

2020 FORMULARY

LIST OF COVERED DRUGS



 **VIVA MEDICARE***Extra Value*
(HMO SNP)

 **VIVA MEDICARE**

PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION ABOUT THE DRUGS WE COVER IN THIS PLAN

This formulary was updated on 12/01/2020. For more recent information or other questions, please contact VIVA MEDICARE at 1-800-633-1542 or, for TTY users, 711, Monday - Friday, from 8 a.m. - 8 p.m. (from Oct. 1 - March 31: seven days a week, 8 a.m. - 8 p.m.) or visit www.VivaHealth.com/Medicare/MemberResources

VIVA MEDICARE is an HMO plan with a Medicare contract and a contract with the Alabama Medicaid Agency. Enrollment in VIVA MEDICARE depends on contract renewal H0154_mcdoc2310A_C_08/23/2019

VM-5200009

Note to existing members:

This formulary has changed since last year. Please review this document to make sure that it still contains the drugs you take.

When this drug list (formulary) refers to “we,” “us”, or “our,” it means VIVA MEDICARE. When it refers to “plan” or “our plan,” it means VIVA MEDICARE *Extra Value*.

This document includes a list of the drugs (formulary) for our plan which is current as of 12/01/2020. For an updated formulary, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You must generally use network pharmacies to use your prescription drug benefit.

Benefits, formulary, pharmacy network, and/or copayments/coinsurance may change on January 1, 2021, and from time to time during the year.

What is the VIVA MEDICARE Formulary?

A formulary is a list of covered drugs selected by VIVA MEDICARE in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program. VIVA MEDICARE will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at a VIVA MEDICARE network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your Evidence of Coverage.

Can the Formulary (drug list) change?

Most changes in drug coverage happen on January 1, but VIVA MEDICARE may add or remove drugs on the Drug List during the year, move them to different cost-sharing tiers, or add new restrictions. We must follow Medicare rules in making these changes.

Changes that can affect you this year: In the below cases, you will be affected by coverage changes during the year

- **New generic drugs.** We may immediately remove a brand name drug on our Drug List if we are replacing it with a new generic drug that will appear on the same or lower cost sharing tier and with the same or fewer restrictions. Also, when adding the new generic drug, we may decide to keep the brand name drug on our Drug List, but immediately move it to a different cost-sharing tier or add new restrictions. If you are currently taking that brand name drug, we may not tell you in advance before we make that change, but we will later provide you with information about the specific change(s) we have made.
 - If we make such a change, you or your prescriber can ask us to make an exception and continue to cover the brand name drug for you. The notice we provide you will also include information on how to request an exception, and you can also find information in the section below entitled “How do I request an exception to the VIVA MEDICARE Formulary?”
- **Drugs removed from the market.** If the Food and Drug Administration deems a drug on our formulary to be unsafe or the drug’s manufacturer removes the drug from the market, we will immediately remove the drug from our formulary and provide notice to members who take the drug.
- **Other changes.** We may make other changes that affect members currently taking a drug. For instance, may add a new generic drug to replace a brand name drug currently on the formulary or add new restrictions to the brand name drug or move it to a different cost-sharing tier. Or we may make changes based on new clinical guidelines. If we remove drugs from our formulary, add prior authorization, quantity limits and/or step therapy restrictions on a drug or move a drug to a higher cost-sharing tier, we must notify

affected members of the change at least 30 days before the change becomes effective, or at the time the member requests a refill of the drug, at which time the member will receive a 30-day supply of the drug.

- If we make these other changes, you or your prescriber can ask us to make an exception and continue to cover the brand name drug for you. The notice we provide you will also include information on how to request an exception, and you can also find information in the section below entitled "How do I request an exception to the VIVA MEDICARE Formulary?"

Changes that will not affect you if you are currently taking the drug. Generally, if you are taking a drug on our 2020 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2020 coverage year except as described above. This means these drugs will remain available at the same cost-sharing and with no new restrictions for those members taking them for the remainder of the coverage year.

The enclosed formulary is current as of 12/01/2020. To get updated information about the drugs covered by VIVA MEDICARE, please contact us. Our contact information appears on the front and back cover pages.

VIVA MEDICARE will notify you in writing in the event of a mid-year change to the formulary if you have been identified as being treated for select drug therapies. VIVA MEDICARE maintains monthly updates to the formulary via the Member Resources page located at www.VivaHealth.com/Medicare.

How do I use the Formulary?

There are two ways to find your drug within the formulary:

Medical Condition

The formulary begins on page 1. The drugs

in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, "Cardiovascular". If you know what your drug is used for, look for the category name in the list that begins page 1. Then look under the category name for your drug.

Alphabetical Listing

If you are not sure what category to look under, you should look for your drug in the Index that begins on page 102. The Index provides an alphabetical list of all of the drugs included in this document. Both brand name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

What are generic drugs?

VIVA MEDICARE covers both brand name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs cost less than brand name drugs.

Are there any restrictions on my coverage?

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

- **Prior Authorization:** VIVA MEDICARE requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval from VIVA MEDICARE before you fill your prescriptions. If you don't get approval, VIVA MEDICARE may not cover the drug.
- **Quantity Limits:** For certain drugs, VIVA MEDICARE limits the amount of the drug that VIVA MEDICARE will cover. For example, VIVA MEDICARE provides 30 tablets per

prescription for BYSTOLIC. This may be in addition to a standard one-month or three-month supply.

- **Step Therapy:** In some cases, VIVA MEDICARE requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, VIVA MEDICARE may not cover Drug B unless you try Drug A first. If Drug A does not work for you, VIVA MEDICARE will then cover Drug B.

You can find out if your drug has any additional requirements or limits by looking in the formulary that begins on page 1. You can also get more information about the restrictions applied to specific covered drugs by visiting our Web site. We have posted on line documents that explain our prior authorization and step therapy restrictions. You may also ask us to send you a copy. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You can ask VIVA MEDICARE to make an exception to these restrictions or limits or for a list of other, similar drugs that may treat your health condition. See the section, "How do I request an exception to the VIVA MEDICARE formulary?" on page III for information about how to request an exception.

What if my drug is not on the Formulary?

If your drug is not included in this formulary (list of covered drugs), you should first contact Member Services and ask if your drug is covered. If you learn that VIVA MEDICARE does not cover your drug, you have two options:

- You can ask Member Services for a list of similar drugs that are covered by VIVA MEDICARE. When you receive the list, show it to your doctor and ask him or her to prescribe a similar drug that is covered by VIVA MEDICARE.

- You can ask VIVA MEDICARE to make an exception and cover your drug. See below for information about how to request an exception.

How do I request an exception to the VIVA MEDICARE Formulary?

You can ask VIVA MEDICARE to make an exception to our coverage rules. There are several types of exceptions that you can ask us to make.

- You can ask us to cover a drug even if it is not on our formulary. If approved, this drug will be covered at a pre-determined cost-sharing level, and you would not be able to ask us to provide the drug at a lower cost-sharing level.
- You can ask us to waive coverage restrictions or limits on your drug. For example, for certain drugs, VIVA MEDICARE limits the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount.

Generally, VIVA MEDICARE will only approve your request for an exception if the alternative drugs included on the plan's formulary or additional utilization restrictions would not be as effective in treating your condition and/or would cause you to have adverse medical effects.

You should contact us to ask us for an initial coverage decision for a formulary or utilization restriction exception. **When you request a formulary or utilization restriction exception you should submit a statement from your prescriber or physician supporting your request.** Generally, we must make our decision within 72 hours of getting your prescriber's supporting statement. You can request an expedited (fast) exception if you or your doctor believe that your health could be seriously harmed by waiting up to 72 hours for a decision. If your request to expedite is granted, we must give you a decision no later than 24 hours after we get a supporting statement from your doctor or other prescriber.

What do I do before I can talk to my doctor about changing my drugs or requesting an exception?

As a new or continuing member in our plan you may be taking drugs that are not on our formulary. Or, you may be taking a drug that is on our formulary but your ability to get it is limited. For example, you may need a prior authorization from us before you can fill your prescription. You should talk to your doctor to decide if you should switch to an appropriate drug that we cover or request a formulary exception so that we will cover the drug you take. While you talk to your doctor to determine the right course of action for you, we may cover your drug in certain cases during the first 90 days you are a member of our plan.

For each of your drugs that is not on our formulary or if your ability to get your drugs is limited, we will cover a temporary 30-day supply. If your prescription is written for fewer days, we'll allow refills to provide up to a maximum 30-day supply of medication. After your first 30-day supply, we will not pay for these drugs, even if you have been a member of the plan less than 90 days.

If you are a resident of a long-term care facility, we will allow you to refill your prescription until we have provided you with a 31-day supply and may be up to a 31-day transition supply, consistent with dispensing increment (unless you have a prescription written for fewer days). We may cover more than one refill of these drugs for the first 90 days you are a member of our plan. If you need a drug that is not on our formulary or if your ability to get your drugs is limited, but you are past the first 90 days of membership in our plan, we may cover a 31-day emergency supply of that drug (unless you have a prescription for fewer days) while you pursue a formulary exception.

For more information

For more detailed information about your

VIVA MEDICARE prescription drug coverage, please review your Evidence of Coverage and other plan materials.

If you have questions about VIVA MEDICARE, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

If you have general questions about Medicare prescription drug coverage, please call Medicare at 1-800-MEDICARE (1-800-633-4227) 24 hours a day/7 days a week. TTY users should call 1-877-486-2048. Or, visit <http://www.medicare.gov>.

VIVA MEDICARE's Formulary

The formulary that begins on page 1 provides coverage information about the drugs covered by VIVA MEDICARE. If you have trouble finding your drug in the list, turn to the Index that begins on page 102.

The first column of the chart lists the drug name. Brand name drugs are capitalized (e.g., JANUVIA and generic drugs are listed in lower-case italics (e.g., *omeprazole*).

The information in the Requirements/Limits column tells you if VIVA MEDICARE has any special requirements for coverage of your drug.

“PA” means the drug requires Prior Authorization.
“QL” means there is a quantity limit on the drug.
“NM” means the drug is not available at mail order.
“ST” means the drug requires step therapy.
“LA” means the drug has limited access and can only be dispensed by designated pharmacies.
“B/D” means a determination must be made as to whether the drug is covered under the Medicare Part B benefit or Medicare Part D benefit.



2020 Copayments (the amount you pay) for Prescription Drugs

The amount you pay per prescription depends on the level of Extra Help you receive. When you enroll in our plan, you will receive an Evidence of Coverage Rider for People Who Get Extra Help Paying for Prescription Drugs (also called a Low Income Subsidy Rider or LIS Rider). It will tell you how much you will pay for prescription drugs. Depending on your income and institutional status, you pay the following:

2020

- Deductible: \$0
- Copays during the Initial Coverage Stage:
\$0, \$1.30 or \$3.60 per prescription for drugs treated as generic and \$0, \$3.90 or \$8.95 per prescription for all other drugs (your cost depends on your level of “Extra Help”).

Note: Please see Chapter 6 of your VIVA MEDICARE *Extra Value* Evidence of Coverage for more information on getting prescription drugs at a long-term care pharmacy.

- There is an index in the back to help you find the drug you are looking for.
- Once the amount both you and Medicare pay (as the extra help) reaches \$6,350 in a year, your copayment amounts will go down to \$0.
- If you lose Extra Help, your costs will be different. Contact Member Services for more information.
- In addition to the drugs covered by Part D, certain Medicare recipients who also qualify for Medicaid may have some prescription drugs covered under their Medicaid benefits. These groups include:

QMB+

Full Benefit Dual Eligibles (FBDE)

SLMB+

If you have questions about which drugs are covered under Medicaid, please call the Medicaid Recipient Inquiry Hotline at 1-800-362-1504. TTY users call 1-800-253-0799.

2020 Formulary (List of Covered Drugs)

Drug Name	Drug Tier	Requirements/Limits
ANALGESICS		
GOUT		
<i>allopurinol tab 100 mg</i>	1	
<i>allopurinol tab 300 mg</i>	1	
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	2	
<i>COLCRYSTAL TAB 0.6MG</i>	3	QL (120 tabs / 30 days)
<i>MITIGARE CAP 0.6MG</i>	3	QL (60 caps / 30 days)
<i>probenecid tab 500 mg</i>	2	
NSAIDS		
<i>celecoxib cap 50 mg</i>	2	QL (240 caps / 30 days)
<i>celecoxib cap 100 mg</i>	2	QL (120 caps / 30 days)
<i>celecoxib cap 200 mg</i>	2	QL (60 caps / 30 days)
<i>celecoxib cap 400 mg</i>	2	QL (30 caps / 30 days)
<i>diclofenac potassium tab 50 mg</i>	2	QL (120 tabs / 30 days)
<i>diclofenac sodium tab delayed release 25 mg</i>	2	
<i>diclofenac sodium tab delayed release 50 mg</i>	2	
<i>diclofenac sodium tab delayed release 75 mg</i>	2	
<i>diclofenac sodium tab er 24hr 100 mg</i>	2	
<i>diflunisal tab 500 mg</i>	2	
<i>ec-naproxen tab 375mg</i>	2	
<i>ec-naproxen tab 500mg</i>	2	
<i>etodolac cap 200 mg</i>	2	
<i>etodolac cap 300 mg</i>	2	
<i>etodolac tab 400 mg</i>	2	
<i>etodolac tab 500 mg</i>	2	
<i>etodolac tab er 24hr 400 mg</i>	2	
<i>etodolac tab er 24hr 500 mg</i>	2	
<i>etodolac tab er 24hr 600 mg</i>	2	
<i>flurbiprofen tab 100 mg</i>	2	
<i>ibuprofen susp 100 mg/5ml</i>	2	
<i>ibuprofen tab 400 mg</i>	1	
<i>ibuprofen tab 600 mg</i>	1	
<i>ibuprofen tab 800 mg</i>	1	
<i>meloxicam tab 7.5 mg</i>	1	
<i>meloxicam tab 15 mg</i>	1	
<i>nabumetone tab 500 mg</i>	1	
<i>nabumetone tab 750 mg</i>	1	
<i>naproxen dr tab 375mg</i>	2	
<i>naproxen dr tab 500mg</i>	2	
<i>naproxen sodium tab 275 mg</i>	2	
<i>naproxen sodium tab 550 mg</i>	2	

1 You can find information on what the symbols and abbreviations on this table mean by going to page number IV.

Drug Name	Drug Tier	Requirements/Limits
naproxen tab 250 mg	1	
naproxen tab 375 mg	1	
naproxen tab 500 mg	1	
piroxicam cap 10 mg	2	
piroxicam cap 20 mg	2	
sulindac tab 150 mg	2	
sulindac tab 200 mg	2	

OPIOID ANALGESICS

acetaminophen w/ codeine soln 120-12 mg/5ml	2	QL (2700 mL / 30 days)
acetaminophen w/ codeine tab 300-15 mg	2	QL (400 tabs / 30 days)
acetaminophen w/ codeine tab 300-30 mg	2	QL (360 tabs / 30 days)
acetaminophen w/ codeine tab 300-60 mg	2	QL (180 tabs / 30 days)
butorphanol tartrate inj 1 mg/ml	4	
butorphanol tartrate inj 2 mg/ml	4	
nalbuphine hcl inj 10 mg/ml	4	
nalbuphine hcl inj 20 mg/ml	4	
tramadol hcl tab 50 mg	2	QL (240 tabs / 30 days)
tramadol-acetaminophen tab 37.5-325 mg	2	QL (240 tabs / 30 days)

OPIOID ANALGESICS, CII

fentanyl citrate lozenge on a handle 200 mcg	5	QL (120 lozenges / 30 days), PA
fentanyl citrate lozenge on a handle 400 mcg	5	QL (120 lozenges / 30 days), PA
fentanyl citrate lozenge on a handle 600 mcg	5	QL (120 lozenges / 30 days), PA
fentanyl citrate lozenge on a handle 800 mcg	5	QL (120 lozenges / 30 days), PA
fentanyl citrate lozenge on a handle 1200 mcg	5	QL (120 lozenges / 30 days), PA
fentanyl citrate lozenge on a handle 1600 mcg	5	QL (120 lozenges / 30 days), PA
fentanyl td patch 72hr 12 mcg/hr	2	QL (10 patches / 30 days), PA
fentanyl td patch 72hr 25 mcg/hr	2	QL (10 patches / 30 days), PA
fentanyl td patch 72hr 50 mcg/hr	2	QL (10 patches / 30 days), PA
fentanyl td patch 72hr 75 mcg/hr	2	QL (10 patches / 30 days), PA
fentanyl td patch 72hr 100 mcg/hr	2	QL (10 patches / 30 days), PA
hydrocodone-acetaminophen soln 7.5-325 mg/15ml	2	QL (2700 mL / 30 days)
hydrocodone-acetaminophen tab 5-325 mg	2	QL (240 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	2	QL (180 tabs / 30 days)
<i>hydrocodone-acetaminophen tab 10-325 mg</i>	2	QL (180 tabs / 30 days)
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>	2	QL (150 tabs / 30 days)
<i>hydromorphone hcl liqd 1 mg/ml</i>	2	QL (600 mL / 30 days)
<i>hydromorphone hcl preservative free (pf) inj 10 mg/ml</i>	4	B/D
<i>hydromorphone hcl tab 2 mg</i>	2	QL (180 tabs / 30 days)
<i>hydromorphone hcl tab 4 mg</i>	2	QL (180 tabs / 30 days)
<i>hydromorphone hcl tab 8 mg</i>	2	QL (180 tabs / 30 days)
HYSINGLA ER TAB 20 MG	3	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 30 MG	3	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 40 MG	3	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 60 MG	3	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 80 MG	3	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 100 MG	3	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 120 MG	3	QL (30 tabs / 30 days), PA
<i>methadone con 10mg/ml</i>	2	QL (90 mL / 30 days), PA
<i>methadone hcl soln 5 mg/5ml</i>	2	QL (450 mL / 30 days), PA
<i>methadone hcl soln 10 mg/5ml</i>	2	QL (450 mL / 30 days), PA
<i>methadone hcl tab 5 mg</i>	2	QL (90 tabs / 30 days), PA
<i>methadone hcl tab 10 mg</i>	2	QL (90 tabs / 30 days), PA
MORPHINE SUL INJ 2MG/ML	4	B/D
MORPHINE SUL INJ 4MG/ML	4	B/D
MORPHINE SUL INJ 5MG/ML	4	B/D
MORPHINE SUL INJ 8MG/ML	4	B/D
MORPHINE SUL INJ 10MG/ML	4	B/D
<i>morphine sulfate iv soln 1 mg/ml</i>	4	B/D
<i>morphine sulfate iv soln pf 4 mg/ml</i>	4	B/D
<i>morphine sulfate iv soln pf 8 mg/ml</i>	4	B/D
<i>morphine sulfate iv soln pf 10 mg/ml</i>	4	B/D
<i>morphine sulfate oral soln 10 mg/5ml</i>	2	QL (900 mL / 30 days)
<i>morphine sulfate oral soln 20 mg/5ml</i>	2	QL (900 mL / 30 days)

3 You can find information on what the symbols and abbreviations on this table mean by going to page number IV.

Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	2	QL (180 mL / 30 days)
<i>morphine sulfate tab 15 mg</i>	2	QL (180 tabs / 30 days)
<i>morphine sulfate tab 30 mg</i>	2	QL (180 tabs / 30 days)
<i>morphine sulfate tab er 15 mg</i>	2	QL (90 tabs / 30 days), PA
<i>morphine sulfate tab er 30 mg</i>	2	QL (90 tabs / 30 days), PA
<i>morphine sulfate tab er 60 mg</i>	2	QL (90 tabs / 30 days), PA
<i>morphine sulfate tab er 100 mg</i>	2	QL (90 tabs / 30 days), PA
<i>morphine sulfate tab er 200 mg</i>	2	QL (90 tabs / 30 days), PA
<i>NUCYNTA ER TAB 50MG</i>	3	QL (60 tabs / 30 days), PA
<i>NUCYNTA ER TAB 100MG</i>	3	QL (60 tabs / 30 days), PA
<i>NUCYNTA ER TAB 150MG</i>	3	QL (60 tabs / 30 days), PA
<i>NUCYNTA ER TAB 200MG</i>	3	QL (60 tabs / 30 days), PA
<i>NUCYNTA ER TAB 250MG</i>	3	QL (60 tabs / 30 days), PA
<i>oxycodone hcl cap 5 mg</i>	2	QL (180 caps / 30 days)
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	2	QL (180 mL / 30 days)
<i>oxycodone hcl soln 5 mg/5ml</i>	2	QL (900 mL / 30 days)
<i>oxycodone hcl tab 5 mg</i>	2	QL (180 tabs / 30 days)
<i>oxycodone hcl tab 10 mg</i>	2	QL (180 tabs / 30 days)
<i>oxycodone hcl tab 15 mg</i>	2	QL (180 tabs / 30 days)
<i>oxycodone hcl tab 20 mg</i>	2	QL (180 tabs / 30 days)
<i>oxycodone hcl tab 30 mg</i>	2	QL (180 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	2	QL (360 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	2	QL (360 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	2	QL (240 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	2	QL (180 tabs / 30 days)

ANESTHETICS

LOCAL ANESTHETICS

<i>lidocaine hcl local inj 0.5%</i>	2	B/D
<i>lidocaine hcl local inj 1%</i>	2	B/D
<i>lidocaine hcl local inj 2%</i>	2	B/D

Drug Name	Drug Tier	Requirements/Limits
<i>lidocaine hcl local preservative free (pf) inj 0.5%</i>	2	B/D
<i>lidocaine hcl local preservative free (pf) inj 1%</i>	2	B/D
<i>lidocaine hcl local preservative free (pf) inj 1.5%</i>	2	B/D

ANTI-INFECTIVES

ANTI-BACTERIALS - MISCELLANEOUS

<i>amikacin sulfate inj 1 gm/4ml (250 mg/ml)</i>	2	
<i>amikacin sulfate inj 500 mg/2ml (250 mg/ml)</i>	2	
<i>gentamicin in saline inj 0.8 mg/ml</i>	2	
<i>gentamicin in saline inj 1 mg/ml</i>	2	
<i>gentamicin in saline inj 1.2 mg/ml</i>	2	
<i>gentamicin in saline inj 1.6 mg/ml</i>	2	
<i>gentamicin in saline inj 2 mg/ml</i>	2	
<i>gentamicin sulfate inj 10 mg/ml</i>	2	
<i>gentamicin sulfate inj 40 mg/ml</i>	2	
<i>neomycin sulfate tab 500 mg</i>	2	
<i>paromomycin sulfate cap 250 mg</i>	2	
<i>streptomycin sulfate for inj 1 gm</i>	5	
SULFADIAZINE TAB 500MG	4	
<i>tobramycin nebu soln 300 mg/5ml</i>	5	NM, PA
<i>tobramycin sulfate for inj 1.2 gm</i>	5	
<i>tobramycin sulfate inj 1.2 gm/30ml (40 mg/ml) (base equiv)</i>	2	
<i>tobramycin sulfate inj 2 gm/50ml (40 mg/ml) (base equiv)</i>	2	
<i>tobramycin sulfate inj 10 mg/ml (base equivalent)</i>	2	
<i>tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv)</i>	2	

ANTI-INFECTIVES - MISCELLANEOUS

<i>albendazole tab 200 mg</i>	5	
<i>ALINIA SUS 100/5ML</i>	5	
<i>ALINIA TAB 500MG</i>	5	
<i>atovaquone susp 750 mg/5ml</i>	5	
<i>aztreonam for inj 1 gm</i>	2	
<i>aztreonam for inj 2 gm</i>	2	
CAYSTON INH 75MG	5	NM, LA, PA
<i>clindamycin hcl cap 75 mg</i>	1	
<i>clindamycin hcl cap 150 mg</i>	1	
<i>clindamycin hcl cap 300 mg</i>	1	
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i>	2	
<i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i>	2	
<i>clindamycin phosphate in d5w iv soln 900 mg/50ml</i>	2	
<i>clindamycin phosphate inj 9 gm/60ml</i>	2	
<i>clindamycin phosphate inj 300 mg/2ml</i>	2	
<i>clindamycin phosphate inj 600 mg/4ml</i>	2	
<i>clindamycin phosphate inj 900 mg/6ml</i>	2	
<i>CLINDMYC/NAC INJ 300/50ML</i>	4	
<i>CLINDMYC/NAC INJ 600/50ML</i>	4	
<i>CLINDMYC/NAC INJ 900/50ML</i>	4	
<i>colistimethate sod for inj 150 mg (colistin base activity)</i>	2	
<i>dapsone tab 25 mg</i>	2	
<i>dapsone tab 100 mg</i>	2	
<i>daptomycin for iv soln 350 mg</i>	5	
<i>daptomycin for iv soln 500 mg</i>	5	
<i>EMVERM CHW 100MG</i>	5	QL (12 tabs / 365 days)
<i>ertapenem sodium for inj 1 gm (base equivalent)</i>	2	
<i>imipenem-cilastatin intravenous for soln 250 mg</i>	2	
<i>imipenem-cilastatin intravenous for soln 500 mg</i>	2	
<i>ivermectin tab 3 mg</i>	2	
<i>linezolid for susp 100 mg/5ml</i>	5	
<i>linezolid in sodium chloride iv soln 600 mg/300ml-0.9%</i>	4	
<i>linezolid iv soln 600 mg/300ml (2 mg/ml)</i>	2	
<i>linezolid tab 600 mg</i>	2	
<i>meropenem iv for soln 1 gm</i>	2	
<i>meropenem iv for soln 500 mg</i>	2	
<i>methenamine hippurate tab 1 gm</i>	2	
<i>metronidazole in nacl 0.79% iv soln 500 mg/100ml</i>	2	
<i>metronidazole tab 250 mg</i>	1	
<i>metronidazole tab 500 mg</i>	1	
<i>nitrofurantoin macrocrystalline cap 50 mg</i>	3	
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	3	
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	3	
<i>pentamidine isethionate for nebulization soln 300 mg</i>	2	B/D
<i>pentamidine isethionate for soln 300 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>praziquantel tab 600 mg</i>	2	
SIVEXTRO INJ 200MG	5	
SIVEXTRO TAB 200MG	5	
<i>sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml</i>	2	
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	2	
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	1	
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	1	
SYNERCID INJ 500MG	5	
<i>tigecycline for iv soln 50 mg</i>	5	
<i>trimethoprim tab 100 mg</i>	1	
<i>vancomycin hcl cap 125 mg (base equivalent)</i>	2	QL (120 caps / 30 days)
<i>vancomycin hcl cap 250 mg (base equivalent)</i>	5	QL (240 caps / 30 days)
<i>vancomycin hcl for iv soln 1 gm (base equivalent)</i>	2	
<i>vancomycin hcl for iv soln 5 gm (base equivalent)</i>	2	
<i>vancomycin hcl for iv soln 10 gm (base equivalent)</i>	2	
<i>vancomycin hcl for iv soln 500 mg (base equivalent)</i>	2	
<i>vancomycin hcl for iv soln 750 mg (base equivalent)</i>	2	
VANCOMYCIN INJ 1 GM	4	
VANCOMYCIN INJ 500MG	4	
VANCOMYCIN INJ 750MG	4	

ANTIFUNGALS

<i>ABELCET INJ 5MG/ML</i>	5	B/D
<i>AMBISOME INJ 50MG</i>	5	B/D
<i>amphotericin b for iv soln 50 mg</i>	2	B/D
<i>caspofungin acetate for iv soln 50 mg</i>	5	
<i>caspofungin acetate for iv soln 70 mg</i>	5	
<i>fluconazole for susp 10 mg/ml</i>	2	
<i>fluconazole for susp 40 mg/ml</i>	2	
<i>fluconazole in nacl 0.9% inj 200 mg/100ml</i>	2	
<i>fluconazole in nacl 0.9% inj 400 mg/200ml</i>	2	
<i>fluconazole tab 50 mg</i>	2	
<i>fluconazole tab 100 mg</i>	2	
<i>fluconazole tab 150 mg</i>	1	
<i>fluconazole tab 200 mg</i>	2	
<i>flucytosine cap 250 mg</i>	5	

Drug Name	Drug Tier	Requirements/Limits
<i>flucytosine cap 500 mg</i>	5	
<i>griseofulvin microsize susp 125 mg/5ml</i>	2	
<i>griseofulvin microsize tab 500 mg</i>	2	
<i>griseofulvin ultramicrosize tab 125 mg</i>	2	
<i>griseofulvin ultramicrosize tab 250 mg</i>	2	
<i>itraconazole cap 100 mg</i>	2	PA
<i>ketoconazole tab 200 mg</i>	2	PA
<i>micafungin sodium for iv soln 50 mg</i>	5	
<i>micafungin sodium for iv soln 100 mg</i>	5	
<i>MYCAMINE INJ 50MG</i>	5	
<i>MYCAMINE INJ 100MG</i>	5	
<i>NOXAFIL SUS 40MG/ML</i>	5	QL (630 mL / 30 days)
<i>nystatin tab 500000 unit</i>	2	
<i>posaconazole tab delayed release 100 mg</i>	5	QL (93 tabs / 30 days)
<i>terbinafine hcl tab 250 mg</i>	1	QL (90 tabs / year)
<i>voriconazole for inj 200 mg</i>	5	PA
<i>voriconazole for susp 40 mg/ml</i>	5	PA
<i>voriconazole tab 50 mg</i>	2	
<i>voriconazole tab 200 mg</i>	5	

ANTIMALARIALS

<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	2	
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	2	
<i>chloroquine phosphate tab 250 mg</i>	2	
<i>chloroquine phosphate tab 500 mg</i>	2	
<i>COARTEM TAB 20-120MG</i>	4	
<i>mefloquine hcl tab 250 mg</i>	2	
<i>primaquine phosphate tab 26.3 mg (15 mg base)</i>	2	
<i>PRIMAQUINE TAB 26.3MG</i>	3	
<i>quinine sulfate cap 324 mg</i>	2	PA

ANTIRETROVIRAL AGENTS

<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	2	NM
<i>abacavir sulfate tab 300 mg (base equiv)</i>	2	NM
<i>APTIVUS CAP 250MG</i>	5	NM
<i>APTIVUS SOL</i>	5	NM
<i>atazanavir sulfate cap 150 mg (base equiv)</i>	2	NM
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	2	NM
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	2	NM
<i>CRIXIVAN CAP 200MG</i>	4	NM
<i>CRIXIVAN CAP 400MG</i>	4	NM
<i>didanosine delayed release capsule 200 mg</i>	2	NM
<i>didanosine delayed release capsule 250 mg</i>	2	NM
<i>didanosine delayed release capsule 400 mg</i>	2	NM
<i>EDURANT TAB 25MG</i>	5	NM

Drug Name	Drug Tier	Requirements/Limits
<i>efavirenz cap 50 mg</i>	2	NM
<i>efavirenz cap 200 mg</i>	5	NM
<i>efavirenz tab 600 mg</i>	5	NM
<i>emtricitabine caps 200 mg</i>	2	NM
EMTRIVA CAP 200MG	3	NM
EMTRIVA SOL 10MG/ML	3	NM
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	5	NM
FUZEON INJ 90MG	5	NM
INTELENCE TAB 25MG	4	NM
INTELENCE TAB 100MG	5	NM
INTELENCE TAB 200MG	5	NM
INVIRASE TAB 500MG	5	NM
ISENTRESS CHW 25MG	3	NM
ISENTRESS CHW 100MG	5	NM
ISENTRESS HD TAB 600MG	5	NM
ISENTRESS POW 100MG	3	NM
ISENTRESS TAB 400MG	5	NM
<i>lamivudine oral soln 10 mg/ml</i>	2	NM
<i>lamivudine tab 150 mg</i>	2	NM
<i>lamivudine tab 300 mg</i>	2	NM
LEXIVA SUS 50MG/ML	4	NM
<i>nevirapine susp 50 mg/5ml</i>	2	NM
<i>nevirapine tab 200 mg</i>	2	NM
<i>nevirapine tab er 24hr 100 mg</i>	2	NM
<i>nevirapine tab er 24hr 400 mg</i>	2	NM
NORVIR POW 100MG	4	NM
NORVIR SOL 80MG/ML	4	NM
PIFELTRO TAB 100MG	5	NM
PREZISTA SUS 100MG/ML	5	QL (400 mL / 30 days), NM
PREZISTA TAB 75MG	4	QL (480 tabs / 30 days), NM
PREZISTA TAB 150MG	5	QL (240 tabs / 30 days), NM
PREZISTA TAB 600MG	5	QL (60 tabs / 30 days), NM
PREZISTA TAB 800MG	5	QL (30 tabs / 30 days), NM
REYATAZ POW 50MG	5	NM
<i>ritonavir tab 100 mg</i>	2	NM
RUKOBIA TAB 600MG ER	5	NM
SELZENTRY SOL 20MG/ML	5	NM
SELZENTRY TAB 25MG	4	NM
SELZENTRY TAB 75MG	5	NM
SELZENTRY TAB 150MG	5	NM

9 You can find information on what the symbols and abbreviations on this table mean by going to page number IV.

Drug Name	Drug Tier	Requirements/Limits
SELZENTRY TAB 300MG	5	NM
<i>stavudine cap 15 mg</i>	2	NM
<i>stavudine cap 20 mg</i>	2	NM
<i>stavudine cap 30 mg</i>	2	NM
<i>stavudine cap 40 mg</i>	2	NM
<i>tenofovir disoproxil fumarate tab 300 mg</i>	2	NM
TIVICAY PD TAB 5MG	3	NM
TIVICAY TAB 10MG	3	NM
TIVICAY TAB 25MG	5	NM
TIVICAY TAB 50MG	5	NM
TROGARZO INJ 150MG/ML	5	NM, LA
TYBOST TAB 150MG	4	NM
VIRACEPT TAB 250MG	5	NM
VIRACEPT TAB 625MG	5	NM
VIREAD POW 40MG/GM	5	NM
VIREAD TAB 150MG	5	NM
VIREAD TAB 200MG	5	NM
VIREAD TAB 250MG	5	NM
<i>zidovudine cap 100 mg</i>	2	NM
<i>zidovudine syrup 10 mg/ml</i>	2	NM
<i>zidovudine tab 300 mg</i>	2	NM

ANTIRETROVIRAL COMBINATION AGENTS

<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	2	NM
<i>abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg</i>	5	NM
ATRIPLA TAB	5	NM
BIKTARVY TAB	5	NM
CIMDUO TAB 300-300	5	NM
COMPLERA TAB	5	NM
DELSTRIGO TAB	5	NM
DESCOVY TAB 200-25MG	5	NM
DOVATO TAB 50-300MG	5	NM
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	5	NM
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	5	NM
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	5	NM
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	5	QL (30 tabs / 30 days), NM
EVOTAZ TAB 300-150	5	NM
GENVOYA TAB	5	NM
JULUCA TAB 50-25MG	5	NM
KALETRA TAB 100-25MG	4	NM

Drug Name	Drug Tier	Requirements/Limits
KALETRA TAB 200-50MG	5	NM
<i>lamivudine-zidovudine tab 150-300 mg</i>	2	NM
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	2	NM
ODEFSEY TAB	5	NM
PREZCOBIX TAB 800-150	5	NM
STRIBILD TAB	5	NM
SYMFY LO TAB	5	NM
SYMFY TAB	5	NM
SYMTUZA TAB	5	NM
TEMIXYS TAB 300-300	5	NM
TRIUMEQ TAB	5	NM
TRUVADA TAB 100-150	5	QL (30 tabs / 30 days), NM
TRUVADA TAB 133-200	5	QL (30 tabs / 30 days), NM
TRUVADA TAB 167-250	5	QL (30 tabs / 30 days), NM
TRUVADA TAB 200-300	5	QL (30 tabs / 30 days), NM

ANTITUBERCULAR AGENTS

<i>cycloserine cap 250 mg</i>	5	
<i>ethambutol hcl tab 100 mg</i>	2	
<i>ethambutol hcl tab 400 mg</i>	2	
<i>isoniazid syrup 50 mg/5ml</i>	2	
<i>isoniazid tab 100 mg</i>	1	
<i>isoniazid tab 300 mg</i>	1	
PASER GRA 4GM	4	
PRIFTIN TAB 150MG	4	
<i>pyrazinamide tab 500 mg</i>	2	
<i>rifabutin cap 150 mg</i>	2	
<i>rifampin cap 150 mg</i>	2	
<i>rifampin cap 300 mg</i>	2	
<i>rifampin for inj 600 mg</i>	2	
SIRTURO TAB 20MG	5	LA, PA
SIRTURO TAB 100MG	5	LA, PA
TRECATOR TAB 250MG	4	

ANTIVIRALS

<i>acyclovir cap 200 mg</i>	1	
<i>acyclovir sodium iv soln 50 mg/ml</i>	2	B/D
<i>acyclovir susp 200 mg/5ml</i>	2	
<i>acyclovir tab 400 mg</i>	1	
<i>acyclovir tab 800 mg</i>	1	
<i>adefovir dipivoxil tab 10 mg</i>	5	NM
BARACLUDE SOL	5	NM

Drug Name	Drug Tier	Requirements/Limits
entecavir tab 0.5 mg	2	NM
entecavir tab 1 mg	2	NM
EPCLUSA TAB 200-50MG	5	NM, PA
EPCLUSA TAB 400-100	5	NM, PA
EPIVIR HBV SOL 5MG/ML	4	NM
famciclovir tab 125 mg	2	
famciclovir tab 250 mg	2	
famciclovir tab 500 mg	2	
ganciclovir sodium for inj 500 mg	2	B/D
HARVONI PAK	5	NM, PA
HARVONI PAK 45-200MG	5	NM, PA
HARVONI TAB 45-200MG	5	NM, PA
HARVONI TAB 90-400MG	5	NM, PA
lamivudine tab 100 mg (hbv)	2	NM
MAVYRET TAB 100-40MG	5	NM, PA
oseltamivir phosphate cap 30 mg (base equiv)	2	QL (168 caps / year)
oseltamivir phosphate cap 45 mg (base equiv)	2	QL (84 caps / year)
oseltamivir phosphate cap 75 mg (base equiv)	2	QL (84 caps / year)
oseltamivir phosphate for susp 6 mg/ml (base equiv)	2	QL (1080 mL / year)
PEGASYS INJ	5	NM, PA
PEGASYS INJ 180MCG/M	5	NM, PA
PEGASYS INJ PROCLICK	5	NM, PA
RELENZA MIS DISKHALE	3	QL (6 inhalers / year)
ribavirin cap 200 mg	2	NM
ribavirin tab 200 mg	2	NM
rimantadine hydrochloride tab 100 mg	2	
valacyclovir hcl tab 1 gm	2	
valacyclovir hcl tab 500 mg	2	
valganciclovir hcl for soln 50 mg/ml (base equiv)	5	
valganciclovir hcl tab 450 mg (base equivalent)	5	
VEMLIDY TAB 25MG	5	NM
VOSEVI TAB	5	NM, PA
CEPHALOSPORINS		
cefaclor cap 250 mg	2	
cefaclor cap 500 mg	2	
CEFACLOR ER TAB 500MG	4	
cefaclor for susp 125 mg/5ml	2	
cefaclor for susp 250 mg/5ml	2	
cefaclor for susp 375 mg/5ml	2	

Drug Name	Drug Tier Requirements/Limits
cefadroxil cap 500 mg	1
cefadroxil for susp 250 mg/5ml	2
cefadroxil for susp 500 mg/5ml	2
cefadroxil tab 1 gm	2
CEFAZOLIN INJ 1GM/50ML	3
cefazolin sodium for inj 1 gm	2
cefazolin sodium for inj 10 gm	2
cefazolin sodium for inj 500 mg	2
cefazolin sodium for iv soln 1 gm	2
CEFAZOLIN SOL	3
cefdinir cap 300 mg	2
cefdinir for susp 125 mg/5ml	2
cefdinir for susp 250 mg/5ml	2
cefepime hcl for inj 1 gm	2
cefepime hcl for inj 2 gm	2
cefixime for susp 100 mg/5ml	2
cefixime for susp 200 mg/5ml	2
cefoxitin sodium for inj 10 gm	2
cefoxitin sodium for iv soln 1 gm	2
cefoxitin sodium for iv soln 2 gm	2
cefpodoxime proxetil for susp 50 mg/5ml	2
cefpodoxime proxetil for susp 100 mg/5ml	2
cefpodoxime proxetil tab 100 mg	2
cefpodoxime proxetil tab 200 mg	2
cefprozil for susp 125 mg/5ml	2
cefprozil for susp 250 mg/5ml	2
cefprozil tab 250 mg	2
cefprozil tab 500 mg	2
ceftazidime for inj 1 gm	2
ceftazidime for inj 2 gm	2
ceftazidime for inj 6 gm	2
CEFTAZIDIME/ SOL D5W 1GM	4
CEFTAZIDIME/ SOL D5W 2GM	4
ceftriaxone sodium for inj 1 gm	2
ceftriaxone sodium for inj 2 gm	2
ceftriaxone sodium for inj 10 gm	2
ceftriaxone sodium for inj 250 mg	2
ceftriaxone sodium for inj 500 mg	2
ceftriaxone sodium for iv soln 1 gm	2
ceftriaxone sodium for iv soln 2 gm	2
cefuroxime axetil tab 250 mg	2
cefuroxime axetil tab 500 mg	2
cefuroxime sodium for inj 7.5 gm	2
cefuroxime sodium for inj 750 mg	2
cefuroxime sodium for iv soln 1.5 gm	2

13 You can find information on what the symbols and abbreviations on this table mean by going to page number IV.

Drug Name	Drug Tier	Requirements/Limits
cephalexin cap 250 mg	1	
cephalexin cap 500 mg	1	
cephalexin for susp 125 mg/5ml	2	
cephalexin for susp 250 mg/5ml	2	
tazicef inj 1gm	2	
tazicef inj 2gm	2	
tazicef inj 6gm	2	
TEFLARO INJ 400MG	5	
TEFLARO INJ 600MG	5	
ERYTHROMYCINS/MACROLIDES		
azithromycin for susp 100 mg/5ml	2	
azithromycin for susp 200 mg/5ml	2	
azithromycin iv for soln 500 mg	2	
azithromycin powd pack for susp 1 gm	2	
azithromycin tab 250 mg	1	
azithromycin tab 500 mg	1	
azithromycin tab 600 mg	1	
clarithromycin for susp 125 mg/5ml	2	
clarithromycin for susp 250 mg/5ml	2	
clarithromycin tab 250 mg	2	
clarithromycin tab 500 mg	2	
clarithromycin tab er 24hr 500 mg	2	
DIFICID TAB 200MG	5	
ery-tab tab 250mg ec	2	
ery-tab tab 333mg ec	2	
ery-tab tab 500mg ec	2	
ERYTHROCIN INJ 500MG	4	
erythrocin tab 250mg	2	
erythromycin ethylsuccinate tab 400 mg	2	
erythromycin tab 250 mg	2	
erythromycin tab 500 mg	2	
erythromycin tab delayed release 250 mg	2	
erythromycin tab delayed release 333 mg	2	
erythromycin tab delayed release 500 mg	2	
erythromycin w/ delayed release particles cap 250 mg	2	
FLUOROQUINOLONES		
CIPRO (10%) SUS 500MG/5	4	
ciprofloxacin 200 mg/100ml in d5w	2	
ciprofloxacin 400 mg/200ml in d5w	2	
ciprofloxacin hcl tab 100 mg (base equiv)	2	
ciprofloxacin hcl tab 250 mg (base equiv)	1	
ciprofloxacin hcl tab 500 mg (base equiv)	1	
ciprofloxacin hcl tab 750 mg (base equiv)	1	
levofloxacin in d5w iv soln 250 mg/50ml	2	

Drug Name	Drug Tier	Requirements/Limits
levofloxacin in d5w iv soln 500 mg/100ml	2	
levofloxacin in d5w iv soln 750 mg/150ml	2	
levofloxacin iv soln 25 mg/ml	2	
levofloxacin oral soln 25 mg/ml	2	
levofloxacin tab 250 mg	1	
levofloxacin tab 500 mg	1	
levofloxacin tab 750 mg	1	

PENICILLINS

amoxicillin & k clavulanate chew tab 200-28.5 mg	2	
amoxicillin & k clavulanate chew tab 400-57 mg	2	
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml	2	
amoxicillin & k clavulanate for susp 250-62.5 mg/5ml	2	
amoxicillin & k clavulanate for susp 400-57 mg/5ml	2	
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml	2	
amoxicillin & k clavulanate tab 250-125 mg	2	
amoxicillin & k clavulanate tab 500-125 mg	2	
amoxicillin & k clavulanate tab 875-125 mg	2	
amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg	2	
amoxicillin (trihydrate) cap 250 mg	1	
amoxicillin (trihydrate) cap 500 mg	1	
amoxicillin (trihydrate) chew tab 125 mg	2	
amoxicillin (trihydrate) chew tab 250 mg	2	
amoxicillin (trihydrate) for susp 125 mg/5ml	1	
amoxicillin (trihydrate) for susp 200 mg/5ml	1	
amoxicillin (trihydrate) for susp 250 mg/5ml	1	
amoxicillin (trihydrate) for susp 400 mg/5ml	1	
amoxicillin (trihydrate) tab 500 mg	1	
amoxicillin (trihydrate) tab 875 mg	1	
ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm	2	
ampicillin & sulbactam sodium for inj 3 (2-1) gm	2	
ampicillin & sulbactam sodium for iv soln 15 (10-5) gm	2	
ampicillin cap 500 mg	1	

Drug Name	Drug Tier	Requirements/Limits
ampicillin sodium for inj 1 gm	2	
ampicillin sodium for inj 2 gm	2	
ampicillin sodium for inj 125 mg	2	
ampicillin sodium for inj 250 mg	2	
ampicillin sodium for inj 500 mg	2	
ampicillin sodium for iv soln 1 gm	2	
ampicillin sodium for iv soln 2 gm	2	
ampicillin sodium for iv soln 10 gm	2	
BICILLIN L-A INJ 600000	4	
BICILLIN L-A INJ 1200000	4	
BICILLIN L-A INJ 2400000	4	
dicloxacillin sodium cap 250 mg	2	
dicloxacillin sodium cap 500 mg	2	
NAFCILLIN INJ 10GM	4	
nafcillin sodium for inj 1 gm	2	
nafcillin sodium for inj 2 gm	2	
nafcillin sodium for iv soln 1 gm	2	
nafcillin sodium for iv soln 2 gm	2	
nafcillin sodium for iv soln 10 gm	5	
oxacillin sodium for inj 1 gm (base equivalent)	2	
oxacillin sodium for inj 2 gm (base equivalent)	2	
oxacillin sodium for iv soln 10 gm (base equivalent)	5	
PEN G PROC INJ 600000	4	
PEN GK/DEXTR INJ 40000/ML	4	
PEN GK/DEXTR INJ 60000/ML	4	
penicillin g potassium for inj 5000000 unit	2	
penicillin g potassium for inj 20000000 unit	2	
penicillin g sodium for inj 5000000 unit	2	
penicillin v potassium for soln 125 mg/5ml	2	
penicillin v potassium for soln 250 mg/5ml	2	
penicillin v potassium tab 250 mg	1	
penicillin v potassium tab 500 mg	1	
piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)	2	
piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)	2	
piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)	2	
piperacillin sod-tazobactam sod for inj 13.5 gm (12-1.5 gm)	2	
piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)	2	

Drug Name	Drug Tier	Requirements/Limits
TETRACYCLINES		
<i>doxy 100 inj 100mg</i>	2	
<i>doxycycline hyclate cap 50 mg</i>	2	
<i>doxycycline hyclate cap 100 mg</i>	2	
<i>doxycycline hyclate for inj 100 mg</i>	2	
<i>doxycycline hyclate tab 20 mg</i>	2	
<i>doxycycline hyclate tab 100 mg</i>	2	
<i>doxycycline monohydrate cap 50 mg</i>	1	
<i>doxycycline monohydrate cap 100 mg</i>	1	
<i>doxycycline monohydrate tab 50 mg</i>	2	
<i>doxycycline monohydrate tab 75 mg</i>	2	
<i>doxycycline monohydrate tab 100 mg</i>	2	
<i>minocycline hcl cap 50 mg</i>	2	
<i>minocycline hcl cap 75 mg</i>	2	
<i>minocycline hcl cap 100 mg</i>	2	
<i>tetracycline hcl cap 250 mg</i>	2	
<i>tetracycline hcl cap 500 mg</i>	2	
ANTINEOPLASTIC AGENTS		
ALKYLATING AGENTS		
BENDEKA INJ 100/4ML	5	B/D, NM
CYCLOPHOSPH INJ 1GM	5	B/D
CYCLOPHOSPHA INJ 500MG	5	B/D
<i>cyclophosphamide cap 25 mg</i>	2	B/D
<i>cyclophosphamide cap 50 mg</i>	2	B/D
<i>cyclophosphamide for inj 1 gm</i>	5	B/D
<i>cyclophosphamide for inj 2 gm</i>	5	B/D
<i>cyclophosphamide for inj 500 mg</i>	5	B/D
EMCYT CAP 140MG	4	
GLEOSTINE CAP 10MG	4	
GLEOSTINE CAP 40MG	5	
GLEOSTINE CAP 100MG	5	
LEUKERAN TAB 2MG	5	
ANTHRACYCLINES		
<i>adriamycin inj 20mg</i>	2	B/D
<i>doxorubicin hcl inj 2 mg/ml</i>	2	B/D
<i>doxorubicin hcl liposomal inj (for iv infusion) 2 mg/ml</i>	5	B/D
<i>epirubicin hcl iv soln 50 mg/25ml (2 mg/ml)</i>	2	B/D
<i>epirubicin hcl iv soln 200 mg/100ml (2 mg/ml)</i>	2	B/D
ANTIMETABOLITES		
ALIMTA INJ 100MG	5	B/D
ALIMTA INJ 500MG	5	B/D

Drug Name	Drug Tier	Requirements/Limits
<i>azacitidine for inj 100 mg</i>	5	B/D, NM
<i>cytarabine inj 20 mg/ml</i>	2	B/D
<i>fluorouracil iv soln 1 gm/20ml (50 mg/ml)</i>	2	B/D
<i>fluorouracil iv soln 2.5 gm/50ml (50 mg/ml)</i>	2	B/D
<i>fluorouracil iv soln 5 gm/100ml (50 mg/ml)</i>	2	B/D
<i>fluorouracil iv soln 500 mg/10ml (50 mg/ml)</i>	2	B/D
<i>gemcitabine hcl for inj 1 gm</i>	2	B/D
<i>gemcitabine hcl for inj 2 gm</i>	2	B/D
<i>gemcitabine hcl for inj 200 mg</i>	2	B/D
<i>gemcitabine hcl inj 1 gm/26.3ml (38 mg/ml) (base equiv)</i>	2	B/D
<i>gemcitabine hcl inj 2 gm/52.6ml (38 mg/ml) (base equiv)</i>	2	B/D
<i>gemcitabine hcl inj 200 mg/5.26ml (38 mg/ml) (base equiv)</i>	2	B/D
<i>mercaptopurine tab 50 mg</i>	2	
<i>methotrexate sodium for inj 1 gm</i>	2	B/D
<i>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</i>	2	B/D
<i>methotrexate sodium inj 250 mg/10ml (25 mg/ml)</i>	2	B/D
<i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i>	2	B/D
<i>methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)</i>	2	B/D
<i>methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)</i>	2	B/D
ONUREG TAB 200MG	5	NM, LA, PA
ONUREG TAB 300MG	5	NM, LA, PA
PURIXAN SUS 20MG/ML	5	NM
TABLOID TAB 40MG	5	

ANTIMITOTIC, TAXOIDS

ABRAXANE INJ 100MG	5	B/D
<i>docetaxel for inj conc 20 mg/ml</i>	5	B/D
<i>docetaxel for inj conc 80 mg/4ml (20 mg/ml)</i>	5	B/D
<i>docetaxel for inj conc 160 mg/8ml (20 mg/ml)</i>	5	B/D
DOCETAXEL INJ 20MG/2ML	5	B/D
DOCETAXEL INJ 80MG/4ML	5	B/D
DOCETAXEL INJ 80MG/8ML	5	B/D
DOCETAXEL INJ 160/8ML	5	B/D
DOCETAXEL INJ 160/16ML	5	B/D
DOCETAXEL INJ 200/10	5	B/D

Drug Name	Drug Tier	Requirements/Limits
<i>docetaxel soln for iv infusion 20 mg/2ml</i>	5	B/D
<i>docetaxel soln for iv infusion 80 mg/8ml</i>	5	B/D
<i>docetaxel soln for iv infusion 160 mg/16ml</i>	5	B/D
<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml)</i>	2	B/D
<i>paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)</i>	2	B/D
<i>paclitaxel iv conc 150 mg/25ml (6 mg/ml)</i>	2	B/D
<i>paclitaxel iv conc 300 mg/50ml (6 mg/ml)</i>	2	B/D
TAXOTERE INJ 80MG/4ML	5	B/D
ANTIMITOTIC, VINCA ALKALOIDS		
<i>vincristine sulfate iv soln 1 mg/ml</i>	2	B/D
<i>vinorelbine tartrate inj 10 mg/ml (base equiv)</i>	2	B/D
<i>vinorelbine tartrate inj 50 mg/5ml (10 mg/ml) (base equiv)</i>	2	B/D
BIOLOGIC RESPONSE MODIFIERS		
AVASTIN INJ	5	NM, LA, PA
AVASTIN INJ 400/16ML	5	NM, LA, PA
BORTEZOMIB INJ 3.5MG	5	NM, PA
DAURISMO TAB 25MG	5	NM, LA, PA
DAURISMO TAB 100MG	5	NM, LA, PA
ERIVEDGE CAP 150MG	5	NM, LA, PA
FARYDAK CAP 10MG	5	NM, LA, PA
FARYDAK CAP 20MG	5	NM, LA, PA
HERCEP HYLEC SOL 60-10000	5	NM, PA
HERCEPTIN INJ 150MG	5	NM, PA
HERCEPTIN INJ 440MG	5	NM, PA
HERZUMA INJ 150MG	5	NM, PA
HERZUMA INJ 420MG	5	NM, PA
IBRANCE CAP 75MG	5	QL (21 caps / 28 days), NM, LA, PA
IBRANCE CAP 100MG	5	QL (21 caps / 28 days), NM, LA, PA
IBRANCE CAP 125MG	5	QL (21 caps / 28 days), NM, LA, PA
IBRANCE TAB 75MG	5	QL (21 tabs / 28 days), NM, LA, PA
IBRANCE TAB 100MG	5	QL (21 tabs / 28 days), NM, LA, PA
IBRANCE TAB 125MG	5	QL (21 tabs / 28 days), NM, LA, PA
IDHIFA TAB 50MG	5	QL (30 tabs / 30 days), NM, LA, PA
IDHIFA TAB 100MG	5	QL (30 tabs / 30 days), NM, LA, PA
KADCYLA INJ 100MG	5	B/D, NM

19 You can find information on what the symbols and abbreviations on this table mean by going to page number IV.

Drug Name	Drug Tier	Requirements/Limits
KADCYLA INJ 160MG	5	B/D, NM
KANJINTI INJ 420MG	5	NM, PA
KANJINTI SOL 150MG	5	NM, PA
KEYTRUDA INJ 100MG/4M	5	NM, PA
KISQALI 200 PAK FEMARA	5	NM, PA
KISQALI 400 PAK FEMARA	5	NM, PA
KISQALI 600 PAK FEMARA	5	NM, PA
KISQALI TAB 200DOSE	5	NM, PA
KISQALI TAB 400DOSE	5	NM, PA
KISQALI TAB 600DOSE	5	NM, PA
LYNPARZA TAB 100MG	5	NM, LA, PA
LYNPARZA TAB 150MG	5	NM, LA, PA
MVASI INJ 100MG	5	NM, LA, PA
MVASI INJ 400MG	5	NM, LA, PA
NINLARO CAP 2.3MG	5	NM, PA
NINLARO CAP 3MG	5	NM, PA
NINLARO CAP 4MG	5	NM, PA
ODOMZO CAP 200MG	5	NM, LA, PA
OGIVRI INJ 150MG	5	NM, PA
OGIVRI INJ 420MG	5	NM, PA
ONTRUZANT INJ 150MG	5	NM, PA
ONTRUZANT INJ 420MG	5	NM, PA
PHESGO SOL	5	NM, LA, PA
RITUXAN INJ 100MG	5	NM, LA, PA
RITUXAN INJ 500MG	5	NM, LA, PA
RITUXAN INJ HYCEL	5	NM, LA, PA
RUBRACA TAB 200MG	5	NM, LA, PA
RUBRACA TAB 250MG	5	NM, LA, PA
RUBRACA TAB 300MG	5	NM, LA, PA
RUXIENCE INJ 100/10ML	5	NM, PA
RUXIENCE INJ 500/50ML	5	NM, PA
TALZENNA CAP 0.25MG	5	NM, LA, PA
TALZENNA CAP 1MG	5	NM, LA, PA
TECENTRIQ INJ 840/14	5	NM, LA, PA
TECENTRIQ INJ 1200/20	5	NM, LA, PA
TIBSOVO TAB 250MG	5	NM, LA, PA
TRAZIMERA INJ 420MG	5	NM, PA
TRUXIMA INJ 100/10ML	5	NM, PA
TRUXIMA INJ 500/50ML	5	NM, PA
VELCADE INJ 3.5MG	5	NM, PA
VENCLEXTA TAB 10MG	4	NM, LA, PA
VENCLEXTA TAB 50MG	5	NM, LA, PA
VENCLEXTA TAB 100MG	5	NM, LA, PA
VENCLEXTA TAB START PK	5	NM, LA, PA
VERZENIO TAB 50MG	5	NM, LA, PA

Drug Name	Drug Tier	Requirements/Limits
VERZENIO TAB 100MG	5	NM, LA, PA
VERZENIO TAB 150MG	5	NM, LA, PA
VERZENIO TAB 200MG	5	NM, LA, PA
ZEJULA CAP 100MG	5	NM, LA, PA
ZIRABEV INJ 100/4ML	5	NM, PA
ZIRABEV INJ 400/16ML	5	NM, PA
ZOLINZA CAP 100MG	5	NM, PA

HORMONAL ANTINEOPLASTIC AGENTS

<i>abiraterone acetate tab 250 mg</i>	5	NM, PA
<i>anastrozole tab 1 mg</i>	1	
<i>bicalutamide tab 50 mg</i>	2	
DEPO-PROVERA INJ 400/ML	4	B/D
ERLEADA TAB 60MG	5	NM, LA, PA
<i>exemestane tab 25 mg</i>	2	
<i>flutamide cap 125 mg</i>	2	
<i>fulvestrant inj 250 mg/5ml</i>	5	B/D
<i>letrozole tab 2.5 mg</i>	1	
<i>leuprolide acetate inj kit 5 mg/ml</i>	2	NM, PA
LUPRON DEPOT INJ 3.75MG	5	NM, PA
LUPRON DEPOT INJ 11.25MG	5	NM, PA
LYSODREN TAB 500MG	3	
<i>megestrol acetate susp 40 mg/ml</i>	3	
<i>megestrol acetate susp 625 mg/5ml</i>	4	PA
<i>megestrol acetate tab 20 mg</i>	3	
<i>megestrol acetate tab 40 mg</i>	3	
<i>nilutamide tab 150 mg</i>	5	
NUBEQA TAB 300MG	5	NM, LA, PA
SOLTAMOX SOL 10MG/5ML	5	
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	1	
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	1	
<i>toremifene citrate tab 60 mg (base equivalent)</i>	5	
TRELSTAR MIX INJ 3.75MG	5	NM, PA
TRELSTAR MIX INJ 11.25MG	5	NM, PA
XTANDI CAP 40MG	5	NM, LA, PA
ZYTIGA TAB 500MG	5	NM, LA, PA

IMMUNOMODULATORS

POMALYST CAP 1MG	5	QL (21 caps / 21 days), NM, LA, PA
POMALYST CAP 2MG	5	QL (21 caps / 21 days), NM, LA, PA
POMALYST CAP 3MG	5	QL (21 caps / 28 days), NM, LA, PA

Drug Name	Drug Tier	Requirements/Limits
POMALYST CAP 4MG	5	QL (21 caps / 28 days), NM, LA, PA
REVLIMID CAP 2.5MG	5	QL (28 caps / 28 days), NM, LA, PA
REVLIMID CAP 5MG	5	QL (28 caps / 28 days), NM, LA, PA
REVLIMID CAP 10MG	5	QL (28 caps / 28 days), NM, LA, PA
REVLIMID CAP 15MG	5	QL (28 caps / 28 days), NM, LA, PA
REVLIMID CAP 20MG	5	QL (28 caps / 28 days), NM, LA, PA
REVLIMID CAP 25MG	5	QL (28 caps / 28 days), NM, LA, PA
THALOMID CAP 50MG	5	QL (28 caps / 28 days), NM, PA
THALOMID CAP 100MG	5	QL (28 caps / 28 days), NM, PA
THALOMID CAP 150MG	5	QL (56 caps / 28 days), NM, PA
THALOMID CAP 200MG	5	QL (56 caps / 28 days), NM, PA

KINASE INHIBITORS

AFINITOR DIS TAB 2MG	5	QL (150 tabs / 30 days), NM, PA
AFINITOR DIS TAB 3MG	5	QL (90 tabs / 30 days), NM, PA
AFINITOR DIS TAB 5MG	5	QL (60 tabs / 30 days), NM, PA
AFINITOR TAB 10MG	5	QL (30 tabs / 30 days), NM, PA
ALECENSA CAP 150MG	5	NM, LA, PA
ALUNBRIG PAK	5	NM, LA, PA
ALUNBRIG TAB 30MG	5	NM, LA, PA
ALUNBRIG TAB 90MG	5	NM, LA, PA
ALUNBRIG TAB 180MG	5	NM, LA, PA
AYVAKIT TAB 100MG	5	QL (30 tabs / 30 days), NM, LA, PA
AYVAKIT TAB 200MG	5	QL (30 tabs / 30 days), NM, LA, PA
AYVAKIT TAB 300MG	5	QL (30 tabs / 30 days), NM, LA, PA
BALVERSA TAB 3MG	5	NM, LA, PA
BALVERSA TAB 4MG	5	NM, LA, PA
BALVERSA TAB 5MG	5	NM, LA, PA
BOSULIF TAB 100MG	5	NM, PA
BOSULIF TAB 400MG	5	NM, PA

Drug Name	Drug Tier	Requirements/Limits
BOSULIF TAB 500MG	5	NM, PA
BRAFTOVI CAP 75MG	5	NM, LA, PA
BRUKINSA CAP 80MG	5	NM, LA, PA
CABOMETYX TAB 20MG	5	QL (30 tabs / 30 days), NM, LA, PA
CABOMETYX TAB 40MG	5	QL (30 tabs / 30 days), NM, LA, PA
CABOMETYX TAB 60MG	5	QL (30 tabs / 30 days), NM, LA, PA
CALQUENCE CAP 100MG	5	NM, LA, PA
CAPRELSA TAB 100MG	5	NM, LA, PA
CAPRELSA TAB 300MG	5	NM, LA, PA
COMETRIQ KIT 60MG	5	NM, LA, PA
COMETRIQ KIT 100MG	5	NM, LA, PA
COMETRIQ KIT 140MG	5	NM, LA, PA
COPIKTRA CAP 15MG	5	NM, LA, PA
COPIKTRA CAP 25MG	5	NM, LA, PA
COTELLIC TAB 20MG	5	NM, LA, PA
<i>erlotinib hcl tab 25 mg (base equivalent)</i>	5	QL (90 tabs / 30 days), NM, PA
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	5	QL (30 tabs / 30 days), NM, PA
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	5	QL (30 tabs / 30 days), NM, PA
everolimus tab 2.5 mg	5	QL (30 tabs / 30 days), NM, PA
everolimus tab 5 mg	5	QL (30 tabs / 30 days), NM, PA
everolimus tab 7.5 mg	5	QL (30 tabs / 30 days), NM, PA
GAVRETO CAP 100MG	5	NM, LA, PA
GILOTRIF TAB 20MG	5	NM, LA, PA
GILOTRIF TAB 30MG	5	NM, LA, PA
GILOTRIF TAB 40MG	5	NM, LA, PA
ICLUSIG TAB 15MG	5	NM, LA, PA
ICLUSIG TAB 45MG	5	NM, LA, PA
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	5	QL (90 tabs / 30 days), NM, PA
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	5	QL (60 tabs / 30 days), NM, PA
IMBRUVICA CAP 70MG	5	NM, LA, PA
IMBRUVICA CAP 140MG	5	NM, LA, PA
IMBRUVICA TAB 140MG	5	NM, LA, PA
IMBRUVICA TAB 280MG	5	NM, LA, PA
IMBRUVICA TAB 420MG	5	NM, LA, PA
IMBRUVICA TAB 560MG	5	NM, LA, PA

23 You can find information on what the symbols and abbreviations on this table mean by going to page number IV.

Drug Name	Drug Tier	Requirements/Limits
INLYTA TAB 1MG	5	QL (180 tabs / 30 days), NM, LA, PA
INLYTA TAB 5MG	5	QL (120 tabs / 30 days), NM, LA, PA
INREBIC CAP 100MG	5	NM, LA, PA
IRESSA TAB 250MG	5	NM, LA, PA
JAKAFI TAB 5MG	5	QL (60 tabs / 30 days), NM, LA, PA
JAKAFI TAB 10MG	5	QL (60 tabs / 30 days), NM, LA, PA
JAKAFI TAB 15MG	5	QL (60 tabs / 30 days), NM, LA, PA
JAKAFI TAB 20MG	5	QL (60 tabs / 30 days), NM, LA, PA
JAKAFI TAB 25MG	5	QL (60 tabs / 30 days), NM, LA, PA
<i>lapatinib ditosylate tab 250 mg (base equiv)</i>	5	NM, PA
LENVIMA CAP 4MG	5	NM, LA, PA
LENVIMA CAP 8 MG	5	NM, LA, PA
LENVIMA CAP 10 MG	5	NM, LA, PA
LENVIMA CAP 12MG	5	NM, LA, PA
LENVIMA CAP 14 MG	5	NM, LA, PA
LENVIMA CAP 18 MG	5	NM, LA, PA
LENVIMA CAP 20 MG	5	NM, LA, PA
LENVIMA CAP 24 MG	5	NM, LA, PA
LORBRENA TAB 25MG	5	NM, LA, PA
LORBRENA TAB 100MG	5	NM, LA, PA
MEKINIST TAB 0.5MG	5	NM, LA, PA
MEKINIST TAB 2MG	5	NM, LA, PA
MEKTOVI TAB 15MG	5	NM, LA, PA
NERLYNX TAB 40MG	5	NM, LA, PA
NEXAVAR TAB 200MG	5	NM, LA, PA
PEMAZYRE TAB 4.5MG	5	NM, LA, PA
PEMAZYRE TAB 9MG	5	NM, LA, PA
PEMAZYRE TAB 13.5MG	5	NM, LA, PA
PIQRAY 200MG TAB DOSE	5	NM, PA
PIQRAY 250MG TAB DOSE	5	NM, PA
PIQRAY 300MG TAB DOSE	5	NM, PA
QINLOCK TAB 50MG	5	NM, LA, PA
RETEVMO CAP 40MG	5	NM, LA, PA
RETEVMO CAP 80MG	5	NM, LA, PA
ROZLYTREK CAP 100MG	5	NM, LA, PA
ROZLYTREK CAP 200MG	5	NM, LA, PA
RYDAPT CAP 25MG	5	NM, PA
SPRYCEL TAB 20MG	5	NM, PA

Drug Name	Drug Tier	Requirements/Limits
SPRYCEL TAB 50MG	5	NM, PA
SPRYCEL TAB 70MG	5	NM, PA
SPRYCEL TAB 80MG	5	NM, PA
SPRYCEL TAB 100MG	5	NM, PA
SPRYCEL TAB 140MG	5	NM, PA
STIVARGA TAB 40MG	5	NM, LA, PA
SUTENT CAP 12.5MG	5	QL (30 caps / 30 days), NM, PA
SUTENT CAP 25MG	5	QL (30 caps / 30 days), NM, PA
SUTENT CAP 37.5MG	5	QL (30 caps / 30 days), NM, PA
SUTENT CAP 50MG	5	QL (30 caps / 30 days), NM, PA
TABRECTA TAB 150MG	5	NM, PA
TABRECTA TAB 200MG	5	NM, PA
TAFINLAR CAP 50MG	5	NM, LA, PA
TAFINLAR CAP 75MG	5	NM, LA, PA
TAGRISSO TAB 40MG	5	QL (30 tabs / 30 days), NM, LA, PA
TAGRISSO TAB 80MG	5	QL (30 tabs / 30 days), NM, LA, PA
TASIGNA CAP 50MG	5	NM, PA
TASIGNA CAP 150MG	5	NM, PA
TASIGNA CAP 200MG	5	NM, PA
TUKYSA TAB 50MG	5	NM, LA, PA
TUKYSA TAB 150MG	5	NM, LA, PA
TURALIO CAP 200MG	5	NM, LA, PA
TYKERB TAB 250MG	5	NM, LA, PA
VITRAKVI CAP 25MG	5	NM, LA, PA
VITRAKVI CAP 100MG	5	NM, LA, PA
VITRAKVI SOL 20MG/ML	5	NM, LA, PA
VIZIMPRO TAB 15MG	5	NM, LA, PA
VIZIMPRO TAB 30MG	5	NM, LA, PA
VIZIMPRO TAB 45MG	5	NM, LA, PA
VOTRIENT TAB 200MG	5	NM, LA, PA
XALKORI CAP 200MG	5	NM, LA, PA
XALKORI CAP 250MG	5	NM, LA, PA
XOSPATA TAB 40MG	5	NM, LA, PA
ZELBORAF TAB 240MG	5	NM, LA, PA
ZYDELIG TAB 100MG	5	NM, LA, PA
ZYDELIG TAB 150MG	5	NM, LA, PA
ZYKADIA TAB 150MG	5	NM, LA, PA
MISCELLANEOUS		
bexarotene cap 75 mg	5	NM, PA

25 You can find information on what the symbols and abbreviations on this table mean by going to page number IV.

Drug Name	Drug Tier	Requirements/Limits
hydroxyurea cap 500 mg	2	
INQOVI TAB 35-100MG	5	NM, LA, PA
LONSURF TAB 15-6.14	5	NM, PA
LONSURF TAB 20-8.19	5	NM, PA
MATULANE CAP 50MG	5	LA
SYLATRON KIT 200MCG	5	NM, PA
SYLATRON KIT 300MCG	5	NM, PA
SYNRIBO INJ 3.5MG	5	NM, PA
TAZVERIK TAB 200MG	5	NM, LA, PA
tretinoin cap 10 mg	5	
XPOVIO PAK 40MG	5	NM, LA, PA
XPOVIO PAK 60MG	5	NM, LA, PA
XPOVIO PAK 80MG	5	NM, LA, PA
XPOVIO PAK 100MG	5	NM, LA, PA
PLATINUM-BASED AGENTS		
carboplatin iv soln 50 mg/5ml	2	B/D
carboplatin iv soln 150 mg/15ml	2	B/D
carboplatin iv soln 450 mg/45ml	2	B/D
carboplatin iv soln 600 mg/60ml	2	B/D
cisplatin inj 50 mg/50ml (1 mg/ml)	2	B/D
cisplatin inj 100 mg/100ml (1 mg/ml)	2	B/D
cisplatin inj 200 mg/200ml (1 mg/ml)	2	B/D
oxaliplatin for iv inj 50 mg	5	B/D
oxaliplatin for iv inj 100 mg	5	B/D
oxaliplatin iv soln 50 mg/10ml	2	B/D
oxaliplatin iv soln 100 mg/20ml	2	B/D
PROTECTIVE AGENTS		
leucovorin calcium for inj 50 mg	2	B/D
leucovorin calcium for inj 100 mg	2	B/D
leucovorin calcium for inj 200 mg	2	B/D
leucovorin calcium for inj 350 mg	2	B/D
leucovorin calcium for inj 500 mg	2	B/D
leucovorin calcium inj 500 mg/50ml (10 mg/ml)	2	B/D
leucovorin calcium tab 5 mg	2	
leucovorin calcium tab 10 mg	2	
leucovorin calcium tab 15 mg	2	
leucovorin calcium tab 25 mg	2	
MESNEX TAB 400MG	5	
TOPOISOMERASE INHIBITORS		
etoposide inj 100 mg/5ml (20 mg/ml)	2	B/D
etoposide inj 500 mg/25ml (20 mg/ml)	2	B/D
irinotecan hcl inj 40 mg/2ml (20 mg/ml)	2	B/D
irinotecan hcl inj 100 mg/5ml (20 mg/ml)	2	B/D
irinotecan hcl inj 300 mg/15ml (20 mg/ml)	2	B/D

Drug Name	Drug Tier	Requirements/Limits
<i>irinotecan hcl inj 500 mg/25ml (20 mg/ml)</i>	2	B/D
<i>toposar inj 1gm/50ml</i>	2	B/D
<i>toposar inj 100/5ml</i>	2	B/D

CARDIOVASCULAR

ACE INHIBITOR COMBINATIONS

<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	1
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	1
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	1
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	1
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	1
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	1
<i>benazepril & hydrochlorothiazide tab 5-6.25 mg</i>	1
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	1
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	1
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	1
<i>captopril & hydrochlorothiazide tab 25-15 mg</i>	1
<i>captopril & hydrochlorothiazide tab 25-25 mg</i>	1
<i>captopril & hydrochlorothiazide tab 50-15 mg</i>	1
<i>captopril & hydrochlorothiazide tab 50-25 mg</i>	1
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	1
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	1
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	1
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	1
<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i>	1
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	1
<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	1

Drug Name	Drug Tier	Requirements/Limits
quinapril-hydrochlorothiazide tab 10-12.5 mg	1	
quinapril-hydrochlorothiazide tab 20-12.5 mg	1	
quinapril-hydrochlorothiazide tab 20-25 mg	1	
ACE INHIBITORS		
benazepril hcl tab 5 mg	1	
benazepril hcl tab 10 mg	1	
benazepril hcl tab 20 mg	1	
benazepril hcl tab 40 mg	1	
captopril tab 12.5 mg	1	
captopril tab 25 mg	1	
captopril tab 50 mg	1	
captopril tab 100 mg	1	
enalapril maleate tab 2.5 mg	1	
enalapril maleate tab 5 mg	1	
enalapril maleate tab 10 mg	1	
enalapril maleate tab 20 mg	1	
fosinopril sodium tab 10 mg	1	
fosinopril sodium tab 20 mg	1	
fosinopril sodium tab 40 mg	1	
lisinopril tab 2.5 mg	1	
lisinopril tab 5 mg	1	
lisinopril tab 10 mg	1	
lisinopril tab 20 mg	1	
lisinopril tab 30 mg	1	
lisinopril tab 40 mg	1	
moexipril hcl tab 7.5 mg	1	
moexipril hcl tab 15 mg	1	
perindopril erbumine tab 2 mg	1	
perindopril erbumine tab 4 mg	1	
perindopril erbumine tab 8 mg	1	
quinapril hcl tab 5 mg	1	
quinapril hcl tab 10 mg	1	
quinapril hcl tab 20 mg	1	
quinapril hcl tab 40 mg	1	
ramipril cap 1.25 mg	1	
ramipril cap 2.5 mg	1	
ramipril cap 5 mg	1	
ramipril cap 10 mg	1	
trandolapril tab 1 mg	1	
trandolapril tab 2 mg	1	
trandolapril tab 4 mg	1	
ALDOSTERONE RECEPTOR ANTAGONISTS		
eplerenone tab 25 mg	2	

Drug Name	Drug Tier Requirements/Limits
eplerenone tab 50 mg	2
spironolactone tab 25 mg	1
spironolactone tab 50 mg	1
spironolactone tab 100 mg	1

ALPHA BLOCKERS

doxazosin mesylate tab 1 mg	1
doxazosin mesylate tab 2 mg	1
doxazosin mesylate tab 4 mg	1
doxazosin mesylate tab 8 mg	1
prazosin hcl cap 1 mg	2
prazosin hcl cap 2 mg	2
prazosin hcl cap 5 mg	2
terazosin hcl cap 1 mg (base equivalent)	1
terazosin hcl cap 2 mg (base equivalent)	1
terazosin hcl cap 5 mg (base equivalent)	1
terazosin hcl cap 10 mg (base equivalent)	2

ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS

amlodipine besylate-olmesartan medoxomil tab 5-20 mg	1
amlodipine besylate-olmesartan medoxomil tab 5-40 mg	1
amlodipine besylate-olmesartan medoxomil tab 10-20 mg	1
amlodipine besylate-olmesartan medoxomil tab 10-40 mg	1
amlodipine besylate-valsartan tab 5-160 mg	1
amlodipine besylate-valsartan tab 5-320 mg	1
amlodipine besylate-valsartan tab 10-160 mg	1
amlodipine besylate-valsartan tab 10-320 mg	1
amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg	1
amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg	1
amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg	1
amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg	1
amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg	1
ENTRESTO TAB 24-26MG	3
ENTRESTO TAB 49-51MG	3
ENTRESTO TAB 97-103MG	3

Drug Name	Drug Tier	Requirements/Limits
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	1	
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>	1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	1	
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
<i>irbesartan tab 75 mg</i>	1	
<i>irbesartan tab 150 mg</i>	1	
<i>irbesartan tab 300 mg</i>	1	
<i>losartan potassium tab 25 mg</i>	1	
<i>losartan potassium tab 50 mg</i>	1	
<i>losartan potassium tab 100 mg</i>	1	
<i>olmesartan medoxomil tab 5 mg</i>	1	
<i>olmesartan medoxomil tab 20 mg</i>	1	
<i>olmesartan medoxomil tab 40 mg</i>	1	
<i>telmisartan tab 20 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>telmisartan tab 40 mg</i>	1	
<i>telmisartan tab 80 mg</i>	1	
<i>valsartan tab 40 mg</i>	1	
<i>valsartan tab 80 mg</i>	1	
<i>valsartan tab 160 mg</i>	1	
<i>valsartan tab 320 mg</i>	1	
ANTIARRHYTHMICS		
<i>amiodarone hcl inj 150 mg/3ml (50 mg/ml)</i>	2	
<i>amiodarone hcl inj 450 mg/9ml (50 mg/ml)</i>	2	
<i>amiodarone hcl inj 900 mg/18ml (50 mg/ml)</i>	2	
<i>amiodarone hcl tab 100 mg</i>	2	
<i>amiodarone hcl tab 200 mg</i>	1	
<i>amiodarone hcl tab 400 mg</i>	2	
<i>disopyramide phosphate cap 100 mg</i>	4	
<i>disopyramide phosphate cap 150 mg</i>	4	
<i>dofetilide cap 125 mcg (0.125 mg)</i>	2	NM
<i>dofetilide cap 250 mcg (0.25 mg)</i>	2	NM
<i>dofetilide cap 500 mcg (0.5 mg)</i>	2	NM
<i>flecainide acetate tab 50 mg</i>	2	
<i>flecainide acetate tab 100 mg</i>	2	
<i>flecainide acetate tab 150 mg</i>	2	
<i>MULTAQ TAB 400MG</i>	4	
<i>NORPACE CAP 100MG CR</i>	4	
<i>NORPACE CAP 150MG CR</i>	4	
<i>pacerone tab 100mg</i>	2	
<i>pacerone tab 200mg</i>	1	
<i>pacerone tab 400mg</i>	2	
<i>propafenone hcl cap er 12hr 225 mg</i>	2	
<i>propafenone hcl cap er 12hr 325 mg</i>	2	
<i>propafenone hcl cap er 12hr 425 mg</i>	2	
<i>propafenone hcl tab 150 mg</i>	2	
<i>propafenone hcl tab 225 mg</i>	2	
<i>propafenone hcl tab 300 mg</i>	2	
<i>quinidine sulfate tab 200 mg</i>	2	
<i>quinidine sulfate tab 300 mg</i>	2	
<i>sorine tab 80mg</i>	1	
<i>sorine tab 120mg</i>	1	
<i>sorine tab 160mg</i>	1	
<i>sorine tab 240mg</i>	1	
<i>sotalol hcl (afib/afl) tab 80 mg</i>	2	
<i>sotalol hcl (afib/afl) tab 120 mg</i>	2	
<i>sotalol hcl (afib/afl) tab 160 mg</i>	2	

31 You can find information on what the symbols and abbreviations on this table mean by going to page number IV.

Drug Name	Drug Tier	Requirements/Limits
sotalol hcl tab 80 mg	1	
sotalol hcl tab 120 mg	1	
sotalol hcl tab 160 mg	1	
sotalol hcl tab 240 mg	1	

ANTI-LIPEMICS, HMG-CoA REDUCTASE INHIBITORS

atorvastatin calcium tab 10 mg (base equivalent)	1	
atorvastatin calcium tab 20 mg (base equivalent)	1	
atorvastatin calcium tab 40 mg (base equivalent)	1	
atorvastatin calcium tab 80 mg (base equivalent)	1	
lovastatin tab 10 mg	1	
lovastatin tab 20 mg	1	
lovastatin tab 40 mg	1	
pravastatin sodium tab 10 mg	1	
pravastatin sodium tab 20 mg	1	
pravastatin sodium tab 40 mg	1	
pravastatin sodium tab 80 mg	1	
rosuvastatin calcium tab 5 mg	1	QL (30 tabs / 30 days)
rosuvastatin calcium tab 10 mg	1	QL (30 tabs / 30 days)
rosuvastatin calcium tab 20 mg	1	QL (30 tabs / 30 days)
rosuvastatin calcium tab 40 mg	1	QL (30 tabs / 30 days)
simvastatin tab 5 mg	1	
simvastatin tab 10 mg	1	
simvastatin tab 20 mg	1	
simvastatin tab 40 mg	1	
simvastatin tab 80 mg	1	QL (30 tabs / 30 days)

ANTI-LIPEMICS, MISCELLANEOUS

cholestyramine light powder 4 gm/dose	2	
cholestyramine light powder packets 4 gm	2	
cholestyramine powder 4 gm/dose	2	
cholestyramine powder packets 4 gm	2	
colesevelam hcl packet for susp 3.75 gm	2	
colesevelam hcl tab 625 mg	2	
colestipol hcl granule packets 5 gm	2	
colestipol hcl granules 5 gm	2	
colestipol hcl tab 1 gm	2	
ezetimibe tab 10 mg	2	
fenofibrate micronized cap 67 mg	2	
fenofibrate micronized cap 134 mg	2	
fenofibrate micronized cap 200 mg	2	
fenofibrate tab 48 mg	2	
fenofibrate tab 54 mg	2	

Drug Name	Drug Tier	Requirements/Limits
<i>fenofibrate tab 145 mg</i>	2	
<i>fenofibrate tab 160 mg</i>	2	
<i>gemfibrozil tab 600 mg</i>	1	
JUXTAPIID CAP 5MG	5	NM, LA, PA
JUXTAPIID CAP 10MG	5	NM, LA, PA
JUXTAPIID CAP 20MG	5	NM, LA, PA
JUXTAPIID CAP 30MG	5	NM, LA, PA
<i>niacin (antihyperlipidemic) tab 500 mg</i>	2	
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	2	QL (60 tabs / 30 days)
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	2	
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	2	
<i>niacor tab 500mg</i>	2	
PRALUENT INJ 75MG/ML	3	NM, PA
PRALUENT INJ 150MG/ML	3	NM, PA
<i>prevalite pow 4gm</i>	2	
<i>prevalite pow 4gm pk</i>	2	
VASCEPA CAP 0.5GM	4	
VASCEPA CAP 1GM	4	

BETA-BLOCKER/DIURETIC COMBINATIONS

<i>atenolol & chlorthalidone tab 50-25 mg</i>	1	
<i>atenolol & chlorthalidone tab 100-25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	1	
<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	2	
<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	2	
<i>metoprolol & hydrochlorothiazide tab 100-50 mg</i>	2	
<i>propranolol & hydrochlorothiazide tab 40-25 mg</i>	2	
<i>propranolol & hydrochlorothiazide tab 80-25 mg</i>	2	

BETA-BLOCKERS

<i>acebutolol hcl cap 200 mg</i>	1	
<i>acebutolol hcl cap 400 mg</i>	1	
<i>atenolol tab 25 mg</i>	1	
<i>atenolol tab 50 mg</i>	1	
<i>atenolol tab 100 mg</i>	1	
<i>bisoprolol fumarate tab 5 mg</i>	1	
<i>bisoprolol fumarate tab 10 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
BYSTOLIC TAB 2.5MG	4	QL (30 tabs / 30 days)
BYSTOLIC TAB 5MG	4	QL (30 tabs / 30 days)
BYSTOLIC TAB 10MG	4	QL (30 tabs / 30 days)
BYSTOLIC TAB 20MG	4	QL (60 tabs / 30 days)
<i>carvedilol tab 3.125 mg</i>	1	
<i>carvedilol tab 6.25 mg</i>	1	
<i>carvedilol tab 12.5 mg</i>	1	
<i>carvedilol tab 25 mg</i>	1	
<i>labetalol hcl tab 100 mg</i>	2	
<i>labetalol hcl tab 200 mg</i>	2	
<i>labetalol hcl tab 300 mg</i>	2	
<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</i>	1	
<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i>	1	
<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i>	1	
<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i>	1	
<i>metoprolol tartrate iv soln 5 mg/5ml</i>	2	
<i>metoprolol tartrate iv soln cart inj 5 mg/5ml (1 mg/ml)</i>	2	
<i>metoprolol tartrate tab 25 mg</i>	1	
<i>metoprolol tartrate tab 50 mg</i>	1	
<i>metoprolol tartrate tab 100 mg</i>	1	
<i>nadolol tab 20 mg</i>	2	
<i>nadolol tab 40 mg</i>	2	
<i>nadolol tab 80 mg</i>	2	
<i>pindolol tab 5 mg</i>	2	
<i>pindolol tab 10 mg</i>	2	
<i>propranolol hcl cap er 24hr 60 mg</i>	2	
<i>propranolol hcl cap er 24hr 80 mg</i>	2	
<i>propranolol hcl cap er 24hr 120 mg</i>	2	
<i>propranolol hcl cap er 24hr 160 mg</i>	2	
<i>propranolol hcl oral soln 20 mg/5ml</i>	2	
<i>propranolol hcl oral soln 40 mg/5ml</i>	2	
<i>propranolol hcl tab 10 mg</i>	2	
<i>propranolol hcl tab 20 mg</i>	2	
<i>propranolol hcl tab 40 mg</i>	2	
<i>propranolol hcl tab 60 mg</i>	2	
<i>propranolol hcl tab 80 mg</i>	2	
<i>timolol maleate tab 5 mg</i>	2	
<i>timolol maleate tab 10 mg</i>	2	
<i>timolol maleate tab 20 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
CALCIUM CHANNEL BLOCKERS		
amlodipine besylate tab 2.5 mg (base equivalent)	1	
amlodipine besylate tab 5 mg (base equivalent)	1	
amlodipine besylate tab 10 mg (base equivalent)	1	
diltiazem hcl cap er 12hr 60 mg	2	
diltiazem hcl cap er 12hr 90 mg	2	
diltiazem hcl cap er 12hr 120 mg	2	
diltiazem hcl cap er 24hr 120 mg	2	
diltiazem hcl cap er 24hr 180 mg	2	
diltiazem hcl cap er 24hr 240 mg	2	
diltiazem hcl coated beads cap er 24hr 120 mg	2	
diltiazem hcl coated beads cap er 24hr 180 mg	2	
diltiazem hcl coated beads cap er 24hr 240 mg	2	
diltiazem hcl coated beads cap er 24hr 300 mg	2	
diltiazem hcl coated beads cap er 24hr 360 mg	2	
diltiazem hcl extended release beads cap er 24hr 120 mg	2	
diltiazem hcl extended release beads cap er 24hr 180 mg	2	
diltiazem hcl extended release beads cap er 24hr 240 mg	2	
diltiazem hcl extended release beads cap er 24hr 300 mg	2	
diltiazem hcl extended release beads cap er 24hr 360 mg	2	
diltiazem hcl extended release beads cap er 24hr 420 mg	2	
diltiazem hcl iv soln 25 mg/5ml (5 mg/ml)	2	
diltiazem hcl iv soln 50 mg/10ml (5 mg/ml)	2	
diltiazem hcl iv soln 125 mg/25ml (5 mg/ml)	2	
diltiazem hcl tab 30 mg	1	
diltiazem hcl tab 60 mg	1	
diltiazem hcl tab 90 mg	1	
diltiazem hcl tab 120 mg	1	
felodipine tab er 24hr 2.5 mg	2	
felodipine tab er 24hr 5 mg	2	

Drug Name	Drug Tier	Requirements/Limits
<i>felodipine tab er 24hr 10 mg</i>	2	
<i>isradipine cap 2.5 mg</i>	2	
<i>isradipine cap 5 mg</i>	2	
<i>nicardipine hcl cap 20 mg</i>	2	
<i>nicardipine hcl cap 30 mg</i>	2	
<i>nifedipine tab er 24hr 30 mg</i>	2	
<i>nifedipine tab er 24hr 60 mg</i>	2	
<i>nifedipine tab er 24hr 90 mg</i>	2	
<i>nifedipine tab er 24hr osmotic release 30 mg</i>	2	
<i>nifedipine tab er 24hr osmotic release 60 mg</i>	2	
<i>nifedipine tab er 24hr osmotic release 90 mg</i>	2	
<i>nimodipine cap 30 mg</i>	5	
<i>NYMALIZE SOL</i>	5	
<i>NYMALIZE SOL 60/20ML</i>	5	
<i>taztia xt cap 120mg/24</i>	2	
<i>taztia xt cap 180mg/24</i>	2	
<i>taztia xt cap 240mg/24</i>	2	
<i>taztia xt cap 300mg er</i>	2	
<i>taztia xt cap 360mg/24</i>	2	
<i>tiadylt cap 120mg/24</i>	2	
<i>tiadylt cap 180mg/24</i>	2	
<i>tiadylt cap 240mg/24</i>	2	
<i>tiadylt cap 300mg/24</i>	2	
<i>tiadylt cap 360mg/24</i>	2	
<i>tiadylt cap 420mg/24</i>	2	
<i>verapamil hcl cap er 24hr 100 mg</i>	2	
<i>verapamil hcl cap er 24hr 120 mg</i>	2	
<i>verapamil hcl cap er 24hr 180 mg</i>	2	
<i>verapamil hcl cap er 24hr 200 mg</i>	2	
<i>verapamil hcl cap er 24hr 240 mg</i>	2	
<i>verapamil hcl cap er 24hr 300 mg</i>	2	
<i>verapamil hcl cap er 24hr 360 mg</i>	2	
<i>verapamil hcl iv soln 2.5 mg/ml</i>	2	
<i>verapamil hcl tab 40 mg</i>	1	
<i>verapamil hcl tab 80 mg</i>	1	
<i>verapamil hcl tab 120 mg</i>	1	
<i>verapamil hcl tab er 120 mg</i>	1	
<i>verapamil hcl tab er 180 mg</i>	1	
<i>verapamil hcl tab er 240 mg</i>	1	
DIGITALIS GLYCOSIDES		
<i>digitek tab 0.25mg</i>	2	PA; PA if 70 years and older

Drug Name	Drug Tier	Requirements/Limits
<i>digitek tab 0.125mg</i>	2	QL (30 tabs / 30 days)
<i>digoxin inj 0.25 mg/ml</i>	2	
<i>digoxin oral soln 0.05 mg/ml</i>	2	PA; PA if 70 years and older
<i>digoxin tab 125 mcg (0.125 mg)</i>	2	QL (30 tabs / 30 days)
<i>digoxin tab 250 mcg (0.25 mg)</i>	2	PA; PA if 70 years and older

DIURETICS

<i>acetazolamide cap er 12hr 500 mg</i>	2
<i>acetazolamide tab 125 mg</i>	2
<i>acetazolamide tab 250 mg</i>	2
<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	1
<i>amiloride hcl tab 5 mg</i>	1
<i>bumetanide inj 0.25 mg/ml</i>	2
<i>bumetanide tab 0.5 mg</i>	2
<i>bumetanide tab 1 mg</i>	2
<i>bumetanide tab 2 mg</i>	2
<i>chlorothiazide tab 250 mg</i>	2
<i>chlorothiazide tab 500 mg</i>	2
<i>chlorthalidone tab 25 mg</i>	2
<i>chlorthalidone tab 50 mg</i>	2
<i>furosemide inj 10 mg/ml</i>	2
<i>furosemide oral soln 8 mg/ml</i>	1
<i>furosemide oral soln 10 mg/ml</i>	1
<i>furosemide tab 20 mg</i>	1
<i>furosemide tab 40 mg</i>	1
<i>furosemide tab 80 mg</i>	1
<i>hydrochlorothiazide cap 12.5 mg</i>	1
<i>hydrochlorothiazide tab 12.5 mg</i>	1
<i>hydrochlorothiazide tab 25 mg</i>	1
<i>hydrochlorothiazide tab 50 mg</i>	1
<i>indapamide tab 1.25 mg</i>	1
<i>indapamide tab 2.5 mg</i>	1
<i>methazolamide tab 25 mg</i>	2
<i>methazolamide tab 50 mg</i>	2
<i>metolazone tab 2.5 mg</i>	2
<i>metolazone tab 5 mg</i>	2
<i>metolazone tab 10 mg</i>	2
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	2
<i>torsemide tab 5 mg</i>	1
<i>torsemide tab 10 mg</i>	1
<i>torsemide tab 20 mg</i>	1
<i>torsemide tab 100 mg</i>	1

Drug Name	Drug Tier	Requirements/Limits
triamterene & hydrochlorothiazide cap 37.5-25 mg	1	
triamterene & hydrochlorothiazide tab 37.5-25 mg	1	
triamterene & hydrochlorothiazide tab 75- 50 mg	1	
MISCELLANEOUS		
aliskiren fumarate tab 150 mg (base equivalent)	2	
aliskiren fumarate tab 300 mg (base equivalent)	2	
clonidine hcl tab 0.1 mg	1	
clonidine hcl tab 0.2 mg	1	
clonidine hcl tab 0.3 mg	1	
clonidine td patch weekly 0.1 mg/24hr	2	
clonidine td patch weekly 0.2 mg/24hr	2	
clonidine td patch weekly 0.3 mg/24hr	2	
CORLANOR SOL 5MG/5ML	4	
CORLANOR TAB 5MG	4	
CORLANOR TAB 7.5MG	4	
DEMSER CAP 250MG	5	PA
hydralazine hcl inj 20 mg/ml	2	
hydralazine hcl tab 10 mg	2	
hydralazine hcl tab 25 mg	2	
hydralazine hcl tab 50 mg	2	
hydralazine hcl tab 100 mg	2	
metyrosine cap 250 mg	5	PA
midodrine hcl tab 2.5 mg	2	
midodrine hcl tab 5 mg	2	
midodrine hcl tab 10 mg	2	
minoxidil tab 2.5 mg	1	
minoxidil tab 10 mg	1	
NORTHERA CAP 100MG	5	QL (90 caps / 30 days), NM, LA, PA
NORTHERA CAP 200MG	5	QL (180 caps / 30 days), NM, LA, PA
NORTHERA CAP 300MG	5	QL (180 caps / 30 days), NM, LA, PA
ranolazine tab er 12hr 500 mg	2	
ranolazine tab er 12hr 1000 mg	2	
NITRATES		
isosorbide dinitrate tab 5 mg	2	
isosorbide dinitrate tab 10 mg	2	
isosorbide dinitrate tab 20 mg	2	
isosorbide dinitrate tab 30 mg	2	

Drug Name	Drug Tier	Requirements/Limits
<i>isosorbide mononitrate tab 10 mg</i>	1	
<i>isosorbide mononitrate tab 20 mg</i>	1	
<i>isosorbide mononitrate tab er 24hr 30 mg</i>	1	
<i>isosorbide mononitrate tab er 24hr 60 mg</i>	1	
<i>isosorbide mononitrate tab er 24hr 120 mg</i>	1	
<i>minitran dis 0.1mg/hr</i>	2	
<i>minitran dis 0.2mg/hr</i>	2	
<i>minitran dis 0.4mg/hr</i>	2	
<i>minitran dis 0.6mg/hr</i>	2	
NITRO-BID OIN 2%	3	
NITRO-DUR DIS 0.3MG/HR	4	
NITRO-DUR DIS 0.8MG/HR	4	
<i>nitroglycerin sl tab 0.3 mg</i>	2	
<i>nitroglycerin sl tab 0.4 mg</i>	2	
<i>nitroglycerin sl tab 0.6 mg</i>	2	
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>	2	
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	2	
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	2	
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	2	

PULMONARY ARTERIAL HYPERTENSION

ADEMPAS TAB 0.5MG	5	QL (90 tabs / 30 days), NM, LA, PA
ADEMPAS TAB 1.5MG	5	QL (90 tabs / 30 days), NM, LA, PA
ADEMPAS TAB 1MG	5	QL (90 tabs / 30 days), NM, LA, PA
ADEMPAS TAB 2.5MG	5	QL (90 tabs / 30 days), NM, LA, PA
ADEMPAS TAB 2MG	5	QL (90 tabs / 30 days), NM, LA, PA
<i>ambrisentan tab 5 mg</i>	5	QL (30 tabs / 30 days), NM, LA, PA
<i>ambrisentan tab 10 mg</i>	5	QL (30 tabs / 30 days), NM, LA, PA
<i>bosentan tab 62.5 mg</i>	5	QL (120 tabs / 30 days), NM, LA, PA
<i>bosentan tab 125 mg</i>	5	QL (60 tabs / 30 days), NM, LA, PA
OPSUMIT TAB 10MG	5	QL (30 tabs / 30 days), NM, LA, PA
<i>sildenafil citrate tab 20 mg</i>	2	QL (90 tabs / 30 days), NM, PA
<i>treprostinil inj soln 20 mg/20ml (1 mg/ml)</i>	5	NM, LA, PA
<i>treprostinil inj soln 50 mg/20ml (2.5 mg/ml)</i>	5	NM, LA, PA

Drug Name	Drug Tier	Requirements/Limits
<i>treprostinil inj soln 100 mg/20ml (5 mg/ml)</i>	5	NM, LA, PA
<i>treprostinil inj soln 200 mg/20ml (10 mg/ml)</i>	5	NM, LA, PA
VENTAVIS SOL 10MCG/ML	5	NM, PA
VENTAVIS SOL 20MCG/ML	5	NM, PA

CENTRAL NERVOUS SYSTEM

ANTIANXIETY

<i>alprazolam tab 0.5 mg</i>	2	QL (150 tabs / 30 days)
<i>alprazolam tab 0.25 mg</i>	2	QL (150 tabs / 30 days)
<i>alprazolam tab 1 mg</i>	2	QL (150 tabs / 30 days)
<i>alprazolam tab 2 mg</i>	2	QL (150 tabs / 30 days)
<i>buspirone hcl tab 5 mg</i>	1	
<i>buspirone hcl tab 7.5 mg</i>	2	
<i>buspirone hcl tab 10 mg</i>	1	
<i>buspirone hcl tab 15 mg</i>	1	
<i>buspirone hcl tab 30 mg</i>	2	
<i>fluvoxamine maleate tab 25 mg</i>	2	
<i>fluvoxamine maleate tab 50 mg</i>	2	
<i>fluvoxamine maleate tab 100 mg</i>	2	
<i>lorazepam conc 2 mg/ml</i>	2	QL (150 mL / 30 days)
<i>lorazepam inj 2 mg/ml</i>	2	
<i>lorazepam inj 4 mg/ml</i>	2	
<i>lorazepam tab 0.5 mg</i>	2	QL (150 tabs / 30 days)
<i>lorazepam tab 1 mg</i>	2	QL (150 tabs / 30 days)
<i>lorazepam tab 2 mg</i>	2	QL (150 tabs / 30 days)

ANTICONVULSANTS

<i>APTIOM TAB 200MG</i>	5	QL (60 tabs / 30 days)
<i>APTIOM TAB 400MG</i>	5	QL (60 tabs / 30 days)
<i>APTIOM TAB 600MG</i>	5	QL (60 tabs / 30 days)
<i>APTIOM TAB 800MG</i>	5	QL (60 tabs / 30 days)
<i>BANZEL SUS 40MG/ML</i>	5	PA
<i>BANZEL TAB 200MG</i>	5	PA
<i>BANZEL TAB 400MG</i>	5	PA
<i>BRIVIACT INJ 50MG/5ML</i>	4	PA
<i>BRIVIACT SOL 10MG/ML</i>	5	PA
<i>BRIVIACT TAB 10MG</i>	5	PA
<i>BRIVIACT TAB 25MG</i>	5	PA
<i>BRIVIACT TAB 50MG</i>	5	PA
<i>BRIVIACT TAB 75MG</i>	5	PA
<i>BRIVIACT TAB 100MG</i>	5	PA
<i>carbamazepine cap er 12hr 100 mg</i>	2	
<i>carbamazepine cap er 12hr 200 mg</i>	2	
<i>carbamazepine cap er 12hr 300 mg</i>	2	
<i>carbamazepine chew tab 100 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>carbamazepine susp 100 mg/5ml</i>	2	
<i>carbamazepine tab 200 mg</i>	2	
<i>carbamazepine tab er 12hr 100 mg</i>	2	
<i>carbamazepine tab er 12hr 200 mg</i>	2	
<i>carbamazepine tab er 12hr 400 mg</i>	2	
<i>CELONTIN CAP 300MG</i>	4	
<i>clobazam suspension 2.5 mg/ml</i>	2	PA
<i>clobazam tab 10 mg</i>	2	PA
<i>clobazam tab 20 mg</i>	2	PA
<i>clonazepam orally disintegrating tab 0.5 mg</i>	2	QL (90 tabs / 30 days)
<i>clonazepam orally disintegrating tab 0.25 mg</i>	2	QL (90 tabs / 30 days)
<i>clonazepam orally disintegrating tab 0.125 mg</i>	2	QL (90 tabs / 30 days)
<i>clonazepam orally disintegrating tab 1 mg</i>	2	QL (90 tabs / 30 days)
<i>clonazepam orally disintegrating tab 2 mg</i>	2	QL (300 tabs / 30 days)
<i>clonazepam tab 0.5 mg</i>	2	QL (90 tabs / 30 days)
<i>clonazepam tab 1 mg</i>	2	QL (90 tabs / 30 days)
<i>clonazepam tab 2 mg</i>	2	QL (300 tabs / 30 days)
<i>clorazepate dipotassium tab 3.75 mg</i>	2	QL (180 tabs / 30 days), PA; PA if 65 years and older
<i>clorazepate dipotassium tab 7.5 mg</i>	2	QL (180 tabs / 30 days), PA; PA if 65 years and older
<i>clorazepate dipotassium tab 15 mg</i>	2	QL (180 tabs / 30 days), PA; PA if 65 years and older
<i>DIASTAT ACDL GEL 5-10MG</i>	4	
<i>DIASTAT ACDL GEL 12.5-20</i>	4	
<i>DIASTAT PED GEL 2.5M GEL</i>	4	
<i>diazepam conc 5 mg/ml</i>	2	QL (240 mL / 30 days), PA; PA if 65 years and older
<i>diazepam inj 5 mg/ml</i>	2	
<i>diazepam oral soln 1 mg/ml</i>	2	QL (1200 mL / 30 days), PA; PA if 65 years and older
<i>diazepam rectal gel delivery system 2.5 mg</i>	2	
<i>diazepam rectal gel delivery system 10 mg</i>	2	
<i>diazepam rectal gel delivery system 20 mg</i>	2	
<i>diazepam tab 2 mg</i>	2	QL (120 tabs / 30 days), PA; PA if 65 years and older

41 You can find information on what the symbols and abbreviations on this table mean by going to page number IV.

Drug Name	Drug Tier	Requirements/Limits
<i>diazepam tab 5 mg</i>	2	QL (120 tabs / 30 days), PA; PA if 65 years and older
<i>diazepam tab 10 mg</i>	2	QL (120 tabs / 30 days), PA; PA if 65 years and older
DILANTIN CAP 30MG	3	
DILANTIN CAP 100MG	3	
DILANTIN CHW 50MG	3	
DILANTIN-125 SUS 125/5ML	4	
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	2	
<i>divalproex sodium tab delayed release 125 mg</i>	2	
<i>divalproex sodium tab delayed release 250 mg</i>	2	
<i>divalproex sodium tab delayed release 500 mg</i>	2	
<i>divalproex sodium tab er 24 hr 250 mg</i>	2	
<i>divalproex sodium tab er 24 hr 500 mg</i>	2	
EPIDIOLEX SOL 100MG/ML	5	QL (600 mL / 30 days), NM, LA, PA
<i>epitol tab 200mg</i>	2	
<i>ethosuximide cap 250 mg</i>	2	
<i>ethosuximide soln 250 mg/5ml</i>	2	
<i>felbamate susp 600 mg/5ml</i>	5	
<i>felbamate tab 400 mg</i>	2	
<i>felbamate tab 600 mg</i>	2	
FINTEPLA SOL 2.2MG/ML	5	QL (360 mL / 30 days), NM, LA, PA
FYCOMPA SUS 0.5MG/ML	5	QL (720 mL / 30 days), PA
FYCOMPA TAB 2MG	4	QL (60 tabs / 30 days), PA
FYCOMPA TAB 4MG	5	QL (60 tabs / 30 days), PA
FYCOMPA TAB 6MG	5	QL (60 tabs / 30 days), PA
FYCOMPA TAB 8MG	5	QL (30 tabs / 30 days), PA
FYCOMPA TAB 10MG	5	QL (30 tabs / 30 days), PA
FYCOMPA TAB 12MG	5	QL (30 tabs / 30 days), PA
<i>gabapentin cap 100 mg</i>	1	QL (1080 caps / 30 days)
<i>gabapentin cap 300 mg</i>	1	QL (360 caps / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>gabapentin cap 400 mg</i>	1	QL (270 caps / 30 days)
<i>gabapentin oral soln 250 mg/5ml</i>	2	QL (2160 mL / 30 days)
<i>gabapentin tab 600 mg</i>	2	QL (180 tabs / 30 days)
<i>gabapentin tab 800 mg</i>	2	QL (120 tabs / 30 days)
<i>lamotrigine tab 25 mg</i>	1	
<i>lamotrigine tab 100 mg</i>	1	
<i>lamotrigine tab 150 mg</i>	1	
<i>lamotrigine tab 200 mg</i>	1	
<i>lamotrigine tab chewable dispersible 5 mg</i>	2	
<i>lamotrigine tab chewable dispersible 25 mg</i>	2	
<i>lamotrigine tab er 24hr 25 mg</i>	2	
<i>lamotrigine tab er 24hr 50 mg</i>	2	
<i>lamotrigine tab er 24hr 100 mg</i>	2	
<i>lamotrigine tab er 24hr 200 mg</i>	2	
<i>lamotrigine tab er 24hr 250 mg</i>	2	
<i>lamotrigine tab er 24hr 300 mg</i>	2	
<i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i>	2	
<i>levetiracetam in sodium chloride iv soln 1000 mg/100ml</i>	2	
<i>levetiracetam in sodium chloride iv soln 1500 mg/100ml</i>	2	
<i>levetiracetam inj 500 mg/5ml (100 mg/ml)</i>	2	
<i>levetiracetam oral soln 100 mg/ml</i>	2	
<i>levetiracetam tab 250 mg</i>	2	
<i>levetiracetam tab 500 mg</i>	2	
<i>levetiracetam tab 750 mg</i>	2	
<i>levetiracetam tab 1000 mg</i>	2	
<i>levetiracetam tab er 24hr 500 mg</i>	2	
<i>levetiracetam tab er 24hr 750 mg</i>	2	
<i>NAYZILAM SPR 5MG</i>	4	
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i>	2	
<i>oxcarbazepine tab 150 mg</i>	2	
<i>oxcarbazepine tab 300 mg</i>	2	
<i>oxcarbazepine tab 600 mg</i>	2	
<i>PEGANONE TAB 250MG</i>	4	
<i>phenobarbital elixir 20 mg/5ml</i>	4	PA; PA if 70 years and older
<i>phenobarbital sodium inj 65 mg/ml</i>	4	PA; PA if 70 years and older
<i>phenobarbital sodium inj 130 mg/ml</i>	4	PA; PA if 70 years and older
<i>phenobarbital tab 15 mg</i>	3	PA; PA if 70 years and older

43 You can find information on what the symbols and abbreviations on this table mean by going to page number IV.

Drug Name	Drug Tier	Requirements/Limits
<i>phenobarbital tab 16.2 mg</i>	3	PA; PA if 70 years and older
<i>phenobarbital tab 30 mg</i>	3	PA; PA if 70 years and older
<i>phenobarbital tab 32.4 mg</i>	3	PA; PA if 70 years and older
<i>phenobarbital tab 60 mg</i>	3	PA; PA if 70 years and older
<i>phenobarbital tab 64.8 mg</i>	3	PA; PA if 70 years and older
<i>phenobarbital tab 97.2 mg</i>	3	PA; PA if 70 years and older
<i>phenobarbital tab 100 mg</i>	3	PA; PA if 70 years and older
<i>PHENYTEK CAP 200MG</i>	3	
<i>PHENYTEK CAP 300MG</i>	3	
<i>phenytoin chew tab 50 mg</i>	2	
<i>phenytoin sodium extended cap 100 mg</i>	2	
<i>phenytoin sodium extended cap 200 mg</i>	2	
<i>phenytoin sodium extended cap 300 mg</i>	2	
<i>phenytoin sodium inj 50 mg/ml</i>	2	
<i>phenytoin susp 125 mg/5ml</i>	2	
<i>pregabalin cap 25 mg</i>	2	QL (120 caps / 30 days), PA
<i>pregabalin cap 50 mg</i>	2	QL (120 caps / 30 days), PA
<i>pregabalin cap 75 mg</i>	2	QL (120 caps / 30 days), PA
<i>pregabalin cap 100 mg</i>	2	QL (120 caps / 30 days), PA
<i>pregabalin cap 150 mg</i>	2	QL (120 caps / 30 days), PA
<i>pregabalin cap 200 mg</i>	2	QL (90 caps / 30 days), PA
<i>pregabalin cap 225 mg</i>	2	QL (60 caps / 30 days), PA
<i>pregabalin cap 300 mg</i>	2	QL (60 caps / 30 days), PA
<i>pregabalin soln 20 mg/ml</i>	2	QL (900 mL / 30 days), PA
<i>primidone tab 50 mg</i>	1	
<i>primidone tab 250 mg</i>	1	
<i>roweepra tab 500mg</i>	2	
<i>roweepra tab 750mg</i>	2	
<i>roweepra tab 1000mg</i>	2	
<i>roweepra xr tab 500mg xr</i>	2	
<i>roweepra xr tab 750mg xr</i>	2	

Drug Name	Drug Tier	Requirements/Limits
SPRITAM TAB 250MG	4	
SPRITAM TAB 500MG	4	
SPRITAM TAB 750MG	4	
SPRITAM TAB 1000MG	4	
SYMPAZAN MIS 5MG	4	PA
SYMPAZAN MIS 10MG	5	PA
SYMPAZAN MIS 20MG	5	PA
<i>tiagabine hcl tab 2 mg</i>	2	
<i>tiagabine hcl tab 4 mg</i>	2	
<i>tiagabine hcl tab 12 mg</i>	2	
<i>tiagabine hcl tab 16 mg</i>	2	
<i>topiramate sprinkle cap 15 mg</i>	2	
<i>topiramate sprinkle cap 25 mg</i>	2	
<i>topiramate tab 25 mg</i>	1	
<i>topiramate tab 50 mg</i>	1	
<i>topiramate tab 100 mg</i>	1	
<i>topiramate tab 200 mg</i>	1	
<i>valproate sodium inj 100 mg/ml</i>	2	
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	2	
<i>valproic acid cap 250 mg</i>	2	
VALTOCO LIQ 15MG	4	NM
VALTOCO LIQ 20MG	4	NM
VALTOCO SPR 5MG	4	NM
VALTOCO SPR 10MG	4	NM
<i>vigabatrin powd pack 500 mg</i>	5	QL (180 packets / 30 days), NM, LA, PA
<i>vigabatrin tab 500 mg</i>	5	QL (180 tabs / 30 days), NM, LA, PA
<i>vigadroner 500mg</i>	5	QL (180 packets / 30 days), NM, LA, PA
VIMPAT INJ 200MG/20	5	
VIMPAT SOL 10MG/ML	5	QL (1200 mL / 30 days)
VIMPAT TAB 50MG	4	QL (120 tabs / 30 days)
VIMPAT TAB 100MG	5	QL (60 tabs / 30 days)
VIMPAT TAB 150MG	5	QL (60 tabs / 30 days)
VIMPAT TAB 200MG	5	QL (60 tabs / 30 days)
XCOPRI PAK 12.5-25	4	QL (28 tabs / 28 days)
XCOPRI PAK 50-100MG	5	QL (28 tabs / 28 days)
XCOPRI PAK 150-200	5	QL (28 tabs / 28 days)
XCOPRI PAK 150-200	5	QL (56 tabs / 28 days)
XCOPRI TAB 50-200MG	5	QL (56 tabs / 28 days)
XCOPRI TAB 50MG	5	QL (90 tabs / 30 days)
XCOPRI TAB 100MG	5	QL (60 tabs / 30 days)
XCOPRI TAB 150MG	5	QL (60 tabs / 30 days)

45 You can find information on what the symbols and abbreviations on this table mean by going to page number IV.

Drug Name	Drug Tier	Requirements/Limits
XCOPRI TAB 200MG	5	QL (60 tabs / 30 days)
zonisamide cap 25 mg	2	
zonisamide cap 50 mg	2	
zonisamide cap 100 mg	2	

ANTIDEMENTIA

donepezil hydrochloride orally disintegrating tab 5 mg	1	QL (30 tabs / 30 days)
donepezil hydrochloride orally disintegrating tab 10 mg	1	
donepezil hydrochloride tab 5 mg	1	QL (30 tabs / 30 days)
donepezil hydrochloride tab 10 mg	1	
galantamine hydrobromide cap er 24hr 8 mg	2	QL (30 caps / 30 days)
galantamine hydrobromide cap er 24hr 16 mg	2	QL (30 caps / 30 days)
galantamine hydrobromide cap er 24hr 24 mg	2	QL (30 caps / 30 days)
galantamine hydrobromide oral soln 4 mg/ml	2	
galantamine hydrobromide tab 4 mg	2	QL (60 tabs / 30 days)
galantamine hydrobromide tab 8 mg	2	QL (60 tabs / 30 days)
galantamine hydrobromide tab 12 mg	2	QL (60 tabs / 30 days)
memantine hcl cap er 24hr 7 mg	2	PA; PA if < 30 yrs
memantine hcl cap er 24hr 14 mg	2	PA; PA if < 30 yrs
memantine hcl cap er 24hr 21 mg	2	PA; PA if < 30 yrs
memantine hcl cap er 24hr 28 mg	2	PA; PA if < 30 yrs
memantine hcl oral solution 2 mg/ml	2	PA; PA if < 30 yrs
memantine hcl tab 5 mg	2	PA; PA if < 30 yrs
memantine hcl tab 10 mg	2	PA; PA if < 30 yrs
NAMZARIC CAP	4	
NAMZARIC CAP 7-10MG	4	
NAMZARIC CAP 14-10MG	4	
NAMZARIC CAP 21-10MG	4	
NAMZARIC CAP 28-10MG	4	
rivastigmine tartrate cap 1.5 mg (base equivalent)	2	QL (90 caps / 30 days)
rivastigmine tartrate cap 3 mg (base equivalent)	2	QL (90 caps / 30 days)
rivastigmine tartrate cap 4.5 mg (base equivalent)	2	QL (60 caps / 30 days)
rivastigmine tartrate cap 6 mg (base equivalent)	2	QL (60 caps / 30 days)
rivastigmine td patch 24hr 4.6 mg/24hr	2	QL (30 patches / 30 days)
rivastigmine td patch 24hr 9.5 mg/24hr	2	QL (30 patches / 30 days)

Drug Name	Drug Tier	Requirements/Limits	
rivastigmine td patch 24hr 13.3 mg/24hr	2	QL (30 patches / 30 days)	
ANTIDEPRESSANTS			
amitriptyline hcl tab 10 mg	3		
amitriptyline hcl tab 25 mg	3		
amitriptyline hcl tab 50 mg	3		
amitriptyline hcl tab 75 mg	3		
amitriptyline hcl tab 100 mg	3		
amitriptyline hcl tab 150 mg	3		
amoxapine tab 25 mg	3		
amoxapine tab 50 mg	3		
amoxapine tab 100 mg	3		
amoxapine tab 150 mg	3		
bupropion hcl tab 75 mg	2		
bupropion hcl tab 100 mg	2		
bupropion hcl tab er 12hr 100 mg	1		
bupropion hcl tab er 12hr 150 mg	1		
bupropion hcl tab er 12hr 200 mg	1		
bupropion hcl tab er 24hr 150 mg	2		
bupropion hcl tab er 24hr 300 mg	2		
citalopram hydrobromide oral soln 10 mg/5ml	2		
citalopram hydrobromide tab 10 mg (base equiv)	1		
citalopram hydrobromide tab 20 mg (base equiv)	1		
citalopram hydrobromide tab 40 mg (base equiv)	1		
clomipramine hcl cap 25 mg	4	PA	
clomipramine hcl cap 50 mg	4	PA	
clomipramine hcl cap 75 mg	4	PA	
desipramine hcl tab 10 mg	4		
desipramine hcl tab 25 mg	4		
desipramine hcl tab 50 mg	4		
desipramine hcl tab 75 mg	4		
desipramine hcl tab 100 mg	4		
desipramine hcl tab 150 mg	4		
desvenlafaxine succinate tab er 24hr 25 mg (base equiv)	2	QL (30 tabs / 30 days), PA	
desvenlafaxine succinate tab er 24hr 50 mg (base equiv)	2	QL (30 tabs / 30 days), PA	
desvenlafaxine succinate tab er 24hr 100 mg (base equiv)	2	QL (30 tabs / 30 days), PA	
doxepin hcl cap 10 mg	3		
doxepin hcl cap 25 mg	3		
doxepin hcl cap 50 mg	3		

Drug Name	Drug Tier	Requirements/Limits
<i>doxepin hcl cap 75 mg</i>	3	
<i>doxepin hcl cap 100 mg</i>	3	
<i>doxepin hcl cap 150 mg</i>	3	
<i>doxepin hcl conc 10 mg/ml</i>	3	
DRIZALMA CAP 20MG DR	4	QL (60 caps / 30 days), PA
DRIZALMA CAP 30MG DR	4	QL (60 caps / 30 days), PA
DRIZALMA CAP 40MG DR	4	QL (90 caps / 30 days), PA
DRIZALMA CAP 60MG DR	4	QL (60 caps / 30 days), PA
<i>duloxetine hcl enteric coated pellets cap 20 mg (base eq)</i>	2	QL (60 caps / 30 days)
<i>duloxetine hcl enteric coated pellets cap 30 mg (base eq)</i>	2	QL (60 caps / 30 days)
<i>duloxetine hcl enteric coated pellets cap 60 mg (base eq)</i>	2	QL (60 caps / 30 days)
EMSAM DIS 6MG/24HR	5	QL (30 patches / 30 days), PA
EMSAM DIS 9MG/24HR	5	QL (30 patches / 30 days), PA
EMSAM DIS 12MG/24H	5	QL (30 patches / 30 days), PA
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	2	
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	1	
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	1	
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	1	
FETZIMA CAP 20MG	4	QL (60 caps / 30 days), PA
FETZIMA CAP 40MG	4	QL (60 caps / 30 days), PA
FETZIMA CAP 80MG	4	QL (30 caps / 30 days), PA
FETZIMA CAP 120MG	4	QL (30 caps / 30 days), PA
FETZIMA CAP TITRATIO	4	PA
<i>fluoxetine hcl cap 10 mg</i>	1	
<i>fluoxetine hcl cap 20 mg</i>	1	
<i>fluoxetine hcl cap 40 mg</i>	1	
<i>fluoxetine hcl solution 20 mg/5ml</i>	1	
<i>imipramine hcl tab 10 mg</i>	2	
<i>imipramine hcl tab 25 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>imipramine hcl tab 50 mg</i>	2	
<i>maprotiline hcl tab 25 mg</i>	2	
<i>maprotiline hcl tab 50 mg</i>	2	
<i>maprotiline hcl tab 75 mg</i>	2	
MARPLAN TAB 10MG	4	QL (180 tabs / 30 days)
<i>mirtazapine orally disintegrating tab 15 mg</i>	2	
<i>mirtazapine orally disintegrating tab 30 mg</i>	2	
<i>mirtazapine orally disintegrating tab 45 mg</i>	2	
<i>mirtazapine tab 7.5 mg</i>	2	
<i>mirtazapine tab 15 mg</i>	1	
<i>mirtazapine tab 30 mg</i>	1	
<i>mirtazapine tab 45 mg</i>	1	
<i>nefazodone hcl tab 50 mg</i>	2	
<i>nefazodone hcl tab 100 mg</i>	2	
<i>nefazodone hcl tab 150 mg</i>	2	
<i>nefazodone hcl tab 200 mg</i>	2	
<i>nefazodone hcl tab 250 mg</i>	2	
<i>nortriptyline hcl cap 10 mg</i>	2	
<i>nortriptyline hcl cap 25 mg</i>	2	
<i>nortriptyline hcl cap 50 mg</i>	2	
<i>nortriptyline hcl cap 75 mg</i>	2	
<i>nortriptyline hcl soln 10 mg/5ml</i>	4	
<i>paroxetine hcl tab 10 mg</i>	2	
<i>paroxetine hcl tab 20 mg</i>	2	
<i>paroxetine hcl tab 30 mg</i>	2	
<i>paroxetine hcl tab 40 mg</i>	2	
PAXIL SUS 10MG/5ML	4	QL (900 mL / 30 days)
<i>phenelzine sulfate tab 15 mg</i>	2	
<i>protriptyline hcl tab 5 mg</i>	4	
<i>protriptyline hcl tab 10 mg</i>	4	
<i>sertraline hcl oral concentrate for solution 20 mg/ml</i>	2	
<i>sertraline hcl tab 25 mg</i>	1	
<i>sertraline hcl tab 50 mg</i>	1	
<i>sertraline hcl tab 100 mg</i>	1	
<i>tranylcypromine sulfate tab 10 mg</i>	2	
<i>trazodone hcl tab 50 mg</i>	1	
<i>trazodone hcl tab 100 mg</i>	1	
<i>trazodone hcl tab 150 mg</i>	1	
<i>trimipramine maleate cap 25 mg</i>	4	QL (240 caps / 30 days)
<i>trimipramine maleate cap 50 mg</i>	4	QL (120 caps / 30 days)
<i>trimipramine maleate cap 100 mg</i>	4	QL (60 caps / 30 days)
TRINTELLIX TAB 5MG	4	QL (120 tabs / 30 days)
TRINTELLIX TAB 10MG	4	QL (60 tabs / 30 days)
TRINTELLIX TAB 20MG	4	QL (30 tabs / 30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	1	
<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	1	
<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	2	
<i>venlafaxine hcl tab 37.5 mg (base equivalent)</i>	2	
<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	2	
<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	2	
<i>venlafaxine hcl tab 100 mg (base equivalent)</i>	2	
VIIBRYD KIT STARTER	4	
VIIBRYD TAB 10MG	4	QL (30 tabs / 30 days)
VIIBRYD TAB 20MG	4	QL (30 tabs / 30 days)
VIIBRYD TAB 40MG	4	QL (30 tabs / 30 days)

ANTIPARKINSONIAN AGENTS

<i>amantadine hcl cap 100 mg</i>	2	QL (120 caps / 30 days)
<i>amantadine hcl syrup 50 mg/5ml</i>	1	
<i>amantadine hcl tab 100 mg</i>	2	
APOKYN INJ 10MG/ML	5	QL (20 cartridges / 30 days), NM, LA, PA
<i>benztropine mesylate inj 1 mg/ml</i>	2	
<i>benztropine mesylate tab 0.5 mg</i>	3	PA; PA if 70 years and older
<i>benztropine mesylate tab 1 mg</i>	3	PA; PA if 70 years and older
<i>benztropine mesylate tab 2 mg</i>	3	PA; PA if 70 years and older
<i>bromocriptine mesylate cap 5 mg (base equivalent)</i>	2	
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	2	
<i>carbidopa & levodopa orally disintegrating tab 10-100 mg</i>	2	
<i>carbidopa & levodopa orally disintegrating tab 25-100 mg</i>	2	
<i>carbidopa & levodopa orally disintegrating tab 25-250 mg</i>	2	
<i>carbidopa & levodopa tab 10-100 mg</i>	2	
<i>carbidopa & levodopa tab 25-100 mg</i>	2	
<i>carbidopa & levodopa tab 25-250 mg</i>	2	
<i>carbidopa & levodopa tab er 25-100 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>carbidopa & levodopa tab er 50-200 mg</i>	2	
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	2	
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	2	
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	2	
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	2	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	2	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	2	
<i>entacapone tab 200 mg</i>	2	
<i>NEUPRO DIS 1MG/24HR</i>	4	
<i>NEUPRO DIS 2MG/24HR</i>	4	
<i>NEUPRO DIS 3MG/24HR</i>	4	
<i>NEUPRO DIS 4MG/24HR</i>	4	
<i>NEUPRO DIS 6MG/24HR</i>	4	
<i>NEUPRO DIS 8MG/24HR</i>	4	
<i>pramipexole dihydrochloride tab 0.5 mg</i>	1	
<i>pramipexole dihydrochloride tab 0.25 mg</i>	1	
<i>pramipexole dihydrochloride tab 0.75 mg</i>	1	
<i>pramipexole dihydrochloride tab 0.125 mg</i>	1	
<i>pramipexole dihydrochloride tab 1 mg</i>	1	
<i>pramipexole dihydrochloride tab 1.5 mg</i>	1	
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	2	
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	2	
<i>ropinirole hydrochloride tab 0.5 mg</i>	1	
<i>ropinirole hydrochloride tab 0.25 mg</i>	1	
<i>ropinirole hydrochloride tab 1 mg</i>	1	
<i>ropinirole hydrochloride tab 2 mg</i>	1	
<i>ropinirole hydrochloride tab 3 mg</i>	1	
<i>ropinirole hydrochloride tab 4 mg</i>	1	
<i>ropinirole hydrochloride tab 5 mg</i>	1	
<i>selegiline hcl cap 5 mg</i>	2	
<i>selegiline hcl tab 5 mg</i>	2	
<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i>	3	PA; PA if 70 years and older
<i>trihexyphenidyl hcl tab 2 mg</i>	3	PA; PA if 70 years and older
<i>trihexyphenidyl hcl tab 5 mg</i>	3	PA; PA if 70 years and older

51 You can find information on what the symbols and abbreviations on this table mean by going to page number IV.

Drug Name	Drug Tier	Requirements/Limits
ANTIPSYCHOTICS		
ABILIFY MAIN INJ 300MG	5	QL (1 injection / 28 days)
ABILIFY MAIN INJ 400MG	5	QL (1 injection / 28 days)
<i>aripiprazole oral solution 1 mg/ml</i>	5	QL (900 mL / 30 days)
<i>aripiprazole orally disintegrating tab 10 mg</i>	5	QL (60 tabs / 30 days)
<i>aripiprazole orally disintegrating tab 15 mg</i>	5	QL (60 tabs / 30 days)
<i>aripiprazole tab 2 mg</i>	2	QL (30 tabs / 30 days)
<i>aripiprazole tab 5 mg</i>	2	QL (30 tabs / 30 days)
<i>aripiprazole tab 10 mg</i>	2	QL (30 tabs / 30 days)
<i>aripiprazole tab 15 mg</i>	2	QL (30 tabs / 30 days)
<i>aripiprazole tab 20 mg</i>	2	QL (30 tabs / 30 days)
<i>aripiprazole tab 30 mg</i>	2	QL (30 tabs / 30 days)
ARISTADA INJ 441MG/1.	5	QL (1 injection / 28 days)
ARISTADA INJ 662MG/2	5	QL (1 injection / 28 days)
ARISTADA INJ 882MG/3	5	QL (1 injection / 28 days)
ARISTADA INJ 1064MG	5	QL (1 injection / 56 days)
ARISTADA INJ INITIO	5	
CAPLYTA CAP 42MG	4	QL (30 caps / 30 days)
<i>chlorpromazine hcl inj 25 mg/ml</i>	2	
<i>chlorpromazine hcl inj 50 mg/2ml</i>	2	
<i>chlorpromazine hcl tab 10 mg</i>	2	
<i>chlorpromazine hcl tab 25 mg</i>	2	
<i>chlorpromazine hcl tab 50 mg</i>	2	
<i>chlorpromazine hcl tab 100 mg</i>	2	
<i>chlorpromazine hcl tab 200 mg</i>	2	
<i>clozapine orally disintegrating tab 12.5 mg</i>	2	PA
<i>clozapine orally disintegrating tab 25 mg</i>	2	PA
<i>clozapine orally disintegrating tab 100 mg</i>	2	QL (270 tabs / 30 days), PA
<i>clozapine orally disintegrating tab 150 mg</i>	2	QL (180 tabs / 30 days), PA
<i>clozapine orally disintegrating tab 200 mg</i>	2	QL (135 tabs / 30 days), PA
<i>clozapine tab 25 mg</i>	2	
<i>clozapine tab 50 mg</i>	2	
<i>clozapine tab 100 mg</i>	2	QL (270 tabs / 30 days)
<i>clozapine tab 200 mg</i>	2	QL (135 tabs / 30 days)
FANAPT PAK	4	PA
FANAPT TAB 1MG	4	QL (60 tabs / 30 days), PA

Drug Name	Drug Tier	Requirements/Limits
FANAPT TAB 2MG	4	QL (60 tabs / 30 days), PA
FANAPT TAB 4MG	4	QL (60 tabs / 30 days), PA
FANAPT TAB 6MG	4	QL (60 tabs / 30 days), PA
FANAPT TAB 8MG	4	QL (60 tabs / 30 days), PA
FANAPT TAB 10MG	4	QL (60 tabs / 30 days), PA
FANAPT TAB 12MG	4	QL (60 tabs / 30 days), PA
<i>fluphenazine decanoate inj 25 mg/ml</i>	2	
<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	2	
<i>fluphenazine hcl inj 2.5 mg/ml</i>	2	
<i>fluphenazine hcl oral conc 5 mg/ml</i>	2	
<i>fluphenazine hcl tab 1 mg</i>	2	
<i>fluphenazine hcl tab 2.5 mg</i>	2	
<i>fluphenazine hcl tab 5 mg</i>	2	
<i>fluphenazine hcl tab 10 mg</i>	2	
GEODON INJ 20MG	4	QL (6 mL / 3 days)
<i>haloperidol decanoate im soln 50 mg/ml</i>	2	
<i>haloperidol decanoate im soln 100 mg/ml</i>	2	
<i>haloperidol lactate inj 5 mg/ml</i>	2	
<i>haloperidol lactate oral conc 2 mg/ml</i>	1	
<i>haloperidol tab 0.5 mg</i>	2	
<i>haloperidol tab 1 mg</i>	2	
<i>haloperidol tab 2 mg</i>	2	
<i>haloperidol tab 5 mg</i>	2	
<i>haloperidol tab 10 mg</i>	2	
<i>haloperidol tab 20 mg</i>	2	
INVEGA SUST INJ 39/0.25	4	QL (1 injection / 28 days)
INVEGA SUST INJ 78/0.5ML	5	QL (1 injection / 28 days)
INVEGA SUST INJ 117/0.75	5	QL (1 injection / 28 days)
INVEGA SUST INJ 156MG/ML	5	QL (1 injection / 28 days)
INVEGA SUST INJ 234/1.5	5	QL (1 injection / 28 days)
INVEGA TRINZ INJ 273MG	5	QL (1 injection / 90 days)
INVEGA TRINZ INJ 410MG	5	QL (1 injection / 90 days)

53 You can find information on what the symbols and abbreviations on this table mean by going to page number IV.

Drug Name	Drug Tier	Requirements/Limits
INVEGA TRINZ INJ 546MG	5	QL (1 injection / 90 days)
INVEGA TRINZ INJ 819MG	5	QL (1 injection / 90 days)
LATUDA TAB 20MG	4	QL (30 tabs / 30 days)
LATUDA TAB 40MG	4	QL (30 tabs / 30 days)
LATUDA TAB 60MG	4	QL (30 tabs / 30 days)
LATUDA TAB 80MG	4	QL (60 tabs / 30 days)
LATUDA TAB 120MG	4	QL (30 tabs / 30 days)
<i>loxapine succinate cap 5 mg</i>	2	
<i>loxapine succinate cap 10 mg</i>	2	
<i>loxapine succinate cap 25 mg</i>	2	
<i>loxapine succinate cap 50 mg</i>	2	
<i>molindone hcl tab 5 mg</i>	2	
<i>molindone hcl tab 10 mg</i>	2	
<i>molindone hcl tab 25 mg</i>	2	
NUPLAZID CAP 34MG	5	QL (30 caps / 30 days), NM, LA, PA
NUPLAZID TAB 10MG	5	QL (30 tabs / 30 days), NM, LA, PA
<i>olanzapine for im inj 10 mg</i>	2	QL (3 vials / 1 day)
<i>olanzapine orally disintegrating tab 5 mg</i>	2	QL (30 tabs / 30 days)
<i>olanzapine orally disintegrating tab 10 mg</i>	2	QL (60 tabs / 30 days)
<i>olanzapine orally disintegrating tab 15 mg</i>	2	QL (30 tabs / 30 days)
<i>olanzapine orally disintegrating tab 20 mg</i>	2	QL (30 tabs / 30 days)
<i>olanzapine tab 2.5 mg</i>	2	QL (60 tabs / 30 days)
<i>olanzapine tab 5 mg</i>	2	QL (60 tabs / 30 days)
<i>olanzapine tab 7.5 mg</i>	2	QL (30 tabs / 30 days)
<i>olanzapine tab 10 mg</i>	2	QL (60 tabs / 30 days)
<i>olanzapine tab 15 mg</i>	2	QL (30 tabs / 30 days)
<i>olanzapine tab 20 mg</i>	2	QL (30 tabs / 30 days)
<i>paliperidone tab er 24hr 1.5 mg</i>	2	QL (30 tabs / 30 days)
<i>paliperidone tab er 24hr 3 mg</i>	2	QL (30 tabs / 30 days)
<i>paliperidone tab er 24hr 6 mg</i>	2	QL (60 tabs / 30 days)
<i>paliperidone tab er 24hr 9 mg</i>	2	QL (30 tabs / 30 days)
<i>perphenazine tab 2 mg</i>	2	
<i>perphenazine tab 4 mg</i>	2	
<i>perphenazine tab 8 mg</i>	2	
<i>perphenazine tab 16 mg</i>	2	
PERSERIS INJ 90MG	5	QL (1 injection / 30 days)
PERSERIS INJ 120MG	5	QL (1 injection / 30 days)
<i>pimozide tab 1 mg</i>	2	
<i>pimozide tab 2 mg</i>	2	
<i>quetiapine fumarate tab 25 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
quetiapine fumarate tab 50 mg	2	
quetiapine fumarate tab 100 mg	2	
quetiapine fumarate tab 200 mg	2	
quetiapine fumarate tab 300 mg	2	
quetiapine fumarate tab 400 mg	2	
quetiapine fumarate tab er 24hr 50 mg	2	QL (60 tabs / 30 days), PA
quetiapine fumarate tab er 24hr 150 mg	2	QL (30 tabs / 30 days), PA
quetiapine fumarate tab er 24hr 200 mg	2	QL (30 tabs / 30 days), PA
quetiapine fumarate tab er 24hr 300 mg	2	QL (60 tabs / 30 days), PA
quetiapine fumarate tab er 24hr 400 mg	2	QL (60 tabs / 30 days), PA
REXULTI TAB 0.5MG	5	QL (60 tabs / 30 days)
REXULTI TAB 0.25MG	5	QL (60 tabs / 30 days)
REXULTI TAB 1MG	5	QL (60 tabs / 30 days)
REXULTI TAB 2MG	5	QL (60 tabs / 30 days)
REXULTI TAB 3MG	5	QL (30 tabs / 30 days)
REXULTI TAB 4MG	5	QL (30 tabs / 30 days)
RISPERDAL INJ 12.5MG	4	QL (2 injections / 28 days)
RISPERDAL INJ 25MG	4	QL (2 injections / 28 days)
RISPERDAL INJ 37.5MG	5	QL (2 injections / 28 days)
RISPERDAL INJ 50MG	5	QL (2 injections / 28 days)
risperidone orally disintegrating tab 0.5 mg	2	QL (90 tabs / 30 days)
risperidone orally disintegrating tab 0.25 mg	2	QL (90 tabs / 30 days)
risperidone orally disintegrating tab 1 mg	2	QL (60 tabs / 30 days)
risperidone orally disintegrating tab 2 mg	2	QL (60 tabs / 30 days)
risperidone orally disintegrating tab 3 mg	2	QL (60 tabs / 30 days)
risperidone orally disintegrating tab 4 mg	2	QL (60 tabs / 30 days)
risperidone soln 1 mg/ml	2	QL (240 mL / 30 days)
risperidone tab 0.5 mg	1	
risperidone tab 0.25 mg	1	
risperidone tab 1 mg	1	
risperidone tab 2 mg	1	
risperidone tab 3 mg	1	
risperidone tab 4 mg	1	
SAPHRIS SUB 2.5MG	4	QL (60 tabs / 30 days)
SAPHRIS SUB 5MG	4	QL (60 tabs / 30 days)
SAPHRIS SUB 10MG	4	QL (60 tabs / 30 days)

55 You can find information on what the symbols and abbreviations on this table mean by going to page number IV.

Drug Name	Drug Tier	Requirements/Limits
SECUADO DIS 3.8MG	4	QL (30 patches / 30 days)
SECUADO DIS 5.7MG	4	QL (30 patches / 30 days)
SECUADO DIS 7.6MG	4	QL (30 patches / 30 days)
<i>thioridazine hcl tab 10 mg</i>	2	
<i>thioridazine hcl tab 25 mg</i>	2	
<i>thioridazine hcl tab 50 mg</i>	2	
<i>thioridazine hcl tab 100 mg</i>	2	
<i>thiothixene cap 1 mg</i>	2	
<i>thiothixene cap 2 mg</i>	2	
<i>thiothixene cap 5 mg</i>	2	
<i>thiothixene cap 10 mg</i>	2	
<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	2	
<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	2	
<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	2	
<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	2	
VERSACLOZ SUS 50MG/ML	5	QL (600 mL / 30 days), PA
VRAYLAR CAP 1.5-3MG	4	PA
VRAYLAR CAP 1.5MG	5	QL (60 caps / 30 days), PA
VRAYLAR CAP 3MG	5	QL (30 caps / 30 days), PA
VRAYLAR CAP 4.5MG	5	QL (30 caps / 30 days), PA
VRAYLAR CAP 6MG	5	QL (30 caps / 30 days), PA
<i>ziprasidone hcl cap 20 mg</i>	2	QL (60 caps / 30 days)
<i>ziprasidone hcl cap 40 mg</i>	2	QL (60 caps / 30 days)
<i>ziprasidone hcl cap 60 mg</i>	2	QL (60 caps / 30 days)
<i>ziprasidone hcl cap 80 mg</i>	2	QL (60 caps / 30 days)
<i>ziprasidone mesylate for inj 20 mg (base equivalent)</i>	2	QL (6 injections / 3 days)
ZYPREXA RELP INJ 210MG	4	QL (2 vials / 28 days), PA
ZYPREXA RELP INJ 300MG	5	QL (2 vials / 28 days), PA
ZYPREXA RELP INJ 405MG	5	QL (1 vial / 28 days), PA

Drug Name	Drug Tier	Requirements/Limits
ATTENTION DEFICIT HYPERACTIVITY DISORDER		
amphetamine-dextroamphetamine cap er 24hr 5 mg	2	QL (90 caps / 30 days)
amphetamine-dextroamphetamine cap er 24hr 10 mg	2	QL (90 caps / 30 days)
amphetamine-dextroamphetamine cap er 24hr 15 mg	2	QL (30 caps / 30 days)
amphetamine-dextroamphetamine cap er 24hr 20 mg	2	QL (30 caps / 30 days)
amphetamine-dextroamphetamine cap er 24hr 25 mg	2	QL (30 caps / 30 days)
amphetamine-dextroamphetamine cap er 24hr 30 mg	2	QL (30 caps / 30 days)
amphetamine-dextroamphetamine tab 5 mg	2	QL (120 tabs / 30 days)
amphetamine-dextroamphetamine tab 7.5 mg	2	QL (120 tabs / 30 days)
amphetamine-dextroamphetamine tab 10 mg	2	QL (120 tabs / 30 days)
amphetamine-dextroamphetamine tab 12.5 mg	2	QL (120 tabs / 30 days)
amphetamine-dextroamphetamine tab 15 mg	2	QL (90 tabs / 30 days)
amphetamine-dextroamphetamine tab 20 mg	2	QL (90 tabs / 30 days)
amphetamine-dextroamphetamine tab 30 mg	2	QL (60 tabs / 30 days)
atomoxetine hcl cap 10 mg (base equiv)	2	QL (120 caps / 30 days)
atomoxetine hcl cap 18 mg (base equiv)	2	QL (120 caps / 30 days)
atomoxetine hcl cap 25 mg (base equiv)	2	QL (120 caps / 30 days)
atomoxetine hcl cap 40 mg (base equiv)	2	QL (60 caps / 30 days)
atomoxetine hcl cap 60 mg (base equiv)	2	QL (30 caps / 30 days)
atomoxetine hcl cap 80 mg (base equiv)	2	QL (30 caps / 30 days)
atomoxetine hcl cap 100 mg (base equiv)	2	QL (30 caps / 30 days)
dexmethylphenidate hcl tab 2.5 mg	2	QL (120 tabs / 30 days)
dexmethylphenidate hcl tab 5 mg	2	QL (120 tabs / 30 days)
dexmethylphenidate hcl tab 10 mg	2	QL (60 tabs / 30 days)
guanfacine hcl tab er 24hr 1 mg (base equiv)	3	PA; PA if 70 years and older
guanfacine hcl tab er 24hr 2 mg (base equiv)	3	PA; PA if 70 years and older
guanfacine hcl tab er 24hr 3 mg (base equiv)	3	PA; PA if 70 years and older
guanfacine hcl tab er 24hr 4 mg (base equiv)	3	PA; PA if 70 years and older
methylphenidate hcl soln 5 mg/5ml	2	QL (1800 mL / 30 days)
methylphenidate hcl soln 10 mg/5ml	2	QL (900 mL / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>methylphenidate hcl tab 5 mg</i>	2	QL (180 tabs / 30 days)
<i>methylphenidate hcl tab 10 mg</i>	2	QL (180 tabs / 30 days)
<i>methylphenidate hcl tab 20 mg</i>	2	QL (90 tabs / 30 days)
<i>methylphenidate hcl tab er 10 mg</i>	2	QL (90 tabs / 30 days)
<i>methylphenidate hcl tab er 20 mg</i>	2	QL (90 tabs / 30 days)

HYPNOTICS

BELSOMRA TAB 5MG	4	QL (30 tabs / 30 days)
BELSOMRA TAB 10MG	4	QL (30 tabs / 30 days)
BELSOMRA TAB 15MG	4	QL (30 tabs / 30 days)
BELSOMRA TAB 20MG	4	QL (30 tabs / 30 days)
<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i>	2	QL (30 tabs / 30 days)
<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i>	2	QL (30 tabs / 30 days)
HETLIOZ CAP 20MG	5	NM, LA, PA
<i>temazepam cap 7.5 mg</i>	2	QL (30 caps / 30 days), PA; PA applies if 65 years and older after a 90 day supply in a calendar year
<i>temazepam cap 15 mg</i>	2	QL (60 caps / 30 days), PA; PA applies if 65 years and older after a 90 day supply in a calendar year
<i>zolpidem tartrate tab 5 mg</i>	2	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>zolpidem tartrate tab 10 mg</i>	2	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year

MIGRAINE

AIMOVIG INJ 70MG/ML	3	QL (1 pen / 30 days), NM, PA
AIMOVIG INJ 140MG/ML	3	QL (1 pen / 30 days), NM, PA
<i>dihydroergotamine mesylate inj 1 mg/ml</i>	5	
<i>dihydroergotamine mesylate nasal spray 4 mg/ml</i>	5	QL (8 mL / 30 days), PA
<i>eletriptan hydrobromide tab 20 mg (base equivalent)</i>	2	QL (12 tabs / 30 days)
<i>eletriptan hydrobromide tab 40 mg (base equivalent)</i>	2	QL (12 tabs / 30 days)
EMGALITY INJ 120MG/ML	3	QL (2 pens / 30 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
EMGALITY INJ 120MG/ML	3	QL (2 syringes / 30 days), NM, PA
<i>ergotamine w/ caffeine tab 1-100 mg</i>	2	
<i>naratriptan hcl tab 1 mg (base equiv)</i>	2	QL (12 tabs / 30 days)
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	2	QL (12 tabs / 30 days)
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	2	QL (18 tabs / 30 days)
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	2	QL (18 tabs / 30 days)
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	2	QL (18 tabs / 30 days)
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	2	QL (18 tabs / 30 days)
<i>sumatriptan nasal spray 5 mg/act</i>	2	QL (24 inhalers / 30 days)
<i>sumatriptan nasal spray 20 mg/act</i>	2	QL (12 inhalers / 30 days)
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	2	QL (12 injections / 30 days)
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i>	2	QL (18 injections / 30 days)
<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i>	2	QL (12 injections / 30 days)
<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i>	2	QL (18 injections / 30 days)
<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i>	2	QL (12 injections / 30 days)
<i>sumatriptan succinate solution prefilled syringe 6 mg/0.5ml</i>	2	QL (12 injections / 30 days)
<i>sumatriptan succinate tab 25 mg</i>	2	QL (12 tabs / 30 days)
<i>sumatriptan succinate tab 50 mg</i>	2	QL (12 tabs / 30 days)
<i>sumatriptan succinate tab 100 mg</i>	2	QL (12 tabs / 30 days)
<i>zolmitriptan orally disintegrating tab 2.5 mg</i>	2	QL (12 tabs / 30 days)
<i>zolmitriptan orally disintegrating tab 5 mg</i>	2	QL (12 tabs / 30 days)
<i>zolmitriptan tab 2.5 mg</i>	2	QL (12 tabs / 30 days)
<i>zolmitriptan tab 5 mg</i>	2	QL (12 tabs / 30 days)
MISCELLANEOUS		
AUSTEDO TAB 6MG	5	QL (60 tabs / 30 days), NM, PA
AUSTEDO TAB 9MG	5	QL (120 tabs / 30 days), NM, PA
AUSTEDO TAB 12MG	5	QL (120 tabs / 30 days), NM, PA
INGREZZA CAP 40-80MG	5	QL (28 caps / 28 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
INGREZZA CAP 40MG	5	QL (30 caps / 30 days), NM, PA
INGREZZA CAP 80MG	5	QL (30 caps / 30 days), NM, PA
<i>lithium carbonate cap 150 mg</i>	1	
<i>lithium carbonate cap 300 mg</i>	1	
<i>lithium carbonate cap 600 mg</i>	1	
<i>lithium carbonate tab 300 mg</i>	1	
<i>lithium carbonate tab er 300 mg</i>	2	
<i>lithium carbonate tab er 450 mg</i>	2	
LITHIUM SOL 8MEQ/5ML	4	
LYRICA CR TAB 82.5MG	3	QL (60 tabs / 30 days), PA
LYRICA CR TAB 165MG	3	QL (60 tabs / 30 days), PA
LYRICA CR TAB 330MG	3	QL (60 tabs / 30 days), PA
NUEDEXTA CAP 20-10MG	4	QL (60 caps / 30 days), PA
<i>pyridostigmine bromide tab 60 mg</i>	2	
<i>riluzole tab 50 mg</i>	2	
<i>tetrabenazine tab 12.5 mg</i>	5	QL (240 tabs / 30 days), NM, PA
<i>tetrabenazine tab 25 mg</i>	5	QL (120 tabs / 30 days), NM, PA

MULTIPLE SCLEROSIS AGENTS

BETASERON INJ 0.3MG	5	QL (14 syringes / 28 days), NM, PA
<i>dalfampridine tab er 12hr 10 mg</i>	5	NM, PA
GILENYA CAP 0.5MG	5	QL (28 caps / 28 days), NM, PA
<i>glatiramer acetate soln prefilled syringe 20 mg/ml</i>	5	QL (30 syringes / 30 days), NM, PA
<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	5	QL (12 syringes / 28 days), NM, PA
<i>glatopa inj 20mg/ml</i>	5	QL (30 syringes / 30 days), NM, PA
<i>glatopa inj 40mg/ml</i>	5	QL (12 syringes / 28 days), NM, PA

MUSCULOSKELETAL THERAPY AGENTS

<i>baclofen tab 10 mg</i>	2	
<i>baclofen tab 20 mg</i>	2	
<i>cyclobenzaprine hcl tab 5 mg</i>	3	PA; PA if 70 years and older
<i>cyclobenzaprine hcl tab 10 mg</i>	3	PA; PA if 70 years and older

Drug Name	Drug Tier	Requirements/Limits
<i>dantrolene sodium cap 25 mg</i>	2	
<i>dantrolene sodium cap 50 mg</i>	2	
<i>dantrolene sodium cap 100 mg</i>	2	
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	2	
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	2	
NARCOLEPSY/CATAPLEXY		
<i>armodafinil tab 50 mg</i>	2	QL (90 tabs / 30 days), PA
<i>armodafinil tab 150 mg</i>	2	QL (30 tabs / 30 days), PA
<i>armodafinil tab 200 mg</i>	2	QL (30 tabs / 30 days), PA
<i>armodafinil tab 250 mg</i>	2	QL (30 tabs / 30 days), PA
<i>XYREM SOL 500MG/ML</i>	5	QL (540 mL / 30 days), NM, LA, PA
PSYCHOTHERAPEUTIC-MISC		
<i>acamprosate calcium tab delayed release 333 mg</i>	2	
<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	2	QL (90 tabs / 30 days), PA
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	2	QL (90 tabs / 30 days), PA
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	2	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	2	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	2	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	2	QL (60 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	2	QL (90 tabs / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	2	QL (90 tabs / 30 days)
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	2	
<i>CHANTIX PAK 0.5& 1MG</i>	4	
<i>CHANTIX PAK 1MG</i>	4	
<i>CHANTIX TAB 0.5MG</i>	4	
<i>CHANTIX TAB 1MG</i>	4	
<i>disulfiram tab 250 mg</i>	2	
<i>disulfiram tab 500 mg</i>	2	
<i>naloxone hcl inj 0.4 mg/ml</i>	2	
<i>naloxone hcl inj 4 mg/10ml</i>	2	
<i>naloxone hcl soln cartridge 0.4 mg/ml</i>	2	

61 You can find information on what the symbols and abbreviations on this table mean by going to page number IV.

Drug Name	Drug Tier	Requirements/Limits
<i>naloxone hcl soln prefilled syringe 2 mg/2ml</i>	2	
<i>naltrexone hcl tab 50 mg</i>	2	
NARCAN SPR	3	
NICOTROL INH	4	
NICOTROL NS SPR 10MG/ML	4	
VIVITROL INJ 380MG	5	NM

ENDOCRINE AND METABOLIC

ANDROGENS

ANADROL-50 TAB 50MG	5	PA
ANDRODERM DIS 2MG/24HR	4	QL (30 patches / 30 days), PA
ANDRODERM DIS 4MG/24HR	4	QL (30 patches / 30 days), PA
<i>oxandrolone tab 2.5 mg</i>	2	PA
<i>oxandrolone tab 10 mg</i>	2	PA
<i>testosterone cypionate im inj in oil 100 mg/ml</i>	2	PA
<i>testosterone cypionate im inj in oil 200 mg/ml</i>	2	PA
<i>testosterone enanthate im inj in oil 200 mg/ml</i>	2	PA
<i>testosterone td gel 12.5 mg/act (1%)</i>	2	QL (300 grams / 30 days), PA
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	2	QL (300 grams / 30 days), PA
<i>testosterone td gel 50 mg/5gm (1%)</i>	2	QL (300 grams / 30 days), PA

ANTIDIABETICS, INJECTABLE

BASAGLAR INJ 100UNIT	3	
BD ALCOHOL SWABS	3	
BD ULTRAFINE INSULIN SYRINGE	3	
BD ULTRAFINE/NANO PEN NEEDLES	3	
BYDUREON BC INJ 2/0.85ML	3	QL (4 pens / 28 days)
BYDUREON PEN INJ 2MG	3	QL (4 pens / 28 days)
BYETTA INJ 5MCG	4	QL (1 pen / 30 days)
BYETTA INJ 10MCG	4	QL (1 pen / 30 days)
FIASP FLEX INJ TOUCH	3	
FIASP INJ 100/ML	3	
FIASP PENFIL INJ U-100	3	
GAUZE PADS 2" X 2"	3	
HUMULIN R INJ U-500	5	Kwikpen
HUMULIN R INJ U-500	5	B/D
INSULIN PEN NEEDLE	3	
INSULIN SAFETY NEEDLES	3	

Drug Name	Drug Tier	Requirements/Limits
INSULIN SYRINGE	3	
LEVEMIR INJ	3	
LEVEMIR INJ FLEXTOUC	3	
NOVOLIN INJ 70/30	3	(brand RELION not covered)
NOVOLIN INJ 70/30 FP	3	(brand RELION not covered)
NOVOLIN N INJ 100 UNIT	3	(brand RELION not covered)
NOVOLIN N INJ U-100	3	(brand RELION not covered)
NOVOLIN R INJ 100 UNIT	3	(brand RELION not covered)
NOVOLIN R INJ U-100	3	(brand RELION not covered)
NOVOLOG INJ 100/ML	3	
NOVOLOG INJ FLEXPEN	3	
NOVOLOG INJ PENFILL	3	
NOVOLOG MIX INJ 70/30	3	
NOVOLOG MIX INJ FLEXPEN	3	
OZEMPIC INJ 2/1.5ML	3	QL (1 pen / 28 days); 0.25 or 0.5 mg/dose
OZEMPIC INJ 2/1.5ML	3	QL (2 pens / 28 days); 1mg/dose
SOLIQUA INJ 100/33	3	QL (10 pens / 30 days)
TRESIBA FLEX INJ 100UNIT	3	
TRESIBA FLEX INJ 200UNIT	3	
TRESIBA INJ 100UNIT	3	
TRULICITY INJ 0.75/0.5	3	QL (4 pens / 28 days)
TRULICITY INJ 1.5/0.5	3	QL (4 pens / 28 days)
TRULICITY INJ 3/0.5	3	QL (4 pens / 28 days)
TRULICITY INJ 4.5/0.5	3	QL (4 pens / 28 days)
VICTOZA INJ 18MG/3ML	3	QL (3 pens / 30 days)
XULTOPHY INJ 100/3.6	3	QL (5 pens / 30 days)

ANTIDIABETICS, ORAL

acarbose tab 25 mg	2	
acarbose tab 50 mg	2	
acarbose tab 100 mg	2	
FARXIGA TAB 5MG	3	QL (30 tabs / 30 days)
FARXIGA TAB 10MG	3	QL (30 tabs / 30 days)
glimepiride tab 1 mg	2	QL (90 tabs / 30 days)
glimepiride tab 2 mg	2	QL (90 tabs / 30 days)
glimepiride tab 4 mg	2	QL (60 tabs / 30 days)
glipizide tab 5 mg	1	QL (240 tabs / 30 days)
glipizide tab 10 mg	1	QL (120 tabs / 30 days)
glipizide tab er 24hr 2.5 mg	1	QL (90 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
glipizide tab er 24hr 5 mg	1	QL (90 tabs / 30 days)
glipizide tab er 24hr 10 mg	1	QL (60 tabs / 30 days)
glipizide xl tab 2.5mg	1	QL (90 tabs / 30 days)
glipizide xl tab 5mg	1	QL (90 tabs / 30 days)
glipizide xl tab 10mg	1	QL (60 tabs / 30 days)
glipizide-metformin hcl tab 2.5-250 mg	1	QL (240 tabs / 30 days)
glipizide-metformin hcl tab 2.5-500 mg	1	QL (120 tabs / 30 days)
glipizide-metformin hcl tab 5-500 mg	1	QL (120 tabs / 30 days)
GLYXAMBI TAB 10-5 MG	3	QL (30 tabs / 30 days)
GLYXAMBI TAB 25-5 MG	3	QL (30 tabs / 30 days)
JANUMET TAB 50-500MG	3	QL (60 tabs / 30 days)
JANUMET TAB 50-1000	3	QL (60 tabs / 30 days)
JANUMET XR TAB 50-500MG	3	QL (60 tabs / 30 days)
JANUMET XR TAB 50-1000	3	QL (60 tabs / 30 days)
JANUMET XR TAB 100-1000	3	QL (30 tabs / 30 days)
JANUVIA TAB 25MG	3	QL (30 tabs / 30 days)
JANUVIA TAB 50MG	3	QL (30 tabs / 30 days)
JANUVIA TAB 100MG	3	QL (30 tabs / 30 days)
JARDIANCE TAB 10MG	3	QL (60 tabs / 30 days)
JARDIANCE TAB 25MG	3	QL (30 tabs / 30 days)
JENTADUETO TAB 2.5-500	3	QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-850	3	QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-1000	3	QL (60 tabs / 30 days)
JENTADUETO TAB XR	3	QL (30 tabs / 30 days); 5-1000mg
JENTADUETO TAB XR	3	QL (60 tabs / 30 days); 2.5-1000mg
metformin hcl tab 500 mg	1	QL (150 tabs / 30 days)
metformin hcl tab 850 mg	1	QL (90 tabs / 30 days)
metformin hcl tab 1000 mg	1	QL (75 tabs / 30 days)
metformin hcl tab er 24hr 500 mg	1	QL (120 tabs / 30 days); (generic of GLUCOPHAGE XR)
metformin hcl tab er 24hr 750 mg	1	QL (60 tabs / 30 days); (generic of GLUCOPHAGE XR)
nateglinide tab 60 mg	1	QL (90 tabs / 30 days)
nateglinide tab 120 mg	1	QL (90 tabs / 30 days)
pioglitazone hcl tab 15 mg (base equiv)	1	QL (30 tabs / 30 days)
pioglitazone hcl tab 30 mg (base equiv)	1	QL (30 tabs / 30 days)
pioglitazone hcl tab 45 mg (base equiv)	1	QL (30 tabs / 30 days)
repaglinide tab 0.5 mg	1	QL (120 tabs / 30 days)
repaglinide tab 1 mg	1	QL (120 tabs / 30 days)
repaglinide tab 2 mg	1	QL (240 tabs / 30 days)
RYBELSUS TAB 3MG	3	QL (30 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
RYBELSUS TAB 7MG	3	QL (30 tabs / 30 days)
RYBELSUS TAB 14MG	3	QL (30 tabs / 30 days)
SYNJARDY TAB	3	QL (60 tabs / 30 days)
SYNJARDY TAB 5-500MG	3	QL (120 tabs / 30 days)
SYNJARDY TAB 5-1000MG	3	QL (60 tabs / 30 days)
SYNJARDY TAB 12.5-500	3	QL (60 tabs / 30 days)
SYNJARDY XR TAB	3	QL (60 tabs / 30 days)
SYNJARDY XR TAB 5-1000MG	3	QL (60 tabs / 30 days)
SYNJARDY XR TAB 10-1000	3	QL (60 tabs / 30 days)
SYNJARDY XR TAB 25-1000	3	QL (30 tabs / 30 days)
TRADJENTA TAB 5MG	3	QL (30 tabs / 30 days)
TRIJARDY XR TAB	3	QL (30 tabs / 30 days)
TRIJARDY XR TAB	3	QL (60 tabs / 30 days)
XIGDUO XR TAB 2.5-1000	3	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-500MG	3	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-1000MG	3	QL (60 tabs / 30 days)
XIGDUO XR TAB 10-500MG	3	QL (30 tabs / 30 days)
XIGDUO XR TAB 10-1000	3	QL (30 tabs / 30 days)

BISPHOSPHONATES

alendronate sodium tab 5 mg	1	
alendronate sodium tab 10 mg	1	
alendronate sodium tab 35 mg	1	
alendronate sodium tab 40 mg	2	
alendronate sodium tab 70 mg	1	
ibandronate sodium tab 150 mg (base equivalent)	2	B/D
pamidronate disodium for inj 30 mg	2	B/D
pamidronate disodium for inj 90 mg	2	B/D
pamidronate disodium iv soln 3 mg/ml	2	B/D
pamidronate disodium iv soln 9 mg/ml	2	B/D
PAMIDRONATE INJ 6MG/ML	3	B/D
zoledronic acid inj conc for iv infusion 4 mg/5ml	2	B/D, NM
zoledronic acid iv soln 4 mg/100ml	2	B/D, NM
zoledronic acid iv soln 5 mg/100ml	2	B/D, NM

CHELATING AGENTS

CHEMET CAP 100MG	4	
cloquique cap 250mg	5	PA
deferasirox granules packet 90 mg	5	NM, PA
deferasirox granules packet 180 mg	5	NM, PA
deferasirox granules packet 360 mg	5	NM, PA
deferasirox tab 90 mg	5	NM, PA
deferasirox tab 180 mg	5	NM, PA
deferasirox tab 360 mg	5	NM, PA
JADENU SPRKL GRA 90MG	5	NM, LA, PA

Drug Name	Drug Tier	Requirements/Limits
JADENU SPRKL GRA 180MG	5	NM, LA, PA
JADENU SPRKL GRA 360MG	5	NM, LA, PA
JADENU TAB 180MG	5	NM, LA, PA
LOKELMA PAK 5GM	3	
LOKELMA PAK 10GM	3	
<i>penicillamine tab 250 mg</i>	5	
<i>sodium polystyrene sulfonate oral susp 15 gm/60ml</i>	2	
<i>sodium polystyrene sulfonate powder</i>	2	
<i>trientine hcl cap 250 mg</i>	5	PA
VELTASSA POW 8.4GM	4	PA
VELTASSA POW 16.8GM	4	PA
VELTASSA POW 25.2GM	4	PA

CONTRACEPTIVES

<i>alyacen tab 1/35</i>	2	
<i>apri tab</i>	2	
<i>aranelle tab</i>	2	
<i>aubra tab 0.1-0.02</i>	2	
<i>aviane tab</i>	2	
<i>balziva tab</i>	2	
<i>bekyree tab</i>	2	
<i>blisovi fe tab 1.5/30</i>	2	
<i>briellyn tab</i>	2	
<i>camila tab 0.35mg</i>	2	
<i>cryselle-28 tab 28 tabs</i>	2	
<i>cyclafem tab 1/35</i>	2	
<i>cyclafem tab 7/7/7</i>	2	
<i>dasetta tab 1/35</i>	2	
<i>dasetta tab 7/7/7</i>	2	
<i>deblitane tab 0.35mg</i>	2	
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	2	
<i>desogest-ethin est tab 0.1-0.025/0.125-0.025/0.15-0.025mg-mg</i>	2	
<i>desogestrel & ethynodiol dihydrogen phosphate tab 0.15 mg-30 mcg</i>	2	
<i>drospirenone-ethynodiol dihydrogen phosphate tab 3-0.02 mg</i>	2	
<i>drospirenone-ethynodiol dihydrogen phosphate tab 3-0.03 mg</i>	2	
<i>ELLA TAB 30MG</i>	3	
<i>eluryng mis</i>	2	
<i>emoquette tab</i>	2	
<i>enpresse-28 tab</i>	2	
<i>enskyce tab</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>errin tab 0.35mg</i>	2	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	2	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	2	
<i>etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr</i>	2	
<i>falmina tab</i>	2	
<i>femynor tab 0.25-35</i>	2	
<i>heather tab 0.35mg</i>	2	
<i>incassia tab 0.35mg</i>	2	
<i>introvale tab</i>	2	
<i>isibloom tab</i>	2	
<i>jasmiel tab 3-0.02mg</i>	2	
<i>jolivette tab 0.35mg</i>	2	
<i>juleber tab</i>	2	
<i>junel 1.5/30 tab</i>	2	
<i>junel 1/20 tab</i>	2	
<i>junel fe tab 1.5/30</i>	2	
<i>junel fe tab 1/20</i>	2	
<i>kariva tab 28 day</i>	2	
<i>kelnor 1/50 tab</i>	2	
<i>kelnor tab 1/35</i>	2	
<i>kurvelo tab 0.15/30</i>	2	
<i>larin fe tab 1.5/30</i>	2	
<i>larin fe tab 1/20</i>	2	
<i>larin tab 1.5/30</i>	2	
<i>larin tab 1/20</i>	2	
<i>lessina tab</i>	2	
<i>levonest tab</i>	2	
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	2	
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	2	
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	2	
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	2	
<i>levora-28 tab 0.15/30</i>	2	
<i>loryna tab 3-0.02mg</i>	2	
<i>lutera tab</i>	2	
<i>lyza tab 0.35mg</i>	2	
<i>marlissa tab 0.15/30</i>	2	
<i>medroxyprogesterone acetate im susp 150 mg/ml</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml</i>	2	
<i>mili tab 0.25/35</i>	2	
<i>necon tab 0.5/35</i>	2	
<i>nikki tab 3-0.02mg</i>	2	
<i>norelgestromin-ethynodiol dihydrogesterone td ptwk 150-35 mcg/24hr</i>	2	
<i>norethindrone ac-ethynodiol dihydrogesterone tab 1-20/1-30/1-35 mg-mcg</i>	2	
<i>norethindrone ace & ethynodiol dihydrogesterone tab 1 mg-20 mcg</i>	2	
<i>norethindrone ace & ethynodiol dihydrogesterone tab 1.5 mg-30 mcg</i>	2	
<i>norethindrone ace & ethynodiol dihydrogesterone tab 1 mg-20 mcg</i>	2	
<i>norethindrone ace & ethynodiol dihydrogesterone tab 1.5 mg-30 mcg</i>	2	
<i>norethindrone tab 0.35 mg</i>	2	
<i>norethindrone-ethynodiol dihydrogesterone tab 0.5-35/1-35/0.5-35 mg-mcg</i>	2	
<i>norgestimate & ethynodiol dihydrogesterone tab 0.25 mg-35 mcg</i>	2	
<i>norgestimate-ethynodiol dihydrogesterone tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	2	
<i>norgestimate-ethynodiol dihydrogesterone tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	2	
<i>norgestrel & ethynodiol dihydrogesterone tab 0.3 mg-30 mcg</i>	2	
<i>nortrel tab 0.5/35</i>	2	
<i>nortrel tab 1/35</i>	2	
<i>nortrel tab 7/7/7</i>	2	
<i>orsythia tab</i>	2	
<i>philith tab 0.4-35</i>	2	
<i>pimtrea tab</i>	2	
<i>permella tab 1/35</i>	2	
<i>portia-28 tab</i>	2	
<i>previfem tab</i>	2	
<i>reclipsen tab</i>	2	
<i>sharobel tab 0.35mg</i>	2	
<i>sprintec 28 tab 28 day</i>	2	
<i>tarina fe tab 1/20</i>	2	
<i>tri-estaryll tab</i>	2	
<i>tri-legest tab fe</i>	2	
<i>tri-lo- tab sprintec</i>	2	
<i>tri-mili tab</i>	2	
<i>tri-previfem tab</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>tri-sprintec tab</i>	2	
<i>tri-vylibra tab</i>	2	
<i>tri-vylibra tab lo</i>	2	
<i>trivora-28 tab</i>	2	
<i>tulana tab 0.35mg</i>	2	
<i>velivet pak</i>	2	
<i>vienna tab 0.1-20</i>	2	
<i>viorele tab</i>	2	
<i>vyfemla tab 0.4-35</i>	2	
<i>vylibra tab 0.25-35</i>	2	
<i>zarah tab 3-0.03mg</i>	2	
<i>zovia 1/35e tab</i>	2	
<i>ENDOMETRIOSIS</i>		
<i>danazol cap 50 mg</i>	2	
<i>danazol cap 100 mg</i>	2	
<i>danazol cap 200 mg</i>	2	
<i>SYNAREL SOL 2MG/ML</i>	5	
<i>ENZYME REPLACEMENTS</i>		
<i>ALDURAZYME INJ 2.9MG/5M</i>	5	NM, LA, PA
<i>CARBAGLU TAB 200MG</i>	5	NM, LA, PA
<i>CERDELGA CAP 84MG</i>	5	NM, PA
<i>CEREZYME INJ 400UNIT</i>	5	NM, LA, PA
<i>CYSTADANE POW</i>	5	NM, LA
<i>CYSTAGON CAP 50MG</i>	4	NM, LA, PA
<i>CYSTAGON CAP 150MG</i>	4	NM, LA, PA
<i>FABRAZYME INJ 5MG</i>	5	NM, LA, PA
<i>FABRAZYME INJ 35MG</i>	5	NM, LA, PA
<i>KUVAN POW 100MG</i>	5	NM, LA, PA
<i>KUVAN POW 500MG</i>	5	NM, LA, PA
<i>KUVAN TAB 100MG</i>	5	NM, LA, PA
<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	2	B/D
<i>levocarnitine tab 330 mg</i>	2	B/D
<i>LUMIZYME INJ 50MG</i>	5	NM, LA, PA
<i>miglustat cap 100 mg</i>	5	NM, PA
<i>NAGLAZYME INJ 1MG/ML</i>	5	NM, LA, PA
<i>nitisinone cap 2 mg</i>	5	NM, PA
<i>nitisinone cap 5 mg</i>	5	NM, PA
<i>nitisinone cap 10 mg</i>	5	NM, PA
<i>NITYR TAB 2MG</i>	5	NM, LA, PA
<i>NITYR TAB 5MG</i>	5	NM, LA, PA
<i>NITYR TAB 10MG</i>	5	NM, LA, PA
<i>ORFADIN CAP 2MG</i>	5	NM, LA, PA
<i>ORFADIN CAP 5MG</i>	5	NM, LA, PA
<i>ORFADIN CAP 10MG</i>	5	NM, LA, PA
<i>ORFADIN CAP 20MG</i>	5	NM, LA, PA

69 You can find information on what the symbols and abbreviations on this table mean by going to page number IV.

Drug Name	Drug Tier	Requirements/Limits
ORFADIN SUS 4MG/ML	5	NM, LA, PA
sapropterin dihydrochloride powder packet 100 mg	5	NM, PA
sapropterin dihydrochloride powder packet 500 mg	5	NM, PA
sapropterin dihydrochloride soluble tab 100 mg	5	NM, PA
sodium phenylbutyrate oral powder 3 gm/teaspoonful	5	NM, PA
sodium phenylbutyrate tab 500 mg	5	NM, PA

ESTROGENS

DELESTROGEN INJ 10MG/ML	4
estradiol tab 0.5 mg	2
estradiol tab 1 mg	2
estradiol tab 2 mg	2
estradiol td patch weekly 0.1 mg/24hr	3
estradiol td patch weekly 0.05 mg/24hr	3
estradiol td patch weekly 0.06 mg/24hr	3
estradiol td patch weekly 0.025 mg/24hr	3
estradiol td patch weekly 0.075 mg/24hr	3
estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)	3
estradiol vaginal cream 0.1 mg/gm	2
estradiol vaginal tab 10 mcg	2
estradiol valerate im in oil 20 mg/ml	2
estradiol valerate im in oil 40 mg/ml	2
fyavolv tab 0.5-2.5	3
jinteli tab 1mg-5mcg	3
norethindrone acetate-ethynodiol diacetate tab 0.5 mg-2.5 mcg	3
norethindrone acetate-ethynodiol diacetate tab 1 mg-5 mcg	3

GLUCOCORTICOIDS

cortisone acetate tab 25 mg	2
DEXAMETHASON CON 1MG/ML	4
dexamethasone elixir 0.5 mg/5ml	2
dexamethasone sod phosphate preservative free inj 10 mg/ml	2
dexamethasone sodium phosphate inj 4 mg/ml	2
dexamethasone sodium phosphate inj 10 mg/ml	2
dexamethasone sodium phosphate inj 20 mg/5ml	2
dexamethasone sodium phosphate inj 100 mg/10ml	2

Drug Name	Drug Tier	Requirements/Limits
dexamethasone sodium phosphate inj 120 mg/30ml	2	
dexamethasone soln 0.5 mg/5ml	2	
dexamethasone tab 0.5 mg	1	
dexamethasone tab 0.75 mg	1	
dexamethasone tab 1 mg	1	
dexamethasone tab 1.5 mg	1	
dexamethasone tab 2 mg	1	
dexamethasone tab 4 mg	1	
dexamethasone tab 6 mg	1	
fludrocortisone acetate tab 0.1 mg	2	
hydrocortisone tab 5 mg	2	
hydrocortisone tab 10 mg	2	
hydrocortisone tab 20 mg	2	
methylprednisolone acetate inj susp 40 mg/ml	2	B/D
methylprednisolone acetate inj susp 80 mg/ml	2	B/D
methylprednisolone sod succ for inj 40 mg (base equiv)	2	B/D
methylprednisolone sod succ for inj 125 mg (base equiv)	2	B/D
methylprednisolone sod succ for inj 1000 mg (base equiv)	2	B/D
methylprednisolone tab 4 mg	2	B/D
methylprednisolone tab 8 mg	2	B/D
methylprednisolone tab 16 mg	2	B/D
methylprednisolone tab 32 mg	2	B/D
methylprednisolone tab therapy pack 4 mg (21)	2	
prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)	2	B/D
prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)	2	B/D
prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)	2	B/D
prednisolone syrup 15 mg/5ml (usp solution equivalent)	2	B/D
PREDNISONE CON 5MG/ML	4	B/D
prednisone oral soln 5 mg/5ml	2	B/D
prednisone tab 1 mg	1	B/D
prednisone tab 2.5 mg	1	B/D
prednisone tab 5 mg	1	B/D
prednisone tab 10 mg	1	B/D
prednisone tab 20 mg	1	B/D
prednisone tab 50 mg	1	B/D

Drug Name	Drug Tier	Requirements/Limits
<i>prednisone tab therapy pack 5 mg (21)</i>	2	
<i>prednisone tab therapy pack 5 mg (48)</i>	2	
<i>prednisone tab therapy pack 10 mg (21)</i>	2	
<i>prednisone tab therapy pack 10 mg (48)</i>	2	
SOLU-CORTEF INJ 100MG	4	
SOLU-CORTEF INJ 250MG	4	
SOLU-CORTEF INJ 500MG	4	
SOLU-CORTEF INJ 1000MG	4	
GLUCOSE ELEVATING AGENTS		
<i>diazoxide susp 50 mg/ml</i>	2	
GLUCAGEN INJ HYPOKIT	3	
GLUCAGON KIT 1MG	3	
GVOKE HYPO 2 INJ 1MG/.2ML	3	
GVOKE HYPO 2 INJ .5/.1ML	3	
GVOKE PFS INJ	3	
PROGLYCEM SUS 50MG/ML	4	
MISCELLANEOUS		
<i>cabergoline tab 0.5 mg</i>	2	
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	2	B/D
<i>cinacalcet hcl tab 30 mg (base equiv)</i>	5	B/D, QL (120 tabs / 30 days), NM
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	5	B/D, QL (60 tabs / 30 days), NM
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	5	B/D, QL (120 tabs / 30 days), NM
FORTEO SOL 600/2.4	5	NM, PA
GENOTROPIN INJ 0.2MG	3	NM, PA
GENOTROPIN INJ 0.4MG	5	NM, PA
GENOTROPIN INJ 0.6MG	5	NM, PA
GENOTROPIN INJ 0.8MG	5	NM, PA
GENOTROPIN INJ 1.2MG	5	NM, PA
GENOTROPIN INJ 1.4MG	5	NM, PA
GENOTROPIN INJ 1.6MG	5	NM, PA
GENOTROPIN INJ 1.8MG	5	NM, PA
GENOTROPIN INJ 1MG	5	NM, PA
GENOTROPIN INJ 2MG	5	NM, PA
GENOTROPIN INJ 5MG	5	NM, PA
GENOTROPIN INJ 12MG	5	NM, PA
INCRELEX INJ 40MG/4ML	5	NM, LA, PA
KORLYM TAB 300MG	5	NM, LA, PA
LUPR DEP-PED INJ 3M 30MG	5	NM, PA
LUPR DEP-PED INJ 7.5MG	5	NM, PA
LUPR DEP-PED INJ 11.25MG	5	NM, PA
LUPR DEP-PED INJ 15MG	5	NM, PA
NATPARA INJ 25MCG	5	NM, PA

Drug Name	Drug Tier	Requirements/Limits
NATPARA INJ 50MCG	5	NM, PA
NATPARA INJ 75MCG	5	NM, PA
NATPARA INJ 100MCG	5	NM, PA
<i>octreotide acetate inj 50 mcg/ml (0.05 mg/ml)</i>	2	NM, PA
<i>octreotide acetate inj 100 mcg/ml (0.1 mg/ml)</i>	2	NM, PA
<i>octreotide acetate inj 200 mcg/ml (0.2 mg/ml)</i>	2	NM, PA
<i>octreotide acetate inj 500 mcg/ml (0.5 mg/ml)</i>	5	NM, PA
<i>octreotide acetate inj 1000 mcg/ml (1 mg/ml)</i>	5	NM, PA
OSPHENA TAB 60MG	3	PA
PROLIA SOL 60MG/ML	4	QL (1 injection / 180 days), NM
<i>raloxifene hcl tab 60 mg</i>	2	
SIGNIFOR INJ 0.3MG/ML	5	NM, LA, PA
SIGNIFOR INJ 0.6MG/ML	5	NM, LA, PA
SIGNIFOR INJ 0.9MG/ML	5	NM, LA, PA
SOMATULINE INJ 60/0.2ML	5	NM, PA
SOMATULINE INJ 90/0.3ML	5	NM, PA
SOMATULINE INJ 120/.5ML	5	NM, PA
SOMAVERT INJ 10MG	5	NM, LA, PA
SOMAVERT INJ 15MG	5	NM, LA, PA
SOMAVERT INJ 20MG	5	NM, LA, PA
SOMAVERT INJ 25MG	5	NM, LA, PA
SOMAVERT INJ 30MG	5	NM, LA, PA
TYMLOS INJ	5	NM, PA
XGEVA INJ	5	NM, PA

PHOSPHATE BINDER AGENTS

AURYXIA TAB 210MG	5	QL (360 tabs / 30 days), PA
<i>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</i>	2	QL (360 caps / 30 days)
<i>calcium acetate (phosphate binder) tab 667 mg</i>	2	QL (360 tabs / 30 days)
<i>sevelamer carbonate packet 0.8 gm</i>	5	QL (540 packets / 30 days)
<i>sevelamer carbonate packet 2.4 gm</i>	5	QL (180 packets / 30 days)
<i>sevelamer carbonate tab 800 mg</i>	2	QL (540 tabs / 30 days)

PROGESTINS

<i>medroxyprogesterone acetate tab 2.5 mg</i>	1
<i>medroxyprogesterone acetate tab 5 mg</i>	1
<i>medroxyprogesterone acetate tab 10 mg</i>	1

Drug Name	Drug Tier	Requirements/Limits
norethindrone acetate tab 5 mg	2	
THYROID AGENTS		
euthyrox tab 25mcg	2	
euthyrox tab 50mcg	2	
euthyrox tab 75mcg	2	
euthyrox tab 88mcg	2	
euthyrox tab 100mcg	2	
euthyrox tab 112mcg	2	
euthyrox tab 125mcg	2	
euthyrox tab 137mcg	2	
euthyrox tab 150mcg	2	
euthyrox tab 175mcg	2	
euthyrox tab 200mcg	2	
levo-t tab 25mcg	2	
levo-t tab 50mcg	2	
levo-t tab 75mcg	2	
levo-t tab 88mcg	2	
levo-t tab 100mcg	2	
levo-t tab 112mcg	2	
levo-t tab 125mcg	2	
levo-t tab 137mcg	2	
levo-t tab 150mcg	2	
levo-t tab 175mcg	2	
levo-t tab 200 mcg	2	
levo-t tab 300 mcg	2	
levothyroxine sodium tab 25 mcg	2	
levothyroxine sodium tab 50 mcg	2	
levothyroxine sodium tab 75 mcg	2	
levothyroxine sodium tab 88 mcg	2	
levothyroxine sodium tab 100 mcg	2	
levothyroxine sodium tab 112 mcg	2	
levothyroxine sodium tab 125 mcg	2	
levothyroxine sodium tab 137 mcg	2	
levothyroxine sodium tab 150 mcg	2	
levothyroxine sodium tab 175 mcg	2	
levothyroxine sodium tab 200 mcg	2	
levothyroxine sodium tab 300 mcg	2	
levoxyl tab 25mcg	2	
levoxyl tab 50mcg	2	
levoxyl tab 75mcg	2	
levoxyl tab 88mcg	2	
levoxyl tab 100mcg	2	
levoxyl tab 112mcg	2	
levoxyl tab 125mcg	2	
levoxyl tab 137mcg	2	

Drug Name	Drug Tier	Requirements/Limits
<i>levoxyl tab 150mcg</i>	2	
<i>levoxyl tab 175mcg</i>	2	
<i>levoxyl tab 200mcg</i>	2	
<i>liothyronine sodium tab 5 mcg</i>	2	
<i>liothyronine sodium tab 25 mcg</i>	2	
<i>liothyronine sodium tab 50 mcg</i>	2	
<i>methimazole tab 5 mg</i>	1	
<i>methimazole tab 10 mg</i>	1	
<i>propylthiouracil tab 50 mg</i>	2	
<i>SYNTHROID TAB 25MCG</i>	4	
<i>SYNTHROID TAB 50MCG</i>	4	
<i>SYNTHROID TAB 75MCG</i>	4	
<i>SYNTHROID TAB 88MCG</i>	4	
<i>SYNTHROID TAB 100MCG</i>	4	
<i>SYNTHROID TAB 112MCG</i>	4	
<i>SYNTHROID TAB 125MCG</i>	4	
<i>SYNTHROID TAB 137MCG</i>	4	
<i>SYNTHROID TAB 150MCG</i>	4	
<i>SYNTHROID TAB 175MCG</i>	4	
<i>SYNTHROID TAB 200MCG</i>	4	
<i>SYNTHROID TAB 300MCG</i>	4	
<i>unithroid tab 25mcg</i>	2	
<i>unithroid tab 50mcg</i>	2	
<i>unithroid tab 75mcg</i>	2	
<i>unithroid tab 88mcg</i>	2	
<i>unithroid tab 100mcg</i>	2	
<i>unithroid tab 112mcg</i>	2	
<i>unithroid tab 125mcg</i>	2	
<i>unithroid tab 137mcg</i>	2	
<i>unithroid tab 150mcg</i>	2	
<i>unithroid tab 175mcg</i>	2	
<i>unithroid tab 200mcg</i>	2	
<i>unithroid tab 300mcg</i>	2	

VASOPRESSINS

<i>desmopressin acetate inj 4 mcg/ml</i>	2	
<i>desmopressin acetate nasal spray soln 0.01%</i>	2	
<i>desmopressin acetate nasal spray soln 0.01% (refrigerated)</i>	2	
<i>desmopressin acetate tab 0.1 mg</i>	2	
<i>desmopressin acetate tab 0.2 mg</i>	2	
<i>STIMATE SOL 1.5MG/ML</i>	5	NM

GASTROINTESTINAL

ANTIEMETICS

<i>aprepitant capsule 40 mg</i>	2	B/D
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Drug Name	Drug Tier	Requirements/Limits
<i>aprepitant capsule 80 mg</i>	2	B/D
<i>aprepitant capsule 125 mg</i>	2	B/D
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	2	B/D
<i>compro sup 25mg</i>	2	
<i>dronabinol cap 2.5 mg</i>	2	B/D, QL (60 caps / 30 days)
<i>dronabinol cap 5 mg</i>	2	B/D, QL (60 caps / 30 days)
<i>dronabinol cap 10 mg</i>	2	B/D, QL (60 caps / 30 days)
<i>EMEND SUS 125MG</i>	4	B/D
<i>granisetron hcl inj 1 mg/ml</i>	2	
<i>granisetron hcl inj 4 mg/4ml (1 mg/ml)</i>	2	
<i>granisetron hcl tab 1 mg</i>	2	B/D
<i>meclizine hcl tab 12.5 mg</i>	2	
<i>meclizine hcl tab 25 mg</i>	2	
<i>metoclopramide hcl inj 5 mg/ml (base equivalent)</i>	2	
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	2	
<i>metoclopramide hcl tab 5 mg (base equivalent)</i>	1	
<i>metoclopramide hcl tab 10 mg (base equivalent)</i>	1	
<i>ondansetron hcl inj 4 mg/2ml (2 mg/ml)</i>	2	
<i>ondansetron hcl inj 40 mg/20ml (2 mg/ml)</i>	2	
<i>ondansetron hcl oral soln 4 mg/5ml</i>	2	B/D
<i>ondansetron hcl tab 4 mg</i>	2	B/D
<i>ondansetron hcl tab 8 mg</i>	2	B/D
<i>ondansetron hcl tab 24 mg</i>	2	B/D
<i>ondansetron orally disintegrating tab 4 mg</i>	2	B/D
<i>ondansetron orally disintegrating tab 8 mg</i>	2	B/D
<i>prochlorperazine edisylate inj 10 mg/2ml</i>	2	
<i>prochlorperazine maleate tab 5 mg (base equivalent)</i>	2	
<i>prochlorperazine maleate tab 10 mg (base equivalent)</i>	2	
<i>prochlorperazine suppos 25 mg</i>	2	
<i>promethazine hcl inj 25 mg/ml</i>	4	PA; PA if 70 years and older
<i>promethazine hcl inj 50 mg/ml</i>	4	PA; PA if 70 years and older
<i>promethazine hcl syrup 6.25 mg/5ml</i>	2	PA; PA if 70 years and older

Drug Name	Drug Tier	Requirements/Limits
<i>promethazine hcl tab 12.5 mg</i>	2	PA; PA if 70 years and older
<i>promethazine hcl tab 25 mg</i>	2	PA; PA if 70 years and older
<i>promethazine hcl tab 50 mg</i>	2	PA; PA if 70 years and older
<i>scopolamine td patch 72hr 1 mg/3days</i>	4	QL (10 patches / 30 days), PA; PA if 70 years and older

ANTISPASMODICS

<i>dicyclomine hcl cap 10 mg</i>	3
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	4
<i>dicyclomine hcl tab 20 mg</i>	3
<i>glycopyrrolate tab 1 mg</i>	2
<i>glycopyrrolate tab 2 mg</i>	2

H2-RECEPTOR ANTAGONISTS

<i>famotidine for susp 40 mg/5ml</i>	2
<i>famotidine in nacl 0.9% iv soln 20 mg/50ml</i>	2
<i>famotidine inj 20 mg/2ml</i>	2
<i>famotidine inj 40 mg/4ml</i>	2
<i>famotidine inj 200 mg/20ml</i>	2
<i>famotidine tab 20 mg</i>	1
<i>famotidine tab 40 mg</i>	1
<i>nizatidine cap 150 mg</i>	2
<i>nizatidine cap 300 mg</i>	2

INFLAMMATORY BOWEL DISEASE

<i>balsalazide disodium cap 750 mg</i>	2
<i>budesonide delayed release particles cap 3 mg</i>	2
<i>hydrocortisone enema 100 mg/60ml</i>	2
<i>mesalamine cap dr 400 mg</i>	2
<i>mesalamine enema 4 gm</i>	2
<i>mesalamine rectal enema 4 gm & cleanser wipe kit</i>	2
<i>mesalamine suppos 1000 mg</i>	5
<i>mesalamine tab delayed release 1.2 gm</i>	2
<i>sulfasalazine tab 500 mg</i>	2
<i>sulfasalazine tab delayed release 500 mg</i>	2

LAXATIVES

<i>constulose sol 10gm/15</i>	2
<i>enulose sol 10gm/15</i>	2
<i>gavilyte-c sol</i>	1
<i>gavilyte-g sol</i>	1
<i>gavilyte-n sol flav pk</i>	1

Drug Name	Drug Tier	Requirements/Limits
generlac sol 10gm/15	2	
GOLYTELY SOL	3	
lactulose (encephalopathy) solution 10 gm/15ml	2	
lactulose solution 10 gm/15ml	2	
NULYTELY SOL FLAV PKS	3	
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm	1	
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm	1	
peg 3350-kcl-sod bicarb-nacl for soln 420 gm	1	
PLENVU SOL	4	
SUPREP BOWEL SOL PREP KIT	4	
trilyte sol	1	

MISCELLANEOUS

alosetron hcl tab 0.5 mg (base equiv)	5	PA
alosetron hcl tab 1 mg (base equiv)	5	PA
AMITIZA CAP 8MCG	3	QL (180 caps / 30 days)
AMITIZA CAP 24MCG	3	QL (60 caps / 30 days)
cromolyn sodium oral conc 100 mg/5ml	5	
diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml	4	
diphenoxylate w/ atropine tab 2.5-0.025 mg	3	
GATTEX KIT 5MG	5	NM, LA, PA
LINZESS CAP 72MCG	4	QL (30 caps / 30 days)
LINZESS CAP 145MCG	4	QL (30 caps / 30 days)
LINZESS CAP 290MCG	4	QL (30 caps / 30 days)
loperamide hcl cap 2 mg	2	
misoprostol tab 100 mcg	2	
misoprostol tab 200 mcg	2	
MOVANTIK TAB 12.5MG	3	QL (60 tabs / 30 days)
MOVANTIK TAB 25MG	3	QL (30 tabs / 30 days)
RELISTOR INJ 8/0.4ML	5	PA
RELISTOR INJ 12/0.6ML	5	PA
sucralfate tab 1 gm	2	
ursodiol cap 300 mg	2	
ursodiol tab 250 mg	2	
ursodiol tab 500 mg	2	
XIFAXAN TAB 550MG	5	PA

PANCREATIC ENZYMES

CREON CAP 3000UNIT	3
CREON CAP 6000UNIT	3
CREON CAP 12000UNT	3

Drug Name	Drug Tier	Requirements/Limits
CREON CAP 24000UNT	3	
CREON CAP 36000UNT	3	
ZENPEP CAP 3000UNIT	4	
ZENPEP CAP 5000UNIT	4	
ZENPEP CAP 10000UNT	4	
ZENPEP CAP 15000UNT	4	
ZENPEP CAP 20000UNT	4	
ZENPEP CAP 25000	4	
ZENPEP CAP 40000	4	

PROTON PUMP INHIBITORS

DEXILANT CAP 30MG DR	4	QL (30 caps / 30 days)
DEXILANT CAP 60MG DR	4	QL (30 caps / 30 days)
<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>	2	QL (30 caps / 30 days), ST
<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>	2	QL (30 caps / 30 days), ST
<i>lansoprazole cap delayed release 15 mg</i>	2	QL (30 caps / 30 days)
<i>lansoprazole cap delayed release 30 mg</i>	2	QL (30 caps / 30 days)
<i>omeprazole cap delayed release 10 mg</i>	1	
<i>omeprazole cap delayed release 20 mg</i>	1	
<i>omeprazole cap delayed release 40 mg</i>	1	
<i>pantoprazole sodium ec tab 20 mg (base equiv)</i>	1	
<i>pantoprazole sodium ec tab 40 mg (base equiv)</i>	1	
<i>pantoprazole sodium for iv soln 40 mg (base equiv)</i>	2	

GENITOURINARY

BENIGN PROSTATIC HYPERPLASIA

alfuzosin hcl tab er 24hr 10 mg	1	QL (30 tabs / 30 days)
dutasteride cap 0.5 mg	2	QL (30 caps / 30 days)
dutasteride-tamsulosin hcl cap 0.5-0.4 mg	2	QL (30 caps / 30 days)
finasteride tab 5 mg	1	
tamsulosin hcl cap 0.4 mg	1	

MISCELLANEOUS

<i>bethanechol chloride tab 5 mg</i>	2	
<i>bethanechol chloride tab 10 mg</i>	2	
<i>bethanechol chloride tab 25 mg</i>	2	
<i>bethanechol chloride tab 50 mg</i>	2	
<i>potassium citrate tab er 5 meq (540 mg)</i>	2	
<i>potassium citrate tab er 10 meq (1080 mg)</i>	2	
<i>potassium citrate tab er 15 meq (1620 mg)</i>	2	

URINARY ANTISPASMODICS

MYRBETRIQ TAB 25MG	4	QL (30 tabs / 30 days)
MYRBETRIQ TAB 50MG	4	QL (30 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>oxybutynin chloride syrup 5 mg/5ml</i>	2	
<i>oxybutynin chloride tab 5 mg</i>	2	
<i>oxybutynin chloride tab er 24hr 5 mg</i>	2	QL (30 tabs / 30 days)
<i>oxybutynin chloride tab er 24hr 10 mg</i>	2	QL (60 tabs / 30 days)
<i>oxybutynin chloride tab er 24hr 15 mg</i>	2	QL (60 tabs / 30 days)
<i>tolterodine tartrate cap er 24hr 2 mg</i>	2	QL (30 caps / 30 days), ST
<i>tolterodine tartrate cap er 24hr 4 mg</i>	2	QL (30 caps / 30 days), ST
<i>tolterodine tartrate tab 1 mg</i>	2	ST
<i>tolterodine tartrate tab 2 mg</i>	2	ST
<i>TOVIAZ TAB 4MG</i>	3	QL (30 tabs / 30 days)
<i>TOVIAZ TAB 8MG</i>	3	QL (30 tabs / 30 days)
<i>trospium chloride tab 20 mg</i>	2	QL (60 tabs / 30 days)

VAGINAL ANTI-INFECTIVES

<i>clindamycin phosphate vaginal cream 2%</i>	2	
<i>metronidazole vaginal gel 0.75%</i>	2	
<i>terconazole vaginal cream 0.4%</i>	2	
<i>terconazole vaginal cream 0.8%</i>	2	
<i>terconazole vaginal suppos 80 mg</i>	2	
<i>vandazole gel 0.75%</i>	2	

HEMATOLOGIC

ANTICOAGULANTS

<i>ELIQUIS ST P TAB 5MG</i>	3	QL (74 tabs / 30 days)
<i>ELIQUIS TAB 2.5MG</i>	3	QL (60 tabs / 30 days)
<i>ELIQUIS TAB 5MG</i>	3	QL (74 tabs / 30 days)
<i>enoxaparin sodium inj 30 mg/0.3ml</i>	2	
<i>enoxaparin sodium inj 40 mg/0.4ml</i>	2	
<i>enoxaparin sodium inj 60 mg/0.6ml</i>	2	
<i>enoxaparin sodium inj 80 mg/0.8ml</i>	2	
<i>enoxaparin sodium inj 100 mg/ml</i>	2	
<i>enoxaparin sodium inj 120 mg/0.8ml</i>	2	
<i>enoxaparin sodium inj 150 mg/ml</i>	2	
<i>enoxaparin sodium inj 300 mg/3ml</i>	2	
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	2	
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	5	
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	5	
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	5	
<i>HEP SOD/NACL INJ 25000UNT</i>	3	
<i>heparin sodium (porcine) 100 unit/ml in d5w</i>	3	

Drug Name	Drug Tier	Requirements/Limits
heparin sodium (porcine) inj 1000 unit/ml	2	B/D
heparin sodium (porcine) inj 5000 unit/ml	2	B/D
heparin sodium (porcine) inj 10000 unit/ml	2	B/D
heparin sodium (porcine) inj 20000 unit/ml	2	B/D
heparin sodium (porcine)-dextrose iv sol 20000 unit/500ml-5%	3	
heparin sodium (porcine)-dextrose iv sol 25000 unit/500ml-5%	3	
HEPARIN/NACL INJ 25000UNT	3	
jantoven tab 1mg	1	
jantoven tab 2.5mg	1	
jantoven tab 2mg	1	
jantoven tab 3mg	1	
jantoven tab 4mg	1	
jantoven tab 5mg	1	
jantoven tab 6mg	1	
jantoven tab 7.5mg	1	
jantoven tab 10mg	1	
PRADAXA CAP 75MG	4	QL (60 caps / 30 days)
PRADAXA CAP 110MG	4	QL (60 caps / 30 days)
PRADAXA CAP 150MG	4	QL (60 caps / 30 days)
warfarin sodium tab 1 mg	1	
warfarin sodium tab 2 mg	1	
warfarin sodium tab 2.5 mg	1	
warfarin sodium tab 3 mg	1	
warfarin sodium tab 4 mg	1	
warfarin sodium tab 5 mg	1	
warfarin sodium tab 6 mg	1	
warfarin sodium tab 7.5 mg	1	
warfarin sodium tab 10 mg	1	
XARELTO STAR TAB 15/20MG	3	QL (51 tabs / 30 days)
XARELTO TAB 2.5MG	3	QL (60 tabs / 30 days)
XARELTO TAB 10MG	3	QL (30 tabs / 30 days)
XARELTO TAB 15MG	3	QL (30 tabs / 30 days)
XARELTO TAB 20MG	3	QL (30 tabs / 30 days)

HEMATOPOIETIC GROWTH FACTORS

PROCRIT INJ 2000/ML	3	NM, PA
PROCRIT INJ 3000/ML	3	NM, PA
PROCRIT INJ 4000/ML	3	NM, PA
PROCRIT INJ 10000/ML	3	NM, PA
PROCRIT INJ 20000/ML	5	NM, PA
PROCRIT INJ 40000/ML	5	NM, PA
ZARXIO INJ 300/0.5	5	NM, PA
ZARXIO INJ 480/0.8	5	NM, PA

Drug Name	Drug Tier	Requirements/Limits
MISCELLANEOUS		
<i>anagrelide hcl cap 0.5 mg</i>	2	
<i>anagrelide hcl cap 1 mg</i>	2	
BERINERT INJ 500UNIT	5	QL (24 boxes / 30 days), NM, LA, PA
<i>cilostazol tab 50 mg</i>	1	
<i>cilostazol tab 100 mg</i>	1	
DROXIA CAP 200MG	3	
DROXIA CAP 300MG	3	
DROXIA CAP 400MG	3	
ENDARI POW 5GM	5	NM, LA, PA
HAEGARDA INJ 2000UNIT	5	QL (30 vials / 30 days), NM, LA, PA
HAEGARDA INJ 3000UNIT	5	QL (20 vials / 30 days), NM, LA, PA
<i>icatibant acetate inj 30 mg/3ml (base equivalent)</i>	5	QL (9 syringes / 30 days), NM, PA
<i>pentoxifylline tab er 400 mg</i>	1	
PROMACTA PAK 25MG	5	QL (180 packets / 30 days), NM, LA, PA
PROMACTA POW 12.5MG	5	QL (360 packets / 30 days), NM, LA, PA
PROMACTA TAB 12.5MG	5	QL (30 tabs / 30 days), NM, LA, PA
PROMACTA TAB 25MG	5	QL (30 tabs / 30 days), NM, LA, PA
PROMACTA TAB 50MG	5	QL (60 tabs / 30 days), NM, LA, PA
PROMACTA TAB 75MG	5	QL (60 tabs / 30 days), NM, LA, PA
<i>tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)</i>	2	
<i>tranexamic acid tab 650 mg</i>	2	
PLATELET AGGREGATION INHIBITORS		
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	2	
BRILINTA TAB 60MG	3	
BRILINTA TAB 90MG	3	
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	1	
<i>prasugrel hcl tab 5 mg (base equiv)</i>	2	
<i>prasugrel hcl tab 10 mg (base equiv)</i>	2	
IMMUNOLOGIC AGENTS		
DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDS)		
ENBREL INJ 25/0.5ML	5	QL (16 syringes / 28 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
ENBREL INJ 25MG	5	QL (16 vials / 28 days), NM, PA
ENBREL INJ 50MG/ML	5	QL (8 syringes / 28 days), NM, PA
ENBREL MINI INJ 50MG/ML	5	QL (8 injections / 28 days), NM, PA
ENBREL SRCLK INJ 50MG/ML	5	QL (8 injections / 28 days), NM, PA
HUMIRA INJ 10/0.1ML	5	QL (2 injections / 28 days), NM, PA
HUMIRA INJ 10MG/0.2	5	QL (2 syringes / 28 days), NM, PA
HUMIRA INJ 20/0.2ML	5	QL (2 injections / 28 days), NM, PA
HUMIRA INJ 40/0.4ML	5	QL (6 injections / 28 days), NM, PA
HUMIRA KIT 20MG/0.4	5	QL (2 syringes / 28 days), NM, PA
HUMIRA KIT 40MG/0.8	5	QL (6 syringes / 28 days), NM, PA
HUMIRA PEDIA INJ CROHNS	5	NM, PA
HUMIRA PEN INJ 40/0.4ML	5	QL (6 pens / 28 days), NM, PA
HUMIRA PEN INJ 40MG/0.8	5	QL (6 pens / 28 days), NM, PA
HUMIRA PEN INJ CD/UC/HS	5	NM, PA
HUMIRA PEN INJ PS/UV	5	NM, PA
HUMIRA PEN KIT CD/UC/HS	5	NM, PA
HUMIRA PEN KIT PS/UV	5	NM, PA
<i>hydroxychloroquine sulfate tab 200 mg</i>	2	
<i>leflunomide tab 10 mg</i>	2	QL (30 tabs / 30 days)
<i>leflunomide tab 20 mg</i>	2	QL (30 tabs / 30 days)
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	2	
REMICADE INJ 100MG	5	NM, PA
RENFLEXIS INJ 100MG	5	NM, LA, PA
RINVOQ TAB 15MG ER	5	QL (30 tabs / 30 days), NM, PA
SKYRIZI INJ 150DOSE	5	QL (7 kits / year), NM, PA
STELARA INJ 45MG/0.5	5	QL (1 vial / 28 days), NM, LA, PA
STELARA INJ 45MG/0.5	5	QL (1 syringe / 28 days), NM, PA
STELARA INJ 90MG/ML	5	QL (1 syringe / 28 days), NM, PA
XATMEP SOL 2.5MG/ML	4	B/D

83 You can find information on what the symbols and abbreviations on this table mean by going to page number IV.

Drug Name	Drug Tier	Requirements/Limits
XELJANZ TAB 5MG	5	QL (60 tabs / 30 days), NM, PA
XELJANZ TAB 10MG	5	QL (60 tabs / 30 days), NM, PA
XELJANZ XR TAB 11MG	5	QL (30 tabs / 30 days), NM, PA
XELJANZ XR TAB 22MG	5	QL (30 tabs / 30 days), NM, PA

IMMUNOGLOBULINS

BIVIGAM INJ 10%	5	NM, PA
FLEBOGAMMA INJ 5GM/50ML	5	NM, PA
FLEBOGAMMA INJ 10/100ML	5	NM, PA
FLEBOGAMMA INJ 10/200ML	5	NM, PA
FLEBOGAMMA INJ 20/200ML	5	NM, PA
FLEBOGAMMA INJ 20/400ML	5	NM, PA
FLEBOGAMMA INJ DIF 5%	5	NM, PA
GAMASTAN INJ	3	B/D, NM
GAMMAGARD INJ 1GM/10ML	5	NM, PA
GAMMAGARD INJ 2.5GM/25	5	NM, PA
GAMMAGARD INJ 5GM/50ML	5	NM, PA
GAMMAGARD INJ 10GM/100	5	NM, PA
GAMMAGARD INJ 20GM/200	5	NM, PA
GAMMAGARD INJ 30GM/300	5	NM, PA
GAMMAGARD SD INJ 5GM HU	5	NM, PA
GAMMAGARD SD INJ 10GM HU	5	NM, PA
GAMMAKED INJ 1GM/10ML	5	NM, PA
GAMMAKED INJ 5GM/50ML	5	NM, PA
GAMMAKED INJ 10GM/100	5	NM, PA
GAMMAKED INJ 20GM/200	5	NM, PA
GAMMAPLEX INJ 5%	5	NM, PA
GAMMAPLEX INJ 10%	5	NM, PA
GAMUNEX-C INJ 1GM/10ML	5	NM, PA
GAMUNEX-C INJ 2.5GM/25	5	NM, PA
GAMUNEX-C INJ 5GM/50ML	5	NM, PA
GAMUNEX-C INJ 10GM/100	5	NM, PA
GAMUNEX-C INJ 20GM/200	5	NM, PA
GAMUNEX-C INJ 40/400ML	5	NM, PA
OCTAGAM INJ 1GM	5	NM, PA
OCTAGAM INJ 2.5GM	5	NM, PA
OCTAGAM INJ 2GM/20ML	5	NM, PA
OCTAGAM INJ 5GM	5	NM, PA
OCTAGAM INJ 5GM/50ML	5	NM, PA
OCTAGAM INJ 10/100ML	5	NM, PA
OCTAGAM INJ 10GM	5	NM, PA
OCTAGAM INJ 20/200ML	5	NM, PA

Drug Name	Drug Tier	Requirements/Limits
OCTAGAM INJ 25GM	5	NM, PA
OCTAGAM INJ 30/300ML	5	NM, PA
PANZYGA SOL 1GM/10ML	5	NM, PA
PANZYGA SOL 2.5/25ML	5	NM, PA
PANZYGA SOL 5GM/50ML	5	NM, PA
PANZYGA SOL 10/100ML	5	NM, PA
PANZYGA SOL 20/200ML	5	NM, PA
PANZYGA SOL 30/300ML	5	NM, PA
PRIVIGEN INJ 5 GRAMS	5	NM, PA
PRIVIGEN INJ 10GRAMS	5	NM, PA
PRIVIGEN INJ 20GRAMS	5	NM, PA
PRIVIGEN INJ 40GRAMS	5	NM, PA
IMMUNOMODULATORS		
ACTIMMUNE INJ 2MU/0.5	5	NM, LA, PA
ARCALYST INJ 220MG	5	NM, PA
INTRON A INJ 10MU	5	B/D, NM
INTRON A INJ 18MU	5	B/D, NM
INTRON A INJ 25MU	5	B/D, NM
INTRON A INJ 50MU	5	B/D, NM
IMMUNOSUPPRESSANTS		
<i>azathioprine tab 50 mg</i>	2	B/D
BENLYSTA INJ 120MG	5	NM, PA
BENLYSTA INJ 200MG/ML	5	NM, PA
BENLYSTA INJ 400MG	5	NM, PA
<i>cyclosporine cap 25 mg</i>	2	B/D, NM
<i>cyclosporine cap 100 mg</i>	2	B/D, NM
<i>cyclosporine iv soln 50 mg/ml</i>	2	B/D, NM
<i>cyclosporine modified cap 25 mg</i>	2	B/D, NM
<i>cyclosporine modified cap 50 mg</i>	2	B/D, NM
<i>cyclosporine modified cap 100 mg</i>	2	B/D, NM
<i>cyclosporine modified oral soln 100 mg/ml</i>	2	B/D, NM
<i>everolimus tab 0.5 mg</i>	5	B/D, NM
<i>everolimus tab 0.25 mg</i>	2	B/D, NM
<i>everolimus tab 0.75 mg</i>	5	B/D, NM
<i>gengraf cap 25mg</i>	2	B/D, NM
<i>gengraf cap 100mg</i>	2	B/D, NM
<i>gengraf sol 100mg/ml</i>	2	B/D, NM
<i>mycophenolate mofetil cap 250 mg</i>	2	B/D, NM
<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	5	B/D, NM
<i>mycophenolate mofetil tab 500 mg</i>	2	B/D, NM
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	2	B/D, NM
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	2	B/D, NM

Drug Name	Drug Tier	Requirements/Limits
NULOJIX INJ 250MG	5	B/D, NM
PROGRAF GRA 0.2MG	4	B/D, NM
PROGRAF GRA 1MG	4	B/D, NM
SANDIMMUNE SOL 100MG/ML	3	B/D, NM
<i>sirolimus oral soln 1 mg/ml</i>	5	B/D, NM
<i>sirolimus tab 0.5 mg</i>	2	B/D, NM
<i>sirolimus tab 1 mg</i>	2	B/D, NM
<i>sirolimus tab 2 mg</i>	5	B/D, NM
<i>tacrolimus cap 0.5 mg</i>	2	B/D, NM
<i>tacrolimus cap 1 mg</i>	2	B/D, NM
<i>tacrolimus cap 5 mg</i>	2	B/D, NM
ZORTRESS TAB 0.5MG	5	B/D, NM
ZORTRESS TAB 0.25MG	5	B/D, NM
ZORTRESS TAB 0.75MG	5	B/D, NM
ZORTRESS TAB 1MG	5	B/D, NM

VACCINES

ACTHIB INJ	3	
ADACEL INJ	3	
BCG VACCINE INJ	3	
BEXSERO INJ	3	
BOOSTRIX INJ	3	
DAPTACEL INJ	3	
DIP/TET PED INJ 25-5LFU	3	B/D
ENGERIX-B INJ 10/0.5ML	3	B/D
ENGERIX-B INJ 20MCG/ML	3	B/D
GARDASIL 9 INJ	3	
HAVRIX INJ 720UNIT	3	
HAVRIX INJ 1440UNIT	3	
HIBERIX SOL 10MCG	3	
IMOVAX RABIE INJ 2.5/ML	3	B/D
INFANRIX INJ	3	
IPOL INJ INACTIVE	3	
IXIARO INJ	3	
KINRIX INJ	3	
M-M-R II INJ	3	
MENACTRA INJ	3	
MENQUADFI INJ	3	
MENVEO INJ	3	
PEDIARIX INJ 0.5ML	3	
PEDVAX HIB INJ	3	
PENTACEL INJ	3	
PROQUAD INJ	3	
QUADRACEL INJ	3	
RABAVERT INJ	3	B/D
RECOMBIVIA HB INJ 5MCG/0.5	3	B/D

Drug Name	Drug Tier	Requirements/Limits
RECOMBIVA HB INJ 10MCG/ML	3	B/D
RECOMBIVA-HB INJ 40MCG/ML	3	B/D
ROTARIX SUS	3	
ROTAQUE SOL	3	
SHINGRIX INJ 50/0.5ML	3	QL (2 vials per lifetime)
TDVAX INJ 2-2 LF	3	B/D
TENIVAC INJ 5-2LF	3	B/D
TRUMENBA INJ	3	
TWINRIX INJ	3	
TYPHIM VI INJ	3	
VAQTA INJ 25/0.5ML	3	
VAQTA INJ 50UNT/ML	3	
VARIVAX INJ	3	
YF-VAX INJ	3	
ZOSTAVAX INJ	3	QL (1 vial per lifetime)

NUTRITIONAL/SUPPLEMENTS

ELECTROLYTES

<i>klor-con 8 tab 8meq er</i>	1
<i>klor-con 10 tab 10meq er</i>	1
MAGNESIUM SU INJ 2GM/50ML	3
MAGNESIUM SU INJ 4G/100ML	3
MAGNESIUM SU INJ 20/500ML	3
MAGNESIUM SU INJ 40G/1000	3
MAGNESIUM SU INJ 80MG/ML	3
<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i>	3
<i>magnesium sulfate inj 50%</i>	3
<i>magnesium sulfate iv soln 2 gm/50ml (40 mg/ml)</i>	3
<i>magnesium sulfate iv soln 4 gm/50ml (80 mg/ml)</i>	3
<i>magnesium sulfate iv soln 4 gm/100ml (40 mg/ml)</i>	3
<i>magnesium sulfate iv soln 20 gm/500ml (40 mg/ml)</i>	3
<i>magnesium sulfate iv soln 40 gm/1000ml (40 mg/ml)</i>	3
MG SO4/D5W INJ 10MG/ML	3
<i>potassium chloride cap er 8 meq</i>	2
<i>potassium chloride cap er 10 meq</i>	2
<i>potassium chloride microencapsulated crys er tab 10 meq</i>	1
<i>potassium chloride microencapsulated crys er tab 15 meq</i>	1
<i>potassium chloride microencapsulated crys er tab 20 meq</i>	1

Drug Name	Drug Tier	Requirements/Limits
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	2	
<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	2	
<i>potassium chloride powder packet 20 meq</i>	2	
<i>potassium chloride tab er 8 meq (600 mg)</i>	1	
<i>potassium chloride tab er 10 meq</i>	1	
<i>potassium chloride tab er 20 meq (1500 mg)</i>	1	
<i>sodium chloride inj 2.5 meq/ml (14.6%)</i>	2	
<i>sodium fluoride chew; tab; 1.1 (0.5 f) mg/ml soln</i>	2	
TPN ELECTROL INJ	4	B/D

IV NUTRITION

AMINOSYN II INJ 10%	4	B/D
AMINOSYN-PF INJ 7%	4	B/D
CLINIMIX INJ 4.25/D5W	4	B/D
CLINIMIX INJ 4.25/D10	4	B/D
CLINIMIX INJ 5%/D15W	4	B/D
CLINIMIX INJ 5%/D20W	4	B/D
<i>clinisol sf inj 15%</i>	2	B/D
CLINOLIPID EMU 20%	4	B/D
FREAMINE HBC INJ 6.9%	4	B/D
FREAMINE III INJ 10%	4	B/D
<i>hepatamine sol 8%</i>	4	B/D
INTRALIPID INJ 20%	4	B/D
INTRALIPID INJ 30%	4	B/D
NEPHRAMINE INJ 5.4%	4	B/D
NUTRILIPID EMU 20%	4	B/D
<i>plenamine inj 15%</i>	2	B/D
PREMASOL SOL 10%	4	B/D
PROCALAMINE INJ 3%	4	B/D
PROSOL INJ 20%	4	B/D
TRAVASOL INJ 10%	4	B/D
TROPHAMINE INJ 10%	4	B/D

IV REPLACEMENT SOLUTIONS

D5W/LYTES INJ #48	3	
D5W/NACL INJ 0.3%	4	
D10W/NACL INJ 0.2%	3	
<i>dextrose 2.5% w/ sodium chloride 0.45%</i>	2	
<i>dextrose 5% in lactated ringers</i>	2	
<i>dextrose 5% w/ sodium chloride 0.2%</i>	2	
<i>dextrose 5% w/ sodium chloride 0.9%</i>	2	
<i>dextrose 5% w/ sodium chloride 0.45%</i>	2	
<i>dextrose 10% w/ sodium chloride 0.45%</i>	2	

Drug Name	Drug Tier	Requirements/Limits
dextrose inj 5%	2	
dextrose inj 10%	2	
dextrose inj 50%	2	
dextrose inj 70%	2	
ISOLYTE-P INJ /D5W	4	
ISOLYTE-S INJ	4	
kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj	2	
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.2% inj	2	
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj	2	
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj	2	
kcl 20 meq/l (0.15%) in nacl 0.9% inj	2	
kcl 20 meq/l (0.15%) in nacl 0.45% inj	2	
kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj	2	
kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj	2	
kcl 40 meq/l (0.3%) in nacl 0.9% inj	2	
KCL/D5W/NAACL INJ 0.3/0.9%	4	
KCL/D5W/NAACL INJ 0.15/0.2	4	
lactated ringer's solution	2	
NORMOSOL -M INJ /D5W	4	
PLASMA-LYTE INJ -148	4	
PLASMA-LYTE INJ -A	4	
POT CHLORIDE INJ 10MEQ	2	
POT CHLORIDE INJ 20MEQ	2	
POT CHLORIDE INJ 40MEQ	2	
potassium chloride 20 meq/l (0.15%) in dextrose 5% inj	2	
potassium chloride inj 2 meq/ml	2	
sodium chloride iv soln 0.9%	2	
sodium chloride iv soln 0.45%	2	
sodium chloride iv soln 3%	2	
sodium chloride iv soln 5%	2	
VITAMINS		
calcitriol cap 0.5 mcg	2	B/D
calcitriol cap 0.25 mcg	2	B/D
calcitriol inj 1 mcg/ml	2	B/D
calcitriol oral soln 1 mcg/ml	2	B/D
M-NATAL PLUS TAB	3	
paricalcitol cap 1 mcg	2	B/D
paricalcitol cap 2 mcg	2	B/D

Drug Name	Drug Tier	Requirements/Limits
<i>paricalcitol cap 4 mcg</i>	2	B/D
PNV FOLIC AC TAB + IRON	3	
PRENATAL PLUS	3	
PRENATAL TAB 27-1MG	3	
PRENATAL TAB PLUS	3	
PRENATAL VIT TAB LOW IRON	3	
RAYALDEE CAP 30MCG	5	
TRICARE TAB PRENATAL	3	

OPHTHALMIC

ANTI-INFECTIVE/ANTI-INFLAMMATORY

<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	2	
BLEPHAMIDE OIN S.O.P.	4	
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	1	
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	2	
<i>neomycin-polymyxin-hc ophth susp</i>	2	
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	2	
TOBRADEX OIN 0.3-0.1%	3	
TOBRADEX ST SUS 0.3-0.05	3	
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	2	
ZYLET SUS 0.5-0.3%	3	

ANTI-INFECTIVES

<i>AZASITE SOL 1%</i>	4	
<i>bacitracin ophth oint 500 unit/gm</i>	2	
<i>bacitracin-polymyxin b ophth oint</i>	1	
<i>BESIVANCE SUS 0.6%</i>	3	
<i>CILOXAN OIN 0.3% OP</i>	3	
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	1	
<i>erythromycin ophth oint 5 mg/gm</i>	1	
<i>gatifloxacin ophth soln 0.5%</i>	2	
<i>gentak oin 0.3% op</i>	2	
<i>gentamicin sulfate ophth soln 0.3%</i>	1	
<i>MOXEZA SOL 0.5%</i>	3	
<i>moxifloxacin hcl ophth soln 0.5% (base eq) (2 times daily)</i>	2	
<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i>	2	
<i>NATACYN SUS 5% OP</i>	4	
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	2	
<i>ofloxacin ophth soln 0.3%</i>	2	
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	1	
<i>sulfacetamide sodium ophth oint 10%</i>	2	
<i>sulfacetamide sodium ophth soln 10%</i>	2	
<i>tobramycin ophth soln 0.3%</i>	1	
<i>trifluridine ophth soln 1%</i>	2	
ZIRGAN GEL 0.15%	4	
ANTI-INFLAMMATORIES		
ALREX SUS 0.2%	3	
<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i>	2	
BROMSITE DRO 0.075%	4	
<i>dexamethasone sodium phosphate ophth soln 0.1%</i>	2	
<i>diclofenac sodium ophth soln 0.1%</i>	2	
DUREZOL EMU 0.05%	3	
FLAREX SUS 0.1% OP	4	
<i>fluorometholone ophth susp 0.1%</i>	2	
<i>flurbiprofen sodium ophth soln 0.03%</i>	2	
ILEVRO DRO 0.3% OP	3	
<i>ketorolac tromethamine ophth soln 0.4%</i>	2	
<i>ketorolac tromethamine ophth soln 0.5%</i>	2	
LOTEMAX GEL 0.5%	3	
LOTEMAX OIN 0.5%	3	
<i>loteprednol etabonate ophth susp 0.5%</i>	2	
PRED SOD PHO SOL 1% OP	3	
<i>prednisolone acetate ophth susp 1%</i>	2	
PROLENSA SOL 0.07%	3	
ANTIALLERGICS		
<i>azelastine hcl ophth soln 0.05%</i>	2	
BEPREVE DRO 1.5%	3	
<i>cromolyn sodium ophth soln 4%</i>	1	
LASTACAFT SOL 0.25%	4	
<i>olopatadine hcl ophth soln 0.2% (base equivalent)</i>	2	
PAZEO DRO 0.7%	3	
ZERVIADE DRO 0.24%	4	
ANTIGLAUCOMA		
ALPHAGAN P SOL 0.1%	3	
AZOPT SUS 1% OP	3	
<i>betaxolol hcl ophth soln 0.5%</i>	2	
BETOPTIC-S SUS 0.25% OP	3	

Drug Name	Drug Tier	Requirements/Limits
<i>brimonidine tartrate ophth soln 0.2%</i>	1	
<i>brimonidine tartrate ophth soln 0.15%</i>	2	
<i>carteolol hcl ophth soln 1%</i>	2	
COMBIGAN SOL 0.2/0.5%	3	
<i>dorzolamide hcl ophth soln 2%</i>	1	
<i>dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml</i>	1	
<i>latanoprost ophth soln 0.005%</i>	1	
<i>levobunolol hcl ophth soln 0.5%</i>	1	
LUMIGAN SOL 0.01%	3	
PHOSPHOLINE SOL 0.125%OP	4	
<i>pilocarpine hcl ophth soln 1%</i>	2	
<i>pilocarpine hcl ophth soln 2%</i>	2	
<i>pilocarpine hcl ophth soln 4%</i>	2	
RHOPRESSA SOL 0.02%	3	
SIMBRINZA SUS 1-0.2%	3	
<i>timolol maleate ophth gel forming soln 0.5%</i>	2	
<i>timolol maleate ophth gel forming soln 0.25%</i>	2	
<i>timolol maleate ophth soln 0.5%</i>	1	
<i>timolol maleate ophth soln 0.5% (once-daily)</i>	2	
<i>timolol maleate ophth soln 0.25%</i>	1	
<i>travoprost ophth soln 0.004% (benzalkonium free) (bak free)</i>	2	

MISCELLANEOUS

ATROPINE SUL SOL 1% OP	3	
CYSTARAN SOL 0.44%	5	NM, LA, PA
<i>proparacaine hcl ophth soln 0.5%</i>	2	
RESTASIS EMU 0.05%	3	QL (60 single use vials / 30 days)
RESTASIS MUL EMU 0.05%	3	QL (1 bottle / 30 days)

RESPIRATORY

ANTICHOLINERGIC/BETA AGONIST COMBINATIONS

ANORO ELLIPT AER 62.5-25	3	QL (60 blisters / 30 days)
BEVESPI AER 9-4.8MCG	3	QL (1 inhaler / 30 days)
BREZTRI AERO AER SPHERE	3	QL (1 inhaler / 30 days)
BREZTRI AERO AER SPHERE	3	QL (4 inhalers / 28 days)
COMBIVENT AER 20-100	4	QL (2 inhalers / 30 days)
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	2	B/D

Drug Name	Drug Tier	Requirements/Limits
TRELEGY AER ELLIPTA	3	QL (60 blisters / 30 days); 100/62.5/25 mcg
TRELEGY AER ELLIPTA	3	QL (60 blisters / 30 days); 200/62.5/25 mcg
ANTICHOLINERGICS		
ATROVENT HFA AER 17MCG	4	QL (2 inhalers / 30 days)
INCRUSE ELPT INH 62.5MCG	3	QL (30 blisters / 30 days)
<i>ipratropium bromide inhal soln 0.02%</i>	2	B/D
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	2	
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	2	
ANTIHISTAMINES		
<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	2	
<i>azelastine hcl nasal spray 0.15% (205.5 mcg/spray)</i>	2	
<i>cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)</i>	1	
<i>cyproheptadine hcl syrup 2 mg/5ml</i>	3	PA; PA if 70 years and older
<i>cyproheptadine hcl tab 4 mg</i>	3	PA; PA if 70 years and older
<i>diphenhydramine hcl inj 50 mg/ml</i>	2	
<i>hydroxyzine hcl im soln 25 mg/ml</i>	4	PA; PA if 70 years and older
<i>hydroxyzine hcl im soln 50 mg/ml</i>	4	PA; PA if 70 years and older
<i>hydroxyzine hcl syrup 10 mg/5ml</i>	3	PA; PA if 70 years and older
<i>hydroxyzine hcl tab 10 mg</i>	2	PA; PA if 70 years and older
<i>hydroxyzine hcl tab 25 mg</i>	2	PA; PA if 70 years and older
<i>hydroxyzine hcl tab 50 mg</i>	2	PA; PA if 70 years and older
<i>hydroxyzine pamoate cap 25 mg</i>	2	PA; PA if 70 years and older
<i>hydroxyzine pamoate cap 50 mg</i>	2	PA; PA if 70 years and older
<i>levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)</i>	2	
<i>levocetirizine dihydrochloride tab 5 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
BETA AGONISTS		
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	2	QL (2 inhalers / 30 days); (generic of Proair HFA)
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	2	QL (2 inhalers / 30 days); (generic of Ventolin HFA)
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	2	B/D
<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	2	B/D
<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i>	2	B/D
<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	2	B/D
<i>albuterol sulfate syrup 2 mg/5ml</i>	2	
<i>albuterol sulfate tab 2 mg</i>	2	
<i>albuterol sulfate tab 4 mg</i>	2	
<i>albuterol sulfate tab er 12hr 4 mg</i>	2	
<i>albuterol sulfate tab er 12hr 8 mg</i>	2	
<i>levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)</i>	2	B/D
<i>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)</i>	2	B/D
<i>levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)</i>	2	QL (2 inhalers / 30 days)
<i>SEREVENT DIS AER 50MCG</i>	3	QL (60 inhalations / 30 days)
<i>terbutaline sulfate tab 2.5 mg</i>	2	
<i>terbutaline sulfate tab 5 mg</i>	2	
<i>VENTOLIN HFA AER</i>	3	QL (2 inhalers / 30 days)
LEUKOTRIENE MODULATORS		
<i>montelukast sodium chew tab 4 mg (base equiv)</i>	2	
<i>montelukast sodium chew tab 5 mg (base equiv)</i>	2	
<i>montelukast sodium oral granules packet 4 mg (base equiv)</i>	2	
<i>montelukast sodium tab 10 mg (base equiv)</i>	1	
<i>zafirlukast tab 10 mg</i>	2	
<i>zafirlukast tab 20 mg</i>	2	
MAST CELL STABILIZERS		
<i>cromolyn sodium soln nebu 20 mg/2ml</i>	2	B/D
MISCELLANEOUS		
<i>acetylcysteine inhal soln 10%</i>	2	B/D

Drug Name	Drug Tier	Requirements/Limits
<i>acetylcysteine inhal soln 20%</i>	2	B/D
ARALAST NP INJ 500MG	5	NM, LA, PA
ARALAST NP INJ 1000MG	5	NM, LA, PA
DALIRESP TAB 250MCG	4	
DALIRESP TAB 500MCG	4	
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	2	(generic of Adrenaclick)
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	2	(generic of EpiPen)
<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i>	2	(generic of EpiPen)
<i>epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)</i>	2	(generic of Adrenaclick)
ESBRIET CAP 267MG	5	NM, PA
ESBRIET TAB 267MG	5	NM, PA
ESBRIET TAB 801MG	5	NM, PA
FASENRA INJ 30MG/ML	5	NM, LA, PA
FASENRA PEN INJ 30MG/ML	5	NM, LA, PA
KALYDECO PAK 25MG	5	NM, PA
KALYDECO PAK 50MG	5	NM, PA
KALYDECO PAK 75MG	5	NM, PA
KALYDECO TAB 150MG	5	NM, PA
NUCALA INJ 100MG	5	NM, LA, PA
NUCALA INJ 100MG/ML	5	NM, LA, PA
OFEV CAP 100MG	5	NM, PA
OFEV CAP 150MG	5	NM, PA
ORKAMBI GRA 100-125	5	NM, PA
ORKAMBI GRA 150-188	5	NM, PA
ORKAMBI TAB 100-125	5	NM, PA
ORKAMBI TAB 200-125	5	NM, PA
PROLASTIN-C INJ 1000MG	5	NM, LA, PA
PULMOZYME SOL 1MG/ML	5	NM, PA
SYMDEKO TAB 50-75MG	5	NM, LA, PA
SYMDEKO TAB 100-150	5	NM, LA, PA
SYMJEPI INJ 0.3MG	4	
SYMJEPI INJ 0.15MG	4	
THEO-24 CAP 100MG CR	4	
THEO-24 CAP 200MG CR	4	
THEO-24 CAP 300MG CR	4	
THEO-24 CAP 400MG ER	4	
<i>theophylline soln 80 mg/15ml</i>	2	
<i>theophylline tab er 12hr 300 mg</i>	2	
<i>theophylline tab er 12hr 450 mg</i>	2	
<i>theophylline tab er 24hr 400 mg</i>	2	
<i>theophylline tab er 24hr 600 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
TRIKAFTA TAB	5	NM, LA, PA
XOLAIR INJ 75/0.5	5	NM, LA, PA
XOLAIR INJ 150MG/ML	5	NM, LA, PA
XOLAIR SOL 150MG	5	NM, LA, PA
ZEMAIRA INJ 1000MG	5	NM, LA, PA

NASAL STEROIDS

<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	2	QL (3 bottles / 30 days)
<i>fluticasone propionate nasal susp 50 mcg/act</i>	1	QL (1 bottle / 30 days)

STEROID INHALANTS

ARNUITY ELPT INH 50MCG	3	QL (30 inhalations / 30 days)
ARNUITY ELPT INH 100MCG	3	QL (30 inhalations / 30 days)
ARNUITY ELPT INH 200MCG	3	QL (30 inhalations / 30 days)
<i>budesonide inhalation susp 0.5 mg/2ml</i>	2	B/D
<i>budesonide inhalation susp 0.25 mg/2ml</i>	2	B/D
FLOVENT DISK AER 50MCG	3	QL (120 inhalations / 30 days)
FLOVENT DISK AER 100MCG	3	QL (120 inhalations / 30 days)
FLOVENT DISK AER 250MCG	3	QL (240 inhalations / 30 days)
FLOVENT HFA AER 44MCG	3	QL (2 inhalers / 30 days)
FLOVENT HFA AER 110MCG	3	QL (2 inhalers / 30 days)
FLOVENT HFA AER 220MCG	3	QL (2 inhalers / 30 days)
PULMICORT INH 90MCG	4	QL (2 inhalers / 30 days)
PULMICORT INH 180MCG	4	QL (2 inhalers / 30 days)

STEROID/BETA-AGONIST COMBINATIONS

ADVAIR DISKU AER 100/50	3	QL (60 inhalations / 30 days)
ADVAIR DISKU AER 250/50	3	QL (60 inhalations / 30 days)
ADVAIR DISKU AER 500/50	3	QL (60 inhalations / 30 days)
ADVAIR HFA AER 45/21	3	QL (1 inhaler / 30 days)
ADVAIR HFA AER 115/21	3	QL (1 inhaler / 30 days)
ADVAIR HFA AER 230/21	3	QL (1 inhaler / 30 days)
BREO ELLIPTA INH 100-25	3	QL (60 blisters / 30 days)

Drug Name	Drug Tier	Requirements/Limits
BREO ELLIPTA INH 200-25	3	QL (60 blisters / 30 days)
SYMBICORT AER 80-4.5	3	QL (1 inhaler / 30 days)
SYMBICORT AER 160-4.5	3	QL (1 inhaler / 30 days)

TOPICAL

DERMATOLOGY, ACNE

<i>amnesteem cap 10mg</i>	2	PA
<i>amnesteem cap 20mg</i>	2	PA
<i>amnesteem cap 40mg</i>	2	PA
<i>avita cre 0.025%</i>	2	QL (45 grams / 30 days), PA
<i>avita gel 0.025%</i>	2	QL (45 grams / 30 days), PA
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	2	
<i>claravis cap 10mg</i>	2	PA
<i>claravis cap 20mg</i>	2	PA
<i>claravis cap 30mg</i>	2	PA
<i>claravis cap 40mg</i>	2	PA
<i>clindamycin phosphate gel 1%</i>	2	QL (75 grams / 30 days)
<i>clindamycin phosphate lotion 1%</i>	2	
<i>clindamycin phosphate soln 1%</i>	2	QL (60 mL / 30 days)
<i>erythromycin gel 2%</i>	2	
<i>erythromycin pads 2%</i>	2	
<i>erythromycin soln 2%</i>	2	
<i>isotretinoin cap 10 mg</i>	2	PA
<i>isotretinoin cap 20 mg</i>	2	PA
<i>isotretinoin cap 30 mg</i>	2	PA
<i>isotretinoin cap 40 mg</i>	2	PA
<i>myorisan cap 10mg</i>	2	PA
<i>myorisan cap 20mg</i>	2	PA
<i>myorisan cap 30mg</i>	2	PA
<i>myorisan cap 40mg</i>	2	PA
<i>sulfacetamide sodium lotion 10% (acne)</i>	2	
<i>tretinoin cream 0.1%</i>	2	QL (45 grams / 30 days), PA
<i>tretinoin cream 0.05%</i>	2	QL (45 grams / 30 days), PA
<i>tretinoin cream 0.025%</i>	2	QL (45 grams / 30 days), PA
<i>tretinoin gel 0.01%</i>	2	QL (45 grams / 30 days), PA
<i>tretinoin gel 0.025%</i>	2	QL (45 grams / 30 days), PA
<i>zenatane cap 10mg</i>	2	PA
<i>zenatane cap 20mg</i>	2	PA

Drug Name	Drug Tier	Requirements/Limits
zenatane cap 30mg	2	PA
zenatane cap 40mg	2	PA
DERMATOLOGY, ANTIBIOTICS		
gentamicin sulfate cream 0.1%	2	
gentamicin sulfate oint 0.1%	2	
mupirocin oint 2%	1	QL (220 grams / 30 days)
silver sulfadiazine cream 1%	2	
ssd cre 1%	2	
SULFAMYLON CRE 85MG/GM	4	
DERMATOLOGY, ANTIFUNGALS		
ciclopirox olamine cream 0.77% (base equiv)	2	QL (90 grams / 30 days)
ciclopirox olamine susp 0.77% (base equiv)	2	QL (60 mL / 30 days)
clotrimazole cream 1%	2	
clotrimazole soln 1%	2	QL (30 mL / 30 days)
clotrimazole w/ betamethasone cream 1-0.05%	2	
ketoconazole cream 2%	2	QL (60 grams / 30 days)
nyamyc pow 100000	2	QL (60 grams / 30 days)
nystatin cream 100000 unit/gm	2	
nystatin oint 100000 unit/gm	2	
nystatin topical powder 100000 unit/gm	2	QL (60 grams / 30 days)
nystop pow 100000	2	QL (60 grams / 30 days)
DERMATOLOGY, ANTIPSORIATICS		
acitretin cap 10 mg	2	PA
acitretin cap 17.5 mg	2	PA
acitretin cap 25 mg	2	PA
calcipotriene cream 0.005%	2	QL (120 grams / 30 days), PA
calcipotriene oint 0.005%	2	QL (120 grams / 30 days), PA
calcipotriene soln 0.005% (50 mcg/ml)	2	QL (120 mL / 30 days), PA
tazarotene cream 0.1%	2	QL (60 grams / 30 days), PA
TAZORAC CRE 0.05%	4	QL (60 grams / 30 days), PA
DERMATOLOGY, ANTISEBORRHEICS		
ketoconazole shampoo 2%	1	
selenium sulfide lotion 2.5%	1	
DERMATOLOGY, CORTICOSTEROIDS		
ala-cort cre 1%	1	
ala-cort cre 2.5%	1	

Drug Name	Drug Tier	Requirements/Limits
<i>alclometasone dipropionate cream 0.05%</i>	2	
<i>alclometasone dipropionate oint 0.05%</i>	2	
<i>betamethasone dipropionate augmented cream 0.05%</i>	2	
<i>betamethasone dipropionate augmented gel 0.05%</i>	2	
<i>betamethasone dipropionate augmented lotion 0.05%</i>	2	
<i>betamethasone dipropionate augmented oint 0.05%</i>	2	
<i>betamethasone dipropionate cream 0.05%</i>	2	
<i>betamethasone dipropionate lotion 0.05%</i>	2	
<i>betamethasone dipropionate oint 0.05%</i>	2	
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	2	
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	2	
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	2	
ENSTILAR AER	4	QL (120 grams / 30 days), PA
<i>fluocinolone acetonide cream 0.01%</i>	2	
<i>fluocinolone acetonide cream 0.025%</i>	2	
<i>fluocinolone acetonide oil 0.01% (body oil)</i>	2	
<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>	2	
<i>fluocinolone acetonide oint 0.025%</i>	2	
<i>fluocinolone acetonide soln 0.01%</i>	2	QL (90 mL / 30 days)
<i>fluocinonide cream 0.05%</i>	2	QL (120 grams / 30 days)
<i>fluocinonide emulsified base cream 0.05%</i>	2	QL (120 grams / 30 days)
<i>fluocinonide gel 0.05%</i>	2	QL (60 grams / 30 days)
<i>fluocinonide oint 0.05%</i>	2	QL (60 grams / 30 days)
<i>fluocinonide soln 0.05%</i>	2	QL (60 mL / 30 days)
<i>fluticasone propionate cream 0.05%</i>	2	
<i>fluticasone propionate oint 0.005%</i>	2	
<i>halobetasol propionate cream 0.05%</i>	2	QL (50 grams / 30 days)
<i>halobetasol propionate oint 0.05%</i>	2	QL (50 grams / 30 days)
<i>hydrocortisone butyrate cream 0.1%</i>	2	QL (45 grams / 30 days)
<i>hydrocortisone butyrate oint 0.1%</i>	2	QL (45 grams / 30 days)
<i>hydrocortisone cream 1%</i>	1	
<i>hydrocortisone cream 2.5%</i>	1	
<i>hydrocortisone lotion 2.5%</i>	2	
<i>hydrocortisone oint 2.5%</i>	1	
<i>mometasone furoate cream 0.1%</i>	2	
<i>mometasone furoate oint 0.1%</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>mometasone furoate solution 0.1% (lotion)</i>	2	
<i>TEXACORT SOL 2.5%</i>	4	
<i>triamcinolone acetonide cream 0.1%</i>	1	QL (454 grams / 30 days)
<i>triamcinolone acetonide cream 0.5%</i>	1	
<i>triamcinolone acetonide cream 0.025%</i>	1	
<i>triamcinolone acetonide lotion 0.1%</i>	2	
<i>triamcinolone acetonide lotion 0.025%</i>	2	
<i>triamcinolone acetonide oint 0.1%</i>	1	
<i>triamcinolone acetonide oint 0.5%</i>	1	
<i>triamcinolone acetonide oint 0.025%</i>	1	
DERMATOLOGY, LOCAL ANESTHETICS		
<i>glydo gel 2%</i>	2	QL (30 mL / 30 days), PA
<i>lidocaine hcl soln 4%</i>	2	QL (50 mL / 30 days), PA
<i>lidocaine hcl urethral/mucosal gel 2%</i>	2	QL (30 mL / 30 days), PA
<i>lidocaine oint 5%</i>	2	PA
<i>lidocaine patch 5%</i>	2	QL (3 patches / 1 day), PA
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	2	QL (30 grams / 30 days), PA
DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE		
<i>diclofenac sodium gel 1%</i>	2	QL (1000 grams / 30 days)
<i>fluorouracil cream 5%</i>	2	QL (40 grams / 30 days)
<i>fluorouracil soln 2%</i>	2	QL (10 mL / 30 days)
<i>fluorouracil soln 5%</i>	2	QL (10 mL / 30 days)
<i>hydrocortisone perianal cream 2.5%</i>	2	
<i>imiquimod cream 5%</i>	2	QL (24 packets / 30 days)
<i>lactic acid (ammonium lactate) cream 12%</i>	2	
<i>lactic acid (ammonium lactate) lotion 12%</i>	2	
<i>metronidazole cream 0.75%</i>	2	
<i>metronidazole gel 0.75%</i>	2	
<i>metronidazole lotion 0.75%</i>	2	
<i>PANRETIN GEL 0.1%</i>	5	QL (60 grams / 30 days)
<i>PICATO GEL 0.05%</i>	4	QL (2 tubes / 30 days)
<i>PICATO GEL 0.015%</i>	4	QL (3 tubes / 30 days)
<i>podofilox soln 0.5%</i>	2	
<i>procto-med cre hc 2.5%</i>	2	
<i>procto-pak cre 1%</i>	2	
<i>proctozone cre -hc 2.5%</i>	2	
<i>RECTIV OIN 0.4%</i>	4	QL (30 grams / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>rosadan cre 0.75%</i>	2	
<i>tacrolimus oint 0.1%</i>	2	QL (100 grams / 30 days)
<i>tacrolimus oint 0.03%</i>	2	QL (100 grams / 30 days)
TARGETIN GEL 1%	5	QL (60 grams / 30 days), NM, PA
VALCHLOR GEL 0.016%	5	QL (60 grams / 30 days), NM, LA, PA

DERMATOLOGY, SCABICIDES AND PEDICULIDES

<i>malathion lotion 0.5%</i>	2
<i>permethrin cream 5%</i>	2

DERMATOLOGY, WOUND CARE AGENTS

<i>acetic acid irrigation soln 0.25%</i>	2
REGRANEX GEL 0.01%	5
	QL (30 grams / 30 days), PA
SANTYL OIN 250/GM	4
<i>sodium chloride irrigation soln 0.9%</i>	2
<i>water for irrigation, sterile irrigation soln</i>	2

MOUTH/THROAT/DENTAL AGENTS

<i>cevimeline hcl cap 30 mg</i>	2
<i>chlorhexidine gluconate soln 0.12%</i>	1
<i>clotrimazole troche 10 mg</i>	2
<i>lidocaine hcl viscous soln 2%</i>	2
<i>nystatin susp 100000 unit/ml</i>	2
<i>periogard sol 0.12%</i>	1
<i>pilocarpine hcl tab 5 mg</i>	2
<i>pilocarpine hcl tab 7.5 mg</i>	2
<i>triamcinolone acetonide dental paste 0.1%</i>	2

OTIC

<i>acetic acid otic soln 2%</i>	2
CIPRODEX SUS 0.3-0.1%	3
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	2
<i>flac oil 0.01%</i>	2
<i>fluocinolone acetonide (otic) oil 0.01%</i>	2
<i>neomycin-polymyxin-hc otic soln 1%</i>	2
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	2
<i>ofloxacin otic soln 0.3%</i>	2

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<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	2
<i>acetaminophen w/ codeine tab 300-15 mg</i>	2
<i>acetaminophen w/ codeine tab 300-30 mg</i>	2
<i>acetaminophen w/ codeine tab 300-60 mg</i>	2
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<i>ala-cort cre 2.5%</i>	98
<i>albendazole tab 200 mg</i>	5
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	94
<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i>	94
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	94
<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	94
<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	94
<i>albuterol sulfate syrup 2 mg/5ml</i>	94
<i>albuterol sulfate tab 2 mg</i>	94
<i>albuterol sulfate tab 4 mg</i>	94
<i>albuterol sulfate tab er 12hr 4 mg</i> ...	94
<i>albuterol sulfate tab er 12hr 8 mg</i> ...	94
<i>alclometasone dipropionate cream 0.05%</i>	99
<i>alclometasone dipropionate oint 0.05%</i>	99
ALDURAZYME INJ 2.9MG/5M	69
ALECENSA CAP 150MG.....	22
<i>alendronate sodium tab 10 mg</i>	65
<i>alendronate sodium tab 35 mg</i>	65

<i>alendronate sodium tab 40 mg</i>	65
<i>alendronate sodium tab 5 mg</i>	65
<i>alendronate sodium tab 70 mg</i>	65
<i>alfuzosin hcl tab er 24hr 10 mg</i>	79
ALIMTA INJ 100MG	17
ALIMTA INJ 500MG	17
ALINIA SUS 100/5ML	5
ALINIA TAB 500MG	5
<i>aliskiren fumarate tab 150 mg (base equivalent)</i>	38
<i>aliskiren fumarate tab 300 mg (base equivalent)</i>	38
<i>allopurinol tab 100 mg</i>	1
<i>allopurinol tab 300 mg</i>	1
<i>alosetron hcl tab 0.5 mg (base equiv)</i>	78
<i>alosetron hcl tab 1 mg (base equiv)</i> .	78
ALPHAGAN P SOL 0.1%	91
<i>alprazolam tab 0.25 mg</i>	40
<i>alprazolam tab 0.5 mg</i>	40
<i>alprazolam tab 1 mg</i>	40
<i>alprazolam tab 2 mg</i>	40
ALREX SUS 0.2%	91
ALUNBRIG PAK	22
ALUNBRIG TAB 180MG	22
ALUNBRIG TAB 30MG	22
ALUNBRIG TAB 90MG	22
<i>alyacen tab 1/35</i>	66
<i>amantadine hcl cap 100 mg</i>	50
<i>amantadine hcl syrup 50 mg/5ml</i>	50
<i>amantadine hcl tab 100 mg</i>	50
AMBISOME INJ 50MG	7
<i>ambrisentan tab 10 mg</i>	39
<i>ambrisentan tab 5 mg</i>	39
<i>amikacin sulfate inj 1 gm/4ml (250 mg/ml)</i>	5
<i>amikacin sulfate inj 500 mg/2ml (250 mg/ml)</i>	5
<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	37
<i>amiloride hcl tab 5 mg</i>	37
AMINOSYN II INJ 10%.....	88
AMINOSYN-PF INJ 7%	88
<i>amiodarone hcl inj 150 mg/3ml (50 mg/ml)</i>	31
<i>amiodarone hcl inj 450 mg/9ml (50 mg/ml)</i>	31
<i>amiodarone hcl inj 900 mg/18ml (50 mg/ml)</i>	31
<i>amiodarone hcl tab 100 mg</i>	31
<i>amiodarone hcl tab 200 mg</i>	31
<i>amiodarone hcl tab 400 mg</i>	31
AMITIZA CAP 24MCG	78
AMITIZA CAP 8MCG	78
<i>amitriptyline hcl tab 10 mg</i>	47
<i>amitriptyline hcl tab 100 mg</i>	47
<i>amitriptyline hcl tab 150 mg</i>	47
<i>amitriptyline hcl tab 25 mg</i>	47
<i>amitriptyline hcl tab 50 mg</i>	47
<i>amitriptyline hcl tab 75 mg</i>	47
<i>amlodipine besylate tab 10 mg (base equivalent)</i>	35
<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	35
<i>amlodipine besylate tab 5 mg (base equivalent)</i>	35
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	27
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	27
<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	27
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	27
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	27
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	27
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	29
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	29
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	29
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	29
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	29
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	29
<i>amlodipine besylate-valsartan tab 5-160 mg</i>	29
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	29

<i>amlodipine-valsartan-</i>	
<i>hydrochlorothiazide tab 10-160-12.5</i>	
<i>mg</i>	<i>29</i>
<i>amlodipine-valsartan-</i>	
<i>hydrochlorothiazide tab 10-160-25</i>	
<i>mg</i>	<i>29</i>
<i>amlodipine-valsartan-</i>	
<i>hydrochlorothiazide tab 10-320-25</i>	
<i>mg</i>	<i>29</i>
<i>amlodipine-valsartan-</i>	
<i>hydrochlorothiazide tab 5-160-12.5</i>	
<i>mg</i>	<i>29</i>
<i>amlodipine-valsartan-</i>	
<i>hydrochlorothiazide tab 5-160-25 mg</i>	
<i>.....</i>	<i>29</i>
<i>amnesteem cap 10mg</i>	<i>97</i>
<i>amnesteem cap 20mg</i>	<i>97</i>
<i>amnesteem cap 40mg</i>	<i>97</i>
<i>amoxapine tab 100 mg</i>	<i>47</i>
<i>amoxapine tab 150 mg</i>	<i>47</i>
<i>amoxapine tab 25 mg</i>	<i>47</i>
<i>amoxapine tab 50 mg</i>	<i>47</i>
<i>amoxicillin (trihydrate) cap 250 mg</i>	<i>15</i>
<i>amoxicillin (trihydrate) cap 500 mg</i>	<i>15</i>
<i>amoxicillin (trihydrate) chew tab 125 mg</i>	<i>15</i>
<i>amoxicillin (trihydrate) chew tab 250 mg</i>	<i>15</i>
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	<i>15</i>
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	<i>15</i>
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	<i>15</i>
<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	<i>15</i>
<i>amoxicillin (trihydrate) tab 500 mg</i>	<i>15</i>
<i>amoxicillin (trihydrate) tab 875 mg</i>	<i>15</i>
<i>amoxicillin & k clavulanate chew tab 200-28.5 mg</i>	<i>15</i>
<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	<i>15</i>
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	<i>15</i>
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	<i>15</i>
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	<i>15</i>

<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	<i>15</i>
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	<i>15</i>
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	<i>15</i>
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	<i>15</i>
<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	<i>15</i>
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	<i>57</i>
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	<i>57</i>
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	<i>57</i>
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	<i>57</i>
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	<i>57</i>
<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	<i>57</i>
<i>amphetamine-dextroamphetamine tab 10 mg</i>	<i>57</i>
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	<i>57</i>
<i>amphetamine-dextroamphetamine tab 15 mg</i>	<i>57</i>
<i>amphetamine-dextroamphetamine tab 20 mg</i>	<i>57</i>
<i>amphetamine-dextroamphetamine tab 30 mg</i>	<i>57</i>
<i>amphetamine-dextroamphetamine tab 5 mg</i>	<i>57</i>
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	<i>57</i>
<i>amphotericin b for iv soln 50 mg</i>	<i>7</i>
<i>ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm</i>	<i>15</i>
<i>ampicillin & sulbactam sodium for inj 3 (2-1) gm</i>	<i>15</i>
<i>ampicillin & sulbactam sodium for iv soln 15 (10-5) gm</i>	<i>15</i>
<i>ampicillin cap 500 mg</i>	<i>15</i>
<i>ampicillin sodium for inj 1 gm</i>	<i>16</i>
<i>ampicillin sodium for inj 125 mg</i>	<i>16</i>
<i>ampicillin sodium for inj 2 gm</i>	<i>16</i>
<i>ampicillin sodium for inj 250 mg</i>	<i>16</i>

ampicillin sodium for inj 500 mg	16
ampicillin sodium for iv soln 1 gm	16
ampicillin sodium for iv soln 10 gm	16
ampicillin sodium for iv soln 2 gm	16
ANADROL-50 TAB 50MG	62
anagrelide hcl cap 0.5 mg	82
anagrelide hcl cap 1 mg	82
anastrozole tab 1 mg	21
ANDRODERM DIS 2MG/24HR.....	62
ANDRODERM DIS 4MG/24HR.....	62
ANORO ELLIPT AER 62.5-25	92
APOKYN INJ 10MG/ML	50
aprepitant capsule 125 mg	76
aprepitant capsule 40 mg.....	75
aprepitant capsule 80 mg.....	76
aprepitant capsule therapy pack 80 & 125 mg.....	76
apri tab	66
APTIOM TAB 200MG	40
APTIOM TAB 400MG	40
APTIOM TAB 600MG	40
APTIOM TAB 800MG	40
APTIVUS CAP 250MG.....	8
APTIVUS SOL	8
ARALAST NP INJ 1000MG.....	95
ARALAST NP INJ 500MG	95
aranelle tab	66
ARCALYST INJ 220MG	85
ariPIPRAZOLE oral solution 1 mg/ml	52
ariPIPRAZOLE orally disintegrating tab 10 mg	52
ariPIPRAZOLE orally disintegrating tab 15 mg	52
ariPIPRAZOLE tab 10 mg.....	52
ariPIPRAZOLE tab 15 mg	52
ariPIPRAZOLE tab 2 mg	52
ariPIPRAZOLE tab 20 mg	52
ariPIPRAZOLE tab 30 mg	52
ariPIPRAZOLE tab 5 mg	52
ARISTADA INJ 1064MG.....	52
ARISTADA INJ 441MG/1.....	52
ARISTADA INJ 662MG/2	52
ARISTADA INJ 882MG/3	52
ARISTADA INJ INITIO	52
armodafinil tab 150 mg	61
armodafinil tab 200 mg	61
armodafinil tab 250 mg	61
armodafinil tab 50 mg	61
ARNUITY ELPT INH 100MCG.....	96
ARNUITY ELPT INH 200MCG.....	96
ARNUITY ELPT INH 50MCG	96
aspirin-dipyridamole cap er 12hr 25-200 mg	82
atazanavir sulfate cap 150 mg (base equiv)	8
atazanavir sulfate cap 200 mg (base equiv)	8
atazanavir sulfate cap 300 mg (base equiv)	8
atenolol & chlorthalidone tab 100-25 mg	33
atenolol & chlorthalidone tab 50-25 mg	33
atenolol tab 100 mg.....	33
atenolol tab 25 mg	33
atenolol tab 50 mg	33
atomoxetine hcl cap 10 mg (base equiv)	57
atomoxetine hcl cap 100 mg (base equiv)	57
atomoxetine hcl cap 18 mg (base equiv)	57
atomoxetine hcl cap 25 mg (base equiv)	57
atomoxetine hcl cap 40 mg (base equiv)	57
atomoxetine hcl cap 60 mg (base equiv)	57
atomoxetine hcl cap 80 mg (base equiv)	57
atorvastatin calcium tab 10 mg (base equivalent)	32
atorvastatin calcium tab 20 mg (base equivalent)	32
atorvastatin calcium tab 40 mg (base equivalent)	32
atorvastatin calcium tab 80 mg (base equivalent)	32
atovaquone susp 750 mg/5ml	5
atovaquone-proguanil hcl tab 250-100 mg	8
atovaquone-proguanil hcl tab 62.5-25 mg	8
ATRIPLA TAB	10
ATROPINE SUL SOL 1% OP.....	92
ATROVENT HFA AER 17MCG.....	93

<i>aubra tab 0.1-0.02</i>	66
AURYXIA TAB 210MG	73
AUSTEDO TAB 12MG	59
AUSTEDO TAB 6MG.....	59
AUSTEDO TAB 9MG.....	59
AVASTIN INJ	19
AVASTIN INJ 400/16ML	19
<i>aviane tab</i>	66
<i>avita cre 0.025%</i>	97
<i>avita gel 0.025%</i>	97
AYVAKIT TAB 100MG.....	22
AYVAKIT TAB 200MG.....	22
AYVAKIT TAB 300MG.....	22
<i>azacitidine for inj 100 mg</i>	18
AZASITE SOL 1%.....	90
<i>azathioprine tab 50 mg</i>	85
<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	93
<i>azelastine hcl nasal spray 0.15% (205.5 mcg/spray)</i>	93
<i>azelastine hcl ophth soln 0.05%</i>	91
<i>azithromycin for susp 100 mg/5ml</i> ...	14
<i>azithromycin for susp 200 mg/5ml</i> ...	14
<i>azithromycin iv for soln 500 mg</i>	14
<i>azithromycin powd pack for susp 1 gm</i>	14
<i>azithromycin tab 250 mg</i>	14
<i>azithromycin tab 500 mg</i>	14
<i>azithromycin tab 600 mg</i>	14
AZOPT SUS 1% OP	91
<i>aztreonam for inj 1 gm</i>	5
<i>aztreonam for inj 2 gm</i>	5
B	
<i>bacitracin ophth oint 500 unit/gm</i>	90
<i>bacitracin-polymyxin b ophth oint</i> ...	90
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	90
<i>baclofen tab 10 mg</i>	60
<i>baclofen tab 20 mg</i>	60
<i>balsalazide disodium cap 750 mg</i>	77
BALVERSA TAB 3MG.....	22
BALVERSA TAB 4MG.....	22
BALVERSA TAB 5MG.....	22
<i>balziva tab</i>	66
BANZEL SUS 40MG/ML	40
BANZEL TAB 200MG	40
BANZEL TAB 400MG	40
BARACLUDE SOL	11
BASAGLAR INJ 100UNIT	62
BCG VACCINE INJ	86
BD ALCOHOL SWABS	62
BD ULTRAFINE INSULIN SYRINGE	62
BD ULTRAFINE/NANO PEN NEEDLES 62	
<i>bekyree tab</i>	66
BELSOMRA TAB 10MG	58
BELSOMRA TAB 15MG	58
BELSOMRA TAB 20MG	58
BELSOMRA TAB 5MG	58
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	27
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	27
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	27
<i>benazepril & hydrochlorothiazide tab 5-6.25 mg</i>	27
<i>benazepril hcl tab 10 mg</i>	28
<i>benazepril hcl tab 20 mg</i>	28
<i>benazepril hcl tab 40 mg</i>	28
<i>benazepril hcl tab 5 mg</i>	28
BENDEKA INJ 100/4ML	17
BENLYSTA INJ 120MG	85
BENLYSTA INJ 200MG/ML	85
BENLYSTA INJ 400MG	85
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	97
<i>benztropine mesylate inj 1 mg/ml</i>	50
<i>benztropine mesylate tab 0.5 mg</i>	50
<i>benztropine mesylate tab 1 mg</i>	50
<i>benztropine mesylate tab 2 mg</i>	50
BEPREVE DRO 1.5%	91
BERINERT INJ 500UNIT	82
BESIVANCE SUS 0.6%	90
<i>betamethasone dipropionate augmented cream 0.05%</i>	99
<i>betamethasone dipropionate augmented gel 0.05%</i>	99
<i>betamethasone dipropionate augmented lotion 0.05%</i>	99
<i>betamethasone dipropionate augmented oint 0.05%</i>	99
<i>betamethasone dipropionate cream 0.05%</i>	99
<i>betamethasone dipropionate lotion 0.05%</i>	99

<i>betamethasone dipropionate oint</i>	
0.05%	99
<i>betamethasone valerate cream 0.1%</i>	
(base equivalent)	99
<i>betamethasone valerate lotion 0.1%</i>	
(base equivalent)	99
<i>betamethasone valerate oint 0.1%</i>	
(base equivalent)	99
BETASERON INJ 0.3MG.....	60
<i>betaxolol hcl ophth soln 0.5%</i>	91
<i>bethanechol chloride tab 10 mg</i>	79
<i>bethanechol chloride tab 25 mg</i>	79
<i>bethanechol chloride tab 5 mg</i>	79
<i>bethanechol chloride tab 50 mg</i>	79
BETOPTIC-S SUS 0.25% OP	91
BEVESPI AER 9-4.8MCG.....	92
<i>bexarotene cap 75 mg</i>	25
BEXSERO INJ	86
<i>bicalutamide tab 50 mg</i>	21
BICILLIN L-A INJ 1200000	16
BICILLIN L-A INJ 2400000	16
BICILLIN L-A INJ 600000	16
BIKTARVY TAB	10
<i>bisoprolol & hydrochlorothiazide tab</i>	
10-6.25 mg	33
<i>bisoprolol & hydrochlorothiazide tab</i>	
2.5-6.25 mg	33
<i>bisoprolol & hydrochlorothiazide tab 5-</i>	
6.25 mg.....	33
<i>bisoprolol fumarate tab 10 mg</i>	33
<i>bisoprolol fumarate tab 5 mg</i>	33
BIVIGAM INJ 10%.....	84
BLEPHAMIDE OIN S.O.P.....	90
<i>blisovi fe tab 1.5/30</i>	66
BOOSTRIX INJ.....	86
BORTEZOMIB INJ 3.5MG.....	19
<i>bosentan tab 125 mg</i>	39
<i>bosentan tab 62.5 mg</i>	39
BOSULIF TAB 100MG.....	22
BOSULIF TAB 400MG.....	22
BOSULIF TAB 500MG.....	23
BRAFTOVI CAP 75MG	23
BREO ELLIPTA INH 100-25.....	96
BREO ELLIPTA INH 200-25.....	97
BREZTRI AERO AER SPHERE.....	92
<i>briellyn tab</i>	66
BRILINTA TAB 60MG	82
BRILINTA TAB 90MG	82

<i>brimonidine tartrate ophth soln 0.15%</i>	
.....	92
<i>brimonidine tartrate ophth soln 0.2%</i> 92	
BRIVIACT INJ 50MG/5ML.....	40
BRIVIACT SOL 10MG/ML	40
BRIVIACT TAB 100MG	40
BRIVIACT TAB 10MG.....	40
BRIVIACT TAB 25MG.....	40
BRIVIACT TAB 50MG.....	40
BRIVIACT TAB 75MG.....	40
<i>bromfenac sodium ophth soln 0.09%</i>	
(base equiv) (once-daily)	91
<i>bromocriptine mesylate cap 5 mg (base</i>	
<i>equivalent)</i>	50
<i>bromocriptine mesylate tab 2.5 mg</i>	
(base equivalent)	50
BROMSITE DRO 0.075%.....	91
BRUKINSA CAP 80MG	23
<i>budesonide delayed release particles</i>	
<i>cap 3 mg</i>	77
<i>budesonide inhalation susp 0.25</i>	
<i>mg/2ml</i>	96
<i>budesonide inhalation susp 0.5 mg/2ml</i>	
.....	96
<i>bumetanide inj 0.25 mg/ml</i>	37
<i>bumetanide tab 0.5 mg</i>	37
<i>bumetanide tab 1 mg</i>	37
<i>bumetanide tab 2 mg</i>	37
<i>buprenorphine hcl sl tab 2 mg (base</i>	
<i>equiv)</i>	61
<i>buprenorphine hcl sl tab 8 mg (base</i>	
<i>equiv)</i>	61
<i>buprenorphine hcl-naloxone hcl sl film</i>	
<i>12-3 mg (base equiv)</i>	61
<i>buprenorphine hcl-naloxone hcl sl film</i>	
<i>2-0.5 mg (base equiv)</i>	61
<i>buprenorphine hcl-naloxone hcl sl film</i>	
<i>4-1 mg (base equiv)</i>	61
<i>buprenorphine hcl-naloxone hcl sl film</i>	
<i>8-2 mg (base equiv)</i>	61
<i>buprenorphine hcl-naloxone hcl sl tab</i>	
<i>2-0.5 mg (base equiv)</i>	61
<i>buprenorphine hcl-naloxone hcl sl tab</i>	
<i>8-2 mg (base equiv)</i>	61
<i>bupropion hcl (smoking deterrent) tab</i>	
<i>er 12hr 150 mg</i>	61
<i>bupropion hcl tab 100 mg</i>	47
<i>bupropion hcl tab 75 mg</i>	47

<i>bupropion hcl tab er 12hr 100 mg</i>	47
<i>bupropion hcl tab er 12hr 150 mg</i>	47
<i>bupropion hcl tab er 12hr 200 mg</i>	47
<i>bupropion hcl tab er 24hr 150 mg</i>	47
<i>bupropion hcl tab er 24hr 300 mg</i>	47
<i>buspirone hcl tab 10 mg</i>	40
<i>buspirone hcl tab 15 mg</i>	40
<i>buspirone hcl tab 30 mg</i>	40
<i>buspirone hcl tab 5 mg</i>	40
<i>buspirone hcl tab 7.5 mg</i>	40
<i>butorphanol tartrate inj 1 mg/ml</i>	2
<i>butorphanol tartrate inj 2 mg/ml</i>	2
<i>BYDUREON BC INJ 2/0.85ML</i>	62
<i>BYDUREON PEN INJ 2MG</i>	62
<i>BYETTA INJ 10MCG</i>	62
<i>BYETTA INJ 5MCG</i>	62
<i>BYSTOLIC TAB 10MG</i>	34
<i>BYSTOLIC TAB 2.5MG</i>	34
<i>BYSTOLIC TAB 20MG</i>	34
<i>BYSTOLIC TAB 5MG</i>	34
C	
<i>cabergoline tab 0.5 mg</i>	72
<i>CABOMETYX TAB 20MG</i>	23
<i>CABOMETYX TAB 40MG</i>	23
<i>CABOMETYX TAB 60MG</i>	23
<i>calcipotriene cream 0.005%</i>	98
<i>calcipotriene oint 0.005%</i>	98
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	98
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	72
<i>calcitriol cap 0.25 mcg</i>	89
<i>calcitriol cap 0.5 mcg</i>	89
<i>calcitriol inj 1 mcg/ml</i>	89
<i>calcitriol oral soln 1 mcg/ml</i>	89
<i>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</i>	73
<i>calcium acetate (phosphate binder) tab 667 mg</i>	73
<i>CALQUENCE CAP 100MG</i>	23
<i>camila tab 0.35mg</i>	66
<i>CAPLYTA CAP 42MG</i>	52
<i>CAPRELSA TAB 100MG</i>	23
<i>CAPRELSA TAB 300MG</i>	23
<i>captopril & hydrochlorothiazide tab 25-15 mg</i>	27
<i>captopril & hydrochlorothiazide tab 25-25 mg</i>	27
<i>captopril & hydrochlorothiazide tab 50-15 mg</i>	27
<i>captopril & hydrochlorothiazide tab 50-25 mg</i>	27
<i>captopril tab 100 mg</i>	28
<i>captopril tab 12.5 mg</i>	28
<i>captopril tab 25 mg</i>	28
<i>captopril tab 50 mg</i>	28
<i>CARBAGLU TAB 200MG</i>	69
<i>carbamazepine cap er 12hr 100 mg</i> .	40
<i>carbamazepine cap er 12hr 200 mg</i> .	40
<i>carbamazepine cap er 12hr 300 mg</i> .	40
<i>carbamazepine chew tab 100 mg</i>	40
<i>carbamazepine susp 100 mg/5ml</i>	41
<i>carbamazepine tab 200 mg</i>	41
<i>carbamazepine tab er 12hr 100 mg</i> .	41
<i>carbamazepine tab er 12hr 200 mg</i> .	41
<i>carbamazepine tab er 12hr 400 mg</i> .	41
<i>carbidopa & levodopa orally</i>	
<i>disintegrating tab 10-100 mg</i>	50
<i>carbidopa & levodopa orally</i>	
<i>disintegrating tab 25-100 mg</i>	50
<i>carbidopa & levodopa orally</i>	
<i>disintegrating tab 25-250 mg</i>	50
<i>carbidopa & levodopa tab 10-100 mg</i> 50	
<i>carbidopa & levodopa tab 25-100 mg</i> 50	
<i>carbidopa & levodopa tab 25-250 mg</i> 50	
<i>carbidopa & levodopa tab er 25-100 mg</i>	50
<i>carbidopa & levodopa tab er 50-200 mg</i>	51
<i>carbidopa-levodopa-entacapone tabs</i>	
<i>12.5-50-200 mg</i>	51
<i>carbidopa-levodopa-entacapone tabs</i>	
<i>18.75-75-200 mg</i>	51
<i>carbidopa-levodopa-entacapone tabs</i>	
<i>25-100-200 mg</i>	51
<i>carbidopa-levodopa-entacapone tabs</i>	
<i>31.25-125-200 mg</i>	51
<i>carbidopa-levodopa-entacapone tabs</i>	
<i>37.5-150-200 mg</i>	51
<i>carbidopa-levodopa-entacapone tabs</i>	
<i>50-200-200 mg</i>	51
<i>carboplatin iv soln 150 mg/15ml</i>	26
<i>carboplatin iv soln 450 mg/45ml</i>	26
<i>carboplatin iv soln 50 mg/5ml</i>	26
<i>carboplatin iv soln 600 mg/60ml</i>	26
<i>carteolol hcl ophth soln 1%</i>	92

carvedilol tab 12.5 mg	34
carvedilol tab 25 mg	34
carvedilol tab 3.125 mg	34
carvedilol tab 6.25 mg	34
caspofungin acetate for iv soln 50 mg	7
caspofungin acetate for iv soln 70 mg	7
CAYSTON INH 75MG	5
cefaclor cap 250 mg	12
cefaclor cap 500 mg	12
CEFACLOR ER TAB 500MG.....	12
cefaclor for susp 125 mg/5ml	12
cefaclor for susp 250 mg/5ml	12
cefaclor for susp 375 mg/5ml	12
cefadroxil cap 500 mg	13
cefadroxil for susp 250 mg/5ml	13
cefadroxil for susp 500 mg/5ml	13
cefadroxil tab 1 gm	13
CEFAZOLIN INJ 1GM/50ML.....	13
cefazolin sodium for inj 1 gm.....	13
cefazolin sodium for inj 10 gm	13
cefazolin sodium for inj 500 mg	13
cefazolin sodium for iv soln 1 gm	13
CEFAZOLIN SOL	13
cefdinir cap 300 mg	13
cefdinir for susp 125 mg/5ml.....	13
cefdinir for susp 250 mg/5ml.....	13
cefepime hcl for inj 1 gm	13
cefepime hcl for inj 2 gm	13
cefixime for susp 100 mg/5ml	13
cefixime for susp 200 mg/5ml	13
cefoxitin sodium for inj 10 gm	13
cefoxitin sodium for iv soln 1 gm.....	13
cefoxitin sodium for iv soln 2 gm.....	13
cefpodoxime proxetil for susp 100 mg/5ml	13
cefpodoxime proxetil for susp 50 mg/5ml	13
cefpodoxime proxetil tab 100 mg	13
cefpodoxime proxetil tab 200 mg	13
cefprozil for susp 125 mg/5ml	13
cefprozil for susp 250 mg/5ml	13
cefprozil tab 250 mg	13
cefprozil tab 500 mg	13
ceftazidime for inj 1 gm	13
ceftazidime for inj 2 gm	13
ceftazidime for inj 6 gm	13
CEFTAZIDIME/ SOL D5W 1GM	13
CEFTAZIDIME/ SOL D5W 2GM	13
ceftriaxone sodium for inj 1 gm	13
ceftriaxone sodium for inj 10 gm	13
ceftriaxone sodium for inj 2 gm.....	13
ceftriaxone sodium for inj 250 mg ...	13
ceftriaxone sodium for inj 500 mg ...	13
ceftriaxone sodium for iv soln 1 gm .	13
ceftriaxone sodium for iv soln 2 gm .	13
cefuroxime axetil tab 250 mg.....	13
cefuroxime axetil tab 500 mg.....	13
cefuroxime sodium for inj 7.5 gm	13
cefuroxime sodium for inj 750 mg ...	13
cefuroxime sodium for iv soln 1.5 gm	13
celecoxib cap 100 mg	1
celecoxib cap 200 mg	1
celecoxib cap 400 mg	1
celecoxib cap 50 mg	1
CELONTIN CAP 300MG	41
cephalexin cap 250 mg	14
cephalexin cap 500 mg	14
cephalexin for susp 125 mg/5ml.....	14
cephalexin for susp 250 mg/5ml.....	14
CERDELGA CAP 84MG	69
CEREZYME INJ 400UNIT	69
cetirizine hcl oral soln 1 mg/ml (5 mg/5ml).....	93
cevimeline hcl cap 30 mg	101
CHANTIX PAK 0.5& 1MG	61
CHANTIX PAK 1MG	61
CHANTIX TAB 0.5MG	61
CHANTIX TAB 1MG	61
CHEMET CAP 100MG	65
chlorhexidine gluconate soln 0.12% 101	
chloroquine phosphate tab 250 mg	8
chloroquine phosphate tab 500 mg	8
chlorothiazide tab 250 mg	37
chlorothiazide tab 500 mg	37
chlorpromazine hcl inj 25 mg/ml	52
chlorpromazine hcl inj 50 mg/2ml....	52
chlorpromazine hcl tab 10 mg	52
chlorpromazine hcl tab 100 mg	52
chlorpromazine hcl tab 200 mg	52
chlorpromazine hcl tab 25 mg	52
chlorpromazine hcl tab 50 mg	52
chlorthalidone tab 25 mg	37
chlorthalidone tab 50 mg	37
cholestyramine light powder 4 gm/dose	32

<i>cholestyramine light powder packets 4 gm</i>	32
<i>cholestyramine powder 4 gm/dose</i>	32
<i>cholestyramine powder packets 4 gm</i>	32
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	98
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	98
<i>cilostazol tab 100 mg</i>	82
<i>cilostazol tab 50 mg</i>	82
<i>CILOXAN OIN 0.3% OP</i>	90
<i>CIMDUO TAB 300-300</i>	10
<i>cinacalcet hcl tab 30 mg (base equiv)</i>	72
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	72
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	72
<i>CIPRO (10%) SUS 500MG/5</i>	14
<i>CIPRODEX SUS 0.3-0.1%</i>	101
<i>ciprofloxacin 200 mg/100ml in d5w</i> ..	14
<i>ciprofloxacin 400 mg/200ml in d5w</i> ..	14
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	90
<i>ciprofloxacin hcl tab 100 mg (base equiv)</i>	14
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	14
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	14
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	14
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	101
<i>cisplatin inj 100 mg/100ml (1 mg/ml)</i>	26
<i>cisplatin inj 200 mg/200ml (1 mg/ml)</i>	26
<i>cisplatin inj 50 mg/50ml (1 mg/ml)</i>	26
<i>citalopram hydrobromide oral soln 10 mg/5ml</i>	47
<i>citalopram hydrobromide tab 10 mg (base equiv)</i>	47
<i>citalopram hydrobromide tab 20 mg (base equiv)</i>	47
<i>citalopram hydrobromide tab 40 mg (base equiv)</i>	47
<i>claravis cap 10mg</i>	97
<i>claravis cap 20mg</i>	97
<i>claravis cap 30mg</i>	97
<i>claravis cap 40mg</i>	97
<i>clarithromycin for susp 125 mg/5ml.</i> ..	14
<i>clarithromycin for susp 250 mg/5ml.</i> ..	14
<i>clarithromycin tab 250 mg</i>	14
<i>clarithromycin tab 500 mg</i>	14
<i>clarithromycin tab er 24hr 500 mg</i> ...	14
<i>clindamycin hcl cap 150 mg</i>	5
<i>clindamycin hcl cap 300 mg</i>	5
<i>clindamycin hcl cap 75 mg</i>	5
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	5
<i>clindamycin phosphate gel 1%</i>	97
<i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i>	6
<i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i>	6
<i>clindamycin phosphate in d5w iv soln 900 mg/50ml</i>	6
<i>clindamycin phosphate inj 300 mg/2ml</i>	6
<i>clindamycin phosphate inj 600 mg/4ml</i>	6
<i>clindamycin phosphate inj 9 gm/60ml</i>	6
<i>clindamycin phosphate inj 900 mg/6ml</i>	6
<i>clindamycin phosphate lotion 1%</i>	97
<i>clindamycin phosphate soln 1%</i>	97
<i>clindamycin phosphate vaginal cream 2%</i>	80
<i>CLINDMYC/NAC INJ 300/50ML</i>	6
<i>CLINDMYC/NAC INJ 600/50ML</i>	6
<i>CLINDMYC/NAC INJ 900/50ML</i>	6
<i>CLINIMIX INJ 4.25/D10</i>	88
<i>CLINIMIX INJ 4.25/D5W</i>	88
<i>CLINIMIX INJ 5%/D15W</i>	88
<i>CLINIMIX INJ 5%/D20W</i>	88
<i>clinisol sf inj 15%</i>	88
<i>CLINOLIPID EMU 20%</i>	88
<i>clobazam suspension 2.5 mg/ml</i>	41
<i>clobazam tab 10 mg</i>	41
<i>clobazam tab 20 mg</i>	41
<i>clomipramine hcl cap 25 mg</i>	47
<i>clomipramine hcl cap 50 mg</i>	47
<i>clomipramine hcl cap 75 mg</i>	47
<i>clonazepam orally disintegrating tab 0.125 mg</i>	41

<i>clonazepam orally disintegrating tab</i>	
0.25 mg.....	41
<i>clonazepam orally disintegrating tab</i>	
0.5 mg	41
<i>clonazepam orally disintegrating tab 1</i>	
mg.....	41
<i>clonazepam orally disintegrating tab 2</i>	
mg.....	41
<i>clonazepam tab 0.5 mg</i>	41
<i>clonazepam tab 1 mg</i>	41
<i>clonazepam tab 2 mg</i>	41
<i>clonidine hcl tab 0.1 mg</i>	38
<i>clonidine hcl tab 0.2 mg</i>	38
<i>clonidine hcl tab 0.3 mg</i>	38
<i>clonidine td patch weekly 0.1 mg/24hr</i>	
.....	38
<i>clonidine td patch weekly 0.2 mg/24hr</i>	
.....	38
<i>clonidine td patch weekly 0.3 mg/24hr</i>	
.....	38
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	82
<i>clorazepate dipotassium tab 15 mg</i> ..41	41
<i>clorazepate dipotassium tab 3.75 mg</i> 41	
<i>clorazepate dipotassium tab 7.5 mg</i> .41	
<i>clotrimazole cream 1%</i>	98
<i>clotrimazole soln 1%</i>	98
<i>clotrimazole troche 10 mg</i>	101
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	98
<i>clovique cap 250mg</i>	65
<i>clozapine orally disintegrating tab 100 mg</i>	52
<i>clozapine orally disintegrating tab 12.5 mg</i>	52
<i>clozapine orally disintegrating tab 150 mg</i>	52
<i>clozapine orally disintegrating tab 200 mg</i>	52
<i>clozapine orally disintegrating tab 25 mg</i>	52
<i>clozapine tab 100 mg</i>	52
<i>clozapine tab 200 mg</i>	52
<i>clozapine tab 25 mg</i>	52
<i>clozapine tab 50 mg</i>	52
<i>COARTEM TAB 20-120MG</i>	8
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	1
<i>COLCRYS TAB 0.6MG</i>	1
<i>colesevelam hcl packet for susp</i> 3.75 gm	32
<i>colesevelam hcl tab 625 mg</i>	32
<i>colestipol hcl granule packets 5 gm..</i> 32	
<i>colestipol hcl granules 5 gm</i>	32
<i>colestipol hcl tab 1 gm</i>	32
<i>colistimethate sod for inj 150 mg (colistin base activity)</i>	6
<i>COMBIGAN SOL 0.2/0.5%</i>	92
<i>COMBIVENT AER 20-100</i>	92
<i>COMETRIQ KIT 100MG</i>	23
<i>COMETRIQ KIT 140MG</i>	23
<i>COMETRIQ KIT 60MG</i>	23
<i>COMPLERA TAB</i>	10
<i>compro sup 25mg</i>	76
<i>constulose sol 10gm/15</i>	77
<i>COPIKTRA CAP 15MG</i>	23
<i>COPIKTRA CAP 25MG</i>	23
<i>CORLANOR SOL 5MG/5ML</i>	38
<i>CORLANOR TAB 5MG</i>	38
<i>CORLANOR TAB 7.5MG</i>	38
<i>cortisone acetate tab 25 mg</i>	70
<i>COTELLIC TAB 20MG</i>	23
<i>CREON CAP 12000UNT</i>	78
<i>CREON CAP 24000UNT</i>	79
<i>CREON CAP 3000UNIT</i>	78
<i>CREON CAP 36000UNT</i>	79
<i>CREON CAP 6000UNIT</i>	78
<i>CRIXIVAN CAP 200MG</i>	8
<i>CRIXIVAN CAP 400MG</i>	8
<i>cromolyn sodium ophth soln 4%</i>	91
<i>cromolyn sodium oral conc 100 mg/5ml</i>	
.....	78
<i>cromolyn sodium soln nebu 20 mg/2ml</i>	
.....	94
<i>cryselle-28 tab 28 tabs</i>	66
<i>cyclafem tab 1/35</i>	66
<i>cyclafem tab 7/7/7</i>	66
<i>cyclobenzaprine hcl tab 10 mg</i>	60
<i>cyclobenzaprine hcl tab 5 mg</i>	60
<i>CYCLOPHOSPH INJ 1GM</i>	17
<i>CYCLOPHOSPHA INJ 500MG</i>	17
<i>cyclophosphamide cap 25 mg</i>	17
<i>cyclophosphamide cap 50 mg</i>	17
<i>cyclophosphamide for inj 1 gm</i>	17
<i>cyclophosphamide for inj 2 gm</i>	17
<i>cyclophosphamide for inj 500 mg</i>	17

cycloserine cap 250 mg	11
cyclosporine cap 100 mg.....	85
cyclosporine cap 25 mg	85
cyclosporine iv soln 50 mg/ml	85
cyclosporine modified cap 100 mg....	85
cyclosporine modified cap 25 mg	85
cyclosporine modified cap 50 mg	85
cyclosporine modified oral soln 100 mg/ml	85
cyproheptadine hcl syrup 2 mg/5ml..	93
cyproheptadine hcl tab 4 mg	93
CYSTADANE POW.....	69
CYSTAGON CAP 150MG	69
CYSTAGON CAP 50MG	69
CYSTARAN SOL 0.44%	92
cytarabine inj 20 mg/ml.....	18
D	
D10W/NACL INJ 0.2%	88
D5W/LYTES INJ #48	88
D5W/NACL INJ 0.3%	88
dalfampridine tab er 12hr 10 mg.....	60
DALIRESP TAB 250MCG	95
DALIRESP TAB 500MCG	95
danazol cap 100 mg	69
danazol cap 200 mg	69
danazol cap 50 mg.....	69
dantrolene sodium cap 100 mg	61
dantrolene sodium cap 25 mg.....	61
dantrolene sodium cap 50 mg.....	61
dapsone tab 100 mg	6
dapsone tab 25 mg	6
DAPTACEL INJ	86
daptomycin for iv soln 350 mg.....	6
daptomycin for iv soln 500 mg.....	6
dasetta tab 1/35	66
dasetta tab 7/7/7.....	66
DAURISMO TAB 100MG	19
DAURISMO TAB 25MG	19
deblitane tab 0.35mg	66
deferasirox granules packet 180 mg .	65
deferasirox granules packet 360 mg .	65
deferasirox granules packet 90 mg... .	65
deferasirox tab 180 mg	65
deferasirox tab 360 mg	65
deferasirox tab 90 mg	65
DELESTROGEN INJ 10MG/ML.....	70
DELSTRIGO TAB	10
DEMSER CAP 250MG	38
DEPO-PROVERA INJ 400/ML.....	21
DESCOZY TAB 200-25MG	10
desipramine hcl tab 10 mg	47
desipramine hcl tab 100 mg.....	47
desipramine hcl tab 150 mg.....	47
desipramine hcl tab 25 mg	47
desipramine hcl tab 50 mg	47
desipramine hcl tab 75 mg	47
desmopressin acetate inj 4 mcg/ml..	75
desmopressin acetate nasal spray soln 0.01%	75
desmopressin acetate nasal spray soln 0.01% (refrigerated).....	75
desmopressin acetate tab 0.1 mg	75
desmopressin acetate tab 0.2 mg	75
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	66
desogest-ethin est tab 0.1- 0.025/0.125-0.025/0.15-0.025mg- mg	66
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	66
desvenlafaxine succinate tab er 24hr 100 mg (base equiv)	47
desvenlafaxine succinate tab er 24hr 25 mg (base equiv).....	47
desvenlafaxine succinate tab er 24hr 50 mg (base equiv).....	47
DEXAMETHASON CON 1MG/ML.....	70
dexamethasone elixir 0.5 mg/5ml....	70
dexamethasone sod phosphate preservative free inj 10 mg/ml	70
dexamethasone sodium phosphate inj 10 mg/ml	70
dexamethasone sodium phosphate inj 100 mg/10ml	70
dexamethasone sodium phosphate inj 120 mg/30ml	71
dexamethasone sodium phosphate inj 20 mg/5ml	70
dexamethasone sodium phosphate inj 4 mg/ml	70
dexamethasone sodium phosphate ophth soln 0.1%	91
dexamethasone soln 0.5 mg/5ml....	71
dexamethasone tab 0.5 mg	71
dexamethasone tab 0.75 mg.....	71
dexamethasone tab 1 mg	71

dexamethasone tab 1.5 mg	71
dexamethasone tab 2 mg.....	71
dexamethasone tab 4 mg.....	71
dexamethasone tab 6 mg.....	71
DEXILANT CAP 30MG DR	79
DEXILANT CAP 60MG DR	79
dexamethylphenidate hcl tab 10 mg....	57
dexamethylphenidate hcl tab 2.5 mg..	57
dexamethylphenidate hcl tab 5 mg	57
dextrose 10% w/ sodium chloride 0.45%	88
dextrose 2.5% w/ sodium chloride 0.45%	88
dextrose 5% in lactated ringers	88
dextrose 5% w/ sodium chloride 0.2%	88
dextrose 5% w/ sodium chloride 0.45%	88
dextrose 5% w/ sodium chloride 0.9%	88
dextrose inj 10%	89
dextrose inj 5%.....	89
dextrose inj 50%	89
dextrose inj 70%	89
DIASTAT ACDL GEL 12.5-20	41
DIASTAT ACDL GEL 5-10MG	41
DIASTAT PED GEL 2.5M GEL.....	41
diazepam conc 5 mg/ml.....	41
diazepam inj 5 mg/ml	41
diazepam oral soln 1 mg/ml	41
diazepam rectal gel delivery system 10 mg	41
diazepam rectal gel delivery system 2.5 mg	41
diazepam rectal gel delivery system 20 mg	41
diazepam tab 10 mg	42
diazepam tab 2 mg	41
diazepam tab 5 mg	42
diazoxide susp 50 mg/ml	72
diclofenac potassium tab 50 mg	1
diclofenac sodium gel 1%	100
diclofenac sodium ophth soln 0.1% ..	91
diclofenac sodium tab delayed release 25 mg	1
diclofenac sodium tab delayed release 50 mg	1
diclofenac sodium tab delayed release 75 mg	1
diclofenac sodium tab er 24hr 100 mg	1
dicloxacillin sodium cap 250 mg	16
dicloxacillin sodium cap 500 mg	16
dicyclomine hcl cap 10 mg	77
dicyclomine hcl oral soln 10 mg/5ml	77
dicyclomine hcl tab 20 mg	77
didanosine delayed release capsule 200 mg	8
didanosine delayed release capsule 250 mg	8
didanosine delayed release capsule 400 mg	8
DIFICID TAB 200MG	14
diflunisal tab 500 mg	1
digitek tab 0.125mg	37
digitek tab 0.25mg	36
digoxin inj 0.25 mg/ml	37
digoxin oral soln 0.05 mg/ml	37
digoxin tab 125 mcg (0.125 mg)	37
digoxin tab 250 mcg (0.25 mg)	37
dihydroergotamine mesylate inj 1 mg/ml.....	58
dihydroergotamine mesylate nasal spray 4 mg/ml	58
DILANTIN CAP 100MG.....	42
DILANTIN CAP 30MG	42
DILANTIN CHW 50MG	42
DILANTIN-125 SUS 125/5ML.....	42
diltiazem hcl cap er 12hr 120 mg....	35
diltiazem hcl cap er 12hr 60 mg	35
diltiazem hcl cap er 12hr 90 mg	35
diltiazem hcl cap er 24hr 120 mg.....	35
diltiazem hcl cap er 24hr 180 mg.....	35
diltiazem hcl cap er 24hr 240 mg.....	35
diltiazem hcl coated beads cap er 24hr 120 mg	35
diltiazem hcl coated beads cap er 24hr 180 mg	35
diltiazem hcl coated beads cap er 24hr 240 mg	35
diltiazem hcl coated beads cap er 24hr 300 mg	35
diltiazem hcl coated beads cap er 24hr 360 mg	35
diltiazem hcl extended release beads cap er 24hr 120 mg	35

<i>diltiazem hcl extended release beads</i>	
<i>cap er 24hr 180 mg</i>	35
<i>diltiazem hcl extended release beads</i>	
<i>cap er 24hr 240 mg</i>	35
<i>diltiazem hcl extended release beads</i>	
<i>cap er 24hr 300 mg</i>	35
<i>diltiazem hcl extended release beads</i>	
<i>cap er 24hr 360 mg</i>	35
<i>diltiazem hcl extended release beads</i>	
<i>cap er 24hr 420 mg</i>	35
<i>diltiazem hcl iv soln 125 mg/25ml (5 mg/ml)</i>	35
<i>diltiazem hcl iv soln 25 mg/5ml (5 mg/ml)</i>	35
<i>diltiazem hcl iv soln 50 mg/10ml (5 mg/ml)</i>	35
<i>diltiazem hcl tab 120 mg</i>	35
<i>diltiazem hcl tab 30 mg</i>	35
<i>diltiazem hcl tab 60 mg</i>	35
<i>diltiazem hcl tab 90 mg</i>	35
<i>DIP/TET PED INJ 25-5LFU</i>	86
<i>diphenhydramine hcl inj 50 mg/ml</i> ...	93
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	78
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	78
<i>disopyramide phosphate cap 100 mg</i>	31
<i>disopyramide phosphate cap 150 mg</i>	31
<i>disulfiram tab 250 mg</i>	61
<i>disulfiram tab 500 mg</i>	61
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	42
<i>divalproex sodium tab delayed release 125 mg</i>	42
<i>divalproex sodium tab delayed release 250 mg</i>	42
<i>divalproex sodium tab delayed release 500 mg</i>	42
<i>divalproex sodium tab er 24 hr 250 mg</i>	42
<i>divalproex sodium tab er 24 hr 500 mg</i>	42
<i>docetaxel for inj conc 160 mg/8ml (20 mg/ml)</i>	18
<i>docetaxel for inj conc 20 mg/ml</i>	18
<i>docetaxel for inj conc 80 mg/4ml (20 mg/ml)</i>	18
<i>DOCETAXEL INJ 160/16ML</i>	18
<i>DOCETAXEL INJ 160/8ML</i>	18
<i>DOCETAXEL INJ 200/10</i>	18
<i>DOCETAXEL INJ 20MG/2ML</i>	18
<i>DOCETAXEL INJ 80MG/4ML</i>	18
<i>DOCETAXEL INJ 80MG/8ML</i>	18
<i>docetaxel soln for iv infusion 160 mg/16ml</i>	19
<i>docetaxel soln for iv infusion 20 mg/2ml</i>	19
<i>docetaxel soln for iv infusion 80 mg/8ml</i>	19
<i>dofetilide cap 125 mcg (0.125 mg) ..</i>	31
<i>dofetilide cap 250 mcg (0.25 mg)</i>	31
<i>dofetilide cap 500 mcg (0.5 mg).....</i>	31
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	46
<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	46
<i>donepezil hydrochloride tab 10 mg ..</i>	46
<i>donepezil hydrochloride tab 5 mg</i>	46
<i>dorzolamide hcl ophth soln 2%</i>	92
<i>dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml</i>	92
<i>DOVATO TAB 50-300MG</i>	10
<i>doxazosin mesylate tab 1 mg</i>	29
<i>doxazosin mesylate tab 2 mg</i>	29
<i>doxazosin mesylate tab 4 mg</i>	29
<i>doxazosin mesylate tab 8 mg</i>	29
<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i>	58
<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i>	58
<i>doxepin hcl cap 10 mg</i>	47
<i>doxepin hcl cap 100 mg</i>	48
<i>doxepin hcl cap 150 mg</i>	48
<i>doxepin hcl cap 25 mg</i>	47
<i>doxepin hcl cap 50 mg</i>	47
<i>doxepin hcl cap 75 mg</i>	48
<i>doxepin hcl conc 10 mg/ml</i>	48
<i>doxorubicin hcl inj 2 mg/ml</i>	17
<i>doxorubicin hcl liposomal inj (for iv infusion) 2 mg/ml</i>	17
<i>doxy 100 inj 100mg</i>	17
<i>doxycycline hyclate cap 100 mg</i>	17
<i>doxycycline hyclate cap 50 mg</i>	17
<i>doxycycline hyclate for inj 100 mg...</i>	17
<i>doxycycline hyclate tab 100 mg</i>	17
<i>doxycycline hyclate tab 20 mg</i>	17

<i>doxycycline monohydrate cap 100 mg</i>	17
<i>doxycycline monohydrate cap 50 mg</i>	17
<i>doxycycline monohydrate tab 100 mg</i>	17
<i>doxycycline monohydrate tab 50 mg</i>	17
<i>doxycycline monohydrate tab 75 mg</i>	17
DRIZALMA CAP 20MG DR	48
DRIZALMA CAP 30MG DR	48
DRIZALMA CAP 40MG DR	48
DRIZALMA CAP 60MG DR	48
<i>dronabinol cap 10 mg</i>	76
<i>dronabinol cap 2.5 mg</i>	76
<i>dronabinol cap 5 mg</i>	76
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	66
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	66
DROXIA CAP 200MG	82
DROXIA CAP 300MG	82
DROXIA CAP 400MG	82
<i>duloxetine hcl enteric coated pellets cap 20 mg (base eq)</i>	48
<i>duloxetine hcl enteric coated pellets cap 30 mg (base eq)</i>	48
<i>duloxetine hcl enteric coated pellets cap 60 mg (base eq)</i>	48
DUREZOL EMU 0.05%	91
<i>dutasteride cap 0.5 mg</i>	79
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	79
E	
<i>ec-naproxen tab 375mg</i>	1
<i>ec-naproxen tab 500mg</i>	1
EDURANT TAB 25MG	8
<i>efavirenz cap 200 mg</i>	9
<i>efavirenz cap 50 mg</i>	9
<i>efavirenz tab 600 mg</i>	9
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	10
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	10
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	10
<i>eletriptan hydrobromide tab 20 mg (base equivalent)</i>	58
<i>eletriptan hydrobromide tab 40 mg (base equivalent)</i>	58
ELIQUIS ST P TAB 5MG	80
ELIQUIS TAB 2.5MG	80
ELIQUIS TAB 5MG	80
ELLA TAB 30MG	66
<i>eluryng mis</i>	66
EMCYT CAP 140MG	17
EMEND SUS 125MG	76
EMGALITY INJ 120MG/ML	58, 59
<i>emoquette tab</i>	66
EMSAM DIS 12MG/24H	48
EMSAM DIS 6MG/24HR	48
EMSAM DIS 9MG/24HR	48
<i>emtricitabine caps 200 mg</i>	9
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	10
EMTRIVA CAP 200MG	9
EMTRIVA SOL 10MG/ML	9
EMVERM CHW 100MG	6
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	27
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	27
<i>enalapril maleate tab 10 mg</i>	28
<i>enalapril maleate tab 2.5 mg</i>	28
<i>enalapril maleate tab 20 mg</i>	28
<i>enalapril maleate tab 5 mg</i>	28
ENBREL INJ 25/0.5ML	82
ENBREL INJ 25MG	83
ENBREL INJ 50MG/ML	83
ENBREL MINI INJ 50MG/ML	83
ENBREL SRCLK INJ 50MG/ML	83
ENDARI POW 5GM	82
INGERIX-B INJ 10/0.5ML	86
INGERIX-B INJ 20MCG/ML	86
<i>enoxaparin sodium inj 100 mg/ml</i>	80
<i>enoxaparin sodium inj 120 mg/0.8ml</i>	80
<i>enoxaparin sodium inj 150 mg/ml</i>	80
<i>enoxaparin sodium inj 30 mg/0.3ml</i>	80
<i>enoxaparin sodium inj 300 mg/3ml</i>	80
<i>enoxaparin sodium inj 40 mg/0.4ml</i>	80
<i>enoxaparin sodium inj 60 mg/0.6ml</i>	80
<i>enoxaparin sodium inj 80 mg/0.8ml</i>	80
<i>enpresse-28 tab</i>	66
<i>enskyce tab</i>	66
ENSTILAR AER	99
<i>entacapone tab 200 mg</i>	51
<i>entecavir tab 0.5 mg</i>	12
<i>entecavir tab 1 mg</i>	12

ENTRESTO TAB 24-26MG	29
ENTRESTO TAB 49-51MG	29
ENTRESTO TAB 97-103MG	29
<i>enulose sol 10gm/15</i>	77
EPCLUSA TAB 200-50MG	12
EPCLUSA TAB 400-100	12
EPIDIOLEX SOL 100MG/ML	42
<i>epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)</i>	95
<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i>	95
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	95
<i>epirubicin hcl iv soln 200 mg/100ml (2 mg/ml)</i>	17
<i>epirubicin hcl iv soln 50 mg/25ml (2 mg/ml)</i>	17
<i>epitol tab 200mg</i>	42
EPIVIR HBV SOL 5MG/ML.....	12
<i>eplerenone tab 25 mg</i>	28
<i>eplerenone tab 50 mg</i>	29
<i>ergotamine w/ caffeine tab 1-100 mg</i>	59
ERIVEDGE CAP 150MG	19
ERLEADA TAB 60MG.....	21
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	23
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	23
<i>erlotinib hcl tab 25 mg (base equivalent)</i>	23
<i>errin tab 0.35mg</i>	67
<i>ertapenem sodium for inj 1 gm (base equivalent)</i>	6
<i>ery-tab tab 250mg ec</i>	14
<i>ery-tab tab 333mg ec</i>	14
<i>ery-tab tab 500mg ec</i>	14
ERYTHROCIN INJ 500MG	14
<i>erythrocin tab 250mg</i>	14
<i>erythromycin ethylsuccinate tab 400 mg</i>	14
<i>erythromycin gel 2%</i>	97
<i>erythromycin ophth oint 5 mg/gm</i>	90
<i>erythromycin pads 2%</i>	97
<i>erythromycin soln 2%</i>	97
<i>erythromycin tab 250 mg</i>	14
<i>erythromycin tab 500 mg</i>	14
<i>erythromycin tab delayed release 250 mg</i>	14
<i>erythromycin tab delayed release 333 mg</i>	14
<i>erythromycin tab delayed release 500 mg</i>	14
<i>erythromycin w/ delayed release particles cap 250 mg</i>	14
ESBRIET CAP 267MG	95
ESBRIET TAB 267MG	95
ESBRIET TAB 801MG	95
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	48
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	48
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	48
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	48
<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>	79
<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>	79
<i>estradiol tab 0.5 mg</i>	70
<i>estradiol tab 1 mg</i>	70
<i>estradiol tab 2 mg</i>	70
<i>estradiol td patch weekly 0.025 mg/24hr</i>	70
<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	70
<i>estradiol td patch weekly 0.05 mg/24hr</i>	70
<i>estradiol td patch weekly 0.06 mg/24hr</i>	70
<i>estradiol td patch weekly 0.075 mg/24hr</i>	70
<i>estradiol td patch weekly 0.1 mg/24hr</i>	70
<i>estradiol vaginal cream 0.1 mg/gm</i> ..	70
<i>estradiol vaginal tab 10 mcg</i>	70
<i>estradiol valerate im in oil 20 mg/ml</i> 70	
<i>estradiol valerate im in oil 40 mg/ml</i> 70	
<i>ethambutol hcl tab 100 mg</i>	11
<i>ethambutol hcl tab 400 mg</i>	11
<i>ethosuximide cap 250 mg</i>	42
<i>ethosuximide soln 250 mg/5ml</i>	42
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	67

<i>ethynodiol diacetate & ethinyl estradiol</i>	
tab 1 mg-50 mcg	67
<i>etodolac cap 200 mg</i>	1
<i>etodolac cap 300 mg</i>	1
<i>etodolac tab 400 mg</i>	1
<i>etodolac tab 500 mg</i>	1
<i>etodolac tab er 24hr 400 mg</i>	1
<i>etodolac tab er 24hr 500 mg</i>	1
<i>etodolac tab er 24hr 600 mg</i>	1
<i>etongestrel-ethinyl estradiol va ring</i>	
0.120-0.015 mg/24hr	67
<i>etoposide inj 100 mg/5ml (20 mg/ml)</i>	
.....	26
<i>etoposide inj 500 mg/25ml (20 mg/ml)</i>	
.....	26
<i>euthyrox tab 100mcg</i>	74
<i>euthyrox tab 112mcg</i>	74
<i>euthyrox tab 125mcg</i>	74
<i>euthyrox tab 137mcg</i>	74
<i>euthyrox tab 150mcg</i>	74
<i>euthyrox tab 175mcg</i>	74
<i>euthyrox tab 200mcg</i>	74
<i>euthyrox tab 25mcg</i>	74
<i>euthyrox tab 50mcg</i>	74
<i>euthyrox tab 75mcg</i>	74
<i>euthyrox tab 88mcg</i>	74
<i>everolimus tab 0.25 mg</i>	85
<i>everolimus tab 0.5 mg</i>	85
<i>everolimus tab 0.75 mg</i>	85
<i>everolimus tab 2.5 mg</i>	23
<i>everolimus tab 5 mg</i>	23
<i>everolimus tab 7.5 mg</i>	23
<i>EVOTAZ TAB 300-150</i>	10
<i>exemestane tab 25 mg</i>	21
<i>ezetimibe tab 10 mg</i>	32
F	
<i>FABRAZYME INJ 35MG</i>	69
<i>FABRAZYME INJ 5MG</i>	69
<i>falmina tab</i>	67
<i>famciclovir tab 125 mg</i>	12
<i>famciclovir tab 250 mg</i>	12
<i>famciclovir tab 500 mg</i>	12
<i>famotidine for susp 40 mg/5ml</i>	77
<i>famotidine in nacl 0.9% iv soln 20</i>	
<i>mg/50ml</i>	77
<i>famotidine inj 20 mg/2ml</i>	77
<i>famotidine inj 200 mg/20ml</i>	77
<i>famotidine inj 40 mg/4ml</i>	77
<i>famotidine tab 20 mg</i>	77
<i>famotidine tab 40 mg</i>	77
<i>FANAPT PAK</i>	52
<i>FANAPT TAB 10MG</i>	53
<i>FANAPT TAB 12MG</i>	53
<i>FANAPT TAB 1MG</i>	52
<i>FANAPT TAB 2MG</i>	53
<i>FANAPT TAB 4MG</i>	53
<i>FANAPT TAB 6MG</i>	53
<i>FANAPT TAB 8MG</i>	53
<i>FARXIGA TAB 10MG</i>	63
<i>FARXIGA TAB 5MG</i>	63
<i>FARYDAK CAP 10MG</i>	19
<i>FARYDAK CAP 20MG</i>	19
<i>FASENRA INJ 30MG/ML</i>	95
<i>FASENRA PEN INJ 30MG/ML</i>	95
<i>felbamate susp 600 mg/5ml</i>	42
<i>felbamate tab 400 mg</i>	42
<i>felbamate tab 600 mg</i>	42
<i>felodipine tab er 24hr 10 mg</i>	36
<i>felodipine tab er 24hr 2.5 mg</i>	35
<i>felodipine tab er 24hr 5 mg</i>	35
<i>femynor tab 0.25-35</i>	67
<i>fenofibrate micronized cap 134 mg</i> ..	32
<i>fenofibrate micronized cap 200 mg</i> ..	32
<i>fenofibrate micronized cap 67 mg</i> ..	32
<i>fenofibrate tab 145 mg</i>	33
<i>fenofibrate tab 160 mg</i>	33
<i>fenofibrate tab 48 mg</i>	32
<i>fenofibrate tab 54 mg</i>	32
<i>fentanyl citrate lozenge on a handle</i>	
<i>1200 mcg</i>	2
<i>fentanyl citrate lozenge on a handle</i>	
<i>1600 mcg</i>	2
<i>fentanyl citrate lozenge on a handle</i>	
<i>200 mcg</i>	2
<i>fentanyl citrate lozenge on a handle</i>	
<i>400 mcg</i>	2
<i>fentanyl citrate lozenge on a handle</i>	
<i>600 mcg</i>	2
<i>fentanyl citrate lozenge on a handle</i>	
<i>800 mcg</i>	2
<i>fentanyl td patch 72hr 100 mcg/hr</i> ..	2
<i>fentanyl td patch 72hr 12 mcg/hr</i> ..	2
<i>fentanyl td patch 72hr 25 mcg/hr</i> ..	2
<i>fentanyl td patch 72hr 50 mcg/hr</i> ..	2
<i>fentanyl td patch 72hr 75 mcg/hr</i> ..	2
<i>FETZIMA CAP 120MG</i>	48

FETZIMA CAP 20MG	48
FETZIMA CAP 40MG	48
FETZIMA CAP 80MG	48
FETZIMA CAP TITRATIO.....	48
FIASP FLEX INJ TOUCH.....	62
FIASP INJ 100/ML	62
FIASP PENFIL INJ U-100	62
<i>finasteride tab 5 mg</i>	79
FINTEPLA SOL 2.2MG/ML	42
<i>flac oil 0.01%.....</i>	101
FLAREX SUS 0.1% OP	91
FLEBOGAMMA INJ 10/100ML	84
FLEBOGAMMA INJ 10/200ML	84
FLEBOGAMMA INJ 20/200ML	84
FLEBOGAMMA INJ 20/400ML	84
FLEBOGAMMA INJ 5GM/50ML	84
FLEBOGAMMA INJ DIF 5%.....	84
<i>flecainide acetate tab 100 mg.....</i>	31
<i>flecainide acetate tab 150 mg.....</i>	31
<i>flecainide acetate tab 50 mg</i>	31
FLOVENT DISK AER 100MCG	96
FLOVENT DISK AER 250MCG	96
FLOVENT DISK AER 50MCG.....	96
FLOVENT HFA AER 110MCG.....	96
FLOVENT HFA AER 220MCG.....	96
FLOVENT HFA AER 44MCG	96
<i>fluconazole for susp 10 mg/ml</i>	7
<i>fluconazole for susp 40 mg/ml</i>	7
<i>fluconazole in nacl 0.9% inj 200 mg/100ml.....</i>	7
<i>fluconazole in nacl 0.9% inj 400 mg/200ml.....</i>	7
<i>fluconazole tab 100 mg</i>	7
<i>fluconazole tab 150 mg</i>	7
<i>fluconazole tab 200 mg</i>	7
<i>fluconazole tab 50 mg</i>	7
<i>flucytosine cap 250 mg</i>	7
<i>flucytosine cap 500 mg</i>	8
<i>fludrocortisone acetate tab 0.1 mg ...</i>	71
<i>flunisolide nasal soln 25 mcg/act (0.025%).....</i>	96
<i>fluocinolone acetonide (otic) oil 0.01%</i>	101
<i>fluocinolone acetonide cream 0.01%</i>	99
<i>fluocinolone acetonide cream 0.025%</i>	99
<i>fluocinolone acetonide oil 0.01% (body oil)</i>	99
<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>	99
<i>fluocinolone acetonide oint 0.025%</i>	99
<i>fluocinolone acetonide soln 0.01%</i>	99
<i>fluocinonide cream 0.05%</i>	99
<i>fluocinonide emulsified base cream 0.05%</i>	99
<i>fluocinonide gel 0.05%</i>	99
<i>fluocinonide oint 0.05%</i>	99
<i>fluocinonide soln 0.05%</i>	99
<i>fluorometholone ophth susp 0.1%</i>	91
<i>fluorouracil cream 5%</i>	100
<i>fluorouracil iv soln 1 gm/20ml (50 mg/ml)</i>	18
<i>fluorouracil iv soln 2.5 gm/50ml (50 mg/ml)</i>	18
<i>fluorouracil iv soln 5 gm/100ml (50 mg/ml)</i>	18
<i>fluorouracil iv soln 500 mg/10ml (50 mg/ml)</i>	18
<i>fluorouracil soln 2%</i>	100
<i>fluorouracil soln 5%</i>	100
<i>fluoxetine hcl cap 10 mg</i>	48
<i>fluoxetine hcl cap 20 mg</i>	48
<i>fluoxetine hcl cap 40 mg</i>	48
<i>fluoxetine hcl solution 20 mg/5ml</i>	48
<i>fluphenazine decanoate inj 25 mg/ml/53</i>	53
<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	53
<i>fluphenazine hcl inj 2.5 mg/ml</i>	53
<i>fluphenazine hcl oral conc 5 mg/ml</i>	53
<i>fluphenazine hcl tab 1 mg</i>	53
<i>fluphenazine hcl tab 10 mg</i>	53
<i>fluphenazine hcl tab 2.5 mg</i>	53
<i>fluphenazine hcl tab 5 mg</i>	53
<i>flurbiprofen sodium ophth soln 0.03%</i>	91
<i>flurbiprofen tab 100 mg</i>	1
<i>flutamide cap 125 mg</i>	21
<i>fluticasone propionate cream 0.05%</i>	99
<i>fluticasone propionate nasal susp 50 mcg/act</i>	96
<i>fluticasone propionate oint 0.005%</i>	99
<i>fluvoxamine maleate tab 100 mg</i>	40
<i>fluvoxamine maleate tab 25 mg</i>	40
<i>fluvoxamine maleate tab 50 mg</i>	40
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	80

<i>fondaparinux sodium subcutaneous inj</i>	
2.5 mg/0.5ml	80
<i>fondaparinux sodium subcutaneous inj</i>	
5 mg/0.4ml	80
<i>fondaparinux sodium subcutaneous inj</i>	
7.5 mg/0.6ml	80
<i>FORTEO SOL 600/2.4</i>	72
<i>fosamprenavir calcium tab 700 mg</i>	
(base equiv)	9
<i>fosinopril sodium & hydrochlorothiazide</i>	
tab 10-12.5 mg	27
<i>fosinopril sodium & hydrochlorothiazide</i>	
tab 20-12.5 mg	27
<i>fosinopril sodium tab 10 mg</i>	28
<i>fosinopril sodium tab 20 mg</i>	28
<i>fosinopril sodium tab 40 mg</i>	28
<i>FREAMINE HBC INJ 6.9%</i>	88
<i>FREAMINE III INJ 10%</i>	88
<i>fulvestrant inj 250 mg/5ml</i>	21
<i>furosemide inj 10 mg/ml</i>	37
<i>furosemide oral soln 10 mg/ml</i>	37
<i>furosemide oral soln 8 mg/ml</i>	37
<i>furosemide tab 20 mg</i>	37
<i>furosemide tab 40 mg</i>	37
<i>furosemide tab 80 mg</i>	37
<i>FUZEON INJ 90MG</i>	9
<i>fyavolv tab 0.5-2.5</i>	70
<i>FYCOMPA SUS 0.5MG/ML</i>	42
<i>FYCOMPA TAB 10MG</i>	42
<i>FYCOMPA TAB 12MG</i>	42
<i>FYCOMPA TAB 2MG</i>	42
<i>FYCOMPA TAB 4MG</i>	42
<i>FYCOMPA TAB 6MG</i>	42
<i>FYCOMPA TAB 8MG</i>	42
G	
<i> gabapentin cap 100 mg</i>	42
<i> gabapentin cap 300 mg</i>	42
<i> gabapentin cap 400 mg</i>	43
<i> gabapentin oral soln 250 mg/5ml</i>	43
<i> gabapentin tab 600 mg</i>	43
<i> gabapentin tab 800 mg</i>	43
<i> galantamine hydrobromide cap er 24hr</i>	
16 mg	46
<i> galantamine hydrobromide cap er 24hr</i>	
24 mg	46
<i> galantamine hydrobromide cap er 24hr</i>	
8 mg	46
<i> galantamine hydrobromide oral soln 4</i>	
mg/ml.....	46
<i> galantamine hydrobromide tab 12 mg</i>	
.....	46
<i> galantamine hydrobromide tab 4 mg</i> 46	
<i> galantamine hydrobromide tab 8 mg</i> 46	
<i> GAMASTAN INJ</i>	84
<i> GAMMAGARD INJ 10GM/100</i>	84
<i> GAMMAGARD INJ 1GM/10ML</i>	84
<i> GAMMAGARD INJ 2.5GM/25</i>	84
<i> GAMMAGARD INJ 20GM/200</i>	84
<i> GAMMAGARD INJ 30GM/300</i>	84
<i> GAMMAGARD INJ 5GM/50ML</i>	84
<i> GAMMAGARD SD INJ 10GM HU</i>	84
<i> GAMMAGARD SD INJ 5GM HU</i>	84
<i> GAMMAKED INJ 10GM/100</i>	84
<i> GAMMAKED INJ 1GM/10ML</i>	84
<i> GAMMAKED INJ 20GM/200</i>	84
<i> GAMMAKED INJ 5GM/50ML</i>	84
<i> GAMMAPLEX INJ 10%</i>	84
<i> GAMMAPLEX INJ 5%</i>	84
<i> GAMUNEX-C INJ 10GM/100</i>	84
<i> GAMUNEX-C INJ 1GM/10ML</i>	84
<i> GAMUNEX-C INJ 2.5GM/25</i>	84
<i> GAMUNEX-C INJ 20GM/200</i>	84
<i> GAMUNEX-C INJ 40/400ML</i>	84
<i> GAMUNEX-C INJ 5GM/50ML</i>	84
<i> ganciclovir sodium for inj 500 mg</i> ...	12
<i> GARDASIL 9 INJ</i>	86
<i> gatifloxacin ophth soln 0.5%</i>	90
<i> GATTEX KIT 5MG</i>	78
<i> GAUZE PADS 2</i>	62
<i> gavilyte-c sol</i>	77
<i> gavilyte-g sol</i>	77
<i> gavilyte-n sol flav pk</i>	77
<i> GAVRETO CAP 100MG</i>	23
<i> gemcitabine hcl for inj 1 gm</i>	18
<i> gemcitabine hcl for inj 2 gm</i>	18
<i> gemcitabine hcl for inj 200 mg</i>	18
<i> gemcitabine hcl inj 1 gm/26.3ml (38</i>	
mg/ml) (base equiv)	18
<i> gemcitabine hcl inj 2 gm/52.6ml (38</i>	
mg/ml) (base equiv)	18
<i> gemcitabine hcl inj 200 mg/5.26ml (38</i>	
mg/ml) (base equiv)	18
<i> gemfibrozil tab 600 mg</i>	33
<i> generlac sol 10gm/15</i>	78
<i> gengraf cap 100mg</i>	85

gengraf cap 25mg.....	85
gengraf sol 100mg/ml	85
GENOTROPIN INJ 0.2MG.....	72
GENOTROPIN INJ 0.4MG.....	72
GENOTROPIN INJ 0.6MG.....	72
GENOTROPIN INJ 0.8MG.....	72
GENOTROPIN INJ 1.2MG.....	72
GENOTROPIN INJ 1.4MG.....	72
GENOTROPIN INJ 1.6MG.....	72
GENOTROPIN INJ 1.8MG.....	72
GENOTROPIN INJ 12MG.....	72
GENOTROPIN INJ 1MG.....	72
GENOTROPIN INJ 2MG.....	72
GENOTROPIN INJ 5MG.....	72
gentak oin 0.3% op.....	90
gentamicin in saline inj 0.8 mg/ml	5
gentamicin in saline inj 1 mg/ml	5
gentamicin in saline inj 1.2 mg/ml	5
gentamicin in saline inj 1.6 mg/ml	5
gentamicin in saline inj 2 mg/ml	5
gentamicin sulfate cream 0.1%.....	98
gentamicin sulfate inj 10 mg/ml.....	5
gentamicin sulfate inj 40 mg/ml.....	5
gentamicin sulfate oint 0.1%.....	98
gentamicin sulfate ophth soln 0.3%..	90
GENVOYA TAB.....	10
GEODON INJ 20MG	53
GILENYA CAP 0.5MG	60
GILOTrif TAB 20MG	23
GILOTrif TAB 30MG	23
GILOTrif TAB 40MG	23
glatiramer acetate soln prefilled syringe 20 mg/ml.....	60
glatiramer acetate soln prefilled syringe 40 mg/ml.....	60
glatopa inj 20mg/ml	60
glatopa inj 40mg/ml	60
GLEOSTINE CAP 100MG.....	17
GLEOSTINE CAP 10MG	17
GLEOSTINE CAP 40MG	17
glimepiride tab 1 mg	63
glimepiride tab 2 mg	63
glimepiride tab 4 mg	63
glipizide tab 10 mg	63
glipizide tab 5 mg	63
glipizide tab er 24hr 10 mg	64
glipizide tab er 24hr 2.5 mg	63
glipizide tab er 24hr 5 mg	64
glipizide xl tab 10mg.....	64
glipizide xl tab 2.5mg.....	64
glipizide xl tab 5mg	64
glipizide-metformin hcl tab 2.5-250 mg	64
glipizide-metformin hcl tab 2.5-500 mg	64
glipizide-metformin hcl tab 5-500 mg	64
GLUCAGEN INJ HYPOKIT	72
GLUCAGON KIT 1MG.....	72
glycopyrrolate tab 1 mg	77
glycopyrrolate tab 2 mg	77
glydo gel 2%	100
GLYXAMBI TAB 10-5 MG.....	64
GLYXAMBI TAB 25-5 MG.....	64
GOLYTELY SOL.....	78
granisetron hcl inj 1 mg/ml.....	76
granisetron hcl inj 4 mg/4ml (1 mg/ml)	76
granisetron hcl tab 1 mg	76
griseofulvin microsize susp 125 mg/5ml	8
griseofulvin microsize tab 500 mg.....	8
griseofulvin ultramicrosize tab 125 mg	8
griseofulvin ultramicrosize tab 250 mg	8
guanfacine hcl tab er 24hr 1 mg (base equiv)	57
guanfacine hcl tab er 24hr 2 mg (base equiv)	57
guanfacine hcl tab er 24hr 3 mg (base equiv)	57
guanfacine hcl tab er 24hr 4 mg (base equiv)	57
GVOKE HYPO 2 INJ .5/.1ML	72
GVOKE HYPO 2 INJ 1MG/.2ML.....	72
GVOKE PFS INJ	72
H	
HAEGARDA INJ 2000UNIT.....	82
HAEGARDA INJ 3000UNIT.....	82
halobetasol propionate cream 0.05% 99	
halobetasol propionate oint 0.05%... 99	
haloperidol decanoate im soln 100 mg/ml.....	53
haloperidol decanoate im soln 50 mg/ml.....	53
haloperidol lactate inj 5 mg/ml.....	53
haloperidol lactate oral conc 2 mg/ml/53	
haloperidol tab 0.5 mg	53

<i>haloperidol tab 1 mg</i>	53
<i>haloperidol tab 10 mg</i>	53
<i>haloperidol tab 2 mg</i>	53
<i>haloperidol tab 20 mg</i>	53
<i>haloperidol tab 5 mg</i>	53
HARVONI PAK	12
HARVONI PAK 45-200MG	12
HARVONI TAB 45-200MG	12
HARVONI TAB 90-400MG	12
HAVRIX INJ 1440UNIT	86
HAVRIX INJ 720UNIT	86
<i>heather tab 0.35mg</i>	67
HEP SOD/NACL INJ 25000UNT	80
<i>heparin sodium (porcine) 100 unit/ml in d5w</i>	80
<i>heparin sodium (porcine) inj 1000 unit/ml</i>	81
<i>heparin sodium (porcine) inj 10000 unit/ml</i>	81
<i>heparin sodium (porcine) inj 20000 unit/ml</i>	81
<i>heparin sodium (porcine) inj 5000 unit/ml</i>	81
<i>heparin sodium (porcine)-dextrose iv sol 20000 unit/500ml-5%</i>	81
<i>heparin sodium (porcine)-dextrose iv sol 25000 unit/500ml-5%</i>	81
HEPARIN/NACL INJ 25000UNT	81
<i>hepatamine sol 8%</i>	88
HERCEP HYLEC SOL 60-10000	19
HERCEPTIN INJ 150MG	19
HERCEPTIN INJ 440MG	19
HERZUMA INJ 150MG	19
HERZUMA INJ 420MG	19
HETLIOZ CAP 20MG	58
HIBERIX SOL 10MCG.....	86
HUMIRA INJ 10/0.1ML	83
HUMIRA INJ 10MG/0.2	83
HUMIRA INJ 20/0.2ML	83
HUMIRA INJ 40/0.4ML	83
HUMIRA KIT 20MG/0.4	83
HUMIRA KIT 40MG/0.8	83
HUMIRA PEDIA INJ CROHNS.....	83
HUMIRA PEN INJ 40/0.4ML.....	83
HUMIRA PEN INJ 40MG/0.8	83
HUMIRA PEN INJ CD/UC/HS	83
HUMIRA PEN INJ PS/UV	83
HUMIRA PEN KIT CD/UC/HS	83
HUMIRA PEN KIT PS/UV	83
HUMULIN R INJ U-500.....	62
<i>hydralazine hcl inj 20 mg/ml</i>	38
<i>hydralazine hcl tab 10 mg</i>	38
<i>hydralazine hcl tab 100 mg</i>	38
<i>hydralazine hcl tab 25 mg</i>	38
<i>hydralazine hcl tab 50 mg</i>	38
<i>hydrochlorothiazide cap 12.5 mg</i>	37
<i>hydrochlorothiazide tab 12.5 mg</i>	37
<i>hydrochlorothiazide tab 25 mg</i>	37
<i>hydrochlorothiazide tab 50 mg</i>	37
<i>hydrocodone-acetaminophen soln 7.5- 325 mg/15ml</i>	2
<i>hydrocodone-acetaminophen tab 10- 325 mg</i>	3
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	2
<i>hydrocodone-acetaminophen tab 7.5- 325 mg</i>	3
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>	3
<i>hydrocortisone butyrate cream 0.1%</i>	99
<i>hydrocortisone butyrate oint 0.1%</i>	99
<i>hydrocortisone cream 1%</i>	99
<i>hydrocortisone cream 2.5%</i>	99
<i>hydrocortisone enema 100 mg/60ml</i>	77
<i>hydrocortisone lotion 2.5%</i>	99
<i>hydrocortisone oint 2.5%</i>	99
<i>hydrocortisone perianal cream 2.5%</i>	100
<i>hydrocortisone tab 10 mg</i>	71
<i>hydrocortisone tab 20 mg</i>	71
<i>hydrocortisone tab 5 mg</i>	71
<i>hydromorphone hcl liqd 1 mg/ml</i>	3
<i>hydromorphone hcl preservative free (pf) inj 10 mg/ml</i>	3
<i>hydromorphone hcl tab 2 mg</i>	3
<i>hydromorphone hcl tab 4 mg</i>	3
<i>hydromorphone hcl tab 8 mg</i>	3
<i>hydroxychloroquine sulfate tab 200 mg</i>	83
<i>hydroxyurea cap 500 mg</i>	26
<i>hydroxyzine hcl im soln 25 mg/ml</i>	93
<i>hydroxyzine hcl im soln 50 mg/ml</i>	93
<i>hydroxyzine hcl syrup 10 mg/5ml</i>	93
<i>hydroxyzine hcl tab 10 mg</i>	93
<i>hydroxyzine hcl tab 25 mg</i>	93
<i>hydroxyzine hcl tab 50 mg</i>	93

<i>hydroxyzine pamoate cap 25 mg</i>	93
<i>hydroxyzine pamoate cap 50 mg</i>	93
HYSINGLA ER TAB 100 MG	3
HYSINGLA ER TAB 120 MG	3
HYSINGLA ER TAB 20 MG	3
HYSINGLA ER TAB 30 MG	3
HYSINGLA ER TAB 40 MG	3
HYSINGLA ER TAB 60 MG	3
HYSINGLA ER TAB 80 MG	3
I	
<i>ibandronate sodium tab 150 mg (base equivalent)</i>	65
IBRANCE CAP 100MG	19
IBRANCE CAP 125MG	19
IBRANCE CAP 75MG	19
IBRANCE TAB 100MG	19
IBRANCE TAB 125MG	19
IBRANCE TAB 75MG	19
<i>ibuprofen susp 100 mg/5ml</i>	1
<i>ibuprofen tab 400 mg</i>	1
<i>ibuprofen tab 600 mg</i>	1
<i>ibuprofen tab 800 mg</i>	1
<i>icatibant acetate inj 30 mg/3ml (base equivalent)</i>	82
ICLUSIG TAB 15MG	23
ICLUSIG TAB 45MG	23
IDHIFA TAB 100MG	19
IDHIFA TAB 50MG	19
ILEVRO DRO 0.3% OP	91
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	23
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	23
IMBRUWICA CAP 140MG	23
IMBRUWICA CAP 70MG	23
IMBRUWICA TAB 140MG	23
IMBRUWICA TAB 280MG	23
IMBRUWICA TAB 420MG	23
IMBRUWICA TAB 560MG	23
<i>imipenem-cilastatin intravenous for soln 250 mg</i>	6
<i>imipenem-cilastatin intravenous for soln 500 mg</i>	6
<i>imipramine hcl tab 10 mg</i>	48
<i>imipramine hcl tab 25 mg</i>	48
<i>imipramine hcl tab 50 mg</i>	49
<i>imiquimod cream 5%</i>	100
IMOVAZ RABIE INJ 2.5/ML	86
<i>incassia tab 0.35mg</i>	67
INCRELEX INJ 40MG/4ML	72
INCRUSE ELPT INH 62.5MCG	93
<i>indapamide tab 1.25 mg</i>	37
<i>indapamide tab 2.5 mg</i>	37
INFANRIX INJ	86
INGREZZA CAP 40-80MG	59
INGREZZA CAP 40MG	60
INGREZZA CAP 80MG	60
INLYTA TAB 1MG	24
INLYTA TAB 5MG	24
INQOVI TAB 35-100MG	26
INREBIC CAP 100MG	24
INSULIN PEN NEEDLE	62
INSULIN SAFETY NEEDLES	62
INSULIN SYRINGE	63
INTELENCE TAB 100MG	9
INTELENCE TAB 200MG	9
INTELENCE TAB 25MG	9
INTRALIPID INJ 20%	88
INTRALIPID INJ 30%	88
INTRON A INJ 10MU	85
INTRON A INJ 18MU	85
INTRON A INJ 25MU	85
INTRON A INJ 50MU	85
<i>introvale tab</i>	67
INVEGA SUST INJ 117/0.75	53
INVEGA SUST INJ 156MG/ML	53
INVEGA SUST INJ 234/1.5	53
INVEGA SUST INJ 39/0.25	53
INVEGA SUST INJ 78/0.5ML	53
INVEGA TRINZ INJ 273MG	53
INVEGA TRINZ INJ 410MG	53
INVEGA TRINZ INJ 546MG	54
INVEGA TRINZ INJ 819MG	54
INVIRASE TAB 500MG	9
IPOL INJ INACTIVE	86
<i>ipratropium bromide inhal soln 0.02%</i>	93
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	93
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	93
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	92
<i>irbesartan tab 150 mg</i>	30
<i>irbesartan tab 300 mg</i>	30
<i>irbesartan tab 75 mg</i>	30

<i>irbesartan-hydrochlorothiazide tab</i>	
<i>150-12.5 mg</i>	30
<i>irbesartan-hydrochlorothiazide tab</i>	
<i>300-12.5 mg</i>	30
IRESSA TAB 250MG	24
<i>irinotecan hcl inj 100 mg/5ml (20</i>	
<i>mg/ml)</i>	26
<i>irinotecan hcl inj 300 mg/15ml (20</i>	
<i>mg/ml)</i>	26
<i>irinotecan hcl inj 40 mg/2ml (20</i>	
<i>mg/ml)</i>	26
<i>irinotecan hcl inj 500 mg/25ml (20</i>	
<i>mg/ml)</i>	27
ISENTRESS CHW 100MG	9
ISENTRESS CHW 25MG	9
ISENTRESS HD TAB 600MG	9
ISENTRESS POW 100MG	9
ISENTRESS TAB 400MG	9
<i>isibloom tab</i>	67
ISOLYTE-P INJ /D5W	89
ISOLYTE-S INJ	89
<i>isoniazid syrup 50 mg/5ml</i>	11
<i>isoniazid tab 100 mg</i>	11
<i>isoniazid tab 300 mg</i>	11
<i>isosorbide dinitrate tab 10 mg</i>	38
<i>isosorbide dinitrate tab 20 mg</i>	38
<i>isosorbide dinitrate tab 30 mg</i>	38
<i>isosorbide dinitrate tab 5 mg</i>	38
<i>isosorbide mononitrate tab 10 mg</i>	39
<i>isosorbide mononitrate tab 20 mg</i>	39
<i>isosorbide mononitrate tab er 24hr 120</i>	
<i>mg</i>	39
<i>isosorbide mononitrate tab er 24hr 30</i>	
<i>mg</i>	39
<i>isosorbide mononitrate tab er 24hr 60</i>	
<i>mg</i>	39
<i>isotretinoin cap 10 mg</i>	97
<i>isotretinoin cap 20 mg</i>	97
<i>isotretinoin cap 30 mg</i>	97
<i>isotretinoin cap 40 mg</i>	97
<i>isradipine cap 2.5 mg</i>	36
<i>isradipine cap 5 mg</i>	36
<i>itraconazole cap 100 mg</i>	8
<i>ivermectin tab 3 mg</i>	6
IXIARO INJ	86
J	
JADENU SPRKL GRA 180MG	66
JADENU SPRKL GRA 360MG	66
JADENU SPRKL GRA 90MG	65
JADENU TAB 180MG	66
JAKAFI TAB 10MG	24
JAKAFI TAB 15MG	24
JAKAFI TAB 20MG	24
JAKAFI TAB 25MG	24
JAKAFI TAB 5MG	24
<i>jantoven tab 10mg</i>	81
<i>jantoven tab 1mg</i>	81
<i>jantoven tab 2.5mg</i>	81
<i>jantoven tab 2mg</i>	81
<i>jantoven tab 3mg</i>	81
<i>jantoven tab 4mg</i>	81
<i>jantoven tab 5mg</i>	81
<i>jantoven tab 6mg</i>	81
<i>jantoven tab 7.5mg</i>	81
JANUMET TAB 50-1000	64
JANUMET TAB 50-500MG	64
JANUMET XR TAB 100-1000	64
JANUMET XR TAB 50-1000	64
JANUMET XR TAB 50-500MG	64
JANUVIA TAB 100MG	64
JANUVIA TAB 25MG	64
JANUVIA TAB 50MG	64
JARDIANCE TAB 10MG	64
JARDIANCE TAB 25MG	64
<i>jasmiel tab 3-0.02mg</i>	67
JENTADUETO TAB 2.5-1000	64
JENTADUETO TAB 2.5-500	64
JENTADUETO TAB 2.5-850	64
JENTADUETO TAB XR	64
<i>jinteli tab 1mg-5mcg</i>	70
<i>jolivette tab 0.35mg</i>	67
<i>juleber tab</i>	67
JULUCA TAB 50-25MG	10
<i>junel 1.5/30 tab</i>	67
<i>junel 1/20 tab</i>	67
<i>junel fe tab 1.5/30</i>	67
<i>junel fe tab 1/20</i>	67
JUXTAPID CAP 10MG	33
JUXTAPID CAP 20MG	33
JUXTAPID CAP 30MG	33
JUXTAPID CAP 5MG	33
K	
KADCYLA INJ 100MG	19
KADCYLA INJ 160MG	20
KALETRA TAB 100-25MG	10
KALETRA TAB 200-50MG	11

KALYDECO PAK 25MG.....	95
KALYDECO PAK 50MG.....	95
KALYDECO PAK 75MG.....	95
KALYDECO TAB 150MG.....	95
KANJINTI INJ 420MG.....	20
KANJINTI SOL 150MG.....	20
<i>kariva tab 28 day.....</i>	67
<i>kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj</i>	89
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.2% inj.....</i>	89
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj</i>	89
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj.....</i>	89
<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i>	89
<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>	89
<i>kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj</i>	89
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj</i>	89
<i>kcl 40 meq/l (0.3%) in nacl 0.9% inj</i>	89
KCL/D5W/NACL INJ 0.15/0.2.....	89
KCL/D5W/NACL INJ 0.3/0.9%	89
<i>kelnor 1/50 tab</i>	67
<i>kelnor tab 1/35</i>	67
<i>ketoconazole cream 2%.....</i>	98
<i>ketoconazole shampoo 2%.....</i>	98
<i>ketoconazole tab 200 mg</i>	8
<i>ketorolac tromethamine ophth soln 0.4%.....</i>	91
<i>ketorolac tromethamine ophth soln 0.5%.....</i>	91
KEYTRUDA INJ 100MG/4M.....	20
KINRIX INJ	86
KISQALI 200 PAK FEMARA	20
KISQALI 400 PAK FEMARA	20
KISQALI 600 PAK FEMARA	20
KISQALI TAB 200DOSE.....	20
KISQALI TAB 400DOSE.....	20
KISQALI TAB 600DOSE.....	20
<i>klor-con 10 tab 10meq er</i>	87
<i>klor-con 8 tab 8meq er</i>	87
KORLYM TAB 300MG	72
<i>kurvelo tab 0.15/30</i>	67
KUVAN POW 100MG	69
KUVAN POW 500MG.....	69
KUVAN TAB 100MG.....	69
L	
<i>labetalol hcl tab 100 mg</i>	34
<i>labetalol hcl tab 200 mg</i>	34
<i>labetalol hcl tab 300 mg</i>	34
<i>lactated ringer's solution</i>	89
<i>lactic acid (ammonium lactate) cream 12%</i>	100
<i>lactic acid (ammonium lactate) lotion 12%</i>	100
<i>lactulose (encephalopathy) solution 10 gm/15ml</i>	78
<i>lactulose solution 10 gm/15ml</i>	78
<i>lamivudine oral soln 10 mg/ml</i>	9
<i>lamivudine tab 100 mg (hbv)</i>	12
<i>lamivudine tab 150 mg</i>	9
<i>lamivudine tab 300 mg</i>	9
<i>lamivudine-zidovudine tab 150-300 mg</i>	11
<i>lamotrigine tab 100 mg</i>	43
<i>lamotrigine tab 150 mg</i>	43
<i>lamotrigine tab 200 mg</i>	43
<i>lamotrigine tab 25 mg</i>	43
<i>lamotrigine tab chewable dispersible 25 mg</i>	43
<i>lamotrigine tab chewable dispersible 5 mg</i>	43
<i>lamotrigine tab er 24hr 100 mg</i>	43
<i>lamotrigine tab er 24hr 200 mg</i>	43
<i>lamotrigine tab er 24hr 25 mg</i>	43
<i>lamotrigine tab er 24hr 250 mg</i>	43
<i>lamotrigine tab er 24hr 300 mg</i>	43
<i>lamotrigine tab er 24hr 50 mg</i>	43
<i>lansoprazole cap delayed release 15 mg</i>	79
<i>lansoprazole cap delayed release 30 mg</i>	79
<i>lapatinib ditosylate tab 250 mg (base equiv)</i>	24
<i>larin fe tab 1.5/30</i>	67
<i>larin fe tab 1/20</i>	67
<i>larin tab 1.5/30</i>	67
<i>larin tab 1/20</i>	67
LASTACAFT SOL 0.25%.....	91
<i>latanoprost ophth soln 0.005%</i>	92
LATUDA TAB 120MG	54
LATUDA TAB 20MG	54

LATUDA TAB 40MG	54
LATUDA TAB 60MG	54
LATUDA TAB 80MG	54
leflunomide tab 10 mg.....	83
leflunomide tab 20 mg.....	83
LENVIMA CAP 10 MG	24
LENVIMA CAP 12MG	24
LENVIMA CAP 14 MG	24
LENVIMA CAP 18 MG	24
LENVIMA CAP 20 MG	24
LENVIMA CAP 24 MG	24
LENVIMA CAP 4MG.....	24
LENVIMA CAP 8 MG.....	24
lessina tab	67
letrozole tab 2.5 mg	21
leucovorin calcium for inj 100 mg.....	26
leucovorin calcium for inj 200 mg.....	26
leucovorin calcium for inj 350 mg.....	26
leucovorin calcium for inj 50 mg	26
leucovorin calcium for inj 500 mg.....	26
leucovorin calcium inj 500 mg/50ml (10 mg/ml)	26
leucovorin calcium tab 10 mg	26
leucovorin calcium tab 15 mg	26
leucovorin calcium tab 25 mg	26
leucovorin calcium tab 5 mg	26
LEUKERAN TAB 2MG.....	17
leuprolide acetate inj kit 5 mg/ml.....	21
levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)	94
levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)	94
levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)	94
LEVEMIR INJ	63
LEVEMIR INJ FLEXTOUC.....	63
levetiracetam in sodium chloride iv soln 1000 mg/100ml	43
levetiracetam in sodium chloride iv soln 1500 mg/100ml	43
levetiracetam in sodium chloride iv soln 500 mg/100ml.....	43
levetiracetam inj 500 mg/5ml (100 mg/ml)	43
levetiracetam oral soln 100 mg/ml ...	43
levetiracetam tab 1000 mg	43
levetiracetam tab 250 mg	43
levetiracetam tab 500 mg	43
levetiracetam tab 750 mg	43
levetiracetam tab er 24hr 500 mg....	43
levetiracetam tab er 24hr 750 mg....	43
levobunolol hcl ophth soln 0.5%	92
levocarnitine oral soln 1 gm/10ml (10%)	69
levocarnitine tab 330 mg	69
levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)	93
levocetirizine dihydrochloride tab 5 mg	93
levofloxacin in d5w iv soln 250 mg/50ml	14
levofloxacin in d5w iv soln 500 mg/100ml	15
levofloxacin in d5w iv soln 750 mg/150ml	15
levofloxacin iv soln 25 mg/ml.....	15
levofloxacin oral soln 25 mg/ml.....	15
levofloxacin tab 250 mg	15
levofloxacin tab 500 mg	15
levofloxacin tab 750 mg	15
levonest tab	67
levonorgestrel & ethinyl estradiol (91- day) tab 0.15-0.03 mg	67
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	67
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	67
levonorgestrel-eth estra tab 0.05- 30/0.075-40/0.125-30mg-mcg ..	67
levora-28 tab 0.15/30.....	67
levo-t tab 100mcg	74
levo-t tab 112mcg	74
levo-t tab 125mcg	74
levo-t tab 137mcg	74
levo-t tab 150mcg	74
levo-t tab 175mcg	74
levo-t tab 200 mcg	74
levo-t tab 25mcg	74
levo-t tab 300 mcg	74
levo-t tab 50mcg	74
levo-t tab 75mcg	74
levo-t tab 88mcg	74
levothyroxine sodium tab 100 mcg ..	74
levothyroxine sodium tab 112 mcg ..	74
levothyroxine sodium tab 125 mcg ..	74
levothyroxine sodium tab 137 mcg ..	74

<i>levothyroxine sodium tab 150 mcg</i> ...	74
<i>levothyroxine sodium tab 175 mcg</i> ...	74
<i>levothyroxine sodium tab 200 mcg</i> ...	74
<i>levothyroxine sodium tab 25 mcg</i>	74
<i>levothyroxine sodium tab 300 mcg</i> ...	74
<i>levothyroxine sodium tab 50 mcg</i>	74
<i>levothyroxine sodium tab 75 mcg</i>	74
<i>levothyroxine sodium tab 88 mcg</i>	74
<i>levoxyl tab 100mcg</i>	74
<i>levoxyl tab 112mcg</i>	74
<i>levoxyl tab 125mcg</i>	74
<i>levoxyl tab 137mcg</i>	74
<i>levoxyl tab 150mcg</i>	75
<i>levoxyl tab 175mcg</i>	75
<i>levoxyl tab 200mcg</i>	75
<i>levoxyl tab 25mcg</i>	74
<i>levoxyl tab 50mcg</i>	74
<i>levoxyl tab 75mcg</i>	74
<i>levoxyl tab 88mcg</i>	74
<i>LEXIVA SUS 50MG/ML</i>	9
<i>lidocaine hcl local inj 0.5%</i>	4
<i>lidocaine hcl local inj 1%</i>	4
<i>lidocaine hcl local inj 2%</i>	4
<i>lidocaine hcl local preservative free (pf) inj 0.5%</i>	5
<i>lidocaine hcl local preservative free (pf) inj 1.5%</i>	5
<i>lidocaine hcl local preservative free (pf) inj 1%</i>	5
<i>lidocaine hcl soln 4%</i>	100
<i>lidocaine hcl urethral/mucosal gel 2%</i>	100
<i>lidocaine hcl viscous soln 2%</i>	101
<i>lidocaine oint 5%</i>	100
<i>lidocaine patch 5%</i>	100
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	100
<i>linezolid for susp 100 mg/5ml</i>	6
<i>linezolid in sodium chloride iv soln 600 mg/300ml-0.9%</i>	6
<i>linezolid iv soln 600 mg/300ml (2 mg/ml)</i>	6
<i>linezolid tab 600 mg</i>	6
<i>LINZESS CAP 145MCG</i>	78
<i>LINZESS CAP 290MCG</i>	78
<i>LINZESS CAP 72MCG</i>	78
<i>liothyronine sodium tab 25 mcg</i>	75
<i>liothyronine sodium tab 5 mcg</i>	75
<i>liothyronine sodium tab 50 mcg</i>	75
<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i>	27
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	27
<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	27
<i>lisinopril tab 10 mg</i>	28
<i>lisinopril tab 2.5 mg</i>	28
<i>lisinopril tab 20 mg</i>	28
<i>lisinopril tab 30 mg</i>	28
<i>lisinopril tab 40 mg</i>	28
<i>lisinopril tab 5 mg</i>	28
<i>lithium carbonate cap 150 mg</i>	60
<i>lithium carbonate cap 300 mg</i>	60
<i>lithium carbonate cap 600 mg</i>	60
<i>lithium carbonate tab 300 mg</i>	60
<i>lithium carbonate tab er 300 mg</i>	60
<i>lithium carbonate tab er 450 mg</i>	60
<i>LITHIUM SOL 8MEQ/5ML</i>	60
<i>LOKELMA PAK 10GM</i>	66
<i>LOKELMA PAK 5GM</i>	66
<i>LONSURF TAB 15-6.14</i>	26
<i>LONSURF TAB 20-8.19</i>	26
<i>loperamide hcl cap 2 mg</i>	78
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	11
<i>lorazepam conc 2 mg/ml</i>	40
<i>lorazepam inj 2 mg/ml</i>	40
<i>lorazepam inj 4 mg/ml</i>	40
<i>lorazepam tab 0.5 mg</i>	40
<i>lorazepam tab 1 mg</i>	40
<i>lorazepam tab 2 mg</i>	40
<i>LORBRENA TAB 100MG</i>	24
<i>LORBRENA TAB 25MG</i>	24
<i>loryna tab 3-0.02mg</i>	67
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	30
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	30
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	30
<i>losartan potassium tab 100 mg</i>	30
<i>losartan potassium tab 25 mg</i>	30
<i>losartan potassium tab 50 mg</i>	30
<i>LOTEMAX GEL 0.5%</i>	91

LOTEMAX OIN 0.5%	91
<i>loteprednol etabonate ophth susp 0.5%</i>	
.....	91
<i>lovastatin tab 10 mg</i>	32
<i>lovastatin tab 20 mg</i>	32
<i>lovastatin tab 40 mg</i>	32
<i>loxapine succinate cap 10 mg</i>	54
<i>loxapine succinate cap 25 mg</i>	54
<i>loxapine succinate cap 5 mg</i>	54
<i>loxapine succinate cap 50 mg</i>	54
LUMIGAN SOL 0.01%	92
LUMIZYME INJ 50MG	69
LUPR DEP-PED INJ 11.25MG	72
LUPR DEP-PED INJ 15MG	72
LUPR DEP-PED INJ 3M 30MG	72
LUPR DEP-PED INJ 7.5MG	72
LUPRON DEPOT INJ 11.25MG	21
LUPRON DEPOT INJ 3.75MG	21
<i>lutea tab</i>	67
LYNPARZA TAB 100MG	20
LYNPARZA TAB 150MG	20
LYRICA CR TAB 165MG	60
LYRICA CR TAB 330MG	60
LYRICA CR TAB 82.5MG	60
LYSODREN TAB 500MG	21
<i>lyza tab 0.35mg</i>	67
M	
MAGNESIUM SU INJ 20/500ML	87
MAGNESIUM SU INJ 2GM/50ML	87
MAGNESIUM SU INJ 40G/1000	87
MAGNESIUM SU INJ 4G/100ML	87
MAGNESIUM SU INJ 80MG/ML	87
<i>magnesium sulfate in dextrose 5% iv</i>	
<i>soln 1 gm/100ml</i>	87
<i>magnesium sulfate inj 50%</i>	87
<i>magnesium sulfate iv soln 2 gm/50ml</i>	
<i>(40 mg/ml)</i>	87
<i>magnesium sulfate iv soln 20</i>	
<i>gm/500ml (40 mg/ml)</i>	87
<i>magnesium sulfate iv soln 4 gm/100ml</i>	
<i>(40 mg/ml)</i>	87
<i>magnesium sulfate iv soln 4 gm/50ml</i>	
<i>(80 mg/ml)</i>	87
<i>magnesium sulfate iv soln 40</i>	
<i>gm/1000ml (40 mg/ml)</i>	87
<i>malathion lotion 0.5%</i>	101
<i>maprotiline hcl tab 25 mg</i>	49
<i>maprotiline hcl tab 50 mg</i>	49
<i>maprotiline hcl tab 75 mg</i>	49
<i>marlissa tab 0.15/30</i>	67
MARPLAN TAB 10MG	49
MATULANE CAP 50MG	26
Mavyret TAB 100-40MG	12
<i>meclizine hcl tab 12.5 mg</i>	76
<i>meclizine hcl tab 25 mg</i>	76
<i>medroxyprogesterone acetate im susp</i>	
<i>150 mg/ml</i>	67
<i>medroxyprogesterone acetate im susp</i>	
<i>prefilled syr 150 mg/ml</i>	68
<i>medroxyprogesterone acetate tab 10</i>	
<i>mg</i>	73
<i>medroxyprogesterone acetate tab 2.5</i>	
<i>mg</i>	73
<i>medroxyprogesterone acetate tab 5 mg</i>	
.....	73
<i>mefloquine hcl tab 250 mg</i>	8
<i>megestrol acetate susp 40 mg/ml</i>	21
<i>megestrol acetate susp 625 mg/5ml</i>	21
<i>megestrol acetate tab 20 mg</i>	21
<i>megestrol acetate tab 40 mg</i>	21
MEKINIST TAB 0.5MG	24
MEKINIST TAB 2MG	24
MEKTOVI TAB 15MG	24
<i>meloxicam tab 15 mg</i>	1
<i>meloxicam tab 7.5 mg</i>	1
<i>memantine hcl cap er 24hr 14 mg</i>	46
<i>memantine hcl cap er 24hr 21 mg</i>	46
<i>memantine hcl cap er 24hr 28 mg</i>	46
<i>memantine hcl cap er 24hr 7 mg</i>	46
<i>memantine hcl oral solution 2 mg/ml</i>	46
<i>memantine hcl tab 10 mg</i>	46
<i>memantine hcl tab 5 mg</i>	46
MENACTRA INJ	86
MENQUADFI INJ	86
MENVEO INJ	86
<i>mercaptopurine tab 50 mg</i>	18
<i>meropenem iv for soln 1 gm</i>	6
<i>meropenem iv for soln 500 mg</i>	6
<i>mesalamine cap dr 400 mg</i>	77
<i>mesalamine enema 4 gm</i>	77
<i>mesalamine rectal enema 4 gm &</i>	
<i>cleaner wipe kit</i>	77
<i>mesalamine suppos 1000 mg</i>	77
<i>mesalamine tab delayed release 1.2</i>	
<i>gm</i>	77
MESNEX TAB 400MG	26

<i>metformin hcl tab 1000 mg</i>	64
<i>metformin hcl tab 500 mg</i>	64
<i>metformin hcl tab 850 mg</i>	64
<i>metformin hcl tab er 24hr 500 mg</i> ...	64
<i>metformin hcl tab er 24hr 750 mg</i> ...	64
<i>methadone con 10mg/ml</i>	3
<i>methadone hcl soln 10 mg/5ml</i>	3
<i>methadone hcl soln 5 mg/5ml</i>	3
<i>methadone hcl tab 10 mg</i>	3
<i>methadone hcl tab 5 mg</i>	3
<i>methazolamide tab 25 mg</i>	37
<i>methazolamide tab 50 mg</i>	37
<i>methenamine hippurate tab 1 gm</i>	6
<i>methimazole tab 10 mg</i>	75
<i>methimazole tab 5 mg</i>	75
<i>methotrexate sodium for inj 1 gm</i>	18
<i>methotrexate sodium inj 250 mg/10ml</i> (25 mg/ml)	18
<i>methotrexate sodium inj 50 mg/2ml</i> (25 mg/ml)	18
<i>methotrexate sodium inj pf 1000</i> mg/40ml (25 mg/ml).....	18
<i>methotrexate sodium inj pf 250</i> mg/10ml (25 mg/ml).....	18
<i>methotrexate sodium tab 2.5 mg (base</i> <i>equiv)</i>	83
<i>methylphenidate hcl soln 10 mg/5ml</i> 57	
<i>methylphenidate hcl soln 5 mg/5ml</i> ..	57
<i>methylphenidate hcl tab 10 mg</i>	58
<i>methylphenidate hcl tab 20 mg</i>	58
<i>methylphenidate hcl tab 5 mg</i>	58
<i>methylphenidate hcl tab er 10 mg</i>	58
<i>methylphenidate hcl tab er 20 mg</i>	58
<i>methylprednisolone acetate inj susp 40</i> mg/ml	71
<i>methylprednisolone acetate inj susp 80</i> mg/ml	71
<i>methylprednisolone sod succ for inj</i> 1000 mg (base equiv)	71
<i>methylprednisolone sod succ for inj</i> 125 mg (base equiv)	71
<i>methylprednisolone sod succ for inj 40</i> mg (base equiv)	71
<i>methylprednisolone tab 16 mg</i>	71
<i>methylprednisolone tab 32 mg</i>	71
<i>methylprednisolone tab 4 mg</i>	71
<i>methylprednisolone tab 8 mg</i>	71
<i>methylprednisolone tab therapy pack 4</i> mg (21)	71
<i>metoclopramide hcl inj 5 mg/ml (base</i> <i>equivalent)</i>	76
<i>metoclopramide hcl soln 5 mg/5ml (10</i> <i>mg/10ml) (base equiv)</i>	76
<i>metoclopramide hcl tab 10 mg (base</i> <i>equivalent)</i>	76
<i>metoclopramide hcl tab 5 mg (base</i> <i>equivalent)</i>	76
<i>metolazone tab 10 mg</i>	37
<i>metolazone tab 2.5 mg</i>	37
<i>metolazone tab 5 mg</i>	37
<i>metoprolol & hydrochlorothiazide tab</i> 100-25 mg	33
<i>metoprolol & hydrochlorothiazide tab</i> 100-50 mg	33
<i>metoprolol & hydrochlorothiazide tab</i> 50-25 mg	33
<i>metoprolol succinate tab er 24hr 100</i> mg (tartrate equiv)	34
<i>metoprolol succinate tab er 24hr 200</i> mg (tartrate equiv)	34
<i>metoprolol succinate tab er 24hr 50 mg</i> (tartrate equiv)	34
<i>metoprolol tartrate iv soln 5 mg/5ml</i> 34	
<i>metoprolol tartrate iv soln cart inj 5</i> mg/5ml (1 mg/ml).....	34
<i>metoprolol tartrate tab 100 mg</i>	34
<i>metoprolol tartrate tab 25 mg</i>	34
<i>metoprolol tartrate tab 50 mg</i>	34
<i>metronidazole cream 0.75%</i>	100
<i>metronidazole gel 0.75%</i>	100
<i>metronidazole in nacl 0.79% iv soln</i> 500 mg/100ml	6
<i>metronidazole lotion 0.75%</i>	100
<i>metronidazole tab 250 mg</i>	6
<i>metronidazole tab 500 mg</i>	6
<i>metronidazole vaginal gel 0.75%</i>	80
<i>metyrosine cap 250 mg</i>	38
<i>MG SO4/D5W INJ 10MG/ML</i>	87
<i>micafungin sodium for iv soln 100 mg</i> 8	
<i>micafungin sodium for iv soln 50 mg</i> ..	8
<i>midodrine hcl tab 10 mg</i>	38
<i>midodrine hcl tab 2.5 mg</i>	38

<i>midodrine hcl tab 5 mg</i>	38
<i>miglustat cap 100 mg</i>	69
<i>mihi tab 0.25/35</i>	68
<i>minitran dis 0.1mg/hr</i>	39
<i>minitran dis 0.2mg/hr</i>	39
<i>minitran dis 0.4mg/hr</i>	39
<i>minitran dis 0.6mg/hr</i>	39
<i>minocycline hcl cap 100 mg</i>	17
<i>minocycline hcl cap 50 mg</i>	17
<i>minocycline hcl cap 75 mg</i>	17
<i>minoxidil tab 10 mg</i>	38
<i>minoxidil tab 2.5 mg</i>	38
<i>mirtazapine orally disintegrating tab 15 mg</i>	49
<i>mirtazapine orally disintegrating tab 30 mg</i>	49
<i>mirtazapine orally disintegrating tab 45 mg</i>	49
<i>mirtazapine tab 15 mg</i>	49
<i>mirtazapine tab 30 mg</i>	49
<i>mirtazapine tab 45 mg</i>	49
<i>mirtazapine tab 7.5 mg</i>	49
<i>misoprostol tab 100 mcg</i>	78
<i>misoprostol tab 200 mcg</i>	78
<i>MITIGARE CAP 0.6MG</i>	1
<i>M-M-R II INJ</i>	86
<i>M-NATAL PLUS TAB</i>	89
<i>moexipril hcl tab 15 mg</i>	28
<i>moexipril hcl tab 7.5 mg</i>	28
<i>molindone hcl tab 10 mg</i>	54
<i>molindone hcl tab 25 mg</i>	54
<i>molindone hcl tab 5 mg</i>	54
<i>mometasone furoate cream 0.1%</i>	99
<i>mometasone furoate oint 0.1%</i>	99
<i>mometasone furoate solution 0.1% (lotion)</i>	100
<i>montelukast sodium chew tab 4 mg (base equiv)</i>	94
<i>montelukast sodium chew tab 5 mg (base equiv)</i>	94
<i>montelukast sodium oral granules packet 4 mg (base equiv)</i>	94
<i>montelukast sodium tab 10 mg (base equiv)</i>	94
<i>MORPHINE SUL INJ 10MG/ML</i>	3
<i>MORPHINE SUL INJ 2MG/ML</i>	3
<i>MORPHINE SUL INJ 4MG/ML</i>	3
<i>MORPHINE SUL INJ 5MG/ML</i>	3
<i>MORPHINE SUL INJ 8MG/ML</i>	3
<i>morpheine sulfate iv soln 1 mg/ml</i>	3
<i>morpheine sulfate iv soln pf 10 mg/ml</i> .3	3
<i>morpheine sulfate iv soln pf 4 mg/ml</i> ...3	3
<i>morpheine sulfate iv soln pf 8 mg/ml</i> ...3	3
<i>morpheine sulfate oral soln 10 mg/5ml</i> 3	
<i>morpheine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	4
<i>morpheine sulfate oral soln 20 mg/5ml</i> 3	
<i>morpheine sulfate tab 15 mg</i>	4
<i>morpheine sulfate tab 30 mg</i>	4
<i>morpheine sulfate tab er 100 mg</i>	4
<i>morpheine sulfate tab er 15 mg</i>	4
<i>morpheine sulfate tab er 200 mg</i>	4
<i>morpheine sulfate tab er 30 mg</i>	4
<i>morpheine sulfate tab er 60 mg</i>	4
<i>MOVANTIK TAB 12.5MG</i>	78
<i>MOVANTIK TAB 25MG</i>	78
<i>MOXEZA SOL 0.5%</i>	90
<i>moxifloxacin hcl ophth soln 0.5% (base eq) (2 times daily)</i>	90
<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i>	90
<i>MULTAQ TAB 400MG</i>	31
<i>mupirocin oint 2%</i>	98
<i>MVASI INJ 100MG</i>	20
<i>MVASI INJ 400MG</i>	20
<i>MYCAMEINE INJ 100MG</i>	8
<i>MYCAMEINE INJ 50MG</i>	8
<i>mycophenolate mofetil cap 250 mg</i> ..	85
<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	85
<i>mycophenolate mofetil tab 500 mg</i> ..	85
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	85
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	85
<i>myorisan cap 10mg</i>	97
<i>myorisan cap 20mg</i>	97
<i>myorisan cap 30mg</i>	97
<i>myorisan cap 40mg</i>	97
<i>MYRBETRIQ TAB 25MG</i>	79
<i>MYRBETRIQ TAB 50MG</i>	79
N	
<i>nabumetone tab 500 mg</i>	1
<i>nabumetone tab 750 mg</i>	1
<i>nadolol tab 20 mg</i>	34
<i>nadolol tab 40 mg</i>	34

<i>nadolol tab 80 mg</i>	34
NAFCILLIN INJ 10GM.....	16
<i>nafcillin sodium for inj 1 gm</i>	16
<i>nafcillin sodium for inj 2 gm</i>	16
<i>nafcillin sodium for iv soln 1 gm</i>	16
<i>nafcillin sodium for iv soln 10 gm</i>	16
<i>nafcillin sodium for iv soln 2 gm</i>	16
NAGLAZYME INJ 1MG/ML	69
<i>nalbuphine hcl inj 10 mg/ml</i>	2
<i>nalbuphine hcl inj 20 mg/ml</i>	2
<i>naloxone hcl inj 0.4 mg/ml</i>	61
<i>naloxone hcl inj 4 mg/10ml</i>	61
<i>naloxone hcl soln cartridge 0.4 mg/ml</i>	61
<i>naloxone hcl soln prefilled syringe 2 mg/2ml</i>	62
<i>naltrexone hcl tab 50 mg</i>	62
NAMZARIC CAP	46
NAMZARIC CAP 14-10MG.....	46
NAMZARIC CAP 21-10MG.....	46
NAMZARIC CAP 28-10MG.....	46
NAMZARIC CAP 7-10MG.....	46
<i>naproxen dr tab 375mg</i>	1
<i>naproxen dr tab 500mg</i>	1
<i>naproxen sodium tab 275 mg</i>	1
<i>naproxen sodium tab 550 mg</i>	1
<i>naproxen tab 250 mg</i>	2
<i>naproxen tab 375 mg</i>	2
<i>naproxen tab 500 mg</i>	2
<i>naratriptan hcl tab 1 mg (base equiv)</i>	59
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	59
NARCAN SPR.....	62
NATACYN SUS 5% OP.....	90
<i>nateglinide tab 120 mg</i>	64
<i>nateglinide tab 60 mg</i>	64
NATPARA INJ 100MCG	73
NATPARA INJ 25MCG.....	72
NATPARA INJ 50MCG.....	73
NATPARA INJ 75MCG.....	73
NAYZILAM SPR 5MG	43
<i>necon tab 0.5/35</i>	68
<i>nefazodone hcl tab 100 mg</i>	49
<i>nefazodone hcl tab 150 mg</i>	49
<i>nefazodone hcl tab 200 mg</i>	49
<i>nefazodone hcl tab 250 mg</i>	49
<i>nefazodone hcl tab 50 mg</i>	49
<i>neomycin sulfate tab 500 mg</i>	5
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	90
<i>neomycin-polymyx-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml..</i>	91
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	90
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	90
<i>neomycin-polymyxin-hc ophth susp .</i>	90
<i>neomycin-polymyxin-hc otic soln 1%</i>	101
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	101
NEPHRAMINE INJ 5.4%	88
NERLYNX TAB 40MG	24
NEUPRO DIS 1MG/24HR.....	51
NEUPRO DIS 2MG/24HR.....	51
NEUPRO DIS 3MG/24HR.....	51
NEUPRO DIS 4MG/24HR.....	51
NEUPRO DIS 6MG/24HR.....	51
NEUPRO DIS 8MG/24HR.....	51
<i>nevirapine susp 50 mg/5ml</i>	9
<i>nevirapine tab 200 mg</i>	9
<i>nevirapine tab er 24hr 100 mg</i>	9
<i>nevirapine tab er 24hr 400 mg</i>	9
NEXAVAR TAB 200MG	24
<i>niacin (antihyperlipidemic) tab 500 mg</i>	33
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	33
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	33
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	33
<i>niacor tab 500mg</i>	33
<i>nicardipine hcl cap 20 mg</i>	36
<i>nicardipine hcl cap 30 mg</i>	36
NICOTROL INH.....	62
NICOTROL NS SPR 10MG/ML.....	62
<i>nifedipine tab er 24hr 30 mg</i>	36
<i>nifedipine tab er 24hr 60 mg</i>	36
<i>nifedipine tab er 24hr 90 mg</i>	36
<i>nifedipine tab er 24hr osmotic release 30 mg</i>	36
<i>nifedipine tab er 24hr osmotic release 60 mg</i>	36

<i>nifedipine tab er 24hr osmotic release</i>	
90 mg	36
<i>nikki tab 3-0.02mg</i>	68
<i>nilutamide tab 150 mg</i>	21
<i>nimodipine cap 30 mg</i>	36
NINLARO CAP 2.3MG.....	20
NINLARO CAP 3MG.....	20
NINLARO CAP 4MG.....	20
<i>nitisinone cap 10 mg</i>	69
<i>nitisinone cap 2 mg.</i>	69
<i>nitisinone cap 5 mg.</i>	69
NITRO-BID OIN 2%	39
NITRO-DUR DIS 0.3MG/HR	39
NITRO-DUR DIS 0.8MG/HR	39
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	6
<i>nitrofurantoin macrocrystalline cap 50 mg</i>	6
<i>nitrofurantoin monohydrate</i>	
<i>macrocrystalline cap 100 mg</i>	6
<i>nitroglycerin sl tab 0.3 mg</i>	39
<i>nitroglycerin sl tab 0.4 mg</i>	39
<i>nitroglycerin sl tab 0.6 mg</i>	39
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>	39
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	39
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	39
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	39
NITYR TAB 10MG	69
NITYR TAB 2MG.....	69
NITYR TAB 5MG.....	69
<i>nizatidine cap 150 mg</i>	77
<i>nizatidine cap 300 mg</i>	77
<i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</i>	68
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	68
<i>norethindrone ace & ethinyl estradiol</i>	
<i>tab 1.5 mg-30 mcg</i>	68
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	68
<i>norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	68
<i>norethindrone acetate tab 5 mg</i>	74
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	70
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	70
<i>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg</i>	68
<i>norethindrone tab 0.35 mg</i>	68
<i>norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg</i>	68
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	68
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	68
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	68
<i>norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg</i>	68
NORMOSOL -M INJ /D5W	89
NORPACE CAP 100MG CR	31
NORPACE CAP 150MG CR	31
NORTHERA CAP 100MG	38
NORTHERA CAP 200MG	38
NORTHERA CAP 300MG	38
<i>nortrel tab 0.5/35</i>	68
<i>nortrel tab 1/35</i>	68
<i>nortrel tab 7/7/7</i>	68
<i>nortriptyline hcl cap 10 mg</i>	49
<i>nortriptyline hcl cap 25 mg</i>	49
<i>nortriptyline hcl cap 50 mg</i>	49
<i>nortriptyline hcl cap 75 mg</i>	49
<i>nortriptyline hcl soln 10 mg/5ml</i>	49
NORVIR POW 100MG	9
NORVIR SOL 80MG/ML.....	9
NOVOLIN INJ 70/30	63
NOVOLIN INJ 70/30 FP.....	63
NOVOLIN N INJ 100 UNIT	63
NOVOLIN N INJ U-100.....	63
NOVOLIN R INJ 100 UNIT	63
NOVOLIN R INJ U-100.....	63
NOVOLOG INJ 100/ML.....	63
NOVOLOG INJ FLEXPEN.....	63
NOVOLOG INJ PENFILL.....	63
NOVOLOG MIX INJ 70/30	63
NOVOLOG MIX INJ FLEXPEN	63
NOXAFIL SUS 40MG/ML	8
NUBEQA TAB 300MG.....	21
NUCALA INJ 100MG	95
NUCALA INJ 100MG/ML	95

NUCYNTA ER TAB 100MG	4
NUCYNTA ER TAB 150MG	4
NUCYNTA ER TAB 200MG	4
NUCYNTA ER TAB 250MG	4
NUCYNTA ER TAB 50MG.....	4
NUEDEXTA CAP 20-10MG.....	60
NULOJIX INJ 250MG.....	86
NULYTELY SOL FLAV PKS	78
NUPLAZID CAP 34MG	54
NUPLAZID TAB 10MG	54
NUTRILIPID EMU 20%	88
nyamyc pow 100000	98
NYMALIZE SOL	36
NYMALIZE SOL 60/20ML	36
nystatin cream 100000 unit/gm	98
nystatin oint 100000 unit/gm	98
nystatin susp 100000 unit/ml	101
nystatin tab 500000 unit.....	8
nystatin topical powder 100000 unit/gm	98
nystop pow 100000.....	98
O	
OCTAGAM INJ 10/100ML.....	84
OCTAGAM INJ 10GM.....	84
OCTAGAM INJ 1GM	84
OCTAGAM INJ 2.5GM.....	84
OCTAGAM INJ 20/200ML.....	84
OCTAGAM INJ 25GM.....	85
OCTAGAM INJ 2GM/20ML.....	84
OCTAGAM INJ 30/300ML.....	85
OCTAGAM INJ 5GM	84
OCTAGAM INJ 5GM/50ML.....	84
octreotide acetate inj 100 mcg/ml (0.1 mg/ml)	73
octreotide acetate inj 1000 mcg/ml (1 mg/ml)	73
octreotide acetate inj 200 mcg/ml (0.2 mg/ml)	73
octreotide acetate inj 50 mcg/ml (0.05 mg/ml)	73
octreotide acetate inj 500 mcg/ml (0.5 mg/ml)	73
ODEFSEY TAB.....	11
ODOMZO CAP 200MG	20
OFEV CAP 100MG	95
OFEV CAP 150MG	95
ofloxacin ophth soln 0.3%.....	91
ofloxacin otic soln 0.3%.....	101
OGIVRI INJ 150MG	20
OGIVRI INJ 420MG	20
olanzapine for im inj 10 mg	54
olanzapine orally disintegrating tab 10 mg	54
olanzapine orally disintegrating tab 15 mg	54
olanzapine orally disintegrating tab 20 mg	54
olanzapine orally disintegrating tab 5 mg	54
olanzapine tab 10 mg	54
olanzapine tab 15 mg	54
olanzapine tab 2.5 mg	54
olanzapine tab 20 mg	54
olanzapine tab 5 mg	54
olanzapine tab 7.5 mg	54
olmesartan medoxomil tab 20 mg....	30
olmesartan medoxomil tab 40 mg....	30
olmesartan medoxomil tab 5 mg	30
olmesartan medoxomil- hydrochlorothiazide tab 20-12.5 mg	30
olmesartan medoxomil- hydrochlorothiazide tab 40-12.5 mg	30
olmesartan medoxomil- hydrochlorothiazide tab 40-25 mg. 30	
olmesartan-amlodipine- hydrochlorothiazide tab 20-5-12.5 mg	30
olmesartan-amlodipine- hydrochlorothiazide tab 40-10-12.5 mg	30
olmesartan-amlodipine- hydrochlorothiazide tab 40-10-25 mg	30
olmesartan-amlodipine- hydrochlorothiazide tab 40-5-12.5 mg	30
olmesartan-amlodipine- hydrochlorothiazide tab 40-5-25 mg	30
olopatadine hcl ophth soln 0.2% (base equivalent)	91
omeprazole cap delayed release 10 mg	79

<i>omeprazole cap delayed release 20 mg</i>	79
<i>omeprazole cap delayed release 40 mg</i>	79
<i>ondansetron hcl inj 4 mg/2ml (2 mg/ml)</i>	76
<i>ondansetron hcl inj 40 mg/20ml (2 mg/ml)</i>	76
<i>ondansetron hcl oral soln 4 mg/5ml</i>	76
<i>ondansetron hcl tab 24 mg</i>	76
<i>ondansetron hcl tab 4 mg</i>	76
<i>ondansetron hcl tab 8 mg</i>	76
<i>ondansetron orally disintegrating tab 4 mg</i>	76
<i>ondansetron orally disintegrating tab 8 mg</i>	76
ONTRUZANT INJ 150MG	20
ONTRUZANT INJ 420MG	20
ONUREG TAB 200MG	18
ONUREG TAB 300MG	18
OPSUMIT TAB 10MG	39
ORFADIN CAP 10MG	69
ORFADIN CAP 20MG	69
ORFADIN CAP 2MG	69
ORFADIN CAP 5MG	69
ORFADIN SUS 4MG/ML	70
ORKAMBI GRA 100-125	95
ORKAMBI GRA 150-188	95
ORKAMBI TAB 100-125	95
ORKAMBI TAB 200-125	95
<i>orsythia tab</i>	68
<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	12
<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	12
<i>oseltamivir phosphate cap 75 mg (base equiv)</i>	12
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	12
OSPHENA TAB 60MG	73
<i>oxacillin sodium for inj 1 gm (base equivalent)</i>	16
<i>oxacillin sodium for inj 2 gm (base equivalent)</i>	16
<i>oxacillin sodium for iv soln 10 gm (base equivalent)</i>	16
<i>oxaliplatin for iv inj 100 mg</i>	26
<i>oxaliplatin for iv inj 50 mg</i>	26
<i>oxaliplatin iv soln 100 mg/20ml</i>	26
<i>oxaliplatin iv soln 50 mg/10ml</i>	26
<i>oxandrolone tab 10 mg</i>	62
<i>oxandrolone tab 2.5 mg</i>	62
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i>	43
<i>oxcarbazepine tab 150 mg</i>	43
<i>oxcarbazepine tab 300 mg</i>	43
<i>oxcarbazepine tab 600 mg</i>	43
<i>oxybutynin chloride syrup 5 mg/5ml</i>	80
<i>oxybutynin chloride tab 5 mg</i>	80
<i>oxybutynin chloride tab er 24hr 10 mg</i>	80
<i>oxybutynin chloride tab er 24hr 15 mg</i>	80
<i>oxybutynin chloride tab er 24hr 5 mg</i>	80
<i>oxycodone hcl cap 5 mg</i>	4
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	4
<i>oxycodone hcl soln 5 mg/5ml</i>	4
<i>oxycodone hcl tab 10 mg</i>	4
<i>oxycodone hcl tab 15 mg</i>	4
<i>oxycodone hcl tab 20 mg</i>	4
<i>oxycodone hcl tab 30 mg</i>	4
<i>oxycodone hcl tab 5 mg</i>	4
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	4
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	4
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	4
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	4
OZEMPIC INJ 2/1.5ML	63
P	
<i>pacerone tab 100mg</i>	31
<i>pacerone tab 200mg</i>	31
<i>pacerone tab 400mg</i>	31
<i>paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)</i>	19
<i>paclitaxel iv conc 150 mg/25ml (6 mg/ml)</i>	19
<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml)</i>	19
<i>paclitaxel iv conc 300 mg/50ml (6 mg/ml)</i>	19
<i>paliperidone tab er 24hr 1.5 mg</i>	54

<i>paliperidone tab er 24hr 3 mg</i>	54
<i>paliperidone tab er 24hr 6 mg</i>	54
<i>paliperidone tab er 24hr 9 mg</i>	54
<i>pamidronate disodium for inj 30 mg</i>	65
<i>pamidronate disodium for inj 90 mg</i>	65
<i>pamidronate disodium iv soln 3 mg/ml</i>	
.....	65
<i>pamidronate disodium iv soln 9 mg/ml</i>	
.....	65
PAMIDRONATE INJ 6MG/ML	65
PANRETIN GEL 0.1%	100
<i>pantoprazole sodium ec tab 20 mg</i>	
(base equiv).....	79
<i>pantoprazole sodium ec tab 40 mg</i>	
(base equiv).....	79
<i>pantoprazole sodium for iv soln 40 mg</i>	
(base equiv).....	79
PANZYGA SOL 10/100ML	85
PANZYGA SOL 1GM/10ML	85
PANZYGA SOL 2.5/25ML	85
PANZYGA SOL 20/200ML	85
PANZYGA SOL 30/300ML	85
PANZYGA SOL 5GM/50ML	85
<i>paricalcitol cap 1 mcg</i>	89
<i>paricalcitol cap 2 mcg</i>	89
<i>paricalcitol cap 4 mcg</i>	90
<i>paromomycin sulfate cap 250 mg</i>	5
<i>paroxetine hcl tab 10 mg</i>	49
<i>paroxetine hcl tab 20 mg</i>	49
<i>paroxetine hcl tab 30 mg</i>	49
<i>paroxetine hcl tab 40 mg</i>	49
PASER GRA 4GM	11
PAXIL SUS 10MG/5ML	49
PAZEO DRO 0.7%	91
PEDIARIX INJ 0.5ML	86
PEDVAX HIB INJ	86
<i>peg 3350-kcl-na bicarb-nacl-na sulfate</i>	
for soln 236 gm	78
<i>peg 3350-kcl-na bicarb-nacl-na sulfate</i>	
for soln 240 gm	78
<i>peg 3350-kcl-sod bicarb-nacl for soln</i>	
420 gm	78
PEGANONE TAB 250MG	43
PEGASYS INJ	12
PEGASYS INJ 180MCG/M	12
PEGASYS INJ PROCLICK	12
PEMAZYRE TAB 13.5MG	24
PEMAZYRE TAB 4.5MG	24
PEMAZYRE TAB 9MG	24
PEN G PROC INJ 600000	16
PEN GK/DEXTR INJ 40000/ML	16
PEN GK/DEXTR INJ 60000/ML	16
<i>penicillamine tab 250 mg</i>	66
<i>penicillin g potassium for inj 20000000</i>	
unit	16
<i>penicillin g potassium for inj 5000000</i>	
unit	16
<i>penicillin g sodium for inj 5000000 unit</i>	
.....	16
<i>penicillin v potassium for soln 125</i>	
mg/5ml	16
<i>penicillin v potassium for soln 250</i>	
mg/5ml	16
<i>penicillin v potassium tab 250 mg</i>	16
<i>penicillin v potassium tab 500 mg</i>	16
PENTACEL INJ	86
<i>pentamidine isethionate for</i>	
nebulization soln 300 mg	6
<i>pentamidine isethionate for soln 300</i>	
mg	6
<i>pentoxifylline tab er 400 mg</i>	82
<i>perindopril erbumine tab 2 mg</i>	28
<i>perindopril erbumine tab 4 mg</i>	28
<i>perindopril erbumine tab 8 mg</i>	28
<i>periogard sol 0.12%</i>	101
<i>permethrin cream 5%</i>	101
<i>perphenazine tab 16 mg</i>	54
<i>perphenazine tab 2 mg</i>	54
<i>perphenazine tab 4 mg</i>	54
<i>perphenazine tab 8 mg</i>	54
PERSERIS INJ 120MG	54
PERSERIS INJ 90MG	54
<i>phenelzine sulfate tab 15 mg</i>	49
<i>phenobarbital elixir 20 mg/5ml</i>	43
<i>phenobarbital sodium inj 130 mg/ml</i>	43
<i>phenobarbital sodium inj 65 mg/ml</i>	43
<i>phenobarbital tab 100 mg</i>	44
<i>phenobarbital tab 15 mg</i>	43
<i>phenobarbital tab 16.2 mg</i>	44
<i>phenobarbital tab 30 mg</i>	44
<i>phenobarbital tab 32.4 mg</i>	44
<i>phenobarbital tab 60 mg</i>	44
<i>phenobarbital tab 64.8 mg</i>	44
<i>phenobarbital tab 97.2 mg</i>	44
PHNYTEK CAP 200MG	44
PHNYTEK CAP 300MG	44

phenytoin chew tab 50 mg	44
phenytoin sodium extended cap 100 mg	44
phenytoin sodium extended cap 200 mg	44
phenytoin sodium extended cap 300 mg	44
phenytoin sodium inj 50 mg/ml	44
phenytoin susp 125 mg/5ml	44
PHESGO SOL.....	20
philith tab 0.4-35	68
PHOSPHOLINE SOL 0.125%OP	92
PICATO GEL 0.015%	100
PICATO GEL 0.05%	100
PIFELTRO TAB 100MG	9
pilocarpine hcl ophth soln 1%	92
pilocarpine hcl ophth soln 2%	92
pilocarpine hcl ophth soln 4%	92
pilocarpine hcl tab 5 mg	101
pilocarpine hcl tab 7.5 mg	101
pimozide tab 1 mg	54
pimozide tab 2 mg	54
pimtrea tab	68
pindolol tab 10 mg	34
pindolol tab 5 mg	34
pioglitazone hcl tab 15 mg (base equiv)	64
pioglitazone hcl tab 30 mg (base equiv)	64
pioglitazone hcl tab 45 mg (base equiv)	64
piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)	16
piperacillin sod-tazobactam sod for inj 13.5 gm (12-1.5 gm)	16
piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)	16
piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)	16
piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)	16
PIQRAY 200MG TAB DOSE	24
PIQRAY 250MG TAB DOSE	24
PIQRAY 300MG TAB DOSE	24
permella tab 1/35	68
piroxicam cap 10 mg	2
piroxicam cap 20 mg	2
PLASMA-LYTE INJ -148	89
PLASMA-LYTE INJ -A	89
plenamine inj 15%	88
PLENVU SOL	78
PNV FOLIC AC TAB + IRON	90
podofilox soln 0.5%	100
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%	91
POMALYST CAP 1MG	21
POMALYST CAP 2MG	21
POMALYST CAP 3MG	21
POMALYST CAP 4MG	22
portia-28 tab	68
posaconazole tab delayed release 100 mg	8
POT CHLORIDE INJ 10MEQ	89
POT CHLORIDE INJ 20MEQ	89
POT CHLORIDE INJ 40MEQ	89
potassium chloride 20 meq/l (0.15%) in dextrose 5% inj	89
potassium chloride cap er 10 meq ...	87
potassium chloride cap er 8 meq	87
potassium chloride inj 2 meq/ml.....	89
potassium chloride microencapsulated crys er tab 10 meq	87
potassium chloride microencapsulated crys er tab 15 meq	87
potassium chloride microencapsulated crys er tab 20 meq	87
potassium chloride oral soln 10% (20 meq/15ml)	88
potassium chloride oral soln 20% (40 meq/15ml)	88
potassium chloride powder packet 20 meq.....	88
potassium chloride tab er 10 meq....	88
potassium chloride tab er 20 meq (1500 mg)	88
potassium chloride tab er 8 meq (600 mg)	88
potassium citrate tab er 10 meq (1080 mg)	79
potassium citrate tab er 15 meq (1620 mg)	79
potassium citrate tab er 5 meq (540 mg)	79
PRADAXA CAP 110MG	81
PRADAXA CAP 150MG	81
PRADAXA CAP 75MG	81

PRALUENT INJ 150MG/ML	33
PRALUENT INJ 75MG/ML	33
<i>pramipexole dihydrochloride tab 0.125 mg</i>	51
<i>pramipexole dihydrochloride tab 0.25 mg</i>	51
<i>pramipexole dihydrochloride tab 0.5 mg</i>	51
<i>pramipexole dihydrochloride tab 0.75 mg</i>	51
<i>pramipexole dihydrochloride tab 1 mg</i>	51
<i>pramipexole dihydrochloride tab 1.5 mg</i>	51
<i>prasugrel hcl tab 10 mg (base equiv)</i>	82
<i>prasugrel hcl tab 5 mg (base equiv)</i>	82
<i>pravastatin sodium tab 10 mg</i>	32
<i>pravastatin sodium tab 20 mg</i>	32
<i>pravastatin sodium tab 40 mg</i>	32
<i>pravastatin sodium tab 80 mg</i>	32
<i>praziquantel tab 600 mg</i>	7
<i>prazosin hcl cap 1 mg</i>	29
<i>prazosin hcl cap 2 mg</i>	29
<i>prazosin hcl cap 5 mg</i>	29
PRED SOD PHO SOL 1% OP	91
<i>prednisolone acetate ophth susp 1%</i>	91
<i>prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)</i>	71
<i>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</i>	71
<i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</i>	71
<i>prednisolone syrup 15 mg/5ml (usp solution equivalent)</i>	71
PREDNISONE CON 5MG/ML	71
<i>prednisone oral soln 5 mg/5ml</i>	71
<i>prednisone tab 1 mg</i>	71
<i>prednisone tab 10 mg</i>	71
<i>prednisone tab 2.5 mg</i>	71
<i>prednisone tab 20 mg</i>	71
<i>prednisone tab 5 mg</i>	71
<i>prednisone tab 50 mg</i>	71
<i>prednisone tab therapy pack 10 mg (21)</i>	72
<i>prednisone tab therapy pack 10 mg (48)</i>	72
<i>prednisone tab therapy pack 5 mg (21)</i>	72
<i>prednisone tab therapy pack 5 mg (48)</i>	72
<i>pregabalin cap 100 mg</i>	44
<i>pregabalin cap 150 mg</i>	44
<i>pregabalin cap 200 mg</i>	44
<i>pregabalin cap 225 mg</i>	44
<i>pregabalin cap 25 mg</i>	44
<i>pregabalin cap 300 mg</i>	44
<i>pregabalin cap 50 mg</i>	44
<i>pregabalin cap 75 mg</i>	44
<i>pregabalin soln 20 mg/ml</i>	44
PREMASOL SOL 10%	88
PRENATAL PLUS	90
PRENATAL TAB 27-1MG	90
PRENATAL TAB PLUS	90
PRENATAL VIT TAB LOW IRON	90
prevalite pow 4gm	33
prevalite pow 4gm pk	33
previfem tab	68
PREZCOBIX TAB 800-150	11
PREZISTA SUS 100MG/ML	9
PREZISTA TAB 150MG	9
PREZISTA TAB 600MG	9
PREZISTA TAB 75MG	9
PREZISTA TAB 800MG	9
PRIFTIN TAB 150MG	11
<i>primaquine phosphate tab 26.3 mg (15 mg base)</i>	8
PRIMAQUINE TAB 26.3MG	8
primidone tab 250 mg	44
primidone tab 50 mg	44
PRIVIGEN INJ 10GRAMS	85
PRIVIGEN INJ 20GRAMS	85
PRIVIGEN INJ 40GRAMS	85
PRIVIGEN INJ 5 GRAMS	85
probenecid tab 500 mg	1
PROCALAMINE INJ 3%	88
<i>prochlorperazine edisylate inj 10 mg/2ml</i>	76
<i>prochlorperazine maleate tab 10 mg (base equivalent)</i>	76
<i>prochlorperazine maleate tab 5 mg (base equivalent)</i>	76
<i>prochlorperazine suppos 25 mg</i>	76
PROCERIT INJ 10000/ML	81
PROCERIT INJ 2000/ML	81
PROCERIT INJ 20000/ML	81
PROCERIT INJ 3000/ML	81

PROCIT INJ 4000/ML	81
PROCIT INJ 40000/ML	81
procto-med cre hc 2.5%	100
procto-pak cre 1%	100
proctozone cre -hc 2.5%.....	100
PROGLYCEM SUS 50MG/ML	72
PROGRAF GRA 0.2MG.....	86
PROGRAF GRA 1MG.....	86
PROLASTIN-C INJ 1000MG	95
PROLENSA SOL 0.07%	91
PROLIA SOL 60MG/ML	73
PROMACTA PAK 25MG	82
PROMACTA POW 12.5MG	82
PROMACTA TAB 12.5MG	82
PROMACTA TAB 25MG	82
PROMACTA TAB 50MG	82
PROMACTA TAB 75MG	82
<i>promethazine hcl inj 25 mg/ml</i>	76
<i>promethazine hcl inj 50 mg/ml</i>	76
<i>promethazine hcl syrup 6.25 mg/5ml</i>	76
<i>promethazine hcl tab 12.5 mg</i>	77
<i>promethazine hcl tab 25 mg</i>	77
<i>promethazine hcl tab 50 mg</i>	77
<i>propafenone hcl cap er 12hr 225 mg</i>	31
<i>propafenone hcl cap er 12hr 325 mg</i>	31
<i>propafenone hcl cap er 12hr 425 mg</i>	31
<i>propafenone hcl tab 150 mg.....</i>	31
<i>propafenone hcl tab 225 mg.....</i>	31
<i>propafenone hcl tab 300 mg.....</i>	31
<i>proparacaine hcl ophth soln 0.5%</i>	92
<i>propranolol & hydrochlorothiazide tab 40-25 mg.....</i>	33
<i>propranolol & hydrochlorothiazide tab 80-25 mg.....</i>	33
<i>propranolol hcl cap er 24hr 120 mg..</i>	34
<i>propranolol hcl cap er 24hr 160 mg..</i>	34
<i>propranolol hcl cap er 24hr 60 mg....</i>	34
<i>propranolol hcl cap er 24hr 80 mg....</i>	34
<i>propranolol hcl oral soln 20 mg/5ml .</i>	34
<i>propranolol hcl oral soln 40 mg/5ml .</i>	34
<i>propranolol hcl tab 10 mg</i>	34
<i>propranolol hcl tab 20 mg</i>	34
<i>propranolol hcl tab 40 mg</i>	34
<i>propranolol hcl tab 60 mg</i>	34
<i>propranolol hcl tab 80 mg</i>	34
<i>propylthiouracil tab 50 mg</i>	75
PROQUAD INJ.....	86
PROSOL INJ 20%.....	88

<i>protriptyline hcl tab 10 mg</i>	49
<i>protriptyline hcl tab 5 mg</i>	49
PULMICORT INH 180MCG	96
PULMICORT INH 90MCG	96
PULMOZYME SOL 1MG/ML	95
PURIXAN SUS 20MG/ML	18
<i>pyrazinamide tab 500 mg</i>	11
<i>pyridostigmine bromide tab 60 mg ..</i>	60
Q	
QINLOCK TAB 50MG	24
QUADRACEL INJ	86
<i>quetiapine fumarate tab 100 mg</i>	55
<i>quetiapine fumarate tab 200 mg</i>	55
<i>quetiapine fumarate tab 25 mg</i>	54
<i>quetiapine fumarate tab 300 mg</i>	55
<i>quetiapine fumarate tab 400 mg</i>	55
<i>quetiapine fumarate tab 50 mg</i>	55
<i>quetiapine fumarate tab er 24hr 150 mg</i>	55
<i>quetiapine fumarate tab er 24hr 200 mg</i>	55
<i>quetiapine fumarate tab er 24hr 300 mg</i>	55
<i>quetiapine fumarate tab er 24hr 400 mg</i>	55
<i>quetiapine fumarate tab er 24hr 50 mg</i>	55
<i>quinapril hcl tab 10 mg</i>	28
<i>quinapril hcl tab 20 mg</i>	28
<i>quinapril hcl tab 40 mg</i>	28
<i>quinapril hcl tab 5 mg</i>	28
<i>quinapril-hydrochlorothiazide tab 10- 12.5 mg</i>	28
<i>quinapril-hydrochlorothiazide tab 20- 12.5 mg</i>	28
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	28
<i>quinidine sulfate tab 200 mg</i>	31
<i>quinidine sulfate tab 300 mg</i>	31
<i>quinine sulfate cap 324 mg</i>	8
R	
RABAVERT INJ	86
<i>raloxifene hcl tab 60 mg.....</i>	73
<i>ramipril cap 1.25 mg</i>	28
<i>ramipril cap 10 mg</i>	28
<i>ramipril cap 2.5 mg</i>	28
<i>ramipril cap 5 mg</i>	28
<i>ranolazine tab er 12hr 1000 mg</i>	38

<i>ranolazine tab er 12hr 500 mg</i>	38
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	51
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	51
RAYALDEE CAP 30MCG	90
<i>reclipsen tab</i>	68
RECOMBIVA HB INJ 10MCG/ML.....	87
RECOMBIVA HB INJ 5MCG/0.5	86
RECOMBIVA-HB INJ 40MCG/ML	87
RECTIV OIN 0.4%.....	100
REGRANEX GEL 0.01%	101
RELENZA MIS DISKHALE.....	12
RELISTOR INJ 12/0.6ML	78
RELISTOR INJ 8/0.4ML	78
REMICADE INJ 100MG	83
RENFLEXIS INJ 100MG	83
<i>repaglinide tab 0.5 mg</i>	64
<i>repaglinide tab 1 mg</i>	64
<i>repaglinide tab 2 mg</i>	64
RESTASIS EMU 0.05%.....	92
RESTASIS MUL EMU 0.05%.....	92
RETEVMO CAP 40MG	24
RETEVMO CAP 80MG	24
REVLIMID CAP 10MG.....	22
REVLIMID CAP 15MG.....	22
REVLIMID CAP 2.5MG.....	22
REVLIMID CAP 20MG.....	22
REVLIMID CAP 25MG.....	22
REVLIMID CAP 5MG	22
REXULTI TAB 0.25MG	55
REXULTI TAB 0.5MG	55
REXULTI TAB 1MG	55
REXULTI TAB 2MG	55
REXULTI TAB 3MG	55
REXULTI TAB 4MG	55
REYATAZ POW 50MG.....	9
RHOPRESSA SOL 0.02%	92
<i>ribavirin cap 200 mg</i>	12
<i>ribavirin tab 200 mg</i>	12
<i>rifabutin cap 150 mg</i>	11
<i>rifampin cap 150 mg</i>	11
<i>rifampin cap 300 mg</i>	11
<i>rifampin for inj 600 mg</i>	11
<i>riluzole tab 50 mg</i>	60
<i>rimantadine hydrochloride tab 100 mg</i>	12
RINVOQ TAB 15MG ER.....	83
RISPERDAL INJ 12.5MG.....	55
RISPERDAL INJ 25MG	55
RISPERDAL INJ 37.5MG.....	55
RISPERDAL INJ 50MG	55
<i>risperidone orally disintegrating tab 0.25 mg</i>	55
<i>risperidone orally disintegrating tab 0.5 mg</i>	55
<i>risperidone orally disintegrating tab 1 mg</i>	55
<i>risperidone orally disintegrating tab 2 mg</i>	55
<i>risperidone orally disintegrating tab 3 mg</i>	55
<i>risperidone orally disintegrating tab 4 mg</i>	55
<i>risperidone soln 1 mg/ml</i>	55
<i>risperidone tab 0.25 mg</i>	55
<i>risperidone tab 0.5 mg</i>	55
<i>risperidone tab 1 mg</i>	55
<i>risperidone tab 2 mg</i>	55
<i>risperidone tab 3 mg</i>	55
<i>risperidone tab 4 mg</i>	55
<i>ritonavir tab 100 mg</i>	9
RITUXAN INJ 100MG	20
RITUXAN INJ 500MG	20
RITUXAN INJ HYCELA.....	20
<i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i>	46
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	46
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i>	46
<i>rivastigmine tartrate cap 6 mg (base equivalent)</i>	46
<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	47
<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	46
<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	46
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	59
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	59
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	59

<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	59
<i>ropinirole hydrochloride tab 0.25 mg</i>	51
<i>ropinirole hydrochloride tab 0.5 mg</i> ..	51
<i>ropinirole hydrochloride tab 1 mg</i>	51
<i>ropinirole hydrochloride tab 2 mg</i>	51
<i>ropinirole hydrochloride tab 3 mg</i>	51
<i>ropinirole hydrochloride tab 4 mg</i>	51
<i>ropinirole hydrochloride tab 5 mg</i>	51
<i>rosadan cre 0.75%</i>	101
<i>rosuvastatin calcium tab 10 mg</i>	32
<i>rosuvastatin calcium tab 20 mg</i>	32
<i>rosuvastatin calcium tab 40 mg</i>	32
<i>rosuvastatin calcium tab 5 mg</i>	32
ROTARIX SUS	87
ROTATEQ SOL	87
<i>roweepra tab 1000mg</i>	44
<i>roweepra tab 500mg</i>	44
<i>roweepra tab 750mg</i>	44
<i>roweepra xr tab 500mg xr</i>	44
<i>roweepra xr tab 750mg xr</i>	44
ROZLYTREK CAP 100MG	24
ROZLYTREK CAP 200MG	24
RUBRACA TAB 200MG	20
RUBRACA TAB 250MG	20
RUBRACA TAB 300MG	20
RUKOBIA TAB 600MG ER	9
RUXIENCE INJ 100/10ML	20
RUXIENCE INJ 500/50ML	20
RYBELSUS TAB 14MG	65
RYBELSUS TAB 3MG	64
RYBELSUS TAB 7MG	65
RYDAPT CAP 25MG	24
S	
SANDIMMUNE SOL 100MG/ML	86
SANTYL OIN 250/GM	101
SAPHRIS SUB 10MG	55
SAPHRIS SUB 2.5MG	55
SAPHRIS SUB 5MG	55
<i>sapropterin dihydrochloride powder packet 100 mg</i>	70
<i>sapropterin dihydrochloride powder packet 500 mg</i>	70
<i>sapropterin dihydrochloride soluble tab 100 mg</i>	70
<i>scopolamine td patch 72hr 1 mg/3days</i>	77
SECUADO DIS 3.8MG	56
SECUADO DIS 5.7MG	56
SECUADO DIS 7.6MG	56
<i>selegiline hcl cap 5 mg</i>	51
<i>selegiline hcl tab 5 mg</i>	51
<i>selenium sulfide lotion 2.5%</i>	98
SELZENTRY SOL 20MG/ML	9
SELZENTRY TAB 150MG	9
SELZENTRY TAB 25MG	9
SELZENTRY TAB 300MG	10
SELZENTRY TAB 75MG	9
SEREVENT DIS AER 50MCG	94
<i>sertraline hcl oral concentrate for solution 20 mg/ml</i>	49
<i>sertraline hcl tab 100 mg</i>	49
<i>sertraline hcl tab 25 mg</i>	49
<i>sertraline hcl tab 50 mg</i>	49
<i>sevelamer carbonate packet 0.8 gm.</i> 73	
<i>sevelamer carbonate packet 2.4 gm.</i> 73	
<i>sevelamer carbonate tab 800 mg</i>	73
<i>sharobel tab 0.35mg</i>	68
SHINGRIX INJ 50/0.5ML	87
SIGNIFOR INJ 0.3MG/ML	73
SIGNIFOR INJ 0.6MG/ML	73
SIGNIFOR INJ 0.9MG/ML	73
<i>sildenafil citrate tab 20 mg</i>	39
<i>silver sulfadiazine cream 1%</i>	98
SIMBRINZA SUS 1-0.2%	92
<i>simvastatin tab 10 mg</i>	32
<i>simvastatin tab 20 mg</i>	32
<i>simvastatin tab 40 mg</i>	32
<i>simvastatin tab 5 mg</i>	32
<i>simvastatin tab 80 mg</i>	32
<i>sirolimus oral soln 1 mg/ml</i>	86
<i>sirolimus tab 0.5 mg</i>	86
<i>sirolimus tab 1 mg</i>	86
<i>sirolimus tab 2 mg</i>	86
SIRTURO TAB 100MG	11
SIRTURO TAB 20MG	11
SIVEXTRO INJ 200MG	7
SIVEXTRO TAB 200MG	7
SKYRIZI INJ 150DOSE	83
<i>sodium chloride inj 2.5 meq/ml (14.6%)</i>	88
<i>sodium chloride irrigation soln 0.9%</i>	101
<i>sodium chloride iv soln 0.45%</i>	89
<i>sodium chloride iv soln 0.9%</i>	89
<i>sodium chloride iv soln 3%</i>	89

sodium chloride iv soln 5%	89
sodium fluoride chew; tab; 1.1 (0.5 f) mg/ml soln.....	88
sodium phenylbutyrate oral powder 3 gm/teaspoonful	70
sodium phenylbutyrate tab 500 mg ..	70
sodium polystyrene sulfonate oral susp 15 gm/60ml	66
sodium polystyrene sulfonate powder	66
SOLIQUA INJ 100/33.....	63
SOLTAMOX SOL 10MG/5ML	21
SOLU-CORTEF INJ 1000MG	72
SOLU-CORTEF INJ 100MG	72
SOLU-CORTEF INJ 250MG	72
SOLU-CORTEF INJ 500MG	72
SOMATULINE INJ 120/.5ML	73
SOMATULINE INJ 60/0.2ML	73
SOMATULINE INJ 90/0.3ML	73
SOMAVERT INJ 10MG	73
SOMAVERT INJ 15MG	73
SOMAVERT INJ 20MG	73
SOMAVERT INJ 25MG	73
SOMAVERT INJ 30MG	73
sorine tab 120mg	31
sorine tab 160mg	31
sorine tab 240mg	31
sorine tab 80mg	31
sotalol hcl (afib/afl) tab 120 mg	31
sotalol hcl (afib/afl) tab 160 mg	31
sotalol hcl (afib/afl) tab 80 mg.....	31
sotalol hcl tab 120 mg	32
sotalol hcl tab 160 mg	32
sotalol hcl tab 240 mg	32
sotalol hcl tab 80 mg.....	32
spironolactone & hydrochlorothiazide tab 25-25 mg	37
spironolactone tab 100 mg.....	29
spironolactone tab 25 mg.....	29
spironolactone tab 50 mg.....	29
sprintec 28 tab 28 day.....	68
SPRITAM TAB 1000MG.....	45
SPRITAM TAB 250MG	45
SPRITAM TAB 500MG	45
SPRITAM TAB 750MG	45
SPRYCEL TAB 100MG	25
SPRYCEL TAB 140MG	25
SPRYCEL TAB 20MG	24
SPRYCEL TAB 50MG.....	25
SPRYCEL TAB 70MG	25
SPRYCEL TAB 80MG	25
ssd cre 1%	98
stavudine cap 15 mg	10
stavudine cap 20 mg	10
stavudine cap 30 mg	10
stavudine cap 40 mg	10
STELARA INJ 45MG/0.5	83
STELARA INJ 90MG/ML	83
STIMATE SOL 1.5MG/ML.....	75
STIVARGA TAB 40MG.....	25
streptomycin sulfate for inj 1 gm	5
STRIBILD TAB.....	11
sucralfate tab 1 gm	78
sulfacetamide sodium lotion 10% (acne)	97
sulfacetamide sodium ophth oint 10%	91
sulfacetamide sodium ophth soln 10%	91
sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%.....	90
SULFADIAZINE TAB 500MG	5
sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml	7
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml	7
sulfamethoxazole-trimethoprim tab 400-80 mg	7
sulfamethoxazole-trimethoprim tab 800-160 mg	7
SULFAMYLYON CRE 85MG/GM.....	98
sulfasalazine tab 500 mg	77
sulfasalazine tab delayed release 500 mg	77
sulindac tab 150 mg	2
sulindac tab 200 mg	2
sumatriptan nasal spray 20 mg/act..	59
sumatriptan nasal spray 5 mg/act....	59
sumatriptan succinate inj 6 mg/0.5ml	59
sumatriptan succinate solution auto- injector 4 mg/0.5ml	59
sumatriptan succinate solution auto- injector 6 mg/0.5ml	59
sumatriptan succinate solution cartridge 4 mg/0.5ml	59

<i>sumatriptan succinate solution</i>	
cartridge 6 mg/0.5ml.....	59
<i>sumatriptan succinate solution prefilled syringe</i> 6 mg/0.5ml.....	59
<i>sumatriptan succinate tab 100 mg</i> ...	59
<i>sumatriptan succinate tab 25 mg</i>	59
<i>sumatriptan succinate tab 50 mg</i>	59
SUPREP BOWEL SOL PREP KIT.....	78
SUTENT CAP 12.5MG.....	25
SUTENT CAP 25MG	25
SUTENT CAP 37.5MG.....	25
SUTENT CAP 50MG	25
SYLATRON KIT 200MCG.....	26
SYLATRON KIT 300MCG.....	26
SYMBICORT AER 160-4.5.....	97
SYMBICORT AER 80-4.5.....	97
SYMDEKO TAB 100-150	95
SYMDEKO TAB 50-75MG	95
SYMFI LO TAB	11
SYMFI TAB.....	11
SYMJEPI INJ 0.15MG	95
SYMJEPI INJ 0.3MG.....	95
SYMPAZAN MIS 10MG	45
SYMPAZAN MIS 20MG	45
SYMPAZAN MIS 5MG	45
SYMTUZA TAB	11
SYNAREL SOL 2MG/ML	69
SYNERCID INJ 500MG	7
SYNJARDY TAB	65
SYNJARDY TAB 12.5-500	65
SYNJARDY TAB 5-1000MG.....	65
SYNJARDY TAB 5-500MG	65
SYNJARDY XR TAB	65
SYNJARDY XR TAB 10-1000.....	65
SYNJARDY XR TAB 25-1000.....	65
SYNJARDY XR TAB 5-1000MG	65
SYNRIBO INJ 3.5MG.....	26
SYNTHROID TAB 100MCG	75
SYNTHROID TAB 112MCG	75
SYNTHROID TAB 125MCG	75
SYNTHROID TAB 137MCG	75
SYNTHROID TAB 150MCG	75
SYNTHROID TAB 175MCG	75
SYNTHROID TAB 200MCG	75
SYNTHROID TAB 25MCG	75
SYNTHROID TAB 300MCG	75
SYNTHROID TAB 50MCG	75
SYNTHROID TAB 75MCG	75

SYNTHROID TAB 88MCG	75
T	
TABLOID TAB 40MG.....	18
TABRECTA TAB 150MG	25
TABRECTA TAB 200MG	25
<i>tacrolimus cap 0.5 mg</i>	86
<i>tacrolimus cap 1 mg</i>	86
<i>tacrolimus cap 5 mg</i>	86
<i>tacrolimus oint 0.03%</i>	101
<i>tacrolimus oint 0.1%</i>	101
TAFINLAR CAP 50MG	25
TAFINLAR CAP 75MG	25
TAGRISSO TAB 40MG	25
TAGRISSO TAB 80MG	25
TALZENNA CAP 0.25MG.....	20
TALZENNA CAP 1MG	20
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	21
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	21
<i>tamsulosin hcl cap 0.4 mg</i>	79
TARGETIN GEL 1%	101
<i>tarina fe tab 1/20</i>	68
TASIGNA CAP 150MG.....	25
TASIGNA CAP 200MG.....	25
TASIGNA CAP 50MG	25
TAXOTERE INJ 80MG/4ML.....	19
<i>tazarotene cream 0.1%</i>	98
<i>tazicef inj 1gm</i>	14
<i>tazicef inj 2gm</i>	14
<i>tazicef inj 6gm</i>	14
TAZORAC CRE 0.05%	98
<i>taztia xt cap 120mg/24</i>	36
<i>taztia xt cap 180mg/24</i>	36
<i>taztia xt cap 240mg/24</i>	36
<i>taztia xt cap 300mg er</i>	36
<i>taztia xt cap 360mg/24</i>	36
TAZVERIK TAB 200MG	26
TDVAX INJ 2-2 LF.....	87
TECENTRIQ INJ 1200/20	20
TECENTRIQ INJ 840/14	20
TEFLARO INJ 400MG	14
TEFLARO INJ 600MG	14
<i>telmisartan tab 20 mg</i>	30
<i>telmisartan tab 40 mg</i>	31
<i>telmisartan tab 80 mg</i>	31
<i>temazepam cap 15 mg</i>	58
<i>temazepam cap 7.5 mg</i>	58

TEMIXYS TAB 300-300	11
TENIVAC INJ 5-2LF	87
<i>tenofovir disoproxil fumarate tab 300 mg</i>	10
<i>terazosin hcl cap 1 mg (base equivalent).....</i>	29
<i>terazosin hcl cap 10 mg (base equivalent).....</i>	29
<i>terazosin hcl cap 2 mg (base equivalent).....</i>	29
<i>terazosin hcl cap 5 mg (base equivalent).....</i>	29
terbinafine hcl tab 250 mg	8
terbutaline sulfate tab 2.5 mg	94
terbutaline sulfate tab 5 mg	94
terconazole vaginal cream 0.4%	80
terconazole vaginal cream 0.8%	80
terconazole vaginal suppos 80 mg....	80
testosterone cypionate im inj in oil 100 mg/ml	62
testosterone cypionate im inj in oil 200 mg/ml	62
testosterone enanthate im inj in oil 200 mg/ml	62
testosterone td gel 12.5 mg/act (1%)	62
testosterone td gel 25 mg/2.5gm (1%)	62
testosterone td gel 50 mg/5gm (1%)	62
tetrabenazine tab 12.5 mg	60
tetrabenazine tab 25 mg.....	60
tetracycline hcl cap 250 mg.....	17
tetracycline hcl cap 500 mg.....	17
TEXACORT SOL 2.5%	100
THALOMID CAP 100MG	22
THALOMID CAP 150MG	22
THALOMID CAP 200MG	22
THALOMID CAP 50MG.....	22
THEO-24 CAP 100MG CR.....	95
THEO-24 CAP 200MG CR.....	95
THEO-24 CAP 300MG CR.....	95
THEO-24 CAP 400MG ER.....	95
<i>theophylline soln 80 mg/15ml</i>	95
<i>theophylline tab er 12hr 300 mg</i>	95
<i>theophylline tab er 12hr 450 mg</i>	95
<i>theophylline tab er 24hr 400 mg</i>	95
<i>theophylline tab er 24hr 600 mg</i>	95
<i>thioridazine hcl tab 10 mg</i>	56
<i>thioridazine hcl tab 100 mg</i>	56
<i>thioridazine hcl tab 25 mg</i>	56
<i>thioridazine hcl tab 50 mg</i>	56
<i>thiothixene cap 1 mg</i>	56
<i>thiothixene cap 10 mg</i>	56
<i>thiothixene cap 2 mg</i>	56
<i>thiothixene cap 5 mg</i>	56
<i>tiadylt cap 120mg/24.....</i>	36
<i>tiadylt cap 180mg/24.....</i>	36
<i>tiadylt cap 240mg/24.....</i>	36
<i>tiadylt cap 300mg/24.....</i>	36
<i>tiadylt cap 360mg/24.....</i>	36
<i>tiadylt cap 420mg/24.....</i>	36
<i>tiagabine hcl tab 12 mg.....</i>	45
<i>tiagabine hcl tab 16 mg.....</i>	45
<i>tiagabine hcl tab 2 mg</i>	45
<i>tiagabine hcl tab 4 mg</i>	45
TIBSOVO TAB 250MG.....	20
<i>tigecycline for iv soln 50 mg</i>	7
<i>timolol maleate ophth gel forming soln 0.25%</i>	92
<i>timolol maleate ophth gel forming soln 0.5%</i>	92
<i>timolol maleate ophth soln 0.25% ...</i>	92
<i>timolol maleate ophth soln 0.5%</i>	92
<i>timolol maleate ophth soln 0.5% (once-daily)</i>	92
<i>timolol maleate tab 10 mg</i>	34
<i>timolol maleate tab 20 mg</i>	34
<i>timolol maleate tab 5 mg.....</i>	34
TIVICAY PD TAB 5MG.....	10
TIVICAY TAB 10MG.....	10
TIVICAY TAB 25MG.....	10
TIVICAY TAB 50MG.....	10
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	61
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	61
TOBRADEX OIN 0.3-0.1%.....	90
TOBRADEX ST SUS 0.3-0.05.....	90
<i>tobramycin nebu soln 300 mg/5ml....</i>	5
<i>tobramycin ophth soln 0.3%</i>	91
<i>tobramycin sulfate for inj 1.2 gm.....</i>	5
<i>tobramycin sulfate inj 1.2 gm/30ml (40 mg/ml) (base equiv)</i>	5
<i>tobramycin sulfate inj 10 mg/ml (base equivalent)</i>	5

<i>tobramycin sulfate inj 2 gm/50ml (40 mg/ml) (base equiv)</i>	5
<i>tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv)</i>	5
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	90
<i>tolterodine tartrate cap er 24hr 2 mg</i>	80
<i>tolterodine tartrate cap er 24hr 4 mg</i>	80
<i>tolterodine tartrate tab 1 mg</i>	80
<i>tolterodine tartrate tab 2 mg</i>	80
<i>topiramate sprinkle cap 15 mg</i>	45
<i>topiramate sprinkle cap 25 mg</i>	45
<i>topiramate tab 100 mg</i>	45
<i>topiramate tab 200 mg</i>	45
<i>topiramate tab 25 mg</i>	45
<i>topiramate tab 50 mg</i>	45
<i>toposar inj 100/5ml</i>	27
<i>toposar inj 1gm/50ml</i>	27
<i>toremifene citrate tab 60 mg (base equivalent)</i>	21
<i>torsemide tab 10 mg</i>	37
<i>torsemide tab 100 mg</i>	37
<i>torsemide tab 20 mg</i>	37
<i>torsemide tab 5 mg</i>	37
<i>TOVIAZ TAB 4MG</i>	80
<i>TOVIAZ TAB 8MG</i>	80
<i>TPN ELECTROL INJ</i>	88
<i>TRADJENTA TAB 5MG</i>	65
<i>tramadol hcl tab 50 mg</i>	2
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	2
<i>trandolapril tab 1 mg</i>	28
<i>trandolapril tab 2 mg</i>	28
<i>trandolapril tab 4 mg</i>	28
<i>tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)</i>	82
<i>tranexamic acid tab 650 mg</i>	82
<i>tranylcypromine sulfate tab 10 mg</i>	49
<i>TRAVASOL INJ 10%</i>	88
<i>travoprost ophth soln 0.004% (benzalkonium free) (bak free)</i>	92
<i>TRAZIMERA INJ 420MG</i>	20
<i>trazodone hcl tab 100 mg</i>	49
<i>trazodone hcl tab 150 mg</i>	49
<i>trazodone hcl tab 50 mg</i>	49
<i>TRECATOR TAB 250MG</i>	11
<i>TRELEGY AER ELLIPTA</i>	93
<i>TRELSTAR MIX INJ 11.25MG</i>	21
<i>TRELSTAR MIX INJ 3.75MG</i>	21
<i>treprostinil inj soln 100 mg/20ml (5 mg/ml)</i>	40
<i>treprostinil inj soln 20 mg/20ml (1 mg/ml)</i>	39
<i>treprostinil inj soln 200 mg/20ml (10 mg/ml)</i>	40
<i>treprostinil inj soln 50 mg/20ml (2.5 mg/ml)</i>	39
<i>TRESIBA FLEX INJ 100UNIT</i>	63
<i>TRESIBA FLEX INJ 200UNIT</i>	63
<i>TRESIBA INJ 100UNIT</i>	63
<i>tretinoin cap 10 mg</i>	26
<i>tretinoin cream 0.025%</i>	97
<i>tretinoin cream 0.05%</i>	97
<i>tretinoin cream 0.1%</i>	97
<i>tretinoin gel 0.01%</i>	97
<i>tretinoin gel 0.025%</i>	97
<i>triamcinolone acetonide cream 0.025%</i>	100
<i>triamcinolone acetonide cream 0.1%</i>	100
<i>triamcinolone acetonide cream 0.5%</i>	100
<i>triamcinolone acetonide dental paste 0.1%</i>	101
<i>triamcinolone acetonide lotion 0.025%</i>	100
<i>triamcinolone acetonide lotion 0.1%</i>	100
<i>triamcinolone acetonide oint 0.025%</i>	100
<i>triamcinolone acetonide oint 0.1%</i>	100
<i>triamcinolone acetonide oint 0.5%</i>	100
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	38
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	38
<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	38
<i>TRICARE TAB PRENATAL</i>	90
<i>trientine hcl cap 250 mg</i>	66
<i>tri-estaryll tab</i>	68
<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	56
<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	56

<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	56
<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	56
<i>trifluridine ophth soln 1%</i>	91
<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i>	51
<i>trihexyphenidyl hcl tab 2 mg</i>	51
<i>trihexyphenidyl hcl tab 5 mg</i>	51
TRIJARDY XR TAB	65
TRIKAFTA TAB.....	96
<i>tri-legest tab fe</i>	68
<i>tri-lo- tab sprintec</i>	68
<i>trilyte sol</i>	78
<i>trimethoprim tab 100 mg</i>	7
<i>tri-mili tab</i>	68
<i>trimipramine maleate cap 100 mg</i>	49
<i>trimipramine maleate cap 25 mg</i>	49
<i>trimipramine maleate cap 50 mg</i>	49
TRINTELLIX TAB 10MG	49
TRINTELLIX TAB 20MG	49
TRINTELLIX TAB 5MG	49
<i>tri-previfem tab</i>	68
<i>tri-sprintec tab</i>	69
TRIUMEQ TAB	11
<i>trivora-28 tab</i>	69
<i>tri-vylibra tab</i>	69
<i>tri-vylibra tab lo</i>	69
TROGARZO INJ 150MG/ML.....	10
TROPHAMINE INJ 10%	88
<i>trospium chloride tab 20 mg</i>	80
TRULICITY INJ 0.75/0.5.....	63
TRULICITY INJ 1.5/0.5	63
TRULICITY INJ 3/0.5	63
TRULICITY INJ 4.5/0.5	63
TRUMENBA INJ	87
TRUVADA TAB 100-150	11
TRUVADA TAB 133-200	11
TRUVADA TAB 167-250	11
TRUVADA TAB 200-300	11
TRUXIMA INJ 100/10ML.....	20
TRUXIMA INJ 500/50ML.....	20
TUKYSA TAB 150MG.....	25
TUKYSA TAB 50MG	25
<i>tulana tab 0.35mg</i>	69
TURALIO CAP 200MG	25
TWINRIX INJ.....	87
TYBOST TAB 150MG.....	10

TYKERB TAB 250MG.....	25
TYMLOS INJ.....	73
TYPHIM VI INJ	87
U	
<i>unithroid tab 100mcg</i>	75
<i>unithroid tab 112mcg</i>	75
<i>unithroid tab 125mcg</i>	75
<i>unithroid tab 137mcg</i>	75
<i>unithroid tab 150mcg</i>	75
<i>unithroid tab 175mcg</i>	75
<i>unithroid tab 200mcg</i>	75
<i>unithroid tab 25mcg</i>	75
<i>unithroid tab 300mcg</i>	75
<i>unithroid tab 50mcg</i>	75
<i>unithroid tab 75mcg</i>	75
<i>unithroid tab 88mcg</i>	75
<i>ursodiol cap 300 mg</i>	78
<i>ursodiol tab 250 mg</i>	78
<i>ursodiol tab 500 mg</i>	78
V	
<i>valacyclovir hcl tab 1 gm</i>	12
<i>valacyclovir hcl tab 500 mg</i>	12
VALCHLOR GEL 0.016%	101
<i>valganciclovir hcl for soln 50 mg/ml (base equiv)</i>	12
<i>valganciclovir hcl tab 450 mg (base equivalent)</i>	12
<i>valproate sodium inj 100 mg/ml</i>	45
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	45
<i>valproic acid cap 250 mg</i>	45
<i>valsartan tab 160 mg</i>	31
<i>valsartan tab 320 mg</i>	31
<i>valsartan tab 40 mg</i>	31
<i>valsartan tab 80 mg</i>	31
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	30
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	30
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	30
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	30
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	30
VALTOCO LIQ 15MG	45
VALTOCO LIQ 20MG	45
VALTOCO SPR 10MG	45

VALTOCO SPR 5MG	45
vancomycin hcl cap 125 mg (base equivalent).....	7
vancomycin hcl cap 250 mg (base equivalent).....	7
vancomycin hcl for iv soln 1 gm (base equivalent).....	7
vancomycin hcl for iv soln 10 gm (base equivalent).....	7
vancomycin hcl for iv soln 5 gm (base equivalent).....	7
vancomycin hcl for iv soln 500 mg (base equivalent).....	7
vancomycin hcl for iv soln 750 mg (base equivalent).....	7
VANCOMYCIN INJ 1 GM	7
VANCOMYCIN INJ 500MG.....	7
VANCOMYCIN INJ 750MG.....	7
vandazole gel 0.75%.....	80
VAQTA INJ 25/0.5ML.....	87
VAQTA INJ 50UNT/ML.....	87
VARIVAX INJ	87
VASCEPA CAP 0.5GM.....	33
VASCEPA CAP 1GM	33
VELCADE INJ 3.5MG.....	20
velivet pak.....	69
VELTASSA POW 16.8GM	66
VELTASSA POW 25.2GM	66
VELTASSA POW 8.4GM	66
VEMLIDY TAB 25MG	12
VENCLEXTA TAB 100MG	20
VENCLEXTA TAB 10MG	20
VENCLEXTA TAB 50MG	20
VENCLEXTA TAB START PK.....	20
venlafaxine hcl cap er 24hr 150 mg (base equivalent).....	50
venlafaxine hcl cap er 24hr 37.5 mg (base equivalent).....	50
venlafaxine hcl cap er 24hr 75 mg (base equivalent).....	50
venlafaxine hcl tab 100 mg (base equivalent).....	50
venlafaxine hcl tab 25 mg (base equivalent).....	50
venlafaxine hcl tab 37.5 mg (base equivalent).....	50
venlafaxine hcl tab 50 mg (base equivalent).....	50
<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	50
VENTAVIS SOL 10MCG/ML.....	40
VENTAVIS SOL 20MCG/ML.....	40
VENTOLIN HFA AER	94
verapamil hcl cap er 24hr 100 mg ...	36
verapamil hcl cap er 24hr 120 mg ...	36
verapamil hcl cap er 24hr 180 mg ...	36
verapamil hcl cap er 24hr 200 mg ...	36
verapamil hcl cap er 24hr 240 mg ...	36
verapamil hcl cap er 24hr 300 mg ...	36
verapamil hcl cap er 24hr 360 mg ...	36
verapamil hcl iv soln 2.5 mg/ml.....	36
verapamil hcl tab 120 mg	36
verapamil hcl tab 40 mg.....	36
verapamil hcl tab 80 mg.....	36
verapamil hcl tab er 120 mg	36
verapamil hcl tab er 180 mg	36
verapamil hcl tab er 240 mg	36
VERSACLOZ SUS 50MG/ML.....	56
VERZENIO TAB 100MG.....	21
VERZENIO TAB 150MG.....	21
VERZENIO TAB 200MG.....	21
VERZENIO TAB 50MG.....	20
VICTOZA INJ 18MG/3ML.....	63
vienna tab 0.1-20	69
vigabatrin powd pack 500 mg	45
vigabatrin tab 500 mg.....	45
vigadroner 500mg.....	45
VIIBRYD KIT STARTER	50
VIIBRYD TAB 10MG	50
VIIBRYD TAB 20MG	50
VIIBRYD TAB 40MG	50
VIMPAT INJ 200MG/20	45
VIMPAT SOL 10MG/ML	45
VIMPAT TAB 100MG.....	45
VIMPAT TAB 150MG.....	45
VIMPAT TAB 200MG.....	45
VIMPAT TAB 50MG.....	45
vincristine sulfate iv soln 1 mg/ml ...	19
vinorelbine tartrate inj 10 mg/ml (base equiv)	19
vinorelbine tartrate inj 50 mg/5ml (10 mg/ml) (base equiv)	19
viorele tab	69
VIRACEPT TAB 250MG.....	10
VIRACEPT TAB 625MG.....	10
VIREAD POW 40MG/GM.....	10

VIREAD TAB 150MG	10
VIREAD TAB 200MG	10
VIREAD TAB 250MG	10
VITRAKVI CAP 100MG	25
VITRAKVI CAP 25MG	25
VITRAKVI SOL 20MG/ML.....	25
VIVITROL INJ 380MG	62
VIZIMPRO TAB 15MG	25
VIZIMPRO TAB 30MG	25
VIZIMPRO TAB 45MG	25
<i>voriconazole for inj 200 mg</i>	8
<i>voriconazole for susp 40 mg/ml</i>	8
<i>voriconazole tab 200 mg.....</i>	8
<i>voriconazole tab 50 mg</i>	8
VOSEVI TAB.....	12
VOTRIENT TAB 200MG.....	25
VRAYLAR CAP 1.5-3MG	56
VRAYLAR CAP 1.5MG	56
VRAYLAR CAP 3MG.....	56
VRAYLAR CAP 4.5MG	56
VRAYLAR CAP 6MG.....	56
<i>vyfemla tab 0.4-35</i>	69
<i>vylitra tab 0.25-35</i>	69
W	
<i>warfarin sodium tab 1 mg</i>	81
<i>warfarin sodium tab 10 mg</i>	81
<i>warfarin sodium tab 2 mg</i>	81
<i>warfarin sodium tab 2.5 mg</i>	81
<i>warfarin sodium tab 3 mg</i>	81
<i>warfarin sodium tab 4 mg</i>	81
<i>warfarin sodium tab 5 mg</i>	81
<i>warfarin sodium tab 6 mg</i>	81
<i>warfarin sodium tab 7.5 mg</i>	81
<i>water for irrigation, sterile irrigation soln.....</i>	101
X	
XALKORI CAP 200MG	25
XALKORI CAP 250MG	25
XARELTO STAR TAB 15/20MG.....	81
XARELTO TAB 10MG.....	81
XARELTO TAB 15MG.....	81
XARELTO TAB 2.5MG.....	81
XARELTO TAB 20MG.....	81
XATMEP SOL 2.5MG/ML	83
XCOPRI PAK 12.5-25.....	45
XCOPRI PAK 150-200	45
XCOPRI PAK 50-100MG	45
XCOPRI TAB 100MG	45

XCOPRI TAB 150MG.....	45
XCOPRI TAB 200MG.....	46
XCOPRI TAB 50-200MG	45
XCOPRI TAB 50MG	45
XELJANZ TAB 10MG	84
XELJANZ TAB 5MG.....	84
XELJANZ XR TAB 11MG	84
XELJANZ XR TAB 22MG	84
XGEVA INJ	73
XIFAXAN TAB 550MG	78
XIGDUO XR TAB 10-1000	65
XIGDUO XR TAB 10-500MG	65
XIGDUO XR TAB 2.5-1000	65
XIGDUO XR TAB 5-1000MG	65
XIGDUO XR TAB 5-500MG	65
XOLAIR INJ 150MG/ML.....	96
XOLAIR INJ 75/0.5	96
XOLAIR SOL 150MG.....	96
XOSPATA TAB 40MG	25
XPOVIO PAK 100MG	26
XPOVIO PAK 40MG	26
XPOVIO PAK 60MG	26
XPOVIO PAK 80MG	26
XTANDI CAP 40MG	21
XULTOPHY INJ 100/3.6	63
XYREM SOL 500MG/ML.....	61
Y	
YF-VAX INJ	87
Z	
<i>zafirlukast tab 10 mg</i>	94
<i>zafirlukast tab 20 mg</i>	94
<i>zarab tab 3-0.03mg</i>	69
ZARXIO INJ 300/0.5	81
ZARXIO INJ 480/0.8	81
ZEJULA CAP 100MG	21
ZELBORA TAB 240MG.....	25
ZEMAIRA INJ 1000MG	96
<i>zenatane cap 10mg</i>	97
<i>zenatane cap 20mg</i>	97
<i>zenatane cap 30mg</i>	98
<i>zenatane cap 40mg</i>	98
ZENPEP CAP 10000UNT	79
ZENPEP CAP 15000UNT	79
ZENPEP CAP 20000UNT	79
ZENPEP CAP 25000.....	79
ZENPEP CAP 3000UNIT	79
ZENPEP CAP 40000.....	79
ZENPEP CAP 5000UNIT	79

ZERVIATE DRO 0.24%.....	91	<i>zolmitriptan tab 2.5 mg</i>	59
<i>zidovudine cap 100 mg</i>	10	<i>zolmitriptan tab 5 mg</i>	59
<i>zidovudine syrup 10 mg/ml</i>	10	<i>zolpidem tartrate tab 10 mg</i>	58
<i>zidovudine tab 300 mg</i>	10	<i>zolpidem tartrate tab 5 mg</i>	58
<i>ziprasidone hcl cap 20 mg</i>	56	<i>zonisamide cap 100 mg</i>	46
<i>ziprasidone hcl cap 40 mg</i>	56	<i>zonisamide cap 25 mg</i>	46
<i>ziprasidone hcl cap 60 mg</i>	56	<i>zonisamide cap 50 mg</i>	46
<i>ziprasidone hcl cap 80 mg</i>	56	ZORTRESS TAB 0.25MG	86
<i>ziprasidone mesylate for inj 20 mg (base equivalent)</i>	56	ZORTRESS TAB 0.5MG	86
ZIRABEV INJ 100/4ML	21	ZORTRESS TAB 0.75MG	86
ZIRABEV INJ 400/16ML	21	ZOSTAVAX INJ	87
ZIRGAN GEL 0.15%	91	<i>zovia 1/35e tab</i>	69
<i>zoledronic acid inj conc for iv infusion 4 mg/5ml</i>	65	ZYDELIG TAB 100MG	25
<i>zoledronic acid iv soln 4 mg/100ml</i> ..	65	ZYDELIG TAB 150MG	25
<i>zoledronic acid iv soln 5 mg/100ml</i> ..	65	ZYKADIA TAB 150MG	25
ZOLINZA CAP 100MG	21	ZYLET SUS 0.5-0.3%	90
<i>zolmitriptan orally disintegrating tab 2.5 mg</i>	59	ZYPREXA RELP INJ 210MG	56
<i>zolmitriptan orally disintegrating tab 5 mg</i>	59	ZYPREXA RELP INJ 300MG	56
		ZYPREXA RELP INJ 405MG	56
		ZYTIGA TAB 500MG	21



NONDISCRIMINATION AND LANGUAGE ACCESSIBILITY NOTICE

Nondiscrimination Notice:

VIVA HEALTH complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. VIVA HEALTH does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

VIVA HEALTH:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact VIVA HEALTH'S Civil Rights Coordinator.

If you believe that VIVA HEALTH has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with VIVA HEALTH'S Civil Rights Coordinator:

Address: 417 20th Street North, Suite 1100
Birmingham, AL, 35203
Phone: 1-800-633-1542 (TTY: 711)
Fax: 205-449-7626
Email: VIVACivilRightsCoord@uabmc.edu

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, VIVA HEALTH's Civil Rights Coordinator is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint

Portal, available at

<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, TDD: 1-800-537-7697

Complaint forms are available at
<http://www.hhs.gov/ocr/office/file/index.html>.

Grievance Procedure:

It is the policy of VIVA HEALTH not to discriminate on the basis of race, color, national origin, sex, age or disability. VIVA HEALTH has adopted an internal grievance procedure providing for prompt and equitable resolution of complaints alleging any action prohibited by Section 1557 of the Affordable Care Act (42 U.S.C. § 18116) and its implementing regulations at 45 CFR part 92, issued by the U.S. Department of Health and Human Services. Section 1557 prohibits discrimination on the basis of race, color, national origin, sex, age or disability in certain health programs and activities. Section 1557 and its implementing regulations may be examined in the office of VIVA HEALTH's Civil Rights Coordinator:

Address: 417 20th Street North, Suite 1100
Birmingham, AL, 35203
Phone: 1-800-633-1542 (TTY: 711)
Fax: 205-449-7626
Email: VIVACivilRightsCoord@uabmc.edu

VIVA HEALTH's Civil Rights Coordinator has been designated to coordinate the efforts of VIVA HEALTH to comply with Section 1557.

Any person who believes someone has been subjected to discrimination on the basis of race, color, national origin, sex, age or disability may file a grievance under this procedure. It is against the law for VIVA HEALTH to retaliate against anyone



who opposes discrimination, files a grievance, or participates in the investigation of a grievance.

Procedure:

- Grievances must be submitted to the Civil Rights Coordinator within 60 days of the date the person filing the grievance becomes aware of the alleged discriminatory action.
- A complaint must be in writing, containing the name and address of the person filing it. The complaint must state the problem or action alleged to be discriminatory and the remedy or relief sought.
- The Civil Rights Coordinator shall conduct an investigation of the complaint. This investigation may be informal, but it will be thorough, affording all interested persons an opportunity to submit evidence relevant to the complaint. The Civil Rights Coordinator will maintain the files and records of VIVA HEALTH relating to such grievances. To the extent possible, and in accordance with applicable law, the Civil Rights Coordinator will take appropriate steps to preserve the confidentiality of files and records relating to grievances and will share them only with those who have a need to know.
- The Civil Rights Coordinator will issue a written decision on the grievance, based on a preponderance of the evidence, no later than 30 days after its filing, including a notice to the complainant of their right to pursue further administrative or legal remedies.
- The person filing the grievance may appeal the decision of the Civil Rights Coordinator by writing to the Chief Administrative Officer within 15 days of receiving the Civil Rights Coordinator's decision. The Chief Administrative Officer shall issue a written decision in response to the appeal no later

than 30 days after its filing.

The availability and use of this grievance procedure does not prevent a person from pursuing other legal and administrative remedies, including filing a complaint of discrimination on the basis of race, color, national origin, sex, age or disability in court or with the U.S. Department of Health and Human Services, Office for Civil Rights. A person can file a complaint of discrimination electronically through the Office for Civil Rights Complaint Portal, which is available at:
<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, TDD: 1-800-537-7697

Complaint forms are available at:
<http://www.hhs.gov/ocr/office/file/index.html>. Such complaints must be filed within 180 days of the date of the alleged discrimination.

VIVA HEALTH will make appropriate arrangements to ensure that individuals with disabilities and individuals with limited English proficiency are provided auxiliary aids and services or language assistance services, respectively, if needed to participate in this grievance process. Such arrangements may include, but are not limited to, providing qualified interpreters, providing taped cassettes of material for individuals with low vision, or assuring a barrier-free location for the proceedings. The Civil Rights Coordinator will be responsible for such arrangements.



Language Assistance Services:

Spanish

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-633-1542 (TTY: 711).

Traditional Chinese

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-800-633-1542 (TTY : 711)。

Korean

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-633-1542 (TTY: 711)번으로 전화해 주십시오.

Vietnamese

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-633-1542 (TTY: 711).

Arabic

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية متوافر لك بالمجان. اتصل برقم 1-800-633-1542 (TTY) 1-800-633-1542 (TTY: 711).

German

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-800-633-1542 (TTY: 711).

French

ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-800-633-1542 (ATS: 711).

Gujarati

ધ્યાન: તમે ગુજરાતી બોલે છે, ભાષા સહાય સેવાઓ વિના મૂલ્યે તમારા માટે ઉપલબ્ધ છે . કોલ 1-800-633-1542 (TTY : 711) .

Tagalog

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-800-633-1542 (TTY: 711).

Hindi

ध्यान दें: आप हिंदी बोलते हैं, तो भाषा सहायता सेवाओं के प्रभार से मुक्त आप के लिए उपलब्ध हैं। कॉल 1-800-633-1542 (TTY : 711)।

Laotian

ໄປດຈາບ: ທ່າວ່າ ທ່ານມວິ້ງພາສາ ລາວ, ການບໍລິການຂ່າວຍເຫຼືອດ້ານພາສາ, ໄດຍບໍ່ແຈ້ງຈ່າ, ດ້ວຍມື້ພັນໃຫ້ທ່ານ. ໃທດ 1-800-633-1542 (TTY: 711).

Russian

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-800-633-1542 (телефон: 711).

Portuguese

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-800-633-1542 (TTY: 711).

Turkish

DİKKAT: Eğer Türkçe konuşuyor iseniz, dil yardımcı hizmetlerinden ücretsiz olarak yararlanabilirsiniz. 1-800-633-1542 (TTY: 711) irtibat numaralarını arayın.

Japanese

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。 1-800-633-1542 (TTY: 711) まで、お電話にてご連絡ください。

PLEASE READ:

This formulary was updated on 12/01/2020.
For more recent information or other questions,
please contact VIVA MEDICARE at 1-800-633-1542
or, for TTY users, 711, Monday – Friday, from
8 a.m. – 8 p.m. (from Oct. 1 – March 31: seven days
a week, 8 a.m. – 8 p.m.) or visit
www.VivaHealth.com/Medicare



417 20th Street North, Suite 1100
Birmingham, Alabama 35203

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