EST TAB 90-20MCG	100		
		LEVOFLOXACIN OPHTH SOLN 0.5%	178		

LEVOXYL TAB 200MCG	128	LINAGLIPTIN-METFORMIN HCL TAB ER		LISDEXAMFETA CHW 20MG	45
LEVSIN/SL SUB 0.125MG	41	24HR 2.5-1000 MG	30	LISDEXAMFETA CHW 30MG	45
LEVSIN TAB 0.125MG	41	LINAGLIPTIN-METFORMIN HCL TAB ER		LISDEXAMFETA CHW 40MG	45
LEXIVA SUS 50MG/ML	19	24HR 5-1000 MG	30	LISDEXAMFETA CHW 50MG	45
L-GLUTAMINE POW 5GM	88	LINAGLIPTIN TAB 5 MG	32	LISDEXAMFETA CHW 60MG	45
LIBERVANT MIS 5MG	107	LINEZOLID FOR SUSP 100 MG/5ML	23	LISDEXAMFETAMINE DIMESYLATE CAP	
LIBERVANT MIS 7.5MG	107	LINEZOLID FOR SUSP 100 MG/5ML	25	10 MG	44
LIBERVANT MIS 10MG	107	LINEZOLID SUS 100/5ML	23	LISDEXAMFETAMINE DIMESYLATE CAP	
LIBERVANT MIS 12.5MG	107	LINEZOLID TAB 600 MG	23	20 MG	44
LIBERVANT MIS 15MG	107	LINEZOLID TAB 600MG	23	LISDEXAMFETAMINE DIMESYLATE CAP	
LIDOCAINE-BENZALKONIUM		LINZESS CAP 72MCG	137	30 MG	44
(PODIATRIC) CREAM 4.12-0.13%	147	LINZESS CAP 145MCG	137	LISDEXAMFETAMINE DIMESYLATE CAP	
LIDOCAINE DIS 5% PATCH	140	LINZESS CAP 290MCG	137	40 MG	44
LIDOCAINE GEL 2%	140	LIOMNY TAB 5MCG	129	LISDEXAMFETAMINE DIMESYLATE CAP	
LIDOCAINE GEL 2% JELLY	140	LIOMNY TAB 25MCG	129	50 MG	44
LIDOCAINE GEL 2% JELLY	140	LIOMNY TAB 50MCG	129	LISDEXAMFETAMINE DIMESYLATE CAP	
LIDOCAINE HCL LARYNGOTRACHEAL		LIOTHYRONINE SODIUM TAB 5 MCG	129	60 MG	44
SOLN 4%	140	LIOTHYRONINE SODIUM TAB 5 MCG	129	LISDEXAMFETAMINE DIMESYLATE CAP	
LIDOCAINE HCL OPTH GEL 3.5%	175	LIOTHYRONINE SODIUM TAB 25 MCG	129	70 MG	44
LIDOCAINE HCL SOLN 4%	140	LIOTHYRONINE SODIUM TAB 25 MCG	129	LISDEXAMFETAMINE DIMESYLATE	
LIDOCAINE HCL URETHRAL/MUCOSAL		LIOTHYRONINE SODIUM TAB 50 MCG	129	CHEW TAB 10 MG	44
GEL 2%	140	LIOTHYRONINE SODIUM TAB 50 MCG	129	LISDEXAMFETAMINE DIMESYLATE	
LIDOCAINE HCL URETHRAL/MUCOSAL		LIOTHYRONINE TAB 5MCG	129	CHEW TAB 20 MG	45
GEL PREFILLED SYRINGE 2%	140	LIOTHYRONINE TAB 25MCG	129	LISDEXAMFETAMINE DIMESYLATE	
LIDOCAINE HCL URETHRAL/MUCOSAL		LIOTHYRONINE TAB 50MCG	129	CHEW TAB 30 MG	45
GEL PREFILLED SYRINGE 2%	140	LIPISTART POW	215	LISDEXAMFETAMINE DIMESYLATE	
LIDOCAINE HCL URETHRAL/MUCOSAL		LIPODERM HMW GEL PCCA	154	CHEW TAB 40 MG	45
GEL PREFILLED SYRINGE 2%	140	LIPOLAYER CRE	154	LISDEXAMFETAMINE DIMESYLATE	
LIDOCAINE HCL VISCOUS SOLN 2%	140	LIPOZYME CRE	154	CHEW TAB 50 MG	45
LIDOCAINE HCL VISCOUS SOLN 2%	140	LIQ HOPE PEP LIQ BERRY	88	LISDEXAMFETAMINE DIMESYLATE	
LIDOCAINE OIN 5%	140	LIQ PROTEIN LIQ FORTIFIE	154	CHEW TAB 60 MG	45
LIDOCAINE OINT 5%	140	LIQUACEL LIQ	154	LISINOP/HCTZ TAB 10-12.5	62
LIDOCAINE PATCH 1.8% (36 MG)	140	LIQUACEL LIQ	154	LISINOP/HCTZ TAB 20-12.5	62
LIDOCAINE PATCH 5%	140	LIQUACEL LIQ APPLE	154	LISINOP/HCTZ TAB 20-25MG	62
LIDOCAINE-PRILOCAINE CREAM 2.5-2.5%	140	LIQUACEL LIQ GING ALE	154	LISINOPRIL & HYDROCHLOROTHIAZIDE	
LIDOCAINE SOL 2% ORAL	140	LIQUACEL LIQ LEMON	154	TAB 10-12.5 MG	62
LIDOCAINE SOL 2% VISC	140	LIQUACEL LIQ ORANGE	154	LISINOPRIL & HYDROCHLOROTHIAZIDE	
LIDOCAINE SOL 4%	140	LIQUACEL LIQ PUMP+GO	154	TAB 20-12.5 MG	62
LIDOCAINE SOL 4%	140	LIRAGLUTIDE INJ 18MG/3ML	30	LISINOPRIL & HYDROCHLOROTHIAZIDE	
LIDO/PRILOCN CRE 2.5-2.5%	140	LIRAGLUTIDE INJ 18MG/3ML	30	TAB 20-25 MG	62
LIFITEGRAST OPTH SOLN 5%	176	LIRAGLUTIDE INJ 18MG/3ML	30	LISINOPRIL ORAL SOLN 1 MG/ML	14
LIKMEZ SUS 500/5ML	23	LIRAGLUTIDE SOLN PEN-INJECTOR 18		LISINOPRIL TAB 2.5 MG	14
LIMBREL250 CAP 250-50MG	154	MG/3ML (6 MG/ML)	30	LISINOPRIL TAB 2.5MG	14
LIMBREL500 CAP 500-50MG	154	LIRAGLUTIDE SOLN PEN-INJECTOR 18		LISINOPRIL TAB 5 MG	14
LIMBREL CAP 250MG	154	MG/3ML (6 MG/ML)	30	LISINOPRIL TAB 5MG	14
LIMBREL CAP 500MG	154	LIRAGLUTIDE SOLN PEN-INJECTOR 18		LISINOPRIL TAB 10 MG	14
LINACLOTIDE CAP 72 MCG	137	MG/3ML (6 MG/ML)	30	LISINOPRIL TAB 10MG	14
LINACLOTIDE CAP 145 MCG	137	LISDEXAMFETA CAP 10MG	44	LISINOPRIL TAB 20 MG	14
LINACLOTIDE CAP 290 MCG	137	LISDEXAMFETA CAP 20MG	44	LISINOPRIL TAB 20MG	14
LINAGLIPTIN-METFORMIN HCL TAB 2.5-		LISDEXAMFETA CAP 30MG	44	LISINOPRIL TAB 30 MG	14
500 MG	30	LISDEXAMFETA CAP 40MG	44	LISINOPRIL TAB 30MG	14
LINAGLIPTIN-METFORMIN HCL TAB 2.5-		LISDEXAMFETA CAP 50MG	44	LISINOPRIL TAB 40 MG	14
850 MG	30	LISDEXAMFETA CAP 60MG	44	LISINOPRIL TAB 40MG	14
LINAGLIPTIN-METFORMIN HCL TAB 2.5-		LISDEXAMFETA CAP 70MG	44	LITFULO CAP 50MG	70
1000 MG	30	LISDEXAMFETA CHW 10MG	44	LITHIUM CARB CAP 150MG	170
				LITHIUM CARB CAP 300MG	170

LITHIUM CARB CAP 600MG	170	LONAPEGSOMATROPIN-TCGD FOR	LOSARTAN POT TAB 100MG	13
LITHIUM CARBONATE CAP 150 MG	170	SUBCUTANEOUS INJ CARTRIDGE 3.6 MG ..	LOTEMAX OIN 0.5%	177
LITHIUM CARBONATE CAP 300 MG	170	LONAPEGSOMATROPIN-TCGD FOR	LOTEMAX SM GEL 0.38%	177
LITHIUM CARBONATE CAP 600 MG	170	SUBCUTANEOUS INJ CARTRIDGE 3 MG ..	LOTENSIN HCT TAB 10-12.5	62
LITHIUM CARBONATE TAB 300 MG	171	LONAPEGSOMATROPIN-TCGD FOR	LOTENSIN HCT TAB 20-12.5	62
LITHIUM CARBONATE TAB ER 300 MG	171	SUBCUTANEOUS INJ CARTRIDGE 4.3 MG ..	LOTENSIN HCT TAB 20-25MG	62
LITHIUM CARBONATE TAB ER 300 MG	171	LONAPEGSOMATROPIN-TCGD FOR	LOTENSIN TAB 10MG	14
LITHIUM CARBONATE TAB ER 450 MG	171	SUBCUTANEOUS INJ CARTRIDGE 5.2 MG ..	LOTENSIN TAB 20MG	14
LITHIUM CARB TAB 300MG	171	LONAPEGSOMATROPIN-TCGD FOR	LOTENSIN TAB 40MG	14
LITHIUM CARB TAB 300MG ER	171	SUBCUTANEOUS INJ CARTRIDGE 6.3 MG ..	LOTEPREDNOL ETABONATE OPTH GEL	
LITHIUM CARB TAB 450MG ER	171	LONAPEGSOMATROPIN-TCGD FOR	0.38%	177
LITHIUM ORAL SOLUTION 8 MEQ/5ML	170	SUBCUTANEOUS INJ CARTRIDGE 7.6 MG ..	LOTEPREDNOL ETABONATE OPTH OINT	
LITHIUM SOL 8MEQ/5ML	170	LONAPEGSOMATROPIN-TCGD FOR	0.5%	177
LITHOBID TAB 300MG	171	SUBCUTANEOUS INJ CARTRIDGE 9.1 MG ..	LOTEPREDNOL ETABONATE OPTH SUSP	
LITHOSTAT TAB 250MG	111	LONAPEGSOMATROPIN-TCGD FOR	0.2%	176
LIVDELZI CAP 10MG	108	SUBCUTANEOUS INJ CARTRIDGE 11 MG ..	LOTEPREDNOL ETABONATE OPTH SUSP	
LIVMARLI TAB 10MG	108	LOPID TAB 600MG	0.2%	177
LIVMARLI TAB 15MG	108	LOPINAVIR-RITONAVIR SOLN 400-100	LOTEPREDNOL ETABONATE OPTH SUSP	
LIVMARLI TAB 20MG	108	MG/5ML (80-20 MG/ML)	0.5%	177
LIVMARLI TAB 30MG	108	LOPINAVIR-RITONAVIR SOLN 400-100	LOTEPREDNOL ETABONATE OPTH SUSP	
LIVTENCITY TAB 200MG	15	MG/5ML (80-20 MG/ML)	0.25%	176
L-LYSINE HCL TAB 500MG	154	LOPINAVIR-RITONAVIR TAB 100-25 MG ..	LOTEPREDNOL ETABONATE OPTH SUSP	
L-LYSINE TAB 500MG	88	LOPINAVIR-RITONAVIR TAB 100-25 MG ..	1%	177
LMD POW	215	LOPINAVIR-RITONAVIR TAB 200-50 MG ..	LOTEPREDNOL ETABONATE-	
LODOCO TAB 0.5MG	60	LOPINAVIR-RITONAVIR TAB 200-50 MG ..	TOBRAMYCIN OPTH SUSP 0.5-0.3%	177
LODOXAMIDE TROMETHAMINE OPTH		LOPIN/RITON SOL 80-20/ML	LOTEPREDNOL SUS 0.2%	177
SOLN 0.1%	176	LOPIN/RITON TAB 100-25MG	LOTEPREDNOL SUS 0.5%	177
LOJAIMIESS TAB	101	LOPIN/RITON TAB 200-50MG	LOTILANER OPTH SOLN 0.25%	178
LOKELMA PAK 5GM	93	LOPRESSOR TAB 50MG	LOVASTATIN (BULK) POWDER	155
LOKELMA PAK 10GM	93	LOPRESSOR TAB 100MG	LOVASTATIN POW	155
LO LOESTRIN TAB 1-10-10	101	LORAZEPAM CON 2MG/ML	LOVASTATIN TAB 10 MG	84
LOMOTIL TAB 2.5MG	108	LORAZEPAM CONC 2 MG/ML	LOVASTATIN TAB 10MG	84
LOMUSTINE CAP 10 MG	9	LORAZEPAM TAB 0.5 MG	LOVASTATIN TAB 20 MG	84
LOMUSTINE CAP 10 MG	9	LORAZEPAM TAB 0.5MG	LOVASTATIN TAB 20MG	84
LOMUSTINE CAP 10MG	9	LORAZEPAM TAB 1 MG	LOVASTATIN TAB 40 MG	84
LOMUSTINE CAP 40 MG	9	LORAZEPAM TAB 1MG	LOVASTATIN TAB 40MG	84
LOMUSTINE CAP 40 MG	9	LORAZEPAM TAB 2 MG	LOVO-ODF LIQ CUSTOM	155
LOMUSTINE CAP 40MG	9	LORAZEPAM TAB 2MG	LOW DOSE ASA TAB 81MG	174
LOMUSTINE CAP 100 MG	9	LORBRENA TAB 25MG	LOW-OGESTREL TAB	101
LOMUSTINE CAP 100 MG	9	LORBRENA TAB 100MG	LOXAPINE AEROSOL POWDER BREATH	
LOMUSTINE CAP 100MG	9	LORLATINIB TAB 25 MG	ACTIVATED 10 MG	6
LONAFARNIB CAP 50 MG	165	LORLATINIB TAB 100 MG	LOXAPINE CAP 5MG	6
LONAFARNIB CAP 75 MG	165	LOSARTAN/HCT TAB 50-12.5	LOXAPINE CAP 10MG	6
LONAPEGSOMATROPIN-TCGD FOR		LOSARTAN/HCT TAB 100-12.5	LOXAPINE CAP 25MG	6
SUBCUTANEOUS INJ CART 13.3 MG	126	LOSARTAN/HCT TAB 100-25	LOXAPINE CAP 50MG	6
LONAPEGSOMATROPIN-TCGD FOR		LOSARTAN POTASSIUM &	LOXAPINE SUCCINATE CAP 5 MG	6
SUBCUTANEOUS INJ CARTRIDGE 0.7 MG ..	126	HYDROCHLOROTHIAZIDE TAB 50-12.5 MG ..	LOXAPINE SUCCINATE CAP 10 MG	6
LONAPEGSOMATROPIN-TCGD FOR		LOSARTAN POTASSIUM &	LOXAPINE SUCCINATE CAP 25 MG	6
SUBCUTANEOUS INJ CARTRIDGE 1.4 MG ..	126	HYDROCHLOROTHIAZIDE TAB 100-12.5 MG	LOXAPINE SUCCINATE CAP 50 MG	6
LONAPEGSOMATROPIN-TCGD FOR		LOSARTAN POTASSIUM &	L-TYROSINE CAP 500MG	88
SUBCUTANEOUS INJ CARTRIDGE 1.8 MG ..	126	HYDROCHLOROTHIAZIDE TAB 100-25 MG ..	L-TYROSINE CAP 500MG	88
LONAPEGSOMATROPIN-TCGD FOR		LOSARTAN POTASSIUM TAB 25 MG	LUBIPROSTONE CAP 8 MCG	137
SUBCUTANEOUS INJ CARTRIDGE 2.1 MG ..	126	LOSARTAN POTASSIUM TAB 50 MG	LUBIPROSTONE CAP 8MCG	137
LONAPEGSOMATROPIN-TCGD FOR		LOSARTAN POTASSIUM TAB 100 MG	LUBIPROSTONE CAP 24 MCG	137
SUBCUTANEOUS INJ CARTRIDGE 2.5 MG ..	127	LOSARTAN POT TAB 25MG	LUBIPROSTONE CAP 24MCG	137
		LOSARTAN POT TAB 50MG	LUBRAJEL NP GEL	155

LUGOLS SOL.....	155	LYTGOBI TAB 4MG.....	94	MARPLAN TAB 10MG.....	170
LUGOLS SOL IODINE.....	23	LYTGOBI TAB 4MG.....	94	MARSTACIMAB-HNCQ SUBCUTANEOUS	
LUIZZA 1/20 TAB.....	101	LYTGOBI TAB 4MG.....	94	SOLN AUTO-INJ 150 MG/ML.....	118
LUIZZA TAB 1.5/30.....	101	LYUMJEV INJ 100UT/ML.....	136	MASK VORTEX/ MIS FROG.....	155
LUMACAFOR-IVACAFOR GRANULES		LYUMJEV KWPIN INJ 100UT/ML.....	136	MASK VORTEX/ MIS LADY BUG.....	155
PACKET 75-94 MG.....	66	LYUMJEV KWPIN INJ 200UT/ML.....	137	MATULANE CAP 50MG.....	9
LUMACAFOR-IVACAFOR GRANULES		LYZA TAB 0.35MG.....	189	MATZIM LA TAB 180MG/24.....	57
PACKET 100-125 MG.....	66	MACITENTAN TAB 10 MG.....	191	MATZIM LA TAB 240MG/24.....	57
LUMACAFOR-IVACAFOR GRANULES		MACROBID CAP 100MG.....	23	MATZIM LA TAB 300MG/24.....	57
PACKET 150-188 MG.....	66	MACRODANTIN CAP 25MG.....	23	MATZIM LA TAB 360MG/24.....	57
LUMACAFOR-IVACAFOR TAB 100-125 MG	66	MACRODANTIN CAP 50MG.....	23	MATZIM LA TAB 420MG/24.....	57
LUMACAFOR-IVACAFOR TAB 200-125		MACRODANTIN CAP 100MG.....	23	MAVACAMTEN CAP 2.5 MG.....	60
MG.....	66	MAFENIDE ACE PAK 5%.....	23	MAVACAMTEN CAP 5 MG.....	60
LUMAKRAS TAB 120MG.....	38	MAFENIDE ACETATE CREAM 85 MG/GM.....	24	MAVACAMTEN CAP 10 MG.....	60
LUMAKRAS TAB 240MG.....	38	MAFENIDE ACETATE PACKET FOR		MAVACAMTEN CAP 15 MG.....	60
LUMAKRAS TAB 320MG.....	38	TOPICAL SOLN 5% (50 GM).....	23	MAVENCLAD PAK 10MG(4).....	171
LUMATEPERONE TOSYLATE CAP 10.5 MG.....	7	MAG CITRATE SOL CHERRY.....	139	MAVENCLAD PAK 10MG(5).....	171
LUMATEPERONE TOSYLATE CAP 21 MG.....	7	MAG CITRATE SOL GRAPE.....	139	MAVENCLAD PAK 10MG(6).....	171
LUMATEPERONE TOSYLATE CAP 42 MG.....	7	MAG CITRATE SOL LEMON.....	139	MAVENCLAD PAK 10MG(7).....	171
LUMIGAN SOL 0.01% OP.....	179	MAGNESIUM CAP 100 MG.....	88	MAVENCLAD PAK 10MG(8).....	171
LUMRYZ PAK 6GM.....	198	MAGNESIUM CITRATE SOLN.....	138	MAVENCLAD PAK 10MG(9).....	171
LUMRYZ PAK 7.5GM.....	198	MAGNESIUM CITRATE SOLN.....	139	MAVENCLAD PAK 10MG(10).....	171
LUMRYZ PAK 9GM.....	198	MAGNESIUM CITRATE SOLN.....	139	MAVORIXAFOR CAP 100 MG.....	54
LUMRYZ PAK STARTER.....	198	MAGNESIUM CITRATE SOLN.....	139	MAVYRET PAK 50-20MG.....	15
LUMRYZ PKG 4.5GM.....	198	MAGNESIUM CITRATE SOLN.....	139	MAVYRET TAB 100-40MG.....	15
LURASIDONE HCL TAB 20 MG.....	7	MAGNESIUM CITRATE SOLN.....	139	MAXICOMFORT MIS 27GX1/2.....	155
LURASIDONE HCL TAB 40 MG.....	7	MAGNESIUM CITRATE SOLN.....	139	MAXICOMFORT MIS 27GX1/2".....	155
LURASIDONE HCL TAB 60 MG.....	7	MAGNESIUM GLYCINATE (BULK) POWDER	155	MAXICOMFORT MIS 31GX1/4".....	155
LURASIDONE HCL TAB 80 MG.....	7	MAGNESIUM GLYCINATE (BULK) POWDER	155	MAXIDEX SUS 0.1% OP.....	177
LURASIDONE HCL TAB 120 MG.....	7	MAGNESIUM HYDROXIDE SUSP 400		MAXITROL OIN 0.1% OP.....	177
LURASIDONE TAB 20MG.....	7	MG/5ML.....	108	MAXITROL SUS 0.1% OP.....	177
LURASIDONE TAB 40MG.....	7	MAGNESIUM PL CAP 200MG.....	88	MAXI-TUSS AC SOL.....	194
LURASIDONE TAB 60MG.....	7	MAGNESIUM POW BISGLYCI.....	155	MAXPRO-18G LIQ.....	155
LURASIDONE TAB 80MG.....	7	MAGNESIUM POW GLYCINAT.....	155	MAXZIDE-25 TAB.....	62
LURASIDONE TAB 120MG.....	7	MALARONE TAB 62.5-25.....	41	MAXZIDE TAB 75-50.....	62
LURBIPR TAB 100MG.....	174	MALARONE TAB 250-100.....	41	MAYZENT PAK STARTER.....	171
LURBIRO TAB 100MG.....	174	MALATHION LOT 0.5%.....	186	MAYZENT PAK STARTER.....	172
LUSUTROMBOPAG TAB 3 MG.....	53	MALATHION LOTION 0.5%.....	186	MAYZENT TAB 0.25MG.....	172
LUTERA TAB.....	101	MALATHION LOTION 0.5%.....	186	MAYZENT TAB 1MG.....	172
LYLEQ TAB 0.35MG.....	189	MALTOCARB POW.....	215	MAYZENT TAB 2MG.....	172
LYLLANA DIS 0.1MG.....	101	MARALIXIBAT CHLORIDE TAB 10 MG.....	108	MCT PRO-CAL PAK.....	88
LYLLANA DIS 0.05MG.....	101	MARALIXIBAT CHLORIDE TAB 15 MG.....	108	MEASLES-MUMPS-RUBELLA-VARICELLA	
LYLLANA DIS 0.025MG.....	101	MARALIXIBAT CHLORIDE TAB 20 MG.....	108	VIRUS VACCINES FOR SUSP.....	211
LYLLANA DIS 0.075MG.....	101	MARALIXIBAT CHLORIDE TAB 30 MG.....	108	MEASLES-MUMPS-RUBELLA VIRUS	
LYLLANA DIS 0.0375MG.....	101	MARAVIROC ORAL SOLN 20 MG/ML.....	18	VACCINES FOR INJ SOLN.....	210
LYNPARZA TAB 100MG.....	168	MARAVIROC TAB 25 MG.....	18	MEASLES-MUMPS-RUBELLA VIRUS	
LYNPARZA TAB 150MG.....	168	MARAVIROC TAB 75 MG.....	19	VACCINES FOR SUBCUTANEOUS SUSP.....	211
LYRICA SOL 20MG/ML.....	105	MARAVIROC TAB 150 MG.....	18	MEBENDAZOLE CHEW TAB 100 MG.....	14
LYSINE HCL TAB 500 MG.....	154	MARAVIROC TAB 150 MG.....	18	MECAMYLAMINE HCL TAB 2.5 MG.....	63
LYSINE HCL TAB 500 MG.....	160	MARAVIROC TAB 150MG.....	18	MECASERMIN INJ 40 MG/4ML (10 MG/	
LYSINE HCL TAB 1000 MG.....	155	MARAVIROC TAB 300 MG.....	18	ML).....	126
LYSINE HCL TAB 1000 MG.....	160	MARAVIROC TAB 300 MG.....	18	MECHLORETHAMINE HCL GEL 0.016%	
LYSINE TAB 500 MG.....	88	MARAVIROC TAB 300MG.....	18	(BASE EQUIVALENT).....	10
LYSINE TAB 1000MG.....	155	MARIBAVIR TAB 200 MG.....	15	MECLOFENAMATE SODIUM CAP 50 MG.....	174
LYSODREN TAB 500MG.....	130	MARLISSA TAB 0.15/30.....	101	MECLOFENAMATE SODIUM CAP 100 MG.....	174

MECLOFEN SOD CAP 50MG.....	174	MELOXICAM TAB 7.5MG.....	174	MEPERIDINE TAB 50MG.....	183
MECLOFEN SOD CAP 100MG.....	174	MELOXICAM TAB 15 MG.....	174	MEPOLIZUMAB SUBCUTANEOUS	
MEDISENSE LIQ GLUC-KET.....	77	MELOXICAM TAB 15MG.....	174	SOLUTION AUTO-INJECTOR 100 MG/ML...	20
MEDROL TAB 2MG.....	124	MELPHALAN HCL FOR INTRA-ARTERIAL		MEPOLIZUMAB SUBCUTANEOUS	
MEDROL TAB 4MG.....	124	SOLN 50 MG (BASE EQUIV).....	9	SOLUTION PREF SYRINGE 40 MG/0.4ML...	20
MEDROL TAB 4MG.....	124	MELPHALAN HCL FOR INTRA-ARTERIAL		MEPOLIZUMAB SUBCUTANEOUS	
MEDROL TAB 8MG.....	124	SOLN 50 MG (BASE EQUIV).....	9	SOLUTION PREF SYRINGE 100 MG/ML.....	20
MEDROL TAB 16MG.....	124	MELPHALAN TAB 2 MG.....	9	MEPROBAMATE TAB 200 MG.....	43
MEDROXYPR AC INJ 150MG/ML.....	189	MELPHALAN TAB 2MG.....	9	MEPROBAMATE TAB 200MG.....	43
MEDROXYPR AC INJ 150MG/ML.....	189	MEMANTINE HC CAP 7MG ER.....	172	MEPROBAMATE TAB 400 MG.....	43
MEDROXYPR AC TAB 2.5MG.....	189	MEMANTINE HC CAP 14MG ER.....	172	MEPROBAMATE TAB 400MG.....	43
MEDROXYPR AC TAB 5MG.....	189	MEMANTINE HC CAP 21MG ER.....	172	MERCAPTOPURINE (BULK) POWDER.....	155
MEDROXYPR AC TAB 10MG.....	189	MEMANTINE HC CAP 28MG ER.....	172	MERCAPTOPURINE MONOHYDRATE	
MEDROXYPROGESTERONE ACETATE IM		MEMANTINE HCL CAP ER 24HR 7 MG.....	172	(BULK) POWDER.....	155
SUSP 150 MG/ML.....	188	MEMANTINE HCL CAP ER 24HR 14 MG.....	172	MERCAPTOPURINE MONOHYDRATE	
MEDROXYPROGESTERONE ACETATE IM		MEMANTINE HCL CAP ER 24HR 21 MG.....	172	(BULK) POWDER.....	155
SUSP 150 MG/ML.....	189	MEMANTINE HCL CAP ER 24HR 28 MG.....	172	MERCAPTOPURINE SUSP 2000	
MEDROXYPROGESTERONE ACETATE IM		MEMANTINE HCL ORAL SOLUTION 2		MG/100ML (20 MG/ML).....	37
SUSP PREFILLED SYR 150 MG/ML.....	188	MG/ML.....	172	MERCAPTOPURINE SUSP 2000	
MEDROXYPROGESTERONE ACETATE IM		MEMANTINE HCL ORAL SOLUTION 2		MG/100ML (20 MG/ML).....	37
SUSP PREFILLED SYR 150 MG/ML.....	189	MG/ML.....	172	MERCAPTOPURINE TAB 50 MG.....	37
MEDROXYPROGESTERONE ACETATE		MEMANTINE HCL TAB 5 MG.....	172	MERCAPTOPURI POW.....	155
SUSP PREF SYR 104 MG/0.65ML.....	188	MEMANTINE HCL TAB 10 MG.....	172	MERCAPTOPURI POW.....	155
MEDROXYPROGESTERONE ACETATE TAB		MEMANTINE HCL TAB 28 X 5 MG & 21 X 10		MERCAPTOPURI POW MONOHYDR.....	155
2.5 MG.....	189	MG TITRATION PACK.....	172	MERCAPTOPURI SUS 20MG/ML.....	37
MEDROXYPROGESTERONE ACETATE TAB		MEMANTINE HC SOL 2MG/ML.....	172	MERCAPTOPUR TAB 50MG.....	37
2.5 MG.....	189	MEMANTINE SOL 2MG/ML.....	172	MESALAMINE CAP 400MG DR.....	11
MEDROXYPROGESTERONE ACETATE TAB		MEMANTINE TAB HCL 5MG.....	172	MESALAMINE CAP DR 400 MG.....	11
5 MG.....	189	MEMANTINE TAB HCL 10MG.....	172	MESALAMINE CAP ER 24HR 0.375 GM.....	11
MEDROXYPROGESTERONE ACETATE TAB		MEMANT TITRA PAK 5-10MG.....	172	MESALAMINE ENE 4GM.....	11
5 MG.....	189	ME/NAPHOS/MB TAB HYO 1.....	111	MESALAMINE ENEMA 4 GM.....	11
MEDROXYPROGESTERONE ACETATE TAB		MENEST TAB 0.3MG.....	101	MESALAMINE KIT 4GM.....	11
10 MG.....	189	MENEST TAB 0.625MG.....	101	*MESALAMINE RECTAL ENEMA 4 GM &	
MEDROXYPROGESTERONE ACETATE TAB		MENEST TAB 1.25MG.....	101	CLEANSER WIPE KIT**.....	11
10 MG.....	189	MENEST TAB 2.5MG.....	101	MESALAMINE SUP 1000MG.....	11
MEFENAM ACID CAP 250MG.....	174	MENINGOCOCCAL ACWY (OLIGO		MESALAMINE SUPPOS 1000 MG.....	11
MEFENAMIC ACID CAP 250 MG.....	174	CONJ)-MENING B (RCMB) VACC FOR INJ .	211	MESALAMINE TAB 1.2GM.....	11
MEFLOQUINE HCL TAB 250 MG.....	41	MENINGOCOCCAL (A, C, Y, AND W-135)		MESALAMINE TAB DELAYED RELEASE 1.2	
MEFLOQUINE TAB 250MG.....	41	OLIGO CONJ VAC FOR INJ.....	210	GM.....	11
MEGESTROL ACETATE SUSP 40 MG/ML.....	189	MENINGOCOCCAL (A, C, Y, AND W-135)		MESNA TAB 400 MG.....	207
MEGESTROL ACETATE SUSP 625 MG/5ML.....	189	OLIGO CONJ VAC IM SOLN.....	210	MESNA TAB 400 MG.....	207
MEGESTROL ACETATE TAB 20 MG.....	189	MENINGOCOCCAL (A, C, Y, AND W-135)		MESNA TAB 400MG.....	207
MEGESTROL ACETATE TAB 40 MG.....	189	TETANUS CONJUGATE VACCINE.....	210	MESNEX TAB 400MG.....	207
MEGESTROL AC SUS 40MG/ML.....	189	MENINGOCOCCAL ACYW (TET CONJ)-		MESTINON SOL 60MG/5ML.....	186
MEGESTROL AC TAB 20MG.....	189	MENING B (RCMB) VACC FOR INJ.....	211	METFORMIN HCL ORAL SOLN 500 MG/5ML	30
MEGESTROL AC TAB 40MG.....	189	MENINGOCOCCAL GROUP B VAC		METFORMIN HCL TAB 500 MG.....	30
MEGESTROL SUS 625MG/5M.....	189	(RECOMB) IM SUSP PREFILLED SYR.....	212	METFORMIN HCL TAB 850 MG.....	30
MEKINIST SOL 0.05/ML.....	168	MENINGOCOCCAL VAC B (RECOMB OMV		METFORMIN HCL TAB 1000 MG.....	30
MEKINIST TAB 0.5MG.....	168	ADJUV) INJ PREFILLED SYRINGE.....	209	METFORMIN HCL TAB ER 24HR 500 MG.....	30
MEKINIST TAB 2MG.....	168	MENOSTAR DIS 14MCG.....	101	METFORMIN HCL TAB ER 24HR 750 MG.....	30
MELATOL PEDI LIQ 1MG/ML.....	155	MENQUADFI INJ.....	210	METFORMIN SOL 500/5ML.....	30
MELATONIN LIQUID 1 MG/ML.....	155	MENVEO INJ.....	210	METFORMIN TAB 500MG.....	30
MELEYA TAB 0.35MG.....	189	MENVEO SOL.....	210	METFORMIN TAB 500MG ER.....	30
MELOXICAM SUS 7.5/5ML.....	174	MEPERIDINE HCL ORAL SOLN 50 MG/5ML	183	METFORMIN TAB 750MG ER.....	30
MELOXICAM SUSP 7.5 MG/5ML.....	174	MEPERIDINE HCL TAB 50 MG.....	183	METFORMIN TAB 850MG.....	30
MELOXICAM TAB 7.5 MG.....	174	MEPERIDINE SOL 50MG/5ML.....	183	METFORMIN TAB 1000MG.....	30

METHADONE CON 10MG/ML	181	METHOCARBAMOL TAB 500 MG	197	METHOTREXATE SOLN PF AUTO- INJECTOR 25 MG/0.5ML	133
METHADONE HCL CONC 10 MG/ML	181	METHOCARBAMOL TAB 750 MG	197	METHOTREXATE SOLN PF AUTO- INJECTOR 30 MG/0.6ML	133
METHADONE HCL CONC 10 MG/ML	181	METHOCARBAMOL TAB 1000 MG	197	METHOTREXATE TAB 2.5MG	132
METHADONE HCL CONC 10 MG/ML	181	METHOCARBAM TAB 500MG	197	METHOXSALEN CAP 10MG	70
METHADONE HCL SOLN 5 MG/5ML	181	METHOCARBAM TAB 750MG	197	METHOXSALEN RAPID CAP 10 MG	70
METHADONE HCL SOLN 10 MG/5ML	181	METHOTREXATE INJ 1GM	132	METHSCOPOLAMINE BROMIDE TAB 2.5 MG	41
METHADONE HCL TAB 5 MG	181	METHOTREXATE INJ 1GM/40ML	132	METHSCOPOLAMINE BROMIDE TAB 5 MG	42
METHADONE HCL TAB 10 MG	181	METHOTREXATE INJ 25MG/ML	132	METHSCOPOLAM TAB 2.5MG	41
METHADONE HCL TAB FOR ORAL SUSP 40 MG	181	METHOTREXATE INJ 25MG/ML	132	METHSCOPOLAM TAB 5MG	42
METHADONE HCL TAB FOR ORAL SUSP 40 MG	181	METHOTREXATE INJ 50MG/2ML	132	METHSUXIMIDE CAP 300 MG	59
METHADONE SOL 5MG/5ML	181	METHOTREXATE INJ 50MG/2ML	132	METHSUXIMIDE CAP 300 MG	59
METHADONE SOL 10MG/5ML	181	METHOTREXATE INJ 250/10ML	132	METHSUXIMIDE CAP 300MG	59
METHADONE TAB 5MG	181	METHOTREXATE ORAL SOLN 2.5 MG/ML	134	METHYLDOPA TAB 250 MG	10
METHADONE TAB 10MG	181	METHOTREXATE ORAL SOLN 2 MG/ML	132	METHYLDOPA TAB 250MG	10
METHADONE TAB 40MG	181	METHOTREXATE POW.	155	METHYLDOPA TAB 500 MG	10
METHADOSE CON 10MG/ML	181	METHOTREXATE POWDER	155	METHYLDOPA TAB 500MG	10
METHADOSE SF CON 10MG/ML	181	METHOTREXATE SODIUM FOR INJ 1 GM	132	METHYLERGONOVINE MALEATE TAB 0.2 MG	155
METHADOSE TAB 40MG	181	METHOTREXATE SODIUM INJ 50 MG/2ML (25 MG/ML)	132	METHYLERGONOVINE MALEATE TAB 0.2 MG	155
METHAMPHETAMINE HCL TAB 5 MG	45	METHOTREXATE SODIUM INJ 50 MG/2ML (25 MG/ML)	132	METHYLERGON TAB 0.2MG	155
METHAMPHETAM TAB 5MG	45	METHOTREXATE SODIUM INJ 250 MG/10ML (25 MG/ML)	132	METHYLNALTREXONE BROMIDE INJ 12 MG/0.6ML (20 MG/ML)	108
METHAZOLAMIDE TAB 25 MG	179	METHOTREXATE SODIUM INJ 50 MG/2ML (25 MG/ML)	132	METHYLNALTREXONE BROMIDE SOLN PREF SYR 8 MG/0.4ML	108
METHAZOLAMIDE TAB 50 MG	179	METHOTREXATE SODIUM INJ PF 50 MG/2ML (25 MG/ML)	132	METHYLNALTREXONE BROMIDE SOLN PREF SYR 12 MG/0.6ML	108
METHAZOLAMID TAB 25MG	179	METHOTREXATE SODIUM INJ PF 250 MG/10ML (25 MG/ML)	132	METHYLPHENIDATE HCL CAP DELAYED ER 24HR 20 MG (PM)	46
METHAZOLAMID TAB 50MG	179	METHOTREXATE SODIUM INJ PF 1000 MG/40ML (25 MG/ML)	132	METHYLPHENIDATE HCL CAP DELAYED ER 24HR 40 MG (PM)	46
METHENAM HIP TAB 1GM	23	METHOTREXATE SODIUM INJ PF 250 MG/10ML (25 MG/ML)	132	METHYLPHENIDATE HCL CAP DELAYED ER 24HR 60 MG (PM)	46
METHENAMINE HIPPURATE TAB 1 GM	23	METHOTREXATE SODIUM INJ PF 1000 MG/40ML (25 MG/ML)	132	METHYLPHENIDATE HCL CAP DELAYED ER 24HR 80 MG (PM)	46
METHENAMINE HIPPURATE TAB 1 GM	23	METHOTREXATE SODIUM INJ PF 1000 MG/40ML (25 MG/ML)	132	METHYLPHENIDATE HCL CAP DELAYED ER 24HR 100 MG (PM)	46
*METHENAMINE-HYOSCAMINE-METH BLUE-SOD PHOS TAB 81.6 MG***	111	METHOTREXATE SODIUM TAB 2.5 MG (BASE EQUIV)	132	METHYLPHENIDATE HCL CAP ER 10 MG (CD)	46
*METHENAMINE-HYOSCAMINE-METH BLUE-SOD PHOS TAB 81.6 MG***	112	METHOTREXATE SODIUM TAB 5 MG (BASE EQUIV)	134	METHYLPHENIDATE HCL CAP ER 20 MG (CD)	46
*METHENAMINE-HYOSC-METH BLUE- SOD PHOS-PHEN SAL TAB 81 MG***	112	METHOTREXATE SODIUM TAB 7.5 MG (BASE EQUIV)	134	METHYLPHENIDATE HCL CAP ER 24HR 10 MG (LA)	46
*METHENAMINE-HYOSC-METH BLUE- SOD PHOS-PHEN SAL TAB 81 MG***	112	METHOTREXATE SODIUM TAB 10 MG (BASE EQUIV)	134	METHYLPHENIDATE HCL CAP ER 24HR 20 MG (LA)	46
*METHENAMINE-HYOSC-METH BLUE- SOD PHOS-PHEN SAL TAB 81 MG***	112	METHOTREXATE SODIUM TAB 15 MG (BASE EQUIV)	134	METHYLPHENIDATE HCL CAP ER 24HR 30 MG (LA)	46
*METHENAMINE-HYOSC-METH BLUE- SOD PHOS-PHEN SAL TAB 120 MG***	112	METHOTREXATE SOLN PF AUTO- INJECTOR 7.5 MG/0.15ML	133	METHYLPHENIDATE HCL CAP ER 24HR 40 MG (LA)	46
*METHENAMINE-HYOS-METH BLUE-SOD PHOS-PHEN SAL TAB 81.6 MG***	112	METHOTREXATE SOLN PF AUTO- INJECTOR 10 MG/0.2ML	133	METHYLPHENIDATE HCL CAP ER 24HR 60 MG (LA)	46
METHENAMINE MANDELATE TAB 0.5 GM	24	METHOTREXATE SOLN PF AUTO- INJECTOR 12.5 MG/0.25ML	133	METHYLPHENIDATE HCL CAP ER 30 MG (CD)	46
METHENAMINE MANDELATE TAB 1 GM	23	METHOTREXATE SOLN PF AUTO- INJECTOR 15 MG/0.3ML	133		
METHENAM MAN TAB 500MG	24	METHOTREXATE SOLN PF AUTO- INJECTOR 17.5 MG/0.35ML	133		
METHENAM MAN TAB 1000MG	23	METHOTREXATE SOLN PF AUTO- INJECTOR 20 MG/0.4ML	133		
METHERGINE TAB 0.2MG	155	METHOTREXATE SOLN PF AUTO- INJECTOR 22.5 MG/0.45ML	133		
METHIMAZOLE TAB 5 MG	42				
METHIMAZOLE TAB 5MG	42				
METHIMAZOLE TAB 10 MG	42				
METHIMAZOLE TAB 10MG	42				
METHIONINE CAP 200MG	215				
METHIONINE ORAL PACKET 100 MG	155				
METHIONINE POW.	155				
METHITEST TAB 10MG	12				

METHYLPHENIDATE HCL CAP ER 40 MG (CD).....	46	METHYLPREDNISOLONE TAB 16 MG	124	METOPROLOL SUCC CAP ER 24HR SPRINKLE 200 MG (TARTRATE EQUIV)	49
METHYLPHENIDATE HCL CAP ER 50 MG (CD).....	46	METHYLPREDNISOLONE TAB 16 MG	124	METOPROLOL SUCCINATE TAB ER 24HR 25 MG (TARTRATE EQUIV)	49
METHYLPHENIDATE HCL CAP ER 60 MG (CD).....	46	METHYLPREDNISOLONE TAB 32 MG	124	METOPROLOL SUCCINATE TAB ER 24HR 50 MG (TARTRATE EQUIV)	49
METHYLPHENIDATE HCL CHEW TAB 2.5 MG ..	46	METHYLPREDNISOLONE TAB THERAPY PACK 4 MG (21)	124	METOPROLOL SUCCINATE TAB ER 24HR 100 MG (TARTRATE EQUIV).....	49
METHYLPHENIDATE HCL CHEW TAB 5 MG ..	46	METHYLPREDNISOLONE TAB THERAPY PACK 4 MG (21)	124	METOPROLOL SUCCINATE TAB ER 24HR 200 MG (TARTRATE EQUIV).....	49
METHYLPHENIDATE HCL CHEW TAB 10 MG ..	46	METHYLPRED POW ACETATE	155	METOPROLOL TARTRATE TAB 25 MG.....	49
METHYLPHENIDATE HCL SOLN 5 MG/5ML ..	46	METHYLPRED TAB 4MG	124	METOPROLOL TARTRATE TAB 50 MG	49
METHYLPHENIDATE HCL SOLN 10 MG/5ML ..	46	METHYLPRED TAB 4MG	124	METOPROLOL TARTRATE TAB 50 MG	50
METHYLPHENIDATE HCL TAB 5 MG	47	METHYLPRED TAB 8MG	124	METOPROLOL TARTRATE TAB 100 MG	49
METHYLPHENIDATE HCL TAB 10 MG	46	METHYLPRED TAB 16MG	124	METOPROLOL TARTRATE TAB 100 MG	49
METHYLPHENIDATE HCL TAB 20 MG	46	METHYLPRED TAB 32MG	124	METOPROLOL SUC TAB 25MG ER	49
METHYLPHENIDATE HCL TAB ER 10 MG	46	METHYL SALIC LIQ	70	METOPROLOL SUC TAB 50MG ER	49
METHYLPHENIDATE HCL TAB ER 20 MG	46	*METHYL SALICYLATE LIQUID**	70	METOPROLOL SUC TAB 100MG ER	49
METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 18 MG	46	METHYLTESTOS CAP 10MG	12	METOPROLOL SUC TAB 200MG ER	49
METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 27 MG	46	METHYLTESTOSTERONE CAP 10 MG	12	METOPROLOL TAR TAB 25MG	49
METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 36 MG	47	METHYLTESTOSTERONE ORAL TAB 10 MG ..	12	METOPROLOL TAR TAB 50MG	50
METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 54 MG	47	METOCLOPRAMIDE HCL SOLN 5 MG/5ML (10 MG/10ML) (BASE EQUIV)	32	METOPROLOL TAR TAB 100MG	49
METHYLPHENID CAP 10MG CD	46	METOCLOPRAMIDE HCL SOLN 5 MG/5ML (10 MG/10ML) (BASE EQUIV)	32	METRELEPTIN FOR SUBCUTANEOUS INJ 11.3 MG	108
METHYLPHENID CAP 10MG LA	46	METOCLOPRAMIDE HCL TAB 5 MG (BASE EQUIVALENT).....	32	METROCREAM CRE 0.75%	24
METHYLPHENID CAP 20MG CD	46	METOCLOPRAMIDE HCL TAB 5 MG (BASE EQUIVALENT).....	32	METROLOTION LOT 0.75%	24
METHYLPHENID CAP 20MG LA	46	METOCLOPRAMIDE HCL TAB 10 MG (BASE EQUIVALENT).....	32	METRONIDAZOL CAP 375MG	24
METHYLPHENID CAP 30MG CD	46	METOCLOPRAMIDE HCL TAB 10 MG (BASE EQUIVALENT).....	32	METRONIDAZOL CRE 0.75%	24
METHYLPHENID CAP 30MG LA	46	METOCLOPRAMIDE HCL TAB 10 MG (BASE EQUIVALENT).....	32	METRONIDAZOLE CAP 375 MG	24
METHYLPHENID CAP 40MG CD	46	METOCLOPRAM SOL 5MG/5ML	32	METRONIDAZOLE CREAM 0.75%	24
METHYLPHENID CAP 40MG LA	46	METOCLOPRAM SOL 10/10ML	32	METRONIDAZOLE CREAM 0.75%	24
METHYLPHENID CAP 50MG CD	46	METOCLOPRAM TAB 5MG	32	METRONIDAZOLE GEL 0.75%	24
METHYLPHENID CAP 60MG CD	46	METOCLOPRAM TAB 10MG	32	METRONIDAZOLE LOTION 0.75%	24
METHYLPHENID CAP 60MG LA	46	METOLAZONE TAB 2.5 MG	81	METRONIDAZOLE LOTION 0.75%	24
METHYLPHENID CHW 2.5MG	46	METOLAZONE TAB 2.5MG	81	METRONIDAZOLE SUSP 500 MG/5ML	23
METHYLPHENID CHW 5MG	46	METOLAZONE TAB 5 MG	81	METRONIDAZOLE TAB 250 MG	24
METHYLPHENID CHW 10MG	46	METOLAZONE TAB 5MG	81	METRONIDAZOLE TAB 500 MG	24
METHYLPHENID SOL 5MG/5ML	46	METOLAZONE TAB 5MG	81	METRONIDAZOLE VAGINAL GEL 0.75%	24
METHYLPHENID SOL 10MG/5ML	46	METOLAZONE TAB 10 MG	81	METRONIDAZOLE VAGINAL GEL 0.75%	25
METHYLPHENID TAB 5MG	47	METOLAZONE TAB 10MG	81	METRONIDAZOL GEL 0.75%	24
METHYLPHENID TAB 10MG	46	METOPIRONONE CAP 250MG	155	METRONIDAZOL GEL 0.75%VAG	24
METHYLPHENID TAB 10MG ER	46	METOPRL/HCTZ TAB 50-25MG	62	METRONIDAZOL LOT 0.75%	24
METHYLPHENID TAB 18MG OSM	46	METOPRL/HCTZ TAB 100-25MG	62	METRONIDAZOL TAB 250MG	24
METHYLPHENID TAB 20MG	46	METOPRL/HCTZ TAB 100-50MG	62	METRONIDAZOL TAB 500MG	24
METHYLPHENID TAB 20MG ER	46	METOPROLOL & HYDROCHLOROTHIAZIDE TAB 50-25 MG ..	62	METYRAPONE CAP 250 MG	155
METHYLPHENID TAB 27MG OSM	46	METOPROLOL & HYDROCHLOROTHIAZIDE TAB 100-25 MG ..	62	METYROSINE CAP 250 MG	61
METHYLPHENID TAB 36MG OSM	47	METOPROLOL & HYDROCHLOROTHIAZIDE TAB 100-50 MG ..	62	METYROSINE CAP 250 MG	62
METHYLPHENID TAB 54MG OSM	47	METOPROLOL SUCC CAP ER 24HR SPRINKLE 25 MG (TARTRATE EQUIV)	49	METYROSINE CAP 250MG	62
METHYLPREDNISOLONE ACETATE POWDER	155	METOPROLOL SUCC CAP ER 24HR SPRINKLE 50 MG (TARTRATE EQUIV).....	49	MEXILETINE CAP 150MG	21
METHYLPREDNISOLONE TAB 2 MG	124	METOPROLOL SUCC CAP ER 24HR SPRINKLE 100 MG (TARTRATE EQUIV).....	49	MEXILETINE CAP 200MG	21
METHYLPREDNISOLONE TAB 4 MG	124			MEXILETINE CAP 250MG	22
METHYLPREDNISOLONE TAB 4 MG	124			MEXILETINE HCL CAP 150 MG	21
METHYLPREDNISOLONE TAB 8 MG	124			MEXILETINE HCL CAP 200 MG	21
METHYLPREDNISOLONE TAB 8 MG	124			MEXILETINE HCL CAP 250 MG	22
				MIACALCIN INJ 200/ML	142

MIACALCIN INJ 400/2ML	142	MILK OF MAGN SUS 1200/15.....	108	MIRIKIZUMAB-MRKZ SUBCUTANEOUS	
MIBELAS 24 CHW FE	101	MILNACIPRAN HCL TAB 12.5 MG.....	105	AUTO-INJ 100 MG/ML & 200MG/2ML.....	132
MICONAZOLE 3 SUP 200MG	34	MILNACIPRAN HCL TAB 12.5 MG (5) & 25		MIRIKIZUMAB-MRKZ SUBCUTANEOUS	
MICONAZOLE BUCCAL TAB 50 MG		MG (8) & 50 MG (42) PAK	105	PREF SYR 100 MG/ML & 200MG/2ML	132
(MOUTH-THROAT)	35	MILNACIPRAN HCL TAB 25 MG.....	106	MIRIKIZUMAB-MRKZ SUBCUTANEOUS	
MICONAZOLE NITRATE POWDER	155	MILNACIPRAN HCL TAB 50 MG	106	SOLN AUTO-INJECTOR 100 MG/ML	132
MICONAZOLE NITRATE VAGINAL		MILNACIPRAN HCL TAB 100 MG	105	MIRIKIZUMAB-MRKZ SUBCUTANEOUS	
SUPPOS 200 MG	34	MILTEFOSINE CAP 50 MG.....	40	SOL PREFILL SYRINGE 100 MG/ML.....	132
MICONAZOLE POW NITRATE	155	MIMVEY TAB 1-0.5MG.....	102	MIRTAZAPINE ORALLY DISINTEGRATING	
MICONAZOLE-ZINC OXIDE-WHITE		MINERAL OIL	138	TAB 15 MG	28
PETROLATUM OINT 0.25-15-81.35%.....	34	MINERAL OIL HEAVY	138	MIRTAZAPINE ORALLY DISINTEGRATING	
MICONAZOLE-ZINC OXIDE-WHITE		MINI LANCING MIS DEVICE	80	TAB 30 MG	28
PETROLATUM OINT 0.25-15-81.35%.....	35	MINIMED 630G MIS TRANSMIT.....	155	MIRTAZAPINE ORALLY DISINTEGRATING	
MICO-ZN-PETR OIN.....	34	MINIPRESS CAP 1MG	10	TAB 45 MG	28
MICROCHAMBER MIS.....	155	MINIPRESS CAP 2MG	10	MIRTAZAPINE TAB 7.5 MG.....	28
MICROGESTIN TAB 1.5/30	102	MINIPRESS CAP 5MG	10	MIRTAZAPINE TAB 7.5MG	28
MICROGESTIN TAB 1/20	102	MINOCYCLINE CAP 50MG	207	MIRTAZAPINE TAB 15 MG	28
MICROGESTIN TAB FE1.5/30	102	MINOCYCLINE CAP 75MG	207	MIRTAZAPINE TAB 15MG.....	28
MICROGESTIN TAB FE 1/20	102	MINOCYCLINE CAP 100MG.....	207	MIRTAZAPINE TAB 15MG ODT.....	28
MICROLET MIS LANCETS.....	77	MINOCYCLINE CAP 100MG.....	207	MIRTAZAPINE TAB 30 MG.....	28
MICROLET MIS NEXT	80	MINOCYCLINE HCL CAP 50 MG.....	207	MIRTAZAPINE TAB 30MG	28
MIDAZOLAM (BULK) POWDER.....	155	MINOCYCLINE HCL CAP 75 MG	207	MIRTAZAPINE TAB 30MG ODT	28
MIDAZOLAM HCL SYRUP 2 MG/ML (BASE		MINOCYCLINE HCL CAP 100 MG	207	MIRTAZAPINE TAB 45 MG	28
EQUIVALENT).....	48	MINOCYCLINE HCL TAB ER 24HR 45 MG ..	207	MIRTAZAPINE TAB 45MG	28
MIDAZOLAM NASAL SPRAY SOLN 5		MINOCYCLINE HCL TAB ER 24HR 55 MG ..	207	MIRTAZAPINE TAB 45MG ODT	28
MG/0.1 ML	27	MINOCYCLINE HCL TAB ER 24HR 65 MG ..	207	MIRVASO GEL 0.33%.....	71
MIDAZOLAM POW	155	MINOCYCLINE HCL TAB ER 24HR 80 MG ..	207	MISOPROSTOL TAB 100 MCG	190
MIDAZOLAM SYP 2MG/ML.....	48	MINOCYCLINE HCL TAB ER 24HR 90 MG ..	207	MISOPROSTOL TAB 100 MCG	190
MIDODRINE HCL TAB 2.5 MG	10	MINOCYCLINE HCL TAB ER 24HR 105 MG ..	207	MISOPROSTOL TAB 100MCG	190
MIDODRINE HCL TAB 5 MG	10	MINOCYCLINE HCL TAB ER 24HR 115 MG ..	207	MISOPROSTOL TAB 200 MCG.....	190
MIDODRINE HCL TAB 10 MG	10	MINOCYCLINE HCL TAB ER 24HR 135 MG ..	207	MISOPROSTOL TAB 200 MCG.....	190
MIDODRINE TAB 2.5MG	10	MINOCYCLINE TAB 45MG ER	207	MISOPROSTOL TAB 200MCG	190
MIDODRINE TAB 5MG.....	10	MINOCYCLINE TAB 55MG ER	207	MITAPIVAT SULFATE TAB 5 MG.....	120
MIDODRINE TAB 10MG	10	MINOCYCLINE TAB 65MG ER	207	MITAPIVAT SULFATE TAB 20 MG	120
MIDOSTAURIN CAP 25 MG	169	MINOCYCLINE TAB 80MG ER	207	MITAPIVAT SULFATE TAB 50 MG	120
MIEBO DRO 1.3GM/ML	175	MINOCYCLINE TAB 90MG ER	207	MITAPIVAT SULFATE TAB THERAPY PACK	
MIFEPREX TAB 200MG.....	88	MINOCYCLINE TAB 105MG ER	207	5 MG	120
MIFEPRISTONE TAB 200 MG	88	MINOCYCLINE TAB 115MG ER	207	MITAPIVAT SULFATE TAB THERAPY PACK	
MIFEPRISTONE TAB 200 MG	88	MINOCYCLINE TAB 135MG ER	207	7 X 20 MG & 7 X 5 MG	120
MIFEPRISTONE TAB 200MG	88	MINOXIDIL TAB 2.5 MG	212	MITAPIVAT SULFATE TAB THERAPY PACK	
MIFEPRISTONE TAB 300 MG.....	127	MINOXIDIL TAB 2.5MG.....	212	7 X 50 MG & 7 X 20 MG.....	120
MIFEPRISTONE TAB 300MG	127	MINOXIDIL TAB 10 MG.....	212	MITIGARE CAP 0.6MG	35
MIGALASTAT HCL CAP 123 MG (BASE		MINOXIDIL TAB 10MG	212	MITOMYCIN (BULK) POWDER	155
EQUIVALENT).....	109	MINZOYA TAB 0.1-20	102	MITOMYCIN FOR OPHTH SOLN KIT 0.2 MG	177
MIGERGOT SUP 2/100	94	MIPLYFFA CAP 47MG	155	MITOMYCIN POW.....	155
MIGLITOL TAB 25 MG.....	30	MIPLYFFA CAP 62MG	155	MITOSOL KIT 0.2MG.....	177
MIGLITOL TAB 25MG	30	MIPLYFFA CAP 93MG	155	MITOTANE TAB 500 MG.....	130
MIGLITOL TAB 50 MG.....	30	MIPLYFFA CAP 124MG	155	MMA/PA GEL PAK	88
MIGLITOL TAB 50MG	30	MIRABEGRON TAB 25MG ER	42	MMA/PA GEL POW	89
MIGLITOL TAB 100 MG.....	30	MIRABEGRON TAB 50MG ER	42	MM ASPIRIN TAB LOW DOSE.....	174
MIGLITOL TAB 100MG	30	MIRABEGRON TAB ER 24 HR 25 MG.....	42	MM CLEARLAX POW	138
MIGLUSTAT CAP 100 MG.....	109	MIRABEGRON TAB ER 24 HR 50 MG	42	MM LANCING MIS DEVICE.....	80
MIGLUSTAT CAP 100MG	109	MIRDAMETINIB CAP 1 MG	38	M-M-R II INJ.....	210
MIGLUSTAT (GAA DEFICIENCY) CAP 65		MIRDAMETINIB CAP 2 MG	38	MM TWIST MIS LANCETS	77
MG.....	109	MIRDAMETINIB TAB FOR ORAL SUSP 1 MG ..	38	M-NATAL PLUS TAB	215
MILI TAB 0.25/35	102			MNEXSPIKE INJ 2025-26	211

MOBILE LANCE MIS 30G.....	77	MORPHINE SUL CAP 60MG ER.....	181	MORPHINE SUL TAB 30MG ER.....	181
MODAFINIL TAB 100 MG.....	198	MORPHINE SUL CAP 60MG ER.....	181	MORPHINE SUL TAB 60MG ER.....	181
MODAFINIL TAB 100MG.....	198	MORPHINE SUL CAP 75MG ER.....	181	MORPHINE SUL TAB 100MG ER.....	181
MODAFINIL TAB 200 MG.....	198	MORPHINE SUL CAP 80MG ER.....	181	MORPHINE SUL TAB 200MG ER.....	181
MODAFINIL TAB 200MG.....	198	MORPHINE SUL CAP 90MG ER.....	181	MOTPOLY XR CAP 100MG.....	203
MOEXIPRIL HCL TAB 7.5 MG.....	14	MORPHINE SUL CAP 100MG ER.....	181	MOTPOLY XR CAP 150MG.....	203
MOEXIPRIL HCL TAB 15 MG.....	14	MORPHINE SUL CAP 120MG ER.....	181	MOTPOLY XR CAP 200MG.....	203
MOEXIPRIL TAB 7.5MG.....	14	MORPHINE SULFATE BEADS CAP ER 24HR		MOUNJARO INJ 2.5/0.5.....	30
MOEXIPRIL TAB 15MG.....	14	30 MG.....	181	MOUNJARO INJ 5MG/0.5.....	31
MOLINDONE HCL TAB 5 MG.....	6	MORPHINE SULFATE BEADS CAP ER 24HR		MOUNJARO INJ 7.5/0.5.....	31
MOLINDONE HCL TAB 10 MG.....	6	45 MG.....	181	MOUNJARO INJ 10MG/0.5.....	30
MOLINDONE HCL TAB 25 MG.....	6	MORPHINE SULFATE BEADS CAP ER 24HR		MOUNJARO INJ 12.5/0.5.....	30
MOLINDONE TAB HCL 5MG.....	6	60 MG.....	181	MOUNJARO INJ 15MG/0.5.....	30
MOLINDONE TAB HCL 10MG.....	6	MORPHINE SULFATE BEADS CAP ER 24HR		MOVIPREP SOL.....	139
MOLINDONE TAB HCL 25MG.....	6	75 MG.....	181	MOXIFLOXACIN HCL OPHTH SOLN 0.5%	
MOLNUPIRAVIR CAP 200 MG.....	43	MORPHINE SULFATE BEADS CAP ER 24HR		(BASE EQ) (2 TIMES DAILY).....	178
MOMELOTINIB DIHYDROCHLORIDE TAB		90 MG.....	181	MOXIFLOXACIN HCL OPHTH SOLN 0.5%	
100 MG.....	39	MORPHINE SULFATE BEADS CAP ER 24HR		(BASE EQUIV).....	178
MOMELOTINIB DIHYDROCHLORIDE TAB		120 MG.....	181	MOXIFLOXACIN HCL OPHTH SOLN 0.5%	
150 MG.....	39	MORPHINE SULFATE CAP ER 24HR 10 MG..	181	(BASE EQUIV).....	178
MOMELOTINIB DIHYDROCHLORIDE TAB		MORPHINE SULFATE CAP ER 24HR 20 MG..	181	MOXIFLOXACIN HCL TAB 400 MG (BASE	
200 MG.....	39	MORPHINE SULFATE CAP ER 24HR 30 MG..	181	EQUIV).....	193
MOMETASONE CRE 0.1%.....	124	MORPHINE SULFATE CAP ER 24HR 50 MG..	181	MOXIFLOXACIN SOL 0.5%.....	178
MOMETASONE FUROATE CREAM 0.1%.....	124	MORPHINE SULFATE CAP ER 24HR 60 MG..	181	MOXIFLOXACIN SOL 0.5%.....	178
MOMETASONE FUROATE NASAL SUSP 50		MORPHINE SULFATE CAP ER 24HR 80 MG..	181	MOXIFLOXACIN SOL HCL 0.5%.....	178
MCG/ACT.....	20	MORPHINE SULFATE CAP ER 24HR 100 MG	181	MOXIFLOXACIN TAB 400MG.....	193
MOMETASONE FUROATE OINT 0.1%.....	124	MORPHINE SULFATE ORAL SOLN 10		MOZOBIL INJ.....	53
MOMETASONE FUROATE SOLUTION 0.1%		MG/5ML.....	184	MSUD COOLER LIQ.....	89
(LOTION).....	124	MORPHINE SULFATE ORAL SOLN 20		MSUD COOLER LIQ.....	89
MOMETASONE OIN 0.1%.....	124	MG/5ML.....	184	MSUD GEL PAK UNFLAVOR.....	89
MOMETASONE SOL 0.1%.....	124	MORPHINE SULFATE ORAL SOLN 100		MUCOLOX LIQ.....	155
MOMETASONE SPR 50MCG.....	20	MG/5ML (20 MG/ML).....	184	MUCOSITISRX POW.....	67
MONO-LINYAH TAB 0.25-35.....	102	MORPHINE SULFATE ORAL SOLN 100		MULPLETA TAB 3MG.....	53
MONOMETHYL FUMARATE CAPSULE		MG/5ML (20 MG/ML).....	184	*MULTIPLE VITAMINS W/ MINERALS	
DELAYED RELEASE 95 MG.....	171	MORPHINE SULFATE SUPPOS 5 MG.....	184	CHEW TAB**.....	86
MONSELS FERR SOL SUBSULF.....	119	MORPHINE SULFATE SUPPOS 10 MG.....	184	MULTIVIT/FL CHW 0.5MG.....	215
MONTelukAST CHW 4MG.....	36	MORPHINE SULFATE SUPPOS 20 MG.....	184	MULTIVIT/FL CHW 0.25MG.....	215
MONTelukAST CHW 5MG.....	37	MORPHINE SULFATE SUPPOS 30 MG.....	184	MULTIVIT/FL CHW 0.25MG.....	215
MONTelukAST GRA 4MG.....	37	MORPHINE SULFATE TAB 15 MG.....	184	MULTIVIT/FL CHW 1MG.....	215
MONTelukAST SODIUM CHEW TAB 4 MG		MORPHINE SULFATE TAB 30 MG.....	184	MULTI-VIT/FL DRO 0.5MG/ML.....	215
(BASE EQUIV).....	36	MORPHINE SULFATE TAB ER 15 MG.....	181	MULTIVIT/FL DRO 0.25MG.....	215
MONTelukAST SODIUM CHEW TAB 5 MG		MORPHINE SULFATE TAB ER 30 MG.....	181	MULTI-VIT/FL DRO /FE 0.25.....	215
(BASE EQUIV).....	37	MORPHINE SULFATE TAB ER 60 MG.....	181	MUPIROCIN CALCIUM CREAM 2%.....	24
MONTelukAST SODIUM ORAL		MORPHINE SULFATE TAB ER 100 MG.....	181	MUPIROCIN CRE 2%.....	24
GRANULES PACKET 4 MG (BASE EQUIV) ...	37	MORPHINE SULFATE TAB ER 200 MG.....	181	MUPIROCIN OIN 2%.....	24
MONTelukAST SODIUM ORAL		MORPHINE SUL SOL 10MG/5ML.....	184	MUPIROCIN OINT 2%.....	24
GRANULES PACKET 4 MG (BASE EQUIV) ...	37	MORPHINE SUL SOL 20MG/5ML.....	184	MUSE SUP 250MCG.....	111
MONTelukAST SODIUM TAB 10 MG		MORPHINE SUL SOL 20MG/ML.....	184	MUSE SUP 500MCG.....	111
(BASE EQUIV).....	37	MORPHINE SUL SOL 100/5ML.....	184	MUSE SUP 1000MCG.....	111
MONTelukAST TAB 10MG.....	37	MORPHINE SUL SUP 5MG.....	184	MYALEPT INJ 11.3MG.....	108
MORPHINE SUL CAP 10MG ER.....	181	MORPHINE SUL SUP 10MG.....	184	MYAMBUTOL TAB 400MG.....	42
MORPHINE SUL CAP 20MG ER.....	181	MORPHINE SUL SUP 20MG.....	184	MY CHOICE TAB 1.5MG.....	189
MORPHINE SUL CAP 30MG ER.....	181	MORPHINE SUL SUP 30MG.....	184	MYCOPHENOLAT CAP 150MG.....	37
MORPHINE SUL CAP 30MG ER.....	181	MORPHINE SUL TAB 15MG.....	184	MYCOPHENOLAT CAP 250MG.....	132
MORPHINE SUL CAP 45MG ER.....	181	MORPHINE SUL TAB 15MG ER.....	181	MYCOPHENOLATE MOFETIL CAP 250 MG..	132
MORPHINE SUL CAP 50MG ER.....	181	MORPHINE SUL TAB 30MG.....	184		

MYCOPHENOLATE MOFETIL FOR ORAL SUSP 200 MG/ML	132	NALOXONE HCL NASAL SPRAY 4 MG/0.25ML	186	NATEGLINIDE TAB 60MG	31
MYCOPHENOLATE MOFETIL ORAL SUSP 200 MG/ML	132	NALOXONE HCL NASAL SPRAY 8 MG/0.1ML	185	NATEGLINIDE TAB 120 MG	31
MYCOPHENOLATE MOFETIL TAB 500 MG	132	NALOXONE HCL SOLN CARTRIDGE 0.4 MG/ML	185	NATEGLINIDE TAB 120MG	31
MYCOPHENOLATE SODIUM TAB DR 180 MG (MYCOPHENOLIC ACID EQUIV)	132	NALOXONE HCL SOLN PREFILLED SYRINGE 0.4 MG/ML	185	NATURA-LAX POW 3350 NF	138
MYCOPHENOLATE SODIUM TAB DR 360 MG (MYCOPHENOLIC ACID EQUIV)	132	NALOXONE HCL SOLN PREFILLED SYRINGE 2 MG/2ML	185	NAYZILAM SPR 5MG	27
MYCOPHENOLAT SUS 200MG/ML	132	NALOXONE HCL SOLN PREFILLED SYRINGE 2 MG/2ML	185	NEBIVOLOL HCL TAB 2.5 MG (BASE EQUIVALENT)	50
MYCOPHENOLAT TAB 500MG	132	NALOXONE HCL SOLN PREFILLED SYRINGE 5 MG/0.5ML	186	NEBIVOLOL HCL TAB 5 MG (BASE EQUIVALENT)	50
MYCOPHENOLIC TAB 180MG DR	132	NALOXONE HCL SPR 4MG	186	NEBIVOLOL HCL TAB 10 MG (BASE EQUIVALENT)	50
MYCOPHENOLIC TAB 360MG DR	132	NALOXONE INJ 0.4MG/ML	185	NEBIVOLOL HCL TAB 20 MG (BASE EQUIVALENT)	50
MYFEMBREE TAB	102	NALOXONE INJ 0.4MG/ML	185	NEBIVOLOL TAB 2.5MG	50
MYHIBBIN SUS 200MG/ML	132	NALOXONE INJ 0.4MG/ML	185	NEBIVOLOL TAB 5MG	50
MYLERAN TAB 2MG	10	NALOXONE INJ 4MG/10ML	185	NEBIVOLOL TAB 10MG	50
MY WAY TAB 1.5MG	189	NALOXONE SPR	185	NEBIVOLOL TAB 20MG	50
MYXREDLIN SOL 1UNIT/ML	137	NALOXONE SPR 4MG	185	NEBUSAL NEB 3%	194
NABUMETONE TAB 500 MG	174	NALTREXONE HCL TAB 50 MG	185	NECON TAB 0.5/35	102
NABUMETONE TAB 500MG	174	NALTREXONE TAB 50MG	185	NEDOCROMIL SODIUM OPHTH SOLN 2% ..	176
NABUMETONE TAB 750 MG	174	NAPROXEN DR TAB 375MG	174	NEDOSIRAN SODIUM SUBCUTANEOUS SOLN 80 MG/0.5ML	112
NABUMETONE TAB 750MG	174	NAPROXEN DR TAB 500MG	174	NEDOSIRAN SODIUM SUBCUTANEOUS SOLN PREF SYR 128 MG/0.8ML	112
NAC CAP 600MG	215	NAPROXEN SODIUM TAB 275 MG	175	NEDOSIRAN SODIUM SUBCUTANEOUS SOLN PREF SYR 160 MG/ML	112
NADOLOL TAB 20 MG	50	NAPROXEN SODIUM TAB 550 MG	175	NEEDL COLLEC MIS DISPOSAL	156
NADOLOL TAB 20MG	50	NAPROXEN SOD TAB 275MG	175	NEEDLE COLLE MIS DISPOSAL	156
NADOLOL TAB 40 MG	50	NAPROXEN SOD TAB 550MG	175	NEEDLE (DISP) 18 X 1"	136
NADOLOL TAB 40MG	50	NAPROXEN TAB 250 MG	174	NEEDLE (DISP) 18 X 1"	137
NADOLOL TAB 80 MG	50	NAPROXEN TAB 250MG	174	NEEDLE (DISP) 18 X 1"	137
NADOLOL TAB 80MG	50	NAPROXEN TAB 375 MG	174	NEEDLE (DISP) 18 X 1"	137
NAFARELIN ACETATE NASAL SOLN 2 MG/ ML (200 MCG/ACT) (BASE EQ)	130	NAPROXEN TAB 375MG	174	NEEDLE (DISP) 18 X 1-1/2"	136
NA FL/K NITR GEL 1.1-5%	67	NAPROXEN TAB 500 MG	174	NEEDLE (DISP) 18 X 1-1/2"	136
NALDEMEDINE TOSYLATE TAB 0.2 MG (BASE EQUIVALENT)	108	NAPROXEN TAB 500MG	174	NEEDLE (DISP) 18 X 1-1/2"	136
NALMEFENE HCL NASAL SPRAY 2.7 MG/0.1ML (BASE EQUIV)	186	NAPROXEN TAB EC 375 MG	173	NEEDLE (DISP) 18 X 1-1/2"	136
NALOXONE HCL INJ 0.4 MG/ML	185	NAPROXEN TAB EC 375 MG	173	NEEDLE (DISP) 18 X 1-1/2"	137
NALOXONE HCL INJ 0.4MG/ML	185	NAPROXEN TAB EC 375 MG	174	NEEDLE (DISP) 18 X 1-1/2"	137
NALOXONE HCL INJ 1MG/ML	185	NAPROXEN TAB EC 500 MG	173	NEEDLE (DISP) 19 X 1"	161
NALOXONE HCL INJ 2MG/2ML	185	NAPROXEN TAB EC 500 MG	173	NEEDLE (DISP) 19 X 1-1/2"	161
NALOXONE HCL INJ 4 MG/10ML	185	NAPROXEN TAB EC 500 MG	174	NEEDLE (DISP) 20 X 1"	151
NALOXONE HCL INJ 4 MG/10ML	185	NARATRIPTAN HCL TAB 1 MG (BASE EQUIV)	196	NEEDLE (DISP) 20 X 1"	159
NALOXONE HCL NASAL SPRAY 3 MG/0.1ML	186	NARATRIPTAN HCL TAB 2.5 MG (BASE EQUIV)	196	NEEDLE (DISP) 20 X 1"	161
NALOXONE HCL NASAL SPRAY 4 MG/0.1ML	185	NARATRIPTAN TAB 1MG	196	NEEDLE (DISP) 20 X 1-1/2"	161
NALOXONE HCL NASAL SPRAY 4 MG/0.1ML	185	NARATRIPTAN TAB 2.5MG	196	NEEDLE (DISP) 21 X 1"	147
NALOXONE HCL NASAL SPRAY 4 MG/0.1ML	185	NARCAN SPR 4MG	186	NEEDLE (DISP) 21 X 1"	159
NALOXONE HCL NASAL SPRAY 4 MG/0.1ML	185	NARDIL TAB 15MG	170	NEEDLE (DISP) 21 X 1"	161
NALOXONE HCL NASAL SPRAY 4 MG/0.1ML	185	NASCOBAL SPR 500MCG	215	NEEDLE (DISP) 21 X 1"	161
NALOXONE HCL NASAL SPRAY 4 MG/0.1ML	185	NATACHEW CHW	215	NEEDLE (DISP) 21 X 1-1/2"	147
NALOXONE HCL NASAL SPRAY 4 MG/0.1ML	186	NATACYN SUS 5% OP	179	NEEDLE (DISP) 21 X 1-1/2"	159
NALOXONE HCL NASAL SPRAY 4 MG/0.1ML	186	NATAL PNV TAB	215	NEEDLE (DISP) 21 X 1-1/2"	161
		NATAMYCIN OPHTH SUSP 5%	179	NEEDLE (DISP) 22 X 1"	151
		NATAZIA TAB	102	NEEDLE (DISP) 22 X 1"	159
		NATEGLINIDE TAB 60 MG	31	NEEDLE (DISP) 22 X 1"	161

NEEDLE (DISP) 22 X 1-1/2"	159	NEOMYCIN-BACITRAC ZN-POLYMYX	NEULASTA INJ 6MG/0.6M	53
NEEDLE (DISP) 22 X 1-1/2"	161	5(3.5)MG-400UNT-10000UNT OP OIN.....	NEUTEK 2TEK SOL CONTROL	77
NEEDLE (DISP) 23 X 1"	143	NEOMYCIN-BACITRAC ZN-POLYMYX	NEVANAC SUS 0.1% OP.....	177
NEEDLE (DISP) 23 X 1"	144	5(3.5)MG-400UNT-10000UNT OP OIN.....	NEVIRAPINE SUS 50MG/5ML.....	17
NEEDLE (DISP) 23 X 1"	151	NEOMYCIN-COLISTIN-HC-	NEVIRAPINE SUSP 50 MG/5ML	17
NEEDLE (DISP) 23 X 1"	159	THONZONIUM OTIC SUSP 3.3-3-10-0.5	NEVIRAPINE TAB 200 MG.....	17
NEEDLE (DISP) 23 X 1"	161	MG/ML.....	NEVIRAPINE TAB 200MG	17
NEEDLE (DISP) 23 X 1-1/2"	144	NEOMYCIN-POLYMY-GRAMICID OP SOL	NEVIRAPINE TAB 400MG ER.....	17
NEEDLE (DISP) 23 X 1-1/2"	144	1.75-10000-0.025MG-UNT-MG/ML	NEVIRAPINE TAB ER 24HR 400 MG.....	17
NEEDLE (DISP) 23 X 1-1/2"	151	NEOMYCIN-POLYMYXIN-	NEW DAY TAB 1.5MG	189
NEEDLE (DISP) 23 X 1-1/2"	159	DEXAMETHASONE OPHTH OINT 0.1%.....	NEXIUM GRA 2.5MG DR.....	190
NEEDLE (DISP) 23 X 1-1/2"	164	NEOMYCIN-POLYMYXIN-	NEXIUM GRA 5MG DR.....	190
NEEDLE (DISP) 25 X 1"	144	DEXAMETHASONE OPHTH OINT 0.1%.....	NEXIUM GRA 10MG DR.....	190
NEEDLE (DISP) 25 X 1"	147	NEOMYCIN-POLYMYXIN-	NEXIUM GRA 20MG DR	190
NEEDLE (DISP) 25 X 1"	151	DEXAMETHASONE OPHTH SUSP 0.1%	NEXIUM GRA 40MG DR	190
NEEDLE (DISP) 25 X 1"	158	NEOMYCIN-POLYMYXIN-	NEXLETOL TAB 180MG.....	84
NEEDLE (DISP) 25 X 1"	159	DEXAMETHASONE OPHTH SUSP 0.1%	NEXLIZET TAB 180/10MG.....	84
NEEDLE (DISP) 25 X 1"	161	NEOMYCIN-POLYMYXIN-HC OPHTH SUSP	NGENLA INJ 24/1.2ML.....	126
NEEDLE (DISP) 25 X 1"	164	NEOMYCIN-POLYMYXIN-HC OTIC SOLN	NGENLA INJ 60/1.2ML.....	126
NEEDLE (DISP) 25 X 1-1/2"	144	1%.....	NIACIN ER TAB 500MG.....	85
NEEDLE (DISP) 25 X 1-1/2"	148	NEOMYCIN-POLYMYXIN-HC OTIC SUSP	NIACIN ER TAB 500MG ER	85
NEEDLE (DISP) 25 X 1-1/2"	151	3.5 MG/ML-10000 UNIT/ML-1%.....	NIACIN ER TAB 750MG.....	85
NEEDLE (DISP) 25 X 1-1/2"	159	NEOMYCIN SULFATE TAB 500 MG.....	NIACIN ER TAB 1000MG	85
NEEDLE (DISP) 25 X 5/8".....	144	NEOMYCIN TAB 500MG.....	NIACIN TAB 500MG ER.....	85
NEEDLE (DISP) 25 X 5/8".....	144	NEONATAL 19 TAB.....	NIACIN TAB ER 500 MG	
NEEDLE (DISP) 25 X 5/8".....	151	NEONATAL/DHA MIS.....	(ANTIHYPERLIPIDEMIC)	85
NEEDLE (DISP) 25 X 5/8".....	159	NEONATAL FE TAB	NIACIN TAB ER 500 MG	
NEEDLE (DISP) 25 X 5/8".....	161	NEONATAL PLS TAB 27-1MG.....	(ANTIHYPERLIPIDEMIC)	85
NEEDLE (DISP) 27 X 1-1/2"	144	NEONATAL TAB COMPLETE.....	NIACIN TAB ER 500 MG	
NEEDLE (DISP) 27 X 1/2".....	144	NEONATAL TAB COMPLTE.....	(ANTIHYPERLIPIDEMIC)	85
NEEDLE (DISP) 27 X 1/2".....	159	NEONATAL TAB PLUS	NIACIN TAB ER 750 MG	
NEEDLE (DISP) 30 X 1"	144	NEO/POLY/BAC OIN /HC 1%OP	(ANTIHYPERLIPIDEMIC)	85
NEEDLE (DISP) 30 X 1/2".....	144	NEO-POLYCIN OIN HC 1%OP.....	NIACIN TAB ER 1000 MG	
NEEDLE (DISP) 30 X 1/2".....	159	NEO-POLYCIN OIN OP	(ANTIHYPERLIPIDEMIC)	85
NEFAZODONE HCL TAB 50 MG.....	205	NEO/POLY/DEX OIN 0.1% OP.....	NICARDIPINE CAP 20MG	57
NEFAZODONE HCL TAB 100 MG.....	205	NEO/POLY/DEX SUS 0.1% OP.....	NICARDIPINE CAP 30MG	57
NEFAZODONE HCL TAB 150 MG.....	205	NEO/POLY/GRA SOL OP	NICARDIPINE HCL CAP 20 MG.....	57
NEFAZODONE HCL TAB 200 MG.....	205	NEO/POLY/HC SOL 1% OTIC	NICARDIPINE HCL CAP 30 MG.....	57
NEFAZODONE HCL TAB 250 MG.....	205	NEO/POLY/HC SUS 1% OTIC	NICODERM CQ DIS 7MG/24HR.....	200
NEFAZODONE TAB 50MG	205	NEO/POLY/HC SUS OP.....	NICODERM CQ DIS 14MG/24H.....	200
NEFAZODONE TAB 100MG	205	NEOTUSS PLUS LIQ	NICODERM CQ DIS 21MG/24H.....	200
NEFAZODONE TAB 150MG	205	NEPAFENAC OPHTH SUSP 0.1%	NICORETTE GUM 2MG	200
NEFAZODONE TAB 200MG.....	205	NEPRO/CARB LIQ VANILLA.....	NICORETTE GUM 2MG CINN.....	200
NEFAZODONE TAB 250MG	205	NERATINIB MALEATE TAB 40 MG (BASE	NICORETTE GUM 2MG FRUIT	200
NEFFY SPR 1MG	55	EQUIVALENT).....	NICORETTE GUM 2MG MINT.....	200
NEFFY SPR 2MG.....	55	NERLYNX TAB 40MG	NICORETTE GUM 2MG ORIG.....	200
NELFINAVIR MESYLATE TAB 250 MG	19	NESTABS DHA PAK.....	NICORETTE GUM 4MG.....	200
NELFINAVIR MESYLATE TAB 625 MG	19	NESTABS ONE CAP.....	NICORETTE GUM 4MG CINN.....	200
NEMLUVIO INJ 30MG.....	71	NESTABS TAB	NICORETTE GUM 4MG FRUIT	200
NEMOLIZUMAB-ILTO FOR		NETARSUDIL DIMESYLATE-	NICORETTE GUM 4MG MINT.....	200
SUBCUTANEOUS AUTO-INJECTOR 30 MG ..	71	LATANOPROST OPHTH SOLN 0.02-0.005%	NICORETTE GUM 4MG ORIG.....	200
NEO/BAC/POLY OIN OP.....	176	NETARSUDIL DIMESYLATE OPHTH SOLN	NICORETTE LOZ 2MG	200
NEOCATE INFT POW DHA/ARA.....	215	0.02%	NICORETTE LOZ 2MG MINT.....	200
NEOCATE SYNE POW JUNIOR.....	215	NETUPITANT-PALONOSETRON CAP 300-	NICORETTE LOZ 4MG.....	200
		0.5 MG	NICORETTE LOZ 4MG MINT.....	201
		NEUAC GEL 1.2-5%.....		



NICOTINE TD PATCH 24HR 14 MG/24HR	201	NINLARO CAP 3MG	39	NITROFURANTOIN MACROCRYSTALLINE	
NICOTINE TD PATCH 24HR 14 MG/24HR	202	NINLARO CAP 4MG	39	CAP 25 MG	23
NICOTINE TD PATCH 24HR 14 MG/24HR	202	NIRAPARIB TOSYLATE-ABIRATERONE		NITROFURANTOIN MACROCRYSTALLINE	
NICOTINE TD PATCH 24HR 14 MG/24HR	202	ACETATE TAB 50-500 MG	37	CAP 25 MG	24
NICOTINE TD PATCH 24HR 21 MG/24HR	199	NIRAPARIB TOSYLATE-ABIRATERONE		NITROFURANTOIN MACROCRYSTALLINE	
NICOTINE TD PATCH 24HR 21 MG/24HR	199	ACETATE TAB 100-500 MG	37	CAP 50 MG	23
NICOTINE TD PATCH 24HR 21 MG/24HR	199	NIRMATRELVIR TAB 6 X 150 MG &		NITROFURANTOIN MACROCRYSTALLINE	
NICOTINE TD PATCH 24HR 21 MG/24HR	200	RITONAVIR TAB 5 X 100 MG PAK	43	CAP 50 MG	24
NICOTINE TD PATCH 24HR 21 MG/24HR	200	NIRMATRELVIR TAB 10 X 150 MG &		NITROFURANTOIN MACROCRYSTALLINE	
NICOTINE TD PATCH 24HR 21 MG/24HR	200	RITONAVIR TAB 10 X 100 MG PAK	43	CAP 100 MG	23
NICOTINE TD PATCH 24HR 21 MG/24HR	201	NIRMATRELVIR TAB 20 X 150 MG &		NITROFURANTOIN MACROCRYSTALLINE	
NICOTINE TD PATCH 24HR 21 MG/24HR	201	RITONAVIR TAB 10 X 100 MG PAK	43	CAP 100 MG	24
NICOTINE TD PATCH 24HR 21 MG/24HR	202	NIROGACESTAT HYDROBROMIDE TAB 50		NITROFURANTOIN MONOHYDRATE	
NICOTINE TD PATCH 24HR 21 MG/24HR	202	MG	39	MACROCRYSTALLINE CAP 100 MG	23
NICOTINE TD PATCH 24HR 21 MG/24HR	202	NIROGACESTAT HYDROBROMIDE TAB		NITROFURANTOIN MONOHYDRATE	
NICOTINE TD PATCH 24HR 21 MG/24HR	202	100 MG	39	MACROCRYSTALLINE CAP 100 MG	24
NICOTINE TD PATCH 24HR 21 MG/24HR	202	NIROGACESTAT HYDROBROMIDE TAB		NITROFURANTOIN SUSP 25 MG/5ML	156
NICOTINE TD PATCH 24 HR KIT 21-14-7		150 MG	39	NITROFUR MAC CAP 25MG	24
MG/24HR	201	NIRSEVIMAB-ALIP IM SOLN PREFILLED		NITROFUR MAC CAP 50MG	24
NICOTROL NS SPR 10MG/ML	202	SYRINGE 50 MG/0.5ML	135	NITROFUR MAC CAP 100MG	24
NIFEDIPINE CAP 10 MG	57	NIRSEVIMAB-ALIP IM SOLN PREFILLED		NITROGLYCER DIS 0.1MG/HR	213
NIFEDIPINE CAP 10MG	57	SYRINGE 100 MG/ML	135	NITROGLYCER DIS 0.2MG/HR	213
NIFEDIPINE CAP 20 MG	57	NISOLDIPINE TAB 8.5MG ER	58	NITROGLYCER DIS 0.4MG/HR	213
NIFEDIPINE CAP 20MG	57	NISOLDIPINE TAB 17MG ER	58	NITROGLYCER DIS 0.6MG/HR	213
NIFEDIPINE TAB 30MG ER	57	NISOLDIPINE TAB 20MG ER	58	NITROGLYCERIN CAP ER 2.5 MG	213
NIFEDIPINE TAB 30MG ER	58	NISOLDIPINE TAB 25.5MG	58	NITROGLYCERIN CAP ER 6.5 MG	213
NIFEDIPINE TAB 60MG ER	58	NISOLDIPINE TAB 30MG ER	58	NITROGLYCERIN CAP ER 9 MG	213
NIFEDIPINE TAB 60MG ER	58	NISOLDIPINE TAB 34MG ER	58	NITROGLYCERIN OINT 0.4%	213
NIFEDIPINE TAB 90MG ER	58	NISOLDIPINE TAB 40MG ER	58	NITROGLYCERIN OINT 2%	212
NIFEDIPINE TAB 90MG ER	58	NISOLDIPINE TAB ER 24HR 8.5 MG	58	NITROGLYCERIN SL TAB 0.3 MG	213
NIFEDIPINE TAB ER 24HR 30 MG	58	NISOLDIPINE TAB ER 24HR 8.5 MG	58	NITROGLYCERIN SL TAB 0.3 MG	213
NIFEDIPINE TAB ER 24HR 60 MG	58	NISOLDIPINE TAB ER 24HR 17 MG	58	NITROGLYCERIN SL TAB 0.4 MG	213
NIFEDIPINE TAB ER 24HR 90 MG	58	NISOLDIPINE TAB ER 24HR 17 MG	58	NITROGLYCERIN SL TAB 0.4 MG	213
NIFEDIPINE TAB ER 24HR OSMOTIC		NISOLDIPINE TAB ER 24HR 20 MG	58	NITROGLYCERIN SL TAB 0.6 MG	213
RELEASE 30 MG	57	NISOLDIPINE TAB ER 24HR 25.5 MG	58	NITROGLYCERIN SL TAB 0.6 MG	213
NIFEDIPINE TAB ER 24HR OSMOTIC		NISOLDIPINE TAB ER 24HR 30 MG	58	NITROGLYCERIN TD PATCH 24HR 0.1 MG/	
RELEASE 60 MG	58	NISOLDIPINE TAB ER 24HR 34 MG	58	HR	212
NIFEDIPINE TAB ER 24HR OSMOTIC		NISOLDIPINE TAB ER 24HR 34 MG	58	NITROGLYCERIN TD PATCH 24HR 0.1 MG/	
RELEASE 90 MG	58	NISOLDIPINE TAB ER 24HR 40 MG	58	HR	213
NIFURTIMOX TAB 30 MG	41	NITAZOXANIDE FOR SUSP 100 MG/5ML	40	NITROGLYCERIN TD PATCH 24HR 0.2	
NIFURTIMOX TAB 120 MG	41	NITAZOXANIDE TAB 500 MG	41	MG/HR	212
NILOTINB HCL CAP 50MG	168	NITAZOXANIDE TAB 500MG	41	NITROGLYCERIN TD PATCH 24HR 0.2	
NILOTINB HCL CAP 150MG	168	NITISINONE CAP 2 MG	109	MG/HR	213
NILOTINB HCL CAP 200MG	168	NITISINONE CAP 5 MG	109	NITROGLYCERIN TD PATCH 24HR 0.3	
NILOTINIB HCL CAP 50 MG (BASE		NITISINONE CAP 10 MG	109	MG/HR	212
EQUIVALENT)	168	NITISINONE CAP 20 MG	109	NITROGLYCERIN TD PATCH 24HR 0.4	
NILOTINIB HCL CAP 150 MG (BASE		NITISINONE SUSP 4 MG/ML	109	MG/HR	212
EQUIVALENT)	168	NITRO-BID OIN 2%	212	NITROGLYCERIN TD PATCH 24HR 0.4	
NILOTINIB HCL CAP 200 MG (BASE		NITRO-DUR DIS 0.1MG/HR	212	MG/HR	213
EQUIVALENT)	168	NITRO-DUR DIS 0.2MG/HR	212	NITROGLYCERIN TD PATCH 24HR 0.6	
NIMODIPINE CAP 30 MG	58	NITRO-DUR DIS 0.3MG/HR	212	MG/HR	213
NIMODIPINE CAP 30MG	58	NITRO-DUR DIS 0.4MG/HR	212	NITROGLYCERIN TD PATCH 24HR 0.6	
NIMODIPINE ORAL SOLN 6 MG/ML	58	NITRO-DUR DIS 0.6MG/HR	213	MG/HR	213
NIMODIPINE ORAL SOLN 60 MG/20ML		NITRO-DUR DIS 0.8MG/HR	213	NITROGLYCERIN TD PATCH 24HR 0.8	
(3 MG/ML)	58	NITROFURANTN CAP 100MG	24	MG/HR	213
NIMODIPINE SOL 60/20ML	58	NITROFURANTN SUS 25MG/5ML	156	NITROGLYCERIN OIN 0.4%	213
NINLARO CAP 2.3MG	38				

NITROGLYCERI SUB 0.6MG	213	NORETHINDRONE ACE-ETH ESTRADIOL- FE CHEW TAB 1 MG-20 MCG (24)	99	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG	100
NITROGLYCERN SUB 0.3MG	213	NORETHINDRONE ACE-ETH ESTRADIOL- FE CHEW TAB 1 MG-20 MCG (24)	101	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG	100
NITROGLYCERN SUB 0.4MG	213	NORETHINDRONE ACE-ETH ESTRADIOL- FE CHEW TAB 1 MG-20 MCG (24)	102	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG	101
NITROSTAT SUB 0.3MG	213	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	95	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG	102
NITROSTAT SUB 0.4MG	213	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	96	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG	102
NITROSTAT SUB 0.6MG	213	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	99	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG	102
NITRO-TIME CAP 2.5MG ER	213	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	99	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1 MG-20 MCG	95
NITRO-TIME CAP 6.5MG ER	213	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	100	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1 MG-20 MCG	100
NITRO-TIME CAP 9MG ER	213	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	100	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1 MG-20 MCG	101
NIVA-PLUS TAB	216	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	102	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1 MG-20 MCG	102
NIVA THYROID TAB 15MG	129	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	102	NORETHINDRONE ACETATE-ETHINYL ESTRADIOL TAB 0.5 MG-2.5 MCG	99
NIVA THYROID TAB 30MG	129	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	102	NORETHINDRONE ACETATE-ETHINYL ESTRADIOL TAB 0.5 MG-2.5 MCG	102
NIVA THYROID TAB 60MG	129	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	102	NORETHINDRONE ACETATE-ETHINYL ESTRADIOL TAB 1 MG-5 MCG	99
NIVA THYROID TAB 90MG	129	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	102	NORETHINDRONE ACETATE-ETHINYL ESTRADIOL TAB 1 MG-5 MCG	99
NIVA THYROID TAB 120MG	129	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	100	NORETHINDRONE ACETATE-ETHINYL ESTRADIOL TAB 1 MG-5 MCG	102
NIVESTYM INJ 300/0.5	53	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	100	NORETHINDRONE ACETATE-ETHINYL ESTRADIOL TAB 5 MG	188
NIVESTYM INJ 300MCG	53	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	100	NORETHINDRONE ACETATE-ETHINYL ESTRADIOL TAB 5 MG	189
NIVESTYM INJ 480/0.8	53	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	102	NORETHINDRONE AC-ETHINYL ESTRAD- FE TAB 1-20/1-30/1-35 MG-MCG	102
NIVESTYM INJ 480MCG	53	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	102	NORETHINDRONE AC-ETHINYL ESTRAD- FE TAB 1-20/1-30/1-35 MG-MCG	104
NOC DURNA SUB 27.7MCG	126	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	102	NORETHINDRONE AC-ETHINYL ESTRAD- FE TAB 1-20/1-30/1-35 MG-MCG	104
NOC DURNA SUB 55.3MCG	126	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	102	NORETHINDRONE AC-ETHINYL ESTRAD- FE TAB 1-20/1-30/1-35 MG-MCG	105
NOCLOT-50 SOL ACD-A	26	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	95	NORETHINDRONE-ETH ESTRADIOL TAB 0.5-35/0.75-35/1-35 MG-MCG	95
NONOXYNOL-9 FILM 28%	112	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	95	NORETHINDRONE-ETH ESTRADIOL TAB 0.5-35/0.75-35/1-35 MG-MCG	96
NONOXYNOL-9 GEL 3%	111	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	96	NORETHINDRONE-ETH ESTRADIOL TAB 0.5-35/0.75-35/1-35 MG-MCG	103
NONOXYNOL-9 GEL 4%	112	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	99	NORETHINDRONE-ETH ESTRADIOL TAB 0.5-35/0.75-35/1-35 MG-MCG	103
NONOXYNOL-9 VAGINAL SPONGE 1000 MG	112	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	99	NORETHINDRONE-ETH ESTRADIOL TAB 0.5-35/1-35/0.5-35 MG-MCG	95
NONOXYNOL-9 VAGINAL SUPPOS 100 MG	111	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	99	NORETHINDRONE-ETH ESTRADIOL TAB 0.5-35/1-35/0.5-35 MG-MCG	100
NORA-BE TAB 0.35MG	189	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	100	NORETHINDRONE & ETHINYL ESTRADIOL-FE CHEW TAB 0.4 MG-35 MCG	102
NORDIPEN 5 MIS DEVICE	156	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	100		
NORDIPEN DEL MIS SYSTEM	156	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	102		
NORDITROPIN INJ 5/1.5ML	126	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	102		
NORDITROPIN INJ 10/1.5ML	126	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	102		
NORDITROPIN INJ 15/1.5ML	126	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	102		
NORDITROPIN INJ 30/3ML	126	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	104		
NORE/ETH/FER CHW 0.4MG-35	102	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24)	95		
NORELGE/ETHI DIS 150/35	102	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24)	96		
NORELGESTROMIN-ETHINYL ESTRADIOL TD PTWK 150-35 MCG/24HR ..	102	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24)	99		
NORELGESTROMIN-ETHINYL ESTRADIOL TD PTWK 150-35 MCG/24HR ..	105	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24)	100		
NORELGESTROMIN-ETHINYL ESTRADIOL TD PTWK 150-35 MCG/24HR ..	105	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24)	100		
NOR/EST/FF TAB 1.5/30	102	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24)	104		
NORETH/ETHIN CHW FE	102	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG	95		
NORETH/ETHIN CHW FE 1/20	102	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG	99		
NORETH/ETHIN TAB 0.5-2.5	102	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG	100		
NORETH/ETHIN TAB 1.5/30	102	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG	100		
NORETH/ETHIN TAB 1/20	102	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG	104		
NORETH/ETHIN TAB 1MG-5MCG	102	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG	95		
NORETH/ETHIN TAB FE	102	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG	99		
NORETH/ETHIN TAB FE 1/20	102				
NORETHIN ACE TAB 5MG	189				
NORETHINDRONE ACE-ETH ESTRADIOL- FE CHEW TAB 1 MG-20 MCG (24)	96				

NORETHINDRONE & ETHINYL ESTRADIOL-FE CHEW TAB 0.4 MG-35 MCG	105	NORGESTIMATE-ETH ESTRAD TAB 0.18- 25/0.215-25/0.25-25 MG-MCG	102	NORTREL TAB 1/35	103
NORETHINDRONE & ETHINYL ESTRADIOL-FE CHEW TAB 0.4 MG-35 MCG	105	NORGESTIMATE-ETH ESTRAD TAB 0.18- 25/0.215-25/0.25-25 MG-MCG	104	NORTREL TAB 7/7/7	103
NORETHINDRONE & ETHINYL ESTRADIOL-FE CHEW TAB 0.8 MG-25 MCG	99	NORGESTIMATE-ETH ESTRAD TAB 0.18- 25/0.215-25/0.25-25 MG-MCG	104	NORTRIPTYLIN CAP 10MG	209
NORETHINDRONE & ETHINYL ESTRADIOL-FE CHEW TAB 0.8 MG-25 MCG	100	NORGESTIMATE-ETH ESTRAD TAB 0.18- 25/0.215-25/0.25-25 MG-MCG	104	NORTRIPTYLIN CAP 25MG	209
NORETHINDRONE & ETHINYL ESTRADIOL-FE CHEW TAB 0.8 MG-25 MCG	100	NORGESTIMATE-ETH ESTRAD TAB 0.18- 25/0.215-25/0.25-25 MG-MCG	104	NORTRIPTYLIN CAP 50MG	209
NORETHINDRONE & ETHINYL ESTRADIOL-FE CHEW TAB 0.8 MG-25 MCG	102	NORGESTIMATE-ETH ESTRAD TAB 0.18- 25/0.215-25/0.25-25 MG-MCG	104	NORTRIPTYLIN CAP 75MG	209
NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.4 MG-35 MCG	95	NORGESTIMATE-ETH ESTRAD TAB 0.18- 35/0.215-35/0.25-35 MG-MCG	102	NORTRIPTYLINE HCL CAP 10 MG	209
NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.4 MG-35 MCG	96	NORGESTIMATE-ETH ESTRAD TAB 0.18- 35/0.215-35/0.25-35 MG-MCG	104	NORTRIPTYLINE HCL CAP 25 MG	209
NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.4 MG-35 MCG	103	NORGESTIMATE-ETH ESTRAD TAB 0.18- 35/0.215-35/0.25-35 MG-MCG	104	NORTRIPTYLINE HCL CAP 50 MG	209
NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.4 MG-35 MCG	105	NORGESTIMATE-ETH ESTRAD TAB 0.18- 35/0.215-35/0.25-35 MG-MCG	104	NORTRIPTYLINE HCL CAP 75 MG	209
NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.5 MG-35 MCG	102	NORGESTIMATE-ETH ESTRAD TAB 0.18- 35/0.215-35/0.25-35 MG-MCG	104	NORTRIPTYLINE HCL SOLN 10 MG/5ML	209
NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.5 MG-35 MCG	103	NORGESTIMATE-ETH ESTRAD TAB 0.18- 35/0.215-35/0.25-35 MG-MCG	104	NORTRIPTYLIN SOL 10MG/5ML	209
NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.5 MG-35 MCG	105	NORGESTIMATE & ETHINYL ESTRADIOL TAB 0.25 MG-35 MCG	97	NORVIR CAP 100MG	19
NORETHINDRONE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG	95	NORGESTIMATE & ETHINYL ESTRADIOL TAB 0.25 MG-35 MCG	102	NORVIR POW 100MG	19
NORETHINDRONE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG	96	NORGESTIMATE & ETHINYL ESTRADIOL TAB 0.25 MG-35 MCG	102	NOVAFILM GEL	156
NORETHINDRONE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG	103	NORGESTIMATE & ETHINYL ESTRADIOL TAB 0.25 MG-35 MCG	102	NOVOEIGHT INJ 250UNIT	119
NORETHINDRONE TAB 0.35 MG	188	NORGESTIMATE & ETHINYL ESTRADIOL TAB 0.25 MG-35 MCG	103	NOVOEIGHT INJ 500UNIT	119
NORETHINDRONE TAB 0.35 MG	188	NORGESTIMATE & ETHINYL ESTRADIOL TAB 0.25 MG-35 MCG	105	NOVOEIGHT INJ 1000UNIT	119
NORETHINDRONE TAB 0.35 MG	188	NORGESTREL & ETHINYL ESTRADIOL TAB 0.3 MG-30 MCG	96	NOVOEIGHT INJ 1500UNIT	119
NORETHINDRONE TAB 0.35 MG	188	NORGESTREL & ETHINYL ESTRADIOL TAB 0.3 MG-30 MCG	97	NOVOEIGHT INJ 2000UNIT	119
NORETHINDRONE TAB 0.35 MG	188	NORGESTREL & ETHINYL ESTRADIOL TAB 0.3 MG-30 MCG	101	NOVOEIGHT INJ 3000UNIT	119
NORETHINDRONE TAB 0.35 MG	188	NORLIQVA SOL 1MG/ML	58	NOVOFINE AUT MIS 30GX8MM	77
NORETHINDRONE TAB 0.35 MG	189	NORLYROC TAB 0.35MG	189	NOVOFINE MIS 32GX6MM	77
NORETHINDRONE TAB 0.35 MG	189	NORPACE CAP 100MG	22	NOVOFINE PLS MIS 32GX4MM	77
NORETHINDRONE TAB 0.35 MG	189	NORPACE CAP 100MG CR	22	NOVOLIN R INJ 100 UNIT	137
NORETHINDRONE TAB 0.35 MG	189	NORPACE CAP 150MG	22	NOVOLOG INJ RELION	137
NORETHINDRONE TAB 0.35 MG	189	NORPACE CAP 150MG CR	22	NOVOPEN ECHO MIS	156
NORETHINDRON TAB 0.35MG	189	NORPRAMIN TAB 10MG	208	NOVOSEVEN RT INJ 1MG	119
NORETHIN-ETH ESTRADIOL-FE TAB 1 MG-10 MCG (24)/10 MCG (2)	101	NORPRAMIN TAB 25MG	209	NOVOSEVEN RT INJ 2MG	119
NORGEST/ETHI TAB 0.25/35	102	NORTREL TAB 0.5/35	103	NOVOSEVEN RT INJ 5MG	119
NORGEST/ETHI TAB ESTRADIO	102			NOVOSEVEN RT INJ 8MG	119
NORGEST/ETHI TAB ESTRADIO	102			NOXAFIL PAK 300MG	34
				NOXAFIL SUS 40MG/ML	34
				NP THYROID TAB 15MG	129
				NP THYROID TAB 30MG	129
				NP THYROID TAB 60MG	129
				NP THYROID TAB 90MG	129
				NP THYROID TAB 120MG	129
				NUBEQA TAB 300MG	20
				NUCALA INJ 40MG/0.4	20
				NUCALA INJ 100MG/ML	20
				NUCALA INJ 100MG/ML	20
				NUCORT LOT 2%	124
				NUCYNTA ER TAB 50MG	182
				NUCYNTA ER TAB 100MG	181
				NUCYNTA ER TAB 150MG	182
				NUCYNTA ER TAB 200MG	182
				NUCYNTA ER TAB 250MG	182
				NUCYNTA TAB 50MG	184
				NUCYNTA TAB 75MG	184
				NUCYNTA TAB 100MG	184
				NUDEXTA CAP 20-10MG	64
				NULEV TAB 0.125MG	42
				NUPLAZID CAP 34MG	7
				NUPLAZID TAB 10MG	7



*NUTRITIONAL SUPPLEMENT PACK**	92	*NUTRITIONAL SUPPLEMENT POWDER**	.219	NYSTATIN SUSP 100000 UNIT/ML	34
*NUTRITIONAL SUPPLEMENT PACK**	92	*NUTRITIONAL SUPPLEMENT POWDER**	.220	NYSTATIN TAB 500000	34
*NUTRITIONAL SUPPLEMENT PACK**	92	*NUTRITIONAL SUPPLEMENT POWDER**	.220	NYSTATIN TAB 500000 UNIT	34
*NUTRITIONAL SUPPLEMENT POWDER**	.213	*NUTRITIONAL SUPPLEMENT TABS**	217	NYSTATIN TOPICAL POWDER 100000	UNIT/GM.....34
*NUTRITIONAL SUPPLEMENT POWDER**	.213	*NUTRITIONAL SUPPLEMENT TABS	DELAYED RELEASE**	NYSTATIN TOPICAL POWDER 100000	UNIT/GM.....34
*NUTRITIONAL SUPPLEMENT POWDER**	.213	*NUTRITIONAL SUPPLEMENT TABS	DELAYED RELEASE**	NYSTATIN TOPICAL POWDER 100000	UNIT/GM.....34
*NUTRITIONAL SUPPLEMENT POWDER**	.213	NUWIQ INJ 250UNIT	119	NYSTATIN TOPICAL POWDER 100000	UNIT/GM.....34
*NUTRITIONAL SUPPLEMENT POWDER**	.213	NUWIQ INJ 500UNIT	119	NYSTATIN TOPICAL POWDER 100000	UNIT/GM.....34
*NUTRITIONAL SUPPLEMENT POWDER**	.213	NUWIQ INJ 1000UNIT	119	NYSTATIN-TRIAMCINOLONE CREAM	100000-0.1 UNIT/GM-%
*NUTRITIONAL SUPPLEMENT POWDER**	.213	NUWIQ INJ 1500UNIT	119	NYSTATIN-TRIAMCINOLONE OINT	100000-0.1 UNIT/GM-%
*NUTRITIONAL SUPPLEMENT POWDER**	.213	NUWIQ INJ 2000UNIT	119	NYSTAT/TRIAM CRE	34
*NUTRITIONAL SUPPLEMENT POWDER**	.214	NUWIQ INJ 2500UNIT	119	NYSTAT/TRIAM OIN	34
*NUTRITIONAL SUPPLEMENT POWDER**	.214	NUWIQ INJ 3000UNIT	119	NYSTOP POW 100000	34
*NUTRITIONAL SUPPLEMENT POWDER**	.214	NUWIQ INJ 4000UNIT	119	NZ WHEY PROT POW ISOLATE	156
*NUTRITIONAL SUPPLEMENT POWDER**	.214	NUWIQ KIT 250UNIT	120	OA 1 POW	216
*NUTRITIONAL SUPPLEMENT POWDER**	.214	NUWIQ KIT 500UNIT	120	OA 2 POW	216
*NUTRITIONAL SUPPLEMENT POWDER**	.214	NUWIQ KIT 1000UNIT	119	OB COMPLETE/ CAP DHA	216
*NUTRITIONAL SUPPLEMENT POWDER**	.214	NUWIQ KIT 1500UNIT	119	OB COMPLETE CAP ONE	216
*NUTRITIONAL SUPPLEMENT POWDER**	.215	NUWIQ KIT 2000UNIT	120	OB COMPLETE CAP PETITE	216
*NUTRITIONAL SUPPLEMENT POWDER**	.215	NUWIQ KIT 2500UNIT	120	OB COMPLETE TAB	216
*NUTRITIONAL SUPPLEMENT POWDER**	.215	NUWIQ KIT 3000UNIT	120	OB COMPLETE TAB PREMIER	216
*NUTRITIONAL SUPPLEMENT POWDER**	.215	NUWIQ KIT 4000UNIT	120	OBETICHOLIC ACID TAB 5 MG	109
*NUTRITIONAL SUPPLEMENT POWDER**	.215	NUZYRA TAB 150MG	207	OBETICHOLIC ACID TAB 10 MG	109
*NUTRITIONAL SUPPLEMENT POWDER**	.215	NYAMYC POW 100000	34	OBIZUR INJ 500 UNIT	120
*NUTRITIONAL SUPPLEMENT POWDER**	.215	NYLIA TAB 1/35	103	OCALIVA TAB 5MG	109
*NUTRITIONAL SUPPLEMENT POWDER**	.215	NYLIA TAB 7/7/7	103	OCALIVA TAB 10MG	109
*NUTRITIONAL SUPPLEMENT POWDER**	.215	NYMALIZE SOL	58	OCCLUSADERM GEL PCCA	156
*NUTRITIONAL SUPPLEMENT POWDER**	.215	NYSTATIN (BULK) POWDER	34	OCTREOTIDE ACETATE INJ 50 MCG/ML	(0.05 MG/ML).....130
*NUTRITIONAL SUPPLEMENT POWDER**	.216	NYSTATIN (BULK) POWDER	34	OCTREOTIDE ACETATE INJ 100 MCG/ML	(0.1 MG/ML) 130
*NUTRITIONAL SUPPLEMENT POWDER**	.216	NYSTATIN (BULK) POWDER	34	OCTREOTIDE ACETATE INJ 200 MCG/ML	(0.2 MG/ML) 130
*NUTRITIONAL SUPPLEMENT POWDER**	.216	NYSTATIN (BULK) POWDER	34	OCTREOTIDE ACETATE INJ 200 MCG/ML	(0.2 MG/ML) 130
*NUTRITIONAL SUPPLEMENT POWDER**	.216	NYSTATIN (BULK) POWDER	34	OCTREOTIDE ACETATE INJ 500 MCG/ML	(0.5 MG/ML) 130
*NUTRITIONAL SUPPLEMENT POWDER**	.216	NYSTATIN (BULK) POWDER	34	OCTREOTIDE ACETATE INJ 1000 MCG/	ML (1 MG/ML).....130
*NUTRITIONAL SUPPLEMENT POWDER**	.216	NYSTATIN (BULK) POWDER	34	OCTREOTIDE ACETATE INJ 1000 MCG/	ML (1 MG/ML).....130
*NUTRITIONAL SUPPLEMENT POWDER**	.216	NYSTATIN CRE 100000	34	OCTREOTIDE ACETATE SUBCUTANEOUS	SOLN PREF SYR 50 MCG/ML
*NUTRITIONAL SUPPLEMENT POWDER**	.216	NYSTATIN CREAM 100000 UNIT/GM	34	OCTREOTIDE ACETATE SUBCUTANEOUS	SOLN PREF SYR 100 MCG/ML
*NUTRITIONAL SUPPLEMENT POWDER**	.216	NYSTATIN OIN 100000	34	OCTREOTIDE ACETATE SUBCUTANEOUS	SOLN PREF SYR 500 MCG/ML
*NUTRITIONAL SUPPLEMENT POWDER**	.216	NYSTATIN OIN 100000U	34	OCTREOTIDE INJ 50MCG/ML	130
*NUTRITIONAL SUPPLEMENT POWDER**	.216	NYSTATIN OINT 100000 UNIT/GM	34	OCTREOTIDE INJ 50MCG/ML	130
*NUTRITIONAL SUPPLEMENT POWDER**	.216	NYSTATIN OINT 100000 UNIT/GM	34	OCTREOTIDE INJ 100MCG	130
*NUTRITIONAL SUPPLEMENT POWDER**	.216	NYSTATIN POW	34	OCTREOTIDE INJ 100MCG	130
*NUTRITIONAL SUPPLEMENT POWDER**	.216	NYSTATIN POW 1BU	34		
*NUTRITIONAL SUPPLEMENT POWDER**	.216	NYSTATIN POW 2BU	34		
*NUTRITIONAL SUPPLEMENT POWDER**	.217	NYSTATIN POW 5BU	34		
*NUTRITIONAL SUPPLEMENT POWDER**	.218	NYSTATIN POW 10BU	34		
*NUTRITIONAL SUPPLEMENT POWDER**	.218	NYSTATIN POW 50MU	34		
*NUTRITIONAL SUPPLEMENT POWDER**	.218	NYSTATIN POW 100MU	34		
*NUTRITIONAL SUPPLEMENT POWDER**	.218	NYSTATIN POW 150MU	34		
*NUTRITIONAL SUPPLEMENT POWDER**	.218	NYSTATIN POW 500MU	34		
*NUTRITIONAL SUPPLEMENT POWDER**	.219	NYSTATIN POW 100000	34		
*NUTRITIONAL SUPPLEMENT POWDER**	.219	NYSTATIN SUS 100000	34		

OCTREOTIDE INJ 200MCG	130	OLANZAPINE TAB 2.5 MG	8	OMALIZUMAB SUBCUTANEOUS SOLN	
OCTREOTIDE INJ 500MCG	130	OLANZAPINE TAB 2.5MG	8	PREFILLED SYRINGE 150 MG/ML	195
OCTREOTIDE INJ 500MCG	130	OLANZAPINE TAB 5 MG	8	OMALIZUMAB SUBCUTANEOUS SOLN	
OCTREOTIDE INJ 1000/5ML	130	OLANZAPINE TAB 5MG	8	PREFILLED SYRINGE 300 MG/2ML	195
OCTREOTIDE INJ 1000MCG	130	OLANZAPINE TAB 5MG ODT	8	OMAVELOXOLONE CAP 50 MG	64
OCTREOTIDE INJ 5000/5ML	130	OLANZAPINE TAB 7.5 MG	8	OMECLAMOX- MIS PAK	108
OCUFLOX DRO 0.3% OP	178	OLANZAPINE TAB 7.5MG	8	OMEGA-3-ACID CAP 1GM	85
ODACTRA SUB	194	OLANZAPINE TAB 10 MG	7	OMEGA-3-ACID ETHYL ESTERS CAP 1 GM ..	85
ODEFSEY TAB	17	OLANZAPINE TAB 10MG	7	*OMEGA-3 FATTY ACIDS CAP 300 MG** ..	149
ODOMZO CAP 200MG	168	OLANZAPINE TAB 10MG ODT	8	OMEPRAZOLE CAP 10MG	190
OFATUMUMAB SOLN AUTO-INJECTOR 20		OLANZAPINE TAB 15 MG	8	OMEPRAZOLE CAP 20MG	190
MG/0.4ML	171	OLANZAPINE TAB 15MG	8	OMEPRAZOLE CAP 40MG	190
OFLOXACIN DRO 0.3% OP	178	OLANZAPINE TAB 15MG ODT	8	OMEPRAZOLE CAP DELAYED RELEASE 10	
OFLOXACIN DRO 0.3%OTIC	186	OLANZAPINE TAB 20 MG	8	MG	190
OFLOXACIN OPHTH SOLN 0.3%	178	OLANZAPINE TAB 20MG	8	OMEPRAZOLE CAP DELAYED RELEASE	
OFLOXACIN OPHTH SOLN 0.3%	178	OLANZAPINE TAB 20MG ODT	8	20 MG	190
OFLOXACIN OTIC SOLN 0.3%	186	OLAPARIB TAB 100 MG	168	OMEPRAZOLE CAP DELAYED RELEASE	
OFLOXACIN TAB 300 MG	193	OLAPARIB TAB 150 MG	168	40 MG	190
OFLOXACIN TAB 300MG	193	OLEZARSEN SOD SUBCUT SOLN AUTO-		*OMEPRAZOLE SUSP 2 MG/ML	
OFLOXACIN TAB 400 MG	193	INJECT 80 MG/0.8ML (BASE EQ)	164	(COMPOUND KIT)**	190
OFLOXACIN TAB 400MG	193	OLMESA MEDOX TAB 5MG	13	OMNIFLEX DPR	156
OGSIVEO TAB 50MG	39	OLMESA MEDOX TAB 20MG	13	OMNIPOD 5 DX KIT INT G7G6	156
OGSIVEO TAB 100MG	39	OLMESA MEDOX TAB 40MG	13	OMNIPOD 5 DX MIS POD G7G6	156
OGSIVEO TAB 150MG	39	OLMESARTAN MEDOXOMIL-		OMNIPOD 5 DX MIS POD G7G6	156
OJEMDA SUS 25MG/ML	168	HYDROCHLOROTHIAZIDE TAB 20-12.5 MG ..	62	OMNIPOD 5 G7 KIT INTRO	156
OJEMDA TAB 100MG	168	OLMESARTAN MEDOXOMIL-		OMNIPOD 5 G7 MIS PODS	156
OJJAARA TAB 100MG	39	HYDROCHLOROTHIAZIDE TAB 40-12.5 MG ..	62	OMNIPOD 5 L2 KIT INTRO G6	156
OJJAARA TAB 150MG	39	OLMESARTAN MEDOXOMIL-		OMNIPOD 5 L2 MIS PODS G6	156
OJJAARA TAB 200MG	39	HYDROCHLOROTHIAZIDE TAB 40-25 MG ..	62	OMNITROPE INJ 5/1.5ML	126
OLANZA/FLUOX CAP 3-25MG	205	OLMESARTAN MEDOXOMIL TAB 5 MG	13	OMNITROPE INJ 5.8MG	126
OLANZA/FLUOX CAP 6-25MG	205	OLMESARTAN MEDOXOMIL TAB 20 MG	13	OMNITROPE INJ 10/1.5ML	126
OLANZA/FLUOX CAP 6-50MG	205	OLMESARTAN MEDOXOMIL TAB 40 MG	13	OMVOH INJ 100/200	132
OLANZA/FLUOX CAP 12-25MG	205	OLM MED/HCTZ TAB 20-12.5	62	OMVOH INJ 100/200	132
OLANZA/FLUOX CAP 12-50MG	205	OLM MED/HCTZ TAB 40-12.5	62	OMVOH INJ 100MG/ML	132
OLANZAPINE-FLUOXETINE HCL CAP		OLM MED/HCTZ TAB 40-25MG	62	OMVOH INJ 100MG/ML	132
3-25 MG	205	OLODATEROL HCL INHAL AEROSOL		ONDANSETRON HCL ORAL SOLN 4	
OLANZAPINE-FLUOXETINE HCL CAP		SOLN 2.5 MCG/ACT (BASE EQUIV)	55	MG/5ML	94
3-25 MG	205	OLOPATADINE HCL NASAL SOLN 0.6%	36	ONDANSETRON HCL TAB 4 MG	94
OLANZAPINE-FLUOXETINE HCL CAP		OLOPATADINE SPR 0.6%	36	ONDANSETRON HCL TAB 8 MG	94
6-25 MG	205	OLUMIANT TAB 1MG	132	ONDANSETRON HCL TAB 24 MG	94
OLANZAPINE-FLUOXETINE HCL CAP		OLUMIANT TAB 2MG	132	ONDANSETRON ORALLY	
6-25 MG	205	OLUMIANT TAB 4MG	132	DISINTEGRATING TAB 4 MG	94
OLANZAPINE-FLUOXETINE HCL CAP		OLUTASIDENIB CAP 150 MG	169	ONDANSETRON ORALLY	
6-50 MG	205	OMACETAXINE MEPESUCCINATE FOR		DISINTEGRATING TAB 8 MG	94
OLANZAPINE-FLUOXETINE HCL CAP		INJ 3.5 MG	39	ONDANSETRON SOL 4MG/5ML	94
12-25 MG	205	OMADACYCLINE TOSYLATE TAB 150 MG		ONDANSETRON TAB 4MG	94
OLANZAPINE-FLUOXETINE HCL CAP		(BASE EQUIVALENT)	207	ONDANSETRON TAB 4MG ODT	94
12-50 MG	205	OMALIZUMAB SUBCUTANEOUS SOLN		ONDANSETRON TAB 8MG	94
OLANZAPINE ORALLY DISINTEGRATING		AUTO-INJECTOR 75 MG/0.5ML	195	ONDANSETRON TAB 8MG ODT	94
TAB 5 MG	8	OMALIZUMAB SUBCUTANEOUS SOLN		ONDANSETRON TAB 24MG	94
OLANZAPINE ORALLY DISINTEGRATING		AUTO-INJECTOR 150 MG/ML	195	ONENATAL RX TAB	216
TAB 10 MG	8	OMALIZUMAB SUBCUTANEOUS SOLN		ONETOUCH DEL MIS LANC DEV	78
OLANZAPINE ORALLY DISINTEGRATING		AUTO-INJECTOR 300 MG/2ML	195	ONETOUCH DEL MIS LANC DEV	80
TAB 15 MG	8	OMALIZUMAB SUBCUTANEOUS SOLN		ONETOUCH DEL MIS PLUS 30G	78
OLANZAPINE ORALLY DISINTEGRATING		PREFILLED SYRINGE 75 MG/0.5ML	195	ONETOUCH DEL MIS PLUS 33G	78
TAB 20 MG	8			ONETOUCH LIQ ULT CONT	77

ONETOUCH LIQ ULTRA	77	*ORAL VEHICLES - SYRUP***	163	OSELTAMIVIR PHOSPHATE CAP 75 MG	
ONETOUCH LIQ VERIO	77	*ORAL VEHICLES - SYRUP***	163	(BASE EQUIV).....	20
ONETOUCH LIQ VERIO 4.....	156	*ORAL VEHICLES - SYRUP***	164	OSELTAMIVIR PHOSPHATE FOR SUSP 6	
ONETOUCH MIS 30G.....	77	*ORAL VEHICLES - SYRUP***	165	MG/ML (BASE EQUIV)	20
ONETOUCH MIS LANC DEV	80	ORAPENN SD LIQ SWEET	156	OSELTAMIVIR POW	156
ONETOUCH MIS LANCETS.....	77	ORA-PLUS LIQ	156	OSELTAMIVIR SUS 6MG/ML	20
ONETOUCH US MIS 2 30G.....	78	ORAPRED ODT TAB 10MG	124	OSIMERTINIB MESYLATE TAB 40 MG	
ONE VITE TAB 1MG PLUS.....	216	ORAPRED ODT TAB 15MG	124	(BASE EQUIVALENT).....	169
ONFI SUS 2.5MG/ML.....	107	ORAPRED ODT TAB 30MG	124	OSIMERTINIB MESYLATE TAB 80 MG	
ONFI TAB 10MG	107	ORA-SWEET SF SYP	156	(BASE EQUIVALENT).....	169
ONFI TAB 20MG	107	ORA-SWEET SYP	156	OSMOLITE LIQ 1.0 CAL	89
ONUREG TAB 200MG.....	39	ORAVIG TAB 50MG.....	35	OSPEMIFENE TAB 60 MG.....	196
ONUREG TAB 300MG.....	39	ORENCIA CLCK INJ 125MG/ML	133	OSPHENA TAB 60MG.....	196
ONYDA XR SUS 0.1MG/ML	47	ORENCIA INJ 50/0.4ML	133	OTESECONAZOLE CAP THERAPY PACK	
OPCICON TAB 1.5MG.....	189	ORENCIA INJ 87.5/0.7	133	150 MG (12 WEEKS)	35
OPFOLDA CAP 65MG	109	ORENCIA INJ 125MG/ML	133	OTEZLA TAB 10/20	135
OPILL TAB 0.075MG.....	188	ORENITRAM TAB 0.25MG	191	OTEZLA TAB 10/20/30	135
OPIUM TIN 10MG/ML.....	108	ORENITRAM TAB 0.125MG	191	OTEZLA TAB 20MG.....	135
OPIUM TINCTURE 1% (10 MG/ML)		ORENITRAM TAB 1MG.....	191	OTEZLA TAB 30MG.....	135
(MORPHINE EQUIV)	108	ORENITRAM TAB 2.5MG.....	191	OVACE PLUS CRE 10%.....	71
OPSUMIT TAB 10MG	191	ORENITRAM TAB 5MG	191	OVACE PLUS GEL 10% WASH	71
OPTICLEANSE PAK GHI.....	89	ORENITRAM TAB MONTH 1.....	191	OVACE PLUS LIQ 10% WASH	71
OPTICLEANSE PAK PLUS	89	ORENITRAM TAB MONTH 2	191	OVACE PLUS SHA 10%.....	71
OPTION 2 TAB 1.5MG.....	189	ORENITRAM TAB MONTH 3	191	OVACE WASH LIQ 10%	71
OPVEE SPR 2.7/0.1	186	ORFADIN CAP 2MG	109	OVIDE LOT 0.5%	186
ORA-BLEND SF SUS.....	156	ORFADIN CAP 5MG	109	OXAPROZIN TAB 600 MG	173
ORA-BLEND SUS	156	ORFADIN CAP 10MG	109	OXAPROZIN TAB 600 MG	175
ORACIT SOL	89	ORFADIN CAP 20MG.....	109	OXAPROZIN TAB 600MG.....	175
ORALAIR ADLT SUB 300 IR.....	194	ORFADIN SUS 4MG/ML	109	OXAZEPAM CAP 10 MG.....	48
ORALAIR CHLD SUB 100 IR	194	ORGOVYX TAB 120MG	20	OXAZEPAM CAP 10MG	48
ORALAIR SUB 300 IR.....	194	ORIAHNN CAP	130	OXAZEPAM CAP 15 MG.....	48
ORAL CITRATE SOL.....	89	ORLISSA TAB 150MG.....	130	OXAZEPAM CAP 15MG	48
*ORAL ELECTROLYTE SOLUTION***	87	ORLISSA TAB 200MG	130	OXAZEPAM CAP 30 MG	49
*ORAL ELECTROLYTE SOLUTION***	89	ORKAMBI GRA 75-94MG	66	OXAZEPAM CAP 30MG.....	49
*ORAL ELECTROLYTE SOLUTION***	89	ORKAMBI GRA 100-125	66	OXCARBAZEPINE SUSP 300 MG/5ML (60	
ORALONE DENT PST 0.1%.....	67	ORKAMBI GRA 150-188	66	MG/ML).....	203
*ORAL VEHICLES***	149	ORKAMBI TAB 100-125.....	66	OXCARBAZEPINE TAB 150 MG	203
*ORAL VEHICLES***	156	ORKAMBI TAB 200-125.....	66	OXCARBAZEPINE TAB 300 MG	203
*ORAL VEHICLES***	156	ORLYNVAH TAB 500-500.....	156	OXCARBAZEPINE TAB 600 MG	203
*ORAL VEHICLES***	163	ORPHENADRINE CITRATE TAB ER 12HR		OXCARBAZEPIN SUS 300/5ML.....	203
*ORAL VEHICLES FOR SUSP***	163	100 MG.....	197	OXCARBAZEPIN TAB 150MG	203
*ORAL VEHICLES - SUSP***	149	ORPHENADRINE TAB 100MG ER	197	OXCARBAZEPIN TAB 300MG.....	203
*ORAL VEHICLES - SUSP***	156	ORQUIDEA TAB 0.35MG.....	189	OXCARBAZEPIN TAB 600MG.....	203
*ORAL VEHICLES - SUSP***	156	ORSERDU TAB 86MG.....	33	OXERVATE SOL 20MCG/ML	176
*ORAL VEHICLES - SUSP***	157	OSCIMIN SUB 0.125MG	42	OXYBUTYNIN CHLORIDE SOLUTION 5	
*ORAL VEHICLES - SUSP***	162	OSCIMIN TAB 0.125MG	42	MG/5ML	42
*ORAL VEHICLES - SUSP***	162	OSELTAMIVIR CAP 30MG	20	OXYBUTYNIN CHLORIDE TAB 2.5 MG	42
*ORAL VEHICLES - SUSP***	162	OSELTAMIVIR CAP 45MG	20	OXYBUTYNIN CHLORIDE TAB 5 MG.....	42
*ORAL VEHICLES - SUSP***	162	OSELTAMIVIR CAP 75MG	20	OXYBUTYNIN CHLORIDE TAB ER 24HR 5 MG	42
*ORAL VEHICLES - SUSP***	164	OSELTAMIVIR PHOSPHATE (BULK)		OXYBUTYNIN CHLORIDE TAB ER 24HR 10	
*ORAL VEHICLES - SYRUP***	149	POWDER	156	MG	42
*ORAL VEHICLES - SYRUP***	156	OSELTAMIVIR PHOSPHATE CAP 30 MG		OXYBUTYNIN CHLORIDE TAB ER 24HR 15	
*ORAL VEHICLES - SYRUP***	156	(BASE EQUIV).....	20	MG	42
*ORAL VEHICLES - SYRUP***	157	OSELTAMIVIR PHOSPHATE CAP 45 MG		OXYBUTYNIN SOL 5MG/5ML	42
*ORAL VEHICLES - SYRUP***	157	(BASE EQUIV).....	20	OXYBUTYNIN TAB 2.5MG	42
*ORAL VEHICLES - SYRUP***	163			OXYBUTYNIN TAB 5MG	42

OXYBUTYNIN TAB 5MG ER	42	OXYCODONE W/ ACETAMINOPHEN TAB		PALOPEGTERIPARATIDE PEN-INJ 420	
OXYBUTYNIN TAB 10MG ER	42	10-325 MG	184	MCG/1.4ML (TERIPARATIDE EQ)	110
OXYBUTYNIN TAB 15MG ER	42	OXYMORPHONE HCL TAB 5 MG	184	PALOVAROTENE CAP 1.5 MG	162
OXYCOD/APAP TAB 2.5-325	184	OXYMORPHONE HCL TAB 10 MG	184	PALOVAROTENE CAP 1 MG	162
OXYCOD/APAP TAB 5-325MG	184	OXYMORPHONE HCL TAB ER 12HR 5 MG	182	PALOVAROTENE CAP 2.5 MG	162
OXYCOD/APAP TAB 7.5-325	184	OXYMORPHONE HCL TAB ER 12HR 7.5 MG	182	PALOVAROTENE CAP 5 MG	162
OXYCOD/APAP TAB 10-325MG	184	OXYMORPHONE HCL TAB ER 12HR 10 MG	182	PALOVAROTENE CAP 10 MG	162
OXYCODONE CAP 5MG	184	OXYMORPHONE HCL TAB ER 12HR 15 MG	182	PANCRELIPASE (LIP-PROT-AMYL) DR	
OXYCODONE CAP ER 12HR ABUSE-		OXYMORPHONE HCL TAB ER 12HR 20 MG	182	CAP 3000-9500-15000 UNIT	109
DETERRENT 9 MG	182	OXYMORPHONE HCL TAB ER 12HR 30 MG	182	PANCRELIPASE (LIP-PROT-AMYL) DR	
OXYCODONE CAP ER 12HR ABUSE-		OXYMORPHONE HCL TAB ER 12HR 40 MG	182	CAP 3000-10000-14000 UNIT	110
DETERRENT 13.5 MG	182	OXYMORPHONE TAB 5MG ER	182	PANCRELIPASE (LIP-PROT-AMYL) DR	
OXYCODONE CAP ER 12HR ABUSE-		OXYMORPHONE TAB 7.5MG ER	182	CAP 4000-14375-15125 UNIT	109
DETERRENT 18 MG	182	OXYMORPHONE TAB 10MG ER	182	PANCRELIPASE (LIP-PROT-AMYL) DR	
OXYCODONE CAP ER 12HR ABUSE-		OXYMORPHONE TAB 15MG ER	182	CAP 5000-17000-24000 UNIT	111
DETERRENT 27 MG	182	OXYMORPHONE TAB 20MG ER	182	PANCRELIPASE (LIP-PROT-AMYL) DR	
OXYCODONE CAP ER 12HR ABUSE-		OXYMORPHONE TAB 30MG ER	182	CAP 6000-19000-30000 UNIT	109
DETERRENT 36 MG	182	OXYMORPHONE TAB 40MG ER	182	PANCRELIPASE (LIP-PROT-AMYL) DR	
OXYCODONE CON 100/5ML	184	OXYMORPHONE TAB HCL 5MG	184	CAP 8000-28750-30250 UNIT	109
OXYCODONE HCL CAP 5 MG	184	OXYMORPHONE TAB HCL 10MG	184	PANCRELIPASE (LIP-PROT-AMYL) DR	
OXYCODONE HCL CONC 100 MG/5ML		OZANIMOD CAP PACK 4 X 0.23 MG & 3 X		CAP 10000-32000-42000 UNIT	110
(20 MG/ML)	184	0.46 MG	172	PANCRELIPASE (LIP-PROT-AMYL) DR	
OXYCODONE HCL SOLN 5 MG/5ML	184	OZANIMOD CAP PACK 4 X 0.23 MG & 3 X		CAP 12000-38000-60000 UNIT	109
OXYCODONE HCL TAB 5 MG	184	0.46 MG & 21 X 0.92 MG	172	PANCRELIPASE (LIP-PROT-AMYL) DR	
OXYCODONE HCL TAB 10 MG	184	OZANIMOD HCL CAP 0.92 MG	172	CAP 15000-47000-63000 UNIT	110
OXYCODONE HCL TAB 15 MG	184	OZEMPIC INJ 2MG/3ML	31	PANCRELIPASE (LIP-PROT-AMYL) DR	
OXYCODONE HCL TAB 20 MG	184	OZEMPIC INJ 4MG/3ML	31	CAP 16000-57500-60500 UNIT	109
OXYCODONE HCL TAB 30 MG	184	OZEMPIC INJ 8MG/3ML	31	PANCRELIPASE (LIP-PROT-AMYL) DR	
OXYCODONE SOL 5MG/5ML	184	OZENOXACIN CREAM 1%	193	CAP 20000-63000-84000 UNIT	110
OXYCODONE TAB 5MG	184	OZOBAX DS SOL 10MG/5ML	198	PANCRELIPASE (LIP-PROT-AMYL) DR	
OXYCODONE TAB 10MG	184	OZOBAX SOL 5MG/5ML	198	CAP 24000-76000-120000 UNIT	109
OXYCODONE TAB 15MG	184	PACERONE TAB 100MG	22	PANCRELIPASE (LIP-PROT-AMYL) DR	
OXYCODONE TAB 20MG	184	PACERONE TAB 200MG	22	CAP 24000-86250-90750 UNIT	109
OXYCODONE TAB 30MG	184	PACERONE TAB 400MG	22	PANCRELIPASE (LIP-PROT-AMYL) DR	
OXYCODONE W/ ACETAMINOPHEN TAB		PALFORZIA CAP 1-3YRS	156	CAP 25000-79000-105000 UNIT	110
2.5-325 MG	183	PALFORZIA CAP 4-17YRS	156	PANCRELIPASE (LIP-PROT-AMYL) DR	
OXYCODONE W/ ACETAMINOPHEN TAB		PALFORZIA CAP ESCALAT	156	CAP 36000-114000-180000 UNIT	109
2.5-325 MG	184	PALFORZIA CAP LEVEL 0	156	PANCRELIPASE (LIP-PROT-AMYL) DR	
OXYCODONE W/ ACETAMINOPHEN TAB		PALFORZIA CAP LEVEL 1	156	CAP 36000-114000-180000 UNIT	109
2.5-325 MG	184	PALFORZIA CAP LEVEL 2	157	PANCRELIPASE (LIP-PROT-AMYL) DR	
OXYCODONE W/ ACETAMINOPHEN TAB		PALFORZIA CAP LEVEL 3	157	CAP 40000-126000-168000 UNIT	111
5-325 MG	183	PALFORZIA CAP LEVEL 4	157	PANCRELIPASE (LIP-PROT-AMYL) DR	
OXYCODONE W/ ACETAMINOPHEN TAB		PALFORZIA CAP LEVEL 5	157	CAP 60000-189600-252600 UNIT	111
5-325 MG	184	PALFORZIA CAP LEVEL 6	157	PANDEL CRE 0.1%	124
OXYCODONE W/ ACETAMINOPHEN TAB		PALFORZIA CAP LEVEL 7	157	PANRETIN GEL 0.1%	196
5-325 MG	184	PALFORZIA CAP LEVEL 8	157	PANTOPRAZOLE SODIUM EC TAB 20 MG	
OXYCODONE W/ ACETAMINOPHEN TAB		PALFORZIA CAP LEVEL 9	157	(BASE EQUIV)	190
7.5-325 MG	183	PALFORZIA CAP LEVEL 10	156	PANTOPRAZOLE SODIUM EC TAB 40 MG	
OXYCODONE W/ ACETAMINOPHEN TAB		PALFORZIA CAP LEVEL 11	157	(BASE EQUIV)	191
7.5-325 MG	184	PALFORZIA POW LEVEL 11	157	*PANTOPRAZOLE SODIUM SUSP 4 MG/	
OXYCODONE W/ ACETAMINOPHEN TAB		PALOPEGTERIPARATIDE PEN-INJ 168		ML (COMPOUND KIT)**	190
7.5-325 MG	184	MCG/0.56ML (TERIPARATIDE EQ)	110	PANTOPRAZOLE TAB 20MG	190
OXYCODONE W/ ACETAMINOPHEN TAB		PALOPEGTERIPARATIDE PEN-INJ 294		PANTOPRAZOLE TAB 40MG	191
10-325 MG	183	MCG/0.98ML (TERIPARATIDE EQ)	110	PARICALCITOL CAP 1 MCG	142
OXYCODONE W/ ACETAMINOPHEN TAB				PARICALCITOL CAP 1 MCG	142
10-325 MG	184			PARICALCITOL CAP 1 MCG	142

PARICALCITOL CAP 2 MCG	142	PEANUT POWDER-DNFP CAP SPRINKLE PACK 1 X 1 MG (1 MG DOSE)	156	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE SOLN 0.25 MG/ML***	214
PARICALCITOL CAP 2 MCG	142	PEANUT POWDER-DNFP CAP SPRINKLE PACK 2 X 20 MG (40 MG DOSE)	157	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE SOLN 0.25 MG/ML***	215
PARICALCITOL CAP 2 MCG	142	PEANUT POWDER-DNFP CAP SPRINKLE PACK 3 X 1 MG (3 MG DOSE)	156	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE SOLN 0.25 MG/ML***	218
PARICALCITOL CAP 4 MCG	142	PEANUT POWDER-DNFP CAP SPRINKLE PACK 4 X 20 MG (80 MG DOSE)	157	*PEDIATRIC MULTIPLE VITAMIN W/ FL- FE SUSP 0.25-7 MG/ML**	217
PARICALCITOL CAP 4 MCG	142	PEANUT POWDER-DNFP CAP SPRINKLE PACK 6 X 1 MG (6 MG DOSE)	157	*PEDIATRIC VITAMINS ACID W/ FLUORIDE SOLN 0.5 MG/ML***	92
PARI VORTEX MIS ADL MASK	157	PEANUT POWDER-DNFP CAP SPRINKLE PACK 20 MG (20 MG DOSE)	157	*PEDIATRIC VITAMINS ACID W/ FLUORIDE SOLN 0.25 MG/ML***	92
PARNATE TAB 10MG	170	PEANUT POWDER-DNFP PACK 2 X 1 MG & 10 MG (12 MG DOSE)	157	PEDI PEPTIDE LIQ 1.0	89
PAROMOMYCIN SULFATE CAP 250 MG	11	PEANUT POWDER-DNFP PACK 2 X 20 MG & 2 X 100 MG (240 MG DOSE)	156	PEDI PEPTIDE LIQ 1.5	89
PAROXETINE HCL ORAL SUSP 10 MG/5ML (BASE EQUIV)	205	PEANUT POWDER-DNFP PACK 2 X 100 MG (200 MG DOSE)	157	PEDI PEPTIDE LIQ 1.5 VAN	89
PAROXETINE HCL ORAL SUSP 10 MG/5ML (BASE EQUIV)	205	PEANUT POWDER-DNFP PACK 3 X 20 MG & 100 MG (160 MG DOSE)	157	PEDI STANDAR LIQ 1.2 CHOC	89
PAROXETINE HCL TAB 10 MG	205	PEANUT POWDER-DNFP PACK 20 MG & 100 MG (120 MG DOSE)	157	PEDI STANDAR LIQ 1.2 VAN	89
PAROXETINE HCL TAB 20 MG	205	PEANUT POWDER-DNFP STARTER PACK 0.5 & 1 & 1.5 & 3 & 6 MG	156	PEDVAX HIB INJ	211
PAROXETINE HCL TAB 30 MG	205	PEANUT POWDER-DNFP STARTER PACK 0.5 & 1 & 1.5 & 3 & 6 MG	156	*PED VIT ACD & L-METHYLFOLATE W/ FLUORIDE SUSP 0.5 MG/ML***	219
PAROXETINE HCL TAB 40 MG	205	PEANUT POWDER-DNFP STARTER PACK 0.5 & 1 & 1.5 & 3 MG	156	*PED VIT ACD & L-METHYLFOLATE W/ FLUORIDE SUSP 0.25 MG/ML***	219
PAROXETINE HCL TAB ER 24HR 12.5 MG	205	PEDIALYTE SOL ADV CARE	89	PEG 3350-KCL-NA BICARB-NACL-NA SULFATE FOR SOLN 236 GM	139
PAROXETINE HCL TAB ER 24HR 25 MG	205	PEDIALYTE SOL FRUIT PU	89	PEG 3350-KCL-NA BICARB-NACL-NA SULFATE FOR SOLN 236 GM	139
PAROXETINE HCL TAB ER 24HR 37.5 MG	205	PEDIAPRED SOL 5MG/5ML	124	PEG 3350-KCL-NA BICARB-NACL-NA SULFATE FOR SOLN 236 GM	139
PAROXETIN ER TAB 12.5MG	205	PEDIARIX INJ 0.5ML	211	PEG 3350-KCL-NA BICARB-NACL-NA SULFATE FOR SOLN 240 GM	139
PAROXETIN ER TAB 37.5MG	205	*PEDIATRIC MULTIPLE VITAMINS W/ FL-FE CHEW TAB 0.5-10 MG**	217	PEG 3350-KCL-NACL-NA SULFATE-MAG SULFATE FOR SOLN 178.7 GM	107
PAROXETINE SUS 10MG/5ML	205	*PEDIATRIC MULTIPLE VITAMINS W/ FL-FE DROPS 0.25-10 MG/ML**	215	PEG 3350-KCL-NACL-NA SULFATE-NA ASCORBATE-C FOR SOLN 100 GM	139
PAROXETINE TAB 10MG	205	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.5 MG***	215	PEG 3350-KCL-NACL-NA SULFATE-NA ASCORBATE-C FOR SOLN 100 GM	139
PAROXETINE TAB 20MG	205	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.5 MG***	218	PEG 3350-KCL-NACL-NA SULFATE-NA ASCORBATE-C FOR SOLN 140 GM	139
PAROXETINE TAB 25MG ER	205	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.25 MG***	215	PEG 3350-KCL-SOD BICARB-NACL FOR SOLN 420 GM	139
PAROXETINE TAB 30MG	205	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.25 MG***	215	PEG 3350-KCL-SOD BICARB-NACL FOR SOLN 420 GM	139
PAROXETINE TAB 40MG	205	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.25 MG***	215	PEG 3350/KCL SOL /SODIUM	139
PATIROMER SORBITE CALCIUM FOR SUSP PACKET 1 GM (BASE EQ)	93	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.25 MG***	218	PEG 3350 POW	138
PATIROMER SORBITE CALCIUM FOR SUSP PACKET 8.4 GM (BASE EQ)	93	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.25 MG***	218	PEG 3350 POW	139
PATIROMER SORBITE CALCIUM FOR SUSP PACKET 16.8 GM (BASE EQ)	93	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 1 MG***	214	PEG-3350 SOL ELECTROL	139
PATIROMER SORBITE CALCIUM FOR SUSP PACKET 25.2 GM (BASE EQ)	93	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 1 MG***	215	PEGASYS INJ	15
PAXIL SUS 10MG/5ML	205	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 1 MG***	218	PEGASYS INJ 180MCG/M	16
PAXLOVID PAK	43	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 1 MG***	215	PEG BASE OIN	157
PAXLOVID TAB 150-100	43	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 1 MG***	218	PEGCETACOPLAN SUBCUTANEOUS SOLN 1080 MG/20ML (54 MG/ML)	53
PAXLOVID TAB 300-100	43	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE SOLN 0.5 MG/ML***	215	PEGFILGRASTIM-CBQV SOLN AUTO- INJECTOR 6 MG/0.6ML	54
PAZOPANIB HCL TAB 400 MG (BASE EQUIV)	168	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE SOLN 0.5 MG/ML***	218	PEGFILGRASTIM-CBQV SOLN PREFILLED SYRINGE 6 MG/0.6ML	54
PAZOPANIB TAB 400MG	168				
PCCA ACACIA SYP BASE	157				
PCCA COBASE OIN #1	157				
PCCA CUSTOM CRE LIPO-MAX	157				
PCCA LIPOSOM CRE DRY	157				
PCCA LIPOSOM CRE NORMAL	157				
PCCA LIPOSOM CRE OILY	157				
PCCA LIPOSOM CRE SENSITIV	157				
PCCA-PLUS SUS	157				
PCCA SWEET SYP -SF	157				
PCCA SYRUP SYP VEHICLE	157				
PEANUT ALLERGEN POWDER-DNFP MAINTENANCE PACKET 300 MG	157				
PEANUT ALLERGEN POWDER-DNFP TITRATION PACKET 300 MG	157				

PEGFILGRASTIM SOLN PREFILLED			
SYRINGE 6 MG/0.6ML	53	PEN NEEDLES MIS 30GX3/16	158
PEGINTERFERON ALFA-2A INJ 180 MCG/		PEN NEEDLES MIS 30GX5/16	78
ML	16	PEN NEEDLES MIS 30GX5MM	158
PEGINTERFERON ALFA-2A SOLN		PEN NEEDLES MIS 30GX8MM	78
PREFILLED SYR 180 MCG/0.5ML	15	PEN NEEDLES MIS 31GX1/4"	158
PEGINTERFERON BETA-1A IM SOLN		PEN NEEDLES MIS 31GX3/16	158
PREFILLED SYR 125 MCG/0.5ML	172	PEN NEEDLES MIS 31GX5/16	158
PEGINTERFERON BETA-1A SOLN AUTO-		PEN NEEDLES MIS 31GX5MM	158
INJ 63 & 94 MCG/0.5ML PACK	172	PEN NEEDLES MIS 31GX6MM	158
PEGINTERFERON BETA-1A SOLN AUTO-		PEN NEEDLES MIS 31GX8MM	158
INJECTOR 125 MCG/0.5ML	172	PEN NEEDLES MIS 32GX4MM	78
PEGINTERFERON BETA-1A SOLN		PEN NEEDLES MIS 32GX5/32	78
PREFILLED SYRINGE 125 MCG/0.5ML	172	PEN NEEDLES MIS 32GX5MM	78
PEGINTERFERON BETA-1A SOLN PREF		PEN NEEDLES MIS 32GX6MM	78
SYR 63 & 94 MCG/0.5ML PACK	172	PEN NEEDLES MIS 32GX8MM	158
PEG/NASUL/C/ SOL NACL/POT	139	PEN NEEDLES MIS 33GX5/32	158
PEG-PREP KIT	139	PENTACEL INJ	211
PEMAZYRE TAB 4.5MG	94	PENTAMIDINE INH 300MG	41
PEMAZYRE TAB 9MG	94	PENTAMIDINE ISETHIONATE FOR	
PEMAZYRE TAB 13.5MG	94	NEBULIZATION SOLN 300 MG	41
PEMIGATINIB TAB 4.5 MG	94	PENTAZ/NALOX TAB 50-0.5MG	184
PEMIGATINIB TAB 9 MG	94	PENTAZOCINE W/ NALOXONE HCL TAB	
PEMIGATINIB TAB 13.5 MG	94	50-0.5 MG	184
PENBRAYA INJ	211	PENTIPS MIS 29GX12MM	158
PENCICLOVIR CREAM 1%	36	PENTIPS MIS 31GX5MM	158
PENICILLAMINE TAB 250 MG	111	PENTIPS MIS 31GX8MM	158
PENICILLAMINE TAB 250 MG	111	PENTIPS MIS 32GX4MM	78
PENICILLAMIN TAB 250MG	111	PENTIPS MIS 32GX6MM	78
PENICILLIN V POTASSIUM FOR SOLN 125		PENTOXIFYLLINE TAB ER 400 MG	62
MG/5ML	52	PENTOXIFYLLI TAB 400MG ER	62
PENICILLIN V POTASSIUM FOR SOLN		PEPTAMEN AF LIQ UNFLAVOR	89
250 MG/5ML	52	PEPTICATE POW	158
PENICILLIN V POTASSIUM TAB 250 MG	52	PERAMPANEL SUSP 0.5 MG/ML	113
PENICILLIN V POTASSIUM TAB 500 MG	52	PERAMPANEL TAB 2 MG	114
PENICILLN VK SOL 125/5ML	52	PERAMPANEL TAB 2MG	114
PENICILLN VK SOL 250/5ML	52	PERAMPANEL TAB 4 MG	114
PENICILLN VK TAB 250MG	52	PERAMPANEL TAB 4MG	114
PENICILLN VK TAB 500MG	52	PERAMPANEL TAB 6 MG	114
PENMENVY INJ	211	PERAMPANEL TAB 6MG	114
PEN NEEDLE MIS 29GX3/16	157	PERAMPANEL TAB 8 MG	114
PEN NEEDLE MIS 29GX5/16	157	PERAMPANEL TAB 8MG	114
PEN NEEDLE MIS 31GX4MM	157	PERAMPANEL TAB 10 MG	114
PEN NEEDLE MIS 31GX5MM	157	PERAMPANEL TAB 10MG	114
PEN NEEDLE MIS 31GX6MM	157	PERAMPANEL TAB 12 MG	114
PEN NEEDLE MIS 32GX4MM	78	PERAMPANEL TAB 12MG	114
PEN NEEDLE MIS 32GX5MM	78	PERATIVE LIQ 1.3 CAL	89
PEN NEEDLE MIS 32GX6MM	78	PERCOCET TAB 2.5-325	184
PEN NEEDLE MIS 33GX4MM	157	PERCOCET TAB 5-325MG	184
PEN NEEDLE MIS 33GX5/32	157	PERCOCET TAB 7.5-325	184
PEN NEEDLE MIS 33GX5MM	157	PERCOCET TAB 10-325MG	184
PEN NEEDLE MIS 33GX6MM	158	PERFECT POIN MIS 25GX1"	158
PEN NEEDLES MIS 29GX1/2"	158	PERFECT POIN MIS LANC 28G	78
PEN NEEDLES MIS 29GX10MM	158	PERFECT POIN MIS LANC 30G	78
PEN NEEDLES MIS 29GX12.7	158	PERFLUOROHEXYLOCTANE OPHTH	
PEN NEEDLES MIS 29GX12MM	158	SOLN 1.338 GM/ML	175
		PERIDEX SOL 0.12%	67
		PERINDOPRIL ERBUMINE TAB 2 MG	14
		PERINDOPRIL ERBUMINE TAB 4 MG	14
		PERINDOPRIL ERBUMINE TAB 8 MG	14
		PERINDOPRIL TAB 2MG	14
		PERINDOPRIL TAB 4MG	14
		PERINDOPRIL TAB 8MG	14
		PERIOGARD SOL 0.12%	67
		PERMETHRIN CRE 5%	187
		PERMETHRIN CREAM 5%	186
		PERPHEN/AMIT TAB 2-10MG	209
		PERPHEN/AMIT TAB 2-25MG	209
		PERPHEN/AMIT TAB 4-10MG	209
		PERPHEN/AMIT TAB 4-25MG	209
		PERPHEN/AMIT TAB 4-50MG	209
		PERPHENAZINE-AMITRIPTYLINE TAB	
		2-10 MG	209
		PERPHENAZINE-AMITRIPTYLINE TAB	
		2-25 MG	209
		PERPHENAZINE-AMITRIPTYLINE TAB	
		4-10 MG	209
		PERPHENAZINE-AMITRIPTYLINE TAB	
		4-25 MG	209
		PERPHENAZINE-AMITRIPTYLINE TAB	
		4-50 MG	209
		PERPHENAZINE TAB 2 MG	32
		PERPHENAZINE TAB 2MG	32
		PERPHENAZINE TAB 4 MG	32
		PERPHENAZINE TAB 4MG	32
		PERPHENAZINE TAB 8 MG	32
		PERPHENAZINE TAB 8MG	32
		PERPHENAZINE TAB 16 MG	32
		PERPHENAZINE TAB 16MG	32
		PERTZYE CAP 4000UNIT	109
		PERTZYE CAP 8000UNIT	109
		PERTZYE CAP 16000U	109
		PERTZYE CAP 24000U	109
		PETROLATUM GEL WHITE	158
		PETROLATUM OINTMENT	158
		PETROLATUM OIN WHITE	158
		PETROLATUM OIN YELLOW	158
		PEXIDARTINIB HCL CAP 125 MG (BASE	
		EQUIVALENT)	169
		PFD 2 POW	216
		PFD TODDLER POW	216
		PFD TODDLER POW	216
		*PHARMACEUTICAL EXCIPIENTS (BULK)	
		LIQUID**	143
		*PHARMACEUTICAL EXCIPIENTS (BULK)	
		LIQUID**	155
		*PHARMACEUTICAL EXCIPIENTS (BULK)	
		LIQUID**	155
		PHENAZOPYRIDINE HCL TAB 100 MG	111
		PHENAZOPYRIDINE HCL TAB 100 MG	112
		PHENAZOPYRIDINE HCL TAB 200 MG	111

PHENAZOPYRIDINE HCL TAB 200 MG.....	111	PHENYL-FREE POW 2HP.....	216	PIMOZIDE TAB 2 MG.....	6
PHENAZOPYRIDINE HCL TAB 200 MG.....	112	PHENYTEK CAP 200MG.....	203	PIMOZIDE TAB 2MG.....	6
PHENAZOPYRID TAB 100MG.....	111	PHENYTEK CAP 300MG.....	203	PIMTREA TAB.....	103
PHENAZOPYRID TAB 200MG.....	111	PHENYTOIN CHEW TAB 50 MG.....	203	PINDOLOL TAB 5 MG.....	50
PHENAZO TAB 200MG.....	111	PHENYTOIN CHEW TAB 50 MG.....	203	PINDOLOL TAB 5MG.....	50
PHENELZINE SULFATE TAB 15 MG.....	170	PHENYTOIN CHW 50MG.....	203	PINDOLOL TAB 10 MG.....	50
PHENELZINE SULFATE TAB 15 MG.....	170	PHENYTOIN EX CAP 100MG.....	203	PINDOLOL TAB 10MG.....	50
PHENELZINE TAB 15MG.....	170	PHENYTOIN EX CAP 200MG.....	204	PIOGLITA/MET TAB 15-500MG.....	31
PHENOBARB ELX 20MG/5ML.....	27	PHENYTOIN EX CAP 300MG.....	204	PIOGLITA/MET TAB 15-850MG.....	31
PHENOBARBITAL ELIXIR 20 MG/5ML.....	27	PHENYTOIN SODIUM EXTENDED CAP 30 MG.....	203	PIOGLITAZONE HCL-GLIMEPIRIDE TAB 30-2 MG.....	29
PHENOBARBITAL ELIXIR 20 MG/5ML.....	27	PHENYTOIN SODIUM EXTENDED CAP 100 MG.....	203	PIOGLITAZONE HCL-GLIMEPIRIDE TAB 30-2 MG.....	31
PHENOBARBITAL TAB 15 MG.....	27	PHENYTOIN SODIUM EXTENDED CAP 100 MG.....	203	PIOGLITAZONE HCL-GLIMEPIRIDE TAB 30-4 MG.....	29
PHENOBARBITAL TAB 16.2 MG.....	27	PHENYTOIN SODIUM EXTENDED CAP 200 MG.....	203	PIOGLITAZONE HCL-GLIMEPIRIDE TAB 30-4 MG.....	31
PHENOBARBITAL TAB 30 MG.....	27	PHENYTOIN SODIUM EXTENDED CAP 200 MG.....	204	PIOGLITAZONE HCL-METFORMIN HCL TAB 15-500 MG.....	31
PHENOBARBITAL TAB 32.4 MG.....	27	PHENYTOIN SODIUM EXTENDED CAP 300 MG.....	203	PIOGLITAZONE HCL-METFORMIN HCL TAB 15-850 MG.....	31
PHENOBARBITAL TAB 60 MG.....	28	PHENYTOIN SODIUM EXTENDED CAP 300 MG.....	204	PIOGLITAZONE HCL TAB 15 MG (BASE EQUIV).....	31
PHENOBARBITAL TAB 64.8 MG.....	28	PHENYTOIN SUS 125/5ML.....	203	PIOGLITAZONE HCL TAB 30 MG (BASE EQUIV).....	31
PHENOBARBITAL TAB 97.2 MG.....	28	PHENYTOIN SUSP 125 MG/5ML.....	203	PIOGLITAZONE HCL TAB 45 MG (BASE EQUIV).....	31
PHENOBARBITAL TAB 100 MG.....	27	PHENYTOIN SUSP 125 MG/5ML.....	203	PIOGLITAZONE TAB 15MG.....	31
PHENOBARB SOL 20MG/5ML.....	27	PHILITH TAB 0.4-35.....	103	PIOGLITAZONE TAB 30MG.....	31
PHENOBARB TAB 15MG.....	27	PHOSPHA 250 TAB NEUTRAL.....	89	PIOGLITAZONE TAB 45MG.....	31
PHENOBARB TAB 16.2MG.....	27	PHOSPHOLINE SOL 0.125%OP.....	179	PIOGLIT/GLIM TAB 30-2MG.....	31
PHENOBARB TAB 30MG.....	27	PHOSPHOROUS TAB.....	89	PIOGLIT/GLIM TAB 30-4MG.....	31
PHENOBARB TAB 32.4MG.....	27	PHOSPHO-TRIN TAB 250 NEUT.....	89	PIP CONTROL LIQ.....	78
PHENOBARB TAB 60MG.....	28	PHOXILLUM SOL B22K/40.....	89	PIQRAY 200MG TAB DOSE.....	39
PHENOBARB TAB 64.8MG.....	28	PHOXILLUM SOL BK4/2.5.....	89	PIQRAY 250MG TAB DOSE.....	39
PHENOBARB TAB 97.2MG.....	28	PHYTONADIONE TAB 5 MG.....	216	PIQRAY 300MG TAB DOSE.....	39
PHENOBARB TAB 100MG.....	27	PHYTONADIONE TAB 5MG.....	216	PIRFENIDONE CAP 267 MG.....	194
PHENOL LIQ.....	24	PIFELTRO TAB 100MG.....	17	PIRFENIDONE CAP 267MG.....	194
PHENOL LIQ 89%.....	24	PILOCARPINE HCL OPHTH SOLN 1%.....	179	PIRFENIDONE TAB 267 MG.....	192
PHENOL LIQ 89%.....	24	PILOCARPINE HCL OPHTH SOLN 2%.....	179	PIRFENIDONE TAB 267MG.....	192
PHENOL LIQUID (BULK).....	24	PILOCARPINE HCL OPHTH SOLN 4%.....	179	PIRFENIDONE TAB 534 MG.....	194
PHENOL LIQUID (BULK).....	24	PILOCARPINE HCL TAB 5 MG.....	67	PIRFENIDONE TAB 534MG.....	194
PHENOL LIQUID (BULK).....	24	PILOCARPINE HCL TAB 5 MG.....	67	PIRFENIDONE TAB 801 MG.....	192
PHENOXYBENZA CAP 10MG.....	10	PILOCARPINE HCL TAB 7.5 MG.....	67	PIRFENIDONE TAB 801MG.....	192
PHENOXYBENZAMINE HCL CAP 10 MG.....	10	PILOCARPINE HCL TAB 7.5 MG.....	67	PIROXICAM CAP 10 MG.....	175
PHENYLADE60 POW.....	216	PILOCARPINE SOL 1% OP.....	179	PIROXICAM CAP 10MG.....	175
PHENYLADE60 POW DRNK MIX.....	216	PILOCARPINE SOL 2% OP.....	179	PIROXICAM CAP 20 MG.....	175
PHENYLADE POW ESSNTL.....	216	PILOCARPINE SOL 4% OP.....	179	PIROXICAM CAP 20MG.....	175
PHENYLADE POW GMP.....	216	PILOCARPINE TAB 5MG.....	67	PIROXICAM CAP 20MG.....	175
PHENYLADE POW GMP ULTR.....	89	PILOCARPINE TAB 7.5MG.....	67	PIRTOBRUTINIB TAB 50 MG.....	37
PHENYLALANINE PACKET 50 MG.....	89	PIMAVANSERIN TARTRATE CAP 34 MG (BASE EQUIVALENT).....	7	PIRTOBRUTINIB TAB 100 MG.....	37
PHENYLALANIN PAK 50MG.....	89	PIMAVANSERIN TARTRATE TAB 10 MG (BASE EQUIVALENT).....	7	PITOLISANT HCL TAB 4.45 MG (BASE EQUIVALENT).....	198
PHENYLBUTYRA POW SODIUM.....	109	PIMECROLIMUS CRE 1%.....	71	PITOLISANT HCL TAB 17.8 MG (BASE EQUIVALENT).....	198
PHENYLD GMP POW DHA/FIBR.....	216	PIMECROLIMUS CREAM 1%.....	71	PIVOT LIQ 1.5 CAL.....	89
PHENYLEPHRINE-CHLORPHEN-DM LIQUID 7.5-4-30 MG/5ML.....	194	PIMOZIDE TAB 1 MG.....	6	PKU AIR20 LIQ GOLD.....	89
PHENYLEPHRINE HCL OPHTH SOLN 2.5%.....	175	PIMOZIDE TAB 1MG.....	6		
PHENYLEPHRINE HCL OPHTH SOLN 2.5%.....	176				
PHENYLEPHRINE HCL OPHTH SOLN 10%.....	175				
PHENYLEPHRINE HCL OPHTH SOLN 10%.....	176				
PHENYLEPHRIN SOL 2.5% OP.....	176				
PHENYLEPHRIN SOL 10% OP.....	176				
PHENYL-FREE POW 1.....	158				
PHENYL-FREE POW 2.....	216				

PKU AIR20 LIQ GREEN	89	PNEUMOCOCCAL VACCINE		POLYETHYLENE GLYCOL 3350 ORAL	
PKU AIR20 LIQ YELLOW	89	POLYVALENT SOLN PREF SYR 25		POWDER 17 GM/SCOOP.....	138
PKU COOLER LIQ 15 ORNGE	89	MCG/0.5ML.....	211	POLYETHYLENE GLYCOL 3350 ORAL	
PKU COOLER LIQ 15 PRPLE	89	PNEUMOVAX 23 INJ 25/0.5	211	POWDER 17 GM/SCOOP.....	138
PKU COOLR 10 LIQ ORANGE.....	89	PNEUMOVAX 23 INJ 25/0.5	211	POLYETHYLENE GLYCOL 3350 ORAL	
PKU COOLR 10 LIQ PURPLE.....	90	PNV 27-CA/FE TAB /FA.....	217	POWDER 17 GM/SCOOP.....	138
PKU COOLR 10 LIQ RED.....	90	PNV-DHA CAP.....	217	POLYETHYLENE GLYCOL 3350 ORAL	
PKU COOLR 10 LIQ WHITE.....	90	PNV-DHA CAP DOCUSATE	217	POWDER 17 GM/SCOOP.....	138
PKU COOLR 15 LIQ RED.....	90	PNV-OMEGA CAP	217	POLYETHYLENE GLYCOL 3350 ORAL	
PKU COOLR 15 LIQ WHITE.....	90	PNV-SELECT TAB.....	217	POWDER 17 GM/SCOOP.....	138
PKU COOLR 20 LIQ ORANGE.....	90	PODOCON-25 SOL.....	71	POLYETHYLENE GLYCOL 3350 ORAL	
PKU COOLR 20 LIQ PURPLE.....	90	PODOFILOX GEL 0.5%	69	POWDER 17 GM/SCOOP.....	138
PKU COOLR 20 LIQ RED.....	90	PODOFILOX GEL 0.5%	71	POLYETHYLENE GLYCOL 3350 POWDER...	139
PKU COOLR 20 LIQ WHITE.....	90	PODOFILOX GEL 0.5%	71	POLYETHYLENE GLYCOL 8000 OINT	159
PKU EASY POW SHAKE&GO	216	PODOFILOX SOL 0.5%	71	POLYETHYLENE GLYCOL OINTMENT	143
PKU EASY TAB MICROTAB.....	158	PODOFILOX SOLN 0.5%.....	71	POLYETHYLENE GLYCOL OINTMENT	157
PKU EASY TAB PLUS.....	158	PODOPHYLLUM RESIN SOLN 25%	71	POLYETHYLENE GLYCOL OINTMENT	159
PKU GEL PAK.....	90	POLIOVIRUS VACCINE, IPV INJ SUSP	210	POLY GLYCOL LIQ 1450.....	140
PKU GOLIKE POW PL 4-16.....	158	POLYCIN OIN OP.....	176	POLY HUB MIS 18GX1"	137
PKU GOLIKE POW PLUS 16+.....	158	POLYETH GLYC OIN 8000.....	159	POLY HUB MIS 18GX1.5"	137
PKU SPHERE POW 15	90	POLYETH GLYC POW 1450	140	POLY HUB MIS 20GX1"	159
PKU SPHERE POW 20.....	90	POLYETH GLYC POW 3350	138	POLY HUB MIS 21GX1"	159
PKU START POW.....	216	POLYETH GLYC POW 3350 NF.....	138	POLY HUB MIS 21GX1.5"	159
PKU TRIO POW UNFLAVOR.....	216	POLYETHYLENE GLYCOL 1450 LIQUID	140	POLY HUB MIS 22GX1"	159
PKU TRIO POW VANILLA.....	216	POLYETHYLENE GLYCOL 1450 POWDER...	138	POLY HUB MIS 22GX1.5"	159
PLAN B TAB 1.5MG	189	POLYETHYLENE GLYCOL 1450 POWDER...	140	POLY HUB MIS 23GX1"	159
PLEGRIDY INJ	172	POLYETHYLENE GLYCOL 3350 ORAL		POLY HUB MIS 23GX1.5"	159
PLEGRIDY INJ	172	POWDER 17 GM/SCOOP.....	137	POLY HUB MIS 25GX1"	159
PLEGRIDY INJ PEN.....	172	POLYETHYLENE GLYCOL 3350 ORAL		POLY HUB MIS 25GX1.5"	159
PLEGRIDY INJ STARTER	172	POWDER 17 GM/SCOOP.....	137	POLY HUB MIS 25GX5/8".....	159
PLEGRIDY PEN INJ STARTER.....	172	POLYETHYLENE GLYCOL 3350 ORAL		POLY HUB MIS 27GX1/2".....	159
PLENVU SOL.....	139	POWDER 17 GM/SCOOP.....	137	POLY HUB MIS 30GX1/2".....	159
PLERIXAFOR INJ 24/1.2ML	53	POLYETHYLENE GLYCOL 3350 ORAL		POLYMAC GEL PROGEL.....	159
PLERIXAFOR SUBCUTANEOUS INJ 24		POWDER 17 GM/SCOOP.....	137	POLYMYXIN B/ SOL TRIMETHP.....	176
MG/1.2ML (20 MG/ML).....	53	POLYETHYLENE GLYCOL 3350 ORAL		POLYMYXIN B-TRIMETHOPRIM OPHTH	
PLERIXAFOR SUBCUTANEOUS INJ 24		POWDER 17 GM/SCOOP.....	137	SOLN 10000 UNIT/ML-0.1%	176
MG/1.2ML (20 MG/ML).....	53	POLYETHYLENE GLYCOL 3350 ORAL		POLYOX POW WSR-301.....	159
PLO20 GEL FLOWABLE.....	158	POWDER 17 GM/SCOOP.....	137	POLYOX WSR POW -301	159
PLO20 GEL NON-FLOW	159	POLYETHYLENE GLYCOL 3350 ORAL		POLYPEG OIN BASE.....	159
PLO GEL MEDIFLO.....	158	POWDER 17 GM/SCOOP.....	137	POLYSORBATE 80 LIQ	159
PLO MEDIFLO GEL 30.....	158	POLYETHYLENE GLYCOL 3350 ORAL		POLYSORBATE 80 LIQ	159
PLO MEDIFLO KIT 30 KIT	158	POWDER 17 GM/SCOOP.....	138	POLYSORBATE LIQ 80	159
PLO MEDIFLO KIT KIT	158	POLYETHYLENE GLYCOL 3350 ORAL		POLYSORBATE LIQ 80	159
PLO TRANSDER CRE	158	POWDER 17 GM/SCOOP.....	138	POLY-VI-FLOR CHW W/IRON.....	217
PNEUMOCOCCAL 15-VALENT		POLYETHYLENE GLYCOL 3350 ORAL		POLY-VI-FLOR SUS /IRON	217
CONJUGATE VACCINE SUS PREF SYR 0.5		POWDER 17 GM/SCOOP.....	138	POMALIDOMIDE CAP 1 MG	21
ML	212	POLYETHYLENE GLYCOL 3350 ORAL		POMALIDOMIDE CAP 2 MG	21
PNEUMOCOCCAL 20-VALENT		POWDER 17 GM/SCOOP.....	138	POMALIDOMIDE CAP 3 MG	21
CONJUGATE VACCINE SUS PREF SYR 0.5		POLYETHYLENE GLYCOL 3350 ORAL		POMALIDOMIDE CAP 4 MG	21
ML	211	POWDER 17 GM/SCOOP.....	138	POMALYST CAP 1MG.....	21
PNEUMOCOCCAL 21-VALENT		POLYETHYLENE GLYCOL 3350 ORAL		POMALYST CAP 2MG.....	21
CONJUGATE VACCINE SOLN PREF SYR		POWDER 17 GM/SCOOP.....	138	POMALYST CAP 3MG.....	21
0.5ML	209	POLYETHYLENE GLYCOL 3350 ORAL		POMALYST CAP 4MG.....	21
PNEUMOCOCCAL VACCINE		POWDER 17 GM/SCOOP.....	138	PONATINIB HCL TAB 15 MG (BASE EQUIV)	167
POLYVALENT INJ SOLN 25 MCG/0.5ML ...	211	POLYETHYLENE GLYCOL 3350 ORAL		PONATINIB HCL TAB 45 MG (BASE EQUIV)	167
		POWDER 17 GM/SCOOP.....	138		

PORTAGEN POW	217	POTASSIUM CHLORIDE TAB ER 10 MEQ	88	POT PHOS MONOBASIC W/SOD PHOS DI	
PORTIA-28 TAB	103	POTASSIUM CHLORIDE TAB ER 10 MEQ	90	& MONOBAS TAB 155-852-130MG	92
POSACONAZOLE FOR DELAYED RELEASE		POTASSIUM CHLORIDE TAB ER 15 MEQ	90	POT PHOSPHAT GRA DIBASIC	159
SUSP PACKET 300 MG	34	POTASSIUM CHLORIDE TAB ER 20 MEQ		POT & SOD CITRATES W/ CIT AC SOLN	
POSACONAZOLE SUS 40MG/ML	35	(1500 MG)	88	550-500-334 MG/5ML	92
POSACONAZOLE SUS 200/5ML	35	POTASSIUM CHLORIDE TAB ER 20 MEQ		POVIDONE-IODINE OPTH SOLN 5%	177
POSACONAZOLE SUSP 40 MG/ML	34	(1500 MG)	90	PPA/MMA POW EXPRESS	90
POSACONAZOLE SUSP 40 MG/ML	35	POTASSIUM CITRATE & CITRIC ACID		PRALSETINIB CAP 100 MG	167
POSACONAZOLE SUSP 40 MG/ML	35	POWDER PACK 3300-1002 MG	86	PRAMIPEXOLE DIHYDROCHLORIDE TAB	
POSACONAZOLE TAB 100MG DR	35	POTASSIUM CITRATE & CITRIC ACID		0.5 MG	82
POSACONAZOLE TAB DELAYED RELEASE		SOLN 1100-334 MG/5ML	87	PRAMIPEXOLE DIHYDROCHLORIDE TAB	
100 MG	35	POTASSIUM CITRATE TAB ER 5 MEQ (540		0.25 MG	82
POTASSIUM BICARBONATE-CITRIC ACID		MG)	90	PRAMIPEXOLE DIHYDROCHLORIDE TAB	
EFFER TAB 10 MEQ	86	POTASSIUM CITRATE TAB ER 5 MEQ (540		0.75 MG	82
POTASSIUM BICARBONATE-CITRIC ACID		MG)	92	PRAMIPEXOLE DIHYDROCHLORIDE TAB	
EFFER TAB 20 MEQ	86	POTASSIUM CITRATE TAB ER 10 MEQ		0.125 MG	81
POTASSIUM BICARBONATE EFFER TAB 25		(1080 MG)	90	PRAMIPEXOLE DIHYDROCHLORIDE TAB	
MEQ	86	POTASSIUM CITRATE TAB ER 10 MEQ		1.5 MG	82
POTASSIUM BICARBONATE EFFER TAB 25		(1080 MG)	92	PRAMIPEXOLE DIHYDROCHLORIDE TAB	
MEQ	88	POTASSIUM CITRATE TAB ER 15 MEQ		1 MG	82
POTASSIUM BICARBONATE EFFER TAB 25		(1620 MG)	90	PRAMIPEXOLE TAB 0.5MG	82
MEQ	88	POTASSIUM CITRATE TAB ER 15 MEQ		PRAMIPEXOLE TAB 0.25MG	82
POTASSIUM CHLORIDE CAP ER 8 MEQ	90	(1620 MG)	92	PRAMIPEXOLE TAB 0.75MG	82
POTASSIUM CHLORIDE CAP ER 10 MEQ	90	POTASSIUM IODIDE ORAL SOLN 1 GM/ML	159	PRAMIPEXOLE TAB 0.125MG	81
POTASSIUM CHLORIDE		POTASSIUM IODIDE ORAL SOLN 1 GM/ML	162	PRAMIPEXOLE TAB 1.5MG	82
MICROENCAPSULATED CRYE ER TAB 10		POTASSIUM PHOSPHATE DIBASIC		PRAMIPEXOLE TAB 1MG	82
MEQ	88	GRANULES	159	PRAMOSONE CRE 1-1%	71
POTASSIUM CHLORIDE		POTASSIUM PHOSPHATE MONOBASIC		PRAMOSONE CRE 1-2.5%	113
MICROENCAPSULATED CRYE ER TAB 10		TAB 500 MG	87	PRAMOSONE LOT 1%	71
MEQ	90	POTASSIUM & SODIUM ACID		PRAMOSONE LOT 1-1%	71
POTASSIUM CHLORIDE		PHOSPHATES TAB 305-700 MG	88	PRAMOSONE LOT 2.5%	71
MICROENCAPSULATED CRYE ER TAB 10		POT CHLORIDE CAP 8MEQ ER	90	PRAMOSONE OIN 1%	113
MEQ	90	POT CHLORIDE CAP 10MEQ ER	90	PRAMOSONE OIN 2.5%	113
POTASSIUM CHLORIDE		POT CHLORIDE POW 20MEQ	90	PRAMOTIC DRO 1-0.1%	186
MICROENCAPSULATED CRYE ER TAB 15		POT CHLORIDE SOL 10%	90	PRAMOXINE-CHLOROXYLENOL OTIC	
MEQ	88	POT CHLORIDE SOL 20%	90	LIQUID 1-0.1%	186
POTASSIUM CHLORIDE		POT CHLORIDE TAB 8MEQ ER	90	PRAMOXINE-HC AEROSOL FOAM 1-1%	70
MICROENCAPSULATED CRYE ER TAB 15		POT CHLORIDE TAB 10MEQ ER	90	PRAMOXINE-HC CREAM 1-1%	71
MEQ	90	POT CHLORIDE TAB 15MEQ ER	90	PRAMOXINE-HC CREAM 1-2.5%	113
POTASSIUM CHLORIDE		POT CHLORIDE TAB 20MEQ ER	90	PRAMOXINE-HC CREAM 1-2.5%	113
MICROENCAPSULATED CRYE ER TAB 20		POT CITRA ER TAB 540MG	90	PRAMOXINE-HC LOTION 1-1%	71
MEQ	88	POT CITRA ER TAB 1080MG	90	PRAMOXINE-HC LOTION 1-1%	71
POTASSIUM CHLORIDE		POT CITRA ER TAB 1620MG	90	PRAMOXINE-HC LOTION 1-2.5%	71
MICROENCAPSULATED CRYE ER TAB 20		POT CL MICRO TAB 10MEQ CR	90	PRAMOXINE-HC OINT 1-1%	113
MEQ	90	POT CL MICRO TAB 10MEQ ER	90	PRAMOXINE-HC OINT 1-2.5%	113
POTASSIUM CHLORIDE ORAL SOLN 10%		POT CL MICRO TAB 15MEQ ER	90	*PRASTERONE (DHEA) CREAM 4%	
(20 MEQ/15ML)	90	POT CL MICRO TAB 20MEQ ER	90	(COMPOUND KIT)***	147
POTASSIUM CHLORIDE ORAL SOLN 20%		POT IODIDE SOL 1GM/ML	159	*PRASTERONE (DHEA) CREAM 10%	
(40 MEQ/15ML)	90	POT PHOS MONOBASIC W/SOD PHOS DI		(COMPOUND KIT)***	147
POTASSIUM CHLORIDE POWDER PACKET		& MONOBAS TAB 155-852-130MG	87	PRASUGREL HCL TAB 5 MG (BASE EQUIV)	188
20 MEQ	88	POT PHOS MONOBASIC W/SOD PHOS DI		PRASUGREL HCL TAB 10 MG (BASE EQUIV)	188
POTASSIUM CHLORIDE POWDER PACKET		& MONOBAS TAB 155-852-130MG	89	PRASUGREL TAB 5MG	188
20 MEQ	90	POT PHOS MONOBASIC W/SOD PHOS DI		PRASUGREL TAB 10MG	188
POTASSIUM CHLORIDE TAB ER 8 MEQ		& MONOBAS TAB 155-852-130MG	89	PRAVASTATIN SODIUM TAB 10 MG	84
(600 MG)	88	POT PHOS MONOBASIC W/SOD PHOS DI		PRAVASTATIN SODIUM TAB 20 MG	84
POTASSIUM CHLORIDE TAB ER 8 MEQ		& MONOBAS TAB 155-852-130MG	89	PRAVASTATIN SODIUM TAB 40 MG	84
(600 MG)	90				

PRAVASTATIN SODIUM TAB 80 MG	84	PREDNISONE PAK 10MG	125	PREMIUM LECITHIN ORGANOGEL BASE	
PRAVASTATIN TAB 10MG	84	PREDNISONE SOL 5MG/5ML	125	GEL	158
PRAVASTATIN TAB 20MG	84	PREDNISONE TAB 1 MG	125	PREMIUM LECITHIN ORGANOGEL BASE	
PRAVASTATIN TAB 40MG	84	PREDNISONE TAB 1MG	125	GEL	158
PRAVASTATIN TAB 80MG	84	PREDNISONE TAB 2.5 MG	125	PREMIUM LECITHIN ORGANOGEL BASE	
PRAZQUANTEL TAB 600 MG	14	PREDNISONE TAB 2.5MG	125	GEL	158
PRAZQUANTEL TAB 600 MG	14	PREDNISONE TAB 5 MG	125	PREMIUM LECITHIN ORGANOGEL BASE	
PRAZQUANTEL TAB 600MG	14	PREDNISONE TAB 5MG	125	GEL	159
PRAZOSIN HCL CAP 1 MG	10	PREDNISONE TAB 10 MG	125	PREMIUM LECITHIN ORGANOGEL BASE	
PRAZOSIN HCL CAP 1 MG	10	PREDNISONE TAB 10MG	125	KIT	158
PRAZOSIN HCL CAP 1MG	10	PREDNISONE TAB 20 MG	125	PREMIUM LECITHIN ORGANOGEL BASE	
PRAZOSIN HCL CAP 2 MG	10	PREDNISONE TAB 20MG	125	KIT	158
PRAZOSIN HCL CAP 2 MG	10	PREDNISONE TAB 50 MG	125	PREMPHASE TAB	103
PRAZOSIN HCL CAP 2MG	10	PREDNISONE TAB 50MG	125	PREMPRO TAB	103
PRAZOSIN HCL CAP 5 MG	10	PREDNISONE TAB THERAPY PACK 5 MG		PREMPRO TAB 0.3-1.5	103
PRAZOSIN HCL CAP 5 MG	10	(21)	125	PREMPRO TAB 0.45-1.5	103
PRAZOSIN HCL CAP 5MG	10	PREDNISONE TAB THERAPY PACK 5 MG		PREMPRO TAB 0.625-5	103
PRECISION LIQ GLUC/KET	78	(48)	125	PRENA1 CHW	90
PRECISN XTRA TES KETONE	78	PREDNISONE TAB THERAPY PACK 10 MG		PRENA1 PEARL CAP	217
PRED MILD SUS 0.12% OP	177	(21)	125	PRENA1 TRUE MIS	90
PREDNISOLONE ACETATE OPHTH SUSP		PREDNISONE TAB THERAPY PACK 10 MG		PRENAISSANCE CAP	217
0.12%	177	(48)	125	PRENAISSANCE CAP PLUS	217
PREDNISOLONE ACETATE OPHTH SUSP 1%	177	PRED SOD PHO SOL 1% OP	177	PRENATAL 19 CHW 29-1MG	217
PREDNISOLONE SODIUM PHOSPHATE		PREGABALIN CAP 25 MG	105	PRENATAL 19 CHW TAB	217
OPHTH SOLN 1%	177	PREGABALIN CAP 25MG	105	PRENATAL 19 TAB 29-1MG	217
PREDNISOLONE SOD PHOS ORALLY		PREGABALIN CAP 50 MG	105	*PRENATAL MULTIVITAMINS &	
DISINTEGR TAB 10 MG (BASE EQ)	124	PREGABALIN CAP 50MG	105	MINERALS W/IRON & FA TAB 0.8 MG***	218
PREDNISOLONE SOD PHOS ORALLY		PREGABALIN CAP 75 MG	105	*PRENATAL MULTIVITAMINS &	
DISINTEGR TAB 10 MG (BASE EQ)	125	PREGABALIN CAP 75MG	105	MINERALS W/ IRON & FA TAB 1 MG***	216
PREDNISOLONE SOD PHOS ORALLY		PREGABALIN CAP 100 MG	105	*PRENATAL MULTIVITAMINS &	
DISINTEGR TAB 15 MG (BASE EQ)	124	PREGABALIN CAP 100MG	105	MINERALS W/ IRON & FA TAB 1 MG***	218
PREDNISOLONE SOD PHOS ORALLY		PREGABALIN CAP 150 MG	105	*PRENATAL MULTIVITAMINS &	
DISINTEGR TAB 15 MG (BASE EQ)	125	PREGABALIN CAP 150MG	105	MINERALS W/ IRON & FA TAB 1 MG***	218
PREDNISOLONE SOD PHOS ORALLY		PREGABALIN CAP 200 MG	105	*PRENATAL MV W/FE FUM-FA TAB 29-1	
DISINTEGR TAB 30 MG (BASE EQ)	124	PREGABALIN CAP 200MG	105	MG & DHA CAP 200 MG PACK *	216
PREDNISOLONE SOD PHOS ORALLY		PREGABALIN CAP 225 MG	105	*PRENATAL MV W/FE FUM-FA TAB 65-1	
DISINTEGR TAB 30 MG (BASE EQ)	125	PREGABALIN CAP 225MG	105	MG & DHA CAP 250 MG PACK *	219
PREDNISOLONE SOD PHOSPHATE ORAL		PREGABALIN CAP 300 MG	105	*PRENATAL MV W/FE POLY-FA CHW 29-1	
SOLN 5 MG/5ML (BASE EQUIV)	124	PREGABALIN CAP 300MG	105	MG & DHA CAP 250 MG PAK *	218
PREDNISOLONE SOD PHOSPHATE ORAL		PREGABALIN SOL 20MG/ML	105	*PRENATAL MV W/ FE POLYSAC CMLX-	
SOLN 15 MG/5ML (BASE EQUIV)	124	PREGABALIN SOLN 20 MG/ML	105	FA-DHA CAP 29-1-200 MG***	219
PREDNISOLONE SOL 15MG/5ML	124	PREGABALIN SOLN 20 MG/ML	105	PRENATAL TAB 27-1MG	217
PREDNISOLONE SOL 15MG/5ML	124	PREGESTIMIL POW	159	PRENATAL TAB PLUS	217
PREDNISOLONE SOLN 15 MG/5ML	124	PREHEVBRIO SUS 10MCG/ML	211	PRENATAL-U CAP 106.5-1	217
PREDNISOLONE SUS 1% OP	177	PREKUNIL TAB	217	*PRENATAL VITAMIN-FOLIC ACID TAB 1	
PREDNISOLONE TAB 5 MG	125	PREMARIN TAB 0.3MG	103	MG**	216
PREDNISOLONE TAB 5MG	125	PREMARIN TAB 0.9MG	103	*PRENATAL VITAMIN W/ IRON-FOLIC	
PREDNISOLONE TAB 10MG ODT	125	PREMARIN TAB 0.45MG	103	ACID TAB 90-1 MG***	89
PREDNISOLONE TAB 15MG ODT	125	PREMARIN TAB 0.625MG	103	*PRENATAL VIT W/ DSS-FE FUMARATE-	
PREDNISOLONE TAB 30MG ODT	125	PREMARIN TAB 1.25MG	103	FA TAB 29-1 MG***	217
PREDNISONE CON 5MG/ML	125	PREMARIN VAG CRE 0.625MG	103	*PRENATAL VIT W/ DSS-FE FUMARATE-	
PREDNISONE CONC 5 MG/ML	125	PREMESISRX TAB	217	FA TAB 29-1 MG***	218
PREDNISONE ORAL SOLN 5 MG/5ML	125	PREMIUM LECITHIN ORGANOGEL BASE		*PRENATAL VIT W/ DSS-IRON	
PREDNISONE PAK 5MG	125	GEL	154	CARBONYL-FA TAB 90-1 MG***	87
PREDNISONE PAK 5MG	125			*PRENATAL VIT W/ DSS-IRON	
PREDNISONE PAK 10MG	125			CARBONYL-FA TAB DR 29-1 MG***	85

*PRENATAL VIT W/ FE BISGLYCINATE CHELATE-FA TAB 29-1 MG***	213	*PRENATAL VIT W/ FE GLUCONATE-FA TAB 6-0.5 MG***	215	PRENATE TAB ELITE	217
*PRENATAL VIT W/ FE CBN-FE ASP GLYC- FA TAB 30-20-1 MG***	216	*PRENATAL VIT W/ FE GLY CYS-FA- OMEGA 3 FATTY ACIDS CAP***	214	*PRENAT-FE BIS-FE PROT SUCC-FA-CA TAB & OMEGA 3 CAP 200 PK**	214
*PRENATAL VIT W/ FE FUMARATE-FA CHEW TAB 29-1 MG***	214	*PRENATAL VIT W/ FE POLYSAC CMLPX- FA CHEW TAB 29-1 MG***	218	*PRENAT-FE BIS-FE PROT SUCC-FA-CA TAB & OMEGA 3 CAP 200 PK**	220
*PRENATAL VIT W/ FE FUMARATE-FA CHEW TAB 29-1 MG***	217	*PRENATAL VIT W/ IRON CARBONYL-FA TAB 29-1 MG***	218	*PRENAT MV & MIN W/ L-METHYLFOLATE-FA CHEW TAB 0.6-0.4 MG***	217
*PRENATAL VIT W/ FE FUMARATE-FA CHEW TAB 29-1 MG***	217	*PRENATAL VIT W/ IRON CARBONYL-FA TAB 30-1 MG***	215	PRENATVITE TAB COMPLETE	218
*PRENATAL VIT W/ FE FUMARATE-FA CHEW TAB 29-1 MG***	218	*PRENATAL VIT W/ IRON CARBONYL-FA TAB 50-1.25 MG***	214	PRENATVITE TAB PLUS	218
*PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG***	215	*PRENATAL VIT W/ IRON CARBONYL-FA TAB 50-1.25 MG***	216	PRENATVITE TAB RX	218
*PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG***	215	*PRENATAL VIT W/O VIT A W/ FE BISGLYCINATE-FA TAB 32-1 MG***	216	*PRENAT VIT W/ FE PHOS-FA-OMEGA CHEW TAB 3.33-0.333-34.8 MG*	219
*PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG***	215	*PRENATAL W/ B6-B12- CHOLECALCIFEROL-FOLIC ACID FILM 1 MG**	219	*PRENAT W/ B2-B6-B12-D3-FOLIC ACID CHEW TAB 1.4 MG**	90
*PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG***	216	*PRENATAL W/ CALCIUM-VIT B6-VIT B12-FA-GINGER TAB 1 MG***	217	*PRENAT W/ FEPOLYCMPLX- METHYLFOL-FA CHEW TAB 29-0.6-0.4 MG**	218
*PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG***	216	*PRENATAL W/ CALCIUM-VIT B6-VIT B12-FA-GINGER TAB 1 MG***	218	*PRENAT W/FE POLY-METHYLFOL-FA- DHA CAP 29-0.6-0.4-200 MG***	219
*PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG***	216	*PRENATAL W/ FE ASP GLY-L METHYLFOL-FA TAB 20-0.6-0.4 MG***	217	*PRENAT W/FE POLY-METHYLFOL-FA- DHA CAP 90-0.6-0.4-200 MG***	219
*PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG***	217	*PRENATAL W/FE FUM-FE POLY -FA- OMEGA 3 CAP 35-1 MG***	218	*PRENAT W/FE POLY-NA FERED-FA TAB 25-1 & OMEGA CAP 400 MG***	214
*PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG***	217	*PRENATAL W/FE FUM-FE POLY -FA- OMEGA 3 CAP 53.5-38-1 MG***	214	*PRENAT W/ IRON CBN-FE ASP GLYC-FA- OMEGA CAP 30-10-1-200 MG*	216
*PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG***	219	*PRENATAL W/FE FUM-FE POLY -FA- OMEGA 3 CAP 53.5-38-1 MG***	219	*PRENAT W/O A W/FEASPG-METHFOL- FA-DHA CAP 10-0.6-0.4-200 MG*	217
*PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG***	219	*PRENATAL W/O A VIT W/ FE FUMARATE- FA CAP 106.5-1 MG***	217	*PRENAT W/O A W/FEASPG-METHFOL- FA-DHA CAP 18-0.6-0.4-300 MG*	217
*PRENATAL VIT W/ FE FUMARATE-FA TAB 28-1 MG***	219	*PRENATAL W/O A W/FE CBN-DSS-FA- DHA CAP 28-1-250 MG***	217	*PRENAT W/O A W/FEASPG-METHFOL- FA-DHA CAP 18-0.6-0.4-300 MG*	218
*PRENATAL VIT W/ FE FUMARATE-FA TAB 29-1 MG***	214	*PRENATAL W/O A W/FECBN-FE ASP GLYC-FA-FISH CAP 50-1-476 MG*	216	*PRENAT W/O A W/FEASP-METHLF-FA- OMEG CAP 30-0.75-0.25-470MG*	218
*PRENATAL VIT W/ FE FUMARATE-FA TAB 29-1 MG***	215	*PRENATAL W/O A W/FE FUM-FE POLY-FA CAP 20-20-1.25 MG***	218	*PRENAT W/O A W/ FE BISGLYC-FA TAB 32-1 MG & OMEGA CAP PACK*	216
*PRENATAL VIT W/ FE FUMARATE-FA TAB 60-1 MG***	217	*PRENATAL W/O A W/FE FUM-FE POLY-FA CAP 85-1 MG***	215	*PRENAT W/OA W/FECB-FEASP-METH- FA-DHA CAP 18-0.6-0.4-350 MG*	218
*PRENATAL VIT W/ FE FUMARATE-FA TAB 60-1 MG***	219	*PRENATAL W/O A W/FE FUM-FE POLY-FA CAP 130-92.4-1 MG***	214	*PRENAT W/O A W/FECBN-BISG- METHYLF-DHA CAP 38-1-225 MG**	216
*PRENATAL VIT W/ FE FUMARATE-FA TAB 65-1 MG***	219	*PRENATAL W/O A W/ FEFUM-L METHYLFOL-FA TAB 18-0.6-0.4 MG***	219	*PRENAT W/O A W/FECBN-FEASPGLYC- FA-OMEGA CAP 35-5-1-200 MG**	216
*PRENATAL VIT W/ FE FUM-FA-OMEGA 3 CAP 28-1-200 MG***	213	*PRENATAL W/O VIT A W/ FE FUM-DSS- FA-DHA CAP 27-1.25-300 MG*	217	*PRENAT W/O A W/FECBN-FEGL-DSS-FA TAB 90 & DHA CAP 300MG PAK*	213
*PRENATAL VIT W/ FE FUM-FA-OMEGA 3 CAP 28-1-200 MG***	218	*PRENATAL W/O VIT A W/ FE FUM-DSS- FA-DHA CAP 29-1.25-325 MG*	217	*PRENAT W/O A W/FECBN-FEGL-DSS-FA TAB & DHA CAP 300 MG PACK*	213
*PRENATAL VIT W/ FE FUM-FA-OMEGA 3 CAP 28-1-200 MG***	219	PRENATE AM TAB 1MG	218	*PRENAT W/O A W/FECBN-FEGLU-FA TAB 20-1 MG & VIT B6 TAB PAK*	213
*PRENATAL VIT W/ FE FUM-FA-OMEGA 3 CAP 28-1-200 MG***	220	PRENATE CAP ENHANCE	217	*PRENAT W/O A W/FECBN-METHYLF-FA- DHA CAP 31-0.6-0.4-200 MG**	219
*PRENATAL VIT W/ FE FUM-FE BISGLYCIN-FA CHEW TAB 28-1 MG***	215	PRENATE CAP ESSENT	217	*PRENAT W/O A W/FECBN-METHYLF-FA- DHA CAP 31-0.6-0.4-200 MG**	220
*PRENATAL VIT W/ FE FUM- METHYLFOLATE-FA TAB 27-0.6-0.4 MG***	217	PRENATE CAP PIXIE	217	*PRENAT W/O A W/FE CHEL-FA TAB 30-1.4 MG & DHA CAP 300MG PK*	90
		PRENATE CAP RESTORE	217	*PRENAT W/O A W/FE CHEL-FA TAB 30-1.4 MG & DHA CAP 300MG PK*	92
		PRENATE CHW 0.6-0.4	217		
		PRENATE DHA CAP	218		
		PRENATE MINI CAP	218		

*PRENAT W/O A W/ FE FUMARATE-METHYLFOLATE-FA-OMEGA 3 CAP***	217	PRIMIDONE TAB 50 MG	107	PROGESTERONE POW MICRONIZ	160
*PRENAT W/O A W/FE FUM-FE CBN-DSS-FA-DHA CAP 27-1-260 MG***	213	PRIMIDONE TAB 50MG	107	PROGESTERONE SUP 100MG	189
*PRENAT W/O A W/FE FUM-FE CBN-FA-DHA CAP 27-1-200 MG***	213	PRIMIDONE TAB 125 MG	107	PROGESTERONE VAGINAL GEL 4%	188
*PRENAT W/O A W/FEFUM-METHFOL-FA-DHA CAP 27-0.6-0.4-300 MG**	217	PRIMIDONE TAB 125MG	107	PROGESTERONE VAGINAL GEL 8%	188
*PRENAT W/O A W/FEFUM-METHFOL-FA-DHA CAP 27-0.6-0.4-300 MG**	220	PRIMIDONE TAB 250 MG	107	PROGESTERONE VAGINAL INSERT 100 MG	188
*PRENAT W/O A W/FEFUM-METHFOL-FA-DHA CAP 27-0.6-0.4-400 MG**	217	PRIMIDONE TAB 250MG	107	PROGESTERONE VAGINAL INSERT 100 MG	189
*PRENAT W/O A W/FEFUM-METHFOL-FA-DHA CAP 28-0.6-0.4-400 MG**	217	PRIORIX INJ	211	PROGLYCEM SUS 50MG/ML	115
*PRENAT W/O A W/FEFUM-METHFOL-FA-DHA CAP 30-0.6-0.4-200 MG**	219	PRISMASOL SOL 0/0/1.2	90	PROGRAF CAP 0.5MG	133
*PRENAT W/OA W/FEFUM-NA FERED-FA-DHA CAP ER 30-1.4-200 MG***	217	PRISMASOL SOL 0/2.5	90	PROGRAF CAP 1MG	133
*PRENAT W/OA W/FEFUM-NA FERED-FA-DHA CAP ER 30-1.4-200 MG***	219	PRISMASOL SOL 2/0	91	PROGRAF CAP 5MG	133
PREPIDIL GEL 0.5MG/3G	112	PRISMASOL SOL 2/3.5	91	PROGRAF GRA 0.2MG	133
PREPROTEIN LIQ	159	PRISMASOL SOL 4/0/1.2	91	PROGRAF GRA 1MG	133
PREPROTEIN LIQ 20	159	PRISMASOL SOL 4/2.5	91	PROMACTA POW 12.5MG	53
PRE PROTEIN POW	159	PRISMASOL SOL B22GK4/0	91	PROMACTA POW 25MG	53
PRE PROTEIN TAB	159	PROBEN/COLCH TAB 500-0.5	35	PROMETHAZINE-DM SYRUP 6.25-15 MG/5ML	196
PRETOMANID TAB 200 MG	37	PROBENECID TAB 500 MG	35	PROMETHAZINE-DM SYRUP 6.25-15 MG/5ML	196
PRETOMANID TAB 200MG	37	PROBENECID TAB 500MG	35	PROMETHAZINE HCL ORAL SOLN 6.25 MG/5ML	36
PREVALITE POW 4GM	85	PROBIOTIC AD CAP FORMULA	108	PROMETHAZINE HCL ORAL SOLN 6.25 MG/5ML	36
PREVALITE POW 4GM PK	85	PROBIOTIC CAP ACIDOPHI	108	PROMETHAZINE HCL SUPPOS 12.5 MG	36
PREVDNT 5000 CRE 1.1% PLS	67	*PROBIOTIC PRODUCT - CAP**	108	PROMETHAZINE HCL SUPPOS 12.5 MG	36
PREVDNT 5000 GEL 1.1-5%	67	PROCARBAZINE HCL CAP 50 MG	9	PROMETHAZINE HCL SUPPOS 25 MG	36
PREVDNT 5000 GEL 1.1% DRY	67	PROCEL 100 POW	160	PROMETHAZINE HCL SUPPOS 25 MG	36
PREVDNT 5000 PST 1.1%	67	PROCEL POW	159	PROMETHAZINE HCL SUPPOS 25 MG	36
PREVDNT 5000 PST 1.1% KID	67	PROCEL POW CHOCOLAT	160	PROMETHAZINE HCL SUPPOS 50 MG	36
PREVENT DROP MIS 31GX1/4"	159	PROCHAMBER MIS VHC	160	PROMETHAZINE HCL TAB 12.5 MG	36
PREVENT DROP MIS 31GX5/16	159	PROCHLORPERAZINE MALEATE TAB 5 MG (BASE EQUIVALENT)	32	PROMETHAZINE HCL TAB 25 MG	36
PREVENT SAFE MIS 31GX1/4"	159	PROCHLORPERAZINE MALEATE TAB 10 MG (BASE EQUIVALENT)	32	PROMETHAZINE HCL TAB 50 MG	36
PREVENT SAFE MIS 31GX5/16	159	PROCHLORPERAZINE SUPPOS 25 MG	32	PROMETHAZINE-PHENYLEPHRINE-CODEINE SYRUP 6.25-5-10 MG/5ML	194
PREVIDENT GEL 1.1% BER	67	PROCHLORPER SUP 25MG	32	PROMETHAZINE & PHENYLEPHRINE SYRUP 6.25-5 MG/5ML	194
PREVIDENT GEL 1.1% MIN	67	PROCHLORPER TAB 5MG	32	PROMETHAZINE & PHENYLEPHRINE SYRUP 6.25-5 MG/5ML	194
PREVIDENT SOL 0.2%	67	PROCHLORPER TAB 10MG	32	PROMETHAZINE SOL 6.25/5ML	36
PREVNAR 20 INJ	211	PRO COMFORT MIS 0.5/30G	159	PROMETHAZINE SOL 12.5/10	36
PREVYMIS PAK 20MG	15	PRO COMFORT MIS 0.5/31G	159	PROMETHAZINE SOL DM	196
PREVYMIS PAK 120MG	15	PRO COMFORT MIS 1ML/30G	159	PROMETHAZINE SUP 12.5MG	36
PREVYMIS TAB 240MG	15	PRO COMFORT MIS 1ML/31G	159	PROMETHAZINE SUP 25MG	36
PREVYMIS TAB 480MG	15	PRO COMFORT MIS LANC 30G	78	PROMETHAZINE SYP DM	196
PREZCOBIX TAB 675/150	19	PROCTOFOAM AER HC 1%	113	PROMETHAZINE TAB 12.5MG	36
PREZCOBIX TAB 800-150	19	PROCTO-MED CRE HC 2.5%	113	PROMETHAZINE TAB 25MG	36
PREZISTA SUS 100MG/ML	19	PROCTOSOL HC CRE 2.5%	113	PROMETHAZINE TAB 50MG	36
PREZISTA TAB 75MG	19	PROCTOZONE CRE -HC 2.5%	113	PROMETHAZINE W/ CODEINE SYRUP 6.25-10 MG/5ML	194
PREZISTA TAB 150MG	19	PROCYSBI GRA 75MG	110	PROMETH/COD SOL 6.25-10	194
PRIFTIN TAB 150MG	42	PROCYSBI GRA 300MG	109	PROMETHEGAN SUP 12.5MG	36
PRIMACARE CAP	218	PROFILNINE INJ 500UNIT	120	PROMETHEGAN SUP 25MG	36
PRIMAQUINE PHOSPHATE TAB 26.3 MG (15 MG BASE)	41	PROFILNINE INJ 1000UNIT	120	PROMETHEGAN SUP 50MG	36
PRIMAQUINE TAB 26.3MG	41	PROGESTERONE CAP 100 MG	189	PROMETH/PE SOL 6.25-5/5	194
		PROGESTERONE CAP 100MG	189	PROMETH VC SYP 6.25-5/5	194
		PROGESTERONE CAP 200 MG	189	PROMETH VC/ SYP CODEINE	194
		PROGESTERONE CAP 200MG	189	PROMOTE 1.0 LIQ VANILLA	91
		PROGESTERONE IM IN OIL 50 MG/ML	189	PROMOTE 1.0 LIQ W/ FIBER	91
		PROGESTERONE INJ 50MG/ML	189		
		PROGESTERONE MICRONIZED (BULK) POWDER	160		

PRONAL GEL 40-10%.....	73	PROTEIN CHEW TAB 500 MG.....	160	PRURADIK LOT 10%.....	187
PROPAFENONE CAP 225MG ER.....	22	PROTEIN CHEW TAB 500 MG.....	160	PRUSSIAN BLUE INSOLUBLE CAP 0.5 GM..	161
PROPAFENONE CAP 325MG ER.....	22	PROTEIN CHW 500MG.....	160	PSEUDOEPHED-BROMPHEN-DM SYRUP	
PROPAFENONE CAP 425MG ER.....	22	PROTEIN CHW 500MG.....	160	30-2-10 MG/5ML.....	195
PROPAFENONE HCL CAP ER 12HR 225 MG ..	22	PROTEINEX-18 LIQ LEM/LIME.....	91	PSEUDOEPHED-BROMPHEN-DM SYRUP	
PROPAFENONE HCL CAP ER 12HR 325 MG ..	22	PROTEINEX LIQ.....	91	30-2-10 MG/5ML.....	195
PROPAFENONE HCL CAP ER 12HR 425 MG ..	22	PROTEINEX LIQ COC PINE.....	91	PSEUDOEPHED-BROMPHEN-DM SYRUP	
PROPAFENONE HCL TAB 150 MG.....	22	PROTEINEX LIQ P18.....	91	30-2-10 MG/5ML.....	195
PROPAFENONE HCL TAB 225 MG.....	22	*PROTEIN LIQUID (ENTERAL)***.....	160	PSEUDOEPHED-BROMPHEN-DM SYRUP	
PROPAFENONE HCL TAB 300 MG.....	22	*PROTEIN LIQUID (ENTERAL)***.....	160	30-2-10 MG/5ML.....	195
PROPAFENONE TAB 150MG.....	22	*PROTEIN ORAL LIQUID***.....	144	PSEUDOEPHED-BROMPHEN-DM SYRUP	
PROPAFENONE TAB 225MG.....	22	*PROTEIN ORAL LIQUID***.....	144	30-2-10 MG/5ML.....	195
PROPAFENONE TAB 300MG.....	22	*PROTEIN ORAL LIQUID***.....	144	PSS SAFE LAN MIS.....	78
PROPARACAINE HCL OPTH SOLN 0.5%...175		*PROTEIN ORAL LIQUID***.....	144	PSS SEL LANC MIS.....	78
PROPARACAINE HCL OPTH SOLN 0.5%...176		*PROTEIN ORAL LIQUID***.....	155	PSS SEL PLAT MIS.....	80
PROPARACAINE SOL 0.5% OP.....	176	*PROTEIN ORAL LIQUID***.....	160	PSYLLIUM POWDER 43%.....	137
PROPRANOLOL CAP 60MG ER.....	50	*PROTEIN ORAL LIQUID***.....	165	PSYLLIUM POWDER 43%.....	138
PROPRANOLOL CAP 80MG ER.....	50	*PROTEIN ORAL PACK***.....	165	PULMOCARE LIQ 1.5 VAN.....	91
PROPRANOLOL CAP 120MG ER.....	50	*PROTEIN ORAL POWDER***.....	144	PULMOSAL NEB 7%.....	194
PROPRANOLOL CAP 160MG ER.....	50	*PROTEIN ORAL POWDER***.....	151	PULMOZYME SOL 1MG/ML.....	194
PROPRANOLOL HCL CAP ER 24HR 60 MG...50		*PROTEIN ORAL POWDER***.....	151	PURAMINO POW DHA/ARA.....	160
PROPRANOLOL HCL CAP ER 24HR 80 MG...50		*PROTEIN ORAL POWDER***.....	156	PURE BLISS LIQ ORG/IRON.....	160
PROPRANOLOL HCL CAP ER 24HR 120 MG..50		*PROTEIN ORAL POWDER***.....	159	PURE COMFORT MIS 31GX5MM.....	160
PROPRANOLOL HCL CAP ER 24HR 160 MG..50		*PROTEIN ORAL POWDER***.....	159	PURE COMFORT MIS 31GX6MM.....	160
PROPRANOLOL HCL ORAL SOLN 20		*PROTEIN ORAL POWDER***.....	160	PURE COMFORT MIS 32GX4MM.....	78
MG/5ML.....	50	*PROTEIN ORAL POWDER***.....	160	PURIFIED LIQ WATER.....	160
PROPRANOLOL HCL ORAL SOLN 40		*PROTEIN ORAL POWDER***.....	160	PURIXAN SUS 20MG/ML.....	37
MG/5ML.....	50	*PROTEIN ORAL POWDER***.....	164	PUSH 20+ ADV LIQ APPLE.....	91
PROPRANOLOL HCL TAB 10 MG.....	50	*PROTEIN ORAL POWDER***.....	164	PUSH 20+ ADV LIQ BLK CHRY.....	91
PROPRANOLOL HCL TAB 20 MG.....	50	*PROTEIN ORAL POWDER***.....	164	PUSH 20+ ADV LIQ ORANGE.....	91
PROPRANOLOL HCL TAB 40 MG.....	50	*PROTEIN ORAL POWDER***.....	164	PYRAZINAMIDE TAB 500 MG.....	42
PROPRANOLOL HCL TAB 60 MG.....	50	*PROTEIN ORAL POWDER***.....	164	PYRAZINAMIDE TAB 500MG.....	42
PROPRANOLOL HCL TAB 80 MG.....	50	*PROTEIN ORAL POWDER***.....	164	PYRIDIUM TAB 100MG.....	112
PROPRANOLOL SOL 20MG/5ML.....	50	*PROTEIN ORAL POWDER***.....	164	PYRIDIUM TAB 200MG.....	112
PROPRANOLOL SOL 40MG/5ML.....	50	*PROTEIN ORAL POWDER***.....	165	PYRIDOSTIGMINE BROMIDE ORAL SOLN	
PROPRANOLOL TAB 10MG.....	50	*PROTEIN ORAL POWDER***.....	165	60 MG/5ML.....	186
PROPRANOLOL TAB 20MG.....	50	PROTEIN POW 80%.....	160	PYRIDOSTIGMINE BROMIDE ORAL SOLN	
PROPRANOLOL TAB 40MG.....	50	PROTEIN POW 80%.....	160	60 MG/5ML.....	186
PROPRANOLOL TAB 60MG.....	50	PROTEIN POW 90%.....	160	PYRIDOSTIGMINE BROMIDE TAB 60 MG ..	186
PROPRANOLOL TAB 80MG.....	50	PROTEIN POWDER 80%.....	160	PYRIDOSTIGMINE BROMIDE TAB ER	
PROPYLTHIOURACIL TAB 50 MG.....	42	PROTEIN POWDER 80%.....	160	24HR 105 MG (PROTECTIVE).....	160
PROPYLTHIOUR TAB 50MG.....	42	PROTRIPTYLINE HCL TAB 5 MG.....	209	PYRIDOSTIGMINE BROMIDE TAB ER 180	
PROQUAD INJ.....	211	PROTRIPTYLINE HCL TAB 10 MG.....	209	MG.....	186
PROSOURCE LIQ NO CARB.....	160	PROTRIPTYLIN TAB 5MG.....	209	PYRIDOSTIGMI SOL 60MG/5ML.....	186
PROSOURCE LIQ PLUS.....	91	PROTRIPTYLIN TAB 10MG.....	209	PYRIDOSTIGMI TAB ER 105MG.....	160
PROSOURCE LIQ PLUS.....	91	PROVERA TAB 2.5MG.....	189	PYRIDOSTIGMI TAB ER 180MG.....	186
PROSOURCE LIQ TF20.....	160	PROVERA TAB 5MG.....	189	PYRIDOSTIGM TAB 60MG.....	186
PROSOURCE LIQ TF FREE.....	160	PROVERA TAB 10MG.....	189	PYRIMETHAMINE TAB 25 MG.....	40
PROSOURCE LIQ ZAC.....	91	PROVIDA OB CAP.....	218	PYRIMETHAMINE TAB 25 MG.....	41
PRO-STAT LIQ FIBER.....	91	PRUCALOPRIDE SUCCINATE TAB 1 MG		PYRIMETHAMIN TAB 25MG.....	41
PROSYNMINIC POW.....	160	(BASE EQUIVALENT).....	108	PYROGALL ACD OIN.....	71
PROTALITY LIQ CHOCOLAT.....	91	PRUCALOPRIDE SUCCINATE TAB 2 MG		PYROGALLOL-CHLOROBUTANOL OINT	
PROTALITY LIQ VANILLA.....	91	(BASE EQUIVALENT).....	108	25-2%.....	71
PROT COOKIE MIS OATRAISN.....	218	PRUCALOPRIDE TAB 1MG.....	108	PYRUKYND TAB 5MG.....	120
*PROTEIN CAP***.....	151	PRUCALOPRIDE TAB 2MG.....	108	PYRUKYND TAB 5MG TP.....	120
				PYRUKYND TAB 20MG.....	120



PYRUKYND TAB 20MGX5MG	120	QUICK TOUCH MIS 31GX5MM.....	160	RADICAVA ORS SUS STARTER.....	64
PYRUKYND TAB 50MG	120	QUICK TOUCH MIS 31GX6MM.....	160	RADIOGARDASE CAP 0.5GM.....	161
PYRUKYND TAB 50MGX20M	120	QUICK TOUCH MIS 31GX8MM.....	160	RAGWITEK SUB	194
QBRELIS SOL 1MG/ML.....	14	QUICK TOUCH MIS 32GX4MM	78	RA LAXATIVE POW.....	138
QC ASPIRIN CHW 81MG.....	175	QUICK TOUCH MIS 32GX5MM	78	RA LAXATIVE TAB 5MG EC	140
QC CHILD ASA CHW 81MG	175	QUICK TOUCH MIS 32GX6MM	78	RA L-LYSINE TAB 500MG.....	160
QC LAXATIVE TAB 5MG EC.....	140	QUICK TOUCH MIS 32GX8MM	160	RA L-LYSINE TAB 1000MG.....	160
QC NICOTINE DIS 14MG/24H	202	QUICK TOUCH MIS 33GX4MM	160	RALOXIFENE HCL TAB 60 MG.....	196
QC NICOTINE DIS 21MG/24H	202	QUICK TOUCH MIS 33GX5MM	160	RALOXIFENE TAB 60MG	196
QFITLIA INJ 20/0.2ML.....	160	QUICK TOUCH MIS 33GX6MM	160	RALTEGRAVIR POTASSIUM CHEW TAB 25	
QFITLIA INJ 50/0.5ML	160	QUICK TOUCH MIS 33GX8MM	160	MG (BASE EQUIV)	16
QNAPRIL/HCTZ TAB 10-12.5	62	QUINAPRIL HCL TAB 5 MG	14	RALTEGRAVIR POTASSIUM CHEW TAB	
QNAPRIL/HCTZ TAB 20-12.5	63	QUINAPRIL HCL TAB 10 MG.....	14	100 MG (BASE EQUIV)	16
QNAPRIL/HCTZ TAB 20-25MG	63	QUINAPRIL HCL TAB 20 MG.....	14	RALTEGRAVIR POTASSIUM PACKET FOR	
QUADRACEL INJ.....	211	QUINAPRIL HCL TAB 40 MG	14	SUSP 100 MG (BASE EQUIV)	16
QUADRACEL INJ 0.5ML.....	211	QUINAPRIL-HYDROCHLOROTHIAZIDE		RALTEGRAVIR POTASSIUM TAB 400 MG	
QUALAQUIN CAP 324MG.....	41	TAB 10-12.5 MG.....	60	(BASE EQUIV).....	16
QUESTRAN POW 4GM.....	85	QUINAPRIL-HYDROCHLOROTHIAZIDE		RALTEGRAVIR POTASSIUM TAB 600 MG	
QUESTRAN POW 4GM.....	85	TAB 10-12.5 MG.....	62	(BASE EQUIV).....	16
QUESTRAN POW 4GM LITE	85	QUINAPRIL-HYDROCHLOROTHIAZIDE		RAMELTEON TAB 8 MG	198
QUETIAPINE FUMARATE TAB 25 MG	8	TAB 20-12.5 MG	60	RAMELTEON TAB 8MG	198
QUETIAPINE FUMARATE TAB 50 MG.....	8	QUINAPRIL-HYDROCHLOROTHIAZIDE		RAMIPRIL CAP 1.25 MG	14
QUETIAPINE FUMARATE TAB 100 MG.....	8	TAB 20-12.5 MG	63	RAMIPRIL CAP 1.25MG.....	14
QUETIAPINE FUMARATE TAB 150 MG.....	8	QUINAPRIL-HYDROCHLOROTHIAZIDE		RAMIPRIL CAP 2.5 MG	14
QUETIAPINE FUMARATE TAB 200 MG	8	TAB 20-25 MG.....	63	RAMIPRIL CAP 2.5MG.....	14
QUETIAPINE FUMARATE TAB 300 MG	8	QUINAPRIL TAB 5MG	14	RAMIPRIL CAP 5 MG	14
QUETIAPINE FUMARATE TAB 400 MG	8	QUINAPRIL TAB 10MG	14	RAMIPRIL CAP 5MG	14
QUETIAPINE FUMARATE TAB ER 24HR 50 MG 8		QUINAPRIL TAB 20MG	14	RAMIPRIL CAP 10 MG	14
QUETIAPINE FUMARATE TAB ER 24HR		QUINAPRIL TAB 40MG	14	RAMIPRIL CAP 10MG	14
150 MG.....	8	QUINIDINE GL TAB 324MG CR	22	RA NICOTINE DIS 21MG/24H	202
QUETIAPINE FUMARATE TAB ER 24HR		QUINIDINE GL TAB 324MG ER	22	RA NICOTINE GUM 4MG	202
200 MG	8	QUINIDINE GLUCONATE TAB ER 324 MG.....	22	RA NICOTINE LOZ 2MG MINT	202
QUETIAPINE FUMARATE TAB ER 24HR		QUINIDINE GLUCONATE TAB ER 324 MG.....	22	RA NICOTINE LOZ 4MG MINT	202
300 MG	8	QUINIDINE SULFATE TAB 200 MG	22	RANOLAZINE ER GRANULES PACKET	
QUETIAPINE FUMARATE TAB ER 24HR		QUINIDINE SULFATE TAB 300 MG	22	500 MG	60
400 MG	8	QUINIDINE SU TAB 200MG	22	RANOLAZINE ER GRANULES PACKET	
QUETIAPINE TAB 25MG.....	8	QUINIDINE SU TAB 300MG	22	1000 MG	60
QUETIAPINE TAB 50MG	8	QUININE SULFATE CAP 324 MG.....	41	RANOLAZINE TAB 500MG ER	63
QUETIAPINE TAB 50MG ER	8	QUININE SULFATE CAP 324 MG.....	41	RANOLAZINE TAB 1000MG	63
QUETIAPINE TAB 100MG	8	QUININE SULF CAP 324MG	41	RANOLAZINE TAB ER 12HR 500 MG	63
QUETIAPINE TAB 150MG	8	QUINTET CONT SOL GHG/NORM	78	RANOLAZINE TAB ER 12HR 1000 MG.....	63
QUETIAPINE TAB 150MG ER	8	QUIZARTINIB DIHYDROCHLORIDE TAB		RAPAMUNE SOL 1MG/ML	133
QUETIAPINE TAB 200MG	8	17.7 MG.....	39	RA PEN NEEDL MIS 31GX3/16.....	160
QUETIAPINE TAB 200MG ER.....	8	QUIZARTINIB DIHYDROCHLORIDE TAB		RASPBERRY SYP	161
QUETIAPINE TAB 300MG	8	26.5 MG	39	RASPBERRY SYRUP	161
QUETIAPINE TAB 300MG ER.....	8	QULIPTA TAB 10MG	55	RASUVO INJ 7.5MG	133
QUETIAPINE TAB 400MG	8	QULIPTA TAB 30MG.....	55	RASUVO INJ 10MG.....	133
QUETIAPINE TAB 400MG ER.....	8	QULIPTA TAB 60MG.....	56	RASUVO INJ 12.5MG	133
QUFLORA PED CHW 0.5MG	218	QVAR REDIIHA AER 80MCG.....	20	RASUVO INJ 15MG.....	133
QUFLORA PED CHW 0.25MG	218	QVAR REDIIHAL AER 40MCG.....	20	RASUVO INJ 17.5MG	133
QUFLORA PED CHW 1MG.....	218	RA ASPIRIN CHW 81MG	175	RASUVO INJ 20MG	133
QUFLORA PED DRO 0.5MG/ML	218	RA ASPIRIN TAB 81MG EC.....	175	RASUVO INJ 22.5MG.....	133
QUFLORA PED DRO 0.25MG.....	218	RABEPRAZOLE SODIUM EC TAB 20 MG	191	RASUVO INJ 25MG.....	133
QUICK TOUCH MIS 29GX12.7	160	RABEPRAZOLE TAB 20MG.....	191	RASUVO INJ 30MG	133
QUICK TOUCH MIS 31GX4MM.....	160	RADICAVA ORS SUS 105/5ML	64	RAYASAL CRE 5.9%.....	161

RISANKIZUMAB-RZAA SUBCUTANEOUS SOLN CARTRIDGE 360 MG/2.4ML	134	RIVAROXABAN TAB 10 MG	27	ROMVIMZA CAP 14MG	39
RISDIPLAM FOR SOLN 0.75 MG/ML	94	RIVAROXABAN TAB 15 MG	27	ROMVIMZA CAP 20MG	39
RISDIPLAM TAB 5 MG	94	RIVAROXABAN TAB 20 MG	27	ROMVIMZA CAP 30MG	39
RISEDRONATE SODIUM TAB 5 MG	142	RIVAROXABAN TAB STARTER THERAPY PACK 15 MG & 20 MG	27	ROPINIROLE HYDROCHLORIDE TAB 0.5 MG	82
RISEDRONATE SODIUM TAB 30 MG	142	RIVASTIGMINE CAP 1.5MG	65	ROPINIROLE HYDROCHLORIDE TAB 0.25 MG	82
RISEDRONATE SODIUM TAB 35 MG	142	RIVASTIGMINE CAP 3MG	65	ROPINIROLE HYDROCHLORIDE TAB 1 MG	82
RISEDRONATE SODIUM TAB 150 MG	142	RIVASTIGMINE CAP 4.5MG	65	ROPINIROLE HYDROCHLORIDE TAB 2 MG	82
RISEDRONATE TAB 5MG	142	RIVASTIGMINE CAP 6MG	65	ROPINIROLE HYDROCHLORIDE TAB 3 MG	82
RISEDRONATE TAB 30MG	142	RIVASTIGMINE DIS 4.6MG/24	65	ROPINIROLE HYDROCHLORIDE TAB 4 MG	82
RISEDRONATE TAB 35MG	142	RIVASTIGMINE DIS 9.5MG/24	65	ROPINIROLE HYDROCHLORIDE TAB 5 MG	82
RISEDRONATE TAB 150MG	142	RIVASTIGMINE DIS 13.3/24	65	ROPINIROLE TAB 0.5MG	82
RISPERIDONE ORALLY DISINTEGRATING TAB 0.5 MG	8	RIVASTIGMINE TARTRATE CAP 1.5 MG (BASE EQUIVALENT)	65	ROPINIROLE TAB 0.25MG	82
RISPERIDONE ORALLY DISINTEGRATING TAB 0.25 MG	8	RIVASTIGMINE TARTRATE CAP 3 MG (BASE EQUIVALENT)	65	ROPINIROLE TAB 1MG	82
RISPERIDONE ORALLY DISINTEGRATING TAB 1 MG	8	RIVASTIGMINE TARTRATE CAP 4.5 MG (BASE EQUIVALENT)	65	ROPINIROLE TAB 2MG	82
RISPERIDONE ORALLY DISINTEGRATING TAB 2 MG	9	RIVASTIGMINE TARTRATE CAP 6 MG (BASE EQUIVALENT)	65	ROPINIROLE TAB 3MG	82
RISPERIDONE ORALLY DISINTEGRATING TAB 3 MG	9	RIVASTIGMINE TD PATCH 24HR 4.6 MG/24HR	65	ROPINIROLE TAB 4MG	82
RISPERIDONE ORALLY DISINTEGRATING TAB 4 MG	9	RIVASTIGMINE TD PATCH 24HR 9.5 MG/24HR	65	ROPINIROLE TAB 5MG	82
RISPERIDONE SOL 1MG/ML	8	RIVASTIGMINE TD PATCH 24HR 13.3 MG/24HR	65	ROSUVASTATIN CALCIUM SPRINKLE CAP 5 MG (BASE EQUIVALENT)	83
RISPERIDONE SOLN 1 MG/ML	8	RIVASTIGMINE TD PATCH 24HR 13.3 MG/24HR	65	ROSUVASTATIN CALCIUM SPRINKLE CAP 10 MG (BASE EQUIVALENT)	83
RISPERIDONE TAB 0.5 MG	8	RIVELSA TAB	103	ROSUVASTATIN CALCIUM SPRINKLE CAP 20 MG (BASE EQUIVALENT)	83
RISPERIDONE TAB 0.5MG	8	RIVFLOZA INJ 80/0.5ML	112	ROSUVASTATIN CALCIUM SPRINKLE CAP 40 MG (BASE EQUIVALENT)	83
RISPERIDONE TAB 0.5MG OD	8	RIVFLOZA INJ 128/0.8	112	ROSUVASTATIN CALCIUM TAB 5 MG	84
RISPERIDONE TAB 0.25 MG	8	RIVFLOZA INJ 160MG/ML	112	ROSUVASTATIN CALCIUM TAB 10 MG	84
RISPERIDONE TAB 0.25MG	8	RIVIVE SPR 3/0.1ML	186	ROSUVASTATIN CALCIUM TAB 20 MG	84
RISPERIDONE TAB 0.25 ODT	8	RIXUBIS INJ 250 UNIT	120	ROSUVASTATIN CALCIUM TAB 40 MG	84
RISPERIDONE TAB 1 MG	8	RIXUBIS INJ 500UNIT	121	ROSUVASTATIN TAB 5MG	84
RISPERIDONE TAB 1MG	8	RIXUBIS INJ 1000UNIT	120	ROSUVASTATIN TAB 10MG	84
RISPERIDONE TAB 1MG ODT	8	RIXUBIS INJ 2000UNIT	120	ROSUVASTATIN TAB 20MG	84
RISPERIDONE TAB 2 MG	8	RIXUBIS INJ 3000UNIT	120	ROSYRAH TAB	103
RISPERIDONE TAB 2MG	8	RIZATRIPTAN BENZOATE ORAL DISINTEGRATING TAB 5 MG (BASE EQ)	196	ROTARIX SUS	211
RISPERIDONE TAB 2MG ODT	9	RIZATRIPTAN BENZOATE ORAL DISINTEGRATING TAB 10 MG (BASE EQ)	196	ROTATEQ SOL	211
RISPERIDONE TAB 3 MG	9	RIZATRIPTAN BENZOATE TAB 5 MG (BASE EQUIVALENT)	196	ROTAVIRUS VACCINE, LIVE ORAL PENTAVALENT SOLN	211
RISPERIDONE TAB 3MG	9	RIZATRIPTAN BENZOATE TAB 10 MG (BASE EQUIVALENT)	196	ROTAVIRUS VACCINE, LIVE ORAL SUSP	211
RISPERIDONE TAB 3MG ODT	9	RIZATRIPTAN TAB 5MG	196	ROWEEPR TAB 500MG	28
RISPERIDONE TAB 4 MG	9	RIZATRIPTAN TAB 5MG ODT	196	ROZLYTREK CAP 100MG	39
RISPERIDONE TAB 4MG	9	RIZATRIPTAN TAB 10MG	196	ROZLYTREK CAP 200MG	39
RISPERIDONE TAB 4MG ODT	9	RIZATRIPTAN TAB 10MG ODT	196	ROZLYTREK PAK 50MG	39
RITLECITINIB TOSYLATE CAP 50 MG (BASE EQUIV)	70	ROCKLATAN DRO	176	RSVPREF3 VACCINE RECOMB ADJUVANTED FOR IM SUSP 120 MCG/0.5ML	209
RITONAVIR CAP 100 MG	19	ROFLUMILAST CREAM 0.3%	73	RSV PRE-FUSION F A&B VAC RECOMB FOR IM SOLN 120 MCG/0.5ML	209
RITONAVIR POWDER PACKET 100 MG	19	ROFLUMILAST CREAM 0.15%	73	RSV PRE-FUSION F A&B VAC RECOMB FOR IM SOLN 120 MCG/0.5ML	209
RITONAVIR TAB 100 MG	19	ROFLUMILAST FOAM 0.3%	74	RUCONEST INJ 2100UNIT	12
RITONAVIR TAB 100MG	19	ROFLUMILAST TAB 250 MCG	187	RUFINAMIDE SUS 40MG/ML	204
RIVAROXABAN FOR SUSP 1 MG/ML	26	ROFLUMILAST TAB 250MCG	187	RUFINAMIDE SUSP 40 MG/ML	204
RIVAROXABAN FOR SUSP 1 MG/ML	27	ROFLUMILAST TAB 500 MCG	187	RUFINAMIDE TAB 200 MG	204
RIVAROXABAN SUS 1MG/ML	26	ROFLUMILAST TAB 500MCG	187	RUFINAMIDE TAB 200MG	204
RIVAROXABAN TAB 2.5 MG	26				
RIVAROXABAN TAB 2.5 MG	27				
RIVAROXABAN TAB 2.5MG	26				



RUFINAMIDE TAB 400 MG	204	SALICATE LIQ 10%	161	SCSEMBLIX TAB 40MG	39
RUFINAMIDE TAB 400MG	204	SALICYLIC ACID CREAM 5.9%	161	SCSEMBLIX TAB 100MG	39
RUKOBIA TAB 600MG ER	18	SALICYLIC ACID FOAM 6% & UREA IN		SCOPOLAMINE DIS 1MG/3DAY	33
RUXOLITINIB PHOSPHATE TAB 5 MG		LACTIC ACID FOAM 35% KIT	73	SCOPOLAMINE TD PATCH 72HR 1	
(BASE EQUIVALENT)	168	SALICYLIC ACID LIQUID 10%	161	MG/3DAYS	33
RUXOLITINIB PHOSPHATE TAB 10 MG		SALICYLIC ACID SOLN 26%	161	SECUKINUMAB SUBCUTANEOUS AUTO-	
(BASE EQUIVALENT)	167	SALICYLIC AC SOL 26%	161	INJ 150 MG/ML (300 MG DOSE)	69
RUXOLITINIB PHOSPHATE TAB 15 MG		SALICYLIC & LACTIC ACIDS SOLN 16.7-		SECUKINUMAB SUBCUTANEOUS PREF	
(BASE EQUIVALENT)	167	16.7%	73	SYR 150 MG/ML (300 MG DOSE)	69
RUXOLITINIB PHOSPHATE TAB 20 MG		SALMETEROL XINAFOATE AER POW BA		SECUKINUMAB SUBCUTANEOUS SOLN	
(BASE EQUIVALENT)	167	50 MCG/ACT (BASE EQUIV)	55	AUTO-INJECTOR 150 MG/ML	69
RUXOLITINIB PHOSPHATE TAB 25 MG		SALSALATE TAB 500 MG	175	SECUKINUMAB SUBCUTANEOUS SOLN	
(BASE EQUIVALENT)	167	SALSALATE TAB 500MG	175	AUTO-INJECTOR 300 MG/2ML	69
RYBELSUS TAB 3MG	31	SALSALATE TAB 750 MG	175	SECUKINUMAB SUBCUTANEOUS SOLN	
RYBELSUS TAB 7MG	31	SALSALATE TAB 750MG	175	PREFILLED SYRINGE 75 MG/0.5ML	69
RYBELSUS TAB 14MG	31	SALVAX DUO KIT PLUS	73	SECUKINUMAB SUBCUTANEOUS SOLN	
RYDAPT CAP 25MG	169	SANDIMMUNE SOL 100MG/ML	133	PREFILLED SYRINGE 150 MG/ML	69
SACROSIDASE SOLN 8500 UNIT/ML	110	SANTYL OIN 250/GM	71	SECURESAFE MIS 29GX1/2"	161
SACUBITRIL-VALSARTAN SPRINKLE CAP		SAPROPTERIN DIHYDROCHLORIDE		SECURESAFE MIS 29GX1/2"	161
6-6 MG	61	POWDER PACKET 100 MG	110	SEGESTERONE ACE-ETHINYL	
SACUBITRIL-VALSARTAN SPRINKLE CAP		SAPROPTERIN DIHYDROCHLORIDE		ESTRADIOL VA RING 0.15-0.013 MG/24HR ..	95
15-16 MG	61	POWDER PACKET 100 MG	110	SELADELPAR LYSINE CAP 10 MG	108
SACUBITRIL-VALSARTAN TAB 24-26 MG	63	SAPROPTERIN DIHYDROCHLORIDE		SELECT-OB+ PAK DHA	218
SACUBITRIL-VALSARTAN TAB 49-51 MG	63	POWDER PACKET 500 MG	110	SELECT-OB CHW	218
SACUBITRIL-VALSARTAN TAB 97-103 MG	63	SAPROPTERIN DIHYDROCHLORIDE		SELECT-OB CHW	218
SACUB/VALSAR TAB 24-26MG	63	POWDER PACKET 500 MG	110	SELEGILINE CAP 5MG	170
SACUB/VALSAR TAB 49-51MG	63	SAPROPTERIN DIHYDROCHLORIDE TAB		SELEGILINE HCL CAP 5 MG	170
SACUB/VALSAR TAB 97-103MG	63	100 MG	110	SELEGILINE HCL TAB 5 MG	170
SAFE-T-LANCE MIS 21G	78	SAPROPTERIN DIHYDROCHLORIDE TAB		SELEGILINE TAB 5MG	170
SAFE-T-LANCE MIS 25G	78	100 MG	110	SELENIUM SULFIDE LOTION 2.5%	71
SAFE-T-LANCE MIS HI FLOW	78	SAPROPTERIN POW 100MG	110	SELENIUM SUL LOT 2.5%	71
SAFE-T-LANCE MIS LOW FLOW	79	SAPROPTERIN POW 500MG	110	SELEXIPAG TAB 200 MCG	192
SAFE-T-LANCE MIS NOR FLOW	79	SAPROPTERIN TAB 100MG	110	SELEXIPAG TAB 400 MCG	192
SAFE-T-PRO MIS LANCETS	79	SARGRAMOSTIM LYOPHILIZED FOR INJ		SELEXIPAG TAB 600 MCG	192
SAFE-T-PRO MIS PLUS	79	250 MCG	53	SELEXIPAG TAB 800 MCG	192
SAFETY 21G MIS LANCETS	79	SAVELLA MIS TITR PAK	105	SELEXIPAG TAB 1000 MCG	192
SAFETY 23G MIS LANCETS	79	SAVELLA TAB 12.5MG	105	SELEXIPAG TAB 1200 MCG	192
SAFETY 28G MIS LANCETS	79	SAVELLA TAB 25MG	106	SELEXIPAG TAB 1400 MCG	192
SAFETYGLIDE MIS 21GX1"	161	SAVELLA TAB 50MG	106	SELEXIPAG TAB 1600 MCG	192
SAFETYGLIDE MIS 21GX1.5"	161	SAVELLA TAB 100MG	105	SELEXIPAG TAB THERAPY PACK 200 MCG	
SAFTY NEEDLE MIS 18GX1"	137	SAXAGLIPTIN HCL TAB 2.5 MG (BASE		(140) & 800 MCG (60)	192
SAFTY NEEDLE MIS 18GX1.5"	137	EQUIV)	31	SELINEXOR TAB THERAPY PACK 10 MG	
SAFTY NEEDLE MIS 19GX1"	161	SAXAGLIPTIN HCL TAB 5 MG (BASE EQUIV) 31		(40 MG ONCE WEEKLY)	40
SAFTY NEEDLE MIS 19GX1.5"	161	SAXAGLIPTIN-METFORMIN HCL TAB ER		SELINEXOR TAB THERAPY PACK 20 MG	
SAFTY NEEDLE MIS 20GX1"	161	24HR 2.5-1000 MG	31	(60 MG TWICE WEEKLY)	40
SAFTY NEEDLE MIS 20GX1.5"	161	SAXAGLIPTIN-METFORMIN HCL TAB ER		SELINEXOR TAB THERAPY PACK 20 MG	
SAFTY NEEDLE MIS 21GX1"	161	24HR 5-500 MG	31	(80 MG TWICE WEEKLY)	40
SAFTY NEEDLE MIS 21GX1.5"	161	SAXAGLIPTIN-METFORMIN HCL TAB ER		SELINEXOR TAB THERAPY PACK 40 MG	
SAFTY NEEDLE MIS 22GX1"	161	24HR 5-1000 MG	31	(40 MG ONCE WEEKLY)	40
SAFTY NEEDLE MIS 22GX1.5"	161	SAXAGLIPTIN TAB 2.5MG	31	SELINEXOR TAB THERAPY PACK 40 MG	
SAFTY NEEDLE MIS 23GX1"	161	SAXAGLIPTIN TAB 5MG	31	(40 MG TWICE WEEKLY)	40
SAFTY NEEDLE MIS 25GX1"	161	SAXA/METFOR TAB 2.5-1000	31	SELINEXOR TAB THERAPY PACK 40 MG	
SAFTY NEEDLE MIS 25GX5/8"	161	SAXA/METFOR TAB 5-500MG	31	(80 MG ONCE WEEKLY)	40
SALAGEN TAB 5MG	67	SAXA/METFOR TAB 5-1000MG	31	SELINEXOR TAB THERAPY PACK 50 MG	
SALAGEN TAB 7.5MG	67	SCALACORT DK KIT	73	(100 MG ONCE WEEKLY)	40
		SCANDICAL POW	218		
		SCANDISHAKE POW VANILLA	218		
		SCSEMBLIX TAB 20MG	39		

SELINEXOR TAB THERAPY PACK 60 MG (60 MG ONCE WEEKLY)	40	SEVELAMER CARBONATE PACKET 0.8 GM .	187	SILVER SULFADIAZINE CREAM 1%	24
SELPERCATINIB CAP 40 MG	168	SEVELAMER CARBONATE PACKET 2.4 GM .	187	SILVER SULFADIAZINE CREAM 1%	24
SELPERCATINIB CAP 80 MG	168	SEVELAMER CARBONATE TAB 800 MG.	187	SILVER SULFADIAZINE CREAM 1%	24
SELPERCATINIB TAB 40 MG	168	SEVOFLURANE INHAL SOLN.	161	SIMILAC 360 LIQ 5 HMO	162
SELPERCATINIB TAB 80 MG	169	SEVOFLURANE INHAL SOLN.	164	SIMILAC 360 LIQ SENS HMO	162
SELPERCATINIB TAB 120 MG.	168	SEVOFLURANE SOL	161	SIMILAC 360 POW 5 HMO	162
SELPERCATINIB TAB 160 MG.	168	SF 5000 PLUS CRE 1.1%	67	SIMILAC 360 POW SENSITIV	162
SELUMETINIB SULFATE CAP 10 MG.	38	SF GEL 1.1%	67	SIMILAC ADV LIQ KOSHER	162
SELUMETINIB SULFATE CAP 25 MG.	38	SHAROBEL TAB 0.35MG.	189	SIMILAC ALIM LIQ IMMUNE	162
SELUMETINIB SULFATE CAP SPRINKLE 5 MG	38	SHARP CONTAI MIS	161	SIMILAC ALIM POW TODDLER	162
SELUMETINIB SULFATE CAP SPRINKLE 7.5 MG	38	SHARPS COLL MIS 0.05GAL	161	SIMILAC LIQ SENSITIV	162
SELZENTRY SOL 20MG/ML	18	SHARPS COLL MIS 5.4QT	161	SIMILAC POW NEOSURE	162
SELZENTRY TAB 25MG	18	SHARPS COLL MIS 6.9QT	161	SIMILAC SOY LIQ ISOMIL	162
SELZENTRY TAB 75MG	19	SHARPS COLL MIS 8.2QT	162	SIMILAC SOY POW ISOMIL	162
SELZENTRY TAB 150MG	18	*SHARPS CONTAINER - MISC***	144	SIMILAC SPEC LIQ PREMATUR.	162
SELZENTRY TAB 300MG	18	*SHARPS CONTAINER - MISC***	144	SIMILAC TOTL POW CMFT/IRO	162
SEMAGLUTIDE SOLN PEN-INJ 0.25 OR 0.5 MG/DOSE (2 MG/3ML)	31	*SHARPS CONTAINER - MISC***	144	SIMLIYA TAB 28 DAY	103
SEMAGLUTIDE SOLN PEN-INJ 1 MG/ DOSE (4 MG/3ML)	31	*SHARPS CONTAINER - MISC***	147	SIMPESSE TAB	103
SEMAGLUTIDE SOLN PEN-INJ 2 MG/ DOSE (8 MG/3ML)	31	*SHARPS CONTAINER - MISC***	156	SIMPLE SYP	162
SEMAGLUTIDE TAB 3 MG.	31	*SHARPS CONTAINER - MISC***	156	SIMPLE - SYRUP	162
SEMAGLUTIDE TAB 7 MG.	31	*SHARPS CONTAINER - MISC***	161	SIMPLE - SYRUP	163
SEMAGLUTIDE TAB 14 MG	31	*SHARPS CONTAINER - MISC***	161	SIMPLGEL 30 GEL	162
SE-NATAL 19 CHW	218	*SHARPS CONTAINER - MISC***	161	SIMPONI INJ 50/0.5ML	133
SE-NATAL 19 TAB	218	*SHARPS CONTAINER - MISC***	161	SIMPONI INJ 50/0.5ML	133
SENNOSIDES CHEW TAB 15 MG	138	*SHARPS CONTAINER - MISC***	162	SIMPONI INJ 100MG/ML	133
SERACAL POW	91	*SHARPS CONTAINER - MISC***	162	SIMPONI INJ 100MG/ML	133
SERACAL POW	218	*SHARPS CONTAINER - MISC***	162	SIMVASTATIN SUSP 20 MG/5ML (4 MG/ML) 84	
SERDEXMETHYLPHENIDATE- DEXMETHYLPHENIDATE CAP 26.1-5.2 MG ..	45	SHARPS CONTA MIS 0.05L	162	SIMVASTATIN SUSP 40 MG/5ML (8 MG/ML) 84	
SERDEXMETHYLPHENIDATE- DEXMETHYLPHENIDATE CAP 39.2-7.8 MG ..	45	SHARPS CONT MIS 1 QT.	162	SIMVASTATIN TAB 5 MG	84
SERDEXMETHYLPHENIDATE- DEXMETHYLPHENIDATE CAP 52.3-10.4 MG .	45	SHARPS UNIV MIS CONTAIN	162	SIMVASTATIN TAB 5MG	84
SEREVENT DIS AER 50MCG	55	SHINGRIX INJ 50/0.5ML	211	SIMVASTATIN TAB 10 MG	84
SERTRALINE CON 20MG/ML	205	SHORT RAGWEED POLLEN ALLERGEN EXTRACT SL TAB 12 AMB A 1-U	194	SIMVASTATIN TAB 10MG	84
SERTRALINE HCL ORAL CONCENTRATE FOR SOLUTION 20 MG/ML	205	SILDENAFIL CITRATE FOR SUSPENSION 10 MG/ML	191	SIMVASTATIN TAB 20 MG	84
SERTRALINE HCL TAB 25 MG	205	SILDENAFIL CITRATE TAB 20 MG	191	SIMVASTATIN TAB 20MG	84
SERTRALINE HCL TAB 50 MG	205	SILDENAFIL CITRATE TAB 25 MG	112	SIMVASTATIN TAB 40 MG	84
SERTRALINE HCL TAB 100 MG	205	SILDENAFIL CITRATE TAB 50 MG	112	SIMVASTATIN TAB 40MG	84
SERTRALINE TAB 25MG	205	SILDENAFIL CITRATE TAB 100 MG	112	SIMVASTATIN TAB 80 MG	84
SERTRALINE TAB 50MG	205	SILDENAFIL SUS 10MG/ML	191	SIMVASTATIN TAB 80MG	84
SERTRALINE TAB 100MG	205	SILDENAFIL TAB 20MG	191	SINEMET TAB 10-100MG	83
SERUM-DERIVED BOVINE IMMUNOGLOB/PROTEIN ISOLATE 5 GM PACKET	149	SILDENAFIL TAB 25MG	112	SINEMET TAB 25-100MG	83
SETLAKIN TAB	103	SILDENAFIL TAB 50MG	112	SINGLE-LET MIS 23G	79
SEVELAM CARB POW 0.8GM	187	SILDENAFIL TAB 100MG	112	SINGULAIR GRA 4MG	37
SEVELAM CARB POW 2.4GM	187	SILODOSIN CAP 4 MG	47	SIPONIMOD FUMARATE TAB 0.25 MG (7) STARTER PACK	172
SEVELAM CARB TAB 800MG	187	SILODOSIN CAP 4MG	47	SIPONIMOD FUMARATE TAB 0.25 MG (12) STARTER PACK	171
		SILODOSIN CAP 8 MG	47	SIPONIMOD FUMARATE TAB 0.25 MG (BASE EQUIV)	172
		SILODOSIN CAP 8MG	47	SIPONIMOD FUMARATE TAB 1 MG (BASE EQUIV)	172
		SILVADENE CRE 1%	24	SIPONIMOD FUMARATE TAB 2 MG (BASE EQUIV)	172
		SILVER NITRA SOL 0.5%	24	SIROLIMUS (BULK) POWDER	162
		SILVER NITRATE-POTASSIUM NITRATE APPLICATOR 75-25%	22	SIROLIMUS GEL 0.2%	68
		SILVER NITRATE SOLN 0.5%	24	SIROLIMUS ORAL SOLN 1 MG/ML	133
		SILVER SULFA CRE 1%	24		

SIROLIMUS ORAL SOLN 1 MG/ML	133	SOD CHLORIDE NEB 3%.....	195	SODIUM FLUORIDE GEL 1.1% (0.5% F)	67
SIROLIMUS POW.....	162	SOD CHLORIDE NEB 7%.....	195	SODIUM FLUORIDE GEL 1.1% (0.5% F)	67
SIROLIMUS SOL 1MG/ML.....	133	SOD CHLORIDE NEB 10%.....	194	SODIUM FLUORIDE GEL 1.1% (0.5% F)	67
SIROLIMUS TAB 0.5 MG.....	133	SOD CITRATE SOL CITR ACID	91	SODIUM FLUORIDE GEL 1.1% (0.5% F)	67
SIROLIMUS TAB 0.5MG	133	SOD FLUORIDE CHW 0.5MG F.....	91	SODIUM FLUORIDE GEL 1.1% (0.5% F)	67
SIROLIMUS TAB 1 MG	133	SOD FLUORIDE CHW 0.25MG F	91	SODIUM FLUORIDE PASTE 1.1%.....	66
SIROLIMUS TAB 1MG	133	SOD FLUORIDE CHW 1MG F.....	91	SODIUM FLUORIDE PASTE 1.1%.....	67
SIROLIMUS TAB 2 MG.....	133	SOD FLUORIDE DRO 0.5MG/ML	92	SODIUM FLUORIDE PASTE 1.1%.....	67
SIROLIMUS TAB 2MG	133	SOD FLUORIDE GEL 1.1%.....	67	SODIUM FLUORIDE PASTE 1.1%.....	67
SIRTURO TAB 20MG.....	42	SOD FLUORIDE GEL 1.1-5%	67	SODIUM FLUORIDE PASTE 1.1%.....	67
SIRTURO TAB 100MG	42	SOD FLUORIDE PST 1.1%.....	67	SODIUM FLUORIDE PASTE 1.1%.....	67
SKYCLARYS CAP 50MG	64	SOD FLUORIDE SOL 0.2%MINT	67	SODIUM FLUORIDE PASTE 1.1%.....	67
SKYRIZI INJ 150MG/ML	131	SOD FLUORIDE TAB 0.5MG F.....	92	SODIUM FLUORIDE-POTASSIUM	
SKYRIZI INJ 180/1.2	133	SOD FLUORIDE TAB 1MG F.....	92	NITRATE GEL 1.1-5%	66
SKYRIZI INJ 360/2.4.....	134	SODIUM CHLORIDE GRANULES	91	SODIUM FLUORIDE-POTASSIUM	
SKYRIZI PEN INJ 150MG/ML	131	SODIUM CHLORIDE POWDER.....	162	NITRATE GEL 1.1-5%	66
SKYTROFA INJ 0.7MG.....	126	SODIUM CHLORIDE SOLN NEBU 0.9%	194	SODIUM FLUORIDE-POTASSIUM	
SKYTROFA INJ 1.4MG.....	126	SODIUM CHLORIDE SOLN NEBU 3%	194	NITRATE GEL 1.1-5%	67
SKYTROFA INJ 1.8MG.....	126	SODIUM CHLORIDE SOLN NEBU 3%	195	SODIUM FLUORIDE-POTASSIUM	
SKYTROFA INJ 2.1MG.....	126	SODIUM CHLORIDE SOLN NEBU 3.5%	194	NITRATE GEL 1.1-5%	67
SKYTROFA INJ 2.5MG.....	127	SODIUM CHLORIDE SOLN NEBU 7%	194	SODIUM FLUORIDE-POTASSIUM	
SKYTROFA INJ 3.6MG.....	127	SODIUM CHLORIDE SOLN NEBU 7%	194	NITRATE GEL 1.1-5%	67
SKYTROFA INJ 3MG.....	127	SODIUM CHLORIDE SOLN NEBU 7%	195	SODIUM FLUORIDE-POTASSIUM	
SKYTROFA INJ 4.3MG.....	127	SODIUM CHLORIDE SOLN NEBU 10%	194	NITRATE GEL 1.1-5%	67
SKYTROFA INJ 5.2MG.....	127	SODIUM CITRATE & CITRIC ACID SOLN		SODIUM FLUORIDE RINSE 0.2%	67
SKYTROFA INJ 6.3MG.....	127	490-640 MG/5ML.....	89	SODIUM FLUORIDE RINSE 0.2%	67
SKYTROFA INJ 7.6MG.....	127	SODIUM CITRATE & CITRIC ACID SOLN		SODIUM FLUORIDE SOLN 0.5 MG/ML F	
SKYTROFA INJ 9.1MG.....	127	490-640 MG/5ML.....	89	(FROM 1.1 MG/ML NAF).....	92
SKYTROFA INJ 11MG.....	126	SODIUM CITRATE & CITRIC ACID SOLN		SODIUM FLUORIDE TAB 0.5 MG F (FROM	
SKYTROFA INJ 13.3MG.....	126	500-334 MG/5ML.....	91	1.1 MG NAF).....	92
SLYND TAB 4MG.....	189	SODIUM FLUOR CRE 1.1%	67	SODIUM FLUORIDE TAB 1 MG F (FROM	
SM ASPIRIN CHW 81MG.....	175	SODIUM FLUOR CRE 5000 PLS	67	2.2 MG NAF).....	92
SM ASPIRIN TAB 81MG EC	175	SODIUM FLUOR CRE 5000 PPM.....	67	SODIUM FLUORIDE-VITAMIN D LIQD	
SM CHILD ASA CHW 81MG	175	SODIUM FLUOR GEL 1.1%	67	DROPS 0.25 MG/ML-400 UNIT/ML.....	86
SM CLEARLAX POW.....	138	SODIUM FLUORIDE CHEW TAB 0.5 MG F		SODIUM OXYBATE ORAL SOLUTION 500	
SM NICOTINE DIS 7MG/24HR.....	202	(FROM 1.1 MG NAF)	86	MG/ML.....	198
SM NICOTINE DIS 14MG/24H	202	SODIUM FLUORIDE CHEW TAB 0.5 MG F		SODIUM OXYBATE PACK FOR ER SUSP 4.5	
SM NICOTINE DIS 21MG/24H	202	(FROM 1.1 MG NAF)	91	& 6 & 7.5 GM STARTER PAK	198
SM NICOTINE GUM 2MG	202	SODIUM FLUORIDE CHEW TAB 0.25 MG F		SODIUM OXYBATE PACK FOR ORAL ER	
SM NICOTINE GUM 2MG MINT.....	202	(FROM 0.55 MG NAF)	86	SUSP 4.5 GM	198
SM NICOTINE GUM 4MG.....	202	SODIUM FLUORIDE CHEW TAB 0.25 MG F		SODIUM OXYBATE PACK FOR ORAL ER	
SM NICOTINE GUM 4MG MINT.....	202	(FROM 0.55 MG NAF)	91	SUSP 6 GM.....	198
SM NICOTINE LOZ 2MG CHRY.....	202	SODIUM FLUORIDE CHEW TAB 1 MG F		SODIUM OXYBATE PACK FOR ORAL ER	
SM NICOTINE LOZ 2MG CINN.....	202	(FROM 2.2 MG NAF)	86	SUSP 7.5 GM.....	198
SM NICOTINE LOZ 2MG MINT.....	202	SODIUM FLUORIDE CHEW TAB 1 MG F		SODIUM OXYBATE PACK FOR ORAL ER	
SM NICOTINE LOZ 4MG.....	202	(FROM 2.2 MG NAF)	91	SUSP 9 GM	198
SM NICOTINE LOZ 4MG CINN.....	202	SODIUM FLUORIDE CREAM 1.1%.....	66	SODIUM PHENYL BUTYRATE ORAL	
SM NICOTINE LOZ 4MG MINT.....	202	SODIUM FLUORIDE CREAM 1.1%.....	66	POWDER 3 GM/TEASPOONFUL	109
SMOOTH LAX POW.....	138	SODIUM FLUORIDE CREAM 1.1%.....	67	SODIUM PHENYL BUTYRATE TAB 500 MG..	110
SMOOTH LAX POW 3350.....	138	SODIUM FLUORIDE CREAM 1.1%.....	67	SODIUM PHENYL BUTYRATE-	
SMZ/TMP DS TAB 800-160	206	SODIUM FLUORIDE CREAM 1.1%.....	67	TAURURSODIOL POWD PACK 3-1 GM.....	64
SMZ-TMP SUS 200-40/5.....	206	SODIUM FLUORIDE CREAM 1.1%.....	67	SODIUM PHENY TAB 500MG	110
SMZ-TMP TAB 400-80MG	206	SODIUM FLUORIDE GEL 1.1% (0.5% F)	66	*SODIUM POLYSTYRENE SULFONATE	
SOD CHLORIDE GRA.....	91	SODIUM FLUORIDE GEL 1.1% (0.5% F)	67	POWDER**	93
SOD CHLORIDE NEB 0.9%.....	194	SODIUM FLUORIDE GEL 1.1% (0.5% F)	67	SODIUM POLYSTYRENE SULFONATE	
				RECTAL SUSP 30 GM/120ML.....	93



SODIUM POLYSTYRENE SULFONATE SUSP 15 GM/60ML	93	SOLIFENACIN TAB 10MG	42	SOTALOL TAB 80MG	22
SODIUM/POTAS SOL MAGNESIU	140	SOLILQUA INJ 100/33	137	SOTALOL TAB 120MG	22
SODIUM POW CHLORIDE	162	SOLRIAMFETOL HCL TAB 75 MG (BASE EQUIV).....	198	SOTALOL TAB 160MG	22
SODIUM SULFA LIQ 10% WASH	71	SOLRIAMFETOL HCL TAB 150 MG (BASE EQUIV).....	198	SOTORASIB TAB 120 MG	38
SODIUM THIOSULFATE-SALICYLIC ACID LOTION 25-1%.....	33	SOMATROGON-GHLA SOLUTION PEN- INJECTOR 24 MG/1.2ML (20 MG/ML)	126	SOTORASIB TAB 240 MG	38
SODIUM ZIRCONIUM CYCLOSILICATE FOR SUSP PACKET 5 GM	93	SOMATROGON-GHLA SOLUTION PEN- INJECTOR 60 MG/1.2ML (50 MG/ML).....	126	SOTORASIB TAB 320 MG	38
SODIUM ZIRCONIUM CYCLOSILICATE FOR SUSP PACKET 10 GM	93	SOMATROPIN FOR INJ 5.8 MG	126	SOTYKTU TAB 6MG	72
SOD OXYBATE SOL 500MG/ML	198	SOMATROPIN FOR SUBCUTANEOUS INJ 5 MG	127	SOTYLIZE SOL 5MG/ML	22
SOD PICOSULFATE-MG OX-CITRIC AC SOL 10 MG-3.5 GM-12 GM/175ML	138	SOMATROPIN (NON-REFRIGERATED) FOR SUBCUTANEOUS INJ 8.8 MG	127	SOVALDI PAK 150MG	15
SOD POLY SUL POW.....	93	SOMATROPIN SOLUTION CARTRIDGE 5 MG/1.5ML.....	126	SOVALDI PAK 200MG	15
SOD PYROPHOS POW ANHYDROU	162	SOMATROPIN SOLUTION CARTRIDGE 10 MG/1.5ML.....	126	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	142
SOD SULFACET GEL 10%.....	71	SOMATROPIN SOLUTION CARTRIDGE 10 MG/1.5ML.....	126	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	142
SOD SULFACET SHA 10%.....	71	SOMATROPIN SOLUTION PEN-INJECTOR 5 MG/1.5ML.....	126	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	142
SOD SULFATE-MG SULFATE-POT CHLORIDE TAB 1479-225-188 MG	138	SOMATROPIN SOLUTION PEN-INJECTOR 10 MG/1.5ML.....	126	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	143
SOD SULFATE-POT SULF-MG SULF ORAL SOL 17.5-3.13-1.6 GM/177ML	140	SOMATROPIN SOLUTION PEN-INJECTOR 15 MG/1.5ML.....	126	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	143
SOD SULFATE-POT SULF-MG SULF ORAL SOL 17.5-3.13-1.6 GM/177ML	140	SOMATROPIN SOLUTION PEN-INJECTOR 30 MG/3ML	126	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	143
SOD SUL/SULF CRE 10-2%.....	71	SONIDEGIB PHOSPHATE CAP 200 MG (BASE EQUIVALENT).....	168	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	143
SOD SUL/SULF CRE 10-5%.....	71	SOOLANTRA CRE 1%.....	71	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	147
SOD SUL/SULF EMU 10-5%.....	71	SORAFENIB TAB 200MG	169	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	147
SOD SUL/SULF LIQ 9-4%	71	SORAFENIB TOSYLATE TAB 200 MG (BASE EQUIVALENT).....	169	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	147
SOD SUL/SULF LIQ 10-5%	71	S.O.S. 20 POW.....	91	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	147
SOD SUL/SULF LIQ WASH	71	S.O.S. 25 POW.....	91	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	147
SOD SUL/SULF LOT 10-5%	71	SOTALOL AF TAB 80MG	22	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	147
SOD SUL/SULF SUS 10-5%	71	SOTALOL AF TAB 120MG	22	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	149
SOFOSBUVIR PELLET PACK 150 MG	15	SOTALOL AF TAB 160MG	22	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	151
SOFOSBUVIR PELLET PACK 200 MG	15	SOTALOL HCL (AFIB/AFL) TAB 80 MG.....	21	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	151
SOFOSBUVIR-VELPATASVIR PELLET PACK 150-37.5 MG	15	SOTALOL HCL (AFIB/AFL) TAB 80 MG.....	21	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	151
SOFOSBUVIR-VELPATASVIR PELLET PACK 200-50 MG.....	15	SOTALOL HCL (AFIB/AFL) TAB 120 MG.....	22	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	152
SOFOSBUVIR-VELPATASVIR TAB 200-50 MG.....	15	SOTALOL HCL (AFIB/AFL) TAB 120 MG.....	22	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	155
SOFOSBUVIR-VELPATASVIR TAB 400-100 MG.....	15	SOTALOL HCL (AFIB/AFL) TAB 160 MG.....	22	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	160
SOFOSBUVIR-VELPATASVIR TAB 400-100 MG.....	15	SOTALOL HCL (AFIB/AFL) TAB 160 MG.....	22	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	165
SOFOSBUVIR-VELPATASVIR- VOXILAPREVIR TAB 400-100-100 MG.....	15	SOTALOL HCL ORAL SOLUTION 5 MG/ML ..	22	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	165
SOFOS/VELPAT TAB 400-100	15	SOTALOL HCL TAB 80 MG	22	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	165
SOFTCLIX MIS LANCETS	79	SOTALOL HCL TAB 80 MG	22	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	165
SOHONOS CAP 1.5MG.....	162	SOTALOL HCL TAB 80MG	22		
SOHONOS CAP 1MG	162	SOTALOL HCL TAB 120 MG	22		
SOHONOS CAP 2.5MG	162	SOTALOL HCL TAB 120 MG	22		
SOHONOS CAP 5MG	162	SOTALOL HCL TAB 120MG	22		
SOHONOS CAP 10MG	162	SOTALOL HCL TAB 160 MG.....	22		
SOLIFENACIN SUCCINATE TAB 5 MG	42	SOTALOL HCL TAB 160 MG.....	22		
SOLIFENACIN SUCCINATE TAB 10 MG.....	42	SOTALOL HCL TAB 160MG	22		
SOLIFENACIN TAB 5MG.....	42	SOTALOL HCL TAB 240 MG.....	22		
		SOTALOL HCL TAB 240MG	22		

*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	165	SSKI SOL 1GM/ML	162	SUCROFERRIC OXYHYDROXIDE CHEW TAB 500 MG	187
*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	165	SSS 10-5 AER 10-5%	72	SUFLAVE SOL	107
*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - BAGS***	152	SSS CRE 10%-5%	72	SULAR TAB 8.5MG ER	58
*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS***	149	STALEVO 50 TAB	83	SULAR TAB 17MG ER	58
*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS***	149	STALEVO 75 TAB	83	SULAR TAB 34MG ER	58
*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS***	155	STALEVO 100 TAB	83	SULCONAZOLE CRE 1%	35
*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS***	155	STALEVO 125 TAB	83	SULCONAZOLE NITRATE CREAM 1%	33
*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS***	157	STALEVO 150 TAB	83	SULCONAZOLE NITRATE CREAM 1%	35
*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS***	165	STALEVO 200 TAB	83	SULCONAZOLE NITRATE SOLUTION 1%	33
*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS***	165	STANNOUS FLUORIDE CONC 0.63%	66	SULCONAZOLE NITRATE SOLUTION 1%	35
SPARSENTAN TAB 200 MG	111	STANNOUS FLUORIDE GEL 0.4%	66	SULCONAZOLE SOL 1%	35
SPARSENTAN TAB 400 MG	111	STANNOUS FLUORIDE GEL 0.4%	66	SULFACETAMIDE SODIUM CLEANSING GEL 10%	71
SPESOLIMAB-SBZO SUBCUTANEOUS SOLN PREF SYR 150 MG/ML	72	STANNOUS FLUORIDE GEL 0.4%	66	SULFACETAMIDE SODIUM CLEANSING GEL 10%	71
SPESOLIMAB-SBZO SUBCUTANEOUS SOLN PREF SYR 300 MG/2ML	72	STANNOUS FLUORIDE GEL 0.4%	66	SULFACETAMIDE SODIUM CREAM 10%	71
SPEVIGO INJ 150/1ML	72	STELARA INJ 45/0.5ML	134	SULFACETAMIDE SODIUM LIQUID 10%	71
SPEVIGO INJ 300/2ML	72	STELARA INJ 90MG/ML	134	SULFACETAMIDE SODIUM LIQUID 10%	71
SPIKEVAX INJ 2025-26	211	STENDRA TAB 50MG	112	SULFACETAMIDE SODIUM LIQUID 10%	71
SPIKEVAX INJ 2025-26	211	STENDRA TAB 100MG	112	SULFACETAMIDE SODIUM LOTION 10% (ACNE)	70
SPINOSAD SUS 0.9%	187	STENDRA TAB 200MG	112	SULFACETAMIDE SODIUM LOTION 10% (ACNE)	72
SPINOSAD SUSP 0.9%	187	STEQEYMA INJ 45/0.5ML	72	SULFACETAMIDE SODIUM OPHTH OINT 10%	178
SPIRIVA CAP HANDIHLR	54	STEQEYMA INJ 90MG/ML	72	SULFACETAMIDE SODIUM OPHTH SOLN 10%	178
SPIRIVA RESP AER 1.25MCG	54	STIOLTO AER 2.5-2.5	195	SULFACETAMIDE SODIUM-PREDNISOLONE OPHTH SOLN 10-0.23(0.25)%	177
SPIRIVA RESP AER 2.5MCG	54	STIRIPENTOL CAP 250 MG	27	SULFACETAMIDE SODIUM SHAMPOO 10%	71
SPIRONO/HCTZ TAB 25/25	63	STIRIPENTOL CAP 500 MG	27	SULFACETAMIDE SODIUM SHAMPOO 10%	71
SPIRONOLACTONE & HYDROCHLOROTHIAZIDE TAB 25-25 MG	63	STIRIPENTOL PACKET 250 MG	27	SULFACETAMIDE SODIUM-SULFUR IN UREA EMULSION 10-5%	71
SPIRONOLACTONE SUSP 25 MG/5ML	81	STIRIPENTOL PACKET 500 MG	27	SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 9-4%	71
SPIRONOLACTONE SUSP 25 MG/5ML	81	STIVARGA TAB 40MG	169	SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 9-4%	71
SPIRONOLACTONE TAB 25 MG	81	ST JOSEPH CHW LOW 81MG	175	SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 10-5%	68
SPIRONOLACTONE TAB 50 MG	81	ST JOSEPH TAB LOW 81MG	175	SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 10-5%	71
SPIRONOLACTONE TAB 100 MG	81	STOP SMOKING GUM 2MG MINT	202	SULFACETAMIDE SODIUM W/ SULFUR CLEANSING CLOTH 9.8-4.8%	72
SPIRONOLACTO SUS 25MG/5ML	81	STOP SMOKING GUM 2MG ORIG	202	SULFACETAMIDE SODIUM W/ SULFUR CREAM 10-2%	71
SPIRONOLACT TAB 25MG	81	STOP SMOKING GUM 4MG	202	SULFACETAMIDE SODIUM W/ SULFUR CREAM 10-5%	71
SPIRONOLACT TAB 50MG	81	STOP SMOKING LOZ 2MG MINT	202	SULFACETAMIDE SODIUM W/ SULFUR CREAM 10-5%	72
SPIRONOLACT TAB 100MG	81	STOP SMOKING LOZ 4MG MINT	202	SULFACETAMIDE SODIUM W/ SULFUR FOAM 10-5%	72
SPORANOX CAP 100MG	35	STRENSIQ INJ 18/0.45	110	SULFACETAMIDE SODIUM W/ SULFUR LOTION 10-5%	71
SPORANOX SOL 10MG/ML	35	STRENSIQ INJ 28/0.7ML	110		
SPRAVATO SOL 56MG DOS	28	STRENSIQ INJ 40MG/ML	110		
SPRAVATO SOL 84MG DOS	28	STRENSIQ INJ 80/0.8ML	110		
SPRINTEC 28 TAB 28 DAY	103	STRIBILD TAB	16		
SPS SUS 15GM/60	93	STRIVERDI AER 2.5MCG	55		
SPS SUS 30GM/120	93	STROMECTOL TAB 3MG	14		
SRONYX TAB	104	SUBVENITE KIT START 35	114		
SSD CRE 1%	24	SUBVENITE KIT START 49	114		
		SUBVENITE KIT START 98	114		
		SUBVENITE TAB 25MG	114		
		SUBVENITE TAB 100MG	114		
		SUBVENITE TAB 150MG	114		
		SUBVENITE TAB 200MG	114		
		SUCCIMER CAP 100 MG	92		
		SUCRAID SOL 8500/ML	110		
		SUCRALFATE SUS 1GM/10ML	190		
		SUCRALFATE SUSP 1 GM/10ML	190		
		SUCRALFATE TAB 1 GM	190		
		SUCRALFATE TAB 1GM	190		

SULFACETAMIDE SODIUM W/ SULFUR SUSP 8-4%	72	SUMATRIPTAN SUCCINATE INJ 6 MG/0.5ML	196	SYMBYAX CAP 6-25MG	205
SULFACETAMIDE SODIUM W/ SULFUR SUSP 10-5%	71	SUMATRIPTAN SUCCINATE INJ 6 MG/0.5ML	196	SYMDEKO TAB 50-75MG	66
SULFACETAMID LOT 10%	72	SUMATRIPTAN SUCCINATE INJ 6 MG/0.5ML	197	SYMDEKO TAB 100-150	66
SULFACET SOD OIN 10% OP	178	SUMATRIPTAN SUCCINATE SOLUTION AUTO-INJECTOR 4 MG/0.5ML	196	SYMFI LO TAB	17
SULFACET SOD SOL 10% OP	178	SUMATRIPTAN SUCCINATE SOLUTION AUTO-INJECTOR 6 MG/0.5ML	196	SYMFI TAB	17
SULFACLEANSE SUS 8-4%	72	SUMATRIPTAN SUCCINATE SOLUTION AUTO-INJECTOR 6 MG/0.5ML	197	SYMJEPI INJ 0.3MG	55
SULFAC SULFR PAD 9.8-4.8%	72	SUMATRIPTAN SUCCINATE SOLUTION CARTRIDGE 4 MG/0.5ML	196	SYMJEPI INJ 0.15MG	55
SULFADIAZINE TAB 500 MG	206	SUMATRIPTAN SUCCINATE SOLUTION CARTRIDGE 6 MG/0.5ML	197	SYMPAZAN MIS 5MG	107
SULFADIAZINE TAB 500MG	206	SUMATRIPTAN SUCCINATE TAB 25 MG	197	SYMPAZAN MIS 10MG	107
SULFAMETHOXAZOLE-TRIMETHOPRIM SUSP 200-40 MG/5ML	206	SUMATRIPTAN SUCCINATE TAB 50 MG	197	SYMPAZAN MIS 20MG	107
SULFAMETHOXAZOLE-TRIMETHOPRIM SUSP 200-40 MG/5ML	206	SUMATRIPTAN SUCCINATE TAB 100 MG	197	SYMPROIC TAB 0.2MG	108
SULFAMETHOXAZOLE-TRIMETHOPRIM TAB 400-80 MG	206	SUMATRIPTAN TAB 25MG	197	SYNAREL SOL 2MG/ML	130
SULFAMETHOXAZOLE-TRIMETHOPRIM TAB 400-80 MG	206	SUMATRIPTAN TAB 50MG	197	SYNDROS SOL 5MG/ML	94
SULFAMETHOXAZOLE-TRIMETHOPRIM TAB 400-80 MG	206	SUMATRIPTAN TAB 100MG	197	SYNJARDY TAB	31
SULFAMETHOXAZOLE-TRIMETHOPRIM TAB 800-160 MG	206	SUNITINIB CAP 12.5MG	169	SYNJARDY TAB 5-500MG	31
SULFAMETHOXAZOLE-TRIMETHOPRIM TAB 800-160 MG	206	SUNITINIB CAP 25MG	169	SYNJARDY TAB 5-1000MG	31
SULFAMYLON CRE 85MG/GM	24	SUNITINIB CAP 37.5MG	169	SYNJARDY XR TAB	31
SULFASALAZINE TAB 500 MG	206	SUNITINIB CAP 50MG	169	SYNJARDY XR TAB 5-1000MG	32
SULFASALAZINE TAB DELAYED RELEASE 500 MG	206	SUNITINIB MALATE CAP 12.5 MG (BASE EQUIVALENT)	169	SYNJARDY XR TAB 10-1000	31
SULFASALAZIN TAB 500MG	206	SUNITINIB MALATE CAP 25 MG (BASE EQUIVALENT)	169	SYNJARDY XR TAB 25-1000	32
SULFASALAZIN TAB 500MG DR	206	SUNITINIB MALATE CAP 37.5 MG (BASE EQUIVALENT)	169	SYNRIBO INJ 3.5MG	39
SULFATRIM PD SUS 200-40/5	206	SUNITINIB MALATE CAP 50 MG (BASE EQUIVALENT)	169	SYRG/NEEDLE MIS 29GX12.5	162
SULF LIME SOL	187	SUNLENCA TAB 300MG	17	SYRG/NEEDLE MIS 31GX8MM	162
SULF/PRED NA SOL OP	177	SUNLENCA TAB 300MG	17	SYRG/NEEDLE MIS 31GX8MM	162
SULFURATED LIME SOLUTION	187	SUNOSI TAB 75MG	198	SYRG/NEEDLE MIS 31GX8MM	163
SULFURIC ACID-SULFONATED PHENOLICS SOLN 30-50%	66	SUNOSI TAB 150MG	198	SYRPAITA SYP	163
SULINDAC TAB 150 MG	175	SUPREP BOWEL SOL PREP KIT	140	SYRSPEND SF LIQ	163
SULINDAC TAB 150MG	175	SURE COMFORT MIS 31GX1/4	162	SYRSPEND SF SUS PH4	163
SULINDAC TAB 200 MG	175	SURE COMFORT MIS 31GX3/16	162	SYRUP SF SYP VEHICLE	163
SULINDAC TAB 200MG	175	SURE COMFORT MIS 31GX5/16	162	SYRUP SYP VEHICLE	163
SULOPENEM ETZADROXIL-PROBENECID TAB 500-500 MG	156	SURE COMFORT MIS 32GX5/32	79	TABLOID TAB 40MG	37
SUMATRIPTAN INJ 4MG/0.5	196	SUSPENDRX SUS SWEET	162	TABRECTA TAB 150MG	169
SUMATRIPTAN INJ 4MG/0.5	196	SUSPENDRX SUS UNSWEET	162	TABRECTA TAB 200MG	169
SUMATRIPTAN INJ 6/0.5ML	196	SUSPENSION SUS VEHICLE	162	TACROLIMUS (BULK) POWDER	163
SUMATRIPTAN INJ 6MG/0.5	197	SUTAB TAB	138	TACROLIMUS (BULK) POWDER	163
SUMATRIPTAN INJ 6MG/0.5	197	SUVOREXANT TAB 5 MG	198	TACROLIMUS CAP 0.5 MG	133
SUMATRIPTAN INJ 6MG/0.5	197	SUVOREXANT TAB 10 MG	198	TACROLIMUS CAP 0.5 MG	134
SUMATRIPTAN INJ 6MG/5ML	196	SUVOREXANT TAB 15 MG	198	TACROLIMUS CAP 0.5MG	134
SUMATRIPTAN INJ 6MG/5ML	196	SUVOREXANT TAB 20 MG	198	TACROLIMUS CAP 1 MG	133
SUMATRIPTAN NASAL SPRAY 5 MG/ACT	196	SUZETRIGINE TAB 50 MG	154	TACROLIMUS CAP 1 MG	134
SUMATRIPTAN NASAL SPRAY 5 MG/ACT	197	SYMBICORT AER 80-4.5	195	TACROLIMUS CAP 5 MG	133
SUMATRIPTAN NASAL SPRAY 20 MG/ACT	196	SYMBICORT AER 160-4.5	195	TACROLIMUS CAP 5 MG	134
SUMATRIPTAN NASAL SPRAY 20 MG/ACT	197	SYMBYAX CAP 3-25MG	205	TACROLIMUS CAP 5MG	134
SUMATRIPTAN SPR 5MG/ACT	197			TACROLIMUS CAP 1 MG	133
SUMATRIPTAN SPR 20MG/ACT	197			TACROLIMUS CAP 1MG	134
				TACROLIMUS CAP 5 MG	134
				TACROLIMUS CAP 5MG	134
				TACROLIMUS OIN 0.1%	72
				TACROLIMUS OIN 0.03%	72
				TACROLIMUS OINT 0.1%	72
				TACROLIMUS OINT 0.03%	72
				TACROLIMUS PACKET FOR SUSP 0.2 MG	133
				TACROLIMUS PACKET FOR SUSP 1 MG	133
				TACROLIMUS POW	163
				TACROLIMUS POW MONOHYD	163
				TADALAFIL ORAL SUSP 20 MG/5ML (PAH)	191

TADALAFIL TAB 2.5 MG	47	TARON-C DHA CAP.....	218	TEMAZEPAM CAP 7.5MG	106
TADALAFIL TAB 2.5MG.....	47	TASIMELTEON CAP 20MG.....	198	TEMAZEPAM CAP 15 MG	106
TADALAFIL TAB 5 MG	47	TASIMELTEON CAPSULE 20 MG.....	198	TEMAZEPAM CAP 15 MG	106
TADALAFIL TAB 5MG.....	47	TASIMELTEON CAPSULE 20 MG.....	198	TEMAZEPAM CAP 15MG.....	106
TADALAFIL TAB 10 MG	112	TASIMELTEON ORAL SUSP 4 MG/ML.....	198	TEMAZEPAM CAP 22.5 MG	106
TADALAFIL TAB 10MG	112	TAURINE CAP 500 MG	92	TEMAZEPAM CAP 22.5 MG	106
TADALAFIL TAB 20 MG.....	112	TAURINE CAP 500MG.....	92	TEMAZEPAM CAP 22.5MG.....	106
TADALAFIL TAB 20MG	112	TAVALISSE TAB 100MG	121	TEMAZEPAM CAP 30 MG	106
TADALAFIL TAB 20MG	191	TAVALISSE TAB 150MG	121	TEMAZEPAM CAP 30 MG	106
TADALAFIL TAB 20 MG (PAH)	191	TAZAROTENE CRE 0.1%.....	72	TEMAZEPAM CAP 30MG	106
TADLIQ SUS 20MG/5ML	191	TAZAROTENE CRE 0.05%.....	72	TEMBEXA SUS 10MG/ML.....	43
TAFAMIDIS CAP 61 MG.....	63	TAZAROTENE CREAM 0.1%.....	72	TEMBEXA TAB 100MG.....	43
TAFAMIDIS MEGLUMINE (CARDIAC) CAP		TAZAROTENE CREAM 0.05%.....	72	TEMOZOLOMIDE CAP 5 MG.....	10
20 MG.....	63	TAZAROTENE GEL 0.1%	72	TEMOZOLOMIDE CAP 5MG	10
TAFENOQUINE SUCCINATE TAB 100 MG		TAZAROTENE GEL 0.1%	72	TEMOZOLOMIDE CAP 20 MG.....	10
(BASE EQUIVALENT).....	40	TAZAROTENE GEL 0.05%.....	72	TEMOZOLOMIDE CAP 20MG	10
TAFENOQUINE SUCCINATE TAB 150 MG		TAZAROTENE GEL 0.05%.....	72	TEMOZOLOMIDE CAP 100 MG	10
(BASE EQUIVALENT).....	41	TAZEMETOSTAT HBR TAB 200 MG.....	39	TEMOZOLOMIDE CAP 100MG.....	10
TAFINLAR CAP 50MG	169	TAZTIA XT CAP 120MG/24	58	TEMOZOLOMIDE CAP 140 MG	10
TAFINLAR CAP 75MG	169	TAZTIA XT CAP 180MG/24	58	TEMOZOLOMIDE CAP 140MG.....	10
TAFINLAR TAB 10MG.....	169	TAZTIA XT CAP 240MG/24	58	TEMOZOLOMIDE CAP 180 MG	10
TAFLUPROST PRESERVATIVE FREE (PF)		TAZTIA XT CAP 300MG ER.....	58	TEMOZOLOMIDE CAP 180MG.....	10
OPHTH SOLN 0.0015%	180	TAZTIA XT CAP 360MG/24.....	58	TEMOZOLOMIDE CAP 250 MG	10
TAFLUPROST PRESERVATIVE FREE (PF)		TAZVERIK TAB 200MG	39	TEMOZOLOMIDE CAP 250MG.....	10
OPHTH SOLN 0.0015%	180	TBO-FILGRASTIM SUBCUTANEOUS INJ		TENAPANOR HCL TAB 20 MG.....	110
TAFLUPROST SOL 0.0015%	180	300 MCG/ML	53	TENAPANOR HCL TAB 30 MG.....	110
TAGRISSO TAB 40MG	169	TBO-FILGRASTIM SUBCUTANEOUS INJ		TENCON TAB 50-325MG	11
TAGRISSO TAB 80MG	169	480 MCG/1.6ML (300 MCG/ML)	53	TENIVAC INJ 5-2LF	212
TAKE ACTION TAB 1.5MG.....	189	TDC MAX CRE	163	TENOFOVIR DISOPROXIL FUMARATE	
TAKHZYRO INJ 150MG/ML.....	135	TDVAX INJ 2-2 LF	211	ORAL POWDER 40 MG/GM.....	18
TAKHZYRO INJ 300/2ML.....	12	TECHLITE MIS LANC 26G.....	79	TENOFOVIR DISOPROXIL FUMARATE	
TAKHZYRO INJ 300/2ML.....	135	TEDUGLUTIDE (RDNA) FOR INJ KIT 5 MG ..	108	TAB 150 MG	18
TAMOXIFEN CITRATE TAB 10 MG (BASE		TEGLUTIK SUS 50/10ML	65	TENOFOVIR DISOPROXIL FUMARATE	
EQUIVALENT).....	33	TEGRETOL SUS 100/5ML.....	204	TAB 200 MG	18
TAMOXIFEN CITRATE TAB 20 MG (BASE		TEGRETOL TAB 200MG	204	TENOFOVIR DISOPROXIL FUMARATE	
EQUIVALENT).....	33	TEGSEDI INJ 284/1.5	110	TAB 250 MG	18
TAMOXIFEN TAB 10MG.....	33	TELMISA/HCTZ TAB 40-12.5	63	TENOFOVIR DISOPROXIL FUMARATE	
TAMOXIFEN TAB 20MG	33	TELMISA/HCTZ TAB 80-12.5	63	TAB 300 MG	18
TAMSULOSIN CAP 0.4MG	47	TELMISA/HCTZ TAB 80-25MG	63	TENOFOVIR TAB 300MG	18
TAMSULOSIN HCL CAP 0.4 MG.....	47	TELMISARTAN-HYDROCHLOROTHIAZIDE		TERAZOSIN CAP 1MG	47
TANLOR TAB 1000MG.....	197	TAB 40-12.5 MG	63	TERAZOSIN CAP 2MG	47
TAPENTADOL HCL TAB 50 MG.....	184	TELMISARTAN-HYDROCHLOROTHIAZIDE		TERAZOSIN CAP 5MG	47
TAPENTADOL HCL TAB 75 MG.....	184	TAB 80-12.5 MG	63	TERAZOSIN CAP 10MG.....	47
TAPENTADOL HCL TAB 100 MG	184	TELMISARTAN-HYDROCHLOROTHIAZIDE		TERAZOSIN HCL CAP 1 MG (BASE	
TAPENTADOL HCL TAB ER 12HR 50 MG.....	182	TAB 80-25 MG.....	63	EQUIVALENT).....	47
TAPENTADOL HCL TAB ER 12HR 100 MG....	181	TELMISARTAN TAB 20 MG.....	13	TERAZOSIN HCL CAP 2 MG (BASE	
TAPENTADOL HCL TAB ER 12HR 150 MG....	182	TELMISARTAN TAB 20MG	13	EQUIVALENT).....	47
TAPENTADOL HCL TAB ER 12HR 200 MG ...	182	TELMISARTAN TAB 40 MG	13	TERAZOSIN HCL CAP 5 MG (BASE	
TAPENTADOL HCL TAB ER 12HR 250 MG ...	182	TELMISARTAN TAB 40MG.....	13	EQUIVALENT).....	47
TAPERDEX PAK 6 DAY	125	TELMISARTAN TAB 80 MG	13	TERAZOSIN HCL CAP 10 MG (BASE	
TAPERDEX PAK 7-DAY	125	TELMISARTAN TAB 80MG.....	13	EQUIVALENT).....	47
TAPERDEX PAK 12-DAY.....	125	TELOTTRISTAT ETHYL TAB 250 MG (AS		TERBINAFINE HCL TAB 250 MG	35
TAPINAROF CREAM 1%.....	72	TELOTTRISTAT ETIPRATE)	108	TERBINAFINE TAB 250MG	35
TARINA 24 FE TAB	104	TEMAZEPAM CAP 7.5 MG	106	TERBUTALINE POW SULFATE	163
TARINA FE TAB 1/20 EQ	104	TEMAZEPAM CAP 7.5 MG.....	106	TERBUTALINE SULFATE POWDER.....	163
				TERBUTALINE SULFATE TAB 2.5 MG.....	55

TERBUTALINE SULFATE TAB 5 MG	55	TESTOSTERONE TD GEL 50 MG/5GM (1%) ..	12	THEOPHYLLINE ELX 80/15ML	187
TERBUTALINE TAB 2.5MG	55	TESTOSTERONE UNDECANOATE CAP 100		THEOPHYLLINE SOL 80/15ML	187
TERBUTALINE TAB 5MG	55	MG	12	THEOPHYLLINE SOLN 80 MG/15ML	187
TERCONAZOLE CRE 0.4%	35	TESTOSTERONE UNDECANOATE CAP 150		THEOPHYLLINE TAB 100MG ER	187
TERCONAZOLE CRE 0.8%	35	MG	12	THEOPHYLLINE TAB 200MG ER	187
TERCONAZOLE SUP 80MG	35	TESTOSTERONE UNDECANOATE CAP		THEOPHYLLINE TAB 300MG ER	187
TERCONAZOLE VAGINAL CREAM 0.4%	35	200 MG	12	THEOPHYLLINE TAB 400MG ER	187
TERCONAZOLE VAGINAL CREAM 0.8%	35	TETANUS-DIPHThERIA TOXOIDS (TD)		THEOPHYLLINE TAB 450MG ER	187
TERCONAZOLE VAGINAL SUPPOS 80 MG	35	INJ 2-2 LF/0.5ML	211	THEOPHYLLINE TAB 600MG ER	187
TERIFLUNOMIDE TAB 7 MG	172	TETANUS-DIPHThERIA TOXOIDS (TD)		THEOPHYLLINE TAB ER 12HR 100 MG	187
TERIFLUNOMIDE TAB 14 MG	172	INJ 5-2 LF/0.5ML	212	THEOPHYLLINE TAB ER 12HR 200 MG	187
TERIFLUNOMID TAB 7MG	172	TET-DIPH-ACELL PERTUSS AD PREF SYR		THEOPHYLLINE TAB ER 12HR 300 MG	187
TERIFLUNOMID TAB 14MG	172	5-2.5-18.5 LF-MCG/0.5ML	209	THEOPHYLLINE TAB ER 12HR 450 MG	187
TERIPARATIDE INJ 560/2.24	142	TET-DIPH-ACELL PERTUSS AD PREF SYR		THEOPHYLLINE TAB ER 24HR 400 MG	187
TERIPARATIDE SOLN PEN-INJ 560		5-2-15.5 LF-MCG/0.5ML	209	THEOPHYLLINE TAB ER 24HR 600 MG	187
MCG/2.24ML	141	TETRABENAZINE TAB 12.5 MG	65	THINLETS GP MIS 26G	79
TERIPARATIDE SOLN PEN-INJ 560		TETRABENAZINE TAB 25 MG	65	THIOGUANINE (BULK) POWDER	163
MCG/2.24ML	142	TETRABENAZIN TAB 12.5MG	65	THIOGUANINE POW	163
TERRELL SOL	163	TETRABENAZIN TAB 25MG	65	THIOGUANINE TAB 40 MG	37
TESTIM GEL 1%(50MG)	12	TETRACAIN HCL OPHTH SOLN 0.5%	175	THIORIDAZINE HCL TAB 10 MG	6
TESTOST CYP INJ 100MG/ML	12	TETRACAIN HCL OPHTH SOLN 0.5%	176	THIORIDAZINE HCL TAB 25 MG	6
TESTOST CYP INJ 200MG/ML	12	TETRACAIN SOL 0.5% OP	176	THIORIDAZINE HCL TAB 50 MG	6
TESTOST ENAN INJ 200MG/ML	12	TETRACYCLINE CAP 250MG	207	THIORIDAZINE HCL TAB 100 MG	6
TESTOSTERONE (BULK) POWDER	163	TETRACYCLINE CAP 500MG	207	THIORIDAZINE TAB 10MG	6
TESTOSTERONE (BULK) POWDER	163	TETRACYCLINE HCL CAP 250 MG	207	THIORIDAZINE TAB 25MG	6
TESTOSTERONE CRY YAM	163	TETRACYCLINE HCL CAP 500 MG	207	THIORIDAZINE TAB 50MG	6
TESTOSTERONE CYPIONATE (BULK)		TET TOX-DIPH-ACELL PERTUSS AD INJ		THIORIDAZINE TAB 100MG	6
POWDER	163	5-2.5-18.5 LF-LF-MCG/0.5ML	209	THIOTEP A (BULK) POWDER	163
TESTOSTERONE CYPIONATE IM INJ IN		TET TOX-DIPH-ACELL PERTUSS AD INJ		THIOTEP A POW	163
OIL 100 MG/ML	12	5-2-15.5 LF-LF-MCG/0.5ML	209	THIOTHIXENE CAP 1 MG	6
TESTOSTERONE CYPIONATE IM INJ IN		TEXACORT SOL 2.5%	125	THIOTHIXENE CAP 1MG	6
OIL 100 MG/ML	12	TEZACAF TOR-IVACAF TOR 50-75 MG &		THIOTHIXENE CAP 2 MG	6
TESTOSTERONE CYPIONATE IM INJ IN		IVACAF TOR 75 MG TAB TBP K	66	THIOTHIXENE CAP 2MG	6
OIL 200 MG/ML	12	TEZACAF TOR-IVACAF TOR 100-150 MG &		THIOTHIXENE CAP 5 MG	6
TESTOSTERONE CYPIONATE IM INJ IN		IVACAF TOR 150 MG TAB TBP K	66	THIOTHIXENE CAP 5MG	6
OIL 200 MG/ML	12	TEZEPELUMAB-EKKO SUBCUTANEOUS		THIOTHIXENE CAP 10 MG	6
TESTOSTERONE ENANTHATE (BULK)		SOLN AUTO-INJ 210 MG/1.91ML	195	THIOTHIXENE CAP 10MG	6
POWDER	163	TEZSPIRE INJ 210MG	195	THRIVE GUM 2MG MINT	202
TESTOSTERONE ENANTHATE IM INJ IN		THALIDOMIDE CAP 50 MG	21	THRIVITE RX TAB 29-1MG	218
OIL 200 MG/ML	12	THALIDOMIDE CAP 100 MG	21	THROMBIN FOR SOLN 1000 UNIT	121
TESTOSTERONE GEL 1.62%	12	THALIDOMIDE CAP 150 MG	21	THROMBIN FOR SOLN 10000 UNIT	121
TESTOSTERONE MICRONIZED (BULK)		THALIDOMIDE CAP 200 MG	21	THROMBIN FOR SOLN KIT 5000 UNIT	121
CRYSTALS	163	THALOMID CAP 50MG	21	THROMBIN FOR SOLN KIT 5000 UNIT	121
TESTOSTERONE MICRONIZED (BULK)		THALOMID CAP 100MG	21	THROMBIN FOR SOLN KIT 10000 UNIT	121
POWDER	163	THALOMID CAP 150MG	21	THROMBIN FOR SOLN KIT 20000 UNIT	121
TESTOSTERONE MICRONIZED (BULK)		THALOMID CAP 200MG	21	THROMBIN-JMI KIT 5000UNIT	121
POWDER	163	THEO-24 CAP 100MG CR	187	THROMBIN-JMI KIT 20000UNT	121
TESTOSTERONE POW	163	THEO-24 CAP 200MG CR	187	THROMBIN KIT 5000UNIT	121
TESTOSTERONE POW CYPIONAT	163	THEO-24 CAP 300MG CR	187	THROMBIN (RECOMBINANT) FOR SOLN	
TESTOSTERONE POW ENANTHAT	163	THEO-24 CAP 400MG ER	187	5000 UNIT	120
TESTOSTERONE POW MICRONIZ	163	THEOPHYLLINE CAP ER 24HR 100 MG	187	THROMBIN (RECOMBINANT) FOR SOLN	
TESTOSTERONE POW SOY	163	THEOPHYLLINE CAP ER 24HR 200 MG	187	20000 UNIT	120
TESTOSTERONE POW SOY	163	THEOPHYLLINE CAP ER 24HR 300 MG	187	THROMBOGEN KIT 10000UNT	121
TESTOSTERONE TD GEL 10MG/ACT (2%) ..	12	THEOPHYLLINE CAP ER 24HR 400 MG	187	THROMBOGEN SOL 1000UNIT	121
TESTOSTERONE TD GEL 20.25 MG/ACT		THEOPHYLLINE ELIXIR 80 MG/15ML	187	THROMBOGEN SOL 10000UNT	121
(1.62%)	12	THEOPHYLLINE ELIXIR 80 MG/15ML	187		

THYROID TAB 15MG.....	129	TIAZAC CAP 240MG/24.....	59	TINIDAZOLE TAB 250 MG.....	24
THYROID TAB 15 MG (1/4 GRAIN).....	127	TIAZAC CAP 300MG/24.....	59	TINIDAZOLE TAB 250MG.....	24
THYROID TAB 15 MG (1/4 GRAIN).....	128	TIAZAC CAP 360MG/24.....	59	TINIDAZOLE TAB 500 MG.....	24
THYROID TAB 15 MG (1/4 GRAIN).....	129	TIAZAC CAP 420MG/24.....	59	TINIDAZOLE TAB 500MG.....	24
THYROID TAB 15 MG (1/4 GRAIN).....	129	TIBSOVO TAB 250MG.....	169	TIOPRONIN TAB 100 MG.....	112
THYROID TAB 15 MG (1/4 GRAIN).....	129	TICAGRELOR TAB 60 MG.....	188	TIOPRONIN TAB 100MG.....	112
THYROID TAB 15 MG (1/4 GRAIN).....	129	TICAGRELOR TAB 60MG.....	188	TIOPRONIN TAB 100MG DR.....	112
THYROID TAB 30MG.....	129	TICAGRELOR TAB 90 MG.....	188	TIOPRONIN TAB 300MG DR.....	112
THYROID TAB 30 MG (1/2 GRAIN).....	127	TICAGRELOR TAB 90MG.....	188	TIOPRONIN TAB DELAYED RELEASE 100	
THYROID TAB 30 MG (1/2 GRAIN).....	128	TIGLUTIK SUS 50/10ML.....	65	MG.....	112
THYROID TAB 30 MG (1/2 GRAIN).....	129	TIKOSYN CAP 125MCG.....	22	TIOPRONIN TAB DELAYED RELEASE 300	
THYROID TAB 30 MG (1/2 GRAIN).....	129	TIKOSYN CAP 250MCG.....	22	MG.....	112
THYROID TAB 30 MG (1/2 GRAIN).....	129	TIKOSYN CAP 500MCG.....	22	TIOTROPIUM BR-OLODATEROL INHAL	
THYROID TAB 30 MG (1/2 GRAIN).....	129	TILIA FE TAB.....	104	AERO SOLN 2.5-2.5 MCG/ACT.....	195
THYROID TAB 60MG.....	129	TIMOLOL GEL SOL 0.5% OP.....	179	TIOTROPIUM BROMIDE INHAL AEROSOL	
THYROID TAB 60 MG (1 GRAIN).....	127	TIMOLOL GEL SOL 0.25% OP.....	179	1.25 MCG/ACT.....	54
THYROID TAB 60 MG (1 GRAIN).....	128	TIMOLOL HEMI SOL 0.5% OP.....	179	TIOTROPIUM BROMIDE INHAL AEROSOL	
THYROID TAB 60 MG (1 GRAIN).....	129	TIMOLOL MALEATE OPTH GEL		2.5 MCG/ACT.....	54
THYROID TAB 60 MG (1 GRAIN).....	129	FORMING SOLN 0.5%.....	179	TIOTROPIUM BROMIDE INHAL CAP 18	
THYROID TAB 60 MG (1 GRAIN).....	129	TIMOLOL MALEATE OPTH GEL		MCG (BASE EQUIV).....	54
THYROID TAB 60 MG (1 GRAIN).....	129	FORMING SOLN 0.25%.....	179	TIPRANAVIR CAP 250 MG.....	19
THYROID TAB 60 MG (1 GRAIN).....	129	TIMOLOL MALEATE OPTH SOLN 0.5%.....	179	TIRBANIBULIN OINTMENT 1%.....	73
THYROID TAB 90MG.....	129	TIMOLOL MALEATE OPTH SOLN 0.5%		TIRBANIBULIN OINTMENT 1%.....	73
THYROID TAB 90 MG (1 1/2 GRAIN).....	127	(ONCE-DAILY).....	179	TIRZEPATIDE SOLN AUTO-INJECTOR 2.5	
THYROID TAB 90 MG (1 1/2 GRAIN).....	128	TIMOLOL MALEATE OPTH SOLN 0.5%		MG/0.5ML.....	30
THYROID TAB 90 MG (1 1/2 GRAIN).....	129	(ONCE-DAILY).....	179	TIRZEPATIDE SOLN AUTO-INJECTOR 5	
THYROID TAB 90 MG (1 1/2 GRAIN).....	129	TIMOLOL MALEATE OPTH SOLN 0.5%		MG/0.5ML.....	31
THYROID TAB 90 MG (1 1/2 GRAIN).....	129	(ONCE-DAILY).....	179	TIRZEPATIDE SOLN AUTO-INJECTOR 7.5	
THYROID TAB 120MG.....	129	TIMOLOL MALEATE OPTH SOLN 0.25%.....	179	MG/0.5ML.....	31
THYROID TAB 120 MG (2 GRAIN).....	127	TIMOLOL MALEATE PRESERVATIVE FREE		TIRZEPATIDE SOLN AUTO-INJECTOR 10	
THYROID TAB 120 MG (2 GRAIN).....	128	OPPTH SOLN 0.5%.....	179	MG/0.5ML.....	30
THYROID TAB 120 MG (2 GRAIN).....	129	TIMOLOL MALEATE PRESERVATIVE FREE		TIRZEPATIDE SOLN AUTO-INJECTOR	
THYROID TAB 120 MG (2 GRAIN).....	129	OPPTH SOLN 0.5%.....	179	12.5 MG/0.5ML.....	30
THYROID TAB 120 MG (2 GRAIN).....	129	TIMOLOL MALEATE PRESERVATIVE FREE		TIRZEPATIDE SOLN AUTO-INJECTOR 15	
THYROID TAB 120 MG (2 GRAIN).....	129	OPPTH SOLN 0.25%.....	179	MG/0.5ML.....	30
THYROID TAB 180 MG (3 GRAIN).....	127	TIMOLOL MALEATE PRESERVATIVE FREE		TISSEEL KIT 2ML.....	72
THYROID TAB 180 MG (3 GRAIN).....	128	OPPTH SOLN 0.25%.....	179	TISSEEL KIT 4ML.....	72
THYROID TAB 240 MG (4 GRAIN).....	127	TIMOLOL MALEATE TAB 5 MG.....	50	TISSEEL KIT 10ML.....	72
THYROID TAB 300 MG (5 GRAIN).....	127	TIMOLOL MALEATE TAB 10 MG.....	50	TIVICAY PD TAB 5MG.....	16
TIADYLT CAP 120MG/24.....	58	TIMOLOL MALEATE TAB 20 MG.....	50	TIVICAY TAB 10MG.....	16
TIADYLT CAP 180MG/24.....	58	TIMOLOL MALE SOL 0.5%.....	179	TIVICAY TAB 25MG.....	16
TIADYLT CAP 240MG/24.....	58	TIMOLOL MALE SOL 0.5% OP.....	179	TIVICAY TAB 50MG.....	16
TIADYLT CAP 300MG/24.....	58	TIMOLOL MAL SOL 0.5% OP.....	179	TIZANIDINE CAP 2MG.....	197
TIADYLT CAP 360MG/24.....	58	TIMOLOL MAL SOL 0.5% OP.....	179	TIZANIDINE CAP 4MG.....	197
TIADYLT CAP 420MG/24.....	58	TIMOLOL MAL SOL 0.25% OP.....	179	TIZANIDINE CAP 6MG.....	197
TIAGABINE HCL TAB 2 MG.....	107	TIMOLOL MAL SOL 0.25% OP.....	179	TIZANIDINE HCL CAP 2 MG (BASE	
TIAGABINE HCL TAB 4 MG.....	107	TIMOLOL MAL TAB 5MG.....	50	EQUIVALENT).....	197
TIAGABINE HCL TAB 12 MG.....	107	TIMOLOL MAL TAB 10MG.....	50	TIZANIDINE HCL CAP 2 MG (BASE	
TIAGABINE HCL TAB 16 MG.....	107	TIMOLOL MAL TAB 20MG.....	50	EQUIVALENT).....	197
TIAGABINE TAB 2MG.....	107	TIMOLOL OPTH SOLN 0.5%.....	178	TIZANIDINE HCL CAP 4 MG (BASE	
TIAGABINE TAB 4MG.....	107	TIMOLOL OPTH SOLN 0.5%.....	179	EQUIVALENT).....	197
TIAGABINE TAB 12MG.....	107	TIMOLOL OPTH SOLN 0.25%.....	178	TIZANIDINE HCL CAP 4 MG (BASE	
TIAGABINE TAB 16MG.....	107	TIMOPTIC OCU SOL 0.5% OP.....	179	EQUIVALENT).....	197
TIAZAC CAP 120MG/24.....	59	TIMOPTIC OCU SOL 0.25% OP.....	179	TIZANIDINE HCL CAP 6 MG (BASE	
TIAZAC CAP 180MG/24.....	59	TIMOTHY GRASS POLLEN ALLERGEN		EQUIVALENT).....	197
		EXT SL TAB 2800 BAU.....	194		

TIZANIDINE HCL CAP 6 MG (BASE EQUIVALENT).....	198	TOLVAPTAN TAB 30MG.....	93	TRALOKINUMAB-LDRM SUBCUTANEOUS SOLN AUTO-INJECTOR 300 MG/2ML.....	68
TIZANIDINE HCL TAB 2 MG (BASE EQUIVALENT).....	197	TOLVAPTAN TAB THERAPY PACK 15 MG.....	93	TRALOKINUMAB-LDRM SUBCUTANEOUS SOLN PREFILLED SYR 150 MG/ML.....	68
TIZANIDINE HCL TAB 4 MG (BASE EQUIVALENT).....	197	TOLVAPTAN TAB THERAPY PACK 30 & 15 MG.....	93	TRAMADL/APAP TAB 37.5-325.....	184
TIZANIDINE HCL TAB 4 MG (BASE EQUIVALENT).....	198	TOLVAPTAN TAB THERAPY PACK 45 & 15 MG.....	93	TRAMADOL-ACETAMINOPHEN TAB 37.5-325 MG.....	184
TIZANIDINE TAB 2MG.....	197	TOLVAPTAN TAB THERAPY PACK 60 & 30 MG.....	93	TRAMADOL HCL TAB 50 MG.....	185
TIZANIDINE TAB 4MG.....	197	TOLVAPTAN TAB THERAPY PACK 90 & 30 MG.....	93	TRAMADOL HCL TAB 50MG.....	185
TOBRA/DEXAME SUS 0.3-0.1%.....	176	TOMMY GEL GEL.....	163	TRAMADOL HCL TAB 100MG ER.....	182
TOBRADEX OIN 0.3-0.1%.....	11	TOPICORT CRE 0.05%.....	125	TRAMADOL HCL TAB 100MG ER.....	182
TOBRAMYCIN-DEXAMETHASONE OPHTH OINT 0.3-0.1%.....	11	TOPICORT CRE 0.25%.....	125	TRAMADOL HCL TAB 200MG ER.....	182
TOBRAMYCIN-DEXAMETHASONE OPHTH SUSP 0.3-0.1%.....	176	TOPICORT GEL 0.05%.....	125	TRAMADOL HCL TAB 200MG ER.....	182
TOBRAMYCIN NEB 300/4ML.....	66	TOPICORT OIN 0.05%.....	125	TRAMADOL HCL TAB 300MG ER.....	182
TOBRAMYCIN NEBU SOLN 300 MG/4ML.....	66	TOPICORT OIN 0.25%.....	125	TRAMADOL HCL TAB 300MG ER.....	182
TOBRAMYCIN OPHTH OINT 0.3%.....	178	TOPICORT SPR 0.25%.....	125	TRAMADOL HCL TAB ER 24HR 100 MG.....	182
TOBRAMYCIN OPHTH SOLN 0.3%.....	178	TOPIRAMATE CAP 15MG.....	114	TRAMADOL HCL TAB ER 24HR 200 MG.....	182
TOBRAMYCIN SOL 0.3% OP.....	178	TOPIRAMATE CAP 25MG.....	114	TRAMADOL HCL TAB ER 24HR 300 MG.....	182
TOBREX OIN 0.3% OP.....	178	TOPIRAMATE CAP 50MG.....	114	TRAMADOL HCL TAB ER 24HR BIPHASIC RELEASE 100 MG.....	182
TOCILIZUMAB-AAZG SUBCUTANEOUS SOLN AUTO-INJ 162 MG/0.9ML.....	135	TOPIRAMATE SPRINKLE CAP 15 MG.....	114	TRAMADOL HCL TAB ER 24HR BIPHASIC RELEASE 200 MG.....	182
TOCILIZUMAB-AAZG SUBCUTANEOUS SOLN PREF SYR 162 MG/0.9ML.....	135	TOPIRAMATE SPRINKLE CAP 25 MG.....	114	TRAMADOL HCL TAB ER 24HR BIPHASIC RELEASE 300 MG.....	182
TOCILIZUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 162 MG/0.9ML.....	135	TOPIRAMATE SPRINKLE CAP 50 MG.....	114	TRAMETINIB DIMETHYL SULFOXIDE FOR SOLN 0.05 MG/ML (BASE EQ).....	168
TOCILIZUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 162 MG/0.9ML.....	135	TOPIRAMATE TAB 25 MG.....	114	TRAMETINIB DIMETHYL SULFOXIDE TAB 0.5 MG (BASE EQUIVALENT).....	168
TODAY SPONGE MIS.....	112	TOPIRAMATE TAB 25MG.....	114	TRAMETINIB DIMETHYL SULFOXIDE TAB 2 MG (BASE EQUIVALENT).....	168
TODDLER BEGI POW IRON.....	163	TOPIRAMATE TAB 50 MG.....	114	TRANDOLAPRIL TAB 1 MG.....	14
TOFACITINIB CITRATE ORAL SOLN 1 MG/ML (BASE EQUIVALENT).....	134	TOPIRAMATE TAB 50MG.....	114	TRANDOLAPRIL TAB 1MG.....	14
TOFACITINIB CITRATE TAB 5 MG (BASE EQUIVALENT).....	134	TOPIRAMATE TAB 100 MG.....	114	TRANDOLAPRIL TAB 2 MG.....	14
TOFACITINIB CITRATE TAB 10 MG (BASE EQUIVALENT).....	134	TOPIRAMATE TAB 100MG.....	114	TRANDOLAPRIL TAB 2MG.....	14
TOFACITINIB CITRATE TAB ER 24HR 11 MG (BASE EQUIVALENT).....	134	TOPIRAMATE TAB 200 MG.....	114	TRANDOLAPRIL TAB 4 MG.....	14
TOFACITINIB CITRATE TAB ER 24HR 22 MG (BASE EQUIVALENT).....	134	TOPIRAMATE TAB 200MG.....	114	TRANDOLAPRIL TAB 4MG.....	14
TOLTERODINE TAB 1MG.....	42	TOPOTECAN HCL CAP 0.25 MG (BASE EQUIV).....	94	TRANDOLAPRIL-VERAPAMIL HCL TAB ER 1-240 MG.....	63
TOLTERODINE TAB 2MG.....	42	TOPOTECAN HCL CAP 1 MG (BASE EQUIV).....	94	TRANDOLAPRIL-VERAPAMIL HCL TAB ER 2-180 MG.....	63
TOLTERODINE TARTRATE TAB 1 MG.....	42	TOREMIFENE CITRATE TAB 60 MG (BASE EQUIVALENT).....	33	TRANDOLAPRIL-VERAPAMIL HCL TAB ER 2-240 MG.....	63
TOLTERODINE TARTRATE TAB 2 MG.....	42	TOREMIFENE TAB 60MG.....	33	TRANDOLAPRIL-VERAPAMIL HCL TAB ER 4-240 MG.....	63
TOLVAPTAN PAK 15MG.....	93	TORPENZ TAB 2.5MG.....	169	TRANDO/VERAP TAB 1-240 ER.....	63
TOLVAPTAN PAK 30-15MG.....	93	TORPENZ TAB 5MG.....	169	TRANDO/VERAP TAB 2-180 ER.....	63
TOLVAPTAN PAK 45-15MG.....	93	TORPENZ TAB 7.5MG.....	169	TRANDO/VERAP TAB 2-240 ER.....	63
TOLVAPTAN PAK 60-30MG.....	93	TORPENZ TAB 10MG.....	169	TRANDO/VERAP TAB 4-240 ER.....	63
TOLVAPTAN PAK 90-30MG.....	93	TORSEMIDE TAB 5 MG.....	81	TRANEX ACID TAB 650MG.....	121
TOLVAPTAN TAB 15 MG.....	93	TORSEMIDE TAB 5MG.....	81	TRANEXAMIC ACID TAB 650 MG.....	121
TOLVAPTAN TAB 15MG.....	93	TORSEMIDE TAB 10 MG.....	81	*TRANSDERMAL BASE CREAM**.....	158
TOLVAPTAN TAB 30 MG.....	93	TORSEMIDE TAB 10MG.....	81	*TRANSDERMAL BASE CREAM**.....	163
TOLVAPTAN TAB 30 MG.....	93	TORSEMIDE TAB 20 MG.....	81	*TRANSDERMAL BASE CREAM**.....	163
TOLVAPTAN TAB 30MG.....	93	TORSEMIDE TAB 20MG.....	81	*TRANSDERMAL BASE GEL**.....	164
		TORSEMIDE TAB 100 MG.....	81	*TRANSDERMAL BASE GEL**.....	165
		TORSEMIDE TAB 100MG.....	81	TRANSDERMAL CRE PAIN BAS.....	163
		TOUJEO MAX INJ 300/ML.....	137		
		TOUJEO SOLO INJ 300/ML.....	137		
		TOVORAFENIB FOR ORAL SUSP 25 MG/ML.....	168		
		TOVORAFENIB TAB 100 MG.....	168		
		TRACLEER TAB 32MG.....	191		
		TRACLEER TAB 62.5MG.....	191		
		TRACLEER TAB 125MG.....	191		
		TRADJENTA TAB 5MG.....	32		

TRANLYCYPROMINE SULFATE TAB 10 MG .170	TRETINOIN CAP 10 MG 196	TRIAMTERENE &
TRANLYCYPROMINE SULFATE TAB 10 MG .170	TRETINOIN CAP 10MG 196	HYDROCHLOROTHIAZIDE TAB 37.5-25 MG . 62
TRANLYCYPROM TAB 10MG 170	TRETINOIN CRE 0.1% 72	TRIAMTERENE &
TRAVOPROST DRO 0.004% 180	TRETINOIN CRE 0.05% 72	HYDROCHLOROTHIAZIDE TAB 37.5-25 MG . 63
TRAVOPROST OPHTH SOLN 0.004%	TRETINOIN CRE 0.025% 72	TRIAMTERENE &
(BENZALKONIUM FREE) (BAK FREE) 180	TRETINOIN CREAM 0.1% 72	HYDROCHLOROTHIAZIDE TAB 75-50 MG ... 62
TRAZODONE HCL TAB 50 MG 205	TRETINOIN CREAM 0.05% 72	TRIAMTERENE &
TRAZODONE HCL TAB 100 MG 205	TRETINOIN CREAM 0.025% 72	HYDROCHLOROTHIAZIDE TAB 75-50 MG ... 63
TRAZODONE HCL TAB 150 MG 205	TRETIN INJ 121	TRIAMT/HCTZ CAP 37.5-25 63
TRAZODONE HCL TAB 300 MG 205	TREXALL TAB 5MG 134	TRIAMT/HCTZ TAB 37.5-25 63
TRAZODONE TAB 50MG 205	TREXALL TAB 7.5MG 134	TRIAMT/HCTZ TAB 75-50MG 63
TRAZODONE TAB 100MG 205	TREXALL TAB 10MG 134	TRIAZOLAM TAB 0.25 MG 48
TRAZODONE TAB 150MG 205	TREXALL TAB 15MG 134	TRIAZOLAM TAB 0.25 MG 49
TRAZODONE TAB 300MG 205	TRIAMCINOLON AER SPRAY 125	TRIAZOLAM TAB 0.25MG 49
TRECTOR TAB 250MG 43	TRIAMCINOLON CRE 0.1% 125	TRIAZOLAM TAB 0.125 MG 49
TRELEGY AER 100MCG 195	TRIAMCINOLON CRE 0.5% 125	TRIAZOLAM TAB 0.125MG 49
TRELEGY AER 200MCG 195	TRIAMCINOLON CRE 0.025% 125	TRICARE TAB PRENATAL 219
TREMFYA INJ 100MG/ML 72	TRIAMCINOLONE ACETONIDE AEROSOL	TRICHLOROACE CRY ACID 163
TREMFYA INJ 100MG/ML 72	SOLN 0.147 MG/GM 125	TRICHLOROACETIC ACID (BULK)
TREMFYA INJ 100MG/ML 72	TRIAMCINOLONE ACETONIDE CREAM	CRYSTALS 163
TREMFYA INJ 200/2ML 72	0.1% 125	TRICHOSOL SOL 163
TREMFYA INJ 200/2ML 72	TRIAMCINOLONE ACETONIDE CREAM	TRICITRASOL CON 26
TREPROSTINIL DIOLAMINE TAB ER 0.25	0.5% 125	TRICITRATES SOL 92
MG (BASE EQUIV) 191	TRIAMCINOLONE ACETONIDE CREAM	TRICLABENDAZOLE TAB 250 MG 14
TREPROSTINIL DIOLAMINE TAB ER 0.125	0.5% 126	TRIDERM CRE 0.5% 126
MG (BASE EQUIV) 191	TRIAMCINOLONE ACETONIDE CREAM	TRIENTINE CAP 500MG 93
TREPROSTINIL DIOLAMINE TAB ER 1 MG	0.025% 125	TRIENTINE HCL CAP 500 MG 93
(BASE EQUIV) 191	TRIAMCINOLONE ACETONIDE DENTAL	TRI-ESTARYLL TAB 104
TREPROSTINIL DIOLAMINE TAB ER 2.5	PASTE 0.1% 67	TRIFAROTENE CREAM 0.005% 68
MG (BASE EQUIV) 191	TRIAMCINOLONE ACETONIDE DENTAL	TRIFLUOPERAZINE HCL TAB 1 MG (BASE
TREPROSTINIL DIOLAMINE TAB ER 5 MG	PASTE 0.1% 67	EQUIVALENT) 7
(BASE EQUIV) 191	TRIAMCINOLONE ACETONIDE DENTAL	TRIFLUOPERAZINE HCL TAB 2 MG (BASE
TREPROSTINIL INHALATION SOLUTION	PASTE 0.1% 67	EQUIVALENT) 7
0.6 MG/ML 191	TRIAMCINOLONE ACETONIDE DENTAL	TRIFLUOPERAZINE HCL TAB 5 MG (BASE
TREPROSTINIL INHALATION SOLUTION	PASTE 0.1% 68	EQUIVALENT) 7
0.6 MG/ML 192	TRIAMCINOLONE ACETONIDE LOTION	TRIFLUOPERAZINE HCL TAB 10 MG
TREPROSTINIL INHALATION SOLUTION	0.1% 125	(BASE EQUIVALENT) 7
0.6 MG/ML 192	TRIAMCINOLONE ACETONIDE LOTION	TRIFLUOPERAZ TAB 1MG 7
TREPROSTINIL INH POWD 112 X 16MCG &	0.025% 125	TRIFLUOPERAZ TAB 2MG 7
112 X 32MCG & 28 X 48MCG 192	TRIAMCINOLONE ACETONIDE OINT 0.1% .125	TRIFLUOPERAZ TAB 5MG 7
TREPROSTINIL INH POWDER 16 MCG/	TRIAMCINOLONE ACETONIDE OINT 0.5% .125	TRIFLUOPERAZ TAB 10MG 7
CARTRIDGE 192	TRIAMCINOLONE ACETONIDE OINT	TRIFLURIDINE OPHTH SOLN 1% 179
TREPROSTINIL INH POWDER 32 MCG/	0.025% 125	TRIFLURIDINE SOL 1% OP 179
CARTRIDGE 192	TRIAMCINOLON LOT 0.1% 125	TRIHEPTANOIN ORAL LIQUID 100% 86
TREPROSTINIL INH POWDER 48 MCG/	TRIAMCINOLON LOT 0.025% 125	TRIHXYPHENIDYL HCL ORAL SOLN 0.4
CARTRIDGE 192	TRIAMCINOLON OIN 0.1% 125	MG/ML 25
TREPROSTINIL INH POWDER 64 MCG/	TRIAMCINOLON OIN 0.5% 125	TRIHXYPHENIDYL HCL TAB 2 MG 25
CARTRIDGE 192	TRIAMCINOLON OIN 0.025% 125	TRIHXYPHENIDYL HCL TAB 5 MG 25
TREPROSTINIL INH POWDER 112 X	TRIAMCINOLON PST 0.1% 67	TRIHXYPHEN SOL 0.4MG/ML 25
16MCG & 84 X 32MCG 192	TRIAMCINOLON PST DEN 0.1% 68	TRIHXYPHEN TAB 2MG 25
TREPROSTINIL TAB ER TITR PK (MO1) 126	TRIAMTERENE CAP 50 MG 81	TRIHXYPHEN TAB 5MG 25
X0.125MG & 42 X0.25MG 191	TRIAMTERENE CAP 50MG 81	TRIJARDY XR TAB 32
TREPROSTINIL TAB ER TITR PK (MO2)	TRIAMTERENE CAP 100 MG 81	TRIJARDY XR TAB 32
126 X0.125MG & 210 X0.25MG 191	TRIAMTERENE CAP 100MG 81	TRIJARDY XR TAB 32
TREPROSTINIL TAB ER TITR PK(MO3)126	TRIAMTERENE &	TRIJARDY XR TAB 32
X0.125MG&42X0.25MG&84X1MG 191	HYDROCHLOROTHIAZIDE CAP 37.5-25 MG .63	TRIKAF TA PAK 59.5MG 66

TRIKAFTA PAK 75MG.....	66	TRULICITY INJ 0.75/0.5	32	TYVASO RF KT SOL 0.6MG/ML.....	192
TRIKAFTA TAB	66	TRULICITY INJ 1.5/0.5.....	32	TYVASO SOL 0.6MG/ML	191
TRIKAFTA TAB	66	TRULICITY INJ 3/0.5	32	TYVASO ST KT SOL 0.6MG/ML.....	192
TRI-LEGEST TAB FE	104	TRULICITY INJ 4.5/0.5.....	32	UBRELVY TAB 50MG	56
TRI-LINYAH TAB	104	TRUMENBA INJ	212	UBRELVY TAB 100MG	56
TRI-LO-MILI TAB.....	104	TRUPLUS LANC MIS 26G.....	79	UBROGEPANT TAB 50 MG	56
TRI-LO TAB ESTARYLL	104	TRUPLUS LANC MIS 28G.....	79	UBROGEPANT TAB 100 MG	56
TRI-LO- TAB MARZIA.....	104	TRUPLUS LANC MIS 30G.....	79	UCD TRIO POW.....	219
TRI-LO- TAB SPRINTEC	104	TRUPLUS LANC MIS 33G.....	79	UDENYCA INJ 6MG/0.6	54
TRIMETHOBENZAMIDE HCL CAP 300 MG ..	33	TRUQAP PAK 160MG	39	UDENYCA INJ 6MG/6ML	54
TRIMETHOBENZ CAP 300MG	33	TRUQAP PAK 200MG	39	ULIPRISTAL ACETATE TAB 30 MG	188
TRIMETHOPRIM TAB 100 MG	24	TRUQAP TAB 160MG	39	ULTANE SOL	164
TRIMETHOPRIM TAB 100MG.....	24	TRUQAP TAB 200MG	39	ULTIGUARD MIS 32GX4MM	79
TRI-MILI TAB	104	TRUVADA TAB 100-150	18	ULTIGUARD MIS 32GX6MM	79
TRIMIPRAMINE CAP 25MG	209	TRUVADA TAB 133-200	18	ULTRA THIN MIS LANC 28G.....	79
TRIMIPRAMINE CAP 50MG	209	TRUVADA TAB 167-250	18	ULTRA THIN MIS LANC 30G.....	79
TRIMIPRAMINE CAP 100MG	209	TRYNGOLZA INJ 80MG/0.8.....	164	ULTRA THIN MIS LANCETS	79
TRIMIPRAMINE MALEATE CAP 25 MG	209	TUCATINIB TAB 50 MG.....	169	UMECLIDINIUM-VILANTEROL AERO	
TRIMIPRAMINE MALEATE CAP 50 MG	209	TUCATINIB TAB 150 MG.....	169	POWD BA 62.5-25 MCG/ACT	193
TRIMIPRAMINE MALEATE CAP 100 MG	209	TUKYSA TAB 50MG.....	169	UNIFINE PNTP MIS 29GX12MM.....	164
TRINATAL RX TAB 1.....	219	TUKYSA TAB 150MG.....	169	UNIFINE PNTP MIS 31GX3/16.....	164
TRINATE TAB.....	219	TURALIO CAP 125MG	169	UNIFINE PNTP MIS 31GX5/16.....	164
TRINTELLIX TAB 5MG.....	206	TURPENTINE SOL SPIRITS.....	11	UNIFINE PNTP MIS 31GX5MM	164
TRINTELLIX TAB 10MG	205	TURPENTINE SPIRIT.....	11	UNIFINE PNTP MIS 31GX6MM	164
TRINTELLIX TAB 20MG	206	TURQOZ TAB	104	UNIFINE PNTP MIS 31GX8MM	164
TRI-NYMYO TAB.....	104	TUXARIN ER TAB 54.3-8MG	195	UNIFINE PNTP MIS 32GX4MM	79
TRI-SPRINTEC TAB.....	104	TWIIST KIT REFILL	164	UNIFINE PROT MIS 30GX5MM.....	164
TRISTART DHA CAP	219	TWIIST KIT STARTER.....	164	UNIFINE PROT MIS 30GX8MM.....	79
TRIUMEQ PD TAB	16	TWIIST REFIL KIT INFUSION	164	UNIFINE PROT MIS 32GX4MM	79
TRIUMEQ TAB.....	16	TWINRIX INJ	212	UNIFINE SAFE MIS 31GX5MM.....	164
TRI-VI-FLORO SUS 0.5MG/ML	219	TWIST LANCET MIS 30G	79	UNIFINE SAFE MIS 31GX6MM.....	164
TRI-VI-FLORO SUS 0.25/ML.....	219	TWIST LANCET MIS 30G MULT	79	UNIFINE SAFE MIS 31GX8MM.....	164
TRI-VIT/FLUO DRO 0.5MG	92	TYBLUME CHW 0.1-0.02.....	104	UNILET LANCT MIS 30G	79
TRI-VIT/FLUO DRO 0.25MG	92	TYBOST TAB 150MG.....	19	UNILET LANCT MIS 33G	79
TRIVORA-28 TAB.....	104	TYDEMY TAB	104	UNISPEND ANH SUS SWEETENE	164
TRI-VYLIBRA TAB	104	TYENNE INJ 162/0.9.....	135	UNITHROID TAB 25MCG	129
TRI-VYLIBRA TAB LO.....	104	TYENNE INJ 162MG.....	135	UNITHROID TAB 50MCG	130
TRIZIVIR TAB	18	TYLACTIN POW RESTOR5.....	92	UNITHROID TAB 75MCG	130
*TROCHE BASE GRANULES***	165	TYLACTIN RTD LIQ 15 CHOC.....	92	UNITHROID TAB 88MCG	130
TROFINETIDE ORAL SOLN 200 MG/ML.....	63	TYMLOS INJ	142	UNITHROID TAB 100MCG.....	129
TROJAN-ENZ MIS LUBRICAT.....	163	TYR COOLER LIQ RED.....	92	UNITHROID TAB 112MCG	129
TROJAN-ENZ MIS W/SPERMI	163	TYR GEL PAK UNFLAVOR.....	92	UNITHROID TAB 125MCG	129
TROJAN MAGN MIS	163	TYROS 1 POW	219	UNITHROID TAB 137MCG	129
TROJAN MIS BARESKIN.....	163	TYROS 2 POW	219	UNITHROID TAB 150MCG	129
TROJAN ULTRA MIS RIBBED	163	TYROSINE CAP 500 MG.....	88	UNITHROID TAB 175MCG	129
TROJAN ULTRA MIS THIN.....	163	TYROSINE CAP 500 MG.....	88	UNITHROID TAB 200MCG.....	129
TROSPIUM CHLORIDE TAB 20 MG	42	TYROSINE ORAL POWDER PACKET 1000		UNITHROID TAB 300MCG.....	129
TROSPIUM CL TAB 20MG	42	MG	92	UNJURY POW CHICKEN.....	164
TRUE COMFORT MIS 32GX4MM.....	79	TYROSINE PAK 1000MG	92	UNJURY POW CHOCOLAT.....	164
TRUE COVER MIS CONDOM.....	163	TYVASO DPI POW 16-32-48	192	UNJURY POW STRAWBRY	164
TRUEDRAW MIS LANC DEV	80	TYVASO DPI POW 16-32MCG.....	192	UNJURY POW UNFLAVOR.....	164
TRUE LAXATIV POW 3350.....	138	TYVASO DPI POW 16MCG.....	192	UNJURY POW VANILLA	164
TRUE METRIX SOL LEVEL 1	163	TYVASO DPI POW 32MCG.....	192	UPADACITINIB ORAL SOLN 1 MG/ML.....	135
TRUE METRIX SOL LEVEL 2	163	TYVASO DPI POW 48MCG.....	192	UPADACITINIB TAB ER 24HR 15 MG	135
TRUE METRIX SOL LEVEL 3	163	TYVASO DPI POW 64MCG.....	192	UPADACITINIB TAB ER 24HR 30 MG.....	135

UPADACITINIB TAB ER 24HR 45 MG.....	135	USTEKINUMAB-AUUB INJ 45 MG/0.5ML.....	72	VALPROIC ACD CAP 250MG.....	107
UPTRAVI PACK TAB 200/800.....	192	USTEKINUMAB-AUUB SOLN PREFILLED		VALPROIC ACD SOL 250/5ML.....	107
UPTRAVI TAB 200MCG.....	192	SYRINGE 45 MG/0.5ML.....	72	VALPROIC ACID CAP 250 MG.....	107
UPTRAVI TAB 400MCG.....	192	USTEKINUMAB-AUUB SOLN PREFILLED		VALSARTAN-HYDROCHLOROTHIAZIDE	
UPTRAVI TAB 600MCG.....	192	SYRINGE 90 MG/ML.....	73	TAB 80-12.5 MG.....	63
UPTRAVI TAB 800MCG.....	192	USTEKINUMAB INJ 45/0.5ML.....	134	VALSARTAN-HYDROCHLOROTHIAZIDE	
UPTRAVI TAB 1000MCG.....	192	USTEKINUMAB INJ 90MG/ML.....	134	TAB 160-12.5 MG.....	63
UPTRAVI TAB 1200MCG.....	192	USTEKINUMAB-KFCE SOLN PREFILLED		VALSARTAN-HYDROCHLOROTHIAZIDE	
UPTRAVI TAB 1400MCG.....	192	SYRINGE 45 MG/0.5ML.....	73	TAB 160-25 MG.....	63
UPTRAVI TAB 1600MCG.....	192	USTEKINUMAB-KFCE SOLN PREFILLED		VALSARTAN-HYDROCHLOROTHIAZIDE	
URAMAXIN GEL 45%.....	73	SYRINGE 90 MG/ML.....	73	TAB 320-12.5 MG.....	63
UREA BEADS.....	164	USTEKINUMAB-KFCE SUBCUTANEOUS		VALSARTAN-HYDROCHLOROTHIAZIDE	
UREA CRE 20%.....	73	SOLN 45 MG/0.5ML.....	73	TAB 320-25 MG.....	63
UREA CRE 40%.....	73	USTEKINUMAB SOLN PREFILLED		VALSARTAN ORAL SOLN 4 MG/ML.....	13
UREA CRE 45%.....	74	SYRINGE 45 MG/0.5ML.....	134	VALSARTAN SOL 20MG/5ML.....	13
UREA CREAM 20%.....	73	USTEKINUMAB SOLN PREFILLED		VALSARTAN TAB 40 MG.....	13
UREA CREAM 40%.....	73	SYRINGE 45 MG/0.5ML.....	134	VALSARTAN TAB 40MG.....	13
UREA CREAM 40%.....	74	USTEKINUMAB SOLN PREFILLED		VALSARTAN TAB 80 MG.....	13
UREA CREAM 45%.....	74	SYRINGE 90 MG/ML.....	134	VALSARTAN TAB 80MG.....	13
UREA FOAM 40%.....	73	USTEKINUMAB SOLN PREFILLED		VALSARTAN TAB 160 MG.....	13
UREA GEL 45%.....	73	SYRINGE 90 MG/ML.....	134	VALSARTAN TAB 160MG.....	13
UREA GEL 45%.....	74	USTEKINUMAB-STBA SOLN PREFILLED		VALSARTAN TAB 320 MG.....	13
UREA-LACTIC ACID GEL 40-10%.....	73	SYRINGE 45 MG/0.5ML.....	72	VALSARTAN TAB 320MG.....	13
UREA-LACTIC ACID GEL 40-10%.....	74	USTEKINUMAB-STBA SOLN PREFILLED		VALSART/HCTZ TAB 80-12.5.....	63
UREA LOT 40%.....	74	SYRINGE 90 MG/ML.....	72	VALSART/HCTZ TAB 160-12.5.....	63
UREA LOTION 40%.....	74	VALACYCLOVIR HCL TAB 1 GM.....	36	VALSART/HCTZ TAB 160-25MG.....	63
UREA NAIL GEL 45%.....	74	VALACYCLOVIR HCL TAB 500 MG.....	36	VALSART/HCTZ TAB 320-12.5.....	63
UREA POW.....	164	VALACYCLOVIR TAB 1GM.....	36	VALSART/HCTZ TAB 320-25MG.....	63
UREA POWDER.....	164	VALACYCLOVIR TAB 500MG.....	36	VALTOCO SPR 5MG.....	107
UREA PRILLED BEA.....	164	VALBENAZINE TOSYLATE CAP 40 MG		VALTOCO SPR 10MG.....	107
URELLE TAB.....	112	(BASE EQUIV).....	64	VALTOCO SPR 15MG.....	107
UREMEZ-40 CRE 40%.....	74	VALBENAZINE TOSYLATE CAP 60 MG		VALTOCO SPR 20MG.....	107
URETRON D/S TAB.....	112	(BASE EQUIV).....	64	VALTYA 1/35 TAB.....	104
URIDINE TRIACETATE ORAL GRANULES		VALBENAZINE TOSYLATE CAP 80 MG		VALTYA 1/50 TAB.....	104
PACKET 2 GM.....	110	(BASE EQUIV).....	64	VANCOCIN CAP 125MG.....	24
URIDINE TRIACETATE ORAL GRANULES		VALBENAZINE TOSYLATE CAPSULE		VANCOCIN CAP 250MG.....	24
PACKET 10 GM.....	165	SPRINKLE 40 MG (BASE EQUIV).....	64	VANCOMYCIN CAP 125MG.....	24
URIMAR-T TAB.....	112	VALBENAZINE TOSYLATE CAPSULE		VANCOMYCIN CAP 250MG.....	24
*URINE GLUCOSE-KETONES TEST		SPRINKLE 60 MG (BASE EQUIV).....	64	VANCOMYCIN HCL CAP 125 MG (BASE	
STRIPS***.....	75	VALBENAZINE TOSYLATE CAPSULE		EQUIVALENT).....	24
*URINE GLUCOSE-KETONES TEST		SPRINKLE 80 MG (BASE EQUIV).....	64	VANCOMYCIN HCL CAP 125 MG (BASE	
STRIPS***.....	76	VALBENAZINE TOSYLATE CAP THERAPY		EQUIVALENT).....	24
*URINE GLUCOSE-KETONES TEST		PACK 40 MG (7) & 80 MG (21).....	64	VANCOMYCIN HCL CAP 250 MG (BASE	
STRIPS***.....	77	VALCHLOR GEL 0.016%.....	10	EQUIVALENT).....	24
URO-458 TAB.....	112	VALGANCICLOVIR HCL FOR SOLN 50		VANCOMYCIN HCL CAP 250 MG (BASE	
UROCIT-K 5 TAB.....	92	MG/ML (BASE EQUIV).....	15	EQUIVALENT).....	24
UROCIT-K 10 TAB.....	92	VALGANCICLOVIR HCL TAB 450 MG		VANCOMYCIN HCL FOR ORAL SOLN 25	
UROCIT-K 15 TAB.....	92	(BASE EQUIVALENT).....	15	MG/ML (BASE EQUIVALENT).....	23
UROGESIC- TAB BLUE.....	112	VALGANCICLOV SOL 50MG/ML.....	15	VANCOMYCIN HCL FOR ORAL SOLN 25	
URSODIOL CAP 300 MG.....	108	VALGANCICLOV TAB 450MG.....	15	MG/ML (BASE EQUIVALENT).....	24
URSODIOL CAP 300MG.....	108	VALINE 1000 POW.....	164	VANCOMYCIN HCL FOR ORAL SOLN 50	
URSODIOL TAB 250 MG.....	108	VALINE ORAL POWDER PACKET 1 GM.....	164	MG/ML (BASE EQUIVALENT).....	23
URSODIOL TAB 250MG.....	108	VALINE ORAL POWDER PACKET 50 MG.....	164	VANCOMYCIN HCL FOR ORAL SOLN 50	
URSODIOL TAB 500 MG.....	108	VALINE PAK 50MG.....	164	MG/ML (BASE EQUIVALENT).....	24
URSODIOL TAB 500MG.....	108	VALPROATE SODIUM ORAL SOLN 250		VANCOMYCIN HCL FOR ORAL SOLN 50	
		MG/5ML (BASE EQUIV).....	107	MG/ML (BASE EQUIVALENT).....	25

VANCOMYCIN SOL 25MG/ML	24	VENCLEXTA TAB 10MG	169	VERAPAMIL HCL CAP ER 24HR 200 MG	59
VANCOMYCIN SOL 50MG/ML	25	VENCLEXTA TAB 50MG	169	VERAPAMIL HCL CAP ER 24HR 200 MG	59
VANCOMYCIN SOL 250/5ML	24	VENCLEXTA TAB 100MG	169	VERAPAMIL HCL CAP ER 24HR 240 MG	59
VANDAZOLE GEL 0.75%	25	VENCLEXTA TAB START PK	169	VERAPAMIL HCL CAP ER 24HR 240 MG	59
VANDETANIB TAB 100 MG	166	VENELEX OIN	74	VERAPAMIL HCL CAP ER 24HR 240 MG	59
VANDETANIB TAB 300 MG	166	VENETOCLAX TAB 10 MG	169	VERAPAMIL HCL CAP ER 24HR 300 MG	59
VANFLYTA TAB 17.7MG	39	VENETOCLAX TAB 50 MG	169	VERAPAMIL HCL CAP ER 24HR 300 MG	59
VANFLYTA TAB 26.5MG	39	VENETOCLAX TAB 100 MG	169	VERAPAMIL HCL CAP ER 24HR 360 MG	59
VANRAFIA TAB 0.75MG	164	VENETOCLAX TAB THERAPY STARTER		VERAPAMIL HCL CAP ER 24HR 360 MG	59
VANZACAFOR-TEZACAFOR-		PACK 10 & 50 & 100 MG	169	VERAPAMIL HCL TAB 40 MG	59
DEUTIVACAFOR TAB 4-20-50 MG	143	VENLAFAXINE CAP 37.5 ER	206	VERAPAMIL HCL TAB 80 MG	59
VANZACAFOR-TEZACAFOR-		VENLAFAXINE CAP 75MG ER	206	VERAPAMIL HCL TAB 120 MG	59
DEUTIVACAFOR TAB 10-50-125 MG	143	VENLAFAXINE CAP 150MG ER	206	VERAPAMIL HCL TAB ER 120 MG	59
VAQTA INJ 25/0.5ML	212	VENLAFAXINE HCL CAP ER 24HR 37.5 MG		VERAPAMIL HCL TAB ER 180 MG	59
VAQTA INJ 25/0.5ML	212	(BASE EQUIVALENT)	206	VERAPAMIL HCL TAB ER 240 MG	59
VAQTA INJ 50UNT/ML	212	VENLAFAXINE HCL CAP ER 24HR 75 MG		VERAPAMIL TAB 40MG	59
VAQTA INJ 50UNT/ML	212	(BASE EQUIVALENT)	206	VERAPAMIL TAB 80MG	59
VARDENAFIL HCL ORALLY		VENLAFAXINE HCL CAP ER 24HR 150 MG		VERAPAMIL TAB 120MG	59
DISINTEGRATING TAB 10 MG	112	(BASE EQUIVALENT)	206	VERAPAMIL TAB 120MG ER	59
VARDENAFIL HCL TAB 2.5 MG	112	VENLAFAXINE HCL TAB 25 MG (BASE		VERAPAMIL TAB 180MG ER	59
VARDENAFIL HCL TAB 5 MG	112	EQUIVALENT)	206	VERAPAMIL TAB 240MG ER	59
VARDENAFIL HCL TAB 10 MG	112	VENLAFAXINE HCL TAB 37.5 MG (BASE		VERELAN CAP 120MG SR	59
VARDENAFIL HCL TAB 20 MG	112	EQUIVALENT)	206	VERELAN CAP 180MG SR	59
VARDENAFIL TAB 2.5MG	112	VENLAFAXINE HCL TAB 50 MG (BASE		VERELAN CAP 240MG SR	59
VARDENAFIL TAB 5MG	112	EQUIVALENT)	206	VERELAN CAP 360MG SR	59
VARDENAFIL TAB 10MG	112	VENLAFAXINE HCL TAB 75 MG (BASE		VERELAN PM CAP 100MG ER	59
VARDENAFIL TAB 10MG ODT	112	EQUIVALENT)	206	VERELAN PM CAP 200MG ER	59
VARDENAFIL TAB 20MG	112	VENLAFAXINE HCL TAB 100 MG (BASE		VERELAN PM CAP 300MG ER	59
VARENICLINE TAB 0.5& 1MG	202	EQUIVALENT)	206	VERIFINE LAN MIS MINI 21G	79
VARENICLINE TAB 0.5MG	202	VENLAFAXINE TAB 25MG	206	VERIFINE LAN MIS MINI 23G	79
VARENICLINE TAB 1MG	202	VENLAFAXINE TAB 37.5MG	206	VERIFINE LAN MIS MINI 28G	80
VARENICLINE TARTRATE TAB 0.5 MG		VENLAFAXINE TAB 50MG	206	VERIFINE LAN MIS MINI 30G	80
(BASE EQUIV)	202	VENLAFAXINE TAB 75MG	206	VERIFINE MIS UNIV 28G	79
VARENICLINE TARTRATE TAB 1 MG (BASE		VENLAFAXINE TAB 100MG	206	VERIFINE MIS UNIV 30G	79
EQUIV)	202	VENTAVIS SOL 10MCG/ML	192	VERIFINE MIS UNIV 33G	79
VARENICLINE TARTRATE TAB 11 X 0.5 MG		VENTAVIS SOL 20MCG/ML	192	VERIFINE PEN MIS 29GX12MM	164
& 42 X 1 MG START PACK	202	VENT NEEDLE MIS 18GX1"	137	VERIFINE PEN MIS 31GX5MM	164
VARICELLA VIRUS VAC LIVE FOR INJ		VEOZAH TAB 45MG	126	VERIFINE PEN MIS 31GX8MM	164
1350 PFU/0.5ML	212	VERAPAMIL CAP 100MG ER	59	VERIFINE PEN MIS 32GX4MM	80
VARIVAX INJ	212	VERAPAMIL CAP 120MG ER	59	VERIFINE PEN MIS 32GX6MM	80
VAXELIS INJ	212	VERAPAMIL CAP 120MG SR	59	VERISAFE MIS 23GX1.5"	164
VAXELIS INJ	212	VERAPAMIL CAP 180MG ER	59	VERISAFE MIS 25GX1"	164
VAXNEUVANCE INJ	212	VERAPAMIL CAP 180MG SR	59	VERKAZIA EMU 0.1% OP	176
VCF VAGINAL GEL CONTRACE	112	VERAPAMIL CAP 200MG ER	59	VERSABASE GEL	164
VCF VAGINAL MIS CONTRACP	112	VERAPAMIL CAP 240MG ER	59	VERSABASE GEL	164
VECAMYL TAB 2.5MG	63	VERAPAMIL CAP 240MG SR	59	VERSAFREE SYP	164
VEDOLIZUMAB SOLN AUTO-INJECTOR		VERAPAMIL CAP 300MG ER	59	VERSAPENN AG GEL ANHYDROU	164
108 MG/0.68ML	135	VERAPAMIL CAP 360MG SR	59	VERSAPENN AL GEL ANHYDROU	165
VEGAPRO POW	164	VERAPAMIL HCL CAP ER 24HR 100 MG	59	VERSAPLUS SYP	165
VELIVET PAK	104	VERAPAMIL HCL CAP ER 24HR 100 MG	59	VERSAPRO GEL ANHYDROU	165
VELPHORO CHW 500MG	187	VERAPAMIL HCL CAP ER 24HR 120 MG	59	VERZENIO TAB 50MG	39
VELTASSA POW 1GM	93	VERAPAMIL HCL CAP ER 24HR 120 MG	59	VERZENIO TAB 100MG	39
VELTASSA POW 8.4GM	93	VERAPAMIL HCL CAP ER 24HR 120 MG	59	VERZENIO TAB 150MG	39
VELTASSA POW 16.8GM	93	VERAPAMIL HCL CAP ER 24HR 180 MG	59	VERZENIO TAB 200MG	39
VELTASSA POW 25.2GM	93	VERAPAMIL HCL CAP ER 24HR 180 MG	59	VFEND SUS 40MG/ML	35
VEMURAFENIB TAB 240 MG	170	VERAPAMIL HCL CAP ER 24HR 180 MG	59		

VFEND TAB 50MG	35	VITAL PEPTID LIQ 1.5 VAN	92	VORICONAZOLE TAB 200 MG	35
VIBERZI TAB 75MG	137	VITAMED MD CAP ONE RX	219	VORICONAZOLE TAB 200MG	35
VIBERZI TAB 100MG	137	VITAMIN B12 TAB 100MCG	219	VORINOSTAT CAP 100 MG	40
VIBRAMYCIN CAP 100MG	207	VITAMIN B-12 TAB 1000MCG	219	VORTEX CHAMB MIS PEDI MAS	165
VIBRAMYCIN SUS 25MG/5ML	207	VITAMIN C TAB 500MG	92	VORTEX/MASK MIS CHILDS	165
VIENVA TAB 0.1-20	104	VITAMIN D CAP 1.25MG	219	VORTEX MASK MIS PEDS MED	165
VIGABATRIN ORAL SOLN 100 MG/ML	107	VITAMIN D CAP 125MCG	92	VORTEX MASK MIS PEDS SML	165
VIGABATRIN PAK 500MG	107	VITAMIN D CAP 50000	219	VORTEX/MASK MIS TODDLER	165
VIGABATRIN POWD PACK 500 MG	107	VITAMIN D CAP 50000UNT	219	VORTEX VALVD MIS CHAMBER	165
VIGABATRIN POWD PACK 500 MG	107	VITAPEARL CAP	219	VORTEX VALVD MIS CHAMBER	165
VIGABATRIN POWD PACK 500 MG	107	VITATHELY TAB	219	VORTEX VALVE MIS CHAMBER	165
VIGABATRIN TAB 500 MG	107	VITATROCHE GRA BASE SF	165	VORTIOXETINE HBR TAB 5 MG (BASE EQUIV)	206
VIGABATRIN TAB 500 MG	107	VITATRUE MIS	92	VORTIOXETINE HBR TAB 10 MG (BASE EQUIV)	205
VIGABATRIN TAB 500MG	107	VIT C BRIGHT DRO 10%	72	VORTIOXETINE HBR TAB 20 MG (BASE EQUIV)	206
VIGADRON POW 500MG	107	VIT C BRIGHT DRO 15%	72	VOSEVI TAB	15
VIGADRON TAB 500MG	107	VITRAKVI CAP 25MG	169	VOSORITIDE FOR SUBCUTANEOUS INJ 0.4 MG	110
VIGAFYDE SOL 100MG/ML	107	VITRAKVI CAP 100MG	169	VOSORITIDE FOR SUBCUTANEOUS INJ 0.56 MG	110
VIGPODER POW 500MG	107	VITRAKVI SOL 20MG/ML	170	VOSORITIDE FOR SUBCUTANEOUS INJ 1.2 MG	110
VIJOICE GRA 50MG	134	VIVA DHA CAP	219	VOWST CAP	22
VIJOICE TAB 50MG	135	VIVAGUARD LIQ CONTROL	80	VOXZOGO INJ 0.4MG	110
VIJOICE TAB 125MG	134	VIVAGUARD MIS 28G	80	VOXZOGO INJ 0.56MG	110
VIJOICE TAB 250MG	134	VIVAGUARD MIS 30G	80	VOXZOGO INJ 1.2MG	110
VILAZODONE HCL TAB 10 MG	206	VIVAGUARD MIS LANCING	80	VOYDEYA TAB 50-100MG	12
VILAZODONE HCL TAB 20 MG	206	VIVJOA CAP 150MG	35	VOYDEYA TAB 100MG	12
VILAZODONE HCL TAB 40 MG	206	VIVONEX PLUS POW	92	VRAYLAR CAP 1.5MG	9
VILAZODONE TAB 10MG	206	VIVONEX POW PEDIATRI	92	VRAYLAR CAP 3MG	9
VILAZODONE TAB 20MG	206	VIVONEX POW PEDIATRI	219	VRAYLAR CAP 4.5MG	9
VILAZODONE TAB 40MG	206	VIZIMPRO TAB 15MG	170	VRAYLAR CAP 6MG	9
VILEVEV MB TAB 81MG	112	VIZIMPRO TAB 30MG	170	VTAMA CRE 1%	72
VIMPAT SOL 10MG/ML	204	VIZIMPRO TAB 45MG	170	VUSION OIN	35
VIMSELTINIB CAP 14 MG	39	VOLNEA TAB	105	VYFEMLA TAB 0.4-35	105
VIMSELTINIB CAP 20 MG	39	VONOPRAZAN FUMARATE TAB 10 MG	191	VYLEESI INJ 1.75/0.3	64
VIMSELTINIB CAP 30 MG	39	VONOPRAZAN FUMARATE TAB 20 MG	191	VYLIBRA TAB 0.25-35	105
VIORELE TAB	104	VONVENDI INJ 650UNIT	121	VYNDAMAX CAP 61MG	63
VIRACEPT TAB 250MG	19	VONVENDI INJ 1300UNIT	121	VYNDAREL CAP 20MG	63
VIRACEPT TAB 625MG	19	VON WILLEBRAND FACTOR (RECOMBINANT) FOR INJ 650 UNIT	121	VYVGART INJ HYTRULO	135
VIRAZOLE INH 6GM	43	VON WILLEBRAND FACTOR (RECOMBINANT) FOR INJ 1300 UNIT	121	WA-001 EXPER OIL SOIL SUR	165
VIREAD POW 40MG/GM	18	VOQUEZNA PAK DUAL PAK	108	WAINUA INJ 45/0.8ML	110
VIREAD TAB 150MG	18	VOQUEZNA PAK TRIP PK	108	WAKIX TAB 4.45MG	198
VIREAD TAB 200MG	18	VOQUEZNA TAB 10MG	191	WAKIX TAB 17.8MG	198
VIREAD TAB 250MG	18	VOQUEZNA TAB 20MG	191	WAL-MUCIL POW 43%	138
VISMODEGIB CAP 150 MG	166	VORANIGO TAB 10MG	39	WARFARIN SODIUM TAB 1 MG	26
VISTOGARD PAK 10GM	165	VORANIGO TAB 40MG	40	WARFARIN SODIUM TAB 1 MG	27
VITAFOL CAP ULTRA	219	VORAPAXAR SULFATE TAB 2.08 MG (BASE EQUIVALENT)	188	WARFARIN SODIUM TAB 2.5 MG	26
VITAFOL CHW GUMMIES	219	VORASIDENIB TAB 10 MG	39	WARFARIN SODIUM TAB 2.5 MG	27
VITAFOL FE+ CAP	219	VORASIDENIB TAB 40 MG	40	WARFARIN SODIUM TAB 2 MG	26
VITAFOL-NANO TAB	219	VORICONAZOLE FOR SUSP 40 MG/ML	35	WARFARIN SODIUM TAB 2 MG	27
VITAFOL-OB PAK +DHA	219	VORICONAZOLE FOR SUSP 40 MG/ML	35	WARFARIN SODIUM TAB 3 MG	26
VITAFOL-OB TAB 65-1MG	219	VORICONAZOLE SUS 40MG/ML	35	WARFARIN SODIUM TAB 3 MG	27
VITAFOL-ONE CAP	219	VORICONAZOLE TAB 50 MG	35		
VITAFOL STRP MIS 1MG	219	VORICONAZOLE TAB 50 MG	35		
VITAL 1.0 LIQ VANILLA	92	VORICONAZOLE TAB 50MG	35		
VITAL 1.5 CA LIQ VANILLA	92				
VITAL AF 1.2 LIQ VANILLA	92				
VITAL HP LIQ 1.0 CAL	92				

WARFARIN SODIUM TAB 4 MG	26	WYMZYA FE CHW 0.4MG-35.....	105	XTANDI CAP 40MG.....	20
WARFARIN SODIUM TAB 4 MG	27	XACIATO GEL 2%.....	25	XULANE DIS 150-35.....	105
WARFARIN SODIUM TAB 5 MG	26	XARAH FE TAB	105	XURIDEN POW 2GM.....	110
WARFARIN SODIUM TAB 5 MG	27	XARELTO STAR TAB 15/20MG	27	XYWAV SOL 0.5GM/ML	199
WARFARIN SODIUM TAB 6 MG	26	XARELTO SUS 1MG/ML.....	27	YASMIN 28 TAB 3-0.03MG.....	105
WARFARIN SODIUM TAB 6 MG	27	XARELTO TAB 2.5MG.....	27	YAZ TAB 3-0.02MG	105
WARFARIN SODIUM TAB 7.5 MG.....	26	XARELTO TAB 10MG.....	27	YESINTEK INJ 45/0.5ML.....	73
WARFARIN SODIUM TAB 7.5 MG.....	27	XARELTO TAB 15MG.....	27	YESINTEK INJ 45/0.5ML.....	73
WARFARIN SODIUM TAB 10 MG	26	XARELTO TAB 20MG	27	YESINTEK INJ 90MG/ML	73
WARFARIN SODIUM TAB 10 MG	26	XATMEP SOL 2.5MG/ML	134	YEZTUGO TAB 300MG	17
WARFARIN TAB 1MG.....	27	XDEMVY DRO 0.25%	178	YORVIPATH INJ 168/0.56.....	110
WARFARIN TAB 2.5MG	27	XELJANZ SOL 1MG/ML	134	YORVIPATH INJ 294/0.98.....	110
WARFARIN TAB 2MG	27	XELJANZ TAB 5MG.....	134	YORVIPATH INJ 420/1.4.....	110
WARFARIN TAB 3MG	27	XELJANZ TAB 10MG.....	134	YUPELRI SOL	54
WARFARIN TAB 4MG	27	XELJANZ XR TAB 11MG.....	134	YUVAFEM TAB 10MCG.....	105
WARFARIN TAB 5MG	27	XELJANZ XR TAB 22MG	134	ZACARE KIT KIT 4%	74
WARFARIN TAB 6MG	27	XELPROS EMU 0.005%	180	ZACARE KIT KIT 8%.....	74
WARFARIN TAB 7.5MG.....	27	XELRIA FE CHW 0.4MG-35.....	105	ZACLIR LOT 8%	73
WARFARIN TAB 10MG	26	XELSTRYM PAD 4.5MG/9H.....	45	ZAFEMY DIS 150/35.....	105
WELIREG TAB 40MG	40	XELSTRYM PAD 9MG/9HR	45	ZAFIRLUKAST TAB 10 MG	36
WERA TAB 0.5/35	105	XELSTRYM PAD 13.5/9HR	45	ZAFIRLUKAST TAB 10 MG	37
WESCAP-C DHA CAP.....	219	XELSTRYM PAD 18MG/9HR	45	ZAFIRLUKAST TAB 10MG	37
WESCAP-PN CAP DHA.....	220	XEPI CRE 1%.....	193	ZAFIRLUKAST TAB 20 MG.....	36
WESNATAL DHA PAK COMPLETE.....	220	XERMELO TAB 250MG.....	108	ZAFIRLUKAST TAB 20 MG.....	37
WESNATE DHA CAP	220	XIIDRA DRO 5%	176	ZAFIRLUKAST TAB 20MG	37
WES-PHOS 250 TAB NEUTRAL	92	XIRUN GEL 40-10%.....	74	ZALEPLON CAP 5 MG	106
WESTGEL DHA CAP	220	XOFLUZA TAB 40MG	20	ZALEPLON CAP 5MG.....	106
WEZLANA INJ 45/0.5ML	72	XOFLUZA TAB 80MG	20	ZALEPLON CAP 10 MG	106
WEZLANA INJ 45/0.5ML	72	XOLAIR INJ 75/0.5.....	195	ZALEPLON CAP 10MG.....	106
WEZLANA INJ 90MG/ML	73	XOLAIR INJ 75/0.5.....	195	ZANAFLEX CAP 2MG.....	197
*WHEAT GERM - OIL***	220	XOLAIR INJ 150MG/ML.....	195	ZANAFLEX CAP 4MG.....	197
WHEAT GERM OIL	220	XOLAIR INJ 150MG/ML.....	195	ZANAFLEX CAP 6MG.....	198
WHEY PROTEIN POW CON	165	XOLAIR INJ 300/2ML.....	195	ZANAFLEX TAB 4MG	198
WHEY PROTEIN POW CON	165	XOLAIR INJ 300/2ML.....	195	ZANAMIVIR AEROSOL POWDER BREATH	
WHEY PROTEIN POW COOKIES	165	XOLEGEL KIT COREPAK.....	35	ACTIVATED 5 MG/ACT	20
WHEY PROTEIN POW STRAWBER.....	165	XOLREMDI CAP 100MG	54	ZANUBRUTINIB CAP 80 MG.....	166
WHITE PETROLATUM OINTMENT	158	XOPENEX HFA AER.....	55	ZANUBRUTINIB TAB 160 MG	166
WHITE PETROLATUM TOPICAL GEL	158	XOSPATA TAB 40MG.....	170	ZARONTIN CAP 250MG	59
WIDE-SEAL DPR KIT 60	165	XPHE MAXAMUM PAK ORANGE	165	ZARONTIN SOL 250/5ML	60
WIDE-SEAL DPR KIT 65	165	XPHE MAXAMUM PAK UNFLAVOR.....	165	ZARXIO INJ 300/0.5	54
WIDE-SEAL DPR KIT 70	165	XPHOZAH TAB 20MG	110	ZARXIO INJ 480/0.8	54
WIDE-SEAL DPR KIT 75	165	XPHOZAH TAB 30MG.....	110	ZAVEGEPANT HCL NASAL SPRAY 10 MG/	
WIDE-SEAL DPR KIT 80	165	XPOVIO PAK 40MG	40	ACT	56
WIDE-SEAL DPR KIT 85	165	XPOVIO PAK 40MG	40	ZAVZPRET SPR 10MG	56
WIDE-SEAL DPR KIT 90	165	XPOVIO PAK 40MG	40	ZEGALOGUE INJ 0.6/0.6.....	115
WIDE-SEAL DPR KIT 95	165	XPOVIO PAK 40MG	40	ZEGALOGUE INJ 0.6/0.6.....	115
WILATE INJ	121	XPOVIO PAK 50MG	40	ZELBORAF TAB 240MG.....	170
WILATE INJ	121	XPOVIO PAK 60MG	40	ZELSUVMI GEL 10.3%	165
WIXELA INHUB AER 100/50.....	195	XPOVIO PAK 60MG	40	ZELVYSIA POW 100MG.....	110
WIXELA INHUB AER 250/50.....	195	XPOVIO PAK 80MG	40	ZELVYSIA POW 500MG	110
WIXELA INHUB AER 500/50	195	XTAMPZA ER CAP 9MG.....	182	ZEMPLAR CAP 1MCG	142
WND 1 POW	220	XTAMPZA ER CAP 13.5MG.....	182	ZEMPLAR CAP 2MCG.....	142
WND 2 POW	220	XTAMPZA ER CAP 18MG.....	182	ZENATANE CAP 10MG	73
WOMANS LAXAT TAB 5MG EC.....	140	XTAMPZA ER CAP 27MG.....	182	ZENATANE CAP 20MG	73
WOMENS LAXAT TAB 5MG EC.....	140	XTAMPZA ER CAP 36MG	182	ZENATANE CAP 30MG.....	73

ZENATANE CAP 40MG.....	73	ZOLINZA CAP 100MG.....	40	ZURZUVAE CAP 20MG.....	28
ZENPEP CAP 3000UNIT.....	110	ZOLMITRIPTAN NASAL SPRAY 2.5 MG/ SPRAY UNIT.....	197	ZURZUVAE CAP 25MG.....	28
ZENPEP CAP 5000UNIT.....	111	ZOLMITRIPTAN NASAL SPRAY 5 MG/ SPRAY UNIT.....	197	ZURZUVAE CAP 30MG.....	28
ZENPEP CAP 10000UNT.....	110	ZOLMITRIPTAN ORALLY DISINTEGRATING TAB 2.5 MG.....	197	ZYDELIG TAB 100MG.....	170
ZENPEP CAP 15000UNT.....	110	ZOLMITRIPTAN ORALLY DISINTEGRATING TAB 5 MG.....	197	ZYDELIG TAB 150MG.....	94
ZENPEP CAP 20000UNT.....	110	ZOLMITRIPTAN TAB 2.5 MG.....	197	ZYLET SUS 0.5-0.3%.....	177
ZENPEP CAP 25000UNT.....	110	ZOLMITRIPTAN TAB 2.5 MG.....	197	ZYVOX SUS 100MG/5M.....	25
ZENPEP CAP 40000UNT.....	111	ZOLMITRIPTAN TAB 2.5MG.....	197		
ZENPEP CAP 60000UNT.....	111	ZOLMITRIPTAN TAB 5 MG.....	197		
ZEPATIER TAB 50-100MG.....	15	ZOLMITRIPTAN TAB 5MG.....	197		
ZEPOSIA 7DAY CAP STR PACK.....	172	ZOLMITRIPTAN TAB 5MG ODT.....	197		
ZEPOSIA CAP 0.92MG.....	172	ZOLPIDEM ER TAB 6.25MG.....	106		
ZEPOSIA CAP STR KIT.....	172	ZOLPIDEM ER TAB 12.5MG.....	106		
ZETONNA AER 37MCG.....	20	ZOLPIDEM TAB 5MG.....	106		
ZIDOVUDINE CAP 100 MG.....	18	ZOLPIDEM TAB 10MG.....	106		
ZIDOVUDINE CAP 100 MG.....	18	ZOLPIDEM TARTRATE TAB 5 MG.....	106		
ZIDOVUDINE CAP 100MG.....	18	ZOLPIDEM TARTRATE TAB 10 MG.....	106		
ZIDOVUDINE SYP 50MG/5ML.....	18	ZOLPIDEM TARTRATE TAB ER 6.25 MG.....	106		
ZIDOVUDINE SYRUP 10 MG/ML.....	18	ZOLPIDEM TARTRATE TAB ER 12.5 MG.....	106		
ZIDOVUDINE SYRUP 10 MG/ML.....	18	ZOMACTON INJ 5MG.....	127		
ZIDOVUDINE TAB 300 MG.....	18	ZOMIG SPR 2.5MG.....	197		
ZIDOVUDINE TAB 300MG.....	18	ZOMIG SPR 5MG.....	197		
ZILBRYSQ INJ 16.6MG.....	12	ZONGERTINIB TAB 60 MG.....	151		
ZILBRYSQ INJ 23MG.....	12	ZONISADE SUS 100MG/5.....	60		
ZILBRYSQ INJ 32.4MG.....	12	ZONISAMIDE CAP 25 MG.....	60		
ZILUCOPLAN SODIUM SUBCUTANEOUS SOLN PREF SYR 16.6 MG/0.416ML.....	12	ZONISAMIDE CAP 25MG.....	60		
ZILUCOPLAN SODIUM SUBCUTANEOUS SOLN PREF SYR 23 MG/0.574ML.....	12	ZONISAMIDE CAP 50 MG.....	60		
ZILUCOPLAN SODIUM SUBCUTANEOUS SOLN PREF SYR 32.4 MG/0.81ML.....	12	ZONISAMIDE CAP 50MG.....	60		
ZIMHI SOL.....	186	ZONISAMIDE CAP 100 MG.....	60		
ZINC ACETATE CAP 25 MG (ELEMENTAL ZINC).....	86	ZONISAMIDE CAP 100MG.....	60		
ZINC ACETATE CAP 50 MG (ELEMENTAL ZINC).....	86	ZONISAMIDE ORAL SUSP 100 MG/5ML (20 MG/ML).....	60		
ZIOPTAN DRO 0.0015%.....	180	ZONTIVITY TAB 2.08MG.....	188		
ZIPRASIDONE CAP 20MG.....	9	ZORBTIVE INJ 8.8MG.....	127		
ZIPRASIDONE CAP 40MG.....	9	ZORYVE CRE 0.3%.....	73		
ZIPRASIDONE CAP 60MG.....	9	ZORYVE CRE 0.15%.....	73		
ZIPRASIDONE CAP 80MG.....	9	ZORYVE MIS 0.3%.....	74		
ZIPRASIDONE HCL CAP 20 MG.....	9	ZOSTER VAC RECOMBINANT ADJUVANTED FOR IM INJ 50 MCG/0.5ML.....	211		
ZIPRASIDONE HCL CAP 40 MG.....	9	ZOVIA 1/35 TAB.....	105		
ZIPRASIDONE HCL CAP 60 MG.....	9	ZTALMY SUS 50MG/ML.....	27		
ZIPRASIDONE HCL CAP 80 MG.....	9	ZTLIDO PAD 1.8%.....	140		
ZIRGAN GEL 0.15%.....	179	ZUBSOLV SUB 0.7-0.18.....	185		
ZITHROMAX POW 1GM PAK.....	141	ZUBSOLV SUB 1.4-0.36.....	185		
ZITHROMAX SUS 100/5ML.....	141	ZUBSOLV SUB 2.9-0.71.....	185		
ZITHROMAX SUS 200/5ML.....	141	ZUBSOLV SUB 5.7-1.4.....	185		
ZITHROMAX TAB 250MG.....	141	ZUBSOLV SUB 8.6-2.1.....	185		
ZITHROMAX TAB 500MG.....	141	ZUBSOLV SUB 11.4-2.9.....	185		
ZITHROMAX TAB TRI-PAK.....	141	ZURANOLONE CAP 20 MG.....	28		
ZITHROMAX TAB Z-PAK.....	141	ZURANOLONE CAP 25 MG.....	28		
ZOKINVY CAP 50MG.....	165	ZURANOLONE CAP 30 MG.....	28		
ZOKINVY CAP 75MG.....	165				

ધ્યાન આપો: જો તમે ગુજરાતી (Gujarati) બોલતો હો તો વિનં મૂલ્યે ભં પં કીય મદદડપ સેવં ઓ અને અન્ય ફોમેટમાં વિનં મૂલ્યે સંચં ડ, જમ કે મોટી વિન્ડ, તમં ડં મં ટે ઉપલબ્ધ છે. તમં ડં સભ્ય ઓળખ કં ડં પડનં ટોલ-ફ્રી નંબર પડ કોલ કરો.

ध्यान दे: यदि आप हिंदी (Hindi) बोलते हैं, तो आपके लिए मुफ्त भाषा सहायता सेवाएँ और अन्य पाठों में मुफ्त संचाद, जैसे कर्ब फॉन्ट, उपलब्ध हैं। अपने सदस्य पहचान पत्र पड दिए गए टोल-फ्री नंबर पड कॉल करें।

LUS TSEEM CEEB: Yog tias koj hais lus Hmoob (Hmong), muaj cov kev pab cuam txhais lus thiab muaj kev sib txuas lus pab dawb ua lwm hom ntawv, xws li luam ua ntawv loj rau koj. Thov hu rau tus xov tooj hu dawb ntawm koj daim npav ID.

ATENSIÓN: No agsasaoka iti Ilocano (Ilocano), magun-odmo dagiti libre a serbisio ti tulong iti pagsasao ken libre a komunikasion iti dadduma a pormat, kas iti dadakkel a letra. Tawagan ti awan-bayadna a numero a masarakan iti kard a pakabigbigam kas miembro.

ATTENZIONE: se parla italiano (Italian), può usufruire di servizi di assistenza linguistica gratuiti e comunicazioni gratuite in altri formati, come ad esempio la stampa a caratteri grandi. Chiami il numero verde riportato sul Suo tesserino identificativo.

注意事項：日本語 (Japanese) を話される場合、無料の言語支援サービスや、拡大文字など他の形式での無料のコミュニケーションをご利用いただけます。会員証に記載されているフリーダイヤルにお電話ください。

알림 사항: 한국어(Korean)를 사용하시는 경우 무료 언어 지원 서비스와 대형 활자체 등 다른 형식으로 된 의사 소통 매체를 이용하실 수 있습니다. 회원 ID 카드에 나와 있는 무료 전화번호로 전화해 주십시오.

ໝາຍເຫດ: ຖ້າຫາກທ່ານເວົ້າພາສາລາວ (Lao), ທ່ານສາມາດໃຊ້ບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາພາສາລາວ ແລະ ການສື່ສານໃນຮູບແບບອື່ນໆພາສາລາວ, ເຊັ່ນ: ການພິມຕົວອັກສອນຂະໜາດໃຫຍ່. ໂທຫາເບີໂທພາສາລາວທີ່ບັດປະຈຳຕົວສະມາຊິກຂອງທ່ານ.

ध्यान दिनु ास्: यदि तपाईंले नेपाली (Nepali) बोल्नुहुन्छ भने, ऋःशुल्क भाषा सहायता सेवाहड ड अन्य ढाँचाहडमा ऋःशुल्क संचाडहड, जस्तै ठूलो छाप, तपाईंका लाग्ग उपलब्ध छन्। आफ्नो सदस्य पहिचान कार्डमा डहाँको टोल फ्री नम्बरमा कल गर्नुहोस्।

بوجه: لکریه زبان **فارسی (Persian-Farsi)** صحبت می‌کند، خدمات پولکان کمک زبانی و لپیاطات پولکان در والابه‌ای بکتر، ملید حاب برر ک، در سیرس‌س‌ما هسیدد. دلس‌ما ره پولکان مدرج روی‌کارب س‌س‌لریلی عصفوب‌س‌اریم‌اس یکیدد.

UWAGA: Dla osób mówiących po **polsku (Polish)** dostępne są bezpłatne usługi pomocy językowej i bezpłatne komunikaty w innych formatach, takich jak duży druk. Prosimy zadzwonić pod bezpłatny numer podany na karcie identyfikacyjnej.

ATENÇÃO: se você fala **português (Portuguese)**, tem à sua disposição serviços gratuitos de assistência linguística e comunicações gratuitas em outros formatos, como caracteres grandes. Ligue para o número gratuito que se encontra no seu cartão de identificação de membro.

ਦਿਆਨ ਦਿਓ ਿ ਤੁਸੀਂ **ਪੰਜਾਬੀ (Punjabi)** ਬੋਲਦੇ ਹੋ, ਤਾਂ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ ਅਤੇ ਹੋਰ ਫ਼ਾ ਮੈਟਾਂ, ਿ ਵੇਂ ਿ ਵੱਡੇ ਪ੍ਰਿੰਟ, ਵਿੱਚ ਮੁਫਤ ਸੰਚਾ ਉਪਲਬਧ ਹਨ। ਆਪਣੇ ਮੈਂਬਰ ਪਛਾਣ ਿ ਡ 'ਤੇ ਟੋਲ-ਫ਼ੀ ਨੰਬਰ 'ਤੇ ਿ ਲਾ ਿ।

ВНИМАНИЕ! Если вы говорите на **русском языке (Russian)**, вам доступны бесплатные услуги языковой поддержки и бесплатные материалы в других форматах, например напечатанные крупным шрифтом. Звоните по бесплатному номеру телефона, указанному на вашей идентификационной карте участника.

ATENCIÓN: Si habla **español (Spanish)**, hay servicios de asistencia de idiomas y comunicaciones en otros formatos como letra grande, sin cargo, a su disposición. Llame al número gratuito que figura en su tarjeta de identificación de miembro. (TTY 711).

PAUNAWA: Kung nagsasalita ka ng **Tagalog (Tagalog)**, may makukuha kang mga libreng serbisyo ng tulong sa wika at libreng komunikasyon sa ibang mga format, tulad ng malalaking print. Tawagan ang walang bayad na numero na nasa iyong ID card ng miyembro.

โปรดทราบ หากคุณพูดภาษาไทย (Thai) ได้
คุณสามารถใช้บริการช่วยเหลือด้านภาษาฟรีและการสื่อสารในรูปแบบอื่น ๆ ฟรี เช่น
การพิมพ์ด้วยตัวอักษรขนาดใหญ่ โทรไปยังหมายเลขโทรศัพท์สำหรับสมาชิกตามบัตรประจำตัวของคุณ

ЗВЕРНІТЬ УВАГУ! Якщо ви розмовляєте **українською (Ukrainian)**, ви можете безоплатно користуватися послугами мовної підтримки, а також безоплатно отримувати інформаційні матеріали в інших форматах, як от набрані великим шрифтом. Телефонуйте на безкоштовний номер телефону, зазначений на вашій ідентифікаційній картці учасника.

موجود ہیں: اگر اب اردو (Urdu) ردائے تعلیم و ردائے کی معاوضہ خدمات اور دیگر وابستہ خدمات
مواطن اب، جسے درکار ہے، اب کلمے مع سہولیات سے ممبرانہ کارپریسے کیفول وری
ممبر کال کریں۔

LƯU Ý: Nếu quý vị nói **Tiếng Việt (Vietnamese)**, quý vị sẽ được cung cấp các dịch vụ hỗ trợ ngôn ngữ miễn phí và các phương tiện trao đổi liên lạc miễn phí ở các định dạng khác, chẳng hạn như bản in chữ lớn. Gọi đến số điện thoại miễn phí có trên thẻ định danh thành viên của quý vị.

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