

Preferred Drug List

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

Preferred Drug List Medication Locator Instructions:

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

Notice of Non-Discrimination

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

ATC provides free aids and services to people with disabilities, such as qualified sign language interpreters and written information in other formats (large print, braille, audio, accessible electronic formats, other formats). We provide free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages. If you need these services, contact our Manager of Member Services, by mail at: 100 Center Point Circle, Columbia, SC 29210; by phone at: 1-866-433-6041 (TTY: 711); or by email at: ATCMBRSVC@centene.com.

If you believe that ATC has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, sex, sexual orientation or gender identity, you can file a grievance using the contact information provided above. You can file a grievance in person or by mail or email. If you need help filing a grievance, we are available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf> or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue, SW, Room 509F, HHH Building, Washington, D.C. 20201 or by phone at: 800-368-1019, 800-537-7697 (TDD). Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>. Language assistance services are available. Please visit our Language Assistance page for more information.

Language Services

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

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

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

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

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

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

Se você fala português do Brasil, os serviços de assistência em sua língua estão disponíveis para você de forma gratuita. Chame 1-866-433-6041 (TTY: 711)

如果您使用繁體中文，您可以免費獲得語言援助服務。請致電1-866-433-6041 (TTY: 711)

Falam tawng thiam tu na si le tawng let nak asi mi 1-866-433-6041 (TTY: 711) ah tang ka pek tul lo in na ko thei.

धयद आप हदी बोलते ह तो आपके िलए मुफ्त म भाषा सहायता सेवाएं उपलब्ध ह। 1-866-433-6041 (TTY: 711) पर कॉल कर।

한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-866-433-6041 (TTY: 711)번으로 전화해 주십시오.

Haka tawng thiam tu na si le tawng let asi mi 1-866-433-6041 (TTY: 711) ah tang ka pek tul lo in ko thei.

Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-866-433-6041 (ATS: 711).

နမူကတိ ကညီ ကျိအယိ, နမနူ ကျိအတိမၤစၢလၢ တလၢ်ဘျၢ်လၢ်စ့ၤ နိတံၤဘျၢ်သ့န့ၢ်လီၤ. ကိး
866-433-6041 (TTY: 711)

ማስታወሻ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች: በነጻ ሊያግዝዎት ተዘጋጅተዋል። ወደ ሚክላሎ ቁጥር ይደውሉ 1-866-433-6041 (መስማት ስተሳናቸው: 711)።

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

Pharmacy Program

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

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

Preferred Drug List (PDL)

The Absolute Total Care PDL is the list of covered drugs. The PDL applies to drugs you can receive at retail pharmacies. The Absolute Total Care PDL is reviewed often by the Absolute Total Care Pharmacy and Therapeutics (P&T) Committee to make sure the use of medicines is appropriate.

The P&T Committee is made up of the Absolute Total Care Medical Director, Absolute Total Care Pharmacy Director and many South Carolina physicians, pharmacists, and other healthcare professionals.

Pharmacy Benefit Manager

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

Specialty Drugs

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

AcariaHealth Specialty Pharmacy provides the following services:

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

Any member of Absolute Total Care requesting a hepatitis C agent should have their physician send a PA request to:

- Pharmacy Services
Phone: 1-866-399-0928
Fax: 1-833-982-4001

Dispensing Limits

Drugs may be filled up to a maximum of 31 days' supply for each new prescription or refill. A total of 80% of the days' supply or 25 days must have passed before the prescription can be refilled for non-controlled-substance PDL drugs. A total of 90% of the days' supply must have passed before the prescription can be refilled for controlled substances and narcotic PDL drugs.

Appropriate Use and Safety Edits

The health and safety of our members is important to Absolute Total Care. One way we make sure our members are safe is through point-of-sale (POS) edits. This happens at the time a prescription is processed at the pharmacy. These edits are based on U.S. Food and Drug Administration (FDA) recommendations. They promote safe and effective medicine use.

Prior Authorizations (PAs)

Some medicines listed on the Absolute Total Care PDL may need PA. The information for PAs should be sent to Pharmacy Services. The information should be sent by your provider or pharmacist. They can fill this information out on the **Medication Prior Authorization Form**. This form should be **faxed to Pharmacy Services at 1-833-982-4001**. This document can be found on the Absolute Total Care website, absolutetotalcare.com. All completed authorizations are reviewed within 24 hours from the time of receipt.

Absolute Total Care will cover the medicine if it is determined that:

1. There is a medical reason the member needs the specific medicine.
2. Depending on the medicine, other medicines on the PDL have not worked.

PA requests are reviewed by a licensed clinical pharmacist. The pharmacist uses criteria established by the Centene Corporate P&T Committee. If the request is approved, the provider will be notified by fax. If the information provided does not meet the criteria for the requested medicine, member and their provider will be notified. Alternative options and appeal process information will also be provided.

Step Therapy

Sometimes Absolute Total Care requires you to do step therapy. This means you will have to try medicines in the PDL in a certain order before we cover another medicine.

If Absolute Total Care has record that the first medicine was tried and did not work, the next medicine is automatically covered. If Absolute Total Care does not have a record that the required medicine was tried, the provider may have to send more information about the request.

If Absolute Total Care does not approve the PA, we will notify the member and their provider. We will also send information about the appeal process.

Quantity Limits

Sometimes, Absolute Total Care limits how much of a certain medicine a member can get at once. If your provider thinks that you have a reason to get more than the limit, they can submit a PA. If

Absolute Total Care does not approve the PA, we will notify the member and their provider. They will also send information about the appeal process.

Age Limits

Sometimes, medicines on the Absolute Total Care PDL have age limits. This is because of drug maker, FDA or clinical guidelines. It is to keep you healthy and safe. Age limits meet FDA alerts for the appropriate use of pharmaceuticals. They also align with South Carolina Healthy Connections Medicaid Guidelines.

Medical Necessity Requests

Sometimes, a member needs a medicine that is not listed in the PDL. When this happens, the member's provider can make a medical necessity (MN) request for the medicine. A MN request does not happen often. This is because the list of medicines on the PDL treat most medical conditions.

For a MN request, Absolute Total Care requires:

- Documented failure of at least two PDL drugs within the same therapeutic class for the same diagnosis. This is required as long as two drugs are listed in the same category with comparable labeled indications; or
- Documented intolerance or contraindication to at least two PDL drugs within the same therapeutic class. This is required as long as two drugs are listed in the same category with comparable labeled indications; or
- Documented clinical history or presentation where the patient is not a candidate for any of the PDL drugs for the indication.

These requests are reviewed by a licensed clinical pharmacist. The pharmacist uses criteria established by the Centene Corporate P&T Committee. If the request is approved, the provider will be notified by fax. If the information provided does not meet the criteria for the requested medicine, member and provider will be notified. Alternative options and appeal process information will also be provided.

Emergency Supply Policy

State and federal law require that a pharmacy fill a 72-hour supply of PDL medicine to any member awaiting PA determination. This is so the member's therapy is not interrupted or delayed. All participating pharmacies are authorized to provide a 72-hour supply of medicine. They are reimbursed for the ingredient cost and dispensing fee of the 72-hour supply of medication. They are reimbursed whether or not the PA request ends up being approved or denied. If the pharmacy has any questions, they may call the Pharmacy Help Desk at **1-833-750-4506**.

Exclusions

The following drug categories are not part of the Absolute Total Care PDL. They are not covered by the 72-hour emergency supply policy:

- Weight control products

- Pharmaceuticals used for cosmetic purposes or hair growth
- Investigational pharmaceuticals or products
- Immunizing agents
- Drug Efficacy Study Implementation (DESI) and Identical, Related, and Similar (IRS) drugs that are classified as ineffective
- Fertility products
- Erectile dysfunction products prescribed to treat impotence
- Nutritional supplements
- Injectables (except those listed in the PDL)
- Infusion supplies.

Newly-Approved Products

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

Over-The-Counter (OTC) Medications

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

Generic Drugs

Generic drugs are made up of the same active ingredient as brand-name drugs. When generic drugs are available, the brand-name drug will not be covered without Absolute Total Care PA.

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

Drug Efficacy Study Implementation (DESI) Drugs

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

Filling a Prescription

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

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

Copayments

Absolute Total Care only charges \$3.40 for each prescription. Providers are responsible for collecting the copayment. Providers must provide service whether a member can pay or not. If a member is not able to pay at the time of service, the member is still responsible for the copayment. The following are categories of Medicaid members that are exempt from copayment:

- From birth to the date of their 19th birthday
- Living in long-term care facilities
- Receiving hospice care
- Family planning prescriptions
- During pregnancy
- Enrolled in South Carolina Department of Disabilities and Special Needs' Mental Retardation or Related Disabilities or Head and Spinal Cord Injuries waiver program
- Enrolled in DHHS VENT, HIV/AIDS, SC Choice or elderly and disabled waiver program

Absolute Total Care will waive copays for all members on designated PDL agents in the following categories:

- Asthma
- Chronic Obstructive Pulmonary Disorder (COPD)
- Diabetes

Any member who gets a prescription for a designated asthma, COPD or diabetes medication will have a \$0.00 copay for those medications.

Absolute Total Care will waive copays for all members who obtain a prescription for any tobacco cessation products on the PDL.

Drug Tiers

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

P:	Preferred drug product
NP:	Non-preferred drug product

Abbreviations

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

AL:	Age Limit	Drug is limited to a specific age.
QL:	Quantity Limit	There is a limit on the amount of drug covered per prescription, or within a specific timeframe.
Max Day(s) Supply:	Day(s) Supply	There is a limit on the amount of the drug that is covered per time.
Max Fill:	Fill Limit	There is a limit on the number of times the drug can be filled.
Opioid Smart PA:	Unique Limits for Opioid Drugs	There may be limits on use such as a maximum seven-day supply for short-acting opioids or prior authorization required. Exceptions exist for specific diagnoses and/or history of use.
PA, Smart PA:	Prior Authorization	Prior authorization is required before prescription can be filled.
Pack Lmt:	Package Limit	There is a limit on the number of packages covered per prescription.
Rtl:	Retail	The limit or restriction applies to coverage at a retail pharmacy.
RX/OTC:	Prescription/Over-the-Counter	The drug is available as both prescription and over-the-counter forms.
SP:	Specialty Drug	High-cost drugs used to treat complex or rare conditions, such as multiple sclerosis, rheumatoid arthritis, hepatitis C, and hemophilia.
ST:	Step Therapy	Requires trial and failure of one or more preferred products prior to coverage.

Clinical Edit Descriptions

Edit Name	Edit Description
Opioid	<p>Short-acting opioid medicines can only be filled for 7-days at a time when no opioids are filled in the past 180 days (Treatment-Naïve). This limit is extended to 30-day fills when a member has a medical history of cancer, sickle cell, or palliative care in their records. Treatment-Naïve*</p> <p>Limits:</p> <ul style="list-style-type: none"> • Daily Dose Max = 90 MME** • Day Supply Max = 7 days • Must use Short-acting opioids before Long-acting opioids <p>*Treatment-Naïve means no opioid fill in last 180 days **MME = Morphine Milligram Equivalent</p>
Test Strips	<p>Insulin users are limited to 150 strips per 30 days; Non-insulin users are limited to 100 strips per 90 days.</p>

Contact Information

Absolute Total Care	<p>Phone: 1-866-433-6041</p> <p>Fax: 1-855-865-9469</p> <p>Website: www.absolutetotalcare.com</p>
AcariaHealth Specialty Pharmacy	<p>Phone: 1-855-535-1815</p> <p>Fax: 1-855-217-0926</p> <p>Website: www.acariahealth.com</p>
Exactus Specialty Pharmacy	<p>Phone: 1-888-246-6953</p> <p>Fax: 1-866-458-9245</p>
Pharmacy Services	<p>PA Phone: 1-866-399-0928</p> <p>PA Fax: 1-833-982-4001</p> <p>Help Desk: 1-800-460-8988</p>
Pharmacy Help Desk	<p>Phone: 1-833-750-4506</p>

Drug Name	Drug Tier	Requirements/Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders		
Amphetamines		
ADDERALL XR CP24 (amphetamine-dextroamphetamine)	NP	QL(1 ea daily); AL(At least 6 yrs old)
ADDERALL TABS (amphetamine-dextroamphetamine)	NP	QL(2 ea daily); AL(At least 3 yrs old)
amphetamine-dextroamphetamine CP24 1.25 MG-1.25 MG-1.25 MG-1.25 MG, 2.5 MG-2.5 MG-2.5 MG-2.5 MG, 3.75 MG-3.75 MG-3.75 MG- 3.75 MG, 5 MG-5 MG-5 MG-5 MG, 6.25 MG-6.25 MG-6.25 MG-6.25 MG, 7.5 MG-7.5 MG-7.5 MG- 7.5 MG	P	QL(1 ea daily); AL(At least 6 yrs old)
amphetamine-dextroamphetamine TABS	P	QL(2 ea daily); AL(At least 3 yrs old)
DEXEDRINE CP24 10 MG, 15 MG (dextroamphetamine sulfate)	NP	QL(2 ea daily); AL(At least 6 yrs old)
dextroamphetamine sulfate CP24 10 MG, 15 MG	P	QL(2 ea daily); AL(At least 6 yrs old)
dextroamphetamine sulfate CP24 5 MG	P	QL(1 ea daily); AL(At least 6 yrs old)
dextroamphetamine sulfate TABS 5 MG, 10 MG	P	QL(2 ea daily); AL(At least 3 yrs old)
lisdexamfetamine dimesylate CAPS	P	QL(1 ea daily); ST
VYVANSE CAPS	P	QL(1 ea daily); ST
Analeptics		

Drug Name	Drug Tier	Requirements/Limits
caffeine citrate SOLN OR	P	Limit 2 fills per Lifetime; QL(45 ml per fill retail); 2 max fill(s) per 999 day(s) retail
Attention-Deficit/Hyperactivity Disorder (ADHD) Agents		
atomoxetine hcl	P	AL(At least 6 yrs old); ST
clonidine hcl (adhd) TB12	P	
guanfacine hcl (adhd)	P	QL(1 ea daily); AL(At least 6 yrs old)
INTUNIV (guanfacine hcl (adhd))	NP	QL(1 ea daily); AL(At least 6 yrs old)
KAPVAY TB12 (clonidine hcl (adhd))	NP	
STRATTERA (atomoxetine hcl)	NP	AL(At least 6 yrs old); ST
Histamine H3-Receptor Antagonist/Inverse Agonists		
WAKIX	P	SP; PA
Stimulants - Misc.		
CONCERTA TBCR 18 MG, 27 MG, 54 MG (methylphenidate hcl)	NP	QL(1 ea daily); AL(At least 6 yrs old)
CONCERTA TBCR 36 MG (methylphenidate hcl)	NP	QL(2 ea daily); AL(At least 6 yrs old)
dexmethylphenidate hcl TABS	P	QL(2 ea daily); AL(At least 6 yrs old)
FOCALIN TABS (dexmethylphenidate hcl)	NP	QL(2 ea daily); AL(At least 6 yrs old)
METADATE CD CPCR (methylphenidate hcl)	NP	QL(1 ea daily); AL(At least 6 yrs old)
methylphenidate hcl CPCR	P	QL(1 ea daily); AL(At least 6 yrs old)

Drug Name	Drug Tier	Requirements/Limits
<i>methylphenidate hcl</i> TABS 10 MG, 20 MG	P	QL(3 ea daily); AL(At least 3 yrs old)
<i>methylphenidate hcl</i> TABS 5 MG	P	QL(6 ea daily); AL(At least 3 yrs old)
<i>methylphenidate hcl</i> TB24 36 MG	P	QL(2 ea daily)
<i>methylphenidate hcl</i> TB24 18 MG, 27 MG, 54 MG	P	QL(1 ea daily)
<i>methylphenidate hcl</i> TBCR 10 MG, 20 MG, 36 MG	P	QL(2 ea daily); AL(At least 6 yrs old)
<i>methylphenidate hcl</i> TBCR 18 MG, 27 MG, 54 MG	P	QL(1 ea daily); AL(At least 6 yrs old)
RELEXXII TBCR 18 MG, 27 MG, 54 MG	P	QL(1 ea daily); AL(At least 6 yrs old)
RELEXXII TBCR 36 MG	P	QL(2 ea daily); AL(At least 6 yrs old)
RITALIN TABS 5 MG (<i>methylphenidate hcl</i>)	NP	QL(6 ea daily); AL(At least 3 yrs old)
RITALIN TABS 10 MG, 20 MG (<i>methylphenidate hcl</i>)	NP	QL(3 ea daily); AL(At least 3 yrs old)
ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
Allergenic Extracts		
GRASTEK SUBL	P	QL(1 ea daily); AL(At least 5 yrs old - Up to 65 yrs old)
RAGWITEK SUBL	P	QL(1 ea daily); AL(At least 18 yrs old - Up to 65 yrs old)
ALTERNATIVE MEDICINES		
Alternative Medicine - G's		
<i>ginger (zingiber officinalis)</i> CAPS 250 MG	P	QL(4 ea daily)
AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections		

Drug Name	Drug Tier	Requirements/Limits
Aminoglycosides		
ARIKAYCE	P	SP; PA
<i>neomycin sulfate</i> TABS	P	
<i>tobramycin sulfate</i> SOLN IJ	P	PA
<i>tobramycin sulfate</i> SOLR	P	PA
ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions		
Antirheumatic - Enzyme Inhibitors		
XELJANZ XR TB24	P	SP; PA
XELJANZ TABS	P	SP; PA
Antirheumatic Antimetabolites		
METHOTREXATE	P	
OTREXUP SOAJ 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 20 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML	P	SP; PA
RASUVO SOAJ 7.5 MG/0.15ML, 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML	P	SP; PA
Anti-TNF-alpha - Monoclonal Antibodies		
ADALIMUMAB-ADAZ SOAJ	P	PA
ADALIMUMAB-ADAZ SOSY	P	PA
ADALIMUMAB-ADBM CROHNS/UC/HS STARTER AJKT	P	PA
ADALIMUMAB-ADBM PSORIASIS/UVEITIS STARTER AJKT	P	PA
ADALIMUMAB-ADBM AJKT	P	PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ADALIMUMAB-ADBM PSKT	P	PA	<i>etodolac TB24</i>	P	
ADALIMUMAB-FKJP AJKT	P	PA	FELDENE CAPS (<i>piroxicam</i>)	NP	
ADALIMUMAB-FKJP PSKT	P	PA	<i>flurbiprofen TABS</i>	P	
HADLIMA PUSHTOUCH SOAJ	P	PA	<i>ibuprofen CHEW</i>	P	
HADLIMA SOSY	P	PA	<i>ibuprofen SUSP</i>	P	RX/OTC
YUSIMRY	P	PA	<i>ibuprofen TABS 200 MG, 400 MG, 600 MG, 800 MG</i>	P	
Interleukin-6 Receptor Inhibitors			<i>indomethacin CAPS 25 MG, 50 MG</i>	P	
ACTEMRA ACTPEN SOAJ	P	SP; PA	<i>indomethacin CPCR</i>	P	
ACTEMRA SOLN	P	SP; PA	INFANTS ADVIL SUSP (<i>ibuprofen</i>)	NP	
ACTEMRA SOSY	P	SP; PA	<i>ketoprofen CAPS 50 MG</i>	P	
Nonsteroidal Anti-inflammatory Agents (NSAIDs)			<i>ketoprofen CP24</i>	P	
ALEVE ARTHRITIS TABS (<i>naproxen sodium</i>)	NP	QL(2 ea daily)	<i>ketorolac tromethamine TABS</i>	P	QL(20 ea per 31 day(s) retail); AL(At least 17 yrs old)
ALEVE TABS (<i>naproxen sodium</i>)	NP	QL(2 ea daily)	LODINE TABS (<i>etodolac</i>)	NP	
ANAPROX DS TABS (<i>naproxen sodium</i>)	NP		<i>meloxicam TABS</i>	P	
CELEBREX (<i>celecoxib</i>)	NP	QL(2 ea daily); PA	MOTRIN CHILDRENS CHEW (<i>ibuprofen</i>)	NP	
<i>celecoxib</i>	P	QL(2 ea daily); PA	MOTRIN INFANTS DROPS SUSP (<i>ibuprofen</i>)	NP	
CHILDRENS ADVIL SUSP 100 MG/5ML (<i>ibuprofen</i>)	NP	RX/OTC	<i>nabumetone</i>	P	
CHILDRENS MOTRIN SUSP 100 MG/5ML (<i>ibuprofen</i>)	NP	RX/OTC	NAPROSYN SUSP (<i>naproxen</i>)	NP	
DAYPRO TABS (<i>oxaprozin</i>)	NP		NAPROSYN TABS 500 MG (<i>naproxen</i>)	NP	
<i>diclofenac potassium TABS 50 MG</i>	P		<i>naproxen sodium TABS 220 MG</i>	P	QL(2 ea daily)
<i>diclofenac sodium TB24</i>	P		<i>naproxen sodium TABS 275 MG, 550 MG</i>	P	
<i>diclofenac sodium TBEC</i>	P		<i>naproxen SUSP</i>	P	
EC-NAPROSYN TBEC (<i>naproxen</i>)	NP	QL(2 ea daily)	<i>naproxen TABS</i>	P	
<i>etodolac CAPS</i>	P		<i>naproxen TBEC</i>	P	QL(2 ea daily)
<i>etodolac TABS</i>	P		<i>oxaprozin TABS</i>	P	
			<i>piroxicam CAPS</i>	P	

Drug Name	Drug Tier	Requirements/Limits
<i>sulindac TABS</i>	P	
Phosphodiesterase 4 (PDE4) Inhibitors		
OTEZLA TABS	P	SP; PA
OTEZLA TBPk	P	SP; PA
Pyrimidine Synthesis Inhibitors		
ARAVA (<i>leflunomide</i>)	NP	QL(1 ea daily)
<i>leflunomide</i>	P	QL(1 ea daily)
ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions		
Analgesic Combinations		
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG</i>	P	QL(4 ea daily)
<i>butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG</i>	P	QL(4 ea daily)
<i>butalbital-acetaminophen TABS 50 MG-325 MG</i>	P	
<i>butalbital-aspirin-caffeine CAPS</i>	P	QL(4 ea daily)
ESGIC TABS (<i>butalbital-acetaminophen-caffeine</i>)	NP	QL(4 ea daily)
Analgesics Other		
<i>acetaminophen CHEW</i>	P	
<i>acetaminophen ELIX</i>	P	
<i>acetaminophen LIQD 160 MG/5ML</i>	P	
<i>acetaminophen SOLN OR 160 MG/5ML, 325 MG/10.15ML, 650 MG/20.3ML</i>	P	QL(240 ml per fill retail)
<i>acetaminophen SUPP 120 MG, 650 MG</i>	P	QL(12 ea per 31 day(s) retail)
<i>acetaminophen SUSP 80 MG/2.5ML, 160 MG/5ML, 650 MG/20.3ML</i>	P	
<i>acetaminophen TABS 325 MG, 500 MG</i>	P	

Drug Name	Drug Tier	Requirements/Limits
FEVERALL JUNIOR STRENGTH SUPP	P	QL(12 ea per 31 day(s) retail)
INFANTS SILAPAP SOLN OR	P	QL(30 ml per fill retail)
TYLENOL CHILDRENS CHEWABLES/PAIN + FEVER CHEW (<i>acetaminophen</i>)	NP	
TYLENOL CHILDRENS PAIN +FEVER SUSP (<i>acetaminophen</i>)	NP	
TYLENOL CHILDRENS SUSP (<i>acetaminophen</i>)	NP	
TYLENOL EXTRA STRENGTH TABS (<i>acetaminophen</i>)	NP	
TYLENOL FOR CHILDREN/ADULTS SUSP (<i>acetaminophen</i>)	NP	
TYLENOL INFANTS PAIN+FEVER SUSP (<i>acetaminophen</i>)	NP	
TYLENOL TABS (<i>acetaminophen</i>)	NP	
Salicylates		
<i>aspirin buffered (cal carb-mag carb-mag oxide)</i>	P	
<i>aspirin CHEW</i>	P	
ASPIRIN SUPP 300 MG	P	QL(12 ea per 31 day(s) retail)
<i>aspirin TABS 325 MG</i>	P	
<i>aspirin TBEC 81 MG, 325 MG</i>	P	
BUFFERIN (<i>aspirin buffered (cal carb-mag carb-mag oxide)</i>)	NP	
<i>diflunisal TABS</i>	P	
ECOTRIN ARTHRITIS PAIN TBEC (<i>aspirin</i>)	NP	
ECOTRIN REGULAR STRENGTH TBEC (<i>aspirin</i>)	NP	
ECOTRIN TBEC (<i>aspirin</i>)	NP	

Drug Name	Drug Tier	Requirements/Limits
<i>salsalate</i>	P	
ST JOSEPH ADULT ANALGESIC LOW DOSE BITE SIZE CHEW	P	
ST JOSEPH ADULT CHEW	P	
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions		
Opioid Agonists		
<i>codeine sulfate TABS 30 MG</i>	P	Opioid Smart PA; AL(At least 12 yrs old)
CODEINE SULFATE TABS	P	Opioid Smart PA; AL(At least 12 yrs old)
DILAUDID TABS 8 MG (<i>hydromorphone hcl</i>)	NP	Opioid Smart PA; QL(4 ea daily)
DILAUDID TABS 2 MG (<i>hydromorphone hcl</i>)	NP	Opioid Smart PA; QL(8 ea daily)
DILAUDID TABS 4 MG (<i>hydromorphone hcl</i>)	NP	Opioid Smart PA
<i>fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR</i>	P	Opioid Smart PA; QL(0.34 ea daily)
HYDROMORPHONE HCL SUPP	P	Opioid Smart PA; QL(2 ea daily)
<i>hydromorphone hcl TABS 2 MG</i>	P	Opioid Smart PA; QL(8 ea daily)
<i>hydromorphone hcl TABS 8 MG</i>	P	Opioid Smart PA; QL(4 ea daily)
<i>hydromorphone hcl TABS 4 MG</i>	P	Opioid Smart PA
<i>meperidine hcl SOLN OR 50 MG/5ML</i>	P	Opioid Smart PA
<i>meperidine hcl TABS 50 MG</i>	P	Opioid Smart PA; QL(6 ea daily)
<i>methadone hcl TABS 5 MG</i>	P	QL(4 ea daily); PA

Drug Name	Drug Tier	Requirements/Limits
<i>methadone hcl TABS 10 MG</i>	P	QL(10 ea daily); PA
<i>morphine sulfate SOLN OR 10 MG/5ML, 20 MG/5ML</i>	P	Opioid Smart PA; QL(16.67 ml daily)
<i>morphine sulfate SOLN OR 20 MG/ML, 100 MG/5ML</i>	P	Opioid Smart PA
MORPHINE SULFATE SOLN OR 20 MG/5ML	P	Opioid Smart PA; QL(16.67 ml daily)
<i>morphine sulfate SUPP</i>	P	Opioid Smart PA; QL(0.78 ea daily)
<i>morphine sulfate TABS</i>	P	Opioid Smart PA; QL(6 ea daily)
<i>morphine sulfate TBCR</i>	P	Opioid Smart PA; QL(3 ea daily)
MS CONTIN TBCR (<i>morphine sulfate</i>)	NP	Opioid Smart PA; QL(3 ea daily)
OXAYDO TABS 5 MG	P	Opioid Smart PA; QL(6 ea daily)
<i>oxycodone hcl CAPS</i>	P	Opioid Smart PA; QL(6 ea daily)
<i>oxycodone hcl CONC 100 MG/5ML</i>	P	Opioid Smart PA; QL(4 ml daily)
<i>oxycodone hcl SOLN</i>	P	Opioid Smart PA
<i>oxycodone hcl TABS</i>	P	Opioid Smart PA; QL(6 ea daily)
ROXICODONE TABS (<i>oxycodone hcl</i>)	NP	Opioid Smart PA; QL(6 ea daily)
<i>tramadol hcl TABS 50 MG</i>	P	Opioid Smart PA; QL(8 ea daily); AL(At least 18 yrs old)

Drug Name	Drug Tier	Requirements/Limits
ULTRAM TABS (<i>tramadol hcl</i>)	NP	Opioid Smart PA; QL(8 ea daily); AL(At least 18 yrs old)
Opioid Combinations		
<i>acetaminophen w/ codeine SOLN</i>	P	Opioid Smart PA; QL(30 ml daily); AL(At least 12 yrs old)
<i>acetaminophen w/ codeine TABS 15 MG-300 MG, 30 MG-300 MG, 60 MG-300 MG</i>	P	Opioid Smart PA; QL(6 ea daily); AL(At least 12 yrs old)
<i>butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG</i>	P	Opioid Smart PA; QL(4 ea daily); AL(At least 12 yrs old)
<i>butalbital-aspirin-caffeine w/cod</i>	P	Opioid Smart PA; QL(4 ea daily); AL(At least 12 yrs old)
<i>hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML</i>	P	Opioid Smart PA; QL(180 ml daily)
<i>hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	P	Opioid Smart PA; QL(10 ea daily)
<i>oxycodone w/ acetaminophen SOLN</i>	P	Opioid Smart PA
<i>oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	P	Opioid Smart PA; QL(6 ea daily)
PERCOCET TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG (<i>oxycodone w/ acetaminophen</i>)	NP	Opioid Smart PA; QL(6 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>tramadol-acetaminophen</i>	P	Opioid Smart PA; QL(4 ea daily); AL(At least 18 yrs old)
ULTRACET (<i>tramadol-acetaminophen</i>)	NP	Opioid Smart PA; QL(4 ea daily); AL(At least 18 yrs old)
Opioid Partial Agonists		
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 2 MG-8 MG, 3 MG-12 MG</i>	P	QL(2 ea daily); AL(At least 16 yrs old)
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG</i>	P	QL(3 ea daily); AL(At least 16 yrs old)
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL 0.5 MG-2 MG</i>	P	QL(12 ea daily); AL(At least 16 yrs old)
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL 2 MG-8 MG</i>	P	QL(3 ea daily); AL(At least 16 yrs old)
<i>buprenorphine hcl SUBL</i>	P	PA
SUBLOCADE SOSY	P	SP
SUBOXONE FILM SL 2 MG-8 MG, 3 MG-12 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	NP	QL(2 ea daily); AL(At least 16 yrs old)
SUBOXONE FILM SL 0.5 MG-2 MG, 1 MG-4 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	NP	QL(3 ea daily); AL(At least 16 yrs old)
ANDROGENS-ANABOLIC - Drugs to Regulate Hormones		
Androgens		
METHITEST TABS	P	
<i>testosterone cypionate SOLN IM 200 MG/ML</i>	P	QL(4 ml per 31 day(s) retail)
<i>testosterone cypionate SOLN IM 100 MG/ML</i>	P	QL(0.2858 ml daily)

Drug Name	Drug Tier	Requirements/Limits
<i>testosterone enanthate SOLN IM</i>	P	QL(0.1429 ml daily)
ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching		
Intrarectal Steroids		
CORTENEMA (<i>hydrocortisone (intrarectal)</i>)	NP	
<i>hydrocortisone (intrarectal)</i>	P	
Rectal Combinations		
ANALPRAM-HC LOTN EX	P	QL(62 ml per 31 day(s) retail)
<i>phenylephrine-shark liver oil-cocoa butter</i>	P	QL(12 ea per 31 day(s) retail)
<i>phenylephrine-shark liver oil-mineral oil-petrolatum</i>	P	QL(60 gm per 31 day(s) retail)
Rectal Steroids		
ANUSOL-HC EX (<i>hydrocortisone (rectal)</i>)	NP	
<i>hydrocortisone (rectal) EX 2.5 %</i>	P	
<i>hydrocortisone (rectal) EX 1 %</i>	P	1 package(s) per fill retail; RX/OTC
ANTACIDS		
Antacid Combinations		
<i>alum & mag hydrox-simethicone LIQD</i>	P	QL(24 ml daily)
<i>alum & mag hydrox-simethicone SUSP</i>	P	QL(24 ml daily)
Antacids - Aluminum Salts		
ALUMINUM HYDROXIDE SUSP 320 MG/5ML	P	
Antacids - Bicarbonate		
<i>sodium bicarbonate (antacid) TABS 325 MG, 650 MG</i>	P	QL(3.34 ea daily)
Antacids - Calcium Salts		

Drug Name	Drug Tier	Requirements/Limits
<i>calcium carbonate (antacid) CHEW 500 MG</i>	P	
TUMS LASTING EFFECTS CHEW (<i>calcium carbonate (antacid)</i>)	NP	
TUMS CHEW (<i>calcium carbonate (antacid)</i>)	NP	
Antacids - Magnesium Salts		
<i>magnesium oxide TABS 400 MG</i>	P	
ANTHELMINTICS - Drugs to Treat Worm Infections		
Anthelmintics		
EMVERM CHEW	P	QL(1 ea per fill retail)
<i>pyrantel pamoate SUSP 144 MG/ML</i>	P	QL(60 ml per fill retail); 1 max fill(s) per 31 day(s) retail
ANTIANGINAL AGENTS - Drugs to Treat Chest Pain		
Nitrates		
ISORDIL TITRADOSE TABS 5 MG (<i>isosorbide dinitrate</i>)	NP	
<i>isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG</i>	P	
<i>isosorbide mononitrate TABS</i>	P	QL(2 ea daily)
<i>isosorbide mononitrate TB24</i>	P	QL(1 ea daily)
NITRO-BID OINT	P	
NITRO-DUR PT24 (<i>nitroglycerin</i>)	NP	
<i>nitroglycerin CPCR</i>	P	
<i>nitroglycerin PT24</i>	P	
<i>nitroglycerin SUBL</i>	P	

Drug Name	Drug Tier	Requirements/Limits
NITROSTAT SUBL (nitroglycerin)	NP	
ANTI-ANXIETY AGENTS - Drugs to Treat Anxiety		
Antianxiety Agents - Misc.		
buspirone hcl 15 MG	P	QL(4 ea daily)
buspirone hcl 7.5 MG, 30 MG	P	QL(3 ea daily)
buspirone hcl 5 MG, 10 MG	P	QL(6 ea daily)
hydroxyzine hcl SYRP	P	
hydroxyzine hcl TABS	P	
hydroxyzine pamoate CAPS	P	
meprobamate	P	
VISTARIL CAPS (hydroxyzine pamoate)	NP	
Benzodiazepines		
alprazolam TABS	P	QL(3 ea daily)
ATIVAN TABS 0.5 MG, 2 MG (lorazepam)	NP	QL(3 ea daily)
ATIVAN TABS 1 MG (lorazepam)	NP	QL(4 ea daily)
chlordiazepoxide hcl CAPS	P	QL(4 ea daily)
clorazepate dipotassium TABS	P	QL(3 ea daily)
diazepam SOLN OR 5 MG/5ML	P	
diazepam TABS	P	QL(4 ea daily)
lorazepam TABS 1 MG	P	QL(4 ea daily)
lorazepam TABS 0.5 MG, 2 MG	P	QL(3 ea daily)
oxazepam CAPS	P	QL(4 ea daily)
TRANXENE T TABS 7.5 MG (clorazepate dipotassium)	NP	QL(3 ea daily)
VALIUM TABS (diazepam)	NP	QL(4 ea daily)
XANAX TABS (alprazolam)	NP	QL(3 ea daily)

Drug Name	Drug Tier	Requirements/Limits
ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
Antiarrhythmics Type I-A		
disopyramide phosphate CAPS	P	
NORPACE CR CP12 150 MG	P	
NORPACE CAPS (disopyramide phosphate)	NP	
quinidine gluconate TBCR	P	
quinidine sulfate TABS	P	
Antiarrhythmics Type I-B		
mexiletine hcl	P	
Antiarrhythmics Type I-C		
flecainide acetate	P	
propafenone hcl CP12	P	
propafenone hcl TABS	P	
RYTHMOL SR CP12 (propafenone hcl)	NP	
Antiarrhythmics Type III		
amiodarone hcl TABS 200 MG	P	
dofetilide	P	
TIKOSYN (dofetilide)	NP	
ANTI-ASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions		
Antiasthmatic - Monoclonal Antibodies		
XOLAIR SOLR	P	SP; PA
XOLAIR SOSY	P	SP; PA
Anti-Inflammatory Agents		
cromolyn sodium NEBU	P	QL(8 ml daily)
Bronchodilators - Anticholinergics		
ATROVENT HFA	P	1 package(s) per 31 day(s) retail

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
INCRUSE ELLIPTA	P	1 package(s) per 31 day(s) retail	<i>fluticasone propionate hfa</i> 110 MCG/ACT, 220 MCG/ACT	P	QL(12 gm per 25 day(s) retail)
<i>ipratropium bromide SOLN 0.02 %</i>	P	QL(375 ml per 25 day(s) retail)	PULMICORT SUSP 0.25 MG/2ML, 0.5 MG/2ML (<i>budesonide (inhalation)</i>)	NP	QL(120 ml per fill retail); AL(Up to 8 yrs old)
SPIRIVA HANDIHALER CAPS (<i>tiotropium bromide monohydrate</i>)	NP		PULMICORT SUSP 1 MG/2ML (<i>budesonide (inhalation)</i>)	NP	QL(60 ml per 31 day(s) retail); AL(Up to 8 yrs old)
<i>tiotropium bromide monohydrate CAPS</i>	P		QVAR REDHALER 80 MCG/ACT	P	QL(0.72 gm daily)
TUDORZA PRESSAIR	P	1 package(s) per 31 day(s) retail	QVAR REDHALER 40 MCG/ACT	P	QL(0.36 gm daily)
Leukotriene Modulators			Sympathomimetics		
<i>montelukast sodium CHEW</i>	P	QL(1 ea daily)	ADVAIR DISKUS AEPB (<i>fluticasone-salmeterol</i>)	NP	QL(60 ea per 30 day(s) retail); AL(At least 4 yrs old)
<i>montelukast sodium PACK</i>	P	QL(1 ea daily)	<i>albuterol sulfate AERS</i>	P	QL(18 gm per fill retail; 36 gm per 30 day(s) retail)
<i>montelukast sodium TABS</i>	P	QL(1 ea daily)	<i>albuterol sulfate AERS</i>	P	QL(6.7 gm per fill retail; 13.4 gm per 30 day(s) retail)
SINGULAIR CHEW (<i>montelukast sodium</i>)	NP	QL(1 ea daily)	<i>albuterol sulfate AERS</i>	P	QL(8.5 gm per fill retail; 17 gm per 30 day(s) retail)
SINGULAIR PACK (<i>montelukast sodium</i>)	NP	QL(1 ea daily)	<i>albuterol sulfate NEBU 0.63 MG/3ML, 1.25 MG/3ML</i>	P	QL(375 ml per 31 day(s) retail)
SINGULAIR TABS (<i>montelukast sodium</i>)	NP	QL(1 ea daily)	<i>albuterol sulfate NEBU 0.5 %, 2.5 MG/0.5ML</i>	P	
Selective Phosphodiesterase 4 (PDE4) Inhibitors			<i>albuterol sulfate NEBU 0.083 %</i>	P	QL(12.5 ml daily)
DALIRESP (<i>roflumilast</i>)	NP	QL(1 ea daily)	ALBUTEROL SULFATE NEBU	P	
<i>roflumilast</i>	P	QL(1 ea daily)	<i>albuterol sulfate SYRP</i>	P	
Steroid Inhalants			<i>albuterol sulfate TABS</i>	P	
ARNUITY ELLIPTA	P	QL(1 ea daily)	<i>budesonide-formoterol fumarate dihydrate</i>	P	QL(11 gm per fill retail)
ASMANEX HFA AERO	P	QL(0.44 gm daily)			
<i>budesonide (inhalation) SUSP 0.25 MG/2ML, 0.5 MG/2ML</i>	P	QL(120 ml per fill retail); AL(Up to 8 yrs old)			
<i>budesonide (inhalation) SUSP 1 MG/2ML</i>	P	QL(60 ml per 31 day(s) retail); AL(Up to 8 yrs old)			
<i>fluticasone propionate hfa 44 MCG/ACT</i>	P	QL(11 gm per 25 day(s) retail)			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
COMBIVENT RESPIMAT AERS	P	QL(4 gm per 31 day(s) retail)	<i>enoxaparin sodium SOSY 60 MG/0.6ML</i>	P	Max 42 syringes in 180 days; QL(25.2 ml per 180 day(s) retail); SP
<i>fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT</i>	P	QL(60 ea per 30 day(s) retail); AL(At least 4 yrs old)	<i>enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML</i>	P	Max 42 syringes in 180 days; QL(42 ml per 180 day(s) retail); SP
<i>ipratropium-albuterol SOLN</i>	P	QL(12 ml daily)	<i>enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML</i>	P	Max 42 syringes in 180 days; QL(33.6 ml per 180 day(s) retail); SP
<i>levalbuterol tartrate</i>	P	QL(0.5 gm daily; 30 gm per 30 day(s) retail)	<i>enoxaparin sodium SOSY 30 MG/0.3ML</i>	P	Max 42 syringes in 180 days; QL(12.6 ml per 180 day(s) retail); SP
SEREVENT DISKUS	P	1 package(s) per fill retail	<i>enoxaparin sodium SOSY 40 MG/0.4ML</i>	P	Max 42 syringes in 180 days; QL(16.8 ml per 180 day(s) retail); SP
<i>terbutaline sulfate TABS</i>	P		<i>heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/0.5ML, 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML</i>	P	
XOPENEX HFA (<i>levalbuterol tartrate</i>)	NP	QL(0.5 gm daily; 30 gm per 30 day(s) retail)	HEPARIN SODIUM SOSY IJ 5000 UNIT/0.5ML	P	
Xanthines			LOVENOX SOLN IJ 300 MG/3ML (<i>enoxaparin sodium</i>)	NP	Max 42 syringes in 180 days; QL(126 ml per 180 day(s) retail); SP
THEO-24 CP24	P		LOVENOX SOSY 30 MG/0.3ML (<i>enoxaparin sodium</i>)	NP	Max 42 syringes in 180 days; QL(12.6 ml per 180 day(s) retail); SP
<i>theophylline ELIX</i>	P				
<i>theophylline SOLN</i>	P	QL(475 ml per fill retail)			
<i>theophylline TB12</i>	P				
<i>theophylline TB24</i>	P				
ANTICOAGULANTS - Blood Thinners					
Coumarin Anticoagulants					
<i>warfarin sodium TABS</i>	P				
Direct Factor Xa Inhibitors					
ELIQUIS STARTER PACK TBPk	P	QL(2.47 ea daily)			
ELIQUIS TABS	P	QL(2 ea daily)			
Heparins And Heparinoid-Like Agents					
<i>enoxaparin sodium SOLN IJ 300 MG/3ML</i>	P	Max 42 syringes in 180 days; QL(126 ml per 180 day(s) retail); SP			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (<i>enoxaparin sodium</i>)	NP	Max 42 syringes in 180 days; QL(33.6 ml per 180 day(s) retail); SP	VALTOCO 10 MG DOSE LIQD	P	QL(10 ea per 30 day(s) retail); PA
LOVENOX SOSY 60 MG/0.6ML (<i>enoxaparin sodium</i>)	NP	Max 42 syringes in 180 days; QL(25.2 ml per 180 day(s) retail); SP	VALTOCO 15 MG DOSE LQPK	P	QL(10 ea per 30 day(s) retail); PA
LOVENOX SOSY 100 MG/ML, 150 MG/ML (<i>enoxaparin sodium</i>)	NP	Max 42 syringes in 180 days; QL(42 ml per 180 day(s) retail); SP	VALTOCO 20 MG DOSE LQPK	P	QL(10 ea per 30 day(s) retail); PA
LOVENOX SOSY 40 MG/0.4ML (<i>enoxaparin sodium</i>)	NP	Max 42 syringes in 180 days; QL(16.8 ml per 180 day(s) retail); SP	VALTOCO 5 MG DOSE LIQD	P	QL(10 ea per 30 day(s) retail); PA
Thrombin Inhibitors			Anticonvulsants - Misc.		
<i>dabigatran etexilate mesylate</i> CAPS	P		<i>carbamazepine</i> CHEW	P	
PRADAXA CAPS (<i>dabigatran etexilate mesylate</i>)	NP		<i>carbamazepine</i> SUSP	P	
ANTICONVULSANTS - Drugs to Treat Seizures			<i>carbamazepine</i> TABS	P	
Anticonvulsants - Benzodiazepines			<i>carbamazepine</i> TB12	P	
<i>clonazepam</i> TABS	P	QL(4 ea daily)	DIACOMIT CAPS 250 MG	P	QL(12 ea daily); SP; PA
DIASTAT ACUDIAL GEL (<i>diazepam</i> (<i>anticonvulsant</i>))	NP	QL(1 ea per fill retail); AL(At least 2 yrs old)	DIACOMIT CAPS 500 MG	P	QL(6 ea daily); SP; PA
DIASTAT PEDIATRIC GEL (<i>diazepam</i> (<i>anticonvulsant</i>))	NP	QL(1 ea per fill retail); AL(At least 2 yrs old)	DIACOMIT PACK 250 MG	P	QL(12 ea daily); SP; PA
<i>diazepam</i> (<i>anticonvulsant</i>) GEL	P	QL(1 ea per fill retail); AL(At least 2 yrs old)	DIACOMIT PACK 500 MG	P	QL(6 ea daily); SP; PA
KLONOPIN TABS (<i>clonazepam</i>)	NP	QL(4 ea daily)	<i>gabapentin</i> CAPS	P	QL(9 ea daily)
NAYZILAM	P	QL(10 ea per 30 day(s) retail); PA	<i>gabapentin</i> SOLN	P	
			<i>gabapentin</i> TABS 600 MG	P	QL(6 ea daily)
			<i>gabapentin</i> TABS 800 MG	P	QL(4 ea daily)
			KEPPRA XR TB24 (<i>levetiracetam</i>)	NP	ST
			KEPPRA SOLN OR 100 MG/ML (<i>levetiracetam</i>)	NP	QL(16 ml daily)
			KEPPRA TABS 500 MG (<i>levetiracetam</i>)	NP	QL(6 ea daily)
			KEPPRA TABS 250 MG, 750 MG (<i>levetiracetam</i>)	NP	QL(4 ea daily)
			KEPPRA TABS 1000 MG (<i>levetiracetam</i>)	NP	
			LAMICTAL CHEWABLE DISPERSIBLE CHEW (<i>lamotrigine</i>)	NP	
			LAMICTAL XR TB24 (<i>lamotrigine</i>)	NP	QL(1 ea daily); ST

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
LAMICTAL TABS (<i>lamotrigine</i>)	NP		TOPAMAX TABS 200 MG (<i>topiramate</i>)	NP	QL(2 ea daily)
<i>lamotrigine CHEW</i>	P		<i>topiramate CPSP 15 MG</i>	P	QL(6 ea daily)
<i>lamotrigine TABS</i>	P		<i>topiramate CPSP 25 MG</i>	P	QL(8 ea daily)
<i>lamotrigine TB24</i>	P	QL(1 ea daily); ST	<i>topiramate TABS 100 MG</i>	P	QL(4 ea daily)
<i>levetiracetam SOLN OR 100 MG/ML, 500 MG/5ML</i>	P	QL(16 ml daily)	<i>topiramate TABS 200 MG</i>	P	QL(2 ea daily)
<i>levetiracetam TABS 500 MG</i>	P	QL(6 ea daily)	<i>topiramate TABS 25 MG, 50 MG</i>	P	QL(6 ea daily)
<i>levetiracetam TABS 1000 MG</i>	P		TRILEPTAL SUSP (<i>oxcarbazepine</i>)	NP	
<i>levetiracetam TABS 250 MG, 750 MG</i>	P	QL(4 ea daily)	TRILEPTAL TABS (<i>oxcarbazepine</i>)	NP	
<i>levetiracetam TB24</i>	P	ST	ZONEGRAN CAPS 25 MG, 100 MG (<i>zonisamide</i>)	NP	
MYSOLINE (<i>primidone</i>)	NP		<i>zonisamide CAPS</i>	P	
NEURONTIN CAPS (<i>gabapentin</i>)	NP	QL(9 ea daily)	Carbamates		
NEURONTIN SOLN (<i>gabapentin</i>)	NP		<i>felbamate SUSP</i>	P	
NEURONTIN TABS 800 MG (<i>gabapentin</i>)	NP	QL(4 ea daily)	<i>felbamate TABS</i>	P	
NEURONTIN TABS 600 MG (<i>gabapentin</i>)	NP	QL(6 ea daily)	FELBATOL SUSP (<i>felbamate</i>)	NP	
<i>oxcarbazepine SUSP</i>	P		FELBATOL TABS (<i>felbamate</i>)	NP	
<i>oxcarbazepine TABS</i>	P		GABA Modulators		
<i>primidone</i>	P		GABITRIL (<i>tiagabine hcl</i>)	NP	
TEGRETOL SUSP (<i>carbamazepine</i>)	NP		<i>tiagabine hcl</i>	P	
TEGRETOL TABS (<i>carbamazepine</i>)	NP		Hydantoins		
TEGRETOL-XR TB12 (<i>carbamazepine</i>)	NP		DILANTIN (<i>phenytoin sodium extended</i>)	NP	
TOPAMAX SPRINKLE CPSP 25 MG (<i>topiramate</i>)	NP	QL(8 ea daily)	DILANTIN 30 MG	P	
TOPAMAX SPRINKLE CPSP 15 MG (<i>topiramate</i>)	NP	QL(6 ea daily)	DILANTIN INFATABS CHEW (<i>phenytoin</i>)	NP	
TOPAMAX TABS 100 MG (<i>topiramate</i>)	NP	QL(4 ea daily)	DILANTIN-125 SUSP (<i>phenytoin</i>)	NP	
TOPAMAX TABS 25 MG, 50 MG (<i>topiramate</i>)	NP	QL(6 ea daily)	<i>phenytoin sodium extended 100 MG</i>	P	
			<i>phenytoin CHEW</i>	P	
			<i>phenytoin SUSP</i>	P	
			Succinimides		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>ethosuximide CAPS</i>	P		<i>mirtazapine TABS 30 MG</i>	P	QL(1.5 ea daily)
<i>ethosuximide SOLN</i>	P		<i>mirtazapine TABS 7.5 MG, 45 MG</i>	P	QL(1 ea daily)
ZARONTIN CAPS (<i>ethosuximide</i>)	NP		<i>mirtazapine TBDP 15 MG</i>	P	QL(3 ea daily)
ZARONTIN SOLN (<i>ethosuximide</i>)	NP		<i>mirtazapine TBDP 45 MG</i>	P	QL(1 ea daily)
Valproic Acid			<i>mirtazapine TBDP 30 MG</i>	P	QL(1.5 ea daily)
DEPAKOTE ER TB24 500 MG (<i>divalproex sodium</i>)	NP	QL(7 ea daily)	REMERON SOLTAB TBDP 30 MG (<i>mirtazapine</i>)	NP	QL(1.5 ea daily)
DEPAKOTE ER TB24 250 MG (<i>divalproex sodium</i>)	NP	QL(3 ea daily)	REMERON SOLTAB TBDP 45 MG (<i>mirtazapine</i>)	NP	QL(1 ea daily)
DEPAKOTE SPRINKLES CSDR (<i>divalproex sodium</i>)	NP	QL(8 ea daily)	REMERON SOLTAB TBDP 15 MG (<i>mirtazapine</i>)	NP	QL(3 ea daily)
DEPAKOTE TBEC 250 MG (<i>divalproex sodium</i>)	NP	QL(3 ea daily)	REMERON TABS 30 MG (<i>mirtazapine</i>)	NP	QL(1.5 ea daily)
DEPAKOTE TBEC 500 MG (<i>divalproex sodium</i>)	NP	QL(7 ea daily)	REMERON TABS 15 MG (<i>mirtazapine</i>)	NP	QL(3 ea daily)
DEPAKOTE TBEC 125 MG (<i>divalproex sodium</i>)	NP	QL(2 ea daily)	Antidepressants - Misc.		
<i>divalproex sodium CSDR</i>	P	QL(8 ea daily)	<i>bupropion hcl TABS</i>	P	QL(3 ea daily)
<i>divalproex sodium TB24 500 MG</i>	P	QL(7 ea daily)	<i>bupropion hcl TB12 200 MG</i>	P	QL(2 ea daily)
<i>divalproex sodium TB24 250 MG</i>	P	QL(3 ea daily)	<i>bupropion hcl TB12 150 MG</i>	P	QL(3 ea daily)
<i>divalproex sodium TBEC 500 MG</i>	P	QL(7 ea daily)	<i>bupropion hcl TB12 100 MG</i>	P	QL(4 ea daily)
<i>divalproex sodium TBEC 250 MG</i>	P	QL(3 ea daily)	<i>bupropion hcl TB24 150 MG</i>	P	QL(3 ea daily)
<i>divalproex sodium TBEC 125 MG</i>	P	QL(2 ea daily)	<i>bupropion hcl TB24 300 MG</i>	P	QL(1 ea daily)
<i>valproate sodium SOLN OR 250 MG/5ML</i>	P		WELLBUTRIN SR TB12 100 MG (<i>bupropion hcl</i>)	NP	QL(4 ea daily)
<i>valproate sodium SOLN IV 100 MG/ML, 500 MG/5ML</i>	P	PA	WELLBUTRIN SR TB12 200 MG (<i>bupropion hcl</i>)	NP	QL(2 ea daily)
<i>valproic acid CAPS</i>	P		WELLBUTRIN SR TB12 150 MG (<i>bupropion hcl</i>)	NP	QL(3 ea daily)
ANTIDEPRESSANTS - Drugs to Treat Depression			WELLBUTRIN XL TB24 150 MG (<i>bupropion hcl</i>)	NP	QL(3 ea daily)
Alpha-2 Receptor Antagonists (Tetracyclics)					
<i>mirtazapine TABS 15 MG</i>	P	QL(3 ea daily)			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
WELLBUTRIN XL TB24 300 MG (<i>bupropion hcl</i>)	NP	QL(1 ea daily)	<i>fluoxetine hcl</i> TABS 20 MG	P	QL(4 ea daily)
Monoamine Oxidase Inhibitors (MAOIs)			<i>fluoxetine hcl</i> TABS 10 MG	P	QL(1 ea daily); AL(At least 7 yrs old)
NARDIL (<i>phenelzine sulfate</i>)	NP		<i>fluvoxamine maleate</i> TABS 25 MG, 50 MG	P	QL(2 ea daily); AL(At least 7 yrs old)
PARNATE (<i>tranylcypromine sulfate</i>)	NP		<i>fluvoxamine maleate</i> TABS 100 MG	P	QL(3 ea daily)
<i>phenelzine sulfate</i>	P		LEXAPRO TABS 10 MG (<i>escitalopram oxalate</i>)	NP	QL(2 ea daily); AL(At least 7 yrs old)
<i>tranylcypromine sulfate</i>	P		LEXAPRO TABS 20 MG (<i>escitalopram oxalate</i>)	NP	QL(1 ea daily); AL(At least 7 yrs old)
Selective Serotonin Reuptake Inhibitors (SSRIs)			LEXAPRO TABS 5 MG (<i>escitalopram oxalate</i>)	NP	QL(4 ea daily)
CELEXA TABS 10 MG (<i>citalopram hydrobromide</i>)	NP	QL(4 ea daily)	<i>paroxetine hcl</i> SUSP	P	QL(40 ml daily); PA
CELEXA TABS 20 MG (<i>citalopram hydrobromide</i>)	NP	QL(2 ea daily); AL(At least 7 yrs old)	<i>paroxetine hcl</i> TABS 10 MG	P	QL(6 ea daily)
CELEXA TABS 40 MG (<i>citalopram hydrobromide</i>)	NP	QL(1 ea daily); AL(At least 7 yrs old)	<i>paroxetine hcl</i> TABS 30 MG, 40 MG	P	QL(2 ea daily); AL(At least 7 yrs old)
<i>citalopram hydrobromide</i> SOLN	P		<i>paroxetine hcl</i> TABS 20 MG	P	QL(3 ea daily)
<i>citalopram hydrobromide</i> TABS 20 MG	P	QL(2 ea daily); AL(At least 7 yrs old)	<i>paroxetine hcl</i> TB24	P	QL(1 ea daily); AL(At least 7 yrs old)
<i>citalopram hydrobromide</i> TABS 40 MG	P	QL(1 ea daily); AL(At least 7 yrs old)	PAXIL CR TB24 (<i>paroxetine hcl</i>)	NP	QL(1 ea daily); AL(At least 7 yrs old)
<i>citalopram hydrobromide</i> TABS 10 MG	P	QL(4 ea daily)	PAXIL SUSP (<i>paroxetine hcl</i>)	NP	QL(40 ml daily); PA
<i>escitalopram oxalate</i> TABS 20 MG	P	QL(1 ea daily); AL(At least 7 yrs old)	PAXIL TABS 30 MG, 40 MG (<i>paroxetine hcl</i>)	NP	QL(2 ea daily); AL(At least 7 yrs old)
<i>escitalopram oxalate</i> TABS 5 MG	P	QL(4 ea daily)	PAXIL TABS 10 MG (<i>paroxetine hcl</i>)	NP	QL(6 ea daily)
<i>escitalopram oxalate</i> TABS 10 MG	P	QL(2 ea daily); AL(At least 7 yrs old)	PAXIL TABS 20 MG (<i>paroxetine hcl</i>)	NP	QL(3 ea daily)
<i>fluoxetine hcl</i> CAPS 40 MG	P	QL(2 ea daily); AL(At least 7 yrs old)	PROZAC CAPS 10 MG, 20 MG (<i>fluoxetine hcl</i>)	NP	QL(4 ea daily)
<i>fluoxetine hcl</i> CAPS 10 MG, 20 MG	P	QL(4 ea daily)	PROZAC CAPS 40 MG (<i>fluoxetine hcl</i>)	NP	QL(2 ea daily); AL(At least 7 yrs old)
<i>fluoxetine hcl</i> SOLN	P	QL(120 ml per fill retail)			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>sertraline hcl CONC</i>	P	QL(186 ml per 31 day(s) retail)	EFFEXOR XR CP24 37.5 MG (<i>venlafaxine hcl</i>)	NP	QL(4 ea daily)
<i>sertraline hcl TABS 100 MG</i>	P	QL(2 ea daily); AL(At least 7 yrs old)	PRISTIQ 25 MG, 50 MG (<i>desvenlafaxine succinate</i>)	NP	QL(1 ea daily)
<i>sertraline hcl TABS 25 MG, 50 MG</i>	P	QL(4 ea daily)	PRISTIQ 100 MG (<i>desvenlafaxine succinate</i>)	NP	QL(4 ea daily)
ZOLOFT CONC (<i>sertraline hcl</i>)	NP	QL(186 ml per 31 day(s) retail)	<i>venlafaxine hcl CP24 37.5 MG</i>	P	QL(4 ea daily)
ZOLOFT TABS 100 MG (<i>sertraline hcl</i>)	NP	QL(2 ea daily); AL(At least 7 yrs old)	<i>venlafaxine hcl CP24 150 MG</i>	P	QL(2 ea daily)
ZOLOFT TABS 25 MG, 50 MG (<i>sertraline hcl</i>)	NP	QL(4 ea daily)	<i>venlafaxine hcl CP24 75 MG</i>	P	QL(5 ea daily)
Serotonin Modulators			<i>venlafaxine hcl TABS</i>	P	
<i>nefazodone hcl</i>	P		<i>venlafaxine hcl TB24 37.5 MG, 75 MG, 225 MG</i>	P	QL(1 ea daily); AL(At least 7 yrs old)
<i>trazodone hcl TABS 50 MG, 100 MG, 150 MG</i>	P		<i>venlafaxine hcl TB24 150 MG</i>	P	QL(1 ea daily)
<i>trazodone hcl TABS 300 MG</i>	P	QL(2 ea daily)	Tricyclic Agents		
TRINTELLIX	P	QL(1 ea daily); AL(At least 18 yrs old); PA	<i>amitriptyline hcl TABS</i>	P	
VIIBRYD TABS (<i>vilazodone hcl</i>)	NP	QL(1 ea daily); PA	<i>amoxapine</i>	P	
<i>vilazodone hcl TABS</i>	P	QL(1 ea daily); PA	ANAFRANIL 75 MG (<i>clomipramine hcl</i>)	NP	
Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)			<i>clomipramine hcl 75 MG</i>	P	
CYMBALTA CPEP (<i>duloxetine hcl</i>)	NP	QL(1 ea daily); AL(At least 7 yrs old)	<i>desipramine hcl TABS 10 MG, 50 MG, 75 MG, 100 MG, 150 MG</i>	P	
<i>desvenlafaxine succinate 25 MG, 50 MG</i>	P	QL(1 ea daily)	<i>desipramine hcl TABS 25 MG</i>	P	QL(2 ea daily)
<i>desvenlafaxine succinate 100 MG</i>	P	QL(4 ea daily)	<i>doxepin hcl CAPS</i>	P	
<i>duloxetine hcl CPEP 20 MG, 30 MG, 60 MG</i>	P	QL(1 ea daily); AL(At least 7 yrs old)	<i>doxepin hcl CONC</i>	P	
EFFEXOR XR CP24 75 MG (<i>venlafaxine hcl</i>)	NP	QL(5 ea daily)	<i>imipramine hcl TABS</i>	P	
EFFEXOR XR CP24 150 MG (<i>venlafaxine hcl</i>)	NP	QL(2 ea daily)	NORPRAMIN TABS 10 MG (<i>desipramine hcl</i>)	NP	
			NORPRAMIN TABS 25 MG (<i>desipramine hcl</i>)	NP	QL(2 ea daily)
			<i>nortriptyline hcl CAPS</i>	P	
			<i>nortriptyline hcl SOLN</i>	P	QL(20 ml daily)

Drug Name	Drug Tier	Requirements/Limits
PAMELOR CAPS (<i>nortriptyline hcl</i>)	NP	
ANTIDIABETICS - Drugs to Regulate Blood Sugar		
Antidiabetic - Amylin Analogs		
SYMLINPEN 120 SOPN	P	QL(11 ml per 31 day(s) retail)
SYMLINPEN 60 SOPN	P	QL(6 ml per 31 day(s) retail)
Antidiabetic Combinations		
ACTOPLUS MET TABS 850 MG-15 MG (<i>pioglitazone hcl-metformin hcl</i>)	NP	QL(2 ea daily)
<i>alogliptin-metformin hcl</i>	P	QL(2 ea daily)
<i>alogliptin-pioglitazone</i>	P	QL(1 ea daily)
<i>glipizide-metformin hcl</i>	P	
<i>glyburide-metformin</i>	P	
KOMBIGLYZE XR (<i>saxagliptin-metformin hcl</i>)	NP	QL(1 ea daily)
<i>pioglitazone hcl-metformin hcl</i> TABS	P	QL(2 ea daily)
<i>saxagliptin-metformin hcl</i>	P	QL(1 ea daily)
SEGLUROMET	P	QL(2 ea daily)
SOLIQUA 100/33	P	QL(18 ml per 31 day(s) retail); PA
Biguanides		
<i>metformin hcl</i> TABS 850 MG	P	QL(3 ea daily)
<i>metformin hcl</i> TABS 1000 MG	P	QL(2 ea daily)
<i>metformin hcl</i> TABS 500 MG	P	QL(5 ea daily)
<i>metformin hcl</i> TB24 500 MG	P	QL(4 ea daily)
<i>metformin hcl</i> TB24 750 MG	P	QL(3 ea daily)
Diabetic Other		
BD GLUCOSE CHEW	P	QL(50 ea per 31 day(s) retail)

Drug Name	Drug Tier	Requirements/Limits
CVS GLUCOSE CHEW	P	QL(50 ea per 31 day(s) retail)
CVS SOFT GLUCOSE CHEW	P	QL(50 ea per 31 day(s) retail)
DEX4 QUICK DISSOLVE GLUCOSE CHEW	P	QL(50 ea per 31 day(s) retail)
<i>glucagon (rdna)</i>	P	QL(4 ea per 365 day(s) retail)
GLUCAGON EMERGENCY KIT (<i>glucagon (rdna)</i>)	NP	QL(4 ea per 365 day(s) retail)
GLUCOSE CHEW	P	QL(50 ea per 31 day(s) retail)
GNP GLUCOSE CHEW	P	QL(50 ea per 31 day(s) retail)
GNP QUICK DISSOLVE GLUCOSE CHEW	P	QL(50 ea per 31 day(s) retail)
LEADER QUICK DISSOLVE GLUCOSE CHEW	P	QL(50 ea per 31 day(s) retail)
SM GLUCOSE CHEW	P	QL(50 ea per 31 day(s) retail)
TRUEPLUS GLUCOSE ON THE GO CHEW	P	QL(50 ea per 31 day(s) retail)
TRUEPLUS GLUCOSE CHEW	P	QL(50 ea per 31 day(s) retail)
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
<i>alogliptin benzoate</i>	P	QL(1 ea daily)
ONGLYZA (<i>saxagliptin hcl</i>)	NP	QL(1 ea daily)
<i>saxagliptin hcl</i>	P	QL(1 ea daily)
Incretin Mimetic Agents		
BYDUREON BCISE AUIJ	P	QL(3.4 ml per 28 day(s) retail); PA
BYETTA SOPN 5 MCG/0.02ML	P	QL(1.2 ml per 31 day(s) retail); AL(At least 18 yrs old); PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BYETTA SOPN 10 MCG/0.04ML	P	QL(2.4 ml per 31 day(s) retail); AL(At least 18 yrs old); PA	INSULIN GLARGINE-YFGN SOLN	P	QL(30 ml per 31 day(s) retail)
TRULICITY	P	QL(2 ml per 28 day(s) retail); PA	INSULIN GLARGINE-YFGN SOPN	P	QL(30 ml per 31 day(s) retail)
VICTOZA	P	QL(12 ml per 28 day(s) retail); AL(At least 10 yrs old)	INSULIN LISPRO JUNIOR KWIKPEN SOPN	P	QL(30 ml per 31 day(s) retail)
Insulin			INSULIN LISPRO KWIKPEN SOPN	P	QL(30 ml per 31 day(s) retail)
HUMULIN 70/30 KWIKPEN SUPN	P	QL(1 ml daily)	INSULIN LISPRO PROTAMINE/INSULIN LISPRO KWIKPEN SUPN	P	QL(30 ml per 31 day(s) retail)
HUMULIN 70/30 SUSP	P	Limit 40mls per month	INSULIN LISPRO SOLN IJ	P	QL(30 ml per 31 day(s) retail)
HUMULIN N KWIKPEN SUPN	P	QL(1 ml daily)	NOVOLIN 70/30 FLEXPEN SUPN	P	QL(1 ml daily)
HUMULIN N SUSP	P	Limit 40mls per month	NOVOLIN 70/30 SUSP	P	Limit 40mls per month
HUMULIN R SOLN IJ	P	Limit 40mls per month	NOVOLIN N FLEXPEN SUPN	P	QL(1 ml daily)
INSULIN ASPART FLEXPEN SOPN	P	QL(30 ml per 31 day(s) retail)	NOVOLIN N SUSP	P	Limit 40mls per month
INSULIN ASPART PENFILL SOCT	P	QL(30 ml per 31 day(s) retail)	NOVOLIN R SOLN IJ	P	Limit 40mls per month
INSULIN ASPART PROTAMINE/INSULIN ASPART FLEXPEN SUPN	P	QL(30 ml per 31 day(s) retail)	Insulin Sensitizing Agents		
INSULIN ASPART PROTAMINE/INSULIN ASPART SUSP	P	QL(40 ml per 31 day(s) retail)	ACTOS (<i>pioglitazone hcl</i>)	NP	QL(1 ea daily)
INSULIN ASPART SOLN IJ	P	QL(30 ml per 31 day(s) retail)	<i>pioglitazone hcl</i>	P	QL(1 ea daily)
INSULIN DEGLUDEC FLEXTOUCH SOPN 200 UNIT/ML	P	QL(0.9 ml daily)	Meglitinide Analogues		
INSULIN DEGLUDEC FLEXTOUCH SOPN 100 UNIT/ML	P	QL(1.5 ml daily)	<i>nateglinide</i>	P	QL(3 ea daily)
INSULIN DEGLUDEC SOLN	P	QL(1.5 ml daily)	Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors		
			STEGLATRO	P	QL(1 ea daily)
			Sulfonylureas		
			AMARYL 1 MG, 2 MG (<i>glimepiride</i>)	NP	QL(4 ea daily)
			AMARYL 4 MG (<i>glimepiride</i>)	NP	QL(2 ea daily)
			<i>glimepiride 4 MG</i>	P	QL(2 ea daily)
			<i>glimepiride 1 MG, 2 MG</i>	P	QL(4 ea daily)
			<i>glipizide TABS</i>	P	
			<i>glipizide TB24</i>	P	

Drug Name	Drug Tier	Requirements/Limits
GLUCOTROL XL TB24 (glipizide)	NP	
glyburide micronized 1.5 MG, 3 MG, 6 MG	P	
glyburide TABS	P	
GLYNASE (glyburide micronized)	NP	
ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea		
Antidiarrheal/Probiotic Agents - Misc.		
bismuth subsalicylate CHEW 262 MG	P	
bismuth subsalicylate SUSP 525 MG/15ML, 1050 MG/30ML	P	
PEPTO-BISMOL MAX STRENGTH SUSP (bismuth subsalicylate)	NP	
PEPTO-BISMOL TO-GO CHEW (bismuth subsalicylate)	NP	
PEPTO-BISMOL CHEW (bismuth subsalicylate)	NP	
Antiperistaltic Agents		
diphenoxylate w/ atropine LIQD	P	
diphenoxylate w/ atropine TABS	P	
IMODIUM A-D CAPS (loperamide hcl)	NP	QL(8 ea daily); RX/OTC
IMODIUM A-D TABS (loperamide hcl)	NP	QL(8 ea daily)
LOMOTIL TABS (diphenoxylate w/ atropine)	NP	
loperamide hcl CAPS	P	QL(8 ea daily); RX/OTC
loperamide hcl TABS	P	QL(8 ea daily)
ANTIDOTES AND SPECIFIC ANTAGONISTS		
Antidotes - Chelating Agents		

Drug Name	Drug Tier	Requirements/Limits
CHEMET	P	
deferasirox PACK	P	SP; PA
deferasirox TABS	P	SP; PA
deferasirox TBSO	P	SP; PA
EXJADE TBSO (deferasirox)	NP	SP; PA
JADENU SPRINKLE PACK (deferasirox)	NP	SP; PA
JADENU TABS (deferasirox)	NP	SP; PA
Antidotes and Specific Antagonists		
VISTOGARD	P	
Opioid Antagonists		
naloxone hcl LIQD	P	QL(4 ea per 90 day(s) retail); RX/OTC
naloxone hcl SOCT	P	QL(2 ml per 90 day(s) retail)
naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML	P	QL(2 ml per 90 day(s) retail)
naloxone hcl SOSY	P	QL(4 ml per 90 day(s) retail)
naltrexone hcl	P	
NARCAN LIQD (naloxone hcl)	NP	QL(4 ea per 90 day(s) retail); RX/OTC
VIVITROL	P	QL(1 ea per 30 day(s) retail); SP
ANTIEMETICS - Drugs to Treat Nausea and Vomiting		
5-HT3 Receptor Antagonists		
ondansetron hcl SOLN IJ	P	
ondansetron hcl SOLN OR 4 MG/5ML	P	QL(50 ml per 31 day(s) retail)
ondansetron hcl SOSY	P	
ondansetron hcl TABS 4 MG, 8 MG	P	QL(20 ea per 31 day(s) retail)
ondansetron hcl TABS 24 MG	P	QL(1 ea per 14 day(s) retail)

Drug Name	Drug Tier	Requirements/Limits
<i>ondansetron TBDP</i>	P	QL(20 ea per 31 day(s) retail)
Antiemetics - Anticholinergic		
ANTIVERT CHEW (<i>meclizine hcl</i>)	NP	RX/OTC
<i>dimenhydrinate TABS</i>	P	QL(24 ea per fill retail)
DRAMAMINE CHEW	P	QL(24 ea per fill retail)
<i>meclizine hcl CHEW</i>	P	RX/OTC
<i>meclizine hcl TABS 12.5 MG, 25 MG</i>	P	RX/OTC
ANTIFUNGALS - Drugs to Treat Fungal Infections		
Antifungals		
<i>griseofulvin microsize SUSP</i>	P	
<i>griseofulvin microsize TABS</i>	P	
<i>griseofulvin ultramicrosize</i>	P	
<i>nystatin TABS</i>	P	QL(6 ea daily)
<i>terbinafine hcl TABS</i>	P	QL(1 ea daily; 90 ea per 120 day(s) retail)
Imidazole-Related Antifungals		
DIFLUCAN SUSR (<i>fluconazole</i>)	NP	QL(70 ml per fill retail)
DIFLUCAN TABS 150 MG (<i>fluconazole</i>)	NP	QL(2 ea per fill retail)
DIFLUCAN TABS 50 MG (<i>fluconazole</i>)	NP	QL(3 ea per 14 day(s) retail)
DIFLUCAN TABS 100 MG, 200 MG (<i>fluconazole</i>)	NP	
<i>fluconazole SUSR</i>	P	QL(70 ml per fill retail)
<i>fluconazole TABS 150 MG</i>	P	QL(2 ea per fill retail)
<i>fluconazole TABS 100 MG, 200 MG</i>	P	
<i>fluconazole TABS 50 MG</i>	P	QL(3 ea per 14 day(s) retail)
<i>itraconazole CAPS</i>	P	QL(1 ea daily); PA

Drug Name	Drug Tier	Requirements/Limits
SPORANOX PULSEPAK CAPS (<i>itraconazole</i>)	NP	QL(1 ea daily); PA
SPORANOX CAPS (<i>itraconazole</i>)	NP	QL(1 ea daily); PA
ANTIHISTAMINES - Drugs to Treat Allergies		
Antihistamines - Alkylamines		
<i>chlorpheniramine maleate SYRP</i>	P	
<i>chlorpheniramine maleate TABS</i>	P	QL(120 ea per fill retail)
<i>dexchlorpheniramine maleate SOLN</i>	P	
Antihistamines - Ethanolamines		
BENADRYL ALLERGY EXTRA STRENGTH TABS	P	
<i>clemastine fumarate TABS 1.34 MG</i>	P	QL(2 ea daily)
DAYHIST ALLERGY 12 HOUR RELIEF TABS	P	QL(2 ea daily)
<i>diphenhydramine hcl CAPS</i>	P	QL(4 ea daily)
<i>diphenhydramine hcl ELIX 12.5 MG/5ML</i>	P	QL(240 ml per fill retail)
<i>diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML</i>	P	QL(240 ml per fill retail)
<i>diphenhydramine hcl TABS 25 MG</i>	P	QL(4 ea daily)
Antihistamines - Non-Sedating		
<i>cetirizine hcl CHEW</i>	P	QL(1 ea daily)
<i>cetirizine hcl SOLN OR</i>	P	QL(300 ml per fill retail); RX/OTC
<i>cetirizine hcl SYRP OR</i>	P	QL(300 ml per fill retail); RX/OTC
<i>cetirizine hcl TABS</i>	P	QL(1 ea daily)
CLARITIN ALLERGY CHILDRENS SOLN (<i>loratadine</i>)	P	QL(300 ml per fill retail)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>fexofenadine hcl TABS 60 MG</i>	P	QL(2 ea daily)	<i>cholestyramine light POWD</i>	P	
<i>fexofenadine hcl TABS 180 MG</i>	P	QL(1 ea daily)	<i>cholestyramine PACK</i>	P	
<i>levocetirizine dihydrochloride TABS</i>	P	QL(1 ea daily); RX/OTC	<i>cholestyramine POWD</i>	P	
<i>loratadine SOLN</i>	P	QL(300 ml per fill retail)	COLESTID FLAVORED GRAN (<i>colestipol hcl</i>)	NP	
<i>loratadine TABS</i>	P	QL(1 ea daily)	COLESTID GRAN (<i>colestipol hcl</i>)	NP	
<i>loratadine TBDP 10 MG</i>	P	QL(1 ea daily)	COLESTID TABS (<i>colestipol hcl</i>)	NP	
XYZAL ALLERGY 24HR TABS (<i>levocetirizine dihydrochloride</i>)	NP	QL(1 ea daily); RX/OTC	<i>colestipol hcl GRAN</i>	P	
ZYRTEC CHILDRENS ALLERGY CHEW 10 MG (<i>cetirizine hcl</i>)	P	QL(1 ea daily)	<i>colestipol hcl TABS</i>	P	
ZYRTEC CHEW 10 MG (<i>cetirizine hcl</i>)	P	QL(1 ea daily)	QUESTRAN LIGHT POWD (<i>cholestyramine light</i>)	NP	
Antihistamines - Phenothiazines			QUESTRAN PACK (<i>cholestyramine</i>)	NP	
<i>promethazine hcl SOLN OR 6.25 MG/5ML</i>	P	QL(240 ml per fill retail); AL(At least 2 yrs old)	QUESTRAN POWD (<i>cholestyramine</i>)	NP	
<i>promethazine hcl SUPP</i>	P	QL(12 ea per fill retail); AL(At least 2 yrs old)	Fibric Acid Derivatives		
<i>promethazine hcl TABS</i>	P	AL(At least 2 yrs old)	<i>fenofibrate micronized 67 MG</i>	P	QL(2 ea daily)
Antihistamines - Piperidines			<i>fenofibrate micronized 134 MG, 200 MG</i>	P	QL(1 ea daily)
<i>cyproheptadine hcl SYRP</i>	P		<i>fenofibrate TABS 160 MG</i>	P	QL(1 ea daily)
<i>cyproheptadine hcl TABS</i>	P		<i>fenofibrate TABS 54 MG</i>	P	QL(3 ea daily)
ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol			FENOFIBRATE TABS	P	QL(1 ea daily)
Antihyperlipidemics - Combinations			<i>gemfibrozil TABS</i>	P	QL(2 ea daily)
<i>ezetimibe-simvastatin</i>	P	QL(1 ea daily); ST	LOPID TABS (<i>gemfibrozil</i>)	NP	QL(2 ea daily)
VYTORIN (<i>ezetimibe-simvastatin</i>)	NP	QL(1 ea daily); ST	HMG CoA Reductase Inhibitors		
Bile Acid Sequestrants			<i>atorvastatin calcium TABS</i>	P	QL(1 ea daily)
<i>cholestyramine light PACK</i>	P		CRESTOR TABS (<i>rosuvastatin calcium</i>)	NP	QL(1 ea daily)
			LIPITOR TABS (<i>atorvastatin calcium</i>)	NP	QL(1 ea daily)
			<i>lovastatin TABS 10 MG, 20 MG</i>	P	QL(1 ea daily)
			<i>lovastatin TABS 40 MG</i>	P	QL(2 ea daily)
			<i>pravastatin sodium</i>	P	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>rosuvastatin calcium TABS</i>	P	QL(1 ea daily)
<i>simvastatin TABS 5 MG, 10 MG, 20 MG, 40 MG</i>	P	QL(1 ea daily)
ZOCOR TABS 10 MG, 20 MG, 40 MG (<i>simvastatin</i>)	NP	QL(1 ea daily)
Intestinal Cholesterol Absorption Inhibitors		
<i>ezetimibe</i>	P	ST
ZETIA (<i>ezetimibe</i>)	NP	ST
Nicotinic Acid Derivatives		
<i>niacin (antihyperlipidemic) TABS</i>	P	
<i>niacin (antihyperlipidemic) TBCR</i>	P	
NIASPAN TBCR (<i>niacin (antihyperlipidemic)</i>)	NP	
ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure		
ACE Inhibitors		
ACCUPRIL (<i>quinapril hcl</i>)	NP	
ALTACE CAPS 1.25 MG, 2.5 MG, 5 MG, 10 MG (<i>ramipril</i>)	NP	QL(2 ea daily)
<i>benazepril hcl 40 MG</i>	P	QL(2 ea daily)
<i>benazepril hcl 5 MG, 10 MG, 20 MG</i>	P	QL(1 ea daily)
<i>captopril</i>	P	QL(3 ea daily)
<i>enalapril maleate TABS</i>	P	QL(2 ea daily)
<i>fosinopril sodium</i>	P	QL(1 ea daily)
<i>lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i>	P	
LOTENSIN 40 MG (<i>benazepril hcl</i>)	NP	QL(2 ea daily)
LOTENSIN 10 MG, 20 MG (<i>benazepril hcl</i>)	NP	QL(1 ea daily)
<i>quinapril hcl</i>	P	
<i>ramipril CAPS</i>	P	QL(2 ea daily)
<i>trandolapril 4 MG</i>	P	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>trandolapril 1 MG, 2 MG</i>	P	QL(1 ea daily)
VASOTEC TABS (<i>enalapril maleate</i>)	NP	QL(2 ea daily)
ZESTRIL TABS (<i>lisinopril</i>)	NP	
Angiotensin II Receptor Antagonists		
ATACAND (<i>candesartan cilexetil</i>)	NP	
AVAPRO (<i>irbesartan</i>)	NP	QL(1 ea daily)
BENICAR (<i>olmesartan medoxomil</i>)	NP	QL(1 ea daily); ST
<i>candesartan cilexetil</i>	P	
COZAAR (<i>losartan potassium</i>)	NP	QL(1 ea daily)
DIOVAN TABS (<i>valsartan</i>)	NP	QL(1 ea daily)
<i>irbesartan</i>	P	QL(1 ea daily)
<i>losartan potassium</i>	P	QL(1 ea daily)
MICARDIS (<i>telmisartan</i>)	NP	
<i>olmesartan medoxomil</i>	P	QL(1 ea daily); ST
<i>telmisartan</i>	P	
<i>valsartan TABS</i>	P	QL(1 ea daily)
Antiadrenergic Antihypertensives		
CARDURA (<i>doxazosin mesylate</i>)	NP	
<i>clonidine hcl TABS</i>	P	
<i>doxazosin mesylate</i>	P	
<i>guanfacine hcl</i>	P	
<i>methyldopa TABS</i>	P	
MINIPRESS CAPS (<i>prazosin hcl</i>)	NP	
<i>prazosin hcl CAPS</i>	P	
<i>terazosin hcl</i>	P	
Antihypertensive Combinations		
ACCURETIC 12.5 MG-10 MG (<i>quinapril-hydrochlorothiazide</i>)	NP	QL(3 ea daily)
ACCURETIC 25 MG-20 MG (<i>quinapril-hydrochlorothiazide</i>)	NP	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ACCURETIC 12.5 MG-20 MG (<i>quinapril-hydrochlorothiazide</i>)	NP	QL(4 ea daily)	EXFORGE (<i>amlodipine besylate-valsartan</i>)	NP	ST
<i>amlodipine besylate-benazepril hcl</i>	P	QL(1 ea daily)	EXFORGE HCT (<i>amlodipine-valsartan-hydrochlorothiazide</i>)	NP	ST
<i>amlodipine besylate-olmesartan medoxomil</i>	P	ST	<i>fosinopril sodium & hydrochlorothiazide</i>	P	QL(1 ea daily)
<i>amlodipine besylate-valsartan</i>	P	ST	HYZAAR (<i>losartan potassium & hydrochlorothiazide</i>)	NP	QL(1 ea daily)
<i>amlodipine-valsartan-hydrochlorothiazide</i>	P	ST	<i>irbesartan-hydrochlorothiazide</i>	P	QL(1 ea daily)
ATACAND HCT (<i>candesartan cilexetil-hydrochlorothiazide</i>)	NP		<i>lisinopril & hydrochlorothiazide</i>	P	
<i>atenolol & chlorthalidone</i>	P	QL(2 ea daily)	<i>losartan potassium & hydrochlorothiazide</i>	P	QL(1 ea daily)
AVALIDE (<i>irbesartan-hydrochlorothiazide</i>)	NP	QL(1 ea daily)	LOTENSIN HCT 12.5 MG-10 MG, 12.5 MG-20 MG, 25 MG-20 MG (<i>benazepril & hydrochlorothiazide</i>)	NP	QL(1 ea daily)
AZOR (<i>amlodipine besylate-olmesartan medoxomil</i>)	NP	ST	LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (<i>amlodipine besylate-benazepril hcl</i>)	NP	QL(1 ea daily)
<i>benazepril & hydrochlorothiazide</i>	P	QL(1 ea daily)	<i>metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 25 MG-50 MG</i>	P	QL(2 ea daily)
BENICAR HCT (<i>olmesartan medoxomil-hydrochlorothiazide</i>)	NP	QL(1 ea daily); ST	<i>metoprolol & hydrochlorothiazide TABS 50 MG-100 MG</i>	P	QL(1 ea daily)
<i>bisoprolol & hydrochlorothiazide 6.25 MG-10 MG, 6.25 MG-5 MG</i>	P	QL(1 ea daily)	MICARDIS HCT (<i>telmisartan-hydrochlorothiazide</i>)	NP	QL(1 ea daily)
<i>candesartan cilexetil-hydrochlorothiazide</i>	P		<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	P	ST
<i>captopril & hydrochlorothiazide 25 MG-50 MG</i>	P	QL(3 ea daily)	<i>olmesartan medoxomil-hydrochlorothiazide</i>	P	QL(1 ea daily); ST
<i>captopril & hydrochlorothiazide 15 MG-25 MG, 15 MG-50 MG, 25 MG-25 MG</i>	P	QL(2 ea daily)	<i>quinapril-hydrochlorothiazide 12.5 MG-20 MG</i>	P	QL(4 ea daily)
DIOVAN HCT (<i>valsartan-hydrochlorothiazide</i>)	NP	QL(1 ea daily)			
DUTOPROL TB24 12.5 MG-50 MG	P	QL(1 ea daily)			
<i>enalapril maleate & hydrochlorothiazide</i>	P	QL(2 ea daily)			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>quinapril-hydrochlorothiazide 12.5 MG-10 MG</i>	P	QL(3 ea daily)	BACTRIM DS TABS (<i>sulfamethoxazole-trimethoprim</i>)	NP	
<i>quinapril-hydrochlorothiazide 25 MG-20 MG</i>	P	QL(2 ea daily)	BACTRIM TABS (<i>sulfamethoxazole-trimethoprim</i>)	NP	
<i>telmisartan-amlodipine</i>	P		<i>methenamine-hyosc-methylene blue-sod phospheryl sal TABS 10.8 MG-81.6 MG-0.12 MG-36.2 MG-40.8 MG, 10.8 MG-81.6 MG-36.2 MG-0.12 MG-40.8 MG</i>	P	
<i>telmisartan-hydrochlorothiazide</i>	P	QL(1 ea daily)	<i>sulfamethoxazole-trimethoprim SUSP</i>	P	
TENORETIC 100 (<i>atenolol & chlorthalidone</i>)	NP	QL(2 ea daily)	<i>sulfamethoxazole-trimethoprim TABS</i>	P	
TENORETIC 50 (<i>atenolol & chlorthalidone</i>)	NP	QL(2 ea daily)			
<i>trandolapril-verapamil hcl</i>	P		Glycopeptides		
TRIBENZOR (<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>)	NP	ST	FIRVANQ SOLR OR (<i>vancomycin hcl</i>)	NP	QL(300 ml per fill retail)
<i>valsartan-hydrochlorothiazide</i>	P	QL(1 ea daily)	VANCOCIN CAPS 250 MG (<i>vancomycin hcl</i>)	NP	QL(8 ea daily)
VASERETIC 25 MG-10 MG (<i>enalapril maleate & hydrochlorothiazide</i>)	NP	QL(2 ea daily)	VANCOCIN CAPS 125 MG (<i>vancomycin hcl</i>)	NP	QL(4 ea daily)
ZESTORETIC (<i>lisinopril & hydrochlorothiazide</i>)	NP		<i>vancomycin hcl CAPS 125 MG</i>	P	QL(4 ea daily)
ZIAC 6.25 MG-10 MG, 6.25 MG-5 MG (<i>bisoprolol & hydrochlorothiazide</i>)	NP	QL(1 ea daily)	<i>vancomycin hcl CAPS 250 MG</i>	P	QL(8 ea daily)
Vasodilators			<i>vancomycin hcl SOLR IV 1 GM, 1000 MG</i>	P	QL(14 ea per fill retail)
<i>hydralazine hcl TABS</i>	P		<i>vancomycin hcl SOLR IV 500 MG</i>	P	QL(14 ea per 31 day(s) retail)
<i>minoxidil 10 MG</i>	P	QL(10 ea daily)	<i>vancomycin hcl SOLR OR 25 MG/ML, 50 MG/ML, 250 MG/5ML</i>	P	QL(300 ml per fill retail)
<i>minoxidil 2.5 MG</i>	P	QL(3 ea daily)	VANCOMYCIN HYDROCHLORIDE SOLR IV 1 GM	P	QL(14 ea per fill retail)
ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections			VANCOMYCIN HYDROCHLORIDE SOLR IV 500 MG	P	QL(14 ea per 31 day(s) retail)
Anti-infective Agents - Misc.			Leprostatics		
<i>metronidazole TABS</i>	P		<i>dapsone</i>	P	
<i>trimethoprim TABS</i>	P				
TRIMETHOPRIM TABS 100 MG (<i>trimethoprim</i>)	NP				
Anti-infective Misc. - Combinations					

Drug Name	Drug Tier	Requirements/Limits
Lincosamides		
CLEOCIN 150 MG, 300 MG (<i>clindamycin hcl</i>)	NP	
CLEOCIN PEDIATRIC GRANULES (<i>clindamycin palmitate hydrochloride</i>)	NP	QL(300 ml per fill retail)
<i>clindamycin hcl 150 MG, 300 MG</i>	P	
<i>clindamycin palmitate hydrochloride</i>	P	QL(300 ml per fill retail)
Oxazolidinones		
SIVEXTRO TABS	P	QL(6 ea per fill retail); PA
Pleuromutilins		
XENLETA TABS	P	SP; PA
Urinary Anti-infectives		
MACROBID (<i>nitrofurantoin monohyd macro</i>)	NP	
MACRODANTIN 50 MG, 100 MG (<i>nitrofurantoin macrocrystal</i>)	NP	
<i>methenamine mandelate</i>	P	
<i>nitrofurantoin</i>	P	QL(40 ml daily)
<i>nitrofurantoin macrocrystal 50 MG, 100 MG</i>	P	
<i>nitrofurantoin monohyd macro</i>	P	
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)		
Antimalarial Combinations		
COARTEM	P	QL(24 ea per fill retail)
Antimalarials		
<i>chloroquine phosphate TABS 250 MG</i>	P	
<i>chloroquine phosphate TABS 500 MG</i>	P	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>hydroxychloroquine sulfate 100 MG, 200 MG</i>	P	
KRINTAFEL	P	QL(0.67 ea daily)
<i>mefloquine hcl</i>	P	
<i>primaquine phosphate TABS</i>	P	
PRIMAQUINE PHOSPHATE TABS (<i>primaquine phosphate</i>)	NP	
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
Antimyasthenic/Cholinergic Agents		
MESTINON TIMESPAN TBCR (<i>pyridostigmine bromide</i>)	NP	
MESTINON TABS (<i>pyridostigmine bromide</i>)	NP	
<i>pyridostigmine bromide TABS 60 MG</i>	P	
<i>pyridostigmine bromide TBCR</i>	P	
ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)		
Antimycobacterial Agents		
<i>ethambutol hcl TABS</i>	P	
<i>isoniazid SYRP</i>	P	
<i>isoniazid TABS</i>	P	
MYAMBUTOL TABS 400 MG (<i>ethambutol hcl</i>)	NP	
MYCOBUTIN (<i>rifabutin</i>)	NP	
<i>pyrazinamide</i>	P	
<i>rifabutin</i>	P	
<i>rifampin CAPS</i>	P	
TRECATOR	P	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer		
Alkylating Agents		
ALKERAN (<i>melfalan</i>)	NP	

Drug Name	Drug Tier	Requirements/Limits
LEUKERAN	P	
<i>melphalan</i>	P	
MYLERAN TABS	P	
Antimetabolites		
<i>mercaptopurine</i> TABS	P	
<i>methotrexate sodium</i> SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML	P	
<i>methotrexate sodium</i> TABS 2.5 MG	P	
PURIXAN SUSP	P	
TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	P	
Antineoplastic - Angiogenesis Inhibitors		
MVASI	P	SP; PA
ZIRABEV	P	SP; PA
Antineoplastic - Antibodies		
ENHERTU	P	SP; PA
PADCEV	P	SP; PA
RUXIENCE	P	SP; PA
TRUXIMA	P	SP; PA
Antineoplastic - Anti-HER2 Agents		
KANJINTI	P	SP; PA
OGIVRI	P	SP; PA
TRAZIMERA 420 MG	P	SP; PA
Antineoplastic - Hormonal and Related Agents		
<i>abiraterone acetate</i>	P	SP; PA
<i>anastrozole</i>	P	
ARIMIDEX (<i>anastrozole</i>)	NP	
AROMASIN (<i>exemestane</i>)	NP	
<i>bicalutamide</i>	P	QL(1 ea daily)
CASODEX (<i>bicalutamide</i>)	NP	QL(1 ea daily)
EULEXIN	P	
<i>exemestane</i>	P	

Drug Name	Drug Tier	Requirements/Limits
FARESTON (<i>toremifene citrate</i>)	NP	PA
FEMARA (<i>letrozole</i>)	NP	
<i>flutamide</i>	P	
<i>letrozole</i>	P	
<i>megestrol acetate</i> SUSP	P	
<i>megestrol acetate</i> TABS	P	
<i>tamoxifen citrate</i> TABS	P	
<i>toremifene citrate</i>	P	PA
ZYTIGA (<i>abiraterone acetate</i>)	NP	SP; PA
Antineoplastic Combinations		
PHESGO	P	SP; PA
Antineoplastic Enzyme Inhibitors		
BRAFTOVI 75 MG	P	SP; PA
IBRANCE CAPS	P	SP; PA
IBRANCE TABS	P	SP; PA
ICLUSIG	P	QL(1 ea daily); SP; PA
INREBIC	P	SP; PA
MEKTOVI	P	SP; PA
ROZLYTREK CAPS	P	SP; PA
Antineoplastic Enzymes		
ASPARLAS	P	SP; PA
Antineoplastics Misc.		
HYDREA (<i>hydroxyurea</i>)	NP	
<i>hydroxyurea</i>	P	
Chemotherapy Rescue/Antidote/Protective Agents		
<i>leucovorin calcium</i> TABS	P	
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease		
Antiparkinson Adjunctive Therapy		
<i>carbidopa</i>	P	
LODOSYN (<i>carbidopa</i>)	NP	
Antiparkinson Anticholinergics		

Drug Name	Drug Tier	Requirements/Limits
<i>benztropine mesylate</i> TABS	P	
<i>trihexyphenidyl hcl</i> SOLN	P	QL(16.67 ml daily)
<i>trihexyphenidyl hcl</i> TABS	P	
Antiparkinson Dopaminergics		
<i>amantadine hcl</i> CAPS	P	
<i>amantadine hcl</i> SOLN	P	
<i>bromocriptine mesylate</i> CAPS	P	
<i>bromocriptine mesylate</i> TABS 2.5 MG	P	
<i>carbidopa-levodopa</i> TABS	P	
<i>carbidopa-levodopa</i> TBCR	P	
DHIVY TABS	P	
PARLODEL CAPS (<i>bromocriptine mesylate</i>)	NP	
PARLODEL TABS (<i>bromocriptine mesylate</i>)	NP	
<i>pramipexole dihydrochloride</i> TABS	P	QL(3 ea daily); AL(At least 18 yrs old)
<i>ropinirole hydrochloride</i> TABS 0.5 MG, 1 MG, 2 MG, 5 MG	P	QL(3 ea daily)
<i>ropinirole hydrochloride</i> TABS 0.25 MG, 3 MG, 4 MG	P	QL(6 ea daily)
SINEMET TABS 100 MG-10 MG, 100 MG-25 MG (<i>carbidopa-levodopa</i>)	NP	
Antiparkinson Monoamine Oxidase Inhibitors		
<i>selegiline hcl</i> CAPS	P	
<i>selegiline hcl</i> TABS	P	
ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
Antimanic Agents		
<i>lithium</i>	P	QL(10 ml daily)
<i>lithium carbonate</i> CAPS	P	

Drug Name	Drug Tier	Requirements/Limits
LITHIUM CARBONATE POWD	P	
<i>lithium carbonate</i> TABS	P	
<i>lithium carbonate</i> TBCR	P	
LITHOBID TBCR (<i>lithium carbonate</i>)	NP	
Antipsychotics - Misc.		
GEODON (<i>ziprasidone hcl</i>)	NP	QL(2 ea daily); AL(At least 18 yrs old)
LATUDA (<i>lurasidone hcl</i>)	NP	
<i>lurasidone hcl</i>	P	
NUPLAZID CAPS	P	QL(1 ea daily); PA
NUPLAZID TABS 10 MG	P	QL(1 ea daily); PA
<i>ziprasidone hcl</i>	P	QL(2 ea daily); AL(At least 18 yrs old)
Benzisoxazoles		
INVEGA SUSTENNA 78 MG/0.5ML	P	QL(0.5 ml per 28 day(s) retail); SP; PA
INVEGA SUSTENNA 234 MG/1.5ML	P	QL(3 ml per 28 day(s) retail); SP; PA
INVEGA SUSTENNA 117 MG/0.75ML	P	QL(1.5 ml per 28 day(s) retail); SP; PA
INVEGA SUSTENNA 39 MG/0.25ML	P	QL(0.25 ml per 28 day(s) retail); SP; PA
INVEGA SUSTENNA 156 MG/ML	P	QL(2 ml per 28 day(s) retail); SP; PA
INVEGA TRINZA 410 MG/1.32ML	P	QL(1.4 ml per fill retail); 1 max fill(s) per 84 day(s) retail; SP; PA
INVEGA TRINZA 546 MG/1.75ML	P	QL(1.8 ml per fill retail); 1 max fill(s) per 84 day(s) retail; SP; PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
INVEGA TRINZA 819 MG/2.63ML	P	QL(2.7 ml per fill retail); 1 max fill(s) per 84 day(s) retail; SP; PA	Dibenzapines		
INVEGA TRINZA 273 MG/0.88ML	P	QL(0.88 ml per fill retail); 1 max fill(s) per 84 day(s) retail; SP; PA	<i>clozapine TABS 100 MG</i>	P	QL(9 ea daily); AL(At least 18 yrs old)
PERSERIS PRSY	P	QL(1 ea per 28 day(s) retail); SP; PA	<i>clozapine TABS 25 MG, 50 MG, 200 MG</i>	P	QL(3 ea daily); AL(At least 18 yrs old)
RISPERDAL CONSTA (<i>risperidone microspheres</i>)	NP	2 max fill(s) per 28 day(s) retail; SP; PA	CLOZARIL TABS 25 MG, 50 MG, 200 MG (<i>clozapine</i>)	NP	QL(3 ea daily); AL(At least 18 yrs old)
RISPERDAL SOLN (<i>risperidone</i>)	NP	QL(4 ml daily); AL(At least 5 yrs old)	CLOZARIL TABS 100 MG (<i>clozapine</i>)	NP	QL(9 ea daily); AL(At least 18 yrs old)
RISPERDAL TABS 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG (<i>risperidone</i>)	NP	QL(4 ea daily); AL(At least 5 yrs old)	<i>loxapine succinate</i>	P	QL(4 ea daily)
<i>risperidone microspheres</i>	P	2 max fill(s) per 28 day(s) retail; SP; PA	<i>olanzapine TABS 7.5 MG, 10 MG</i>	P	QL(2 ea daily); AL(At least 10 yrs old)
<i>risperidone SOLN</i>	P	QL(4 ml daily); AL(At least 5 yrs old)	<i>olanzapine TABS 2.5 MG, 5 MG</i>	P	QL(4 ea daily); AL(At least 10 yrs old)
<i>risperidone TABS</i>	P	QL(4 ea daily); AL(At least 5 yrs old)	<i>olanzapine TABS 15 MG, 20 MG</i>	P	QL(1 ea daily); AL(At least 10 yrs old)
<i>risperidone TBDP</i>	P	QL(2 ea daily); AL(At least 5 yrs old)	<i>quetiapine fumarate TABS 300 MG, 400 MG</i>	P	QL(2 ea daily); AL(At least 10 yrs old)
Butyrophenones			<i>quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG</i>	P	QL(4 ea daily); AL(At least 10 yrs old)
HALDOL DECANOATE 100 (<i>haloperidol decanoate</i>)	NP		SEROQUEL TABS 300 MG, 400 MG (<i>quetiapine fumarate</i>)	NP	QL(2 ea daily); AL(At least 10 yrs old)
HALDOL DECANOATE 50 (<i>haloperidol decanoate</i>)	NP		SEROQUEL TABS 25 MG, 50 MG, 100 MG, 200 MG (<i>quetiapine fumarate</i>)	NP	QL(4 ea daily); AL(At least 10 yrs old)
<i>haloperidol decanoate</i>	P		ZYPREXA TABS 2.5 MG, 5 MG (<i>olanzapine</i>)	NP	QL(4 ea daily); AL(At least 10 yrs old)
<i>haloperidol lactate CONC</i>	P		ZYPREXA TABS 15 MG, 20 MG (<i>olanzapine</i>)	NP	QL(1 ea daily); AL(At least 10 yrs old)
<i>haloperidol TABS 20 MG</i>	P		ZYPREXA TABS 7.5 MG, 10 MG (<i>olanzapine</i>)	NP	QL(2 ea daily); AL(At least 10 yrs old)
<i>haloperidol TABS 0.5 MG, 1 MG, 2 MG, 5 MG, 10 MG</i>	P	QL(3 ea daily)	Phenothiazines		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>chlorpromazine hcl TABS 25 MG, 50 MG, 100 MG, 200 MG</i>	P	QL(3 ea daily)	ARISTADA 441 MG/1.6ML	P	QL(1.6 ml per 28 day(s) retail); SP; PA
<i>chlorpromazine hcl TABS 10 MG</i>	P	QL(10 ea daily)	ARISTADA INITIO	P	QL(2.5 ml per fill retail); 1 max fill(s) per 180 day(s) retail; SP; PA
<i>fluphenazine decanoate</i>	P		Thioxanthenes		
<i>fluphenazine hcl TABS</i>	P		<i>thiothixene</i>	P	QL(3 ea daily)
<i>perphenazine TABS</i>	P	QL(4 ea daily)	ANTISEPTICS & DISINFECTANTS		
<i>prochlorperazine</i>	P		Antiseptics & Disinfectants		
<i>prochlorperazine maleate TABS</i>	P		<i>formaldehyde SOLN 10 %</i>	P	QL(90 ml per fill retail)
<i>thioridazine hcl</i>	P	QL(3 ea daily)	ANTIVIRALS - Drugs to Treat Viral Infections		
<i>trifluoperazine hcl TABS</i>	P	QL(2 ea daily)	Antiretrovirals		
Quinolinone Derivatives			<i>abacavir sulfate-lamivudine</i>	P	QL(1 ea daily)
ABILIFY MAINTENA PRSY	P	QL(1 ea per 28 day(s) retail); SP; PA	<i>abacavir sulfate SOLN</i>	P	QL(30 ml daily)
ABILIFY MAINTENA SRER	P	QL(1 ea per 28 day(s) retail); SP; PA	<i>abacavir sulfate TABS</i>	P	QL(2 ea daily)
ABILIFY TABS (<i>aripiprazole</i>)	NP	QL(1 ea daily); AL(At least 6 yrs old)	APTIVUS CAPS	P	QL(4 ea daily); ST
<i>aripiprazole SOLN OR</i>	P	QL(750 ml per 31 day(s) retail); AL(At least 6 yrs old); PA	<i>atazanavir sulfate CAPS 300 MG</i>	P	
<i>aripiprazole TABS</i>	P	QL(1 ea daily); AL(At least 6 yrs old)	<i>atazanavir sulfate CAPS 150 MG, 200 MG</i>	P	QL(2 ea daily)
<i>aripiprazole TBDP</i>	P	QL(1 ea daily); AL(At least 6 yrs old); PA	BIKTARVY	P	QL(1 ea daily)
ARISTADA 1064 MG/3.9ML	P	QL(4 ml per fill retail); 1 max fill(s) per 56 day(s) retail; SP; PA	CIMDUO	P	QL(1 ea daily); ST
ARISTADA 882 MG/3.2ML	P	QL(3.2 ml per 28 day(s) retail); SP; PA	COMPLERA	P	QL(1 ea daily)
ARISTADA 662 MG/2.4ML	P	QL(2.4 ml per 28 day(s) retail); SP; PA	<i>darunavir TABS 600 MG</i>	P	QL(2 ea daily); ST
			<i>darunavir TABS 800 MG</i>	P	QL(1 ea daily); ST
			DELSTRIGO	P	QL(1 ea daily)
			DESCOVY	P	QL(1 ea daily); PA
			DOVATO	P	QL(1 ea daily)
			EDURANT	P	QL(1 ea daily)
			<i>efavirenz CAPS 200 MG</i>	P	QL(1 ea daily)
			<i>efavirenz CAPS 50 MG</i>	P	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	P	QL(1 ea daily)	KALETRA SOLN (<i>lopinavir-ritonavir</i>)	NP	QL(16 ml daily)
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	P	QL(1 ea daily)	KALETRA TABS 50 MG-200 MG (<i>lopinavir-ritonavir</i>)	NP	QL(6 ea daily)
<i>efavirenz TABS</i>	P	QL(1 ea daily)	KALETRA TABS 25 MG-100 MG (<i>lopinavir-ritonavir</i>)	NP	QL(4 ea daily)
<i>emtricitabine CAPS</i>	P	QL(1 ea daily)	<i>lamivudine SOLN</i>	P	QL(30 ml daily)
<i>emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG</i>	P	QL(1 ea daily)	<i>lamivudine TABS 150 MG</i>	P	QL(2 ea daily)
EMTRIVA CAPS (<i>emtricitabine</i>)	NP	QL(1 ea daily)	<i>lamivudine TABS 300 MG</i>	P	QL(1 ea daily)
EMTRIVA SOLN	P	QL(24 ml daily)	LEXIVA SUSP	P	QL(56 ml daily)
EPIVIR SOLN (<i>lamivudine</i>)	NP	QL(30 ml daily)	LEXIVA TABS (<i>fosamprenavir calcium</i>)	NP	QL(4 ea daily)
EPIVIR TABS 150 MG (<i>lamivudine</i>)	NP	QL(2 ea daily)	<i>lopinavir-ritonavir SOLN</i>	P	QL(16 ml daily)
EPIVIR TABS 300 MG (<i>lamivudine</i>)	NP	QL(1 ea daily)	<i>lopinavir-ritonavir TABS 25 MG-100 MG</i>	P	QL(4 ea daily)
EPZICOM (<i>abacavir sulfate-lamivudine</i>)	NP	QL(1 ea daily)	<i>lopinavir-ritonavir TABS 50 MG-200 MG</i>	P	QL(6 ea daily)
<i>etravirine 100 MG</i>	P	QL(4 ea daily)	<i>maraviroc TABS 150 MG</i>	P	QL(2 ea daily)
<i>etravirine 200 MG</i>	P	QL(2 ea daily)	<i>maraviroc TABS 300 MG</i>	P	QL(4 ea daily)
EVOTAZ	P	QL(1 ea daily)	<i>nevirapine SUSP</i>	P	QL(40 ml daily)
<i>fosamprenavir calcium TABS</i>	P	QL(4 ea daily)	<i>nevirapine TABS</i>	P	QL(2 ea daily)
GENVOYA	P	QL(1 ea daily)	<i>nevirapine TB24 100 MG</i>	P	QL(3 ea daily)
INTELENCE 200 MG (<i>etravirine</i>)	NP	QL(2 ea daily)	<i>nevirapine TB24 400 MG</i>	P	QL(1 ea daily)
INTELENCE 100 MG (<i>etravirine</i>)	NP	QL(4 ea daily)	NORVIR CAPS	P	QL(12 ea daily)
INTELENCE 25 MG	P	QL(4 ea daily)	NORVIR SOLN	P	QL(15 ml daily)
ISENTRESS CHEW 25 MG	P	QL(12 ea daily)	NORVIR TABS (<i>ritonavir</i>)	NP	QL(12 ea daily)
ISENTRESS CHEW 100 MG	P	QL(6 ea daily)	ODEFSEY	P	
ISENTRESS PACK	P	QL(2 ea daily)	PIFELTRO	P	QL(1 ea daily)
ISENTRESS TABS	P	QL(2 ea daily)	PREZCOBIX	P	QL(1 ea daily)
JULUCA	P	QL(1 ea daily)	PREZISTA SUSP	P	QL(12 ml daily); ST
			PREZISTA TABS 600 MG (<i>darunavir</i>)	NP	QL(2 ea daily); ST
			PREZISTA TABS 800 MG (<i>darunavir</i>)	NP	QL(1 ea daily); ST
			PREZISTA TABS 150 MG	P	QL(3 ea daily); ST
			PREZISTA TABS 75 MG	P	QL(2 ea daily); ST

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
RETROVIR CAPS <i>(zidovudine)</i>	NP	QL(6 ea daily)	TYBOST	P	QL(1 ea daily); AL(At least 18 yrs old)
RETROVIR SYRP <i>(zidovudine)</i>	NP	QL(60 ml daily)	VIRACEPT TABS 250 MG	P	QL(9 ea daily)
REYATAZ CAPS 300 MG <i>(atazanavir sulfate)</i>	NP		VIRACEPT TABS 625 MG	P	QL(4 ea daily)
REYATAZ CAPS 200 MG <i>(atazanavir sulfate)</i>	NP	QL(2 ea daily)	VIREAD POWD	P	QL(8 gm daily)
REYATAZ PACK <i>ritonavir TABS</i>	P	QL(6 ea daily)	VIREAD TABS 150 MG, 200 MG, 250 MG	P	QL(1 ea daily)
<i>ritonavir TABS</i>	P	QL(12 ea daily)	VIREAD TABS <i>(tenofovir disoproxil fumarate)</i>	NP	QL(1 ea daily)
RUKOBIA	P	PA	ZIAGEN SOLN <i>(abacavir sulfate)</i>	NP	QL(30 ml daily)
SELZENTRY SOLN	P	QL(35 ml daily)	ZIAGEN TABS <i>(abacavir sulfate)</i>	NP	QL(2 ea daily)
SELZENTRY TABS 300 MG <i>(maraviroc)</i>	NP	QL(4 ea daily)	<i>zidovudine CAPS</i>	P	QL(6 ea daily)
SELZENTRY TABS 150 MG <i>(maraviroc)</i>	NP	QL(2 ea daily)	<i>zidovudine SYRP</i>	P	QL(60 ml daily)
<i>stavudine CAPS</i>	P	QL(2 ea daily)	<i>zidovudine TABS</i>	P	QL(2 ea daily)
STRIBILD	P	QL(1 ea daily)	Antiviral Combinations		
SUSTIVA CAPS 200 MG <i>(efavirenz)</i>	NP	QL(1 ea daily)	PAXLOVID 100 MG-150 MG	P	
SUSTIVA CAPS 50 MG <i>(efavirenz)</i>	NP	QL(2 ea daily)	CMV Agents		
SUSTIVA TABS <i>(efavirenz)</i>	NP	QL(1 ea daily)	VALCYTE TABS <i>(valganciclovir hcl)</i>	NP	QL(2 ea daily)
SYMFI <i>(efavirenz-lamivudine-tenofovir disoproxil fumarate)</i>	NP	QL(1 ea daily)	<i>valganciclovir hcl TABS</i>	P	QL(2 ea daily)
SYMFI LO <i>(efavirenz-lamivudine-tenofovir disoproxil fumarate)</i>	NP	QL(1 ea daily)	Hepatitis Agents		
<i>tenofovir disoproxil fumarate TABS</i>	P	QL(1 ea daily)	MAVYRET PACK	P	QL(6 ea daily); SP; PA
TIVICAY TABS 50 MG	P		MAVYRET TABS	P	QL(3 ea daily); SP; PA
TRIUMEQ TABS	P	QL(1 ea daily); AL(At least 18 yrs old)	SOFOSBUVIR/VELPATA SVIR TABS	P	QL(1 ea daily); SP; PA
TRIZIVIR	P	QL(2 ea daily)	VEMLIDY	P	SP; PA
TRUVADA 200 MG-300 MG <i>(emtricitabine-tenofovir disoproxil fumarate)</i>	NP	QL(1 ea daily)	Herpes Agents		
			<i>acyclovir CAPS</i>	P	QL(50 ea per 31 day(s) retail)
			<i>acyclovir SUSP</i>	P	QL(400 ml per 31 day(s) retail)
			<i>acyclovir TABS OR 800 MG</i>	P	QL(50 ea per 31 day(s) retail)

Drug Name	Drug Tier	Requirements/Limits
<i>acyclovir TABS OR 400 MG</i>	P	QL(3 ea daily)
<i>famciclovir</i>	P	
<i>valacyclovir hcl 1 GM, 1000 MG</i>	P	QL(42 ea per 21 day(s) retail)
<i>valacyclovir hcl 500 MG</i>	P	QL(2 ea daily)
VALTREX 500 MG (<i>valacyclovir hcl</i>)	NP	QL(2 ea daily)
VALTREX 1 GM (<i>valacyclovir hcl</i>)	NP	QL(42 ea per 21 day(s) retail)
ZOVIRAX SUSP (<i>acyclovir</i>)	NP	QL(400 ml per 31 day(s) retail)
Influenza Agents		
<i>oseltamivir phosphate CAPS 45 MG, 75 MG</i>	P	QL(10 ea per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail
<i>oseltamivir phosphate CAPS 30 MG</i>	P	QL(20 ea per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail
<i>oseltamivir phosphate SUSR</i>	P	QL(120 ml per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail
RELENZA DISKHALER	P	1 package(s) per 31 day(s) retail; AL(At least 5 yrs old)
TAMIFLU CAPS 30 MG (<i>oseltamivir phosphate</i>)	NP	QL(20 ea per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail
TAMIFLU CAPS 45 MG, 75 MG (<i>oseltamivir phosphate</i>)	NP	QL(10 ea per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail
TAMIFLU SUSR (<i>oseltamivir phosphate</i>)	NP	QL(120 ml per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail

Drug Name	Drug Tier	Requirements/Limits
BETA BLOCKERS - Drugs to Treat High Blood Pressure		
Alpha-Beta Blockers		
<i>carvedilol 3.125 MG, 6.25 MG, 12.5 MG</i>	P	QL(2 ea daily)
<i>carvedilol 25 MG</i>	P	QL(4 ea daily)
<i>carvedilol phosphate</i>	P	QL(1 ea daily)
COREG 25 MG (<i>carvedilol</i>)	NP	QL(4 ea daily)
COREG 3.125 MG, 6.25 MG, 12.5 MG (<i>carvedilol</i>)	NP	QL(2 ea daily)
COREG CR (<i>carvedilol phosphate</i>)	NP	QL(1 ea daily)
<i>labetalol hcl TABS 300 MG</i>	P	QL(8 ea daily)
<i>labetalol hcl TABS 100 MG</i>	P	QL(3 ea daily)
<i>labetalol hcl TABS 200 MG</i>	P	QL(6 ea daily)
Beta Blockers Cardio-Selective		
<i>acebutolol hcl CAPS</i>	P	
<i>atenolol TABS</i>	P	QL(2 ea daily)
<i>bisoprolol fumarate</i>	P	QL(1 ea daily)
LOPRESSOR TABS 100 MG (<i>metoprolol tartrate</i>)	NP	QL(4.5 ea daily)
LOPRESSOR TABS 50 MG (<i>metoprolol tartrate</i>)	NP	QL(4 ea daily)
<i>metoprolol succinate TB24 200 MG</i>	P	QL(2 ea daily)
<i>metoprolol succinate TB24 25 MG, 50 MG, 100 MG</i>	P	QL(4 ea daily)
<i>metoprolol tartrate TABS 100 MG</i>	P	QL(4.5 ea daily)
<i>metoprolol tartrate TABS 25 MG, 50 MG</i>	P	QL(4 ea daily)
TENORMIN TABS (<i>atenolol</i>)	NP	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TOPROL XL TB24 25 MG, 50 MG, 100 MG (metoprolol succinate)	NP	QL(4 ea daily)	CARDIZEM TABS 30 MG, 60 MG, 120 MG (diltiazem hcl)	NP	QL(3 ea daily)
TOPROL XL TB24 200 MG (metoprolol succinate)	NP	QL(2 ea daily)	diltiazem hcl coated beads CP24 240 MG	P	QL(2 ea daily)
Beta Blockers Non-Selective			diltiazem hcl coated beads CP24 120 MG, 180 MG, 300 MG	P	QL(1 ea daily)
BETAPACE AF (sotalol hcl (afib/af))	NP	QL(2 ea daily)	diltiazem hcl extended release beads 240 MG	P	QL(2 ea daily)
BETAPACE TABS 80 MG, 120 MG, 160 MG (sotalol hcl)	NP		diltiazem hcl extended release beads 120 MG, 180 MG, 300 MG, 360 MG, 420 MG	P	QL(1 ea daily)
CORGARD TABS 20 MG, 40 MG, 80 MG (nadolol)	NP	QL(2 ea daily)	diltiazem hcl CP12	P	QL(2 ea daily)
INDERAL LA CP24 (propranolol hcl)	NP	QL(2 ea daily)	diltiazem hcl CP24 240 MG	P	QL(2 ea daily)
nadolol TABS 20 MG, 40 MG, 80 MG	P	QL(2 ea daily)	diltiazem hcl CP24 120 MG, 180 MG	P	QL(1 ea daily)
pindolol TABS	P		diltiazem hcl TABS	P	QL(3 ea daily)
propranolol hcl CP24	P	QL(2 ea daily)	felodipine	P	QL(1 ea daily)
propranolol hcl SOLN OR 20 MG/5ML, 40 MG/5ML	P		nicardipine hcl CAPS	P	
propranolol hcl TABS	P		nifedipine CAPS	P	QL(4 ea daily)
sotalol hcl (afib/af)	P	QL(2 ea daily)	nifedipine TB24 30 MG, 90 MG	P	QL(1 ea daily)
sotalol hcl TABS	P		nifedipine TB24 60 MG	P	QL(2 ea daily)
timolol maleate TABS	P		NORVASC TABS (amlodipine besylate)	NP	QL(1 ea daily)
CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure			PROCARDIA XL TB24 30 MG, 90 MG (nifedipine)	NP	QL(1 ea daily)
Calcium Channel Blockers			PROCARDIA XL TB24 60 MG (nifedipine)	NP	QL(2 ea daily)
amlodipine besylate TABS	P	QL(1 ea daily)	TIAZAC 120 MG, 180 MG, 300 MG, 360 MG, 420 MG (diltiazem hcl extended release beads)	NP	QL(1 ea daily)
CALAN SR TBCR (verapamil hcl)	NP	QL(2 ea daily)	TIAZAC 240 MG (diltiazem hcl extended release beads)	NP	QL(2 ea daily)
CARDIZEM CD CP24 120 MG, 180 MG, 300 MG (diltiazem hcl coated beads)	NP	QL(1 ea daily)	verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG	P	QL(1 ea daily)
CARDIZEM CD CP24 240 MG (diltiazem hcl coated beads)	NP	QL(2 ea daily)	verapamil hcl TABS	P	QL(3 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>verapamil hcl TBCR</i>	P	QL(2 ea daily)
VERELAN CP24 (<i>verapamil hcl</i>)	NP	QL(1 ea daily)
CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm		
Cardiac Glycosides		
<i>digoxin SOLN OR 0.05 MG/ML</i>	P	
<i>digoxin TABS 0.125 MG, 0.25 MG, 125 MCG, 250 MCG</i>	P	
LANOXIN TABS 125 MCG, 250 MCG (<i>digoxin</i>)	NP	
CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions		
Pulmonary Hypertension - Prostacyclin Receptor Agonist		
UPTRAVI TITRATION PACK TBPB	P	SP; PA
UPTRAVI SOLR	P	SP; PA
UPTRAVI TABS	P	SP; PA
Transthyretin Stabilizers		
VYNDAMAX	P	SP; PA
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporins - 1st Generation		
<i>cefadroxil CAPS</i>	P	
<i>cefadroxil SUSR</i>	P	
<i>cefadroxil TABS</i>	P	
<i>cephalexin CAPS 250 MG, 500 MG</i>	P	
<i>cephalexin SUSR</i>	P	
Cephalosporins - 2nd Generation		
<i>cefaclor CAPS</i>	P	

Drug Name	Drug Tier	Requirements/Limits
<i>cefaclor SUSR 125 MG/5ML, 250 MG/5ML, 375 MG/5ML</i>	P	
<i>cefprozil SUSR 125 MG/5ML</i>	P	2 package(s) per fill retail; AL(Up to 12 yrs old)
<i>cefprozil SUSR 250 MG/5ML</i>	P	1 package(s) per fill retail; AL(Up to 12 yrs old)
<i>cefprozil TABS</i>	P	QL(20 ea per fill retail)
<i>cefuroxime axetil TABS</i>	P	QL(20 ea per fill retail)
Cephalosporins - 3rd Generation		
<i>cefdinir CAPS</i>	P	QL(20 ea per fill retail)
<i>cefdinir SUSR</i>	P	1 package(s) per fill retail
<i>cefixime CAPS</i>	P	
<i>ceftriaxone sodium IJ 1 GM, 250 MG, 500 MG</i>	P	QL(3 ea per fill retail); 1 max fill(s) per 31 day(s) retail
CHEMICALS		
Bulk Chemicals - H's		
HYDROXYUREA	P	
CONTRACEPTIVES - Drugs to Prevent Pregnancy		
Combination Contraceptives - Oral		
<i>desogestrel & ethinyl estradiol</i>	P	
<i>desogestrel-ethinyl estradiol (biphasic)</i>	P	
<i>desogestrel-ethinyl estradiol (triphasic)</i>	P	
<i>drospirenone-ethinyl estradiol 0.03 MG-3 MG</i>	P	
<i>drospirenone-ethinyl estradiol 0.02 MG-3 MG</i>	P	QL(1 ea daily)
<i>ethynodiol diacet & eth estrad 35 MCG-1 MG</i>	P	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>ethynodiol diacet & eth estrad 50 MCG-1 MG</i>	P	QL(1 ea daily)	YAZ (<i>drospirenone-ethinyl estradiol</i>)	NP	QL(1 ea daily)
GENERESS FE (<i>norethindrone & ethinyl estradiol-fe</i>)	NP		Combination Contraceptives - Transdermal		
<i>levonorgestrel & eth estradiol TABS</i>	P		<i>norelgestromin-ethinyl estradiol</i>	P	
<i>levonorgestrel-eth estradiol (triphasic)</i>	P		Combination Contraceptives - Vaginal		
<i>levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG</i>	P		<i>etonogestrel-ethinyl estradiol</i>	P	QL(6 ea per fill retail)
MIRCETTE (<i>desogestrel-ethinyl estradiol (biphasic)</i>)	NP		NUVARING (<i>etonogestrel-ethinyl estradiol</i>)	NP	QL(6 ea per fill retail)
<i>norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG</i>	P		Emergency Contraceptives		
<i>norethindrone & eth estradiol</i>	P		ELLA	P	QL(4 ea per 365 day(s) retail)
<i>norethindrone & ethinyl estradiol-fe</i>	P		<i>levonorgestrel (emergency oc) 1.5 MG</i>	P	QL(1 ea per 21 day(s) retail); 4 max fill(s) per 365 day(s) retail
<i>norethindrone acet & eth estra</i>	P		PLAN B ONE-STEP (<i>levonorgestrel (emergency oc)</i>)	NP	QL(1 ea per 21 day(s) retail); 4 max fill(s) per 365 day(s) retail
<i>norethindrone acetate-ethinyl estradiol-fe</i>	P		Progestin Contraceptives - Injectable		
<i>norethindrone-eth estradiol (triphasic)</i>	P		DEPO-PROVERA CONTRACEPTIVE SUSP IM (<i>medroxyprogesterone acetate (contraceptive)</i>)	NP	QL(1 ml per fill retail)
<i>norgestimate-ethinyl estradiol</i>	P		DEPO-PROVERA CONTRACEPTIVE SUSY IM (<i>medroxyprogesterone acetate (contraceptive)</i>)	NP	QL(1 ml per fill retail)
<i>norgestimate-ethinyl estradiol (triphasic)</i>	P		DEPO-SUBQ PROVERA 104 SUSY SC	P	QL(1 ml per fill retail)
<i>norgestrel & ethinyl estradiol 30 MCG-0.3 MG</i>	P	QL(2 ea daily)	<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	P	QL(1 ml per fill retail)
SEASONIQUE (<i>levonorgestrel-ethinyl estradiol (91-day)</i>)	NP		<i>medroxyprogesterone acetate (contraceptive) SUSY IM</i>	P	QL(1 ml per fill retail)
TYBLUME CHEW	P		Progestin Contraceptives - Oral		
YASMIN 28 (<i>drospirenone-ethinyl estradiol</i>)	NP				

Drug Name	Drug Tier	Requirements/Limits
<i>norethindrone (contraceptive)</i>	P	
CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions		
Glucocorticosteroids		
CORTEF TABS <i>(hydrocortisone)</i>	NP	
CORTISONE ACETATE TABS	P	
<i>dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML</i>	P	QL(150 ml per 31 day(s) retail)
<i>dexamethasone sodium phosphate SOSY IJ 4 MG/ML</i>	P	QL(150 ml per 31 day(s) retail)
<i>dexamethasone ELIX</i>	P	
<i>dexamethasone SOLN</i>	P	
<i>dexamethasone TABS</i>	P	
<i>hydrocortisone TABS</i>	P	
MEDROL DOSEPAK TBPK <i>(methylprednisolone)</i>	NP	
MEDROL TABS 4 MG, 8 MG <i>(methylprednisolone)</i>	NP	
<i>methylprednisolone TABS 4 MG, 8 MG</i>	P	
<i>methylprednisolone TBPK</i>	P	
PEDIAPRED SOLN <i>(prednisolone sodium phosphate)</i>	NP	
<i>prednisolone sodium phosphate SOLN 5 MG/5ML, 6.7 MG/5ML, 15 MG/5ML</i>	P	
<i>prednisolone sodium phosphate SOLN 20 MG/5ML</i>	P	QL(150 ml per fill retail)
<i>prednisolone SOLN</i>	P	
<i>prednisolone TABS</i>	P	

Drug Name	Drug Tier	Requirements/Limits
PREDNISONE INTENSOL CONC	P	
<i>prednisone SOLN</i>	P	
<i>prednisone TABS</i>	P	
<i>prednisone TBPK</i>	P	
Mineralocorticoids		
<i>fludrocortisone acetate TABS</i>	P	
COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms		
Antitussives		
<i>benzonatate 100 MG</i>	P	QL(6 ea daily); AL(At least 10 yrs old)
<i>benzonatate 200 MG</i>	P	QL(3 ea daily); 1 max fill(s) per 31 day(s) retail; AL(At least 10 yrs old)
DELSYM COUGH CHILDRENS SUER <i>(dextromethorphan polistirex)</i>	NP	QL(240 ml per 6 day(s) retail)
DELSYM SUER <i>(dextromethorphan polistirex)</i>	NP	QL(240 ml per 6 day(s) retail)
<i>dextromethorphan hbr LIQD 7.5 MG/5ML</i>	P	QL(240 ml per 6 day(s) retail)
<i>dextromethorphan polistirex LQCR</i>	P	QL(240 ml per 6 day(s) retail)
<i>dextromethorphan polistirex SUER</i>	P	QL(240 ml per 6 day(s) retail)
HYCODAN SOLN <i>(hydrocodone bitartrate-homatropine methylbromide)</i>	NP	AL(At least 18 yrs old)
<i>hydrocodone bitartrate-homatropine methylbromide SOLN</i>	P	AL(At least 18 yrs old)
TRIAMINIC LONG ACTING COUGH LIQD <i>(dextromethorphan hbr)</i>	NP	QL(240 ml per 6 day(s) retail)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Cough/Cold/Allergy Combinations			ED BRON GP LIQD	P	QL(240 ml per 6 day(s) retail)
<i>brompheniramine & phenyleph ELIX</i>	P	QL(120 ml per fill retail); 1 max fill(s) per 31 day(s) retail	<i>guaifenesin-codeine SOLN</i>	P	
<i>brompheniramine & pseudoeph ELIX</i>	P	QL(120 ml per fill retail); 1 max fill(s) per 31 day(s) retail	<i>guaifenesin-codeine SYRP</i>	P	
<i>brompheniramine & pseudoeph LIQD 15 MG/5ML-1 MG/5ML</i>	P	QL(120 ml per fill retail); 1 max fill(s) per 31 day(s) retail	LOHIST-D LIQD	P	
<i>cetirizine-pseudoephedrine</i>	P	QL(2 ea daily)	<i>loratadine & pseudoephedrine TB12</i>	P	QL(2 ea daily)
COLD & FLU RELIEF NIGHTTIME D LIQD	P		<i>loratadine & pseudoephedrine TB24</i>	P	QL(1 ea daily)
<i>dextromethorphan-doxylamine-acetaminophen LIQD</i>	P		MAXI-TUSS PE MAX LIQD	P	QL(240 ml per 6 day(s) retail)
<i>dextromethorphan-guaifenesin LIQD 100 MG/5ML-10 MG/5ML, 150 MG/7.5ML-15 MG/7.5ML, 200 MG/10ML-20 MG/10ML, 200 MG/5ML-10 MG/5ML</i>	P	QL(240 ml per fill retail)	MAXI-TUSS PE LIQD	P	
<i>dextromethorphan-guaifenesin LIQD 100 MG/5ML-5 MG/5ML, 200 MG/5ML-200 MG/5ML-30 MG/5ML, 200 MG/5ML-30 MG/5ML, 400 MG/20ML-20 MG/20ML</i>	P		MUCINEX D MAXIMUM STRENGTH TB12 (<i>pseudoephedrine-guaifenesin</i>)	NP	
<i>dextromethorphan-guaifenesin SYRP 100 MG/5ML-10 MG/5ML, 100 MG/5ML-100 MG/5ML-10 MG/5ML</i>	P	QL(240 ml per fill retail)	MUCINEX DM TB12 (<i>dextromethorphan-guaifenesin</i>)	NP	QL(2 ea daily)
<i>dextromethorphan-guaifenesin TB12 600 MG-30 MG</i>	P	QL(2 ea daily)	MUCINEX D TB12 (<i>pseudoephedrine-guaifenesin</i>)	NP	QL(210 ea per fill retail)
<i>dextromethorphan-phenylephrine-acetaminophen CAPS</i>	P		<i>phenylephrine-chlorphen-dm LIQD 10 MG/5ML-4 MG/5ML-15 MG/5ML</i>	P	QL(240 ml per fill retail)
			<i>phenylephrine-dm LIQD 2.5 MG/5ML-5 MG/5ML</i>	P	QL(240 ml per fill retail)
			<i>phenylephrine-dm SOLN</i>	P	QL(240 ml per fill retail)
			<i>promethazine & phenylephrine SYRP</i>	P	QL(240 ml per 6 day(s) retail); AL(At least 2 yrs old)
			<i>promethazine w/codeine SOLN</i>	P	QL(240 ml per fill retail); AL(At least 18 yrs old)
			<i>promethazine w/codeine SYRP</i>	P	QL(240 ml per fill retail); AL(At least 18 yrs old)
			<i>promethazine-dm SYRP</i>	P	QL(240 ml per fill retail); AL(At least 2 yrs old)

Drug Name	Drug Tier	Requirements/Limits
<i>promethazine-phenylephrine-codeine</i>	P	QL(240 ml per fill retail); AL(At least 18 yrs old)
<i>pseudoephed-bromphen-dm SYRP 10 MG/5ML-30 MG/5ML-2 MG/5ML</i>	P	QL(240 ml per fill retail)
<i>pseudoephedrine w/ dm-gg LIQD 100 MG/5ML-30 MG/5ML-10 MG/5ML</i>	P	QL(240 ml per 6 day(s) retail)
<i>pseudoephedrine-guaifenesin SYRP 100 MG/5ML-30 MG/5ML</i>	P	
<i>pseudoephedrine-guaifenesin TB12 600 MG-60 MG</i>	P	QL(210 ea per fill retail)
<i>pseudoephedrine-guaifenesin TB12 1200 MG-120 MG</i>	P	
<i>pseudoephedrine-ibuprofen TABS</i>	P	
PX DAYTIME MULTI-SYMPTOM CAPS	P	
PX NITETIME MULTI-SYMPTOM CAPS	P	
SCOT-TUSSIN DM LIQD	P	
Expectorants		
GERI-TUSSIN SYRP	P	QL(240 ml per 6 day(s) retail)
<i>guaifenesin TB12 600 MG</i>	P	QL(40 ea per fill retail); 1 max fill(s) per 31 day(s) retail
<i>guaifenesin TB12 1200 MG</i>	P	
MUCINEX MAXIMUM STRENGTH TB12 (<i>guaifenesin</i>)	NP	
MUCINEX TB12 (<i>guaifenesin</i>)	NP	QL(40 ea per fill retail); 1 max fill(s) per 31 day(s) retail
<i>potassium iodide (expectorant) SOLN</i>	P	

Drug Name	Drug Tier	Requirements/Limits
SSKI SOLN (<i>potassium iodide (expectorant)</i>)	NP	
Misc. Respiratory Inhalants		
<i>sodium chloride (inhalant) AERS</i>	P	QL(240 ml per fill retail)
<i>sodium chloride (inhalant) NEBU 0.9 %, 3 %, 10 %</i>	P	
Mucolytics		
<i>acetylcysteine SOLN</i>	P	
DERMATOLOGICALS - Drugs to Treat Skin Conditions		
Acne Products		
ABSORICA 10 MG, 20 MG, 30 MG, 40 MG (<i>isotretinoin</i>)	NP	QL(2 ea daily); AL(At least 12 yrs old); PA
ACNE MEDICATION 10 LOTN	P	
ACNE MEDICATION 5 LOTN	P	
BENZAC AC WASH LIQD 5 % (<i>benzoyl peroxide</i>)	NP	RX/OTC
<i>benzoyl peroxide BAR</i>	P	
<i>benzoyl peroxide GEL 2.5 %, 5 %, 10 %</i>	P	
<i>benzoyl peroxide LIQD 4 %, 5 %, 10 %</i>	P	
CLEOCIN-T LOTN (<i>clindamycin phosphate (topical)</i>)	NP	
CLINDAGEL GEL (<i>clindamycin phosphate (topical)</i>)	NP	QL(60 ml per fill retail)
<i>clindamycin phosphate (topical) GEL</i>	P	QL(60 gm per fill retail)
<i>clindamycin phosphate (topical) LOTN</i>	P	
<i>clindamycin phosphate (topical) SOLN</i>	P	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DIFFERIN DAILY DEEP CLEANSER LIQD (benzoyl peroxide)	NP	RX/OTC	<i>bacitracin zinc OINT</i>	P	1 package(s) per fill retail
ERYGEL GEL (erythromycin (acne aid))	NP	1 package(s) per fill retail	CENTANY OINT	P	QL(30 gm per 31 day(s) retail)
<i>erythromycin (acne aid) GEL</i>	P	1 package(s) per fill retail	<i>gentamicin sulfate (topical) CREA</i>	P	QL(1 gm daily; 30 gm per fill retail)
<i>erythromycin (acne aid) SOLN</i>	P		<i>gentamicin sulfate (topical) OINT</i>	P	QL(1 gm daily; 30 gm per fill retail)
<i>isotretinoin 10 MG, 20 MG, 30 MG, 40 MG</i>	P	QL(2 ea daily); AL(At least 12 yrs old); PA	<i>mupirocin calcium (topical)</i>	P	1 package(s) per 31 day(s) retail
KLARON (<i>sulfacetamide sodium (acne)</i>)	NP	QL(118 ml per fill retail)	<i>mupirocin OINT</i>	P	QL(30 gm per 31 day(s) retail)
RETIN-A CREA (<i>tretinoin</i>)	NP	QL(20 gm per fill retail); AL(Up to 35 yrs old)	<i>neomycin-bacitracin-polymyxin OINT</i>	P	QL(60 gm per 31 day(s) retail)
RETIN-A GEL 0.025 % (<i>tretinoin</i>)	NP	AL(Up to 35 yrs old)	<i>neomycin-polymyxin w/ pramoxine</i>	P	1 package(s) per fill retail
<i>sulfacetamide sodium (acne)</i>	P	QL(118 ml per fill retail)	NEOSPORIN ORIGINAL OINT (<i>neomycin-bacitracin-polymyxin</i>)	NP	QL(60 ea per 31 day(s) retail)
<i>sulfacetamide sodium w/ sulfur LOTN 10 %-5 %</i>	P	1 package(s) per 31 day(s) retail	NEOSPORIN PLUS PAIN RELIEF MAXIMUM STRENGTH (<i>neomycin-polymyxin w/ pramoxine</i>)	NP	1 package(s) per fill retail
<i>sulfacetamide sodium w/ sulfur SUSP 10 %-5 %</i>	P	1 package(s) per fill retail; 1 max fill(s) per 30 day(s) retail	Antifungals - Topical		
<i>tretinoin CREA 0.025 %, 0.05 %, 0.1 %</i>	P	QL(20 gm per fill retail); AL(Up to 35 yrs old)	<i>clotrimazole (topical) CREA</i>	P	QL(60 gm per 31 day(s) retail); RX/OTC
<i>tretinoin GEL 0.01 %</i>	P	QL(45 gm per fill retail); AL(Up to 35 yrs old)	<i>clotrimazole (topical) SOLN</i>	P	1 package(s) per fill retail; RX/OTC
<i>tretinoin GEL 0.01 %</i>	P	QL(30 gm per fill retail); AL(Up to 35 yrs old)	<i>clotrimazole w/ betamethasone CREA</i>	P	QL(45 gm per 31 day(s) retail)
<i>tretinoin GEL 0.025 %</i>	P	AL(Up to 35 yrs old)	<i>clotrimazole w/ betamethasone LOTN</i>	P	QL(31 ml per 31 day(s) retail)
Antibiotics - Topical			<i>econazole nitrate CREA</i>	P	QL(30 gm per fill retail)
<i>bacitracin (topical) OINT</i>	P	1 package(s) per fill retail	<i>ketoconazole (topical) CREA</i>	P	1 package(s) per 31 day(s) retail
			<i>ketoconazole (topical) SHAM 2 %</i>	P	QL(120 ml per fill retail)

Drug Name	Drug Tier	Requirements/Limits
LAMISIL AT JOCK ITCH CREA (<i>terbinafine hcl (topical)</i>)	NP	
LAMISIL AT CREA (<i>terbinafine hcl (topical)</i>)	NP	
LOTRIMIN AF JOCK ITCH CREA (<i>clotrimazole (topical)</i>)	NP	QL(60 gm per 31 day(s) retail); RX/OTC
LOTRIMIN AF CREA (<i>clotrimazole (topical)</i>)	NP	QL(60 gm per 31 day(s) retail); RX/OTC
MICATIN CREA (<i>miconazole nitrate (topical)</i>)	NP	QL(200 gm per 31 day(s) retail)
<i>miconazole nitrate (topical) CREA</i>	P	QL(200 gm per 31 day(s) retail)
NIZORAL SHAM	P	
<i>nystatin (topical) CREA</i>	P	1 package(s) per 31 day(s) retail
<i>nystatin (topical) OINT</i>	P	1 package(s) per fill retail
<i>nystatin (topical) POWD EX</i>	P	1 package(s) per 31 day(s) retail
<i>nystatin-triamcinolone CREA</i>	P	1 package(s) per fill retail
<i>nystatin-triamcinolone OINT</i>	P	1 package(s) per fill retail
<i>terbinafine hcl (topical) CREA</i>	P	
TINACTIN CREA (<i>tolnaftate</i>)	NP	QL(30 gm per fill retail)
<i>tolnaftate CREA</i>	P	QL(30 gm per fill retail)
Antihistamines-Topical		
ITCH RELIEF CREA	P	
Anti-inflammatory Agents - Topical		
<i>diclofenac sodium (topical) GEL EX</i>	P	QL(6.68 gm daily); RX/OTC
VOLTAREN ARTHRITIS PAIN GEL EX (<i>diclofenac sodium (topical)</i>)	NP	QL(6.68 gm daily); RX/OTC

Drug Name	Drug Tier	Requirements/Limits
Antineoplastic or Premalignant Lesion Agents - Topical		
CARAC CREA (<i>fluorouracil (topical)</i>)	NP	
EFUDEX CREA (<i>fluorouracil (topical)</i>)	NP	QL(40 gm per 31 day(s) retail)
<i>fluorouracil (topical) CREA 0.5 %</i>	P	
<i>fluorouracil (topical) CREA 5 %</i>	P	QL(40 gm per 31 day(s) retail)
<i>fluorouracil (topical) SOLN</i>	P	QL(10 ml per 31 day(s) retail)
Antipruritics - Topical		
<i>camphor & menthol LOTN</i>	P	1 package(s) per fill retail
SARNA LOTN (<i>camphor & menthol</i>)	NP	1 package(s) per fill retail
Antipsoriatics		
<i>calcipotriene CREA</i>	P	1 package(s) per fill retail; 1 max fill(s) per 31 day(s) retail
<i>calcipotriene SOLN</i>	P	1 package(s) per fill retail; 1 max fill(s) per 31 day(s) retail
DOVONEX CREA (<i>calcipotriene</i>)	NP	1 package(s) per fill retail; 1 max fill(s) per 31 day(s) retail
SILIQ	P	SP; PA
TALTZ SOAJ	P	SP; PA
TALTZ SOSY	P	SP; PA
<i>tazarotene CREA</i>	P	1 package(s) per fill retail; AL(Up to 18 yrs old)
<i>tazarotene GEL</i>	P	1 package(s) per fill retail; AL(Up to 18 yrs old)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TAZORAC CREA (tazarotene)	NP	1 package(s) per fill retail; AL(Up to 18 yrs old)	acyclovir topical CREA	P	1 package(s) per 31 day(s) retail
TAZORAC CREA	P	1 package(s) per fill retail; AL(Up to 18 yrs old)	acyclovir topical OINT	P	1 package(s) per fill retail
TAZORAC GEL (tazarotene)	NP	1 package(s) per fill retail; AL(Up to 18 yrs old)	ZOVIRAX CREA (acyclovir topical)	NP	1 package(s) per 31 day(s) retail
Antiseborrheic Products			ZOVIRAX OINT (acyclovir topical)	NP	1 package(s) per fill retail
OVACE PLUS WASH LIQD (sulfacetamide sodium)	NP		Burn Products		
OVACE WASH LIQD (sulfacetamide sodium)	NP		SILVADENE (silver sulfadiazine)	NP	
selenium sulfide LOTN 2.5 %	P	1 package(s) per fill retail; 1 max fill(s) per 30 day(s) retail	silver sulfadiazine	P	
selenium sulfide LOTN 1 %	P	1 package(s) per fill retail	Corticosteroids - Topical		
selenium sulfide SHAM 1 %	P	1 package(s) per fill retail	betamethasone dipropionate (topical) CREA	P	1 package(s) per 30 day(s) retail
SELSUN BLUE CARE MENS MAXIMUM STRENGTH LOTN (selenium sulfide)	NP	1 package(s) per fill retail	betamethasone dipropionate augmented CREA	P	1 package(s) per fill retail
SELSUN BLUE DAILY LOTN (selenium sulfide)	NP	1 package(s) per fill retail	betamethasone valerate CREA	P	
SELSUN BLUE MEDICATED LOTN (selenium sulfide)	NP	1 package(s) per fill retail	betamethasone valerate LOTN	P	
SELSUN BLUE MOISTURIZING LOTN (selenium sulfide)	NP	1 package(s) per fill retail	betamethasone valerate OINT	P	
SELSUN BLUE LOTN (selenium sulfide)	NP	1 package(s) per fill retail	clobetasol propionate emollient base 0.05 %	P	1 package(s) per fill retail
sulfacetamide sodium LIQD	P		clobetasol propionate CREA 0.05 %	P	1 package(s) per fill retail
Antivirals - Topical			clobetasol propionate GEL 0.05 %	P	1 package(s) per fill retail
			clobetasol propionate OINT 0.05 %	P	1 package(s) per fill retail
			clobetasol propionate SOLN 0.05 %	P	1 package(s) per fill retail
			desonide CREA	P	QL(2 gm daily)
			desonide OINT	P	QL(2 gm daily)
			DESOWEN CREA (desonide)	NP	QL(2 gm daily)

Drug Name	Drug Tier	Requirements/Limits
<i>desoximetasone CREA</i>	P	1 package(s) per fill retail
<i>desoximetasone CREA</i>	P	1 package(s) per fill retail
EPIFOAM FOAM	P	
<i>fluocinonide emulsified base</i>	P	1 package(s) per fill retail
<i>fluocinonide CREA 0.05 %</i>	P	1 package(s) per fill retail
<i>fluocinonide GEL</i>	P	1 package(s) per fill retail
<i>fluocinonide OINT</i>	P	1 package(s) per fill retail
<i>fluocinonide SOLN</i>	P	1 package(s) per fill retail
<i>fluticasone propionate CREA 0.05 %</i>	P	1 package(s) per 31 day(s) retail
<i>fluticasone propionate OINT</i>	P	1 package(s) per fill retail
<i>hydrocortisone (topical) CREA 0.5 %, 1 %</i>	P	1 package(s) per fill retail; RX/OTC
<i>hydrocortisone (topical) CREA 2.5 %</i>	P	QL(120 gm per 31 day(s) retail)
<i>hydrocortisone (topical) LOTN 1 %, 2.5 %</i>	P	1 package(s) per fill retail
<i>hydrocortisone (topical) OINT 1 %</i>	P	QL(2 gm daily); 1 package(s) per 31 day(s) retail; RX/OTC
<i>hydrocortisone (topical) OINT 2.5 %</i>	P	
<i>hydrocortisone butyrate SOLN</i>	P	
<i>mometasone furoate CREA</i>	P	1 package(s) per fill retail
<i>mometasone furoate OINT</i>	P	1 package(s) per fill retail
<i>mometasone furoate SOLN</i>	P	1 package(s) per fill retail
TEMOVATE CREA (<i>clobetasol propionate</i>)	NP	1 package(s) per fill retail
TEMOVATE OINT (<i>clobetasol propionate</i>)	NP	1 package(s) per fill retail

Drug Name	Drug Tier	Requirements/Limits
TOPICORT CREA (<i>desoximetasone</i>)	NP	1 package(s) per fill retail
TOPICORT CREA (<i>desoximetasone</i>)	NP	1 package(s) per fill retail
<i>triamcinolone acetonide (topical) CREA 0.5 %</i>	P	1 package(s) per fill retail
<i>triamcinolone acetonide (topical) CREA 0.025 %</i>	P	QL(30 gm per fill retail)
<i>triamcinolone acetonide (topical) CREA 0.1 %</i>	P	
<i>triamcinolone acetonide (topical) LOTN</i>	P	1 package(s) per fill retail
<i>triamcinolone acetonide (topical) OINT 0.1 %</i>	P	
<i>triamcinolone acetonide (topical) OINT 0.025 %, 0.5 %</i>	P	1 package(s) per fill retail
TRIDESILON CREA 0.05 % (<i>desonide</i>)	NP	QL(2 gm daily)
Emollient/Keratolytic Agents		
<i>urea CREA 40 %</i>	P	RX/OTC
<i>urea LOTN 40 %</i>	P	
Emollients		
EMOLLIENT LOTION - MISC	P	
<i>lactic acid (ammonium lactate) CREA</i>	P	QL(385 gm per 31 day(s) retail); RX/OTC
<i>lactic acid (ammonium lactate) LOTN 12 %</i>	P	QL(567 gm per 31 day(s) retail); RX/OTC
Immunomodulating Agents - Topical		
<i>imiquimod 5 %</i>	P	QL(48 ea per 180 day(s) retail)
Immunosuppressive Agents - Topical		
ELIDEL (<i>pimecrolimus</i>)	NP	QL(100 gm per 31 day(s) retail); AL(At least 2 yrs old); PA

Drug Name	Drug Tier	Requirements/Limits
<i>pimecrolimus</i>	P	QL(100 gm per 31 day(s) retail); AL(At least 2 yrs old); PA
<i>tacrolimus (topical) OINT 0.03 %</i>	P	QL(100 gm per 31 day(s) retail); AL(At least 2 yrs old); PA
<i>tacrolimus (topical) OINT 0.1 %</i>	P	QL(100 gm per 31 day(s) retail); AL(At least 16 yrs old); PA
Keratolytic/Antimitotic/Vesicant Agents		
DERMAREST PSORIASIS GEL	P	
KERALYT GEL	P	
KERALYT GEL (<i>salicylic acid</i>)	NP	
<i>podofilox SOLN</i>	P	
<i>salicylic acid GEL 6 %</i>	P	
Local Anesthetics - Topical		
<i>capsaicin CREA 0.025 %, 0.075 %, 0.1 %</i>	P	1 package(s) per fill retail
CAPZASIN-HP CREA (<i>capsaicin</i>)	NP	1 package(s) per fill retail
CAPZASIN-P CREA	P	1 package(s) per fill retail
CASTIVA WARMING LOTN	P	1 package(s) per fill retail
<i>dibucaine</i>	P	1 package(s) per fill retail
<i>lidocaine hcl CREA 3 %, 4 %</i>	P	1 package(s) per fill retail
<i>lidocaine hcl GEL 2 %</i>	P	QL(1 ml daily; 30 ml per fill retail)
<i>lidocaine CREA 4 %</i>	P	1 package(s) per fill retail
<i>lidocaine-prilocaine CREA</i>	P	1 package(s) per fill retail
LMX 4 CREA (<i>lidocaine</i>)	NP	1 package(s) per fill retail

Drug Name	Drug Tier	Requirements/Limits
RA ARTHRITIS PAIN RELIEF CREA	P	1 package(s) per fill retail
Misc. Topical		
BASIS FACIAL MOISTURIZER CREA	P	
BASIS OVERNIGHT CREA	P	
DRYSOL SOLN	P	
EUCERIN ORIGINAL HEALING CREA (<i>skin protectants, misc.</i>)	NP	
HYDROCERIN CREA	P	
<i>lanolin (topical) CREA</i>	P	
<i>lanolin (topical) OINT</i>	P	
LANOLOR CREA	P	
SENSI-CARE MOISTURIZING CREA	P	
<i>skin protectants, misc. CREA</i>	P	
SORBIDON HYDRATE CREA	P	
<i>zinc oxide (topical) OINT 20 %</i>	P	1 package(s) per fill retail
Rosacea Agents		
METROCREAM CREA (<i>metronidazole (topical)</i>)	NP	QL(45 gm per 31 day(s) retail)
METROLOTION LOTN (<i>metronidazole (topical)</i>)	NP	
<i>metronidazole (topical) CREA</i>	P	QL(45 gm per 31 day(s) retail)
<i>metronidazole (topical) GEL 0.75 %</i>	P	QL(45 gm per 31 day(s) retail)
<i>metronidazole (topical) LOTN</i>	P	
Scabicides & Pediculicides		
<i>crotamiton LOTN</i>	P	1 package(s) per fill retail
LICEMD GEL	P	

Drug Name	Drug Tier	Requirements/Limits
<i>malathion</i>	P	QL(59 ml per fill retail); 2 max fill(s) per 31 day(s) retail
NATROBA (<i>spinosad</i>)	NP	Limited to Age 6 months and older
NIX CREME RINSE LIQD EX (<i>permethrin</i>)	NP	
OVIDE (<i>malathion</i>)	NP	QL(59 ml per fill retail); 2 max fill(s) per 31 day(s) retail
<i>permethrin CREA</i>	P	QL(60 gm per fill retail)
<i>permethrin LIQD EX</i>	P	
<i>pyrethrins-piperonyl butoxide LIQD</i>	P	
<i>pyrethrins-piperonyl butoxide-permethrin-nit remover 4 %-0.33 %-0.5 %</i>	P	
<i>pyrethrins-piperonyl butoxide SHAM 4 %-0.3 %-0.33 %, 4 %-0.33 %</i>	P	
RID ESSENTIAL LICE ELIMINATION KIT KIT EX	P	
SCHOOLTIME SHAMPOO SHAM	P	1 package(s) per 14 day(s) retail
<i>spinosad</i>	P	Limited to Age 6 months and older
Tar Products		
<i>coal tar extract SHAM 0.5 %</i>	P	
DHS TAR GEL SHAM (<i>coal tar extract</i>)	NP	
DHS TAR SHAM (<i>coal tar extract</i>)	NP	
NEUTROGENA T/GEL SHAM 0.5 % (<i>coal tar extract</i>)	NP	
DIAGNOSTIC PRODUCTS		

Drug Name	Drug Tier	Requirements/Limits
Diagnostic Tests		
CHEMSTRIP-K STRP	P	
KETONE TEST STRIPS STRP	P	
KETONE STRP	P	
KETOSTIX STRP	P	
ONETOUCH ULTRA STRP	P	Limit 150 per 30 days insulin users;100 per 90 days non-insulin user; RX/OTC
ONETOUCH VERIO TEST STRIPS STRP	P	Limit 150 per 30 days insulin users;100 per 90 days non-insulin user; RX/OTC
RELION KETONE TEST STRIPS STRP	P	
DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes		
Digestive Enzymes		
CREON CPEP	P	Smart PA
DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure		
Carbonic Anhydrase Inhibitors		
<i>acetazolamide CP12</i>	P	
<i>acetazolamide TABS</i>	P	
<i>methazolamide TABS</i>	P	
Diuretic Combinations		
ALDACTAZIDE (<i>spironolactone & hydrochlorothiazide</i>)	NP	
<i>amiloride & hydrochlorothiazide</i>	P	QL(1 ea daily)
MAXZIDE-25 TABS (<i>triamterene & hydrochlorothiazide</i>)	NP	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
MAXZIDE TABS (triamterene & hydrochlorothiazide)	NP	
spironolactone & hydrochlorothiazide	P	
triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG	P	
triamterene & hydrochlorothiazide TABS 50 MG-75 MG	P	
triamterene & hydrochlorothiazide TABS 25 MG-37.5 MG	P	QL(2 ea daily)
Loop Diuretics		
bumetanide TABS	P	
BUMEX TABS 0.5 MG (bumetanide)	NP	
furosemide SOLN OR 10 MG/ML, 40 MG/5ML	P	
furosemide TABS	P	
LASIX TABS (furosemide)	NP	
toremide TABS 5 MG, 10 MG, 100 MG	P	QL(1 ea daily)
toremide TABS 20 MG	P	
Potassium Sparing Diuretics		
ALDACTONE TABS (spironolactone)	NP	
amiloride hcl TABS	P	QL(4 ea daily)
spironolactone TABS	P	
Thiazides and Thiazide-Like Diuretics		
chlorthalidone 25 MG, 50 MG	P	
hydrochlorothiazide CAPS	P	
hydrochlorothiazide TABS 25 MG, 50 MG	P	
indapamide TABS 1.25 MG, 2.5 MG	P	
metolazone	P	
ENDOCRINE AND METABOLIC AGENTS - MISC.		

Drug Name	Drug Tier	Requirements/Limits
- Drugs to Treat Bone Disease and Regulate Hormones		
Bone Density Regulators		
ACTONEL TABS 35 MG (risedronate sodium)	NP	QL(4 ea per 28 day(s) retail); PA
alendronate sodium SOLN	P	QL(10.8 ml daily)
alendronate sodium TABS 35 MG, 70 MG	P	QL(0.15 ea daily)
alendronate sodium TABS 5 MG, 10 MG	P	QL(1 ea daily)
AELVIA TBEC (risedronate sodium)	NP	QL(4 ea per 28 day(s) retail); PA
calcitonin (salmon) NA	P	1 package(s) per fill retail
calcitonin (salmon) IJ	P	QL(2 ml per fill retail)
FORTEO SOPN (teriparatide (recombinant))	NP	SP; PA
FOSAMAX TABS 70 MG (alendronate sodium)	NP	QL(0.15 ea daily)
MIACALCIN IJ (calcitonin (salmon))	NP	QL(2 ml per fill retail)
risedronate sodium TABS 5 MG, 30 MG	P	QL(1 ea daily); PA
risedronate sodium TABS 35 MG	P	QL(4 ea per 28 day(s) retail); PA
risedronate sodium TBEC	P	QL(4 ea per 28 day(s) retail); PA
teriparatide (recombinant) SOPN	P	SP; PA
TYMLOS	P	SP; PA
Growth Hormones		
NORDITROPIN FLEXPRO SOPN	P	SP; PA
Hormone Receptor Modulators		
EVISTA (raloxifene hcl)	NP	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>raloxifene hcl</i>	P	QL(1 ea daily)
LHRH/GnRH Agonist Analog Pituitary Suppressants		
FENSOLVI SC	P	SP; PA
Metabolic Modifiers		
<i>calcitriol CAPS</i>	P	
CARNITOR SF SOLN OR (<i>levocarnitine (metabolic modifiers)</i>)	NP	QL(30 ml daily)
CARNITOR SOLN OR 1 GM/10ML (<i>levocarnitine (metabolic modifiers)</i>)	NP	QL(30 ml daily)
CARNITOR TABS (<i>levocarnitine (metabolic modifiers)</i>)	NP	QL(3 ea daily)
GALAFOLD	P	QL(0.5 ea daily); SP; PA
<i>levocarnitine (metabolic modifiers) SOLN OR 1 GM/10ML</i>	P	QL(30 ml daily)
<i>levocarnitine (metabolic modifiers) TABS</i>	P	QL(3 ea daily)
ROCALTROL CAPS (<i>calcitriol</i>)	NP	
Posterior Pituitary Hormones		
DDAVP TABS (<i>desmopressin acetate</i>)	NP	QL(6 ea daily)
<i>desmopressin acetate spray</i>	P	QL(5 ml per fill retail); PA
<i>desmopressin acetate spray refrigerated</i>	P	QL(5 ml per fill retail); PA
<i>desmopressin acetate TABS</i>	P	QL(6 ea daily)
Somatostatic Agents		
SANDOSTATIN LAR DEPOT KIT	P	SP; PA
ESTROGENS - Hormone Replacement/Modifying Drugs		
Estrogen Combinations		

Drug Name	Drug Tier	Requirements/Limits
ACTIVEVELLA TABS 1 MG-0.5 MG (<i>estradiol & norethindrone acetate</i>)	NP	QL(1 ea daily)
COMBIPATCH PTTW	P	Limit 8 patches per month; QL(0.286 ea daily)
<i>estradiol & norethindrone acetate TABS</i>	P	QL(1 ea daily)
<i>norethindrone acetate-ethinyl estradiol</i>	P	
PREMPRO	P	
Estrogens		
ALORA PTTW	P	Limit 8 patches per month; QL(0.286 ea daily)
CLIMARA PTWK (<i>estradiol</i>)	NP	Limit 4 patches per month; QL(0.143 ea daily)
ESTRACE TABS (<i>estradiol</i>)	NP	
<i>estradiol PTTW 0.025 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR</i>	P	Limit 8 patches per month; QL(0.286 ea daily)
<i>estradiol PTTW 0.0375 MG/24HR</i>	P	QL(0.286 ea daily)
<i>estradiol PTWK</i>	P	Limit 4 patches per month; QL(0.143 ea daily)
<i>estradiol TABS</i>	P	
MINIVELLE PTTW 0.025 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (<i>estradiol</i>)	NP	Limit 8 patches per month; QL(0.286 ea daily)
MINIVELLE PTTW 0.0375 MG/24HR (<i>estradiol</i>)	NP	QL(0.286 ea daily)
PREMARIN TABS	P	QL(1 ea daily)
VIVELLE-DOT PTTW 0.0375 MG/24HR (<i>estradiol</i>)	NP	QL(0.286 ea daily)

Drug Name	Drug Tier	Requirements/Limits
VIVELLE-DOT PTTW 0.025 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (estradiol)	NP	Limit 8 patches per month; QL(0.286 ea daily)
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections		
Fluoroquinolones		
<i>ciprofloxacin hcl TABS</i> 250 MG, 500 MG, 750 MG	P	
<i>ciprofloxacin hcl TABS</i> 100 MG	P	QL(6 ea per fill retail)
CIPRO TABS 250 MG, 500 MG (<i>ciprofloxacin hcl</i>)	NP	
<i>levofloxacin TABS</i>	P	QL(14 ea per fill retail)
<i>ofloxacin 400 MG</i>	P	QL(56 ea per fill retail)
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs		
Antiflatulents		
MYLICON INFANTS GAS RELIEF DYE FREE SUSP (<i>simethicone</i>)	NP	
MYLICON INFANTS GAS RELIEF SUSP (<i>simethicone</i>)	NP	
<i>simethicone CHEW 80</i> MG	P	
<i>simethicone LIQD OR 20</i> MG/0.3ML	P	
<i>simethicone SUSP</i>	P	
Gallstone Solubilizing Agents		
URSO 250 TABS (<i>ursodiol</i>)	NP	QL(7 ea daily)
<i>ursodiol CAPS</i>	P	
<i>ursodiol TABS 250 MG</i>	P	QL(7 ea daily)
Gastrointestinal Stimulants		

Drug Name	Drug Tier	Requirements/Limits
<i>metoclopramide hcl SOLN</i> OR 5 MG/5ML, 10 MG/10ML	P	
<i>metoclopramide hcl TABS</i>	P	
REGLAN TABS (<i>metoclopramide hcl</i>)	NP	
Inflammatory Bowel Agents		
APRISO CP24 (<i>mesalamine</i>)	NP	
ASACOL HD TBEC (<i>mesalamine</i>)	NP	QL(3 ea daily)
AVSOLA	P	SP; PA
AZULFIDINE EN-TABS TBEC (<i>sulfasalazine</i>)	NP	
AZULFIDINE TABS (<i>sulfasalazine</i>)	NP	
<i>balsalazide disodium</i> CAPS	P	QL(9 ea daily)
COLAZAL CAPS (<i>balsalazide disodium</i>)	NP	QL(9 ea daily)
DELZICOL CPDR (<i>mesalamine</i>)	NP	
INFLECTRA SOLR	P	SP; PA
LIALDA TBEC (<i>mesalamine</i>)	NP	
<i>mesalamine CP24</i>	P	
<i>mesalamine CPDR</i>	P	
<i>mesalamine ENEM</i>	P	QL(60 ml daily)
<i>mesalamine TBEC 1.2</i> GM	P	
<i>mesalamine TBEC 800</i> MG	P	QL(3 ea daily)
RENFLEXIS	P	SP; PA
SFROWASA ENEM	P	
<i>sulfasalazine TABS</i>	P	
<i>sulfasalazine TBEC</i>	P	
Intestinal Acidifiers		
<i>lactulose</i> (<i>encephalopathy</i>)	P	

Drug Name	Drug Tier	Requirements/Limits
Phosphate Binder Agents		
<i>calcium acetate (phosphate binder) CAPS</i>	P	
GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System		
Alkalinizers		
<i>potassium citrate (alkalinizer) TBCR 10 MEQ, 540 MG, 1080 MG</i>	P	
<i>sodium citrate & citric acid</i>	P	QL(16.67 ml daily); RX/OTC
UROCIT-K 10 TBCR (<i>potassium citrate (alkalinizer)</i>)	NP	
UROCIT-K 5 TBCR (<i>potassium citrate (alkalinizer)</i>)	NP	
Genitourinary Irrigants		
<i>sodium chloride (gu irrigant) 0.9 %</i>	P	
Prostatic Hypertrophy Agents		
<i>finasteride</i>	P	QL(1 ea daily)
FLOMAX (<i>tamsulosin hcl</i>)	NP	QL(2 ea daily)
PROSCAR (<i>finasteride</i>)	NP	QL(1 ea daily)
<i>tamsulosin hcl</i>	P	QL(2 ea daily)
Urinary Analgesics		
<i>phenazopyridine hcl TABS 100 MG, 100 MG, 200 MG</i>	P	
PYRIDIUM TABS (<i>phenazopyridine hcl</i>)	NP	
GOUT AGENTS - Drugs to Treat Gout		
Gout Agent Combinations		
<i>colchicine w/ probenecid</i>	P	
Gout Agents		
<i>allopurinol</i>	P	

Drug Name	Drug Tier	Requirements/Limits
<i>colchicine TABS</i>	P	QL(6 ea per fill retail); 1 max fill(s) per 31 day(s) retail
COLCRYS TABS (<i>colchicine</i>)	NP	QL(6 ea per fill retail); 1 max fill(s) per 31 day(s) retail
ZYLOPRIM (<i>allopurinol</i>)	NP	
Uricosurics		
<i>probenecid</i>	P	
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders		
Aminolevulinate Synthase 1-Directed siRNA		
GIVLAARI	P	SP; PA
Bradykinin B2 Receptor Antagonists		
FIRAZYR SOSY (<i>icatibant acetate</i>)	NP	SP; PA
<i>icatibant acetate SOLN</i>	P	SP; PA
<i>icatibant acetate SOSY</i>	P	SP; PA
Complement Inhibitors		
HAEGARDA SOLR SC	P	SP; PA
Hematorheologic Agents		
<i>pentoxifylline</i>	P	
Platelet Aggregation Inhibitors		
BRILINTA	P	QL(2 ea daily)
<i>cilostazol</i>	P	QL(2 ea daily)
<i>clopidogrel bisulfate 75 MG</i>	P	QL(1 ea daily)
<i>dipyridamole</i>	P	
EFFIENT (<i>prasugrel hcl</i>)	NP	QL(1 ea daily)
PLAVIX 75 MG (<i>clopidogrel bisulfate</i>)	NP	QL(1 ea daily)
<i>prasugrel hcl</i>	P	QL(1 ea daily)
HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders		
Agents for Gaucher Disease		

Drug Name	Drug Tier	Requirements/Limits
CERDELGA	P	SP; PA
CEREZYME 400 UNIT	P	SP; PA
Agents for Sickle Cell Disease		
ADAKVEO	P	SP; PA
DROXIA CAPS	P	
Cobalamins		
<i>cyanocobalamin SOLN IJ 1000 MCG/ML</i>	P	QL(10 ml per 270 day(s) retail)
Folic Acid/Folates		
<i>folic acid TABS 1 MG</i>	P	RX/OTC
<i>folic acid TABS 400 MCG, 800 MCG</i>	P	QL(1 ea daily)
Hematopoietic Growth Factors		
REBLOZYL	P	SP; PA
RETACRIT	P	SP; PA
ZARXIO	P	SP; PA
Hematopoietic Mixtures		
<i>ferrous fumarate-fa-b complex-c-zn-mg-mn-cu TABS</i>	P	QL(1 ea daily)
Iron		
FER-IN-SOL SOLN (<i>ferrous sulfate</i>)	NP	QL(3.4 ml daily)
FERRETT'S TABS	P	QL(2 ea daily)
<i>ferrous fumarate TABS 324 MG</i>	P	QL(2 ea daily)
FERROUS GLUCONATE TABS 324 MG	P	QL(3.34 ea daily)
<i>ferrous sulfate SOLN 220 MG/5ML, 300 MG/6.8ML</i>	P	
<i>ferrous sulfate SOLN 15 MG/ML</i>	P	QL(3.4 ml daily)
<i>ferrous sulfate TABS 65 MG, 325 MG</i>	P	
<i>ferrous sulfate TBEC</i>	P	
FERROUS SULFATE TBEC (<i>ferrous sulfate</i>)	NP	

Drug Name	Drug Tier	Requirements/Limits
IRON CHEWS PEDIATRIC CHEW	P	
IRON TABS 28 MG	P	
<i>polysaccharide iron complex CAPS 150 MG</i>	P	QL(1 ea daily)
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
Hemostatics - Systemic		
LYSTEDA TABS (<i>tranexamic acid</i>)	NP	QL(30 ea per 5 day(s) retail); 1 max fill(s) per 31 day(s) retail; AL(At least 12 yrs old)
<i>tranexamic acid TABS</i>	P	QL(30 ea per 5 day(s) retail); 1 max fill(s) per 31 day(s) retail; AL(At least 12 yrs old)
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
Antihistamine Hypnotics		
<i>diphenhydramine hcl (sleep) CAPS 50 MG</i>	P	
<i>diphenhydramine hcl (sleep) TABS 50 MG</i>	P	
<i>diphenhydramine hcl (sleep) TABS 25 MG</i>	P	QL(4 ea daily)
<i>diphenhydramine hcl (sleep) TABS 25 MG</i>	P	QL(1 ea daily)
<i>doxylamine succinate (sleep)</i>	P	
Barbiturate Hypnotics		
<i>phenobarbital ELIX</i>	P	
<i>phenobarbital TABS</i>	P	
Non-Barbiturate Hypnotics		
AMBIEN TABS (<i>zolpidem tartrate</i>)	NP	QL(1 ea daily)
<i>flurazepam hcl</i>	P	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
HALCION 0.25 MG (triazolam)	NP	
midazolam hcl SOLN IJ	P	
RESTORIL 15 MG, 30 MG (temazepam)	NP	QL(1 ea daily); AL(At least 18 yrs old)
temazepam 15 MG, 30 MG	P	QL(1 ea daily); AL(At least 18 yrs old)
triazolam	P	
zaleplon 5 MG	P	QL(1 ea daily); AL(At least 18 yrs old)
zaleplon 10 MG	P	QL(2 ea daily); AL(At least 18 yrs old)
zolpidem tartrate TABS	P	QL(1 ea daily)
LAXATIVES - Bowel Treatment Drugs		
Bulk Laxatives		
calcium polycarbophil TABS	P	QL(10 ea daily)
NATURAL FIBER LAXATIVE POWD	P	
psyllium CAPS 0.52 GM	P	
psyllium POWD 28.3 %, 30 %, 30.9 %, 33 %, 58.6 %, 100 %	P	
Laxative Combinations		
GOLYTELY SOLR (peg 3350-kcl-sod bicarb-sod chloride-sod sulfate)	NP	1 package(s) per fill retail
NULYTELY (peg 3350-potassium chloride-sod bicarbonate-sod chloride)	NP	1 package(s) per fill retail
peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR	P	1 package(s) per fill retail
peg 3350-potassium chloride-sod bicarbonate-sod chloride	P	1 package(s) per fill retail
PEG-PREP	P	
sennosides-docusate sodium TABS	P	QL(4 ea daily)

Drug Name	Drug Tier	Requirements/Limits
SENOKOT S TABS (sennosides-docusate sodium)	NP	QL(4 ea daily)
Laxatives - Miscellaneous		
glycerin (laxative) SUPP 2 GM	P	
GLYCERIN ADULT SUPP (glycerin (laxative))	NP	
lactulose SOLN	P	
MIRALAX POWD (polyethylene glycol 3350)	NP	QL(34 gm daily)
polyethylene glycol 3350 POWD	P	QL(34 gm daily)
Saline Laxatives		
FLEET ENEMA ENEM (sodium phosphates)	NP	
FLEET PEDIATRIC ENEM (sodium phosphates)	NP	
magnesium citrate	P	
magnesium hydroxide SUSP 7.75 %, 400 MG/5ML, 1200 MG/15ML, 2400 MG/30ML	P	QL(32 ml daily)
sodium phosphates ENEM	P	
Stimulant Laxatives		
bisacodyl SUPP	P	QL(12 ea per fill retail)
bisacodyl TBEC	P	QL(1 ea daily)
DULCOLAX PINK LAXATIVE TBEC (bisacodyl)	NP	QL(1 ea daily)
DULCOLAX SUPP (bisacodyl)	NP	QL(12 ea per fill retail)
DULCOLAX TBEC (bisacodyl)	NP	QL(1 ea daily)
sennosides TABS 8.6 MG	P	
SENOKOT TABS (sennosides)	NP	
Surfactant Laxatives		

Drug Name	Drug Tier	Requirements/Limits
COLACE CLEAR CAPS (<i>docusate sodium</i>)	NP	
COLACE CAPS 100 MG (<i>docusate sodium</i>)	NP	QL(3 ea daily)
<i>docusate sodium</i> CAPS 100 MG, 250 MG	P	QL(3 ea daily)
<i>docusate sodium</i> CAPS 50 MG	P	
<i>docusate sodium</i> LIQD	P	
<i>docusate sodium</i> SYRP	P	
DOCUSATE SODIUM SYRP	P	
<i>docusate sodium</i> TABS	P	
MACROLIDES - Drugs to Treat Bacterial Infections		
Azithromycin		
<i>azithromycin</i> PACK	P	QL(2 ea per fill retail)
<i>azithromycin</i> SUSR 100 MG/5ML	P	1 package(s) per fill retail
<i>azithromycin</i> SUSR 200 MG/5ML	P	QL(60 ml per fill retail)
<i>azithromycin</i> TABS 250 MG	P	QL(6 ea per fill retail)
<i>azithromycin</i> TABS 500 MG	P	QL(4 ea daily)
<i>azithromycin</i> TABS 600 MG	P	QL(8 ea per 28 day(s) retail)
ZITHROMAX TRI-PAK TABS (<i>azithromycin</i>)	NP	QL(4 ea daily)
ZITHROMAX Z-PAK TABS (<i>azithromycin</i>)	NP	QL(6 ea per fill retail)
ZITHROMAX PACK (<i>azithromycin</i>)	NP	QL(2 ea per fill retail)
ZITHROMAX SUSR 100 MG/5ML (<i>azithromycin</i>)	NP	1 package(s) per fill retail
ZITHROMAX SUSR 200 MG/5ML (<i>azithromycin</i>)	NP	QL(60 ml per fill retail)
ZITHROMAX TABS 500 MG (<i>azithromycin</i>)	NP	QL(4 ea daily)
ZITHROMAX TABS 250 MG (<i>azithromycin</i>)	NP	QL(6 ea per fill retail)

Drug Name	Drug Tier	Requirements/Limits
Clarithromycin		
<i>clarithromycin</i> SUSR 125 MG/5ML	P	1 package(s) per fill retail
<i>clarithromycin</i> SUSR 250 MG/5ML	P	2 package(s) per fill retail
<i>clarithromycin</i> TABS	P	QL(28 ea per fill retail)
<i>clarithromycin</i> TB24	P	QL(14 ea per fill retail)
Erythromycins		
E.E.S. GRANULES SUSR (<i>erythromycin ethylsuccinate</i>)	NP	
ERYPED 200 SUSR (<i>erythromycin ethylsuccinate</i>)	NP	
ERYPED 400 SUSR (<i>erythromycin ethylsuccinate</i>)	NP	
<i>erythromycin</i> base CPEP	P	
<i>erythromycin</i> base TABS	P	
<i>erythromycin</i> base TBEC	P	
<i>erythromycin ethylsuccinate</i> SUSR	P	
<i>erythromycin ethylsuccinate</i> TABS	P	
<i>erythromycin stearate</i> TABS 250 MG	P	
MEDICAL DEVICES AND SUPPLIES		
Bandages-Dressings-Tape		
BANDAGES-DRESSINGS-TAPE - MISC	P	
Contraceptives		
CONDOMS-MISC	P	36 per 31 days
FC2 FEMALE CONDOM	P	QL(12 ea per 31 day(s) retail)
Diabetic Supplies		

Drug Name	Drug Tier	Requirements/Limits
FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM	P	QL(1 ea per 365 day(s) retail); PA
FREESTYLE LIBRE 14 DAY/SENSOR/FLASH MONITORING SYSTEM	P	QL(2 ea per 28 day(s) retail); PA
FREESTYLE LIBRE 2/READER/FLASH GLUCOSE MONITORING SYSTEM	P	QL(1 ea per 365 day(s) retail); PA
FREESTYLE LIBRE 2/SENSOR/FLASH GLUCOSE MONITORING SYSTEM	P	QL(2 ea per 28 day(s) retail); PA
FREESTYLE LIBRE 3/SENSOR/GLUCOSE MONITORING SYSTEM	P	QL(2 ea per 28 day(s) retail); PA
FREESTYLE LIBRE/READER/FLASH MONITORING SYSTEM	P	QL(1 ea per 365 day(s) retail); PA
LANCET DEVICE - MISC	P	1 per 180 days
LANCETS - MISC	P	6.67 per day; 200 per 30 days
ONETOUCH ULTRA CONTROL SOLUTION LIQD	P	
ONETOUCH ULTRA CONTROL LIQD	P	
ONETOUCH VERIO LEVEL 3 CONTROL SOLUTION LIQD	P	
ONETOUCH VERIO LEVEL 4 CONTROL SOLUTION LIQD	P	
Misc. Devices		
ALCOHOL PREP PADS - MISC	P	Daily dose 16.67; 400 per claim; 500 per 30 days
Parenteral Therapy Supplies		
BD AUTOSHIELD DUO 30G X 5MM	P	QL(5 ea daily); RX/OTC
BD PEN NEEDLES	P	5 per day

Drug Name	Drug Tier	Requirements/Limits
INSULIN SYRINGES - MISC	P	5 per day
Respiratory Therapy Supplies		
ACE AEROSOL CLOUD ENHANCER MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
ACTIVITY POUCH MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
ADAPTER PED DISPOSABLE MOUTHPIECE MISC	P	QL(1 ea per 180 day(s) retail); RX/OTC
ADULT AEROSOL MASK MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
ADULT DISPOSABLE MOUTHPIECE MISC	P	QL(1 ea per 180 day(s) retail); RX/OTC
ADULT MASK LARGE MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
ADULT MASK DEVI	P	RX/OTC
AEROBIKA DEVI	P	RX/OTC
AEROCHAMBER HOLDING CHAMBER DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
AEROCHAMBER MINI AEROSOLCHAMBER DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
AEROCHAMBER MV MISC	P	QL(2 ea per 360 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLOW VU MISC	P	QL(2 ea per 360 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLOW VUMOUTHPIECE DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLOW-VU/INTERMEDIATE MASK DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLOW-VU/LARGE MASK DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
AEROCHAMBER PLUS FLOW-VU/LARGE MASK MISC	P	QL(2 ea per 360 day(s) retail); RX/OTC	AEROECLIPSE MASK MEDIUM MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLOW-VU/MASK MISC	P	QL(2 ea per 360 day(s) retail); RX/OTC	AEROECLIPSE MASK SMALL MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLOW-VU/MEDIUM MASK DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC	AEROTRACH PLUS MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLOW-VU/MEDIUM MASK MISC	P	QL(2 ea per 360 day(s) retail); RX/OTC	AEROVENT PLUS HOLDING CHAMBER/COLLAPSIBLE DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLOW-VU/SMALL MASK DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC	AIRS PEDIATRIC AEROSOL MASK MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLOW-VU/SMALL MASK MISC	P	QL(2 ea per 360 day(s) retail); RX/OTC	ALL FLOW 1000 PFT FILTER DEVI	P	RX/OTC
AEROCHAMBER PLUS FLOW-VU MISC	P	QL(2 ea per 360 day(s) retail); RX/OTC	ALL FLOW 1000 PULMONARY FUNCTION FILTER MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
AEROCHAMBER Z-STAT PLUS VALVED HOLDING CHAMBER W/FLOW VU MISC	P	QL(2 ea per 360 day(s) retail); RX/OTC	ALL FLOW 2000 PFT FILTER DEVI	P	RX/OTC
AEROCHAMBER Z-STAT PLUS/FLOWSIGNAL MISC	P	QL(2 ea per 360 day(s) retail); RX/OTC	ALL FLOW 3000 PFT FILTER DEVI	P	RX/OTC
AEROCHAMBER Z-STAT PLUS/LARGE MASK MISC	P	QL(2 ea per 360 day(s) retail); RX/OTC	ALL FLOW 4000 PFT FILTER DEVI	P	RX/OTC
AEROCHAMBER Z-STAT PLUS/MEDIUM MASK MISC	P	QL(2 ea per 360 day(s) retail); RX/OTC	ALL FLOW 5000 PFT FILTER DEVI	P	RX/OTC
AEROCHAMBER Z-STAT PLUS/SMALL MASK MISC	P	QL(2 ea per 360 day(s) retail); RX/OTC	ALL FLOW 6000 PFT FILTER DEVI	P	RX/OTC
AEROCHAMBER/FLOWSIGNAL MISC	P	QL(2 ea per 360 day(s) retail); RX/OTC	ALL FLOW 7000 PFT FILTER DEVI	P	RX/OTC
AEROECLIPSE EZ TWIST TUBING MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	BREATHE COMFORT ANTI-STATIC VALVED HOLDING CHAMBER/ADULT DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
AEROECLIPSE MASK LARGE MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	BREATHE COMFORT ANTI-STATIC VALVED HOLDING CHAMBER/CHILD DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
			BREATHE EASE NEBULIZER MASK/CHILD MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BREATHE EASE NEBULIZER MASK/INFANT MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/MEDIUM/3 YEA DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
BREATHE EASE/LARGE MASK DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC	CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/MEDIUM DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
BREATHE EASE/MEDIUM MASK DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC	CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/SMALL INFANT DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
BREATHE EASE/SMALL MASK DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC	CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/SMALL DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
BREATHERITE VALVED MDI CHAMBER/COLLAPSIBLE DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC	CO MONITOR REPLACEMENT TPIECES MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
BREATHERITE VALVED MDI CHAMBER/RIGID DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC	CO MONITOR DEVI	P	RX/OTC
BUBBLES THE FISH II PEDIATRIC MASK/PVC MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	COMPACT SPACE CHAMBER/ANTI-STATIC/LARGE MASK DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
CARETOUCH 2 CPAP HOSE HANGER MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	COMPACT SPACE CHAMBER/ANTI-STATIC/MEDIUM MASK DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
CARETOUCH CPAP & BIPAP HOSE/6FT MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	COMPACT SPACE CHAMBER/ANTI-STATIC/SMALL MASK DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
CARETOUCH CPAP MASK WIPES MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	COMPACT SPACE CHAMBER/ANTI-STATIC DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
CARETOUCH CPAP NEUTRALIZING PRE-WASH MISC	P	QL(1 ml per 360 day(s) retail); RX/OTC	DISPOSABLE MOUTHPIECE FULL RANGE MISC	P	QL(1 ea per 180 day(s) retail); RX/OTC
CARETOUCH CPAP TUBE CLEANING BRUSH MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	DISPOSABLE MOUTHPIECE LOWRANGE/PEDIATRIC MISC	P	QL(1 ea per 180 day(s) retail); RX/OTC
CARETOUCH UNIVERSAL CPAPFILTERS MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC			
CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/ADULT LARGE DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DISPOSABLE MOUTHPIECE/LOW RANGE MISC	P	QL(1 ea per 180 day(s) retail); RX/OTC	EASY FLOW WHITE/PINK DEVI	P	RX/OTC
DISPOSABLE MOUTHPIECE/UNIVERSAL RANGE MISC	P	QL(1 ea per 180 day(s) retail); RX/OTC	EASY FLOW WHITE/WHITE DEVI	P	RX/OTC
DISPOSABLE PAPER MOUTHPIECE MISC	P	QL(1 ea per 180 day(s) retail); RX/OTC	EASY FLOW WHITE/YELLOW DEVI	P	RX/OTC
EASIVENT/MASK-LARGE MISC	P	QL(2 ea per 360 day(s) retail); RX/OTC	EBASE CONTROLLER KIT MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
EASIVENT/MASK-MEDIUM MISC	P	QL(2 ea per 360 day(s) retail); RX/OTC	EQ SPACE CHAMBER ANTI-STATIC/LARGE MASK DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
EASIVENT/MASK-SMALL MISC	P	QL(2 ea per 360 day(s) retail); RX/OTC	EQ SPACE CHAMBER ANTI-STATIC/MEDIUM MASK DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
EASIVENT MISC	P	QL(2 ea per 360 day(s) retail); RX/OTC	EQ SPACE CHAMBER ANTI-STATIC/SMALL MASK DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
EASY FLOW 300 MM HOSE MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	EQ SPACE CHAMBER ANTI-STATIC DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
EASY FLOW 400 MM HOSE MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	EXPIRATORY MOUTHPIECE MISC	P	QL(1 ea per 180 day(s) retail); RX/OTC
EASY FLOW AIR NOZZLE MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	FILTER AIR PP MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
EASY FLOW BLACK/BLUE DEVI	P	RX/OTC	FLEXICHAMBER ADULT MASK/SMALL	P	QL(2 ea per 360 day(s) retail); RX/OTC
EASY FLOW BLACK/ORANGE DEVI	P	RX/OTC	FLEXICHAMBER CHILD MASK/LARGE	P	QL(2 ea per 360 day(s) retail); RX/OTC
EASY FLOW BLACK/RED DEVI	P	RX/OTC	FLEXICHAMBER CHILD MASK/SMALL	P	QL(2 ea per 360 day(s) retail); RX/OTC
EASY FLOW BLACK/WHITE DEVI	P	RX/OTC	FLEXICHAMBER DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
EASY FLOW BLACK/YELLOW DEVI	P	RX/OTC	FLYP HYPERSONIQ CARTRIDGE MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
EASY FLOW HEPA FILTER MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	FULL KIT NEBULIZER SET MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
EASY FLOW WHITE/BLUE DEVI	P	RX/OTC			
EASY FLOW WHITE/GREEN DEVI	P	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
IN-CHECK DIAL INSPIRATORY FLOW TRAINER DEVI	P	RX/OTC	NEBULIZER AIR TUBE/PLUGS MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
IN-CHECK INSPIRATORY FLOWMETER/NASAL WITH MASK DEVI	P	RX/OTC	NEBULIZER CUP/TUBING DEVI	P	RX/OTC
IN-CHECK INSPIRATORY FLOWMETER/ORAL DEVI	P	RX/OTC	NEBULIZER MASK ADULT MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
INNOSPIRE REPLACEMENT FILTER MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	NEBULIZER MASK CHILD MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
INSPIREASE DRUG DELIVERY SYSTEM MISC	P	QL(2 ea per 360 day(s) retail); RX/OTC	NOSE CLIP MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
INSPIREASE RESERVOIR BAGS	P	QL(3 ea per 180 day(s) retail)	OMBRA COMPRESSOR AIR FILTERS MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
KOKO PEAK PRO REPLACEMENT PLASTIC MOUTHPIECE MISC	P	QL(1 ea per 180 day(s) retail); RX/OTC	OMBRA TABLE TOP COMPRESSOR DEVI	P	RX/OTC
LITETOUCH MASK LARGE MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	ONE FLOW FVC MONITORING SPIROMETER DEVI	P	RX/OTC
LITETOUCH MASK MEDIUM MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	ONE FLOW TESTER TUBE MOUTHPIECE MISC	P	QL(1 ea per 180 day(s) retail); RX/OTC
LITETOUCH MASK SMALL MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	ONE-WAY VALVED EXPIRATORY MOUTHPIECE/DISPOSABLE MISC	P	QL(1 ea per 180 day(s) retail); RX/OTC
MASK VORTEX/CHILD/FROG	P	QL(2 ea per 360 day(s) retail); RX/OTC	ONE-WAY VALVED INSPIRATORY MOUTHPIECE/DISPOSABLE MISC	P	QL(1 ea per 180 day(s) retail); RX/OTC
MASK VORTEX/TODDLER/LAD YBUG	P	QL(2 ea per 360 day(s) retail); RX/OTC	OPTICHAMBER DIAMOND/LARGE FACE MASK DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
MICROCHAMBER DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC	OPTICHAMBER DIAMOND/MEDIUM FACE MASK MISC	P	QL(2 ea per 360 day(s) retail); RX/OTC
MICROCHAMBER MISC	P	QL(2 ea per 360 day(s) retail); RX/OTC	OPTICHAMBER DIAMOND/SMALL FACE MASK MISC	P	QL(2 ea per 360 day(s) retail); RX/OTC
MICROSPACER MISC	P	QL(2 ea per 360 day(s) retail); RX/OTC	OPTICHAMBER DIAMOND DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
MINIELITE FILTER REPLACEMENTS MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	OPTICHAMBER DIAMOND MISC	P	QL(2 ea per 360 day(s) retail); RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PANDA MASK LARGE	P	QL(2 ea per 360 day(s) retail); RX/OTC	PEDIATRIC DISPOSABLE MOUTPIECE MISC	P	QL(1 ea per 180 day(s) retail); RX/OTC
PANDA MASK MEDIUM	P	QL(2 ea per 360 day(s) retail); RX/OTC	PEDIATRIC MOUTHPIECE/DISPOSABLE MISC	P	1 per 360 days
PANDA MASK SMALL	P	QL(2 ea per 360 day(s) retail); RX/OTC	PEDIATRIC MOUTHPIECE/DISPOSABLE MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
PARI ALTERA NEBULIZER HANDSET MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	PEDIATRIC PANDA MASK	P	QL(2 ea per 360 day(s) retail); RX/OTC
PARI BABY CONVERSION KITSIZE 1 MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	PFLEX MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
PARI BABY CONVERSION KITSIZE 2 MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	PHARMACIST CHOICE NEBULIZER/CPAP/INHALER CHAMBER MASK WIPES MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
PARI BABY CONVERSION KITSIZE 3 MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	PILLOW MASK/ADULT MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
PARI ERAPID NEBULIZER HANDSET MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	PILLOW MASK/CHILD MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
PARI EXPIRATORY FILTER VALVE SET DEVI	P	QL(1 ea per 360 day(s) retail); RX/OTC	PILLOW MASK/PEDIATRIC MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
PARI MANUAL INTERRUPTER DEVI	P	RX/OTC	POCKET CHAMBER DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
PARI MASK SET MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	POCKET SPACER DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
PARI SMARTMASK BABY/ELBOW MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	PRO COMFORT INHALER SPACER CHAMBER ADULT MISC	P	QL(2 ea per 360 day(s) retail); RX/OTC
PARI SOFT PLASTIC ADULT MASK MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	PRO COMFORT INHALER SPACER CHAMBER CHILD MISC	P	QL(2 ea per 360 day(s) retail); RX/OTC
PARI SOFT PLASTIC PEDIATRIC MASK MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	PRO COMFORT INHALER SPACER CHAMBER INFANT DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
PARI TREK S COMBO PACK DEVI	P	RX/OTC	PROCARE SPACER CHAMBER W/ADULT MASK DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
PARI VORTEX ADULT MASK	P	QL(2 ea per 360 day(s) retail); RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PROCARE SPACER CHAMBER W/CHILD MASK DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC	SIDESTREAM PEDIATRIC FACEMASK/SAMI THE SEAL MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
PROCHAMBER VALVED HOLDINGCHAMBER DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC	SIDESTREAM PEDIATRIC FACEMASK/TUCKER THE TURTLE MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
PRONEB ULTRA FILTER SET MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	SIDESTREAM PEDIATRIC FACEMASK MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
PURE COMFORT 3-BALL BREATH EXERCISER DEVI	P	RX/OTC	SIDESTREAM PLUS ADULT FACE MASK MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
PURE COMFORT INHALER SPACER CHAMBER ADULT DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC	SILICONE MASK FOR BREATHERITE CHAMBER/ADULT MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
QUAKE DEVI	P	RX/OTC	SILICONE MASK FOR BREATHERITE CHAMBER/INFANT MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
REPLACEMENT AIR FILTER MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	SILICONE MASK FOR BREATHERITE CHAMBER/PEDIATRIC MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
REPLACEMENT FILTERS MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	SILICONE MASK FOR BREATHRITE CHAMBER/ADULT MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
REUSABLE COMFORTSEAL MASK/LARGE/AEROECLIPSE MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	SOOTHENEB NBL 100 CHILD MASK MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
REUSABLE COMFORTSEAL MASK/MEDIUM/AEROECLIPSE MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	SOOTHENEB NBL 100 MEDICATION CUP MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
REUSABLE COMFORTSEAL MASK/SMALL/AEROECLIPSE MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	SOOTHENEB NBL 100 MESH CAP MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
RITEFLO DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC	SOOTHENEB NBL100 ADULT MASK MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
SAMI THE SEAL REPLACEMENTFILTERS MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE	P	2 per 360 days
SIDESTREAM ADULT FACE MASK MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC	SPIRO PD DEVI	P	RX/OTC
			THRESHOLD IMT MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC

Drug Name	Drug Tier	Requirements/Limits
THRESHOLD PEP DEVI	P	RX/OTC
TUBING/WING TIP MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
ULTRA NEB NEBULIZER ACCESSORIES KIT MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC
VERSAPAP/UNIVERSAL TUBING DEVI	P	RX/OTC
VERSAPAP DEVI	P	RX/OTC
VORTEX HOLDING CHAMBER/MASK/CHILD S/FROG DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
VORTEX HOLDING CHAMBER/MASK/TODDLER/LADY BUG DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
VORTEX VALVED HOLDING CHAMBER DEVI	P	QL(2 ea per 360 day(s) retail); RX/OTC
WINDMILL TRAINER MISC	P	QL(1 ea per 360 day(s) retail); RX/OTC

MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches

Migraine Combinations

CAFERGOT TABS (<i>ergotamine w/ caffeine</i>)	NP	AL(At least 18 yrs old)
<i>ergotamine w/ caffeine TABS</i>	P	AL(At least 18 yrs old)

Serotonin Agonists

AMERGE (<i>naratriptan hcl</i>)	NP	QL(9 ea per 31 day(s) retail); AL(At least 18 yrs old)
<i>eletriptan hydrobromide</i>	P	QL(6 ea per 31 day(s) retail)
IMITREX 20 MG/ACT (<i>sumatriptan</i>)	NP	20 MG/ACT; QL(6 ea per 31 day(s) retail); AL(At least 12 yrs old)

Drug Name	Drug Tier	Requirements/Limits
IMITREX 5 MG/ACT (<i>sumatriptan</i>)	NP	5 MG/ACT; QL(6 ea per 31 day(s) retail); AL(At least 12 yrs old)
IMITREX STATDOSE REFILL SOCT 6 MG/0.5ML (<i>sumatriptan succinate</i>)	NP	QL(2 ml per 31 day(s) retail); AL(At least 12 yrs old)
IMITREX STATDOSE SYSTEM SOAJ 6 MG/0.5ML (<i>sumatriptan succinate</i>)	NP	QL(2 ml per 31 day(s) retail); AL(At least 12 yrs old)
IMITREX TABS (<i>sumatriptan succinate</i>)	NP	QL(9 ea per 31 day(s) retail); AL(At least 12 yrs old)
MAXALT-MLT TBDP 10 MG (<i>rizatriptan benzoate</i>)	NP	QL(12 ea per 31 day(s) retail); AL(At least 6 yrs old)
MAXALT TABS 10 MG (<i>rizatriptan benzoate</i>)	NP	QL(12 ea per 31 day(s) retail); AL(At least 6 yrs old)
<i>naratriptan hcl</i>	P	QL(9 ea per 31 day(s) retail); AL(At least 18 yrs old)
RELPAK (<i>eletriptan hydrobromide</i>)	NP	QL(6 ea per 31 day(s) retail)
<i>rizatriptan benzoate TABS</i>	P	QL(12 ea per 31 day(s) retail); AL(At least 6 yrs old)
<i>rizatriptan benzoate TBDP</i>	P	QL(12 ea per 31 day(s) retail); AL(At least 6 yrs old)
<i>sumatriptan 20 MG/ACT</i>	P	20 MG/ACT; QL(6 ea per 31 day(s) retail); AL(At least 12 yrs old)
<i>sumatriptan 5 MG/ACT</i>	P	5 MG/ACT; QL(6 ea per 31 day(s) retail); AL(At least 12 yrs old)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>sumatriptan succinate</i> SOAJ 6 MG/0.5ML	P	QL(2 ml per 31 day(s) retail); AL(At least 12 yrs old)	<i>calcium carbonate-vitamin d</i> TABS 600 MG-200 UNIT	P	QL(2 ea daily)
<i>sumatriptan succinate</i> SOCT 6 MG/0.5ML	P	QL(2 ml per 31 day(s) retail); AL(At least 12 yrs old)	<i>calcium carbonate-vitamin d</i> TABS 125 UNIT-250 MG, 250 MG-125 UNIT	P	
<i>sumatriptan succinate</i> SOLN 6 MG/0.5ML	P	QL(2.5 ml per 30 day(s) retail); AL(At least 12 yrs old)	<i>oyster shell</i>	P	
<i>sumatriptan succinate</i> TABS	P	QL(9 ea per 31 day(s) retail); AL(At least 12 yrs old)	OYSTER SHELL CALCIUM/D TABS	P	
<i>zolmitriptan</i> SOLN 5 MG	P	QL(6 ea per 31 day(s) retail); AL(At least 12 yrs old)	PARVA-CAL	P	
<i>zolmitriptan</i> TABS	P	QL(6 ea per 31 day(s) retail)	QC CALCIUM 500MG/D3 TABS	P	
<i>zolmitriptan</i> TBDP	P	QL(6 ea per 31 day(s) retail)	Electrolyte Mixtures		
ZOMIG SOLN (<i>zolmitriptan</i>)	NP	QL(6 ea per 31 day(s) retail); AL(At least 12 yrs old)	BIOLYTE SOLN	P	
ZOMIG TABS 2.5 MG, 5 MG (<i>zolmitriptan</i>)	NP	QL(6 ea per 31 day(s) retail)	CERALYTE 70 SOLN	P	
MINERALS & ELECTROLYTES			CERASPORT EX1 SOLN	P	
Calcium			CERASPORT SOLN	P	
CALCIUM 600+D HIGH POTENCY TABS	P	QL(2 ea daily)	ENFAMIL ENFALYTE SOLN	P	
<i>calcium carbonate-cholecalciferol</i> TABS 125 UNIT-500 MG, 200 UNIT-200 UNIT-500 MG-500 MG, 200 UNIT-500 MG, 5 MCG-500 MG, 500 MG-5 MCG	P		EQUALYTE SOLN (<i>oral electrolytes</i>)	NP	
<i>calcium carbonate-cholecalciferol</i> TABS 10 MCG-600 MG, 200 UNIT-600 MG, 400 UNIT-600 MG, 5 MCG-600 MG	P	QL(2 ea daily)	HYDRALYTE FREEZER POPS SOLN	P	
			HYDRALYTE SOLN	P	
			KINDERLYTE PREMAX SOLN	P	
			KINDERLYTE SOLN	P	
			<i>oral electrolytes</i> SOLN	P	
			PEDIALYTE ADVANCED CARE SOLN (<i>oral electrolytes</i>)	NP	
			PEDIALYTE FREEZER POPS SOLN (<i>oral electrolytes</i>)	NP	
			PEDIALYTE SINGLES SOLN (<i>oral electrolytes</i>)	NP	
			PEDIALYTE SOLN (<i>oral electrolytes</i>)	NP	
			TRUELYTE SOLN	P	
			Fluoride		

Drug Name	Drug Tier	Requirements/Limits
<i>sodium fluoride CHEW 0.25 MG, 0.5 MG, 1 MG, 2.2 MG</i>	P	
<i>sodium fluoride SOLN 0.125 MG/DROP, 0.5 MG/ML</i>	P	RX/OTC
Magnesium		
MAGNESIUM EXTRA STRENGTH CAPS	P	
<i>magnesium oxide (mg supplement) TABS 400 MG</i>	P	
MAGNESIUM OXIDE CAPS	P	
MAGNESIUM CAPS 400 MG	P	
MAGOX 400 TABS (<i>magnesium oxide (mg supplement)</i>)	NP	
Phosphate		
<i>K-PHOS NEUTRAL (pot phosphate monobasic w/ sod phosphate dibasic & monobasic)</i>	NP	QL(8 ea daily)
<i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic</i>	P	QL(8 ea daily)
Potassium		
K-TAB TBCR 8 MEQ, 10 MEQ (<i>potassium chloride</i>)	NP	
<i>potassium bicarbonate TBEF</i>	P	
<i>potassium chloride microencapsulated crystals er</i>	P	
<i>potassium chloride CPCR 10 MEQ</i>	P	
<i>potassium chloride CPCR 8 MEQ</i>	P	QL(1 ea daily)
<i>potassium chloride PACK OR 20 MEQ</i>	P	

Drug Name	Drug Tier	Requirements/Limits
<i>potassium chloride SOLN OR 10 %, 20 %</i>	P	
<i>potassium chloride TBCR 8 MEQ, 10 MEQ</i>	P	
Zinc		
<i>zinc sulfate CAPS</i>	P	QL(3.34 ea daily)
MISCELLANEOUS THERAPEUTIC CLASSES		
Chelating Agents		
DEPEN TITRATABS TABS (<i>penicillamine</i>)	NP	
<i>penicillamine TABS</i>	P	
Immunosuppressive Agents		
<i>azathioprine TABS</i>	P	
CELLCEPT CAPS (<i>mycophenolate mofetil</i>)	NP	
CELLCEPT SUSR (<i>mycophenolate mofetil</i>)	NP	
CELLCEPT TABS (<i>mycophenolate mofetil</i>)	NP	
<i>cyclosporine modified (for microemulsion) CAPS</i>	P	
<i>cyclosporine modified (for microemulsion) SOLN</i>	P	
<i>cyclosporine CAPS</i>	P	
ENSPRYNG	P	SP; PA
IMURAN TABS (<i>azathioprine</i>)	NP	
<i>mycophenolate mofetil CAPS</i>	P	
<i>mycophenolate mofetil SUSR</i>	P	
<i>mycophenolate mofetil TABS</i>	P	
<i>mycophenolate sodium</i>	P	
MYFORTIC (<i>mycophenolate sodium</i>)	NP	
NEORAL CAPS (<i>cyclosporine modified (for microemulsion)</i>)	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
NEORAL SOLN (cyclosporine modified (for microemulsion))	NP		PREVIDENT 5000 BOOSTER PLUS PSTE DT (sodium fluoride (dental))	NP	QL(113 ml per 60 day(s) retail)
PROGRAF CAPS (tacrolimus)	NP		PREVIDENT 5000 DRY MOUTH GEL (sodium fluoride (dental))	NP	QL(113 ml per 60 day(s) retail)
RAPAMUNE SOLN (sirolimus)	NP		PREVIDENT 5000 KIDS PSTE DT (sodium fluoride (dental))	NP	QL(113 ml per 60 day(s) retail)
RAPAMUNE TABS (sirolimus)	NP		PREVIDENT 5000 ORTHO DEFENSE PSTE DT (sodium fluoride (dental))	NP	QL(113 ml per 60 day(s) retail)
SANDIMMUNE CAPS (cyclosporine)	NP		PREVIDENT 5000 PLUS CREA (sodium fluoride (dental))	NP	QL(113 gm per 60 day(s) retail)
SANDIMMUNE SOLN OR sirolimus SOLN	P	QL(8 ml daily)	PREVIDENT FLUORIDE GEL (sodium fluoride (dental))	NP	QL(113 gm per 60 day(s) retail)
sirolimus TABS	P		sodium fluoride (dental) CREA	P	QL(113 gm per 60 day(s) retail)
tacrolimus CAPS	P		sodium fluoride (dental) GEL	P	QL(113 gm per 60 day(s) retail)
Potassium Removing Agents			sodium fluoride (dental) PSTE DT	P	QL(113 gm per 60 day(s) retail)
sodium polystyrene sulfonate POWD	P		Steroids - Mouth/Throat/Dental		
sodium polystyrene sulfonate SUSP OR 15 GM/60ML	P		triamcinolone acetonide (mouth)	P	1 package(s) per fill retail
MOUTH/THROAT/DENTAL AGENTS			Throat Products - Misc.		
Anesthetics Topical Oral			AQUORAL SOLN	P	QL(900 ml per fill retail); RX/OTC
lidocaine hcl (mouth-throat) 2 %	P	QL(100 ml per fill retail)	BIOTENE DRY MOUTH MOISTURIZING SPRAY SOLN	P	QL(900 ml per fill retail); RX/OTC
Anti-infectives - Throat			CAPHOSOL SOLN	P	QL(900 ml per fill retail); RX/OTC
NYSTATIN 100000 UNIT/ML (nystatin (mouth-throat))	NP	2 package(s) per fill retail	CVS DRY MOUTH SPRAY SOLN	P	QL(900 ml per fill retail); RX/OTC
nystatin (mouth-throat)	P	2 package(s) per fill retail	Dental Products		
Antiseptics - Mouth/Throat					
chlorhexidine gluconate (mouth-throat)	P				
PERIDEX (chlorhexidine gluconate (mouth-throat))	NP				

Drug Name	Drug Tier	Requirements/Limits
EQL DRY MOUTH ORAL RINSE SOLN	P	QL(900 ml per fill retail); RX/OTC
MOI-STIR SOLN	P	QL(900 ml per fill retail); RX/OTC
MOUTH KOTE REMINT SOLN	P	QL(900 ml per fill retail); RX/OTC
MOUTH KOTE SOLN	P	QL(900 ea per fill retail); RX/OTC
NUMOISYN LIQD	P	QL(900 ml per fill retail); RX/OTC
ORAL RELIEF SPRAY FOR DRYMOUTH & DISCOMFORT SOLN	P	QL(900 ml per fill retail); RX/OTC
<i>pilocarpine hcl (oral) 5 MG</i>	P	QL(6 ea daily)
RA DRY MOUTH SOLN	P	QL(900 ml per fill retail); RX/OTC
SALAGEN 5 MG (<i>pilocarpine hcl (oral)</i>)	NP	QL(6 ea daily)
XEROSTOMIA RELIEF SPRAY SOLN	P	QL(900 ml per fill retail); RX/OTC
MULTIVITAMINS		
B-Complex Vitamins		
<i>b-complex vitamins CAPS</i>	P	QL(1 ea daily)
<i>b-complex vitamins TABS</i>	P	QL(1 ea daily)
B-Complex w/ C		
<i>b complex w/ c CAPS</i>	P	QL(1 ea daily)
B-Complex w/ Folic Acid		
<i>b-complex w/ c & folic acid CAPS</i>	P	QL(1 ea daily); RX/OTC
<i>b-complex w/ folic acid CAPS</i>	P	QL(1 ea daily); PA
<i>b-complex w/biotin & folic acid TABS</i>	P	QL(1 ea daily); PA
Multiple Vitamins w/ Calcium		

Drug Name	Drug Tier	Requirements/Limits
<i>multiple vitamins w/ calcium TABS</i>	P	QL(1 ea daily)
ONE-A-DAY WOMENS FORMULA TABS (<i>multiple vitamins w/ calcium</i>)	NP	QL(1 ea daily)
SM ONE DAILY ESSENTIAL TABS	P	QL(1 ea daily)
Multiple Vitamins w/ Iron		
<i>multiple vitamins w/ iron TABS</i>	P	QL(1 ea daily)
TAB-A-VITE MULTIVITAMIN/IRON AND BETA-CAROTENE TABS	P	QL(1 ea daily)
Multiple Vitamins w/ Minerals		
ACTIVNUTRIENTS PERFORMANCE CAPS	P	QL(1 ea daily); RX/OTC
ACTIVNUTRIENTS W/O IRON CAPS	P	QL(1 ea daily); RX/OTC
ACTIVNUTRIENTS CAPS	P	QL(1 ea daily); RX/OTC
ALIVE EVERYDAY IMMUNE HEALTH CAPS	P	QL(1 ea daily); RX/OTC
APETIBEX CAPS	P	QL(1 ea daily); RX/OTC
APPE-CURB CAPS	P	QL(1 ea daily); RX/OTC
BARIATRIC MULTIVITAMINS/IRON CAPS	P	QL(1 ea daily); RX/OTC
BIO-35 GLUTEN-FREE CAPS	P	QL(1 ea daily); RX/OTC
BIO-35 IRON FREE CAPS	P	QL(1 ea daily); RX/OTC
BIOCAL CAPS	P	QL(1 ea daily); RX/OTC
BONEUP 3 PER DAY CAPS	P	QL(1 ea daily); RX/OTC
BONEUP CAPS	P	QL(1 ea daily); RX/OTC
BOOSTNOW IMMUNE SUPPORT CAPS	P	QL(1 ea daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CELEBRATE MULTI-COMplete18 CAPS	P	QL(1 ea daily); RX/OTC	IMMUNE ESSENTIALS DAILY CAPS	P	QL(1 ea daily); RX/OTC
CELEBRATE MULTI-COMplete36 CAPS	P	QL(1 ea daily); RX/OTC	MENATROL CAPS	P	QL(1 ea daily); RX/OTC
CELEBRATE MULTI-COMplete45 CAPS	P	QL(1 ea daily); RX/OTC	MENS 50+ ADVANCED CAPS	P	QL(1 ea daily); RX/OTC
CELEBRATE MULTI-COMplete60 CAPS	P	QL(1 ea daily); RX/OTC	MOOD FOOD ES CAPS	P	QL(1 ea daily); RX/OTC
CHOICEFUL MULTIVITAMIN CAPS	P	QL(1 ea daily); RX/OTC	MOOD FOOD CAPS	P	QL(1 ea daily); RX/OTC
CVS ADULT 50+ EYE HEALTH CAPS	P	QL(1 ea daily); RX/OTC	MULTIPLE VITAMINS W/ MINERALS TABS - MISC	P	1 per day
CVS EYE HEALTH ADULT 50+ CAPS	P	QL(1 ea daily); RX/OTC	<i>multiple vitamins w/ minerals CAPS</i>	P	QL(1 ea daily); RX/OTC
CVS IMMUNE SUPPORT CAPS	P	QL(1 ea daily); RX/OTC	MVW COMPLETE FORMULATION CAPS	P	QL(1 ea daily); RX/OTC
CVS VISION HEALTH CAPS	P	QL(1 ea daily); RX/OTC	MVW COMPLETE FORMULATIONND3000 CAPS	P	QL(1 ea daily); RX/OTC
DECUBI-VITE CAPS	P	QL(1 ea daily); RX/OTC	MVW COMPLETE FORMULATIONND500 CAPS	P	QL(1 ea daily); RX/OTC
DEKAS PLUS OCEAN CAPS	P	QL(1 ea daily); RX/OTC	MVW COMPLETE FORMULATIONMINIS CAPS	P	QL(1 ea daily); RX/OTC
DEKAS PLUS CAPS	P	QL(1 ea daily); RX/OTC	MVW MODULATOR FORMULATION MINIS CAPS	P	QL(1 ea daily); RX/OTC
DEXATRAN CAPS	P	QL(1 ea daily); RX/OTC	MVW MODULATOR FORMULATION CAPS	P	QL(1 ea daily); RX/OTC
EYE HEALTH CAPS	P	QL(1 ea daily); RX/OTC	OCUVEL CAPS 250 MG-0.5 MG-5 MG-1 MG-40 MG-1 MG-200 UNIT	P	QL(1 ea daily); RX/OTC
EYE MULTIVITAMIN/LUTEIN CAPS	P	QL(1 ea daily); RX/OTC	OCUVITE ADULT 50+ CAPS	P	QL(1 ea daily); RX/OTC
EYE MULTIVITAMIN CAPS	P	QL(1 ea daily); RX/OTC	OCUVITE ADULT FORMULA CAPS	P	QL(1 ea daily); RX/OTC
FOLAGENT DHA CAPS	P	QL(1 ea daily); RX/OTC	OCUVITE LUTEIN CAPS	P	QL(1 ea daily); RX/OTC
FOLAMED DHA CAPS	P	QL(1 ea daily); RX/OTC	ONE-DAILY MULTI CAPS CAPS	P	QL(1 ea daily); RX/OTC
GENADEK STEP 1 CAPS	P	QL(1 ea daily); RX/OTC	PRESCRIPTION SUPPORT CAPS	P	QL(1 ea daily); RX/OTC
GENADEK STEP 2 CAPS	P	QL(1 ea daily); RX/OTC			
HAIR/SKIN/NAILS CAPS	P	QL(1 ea daily); RX/OTC			
HEALTHY EYES SUPERVISION2 CAPS	P	QL(1 ea daily); RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PRESERVISION AREDS 2 + MULTI VITAMIN CAPS	P	QL(1 ea daily); RX/OTC	VITEYES CLASSIC ADVANCED CAPS	P	QL(1 ea daily); RX/OTC
PRESERVISION AREDS 2 CAPS	P	QL(1 ea daily); RX/OTC	VITEYES CLASSIC MACULAR SUPPORT CAPS	P	QL(1 ea daily); RX/OTC
PRESERVISION AREDS CAPS	P	QL(1 ea daily); RX/OTC	VITEYES CLASSIC/OMEGA-3 CAPS	P	QL(1 ea daily); RX/OTC
PRESERVISION/LUTEIN CAPS	P	QL(1 ea daily); RX/OTC	VITEYES CLASSIC+OMEGA-3 CAPS	P	QL(1 ea daily); RX/OTC
PRORENAL+D/OMEGA-3 CAPS	P	QL(1 ea daily); RX/OTC	VITEYES CLASSIC CAPS	P	QL(1 ea daily); RX/OTC
PROTECT CARDIO AF CAPS	P	QL(1 ea daily); RX/OTC	Multivitamins		
PROTECT PLUS SO CAPS	P	QL(1 ea daily); RX/OTC	ALTRIXA TABS	P	QL(1 ea daily); RX/OTC
PROTEGRA CAPS	P	QL(1 ea daily); RX/OTC	AMLADEX TABS	P	QL(1 ea daily); RX/OTC
QC OCUHEALTH VISION SUPPORT 2 CAPS	P	QL(1 ea daily); RX/OTC	DAILY MULTIPLE VITAMINS TABS	P	QL(1 ea daily); RX/OTC
REMEDIENT CAPS	P	QL(1 ea daily); RX/OTC	DAVIMET-M CHEW	P	QL(1 ea daily); RX/OTC
SKIN HAIR & NAILS ADVANCED BEAUTY CAPS	P	QL(1 ea daily); RX/OTC	DERMACINRX DAVIMET CHEW	P	QL(1 ea daily); RX/OTC
SUPER ANTIOXIDANT CAPS	P	QL(1 ea daily); RX/OTC	ESTROFACTORS TABS	P	QL(1 ea daily); RX/OTC
SUPPORT-500 CAPS	P	QL(1 ea daily); RX/OTC	FOLCYTEINE TABS	P	QL(1 ea daily); RX/OTC
THERAMILL FORTE CAPS	P	QL(1 ea daily); RX/OTC	GENICIN VITA-Q TABS	P	QL(1 ea daily); RX/OTC
THERANATAL LACTATION ONE CAPS	P	QL(1 ea daily); RX/OTC	HIGH POTENCY MULTIVITAMIN TABS	P	QL(1 ea daily); RX/OTC
VISION HEALTH CAPS	P	QL(1 ea daily); RX/OTC	MULTI VITAMIN/D-3 TABS	P	QL(1 ea daily); RX/OTC
VISION OPTIMIZER CAPS	P	QL(1 ea daily); RX/OTC	MULTI VITAMIN TABS	P	QL(1 ea daily); RX/OTC
VISTA ADVANCED AREDS2 FORMULA CAPS	P	QL(1 ea daily); RX/OTC	<i>multiple vitamin TABS</i>	P	QL(1 ea daily); RX/OTC
VISTA ADVANCED DRY EYE FORMULA CAPS	P	QL(1 ea daily); RX/OTC	MULTIVITAMIN ADULT TABS	P	QL(1 ea daily); RX/OTC
VITABEX PLUS CAPS	P	QL(1 ea daily); RX/OTC	MULTIVITAMIN TABS	P	QL(1 ea daily); RX/OTC
VITABEX CAPS	P	QL(1 ea daily); RX/OTC	NEOMULTIVITE TABS	P	QL(1 ea daily); RX/OTC
			OMNICAP TABS	P	QL(1 ea daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ONE DAILY ESSENTIALS TABS	P	QL(1 ea daily); RX/OTC	CENTRUM KIDS CHEW	P	QL(1 ea daily)
ONE DAILY ESSENTIAL TABS	P	QL(1 ea daily); RX/OTC	CHILDRENS GUMMIES CHEW	P	QL(1 ea daily)
ONE VITE DAILY MULTIVITAMIN TABS	P	QL(1 ea daily); RX/OTC	CVS GUMMY DINOS CHILDRENS CHEW	P	QL(1 ea daily)
ONE-A-DAY ADULT VITACRAVES MULTI+OMEGA-3 DHA GUMMIES CHEW	P	QL(1 ea daily); RX/OTC	CVS GUMMY DINOS CHEW	P	QL(1 ea daily)
ONE-A-DAY ESSENTIAL TABS (<i>multiple vitamin</i>)	NP	QL(1 ea daily); RX/OTC	CVS GUMMY MULTIVITAMIN KIDS CHEW	P	QL(1 ea daily)
ONE-A-DAY MENS TABS (<i>multiple vitamin</i>)	NP	QL(1 ea daily); RX/OTC	EQ MULTIVITAMIN GUMMIES CHILDRENS CHEW	P	QL(1 ea daily)
QUINTABS TABS	P	QL(1 ea daily); RX/OTC	EQ MULTIVITAMINS CHILDRENS GUMMY CHEW	P	QL(1 ea daily)
THERA TABS	P	QL(1 ea daily); RX/OTC	EQL GUMMIES CHILDRENS CHEW	P	QL(1 ea daily)
THEREMS MULTIVITAMIN TABS	P	QL(1 ea daily); RX/OTC	FLINTSTONES COMPLETE/CALCIUM & VITAMIN D CHEW	P	QL(1 ea daily)
TM-DAILY VITE TABS	P	QL(1 ea daily); RX/OTC	FLINTSTONES COMPLETE CHEW	P	QL(1 ea daily)
TRUE MULTIVITAMIN TABS	P	QL(1 ea daily); RX/OTC	FLINTSTONES GUMMIES COMPLETE CHEW	P	QL(1 ea daily)
VITAZYME TABS	P	QL(1 ea daily); RX/OTC	FLINTSTONES GUMMIES PLUSBONE BUILDING SUPPORT CHEW	P	QL(1 ea daily)
Ped Multi Vitamins w/Fl & FE			FLINTSTONES GUMMIES/IMMUNITY SUPPORT/EXTRA C CHEW	P	QL(1 ea daily)
<i>ped multivitamins w/fl & iron SOLN</i>	P	QL(50 ml per fill retail); AL(Up to 21 yrs old); RX/OTC	FLINTSTONES GUMMIES CHEW	P	QL(1 ea daily)
Ped Multiple Vitamins w/ Minerals			FLINTSTONES SOUR GUMMIES CHEW	P	QL(1 ea daily)
ACTIVNUTRIENTS CHEWABLE CHEW	P	QL(1 ea daily)	FLINTSTONES TODDLER/TASTISMOUTH CHEW	P	QL(1 ea daily)
ACTIVNUTRIENTS CHEW	P	QL(1 ea daily)	FLINTSTONES/IMMUNITY SUPPORT CHEW	P	QL(1 ea daily)
ALIVE GUMMIES FOR CHILDREN CHEW	P	QL(1 ea daily)	GNP MULTI CHILDRENS CHEW	P	QL(1 ea daily)
ALIVE MULTI-VITAMIN CHILDRENS CHEWABLE CHEW	P	QL(1 ea daily)			
CENTRUM FLAVOR BURST KIDS CHEW	P	QL(1 ea daily)			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
GUMMI BEAR MULTIVITAMIN/MINERAL CHEW	P	QL(1 ea daily)	VITALETS CHILDRENS CHEW	P	QL(1 ea daily)
HEALTHY KIDS GUMMIES CHEW	P	QL(1 ea daily)	YUMVSKIDS MULTI ZERO CHEW	P	QL(1 ea daily)
JUST 4 KIDZ MULTIVITAMIN+PROBIOTIC CHEW	P	QL(1 ea daily)	ZOO FRIENDS MULTI GUMMIES CHEW	P	QL(1 ea daily)
MULTIVITAMIN GUMMIES CHILDRENS CHEW	P	QL(1 ea daily)	Ped MV w/ Fluoride		
MVW COMPLETE FORMULATION CHEW	P	QL(1 ea daily)	PEDIATRIC MULTIVITAMIN W/FL CHEW	P	AL: Up to 15 years
MVW COMPLETE FORMULATIOND3000 CHEW	P	QL(1 ea daily)	PEDIATRIC MULTIVITAMIN W/FL SOLN	P	AL: Up to 15 years
MVW COMPLETE FORMULATIOND5000 CHEW	P	QL(1 ea daily)	Ped MV w/ Iron		
ONE-A-DAY SCOOBY-DOO GUMMIES CHEW <i>(pediatric multiple vitamin w/ minerals)</i>	NP	QL(1 ea daily)	BPROTECTED PEDIA POLY-VITE/IRON SOLN	P	QL(60 ml per fill retail)
ONE-A-DAY/JOLLY RANCHER CHEW	P	QL(1 ea daily)	MULTIVITAMIN W/IRON/INFANT/TODDLER SOLN	P	QL(60 ml per fill retail)
<i>pediatric multiple vitamin w/ minerals & c CHEW 400 UNIT-60 MG-2 MG-45 MCG-400 MCG-6 MCG-1.7 MG-10 MCG-20 MG-3500 UNIT-10 MG-1.5 MG-15 MG-2 MG-40 MG-108 MG-20 MCG-150 MCG-30 UNIT-50 MG-1 MG-20 MCG-18 MG</i>	P	QL(1 ea daily)	PC PEDIATRIC POLY-VITAMIN DROPS/IRON SOLN	P	QL(60 ml per fill retail)
SMARTY PANTS KIDS COMPLETE AND FIBER CHEW	P	QL(1 ea daily)	POLY-VI-SOL/IRON SOLN	P	QL(60 ml per fill retail)
SPONGEBOB SQUAREPANTS GUMMIES CHEW	P	QL(1 ea daily)	POLY-VITA/IRON SOLN	P	QL(60 ml per fill retail)
VITACHEW MULTIPLE VITAMINCHILDRENS CHEW	P	QL(1 ea daily)	POLY-VITE/IRON SOLN	P	QL(60 ml per fill retail)
			Pediatric Multiple Vitamins		
			BPROTECTED PEDIA POLY-VITE SOLN OR	P	QL(50 ml per fill retail)
			MULTIVITAMIN INFANT & TODDLER SOLN OR	P	QL(50 ml per fill retail)
			MULTIVITAMIN INFANT/TODDLER SOLN OR	P	QL(50 ml per fill retail)
			PC PEDIATRIC POLY-VITAMIN DROPS SOLN OR	P	QL(50 ml per fill retail)
			POLY-VI-SOL SOLN OR	P	QL(50 ml per fill retail)
			POLY-VITA SOLN OR	P	QL(50 ml per fill retail)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
POLY-VITE PEDIATRIC SOLN OR	P	QL(50 ml per fill retail)	MEMORY COMPLEX BRAIN HEALTH TABS	P	QL(1 ea daily); RX/OTC
Prenatal Vitamins			MG PLUS PROTEIN TABS	P	QL(1 ea daily); RX/OTC
PRENATAL VITAMINS - MISC	P		MIL ADREGEN TABS	P	QL(1 ea daily); RX/OTC
SELECT-OB+DHA MISC	P	QL(1 ea daily)	RA EAR CARE TABS	P	QL(1 ea daily); RX/OTC
VITAFOL-ONE CAPS	P	QL(1 ea daily)	<i>specialty vitamins products TABS</i>	P	QL(1 ea daily); RX/OTC
Specialty Vitamins Products			THERABETIC EYE HEALTH TABS	P	QL(1 ea daily); RX/OTC
ADRENAL STRESS CALM TABS	P	QL(1 ea daily); RX/OTC	UPSPRING HE NATAL TABS	P	QL(1 ea daily); RX/OTC
ALLERWELL ALLERGY FORMULA TABS	P	QL(1 ea daily); RX/OTC	Vitamins w/ Lipotropics		
BIOTIN PLUS KERATIN TABS	P	QL(1 ea daily); RX/OTC	<i>vitamins w/ lipotropics CAPS</i>	P	QL(1 ea daily)
BRAIN MIGHT/DHA & CO Q10 TABS	P	QL(1 ea daily); RX/OTC	MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms		
CENTRUM PERFORMANCE TABS	P	QL(1 ea daily); RX/OTC	Central Muscle Relaxants		
CENTRUM SPECIALIST ENERGY TABS	P	QL(1 ea daily); RX/OTC	<i>baclofen TABS 10 MG, 20 MG</i>	P	
CVS HAIR/SKIN/NAILS TABS	P	QL(1 ea daily); RX/OTC	<i>chlorzoxazone TABS 500 MG</i>	P	
ELON MATRIX 5000 TABS	P	QL(1 ea daily); RX/OTC	<i>cyclobenzaprine hcl TABS 7.5 MG</i>	P	QL(4 ea daily)
ELON MATRIX PLUS TABS	P	QL(1 ea daily); RX/OTC	<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	P	QL(3 ea daily)
ELON MATRIX 5000 COMPLETE TABS	P	QL(1 ea daily); RX/OTC	<i>methocarbamol TABS 500 MG, 750 MG</i>	P	
ELON MATRIX COMPLETE TABS	P	QL(1 ea daily); RX/OTC	<i>orphenadrine citrate TB12</i>	P	QL(2 ea daily)
ELON R3 TABS	P	QL(1 ea daily); RX/OTC	<i>tizanidine hcl TABS</i>	P	
HAIR FARE TABS	P	QL(1 ea daily); RX/OTC	ZANAFLEX TABS 4 MG (<i>tizanidine hcl</i>)	NP	
HAIR NOURISHING SUPPLEMENT TABS	P	QL(1 ea daily); RX/OTC	Viscosupplements		
HEALTHY HEART COMPLEX TABS	P	QL(1 ea daily); RX/OTC	EUFLEXXA SOSY	P	SP; PA
HEART TABS TABS	P	QL(1 ea daily); RX/OTC	HYALGAN SOSY	P	SP; PA
LIPIDSHIELD PLUS TABS	P	QL(1 ea daily); RX/OTC	MONOVISC	P	SP; PA
			ORTHOVISC	P	SP; PA
			SYNOJOYNT SOSY	P	SP; PA

Drug Name	Drug Tier	Requirements/Limits
SYNVISC ONE SOSY	P	SP; PA
SYNVISC SOSY	P	SP; PA
TRILURON SOSY	P	SP; PA
NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus		
Nasal Agents - Misc.		
LITTLE REMEDIES SALINE SPRAY/DROPS SOLN	P	1 package(s) per fill retail
OCEAN NASAL SPRAY SOLN (<i>saline</i>)	NP	1 package(s) per fill retail
<i>saline</i> SOLN	P	1 package(s) per fill retail
Nasal Antiallergy		
<i>azelastine hcl</i>	P	1 package(s) per 31 day(s) retail; RX/OTC
<i>cromolyn sodium (nasal) 5.2 MG/ACT</i>	P	QL(26 ml per 31 day(s) retail)
NASALCROM (<i>cromolyn sodium (nasal)</i>)	NP	QL(26 ml per 31 day(s) retail)
Nasal Anticholinergics		
<i>ipratropium bromide (nasal) 0.06 %</i>	P	QL(15 ml per 31 day(s) retail)
<i>ipratropium bromide (nasal) 0.03 %</i>	P	QL(31 ml per 31 day(s) retail)
Nasal Steroids		
<i>budesonide (nasal)</i>	P	QL(9 ml per 31 day(s) retail)
FLONASE ALLERGY RELIEF CHILDRENS SUSP (<i>fluticasone propionate (nasal)</i>)	NP	1 package(s) per fill retail; RX/OTC
FLONASE ALLERGY RELIEF SUSP (<i>fluticasone propionate (nasal)</i>)	NP	1 package(s) per fill retail; RX/OTC
<i>flunisolide (nasal) 0.025 %</i>	P	QL(25 ml per 31 day(s) retail)

Drug Name	Drug Tier	Requirements/Limits
<i>fluticasone propionate (nasal) SUSP</i>	P	1 package(s) per fill retail; RX/OTC
NASACORT ALLERGY 24HR CHILDRENS AERO (<i>triamcinolone acetonide (nasal)</i>)	NP	QL(17 ml per 31 day(s) retail); AL(At least 2 yrs old)
NASACORT ALLERGY 24HR AERO (<i>triamcinolone acetonide (nasal)</i>)	NP	QL(17 ml per 31 day(s) retail); AL(At least 2 yrs old)
<i>triamcinolone acetonide (nasal) AERO</i>	P	QL(17 ml per 31 day(s) retail); AL(At least 2 yrs old)
Sympathomimetic Decongestants		
<i>phenylephrine hcl (oral) TABS</i>	P	QL(24 ea per fill retail)
<i>pseudoephedrine hcl TABS</i>	P	
<i>pseudoephedrine hcl TB12</i>	P	QL(2 ea daily)
SUDAFED CHILDRENS LIQD	P	
NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles		
ALS Agents		
RILUTEK TABS (<i>riluzole</i>)	NP	PA
<i>riluzole</i> TABS	P	PA
Muscular Dystrophy Agents		
VYONDYS 53	P	SP; PA
NUTRIENTS		
Carbohydrates		
POLYCOSE LIQD	P	QL(124 ml per 31 day(s) retail)
POLYCOSE POWD	P	QL(350 gm per 31 day(s) retail)
Misc. Nutritional Substances		
<i>omega-3 fatty acids CAPS</i>	P	QL(6 ea daily)
OPHTHALMIC AGENTS - Drugs to Treat the Eye		

Drug Name	Drug Tier	Requirements/Limits
Artificial Tears and Lubricants		
<i>polyvinyl alcohol 1.4 %</i>	P	
<i>white petrolatum-mineral oil</i>	P	1 package(s) per fill retail
Beta-blockers - Ophthalmic		
<i>betaxolol hcl (ophth) SOLN</i>	P	1 package(s) per 31 day(s) retail
<i>carteolol hcl (ophth)</i>	P	1 max fill(s) per 31 day(s) retail
<i>COSOPT (dorzolamide hcl-timolol maleate)</i>	NP	QL(10 ml per 31 day(s) retail)
DORZOLAMIDE HCL/TIMOLOL MALEATE	P	QL(10 ml per 31 day(s) retail)
<i>dorzolamide hcl-timolol maleate</i>	P	QL(10 ml per 31 day(s) retail)
<i>levobunolol hcl 0.5 %</i>	P	QL(15 ml per 31 day(s) retail)
<i>timolol maleate (ophth) SOLN</i>	P	QL(15 ml per 31 day(s) retail)
TIMOPTIC OCUDOSE SOLN (timolol maleate (ophth))	NP	QL(15 ea per 31 day(s) retail)
TIMOPTIC SOLN (timolol maleate (ophth))	NP	QL(15 ml per 31 day(s) retail)
Cycloplegic Mydriatics		
<i>atropine sulfate (ophthalmic) OINT</i>	P	QL(4 gm per fill retail)
<i>atropine sulfate (ophthalmic) SOLN</i>	P	
ATROPINE SULFATE SOLN 1 % (atropine sulfate (ophthalmic))	NP	
CYCLOGYL (cyclopentolate hcl)	NP	
CYCLOGYL 0.5 %	P	
CYCLOGYL 2 %	P	1 package(s) per 31 day(s) retail
<i>cyclopentolate hcl 2 %</i>	P	1 package(s) per 31 day(s) retail

Drug Name	Drug Tier	Requirements/Limits
<i>cyclopentolate hcl 0.5 %, 1 %</i>	P	
<i>homatropine hbr</i>	P	
MYDRIACYL SOLN (tropicamide)	NP	
<i>tropicamide SOLN</i>	P	
Miotics		
ISOPTO CARPINE SOLN 1 % (pilocarpine hcl)	NP	
<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	P	
Ophthalmic - Angiogenesis Inhibitors		
BEOVU SOLN	P	SP; PA
BEVACIZUMAB IZ 1.25 MG/0.05ML, 2 MG/0.08ML, 2.5 MG/0.1ML, 3 MG/0.12ML, 3.25 MG/0.13ML, 3.75 MG/0.15ML	P	SP; PA
EYLEA SOSY	P	SP; PA
Ophthalmic Adrenergic Agents		
<i>apraclonidine hcl</i>	P	
<i>brimonidine tartrate 0.2 %</i>	P	1 package(s) per 31 day(s) retail
IOPIDINE	P	
Ophthalmic Anti-infectives		
BACIGUENT	P	QL(4 gm per 31 day(s) retail)
<i>bacitracin (ophthalmic)</i>	P	QL(4 gm per 31 day(s) retail)
<i>bacitracin-polymyxin b (ophth)</i>	P	QL(4 gm per 31 day(s) retail)
BLEPH-10 SOLN (sulfacetamide sodium (ophth))	NP	QL(15 ml per 31 day(s) retail)
CILOXAN OINT	P	1 package(s) per fill retail
<i>ciprofloxacin hcl (ophth) SOLN</i>	P	1 package(s) per fill retail
ERYTHROMYCIN	P	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>erythromycin (ophth)</i>	P		VISINE RED EYE COMFORT (<i>tetrahydrozoline hcl (ophth)</i>)	NP	1 package(s) per 31 day(s) retail
<i>gentamicin sulfate (ophth) OINT</i>	P	QL(4 gm per 31 day(s) retail)	Ophthalmic Local Anesthetics		
<i>gentamicin sulfate (ophth) SOLN</i>	P	2 package(s) per fill retail	<i>tetracaine hcl (ophth)</i>	P	
<i>moxifloxacin hcl (ophth) SOLN OP</i>	P	QL(3 ml per fill retail)	Ophthalmic Steroids		
<i>neomycin-bacitracin zn-polymyxin</i>	P	QL(4 gm per 31 day(s) retail)	BLEPHAMIDE S.O.P. OINT	P	
<i>neomycin-polymyxin-gramicidin</i>	P	1 package(s) per fill retail	<i>dexamethasone sodium phosphate (ophth)</i>	P	
OCUFLOX (<i>ofloxacin (ophth)</i>)	NP	QL(10 ml per 31 day(s) retail)	<i>fluorometholone (ophth) SUSP</i>	P	1 package(s) per 31 day(s) retail
<i>ofloxacin (ophth)</i>	P	QL(10 ml per 31 day(s) retail)	FML LIQUIFILM SUSP (<i>fluorometholone (ophth)</i>)	NP	1 package(s) per 31 day(s) retail
<i>polymyxin b-trimethoprim</i>	P	1 package(s) per fill retail; 1 max fill(s) per 30 day(s) retail	FML OINT	P	QL(4 gm per 31 day(s) retail)
<i>sulfacetamide sodium (ophth) OINT</i>	P	QL(4 gm per 31 day(s) retail)	MAXITROL OINT (<i>neomycin-polymy-dexameth</i>)	NP	QL(4 gm per 31 day(s) retail)
<i>sulfacetamide sodium (ophth) SOLN</i>	P	QL(15 ml per 31 day(s) retail)	MAXITROL SUSP (<i>neomycin-polymy-dexameth</i>)	NP	QL(10 ml per 31 day(s) retail)
<i>tobramycin (ophth) SOLN</i>	P	QL(5 ml per 31 day(s) retail)	<i>neomycin-polymy-dexameth OINT</i>	P	QL(4 gm per 31 day(s) retail)
TOBREX OINT	P		<i>neomycin-polymy-dexameth SUSP</i>	P	QL(10 ml per 31 day(s) retail)
<i>trifluridine</i>	P	QL(8 ml per 31 day(s) retail)	<i>neomycin-polymyxin-hc (ophth)</i>	P	QL(15 ml per 31 day(s) retail)
VIGAMOX SOLN OP (<i>moxifloxacin hcl (ophth)</i>)	NP	QL(3 ml per fill retail)	PRED FORTE (<i>prednisolone acetate (ophth)</i>)	NP	QL(15 ml per 31 day(s) retail)
Ophthalmic Decongestants			PRED MILD	P	1 package(s) per 31 day(s) retail
<i>naphazoline w/ pheniramine</i>	P	QL(15 ml per 31 day(s) retail)	PRED-G SUSP	P	1 package(s) per fill retail
NAPHCON-A (<i>naphazoline w/ pheniramine</i>)	NP	QL(15 ml per 31 day(s) retail)	<i>prednisolone acetate (ophth)</i>	P	QL(15 ml per 31 day(s) retail)
OPCON-A (<i>naphazoline w/ pheniramine</i>)	NP	QL(15 ml per 31 day(s) retail)	PREDNISOLONE ACETATE P-F	P	QL(15 ml per 31 day(s) retail)
<i>tetrahydrozoline hcl (ophth) 0.05 %</i>	P	1 package(s) per 31 day(s) retail			

Drug Name	Drug Tier	Requirements/Limits
PREDNISOLONE SODIUM PHOSPHATE	P	1 package(s) per 31 day(s) retail
<i>sulfacetamide sod-prednisolone SOLN</i>	P	QL(10 ml per 31 day(s) retail)
TOBRADEX OINT	P	QL(4 gm per 31 day(s) retail)
TOBRADEX SUSP (<i>tobramycin-dexamethasone</i>)	NP	1 package(s) per 31 day(s) retail
<i>tobramycin-dexamethasone SUSP</i>	P	1 package(s) per 31 day(s) retail
Ophthalmics - Misc.		
ACULAR (<i>ketorolac tromethamine (ophth)</i>)	NP	1 package(s) per 31 day(s) retail
ACULAR LS (<i>ketorolac tromethamine (ophth)</i>)	NP	1 max fill(s) per 31 day(s) retail
ALOCRIIL	P	QL(5 ml per 31 day(s) retail)
ALOMIDE	P	QL(10 ml per 31 day(s) retail)
<i>azelastine hcl (ophth)</i>	P	QL(6 ml per 31 day(s) retail)
AZOPT (<i>brinzolamide</i>)	NP	1 package(s) per 31 day(s) retail
<i>brinzolamide</i>	P	1 package(s) per 31 day(s) retail
<i>cromolyn sodium (ophth)</i>	P	QL(10 ml per 31 day(s) retail)
<i>diclofenac sodium (ophth)</i>	P	QL(3 ml per 31 day(s) retail)
<i>dorzolamide hcl</i>	P	QL(10 ml per 31 day(s) retail)
DORZOLAMIDE HCL	P	QL(10 ml per 31 day(s) retail)
<i>flurbiprofen sodium</i>	P	QL(5 ml per 31 day(s) retail)
<i>ketorolac tromethamine (ophth) 0.5 %</i>	P	1 package(s) per 31 day(s) retail
<i>ketorolac tromethamine (ophth) 0.4 %</i>	P	1 max fill(s) per 31 day(s) retail

Drug Name	Drug Tier	Requirements/Limits
<i>ketotifen fumarate (ophth) 0.035 %</i>	P	QL(10 ml per 31 day(s) retail)
TRUSOPT (<i>dorzolamide hcl</i>)	NP	QL(10 ml per 31 day(s) retail)
ZADITOR 0.035 % (<i>ketotifen fumarate (ophth)</i>)	NP	QL(10 ml per 31 day(s) retail)
Prostaglandins - Ophthalmic		
<i>latanoprost SOLN</i>	P	QL(5 ml per 31 day(s) retail)
XALATAN SOLN (<i>latanoprost</i>)	NP	QL(5 ml per 31 day(s) retail)
OTIC AGENTS - Drugs to Treat the Ear		
Otic Agents - Miscellaneous		
<i>acetic acid (otic)</i>	P	QL(15 ml per 31 day(s) retail)
<i>carbamide peroxide (otic) 6.5 %</i>	P	QL(15 ml per 31 day(s) retail)
DEBROX 6.5 % (<i>carbamide peroxide (otic)</i>)	NP	QL(15 ml per 31 day(s) retail)
Otic Anti-infectives		
<i>ofloxacin (otic)</i>	P	1 package(s) per fill retail
Otic Combinations		
CIPRODEX (<i>ciprofloxacin-dexamethasone</i>)	NP	QL(7.5 ml per fill retail); 1 max fill(s) per 30 day(s) retail
<i>ciprofloxacin-dexamethasone</i>	P	QL(7.5 ml per fill retail); 1 max fill(s) per 30 day(s) retail
<i>neomycin-polymyxin-hc (otic) SOLN</i>	P	QL(10 ml per fill retail)
<i>neomycin-polymyxin-hc (otic) SUSP</i>	P	1 package(s) per fill retail
Otic Steroids		
DERMOTIC (<i>fluocinolone acetonide (otic)</i>)	NP	1 package(s) per 31 day(s) retail

Drug Name	Drug Tier	Requirements/Limits
<i>fluocinolone acetonide (otic)</i>	P	1 package(s) per 31 day(s) retail
<i>hydrocortisone w/acetic acid</i>	P	QL(20 ml per 31 day(s) retail)
HYDROCORTISONE/ACETIC ACID (<i>hydrocortisone w/acetic acid</i>)	NP	QL(20 ml per 31 day(s) retail)

OXYTOCICS - Drugs to Prevent/Control Uterine Bleeding

Oxytocics		
<i>methylergonovine maleate TABS</i>	P	

PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System

Immune Serums		
GAMMAGARD LIQUID	P	SP; PA
GAMMAGARD S/D IGA LESS THAN 1MCG/ML SOLR	P	SP; PA
GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	P	SP; PA
GAMUNEX-C 1 GM/10ML, 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	P	SP; PA
HYPERRHO S/D SOSY IM 1500 UNIT	P	SP
OCTAGAM SOLN 30 GM/300ML	P	SP; PA
RHOGAM ULTRA-FILTERED PLUS SOSY IM	P	SP
XEMBIFY	P	SP; PA

Monoclonal Antibodies		
SYNAGIS SOLN	P	SP; PA

PENICILLINS - Drugs to Treat Bacterial Infections

Aminopenicillins

Drug Name	Drug Tier	Requirements/Limits
<i>amoxicillin CAPS</i>	P	
<i>amoxicillin CHEW 125 MG, 250 MG</i>	P	
<i>amoxicillin SUSR</i>	P	
AMOXICILLIN SUSR (<i>amoxicillin</i>)	NP	
<i>amoxicillin TABS 875 MG</i>	P	
<i>ampicillin CAPS 500 MG</i>	P	

Natural Penicillins

<i>penicillin v potassium SOLR</i>	P	
<i>penicillin v potassium TABS</i>	P	

Penicillin Combinations

<i>amoxicillin & pot clavulanate CHEW</i>	P	QL(20 ea per fill retail)
<i>amoxicillin & pot clavulanate SUSR 28.5 MG/5ML-200 MG/5ML, 62.5 MG/5ML-250 MG/5ML</i>	P	1 package(s) per fill retail
<i>amoxicillin & pot clavulanate SUSR 42.9 MG/5ML-600 MG/5ML, 57 MG/5ML-400 MG/5ML</i>	P	2 package(s) per fill retail
<i>amoxicillin & pot clavulanate TABS 125 MG-250 MG, 125 MG-500 MG</i>	P	QL(30 ea per fill retail)
<i>amoxicillin & pot clavulanate TABS 125 MG-875 MG</i>	P	QL(20 ea per fill retail)
<i>amoxicillin & pot clavulanate TB12</i>	P	QL(40 ea per 31 day(s) retail)
AUGMENTIN ES-600 SUSR (<i>amoxicillin & pot clavulanate</i>)	NP	2 package(s) per fill retail
AUGMENTIN SUSR 31.25 MG/5ML-125 MG/5ML	P	1 package(s) per fill retail
AUGMENTIN TABS 125 MG-500 MG (<i>amoxicillin & pot clavulanate</i>)	NP	QL(30 ea per fill retail)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Penicillinase-Resistant Penicillins			ARICEPT TABS 5 MG, 10 MG (<i>donepezil hydrochloride</i>)	NP	QL(1 ea daily)
<i>dicloxacillin sodium</i>	P		<i>donepezil hydrochloride TABS 5 MG, 10 MG</i>	P	QL(1 ea daily)
PHARMACEUTICAL ADJUVANTS			EXELON 4.6 MG/24HR, 9.5 MG/24HR (<i>rivastigmine</i>)	NP	QL(1 ea daily); PA
Internal Vehicle Ingredients/Agents			<i>galantamine hydrobromide CP24</i>	P	QL(1 ea daily)
SIMPLYTHICK	P	AL(At least 1 yrs old)	<i>galantamine hydrobromide SOLN</i>	P	QL(6 ml daily)
SIMPLYTHICK EASY MIX	P	AL(At least 1 yrs old)	<i>galantamine hydrobromide TABS</i>	P	QL(2 ea daily)
SIMPLYTHICK EASYMIX	P	AL(At least 1 yrs old)	<i>memantine hcl SOLN</i>	P	QL(10 ml daily); PA
Liquid Vehicles			<i>memantine hcl TABS</i>	P	QL(2 ea daily)
SORBITOL XX 70 %	P	RX/OTC	<i>memantine hcl TABS</i>	P	Titration pack
Semi Solid Vehicles			NAMENDA TITRATION PAK TABS (<i>memantine hcl</i>)	NP	Titration pack
<i>lanolin XX</i>	P		NAMENDA TABS (<i>memantine hcl</i>)	NP	QL(2 ea daily)
LANOLIN XX	P		RAZADYNE ER CP24 (<i>galantamine hydrobromide</i>)	NP	QL(1 ea daily)
PROGESTINS - Hormone Replacement/Modifying Drugs			<i>rivastigmine 4.6 MG/24HR, 9.5 MG/24HR</i>	P	QL(1 ea daily); PA
Progestins			<i>rivastigmine tartrate CAPS</i>	P	QL(2 ea daily); PA
AYGESTIN TABS (<i>norethindrone acetate</i>)	NP		Combination Psychotherapeutics		
<i>medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG</i>	P		<i>perphenazine-amitriptyline</i>	P	QL(4 ea daily)
<i>norethindrone acetate TABS</i>	P		Fibromyalgia Agents		
<i>progesterone CAPS</i>	P	QL(1 ea daily)	SAVELLA TITRATION PACK MISC	P	QL(55 ea per 365 day(s) retail); PA
PROMETRIUM CAPS (<i>progesterone</i>)	NP	QL(1 ea daily)	SAVELLA TABS	P	QL(2 ea daily); PA
PROVERA (<i>medroxyprogesterone acetate</i>)	NP		Movement Disorder Drug Therapy		
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions			<i>tetrabenazine</i>	P	SP; PA
Agents for Chemical Dependency			XENAZINE (<i>tetrabenazine</i>)	NP	SP; PA
<i>disulfiram 250 MG</i>	P				
Antidementia Agents					

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Multiple Sclerosis Agents			APO-VARENICLINE TABS 0.5 MG	P	Limit: 2 Smoking Cessation Treatments per Year; QL(2 ea daily)
AUBAGIO (<i>teriflunomide</i>)	NP	QL(1 ea daily); SP	<i>bupropion hcl (smoking deterrent)</i>	P	Limit: 2 Smoking Cessation Treatments per Year; QL(2 ea daily)
AVONEX PEN AJKT	P	SP; PA			
AVONEX PSKT	P	SP; PA	NICODERM CQ PT24 TD (<i>nicotine</i>)	NP	Limit: 2 Smoking Cessation Treatments per Year; QL(1 ea daily)
COPAXONE SOSY (<i>glatiramer acetate</i>)	NP	SP			
<i>dimethyl fumarate CDPK</i>	P	SP	NICORETTE MINI LOZG (<i>nicotine polacrilex</i>)	NP	Limit: 2 Smoking Cessation Treatments per Year; QL(20 ea daily)
<i>dimethyl fumarate CPDR</i>	P	SP			
EXTAVIA KIT	P	SP; PA	NICORETTE STARTER KIT GUM (<i>nicotine polacrilex</i>)	NP	Limit: 2 Smoking Cessation Treatments per Year; QL(24 ea daily)
<i> fingolimod hcl</i>	P	QL(1 ea daily); SP			
GILENYA (<i>fingolimod hcl</i>)	NP	QL(1 ea daily); SP	NICORETTE GUM (<i>nicotine polacrilex</i>)	NP	Limit: 2 Smoking Cessation Treatments per Year; QL(24 ea daily)
GILENYA 0.5 MG	P	QL(1 ea daily); SP			
<i>glatiramer acetate SOSY</i>	P	SP	NICORETTE LOZG (<i>nicotine polacrilex</i>)	NP	Limit: 2 Smoking Cessation Treatments per Year; QL(20 ea daily)
PLEGRIDY STARTER PACK SOPN	P	SP; PA			
PLEGRIDY STARTER PACK SOSY SC	P	SP; PA	<i>nicotine polacrilex GUM</i>	P	Limit: 2 Smoking Cessation Treatments per Year; QL(24 ea daily)
PLEGRIDY SOPN	P	SP; PA			
PLEGRIDY SOSY SC	P	SP; PA			
REBIF REBIDOSE TITRATIONPACK SOAJ	P	SP; PA			
REBIF REBIDOSE SOAJ	P	SP; PA			
REBIF TITRATION PACK SOSY	P	SP; PA			
REBIF SOSY	P	SP; PA			
TECFIDERA STARTER PACK CDPK (<i>dimethyl fumarate</i>)	NP	SP			
TECFIDERA CPDR (<i>dimethyl fumarate</i>)	NP	SP			
<i>teriflunomide</i>	P	QL(1 ea daily); SP			
Smoking Deterrents					
APO-VARENICLINE TABS 1 MG	P	QL(2 ea daily); 56 ea per fill retail)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>nicotine polacrilex LOZG</i>	P	Limit: 2 Smoking Cessation Treatments per Year; QL(20 ea daily)	<i>varenicline tartrate TBPK</i>	P	Limit: 2 Smoking Cessation Treatments per Year; QL(53 ea per fill retail); 2 max fill(s) per 365 day(s) retail
NICOTINE TRANSDERMAL SYSTEM KIT	P	Limit: 2 Smoking Cessation Treatments per Year; QL(56 ea per fill retail); 2 max fill(s) per 365 day(s) retail	Transthyretin Amyloidosis Agents		
<i>nicotine MISC XX</i>	P	Limit: 2 Smoking Cessation Treatments per Year; QL(1 ea daily)	TEGSEDI	P	SP; PA
<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	P	Limit: 2 Smoking Cessation Treatments per Year; QL(1 ea daily)	RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions		
NICOTROL INHALER INHA	P	Limit: 2 Smoking Cessation Treatments per Year; QL(16.8 ea daily); SL	Cystic Fibrosis Agents		
NICOTROL NS SOLN	P	Limit: 2 Smoking Cessation Treatments per Year; QL(4 ml daily); SL	ORKAMBI PACK	P	SP; PA
<i>varenicline tartrate TABS 0.5 MG</i>	P	Limit: 2 Smoking Cessation Treatments per Year; QL(2 ea daily)	ORKAMBI TABS	P	SP; PA
<i>varenicline tartrate TABS 1 MG</i>	P	QL(2 ea daily; 56 ea per fill retail)	SYMDEKO	P	SP; PA
			TRIKAFTA TBPK	P	QL(3 ea daily); SP; PA
			Pulmonary Fibrosis Agents		
			ESBRIET CAPS (<i>pirfenidone</i>)	NP	SP; PA
			ESBRIET TABS (<i>pirfenidone</i>)	NP	SP; PA
			OFEV	P	SP; PA
			<i>pirfenidone CAPS</i>	P	SP; PA
			<i>pirfenidone TABS</i>	P	SP; PA
			TETRACYCLINES - Drugs to Treat Bacterial Infections		
			Tetracyclines		
			<i>doxycycline (monohydrate) CAPS 50 MG, 100 MG</i>	P	PA
			<i>doxycycline (monohydrate) TABS 50 MG, 100 MG</i>	P	PA
			<i>doxycycline hyclate CAPS</i>	P	
			<i>doxycycline hyclate TABS 100 MG</i>	P	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>minocycline hcl CAPS</i>	P		DIPHThERIA/TETANUS TOXOIDS ADSORBED PEDIATRIC SUSP	P	
<i>tetracycline hcl CAPS 500 MG</i>	P		INFANRIX	P	
VIBRAMYCIN CAPS (<i>doxycycline hyclate</i>)	NP		KINRIX SUSY	P	
THYROID AGENTS - Drugs to Regulate Thyroid Hormones			PEDIARIX SUSY	P	
Antithyroid Agents			PENTACEL	P	
<i>methimazole TABS</i>	P		QUADRACEL SUSP	P	
<i>propylthiouracil</i>	P		QUADRACEL SUSY	P	
Thyroid Hormones			TDVAX SUSP	P	
ADTHYZA TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	P		TENIVAC INJ	P	
ARMOUR THYROID TABS	P		TETANUS/DIPHThERIA TOXOIDS-ADSORBED ADULT SUSP	P	
CYTOMEL TABS (<i>liothyronine sodium</i>)	NP		VAXELIS SUSP	P	
<i>levothyroxine sodium TABS</i>	P		VAXELIS SUSY	P	
<i>liothyronine sodium TABS</i>	P		ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions		
NIVA THYROID TABS	P		Antispasmodics		
NP THYROID 120 TABS	P		<i>dicyclomine hcl CAPS</i>	P	
NP THYROID 15 TABS	P		<i>dicyclomine hcl SOLN OR</i>	P	QL(496 ml per 31 day(s) retail)
NP THYROID 30 TABS	P		<i>dicyclomine hcl TABS</i>	P	
NP THYROID 60 TABS	P		<i>glycopyrrolate TABS 1 MG, 2 MG</i>	P	QL(4 ea daily)
NP THYROID 90 TABS	P		<i>hyoscyamine sulfate ELIX</i>	P	
SYNTHROID TABS (<i>levothyroxine sodium</i>)	NP		<i>hyoscyamine sulfate SOLN OR 0.125 MG/ML</i>	P	
THYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	P		<i>hyoscyamine sulfate SUBL 0.125 MG</i>	P	
TOXOIDS			<i>hyoscyamine sulfate TABS 0.125 MG</i>	P	
Toxoid Combinations			<i>hyoscyamine sulfate TB12 0.375 MG</i>	P	QL(4 ea daily)
ADACEL SUSP	P		<i>hyoscyamine sulfate TBDP 0.125 MG</i>	P	
BOOSTRIX SUSP	P		LEVBIID TB12 (<i>hyoscyamine sulfate</i>)	NP	QL(4 ea daily)
BOOSTRIX SUSY	P		ROBINUL FORTE TABS (<i>glycopyrrolate</i>)	NP	QL(4 ea daily)
DAPTACEL	P				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ROBINUL TABS (glycopyrrolate)	NP	QL(4 ea daily)	<i>lansoprazole CPDR 30 MG</i>	P	QL(2 ea daily)
H-2 Antagonists			NEXIUM 24HR CLEAR MINIS CPDR (esomeprazole magnesium)	P	OTC Covered Only; QL(2 ea daily); RX/OTC
<i>cimetidine hcl OR 300 MG/5ML</i>	P		NEXIUM 24HR CPDR (esomeprazole magnesium)	P	OTC Covered Only; QL(2 ea daily); RX/OTC
<i>cimetidine TABS</i>	P	RX/OTC	OMEPRAZOLE + SYRSPEND SFALKA SUSP	P	QL(10 ml daily); AL(Up to 12 yrs old)
<i>famotidine SUSR</i>	P		<i>omeprazole magnesium TBEC</i>	P	QL(1 ea daily)
<i>famotidine TABS</i>	P		<i>omeprazole CPDR</i>	P	QL(2 ea daily)
PEPCID AC MAXIMUM STRENGTH TABS (famotidine)	NP	RX/OTC	<i>omeprazole TBEC</i>	P	QL(1 ea daily)
PEPCID AC TABS (famotidine)	NP		<i>pantoprazole sodium TBEC 20 MG</i>	P	QL(1 ea daily)
PEPCID TABS (famotidine)	NP	RX/OTC	<i>pantoprazole sodium TBEC 40 MG</i>	P	QL(2 ea daily)
TAGAMET HB 200 TABS (cimetidine)	NP	RX/OTC	PREVACID CPDR 30 MG (lansoprazole)	NP	QL(2 ea daily)
TAGAMET HB TABS (cimetidine)	NP	RX/OTC	PRILOSEC OTC TBEC (omeprazole magnesium)	NP	QL(1 ea daily)
Misc. Anti-Ulcer			PROTONIX TBEC 20 MG (pantoprazole sodium)	NP	QL(1 ea daily)
CARAFATE SUSP (sucralfate)	NP	QL(420 ml per fill retail)	PROTONIX TBEC 40 MG (pantoprazole sodium)	NP	QL(2 ea daily)
CARAFATE TABS (sucralfate)	NP	QL(4 ea daily)	Ulcer Drugs - Prostaglandins		
<i>sucralfate SUSP</i>	P	QL(420 ml per fill retail)	CYTOTEC (<i>misoprostol</i>)	NP	
<i>sucralfate TABS</i>	P	QL(4 ea daily)	<i>misoprostol</i>	P	
Proton Pump Inhibitors			Ulcer Therapy Combinations		
DEXILANT (dexlansoprazole)	NP	ST	<i>amoxicillin-clarithromycin w/ lansoprazole THPK</i>	P	14 day(s) max supply per 365 day(s) retail
<i>dexlansoprazole</i>	P	ST	URINARY ANTISPASMODICS - Drugs to Treat		
<i>esomeprazole magnesium CPDR 20 MG</i>	P	QL(2 ea daily); RX/OTC	Miscellaneous Bladder Spasms		
FIRST-OMEPRAZOLE SUSP	P	QL(10 ml daily)	Urinary Antispasmodic - Antimuscarinics (Anticholinergic)		
<i>lansoprazole CPDR 15 MG</i>	P	QL(4 ea daily); RX/OTC			
<i>lansoprazole CPDR 15 MG</i>	P	OTC covered only; QL(4 ea daily); RX/OTC			

Drug Name	Drug Tier	Requirements/Limits
DETROL LA CP24 (tolterodine tartrate)	NP	QL(1 ea daily)
DETROL TABS (tolterodine tartrate)	NP	QL(2 ea daily)
DITROPAN XL TB24 5 MG, 10 MG (oxybutynin chloride)	NP	QL(2 ea daily)
oxybutynin chloride TABS 5 MG	P	QL(3 ea daily)
oxybutynin chloride TB24	P	QL(2 ea daily)
tolterodine tartrate CP24	P	QL(1 ea daily)
tolterodine tartrate TABS	P	QL(2 ea daily)
tropium chloride TABS	P	QL(2 ea daily)
Urinary Antispasmodics - Cholinergic Agonists		
bethanechol chloride	P	
Urinary Antispasmodics - Direct Muscle Relaxants		
flvoxate hcl	P	
VACCINES		
Bacterial Vaccines		
ACTHIB SOLR IM	P	
BCG VACCINE	P	
BEXSERO	P	
BIOTHRAX	P	
HIBERIX SOLR IJ	P	
MENACTRA	P	
MENQUADFI	P	
MENVEO SOLN	P	
MENVEO SOLR	P	
PEDVAX HIB SUSP	P	
PENBRAYA	P	
PNEUMOVAX 23	P	
PNEUMOVAX 23/1 DOSE	P	
PREVNAR 13	P	
PREVNAR 20	P	
TRUMENBA	P	
TYPHIM VI SOLN	P	
TYPHIM VI SOSY	P	

Drug Name	Drug Tier	Requirements/Limits
VAXCHORA	P	
VAXNEUVANCE	P	
VIVOTIF	P	
Viral Vaccines		
ABRYSVO	P	AL(At least 60 yrs old)
ACAM2000	P	
AREXVY	P	AL(At least 60 yrs old)
COMIRNATY 2023-24 SUSP	P	
COMIRNATY 2023-24 SUSY	P	
COMIRNATY SUSP	P	
DENGVAXIA	P	
ENGERIX-B SUSP 20 MCG/ML	P	3 max fill(s) per 999 day(s) retail
ENGERIX-B SUSY	P	3 max fill(s) per 999 day(s) retail
GARDASIL 9 SUSP	P	3 max fill(s) per 999 day(s) retail; AL(Up to 45 yrs old)
GARDASIL 9 SUSY	P	3 max fill(s) per 999 day(s) retail; AL(Up to 45 yrs old)
HAVRIX	P	
HEPLISAV-B SOSY	P	3 max fill(s) per 999 day(s) retail
IMOVAX RABIES (H.D.C.V.) SUSR	P	
IPOL INACTIVATED IPV	P	
IXIARO	P	
JANSSEN COVID-19 VACCINE	P	
JYNNEOS	P	
M-M-R II SOLR	P	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MODERNA COVID-19 VACCINE, BIVALENT ORIGINAL AND OMICRON	P		PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/6 M-4Y	P	
MODERNA COVID-19 VACCINE/6MO-11Y/2023-24 SUSP	P		PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/B A.4/BA.5	P	
MODERNA COVID-19 VACCINE/BIVALENT/6M O-5Y	P		PFIZER-BIONTECH COVID-19VACCINE SUSP	P	
MODERNA COVID-19 VACCINE/BIVALENT/BA.4/BA.5	P		PREHEVBRIO	P	3 max fill(s) per 999 day(s) retail
MODERNA COVID-19 VACCINE6-11Y SUSP	P		PRIORIX SUSR	P	
MODERNA COVID-19 VACCINE6MO-5Y SUSP	P		PROQUAD SUSR	P	
MODERNA COVID-19 VACCINE SUSP	P		RABAVERT	P	
NOVAVAX COVID-19 VACCINE	P		RECOMBIVAX HB SUSP	P	3 max fill(s) per 999 day(s) retail
NOVAVAX COVID-19 VACCINE/2023-24	P		RECOMBIVAX HB SUSY	P	3 max fill(s) per 999 day(s) retail
PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2023-24 SUSP	P		ROTARIX SUSP	P	
PFIZER-BIONTECH COVID-19VACCINE/5-11Y SUSP	P		ROTARIX SUSR	P	
PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2023-24 SUSP	P		ROTATEQ SOLN	P	
PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y SUSP	P		SHINGRIX	P	2 max fill(s) per 999 day(s) retail; AL(At least 50 yrs old)
PFIZER-BIONTECH COVID-19VACCINE/ADULT RTU SUSP	P		SPIKEVAX COVID-19 VACCINE/2023-24 SUSP	P	
PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/5-11Y	P		SPIKEVAX COVID-19 VACCINE/2023-24 SUSY	P	
			SPIKEVAX COVID-19 VACCINE SUSP	P	
			STAMARIL SUSR	P	
			TICOVAC	P	
			TWINRIX SUSY	P	
			VAQTA	P	
			VARIVAX INJ	P	2 max fill(s) per 999 day(s) retail

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
YF-VAX INJ	P		<i>tioconazole vaginal 6.5 %</i>	P	
VAGINAL AND RELATED PRODUCTS			VANDAZOLE	P	
Spermicides			Vaginal Anti-inflammatory Agents		
VCF VAGINAL CONTRACEPTIVE FILM FILM	P	1 package(s) per fill retail	<i>hydrocortisone vaginal</i>	P	1 package(s) per fill retail
Vaginal Anti-infectives			MONISTAT CARE INSTANT ITCH RELIEF MAXIMUM STRENGTH (<i>hydrocortisone vaginal</i>)	NP	1 package(s) per fill retail
CLEOCIN CREA (<i>clindamycin phosphate vaginal</i>)	NP		Vaginal Estrogens		
<i>clindamycin phosphate vaginal CREA</i>	P		ESTRACE CREA (<i>estradiol vaginal</i>)	NP	QL(43 gm per 31 day(s) retail)
<i>clotrimazole vaginal CREA 2 %</i>	P	QL(21 gm per 31 day(s) retail)	<i>estradiol vaginal CREA</i>	P	QL(43 gm per 31 day(s) retail)
<i>clotrimazole vaginal CREA 1 %</i>	P	QL(45 gm per 31 day(s) retail)	<i>estradiol vaginal TABS</i>	P	
GYNAZOLE-1	P		PREMARIN	P	
<i>metronidazole vaginal</i>	P		VAGIFEM TABS (<i>estradiol vaginal</i>)	NP	
<i>miconazole nitrate vaginal CREA 2 %</i>	P	QL(45 gm per 31 day(s) retail)	VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions		
<i>miconazole nitrate vaginal CREA 4 %</i>	P	QL(25 gm per 31 day(s) retail)	Anaphylaxis Therapy Agents		
<i>miconazole nitrate vaginal KIT</i>	P	1 package(s) per fill retail	<i>epinephrine (anaphylaxis) SOAJ</i>	P	QL(0.067 ea daily; 4 ea per 365 day(s) retail)
<i>miconazole nitrate vaginal SUPP 100 MG</i>	P	QL(7 ea per 31 day(s) retail)	Vasopressors		
<i>miconazole nitrate vaginal SUPP 200 MG</i>	P	QL(3 ea per fill retail; 3 ea per 31 day(s) retail)	<i>midodrine hcl</i>	P	
MONISTAT 3 COMBINATION PACK KIT (<i>miconazole nitrate vaginal</i>)	NP	1 package(s) per fill retail	VITAMINS		
MONISTAT 3 CREA (<i>miconazole nitrate vaginal</i>)	NP	QL(25 gm per 31 day(s) retail)	Oil Soluble Vitamins		
MONISTAT 7 SIMPLY CURE CREA (<i>miconazole nitrate vaginal</i>)	NP	QL(45 gm per 31 day(s) retail)	<i>cholecalciferol CAPS 25 MCG, 50 MCG, 1000 UNIT, 2000 UNIT</i>	P	QL(100 ea per fill retail)
<i>terconazole vaginal CREA</i>	P		<i>cholecalciferol CAPS 1.25 MG, 1.25 MG, 50000 UNIT</i>	P	QL(8 ea per 31 day(s) retail)
<i>terconazole vaginal SUPP</i>	P		<i>cholecalciferol CAPS 125 MCG, 5000 UNIT</i>	P	QL(2 ea daily)
			DRISDOL CAPS (<i>ergocalciferol</i>)	NP	

Drug Name	Drug Tier	Requirements/ Limits
<i>ergocalciferol CAPS</i>	P	
<i>ergocalciferol SOLN OR 8000 UNIT/ML</i>	P	QL(60 ml per 90 day(s) retail)
KEY-E CHEW	P	QL(2 ea daily)
MEPHYTON TABS (<i>phytonadione</i>)	NP	
<i>phytonadione TABS 5 MG</i>	P	
<i>vitamin e CAPS 45 MG, 90 MG, 100 UNIT, 180 MG, 200 UNIT, 268 MG, 400 UNIT</i>	P	QL(2 ea daily)
VITAMIN E CAPS 200 UNIT	P	QL(2 ea daily)
VITAMIN E CHEW	P	QL(2 ea daily)
Water Soluble Vitamins		
<i>ascorbic acid TABS</i>	P	QL(3.34 ea daily)
B-1 TABS	P	QL(3.34 ea daily)
NIACIN TR TBCR	P	
<i>niacin CPCR 250 MG, 500 MG</i>	P	
<i>niacin TABS 500 MG</i>	P	
<i>niacin TBCR</i>	P	
<i>pyridoxine hcl TABS 25 MG, 50 MG, 100 MG</i>	P	
<i>riboflavin TABS</i>	P	QL(3.34 ea daily)
SLO-NIACIN TBCR (<i>niacin</i>)	NP	
<i>thiamine hcl TABS</i>	P	QL(3.34 ea daily)
<i>thiamine mononitrate TABS 100 MG</i>	P	QL(3.34 ea daily)

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MG	4	ACULAR (ketorolac tromethamine			
		(ophth))	71		

MOUTHPIECE MISC	51	W/FLOW VU MISC	52	ALDACTAZIDE (spironolactone & hydrochlorothiazide)	43
ADULT MASK DEVI	51	AEROCHAMBER Z-STAT PLUS/FLOWSIGNAL MISC	52	ALDACTONE TABS (spironolactone)	44
ADULT MASK LARGE MISC	51	AEROCHAMBER Z-STAT PLUS/LARGE MASK MISC	52	alendronate sodium SOLN	44
ADVAIR DISKUS AEPB (fluticasone-salmeterol)	9	AEROCHAMBER Z-STAT PLUS/MEDIUM MASK MISC	52	alendronate sodium TABS 35 MG, 70 MG	44
AEROBIKA DEVI	51	AEROCHAMBER Z-STAT PLUS/SMALL MASK MISC	52	alendronate sodium TABS 5 MG, 10 MG	44
AEROCHAMBER HOLDING CHAMBER DEVI	51	AEROCHAMBER/FLOWSIGNAL MISC	52	ALEVE ARTHRITIS TABS (naproxen sodium)	3
AEROCHAMBER MINI AEROSOLCHAMBER DEVI	51	AEROECLIPSE EZ TWIST TUBING MISC	52	ALEVE TABS (naproxen sodium) ...	3
AEROCHAMBER MV MISC	51	AEROECLIPSE MASK LARGE MISC	52	ALIVE EVERYDAY IMMUNE HEALTH CAPS	62
AEROCHAMBER PLUS FLOW VU MISC	51	AEROECLIPSE MASK MEDIUM MISC	52	ALIVE GUMMIES FOR CHILDREN CHEW	65
AEROCHAMBER PLUS FLOW VUMOUTHPIECE DEVI	51	AEROECLIPSE MASK SMALL MISC	52	ALIVE MULTI-VITAMIN CHILDRENS CHEWABLE CHEW	65
AEROCHAMBER PLUS FLOW-VU MISC	52	AEROTRACH PLUS MISC	52	ALKERAN (melphalan)	24
AEROCHAMBER PLUS FLOW-VU/INTERMEDIATE MASK DEVI .	51	AEROVENT PLUS HOLDING CHAMBER/COLLAPSIBLE DEVI .	52	ALL FLOW 1000 PFT FILTER DEVI .	52
AEROCHAMBER PLUS FLOW-VU/LARGE MASK DEVI	51	AIRS PEDIATRIC AEROSOL MASK MISC	52	ALL FLOW 1000 PULMONARY FUNCTION FILTER MISC	52
AEROCHAMBER PLUS FLOW-VU/LARGE MASK MISC	52	albuterol sulfate AERS	9	ALL FLOW 2000 PFT FILTER DEVI .	52
AEROCHAMBER PLUS FLOW-VU/MASK MISC	52	albuterol sulfate NEBU 0.083 %	9	ALL FLOW 3000 PFT FILTER DEVI .	52
AEROCHAMBER PLUS FLOW-VU/MEDIUM MASK DEVI	52	albuterol sulfate NEBU 0.5 %, 2.5 MG/0.5ML	9	ALL FLOW 4000 PFT FILTER DEVI .	52
AEROCHAMBER PLUS FLOW-VU/MEDIUM MASK MISC	52	albuterol sulfate NEBU 0.63 MG/3ML, 1.25 MG/3ML	9	ALL FLOW 5000 PFT FILTER DEVI .	52
AEROCHAMBER PLUS FLOW-VU/SMALL MASK DEVI	52	ALBUTEROL SULFATE NEBU	9	ALL FLOW 6000 PFT FILTER DEVI .	52
AEROCHAMBER PLUS FLOW-VU/SMALL MASK MISC	52	albuterol sulfate SYRP	9	ALL FLOW 7000 PFT FILTER DEVI .	52
AEROCHAMBER Z-STAT PLUS VALVED HOLDING CHAMBER		albuterol sulfate TABS	9		
		ALCOHOL PREP PADS - MISC ..	51		

ALLERWELL ALLERGY FORMULA TABS	67	amlodipine besylate-benazepril hcl 22	amphetamine-dextroamphetamine TABS	1	
allopurinol	47	amlodipine besylate-olmesartan medoxomil	22	ampicillin CAPS 500 MG	72
ALOCRIL	71	amlodipine besylate-valsartan	22	ANAFRANIL 75 MG (clomipramine hcl)	15
alogliptin benzoate	16	amlodipine-valsartan- hydrochlorothiazide	22	ANALPRAM-HC LOTN EX	7
alogliptin-metformin hcl	16	amoxapine	15	ANAPROX DS TABS (naproxen sodium)	3
alogliptin-pioglitazone	16	amoxicillin & pot clavulanate CHEW . 72	anastrozole	25	
ALOMIDE	71	amoxicillin & pot clavulanate SUSR 28.5 MG/5ML-200 MG/5ML, 62.5 MG/5ML-250 MG/5ML	72	ANTIVERT CHEW (meclizine hcl) .	19
ALORA PTTW	45	amoxicillin & pot clavulanate SUSR 42.9 MG/5ML-600 MG/5ML, 57 MG/5ML-400 MG/5ML	72	ANUSOL-HC EX (hydrocortisone (rectal))	7
alprazolam TABS	8	amoxicillin & pot clavulanate TABS 125 MG-250 MG, 125 MG-500 MG 72	APETIBEX CAPS	62	
ALTACE CAPS 1.25 MG, 2.5 MG, 5 MG, 10 MG (ramipril)	21	amoxicillin & pot clavulanate TABS 125 MG-875 MG	72	APO-VARENICLINE TABS 0.5 MG 74	74
ALTRIXA TABS	64	amoxicillin & pot clavulanate TABS 125 MG-875 MG	72	APO-VARENICLINE TABS 1 MG .	74
alum & mag hydrox-simethicone LIQD	7	amoxicillin CAPS	72	APPE-CURB CAPS	62
alum & mag hydrox-simethicone SUSP	7	amoxicillin CHEW 125 MG, 250 MG . 72	apraclonidine hcl	69	
ALUMINUM HYDROXIDE SUSP 320 MG/5ML	7	AMOXICILLIN SUSR (amoxicillin) .	72	APRISO CP24 (mesalamine)	46
amantadine hcl CAPS	26	amoxicillin SUSR	72	APTIVUS CAPS	28
amantadine hcl SOLN	26	amoxicillin TABS 875 MG	72	AQUORAL SOLN	61
AMARYL 1 MG, 2 MG (glimepiride) 17		amoxicillin-clarithromycin w/ lansoprazole THPK	77	ARAVAL (leflunomide)	4
AMARYL 4 MG (glimepiride)	17	amphetamine-dextroamphetamine CP24 1.25 MG-1.25 MG-1.25 MG- 1.25 MG, 2.5 MG-2.5 MG-2.5 MG-2.5 MG, 3.75 MG-3.75 MG-3.75 MG-3.75 MG, 5 MG-5 MG-5 MG-5 MG, 6.25 MG-6.25 MG-6.25 MG-6.25 MG, 7.5 MG-7.5 MG-7.5 MG-7.5 MG	1	AREXVY	78
AMBIEN TABS (zolpidem tartrate) .	48			ARICEPT TABS 5 MG, 10 MG (donepezil hydrochloride)	73
AMERGE (naratriptan hcl)	58			ARIKAYCE	2
amiloride & hydrochlorothiazide ..	43			ARIMIDEX (anastrozole)	25
amiloride hcl TABS	44			aripiprazole SOLN OR	28
amiodarone hcl TABS 200 MG	8			aripiprazole TABS	28
amitriptyline hcl TABS	15			aripiprazole TBDP	28
AMLADDEX TABS	64			ARISTADA 1064 MG/3.9ML	28
amlodipine besylate TABS	32			ARISTADA 441 MG/1.6ML	28

ARISTADA 662 MG/2.4ML	28	atropine sulfate (ophthalmic) SOLN 69	(sulfasalazine)	46
ARISTADA 882 MG/3.2ML	28	ATROPINE SULFATE SOLN 1 % (atropine sulfate (ophthalmic))	AZULFIDINE TABS (sulfasalazine) 46	
ARISTADA INITIO	28	ATROVENT HFA	b complex w/ c CAPS	62
ARMOUR THYROID TABS	76	AUBAGIO (teriflunomide)	B-1 TABS	81
ARNUITY ELLIPTA	9	AUGMENTIN ES-600 SUSR (amoxicillin & pot clavulanate)	BACIGUENT	69
AROMASIN (exemestane)	25	AUGMENTIN SUSR 31.25 MG/5ML- 125 MG/5ML	bacitracin (ophthalmic)	69
ASACOL HD TBEC (mesalamine) .	46	AUGMENTIN TABS 125 MG-500 MG (amoxicillin & pot clavulanate)	bacitracin (topical) OINT	38
ascorbic acid TABS	81	AVALIDE (irbesartan- hydrochlorothiazide)	bacitracin zinc OINT	38
ASMANEX HFA AERO	9	AVAPRO (irbesartan)	bacitracin-polymyxin b (ophth)	69
ASPARLAS	25	AVONEX PEN AJKT	baclofen TABS 10 MG, 20 MG	67
aspirin buffered (cal carb-mag carb- mag oxide)	4	AVONEX PSKT	BACTRIM DS TABS (sulfamethoxazole-trimethoprim) ..	23
aspirin CHEW	4	AVSOLA	BACTRIM TABS (sulfamethoxazole- trimethoprim)	23
ASPIRIN SUPP 300 MG	4	AYGESTIN TABS (norethindrone acetate)	balsalazide disodium CAPS	46
aspirin TABS 325 MG	4	azathioprine TABS	BANDAGES-DRESSINGS-TAPE - MISC	50
aspirin TBEC 81 MG, 325 MG	4	azelastine hcl (ophth)	BARIATRIC MULTIVITAMINS/IRON CAPS	62
ATACAND (candesartan cilexetil) .	21	azelastine hcl	BASIS FACIAL MOISTURIZER CREA	42
ATACAND HCT (candesartan cilexetil-hydrochlorothiazide)	22	azithromycin PACK	BASIS OVERNIGHT CREA	42
atazanavir sulfate CAPS 150 MG, 200 MG	28	azithromycin SUSR 100 MG/5ML .	BCG VACCINE	78
atazanavir sulfate CAPS 300 MG .	28	azithromycin SUSR 200 MG/5ML .	b-complex vitamins CAPS	62
ATELVIA TBEC (risedronate sodium)	44	azithromycin TABS 250 MG	b-complex vitamins TABS	62
atenolol & chlorthalidone	22	azithromycin TABS 500 MG	b-complex w/ c & folic acid CAPS .	62
atenolol TABS	31	azithromycin TABS 600 MG	b-complex w/ folic acid CAPS	62
ATIVAN TABS 0.5 MG, 2 MG (lorazepam)	8	AZOPT (brinzolamide)	b-complex w/biotin & folic acid TABS 62	
ATIVAN TABS 1 MG (lorazepam) ..	8	AZOR (amlodipine besylate- olmesartan medoxomil)	BD AUTOSHIELD DUO 30G X 5MM	51
atomoxetine hcl	1	AZULFIDINE EN-TABS TBEC	BD GLUCOSE CHEW	16
atorvastatin calcium TABS	20			

BD PEN NEEDLES	51	bethanechol chloride	78	BOOSTRIX SUSY	76
BENADRYL ALLERGY EXTRA STRENGTH TABS	19	BEVACIZUMAB IZ 1.25 MG/0.05ML, 2 MG/0.08ML, 2.5 MG/0.1ML, 3 MG/0.12ML, 3.25 MG/0.13ML, 3.75 MG/0.15ML	69	BPROTECTED PEDIA POLY-VITE SOLN OR	66
benazepril & hydrochlorothiazide ..	22	BEXSERO	78	BPROTECTED PEDIA POLY- VITE/IRON SOLN	66
benazepril hcl 40 MG	21	bicalutamide	25	BRAFTOVI 75 MG	25
benazepril hcl 5 MG, 10 MG, 20 MG . 21		BIKTARVY	28	BRAIN MIGHT/DHA & CO Q10 TABS	67
BENICAR (olmesartan medoxomil) 21		BIO-35 GLUTEN-FREE CAPS	62	BREATHE COMFORT ANTI-STATIC VALVED HOLDING CHAMBER/ADULT DEVI	52
BENICAR HCT (olmesartan medoxomil-hydrochlorothiazide) ...	22	BIO-35 IRON FREE CAPS	62	BREATHE COMFORT ANTI-STATIC VALVED HOLDING CHAMBER/CHILD DEVI	52
BENZAC AC WASH LIQD 5 % (benzoyl peroxide)	37	BIOCAL CAPS	62	BREATHE EASE NEBULIZER MASK/CHILD MISC	52
benzonatate 100 MG	35	BIOLYTE SOLN	59	BREATHE EASE NEBULIZER MASK/INFANT MISC	53
benzonatate 200 MG	35	BIOTENE DRY MOUTH MOISTURIZING SPRAY SOLN ...	61	BREATHE EASE/LARGE MASK DEVI	53
benzoyl peroxide BAR	37	BIOTHRAX	78	BREATHE EASE/MEDIUM MASK DEVI	53
benzoyl peroxide GEL 2.5 %, 5 %, 10 %	37	BIOTIN PLUS KERATIN TABS ...	67	BREATHE EASE/SMALL MASK DEVI	53
benzoyl peroxide LIQD 4 %, 5 %, 10 %	37	bisacodyl SUPP	49	BREATHERITE VALVED MDI CHAMBER/COLLAPSIBLE DEVI .	53
benztropine mesylate TABS	26	bisacodyl TBEC	49	BREATHERITE VALVED MDI CHAMBER/RIGID DEVI	53
BEOVU SOLN	69	bismuth subsalicylate CHEW 262 MG	18	BRILINTA	47
betamethasone dipropionate (topical) CREA	40	bismuth subsalicylate SUSP 525 MG/15ML, 1050 MG/30ML	18	brimonidine tartrate 0.2 %	69
betamethasone dipropionate augmented CREA	40	bisoprolol & hydrochlorothiazide 6.25 MG-10 MG, 6.25 MG-5 MG	22	brinzolamide	71
betamethasone valerate CREA	40	bisoprolol fumarate	31	bromocriptine mesylate CAPS	26
betamethasone valerate LOTN	40	BLEPH-10 SOLN (sulfacetamide sodium (ophth))	69	bromocriptine mesylate TABS 2.5 MG	26
betamethasone valerate OINT	40	BLEPHAMIDE S.O.P. OINT	70	brompheniramine & phenyleph ELIX .	
BETAPACE AF (sotalol hcl (afib/af))	32	BONEUP 3 PER DAY CAPS	62		
BETAPACE TABS 80 MG, 120 MG, 160 MG (sotalol hcl)	32	BONEUP CAPS	62		
betaxolol hcl (ophth) SOLN	69	BOOSTNOW IMMUNE SUPPORT CAPS	62		
		BOOSTRIX SUSP	76		

36	bupropion hcl TB24 150 MG13	500 MG7
brompheniramine & pseudoeph ELIX 36	bupropion hcl TB24 300 MG13	calcium carbonate-cholecalciferol TABS 10 MCG-600 MG, 200 UNIT- 600 MG, 400 UNIT-600 MG, 5 MCG- 600 MG59
brompheniramine & pseudoeph LIQD 15 MG/5ML-1 MG/5ML 36	buspirone hcl 15 MG 8	
BUBBLES THE FISH II PEDIATRIC MASK/PVC MISC53	buspirone hcl 5 MG, 10 MG 8	
budesonide (inhalation) SUSP 0.25 MG/2ML, 0.5 MG/2ML 9	buspirone hcl 7.5 MG, 30 MG 8	calcium carbonate-cholecalciferol TABS 125 UNIT-500 MG, 200 UNIT- 200 UNIT-500 MG-500 MG, 200 UNIT-500 MG, 5 MCG-500 MG, 500 MG-5 MCG59
budesonide (inhalation) SUSP 1 MG/2ML 9	butalbital-acetaminophen TABS 50 MG-325 MG 4	
budesonide (nasal)68	butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG 4	calcium carbonate-vitamin d TABS 125 UNIT-250 MG, 250 MG-125 UNIT59
budesonide-formoterol fumarate dihydrate9	butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG 4	
BUFFERIN (aspirin buffered (cal carb-mag carb-mag oxide)) 4	butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG6	calcium carbonate-vitamin d TABS 600 MG-200 UNIT 59
bumetanide TABS 44	butalbital-aspirin-caffeine CAPS 4	calcium polycarbophil TABS 49
BUMEX TABS 0.5 MG (bumetanide) . 44	butalbital-aspirin-caffeine w/cod6	camphor & menthol LOTN39
buprenorphine hcl SUBL6	BYDUREON BCISE AUIJ16	candesartan cilexetil 21
buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG6	BYETTA SOPN 10 MCG/0.04ML ..17	candesartan cilexetil- hydrochlorothiazide 22
buprenorphine hcl-naloxone hcl dihydrate FILM SL 2 MG-8 MG, 3 MG-12 MG6	BYETTA SOPN 5 MCG/0.02ML ... 16	CAPHOSOL SOLN 61
buprenorphine hcl-naloxone hcl dihydrate SUBL 0.5 MG-2 MG6	CAFERGOT TABS (ergotamine w/ caffeine)58	capsaicin CREA 0.025 %, 0.075 %, 0.1 %42
buprenorphine hcl-naloxone hcl dihydrate SUBL 2 MG-8 MG6	caffeine citrate SOLN OR 1	captopril & hydrochlorothiazide 15 MG-25 MG, 15 MG-50 MG, 25 MG- 25 MG22
bupropion hcl (smoking deterrent) 74	CALAN SR TBCR (verapamil hcl) .32	captopril & hydrochlorothiazide 25 MG-50 MG 22
bupropion hcl TABS13	calcipotriene CREA39	captopril 21
bupropion hcl TB12 100 MG13	calcipotriene SOLN 39	CAPZASIN-HP CREA (capsaicin) .42
bupropion hcl TB12 150 MG13	calcitonin (salmon) IJ 44	CAPZASIN-P CREA 42
bupropion hcl TB12 200 MG13	calcitonin (salmon) NA44	CARAC CREA (fluorouracil (topical)) 39
	calcitriol CAPS 45	CARAFATE SUSP (sucralfate) 77
	CALCIUM 600+D HIGH POTENCY TABS59	CARAFATE TABS (sucralfate) 77
	calcium acetate (phosphate binder) CAPS47	
	calcium carbonate (antacid) CHEW	

carbamazepine CHEW	11	CARNITOR TABS (levocarnitine (metabolic modifiers))	45	celecoxib	3
carbamazepine SUSP	11	carteolol hcl (ophth)	69	CELEXA TABS 10 MG (citalopram hydrobromide)	14
carbamazepine TABS	11	carvedilol 25 MG	31	CELEXA TABS 20 MG (citalopram hydrobromide)	14
carbamazepine TB12	11	carvedilol 3.125 MG, 6.25 MG, 12.5 MG	31	CELEXA TABS 40 MG (citalopram hydrobromide)	14
carbamide peroxide (otic) 6.5 % ...	71	carvedilol phosphate	31	CELLCEPT CAPS (mycophenolate mofetil)	60
carbidopa	25	CASODEX (bicalutamide)	25	CELLCEPT SUSR (mycophenolate mofetil)	60
carbidopa-levodopa TABS	26	CASTIVA WARMING LOTN	42	CELLCEPT TABS (mycophenolate mofetil)	60
carbidopa-levodopa TBCR	26	cefaclor CAPS	33	CENTANY OINT	38
CARDIZEM CD CP24 120 MG, 180 MG, 300 MG (diltiazem hcl coated beads)	32	cefaclor SUSR 125 MG/5ML, 250 MG/5ML, 375 MG/5ML	33	CENTRUM FLAVOR BURST KIDS CHEW	65
CARDIZEM CD CP24 240 MG (diltiazem hcl coated beads)	32	cefadroxil CAPS	33	CENTRUM KIDS CHEW	65
CARDIZEM TABS 30 MG, 60 MG, 120 MG (diltiazem hcl)	32	cefadroxil SUSR	33	CENTRUM PERFORMANCE TABS . 67	
CARDURA (doxazosin mesylate) .	21	cefadroxil TABS	33	CENTRUM SPECIALIST ENERGY TABs	67
CARETOUCH 2 CPAP HOSE HANGER MISC	53	cefdinir CAPS	33	cephalexin CAPS 250 MG, 500 MG 33	
CARETOUCH CPAP & BIPAP HOSE/6FT MISC	53	cefdinir SUSR	33	cephalexin SUSR	33
CARETOUCH CPAP MASK WIPES MISC	53	cefixime CAPS	33	CERALYTE 70 SOLN	59
CARETOUCH CPAP NEUTRALIZING PRE-WASH MISC 53		cefprozil SUSR 125 MG/5ML	33	CERASPORT EX1 SOLN	59
CARETOUCH CPAP TUBE CLEANING BRUSH MISC	53	cefprozil SUSR 250 MG/5ML	33	CERASPORT SOLN	59
CARETOUCH UNIVERSAL CPAPFILTERS MISC	53	cefprozil TABS	33	CERDELGA	48
CARNITOR SF SOLN OR (levocarnitine (metabolic modifiers)) 45		ceftriaxone sodium IJ 1 GM, 250 MG, 500 MG	33	CEREZYME 400 UNIT	48
CARNITOR SOLN OR 1 GM/10ML (levocarnitine (metabolic modifiers)) 45		cefuroxime axetil TABS	33	cetirizine hcl CHEW	19
		CELEBRATE MULTI-COMPLETE18 CAPS	63	cetirizine hcl SOLN OR	19
		CELEBRATE MULTI-COMPLETE36 CAPS	63	cetirizine hcl SYRP OR	19
		CELEBRATE MULTI-COMPLETE45 CAPS	63	cetirizine hcl TABS	19
		CELEBRATE MULTI-COMPLETE60 CAPS	63		
		CELEBREX (celecoxib)	3		

cetirizine-pseudoephedrine	36	cholestyramine POWD	20	phosphate vaginal)	80
CHEMET	18	cilostazol	47	CLEOCIN PEDIATRIC GRANULES (clindamycin palmitate hydrochloride)	24
CHEMSTRIP-K STRP	43	CILOXAN OINT	69	CLEOCIN-T LOTN (clindamycin phosphate (topical))	37
CHILDRENS ADVIL SUSP 100 MG/5ML (ibuprofen)	3	CIMDUO	28	CLEVER CHOICE ANTI- STATICVALVED HOLDING CHAMBER/ADULT LARGE DEVI .	53
CHILDRENS GUMMIES CHEW ...	65	cimetidine hcl OR 300 MG/5ML ...	77	CLEVER CHOICE ANTI- STATICVALVED HOLDING CHAMBER/MEDIUM DEVI	53
CHILDRENS MOTRIN SUSP 100 MG/5ML (ibuprofen)	3	cimetidine TABS	77	CLEVER CHOICE ANTI- STATICVALVED HOLDING CHAMBER/MEDIUM/3 YEA DEVI .	53
chlordiazepoxide hcl CAPS	8	CIPRO TABS 250 MG, 500 MG (ciprofloxacin hcl)	46	CLEVER CHOICE ANTI- STATICVALVED HOLDING CHAMBER/SMALL DEVI	53
chlorhexidine gluconate (mouth- throat)	61	CIPRODEX (ciprofloxacin- dexamethasone)	71	CLEVER CHOICE ANTI- STATICVALVED HOLDING CHAMBER/SMALL INFANT DEVI .	53
chloroquine phosphate TABS 250 MG	24	ciprofloxacin hcl (ophth) SOLN	69	CLIMARA PTWK (estradiol)	45
chloroquine phosphate TABS 500 MG	24	ciprofloxacin hcl TABS 100 MG ...	46	CLINDAGEL GEL (clindamycin phosphate (topical))	37
chlorpheniramine maleate SYRP ..	19	ciprofloxacin hcl TABS 250 MG, 500 MG, 750 MG	46	clindamycin hcl 150 MG, 300 MG .	24
chlorpheniramine maleate TABS ..	19	ciprofloxacin-dexamethasone	71	clindamycin palmitate hydrochloride .	24
chlorpromazine hcl TABS 10 MG ..	28	citalopram hydrobromide SOLN ...	14	clindamycin phosphate (topical) GEL	37
chlorpromazine hcl TABS 25 MG, 50 MG, 100 MG, 200 MG	28	citalopram hydrobromide TABS 10 MG	14	clindamycin phosphate (topical) LOTN	37
chlorthalidone 25 MG, 50 MG	44	citalopram hydrobromide TABS 20 MG	14	clindamycin phosphate (topical) SOLN	37
chlorzoxazone TABS 500 MG	67	citalopram hydrobromide TABS 40 MG	14	clindamycin phosphate vaginal CREA	80
CHOICEFUL MULTIVITAMIN CAPS .	63	clarithromycin SUSR 125 MG/5ML	50	clobetasol propionate CREA 0.05 % .	40
cholecalciferol CAPS 1.25 MG, 1.25 MG, 50000 UNIT	80	clarithromycin SUSR 250 MG/5ML	50		
cholecalciferol CAPS 125 MCG, 5000 UNIT	80	clarithromycin TABS	50		
cholecalciferol CAPS 25 MCG, 50 MCG, 1000 UNIT, 2000 UNIT	80	clarithromycin TB24	50		
cholestyramine light PACK	20	CLARITIN ALLERGY CHILDRENS SOLN (loratadine)	19		
cholestyramine light POWD	20	clemastine fumarate TABS 1.34 MG .	19		
cholestyramine PACK	20	CLEOCIN 150 MG, 300 MG (clindamycin hcl)	24		
		CLEOCIN CREA (clindamycin			

clobetasol propionate emollient base 0.05 %	codeine sulfate TABS 30 MG	5	MASK DEVI	53
clobetasol propionate GEL 0.05 %	CODEINE SULFATE TABS	5	COMPLERA	28
clobetasol propionate OINT 0.05 %	COLACE CAPS 100 MG (docusate sodium)	50	CONCERTA TBCR 18 MG, 27 MG, 54 MG (methylphenidate hcl)	1
40	COLACE CLEAR CAPS (docusate sodium)	50	CONCERTA TBCR 36 MG (methylphenidate hcl)	1
clobetasol propionate SOLN 0.05 %	COLAZAL CAPS (balsalazide disodium)	46	CONDOMS-MISC	50
40	colchicine TABS	47	COPAXONE SOSY (glatiramer acetate)	74
clomipramine hcl 75 MG	colchicine w/ probenecid	47	COREG 25 MG (carvedilol)	31
clonazepam TABS	COLCRYS TABS (colchicine)	47	COREG 3.125 MG, 6.25 MG, 12.5 MG (carvedilol)	31
clonidine hcl (adhd) TB12	COLD & FLU RELIEF NIGHTTIME D LIQD	36	COREG CR (carvedilol phosphate) 31	
clonidine hcl TABS	COLESTID FLAVORED GRAN (colestipol hcl)	20	CORGARD TABS 20 MG, 40 MG, 80 MG (nadolol)	32
clopidogrel bisulfate 75 MG	COLESTID GRAN (colestipol hcl)	20	CORTEF TABS (hydrocortisone)	35
clorazepate dipotassium TABS	COLESTID TABS (colestipol hcl)	20	CORTENEMA (hydrocortisone (intrarectal))	7
clotrimazole (topical) CREA	colestipol hcl GRAN	20	CORTISONE ACETATE TABS	35
clotrimazole (topical) SOLN	colestipol hcl TABS	20	COSOPT (dorzolamide hcl-timolol maleate)	69
clotrimazole vaginal CREA 1 %	COMBIPATCH PTTW	45	COZAAR (losartan potassium)	21
clotrimazole vaginal CREA 2 %	COMBIVENT RESPIMAT AERS	10	CREON CPEP	43
clotrimazole w/ betamethasone CREA	COMIRNATY 2023-24 SUSP	78	CRESTOR TABS (rosuvastatin calcium)	20
clotrimazole w/ betamethasone LOTN	COMIRNATY 2023-24 SUSY	78	cromolyn sodium (nasal) 5.2 MG/ACT	68
clozapine TABS 100 MG	COMIRNATY SUSP	78	cromolyn sodium (ophth)	71
clozapine TABS 25 MG, 50 MG, 200 MG	COMPACT SPACE CHAMBER/ANTI-STATIC DEVI	53	cromolyn sodium NEBU	8
CLOZARIL TABS 100 MG (clozapine)	COMPACT SPACE CHAMBER/ANTI-STATIC/LARGE	53	crotamiton LOTN	42
CLOZARIL TABS 25 MG, 50 MG, 200 MG (clozapine)	MASK DEVI	53	CVS ADULT 50+ EYE HEALTH CAPS	63
CO MONITOR DEVI	COMPACT SPACE CHAMBER/ANTI-STATIC/MEDIUM	53	CVS DRY MOUTH SPRAY SOLN	61
CO MONITOR REPLACEMENT TPIECES MISC	MASK DEVI	53		
coal tar extract SHAM 0.5 %	COMPACT SPACE CHAMBER/ANTI-STATIC/SMALL			
COARTEM				

CVS EYE HEALTH ADULT 50+ CAPS	63	CYTOTEC (misoprostol)	77	(divalproex sodium)	13
CVS GLUCOSE CHEW	16	dabigatran etexilate mesylate CAPS .	11	DEPAKOTE ER TB24 500 MG (divalproex sodium)	13
CVS GUMMY DINOS CHEW	65	DAILY MULTIPLE VITAMINS TABS .	64	DEPAKOTE SPRINKLES CSDR (divalproex sodium)	13
CVS GUMMY DINOS CHILDRENS CHEW	65	DALIRESP (roflumilast)	9	DEPAKOTE TBEC 125 MG (divalproex sodium)	13
CVS GUMMY MULTIVITAMIN KIDS CHEW	65	dapsone	23	DEPAKOTE TBEC 250 MG (divalproex sodium)	13
CVS HAIR/SKIN/NAILS TABS	67	DAPTACEL	76	DEPAKOTE TBEC 500 MG (divalproex sodium)	13
CVS IMMUNE SUPPORT CAPS ..	63	darunavir TABS 600 MG	28	DEPEN TITRATABS TABS (penicillamine)	60
CVS SOFT GLUCOSE CHEW	16	darunavir TABS 800 MG	28	DEPO-PROVERA CONTRACEPTIVE SUSP IM (medroxyprogesterone acetate (contraceptive))	34
CVS VISION HEALTH CAPS	63	DAVIMET-M CHEW	64	DEPO-PROVERA CONTRACEPTIVE SUSY IM (medroxyprogesterone acetate (contraceptive))	34
cyanocobalamin SOLN IJ 1000 MCG/ML	48	DAYHIST ALLERGY 12 HOUR RELIEF TABS	19	DEPO-SUBQ PROVERA 104 SUSY SC	34
cyclobenzaprine hcl TABS 5 MG, 10 MG	67	DAYPRO TABS (oxaprozin)	3	DERMACINRX DAVIMET CHEW .	64
cyclobenzaprine hcl TABS 7.5 MG	67	DDAVP TABS (desmopressin acetate)	45	DERMAREST PSORIASIS GEL ...	42
CYCLOGYL (cyclopentolate hcl) ..	69	DEBROX 6.5 % (carbamide peroxide (otic))	71	DERMOTIC (fluocinolone acetonide (otic))	71
CYCLOGYL 0.5 %	69	DECUBI-VITE CAPS	63	DESCOVY	28
CYCLOGYL 2 %	69	deferasirox PACK	18	desipramine hcl TABS 10 MG, 50 MG, 75 MG, 100 MG, 150 MG	15
cyclopentolate hcl 0.5 %, 1 %	69	deferasirox TABS	18	desipramine hcl TABS 25 MG	15
cyclopentolate hcl 2 %	69	deferasirox TBSO	18	desmopressin acetate spray	45
cyclosporine CAPS	60	DEKAS PLUS CAPS	63	desmopressin acetate spray refrigerated	45
cyclosporine modified (for microemulsion) CAPS	60	DEKAS PLUS OCEAN CAPS	63	desmopressin acetate TABS	45
cyclosporine modified (for microemulsion) SOLN	60	DELSTRIGO	28		
CYMBALTA CPEP (duloxetine hcl)	15	DELSYM COUGH CHILDRENS SUER (dextromethorphan polistirex) .	35		
cyproheptadine hcl SYRP	20	DELSYM SUER (dextromethorphan polistirex)	35		
cyproheptadine hcl TABS	20	DELZICOL CPDR (mesalamine) ..	46		
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		DEPAKOTE ER TB24 250 MG			

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DILANTIN 30 MG 12	diphenhydramine hcl (sleep) TABS 50 MG 48	divalproex sodium TBEC 125 MG . 13
DILANTIN INFATABS CHEW (phenytoin) 12	diphenhydramine hcl CAPS 19	divalproex sodium TBEC 250 MG . 13
DILANTIN-125 SUSP (phenytoin) . 12	diphenhydramine hcl ELIX 12.5 MG/5ML 19	divalproex sodium TBEC 500 MG . 13
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DILAUDID TABS 8 MG (hydromorphone hcl) 5	diphenhydramine hcl TABS 25 MG 19	docusate sodium LIQD 50
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diltiazem hcl coated beads CP24 240 MG 32	diphenoxylate w/ atropine TABS ... 18	DOCUSATE SODIUM SYRP 50
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		doxepin hcl CONC 15
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		doxycycline (monohydrate) TABS 50 MG, 100 MG 75
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enoxaparin sodium SOLN IJ 300 MG/3ML	10	EQL GUMMIES CHILDRENS CHEW	65	ESGIC TABS (butalbital-acetaminophen-caffeine)	4
enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML	10	EQUALYTE SOLN (oral electrolytes) 59		esomeprazole magnesium CPDR 20 MG	77
enoxaparin sodium SOSY 30 MG/0.3ML	10	ergocalciferol CAPS	81	ESTRACE CREA (estradiol vaginal) .	80
enoxaparin sodium SOSY 40 MG/0.4ML	10	ergocalciferol SOLN OR 8000 UNIT/ML	81	ESTRACE TABS (estradiol)	45
enoxaparin sodium SOSY 60 MG/0.6ML	10	ergotamine w/ caffeine TABS	58	estradiol & norethindrone acetate TABS	45
enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML	10	ERYGEL GEL (erythromycin (acne aid))	38	estradiol PTTW 0.025 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR	45
ENSPRYNG	60	ERYPED 200 SUSR (erythromycin ethylsuccinate)	50	estradiol PTTW 0.0375 MG/24HR .	45
EPIFOAM FOAM	41	ERYPED 400 SUSR (erythromycin ethylsuccinate)	50	estradiol PTWK	45
epinephrine (anaphylaxis) SOAJ ..	80	erythromycin (acne aid) GEL	38	estradiol TABS	45
EPIVIR SOLN (lamivudine)	29	erythromycin (acne aid) SOLN	38	estradiol vaginal CREA	80
EPIVIR TABS 150 MG (lamivudine) 29		erythromycin (ophth)	70	estradiol vaginal TABS	80
EPIVIR TABS 300 MG (lamivudine) 29		ERYTHROMYCIN	69	ESTROFACTORS TABS	64
EPZICOM (abacavir sulfate-lamivudine)	29	erythromycin base CPEP	50	ethambutol hcl TABS	24
EQ MULTIVITAMIN GUMMIES CHILDRENS CHEW	65	erythromycin base TABS	50	ethosuximide CAPS	13
EQ MULTIVITAMINS CHILDRENS GUMMY CHEW	65	erythromycin base TBEC	50	ethosuximide SOLN	13
EQ SPACE CHAMBER ANTI-STATIC DEVI	54	erythromycin ethylsuccinate SUSR 50		ethynodiol diacet & eth estrad 35 MCG-1 MG	33
EQ SPACE CHAMBER ANTI-STATIC/LARGE MASK DEVI	54	erythromycin ethylsuccinate TABS 50		ethynodiol diacet & eth estrad 50 MCG-1 MG	34
EQ SPACE CHAMBER ANTI-STATIC/MEDIUM MASK DEVI ...	54	erythromycin stearate TABS 250 MG 50		etodolac CAPS	3
EQ SPACE CHAMBER ANTI-STATIC/SMALL MASK DEVI	54	ESBRIET CAPS (pirfenidone)	75	etodolac TABS	3
		ESBRIET TABS (pirfenidone)	75	etodolac TB24	3
		escitalopram oxalate TABS 10 MG 14		etonogestrel-ethinyl estradiol	34
		escitalopram oxalate TABS 20 MG 14		etravirine 100 MG	29
				etravirine 200 MG	29
				EUCERIN ORIGINAL HEALING	

CREA (skin protectants, misc.)	42	FELDENE CAPS (piroxicam)	3	FILTER AIR PP MISC	54
EUFLEXXA SOSY	67	felodipine	32	finasteride	47
EULEXIN	25	FEMARA (letrozole)	25	fingolimod hcl	74
EVISTA (raloxifene hcl)	44	fenofibrate micronized 134 MG, 200 MG	20	FIRAZYR SOSY (icatibant acetate)	47
EVOTAZ	29	fenofibrate micronized 67 MG	20	FIRST-OMEPRAZOLE SUSP	77
EXELON 4.6 MG/24HR, 9.5 MG/24HR (rivastigmine)	73	fenofibrate TABS 160 MG	20	FIRVANQ SOLR OR (vancomycin hcl)	23
exemestane	25	fenofibrate TABS 54 MG	20	flavoxate hcl	78
EXFORGE (amlodipine besylate-valsartan)	22	FENOFIBRATE TABS	20	flecainide acetate	8
EXFORGE HCT (amlodipine-valsartan-hydrochlorothiazide)	22	FENSOLVI SC	45	FLEET ENEMA ENEM (sodium phosphates)	49
EXJADE TBSO (deferasirox)	18	fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR	5	FLEET PEDIATRIC ENEM (sodium phosphates)	49
EXPIRATORY MOUTHPIECE MISC	54	FER-IN-SOL SOLN (ferrous sulfate)	48	FLEXICHAMBER ADULT MASK/SMALL	54
EXTAVIA KIT	74	FERRETTS TABS	48	FLEXICHAMBER CHILD MASK/LARGE	54
EYE HEALTH CAPS	63	ferrous fumarate TABS 324 MG	48	FLEXICHAMBER CHILD MASK/SMALL	54
EYE MULTIVITAMIN CAPS	63	ferrous fumarate-fa-b complex-c-zn-mg-mn-cu TABS	48	FLEXICHAMBER DEVI	54
EYE MULTIVITAMIN/LUTEIN CAPS	63	FERROUS GLUCONATE TABS 324 MG	48	FLINTSTONES COMPLETE CHEW	65
EYLEA SOSY	69	ferrous sulfate SOLN 15 MG/ML	48	FLINTSTONES COMPLETE/CALCIUM & VITAMIN D CHEW	65
ezetimibe	21	ferrous sulfate SOLN 220 MG/5ML, 300 MG/6.8ML	48	FLINTSTONES GUMMIES CHEW	65
ezetimibe-simvastatin	20	ferrous sulfate TABS 65 MG, 325 MG	48	FLINTSTONES GUMMIES COMPLETE CHEW	65
famciclovir	31	FERROUS SULFATE TBEC (ferrous sulfate)	48	FLINTSTONES GUMMIES PLUSBONE BUILDING SUPPORT CHEW	65
famotidine SUSR	77	ferrous sulfate TBEC	48	FLINTSTONES GUMMIES IMMUNITY SUPPORT/EXTRA C CHEW	65
famotidine TABS	77	FEVERALL JUNIOR STRENGTH SUPP	4		
FARESTON (toremifene citrate)	25	fexofenadine hcl TABS 180 MG	20		
FC2 FEMALE CONDOM	50	fexofenadine hcl TABS 60 MG	20		
felbamate SUSP	12				
felbamate TABS	12				
FELBATOL SUSP (felbamate)	12				
FELBATOL TABS (felbamate)	12				

FLINTSTONES SOUR GUMMIES CHEW	65	fluoxetine hcl SOLN	14	FOLAMED DHA CAPS	63
FLINTSTONES TODDLER/TASTISMOOTH CHEW 65		fluoxetine hcl TABS 10 MG	14	FOLCYTEINE TABS	64
FLINTSTONES/IMMUNITY SUPPORT CHEW	65	fluoxetine hcl TABS 20 MG	14	folic acid TABS 1 MG	48
FLOMAX (tamsulosin hcl)	47	fluphenazine decanoate	28	folic acid TABS 400 MCG, 800 MCG .	48
FLOXAZONE ALLERGY RELIEF CHILDRENS SUSP (fluticasone propionate (nasal))	68	fluphenazine hcl TABS	28	formaldehyde SOLN 10 %	28
FLOXAZONE ALLERGY RELIEF SUSP (fluticasone propionate (nasal))	68	flurazepam hcl	48	FORTEO SOPN (teriparatide (recombinant))	44
fluconazole SUSP	19	flurbiprofen sodium	71	FOSAMAX TABS 70 MG (alendronate sodium)	44
fluconazole TABS 100 MG, 200 MG .	19	flurbiprofen TABS	3	fosamprenavir calcium TABS	29
fluconazole TABS 150 MG	19	flutamide	25	fosinopril sodium & hydrochlorothiazide	22
fluconazole TABS 50 MG	19	fluticasone propionate (nasal) SUSP .	68	fosinopril sodium	21
fludrocortisone acetate TABS	35	fluticasone propionate CREA 0.05 %	41	FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM	51
flunisolide (nasal) 0.025 %	68	fluticasone propionate hfa 110 MCG/ACT, 220 MCG/ACT	9	FREESTYLE LIBRE 14 DAY/SENSOR/FLASH MONITORING SYSTEM	51
fluocinolone acetonide (otic)	72	fluticasone propionate hfa 44 MCG/ACT	9	FREESTYLE LIBRE 2/READER/FLASH GLUCOSE MONITORING SYSTEM	51
fluocinonide CREA 0.05 %	41	fluticasone propionate OINT	41	FREESTYLE LIBRE 3/SENSOR/GLUCOSE MONITORING SYSTEM	51
fluocinonide emulsified base	41	fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT	10	FREESTYLE LIBRE 2/SENSOR/FLASH GLUCOSE MONITORING SYSTEM	51
fluocinonide GEL	41	fluvoxamine maleate TABS 100 MG .	14	FREESTYLE LIBRE 3/SENSOR/GLUCOSE MONITORING SYSTEM	51
fluocinonide OINT	41	fluvoxamine maleate TABS 25 MG, 50 MG	14	FREESTYLE LIBRE/READER/FLASH MONITORING SYSTEM	51
fluocinonide SOLN	41	FLYP HYPERSONIQ CARTRIDGE MISC	54	FULL KIT NEBULIZER SET MISC	54
fluorometholone (ophth) SUSP	70	FML LIQUIFILM SUSP (fluorometholone (ophth))	70	furosemide SOLN OR 10 MG/ML, 40 MG/5ML	44
fluorouracil (topical) CREA 0.5 %	39	FML OINT	70	furosemide TABS	44
fluorouracil (topical) CREA 5 %	39	FOCALIN TABS (dexmethylphenidate hcl)	1		
fluorouracil (topical) SOLN	39	FOLAGENT DHA CAPS	63		

gabapentin CAPS	11	GERI-TUSSIN SYRP	37	GRASTEK SUBL	2
gabapentin SOLN	11	GILENYA (fingolimod hcl)	74	griseofulvin microsize SUSP	19
gabapentin TABS 600 MG	11	GILENYA 0.5 MG	74	griseofulvin microsize TABS	19
gabapentin TABS 800 MG	11	ginger (zingiber officinalis) CAPS 250 MG	2	griseofulvin ultramicrosize	19
GABITRIL (tiagabine hcl)	12	GIVLAARI	47	guaifenesin TB12 1200 MG	37
GALAFOLD	45	glatiramer acetate SOSY	74	guaifenesin TB12 600 MG	37
galantamine hydrobromide CP24 ..	73	glimepiride 1 MG, 2 MG	17	guaifenesin-codeine SOLN	36
galantamine hydrobromide SOLN ..	73	glimepiride 4 MG	17	guaifenesin-codeine SYRP	36
galantamine hydrobromide TABS ..	73	glipizide TABS	17	guanfacine hcl (adhd)	1
GAMMAGARD LIQUID	72	glipizide TB24	17	guanfacine hcl	21
GAMMAGARD S/D IGA LESS THAN 1MCG/ML SOLR	72	glipizide-metformin hcl	16	GUMMI BEAR MULTIVITAMIN/MINERAL CHEW ..	66
GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	72	glucagon (rdna)	16	GYNAZOLE-1	80
GAMUNEX-C 1 GM/10ML, 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	72	GLUCAGON EMERGENCY KIT (glucagon (rdna))	16	HADLIMA PUSHTOUCH SOAJ	3
GARDASIL 9 SUSP	78	GLUCOSE CHEW	16	HADLIMA SOSY	3
GARDASIL 9 SUSY	78	GLUCOTROL XL TB24 (glipizide) ..	18	HAEGARDA SOLR SC	47
gemfibrozil TABS	20	glyburide micronized 1.5 MG, 3 MG, 6 MG	18	HAIR FARE TABS	67
GENADEK STEP 1 CAPS	63	glyburide TABS	18	HAIR NOURISHING SUPPLEMENT TABS	67
GENADEK STEP 2 CAPS	63	glyburide-metformin	16	HAIR/SKIN/NAILS CAPS	63
GENERESS FE (norethindrone & ethinyl estradiol-fe)	34	glycerin (laxative) SUPP 2 GM	49	HALCION 0.25 MG (triazolam)	49
GENICIN VITA-Q TABS	64	GLYCERIN ADULT SUPP (glycerin (laxative))	49	HALDOL DECANOATE 100 (haloperidol decanoate)	27
gentamicin sulfate (ophth) OINT ...	70	glycopyrrolate TABS 1 MG, 2 MG ..	76	HALDOL DECANOATE 50 (haloperidol decanoate)	27
gentamicin sulfate (ophth) SOLN ...	70	GLYNASE (glyburide micronized) ..	18	haloperidol decanoate	27
gentamicin sulfate (topical) CREA ..	38	GNP GLUCOSE CHEW	16	haloperidol lactate CONC	27
gentamicin sulfate (topical) OINT ...	38	GNP MULTI CHILDRENS CHEW ..	65	haloperidol TABS 0.5 MG, 1 MG, 2 MG, 5 MG, 10 MG	27
GENVOYA	29	GNP QUICK DISSOLVE GLUCOSE CHEW	16	haloperidol TABS 20 MG	27
GEODON (ziprasidone hcl)	26	GOLYTELY SOLR (peg 3350-kcl-sod bicarb-sod chloride-sod sulfate) ...	49	HAVRIX	78
				HEALTHY EYES SUPERVISION2	

CAPS	63	hydrochlorothiazide TABS 25 MG, 50 MG	44	200 MG	24
HEALTHY HEART COMPLEX TABS 67		hydrocodone bitartrate-homatropine methylbromide SOLN	35	hydroxyurea	25
HEALTHY KIDS GUMMIES CHEW 66		hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML	6	HYDROXYUREA	33
HEART TABS TABS	67	hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	6	hydroxyzine hcl SYRP	8
heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/0.5ML, 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	10	hydrocortisone (intrarectal)	7	hydroxyzine hcl TABS	8
HEPARIN SODIUM SOSY IJ 5000 UNIT/0.5ML	10	hydrocortisone (rectal) EX 1 %	7	hydroxyzine pamoate CAPS	8
HEPLISAV-B SOSY	78	hydrocortisone (rectal) EX 2.5 %	7	hyoscyamine sulfate ELIX	76
HIBERIX SOLR IJ	78	hydrocortisone (topical) CREA 0.5 %, 1 %	41	hyoscyamine sulfate SOLN OR 0.125 MG/ML	76
HIGH POTENCY MULTIVITAMIN TABS	64	hydrocortisone (topical) CREA 2.5 % 41		hyoscyamine sulfate SUBL 0.125 MG	76
homatropine hbr	69	hydrocortisone (topical) LOTN 1 %, 2.5 %	41	hyoscyamine sulfate TABS 0.125 MG	76
HUMULIN 70/30 KWIKPEN SUPN 17		hydrocortisone (topical) OINT 1 % 41		hyoscyamine sulfate TB12 0.375 MG 76	
HUMULIN 70/30 SUSP	17	hydrocortisone (topical) OINT 2.5 % . 41		hyoscyamine sulfate TBDP 0.125 MG	76
HUMULIN N KWIKPEN SUPN 17		hydrocortisone butyrate SOLN 41		HYPERRHO S/D SOSY IM 1500 UNIT	72
HUMULIN N SUSP	17	hydrocortisone TABS	35	HYZAAR (losartan potassium & hydrochlorothiazide)	22
HUMULIN R SOLN IJ	17	hydrocortisone vaginal	80	IBRANCE CAPS	25
HYALGAN SOSY	67	hydrocortisone w/acetic acid	72	IBRANCE TABS	25
HYCODAN SOLN (hydrocodone bitartrate-homatropine methylbromide)	35	HYDROCORTISONE/ACETIC ACID (hydrocortisone w/acetic acid)	72	ibuprofen CHEW	3
hydralazine hcl TABS	23	HYDROMORPHONE HCL SUPP .. 5		ibuprofen SUSP	3
HYDRALYTE FREEZER POPS SOLN	59	hydromorphone hcl TABS 2 MG ... 5		ibuprofen TABS 200 MG, 400 MG, 600 MG, 800 MG	3
HYDRALYTE SOLN	59	hydromorphone hcl TABS 4 MG ... 5		icatibant acetate SOLN	47
HYDREA (hydroxyurea)	25	hydromorphone hcl TABS 8 MG ... 5		icatibant acetate SOSY	47
HYDROCERIN CREA	42	hydroxychloroquine sulfate 100 MG,		ICLUSIG	25
hydrochlorothiazide CAPS	44			imipramine hcl TABS	15
				imiquimod 5 %	41
				IMITREX 20 MG/ACT (sumatriptan)	

58	INFANTS ADVIL SUSP (ibuprofen) .3	PROTAMINE/INSULIN LISPRO
IMITREX 5 MG/ACT (sumatriptan) 58	INFANTS SILAPAP SOLN OR 4	KWIKPEN SUPN17
IMITREX STATDOSE REFILL SOCT	INFLECTRA SOLR 46	INSULIN LISPRO SOLN IJ 17
6 MG/0.5ML (sumatriptan succinate) .	INNOSPIRE REPLACEMENT	INSULIN SYRINGES - MISC 51
58	FILTER MISC 55	INTELENCE 100 MG (etravirine) ..29
IMITREX STATDOSE SYSTEM	INREBIC25	INTELENCE 200 MG (etravirine) ..29
SOAJ 6 MG/0.5ML (sumatriptan	INSPIREASE DRUG	INTELENCE 25 MG 29
succinate) 58	DELIVERYSYSTEM MISC 55	INTUNIV (guanfacine hcl (adhd)) ...1
IMITREX TABS (sumatriptan	INSPIREASE RESERVOIR BAGS	INVEGA SUSTENNA 117
succinate) 58	55	MG/0.75ML 26
IMMUNE ESSENTIALS DAILY CAPS	INSULIN ASPART FLEXPEN SOPN .	INVEGA SUSTENNA 156 MG/ML .26
..... 63	17	INVEGA SUSTENNA 234 MG/1.5ML
IMODIUM A-D CAPS (loperamide	INSULIN ASPART PENFILL SOCT	26
hcl) 18	17	INVEGA SUSTENNA 39 MG/0.25ML
IMODIUM A-D TABS (loperamide	INSULIN ASPART	26
hcl) 18	PROTAMINE/INSULIN ASPART	INVEGA SUSTENNA 78 MG/0.5ML
IMOYAX RABIES (H.D.C.V.) SUSR	FLEXPEN SUPN17	26
78	INSULIN ASPART	INVEGA TRINZA 273 MG/0.88ML 27
IMURAN TABS (azathioprine)60	PROTAMINE/INSULIN ASPART	INVEGA TRINZA 410 MG/1.32ML 26
IN-CHECK DIAL	SUSP17	INVEGA TRINZA 546 MG/1.75ML 26
INSPIRATORYFLOW TRAINER	INSULIN ASPART SOLN IJ 17	INVEGA TRINZA 819 MG/2.63ML 27
DEVI55	INSULIN DEGLUDEC FLEXTOUCH	IOPIDINE69
IN-CHECK INSPIRATORY	SOPN 100 UNIT/ML 17	IPOL INACTIVATED IPV78
FLOWMETER/NASAL WITH MASK	INSULIN DEGLUDEC FLEXTOUCH	ipratropium bromide (nasal) 0.03 %
DEVI55	SOPN 200 UNIT/ML 17	68
IN-CHECK INSPIRATORY	INSULIN DEGLUDEC SOLN 17	ipratropium bromide (nasal) 0.06 %
FLOWMETER/ORAL DEVI55	INSULIN GLARGINE-YFGN SOLN	68
INCRUSE ELLIPTA9	17	ipratropium bromide SOLN 0.02 % . 9
indapamide TABS 1.25 MG, 2.5 MG .	INSULIN GLARGINE-YFGN SOPN	ipratropium-albuterol SOLN10
44	17	irbesartan21
INDERAL LA CP24 (propranolol hcl) .	INSULIN LISPRO JUNIOR	irbesartan-hydrochlorothiazide22
32	KWIKPEN SOPN17	IRON CHEWS PEDIATRIC CHEW
indomethacin CAPS 25 MG, 50 MG 3	INSULIN LISPRO KWIKPEN SOPN .	48
indomethacin CPR3	17	
INFANRIX 76	INSULIN LISPRO	

IRON TABS 28 MG	48	KALETRA TABS 50 MG-200 MG (lopinavir-ritonavir)	29	KINRIX SUSY	76
ISENTRESS CHEW 100 MG	29	KANJINTI	25	KLARON (sulfacetamide sodium (acne))	38
ISENTRESS CHEW 25 MG	29	KAPVAY TB12 (clonidine hcl (adhd)) 1		KLONOPIN TABS (clonazepam) ..	11
ISENTRESS PACK	29	KEPPRA SOLN OR 100 MG/ML (levetiracetam)	11	KOKO PEAK PRO REPLACEMENT PLASTIC	
ISENTRESS TABS	29	KEPPRA TABS 1000 MG (levetiracetam)	11	MOUTHPIECE MISC	55
isoniazid SYRP	24	KEPPRA TABS 250 MG, 750 MG (levetiracetam)	11	KOMBIGLYZE XR (saxagliptin- metformin hcl)	16
isoniazid TABS	24	KEPPRA TABS 500 MG (levetiracetam)	11	K-PHOS NEUTRAL (pot phosphate monobasic w/ sod phosphate dibasic & monobasic)	60
ISOPTO CARPINE SOLN 1 % (pilocarpine hcl)	69	KEPPRA XR TB24 (levetiracetam)	11	KRINTAFEL	24
ISORDIL TITRADOSE TABS 5 MG (isosorbide dinitrate)	7	KERALYT GEL (salicylic acid)	42	K-TAB TBCR 8 MEQ, 10 MEQ (potassium chloride)	60
isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG	7	KERALYT GEL	42	labetalol hcl TABS 100 MG	31
isosorbide mononitrate TABS	7	ketoconazole (topical) CREA	38	labetalol hcl TABS 200 MG	31
isosorbide mononitrate TB24	7	ketoconazole (topical) SHAM 2 %	38	labetalol hcl TABS 300 MG	31
isotretinoin 10 MG, 20 MG, 30 MG, 40 MG	38	KETONE STRP	43	lactic acid (ammonium lactate) CREA	41
ITCH RELIEF CREA	39	KETONE TEST STRIPS STRP	43	lactic acid (ammonium lactate) LOTN 12 %	41
itraconazole CAPS	19	ketoprofen CAPS 50 MG	3	lactulose (encephalopathy)	46
IXIARO	78	ketoprofen CP24	3	lactulose SOLN	49
JADENU SPRINKLE PACK (deferasirox)	18	ketorolac tromethamine (ophth) 0.4 %	71	LAMICTAL CHEWABLE DISPERSIBLE CHEW (lamotrigine)	
JADENU TABS (deferasirox)	18	ketorolac tromethamine (ophth) 0.5 %	71	11	
JANSSEN COVID-19 VACCINE ..	78	ketorolac tromethamine TABS	3	LAMICTAL TABS (lamotrigine)	12
JULUCA	29	KETOSTIX STRP	43	LAMICTAL XR TB24 (lamotrigine) .	11
JUST 4 KIDZ MULTIVITAMIN+PROBIOTIC CHEW	66	ketotifen fumarate (ophth) 0.035 % 71		LAMISIL AT CREA (terbinafine hcl (topical))	39
JYNNEOS	78	KEY-E CHEW	81	LAMISIL AT JOCK ITCH CREA (terbinafine hcl (topical))	39
KALETRA SOLN (lopinavir-ritonavir) . 29		KINDERLYTE PREMAX SOLN ...	59	lamivudine SOLN	29
KALETRA TABS 25 MG-100 MG (lopinavir-ritonavir)	29	KINDERLYTE SOLN	59		

lamivudine TABS 150 MG	29	levetiracetam TABS 250 MG, 750 MG	12	lidocaine hcl CREA 3 %, 4 %	42
lamivudine TABS 300 MG	29	levetiracetam TABS 500 MG	12	lidocaine hcl GEL 2 %	42
lamotrigine CHEW	12	levetiracetam TB24	12	lidocaine-prilocaine CREA	42
lamotrigine TABS	12	levobunolol hcl 0.5 %	69	liothyronine sodium TABS	76
lamotrigine TB24	12	levocarnitine (metabolic modifiers) SOLN OR 1 GM/10ML	45	LIPIDSHIELD PLUS TABS	67
LANCET DEVICE - MISC	51	levocarnitine (metabolic modifiers) TABs	45	LIPITOR TABS (atorvastatin calcium)	20
LANCETS - MISC	51	levocetirizine dihydrochloride TABS 20		lisdexamphetamine dimesylate CAPS 1	
lanolin (topical) CREA	42	levofloxacin TABS	46	lisinopril & hydrochlorothiazide ...	22
lanolin (topical) OINT	42	levonorgestrel & eth estradiol TABS 34		lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG	21
lanolin XX	73	levonorgestrel (emergency oc) 1.5 MG	34	LITETOUCH MASK LARGE MISC	55
LANOLIN XX	73	levonorgestrel-eth estradiol (triphasic)	34	LITETOUCH MASK MEDIUM MISC .	55
LANOLOR CREA	42	levonorgestrel-ethinyl estradiol (91- day) 0.03 MG-0.15 MG	34	LITETOUCH MASK SMALL MISC	55
LANOXIN TABS 125 MCG, 250 MCG (digoxin)	33	levothyroxine sodium TABS	76	lithium	26
lansoprazole CPDR 15 MG	77	LEXAPRO TABS 10 MG (escitalopram oxalate)	14	lithium carbonate CAPS	26
lansoprazole CPDR 30 MG	77	LEXAPRO TABS 20 MG (escitalopram oxalate)	14	LITHIUM CARBONATE POWD ...	26
LASIX TABS (furosemide)	44	LEXAPRO TABS 5 MG (escitalopram oxalate)	14	lithium carbonate TABS	26
latanoprost SOLN	71	LEXIVA SUSP	29	lithium carbonate TBCR	26
LATUDA (lurasidone hcl)	26	LEXIVA TABS (fosamprenavir calcium)	29	LITHOBID TBCR (lithium carbonate) .	26
LEADER QUICK DISSOLVE GLUCOSE CHEW	16	LIALDA TBEC (mesalamine)	46	LITTLE REMEDIES SALINE SPRAY/DROPS SOLN	68
leflunomide	4	LICEMD GEL	42	LMX 4 CREA (lidocaine)	42
letrozole	25	lidocaine CREA 4 %	42	LODINE TABS (etodolac)	3
leucovorin calcium TABS	25	lidocaine hcl (mouth-throat) 2 % ...	61	LODOSYN (carbidopa)	25
LEUKERAN	25			LOHIST-D LIQD	36
levalbuterol tartrate	10			LOMOTIL TABS (diphenoxylate w/ atropine)	18
LEVBID TB12 (hyoscyamine sulfate) 76				loperamide hcl CAPS	18
levetiracetam SOLN OR 100 MG/ML, 500 MG/5ML	12			loperamide hcl TABS	18
levetiracetam TABS 1000 MG	12				

LOPID TABS (gemfibrozil)	20	LOTRIMIN AF JOCK ITCH CREA (clotrimazole (topical))	39	MAGOX 400 TABS (magnesium oxide (mg supplement))	60
lopinavir-ritonavir SOLN	29	lovastatin TABS 10 MG, 20 MG ...	20	malathion	43
lopinavir-ritonavir TABS 25 MG-100 MG	29	lovastatin TABS 40 MG	20	maraviroc TABS 150 MG	29
lopinavir-ritonavir TABS 50 MG-200 MG	29	LOVENOX SOLN IJ 300 MG/3ML (enoxaparin sodium)	10	maraviroc TABS 300 MG	29
LOPRESSOR TABS 100 MG (metoprolol tartrate)	31	LOVENOX SOSY 100 MG/ML, 150 MG/ML (enoxaparin sodium)	11	MASK VORTEX/CHILD/FROG ...	55
LOPRESSOR TABS 50 MG (metoprolol tartrate)	31	LOVENOX SOSY 30 MG/0.3ML (enoxaparin sodium)	10	MASK VORTEX/TODDLER/LADYBUG ..	55
loratadine & pseudoephedrine TB12 .	36	LOVENOX SOSY 40 MG/0.4ML (enoxaparin sodium)	11	MAVYRET PACK	30
loratadine & pseudoephedrine TB24 .	36	LOVENOX SOSY 60 MG/0.6ML (enoxaparin sodium)	11	MAVYRET TABS	30
loratadine SOLN	20	LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (enoxaparin sodium) ...	11	MAXALT TABS 10 MG (rizatriptan benzoate)	58
loratadine TABS	20	loxapine succinate	27	MAXALT-MLT TBDP 10 MG (rizatriptan benzoate)	58
loratadine TBDP 10 MG	20	lurasidone hcl	26	MAXITROL OINT (neomycin-polymy- dexameth)	70
lorazepam TABS 0.5 MG, 2 MG	8	LYSTEDA TABS (tranexamic acid) 48		MAXITROL SUSP (neomycin- polymy-dexameth)	70
lorazepam TABS 1 MG	8	MACROBID (nitrofurantoin monohyd macro)	24	MAXI-TUSS PE LIQD	36
losartan potassium & hydrochlorothiazide	22	MACRODANTIN 50 MG, 100 MG (nitrofurantoin macrocrystal)	24	MAXI-TUSS PE MAX LIQD	36
losartan potassium	21	MAGNESIUM CAPS 400 MG	60	MAXZIDE TABS (triamterene & hydrochlorothiazide)	44
LOTENSIN 10 MG, 20 MG (benazepril hcl)	21	magnesium citrate	49	MAXZIDE-25 TABS (triamterene & hydrochlorothiazide)	43
LOTENSIN 40 MG (benazepril hcl) 21		MAGNESIUM EXTRA STRENGTH CAPS	60	meclizine hcl CHEW	19
LOTENSIN HCT 12.5 MG-10 MG, 12.5 MG-20 MG, 25 MG-20 MG (benazepril & hydrochlorothiazide) 22		magnesium hydroxide SUSP 7.75 %, 400 MG/5ML, 1200 MG/15ML, 2400 MG/30ML	49	meclizine hcl TABS 12.5 MG, 25 MG 19	
LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (amlodipine besylate-benazepril hcl) .	22	magnesium oxide (mg supplement) TABs 400 MG	60	MEDROL DOSEPAK TBPK (methylprednisolone)	35
LOTRIMIN AF CREA (clotrimazole (topical))	39	MAGNESIUM OXIDE CAPS	60	MEDROL TABS 4 MG, 8 MG (methylprednisolone)	35
		magnesium oxide TABS 400 MG ...	7	medroxyprogesterone acetate (contraceptive) SUSP IM	34
				medroxyprogesterone acetate	

(contraceptive) SUSY IM	34	MESTINON TABS (pyridostigmine bromide)	24	20 MG	2
medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG	73	MESTINON TIMESPAN TBCR (pyridostigmine bromide)	24	methylphenidate hcl TABS 5 MG ...	2
mefloquine hcl	24	METADATE CD CPR (methylphenidate hcl)	1	methylphenidate hcl TB24 18 MG, 27 MG, 54 MG	2
megestrol acetate SUSP	25	metformin hcl TABS 1000 MG	16	methylphenidate hcl TB24 36 MG ..	2
megestrol acetate TABS	25	metformin hcl TABS 500 MG	16	methylphenidate hcl TBCR 10 MG, 20 MG, 36 MG	2
MEKTOVI	25	metformin hcl TABS 850 MG	16	methylphenidate hcl TBCR 18 MG, 27 MG, 54 MG	2
meloxicam TABS	3	metformin hcl TB24 500 MG	16	methylprednisolone TABS 4 MG, 8 MG	35
melphalan	25	metformin hcl TB24 750 MG	16	methylprednisolone TBPk	35
memantine hcl SOLN	73	methadone hcl TABS 10 MG	5	metoclopramide hcl SOLN OR 5 MG/5ML, 10 MG/10ML	46
memantine hcl TABS	73	methadone hcl TABS 5 MG	5	metoclopramide hcl TABS	46
MEMORY COMPLEX BRAIN HEALTH TABS	67	methazolamide TABS	43	metolazone	44
MENACTRA	78	methenamine mandelate	24	metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 25 MG-50 MG	22
MENATROL CAPS	63	methenamine-hyosc-methylene blue- sod phos-phenyl sal TABS 10.8 MG- 81.6 MG-0.12 MG-36.2 MG-40.8 MG, 10.8 MG-81.6 MG-36.2 MG-0.12 MG- 40.8 MG	23	metoprolol & hydrochlorothiazide TABS 50 MG-100 MG	22
MENQUADFI	78	methimazole TABS	76	metoprolol succinate TB24 200 MG 31	
MENS 50+ ADVANCED CAPS ...	63	METHITEST TABS	6	metoprolol succinate TB24 25 MG, 50 MG, 100 MG	31
MENVEO SOLN	78	methocarbamol TABS 500 MG, 750 MG	67	metoprolol tartrate TABS 100 MG .	31
MENVEO SOLR	78	METHOTREXATE	2	metoprolol tartrate TABS 25 MG, 50 MG	31
meperidine hcl SOLN OR 50 MG/5ML	5	methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML	25	METROCREAM CREA (metronidazole (topical))	42
meperidine hcl TABS 50 MG	5	methotrexate sodium TABS 2.5 MG 25		METROLOTION LOTN (metronidazole (topical))	42
MEPHYTON TABS (phytonadione) 81		methylodopa TABS	21	metronidazole (topical) CREA	42
meprobamate	8	methylergonovine maleate TABS ..	72	metronidazole (topical) GEL 0.75 %	42
mercaptopurine TABS	25	methylphenidate hcl CPR	1		
mesalamine CP24	46	methylphenidate hcl TABS 10 MG,	42		
mesalamine CPDR	46				
mesalamine ENEM	46				
mesalamine TBEC 1.2 GM	46				
mesalamine TBEC 800 MG	46				

metronidazole (topical) LOTN 42	MG/24HR (estradiol) 45	MOI-STIR SOLN 62
metronidazole TABS 23	MINIVELLE PTTW 0.0375 MG/24HR (estradiol) 45	mometasone furoate CREA 41
metronidazole vaginal 80	minocycline hcl CAPS 76	mometasone furoate OINT 41
mexiletine hcl 8	minoxidil 10 MG 23	mometasone furoate SOLN 41
MG PLUS PROTEIN TABS 67	minoxidil 2.5 MG 23	MONISTAT 3 COMBINATION PACK KIT (miconazole nitrate vaginal) ... 80
MIACALCIN IJ (calcitonin (salmon)) 44	MIRALAX POWD (polyethylene glycol 3350) 49	MONISTAT 3 CREA (miconazole nitrate vaginal) 80
MICARDIS (telmisartan) 21	MIRCETTE (desogestrel-ethinyl estradiol (biphasic)) 34	MONISTAT 7 SIMPLY CURE CREA (miconazole nitrate vaginal) 80
MICARDIS HCT (telmisartan-hydrochlorothiazide) 22	mirtazapine TABS 15 MG 13	MONISTAT CARE INSTANT ITCH RELIEF MAXIMUM STRENGTH (hydrocortisone vaginal) 80
MICATIN CREA (miconazole nitrate (topical)) 39	mirtazapine TABS 30 MG 13	MONOVISC 67
miconazole nitrate (topical) CREA .39	mirtazapine TABS 7.5 MG, 45 MG 13	montelukast sodium CHEW 9
miconazole nitrate vaginal CREA 2 % 80	mirtazapine TBDP 15 MG 13	montelukast sodium PACK 9
miconazole nitrate vaginal CREA 4 % 80	mirtazapine TBDP 30 MG 13	montelukast sodium TABS 9
miconazole nitrate vaginal KIT 80	mirtazapine TBDP 45 MG 13	MOOD FOOD CAPS 63
miconazole nitrate vaginal SUPP 100 MG 80	misoprostol 77	MOOD FOOD ES CAPS 63
miconazole nitrate vaginal SUPP 200 MG 80	M-M-R II SOLR 78	morphine sulfate SOLN OR 10 MG/5ML, 20 MG/5ML 5
MICROCHAMBER DEVI 55	MODERNA COVID-19 VACCINE SUSP 79	MORPHINE SULFATE SOLN OR 20 MG/5ML 5
MICROCHAMBER MISC 55	MODERNA COVID-19 VACCINE,BIVALENT ORIGINAL AND OMICRON 79	morphine sulfate SOLN OR 20 MG/ML, 100 MG/5ML 5
MICROSPACER MISC 55	MODERNA COVID-19 VACCINE/6MO-11Y/2023-24 SUSP . 79	morphine sulfate SUPP 5
midazolam hcl SOLN IJ 49	MODERNA COVID-19 VACCINE/BIVALENT/6MO-5Y ... 79	morphine sulfate TABS 5
midodrine hcl 80	MODERNA COVID-19 VACCINE/BIVALENT/BA.4/BA.5 . 79	morphine sulfate TBCR 5
MIL ADREGEN TABS 67	MODERNA COVID-19 VACCINE6-11Y SUSP 79	MOTRIN CHILDRENS CHEW (ibuprofen) 3
MINIELITE FILTER REPLACEMENTS MISC 55	MODERNA COVID-19 VACCINE6MO-5Y SUSP 79	MOTRIN INFANTS DROPS SUSP (ibuprofen) 3
MINIPRESS CAPS (prazosin hcl) . 21		MOUTH KOTE REMINT SOLN 62
MINIVELLE PTTW 0.025 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1		

MOUTH KOTE SOLN	62	mupirocin calcium (topical)	38	MYLICON INFANTS GAS RELIEF SUSP (simethicone)	46
moxifloxacin hcl (ophth) SOLN OP	70	mupirocin OINT	38	MYSOLINE (primidone)	12
MS CONTIN TBCR (morphine sulfate)	5	MVASI	25	nabumetone	3
MUCINEX D MAXIMUM STRENGTH TB12 (pseudoephedrine-guaifenesin)	36	MVW COMPLETE FORMULATION CAPS	63	nadolol TABS 20 MG, 40 MG, 80 MG	32
MUCINEX D TB12 (pseudoephedrine-guaifenesin) ...	36	MVW COMPLETE FORMULATION CHEW	66	naloxone hcl LIQD	18
MUCINEX DM TB12 (dextromethorphan-guaifenesin) ...	36	MVW COMPLETE FORMULATIOND3000 CAPS	63	naloxone hcl SOCT	18
MUCINEX MAXIMUM STRENGTH TB12 (guaifenesin)	37	MVW COMPLETE FORMULATIOND3000 CHEW	66	naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML	18
MUCINEX TB12 (guaifenesin)	37	MVW COMPLETE FORMULATIOND500 CAPS	63	naloxone hcl SOSY	18
MULTI VITAMIN TABS	64	MVW COMPLETE FORMULATIOND5000 CHEW	66	naltrexone hcl	18
MULTI VITAMIN/D-3 TABS	64	MVW COMPLETE FORMULATIONMINIS CAPS	63	NAMENDA TABS (memantine hcl) 73	
multiple vitamin TABS	64	MVW MODULATOR FORMULATION CAPS	63	NAMENDA TITRATION PAK TABS (memantine hcl)	73
multiple vitamins w/ calcium TABS	62	MVW MODULATOR FORMULATION MINIS CAPS	63	naphazoline w/ pheniramine	70
multiple vitamins w/ iron TABS	62	MYAMBUTOL TABS 400 MG (ethambutol hcl)	24	NAPHCAN-A (naphazoline w/ pheniramine)	70
multiple vitamins w/ minerals CAPS 63		MYCOBUTIN (rifabutin)	24	NAPROSYN SUSP (naproxen)	3
MULTIPLE VITAMINS W/ MINERALS TABS - MISC	63	mycophenolate mofetil CAPS	60	NAPROSYN TABS 500 MG (naproxen)	3
MULTIVITAMIN ADULT TABS	64	mycophenolate mofetil SUSR	60	naproxen sodium TABS 220 MG ...	3
MULTIVITAMIN GUMMIES CHILDRENS CHEW	66	mycophenolate mofetil TABS	60	naproxen sodium TABS 275 MG, 550 MG	3
MULTIVITAMIN INFANT & TODDLER SOLN OR	66	mycophenolate sodium	60	naproxen SUSP	3
MULTIVITAMIN INFANT/TODDLER SOLN OR	66	MYDRIACYL SOLN (tropicamide) .	69	naproxen TABS	3
MULTIVITAMIN TABS	64	MYFORTIC (mycophenolate sodium)	60	naproxen TBEC	3
MULTIVITAMIN W/IRON/INFANT/TODDLER SOLN 66		MYLERAN TABS	25	naratriptan hcl	58
		MYLICON INFANTS GAS RELIEF DYE FREE SUSP (simethicone) ..	46	NARCAN LIQD (naloxone hcl)	18
				NARDIL (phenelzine sulfate)	14
				NASACORT ALLERGY 24HR AERO (triamcinolone acetonide (nasal)) ..	68

NASACORT ALLERGY 24HR CHILDRENS AERO (triamcinolone acetone (nasal))	NEORAL SOLN (cyclosporine modified (for microemulsion))	NICORETTE GUM (nicotine polacrilex)
68	61	74
NASALCROM (cromolyn sodium (nasal))	NEOSPORIN ORIGINAL OINT (neomycin-bacitracin-polymyxin)	NICORETTE LOZG (nicotine polacrilex)
68	38	74
nateglinide	NEOSPORIN PLUS PAIN RELIEF MAXIMUM STRENGTH (neomycin-polymyxin w/ pramoxine)	NICORETTE MINI LOZG (nicotine polacrilex)
17	38	74
NATROBA (spinosad)	NEURONTIN CAPS (gabapentin)	NICORETTE STARTER KIT GUM (nicotine polacrilex)
43	12	74
NATURAL FIBER LAXATIVE POWD 49	NEURONTIN SOLN (gabapentin)	nicotine MISC XX
	12	75
NAYZILAM	NEURONTIN TABS 600 MG (gabapentin)	nicotine polacrilex GUM
11	12	74
NEBULIZER AIR TUBE/PLUGS MISC	NEURONTIN TABS 800 MG (gabapentin)	nicotine polacrilex LOZG
55	12	75
NEBULIZER CUP/TUBING DEVI	NEUTROGENA T/GEL SHAM 0.5 % (coal tar extract)	nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR
55	43	75
NEBULIZER MASK ADULT MISC	nevirapine SUSP	NICOTINE TRANSDERMAL SYSTEM KIT
55	29	75
NEBULIZER MASK CHILD MISC	nevirapine TABS	NICOTROL INHALER INHA
55	29	75
nefazodone hcl	nevirapine TB24 100 MG	NICOTROL NS SOLN
15	29	75
NEOMULTIVITE TABS	nevirapine TB24 400 MG	nifedipine CAPS
64	29	32
neomycin sulfate TABS	NEXIUM 24HR CLEAR MINIS CPDR (esomeprazole magnesium)	nifedipine TB24 30 MG, 90 MG
2	77	32
neomycin-bacitracin zn-polymyxin	NEXIUM 24HR CPDR (esomeprazole magnesium)	nifedipine TB24 60 MG
70	77	32
neomycin-bacitracin-polymyxin OINT	niacin (antihyperlipidemic) TABS	NITRO-BID OINT
38	21	7
neomycin-polymy-dexameth OINT	niacin (antihyperlipidemic) TBCR	NITRO-DUR PT24 (nitroglycerin)
70	21	7
neomycin-polymy-dexameth SUSP	niacin CPCR 250 MG, 500 MG	nitrofurantoin
70	81	24
neomycin-polymyxin w/ pramoxine	niacin TABS 500 MG	nitrofurantoin macrocrystal 50 MG, 100 MG
38	81	24
neomycin-polymyxin-gramicidin	niacin TBCR	nitrofurantoin monohyd macro
70	81	24
neomycin-polymyxin-hc (ophth)	NIACIN TR TBCR	nitroglycerin CPCR
70	81	7
neomycin-polymyxin-hc (otic) SOLN	NIASPAN TBCR (niacin (antihyperlipidemic))	nitroglycerin PT24
71	21	7
neomycin-polymyxin-hc (otic) SUSP	nicardipine hcl CAPS	nitroglycerin SUBL
71	32	7
NEORAL CAPS (cyclosporine modified (for microemulsion))	NICODERM CQ PT24 TD (nicotine)	NITROSTAT SUBL (nitroglycerin)
60	74	8
		NIVA THYROID TABS
		76
		NIX CREME RINSE LIQD EX (permethrin)
		43

NIZORAL SHAM	39	NORVIR CAPS	29	nystatin-triamcinolone CREA	39
NORDITROPIN FLEXPLO SOPN	44	NORVIR SOLN	29	nystatin-triamcinolone OINT	39
norelgestromin-ethinyl estradiol	34	NORVIR TABS (ritonavir)	29	OCEAN NASAL SPRAY SOLN	
norethin acet & estrad-fe TABS 1		NOSE CLIP MISC	55	(saline)	68
MG-20 MCG-75 MG, 1.5 MG-30		NOVAVAX COVID-19 VACCINE	79	OCTAGAM SOLN 30 GM/300ML	72
MCG-75 MG	34	NOVAVAX COVID-19		OCUFLOX (ofloxacin (ophth))	70
norethindrone & eth estradiol	34	VACCINE/2023-24	79	OCUVEL CAPS 250 MG-0.5 MG-5	
norethindrone & ethinyl estradiol-fe	34	NOVOLIN 70/30 FLEXPEN SUPN	17	MG-1 MG-40 MG-1 MG-200 UNIT	63
norethindrone (contraceptive)	35	NOVOLIN 70/30 SUSP	17	OCUVITE ADULT 50+ CAPS	63
norethindrone acet & eth estra	34	NOVOLIN N FLEXPEN SUPN	17	OCUVITE ADULT FORMULA CAPS	63
norethindrone acetate TABS	73	NOVOLIN N SUSP	17	OCUVITE LUTEIN CAPS	63
norethindrone acetate-ethinyl		NOVOLIN R SOLN IJ	17	ODEFSEY	29
estradiol	45	NP THYROID 120 TABS	76	OFEV	75
norethindrone acetate-ethinyl		NP THYROID 15 TABS	76	ofloxacin (ophth)	70
estradiol-fe	34	NP THYROID 30 TABS	76	ofloxacin (otic)	71
norethindrone-eth estradiol (triphasic)	34	NP THYROID 60 TABS	76	ofloxacin 400 MG	46
norgestimate-ethinyl estradiol	34	NP THYROID 90 TABS	76	OGIVRI	25
(triphasic)	34	NULYTELY (peg 3350-potassium		olanzapine TABS 15 MG, 20 MG	27
norgestimate-ethinyl estradiol	34	chloride-sod bicarbonate-sod		olanzapine TABS 2.5 MG, 5 MG	27
norgestrel & ethinyl estradiol 30		chloride)	49	olanzapine TABS 7.5 MG, 10 MG	27
MCG-0.3 MG	34	NUMOISYN LIQD	62	olmesartan medoxomil	21
NORPACE CAPS (disopyramide		NUPLAZID CAPS	26	olmesartan medoxomil-amlodipine-	
phosphate)	8	NUPLAZID TABS 10 MG	26	hydrochlorothiazide	22
NORPACE CR CP12 150 MG	8	NUVARING (etonogestrel-ethinyl		olmesartan medoxomil-	
NORPRAMIN TABS 10 MG		estradiol)	34	hydrochlorothiazide	22
(desipramine hcl)	15	nystatin (mouth-throat)	61	OMBRA COMPRESSOR AIR	
NORPRAMIN TABS 25 MG		nystatin (topical) CREA	39	FILTERS MISC	55
(desipramine hcl)	15	nystatin (topical) OINT	39	OMBRA TABLE TOP	
nortriptyline hcl CAPS	15	nystatin (topical) POWD EX	39	COMPRESSOR DEVI	55
nortriptyline hcl SOLN	15	NYSTATIN 100000 UNIT/ML		omega-3 fatty acids CAPS	68
NORVASC TABS (amlodipine		(nystatin (mouth-throat))	61	OMEPRAZOLE + SYRSPEND	
besylate)	32	nystatin TABS	19	SFALKA SUSP	77

omeprazole CPDR	77	ONE-DAILY MULTI CAPS CAPS ..	63	ORKAMBI TABS	75
omeprazole magnesium TBEC	77	ONETOUCH ULTRA CONTROL		orphenadrine citrate TB12	67
omeprazole TBEC	77	LIQD	51	ORTHOVISC	67
OMNICAP TABS	64	ONETOUCH ULTRA CONTROL		oseltamivir phosphate CAPS 30 MG .	
ondansetron hcl SOLN IJ	18	SOLUTION LIQD	51	31	
ondansetron hcl SOLN OR 4		ONETOUCH ULTRA STRP	43	oseltamivir phosphate CAPS 45 MG,	
MG/5ML	18	ONETOUCH VERIO LEVEL 3		75 MG	31
ondansetron hcl SOSY	18	CONTROL SOLUTION LIQD	51	oseltamivir phosphate SUSR	31
ondansetron hcl TABS 24 MG	18	ONETOUCH VERIO LEVEL 4		OTEZLA TABS	4
ondansetron hcl TABS 4 MG, 8 MG		CONTROL SOLUTION LIQD	51	OTEZLA TBPK	4
18		ONETOUCH VERIO TEST STRIPS		OTREXUP SOAJ 10 MG/0.4ML, 12.5	
ondansetron TBDP	19	STRP	43	MG/0.4ML, 15 MG/0.4ML, 17.5	
ONE DAILY ESSENTIAL TABS ...	65	ONE-WAY VALVED		MG/0.4ML, 20 MG/0.4ML, 22.5	
ONE DAILY ESSENTIALS TABS ..	65	EXPIRATORYMOUTHPIECE/DISPO		MG/0.4ML, 25 MG/0.4ML	2
ONE FLOW FVC MONITORING		SABLE MISC	55	OVACE PLUS WASH LIQD	
SPIROMETER DEVI	55	ONE-WAY VALVED INSPIRATORY		(sulfacetamide sodium)	40
ONE FLOW TESTER TUBE		MOUTHPIECE/DISPOSABLE MISC .		OVACE WASH LIQD (sulfacetamide	
MOUTHPIECE MISC	55	55		sodium)	40
ONE VITE DAILY MULTIVITAMIN		ONGLYZA (saxagliptin hcl)	16	OVIDE (malathion)	43
TABS	65	OPCON-A (naphazoline w/		oxaprozin TABS	3
ONE-A-DAY ADULT VITACRAVES		pheniramine)	70	OXAYDO TABS 5 MG	5
MULTI+OMEGA-3 DHA GUMMIES		OPTICHAMBER DIAMOND DEVI ..	55	oxazepam CAPS	8
CHEW	65	OPTICHAMBER DIAMOND MISC ..	55	oxcarbazepine SUSP	12
ONE-A-DAY ESSENTIAL TABS		OPTICHAMBER		oxcarbazepine TABS	12
(multiple vitamin)	65	DIAMOND/LARGEFACE MASK		oxybutynin chloride TABS 5 MG ...	78
ONE-A-DAY MENS TABS (multiple		DEVI	55	oxybutynin chloride TB24	78
vitamin)	65	OPTICHAMBER DIAMOND/MEDIUM		oxycodone hcl CAPS	5
ONE-A-DAY SCOOBY-DOO		FACE MASK MISC	55	oxycodone hcl CONC 100 MG/5ML 5	
GUMMIES CHEW (pediatric multiple		OPTICHAMBER		oxycodone hcl SOLN	5
vitamin w/ minerals)	66	DIAMOND/SMALLFACE MASK		oxycodone hcl TABS	5
ONE-A-DAY WOMENS FORMULA		MISC	55	oxycodone w/ acetaminophen SOLN	
TABS (multiple vitamins w/ calcium) .		oral electrolytes SOLN	59	6	
62		ORAL RELIEF SPRAY FOR		oxycodone w/ acetaminophen TABS	
ONE-A-DAY/JOLLY RANCHER		DRYMOUTH & DISCOMFORT			
CHEW	66	SOLN	62		
		ORKAMBI PACK	75		

325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	6	MASK MISC	56	PEDIALYTE FREEZER POPS SOLN (oral electrolytes)	59
oyster shell	59	PARI TREK S COMBO PACK DEVI .	56	PEDIALYTE SINGLES SOLN (oral electrolytes)	59
OYSTER SHELL CALCIUM/D TABS .	59	PARI VORTEX ADULT MASK	56	PEDIALYTE SOLN (oral electrolytes)	59
PADCEV	25	PARLODEL CAPS (bromocriptine mesylate)	26	PEDIAPRED SOLN (prednisolone sodium phosphate)	35
PAMELOR CAPS (nortriptyline hcl)	16	PARLODEL TABS (bromocriptine mesylate)	26	PEDIARIX SUSY	76
PANDA MASK LARGE	56	PARNATE (tranylcypromine sulfate)	14	PEDIATRIC DISPOSABLE MOUTPIECE MISC	56
PANDA MASK MEDIUM	56	paroxetine hcl SUSP	14	PEDIATRIC MOUTHPIECE/DISPOSABLE MISC	56
PANDA MASK SMALL	56	paroxetine hcl TABS 10 MG	14	PEDIATRIC MOUTHPIECE/DISPOSABLE MISC .	56
pantoprazole sodium TBEC 20 MG	77	paroxetine hcl TABS 20 MG	14	PEDIATRIC MULTIVITAMIN W/FL CHEW	66
pantoprazole sodium TBEC 40 MG	77	paroxetine hcl TABS 30 MG, 40 MG .	14	PEDIATRIC MULTIVITAMIN W/FL SOLN	66
PARI ALTERA NEBULIZER HANDSET MISC	56	paroxetine hcl TB24	14	PEDIATRIC PANDA MASK	56
PARI BABY CONVERSION KITSIZE 1 MISC	56	PARVA-CAL	59	PEDVAX HIB SUSP	78
PARI BABY CONVERSION KITSIZE 2 MISC	56	PAXIL CR TB24 (paroxetine hcl) ..	14	peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR	49
PARI BABY CONVERSION KITSIZE 3 MISC	56	PAXIL SUSP (paroxetine hcl)	14	peg 3350-potassium chloride-sod bicarbonate-sod chloride	49
PARI ERAPID NEBULIZER HANDSET MISC	56	PAXIL TABS 10 MG (paroxetine hcl) .	14	PEG-PREP	49
PARI EXPIRATORY FILTER VALVE SET DEVI	56	PAXIL TABS 20 MG (paroxetine hcl) .	14	PENBRAYA	78
PARI MANUAL INTERRUPTER DEVI	56	PAXIL TABS 30 MG, 40 MG (paroxetine hcl)	14	penicillamine TABS	60
PARI MASK SET MISC	56	PAXLOVID 100 MG-150 MG	30		
PARI SMARTMASK BABY/ELBOW MISC	56	PC PEDIATRIC POLY-VITAMIN DROPS SOLN OR	66		
PARI SOFT PLASTIC ADULT MASK MISC	56	PC PEDIATRIC POLY-VITAMIN DROPS/IRON SOLN	66		
PARI SOFT PLASTIC PEDIATRIC		ped multivitamins w/fl & iron SOLN	65		
		PEDIALYTE ADVANCED CARE SOLN (oral electrolytes)	59		

penicillin v potassium SOLR	72	19VACCINE/6MO-4Y/2023-24 SUSP	79	PHESGO	25
penicillin v potassium TABS	72			phytonadione TABS 5 MG	81
PENTACEL	76	PFIZER-BIONTECH COVID-19VACCINE/ADULT RTU SUSP ..	79	PIFELTRO	29
pentoxifylline	47	PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/5-11Y ...	79	PILLOW MASK/ADULT MISC	56
PEPCID AC MAXIMUM STRENGTH TABS (famotidine)	77	PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/6M-4Y ...	79	PILLOW MASK/CHILD MISC	56
PEPCID AC TABS (famotidine)	77	PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/BA.4/BA.5	79	PILLOW MASK/PEDIATRIC MISC	56
PEPCID TABS (famotidine)	77			pilocarpine hcl (oral) 5 MG	62
PEPTO-BISMOL CHEW (bismuth subsalicylate)	18	PFLEX MISC	56	pilocarpine hcl SOLN 1 %, 2 %, 4 % .	69
PEPTO-BISMOL MAX STRENGTH SUSP (bismuth subsalicylate)	18	PHARMACIST CHOICE NEBULIZER/CPAP/INHALER CHAMBER MASK WIPES MISC ..	56	pimecrolimus	42
PEPTO-BISMOL TO-GO CHEW (bismuth subsalicylate)	18	phenazopyridine hcl TABS 100 MG, 100 MG, 200 MG	47	pindolol TABS	32
PERCOCET TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG (oxycodone w/ acetaminophen)	6	phenelzine sulfate	14	pioglitazone hcl	17
PERIDEX (chlorhexidine gluconate (mouth-throat))	61	phenobarbital ELIX	48	pioglitazone hcl-metformin hcl TABS .	16
permethrin CREA	43	phenobarbital TABS	48	pirfenidone CAPS	75
permethrin LIQD EX	43	phenylephrine hcl (oral) TABS	68	pirfenidone TABS	75
perphenazine TABS	28	phenylephrine-chlorphen-dm LIQD 10 MG/5ML-4 MG/5ML-15 MG/5ML	36	piroxicam CAPS	3
perphenazine-amitriptyline	73	phenylephrine-dm LIQD 2.5 MG/5ML-5 MG/5ML	36	PLAN B ONE-STEP (levonorgestrel (emergency oc))	34
PERSERIS PRSY	27	phenylephrine-dm SOLN	36	PLAVIX 75 MG (clopidogrel bisulfate)	47
PFIZER-BIONTECH COVID-19VACCINE SUSP	79	phenylephrine-shark liver oil-cocoa butter	7	PLEGRIDY SOPN	74
PFIZER-BIONTECH COVID-19VACCINE/5-11Y SUSP	79	phenylephrine-shark liver oil-mineral oil-petrolatum	7	PLEGRIDY SOSY SC	74
PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2023-24 SUSP	79	phenytoin CHEW	12	PLEGRIDY STARTER PACK SOPN .	74
PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y SUSP	79	phenytoin sodium extended 100 MG .	12	PLEGRIDY STARTER PACK SOSY SC	74
PFIZER-BIONTECH COVID-		phenytoin SUSP	12	PNEUMOVAX 23	78
				PNEUMOVAX 23/1 DOSE	78
				POCKET CHAMBER DEVI	56
				POCKET SPACER DEVI	56
				podofilox SOLN	42

POLYCOSE LIQD	68	pramipexole dihydrochloride TABS 26	PRESERVISION AREDS 2 CAPS .64
POLYCOSE POWD	68	prasugrel hcl	47
polyethylene glycol 3350 POWD ..	49	pravastatin sodium	20
polymyxin b-trimethoprim	70	prazosin hcl CAPS	21
polysaccharide iron complex CAPS 150 MG	48	PRED FORTE (prednisolone acetate (ophth))	70
polyvinyl alcohol 1.4 %	69	PRED MILD	70
POLY-VI-SOL SOLN OR	66	PRED-G SUSP	70
POLY-VI-SOL/IRON SOLN	66	prednisolone acetate (ophth)	70
POLY-VITA SOLN OR	66	PREDNISOLONE ACETATE P-F .70	70
POLY-VITA/IRON SOLN	66	PREDNISOLONE SODIUM PHOSPHATE	71
POLY-VITE PEDIATRIC SOLN OR 67		prednisolone sodium phosphate SOLN 20 MG/5ML	35
POLY-VITE/IRON SOLN	66	prednisolone sodium phosphate SOLN 5 MG/5ML, 6.7 MG/5ML, 15 MG/5ML	35
pot phosphate monobasic w/ sod phosphate dibasic & monobasic ..	60	prednisolone SOLN	35
potassium bicarbonate TBEF	60	prednisolone TABS	35
potassium chloride CPCR 10 MEQ 60		PREDNISON INTENSOL CONC .35	35
potassium chloride CPCR 8 MEQ .60		prednisone SOLN	35
potassium chloride microencapsulated crystals er	60	prednisone TABS	35
potassium chloride PACK OR 20 MEQ	60	prednisone TBPK	35
potassium chloride SOLN OR 10 %, 20 %	60	PREHEVBRIO	79
potassium chloride TBCR 8 MEQ, 10 MEQ	60	PREMARIN	80
potassium citrate (alkalinizer) TBCR 10 MEQ, 540 MG, 1080 MG	47	PREMARIN TABS	45
potassium iodide (expectorant) SOLN	37	PREMPRO	45
PRADAXA CAPS (dabigatran etexilate mesylate)	11	PRENATAL VITAMINS - MISC ...	67
		PREScription SUPPORT CAPS 63	
		PRESERVISION AREDS 2 + MULTI VITAMIN CAPS	64
			PRESERVISION AREDS CAPS ... 64
			PRESERVISION/LUTEIN CAPS .. 64
			PREVACID CPDR 30 MG (lansoprazole)
			PREVIDENT 5000 BOOSTER PLUS PSTE DT (sodium fluoride (dental)) 61
			PREVIDENT 5000 DRY MOUTH GEL (sodium fluoride (dental))
			61
			PREVIDENT 5000 KIDS PSTE DT (sodium fluoride (dental))
			61
			PREVIDENT 5000 ORTHO DEFENSE PSTE DT (sodium fluoride (dental))
			61
			PREVIDENT 5000 PLUS CREA (sodium fluoride (dental))
			61
			PREVIDENT FLUORIDE GEL (sodium fluoride (dental))
			61
			PREVNAR 13
			78
			PREVNAR 20
			78
			PREZCOBIX
			29
			PREZISTA SUSP
			29
			PREZISTA TABS 150 MG
			29
			PREZISTA TABS 600 MG (darunavir)
			29
			PREZISTA TABS 75 MG
			29
			PREZISTA TABS 800 MG (darunavir)
			29
			PRILOSEC OTC TBEC (omeprazole magnesium)
			77
			PRIMAQUINE PHOSPHATE TABS (primaquine phosphate)
			24
			primaquine phosphate TABS
			24

primidone	12	promethazine w/codeine SYRP ...	36	pseudoephedrine hcl TABS	68
PRIORIX SUSR	79	promethazine-dm SYRP	36	pseudoephedrine hcl TB12	68
PRISTIQ 100 MG (desvenlafaxine succinate)	15	promethazine-phenylephrine-codeine	37	pseudoephedrine w/ dm-gg LIQD 100 MG/5ML-30 MG/5ML-10 MG/5ML	37
PRISTIQ 25 MG, 50 MG (desvenlafaxine succinate)	15	PROMETRIUM CAPS (progesterone)	73	pseudoephedrine-guaifenesin SYRP 100 MG/5ML-30 MG/5ML	37
PRO COMFORT INHALER SPACER CHAMBER ADULT MISC	56	PRONEB ULTRA FILTER SET MISC	57	pseudoephedrine-guaifenesin TB12 1200 MG-120 MG	37
PRO COMFORT INHALER SPACER CHAMBER CHILD MISC	56	propafenone hcl CP12	8	pseudoephedrine-guaifenesin TB12 600 MG-60 MG	37
PRO COMFORT INHALER SPACER CHAMBER INFANT DEVI	56	propafenone hcl TABS	8	pseudoephedrine-ibuprofen TABS	37
probenecid	47	propranolol hcl CP24	32	psyllium CAPS 0.52 GM	49
PROCARDIA XL TB24 30 MG, 90 MG (nifedipine)	32	propranolol hcl SOLN OR 20 MG/5ML, 40 MG/5ML	32	psyllium POWD 28.3 %, 30 %, 30.9 %, 33 %, 58.6 %, 100 %	49
PROCARDIA XL TB24 60 MG (nifedipine)	32	propranolol hcl TABS	32	PULMICORT SUSP 0.25 MG/2ML, 0.5 MG/2ML (budesonide (inhalation))	9
PROCARE SPACER CHAMBER W/ADULT MASK DEVI	56	propylthiouracil	76	PULMICORT SUSP 1 MG/2ML (budesonide (inhalation))	9
PROCARE SPACER CHAMBER W/CHILD MASK DEVI	57	PROQUAD SUSR	79	PURE COMFORT 3-BALL BREATH EXERCISER DEVI	57
PROCHAMBER VALVED HOLDINGCHAMBER DEVI	57	PRORENAL+D/OMEGA-3 CAPS ..	64	PURE COMFORT INHALER SPACER CHAMBER ADULT DEVI ..	57
prochlorperazine	28	PROSCAR (finasteride)	47		
prochlorperazine maleate TABS ..	28	PROTECT CARDIO AF CAPS	64		
progesterone CAPS	73	PROTECT PLUS SO CAPS	64		
PROGRAF CAPS (tacrolimus)	61	PROTEGRA CAPS	64		
promethazine & phenylephrine SYRP	36	PROTONIX TBEC 20 MG (pantoprazole sodium)	77	PURIXAN SUSP	25
promethazine hcl SOLN OR 6.25 MG/5ML	20	PROTONIX TBEC 40 MG (pantoprazole sodium)	77	PX DAYTIME MULTI-SYMPTOM CAPS	37
promethazine hcl SUPP	20	PROVERA (medroxyprogesterone acetate)	73	PX NITETIME MULTI-SYMPTOM CAPS	37
promethazine hcl TABS	20	PROZAC CAPS 10 MG, 20 MG (fluoxetine hcl)	14	pyrantel pamoate SUSP 144 MG/ML ..	7
promethazine w/codeine SOLN ...	36	PROZAC CAPS 40 MG (fluoxetine hcl)	14	pyrazinamide	24
		pseudoephed-bromphen-dm SYRP 10 MG/5ML-30 MG/5ML-2 MG/5ML ..	37	pyrethrins-piperonyl butoxide LIQD ..	43
				pyrethrins-piperonyl butoxide SHAM ..	

4 %-0.3 %-0.33 %, 4 %-0.33 %	43	quinidine sulfate TABS	8	MG	2
pyrethrins-piperonyl butoxide- permethrin-nit remover 4 %-0.33 %- 0.5 %	43	QUINTABS TABS	65	RELEXXII TBCR 36 MG	2
PYRIDIDIUM TABS (phenazopyridine hcl)	47	QVAR REDIHALER 40 MCG/ACT	9	RELION KETONE TEST STRIPS STRP	43
pyridostigmine bromide TABS 60 MG	24	QVAR REDIHALER 80 MCG/ACT	9	RELPAK (eletriptan hydrobromide) 58	
pyridostigmine bromide TBCR	24	RA ARTHRITIS PAIN RELIEF CREA 42		REMEDIENT CAPS	64
pyridoxine hcl TABS 25 MG, 50 MG, 100 MG	81	RA DRY MOUTH SOLN	62	REMERON SOLTAB TBDP 15 MG (mirtazapine)	13
QC CALCIUM 500MG/D3 TABS	59	RA EAR CARE TABS	67	REMERON SOLTAB TBDP 30 MG (mirtazapine)	13
QC OCUHEALTH VISION SUPPORT 2 CAPS	64	RABAVERT	79	REMERON SOLTAB TBDP 45 MG (mirtazapine)	13
QUADRACEL SUSP	76	RAGWITEK SUBL	2	REMERON TABS 15 MG (mirtazapine)	13
QUADRACEL SUSY	76	raloxifene hcl	45	REMERON TABS 30 MG (mirtazapine)	13
QUAKE DEVI	57	ramipril CAPS	21	RENFLEXIS	46
QUESTRAN LIGHT POWD (cholestyramine light)	20	RAPAMUNE SOLN (sirolimus)	61	REPLACEMENT AIR FILTER MISC	57
QUESTRAN PACK (cholestyramine) 20		RAPAMUNE TABS (sirolimus)	61	REPLACEMENT FILTERS MISC	57
QUESTRAN POWD (cholestyramine)	20	RASUVO SOAJ 7.5 MG/0.15ML, 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML	2	RESTORIL 15 MG, 30 MG (temazepam)	49
quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG	27	RAZADYNE ER CP24 (galantamine hydrobromide)	73	RETACRIT	48
quetiapine fumarate TABS 300 MG, 400 MG	27	REBIF REBIDOSE SOAJ	74	RETIN-A CREA (tretinoin)	38
quinapril hcl	21	REBIF REBIDOSE TITRATIONPACK SOAJ	74	RETIN-A GEL 0.025 % (tretinoin)	38
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riboflavin TABS	81	rizatriptan benzoate TBDP	58	SARNA LOTN (camphor & menthol) .	39
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risperidone SOLN	27	RUKOBIA	30	selenium sulfide LOTN 2.5 %	40
risperidone TABS	27	RUXIENCE	25	selenium sulfide SHAM 1 %	40
risperidone TBDP	27	RYTHMOL SR CP12 (propafenone hcl)	8	SELSUN BLUE CARE MENS MAXIMUM STRENGTH LOTN (selenium sulfide)	40
RITALIN TABS 10 MG, 20 MG (methylphenidate hcl)	2	SALAGEN 5 MG (pilocarpine hcl (oral))	62	SELSUN BLUE DAILY LOTN (selenium sulfide)	40
RITALIN TABS 5 MG (methylphenidate hcl)	2	salicylic acid GEL 6 %	42	SELSUN BLUE LOTN (selenium sulfide)	40
		saline SOLN	68	SELSUN BLUE MEDICATED LOTN (selenium sulfide)	40
		salsalate	5		

SELSUN BLUE MOISTURIZING LOTN (selenium sulfide)	40	FACEMASK/TUCKER THE TURTLE MISC	57	SINGULAIR TABS (montelukast sodium)	9
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SELZENTRY TABS 150 MG (maraviroc)	30	SILICONE MASK FOR BREATHERITE CHAMBER/ADULT MISC	57	sirolimus TABS	61
SELZENTRY TABS 300 MG (maraviroc)	30	SILICONE MASK FOR BREATHERITE CHAMBER/INFANT MISC	57	SIVEXTRO TABS	24
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SIDESTREAM ADULT FACE MASK MISC	57	SINGULAIR CHEW (montelukast sodium)	9	sodium fluoride (dental) PSTE DT .	61
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ZOMIG TABS 2.5 MG, 5 MG (zolmitriptan)	59
ZONEGRAN CAPS 25 MG, 100 MG (zonisamide)	12
zonisamide CAPS	12
ZOO FRIENDS MULTI GUMMIES CHEW	66
ZOVIRAX CREA (acyclovir topical)	40
ZOVIRAX OINT (acyclovir topical)	40
ZOVIRAX SUSP (acyclovir)	31
ZYLOPRIM (allopurinol)	47
ZYPREXA TABS 15 MG, 20 MG (olanzapine)	27
ZYPREXA TABS 2.5 MG, 5 MG (olanzapine)	27
ZYPREXA TABS 7.5 MG, 10 MG (olanzapine)	27
ZYRTEC CHEW 10 MG (cetirizine hcl)	20
ZYRTEC CHILDRENS ALLERGY CHEW 10 MG (cetirizine hcl)	20
ZYTIGA (abiraterone acetate)	25