

Arizona

Essential Rx Drug List

The Essential Rx Drug List includes a list of drugs covered by Health Net. This drug list is for **Arizona**. The drug list is updated often and may change. To get the most up-to-date information, you may view the latest drug list on our website at www.healthnet.com or call us at the toll-free telephone number on your Health Net ID card.



Health Net®
PHARMACEUTICAL SERVICES

Welcome to Health Net

What is the Essential Rx Drug List?

The Essential Rx Drug List or formulary is a list of covered drugs used to treat common diseases or health problems. The drug list is selected by a committee of doctors and pharmacists who meet regularly to decide which drugs should be included. The committee reviews new drugs and new information about existing drugs and chooses drugs based on:

- Safety;
- Effectiveness;
- Side effects; and
- Value (If two drugs are equally effective, the less costly drug will be preferred)

How much will I pay for my drugs?

To figure out how much you will pay for a drug, the abbreviations in the table below appear in the Drug Tier column on the formulary. The copayment or coinsurance levels are defined in the table below. If you do not know your copayment or coinsurance for each tier, please refer to your Summary of Benefits or other plan documents.

<i>Abbreviation</i>	<i>Copayment/Coinsurance</i>	<i>Description</i>
1	Tier 1 copayment or coinsurance	Generic drugs
2	Tier 2 copayment or coinsurance	Preferred brand drugs
3	Tier 3 copayment or coinsurance	Non-preferred brand drugs, covered drugs not on the drug list and covered brand drugs that are approved for medical necessity by Health Net.
SP	Specialty copayment or coinsurance	Specialty drugs and covered injectable drugs. You may be required to obtain some drugs from a Specialty Pharmacy. Prior authorization may be required.
GP	You may pay your Tier 1 copayment or coinsurance for generic drugs	Brand drugs with an available generic version. You may be responsible for your copayment plus the difference in cost between the brand and generic drugs if you or your doctor requests the brand drug. Prior Authorization may be required for some drugs.
PV	\$0	Preventive benefit drugs. These drugs must be covered at no cost to members under the Affordable Care Act. A deductible does not apply. To get a brand drug that has a generic available, you pay the difference in cost between the brand and generic drugs.

How do I use the drug list?

Look for your drug in the index at the end of this booklet. The index lists all of the drugs on the drug list. Both brand name drugs and generic drugs are listed in the index. Next to your drug, you will see the page number where you can find your drug.

What if my drug is not on the drug list?

If your drug is not on the drug list, call us at the telephone number on your Health Net ID card and ask if your drug is covered. If your drug is not covered, you can ask your doctor to prescribe a similar drug that is covered. If your doctor feels you need to have the drug that is not covered, your doctor can ask us to make an exception.

What are generic drugs?

A generic drug contains the same active ingredient and works the same way as the brand name drug. Generic drugs are safe and effective, and generally cost less.

Generic drugs are available on the drug list at Tier 1. If you request a brand name drug that has an available generic version, you may pay a higher cost share.

Are there any limits on my drug coverage?

Some drugs have limits on coverage. The table below provides a description of abbreviations that may appear in the Limits column on the drug list:

<i>Abbreviation</i>	<i>Definition</i>	<i>Description</i>
AL	Age Limit	These drugs may require prior authorization if your age does not fall within manufacturer, FDA, or clinical recommendations.
PA	Prior Authorization	These drugs require prior authorization for coverage, effectiveness, or safety reasons. This means that your doctor must request approval from Health Net before the drug will be covered.
QL	Quantity Limit	These drugs have a limit on the amount that will be covered. Your doctor must request approval for a higher quantity of the drug from Health Net.
RX/OTC	Prescription & Over-the-Counter (OTC)	Certain drugs are available both in a prescription form and in an OTC form. Only prescription drugs are covered by your plan with the exception of some insulins, insulin supplies and some covered preventive drugs.
ST	Step Therapy	You must first try another specific drug(s) before these drugs will be covered.

How can I get an exception to the rules for drug coverage?

Your doctor can ask for an exception to our rules for drug coverage.

- Your doctor can ask us to cover your drug even if it is not on the drug list. If we approve an exception request for a drug not on the drug list, the non-preferred brand tier (Tier 3) or Specialty copayment/coinsurance will apply.
- Your doctor can ask us to make an exception for limits on your drug. For example, if your drug has a quantity limit of 1 tablet per day, your doctor can ask us to cover more.

To request an exception, your doctor can fax a prior authorization form along with a written statement supporting the request to us at 1-800-977-4170.

Can I go to any pharmacy?

To get the best benefit, you should use pharmacies that are in the network. These pharmacies have a contract with Health Net. Most chain pharmacies and many independent pharmacies are in the network. To find a pharmacy near you, visit our website at www.healthnet.com or call us at the telephone number on your Health Net ID card.

If you fill your prescription at an out-of-network pharmacy, the pharmacy may not be able to bill Health Net online so you may have to pay the full cost of your drug. Unless it is an emergency, your out-of-network prescription drug may not be covered.

Some injectable and high cost drugs may be considered “specialty drugs”. Unless otherwise noted, these drugs must be obtained from one of Health Net’s Specialty Pharmacies.

Can I use a mail order pharmacy?

You can use the CVS Caremark Mail Order Pharmacy for the home delivery of most maintenance drugs. Maintenance drugs are those that you take daily and are needed for a long term condition. To use the mail order pharmacy, your doctor must provide new prescriptions that allow up to a 90-day supply of each drug. Mail order forms are available on our website at www.healthnet.com or you may call us at the telephone number on your Health Net ID card to request a form.

How can I save money on my prescription drugs?

You can save time and money with these simple steps:

- Ask your doctor about generic drugs that may work for you.
- Fill prescriptions at Health Net participating pharmacies.
- Be sure your doctor prescribes drugs on the drug list

Drug Name	Drug Tier	Requirements/Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders		
Amphetamines		
ADDERALL TABS (Use Amphetamine-Dextroamphetamine)	GP	
ADDERALL XR CP24 (Use Amphetamine-Dextroamphetamine)	GP	QL(1 ea daily)
ADZENYS XR-ODT TBED	3	PA
amphetamine-dextroamphetamine cp24 1.25mg-1.25mg-1.25mg-1.25mg, 2.5mg-2.5mg-2.5mg-2.5mg, 3.75mg-3.75mg-3.75mg-3.75mg, 5mg-5mg-5mg-5mg, 6.25mg-6.25mg-6.25mg-6.25mg, 7.5mg-7.5mg-7.5mg-7.5mg	1	QL(1 ea daily)
amphetamine-dextroamphetamine tabs 1.25mg-1.25mg-1.25mg-1.25mg, 1.875mg-1.875mg-1.875mg-1.875mg, 2.5mg-2.5mg-2.5mg-2.5mg, 3.125mg-3.125mg-3.125mg-3.125mg, 3.75mg-3.75mg-3.75mg-3.75mg, 5mg-5mg-5mg-5mg, 7.5mg-7.5mg-7.5mg-7.5mg	1	
DESOXYN TABS (Use Methamphetamine HCl)	GP	PA
DEXEDRINE CP24 (Use Dextroamphetamine Sulfate)	GP	
dextroamphetamine sulfate cp24	1	
dextroamphetamine sulfate soln	1	
dextroamphetamine sulfate tabs	1	
DYANAVEL XR SUER	3	PA; QL(8 ml daily)

Drug Name	Drug Tier	Requirements/Limits
methamphetamine hcl tabs	1	PA
PROCENTRA SOLN (Use Dextroamphetamine Sulfate)	GP	
VYVANSE CAPS	2	QL(1 ea daily)
Analeptics		
caffeine citrate soln	1	
Attention-Deficit/Hyperactivity Disorder (ADHD)		
clonidine hcl (adhd) tb12	1	QL(4 ea daily)
guanfacine hcl (adhd) tb24	1	QL(1 ea daily)
INTUNIV TB24 (Use Guanfacine HCl (ADHD))	GP	QL(1 ea daily)
KAPVAY TB12 (Use Clonidine HCl (ADHD))	GP	QL(4 ea daily)
STRATTERA CAPS 10 MG, 18 MG, 25 MG, 40 MG	3	QL(2 ea daily)
STRATTERA CAPS 100 MG, 60 MG, 80 MG	3	QL(1 ea daily)
Stimulants - Misc.		
armodafinil tabs 150 mg, 250 mg, 50 mg	1	PA
ARMODAFINIL TABS 200 MG	3	PA
CONCERTA TBCR 27 MG	3	
CONCERTA TBCR 36 MG, 54 MG	2	
DAYTRANA PTCH	3	QL(1 ea daily)
dexmethylphenidate hcl cp24 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 5 mg	1	QL(1 ea daily)
dexmethylphenidate hcl tabs 10 mg, 2.5 mg, 5 mg	1	
FOCALIN TABS (Use Dexmethylphenidate HCl)	GP	
FOCALIN XR CP24 10 MG, 15 MG, 20 MG, 30 MG, 40 MG, 5 MG (Use Dexmethylphenidate HCl)	GP	QL(1 ea daily)

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

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Drug Name	Drug Tier	Requirements/Limits
FOCALIN XR CP24 25 MG, 35 MG	3	
METADATE CD CPCR 10 MG, 40 MG, 50 MG, 60 MG (Use Methylphenidate HCl)	GP	
METADATE CD CPCR 20 MG, 30 MG (Use Methylphenidate HCl)	GP	QL(2 ea daily)
METHYLIN CHEW (Use Methylphenidate HCl)	GP	
METHYLIN SOLN (Use Methylphenidate HCl)	GP	
<i>methylphenidate hcl chew 10 mg, 2.5 mg, 5 mg</i>	1	
<i>methylphenidate hcl cp24 20 mg, 30 mg, 40 mg</i>	1	QL(1 ea daily)
<i>methylphenidate hcl cpcr 10 mg, 40 mg, 50 mg, 60 mg</i>	1	
<i>methylphenidate hcl cpcr 20 mg, 30 mg</i>	1	QL(2 ea daily)
<i>methylphenidate hcl soln 10 mg/5ml, 5 mg/5ml</i>	1	
<i>methylphenidate hcl tabs 10 mg, 20 mg, 5 mg</i>	1	
<i>methylphenidate hcl tb24 18 mg, 27 mg, 36 mg, 54 mg</i>	1	
<i>methylphenidate hcl tbc 10 mg</i>	1	QL(1 ea daily)
<i>methylphenidate hcl tbc 18 mg, 20 mg, 27 mg, 36 mg, 54 mg</i>	1	
<i>modafinil tabs</i>	1	ST; QL(1 ea daily)
NUVIGIL TABS 150 MG, 250 MG, 50 MG (Use Armodafinil)	GP	PA
NUVIGIL TABS 200 MG	3	PA
PROVIGIL TABS (Use Modafinil)	GP	ST; QL(1 ea daily)
QUILLIVANT XR SUSR	3	PA; QL(12 ml daily)
RITALIN LA CP24 10 MG, 60 MG	3	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
RITALIN LA CP24 20 MG, 30 MG, 40 MG (Use Methylphenidate HCl)	GP	QL(1 ea daily)
RITALIN SR TBCR (Use Methylphenidate HCl)	GP	
RITALIN TABS (Use Methylphenidate HCl)	GP	
AMEBICIDES - Drugs to Treat Amoebzoa Infections		
Amebicides		
YODOXIN TABS	2	
AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections		
Aminoglycosides		
<i>amikacin sulfate soln</i>	SP	PA
BETHKIS NEBU	SP	
<i>gentamicin in saline soln</i>	SP	PA
<i>gentamicin sulfate soln ij 40 mg/ml</i>	SP	PA
<i>gentamicin sulfate soln iv 10 mg/ml</i>	SP	PA
GENTAMICIN SULFATE/0.9% SODIUM CHLORIDE SOLN 0.9%-0.9MG/ML, 0.9%-1.4MG/ML	SP	PA
KITABIS PAK NEBU	SP	
<i>neomycin sulfate tabs</i>	1	
<i>paromomycin sulfate caps</i>	1	
STREPTOMYCIN SULFATE SOLR	SP	PA
TOBI NEBU (Use Tobramycin)	SP	
TOBI PODHALER CAPS	SP	PA
<i>tobramycin nebu</i>	SP	
TOBRAMYCIN SULFATE SOLN 10 MG/ML	SP	PA

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Drug Name	Drug Tier	Requirements/Limits
<i>tobramycin sulfate soln 10 mg/ml, 40 mg/ml, 80 mg/2ml</i>	SP	PA
ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions		
Anti-TNF-alpha - Monoclonal Antibodies		
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT	SP	PA
HUMIRA PEN PNKT	SP	PA
HUMIRA PEN-CROHNS DISEASESTARTER PNKT	SP	PA
HUMIRA PEN-PSORIASIS STARTER PNKT	SP	PA
HUMIRA PSKT	SP	PA
SIMPONI SOAJ	SP	PA
SIMPONI SOSY	SP	PA
Antirheumatic - Enzyme Inhibitors		
XELJANZ TABS	SP	PA
XELJANZ XR TB24	SP	PA
Antirheumatic Antimetabolites		
OTREXUP SOAJ	SP	PA
RASUVO SOAJ	SP	PA
RHEUMATREX TABS	2	
Gold Compounds		
RIDAURA CAPS	2	
Interleukin-1 Blockers		
ARCALYST SOLR	SP	PA
Interleukin-1 Receptor Antagonist (IL-1Ra)		
KINERET SOSY	SP	PA
Interleukin-1beta Blockers		
ILARIS SOLR	SP	PA

Drug Name	Drug Tier	Requirements/Limits
Interleukin-6 Receptor Inhibitors		
ACTEMRA SOLN	SP	PA
ACTEMRA SOSY	SP	PA
Nonsteroidal Anti-inflammatory Agents (NSAIDs)		
ANAPROX DS TABS (<i>Use Naproxen Sodium</i>)	GP	
ARTHROTEC 50 TBEC (<i>Use Diclofenac w/ Misoprostol</i>)	GP	
ARTHROTEC 75 TBEC (<i>Use Diclofenac w/ Misoprostol</i>)	GP	
CATAFLAM TABS (<i>Use Diclofenac Potassium</i>)	GP	
CELEBREX CAPS (<i>Use Celecoxib</i>)	GP	AL
<i>celecoxib caps</i>	1	AL
DAYPRO TABS (<i>Use Oxaprozin</i>)	GP	
<i>diclofenac potassium tabs</i>	1	
<i>diclofenac sodium tb24</i>	1	
<i>diclofenac sodium tbec</i>	1	
<i>diclofenac w/ misoprostol tbec</i>	1	
DUEXIS TABS	3	PA
EC-NAPROSYN TBEC (<i>Use Naproxen</i>)	GP	
<i>etodolac caps 200 mg, 300 mg</i>	1	
<i>etodolac tabs 400 mg, 500 mg</i>	1	
<i>etodolac tb24 400 mg, 500 mg, 600 mg</i>	1	QL(2 ea daily)
FELDENE CAPS (<i>Use Piroxicam</i>)	GP	
FENOPROFEN CALCIUM CAPS 200 MG	2	
FENOPROFEN CALCIUM CAPS 400 MG	3	

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Drug Name	Drug Tier	Requirements/Limits
<i>fenoprofen calcium tabs 600 mg</i>	1	
FENORTHO CAPS 200 MG	2	
FENORTHO CAPS 400 MG	3	
<i>flurbiprofen tabs</i>	1	
<i>ibuprofen tabs 400 mg, 600 mg, 800 mg</i>	1	
INDOCIN SUPP RE 50 MG	3	
INDOCIN SUSP OR 25 MG/5ML	2	
<i>indomethacin caps or 25 mg, 50 mg</i>	1	
<i>indomethacin cpcr or 75 mg</i>	1	
<i>ketoprofen caps</i>	1	
<i>ketoprofen cp24</i>	1	
<i>ketorolac tromethamine tabs or 10 mg</i>	1	Limit 20 per month;QL(0.67 ea daily)
<i>meclofenamate sodium caps</i>	1	
<i>mefenamic acid caps</i>	1	
<i>meloxicam susp 7.5 mg/5ml</i>	1	
<i>meloxicam tabs 15 mg</i>	1	QL(1 ea daily)
<i>meloxicam tabs 7.5 mg</i>	1	QL(2 ea daily)
MOBIC SUSP 7.5 MG/5ML (Use Meloxicam)	GP	
MOBIC TABS 15 MG (Use Meloxicam)	GP	QL(1 ea daily)
MOBIC TABS 7.5 MG (Use Meloxicam)	GP	QL(2 ea daily)
<i>nabumetone tabs 500 mg</i>	1	QL(4 ea daily)
<i>nabumetone tabs 750 mg</i>	1	QL(3 ea daily)
NALFON CAPS	3	

Drug Name	Drug Tier	Requirements/Limits
NAPRELAN TB24 375 MG, 500 MG (Use Naproxen Sodium)	GP	
NAPRELAN TB24 750 MG	3	
NAPROSYN SUSP (Use Naproxen)	GP	
NAPROSYN TABS (Use Naproxen)	GP	
<i>naproxen sodium tabs</i>	1	
<i>naproxen sodium tb24</i>	1	
NAPROXEN SUSP 125 MG/5ML	2	
<i>naproxen susp 125 mg/5ml</i>	1	
<i>naproxen tabs 250 mg, 375 mg, 500 mg</i>	1	
<i>naproxen tbec 375 mg, 500 mg</i>	1	
<i>oxaprozin tabs</i>	1	
<i>piroxicam caps</i>	1	
PONSTEL CAPS (Use Mefenamic Acid)	GP	
SPRIX SOLN	3	QL(1 ea daily,5 day(s) limit)
<i>sulindac tabs</i>	1	
TIVORBEX CAPS	3	ST; QL(3 ea daily)
<i>tolmetin sodium caps</i>	1	
<i>tolmetin sodium tabs</i>	1	
VIMOVO TBEC	3	PA
VIVLODEX CAPS	3	PA
VOLTAREN-XR TB24 (Use Diclofenac Sodium)	GP	
ZIPSOR CAPS	3	ST; QL(4 ea daily,7 day(s) limit)
ZORVOLEX CAPS	3	ST; QL(3 ea daily)

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Drug Name	Drug Tier	Requirements/Limits
Phosphodiesterase 4 (PDE4) Inhibitors		
OTEZLA TABS	SP	PA
OTEZLA TBPk	SP	PA
Pyrimidine Synthesis Inhibitors		
ARAVA TABS 10 MG (Use Leflunomide)	GP	QL(2 ea daily)
ARAVA TABS 20 MG (Use Leflunomide)	GP	QL(1 ea daily)
<i>leflunomide tabs 10 mg</i>	1	QL(2 ea daily)
<i>leflunomide tabs 20 mg</i>	1	QL(1 ea daily)
Selective Costimulation Modulators		
ORENCIA CLICKJECT SOAJ	SP	PA
ORENCIA SOLR	SP	PA
ORENCIA SOSY	SP	PA
Soluble Tumor Necrosis Factor Receptor Agents		
ENBREL SOLR	SP	PA
ENBREL SOSY	SP	PA
ENBREL SURECLICK SOAJ	SP	PA
ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions		
Analgesic Combinations		
<i>acetaminophen-salicylamide-phenyltoloxamine caps</i>	1	
BUPAP TABS	3	
<i>butalbital-acetaminophen tabs</i>	1	
<i>butalbital-acetaminophen-caffeine caps</i>	1	
<i>butalbital-acetaminophen-caffeine soln</i>	1	
<i>butalbital-acetaminophen-caffeine tabs</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>butalbital-aspirin-caffeine caps</i>	1	
ESGIC TABS (Use Butalbital-Acetaminophen-Caffeine)	GP	
FIORICET CAPS	3	
FIORINAL CAPS (Use Butalbital-Aspirin-Caffeine)	GP	
LEVACET TABS	3	
TENCON TABS	3	
VANATOL LQ SOLN	3	
Salicylates		
ASCRIPITIN TABS	PV	PV
<i>aspirin chew</i>	PV	PV
ASPIRIN LOW DOSE TABS	PV	PV
<i>aspirin tabs</i>	PV	PV
<i>aspirin tbec</i>	PV	PV
<i>choline & mag salicylate liqd</i>	1	
CHOLINE MAGNESIUM TRISALICYLATE TABS	2	
<i>diflunisal tabs</i>	1	
DISALCID TABS (Use Salsalate)	GP	
ECOTRIN REGULAR STRENGTH TBEC (Use Aspirin)	GP	PV
<i>salsalate tabs</i>	1	
ST JOSEPH ADULT ANALGESICLOW DOSE BITE SIZE CHEW	PV	PV
ST JOSEPH ADULT CHEW	PV	PV
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions		
Opioid Agonists		

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Drug Name	Drug Tier	Requirements/Limits
ABSTRAL SUBL	3	PA
ACTIQ LPOP (Use Fentanyl Citrate)	GP	PA
AVINZA CP24 (Use Morphine Sulfate Beads)	GP	QL(1 ea daily)
CODEINE SULFATE SOLN 30 MG/5ML	3	
<i>codeine sulfate tabs 15 mg, 30 mg, 60 mg</i>	1	
CODEINE SULFATE TABS 30 MG (Use Codeine Sulfate)	GP	
CONZIP CP24	3	
DEMEROL TABS OR 100 MG, 50 MG (Use Meperidine HCl)	GP	
DILAUDID LIQD (Use Hydromorphone HCl)	GP	
DILAUDID TABS (Use Hydromorphone HCl)	GP	
DOLOPHINE TABS (Use Methadone HCl)	GP	QL(12 ea daily)
DURAGESIC PT72 (Use Fentanyl)	GP	Limit 15 per month;QL(0.5 ea daily)
EMBEDA CPCR	3	PA
EXALGO T24A 12 MG, 16 MG, 8 MG (Use Hydromorphone HCl)	GP	QL(4 ea daily)
EXALGO T24A 32 MG	3	QL(2 ea daily)
<i>fentanyl citrate lpop</i>	1	PA
<i>fentanyl pt72 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr</i>	1	Limit 15 per month;QL(0.5 ea daily)
FENTORA TABS	3	PA; QL(3 ea daily)
HYDROMORPHONE HCL ER T24A	3	QL(2 ea daily)
<i>hydromorphone hcl liqd 1 mg/ml</i>	1	
<i>hydromorphone hcl t24a 12 mg, 16 mg, 8 mg</i>	1	QL(4 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>hydromorphone hcl tabs 2 mg, 4 mg, 8 mg</i>	1	
IONSYS PTCH	3	PA
KADIAN CP24 10 MG, 100 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG (Use Morphine Sulfate)	GP	QL(1 ea daily)
LAZANDA SOLN	3	PA
<i>levorphanol tartrate tabs</i>	1	
<i>meperidine hcl soln or 50 mg/5ml</i>	1	
<i>meperidine hcl tabs or 100 mg, 50 mg</i>	1	
<i>methadone hcl conc or 10 mg/ml</i>	1	
<i>methadone hcl soln or 10 mg/5ml, 5 mg/5ml</i>	1	
<i>methadone hcl tabs or 10 mg, 5 mg</i>	1	QL(12 ea daily)
<i>methadone hcl tbso or 40 mg</i>	1	
METHADOSE CONC (Use Methadone HCl)	GP	
METHADOSE SUGAR-FREE CONC (Use Methadone HCl)	GP	
<i>morphine sulfate cp24 or 10 mg, 100 mg, 20 mg, 30 mg, 50 mg, 60 mg, 80 mg</i>	1	QL(1 ea daily)
MORPHINE SULFATE ER CP24	2	QL(1 ea daily)
<i>morphine sulfate soln ij 0.5 mg/ml, 1 mg/ml</i>	SP	PA
<i>morphine sulfate soln or 10 mg/5ml, 100 mg/5ml, 20 mg/5ml, 20 mg/ml</i>	1	
<i>morphine sulfate supp re 10 mg, 20 mg</i>	1	
MORPHINE SULFATE SUPP RE 30 MG, 5 MG	2	
<i>morphine sulfate tabs or 15 mg, 30 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate tbc</i> or 100 mg, 15 mg, 200 mg, 30 mg, 60 mg	1	
MS CONTIN TBCR (Use Morphine Sulfate)	GP	
NUCYNTA ER TB12	2	QL(2 ea daily)
NUCYNTA TABS	2	
OPANA ER (CRUSH RESISTANT) T12A	2	QL(2 ea daily)
OPANA TABS OR 10 MG, 5 MG (Use Oxymorphone HCl)	GP	
OXAYDO TABA	3	QL(4 ea daily)
<i>oxycodone hcl caps</i>	1	
<i>oxycodone hcl conc</i>	1	
OXYCODONE HCL ER T12A	3	QL(3 ea daily)
<i>oxycodone hcl soln</i>	1	
<i>oxycodone hcl tabs</i>	1	
OXYCONTIN T12A	3	QL(3 ea daily)
<i>oxymorphone hcl tabs 10 mg, 5 mg</i>	1	
<i>oxymorphone hcl tb12 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 5 mg, 7.5 mg</i>	1	QL(2 ea daily)
ROXICODONE TABS (Use Oxycodone HCl)	GP	
SUBSYS LIQD	3	PA
TRAMADOL HCL ER CP24 100 MG, 150 MG, 200 MG, 300 MG	3	
<i>tramadol hcl tabs 50 mg</i>	1	QL(8 ea daily)
<i>tramadol hcl tb24 100 mg, 200 mg, 300 mg</i>	1	
ULTRAM ER TB24 (Use Tramadol HCl)	GP	
ULTRAM TABS (Use Tramadol HCl)	GP	QL(8 ea daily)

Drug Name	Drug Tier	Requirements/Limits
Opioid Combinations		
<i>acetaminophen w/ codeine soln</i>	1	
<i>acetaminophen w/ codeine tabs</i>	1	
ASPIRIN-CAFFEINE-DIHYDROCODEINE CAPS	3	
<i>butalbital-acetaminophen-caffeine w/ codeine caps</i>	1	
<i>butalbital-aspirin-caffeine w/cod caps</i>	1	
CAPITAL/CODEINE SUSP	3	
FIORICET/CODEINE CAPS (Use Butalbital-Acetaminophen-Caffeine w/Codeine)	GP	
FIORINAL/CODEINE #3 CAPS (Use Butalbital-Aspirin-Caffeine w/Cod)	GP	
HYCET SOLN (Use Hydrocodone-Acetaminophen)	GP	
<i>hydrocodone-acetaminophen soln</i>	1	
<i>hydrocodone-acetaminophen tabs</i>	1	
<i>hydrocodone-ibuprofen tabs</i>	1	
HYDROCODONE/ACETAMINOPHEN SOLN	2	
LORTAB ELIX	3	
MEPERIDINE HCL/PROMETHAZINE HCL CAPS	3	
NORCO TABS (Use Hydrocodone-Acetaminophen)	GP	
<i>oxycodone w/ acetaminophen tabs</i>	1	
<i>oxycodone-aspirin tabs</i>	1	
OXYCODONE/ACETAMINOPHEN SOLN	2	
OXYCODONE/IBUPROFEN TABS	3	QL(4 ea daily)

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Drug Name	Drug Tier	Requirements/Limits
PERCOCET TABS (<i>Use Oxycodone w/ Acetaminophen</i>)	GP	
PERCODAN TABS (<i>Use Oxycodone-Aspirin</i>)	GP	
PRIMLEV TABS	3	
REPREXAIN TABS (<i>Use Hydrocodone-Ibuprofen</i>)	GP	
ROXICET SOLN (<i>Use Oxycodone w/ Acetaminophen</i>)	GP	
SYNALGOS-DC CAPS	3	
<i>tramadol-acetaminophen tabs</i>	1	
TYLENOL/CODEINE #3 TABS (<i>Use Acetaminophen w/ Codeine</i>)	GP	
TYLENOL/CODEINE #4 TABS (<i>Use Acetaminophen w/ Codeine</i>)	GP	
ULTRACET TABS (<i>Use Tramadol-Acetaminophen</i>)	GP	
VICOPROFEN TABS (<i>Use Hydrocodone-Ibuprofen</i>)	GP	
XODOL TABS (<i>Use Hydrocodone-Acetaminophen</i>)	GP	
ZAMICET SOLN (<i>Use Hydrocodone-Acetaminophen</i>)	GP	
Opioid Partial Agonists		
BELBUCA FILM	3	QL(2 ea daily)
BUNAVAIL FILM	3	PA
<i>buprenorphine hcl subl sl 2 mg, 8 mg</i>	1	PA
<i>buprenorphine hcl-naloxone hcl dihydrate subl</i>	1	PA
<i>butorphanol tartrate soln na 10 mg/ml</i>	1	Limit 7.5mls per month;QL(0.25 ml daily)

Drug Name	Drug Tier	Requirements/Limits
BUTRANS PTWK 10 MCG/HR, 20 MCG/HR, 5 MCG/HR, 7.5 MCG/HR	3	Limit 4 per month;QL(0.15 ea daily)
BUTRANS PTWK 15 MCG/HR	3	
<i>nalbuphine hcl soln</i>	SP	PA
<i>pentazocine w/ naloxone tabs</i>	1	
SUBOXONE FILM	3	PA
TALWIN SOLN	SP	PA
ZUBSOLV SUBL	3	PA
ANDROGENS-ANABOLIC - Drugs to Regulate Hormones		
Anabolic Steroids		
ANADROL-50 TABS	3	
OXANDRIN TABS (<i>Use Oxandrolone</i>)	GP	
<i>oxandrolone tabs</i>	1	
Androgens		
ANDRODERM PT24	3	QL(1 ea daily)
ANDROGEL GEL 20.25 MG/1.25GM, 40.5 MG/2.5GM, 50 MG/5GM	2	QL(10 gm daily)
ANDROGEL GEL 25 MG/2.5GM (<i>Use Testosterone</i>)	GP	QL(10 gm daily)
ANDROGEL PUMP GEL 1 % (<i>Use Testosterone</i>)	GP	QL(10 gm daily)
ANDROGEL PUMP GEL 1.62 %	2	QL(10 gm daily)
ANDROID CAPS (<i>Use Methyltestosterone</i>)	GP	
ANDROXY TABS	2	
AXIRON SOLN	3	ST; QL(6 ml daily); GL
<i>danazol caps</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
DEPO-TESTOSTERONE SOLN 100 MG/ML (<i>Use Testosterone Cypionate</i>)	SP	QL(1 copay(s) per fill retail, 10 ml per 30 days retail)
DEPO-TESTOSTERONE SOLN 200 MG/ML (<i>Use Testosterone Cypionate</i>)	SP	PA
FORTESTA GEL	3	ST; Limit 60gms per month;QL(3.5 gm daily)
METHITEST TABS	2	
<i>methyltestosterone caps</i>	1	
STRIANT MISC	3	QL(2 ea daily)
TESTONE CIK KIT	SP	PA
<i>testosterone cypionate soln 100 mg/ml</i>	SP	QL(1 copay(s) per fill retail, 10 ml per 30 days retail)
<i>testosterone cypionate soln 200 mg/ml</i>	SP	PA
<i>testosterone enanthate soln</i>	SP	PA
<i>testosterone gel td 1 %, 25 mg/2.5gm, 50 mg/5gm</i>	1	QL(10 gm daily)
TESTOSTERONE GEL TD 10 MG/ACT	3	ST; Limit 60gms per month;QL(3.5 gm daily)
TESTOSTERONE SOLN IM 250 MG/ML	SP	PA
TESTRED CAPS (<i>Use Methyltestosterone</i>)	GP	
ANORECTAL AGENTS - Rectal Drugs to Treat Pain, Swelling and Itching		
Intrarectal Steroids		
CORTENEMA ENEM (<i>Use Hydrocortisone (Intrarectal)</i>)	GP	
CORTIFOAM FOAM	2	
<i>hydrocortisone (intrarectal) enem</i>	1	

Drug Name	Drug Tier	Requirements/Limits
UCERIS FOAM	3	PA
Rectal Combinations		
ANALPRAM HC CREA (<i>Use Hydrocortisone Acetate w/ Pramoxine</i>)	GP	
ANALPRAM HC SINGLES CREA (<i>Use Hydrocortisone Acetate w/ Pramoxine</i>)	GP	
ANALPRAM-HC CREA 1%-1%, 1%-2.5% (<i>Use Hydrocortisone Acetate w/ Pramoxine</i>)	GP	
ANALPRAM-HC LOTN 1%-2.5%	3	
ANALPRAM-HC SINGLES CREA (<i>Use Hydrocortisone Acetate w/ Pramoxine</i>)	GP	
<i>hydrocortisone acetate w/ pramoxine crea</i>	1	
<i>lidocaine-hydrocortisone acetate (rectal) kit 3%-2.5%</i>	1	
PROCORT CREA	3	
PROCTOFOAM HC FOAM	2	
Rectal Steroids		
ANUSOL-HC CREA (<i>Use Hydrocortisone (Rectal)</i>)	GP	
<i>hydrocortisone (rectal) crea</i>	1	
<i>hydrocortisone acetate (rectal) supp</i>	1	
PROCTOCORT CREA (<i>Use Hydrocortisone (Rectal)</i>)	GP	
PROCTOCORT SUPP (<i>Use Hydrocortisone Acetate (Rectal)</i>)	GP	
Vasodilating Agents		
RECTIV OINT	3	
ANTHELMINTICS - Drugs to Treat Worm Infections		
Anthelmintics		

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Drug Name	Drug Tier	Requirements/ Limits
ALBENZA TABS	2	
BILTRICIDE TABS	2	
<i>ivermectin tabs</i>	1	
STROMEKTOL TABS (<i>Use Ivermectin</i>)	GP	
ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		
Anti-infective Agents - Misc.		
AZACTAM SOLR (<i>Use Aztreonam</i>)	SP	PA
AZACTAMIN ISO-OSMOTIC DEXTROSE SOLN	SP	PA
<i>aztreonam solr</i>	SP	PA
<i>bacitracin solr im 50000 unit</i>	SP	PA
CAYSTON SOLR	SP	PA
FIRST-VANCOMYCIN 25 SOLN	3	PA
FIRST-VANCOMYCIN 50 SOLN	3	PA
FLAGYL CAPS 375 MG (<i>Use Metronidazole</i>)	3	
FLAGYL ER TB24	3	
FLAGYL TABS 250 MG, 500 MG (<i>Use Metronidazole</i>)	GP	
IMPAVIDO CAPS	SP	
<i>metronidazole caps</i>	1	
<i>metronidazole in nacl soln</i>	SP	PA
<i>metronidazole tabs</i>	1	
NEBUPENT SOLR	2	
PRIMSOL SOLN	2	
TINDAMAX TABS (<i>Use Tinidazole</i>)	GP	

Drug Name	Drug Tier	Requirements/ Limits
<i>tinidazole tabs</i>	1	
<i>trimethoprim tabs</i>	1	
VANCOGIN HCL CAPS (<i>Use Vancomycin HCl</i>)	GP	PA
<i>vancomycin hcl caps or 125 mg, 250 mg</i>	1	PA
<i>vancomycin hcl solr iv 10 gm, 1000 mg, 500 mg, 5000 mg</i>	SP	PA
VANCOMYCIN HCL SOLR IV 750 MG	SP	PA
VIBATIV SOLR	SP	PA
XIFAXAN TABS	3	PA
Anti-infective Misc. - Combinations		
BACTRIM DS TABS (<i>Use Sulfamethoxazole-Trimethoprim</i>)	GP	
BACTRIM TABS (<i>Use Sulfamethoxazole-Trimethoprim</i>)	GP	
<i>sulfamethoxazole-trimethoprim susp</i>	1	
<i>sulfamethoxazole-trimethoprim tabs</i>	1	
Antiprotozoal Agents		
ALINIA SUSR	3	
ALINIA TABS	3	
<i>atovaquone susp</i>	1	
MEPRON SUSP (<i>Use Atovaquone</i>)	GP	
Carbapenems		
DORIBAX SOLR	SP	PA
INVANZ SOLR	SP	PA
<i>meropenem solr</i>	SP	PA
MERREM SOLR (<i>Use Meropenem</i>)	SP	PA

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Drug Name	Drug Tier	Requirements/ Limits
Chloramphenicols		
CHLORAMPHENICOL SODIUM SUCCINATE SOLR	SP	PA
Cyclic Lipopeptides		
CUBICIN RF SOLR (Use Daptomycin)	SP	PA
CUBICIN SOLR (Use Daptomycin)	SP	PA
daptomycin solr	SP	PA
Glycylcyclines		
TYGACIL SOLR	SP	PA
Ketolides		
KETEK TABS	3	
Leprostotics		
dapsone tabs	1	
Lincosamides		
CLEOCIN CAPS OR 150 MG, 300 MG, 75 MG (Use Clindamycin HCl)	GP	
CLEOCIN IN D5W SOLN (Use Clindamycin Phosphate in D5W)	SP	PA
CLEOCIN PEDIATRIC GRANULES SOLR (Use Clindamycin Palmitate Hydrochloride)	GP	
CLEOCIN PHOSPHATE SOLN IJ 300 MG/2ML, 600 MG/4ML, 9 GM/60ML, 900 MG/6ML (Use Clindamycin Phosphate)	SP	PA
CLEOCIN PHOSPHATE SOLN IV 300 MG/2ML (Use Clindamycin Phosphate)	SP	PA
CLEOCIN PHOSPHATE SOLN IV 300MG/50ML-5%, 600MG/50ML-5%, 900MG/50ML-5% (Use Clindamycin Phosphate in D5W)	SP	PA

Drug Name	Drug Tier	Requirements/ Limits
CLEOCIN PHOSPHATE SOLN IV 600 MG/4ML	SP	PA
clindamycin hcl caps	1	
clindamycin palmitate hydrochloride solr	1	
clindamycin phosphate in d5w soln	SP	PA
clindamycin phosphate soln ij 150 mg/ml, 300 mg/2ml, 600 mg/4ml, 900 mg/6ml, 9000 mg/60ml	SP	PA
CLINDAMYCIN PHOSPHATE SOLN IV 150 MG/ML	SP	PA
clindamycin phosphate soln iv 150 mg/ml	SP	PA
LINCOCIN SOLN (Use Lincomycin HCl)	SP	PA
lincomycin hcl soln	SP	PA
Oxazolidinones		
linezolid susr	1	
linezolid tabs	1	
SIVEXTRO TABS	2	QL(6 ea per 90 days retail)
ZYVOX SUSR (Use Linezolid)	GP	
ZYVOX TABS (Use Linezolid)	GP	
Polymyxins		
polymyxin b sulfate solr	SP	PA
ANTIANGINAL AGENTS - Drugs to Treat Chest Pain		
Antianginals-Other		
RANEXA TB12 1000 MG	3	
RANEXA TB12 500 MG	3	QL(4 ea daily)
Nitrates		
DILATRATE SR CPR	3	

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Drug Name	Drug Tier	Requirements/Limits
IMDUR TB24 (<i>Use Isosorbide Mononitrate</i>)	GP	
ISORDIL TITRADOSE TABS 40 MG	2	
ISORDIL TITRADOSE TABS 5 MG (<i>Use Isosorbide Dinitrate</i>)	GP	
ISOSORBIDE DINITRATE ER TBCR	2	
<i>isosorbide dinitrate tabs</i>	1	
<i>isosorbide mononitrate tabs</i>	1	
<i>isosorbide mononitrate tb24</i>	1	
NITRO-BID OINT	2	
NITRO-DUR PT24 0.1 MG/HR, 0.2 MG/HR, 0.4 MG/HR, 0.6 MG/HR (<i>Use Nitroglycerin</i>)	GP	QL(1 ea daily)
NITRO-DUR PT24 0.3 MG/HR, 0.8 MG/HR	2	QL(1 ea daily)
<i>nitroglycerin aers tl 400 mcg/spray</i>	1	
<i>nitroglycerin cpcr or 2.5 mg, 9 mg</i>	1	
<i>nitroglycerin pt24 td 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr</i>	1	QL(1 ea daily)
<i>nitroglycerin soln tl 0.4 mg/spray</i>	1	
<i>nitroglycerin subl sl 0.3 mg, 0.4 mg, 0.6 mg</i>	1	
NITROLINGUAL PUMPSPRAY SOLN (<i>Use Nitroglycerin</i>)	GP	
NITROMIST AERS	3	
NITROSTAT SUBL (<i>Use Nitroglycerin</i>)	GP	
ANTI-ANXIETY AGENTS - Drugs to Treat Anxiety		
Antianxiety Agents - Misc.		
<i>bupirone hcl tabs</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>hydroxyzine hcl soln</i>	1	
<i>hydroxyzine hcl syrp</i>	1	
<i>hydroxyzine hcl tabs</i>	1	
<i>hydroxyzine pamoate caps</i>	1	
<i>meprobamate tabs</i>	1	
VISTARIL CAPS (<i>Use Hydroxyzine Pamoate</i>)	GP	
Benzodiazepines		
ALPRAZOLAM INTENSOL CONC	3	
<i>alprazolam tabs</i>	1	
<i>alprazolam tb24</i>	1	
<i>alprazolam tbdp</i>	1	
ATIVAN TABS OR 0.5 MG, 1 MG, 2 MG (<i>Use Lorazepam</i>)	GP	
<i>chlordiazepoxide hcl caps</i>	1	
<i>clorazepate dipotassium tabs</i>	1	
<i>diazepam conc or 5 mg/ml</i>	1	
<i>diazepam soln or 1 mg/ml</i>	1	
<i>diazepam tabs or 10 mg, 2 mg, 5 mg</i>	1	
<i>lorazepam conc or 2 mg/ml</i>	1	
<i>lorazepam tabs or 0.5 mg, 1 mg, 2 mg</i>	1	
<i>oxazepam caps</i>	1	
TRANXENE T TABS (<i>Use Clorazepate Dipotassium</i>)	GP	
VALIUM TABS (<i>Use Diazepam</i>)	GP	
XANAX TABS (<i>Use Alprazolam</i>)	GP	
XANAX XR TB24 (<i>Use Alprazolam</i>)	GP	

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Drug Name	Drug Tier	Requirements/Limits
ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
Antiarrhythmics Type I-A		
<i>disopyramide phosphate caps</i>	1	
NORPACE CAPS (Use <i>Disopyramide Phosphate</i>)	GP	
NORPACE CR CP12	2	
<i>quinidine gluconate tbc or 324 mg</i>	1	
QUINIDINE SULFATE TABS 200 MG, 300 MG	2	
<i>quinidine sulfate tabs 300 mg</i>	1	
<i>quinidine sulfate tbc 300 mg</i>	1	
Antiarrhythmics Type I-B		
<i>mexiletine hcl caps</i>	1	
Antiarrhythmics Type I-C		
<i>flecainide acetate tabs</i>	1	
<i>propafenone hcl cp12 225 mg, 325 mg, 425 mg</i>	1	
<i>propafenone hcl tabs 150 mg</i>	1	QL(6 ea daily)
<i>propafenone hcl tabs 225 mg, 300 mg</i>	1	QL(3 ea daily)
RYTHMOL SR CP12 (Use <i>Propafenone HCl</i>)	GP	
RYTHMOL TABS 150 MG (Use <i>Propafenone HCl</i>)	GP	QL(6 ea daily)
RYTHMOL TABS 225 MG (Use <i>Propafenone HCl</i>)	GP	QL(3 ea daily)
Antiarrhythmics Type III		
<i>amiodarone hcl tabs</i>	1	
CORDARONE TABS (Use <i>Amiodarone HCl</i>)	GP	
<i>dofetilide caps</i>	1	
MULTAQ TABS	2	

Drug Name	Drug Tier	Requirements/Limits
TIKOSYN CAPS (Use <i>Dofetilide</i>)	GP	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions		
Anti-Inflammatory Agents		
CROMOLYN SODIUM NEBU	2	
Antiasthmatic - Monoclonal Antibodies		
NUCALA SOLR	SP	PA
XOLAIR SOLR	SP	PA
Bronchodilators - Anticholinergics		
ATROVENT HFA AERS	2	Limit 2 inhalers per month;QL(0.86 gm daily)
INCRUSE ELLIPTA AEPB	2	QL(1 ea daily)
<i>ipratropium bromide soln</i>	1	
SPIRIVA HANDIHALER CAPS	2	QL(1 ea daily)
SPIRIVA RESPIMAT AERS	2	Limit 1 inhaler per month;QL(0.14 gm daily)
TUDORZA PRESSAIR AEPB	2	Limit 1 inhaler per month;QL(0.04 ea daily)
Leukotriene Modulators		
ACCOLATE TABS (Use <i>Zafirlukast</i>)	GP	
<i>montelukast sodium chew</i>	1	QL(1 ea daily)
<i>montelukast sodium pack</i>	1	QL(1 ea daily)
<i>montelukast sodium tabs</i>	1	QL(1 ea daily)
SINGULAIR CHEW (Use <i>Montelukast Sodium</i>)	GP	QL(1 ea daily)
SINGULAIR PACK (Use <i>Montelukast Sodium</i>)	GP	QL(1 ea daily)
SINGULAIR TABS (Use <i>Montelukast Sodium</i>)	GP	QL(1 ea daily)

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Drug Name	Drug Tier	Requirements/Limits
<i>zafirlukast tabs</i>	1	
ZYFLO CR TB12	3	ST
ZYFLO TABS	3	ST
Selective Phosphodiesterase 4 (PDE4) Inhibitors		
DALIRESP TABS	3	QL(1 ea daily)
Steroid Inhalants		
AEROSPAN AERS	2	Limit 2 inhalers per month;QL(0.6 gm daily)
ALVESCO AERS	3	Limit 2 inhalers per month;QL(0.41 gm daily)
ARNUIITY ELLIPTA AEPB	2	QL(1 ea daily)
ASMANEX HFA AERO	2	Limit 1 inhaler per month;QL(0.44 gm daily)
ASMANEX TWISTHALER 120 METERED DOSES AEPB	2	Limit 1 inhaler per month;QL(0.04 ea daily)
ASMANEX TWISTHALER 14 METERED DOSES AEPB	2	Limit 1 inhaler per month;QL(0.04 ea daily)
ASMANEX TWISTHALER 30 METERED DOSES AEPB	2	Limit 1 inhaler per month;QL(0.04 ea daily)
ASMANEX TWISTHALER 60 METERED DOSES AEPB	2	Limit 1 inhaler per month;QL(0.04 ea daily)
ASMANEX TWISTHALER 7 METERED DOSES AEPB	2	Limit 1 inhaler per month;QL(0.04 ea daily)
<i>budesonide (inhalation) susp 0.25 mg/2ml</i>	1	QL(8 ml daily)
<i>budesonide (inhalation) susp 0.5 mg/2ml, 1 mg/2ml</i>	1	QL(4 ml daily)

Drug Name	Drug Tier	Requirements/Limits
FLOVENT DISKUS AEPB 100 MCG/BLIST	2	QL(20 ea daily)
FLOVENT DISKUS AEPB 250 MCG/BLIST	2	QL(8 ea daily)
FLOVENT DISKUS AEPB 50 MCG/BLIST	2	QL(40 ea daily)
FLOVENT HFA AERO 110 MCG/ACT, 220 MCG/ACT	2	Limit 2 inhalers per month;QL(0.8 gm daily)
FLOVENT HFA AERO 44 MCG/ACT	2	Limit 1 inhaler per month;QL(0.36 gm daily)
PULMICORT FLEXHALER AEPB 180 MCG/ACT	2	Limit 2 inhalers per month;QL(0.07 ea daily)
PULMICORT FLEXHALER AEPB 90 MCG/ACT	2	Limit 2 inhalers per month;QL(0.27 ea daily)
PULMICORT SUSP 0.25 MG/2ML (<i>Use Budesonide (Inhalation)</i>)	GP	QL(8 ml daily)
PULMICORT SUSP 0.5 MG/2ML, 1 MG/2ML (<i>Use Budesonide (Inhalation)</i>)	GP	QL(4 ml daily)
QVAR AERS 40 MCG/ACT	2	Limit 8.7gms per month;QL(0.58 gm daily)
QVAR AERS 80 MCG/ACT	2	Limit 8.7gms per month;QL(0.29 gm daily)
Sympathomimetics		
ADVAIR DISKUS AEPB	2	QL(2 ea daily)
ADVAIR HFA AERO	2	Limit 1 inhaler per month;QL(0.4 gm daily)
<i>albuterol sulfate nebu in 0.083 %, 0.5 %, 0.63 mg/3ml, 1.25 mg/3ml</i>	1	
<i>albuterol sulfate syrpr or 2 mg/5ml</i>	1	

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Drug Name	Drug Tier	Requirements/ Limits
<i>albuterol sulfate tabs or 2 mg, 4 mg</i>	1	
<i>albuterol sulfate tb12 or 4 mg, 8 mg</i>	1	QL(2 ea daily)
ANORO ELLIPTA AEPB	2	QL(2 ea daily)
ARCAPTA NEOHALER CAPS	3	QL(1 ea daily)
BREO ELLIPTA AEPB	2	QL(2 ea daily)
BROVANA NEBU	3	
COMBIVENT RESPIMAT AERS	3	Limit 6 per month;QL(0.2 gm daily)
DULERA AERO	2	Limit 1 inhaler per month;QL(0.45 gm daily)
<i>epinephrine hcl soln</i>	SP	PA
<i>epinephrine hcl sosy</i>	SP	PA
FORADIL AEROLIZER CAPS	3	QL(2 ea daily)
<i>ipratropium-albuterol soln</i>	1	
<i>levalbuterol hcl nebu</i>	1	
<i>metaproterenol sulfate syrup</i>	1	
<i>metaproterenol sulfate tabs</i>	1	
PERFOROMIST NEBU	3	QL(4 ml daily)
PROAIR HFA AERS	3	Limit 2 inhalers per month;QL(0.57 gm daily)
PROAIR RESPICLICK AEPB	3	Limit 2 inhalers per month;QL(0.07 ea daily)
PROVENTIL HFA AERS	2	Limit 2 inhalers per month;QL(0.45 gm daily)

Drug Name	Drug Tier	Requirements/ Limits
SEREVENT DISKUS AEPB	2	QL(2 ea daily)
STIOLTO RESPIMAT AERS	2	Limit 1 inhaler per month;QL(0.14 gm daily)
STRIVERDI RESPIMAT AERS	2	Limit 1 inhaler per month;QL(0.14 gm daily)
SYMBICORT AERO	2	Limit 1 inhaler per month;QL(0.34 gm daily)
<i>terbutaline sulfate tabs or 2.5 mg, 5 mg</i>	1	
VENTOLIN HFA AERS	3	Limit 2 inhalers per month;QL(1.2 gm daily)
VENTOLIN HFA AERS	3	Limit 2 inhalers per month;QL(0.54 gm daily)
VOSPIRE ER TB12 (<i>Use Albuterol Sulfate</i>)	GP	QL(2 ea daily)
XOPENEX CONCENTRATE NEBU (<i>Use Levalbuterol HCl</i>)	GP	
XOPENEX HFA AERO	2	Limit 30 per month;QL(0.9 gm daily)
XOPENEX NEBU (<i>Use Levalbuterol HCl</i>)	GP	
Xanthines		
ELIXOPHYLLIN ELIX	3	
LUFYLLIN TABS	3	
THEO-24 CP24	2	
<i>theophylline soln</i>	1	
<i>theophylline tb12</i>	1	
<i>theophylline tb24</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
ANTICOAGULANTS - Blood Thinners		
Coumarin Anticoagulants		
COUMADIN TABS (<i>Use Warfarin Sodium</i>)	3	
<i>warfarin sodium tabs</i>	1	
Direct Factor Xa Inhibitors		
ELIQUIS TABS	3	
SAVAYSA TABS	3	
XARELTO STARTER PACK TBPK	2	
XARELTO TABS	2	
Heparins And Heparinoid-Like Agents		
ARIXTRA SOLN (<i>Use Fondaparinux Sodium</i>)	SP	QL(20 ml per 10 days retail)
<i>enoxaparin sodium soln</i>	SP	QL(20 ml per 10 days retail)
<i>fondaparinux sodium soln</i>	SP	QL(20 ml per 10 days retail)
FRAGMIN SOLN 10000 UNIT/ML, 12500 UNIT/0.5ML, 15000 UNIT/0.6ML, 18000 UNT/0.72ML, 2500 UNIT/0.2ML, 25000 UNIT/ML, 5000 UNIT/0.2ML, 7500 UNIT/0.3ML, 95000 UNIT/3.8ML	SP	QL(20 ml per 10 days retail)
<i>heparin (porcine) in sodium chloride soln</i>	SP	PA
HEPARIN LOCK FLUSH SOLN	SP	PA
<i>heparin sod (porcine) in d5w soln</i>	SP	PA
<i>heparin sodium (porcine) lock flush soln</i>	SP	PA
<i>heparin sodium (porcine) soln</i>	SP	PA
HEPARIN SODIUM SOLN	SP	PA

Drug Name	Drug Tier	Requirements/Limits
HEPARIN SODIUM/D5W SOLN 100UNIT/ML-5%, 50UNIT/ML-5%	SP	PA
HEPARIN SODIUM/D5W SOLN 50UNIT/ML-5% (<i>Use Heparin Sod (Porcine) in D5W</i>)	SP	PA
HEPARIN SODIUM/NAACL 0.45% SOLN	SP	PA
HEPARIN SODIUM/SODIUM CHLORIDE 0.9% SOLN (<i>Use Heparin (Porcine) in Sodium Chloride</i>)	SP	PA
LOVENOX SOLN (<i>Use Enoxaparin Sodium</i>)	SP	QL(20 ml per 10 days retail)
Thrombin Inhibitors		
PRADAXA CAPS	2	
ANTICONVULSANTS - Drugs to Treat Seizures		
AMPA Glutamate Receptor Antagonists		
FYCOMPA SUSP	3	
FYCOMPA TABS	3	
Anticonvulsants - Benzodiazepines		
<i>clonazepam tabs</i>	1	
<i>clonazepam tbdp</i>	1	
DIASTAT ACUDIAL GEL (<i>Use Diazepam (Anticonvulsant)</i>)	GP	Limit 4 per month;QL(0.14 ea daily)
DIASTAT PEDIATRIC GEL (<i>Use Diazepam (Anticonvulsant)</i>)	GP	Limit 4 per month;QL(0.14 ea daily)
<i>diazepam (anticonvulsant) gel</i>	1	Limit 4 per month;QL(0.14 ea daily)
KLONOPIN TABS (<i>Use Clonazepam</i>)	GP	
ONFI SUSP	3	
ONFI TABS	3	
Anticonvulsants - Misc.		

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Drug Name	Drug Tier	Requirements/ Limits
BANZEL SUSP	2	
BANZEL TABS	2	
<i>carbamazepine chew</i>	1	
<i>carbamazepine cp12</i>	1	
<i>carbamazepine susp</i>	1	
<i>carbamazepine tabs</i>	1	
<i>carbamazepine tb12</i>	1	
CARBATROL CP12 (<i>Use Carbamazepine</i>)	3	
<i>gabapentin caps</i>	1	
<i>gabapentin soln</i>	1	
<i>gabapentin tabs</i>	1	
KEPPRA SOLN OR 100 MG/ML (<i>Use Levetiracetam</i>)	3	
KEPPRA TABS OR 1000 MG, 250 MG, 500 MG, 750 MG (<i>Use Levetiracetam</i>)	3	
KEPPRA XR TB24 (<i>Use Levetiracetam</i>)	3	
LAMICTAL CHEW 2 MG	3	
LAMICTAL CHEWABLE DISPERSIBLE CHEW (<i>Use Lamotrigine</i>)	3	
LAMICTAL ODT KIT (<i>Use Lamotrigine</i>)	3	PA
LAMICTAL ODT TBDP (<i>Use Lamotrigine</i>)	3	PA
LAMICTAL STARTER/NOT TAKING CARBAMAZEPINE KIT	3	
LAMICTAL STARTER/TAKING CARBAMAZEPINE/NOT TAKING VALPROATE KIT	3	

Drug Name	Drug Tier	Requirements/ Limits
LAMICTAL STARTER/TAKING VALPROATE KIT	3	
LAMICTAL TABS 100 MG, 150 MG, 200 MG, 25 MG (<i>Use Lamotrigine</i>)	3	
LAMICTAL XR KIT	3	PA
LAMICTAL XR TB24 100 MG, 200 MG, 25 MG, 50 MG (<i>Use Lamotrigine</i>)	3	PA; QL(1 ea daily)
LAMICTAL XR TB24 250 MG, 300 MG (<i>Use Lamotrigine</i>)	3	PA
<i>lamotrigine chew 25 mg, 5 mg</i>	1	
<i>lamotrigine kit</i>	1	PA
<i>lamotrigine tabs 100 mg, 150 mg, 200 mg, 25 mg</i>	1	
<i>lamotrigine tb24 100 mg, 200 mg, 25 mg, 50 mg</i>	1	PA; QL(1 ea daily)
<i>lamotrigine tb24 250 mg, 300 mg</i>	1	PA
<i>lamotrigine tbdp 100 mg, 200 mg, 25 mg, 50 mg</i>	1	PA
<i>levetiracetam soln or 100 mg/ml, 500 mg/5ml</i>	1	
<i>levetiracetam tabs or 1000 mg, 250 mg, 500 mg, 750 mg</i>	1	
<i>levetiracetam tb24 or 500 mg, 750 mg</i>	1	
LYRICA CAPS 100 MG, 200 MG, 25 MG, 50 MG, 75 MG	3	PA; QL(3 ea daily)
LYRICA CAPS 150 MG, 225 MG, 300 MG	3	PA; QL(2 ea daily)
LYRICA SOLN 20 MG/ML	3	PA
MYSOLINE TABS (<i>Use Primidone</i>)	3	
NEURONTIN CAPS (<i>Use Gabapentin</i>)	3	
NEURONTIN SOLN (<i>Use Gabapentin</i>)	3	

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Drug Name	Drug Tier	Requirements/ Limits
NEURONTIN TABS (<i>Use Gabapentin</i>)	3	
<i>oxcarbazepine susp</i>	1	
<i>oxcarbazepine tabs</i>	1	
OXTELLAR XR TB24	3	ST
POTIGA TABS	3	
<i>primidone tabs</i>	1	
QUDEXY XR CS24	3	PA
SPRITAM TB3D	3	PA
TEGRETOL SUSP (<i>Use Carbamazepine</i>)	3	
TEGRETOL TABS (<i>Use Carbamazepine</i>)	3	
TEGRETOL-XR TB12 100 MG (<i>Use Carbamazepine</i>)	GP	
TEGRETOL-XR TB12 200 MG, 400 MG (<i>Use Carbamazepine</i>)	3	
TOPAMAX SPRINKLE CPSP (<i>Use Topiramate</i>)	3	
TOPAMAX TABS (<i>Use Topiramate</i>)	3	
<i>topiramate csp</i>	1	
TOPIRAMATE ER CS24	3	PA
<i>topiramate tabs</i>	1	
TRILEPTAL SUSP 300 MG/5ML (<i>Use Oxcarbazepine</i>)	3	
TRILEPTAL TABS 150 MG, 300 MG (<i>Use Oxcarbazepine</i>)	3	
TRILEPTAL TABS 600 MG (<i>Use Oxcarbazepine</i>)	GP	
TROKENDI XR CP24	3	PA
VIMPAT SOLN OR 10 MG/ML	2	

Drug Name	Drug Tier	Requirements/ Limits
VIMPAT TABS OR 100 MG, 150 MG, 200 MG, 50 MG	2	
ZONEGRAN CAPS (<i>Use Zonisamide</i>)	3	
<i>zonisamide caps</i>	1	
Carbamates		
<i>felbamate susp</i>	1	
<i>felbamate tabs</i>	1	
FELBATOL SUSP (<i>Use Felbamate</i>)	3	
FELBATOL TABS (<i>Use Felbamate</i>)	3	
GABA Modulators		
GABITRIL TABS 12 MG, 16 MG	3	
GABITRIL TABS 2 MG, 4 MG (<i>Use Tiagabine HCl</i>)	3	
SABRIL PACK	2	
SABRIL TABS	2	
<i>tiagabine hcl tabs</i>	1	
Hydantoins		
CEREBYX SOLN (<i>Use Fosphenytoin Sodium</i>)	SP	PA
DILANTIN CAPS 100 MG (<i>Use Phenytoin Sodium Extended</i>)	3	
DILANTIN CAPS 30 MG	2	
DILANTIN INFATABS CHEW (<i>Use Phenytoin</i>)	3	
DILANTIN-125 SUSP (<i>Use Phenytoin</i>)	3	
<i>fosphenytoin sodium soln</i>	SP	PA
PEGANONE TABS	3	
PHENYTEK CAPS (<i>Use Phenytoin Sodium Extended</i>)	3	

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Drug Name	Drug Tier	Requirements/Limits
<i>phenytoin chew</i>	1	
<i>phenytoin sodium extended caps</i>	1	
<i>phenytoin sodium soln</i>	SP	PA
<i>phenytoin susp</i>	1	
Succinimides		
CELONTIN CAPS	2	
<i>ethosuximide caps</i>	1	
<i>ethosuximide soln</i>	1	
ZARONTIN CAPS (Use <i>Ethosuximide</i>)	3	
ZARONTIN SOLN (Use <i>Ethosuximide</i>)	3	
Valproic Acid		
DEPAKENE CAPS (Use <i>Valproic Acid</i>)	3	
DEPAKENE SYRP (Use <i>Valproate Sodium</i>)	3	
DEPAKOTE ER TB24 (Use <i>Divalproex Sodium</i>)	3	
DEPAKOTE SPRINKLES CSDR (Use <i>Divalproex Sodium</i>)	3	
DEPAKOTE TBEC (Use <i>Divalproex Sodium</i>)	3	
<i>divalproex sodium csdr</i>	1	
<i>divalproex sodium tb24</i>	1	
<i>divalproex sodium tbec</i>	1	
STAVZOR CPDR	3	
<i>valproate sodium soln or 250 mg/5ml</i>	1	
<i>valproate sodium syrp or 250 mg/5ml</i>	1	
<i>valproic acid caps</i>	1	
ANTIDEPRESSANTS - Drugs to Treat Depression		

Drug Name	Drug Tier	Requirements/Limits
Alpha-2 Receptor Antagonists (Tetracyclics)		
<i>mirtazapine tabs</i>	1	
<i>mirtazapine tbdp</i>	1	
REMERON SOLTAB TBDP (Use <i>Mirtazapine</i>)	GP	
REMERON TABS (Use <i>Mirtazapine</i>)	GP	
Antidepressants - Misc.		
<i>bupropion hcl tabs 100 mg, 75 mg</i>	1	
<i>bupropion hcl tb12 100 mg, 150 mg, 200 mg</i>	1	
<i>bupropion hcl tb24 150 mg, 300 mg</i>	1	QL(1 ea daily)
FORFIVO XL TB24	3	ST; QL(1 ea daily)
<i>maprotiline hcl tabs</i>	1	
WELLBUTRIN SR TB12 (Use <i>Bupropion HCl</i>)	GP	
WELLBUTRIN TABS (Use <i>Bupropion HCl</i>)	GP	
WELLBUTRIN XL TB24 (Use <i>Bupropion HCl</i>)	GP	QL(1 ea daily)
Monoamine Oxidase Inhibitors (MAOIs)		
EMSAM PT24	3	QL(1 ea daily)
MARPLAN TABS	2	
NARDIL TABS (Use <i>Phenelzine Sulfate</i>)	GP	
PARNATE TABS (Use <i>Tranylcypromine Sulfate</i>)	GP	
<i>phenelzine sulfate tabs</i>	1	
<i>tranylcypromine sulfate tabs</i>	1	
Selective Serotonin Reuptake Inhibitors (SSRIs)		
CELEXA TABS 10 MG (Use <i>Citalopram Hydrobromide</i>)	GP	QL(4 ea daily)
CELEXA TABS 20 MG (Use <i>Citalopram Hydrobromide</i>)	GP	QL(2 ea daily)

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Drug Name	Drug Tier	Requirements/Limits
CELEXA TABS 40 MG (Use <i>Citalopram Hydrobromide</i>)	GP	QL(1 ea daily)
<i>citalopram hydrobromide soln 10 mg/5ml</i>	1	QL(20 ml daily)
<i>citalopram hydrobromide tabs 10 mg</i>	1	QL(4 ea daily)
<i>citalopram hydrobromide tabs 20 mg</i>	1	QL(2 ea daily)
<i>citalopram hydrobromide tabs 40 mg</i>	1	QL(1 ea daily)
<i>escitalopram oxalate soln</i>	1	
<i>escitalopram oxalate tabs</i>	1	
<i>fluoxetine hcl caps 10 mg, 20 mg, 40 mg</i>	1	
<i>fluoxetine hcl cpdr 90 mg</i>	1	
<i>fluoxetine hcl soln 20 mg/5ml</i>	1	
<i>fluoxetine hcl tabs 10 mg, 20 mg</i>	1	
FLUOXETINE HCL TABS 60 MG	3	ST; QL(1 ea daily)
<i>fluvoxamine maleate cp24</i>	1	
<i>fluvoxamine maleate tabs</i>	1	
LEXAPRO SOLN (Use <i>Escitalopram Oxalate</i>)	GP	
LEXAPRO TABS (Use <i>Escitalopram Oxalate</i>)	GP	
LUVOX CR CP24 (Use <i>Fluvoxamine Maleate</i>)	GP	
<i>paroxetine hcl tabs</i>	1	
<i>paroxetine hcl tb24</i>	1	
PAXIL CR TB24 (Use <i>Paroxetine HCl</i>)	GP	
PAXIL SUSP 10 MG/5ML	2	
PAXIL TABS 10 MG, 20 MG, 30 MG, 40 MG (Use <i>Paroxetine HCl</i>)	GP	

Drug Name	Drug Tier	Requirements/Limits
PEXEVA TABS	3	
PROZAC CAPS (Use <i>Fluoxetine HCl</i>)	GP	
PROZAC WEEKLY CPDR (Use <i>Fluoxetine HCl</i>)	GP	
<i>sertraline hcl conc</i>	1	
<i>sertraline hcl tabs</i>	1	
ZOLOFT CONC (Use <i>Sertraline HCl</i>)	GP	
ZOLOFT TABS (Use <i>Sertraline HCl</i>)	GP	
Serotonin Modulators		
BRINTELLIX TABS	3	ST; QL(1 ea daily)
<i>nefazodone hcl tabs</i>	1	
OLEPTRO TB24	3	
<i>trazodone hcl tabs</i>	1	
TRINTELLIX TABS	3	ST; QL(1 ea daily)
VIIBRYD KIT	3	PA
VIIBRYD STARTER PACK KIT	3	PA
VIIBRYD TABS 10 MG, 20 MG, 40 MG	3	ST
Serotonin-Norepinephrine Reuptake Inhibitors		
CYMBALTA CPEP (Use <i>Duloxetine HCl</i>)	GP	QL(2 ea daily)
DESVENLAFAXINE ER TB24 100 MG, 50 MG	2	ST; QL(1 ea daily)
DESVENLAFAXINE ER TB24 100 MG, 50 MG	3	ST; QL(1 ea daily)
<i>duloxetine hcl cpep 20 mg, 30 mg, 60 mg</i>	1	QL(2 ea daily)
EFFEXOR XR CP24 150 MG (Use <i>Venlafaxine HCl</i>)	GP	QL(2 ea daily)
EFFEXOR XR CP24 37.5 MG, 75 MG (Use <i>Venlafaxine HCl</i>)	GP	QL(1 ea daily)

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Drug Name	Drug Tier	Requirements/ Limits
FETZIMA CP24 120 MG, 40 MG, 80 MG	3	ST; QL(1 ea daily)
FETZIMA CP24 20 MG	3	ST; QL(2 ea daily)
FETZIMA TITRATION PACK C4PK	3	ST
KHEDEZLA TB24	3	ST; QL(1 ea daily)
PRISTIQ TB24	2	ST; QL(1 ea daily)
<i>venlafaxine hcl cp24 150 mg</i>	1	QL(2 ea daily)
<i>venlafaxine hcl cp24 37.5 mg, 75 mg</i>	1	QL(1 ea daily)
VENLAFAXINE HCL ER TB24 (Use Venlafaxine HCl)	GP	
<i>venlafaxine hcl tabs 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg</i>	1	
<i>venlafaxine hcl tb24 150 mg, 225 mg, 37.5 mg, 75 mg</i>	1	
Tricyclic Agents		
<i>amitriptyline hcl tabs</i>	1	
AMOXAPINE TABS	2	
ANAFRANIL CAPS (Use Clomipramine HCl)	GP	
<i>clomipramine hcl caps</i>	1	
<i>desipramine hcl tabs</i>	1	
<i>doxepin hcl caps</i>	1	
<i>doxepin hcl conc</i>	1	
ELAVIL TABS (Use Amitriptyline HCl)	GP	
<i>imipramine hcl tabs</i>	1	
<i>imipramine pamoate caps</i>	1	
NORPRAMIN TABS (Use Desipramine HCl)	GP	

Drug Name	Drug Tier	Requirements/ Limits
<i>nortriptyline hcl caps</i>	1	
<i>nortriptyline hcl soln</i>	1	
PAMELOR CAPS (Use Nortriptyline HCl)	GP	
<i>protriptyline hcl tabs</i>	1	
SURMONTIL CAPS (Use Trimipramine Maleate)	GP	
TOFRANIL TABS (Use Imipramine HCl)	GP	
TOFRANIL-PM CAPS (Use Imipramine Pamoate)	GP	
<i>trimipramine maleate caps</i>	1	
VIVACTIL TABS (Use Protriptyline HCl)	GP	
ANTIDIABETICS - Drugs to Regulate Blood Sugar		
Alpha-Glucosidase Inhibitors		
<i>acarbose tabs</i>	1	
GLYSET TABS (Use Miglitol)	GP	
<i>miglitol tabs</i>	1	
PRECOSE TABS (Use Acarbose)	GP	
Antidiabetic - Amylin Analogs		
SYMLINPEN 120 SOPN	SP	PA
SYMLINPEN 60 SOPN	SP	PA
Antidiabetic Combinations		
ACTOPLUS MET TABS (Use Pioglitazone HCl-Metformin HCl)	GP	
ACTOPLUS MET XR TB24	3	
ALOGLIPTIN/METFORMIN HCL TABS	3	
ALOGLIPTIN/PIOGLITAZONE TABS	3	
AVANDAMET TABS	2	

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Drug Name	Drug Tier	Requirements/Limits
AVANDARYL TABS	2	
DUETACT TABS (Use Pioglitazone HCl-Glimepiride)	GP	
glipizide-metformin hcl tabs	1	
GLUCOVANCE TABS (Use Glyburide-Metformin)	GP	
glyburide-metformin tabs	1	
GLYXAMBI TABS	3	
INVOKAMET TABS	2	
JANUMET TABS	2	
JANUMET XR TB24	2	
JENTADUETO TABS	2	
JENTADUETO XR TB24	3	PA
KAZANO TABS	3	
KOMBIGLYZE XR TB24	3	
OSENI TABS	3	
pioglitazone hcl-glimepiride tabs	1	
pioglitazone hcl-metformin hcl tabs	1	
PRANDIMET TABS (Use Repaglinide-Metformin HCl)	GP	
REPAGLINIDE/METFORMIN IN HYDROCHLORIDE TABS	3	
SYNJARDY TABS	2	
XIGDUO XR TB24	3	
Biguanides		
FORTAMET TB24 (Use Metformin HCl)	GP	
GLUCOPHAGE TABS (Use Metformin HCl)	GP	

Drug Name	Drug Tier	Requirements/Limits
GLUCOPHAGE XR TB24 (Use Metformin HCl)	GP	
GLUMETZA TB24 (Use Metformin HCl)	GP	PA
metformin hcl tabs 1000 mg, 500 mg, 850 mg	1	
metformin hcl tb24 1000 mg, 500 mg	1	PA
metformin hcl tb24 1000 mg, 500 mg, 750 mg	1	
RIOMET SOLN	3	
Diabetic Other		
GLUCAGEN HYPOKIT SOLR	SP	
GLUCAGON EMERGENCY KIT KIT	SP	Limit 1 per year;QL(0.04 ea daily)
KORLYM TABS	3	PA
PROGLYCEM SUSP	3	
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
ALOGLIPTIN TABS	3	
JANUVIA TABS	2	
NESINA TABS	3	
ONGLYZA TABS	3	
TRADJENTA TABS	2	
Dopamine Receptor Agonists - Antidiabetic		
CYCLOSET TABS	3	
Incretin Mimetic Agents (GLP-1 Receptor)		
BYDUREON PEN	SP	PA
BYDUREON SRER	SP	PA
BYETTA SOPN	SP	PA
TANZEUM PEN	SP	PA
TRULICITY SOPN	SP	PA

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Drug Name	Drug Tier	Requirements/Limits
VICTOZA SOPN	SP	PA
Insulin Sensitizing Agents		
ACTOS TABS (<i>Use Pioglitazone HCl</i>)	GP	
AVANDIA TABS	2	
<i>pioglitazone hcl tabs</i>	1	
Insulin		
AFREZZA POWD	3	
AFREZZA POWD	3	QL(3 ea daily)
APIDRA SOLN	3	Limit 45mls per month;QL(1.5 ml daily)
APIDRA SOLOSTAR SOPN	3	Limit 45mls per month;QL(1.5 ml daily)
HUMALOG KWIKPEN SOPN 100 UNIT/ML	2	Limit 45mls per month;QL(1.5 ml daily)
HUMALOG KWIKPEN SOPN 200 UNIT/ML	2	Limit 24mls per month;QL(0.8 ml daily)
HUMALOG MIX 50/50 KWIKPEN SUPN	2	Limit 45mls per month;QL(1.5 ml daily)
HUMALOG MIX 50/50 SUSP	2	Limit 40mls per month;QL(1.34 ml daily)
HUMALOG MIX 75/25 KWIKPEN SUPN	2	Limit 45mls per month;QL(1.5 ml daily)
HUMALOG MIX 75/25 SUSP	2	Limit 40mls per month;QL(1.34 ml daily)
HUMALOG SOCT	2	Limit 45mls per month;QL(1.5 ml daily)
HUMALOG SOLN	2	Limit 45mls per month;QL(1.5 ml daily)
HUMULIN 70/30 KWIKPEN SUPN	2	Limit 45mls per month;QL(1.5 ml daily)

Drug Name	Drug Tier	Requirements/Limits
HUMULIN 70/30 SUSP	2	Limit 45mls per month;QL(1.5 ml daily)
HUMULIN N KWIKPEN SUPN	2	Limit 45mls per month;QL(1.5 ml daily)
HUMULIN N SUSP	2	Limit 40mls per month;QL(1.5 ml daily)
HUMULIN R SOLN	2	Limit 45mls per month;QL(1.5 ml daily)
HUMULIN R U-500 (<i>CONCENTRATED</i>) SOLN	2	Limit 40mls per month;QL(1.34 ml daily)
HUMULIN R U-500 KWIKPEN SOPN	2	Limit 40mls per month;QL(1.34 ml daily)
LANTUS SOLN	2	Limit 40mls per month;QL(1.34 ml daily)
LANTUS SOLOSTAR SOPN	2	Limit 45mls per month;QL(1.5 ml daily)
LEVEMIR FLEXPEN SOPN	2	Limit 45mls per month;QL(1.5 ml daily)
LEVEMIR FLEXTOUCH SOPN	2	Limit 45mls per month;QL(1.5 ml daily)
LEVEMIR SOLN	2	Limit 45mls per month;QL(1.5 ml daily)
NOVOLIN 70/30 RELION SUSP	3	Limit 45mls per month;QL(1.5 ml daily)
NOVOLIN 70/30 SUSP	3	Limit 45mls per month;QL(1.5 ml daily)
NOVOLIN N RELION SUSP	3	Limit 45mls per month;QL(1.5 ml daily)
NOVOLIN N SUSP	3	Limit 45mls per month;QL(1.5 ml daily)
NOVOLIN R RELION SOLN	3	Limit 45mls per month;QL(1.5 ml daily)

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Drug Name	Drug Tier	Requirements/Limits
NOVOLIN R SOLN	3	Limit 45mls per month;QL(1.5 ml daily)
NOVOLOG FLEXPEN SOPN	3	Limit 45mls per month;QL(1.5 ml daily)
NOVOLOG MIX 70/30 PREFILLED FLEXPEN SUPN	3	Limit 45mls per month;QL(1.5 ml daily)
NOVOLOG MIX 70/30 SUSP	3	Limit 45mls per month;QL(1.5 ml daily)
NOVOLOG PENFILL SOCT	3	Limit 45mls per month;QL(1.5 ml daily)
NOVOLOG SOLN	3	Limit 40mls per month;QL(1.33 ml daily)
TOUJEO SOLOSTAR SOPN	2	Limit 3 boxes per month;QL(0.5 ml daily)
TRESIBA FLEXTOUCH SOPN 100 UNIT/ML	2	Limit 45mls per month;QL(1.5 ml daily)
TRESIBA FLEXTOUCH SOPN 200 UNIT/ML	2	Limit 27mls per month;QL(0.9 ml daily)
Meglitinide Analogues		
<i>nateglinide tabs</i>	1	
PRANDIN TABS (<i>Use Repaglinide</i>)	GP	
<i>repaglinide tabs</i>	1	
STARLIX TABS (<i>Use Nateglinide</i>)	GP	
Sodium-Glucose Co-Transporter 2 (SGLT2)		
FARXIGA TABS	3	
INVOKANA TABS	2	
JARDIANCE TABS	2	
Sulfonylureas		
AMARYL TABS (<i>Use Glimepiride</i>)	GP	

Drug Name	Drug Tier	Requirements/Limits
<i>chlorpropamide tabs</i>	1	
DIABETA TABS (<i>Use Glyburide</i>)	GP	
<i>glimepiride tabs</i>	1	
<i>glipizide tabs</i>	1	
<i>glipizide tb24</i>	1	
GLUCOTROL TABS (<i>Use Glipizide</i>)	GP	
GLUCOTROL XL TB24 (<i>Use Glipizide</i>)	GP	
<i>glyburide micronized tabs</i>	1	
<i>glyburide tabs</i>	1	
GLYNASE TABS (<i>Use Glyburide Micronized</i>)	GP	
TOLAZAMIDE TABS 250 MG	2	
<i>tolazamide tabs 250 mg, 500 mg</i>	1	
<i>tolbutamide tabs</i>	1	
ANTIDIARRHEALS - Drugs to Treat Diarrhea		
Antidiarrheal - Chloride Channel Antagonists		
FULYZAQ TBEC	3	PA; QL(2 ea daily)
Antidiarrheal Agents - Misc.		
REZYST SB CHEW	3	
Antiperistaltic Agents		
<i>diphenoxylate w/ atropine liqd</i>	1	
<i>diphenoxylate w/ atropine tabs</i>	1	
LOMOTIL TABS (<i>Use Diphenoxylate w/ Atropine</i>)	GP	
<i>loperamide hcl caps</i>	1	RX/OTC
MOTOFEN TABS	2	
<i>opium tincture tinc</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>paregoric tinc</i>	1	
ANTIDOTES AND SPECIFIC ANTAGONISTS		
Antidotes - Chelating Agents		
CHEMET CAPS	2	
EXJADE TBSO	SP	
FERRIPROX SOLN	SP	PA
FERRIPROX TABS	SP	PA
JADENU TABS	SP	PA
Antidotes and Specific Antagonists		
RADIOGARDASE CAPS	3	PA
VISTOGARD PACK	SP	
Opioid Antagonists		
EVZIO SOAJ	SP	PA
<i>naloxone hcl soln 0.4 mg/ml</i>	SP	PA
NALOXONE HCL SOLN 1 MG/ML	SP	PA
<i>naltrexone hcl tabs</i>	1	
NARCAN LIQD	3	QL(4 ea per 30 days retail)
REVIA TABS (Use <i>Naltrexone HCl</i>)	GP	
VIVITROL SUSR	SP	PA
ANTIEMETICS - Drugs to Treat Nausea and Vomiting		
5-HT3 Receptor Antagonists		
ALOXI SOLN	SP	PA
ANZEMET TABS OR 100 MG, 50 MG	3	PA; Limit 2 per month;QL(0.07 ea daily)
<i>granisetron hcl tabs or 1 mg</i>	1	PA; QL(2 ea daily)
GRANISOL SOLN	3	PA

Drug Name	Drug Tier	Requirements/Limits
<i>ondansetron hcl soln 4 mg/5ml</i>	1	QL(5 ml daily)
<i>ondansetron hcl tabs 4 mg, 8 mg</i>	1	QL(30 ea per 30 days retail,90 ea per 90 days mail)
<i>ondansetron tbdp</i>	1	QL(30 ea per 30 days retail,90 ea per 90 days mail)
SANCUSO PTCH	3	PA
ZOFRAN ODT TBDP (Use <i>Ondansetron</i>)	GP	QL(30 ea per 30 days retail,90 ea per 90 days mail)
ZOFRAN SOLN 4 MG/5ML (Use <i>Ondansetron HCl</i>)	GP	QL(5 ml daily)
ZOFRAN TABS 4 MG, 8 MG (Use <i>Ondansetron HCl</i>)	GP	QL(30 ea per 30 days retail,90 ea per 90 days mail)
ZUPLENZ FILM	3	Limit 20 per month;QL(0.67 ea daily)
Antiemetics - Anticholinergic		
<i>meclizine hcl tabs</i>	1	RX/OTC
TIGAN CAPS (Use <i>Trimethobenzamide HCl</i>)	GP	
TRANSDERM-SCOP PT72	2	
<i>trimethobenzamide hcl caps</i>	1	
Antiemetics - Miscellaneous		
AKYNZEO CAPS	3	QL(2 ea per 28 days retail)
CESAMET CAPS	3	PA; QL(2 ea daily)
DICLEGIS TBEC	3	QL(4 ea daily)
<i>dronabinol caps</i>	1	PA
MARINOL CAPS (Use <i>Dronabinol</i>)	GP	PA
Substance P/Neurokinin 1 (NK1) Receptor		

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Drug Name	Drug Tier	Requirements/Limits
EMEND CAPS	3	Limit 3 per month;QL(0.1 ea daily)
EMEND CAPS 125 MG, 80 MG	3	Limit 1 per month;QL(0.04 ea daily)
EMEND CAPS 40 MG	3	Limit 2 per month;QL(0.07 ea daily)
EMEND SUSR 125 MG	3	PA
VARUBI TABS	3	QL(4 ea per fill retail)
ANTIFUNGALS - Drugs to Treat Fungal Infections		
Antifungals		
AMPHOTERICIN B SOLR	SP	PA
ANCOBON CAPS (<i>Use Flucytosine</i>)	GP	
BIO-STATIN CAPS	3	
<i>flucytosine caps</i>	1	
GRIFULVIN V TABS (<i>Use Griseofulvin Microsize</i>)	GP	
GRIS-PEG TABS (<i>Use Griseofulvin Ultramicrosize</i>)	GP	
<i>griseofulvin microsize susp</i>	1	
<i>griseofulvin microsize tabs</i>	1	
<i>griseofulvin ultramicrosize tabs</i>	1	
LAMISIL PACK 125 MG, 187.5 MG	3	PA
LAMISIL TABS 250 MG (<i>Use Terbinafine HCl</i>)	GP	QL(90 ea per 365 days retail)
<i>nystatin powd</i>	1	
<i>nystatin tabs</i>	1	
<i>terbinafine hcl tabs</i>	1	QL(90 ea per 365 days retail)
Imidazole-Related Antifungals		
CRESEMBA CAPS	3	

Drug Name	Drug Tier	Requirements/Limits
DIFLUCAN SUSR (<i>Use Fluconazole</i>)	GP	
DIFLUCAN TABS (<i>Use Fluconazole</i>)	GP	
<i>fluconazole in dextrose soln 400mg/200ml-56mg/ml</i>	SP	PA
<i>fluconazole susr</i>	1	
<i>fluconazole tabs</i>	1	
<i>itraconazole caps</i>	1	PA
<i>ketoconazole tabs</i>	1	
NOXAFIL SUSP	3	
NOXAFIL TBEC	3	
ONMEL TABS	3	PA
SPORANOX CAPS 100 MG (<i>Use Itraconazole</i>)	GP	PA
SPORANOX PULSEPAK CAPS (<i>Use Itraconazole</i>)	GP	PA
SPORANOX SOLN 10 MG/ML	2	PA
VFEND IV SOLR (<i>Use Voriconazole</i>)	SP	PA
VFEND SUSR 40 MG/ML	2	
VFEND TABS 200 MG, 50 MG (<i>Use Voriconazole</i>)	GP	
<i>voriconazole solr iv 200 mg</i>	SP	PA
<i>voriconazole susr or 40 mg/ml</i>	1	
<i>voriconazole tabs or 200 mg, 50 mg</i>	1	
ANTIHISTAMINES - Drugs to Treat Allergies		
Antihistamines - Alkylamines		
BROMPHENIRAMINE TANNATE CHEW	3	
DEXCHLORPHENIRAMINE MALEATE SYRP	2	

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Drug Name	Drug Tier	Requirements/Limits
RESPA-BR TB12	3	
Antihistamines - Ethanolamines		
<i>carbinoxamine maleate soln</i>	1	
<i>carbinoxamine maleate tabs</i>	1	
<i>clemastine fumarate syrp</i>	1	
<i>clemastine fumarate tabs</i>	1	
<i>diphenhydramine hcl caps or 50 mg</i>	1	RX/OTC
<i>diphenhydramine hcl elix or 12.5 mg/5ml</i>	1	RX/OTC
Antihistamines - Non-Sedating		
<i>cetirizine hcl soln</i>	1	RX/OTC
<i>cetirizine hcl syrp</i>	1	RX/OTC
CLARINEX SYRP 0.5 MG/ML	3	
CLARINEX TABS 5 MG (Use Desloratadine)	GP	
DESLORATADINE ODT TBDP	3	
<i>desloratadine tabs</i>	1	
<i>levocetirizine dihydrochloride soln or 2.5 mg/5ml</i>	1	
<i>levocetirizine dihydrochloride tabs or 5 mg</i>	1	
XYZAL SOLN (Use Levocetirizine Dihydrochloride)	GP	
XYZAL TABS (Use Levocetirizine Dihydrochloride)	GP	
ZYRTEC CHILDRENS ALLERGY SYRP (Use Cetirizine HCl)	GP	RX/OTC
ZYRTEC CHILDRENS HIVES RELIEF SYRP (Use Cetirizine HCl)	GP	RX/OTC

Drug Name	Drug Tier	Requirements/Limits
Antihistamines - Phenothiazines		
<i>promethazine hcl soln or 6.25 mg/5ml</i>	1	
<i>promethazine hcl supp re 12.5 mg, 25 mg, 50 mg</i>	1	
<i>promethazine hcl syrp or 6.25 mg/5ml</i>	1	
<i>promethazine hcl tabs or 12.5 mg, 25 mg, 50 mg</i>	1	
Antihistamines - Piperidines		
<i>cyproheptadine hcl syrp</i>	1	
<i>cyproheptadine hcl tabs</i>	1	
ANTHYPERLIPIDEMICS - Drugs to Treat High Cholesterol		
Antihyperlipidemics - Combinations		
VYTORIN TABS	2	QL(1 ea daily)
Antihyperlipidemics - Misc.		
KYNAMRO SOSY	SP	PA
LOVAZA CAPS (Use Omega-3-acid Ethyl Esters)	GP	
<i>omega-3-acid ethyl esters caps</i>	1	
VASCEPA CAPS	3	ST
Bile Acid Sequestrants		
<i>cholestyramine light pack</i>	1	
<i>cholestyramine light powd</i>	1	
<i>cholestyramine pack</i>	1	
<i>cholestyramine powd</i>	1	
COLESTID FLAVORED GRAN (Use Colestipol HCl)	GP	
COLESTID FLAVORED PACK (Use Colestipol HCl)	GP	
COLESTID GRAN (Use Colestipol HCl)	GP	
COLESTID PACK (Use Colestipol HCl)	GP	

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Drug Name	Drug Tier	Requirements/Limits
COLESTID TABS (<i>Use Colestipol HCl</i>)	GP	
<i>colestipol hcl gran</i>	1	
<i>colestipol hcl pack</i>	1	
<i>colestipol hcl tabs</i>	1	
QUESTRAN LIGHT POWD (<i>Use Cholestyramine Light</i>)	GP	
QUESTRAN PACK (<i>Use Cholestyramine</i>)	GP	
QUESTRAN POWD (<i>Use Cholestyramine</i>)	GP	
WELCHOL PACK	3	
WELCHOL TABS	3	
Fibric Acid Derivatives		
ANTARA CAPS	3	
<i>choline fenofibrate cpdr</i>	1	
FENOFIBRATE CAPS 150 MG, 50 MG	3	
<i>fenofibrate micronized caps</i>	1	
<i>fenofibrate tabs 120 mg, 40 mg</i>	1	PA
<i>fenofibrate tabs 145 mg, 160 mg, 48 mg, 54 mg</i>	1	
<i>fenofibric acid tabs</i>	1	
FENOGLIDE TABS (<i>Use Fenofibrate</i>)	GP	PA
FIBRICOR TABS 105 MG, 35 MG (<i>Use Fenofibric Acid</i>)	GP	Use Tricor or Trilipix
FIBRICOR TABS 105 MG, 35 MG (<i>Use Fenofibric Acid</i>)	GP	
<i>gemfibrozil tabs</i>	1	
LIPOFEN CAPS	3	
LOFIBRA CAPS (<i>Use Fenofibrate Micronized</i>)	GP	

Drug Name	Drug Tier	Requirements/Limits
LOFIBRA TABS (<i>Use Fenofibrate</i>)	GP	
LOPID TABS (<i>Use Gemfibrozil</i>)	GP	
TRICOR TABS (<i>Use Fenofibrate</i>)	GP	
TRIGLIDE TABS	2	
TRILIPIX CPDR (<i>Use Choline Fenofibrate</i>)	GP	
HMG CoA Reductase Inhibitors		
ADVICOR TB24 20MG-1000MG, 20MG-500MG, 20MG-750MG	2	
ADVICOR TB24 40MG-1000MG	2	QL(1 ea daily)
ALTOPREV TB24	3	
<i>atorvastatin calcium tabs</i>	1	QL(1 ea daily)
CRESTOR TABS (<i>Use Rosuvastatin Calcium</i>)	GP	QL(1 ea daily)
<i>fluvastatin sodium caps</i>	1	QL(1 ea daily)
<i>fluvastatin sodium tb24</i>	1	QL(1 ea daily)
LESCOL CAPS (<i>Use Fluvastatin Sodium</i>)	GP	QL(1 ea daily)
LESCOL XL TB24 (<i>Use Fluvastatin Sodium</i>)	GP	QL(1 ea daily)
LIPITOR TABS (<i>Use Atorvastatin Calcium</i>)	GP	QL(1 ea daily)
LIVALO TABS	3	ST; QL(1 ea daily)
<i>lovastatin tabs</i>	1	
MEVACOR TABS (<i>Use Lovastatin</i>)	GP	
PRAVACHOL TABS 20 MG, 80 MG (<i>Use Pravastatin Sodium</i>)	GP	QL(1 ea daily)
PRAVACHOL TABS 40 MG (<i>Use Pravastatin Sodium</i>)	GP	QL(2 ea daily)
<i>pravastatin sodium tabs 10 mg, 20 mg, 80 mg</i>	1	QL(1 ea daily)

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Drug Name	Drug Tier	Requirements/Limits
<i>pravastatin sodium tabs 40 mg</i>	1	QL(2 ea daily)
<i>rosuvastatin calcium tabs</i>	1	QL(1 ea daily)
SIMCOR TB24	2	
<i>simvastatin tabs 10 mg, 20 mg, 40 mg, 5 mg</i>	1	QL(1 ea daily)
<i>simvastatin tabs 80 mg</i>	1	
ZOCOR TABS 10 MG, 20 MG, 40 MG, 5 MG (Use <i>Simvastatin</i>)	GP	QL(1 ea daily)
ZOCOR TABS 80 MG (Use <i>Simvastatin</i>)	GP	
Intestinal Cholesterol Absorption Inhibitors		
ZETIA TABS	2	
Microsomal Triglyceride Transfer Protein (MTP)		
JUXTAPID CAPS	SP	PA
Nicotinic Acid Derivatives		
<i>niacin (antihyperlipidemic) tbc</i>	1	
NIASPAN TBCR	2	
Proprotein Convertase Subtilisin/Kexin Type 9		
PRALUENT SOPN	SP	PA
PRALUENT SOSY	SP	PA
REPATHA PUSHTRONEX SYSTEM SOCT	SP	PA
REPATHA SOSY	SP	PA
REPATHA SURECLICK SOAJ	SP	PA
ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure		
ACE Inhibitors		
ACCUPRIL TABS (Use <i>Quinapril HCl</i>)	GP	
ACEON TABS (Use <i>Perindopril Erbumine</i>)	GP	

Drug Name	Drug Tier	Requirements/Limits
ALTACE CAPS 1.25 MG, 2.5 MG, 5 MG (Use <i>Ramipril</i>)	GP	QL(1 ea daily)
ALTACE CAPS 10 MG (Use <i>Ramipril</i>)	GP	QL(2 ea daily)
<i>benazepril hcl tabs</i>	1	
<i>captopril tabs</i>	1	
<i>enalapril maleate tabs</i>	1	QL(2 ea daily)
EPANED SOLR	3	QL(5 ml daily)
<i>fosinopril sodium tabs</i>	1	
<i>lisinopril tabs</i>	1	
LOTENSIN TABS (Use <i>Benazepril HCl</i>)	GP	
MAVIK TABS (Use <i>Trandolapril</i>)	GP	
<i>moexipril hcl tabs</i>	1	
<i>perindopril erbumine tabs</i>	1	
PRINIVIL TABS (Use <i>Lisinopril</i>)	GP	
QBRELIS SOLN	3	PA
<i>quinapril hcl tabs</i>	1	
<i>ramipril caps 1.25 mg, 2.5 mg, 5 mg</i>	1	QL(1 ea daily)
<i>ramipril caps 10 mg</i>	1	QL(2 ea daily)
<i>trandolapril tabs</i>	1	
UNIVASC TABS (Use <i>Moexipril HCl</i>)	GP	
VASOTEC TABS (Use <i>Enalapril Maleate</i>)	GP	QL(2 ea daily)
ZESTRIL TABS (Use <i>Lisinopril</i>)	GP	
Agents for Pheochromocytoma		
DEMSER CAPS	3	
DIBENZYLINE CAPS (Use <i>Phenoxybenzamine HCl</i>)	GP	

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Drug Name	Drug Tier	Requirements/ Limits
<i>phenoxybenzamine hcl caps</i>	1	
Angiotensin II Receptor Antagonists		
ATACAND TABS (<i>Use Candesartan Cilexetil</i>)	GP	
AVAPRO TABS (<i>Use Irbesartan</i>)	GP	
BENICAR TABS	2	
<i>candesartan cilexetil tabs</i>	1	
COZAAR TABS (<i>Use Losartan Potassium</i>)	GP	
DIOVAN TABS (<i>Use Valsartan</i>)	GP	
EDARBI TABS	3	
EPROSARTAN MESYLATE TABS	2	
<i>irbesartan tabs</i>	1	
<i>losartan potassium tabs</i>	1	
MICARDIS TABS (<i>Use Telmisartan</i>)	GP	
<i>telmisartan tabs</i>	1	
TEVETEN TABS (<i>Use Eprosartan Mesylate</i>)	GP	
<i>valsartan tabs</i>	1	
Antiadrenergic Antihypertensives		
CARDURA TABS (<i>Use Doxazosin Mesylate</i>)	GP	
CATAPRES TABS (<i>Use Clonidine HCl</i>)	GP	
CATAPRES-TTS-1 PTWK (<i>Use Clonidine HCl</i>)	GP	
CATAPRES-TTS-2 PTWK (<i>Use Clonidine HCl</i>)	GP	
CATAPRES-TTS-3 PTWK (<i>Use Clonidine HCl</i>)	GP	
<i>clonidine hcl ptwk</i>	1	
<i>clonidine hcl tabs</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
<i>doxazosin mesylate tabs</i>	1	
<i>guanfacine hcl tabs</i>	1	
<i>methyldopa tabs</i>	1	
METHYLDOPATE HCL SOLN	SP	PA
MINIPRESS CAPS (<i>Use Prazosin HCl</i>)	GP	
<i>prazosin hcl caps</i>	1	
<i>reserpine tabs</i>	1	
TENEX TABS (<i>Use Guanfacine HCl</i>)	GP	
<i>terazosin hcl caps</i>	1	
Antihypertensive Combinations		
ACCURETIC TABS (<i>Use Quinapril-Hydrochlorothiazide</i>)	GP	
<i>amlodipine besylate-benazepril hcl caps</i>	1	
<i>amlodipine besylate-valsartan tabs</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tabs</i>	1	
AMTURNIDE TABS	2	ST
ATACAND HCT TABS (<i>Use Candesartan Cilexetil-Hydrochlorothiazide</i>)	GP	
<i>atenolol & chlorthalidone tabs</i>	1	
AVALIDE TABS (<i>Use Irbesartan-Hydrochlorothiazide</i>)	GP	
AZOR TABS	2	ST
<i>benazepril & hydrochlorothiazide tabs</i>	1	
BENICAR HCT TABS	2	
<i>bisoprolol & hydrochlorothiazide tabs</i>	1	

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Drug Name	Drug Tier	Requirements/ Limits
BYVALSON TABS	3	PA
<i>candesartan cilexetil-hydrochlorothiazide tabs</i>	1	
<i>captopril & hydrochlorothiazide tabs</i>	1	
<i>clonidine & chlorthalidone tabs</i>	1	
CLORPRES TABS	2	
CORZIDE TABS (Use Nadolol & Bendroflumethiazide)	GP	
DIOVAN HCT TABS (Use Valsartan-Hydrochlorothiazide)	GP	
DUTOPROL TB24	3	
EDARBYCLOR TABS	3	
<i>enalapril maleate & hydrochlorothiazide tabs</i>	1	
EXFORGE HCT TABS (Use Amlodipine-Valsartan-Hydrochlorothiazide)	GP	
EXFORGE TABS (Use Amlodipine Besylate-Valsartan)	GP	
<i>fosinopril sodium & hydrochlorothiazide tabs</i>	1	
HYZAAR TABS (Use Losartan Potassium & Hydrochlorothiazide)	GP	
<i>irbesartan-hydrochlorothiazide tabs</i>	1	
<i>lisinopril & hydrochlorothiazide tabs</i>	1	
LOPRESSOR HCT TABS (Use Metoprolol & Hydrochlorothiazide)	GP	
<i>losartan potassium & hydrochlorothiazide tabs</i>	1	
LOTENSIN HCT TABS (Use Benazepril & Hydrochlorothiazide)	GP	

Drug Name	Drug Tier	Requirements/ Limits
LOTREL CAPS (Use Amlodipine Besylate-Benazepril HCl)	GP	
<i>methyldopa & hydrochlorothiazide tabs</i>	1	
<i>metoprolol & hydrochlorothiazide tabs</i>	1	
MICARDIS HCT TABS (Use Telmisartan-Hydrochlorothiazide)	GP	
<i>moexipril-hydrochlorothiazide tabs</i>	1	
<i>nadolol & bendroflumethiazide tabs</i>	1	
<i>propranolol & hydrochlorothiazide tabs</i>	1	
<i>quinapril-hydrochlorothiazide tabs</i>	1	
TARKA TBCR (Use Trandolapril-Verapamil HCl)	GP	
TEKAMLO TABS	2	ST
TEKTURNA HCT TABS	2	ST
<i>telmisartan-amlodipine tabs</i>	1	
<i>telmisartan-hydrochlorothiazide tabs</i>	1	
TENORETIC 100 TABS (Use Atenolol & Chlorthalidone)	GP	
TENORETIC 50 TABS (Use Atenolol & Chlorthalidone)	GP	
TEVETEN HCT TABS	3	ST
<i>trandolapril-verapamil hcl tbc</i>	1	
TRIBENZOR TABS	2	ST
TWYNSTA TABS (Use Telmisartan-Amlodipine)	GP	
UNIRETIC TABS (Use Moexipril-Hydrochlorothiazide)	GP	

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Drug Name	Drug Tier	Requirements/Limits
<i>valsartan-hydrochlorothiazide tabs</i>	1	
VASERETIC TABS (<i>Use Enalapril Maleate & Hydrochlorothiazide</i>)	GP	
ZESTORETIC TABS (<i>Use Lisinopril & Hydrochlorothiazide</i>)	GP	
ZIAC TABS (<i>Use Bisoprolol & Hydrochlorothiazide</i>)	GP	
Antihypertensives - Misc.		
VECAMYL TABS	3	
Direct Renin Inhibitors		
TEKTRUNA TABS	2	ST
Selective Aldosterone Receptor Antagonists		
<i>eplerenone tabs</i>	1	
INSPIRA TABS (<i>Use Eplerenone</i>)	GP	
Vasodilators		
<i>hydralazine hcl tabs or 10 mg, 100 mg, 25 mg, 50 mg</i>	1	
<i>minoxidil tabs</i>	1	
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)		
Antimalarial Combinations		
<i>atovaquone-proguanil hcl tabs</i>	1	
COARTEM TABS	2	Limit 24 per month; QL(0.8 ea daily)
MALARONE TABS (<i>Use Atovaquone-Proguanil HCl</i>)	GP	
Antimalarials		
ARALEN TABS (<i>Use Chloroquine Phosphate</i>)	GP	
<i>chloroquine phosphate tabs</i>	1	
DARAPRIM TABS	2	PA
<i>hydroxychloroquine sulfate tabs</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>mefloquine hcl tabs</i>	1	QL(6 ea per fill retail, 6 ea per fill mail)
PLAQUENIL TABS (<i>Use Hydroxychloroquine Sulfate</i>)	GP	
PRIMAQUINE PHOSPHATE TABS	2	
QUALAQUIN CAPS (<i>Use Quinine Sulfate</i>)	GP	PA; QL(2 ea daily)
<i>quinine sulfate caps</i>	1	PA; QL(2 ea daily)
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
Antimyasthenic/Cholinergic Agents		
GUANIDINE HCL TABS	2	
MESTINON SYRP 60 MG/5ML	2	PA
MESTINON TABS 60 MG (<i>Use Pyridostigmine Bromide</i>)	GP	
MESTINON TIMESPAN TBCR (<i>Use Pyridostigmine Bromide</i>)	GP	
<i>pyridostigmine bromide tabs</i>	1	
<i>pyridostigmine bromide tbcr</i>	1	
ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)		
Anti TB Combinations		
RIFAMATE CAPS	2	
RIFATER TABS	2	
Antimycobacterial Agents		
CAPASTAT SULFATE SOLR	SP	PA
<i>cycloserine caps</i>	1	
<i>ethambutol hcl tabs</i>	1	
ISONIAZID SOLN IJ 100 MG/ML	SP	PA

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Drug Name	Drug Tier	Requirements/ Limits
<i>isoniazid syrp or 50 mg/5ml</i>	1	
<i>isoniazid tabs or 100 mg, 300 mg</i>	1	
MYAMBUTOL TABS (Use <i>Ethambutol HCl</i>)	GP	
MYCOBUTIN CAPS (Use <i>Rifabutin</i>)	GP	
PASER PACK	3	
PRIFTIN TABS	3	
<i>pyrazinamide tabs</i>	1	
<i>rifabutin caps</i>	1	
RIFADIN CAPS OR 150 MG, 300 MG (Use <i>Rifampin</i>)	GP	
RIFADIN SOLR IV 600 MG (Use <i>Rifampin</i>)	SP	PA
<i>rifampin caps or 150 mg, 300 mg</i>	1	
<i>rifampin solr iv 600 mg</i>	SP	PA
SIRTURO TABS	SP	
TRECTOR TABS	2	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer		
Alkylating Agents		
ALKERAN SOLR IV 50 MG (Use <i>Melphalan HCl</i>)	SP	PA
ALKERAN TABS OR 2 MG	2	
BICNU SOLR	SP	
BUSULFEX SOLN	SP	PA
<i>carboplatin soln</i>	SP	
<i>cisplatin soln 100 mg/100ml, 50 mg/50ml</i>	SP	
CISPLATIN SOLN 200 MG/200ML	SP	

Drug Name	Drug Tier	Requirements/ Limits
CYCLOPHOSPHAMIDE CAPS OR 25 MG, 50 MG	2	
<i>cyclophosphamide solr ij 1 gm, 2 gm, 500 mg</i>	SP	
ELOXATIN SOLN (Use <i>Oxaliplatin</i>)	SP	
GLEOSTINE CAPS 10 MG, 100 MG, 40 MG (Use <i>Lomustine</i>)	GP	
GLEOSTINE CAPS 5 MG	3	
GLIADEL WAFER WAFR	SP	
HEXALEN CAPS	2	
IFEX SOLR 1 GM (Use <i>Ifosfamide</i>)	SP	
IFEX SOLR 3 GM	SP	
<i>ifosfamide soln 1 gm/20ml, 3 gm/60ml</i>	SP	
<i>ifosfamide solr 1 gm</i>	SP	
IFOSFAMIDE SOLR 3 GM	SP	
LEUKERAN TABS	2	
<i>lomustine caps</i>	1	
<i>melphalan hcl solr</i>	SP	PA
MUSTARGEN SOLR	SP	
MYLERAN TABS	2	
<i>oxaliplatin soln</i>	SP	
<i>oxaliplatin solr</i>	SP	
TEMODAR CAPS OR 100 MG, 140 MG, 180 MG, 20 MG, 250 MG, 5 MG (Use <i>Temozolomide</i>)	SP	
TEMODAR SOLR IV 100 MG	SP	
<i>temozolomide caps</i>	SP	
THIOTEPA SOLR	SP	

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Drug Name	Drug Tier	Requirements/Limits
TREANDA SOLN	SP	
TREANDA SOLR	SP	
ZANOSAR SOLR	SP	PA
Antimetabolites		
ALIMTA SOLR	SP	PA
<i>azacitidine susr</i>	SP	PA
<i>capecitabine tabs</i>	1	
<i>cladribine soln</i>	SP	PA
CLOLAR SOLN	SP	PA
<i>cytarabine soln</i>	SP	PA
CYTARABINEAQUEOUS SOLN	SP	PA
DACOGEN SOLR (<i>Use Decitabine</i>)	SP	PA
<i>decitabine solr</i>	SP	PA
DEPOCYT SUSP	SP	PA
FLOXURIDINE SOLR	SP	PA
FLUDARA SOLR (<i>Use Fludarabine Phosphate</i>)	SP	PA
<i>fludarabine phosphate soln</i>	SP	PA
<i>fludarabine phosphate solr</i>	SP	PA
<i>fluorouracil soln iv 1 gm/20ml, 2.5 gm/50ml, 5 gm/100ml, 500 mg/10ml</i>	SP	PA
FOLOTYN SOLN	SP	
<i>gemcitabine hcl soln</i>	SP	PA
<i>gemcitabine hcl solr</i>	SP	PA
GEMZAR SOLR (<i>Use Gemcitabine HCl</i>)	SP	PA
<i>mercaptopurine tabs</i>	1	

Drug Name	Drug Tier	Requirements/Limits
METHOTREXATE POWD	3	
<i>methotrexate sodium soln ij 1 gm/40ml, 100 mg/4ml, 200 mg/8ml, 250 mg/10ml, 50 mg/2ml</i>	SP	PA
METHOTREXATE SODIUM SOLN IJ 250 MG/10ML	SP	PA
<i>methotrexate sodium solr ij 1 gm</i>	SP	PA
<i>methotrexate sodium tabs or 2.5 mg</i>	1	
PURINETHOL TABS (<i>Use Mercaptopurine</i>)	GP	
PURIXAN SUSP	3	AL
TABLOID TABS	2	
TREXALL TABS	3	
VIDAZA SUSR (<i>Use Azacitidine</i>)	SP	PA
XELODA TABS (<i>Use Capecitabine</i>)	GP	
Antineoplastic - Angiogenesis Inhibitors		
AVASTIN SOLN	SP	
CYRAMZA SOLN	SP	
ZALTRAP SOLN	SP	
Antineoplastic - Antibodies		
ADCETRIS SOLR	SP	
ARZERRA CONC	SP	PA
BLINCYTO SOLR	SP	
ERBITUX SOLN	SP	PA
GAZYVA SOLN	SP	
HERCEPTIN SOLR	SP	
KADCYLA SOLR	SP	

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Drug Name	Drug Tier	Requirements/ Limits
KEYTRUDA SOLN	SP	
KEYTRUDA SOLR	SP	
OPDIVO SOLN	SP	
PERJETA SOLN	SP	
RITUXAN SOLN	SP	PA
VECTIBIX SOLN	SP	
YERVOY SOLN	SP	PA
ZEVALIN Y-90 KIT	SP	
Antineoplastic - Cellular Immunotherapy		
PROVENGE SUSP	SP	
Antineoplastic - Hedgehog Pathway Inhibitors		
ERIVEDGE CAPS	SP	
ODOMZO CAPS	SP	
Antineoplastic - Hormonal and Related Agents		
<i>anastrozole tabs</i>	1	
ARIMIDEX TABS (<i>Use Anastrozole</i>)	GP	
AROMASIN TABS (<i>Use Exemestane</i>)	GP	
<i>bicalutamide tabs</i>	1	
CASODEX TABS (<i>Use Bicalutamide</i>)	GP	
DEPO-PROVERA SUSP	SP	PA
ELIGARD KIT	SP	PA
EMCYT CAPS	2	
<i>exemestane tabs</i>	1	
FARESTON TABS	2	
FASLODEX SOLN	SP	

Drug Name	Drug Tier	Requirements/ Limits
FEMARA TABS (<i>Use Letrozole</i>)	GP	
FIRMAGON SOLR	SP	PA
<i>flutamide caps</i>	1	
HYDROXYPROGESTERONE CAPROATE SOLN	SP	PA
<i>letrozole tabs</i>	1	
<i>leuprolide acetate kit</i>	SP	PA
LUPRON DEPOT KIT 11.25 MG	SP	PA
LUPRON DEPOT KIT 22.5 MG	SP	
LUPRON DEPOT KIT 3.75 MG	SP	
LUPRON DEPOT KIT 30 MG	SP	PA
LUPRON DEPOT KIT 45 MG	SP	
LUPRON DEPOT KIT 7.5 MG	SP	PA
LYSODREN TABS	2	
MEGACE ORAL SUSP (<i>Use Megestrol Acetate</i>)	GP	
MEGESTROL ACETATE POWD XX	3	
<i>megestrol acetate susp or 40 mg/ml, 400 mg/10ml</i>	1	
<i>megestrol acetate tabs or 20 mg, 40 mg</i>	1	
NILANDRON TABS (<i>Use Nilutamide</i>)	GP	
<i>nilutamide tabs</i>	1	
SOLTAMOX SOLN	3	
<i>tamoxifen citrate tabs</i>	PV	PV
TRELSTAR MIXJECT SUSR	SP	PA
TRELSTAR SUSR	SP	PA

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Drug Name	Drug Tier	Requirements/Limits
VANTAS KIT	SP	
XTANDI CAPS	SP	PA
ZOLADEX IMPL	SP	
ZYTIGA TABS	SP	PA
Antineoplastic - Immunomodulators		
LEVAMISOLE HCL POWD	3	
POMALYST CAPS	3	PA
Antineoplastic Antibiotics		
<i>bleomycin sulfate solr</i>	SP	
COSMEGEN SOLR	SP	
<i>daunorubicin hcl inj</i>	SP	
DAUNOXOME INJ	SP	
DOXIL INJ (<i>Use Doxorubicin HCl Liposomal</i>)	SP	
<i>doxorubicin hcl liposomal inj</i>	SP	
<i>doxorubicin hcl soln 2 mg/ml</i>	SP	
DOXORUBICIN HCL SOLR 10 MG, 50 MG	SP	
ELLENCES SOLN (<i>Use Epirubicin HCl</i>)	SP	
<i>epirubicin hcl soln</i>	SP	
IDAMYCIN PFS SOLN (<i>Use Idarubicin HCl</i>)	SP	
<i>idarubicin hcl soln</i>	SP	
<i>mitomycin solr 20 mg, 40 mg</i>	SP	
MITOMYCIN SOLR 5 MG	SP	
<i>mitoxantrone hcl conc</i>	SP	PA
VALSTAR SOLN	SP	

Drug Name	Drug Tier	Requirements/Limits
Antineoplastic Combinations		
LONSURF TABS	SP	PA
Antineoplastic Enzyme Inhibitors		
AFINITOR DISPERZ TBSO	3	PA
AFINITOR TABS	SP	PA
ALECENSA CAPS	SP	PA
BELEODAQ SOLR	SP	
BOSULIF TABS	SP	PA
CAPRELSA TABS	SP	PA
COMETRIQ KIT	SP	PA
COTELLIC TABS	SP	PA
FARYDAK CAPS	SP	PA
GILOTRIF TABS	SP	PA
GLEEVEC TABS (<i>Use Imatinib Mesylate</i>)	SP	PA
IBRANCE CAPS	SP	PA
ICLUSIG TABS	SP	PA
<i>imatinib mesylate tabs</i>	SP	
IMBRUVICA CAPS	SP	PA
INLYTA TABS	SP	PA
IRESSA TABS	SP	
ISTODAX SOLR	SP	PA
JAKAFI TABS	SP	PA
KYPROLIS SOLR	SP	
LENVIMA 10 MG DAILY DOSE CPPK	SP	PA
LENVIMA 14 MG DAILY DOSE CPPK	SP	PA

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Drug Name	Drug Tier	Requirements/Limits
LENVIMA 18 MG DAILY DOSE CPPK	SP	PA
LENVIMA 20 MG DAILY DOSE CPPK	SP	PA
LENVIMA 24 MG DAILY DOSE CPPK	SP	PA
LENVIMA 8 MG DAILY DOSE CPPK	SP	PA
LYNPARZA CAPS	SP	PA
MEKINIST TABS	SP	PA
NEXAVAR TABS	SP	PA
NINLARO CAPS	SP	PA
SPRYCEL TABS	SP	
STIVARGA TABS	SP	PA
SUTENT CAPS	SP	
TAFINLAR CAPS	SP	PA
TAGRISSE TABS	SP	PA
TARCEVA TABS	SP	PA
TASIGNA CAPS	SP	PA
TORISEL SOLN	SP	PA
TYKERB TABS	SP	
VELCADE SOLR	SP	PA
VOTRIENT TABS	SP	
XALKORI CAPS	SP	PA
ZELBORAF TABS	SP	PA
ZOLINZA CAPS	SP	PA
ZYDELIG TABS	SP	PA
ZYKADIA CAPS	SP	PA
Antineoplastic Enzymes		

Drug Name	Drug Tier	Requirements/Limits
ERWINAZE SOLR	SP	
ONCASPAR SOLN	SP	
Antineoplastic Radiopharmaceuticals		
METASTRON SOLN	SP	
QUADRAMET SOLN	SP	
XOFIGO SOLN	SP	
Antineoplastics Misc.		
ACTIMMUNE SOLN	SP	PA
ALFERON N SOLN	SP	PA
<i>bexarotene caps</i>	SP	PA
DACARBAZINE SOLR 100 MG	SP	
<i>dacarbazine solr 200 mg</i>	SP	
HYDREA CAPS (<i>Use Hydroxyurea</i>)	GP	
<i>hydroxyurea caps</i>	1	
INTRON A SOLN	SP	PA
INTRON A SOLR	SP	PA
INTRON A W/DILUENT SOLR	SP	PA
MATULANE CAPS	SP	PA
NIPENT SOLR	SP	
PHOTOFRIN SOLR	SP	
PROLEUKIN SOLR	SP	
SYLATRON KIT	SP	PA
SYNRIBO SOLR	SP	PA
TARGRETIN CAPS OR 75 MG (<i>Use Bexarotene</i>)	SP	PA
THERACYS SUSR	SP	

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Drug Name	Drug Tier	Requirements/Limits
TICE BCG SUSR	SP	
<i>tretinoin (chemotherapy) caps</i>	1	
TRISENOX SOLN	SP	
UVADEX SOLN	SP	PA
Chemotherapy Adjuncts		
ELITEK SOLR	SP	
KEPIVANCE SOLR	SP	PA
Chemotherapy Rescue/Antidote Agents		
<i>amifostine crystalline solr</i>	SP	PA
<i>dexrazoxane solr</i>	SP	
ETHYOL SOLR (<i>Use Amifostine Crystalline</i>)	SP	PA
FUSILEV SOLR (<i>Use Levoleucovorin Calcium</i>)	SP	
<i>leucovorin calcium solr ij 100 mg, 200 mg, 350 mg</i>	SP	PA
LEUCOVORIN CALCIUM SOLR IJ 50 MG, 500 MG	SP	
<i>leucovorin calcium tabs or 10 mg, 15 mg, 25 mg, 5 mg</i>	1	
<i>levoleucovorin calcium soln</i>	SP	
<i>levoleucovorin calcium solr</i>	SP	
<i>mesna soln</i>	SP	
MESNEX SOLN IV 100 MG/ML (<i>Use Mesna</i>)	SP	
MESNEX TABS OR 400 MG	2	
TOTECT SOLR	SP	
VORAXAZE SOLR	SP	
ZINECARD SOLR (<i>Use Dexrazoxane</i>)	SP	
Mitotic Inhibitors		
ABRAXANE SUSR	SP	

Drug Name	Drug Tier	Requirements/Limits
DOCEFREZ SOLR	SP	
DOCETAXEL CONC 140 MG/7ML, 160 MG/8ML, 20 MG/0.5ML, 20 MG/ML, 80 MG/2ML, 80 MG/4ML	SP	
<i>docetaxel conc 20 mg/ml, 80 mg/4ml</i>	SP	
DOCETAXEL SOLN 160 MG/16ML, 20 MG/2ML, 200 MG/20ML, 80 MG/8ML	SP	
ETOPOPHOS SOLR	SP	PA
<i>etoposide caps or 50 mg</i>	1	
<i>etoposide soln iv 1 gm/50ml, 100 mg/5ml, 500 mg/25ml</i>	SP	PA
HALAVEN SOLN	SP	
IXEMPRA KIT SOLR	SP	
JEVTANA SOLN	SP	
MARQIBO SUSP	SP	
NAVELBINE SOLN (<i>Use Vinorelbine Tartrate</i>)	SP	
<i>paclitaxel conc 100 mg/16.7ml, 30 mg/5ml, 300 mg/50ml</i>	SP	
PACLITAXEL CONC 150 MG/25ML	SP	
TAXOL CONC (<i>Use Paclitaxel</i>)	SP	
TAXOTERE CONC (<i>Use Docetaxel</i>)	SP	
TENIPOSIDE SOLN	SP	
VINBLASTINE SULFATE SOLN	SP	
<i>vincristine sulfate soln</i>	SP	
<i>vinorelbine tartrate soln</i>	SP	
Topoisomerase I Inhibitors		

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Drug Name	Drug Tier	Requirements/Limits
CAMPTOSAR SOLN 100 MG/5ML, 40 MG/2ML (Use Irinotecan HCl)	SP	
CAMPTOSAR SOLN 300 MG/15ML	SP	
HYCAMTIN CAPS OR 0.25 MG, 1 MG	SP	PA
HYCAMTIN SOLR IV 4 MG (Use Topotecan HCl)	SP	PA
<i>irinotecan hcl soln</i>	SP	
IRINOTECAN SOLN	SP	
TOPOTECAN HCL SOLN 4 MG/4ML	SP	
<i>topotecan hcl solr 4 mg</i>	SP	PA
ANTIPARKINSON AGENTS - Drugs to Treat Parkinson's Disease		
Antiparkinson Adjuvants		
<i>carbidopa tabs</i>	1	
LODOSYN TABS (Use Carbidopa)	GP	
Antiparkinson Anticholinergics		
<i>benztropine mesylate soln ij 1 mg/ml</i>	SP	PA
<i>benztropine mesylate tabs or 0.5 mg, 1 mg, 2 mg</i>	1	
COGENTIN SOLN (Use Benztropine Mesylate)	SP	PA
<i>trihexyphenidyl hcl elix</i>	1	
<i>trihexyphenidyl hcl tabs</i>	1	
Antiparkinson COMT Inhibitors		
COMTAN TABS (Use Entacapone)	GP	
<i>entacapone tabs</i>	1	
TASMAR TABS (Use Tolcapone)	GP	
<i>tolcapone tabs</i>	1	
Antiparkinson Dopaminergics		

Drug Name	Drug Tier	Requirements/Limits
<i>amantadine hcl caps</i>	1	
<i>amantadine hcl syrp</i>	1	
<i>amantadine hcl tabs</i>	1	
APOKYN SOLN	SP	PA
<i>bromocriptine mesylate caps</i>	1	
<i>bromocriptine mesylate tabs</i>	1	
<i>carbidopa-levodopa tabs</i>	1	
<i>carbidopa-levodopa tbc</i>	1	
<i>carbidopa-levodopa tbdp</i>	1	
<i>carbidopa-levodopa-entacapone tabs</i>	1	
DUOPA SUSP	SP	
MIRAPEX ER TB24 (Use Pramipexole Dihydrochloride)	GP	
MIRAPEX TABS (Use Pramipexole Dihydrochloride)	GP	
NEUPRO PT24 1 MG/24HR, 3 MG/24HR, 8 MG/24HR	3	
NEUPRO PT24 2 MG/24HR	3	QL(3 ea daily)
NEUPRO PT24 4 MG/24HR, 6 MG/24HR	3	QL(1 ea daily)
PARLODEL CAPS	2	
<i>pramipexole dihydrochloride tabs</i>	1	
<i>pramipexole dihydrochloride tb24</i>	1	
REQUIP TABS (Use Ropinirole Hydrochloride)	GP	
REQUIP XL TB24 (Use Ropinirole Hydrochloride)	GP	
<i>ropinirole hydrochloride tabs</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>ropinirole hydrochloride tb24</i>	1	
RYTARY CPR	3	PA
SINEMET CR TBCR (<i>Use Carbidopa-Levodopa</i>)	GP	
SINEMET TABS (<i>Use Carbidopa-Levodopa</i>)	GP	
STALEVO 100 TABS (<i>Use Carbidopa-Levodopa-Entacapone</i>)	GP	
STALEVO 125 TABS (<i>Use Carbidopa-Levodopa-Entacapone</i>)	GP	
STALEVO 150 TABS (<i>Use Carbidopa-Levodopa-Entacapone</i>)	GP	
STALEVO 200 TABS (<i>Use Carbidopa-Levodopa-Entacapone</i>)	GP	
STALEVO 50 TABS (<i>Use Carbidopa-Levodopa-Entacapone</i>)	GP	
STALEVO 75 TABS (<i>Use Carbidopa-Levodopa-Entacapone</i>)	GP	
Antiparkinson Monoamine Oxidase Inhibitors		
AZILECT TABS	2	
ELDEPRYL CAPS (<i>Use Selegiline HCl</i>)	GP	
<i>selegiline hcl caps</i>	1	
<i>selegiline hcl tabs</i>	1	
ZELAPAR TBDP	3	
ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
Antimanic Agents		
<i>lithium carbonate caps</i>	1	
<i>lithium carbonate tabs</i>	1	
<i>lithium carbonate tbc</i>	1	

Drug Name	Drug Tier	Requirements/Limits
LITHIUM SOLN	3	
LITHOBID TBCR (<i>Use Lithium Carbonate</i>)	3	
Antipsychotics - Misc.		
EQUETRO CP12	3	
GEODON CAPS OR 20 MG, 40 MG, 60 MG, 80 MG (<i>Use Ziprasidone HCl</i>)	GP	
GEODON SOLR IM 20 MG	SP	PA
LATUDA TABS	3	PA
VRAYLAR CAPS	3	PA
VRAYLAR CPPK	3	PA
<i>ziprasidone hcl caps</i>	1	
Benzisoxazoles		
FANAPT TABS	3	PA
FANAPT TITRATION PACK TABS	3	PA
INVEGA SUSTENNA SUSP	SP	PA
INVEGA TB24 (<i>Use Paliperidone</i>)	GP	
INVEGA TRINZA SUSP	SP	PA
<i>paliperidone tb24</i>	1	
RISPERDAL CONSTA SUSR	SP	PA
RISPERDAL M-TAB TBDP (<i>Use Risperidone</i>)	GP	
RISPERDAL SOLN (<i>Use Risperidone</i>)	GP	
RISPERDAL TABS (<i>Use Risperidone</i>)	GP	
<i>risperidone soln</i>	1	
<i>risperidone tabs</i>	1	
<i>risperidone tbdp</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
Butyrophenones		
<i>haloperidol lactate conc or 2 mg/ml</i>	1	
<i>haloperidol tabs</i>	1	
Dibenzapines		
CLOZAPINE ODT TBDP	3	
<i>clozapine tabs</i>	1	
<i>clozapine tbdp</i>	1	
CLOZARIL TABS (Use Clozapine)	GP	
FAZACLO TBDP 100 MG, 25 MG (Use Clozapine)	GP	
FAZACLO TBDP 12.5 MG, 150 MG, 200 MG	3	
<i>loxapine succinate caps</i>	1	
<i>olanzapine solr im 10 mg</i>	SP	PA
<i>olanzapine tabs or 10 mg, 15 mg, 2.5 mg, 20 mg, 5 mg, 7.5 mg</i>	1	
<i>olanzapine tbdp or 10 mg, 15 mg, 20 mg, 5 mg</i>	1	
<i>quetiapine fumarate tabs</i>	1	
SAPHRIS SUBL	3	PA
SEROQUEL TABS (Use Quetiapine Fumarate)	GP	
SEROQUEL XR TB24	3	PA
VERSACLOZ SUSP	3	QL(18 ml daily)
ZYPREXA SOLR IM 10 MG (Use Olanzapine)	SP	PA
ZYPREXA TABS OR 10 MG, 15 MG, 2.5 MG, 20 MG, 5 MG, 7.5 MG (Use Olanzapine)	GP	
ZYPREXA ZYDIS TBDP (Use Olanzapine)	GP	
Dihydroindolones		

Drug Name	Drug Tier	Requirements/Limits
MOLINDONE HYDROCHLORIDE TABS	2	
Phenothiazines		
<i>chlorpromazine hcl tabs or 10 mg, 100 mg, 200 mg, 25 mg, 50 mg</i>	1	
<i>fluphenazine hcl conc or 5 mg/ml</i>	1	
<i>fluphenazine hcl elix or 2.5 mg/5ml</i>	1	
<i>fluphenazine hcl tabs or 1 mg, 10 mg, 2.5 mg, 5 mg</i>	1	
<i>perphenazine tabs</i>	1	
<i>prochlorperazine edisylate soln</i>	SP	PA
<i>prochlorperazine maleate tabs</i>	1	
<i>prochlorperazine supp</i>	1	
<i>thioridazine hcl tabs</i>	1	
<i>trifluoperazine hcl tabs</i>	1	
Quinolinone Derivatives		
ABILIFY DISCMELT TBDP	3	PA
ABILIFY SOLN 1 MG/ML	2	
ABILIFY TABS 10 MG, 15 MG, 2 MG, 20 MG, 30 MG, 5 MG (Use Aripiprazole)	GP	
<i>aripiprazole soln 1 mg/ml</i>	1	
<i>aripiprazole tabs 10 mg, 15 mg, 2 mg, 20 mg, 30 mg, 5 mg</i>	1	
<i>aripiprazole tbdp 10 mg, 15 mg</i>	1	PA
REXULTI TABS	3	PA
Thioxanthenes		
<i>thiothixene caps</i>	1	
ANTISEPTICS & DISINFECTANTS - Drugs to Prevent Bacterial Skin Infections		

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Drug Name	Drug Tier	Requirements/ Limits
Antiseptics & Disinfectants		
<i>formaldehyde soln</i>	1	
ANTIVIRALS - Drugs to Treat Viral Infections		
Antiretrovirals		
<i>abacavir sulfate tabs</i>	1	
<i>abacavir sulfate-lamivudine-zidovudine tabs</i>	1	
APTIVUS CAPS	2	
APTIVUS SOLN	2	
ATRIPLA TABS	2	
COMBIVIR TABS (<i>Use Lamivudine-Zidovudine</i>)	GP	
COMPLERA TABS	2	
CRIXIVAN CAPS	2	
DESCOVY TABS	2	
<i>didanosine cpdr</i>	1	
EDURANT TABS	2	
EMTRIVA CAPS	2	
EMTRIVA SOLN	2	
EPIVIR SOLN (<i>Use Lamivudine</i>)	GP	
EPIVIR TABS (<i>Use Lamivudine</i>)	GP	
EPZICOM TABS	2	
EVOTAZ TABS	2	
FUZEON SOLR	SP	PA
GENVOYA TABS	2	
INTELENCE TABS	2	
INVIRASE CAPS	2	

Drug Name	Drug Tier	Requirements/ Limits
INVIRASE TABS	2	
ISENTRESS CHEW 100 MG	2	PA
ISENTRESS CHEW 25 MG	2	
ISENTRESS PACK 100 MG	2	
ISENTRESS TABS 400 MG	2	
KALETRA SOLN	2	
KALETRA TABS	2	
<i>lamivudine soln</i>	1	
<i>lamivudine tabs</i>	1	
<i>lamivudine-zidovudine tabs</i>	1	
LEXIVA SUSP	2	
LEXIVA TABS	2	
<i>nevirapine susp</i>	1	
<i>nevirapine tabs</i>	1	
<i>nevirapine tb24</i>	1	
NORVIR CAPS	2	
NORVIR SOLN	2	
NORVIR TABS	2	
ODEFSEY TABS	2	
PREZCOBIX TABS	2	
PREZISTA SUSP 100 MG/ML	3	
PREZISTA TABS 150 MG, 600 MG, 75 MG, 800 MG	2	
RESCRIPTOR TABS	2	
RETROVIR CAPS (<i>Use Zidovudine</i>)	GP	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

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Drug Name	Drug Tier	Requirements/ Limits
RETROVIR SYRP (<i>Use Zidovudine</i>)	GP	
REYATAZ CAPS	2	
REYATAZ PACK	2	
SELZENTRY TABS	2	
<i>stavudine caps</i>	1	
<i>stavudine solr</i>	1	
STRIBILD TABS	2	
SUSTIVA CAPS	2	
SUSTIVA TABS	2	
TIVICAY TABS	2	
TRIUMEQ TABS	2	
TRIZIVIR TABS (<i>Use Abacavir Sulfate-Lamivudine-Zidovudine</i>)	GP	
TRUVADA TABS	2	
TYBOST TABS	2	
VIDEX EC CPDR (<i>Use Didanosine</i>)	GP	
VIDEXPEDIATRIC SOLR	2	
VIRACEPT TABS	2	
VIRAMUNE SUSP (<i>Use Nevirapine</i>)	GP	
VIRAMUNE TABS (<i>Use Nevirapine</i>)	GP	
VIRAMUNE XR TB24 (<i>Use Nevirapine</i>)	GP	
VIREAD POWD	2	
VIREAD TABS	2	
VITEKTA TABS	2	
ZERIT CAPS (<i>Use Stavudine</i>)	GP	

Drug Name	Drug Tier	Requirements/ Limits
ZERIT SOLR (<i>Use Stavudine</i>)	GP	
ZIAGEN SOLN 20 MG/ML	2	
ZIAGEN TABS 300 MG (<i>Use Abacavir Sulfate</i>)	GP	
<i>zidovudine caps</i>	1	
<i>zidovudine syrp</i>	1	
<i>zidovudine tabs</i>	1	
CMV Agents		
<i>cidofovir soln</i>	SP	PA
FOSCAVIR SOLN	SP	PA
VALCYTE SOLR 50 MG/ML (<i>Use Valganciclovir HCl</i>)	GP	QL(21 ml daily)
VALCYTE TABS 450 MG (<i>Use Valganciclovir HCl</i>)	GP	
<i>valganciclovir hcl solr 50 mg/ml</i>	1	QL(21 ml daily)
<i>valganciclovir hcl tabs 450 mg</i>	1	
VISTIDE SOLN (<i>Use Cidofovir</i>)	SP	PA
Hepatitis Agents		
<i>adefovir dipivoxil tabs</i>	1	
BARACLUDGE SOLN 0.05 MG/ML	2	
BARACLUDGE TABS 0.5 MG, 1 MG (<i>Use Entecavir</i>)	GP	PA
COPEGUS TABS (<i>Use Ribavirin (Hepatitis C)</i>)	GP	PA
DAKLINZA TABS	SP	PA
<i>entecavir tabs</i>	1	
EPCLUSA TABS	SP	PA
EPIVIR HBV SOLN 5 MG/ML	3	

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Drug Name	Drug Tier	Requirements/ Limits
EPIVIR HBV TABS 100 MG (Use Lamivudine (HBV))	GP	
HARVONI TABS	SP	PA
HEPSERA TABS	2	
INCIVEK TABS	SP	PA
<i>lamivudine (hbv) tabs</i>	1	
MODERIBA MISC	2	PA
MODERIBA MISC	3	PA
OLYSIO CAPS	SP	PA
PEG-INTRON KIT	SP	PA
PEG-INTRON REDIPEN KIT	SP	PA
PEG-INTRON REDIPEN PAK 4 KIT	SP	PA
PEGASYS PROCLICK SOLN	SP	PA
PEGASYS SOLN	SP	PA
PEGINTRON KIT	SP	PA
REBETOL CAPS 200 MG (Use Ribavirin (Hepatitis C))	GP	PA
REBETOL SOLN 40 MG/ML	2	PA
RIBASPHERE RIBAPAK TABS	3	PA
RIBASPHERE RIBAPAK TABS 400 MG, 600 MG	2	PA
RIBASPHERE TABS	2	PA
RIBATAB MISC	2	PA
RIBATAB TABS	2	PA
<i>ribavirin (hepatitis c) caps</i>	1	PA
<i>ribavirin (hepatitis c) tabs</i>	1	PA

Drug Name	Drug Tier	Requirements/ Limits
SOVALDI TABS	SP	PA
TECHNIVIE TABS	SP	PA
TYZEKA TABS	3	ST
VICTRELIS CAPS	SP	PA
VIEKIRA PAK TBPK	SP	PA
VIEKIRA XR TB24	SP	PA
ZEPATIER TABS	SP	PA
Herpes Agents		
<i>acyclovir caps</i>	1	
<i>acyclovir susp</i>	1	
<i>acyclovir tabs</i>	1	
<i>famciclovir tabs</i>	1	
FAMVIR TABS (Use Famciclovir)	GP	
<i>valacyclovir hcl tabs</i>	1	
VALTREX TABS (Use Valacyclovir HCl)	GP	
ZOVIRAX CAPS OR 200 MG (Use Acyclovir)	GP	
ZOVIRAX SUSP OR 200 MG/5ML (Use Acyclovir)	GP	
ZOVIRAX TABS OR 400 MG, 800 MG (Use Acyclovir)	GP	
Influenza Agents		
FLUMADINE TABS (Use Rimantadine Hydrochloride)	GP	
RELENZA DISKHALER AEPB	3	Limit 20 per month; QL(0.67 ea daily)
<i>rimantadine hydrochloride tabs</i>	1	
TAMIFLU CAPS 30 MG, 45 MG	3	QL(10 ea per fill retail, 10 ea per fill mail); AL

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Drug Name	Drug Tier	Requirements/ Limits
TAMIFLU CAPS 75 MG	3	
TAMIFLU SUSR 6 MG/ML	3	QL(75 ml daily,5 day(s) limit); AL
Respiratory Syncytial Virus (RSV) Agents		
VIRAZOLE SOLR	3	
ASSORTED CLASSES - Miscellaneous Drugs		
Assorted Classes		
Compounded Drug	3	PA
Chelating Agents		
CUPRIMINE CAPS	2	PA
DEPEN TITRATABS TABS	2	
SYPRINE CAPS	SP	PA
Enzymes		
XIAFLEX SOLR	SP	PA
Immunomodulators		
REVLIMID CAPS	SP	PA
THALOMID CAPS	SP	
Immunosuppressive Agents		
ASTAGRAF XL CP24	3	ST
ATGAM INJ	SP	PA
AZASAN TABS	3	
AZATHIOPRINE SOLR IJ 100 MG	SP	PA
<i>azathioprine tabs or 50 mg</i>	1	
CELLCEPT CAPS (<i>Use Mycophenolate Mofetil</i>)	GP	
CELLCEPT INTRAVENOUS SOLR	SP	PA
CELLCEPT SUSR (<i>Use Mycophenolate Mofetil</i>)	GP	

Drug Name	Drug Tier	Requirements/ Limits
CELLCEPT TABS (<i>Use Mycophenolate Mofetil</i>)	GP	
<i>cyclosporine caps or 100 mg, 25 mg</i>	1	
<i>cyclosporine modified (for microemulsion) caps</i>	1	
<i>cyclosporine modified (for microemulsion) soln</i>	1	
<i>cyclosporine soln iv 50 mg/ml</i>	SP	PA
ENVARUSUS XR TB24	3	ST
IMURAN TABS (<i>Use Azathioprine</i>)	GP	
<i>mycophenolate mofetil caps</i>	1	
<i>mycophenolate mofetil susr</i>	1	
<i>mycophenolate mofetil tabs</i>	1	
<i>mycophenolate sodium tbec</i>	1	
MYFORTIC TBEC (<i>Use Mycophenolate Sodium</i>)	GP	
NEORAL CAPS (<i>Use Cyclosporine Modified (For Microemulsion)</i>)	3	
NEORAL SOLN (<i>Use Cyclosporine Modified (For Microemulsion)</i>)	3	
NULOJIX SOLR	SP	PA
PROGRAF CAPS OR 0.5 MG, 1 MG, 5 MG (<i>Use Tacrolimus</i>)	3	
RAPAMUNE SOLN 1 MG/ML	2	
RAPAMUNE TABS 0.5 MG, 1 MG, 2 MG (<i>Use Sirolimus</i>)	GP	
SANDIMMUNE CAPS OR 100 MG, 25 MG (<i>Use Cyclosporine</i>)	GP	
SANDIMMUNE SOLN IV 50 MG/ML (<i>Use Cyclosporine</i>)	SP	PA

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Drug Name	Drug Tier	Requirements/Limits
SANDIMMUNE SOLN OR 100 MG/ML	2	
SIMULECT SOLR	SP	PA
<i>sirolimus tabs</i>	1	
<i>tacrolimus caps</i>	1	
THYMOGLOBULIN SOLR	SP	PA
ZORTRESS TABS	2	
Irrigation Solutions		
<i>irrigation solutions, physiological soln</i>	1	
<i>lactated ringer's (irrigation) soln</i>	1	
<i>ringer's irrigation soln</i>	1	
<i>water for irrigation, sterile soln</i>	1	
Lymphatic Agents		
SYLVANT SOLR	SP	
Potassium Removing Agents		
KAYEXALATE POWD (Use Sodium Polystyrene Sulfonate)	GP	
<i>sodium polystyrene sulfonate powd</i>	1	
<i>sodium polystyrene sulfonate susp</i>	1	
VELTASSA PACK	3	ST
Systemic Lupus Erythematosus Agents		
BENLYSTA SOLR	SP	PA
BETA BLOCKERS - Drugs to Treat High Blood Pressure		
Alpha-Beta Blockers		
<i>carvedilol tabs 12.5 mg, 25 mg, 6.25 mg</i>	1	
<i>carvedilol tabs 3.125 mg</i>	1	QL(2 ea daily)
COREG CR CP24	3	

Drug Name	Drug Tier	Requirements/Limits
COREG TABS 12.5 MG, 25 MG, 6.25 MG (Use Carvedilol)	GP	
COREG TABS 3.125 MG (Use Carvedilol)	GP	QL(2 ea daily)
<i>labetalol hcl tabs or 100 mg, 200 mg, 300 mg</i>	1	
TRANDATE TABS (Use Labetalol HCl)	GP	
Beta Blockers Cardio-Selective		
<i>acebutolol hcl caps</i>	1	
<i>atenolol tabs</i>	1	
<i>betaxolol hcl tabs</i>	1	
<i>bisoprolol fumarate tabs</i>	1	QL(1 ea daily)
BYSTOLIC TABS	3	
KERLONE TABS (Use Betaxolol HCl)	GP	
LOPRESSOR TABS OR 100 MG, 50 MG (Use Metoprolol Tartrate)	GP	
<i>metoprolol succinate tb24</i>	1	
<i>metoprolol tartrate tabs or 100 mg, 25 mg, 50 mg</i>	1	
METOPROLOL TARTRATE TABS OR 37.5 MG, 75 MG	3	PA
SECTRAL CAPS (Use Acebutolol HCl)	GP	
TENORMIN TABS (Use Atenolol)	GP	
TOPROL XL TB24 (Use Metoprolol Succinate)	GP	
ZEBETA TABS (Use Bisoprolol Fumarate)	GP	QL(1 ea daily)
Beta Blockers Non-Selective		
BETAPACE AF TABS (Use Sotalol HCl (AFIB/AFL))	GP	
BETAPACE TABS (Use Sotalol HCl)	GP	

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Drug Name	Drug Tier	Requirements/Limits
CORGARD TABS (<i>Use Nadolol</i>)	GP	
HEMANGEOL SOLN	3	AL
INDERAL LA CP24 (<i>Use Propranolol HCl</i>)	GP	
INDERAL XL CP24	3	
INNOPRAN XL CP24	3	
LEVATOL TABS	2	
<i>nadolol tabs</i>	1	
<i>pindolol tabs</i>	1	
<i>propranolol hcl cp24 or 120 mg, 160 mg, 60 mg, 80 mg</i>	1	
<i>propranolol hcl soln or 20 mg/5ml, 40 mg/5ml</i>	1	
<i>propranolol hcl tabs or 10 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>	1	
<i>sotalol hcl (afib/af) tabs</i>	1	
<i>sotalol hcl tabs</i>	1	
SOTYLIZE SOLN	3	
<i>timolol maleate tabs</i>	1	QL(2 ea daily)
BIOLOGICALS MISC - Drugs to Treat Low Enzymes		
Allergenic Extracts		
GRASTEK SUBL	3	PA
ORALAIR ADULT SAMPLE KIT SUBL	3	PA
ORALAIR ADULT STARTER PACK SUBL	3	PA
ORALAIR CHILDREN/ADOLESCENT S SAMPLE KIT THPK	3	PA
ORALAIR CHILDREN/ADOLESCENT S STARTER PACK SUBL	3	PA
ORALAIR SUBL	3	PA

Drug Name	Drug Tier	Requirements/Limits
RAGWITEK SUBL	3	PA
Biologicals Misc		
ADAGEN SOLN	SP	PA
CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure		
Calcium Channel Blockers		
ADALAT CC TB24 30 MG, 60 MG (<i>Use Nifedipine</i>)	GP	
ADALAT CC TB24 90 MG (<i>Use Nifedipine</i>)	GP	QL(1 ea daily)
<i>amlodipine besylate tabs</i>	1	QL(2 ea daily)
CALAN SR TBCR (<i>Use Verapamil HCl</i>)	GP	
CALAN TABS (<i>Use Verapamil HCl</i>)	GP	
CARDIZEM CD CP24 (<i>Use Diltiazem HCl Coated Beads</i>)	GP	QL(1 ea daily)
CARDIZEM LA TB24 120 MG	2	
CARDIZEM LA TB24 180 MG, 240 MG, 300 MG, 360 MG, 420 MG (<i>Use Diltiazem HCl Coated Beads</i>)	GP	
CARDIZEM TABS (<i>Use Diltiazem HCl</i>)	GP	
<i>diltiazem hcl coated beads cp24 120 mg, 180 mg, 240 mg, 300 mg, 360 mg</i>	1	QL(1 ea daily)
<i>diltiazem hcl coated beads tb24 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1	
<i>diltiazem hcl cp12 or 120 mg, 60 mg, 90 mg</i>	1	
<i>diltiazem hcl cp24 or 120 mg, 180 mg, 240 mg</i>	1	
<i>diltiazem hcl extended release beads cp24</i>	1	
<i>diltiazem hcl tabs or 120 mg, 30 mg, 60 mg, 90 mg</i>	1	
<i>felodipine tb24</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>isradipine caps</i>	1	
<i>nicardipine hcl caps or 20 mg, 30 mg</i>	1	
<i>nifedipine caps 10 mg, 20 mg</i>	1	
<i>nifedipine tb24 30 mg, 60 mg</i>	1	
<i>nifedipine tb24 30 mg, 60 mg, 90 mg</i>	1	QL(1 ea daily)
<i>nimodipine caps</i>	1	
<i>nisoldipine tb24</i>	1	
NORVASC TABS (Use Amlodipine Besylate)	GP	QL(2 ea daily)
NYMALIZE SOLN	3	
PROCARDIA CAPS (Use Nifedipine)	GP	
PROCARDIA XL TB24 (Use Nifedipine)	GP	QL(1 ea daily)
SULAR TB24 (Use Nisoldipine)	GP	
THIAZAC CP24 (Use Diltiazem HCl Extended Release Beads)	GP	
<i>verapamil hcl cp24 or 100 mg, 120 mg, 180 mg, 200 mg, 240 mg, 300 mg, 360 mg</i>	1	
<i>verapamil hcl tabs or 120 mg, 40 mg, 80 mg</i>	1	
<i>verapamil hcl tbcr or 120 mg, 180 mg, 240 mg</i>	1	
VERELAN CP24 (Use Verapamil HCl)	GP	
VERELAN PM CP24 (Use Verapamil HCl)	GP	
CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm		
Cardiac Glycosides		
<i>digoxin soln or 0.05 mg/ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>digoxin tabs or 0.125 mg, 0.25 mg, 125 mcg, 250 mcg</i>	1	
LANOXIN TABS OR 125 MCG, 250 MCG (Use Digoxin)	3	
LANOXIN TABS OR 187.5 MCG, 62.5 MCG	3	
CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions		
Cardiovascular Agents Misc. - Combinations		
<i>amlodipine besylate-atorvastatin calcium tabs</i>	1	
BIDIL TABS	3	
CADUET TABS (Use Amlodipine Besylate-Atorvastatin Calcium)	GP	
ENTRESTO TABS	3	PA
Impotence Agents		
CIALIS TABS 2.5 MG, 5 MG	3	PA
Peripheral Vasodilators		
<i>isoxsuprine hcl tabs 10 mg</i>	1	
ISOXSUPRINE HCL TABS 20 MG	3	
Prostaglandin Vasodilators		
<i>epoprostenol sodium solr</i>	SP	PA
FLOLAN SOLR (Use Epoprostenol Sodium)	SP	PA
ORENITRAM TBCR	SP	PA
REMODULIN SOLN	SP	PA
TYVASO REFILL SOLN	SP	PA
TYVASO SOLN	SP	PA
TYVASO STARTER SOLN	SP	PA
VELETRI SOLR	SP	PA

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Drug Name	Drug Tier	Requirements/Limits
VENTAVIS SOLN	SP	PA
Pulmonary Hypertension - Endothelin Receptor		
LETAIRIS TABS	SP	
OPSUMIT TABS	SP	PA
TRACLEER TABS	SP	
Pulmonary Hypertension - Phosphodiesterase		
ADCIRCA TABS	SP	PA
REVATIO SOLN IV 10 MG/12.5ML (Use Sildenafil Citrate (Pulmonary Hypertension))	SP	PA
REVATIO SUSR OR 10 MG/ML	SP	PA
REVATIO TABS OR 20 MG (Use Sildenafil Citrate (Pulmonary Hypertension))	SP	PA
sildenafil citrate (pulmonary hypertension) soln	SP	PA
sildenafil citrate (pulmonary hypertension) tabs	SP	PA
Pulmonary Hypertension - Prostacyclin Receptor		
UPTRAVI TABS	SP	PA
UPTRAVI TBPk	SP	PA
Pulmonary Hypertension - Sol Guanylate Cyclase		
ADEMPAS TABS	SP	PA
Sinus Node Inhibitors		
CORLANOR TABS	3	ST
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporins - 1st Generation		
cefadroxil caps	1	
cefadroxil susr	1	
cefadroxil tabs	1	

Drug Name	Drug Tier	Requirements/Limits
CEFAZOLIN SODIUM SOLN IV 1GM-5%	SP	PA
cefazolin sodium solr ij 1 gm, 10 gm, 20 gm, 500 mg	SP	PA
CEFAZOLIN SODIUM SOLR IJ 20 GM	SP	PA
cephalexin caps	1	
cephalexin susr	1	
cephalexin tabs	1	
KEFLEX CAPS (Use Cephalexin)	GP	
Cephalosporins - 2nd Generation		
cefaclor caps 250 mg, 500 mg	1	
CEFACLOR ER TB12	3	
cefaclor susr 125 mg/5ml, 375 mg/5ml	1	
CEFACLOR SUSR 250 MG/5ML	2	
CEFOTAN SOLR (Use Cefotetan Disodium)	SP	PA
cefotetan disodium solr	SP	PA
CEFOTETAN SOLR	SP	PA
cefoxitin sodium solr iv 1 gm, 2 gm	SP	PA
cefprozil susr	1	
cefprozil tabs	1	
CEFTIN SUSR 125 MG/5ML, 250 MG/5ML	2	
CEFTIN TABS 250 MG, 500 MG (Use Cefuroxime Axetil)	GP	
cefuroxime axetil tabs	1	
cefuroxime sodium solr ij 7.5 gm	SP	PA
ZINACEF SOLR IJ 7.5 GM (Use Cefuroxime Sodium)	SP	PA
Cephalosporins - 3rd Generation		

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Drug Name	Drug Tier	Requirements/ Limits
CEDAX CAPS	3	
CEDAX SUSR	3	
<i>cefdinir caps</i>	1	
<i>cefdinir susr</i>	1	
<i>cefditoren pivoxil tabs</i>	1	
<i>cefixime susr</i>	1	
<i>cefpodoxime proxetil susr</i>	1	
<i>cefpodoxime proxetil tabs</i>	1	
<i>ceftazidime solr ij 1 gm, 2 gm, 6 gm</i>	SP	PA
CEFTIBUTEN CAPS	3	
CEFTIBUTEN SUSR	3	
<i>ceftriaxone sodium solr ij 250 mg, 500 mg</i>	SP	PA
<i>ceftriaxone sodium solr iv 1 gm</i>	SP	PA
FORTAZ SOLR IJ 1 GM, 2 GM, 6 GM (<i>Use Ceftazidime</i>)	SP	PA
SPECTRACEF TABS (<i>Use Cefditoren Pivoxil</i>)	GP	
SUPRAX CAPS 400 MG	3	
SUPRAX CHEW 100 MG, 200 MG	3	
SUPRAX SUSR 100 MG/5ML, 200 MG/5ML (<i>Use Cefixime</i>)	GP	
SUPRAX SUSR 500 MG/5ML	3	
Cephalosporins - 4th Generation		
<i>cefepime hcl solr</i>	SP	PA
CEFEPIME SOLN	SP	PA
CEFEPIME SOLR	SP	PA

Drug Name	Drug Tier	Requirements/ Limits
CEFEPIME/DEXTROSE SOLR	SP	PA
MAXIPIME SOLR IJ 1 GM, 2 GM (<i>Use Cefepime HCl</i>)	SP	PA
Cephalosporins - 5th Generation		
TEFLARO SOLR	SP	PA
CHEMICALS		
Bulk Chemicals - H's		
HEPARIN SODIUM POWD	SP	PA
CONTRACEPTIVES - Drugs to Prevent Pregnancy		
Combination Contraceptives - Oral		
BEYAZ TABS	PV	QL(1 ea daily); PV
BREVICON-28 TABS (<i>Use Norethindrone & Eth Estradiol</i>)	GP	PV
CYCLESSA TABS (<i>Use Desogestrel-Ethinyl Estradiol (Triphasic)</i>)	GP	PV
DESOGEN TABS (<i>Use Desogestrel & Ethinyl Estradiol</i>)	GP	PV
<i>desogestrel & ethinyl estradiol tabs</i>	PV	PV
<i>desogestrel-ethinyl estradiol (biphasic) tabs</i>	PV	PV
<i>desogestrel-ethinyl estradiol (triphasic) tabs</i>	PV	PV
<i>drospirenone-ethinyl estradiol tabs</i>	PV	QL(1 ea daily); PV
ESTROSTEP FE TABS (<i>Use Norethindrone Acetate-Ethinyl Estradiol-Fe</i>)	GP	PV
<i>ethynodiol diacet & eth estrad tabs</i>	PV	PV
FEMCON FE CHEW (<i>Use Norethindrone & Ethinyl Estradiol-Fe</i>)	GP	PV
GENERESS FE CHEW (<i>Use Norethindrone & Ethinyl Estradiol-Fe</i>)	GP	QL(1 ea daily); PV

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Drug Name	Drug Tier	Requirements/Limits
<i>levonorgestrel & eth estradiol tabs</i>	PV	PV
<i>levonorgestrel-eth estradiol (triphasic) tabs</i>	PV	PV
<i>levonorgestrel-ethinyl estradiol (91-day) tabs</i>	PV	QL(1 ea daily); PV
<i>levonorgestrel-ethinyl estradiol (continuous) tabs</i>	PV	PV
LO LOESTRIN FE TABS	PV	QL(1 ea daily); PV
LOESTRIN 1.5/30-21 TABS (Use Norethindrone Acet & Eth Estra)	GP	PV
LOESTRIN 1/20-21 TABS (Use Norethindrone Acet & Eth Estra)	GP	PV
LOESTRIN FE 1.5/30 TABS (Use Norethin Acet & Estrad-Fe)	GP	PV
LOESTRIN FE 1/20 TABS (Use Norethin Acet & Estrad-Fe)	GP	PV
LOSEASONIQUE TABS (Use Levonorgestrel-Ethinyl Estradiol (91-Day))	GP	QL(1 ea daily); PV
MINASTRIN 24 FE CHEW	PV	PV
MIRCETTE TABS (Use Desogestrel-Ethinyl Estradiol (Biphasic))	GP	PV
MODICON TABS (Use Norethindrone & Eth Estradiol)	GP	PV
NATAZIA TABS	PV	QL(1 ea daily); PV
NECON 1/50-28 TABS	PV	PV
NECON 10/11-28 TABS	PV	PV
<i>norethin acet & estrad-fe tabs</i>	PV	PV
<i>norethindrone & eth estradiol tabs</i>	PV	PV
<i>norethindrone & ethinyl estradiol-fe chew 0.4mg-35mcg</i>	PV	PV

Drug Name	Drug Tier	Requirements/Limits
<i>norethindrone & ethinyl estradiol-fe chew 75mg-0.8mg-25mcg</i>	PV	QL(1 ea daily); PV
<i>norethindrone acet & eth estra tabs</i>	PV	PV
<i>norethindrone acetate-ethinyl estradiol-fe tabs</i>	PV	PV
<i>norethindrone-eth estradiol (triphasic) tabs</i>	PV	QL(1 ea daily); PV
<i>norethindrone-eth estradiol (triphasic) tabs</i>	PV	PV
<i>norgestimate-ethinyl estradiol (triphasic) tabs</i>	PV	PV
<i>norgestimate-ethinyl estradiol (triphasic) tabs</i>	PV	QL(1 ea daily); PV
<i>norgestimate-ethinyl estradiol tabs</i>	PV	QL(1 ea daily); PV
<i>norgestrel & ethinyl estradiol tabs</i>	PV	PV
NORINYL 1+35 TABS (Use Norethindrone & Eth Estradiol)	GP	PV
NORINYL 1+50 TABS	PV	PV
ORTHO TRI-CYCLEN LO TABS (Use Norgestimate-Ethinyl Estradiol (Triphasic))	GP	PV
ORTHO TRI-CYCLEN TABS (Use Norgestimate-Ethinyl Estradiol (Triphasic))	GP	QL(1 ea daily); PV
ORTHO-CEPT TABS (Use Desogestrel & Ethinyl Estradiol)	GP	PV
ORTHO-CYCLEN TABS (Use Norgestimate-Ethinyl Estradiol)	GP	QL(1 ea daily); PV
ORTHO-NOVUM 1/35 TABS (Use Norethindrone & Eth Estradiol)	GP	PV
ORTHO-NOVUM 7/7/7 TABS (Use Norethindrone-Eth Estradiol (Triphasic))	GP	QL(1 ea daily); PV
OVCON-35 TABS (Use Norethindrone & Eth Estradiol)	GP	PV

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Drug Name	Drug Tier	Requirements/Limits
QUARTETTE TABS	PV	QL(91 ea per fill retail,91 ea per 91 days retail); PV
SAFYRAL TABS	PV	QL(1 ea daily); PV
SEASONIQUE TABS (<i>Use Levonorgestrel-Ethinyl Estradiol (91-Day)</i>)	GP	QL(1 ea daily); PV
TRI-NORINYL 28 TABS (<i>Use Norethindrone-Eth Estradiol (Triphasic)</i>)	GP	PV
YASMIN 28 TABS (<i>Use Drospirenone-Ethinyl Estradiol</i>)	GP	QL(1 ea daily); PV
YAZ TABS (<i>Use Drospirenone-Ethinyl Estradiol</i>)	GP	QL(1 ea daily); PV
Combination Contraceptives - Transdermal		
ORTHO EVRA PTWK (<i>Use Norelgestromin-Ethinyl Estradiol</i>)	GP	PV
XULANE PTWK	PV	PV
Combination Contraceptives - Vaginal		
NUVARING RING	PV	Limit 1 per month;QL(0.04 ea daily); PV
Copper Contraceptives - IUD		
PARAGARD INTRAUTERINE COPPER CONTRACEPTIVE T380A IUD	PV	PV
Emergency Contraceptives		
ELLA TABS	PV	PV
<i>levonorgestrel (emergency oc) tabs</i>	PV	RX/OTC; PV
LEVONORGESTREL TABS	PV	PV
PLAN B ONE-STEP TABS (<i>Use Levonorgestrel (Emergency OC)</i>)	GP	RX/OTC; PV
Progestin Contraceptives - IUD		

Drug Name	Drug Tier	Requirements/Limits
LILETTA IUD	PV	QL(1 ea per 365 days retail); PV
MIRENA IUD	PV	PV
SKYLA IUD	PV	PV
Progestin Contraceptives - Implants		
IMPLANON IMPL	PV	PV
NEXPLANON IMPL	PV	PV
Progestin Contraceptives - Injectable		
DEPO-PROVERA CONTRACEPTIVE SUSP (<i>Use Medroxyprogesterone Acetate (Contraceptive)</i>)	GP	QL(1 ml per 90 days retail); PV
DEPO-SUBQ PROVERA 104 SUSP	PV	PV
<i>medroxyprogesterone acetate (contraceptive) susp</i>	PV	QL(1 ml per 90 days retail); PV
Progestin Contraceptives - Oral		
NOR-QD TABS (<i>Use Norethindrone (Contraceptive)</i>)	GP	QL(1 ea daily); PV
<i>norethindrone (contraceptive) tabs</i>	PV	QL(1 ea daily); PV
ORTHO MICRONOR TABS (<i>Use Norethindrone (Contraceptive)</i>)	GP	QL(1 ea daily); PV
CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions		
Glucocorticosteroids		
A-HYDROCORT SOLR	SP	PA
<i>budesonide cpep</i>	1	
CORTEF TABS (<i>Use Hydrocortisone</i>)	GP	
<i>cortisone acetate tabs</i>	1	
<i>dexamethasone elix</i>	1	
DEXAMETHASONE INTENSOL CONC	2	

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Drug Name	Drug Tier	Requirements/Limits
DEXAMETHASONE SODIUM PHOSPHATE SOLN IJ 10 MG/ML	SP	PA
<i>dexamethasone sodium phosphate soln ij 100 mg/10ml, 120 mg/30ml, 20 mg/5ml, 4 mg/ml</i>	SP	PA
<i>dexamethasone soln</i>	1	
<i>dexamethasone tabs</i>	1	
DEXPAK 10 DAY TBPk	3	
DEXPAK 13 DAY TBPk	3	
DEXPAK 6 DAY TBPk	3	
ENTOCORT EC CPEP (Use Budesonide)	GP	
<i>hydrocortisone tabs</i>	1	
MEDROL DOSEPAK TBPk (Use Methylprednisolone)	GP	
MEDROL TABS 16 MG, 32 MG, 4 MG, 8 MG (Use Methylprednisolone)	GP	
MEDROL TABS 2 MG	2	
<i>methylprednisolone tabs</i>	1	
<i>methylprednisolone tbpk</i>	1	
MILLIPRED DP TBPk	3	
MILLIPRED SOLN 10 MG/5ML	3	
MILLIPRED TABS 5 MG	2	
ORAPRED ODT TBDP (Use Prednisolone Sodium Phosphate)	GP	
PEDIAPRED SOLN (Use Prednisolone Sodium Phosphate)	GP	
<i>prednisolone sodium phosphate soln or 15 mg/5ml, 5 mg/5ml, 6.7 mg/5ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
PREDNISOLONE SODIUM PHOSPHATE SOLN OR 25 MG/5ML	3	
<i>prednisolone sodium phosphate tbdp or 10 mg, 15 mg, 30 mg</i>	1	
<i>prednisolone soln</i>	1	
<i>prednisolone syrp</i>	1	
PREDNISON INTENSOL CONC	2	
<i>prednisone soln</i>	1	
<i>prednisone tabs</i>	1	
<i>prednisone tbpk</i>	1	
RAYOS TBEC	3	PA
SOLU-CORTEF SOLR	SP	PA
UCERIS TB24	3	PA
VERIPRED 20 SOLN	3	
Mineralocorticoids		
<i>fludrocortisone acetate tabs</i>	1	
COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms		
Antitussives		
<i>benzonatate caps 100 mg, 200 mg</i>	1	
BENZONATATE CAPS 150 MG	3	
<i>hydrocodone w/ homatropine syrp</i>	1	
<i>hydrocodone w/ homatropine tabs</i>	1	
TESSALON PERLES CAPS (Use Benzonatate)	GP	
ZONATUSS CAPS (Use Benzonatate)	GP	
Cough/Cold/Allergy Combinations		

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Drug Name	Drug Tier	Requirements/ Limits
CLARINEX-D 12 HOUR TB12	3	
DECON-G LIQD	3	
DOMETUSS-DMX LIQD	3	RX/OTC
<i>guaifenesin-codeine liqd 100mg/5ml-10mg/5ml</i>	1	
<i>guaifenesin-codeine soln 100mg/5ml-10mg/5ml</i>	1	
<i>guaifenesin-codeine syrp 100mg/5ml-10mg/5ml</i>	1	
HYCOFENIX SOLN	3	PA
<i>hydrocodone polistirex-chlorpheniramine polistirex suer</i>	1	
MUCINEX D TB12 (Use <i>Pseudoephedrine-Guaifenesin</i>)	GP	
NEOTUSS PLUS LIQD	3	
<i>phenyleph-promethazine w/ cod syrp</i>	1	
<i>phenylephrine w/ dm-gg liqd 30mg/5ml-200mg/5ml-10mg/5ml</i>	1	RX/OTC
<i>phenylephrine-chlorphen-dm liqd 3mg/ml-1mg/ml-3.5mg/ml</i>	1	
PHENYLHISTINE DH LIQD	2	
PRO-RED AC SYRP	3	
<i>promethazine & phenylephrine syrp</i>	1	
<i>promethazine w/codeine syrp</i>	1	
<i>promethazine-dm syrp</i>	1	
PROMETHAZINE/PHENYL EPHRINE SYRP	2	
<i>pseudoephed-cpm w/ hydrocod soln</i>	1	
<i>pseudoephedrine w/ codeine-gg soln</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
<i>pseudoephedrine-guaifenesin tb12 60mg-600mg</i>	1	
RELHIST CHEW	3	
RESCON-JR TB12	3	
REZIRA SOLN	3	
SEMPREX-D CAPS	3	
TGQ 30PSE/150GFN/15DM SYRP	3	
TGQ 30PSE/3BRM/15DM SYRP	3	
TUSNEL CAPS 2MG-15MG-200MG	3	
TUSSICAPS CP12	3	
TUSSIONEX PENNKINETIC EXTENDED RELEASE SUER (Use <i>Hydrocodone Polistirex-Chlorpheniramine Polistirex</i>)	GP	
TUZISTRA XR SUER	3	PA
VITUZ SOLN	3	PA
ZUTRIPRO SOLN (Use <i>Pseudoephed-CPM w/ Hydrocod</i>)	GP	
Misc. Respiratory Inhalants		
HYPER-SAL NEBU (Use <i>Sodium Chloride (Inhalant)</i>)	GP	
HYPERSAL NEBU 3.5 %	3	
HYPERSAL NEBU 7 % (Use <i>Sodium Chloride (Inhalant)</i>)	GP	
NEBUSAL NEBU	3	
<i>sodium chloride (inhalant) nebu</i>	1	
Mucolytics		
<i>acetylcysteine soln</i>	1	

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Drug Name	Drug Tier	Requirements/ Limits
DERMATOLOGICALS - Drugs to Treat Skin Conditions		
Acne Products		
ABSORICA CAPS 10 MG, 20 MG, 25 MG, 35 MG, 40 MG	3	PA
ABSORICA CAPS 30 MG	3	
ACANYA GEL	3	PA
ACZONE GEL 5 %	3	PA
ACZONE GEL 7.5 %	3	PA; QL(2 gm daily)
<i>adapalene crea 0.1 %</i>	1	Limit 45gms per month;QL(1.5 gm daily)
<i>adapalene gel 0.1 %</i>	1	Limit 45gms per month;QL(1.5 gm daily)
<i>adapalene gel 0.3 %</i>	1	
ADAPALENE LOTN 0.1 %	3	
AKNE-MYCIN OINT	2	
ATRALIN GEL (Use <i>Tretinoin</i>)	GP	
AVAR FOAM	3	PA
AVAR LS CLEANSER LIQD (Use <i>Sulfacetamide Sodium w/ Sulfur</i>)	GP	
AVAR LS FOAM	3	PA
AVAR LS PADS	3	PA
AVAR PADS	3	PA
AVAR-E LS CREA	3	
AZELEX CREA	2	
BENZACLIN GEL (Use <i>Clindamycin Phosphate-Benzoyl Peroxide</i>)	GP	

Drug Name	Drug Tier	Requirements/ Limits
BENZACLIN WITH PUMP GEL (Use <i>Clindamycin Phosphate-Benzoyl Peroxide</i>)	GP	
BENZAMYCIN GEL (Use <i>Benzoyl Peroxide-Erythromycin</i>)	GP	
<i>benzoyl peroxide liqd 7 %</i>	1	
<i>benzoyl peroxide-erythromycin gel</i>	1	
BP CLEANSING WASH EMUL	2	
CLARIFOAM EF FOAM (Use <i>Sulfacetamide Sodium w/ Sulfur</i>)	GP	
CLEOCIN-T GEL (Use <i>Clindamycin Phosphate (Topical)</i>)	GP	
CLEOCIN-T LOTN (Use <i>Clindamycin Phosphate (Topical)</i>)	GP	
CLEOCIN-T SOLN (Use <i>Clindamycin Phosphate (Topical)</i>)	GP	
CLEOCIN-T SWAB (Use <i>Clindamycin Phosphate (Topical)</i>)	GP	
CLINDACIN ETZ KIT	3	
CLINDACIN PAC KIT	3	
<i>clindamycin phosphate (topical) foam</i>	1	
<i>clindamycin phosphate (topical) gel</i>	1	
<i>clindamycin phosphate (topical) lotn</i>	1	
<i>clindamycin phosphate (topical) soln</i>	1	
<i>clindamycin phosphate (topical) swab</i>	1	
<i>clindamycin phosphate-benzoyl peroxide (refrigerate) gel</i>	1	
<i>clindamycin phosphate-benzoyl peroxide gel</i>	1	

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Drug Name	Drug Tier	Requirements/ Limits
<i>clindamycin phosphate-tretinoin gel</i>	1	
DIFFERIN CREA 0.1 % (Use Adapalene)	GP	Limit 45gms per month; QL(1.5 gm daily)
DIFFERIN GEL 0.1 % (Use Adapalene)	GP	Limit 45gms per month; QL(1.5 gm daily)
DIFFERIN GEL 0.3 % (Use Adapalene)	GP	
DIFFERIN LOTN 0.1 %	3	
DUAC GEL (Use Clindamycin Phosphate-Benzoyl Peroxide (Refrigerate))	GP	
EPIDUO GEL	3	
<i>erythromycin (acne aid) gel</i>	1	
<i>erythromycin (acne aid) pads</i>	1	
<i>erythromycin (acne aid) soln</i>	1	
EVOCLIN FOAM (Use Clindamycin Phosphate (Topical))	GP	
FABIOR FOAM	3	Limit 50gms per month; QL(1.67 gm daily); AL
<i>isotretinoin caps 10 mg, 20 mg, 30 mg, 40 mg</i>	1	
<i>isotretinoin caps 30 mg</i>	3	
KLARON LOTN (Use Sulfacetamide Sodium (Acne))	GP	
PLEXION CLEANSER LIQD (Use Sulfacetamide Sodium w/ Sulfur)	GP	PA
PLEXION CLEANSING CLOTHS PADS	3	PA
PLEXION CREA (Use Sulfacetamide Sodium w/ Sulfur)	GP	PA

Drug Name	Drug Tier	Requirements/ Limits
PLEXION LOTN (Use Sulfacetamide Sodium w/ Sulfur)	GP	
RETIN-A CREA (Use Tretinoin)	GP	AL
RETIN-A GEL (Use Tretinoin)	GP	AL
RETIN-A MICRO GEL (Use Tretinoin Microsphere)	GP	AL
RETIN-A MICRO PUMP GEL 0.04 %, 0.1 % (Use Tretinoin Microsphere)	GP	AL
RIAX FOAM	3	
SODIUM SULFACETAMIDE/SULFUR CLEANSER IN UREA EMUL	3	
SODIUM SULFACETAMIDE/SULFUR SUSP	3	
SSS 10-5 FOAM	2	
<i>sulfacetamide sodium (acne) lotn</i>	1	
<i>sulfacetamide sodium (acne) susp</i>	1	
<i>sulfacetamide sodium w/ sulfur crea 2%-10%, 5%-10%</i>	1	
<i>sulfacetamide sodium w/ sulfur crea 4.8%-9.8%</i>	1	PA
<i>sulfacetamide sodium w/ sulfur emul 1%-10%, 5%-10%</i>	1	
<i>sulfacetamide sodium w/ sulfur liqd 2%-10%, 2%-2%-10%-10%, 4%-9%, 4.5%-9%</i>	1	
<i>sulfacetamide sodium w/ sulfur liqd 4.8%-9.8%</i>	1	PA
<i>sulfacetamide sodium w/ sulfur lotn 4.8%-9.8%</i>	1	
<i>sulfacetamide sodium w/ sulfur lotn 5%-10%</i>	1	QL(1 gm daily)

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Drug Name	Drug Tier	Requirements/ Limits
<i>sulfacetamide sodium w/ sulfur pads 4%-10%, 4%-4%-10%-10%</i>	1	
<i>sulfacetamide sodium w/ sulfur soln 2%-10%</i>	1	
<i>sulfacetamide sodium w/ sulfur susp 4%-8%</i>	1	
<i>sulfacetamide sodium-sulfur in urea vehicle emul</i>	1	
<i>sulfacetamide sodium-sulfur in urea vehicle gel</i>	1	
SULFOAM SHAM	3	
SUMADAN WASH LIQD (Use Sulfacetamide Sodium w/ Sulfur)	GP	
SUMAXIN PADS (Use Sulfacetamide Sodium w/ Sulfur)	GP	
SUMAXIN TS SUSP (Use Sulfacetamide Sodium w/ Sulfur)	GP	
SUMAXIN WASH LIQD (Use Sulfacetamide Sodium w/ Sulfur)	GP	
TRETIN-X CREA 0.038 %	3	
TRETIN-X CREA 0.075 %	3	PA
<i>tretinoin crea 0.025 %, 0.05 %, 0.1 %</i>	1	AL
<i>tretinoin gel 0.01 %, 0.025 %</i>	1	AL
<i>tretinoin gel 0.05 %</i>	1	
<i>tretinoin microsphere gel</i>	1	AL
VANOXIDE-HC LOTN	3	
VELTIN GEL	3	
ZIANA GEL (Use Clindamycin Phosphate-Tretinoin)	GP	
Agents for External Genital and Perianal Warts		

Drug Name	Drug Tier	Requirements/ Limits
VEREGEN OINT	3	Limit 30gms per month;QL(1 gm daily)
Anti-inflammatory Agents - Topical		
<i>diclofenac sodium (topical) gel 1 %</i>	1	
<i>diclofenac sodium (topical) soln 1.5 %</i>	1	QL(5 ml daily)
ENOVARX-IBUPROFEN CREA	3	PA
FLECTOR PTCH	3	
PENNSAID SOLN 1.5 % (Use Diclofenac Sodium Topical)	GP	QL(5 ml daily)
PENNSAID SOLN 2 %	3	PA; QL(4 gm daily)
REXAPHENAC CREA	3	PA
VOLTAREN GEL (Use Diclofenac Sodium Topical)	GP	
Antibiotics - Topical		
ALTABAX OINT	3	
BACTROBAN CREA (Use Mupirocin Calcium Topical)	GP	
BACTROBAN OINT (Use Mupirocin)	GP	
CENTANY AT KIT	3	
CENTANY OINT	2	
CORTISPORIN CREA	3	
CORTISPORIN OINT	3	
<i>gentamicin sulfate (topical) crea</i>	1	
<i>gentamicin sulfate (topical) oint</i>	1	
<i>mupirocin calcium (topical) crea</i>	1	
<i>mupirocin oint</i>	1	

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Drug Name	Drug Tier	Requirements/ Limits
NEO-SYNALAR CREA	2	
Antifungals - Topical		
ALA-QUIN CREA	3	
ALOQUIN GEL	3	
<i>ciclopirox gel 0.77 %</i>	1	
<i>ciclopirox olamine crea</i>	1	
<i>ciclopirox olamine susp</i>	1	
<i>ciclopirox sham 1 %</i>	1	
<i>ciclopirox soln 8 %</i>	1	
<i>clotrimazole (topical) soln</i>	1	RX/OTC
<i>clotrimazole w/ betamethasone crea</i>	1	Limit 1 tube per month;QL(1.5 gm daily)
<i>clotrimazole w/ betamethasone lotn</i>	1	QL(2 ml daily)
<i>econazole nitrate crea</i>	1	
ERTACZO CREA	3	PA
EXELDERM CREA	3	
EXELDERM SOLN	2	
EXODERM LOTN	3	
EXTINA FOAM (Use Ketoconazole (Topical))	GP	
HALOTIN CREA	3	
<i>iodoquinol-hc crea</i>	1	
<i>iodoquinol-hydrocortisone in aloe vehicle crea</i>	1	
JUBLIA SOLN	2	PA; Limit 4mls per month;QL(0.15 ml daily)
<i>ketoconazole (topical) crea</i>	1	QL(2 gm daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>ketoconazole (topical) foam</i>	1	
<i>ketoconazole (topical) sham</i>	1	
LOPROX CREA (Use Ciclopirox Olamine)	GP	
LOPROX SHAMPOO SHAM (Use Ciclopirox)	GP	
LOTRISONE CREA (Use Clotrimazole w/ Betamethasone)	GP	Limit 1 tube per month;QL(1.5 gm daily)
NAFTIFINE HCL CREA 1 %	3	
<i>naftifine hcl crea 2 %</i>	1	
NAFTIN CREA 1 %, 2 % (Use Naftifine HCl)	GP	
NAFTIN GEL 1 %, 2 %	3	
NIZORAL SHAM (Use Ketoconazole (Topical))	GP	
<i>nystatin (topical) crea</i>	1	
<i>nystatin (topical) oint</i>	1	
<i>nystatin (topical) powd</i>	1	
<i>nystatin-triamcinolone crea</i>	1	
<i>nystatin-triamcinolone oint</i>	1	
<i>oxiconazole nitrate crea</i>	1	
OXISTAT CREA (Use Oxiconazole Nitrate)	GP	
OXISTAT LOTN	3	
PENLAC NAIL LACQUER SOLN (Use Ciclopirox)	GP	
VUSION OINT	3	
VYTONE CREA (Use Iodoquinol-Hydrocortisone in Aloe Vehicle)	GP	
XOLEGEL GEL	3	
Antineoplastic or Premalignant Lesion Agents -		

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Drug Name	Drug Tier	Requirements/Limits
CARAC CREA	2	
<i>diclofenac sodium (actinic keratoses) gel</i>	1	
EFUDEX CREA (<i>Use Fluorouracil (Topical)</i>)	GP	
FLUOROPLEX CREA	2	
<i>fluorouracil (topical) crea</i>	1	
<i>fluorouracil (topical) soln</i>	1	
FLUOROURACIL CREA EX 0.5 %	2	
LEVULAN KERASTICK SOLR	3	
PANRETIN GEL	3	PA
PICATO GEL	3	
SOLARAZE GEL (<i>Use Diclofenac Sodium (Actinic Keratoses)</i>)	GP	
TARGRETIN GEL EX 1 %	SP	PA
VALCHLOR GEL	SP	PA
Antipruritics - Topical		
<i>doxepin hcl (antipruritic) crea</i>	1	
ZONALON CREA (<i>Use Doxepin HCl (Antipruritic)</i>)	GP	
Antipsoriatics		
8-MOP CAPS	3	
<i>acitretin caps 10 mg</i>	1	QL(1 ea daily)
<i>acitretin caps 17.5 mg</i>	1	
<i>acitretin caps 25 mg</i>	1	QL(2 ea daily)
<i>calcipotriene crea</i>	1	
<i>calcipotriene oint</i>	1	
<i>calcipotriene soln</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>calcitriol (topical) oint</i>	1	Limit 100gms per month;QL(3.4 gm daily)
COSENTYX SENSOREADY PEN SOAJ	SP	PA
COSENTYX SOSY	SP	PA
DOVONEX CREA (<i>Use Calcipotriene</i>)	GP	
<i>methoxsalen rapid caps</i>	1	
OXSORALEN ULTRA CAPS (<i>Use Methoxsalen Rapid</i>)	GP	
SORIATANE CAPS 10 MG (<i>Use Acitretin</i>)	GP	QL(1 ea daily)
SORIATANE CAPS 17.5 MG (<i>Use Acitretin</i>)	GP	
SORIATANE CAPS 25 MG (<i>Use Acitretin</i>)	GP	QL(2 ea daily)
SORILUX FOAM	3	QL(4 gm daily)
STELARA SOSY	SP	PA
TALTZ SOAJ	SP	PA
TALTZ SOSY	SP	PA
TAZORAC CREA	2	AL
TAZORAC GEL	2	AL
ZITHRANOL-RR CREA	3	
Antiseborrheic Products		
<i>selenium sulfide lotn</i>	1	
<i>selenium sulfide-pyrithione zinc in urea vehicle sham</i>	1	
SODIUM SULFACETAMIDE WASH LIQD	3	
TERSI FOAM FOAM	3	
Antivirals - Topical		
<i>acyclovir topical oint</i>	1	QL(1 gm daily)

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Drug Name	Drug Tier	Requirements/Limits
DENAVIR CREA	3	Limit 5gms per month;QL(0.17 gm daily)
ZOVIRAX OINT EX 5 % (Use Acyclovir Topical)	GP	QL(1 gm daily)
Burn Products		
<i>mafenide acetate pack</i>	1	
SILVADENE CREA (Use Silver Sulfadiazine)	GP	
<i>silver sulfadiazine crea</i>	1	
SULFAMYLON CREA 85 MG/GM	3	
SULFAMYLON PACK 5 % (Use Mafenide Acetate)	GP	
Cauterizing Agents		
ARZOL SILVER NITRATE APPLICATORS MISC (Use Silver Nitrate-Potassium Nitrate)	GP	
<i>silver nitrate-potassium nitrate misc</i>	1	
Corticosteroids - Topical		
ACLOVATE CREA (Use Alclometasone Dipropionate)	GP	
ALA SCALP LOTN (Use Hydrocortisone (Topical))	GP	
<i>alclometasone dipropionate crea</i>	1	
<i>alclometasone dipropionate oint</i>	1	
AMCINONIDE CREA	2	
<i>amcinonide lotn</i>	1	
AMCINONIDE OINT	3	
APEXICON E CREA	2	
<i>betamethasone dipropionate (topical) crea</i>	1	
<i>betamethasone dipropionate (topical) lotn</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>betamethasone dipropionate (topical) oint</i>	1	
<i>betamethasone dipropionate augmented crea</i>	1	
<i>betamethasone dipropionate augmented gel</i>	1	
<i>betamethasone dipropionate augmented lotn</i>	1	
<i>betamethasone dipropionate augmented oint</i>	1	
<i>betamethasone valerate crea</i>	1	
<i>betamethasone valerate foam</i>	1	
<i>betamethasone valerate lotn</i>	1	
<i>betamethasone valerate oint</i>	1	
<i>calcipotriene-betamethasone dipropionate oint</i>	1	ST
CAPEX SHAM	2	
<i>clobetasol propionate crea</i>	1	
<i>clobetasol propionate emollient base crea</i>	1	
<i>clobetasol propionate emulsion foam</i>	1	
<i>clobetasol propionate foam</i>	1	
<i>clobetasol propionate gel</i>	1	
<i>clobetasol propionate liqd</i>	1	
<i>clobetasol propionate lotn</i>	1	
<i>clobetasol propionate oint</i>	1	
<i>clobetasol propionate sham</i>	1	
<i>clobetasol propionate soln</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

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Drug Name	Drug Tier	Requirements/Limits
CLOBEX LIQD (<i>Use Clobetasol Propionate</i>)	GP	
CLOBEX LOTN (<i>Use Clobetasol Propionate</i>)	GP	
CLOBEX SHAM (<i>Use Clobetasol Propionate</i>)	GP	
CLOCORTOLONE PIVALATE CREA	3	
CLOCORTOLONE PIVALATE PUMP CREA	3	
CLODERM CREA	3	
CLODERM PUMP CREA	3	
CORDRAN CREA (<i>Use Flurandrenolide</i>)	GP	
CORDRAN LOTN	3	PA
CORDRAN OINT	3	PA
CORDRAN TAPE TAPE	2	
CORTANE-B LOTN	3	
CUTIVATE CREA (<i>Use Fluticasone Propionate</i>)	GP	
CUTIVATE LOTN (<i>Use Fluticasone Propionate</i>)	GP	
DERMA-SMOOTH/FS BODY OIL (<i>Use Fluocinolone Acetonide</i>)	GP	
DERMA-SMOOTH/FS SCALP OIL (<i>Use Fluocinolone Acetonide</i>)	GP	
DERMASORB TA KIT	3	
DERMATOP CREA (<i>Use Prednicarbate</i>)	GP	
DERMATOP OINT (<i>Use Prednicarbate</i>)	GP	
DESONATE GEL	3	
<i>desonide crea</i>	1	
<i>desonide lotn</i>	1	
<i>desonide oint</i>	1	

Drug Name	Drug Tier	Requirements/Limits
DESOWEN CREA (<i>Use Desonide</i>)	GP	
DESOWEN LOTN (<i>Use Desonide</i>)	GP	
<i>desoximetasone crea</i>	1	
<i>desoximetasone gel</i>	1	
<i>desoximetasone oint</i>	1	
<i>diflorasone diacetate crea</i>	1	
DIFLORASONE DIACETATE OINT	2	
DIPROLENE AF CREA (<i>Use Betamethasone Dipropionate Augmented</i>)	GP	
DIPROLENE LOTN (<i>Use Betamethasone Dipropionate Augmented</i>)	GP	
DIPROLENE OINT (<i>Use Betamethasone Dipropionate Augmented</i>)	GP	
ELOCON CREA (<i>Use Mometasone Furoate</i>)	GP	
ELOCON LOTN (<i>Use Mometasone Furoate</i>)	GP	
ELOCON OINT (<i>Use Mometasone Furoate</i>)	GP	
ENSTILAR FOAM	3	PA
EPIFOAM FOAM	3	
<i>fluocinolone acetonide crea</i>	1	
<i>fluocinolone acetonide oil</i>	1	
<i>fluocinolone acetonide oint</i>	1	
<i>fluocinolone acetonide soln</i>	1	
<i>fluocinonide crea</i>	1	
<i>fluocinonide emulsified base crea</i>	1	
<i>fluocinonide gel</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>fluocinonide oint</i>	1	
<i>fluocinonide soln</i>	1	
<i>flurandrenolide crea</i>	1	
<i>fluticasone propionate crea</i>	1	
<i>fluticasone propionate lotn</i>	1	
<i>fluticasone propionate oint</i>	1	
HALAC KIT	3	
<i>halobetasol propionate crea</i>	1	
<i>halobetasol propionate oint</i>	1	
HALOG CREA	3	
HALOG OINT	3	
<i>hydrocortisone (topical) crea 1 %, 1%</i>	1	RX/OTC
<i>hydrocortisone (topical) crea 2.5 %</i>	1	
<i>hydrocortisone (topical) lotn 2 %, 2.5 %</i>	1	
<i>hydrocortisone (topical) oint 1 %</i>	1	RX/OTC
<i>hydrocortisone (topical) oint 2.5 %</i>	1	
<i>hydrocortisone butyrate crea</i>	1	
<i>hydrocortisone butyrate hydrophilic lipo base crea</i>	1	
<i>hydrocortisone butyrate oint</i>	1	
<i>hydrocortisone butyrate soln</i>	1	
<i>hydrocortisone valerate crea</i>	1	
<i>hydrocortisone valerate oint</i>	1	
KENALOG AERS (Use Triamcinolone Acetonide (Topical))	GP	

Drug Name	Drug Tier	Requirements/Limits
LOCOID CREA (Use Hydrocortisone Butyrate)	GP	
LOCOID LIPOCREAM CREA (Use Hydrocortisone Butyrate Hydrophilic Lipo Base)	GP	
LOCOID OINT (Use Hydrocortisone Butyrate)	GP	
LOCOID SOLN (Use Hydrocortisone Butyrate)	GP	
LUXIQ FOAM (Use Betamethasone Valerate)	GP	
<i>mometasone furoate crea</i>	1	
<i>mometasone furoate oint</i>	1	
<i>mometasone furoate soln</i>	1	
MONISTAT SOOTHING CARE ITCH RELIEF CREA (Use Hydrocortisone (Topical))	GP	RX/OTC
NUCORT LOTN	3	
OLUX FOAM (Use Clobetasol Propionate)	GP	
OLUX-E FOAM (Use Clobetasol Propionate Emulsion)	GP	
PANDEL CREA	3	
PEDIADERM HC KIT	3	
PEDIADERM TA KIT	3	
PRAMOSONE CREA 1%-1%	2	
PRAMOSONE CREA 1%-2.5% (Use Pramoxine-HC)	GP	
PRAMOSONE E CREA	3	
PRAMOSONE LOTN 1%-1%, 1%-2.5%	3	
PRAMOSONE OINT 1%-1%, 1%-2.5%	3	
<i>pramoxine-hc crea</i>	1	

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Drug Name	Drug Tier	Requirements/ Limits
<i>prednicarbate crea</i>	1	
<i>prednicarbate oint</i>	1	
PSORCON CREA (Use Diflorasone Diacetate)	GP	
SERNIVO EMUL	3	PA
SYNALAR CREA (Use Fluocinolone Acetonide)	GP	
SYNALAR OINT (Use Fluocinolone Acetonide)	GP	
SYNALAR SOLN (Use Fluocinolone Acetonide)	GP	
TACLONEX OINT (Use Calcipotriene-Betamethasone Dipropionate)	GP	ST
TACLONEX SUSP	3	ST; QL(2 gm daily)
TEMOVATE CREA (Use Clobetasol Propionate)	GP	
TEMOVATE E CREA (Use Clobetasol Propionate Emollient Base)	GP	
TEMOVATE GEL (Use Clobetasol Propionate)	GP	
TEMOVATE OINT (Use Clobetasol Propionate)	GP	
TEMOVATE SOLN (Use Clobetasol Propionate)	GP	
TEXACORT SOLN	3	
TOPICORT CREA 0.05 %, 0.25 % (Use Desoximetasone)	GP	
TOPICORT GEL 0.05 % (Use Desoximetasone)	GP	
TOPICORT LIQD 0.25 %	3	ST
TOPICORT OINT 0.05 %, 0.25 % (Use Desoximetasone)	GP	
<i>triamcinolone acetonide (topical) aers</i>	1	
<i>triamcinolone acetonide (topical) crea</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
<i>triamcinolone acetonide (topical) lotn</i>	1	
<i>triamcinolone acetonide (topical) oint</i>	1	
TRIANEX OINT	2	
ULTRAVATE CREA (Use Halobetasol Propionate)	GP	
ULTRAVATE LOTN	3	PA
ULTRAVATE OINT (Use Halobetasol Propionate)	GP	
ULTRAVATE X KIT	3	
VANOS CREA (Use Fluocinonide)	GP	
VERDESO FOAM	3	
WESTCORT OINT (Use Hydrocortisone Valerate)	GP	
Emollient/Keratolytic Agents		
ALUVEA CREA (Use Urea)	GP	
CEM-UREA SOLN	3	
GORDONS UREA OINT	3	
HYDRO 35 FOAM (Use Urea in Lactic Acid Vehicle)	GP	
HYDRO 40 FOAM FOAM (Use Urea)	GP	
KERAFOAM 42 FOAM	3	
KERAFOAM FOAM	3	
KERALAC CREA (Use Urea)	GP	PA
UMECTA EMUL	3	
UMECTA NAIL FILM SUSP (Use Urea)	GP	
UMECTA SUSP (Use Urea)	GP	
URAMAXIN CREA 45 % (Use Urea)	GP	
URAMAXIN FOAM 20%	3	

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Drug Name	Drug Tier	Requirements/ Limits
URAMAXIN GEL 45 % (Use Urea)	GP	
URAMAXIN GT GEL (Use Urea)	GP	
URAMAXIN LOTN 45 % (Use Urea)	GP	
urea crea 39 %, 40 %, 45 %, 50 %	1	
urea crea 47 %	1	PA
urea foam 40 %	1	
urea gel 40 %, 45 %	1	
urea in lactic acid vehicle foam	1	
urea in lactic acid-salicylic acid vehicle susp	1	
urea in zinc undecylenate-lactic acid vehicle emul	1	
urea lotn 40 %, 45 %	1	
UREA NAIL STCK	3	
urea susp 40 %	1	
UTOPIC CREA	3	
Emollients		
hyaluronate sodium (emollient) gel	1	
HYLIRA GEL 0.2 % (Use Hyaluronate Sodium (Emollient))	GP	
HYLIRA LOTN 0.1 %	3	
LAC-HYDRIN CREA (Use Lactic Acid (Ammonium Lactate))	GP	RX/OTC
LAC-HYDRIN LOTN (Use Lactic Acid (Ammonium Lactate))	GP	RX/OTC
LAC-HYDRIN TWELVE LOTN (Use Lactic Acid (Ammonium Lactate))	GP	RX/OTC
lactic acid (ammonium lactate) crea 12 %	1	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
lactic acid (ammonium lactate) lotn 10 %	1	
lactic acid (ammonium lactate) lotn 12 %	1	RX/OTC
Enzymes - Topical		
GRANULEX AERS (Use Trypsin w/ Castor Oil & Peruvian Balsam)	GP	
OPTASE GEL	3	
SANTYL OINT	3	
TBC AERS	3	
trypsin w/ castor oil & peruvian balsam oint	1	
Immunomodulating Agents - Topical		
ALDARA CREA (Use Imiquimod)	GP	
imiquimod crea	1	
Immunosuppressive Agents - Topical		
ELIDEL CREA	3	QL(2 gm daily)
PROTOPIC OINT (Use Tacrolimus (Topical))	GP	QL(2 gm daily); AL
tacrolimus (topical) oint	1	QL(2 gm daily); AL
Keratolytic/Antimitotic Agents		
BENSAL HP OINT	3	
CONDYLOX GEL	2	
CONDYLOX SOLN (Use Podofilox)	GP	
PODOCON 25 IN BENZOIN TINCTURE SOLN	3	
podofilox soln	1	
SALEX LOTION KIT (Use Salicylic Acid w/ Cleanser)	GP	
SALEX SHAM (Use Salicylic Acid)	GP	
salicylic acid crea 6 %	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>salicylic acid in ammonium lactate vehicle foam</i>	1	
SALICYLIC ACID LIQD 26 %	3	
<i>salicylic acid liqd 27.5 %</i>	1	
<i>salicylic acid lotn 6 %</i>	1	
<i>salicylic acid sham 6 %</i>	1	
<i>salicylic acid w/ cleanser kit</i>	1	
SALKERA FOAM (Use Salicylic Acid in Ammonium Lactate Vehicle)	GP	
VIRASAL LIQD (Use Salicylic Acid)	GP	
Liniments		
MEDROX-RX OINT	3	PA
Local Anesthetics - Topical		
CETACAINE AERO	3	
COCAINE HCL SOLN	3	
EMLA CREA (Use Lidocaine-Prilocaine)	GP	
ETHYL CHLORIDE AERO	3	
ETHYL CHLORIDE/FINE PINPOINT AERO	3	
ETHYL CHLORIDE/FINE STREAM AERO	3	
ETHYL CHLORIDE/MEDIUM JET STREAM AERO	3	
ETHYL CHLORIDE/MEDIUM STREAM AERO	3	
ETHYL CHLORIDE/MIST AERO	3	
<i>lidocaine hcl crea ex 3 %</i>	1	
<i>lidocaine hcl gel ex 2 %</i>	1	RX/OTC
<i>lidocaine hcl soln ex 4 %</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>lidocaine oint</i>	1	
<i>lidocaine ptch</i>	1	QL(3 ea daily)
<i>lidocaine-prilocaine crea</i>	1	
<i>lidocaine-prilocaine kit</i>	1	
LIDODERM PTCH (Use Lidocaine)	GP	QL(3 ea daily)
SYNERA PTCH	3	
XYLOCAINE SOLN EX 4 % (Use Lidocaine HCl)	GP	
Misc. Topical		
<i>aluminum chloride soln</i>	1	
DRYSOL SOLN	2	
XERAC AC SOLN	3	
Pigmenting-Depigmenting Agents		
OXSORALEN LOTN	3	PA
Rosacea Agents		
DOXYCYCLINE CPDR	3	PA
FINACEA FOAM	3	
FINACEA GEL	2	
METROCREAM CREA (Use Metronidazole (Topical))	GP	
METROGEL GEL (Use Metronidazole (Topical))	GP	
METROLOTION LOTN (Use Metronidazole (Topical))	GP	QL(2 ml daily)
<i>metronidazole (topical) crea 0.75 %</i>	1	
<i>metronidazole (topical) gel 0.75 %</i>	1	Limit 45gms per month;QL(1.5 gm daily)
<i>metronidazole (topical) gel 1 %</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>metronidazole (topical) lotn 0.75 %</i>	1	QL(2 ml daily)
MIRVASO GEL	3	PA
NORITATE CREA	3	PA
ORACEA CPDR	3	PA
SOOLANTRA CREA	3	PA
Scabicides & Pediculicides		
ELIMITE CREA (<i>Use Permethrin</i>)	GP	QL(120 gm per 14 days retail)
EURAX CREA	2	
EURAX LOTN	2	
LINDANE LOTN	2	
<i>lindane lotn</i>	1	
<i>lindane sham</i>	1	
<i>malathion lotn</i>	1	
NATROBA SUSP	3	AL
OVIDE LOTN (<i>Use Malathion</i>)	GP	
<i>permethrin crea</i>	1	QL(120 gm per 14 days retail)
SKLICE LOTN	3	
SPINOSAD SUSP	3	AL
ULESFIA LOTN	3	
Wound Care Products		
REGRANEX GEL	3	Limit 15gms per month;QL(0.5 gm daily)
DIAGNOSTIC PRODUCTS		
Diagnostic Drugs		
GLUCAGEN DIAGNOSTIC SOLR	SP	

Drug Name	Drug Tier	Requirements/Limits
GLUCAGON HCL DIAGNOSTIC SOLR	SP	Limit 1 per year;QL(0.04 ea daily)
GLUCAGON SOLR	SP	Limit 1 per year;QL(0.04 ea daily)
METOPIRONE CAPS	3	
Diagnostic Tests		
CHEK-STIX COMBO PAK URINALYSIS CONTROL STRP	2	
CHEK-STIX CONTROL STRP	2	
CHEMSTRIP-K STRP	2	
FREESTYLE INSULINX BLOODGLUCOSE TEST STRIPS STRP	2	Limit 200 per month;QL(6.67 ea daily)
FREESTYLE INSULINX BLOODGLUCOSE TEST STRP	2	Limit 200 per month;QL(6.67 ea daily)
FREESTYLE LITE TEST STRIPS STRP	2	Limit 200 per month;QL(6.67 ea daily)
FREESTYLE TEST STRIPS STRP	2	Limit 200 per month;QL(6.67 ea daily)
KETOCARE STRP	2	
KETONE TEST STRIPS STRP	2	
KETOSTIX STRP	2	
ONETOUCH ULTRA BLUE STRP	2	Limit 200 per month;QL(6.67 ea daily)
ONETOUCH VERIO TEST STRIPS STRP	2	Limit 200 per month;QL(6.67 ea daily)
PRECISION XTRA BLOOD GLUCOSE TEST STRIPS STRP	2	Limit 200 per month;QL(6.67 ea daily)
RELION KETONE STRP	2	
RELION KETONE TEST STRIPS STRP	2	

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Drug Name	Drug Tier	Requirements/Limits
DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS		
Dietary Management Products		
<i>folic acid-pyridoxine-cyanocobalamin tabs</i>	1	
DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes		
Digestive Enzymes		
CREON CPEP	2	
PANCREAZE CPEP	3	
<i>pancrelipase (lipase-protease-amylase) cpep</i>	1	
PERTZYE CPEP	3	
SUCRAID SOLN	SP	PA
ULTRESA CPEP	3	
VIOKACE TABS	3	
ZENPEP CPEP 10000UNIT-3000UNIT-16000UNIT, 136000UNIT-40000UNIT-218000UNIT, 34000UNIT-10000UNIT-55000UNIT, 51000UNIT-15000UNIT-82000UNIT, 68000UNIT-20000UNIT-109000UNIT, 85000UNIT-25000UNIT-136000UNIT	2	
ZENPEP CPEP 17000UNIT-5000UNIT-27000UNIT (Use Pancrelipase (Lipase-Protease-Amylase))	GP	
DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure		
Carbonic Anhydrase Inhibitors		
<i>acetazolamide cp12</i>	1	
<i>acetazolamide tabs</i>	1	
DIAMOX CP12 (Use Acetazolamide)	GP	

Drug Name	Drug Tier	Requirements/Limits
KEVEYIS TABS	SP	PA
<i>methazolamide tabs</i>	1	
NEPTAZANE TABS (Use Methazolamide)	GP	
Diuretic Combinations		
ALDACTAZIDE TABS 25MG-25MG (Use Spironolactone & Hydrochlorothiazide)	GP	
ALDACTAZIDE TABS 50MG-50MG	2	
<i>amiloride & hydrochlorothiazide tabs</i>	1	
DYAZIDE CAPS (Use Triamterene & Hydrochlorothiazide)	GP	
MAXZIDE TABS (Use Triamterene & Hydrochlorothiazide)	GP	
MAXZIDE-25 TABS (Use Triamterene & Hydrochlorothiazide)	GP	
<i>spironolactone & hydrochlorothiazide tabs</i>	1	
<i>triamterene & hydrochlorothiazide caps</i>	1	
<i>triamterene & hydrochlorothiazide tabs</i>	1	
TRIAMTERENE/HYDROCHLOROTHIAZIDE CAPS	2	
Loop Diuretics		
<i>bumetanide tabs or 0.5 mg, 1 mg, 2 mg</i>	1	
BUMEX TABS (Use Bumetanide)	GP	
DEMADEX TABS (Use Torsemide)	GP	
EDECIN TABS (Use Ethacrynic Acid)	GP	ST
<i>ethacrynic acid tabs</i>	1	ST
<i>furosemide soln or 10 mg/ml</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
FUROSEMIDE SOLN OR 8 MG/ML	2	
<i>furosemide tabs or 20 mg, 40 mg, 80 mg</i>	1	
LASIX TABS (Use Furosemide)	GP	
<i>torseamide tabs</i>	1	
Potassium Sparing Diuretics		
ALDACTONE TABS (Use Spironolactone)	GP	
<i>amiloride hcl tabs</i>	1	
DYRENIUM CAPS	2	
<i>spironolactone tabs</i>	1	
Thiazides and Thiazide-Like Diuretics		
CHLOROTHIAZIDE TABS 250 MG	3	
<i>chlorothiazide tabs 500 mg</i>	1	
CHLORTHALIDONE TABS 100 MG	2	
<i>chlorthalidone tabs 25 mg, 50 mg</i>	1	
DIURIL SUSP	3	
<i>hydrochlorothiazide caps</i>	1	
<i>hydrochlorothiazide tabs</i>	1	
<i>indapamide tabs</i>	1	
<i>methyclothiazide tabs</i>	1	
<i>metolazone tabs</i>	1	
MICROZIDE CAPS (Use Hydrochlorothiazide)	GP	
ZAROXOLYN TABS (Use Metolazone)	GP	
ENDOCRINE AND METABOLIC AGENTS - MISC. - Drugs to Treat Bone Disease and Regulate Hormones		
Bone Density Regulators		

Drug Name	Drug Tier	Requirements/Limits
ACTONEL TABS (Use Risedronate Sodium)	GP	ST
<i>alendronate sodium soln 70 mg/75ml</i>	1	
<i>alendronate sodium tabs 10 mg, 5 mg</i>	1	QL(1 ea daily)
<i>alendronate sodium tabs 35 mg, 70 mg</i>	1	Limit 4 per month;QL(0.15 ea daily)
<i>alendronate sodium tabs 40 mg</i>	1	
AELVIA TBEC (Use Risedronate Sodium)	GP	Limit 4 per month;QL(0.15 ea daily)
BINOSTO TBEF	3	
BONIVA SOLN IV 3 MG/3ML (Use Ibandronate Sodium)	SP	PA
BONIVA TABS OR 150 MG (Use Ibandronate Sodium)	GP	
<i>calcitonin (salmon) soln</i>	1	
<i>etidronate disodium tabs</i>	1	
FORTEO SOLN	SP	PA
FOSAMAX PLUS D TABS	3	PA; Limit 4 per month;QL(0.15 ea daily)
FOSAMAX TABS (Use Alendronate Sodium)	GP	Limit 4 per month;QL(0.15 ea daily)
<i>ibandronate sodium soln iv 3 mg/3ml</i>	SP	PA
<i>ibandronate sodium tabs or 150 mg</i>	1	
MIACALCIN SOLN IJ 200 UNIT/ML	SP	PA
MIACALCIN SOLN NA 200 UNIT/ACT (Use Calcitonin (Salmon))	GP	
NATPARA CART	SP	PA
<i>pamidronate disodium soln 30 mg/10ml, 90 mg/10ml</i>	SP	PA

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Drug Name	Drug Tier	Requirements/Limits
PAMIDRONATE DISODIUM SOLN 6 MG/ML	SP	PA
PROLIA SOLN	SP	PA
RECLAST SOLN (<i>Use Zoledronic Acid</i>)	SP	PA
<i>risedronate sodium tabs 150 mg, 30 mg, 35 mg, 5 mg</i>	1	ST
<i>risedronate sodium tbec 35 mg</i>	1	Limit 4 per month; QL(0.15 ea daily)
XGEVA SOLN	SP	PA
<i>zoledronic acid conc 4 mg/5ml</i>	SP	PA
ZOLEDRONIC ACID SOLN 4 MG/100ML	SP	PA
<i>zoledronic acid soln 5 mg/100ml</i>	SP	PA
ZOMETA CONC 4 MG/5ML (<i>Use Zoledronic Acid</i>)	SP	PA
ZOMETA SOLN 4 MG/100ML	SP	PA
Corticotropin		
H.P. ACTHAR GEL	SP	PA
Fertility Regulators		
<i>chorionic gonadotropin solr</i>	SP	PA
Growth Hormone Receptor Antagonists		
SOMAVERT SOLR	SP	PA
Growth Hormones		
GENOTROPIN MINIQUICK SOLR	SP	PA
GENOTROPIN SOLR	SP	PA
HUMATROPE COMBO PACK SOLR	SP	PA; Preferred
HUMATROPE SOLR	SP	PA; Preferred
NORDITROPIN FLEXPLO SOLN	SP	PA; Preferred

Drug Name	Drug Tier	Requirements/Limits
NORDITROPIN NORDIFLEX PEN SOLN	SP	PA; Preferred
NUTROPIN AQ NUSPIN 10 SOLN	SP	PA
NUTROPIN AQ NUSPIN 20 SOLN	SP	PA
NUTROPIN AQ NUSPIN 5 SOLN	SP	PA
NUTROPIN AQ PEN SOLN	SP	PA
OMNITROPE SOLN	SP	PA
OMNITROPE SOLR	SP	PA
SAIZEN CLICK.EASY SOLR	SP	PA
SAIZEN SOLR	SP	PA
SEROSTIM SOLR	SP	PA
TEV-TROPIN SOLR	SP	PA
ZOMACTON SOLR	SP	PA
ZORBTIVE SOLR	SP	PA
Hormone Receptor Modulators		
EVISTA TABS (<i>Use Raloxifene HCl</i>)	GP	QL(1 ea daily); PV
OSPHENA TABS	3	
<i>raloxifene hcl tabs</i>	PV	QL(1 ea daily); PV
Insulin-Like Growth Factors (Somatomedins)		
INCRELEX SOLN	SP	PA
LHRH/GnRH Agonist Analog Pituitary		
LUPANETA PACK KIT	3	PA
LUPRON DEPOT-PED KIT 11.25 MG, 15 MG	SP	
LUPRON DEPOT-PED KIT 11.25 MG, 30 MG	SP	PA
LUPRON DEPOT-PED KIT 7.5 MG	SP	PA
SYNAREL SOLN	2	

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Drug Name	Drug Tier	Requirements/Limits
Metabolic Modifiers		
ALDURAZYME SOLN	SP	PA
BUPHENYL POWD 3 GM/TSP (Use Sodium Phenylbutyrate)	GP	
BUPHENYL TABS 500 MG	3	
<i>calcitriol caps or 0.25 mcg, 0.5 mcg</i>	1	
<i>calcitriol soln iv 1 mcg/ml</i>	SP	PA
<i>calcitriol soln or 1 mcg/ml</i>	1	
CARBAGLU TABS	SP	PA
CARNITOR SF SOLN (Use Levocarnitine (Metabolic Modifiers))	GP	
CARNITOR SOLN OR 1 GM/10ML (Use Levocarnitine (Metabolic Modifiers))	GP	
CARNITOR TABS OR 330 MG (Use Levocarnitine (Metabolic Modifiers))	GP	
CYSTADANE POWD	SP	PA
<i>doxercalciferol caps or 0.5 mcg, 1 mcg, 2.5 mcg</i>	1	
ELAPRASE SOLN	SP	PA
FABRAZYME SOLR	SP	PA
HECTOROL CAPS OR 0.5 MCG, 1 MCG, 2.5 MCG (Use Doxercalciferol)	GP	
KUVAN PACK	SP	
KUVAN TBSO	SP	
<i>levocarnitine (metabolic modifiers) soln or 1 gm/10ml</i>	1	
<i>levocarnitine (metabolic modifiers) tabs or 330 mg</i>	1	
LUMIZYME SOLR	SP	PA

Drug Name	Drug Tier	Requirements/Limits
MYALEPT SOLR	SP	PA
MYOZYME SOLR	SP	PA
NAGLAZYME SOLN	SP	PA
ORFADIN CAPS	SP	PA
ORFADIN SUSP	SP	PA
<i>paricalcitol caps or 1 mcg, 2 mcg, 4 mcg</i>	1	
<i>paricalcitol soln iv 2 mcg/ml, 5 mcg/ml</i>	SP	PA
RAVICTI LIQD	SP	PA
ROCALTROL CAPS (Use Calcitriol)	GP	
ROCALTROL SOLN (Use Calcitriol)	GP	
SENSIPAR TABS	3	
<i>sodium phenylbutyrate powd</i>	1	
STRENSIQ SOLN	SP	PA
XURIDEN PACK	SP	
ZEMPLAR CAPS OR 1 MCG, 2 MCG (Use Paricalcitol)	GP	
ZEMPLAR SOLN IV 2 MCG/ML, 5 MCG/ML (Use Paricalcitol)	SP	PA
Posterior Pituitary Hormones		
DDAVP SOLN IJ 4 MCG/ML (Use Desmopressin Acetate)	SP	PA
DDAVP SOLN NA 0.01 % (Use Desmopressin Acetate Refrigerated)	GP	
DDAVP SOLN NA 0.01 % (Use Desmopressin Acetate Spray)	GP	
DDAVP TABS OR 0.1 MG, 0.2 MG (Use Desmopressin Acetate)	GP	

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Drug Name	Drug Tier	Requirements/ Limits
<i>desmopressin acetate refrigerated soln</i>	1	
<i>desmopressin acetate soln ij 4 mcg/ml</i>	SP	PA
<i>desmopressin acetate spray refrigerated soln</i>	1	
<i>desmopressin acetate spray soln</i>	1	
<i>desmopressin acetate tabs or 0.1 mg, 0.2 mg</i>	1	
STIMATE SOLN	3	
Prolactin Inhibitors		
<i>cabergoline tabs</i>	1	
Somatostatic Agents		
<i>octreotide acetate soln</i>	SP	PA
SANDOSTATIN LAR DEPOT KIT	SP	PA
SANDOSTATIN SOLN (Use Octreotide Acetate)	SP	PA
SIGNIFOR LAR SUSR	SP	PA
SIGNIFOR SOLN	SP	PA
SOMATULINE DEPOT SOLN	SP	PA
Vasopressin Receptor Antagonists		
SAMSCA TABS	SP	PA; QL(1 ea daily)
ESTROGENS - Hormone Replacement/Modifying Drugs		
Estrogen Combinations		
ACTIVELLA TABS (Use Estradiol & Norethindrone Acetate)	GP	
ANGELIQ TABS	3	
CLIMARA PRO PTWK	2	
COMBIPATCH PTTW	3	
DUAVEE TABS	3	

Drug Name	Drug Tier	Requirements/ Limits
<i>esterified estrogens & methyltestosterone tabs</i>	1	QL(1 ea daily)
<i>estradiol & norethindrone acetate tabs</i>	1	
FEMHRT LOW DOSE TABS (Use Norethindrone Acetate-Ethinyl Estradiol)	GP	
<i>norethindrone acetate-ethinyl estradiol tabs</i>	1	
PREFEST TABS	3	
PREMPHASE TABS	2	QL(1 ea daily)
PREMPRO TABS	2	QL(1 ea daily)
Estrogens		
ALORA PTTW	2	Limit 8 per month;QL(0.29 ea daily)
CLIMARA PTWK (Use Estradiol)	GP	Limit 4 per month;QL(0.15 ea daily)
DELESTROGEN OIL 10 MG/ML	SP	PA
DELESTROGEN OIL 20 MG/ML, 40 MG/ML (Use Estradiol Valerate)	SP	PA
DEPO-ESTRADIOL OIL	SP	PA
DIVIGEL GEL	3	
ELESTRIN GEL	3	
ENJUVIA TABS	3	QL(1 ea daily)
ESTRACE TABS OR 0.5 MG, 1 MG, 2 MG (Use Estradiol)	GP	
<i>estradiol pttw td 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr</i>	1	Limit 8 per month;QL(0.29 ea daily)
<i>estradiol ptwk td 0.025 mg/24hr, 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr, 37.5 mcg/24hr</i>	1	Limit 4 per month;QL(0.15 ea daily)

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Drug Name	Drug Tier	Requirements/ Limits
<i>estradiol tabs or 0.5 mg, 1 mg, 2 mg</i>	1	
<i>estradiol valerate oil</i>	SP	PA
ESTROGEL GEL	3	Limit 50gms per month;QL(1.67 gm daily)
ESTROPIPATE TABS 0.75 MG, 1.5 MG	2	
<i>estropipate tabs 0.75 mg, 1.5 mg, 3 mg</i>	1	
EVAMIST SOLN	3	
MENEST TABS	2	
MENOSTAR PTWK	3	Limit 4 per month;QL(0.14 ea daily)
MINIVELLE PTTW	2	Limit 8 per month;QL(0.29 ea daily)
PREMARIN SOLR IJ 25 MG	SP	PA
PREMARIN TABS OR 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG	2	
VIVELLE-DOT PTTW (<i>Use Estradiol</i>)	GP	Limit 8 per month;QL(0.29 ea daily)
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections		
Fluoroquinolones		
AVELOX ABC PACK TABS (<i>Use Moxifloxacin HCl</i>)	GP	
AVELOX TABS OR 400 MG (<i>Use Moxifloxacin HCl</i>)	GP	
CIPRO SUSR (<i>Use Ciprofloxacin</i>)	GP	
CIPRO TABS (<i>Use Ciprofloxacin HCl</i>)	GP	
CIPRO XR TB24 1000MG (<i>Use Ciprofloxacin-Ciprofloxacin HCl</i>)	GP	QL(14 ea per fill retail,14 ea per fill mail)
CIPRO XR TB24 500MG (<i>Use Ciprofloxacin-Ciprofloxacin HCl</i>)	GP	QL(3 ea per fill retail,3 ea per fill mail)

Drug Name	Drug Tier	Requirements/ Limits
CIPROFLOXACIN HCL TABS 100 MG	2	
<i>ciprofloxacin hcl tabs 250 mg, 500 mg, 750 mg</i>	1	
<i>ciprofloxacin susr</i>	1	
<i>ciprofloxacin-ciprofloxacin hcl tb24 1000mg</i>	1	QL(14 ea per fill retail,14 ea per fill mail)
<i>ciprofloxacin-ciprofloxacin hcl tb24 500mg</i>	1	QL(3 ea per fill retail,3 ea per fill mail)
FACTIVE TABS	3	QL(1 ea per 90 days retail,1 ea per 90 days mail)
LEVAQUIN SOLN 25 MG/ML (<i>Use Levofloxacin</i>)	GP	
LEVAQUIN TABS 250 MG, 500 MG, 750 MG (<i>Use Levofloxacin</i>)	GP	QL(14 ea per fill retail)
<i>levofloxacin soln or 25 mg/ml</i>	1	
<i>levofloxacin tabs or 250 mg, 500 mg, 750 mg</i>	1	QL(14 ea per fill retail)
<i>moxifloxacin hcl tabs</i>	1	
NOROXIN TABS	3	
OFLOXACIN TABS	3	QL(28 ea per 90 days retail,28 ea per 90 days mail)
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs		
Bile Acid Synthesis Disorder Agents		
CHOLBAM CAPS	SP	PA
Gallstone Solubilizing Agents		
ACTIGALL CAPS (<i>Use Ursodiol</i>)	GP	
CHENODAL TABS	3	
URSO 250 TABS (<i>Use Ursodiol</i>)	GP	
URSO FORTE TABS (<i>Use Ursodiol</i>)	GP	

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Drug Name	Drug Tier	Requirements/ Limits
<i>ursodiol caps</i>	1	
<i>ursodiol tabs</i>	1	
Gastrointestinal Antiallergy Agents		
<i>cromolyn sodium (mastocytosis) conc</i>	1	
GASTROCROM CONC (Use Cromolyn Sodium (Mastocytosis))	GP	
Gastrointestinal Chloride Channel Activators		
AMITIZA CAPS	2	
Gastrointestinal Stimulants		
<i>metoclopramide hcl soln or 10 mg/10ml, 5 mg/5ml</i>	1	
<i>metoclopramide hcl tabs or 10 mg, 5 mg</i>	1	
<i>metoclopramide hcl tbdp or 5 mg</i>	1	
METOCLOPRAMIDE ODT TBDP	3	
METOZOLV ODT TBDP (Use Metoclopramide HCl)	GP	
REGLAN TABS (Use Metoclopramide HCl)	GP	
Inflammatory Bowel Agents		
APRISO CP24	3	ST
ASACOL HD TBEC	2	
AZULFIDINE EN-TABS TBEC (Use Sulfasalazine)	GP	
AZULFIDINE TABS (Use Sulfasalazine)	GP	
<i>balsalazide disodium caps</i>	1	Limit 280 per month;QL(9.4 ea daily)
CANASA SUPP	2	
CIMZIA KIT	SP	PA
COLAZAL CAPS (Use Balsalazide Disodium)	GP	Limit 280 per month;QL(9.4 ea daily)

Drug Name	Drug Tier	Requirements/ Limits
DELZICOL CPDR	2	
DIPENTUM CAPS	3	
GIAZO TABS	3	ST; QL(6 ea daily)
LIALDA TBEC	2	
MESALAMINE DR TBEC	2	
<i>mesalamine enem</i>	1	
PENTASA CPCR	3	
REMICADE SOLR	SP	PA
SFROWASA ENEM	2	
<i>sulfasalazine tabs</i>	1	
<i>sulfasalazine tbec</i>	1	
Intestinal Acidifiers		
<i>lactulose (encephalopathy) soln</i>	1	
Irritable Bowel Syndrome (IBS) Agents		
<i>alosetron hcl tabs</i>	1	
LINZESS CAPS	2	
LOTRONEX TABS (Use Alosetron HCl)	GP	
VIBERZI TABS	3	PA
Peripheral Opioid Receptor Antagonists		
ENTEREG CAPS	3	
MOVANTIK TABS	3	
RELISTOR KIT	SP	PA
RELISTOR SOLN	SP	PA
Phosphate Binder Agents		
<i>calcium acetate (phosphate binder) caps</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>calcium acetate (phosphate binder) tabs</i>	1	RX/OTC
ELIPHOS TABS (<i>Use Calcium Acetate (Phosphate Binder)</i>)	GP	RX/OTC
FOSRENOL CHEW	3	
FOSRENOL PACK	3	
PHOSLO CAPS (<i>Use Calcium Acetate (Phosphate Binder)</i>)	GP	
PHOSLYRA SOLN	3	
RENAGEL TABS	3	
RENVELA PACK	3	
RENVELA TABS	3	
SEVELAMER CARBONATE TABS	3	
Short Bowel Syndrome (SBS) Agents		
GATTEX KIT	SP	PA
GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System		
Acidifiers		
K-PHOS NO 2 TABS	2	
Alkalinizers		
ORACIT SOLN	2	
<i>pot & sod citrates w/citric ac soln</i>	1	
<i>pot & sod citrates w/citric ac syrup</i>	1	
<i>potassium citrate (alkalinizer) tbc</i>	1	
<i>potassium citrate-citric acid pack</i>	1	
<i>potassium citrate-citric acid soln</i>	1	

Drug Name	Drug Tier	Requirements/Limits
SHOHL'S SOLUTION MODIFIED SOLN (<i>Use Sodium Citrate & Citric Acid</i>)	GP	
<i>sodium citrate & citric acid soln</i>	1	
UROKIT-K 10 TBCR (<i>Use Potassium Citrate (Alkalinizer)</i>)	GP	
UROKIT-K 15 TBCR (<i>Use Potassium Citrate (Alkalinizer)</i>)	GP	
UROKIT-K 5 TBCR (<i>Use Potassium Citrate (Alkalinizer)</i>)	GP	
Cystinosis Agents		
CYSTAGON CAPS	3	
PROCYSBI CPDR	3	PA
Genitourinary Irrigants		
<i>neomycin/polymyxin b gu soln</i>	1	
NEOSPORIN GU IRRIGANT SOLN (<i>Use Neomycin/Polymyxin B GU</i>)	GP	
<i>sodium chloride (gu irrigant) soln</i>	1	
Interstitial Cystitis Agents		
ELMIRON CAPS	3	QL(3 ea daily)
Prostatic Hypertrophy Agents		
<i>alfuzosin hcl tb24</i>	1	QL(1 ea daily)
AVODART CAPS (<i>Use Dutasteride</i>)	GP	AL
CARDURA XL TB24	3	
<i>dutasteride caps</i>	1	AL
<i>dutasteride-tamsulosin hcl caps</i>	1	
<i>finasteride tabs</i>	1	QL(1 ea daily); AL

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Drug Name	Drug Tier	Requirements/Limits
FLOMAX CAPS (<i>Use Tamsulosin HCl</i>)	GP	QL(2 ea daily)
JALYN CAPS (<i>Use Dutasteride-Tamsulosin HCl</i>)	GP	
PROSCAR TABS (<i>Use Finasteride</i>)	GP	QL(1 ea daily); AL
RAPAFLO CAPS	3	
<i>tamsulosin hcl caps</i>	1	QL(2 ea daily)
UROXATRAL TB24 (<i>Use Alfuzosin HCl</i>)	GP	QL(1 ea daily)
Urinary Analgesics		
<i>phenazopyridine hcl tabs</i>	1	
PYRIDIUM TABS (<i>Use Phenazopyridine HCl</i>)	GP	
Urinary Stone Agents		
LITHOSTAT TABS	3	
THIOLA TABS	3	
GOUT AGENTS - Drugs to Treat Gout		
Gout Agent Combinations		
<i>colchicine w/ probenecid tabs</i>	1	
Gout Agents		
<i>allopurinol tabs</i>	1	
COLCHICINE CAPS	3	
COLCHICINE TABS	2	
COLCRYS TABS	2	
MITIGARE CAPS	3	
ULORIC TABS	2	
ZYLOPRIM TABS (<i>Use Allopurinol</i>)	GP	
Uricosurics		
<i>probenecid tabs</i>	1	

Drug Name	Drug Tier	Requirements/Limits
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders		
Antihemophilic Products		
ADVATE SOLR	SP	PA
ALPHANATE/VON WILLEBRANDFACTOR COMPLEX/HUMAN SOLR	SP	PA
ALPHANINE SD SOLR	SP	PA
ALPROLIX SOLR	SP	PA
BENEFIX SOLR	SP	PA
CORIFACT KIT	SP	PA
ELOCTATE SOLR	SP	PA
HELIXATE FS KIT	SP	PA
IDELVION SOLR	SP	PA
IXINITY SOLR	SP	PA
KOGENATE FS BIO-SET KIT	SP	PA
KOGENATE FS KIT	SP	PA
KOVALTRY SOLR	SP	PA
NOVOEIGHT SOLR	SP	PA
NUWIQ SOLR	SP	PA
OBIZUR SOLR	SP	PA
RIXUBIS SOLR	SP	PA
WILATE KIT	SP	PA
WILATE SOLR	SP	PA
Bradykinin B2 Receptor Antagonists		
FIRAZYR SOLN	SP	PA
Complement Inhibitors		
CINRYZE SOLR	SP	PA

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Drug Name	Drug Tier	Requirements/Limits
RUCONEST SOLR	SP	PA
Hematorheologic Agents		
<i>pentoxifylline tbc</i>	1	
Platelet Aggregation Inhibitors		
AGGRENEX CP12	3	
AGRYLIN CAPS (<i>Use Anagrelide HCl</i>)	GP	
<i>anagrelide hcl caps</i>	1	
ASPIRIN/DIPYRIDAMOLE CP12	3	
BRILINTA TABS	2	
<i>cilostazol tabs</i>	1	QL(2 ea daily)
<i>clopidogrel bisulfate tabs</i>	1	QL(2 ea daily)
<i>dipyridamole tabs</i>	1	
EFFIENT TABS	2	
PERSANTINE TABS (<i>Use Dipyridamole</i>)	GP	
PLAVIX TABS (<i>Use Clopidogrel Bisulfate</i>)	GP	QL(2 ea daily)
PLETAL TABS (<i>Use Cilostazol</i>)	GP	QL(2 ea daily)
TICLOPIDINE HCL TABS	2	
<i>ticlopidine hcl tabs</i>	1	
ZONTIVITY TABS	2	
HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders		
Agents for Gaucher Disease		
CERDELGA CAPS	SP	PA
CEREZYME SOLR	SP	PA
ELELYSO SOLR	SP	PA
VPRIV SOLR	SP	PA

Drug Name	Drug Tier	Requirements/Limits
ZAVESCA CAPS	SP	PA
Agents for Sickle Cell Anemia		
DROXIA CAPS	2	
Cobalamins		
<i>cyanocobalamin soln</i>	SP	PA
Folic Acid/Folates		
<i>folic acid tabs or 1 mg</i>	1	RX/OTC
<i>folic acid tabs or 400 mcg, 800 mcg</i>	PV	PV
Hematopoietic Growth Factors		
ARANESP ALBUMIN FREE SOLN	SP	PA
ARANESP ALBUMIN FREE SOSY	SP	PA
EPOGEN SOLN	SP	PA
GRANIX SOSY	SP	PA
LEUKINE SOLR	SP	PA
MIRCERA SOSY	SP	PA
NEULASTA ONPRO KIT PSKT	SP	PA
NEULASTA SOSY	SP	PA
NEUMEGA SOLR	SP	PA
NEUPOGEN SOLN	SP	PA
NEUPOGEN SOSY	SP	PA
OMONTYS SOLN	SP	PA
PROCRIT SOLN 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML	SP	PA
PROMACTA TABS 12.5 MG, 25 MG, 50 MG	SP	PA
PROMACTA TABS 75 MG	SP	PA; QL(1 ea daily)

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Drug Name	Drug Tier	Requirements/Limits
ZARXIO SOSY	SP	PA
Hematopoietic Mixtures		
FOLIVANE-F CAPS	2	
INTEGRA F CAPS	2	
Iron		
<i>carbonyl iron susp</i>	PV	PV
FER-IN-SOL SOLN (<i>Use Ferrous Sulfate</i>)	GP	PV
<i>ferrous sulfate elix 220 mg/5ml</i>	PV	PV
<i>ferrous sulfate soln 15 mg/ml</i>	PV	PV
FERROUS SULFATE SYRP 300 MG/5ML	PV	PV
ICAR PEDIATRIC SUSP (<i>Use Carbonyl Iron</i>)	GP	PV
MYKIDZ IRON 10 SUSP	PV	PV
Stem Cell Mobilizers		
MOZOBIL SOLN	SP	PA
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
Hemostatics - Systemic		
AMICAR SOLN	3	
AMICAR TABS	3	
<i>aminocaproic acid syrp or 25 %</i>	1	
AMINOCAPROIC ACID TABS OR 1000 MG	3	
<i>aminocaproic acid tabs or 500 mg</i>	1	
CYKLOKAPRON SOLN (<i>Use Tranexamic Acid</i>)	SP	PA
LYSTEDA TABS (<i>Use Tranexamic Acid</i>)	GP	QL(6 ea daily,5 day(s) limit)
<i>tranexamic acid soln iv 1000 mg/10ml</i>	SP	PA
<i>tranexamic acid tabs or 650 mg</i>	1	QL(6 ea daily,5 day(s) limit)

Drug Name	Drug Tier	Requirements/Limits
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
Barbiturate Hypnotics		
BUTISOL SODIUM ELIX	3	
BUTISOL SODIUM TABS	3	
<i>phenobarbital elix</i>	1	
<i>phenobarbital soln</i>	1	
<i>phenobarbital tabs</i>	1	
SECONAL CAPS	3	
SECONAL SODIUM CAPS	3	
Hypnotics - Tricyclic Agents		
SILENOR TABS	3	ST; QL(1 ea daily)
Non-Barbiturate Hypnotics		
AMBIEN CR TBCR (<i>Use Zolpidem Tartrate</i>)	GP	QL(1 ea daily)
AMBIEN TABS (<i>Use Zolpidem Tartrate</i>)	GP	QL(1 ea daily)
DORAL TABS	3	
EDLUAR SUBL	3	ST; QL(1 ea daily)
<i>estazolam tabs</i>	1	
<i>eszopiclone tabs</i>	1	QL(1 ea daily)
<i>flurazepam hcl caps</i>	1	
HALCION TABS (<i>Use Triazolam</i>)	GP	
INTERMEZZO SUBL (<i>Use Zolpidem Tartrate</i>)	GP	PA
LUNESTA TABS (<i>Use Eszopiclone</i>)	GP	QL(1 ea daily)
<i>midazolam hcl syrp or 2 mg/ml</i>	1	
<i>quazepam tabs</i>	1	
RESTORIL CAPS (<i>Use Temazepam</i>)	GP	

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Drug Name	Drug Tier	Requirements/ Limits
SONATA CAPS (<i>Use Zaleplon</i>)	GP	QL(1 ea daily)
<i>temazepam caps</i>	1	
<i>triazolam tabs</i>	1	
<i>zaleplon caps</i>	1	QL(1 ea daily)
<i>zolpidem tartrate subl sl 1.75 mg, 3.5 mg</i>	1	PA
<i>zolpidem tartrate tabs or 10 mg, 5 mg</i>	1	QL(1 ea daily)
<i>zolpidem tartrate tbcr or 12.5 mg, 6.25 mg</i>	1	QL(1 ea daily)
ZOLPIMIST SOLN	3	ST; Limit 7.7mls per month; QL(0.26 ml daily)
Orexin Receptor Antagonists		
BELSOMRA TABS	3	PA
Selective Melatonin Receptor Agonists		
HETLIOZ CAPS	SP	PA
ROZEREM TABS	3	ST; QL(1 ea daily)
LAXATIVES - Bowel Treatment Drugs		
Laxative Combinations		
<i>bisacodyl-peg 3350-pot chloride-sod bicarb-sod chloride kit</i>	PV	QL(1 ea per fill retail, 1 ea per fill mail); AL; PV
COLYTE-FLAVOR PACKS SOLR 227.1GM-21.5GM-5.53GM-2.82GM-6.36GM	PV	AL; PV
COLYTE-FLAVOR PACKS SOLR 240GM-22.72GM-5.84GM-2.98GM-6.72GM (<i>Use PEG 3350-KCl-Sod Bicarb-Sod Chloride-Sod Sulfate</i>)	GP	QL(4000 ml per fill retail, 4000 ml per fill mail); AL; PV
GOLYTELY SOLR 227.1GM-21.5GM-5.53GM-2.82GM-6.36GM	PV	QL(4000 ea per fill retail, 4000 ea per fill mail); PV

Drug Name	Drug Tier	Requirements/ Limits
GOLYTELY SOLR 236GM-22.74GM-5.86GM-2.97GM-6.74GM (<i>Use PEG 3350-KCl-Sod Bicarb-Sod Chloride-Sod Sulfate</i>)	GP	QL(4000 ml per fill retail, 4000 ml per fill mail); AL; PV
MOVIPREP SOLR	PV	AL; PV
NULYTELY/FLAVOR PACKS SOLR (<i>Use PEG 3350-Potassium Chloride-Sod Bicarbonate-Sod Chloride</i>)	GP	AL; PV
<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate solr</i>	PV	QL(4000 ml per fill retail, 4000 ml per fill mail); AL; PV
<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride solr</i>	PV	AL; PV
PREPOPIK PACK	PV	AL; PV
SUCLEAR KIT	PV	AL; PV
SUPREP BOWEL PREP SOLN	PV	AL; PV
Laxatives - Miscellaneous		
KRISTALOSE PACK	2	
<i>lactulose soln</i>	1	
Saline Laxatives		
OSMOPREP TABS	3	
MACROLIDES - Drugs to Treat Bacterial Infections		
Azithromycin		
<i>azithromycin pack or 1 gm</i>	1	
<i>azithromycin susr or 100 mg/5ml, 200 mg/5ml</i>	1	
<i>azithromycin tabs or 250 mg</i>	1	QL(6 ea per fill retail, 6 ea per fill mail)
<i>azithromycin tabs or 500 mg</i>	1	QL(3 ea daily)

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Drug Name	Drug Tier	Requirements/Limits
<i>azithromycin tabs or 600 mg</i>	1	QL(10 ea per fill retail,10 ea per fill mail)
ZITHROMAX PACK OR 1 GM (Use Azithromycin)	GP	
ZITHROMAX SUSR OR 100 MG/5ML, 200 MG/5ML (Use Azithromycin)	GP	
ZITHROMAX TABS OR 250 MG (Use Azithromycin)	GP	QL(6 ea per fill retail,6 ea per fill mail)
ZITHROMAX TABS OR 500 MG (Use Azithromycin)	GP	QL(3 ea daily)
ZITHROMAX TABS OR 600 MG (Use Azithromycin)	GP	QL(10 ea per fill retail,10 ea per fill mail)
ZITHROMAX TRI-PAK TABS (Use Azithromycin)	GP	QL(3 ea daily)
ZITHROMAX Z-PAK TABS (Use Azithromycin)	GP	QL(6 ea per fill retail,6 ea per fill mail)
ZMAX SUSR	2	QL(2 ea daily)
Clarithromycin		
BIAXIN SUSR (Use Clarithromycin)	GP	
BIAXIN TABS (Use Clarithromycin)	GP	
<i>clarithromycin susr 125 mg/5ml, 250 mg/5ml</i>	1	
<i>clarithromycin tabs 250 mg, 500 mg</i>	1	
<i>clarithromycin tb24 500 mg</i>	1	QL(14 ea per fill retail,14 ea per fill mail)
Erythromycins		
E.E.S. GRANULES SUSR	2	
ERY-TAB TBEC	2	
ERYPED 200 SUSR	2	
ERYPED 400 SUSR	2	
<i>erythromycin base cpep</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>erythromycin base tabs</i>	1	
<i>erythromycin ethylsuccinate tabs</i>	1	
PCE TBEC	2	
Fidaxomicin		
DIFICID TABS	3	
MEDICAL DEVICES		
Parenteral Therapy Supplies		
INSULIN SYRINGES AND PEN NEEDLES	2	MO
MEDICAL DEVICES AND SUPPLIES		
Contraceptives		
CAYA DPRH	PV	PV
FC FEMALE CONDOM MISC	PV	PV
FC2 FEMALE CONDOM MISC	PV	PV
FEMCAP DEVI	PV	PV
OMNIFLEX DIAPHRAGM DPRH	PV	PV
ORTHO DIAPHRAGM COIL SPRING KIT 100 KIT	PV	PV
ORTHO DIAPHRAGM COIL SPRING KIT 105 KIT	PV	PV
ORTHO DIAPHRAGM COIL SPRING KIT 50 KIT	PV	PV
ORTHO DIAPHRAGM FLAT SPRING KIT 55 KIT	PV	PV
ORTHO DIAPHRAGM FLAT SPRING KIT 60 KIT	PV	PV
ORTHO DIAPHRAGM FLAT SPRING KIT 65 KIT	PV	PV
ORTHO DIAPHRAGM FLAT SPRING KIT 70 KIT	PV	PV
ORTHO DIAPHRAGM FLAT SPRING KIT 75 KIT	PV	PV
ORTHO DIAPHRAGM FLAT SPRING KIT 80 KIT	PV	PV

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Drug Name	Drug Tier	Requirements/Limits
ORTHO DIAPHRAGM FLAT SPRING KIT 85 KIT	PV	PV
ORTHO DIAPHRAGM FLAT SPRING KIT 90 KIT	PV	PV
ORTHO DIAPHRAGM FLAT SPRING KIT 95 KIT	PV	PV
PRENTIF CAVITY-RIM CERVICAL CAP DEVI	PV	PV
WIDE-SEAL SILICONE DIAPHRAGM KIT 60 DPRH	PV	PV
WIDE-SEAL SILICONE DIAPHRAGM KIT 65 DPRH	PV	PV
WIDE-SEAL SILICONE DIAPHRAGM KIT 70 DPRH	PV	PV
WIDE-SEAL SILICONE DIAPHRAGM KIT 75 DPRH	PV	PV
WIDE-SEAL SILICONE DIAPHRAGM KIT 80 DPRH	PV	PV
WIDE-SEAL SILICONE DIAPHRAGM KIT 85 DPRH	PV	PV
WIDE-SEAL SILICONE DIAPHRAGM KIT 90 DPRH	PV	PV
WIDE-SEAL SILICONE DIAPHRAGM KIT 95 DPRH	PV	PV
Diabetic Supplies		
FREESTYLE FREEDOM LITE KIT	2	QL(1 ea per 365 days retail, 1 ea per 365 days mail); RX/OTC
FREESTYLE INSULINX BLOODGLUCOSE MONITORING SYSTEM KIT	2	QL(1 ea per 365 days retail, 1 ea per 365 days mail); RX/OTC
FREESTYLE LITE BLOOD GLUCOSE MONITORING SYSTEM DEVI	2	

Drug Name	Drug Tier	Requirements/Limits
LANCETS AND LANCET DEVICES	2	
ONETOUCH ULTRA 2 KIT	2	QL(1 ea per 365 days retail, 1 ea per 365 days mail); RX/OTC
ONETOUCH ULTRA MINI KIT	2	QL(1 ea per 365 days retail, 1 ea per 365 days mail); RX/OTC
ONETOUCH VERIO FLEX BLOODGLUCOSE MONITORING SYSTEM KIT	2	RX/OTC
ONETOUCH VERIO IQ BLOOD GLUCOSE MONITORING SYSTEM KIT	2	QL(1 ea per 365 days retail, 1 ea per 365 days mail); RX/OTC
ONETOUCH VERIO KIT	2	QL(1 ea per 365 days retail); RX/OTC
PRECISION XTRA DEVI	2	
Parenteral Therapy Supplies		
BD ECLIPSE NEEDLE 30G X1/2" MISC	2	RX/OTC
BD NEEDLE/30G X 1/2" MISC	2	RX/OTC
EASY TOUCH FLIPLOCK NEEDLES 30GX1/2" MISC	2	RX/OTC
EASY TOUCH HYPODERMIC NEEDLES 30GX1/2" MISC	2	RX/OTC
HUMAPEN LUXURA HD DEVI	2	RX/OTC
HYPODERMIC NEEDLE 30GX1/2" MISC	2	RX/OTC
POLY HUB NEEDLE/30G X 1/2" MISC	2	RX/OTC
TERUMO SURGUARD2 SAFETY NEEDLE/30G X 1/2" MISC	2	RX/OTC
Respiratory Therapy Supplies		

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Drug Name	Drug Tier	Requirements/Limits
AEROCHAMBER MINI AEROSOLCHAMBER DEVI	2	QL(2 ea per 365 days retail,2 ea per 365 days mail); RX/OTC
AEROVENT PLUS HOLDING CHAMBER/COLLAPSIBLE DEVI	2	QL(2 ea per 365 days retail,2 ea per 365 days mail); RX/OTC
ARIAL CHAMBER DEVI	2	QL(2 ea per 365 days retail,2 ea per 365 days mail); RX/OTC
COMPACT SPACE CHAMBER/ANTI-STATIC DEVI	2	Limit 1 every 6 months;QL(1 ea per 180 days retail); RX/OTC
COMPACT SPACE CHAMBER/ANTI-STATIC/LARGE MASK DEVI	2	Limit 1 every 6 months;QL(1 ea per 180 days retail); RX/OTC
COMPACT SPACE CHAMBER/ANTI-STATIC/MEDIUM MASK DEVI	2	Limit 1 every 6 months;QL(1 ea per 180 days retail); RX/OTC
COMPACT SPACE CHAMBER/ANTI-STATIC/SMALL MASK DEVI	2	Limit 1 every 6 months;QL(1 ea per 180 days retail); RX/OTC
INSPIRACHAMBER/LARGE DEVI	2	Limited to 1 every 6 months;QL(2 ea per 365 days retail); RX/OTC
NESSI SPACER/LARGE MASK DEVI	2	QL(2 ea per 365 days retail,2 ea per 365 days mail); RX/OTC

Drug Name	Drug Tier	Requirements/Limits
NESSI SPACER/MOUTHPIECE DEVI	2	QL(2 ea per 365 days retail,2 ea per 365 days mail); RX/OTC
NESSI SPACER/SMALL/MED MASK DEVI	2	QL(2 ea per 365 days retail,2 ea per 365 days mail); RX/OTC
OPTICHAMBER DIAMOND DEVI	2	QL(2 ea per 365 days retail,2 ea per 365 days mail); RX/OTC
OPTICHAMBER DIAMOND MISC	2	QL(2 ea per 365 days retail,2 ea per 365 days mail); RX/OTC
OPTICHAMBER DIAMOND/LARGEFACE MASK DEVI	2	QL(2 ea per 365 days retail,2 ea per 365 days mail); RX/OTC
OPTICHAMBER DIAMOND/MEDIUM FACE MASK MISC	2	QL(2 ea per 365 days retail,2 ea per 365 days mail); RX/OTC
OPTICHAMBER DIAMOND/SMALLFACE MASK MISC	2	QL(2 ea per 365 days retail,2 ea per 365 days mail); RX/OTC
<i>spacer/aerosol-holding chambers devi</i>	1	QL(2 ea per 365 days retail,2 ea per 365 days mail); RX/OTC
<i>spacer/aerosol-holding chambers misc</i>	1	QL(2 ea per 365 days retail,2 ea per 365 days mail); RX/OTC

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Drug Name	Drug Tier	Requirements/Limits
VALVED HOLDING CHAMBER DEVI	2	QL(2 ea per 365 days retail,2 ea per 365 days mail); RX/OTC
MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches		
Migraine Combinations		
CAFERGOT TABS	2	
<i>isometheptene-caffeine-acetaminophen tabs</i>	1	
<i>isometheptene-dichloralphenazone-acetaminophen caps</i>	1	
MIGERGOT SUPP	2	
MIGRALAM CAPS	3	
PRODRIN TABS (<i>Use Isometheptene-Caffeine-Acetaminophen</i>)	GP	
TREXIMET TABS	3	PA; Limit 9 per month;QL(0.3 ea daily)
Migraine Products - NSAIDs		
CAMBIA PACK	3	Limit 9 per month;QL(0.3 ea daily)
Migraine Products		
<i>dihydroergotamine mesylate soln na 4 mg/ml</i>	1	QL(8 ml per fill retail,8 ml per fill mail)
ERGOMAR SUBL	2	
MIGRAL TABS	3	
MIGRANAL SOLN (<i>Use Dihydroergotamine Mesylate</i>)	GP	QL(8 ml per fill retail,8 ml per fill mail)
Serotonin Agonists		
<i>almotriptan malate tabs</i>	1	Limit 6 tabs per month;QL(0.2 ea daily)
ALSUMA SOAJ	SP	PA

Drug Name	Drug Tier	Requirements/Limits
AMERGE TABS (<i>Use Naratriptan HCl</i>)	GP	Limit 9 per month;QL(0.3 ea daily)
AXERT TABS (<i>Use Almotriptan Malate</i>)	GP	Limit 6 tabs per month;QL(0.2 ea daily)
FROVA TABS (<i>Use Frovatriptan Succinate</i>)	GP	Limit 9 per month;QL(0.3 ea daily)
<i>frovatriptan succinate tabs</i>	1	Limit 9 per month;QL(0.3 ea daily)
IMITREX SOLN NA 20 MG/ACT (<i>Use Sumatriptan</i>)	GP	Limit 6 sprays per month;QL(0.23 ea daily)
IMITREX SOLN NA 5 MG/ACT (<i>Use Sumatriptan</i>)	GP	Limit 6 sprays per month;QL(0.2 ea daily)
IMITREX SOLN SC 6 MG/0.5ML (<i>Use Sumatriptan Succinate</i>)	SP	PA; Limit 2mls per month;QL(0.07 ml daily)
IMITREX STATDOSE REFILL SOCT (<i>Use Sumatriptan Succinate</i>)	SP	PA
IMITREX STATDOSE SYSTEM SOAJ (<i>Use Sumatriptan Succinate</i>)	SP	PA
IMITREX TABS OR 100 MG, 25 MG, 50 MG (<i>Use Sumatriptan Succinate</i>)	GP	Limit 9 per month;QL(0.3 ea daily)
MAXALT TABS (<i>Use Rizatriptan Benzoate</i>)	GP	Limit 9 per month;QL(0.3 ea daily)
MAXALT-MLT TBDP (<i>Use Rizatriptan Benzoate</i>)	GP	Limit 9 per month;QL(0.3 ea daily)
<i>naratriptan hcl tabs</i>	1	Limit 9 per month;QL(0.3 ea daily)
RELPAK TABS	3	Limit 6 tabs per month;QL(0.2 ea daily)
<i>rizatriptan benzoate tabs</i>	1	Limit 9 per month;QL(0.3 ea daily)

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Drug Name	Drug Tier	Requirements/Limits
<i>rizatriptan benzoate tbdp</i>	1	Limit 9 per month;QL(0.3 ea daily)
<i>sumatriptan soln 20 mg/act</i>	1	Limit 1 inhaler per month;QL(0.23 ea daily)
<i>sumatriptan soln 20 mg/act, 5 mg/act</i>	1	QL(0.23 ea daily)
<i>sumatriptan soln 5 mg/act</i>	1	Limit 6 per month;QL(0.2 ea daily)
<i>sumatriptan succinate soaj sc 4 mg/0.5ml, 6 mg/0.5ml</i>	SP	PA
<i>sumatriptan succinate soct sc 4 mg/0.5ml, 6 mg/0.5ml</i>	SP	PA
<i>sumatriptan succinate soln sc 6 mg/0.5ml</i>	SP	PA; Limit 2mls per month;QL(0.07 ml daily)
SUMATRIPTAN SUCCINATE SOSY SC 6 MG/0.5ML	SP	PA
<i>sumatriptan succinate tabs or 100 mg, 25 mg, 50 mg</i>	1	Limit 9 per month;QL(0.3 ea daily)
SUMAVEL DOSEPRO SOTJ	SP	PA
ZEMBRACE SYMTOUCH SOAJ	SP	PA
<i>zolmitriptan tabs 2.5 mg, 5 mg</i>	1	QL(0.2 ea daily)
<i>zolmitriptan tbdp 2.5 mg, 5 mg</i>	1	Limit 6 tabs per month;QL(0.2 ea daily)
ZOMIG NASAL SPRAY SOLN	3	QL(6 ea per 30 days retail,18 ea per 90 days mail)
ZOMIG SOLN NA 2.5 MG	3	QL(6 ea per 30 days retail,18 ea per 90 days mail)
ZOMIG TABS OR 2.5 MG, 5 MG (Use Zolmitriptan)	GP	QL(0.2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
ZOMIG ZMT TBDP (Use Zolmitriptan)	GP	Limit 6 tabs per month;QL(0.2 ea daily)
MINERALS & ELECTROLYTES		
Chloride		
AMMONIUM CHLORIDE SOLN	SP	PA
Electrolyte Mixtures		
ISOLYTE-S SOLN	SP	PA
NORMOSOL -R SOLN	SP	PA
NORMOSOL-R SOLN	SP	PA
PLASMA-LYTE A SOLN	SP	PA
PLASMA-LYTE-148 SOLN	SP	PA
<i>potassium chloride in nacl soln</i>	SP	PA
Fluoride		
FLUORABON SOLN	PV	PV
FLURA-DROPS SOLN	PV	PV
LOZI-FLUR LOZG	2	
LURIDE CHEW (Use Sodium Fluoride)	GP	PV
LURIDE SOLN (Use Sodium Fluoride)	GP	PV
<i>sodium fluoride chew 0.25 mg, 0.5 mg, 1 mg, 1.1 mg, 2.2 mg</i>	PV	PV
<i>sodium fluoride soln 0.125 mg/drop, 0.5 mg/ml</i>	PV	PV
SODIUM FLUORIDE TABS 0.5 MG, 1 MG	PV	PV
Iodine Products		
SSKI SOLN	2	
Magnesium		
<i>magnesium sulfate in d5w soln 10mg/ml-5%</i>	SP	PA

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Drug Name	Drug Tier	Requirements/Limits
MAGNESIUM SULFATE IN D5W SOLN 10MG/ML-5% (Use Magnesium Sulfate in D5W)	SP	PA
MAGNESIUM SULFATE IN D5W SOLN 20MG/ML-5%	SP	PA
<i>magnesium sulfate soln ij 50 %</i>	SP	PA
<i>magnesium sulfate soln iv 2 gm/50ml, 20 gm/500ml, 4 gm/100ml, 40 gm/1000ml</i>	SP	PA
MAGNESIUM SULFATE SOLN IV 2 GM/50ML, 20 GM/500ML, 4 GM/100ML, 40 GM/1000ML (Use Magnesium Sulfate)	SP	PA
Phosphate		
K-PHOS NEUTRAL TABS (Use Pot Phosphate Monobasic w/ Sod Phosphate Dibasic & Monobasic)	GP	
K-PHOS TABS	2	
<i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic tabs</i>	1	
Potassium		
K-TAB TBCR 10 MEQ (Use Potassium Chloride)	GP	
K-TAB TBCR 20 MEQ	3	
K-TAB TBCR 8 MEQ	2	
KLOR-CON 25 PACK	2	
KLOR-CON M15 TBCR	2	
KLOR-CON/25 PACK	2	
MICRO-K CPCR (Use Potassium Chloride)	GP	
<i>potassium bicarb & chloride tbf</i>	1	
<i>potassium bicarbonate tbf</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>potassium chloride cpcr or 10 meq, 8 meq</i>	1	
POTASSIUM CHLORIDE ER TBCR 20 MEQ	3	
POTASSIUM CHLORIDE ER TBCR 8 MEQ	2	
<i>potassium chloride microencapsulated crystals cr tbc</i>	1	
<i>potassium chloride pack or 20 meq</i>	1	
<i>potassium chloride soln iv 0.4 meq/ml, 10 meq/100ml, 2 meq/ml, 20 meq/100ml, 20 meq/50ml</i>	SP	PA
POTASSIUM CHLORIDE SOLN IV 10 MEQ/50ML	SP	PA
<i>potassium chloride soln or 10 %, 20 %</i>	1	
<i>potassium chloride tbc</i> or 10 meq, 8 meq	1	
Sodium		
<i>sodium chloride soln</i>	SP	PA
MOUTH/THROAT/DENTAL AGENTS		
Anesthetics Topical Oral		
FIRST-MOUTHWASH BLM SUSP	3	
<i>lidocaine hcl (mouth-throat) soln</i>	1	
LIDOCAINE HCL SOLN MT 4 %	3	
Anti-infectives - Throat		
<i>clotrimazole lozg</i>	1	
<i>clotrimazole troc</i>	1	
FIRST-DUKES MOUTHWASH SUSP	3	
FIRST-MARYS MOUTHWASH SUSP	3	
<i>nystatin (mouth-throat) susp</i>	1	
ORAVIG TABS	3	

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Drug Name	Drug Tier	Requirements/ Limits
Antiseptics - Mouth/Throat		
<i>chlorhexidine gluconate (mouth-throat) soln</i>	1	
PERIDEX SOLN (Use Chlorhexidine Gluconate (Mouth-Throat))	GP	
Steroids - Mouth/Throat		
<i>triamcinolone acetonide (mouth) pste</i>	1	
Throat Products - Misc.		
<i>cevimeline hcl caps</i>	1	
EVOXAC CAPS (Use Cevimeline HCl)	GP	
GELCLAIR GEL	3	
<i>pilocarpine hcl (oral) tabs</i>	1	
SALAGEN TABS (Use Pilocarpine HCl (Oral))	GP	
MULTIVITAMINS		
Ped MV w/ Fluoride		

Drug Name	Drug Tier	Requirements/ Limits
<i>pediatric multivitamins w/fl chew 0.25mg-15unit-1.2mg-2500unit-4.5mcg-400unit-1.05mg-13.5mg-1.05mg-0.3mg-60mg, 0.25mg-15unit-400unit-2500unit-1.2mg-4.5mcg-13.5mg-1.05mg-0.3mg-1.05mg-60mg, 0.5mg-15unit-1.2mg-2500unit-4.5mcg-400unit-1.05mg-13.5mg-1.05mg-0.3mg-60mg, 0.5mg-15unit-400unit-2500unit-1.2mg-4.5mcg-13.5mg-1.05mg-0.3mg-60mg, 0.5mg-15unit-400unit-2500unit-1.2mg-4.5mcg-13.5mg-1.05mg-0.3mg-60mg, 15unit-0.25mg-1.05mg-13.5mg-1.2mg-2500unit-4.5mcg-400unit-0.3mg-1.05mg-60mg, 15unit-0.5mg-1.05mg-13.5mg-1.2mg-2500unit-4.5mcg-400unit-0.3mg-1.05mg-60mg, 15unit-1mg-1.05mg-13.5mg-1.2mg-2500unit-4.5mcg-400unit-0.3mg-1.05mg-60mg, 15unit-1mg-2500unit-13.5mg-1.2mg-4.5mcg-400unit-1.05mg-0.3mg-1.05mg-60mg, 1mg-15unit-400unit-2500unit-1.2mg-4.5mcg-13.5mg-1.05mg-0.3mg-1.05mg-60mg, 200mcg-0.25mg-15unit-400unit,</i>	1	AL

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Drug Name	Drug Tier	Requirements/ Limits
<i>pediatric multivitamins w/fl soln 0.25mg/ml-5unit/ml-0.6mg/ml-1mg/ml-1150unit/ml-2mg/ml-2mcg/ml-400unit/ml-0.5mg/ml-29.7mcg/ml-3mcg/ml-0.4mg/ml-32mg/ml, 0.25mg/ml-5unit/ml-0.6mg/ml-8mg/ml-1500unit/ml-2mcg/ml-400unit/ml-0.5mg/ml-0.4mg/ml-35mg/ml, 0.25mg/ml-5unit/ml-8mg/ml-0.6mg/ml-1500unit/ml-2mcg/ml-400unit/ml-0.5mg/ml-0.4mg/ml-35mg/ml, 5unit/ml-0.25mg/ml-0.6mg/ml-8mg/ml-1500unit/ml-2mcg/ml-400unit/ml-0.5mg/ml-0.4mg/ml-35mg/ml</i>	1	AL
<i>pediatric vitamins acd w/ fluoride soln</i>	1	AL
POLY-VI-FLOR FS STRP	3	
POLY-VI-FLOR SUSP	3	
QUFLORA PEDIATRIC CHEW 108MCG-1MG-15UNIT-0.25MG-15MG-1200UNIT-5MG-1.3MG-4MCG-400UNIT-1.2MG-100MCG-1.5MG-60MG, 108MCG-1MG-15UNIT-0.5MG-15MG-1200UNIT-5MG-1.3MG-4MCG-400UNIT-1.2MG-100MCG-1.5MG-60MG, 108MCG-1MG-15UNIT-1MG-15MG-1200UNIT-5MG-1.3MG-4MCG-400UNIT-1.2MG-100MCG-1.5MG-60MG	2	AL

Drug Name	Drug Tier	Requirements/ Limits
QUFLORA PEDIATRIC SOLN 65MCG/ML-1MG/ML-0.25MG/ML-10MG/ML-1000UNIT/ML-0.8MG/ML-0.6MG/ML-2MCG/ML-400UNIT/ML-0.5MG/ML-35MCG/ML-5UNIT/ML-0.4MG/ML-35MG/ML	2	AL
TRI-VI-FLOR SUSP	3	
TRI-VI-FLORO SUSP	3	
Ped Multi Vitamins w/Fl & FE		
<i>ped multivitamins w/fl & iron liqd 0.25mg/ml-6mg/ml-0.6mg/ml-1500unit/ml-0.9mcg/ml-400unit/ml-0.5mg/ml-8mg/ml-7.5unit/ml-0.4mg/ml-35mg/ml</i>	1	
<i>pediatric vitamins acd fluoride & iron soln</i>	1	AL
POLY-VI-FLOR/IRON CHEW 200MCG-0.5MG-10MG-15UNIT-400UNIT	3	AL
POLY-VI-FLOR/IRON SUSP 200MCG/ML-7MG/ML-0.25MG/ML	3	
Prenatal Vitamins		
ACTIVE OB CAPS	3	
ATABEX EC TBEC	2	
BAL-CARE DHA MISC	2	
BP MULTINATAL PLUS TABS	2	
C-NATE DHA CAPS	3	
CALCIUM PNV CAPS	3	
CITRANATAL 90 DHA MISC	2	
CITRANATAL ASSURE MISC	3	
CITRANATAL B-CALM MISC	3	

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Drug Name	Drug Tier	Requirements/ Limits
CITRANATAL DHA MISC	2	
CITRANATAL HARMONY CAPS	3	
CITRANATAL RX TABS	3	
COMPLETENATE CHEW	2	
CONCEPT DHA CAPS	2	
CONCEPT OB CAPS	2	
DOTHELLE DHA CAPS	2	
DUET DHA 400 MISC	3	
DUET DHA 400EC MISC	3	
DUET DHA 430 MISC	3	
DUET DHA 430EC MISC	3	
DUET DHA BALANCED MISC	3	
EXTRA-VIRT PLUS DHA CAPS	3	
FOCALGIN 90 DHA MISC	2	
FOCALGIN CA MISC	3	
FOCALGIN-B TABS	3	
FOLCAL DHA CAPS	3	
FOLCAPS OMEGA 3 CAPS	3	
FOLET DHA THPK	3	
FOLIVANE-OB CAPS	2	
GESTICARE DHA MISC	2	
HEMENATAL OB + DHA MISC	2	
HEMENATAL OB TABS	3	
INFANATE BALANCE CAPS	3	

Drug Name	Drug Tier	Requirements/ Limits
INFANATE PLUS CAPS	3	
MACNATAL CN DHA CAPS	3	
MARNATAL-F CAPS	2	
MYNATAL ADVANCE TABS	2	
MYNATAL ULTRACAPLET TABS	2	
MYNATE 90 PLUS TBCR	2	
NATACHEW CHEW	3	
NATALVIRT 90 DHA MISC	2	
NATALVIRT CA MISC	3	
NATELLE ONE CAPS	3	
NEEVO DHA CAPS	3	
NESTABS ABC MISC	3	
NESTABS DHA MISC	2	
NESTABS TABS	3	
NEWGEN TABS	3	
NEXA PLUS CAPS	3	
OB COMPLETE ONE CAPS	3	
OB COMPLETE PETITE CAPS	3	
OB COMPLETE PREMIER TABS	3	
OB COMPLETE/DHA CAPS	3	
OBSTETRIX DHA MISC	2	RX/OTC
OBTREX DHA MISC	2	RX/OTC
PAIRE OB MISC	2	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

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Drug Name	Drug Tier	Requirements/ Limits
PNV FERROUS FUMARATE/DOCUSATE/FOLIC ACID TABS	3	
PNV OB+DHA MISC	2	
PNV-DHA+DOCUSATE CAPS	3	
PNV-OMEGA CAPS	3	
PNV-SELECT TABS	3	
PNV-TOTAL CAPS	3	
PNV-VP-U CAPS	2	
PR NATAL 400 EC MISC	3	
PR NATAL 400 MISC	3	
PR NATAL 430 EC MISC	2	
PR NATAL 430 MISC	2	
PREFERA OB + DHA MISC	2	
PREFERA OB TABS	3	
PREFOL-DHA CAPS	3	
PRENA1 PEARL CPCR	3	
PRENA1 PLUS/QUATREFOLIC MISC	3	
PRENAISSANCE 90 DHA MISC	2	
PRENAISSANCE BALANCE CAPS	3	
PRENAISSANCE DHA MISC	2	
PRENAISSANCE HARMONY DHA MISC	3	
PRENAISSANCE NEXT TABS	3	
PRENAISSANCE NEXT-B TABS	3	
PRENAISSANCE PLUS CAPS	3	

Drug Name	Drug Tier	Requirements/ Limits
PRENAISSANCE PROMISE MISC	3	
PRENATA CHEW	2	
PRENATAL 19 CHEW 30UNIT-1000UNIT-20MG-3MG-200MG-29MG-7MG-15MG-3MG-12MCG-400UNIT-1MG-20MG-100MG	2	
PRENATAL 19 TABS 30UNIT-1000UNIT-20MG-25MG-3MG-200MG-29MG-7MG-15MG-3MG-12MCG-400UNIT-1MG-20MG-100MG	3	
<i>prenatal vit w/ docusate-fe fumarate-folic acid tabs</i>	1	
<i>prenatal vit w/ docusate-iron carbonyl-folic acid tabs</i>	1	
<i>prenatal vit w/ ferrous fumarate-folic acid chew</i>	1	
<i>prenatal vit w/ ferrous fumarate-l methylfolate-folic acid tabs</i>	1	
<i>prenatal without a w/ fe fumarate-l methylfolate-fa-dha caps</i>	1	
PRENATAL-U CAPS	2	
PRENATE DHA CAPS	2	QL(1 ea daily)
PRENATE ELITE TABS	2	
PRENATE ENHANCE CAPS	3	
PRENATE ESSENTIAL CAPS	3	
PRENATE MINI CAPS	3	
PRENATE PIXIE CAPS	3	
PRENATE RESTORE CAPS	3	
PREQUE 10 TABS	3	
R-NATAL OB CAPS	3	

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Drug Name	Drug Tier	Requirements/ Limits
RELNATE DHA CAPS	3	
RULAVITE DHA CAPS	3	
SE-NATAL 19 CHEW 30UNIT-1000UNIT- 100MG-20MG-3MG- 200MG-29MG-7MG-15MG- 3MG-12MCG-400UNIT- 1MG-20MG	2	
SE-NATAL 19 TABS 30UNIT-1000UNIT-20MG- 25MG-200MG-29MG-7MG- 15MG-3MG-12MCG- 400UNIT-3MG-20MG- 1MG-100MG	3	
SELECT-OB CHEW 1700UNIT-29MG-30UNIT- 15MG-25MG-1.6MG- 15MG-1.8MG-5MCG- 400UNIT-1MG-2.5MG- 60MG	3	
SELECT-OB+DHA MISC	3	
TARON-BC MISC	3	
TARON-C DHA CAPS	2	
TARON-PREX CAPS	3	
THRIVITE 19 TABS	3	
TL FOLATE TABS	3	
TL-CARE DHA CAPS	3	
TRI-TABS DHA MISC	2	
TRICARE PRENATAL COMPLEAT MISC	3	
TRICARE PRENATAL DHA ONE CAPS	3	
TRINATAL GT TABS	2	
TRIVEEN-DUO DHA MISC	3	
TRIVEEN-PRX RNF CAPS	3	

Drug Name	Drug Tier	Requirements/ Limits
ULTIMATECARE ONE CAPS	3	
ULTIMATECARE ONE NF CAPS	3	
VEMAVITE-PRX 2 CAPS	3	
VENA-BAL DHA MISC	2	
VINACAL B MISC	3	
VINATE C TABS	2	
VINATE CALCIUM TABS	2	
VINATE DHA RF CAPS	3	
VIRT-ADVANCE TABS	2	
VIRT-C DHA CAPS	2	
VIRT-CARE ONE CAPS	3	
VIRT-NATE DHA CAPS	3	
VIRT-PN DHA CAPS	3	
VIRT-PN PLUS CAPS	3	
VIRT-PN TABS	3	
VIRT-VITE GT TABS	2	
VIRTPREX CAPS	3	
VITAFOL ULTRA CAPS	2	
VITAFOL-NANO TABS	3	
VITAFOL-ONE CAPS	3	
VITAMEDMD PLUS RX/QUATREFOLIC MISC	3	
VITAPEARL CPCR	3	
VIVA DHA CAPS	3	
VP CH ULTRA CAPS	3	

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Drug Name	Drug Tier	Requirements/ Limits
VP-CH PLUS CAPS	3	
VP-CH-PNV CAPS	3	
VP-GGR-B6 PRENATAL TABS	3	
VP-HEME OB + DHA MISC	2	
VP-HEME OB TABS	3	
VP-PNV-DHA CAPS	3	
ZATEAN-CH CAPS	3	
ZATEAN-PN DHA CAPS	3	
ZATEAN-PN PLUS CAPS	3	
ZATEAN-PN TABS	3	
MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms		
Central Muscle Relaxants		
AMRIX CP24	3	ST; QL(1 ea daily)
<i>baclofen tabs</i>	1	
<i>carisoprodol tabs</i>	1	
<i>chlorzoxazone tabs</i>	1	
<i>cyclobenzaprine hcl tabs</i>	1	
FEXMID TABS (Use Cyclobenzaprine HCl)	GP	
GABLOFEN SOLN	SP	PA
LIORESAL INTRATHECAL SOLN	SP	PA
LORZONE TABS	3	
<i>metaxalone tabs</i>	1	
<i>methocarbamol tabs or 500 mg, 750 mg</i>	1	
<i>orphenadrine citrate tb12 or 100 mg</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
PARAFON FORTE DSC TABS (Use Chlorzoxazone)	GP	
ROBAXIN TABS OR 500 MG (Use Methocarbamol)	GP	
ROBAXIN-750 TABS (Use Methocarbamol)	GP	
SKELAXIN TABS (Use Metaxalone)	GP	
SOMA TABS (Use Carisoprodol)	GP	
<i>tizanidine hcl caps</i>	1	
<i>tizanidine hcl tabs</i>	1	
ZANAFLEX CAPS (Use Tizanidine HCl)	GP	
ZANAFLEX TABS (Use Tizanidine HCl)	GP	
Direct Muscle Relaxants		
DANTRIUM CAPS (Use Dantrolene Sodium)	GP	
<i>dantrolene sodium caps or 100 mg, 25 mg, 50 mg</i>	1	
Muscle Relaxant Combinations		
<i>carisoprodol w/ aspirin & codeine tabs</i>	1	
<i>carisoprodol w/ aspirin tabs</i>	1	
CYCLO/GABA10/300 PACK THPK	3	PA
Viscosupplements		
EUFLEXXA SOSY	SP	PA
HYALGAN SOSY	SP	PA
ORTHOVISC SOSY	SP	PA
SYNVISC ONE SOSY	SP	PA
SYNVISC SOSY	SP	PA
NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus		
Nasal Agent Combinations		

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

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Drug Name	Drug Tier	Requirements/Limits
DYMISTA SUSP	3	Limit 1 inhaler per month; QL(0.77 gm daily)
Nasal Agents - Misc.		
TICASPRAY THPK	3	PA
Nasal Anti-infectives		
BACTROBAN NASAL OINT	2	
Nasal Antiallergy		
ASTEPRO SOLN (Use Azelastine HCl)	GP	QL(1 ml daily)
azelastine hcl soln 0.1 %	1	Limit 30mls per month; QL(1.2 ml daily)
azelastine hcl soln 0.15 %	1	QL(1 ml daily)
olopatadine hcl (nasal) soln	1	
PATANASE SOLN (Use Olopatadine HCl (Nasal))	GP	
Nasal Anticholinergics		
ATROVENT SOLN (Use Ipratropium Bromide (Nasal))	GP	
ipratropium bromide (nasal) soln	1	
Nasal Steroids		
BECONASE AQ SUSP	3	Limit 2 inhalers per month; QL(1.67 gm daily)
budesonide (nasal) susp	1	Limit 2 inhalers per month; QL(0.6 ml daily); RX/OTC
FLONASE ALLERGY RELIEF CHILDRENS SUSP (Use Fluticasone Propionate (Nasal))	GP	Limit 2 inhalers per month; QL(1.2 ml daily); RX/OTC

Drug Name	Drug Tier	Requirements/Limits
FLONASE ALLERGY RELIEF SUSP (Use Fluticasone Propionate (Nasal))	GP	Limit 2 inhalers per month; QL(1.2 ml daily); RX/OTC
FLONASE SUSP (Use Fluticasone Propionate (Nasal))	GP	Limit 2 inhalers per month; QL(1.2 ml daily); RX/OTC
flunisolide (nasal) soln	1	
fluticasone propionate (nasal) susp	1	Limit 2 inhalers per month; QL(1.2 ml daily); RX/OTC
mometasone furoate (nasal) susp	1	Limit 2 inhalers per month; QL(1.2 gm daily)
NASONEX SUSP (Use Mometasone Furoate (Nasal))	GP	Limit 2 inhalers per month; QL(1.2 gm daily)
OMNARIS SUSP	3	Limit 1 inhaler per month; QL(0.42 gm daily)
QNASL AERS	3	Limit 1 inhaler per month; QL(0.29 gm daily)
QNASL CHILDRENS AERS	3	Limit 1 inhaler per month; QL(0.17 gm daily)
RHINOCORT AQUA SUSP (Use Budesonide (Nasal))	GP	Limit 2 inhalers per month; QL(0.6 ml daily); RX/OTC
VERAMYST SUSP	3	Limit 1 inhaler per month; QL(0.34 gm daily)

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Drug Name	Drug Tier	Requirements/Limits
ZETONNA AERS	3	Limit 1 inhaler per month; QL(0.3 gm daily)
Sympathomimetic Decongestants		
ADRENALIN SOLN	3	
TYZINE PEDIATRIC NASAL DROPS SOLN	3	
TYZINE SOLN	3	
NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles		
ALS Agents		
RILUTEK TABS (Use Riluzole)	GP	
<i>riluzole tabs</i>	1	
Neuromuscular Blocking Agent - Neurotoxins		
BOTOX SOLR	SP	PA
OPHTHALMIC AGENTS - Drugs to Treat the Eye		
Artificial Tears and Lubricants		
LACRISERT INST	3	
Beta-blockers - Ophthalmic		
BETAGAN SOLN (Use Levobunolol HCl)	GP	
<i>betaxolol hcl (ophth) soln</i>	1	
BETIMOL SOLN	2	
BETOPTIC-S SUSP	2	
<i>carteolol hcl (ophth) soln</i>	1	
COMBIGAN SOLN	3	
COSOPT PF SOLN	3	
COSOPT SOLN (Use Dorzolamide HCl-Timolol Maleate)	GP	
<i>dorzolamide hcl-timolol maleate soln</i>	1	

Drug Name	Drug Tier	Requirements/Limits
ISTALOL SOLN	2	
<i>levobunolol hcl soln</i>	1	
METIPRANOLOL SOLN	3	
<i>timolol maleate (ophth) solg</i>	1	
<i>timolol maleate (ophth) soln</i>	1	
TIMOPTIC OCUDOSE SOLN	3	
TIMOPTIC SOLN (Use Timolol Maleate (Ophth))	GP	
TIMOPTIC-XE SOLG (Use Timolol Maleate (Ophth))	GP	
Cycloplegic Mydriatics		
<i>atropine sulfate (ophthalmic) soln</i>	1	
ATROPINE SULFATE OINT OP 1 %	2	
ATROPINE SULFATE SOLN OP 1 %	2	
CYCLOGYL SOLN (Use Cyclopentolate HCl)	GP	
CYCLOMYDRIL SOLN	3	
<i>cyclopentolate hcl soln</i>	1	
<i>homatropine hbr soln</i>	1	
ISOPTO ATROPINE SOLN (Use Atropine Sulfate (Ophthalmic))	GP	
MYDRIACYL SOLN (Use Tropicamide)	GP	
<i>tropicamide soln</i>	1	
Miotics		
ISOPTO CARPINE SOLN (Use Pilocarpine HCl)	GP	
PHOSPHOLINE IODIDE SOLR	2	
<i>pilocarpine hcl soln</i>	1	
Ophthalmic Adrenergic Agents		

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Drug Name	Drug Tier	Requirements/Limits
ALPHAGAN P SOLN 0.1 %	2	
ALPHAGAN P SOLN 0.15 % (Use Brimonidine Tartrate)	GP	
<i>apraclonidine hcl soln</i>	1	
<i>brimonidine tartrate soln</i>	1	
IOPIDINE SOLN 0.5 % (Use Apraclonidine HCl)	GP	
IOPIDINE SOLN 1 %	3	
SIMBRINZA SUSP	3	
Ophthalmic Anti-infectives		
AZASITE SOLN	3	Limit 5mls per month;QL(0.17 ml daily)
BACITRACIN OINT OP 500 UNIT/GM	2	
<i>bacitracin-polymyxin b (ophth) oint</i>	1	
BESIVANCE SUSP	3	
BLEPH-10 SOLN (Use Sulfacetamide Sodium (Ophth))	GP	
CILOXAN OINT	2	
CILOXAN SOLN (Use Ciprofloxacin HCl (Ophth))	GP	
<i>ciprofloxacin hcl (ophth) soln</i>	1	
<i>erythromycin (ophth) oint</i>	1	
GARAMYCIN SOLN (Use Gentamicin Sulfate (Ophth))	GP	
<i>gatifloxacin (ophth) soln</i>	1	
<i>gentamicin sulfate (ophth) oint</i>	1	
<i>gentamicin sulfate (ophth) soln</i>	1	
<i>levofloxacin (ophth) soln</i>	1	

Drug Name	Drug Tier	Requirements/Limits
MOXEZA SOLN	2	
NATACYN SUSP	2	
<i>neomycin-bacitracin zn-polymyxin oint</i>	1	
<i>neomycin-polymyxin-gramicidin soln</i>	1	
NEOSPORIN SOLN (Use Neomycin-Polymyxin-Gramicidin)	GP	
OCUFLOX SOLN (Use Ofloxacin (Ophth))	GP	QL(5 ml per fill retail,5 ml per fill mail)
<i>ofloxacin (ophth) soln</i>	1	QL(5 ml per fill retail,5 ml per fill mail)
<i>polymyxin b-trimethoprim soln</i>	1	
POLYTRIM SOLN (Use Polymyxin B-Trimethoprim)	GP	
<i>sulfacetamide sodium (ophth) oint</i>	1	
<i>sulfacetamide sodium (ophth) soln</i>	1	
<i>tobramycin (ophth) soln</i>	1	
TOBREX OINT	2	
TOBREX SOLN (Use Tobramycin (Ophth))	GP	
<i>trifluridine soln</i>	1	
VIGAMOX SOLN	2	
VIROPTIC SOLN (Use Trifluridine)	GP	
ZIRGAN GEL	3	
ZYMAXID SOLN (Use Gatifloxacin (Ophth))	GP	
Ophthalmic Decongestants		
<i>naphazoline hcl soln</i>	1	
<i>phenylephrine hcl (ophth) soln</i>	1	
Ophthalmic Immunomodulators		

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Drug Name	Drug Tier	Requirements/ Limits
RESTASIS EMUL	3	Limit 60 per month;QL(2.14 ea daily)
Ophthalmic Integrin Antagonists		
XIIDRA SOLN	3	PA
Ophthalmic Local Anesthetics		
AKTEN GEL	3	
ALCAINE SOLN (Use Proparacaine HCl)	GP	
<i>proparacaine hcl soln</i>	1	
<i>tetracaine hcl (ophth) soln</i>	1	
Ophthalmic Steroids		
ALREX SUSP	3	
<i>bacitracin-poly-neomycin-hc oint</i>	1	QL(4 gm per fill retail,4 gm per fill mail)
BLEPHAMIDE S.O.P. OINT	2	
BLEPHAMIDE SUSP	2	
<i>dexamethasone sodium phosphate (ophth) soln</i>	1	
DEXAMETHASONE SODIUM PHOSPHATE SOLN OP 0.1 %	2	
DUREZOL EMUL	3	
FLAREX SUSP	2	
<i>fluorometholone (ophth) susp</i>	1	
FML FORTE SUSP	2	
FML LIQUIFILM SUSP (Use Fluorometholone (Ophth))	GP	
FML OINT	2	
LOTEMAX GEL	3	
LOTEMAX OINT	3	

Drug Name	Drug Tier	Requirements/ Limits
LOTEMAX SUSP	3	
MAXIDEX SUSP	2	
MAXITROL OINT (Use Neomycin-Polymyxin-Dexameth)	GP	
MAXITROL SUSP (Use Neomycin-Polymyxin-Dexameth)	GP	
<i>neomycin-polymyxin-dexameth oint</i>	1	
<i>neomycin-polymyxin-dexameth susp</i>	1	
<i>neomycin-polymyxin-hc (ophth) susp</i>	1	
OMNIPRED SUSP (Use Prednisolone Acetate (Ophth))	GP	
PRED FORTE SUSP (Use Prednisolone Acetate (Ophth))	GP	
PRED MILD SUSP	2	
PRED-G S.O.P. OINT	3	
PRED-G SUSP	3	
<i>prednisolone acetate (ophth) susp</i>	1	
PREDNISOLONE SODIUM PHOSPHATE SOLN OP 1 %	2	
PREDNISOLONE/MOXIFLOXACIN SOLN	3	PA
PREDNISOLONE/MOXIFLOXACIN/BROMFENAC SOLN	3	PA
PREDNISOLONE/MOXIFLOXACIN/KETOROLAC SOLN	3	PA
<i>sulfacetamide sod-prednisolone soln</i>	1	
TOBRADEX OINT	3	
TOBRADEX ST SUSP	3	

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Drug Name	Drug Tier	Requirements/Limits
TOBRADEX SUSP (<i>Use Tobramycin-Dexamethasone</i>)	GP	QL(5 ml per fill retail,5 ml per fill mail)
<i>tobramycin-dexamethasone susp</i>	1	QL(5 ml per fill retail,5 ml per fill mail)
VEXOL SUSP	3	
ZYLET SUSP	3	Limit 5mls per month;QL(0.17 ml daily)
Ophthalmic Surgical Aids		
GELFILM OP FILM	3	
Ophthalmics - Misc.		
ACULAR LS SOLN (<i>Use Ketorolac Tromethamine (Ophth)</i>)	GP	
ACULAR SOLN (<i>Use Ketorolac Tromethamine (Ophth)</i>)	GP	
ACUVAIL SOLN	3	
ALOCRIOL SOLN	3	
ALOMIDE SOLN	2	
<i>azelastine hcl (ophth) soln</i>	1	
AZOPT SUSP	2	Limit 10mls per month;QL(0.4 ml daily)
BEPREVE SOLN	3	ST; Limit 10mls per month;QL(0.34 ml daily)
<i>bromfenac sodium (ophth) soln</i>	1	
BROMFENAC SOLN	3	
<i>cromolyn sodium (ophth) soln</i>	1	
CYSTARAN SOLN	SP	PA
<i>diclofenac sodium (ophth) soln</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>dorzolamide hcl soln</i>	1	Limit 10mls per month;QL(0.34 ml daily)
ELESTAT SOLN (<i>Use Epinastine HCl (Ophth)</i>)	GP	
EMADINE SOLN	3	
<i>epinastine hcl (ophth) soln</i>	1	
<i>flurbiprofen sodium soln</i>	1	
ILEVRO SUSP	3	
<i>ketorolac tromethamine (ophth) soln</i>	1	
LASTACAFT SOLN	2	
NEVANAC SUSP	3	
OCUFEN SOLN (<i>Use Flurbiprofen Sodium</i>)	GP	
<i>olopatadine hcl soln</i>	1	Limit 10mls per month;QL(0.34 ml daily)
OPTIVAR SOLN (<i>Use Azelastine HCl (Ophth)</i>)	GP	
PAREMYD SOLN	3	
PATADAY SOLN	3	ST; Limit 2.5mls per month;QL(0.09 ml daily)
PATANOL SOLN (<i>Use Olopatadine HCl</i>)	GP	Limit 10mls per month;QL(0.34 ml daily)
PROLENSA SOLN	3	
TRUSOPT SOLN (<i>Use Dorzolamide HCl</i>)	GP	Limit 10mls per month;QL(0.34 ml daily)
Prostaglandins - Ophthalmic		
BIMATOPROST SOLN	2	Limit 2.5mls per month;QL(0.09 ml daily)

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Drug Name	Drug Tier	Requirements/Limits
<i>latanoprost soln</i>	1	Limit 2.5mls per month;QL(0.09 ml daily)
LUMIGAN SOLN	2	Limit 2.5mls per month;QL(0.09 ml daily)
TRAVATAN Z SOLN	2	Limit 2.5mls per month;QL(0.09 ml daily)
<i>travoprost soln</i>	1	Limit 2.5mls per month;QL(0.09 ml daily)
XALATAN SOLN (Use <i>Latanoprost</i>)	GP	Limit 2.5mls per month;QL(0.09 ml daily)
ZIOPTAN SOLN	3	

OTIC AGENTS - Drugs to Treat the Ear

Otic Agents - Miscellaneous

<i>acetic acid (otic) soln</i>	1	
<i>acetic acid-aluminum acetate soln</i>	1	

Otic Anti-infectives

CETRAXAL SOLN (Use <i>Ciprofloxacin HCl (Otic)</i>)	GP	
<i>ciprofloxacin hcl (otic) soln</i>	1	
FLOXIN OTIC SOLN (Use <i>Ofloxacin (Otic)</i>)	GP	
<i>ofloxacin (otic) soln</i>	1	

Otic Combinations

<i>antipyrine-benzocaine soln</i>	1	
CIPRO HC SUSP	3	
CIPRODEX SUSP	2	
COLY-MYCIN S SUSP	3	

Drug Name	Drug Tier	Requirements/Limits
CORTANE-B AQUEOUS SOLN	3	
CORTANE-B-OTIC SOLN (Use <i>Pramoxine-HC-Chloroxylenol</i>)	GP	
CORTISPORIN-TC SUSP	3	
<i>neomycin-polymyxin-hc (otic) soln</i>	1	
<i>neomycin-polymyxin-hc (otic) susp</i>	1	
OTICIN HC NR SOLN (Use <i>Pramoxine-HC-Chloroxylenol</i>)	GP	
OTOVEL SOLN	3	PA
PRAMOTIC LIQD	3	
<i>pramoxine-chloroxylenol liqd</i>	1	
<i>pramoxine-hc-chloroxylenol soln</i>	1	

Otic Steroids

DERMOTIC OIL (Use <i>Fluocinolone Acetonide (Otic)</i>)	GP	
<i>fluocinolone acetonide (otic) oil</i>	1	
<i>hydrocortisone w/acetic acid soln</i>	1	QL(10 ml per fill retail,30 ml per fill mail)
VOSOL HC SOLN (Use <i>Hydrocortisone w/Acetic Acid</i>)	GP	QL(10 ml per fill retail,30 ml per fill mail)

OXYTOCICS - Drugs to Prevent/Control Uterine Bleeding

Abortifacients/Agents for Cervical Ripening

PREPIDIL GEL	3	
PROSTIN E2 SUPP	3	

Oxytocics

<i>methylergonovine maleate soln ij 0.2 mg/ml</i>	SP	PA
<i>methylergonovine maleate tabs or 0.2 mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
PASSIVE IMMUNIZING AGENTS - Antibody Drugs to Treat Low Immune System		
Immune Serums		
BIVIGAM SOLN	SP	PA
FLEBOGAMMA DIF SOLN	SP	PA
GAMASTAN S/D INJ	SP	PA
GAMMAGARD LIQUID SOLN	SP	PA
GAMMAKED SOLN	SP	PA
GAMMAPLEX SOLN	SP	PA
GAMUNEX-C SOLN	SP	PA
HIZENTRA SOLN	SP	PA
OCTAGAM SOLN	SP	PA
PRIVIGEN SOLN	SP	PA
Monoclonal Antibodies		
SYNAGIS SOLN	SP	PA
Passive Immunizing Agents - Combinations		
HYQVIA KIT	SP	PA
PENICILLINS - Drugs to Treat Bacterial Infections		
Aminopenicillins		
<i>amoxicillin caps</i>	1	
<i>amoxicillin chew</i>	1	
AMOXICILLIN ER TB24	3	PA; QL(1 ea daily)
<i>amoxicillin susr</i>	1	
<i>amoxicillin tabs</i>	1	
<i>ampicillin caps</i>	1	
<i>ampicillin sodium solr ij 1 gm, 250 mg, 500 mg</i>	SP	PA

Drug Name	Drug Tier	Requirements/Limits
AMPICILLIN SODIUM SOLR IJ 125 MG	SP	PA
<i>ampicillin sodium solr iv 10 gm</i>	SP	PA
<i>ampicillin susr</i>	1	
MOXATAG TB24	3	PA; QL(1 ea daily)
Natural Penicillins		
BICILLIN L-A SUSP	SP	PA
PENICILLIN G POTASSIUM IN ISO-OSMOTIC DEXTROSE SOLN	SP	PA
<i>penicillin g potassium solr</i>	SP	PA
PENICILLIN G PROCAINE SUSP	SP	PA
PENICILLIN G SODIUM SOLR	SP	PA
<i>penicillin v potassium solr</i>	1	
<i>penicillin v potassium tabs</i>	1	
PFIZERPEN-G SOLR (Use Penicillin G Potassium)	SP	PA
Penicillin Combinations		
<i>amoxicillin & pot clavulanate chew</i>	1	
<i>amoxicillin & pot clavulanate susr</i>	1	
<i>amoxicillin & pot clavulanate tabs</i>	1	
<i>amoxicillin & pot clavulanate tb12</i>	1	
AMOXICILLIN/CLAVULANATE POTASSIUM CHEW	2	
<i>ampicillin & sulbactam sodium solr ij 1gm-2gm, 5gm-10gm</i>	SP	PA
<i>ampicillin & sulbactam sodium solr iv 5gm-10gm</i>	SP	PA
AUGMENTIN ES-600 SUSR (Use Amoxicillin & Pot Clavulanate)	GP	

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Drug Name	Drug Tier	Requirements/Limits
AUGMENTIN SUSR 125MG/5ML-31.25MG/5ML	2	
AUGMENTIN SUSR 250MG/5ML-62.5MG/5ML (Use Amoxicillin & Pot Clavulanate)	GP	
AUGMENTIN TABS 500MG-125MG, 875MG- 125MG (Use Amoxicillin & Pot Clavulanate)	GP	
AUGMENTIN XR TB12 (Use Amoxicillin & Pot Clavulanate)	GP	
BICILLIN C-R SUSP	SP	PA
<i>piperacillin sodium- tazobactam sodium solr 0.25gm-2gm, 0.375gm- 3gm, 0.5gm-4gm</i>	SP	PA
TIMENTIN SOLR 0.1GM- 3GM	SP	PA
UNASYN BULK PACK SOLR (Use Ampicillin & Sulbactam Sodium)	SP	PA
UNASYN SOLR 1GM-2GM (Use Ampicillin & Sulbactam Sodium)	SP	PA
ZOSYN SOLN 0.25GM/50ML-2GM/50ML- 5%, 0.375GM/50ML- 3GM/50ML-5%, 0.5GM/100ML- 4GM/100ML-5%	SP	PA
ZOSYN SOLR 0.25GM- 2GM, 0.375GM-3GM, 0.5GM-4GM (Use <i>Piperacillin Sodium- Tazobactam Sodium</i>)	SP	PA
Penicillinase-Resistant Penicillins		
BACTOCILL IN DEXTROSE SOLN	SP	PA
<i>dicloxacillin sodium caps</i>	1	
<i>nafcillin sodium solr ij 1 gm, 10 gm</i>	SP	PA
NAFCILLIN SODIUM SOLR IV 2 GM	SP	PA

Drug Name	Drug Tier	Requirements/Limits
NAFCILLIN SOLN	SP	PA
<i>oxacillin sodium solr 1 gm, 10 gm</i>	SP	PA
PROGESTINS - Hormone Replacement/Modifying Drugs		
Progestins		
AYGESTIN TABS (Use <i>Norethindrone Acetate</i>)	GP	
MAKENA OIL	SP	PA
<i>medroxyprogesterone acetate tabs</i>	1	
MEGACE ES SUSP (Use <i>Megestrol Acetate (Appetite)</i>)	GP	
<i>megestrol acetate (appetite) susp</i>	1	
<i>norethindrone acetate tabs</i>	1	
<i>progesterone micronized caps</i>	1	QL(2 ea daily)
PROMETRIUM CAPS (Use <i>Progesterone Micronized</i>)	GP	QL(2 ea daily)
PROVERA TABS (Use <i>Medroxyprogesterone Acetate</i>)	GP	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions		
Agents for Chemical Dependency		
<i>acamprosate calcium tbec</i>	1	
ANTABUSE TABS (Use <i>Disulfiram</i>)	GP	
CAMPRAL TBEC (Use <i>Acamprosate Calcium</i>)	GP	
<i>disulfiram tabs</i>	1	
Anti-Cataplectic Agents		
XYREM SOLN	SP	PA
Antidementia Agents		
ARICEPT ODT TBDP (Use <i>Donepezil Hydrochloride</i>)	GP	QL(1 ea daily)

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Drug Name	Drug Tier	Requirements/Limits
ARICEPT TABS (<i>Use Donepezil Hydrochloride</i>)	GP	QL(1 ea daily)
<i>donepezil hydrochloride tabs</i>	1	QL(1 ea daily)
<i>donepezil hydrochloride tbdp</i>	1	QL(1 ea daily)
EXELON CAPS (<i>Use Rivastigmine Tartrate</i>)	GP	
EXELON PT24 (<i>Use Rivastigmine</i>)	GP	
<i>galantamine hydrobromide cp24 16 mg, 24 mg, 8 mg</i>	1	QL(1 ea daily)
GALANTAMINE HYDROBROMIDE SOLN 4 MG/ML	2	QL(1 ml daily)
<i>galantamine hydrobromide tabs 12 mg, 4 mg, 8 mg</i>	1	
<i>memantine hcl soln</i>	1	
<i>memantine hcl tabs</i>	1	
NAMENDA SOLN (<i>Use Memantine HCl</i>)	GP	
NAMENDA TABS (<i>Use Memantine HCl</i>)	GP	
NAMENDA TITRATION PAK TABS (<i>Use Memantine HCl</i>)	GP	
NAMENDA XR CP24	3	PA
NAMENDA XR TITRATION PACK CP24	3	PA
RAZADYNE ER CP24 (<i>Use Galantamine Hydrobromide</i>)	GP	QL(1 ea daily)
RAZADYNE SOLN 4 MG/ML (<i>Use Galantamine Hydrobromide</i>)	GP	QL(1 ml daily)
RAZADYNE TABS 12 MG, 4 MG, 8 MG (<i>Use Galantamine Hydrobromide</i>)	GP	
<i>rivastigmine pt24</i>	1	
<i>rivastigmine tartrate caps</i>	1	
Combination Psychotherapeutics		

Drug Name	Drug Tier	Requirements/Limits
<i>chlordiazepoxide-amitriptyline tabs</i>	1	
<i>olanzapine-fluoxetine hcl caps</i>	1	
<i>perphenazine-amitriptyline tabs</i>	1	
SYMBYAX CAPS (<i>Use Olanzapine-Fluoxetine HCl</i>)	GP	
Fibromyalgia Agents		
SAVELLA TABS	3	PA; QL(2 ea daily)
SAVELLA TITRATION PACK MISC	3	PA; QL(2 ea daily)
Movement Disorder Drug Therapy		
<i>tetrabenazine tabs</i>	SP	
XENAZINE TABS (<i>Use Tetrabenazine</i>)	SP	
Multiple Sclerosis Agents		
AMPYRA TB12	2	PA
AUBAGIO TABS	SP	PA
AVONEX KIT	SP	PA
AVONEX PEN AJKT	SP	PA
AVONEX PSKT	SP	PA
BETASERON KIT	SP	PA
COPAXONE SOSY 20 MG/ML (<i>Use Glatiramer Acetate</i>)	SP	PA
COPAXONE SOSY 40 MG/ML	SP	PA
EXTAVIA KIT	SP	PA
GILENYA CAPS	SP	PA
<i>glatiramer acetate sosy</i>	1	PA
PLEGRIDY SOPN	SP	PA
PLEGRIDY SOSY	SP	PA

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Drug Name	Drug Tier	Requirements/Limits
PLEGRIDY STARTER PACK SOPN	SP	PA
PLEGRIDY STARTER PACK SOSY	SP	PA
REBIF REBIDOSE SOAJ	SP	PA
REBIF REBIDOSE TITRATIONPACK SOAJ	SP	PA
REBIF SOSY	SP	PA
REBIF TITRATION PACK SOSY	SP	PA
TECFIDERA CPDR	SP	PA
TECFIDERA STARTER PACK MISC	SP	PA
TYSABRI CONC	SP	PA
ZINBRYTA SOSY	SP	PA
Postherpetic Neuralgia (PHN) Agents		
GRALISE STARTER MISC	3	PA
GRALISE TABS	3	PA
Premenstrual Dysphoric Disorder (PMDD) Agents		
FLUOXETINE CAPS	2	
SARAFEM TABS	3	
Pseudobulbar Affect (PBA) Agents		
NUEDEXTA CAPS	2	
Psychotherapeutic and Neurological Agents -		
ERGOLOID MESYLATES TABS	3	
<i>ergoloid mesylates tabs</i>	1	
ORAP TABS (<i>Use Pimozide</i>)	GP	
<i>pimozide tabs</i>	1	
Restless Leg Syndrome (RLS) Agents		
HORIZANT TBCR	3	QL(1 ea daily)
Smoking Deterrents		

Drug Name	Drug Tier	Requirements/Limits
<i>bupropion hcl (smoking deterrent) tb12</i>	PV	PV
CHANTIX CONTINUING MONTHPAK TABS	PV	PV
CHANTIX STARTING MONTH PAK TABS	PV	PV
CHANTIX TABS	PV	PV
NICODERM CQ PT24 (<i>Use Nicotine</i>)	GP	PV
<i>nicotine pt24</i>	PV	PV
NICOTROL INHALER INHA	PV	PV
NICOTROL NS SOLN	PV	PV
ZYBAN TB12 (<i>Use Bupropion HCl (Smoking Deterrent)</i>)	GP	PV
Vasomotor Symptom Agents		
BRISDELLE CAPS	3	
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions		
Alpha-Proteinase Inhibitor (Human)		
ARALAST NP SOLR	SP	PA
GLASSIA SOLN	SP	PA
PROLASTIN-C SOLR	SP	PA
ZEMAIRA SOLR	SP	PA
Cystic Fibrosis Agents		
KALYDECO PACK	SP	PA
KALYDECO TABS	SP	PA
ORKAMBI TABS	SP	PA
PULMOZYME SOLN	SP	PA; Limit 75mls per month;QL(2.5 ml daily)
Pleural Sclerosing Agents		

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Drug Name	Drug Tier	Requirements/ Limits
SCLEROSOL INTRAPLEURAL AERP	SP	
STERILE TALC POWDER SUSR	SP	
Pulmonary Fibrosis Agents		
ESBRIET CAPS	SP	PA
OFEV CAPS	SP	PA
Respiratory Agents - Misc.		
SURFAXIN SUSP	3	PA
SULFONAMIDES - Drugs to Treat Bacterial Infections		
Sulfonamides		
SULFADIAZINE TABS	3	
TETRACYCLINES - Drugs to Treat Bacterial Infections		
Tetracyclines		
ADOXA CAPS 150 MG (Use Doxycycline (Monohydrate))	GP	
ADOXA PAK 1/100 TABS (Use Doxycycline (Monohydrate))	GP	ST
ADOXA PAK 1/150 TABS (Use Doxycycline (Monohydrate))	GP	ST
ADOXA PAK 2/100 TABS (Use Doxycycline (Monohydrate))	GP	ST
ADOXA TABS 100 MG, 50 MG, 75 MG (Use Doxycycline (Monohydrate))	GP	ST
<i>demeclocycline hcl tabs</i>	1	
DORYX MPC TBEC	3	PA
DORYX TBEC 50 MG (Use Doxycycline Hyclate)	GP	ST
<i>doxycycline (monohydrate) caps 100 mg, 150 mg, 50 mg, 75 mg</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
<i>doxycycline (monohydrate) susr 25 mg/5ml</i>	1	
<i>doxycycline (monohydrate) tabs 100 mg, 150 mg, 50 mg, 75 mg</i>	1	ST
<i>doxycycline hyclate caps or 100 mg, 50 mg</i>	1	
<i>doxycycline hyclate tabs or 100 mg, 20 mg</i>	1	
<i>doxycycline hyclate tbec or 100 mg, 150 mg, 50 mg, 75 mg</i>	1	ST
MINOCIN CAPS (Use Minocycline HCl)	GP	
<i>minocycline hcl caps 100 mg, 50 mg, 75 mg</i>	1	
<i>minocycline hcl tabs 100 mg, 50 mg</i>	1	
<i>minocycline hcl tabs 75 mg</i>	1	PA
<i>minocycline hcl tb24 135 mg, 45 mg, 90 mg</i>	1	ST
MONODOX CAPS (Use Doxycycline (Monohydrate))	GP	
NUTRIDOX KIT	3	PA
SOLODYN TB24	3	PA
TARGADOX TABS	3	PA
<i>tetracycline hcl caps</i>	1	
VIBRAMYCIN CAPS 100 MG (Use Doxycycline Hyclate)	GP	
VIBRAMYCIN SUSR 25 MG/5ML (Use Doxycycline (Monohydrate))	GP	
VIBRAMYCIN SYRP 50 MG/5ML	2	
THYROID AGENTS - Drugs to Regulate Thyroid Hormones		
Antithyroid Agents		
<i>methimazole tabs</i>	1	

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Drug Name	Drug Tier	Requirements/ Limits
<i>propylthiouracil tabs</i>	1	
TAPAZOLE TABS (<i>Use Methimazole</i>)	GP	
Thyroid Hormones		
ARMOUR THYROID TABS 120 MG, 15 MG, 180 MG, 240 MG, 300 MG	2	
ARMOUR THYROID TABS 30 MG, 60 MG, 90 MG (<i>Use Thyroid</i>)	3	
CYTOMEL TABS (<i>Use Liothyronine Sodium</i>)	3	
<i>levothyroxine sodium tabs</i>	1	
<i>liothyronine sodium tabs or 25 mcg, 5 mcg, 50 mcg</i>	1	
NATURE-THROID NT-2.5 TABS	3	
NATURE-THROID TABS 113.75 MG, 130 MG, 146.25 MG, 16.25 MG, 195 MG, 260 MG, 32.5 MG, 325 MG, 65 MG, 81.25 MG, 97.5 MG	2	
NATURE-THROID TABS 48.75 MG	3	
SYNTHROID TABS (<i>Use Levothyroxine Sodium</i>)	3	
<i>thyroid tabs</i>	1	
THYROLAR-1 TABS	2	
THYROLAR-1/2 TABS	2	
THYROLAR-1/4 TABS	2	
THYROLAR-2 TABS	2	
THYROLAR-3 TABS	2	
TIROSINT CAPS	3	

Drug Name	Drug Tier	Requirements/ Limits
WESTHROID TABS 113.75 MG, 130 MG, 146.25 MG, 16.25 MG, 195 MG, 260 MG, 32.5 MG, 325 MG, 65 MG, 81.25 MG, 97.5 MG	2	
WESTHROID TABS 162.5 MG, 48.75 MG	3	
WP THYROID TABS 113.75 MG, 130 MG, 16.25 MG, 32.5 MG, 65 MG, 81.25 MG, 97.5 MG	2	
WP THYROID TABS 48.75 MG	3	
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions		
Antispasmodics		
ANASPAZ TBDP (<i>Use Hyoscyamine Sulfate</i>)	GP	
ATROPINE SULFATE SOLN IJ 0.05 MG/ML, 0.8 MG/ML	SP	
<i>atropine sulfate soln ij 0.1 mg/ml, 0.4 mg/ml, 1 mg/ml</i>	SP	
BELLADONNA & OPIUM SUPP	3	
BELLADONNA ALKALOIDS & OPIUM SUPP	3	
BENTYL CAPS (<i>Use Dicyclomine HCl</i>)	GP	
BENTYL TABS (<i>Use Dicyclomine HCl</i>)	GP	
CANTIL TABS	3	
<i>chlordiazepoxide hcl-clidinium bromide caps</i>	1	
CUVPOSA SOLN	2	
<i>dicyclomine hcl caps</i>	1	
<i>dicyclomine hcl soln</i>	1	
<i>dicyclomine hcl tabs</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
DONNATAL ELIX 0.1037MG/5ML- 0.0065MG/5ML- 0.0194MG/5ML- 16.2MG/5ML	2	
DONNATAL EXTENTABS TBCR	2	
DONNATAL TABS 0.1037MG-0.0065MG- 0.0194MG-16.2MG (Use <i>Phenobarbital- Hyoscyamine-Atropine- Scopolamine</i>)	GP	
GASTRINEX NF CAPS	3	
<i>glycopyrrolate tabs or 1 mg, 2 mg</i>	1	
<i>hyoscyamine sulfate subl</i>	1	
<i>hyoscyamine sulfate tabs</i>	1	
<i>hyoscyamine sulfate tb12</i>	1	
<i>hyoscyamine sulfate tbdp</i>	1	
LEVBID TB12 (Use <i>Hyoscyamine Sulfate</i>)	GP	
LEVSIN TABS (Use <i>Hyoscyamine Sulfate</i>)	GP	
LEVSIN/SL SUBL (Use <i>Hyoscyamine Sulfate</i>)	GP	
LIBRAX CAPS (Use <i>Chlordiazepoxide HCl- Clidinium Bromide</i>)	GP	
<i>methscopolamine bromide tabs</i>	1	
PAMINE FORTE TABS (Use <i>Methscopolamine Bromide</i>)	GP	
PAMINE FQ KIT	3	
PAMINE TABS (Use <i>Methscopolamine Bromide</i>)	GP	
<i>phenobarbital- hyoscyamine-atropine- scopolamine tabs</i>	1	
<i>propantheline bromide tabs</i>	1	

Drug Name	Drug Tier	Requirements/Limits
ROBINUL FORTE TABS (Use <i>Glycopyrrolate</i>)	GP	
ROBINUL TABS OR 1 MG (Use <i>Glycopyrrolate</i>)	GP	
H-2 Antagonists		
<i>cimetidine hcl soln</i>	1	
<i>cimetidine tabs 200 mg</i>	1	RX/OTC
<i>cimetidine tabs 300 mg, 400 mg, 800 mg</i>	1	
<i>famotidine susr 40 mg/5ml</i>	1	
<i>famotidine tabs 20 mg</i>	1	RX/OTC
<i>famotidine tabs 40 mg</i>	1	
<i>nizatidine caps 150 mg, 300 mg</i>	1	
NIZATIDINE SOLN 15 MG/ML	2	
PEPCID AC MAXIMUM STRENGTH TABS (Use <i>Famotidine</i>)	GP	RX/OTC
PEPCID SUSR 40 MG/5ML (Use <i>Famotidine</i>)	GP	
PEPCID TABS 20 MG (Use <i>Famotidine</i>)	GP	RX/OTC
PEPCID TABS 40 MG (Use <i>Famotidine</i>)	GP	
<i>ranitidine hcl caps 150 mg, 300 mg</i>	1	
<i>ranitidine hcl syrp 15 mg/ml, 150 mg/10ml, 75 mg/5ml</i>	1	
<i>ranitidine hcl tabs 150 mg</i>	1	RX/OTC
<i>ranitidine hcl tabs 300 mg</i>	1	
TAGAMET HB TABS (Use <i>Cimetidine</i>)	GP	RX/OTC
ZANTAC 150 MAXIMUM STRENGTH TABS (Use <i>Ranitidine HCl</i>)	GP	RX/OTC
ZANTAC TABS 150 MG (Use <i>Ranitidine HCl</i>)	GP	RX/OTC

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Drug Name	Drug Tier	Requirements/Limits
ZANTAC TABS 300 MG (Use Ranitidine HCl)	GP	
Misc. Anti-Ulcer		
CARAFATE SUSP 1 GM/10ML	2	
CARAFATE TABS 1 GM (Use Sucralfate)	GP	
<i>sucralfate tabs</i>	1	
Proton Pump Inhibitors		
ACIPHEX SPRINKLE CPSP	3	PA
ACIPHEX TBEC (Use Rabeprazole Sodium)	GP	PA; QL(2 ea daily)
DEXILANT CPDR	3	PA; QL(1 ea daily)
<i>esomeprazole magnesium cpdr 20 mg</i>	1	PA; QL(1 ea daily); RX/OTC
<i>esomeprazole magnesium cpdr 40 mg</i>	1	PA; QL(1 ea daily)
ESOMEPRAZOLE STRONTIUM CPDR	3	PA; QL(1 ea daily)
FIRST-LANSOPRAZOLE SUSP	3	
FIRST-OMEPRAZOLE SUSP	3	
<i>lansoprazole cpdr 15 mg</i>	1	RX/OTC
<i>lansoprazole cpdr 30 mg</i>	1	
NEXIUM 24HR CPDR	3	PA; QL(1 ea daily); RX/OTC
NEXIUM CPDR 20 MG (Use Esomeprazole Magnesium)	GP	PA; QL(1 ea daily); RX/OTC
NEXIUM CPDR 40 MG	3	PA; QL(1 ea daily)
NEXIUM CPDR 40 MG (Use Esomeprazole Magnesium)	GP	PA; QL(1 ea daily)
NEXIUM PACK 10 MG, 2.5 MG, 20 MG, 40 MG, 5 MG	3	PA
OMEPRAZOLE + SYRSPEND SFALKA SUSP	3	

Drug Name	Drug Tier	Requirements/Limits
<i>omeprazole cpdr</i>	1	
<i>pantoprazole sodium tbec or 20 mg, 40 mg</i>	1	
PREVACID CPDR 15 MG (Use Lansoprazole)	GP	RX/OTC
PREVACID CPDR 30 MG (Use Lansoprazole)	GP	
PREVACID SOLUTAB TBDP	3	QL(1 ea daily); AL
PRIOLOSEC CPDR 10 MG, 20 MG, 40 MG (Use Omeprazole)	GP	
PRIOLOSEC PACK 10 MG, 2.5 MG	3	PA
PROTONIX PACK OR 40 MG	3	
PROTONIX TBEC OR 20 MG, 40 MG (Use Pantoprazole Sodium)	GP	
<i>rabeprazole sodium tbec</i>	1	PA; QL(2 ea daily)
Ulcer Drugs - Prostaglandins		
CYTOTEC TABS (Use Misoprostol)	GP	
<i>misoprostol tabs</i>	1	
Ulcer Therapy Combinations		
<i>amoxicillin-clarithromycin w/ lansoprazole misc</i>	1	
OMECLAMOX-PAK MISC	3	
<i>omeprazole-sodium bicarbonate caps 40mg-1100mg</i>	1	
<i>omeprazole-sodium bicarbonate pack 20mg-1680mg, 40mg-1680mg</i>	1	
PREVPAC MISC (Use Amoxicillin-Clarithromycin w/ Lansoprazole)	GP	
PYLERA CAPS	3	
ZEGERID CAPS 40MG-1100MG (Use Omeprazole-Sodium Bicarbonate)	GP	

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Drug Name	Drug Tier	Requirements/Limits
ZEGERID PACK 20MG-1680MG, 40MG-1680MG (Use Omeprazole-Sodium Bicarbonate)	GP	
URINARY ANTI-INFECTIVES - Drugs to Treat Bladder/Kidney Infections		
Urinary Anti-infective Combinations		
<i>methenamine-hyosc-methylene blue-benzoic acid-phenyl sal tabs</i>	1	
<i>methenamine-hyosc-methylene blue-sod phos-phenyl sal caps</i>	1	
<i>methenamine-hyosc-methylene blue-sod phos-phenyl sal tabs</i>	1	
URETRON D/S TABS	3	
URIMAR-T TABS	3	
Urinary Anti-infectives		
FURADANTIN SUSP (Use Nitrofurantoin)	GP	
HIPREX TABS (Use Methenamine Hippurate)	GP	
MACROBID CAPS (Use Nitrofurantoin Monohyd Macro)	GP	
MACRODANTIN CAPS (Use Nitrofurantoin Macrocrystal)	GP	
<i>methenamine hippurate tabs</i>	1	
<i>methenamine mandelate tabs</i>	1	
MONUROL PACK	3	
<i>nitrofurantoin macrocrystal caps</i>	1	
<i>nitrofurantoin monohyd macro caps</i>	1	
<i>nitrofurantoin susp</i>	1	
URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms		
Urinary Antispasmodic - Antimuscarinics		

Drug Name	Drug Tier	Requirements/Limits
<i>darifenacin hydrobromide tb24</i>	1	
DETROL LA CP24 (Use Tolterodine Tartrate)	GP	QL(1 ea daily)
DETROL TABS (Use Tolterodine Tartrate)	GP	QL(2 ea daily)
DITROPAN XL TB24 (Use Oxybutynin Chloride)	GP	
ENABLEX TB24 (Use Darifenacin Hydrobromide)	GP	
GELNIQUE GEL	3	
<i>oxybutynin chloride syrup</i>	1	
<i>oxybutynin chloride tabs</i>	1	
<i>oxybutynin chloride tb24</i>	1	
OXYTROL FOR WOMEN PTTW	3	RX/OTC
OXYTROL PTTW	3	RX/OTC
<i>tolterodine tartrate cp24 2 mg, 4 mg</i>	1	QL(1 ea daily)
<i>tolterodine tartrate tabs 1 mg, 2 mg</i>	1	QL(2 ea daily)
TOVIAZ TB24	2	QL(1 ea daily)
<i>tropium chloride cp24</i>	1	
<i>tropium chloride tabs</i>	1	
VESICARE TABS	3	
Urinary Antispasmodics - Beta-3 Adrenergic		
MYRBETRIQ TB24	3	QL(1 ea daily)
Urinary Antispasmodics - Cholinergic Agonists		
<i>bethanechol chloride tabs</i>	1	
URECHOLINE TABS (Use Bethanechol Chloride)	GP	
Urinary Antispasmodics - Direct Muscle Relaxants		
<i>flavoxate hcl tabs</i>	1	
VACCINES		

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Drug Name	Drug Tier	Requirements/Limits
Bacterial Vaccines		
BCG VACCINE INJ	SP	
MENOMUNE-A/C/Y/W-135 INJ	SP	PA
VIVOTIF BERNA CPDR	3	QL(4 ea per fill retail,4 ea per fill mail)
VIVOTIF CPDR	3	QL(4 ea per fill retail,4 ea per fill mail)
Viral Vaccines		
RECOMBIVAX HB SUSP	SP	PA
ROTATEQ SOLN	3	
VAGINAL PRODUCTS - Drugs to Treat Vaginal Infections and Low Hormones		
Miscellaneous Vaginal Products		
<i>acetic acid-oxyquinoline vaginal gel</i>	1	
FEM PH GEL (<i>Use Acetic Acid-Oxyquinoline Vaginal</i>)	GP	
Spermicides		
ENCARE SUPP	PV	PV
<i>nonoxynol-9 gel</i>	PV	PV
OPTIONS CONCEPTROL VAGINAL CONTRACEPTIVE GEL (<i>Use Nonoxynol-9</i>)	GP	PV
OPTIONS GYNOL II VAGINAL CONTRACEPTIVE GEL	PV	PV
SHUR-SEAL GEL	PV	PV
TODAY SPONGE MISC	PV	PV
VCF VAGINAL CONTRACEPTIVE FILM FILM	PV	PV
VCF VAGINAL CONTRACEPTIVE FOAM FOAM	PV	PV
Vaginal Anti-infectives		

Drug Name	Drug Tier	Requirements/Limits
AVC CREA	3	
CLEOCIN CREA VA 2 % (<i>Use Clindamycin Phosphate Vaginal</i>)	GP	
CLEOCIN SUPP VA 100 MG	2	
<i>clindamycin phosphate vaginal crea</i>	1	
CLINDESSE CREA	3	
GYNAZOLE-1 CREA	3	
METROGEL-VAGINAL GEL (<i>Use Metronidazole Vaginal</i>)	GP	
<i>metronidazole vaginal gel</i>	1	
<i>miconazole nitrate vaginal supp</i>	1	
TERAZOL 3 CREA (<i>Use Terconazole Vaginal</i>)	GP	
TERAZOL 7 CREA (<i>Use Terconazole Vaginal</i>)	GP	
<i>terconazole vaginal crea</i>	1	
<i>terconazole vaginal supp</i>	1	
Vaginal Estrogens		
ESTRACE CREA VA 0.1 MG/GM	2	
ESTRING RING	3	QL(90 ea per 90 days retail)
FEMRING RING	3	QL(1 ea per 90 days retail,1 ea per 90 days mail)
PREMARIN CREA VA 0.625 MG/GM	2	
VAGIFEM TABS	3	
Vaginal Progestins		
CRINONE GEL 4 %	3	
CRINONE GEL 8 %	3	PA

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

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Drug Name	Drug Tier	Requirements/ Limits
ENDOMETRIN INST	3	PA
VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions		
Anaphylaxis Therapy Agents		
ADRENALINE SOAJ	SP	Limit 4mls per month;QL(0.14 ea daily,2 ea per fill retail)
AUVI-Q SOAJ	SP	Limit 4mls per month;QL(0.14 ea daily,2 ea per fill retail)
EPINEPHRINE SOAJ	SP	Limit 4mls per month;QL(0.14 ea daily,2 ea per fill retail)
EPIPEN 2-PAK SOAJ	SP	Limit 4mls per month;QL(0.14 ea daily,2 ea per fill retail)
EPIPEN-JR 2-PAK SOAJ	SP	Limit 4mls per month;QL(0.14 ea daily,2 ea per fill retail)
Neurogenic Orthostatic Hypotension (NOH) -		
NORTHERA CAPS	SP	PA
Vasopressors		
<i>midodrine hcl tabs</i>	1	
VITAMINS		
Oil Soluble Vitamins		
BABY DDROPS LIQD (<i>Use Cholecalciferol</i>)	GP	AL; PV
<i>cholecalciferol caps 400 unit</i>	PV	AL; PV
<i>cholecalciferol chew 1000 unit</i>	PV	PV
<i>cholecalciferol liqd 400 unit/ml, 400 unt/0.03ml</i>	PV	AL; PV
<i>cholecalciferol tabs 400 unit</i>	PV	AL; PV
D-VI-SOL LIQD (<i>Use Cholecalciferol</i>)	GP	AL; PV

Drug Name	Drug Tier	Requirements/ Limits
DRISDOL CAPS (<i>Use Ergocalciferol</i>)	GP	
<i>ergocalciferol caps</i>	1	
MEPHYTON TABS	2	
VITAMIN D2 TABS	PV	AL; PV
VITAMIN D3 LIQD	PV	AL; PV
WELLESSE VITAMIN D3 LIQD	PV	AL; PV

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

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ABILIFY 1 MG/ML	41	ACZONE 5 %	55	albuterol sulfate 2 mg, 4 mg	15
ABILIFY 10 MG, 15 MG, 2 MG, 20 MG, 30 MG, 5 MG	41	ACZONE 7.5 %	55	albuterol sulfate 2 mg/5ml	14
ABILIFY DISCMELT	41	ADAGEN	47	albuterol sulfate 4 mg, 8 mg	15
ABRAXANE	38	ADALAT CC 30 MG, 60 MG	47	ALCAINE	94
ABSORICA 10 MG, 20 MG, 25 MG, 35 MG, 40 MG	55	ADALAT CC 90 MG	47	alclometasone dipropionate	60
ABSORICA 30 MG	55	adapalene 0.1 %	55	ALDACTAZIDE 25MG- 25MG	67
ABSTRAL	6	ADAPALENE 0.1 %	55	ALDACTAZIDE 50MG- 50MG	67
acamprosate calcium	98	adapalene 0.3 %	55	ALDACTONE	68
ACANYA	55	ADCETRIS	34	ALDARA	64
acarbose	21	ADCIRCA	49	ALDURAZYME	70
ACCOLATE	13	ADDERALL	1	ALECENSA	36
ACCUPRIL	29	ADDERALL XR	1	alendronate sodium 10 mg, 5 mg	68
ACCURETIC	30	adefovir dipivoxil	43	alendronate sodium 35 mg, 70 mg	68
acebutolol hcl	46	ADEMPAS	49	alendronate sodium 40 mg	68
ACEON	29	ADOXA 100 MG, 50 MG, 75 MG	101	alendronate sodium 70 mg/75ml	68
acetaminophen w/ codeine	7	ADOXA 150 MG	101	ALFERON N	37
acetaminophen-salicylamide- phenyltoloxamine	5	ADOXA PAK 1/100	101	alfuzosin hcl	74
acetazolamide	67	ADOXA PAK 1/150	101	ALIMTA	34
acetic acid (otic)	96	ADOXA PAK 2/100	101	ALINIA	10
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acetic acid-oxyquinoline vaginal	106	ADRENALIN	92	ALKERAN 50 MG	33
acetylcysteine	54	ADVAIR DISKUS	14	allopurinol	75
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ACIPHEX SPRINKLE	104	ADVATE	75	ALOCRIAL	95
acitretin 10 mg	59	ADVICOR 20MG-1000MG, 20MG-500MG, 20MG- 750MG	28	ALOGLIPTIN	22
acitretin 17.5 mg	59	ADVICOR 40MG-1000MG	28	ALOGLIPTIN/METFORMIN HCL	21
acitretin 25 mg	59	ADZENYS XR-ODT	1	ALOGLIPTIN/PIOGLITAZONE	21
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ACTIVE OB	86	AFINITOR DISPERZ	36	ALPHAGAN P 0.1 %	93
ACTIVELLA	71	AFREZZA	23	ALPHAGAN P 0.15 %	93
ACTONEL	68	AGGRENOLX	76	ALPHANATE/VON WILLEBRANDFACTOR COMPLEX/HUMAN	75
ACTOPLUS MET	21	AGRYLIN	76	ALPHANINE SD	75
ACTOPLUS MET XR	21	AKNE-MYCIN	55		
ACTOS	23	AKTEN	94		
ACULAR	95	AKYNZEO	25		

ARZOL SILVER NITRATE		BACITRACIN 500 UNIT/GM	93
APPLICATORS	60	bacitracin 50000 unit	10
ASACOL HD	73	bacitracin-poly-neomycin-hc	94
ASCRIPITIN	5	bacitracin-polymyxin b	
ASMANEX HFA	14	(ophth)	93
ASMANEX TWISTHALER	120	baclofen	90
METERED DOSES	14	BACTOCILL IN DEXTROSE	98
ASMANEX TWISTHALER 14		BACTRIM	10
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ASMANEX TWISTHALER 7		BANZEL	17
METERED DOSES	14	BARACLUDGE 0.05 MG/ML	43
aspirin	5	BARACLUDGE 0.5 MG, 1 MG	43
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DIHYDROCODEINE	7	X1/2"	80
ASPIRIN/DIPYRIDAMOLE	76	BD NEEDLE/30G X 1/2"	80
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ASTEPRO	91	BELBUCA	8
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MG	12	BENEFIX	75
atorvastatin calcium	28	BENICAR	30
atovaquone	10	BENICAR HCT	30
atovaquone-proguanil hcl	32	BENLYSTA	46
ATRALIN	55	BENSAL HP	64
ATRIPLA	42	BENTYL	102
atropine sulfate (ophthalmic)	92	BENZAFLIN	55
ATROPINE SULFATE 0.05		BENZAFLIN WITH PUMP	55
MG/ML, 0.8 MG/ML	102	BENZAMYCIN	55
atropine sulfate 0.1 mg/ml, 0.4		benzonatate 100 mg, 200	
mg/ml, 1 mg/ml	102	mg	53
ATROPINE SULFATE 1 %	92	BENZONATATE 150 MG	53
ATROVENT	91	benzoyl peroxide 7 %	55
ATROVENT HFA	13	benzoyl peroxide-	
AUBAGIO	99	erythromycin	55
AUGMENTIN 125MG/5ML-		benztropine mesylate 0.5 mg, 1	
31.25MG/5ML	98	mg, 2 mg	39
AUGMENTIN 250MG/5ML-		benztropine mesylate 1	
62.5MG/5ML	98	mg/ml	39
AUGMENTIN 500MG-125MG,		BEPREVE	95
875MG-125MG	98		
AUGMENTIN ES-600	97		
AUGMENTIN XR	98		
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AVANDAMET	21		
AVANDARYL	22		
AVANDIA	23		
AVAPRO	30		
AVAR	55		
AVAR LS	55		
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azelastine hcl (ophth)	95		
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AZELEX	55		
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azithromycin 1 gm	78		
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mg/5ml	78		
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betaxolol hcl (ophth).....	92	budesonide (inhalation) 0.25 mg/2ml.....	14	calcipotriene.....	59
bethanechol chloride.....	105	budesonide (inhalation) 0.5 mg/2ml, 1 mg/2ml.....	14	calcipotriene-betamethasone dipropionate.....	60
BETHKIS.....	2	budesonide (nasal).....	91	calcitonin (salmon).....	68
BETIMOL.....	92	bumetanide 0.5 mg, 1 mg, 2 mg.....	67	calcitriol (topical).....	59
BETOPTIC-S.....	92	BUMEX.....	67	calcitriol 0.25 mcg, 0.5 mcg.....	70
bexarotene.....	37	BUNAVAIL.....	8	calcitriol 1 mcg/ml.....	70
BEYAZ.....	50	BUPAP.....	5	calcium acetate (phosphate binder).....	73
BIAXIN.....	79	BUPHENYL 3 GM/TSP.....	70	CALCIUM PNV.....	86
bicalutamide.....	35	BUPHENYL 500 MG.....	70	CAMBIA.....	82
BICILLIN C-R.....	98	buprenorphine hcl 2 mg, 8 mg.....	8	CAMPRAL.....	98
BICILLIN L-A.....	97	buprenorphine hcl-naloxone hcl dihydrate.....	8	CAMPTOSAR 100 MG/5ML, 40 MG/2ML.....	40
BICNU.....	33	bupropion hcl (smoking deterrent).....	100	CAMPTOSAR 300 MG/15ML.....	39
BIDIL.....	48	bupropion hcl 100 mg, 150 mg, 200 mg.....	19	CANASA.....	73
BILTRICIDE.....	10	bupropion hcl 100 mg, 75 mg.....	19	candesartan cilexetil.....	30
BIMATOPROST.....	95	bupropion hcl 150 mg, 300 mg.....	19	candesartan cilexetil- hydrochlorothiazide.....	31
BINOSTO.....	68	buspirone hcl.....	12	CANTIL.....	102
BIO-STATIN.....	26	BUSULFEX.....	33	CAPASTAT SULFATE.....	32
bisacodyl-peg 3350-pot chloride- sod bicarb-sod chloride.....	78	butalbital-acetaminophen.....	5	capecitabine.....	34
bisoprolol & hydrochlorothiazide.....	30	butalbital-acetaminophen- caffeine.....	5	CAPEX.....	60
bisoprolol fumarate.....	46	butalbital-acetaminophen- caffeine w/ codeine.....	7	CAPITAL/CODEINE.....	7
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BONIVA 3 MG/3ML.....	68	BYETTA.....	22	carbamazepine.....	17
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citalopram hydrobromide 10 mg.....	20	clindamycin phosphate (topical).....	55	CODEINE SULFATE 30 MG.....	6
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CLEOCIN PEDIATRIC GRANULES.....	11	clonidine hcl (adhd).....	1	COMPLETENATE.....	87
CLEOCIN PHOSPHATE 300 MG/2ML.....	11	clodogrel bisulfate.....	76	Compounded Drug.....	45
CLEOCIN PHOSPHATE 300 MG/2ML, 600 MG/4ML, 9 GM/60ML, 900 MG/6ML.....	11	clorazepate dipotassium.....	12	COMTAN.....	39
CLEOCIN PHOSPHATE 300MG/50ML-5%, 600MG/50ML- 5%, 900MG/50ML-5%.....	11	CLORPRES.....	31	CONCEPT DHA.....	87
CLEOCIN PHOSPHATE 600 MG/4ML.....	11	clotrimazole.....	84	CONCEPT OB.....	87
		clotrimazole (topical).....	58	CONCERTA 27 MG.....	1
				CONCERTA 36 MG, 54 MG.....	1

CONDYLOX.....	64	CUTIVATE.....	61	DAYTRANA.....	1
CONZIP.....	6	CUVPOSA.....	102	DDAVP 0.01 %.....	70
COPAXONE 20 MG/ML.....	99	cyanocobalamin.....	76	DDAVP 0.1 MG, 0.2 MG.....	70
COPAXONE 40 MG/ML.....	99	CYCLESSA.....	50	DDAVP 4 MCG/ML.....	70
COPEGUS.....	43	CYCLO/GABA10/300		decitabine.....	34
CORDARONE.....	13	PACK.....	90	DECON-G.....	54
CORDRAN.....	61	cyclobenzaprine hcl.....	90	DELESTROGEN 10 MG/ML.....	71
CORDRAN TAPE.....	61	CYCLOGYL.....	92	DELESTROGEN 20 MG/ML, 40	
COREG 12.5 MG, 25 MG, 6.25		CYCLOMYDRIL.....	92	MG/ML.....	71
MG.....	46	cyclopentolate hcl.....	92	DELZICOL.....	73
COREG 3.125 MG.....	46	cyclophosphamide 1 gm, 2 gm,		DEMADEX.....	67
COREG CR.....	46	500 mg.....	33	demeclocycline hcl.....	101
CORGARD.....	47	CYCLOPHOSPHAMIDE 25		DEMEROL 100 MG, 50 MG.....	6
CORIFACT.....	75	MG, 50 MG.....	33	DEMSEER.....	29
CORLANOR.....	49	cycloserine.....	32	DENAVIR.....	60
CORTANE-B.....	61	CYCLOSET.....	22	DEPAKENE.....	19
CORTANE-B AQUEOUS.....	96	cyclosporine 100 mg, 25		DEPAKOTE.....	19
CORTANE-B-OTIC.....	96	mg.....	45	DEPAKOTE ER.....	19
CORTEF.....	52	cyclosporine 50 mg/ml.....	45	DEPAKOTE SPRINKLES.....	19
CORTENEMA.....	9	cyclosporine modified (for		DEPEN TITRATABS.....	45
CORTIFOAM.....	9	microemulsion).....	45	DEPO-ESTRADIOL.....	71
cortisone acetate.....	52	CYKLOKAPRON.....	77	DEPO-PROVERA.....	35
CORTISPORIN.....	57	CYMBALTA.....	20	DEPO-PROVERA	
CORTISPORIN-TC.....	96	cyproheptadine hcl.....	27	CONTRACEPTIVE.....	52
CORZIDE.....	31	CYRAMZA.....	34	DEPO-SUBQ PROVERA	
COSENTYX.....	59	CYSTADANE.....	70	104.....	52
COSENTYX SENSOREADY		CYSTAGON.....	74	DEPO-TESTOSTERONE 100	
PEN.....	59	CYSTARAN.....	95	MG/ML.....	9
COSMEGEN.....	36	cytarabine.....	34	DEPO-TESTOSTERONE 200	
COSOFT.....	92	CYTARABINEAQUEOUS.....	34	MG/ML.....	9
COSOFT PF.....	92	CYTOMEL.....	102	DEPOCYT.....	34
COTELLIC.....	36	CYTOTEC.....	104	DERMA-SMOOTH/FS	
COUMADIN.....	16	D-VI-SOL.....	107	BODY.....	61
COZAAR.....	30	DACARBAZINE 100 MG.....	37	DERMA-SMOOTH/FS	
CREON.....	67	dacarbazine 200 mg.....	37	SCALP.....	61
CRESEMBA.....	26	DACOGEN.....	34	DERMASORB TA.....	61
CRESTOR.....	28	DAKLINZA.....	43	DERMATOP.....	61
CRINONE 4 %.....	106	DALIRESP.....	14	DERMOTIC.....	96
CRINONE 8 %.....	106	danazol.....	8	DESCOVY.....	42
CRIXIVAN.....	42	DANTRIUM.....	90	desipramine hcl.....	21
CROMOLYN SODIUM.....	13	dantrolene sodium 100 mg, 25		desloratadine.....	27
cromolyn sodium		mg, 50 mg.....	90	DES Loratadine ODT.....	27
(mastocytosis).....	73	dapsone.....	11	desmopressin acetate 0.1 mg,	
cromolyn sodium (ophth).....	95	daptomycin.....	11	0.2 mg.....	71
CUBICIN.....	11	DARAPRIM.....	32	desmopressin acetate 4	
CUBICIN RF.....	11	darifenacin hydrobromide.....	105	mcg/ml.....	71
CUPRIMINE.....	45	daunorubicin hcl.....	36	desmopressin acetate	
		DAUNOXOME.....	36	refrigerated.....	71
		DAYPRO.....	3	desmopressin acetate spray.....	71
				desmopressin acetate spray	
				refrigerated.....	71

DESOGEN.....	50	DIBENZYLINE.....	29	diphenhydramine hcl 12.5	
desogestrel & ethinyl		DICLEGIS.....	25	mg/5ml.....	27
estradiol.....	50	diclofenac potassium.....	3	diphenhydramine hcl 50 mg.....	27
desogestrel-ethinyl estradiol		diclofenac sodium.....	3	diphenoxylate w/ atropine.....	24
(biphasic).....	50	diclofenac sodium (actinic		DIPROLENE.....	61
desogestrel-ethinyl estradiol		keratoses).....	59	DIPROLENE AF.....	61
(triphasic).....	50	diclofenac sodium (ophth).....	95	dipyridamole.....	76
DESONATE.....	61	diclofenac sodium (topical) 1		DISALCID.....	5
desonide.....	61	%.....	57	disopyramide phosphate.....	13
DESOWEN.....	61	diclofenac sodium (topical) 1.5		disulfiram.....	98
desoximetasone.....	61	%.....	57	DITROPAN XL.....	105
DESOXYN.....	1	diclofenac w/ misoprostol.....	3	DIURIL.....	68
DESVENLAFAXINE ER 100 MG,		dicloxacillin sodium.....	98	divalproex sodium.....	19
50 MG.....	20	dicyclomine hcl.....	102	DIVIGEL.....	71
DETROL.....	105	didanosine.....	42	DOCEFREZ.....	38
DETROL LA.....	105	DIFFERIN 0.1 %.....	56	DOCETAXEL 140 MG/7ML, 160	
dexamethasone.....	52	DIFFERIN 0.3 %.....	56	MG/8ML, 20 MG/0.5ML, 20	
DEXAMETHASONE		DIFICID.....	79	MG/ML, 80 MG/2ML, 80	
INTENSOL.....	52	diflorasone diacetate.....	61	MG/4ML.....	38
dexamethasone sodium		DIFLORASONE		DOCETAXEL 160 MG/16ML, 20	
phosphate (ophth).....	94	DIACETATE.....	61	MG/2ML, 200 MG/20ML, 80	
DEXAMETHASONE SODIUM		DIFLUCAN.....	26	MG/8ML.....	38
PHOSPHATE 0.1 %.....	94	diflunisal.....	5	docetaxel 20 mg/ml, 80	
DEXAMETHASONE SODIUM		digoxin 0.05 mg/ml.....	48	mg/4ml.....	38
PHOSPHATE 10 MG/ML.....	53	digoxin 0.125 mg, 0.25 mg, 125		dofetilide.....	13
dexamethasone sodium		mcg, 250 mcg.....	48	DOLOPHINE.....	6
phosphate 100 mg/10ml, 120		dihydroergotamine mesylate 4		DOMETUSS-DMX.....	54
mg/30ml, 20 mg/5ml, 4		mg/ml.....	82	donepezil hydrochloride.....	99
mg/ml.....	53	DILANTIN 100 MG.....	18	DONNATAL 0.1037MG-	
DEXCHLORPHENIRAMINE		DILANTIN 30 MG.....	18	0.0065MG-0.0194MG-16.2MG	
MALEATE.....	26	DILANTIN INFATABS.....	18	.....	103
DEXEDRINE.....	1	DILANTIN-125.....	18	DONNATAL 0.1037MG/5ML-	
DEXILANT.....	104	DILATRATE SR.....	11	0.0065MG/5ML-0.0194MG/5ML-	
dexmethylphenidate hcl 10 mg,		DILAUDID.....	6	16.2MG/5ML.....	103
15 mg, 20 mg, 30 mg, 40 mg, 5		diltiazem hcl 120 mg, 180 mg,		DONNATAL EXTENTABS.....	103
mg.....	1	240 mg.....	47	DORAL.....	77
dexmethylphenidate hcl 10 mg,		diltiazem hcl 120 mg, 30 mg, 60		DORIBAX.....	10
2.5 mg, 5 mg.....	1	mg, 90 mg.....	47	DORYX 50 MG.....	101
DEXPAK 10 DAY.....	53	diltiazem hcl 120 mg, 60 mg, 90		DORYX MPC.....	101
DEXPAK 13 DAY.....	53	mg.....	47	dorzolamide hcl.....	95
DEXPAK 6 DAY.....	53	diltiazem hcl coated beads 120		dorzolamide hcl-timolol	
dexrazoxane.....	38	mg, 180 mg, 240 mg, 300 mg,		maleate.....	92
dextroamphetamine sulfate.....	1	360 mg.....	47	DOTHELLE DHA.....	87
DIABETA.....	24	diltiazem hcl coated beads 180		DOVONEX.....	59
DIAMOX.....	67	mg, 240 mg, 300 mg, 360 mg,		doxazosin mesylate.....	30
DIASTAT ACUDIAL.....	16	420 mg.....	47	doxepin hcl.....	21
DIASTAT PEDIATRIC.....	16	diltiazem hcl extended release		doxepin hcl (antipruritic).....	59
diazepam (anticonvulsant).....	16	beads.....	47	doxercalciferol 0.5 mcg, 1 mcg,	
diazepam 1 mg/ml.....	12	DIOVAN.....	30	2.5 mcg.....	70
diazepam 10 mg, 2 mg, 5		DIOVAN HCT.....	31	DOXIL.....	36
mg.....	12	DIPENTUM.....	73		
diazepam 5 mg/ml.....	12				

DOXORUBICIN HCL 10 MG, 50 MG	36	ECOTRIN REGULAR STRENGTH	5	ENCARE	106
doxorubicin hcl 2 mg/ml	36	EDARBI	30	ENDOMETRIN	107
doxorubicin hcl liposomal	36	EDARBYCLOR	31	ENJUVA	71
DOXYCYCLINE	65	EDECRIN	67	ENOVARX-IBUPROFEN	57
doxycycline (monohydrate) 100 mg, 150 mg, 50 mg, 75 mg	101	EDLUAR	77	enoxaparin sodium	16
doxycycline (monohydrate) 25 mg/5ml	101	EDURANT	42	ENSTILAR	61
doxycycline hyclate 100 mg, 150 mg, 50 mg, 75 mg	101	EFFEXOR XR 150 MG	20	entacapone	39
doxycycline hyclate 100 mg, 20 mg	101	EFFEXOR XR 37.5 MG, 75 MG	20	entecavir	43
doxycycline hyclate 100 mg, 50 mg	101	EFFIENT	76	ENTEREG	73
DRISDOL	107	EFUDEX	59	ENTOCORT EC	53
dronabinol	25	ELAPRASE	70	ENTRESTO	48
drospirenone-ethinyl estradiol	50	ELAVIL	21	ENVARBUS XR	45
DROXIA	76	ELDEPRYL	40	EPANED	29
DRYSOL	65	ELELYSO	76	EPCLUSA	43
DUAC	56	ELESTAT	95	EPIDUO	56
DUAVEE	71	ELESTRIN	71	EPIFOAM	61
DUET DHA 400	87	ELIDEL	64	epinastine hcl (ophth)	95
DUET DHA 400EC	87	ELIGARD	35	EPINEPHRINE	107
DUET DHA 430	87	ELIMITE	66	epinephrine hcl	15
DUET DHA 430EC	87	ELIPHOS	74	EPIPEN 2-PAK	107
DUET DHA BALANCED	87	ELIQUIS	16	EPIPEN-JR 2-PAK	107
DUETACT	22	ELITEK	38	epirubicin hcl	36
DUEXIS	3	ELIXOPHYLLIN	15	EPIVIR	42
DULERA	15	ELLA	52	EPIVIR HBV 100 MG	44
duloxetine hcl 20 mg, 30 mg, 60 mg	20	ELLECE	36	EPIVIR HBV 5 MG/ML	43
DUOPA	39	ELMIRON	74	eplerenone	32
DURAGESIC	6	ELOCON	61	EPOGEN	76
DUREZOL	94	ELOCTATE	75	epoprostenol sodium	48
dutasteride	74	ELOXATIN	33	EPROSARTAN MESYLATE	30
dutasteride-tamsulosin hcl	74	EMADINE	95	EPZICOM	42
DUTOPROL	31	EMBEDA	6	EQUETRO	40
DYANAVAL XR	1	EMCYT	35	ERBITUX	34
DYAZIDE	67	EMEND	26	ergocalciferol	107
DYMISTA	91	EMEND 125 MG	26	ERGOLOID MESYLATES	100
DYRENIUM	68	EMEND 125 MG, 80 MG	26	ergoloid mesylates	100
E.E.S. GRANULES	79	EMEND 40 MG	26	ERGOMAR	82
EASY TOUCH FLIPLOCK NEEDLES 30GX1/2"	80	EMLA	65	ERIVEDGE	35
EASY TOUCH HYPODERMIC NEEDLES 30GX1/2"	80	EMSAM	19	ERTACZO	58
EC-NAPROSYN	3	EMTRIVA	42	ERWINAZE	37
econazole nitrate	58	ENABLEX	105	ERY-TAB	79
		enalapril maleate	29	ERYPED 200	79
		enalapril maleate & hydrochlorothiazide	31	ERYPED 400	79
		ENBREL	5	erythromycin (acne aid)	56
		ENBREL SURECLICK	5	erythromycin (ophth)	93
				erythromycin base	79
				erythromycin ethylsuccinate	79

ESBRIET.....	101	etodolac 400 mg, 500 mg, 600 mg.....	3	FELBATOL.....	18
escitalopram oxalate.....	20	ETOPOPHOS.....	38	FELDENE.....	3
ESGIC.....	5	etoposide 1 gm/50ml, 100 mg/5ml, 500 mg/25ml.....	38	felodipine.....	47
esomeprazole magnesium 20 mg.....	104	etoposide 50 mg.....	38	FEM PH.....	106
esomeprazole magnesium 40 mg.....	104	EUFLEXXA.....	90	FEMARA.....	35
ESOMEPRAZOLE		EURAX.....	66	FEMCAP.....	79
STRONTIUM.....	104	EVAMIST.....	72	FEMCON FE.....	50
estazolam.....	77	EVISTA.....	69	FEMHRT LOW DOSE.....	71
esterified estrogens & methyltestosterone.....	71	EVOCLIN.....	56	FEMRING.....	106
ESTRACE 0.1 MG/GM.....	106	EVOTAZ.....	42	fenofibrate 120 mg, 40 mg... ..	28
ESTRACE 0.5 MG, 1 MG, 2 MG.....	71	EVOXAC.....	85	fenofibrate 145 mg, 160 mg, 48 mg, 54 mg.....	28
estradiol & norethindrone acetate.....	71	EVZIO.....	25	FENOFIBRATE 150 MG, 50 MG.....	28
estradiol 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr.....	71	EXALGO 12 MG, 16 MG, 8 MG.....	6	fenofibrate micronized.....	28
estradiol 0.025 mg/24hr, 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr, 37.5 mcg/24hr.....	71	EXALGO 32 MG.....	6	fenofibric acid.....	28
estradiol 0.5 mg, 1 mg, 2 mg.....	72	EXELDERM.....	58	FENOGLIDE.....	28
estradiol valerate.....	72	EXELON.....	99	FENOPROFEN CALCIUM 200 MG.....	3
ESTRING.....	106	exemestane.....	35	FENOPROFEN CALCIUM 400 MG.....	3
ESTROGEL.....	72	EXFORGE.....	31	fenopropfen calcium 600 mg... ..	4
ESTROPIPATE 0.75 MG, 1.5 MG.....	72	EXFORGE HCT.....	31	FENORTHO 200 MG.....	4
estropipate 0.75 mg, 1.5 mg, 3 mg.....	72	EXJADE.....	25	FENORTHO 400 MG.....	4
ESTROSTEP FE.....	50	EXODERM.....	58	fentanyl 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr.....	6
eszopiclone.....	77	EXTAVIA.....	99	fentanyl citrate.....	6
ethacrynic acid.....	67	EXTINA.....	58	FENTORA.....	6
ethambutol hcl.....	32	EXTRA-VIRT PLUS DHA.....	87	FER-IN-SOL.....	77
ethosuximide.....	19	FABIOR.....	56	FERRIPROX.....	25
ETHYL CHLORIDE.....	65	FABRAZYME.....	70	ferrous sulfate 15 mg/ml.....	77
ETHYL CHLORIDE/FINE PINPOINT.....	65	FACTIVE.....	72	ferrous sulfate 220 mg/5ml... ..	77
ETHYL CHLORIDE/FINE STREAM.....	65	famciclovir.....	44	FERROUS SULFATE 300 MG/5ML.....	77
ETHYL CHLORIDE/MEDIUM JET STREAM.....	65	famotidine 20 mg.....	103	FETZIMA 120 MG, 40 MG, 80 MG.....	21
ETHYL CHLORIDE/MEDIUM STREAM.....	65	famotidine 40 mg.....	103	FETZIMA 20 MG.....	21
ETHYL CHLORIDE/MIST.....	65	famotidine 40 mg/5ml.....	103	FETZIMA TITRATION PACK21	
ethynodiol diacet & eth estrad.....	50	FAMVIR.....	44	FEXMID.....	90
ETHYOL.....	38	FANAPT.....	40	FIBRICOR 105 MG, 35 MG.....	28
etidronate disodium.....	68	FANAPT TITRATION PACK.....	40	FINACEA.....	65
etodolac 200 mg, 300 mg.....	3	FARESTON.....	35	finasteride.....	74
etodolac 400 mg, 500 mg.....	3	FARXIGA.....	24	FIORICET.....	5
		FARYDAK.....	36	FIORICET/CODEINE.....	7
		FASLODEX.....	35	FIORINAL.....	5
		FAZACLO 100 MG, 25 MG.....	41	FIORINAL/CODEINE #3.....	7
		FAZACLO 12.5 MG, 150 MG, 200 MG.....	41	FIRAZYR.....	75
		FC FEMALE CONDOM.....	79	FIRMAGON.....	35
		FC2 FEMALE CONDOM.....	79		
		felbamate.....	18		

FIRST-DUKES			
MOUTHWASH	84	fluorometholone (ophth)	94
FIRST-LANSOPRAZOLE	104	FLUOROPLEX	59
FIRST-MARYS		fluorouracil (topical)	59
MOUTHWASH	84	FLUOROURACIL 0.5 %	59
FIRST-MOUTHWASH BLM	84	fluorouracil 1 gm/20ml, 2.5 gm/50ml, 5 gm/100ml, 500 mg/10ml	34
FIRST-OMEPRAZOLE	104	FLUOXETINE	100
FIRST-VANCOMYCIN 25	10	fluoxetine hcl 10 mg, 20 mg	20
FIRST-VANCOMYCIN 50	10	fluoxetine hcl 10 mg, 20 mg, 40 mg	20
FLAGYL 250 MG, 500 MG	10	fluoxetine hcl 20 mg/5ml	20
FLAGYL 375 MG	10	FLUOXETINE HCL 60 MG 20	
FLAGYL ER	10	fluoxetine hcl 90 mg	20
FLAREX	94	fluphenazine hcl 1 mg, 10 mg, 2.5 mg, 5 mg	41
flavoxate hcl	105	fluphenazine hcl 2.5 mg/5ml	41
FLEBOGAMMA DIF	97	fluphenazine hcl 5 mg/ml	41
flecainide acetate	13	FLURA-DROPS	83
FLECTOR	57	flurandrenolide	62
FLOLAN	48	flurazepam hcl	77
FLOMAX	75	flurbiprofen	4
FLOINASE	91	flurbiprofen sodium	95
FLOINASE ALLERGY RELIEF	91	flutamide	35
FLOINASE ALLERGY RELIEF CHILDRENS	91	fluticasone propionate	62
FLOVENT DISKUS 100 MCG/BLIST	14	fluticasone propionate (nasal)	91
FLOVENT DISKUS 250 MCG/BLIST	14	fluvastatin sodium	28
FLOVENT DISKUS 50 MCG/BLIST	14	fluvoxamine maleate	20
FLOVENT HFA 110 MCG/ACT, 220 MCG/ACT	14	FML	94
FLOVENT HFA 44 MCG/ACT	14	FML FORTE	94
FLOXIN OTIC	96	FML LIQUIFILM	94
FLOXURIDINE	34	FOCALGIN 90 DHA	87
fluconazole	26	FOCALGIN CA	87
fluconazole in dextrose 400mg/200ml-56mg/ml	26	FOCALGIN-B	87
flucytosine	26	FOCALIN	1
FLUDARA	34	FOCALIN XR 10 MG, 15 MG, 20 MG, 30 MG, 40 MG, 5 MG	1
fludarabine phosphate	34	FOCALIN XR 25 MG, 35 MG	2
fludrocortisone acetate	53	FOLCAL DHA	87
FLUMADINE	44	FOLCAPS OMEGA 3	87
flunisolide (nasal)	91	FOLET DHA	87
fluocinolone acetonide	61	folic acid 1 mg	76
fluocinolone acetonide (otic)	96	folic acid 400 mcg, 800 mcg	76
fluocinonide	61	folic acid-pyridoxine-cyanocobalamin	67
fluocinonide emulsified base	61		
FLUORABON	83		
		FOLIVANE-F	77
		FOLIVANE-OB	87
		FOLOTYN	34
		fondaparinux sodium	16
		FORADIL AEROLIZER	15
		FORFIVO XL	19
		formaldehyde	42
		FORTAMET	22
		FORTAZ 1 GM, 2 GM, 6 GM	50
		FORTEO	68
		FORTESTA	9
		FOSAMAX	68
		FOSAMAX PLUS D	68
		FOSCAVIR	43
		fosinopril sodium	29
		fosinopril sodium & hydrochlorothiazide	31
		fosphenytoin sodium	18
		FOSRENOL	74
		FRAGMIN 10000 UNIT/ML, 12500 UNIT/0.5ML, 15000 UNIT/0.6ML, 18000 UNT/0.72ML, 2500 UNIT/0.2ML, 25000 UNIT/ML, 5000 UNIT/0.2ML, 7500 UNIT/0.3ML, 95000 UNIT/3.8ML	16
		FREESTYLE FREEDOM LITE	80
		FREESTYLE INSULINX BLOODGLUCOSE MONITORING SYSTEM	80
		FREESTYLE INSULINX BLOODGLUCOSE TEST STRIPS	66
		FREESTYLE INSULINX BLOODGLUCOSE TEST STRIPS	66
		FREESTYLE LITE BLOOD GLUCOSE MONITORING SYSTEM	80
		FREESTYLE LITE TEST STRIPS	66
		FREESTYLE TEST STRIPS	66
		FROVA	82
		frovatriptan succinate	82
		FULYZAQ	24
		FURADANTIN	105
		furosemide 10 mg/ml	67
		furosemide 20 mg, 40 mg, 80 mg	68
		FUROSEMIDE 8 MG/ML	68
		FUSILEV	38
		FUZEON	42

FYCOMPA.....	16	glatiramer acetate.....	99	guanfacine hcl (adhd).....	1
gabapentin.....	17	GLEEVEC.....	36	GUANIDINE HCL.....	32
GABITRIL 12 MG, 16 MG.....	18	GLEOSTINE 10 MG, 100 MG,		GYNAZOLE-1.....	106
GABITRIL 2 MG, 4 MG.....	18	40 MG.....	33	H.P. ACTHAR.....	69
GABLOFEN.....	90	GLEOSTINE 5 MG.....	33	HALAC.....	62
galantamine hydrobromide 12		GLIADEL WAFER.....	33	HALAVEN.....	38
mg, 4 mg, 8 mg.....	99	glimepiride.....	24	HALCION.....	77
galantamine hydrobromide 16		glipizide.....	24	halobetasol propionate.....	62
mg, 24 mg, 8 mg.....	99	glipizide-metformin hcl.....	22	HALOG.....	62
GALANTAMINE		GLUCAGEN		haloperidol.....	41
HYDROBROMIDE 4 MG/ML.....	99	DIAGNOSTIC.....	66	haloperidol lactate 2 mg/ml.....	41
GAMASTAN S/D.....	97	GLUCAGEN HYPOKIT.....	22	HALOTIN.....	58
GAMMAGARD LIQUID.....	97	GLUCAGON.....	66	HARVONI.....	44
GAMMAKED.....	97	GLUCAGON EMERGENCY		HECTOROL 0.5 MCG, 1 MCG,	
GAMMAPLEX.....	97	KIT.....	22	2.5 MCG.....	70
GAMUNEX-C.....	97	GLUCAGON HCL		HELIXATE FS.....	75
GARAMYCIN.....	93	DIAGNOSTIC.....	66	HEMANGEOL.....	47
GASTRINEX NF.....	103	GLUCOPHAGE.....	22	HEMENATAL OB.....	87
GASTROCROM.....	73	GLUCOPHAGE XR.....	22	HEMENATAL OB + DHA.....	87
gatifloxacin (ophth).....	93	GLUCOTROL.....	24	heparin (porcine) in sodium	
GATTEX.....	74	GLUCOTROL XL.....	24	chloride.....	16
GAZYVA.....	34	GLUCOVANCE.....	22	HEPARIN LOCK FLUSH.....	16
GELCLAIR.....	85	GLUMETZA.....	22	heparin sod (porcine) in d5w.....	16
GELFILM OP.....	95	glyburide.....	24	HEPARIN SODIUM.....	16
GELNIQUE.....	105	glyburide micronized.....	24	heparin sodium (porcine).....	16
gemcitabine hcl.....	34	glyburide-metformin.....	22	heparin sodium (porcine) lock	
gemfibrozil.....	28	glycopyrrolate 1 mg, 2 mg.....	103	flush.....	16
GEMZAR.....	34	GLYNASE.....	24	HEPARIN SODIUM/D5W	
GENERESS FE.....	50	GLYSET.....	21	100UNIT/ML-5%, 50UNIT/ML-	
GENOTROPIN.....	69	GLYXAMBI.....	22	5%.....	16
GENOTROPIN MINIQUICK.....	69	GOLYTELY 227.1GM-21.5GM-		HEPARIN SODIUM/D5W	
gentamicin in saline.....	2	5.53GM-2.82GM-6.36GM.....	78	50UNIT/ML-5%.....	16
gentamicin sulfate (ophth).....	93	GOLYTELY 236GM-22.74GM-		HEPARIN SODIUM/NACL	
gentamicin sulfate (topical).....	57	5.86GM-2.97GM-6.74GM.....	78	0.45%.....	16
gentamicin sulfate 10 mg/ml.....	2	GORDONS UREA.....	63	HEPARIN SODIUM/SODIUM	
gentamicin sulfate 40 mg/ml.....	2	GRALISE.....	100	CHLORIDE 0.9%.....	16
GENTAMICIN SULFATE/0.9%		GRALISE STARTER.....	100	HEPSERA.....	44
SODIUM CHLORIDE 0.9%-		granisetron hcl 1 mg.....	25	HERCEPTIN.....	34
0.9MG/ML, 0.9%-1.4MG/ML.....	2	GRANISOL.....	25	HETLIOZ.....	78
GENVOYA.....	42	GRANIX.....	76	HEXALEN.....	33
GEODON 20 MG.....	40	GRANULEX.....	64	HIPREX.....	105
GEODON 20 MG, 40 MG, 60		GRASTEK.....	47	HIZENTRA.....	97
MG, 80 MG.....	40	GRIFULVIN V.....	26	homatropine hbr.....	92
GESTICARE DHA.....	87	GRIS-PEG.....	26	HORIZANT.....	100
GIAZO.....	73	griseofulvin microsize.....	26	HUMALOG.....	23
GILENYA.....	99	griseofulvin ultramicrosize.....	26	HUMALOG KWIKPEN 100	
GILOTRIF.....	36	guaifenesin-codeine		UNIT/ML.....	23
GLASSIA.....	100	100mg/5ml-10mg/5ml.....	54	HUMALOG KWIKPEN 200	
		guanfacine hcl.....	30	UNIT/ML.....	23
				HUMALOG MIX 50/50.....	23

INVANZ.....	10	isradipine.....	48	ketoconazole.....	26
INVEGA.....	40	ISTALOL.....	92	ketoconazole (topical).....	58
INVEGA SUSTENNA.....	40	ISTODAX.....	36	KETONE TEST STRIPS.....	66
INVEGA TRINZA.....	40	itraconazole.....	26	ketoprofen.....	4
INVIRASE.....	42	ivermectin.....	10	ketorolac tromethamine	
INVOKAMET.....	22	IXEMPRA KIT.....	38	(ophth).....	95
INVOKANA.....	24	IXINITY.....	75	ketorolac tromethamine 10	
iodoquinol-hc.....	58	JADENU.....	25	mg.....	4
iodoquinol-hydrocortisone in aloe		JAKAFI.....	36	KETOSTIX.....	66
vehicle.....	58	JALYN.....	75	KEYVEYIS.....	67
IONSYS.....	6	JANUMET.....	22	KEYTRUDA.....	35
IOPIDINE 0.5 %.....	93	JANUMET XR.....	22	KHEDEZLA.....	21
IOPIDINE 1 %.....	93	JANUVIA.....	22	KINERET.....	3
ipratropium bromide.....	13	JARDIANCE.....	24	KITABIS PAK.....	2
ipratropium bromide (nasal).....	91	JENTADUETO.....	22	KLARON.....	56
ipratropium-albuterol.....	15	JENTADUETO XR.....	22	KLONOPIN.....	16
irbesartan.....	30	JEVTANA.....	38	KLOR-CON 25.....	84
irbesartan-hydrochlorothiazide		JUBLIA.....	58	KLOR-CON M15.....	84
.....	31	JUXTAPID.....	29	KLOR-CON/25.....	84
IRESSA.....	36	K-PHOS.....	84	KOGENATE FS.....	75
IRINOTECAN.....	39	K-PHOS NEUTRAL.....	84	KOGENATE FS BIO-SET.....	75
irinotecan hcl.....	39	K-PHOS NO 2.....	74	KOMBIGLYZE XR.....	22
irrigation solutions,		K-TAB 10 MEQ.....	84	KORLYM.....	22
physiological.....	46	K-TAB 20 MEQ.....	84	KOVALTRY.....	75
ISENTRESS 100 MG.....	42	K-TAB 8 MEQ.....	84	KRISTALOSE.....	78
ISENTRESS 25 MG.....	42	KADCYLA.....	34	KUVAN.....	70
ISENTRESS 400 MG.....	42	KADIAN 10 MG, 100 MG, 20		KYNAMRO.....	27
ISOLYTE-S.....	83	MG, 30 MG, 50 MG, 60 MG, 80		KYPROLIS.....	36
isometheptene-caffeine-		MG.....	6	labetalol hcl 100 mg, 200 mg, 300	
acetaminophen.....	82	KALETRA.....	42	mg.....	46
isometheptene-		KALYDECO.....	100	LAC-HYDRIN.....	64
dichloralphenazone-		KAPVAY.....	1	LAC-HYDRIN TWELVE.....	64
acetaminophen.....	82	KAYEXALATE.....	46	LACRISERT.....	92
isoniazid 100 mg, 300 mg.....	33	KAZANO.....	22	lactated ringer's (irrigation).....	46
ISONIAZID 100 MG/ML.....	32	KEFLEX.....	49	lactic acid (ammonium lactate) 10	
isoniazid 50 mg/5ml.....	33	KENALOG.....	62	%.....	64
ISOPTO ATROPINE.....	92	KEPIVANCE.....	38	lactic acid (ammonium lactate) 12	
ISOPTO CARPINE.....	92	KEPPRA 100 MG/ML.....	17	%.....	64
ISORDIL TITRADOSE 40		KEPPRA 1000 MG, 250 MG,		lactulose.....	78
MG.....	12	500 MG, 750 MG.....	17	lactulose (encephalopathy).....	73
ISORDIL TITRADOSE 5 MG	12	KEPPRA XR.....	17	LAMICTAL 100 MG, 150 MG,	
isosorbide dinitrate.....	12	KERAFOAM.....	63	200 MG, 25 MG.....	17
ISOSORBIDE DINITRATE		KERAFOAM 42.....	63	LAMICTAL 2 MG.....	17
ER.....	12	KERALAC.....	63	LAMICTAL CHEWABLE	
isosorbide mononitrate.....	12	KERLONE.....	46	DISPERSIBLE.....	17
isotretinoin 10 mg, 20 mg, 30 mg,		KETEK.....	11	LAMICTAL ODT.....	17
40 mg.....	56	KETOCARE.....	66	LAMICTAL STARTER/NOT	
isotretinoin 30 mg.....	56			TAKING CARBAMAZEPINE.....	17
isoxsuprine hcl 10 mg.....	48				
ISOXSUPRINE HCL 20 MG.....	48				

LAMICTAL STARTER/TAKING CARBAMAZEPINE/NOT TAKING VALPROATE	17	LETAIRIS	49	levothyroxine sodium	102
LAMICTAL STARTER/TAKING VALPROATE	17	letrozole	35	LEVSIN	103
LAMICTAL XR	17	leucovorin calcium 10 mg, 15 mg, 25 mg, 5 mg	38	LEVSIN/SL	103
LAMICTAL XR 100 MG, 200 MG, 25 MG, 50 MG	17	leucovorin calcium 100 mg, 200 mg, 350 mg	38	LEVULAN KERASTICK	59
LAMICTAL XR 250 MG, 300 MG	17	LEUCOVORIN CALCIUM 50 MG, 500 MG	38	LEXAPRO	20
LAMISIL 125 MG, 187.5 MG	26	LEUKERAN	33	LEXIVA	42
LAMISIL 250 MG	26	LEUKINE	76	LIALDA	73
lamivudine	42	leuprolide acetate	35	LIBRAX	103
lamivudine (hbv)	44	LEVACET	5	lidocaine	65
lamivudine-zidovudine	42	levabuterol hcl	15	lidocaine hcl (mouth-throat)	84
lamotrigine	17	LEVAMISOLE HCL	36	lidocaine hcl 2 %	65
lamotrigine 100 mg, 150 mg, 200 mg, 25 mg	17	LEVAQUIN 25 MG/ML	72	lidocaine hcl 3 %	65
lamotrigine 100 mg, 200 mg, 25 mg, 50 mg	17	LEVAQUIN 250 MG, 500 MG, 750 MG	72	lidocaine hcl 4 %	65
lamotrigine 25 mg, 5 mg	17	LEVATOL	47	LIDOCAINE HCL 4 %	84
lamotrigine 250 mg, 300 mg	17	LEVBID	103	lidocaine-hydrocortisone acetate (rectal) 3%-2.5%	9
LANCETS AND LANCET DEVICES	80	LEVEMIR	23	lidocaine-prilocaine	65
LANOXIN 125 MCG, 250 MCG	48	LEVEMIR FLEXPEN	23	LIDODERM	65
LANOXIN 187.5 MCG, 62.5 MCG	48	LEVEMIR FLEXTOUCH	23	LILETTA	52
lansoprazole 15 mg	104	levetiracetam 100 mg/ml, 500 mg/5ml	17	LINCOCIN	11
lansoprazole 30 mg	104	levetiracetam 1000 mg, 250 mg, 500 mg, 750 mg	17	lincomycin hcl	11
LANTUS	23	levetiracetam 500 mg, 750 mg	17	LINDANE	66
LANTUS SOLOSTAR	23	levobunolol hcl	92	lindane	66
LASIX	68	levocarnitine (metabolic modifiers) 1 gm/10ml	70	linezolid	11
LASTACRAFT	95	levocarnitine (metabolic modifiers) 330 mg	70	LINZESS	73
latanoprost	96	levocetirizine dihydrochloride 2.5 mg/5ml	27	LIORESAL INTRATHECAL	90
LATUDA	40	levocetirizine dihydrochloride 5 mg	27	liothyronine sodium 25 mcg, 5 mcg, 50 mcg	102
LAZANDA	6	levofloxacin (ophth)	93	LIPITOR	28
leflunomide 10 mg	5	levofloxacin 25 mg/ml	72	LIPOFEN	28
leflunomide 20 mg	5	levofloxacin 250 mg, 500 mg, 750 mg	72	lisinopril	29
LENVIMA 10 MG DAILY DOSE	36	levoleucovorin calcium	38	lisinopril & hydrochlorothiazide	31
LENVIMA 14 MG DAILY DOSE	36	LEVONORGESTREL	52	LITHIUM	40
LENVIMA 18 MG DAILY DOSE	37	levonorgestrel & eth estradiol	51	lithium carbonate	40
LENVIMA 20 MG DAILY DOSE	37	levonorgestrel (emergency oc)	52	LITHOBID	40
LENVIMA 24 MG DAILY DOSE	37	levonorgestrel-eth estradiol (triphasic)	51	LITHOSTAT	75
LENVIMA 8 MG DAILY DOSE	37	levonorgestrel-ethinyl estradiol (91-day)	51	LIVALO	28
LESCOL	28	levonorgestrel-ethinyl estradiol (continuous)	51	LO LOESTRIN FE	51
LESCOL XL	28	levorphanol tartrate	6	LOCOID	62
				LOCOID LIPOCREAM	62
				LODOSYN	39
				LOESTRIN 1.5/30-21	51
				LOESTRIN 1/20-21	51
				LOESTRIN FE 1.5/30	51
				LOESTRIN FE 1/20	51
				LOFIBRA	28

LOMOTIL.....	24	LUXIQ.....	62	MEDROX-RX.....	65
lomustine.....	33	LYNPARZA.....	37	medroxyprogesterone	
LONSURF.....	36	LYRICA 100 MG, 200 MG, 25		acetate.....	98
loperamide hcl.....	24	MG, 50 MG, 75 MG.....	17	medroxyprogesterone acetate	
LOPID.....	28	LYRICA 150 MG, 225 MG, 300		(contraceptive).....	52
LOPRESSOR 100 MG, 50		MG.....	17	mefenamic acid.....	4
MG.....	46	LYRICA 20 MG/ML.....	17	mefloquine hcl.....	32
LOPRESSOR HCT.....	31	LYSODREN.....	35	MEGACE ES.....	98
LOPROX.....	58	LYSTEDA.....	77	MEGACE ORAL.....	35
LOPROX SHAMPOO.....	58	MACNATAL CN DHA.....	87	MEGESTROL ACETATE.....	35
lorazepam 0.5 mg, 1 mg, 2		MACROBID.....	105	megestrol acetate (appetite)	
mg.....	12	MACRODANTIN.....	105	megestrol acetate 20 mg, 40	
lorazepam 2 mg/ml.....	12	mafenide acetate.....	60	mg.....	35
LORTAB.....	7	magnesium sulfate 2 gm/50ml,		megestrol acetate 40 mg/ml, 400	
LORZONE.....	90	20 gm/500ml, 4 gm/100ml, 40		mg/10ml.....	35
losartan potassium.....	30	gm/1000ml.....	84	MEKINIST.....	37
losartan potassium &		MAGNESIUM SULFATE 2		meloxicam 15 mg.....	4
hydrochlorothiazide.....	31	GM/50ML, 20 GM/500ML, 4		meloxicam 7.5 mg.....	4
LOSEASONIQUE.....	51	GM/100ML, 40		meloxicam 7.5 mg/5ml.....	4
LOTEMAX.....	94	GM/1000ML.....	84	melphalan hcl.....	33
LOTENSIN.....	29	magnesium sulfate 50 %.....	84	memantine hcl.....	99
LOTENSIN HCT.....	31	magnesium sulfate in d5w		MENEST.....	72
LOTREL.....	31	10mg/ml-5%.....	83	MENOMUNE-A/C/Y/W-135	
LOTRISONE.....	58	MAGNESIUM SULFATE IN		.....	106
LOTRONEX.....	73	D5W 10MG/ML-5%.....	84	MENOSTAR.....	72
lovastatin.....	28	MAGNESIUM SULFATE IN		meperidine hcl 100 mg, 50 mg6	
LOVAZA.....	27	D5W 20MG/ML-5%.....	84	meperidine hcl 50 mg/5ml....	6
LOVENOX.....	16	MAKENA.....	98	MEPERIDINE	
loxapine succinate.....	41	MALARONE.....	32	HCL/PROMETHAZINE HCL..	7
LOZI-FLUR.....	83	malathion.....	66	MEPHYTON.....	107
LUFYLLIN.....	15	maprotiline hcl.....	19	meprobamate.....	12
LUMIGAN.....	96	MARINOL.....	25	MEPRON.....	10
LUMIZYME.....	70	MARNATAL-F.....	87	mercaptopurine.....	34
LUNESTA.....	77	MARPLAN.....	19	meropenem.....	10
LUPANETA PACK.....	69	MARQIBO.....	38	MERREM.....	10
LUPRON DEPOT 11.25 MG		MATULANE.....	37	mesalamine.....	73
35		MAVIK.....	29	MESALAMINE DR.....	73
LUPRON DEPOT 22.5 MG		MAXALT.....	82	mesna.....	38
35		MAXALT-MLT.....	82	MESNEX 100 MG/ML.....	38
LUPRON DEPOT 3.75 MG		MAXIDEX.....	94	MESNEX 400 MG.....	38
35		MAXIPIME 1 GM, 2 GM... 50		MESTINON 60 MG.....	32
LUPRON DEPOT 30 MG		MAXITROL.....	94	MESTINON 60 MG/5ML.....	32
35		MAXZIDE.....	67	MESTINON 60 MG/TIMESPAN....	32
LUPRON DEPOT 45 MG		MAXZIDE-25.....	67	METADATE CD 10 MG, 40 MG,	
35		meclizine hcl.....	25	50 MG, 60 MG.....	2
LUPRON DEPOT 7.5 MG		meclofenamate sodium.....	4	METADATE CD 20 MG, 30	
35		MEDROL 16 MG, 32 MG, 4		MG.....	2
LUPRON DEPOT-PED 11.25		MG, 8 MG.....	53	metaproterenol sulfate.....	15
MG, 15 MG.....	69	MEDROL 2 MG.....	53	METASTRON.....	37
LUPRON DEPOT-PED 11.25		MEDROL DOSEPAK.....	53	metaxalone.....	90
MG, 30 MG.....	69				
LUPRON DEPOT-PED 7.5					
MG.....	69				
LURIDE.....	83				
LUVOX CR.....	20				

metformin hcl 1000 mg, 500 mg.....	22	methylphenidate hcl 10 mg/5ml, 5 mg/5ml.....	2	midodrine hcl.....	107
metformin hcl 1000 mg, 500 mg, 750 mg.....	22	methylphenidate hcl 18 mg, 20 mg, 27 mg, 36 mg, 54 mg.....	2	MIGERGOT.....	82
metformin hcl 1000 mg, 500 mg, 850 mg.....	22	methylphenidate hcl 18 mg, 27 mg, 36 mg, 54 mg.....	2	miglitol.....	21
methadone hcl 10 mg, 5 mg.....	6	methylphenidate hcl 20 mg, 30 mg.....	2	MIGRAL.....	82
methadone hcl 10 mg/5ml, 5 mg/5ml.....	6	methylphenidate hcl 20 mg, 30 mg, 40 mg.....	2	MIGRALAM.....	82
methadone hcl 10 mg/ml.....	6	methylprednisolone.....	53	MIGRANAL.....	82
methadone hcl 40 mg.....	6	methyltestosterone.....	9	MILLIPRED 10 MG/5ML.....	53
METHADOSE.....	6	METIPRANOLOL.....	92	MILLIPRED 5 MG.....	53
METHADOSE SUGAR-FREE.....	6	metoclopramide hcl 10 mg, 5 mg.....	73	MILLIPRED DP.....	53
methamphetamine hcl.....	1	metoclopramide hcl 10 mg/10ml, 5 mg/5ml.....	73	MINASTRIN 24 FE.....	51
methazolamide.....	67	metoclopramide hcl 5 mg.....	73	MINIPRESS.....	30
methenamine hippurate.....	105	METOCLOPRAMIDE ODT.....	73	MINIVELLE.....	72
methenamine mandelate.....	105	metolazone.....	68	MINOCIN.....	101
methenamine-hyosc-methylene blue-benzoic acid-phenyl sal.....	105	METOPIRONE.....	66	minocycline hcl 100 mg, 50 mg.....	101
methenamine-hyosc-methylene blue-sod phos-phenyl sal.....	105	metoprolol & hydrochlorothiazide.....	31	minocycline hcl 100 mg, 50 mg, 75 mg.....	101
methimazole.....	101	metoprolol succinate.....	46	minocycline hcl 135 mg, 45 mg, 90 mg.....	101
METHITEST.....	9	metoprolol tartrate 100 mg, 25 mg, 50 mg.....	46	minocycline hcl 75 mg.....	101
methocarbamol 500 mg, 750 mg.....	90	METOPROLOL TARTRATE 37.5 MG, 75 MG.....	46	minoxidil.....	32
METHOTREXATE.....	34	METOSOLV ODT.....	73	MIRAPEX.....	39
methotrexate sodium 1 gm.....	34	METOCREAM.....	65	MIRAPEX ER.....	39
methotrexate sodium 1 gm/40ml, 100 mg/4ml, 200 mg/8ml, 250 mg/10ml, 50 mg/2ml.....	34	METROGEL.....	65	MIRCERA.....	76
methotrexate sodium 2.5 mg.....	34	METROGEL-VAGINAL.....	106	MIRCETTE.....	51
METHOTREXATE SODIUM 250 MG/10ML.....	34	METROLOTION.....	65	MIRENA.....	52
methoxsalen rapid.....	59	metronidazole.....	10	mirtazapine.....	19
methscopolamine bromide.....	103	metronidazole (topical) 0.75 %.....	65	MIRVASO.....	66
methyclothiazide.....	68	metronidazole (topical) 1 %.....	65	misoprostol.....	104
methyl dopa.....	30	metronidazole in nacl.....	10	MITIGARE.....	75
methyl dopa & hydrochlorothiazide.....	31	metronidazole vaginal.....	106	mitomycin 20 mg, 40 mg.....	36
METHYLDOPATE HCL.....	30	MEVACOR.....	28	MITOMYCIN 5 MG.....	36
methylergonovine maleate 0.2 mg.....	96	mexiletine hcl.....	13	mitoxantrone hcl.....	36
methylergonovine maleate 0.2 mg/ml.....	96	MIACALCIN 200 UNIT/ACT.....	68	MOBIC 15 MG.....	4
METHYLIN.....	2	MIACALCIN 200 UNIT/ML.....	68	MOBIC 7.5 MG.....	4
methylphenidate hcl 10 mg.....	2	MICARDIS.....	30	MOBIC 7.5 MG/5ML.....	4
methylphenidate hcl 10 mg, 2.5 mg, 5 mg.....	2	MICARDIS HCT.....	31	modafinil.....	2
methylphenidate hcl 10 mg, 20 mg, 5 mg.....	2	miconazole nitrate vaginal.....	106	MODERIBA.....	44
methylphenidate hcl 10 mg, 40 mg, 50 mg, 60 mg.....	2	MICRO-K.....	84	MODICON.....	51
		MICROZIDE.....	68	moexipril hcl.....	29
		midazolam hcl 2 mg/ml.....	77	moexipril-hydrochlorothiazide.....	31
				MOLINDONE HYDROCHLORIDE.....	41
				mometasone furoate.....	62
				mometasone furoate (nasal).....	91
				MONISTAT SOOTHING CARE ITCH RELIEF.....	62
				MONODOX.....	101

montelukast sodium.....	13	nadolol &		NATURE-THROID 113.75 MG,	
MONUROL.....	105	bendroflumethiazide.....	31	130 MG, 146.25 MG, 16.25 MG,	
morphine sulfate 0.5 mg/ml, 1		NAFCILLIN.....	98	195 MG, 260 MG, 32.5 MG, 325	
mg/ml.....	6	nafcillin sodium 1 gm, 10		MG, 65 MG, 81.25 MG, 97.5	
morphine sulfate 10 mg, 100 mg,		gm.....	98	MG.....	102
20 mg, 30 mg, 50 mg, 60 mg, 80		NAFCILLIN SODIUM 2		NATURE-THROID 48.75	
mg.....	6	GM.....	98	MG.....	102
morphine sulfate 10 mg, 20		NAFTIFINE HCL 1 %.....	58	NATURE-THROID NT-2.5.....	102
mg.....	6	naftifine hcl 2 %.....	58	NAVELBINE.....	38
morphine sulfate 10 mg/5ml, 100		NAFTIN 1 %, 2 %.....	58	NEBUPENT.....	10
mg/5ml, 20 mg/5ml, 20 mg/ml.....	6	NAGLAZYME.....	70	NEBUSAL.....	54
morphine sulfate 100 mg, 15 mg,		nalbuphine hcl.....	8	NECON 1/50-28.....	51
200 mg, 30 mg, 60 mg.....	7	NALFON.....	4	NECON 10/11-28.....	51
morphine sulfate 15 mg, 30		naloxone hcl 0.4 mg/ml.....	25	NEEVO DHA.....	87
mg.....	6	NALOXONE HCL 1		nefazodone hcl.....	20
MORPHINE SULFATE 30 MG, 5		MG/ML.....	25	NEO-SYNALAR.....	58
MG.....	6	naltrexone hcl.....	25	neomycin sulfate.....	2
MORPHINE SULFATE ER.....	6	NAMENDA.....	99	neomycin-bacitracin zn-	
MOTOFEN.....	24	NAMENDA TITRATION		polymyxin.....	93
MOVANTIK.....	73	PAK.....	99	neomycin-polymy-dexameth.....	94
MOVIPREP.....	78	NAMENDA XR.....	99	neomycin-polymyxin-gramicidin	
MOXATAG.....	97	NAMENDA XR TITRATION		.....	93
MOXEZA.....	93	PACK.....	99	neomycin-polymyxin-hc	
moxifloxacin hcl.....	72	naphazoline hcl.....	93	(ophth).....	94
MOZOBIL.....	77	NAPRELAN 375 MG, 500		neomycin-polymyxin-hc	
MS CONTIN.....	7	MG.....	4	(otic).....	96
MUCINEX D.....	54	NAPRELAN 750 MG.....	4	neomycin/polymyxin b gu.....	74
MULTAQ.....	13	NAPROSYN.....	4	NEORAL.....	45
mupirocin.....	57	NAPROXEN 125 MG/5ML.....	4	NEOSPORIN.....	93
mupirocin calcium (topical).....	57	naproxen 125 mg/5ml.....	4	NEOSPORIN GU IRRIGANT.....	74
MUSTARGEN.....	33	naproxen 250 mg, 375 mg, 500		NEOTUSS PLUS.....	54
MYALEPT.....	70	mg.....	4	NEPTAZANE.....	67
MYAMBUTOL.....	33	naproxen 375 mg, 500 mg.....	4	NESINA.....	22
MYCOBUTIN.....	33	naproxen sodium.....	4	NESSI SPACER/LARGE	
mycophenolate mofetil.....	45	naratriptan hcl.....	82	MASK.....	81
mycophenolate sodium.....	45	NARCAN.....	25	NESSI	
MYDRIACYL.....	92	NARDIL.....	19	SPACER/MOUTHPIECE.....	81
MYFORTIC.....	45	NASONEX.....	91	NESSI SPACER/SMALL/MED	
MYKIDZ IRON 10.....	77	NATACHEW.....	87	MASK.....	81
MYLERAN.....	33	NATACYN.....	93	NESTABS.....	87
MYNATAL ADVANCE.....	87	NATALVIRT 90 DHA.....	87	NESTABS ABC.....	87
MYNATAL ULTRACAPLET.....	87	NATALVIRT CA.....	87	NESTABS DHA.....	87
MYNATE 90 PLUS.....	87	NATAZIA.....	51	NEULASTA.....	76
MYOZYME.....	70	nateglinide.....	24	NEULASTA ONPRO KIT.....	76
MYRBETRIQ.....	105	NATELLE ONE.....	87	NEUMEGA.....	76
MYSOLINE.....	17	NATPARA.....	68	NEUPOGEN.....	76
nabumetone 500 mg.....	4	NATROBA.....	66	NEUPRO 1 MG/24HR, 3	
nabumetone 750 mg.....	4			MG/24HR, 8 MG/24HR.....	39
nadolol.....	47			NEUPRO 2 MG/24HR.....	39
				NEUPRO 4 MG/24HR, 6	
				MG/24HR.....	39
				NEURONTIN.....	17

NEVANAC.....	95	nizatidine 150 mg, 300 mg.....	103	NOVOLIN R.....	24
nevirapine.....	42	NIZORAL.....	58	NOVOLIN R RELION.....	23
NEWGEN.....	87	nonoxynol-9.....	106	NOVOLOG.....	24
NEXA PLUS.....	87	NOR-QD.....	52	NOVOLOG FLEXPEN.....	24
NEXAVAR.....	37	NORCO.....	7	NOVOLOG MIX 70/30.....	24
NEXIUM 10 MG, 2.5 MG, 20 MG, 40 MG, 5 MG.....	104	NORDITROPIN FLEXPEN.....	69	NOVOLOG MIX 70/30 PREFILLED FLEXPEN.....	24
NEXIUM 20 MG.....	104	NORDITROPIN NORDIFLEX PEN.....	69	NOVOLOG PENFILL.....	24
NEXIUM 24HR.....	104	norethin acet & estrad-fe..	51	NOXAFIL.....	26
NEXIUM 40 MG.....	104	norethindrone & eth estradiol.....	51	NUCALA.....	13
NEXPLANON.....	52	norethindrone & ethinyl estradiol-fe 0.4mg-35mcg..	51	NUCORT.....	62
niacin (antihyperlipidemic)...	29	norethindrone & ethinyl estradiol-fe 75mg-0.8mg- 25mcg.....	51	NUCYNTA.....	7
NIASPAN.....	29	norethindrone (contraceptive).....	52	NUCYNTA ER.....	7
nicardipine hcl 20 mg, 30 mg	48	norethindrone acet & eth estra.....	51	NUDEXTA.....	100
NICODERM CQ.....	100	norethindrone acetate.....	98	NULOJIX.....	45
nicotine.....	100	norethindrone acetate-ethinyl estradiol.....	71	NULYTELY/FLAVOR PACKS.....	78
NICOTROL INHALER.....	100	norethindrone acetate-ethinyl estradiol-fe.....	51	NUTRIDOX.....	101
NICOTROL NS.....	100	norethindrone-eth estradiol (triphasic).....	51	NUTROPIN AQ NUSPIN 10..	69
nifedipine 10 mg, 20 mg.....	48	norgestimate-ethinyl estradiol.....	51	NUTROPIN AQ NUSPIN 20..	69
nifedipine 30 mg, 60 mg.....	48	norgestimate-ethinyl estradiol (triphasic).....	51	NUTROPIN AQ NUSPIN 5..	69
nifedipine 30 mg, 60 mg, 90 mg.....	48	norgestrel & ethinyl estradiol.....	51	NUTROPIN AQ PEN.....	69
NILANDRON.....	35	NORINYL 1+35.....	51	NUVARING.....	52
nilutamide.....	35	NORINYL 1+50.....	51	NUVIGIL 150 MG, 250 MG, 50 MG.....	2
nimodipine.....	48	NORITATE.....	66	NUVIGIL 200 MG.....	2
NINLARO.....	37	NORMOSOL -R.....	83	NUWIQ.....	75
NIPENT.....	37	NORMOSOL-R.....	83	NYMALIZE.....	48
nisoldipine.....	48	NOROXIN.....	72	nystatin.....	26
NITRO-BID.....	12	NORPACE.....	13	nystatin (mouth-throat).....	84
NITRO-DUR 0.1 MG/HR, 0.2 MG/HR, 0.4 MG/HR, 0.6 MG/HR.....	12	NORPACE CR.....	13	nystatin (topical).....	58
NITRO-DUR 0.3 MG/HR, 0.8 MG/HR.....	12	NORPRAMIN.....	21	nystatin-triamcinolone.....	58
nitrofurantoin.....	105	NORTHERA.....	107	OB COMPLETE ONE.....	87
nitrofurantoin macrocrystal..	105	nortriptyline hcl.....	21	OB COMPLETE PETITE.....	87
nitrofurantoin monohyd macro.....	105	NORVASC.....	48	OB COMPLETE PREMIER..	87
nitroglycerin 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr.....	12	NORVIR.....	42	OB COMPLETE/DHA.....	87
nitroglycerin 0.3 mg, 0.4 mg, 0.6 mg.....	12	NOVOEIGHT.....	75	OBIZUR.....	75
nitroglycerin 0.4 mg/spray...	12	NOVOLIN 70/30.....	23	OBSTETRIX DHA.....	87
nitroglycerin 2.5 mg, 9 mg...	12	NOVOLIN 70/30 RELION..	23	OBTREX DHA.....	87
nitroglycerin 400 mcg/spray..	12	NOVOLIN N.....	23	OCTAGAM.....	97
NITROLINGUAL PUMPSPRAY.....	12	NOVOLIN N RELION.....	23	octreotide acetate.....	71
NITROMIST.....	12			OCUFEN.....	95
NITROSTAT.....	12			OCUFLOX.....	93
NIZATIDINE 15 MG/ML...	103			ODEFSEY.....	42
				ODOMZO.....	35
				OFEV.....	101
				OFLOXACIN.....	72

ofloxacin (ophth).....	93	OPDIVO.....	35	ORTHO DIAPHRAGM FLAT	
ofloxacin (otic).....	96	opium tincture.....	24	SPRING KIT 65.....	79
olanzapine 10 mg.....	41	OPSUMIT.....	49	ORTHO DIAPHRAGM FLAT	
olanzapine 10 mg, 15 mg, 2.5		OPTASE.....	64	SPRING KIT 70.....	79
mg, 20 mg, 5 mg, 7.5 mg....	41	OPTICHAMBER		ORTHO DIAPHRAGM FLAT	
olanzapine 10 mg, 15 mg, 20 mg,		DIAMOND.....	81	SPRING KIT 75.....	79
5 mg.....	41	OPTICHAMBER		ORTHO DIAPHRAGM FLAT	
olanzapine-fluoxetine hcl....	99	DIAMOND/LARGEFACE		SPRING KIT 80.....	79
OLEPTRO.....	20	MASK.....	81	ORTHO DIAPHRAGM FLAT	
olopatadine hcl.....	95	OPTICHAMBER		SPRING KIT 85.....	80
olopatadine hcl (nasal).....	91	DIAMOND/MEDIUM FACE		ORTHO DIAPHRAGM FLAT	
OLUX.....	62	MASK.....	81	SPRING KIT 90.....	80
OLUX-E.....	62	OPTICHAMBER		ORTHO DIAPHRAGM FLAT	
OLYSIO.....	44	DIAMOND/SMALLFACE		SPRING KIT 95.....	80
OMECLAMOX-PAK.....	104	MASK.....	81	ORTHO EVRA.....	52
omega-3-acid ethyl esters... 27		OPTIONS CONCEPTROL		ORTHO MICRONOR.....	52
omeprazole.....	104	VAGINAL		ORTHO TRI-CYCLEN.....	51
OMEPRAZOLE + SYRSPEND		CONTRACEPTIVE.....	106	ORTHO TRI-CYCLEN LO... 51	
SFALKA.....	104	OPTIONS GYNOL II		ORTHO-CEPT.....	51
omeprazole-sodium bicarbonate		VAGINALCONTRACEPTIVE		ORTHO-CYCLEN.....	51
20mg-1680mg, 40mg-		.....	106	ORTHO-NOVUM 1/35.....	51
1680mg.....	104	OPTIVAR.....	95	ORTHO-NOVUM 7/7/7.....	51
omeprazole-sodium bicarbonate		ORACEA.....	66	ORTHOVISC.....	90
40mg-1100mg.....	104	ORACIT.....	74	OSENI.....	22
OMNARIS.....	91	ORALAIR.....	47	OSMOPREP.....	78
OMNIFLEX DIAPHRAGM... 79		ORALAIR ADULT SAMPLE		OSPHENA.....	69
OMNIPRED.....	94	KIT.....	47	OTEZLA.....	5
OMNITROPE.....	69	ORALAIR ADULT STARTER		OTICIN HC NR.....	96
OMONTYS.....	76	PACK.....	47	OTOVEL.....	96
ONCASPAR.....	37	ORALAIR		OTREXUP.....	3
ondansetron.....	25	CHILDREN/ADOLESCENTS		OVCON-35.....	51
ondansetron hcl 4 mg, 8 mg. 25		SAMPLE KIT.....	47	OVIDE.....	66
ondansetron hcl 4 mg/5ml... 25		ORALAIR		oxacillin sodium 1 gm, 10 gm98	
ONETOUCH ULTRA 2.....	80	CHILDREN/ADOLESCENTS		oxaliplatin.....	33
ONETOUCH ULTRA BLUE... 66		STARTER PACK.....	47	OXANDRIN.....	8
ONETOUCH ULTRA MINI... 80		ORAP.....	100	oxandrolone.....	8
ONETOUCH VERIO.....	80	ORAPRED ODT.....	53	oxaprozin.....	4
ONETOUCH VERIO FLEX		ORAVIG.....	84	OXAYDO.....	7
BLOODGLUCOSE		ORENCIA.....	5	oxazepam.....	12
MONITORING SYSTEM... 80		ORENCIA CLICKJECT... 5		oxcarbazepine.....	18
ONETOUCH VERIO IQ BLOOD		ORENITRAM.....	48	oxiconazole nitrate.....	58
GLUCOSE MONITORING		ORFADIN.....	70	OXISTAT.....	58
SYSTEM.....	80	ORKAMBI.....	100	OXSORALEN.....	65
ONETOUCH VERIO TEST		orphenadrine citrate 100		OXSORALEN ULTRA.....	59
STRIPS.....	66	mg.....	90	OXTELLAR XR.....	18
ONFI.....	16	ORTHO DIAPHRAGM COIL		oxybutynin chloride.....	105
ONGLYZA.....	22	SPRING KIT 100.....	79	oxycodone hcl.....	7
ONMEL.....	26	ORTHO DIAPHRAGM COIL		OXYCODONE HCL ER.....	7
OPANA 10 MG, 5 MG.....	7	SPRING KIT 105.....	79	oxycodone w/ acetaminophen.7	
OPANA ER (CRUSH		ORTHO DIAPHRAGM COIL			
RESISTANT).....	7	SPRING KIT 50.....	79		
		ORTHO DIAPHRAGM FLAT			
		SPRING KIT 55.....	79		
		ORTHO DIAPHRAGM FLAT			
		SPRING KIT 60.....	79		

oxycodone-aspirin.....	7	PAXIL 10 MG/5ML.....	20	pediatric multivitamins w/fl	0.25mg/ml-5unit/ml-0.6mg/ml-
OXYCODONE/ACETAMINOPHE		PAXIL CR.....	20	0.25mg/ml-1150unit/ml-2mg/ml-	
N.....	7	PCE.....	79	2mcg/ml-400unit/ml-0.5mg/ml-	
OXYCODONE/IBUPROFEN..	7	ped multivitamins w/fl & iron		29.7mcg/ml-3mcg/ml-0.4mg/ml-	
OXYCONTIN.....	7	0.25mg/ml-6mg/ml-0.6mg/ml-		32mg/ml, 0.25mg/ml-5unit/ml-	
oxymorphone hcl 10 mg, 15 mg,		1500unit/ml-0.9mcg/ml-		0.6mg/ml-8mg/ml-1500unit/ml-	
20 mg, 30 mg, 40 mg, 5 mg, 7.5		400unit/ml-0.5mg/ml-8mg/ml-		2mcg/ml-400unit/ml-0.5mg/ml-	
mg.....	7	7.5unit/ml-0.4mg/ml-35mg/ml		0.4mg/ml-35mg/ml, 0.25mg/ml-	
oxymorphone hcl 10 mg, 5 mg		.....	86	5unit/ml-8mg/ml-0.6mg/ml-	
OXYTROL.....	105	PEDIADERM HC.....	62	1500unit/ml-2mcg/ml-400unit/ml-	
OXYTROL FOR WOMEN..	105	PEDIADERM TA.....	62	0.5mg/ml-0.4mg/ml-35mg/ml,	
paclitaxel 100 mg/16.7ml, 30		PEDIAPRED.....	53	5unit/ml-0.25mg/ml-0.6mg/ml-	
mg/5ml, 300 mg/50ml.....	38	pediatric multivitamins w/fl		8mg/ml-1500unit/ml-2mcg/ml-	
PACLITAXEL 150 MG/25ML	38	0.25mg-15unit-1.2mg-2500unit-		400unit/ml-0.5mg/ml-0.4mg/ml-	
PAIRE OB.....	87	4.5mcg-400unit-1.05mg-		35mg/ml.....	86
paliperidone.....	40	13.5mg-1.05mg-0.3mg-60mg,		pediatric vitamins acd fluoride &	
PAMELOR.....	21	0.25mg-15unit-400unit-		iron.....	86
pamidronate disodium 30		2500unit-1.2mg-4.5mcg-		pediatric vitamins acd w/	
mg/10ml, 90 mg/10ml.....	68	13.5mg-1.05mg-0.3mg-1.05mg-		fluoride.....	86
PAMIDRONATE DISODIUM 6		60mg, 0.5mg-15unit-1.2mg-		peg 3350-kcl-sod bicarb-sod	
MG/ML.....	69	2500unit-4.5mcg-400unit-		chloride-sod sulfate.....	78
PAMINE.....	103	1.05mg-13.5mg-1.05mg-0.3mg-		peg 3350-potassium chloride-sod	
PAMINE FORTE.....	103	60mg, 0.5mg-15unit-400unit-		bicarbonate-sod chloride....	78
PAMINE FQ.....	103	2500unit-1.2mg-4.5mcg-		PEG-INTRON.....	44
PANCREAZE.....	67	13.5mg-1.05mg-0.3mg-1.05mg-		PEG-INTRON REDIPEN....	44
pancrelipase (lipase-protease-		60mg, 0.5mg-2500unit-13.5mg-		PEG-INTRON REDIPEN PAK	
amylase).....	67	1.2mg-4.5mcg-400unit-1.05mg-		4.....	44
PANDEL.....	62	0.3mg-15unit-1.05mg-60mg,		PEGANONE.....	18
PANRETIN.....	59	15unit-0.25mg-1.05mg-13.5mg-		PEGASYS.....	44
pantoprazole sodium 20 mg, 40		1.2mg-2500unit-4.5mcg-		PEGASYS PROCLICK.....	44
mg.....	104	400unit-0.3mg-1.05mg-60mg,		PEGINTRON.....	44
PARAFON FORTE DSC.....	90	15unit-0.25mg-2500unit-		penicillin g potassium.....	97
PARAGARD INTRAUTERINE		13.5mg-1.2mg-4.5mcg-400unit-		PENICILLIN G POTASSIUM IN	
COPPER CONTRACEPTIVE		1.05mg-0.3mg-1.05mg-60mg,		ISO-OSMOTIC DEXTROSE	97
T380A.....	52	15unit-0.5mg-1.05mg-13.5mg-		PENICILLIN G PROCAINE..	97
paregoric.....	25	1.2mg-2500unit-4.5mcg-		PENICILLIN G SODIUM....	97
PAREMYD.....	95	400unit-0.3mg-1.05mg-60mg,		penicillin v potassium.....	97
paricalcitol 1 mcg, 2 mcg, 4		15unit-0.5mg-2500unit-13.5mg-		PENLAC NAIL LACQUER... 58	
mcg.....	70	1.2mg-4.5mcg-400unit-1.05mg-		PENNSAID 1.5 %.....	57
paricalcitol 2 mcg/ml, 5		0.3mg-1.05mg-60mg, 15unit-		PENNSAID 2 %.....	57
mcg/ml.....	70	1mg-2500unit-13.5mg-1.2mg-		PENTASA.....	73
PARLODEL.....	39	4.5mcg-400unit-1.05mg-0.3mg-		pentazocine w/ naloxone....	8
PARNATE.....	19	1.05mg-60mg, 1mg-15unit-		pentoxifylline.....	76
paromomycin sulfate.....	2	1.2mg-2500unit-4.5mcg-		PEPCID 20 MG.....	103
paroxetine hcl.....	20	400unit-1.05mg-13.5mg-		PEPCID 40 MG.....	103
PASER.....	33	1.05mg-0.3mg-60mg, 1mg-		PEPCID 40 MG/5ML.....	103
PATADAY.....	95	15unit-400unit-2500unit-1.2mg-		PEPCID AC MAXIMUM	
PATANASE.....	91	4.5mcg-13.5mg-1.05mg-0.3mg-		STRENGTH.....	103
PATANOL.....	95	1.05mg-60mg, 200mcg-		PERCOCET.....	8
PAXIL 10 MG, 20 MG, 30 MG, 40		0.25mg-15unit-400unit, ...	85	PERCODAN.....	8
MG.....	20			PERFOROMIST.....	15

PERIDEX.....	85	PLASMA-LYTE-148.....	83	POTASSIUM CHLORIDE 10	
perindopril erbumine.....	29	PLAVIX.....	76	MEQ/50ML.....	84
PERJETA.....	35	PLEGRIDY.....	99	potassium chloride 20 meq.....	84
permethrin.....	66	PLEGRIDY STARTER		POTASSIUM CHLORIDE ER 20	
perphenazine.....	41	PACK.....	100	MEQ.....	84
perphenazine-amitriptyline.....	99	PLETAL.....	76	POTASSIUM CHLORIDE ER 8	
PERSANTINE.....	76	PLEXION.....	56	MEQ.....	84
PERTZYE.....	67	PLEXION CLEANSER.....	56	potassium chloride in nacl.....	83
PEXEVA.....	20	PLEXION CLEANSING		potassium chloride	
PFIZERPEN-G.....	97	CLOTHS.....	56	microencapsulated crystals	
phenazopyridine hcl.....	75	PNV FERROUS		cr.....	84
phenelzine sulfate.....	19	FUMARATE/DOCUSATE/FOLI		potassium citrate	
phenobarbital.....	77	C ACID.....	88	(alkalinizer).....	74
phenobarbital-hyoscyamine-		PNV OB+DHA.....	88	potassium citrate-citric acid.....	74
atropine-scopolamine.....	103	PNV-DHA+DOCUSATE.....	88	POTIGA.....	18
phenoxybenzamine hcl.....	30	PNV-OMEGA.....	88	PR NATAL 400.....	88
phenyleph-promethazine w/		PNV-SELECT.....	88	PR NATAL 400 EC.....	88
cod.....	54	PNV-TOTAL.....	88	PR NATAL 430.....	88
phenylephrine hcl (ophth).....	93	PNV-VP-U.....	88	PR NATAL 430 EC.....	88
phenylephrine w/ dm-gg		PODOCON 25 IN BENZOIN		PRADAXA.....	16
30mg/5ml-200mg/5ml-10mg/5ml		TINCTURE.....	64	PRALUENT.....	29
.....	54	podofilox.....	64	pramipexole dihydrochloride.....	39
phenylephrine-chlorphen-dm		POLY HUB NEEDLE/30G X		PRAMOSONE 1%-1%.....	62
3mg/ml-1mg/ml-3.5mg/ml.....	54	1/2".....	80	PRAMOSONE 1%-1%, 1%-	
PHENYLHISTINE DH.....	54	POLY-VI-FLOR.....	86	2.5%.....	62
PHENYTEK.....	18	POLY-VI-FLOR FS.....	86	PRAMOSONE 1%-2.5%.....	62
phenytoin.....	19	POLY-VI-FLOR/IRON		PRAMOSONE E.....	62
phenytoin sodium.....	19	200MCG-0.5MG-10MG-		PRAMOTIC.....	96
phenytoin sodium extended.....	19	15UNIT-400UNIT.....	86	pramoxine-chloroxylenol.....	96
PHOSLO.....	74	POLY-VI-FLOR/IRON		pramoxine-hc.....	62
PHOSLYRA.....	74	200MCG/ML-7MG/ML-		pramoxine-hc-chloroxylenol.....	96
PHOSPHOLINE IODIDE.....	92	0.25MG/ML.....	86	PRANDIMET.....	22
PHOTOFRIN.....	37	polymyxin b sulfate.....	11	PRANDIN.....	24
PICATO.....	59	polymyxin b-trimethoprim.....	93	PRAVACHOL 20 MG, 80	
pilocarpine hcl.....	92	POLYTRIM.....	93	MG.....	28
pilocarpine hcl (oral).....	85	POMALYST.....	36	PRAVACHOL 40 MG.....	28
pimozide.....	100	PONSTEL.....	4	pravastatin sodium 10 mg, 20	
pindolol.....	47	pot & sod citrates w/citric		mg, 80 mg.....	28
pioglitazone hcl.....	23	ac.....	74	pravastatin sodium 40 mg.....	29
pioglitazone hcl-glimepiride.....	22	pot phosphate monobasic w/		prazosin hcl.....	30
pioglitazone hcl-metformin		sod phosphate dibasic &		PRECISION XTRA.....	80
hcl.....	22	monobasic.....	84	PRECISION XTRA BLOOD	
piperacillin sodium-tazobactam		potassium bicarb &		GLUCOSE TEST STRIPS.....	66
sodium 0.25gm-2gm, 0.375gm-		chloride.....	84	PRECOSE.....	21
3gm, 0.5gm-4gm.....	98	potassium bicarbonate.....	84	PRED FORTE.....	94
piroxicam.....	4	potassium chloride 0.4 meq/ml,		PRED MILD.....	94
PLAN B ONE-STEP.....	52	10 meq/100ml, 2 meq/ml, 20		PRED-G.....	94
PLAQUENIL.....	32	meq/100ml, 20 meq/50ml.....	84	PRED-G S.O.P.....	94
PLASMA-LYTE A.....	83	potassium chloride 10 %, 20		prednicarbate.....	63
		%.....	84	prednisolone.....	53
		potassium chloride 10 meq, 8			
		meq.....	84		

prednisolone acetate (ophth) 94	pregnolone acetate (ophth) 94	prochlorperazine 41
PREDNISOLONE SODIUM	pregnolone acetate (ophth) 94	prochlorperazine edisylate 41
PHOSPHATE 1 % 94	pregnolone acetate (ophth) 94	prochlorperazine maleate 41
prednisolone sodium phosphate	pregnolone acetate (ophth) 94	PROCORT 9
10 mg, 15 mg, 30 mg 53	pregnolone acetate (ophth) 94	PROCRIT 10000 UNIT/ML, 2000
prednisolone sodium phosphate	pregnolone acetate (ophth) 94	UNIT/ML, 20000 UNIT/ML, 3000
15 mg/5ml, 5 mg/5ml, 6.7	pregnolone acetate (ophth) 94	UNIT/ML, 4000 UNIT/ML, 40000
mg/5ml 53	pregnolone acetate (ophth) 94	UNIT/ML 76
PREDNISOLONE SODIUM	pregnolone acetate (ophth) 94	PROCTOCORT 9
PHOSPHATE 25 MG/5ML 53	pregnolone acetate (ophth) 94	PROCTOFOAM HC 9
PREDNISOLONE/MOXIFLOXAC	pregnolone acetate (ophth) 94	PROCYSBI 74
IN 94	pregnolone acetate (ophth) 94	PRODRIN 82
PREDNISOLONE/MOXIFLOXAC	pregnolone acetate (ophth) 94	progesterone micronized 98
IN/BROMFENAC 94	pregnolone acetate (ophth) 94	PROGLYCEM 22
PREDNISOLONE/MOXIFLOXAC	pregnolone acetate (ophth) 94	PROGRAF 0.5 MG, 1 MG, 5
IN/KETOROLAC 94	pregnolone acetate (ophth) 94	MG 45
prednisone 53	pregnolone acetate (ophth) 94	PROLASTIN-C 100
PREDNISONE INTENSOL 53	pregnolone acetate (ophth) 94	PROLENSA 95
PREFERA OB 88	pregnolone acetate (ophth) 94	PROLEUKIN 37
PREFERA OB + DHA 88	pregnolone acetate (ophth) 94	PROLIA 69
PREFEST 71	pregnolone acetate (ophth) 94	PROMACTA 12.5 MG, 25 MG, 50
PREFOL-DHA 88	pregnolone acetate (ophth) 94	MG 76
PREMARIN 0.3 MG, 0.45 MG,	pregnolone acetate (ophth) 94	PROMACTA 75 MG 76
0.625 MG, 0.9 MG, 1.25 MG 72	pregnolone acetate (ophth) 94	promethazine &
PREMARIN 0.625 MG/GM 106	pregnolone acetate (ophth) 94	phenylephrine 54
PREMARIN 25 MG 72	pregnolone acetate (ophth) 94	promethazine hcl 12.5 mg, 25
PREMPHASE 71	pregnolone acetate (ophth) 94	mg, 50 mg 27
PREMPRO 71	pregnolone acetate (ophth) 94	promethazine hcl 6.25
PRENA1 PEARL 88	pregnolone acetate (ophth) 94	mg/5ml 27
PRENA1	pregnolone acetate (ophth) 94	promethazine w/codeine 54
PLUS/QUATREFOLIC 88	pregnolone acetate (ophth) 94	promethazine-dm 54
PRENAISSANCE 90 DHA 88	pregnolone acetate (ophth) 94	PROMETHAZINE/PHENYLEPHR
PRENAISSANCE BALANCE 88	pregnolone acetate (ophth) 94	INE 54
PRENAISSANCE DHA 88	pregnolone acetate (ophth) 94	PROMETRIUM 98
PRENAISSANCE HARMONY	pregnolone acetate (ophth) 94	propafenone hcl 150 mg 13
DHA 88	pregnolone acetate (ophth) 94	propafenone hcl 225 mg, 300
PRENAISSANCE NEXT 88	pregnolone acetate (ophth) 94	mg 13
PRENAISSANCE NEXT-B 88	pregnolone acetate (ophth) 94	propafenone hcl 225 mg, 325 mg,
PRENAISSANCE PLUS 88	pregnolone acetate (ophth) 94	425 mg 13
PRENAISSANCE PROMISE 88	pregnolone acetate (ophth) 94	propranolol bromide 103
PRENATA 88	pregnolone acetate (ophth) 94	propranolol hcl 94
PRENATAL 19 30UNIT-	pregnolone acetate (ophth) 94	propranolol &
1000UNIT-20MG-25MG-3MG-	pregnolone acetate (ophth) 94	hydrochlorothiazide 31
200MG-29MG-7MG-15MG-3MG-	pregnolone acetate (ophth) 94	propranolol hcl 10 mg, 20 mg, 40
12MCG-400UNIT-1MG-20MG-	pregnolone acetate (ophth) 94	mg, 60 mg, 80 mg 47
100MG 88	pregnolone acetate (ophth) 94	propranolol hcl 120 mg, 160 mg,
PRENATAL 19 30UNIT-	pregnolone acetate (ophth) 94	60 mg, 80 mg 47
1000UNIT-20MG-3MG-200MG-	pregnolone acetate (ophth) 94	propranolol hcl 20 mg/5ml, 40
29MG-7MG-15MG-3MG-12MCG-	pregnolone acetate (ophth) 94	mg/5ml 47
400UNIT-1MG-20MG-100MG	pregnolone acetate (ophth) 94	propylthiouracil 102
88	pregnolone acetate (ophth) 94	PROSCAR 75
pregnolone acetate (ophth) 94	pregnolone acetate (ophth) 94	PROSTIN E2 96
fumarate-folic acid 88	pregnolone acetate (ophth) 94	

PROTONIX 20 MG, 40 MG	104	QUFLORA PEDIATRIC		RASUVO	3
PROTONIX 40 MG	104	108MCG-1MG-15UNIT-		RAVICTI	70
PROTOPIC	64	0.25MG-15MG-1200UNIT-		RAYOS	53
protriptyline hcl	21	5MG-1.3MG-4MCG-400UNIT-		RAZADYNE 12 MG, 4 MG, 8	
PROVENGE	35	1.2MG-100MCG-1.5MG-60MG,		MG	99
PROVENTIL HFA	15	108MCG-1MG-15UNIT-0.5MG-		RAZADYNE 4 MG/ML	99
PROVERA	98	15MG-1200UNIT-5MG-1.3MG-		RAZADYNE ER	99
PROVIGIL	2	4MCG-400UNIT-1.2MG-		REBETOL 200 MG	44
PROZAC	20	100MCG-1.5MG-60MG,		REBETOL 40 MG/ML	44
PROZAC WEEKLY	20	108MCG-1MG-15UNIT-1MG-		REBIF	100
pseudoephed-cpm w/		15MG-1200UNIT-5MG-1.3MG-		REBIF REBIDOSE	100
hydrocod	54	4MCG-400UNIT-1.2MG-		REBIF REBIDOSE	100
pseudoephedrine w/ codeine-		100MCG-1.5MG-60MG	86	TITRATIONPACK	100
gg	54	QUFLORA PEDIATRIC		REBIF TITRATION PACK	100
pseudoephedrine-guaifenesin		65MCG/ML-1MG/ML-		RECLAST	69
60mg-600mg	54	0.25MG/ML-10MG/ML-		RECOMBIVAX HB	106
PSORCON	63	1000UNIT/ML-0.8MG/ML-		RECTIV	9
PULMICORT 0.25 MG/2ML	14	0.6MG/ML-2MCG/ML-		REGLAN	73
PULMICORT 0.5 MG/2ML, 1		400UNIT/ML-0.5MG/ML-		REGRANEX	66
MG/2ML	14	35MCG/ML-5UNIT/ML-		RELENZA DISKHALER	44
PULMICORT FLEXHALER 180		0.4MG/ML-35MG/ML	86	RELHIST	54
MCG/ACT	14	QUILLIVANT XR	2	RELION KETONE	66
PULMICORT FLEXHALER 90		quinapril hcl	29	RELION KETONE TEST	
MCG/ACT	14	quinapril-hydrochlorothiazide	31	STRIPS	66
PULMOZYME	100	quinidine gluconate 324		RELISTOR	73
PURINETHOL	34	mg	13	RELNATE DHA	89
PURIXAN	34	QUINIDINE SULFATE 200 MG,		RELPAK	82
PYLERA	104	300 MG	13	REMERON	19
pyrazinamide	33	quinidine sulfate 300 mg	13	REMERON SOLTAB	19
PYRIDIDIUM	75	quinine sulfate	32	REMICADE	73
pyridostigmine bromide	32	QVAR 40 MCG/ACT	14	REMODULIN	48
QBRELIS	29	QVAR 80 MCG/ACT	14	RENAGEL	74
QNASL	91	R-NATAL OB	88	REVELA	74
QNASL CHILDRENS	91	rabeprazole sodium	104	repaglinide	24
QUADRAMET	37	RADIOGARDASE	25	REPAGLINIDE/METFORMIN	
QUALAQUIN	32	RAGWITEK	47	HYDROCHLORIDE	22
QUARTETTE	52	raloxifene hcl	69	REPATHA	29
quazepam	77	ramipril 1.25 mg, 2.5 mg, 5		REPATHA PUSHTRONEX	
QUDEXY XR	18	mg	29	SYSTEM	29
QUESTRAN	28	ramipril 10 mg	29	REPATHA SURECLICK	29
QUESTRAN LIGHT	28	RANEXA 1000 MG	11	REPREXAIN	8
quetiapine fumarate	41	RANEXA 500 MG	11	REQUIP	39
		ranitidine hcl 15 mg/ml, 150		REQUIP XL	39
		mg/10ml, 75 mg/5ml	103	RESCON-JR	54
		ranitidine hcl 150 mg	103	RESCRIPTOR	42
		ranitidine hcl 150 mg, 300		reserpine	30
		mg	103	RESPA-BR	27
		ranitidine hcl 300 mg	103	RESTASIS	94
		RAPAFLO	75		
		RAPAMUNE 0.5 MG, 1 MG, 2			
		MG	45		
		RAPAMUNE 1 MG/ML	45		

RESTORIL.....	77	RITALIN LA 20 MG, 30 MG, 40 MG.....	2	SANDOSTATIN LAR DEPOT.....	71
RETIN-A.....	56	RITALIN SR.....	2	SANTYL.....	64
RETIN-A MICRO.....	56	RITUXAN.....	35	SAPHRIS.....	41
RETIN-A MICRO PUMP 0.04 %, 0.1 %.....	56	rivastigmine.....	99	SARAFEM.....	100
RETROVIR.....	42	rivastigmine tartrate.....	99	SAVAYSA.....	16
REVATIO 10 MG/12.5ML.....	49	RIXUBIS.....	75	SAVELLA.....	99
REVATIO 10 MG/ML.....	49	rizatriptan benzoate.....	82	SAVELLA TITRATION PACK.....	99
REVATIO 20 MG.....	49	ROBAXIN 500 MG.....	90	SCLEROSOL INTRAPLEURAL.....	101
REVIA.....	25	ROBAXIN-750.....	90	SE-NATAL 19 30UNIT-1000UNIT-100MG-20MG-3MG-200MG-29MG-7MG-15MG-3MG-12MCG-400UNIT-1MG-20MG.....	89
REVLIMID.....	45	ROBINUL 1 MG.....	103	SE-NATAL 19 30UNIT-1000UNIT-20MG-25MG-200MG-29MG-7MG-15MG-3MG-12MCG-400UNIT-3MG-20MG-1MG-100MG.....	89
REXAPHENAC.....	57	ROBINUL FORTE.....	103	SEASONIQUE.....	52
REXULTI.....	41	ROCALTROL.....	70	SECONAL.....	77
REYATAZ.....	43	ropinirole hydrochloride.....	39	SECONAL SODIUM.....	77
REZIRA.....	54	rosuvastatin calcium.....	29	SECTRAL.....	46
REZYST SB.....	24	ROTATEQ.....	106	SELECT-OB 1700UNIT-29MG-30UNIT-15MG-25MG-1.6MG-15MG-1.8MG-5MCG-400UNIT-1MG-2.5MG-60MG.....	89
RHEUMATREX.....	3	ROXICET.....	8	SELECT-OB+DHA.....	89
RHINOCORT AQUA.....	91	ROXICODONE.....	7	selegiline hcl.....	40
RIAX.....	56	ROZEREM.....	78	selenium sulfide.....	59
RIBASPHERE.....	44	RUCONEST.....	76	selenium sulfide-pyrithione zinc in urea vehicle.....	59
RIBASPHERE RIBAPAK.....	44	RULAVITE DHA.....	89	SELZENTRY.....	43
RIBASPHERE RIBAPAK 400 MG, 600 MG.....	44	RYTARY.....	40	SEMPREX-D.....	54
RIBATAB.....	44	RYTHMOL 150 MG.....	13	SENSIPAR.....	70
ribavirin (hepatitis c).....	44	RYTHMOL 225 MG.....	13	SEREVENT DISKUS.....	15
RIDAURA.....	3	RYTHMOL SR.....	13	SERNIVO.....	63
rifabutin.....	33	SABRIL.....	18	SEROQUEL.....	41
RIFADIN 150 MG, 300 MG.....	33	SAFYRAL.....	52	SEROQUEL XR.....	41
RIFADIN 600 MG.....	33	SAIZEN.....	69	SEROSTIM.....	69
RIFAMATE.....	32	SAIZEN CLICK.EASY.....	69	sertraline hcl.....	20
rifampin 150 mg, 300 mg.....	33	SALAGEN.....	85	SEVELAMER CARBONATE.....	74
rifampin 600 mg.....	33	SALEX.....	64	SFROWASA.....	73
RIFATER.....	32	SALEX LOTION.....	64	SHOHL'S SOLUTION MODIFIED.....	74
RILUTEK.....	92	SALICYLIC ACID 26 %.....	65	SHUR-SEAL.....	106
riluzole.....	92	salicylic acid 27.5 %.....	65	SIGNIFOR.....	71
rimantadine hydrochloride.....	44	salicylic acid 6 %.....	64	SIGNIFOR LAR.....	71
ringer's irrigation.....	46	salicylic acid in ammonium lactate vehicle.....	65	sildenafil citrate (pulmonary hypertension).....	49
RIOMET.....	22	salicylic acid w/ cleanser.....	65		
risedronate sodium 150 mg, 30 mg, 35 mg, 5 mg.....	69	SALKERA.....	65		
risedronate sodium 35 mg.....	69	salsalate.....	5		
RISPERDAL.....	40	SAMSCA.....	71		
RISPERDAL CONSTA.....	40	SANCUSO.....	25		
RISPERDAL M-TAB.....	40	SANDIMMUNE 100 MG, 25 MG.....	45		
risperidone.....	40	SANDIMMUNE 100 MG/ML.....	46		
RITALIN.....	2	SANDIMMUNE 50 MG/ML.....	45		
RITALIN LA 10 MG, 60 MG.....	2	SANDOSTATIN.....	71		

SILENOR.....	77	SOOLANTRA.....	66	STRENSIQ.....	70
SILVADENE.....	60	SORIATANE 10 MG.....	59	STREPTOMYCIN SULFATE..	2
silver nitrate-potassium		SORIATANE 17.5 MG.....	59	STRIANT.....	9
nitrate.....	60	SORIATANE 25 MG.....	59	STRIBILD.....	43
silver sulfadiazine.....	60	SORILUX.....	59	STRIVERDI RESPIMAT....	15
SIMBRINZA.....	93	sotalol hcl.....	47	STROMECTOL.....	10
SIMCOR.....	29	sotalol hcl (afib/afI).....	47	SUBOXONE.....	8
SIMPONI.....	3	SOTYLIZE.....	47	SUBSYS.....	7
SIMULECT.....	46	SOVALDI.....	44	SUCLEAR.....	78
simvastatin 10 mg, 20 mg, 40 mg,		spacer/aerosol-holding		SUCRAID.....	67
5 mg.....	29	chambers.....	81	sucrafate.....	104
simvastatin 80 mg.....	29	SPECTRACEF.....	50	SULAR.....	48
SINEMET.....	40	SPINOSAD.....	66	sulfacetamide sod-	
SINEMET CR.....	40	SPIRIVA HANDIHALER... 13		prednisolone.....	94
SINGULAIR.....	13	SPIRIVA RESPIMAT.....	13	sulfacetamide sodium (acne)	56
sirolimus.....	46	spironolactone.....	68	sulfacetamide sodium	
SIRTURO.....	33	spironolactone &		(ophth).....	93
SIVEXTRO.....	11	hydrochlorothiazide.....	67	sulfacetamide sodium w/ sulfur	
SKELAXIN.....	90	SPORANOX 10 MG/ML... 26		1%-10%, 5%-10%.....	56
SKLICE.....	66	SPORANOX 100 MG.....	26	sulfacetamide sodium w/ sulfur	
SKYLA.....	52	SPORANOX PULSEPAK... 26		2%-10%.....	57
sodium chloride.....	84	SPRITAM.....	18	sulfacetamide sodium w/ sulfur	
sodium chloride (gu irrigant).....	74	SPRIX.....	4	2%-10%, 2%-2%-10%-10%, 4%-	
sodium chloride (inhalant).....	54	SPRYCEL.....	37	9%, 4.5%-9%.....	56
sodium citrate & citric acid.....	74	SSKI.....	83	sulfacetamide sodium w/ sulfur	
sodium fluoride 0.125 mg/drop,		SSS 10-5.....	56	2%-10%, 5%-10%.....	56
0.5 mg/ml.....	83	ST JOSEPH ADULT.....	5	sulfacetamide sodium w/ sulfur	
sodium fluoride 0.25 mg, 0.5 mg,		ST JOSEPH ADULT		4%-10%, 4%-4%-10%-10%... 57	
1 mg, 1.1 mg, 2.2 mg.....	83	ANALGESICLOW DOSE BITE		sulfacetamide sodium w/ sulfur	
SODIUM FLUORIDE 0.5 MG, 1		SIZE.....	5	4%-8%.....	57
MG.....	83	STALEVO 100.....	40	sulfacetamide sodium w/ sulfur	
sodium phenylbutyrate.....	70	STALEVO 125.....	40	4.8%-9.8%.....	56
sodium polystyrene		STALEVO 150.....	40	sulfacetamide sodium w/ sulfur	
sulfonate.....	46	STALEVO 200.....	40	5%-10%.....	56
SODIUM SULFACETAMIDE		STALEVO 50.....	40	sulfacetamide sodium-sulfur in	
WASH.....	59	STALEVO 75.....	40	urea vehicle.....	57
SODIUM		STARLIX.....	24	SULFADIAZINE.....	101
SULFACETAMIDE/SULFUR		stavudine.....	43	sulfamethoxazole-trimethoprim	
.....	56	STAVZOR.....	19	.....	10
SODIUM		STELARA.....	59	SULFAMYLON 5 %.....	60
SULFACETAMIDE/SULFUR		STERILE TALC		SULFAMYLON 85 MG/GM... 60	
CLEANSER IN UREA.....	56	POWDER.....	101	sulfasalazine.....	73
SOLARAZE.....	59	STIMATE.....	71	SULFOAM.....	57
SOLODYN.....	101	STIOLTO RESPIMAT.....	15	sulindac.....	4
SOLTAMOX.....	35	STIVARGA.....	37	SUMADAN WASH.....	57
SOLU-CORTEF.....	53	STRATTERA 10 MG, 18 MG,		sumatriptan 20 mg/act.....	83
SOMA.....	90	25 MG, 40 MG.....	1	sumatriptan 20 mg/act, 5	
SOMATULINE DEPOT.....	71	STRATTERA 100 MG, 60 MG,		mg/act.....	83
SOMAVERT.....	69	80 MG.....	1	sumatriptan 5 mg/act.....	83
SONATA.....	78			sumatriptan succinate 100 mg, 25	
				mg, 50 mg.....	83
				sumatriptan succinate 4	
				mg/0.5ml, 6 mg/0.5ml.....	83

sumatriptan succinate 6 mg/0.5ml	83	tamoxifen citrate	35	TERAZOL 3	106
SUMATRIPTAN SUCCINATE 6 MG/0.5ML	83	tamsulosin hcl	75	TERAZOL 7	106
SUMAVEL DOSEPRO	83	TANZEUM	22	terazosin hcl	30
SUMAXIN	57	TAPAZOLE	102	terbinafine hcl	26
SUMAXIN TS	57	TARCEVA	37	terbutaline sulfate 2.5 mg, 5 mg	15
SUMAXIN WASH	57	TARGADOX	101	terconazole vaginal	106
SUPRAX 100 MG, 200 MG	50	TARGRETIN 1 %	59	TERSI FOAM	59
SUPRAX 100 MG/5ML, 200 MG/5ML	50	TARGRETIN 75 MG	37	TERUMO SURGUARD2 SAFETY NEEDLE/30G X 1/2"	80
SUPRAX 400 MG	50	TARKA	31	TESSALON PERLES	53
SUPRAX 500 MG/5ML	50	TARON-BC	89	TESTONE CIK	9
SUPREP BOWEL PREP	78	TARON-C DHA	89	testosterone 1 %, 25 mg/2.5gm, 50 mg/5gm	9
SURFAXIN	101	TARON-PREX	89	TESTOSTERONE 10 MG/ACT	9
SURMONTIL	21	TASIGNA	37	TESTOSTERONE 250 MG/ML	9
SUSTIVA	43	TASMAR	39	testosterone cypionate 100 mg/ml	9
SUTENT	37	TAXOL	38	testosterone cypionate 200 mg/ml	9
SYLATRON	37	TAXOTERE	38	testosterone enanthate	9
SYLVANT	46	TAZORAC	59	TESTRED	9
SYMBICORT	15	TBC	64	tetrabenazine	99
SYMBYAX	99	TECFIDERA	100	tetracaine hcl (ophth)	94
SYMLINPEN 120	21	TECFIDERA STARTER PACK	100	tetracycline hcl	101
SYMLINPEN 60	21	TECHNIVIE	44	TEV-TROPIN	69
SYNAGIS	97	TEFLARO	50	TEVETEN	30
SYNALAR	63	TEGRETOL	18	TEVETEN HCT	31
SYNALGOS-DC	8	TEGRETOL-XR 100 MG	18	TEXACORT	63
SYNAREL	69	TEGRETOL-XR 200 MG, 400 MG	18	TGQ 30PSE/150GFN/15DM	54
SYNERA	65	TEKAMLO	31	TGQ 30PSE/3BRM/15DM	54
SYNJARDY	22	TEKURNA	32	THALOMID	45
SYNRIBO	37	TEKURNA HCT	31	THEO-24	15
SYNTHROID	102	telmisartan	30	theophylline	15
SYNVISC	90	telmisartan-amlodipine	31	THERACYS	37
SYNVISC ONE	90	telmisartan-hydrochlorothiazide	31	THIOLA	75
SYPRINE	45	temazepam	78	thioridazine hcl	41
TABLOID	34	TEMODAR 100 MG	33	THIOTEPA	33
TACLONEX	63	TEMODAR 100 MG, 140 MG, 180 MG, 20 MG, 250 MG, 5 MG	33	thiothixene	41
tacrolimus	46	TEMOVATE	63	THRIVITE 19	89
tacrolimus (topical)	64	TEMOVATE E	63	THYMOGLOBULIN	46
TAFINLAR	37	temozolomide	33	thyroid	102
TAGAMET HB	103	TENCON	5	THYROLAR-1	102
TAGRISSO	37	TENEX	30	THYROLAR-1/2	102
TALTZ	59	TENIPOSIDE	38	THYROLAR-1/4	102
TALWIN	8	TENORETIC 100	31	THYROLAR-2	102
TAMIFLU 30 MG, 45 MG	44	TENORETIC 50	31		
TAMIFLU 6 MG/ML	45	TENORMIN	46		
TAMIFLU 75 MG	45				

THYROLAR-3.....	102	TOPAMAX SPRINKLE.....	18	tretinoin 0.05 %.....	57
tiagabine hcl.....	18	TOPICORT 0.05 %.....	63	tretinoin microsphere.....	57
TIAZAC.....	48	TOPICORT 0.05 %, 0.25		TREXALL.....	34
TICASPRAY.....	91	%.....	63	TREXIMET.....	82
TICE BCG.....	38	TOPICORT 0.25 %.....	63	TRI-NORINYL 28.....	52
TICLOPIDINE HCL.....	76	topiramate.....	18	TRI-TABS DHA.....	89
ticlopidine hcl.....	76	TOPIRAMATE ER.....	18	TRI-VI-FLOR.....	86
TIGAN.....	25	topotecan hcl 4 mg.....	39	TRI-VI-FLORO.....	86
TIKOSYN.....	13	TOPOTECAN HCL 4		triamcinolone acetonide	
TIMENTIN 0.1GM-3GM.....	98	MG/4ML.....	39	(mouth).....	85
timolol maleate.....	47	TOPROL XL.....	46	triamcinolone acetonide	
timolol maleate (ophth).....	92	TORISEL.....	37	(topical).....	63
TIMOPTIC.....	92	torseamide.....	68	triamterene &	
TIMOPTIC OCUDOSE.....	92	TOTECT.....	38	hydrochlorothiazide.....	67
TIMOPTIC-XE.....	92	TOUJEO SOLOSTAR.....	24	TRIAMTERENE/HYDROCHLOR	
TINDAMAX.....	10	TOVIAZ.....	105	OTHIAZIDE.....	67
tinidazole.....	10	TRACLEER.....	49	TRIANEX.....	63
TIROSINT.....	102	TRADJENTA.....	22	triazolam.....	78
TIVICAY.....	43	tramadol hcl 100 mg, 200 mg,		TRIBENZOR.....	31
TIVORBEX.....	4	300 mg.....	7	TRICARE PRENATAL	
tizanidine hcl.....	90	tramadol hcl 50 mg.....	7	COMPLEAT.....	89
TL FOLATE.....	89	TRAMADOL HCL ER 100 MG,		TRICARE PRENATAL DHA	
TL-CARE DHA.....	89	150 MG, 200 MG, 300 MG.....	7	ONE.....	89
TOBI.....	2	tramadol-acetaminophen.....	8	TRICOR.....	28
TOBI PODHALER.....	2	TRANDATE.....	46	trifluoperazine hcl.....	41
TOBRADEX.....	94	trandolapril.....	29	trifluridine.....	93
TOBRADEX ST.....	94	trandolapril-verapamil hcl.....	31	TRIGLIDE.....	28
tobramycin.....	2	trandolapril-verapamil hcl.....	31	trihexyphenidyl hcl.....	39
tobramycin (ophth).....	93	tranexamic acid 1000		TRILEPTAL 150 MG, 300	
TOBRAMYCIN SULFATE 10		mg/10ml.....	77	MG.....	18
MG/ML.....	2	tranexamic acid 650 mg.....	77	TRILEPTAL 300 MG/5ML.....	18
tobramycin sulfate 10 mg/ml, 40		TRANSDERM-SCOP.....	25	TRILEPTAL 600 MG.....	18
mg/ml, 80 mg/2ml.....	3	TRANXENE T.....	12	TRILIPIX.....	28
tobramycin-dexamethasone.....	95	tranylcypromine sulfate.....	19	trimethobenzamide hcl.....	25
TOBREX.....	93	TRAVATAN Z.....	96	trimethoprim.....	10
TODAY SPONGE.....	106	travoprost.....	96	trimipramine maleate.....	21
TOFRANIL.....	21	trazodone hcl.....	20	TRINATAL GT.....	89
TOFRANIL-PM.....	21	TREANDA.....	34	TRINTELLIX.....	20
TOLAZAMIDE 250 MG.....	24	TRECATOR.....	33	TRISENOX.....	38
tolazamide 250 mg, 500 mg.....	24	TRELSTAR.....	35	TRIUMEQ.....	43
tolbutamide.....	24	TRELSTAR MIXJECT.....	35	TRIVEEN-DUO DHA.....	89
tolcapone.....	39	TRESIBA FLEXTOUCH 100		TRIVEEN-PRX RNF.....	89
tolmetin sodium.....	4	UNIT/ML.....	24	TRIZIVIR.....	43
tolterodine tartrate 1 mg, 2		TRESIBA FLEXTOUCH 200		TROKENDI XR.....	18
mg.....	105	UNIT/ML.....	24	tropicamide.....	92
tolterodine tartrate 2 mg, 4		TRETIN-X 0.038 %.....	57	trospium chloride.....	105
mg.....	105	TRETIN-X 0.075 %.....	57	TRULICITY.....	22
TOPAMAX.....	18	tretinoin (chemotherapy).....	38	TRUSOPT.....	95
		tretinoin 0.01 %, 0.025 %.....	57	TRUVADA.....	43
		tretinoin 0.025 %, 0.05 %, 0.1			
		%.....	57		

trypsin w/ castor oil & peruvian balsam.....	64	urea 47 %.....	64	VASERETIC.....	32
TUDORZA PRESSAIR.....	13	urea in lactic acid vehicle..	64	VASOTEC.....	29
TUSNEL 2MG-15MG-200MG.....	54	urea in lactic acid-salicylic acid vehicle.....	64	VCF VAGINAL CONTRACEPTIVE FILM... 106	106
TUSSICAPS.....	54	urea in zinc undecylenate-lactic acid vehicle.....	64	VCF VAGINAL CONTRACEPTIVE FOAM.. 106	106
TUSSIONEX PENNKINETIC EXTENDED RELEASE.....	54	UREA NAIL.....	64	VECAMYL.....	32
TUZISTRA XR.....	54	URECHOLINE.....	105	VECTIBIX.....	35
TWYNSTA.....	31	URETRON D/S.....	105	VELCADE.....	37
TYBOST.....	43	URIMAR-T.....	105	VELETRI.....	48
TYGACIL.....	11	UROCIT-K 10.....	74	VELTASSA.....	46
TYKERB.....	37	UROCIT-K 15.....	74	VELTIN.....	57
TYLENOL/CODEINE #3.....	8	UROCIT-K 5.....	74	VEMAVITE-PRX 2.....	89
TYLENOL/CODEINE #4.....	8	UROXATRAL.....	75	VENA-BAL DHA.....	89
TYSABRI.....	100	URSO 250.....	72	venlafaxine hcl 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg.....	21
TYVASO.....	48	URSO FORTE.....	72	venlafaxine hcl 150 mg.....	21
TYVASO REFILL.....	48	ursodiol.....	73	venlafaxine hcl 150 mg, 225 mg, 37.5 mg, 75 mg.....	21
TYVASO STARTER.....	48	UTOPIC.....	64	venlafaxine hcl 37.5 mg, 75 mg.....	21
TYZEKA.....	44	UVADEX.....	38	mg.....	21
TYZINE.....	92	VAGIFEM.....	106	VENLAFAXINE HCL ER.....	21
TYZINE PEDIATRIC NASAL DROPS.....	92	valacyclovir hcl.....	44	VENTAVIS.....	49
UCERIS.....	9	VALCHLOR.....	59	VENTOLIN HFA.....	15
ULESFIA.....	66	VALCYTE 450 MG.....	43	VERAMYST.....	91
ULORIC.....	75	VALCYTE 50 MG/ML.....	43	verapamil hcl 100 mg, 120 mg, 180 mg, 200 mg, 240 mg, 300 mg, 360 mg.....	48
ULTIMATECARE ONE.....	89	valganciclovir hcl 450 mg..	43	verapamil hcl 120 mg, 180 mg, 240 mg.....	48
ULTIMATECARE ONE NF.....	89	valganciclovir hcl 50 mg/ml	43	verapamil hcl 120 mg, 40 mg, 80 mg.....	48
ULTRACET.....	8	VALIUM.....	12	VERDESO.....	63
ULTRAM.....	7	valproate sodium 250 mg/5ml.....	19	VEREGEN.....	57
ULTRAM ER.....	7	valproic acid.....	19	VERELAN.....	48
ULTRAVATE.....	63	valsartan.....	30	VERELAN PM.....	48
ULTRAVATE X.....	63	valsartan-hydrochlorothiazide.....	32	VERIPRED 20.....	53
ULTRESA.....	67	VALSTAR.....	36	VERSACLOZ.....	41
UMECTA.....	63	VALTRESX.....	44	VESICARE.....	105
UMECTA NAIL FILM.....	63	VALVED HOLDING CHAMBER.....	82	VEXOL.....	95
UNASYN 1GM-2GM.....	98	VANATOL LQ.....	5	VFEND 200 MG, 50 MG.....	26
UNASYN BULK PACK.....	98	VANOCOCIN HCL.....	10	VFEND 40 MG/ML.....	26
UNIRETIC.....	31	vancomycin hcl 10 gm, 1000 mg, 500 mg, 5000 mg.....	10	VFEND IV.....	26
UNIVASC.....	29	vancomycin hcl 125 mg, 250 mg.....	10	VIBATIV.....	10
UPTRAVI.....	49	VANCOMYCIN HCL 750 MG.....	10	VIBERZI.....	73
URAMAXIN 20%.....	63	VANOS.....	63	VIBRAMYCIN 100 MG.....	101
URAMAXIN 45 %.....	63	VANOXIDE-HC.....	57	VIBRAMYCIN 25 MG/5ML.. 101	101
URAMAXIN GT.....	64	VANTAS.....	36	VIBRAMYCIN 50 MG/5ML.. 101	101
urea 39 %, 40 %, 45 %, 50 %.....	64	VARUBI.....	26	VICOPROFEN.....	8
urea 40 %.....	64	VASCEPA.....	27	VICTOZA.....	23
urea 40 %, 45 %.....	64				

VICTRELIS	44	VITAMIN D2	107	WESTHROID 113.75 MG, 130
VIDAZA	34	VITAMIN D3	107	MG, 146.25 MG, 16.25 MG, 195
VIDEX EC	43	VITAPEARL	89	MG, 260 MG, 32.5 MG, 325 MG,
VIDEXPEDIATRIC	43	VITEKTA	43	65 MG, 81.25 MG, 97.5 MG
VIEKIRA PAK	44	VITUZ	54	102
VIEKIRA XR	44	VIVA DHA	89	WESTHROID 162.5 MG, 48.75
VIGAMOX	93	VIVACTIL	21	MG
VIIBRYD	20	VIVELLE-DOT	72	102
VIIBRYD 10 MG, 20 MG, 40		VIVITROL	25	WIDE-SEAL SILICONE
MG	20	VIVLODEX	4	DIAPHRAGM KIT 60
VIIBRYD STARTER PACK	20	VIVOTIF	106	80
VIMOVO	4	VIVOTIF BERNA	106	WIDE-SEAL SILICONE
VIMPAT 10 MG/ML	18	VOLTAREN	57	DIAPHRAGM KIT 65
VIMPAT 100 MG, 150 MG, 200		VOLTAREN-XR	4	80
MG, 50 MG	18	VORAXAZE	38	WIDE-SEAL SILICONE
VINACAL B	89	voriconazole 200 mg	26	DIAPHRAGM KIT 70
VINATE C	89	voriconazole 200 mg, 50		80
VINATE CALCIUM	89	mg	26	WIDE-SEAL SILICONE
VINATE DHA RF	89	voriconazole 40 mg/ml	26	DIAPHRAGM KIT 75
VINBLASTINE SULFATE	38	VOSOL HC	96	80
vincristine sulfate	38	VOSPIRE ER	15	WIDE-SEAL SILICONE
vinorelbine tartrate	38	VOTRIENT	37	DIAPHRAGM KIT 80
VIOKACE	67	VP CH ULTRA	89	80
VIRACEPT	43	VP-CH PLUS	90	WIDE-SEAL SILICONE
VIRAMUNE	43	VP-CH-PNV	90	DIAPHRAGM KIT 85
VIRAMUNE XR	43	VP-GGR-B6 PRENATAL	90	80
VIRASAL	65	VP-HEME OB	90	WIDE-SEAL SILICONE
VIRAZOLE	45	VP-HEME OB + DHA	90	DIAPHRAGM KIT 90
VIREAD	43	VP-PNV-DHA	90	80
VIROPTIC	93	VPRIV	76	WIDE-SEAL SILICONE
VIRT-ADVANCE	89	VRAYLAR	40	DIAPHRAGM KIT 95
VIRT-C DHA	89	VUSION	58	80
VIRT-CARE ONE	89	VYTONER	58	WILATE
VIRT-NATE DHA	89	VYTORIN	27	75
VIRT-PN	89	VYVANSE	1	WP THYROID 113.75 MG, 130
VIRT-PN DHA	89	warfarin sodium	16	MG, 16.25 MG, 32.5 MG, 65 MG,
VIRT-PN PLUS	89	water for irrigation, sterile	46	81.25 MG, 97.5 MG
VIRT-VITE GT	89	WELCHOL	28	102
VIRTPREX	89	WELLBUTRIN	19	WP THYROID 48.75 MG
VISTARIL	12	WELLBUTRIN SR	19	102
VISTIDE	43	WELLBUTRIN XL	19	XALATAN
VISTOGARD	25	WELLESSE VITAMIN D3	107	96
VITAFOL ULTRA	89	WESTCORT	63	XALKORI
VITAFOL-NANO	89			37
VITAFOL-ONE	89			XANAX
VITAMEDMD PLUS				12
RX/QUATREFOLIC	89			XANAX XR
				12
				XARELTO
				16
				XARELTO STARTER PACK
				16
				XELJANZ
				3
				XELJANZ XR
				3
				XELODA
				34
				XENAZINE
				99
				XERAC AC
				65
				XGEVA
				69
				XIAFLEX
				45
				XIFAXAN
				10
				XIGDUO XR
				22
				XIIDRA
				94
				XODOL
				8
				XOFIGO
				37
				XOLAIR
				13
				XOLEGEL
				58
				XOPENEX
				15
				XOPENEX CONCENTRATE
				15
				XOPENEX HFA
				15
				XTANDI
				36
				XULANE
				52

XURIDEN.....	70	ZESTORETIC.....	32	ZOMACTON.....	69
XYLOCAINE 4 %.....	65	ZESTRIL.....	29	ZOMETA 4 MG/100ML.....	69
XYREM.....	98	ZETIA.....	29	ZOMETA 4 MG/5ML.....	69
XYZAL.....	27	ZETONNA.....	92	ZOMIG 2.5 MG.....	83
YASMIN 28.....	52	ZEVALIN Y-90.....	35	ZOMIG 2.5 MG, 5 MG.....	83
YAZ.....	52	ZIAC.....	32	ZOMIG NASAL SPRAY.....	83
YERVOY.....	35	ZIAGEN 20 MG/ML.....	43	ZOMIG ZMT.....	83
YODOXIN.....	2	ZIAGEN 300 MG.....	43	ZONALON.....	59
zafirlukast.....	14	ZIANA.....	57	ZONATUSS.....	53
zaleplon.....	78	zidovudine.....	43	ZONEGRAN.....	18
ZALTRAP.....	34	ZINACEF 7.5 GM.....	49	zonisamide.....	18
ZAMICET.....	8	ZINBRYTA.....	100	ZONTIVITY.....	76
ZANAFLEX.....	90	ZINECARD.....	38	ZORBTIVE.....	69
ZANOSAR.....	34	ZIOPTAN.....	96	ZORTRESS.....	46
ZANTAC 150 MAXIMUM STRENGTH.....	103	ziprasidone hcl.....	40	ZORVOLEX.....	4
ZANTAC 150 MG.....	103	ZIPSOR.....	4	ZOSYN 0.25GM-2GM, 0.375GM- 3GM, 0.5GM-4GM.....	98
ZANTAC 300 MG.....	104	ZIRGAN.....	93	ZOSYN 0.25GM/50ML- 2GM/50ML-5%, 0.375GM/50ML- 3GM/50ML-5%, 0.5GM/100ML- 4GM/100ML-5%.....	98
ZARONTIN.....	19	ZITHRANOL-RR.....	59	ZOVIRAX 200 MG.....	44
ZAROXOLYN.....	68	ZITHROMAX 1 GM.....	79	ZOVIRAX 200 MG/5ML.....	44
ZARXIO.....	77	ZITHROMAX 100 MG/5ML, 200 MG/5ML.....	79	ZOVIRAX 400 MG, 800 MG.....	44
ZATEAN-CH.....	90	ZITHROMAX 250 MG.....	79	ZOVIRAX 5 %.....	60
ZATEAN-PN.....	90	ZITHROMAX 500 MG.....	79	ZUBSOLV.....	8
ZATEAN-PN DHA.....	90	ZITHROMAX 600 MG.....	79	ZUPLENZ.....	25
ZATEAN-PN PLUS.....	90	ZITHROMAX TRI-PAK.....	79	ZUTRIPRO.....	54
ZAVESCA.....	76	ZITHROMAX Z-PAK.....	79	ZYBAN.....	100
ZEBETA.....	46	ZMAX.....	79	ZYDELIG.....	37
ZEGERID 20MG-1680MG, 40MG-1680MG.....	105	ZOCOR 10 MG, 20 MG, 40 MG, 5 MG.....	29	ZYFLO.....	14
ZEGERID 40MG-1100MG.....	104	ZOCOR 80 MG.....	29	ZYFLO CR.....	14
ZELAPAR.....	40	ZOFRAN 4 MG, 8 MG.....	25	ZYKADIA.....	37
ZELBORAF.....	37	ZOFRAN 4 MG/5ML.....	25	ZYLET.....	95
ZEMAIRA.....	100	ZOFRAN ODT.....	25	ZYLOPRIM.....	75
ZEMBRACE SYMTOUCH.....	83	ZOLADEX.....	36	ZYMAXID.....	93
ZEMPLAR 1 MCG, 2 MCG.....	70	ZOLEDRONIC ACID 4 MG/100ML.....	69	ZYPREXA 10 MG.....	41
ZEMPLAR 2 MCG/ML, 5 MCG/ML.....	70	zoledronic acid 4 mg/5ml.....	69	ZYPREXA 10 MG, 15 MG, 2.5 MG, 20 MG, 5 MG, 7.5 MG.....	41
ZENPEP 10000UNIT-3000UNIT- 16000UNIT, 136000UNIT- 40000UNIT-218000UNIT, 34000UNIT-10000UNIT- 55000UNIT, 51000UNIT- 15000UNIT-82000UNIT, 68000UNIT-20000UNIT- 109000UNIT, 85000UNIT- 25000UNIT-136000UNIT.....	67	zoledronic acid 5 mg/100ml.....	69	ZYPREXA ZYDIS.....	41
ZENPEP 17000UNIT-5000UNIT- 27000UNIT.....	67	ZOLINZA.....	37	ZYRTEC CHILDRENS ALLERGY.....	27
ZEPATIER.....	44	zolmitriptan 2.5 mg, 5 mg.....	83	ZYRTEC CHILDRENS HIVES RELIEF.....	27
ZERIT.....	43	ZOLOFT.....	20	ZYTIGA.....	36
		zolpidem tartrate 1.75 mg, 3.5 mg.....	78	ZYVOX.....	11
		zolpidem tartrate 10 mg, 5 mg.....	78		
		zolpidem tartrate 12.5 mg, 6.25 mg.....	78		
		ZOLPIMIST.....	78		