



2026 Colorado Large Group Access 3 and 4-Tier Prescription Drug List

Effective May 1, 2026

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

- Choice
- Choice Plus
- Navigate
- Navigate Balanced
- Navigate Plus
- Nexus ACO OA
- Nexus ACO OAP
- Nexus ACO R
- Nexus ACO RP
- Non-Differential PPO
- Options PPO



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

Understanding your Prescription Drug List (PDL)

What is a PDL?

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

How do I use my PDL?

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

What are tiers?

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

When does the PDL change?

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

Why are some medications excluded from coverage?

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

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

Who decides which medications are covered?

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

About this PDL

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

Medication tips

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

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

What if my doctor writes a brand-name prescription?

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

What if I am taking a specialty medication?

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

If you're taking a specialty medication that is on a higher tier, call the toll-free phone number on your member ID card to talk with a pharmacist about finding lower-cost options.

Requesting a prior authorization

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

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

Over-the-counter (OTC) medications

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

Reading your PDL

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

Tier information

Using lower-tier medications may lower your out-of-pocket cost. Your plan may have multiple or no tiers. Please note: If you have a high deductible plan, the tier cost levels may apply once you hit your deductible. If you have a plan with 3 Tiers, Tier 3/4 drugs will be placed on Tier 3. If you have a plan with 4 Tiers, Tier 3/4 drugs will be placed on Tier 4.

Drug Tier	Includes	Helpful Tips
Tier 1	\$ Lower-cost Medications that provide the highest overall value. Mostly generic drugs. Some brand-name drugs may also be included.	Use Tier 1 drugs for the lowest out-of-pocket costs.
Tier 2	\$\$ Mid-range cost Medications that provide good overall value. Mainly preferred brand name drugs.	Use Tier 2 drugs instead of Tier 3 or 3/4, to help reduce your out-of-pocket costs.
Tier 3 and 3/4	\$\$\$ Highest-cost Medications that provide the lowest overall value.	Many Tier 3 or 3/4 drugs have lower-cost options in Tiers 1 or 2. Ask your doctor if they could work for you.

Drug list information

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

Health Care Reform Preventive – This medication is part of a health care reform preventive benefit and is generally available at no cost to you.

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

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

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

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

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

Questions

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



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



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

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

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

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



Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
1st Generation/Typical - Mood Disorder Drugs						
CHLORPROMAZ POW HCL	CHLORPROMAZINE HCL (BULK) POWDER	Tier 3				
ADASUVE INH 10MG	LOXAPINE AEROSOL POWDER BREATH ACTIVATED 10 MG	Tier 3				
CHLORPROMAZ TAB 100MG	CHLORPROMAZINE HCL TAB 100 MG	Tier 1		X		
CHLORPROMAZ TAB 10MG	CHLORPROMAZINE HCL TAB 10 MG	Tier 1		X		
CHLORPROMAZ TAB 200MG	CHLORPROMAZINE HCL TAB 200 MG	Tier 1		X		
CHLORPROMAZ TAB 25MG	CHLORPROMAZINE HCL TAB 25 MG	Tier 1		X		
CHLORPROMAZ TAB 50MG	CHLORPROMAZINE HCL TAB 50 MG	Tier 1		X		
CHLORPROMAZI CON 100MG/ML	CHLORPROMAZINE HCL CONC 100 MG/ML	Tier 1	X			
CHLORPROMAZI CON 30MG/ML	CHLORPROMAZINE HCL CONC 30 MG/ML	Tier 1	X			
FLUPHENAZINE CON 5MG/ML	FLUPHENAZINE HCL ORAL CONC 5 MG/ML	Tier 1				
FLUPHENAZINE ELX 2.5/5ML	FLUPHENAZINE HCL ELIXIR 2.5 MG/5ML	Tier 1				
FLUPHENAZINE TAB 10MG	FLUPHENAZINE HCL TAB 10 MG	Tier 1				
FLUPHENAZINE TAB 1MG	FLUPHENAZINE HCL TAB 1 MG	Tier 1				
FLUPHENAZINE TAB 2.5MG	FLUPHENAZINE HCL TAB 2.5 MG	Tier 1				
FLUPHENAZINE TAB 5MG	FLUPHENAZINE HCL TAB 5 MG	Tier 1				
HALOPERIDOL CON 2MG/ML	HALOPERIDOL LACTATE ORAL CONC 2 MG/ML	Tier 1				
HALOPERIDOL TAB 0.5MG	HALOPERIDOL TAB 0.5 MG	Tier 1				
HALOPERIDOL TAB 10MG	HALOPERIDOL TAB 10 MG	Tier 1				
HALOPERIDOL TAB 1MG	HALOPERIDOL TAB 1 MG	Tier 1				
HALOPERIDOL TAB 20MG	HALOPERIDOL TAB 20 MG	Tier 1				
HALOPERIDOL TAB 2MG	HALOPERIDOL TAB 2 MG	Tier 1				
HALOPERIDOL TAB 5MG	HALOPERIDOL TAB 5 MG	Tier 1				
LOXAPINE CAP 10MG	LOXAPINE SUCCINATE CAP 10 MG	Tier 1				
LOXAPINE CAP 25MG	LOXAPINE SUCCINATE CAP 25 MG	Tier 1				
LOXAPINE CAP 50MG	LOXAPINE SUCCINATE CAP 50 MG	Tier 1				
LOXAPINE CAP 5MG	LOXAPINE SUCCINATE CAP 5 MG	Tier 1				
MOLINDONE TAB HCL 10MG	MOLINDONE HCL TAB 10 MG	Tier 1				
MOLINDONE TAB HCL 25MG	MOLINDONE HCL TAB 25 MG	Tier 1				
MOLINDONE TAB HCL 5MG	MOLINDONE HCL TAB 5 MG	Tier 1				
PIMOZIDE TAB 1MG	PIMOZIDE TAB 1 MG	Tier 1				
PIMOZIDE TAB 2MG	PIMOZIDE TAB 2 MG	Tier 1				
THIORIDAZINE TAB 100MG	THIORIDAZINE HCL TAB 100 MG	Tier 1				
THIORIDAZINE TAB 10MG	THIORIDAZINE HCL TAB 10 MG	Tier 1				
THIORIDAZINE TAB 25MG	THIORIDAZINE HCL TAB 25 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
THIORIDAZINE TAB 50MG	THIORIDAZINE HCL TAB 50 MG	Tier 1				
THIOTHIXENE CAP 10MG	THIOTHIXENE CAP 10 MG	Tier 1				
THIOTHIXENE CAP 1MG	THIOTHIXENE CAP 1 MG	Tier 1				
THIOTHIXENE CAP 2MG	THIOTHIXENE CAP 2 MG	Tier 1				
THIOTHIXENE CAP 5MG	THIOTHIXENE CAP 5 MG	Tier 1				
TRIFLUOPERAZ TAB 10MG	TRIFLUOPERAZINE HCL TAB 10 MG (BASE EQUIVALENT)	Tier 1				
TRIFLUOPERAZ TAB 1MG	TRIFLUOPERAZINE HCL TAB 1 MG (BASE EQUIVALENT)	Tier 1				
TRIFLUOPERAZ TAB 2MG	TRIFLUOPERAZINE HCL TAB 2 MG (BASE EQUIVALENT)	Tier 1				
TRIFLUOPERAZ TAB 5MG	TRIFLUOPERAZINE HCL TAB 5 MG (BASE EQUIVALENT)	Tier 1				
2nd Generation/Atypical - Mood Disorder Drugs						
ARIPIRAZOLE SOL 1MG/ML	ARIPIRAZOLE ORAL SOLUTION 1 MG/ML	Tier 1				
ARIPIRAZOLE TAB 10MG	ARIPIRAZOLE TAB 10 MG	Tier 1				
ARIPIRAZOLE TAB 10MG ODT	ARIPIRAZOLE ORALLY DISINTEGRATING TAB 10 MG	Tier 1		X		
ARIPIRAZOLE TAB 15MG	ARIPIRAZOLE TAB 15 MG	Tier 1				
ARIPIRAZOLE TAB 15MG ODT	ARIPIRAZOLE ORALLY DISINTEGRATING TAB 15 MG	Tier 1		X		
ARIPIRAZOLE TAB 20MG	ARIPIRAZOLE TAB 20 MG	Tier 1				
ARIPIRAZOLE TAB 2MG	ARIPIRAZOLE TAB 2 MG	Tier 1				
ARIPIRAZOLE TAB 30MG	ARIPIRAZOLE TAB 30 MG	Tier 1				
ARIPIRAZOLE TAB 5MG	ARIPIRAZOLE TAB 5 MG	Tier 1				
ASENAPINE SUB 10MG	ASENAPINE MALEATE SL TAB 10 MG (BASE EQUIV)	Tier 1		X		
ASENAPINE SUB 2.5MG	ASENAPINE MALEATE SL TAB 2.5 MG (BASE EQUIV)	Tier 1		X		
ASENAPINE SUB 5MG	ASENAPINE MALEATE SL TAB 5 MG (BASE EQUIV)	Tier 1		X		
CAPLYTA CAP 10.5MG	LUMATEPERONE TOSYLATE CAP 10.5 MG	Tier 3/4	X	X		
CAPLYTA CAP 21MG	LUMATEPERONE TOSYLATE CAP 21 MG	Tier 3/4	X	X		
CAPLYTA CAP 42MG	LUMATEPERONE TOSYLATE CAP 42 MG	Tier 3/4	X	X		
CLOZAPINE TAB 100/ODT	CLOZAPINE ORALLY DISINTEGRATING TAB 100 MG	Tier 1				
CLOZAPINE TAB 12.5/ODT	CLOZAPINE ORALLY DISINTEGRATING TAB 12.5 MG	Tier 1				
CLOZAPINE TAB 150/ODT	CLOZAPINE ORALLY DISINTEGRATING TAB 150 MG	Tier 1				
CLOZAPINE TAB 200/ODT	CLOZAPINE ORALLY DISINTEGRATING TAB 200 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
CLOZAPINE TAB 25MG ODT	CLOZAPINE ORALLY DISINTEGRATING TAB 25 MG	Tier 1				
FANAPT PAK PACK A	ILOPERIDONE TAB 1 MG & 2 MG & 4 MG & 6 MG TITRATION PAK	Tier 3		X		
FANAPT PAK PACK B	ILOPERIDONE TAB 1 MG & 2 MG & 6 MG & 8 MG TITRATION PAK	Tier 3/4		X		
FANAPT PAK PACK C	ILOPERIDONE TAB 1 MG & 2 MG & 6 MG TITRATION PAK	Tier 3/4		X		
FANAPT TAB 10MG	ILOPERIDONE TAB 10 MG	Tier 3/4		X		
FANAPT TAB 12MG	ILOPERIDONE TAB 12 MG	Tier 3/4		X		
FANAPT TAB 1MG	ILOPERIDONE TAB 1 MG	Tier 3/4		X		
FANAPT TAB 2MG	ILOPERIDONE TAB 2 MG	Tier 3/4		X		
FANAPT TAB 4MG	ILOPERIDONE TAB 4 MG	Tier 3/4		X		
FANAPT TAB 6MG	ILOPERIDONE TAB 6 MG	Tier 3/4		X		
FANAPT TAB 8MG	ILOPERIDONE TAB 8 MG	Tier 3/4		X		
LURASIDONE TAB 120MG	LURASIDONE HCL TAB 120 MG	Tier 1		X		
LURASIDONE TAB 20MG	LURASIDONE HCL TAB 20 MG	Tier 1		X		
LURASIDONE TAB 40MG	LURASIDONE HCL TAB 40 MG	Tier 1		X		
LURASIDONE TAB 60MG	LURASIDONE HCL TAB 60 MG	Tier 1		X		
LURASIDONE TAB 80MG	LURASIDONE HCL TAB 80 MG	Tier 1		X		
NUPLAZID CAP 34MG	PIMAVANSERIN TARTRATE CAP 34 MG (BASE EQUIVALENT)	Tier 3/4	X	X		
NUPLAZID TAB 10MG	PIMAVANSERIN TARTRATE TAB 10 MG (BASE EQUIVALENT)	Tier 3/4	X	X		
OLANZAPINE TAB 10MG	OLANZAPINE TAB 10 MG	Tier 1				
OLANZAPINE TAB 10MG ODT	OLANZAPINE ORALLY DISINTEGRATING TAB 10 MG	Tier 1				
OLANZAPINE TAB 15MG	OLANZAPINE TAB 15 MG	Tier 1				
OLANZAPINE TAB 15MG ODT	OLANZAPINE ORALLY DISINTEGRATING TAB 15 MG	Tier 1				
OLANZAPINE TAB 2.5MG	OLANZAPINE TAB 2.5 MG	Tier 1				
OLANZAPINE TAB 20MG	OLANZAPINE TAB 20 MG	Tier 1				
OLANZAPINE TAB 20MG ODT	OLANZAPINE ORALLY DISINTEGRATING TAB 20 MG	Tier 1				
OLANZAPINE TAB 5MG	OLANZAPINE TAB 5 MG	Tier 1				
OLANZAPINE TAB 5MG ODT	OLANZAPINE ORALLY DISINTEGRATING TAB 5 MG	Tier 1				
OLANZAPINE TAB 7.5MG	OLANZAPINE TAB 7.5 MG	Tier 1				
PALIPERIDONE TAB ER 1.5MG	PALIPERIDONE TAB ER 24HR 1.5 MG	Tier 1		X		
PALIPERIDONE TAB ER 3MG	PALIPERIDONE TAB ER 24HR 3 MG	Tier 1		X		
PALIPERIDONE TAB ER 6MG	PALIPERIDONE TAB ER 24HR 6 MG	Tier 1		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PALIPERIDONE TAB ER 9MG	PALIPERIDONE TAB ER 24HR 9 MG	Tier 1		X		
QUETIAPINE TAB 100MG	QUETIAPINE FUMARATE TAB 100 MG	Tier 1				
QUETIAPINE TAB 150MG	QUETIAPINE FUMARATE TAB 150 MG	Tier 1				
QUETIAPINE TAB 150MG ER	QUETIAPINE FUMARATE TAB ER 24HR 150 MG	Tier 1				
QUETIAPINE TAB 200MG	QUETIAPINE FUMARATE TAB 200 MG	Tier 1				
QUETIAPINE TAB 200MG ER	QUETIAPINE FUMARATE TAB ER 24HR 200 MG	Tier 1				
QUETIAPINE TAB 25MG	QUETIAPINE FUMARATE TAB 25 MG	Tier 1				
QUETIAPINE TAB 300MG	QUETIAPINE FUMARATE TAB 300 MG	Tier 1				
QUETIAPINE TAB 300MG ER	QUETIAPINE FUMARATE TAB ER 24HR 300 MG	Tier 1				
QUETIAPINE TAB 400MG	QUETIAPINE FUMARATE TAB 400 MG	Tier 1				
QUETIAPINE TAB 400MG ER	QUETIAPINE FUMARATE TAB ER 24HR 400 MG	Tier 1				
QUETIAPINE TAB 50MG	QUETIAPINE FUMARATE TAB 50 MG	Tier 1				
QUETIAPINE TAB 50MG ER	QUETIAPINE FUMARATE TAB ER 24HR 50 MG	Tier 1				
REXULTI TAB 0.25MG	BREXPIRAZOLE TAB 0.25 MG	Tier 3/4		X		
REXULTI TAB 0.5MG	BREXPIRAZOLE TAB 0.5 MG	Tier 3/4		X		
REXULTI TAB 1MG	BREXPIRAZOLE TAB 1 MG	Tier 3/4		X		
REXULTI TAB 2MG	BREXPIRAZOLE TAB 2 MG	Tier 3/4		X		
REXULTI TAB 3MG	BREXPIRAZOLE TAB 3 MG	Tier 3/4		X		
REXULTI TAB 4MG	BREXPIRAZOLE TAB 4 MG	Tier 3/4		X		
RISPERIDONE SOL 1MG/ML	RISPERIDONE SOLN 1 MG/ML	Tier 1				
RISPERIDONE TAB 0.25 ODT	RISPERIDONE ORALLY DISINTEGRATING TAB 0.25 MG	Tier 1				
RISPERIDONE TAB 0.25MG	RISPERIDONE TAB 0.25 MG	Tier 1				
RISPERIDONE TAB 0.5MG	RISPERIDONE TAB 0.5 MG	Tier 1				
RISPERIDONE TAB 0.5MG OD	RISPERIDONE ORALLY DISINTEGRATING TAB 0.5 MG	Tier 1				
RISPERIDONE TAB 1MG	RISPERIDONE TAB 1 MG	Tier 1				
RISPERIDONE TAB 1MG ODT	RISPERIDONE ORALLY DISINTEGRATING TAB 1 MG	Tier 1				
RISPERIDONE TAB 2MG	RISPERIDONE TAB 2 MG	Tier 1				
RISPERIDONE TAB 2MG ODT	RISPERIDONE ORALLY DISINTEGRATING TAB 2 MG	Tier 1				
RISPERIDONE TAB 3MG	RISPERIDONE TAB 3 MG	Tier 1				
RISPERIDONE TAB 3MG ODT	RISPERIDONE ORALLY DISINTEGRATING TAB 3 MG	Tier 1				
RISPERIDONE TAB 4MG	RISPERIDONE TAB 4 MG	Tier 1				
RISPERIDONE TAB 4MG ODT	RISPERIDONE ORALLY DISINTEGRATING TAB 4 MG	Tier 1				
VERSACLOZ SUS 50MG/ML	CLOZAPINE SUSP 50 MG/ML	Tier 3/4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
VRAYLAR CAP 0.5MG	CARIPRAZINE HCL CAP 0.5 MG (BASE EQUIVALENT)	Tier 3/4				
VRAYLAR CAP 0.75MG	CARIPRAZINE HCL CAP 0.75 MG (BASE EQUIVALENT)	Tier 3/4				
VRAYLAR CAP 1.5MG	CARIPRAZINE HCL CAP 1.5 MG (BASE EQUIVALENT)	Tier 3/4		X		
VRAYLAR CAP 3MG	CARIPRAZINE HCL CAP 3 MG (BASE EQUIVALENT)	Tier 3/4		X		
VRAYLAR CAP 4.5MG	CARIPRAZINE HCL CAP 4.5 MG (BASE EQUIVALENT)	Tier 3/4		X		
VRAYLAR CAP 6MG	CARIPRAZINE HCL CAP 6 MG (BASE EQUIVALENT)	Tier 3/4		X		
ZIPRASIDONE CAP 20MG	ZIPRASIDONE HCL CAP 20 MG	Tier 1				
ZIPRASIDONE CAP 40MG	ZIPRASIDONE HCL CAP 40 MG	Tier 1				
ZIPRASIDONE CAP 60MG	ZIPRASIDONE HCL CAP 60 MG	Tier 1				
ZIPRASIDONE CAP 80MG	ZIPRASIDONE HCL CAP 80 MG	Tier 1				
Alcohol Deterrents/Anti-craving - Antidotes/Deterrents/Protectants						
ACAMPRO CAL TAB 333MG	ACAMPROSATE CALCIUM TAB DELAYED RELEASE 333 MG	Tier 1				
DISULFIRAM TAB 250MG	DISULFIRAM TAB 250 MG	Tier 1				
DISULFIRAM TAB 500MG	DISULFIRAM TAB 500 MG	Tier 1				
LOFEXIDINE TAB 0.18MG	LOFEXIDINE HCL TAB 0.18 MG (BASE EQUIVALENT)	Tier 1				
LUCEMYRA TAB 0.18MG	LOFEXIDINE HCL TAB 0.18 MG (BASE EQUIVALENT)	Tier 3/4				
Alkylating Agents - Chemotherapy Agents						
CYCLOPHOSPH CAP 25MG	CYCLOPHOSPHAMIDE CAP 25 MG	Tier 1				
CYCLOPHOSPH CAP 50MG	CYCLOPHOSPHAMIDE CAP 50 MG	Tier 1				
CYCLOPHOSPH TAB 25MG	CYCLOPHOSPHAMIDE TAB 25 MG	Tier 2				
CYCLOPHOSPH TAB 50MG	CYCLOPHOSPHAMIDE TAB 50 MG	Tier 2				
GLEOSTINE CAP 100MG	LOMUSTINE CAP 100 MG	Tier 2				
GLEOSTINE CAP 10MG	LOMUSTINE CAP 10 MG	Tier 2				
GLEOSTINE CAP 40MG	LOMUSTINE CAP 40 MG	Tier 2				
HEPZATO/50MM INJ 50MG	MELPHALAN HCL FOR INTRA-ARTERIAL SOLN 50 MG (BASE EQUIV)	Tier 3				
HEPZATO/62MM INJ 50MG	MELPHALAN HCL FOR INTRA-ARTERIAL SOLN 50 MG (BASE EQUIV)	Tier 3				
LEUKERAN TAB 2MG	CHLORAMBUCIL TAB 2 MG	Tier 2				
LOMUSTINE CAP 100MG	LOMUSTINE CAP 100 MG	Tier 1				
LOMUSTINE CAP 10MG	LOMUSTINE CAP 10 MG	Tier 1				
LOMUSTINE CAP 40MG	LOMUSTINE CAP 40 MG	Tier 1				
MATULANE CAP 50MG	PROCARBAZINE HCL CAP 50 MG	Tier 2				

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

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PRAZOSIN HCL CAP 2MG	PRAZOSIN HCL CAP 2 MG	Tier 1				
PRAZOSIN HCL CAP 5MG	PRAZOSIN HCL CAP 5 MG	Tier 1				
Aminoglycosides - Antibiotics						
ARIKAYCE SUS	AMIKACIN SULFATE LIPOSOME INHAL SUSP 590 MG/8.4ML (BASE EQ)	Tier 3/4	X	X		
GENTAMICIN CRE 0.1%	GENTAMICIN SULFATE CREAM 0.1%	Tier 1				
GENTAMICIN OIN 0.1%	GENTAMICIN SULFATE OINT 0.1%	Tier 1				
HUMATIN CAP 250MG	PAROMOMYCIN SULFATE CAP 250 MG	Tier 2				
NEOMYCIN TAB 500MG	NEOMYCIN SULFATE TAB 500 MG	Tier 1				
TOBRADEX OIN 0.3-0.1%	TOBRAMYCIN-DEXAMETHASONE OPHTH OINT 0.3-0.1%	Tier 3				
Aminosalicylates - Inflammatory Bowel Disease Drugs						
APRISO CAP 0.375GM	MESALAMINE CAP ER 24HR 0.375 GM	Tier 1				
BALSALAZIDE CAP 750MG	BALSALAZIDE DISODIUM CAP 750 MG	Tier 1				
DIPENTUM CAP 250MG	OLSALAZINE SODIUM CAP 250 MG	Tier 3				
MESALAMINE CAP 400MG DR	MESALAMINE CAP DR 400 MG	Tier 1				
MESALAMINE ENE 4GM	MESALAMINE ENEMA 4 GM	Tier 1		X		
MESALAMINE KIT 4GM	*MESALAMINE RECTAL ENEMA 4 GM & CLEANSER WIPE KIT**	Tier 1		X		
MESALAMINE SUP 1000MG	MESALAMINE SUPPOS 1000 MG	Tier 1		X		
MESALAMINE TAB 1.2GM	MESALAMINE TAB DELAYED RELEASE 1.2 GM	Tier 1				
ROWASA KIT 4GM	*MESALAMINE RECTAL ENEMA 4 GM & CLEANSER WIPE KIT**	Tier 3/4		X		
SFROWASA ENE 4GM	MESALAMINE SULFITE-FREE (SF) ENEMA 4 GM/60ML	Tier 3/4				
Analgesics - Miscellaneous Analgesics						
ALLZITAL TAB 25-325MG	BUTALBITAL-ACETAMINOPHEN TAB 25-325 MG	Tier 3/4				
BAC TAB	BUTALBITAL-ACETAMINOPHEN-CAFFEINE TAB 50-325-40 MG	Tier 1		X		
BUT/APAP/CAF CAP	BUTALBITAL-ACETAMINOPHEN-CAFFEINE CAP 50-325-40 MG	Tier 1		X		
BUT/APAP/CAF CAP	BUTALBITAL-ACETAMINOPHEN-CAFFEINE CAP 50-300-40 MG	Tier 1		X		
BUT/APAP/CAF TAB	BUTALBITAL-ACETAMINOPHEN-CAFFEINE TAB 50-325-40 MG	Tier 1		X		
BUT/ASA/CAFF CAP	BUTALBITAL-ASPIRIN-CAFFEINE CAP 50-325-40 MG	Tier 1				
BUTAL/APAP TAB 50-325MG	BUTALBITAL-ACETAMINOPHEN TAB 50-325 MG	Tier 1				
DYCLOPRO SOL 0.5%	DYCLONINE HCL SOLN 0.5%	Tier 3/4				
EQ PAIN RELI TAB 500MG	ACETAMINOPHEN TAB 500 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ESGIC CAP	BUTALBITAL-ACETAMINOPHEN-CAFFEINE CAP 50-325-40 MG	Tier 3/4		X		
ESGIC TAB	BUTALBITAL-ACETAMINOPHEN-CAFFEINE TAB 50-325-40 MG	Tier 3/4		X		
FIORICET CAP	BUTALBITAL-ACETAMINOPHEN-CAFFEINE CAP 50-300-40 MG	Tier 3/4		X		
TENCON TAB 50-325MG	BUTALBITAL-ACETAMINOPHEN TAB 50-325 MG	Tier 3				
TURPENTINE SOL SPIRITS	TURPENTINE SPIRIT	Tier 1				
Androgens - Hormone Replacement/Modifying Drugs						
DANAZOL CAP 100MG	DANAZOL CAP 100 MG	Tier 1				
DANAZOL CAP 200MG	DANAZOL CAP 200 MG	Tier 1				
DANAZOL CAP 50MG	DANAZOL CAP 50 MG	Tier 1				
DEPO-TESTOST INJ 100MG/ML	TESTOSTERONE CYPIONATE IM INJ IN OIL 100 MG/ML	Tier 3				
DEPO-TESTOST INJ 200MG/ML	TESTOSTERONE CYPIONATE IM INJ IN OIL 200 MG/ML	Tier 3/4				
INTRAROSA SUP 6.5MG	PRASTERONE VAGINAL INSERT 6.5 MG	Tier 3/4	X	X		
KYZATREX CAP 100MG	TESTOSTERONE UNDECANOATE CAP 100 MG	Tier 3/4		X		
KYZATREX CAP 150MG	TESTOSTERONE UNDECANOATE CAP 150 MG	Tier 3/4		X		
KYZATREX CAP 200MG	TESTOSTERONE UNDECANOATE CAP 200 MG	Tier 3/4		X		
METHITEST TAB 10MG	METHYLTESTOSTERONE ORAL TAB 10 MG	Tier 2				
METHYLTESTOS CAP 10MG	METHYLTESTOSTERONE CAP 10 MG	Tier 1				
TESTIM GEL 1%(50MG)	TESTOSTERONE TD GEL 50 MG/5GM (1%)	Tier 1	X	X		
TESTOST CYP INJ 100MG/ML	TESTOSTERONE CYPIONATE IM INJ IN OIL 100 MG/ML	Tier 1				
TESTOST CYP INJ 200MG/ML	TESTOSTERONE CYPIONATE IM INJ IN OIL 200 MG/ML	Tier 1				
TESTOST ENAN INJ 200MG/ML	TESTOSTERONE ENANTHATE IM INJ IN OIL 200 MG/ML	Tier 1				
TESTOSTERONE GEL 1.62%	TESTOSTERONE TD GEL 20.25 MG/ACT (1.62%)	Tier 1	X	X		
TESTOSTERONE GEL PUMP 1%	TESTOSTERONE TD GEL 12.5 MG/ACT (1%)	Tier 1	X	X		
Angioedema Agents						
FABHALTA CAP 200MG	IPTACOPAN HCL CAP 200 MG	Tier 2	X	X		
ORLADEYO PAK 108MG	BEROTRALSTAT HCL PELLETT PACK 108 MG	Tier 3				
ORLADEYO PAK 132MG	BEROTRALSTAT HCL PELLETT PACK 132 MG	Tier 3				
ORLADEYO PAK 72MG	BEROTRALSTAT HCL PELLETT PACK 72 MG	Tier 3				
ORLADEYO PAK 96MG	BEROTRALSTAT HCL PELLETT PACK 96 MG	Tier 3				
VOYDEYA TAB 100MG	DANICOPAN TAB 100 MG	Tier 2	X	X		
VOYDEYA TAB 50-100MG	DANICOPAN TAB THERAPY PACK 50 MG & 100 MG	Tier 2	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ZILBRYSQ INJ 16.6MG	ZILUCOPLAN SODIUM SUBCUTANEOUS SOLN PREF SYR 16.6 MG/0.416ML	Tier 3/4	X	X		
ZILBRYSQ INJ 23MG	ZILUCOPLAN SODIUM SUBCUTANEOUS SOLN PREF SYR 23 MG/0.574ML	Tier 3/4	X	X		
ZILBRYSQ INJ 32.4MG	ZILUCOPLAN SODIUM SUBCUTANEOUS SOLN PREF SYR 32.4 MG/0.81ML	Tier 3/4	X	X		
Angioedema Agents - Drugs to Treat Swelling Underneath the Skin						
BERINERT INJ 500UNIT	C1 ESTERASE INHIBITOR (HUMAN) FOR IV INJ KIT 500 UNIT	Tier 3/4	X	X	X	
HAEGARDA INJ 2000UNIT	C1 ESTERASE INHIBITOR (HUMAN) FOR SUBCUTANEOUS INJ 2000 UNIT	Tier 2	X	X		
HAEGARDA INJ 3000UNIT	C1 ESTERASE INHIBITOR (HUMAN) FOR SUBCUTANEOUS INJ 3000 UNIT	Tier 2	X	X		
ICATIBANT INJ 30MG/3ML	ICATIBANT ACETATE SUBCUTANEOUS SOLN PREF SYR 30 MG/3ML	Tier 1	X	X		
RUCONEST INJ 2100UNIT	C1 ESTERASE INHIBITOR (RECOMBINANT) FOR IV INJ 2100 UNIT	Tier 3/4	X	X		
TAKHZYRO INJ 300/2ML	LANADELUMAB-FLYO INJ 300 MG/2ML (150 MG/ML)	Tier 2	X	X		
Angiotensin II Receptor Antagonists - Blood Pressure Drugs						
ARBLI SUS 10MG/ML	LOSARTAN POTASSIUM ORAL SUSP 10 MG/ML	Tier 3/4	X			
CANDESARTAN TAB 16MG	CANDESARTAN CILEXETIL TAB 16 MG	Tier 1				
CANDESARTAN TAB 32MG	CANDESARTAN CILEXETIL TAB 32 MG	Tier 1				
CANDESARTAN TAB 4MG	CANDESARTAN CILEXETIL TAB 4 MG	Tier 1				
CANDESARTAN TAB 8MG	CANDESARTAN CILEXETIL TAB 8 MG	Tier 1				
EDARBI TAB 40MG	AZILSARTAN MEDOXOMIL TAB 40 MG	Tier 3/4				
EDARBI TAB 80MG	AZILSARTAN MEDOXOMIL TAB 80 MG	Tier 3/4				
IRBESARTAN TAB 150MG	IRBESARTAN TAB 150 MG	Tier 1				
IRBESARTAN TAB 300MG	IRBESARTAN TAB 300 MG	Tier 1				
IRBESARTAN TAB 75MG	IRBESARTAN TAB 75 MG	Tier 1				
LOSARTAN POT TAB 100MG	LOSARTAN POTASSIUM TAB 100 MG	Tier 1				
LOSARTAN POT TAB 25MG	LOSARTAN POTASSIUM TAB 25 MG	Tier 1				
LOSARTAN POT TAB 50MG	LOSARTAN POTASSIUM TAB 50 MG	Tier 1				
OLMESA MEDOX TAB 20MG	OLMESARTAN MEDOXOMIL TAB 20 MG	Tier 1				
OLMESA MEDOX TAB 40MG	OLMESARTAN MEDOXOMIL TAB 40 MG	Tier 1				
OLMESA MEDOX TAB 5MG	OLMESARTAN MEDOXOMIL TAB 5 MG	Tier 1				
TELMISARTAN TAB 20MG	TELMISARTAN TAB 20 MG	Tier 1				
TELMISARTAN TAB 40MG	TELMISARTAN TAB 40 MG	Tier 1				
TELMISARTAN TAB 80MG	TELMISARTAN TAB 80 MG	Tier 1				
VALSARTAN SOL 20MG/5ML	VALSARTAN ORAL SOLN 4 MG/ML	Tier 1	X			

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
VALSARTAN TAB 160MG	VALSARTAN TAB 160 MG	Tier 1				
VALSARTAN TAB 320MG	VALSARTAN TAB 320 MG	Tier 1				
VALSARTAN TAB 40MG	VALSARTAN TAB 40 MG	Tier 1				
VALSARTAN TAB 80MG	VALSARTAN TAB 80 MG	Tier 1				
Angiotensin-Converting Enzyme (ACE) Inhibitors - Blood Pressure Drugs						
BENAZEPRIL TAB 10MG	BENAZEPRIL HCL TAB 10 MG	Tier 1				
BENAZEPRIL TAB 20MG	BENAZEPRIL HCL TAB 20 MG	Tier 1				
BENAZEPRIL TAB 40MG	BENAZEPRIL HCL TAB 40 MG	Tier 1				
BENAZEPRIL TAB 5MG	BENAZEPRIL HCL TAB 5 MG	Tier 1				
CAPTOPRIL TAB 100MG	CAPTOPRIL TAB 100 MG	Tier 1				
CAPTOPRIL TAB 12.5MG	CAPTOPRIL TAB 12.5 MG	Tier 1				
CAPTOPRIL TAB 25MG	CAPTOPRIL TAB 25 MG	Tier 1				
CAPTOPRIL TAB 50MG	CAPTOPRIL TAB 50 MG	Tier 1				
ENALAPRIL SOL 1MG/ML	ENALAPRIL MALEATE ORAL SOLN 1 MG/ML	Tier 1	X			
ENALAPRIL TAB 10MG	ENALAPRIL MALEATE TAB 10 MG	Tier 1				
ENALAPRIL TAB 2.5MG	ENALAPRIL MALEATE TAB 2.5 MG	Tier 1				
ENALAPRIL TAB 20MG	ENALAPRIL MALEATE TAB 20 MG	Tier 1				
ENALAPRIL TAB 5MG	ENALAPRIL MALEATE TAB 5 MG	Tier 1				
FOSINOPRIL TAB 10MG	FOSINOPRIL SODIUM TAB 10 MG	Tier 1				
FOSINOPRIL TAB 20MG	FOSINOPRIL SODIUM TAB 20 MG	Tier 1				
FOSINOPRIL TAB 40MG	FOSINOPRIL SODIUM TAB 40 MG	Tier 1				
LISINOPRIL TAB 10MG	LISINOPRIL TAB 10 MG	Tier 1				
LISINOPRIL TAB 2.5MG	LISINOPRIL TAB 2.5 MG	Tier 1				
LISINOPRIL TAB 20MG	LISINOPRIL TAB 20 MG	Tier 1				
LISINOPRIL TAB 30MG	LISINOPRIL TAB 30 MG	Tier 1				
LISINOPRIL TAB 40MG	LISINOPRIL TAB 40 MG	Tier 1				
LISINOPRIL TAB 5MG	LISINOPRIL TAB 5 MG	Tier 1				
LOTENSIN TAB 10MG	BENAZEPRIL HCL TAB 10 MG	Tier 3/4				
LOTENSIN TAB 20MG	BENAZEPRIL HCL TAB 20 MG	Tier 3/4				
LOTENSIN TAB 40MG	BENAZEPRIL HCL TAB 40 MG	Tier 3/4				
MOEXIPRIL TAB 15MG	MOEXIPRIL HCL TAB 15 MG	Tier 1				
MOEXIPRIL TAB 7.5MG	MOEXIPRIL HCL TAB 7.5 MG	Tier 1				
PERINDOPRIL TAB 2MG	PERINDOPRIL ERBUMINE TAB 2 MG	Tier 1				
PERINDOPRIL TAB 4MG	PERINDOPRIL ERBUMINE TAB 4 MG	Tier 1				
PERINDOPRIL TAB 8MG	PERINDOPRIL ERBUMINE TAB 8 MG	Tier 1				
QBRELIS SOL 1MG/ML	LISINOPRIL ORAL SOLN 1 MG/ML	Tier 3/4	X			
QUINAPRIL TAB 10MG	QUINAPRIL HCL TAB 10 MG	Tier 1				
QUINAPRIL TAB 20MG	QUINAPRIL HCL TAB 20 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
QUINAPRIL TAB 40MG	QUINAPRIL HCL TAB 40 MG	Tier 1				
QUINAPRIL TAB 5MG	QUINAPRIL HCL TAB 5 MG	Tier 1				
RAMIPRIL CAP 1.25MG	RAMIPRIL CAP 1.25 MG	Tier 1				
RAMIPRIL CAP 10MG	RAMIPRIL CAP 10 MG	Tier 1				
RAMIPRIL CAP 2.5MG	RAMIPRIL CAP 2.5 MG	Tier 1				
RAMIPRIL CAP 5MG	RAMIPRIL CAP 5 MG	Tier 1				
TRANDOLAPRIL TAB 1MG	TRANDOLAPRIL TAB 1 MG	Tier 1				
TRANDOLAPRIL TAB 2MG	TRANDOLAPRIL TAB 2 MG	Tier 1				
TRANDOLAPRIL TAB 4MG	TRANDOLAPRIL TAB 4 MG	Tier 1				
ZESTRIL TAB 10MG	LISINOPRIL TAB 10 MG	Tier 3/4				
ZESTRIL TAB 20MG	LISINOPRIL TAB 20 MG	Tier 3/4				
ZESTRIL TAB 5MG	LISINOPRIL TAB 5 MG	Tier 3/4				
Anthelmintics - Worm Infection Drugs						
ALBENDAZOLE TAB 200MG	ALBENDAZOLE TAB 200 MG	Tier 1		X		
BENZNIDAZOLE TAB 100MG	BENZNIDAZOLE TAB 100 MG	Tier 2		X		
BENZNIDAZOLE TAB 12.5MG	BENZNIDAZOLE TAB 12.5 MG	Tier 2		X		
BILTRICIDE TAB 600MG	PRAZQUANTEL TAB 600 MG	Tier 3/4				
EGATEN TAB 250MG	TRICLABENDAZOLE TAB 250 MG	Tier 3				
EMVERM CHW 100MG	MEBENDAZOLE CHEW TAB 100 MG	Tier 3/4		X		
IVERMECTIN TAB 3MG	IVERMECTIN TAB 3 MG	Tier 1	X	X		
IVERMECTIN TAB 6MG	IVERMECTIN TAB 6 MG	Tier 1	X			
PRAZQUANTEL TAB 600MG	PRAZQUANTEL TAB 600 MG	Tier 1				
STROMECTOL TAB 3MG	IVERMECTIN TAB 3 MG	Tier 3/4	X	X		
Anti-Cytomegalovirus (CMV) Agents - Miscellaneous Antiviral Drugs						
LIVTENCITY TAB 200MG	MARIBAVIR TAB 200 MG	Tier 3/4	X	X		
PREVYMIS PAK 120MG	LETERMOVIR PELLETT PACK 120 MG	Tier 2	X			
PREVYMIS PAK 20MG	LETERMOVIR PELLETT PACK 20 MG	Tier 2	X			
PREVYMIS TAB 240MG	LETERMOVIR TAB 240 MG	Tier 2	X			
PREVYMIS TAB 480MG	LETERMOVIR TAB 480 MG	Tier 2	X			
VALGANCICLOV SOL 50MG/ML	VALGANCICLOVIR HCL FOR SOLN 50 MG/ML (BASE EQUIV)	Tier 1				
VALGANCICLOV TAB 450MG	VALGANCICLOVIR HCL TAB 450 MG (BASE EQUIVALENT)	Tier 1				
Anti-hepatitis B (HBV) Agents - Hepatitis B Drugs						
ADEFOV DIPIV TAB 10MG	ADEFOVIR DIPIVOXIL TAB 10 MG	Tier 1				
BARACLUDE SOL	ENTECAVIR ORAL SOLN 0.05 MG/ML	Tier 2				
ENTECAVIR TAB 0.5MG	ENTECAVIR TAB 0.5 MG	Tier 1				
ENTECAVIR TAB 1MG	ENTECAVIR TAB 1 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
LAMIVUDINE TAB 100MG	LAMIVUDINE TAB 100 MG (HBV)	Tier 1				
Anti-hepatitis C (HCV) Agents, Direct Acting Agents - Hepatitis C Drugs						
EPCLUSA PAK 150-37.5	SOFOSBUVIR-VELPATASVIR PELLETT PACK 150-37.5 MG	Tier 2	X	X		
EPCLUSA PAK 200-50MG	SOFOSBUVIR-VELPATASVIR PELLETT PACK 200-50 MG	Tier 2	X	X		
EPCLUSA TAB 200-50MG	SOFOSBUVIR-VELPATASVIR TAB 200-50 MG	Tier 2	X	X		
EPCLUSA TAB 400-100	SOFOSBUVIR-VELPATASVIR TAB 400-100 MG	Tier 2	X	X		
HARVONI PAK	LEDIPASVIR-SOFOSBUVIR PELLETT PACK 33.75-150 MG	Tier 2	X	X	X	
HARVONI PAK 45-200MG	LEDIPASVIR-SOFOSBUVIR PELLETT PACK 45-200 MG	Tier 2	X	X	X	
HARVONI TAB 45-200MG	LEDIPASVIR-SOFOSBUVIR TAB 45-200 MG	Tier 2	X	X	X	
HARVONI TAB 90-400MG	LEDIPASVIR-SOFOSBUVIR TAB 90-400 MG	Tier 2	X	X	X	
LEDIP-SOFOSB TAB 90-400MG	LEDIPASVIR-SOFOSBUVIR TAB 90-400 MG	Tier 2	X	X	X	
MAVYRET PAK 50-20MG	GLECAPREVIR-PIBRENTASVIR PELLETT PACK 50-20 MG	Tier 2	X	X		
MAVYRET TAB 100-40MG	GLECAPREVIR-PIBRENTASVIR TAB 100-40 MG	Tier 2	X	X		
SOFOS/VELPAT TAB 400-100	SOFOSBUVIR-VELPATASVIR TAB 400-100 MG	Tier 2	X	X		
SOVALDI PAK 150MG	SOFOSBUVIR PELLETT PACK 150 MG	Tier 3/4	X	X	X	
SOVALDI PAK 200MG	SOFOSBUVIR PELLETT PACK 200 MG	Tier 3/4	X	X	X	
SOVALDI TAB 200MG	SOFOSBUVIR TAB 200 MG	Tier 3/4	X	X	X	
SOVALDI TAB 400MG	SOFOSBUVIR TAB 400 MG	Tier 3/4	X	X	X	
VOSEVI TAB	SOFOSBUVIR-VELPATASVIR-VOXILAPREVIR TAB 400-100-100 MG	Tier 2	X	X		
ZEPATIER TAB 50-100MG	ELBASVIR-GRAZOPREVIR TAB 50-100 MG	Tier 2	X	X		
Anti-hepatitis C (HCV) Agents, Other - Hepatitis C Drugs						
PEGASYS INJ	PEGINTERFERON ALFA-2A SOLN PREFILLED SYR 180 MCG/0.5ML	Tier 2				
PEGASYS INJ 180MCG/M	PEGINTERFERON ALFA-2A INJ 180 MCG/ML	Tier 2				
RIBAVIRIN CAP 200MG	RIBAVIRIN CAP 200 MG	Tier 1				
RIBAVIRIN TAB 200MG	RIBAVIRIN TAB 200 MG	Tier 1				
Anti-HIV Agents, Integrase Inhibitors (INSTI)						
DOVATO TAB 50-300MG	DOLUTEGRAVIR SODIUM-LAMIVUDINE TAB 50-300 MG (BASE EQ)	Tier 2		X		
Anti-HIV Agents, Integrase Inhibitors (INSTI) - HIV Drugs						
BIKTARVY TAB	BICTEGRAVIR-EMTRICITABINE-TENOFOVIR AF TAB 50-200-25 MG	Tier 3/4		X		
BIKTARVY TAB	BICTEGRAVIR-EMTRICITABINE-TENOFOVIR AF TAB 30-120-15 MG	Tier 3/4		X		

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GENVOYA TAB	ELVITEGRAV-COBIC-EMTRICITAB-TENOFOV AF TAB 150-150-200-10 MG	Tier 3/4		X		
ISENTRESS CHW 100MG	RALTEGRAVIR POTASSIUM CHEW TAB 100 MG (BASE EQUIV)	Tier 2				
ISENTRESS CHW 25MG	RALTEGRAVIR POTASSIUM CHEW TAB 25 MG (BASE EQUIV)	Tier 2				
ISENTRESS POW 100MG	RALTEGRAVIR POTASSIUM PACKET FOR SUSP 100 MG (BASE EQUIV)	Tier 2				
ISENTRESS TAB 400MG	RALTEGRAVIR POTASSIUM TAB 400 MG (BASE EQUIV)	Tier 2				
ISENTRESS HD TAB 600MG	RALTEGRAVIR POTASSIUM TAB 600 MG (BASE EQUIV)	Tier 2				
STRIBILD TAB	ELVITEGRAV-COBIC-EMTRICITAB-TENOFOVDF TAB 150-150-200-300 MG	Tier 3/4		X		
TIVICAY TAB 50MG	DOLUTEGRAVIR SODIUM TAB 50 MG (BASE EQUIV)	Tier 3				
TIVICAY PD TAB 5MG	DOLUTEGRAVIR SODIUM TAB FOR ORAL SUSP 5 MG (BASE EQUIV)	Tier 3				
TRIUMEQ TAB	ABACAVIR-DOLUTEGRAVIR-LAMIVUDINE TAB 600-50-300 MG	Tier 2		X		
TRIUMEQ PD TAB	ABACAVIR-DOLUTEGRAVIR-LAMIVUDINE TAB FOR ORAL SUS 60-5-30 MG	Tier 2		X		
Anti-HIV Agents, Non-nucleoside Reverse Transcriptase Inhibitors (NNRTI) - HIV Drugs						
COMPLERA TAB	EMTRICITABINE-RILPIVIRINE-TENOFOVIR DF TAB 200-25-300 MG	Tier 3/4		X		
DELSTRIGO TAB	DORAVIRINE-LAMIVUDINE-TENOFOVIR DF TAB 100-300-300 MG	Tier 2		X		
EDURANT TAB 25MG	RILPIVIRINE HCL TAB 25 MG (BASE EQUIVALENT)	Tier 2				
EDURANT PED TAB 2.5MG	RILPIVIRINE HCL TAB FOR ORAL SUSP 2.5 MG (BASE EQUIVALENT)	Tier 2				
EFAVIR/EMTRI TAB TENOFOVI	EFAVIRENZ-EMTRICITABINE-TENOFOVIR DF TAB 600-200-300 MG	Tier 1		X		
EFAVIR/LAMIV TAB TENOFOVI	EFAVIRENZ-LAMIVUDINE-TENOFOVIR DF TAB 600-300-300 MG	Tier 1		X		
EFAVIR/LAMIV TAB TENOFOVI	EFAVIRENZ-LAMIVUDINE-TENOFOVIR DF TAB 400-300-300 MG	Tier 1		X		
EFAVIRENZ CAP 200MG	EFAVIRENZ CAP 200 MG	Tier 1				
EFAVIRENZ CAP 50MG	EFAVIRENZ CAP 50 MG	Tier 1				
EFAVIRENZ TAB 600MG	EFAVIRENZ TAB 600 MG	Tier 1				
EMTRIC/RILPI TAB TENOF DF	EMTRICITABINE-RILPIVIRINE-TENOFOVIR DF TAB 200-25-300 MG	Tier 1		X		
ETRAVIRINE TAB 100MG	ETRAVIRINE TAB 100 MG	Tier 1				
ETRAVIRINE TAB 200MG	ETRAVIRINE TAB 200 MG	Tier 1				

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INTELENCE TAB 100MG	ETRAVIRINE TAB 100 MG	Tier 3/4				
INTELENCE TAB 200MG	ETRAVIRINE TAB 200 MG	Tier 3/4				
INTELENCE TAB 25MG	ETRAVIRINE TAB 25 MG	Tier 2				
JULUCA TAB 50-25MG	DOLUTEGRAVIR SODIUM-RILPIVIRINE HCL TAB 50-25 MG (BASE EQ)	Tier 2		X		
NEVIRAPINE SUS 50MG/5ML	NEVIRAPINE SUSP 50 MG/5ML	Tier 1				
NEVIRAPINE TAB 200MG	NEVIRAPINE TAB 200 MG	Tier 1				
NEVIRAPINE TAB 400MG ER	NEVIRAPINE TAB ER 24HR 400 MG	Tier 1				
ODEFSEY TAB	EMTRICITABINE-RILPIVIRINE-TENOFOVIR AF TAB 200-25-25 MG	Tier 3/4		X		
PIFELTRO TAB 100MG	DORAVIRINE TAB 100 MG	Tier 3				
RILPIVIRINE TAB 25MG	RILPIVIRINE HCL TAB 25 MG (BASE EQUIVALENT)	Tier 1				
SYMFI TAB	EFAVIRENZ-LAMIVUDINE-TENOFOVIR DF TAB 600-300-300 MG	Tier 2		X		
SYMFI LO TAB	EFAVIRENZ-LAMIVUDINE-TENOFOVIR DF TAB 400-300-300 MG	Tier 2		X		
Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI)						
SUNLENCA TAB 300MG	LENACAPAVIR SODIUM TAB THERAPY PACK 4 X 300 MG	Tier 3/4		X		
SUNLENCA TAB 300MG	LENACAPAVIR SODIUM TAB THERAPY PACK 5 X 300 MG	Tier 3/4		X		
SUNLENCA TAB 300MG	LENACAPAVIR SODIUM TAB 300 MG	Tier 3/4		X		
YEZTUGO TAB 300MG	LENACAPAVIR SODIUM TAB 300 MG	Tier 3/4		X		
Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI) - HIV Drugs						
ABACA/LAMIVU TAB 600-300	ABACAVIR SULFATE-LAMIVUDINE TAB 600-300 MG	Tier 1				
ABACAVIR SOL 20MG/ML	ABACAVIR SULFATE SOLN 20 MG/ML (BASE EQUIV)	Tier 1				
ABACAVIR TAB 300MG	ABACAVIR SULFATE TAB 300 MG (BASE EQUIV)	Tier 1				
CIMDUO TAB 300-300	LAMIVUDINE-TENOFOVIR DISOPROXIL FUMARATE TAB 300-300 MG	Tier 2		X		
DESCOVY TAB 120-15MG	EMTRICITABINE-TENOFOVIR ALAFENAMIDE FUMARATE TAB 120-15 MG	Tier 3/4		X		
DESCOVY TAB 200/25MG	EMTRICITABINE-TENOFOVIR ALAFENAMIDE FUMARATE TAB 200-25 MG	HCR		X		
EMTR/TEN DF TAB 100-150	EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE TAB 100-150 MG	Tier 1		X		
EMTR/TEN DF TAB 133-200	EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE TAB 133-200 MG	Tier 1		X		
EMTR/TEN DF TAB 167-250	EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE TAB 167-250 MG	Tier 1		X		

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

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
SELZENTRY TAB 150MG	MARAVIROC TAB 150 MG	Tier 3/4				
SELZENTRY TAB 300MG	MARAVIROC TAB 300 MG	Tier 3/4				
TYBOST TAB 150MG	COBICISTAT TAB 150 MG	Tier 2				
VOCABRIA TAB 30MG	CABOTEGRAVIR SODIUM TAB 30 MG	Tier 3/4				
Anti-HIV Agents, Protease Inhibitors - HIV Drugs						
APTIVUS CAP 250MG	TIPRANA VIR CAP 250 MG	Tier 2				
ATAZANAVIR CAP 150MG	ATAZANAVIR SULFATE CAP 150 MG (BASE EQUIV)	Tier 1				
ATAZANAVIR CAP 200MG	ATAZANAVIR SULFATE CAP 200 MG (BASE EQUIV)	Tier 1				
ATAZANAVIR CAP 300MG	ATAZANAVIR SULFATE CAP 300 MG (BASE EQUIV)	Tier 1				
DARUNAVIR TAB 600MG	DARUNAVIR TAB 600 MG	Tier 1				
DARUNAVIR TAB 800MG	DARUNAVIR TAB 800 MG	Tier 1				
EVOTAZ TAB 300-150	ATAZANAVIR SULFATE-COBICISTAT TAB 300-150 MG (BASE EQUIV)	Tier 2				
FOSAMPRENAVI TAB 700MG	FOSAMPRENAVIR CALCIUM TAB 700 MG (BASE EQUIV)	Tier 1				
KALETRA SOL	LOPINAVIR-RITONAVIR SOLN 400-100 MG/5ML (80-20 MG/ML)	Tier 3				
KALETRA TAB 100-25MG	LOPINAVIR-RITONAVIR TAB 100-25 MG	Tier 3/4				
KALETRA TAB 200-50MG	LOPINAVIR-RITONAVIR TAB 200-50 MG	Tier 3/4				
LOPIN/RITON SOL 80-20/ML	LOPINAVIR-RITONAVIR SOLN 400-100 MG/5ML (80-20 MG/ML)	Tier 1				
LOPIN/RITON TAB 100-25MG	LOPINAVIR-RITONAVIR TAB 100-25 MG	Tier 1				
LOPIN/RITON TAB 200-50MG	LOPINAVIR-RITONAVIR TAB 200-50 MG	Tier 1				
NORVIR CAP 100MG	RITONAVIR CAP 100 MG	Tier 2				
NORVIR POW 100MG	RITONAVIR POWDER PACKET 100 MG	Tier 2				
PREZCOBIX TAB 675/150	DARUNAVIR-COBICISTAT TAB 675-150 MG	Tier 2				
PREZCOBIX TAB 800-150	DARUNAVIR-COBICISTAT TAB 800-150 MG	Tier 2				
PREZISTA SUS 100MG/ML	DARUNAVIR ORAL SUSP 100 MG/ML	Tier 2				
PREZISTA TAB 150MG	DARUNAVIR TAB 150 MG	Tier 2				
PREZISTA TAB 75MG	DARUNAVIR TAB 75 MG	Tier 2				
REYATAZ POW 50MG	ATAZANAVIR SULFATE ORAL POWDER PACKET 50 MG (BASE EQUIV)	Tier 2				
RITONAVIR TAB 100MG	RITONAVIR TAB 100 MG	Tier 1				
VIRACEPT TAB 250MG	NELFINAVIR MESYLATE TAB 250 MG	Tier 2				
VIRACEPT TAB 625MG	NELFINAVIR MESYLATE TAB 625 MG	Tier 2				
Anti-Inflammatories, Inhaled Corticosteroids - Asthma/Lung Drugs						
ARNUITY ELPT INH 100MCG	FLUTICASONE FUROATE AEROSOL POWDER BREATH ACTIV 100 MCG/ACT	Tier 1		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ARNUITY ELPT INH 200MCG	FLUTICASONE FUROATE AEROSOL POWDER BREATH ACTIV 200 MCG/ACT	Tier 1		X		
ARNUITY ELPT INH 50MCG	FLUTICASONE FUROATE AEROSOL POWDER BREATH ACTIV 50 MCG/ACT	Tier 1		X		
BUDESONIDE SUS 0.25MG/2	BUDESONIDE INHALATION SUSP 0.25 MG/2ML	Tier 1		X		
BUDESONIDE SUS 0.5MG/2	BUDESONIDE INHALATION SUSP 0.5 MG/2ML	Tier 1		X		
BUDESONIDE SUS 1MG/2ML	BUDESONIDE INHALATION SUSP 1 MG/2ML	Tier 1		X		
FLUNISOLIDE SPR 0.025%	FLUNISOLIDE NASAL SOLN 25 MCG/ACT (0.025%)	Tier 1				
FLUTICAS HFA AER 110MCG	FLUTICASONE PROPIONATE HFA INHAL AER 110 MCG/ACT	Tier 3/4		X		
FLUTICAS HFA AER 220MCG	FLUTICASONE PROPIONATE HFA INHAL AER 220 MCG/ACT	Tier 3/4		X		
FLUTICAS HFA AER 44MCG	FLUTICASONE PROPIONATE HFA INHAL AERO 44 MCG/ACT	Tier 3/4		X		
FLUTICASONE SPR 50MCG	FLUTICASONE PROPIONATE NASAL SUSP 50 MCG/ACT	Tier 1				
MOMETASONE SPR 50MCG	MOMETASONE FUROATE NASAL SUSP 50 MCG/ACT	Tier 1				
NUCALA INJ 100MG/ML	MEPOLIZUMAB SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML	Tier 3/4	X	X		
NUCALA INJ 100MG/ML	MEPOLIZUMAB SUBCUTANEOUS SOLUTION PREF SYRINGE 100 MG/ML	Tier 3/4	X	X		
NUCALA INJ 40MG/0.4	MEPOLIZUMAB SUBCUTANEOUS SOLUTION PREF SYRINGE 40 MG/0.4ML	Tier 3/4	X	X		
OMNARIS SPR	CICLESONIDE NASAL SUSP 50 MCG/ACT	Tier 3/4				
QNASL AER 80MCG	BECLOMETHASONE DIPROPIONATE NASAL AEROSOL 80 MCG/ACT	Tier 3/4				
QNASL CHILD SPR 40MCG	BECLOMETHASONE DIPROPIONATE NASAL AEROSOL 40 MCG/ACT	Tier 3/4				
QVAR REDIHA AER 80MCG	BECLOMETHASONE DIPROP HFA BREATH ACT INH AER 80 MCG/ACT	Tier 1		X		
QVAR REDIHAL AER 40MCG	BECLOMETHASONE DIPROP HFA BREATH ACT INH AER 40 MCG/ACT	Tier 1		X		
ZETONNA AER 37MCG	CICLESONIDE NASAL AEROSOL SOLN 37 MCG/ACT (50 MCG/VALVE)	Tier 3				
Anti-Influenza Agents - Flu Drugs						
OSELTAMIVIR CAP 30MG	OSELTAMIVIR PHOSPHATE CAP 30 MG (BASE EQUIV)	Tier 1				
OSELTAMIVIR CAP 45MG	OSELTAMIVIR PHOSPHATE CAP 45 MG (BASE EQUIV)	Tier 1				
OSELTAMIVIR CAP 75MG	OSELTAMIVIR PHOSPHATE CAP 75 MG (BASE EQUIV)	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
OSELTAMIVIR SUS 6MG/ML	OSELTAMIVIR PHOSPHATE FOR SUSP 6 MG/ML (BASE EQUIV)	Tier 1				
RELENZA MIS DISKHALE	ZANAMIVIR AEROSOL POWDER BREATH ACTIVATED 5 MG/ACT	Tier 3				
RIMANTADINE TAB 100MG	RIMANTADINE HYDROCHLORIDE TAB 100 MG	Tier 1				
XOFLUZA TAB 40MG	BALOXAVIR MARBOXIL TAB THERAPY PACK 1 X 40 MG (40 MG DOSE)	Tier 3		X		
XOFLUZA TAB 80MG	BALOXAVIR MARBOXIL TAB THERAPY PACK 1 X 80 MG (80 MG DOSE)	Tier 3		X		
Antiandrogens - Hormone Suppressants						
ABIRATERONE TAB 250MG	ABIRATERONE ACETATE TAB 250 MG	Tier 1		X		
ABIRTEGA TAB 250MG	ABIRATERONE ACETATE TAB 250 MG	Tier 1		X		
BICALUTAMIDE TAB 50MG	BICALUTAMIDE TAB 50 MG	Tier 1				
ERLEADA TAB 240MG	APALUTAMIDE TAB 240 MG	Tier 2	X	X		
ERLEADA TAB 60MG	APALUTAMIDE TAB 60 MG	Tier 2	X	X		
NUBEQA TAB 300MG	DAROLUTAMIDE TAB 300 MG	Tier 2	X	X		
ORGOVYX TAB 120MG	RELUGOLIX TAB 120 MG	Tier 3	X	X		
XTANDI CAP 40MG	ENZALUTAMIDE CAP 40 MG	Tier 2	X	X		
Antiangiogenic Agents - Chemotherapy Agents						
LENALIDOMIDE CAP 10MG	LENALIDOMIDE CAP 10 MG	Tier 1	X	X		
LENALIDOMIDE CAP 15MG	LENALIDOMIDE CAP 15 MG	Tier 1	X	X		
LENALIDOMIDE CAP 2.5MG	LENALIDOMIDE CAPS 2.5 MG	Tier 1	X	X		
LENALIDOMIDE CAP 20MG	LENALIDOMIDE CAP 20 MG	Tier 1	X	X		
LENALIDOMIDE CAP 25MG	LENALIDOMIDE CAP 25 MG	Tier 1	X	X		
LENALIDOMIDE CAP 5MG	LENALIDOMIDE CAP 5 MG	Tier 1	X	X		
POMALIDOMIDE CAP 1MG	POMALIDOMIDE CAP 1 MG	Tier 1	X	X		
POMALIDOMIDE CAP 2MG	POMALIDOMIDE CAP 2 MG	Tier 1	X	X		
POMALIDOMIDE CAP 3MG	POMALIDOMIDE CAP 3 MG	Tier 1	X	X		
POMALIDOMIDE CAP 4MG	POMALIDOMIDE CAP 4 MG	Tier 1	X	X		
POMALYST CAP 1MG	POMALIDOMIDE CAP 1 MG	Tier 3	X	X		
POMALYST CAP 2MG	POMALIDOMIDE CAP 2 MG	Tier 3	X	X		
POMALYST CAP 3MG	POMALIDOMIDE CAP 3 MG	Tier 3	X	X		
POMALYST CAP 4MG	POMALIDOMIDE CAP 4 MG	Tier 3	X	X		
REVLIMID CAP 10MG	LENALIDOMIDE CAP 10 MG	Tier 2	X	X		
REVLIMID CAP 15MG	LENALIDOMIDE CAP 15 MG	Tier 2	X	X		
REVLIMID CAP 2.5MG	LENALIDOMIDE CAPS 2.5 MG	Tier 2	X	X		
REVLIMID CAP 20MG	LENALIDOMIDE CAP 20 MG	Tier 2	X	X		
REVLIMID CAP 25MG	LENALIDOMIDE CAP 25 MG	Tier 2	X	X		
REVLIMID CAP 5MG	LENALIDOMIDE CAP 5 MG	Tier 2	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
THALOMID CAP 100MG	THALIDOMIDE CAP 100 MG	Tier 2	X			
THALOMID CAP 150MG	THALIDOMIDE CAP 150 MG	Tier 2	X			
THALOMID CAP 200MG	THALIDOMIDE CAP 200 MG	Tier 2	X			
THALOMID CAP 50MG	THALIDOMIDE CAP 50 MG	Tier 2	X			
Antiarrhythmics - Heart Regulation Drugs						
AMIODARONE TAB 100MG	AMIODARONE HCL TAB 100 MG	Tier 1				
AMIODARONE TAB 200MG	AMIODARONE HCL TAB 200 MG	Tier 1				
AMIODARONE TAB 400MG	AMIODARONE HCL TAB 400 MG	Tier 1				
BETAPACE AF TAB 120MG	SOTALOL HCL (AFIB/AFL) TAB 120 MG	Tier 3/4				
BETAPACE AF TAB 160MG	SOTALOL HCL (AFIB/AFL) TAB 160 MG	Tier 3/4				
BETAPACE AF TAB 80MG	SOTALOL HCL (AFIB/AFL) TAB 80 MG	Tier 3/4				
DISOPYRAMIDE CAP 100MG	DISOPYRAMIDE PHOSPHATE CAP 100 MG	Tier 1				
DISOPYRAMIDE CAP 150MG	DISOPYRAMIDE PHOSPHATE CAP 150 MG	Tier 1				
DOFETILIDE CAP 125MCG	DOFETILIDE CAP 125 MCG (0.125 MG)	Tier 1				
DOFETILIDE CAP 250MCG	DOFETILIDE CAP 250 MCG (0.25 MG)	Tier 1				
DOFETILIDE CAP 500MCG	DOFETILIDE CAP 500 MCG (0.5 MG)	Tier 1				
FLECAINIDE TAB 100MG	FLECAINIDE ACETATE TAB 100 MG	Tier 1				
FLECAINIDE TAB 150MG	FLECAINIDE ACETATE TAB 150 MG	Tier 1				
FLECAINIDE TAB 50MG	FLECAINIDE ACETATE TAB 50 MG	Tier 1				
MEXILETINE CAP 150MG	MEXILETINE HCL CAP 150 MG	Tier 1				
MEXILETINE CAP 200MG	MEXILETINE HCL CAP 200 MG	Tier 1				
MEXILETINE CAP 250MG	MEXILETINE HCL CAP 250 MG	Tier 1				
MULTAQ TAB 400MG	DRONEDARONE HCL TAB 400 MG (BASE EQUIVALENT)	Tier 3/4	X			
NORPACE CAP 100MG	DISOPYRAMIDE PHOSPHATE CAP 100 MG	Tier 3/4				
NORPACE CAP 100MG CR	DISOPYRAMIDE PHOSPHATE CAP ER 12HR 100 MG	Tier 2				
NORPACE CAP 150MG	DISOPYRAMIDE PHOSPHATE CAP 150 MG	Tier 3/4				
NORPACE CAP 150MG CR	DISOPYRAMIDE PHOSPHATE CAP ER 12HR 150 MG	Tier 2				
PACERONE TAB 100MG	AMIODARONE HCL TAB 100 MG	Tier 3				
PACERONE TAB 200MG	AMIODARONE HCL TAB 200 MG	Tier 3/4				
PACERONE TAB 400MG	AMIODARONE HCL TAB 400 MG	Tier 3				
PROPAFENONE CAP 225MG ER	PROPAFENONE HCL CAP ER 12HR 225 MG	Tier 1				
PROPAFENONE CAP 325MG ER	PROPAFENONE HCL CAP ER 12HR 325 MG	Tier 1				
PROPAFENONE CAP 425MG ER	PROPAFENONE HCL CAP ER 12HR 425 MG	Tier 1				
PROPAFENONE TAB 150MG	PROPAFENONE HCL TAB 150 MG	Tier 1				
PROPAFENONE TAB 225MG	PROPAFENONE HCL TAB 225 MG	Tier 1				
PROPAFENONE TAB 300MG	PROPAFENONE HCL TAB 300 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
QUINIDINE GL TAB 324MG CR	QUINIDINE GLUCONATE TAB ER 324 MG	Tier 1				
QUINIDINE GL TAB 324MG ER	QUINIDINE GLUCONATE TAB ER 324 MG	Tier 1				
QUINIDINE SU TAB 200MG	QUINIDINE SULFATE TAB 200 MG	Tier 1				
QUINIDINE SU TAB 300MG	QUINIDINE SULFATE TAB 300 MG	Tier 1				
SOTALOL TAB 120MG	SOTALOL HCL TAB 120 MG	Tier 1				
SOTALOL TAB 160MG	SOTALOL HCL TAB 160 MG	Tier 1				
SOTALOL TAB 80MG	SOTALOL HCL TAB 80 MG	Tier 1				
SOTALOL AF TAB 120MG	SOTALOL HCL (AFIB/AFL) TAB 120 MG	Tier 1				
SOTALOL AF TAB 160MG	SOTALOL HCL (AFIB/AFL) TAB 160 MG	Tier 1				
SOTALOL AF TAB 80MG	SOTALOL HCL (AFIB/AFL) TAB 80 MG	Tier 1				
SOTALOL HCL TAB 120MG	SOTALOL HCL TAB 120 MG	Tier 1				
SOTALOL HCL TAB 160MG	SOTALOL HCL TAB 160 MG	Tier 1				
SOTALOL HCL TAB 240MG	SOTALOL HCL TAB 240 MG	Tier 1				
SOTALOL HCL TAB 80MG	SOTALOL HCL TAB 80 MG	Tier 1				
SOTYLIZE SOL 5MG/ML	SOTALOL HCL ORAL SOLUTION 5 MG/ML	Tier 3/4	X			
TIKOSYN CAP 125MCG	DOFETILIDE CAP 125 MCG (0.125 MG)	Tier 3/4				
TIKOSYN CAP 250MCG	DOFETILIDE CAP 250 MCG (0.25 MG)	Tier 3/4				
TIKOSYN CAP 500MCG	DOFETILIDE CAP 500 MCG (0.5 MG)	Tier 3/4				
Antibacterials, Other						
VOWST CAP	FECAL MICROBIOTA SPORES, LIVE-BRPK CAPS	Tier 3/4	X	X		
Antibacterials, Other - Antibiotics						
AEMCOLO TAB 194MG	RIFAMYCIN SODIUM TAB DELAYED RELEASE 194 MG (BASE EQUIV)	Tier 3				
ALTABAX OIN 1%	RETAPAMULIN OINT 1%	Tier 3				
ARZOL SILVER MIS NITR APP	SILVER NITRATE-POTASSIUM NITRATE APPLICATOR 75-25%	Tier 3				
BENZALKONIUM SOL 50%	BENZALKONIUM CHLORIDE SOLN 50%	Tier 1				
BENZALKONIUM SOL NF	BENZALKONIUM CHLORIDE SOLN	Tier 2				
CLEOCIN CAP 150MG	CLINDAMYCIN HCL CAP 150 MG	Tier 3/4				
CLEOCIN CAP 300MG	CLINDAMYCIN HCL CAP 300 MG	Tier 3/4				
CLEOCIN CAP 75MG	CLINDAMYCIN HCL CAP 75 MG	Tier 2				
CLEOCIN CRE 2% VAG	CLINDAMYCIN PHOSPHATE VAGINAL CREAM 2%	Tier 3/4				
CLEOCIN SUP 100MG	CLINDAMYCIN PHOSPHATE VAGINAL SUPPOS 100 MG	Tier 2				
CLEOCIN PED SOL 75MG/5ML	CLINDAMYCIN PALMITATE HCL FOR SOLN 75 MG/5ML (BASE EQUIV)	Tier 3/4				
CLINDAMYCIN CAP 150MG	CLINDAMYCIN HCL CAP 150 MG	Tier 1				
CLINDAMYCIN CAP 300MG	CLINDAMYCIN HCL CAP 300 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
CLINDAMYCIN CAP 75MG	CLINDAMYCIN HCL CAP 75 MG	Tier 1				
CLINDAMYCIN CRE 2% VAG	CLINDAMYCIN PHOSPHATE VAGINAL CREAM 2%	Tier 1				
CLINDAMYCIN SOL 75MG/5ML	CLINDAMYCIN PALMITATE HCL FOR SOLN 75 MG/5ML (BASE EQUIV)	Tier 1				
CLINDESSE CRE 2%	CLINDAMYCIN PHOSPHATE (ONE DOSE) VAGINAL CREAM 2%	Tier 2				
COLISTIMETH INJ 150MG	COLISTIMETHATE SOD FOR INJ 150 MG (COLISTIN BASE ACTIVITY)	Tier 1				
COLY-MYCIN M INJ 150MG	COLISTIMETHATE SOD FOR INJ 150 MG (COLISTIN BASE ACTIVITY)	Tier 3/4				
FEM PH GEL	ACETIC ACID-OXYQUINOLINE VAGINAL GEL 0.9-0.025%	Tier 3/4				
FIRVANQ SOL 25MG/ML	VANCOMYCIN HCL FOR ORAL SOLN 25 MG/ML (BASE EQUIVALENT)	Tier 3/4				
FIRVANQ SOL 50MG/ML	VANCOMYCIN HCL FOR ORAL SOLN 50 MG/ML (BASE EQUIVALENT)	Tier 3/4				
FLAGYL CAP 375MG	METRONIDAZOLE CAP 375 MG	Tier 3/4				
FOSFOMYCIN POW 3GM	FOSFOMYCIN TROMETHAMINE POWD PACK 3 GM (BASE EQUIVALENT)	Tier 1				
HIPREX TAB 1GM	METHENAMINE HIPPURATE TAB 1 GM	Tier 3/4				
IODINE TIN 2%	*IODINE TINCTURE**	Tier 1				
LIKMEZ SUS 500/5ML	METRONIDAZOLE SUSP 500 MG/5ML	Tier 3/4				
LINEZOLID SUS 100/5ML	LINEZOLID FOR SUSP 100 MG/5ML	Tier 1				
LINEZOLID TAB 600MG	LINEZOLID TAB 600 MG	Tier 1				
LUGOLS SOL IODINE	*IODINE SOLUTION**	Tier 3				
MACROBID CAP 100MG	NITROFURANTOIN MONOHYDRATE MACROCRYSTALLINE CAP 100 MG	Tier 3/4				
MACRODANTIN CAP 100MG	NITROFURANTOIN MACROCRYSTALLINE CAP 100 MG	Tier 3/4				
MACRODANTIN CAP 25MG	NITROFURANTOIN MACROCRYSTALLINE CAP 25 MG	Tier 3/4				
MACRODANTIN CAP 50MG	NITROFURANTOIN MACROCRYSTALLINE CAP 50 MG	Tier 3/4				
MAFENIDE ACE PAK 5%	MAFENIDE ACETATE PACKET FOR TOPICAL SOLN 5% (50 GM)	Tier 1				
METHENAM HIP TAB 1GM	METHENAMINE HIPPURATE TAB 1 GM	Tier 1				
METHENAM MAN TAB 1000MG	METHENAMINE MANDELATE TAB 1 GM	Tier 1				
METHENAM MAN TAB 500MG	METHENAMINE MANDELATE TAB 0.5 GM	Tier 1				
METROCREAM CRE 0.75%	METRONIDAZOLE CREAM 0.75%	Tier 3/4				
METROLOTION LOT 0.75%	METRONIDAZOLE LOTION 0.75%	Tier 3/4				
METRONIDAZOL CAP 375MG	METRONIDAZOLE CAP 375 MG	Tier 1				
METRONIDAZOL CRE 0.75%	METRONIDAZOLE CREAM 0.75%	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
METRONIDAZOL GEL 0.75%	METRONIDAZOLE GEL 0.75%	Tier 1				
METRONIDAZOL GEL 0.75%VAG	METRONIDAZOLE VAGINAL GEL 0.75%	Tier 1				
METRONIDAZOL GEL 1%	METRONIDAZOLE GEL 1%	Tier 1				
METRONIDAZOL LOT 0.75%	METRONIDAZOLE LOTION 0.75%	Tier 1				
METRONIDAZOL TAB 250MG	METRONIDAZOLE TAB 250 MG	Tier 1				
METRONIDAZOL TAB 500MG	METRONIDAZOLE TAB 500 MG	Tier 1				
MUPIROCIN CRE 2%	MUPIROCIN CALCIUM CREAM 2%	Tier 1				
MUPIROCIN OIN 2%	MUPIROCIN OINT 2%	Tier 1				
NITROFUR MAC CAP 100MG	NITROFURANTOIN MACROCRYSTALLINE CAP 100 MG	Tier 1				
NITROFUR MAC CAP 25MG	NITROFURANTOIN MACROCRYSTALLINE CAP 25 MG	Tier 1				
NITROFUR MAC CAP 50MG	NITROFURANTOIN MACROCRYSTALLINE CAP 50 MG	Tier 1				
NITROFURANTN CAP 100MG	NITROFURANTOIN MONOHYDRATE MACROCRYSTALLINE CAP 100 MG	Tier 1				
NUVESSA GEL 1.3%	METRONIDAZOLE VAGINAL GEL 1.3%	Tier 3/4				
PHENOL LIQ	PHENOL LIQUID (BULK)	Tier 3				
PHENOL LIQ 89%	PHENOL LIQUID (BULK)	Tier 3				
PHENOL LIQ 89%	PHENOL LIQUID (BULK)	Tier 2				
SILVADENE CRE 1%	SILVER SULFADIAZINE CREAM 1%	Tier 3/4				
SILVER NITRA SOL 0.5%	SILVER NITRATE SOLN 0.5%	Tier 1				
SILVER SULFA CRE 1%	SILVER SULFADIAZINE CREAM 1%	Tier 1				
SIVEXTRO TAB 200MG	TEDIZOLID PHOSPHATE TAB 200 MG	Tier 3				
SOLOSEC GRA 2GM	SECNIDAZOLE GRANULES PACKET 2 GM	Tier 3/4				
SSD CRE 1%	SILVER SULFADIAZINE CREAM 1%	Tier 1				
SULFAMYLON CRE 85MG/GM	MAFENIDE ACETATE CREAM 85 MG/GM	Tier 3				
TINIDAZOLE TAB 250MG	TINIDAZOLE TAB 250 MG	Tier 1				
TINIDAZOLE TAB 500MG	TINIDAZOLE TAB 500 MG	Tier 1				
TRIMETHOPRIM TAB 100MG	TRIMETHOPRIM TAB 100 MG	Tier 1				
VANCOCIN CAP 125MG	VANCOMYCIN HCL CAP 125 MG (BASE EQUIVALENT)	Tier 3/4				
VANCOCIN CAP 250MG	VANCOMYCIN HCL CAP 250 MG (BASE EQUIVALENT)	Tier 3/4				
VANCOMYCIN CAP 125MG	VANCOMYCIN HCL CAP 125 MG (BASE EQUIVALENT)	Tier 1				
VANCOMYCIN CAP 250MG	VANCOMYCIN HCL CAP 250 MG (BASE EQUIVALENT)	Tier 1				
VANCOMYCIN SOL 250/5ML	VANCOMYCIN HCL FOR ORAL SOLN 50 MG/ML (BASE EQUIVALENT)	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
VANCOMYCIN SOL 25MG/ML	VANCOMYCIN HCL FOR ORAL SOLN 25 MG/ML (BASE EQUIVALENT)	Tier 1				
VANCOMYCIN SOL 50MG/ML	VANCOMYCIN HCL FOR ORAL SOLN 50 MG/ML (BASE EQUIVALENT)	Tier 1				
VANDAZOLE GEL 0.75%	METRONIDAZOLE VAGINAL GEL 0.75%	Tier 3/4				
XACIATO GEL 2%	CLINDAMYCIN PHOSPHATE VAGINAL GEL 2%	Tier 2				
ZYVOX SUS 100MG/5M	LINEZOLID FOR SUSP 100 MG/5ML	Tier 3/4				
Anticholinergics - Parkinson's Disease Drugs						
BENZTROPINE TAB 0.5MG	BENZTROPINE MESYLATE TAB 0.5 MG	Tier 1				
BENZTROPINE TAB 1MG	BENZTROPINE MESYLATE TAB 1 MG	Tier 1				
BENZTROPINE TAB 2MG	BENZTROPINE MESYLATE TAB 2 MG	Tier 1				
TRIHEXYPHEN SOL 0.4MG/ML	TRIHEXYPHENIDYL HCL ORAL SOLN 0.4 MG/ML	Tier 1				
TRIHEXYPHEN TAB 2MG	TRIHEXYPHENIDYL HCL TAB 2 MG	Tier 1				
TRIHEXYPHEN TAB 5MG	TRIHEXYPHENIDYL HCL TAB 5 MG	Tier 1				
Anticoagulants - Blood Thinners						
ANTICOAGULNT SOL SOD CITR	ANTICOAGULANT SODIUM CITRATE SOLN 4%	Tier 3				
DABIGATRAN CAP 110MG	DABIGATRAN ETEXILATE MESYLATE CAP 110 MG (ETEXILATE BASE EQ)	Tier 1		X		
DABIGATRAN CAP 150MG	DABIGATRAN ETEXILATE MESYLATE CAP 150 MG (ETEXILATE BASE EQ)	Tier 1		X		
DABIGATRAN CAP 75MG	DABIGATRAN ETEXILATE MESYLATE CAP 75 MG (ETEXILATE BASE EQ)	Tier 1		X		
ELIQUIS CAP 0.15MG	APIXABAN CAP SPRINKLE 0.15 MG	Tier 2		X		
ELIQUIS TAB 0.5MG	APIXABAN TAB FOR ORAL SUSP 0.5 MG	Tier 2		X		
ELIQUIS TAB 1.5MG	APIXABAN TAB FOR ORAL SUSP PACK 3 X 0.5 MG (1.5 MG)	Tier 2		X		
ELIQUIS TAB 2.5MG	APIXABAN TAB 2.5 MG	Tier 2		X		
ELIQUIS TAB 2MG	APIXABAN TAB FOR ORAL SUSP PACK 4 X 0.5 MG (2 MG)	Tier 2		X		
ELIQUIS TAB 5MG	APIXABAN TAB 5 MG	Tier 2		X		
ELIQUIS ST P TAB 5MG	APIXABAN TAB STARTER PACK 5 MG	Tier 2		X		
ENOXAPARIN INJ 100MG/ML	ENOXAPARIN SODIUM INJ SOLN PREF SYR 100 MG/ML	Tier 1				
ENOXAPARIN INJ 120/0.8	ENOXAPARIN SODIUM INJ SOLN PREF SYR 120 MG/0.8ML	Tier 1				
ENOXAPARIN INJ 150MG/ML	ENOXAPARIN SODIUM INJ SOLN PREF SYR 150 MG/ML	Tier 1				
ENOXAPARIN INJ 30/0.3ML	ENOXAPARIN SODIUM INJ SOLN PREF SYR 30 MG/0.3ML	Tier 1				
ENOXAPARIN INJ 300/3ML	ENOXAPARIN SODIUM INJ 300 MG/3ML	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ENOXAPARIN INJ 40/0.4ML	ENOXAPARIN SODIUM INJ SOLN PREF SYR 40 MG/0.4ML	Tier 1				
ENOXAPARIN INJ 60/0.6ML	ENOXAPARIN SODIUM INJ SOLN PREF SYR 60 MG/0.6ML	Tier 1				
ENOXAPARIN INJ 80/0.8ML	ENOXAPARIN SODIUM INJ SOLN PREF SYR 80 MG/0.8ML	Tier 1				
ENOXAPARIN INJ 80MG/0.8	ENOXAPARIN SODIUM INJ SOLN PREF SYR 80 MG/0.8ML	Tier 1				
FONDAPARINUX INJ 10/0.8ML	FONDAPARINUX SODIUM SUBCUTANEOUS INJ 10 MG/0.8ML	Tier 1				
FONDAPARINUX INJ 2.5/0.5	FONDAPARINUX SODIUM SUBCUTANEOUS INJ 2.5 MG/0.5ML	Tier 1				
FONDAPARINUX INJ 5/0.4ML	FONDAPARINUX SODIUM SUBCUTANEOUS INJ 5 MG/0.4ML	Tier 1				
FONDAPARINUX INJ 7.5/0.6	FONDAPARINUX SODIUM SUBCUTANEOUS INJ 7.5 MG/0.6ML	Tier 1				
FRAGMIN INJ 10000/ML	DALTEPARIN SODIUM SOLN PREFILLED SYR 10000 UNIT/ML	Tier 3/4				
FRAGMIN INJ 12500UNT	DALTEPARIN SODIUM SOLN PREFILLED SYR 12500 UNIT/0.5ML	Tier 3/4				
FRAGMIN INJ 15000UNT	DALTEPARIN SODIUM SOLN PREFILLED SYR 15000 UNIT/0.6ML	Tier 3/4				
FRAGMIN INJ 18000UNT	DALTEPARIN SODIUM SOLN PREFILLED SYR 18000 UNIT/0.72ML	Tier 3/4				
FRAGMIN INJ 2500/0.2	DALTEPARIN SODIUM SOLN PREFILLED SYR 2500 UNIT/0.2ML	Tier 3/4				
FRAGMIN INJ 2500/ML	DALTEPARIN SODIUM SUBCUTANEOUS SOLN 10000 UNIT/4ML	Tier 3/4				
FRAGMIN INJ 5000/0.2	DALTEPARIN SODIUM SOLN PREFILLED SYR 5000 UNIT/0.2ML	Tier 3/4				
FRAGMIN INJ 7500/0.3	DALTEPARIN SODIUM SOLN PREFILLED SYR 7500 UNIT/0.3ML	Tier 3/4				
FRAGMIN INJ 95000UNT	DALTEPARIN SODIUM SUBCUTANEOUS SOLN 95000 UNIT/3.8ML	Tier 3/4				
HEPARIN SOD INJ 1000/ML	HEPARIN SODIUM (PORCINE) PF INJ 1000 UNIT/ML	Tier 1				
HEPARIN SOD INJ 1000/ML	HEPARIN SODIUM (PORCINE) INJ 1000 UNIT/ML	Tier 1				
HEPARIN SOD INJ 10000/10	HEPARIN SODIUM (PORCINE) INJ 1000 UNIT/ML	Tier 1				
HEPARIN SOD INJ 10000/ML	HEPARIN SODIUM (PORCINE) INJ 10000 UNIT/ML	Tier 1				
HEPARIN SOD INJ 2000/2ML	HEPARIN SODIUM (PORCINE) PF INJ 1000 UNIT/ML	Tier 1				
HEPARIN SOD INJ 20000/ML	HEPARIN SODIUM (PORCINE) INJ 20000 UNIT/ML	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
HEPARIN SOD INJ 30000/30	HEPARIN SODIUM (PORCINE) INJ 1000 UNIT/ML	Tier 1				
HEPARIN SOD INJ 5000/0.5	HEPARIN SODIUM (PORCINE) PF INJ 5000 UNIT/0.5ML	Tier 1				
HEPARIN SOD INJ 5000/0.5	HEPARIN SODIUM (PORCINE) INJ SOLN PREF SYR 5000 UNIT/0.5ML	Tier 1				
HEPARIN SOD INJ 5000/ML	HEPARIN SODIUM (PORCINE) INJ 5000 UNIT/ML	Tier 1				
HEPARIN SOD INJ 5000/ML	HEPARIN SODIUM (PORCINE) PF INJ 5000 UNIT/ML	Tier 1				
HEPARIN SOD INJ 50000/10	HEPARIN SODIUM (PORCINE) INJ 5000 UNIT/ML	Tier 1				
JANTOVEN TAB 10MG	WARFARIN SODIUM TAB 10 MG	Tier 1				
JANTOVEN TAB 1MG	WARFARIN SODIUM TAB 1 MG	Tier 1				
JANTOVEN TAB 2.5MG	WARFARIN SODIUM TAB 2.5 MG	Tier 1				
JANTOVEN TAB 2MG	WARFARIN SODIUM TAB 2 MG	Tier 1				
JANTOVEN TAB 3MG	WARFARIN SODIUM TAB 3 MG	Tier 1				
JANTOVEN TAB 4MG	WARFARIN SODIUM TAB 4 MG	Tier 1				
JANTOVEN TAB 5MG	WARFARIN SODIUM TAB 5 MG	Tier 1				
JANTOVEN TAB 6MG	WARFARIN SODIUM TAB 6 MG	Tier 1				
JANTOVEN TAB 7.5MG	WARFARIN SODIUM TAB 7.5 MG	Tier 1				
NOCLOT-50 SOL ACD-A	*ANTICOAGULANT CITRATE DEXTROSE SOLUTION A**	Tier 3				
PRADAXA PAK 110MG	DABIGATRAN ETEXILATE MESYLATE PELLETT PACK 110 MG	Tier 3/4	X	X		
PRADAXA PAK 150MG	DABIGATRAN ETEXILATE MESYLATE PELLETT PACK 150 MG	Tier 3/4	X	X		
PRADAXA PAK 20MG	DABIGATRAN ETEXILATE MESYLATE PELLETT PACK 20 MG	Tier 3/4	X	X		
PRADAXA PAK 30MG	DABIGATRAN ETEXILATE MESYLATE PELLETT PACK 30 MG	Tier 3/4	X	X		
PRADAXA PAK 40MG	DABIGATRAN ETEXILATE MESYLATE PELLETT PACK 40 MG	Tier 3/4	X	X		
PRADAXA PAK 50MG	DABIGATRAN ETEXILATE MESYLATE PELLETT PACK 50 MG	Tier 3/4	X	X		
RIVAROXABAN SUS 1MG/ML	RIVAROXABAN FOR SUSP 1 MG/ML	Tier 1		X		
RIVAROXABAN TAB 2.5MG	RIVAROXABAN TAB 2.5 MG	Tier 1		X		
SAVAYSA TAB 15MG	EDOXABAN TOSYLATE TAB 15 MG (BASE EQUIVALENT)	Tier 3/4		X	X	
SAVAYSA TAB 30MG	EDOXABAN TOSYLATE TAB 30 MG (BASE EQUIVALENT)	Tier 3/4		X	X	
SAVAYSA TAB 60MG	EDOXABAN TOSYLATE TAB 60 MG (BASE EQUIVALENT)	Tier 3/4		X	X	

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
TRICITRASOL CON	ANTICOAGULANT SODIUM CITRATE CONCENTRATE 46.7%	Tier 3				
WARFARIN TAB 10MG	WARFARIN SODIUM TAB 10 MG	Tier 1				
WARFARIN TAB 1MG	WARFARIN SODIUM TAB 1 MG	Tier 1				
WARFARIN TAB 2.5MG	WARFARIN SODIUM TAB 2.5 MG	Tier 1				
WARFARIN TAB 2MG	WARFARIN SODIUM TAB 2 MG	Tier 1				
WARFARIN TAB 3MG	WARFARIN SODIUM TAB 3 MG	Tier 1				
WARFARIN TAB 4MG	WARFARIN SODIUM TAB 4 MG	Tier 1				
WARFARIN TAB 5MG	WARFARIN SODIUM TAB 5 MG	Tier 1				
WARFARIN TAB 6MG	WARFARIN SODIUM TAB 6 MG	Tier 1				
WARFARIN TAB 7.5MG	WARFARIN SODIUM TAB 7.5 MG	Tier 1				
XARELTO SUS 1MG/ML	RIVAROXABAN FOR SUSP 1 MG/ML	Tier 2		X		
XARELTO TAB 10MG	RIVAROXABAN TAB 10 MG	Tier 2		X		
XARELTO TAB 15MG	RIVAROXABAN TAB 15 MG	Tier 2		X		
XARELTO TAB 2.5MG	RIVAROXABAN TAB 2.5 MG	Tier 2		X		
XARELTO TAB 20MG	RIVAROXABAN TAB 20 MG	Tier 2		X		
XARELTO STAR TAB 15/20MG	RIVAROXABAN TAB STARTER THERAPY PACK 15 MG & 20 MG	Tier 2		X		
Anticonvulsants, Other						
DIACOMIT CAP 250MG	STIRIPENTOL CAP 250 MG	Tier 3	X			
DIACOMIT CAP 500MG	STIRIPENTOL CAP 500 MG	Tier 3	X			
DIACOMIT PAK 250MG	STIRIPENTOL PACKET 250 MG	Tier 3	X			
DIACOMIT PAK 500MG	STIRIPENTOL PACKET 500 MG	Tier 3	X			
ZTALMY SUS 50MG/ML	GANAXOLONE SUSP 50 MG/ML	Tier 3/4	X			
Anticonvulsants, Other - Seizure Control Drugs						
BRIVIACT SOL 10MG/ML	BRIVARACETAM ORAL SOLN 10 MG/ML	Tier 3/4	X			
BRIVIACT TAB 100MG	BRIVARACETAM TAB 100 MG	Tier 3	X			
BRIVIACT TAB 10MG	BRIVARACETAM TAB 10 MG	Tier 3	X			
BRIVIACT TAB 25MG	BRIVARACETAM TAB 25 MG	Tier 3	X			
BRIVIACT TAB 50MG	BRIVARACETAM TAB 50 MG	Tier 3	X			
BRIVIACT TAB 75MG	BRIVARACETAM TAB 75 MG	Tier 3	X			
EPIDIOLEX SOL 100MG/ML	CANNABIDIOL SOLN 100 MG/ML	Tier 3	X			
FINTEPLA SOL 2.2MG/ML	FENFLURAMINE HCL ORAL SOLN 2.2 MG/ML	Tier 3/4	X			
KEPPRA SOL 100MG/ML	LEVETIRACETAM ORAL SOLN 100 MG/ML	Tier 3/4				
KEPPRA TAB 1000MG	LEVETIRACETAM TAB 1000 MG	Tier 3/4				
KEPPRA TAB 250MG	LEVETIRACETAM TAB 250 MG	Tier 3/4				
KEPPRA TAB 500MG	LEVETIRACETAM TAB 500 MG	Tier 3/4				
KEPPRA TAB 750MG	LEVETIRACETAM TAB 750 MG	Tier 3/4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
KEPPRA XR TAB 500MG	LEVETIRACETAM TAB ER 24HR 500 MG	Tier 3/4				
KEPPRA XR TAB 750MG	LEVETIRACETAM TAB ER 24HR 750 MG	Tier 3/4				
LEVETIRACETA SOL 100MG/ML	LEVETIRACETAM ORAL SOLN 100 MG/ML	Tier 1				
LEVETIRACETA SOL 500/5ML	LEVETIRACETAM ORAL SOLN 100 MG/ML	Tier 1				
LEVETIRACETA TAB 1000MG	LEVETIRACETAM TAB 1000 MG	Tier 1				
LEVETIRACETA TAB 250MG	LEVETIRACETAM TAB 250 MG	Tier 1				
LEVETIRACETA TAB 250MG	LEVETIRACETAM TAB DISINTEGRATING SOLUBLE 250 MG	Tier 3/4				
LEVETIRACETA TAB 500MG	LEVETIRACETAM TAB 500 MG	Tier 1				
LEVETIRACETA TAB 500MG	LEVETIRACETAM TAB DISINTEGRATING SOLUBLE 500 MG	Tier 3/4				
LEVETIRACETA TAB 500MG ER	LEVETIRACETAM TAB ER 24HR 500 MG	Tier 1				
LEVETIRACETA TAB 750MG	LEVETIRACETAM TAB 750 MG	Tier 1				
LEVETIRACETA TAB 750MG ER	LEVETIRACETAM TAB ER 24HR 750 MG	Tier 1				
NAYZILAM SPR 5MG	MIDAZOLAM NASAL SPRAY SOLN 5 MG/0.1 ML	Tier 3	X			
PHENOBARB ELX 20MG/5ML	PHENOBARBITAL ELIXIR 20 MG/5ML	Tier 1				
PHENOBARB SOL 20MG/5ML	PHENOBARBITAL ELIXIR 20 MG/5ML	Tier 1				
PHENOBARB TAB 100MG	PHENOBARBITAL TAB 100 MG	Tier 1				
PHENOBARB TAB 15MG	PHENOBARBITAL TAB 15 MG	Tier 1				
PHENOBARB TAB 16.2MG	PHENOBARBITAL TAB 16.2 MG	Tier 1				
PHENOBARB TAB 30MG	PHENOBARBITAL TAB 30 MG	Tier 1				
PHENOBARB TAB 32.4MG	PHENOBARBITAL TAB 32.4 MG	Tier 1				
PHENOBARB TAB 60MG	PHENOBARBITAL TAB 60 MG	Tier 1				
PHENOBARB TAB 64.8MG	PHENOBARBITAL TAB 64.8 MG	Tier 1				
PHENOBARB TAB 97.2MG	PHENOBARBITAL TAB 97.2 MG	Tier 1				
ROWEEPRA TAB 500MG	LEVETIRACETAM TAB 500 MG	Tier 1				
SPRITAM TAB 1000MG	LEVETIRACETAM TAB DISINTEGRATING SOLUBLE 1000 MG	Tier 3/4				
SPRITAM TAB 250MG	LEVETIRACETAM TAB DISINTEGRATING SOLUBLE 250 MG	Tier 3/4				
SPRITAM TAB 500MG	LEVETIRACETAM TAB DISINTEGRATING SOLUBLE 500 MG	Tier 3/4				
SPRITAM TAB 750MG	LEVETIRACETAM TAB DISINTEGRATING SOLUBLE 750 MG	Tier 3/4				
XCOPRI PAK 100-150	CENOBAMATE TAB PACK 100 MG & 150 MG TABS (250 MG DAILY DOSE)	Tier 3	X			
XCOPRI PAK 12.5-25	CENOBAMATE TAB TITRATION PACK 14 X 12.5 MG & 14 X 25 MG	Tier 3	X			
XCOPRI PAK 150-200	CENOBAMATE TAB PACK 150 MG & 200 MG TABS (350 MG DAILY DOSE)	Tier 3	X			

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
XCOPRI PAK 150-200	CENOBAMATE TAB TITRATION PACK 14 X 150 MG & 14 X 200 MG	Tier 3	X			
XCOPRI PAK 50-100MG	CENOBAMATE TAB TITRATION PACK 14 X 50 MG & 14 X 100 MG	Tier 3	X			
XCOPRI TAB 100MG	CENOBAMATE TAB 100 MG	Tier 3	X			
XCOPRI TAB 150MG	CENOBAMATE TAB 150 MG	Tier 3	X			
XCOPRI TAB 200MG	CENOBAMATE TAB 200 MG	Tier 3	X			
XCOPRI TAB 25MG	CENOBAMATE TAB 25 MG	Tier 3	X			
XCOPRI TAB 50MG	CENOBAMATE TAB 50 MG	Tier 3	X			
Antidementia Agents, Other						
LEQEMBI IQLK INJ 360/1.8	LECANEMAB-IRMB SOLN AUTO-INJ 360 MG/1.8ML	Tier 3/4	X	X		
Antidepressants, Other						
AUVELITY TAB 45-105MG	DEXTROMETHORPHAN HBR-BUPROPION HCL TAB ER 45-105 MG	Tier 3/4		X	X	
ZURZUVAE CAP 20MG	ZURANOLONE CAP 20 MG	Tier 2	X	X		
ZURZUVAE CAP 25MG	ZURANOLONE CAP 25 MG	Tier 2	X	X		
ZURZUVAE CAP 30MG	ZURANOLONE CAP 30 MG	Tier 2	X	X		
Antidepressants, Other - Antidepressants						
BUPROPION TAB 100MG	BUPROPION HCL TAB 100 MG	Tier 1				
BUPROPION TAB 100MG SR	BUPROPION HCL TAB ER 12HR 100 MG	Tier 1				
BUPROPION TAB 150MG SR	BUPROPION HCL TAB ER 12HR 150 MG	Tier 1				
BUPROPION TAB 150MG XL	BUPROPION HCL TAB ER 24HR 150 MG	Tier 1				
BUPROPION TAB 200MG SR	BUPROPION HCL TAB ER 12HR 200 MG	Tier 1				
BUPROPION TAB 300MG XL	BUPROPION HCL TAB ER 24HR 300 MG	Tier 1				
BUPROPION TAB 450MG XL	BUPROPION HCL TAB ER 24HR 450 MG	Tier 3/4		X		
BUPROPION TAB 75MG	BUPROPION HCL TAB 75 MG	Tier 1				
FORFIVO XL TAB 450MG	BUPROPION HCL TAB ER 24HR 450 MG	Tier 3/4		X		
MIRTAZAPINE TAB 15MG	MIRTAZAPINE TAB 15 MG	Tier 1				
MIRTAZAPINE TAB 15MG ODT	MIRTAZAPINE ORALLY DISINTEGRATING TAB 15 MG	Tier 1				
MIRTAZAPINE TAB 30MG	MIRTAZAPINE TAB 30 MG	Tier 1				
MIRTAZAPINE TAB 30MG ODT	MIRTAZAPINE ORALLY DISINTEGRATING TAB 30 MG	Tier 1				
MIRTAZAPINE TAB 45MG	MIRTAZAPINE TAB 45 MG	Tier 1				
MIRTAZAPINE TAB 45MG ODT	MIRTAZAPINE ORALLY DISINTEGRATING TAB 45 MG	Tier 1				
MIRTAZAPINE TAB 7.5MG	MIRTAZAPINE TAB 7.5 MG	Tier 1				
SPRAVATO SOL 56MG DOS	ESKETAMINE HCL NASAL SOLN 28 MG/ DEVICE X 2 (56 MG DOSE PACK)	Tier 3/4	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
SPRAVATO SOL 84MG DOS	ESKETAMINE HCL NASAL SOLN 28 MG/ DEVICE X 3 (84 MG DOSE PACK)	Tier 3/4	X	X		
Antidiabetic Agents						
BRENZAVVY TAB 20MG	BEXAGLIFLOZIN TAB 20 MG	Tier 3		X	X	
SITAG/METFOR TAB 100-1000	SITAGLIPTIN FREE BASE-METFORMIN HCL TAB ER 24HR 100-1000 MG	Tier 3/4		X	X	
SITAG/METFOR TAB 50-1000	SITAGLIPTIN FREE BASE-METFORMIN HCL TAB 50-1000 MG	Tier 3/4		X	X	
SITAG/METFOR TAB 50-1000	SITAGLIPTIN FREE BASE-METFORMIN HCL TAB ER 24HR 50-1000 MG	Tier 3/4		X	X	
SITAG/METFOR TAB 50-500MG	SITAGLIPTIN FREE BASE-METFORMIN HCL TAB 50-500 MG	Tier 3/4		X	X	
SITAG/METFOR TAB 50-500MG	SITAGLIPTIN FREE BASE-METFORMIN HCL TAB ER 24HR 50-500 MG	Tier 3/4		X	X	
SITAGLIPTIN TAB 100MG	SITAGLIPTIN TAB 100 MG	Tier 3/4		X	X	
SITAGLIPTIN TAB 25MG	SITAGLIPTIN TAB 25 MG	Tier 3/4		X	X	
SITAGLIPTIN TAB 50MG	SITAGLIPTIN TAB 50 MG	Tier 3/4		X	X	
ZITUVIMET TAB 50-1000	SITAGLIPTIN FREE BASE-METFORMIN HCL TAB 50-1000 MG	Tier 3/4		X	X	
ZITUVIMET TAB 50-500MG	SITAGLIPTIN FREE BASE-METFORMIN HCL TAB 50-500 MG	Tier 3/4		X	X	
ZITUVIMET XR TAB 100-1000	SITAGLIPTIN FREE BASE-METFORMIN HCL TAB ER 24HR 100-1000 MG	Tier 3/4		X	X	
ZITUVIMET XR TAB 50-1000	SITAGLIPTIN FREE BASE-METFORMIN HCL TAB ER 24HR 50-1000 MG	Tier 3/4		X	X	
ZITUVIMET XR TAB 50-500MG	SITAGLIPTIN FREE BASE-METFORMIN HCL TAB ER 24HR 50-500 MG	Tier 3/4		X	X	
ZITUVIO TAB 100MG	SITAGLIPTIN TAB 100 MG	Tier 3/4		X	X	
ZITUVIO TAB 25MG	SITAGLIPTIN TAB 25 MG	Tier 3/4		X	X	
ZITUVIO TAB 50MG	SITAGLIPTIN TAB 50 MG	Tier 3/4		X	X	
Antidiabetic Agents - Diabetic Drugs						
ACARBOSE TAB 100MG	ACARBOSE TAB 100 MG	Tier 1				
ACARBOSE TAB 25MG	ACARBOSE TAB 25 MG	Tier 1				
ACARBOSE TAB 50MG	ACARBOSE TAB 50 MG	Tier 1				
ACTOPLUS MET TAB 15-850MG	PIOGLITAZONE HCL-METFORMIN HCL TAB 15-850 MG	Tier 3/4		X		
ALOG/PIOGLIT TAB 12.5-30	ALOGLIPTIN-PIOGLITAZONE TAB 12.5-30 MG	Tier 2		X		
ALOG/PIOGLIT TAB 25-15MG	ALOGLIPTIN-PIOGLITAZONE TAB 25-15 MG	Tier 2		X		
ALOG/PIOGLIT TAB 25-30MG	ALOGLIPTIN-PIOGLITAZONE TAB 25-30 MG	Tier 2		X		
ALOG/PIOGLIT TAB 25-45MG	ALOGLIPTIN-PIOGLITAZONE TAB 25-45 MG	Tier 2		X		
ALOGLIPTIN TAB 12.5MG	ALOGLIPTIN BENZOATE TAB 12.5 MG (BASE EQUIV)	Tier 2		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ALOGLIPTIN TAB 25MG	ALOGLIPTIN BENZOATE TAB 25 MG (BASE EQUIV)	Tier 2		X		
ALOGLIPTIN TAB 6.25MG	ALOGLIPTIN BENZOATE TAB 6.25 MG (BASE EQUIV)	Tier 2		X		
ALOGLIPTIN/ TAB METFORM	ALOGLIPTIN-METFORMIN HCL TAB 12.5-500 MG	Tier 2		X		
ALOGLIPTIN/ TAB METFORM	ALOGLIPTIN-METFORMIN HCL TAB 12.5-1000 MG	Tier 2		X		
BRYNOVIN SOL 25MG/ML	SITAGLIPTIN HYDROCHLORIDE ORAL SOLN 25 MG/ML	Tier 3/4	X			
BYDUREON BC INJ 2/0.85ML	EXENATIDE EXTENDED RELEASE SUSP AUTO-INJECTOR 2 MG/0.85ML	Tier 2	X	X		
BYETTA INJ 10MCG	EXENATIDE SOLN PEN-INJECTOR 10 MCG/0.04ML	Tier 2	X	X		
BYETTA INJ 5MCG	EXENATIDE SOLN PEN-INJECTOR 5 MCG/0.02ML	Tier 2	X	X		
CYCLOSET TAB 0.8MG	BROMOCRIPTINE MESYLATE TAB 0.8 MG (BASE EQUIVALENT)	Tier 3				
DUETACT TAB 30-2MG	PIOGLITAZONE HCL-GLIMEPIRIDE TAB 30-2 MG	Tier 3		X		
DUETACT TAB 30-4MG	PIOGLITAZONE HCL-GLIMEPIRIDE TAB 30-4 MG	Tier 3		X		
EXENATIDE INJ 10MCG	EXENATIDE SOLN PEN-INJECTOR 10 MCG/0.04ML	Tier 2	X	X		
EXENATIDE INJ 5MCG	EXENATIDE SOLN PEN-INJECTOR 5 MCG/0.02ML	Tier 2	X	X		
GLIMEPIRIDE TAB 1MG	GLIMEPIRIDE TAB 1 MG	Tier 1				
GLIMEPIRIDE TAB 2MG	GLIMEPIRIDE TAB 2 MG	Tier 1				
GLIMEPIRIDE TAB 4MG	GLIMEPIRIDE TAB 4 MG	Tier 1				
GLIP/METFORM TAB 2.5-250	GLIPIZIDE-METFORMIN HCL TAB 2.5-250 MG	Tier 1				
GLIP/METFORM TAB 2.5-250M	GLIPIZIDE-METFORMIN HCL TAB 2.5-250 MG	Tier 1				
GLIP/METFORM TAB 2.5-500	GLIPIZIDE-METFORMIN HCL TAB 2.5-500 MG	Tier 1				
GLIP/METFORM TAB 2.5-500M	GLIPIZIDE-METFORMIN HCL TAB 2.5-500 MG	Tier 1				
GLIP/METFORM TAB 5-500MG	GLIPIZIDE-METFORMIN HCL TAB 5-500 MG	Tier 1				
GLIPIZIDE TAB 10MG	GLIPIZIDE TAB 10 MG	Tier 1				
GLIPIZIDE TAB 2.5MG	GLIPIZIDE TAB 2.5 MG	Tier 1				
GLIPIZIDE TAB 5MG	GLIPIZIDE TAB 5 MG	Tier 1				
GLIPIZIDE ER TAB 10MG	GLIPIZIDE TAB ER 24HR 10 MG	Tier 1				
GLIPIZIDE ER TAB 2.5MG	GLIPIZIDE TAB ER 24HR 2.5 MG	Tier 1				
GLIPIZIDE ER TAB 5MG	GLIPIZIDE TAB ER 24HR 5 MG	Tier 1				
GLIPIZIDE XL TAB 10MG	GLIPIZIDE TAB ER 24HR 10 MG	Tier 1				
GLIPIZIDE XL TAB 2.5MG	GLIPIZIDE TAB ER 24HR 2.5 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
GLIPIZIDE XL TAB 5MG	GLIPIZIDE TAB ER 24HR 5 MG	Tier 1				
GLUCOTROL XL TAB 10MG	GLIPIZIDE TAB ER 24HR 10 MG	Tier 3/4				
GLUCOTROL XL TAB 2.5MG	GLIPIZIDE TAB ER 24HR 2.5 MG	Tier 3/4				
GLUCOTROL XL TAB 5MG	GLIPIZIDE TAB ER 24HR 5 MG	Tier 3/4				
GLYB/METFORM TAB 1.25-250	GLYBURIDE-METFORMIN TAB 1.25-250 MG	Tier 1				
GLYB/METFORM TAB 2.5-500	GLYBURIDE-METFORMIN TAB 2.5-500 MG	Tier 1				
GLYB/METFORM TAB 5-500MG	GLYBURIDE-METFORMIN TAB 5-500 MG	Tier 1				
GLYBURID MCR TAB 1.5MG	GLYBURIDE MICRONIZED TAB 1.5 MG	Tier 1				
GLYBURID MCR TAB 3MG	GLYBURIDE MICRONIZED TAB 3 MG	Tier 1				
GLYBURID MCR TAB 6MG	GLYBURIDE MICRONIZED TAB 6 MG	Tier 1				
GLYBURIDE TAB 1.25MG	GLYBURIDE TAB 1.25 MG	Tier 1				
GLYBURIDE TAB 2.5MG	GLYBURIDE TAB 2.5 MG	Tier 1				
GLYBURIDE TAB 5MG	GLYBURIDE TAB 5 MG	Tier 1				
GLYXAMBI TAB 10-5 MG	EMPAGLIFLOZIN-LINAGLIPTIN TAB 10-5 MG	Tier 2		X	X	
GLYXAMBI TAB 25-5 MG	EMPAGLIFLOZIN-LINAGLIPTIN TAB 25-5 MG	Tier 2		X	X	
JARDIANCE TAB 10MG	EMPAGLIFLOZIN TAB 10 MG	Tier 2		X		
JARDIANCE TAB 25MG	EMPAGLIFLOZIN TAB 25 MG	Tier 2		X		
JENTADUETO TAB 2.5-1000	LINAGLIPTIN-METFORMIN HCL TAB 2.5-1000 MG	Tier 2		X		
JENTADUETO TAB 2.5-500	LINAGLIPTIN-METFORMIN HCL TAB 2.5-500 MG	Tier 2		X		
JENTADUETO TAB 2.5-850	LINAGLIPTIN-METFORMIN HCL TAB 2.5-850 MG	Tier 2		X		
JENTADUETO TAB XR	LINAGLIPTIN-METFORMIN HCL TAB ER 24HR 2.5-1000 MG	Tier 2		X		
JENTADUETO TAB XR	LINAGLIPTIN-METFORMIN HCL TAB ER 24HR 5-1000 MG	Tier 2		X		
LIRAGLUTIDE INJ 18MG/3ML	LIRAGLUTIDE SOLN PEN-INJECTOR 18 MG/3ML (6 MG/ML)	Tier 1	X	X		
METFORMIN SOL 500/5ML	METFORMIN HCL ORAL SOLN 500 MG/5ML	Tier 1				
METFORMIN TAB 1000MG	METFORMIN HCL TAB 1000 MG	Tier 1				
METFORMIN TAB 500MG	METFORMIN HCL TAB 500 MG	Tier 1				
METFORMIN TAB 500MG ER	METFORMIN HCL TAB ER 24HR 500 MG	Tier 1				
METFORMIN TAB 750MG ER	METFORMIN HCL TAB ER 24HR 750 MG	Tier 1				
METFORMIN TAB 850MG	METFORMIN HCL TAB 850 MG	Tier 1				
MIGLITOL TAB 100MG	MIGLITOL TAB 100 MG	Tier 1				
MIGLITOL TAB 25MG	MIGLITOL TAB 25 MG	Tier 1				
MIGLITOL TAB 50MG	MIGLITOL TAB 50 MG	Tier 1				
MOUNJARO INJ 10MG/0.5	TIRZEPATIDE SOLN AUTO-INJECTOR 10 MG/0.5ML	Tier 2	X	X		

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

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
SAXAGLIPTIN TAB 2.5MG	SAXAGLIPTIN HCL TAB 2.5 MG (BASE EQUIV)	Tier 1		X		
SAXAGLIPTIN TAB 5MG	SAXAGLIPTIN HCL TAB 5 MG (BASE EQUIV)	Tier 1		X		
SYMLINPEN 60 INJ 1000MCG	PRAMLINTIDE ACETATE PEN-INJ 1500 MCG/1.5ML (1000 MCG/ML)	Tier 3		X		
SYMLINPEN 120 INJ 1000MCG	PRAMLINTIDE ACETATE PEN-INJ 2700 MCG/2.7ML (1000 MCG/ML)	Tier 3		X		
SYNJARDY TAB	EMPAGLIFLOZIN-METFORMIN HCL TAB 12.5-1000 MG	Tier 2		X		
SYNJARDY TAB 12.5-500	EMPAGLIFLOZIN-METFORMIN HCL TAB 12.5-500 MG	Tier 2		X		
SYNJARDY TAB 5-1000MG	EMPAGLIFLOZIN-METFORMIN HCL TAB 5-1000 MG	Tier 2		X		
SYNJARDY TAB 5-500MG	EMPAGLIFLOZIN-METFORMIN HCL TAB 5-500 MG	Tier 2		X		
SYNJARDY XR TAB	EMPAGLIFLOZIN-METFORMIN HCL TAB ER 24HR 12.5-1000 MG	Tier 2		X		
SYNJARDY XR TAB 10-1000	EMPAGLIFLOZIN-METFORMIN HCL TAB ER 24HR 10-1000 MG	Tier 2		X		
SYNJARDY XR TAB 25-1000	EMPAGLIFLOZIN-METFORMIN HCL TAB ER 24HR 25-1000 MG	Tier 2		X		
SYNJARDY XR TAB 5-1000MG	EMPAGLIFLOZIN-METFORMIN HCL TAB ER 24HR 5-1000 MG	Tier 2		X		
TRADJENTA TAB 5MG	LINAGLIPTIN TAB 5 MG	Tier 2		X		
TRIJARDY XR TAB	EMPAGLIFLOZIN-LINAGLIPTIN-METFORMIN TAB ER 24HR 10-5-1000 MG	Tier 2		X		
TRIJARDY XR TAB	EMPAGLIFLOZIN-LINAGLIPTIN-METFORMIN TAB ER 24HR 12.5-2.5-1000MG	Tier 2		X		
TRIJARDY XR TAB	EMPAGLIFLOZIN-LINAGLIPTIN-METFORMIN TAB ER 24HR 25-5-1000 MG	Tier 2		X		
TRIJARDY XR TAB	EMPAGLIFLOZIN-LINAGLIPTIN-METFORMIN TAB ER 24HR 5-2.5-1000MG	Tier 2		X		
TRULICITY INJ 0.75/0.5	DULAGLUTIDE SOLN AUTO-INJECTOR 0.75 MG/0.5ML	Tier 2	X	X		
TRULICITY INJ 1.5/0.5	DULAGLUTIDE SOLN AUTO-INJECTOR 1.5 MG/0.5ML	Tier 2	X	X		
TRULICITY INJ 3/0.5	DULAGLUTIDE SOLN AUTO-INJECTOR 3 MG/0.5ML	Tier 2	X	X		
TRULICITY INJ 4.5/0.5	DULAGLUTIDE SOLN AUTO-INJECTOR 4.5 MG/0.5ML	Tier 2	X	X		
Antiemetics, Other - Nausea and Vomiting Drugs						
AKYNZEO CAP 300-0.5	NETUPITANT-PALONOSETRON CAP 300-0.5 MG	Tier 3/4				
BONJESTA TAB 20-20MG	DOXYLAMINE-PYRIDOXINE TAB ER 20-20 MG	Tier 2				
DOXYL/PYRID TAB 10-10MG	DOXYLAMINE-PYRIDOXINE TAB DELAYED RELEASE 10-10 MG	Tier 1	X			

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
HYDROXYZ PAM CAP 100MG	HYDROXYZINE PAMOATE CAP 100 MG	Tier 1				
HYDROXYZ PAM CAP 25MG	HYDROXYZINE PAMOATE CAP 25 MG	Tier 1				
HYDROXYZ PAM CAP 50MG	HYDROXYZINE PAMOATE CAP 50 MG	Tier 1				
METOCLOPRAM SOL 10/10ML	METOCLOPRAMIDE HCL SOLN 5 MG/5ML (10 MG/10ML) (BASE EQUIV)	Tier 1				
METOCLOPRAM SOL 5MG/5ML	METOCLOPRAMIDE HCL SOLN 5 MG/5ML (10 MG/10ML) (BASE EQUIV)	Tier 1				
METOCLOPRAM TAB 10MG	METOCLOPRAMIDE HCL TAB 10 MG (BASE EQUIVALENT)	Tier 1				
METOCLOPRAM TAB 5MG	METOCLOPRAMIDE HCL TAB 5 MG (BASE EQUIVALENT)	Tier 1				
METOCLOPRAM TAB 5MG ODT	METOCLOPRAMIDE HCL ORALLY DISINTEGRATING TAB 5 MG (BASE EQ)	Tier 1				
PERPHENAZINE TAB 16MG	PERPHENAZINE TAB 16 MG	Tier 1				
PERPHENAZINE TAB 2MG	PERPHENAZINE TAB 2 MG	Tier 1				
PERPHENAZINE TAB 4MG	PERPHENAZINE TAB 4 MG	Tier 1				
PERPHENAZINE TAB 8MG	PERPHENAZINE TAB 8 MG	Tier 1				
PROCHLORPER SUP 25MG	PROCHLORPERAZINE SUPPOS 25 MG	Tier 1				
PROCHLORPER TAB 10MG	PROCHLORPERAZINE MALEATE TAB 10 MG (BASE EQUIVALENT)	Tier 1				
PROCHLORPER TAB 5MG	PROCHLORPERAZINE MALEATE TAB 5 MG (BASE EQUIVALENT)	Tier 1				
REGLAN TAB 10MG	METOCLOPRAMIDE HCL TAB 10 MG (BASE EQUIVALENT)	Tier 3/4				
REGLAN TAB 5MG	METOCLOPRAMIDE HCL TAB 5 MG (BASE EQUIVALENT)	Tier 3/4				
SCOPOLAMINE DIS 1MG/3DAY	SCOPOLAMINE TD PATCH 72HR 1 MG/3DAYS	Tier 1				
TRIMETHOBENZ CAP 300MG	TRIMETHOBENZAMIDE HCL CAP 300 MG	Tier 1				
Antiestrogens/Modifiers						
ORSERDU TAB 86MG	ELACESTRANT HYDROCHLORIDE TAB 86 MG	Tier 2	X	X		
Antiestrogens/Modifiers - Chemotherapy Agents						
EMCYT CAP 140MG	ESTRAMUSTINE PHOSPHATE SODIUM CAP 140 MG	Tier 2				
TAMOXIFEN TAB 10MG	TAMOXIFEN CITRATE TAB 10 MG (BASE EQUIVALENT)	Tier 1				
TAMOXIFEN TAB 20MG	TAMOXIFEN CITRATE TAB 20 MG (BASE EQUIVALENT)	Tier 1^				
TOREMIFENE TAB 60MG	TOREMIFENE CITRATE TAB 60 MG (BASE EQUIVALENT)	Tier 1				
Antifungals - Fungal Infection Drugs						
ANCOBON CAP 250MG	FLUCYTOSINE CAP 250 MG	Tier 3/4				
ANCOBON CAP 500MG	FLUCYTOSINE CAP 500 MG	Tier 3				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
CICLODAN SOL 8%	CICLOPIROX SOLUTION 8%	Tier 1				
CICLOPIROX CRE 0.77%	CICLOPIROX OLAMINE CREAM 0.77% (BASE EQUIV)	Tier 1				
CICLOPIROX GEL 0.77%	CICLOPIROX GEL 0.77%	Tier 1				
CICLOPIROX KIT 8%	CICLOPIROX SOLUTION KIT 8%	Tier 3/4				
CICLOPIROX SHA 1%	CICLOPIROX SHAMPOO 1%	Tier 1				
CICLOPIROX SOL 8%	CICLOPIROX SOLUTION 8%	Tier 1				
CICLOPIROX SUS 0.77%	CICLOPIROX OLAMINE SUSP 0.77% (BASE EQUIV)	Tier 1				
CLOTRIMAZOLE TRO 10MG	CLOTRIMAZOLE TROCHE 10 MG	Tier 1				
CRESEMBA CAP 186MG	ISAVUCONAZONIUM SULFATE CAP 186 MG	Tier 3				
CRESEMBA CAP 74.5MG	ISAVUCONAZONIUM SULFATE CAP 74.5 MG	Tier 3				
ECONAZOLE AER 1%	ECONAZOLE NITRATE FOAM 1%	Tier 3/4				
ECONAZOLE CRE 1%	ECONAZOLE NITRATE CREAM 1%	Tier 1				
ECOZA AER 1%	ECONAZOLE NITRATE FOAM 1%	Tier 3/4				
EXELDERM CRE 1%	SULCONAZOLE NITRATE CREAM 1%	Tier 3				
EXELDERM SOL 1%	SULCONAZOLE NITRATE SOLUTION 1%	Tier 3				
EXODERM LOT 25-1%	SODIUM THIOSULFATE-SALICYLIC ACID LOTION 25-1%	Tier 3				
FLUCONAZOLE SUS 10MG/ML	FLUCONAZOLE FOR SUSP 10 MG/ML	Tier 1				
FLUCONAZOLE SUS 40MG/ML	FLUCONAZOLE FOR SUSP 40 MG/ML	Tier 1				
FLUCONAZOLE TAB 100MG	FLUCONAZOLE TAB 100 MG	Tier 1				
FLUCONAZOLE TAB 150MG	FLUCONAZOLE TAB 150 MG	Tier 1				
FLUCONAZOLE TAB 200MG	FLUCONAZOLE TAB 200 MG	Tier 1				
FLUCONAZOLE TAB 50MG	FLUCONAZOLE TAB 50 MG	Tier 1				
FLUCYTOSINE CAP 250MG	FLUCYTOSINE CAP 250 MG	Tier 1				
FLUCYTOSINE CAP 500MG	FLUCYTOSINE CAP 500 MG	Tier 1				
GRISEOFULVIN SUS 125/5ML	GRISEOFULVIN MICROSIZE SUSP 125 MG/5ML	Tier 1				
GRISEOFULVIN TAB MICR 500	GRISEOFULVIN MICROSIZE TAB 500 MG	Tier 1				
GRISEOFULVIN TAB ULTR 125	GRISEOFULVIN ULTRAMICROSIZE TAB 125 MG	Tier 1				
GRISEOFULVIN TAB ULTR 250	GRISEOFULVIN ULTRAMICROSIZE TAB 250 MG	Tier 1				
GYNAZOLE-1 CRE 2%	BUTOCONAZOLE NITRATE (ONE DOSE) VAGINAL CREAM 2%	Tier 3				
HC/IODOQUIN CRE 1-1%	IDOQUINOL-HC CREAM 1-1%	Tier 1				
ITRACONAZOLE CAP 100MG	ITRACONAZOLE CAP 100 MG	Tier 1		X		
ITRACONAZOLE SOL 10MG/ML	ITRACONAZOLE ORAL SOLN 10 MG/ML	Tier 1		X		
JUBLIA SOL 10%	EFINACONAZOLE SOLN 10%	Tier 3/4		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
KETOCONAZOLE AER 2%	KETOCONAZOLE FOAM 2%	Tier 1				
KETOCONAZOLE CRE 2%	KETOCONAZOLE CREAM 2%	Tier 1				
KETOCONAZOLE SHA 2%	KETOCONAZOLE SHAMPOO 2%	Tier 1				
KETOCONAZOLE TAB 200MG	KETOCONAZOLE TAB 200 MG	Tier 1				
KETODAN AER 2%	KETOCONAZOLE FOAM 2%	Tier 1				
KLAYESTA POW 100000	NYSTATIN TOPICAL POWDER 100000 UNIT/GM	Tier 1				
LULICONAZOLE CRE 1%	LULICONAZOLE CREAM 1%	Tier 3/4				
LUZU CRE 1%	LULICONAZOLE CREAM 1%	Tier 3/4				
MICO-ZN-PETR OIN	MICONAZOLE-ZINC OXIDE-WHITE PETROLATUM OINT 0.25-15-81.35%	Tier 3/4				
MICONAZOLE 3 SUP 200MG	MICONAZOLE NITRATE VAGINAL SUPPOS 200 MG	Tier 1				
NAFTIFINE CRE HCL 1%	NAFTIFINE HCL CREAM 1%	Tier 1				
NAFTIFINE CRE HCL 2%	NAFTIFINE HCL CREAM 2%	Tier 1				
NAFTIFINE GEL 2%	NAFTIFINE HCL GEL 2%	Tier 1				
NAFTIN GEL 1%	NAFTIFINE HCL GEL 1%	Tier 3/4				
NAFTIN GEL 2%	NAFTIFINE HCL GEL 2%	Tier 3/4				
NOXAFIL PAK 300MG	POSACONAZOLE FOR DELAYED RELEASE SUSP PACKET 300 MG	Tier 2				
NOXAFIL SUS 40MG/ML	POSACONAZOLE SUSP 40 MG/ML	Tier 3/4		X		
NYAMYC POW 100000	NYSTATIN TOPICAL POWDER 100000 UNIT/GM	Tier 1				
NYSTAT/TRIAM CRE	NYSTATIN-TRIAMCINOLONE CREAM 100000-0.1 UNIT/GM-%	Tier 1				
NYSTAT/TRIAM OIN	NYSTATIN-TRIAMCINOLONE OINT 100000-0.1 UNIT/GM-%	Tier 1				
NYSTATIN CRE 100000	NYSTATIN CREAM 100000 UNIT/GM	Tier 1				
NYSTATIN OIN 100000	NYSTATIN OINT 100000 UNIT/GM	Tier 1				
NYSTATIN OIN 100000U	NYSTATIN OINT 100000 UNIT/GM	Tier 1				
NYSTATIN POW	NYSTATIN (BULK) POWDER	Tier 3				
NYSTATIN POW 100000	NYSTATIN TOPICAL POWDER 100000 UNIT/GM	Tier 1				
NYSTATIN POW 100MU	NYSTATIN (BULK) POWDER	Tier 3				
NYSTATIN POW 10BU	NYSTATIN (BULK) POWDER	Tier 3				
NYSTATIN POW 150MU	NYSTATIN (BULK) POWDER	Tier 3				
NYSTATIN POW 1BU	NYSTATIN (BULK) POWDER	Tier 3				
NYSTATIN POW 2BU	NYSTATIN (BULK) POWDER	Tier 3				
NYSTATIN POW 500MU	NYSTATIN (BULK) POWDER	Tier 3				
NYSTATIN POW 50MU	NYSTATIN (BULK) POWDER	Tier 3				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
NYSTATIN POW 5BU	NYSTATIN (BULK) POWDER	Tier 3				
NYSTATIN SUS 100000	NYSTATIN SUSP 100000 UNIT/ML	Tier 1				
NYSTATIN TAB 500000	NYSTATIN TAB 500000 UNIT	Tier 1				
NYSTOP POW 100000	NYSTATIN TOPICAL POWDER 100000 UNIT/GM	Tier 1				
ORAVIG TAB 50MG	MICONAZOLE BUCCAL TAB 50 MG (MOUTH-THROAT)	Tier 3				
OXICONAZOLE CRE NITRATE	OXICONAZOLE NITRATE CREAM 1%	Tier 1				
OXISTAT CRE 1%	OXICONAZOLE NITRATE CREAM 1%	Tier 3/4				
OXISTAT LOT 1%	OXICONAZOLE NITRATE LOTION 1%	Tier 3/4				
POSACONAZOLE SUS 200/5ML	POSACONAZOLE SUSP 40 MG/ML	Tier 1		X		
POSACONAZOLE SUS 40MG/ML	POSACONAZOLE SUSP 40 MG/ML	Tier 1		X		
POSACONAZOLE TAB 100MG DR	POSACONAZOLE TAB DELAYED RELEASE 100 MG	Tier 1				
SPORANOX CAP 100MG	ITRACONAZOLE CAP 100 MG	Tier 3/4		X		
SPORANOX SOL 10MG/ML	ITRACONAZOLE ORAL SOLN 10 MG/ML	Tier 3/4		X		
SULCONAZOLE CRE 1%	SULCONAZOLE NITRATE CREAM 1%	Tier 3				
SULCONAZOLE SOL 1%	SULCONAZOLE NITRATE SOLUTION 1%	Tier 3				
TAVABOROLE SOL 5%	TAVABOROLE SOLN 5%	Tier 1		X		
TERBINAFINE TAB 250MG	TERBINAFINE HCL TAB 250 MG	Tier 1				
TERCONAZOLE CRE 0.4%	TERCONAZOLE VAGINAL CREAM 0.4%	Tier 1				
TERCONAZOLE CRE 0.8%	TERCONAZOLE VAGINAL CREAM 0.8%	Tier 1				
TERCONAZOLE SUP 80MG	TERCONAZOLE VAGINAL SUPPOS 80 MG	Tier 1				
VFEND SUS 40MG/ML	VORICONAZOLE FOR SUSP 40 MG/ML	Tier 3/4				
VFEND TAB 50MG	VORICONAZOLE TAB 50 MG	Tier 3				
VIVJOA CAP 150MG	OTESECONAZOLE CAP THERAPY PACK 150 MG (12 WEEKS)	Tier 3	X	X		
VORICONAZOLE SUS 40MG/ML	VORICONAZOLE FOR SUSP 40 MG/ML	Tier 1				
VORICONAZOLE TAB 200MG	VORICONAZOLE TAB 200 MG	Tier 1				
VORICONAZOLE TAB 50MG	VORICONAZOLE TAB 50 MG	Tier 1				
VUSION OIN	MICONAZOLE-ZINC OXIDE-WHITE PETROLATUM OINT 0.25-15-81.35%	Tier 3/4				
Antigout Agents - Gout Drugs						
ALLOPURINOL TAB 100MG	ALLOPURINOL TAB 100 MG	Tier 1				
ALLOPURINOL TAB 200MG	ALLOPURINOL TAB 200 MG	Tier 1				
ALLOPURINOL TAB 300MG	ALLOPURINOL TAB 300 MG	Tier 1				
COLCHICINE CAP 0.6MG	COLCHICINE CAP 0.6 MG	Tier 1				
COLCHICINE TAB 0.6MG	COLCHICINE TAB 0.6 MG	Tier 1				
FEBUXOSTAT TAB 40MG	FEBUXOSTAT TAB 40 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
FEBUXOSTAT TAB 80MG	FEBUXOSTAT TAB 80 MG	Tier 1				
GLOPERBA SOL 0.6/5ML	COLCHICINE ORAL SOLN 0.6 MG/5ML	Tier 3/4				
MITIGARE CAP 0.6MG	COLCHICINE CAP 0.6 MG	Tier 2				
PROBEN/COLCH TAB 500-0.5	COLCHICINE W/ PROBENECID TAB 0.5-500 MG	Tier 1				
PROBENECID TAB 500MG	PROBENECID TAB 500 MG	Tier 1				
Antiherpetic Agents - Herpes Drugs						
ACYCLOVIR CAP 200MG	ACYCLOVIR CAP 200 MG	Tier 1				
ACYCLOVIR CRE 5%	ACYCLOVIR CREAM 5%	Tier 1				
ACYCLOVIR OIN 5%	ACYCLOVIR OINT 5%	Tier 1				
ACYCLOVIR SUS 200/5ML	ACYCLOVIR SUSP 200 MG/5ML	Tier 1				
ACYCLOVIR TAB 400MG	ACYCLOVIR TAB 400 MG	Tier 1				
ACYCLOVIR TAB 800MG	ACYCLOVIR TAB 800 MG	Tier 1				
DENAVIR CRE 1%	PENCICLOVIR CREAM 1%	Tier 3/4				
FAMCICLOVIR TAB 125MG	FAMCICLOVIR TAB 125 MG	Tier 1				
FAMCICLOVIR TAB 250MG	FAMCICLOVIR TAB 250 MG	Tier 1				
FAMCICLOVIR TAB 500MG	FAMCICLOVIR TAB 500 MG	Tier 1				
PENCICLOVIR CRE 1%	PENCICLOVIR CREAM 1%	Tier 1				
VALACYCLOVIR TAB 1GM	VALACYCLOVIR HCL TAB 1 GM	Tier 1				
VALACYCLOVIR TAB 500MG	VALACYCLOVIR HCL TAB 500 MG	Tier 1				
ZOVIRAX CRE 5%	ACYCLOVIR CREAM 5%	Tier 3/4				
Antihistamines - Drugs to Treat Allergies						
ALLERGY RELF TAB 25MG	DIPHENHYDRAMINE HCL TAB 25 MG	Tier 1				
AZELASTINE SPR 0.1%	AZELASTINE HCL NASAL SPRAY 0.1% (137 MCG/SPRAY)	Tier 1				
CARBINOXAMIN SOL 4MG/5ML	CARBINOXAMINE MALEATE SOLN 4 MG/5ML	Tier 1				
CARBINOXAMIN SUS 4MG/5ML	CARBINOXAMINE MALEATE EXTENDED RELEASE SUSP 4 MG/5ML	Tier 3/4				
CARBINOXAMIN TAB 4MG	CARBINOXAMINE MALEATE TAB 4 MG	Tier 1				
CARBZAH SOL 4MG/5ML	CARBINOXAMINE MALEATE SOLN 4 MG/5ML	Tier 2				
CLEMASTINE TAB 2.68MG	CLEMASTINE FUMARATE TAB 2.68 MG	Tier 1				
CLEMASZ TAB 2.68MG	CLEMASTINE FUMARATE TAB 2.68 MG	Tier 3				
CLEMSZA TAB 2.68MG	CLEMASTINE FUMARATE TAB 2.68 MG	Tier 3				
CORPHENA SOL 2MG/5ML	DEXCHLORPHENIRAMINE MALEATE ORAL SOLN 2 MG/5ML	Tier 3/4				
CYPROHEPTAD SYP 2MG/5ML	CYPROHEPTADINE HCL SYRUP 2 MG/5ML	Tier 1				
CYPROHEPTAD TAB 4MG	CYPROHEPTADINE HCL TAB 4 MG	Tier 1				
DES Loratadin TAB 5MG	DES Loratadine TAB 5 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
DES Loratadin Tab 5mg ODT	Desloratadine Tab Orally Disintegrating 5 mg	Tier 1				
Diphenhydram ELX 12.5/5ML	Diphenhydramine HCL Elixir 12.5 mg/5ML	Tier 1				
KARBINAL ER SUS 4MG/5ML	Carbinoxamine Maleate Extended Release Susp 4 mg/5ML	Tier 3/4				
LEVOCETIRIZI SOL 2.5/5ML	Levocetirizine Dihydrochloride Soln 2.5 mg/5ML (0.5 mg/mL)	Tier 1				
LEVOCETIRIZI TAB 5MG	Levocetirizine Dihydrochloride Tab 5 mg	Tier 1				
Olopatadine SPR 0.6%	Olopatadine HCL Nasal Soln 0.6%	Tier 1				
Promethazine SOL 12.5/10	Promethazine HCL Oral Soln 6.25 mg/5ML	Tier 1				
Promethazine SOL 6.25/5ML	Promethazine HCL Oral Soln 6.25 mg/5ML	Tier 1				
Promethazine SUP 12.5MG	Promethazine HCL Suppos 12.5 mg	Tier 1				
Promethazine SUP 25MG	Promethazine HCL Suppos 25 mg	Tier 1				
Promethazine TAB 12.5MG	Promethazine HCL Tab 12.5 mg	Tier 1				
Promethazine TAB 25MG	Promethazine HCL Tab 25 mg	Tier 1				
Promethazine TAB 50MG	Promethazine HCL Tab 50 mg	Tier 1				
Promethegan SUP 12.5MG	Promethazine HCL Suppos 12.5 mg	Tier 3				
Promethegan SUP 25MG	Promethazine HCL Suppos 25 mg	Tier 3				
Promethegan SUP 50MG	Promethazine HCL Suppos 50 mg	Tier 3				
RYALTRIS SPR 665-25	Olopatadine HCL-Mometasone Furoate Nasal Susp 665-25 mcg/act	Tier 3/4				
RYCLORA SOL 2MG/5ML	Dechlorpheniramine Maleate Oral Soln 2 mg/5ML	Tier 3/4				
Antileukotrienes - Asthma/Lung Drugs						
Accolate Tab 10mg	Zafirlukast Tab 10 mg	Tier 3/4				
Accolate Tab 20mg	Zafirlukast Tab 20 mg	Tier 3/4				
Montelukast CHW 4MG	Montelukast Sodium Chew Tab 4 mg (Base Equiv)	Tier 1				
Montelukast CHW 5MG	Montelukast Sodium Chew Tab 5 mg (Base Equiv)	Tier 1				
Montelukast GRA 4MG	Montelukast Sodium Oral Granules Packet 4 mg (Base Equiv)	Tier 1				
Montelukast TAB 10MG	Montelukast Sodium Tab 10 mg (Base Equiv)	Tier 1				
SINGULAIR GRA 4MG	Montelukast Sodium Oral Granules Packet 4 mg (Base Equiv)	Tier 3				
Zafirlukast TAB 10MG	Zafirlukast Tab 10 mg	Tier 1				
Zafirlukast TAB 20MG	Zafirlukast Tab 20 mg	Tier 1				
Zileuton ER TAB 600MG	Zileuton Tab ER 12hr 600 mg	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ZYFLO TAB 600MG	ZILEUTON TAB 600 MG	Tier 3/4				
Antimetabolites - Chemotherapy Agents						
CAPECITABINE TAB 150MG	CAPECITABINE TAB 150 MG	Tier 1				
CAPECITABINE TAB 500MG	CAPECITABINE TAB 500 MG	Tier 1				
DROXIA CAP 200MG	HYDROXYUREA CAP 200 MG	Tier 1				
DROXIA CAP 300MG	HYDROXYUREA CAP 300 MG	Tier 1				
DROXIA CAP 400MG	HYDROXYUREA CAP 400 MG	Tier 1				
HYDROXYUREA CAP 500MG	HYDROXYUREA CAP 500 MG	Tier 1				
MERCAPTOPUR TAB 50MG	MERCAPTOPURINE TAB 50 MG	Tier 1				
MERCAPTOPURI SUS 20MG/ML	MERCAPTOPURINE SUSP 2000 MG/100ML (20 MG/ML)	Tier 1				
PURIXAN SUS 20MG/ML	MERCAPTOPURINE SUSP 2000 MG/100ML (20 MG/ML)	Tier 3				
TABLOID TAB 40MG	THIOGUANINE TAB 40 MG	Tier 2				
XROMI SOL 100MG/ML	HYDROXYUREA ORAL SOLN 100 MG/ML	Tier 3/4	X			
Antimycobacterials, Other - Miscellaneous Anti-Infectives						
DAPSONE TAB 100MG	DAPSONE TAB 100 MG	Tier 1				
DAPSONE TAB 25MG	DAPSONE TAB 25 MG	Tier 1				
MYCIBUTIN CAP 150MG	RIFABUTIN CAP 150 MG	Tier 3/4				
PRETOMANID TAB 200MG	PRETOMANID TAB 200 MG	Tier 3/4				
RIFABUTIN CAP 150MG	RIFABUTIN CAP 150 MG	Tier 1				
Antineoplastic - Hormonal and Related Agents						
INLURIYO TAB 200MG	IMLUNESTRANT TOSYLATE TAB 200 MG	Tier 3/4	X	X		
Antineoplastics - Drugs to Treat Cancer						
JAYPIRCA TAB 100MG	PIRTOBRUTINIB TAB 100 MG	Tier 3/4	X	X		
JAYPIRCA TAB 50MG	PIRTOBRUTINIB TAB 50 MG	Tier 3/4	X	X		
Antineoplastics, Other						
AKEEGA TAB 100/500	NIRAPARIB TOSYLATE-ABIRATERONE ACETATE TAB 100-500 MG	Tier 3/4	X	X	X	
AKEEGA TAB 50/500MG	NIRAPARIB TOSYLATE-ABIRATERONE ACETATE TAB 50-500 MG	Tier 3/4	X	X	X	
REVUFORJ TAB 110MG	REVUMENIB CITRATE TAB 110 MG	Tier 3/4	X	X		
REVUFORJ TAB 160MG	REVUMENIB CITRATE TAB 160 MG	Tier 3/4	X	X		
REVUFORJ TAB 25MG	REVUMENIB CITRATE TAB 25 MG	Tier 3/4	X	X		
Antineoplastics, Other - Chemotherapy Agents						
AUGTYRO CAP 160MG	REPOTRECTINIB CAP 160 MG	Tier 2	X	X		
AUGTYRO CAP 40MG	REPOTRECTINIB CAP 40 MG	Tier 2	X	X		
AVMAPKI PAK FAKZYNJA	AVUTOMETINIB CAP 0.8 MG & DEFACTINIB TAB 200 MG THERAPY PACK	Tier 3/4	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
BESREMI SOL 500MCG	ROPEGINTERFERON ALFA-2B-NJFT SOLN PREFILLED SYR 500 MCG/ML	Tier 3/4	X	X		
COPIKTRA CAP 15MG	DUVELISIB CAP 15 MG	Tier 3/4	X	X		
COPIKTRA CAP 25MG	DUVELISIB CAP 25 MG	Tier 3/4	X	X		
ENSACOVE CAP 100MG	ENSARTINIB HCL CAP 100 MG (BASE EQUIVALENT)	Tier 2	X	X		
ENSACOVE CAP 25MG	ENSARTINIB HCL CAP 25 MG (BASE EQUIVALENT)	Tier 2	X	X		
FRUZAQLA CAP 1MG	FRUQUINTINIB CAP 1 MG	Tier 3/4	X	X	X	
FRUZAQLA CAP 5MG	FRUQUINTINIB CAP 5 MG	Tier 3/4	X	X	X	
GOMEKLI CAP 1MG	MIRDAMETINIB CAP 1 MG	Tier 3/4	X	X		
GOMEKLI CAP 2MG	MIRDAMETINIB CAP 2 MG	Tier 3/4	X	X		
GOMEKLI TAB 1MG	MIRDAMETINIB TAB FOR ORAL SUSP 1 MG	Tier 3/4	X	X		
IBTROZI CAP 200MG	TALETRECTINIB ADIPATE CAP 200 MG	Tier 3/4	X	X	X	
INQOVI TAB 35-100MG	DECITABINE-CEDAZURIDINE TAB 35-100 MG	Tier 3/4	X	X		
ITOVEBI TAB 3MG	INAVOLISIB TAB 3 MG	Tier 2	X	X		
ITOVEBI TAB 9MG	INAVOLISIB TAB 9 MG	Tier 2	X	X		
IWILFIN TAB 192MG	EFLORNITHINE HCL TAB 192 MG	Tier 2	X	X		
KISQALI TAB 200DOSE	RIBOCICLIB SUCCINATE TAB PACK 200 MG DAILY DOSE	Tier 2	X	X		
KISQALI TAB 400DOSE	RIBOCICLIB SUCCINATE TAB PACK 400 MG DAILY DOSE (200 MG TAB)	Tier 2	X	X		
KISQALI TAB 600DOSE	RIBOCICLIB SUCCINATE TAB PACK 600 MG DAILY DOSE (200 MG TAB)	Tier 2	X	X		
KISQALI 200 PAK FEMARA	RIBOCICLIB 200 MG DOSE (200 MG TAB) & LETROZOLE 2.5 MG TBPk	Tier 3/4	X	X		
KISQALI 400 PAK FEMARA	RIBOCICLIB 400 MG DOSE (200 MG TAB) & LETROZOLE 2.5 MG TBPk	Tier 3/4	X	X		
KISQALI 600 PAK FEMARA	RIBOCICLIB 600 MG DOSE (200 MG TAB) & LETROZOLE 2.5 MG TBPk	Tier 3/4	X	X		
KOSELUGO CAP 10MG	SELUMETINIB SULFATE CAP 10 MG	Tier 3	X	X		
KOSELUGO CAP 25MG	SELUMETINIB SULFATE CAP 25 MG	Tier 3	X	X		
KOSELUGO CAP 5MG	SELUMETINIB SULFATE CAP SPRINKLE 5 MG	Tier 3	X			
KOSELUGO CAP 7.5MG	SELUMETINIB SULFATE CAP SPRINKLE 7.5 MG	Tier 3	X			
KRAZATI TAB 200MG	ADAGRASIB TAB 200 MG	Tier 3/4	X	X		
LEUCOVOR CA TAB 10MG	LEUCOVORIN CALCIUM TAB 10 MG	Tier 1				
LEUCOVOR CA TAB 15MG	LEUCOVORIN CALCIUM TAB 15 MG	Tier 1				
LEUCOVOR CA TAB 25MG	LEUCOVORIN CALCIUM TAB 25 MG	Tier 1				
LEUCOVOR CA TAB 5MG	LEUCOVORIN CALCIUM TAB 5 MG	Tier 1				
LEUCOVORIN TAB 5MG	LEUCOVORIN CALCIUM TAB 5 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
LONSURF TAB 15-6.14	TRIFLURIDINE-TIPIRACIL TAB 15-6.14 MG	Tier 3/4	X	X		
LONSURF TAB 20-8.19	TRIFLURIDINE-TIPIRACIL TAB 20-8.19 MG	Tier 3/4	X	X		
LORBRENA TAB 100MG	LORLATINIB TAB 100 MG	Tier 3	X	X	X	
LORBRENA TAB 25MG	LORLATINIB TAB 25 MG	Tier 3	X	X	X	
LUMAKRAS TAB 120MG	SOTORASIB TAB 120 MG	Tier 3/4	X	X		
LUMAKRAS TAB 240MG	SOTORASIB TAB 240 MG	Tier 3/4	X	X		
LUMAKRAS TAB 320MG	SOTORASIB TAB 320 MG	Tier 3/4	X	X		
NINLARO CAP 2.3MG	IXAZOMIB CITRATE CAP 2.3 MG (BASE EQUIVALENT)	Tier 2	X			
NINLARO CAP 3MG	IXAZOMIB CITRATE CAP 3 MG (BASE EQUIVALENT)	Tier 2	X			
NINLARO CAP 4MG	IXAZOMIB CITRATE CAP 4 MG (BASE EQUIVALENT)	Tier 2	X			
OGSIVEO TAB 100MG	NIROGACESTAT HYDROBROMIDE TAB 100 MG	Tier 2	X	X		
OGSIVEO TAB 150MG	NIROGACESTAT HYDROBROMIDE TAB 150 MG	Tier 2	X	X		
OGSIVEO TAB 50MG	NIROGACESTAT HYDROBROMIDE TAB 50 MG	Tier 2	X	X		
OJJAARA TAB 100MG	MOMELOTINIB DIHYDROCHLORIDE TAB 100 MG	Tier 3/4	X	X	X	
OJJAARA TAB 150MG	MOMELOTINIB DIHYDROCHLORIDE TAB 150 MG	Tier 3/4	X	X	X	
OJJAARA TAB 200MG	MOMELOTINIB DIHYDROCHLORIDE TAB 200 MG	Tier 3/4	X	X	X	
ONUREG TAB 200MG	AZACITIDINE TAB 200 MG	Tier 2	X	X		
ONUREG TAB 300MG	AZACITIDINE TAB 300 MG	Tier 2	X	X		
PIQRAY 200MG TAB DOSE	ALPELISIB TAB THERAPY PACK 200 MG DAILY DOSE	Tier 2	X	X		
PIQRAY 250MG TAB DOSE	ALPELISIB TAB PACK 250 MG DAILY DOSE (200 MG & 50 MG TABS)	Tier 2	X	X		
PIQRAY 300MG TAB DOSE	ALPELISIB TAB PACK 300 MG DAILY DOSE (2X150 MG TAB)	Tier 2	X	X		
ROMVIMZA CAP 14MG	VIMSELTINIB CAP 14 MG	Tier 2	X	X		
ROMVIMZA CAP 20MG	VIMSELTINIB CAP 20 MG	Tier 2	X	X		
ROMVIMZA CAP 30MG	VIMSELTINIB CAP 30 MG	Tier 2	X	X		
ROZLYTREK CAP 100MG	ENTRECTINIB CAP 100 MG	Tier 2	X	X		
ROZLYTREK CAP 200MG	ENTRECTINIB CAP 200 MG	Tier 2	X	X		
ROZLYTREK PAK 50MG	ENTRECTINIB PELLETT PACK 50 MG	Tier 2	X	X		
SCEMBLIX TAB 100MG	ASCIMINIB HCL TAB 100 MG	Tier 3/4	X	X		
SCEMBLIX TAB 20MG	ASCIMINIB HCL TAB 20 MG	Tier 3/4	X	X		
SCEMBLIX TAB 40MG	ASCIMINIB HCL TAB 40 MG	Tier 3/4	X	X		
TALZENNA CAP 0.1MG	TALAZOPARIB TOSYLATE CAP 0.1 MG (BASE EQUIVALENT)	Tier 3/4	X	X	X	

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
TALZENNA CAP 0.35MG	TALAZOPARIB TOSYLATE CAP 0.35 MG (BASE EQUIVALENT)	Tier 3/4	X	X	X	
TALZENNA CAP 0.5MG	TALAZOPARIB TOSYLATE CAP 0.5 MG (BASE EQUIVALENT)	Tier 3/4	X	X	X	
TALZENNA CAP 0.75MG	TALAZOPARIB TOSYLATE CAP 0.75 MG (BASE EQUIVALENT)	Tier 3/4	X	X	X	
TAZVERIK TAB 200MG	TAZEMETOSTAT HBR TAB 200 MG	Tier 3/4	X	X		
TRUQAP PAK 160MG	CAPIVASERTIB TAB THERAPY PACK 160 MG	Tier 2	X	X		
TRUQAP PAK 200MG	CAPIVASERTIB TAB THERAPY PACK 200 MG	Tier 2	X	X		
TRUQAP TAB 160MG	CAPIVASERTIB TAB 160 MG	Tier 2	X	X		
TRUQAP TAB 200MG	CAPIVASERTIB TAB 200 MG	Tier 2	X	X		
VANFLYTA TAB 17.7MG	QUIZARTINIB DIHYDROCHLORIDE TAB 17.7 MG	Tier 3/4	X	X		
VANFLYTA TAB 26.5MG	QUIZARTINIB DIHYDROCHLORIDE TAB 26.5 MG	Tier 3/4	X	X		
VERZENIO TAB 100MG	ABEMACICLIB TAB 100 MG	Tier 2	X	X		
VERZENIO TAB 150MG	ABEMACICLIB TAB 150 MG	Tier 2	X	X		
VERZENIO TAB 200MG	ABEMACICLIB TAB 200 MG	Tier 2	X	X		
VERZENIO TAB 50MG	ABEMACICLIB TAB 50 MG	Tier 2	X	X		
VORANIGO TAB 10MG	VORASIDENIB TAB 10 MG	Tier 2	X	X		
VORANIGO TAB 40MG	VORASIDENIB TAB 40 MG	Tier 2	X	X		
WELIREG TAB 40MG	BELZUTIFAN TAB 40 MG	Tier 3/4	X	X		
XPOVIO PAK 40MG	SELINEXOR TAB THERAPY PACK 40 MG (80 MG ONCE WEEKLY)	Tier 3/4	X	X		
XPOVIO PAK 40MG	SELINEXOR TAB THERAPY PACK 40 MG (40 MG TWICE WEEKLY)	Tier 3/4	X	X		
XPOVIO PAK 40MG	SELINEXOR TAB THERAPY PACK 40 MG (40 MG ONCE WEEKLY)	Tier 3/4	X	X		
XPOVIO PAK 40MG	SELINEXOR TAB THERAPY PACK 10 MG (40 MG ONCE WEEKLY)	Tier 3/4	X	X		
XPOVIO PAK 50MG	SELINEXOR TAB THERAPY PACK 50 MG (100 MG ONCE WEEKLY)	Tier 3/4	X	X		
XPOVIO PAK 60MG	SELINEXOR TAB THERAPY PACK 20 MG (60 MG TWICE WEEKLY)	Tier 3/4	X	X		
XPOVIO PAK 60MG	SELINEXOR TAB THERAPY PACK 60 MG (60 MG ONCE WEEKLY)	Tier 3/4	X	X		
XPOVIO PAK 80MG	SELINEXOR TAB THERAPY PACK 20 MG (80 MG TWICE WEEKLY)	Tier 3/4	X	X		
XPOVIO PAK 80MG	SELINEXOR TAB THERAPY PACK 80 MG (80 MG ONCE WEEKLY)	Tier 3/4	X			
ZOLINZA CAP 100MG	VORINOSTAT CAP 100 MG	Tier 2	X	X		
Antiparkinson Agents - Parkinson's Disease Drugs						
NOURIANZ TAB 20MG	ISTRADEFYLLINE TAB 20 MG	Tier 3	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
NOURIANZ TAB 40MG	ISTRADEFYLLINE TAB 40 MG	Tier 3	X	X		
Antiparkinson Agents, Other - Parkinson's Disease Drugs						
AMANTADINE CAP 100MG	AMANTADINE HCL CAP 100 MG	Tier 1				
AMANTADINE SOL 100/10ML	AMANTADINE HCL SOLN 50 MG/5ML	Tier 1				
AMANTADINE SOL 50MG/5ML	AMANTADINE HCL SOLN 50 MG/5ML	Tier 1				
AMANTADINE TAB 100MG	AMANTADINE HCL TAB 100 MG	Tier 1				
COMTAN TAB 200MG	ENTACAPONE TAB 200 MG	Tier 3/4				
ENTACAPONE TAB 200MG	ENTACAPONE TAB 200 MG	Tier 1				
ONGENTYS CAP 25MG	OPICAPONE CAP 25 MG	Tier 3/4		X		
ONGENTYS CAP 50MG	OPICAPONE CAP 50 MG	Tier 3/4		X		
TOLCAPONE TAB 100MG	TOLCAPONE TAB 100 MG	Tier 1				
Antiprotozoals - Protozoal Infection Drugs						
ALINIA SUS 100/5ML	NITAZOXANIDE FOR SUSP 100 MG/5ML	Tier 2				
ARAKODA TAB 100MG	TAFENOQUINE SUCCINATE TAB 100 MG (BASE EQUIVALENT)	Tier 3/4		X		
ATOVAQ/PROGU TAB 250-100	ATOVAQUONE-PROGUANIL HCL TAB 250-100 MG	Tier 1				
ATOVAQ/PROGU TAB 62.5-25	ATOVAQUONE-PROGUANIL HCL TAB 62.5-25 MG	Tier 1				
ATOVAQUONE SUS 750/5ML	ATOVAQUONE SUSP 750 MG/5ML	Tier 1				
CHLOROQUINE TAB 250MG	CHLOROQUINE PHOSPHATE TAB 250 MG	Tier 1				
CHLOROQUINE TAB 500MG	CHLOROQUINE PHOSPHATE TAB 500 MG	Tier 1				
COARTEM TAB 20-120MG	ARTEMETHER-LUMEFANTRINE TAB 20-120 MG	Tier 2				
DARAPRIM TAB 25MG	PYRIMETHAMINE TAB 25 MG	Tier 3/4	X			
HYDROXYCHLOR TAB 100MG	HYDROXYCHLOROQUINE SULFATE TAB 100 MG	Tier 1				
HYDROXYCHLOR TAB 200MG	HYDROXYCHLOROQUINE SULFATE TAB 200 MG	Tier 1				
HYDROXYCHLOR TAB 300MG	HYDROXYCHLOROQUINE SULFATE TAB 300 MG	Tier 1				
HYDROXYCHLOR TAB 400MG	HYDROXYCHLOROQUINE SULFATE TAB 400 MG	Tier 1				
IMPAVIDO CAP 50MG	MILTEFOSINE CAP 50 MG	Tier 2		X		
KRINTAFEL TAB 150MG	TAFENOQUINE SUCCINATE TAB 150 MG (BASE EQUIVALENT)	Tier 1				
LAMPIT TAB 120MG	NIFURTIMOX TAB 120 MG	Tier 3/4		X		
LAMPIT TAB 30MG	NIFURTIMOX TAB 30 MG	Tier 3/4		X		
MALARONE TAB 250-100	ATOVAQUONE-PROGUANIL HCL TAB 250-100 MG	Tier 3/4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
MALARONE TAB 62.5-25	ATOVAQUONE-PROGUANIL HCL TAB 62.5-25 MG	Tier 3/4				
MEFLOQUINE TAB 250MG	MEFLOQUINE HCL TAB 250 MG	Tier 1				
NEBUPENT INH 300MG	PENTAMIDINE ISETHIONATE FOR NEBULIZATION SOLN 300 MG	Tier 3/4				
NITAZOXANIDE TAB 500MG	NITAZOXANIDE TAB 500 MG	Tier 1				
PENTAMIDINE INH 300MG	PENTAMIDINE ISETHIONATE FOR NEBULIZATION SOLN 300 MG	Tier 1				
PRIMAQUINE TAB 26.3MG	PRIMAQUINE PHOSPHATE TAB 26.3 MG (15 MG BASE)	Tier 1				
PYRIMETHAMIN TAB 25MG	PYRIMETHAMINE TAB 25 MG	Tier 1	X			
QUALAQUIN CAP 324MG	QUININE SULFATE CAP 324 MG	Tier 3/4				
QUININE SULF CAP 324MG	QUININE SULFATE CAP 324 MG	Tier 1				
Antipsychotics, other						
COBENFY CAP 100-20MG	XANOMELINE TARTRATE-TROSPIUM CHLORIDE CAP 100-20 MG	Tier 3/4	X	X		
COBENFY CAP 125-30MG	XANOMELINE TARTRATE-TROSPIUM CHLORIDE CAP 125-30 MG	Tier 3/4	X	X		
COBENFY CAP 50-20MG	XANOMELINE TARTRATE-TROSPIUM CHLORIDE CAP 50-20 MG	Tier 3/4	X	X		
COBENFY STRT CAP PACK	XANOMELINE-TROSPIUM CHLORIDE CAP PACK 50-20 MG & 100-20 MG	Tier 3/4	X	X		
Antispasmodics, Gastrointestinal - Bowel Treatment Drugs						
BELLA/OPIUM SUP 16.2-60	BELLADONNA ALKALOIDS & OPIUM SUPPOS 16.2-60 MG	Tier 1				
Antispasmodics, Gastrointestinal - Stomach and Intestine Drugs						
ANASPAZ TAB 0.125MG	HYOSCYAMINE SULFATE TAB DISINT 0.125 MG	Tier 2				
CHLORD/CLIDI CAP 5-2.5MG	CHLORDIAZEPOXIDE HCL-CLIDINIUM BROMIDE CAP 5-2.5 MG	Tier 1				
CUVPOSA SOL 1MG/5ML	GLYCOPYRROLATE ORAL SOLN 1 MG/5ML	Tier 3/4				
DICYCLOMINE CAP 10MG	DICYCLOMINE HCL CAP 10 MG	Tier 1				
DICYCLOMINE SOL 10MG/5ML	DICYCLOMINE HCL ORAL SOLN 10 MG/5ML	Tier 1				
DICYCLOMINE TAB 20MG	DICYCLOMINE HCL TAB 20 MG	Tier 1				
GLYCOPYRROL TAB 1MG	GLYCOPYRROLATE TAB 1 MG	Tier 1				
GLYCOPYRROL TAB 2MG	GLYCOPYRROLATE TAB 2 MG	Tier 1				
GLYCOPYRROLA SOL 1MG/5ML	GLYCOPYRROLATE ORAL SOLN 1 MG/5ML	Tier 1				
HYOSCYAMINE DRO 0.125/ML	HYOSCYAMINE SULFATE SOLN 0.125 MG/ML	Tier 1				
HYOSCYAMINE ELX 0.125/5	HYOSCYAMINE SULFATE ELIXIR 0.125 MG/5ML	Tier 1				
HYOSCYAMINE SUB 0.125MG	HYOSCYAMINE SULFATE SL TAB 0.125 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
HYOSCYAMINE TAB 0.125MG	HYOSCYAMINE SULFATE TAB DISINT 0.125 MG	Tier 1				
HYOSCYAMINE TAB 0.125MG	HYOSCYAMINE SULFATE TAB 0.125 MG	Tier 1				
HYOSCYAMINE TAB 0.375 ER	HYOSCYAMINE SULFATE TAB ER 12HR 0.375 MG	Tier 1				
HYOSCYAMINE TAB 0.375 SR	HYOSCYAMINE SULFATE TAB ER 12HR 0.375 MG	Tier 1				
HYOSYNE DRO 0.125/ML	HYOSCYAMINE SULFATE SOLN 0.125 MG/ML	Tier 1				
HYOSYNE ELX 0.125/5	HYOSCYAMINE SULFATE ELIXIR 0.125 MG/5ML	Tier 1				
LEVBIID TAB 0.375 ER	HYOSCYAMINE SULFATE TAB ER 12HR 0.375 MG	Tier 3/4				
LEVSIN TAB 0.125MG	HYOSCYAMINE SULFATE TAB 0.125 MG	Tier 3/4				
LEVSIN/SL SUB 0.125MG	HYOSCYAMINE SULFATE SL TAB 0.125 MG	Tier 3/4				
METHSCOPOLAM TAB 2.5MG	METHSCOPOLAMINE BROMIDE TAB 2.5 MG	Tier 1				
METHSCOPOLAM TAB 5MG	METHSCOPOLAMINE BROMIDE TAB 5 MG	Tier 1				
NULEV TAB 0.125MG	HYOSCYAMINE SULFATE TAB DISINT 0.125 MG	Tier 3/4				
OSCIMIN SUB 0.125MG	HYOSCYAMINE SULFATE SL TAB 0.125 MG	Tier 3/4				
OSCIMIN TAB 0.125MG	HYOSCYAMINE SULFATE TAB 0.125 MG	Tier 3/4				
Antispasmodics, Urinary - Bladder Control Drugs						
DARIFENACIN TAB 15MG ER	DARIFENACIN HYDROBROMIDE TAB ER 24HR 15 MG (BASE EQUIV)	Tier 1				
DARIFENACIN TAB 7.5MG ER	DARIFENACIN HYDROBROMIDE TAB ER 24HR 7.5 MG (BASE EQUIV)	Tier 1				
FLAVOXATE TAB 100MG	FLAVOXATE HCL TAB 100 MG	Tier 1				
GELNIQUE GEL 10%	OXYBUTYNIN CHLORIDE TD GEL 10%	Tier 3/4				
GEMTESA TAB 75MG	VIBEGRON TAB 75 MG	Tier 3/4				
MIRABEGRON TAB 25MG ER	MIRABEGRON TAB ER 24 HR 25 MG	Tier 1			X	
MIRABEGRON TAB 50MG ER	MIRABEGRON TAB ER 24 HR 50 MG	Tier 1			X	
MYRBETRIQ TAB 25MG	MIRABEGRON TAB ER 24 HR 25 MG	Tier 3/4				
MYRBETRIQ TAB 50MG	MIRABEGRON TAB ER 24 HR 50 MG	Tier 3/4				
OXYBUTYNIN SOL 5MG/5ML	OXYBUTYNIN CHLORIDE SOLUTION 5 MG/5ML	Tier 1				
OXYBUTYNIN TAB 10MG ER	OXYBUTYNIN CHLORIDE TAB ER 24HR 10 MG	Tier 1				
OXYBUTYNIN TAB 15MG ER	OXYBUTYNIN CHLORIDE TAB ER 24HR 15 MG	Tier 1				
OXYBUTYNIN TAB 2.5MG	OXYBUTYNIN CHLORIDE TAB 2.5 MG	Tier 1				
OXYBUTYNIN TAB 5MG	OXYBUTYNIN CHLORIDE TAB 5 MG	Tier 1				
OXYBUTYNIN TAB 5MG ER	OXYBUTYNIN CHLORIDE TAB ER 24HR 5 MG	Tier 1				
SOLIFENACIN TAB 10MG	SOLIFENACIN SUCCINATE TAB 10 MG	Tier 1				
SOLIFENACIN TAB 5MG	SOLIFENACIN SUCCINATE TAB 5 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
TOLTERODINE CAP 2MG ER	TOLTERODINE TARTRATE CAP ER 24HR 2 MG	Tier 1				
TOLTERODINE CAP 4MG ER	TOLTERODINE TARTRATE CAP ER 24HR 4 MG	Tier 1				
TOLTERODINE TAB 1MG	TOLTERODINE TARTRATE TAB 1 MG	Tier 1				
TOLTERODINE TAB 2MG	TOLTERODINE TARTRATE TAB 2 MG	Tier 1				
TROSPIMUM CHL CAP 60MG ER	TROSPIMUM CHLORIDE CAP ER 24HR 60 MG	Tier 1				
TROSPIMUM CL TAB 20MG	TROSPIMUM CHLORIDE TAB 20 MG	Tier 1				
VESICARE TAB 10MG	SOLIFENACIN SUCCINATE TAB 10 MG	Tier 3/4				
VESICARE TAB 5MG	SOLIFENACIN SUCCINATE TAB 5 MG	Tier 3/4				
VESICARE LS SUS 5MG/5ML	SOLIFENACIN SUCCINATE SUSP 5 MG/5ML (1 MG/ML)	Tier 3/4				
Antithyroid Agents - Thyroid Suppressing Drugs						
METHIMAZOLE TAB 10MG	METHIMAZOLE TAB 10 MG	Tier 1				
METHIMAZOLE TAB 5MG	METHIMAZOLE TAB 5 MG	Tier 1				
PROPYLTHIOUR TAB 50MG	PROPYLTHIOURACIL TAB 50 MG	Tier 1				
Antituberculars - Tuberculosis Drugs						
CYCLOSERINE CAP 250MG	CYCLOSERINE CAP 250 MG	Tier 1				
ETHAMBUTOL TAB 100MG	ETHAMBUTOL HCL TAB 100 MG	Tier 1				
ETHAMBUTOL TAB 400MG	ETHAMBUTOL HCL TAB 400 MG	Tier 1				
ISONIAZID SYP 50MG/5ML	ISONIAZID SYRUP 50 MG/5ML	Tier 1				
ISONIAZID TAB 100MG	ISONIAZID TAB 100 MG	Tier 1				
ISONIAZID TAB 300MG	ISONIAZID TAB 300 MG	Tier 1				
MYAMBUTOL TAB 400MG	ETHAMBUTOL HCL TAB 400 MG	Tier 3/4				
PRIFTIN TAB 150MG	RIFAPENTINE TAB 150 MG	Tier 2				
PYRAZINAMIDE TAB 500MG	PYRAZINAMIDE TAB 500 MG	Tier 1				
RIFAMPIN CAP 150MG	RIFAMPIN CAP 150 MG	Tier 1				
RIFAMPIN CAP 300MG	RIFAMPIN CAP 300 MG	Tier 1				
SIRTURO TAB 100MG	BEDAQUILINE FUMARATE TAB 100 MG (BASE EQUIV)	Tier 2				
SIRTURO TAB 20MG	BEDAQUILINE FUMARATE TAB 20 MG (BASE EQUIV)	Tier 2				
TRECTOR TAB 250MG	ETHIONAMIDE TAB 250 MG	Tier 2				
Antivirals						
TEMBEXA SUS 10MG/ML	BRINCIDOFOVIR ORAL SUSP 10 MG/ML	Tier 3/4				
TEMBEXA TAB 100MG	BRINCIDOFOVIR TAB 100 MG	Tier 3/4				
TPOXX CAP 200MG	TECOVIRIMAT CAP 200 MG	Tier 3/4				
Antivirals - Drugs to Treat Viral Infections						
LAGEVRIO CAP 200MG	MOLNUPIRAVIR CAP 200 MG	Tier 2		X		
PAXLOVID PAK	NIRMATRELVIR TAB 6 X 150 MG & RITONAVIR TAB 5 X 100 MG PAK	Tier 2		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PAXLOVID TAB 150-100	NIRMATRELVIR TAB 10 X 150 MG & RITONAVIR TAB 10 X 100 MG PAK	Tier 2		X		
PAXLOVID TAB 300-100	NIRMATRELVIR TAB 20 X 150 MG & RITONAVIR TAB 10 X 100 MG PAK	Tier 2		X		
RIBAVIRIN INH 6GM	RIBAVIRIN FOR INHAL SOLN 6 GM	Tier 1				
VIRAZOLE INH 6GM	RIBAVIRIN FOR INHAL SOLN 6 GM	Tier 3/4				
Anxiolytics, Other - Anxiety Drugs						
BUSPIRONE TAB 10MG	BUSPIRONE HCL TAB 10 MG	Tier 1				
BUSPIRONE TAB 15MG	BUSPIRONE HCL TAB 15 MG	Tier 1				
BUSPIRONE TAB 30MG	BUSPIRONE HCL TAB 30 MG	Tier 1				
BUSPIRONE TAB 5MG	BUSPIRONE HCL TAB 5 MG	Tier 1				
BUSPIRONE TAB 7.5MG	BUSPIRONE HCL TAB 7.5 MG	Tier 1				
HYDROXYZ HCL SYP 10MG/5ML	HYDROXYZINE HCL SYRUP 10 MG/5ML	Tier 1				
HYDROXYZ HCL TAB 10MG	HYDROXYZINE HCL TAB 10 MG	Tier 1				
HYDROXYZ HCL TAB 25MG	HYDROXYZINE HCL TAB 25 MG	Tier 1				
HYDROXYZ HCL TAB 50MG	HYDROXYZINE HCL TAB 50 MG	Tier 1				
HYDROXYZINE SOL 10MG/5ML	HYDROXYZINE HCL SYRUP 10 MG/5ML	Tier 1				
HYDROXYZINE SYP 10MG/5ML	HYDROXYZINE HCL SYRUP 10 MG/5ML	Tier 1				
MEPROBAMATE TAB 200MG	MEPROBAMATE TAB 200 MG	Tier 1				
MEPROBAMATE TAB 400MG	MEPROBAMATE TAB 400 MG	Tier 1				
Aromatase Inhibitors, 3rd Generation - Chemotherapy Agents						
ANASTROZOLE TAB 1MG	ANASTROZOLE TAB 1 MG	Tier 1^				
EXEMESTANE TAB 25MG	EXEMESTANE TAB 25 MG	Tier 1^				
LETROZOLE TAB 2.5MG	LETROZOLE TAB 2.5 MG	Tier 1^				
Attention Deficit Hyperactivity Disorder Agents, Amphetamines - ADHD Drugs						
ADZENYS XR TAB 12.5MG	AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 12.5 MG	Tier 3/4		X		
ADZENYS XR TAB 15.7 MG	AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 15.7 MG	Tier 3/4		X		
ADZENYS XR TAB 18.8MG	AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 18.8 MG	Tier 3/4		X		
ADZENYS XR TAB 3.1MG	AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 3.1 MG	Tier 3/4		X		
ADZENYS XR TAB 6.3MG	AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 6.3 MG	Tier 3/4		X		
ADZENYS XR TAB 9.4MG	AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 9.4 MG	Tier 3/4		X		
AMPHET/DEXTR CAP 10MG ER	AMPHETAMINE-DEXTROAMPHETAMINE CAP ER 24HR 10 MG	Tier 1		X		
AMPHET/DEXTR CAP 12.5 ER	AMPHETAMINE-DEXTROAMPHETAMINE 3-BEAD CAP ER 24HR 12.5 MG	Tier 1		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
AMPHET/DEXTR CAP 15MG ER	AMPHETAMINE-DEXTROAMPHETAMINE CAP ER 24HR 15 MG	Tier 1		X		
AMPHET/DEXTR CAP 20MG ER	AMPHETAMINE-DEXTROAMPHETAMINE CAP ER 24HR 20 MG	Tier 1		X		
AMPHET/DEXTR CAP 25MG ER	AMPHETAMINE-DEXTROAMPHETAMINE CAP ER 24HR 25 MG	Tier 1		X		
AMPHET/DEXTR CAP 25MG ER	AMPHETAMINE-DEXTROAMPHETAMINE 3-BEAD CAP ER 24HR 25 MG	Tier 1		X		
AMPHET/DEXTR CAP 30MG ER	AMPHETAMINE-DEXTROAMPHETAMINE CAP ER 24HR 30 MG	Tier 1		X		
AMPHET/DEXTR CAP 37.5 ER	AMPHETAMINE-DEXTROAMPHETAMINE 3-BEAD CAP ER 24HR 37.5 MG	Tier 1		X		
AMPHET/DEXTR CAP 50MG ER	AMPHETAMINE-DEXTROAMPHETAMINE 3-BEAD CAP ER 24HR 50 MG	Tier 1		X		
AMPHET/DEXTR CAP 5MG ER	AMPHETAMINE-DEXTROAMPHETAMINE CAP ER 24HR 5 MG	Tier 1		X		
AMPHET/DEXTR TAB 10MG	AMPHETAMINE-DEXTROAMPHETAMINE TAB 10 MG	Tier 1				
AMPHET/DEXTR TAB 12.5MG	AMPHETAMINE-DEXTROAMPHETAMINE TAB 12.5 MG	Tier 1				
AMPHET/DEXTR TAB 15MG	AMPHETAMINE-DEXTROAMPHETAMINE TAB 15 MG	Tier 1				
AMPHET/DEXTR TAB 20MG	AMPHETAMINE-DEXTROAMPHETAMINE TAB 20 MG	Tier 1				
AMPHET/DEXTR TAB 30MG	AMPHETAMINE-DEXTROAMPHETAMINE TAB 30 MG	Tier 1				
AMPHET/DEXTR TAB 5MG	AMPHETAMINE-DEXTROAMPHETAMINE TAB 5 MG	Tier 1				
AMPHET/DEXTR TAB 7.5MG	AMPHETAMINE-DEXTROAMPHETAMINE TAB 7.5 MG	Tier 1				
AMPHETAMINE TAB 10MG	AMPHETAMINE SULFATE TAB 10 MG	Tier 1				
AMPHETAMINE TAB 12.5 ER	AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 12.5 MG	Tier 1		X		
AMPHETAMINE TAB 15.7 ER	AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 15.7 MG	Tier 1		X		
AMPHETAMINE TAB 18.8 ER	AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 18.8 MG	Tier 1		X		
AMPHETAMINE TAB 3.1MG ER	AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 3.1 MG	Tier 1		X		
AMPHETAMINE TAB 5MG	AMPHETAMINE SULFATE TAB 5 MG	Tier 1				
AMPHETAMINE TAB 6.3MG ER	AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 6.3 MG	Tier 1		X		
AMPHETAMINE TAB 9.4MG ER	AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 9.4 MG	Tier 1		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
DEXTROAMPHET CAP 10MG ER	DEXTROAMPHETAMINE SULFATE CAP ER 24HR 10 MG	Tier 1		X		
DEXTROAMPHET CAP 15MG ER	DEXTROAMPHETAMINE SULFATE CAP ER 24HR 15 MG	Tier 1		X		
DEXTROAMPHET CAP 5MG ER	DEXTROAMPHETAMINE SULFATE CAP ER 24HR 5 MG	Tier 1		X		
DEXTROAMPHET SOL 5MG/5ML	DEXTROAMPHETAMINE SULFATE ORAL SOLUTION 5 MG/5ML	Tier 1				
DEXTROAMPHET TAB 10MG	DEXTROAMPHETAMINE SULFATE TAB 10 MG	Tier 1				
DEXTROAMPHET TAB 15MG	DEXTROAMPHETAMINE SULFATE TAB 15 MG	Tier 1				
DEXTROAMPHET TAB 2.5MG	DEXTROAMPHETAMINE SULFATE TAB 2.5 MG	Tier 1				
DEXTROAMPHET TAB 20MG	DEXTROAMPHETAMINE SULFATE TAB 20 MG	Tier 1				
DEXTROAMPHET TAB 30MG	DEXTROAMPHETAMINE SULFATE TAB 30 MG	Tier 1				
DEXTROAMPHET TAB 5MG	DEXTROAMPHETAMINE SULFATE TAB 5 MG	Tier 1				
DEXTROAMPHET TAB 7.5MG	DEXTROAMPHETAMINE SULFATE TAB 7.5 MG	Tier 1				
DYANAVEL XR SUS 2.5MG/ML	AMPHETAMINE EXTENDED RELEASE SUSP 2.5 MG/ML	Tier 3/4		X		
DYANAVEL XR TAB 10MG	AMPHETAMINE TAB EXTENDED RELEASE 10 MG	Tier 3/4		X		
DYANAVEL XR TAB 15MG	AMPHETAMINE TAB EXTENDED RELEASE 15 MG	Tier 3/4		X		
DYANAVEL XR TAB 20MG	AMPHETAMINE TAB EXTENDED RELEASE 20 MG	Tier 3/4		X		
DYANAVEL XR TAB 5MG	AMPHETAMINE TAB EXTENDED RELEASE 5 MG	Tier 3/4		X		
EVEKEO TAB 10MG	AMPHETAMINE SULFATE TAB 10 MG	Tier 3/4				
EVEKEO TAB 5MG	AMPHETAMINE SULFATE TAB 5 MG	Tier 3/4				
LISDEXAMFETA CAP 10MG	LISDEXAMFETAMINE DIMESYLATE CAP 10 MG	Tier 1		X		
LISDEXAMFETA CAP 20MG	LISDEXAMFETAMINE DIMESYLATE CAP 20 MG	Tier 1		X		
LISDEXAMFETA CAP 30MG	LISDEXAMFETAMINE DIMESYLATE CAP 30 MG	Tier 1		X		
LISDEXAMFETA CAP 40MG	LISDEXAMFETAMINE DIMESYLATE CAP 40 MG	Tier 1		X		
LISDEXAMFETA CAP 50MG	LISDEXAMFETAMINE DIMESYLATE CAP 50 MG	Tier 1		X		
LISDEXAMFETA CAP 60MG	LISDEXAMFETAMINE DIMESYLATE CAP 60 MG	Tier 1		X		
LISDEXAMFETA CAP 70MG	LISDEXAMFETAMINE DIMESYLATE CAP 70 MG	Tier 1		X		
LISDEXAMFETA CHW 10MG	LISDEXAMFETAMINE DIMESYLATE CHEW TAB 10 MG	Tier 1		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
LISDEXAMFETA CHW 20MG	LISDEXAMFETAMINE DIMESYLATE CHEW TAB 20 MG	Tier 1		X		
LISDEXAMFETA CHW 30MG	LISDEXAMFETAMINE DIMESYLATE CHEW TAB 30 MG	Tier 1		X		
LISDEXAMFETA CHW 40MG	LISDEXAMFETAMINE DIMESYLATE CHEW TAB 40 MG	Tier 1		X		
LISDEXAMFETA CHW 50MG	LISDEXAMFETAMINE DIMESYLATE CHEW TAB 50 MG	Tier 1		X		
LISDEXAMFETA CHW 60MG	LISDEXAMFETAMINE DIMESYLATE CHEW TAB 60 MG	Tier 1		X		
METHAMPHETAM TAB 5MG	METHAMPHETAMINE HCL TAB 5 MG	Tier 1				
MYDAYIS CAP 12.5MG	AMPHETAMINE-DEXTROAMPHETAMINE 3-BEAD CAP ER 24HR 12.5 MG	Tier 3/4		X		
MYDAYIS CAP 25MG	AMPHETAMINE-DEXTROAMPHETAMINE 3-BEAD CAP ER 24HR 25 MG	Tier 3/4		X		
MYDAYIS CAP 37.5MG	AMPHETAMINE-DEXTROAMPHETAMINE 3-BEAD CAP ER 24HR 37.5 MG	Tier 3/4		X		
MYDAYIS CAP 50MG	AMPHETAMINE-DEXTROAMPHETAMINE 3-BEAD CAP ER 24HR 50 MG	Tier 3/4		X		
PROCENTRA SOL 5MG/5ML	DEXTROAMPHETAMINE SULFATE ORAL SOLUTION 5 MG/5ML	Tier 3				
XELSTRYM PAD 13.5/9HR	DEXTROAMPHETAMINE TD PATCH 13.5 MG/9HR	Tier 3	X	X		
XELSTRYM PAD 18MG/9HR	DEXTROAMPHETAMINE TD PATCH 18 MG/9HR	Tier 3	X	X		
XELSTRYM PAD 4.5MG/9H	DEXTROAMPHETAMINE TD PATCH 4.5 MG/9HR	Tier 3	X	X		
XELSTRYM PAD 9MG/9HR	DEXTROAMPHETAMINE TD PATCH 9 MG/9HR	Tier 3	X	X		
Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines - ADHD Drugs						
APTENSIO XR CAP 10MG	METHYLPHENIDATE HCL CAP ER 24HR 10 MG (XR)	Tier 3/4		X		
APTENSIO XR CAP 15MG	METHYLPHENIDATE HCL CAP ER 24HR 15 MG (XR)	Tier 3/4		X		
APTENSIO XR CAP 20MG	METHYLPHENIDATE HCL CAP ER 24HR 20 MG (XR)	Tier 3/4		X		
APTENSIO XR CAP 30MG	METHYLPHENIDATE HCL CAP ER 24HR 30 MG (XR)	Tier 3/4		X		
APTENSIO XR CAP 40MG	METHYLPHENIDATE HCL CAP ER 24HR 40 MG (XR)	Tier 3/4		X		
APTENSIO XR CAP 50MG	METHYLPHENIDATE HCL CAP ER 24HR 50 MG (XR)	Tier 3/4		X		
APTENSIO XR CAP 60MG	METHYLPHENIDATE HCL CAP ER 24HR 60 MG (XR)	Tier 3/4		X		
ATOMOXETINE CAP 100MG	ATOMOXETINE HCL CAP 100 MG (BASE EQUIV)	Tier 1		X		
ATOMOXETINE CAP 10MG	ATOMOXETINE HCL CAP 10 MG (BASE EQUIV)	Tier 1		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ATOMOXETINE CAP 18MG	ATOMOXETINE HCL CAP 18 MG (BASE EQUIV)	Tier 1		X		
ATOMOXETINE CAP 25MG	ATOMOXETINE HCL CAP 25 MG (BASE EQUIV)	Tier 1		X		
ATOMOXETINE CAP 40MG	ATOMOXETINE HCL CAP 40 MG (BASE EQUIV)	Tier 1		X		
ATOMOXETINE CAP 60MG	ATOMOXETINE HCL CAP 60 MG (BASE EQUIV)	Tier 1		X		
ATOMOXETINE CAP 80MG	ATOMOXETINE HCL CAP 80 MG (BASE EQUIV)	Tier 1		X		
AZSTARYS CAP 26.1-5.2	SERDEXMETHYLPHENIDATE-DEXMETHYLPHENIDATE CAP 26.1-5.2 MG	Tier 2		X	X	
AZSTARYS CAP 39.2-7.8	SERDEXMETHYLPHENIDATE-DEXMETHYLPHENIDATE CAP 39.2-7.8 MG	Tier 2		X	X	
AZSTARYS CAP 52.3-10.	SERDEXMETHYLPHENIDATE-DEXMETHYLPHENIDATE CAP 52.3-10.4 MG	Tier 2		X	X	
CLONIDINE TAB 0.1MG ER	CLONIDINE HCL TAB ER 12HR 0.1 MG	Tier 1				
COTEMPLA XR TAB 17.3MG	METHYLPHENIDATE TAB EXTENDED RELEASE DISINTEGRATING 17.3 MG	Tier 3/4		X		
COTEMPLA XR TAB 25.9MG	METHYLPHENIDATE TAB EXTENDED RELEASE DISINTEGRATING 25.9 MG	Tier 3/4		X		
COTEMPLA XR TAB 8.6MG	METHYLPHENIDATE TAB EXTENDED RELEASE DISINTEGRATING 8.6 MG	Tier 3/4		X		
DEXMETHYLPH TAB 10MG	DEXMETHYLPHENIDATE HCL TAB 10 MG	Tier 1				
DEXMETHYLPH TAB 2.5MG	DEXMETHYLPHENIDATE HCL TAB 2.5 MG	Tier 1				
DEXMETHYLPH TAB 5MG	DEXMETHYLPHENIDATE HCL TAB 5 MG	Tier 1				
DEXMETHYLPHE CAP 10MG ER	DEXMETHYLPHENIDATE HCL CAP ER 24 HR 10 MG	Tier 1		X		
DEXMETHYLPHE CAP 15MG ER	DEXMETHYLPHENIDATE HCL CAP ER 24 HR 15 MG	Tier 1		X		
DEXMETHYLPHE CAP 20MG ER	DEXMETHYLPHENIDATE HCL CAP ER 24 HR 20 MG	Tier 1		X		
DEXMETHYLPHE CAP 25MG ER	DEXMETHYLPHENIDATE HCL CAP ER 24 HR 25 MG	Tier 1		X		
DEXMETHYLPHE CAP 30MG ER	DEXMETHYLPHENIDATE HCL CAP ER 24 HR 30 MG	Tier 1		X		
DEXMETHYLPHE CAP 35MG ER	DEXMETHYLPHENIDATE HCL CAP ER 24 HR 35 MG	Tier 1		X		
DEXMETHYLPHE CAP 40MG ER	DEXMETHYLPHENIDATE HCL CAP ER 24 HR 40 MG	Tier 1		X		
DEXMETHYLPHE CAP 5MG ER	DEXMETHYLPHENIDATE HCL CAP ER 24 HR 5 MG	Tier 1		X		
FOCALIN TAB 10MG	DEXMETHYLPHENIDATE HCL TAB 10 MG	Tier 3/4				
FOCALIN TAB 2.5MG	DEXMETHYLPHENIDATE HCL TAB 2.5 MG	Tier 3/4				
FOCALIN TAB 5MG	DEXMETHYLPHENIDATE HCL TAB 5 MG	Tier 3/4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
GUANFACINE TAB 1MG ER	GUANFACINE HCL TAB ER 24HR 1 MG (BASE EQUIV)	Tier 1				
GUANFACINE TAB 2MG ER	GUANFACINE HCL TAB ER 24HR 2 MG (BASE EQUIV)	Tier 1				
GUANFACINE TAB 3MG ER	GUANFACINE HCL TAB ER 24HR 3 MG (BASE EQUIV)	Tier 1				
GUANFACINE TAB 4MG ER	GUANFACINE HCL TAB ER 24HR 4 MG (BASE EQUIV)	Tier 1				
JORNAY PM CAP 100MG ER	METHYLPHENIDATE HCL CAP DELAYED ER 24HR 100 MG (PM)	Tier 2		X	X	
JORNAY PM CAP 20MG ER	METHYLPHENIDATE HCL CAP DELAYED ER 24HR 20 MG (PM)	Tier 2		X	X	
JORNAY PM CAP 40MG ER	METHYLPHENIDATE HCL CAP DELAYED ER 24HR 40 MG (PM)	Tier 2		X	X	
JORNAY PM CAP 60MG ER	METHYLPHENIDATE HCL CAP DELAYED ER 24HR 60 MG (PM)	Tier 2		X	X	
JORNAY PM CAP 80MG ER	METHYLPHENIDATE HCL CAP DELAYED ER 24HR 80 MG (PM)	Tier 2		X	X	
METHYLIN SOL 10MG/5ML	METHYLPHENIDATE HCL SOLN 10 MG/5ML	Tier 3/4				
METHYLIN SOL 5MG/5ML	METHYLPHENIDATE HCL SOLN 5 MG/5ML	Tier 3/4				
METHYLPHENID CAP 10MG CD	METHYLPHENIDATE HCL CAP ER 10 MG (CD)	Tier 1		X		
METHYLPHENID CAP 10MG LA	METHYLPHENIDATE HCL CAP ER 24HR 10 MG (LA)	Tier 1		X		
METHYLPHENID CAP 10MG XR	METHYLPHENIDATE HCL CAP ER 24HR 10 MG (XR)	Tier 1		X		
METHYLPHENID CAP 15MG XR	METHYLPHENIDATE HCL CAP ER 24HR 15 MG (XR)	Tier 1		X		
METHYLPHENID CAP 20MG CD	METHYLPHENIDATE HCL CAP ER 20 MG (CD)	Tier 1		X		
METHYLPHENID CAP 20MG LA	METHYLPHENIDATE HCL CAP ER 24HR 20 MG (LA)	Tier 1		X		
METHYLPHENID CAP 20MG XR	METHYLPHENIDATE HCL CAP ER 24HR 20 MG (XR)	Tier 1		X		
METHYLPHENID CAP 30MG CD	METHYLPHENIDATE HCL CAP ER 30 MG (CD)	Tier 1		X		
METHYLPHENID CAP 30MG LA	METHYLPHENIDATE HCL CAP ER 24HR 30 MG (LA)	Tier 1		X		
METHYLPHENID CAP 30MG XR	METHYLPHENIDATE HCL CAP ER 24HR 30 MG (XR)	Tier 1		X		
METHYLPHENID CAP 40MG CD	METHYLPHENIDATE HCL CAP ER 40 MG (CD)	Tier 1		X		
METHYLPHENID CAP 40MG LA	METHYLPHENIDATE HCL CAP ER 24HR 40 MG (LA)	Tier 1		X		
METHYLPHENID CAP 40MG XR	METHYLPHENIDATE HCL CAP ER 24HR 40 MG (XR)	Tier 1		X		
METHYLPHENID CAP 50MG CD	METHYLPHENIDATE HCL CAP ER 50 MG (CD)	Tier 1		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
METHYLPHENID CAP 50MG XR	METHYLPHENIDATE HCL CAP ER 24HR 50 MG (XR)	Tier 1		X		
METHYLPHENID CAP 60MG CD	METHYLPHENIDATE HCL CAP ER 60 MG (CD)	Tier 1		X		
METHYLPHENID CAP 60MG LA	METHYLPHENIDATE HCL CAP ER 24HR 60 MG (LA)	Tier 1		X		
METHYLPHENID CAP 60MG XR	METHYLPHENIDATE HCL CAP ER 24HR 60 MG (XR)	Tier 1		X		
METHYLPHENID CHW 10MG	METHYLPHENIDATE HCL CHEW TAB 10 MG	Tier 1				
METHYLPHENID CHW 2.5MG	METHYLPHENIDATE HCL CHEW TAB 2.5 MG	Tier 1				
METHYLPHENID CHW 5MG	METHYLPHENIDATE HCL CHEW TAB 5 MG	Tier 1				
METHYLPHENID PAD 10MG/9HR	METHYLPHENIDATE TD PATCH 10 MG/9HR	Tier 1		X		
METHYLPHENID PAD 15MG/9HR	METHYLPHENIDATE TD PATCH 15 MG/9HR	Tier 1		X		
METHYLPHENID PAD 20MG/9HR	METHYLPHENIDATE TD PATCH 20 MG/9HR	Tier 1		X		
METHYLPHENID PAD 30MG/9HR	METHYLPHENIDATE TD PATCH 30 MG/9HR	Tier 1		X		
METHYLPHENID SOL 10MG/5ML	METHYLPHENIDATE HCL SOLN 10 MG/5ML	Tier 1				
METHYLPHENID SOL 5MG/5ML	METHYLPHENIDATE HCL SOLN 5 MG/5ML	Tier 1				
METHYLPHENID TAB 10MG	METHYLPHENIDATE HCL TAB 10 MG	Tier 1				
METHYLPHENID TAB 10MG ER	METHYLPHENIDATE HCL TAB ER 10 MG	Tier 1		X		
METHYLPHENID TAB 18MG OSM	METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 18 MG	Tier 1		X		
METHYLPHENID TAB 20MG	METHYLPHENIDATE HCL TAB 20 MG	Tier 1				
METHYLPHENID TAB 20MG ER	METHYLPHENIDATE HCL TAB ER 20 MG	Tier 1		X		
METHYLPHENID TAB 27MG OSM	METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 27 MG	Tier 1		X		
METHYLPHENID TAB 36MG OSM	METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 36 MG	Tier 1		X		
METHYLPHENID TAB 54MG OSM	METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 54 MG	Tier 1		X		
METHYLPHENID TAB 5MG	METHYLPHENIDATE HCL TAB 5 MG	Tier 1				
ONYDA XR SUS 0.1MG/ML	CLONIDINE HCL EXTENDED RELEASE SUSP 0.1 MG/ML	Tier 3		X		
QUILLICHEW CHW 20MG ER	METHYLPHENIDATE HCL CHEW TAB EXTENDED RELEASE 20 MG	Tier 3/4		X		
QUILLICHEW CHW 30MG ER	METHYLPHENIDATE HCL CHEW TAB EXTENDED RELEASE 30 MG	Tier 3/4		X		
QUILLICHEW CHW 40MG ER	METHYLPHENIDATE HCL CHEW TAB EXTENDED RELEASE 40 MG	Tier 3/4		X		
QUILLIVANT SUS 25MG/5ML	METHYLPHENIDATE HCL FOR ER SUSP 25 MG/5ML (5 MG/ML)	Tier 3/4		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
Benign Prostatic Hypertrophy Agents - Prostate Drugs						
ALFUZOSIN TAB 10MG ER	ALFUZOSIN HCL TAB ER 24HR 10 MG	Tier 1				
CARDURA XL TAB 4MG	DOXAZOSIN MESYLATE TAB ER 24 HR 4 MG (BASE EQUIV)	Tier 3				
CARDURA XL TAB 8MG	DOXAZOSIN MESYLATE TAB ER 24 HR 8 MG (BASE EQUIV)	Tier 3				
DUTAST/TAMSU CAP 0.5-0.4	DUTASTERIDE-TAMSULOSIN HCL CAP 0.5-0.4 MG	Tier 1				
DUTASTERIDE CAP 0.5MG	DUTASTERIDE CAP 0.5 MG	Tier 1				
ENTADFI CAP 5-5MG	FINASTERIDE-TADALAFIL CAP 5-5 MG	Tier 3/4		X		
FINASTERIDE TAB 5MG	FINASTERIDE TAB 5 MG	Tier 1				
SILODOSIN CAP 4MG	SILODOSIN CAP 4 MG	Tier 1				
SILODOSIN CAP 8MG	SILODOSIN CAP 8 MG	Tier 1				
TADALAFIL TAB 2.5MG	TADALAFIL TAB 2.5 MG	Tier 1		X		
TADALAFIL TAB 5MG	TADALAFIL TAB 5 MG	Tier 1		X		
TAMSULOSIN CAP 0.4MG	TAMSULOSIN HCL CAP 0.4 MG	Tier 1				
TERAZOSIN CAP 10MG	TERAZOSIN HCL CAP 10 MG (BASE EQUIVALENT)	Tier 1				
TERAZOSIN CAP 1MG	TERAZOSIN HCL CAP 1 MG (BASE EQUIVALENT)	Tier 1				
TERAZOSIN CAP 2MG	TERAZOSIN HCL CAP 2 MG (BASE EQUIVALENT)	Tier 1				
TERAZOSIN CAP 5MG	TERAZOSIN HCL CAP 5 MG (BASE EQUIVALENT)	Tier 1				
TEZRULY SOL 1MG/ML	TERAZOSIN HCL ORAL SOLN 1 MG/ML (BASE EQUIVALENT)	Tier 3/4	X			
Benzodiazepines - Anxiety Drugs						
ALPRAZOLAM CON 1 MG/ML	ALPRAZOLAM CONC 1 MG/ML	Tier 1				
ALPRAZOLAM TAB 0.25 ODT	ALPRAZOLAM ORALLY DISINTEGRATING TAB 0.25 MG	Tier 1				
ALPRAZOLAM TAB 0.25MG	ALPRAZOLAM TAB 0.25 MG	Tier 1				
ALPRAZOLAM TAB 0.5MG	ALPRAZOLAM TAB 0.5 MG	Tier 1				
ALPRAZOLAM TAB 0.5MG ER	ALPRAZOLAM TAB ER 24HR 0.5 MG	Tier 1				
ALPRAZOLAM TAB 0.5MG OD	ALPRAZOLAM ORALLY DISINTEGRATING TAB 0.5 MG	Tier 1				
ALPRAZOLAM TAB 0.5MG XR	ALPRAZOLAM TAB ER 24HR 0.5 MG	Tier 1				
ALPRAZOLAM TAB 1MG	ALPRAZOLAM TAB 1 MG	Tier 1				
ALPRAZOLAM TAB 1MG ER	ALPRAZOLAM TAB ER 24HR 1 MG	Tier 1				
ALPRAZOLAM TAB 1MG ODT	ALPRAZOLAM ORALLY DISINTEGRATING TAB 1 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ALPRAZOLAM TAB 1MG XR	ALPRAZOLAM TAB ER 24HR 1 MG	Tier 1				
ALPRAZOLAM TAB 2MG	ALPRAZOLAM TAB 2 MG	Tier 1				
ALPRAZOLAM TAB 2MG ER	ALPRAZOLAM TAB ER 24HR 2 MG	Tier 1				
ALPRAZOLAM TAB 2MG ODT	ALPRAZOLAM ORALLY DISINTEGRATING TAB 2 MG	Tier 1				
ALPRAZOLAM TAB 2MG XR	ALPRAZOLAM TAB ER 24HR 2 MG	Tier 1				
ALPRAZOLAM TAB 3MG ER	ALPRAZOLAM TAB ER 24HR 3 MG	Tier 1				
ALPRAZOLAM TAB 3MG XR	ALPRAZOLAM TAB ER 24HR 3 MG	Tier 1				
CHLORDIAZEP CAP 10MG	CHLORDIAZEPOXIDE HCL CAP 10 MG	Tier 1				
CHLORDIAZEP CAP 25MG	CHLORDIAZEPOXIDE HCL CAP 25 MG	Tier 1				
CHLORDIAZEP CAP 5MG	CHLORDIAZEPOXIDE HCL CAP 5 MG	Tier 1				
CLONAZEP ODT TAB 0.125MG	CLONAZEPAM ORALLY DISINTEGRATING TAB 0.125 MG	Tier 1				
CLONAZEP ODT TAB 0.25MG	CLONAZEPAM ORALLY DISINTEGRATING TAB 0.25 MG	Tier 1				
CLONAZEP ODT TAB 0.5MG	CLONAZEPAM ORALLY DISINTEGRATING TAB 0.5 MG	Tier 1				
CLONAZEP ODT TAB 1MG	CLONAZEPAM ORALLY DISINTEGRATING TAB 1 MG	Tier 1				
CLONAZEP ODT TAB 2MG	CLONAZEPAM ORALLY DISINTEGRATING TAB 2 MG	Tier 1				
CLONAZEPAM TAB 0.5MG	CLONAZEPAM TAB 0.5 MG	Tier 1				
CLONAZEPAM TAB 1MG	CLONAZEPAM TAB 1 MG	Tier 1				
CLONAZEPAM TAB 2MG	CLONAZEPAM TAB 2 MG	Tier 1				
CLORAZ DIPOT TAB 15MG	CLORAZEPATE DIPOTASSIUM TAB 15 MG	Tier 1				
CLORAZ DIPOT TAB 3.75MG	CLORAZEPATE DIPOTASSIUM TAB 3.75 MG	Tier 1				
CLORAZ DIPOT TAB 7.5MG	CLORAZEPATE DIPOTASSIUM TAB 7.5 MG	Tier 1				
DIAZEPAM CON 25MG/5ML	DIAZEPAM CONC 5 MG/ML	Tier 1				
DIAZEPAM CON 5MG/ML	DIAZEPAM CONC 5 MG/ML	Tier 1				
DIAZEPAM SOL 5MG/5ML	DIAZEPAM ORAL SOLN 1 MG/ML	Tier 1				
DIAZEPAM TAB 10MG	DIAZEPAM TAB 10 MG	Tier 1				
DIAZEPAM TAB 2MG	DIAZEPAM TAB 2 MG	Tier 1				
DIAZEPAM TAB 5MG	DIAZEPAM TAB 5 MG	Tier 1				
ESTAZOLAM TAB 1MG	ESTAZOLAM TAB 1 MG	Tier 1				
ESTAZOLAM TAB 2MG	ESTAZOLAM TAB 2 MG	Tier 1				
HALCION TAB 0.25MG	TRIAZOLAM TAB 0.25 MG	Tier 3/4				
LORAZEPAM CON 2MG/ML	LORAZEPAM CONC 2 MG/ML	Tier 1				
LORAZEPAM TAB 0.5MG	LORAZEPAM TAB 0.5 MG	Tier 1				
LORAZEPAM TAB 1MG	LORAZEPAM TAB 1 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
LORAZEPAM TAB 2MG	LORAZEPAM TAB 2 MG	Tier 1				
LOREEV XR CAP 1.5MG	LORAZEPAM CAP ER 24HR SPRINKLE 1.5 MG	Tier 3/4				
LOREEV XR CAP 1MG	LORAZEPAM CAP ER 24HR SPRINKLE 1 MG	Tier 3/4				
LOREEV XR CAP 2MG	LORAZEPAM CAP ER 24HR SPRINKLE 2 MG	Tier 3/4				
LOREEV XR CAP 3MG	LORAZEPAM CAP ER 24HR SPRINKLE 3 MG	Tier 3/4				
MIDAZOLAM SYP 2MG/ML	MIDAZOLAM HCL SYRUP 2 MG/ML (BASE EQUIVALENT)	Tier 1				
OXAZEPAM CAP 10MG	OXAZEPAM CAP 10 MG	Tier 1				
OXAZEPAM CAP 15MG	OXAZEPAM CAP 15 MG	Tier 1				
OXAZEPAM CAP 30MG	OXAZEPAM CAP 30 MG	Tier 1				
TRIAZOLAM TAB 0.125MG	TRIAZOLAM TAB 0.125 MG	Tier 1				
TRIAZOLAM TAB 0.25MG	TRIAZOLAM TAB 0.25 MG	Tier 1				
Beta-adrenergic Blocking Agents - Blood Pressure Drugs						
ACEBUTOLOL CAP 200MG	ACEBUTOLOL HCL CAP 200 MG	Tier 1				
ACEBUTOLOL CAP 400MG	ACEBUTOLOL HCL CAP 400 MG	Tier 1				
ATENOLOL TAB 100MG	ATENOLOL TAB 100 MG	Tier 1				
ATENOLOL TAB 25MG	ATENOLOL TAB 25 MG	Tier 1				
ATENOLOL TAB 50MG	ATENOLOL TAB 50 MG	Tier 1				
BETAXOLOL TAB 10MG	BETAXOLOL HCL TAB 10 MG	Tier 1				
BETAXOLOL TAB 20MG	BETAXOLOL HCL TAB 20 MG	Tier 1				
BISOPROLOL FUM TAB 10MG	BISOPROLOL FUMARATE TAB 10 MG	Tier 1				
BISOPROLOL FUM TAB 2.5MG	BISOPROLOL FUMARATE TAB 2.5 MG	Tier 1				
BISOPROLOL FUM TAB 5MG	BISOPROLOL FUMARATE TAB 5 MG	Tier 1				
CARVEDILOL CAP 10MG ER	CARVEDILOL PHOSPHATE CAP ER 24HR 10 MG	Tier 1				
CARVEDILOL CAP 20MG ER	CARVEDILOL PHOSPHATE CAP ER 24HR 20 MG	Tier 1				
CARVEDILOL CAP 40MG ER	CARVEDILOL PHOSPHATE CAP ER 24HR 40 MG	Tier 1				
CARVEDILOL CAP 80MG ER	CARVEDILOL PHOSPHATE CAP ER 24HR 80 MG	Tier 1				
CARVEDILOL TAB 12.5MG	CARVEDILOL TAB 12.5 MG	Tier 1				
CARVEDILOL TAB 25MG	CARVEDILOL TAB 25 MG	Tier 1				
CARVEDILOL TAB 3.125MG	CARVEDILOL TAB 3.125 MG	Tier 1				
CARVEDILOL TAB 6.25MG	CARVEDILOL TAB 6.25 MG	Tier 1				
HEMANGEOL SOL 4.28/ML	PROPRANOLOL HCL ORAL SOLN 4.28 MG/ML (3.75 MG/ML BASE EQUIV)	Tier 3				
KAPSPARGO CAP 100MG	METOPROLOL SUCC CAP ER 24HR SPRINKLE 100 MG (TARTRATE EQUIV)	Tier 3/4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
KAPSPARGO CAP 200MG	METOPROLOL SUCC CAP ER 24HR SPRINKLE 200 MG (TARTRATE EQUIV)	Tier 3/4				
KAPSPARGO CAP 25MG	METOPROLOL SUCC CAP ER 24HR SPRINKLE 25 MG (TARTRATE EQUIV)	Tier 3/4				
KAPSPARGO CAP 50MG	METOPROLOL SUCC CAP ER 24HR SPRINKLE 50 MG (TARTRATE EQUIV)	Tier 3/4				
LABETALOL TAB 100MG	LABETALOL HCL TAB 100 MG	Tier 1				
LABETALOL TAB 200MG	LABETALOL HCL TAB 200 MG	Tier 1				
LABETALOL TAB 300MG	LABETALOL HCL TAB 300 MG	Tier 1				
LABETALOL TAB 400MG	LABETALOL HCL TAB 400 MG	Tier 1				
LOPRESSOR SOL 10MG/ML	METOPROLOL TARTRATE ORAL SOLN 10 MG/ML	Tier 3/4	X			
METOPROL SUC TAB 100MG ER	METOPROLOL SUCCINATE TAB ER 24HR 100 MG (TARTRATE EQUIV)	Tier 1				
METOPROL SUC TAB 200MG ER	METOPROLOL SUCCINATE TAB ER 24HR 200 MG (TARTRATE EQUIV)	Tier 1				
METOPROL SUC TAB 25MG ER	METOPROLOL SUCCINATE TAB ER 24HR 25 MG (TARTRATE EQUIV)	Tier 1				
METOPROL SUC TAB 50MG ER	METOPROLOL SUCCINATE TAB ER 24HR 50 MG (TARTRATE EQUIV)	Tier 1				
METOPROL TAR TAB 100MG	METOPROLOL TARTRATE TAB 100 MG	Tier 1				
METOPROL TAR TAB 25MG	METOPROLOL TARTRATE TAB 25 MG	Tier 1				
METOPROL TAR TAB 37.5MG	METOPROLOL TARTRATE TAB 37.5 MG	Tier 1				
METOPROL TAR TAB 50MG	METOPROLOL TARTRATE TAB 50 MG	Tier 1				
METOPROL TAR TAB 75MG	METOPROLOL TARTRATE TAB 75 MG	Tier 1				
NADOLOL TAB 20MG	NADOLOL TAB 20 MG	Tier 1				
NADOLOL TAB 40MG	NADOLOL TAB 40 MG	Tier 1				
NADOLOL TAB 80MG	NADOLOL TAB 80 MG	Tier 1				
NEBIVOLOL TAB 10MG	NEBIVOLOL HCL TAB 10 MG (BASE EQUIVALENT)	Tier 1				
NEBIVOLOL TAB 2.5MG	NEBIVOLOL HCL TAB 2.5 MG (BASE EQUIVALENT)	Tier 1				
NEBIVOLOL TAB 20MG	NEBIVOLOL HCL TAB 20 MG (BASE EQUIVALENT)	Tier 1				
NEBIVOLOL TAB 5MG	NEBIVOLOL HCL TAB 5 MG (BASE EQUIVALENT)	Tier 1				
PINDOLOL TAB 10MG	PINDOLOL TAB 10 MG	Tier 1				
PINDOLOL TAB 5MG	PINDOLOL TAB 5 MG	Tier 1				
PROPRANOLOL CAP 120MG ER	PROPRANOLOL HCL CAP ER 24HR 120 MG	Tier 1				
PROPRANOLOL CAP 160MG ER	PROPRANOLOL HCL CAP ER 24HR 160 MG	Tier 1				
PROPRANOLOL CAP 60MG ER	PROPRANOLOL HCL CAP ER 24HR 60 MG	Tier 1				
PROPRANOLOL CAP 80MG ER	PROPRANOLOL HCL CAP ER 24HR 80 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PROPRANOLOL SOL 20MG/5ML	PROPRANOLOL HCL ORAL SOLN 20 MG/5ML	Tier 1				
PROPRANOLOL SOL 40MG/5ML	PROPRANOLOL HCL ORAL SOLN 40 MG/5ML	Tier 1				
PROPRANOLOL TAB 10MG	PROPRANOLOL HCL TAB 10 MG	Tier 1				
PROPRANOLOL TAB 20MG	PROPRANOLOL HCL TAB 20 MG	Tier 1				
PROPRANOLOL TAB 40MG	PROPRANOLOL HCL TAB 40 MG	Tier 1				
PROPRANOLOL TAB 60MG	PROPRANOLOL HCL TAB 60 MG	Tier 1				
PROPRANOLOL TAB 80MG	PROPRANOLOL HCL TAB 80 MG	Tier 1				
TIMOLOL MAL TAB 10MG	TIMOLOL MALEATE TAB 10 MG	Tier 1				
TIMOLOL MAL TAB 20MG	TIMOLOL MALEATE TAB 20 MG	Tier 1				
TIMOLOL MAL TAB 5MG	TIMOLOL MALEATE TAB 5 MG	Tier 1				
Beta-Lactam, Cephalosporins - Antibiotics						
CEFACLOL CAP 250MG	CEFACLOL CAP 250 MG	Tier 1				
CEFACLOL CAP 500MG	CEFACLOL CAP 500 MG	Tier 1				
CEFACLOL SUS 250/5ML	CEFACLOL FOR SUSP 250 MG/5ML	Tier 1				
CEFACLOL ER TAB 500MG	CEFACLOL MONOHYDRATE TAB ER 12HR 500 MG	Tier 1				
CEFADROXIL CAP 500MG	CEFADROXIL CAP 500 MG	Tier 1				
CEFADROXIL SUS 250/5ML	CEFADROXIL FOR SUSP 250 MG/5ML	Tier 1				
CEFADROXIL SUS 500/5ML	CEFADROXIL FOR SUSP 500 MG/5ML	Tier 1				
CEFADROXIL TAB 1GM	CEFADROXIL TAB 1 GM	Tier 1				
CEFDINIR CAP 300MG	CEFDINIR CAP 300 MG	Tier 1				
CEFDINIR SUS 125/5ML	CEFDINIR FOR SUSP 125 MG/5ML	Tier 1				
CEFDINIR SUS 250/5ML	CEFDINIR FOR SUSP 250 MG/5ML	Tier 1				
CEFIXIME CAP 400MG	CEFIXIME CAP 400 MG	Tier 1				
CEFIXIME SUS 100/5ML	CEFIXIME FOR SUSP 100 MG/5ML	Tier 1				
CEFIXIME SUS 200/5ML	CEFIXIME FOR SUSP 200 MG/5ML	Tier 1				
CEFIXIME TAB 400MG	CEFIXIME TAB 400 MG	Tier 3/4				
CEFPODO PROX SUS 100/5ML	CEFPODOXIME PROXETIL FOR SUSP 100 MG/5ML	Tier 1				
CEFPODO PROX SUS 50MG/5ML	CEFPODOXIME PROXETIL FOR SUSP 50 MG/5ML	Tier 1				
CEFPODOXIME TAB 100MG	CEFPODOXIME PROXETIL TAB 100 MG	Tier 1				
CEFPODOXIME TAB 200MG	CEFPODOXIME PROXETIL TAB 200 MG	Tier 1				
CEFPROZIL SUS 125/5ML	CEFPROZIL FOR SUSP 125 MG/5ML	Tier 1				
CEFPROZIL SUS 250/5ML	CEFPROZIL FOR SUSP 250 MG/5ML	Tier 1				
CEFPROZIL TAB 250MG	CEFPROZIL TAB 250 MG	Tier 1				
CEFPROZIL TAB 500MG	CEFPROZIL TAB 500 MG	Tier 1				
CEFUROXIME TAB 250MG	CEFUROXIME AXETIL TAB 250 MG	Tier 1				
CEFUROXIME TAB 500MG	CEFUROXIME AXETIL TAB 500 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
CEPHALEXIN CAP 250MG	CEPHALEXIN CAP 250 MG	Tier 1				
CEPHALEXIN CAP 500MG	CEPHALEXIN CAP 500 MG	Tier 1				
CEPHALEXIN CAP 750MG	CEPHALEXIN CAP 750 MG	Tier 1				
CEPHALEXIN SUS 125/5ML	CEPHALEXIN FOR SUSP 125 MG/5ML	Tier 1				
CEPHALEXIN SUS 250/5ML	CEPHALEXIN FOR SUSP 250 MG/5ML	Tier 1				
CEPHALEXIN TAB 250MG	CEPHALEXIN TAB 250 MG	Tier 1				
CEPHALEXIN TAB 500MG	CEPHALEXIN TAB 500 MG	Tier 1				
Beta-Lactam, Penicillins - Antibiotics						
AMOX-POT CLA TAB ER	AMOXICILLIN & K CLAVULANATE TAB ER 12HR 1000-62.5 MG	Tier 1				
AMOX/K CLAV CHW 200MG	AMOXICILLIN & K CLAVULANATE CHEW TAB 200-28.5 MG	Tier 1				
AMOX/K CLAV CHW 400MG	AMOXICILLIN & K CLAVULANATE CHEW TAB 400-57 MG	Tier 1				
AMOX/K CLAV SUS 200/5ML	AMOXICILLIN & K CLAVULANATE FOR SUSP 200-28.5 MG/5ML	Tier 1				
AMOX/K CLAV SUS 250/5ML	AMOXICILLIN & K CLAVULANATE FOR SUSP 250-62.5 MG/5ML	Tier 1				
AMOX/K CLAV SUS 400/5ML	AMOXICILLIN & K CLAVULANATE FOR SUSP 400-57 MG/5ML	Tier 1				
AMOX/K CLAV SUS 600/5ML	AMOXICILLIN & K CLAVULANATE FOR SUSP 600-42.9 MG/5ML	Tier 1				
AMOX/K CLAV TAB 250-125	AMOXICILLIN & K CLAVULANATE TAB 250-125 MG	Tier 1				
AMOX/K CLAV TAB 500-125	AMOXICILLIN & K CLAVULANATE TAB 500-125 MG	Tier 1				
AMOX/K CLAV TAB 875-125	AMOXICILLIN & K CLAVULANATE TAB 875-125 MG	Tier 1				
AMOXICILLIN CAP 250MG	AMOXICILLIN (TRIHYDRATE) CAP 250 MG	Tier 1				
AMOXICILLIN CAP 500MG	AMOXICILLIN (TRIHYDRATE) CAP 500 MG	Tier 1				
AMOXICILLIN CHW 125MG	AMOXICILLIN (TRIHYDRATE) CHEW TAB 125 MG	Tier 1				
AMOXICILLIN CHW 250MG	AMOXICILLIN (TRIHYDRATE) CHEW TAB 250 MG	Tier 1				
AMOXICILLIN SUS 125/5ML	AMOXICILLIN (TRIHYDRATE) FOR SUSP 125 MG/5ML	Tier 1				
AMOXICILLIN SUS 200/5ML	AMOXICILLIN (TRIHYDRATE) FOR SUSP 200 MG/5ML	Tier 1				
AMOXICILLIN SUS 250/5ML	AMOXICILLIN (TRIHYDRATE) FOR SUSP 250 MG/5ML	Tier 1				
AMOXICILLIN SUS 400/5ML	AMOXICILLIN (TRIHYDRATE) FOR SUSP 400 MG/5ML	Tier 1				
AMOXICILLIN TAB 500MG	AMOXICILLIN (TRIHYDRATE) TAB 500 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
AMOXICILLIN TAB 875MG	AMOXICILLIN (TRIHYDRATE) TAB 875 MG	Tier 1				
AMPICILLIN CAP 500MG	AMPICILLIN CAP 500 MG	Tier 1				
AUGMENTIN SUS 125/5ML	AMOXICILLIN & K CLAVULANATE FOR SUSP 125-31.25 MG/5ML	Tier 3/4				
DICLOXACILL CAP 250MG	DICLOXACILLIN SODIUM CAP 250 MG	Tier 1				
DICLOXACILL CAP 500MG	DICLOXACILLIN SODIUM CAP 500 MG	Tier 1				
PENICILLN VK SOL 125/5ML	PENICILLIN V POTASSIUM FOR SOLN 125 MG/5ML	Tier 1				
PENICILLN VK SOL 250/5ML	PENICILLIN V POTASSIUM FOR SOLN 250 MG/5ML	Tier 1				
PENICILLN VK TAB 250MG	PENICILLIN V POTASSIUM TAB 250 MG	Tier 1				
PENICILLN VK TAB 500MG	PENICILLIN V POTASSIUM TAB 500 MG	Tier 1				
Blood Formation Modifiers - Blood Formation Drugs						
ALVAIZ TAB 18MG	ELTROMBOPAG CHOLINE TAB 18 MG (BASE EQUIV)	Tier 3/4	X			
ALVAIZ TAB 36MG	ELTROMBOPAG CHOLINE TAB 36 MG (BASE EQUIV)	Tier 3/4	X			
ALVAIZ TAB 54MG	ELTROMBOPAG CHOLINE TAB 54 MG (BASE EQUIV)	Tier 3/4	X			
ALVAIZ TAB 9MG	ELTROMBOPAG CHOLINE TAB 9 MG (BASE EQUIV)	Tier 3/4	X			
ANAGRELIDE CAP 0.5MG	ANAGRELIDE HCL CAP 0.5 MG	Tier 1				
ANAGRELIDE CAP 1MG	ANAGRELIDE HCL CAP 1 MG	Tier 1				
ARANESP INJ 100MCG	DARBEPOETIN ALFA SOLN INJ 100 MCG/ML	Tier 2		X		
ARANESP INJ 100MCG	DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 100 MCG/0.5ML	Tier 2		X		
ARANESP INJ 10MCG	DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 10 MCG/0.4ML	Tier 2		X		
ARANESP INJ 150MCG	DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 150 MCG/0.3ML	Tier 2		X		
ARANESP INJ 200MCG	DARBEPOETIN ALFA SOLN INJ 200 MCG/ML	Tier 2		X		
ARANESP INJ 200MCG	DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 200 MCG/0.4ML	Tier 2		X		
ARANESP INJ 25MCG	DARBEPOETIN ALFA SOLN INJ 25 MCG/ML	Tier 2		X		
ARANESP INJ 25MCG	DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 25 MCG/0.42ML	Tier 2		X		
ARANESP INJ 300MCG	DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 300 MCG/0.6ML	Tier 2		X		
ARANESP INJ 40MCG	DARBEPOETIN ALFA SOLN INJ 40 MCG/ML	Tier 2		X		
ARANESP INJ 40MCG	DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 40 MCG/0.4ML	Tier 2		X		
ARANESP INJ 500MCG	DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 500 MCG/ML	Tier 2		X		

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

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
RETACRIT INJ 4000UNIT	EPOETIN ALFA-EPBX INJ 4000 UNIT/ML	Tier 2		X		
UDENYCA INJ 6MG/.6ML	PEGFILGRASTIM-CBQV SOLN PREFILLED SYRINGE 6 MG/0.6ML	Tier 2				
UDENYCA INJ 6MG/0.6	PEGFILGRASTIM-CBQV SOLN AUTO-INJECTOR 6 MG/0.6ML	Tier 2				
XOLREMDI CAP 100MG	MAVORIXAFOR CAP 100 MG	Tier 2	X	X		
ZARXIO INJ 300/0.5	FILGRASTIM-SNDZ SOLN PREFILLED SYRINGE 300 MCG/0.5ML	Tier 2				
ZARXIO INJ 480/0.8	FILGRASTIM-SNDZ SOLN PREFILLED SYRINGE 480 MCG/0.8ML	Tier 2				
Blood Products and Modifiers, Other						
VAFSEO TAB 150MG	VADADUSTAT TAB 150 MG	Tier 3/4	X	X		
VAFSEO TAB 300MG	VADADUSTAT TAB 300 MG	Tier 3/4	X	X		
Bronchodilators, Anticholinergic - Asthma/Lung Drugs						
ATROVENT HFA AER 17MCG	IPRATROPIUM BROMIDE HFA INHAL AEROSOL 17 MCG/ACT	Tier 2		X		
IPRATROPIUM SOL 0.02%INH	IPRATROPIUM BROMIDE INHAL SOLN 0.02%	Tier 1				
IPRATROPIUM SPR 0.03%	IPRATROPIUM BROMIDE NASAL SOLN 0.03% (21 MCG/SPRAY)	Tier 1				
IPRATROPIUM SPR 0.06%	IPRATROPIUM BROMIDE NASAL SOLN 0.06% (42 MCG/SPRAY)	Tier 1				
SPIRIVA CAP HANDIHLR	TIOTROPIUM BROMIDE INHAL CAP 18 MCG (BASE EQUIV)	Tier 1		X		
SPIRIVA RESP AER 1.25MCG	TIOTROPIUM BROMIDE INHAL AEROSOL 1.25 MCG/ACT	Tier 2		X		
SPIRIVA RESP AER 2.5MCG	TIOTROPIUM BROMIDE INHAL AEROSOL 2.5 MCG/ACT	Tier 2		X		
YUPELRI SOL 175/3ML	REVEFENACIN INHALATION SOLUTION 175 MCG/3ML	Tier 3/4	X	X		
Bronchodilators, Sympathomimetic						
OHTUVAYRE SUS 3/2.5ML	ENSIFENTRINE INHALATION SUSP 3 MG/2.5ML	Tier 3/4	X	X		
Bronchodilators, Sympathomimetic - Asthma/Lung Drugs						
ALBUTEROL AER HFA	ALBUTEROL SULFATE INHAL AERO 108 MCG/ACT (90MCG BASE EQUIV)	Tier 1				
ALBUTEROL NEB 0.083%	ALBUTEROL SULFATE SOLN NEBU 0.083% (2.5 MG/3ML)	Tier 1				
ALBUTEROL NEB 0.5%	ALBUTEROL SULFATE SOLN NEBU 0.5% (5 MG/ML)	Tier 1				
ALBUTEROL NEB 0.5%	ALBUTEROL SULFATE SOLN NEBU 0.5% (5 MG/ML)	Tier 3				
ALBUTEROL NEB 0.63MG/3	ALBUTEROL SULFATE SOLN NEBU 0.63 MG/3ML (BASE EQUIV)	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ALBUTEROL NEB 1.25MG/3	ALBUTEROL SULFATE SOLN NEBU 1.25 MG/3ML (BASE EQUIV)	Tier 1				
ALBUTEROL SYP 2MG/5ML	ALBUTEROL SULFATE SYRUP 2 MG/5ML	Tier 1				
ALBUTEROL TAB 2MG	ALBUTEROL SULFATE TAB 2 MG	Tier 1				
ALBUTEROL TAB 4MG	ALBUTEROL SULFATE TAB 4 MG	Tier 1				
ARFORMOTEROL NEB 15/2ML	ARFORMOTEROL TARTRATE SOLN NEBU 15 MCG/2ML (BASE EQUIV)	Tier 1		X		
AUVI-Q INJ 0.15MG	EPINEPHRINE SOLUTION AUTO-INJECTOR 0.15 MG/0.15ML (1:1000)	Tier 2				
AUVI-Q INJ 0.1MG	EPINEPHRINE SOLUTION AUTO-INJECTOR 0.1 MG/0.1ML	Tier 2				
AUVI-Q INJ 0.3MG	EPINEPHRINE SOLUTION AUTO-INJECTOR 0.3 MG/0.3ML (1:1000)	Tier 2				
BROVANA NEB 15MCG	ARFORMOTEROL TARTRATE SOLN NEBU 15 MCG/2ML (BASE EQUIV)	Tier 3/4		X		
EPINEPHRINE INJ 0.15MG	EPINEPHRINE SOLUTION AUTO-INJECTOR 0.15 MG/0.3ML (1:2000)	Tier 1				
EPINEPHRINE INJ 0.15MG	EPINEPHRINE SOLUTION AUTO-INJECTOR 0.15 MG/0.15ML (1:1000)	Tier 1				
EPINEPHRINE INJ 0.3MG	EPINEPHRINE SOLUTION AUTO-INJECTOR 0.3 MG/0.3ML (1:1000)	Tier 1				
EPINEPHRINE INJ 0.3MG	EPINEPHRINE SOLUTION PREFILLED SYRINGE 0.3 MG/0.3ML (1:1000)	Tier 2				
FORMOTEROL NEB 20/2ML	FORMOTEROL FUMARATE SOLN NEBU 20 MCG/2ML	Tier 1		X		
LEVALBUTEROL AER 45/ACT	LEVALBUTEROL TARTRATE INHAL AEROSOL 45 MCG/ACT (BASE EQUIV)	Tier 3				
LEVALBUTEROL NEB 0.31MG	LEVALBUTEROL HCL SOLN NEBU 0.31 MG/3ML (BASE EQUIV)	Tier 1				
LEVALBUTEROL NEB 0.63MG	LEVALBUTEROL HCL SOLN NEBU 0.63 MG/3ML (BASE EQUIV)	Tier 1				
LEVALBUTEROL NEB 1.25/0.5	LEVALBUTEROL HCL SOLN NEBU CONC 1.25 MG/0.5ML (BASE EQUIV)	Tier 1				
LEVALBUTEROL NEB 1.25MG	LEVALBUTEROL HCL SOLN NEBU 1.25 MG/3ML (BASE EQUIV)	Tier 1				
NEFFY SPR 1MG	EPINEPHRINE NASAL SPRAY 1 MG/0.1ML	Tier 3/4				
NEFFY SPR 2MG	EPINEPHRINE NASAL SPRAY 2 MG/0.1ML	Tier 3/4				
PERFOROMIST NEB 20MCG	FORMOTEROL FUMARATE SOLN NEBU 20 MCG/2ML	Tier 3/4		X		
SEREVENT DIS AER 50MCG	SALMETEROL XINAFOATE AER POW BA 50 MCG/ACT (BASE EQUIV)	Tier 2		X		
STRIVERDI AER 2.5MCG	OLODATEROL HCL INHAL AEROSOL SOLN 2.5 MCG/ACT (BASE EQUIV)	Tier 2		X		
TERBUTALINE TAB 2.5MG	TERBUTALINE SULFATE TAB 2.5 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
TERBUTALINE TAB 5MG	TERBUTALINE SULFATE TAB 5 MG	Tier 1				
XOPENEX HFA AER	LEVALBUTEROL TARTRATE INHAL AEROSOL 45 MCG/ACT (BASE EQUIV)	Tier 3				
Calcitonin Gene-Related Peptide (CGRP) Receptor Antagonist - Migraine Drugs						
AIMOVIG INJ 140MG/ML	ERENUMAB-AOOE SUBCUTANEOUS SOLN AUTO-INJECTOR 140 MG/ML	Tier 2	X	X	X	
AIMOVIG INJ 70MG/ML	ERENUMAB-AOOE SUBCUTANEOUS SOLN AUTO-INJECTOR 70 MG/ML	Tier 2	X	X	X	
EMGALITY INJ 100MG/ML	GALCANEZUMAB-GNLM SUBCUTANEOUS SOLN PREFILLED SYR 100 MG/ML	Tier 2	X	X	X	
EMGALITY INJ 120MG/ML	GALCANEZUMAB-GNLM SUBCUTANEOUS SOLN AUTO-INJECTOR 120 MG/ML	Tier 2	X	X	X	
EMGALITY INJ 120MG/ML	GALCANEZUMAB-GNLM SUBCUTANEOUS SOLN PREFILLED SYR 120 MG/ML	Tier 2	X	X	X	
NURTEC TAB 75MG ODT	RIMEGEPANT SULFATE TAB DISINT 75 MG	Tier 2	X	X	X	
QULIPTA TAB 10MG	ATOGEPANT TAB 10 MG	Tier 2	X	X	X	
QULIPTA TAB 30MG	ATOGEPANT TAB 30 MG	Tier 2	X	X	X	
QULIPTA TAB 60MG	ATOGEPANT TAB 60 MG	Tier 2	X	X	X	
UBRELVY TAB 100MG	UBROGEPANT TAB 100 MG	Tier 2	X	X	X	
UBRELVY TAB 50MG	UBROGEPANT TAB 50 MG	Tier 2	X	X	X	
ZAVZPRET SPR 10MG	ZAVEGEPANT HCL NASAL SPRAY 10 MG/ACT	Tier 3/4	X		X	
Calcium Channel Blocking Agents - Blood Pressure Drugs						
AMLODIPINE TAB 10MG	AMLODIPINE BESYLATE TAB 10 MG (BASE EQUIVALENT)	Tier 1				
AMLODIPINE TAB 2.5MG	AMLODIPINE BESYLATE TAB 2.5 MG (BASE EQUIVALENT)	Tier 1				
AMLODIPINE TAB 5MG	AMLODIPINE BESYLATE TAB 5 MG (BASE EQUIVALENT)	Tier 1				
CARTIA XT CAP 120/24HR	DILTIAZEM HCL COATED BEADS CAP ER 24HR 120 MG	Tier 1				
CARTIA XT CAP 180/24HR	DILTIAZEM HCL COATED BEADS CAP ER 24HR 180 MG	Tier 1				
CARTIA XT CAP 240/24HR	DILTIAZEM HCL COATED BEADS CAP ER 24HR 240 MG	Tier 1				
CARTIA XT CAP 300/24HR	DILTIAZEM HCL COATED BEADS CAP ER 24HR 300 MG	Tier 1				
DILT-XR CAP 120MG	DILTIAZEM HCL CAP ER 24HR 120 MG	Tier 1				
DILT-XR CAP 180MG	DILTIAZEM HCL CAP ER 24HR 180 MG	Tier 1				
DILT-XR CAP 240MG	DILTIAZEM HCL CAP ER 24HR 240 MG	Tier 1				
DILTIAZEM CAP 120MG ER	DILTIAZEM HCL CAP ER 12HR 120 MG	Tier 1				
DILTIAZEM CAP 120MG ER	DILTIAZEM HCL COATED BEADS CAP ER 24HR 120 MG	Tier 1				
DILTIAZEM CAP 120MG ER	DILTIAZEM HCL CAP ER 24HR 120 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
DILTIAZEM CAP 120MG ER	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 120 MG	Tier 1				
DILTIAZEM CAP 120MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 120 MG	Tier 1				
DILTIAZEM CAP 180MG ER	DILTIAZEM HCL COATED BEADS CAP ER 24HR 180 MG	Tier 1				
DILTIAZEM CAP 180MG ER	DILTIAZEM HCL CAP ER 24HR 180 MG	Tier 1				
DILTIAZEM CAP 180MG ER	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 180 MG	Tier 1				
DILTIAZEM CAP 180MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 180 MG	Tier 1				
DILTIAZEM CAP 240MG ER	DILTIAZEM HCL COATED BEADS CAP ER 24HR 240 MG	Tier 1				
DILTIAZEM CAP 240MG ER	DILTIAZEM HCL CAP ER 24HR 240 MG	Tier 1				
DILTIAZEM CAP 240MG ER	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 240 MG	Tier 1				
DILTIAZEM CAP 240MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 240 MG	Tier 1				
DILTIAZEM CAP 300MG ER	DILTIAZEM HCL COATED BEADS CAP ER 24HR 300 MG	Tier 1				
DILTIAZEM CAP 300MG ER	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 300 MG	Tier 1				
DILTIAZEM CAP 360MG CD	DILTIAZEM HCL COATED BEADS CAP ER 24HR 360 MG	Tier 1				
DILTIAZEM CAP 360MG ER	DILTIAZEM HCL COATED BEADS CAP ER 24HR 360 MG	Tier 1				
DILTIAZEM CAP 360MG ER	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 360 MG	Tier 1				
DILTIAZEM CAP 420MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 420 MG	Tier 1				
DILTIAZEM CAP 60MG ER	DILTIAZEM HCL CAP ER 12HR 60 MG	Tier 1				
DILTIAZEM CAP 90MG ER	DILTIAZEM HCL CAP ER 12HR 90 MG	Tier 1				
DILTIAZEM TAB 120MG	DILTIAZEM HCL TAB 120 MG	Tier 1				
DILTIAZEM TAB 120MG ER	DILTIAZEM HCL TAB ER 24HR 120 MG	Tier 1				
DILTIAZEM TAB 240MG ER	DILTIAZEM HCL TAB ER 24HR 240 MG	Tier 1				
DILTIAZEM TAB 300MG ER	DILTIAZEM HCL TAB ER 24HR 300 MG	Tier 1				
DILTIAZEM TAB 30MG	DILTIAZEM HCL TAB 30 MG	Tier 1				
DILTIAZEM TAB 360MG ER	DILTIAZEM HCL TAB ER 24HR 360 MG	Tier 1				
DILTIAZEM TAB 60MG	DILTIAZEM HCL TAB 60 MG	Tier 1				
DILTIAZEM TAB 90MG	DILTIAZEM HCL TAB 90 MG	Tier 1				
DILTIAZEM ER TAB 180MG	DILTIAZEM HCL TAB ER 24HR 180 MG	Tier 1				
DILTIAZEM ER TAB 240MG	DILTIAZEM HCL TAB ER 24HR 240 MG	Tier 1				
DILTIAZEM ER TAB 300MG	DILTIAZEM HCL TAB ER 24HR 300 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
DILTIAZEM ER TAB 360MG	DILTIAZEM HCL TAB ER 24HR 360 MG	Tier 1				
DILTIAZEM ER TAB 420MG	DILTIAZEM HCL TAB ER 24HR 420 MG	Tier 1				
FELODIPINE TAB 10MG ER	FELODIPINE TAB ER 24HR 10 MG	Tier 1				
FELODIPINE TAB 2.5MG ER	FELODIPINE TAB ER 24HR 2.5 MG	Tier 1				
FELODIPINE TAB 5MG ER	FELODIPINE TAB ER 24HR 5 MG	Tier 1				
ISRADIPINE CAP 2.5MG	ISRADIPINE CAP 2.5 MG	Tier 1				
ISRADIPINE CAP 5MG	ISRADIPINE CAP 5 MG	Tier 1				
KATERZIA SUS 1MG/ML	AMLODIPINE BENZOATE ORAL SUSP 1 MG/ML (BASE EQUIVALENT)	Tier 3/4	X			
MATZIM LA TAB 180MG/24	DILTIAZEM HCL TAB ER 24HR 180 MG	Tier 1				
MATZIM LA TAB 240MG/24	DILTIAZEM HCL TAB ER 24HR 240 MG	Tier 1				
MATZIM LA TAB 300MG/24	DILTIAZEM HCL TAB ER 24HR 300 MG	Tier 1				
MATZIM LA TAB 360MG/24	DILTIAZEM HCL TAB ER 24HR 360 MG	Tier 1				
MATZIM LA TAB 420MG/24	DILTIAZEM HCL TAB ER 24HR 420 MG	Tier 1				
NICARDIPINE CAP 20MG	NICARDIPINE HCL CAP 20 MG	Tier 1				
NICARDIPINE CAP 30MG	NICARDIPINE HCL CAP 30 MG	Tier 1				
NIFEDIPINE CAP 10MG	NIFEDIPINE CAP 10 MG	Tier 1				
NIFEDIPINE CAP 20MG	NIFEDIPINE CAP 20 MG	Tier 1				
NIFEDIPINE TAB 30MG ER	NIFEDIPINE TAB ER 24HR OSMOTIC RELEASE 30 MG	Tier 1				
NIFEDIPINE TAB 30MG ER	NIFEDIPINE TAB ER 24HR 30 MG	Tier 1				
NIFEDIPINE TAB 60MG ER	NIFEDIPINE TAB ER 24HR OSMOTIC RELEASE 60 MG	Tier 1				
NIFEDIPINE TAB 60MG ER	NIFEDIPINE TAB ER 24HR 60 MG	Tier 1				
NIFEDIPINE TAB 90MG ER	NIFEDIPINE TAB ER 24HR OSMOTIC RELEASE 90 MG	Tier 1				
NIFEDIPINE TAB 90MG ER	NIFEDIPINE TAB ER 24HR 90 MG	Tier 1				
NIMODIPINE CAP 30MG	NIMODIPINE CAP 30 MG	Tier 1				
NIMODIPINE SOL 60/20ML	NIMODIPINE ORAL SOLN 60 MG/20ML (3 MG/ML)	Tier 2				
NISOLDIPINE TAB 17MG ER	NISOLDIPINE TAB ER 24HR 17 MG	Tier 1				
NISOLDIPINE TAB 20MG ER	NISOLDIPINE TAB ER 24HR 20 MG	Tier 1				
NISOLDIPINE TAB 25.5MG	NISOLDIPINE TAB ER 24HR 25.5 MG	Tier 1				
NISOLDIPINE TAB 30MG ER	NISOLDIPINE TAB ER 24HR 30 MG	Tier 1				
NISOLDIPINE TAB 34MG ER	NISOLDIPINE TAB ER 24HR 34 MG	Tier 1				
NISOLDIPINE TAB 40MG ER	NISOLDIPINE TAB ER 24HR 40 MG	Tier 1				
NISOLDIPINE TAB 8.5MG ER	NISOLDIPINE TAB ER 24HR 8.5 MG	Tier 1				
NORLIQVA SOL 1MG/ML	AMLODIPINE BESYLATE ORAL SOLN 1 MG/ML (BASE EQUIVALENT)	Tier 3/4	X			
NYMALIZE SOL	NIMODIPINE ORAL SOLN 6 MG/ML	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
SULAR TAB 17MG ER	NISOLDIPINE TAB ER 24HR 17 MG	Tier 3/4				
SULAR TAB 34MG ER	NISOLDIPINE TAB ER 24HR 34 MG	Tier 3/4				
SULAR TAB 8.5MG ER	NISOLDIPINE TAB ER 24HR 8.5 MG	Tier 3/4				
TAZTIA XT CAP 120MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 120 MG	Tier 1				
TAZTIA XT CAP 180MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 180 MG	Tier 1				
TAZTIA XT CAP 240MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 240 MG	Tier 1				
TAZTIA XT CAP 300MG ER	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 300 MG	Tier 1				
TAZTIA XT CAP 360MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 360 MG	Tier 1				
TIADYLT CAP 120MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 120 MG	Tier 1				
TIADYLT CAP 180MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 180 MG	Tier 1				
TIADYLT CAP 240MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 240 MG	Tier 1				
TIADYLT CAP 300MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 300 MG	Tier 1				
TIADYLT CAP 360MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 360 MG	Tier 1				
TIADYLT CAP 420MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 420 MG	Tier 1				
TIAZAC CAP 120MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 120 MG	Tier 3/4				
TIAZAC CAP 180MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 180 MG	Tier 3/4				
TIAZAC CAP 240MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 240 MG	Tier 3/4				
TIAZAC CAP 300MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 300 MG	Tier 3/4				
TIAZAC CAP 360MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 360 MG	Tier 3/4				
TIAZAC CAP 420MG/24	DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 420 MG	Tier 3/4				
VERAPAMIL CAP 100MG ER	VERAPAMIL HCL CAP ER 24HR 100 MG	Tier 1				
VERAPAMIL CAP 120MG ER	VERAPAMIL HCL CAP ER 24HR 120 MG	Tier 1				
VERAPAMIL CAP 120MG SR	VERAPAMIL HCL CAP ER 24HR 120 MG	Tier 1				
VERAPAMIL CAP 180MG ER	VERAPAMIL HCL CAP ER 24HR 180 MG	Tier 1				
VERAPAMIL CAP 180MG SR	VERAPAMIL HCL CAP ER 24HR 180 MG	Tier 1				
VERAPAMIL CAP 200MG ER	VERAPAMIL HCL CAP ER 24HR 200 MG	Tier 1				
VERAPAMIL CAP 240MG ER	VERAPAMIL HCL CAP ER 24HR 240 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
VERAPAMIL CAP 240MG SR	VERAPAMIL HCL CAP ER 24HR 240 MG	Tier 1				
VERAPAMIL CAP 300MG ER	VERAPAMIL HCL CAP ER 24HR 300 MG	Tier 1				
VERAPAMIL CAP 360MG SR	VERAPAMIL HCL CAP ER 24HR 360 MG	Tier 1				
VERAPAMIL TAB 120MG	VERAPAMIL HCL TAB 120 MG	Tier 1				
VERAPAMIL TAB 120MG ER	VERAPAMIL HCL TAB ER 120 MG	Tier 1				
VERAPAMIL TAB 180MG ER	VERAPAMIL HCL TAB ER 180 MG	Tier 1				
VERAPAMIL TAB 240MG ER	VERAPAMIL HCL TAB ER 240 MG	Tier 1				
VERAPAMIL TAB 40MG	VERAPAMIL HCL TAB 40 MG	Tier 1				
VERAPAMIL TAB 80MG	VERAPAMIL HCL TAB 80 MG	Tier 1				
VERELAN CAP 120MG SR	VERAPAMIL HCL CAP ER 24HR 120 MG	Tier 3/4				
VERELAN CAP 180MG SR	VERAPAMIL HCL CAP ER 24HR 180 MG	Tier 3/4				
VERELAN CAP 240MG SR	VERAPAMIL HCL CAP ER 24HR 240 MG	Tier 3/4				
VERELAN CAP 360MG SR	VERAPAMIL HCL CAP ER 24HR 360 MG	Tier 3/4				
VERELAN PM CAP 100MG ER	VERAPAMIL HCL CAP ER 24HR 100 MG	Tier 3/4				
VERELAN PM CAP 200MG ER	VERAPAMIL HCL CAP ER 24HR 200 MG	Tier 3/4				
VERELAN PM CAP 300MG ER	VERAPAMIL HCL CAP ER 24HR 300 MG	Tier 3/4				
Calcium Channel Modifying Agents - Seizure Control Drugs						
CELONTIN CAP 300MG	METHSUXIMIDE CAP 300 MG	Tier 3/4				
ETHOSUXIMIDE CAP 250MG	ETHOSUXIMIDE CAP 250 MG	Tier 1				
ETHOSUXIMIDE SOL 250/5ML	ETHOSUXIMIDE SOLN 250 MG/5ML	Tier 1				
METHSUXIMIDE CAP 300MG	METHSUXIMIDE CAP 300 MG	Tier 1				
ZARONTIN CAP 250MG	ETHOSUXIMIDE CAP 250 MG	Tier 3/4				
ZARONTIN SOL 250/5ML	ETHOSUXIMIDE SOLN 250 MG/5ML	Tier 3/4				
ZONEGRAN CAP 100MG	ZONISAMIDE CAP 100 MG	Tier 3/4	X			
ZONEGRAN CAP 25MG	ZONISAMIDE CAP 25 MG	Tier 3/4	X			
ZONISADE SUS 100MG/5	ZONISAMIDE ORAL SUSP 100 MG/5ML (20 MG/ML)	Tier 3/4	X			
ZONISAMIDE CAP 100MG	ZONISAMIDE CAP 100 MG	Tier 1				
ZONISAMIDE CAP 25MG	ZONISAMIDE CAP 25 MG	Tier 1				
ZONISAMIDE CAP 50MG	ZONISAMIDE CAP 50 MG	Tier 1				
Cardiovascular Agents, Other						
CAMZYOS CAP 10MG	MAVACAMTEN CAP 10 MG	Tier 3/4	X	X		
CAMZYOS CAP 15MG	MAVACAMTEN CAP 15 MG	Tier 3/4	X	X		
CAMZYOS CAP 2.5MG	MAVACAMTEN CAP 2.5 MG	Tier 3/4	X	X		
CAMZYOS CAP 5MG	MAVACAMTEN CAP 5 MG	Tier 3/4	X	X		
LODOCO TAB 0.5MG	COLCHICINE (CARDIOVASCULAR) TAB 0.5 MG	Tier 3/4		X		
TRYVIO TAB 12.5MG	APROCITENTAN TAB 12.5 MG	Tier 3/4	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
WINREVAIR INJ 45MG	SOTATERCEPT-CSRK FOR SUBCUTANEOUS SOLN KIT 2 X 45 MG	Tier 3/4	X	X		
WINREVAIR INJ 45MG	SOTATERCEPT-CSRK FOR SUBCUTANEOUS SOLN KIT 45 MG	Tier 3/4	X	X		
WINREVAIR INJ 60MG	SOTATERCEPT-CSRK FOR SUBCUTANEOUS SOLN KIT 2 X 60 MG	Tier 3/4	X	X		
WINREVAIR INJ 60MG	SOTATERCEPT-CSRK FOR SUBCUTANEOUS SOLN KIT 60 MG	Tier 3/4	X	X		
Cardiovascular Agents, Other - Miscellaneous Cardiac Drugs						
ACCURETIC TAB 10-12.5	QUINAPRIL-HYDROCHLOROTHIAZIDE TAB 10-12.5 MG	Tier 3/4				
ACCURETIC TAB 20-12.5	QUINAPRIL-HYDROCHLOROTHIAZIDE TAB 20-12.5 MG	Tier 3/4				
ALISKIREN TAB 150MG	ALISKIREN FUMARATE TAB 150 MG (BASE EQUIVALENT)	Tier 1				
ALISKIREN TAB 300MG	ALISKIREN FUMARATE TAB 300 MG (BASE EQUIVALENT)	Tier 1				
AMILOR/HCTZ TAB 5-50	AMILORIDE & HYDROCHLOROTHIAZIDE TAB 5-50 MG	Tier 1				
AMLOD/ATORVA TAB 10-10MG	AMLODIPINE BESYLATE-ATORVASTATIN CALCIUM TAB 10-10 MG	Tier 1				
AMLOD/ATORVA TAB 10-20MG	AMLODIPINE BESYLATE-ATORVASTATIN CALCIUM TAB 10-20 MG	Tier 1				
AMLOD/ATORVA TAB 10-40MG	AMLODIPINE BESYLATE-ATORVASTATIN CALCIUM TAB 10-40 MG	Tier 1				
AMLOD/ATORVA TAB 10-80MG	AMLODIPINE BESYLATE-ATORVASTATIN CALCIUM TAB 10-80 MG	Tier 1				
AMLOD/ATORVA TAB 2.5-10MG	AMLODIPINE BESYLATE-ATORVASTATIN CALCIUM TAB 2.5-10 MG	Tier 1		X		
AMLOD/ATORVA TAB 2.5-20MG	AMLODIPINE BESYLATE-ATORVASTATIN CALCIUM TAB 2.5-20 MG	Tier 1		X		
AMLOD/ATORVA TAB 2.5-40MG	AMLODIPINE BESYLATE-ATORVASTATIN CALCIUM TAB 2.5-40 MG	Tier 1		X		
AMLOD/ATORVA TAB 5-10MG	AMLODIPINE BESYLATE-ATORVASTATIN CALCIUM TAB 5-10 MG	Tier 1				
AMLOD/ATORVA TAB 5-20MG	AMLODIPINE BESYLATE-ATORVASTATIN CALCIUM TAB 5-20 MG	Tier 1				
AMLOD/ATORVA TAB 5-40MG	AMLODIPINE BESYLATE-ATORVASTATIN CALCIUM TAB 5-40 MG	Tier 1				
AMLOD/ATORVA TAB 5-80MG	AMLODIPINE BESYLATE-ATORVASTATIN CALCIUM TAB 5-80 MG	Tier 1				
AMLOD/BENAZP CAP 10-20MG	AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 10-20 MG	Tier 1				
AMLOD/BENAZP CAP 10-40MG	AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 10-40 MG	Tier 1				

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AMLOD/BENAZP CAP 2.5-10MG	AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 2.5-10 MG	Tier 1				
AMLOD/BENAZP CAP 5-10MG	AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 5-10 MG	Tier 1				
AMLOD/BENAZP CAP 5-20MG	AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 5-20 MG	Tier 1				
AMLOD/BENAZP CAP 5-40MG	AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 5-40 MG	Tier 1				
AMLOD/OLMESA TAB 10-20MG	AMLODIPINE BESYLATE-OLMESARTAN MEDOXOMIL TAB 10-20 MG	Tier 1				
AMLOD/OLMESA TAB 10-40MG	AMLODIPINE BESYLATE-OLMESARTAN MEDOXOMIL TAB 10-40 MG	Tier 1				
AMLOD/OLMESA TAB 5-20MG	AMLODIPINE BESYLATE-OLMESARTAN MEDOXOMIL TAB 5-20 MG	Tier 1				
AMLOD/OLMESA TAB 5-40MG	AMLODIPINE BESYLATE-OLMESARTAN MEDOXOMIL TAB 5-40 MG	Tier 1				
AMLOD/VALSAR TAB /HCTZ	AMLODIPINE-VALSARTAN-HYDROCHLOROTHIAZIDE TAB 5-160-12.5 MG	Tier 1				
AMLOD/VALSAR TAB /HCTZ	AMLODIPINE-VALSARTAN-HYDROCHLOROTHIAZIDE TAB 10-160-12.5 MG	Tier 1				
AMLOD/VALSAR TAB /HCTZ	AMLODIPINE-VALSARTAN-HYDROCHLOROTHIAZIDE TAB 5-160-25 MG	Tier 1				
AMLOD/VALSAR TAB /HCTZ	AMLODIPINE-VALSARTAN-HYDROCHLOROTHIAZIDE TAB 10-160-25 MG	Tier 1				
AMLOD/VALSAR TAB /HCTZ	AMLODIPINE-VALSARTAN-HYDROCHLOROTHIAZIDE TAB 10-320-25 MG	Tier 1				
AMLOD/VALSAR TAB 10-160MG	AMLODIPINE BESYLATE-VALSARTAN TAB 10-160 MG	Tier 1				
AMLOD/VALSAR TAB 10-320MG	AMLODIPINE BESYLATE-VALSARTAN TAB 10-320 MG	Tier 1				
AMLOD/VALSAR TAB 5-160MG	AMLODIPINE BESYLATE-VALSARTAN TAB 5-160 MG	Tier 1				
AMLOD/VALSAR TAB 5-320MG	AMLODIPINE BESYLATE-VALSARTAN TAB 5-320 MG	Tier 1				
ASPRUZY SPR GRA 1000MG	RANOLAZINE ER GRANULES PACKET 1000 MG	Tier 3/4	X			
ASPRUZY SPR GRA 500MG	RANOLAZINE ER GRANULES PACKET 500 MG	Tier 3/4	X			
ATENOL/CHLOR TAB 100-25MG	ATENOLOL & CHLORTHALIDONE TAB 100-25 MG	Tier 1				
ATENOL/CHLOR TAB 50-25MG	ATENOLOL & CHLORTHALIDONE TAB 50-25 MG	Tier 1				
BENAZEP/HCTZ TAB 10-12.5	BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 10-12.5 MG	Tier 1				
BENAZEP/HCTZ TAB 20-12.5	BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 20-12.5 MG	Tier 1				

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BENAZEPRIL/HCTZ TAB 20-25MG	BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 20-25 MG	Tier 1				
BENAZEPRIL/HCTZ TAB 5-6.25MG	BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 5-6.25 MG	Tier 1				
BISOPROLOL/HCTZ TAB 10/6.25	BISOPROLOL & HYDROCHLOROTHIAZIDE TAB 10-6.25 MG	Tier 1				
BISOPROLOL/HCTZ TAB 2.5/6.25	BISOPROLOL & HYDROCHLOROTHIAZIDE TAB 2.5-6.25 MG	Tier 1				
BISOPROLOL/HCTZ TAB 5-6.25MG	BISOPROLOL & HYDROCHLOROTHIAZIDE TAB 5-6.25 MG	Tier 1				
CANDESARTAN/HCTZ TAB 16-12.5	CANDESARTAN CILEXETIL-HYDROCHLOROTHIAZIDE TAB 16-12.5 MG	Tier 1				
CANDESARTAN/HCTZ TAB 32-12.5	CANDESARTAN CILEXETIL-HYDROCHLOROTHIAZIDE TAB 32-12.5 MG	Tier 1				
CANDESARTAN/HCTZ TAB 32-25MG	CANDESARTAN CILEXETIL-HYDROCHLOROTHIAZIDE TAB 32-25 MG	Tier 1				
CAPTOPRIL/HCTZ TAB 25-15MG	CAPTOPRIL & HYDROCHLOROTHIAZIDE TAB 25-15 MG	Tier 1				
CAPTOPRIL/HCTZ TAB 25-25MG	CAPTOPRIL & HYDROCHLOROTHIAZIDE TAB 25-25 MG	Tier 1				
CAPTOPRIL/HCTZ TAB 50-15MG	CAPTOPRIL & HYDROCHLOROTHIAZIDE TAB 50-15 MG	Tier 1				
CAPTOPRIL/HCTZ TAB 50-25MG	CAPTOPRIL & HYDROCHLOROTHIAZIDE TAB 50-25 MG	Tier 1				
CORLANOR SOL 5MG/5ML	IVABRADINE HCL ORAL SOLN 5 MG/5ML (BASE EQUIV)	Tier 3	X	X		
CORLANOR TAB 5MG	IVABRADINE HCL TAB 5 MG (BASE EQUIV)	Tier 3	X	X		
CORLANOR TAB 7.5MG	IVABRADINE HCL TAB 7.5 MG (BASE EQUIV)	Tier 3	X	X		
DIGOXIN SOL 50MCG/ML	DIGOXIN ORAL SOLN 0.05 MG/ML	Tier 1				
DIGOXIN TAB 0.0625MG	DIGOXIN TAB 62.5 MCG (0.0625 MG)	Tier 1				
DIGOXIN TAB 0.125MG	DIGOXIN TAB 125 MCG (0.125 MG)	Tier 1				
DIGOXIN TAB 0.25MG	DIGOXIN TAB 250 MCG (0.25 MG)	Tier 1				
DROXIDOPA CAP 100MG	DROXIDOPA CAP 100 MG	Tier 1	X	X		
DROXIDOPA CAP 200MG	DROXIDOPA CAP 200 MG	Tier 1	X	X		
DROXIDOPA CAP 300MG	DROXIDOPA CAP 300 MG	Tier 1	X	X		
EDARBYCLOR TAB 40-12.5	AZILSARTAN MEDOXOMIL-CHLORTHALIDONE TAB 40-12.5 MG	Tier 3/4				
EDARBYCLOR TAB 40-25MG	AZILSARTAN MEDOXOMIL-CHLORTHALIDONE TAB 40-25 MG	Tier 3/4				
ENALAPRIL/HCTZ TAB 10-25MG	ENALAPRIL MALEATE & HYDROCHLOROTHIAZIDE TAB 10-25 MG	Tier 1				
ENALAPRIL/HCTZ TAB 5-12.5MG	ENALAPRIL MALEATE & HYDROCHLOROTHIAZIDE TAB 5-12.5 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ENTRESTO CAP 15-16MG	SACUBITRIL-VALSARTAN SPRINKLE CAP 15-16 MG	Tier 3/4	X	X		
ENTRESTO CAP 6-6MG	SACUBITRIL-VALSARTAN SPRINKLE CAP 6-6 MG	Tier 3/4	X	X		
FOSINOP/HCTZ TAB 10/12.5	FOSINOPRIL SODIUM & HYDROCHLOROTHIAZIDE TAB 10-12.5 MG	Tier 1				
FOSINOP/HCTZ TAB 20/12.5	FOSINOPRIL SODIUM & HYDROCHLOROTHIAZIDE TAB 20-12.5 MG	Tier 1				
IRBESAR/HCTZ TAB 150-12.5	IRBESARTAN-HYDROCHLOROTHIAZIDE TAB 150-12.5 MG	Tier 1				
IRBESAR/HCTZ TAB 300-12.5	IRBESARTAN-HYDROCHLOROTHIAZIDE TAB 300-12.5 MG	Tier 1				
ISOSO/HYDRAL TAB 20-37.5	ISOSORBIDE DINITRATE-HYDRALAZINE HCL TAB 20-37.5 MG	Tier 1				
IVABRADINE TAB 5MG	IVABRADINE HCL TAB 5 MG (BASE EQUIV)	Tier 1	X	X		
IVABRADINE TAB 7.5MG	IVABRADINE HCL TAB 7.5 MG (BASE EQUIV)	Tier 1	X	X		
LANOXIN TAB 0.0625MG	DIGOXIN TAB 62.5 MCG (0.0625 MG)	Tier 3/4				
LANOXIN TAB 0.125MG	DIGOXIN TAB 125 MCG (0.125 MG)	Tier 3				
LANOXIN TAB 0.25MG	DIGOXIN TAB 250 MCG (0.25 MG)	Tier 3				
LISINOP/HCTZ TAB 10-12.5	LISINOPRIL & HYDROCHLOROTHIAZIDE TAB 10-12.5 MG	Tier 1				
LISINOP/HCTZ TAB 20-12.5	LISINOPRIL & HYDROCHLOROTHIAZIDE TAB 20-12.5 MG	Tier 1				
LISINOP/HCTZ TAB 20-25MG	LISINOPRIL & HYDROCHLOROTHIAZIDE TAB 20-25 MG	Tier 1				
LOSARTAN/HCT TAB 100-12.5	LOSARTAN POTASSIUM & HYDROCHLOROTHIAZIDE TAB 100-12.5 MG	Tier 1				
LOSARTAN/HCT TAB 100-25	LOSARTAN POTASSIUM & HYDROCHLOROTHIAZIDE TAB 100-25 MG	Tier 1				
LOSARTAN/HCT TAB 50-12.5	LOSARTAN POTASSIUM & HYDROCHLOROTHIAZIDE TAB 50-12.5 MG	Tier 1				
LOTENSIN HCT TAB 10-12.5	BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 10-12.5 MG	Tier 3/4				
LOTENSIN HCT TAB 20-12.5	BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 20-12.5 MG	Tier 3/4				
LOTENSIN HCT TAB 20-25MG	BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 20-25 MG	Tier 3/4				
MAXZIDE TAB 75-50	TRIAMTERENE & HYDROCHLOROTHIAZIDE TAB 75-50 MG	Tier 3/4				
MAXZIDE-25 TAB	TRIAMTERENE & HYDROCHLOROTHIAZIDE TAB 37.5-25 MG	Tier 3/4				
METOPRL/HCTZ TAB 100-25MG	METOPROLOL & HYDROCHLOROTHIAZIDE TAB 100-25 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
METOPRL/HCTZ TAB 100-50MG	METOPROLOL & HYDROCHLOROTHIAZIDE TAB 100-50 MG	Tier 1				
METOPRL/HCTZ TAB 50-25MG	METOPROLOL & HYDROCHLOROTHIAZIDE TAB 50-25 MG	Tier 1				
METYROSINE CAP 250MG	METYROSINE CAP 250 MG	Tier 1	X			
OLM MED/AMLO TAB /HCTZ	OLMESARTAN-AMLODIPINE-HYDROCHLOROTHIAZIDE TAB 40-10-25 MG	Tier 1				
OLM MED/AMLO TAB /HCTZ	OLMESARTAN-AMLODIPINE-HYDROCHLOROTHIAZIDE TAB 40-10-12.5 MG	Tier 1				
OLM MED/AMLO TAB /HCTZ	OLMESARTAN-AMLODIPINE-HYDROCHLOROTHIAZIDE TAB 40-5-25 MG	Tier 1				
OLM MED/AMLO TAB /HCTZ	OLMESARTAN-AMLODIPINE-HYDROCHLOROTHIAZIDE TAB 20-5-12.5 MG	Tier 1				
OLM MED/AMLO TAB /HCTZ	OLMESARTAN-AMLODIPINE-HYDROCHLOROTHIAZIDE TAB 40-5-12.5 MG	Tier 1				
OLM MED/HCTZ TAB 20-12.5	OLMESARTAN MEDOXOMIL-HYDROCHLOROTHIAZIDE TAB 20-12.5 MG	Tier 1				
OLM MED/HCTZ TAB 40-12.5	OLMESARTAN MEDOXOMIL-HYDROCHLOROTHIAZIDE TAB 40-12.5 MG	Tier 1				
OLM MED/HCTZ TAB 40-25MG	OLMESARTAN MEDOXOMIL-HYDROCHLOROTHIAZIDE TAB 40-25 MG	Tier 1				
PENTOXIFYLLI TAB 400MG ER	PENTOXIFYLLINE TAB ER 400 MG	Tier 1				
QNAPRIL/HCTZ TAB 10-12.5	QUINAPRIL-HYDROCHLOROTHIAZIDE TAB 10-12.5 MG	Tier 1				
QNAPRIL/HCTZ TAB 20-12.5	QUINAPRIL-HYDROCHLOROTHIAZIDE TAB 20-12.5 MG	Tier 1				
QNAPRIL/HCTZ TAB 20-25MG	QUINAPRIL-HYDROCHLOROTHIAZIDE TAB 20-25 MG	Tier 1				
RANOLAZINE TAB 1000MG	RANOLAZINE TAB ER 12HR 1000 MG	Tier 1				
RANOLAZINE TAB 500MG ER	RANOLAZINE TAB ER 12HR 500 MG	Tier 1				
SACUB/VALSAR TAB 24-26MG	SACUBITRIL-VALSARTAN TAB 24-26 MG	Tier 1	X	X		
SACUB/VALSAR TAB 49-51MG	SACUBITRIL-VALSARTAN TAB 49-51 MG	Tier 1	X	X		
SACUB/VALSAR TAB 97-103MG	SACUBITRIL-VALSARTAN TAB 97-103 MG	Tier 1	X	X		
SPIRONO/HCTZ TAB 25/25	SPIRONOLACTONE & HYDROCHLOROTHIAZIDE TAB 25-25 MG	Tier 1				
TEKTRNA TAB 150MG	ALISKIREN FUMARATE TAB 150 MG (BASE EQUIVALENT)	Tier 3				
TEKTRNA TAB 300MG	ALISKIREN FUMARATE TAB 300 MG (BASE EQUIVALENT)	Tier 3				
TELMIS/AMLOD TAB 40-10MG	TELMISARTAN-AMLODIPINE TAB 40-10 MG	Tier 1				
TELMIS/AMLOD TAB 40-5MG	TELMISARTAN-AMLODIPINE TAB 40-5 MG	Tier 1				
TELMIS/AMLOD TAB 80-10MG	TELMISARTAN-AMLODIPINE TAB 80-10 MG	Tier 1				
TELMIS/AMLOD TAB 80-5MG	TELMISARTAN-AMLODIPINE TAB 80-5 MG	Tier 1				

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TELMISA/HCTZ TAB 40-12.5	TELMISARTAN-HYDROCHLOROTHIAZIDE TAB 40-12.5 MG	Tier 1				
TELMISA/HCTZ TAB 80-12.5	TELMISARTAN-HYDROCHLOROTHIAZIDE TAB 80-12.5 MG	Tier 1				
TELMISA/HCTZ TAB 80-25MG	TELMISARTAN-HYDROCHLOROTHIAZIDE TAB 80-25 MG	Tier 1				
TRANDO/VERAP TAB 1-240 ER	TRANDOLAPRIL-VERAPAMIL HCL TAB ER 1-240 MG	Tier 1				
TRANDO/VERAP TAB 2-180 ER	TRANDOLAPRIL-VERAPAMIL HCL TAB ER 2-180 MG	Tier 1				
TRANDO/VERAP TAB 2-240 ER	TRANDOLAPRIL-VERAPAMIL HCL TAB ER 2-240 MG	Tier 1				
TRANDO/VERAP TAB 4-240 ER	TRANDOLAPRIL-VERAPAMIL HCL TAB ER 4-240 MG	Tier 1				
TRIAMT/HCTZ CAP 37.5-25	TRIAMTERENE & HYDROCHLOROTHIAZIDE CAP 37.5-25 MG	Tier 1				
TRIAMT/HCTZ TAB 37.5-25	TRIAMTERENE & HYDROCHLOROTHIAZIDE TAB 37.5-25 MG	Tier 1				
TRIAMT/HCTZ TAB 75-50MG	TRIAMTERENE & HYDROCHLOROTHIAZIDE TAB 75-50 MG	Tier 1				
VALSART/HCTZ TAB 160-12.5	VALSARTAN-HYDROCHLOROTHIAZIDE TAB 160-12.5 MG	Tier 1				
VALSART/HCTZ TAB 160-25MG	VALSARTAN-HYDROCHLOROTHIAZIDE TAB 160-25 MG	Tier 1				
VALSART/HCTZ TAB 320-12.5	VALSARTAN-HYDROCHLOROTHIAZIDE TAB 320-12.5 MG	Tier 1				
VALSART/HCTZ TAB 320-25MG	VALSARTAN-HYDROCHLOROTHIAZIDE TAB 320-25 MG	Tier 1				
VALSART/HCTZ TAB 80-12.5	VALSARTAN-HYDROCHLOROTHIAZIDE TAB 80-12.5 MG	Tier 1				
VECAMEYL TAB 2.5MG	MECAMYLAMINE HCL TAB 2.5 MG	Tier 3/4				
VERQUVO TAB 10MG	VERICIGUAT TAB 10 MG	Tier 3/4	X	X		
VERQUVO TAB 2.5MG	VERICIGUAT TAB 2.5 MG	Tier 3/4	X	X		
VERQUVO TAB 5MG	VERICIGUAT TAB 5 MG	Tier 3/4	X	X		
VYNDAMAX CAP 61MG	TAFAMIDIS CAP 61 MG	Tier 2	X	X		
VYNDALCEL CAP 20MG	TAFAMIDIS MEGLUMINE (CARDIAC) CAP 20 MG	Tier 2	X	X		
Central Nervous System, Other						
DAYBUE SOL 200MG/ML	TROFINETIDE ORAL SOLN 200 MG/ML	Tier 2	X	X		
DAYBUE STIX POW 5000MG	TROFINETIDE ORAL POWDER PACKET 5000 MG	Tier 2	X			
DAYBUE STIX POW 6000MG	TROFINETIDE ORAL POWDER PACKET 6000 MG	Tier 2	X			

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DAYBUE STIX POW 8000MG	TROFINETIDE ORAL POWDER PACKET 8000 MG	Tier 2	X			
RELYVRIO PAK 3-1GM	SODIUM PHENYLBUTYRATE-TAURURSODIOL POWD PACK 3-1 GM	Tier 3/4				
SKYCLARYS CAP 50MG	OMAVELOXOLONE CAP 50 MG	Tier 2	X	X		
VYLEESI INJ 1.75/0.3	BREMELANOTIDE ACET SUBCUTANEOUS SOLN AUTO-INJ 1.75 MG/0.3ML	Tier 3/4	X	X		
Central Nervous System, Other - Miscellaneous Central Nervous System Drugs						
ADDYI TAB 100MG	FLIBANSERIN TAB 100 MG	Tier 3/4	X	X		
AUSTEDO TAB 12MG	DEUTETRABENAZINE TAB 12 MG	Tier 2	X	X		
AUSTEDO TAB 6MG	DEUTETRABENAZINE TAB 6 MG	Tier 2	X	X		
AUSTEDO TAB 9MG	DEUTETRABENAZINE TAB 9 MG	Tier 2	X	X		
AUSTEDO XR TAB 12MG	DEUTETRABENAZINE TAB ER 24HR 12 MG	Tier 2	X	X		
AUSTEDO XR TAB 18MG	DEUTETRABENAZINE TAB ER 24HR 18 MG	Tier 2	X	X		
AUSTEDO XR TAB 24MG	DEUTETRABENAZINE TAB ER 24HR 24 MG	Tier 2	X	X		
AUSTEDO XR TAB 30MG	DEUTETRABENAZINE TAB ER 24HR 30 MG	Tier 2	X	X		
AUSTEDO XR TAB 36MG	DEUTETRABENAZINE TAB ER 24HR 36 MG	Tier 2	X	X		
AUSTEDO XR TAB 42MG	DEUTETRABENAZINE TAB ER 24HR 42 MG	Tier 2	X	X		
AUSTEDO XR TAB 48MG	DEUTETRABENAZINE TAB ER 24HR 48 MG	Tier 2	X	X		
AUSTEDO XR TAB 6MG	DEUTETRABENAZINE TAB ER 24HR 6 MG	Tier 2	X	X		
AUSTEDO XR TAB TITR KIT	DEUTETRABENAZINE TAB ER TITRATION PACK 12 & 18 & 24 & 30 MG	Tier 2	X	X		
AUSTEDO XR TAB TITR KIT	DEUTETRABENAZINE TAB ER TITRATION PACK 6 MG & 12 MG & 24 MG	Tier 2	X	X		
CAFFEINE CIT SOL 20MG/ML	CAFFEINE CITRATE ORAL SOLN 60 MG/3ML (10 MG/ML BASE EQUIV)	Tier 1				
CAFFEINE CIT SOL 60MG/3ML	CAFFEINE CITRATE ORAL SOLN 60 MG/3ML (10 MG/ML BASE EQUIV)	Tier 1				
INGREZZA CAP 40-80MG	VALBENAZINE TOSYLATE CAP THERAPY PACK 40 MG (7) & 80 MG (21)	Tier 2	X	X		
INGREZZA CAP 40MG	VALBENAZINE TOSYLATE CAP 40 MG (BASE EQUIV)	Tier 2	X	X		
INGREZZA CAP 40MG	VALBENAZINE TOSYLATE CAPSULE SPRINKLE 40 MG (BASE EQUIV)	Tier 2	X	X		
INGREZZA CAP 60MG	VALBENAZINE TOSYLATE CAP 60 MG (BASE EQUIV)	Tier 2	X	X		
INGREZZA CAP 60MG	VALBENAZINE TOSYLATE CAPSULE SPRINKLE 60 MG (BASE EQUIV)	Tier 2	X	X		
INGREZZA CAP 80MG	VALBENAZINE TOSYLATE CAP 80 MG (BASE EQUIV)	Tier 2	X	X		
INGREZZA CAP 80MG	VALBENAZINE TOSYLATE CAPSULE SPRINKLE 80 MG (BASE EQUIV)	Tier 2	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
MEMAN/DONEPZ CAP 14-10MG	MEMANTINE HCL-DONEPEZIL HCL CAP ER 24HR 14-10 MG	Tier 1				
MEMAN/DONEPZ CAP 21-10MG	MEMANTINE HCL-DONEPEZIL HCL CAP ER 24HR 21-10 MG	Tier 1				
MEMAN/DONEPZ CAP 28-10MG	MEMANTINE HCL-DONEPEZIL HCL CAP ER 24HR 28-10 MG	Tier 1				
NAMZARIC CAP	MEMANTINE-DONEPEZIL CAP ER 24HR 7 & 14 & 21 & 28-10 MG PACK	Tier 3/4				
NAMZARIC CAP 14-10MG	MEMANTINE HCL-DONEPEZIL HCL CAP ER 24HR 14-10 MG	Tier 3/4				
NAMZARIC CAP 21-10MG	MEMANTINE HCL-DONEPEZIL HCL CAP ER 24HR 21-10 MG	Tier 3/4				
NAMZARIC CAP 28-10MG	MEMANTINE HCL-DONEPEZIL HCL CAP ER 24HR 28-10 MG	Tier 3/4				
NAMZARIC CAP 7-10MG	MEMANTINE HCL-DONEPEZIL HCL CAP ER 24HR 7-10 MG	Tier 3/4				
NUEDEXTA CAP 20-10MG	DEXTROMETHORPHAN HBR-QUINIDINE SULFATE CAP 20-10 MG	Tier 2	X	X		
RADICAVA ORS SUS 105/5ML	EDARAVONE ORAL SUSP 105 MG/5ML	Tier 3	X	X		
RADICAVA ORS SUS STARTER	EDARAVONE ORAL SUSP 105 MG/5ML	Tier 3	X	X		
RILUZOLE TAB 50MG	RILUZOLE TAB 50 MG	Tier 1				
TEGLUTIK SUS 50/10ML	RILUZOLE SUSP 50 MG/10ML	Tier 3	X			
TETRABENAZIN TAB 12.5MG	TETRABENAZINE TAB 12.5 MG	Tier 1	X			
TETRABENAZIN TAB 25MG	TETRABENAZINE TAB 25 MG	Tier 1	X			
TIGLUTIK SUS 50/10ML	RILUZOLE SUSP 50 MG/10ML	Tier 3	X			
Cholinesterase Inhibitors - Alzheimer's Disease and Dementia Drugs						
ADLARITY DIS 10MG/DAY	DONEPEZIL HYDROCHLORIDE TD PATCH WEEKLY 10 MG/DAY	Tier 3/4				
ADLARITY DIS 5MG/DAY	DONEPEZIL HYDROCHLORIDE TD PATCH WEEKLY 5 MG/DAY	Tier 3/4				
DONEPEZIL TAB 10MG	DONEPEZIL HYDROCHLORIDE TAB 10 MG	Tier 1				
DONEPEZIL TAB 10MG ODT	DONEPEZIL HYDROCHLORIDE ORALLY DISINTEGRATING TAB 10 MG	Tier 1				
DONEPEZIL TAB 23MG	DONEPEZIL HYDROCHLORIDE TAB 23 MG	Tier 1				
DONEPEZIL TAB 5MG	DONEPEZIL HYDROCHLORIDE TAB 5 MG	Tier 1				
DONEPEZIL TAB 5MG ODT	DONEPEZIL HYDROCHLORIDE ORALLY DISINTEGRATING TAB 5 MG	Tier 1				
DONEPEZIL TAB ODT 10MG	DONEPEZIL HYDROCHLORIDE ORALLY DISINTEGRATING TAB 10 MG	Tier 1				
DONEPEZIL TAB ODT 5MG	DONEPEZIL HYDROCHLORIDE ORALLY DISINTEGRATING TAB 5 MG	Tier 1				
GALANTAMINE CAP 16MG ER	GALANTAMINE HYDROBROMIDE CAP ER 24HR 16 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
GALANTAMINE CAP 24MG ER	GALANTAMINE HYDROBROMIDE CAP ER 24HR 24 MG	Tier 1				
GALANTAMINE CAP 8MG ER	GALANTAMINE HYDROBROMIDE CAP ER 24HR 8 MG	Tier 1				
GALANTAMINE SOL 4MG/ML	GALANTAMINE HYDROBROMIDE ORAL SOLN 4 MG/ML	Tier 1				
GALANTAMINE TAB 12MG	GALANTAMINE HYDROBROMIDE TAB 12 MG	Tier 1				
GALANTAMINE TAB 4MG	GALANTAMINE HYDROBROMIDE TAB 4 MG	Tier 1				
GALANTAMINE TAB 8MG	GALANTAMINE HYDROBROMIDE TAB 8 MG	Tier 1				
RIVASTIGMINE CAP 1.5MG	RIVASTIGMINE TARTRATE CAP 1.5 MG (BASE EQUIVALENT)	Tier 1				
RIVASTIGMINE CAP 3MG	RIVASTIGMINE TARTRATE CAP 3 MG (BASE EQUIVALENT)	Tier 1				
RIVASTIGMINE CAP 4.5MG	RIVASTIGMINE TARTRATE CAP 4.5 MG (BASE EQUIVALENT)	Tier 1				
RIVASTIGMINE CAP 6MG	RIVASTIGMINE TARTRATE CAP 6 MG (BASE EQUIVALENT)	Tier 1				
RIVASTIGMINE DIS 13.3/24	RIVASTIGMINE TD PATCH 24HR 13.3 MG/24HR	Tier 1				
RIVASTIGMINE DIS 4.6MG/24	RIVASTIGMINE TD PATCH 24HR 4.6 MG/24HR	Tier 1				
RIVASTIGMINE DIS 9.5MG/24	RIVASTIGMINE TD PATCH 24HR 9.5 MG/24HR	Tier 1				
Cystic Fibrosis Agents - Drugs to treat Cystic Fibrosis						
BRONCHITOL CAP 40MG	MANNITOL INHAL CAP 40 MG	Tier 3	X	X	X	
BRONCHITOL CAP TOL TEST	MANNITOL INHAL CAP 40 MG	Tier 3	X	X	X	
CAYSTON INH 75MG	AZTREONAM LYSINE FOR INHAL SOLN 75 MG (BASE EQUIVALENT)	Tier 3/4	X	X	X	
KALYDECO GRA 13.4MG	IVACAFOR PACKET 13.4 MG	Tier 2	X	X		
KALYDECO GRA 5.8MG	IVACAFOR PACKET 5.8 MG	Tier 2	X	X		
KALYDECO PAK 25MG	IVACAFOR PACKET 25 MG	Tier 2	X	X		
KALYDECO PAK 50MG	IVACAFOR PACKET 50 MG	Tier 2	X	X		
KALYDECO PAK 75MG	IVACAFOR PACKET 75 MG	Tier 2	X	X		
ORKAMBI GRA 100-125	LUMACAFOR-IVACAFOR GRANULES PACKET 100-125 MG	Tier 2	X	X		
ORKAMBI GRA 150-188	LUMACAFOR-IVACAFOR GRANULES PACKET 150-188 MG	Tier 2	X	X		
ORKAMBI GRA 75-94MG	LUMACAFOR-IVACAFOR GRANULES PACKET 75-94 MG	Tier 2	X	X		
ORKAMBI TAB 100-125	LUMACAFOR-IVACAFOR TAB 100-125 MG	Tier 2	X	X		
ORKAMBI TAB 200-125	LUMACAFOR-IVACAFOR TAB 200-125 MG	Tier 2	X	X		
SYMDEKO TAB 100-150	TEZACAFOR-IVACAFOR 100-150 MG & IVACAFOR 150 MG TAB TBPB	Tier 2	X	X		
SYMDEKO TAB 50-75MG	TEZACAFOR-IVACAFOR 50-75 MG & IVACAFOR 75 MG TAB TBPB	Tier 2	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
TOBI NEB 300/5ML	TOBRAMYCIN NEBU SOLN 300 MG/5ML	Tier 3/4	X	X		
TOBI PODHALR CAP 28MG	TOBRAMYCIN INHAL CAP 28 MG	Tier 3	X	X		
TOBRAMYCIN NEB 300/4ML	TOBRAMYCIN NEBU SOLN 300 MG/4ML	Tier 1	X	X		
TRIKAFTA PAK 59.5MG	ELEXACAF-TEZACAF-IVACAF 80-40-60 MG& IVACAF 59.5MG THPK GRAN	Tier 2	X	X		
TRIKAFTA PAK 75MG	ELEXACAF-TEZACAF-IVACAF 100-50-75 MG& IVACAF 75MG THPK GRAN	Tier 2	X	X		
TRIKAFTA TAB	ELEXACAF-TEZACAF-IVACAF 50-25-375 MG & IVACAFTOR 75 MG TBPk	Tier 2	X	X		
TRIKAFTA TAB	ELEXACAF-TEZACAF-IVACAF 100-50-75 MG & IVACAFTOR 150 MG TBPk	Tier 2	X	X		
Dental and Oral Agents						
DEBACTEROL SOL 30-50%	SULFURIC ACID-SULFONATED PHENOLICS SOLN 30-50%	Tier 2				
Dental and Oral Agents - Drugs to Treat Mouth and Throat Conditions						
AQUORAL SPR	*ARTIFICIAL SALIVA - SOLUTION***	Tier 3				
CAPHOSOL SOL	*ARTIFICIAL SALIVA - SOLUTION***	Tier 3				
CEVIMELINE CAP 30MG	CEVIMELINE HCL CAP 30 MG	Tier 1				
CHLORHEX GLU SOL 0.12%	CHLORHEXIDINE GLUCONATE SOLN 0.12%	Tier 1				
CLINPRO 5000 PST 1.1%	SODIUM FLUORIDE PASTE 1.1%	Tier 3				
DENTA 5000 CRE PLUS	SODIUM FLUORIDE CREAM 1.1%	Tier 3/4				
DENTA 5000 CRE PLUS 2PK	SODIUM FLUORIDE CREAM 1.1%	Tier 3/4				
DENTA 5000 GEL PLUS SEN	SODIUM FLUORIDE-POTASSIUM NITRATE GEL 1.1-5%	Tier 3				
DENTAGEL GEL 1.1%	SODIUM FLUORIDE GEL 1.1% (0.5% F)	Tier 3/4				
EASYGEL GEL 0.4%	STANNOUS FLUORIDE GEL 0.4%	Tier 3				
EASYGEL GEL 0.4%CHRY	STANNOUS FLUORIDE GEL 0.4%	Tier 3				
EASYGEL GEL 0.4%CITR	STANNOUS FLUORIDE GEL 0.4%	Tier 3				
EASYGEL GEL 0.4%MINT	STANNOUS FLUORIDE GEL 0.4%	Tier 3				
FLUORID SENS GEL 1.1-5%	SODIUM FLUORIDE-POTASSIUM NITRATE GEL 1.1-5%	Tier 3				
FLUORIDEX CON DLY REN	STANNOUS FLUORIDE CONC 0.63%	Tier 3				
FLUORIDEX PST 1.1%	SODIUM FLUORIDE PASTE 1.1%	Tier 3				
FLUORMX 5000 GEL SENSITIV	SODIUM FLUORIDE-POTASSIUM NITRATE GEL 1.1-5%	Tier 3				
FLUORMX 5000 PST 1.1%	SODIUM FLUORIDE PASTE 1.1%	Tier 3				
FRAICHE 5000 GEL 1.1%	SODIUM FLUORIDE GEL 1.1% (0.5% F)	Tier 3/4				
JUST RIGHT PST 5000	SODIUM FLUORIDE PASTE 1.1%	Tier 3				
KOURZEQ PST 0.1%	TRIAMCINOLONE ACETONIDE DENTAL PASTE 0.1%	Tier 2				
MUCOSITISRX POW	*ARTIFICIAL SALIVA - PACKET***	Tier 3				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
NA FL/K NITR GEL 1.1-5%	SODIUM FLUORIDE-POTASSIUM NITRATE GEL 1.1-5%	Tier 1				
ORALONE DENT PST 0.1%	TRIAMCINOLONE ACETONIDE DENTAL PASTE 0.1%	Tier 2				
PERIDEX SOL 0.12%	CHLORHEXIDINE GLUCONATE SOLN 0.12%	Tier 3/4				
PERIOGARD SOL 0.12%	CHLORHEXIDINE GLUCONATE SOLN 0.12%	Tier 1				
PILOCARPINE TAB 5MG	PILOCARPINE HCL TAB 5 MG	Tier 1				
PILOCARPINE TAB 75MG	PILOCARPINE HCL TAB 7.5 MG	Tier 1				
PREVDNT 5000 CRE 1.1% PLS	SODIUM FLUORIDE CREAM 1.1%	Tier 3/4				
PREVDNT 5000 GEL 1.1-5%	SODIUM FLUORIDE-POTASSIUM NITRATE GEL 1.1-5%	Tier 3				
PREVDNT 5000 GEL 1.1% DRY	SODIUM FLUORIDE GEL 1.1% (0.5% F)	Tier 3/4				
PREVDNT 5000 PST 1.1%	SODIUM FLUORIDE PASTE 1.1%	Tier 3				
PREVDNT 5000 PST 1.1% KID	SODIUM FLUORIDE PASTE 1.1%	Tier 3				
PREVIDENT GEL 1.1% BER	SODIUM FLUORIDE GEL 1.1% (0.5% F)	Tier 3/4				
PREVIDENT GEL 1.1% MIN	SODIUM FLUORIDE GEL 1.1% (0.5% F)	Tier 3/4				
PREVIDENT SOL 0.2%	SODIUM FLUORIDE RINSE 0.2%	Tier 3				
SALAGEN TAB 5MG	PILOCARPINE HCL TAB 5 MG	Tier 3/4				
SALAGEN TAB 75MG	PILOCARPINE HCL TAB 7.5 MG	Tier 3/4				
SF GEL 1.1%	SODIUM FLUORIDE GEL 1.1% (0.5% F)	Tier 1				
SF 5000 PLUS CRE 1.1%	SODIUM FLUORIDE CREAM 1.1%	Tier 1				
SOD FLUORIDE GEL 1.1-5%	SODIUM FLUORIDE-POTASSIUM NITRATE GEL 1.1-5%	Tier 1				
SOD FLUORIDE SOL 0.2%MINT	SODIUM FLUORIDE RINSE 0.2%	Tier 1				
SODIUM FLUOR CRE 1.1%	SODIUM FLUORIDE CREAM 1.1%	Tier 1				
SODIUM FLUOR CRE 5000 PPM	SODIUM FLUORIDE CREAM 1.1%	Tier 1				
SODIUM FLUOR GEL 1.1%	SODIUM FLUORIDE GEL 1.1% (0.5% F)	Tier 1				
SODIUM FLUOR GEL 5000 PPM	SODIUM FLUORIDE GEL 1.1% (0.5% F)	Tier 1				
SODIUM FLUOR PST 5000 PPM	SODIUM FLUORIDE PASTE 1.1%	Tier 1				
TRIAMCINOLON PST 0.1%	TRIAMCINOLONE ACETONIDE DENTAL PASTE 0.1%	Tier 1				
TRIAMCINOLON PST DEN 0.1%	TRIAMCINOLONE ACETONIDE DENTAL PASTE 0.1%	Tier 1				
Dermatitis and Pruitus Agents						
HYFTOR GEL 0.2%	SIROLIMUS GEL 0.2%	Tier 3/4	X	X		
Dermatological Agents - Drugs to Treat Skin Conditions						
ACANYA GEL 1.2-2.5%	CLINDAMYCIN PHOSPHATE-BENZOYL PEROXIDE GEL 1.2-2.5%	Tier 3/4				
ACCUTANE CAP 10MG	ISOTRETINOIN CAP 10 MG	Tier 1				
ACCUTANE CAP 20MG	ISOTRETINOIN CAP 20 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ACCUTANE CAP 30MG	ISOTRETINOIN CAP 30 MG	Tier 1				
ACCUTANE CAP 40MG	ISOTRETINOIN CAP 40 MG	Tier 1				
ACITRETIN CAP 10MG	ACITRETIN CAP 10 MG	Tier 1				
ACITRETIN CAP 175MG	ACITRETIN CAP 175 MG	Tier 1				
ACITRETIN CAP 25MG	ACITRETIN CAP 25 MG	Tier 1				
ADAPAL/BEN P GEL 0.1-2.5%	ADAPALENE-BENZOYL PEROXIDE GEL 0.1-2.5%	Tier 1				
ADBRY INJ 150MG/ML	TRALOKINUMAB-LDRM SUBCUTANEOUS SOLN PREFILLED SYR 150 MG/ML	Tier 2	X	X		
ADBRY INJ 300/2ML	TRALOKINUMAB-LDRM SUBCUTANEOUS SOLN AUTO-INJECTOR 300 MG/2ML	Tier 2	X	X		
AKLIEF CRE 0.005%	TRIFAROTENE CREAM 0.005%	Tier 3/4	X			
ALTRENO LOT 0.05%	TRETINOIN LOTION 0.05%	Tier 3/4	X			
AMELUZ GEL 10%	AMINOLEVULINIC ACID HCL GEL 10%	Tier 3				
AMNESTEEM CAP 10MG	ISOTRETINOIN CAP 10 MG	Tier 1				
AMNESTEEM CAP 20MG	ISOTRETINOIN CAP 20 MG	Tier 1				
AMNESTEEM CAP 30MG	ISOTRETINOIN CAP 30 MG	Tier 1				
AMNESTEEM CAP 40MG	ISOTRETINOIN CAP 40 MG	Tier 1				
AMZEEQ AER 4%	MINOCYCLINE HCL MICRONIZED FOAM 4%	Tier 3/4				
ANALPRAM HC CRE 2.5-1%	HYDROCORTISONE ACETATE W/ PRAMOXINE PERIANAL CREAM 2.5-1%	Tier 3/4				
ANALPRM SNGL CRE HC 2.5-1	HYDROCORTISONE ACETATE W/ PRAMOXINE PERIANAL CREAM 2.5-1%	Tier 3/4				
ANTISEPTIC SOL 4%	CHLORHEXIDINE GLUCONATE SOLN 4%	Tier 1				
ARTISS KIT 10ML	*FIBRIN SEALANT COMPONENT KIT 10 ML***	Tier 3				
ARTISS KIT 2ML	*FIBRIN SEALANT COMPONENT KIT 2 ML***	Tier 3				
ARTISS KIT 4ML	*FIBRIN SEALANT COMPONENT KIT 4 ML***	Tier 3				
ARTISS SOL 10ML	*FIBRIN SEALANT COMPONENT SOLUTION***	Tier 3				
ARTISS SOL 2ML	*FIBRIN SEALANT COMPONENT SOLUTION***	Tier 3				
ARTISS SOL 4ML	*FIBRIN SEALANT COMPONENT SOLUTION***	Tier 3				
AVAR CLEANSE LIQ 10-5%	SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 10-5%	Tier 3/4				
AVAR LS LIQ 10-2%	SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 10-2%	Tier 3				
AVAR-E EMOLL CRE 10-5%	SULFACETAMIDE SODIUM W/ SULFUR CREAM 10-5%	Tier 3				
AVAR-E GREEN CRE 10-5%	SULFACETAMIDE SODIUM W/ SULFUR CREAM 10-5%	Tier 3				

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AVAR-E LS CRE 10-2%	SULFACETAMIDE SODIUM W/ SULFUR CREAM 10-2%	Tier 3				
AZELAIC ACID GEL 15%	AZELAIC ACID GEL 15%	Tier 1				
AZELEX CRE 20%	AZELAIC ACID CREAM 20%	Tier 3				
BENZAMYCIN GEL 5-3%	BENZOYL PEROXIDE-ERYTHROMYCIN GEL 5-3%	Tier 2				
BENZOIN TIN NF	BENZOIN TINCTURE	Tier 1				
BORIC ACID GRA	BORIC ACID GRANULES	Tier 1				
BP 10-1 EMU	SULFACETAMIDE SODIUM W/ SULFUR EMULSION 10-1%	Tier 1				
BRIMONIDINE GEL 0.33%	BRIMONIDINE TARTRATE GEL 0.33% (BASE EQUIVALENT)	Tier 1	X			
CALCIPOTRIEN CRE 0.005%	CALCIPOTRIENE CREAM 0.005%	Tier 1				
CALCIPOTRIEN OIN 0.005%	CALCIPOTRIENE OINT 0.005%	Tier 1				
CALCIPOTRIEN OIN BETAMETH	CALCIPOTRIENE-BETAMETHASONE DIPROPIONATE OINT 0.005-0.064%	Tier 1				
CALCIPOTRIEN SOL 0.005%	CALCIPOTRIENE SOLN 0.005% (50 MCG/ML)	Tier 1				
CALCITRENE OIN 0.005%	CALCIPOTRIENE OINT 0.005%	Tier 3				
CALCITRIOL OIN 3MCG/GM	CALCITRIOL OINT 3 MCG/GM	Tier 1				
CLARAVIS CAP 10MG	ISOTRETINOIN CAP 10 MG	Tier 1				
CLARAVIS CAP 20MG	ISOTRETINOIN CAP 20 MG	Tier 1				
CLARAVIS CAP 30MG	ISOTRETINOIN CAP 30 MG	Tier 1				
CLARAVIS CAP 40MG	ISOTRETINOIN CAP 40 MG	Tier 1				
CLEOCIN-T LOT 1%	CLINDAMYCIN PHOSPHATE LOTION 1%	Tier 3/4				
CLINDACIN AER 1%	CLINDAMYCIN PHOSPHATE FOAM 1%	Tier 1				
CLINDACIN MIS ETZ 1%	CLINDAMYCIN PHOSPHATE SWAB 1%	Tier 1				
CLINDACIN-P PAD 1%	CLINDAMYCIN PHOSPHATE SWAB 1%	Tier 1				
CLINDAGEL GEL 1%	CLINDAMYCIN PHOSPHATE GEL 1% (ONCE-DAILY)	Tier 3/4				
CLINDAMY/BEN GEL 1-5%	CLINDAMYCIN PHOSPHATE-BENZOYL PEROXIDE GEL 1-5%	Tier 1				
CLINDAMY/BEN GEL 1.2-2.5%	CLINDAMYCIN PHOSPHATE-BENZOYL PEROXIDE GEL 1.2-2.5%	Tier 1				
CLINDAMY/BEN GEL 1.2-3.75	CLINDAMYCIN PHOSPHATE-BENZOYL PEROXIDE GEL 1.2-3.75%	Tier 1				
CLINDAMY/BEN GEL 1.2-5%	CLINDAMYCIN PHOSPH-BENZOYL PEROXIDE (REFRIG) GEL 1.2 (1)-5%	Tier 1		X		
CLINDAMYCIN AER 1%	CLINDAMYCIN PHOSPHATE FOAM 1%	Tier 1				
CLINDAMYCIN GEL 1%	CLINDAMYCIN PHOSPHATE GEL 1% (TWICE-DAILY)	Tier 1				
CLINDAMYCIN GEL 1%	CLINDAMYCIN PHOSPHATE GEL 1% (ONCE-DAILY)	Tier 1				

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CLINDAMYCIN GEL TRETINOI	CLINDAMYCIN PHOSPHATE-TRETINOIN GEL 1.2-0.025%	Tier 1				
CLINDAMYCIN LOT 1%	CLINDAMYCIN PHOSPHATE LOTION 1%	Tier 1				
CLINDAMYCIN MIS 1%	CLINDAMYCIN PHOSPHATE SWAB 1%	Tier 1				
CLINDAMYCIN SOL 1%	CLINDAMYCIN PHOSPHATE SOLN 1%	Tier 1				
CLOTRIM/BETA CRE 1-0.05%	CLOTRIMAZOLE W/ BETAMETHASONE CREAM 1-0.05%	Tier 1				
CLOTRIM/BETA CRE DIPROP	CLOTRIMAZOLE W/ BETAMETHASONE CREAM 1-0.05%	Tier 1				
CLOTRIM/BETA LOT DIPROP	CLOTRIMAZOLE W/ BETAMETHASONE LOTION 1-0.05%	Tier 1				
COAL TAR SOL 20%	COAL TAR SOLN 20%	Tier 1				
CONDYLOX GEL 0.5%	PODOFILOX GEL 0.5%	Tier 3/4				
CORTANE-B LOT	HYDROCORTISONE-PRAMOXINE-CHLOROXYLENOL LOT 10-10-1MG/ML	Tier 3/4				
COSENTYX INJ 150MG/ML	SECUKINUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 150 MG/ML	Tier 2	X	X		
COSENTYX INJ 300DOSE	SECUKINUMAB SUBCUTANEOUS PREF SYR 150 MG/ML (300 MG DOSE)	Tier 2	X	X		
COSENTYX INJ 75MG/0.5	SECUKINUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 75 MG/0.5ML	Tier 2	X	X		
COSENTYX PEN INJ 150MG/ML	SECUKINUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 150 MG/ML	Tier 2	X	X		
COSENTYX PEN INJ 300DOSE	SECUKINUMAB SUBCUTANEOUS AUTO-INJ 150 MG/ML (300 MG DOSE)	Tier 2	X	X		
COSENTYX UNO INJ 300/2ML	SECUKINUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 300 MG/2ML	Tier 2	X	X		
DAPSONE GEL 5%	DAPSONE GEL 5%	Tier 1				
DAPSONE GEL 7.5%	DAPSONE GEL 7.5%	Tier 1				
DICLOFENAC GEL 3%	DICLOFENAC SODIUM (ACTINIC KERATOSES) GEL 3%	Tier 1	X			
DOXEPIN HCL CRE 5%	DOXEPIN HCL CREAM 5%	Tier 1	X			
DRYSOL SOL 20%	ALUMINUM CHLORIDE SOLN 20%	Tier 2				
DUPIXENT INJ 200/1.14	DUPIUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 200 MG/1.14ML	Tier 2	X	X		
DUPIXENT INJ 200MG	DUPIUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 200 MG/1.14ML	Tier 2	X	X		
DUPIXENT INJ 300/2ML	DUPIUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 300 MG/2ML	Tier 2	X	X		
DUPIXENT INJ 300/2ML	DUPIUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 300 MG/2ML	Tier 2	X	X		
EBGLYSS INJ 250/2ML	LEBRIKIZUMAB-LBKZ SUBCUTANEOUS SOLN AUTO-INJECT 250 MG/2ML	Tier 2	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
EBGLYSS INJ 250/2ML	LEBRIKIZUMAB-LBKZ SOLUTION PREFILLED SYRINGE 250 MG/2ML	Tier 2	X	X		
EFUDEX CRE 5%	FLUOROURACIL CREAM 5%	Tier 3/4				
ENSTILAR AER	CALCIPOTRIENE-BETAMETHASONE DIPROPIONATE FOAM 0.005-0.064%	Tier 3/4				
EPIFOAM AER 1%	PRAMOXINE-HC AEROSOL FOAM 1-1%	Tier 2				
ERY PAD 2%	ERYTHROMYCIN PADS 2%	Tier 3				
ERY/BENZOYL GEL 3-5%	BENZOYL PEROXIDE-ERYTHROMYCIN GEL 5-3%	Tier 1				
ERYGEL GEL 2%	ERYTHROMYCIN GEL 2%	Tier 3				
ERYTHROMYCIN GEL 2%	ERYTHROMYCIN GEL 2%	Tier 1				
ERYTHROMYCIN SOL 2%	ERYTHROMYCIN SOLN 2%	Tier 1				
EUCRISA OIN 2%	CRISABOROLE OINT 2%	Tier 3			X	
FABIOR AER 0.1%	TAZAROTENE (ACNE) FOAM 0.1%	Tier 3/4	X			
FINACEA AER 15%	AZELAIC ACID FOAM 15%	Tier 2				
FLUOROURACIL CRE 5%	FLUOROURACIL CREAM 5%	Tier 1				
FLUOROURACIL SOL 2%	FLUOROURACIL SOLN 2%	Tier 1				
FLUOROURACIL SOL 5%	FLUOROURACIL SOLN 5%	Tier 1				
HALUCORT GEL	*DERMATOLOGICAL PRODUCTS MISC - GEL**	Tier 3				
HC PRAMOXINE CRE 2.5-1%	HYDROCORTISONE ACETATE W/ PRAMOXINE PERIANAL CREAM 2.5-1%	Tier 1				
IMIQUIMOD CRE 5%	IMIQUIMOD CREAM 5%	Tier 1				
ISOTRETINOIN CAP 10MG	ISOTRETINOIN CAP 10 MG	Tier 1				
ISOTRETINOIN CAP 20MG	ISOTRETINOIN CAP 20 MG	Tier 1				
ISOTRETINOIN CAP 30MG	ISOTRETINOIN CAP 30 MG	Tier 1				
ISOTRETINOIN CAP 40MG	ISOTRETINOIN CAP 40 MG	Tier 1				
KLARON LOT 10%	SULFACETAMIDE SODIUM LOTION 10% (ACNE)	Tier 3/4				
LEVULAN KERA SOL 20%	AMINOLEVULINIC ACID HCL FOR SOLN 20% (STICK APPLICATOR)	Tier 3				
LITFULO CAP 50MG	RITLECITINIB TOSYLATE CAP 50 MG (BASE EQUIV)	Tier 3	X	X		
METHOXSALEN CAP 10MG	METHOXSALEN RAPID CAP 10 MG	Tier 1				
METHYL SALIC LIQ	*METHYL SALICYLATE LIQUID**	Tier 1				
MIRVASO GEL 0.33%	BRIMONIDINE TARTRATE GEL 0.33% (BASE EQUIVALENT)	Tier 2	X			
NEMLUVIO INJ 30MG	NEMOLIZUMAB-ILTO FOR SUBCUTANEOUS AUTO-INJECTOR 30 MG	Tier 2	X	X		
NEO-SYNALAR CRE	NEOMYCIN SULFATE-FLUOCINOLONE ACETONIDE CREAM 0.5-0.025%	Tier 3/4				
NEUAC GEL 1.2-5%	CLINDAMYCIN PHOSPH-BENZOYL PEROXIDE (REFRIG) GEL 1.2 (1)-5%	Tier 1		X		

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ONEXTON GEL 1.2-3.75	CLINDAMYCIN PHOSPHATE-BENZOYL PEROXIDE GEL 1.2-3.75%	Tier 3/4				
OVACE PLUS CRE 10%	SULFACETAMIDE SODIUM CREAM 10%	Tier 3				
OVACE PLUS GEL 10% WASH	SULFACETAMIDE SODIUM CLEANSING GEL 10%	Tier 3				
OVACE PLUS LIQ 10% WASH	SULFACETAMIDE SODIUM LIQUID 10%	Tier 3/4				
OVACE PLUS LOT 9.8%	SULFACETAMIDE SODIUM LOTION 9.8%	Tier 3/4				
OVACE PLUS SHA 10%	SULFACETAMIDE SODIUM SHAMPOO 10%	Tier 3				
OVACE WASH LIQ 10%	SULFACETAMIDE SODIUM LIQUID 10%	Tier 3/4				
PIMECROLIMUS CRE 1%	PIMECROLIMUS CREAM 1%	Tier 1				
PLEXION CRE 9.8-4.8%	SULFACETAMIDE SODIUM W/ SULFUR CREAM 9.8-4.8%	Tier 3/4				
PLEXION LIQ 9.8-4.8%	SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 9.8-4.8%	Tier 3/4				
PLEXION LOT 9.8-4.8%	SULFACETAMIDE SODIUM W/ SULFUR LOTION 9.8-4.8%	Tier 3/4				
PLEXION CLTH PAD 9.8-4.8%	SULFACETAMIDE SODIUM W/ SULFUR CLEANSING CLOTH 9.8-4.8%	Tier 3/4				
PODOCON-25 SOL	PODOPHYLLUM RESIN SOLN 25%	Tier 3				
PODOFILOX GEL 0.5%	PODOFILOX GEL 0.5%	Tier 1				
PODOFILOX SOL 0.5%	PODOFILOX SOLN 0.5%	Tier 1				
PRAMOSONE CRE 1-1%	PRAMOXINE-HC CREAM 1-1%	Tier 2				
PRAMOSONE LOT 1-1%	PRAMOXINE-HC LOTION 1-1%	Tier 2				
PRAMOSONE LOT 1%	PRAMOXINE-HC LOTION 1-1%	Tier 2				
PRAMOSONE LOT 2.5%	PRAMOXINE-HC LOTION 1-2.5%	Tier 2				
PROCORT CRE	HYDROCORTISONE ACET W/ PRAMOXINE PERIANAL CREAM 1.85-1.15%	Tier 3/4				
PYROGALL ACD OIN	PYROGALLOL-CHLOROBUTANOL OINT 25-2%	Tier 2				
REGRANEX GEL 0.01%	BECAPLERMIN GEL 0.01%	Tier 2	X			
RETIN-A MICR GEL 0.06%PMP	TRETINOIN MICROSPHERE GEL 0.06%	Tier 3/4	X			
RETIN-A MICR GEL 0.08%PMP	TRETINOIN MICROSPHERE GEL 0.08%	Tier 3/4	X			
RHOFADE CRE 1%	OXYMETAZOLINE HCL CREAM 1%	Tier 3/4	X			
SANTYL OIN 250/GM	COLLAGENASE OINT 250 UNIT/GM	Tier 3				
SELENIUM SUL LOT 2.5%	SELENIUM SULFIDE LOTION 2.5%	Tier 1				
SOD SUL/SULF CRE 10-2%	SULFACETAMIDE SODIUM W/ SULFUR CREAM 10-2%	Tier 1				
SOD SUL/SULF CRE 10-5%	SULFACETAMIDE SODIUM W/ SULFUR CREAM 10-5%	Tier 1				
SOD SUL/SULF CRE 9.8-4.8%	SULFACETAMIDE SODIUM W/ SULFUR CREAM 9.8-4.8%	Tier 1				
SOD SUL/SULF EMU 10-1%	SULFACETAMIDE SODIUM W/ SULFUR EMULSION 10-1%	Tier 1				

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SOD SUL/SULF EMU 10-5%	SULFACETAMIDE SODIUM-SULFUR IN UREA EMULSION 10-5%	Tier 1				
SOD SUL/SULF LIQ 10-2%	SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 10-2%	Tier 1				
SOD SUL/SULF LIQ 10-5%	SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 10-5%	Tier 1				
SOD SUL/SULF LIQ 9-4%	SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 9-4%	Tier 1				
SOD SUL/SULF LIQ 9.8-4.8%	SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 9.8-4.8%	Tier 1				
SOD SUL/SULF LIQ WASH	SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 9-4%	Tier 1				
SOD SUL/SULF LOT 10-5%	SULFACETAMIDE SODIUM W/ SULFUR LOTION 10-5%	Tier 1				
SOD SUL/SULF LOT 9.8-4.8%	SULFACETAMIDE SODIUM W/ SULFUR LOTION 9.8-4.8%	Tier 1				
SOD SUL/SULF SUS 10-5%	SULFACETAMIDE SODIUM W/ SULFUR SUSP 10-5%	Tier 1				
SOD SUL/SULF SUS 8-4%	SULFACETAMIDE SODIUM W/ SULFUR SUSP 8-4%	Tier 1				
SOD SULFACET GEL 10%	SULFACETAMIDE SODIUM CLEANSING GEL 10%	Tier 1				
SOD SULFACET SHA 10%	SULFACETAMIDE SODIUM SHAMPOO 10%	Tier 1				
SODIUM SULFA LIQ 10% WASH	SULFACETAMIDE SODIUM LIQUID 10%	Tier 1				
SOOLANTRA CRE 1%	IVERMECTIN CREAM 1%	Tier 1				
SOTYKTU TAB 6MG	DEUCRAVACITINIB TAB 6 MG	Tier 2	X	X		
SPEVIGO INJ 150/1ML	SPESOLIMAB-SBZO SUBCUTANEOUS SOLN PREF SYR 150 MG/ML	Tier 3/4	X	X		
SPEVIGO INJ 300/2ML	SPESOLIMAB-SBZO SUBCUTANEOUS SOLN PREF SYR 300 MG/2ML	Tier 3/4	X	X		
SSS CRE 10%-5%	SULFACETAMIDE SODIUM W/ SULFUR CREAM 10-5%	Tier 1				
SSS 10-5 AER 10-5%	SULFACETAMIDE SODIUM W/ SULFUR FOAM 10-5%	Tier 3				
STEQEYMA INJ 45/0.5ML	USTEKINUMAB-STBA SOLN PREFILLED SYRINGE 45 MG/0.5ML	Tier 2	X	X		
STEQEYMA INJ 90MG/ML	USTEKINUMAB-STBA SOLN PREFILLED SYRINGE 90 MG/ML	Tier 2	X	X		
SULFAC SULFR PAD 9.8-4.8%	SULFACETAMIDE SODIUM W/ SULFUR CLEANSING CLOTH 9.8-4.8%	Tier 1				
SULFACETAMID LOT 10%	SULFACETAMIDE SODIUM LOTION 10% (ACNE)	Tier 1				
SULFACLEANSE SUS 8-4%	SULFACETAMIDE SODIUM W/ SULFUR SUSP 8-4%	Tier 3				

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SULFAMEZ EMU 10-1%	SULFACETAMIDE SODIUM W/ SULFUR EMULSION 10-1%	Tier 1				
SUMAXIN PAD 10-4%	SULFACETAMIDE SODIUM W/ SULFUR CLEANSING PAD 10-4%	Tier 3/4				
SUMAXIN CP KIT	*SULFACETAMIDE SOD-SULFUR PAD 10-4% & SKIN CLEANSER KIT***	Tier 3/4				
TACLONEX SUS	CALCIPOTRIENE-BETAMETHASONE DIPROPIONATE SUSP 0.005-0.064%	Tier 1				
TACROLIMUS OIN 0.03%	TACROLIMUS OINT 0.03%	Tier 1				
TACROLIMUS OIN 0.1%	TACROLIMUS OINT 0.1%	Tier 1				
TAZAROTENE AER 0.1%	TAZAROTENE (ACNE) FOAM 0.1%	Tier 3/4	X			
TAZAROTENE CRE 0.05%	TAZAROTENE CREAM 0.05%	Tier 1	X			
TAZAROTENE CRE 0.1%	TAZAROTENE CREAM 0.1%	Tier 1	X			
TAZAROTENE GEL 0.05%	TAZAROTENE GEL 0.05%	Tier 1	X			
TAZAROTENE GEL 0.1%	TAZAROTENE GEL 0.1%	Tier 1	X			
TAZORAC CRE 0.05%	TAZAROTENE CREAM 0.05%	Tier 3/4	X			
TAZORAC CRE 0.1%	TAZAROTENE CREAM 0.1%	Tier 3/4	X			
TAZORAC GEL 0.05%	TAZAROTENE GEL 0.05%	Tier 3/4	X			
TAZORAC GEL 0.1%	TAZAROTENE GEL 0.1%	Tier 3/4	X			
TISSEEL KIT 10ML	*FIBRIN SEALANT COMPONENT KIT 10 ML***	Tier 3				
TISSEEL KIT 2ML	*FIBRIN SEALANT COMPONENT KIT 2 ML***	Tier 3				
TISSEEL KIT 4ML	*FIBRIN SEALANT COMPONENT KIT 4 ML***	Tier 3				
TOLAK CRE 4%	FLUOROURACIL CREAM 4%	Tier 3/4				
TREMFYA INJ 100MG/ML	GUSELKUMAB SOLN PREFILLED SYRINGE 100 MG/ML	Tier 2	X	X		
TREMFYA INJ 100MG/ML	GUSELKUMAB SOLN AUTO-INJECTOR 100 MG/ML	Tier 2	X	X		
TREMFYA INJ 100MG/ML	GUSELKUMAB SOLN PEN-INJECTOR 100 MG/ML	Tier 2	X	X		
TREMFYA INJ 200/2ML	GUSELKUMAB SOLN AUTO-INJECTOR 200 MG/2ML	Tier 2	X	X		
TREMFYA INJ 200/2ML	GUSELKUMAB SOLN PREFILLED SYRINGE 200 MG/2ML	Tier 2	X	X		
TRETINOIN CRE 0.025%	TRETINOIN CREAM 0.025%	Tier 1				
TRETINOIN CRE 0.05%	TRETINOIN CREAM 0.05%	Tier 1				
TRETINOIN CRE 0.1%	TRETINOIN CREAM 0.1%	Tier 1				
TRETINOIN GEL 0.01%	TRETINOIN GEL 0.01%	Tier 1				
TRETINOIN GEL 0.025%	TRETINOIN GEL 0.025%	Tier 1				
TRETINOIN GEL 0.04%	TRETINOIN MICROSPHERE GEL 0.04%	Tier 1	X			
TRETINOIN GEL 0.04%PMP	TRETINOIN MICROSPHERE GEL 0.04%	Tier 1	X			
TRETINOIN GEL 0.05%	TRETINOIN GEL 0.05%	Tier 1	X			

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
TRETINOIN GEL 0.08%	TRETINOIN MICROSPHERE GEL 0.08%	Tier 1	X			
TRETINOIN GEL 0.1%	TRETINOIN MICROSPHERE GEL 0.1%	Tier 1	X			
TRETINOIN GEL 0.1%PUMP	TRETINOIN MICROSPHERE GEL 0.1%	Tier 1	X			
VEREGEN OIN 15%	SINECATECHINS OINT 15%	Tier 3			X	
VIT C BRIGHT DRO 10%	*EMOLLIENT - LIQUID**	Tier 3				
VIT C BRIGHT DRO 15%	*EMOLLIENT - LIQUID**	Tier 3				
VTAMA CRE 1%	TAPINAROF CREAM 1%	Tier 3/4	X			
WEZLANA INJ 45/0.5ML	USTEKINUMAB-AUUB INJ 45 MG/0.5ML	Tier 2	X	X		
WEZLANA INJ 45/0.5ML	USTEKINUMAB-AUUB SOLN PREFILLED SYRINGE 45 MG/0.5ML	Tier 2	X	X		
WEZLANA INJ 90MG/ML	USTEKINUMAB-AUUB SOLN PREFILLED SYRINGE 90 MG/ML	Tier 2	X	X		
YESINTEK INJ 45/0.5ML	USTEKINUMAB-KFCE SOLN PREFILLED SYRINGE 45 MG/0.5ML	Tier 2	X	X		
YESINTEK INJ 45/0.5ML	USTEKINUMAB-KFCE SUBCUTANEOUS SOLN 45 MG/0.5ML	Tier 2	X	X		
YESINTEK INJ 90MG/ML	USTEKINUMAB-KFCE SOLN PREFILLED SYRINGE 90 MG/ML	Tier 2	X	X		
ZACLIR LOT 8%	BENZOYL PEROXIDE LOTION 8%	Tier 3				
ZENATANE CAP 10MG	ISOTRETINOIN CAP 10 MG	Tier 1				
ZENATANE CAP 20MG	ISOTRETINOIN CAP 20 MG	Tier 1				
ZENATANE CAP 30MG	ISOTRETINOIN CAP 30 MG	Tier 1				
ZENATANE CAP 40MG	ISOTRETINOIN CAP 40 MG	Tier 1				
ZORYVE CRE 0.05%	ROFLUMILAST CREAM 0.05%	Tier 3/4	X			
ZORYVE CRE 0.15%	ROFLUMILAST CREAM 0.15%	Tier 3/4	X			
ZORYVE CRE 0.3%	ROFLUMILAST CREAM 0.3%	Tier 3/4	X	X		
Dermatological Agents - Skin Agents						
B & C OIN	*BALSAM PERU-CASTOR OIL OINT***	Tier 3				
BALSAM PERU/ OIN CASTOR	*BALSAM PERU-CASTOR OIL OINT***	Tier 1				
CIBINQO TAB 100MG	ABROCITINIB TAB 100 MG	Tier 2	X	X		
CIBINQO TAB 200MG	ABROCITINIB TAB 200 MG	Tier 2	X	X		
CIBINQO TAB 50MG	ABROCITINIB TAB 50 MG	Tier 2	X	X		
CLINDACIN KIT ETZ 1%	*CLINDAMYCIN PHOSPHATE SWAB 1% & CLEANSER KIT***	Tier 3/4				
CVS 360 PURE LIQ GLYCERIN	GLYCERIN TOPICAL LIQUID	Tier 1				
DERMACURE CRE 41%	UREA CREAM 41%	Tier 3/4				
FILSUEVZ GEL 10%	BIRCH TRITERPENES GEL 10%	Tier 3/4	X	X		
GORDOFILM SOL	SALICYLIC & LACTIC ACIDS SOLN 16.7-16.7%	Tier 2				
HYDRO 40 AER FOAM	UREA FOAM 40%	Tier 3				

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INOVA KIT 4%	*BENZOYL PEROXIDE PAD 4% & VITAMIN E TOPICAL 5% KIT***	Tier 3				
INOVA KIT 8%	*BENZOYL PEROXIDE PAD 8% & VITAMIN E TOPICAL 5% KIT***	Tier 3				
INOVA 4/1 KIT ACNE CON	*BENZOYL PEROX PAD 4% & SALICYLIC AC PAD 1% & VIT E 5% KIT*	Tier 3				
INOVA 8/2 KIT ACNE CON	*BENZOYL PEROX PAD 8% & SALICYLIC AC PAD 2% & VIT E 5% KIT*	Tier 3				
KLISYRI OIN 1% (250)	TIRBANIBULIN OINTMENT 1%	Tier 3/4			X	
KLISYRI OIN 1% (350)	TIRBANIBULIN OINTMENT 1%	Tier 3/4			X	
OPZELURA CRE 1.5%	RUXOLITINIB PHOSPHATE CREAM 1.5%	Tier 3/4	X	X		
PRONAL GEL 40-10%	UREA-LACTIC ACID GEL 40-10%	Tier 3				
SALVAX DUO KIT PLUS	SALICYLIC ACID FOAM 6% & UREA IN LACTIC ACID FOAM 35% KIT	Tier 3				
SCALACORT DK KIT	*HC LOT 2% & SAL ACID-SULFUR SHAMPOO 2-2% & SHAMPOO KIT***	Tier 3				
UMECTA MOUSS AER 40%	UREA FOAM 40%	Tier 3				
URAMAXIN GEL 45%	UREA GEL 45%	Tier 3/4				
UREA CRE 20%	UREA CREAM 20%	Tier 1				
UREA CRE 40%	UREA CREAM 40%	Tier 1				
UREA CRE 41%	UREA CREAM 41%	Tier 1				
UREA CRE 41%	UREA CREAM 41%	Tier 3/4				
UREA CRE 45%	UREA CREAM 45%	Tier 1				
UREA LOT 40%	UREA LOTION 40%	Tier 1				
UREA NAIL GEL 45%	UREA GEL 45%	Tier 1				
UREMEZ-40 CRE 40%	UREA CREAM 40%	Tier 3				
VENELEX OIN	*BALSAM PERU-CASTOR OIL OINT***	Tier 3				
XIRUN GEL 40-10%	UREA-LACTIC ACID GEL 40-10%	Tier 3				
ZACARE KIT KIT 4%	BENZOYL PEROXIDE LOTION 4% & HYALURONATE SODIUM GEL 0.2% KIT	Tier 3				
ZACARE KIT KIT 8%	BENZOYL PEROXIDE LOTION 8% & HYALURONATE SODIUM GEL 0.2% KIT	Tier 3				
ZILXI AER 1.5%	MINOCYCLINE HCL MICRONIZED FOAM 1.5%	Tier 3/4	X		X	
ZORYVE MIS 0.3%	ROFLUMILAST FOAM 0.3%	Tier 3/4	X			
Diabetes - Glucose Monitoring						
ACCU-CHEK KIT FASTCLIX	*LANCETS KIT***	Tier 1				
ACCU-CHEK KIT GUIDE	*BLOOD GLUCOSE MONITORING KIT W/ DEVICE***	Tier 2				
ACCU-CHEK KIT GUIDE ME	*BLOOD GLUCOSE MONITORING KIT W/ DEVICE***	Tier 2				
ACCU-CHEK KIT SOFTCLIX	*LANCETS KIT***	Tier 1				

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ACCU-CHEK LIQ GUIDE	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 3				
ACCU-CHEK LIQ SMART	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 1				
ACCU-CHEK SOL	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 1				
ACCU-CHEK TES GUIDE	GLUCOSE BLOOD TEST STRIP	Tier 2		X		
ACCUTREND SOL GLUCOSE	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 1				
ADVANTAGE MIS LANC 28G	*LANCETS***	Tier 3				
ADVATE SAFE MIS LANC 21G	*LANCETS***	Tier 3				
ADVATE SAFE MIS LANC 23G	*LANCETS***	Tier 3				
ADVATE SAFE MIS LANC 28G	*LANCETS***	Tier 3				
AIMSCO TWIST MIS 32G	*LANCETS***	Tier 3				
AIMSCO TWIST MIS 33G	*LANCETS***	Tier 3				
AQINJECT PEN MIS 32GX5/32	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
AQUALANCE MIS 30G	*LANCETS***	Tier 3				
ASSURE CMFRT MIS 28G	*LANCETS***	Tier 3				
AUM MINI PEN MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
AUM MINI PEN MIS 32GX5MM	INSULIN PEN NEEDLE 32 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
AUM MINI PEN MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
AUM READYGRD MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
BD PEN NEEDL MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
BD PEN NEEDL MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
CAREFINE MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
CAREFINE MIS 32GX5MM	INSULIN PEN NEEDLE 32 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
CAREFINE MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
CARESENS SOL CONTROL	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 2				
CARESENS 30G MIS LANCETS	*LANCETS***	Tier 3				
CARESENS S LIQ CON A/B	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 3				
CARETOUCH MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
CARETOUCH MIS 32GX5MM	INSULIN PEN NEEDLE 32 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
CARETOUCH MIS LANC 26G	*LANCETS***	Tier 3				
CARETOUCH MIS LANC 28G	*LANCETS***	Tier 3				

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CARETOUCH MIS LANC 30G	*LANCETS***	Tier 3				
CARETOUCH MIS TWIST 28	*LANCETS***	Tier 3				
CARETOUCH MIS TWIST 30	*LANCETS***	Tier 3				
CARETOUCH MIS TWIST 33	*LANCETS***	Tier 3				
CHEMSTRIP TES UGK	*URINE GLUCOSE-KETONES TEST STRIPS***	Tier 3				
CHEMSTRIP K TES	ACETONE (URINE) TEST STRIP	Tier 2				
CHOSEN MIS 30G	*LANCETS***	Tier 3				
CHOSEN MIS SAFE 28G	*LANCETS***	Tier 3				
COAGUCHEK MIS LANCETS	*LANCETS***	Tier 3				
COMFORT EZ MIS 23G	*LANCETS***	Tier 3				
COMFORT EZ MIS 28G	*LANCETS***	Tier 3				
COMFORT EZ MIS 30GX8MM	INSULIN PEN NEEDLE 30 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
COMFORT TCH MIS LANC 28G	*LANCETS***	Tier 3				
COMFORT TCH MIS LANC 30G	*LANCETS***	Tier 3				
COMFORT TCH MIS LANC 31G	*LANCETS***	Tier 3				
COMFORT TOUC MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
COMFORT TOUC MIS 32GX5MM	INSULIN PEN NEEDLE 32 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
COMFORT TOUC MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
CONTOUR KIT NEXT	*BLOOD GLUCOSE MONITORING KIT W/ DEVICE***	Tier 1				
CONTOUR KIT NEXT EZ	*BLOOD GLUCOSE MONITORING KIT W/ DEVICE***	Tier 1				
CONTOUR TES NEXT	GLUCOSE BLOOD TEST STRIP	Tier 1		X		
CONTOUR NEXT KIT GEN	*BLOOD GLUCOSE MONITORING KIT W/ DEVICE***	Tier 1				
CONTOUR NEXT KIT ONE	*BLOOD GLUCOSE MONITORING KIT***	Tier 1				
CONTOUR NEXT KIT ONE	*BLOOD GLUCOSE MONITORING KIT W/ DEVICE***	Tier 1				
CONTOUR PLUS KIT BLUE	*BLOOD GLUCOSE MONITORING KIT W/ DEVICE***	Tier 1				
CONTOUR PLUS LIQ LEVEL 1	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 2				
CONTOUR PLUS LIQ LEVEL 2	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 2				
CONTOUR PLUS TES BLD GLUC	GLUCOSE BLOOD TEST STRIP	Tier 1		X		
CONTROL SOL LIQ HI/MID/L	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 3				
CONTROL SOL LIQ LEVEL 2	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 3				
CONTROL SOL LIQ LVL 2/3	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 2				
CVS KETONE TES CARE	*URINE GLUCOSE-KETONES TEST STRIPS***	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
CVS LANCETS MIS ORIGINAL	*LANCETS***	Tier 3				
CVS LANCETS MIS THIN 26G	*LANCETS***	Tier 3				
CVS LANCETS MIS THIN 33G	*LANCETS***	Tier 3				
DEXCOM G6 MIS RECEIVER	*CONTINUOUS GLUCOSE SYSTEM RECEIVER***	Tier 3	X	X		
DEXCOM G6 MIS SENSOR	*CONTINUOUS GLUCOSE SYSTEM SENSOR***	Tier 3	X	X		
DEXCOM G7 MIS RECEIVER	*CONTINUOUS GLUCOSE SYSTEM RECEIVER***	Tier 3	X	X		
DEXCOM G7 MIS SENSOR	*CONTINUOUS GLUCOSE SYSTEM SENSOR***	Tier 3	X	X		
DEXCOM G7 MIS SNSR 15D	*CONTINUOUS GLUCOSE SYSTEM SENSOR***	Tier 3	X	X		
DIASTIX TES REAGENT	GLUCOSE URINE TEST-(GLUCOSE OXIDASE) STRIP	Tier 3				
DIASTIX TES STRIPS	GLUCOSE URINE TEST-(GLUCOSE OXIDASE) STRIP	Tier 3				
DROPSAFE MIS LANC 23G	*LANCETS***	Tier 3				
DROPSAFE MIS LANC 30G	*LANCETS***	Tier 3				
EASY COMFORT MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
EASY COMFORT MIS LANC 30G	*LANCETS***	Tier 3				
EASY COMFORT MIS TWIST	*LANCETS***	Tier 3				
EASY TOUCH LIQ HEALTHPR	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 3				
EASYMAX LIQ NORM/HIG	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 3				
EASYMAX 15 LIQ LEVEL2-3	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 3				
EASYMAX 15 SOL LEVEL 2	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 3				
EMBECTA NANO MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
EMBECTA UF MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
ENLITE GLUCO MIS SENSOR	*CONTINUOUS GLUCOSE SYSTEM SENSOR***	Tier 3	X			
FASTCLIX MIS LANCETS	*LANCETS***	Tier 1				
FINGERSTIX MIS LANCETS	*LANCETS***	Tier 3				
FORA TEST GO TES ADV VOIC	KETONE BLOOD TEST STRIP	Tier 3				
FREESTYLE MIS READER	*CONTINUOUS GLUCOSE SYSTEM RECEIVER***	Tier 3	X	X		
FREESTYLE LB KIT 14D/SEN	*CONTINUOUS GLUCOSE SYSTEM SENSOR***	Tier 3	X	X		
FREESTYLE LB KIT 2/SENSOR	*CONTINUOUS GLUCOSE SYSTEM SENSOR***	Tier 3	X	X		

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FREESTYLE LB KIT 2PLS/SEN	*CONTINUOUS GLUCOSE SYSTEM SENSOR***	Tier 3	X	X		
FREESTYLE LB KIT 3/SENSOR	*CONTINUOUS GLUCOSE SYSTEM SENSOR***	Tier 3	X	X		
FREESTYLE LB KIT 3PLS/SEN	*CONTINUOUS GLUCOSE SYSTEM SENSOR***	Tier 3	X	X		
FREESTYLE LB MIS 14D/RDR	*CONTINUOUS GLUCOSE SYSTEM RECEIVER***	Tier 3	X	X		
FREESTYLE LB MIS 2/READER	*CONTINUOUS GLUCOSE SYSTEM RECEIVER***	Tier 3	X	X		
FREESTYLE LB MIS 3/READER	*CONTINUOUS GLUCOSE SYSTEM RECEIVER***	Tier 3	X	X		
GENTLE-LET MIS 26G	*LANCETS***	Tier 3				
GENTLE-LET MIS 28G	*LANCETS***	Tier 3				
GENTLE-LET MIS LANCETS	*LANCETS***	Tier 3				
GNP PEN NEED MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
GNP PEN NEED MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
GUARDIAN MIS SENSOR 3	*CONTINUOUS GLUCOSE SYSTEM SENSOR***	Tier 3	X	X		
GUARDIAN 4 MIS SENSOR	*CONTINUOUS GLUCOSE SYSTEM SENSOR***	Tier 3	X	X		
IHEALTH LIQ CONTROL	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 3				
INSUPEN MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
INSUPEN32G MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
KETO-DIASTIX TES	*URINE GLUCOSE-KETONES TEST STRIPS***	Tier 3				
KETONE TES	ACETONE (URINE) TEST STRIP	Tier 2				
KETOSTIX TES STRIP	ACETONE (URINE) TEST STRIP	Tier 2				
LANCET ULTRA MIS THIN 30G	*LANCETS***	Tier 3				
LANCETS MIS 28G	*LANCETS***	Tier 3				
LANCETS MIS 28G THIN	*LANCETS***	Tier 3				
LANCETS MIS 30G	*LANCETS***	Tier 3				
LANCETS MICR MIS THIN 33G	*LANCETS***	Tier 3				
LANCETS SUPR MIS THIN 28G	*LANCETS***	Tier 3				
MEDISENSE LIQ GLUC-KET	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 3				
MICROLET MIS LANCETS	*LANCETS***	Tier 3				
MINIMED INST MIS SENSOR	*CONTINUOUS GLUCOSE SYSTEM SENSOR***	Tier 3/4	X	X		
MM TWIST MIS LANCETS	*LANCETS***	Tier 3				

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MOBILE LANCE MIS 30G	*LANCETS***	Tier 3				
NEUTEK 2TEK SOL CONTROL	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 3				
NOVOFINE MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
NOVOFINE AUT MIS 30GX8MM	INSULIN PEN NEEDLE 30 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
NOVOFINE PLS MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
ONETOUCH LIQ ULT CONT	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 1				
ONETOUCH LIQ ULTRA	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 1				
ONETOUCH LIQ VERIO	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 1				
ONETOUCH DEL MIS LANC DEV	*LANCETS***	Tier 1				
ONETOUCH DEL MIS PLUS 30G	*LANCETS***	Tier 1				
ONETOUCH DEL MIS PLUS 33G	*LANCETS***	Tier 1				
ONETOUCH US MIS 2 30G	*LANCETS***	Tier 1				
PEN NEEDLE MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
PEN NEEDLE MIS 32GX5MM	INSULIN PEN NEEDLE 32 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
PEN NEEDLE MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
PEN NEEDLES MIS 30GX5/16	INSULIN PEN NEEDLE 30 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
PEN NEEDLES MIS 30GX8MM	INSULIN PEN NEEDLE 30 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
PEN NEEDLES MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
PEN NEEDLES MIS 32GX5/32	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
PEN NEEDLES MIS 32GX5MM	INSULIN PEN NEEDLE 32 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
PEN NEEDLES MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
PENTIPS MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
PENTIPS MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
PERFECT POIN MIS LANC 28G	*LANCETS***	Tier 3				
PERFECT POIN MIS LANC 30G	*LANCETS***	Tier 3				
PIP CONTROL LIQ	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 3				
PRECISION LIQ GLUC/KET	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 2				
PRECISN XTRA TES KETONE	KETONE BLOOD TEST STRIP	Tier 3				
PRO COMFORT MIS LANC 30G	*LANCETS***	Tier 3				

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PSS SAFE LAN MIS	*LANCETS***	Tier 3				
PSS SEL LANC MIS	*LANCETS***	Tier 3				
PURE COMFORT MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
QUICK TOUCH MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
QUICK TOUCH MIS 32GX5MM	INSULIN PEN NEEDLE 32 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
QUICK TOUCH MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
QUINTET CONT SOL HGH/ NORM	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 3				
RELION PLATN TES GLUCOSE	GLUCOSE BLOOD TEST STRIP	Tier 3/4		X		
RELION ULTRA MIS THIN 30G	*LANCETS***	Tier 3				
SAFE-T-LANCE MIS 21G	*LANCETS***	Tier 3				
SAFE-T-LANCE MIS 25G	*LANCETS***	Tier 3				
SAFE-T-LANCE MIS HI FLOW	*LANCETS***	Tier 3				
SAFE-T-LANCE MIS LOW FLOW	*LANCETS***	Tier 3				
SAFE-T-LANCE MIS NOR FLOW	*LANCETS***	Tier 3				
SAFE-T-PRO MIS LANCETS	*LANCETS***	Tier 1				
SAFE-T-PRO MIS PLUS	*LANCETS***	Tier 1				
SAFETY 21G MIS LANCETS	*LANCETS***	Tier 3				
SAFETY 23G MIS LANCETS	*LANCETS***	Tier 3				
SAFETY 28G MIS LANCETS	*LANCETS***	Tier 3				
SENSILANCE MIS 21G	*LANCETS***	Tier 3				
SENSILANCE MIS 26G	*LANCETS***	Tier 3				
SENSILANCE MIS 28G	*LANCETS***	Tier 3				
SIMPLERA MIS SYNC SEN	*CONTINUOUS GLUCOSE SYSTEM SENSOR***	Tier 3	X			
SINGLE-LET MIS 23G	*LANCETS***	Tier 3				
SOFTCLIX MIS LANCETS	*LANCETS***	Tier 1				
SURE COMFORT MIS 32GX5/32	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
TECHLITE MIS LANC 26G	*LANCETS***	Tier 3				
THINLETS GP MIS 26G	*LANCETS***	Tier 3				
TRUE COMFORT MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
TRUPLUS LANC MIS 26G	*LANCETS***	Tier 3				
TRUPLUS LANC MIS 28G	*LANCETS***	Tier 3				
TRUPLUS LANC MIS 30G	*LANCETS***	Tier 3				
TRUPLUS LANC MIS 33G	*LANCETS***	Tier 3				

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TWIST LANCET MIS 30G	*LANCETS***	Tier 3				
TWIST LANCET MIS 30G MULT	*LANCETS***	Tier 3				
ULTIGUARD MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
ULTIGUARD MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
ULTRA THIN MIS LANC 28G	*LANCETS***	Tier 3				
ULTRA THIN MIS LANC 30G	*LANCETS***	Tier 3				
ULTRA THIN MIS LANCETS	*LANCETS***	Tier 3				
UNIFINE PNTF MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
UNIFINE PROT MIS 30GX8MM	INSULIN PEN NEEDLE 30 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
UNIFINE PROT MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
UNILET LANCT MIS 30G	*LANCETS***	Tier 3				
UNILET LANCT MIS 33G	*LANCETS***	Tier 3				
VERIFINE MIS UNIV 28G	*LANCETS***	Tier 3				
VERIFINE MIS UNIV 30G	*LANCETS***	Tier 3				
VERIFINE MIS UNIV 33G	*LANCETS***	Tier 3				
VERIFINE LAN MIS MINI 21G	*LANCETS***	Tier 3				
VERIFINE LAN MIS MINI 23G	*LANCETS***	Tier 3				
VERIFINE LAN MIS MINI 28G	*LANCETS***	Tier 3				
VERIFINE LAN MIS MINI 30G	*LANCETS***	Tier 3				
VERIFINE PEN MIS 32GX4MM	INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
VERIFINE PEN MIS 32GX6MM	INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
VIVAGUARD LIQ CONTROL	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 3				
VIVAGUARD LIQ CONTROL	*BLOOD GLUCOSE CALIBRATION - LIQUID***	Tier 2				
VIVAGUARD MIS 28G	*LANCETS***	Tier 3				
VIVAGUARD MIS 30G	*LANCETS***	Tier 3				
Diabetic/Endocrine Blood: Glucose Monitoring						
AUTOLET LANC MIS DEVICE	*LANCET DEVICES***	Tier 3				
AUTOLET LITE MIS LANCING	*LANCET DEVICES***	Tier 3				
CARETOUCH MIS EJECTOR	*LANCET DEVICES***	Tier 3				
CHOSEN MIS LANCING	*LANCET DEVICES***	Tier 3				
CVS LANCING MIS DEVICE	*LANCET DEVICES***	Tier 3				
FLOW-EZE MIS VENTED	HYPODERMIC NEEDLES (DISPOSABLE)	Tier 3				
GENTLE-LET MIS PLATFORM	*LANCETS MISC.***	Tier 3				

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IHEALTH LANC MIS DEVICE	*LANCET DEVICES***	Tier 3				
LANCET CARRY MIS CASE	*LANCETS MISC.***	Tier 3				
LANCING MIS DEVICE	*LANCET DEVICES***	Tier 3				
MICROLET MIS NEXT	*LANCET DEVICES***	Tier 3				
MINI LANCING MIS DEVICE	*LANCET DEVICES***	Tier 3				
MM LANCING MIS DEVICE	*LANCET DEVICES***	Tier 3				
ONETOUCH DEL MIS LANC DEV	*LANCET DEVICES***	Tier 1				
PSS SEL PLAT MIS	*LANCETS MISC.***	Tier 3				
TRUEDRAW MIS LANC DEV	*LANCET DEVICES***	Tier 3				
VIVAGUARD MIS LANCING	*LANCET DEVICES***	Tier 3				
Diuretics, Carbonic Anhydrase Inhibitors - Cardiac Drugs						
DICHLORPHENA TAB 50MG	DICHLORPHENAMIDE TAB 50 MG	Tier 1	X	X		
Diuretics, Loop - Cardiac Drugs						
BUMETANIDE TAB 0.5MG	BUMETANIDE TAB 0.5 MG	Tier 1				
BUMETANIDE TAB 1MG	BUMETANIDE TAB 1 MG	Tier 1				
BUMETANIDE TAB 2MG	BUMETANIDE TAB 2 MG	Tier 1				
BUMEX TAB 0.5MG	BUMETANIDE TAB 0.5 MG	Tier 3				
ETHACRYNIC TAB ACD 25MG	ETHACRYNIC ACID TAB 25 MG	Tier 1				
FUROSCIX KIT 80/10ML	FUROSEMIDE SUBCUTANEOUS CARTRIDGE KIT 80 MG/10ML	Tier 3/4	X			
FUROSEMIDE SOL 10MG/ML	FUROSEMIDE ORAL SOLN 10 MG/ML	Tier 1				
FUROSEMIDE SOL 40MG/5ML	FUROSEMIDE ORAL SOLN 8 MG/ML	Tier 1				
FUROSEMIDE TAB 20MG	FUROSEMIDE TAB 20 MG	Tier 1				
FUROSEMIDE TAB 40MG	FUROSEMIDE TAB 40 MG	Tier 1				
FUROSEMIDE TAB 80MG	FUROSEMIDE TAB 80 MG	Tier 1				
LASIX TAB 20MG	FUROSEMIDE TAB 20 MG	Tier 3/4				
LASIX TAB 40MG	FUROSEMIDE TAB 40 MG	Tier 3/4				
LASIX TAB 80MG	FUROSEMIDE TAB 80 MG	Tier 3/4				
SOAAZ TAB 20MG	TORSEMIDE TAB 20 MG	Tier 3/4		X		
SOAAZ TAB 40MG	TORSEMIDE TAB 40 MG	Tier 3/4		X		
SOAAZ TAB 60MG	TORSEMIDE TAB 60 MG	Tier 3/4		X		
TORSEMIDE TAB 100MG	TORSEMIDE TAB 100 MG	Tier 1				
TORSEMIDE TAB 10MG	TORSEMIDE TAB 10 MG	Tier 1				
TORSEMIDE TAB 20MG	TORSEMIDE TAB 20 MG	Tier 1				
TORSEMIDE TAB 5MG	TORSEMIDE TAB 5 MG	Tier 1				
Diuretics, Potassium-sparing - Cardiac Drugs						
AMILORIDE TAB 5MG	AMILORIDE HCL TAB 5 MG	Tier 1				
CAROSPIR SUS 25MG/5ML	SPIRONOLACTONE SUSP 25 MG/5ML	Tier 3/4	X			

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EPLERENONE TAB 25MG	EPLERENONE TAB 25 MG	Tier 1				
EPLERENONE TAB 50MG	EPLERENONE TAB 50 MG	Tier 1				
SPIRONOLACT TAB 100MG	SPIRONOLACTONE TAB 100 MG	Tier 1				
SPIRONOLACT TAB 25MG	SPIRONOLACTONE TAB 25 MG	Tier 1				
SPIRONOLACT TAB 50MG	SPIRONOLACTONE TAB 50 MG	Tier 1				
SPIRONOLACTO SUS 25MG/5ML	SPIRONOLACTONE SUSP 25 MG/5ML	Tier 1	X			
TRIAMTERENE CAP 100MG	TRIAMTERENE CAP 100 MG	Tier 1				
TRIAMTERENE CAP 50MG	TRIAMTERENE CAP 50 MG	Tier 1				
Diuretics, Thiazide - Cardiac Drugs						
CHLOROTHIAZI POW	CHLOROTHIAZIDE (BULK) POWDER	Tier 3				
CHLORTHALID TAB 25MG	CHLORTHALIDONE TAB 25 MG	Tier 1				
CHLORTHALID TAB 50MG	CHLORTHALIDONE TAB 50 MG	Tier 1				
DIURIL SUS 250/5ML	CHLOROTHIAZIDE SUSP 250 MG/5ML	Tier 2				
HEMICLOR TAB 12.5MG	CHLORTHALIDONE TAB 12.5 MG	Tier 3/4				
HYDROCHLOROT CAP 12.5MG	HYDROCHLOROTHIAZIDE CAP 12.5 MG	Tier 1				
HYDROCHLOROT TAB 12.5MG	HYDROCHLOROTHIAZIDE TAB 12.5 MG	Tier 1				
HYDROCHLOROT TAB 25MG	HYDROCHLOROTHIAZIDE TAB 25 MG	Tier 1				
HYDROCHLOROT TAB 50MG	HYDROCHLOROTHIAZIDE TAB 50 MG	Tier 1				
INDAPAMIDE TAB 1.25MG	INDAPAMIDE TAB 1.25 MG	Tier 1				
INDAPAMIDE TAB 2.5MG	INDAPAMIDE TAB 2.5 MG	Tier 1				
INZIRQO SUS 10MG/ML	HYDROCHLOROTHIAZIDE FOR SUSP 10 MG/ML	Tier 3/4	X			
METOLAZONE TAB 10MG	METOLAZONE TAB 10 MG	Tier 1				
METOLAZONE TAB 2.5MG	METOLAZONE TAB 2.5 MG	Tier 1				
METOLAZONE TAB 5MG	METOLAZONE TAB 5 MG	Tier 1				
THALITONE TAB 15MG	CHLORTHALIDONE TAB 15 MG	Tier 3/4				
Dopamine Agonists - Parkinson's Disease Drugs						
APOKYN INJ 10MG/ML	APOMORPHINE HCL SOLN CARTRIDGE 30 MG/3ML	Tier 3/4	X	X		
APOMORPHINE INJ 30MG/3ML	APOMORPHINE HCL SOLN CARTRIDGE 30 MG/3ML	Tier 1	X	X		
BROMOCRIPTIN CAP 5MG	BROMOCRIPTINE MESYLATE CAP 5 MG (BASE EQUIVALENT)	Tier 1				
BROMOCRIPTIN TAB 2.5MG	BROMOCRIPTINE MESYLATE TAB 2.5 MG (BASE EQUIVALENT)	Tier 1				
NEUPRO DIS 1MG/24HR	ROTIGOTINE TD PATCH 24HR 1 MG/24HR	Tier 3				
NEUPRO DIS 2MG/24HR	ROTIGOTINE TD PATCH 24HR 2 MG/24HR	Tier 3				
NEUPRO DIS 3MG/24HR	ROTIGOTINE TD PATCH 24HR 3 MG/24HR	Tier 3				
NEUPRO DIS 4MG/24HR	ROTIGOTINE TD PATCH 24HR 4 MG/24HR	Tier 3				

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NEUPRO DIS 6MG/24HR	ROTIGOTINE TD PATCH 24HR 6 MG/24HR	Tier 3				
NEUPRO DIS 8MG/24HR	ROTIGOTINE TD PATCH 24HR 8 MG/24HR	Tier 3				
PRAMIPEXOLE TAB 0.125MG	PRAMIPEXOLE DIHYDROCHLORIDE TAB 0.125 MG	Tier 1				
PRAMIPEXOLE TAB 0.25MG	PRAMIPEXOLE DIHYDROCHLORIDE TAB 0.25 MG	Tier 1				
PRAMIPEXOLE TAB 0.5MG	PRAMIPEXOLE DIHYDROCHLORIDE TAB 0.5 MG	Tier 1				
PRAMIPEXOLE TAB 0.75MG	PRAMIPEXOLE DIHYDROCHLORIDE TAB 0.75 MG	Tier 1				
PRAMIPEXOLE TAB 1.5MG	PRAMIPEXOLE DIHYDROCHLORIDE TAB 1.5 MG	Tier 1				
PRAMIPEXOLE TAB 1MG	PRAMIPEXOLE DIHYDROCHLORIDE TAB 1 MG	Tier 1				
ROPINIROLE TAB 0.25MG	ROPINIROLE HYDROCHLORIDE TAB 0.25 MG	Tier 1				
ROPINIROLE TAB 0.5MG	ROPINIROLE HYDROCHLORIDE TAB 0.5 MG	Tier 1				
ROPINIROLE TAB 12MG ER	ROPINIROLE HYDROCHLORIDE TAB ER 24HR 12 MG (BASE EQUIVALENT)	Tier 1				
ROPINIROLE TAB 1MG	ROPINIROLE HYDROCHLORIDE TAB 1 MG	Tier 1				
ROPINIROLE TAB 2MG	ROPINIROLE HYDROCHLORIDE TAB 2 MG	Tier 1				
ROPINIROLE TAB 2MG ER	ROPINIROLE HYDROCHLORIDE TAB ER 24HR 2 MG (BASE EQUIVALENT)	Tier 1				
ROPINIROLE TAB 3MG	ROPINIROLE HYDROCHLORIDE TAB 3 MG	Tier 1				
ROPINIROLE TAB 4MG	ROPINIROLE HYDROCHLORIDE TAB 4 MG	Tier 1				
ROPINIROLE TAB 4MG ER	ROPINIROLE HYDROCHLORIDE TAB ER 24HR 4 MG (BASE EQUIVALENT)	Tier 1				
ROPINIROLE TAB 5MG	ROPINIROLE HYDROCHLORIDE TAB 5 MG	Tier 1				
ROPINIROLE TAB 6MG ER	ROPINIROLE HYDROCHLORIDE TAB ER 24HR 6 MG (BASE EQUIVALENT)	Tier 1				
ROPINIROLE TAB 8MG ER	ROPINIROLE HYDROCHLORIDE TAB ER 24HR 8 MG (BASE EQUIVALENT)	Tier 1				
Dopamine Precursors/L-Amino Acid Decarboxylase Inhibitors - Parkinson's Disease Drugs						
CARB/LEVO TAB 10-100MG	CARBIDOPA & LEVODOPA TAB 10-100 MG	Tier 1				
CARB/LEVO TAB 10-100MG	CARBIDOPA & LEVODOPA ORALLY DISINTEGRATING TAB 10-100 MG	Tier 1				
CARB/LEVO TAB 25-100MG	CARBIDOPA & LEVODOPA TAB 25-100 MG	Tier 1				
CARB/LEVO TAB 25-100MG	CARBIDOPA & LEVODOPA ORALLY DISINTEGRATING TAB 25-100 MG	Tier 1				
CARB/LEVO TAB 25-250MG	CARBIDOPA & LEVODOPA TAB 25-250 MG	Tier 1				
CARB/LEVO TAB 25-250MG	CARBIDOPA & LEVODOPA ORALLY DISINTEGRATING TAB 25-250 MG	Tier 1				
CARB/LEVO 50 TAB /ENTACAP	CARBIDOPA-LEVODOPA-ENTACAPONE TABS 12.5-50-200 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
CARB/LEVO 75 TAB /ENTACAP	CARBIDOPA-LEVODOPA-ENTACAPONE TABS 18.75-75-200 MG	Tier 1				
CARB/LEVO ER TAB 25-100MG	CARBIDOPA & LEVODOPA TAB ER 25-100 MG	Tier 1				
CARB/LEVO ER TAB 50-200MG	CARBIDOPA & LEVODOPA TAB ER 50-200 MG	Tier 1				
CARB/LEVO100 TAB /ENTACAP	CARBIDOPA-LEVODOPA-ENTACAPONE TABS 25-100-200 MG	Tier 1				
CARB/LEVO125 TAB /ENTACAP	CARBIDOPA-LEVODOPA-ENTACAPONE TABS 31.25-125-200 MG	Tier 1				
CARB/LEVO150 TAB /ENTACAP	CARBIDOPA-LEVODOPA-ENTACAPONE TABS 37.5-150-200 MG	Tier 1				
CARB/LEVO200 TAB /ENTACAP	CARBIDOPA-LEVODOPA-ENTACAPONE TABS 50-200-200 MG	Tier 1				
CARBIDOPA TAB 25MG	CARBIDOPA TAB 25 MG	Tier 1				
CREXONT CAP 35-140MG	CARBIDOPA & LEVODOPA CAP ER 35-140 MG	Tier 3/4			X	
CREXONT CAP 52.5-210	CARBIDOPA & LEVODOPA CAP ER 52.5-210 MG	Tier 3/4			X	
CREXONT CAP 70-280MG	CARBIDOPA & LEVODOPA CAP ER 70-280 MG	Tier 3/4			X	
CREXONT CAP 87.5-350	CARBIDOPA & LEVODOPA CAP ER 87.5-350 MG	Tier 3/4			X	
DUOPA SUS 4.63-20	CARBIDOPA-LEVODOPA ENTERAL SUSP 4.63-20 MG/ML	Tier 3/4	X			
SINEMET TAB 10-100MG	CARBIDOPA & LEVODOPA TAB 10-100 MG	Tier 3/4				
SINEMET TAB 25-100MG	CARBIDOPA & LEVODOPA TAB 25-100 MG	Tier 3/4				
STALEVO 100 TAB	CARBIDOPA-LEVODOPA-ENTACAPONE TABS 25-100-200 MG	Tier 3/4				
STALEVO 125 TAB	CARBIDOPA-LEVODOPA-ENTACAPONE TABS 31.25-125-200 MG	Tier 3/4				
STALEVO 150 TAB	CARBIDOPA-LEVODOPA-ENTACAPONE TABS 37.5-150-200 MG	Tier 3/4				
STALEVO 200 TAB	CARBIDOPA-LEVODOPA-ENTACAPONE TABS 50-200-200 MG	Tier 3/4				
STALEVO 50 TAB	CARBIDOPA-LEVODOPA-ENTACAPONE TABS 12.5-50-200 MG	Tier 3/4				
STALEVO 75 TAB	CARBIDOPA-LEVODOPA-ENTACAPONE TABS 18.75-75-200 MG	Tier 3/4				
Dyslipidemics, Fibric Acid Derivatives - Cholesterol Control Drugs						
FENOFIBRATE CAP 130MG	FENOFIBRATE MICRONIZED CAP 130 MG	Tier 1				
FENOFIBRATE CAP 134MG	FENOFIBRATE MICRONIZED CAP 134 MG	Tier 1				
FENOFIBRATE CAP 150MG	FENOFIBRATE CAP 150 MG	Tier 1				
FENOFIBRATE CAP 200MG	FENOFIBRATE MICRONIZED CAP 200 MG	Tier 1				
FENOFIBRATE CAP 43MG	FENOFIBRATE MICRONIZED CAP 43 MG	Tier 1				
FENOFIBRATE CAP 50MG	FENOFIBRATE CAP 50 MG	Tier 1				
FENOFIBRATE CAP 67MG	FENOFIBRATE MICRONIZED CAP 67 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
FENOFIBRATE TAB 120MG	FENOFIBRATE TAB 120 MG	Tier 1				
FENOFIBRATE TAB 145MG	FENOFIBRATE TAB 145 MG	Tier 1				
FENOFIBRATE TAB 160MG	FENOFIBRATE TAB 160 MG	Tier 1				
FENOFIBRATE TAB 40MG	FENOFIBRATE TAB 40 MG	Tier 1				
FENOFIBRATE TAB 48MG	FENOFIBRATE TAB 48 MG	Tier 1				
FENOFIBRATE TAB 54MG	FENOFIBRATE TAB 54 MG	Tier 1				
FENOFIBRIC CAP 135MG DR	CHOLINE FENOFIBRATE CAP DR 135 MG (FENOFIBRIC ACID EQUIV)	Tier 1				
FENOFIBRIC CAP 45MG DR	CHOLINE FENOFIBRATE CAP DR 45 MG (FENOFIBRIC ACID EQUIV)	Tier 1				
FENOFIBRIC TAB 105MG	FENOFIBRIC ACID TAB 105 MG	Tier 1				
FENOFIBRIC TAB 35MG	FENOFIBRIC ACID TAB 35 MG	Tier 1				
GEMFIBROZIL TAB 600MG	GEMFIBROZIL TAB 600 MG	Tier 1				
LIPOFEN CAP 150MG	FENOFIBRATE CAP 150 MG	Tier 3/4				
LIPOFEN CAP 50MG	FENOFIBRATE CAP 50 MG	Tier 3/4				
LOPID TAB 600MG	GEMFIBROZIL TAB 600 MG	Tier 3/4				
Dyslipidemics, HMG CoA Reductase Inhibitors - Cholesterol Control Drugs						
ALTOPREV TAB 20MG ER	LOVASTATIN TAB ER 24HR 20 MG	Tier 3/4				
ALTOPREV TAB 40MG ER	LOVASTATIN TAB ER 24HR 40 MG	Tier 3/4				
ALTOPREV TAB 60MG ER	LOVASTATIN TAB ER 24HR 60 MG	Tier 3/4				
ATORVALIQ SUS 20MG/5ML	ATORVASTATIN CALCIUM SUSP 20 MG/5ML (4MG/ML) (BASE EQUIV)	Tier 3/4	X			
ATORVASTATIN TAB 10MG	ATORVASTATIN CALCIUM TAB 10 MG (BASE EQUIVALENT)	Tier 1^				
ATORVASTATIN TAB 20MG	ATORVASTATIN CALCIUM TAB 20 MG (BASE EQUIVALENT)	Tier 1^				
ATORVASTATIN TAB 40MG	ATORVASTATIN CALCIUM TAB 40 MG (BASE EQUIVALENT)	Tier 1				
ATORVASTATIN TAB 80MG	ATORVASTATIN CALCIUM TAB 80 MG (BASE EQUIVALENT)	Tier 1				
EZALLOR SPR CAP 10MG	ROSUVASTATIN CALCIUM SPRINKLE CAP 10 MG (BASE EQUIVALENT)	Tier 3	X			
EZALLOR SPR CAP 20MG	ROSUVASTATIN CALCIUM SPRINKLE CAP 20 MG (BASE EQUIVALENT)	Tier 3	X			
EZALLOR SPR CAP 40MG	ROSUVASTATIN CALCIUM SPRINKLE CAP 40 MG (BASE EQUIVALENT)	Tier 3	X			
EZALLOR SPR CAP 5MG	ROSUVASTATIN CALCIUM SPRINKLE CAP 5 MG (BASE EQUIVALENT)	Tier 3	X			
FLOLIPID SUS 20MG/5ML	SIMVASTATIN SUSP 20 MG/5ML (4 MG/ML)	Tier 3/4	X			
FLOLIPID SUS 40MG/5ML	SIMVASTATIN SUSP 40 MG/5ML (8 MG/ML)	Tier 3/4	X			
FLUVASTATIN CAP 20MG	FLUVASTATIN SODIUM CAP 20 MG (BASE EQUIVALENT)	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
FLUVASTATIN CAP 40MG	FLUVASTATIN SODIUM CAP 40 MG (BASE EQUIVALENT)	Tier 1				
FLUVASTATIN TAB 80MG ER	FLUVASTATIN SODIUM TAB ER 24 HR 80 MG (BASE EQUIVALENT)	Tier 1				
LIVALO TAB 1MG	PITAVASTATIN CALCIUM TAB 1 MG	Tier 3/4			X	
LIVALO TAB 2MG	PITAVASTATIN CALCIUM TAB 2 MG	Tier 3/4			X	
LIVALO TAB 4MG	PITAVASTATIN CALCIUM TAB 4 MG	Tier 3/4			X	
LOVASTATIN TAB 10MG	LOVASTATIN TAB 10 MG	HCR				
LOVASTATIN TAB 20MG	LOVASTATIN TAB 20 MG	HCR				
LOVASTATIN TAB 40MG	LOVASTATIN TAB 40 MG	HCR				
PITAVASTATIN TAB 1MG	PITAVASTATIN CALCIUM TAB 1 MG	Tier 1			X	
PITAVASTATIN TAB 2MG	PITAVASTATIN CALCIUM TAB 2 MG	Tier 1			X	
PITAVASTATIN TAB 4MG	PITAVASTATIN CALCIUM TAB 4 MG	Tier 1			X	
PRAVASTATIN TAB 10MG	PRAVASTATIN SODIUM TAB 10 MG	Tier 1				
PRAVASTATIN TAB 20MG	PRAVASTATIN SODIUM TAB 20 MG	Tier 1				
PRAVASTATIN TAB 40MG	PRAVASTATIN SODIUM TAB 40 MG	Tier 1				
PRAVASTATIN TAB 80MG	PRAVASTATIN SODIUM TAB 80 MG	Tier 1				
ROSUVASTATIN TAB 10MG	ROSUVASTATIN CALCIUM TAB 10 MG	Tier 1				
ROSUVASTATIN TAB 20MG	ROSUVASTATIN CALCIUM TAB 20 MG	Tier 1				
ROSUVASTATIN TAB 40MG	ROSUVASTATIN CALCIUM TAB 40 MG	Tier 1				
ROSUVASTATIN TAB 5MG	ROSUVASTATIN CALCIUM TAB 5 MG	Tier 1				
SIMVASTATIN TAB 10MG	SIMVASTATIN TAB 10 MG	Tier 1^				
SIMVASTATIN TAB 20MG	SIMVASTATIN TAB 20 MG	Tier 1^				
SIMVASTATIN TAB 40MG	SIMVASTATIN TAB 40 MG	Tier 1^				
SIMVASTATIN TAB 5MG	SIMVASTATIN TAB 5 MG	Tier 1^				
SIMVASTATIN TAB 80MG	SIMVASTATIN TAB 80 MG	Tier 1				
ZYPITAMAG TAB 2MG	PITAVASTATIN MAGNESIUM TAB 2 MG (BASE EQUIV)	Tier 3/4			X	
ZYPITAMAG TAB 4MG	PITAVASTATIN MAGNESIUM TAB 4 MG (BASE EQUIV)	Tier 3/4			X	
Dyslipidemics, Other - Miscellaneous Cholesterol Control Drugs						
CHOLESTYRAM POW 4GM	CHOLESTYRAMINE POWDER 4 GM/DOSE	Tier 1				
CHOLESTYRAM POW 4GM	CHOLESTYRAMINE POWDER PACKETS 4 GM	Tier 1				
CHOLESTYRAM POW 4GM LITE	CHOLESTYRAMINE LIGHT POWDER PACKETS 4 GM	Tier 1				
CHOLESTYRAM POW 4GM LITE	CHOLESTYRAMINE LIGHT POWDER 4 GM/DOSE	Tier 1				
COLESEVELAM PAK 3.75GM	COLESEVELAM HCL PACKET FOR SUSP 3.75 GM	Tier 1				
COLESEVELAM TAB 625MG	COLESEVELAM HCL TAB 625 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
COLESTID GRA 5GM	COLESTIPOL HCL GRANULES 5 GM	Tier 3				
COLESTID TAB 1GM	COLESTIPOL HCL TAB 1 GM	Tier 3/4				
COLESTID FLA GRA 5/7.5GM	COLESTIPOL HCL GRANULE PACKETS 5 GM	Tier 3/4				
COLESTID FLA GRA 5GM	COLESTIPOL HCL GRANULES 5 GM	Tier 3				
COLESTIPOL GRA 5GM	COLESTIPOL HCL GRANULE PACKETS 5 GM	Tier 1				
COLESTIPOL GRA 5GM	COLESTIPOL HCL GRANULES 5 GM	Tier 1				
COLESTIPOL TAB 1GM	COLESTIPOL HCL TAB 1 GM	Tier 1				
EZETIM/SIMVA TAB 10-10MG	EZETIMIBE-SIMVASTATIN TAB 10-10 MG	Tier 1				
EZETIM/SIMVA TAB 10-20MG	EZETIMIBE-SIMVASTATIN TAB 10-20 MG	Tier 1				
EZETIM/SIMVA TAB 10-40MG	EZETIMIBE-SIMVASTATIN TAB 10-40 MG	Tier 1				
EZETIM/SIMVA TAB 10-80MG	EZETIMIBE-SIMVASTATIN TAB 10-80 MG	Tier 1				
EZETIMIBE TAB 10MG	EZETIMIBE TAB 10 MG	Tier 1				
JUXTAPID CAP 10MG	LOMITAPIDE MESYLATE CAP 10 MG (BASE EQUIV)	Tier 3/4	X	X	X	
JUXTAPID CAP 20MG	LOMITAPIDE MESYLATE CAP 20 MG (BASE EQUIV)	Tier 3/4	X	X	X	
JUXTAPID CAP 30MG	LOMITAPIDE MESYLATE CAP 30 MG (BASE EQUIV)	Tier 3/4	X	X	X	
JUXTAPID CAP 5MG	LOMITAPIDE MESYLATE CAP 5 MG (BASE EQUIV)	Tier 3/4	X	X	X	
NEXLETOL TAB 180MG	BEMPEDOIC ACID TAB 180 MG	Tier 2	X	X	X	
NEXLIZET TAB 180/10MG	BEMPEDOIC ACID-EZETIMIBE TAB 180-10 MG	Tier 2	X	X	X	
NIACIN TAB 500MG ER	NIACIN TAB ER 500 MG (ANTIHYPERLIPIDEMIC)	Tier 1				
NIACIN ER TAB 1000MG	NIACIN TAB ER 1000 MG (ANTIHYPERLIPIDEMIC)	Tier 1				
NIACIN ER TAB 500MG	NIACIN TAB ER 500 MG (ANTIHYPERLIPIDEMIC)	Tier 1				
NIACIN ER TAB 500MG ER	NIACIN TAB ER 500 MG (ANTIHYPERLIPIDEMIC)	Tier 1				
NIACIN ER TAB 750MG	NIACIN TAB ER 750 MG (ANTIHYPERLIPIDEMIC)	Tier 1				
OMEGA-3-ACID CAP 1GM	OMEGA-3-ACID ETHYL ESTERS CAP 1 GM	Tier 1				
PREVALITE POW 4GM	CHOLESTYRAMINE LIGHT POWDER 4 GM/DOSE	Tier 1				
PREVALITE POW 4GM PK	CHOLESTYRAMINE LIGHT POWDER PACKETS 4 GM	Tier 1				
QUESTRAN POW 4GM	CHOLESTYRAMINE POWDER PACKETS 4 GM	Tier 3/4				
QUESTRAN POW 4GM	CHOLESTYRAMINE POWDER 4 GM/DOSE	Tier 3/4				
QUESTRAN POW 4GM LITE	CHOLESTYRAMINE LIGHT POWDER 4 GM/DOSE	Tier 3/4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
REPATHA INJ 140MG/ML	EVOLOCUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 140 MG/ML	Tier 2		X		
REPATHA PUSH INJ 420/3.5	EVOLOCUMAB SUBCUTANEOUS SOLN CARTRIDGE/INFUSOR 420 MG/3.5ML	Tier 2		X		
REPATHA SURE INJ 140MG/ML	EVOLOCUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 140 MG/ML	Tier 2		X		
ROSUV/EZETIM TAB 10-10MG	EZETIMIBE-ROSUVASTATIN CALCIUM TAB 10-10 MG	Tier 3/4				
ROSUV/EZETIM TAB 20-10MG	EZETIMIBE-ROSUVASTATIN CALCIUM TAB 10-20 MG	Tier 3/4				
ROSUV/EZETIM TAB 40-10MG	EZETIMIBE-ROSUVASTATIN CALCIUM TAB 10-40 MG	Tier 3/4				
ROSUV/EZETIM TAB 5-10MG	EZETIMIBE-ROSUVASTATIN CALCIUM TAB 10-5 MG	Tier 3/4				
ROSZET TAB 10-10MG	EZETIMIBE-ROSUVASTATIN CALCIUM TAB 10-10 MG	Tier 3/4				
ROSZET TAB 20-10MG	EZETIMIBE-ROSUVASTATIN CALCIUM TAB 10-20 MG	Tier 3/4				
ROSZET TAB 40-10MG	EZETIMIBE-ROSUVASTATIN CALCIUM TAB 10-40 MG	Tier 3/4				
ROSZET TAB 5-10MG	EZETIMIBE-ROSUVASTATIN CALCIUM TAB 10-5 MG	Tier 3/4				
Electrolyte/Mineral Replacement - Vitamin, Mineral and Body Fluid Deficiency Drugs						
ADVERA LIQ CHOCOLAT	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 2				
ADVERA LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 2				
ARGINAID PAK CHERRY	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3				
ARGINAID PAK ORANGE	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3				
ATABEX EC TAB 29-1MG	*PRENATAL VIT W/ DSS-IRON CARBONYL-FA TAB DR 29-1 MG***	Tier 3				
BOOST LIQ ORIGINAL	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
BOOST BREEZE LIQ 2-FLAVOR	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
BOOST HI-PRO LIQ CHOCOLAT	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
BOOST PLUS LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
BRAINSUSTAIN PAK	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3				
CALCIFOL WAF	CA CARB-FOLIC ACID-VIT D-B6-B12-BORON-MAG WAFER 1342-1.6 MG	Tier 3				
CARGLUMIC TAB 200MG	CARGLUMIC ACID SOLUBLE TAB 200 MG	Tier 1	X			
CARNITOR SOL 1GM/10ML	LEVOCARNITINE ORAL SOLN 1 GM/10ML (10%)	Tier 3/4				
CARNITOR TAB 330MG	LEVOCARNITINE TAB 330 MG	Tier 3/4				
CARNITOR SF SOL 1GM/10ML	LEVOCARNITINE ORAL SOLN 1 GM/10ML (10%)	Tier 3/4				
COMPLEAT LIQ PEPTIDE	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
COMPLEAT LIQ STND 1.4	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
COMPLEAT ORG LIQ BLND 1.2	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
CVS NUTRITIO LIQ CHOCOLAT	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 2	X			
CVS NUTRITIO LIQ CHOCOLAT	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 2				
CVS NUTRITIO LIQ STRABERY	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 2				
CVS NUTRITIO LIQ STRABERY	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 2	X			
CVS NUTRITIO LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 1				
CVS NUTRITIO LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 2	X			
CYTRA K GRA CRYSTALS	POTASSIUM CITRATE & CITRIC ACID POWDER PACK 3300-1002 MG	Tier 1				
DOJOLVI LIQ 100%	TRIHEPTANOIN ORAL LIQUID 100%	Tier 3/4	X			
EAA SUPPLEME POW	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3	X			
EAA SUPPLEME POW TROPICAL	*NUTRITIONAL SUPPLEMENT PACK**	Tier 2	X			
EFFER-K TAB 10MEQ	POTASSIUM BICARBONATE-CITRIC ACID EFFER TAB 10 MEQ	Tier 2				
EFFER-K TAB 20MEQ	POTASSIUM BICARBONATE-CITRIC ACID EFFER TAB 20 MEQ	Tier 2				
EFFER-K TAB 25MEQ EF	POTASSIUM BICARBONATE EFFER TAB 25 MEQ	Tier 1				
ENDARI POW 5GM	GLUTAMINE (SICKLE CELL) POWD PACK 5 GM	Tier 3/4		X		
ENSURE LIQ CHOCOLAT	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
ENSURE ENLIV LIQ STRAWBER	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
ENSURE ENLIV LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
ENSURE HP LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
ENSURE ORIGI LIQ FIBER	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
ENSURE ORIGN LIQ CHOCOLAT	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
ENSURE ORIGN LIQ CHOCOLAT	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
ENSURE ORIGN LIQ STRAWBER	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
ENSURE PLUS LIQ BUT PECN	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
ENSURE PLUS LIQ CHOCOLAT	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
ENSURE PLUS LIQ DRK CHOC	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
ENSURE PLUS LIQ STRAWBER	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
ENSURE PLUS LIQ STRWBERY	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
ENSURE PLUS LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
ENSURE PLUS LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
ENSURE SURGE LIQ IMMUNO	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
ENU NUTRITIO LIQ CHOCOLAT	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
ENU NUTRITIO LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
FLORIVA DRO 0.25MG	SODIUM FLUORIDE-VITAMIN D LIQD DROPS 0.25 MG/ML-400 UNIT/ML	Tier 3				
FLUORIDE CHW 0.25MG F	SODIUM FLUORIDE CHEW TAB 0.25 MG F (FROM 0.55 MG NAF)	HCR				
FLUORIDE CHW 0.5MG F	SODIUM FLUORIDE CHEW TAB 0.5 MG F (FROM 1.1 MG NAF)	HCR				
FLUORIDE CHW 1MG F	SODIUM FLUORIDE CHEW TAB 1 MG F (FROM 2.2 MG NAF)	HCR				
FT IMMUNE CHW SUPPORT	*MULTIPLE VITAMINS W/ MINERALS CHEW TAB**	Tier 1				
GA GEL PAK	*NUTRITIONAL SUPPLEMENT PACK**	Tier 2	X			
GALZIN CAP 25MG	ZINC ACETATE CAP 25 MG (ELEMENTAL ZINC)	Tier 3				
GALZIN CAP 50MG	ZINC ACETATE CAP 50 MG (ELEMENTAL ZINC)	Tier 3				
GLUCERNA LIQ BUT PECA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
GLUCERNA LIQ CHOCOLAT	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
GLUCERNA LIQ STRAWBER	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
GLUCOSE CTRL LIQ MAX PROT	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
GLUCOSE SUP LIQ 1.2	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
GLYCOSADE PAK	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3	X			
GLYTACTIN LIQ RES/LITE	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 2	X			
GLYTACTIN LIQ RESTOR10	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 2	X			
GLYTACTIN LIQ RTD 10	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 2	X			
GLYTACTIN LIQ RTD 15	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 2	X			
GLYTACTIN PAK BTMK/DLT	*NUTRITIONAL SUPPLEMENT PACK**	Tier 2	X			
GLYTACTIN PAK SWIRL 15	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3				
GLYTACTIN PAK SWIRL 15	*NUTRITIONAL SUPPLEMENT PACK**	Tier 2				
GLYTACTIN POW APPLE	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3				
GLYTACTIN POW BD 20/20	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3				
GLYTACTIN POW BETMLK15	*NUTRITIONAL SUPPLEMENT PACK**	Tier 2				
GLYTACTIN POW BETMLK15	*NUTRITIONAL SUPPLEMENT PACK**	Tier 2	X			
GLYTACTIN POW BLD 10PE	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3				
GLYTACTIN POW BLD PKU	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3				
GLYTACTIN POW PUNCH	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3				
GLYTACTIN POW RESTOR 5	*NUTRITIONAL SUPPLEMENT PACK**	Tier 2				
GLYTACTIN POW RST LT10	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3				
GLYTACTIN POW TROPICAL	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3				
GLYTACTIN 15 LIQ RTD LITE	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
GNP ELECTROL SOL UNFLAVOR	*ORAL ELECTROLYTE SOLUTION***	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
HCU COOLER LIQ	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 2				
HCU GEL PAK	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3	X			
HEMATINIC/FA TAB	FERROUS FUMARATE-FOLIC ACID TAB 324-1 MG	Tier 3/4				
HOMACTIN AA POW PLUS	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3	X			
INATAL GT TAB	*PRENATAL VIT W/ DSS-IRON CARBONYL-FA TAB 90-1 MG***	Tier 2				
ISOLEUCINE PAK 50MG	ISOLEUCINE ORAL POWDER PACKET 50 MG	Tier 2				
ISOLEUCINE POW 1000	ISOLEUCINE ORAL POWDER PACKET 1 GM	Tier 2				
JUVEN POW	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3				
K CITRATE SOL CITR ACD	POTASSIUM CITRATE & CITRIC ACID SOLN 1100-334 MG/5ML	Tier 1				
K-PHOS TAB	POTASSIUM PHOSPHATE MONOBASIC TAB 500 MG	Tier 2				
K-PHOS TAB NEUTRAL	POT PHOS MONOBASIC W/SOD PHOS DI & MONOBAS TAB 155-852-130MG	Tier 2				
K-PHOS TAB NO 2	POTASSIUM & SODIUM ACID PHOSPHATES TAB 305-700 MG	Tier 2				
K-PRIME TAB 25MEQ EF	POTASSIUM BICARBONATE EFFER TAB 25 MEQ	Tier 3				
K-TAB TAB 20MEQ	POTASSIUM CHLORIDE TAB ER 20 MEQ (1500 MG)	Tier 3				
KATE FARMS LIQ 1.0	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
KATE FARMS LIQ 1.0 CHOC	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
KATE FARMS LIQ 1.0 VAN	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
KATE FARMS LIQ 1.4	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
KATE FARMS LIQ 1.4	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
KATE FARMS LIQ 1.5	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
KATE FARMS LIQ CHOCOLAT	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
KATE FARMS LIQ STRAWBER	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
KATE FARMS LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
KETOVIE LIQ PEPTIDE	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
KETOVIE LIQ UNFLAVOR	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
KETOVIE 3:1 LIQ UNFLAVOR	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
KETOVIE 4:1 LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
KLOR-CON PAK 20MEQ	POTASSIUM CHLORIDE POWDER PACKET 20 MEQ	Tier 1				
KLOR-CON 10 TAB 10MEQ ER	POTASSIUM CHLORIDE TAB ER 10 MEQ	Tier 1				
KLOR-CON 8 TAB 8MEQ ER	POTASSIUM CHLORIDE TAB ER 8 MEQ (600 MG)	Tier 1				
KLOR-CON M10 TAB 10MEQ ER	POTASSIUM CHLORIDE MICROENCAPSULATED CRYST ER TAB 10 MEQ	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
KLOR-CON M15 TAB 15MEQ ER	POTASSIUM CHLORIDE MICROENCAPSULATED CRYST ER TAB 15 MEQ	Tier 1				
KLOR-CON M20 TAB 20MEQ ER	POTASSIUM CHLORIDE MICROENCAPSULATED CRYST ER TAB 20 MEQ	Tier 1				
KLOR-CON/EF TAB 25MEQ	POTASSIUM BICARBONATE EFFER TAB 25 MEQ	Tier 1				
L-CARNITINE CAP 500MG	LEVOCARNITINE L-TARTRATE CAP 500 MG	Tier 1				
L-GLUTAMINE POW 5GM	GLUTAMINE (SICKLE CELL) POWD PACK 5 GM	Tier 1		X		
L-LYSINE TAB 500MG	LYSINE TAB 500 MG	Tier 2	X			
L-TYROSINE CAP 500MG	TYROSINE CAP 500 MG	Tier 2	X			
L-TYROSINE CAP 500MG	TYROSINE CAP 500 MG	Tier 2				
LEVOCARNITIN SOL 1GM/10ML	LEVOCARNITINE ORAL SOLN 1 GM/10ML (10%)	Tier 1				
LEVOCARNITIN TAB 330MG	LEVOCARNITINE TAB 330 MG	Tier 1				
LIQ HOPE PEP LIQ BERRY	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
MAGNESIUM PL CAP 200MG	MAGNESIUM CAP 100 MG	Tier 1				
MCT PRO-CAL PAK	*NUTRITIONAL SUPPLEMENT PACK**	Tier 2				
MIFEPREX TAB 200MG	MIFEPRISTONE TAB 200 MG	Tier 3				
MIFEPRISTONE TAB 200MG	MIFEPRISTONE TAB 200 MG	Tier 1				
MMA/PA GEL PAK	*NUTRITIONAL SUPPLEMENT PACK**	Tier 2	X			
MSUD COOLER LIQ	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 2	X			
MSUD COOLER LIQ	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 2				
MSUD GEL PAK UNFLAVOR	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3	X			
NEONATAL FE TAB	*PRENATAL VITAMIN W/ IRON-FOLIC ACID TAB 90-1 MG***	Tier 3				
NEPRO/CARB LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
NUTREN LIQ JR/FIBER	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 2				
NUTREN LIQ JUNIOR	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 2				
OPTICLEANSE PAK GHI	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3	X			
OPTICLEANSE PAK PLUS	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3	X			
ORACIT SOL	SODIUM CITRATE & CITRIC ACID SOLN 490-640 MG/5ML	Tier 2				
ORAL CITRATE SOL	SODIUM CITRATE & CITRIC ACID SOLN 490-640 MG/5ML	Tier 2				
OSMOLITE LIQ 1.0 CAL	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
PEDI PEPTIDE LIQ 1.0	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
PEDI PEPTIDE LIQ 1.5	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
PEDI PEPTIDE LIQ 1.5 VAN	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
PEDI STANDAR LIQ 1.2 CHOC	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PEDI STANDAR LIQ 1.2 VAN	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
PEDIALYTE SOL ADV CARE	*ORAL ELECTROLYTE SOLUTION***	Tier 3				
PEDIALYTE SOL FRUIT PU	*ORAL ELECTROLYTE SOLUTION***	Tier 3				
PEPTAMEN AF LIQ UNFLAVOR	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
PERATIVE LIQ 1.3 CAL	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
PHENYLADE POW GMP ULTR	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3				
PHENYLALANIN PAK 50MG	PHENYLALANINE PACKET 50 MG	Tier 2				
PHOSPHA 250 TAB NEUTRAL	POT PHOS MONOBASIC W/SOD PHOS DI & MONOBAS TAB 155-852-130MG	Tier 2				
PHOSPHO-TRIN TAB 250 NEUT	POT PHOS MONOBASIC W/SOD PHOS DI & MONOBAS TAB 155-852-130MG	Tier 1				
PHOSPHOROUS TAB	POT PHOS MONOBASIC W/SOD PHOS DI & MONOBAS TAB 155-852-130MG	Tier 1				
PHOXILLUM SOL B22K/40	*BICARB-K 22-4 MEQ/L WITH PHOS 1 MMOL/L SOLN (CRRT)***	Tier 3				
PHOXILLUM SOL BK4/2.5	*BICARB-K-CA 32-4-2.5 MEQ/L WITH PHOS 1 MMOL/L SOLN (CRRT)*	Tier 3				
PIVOT LIQ 1.5 CAL	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
PKU COOLR 10 LIQ RED	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
PKU COOLR 15 LIQ ORANGE	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 2	X			
PKU COOLR 15 LIQ PURPLE	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 2	X			
PKU COOLR 15 LIQ RED	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 2	X			
PKU COOLR 20 LIQ ORANGE	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 2	X			
PKU COOLR 20 LIQ PURPLE	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 2	X			
PKU COOLR 20 LIQ RED	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 2	X			
PKU GEL PAK	*NUTRITIONAL SUPPLEMENT PACK**	Tier 2	X			
POT CHLORIDE CAP 10MEQ ER	POTASSIUM CHLORIDE CAP ER 10 MEQ	Tier 1				
POT CHLORIDE CAP 8MEQ ER	POTASSIUM CHLORIDE CAP ER 8 MEQ	Tier 1				
POT CHLORIDE POW 20MEQ	POTASSIUM CHLORIDE POWDER PACKET 20 MEQ	Tier 1				
POT CHLORIDE SOL 10%	POTASSIUM CHLORIDE ORAL SOLN 10% (20 MEQ/15ML)	Tier 1				
POT CHLORIDE SOL 20%	POTASSIUM CHLORIDE ORAL SOLN 20% (40 MEQ/15ML)	Tier 1				
POT CHLORIDE TAB 10MEQ ER	POTASSIUM CHLORIDE TAB ER 10 MEQ	Tier 1				
POT CHLORIDE TAB 15MEQ ER	POTASSIUM CHLORIDE TAB ER 15 MEQ	Tier 1				
POT CHLORIDE TAB 20MEQ ER	POTASSIUM CHLORIDE TAB ER 20 MEQ (1500 MG)	Tier 1				
POT CHLORIDE TAB 8MEQ ER	POTASSIUM CHLORIDE TAB ER 8 MEQ (600 MG)	Tier 1				
POT CITRA ER TAB 1080MG	POTASSIUM CITRATE TAB ER 10 MEQ (1080 MG)	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
POT CITRA ER TAB 1620MG	POTASSIUM CITRATE TAB ER 15 MEQ (1620 MG)	Tier 1				
POT CITRA ER TAB 540MG	POTASSIUM CITRATE TAB ER 5 MEQ (540 MG)	Tier 1				
POT CL MICRO TAB 10MEQ CR	POTASSIUM CHLORIDE MICROENCAPSULATED CRYSTALS ER TAB 10 MEQ	Tier 1				
POT CL MICRO TAB 10MEQ ER	POTASSIUM CHLORIDE MICROENCAPSULATED CRYSTALS ER TAB 10 MEQ	Tier 1				
POT CL MICRO TAB 15MEQ ER	POTASSIUM CHLORIDE MICROENCAPSULATED CRYSTALS ER TAB 15 MEQ	Tier 1				
POT CL MICRO TAB 20MEQ ER	POTASSIUM CHLORIDE MICROENCAPSULATED CRYSTALS ER TAB 20 MEQ	Tier 1				
PRENA 1 TRUE MIS	*PRENATAL W/O A W/FE CHEL-FE TAB 30-1.4 MG & DHA CAP 300MG PK*	Tier 3				
PRENA1 CHW	*PRENATAL W/ B2-B6-B12-D3-FOLIC ACID CHEW TAB 1.4 MG**	Tier 3				
PRISMASOL SOL 0/0/1.2	*BICARB 32 MEQ/L SOLN WITH MG 1.2 MEQ/L (CRRT)***	Tier 3				
PRISMASOL SOL 0/2.5	*BICARB 32 MEQ/L-DEXT SOLN WITH CA 2.5 MEQ/L (CRRT)***	Tier 3				
PRISMASOL SOL 2/0	*BICARB 32 MEQ/L-DEXT SOLN WITH K 2 MEQ/L (CRRT)***	Tier 3				
PRISMASOL SOL 2/3.5	*BICARB 32 MEQ/L-DEXT SOLN WITH K-CA 2-3.5 MEQ/L (CRRT)**	Tier 3				
PRISMASOL SOL 4/0/1.2	*BICARB 32 MEQ/L-DEXT SOLN WITH K-MG 4-1.2 MEQ/L (CRRT)**	Tier 3				
PRISMASOL SOL 4/2.5	*BICARB 32 MEQ/L-DEXT SOLN WITH K-CA 4-2.5 MEQ/L (CRRT)**	Tier 3				
PRISMASOL SOL B22GK4/0	*BICARB 22 MEQ/L-DEXT SOLN WITH K 4 MEQ/L (CRRT)***	Tier 3				
PRO-STAT LIQ FIBER	*AMINO ACIDS-PROTEIN HYDROLYSATE LIQUID***	Tier 3				
PROMOTE 1.0 LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
PROMOTE 1.0 LIQ W/ FIBER	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
PROSOURCE LIQ PLUS	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
PROSOURCE LIQ PLUS	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
PROSOURCE LIQ ZAC	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
PROTALITY LIQ CHOCOLAT	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
PROTALITY LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
PROTEINEX LIQ	*AMINO ACIDS-PROTEIN HYDROLYSATE LIQUID***	Tier 2				
PROTEINEX LIQ COC PINE	*AMINO ACIDS-PROTEIN HYDROLYSATE LIQUID***	Tier 3				
PROTEINEX LIQ P18	*AMINO ACIDS-PROTEIN HYDROLYSATE LIQUID***	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PROTEINEX-18 LIQ LEM/LIME	*AMINO ACIDS-PROTEIN HYDROLYSATE LIQUID***	Tier 2				
PULMOCARE LIQ 1.5 VAN	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
PUSH 20+ ADV LIQ APPLE	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
PUSH 20+ ADV LIQ BLK CHRY	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
PUSH 20+ ADV LIQ ORANGE	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
RENAL SUPPRT LIQ 1.8	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
S.O.S. 25 POW	*NUTRITIONAL SUPPLEMENT PACK**	Tier 2				
SERACAL POW	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3	X			
SOD CHLORIDE GRA	SODIUM CHLORIDE GRANULES	Tier 3				
SOD CITRATE SOL CITR ACID	SODIUM CITRATE & CITRIC ACID SOLN 500-334 MG/5ML	Tier 1				
SOD FLUORIDE DRO 0.5MG/ML	SODIUM FLUORIDE SOLN 0.5 MG/ML F (FROM 1.1 MG/ML NAF)	HCR				
SOD FLUORIDE TAB 0.5MG F	SODIUM FLUORIDE TAB 0.5 MG F (FROM 1.1 MG NAF)	HCR				
SOD FLUORIDE TAB 1MG F	SODIUM FLUORIDE TAB 1 MG F (FROM 2.2 MG NAF)	HCR				
SODIUM FLUOR CHW 0.25MG	SODIUM FLUORIDE CHEW TAB 0.25 MG F (FROM 0.55 MG NAF)	HCR				
SODIUM FLUOR CHW 0.5MG	SODIUM FLUORIDE CHEW TAB 0.5 MG F (FROM 1.1 MG NAF)	HCR				
SODIUM FLUOR CHW 1MG	SODIUM FLUORIDE CHEW TAB 1 MG F (FROM 2.2 MG NAF)	HCR				
TAURINE CAP 500MG	TAURINE CAP 500 MG	Tier 2				
TRI-VIT/FLUO DRO 0.25MG	*PEDIATRIC VITAMINS ACID W/ FLUORIDE SOLN 0.25 MG/ML***	Tier 1				
TRI-VIT/FLUO DRO 0.5MG	*PEDIATRIC VITAMINS ACID W/ FLUORIDE SOLN 0.5 MG/ML***	Tier 1				
TRICITRATES SOL	POT & SOD CITRATES W/ CIT AC SOLN 550-500-334 MG/5ML	Tier 1				
TYLACTIN POW RESTOR5	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3				
TYLACTIN RTD LIQ 15 CHOC	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
TYR COOLER LIQ RED	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 2				
TYR GEL PAK UNFLAVOR	*NUTRITIONAL SUPPLEMENT PACK**	Tier 2	X			
TYROSINE PAK 1000MG	TYROSINE ORAL POWDER PACKET 1000 MG	Tier 2	X			
UROCIT-K 10 TAB	POTASSIUM CITRATE TAB ER 10 MEQ (1080 MG)	Tier 3/4				
UROCIT-K 15 TAB	POTASSIUM CITRATE TAB ER 15 MEQ (1620 MG)	Tier 3/4				
UROCIT-K 5 TAB	POTASSIUM CITRATE TAB ER 5 MEQ (540 MG)	Tier 3/4				
VITAL 1.0 LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				

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VITAL 1.5 CA LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
VITAL AF 1.2 LIQ VANILLA	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
VITAL HP LIQ 1.0 CAL	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3				
VITAL PEPTID LIQ 1.5 VAN	*NUTRITIONAL SUPPLEMENT LIQUID**	Tier 3	X			
VITAMIN C TAB 500MG	ASCORBIC ACID TAB 500 MG	Tier 1				
VITAMIN D CAP 125MCG	CHOLECALCIFEROL CAP 125 MCG (5000 UNIT)	Tier 1				
VITATRUE MIS	*PRENAT W/O A W/FE CHEL-FA TAB 30-1.4 MG & DHA CAP 300MG PK*	Tier 3				
VIVONEX POW PEDIATRI	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3				
VIVONEX PLUS POW	*NUTRITIONAL SUPPLEMENT PACK**	Tier 3				
Electrolyte/Mineral/Metal Modifiers						
CHEMET CAP 100MG	SUCCIMER CAP 100 MG	Tier 2				
DEFERASIROX GRA 180MG	DEFERASIROX GRANULES PACKET 180 MG	Tier 1	X			
DEFERASIROX GRA 360MG	DEFERASIROX GRANULES PACKET 360 MG	Tier 1	X			
DEFERASIROX GRA 90MG	DEFERASIROX GRANULES PACKET 90 MG	Tier 1	X			
DEFERASIROX TAB 125MG	DEFERASIROX TAB FOR ORAL SUSP 125 MG	Tier 1	X			
DEFERASIROX TAB 180MG	DEFERASIROX TAB 180 MG	Tier 1	X			
DEFERASIROX TAB 250MG	DEFERASIROX TAB FOR ORAL SUSP 250 MG	Tier 1	X			
DEFERASIROX TAB 360MG	DEFERASIROX TAB 360 MG	Tier 1	X			
DEFERASIROX TAB 500MG	DEFERASIROX TAB FOR ORAL SUSP 500 MG	Tier 1	X			
DEFERASIROX TAB 90MG	DEFERASIROX TAB 90 MG	Tier 1	X			
DEFERIPRONE TAB 1000MG	DEFERIPRONE TAB 1000 MG	Tier 1	X			
DEFERIPRONE TAB 500MG	DEFERIPRONE TAB 500 MG	Tier 1	X			
FERPRX 2-DAY TAB 1000MG	DEFERIPRONE (TWICE DAILY) TAB 1000 MG	Tier 3/4	X			
FERRIPROX SOL 100MG/ML	DEFERIPRONE ORAL SOLN 100 MG/ML	Tier 2	X			
FERRIPROX TAB 1000MG	DEFERIPRONE TAB 1000 MG	Tier 3/4	X			
FERRIPROX TAB 500MG	DEFERIPRONE TAB 500 MG	Tier 3/4	X			
LOKELMA PAK 10GM	SODIUM ZIRCONIUM CYCLOSILICATE FOR SUSP PACKET 10 GM	Tier 3	X	X		
LOKELMA PAK 5GM	SODIUM ZIRCONIUM CYCLOSILICATE FOR SUSP PACKET 5 GM	Tier 3	X	X		
SAMSCA TAB 15MG	TOLVAPTAN TAB 15 MG	Tier 3/4	X	X		
SAMSCA TAB 30MG	TOLVAPTAN TAB 30 MG	Tier 3/4	X	X		
SOD POLY SUL POW	*SODIUM POLYSTYRENE SULFONATE POWDER**	Tier 1				
SPS SUS 15GM/60	SODIUM POLYSTYRENE SULFONATE SUSP 15 GM/60ML	Tier 3				
SPS SUS 30GM/120	SODIUM POLYSTYRENE SULFONATE RECTAL SUSP 30 GM/120ML	Tier 3				

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TOLVAPTAN PAK 15MG	TOLVAPTAN TAB THERAPY PACK 15 MG	Tier 1	X	X		
TOLVAPTAN PAK 30-15MG	TOLVAPTAN TAB THERAPY PACK 30 & 15 MG	Tier 1	X	X		
TOLVAPTAN PAK 45-15MG	TOLVAPTAN TAB THERAPY PACK 45 & 15 MG	Tier 1	X	X		
TOLVAPTAN PAK 60-30MG	TOLVAPTAN TAB THERAPY PACK 60 & 30 MG	Tier 1	X	X		
TOLVAPTAN PAK 90-30MG	TOLVAPTAN TAB THERAPY PACK 90 & 30 MG	Tier 1	X	X		
TOLVAPTAN TAB 15MG	TOLVAPTAN TAB 15 MG	Tier 1	X	X		
TOLVAPTAN TAB 15MG	TOLVAPTAN TAB 15 MG	Tier 1	X			
TOLVAPTAN TAB 30MG	TOLVAPTAN TAB 30 MG	Tier 1	X	X		
TOLVAPTAN TAB 30MG	TOLVAPTAN TAB 30 MG	Tier 1	X			
TRIENTINE CAP 250MG	TRIENTINE HCL CAP 250 MG	Tier 1	X			
TRIENTINE CAP 500MG	TRIENTINE HCL CAP 500 MG	Tier 1	X			
VELTASSA POW 16.8GM	PATROMER SORBITE X CALCIUM FOR SUSP PACKET 16.8 GM (BASE EQ)	Tier 3	X	X		
VELTASSA POW 1GM	PATROMER SORBITE X CALCIUM FOR SUSP PACKET 1 GM (BASE EQ)	Tier 3	X	X		
VELTASSA POW 25.2GM	PATROMER SORBITE X CALCIUM FOR SUSP PACKET 25.2 GM (BASE EQ)	Tier 3	X	X		
VELTASSA POW 8.4GM	PATROMER SORBITE X CALCIUM FOR SUSP PACKET 8.4 GM (BASE EQ)	Tier 3	X	X		
Emetogenic Therapy Adjuncts - Nausea and Vomiting Drugs						
ANZEMET TAB 50MG	DOLASETRON MESYLATE TAB 50 MG	Tier 3				
APREPITANT CAP 125MG	APREPITANT CAPSULE 125 MG	Tier 1				
APREPITANT CAP 40MG	APREPITANT CAPSULE 40 MG	Tier 1				
APREPITANT CAP 80MG	APREPITANT CAPSULE 80 MG	Tier 1				
APREPITANT PAK 125 & 80	APREPITANT CAPSULE THERAPY PACK 80 & 125 MG	Tier 1				
DRONABINOL CAP 10MG	DRONABINOL CAP 10 MG	Tier 1				
DRONABINOL CAP 2.5MG	DRONABINOL CAP 2.5 MG	Tier 1				
DRONABINOL CAP 5MG	DRONABINOL CAP 5 MG	Tier 1				
EMEND SUS 125MG	APREPITANT FOR ORAL SUSP 125 MG (125 MG/5ML)	Tier 2				
GRANISETRON TAB 1MG	GRANISETRON HCL TAB 1 MG	Tier 1				
ONDANSETRON SOL 4MG/5ML	ONDANSETRON HCL ORAL SOLN 4 MG/5ML	Tier 1				
ONDANSETRON TAB 24MG	ONDANSETRON HCL TAB 24 MG	Tier 1				
ONDANSETRON TAB 4MG	ONDANSETRON HCL TAB 4 MG	Tier 1				
ONDANSETRON TAB 4MG ODT	ONDANSETRON ORALLY DISINTEGRATING TAB 4 MG	Tier 1				
ONDANSETRON TAB 8MG	ONDANSETRON HCL TAB 8 MG	Tier 1				
ONDANSETRON TAB 8MG ODT	ONDANSETRON ORALLY DISINTEGRATING TAB 8 MG	Tier 1				

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SYNDROS SOL 5MG/ML	DRONABINOL SOLN 5 MG/ML	Tier 3/4	X	X		
Enzyme Inhibitors - Chemotherapy Agents						
BALVERSA TAB 3MG	ERDAFITINIB TAB 3 MG	Tier 3/4	X	X		
BALVERSA TAB 4MG	ERDAFITINIB TAB 4 MG	Tier 3/4	X	X		
BALVERSA TAB 5MG	ERDAFITINIB TAB 5 MG	Tier 3/4	X	X		
ETOPOSIDE CAP 50MG	ETOPOSIDE CAP 50 MG	Tier 1				
HYCANTIN CAP 0.25MG	TOPOTECAN HCL CAP 0.25 MG (BASE EQUIV)	Tier 2	X	X		
HYCANTIN CAP 1MG	TOPOTECAN HCL CAP 1 MG (BASE EQUIV)	Tier 2	X	X		
LYTGOBI TAB 4MG	FUTIBATINIB TAB THERAPY PACK 4 MG (12 MG DAILY DOSE)	Tier 3/4	X	X		
LYTGOBI TAB 4MG	FUTIBATINIB TAB THERAPY PACK 4 MG (16 MG DAILY DOSE)	Tier 3/4	X	X		
LYTGOBI TAB 4MG	FUTIBATINIB TAB THERAPY PACK 4 MG (20 MG DAILY DOSE)	Tier 3/4	X	X		
PEMAZYRE TAB 13.5MG	PEMIGATINIB TAB 13.5 MG	Tier 3/4	X	X		
PEMAZYRE TAB 4.5MG	PEMIGATINIB TAB 4.5 MG	Tier 3/4	X	X		
PEMAZYRE TAB 9MG	PEMIGATINIB TAB 9 MG	Tier 3/4	X	X		
TALZENNA CAP 0.25MG	TALAZOPARIB TOSYLATE CAP 0.25 MG (BASE EQUIVALENT)	Tier 3/4	X	X	X	
TALZENNA CAP 1MG	TALAZOPARIB TOSYLATE CAP 1 MG (BASE EQUIVALENT)	Tier 3/4	X	X	X	
ZYDELIG TAB 150MG	IDELALISIB TAB 150 MG	Tier 3/4	X	X		
Enzyme Replacements/Modifiers - Enzyme Replacements/Modifying Drugs						
EVRYSDI SOL	RISDIPLAM FOR SOLN 0.75 MG/ML	Tier 2	X	X		
EVRYSDI TAB 5MG	RISDIPLAM TAB 5 MG	Tier 2	X	X		
Ergot Alkaloids - Migraine Drugs						
DIHYDROERGOT CRY MESYLATE	DIHYDROERGOTAMINE MESYLATE CRYSTALS	Tier 3				
DIHYDROERGOT INJ 1MG/ML	DIHYDROERGOTAMINE MESYLATE INJ 1 MG/ML	Tier 1				
DIHYDROERGOT SPR 4MG/ML	DIHYDROERGOTAMINE MESYLATE NASAL SPRAY 4 MG/ML	Tier 1			X	
ERGOMAR SUB 2MG	ERGOTAMINE TARTRATE SL TAB 2 MG	Tier 3/4			X	
ERGOT/CAFFEN TAB 1-100MG	ERGOTAMINE W/ CAFFEINE TAB 1-100 MG	Tier 1				
MIGERGOT SUP 2/100	ERGOTAMINE W/ CAFFEINE SUPPOS 2-100 MG	Tier 3				
Estrogens - Hormone Replacement/Modifying Drugs						
ABIGALE TAB 1-0.5MG	ESTRADIOL & NORETHINDRONE ACETATE TAB 1-0.5 MG	Tier 1				
ABIGALE LO TAB 0.5-0.1	ESTRADIOL & NORETHINDRONE ACETATE TAB 0.5-0.1 MG	Tier 1				
ACTIVELLA TAB 1-0.5MG	ESTRADIOL & NORETHINDRONE ACETATE TAB 1-0.5 MG	Tier 3/4				

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AFIRMELLE TAB 0.1-0.02	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG	HCR				
ALORA DIS 0.025MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.025 MG/24HR	Tier 3		X		
ALORA DIS 0.075MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.075 MG/24HR	Tier 3		X		
ALORA DIS 0.1MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.1 MG/24HR	Tier 3		X		
ALTAVERA TAB	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	HCR				
ALYACEN TAB 1/35	NORETHINDRONE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG	HCR				
ALYACEN TAB 7/7/7	NORETHINDRONE-ETH ESTRADIOL TAB 0.5-35/0.75-35/1-35 MG-MCG	HCR				
AMABELZ TAB 0.5-0.1	ESTRADIOL & NORETHINDRONE ACETATE TAB 0.5-0.1 MG	Tier 1				
AMETHIA TAB	LEVONORG-ETH EST TAB 0.15-0.03MG(84) & ETH EST TAB 0.01MG(7)	HCR				
AMETHYST TAB 90-20MCG	LEVONORGESTREL-ETHINYL ESTRADIOL (CONTINUOUS) TAB 90-20 MCG	HCR				
ANGELIQ TAB 0.25-0.5	DROSPIRENONE-ESTRADIOL TAB 0.25-0.5 MG	Tier 3				
ANGELIQ TAB 0.5-1MG	DROSPIRENONE-ESTRADIOL TAB 0.5-1 MG	Tier 3				
ANNOVERA MIS	SEGESTERONE ACE-ETHINYL ESTRADIOL VA RING 0.15-0.013 MG/24HR	Tier 3		X		
APRI TAB	DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	HCR				
ARANELLE TAB	NORETHINDRONE-ETH ESTRADIOL TAB 0.5-35/1-35/0.5-35 MG-MCG	HCR				
ASHLYNA TAB	LEVONORG-ETH EST TAB 0.15-0.03MG(84) & ETH EST TAB 0.01MG(7)	HCR				
AUBRA EQ TAB 0.1-0.02	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG	HCR				
AUROVELA TAB 1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG	HCR				
AUROVELA TAB 1/20	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1 MG-20 MCG	HCR				
AUROVELA 24 TAB FE 1/20	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24)	HCR				
AUROVELA FE TAB 1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	HCR				
AUROVELA FE TAB 1/20	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	HCR				
AVIANE TAB	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG	HCR				

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AYUNA TAB	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	HCR				
AZURETTE TAB	DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5)	HCR				
BALCOLTRA TAB 0.1-20	LEVONORGESTREL-ETHINYL ESTRADIOL-FE TAB 0.1 MG-20 MCG (21)	Tier 3/4				
BALZIVA TAB	NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.4 MG-35 MCG	HCR				
BIJUVA CAP 0.5-100	ESTRADIOL-PROGESTERONE CAP 0.5-100 MG	Tier 3				
BIJUVA CAP 1-100MG	ESTRADIOL-PROGESTERONE CAP 1-100 MG	Tier 3				
BLISOVI 24 TAB FE 1/20	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24)	HCR				
BLISOVI FE TAB 1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	HCR				
BLISOVI FE TAB 1/20	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	HCR				
BRIELLYN TAB	NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.4 MG-35 MCG	HCR				
CAMRESE TAB	LEVONORG-ETH EST TAB 0.15-0.03MG(84) & ETH EST TAB 0.01MG(7)	HCR				
CAMRESE LO TAB	LEVONORG-ETH EST TAB 0.1-0.02MG(84) & ETH EST TAB 0.01MG(7)	HCR				
CHARLOTTE 24 CHW FE 1/20	NORETHINDRONE ACE-ETH ESTRADIOL-FE CHEW TAB 1 MG-20 MCG (24)	HCR				
CHATEAL EQ TAB 0.15/30	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	HCR				
CLIMARA PRO DIS WEEKLY	ESTRADIOL-LEVONORGESTREL TD PATCH WEEKLY 0.045-0.015 MG/DAY	Tier 2		X		
COMBIPATCH DIS	ESTRADIOL-NORETHINDRONE ACE TD PTTW 0.05-0.14 MG/DAY	Tier 2		X		
COMBIPATCH DIS	ESTRADIOL-NORETHINDRONE ACE TD PTTW 0.05-0.25 MG/DAY	Tier 2		X		
CONJ ESTROGN TAB 0.3MG	ESTROGENS, CONJUGATED TAB 0.3 MG	Tier 1				
CONJ ESTROGN TAB 0.45MG	ESTROGENS, CONJUGATED TAB 0.45 MG	Tier 1				
CONJ ESTROGN TAB 0.625MG	ESTROGENS, CONJUGATED TAB 0.625 MG	Tier 1				
CONJ ESTROGN TAB 0.9MG	ESTROGENS, CONJUGATED TAB 0.9 MG	Tier 1				
CONJ ESTROGN TAB 1.25MG	ESTROGENS, CONJUGATED TAB 1.25 MG	Tier 1				
COVARYX TAB 1.25-2.5	ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 1.25-2.5 MG	Tier 2				
COVARYX HS TAB	ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 0.625-1.25 MG	Tier 3				
CRYSSELLE TAB	NORGESTREL & ETHINYL ESTRADIOL TAB 0.3 MG-30 MCG	HCR				

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CRYSSELLE-28 TAB 28 TABS	NORGESTREL & ETHINYL ESTRADIOL TAB 0.3 MG-30 MCG	HCR				
CYRED EQ TAB	DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	HCR				
DASETTA TAB 1/35	NORETHINDRONE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG	HCR				
DASETTA TAB 7/7/7	NORETHINDRONE-ETH ESTRADIOL TAB 0.5-35/0.75-35/1-35 MG-MCG	HCR				
DAYSEE TAB	LEVONORG-ETH EST TAB 0.15-0.03MG(84) & ETH EST TAB 0.01MG(7)	HCR				
DELESTROGEN INJ 10MG/ML	ESTRADIOL VALERATE IM IN OIL 10 MG/ML	Tier 3/4				
DELESTROGEN INJ 20MG/ML	ESTRADIOL VALERATE IM IN OIL 20 MG/ML	Tier 3/4				
DELESTROGEN INJ 40MG/ML	ESTRADIOL VALERATE IM IN OIL 40 MG/ML	Tier 3/4				
DELYLA TAB 0.1-0.02	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG	HCR				
DEPO-ESTRADI INJ 5MG/ML	ESTRADIOL CYPIONATE IM IN OIL 5 MG/ML	Tier 3				
DESO/ETHINYL TAB ESTRADIO	DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5)	HCR				
DIVIGEL GEL 0.25MG	ESTRADIOL TD GEL 0.25 MG/0.25GM (0.1%)	Tier 3				
DIVIGEL GEL 0.5MG	ESTRADIOL TD GEL 0.5 MG/0.5GM (0.1%)	Tier 3				
DIVIGEL GEL 0.75MG	ESTRADIOL TD GEL 0.75 MG/0.75GM (0.1%)	Tier 3				
DIVIGEL GEL 1.25MG	ESTRADIOL TD GEL 1.25 MG/1.25GM (0.1%)	Tier 3				
DIVIGEL GEL 1MG/GM	ESTRADIOL TD GEL 1 MG/GM (0.1%)	Tier 3				
DOLISHALE TAB 90-20MCG	LEVONORGESTREL-ETHINYL ESTRADIOL (CONTINUOUS) TAB 90-20 MCG	HCR				
DOTTI DIS 0.025MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.025 MG/24HR	Tier 1		X		
DOTTI DIS 0.0375MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.0375 MG/24HR	Tier 1		X		
DOTTI DIS 0.05MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.05 MG/24HR	Tier 1		X		
DOTTI DIS 0.075MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.075 MG/24HR	Tier 1		X		
DOTTI DIS 0.1MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.1 MG/24HR	Tier 1		X		
DROS/ETH EST TAB LEVOMEFO	DROSPIRENONE-ETHINYL ESTRAD-LEVOMEFOLATE TAB 3-0.02-0.451 MG	Tier 1				
DROS/ETH EST TAB LEVOMEFO	DROSPIRENONE-ETHINYL ESTRAD-LEVOMEFOLATE TAB 3-0.03-0.451 MG	HCR				
DROSPIR/ETHI TAB 3-0.02MG	DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.02 MG	HCR				
DROSPIR/ETHI TAB 3-0.03MG	DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.03 MG	HCR				

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DROSPIRENONE TAB ETHY EST	DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.02 MG	HCR				
DUAVEE TAB 0.45-20	CONJUGATED ESTROGENS-BAZEDOXIFENE TAB 0.45-20 MG	Tier 3		X		
EEMT TAB 1.25-2.5	ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 1.25-2.5 MG	Tier 2				
EEMT HS TAB	ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 0.625-1.25 MG	Tier 3				
ELESTRIN GEL 0.06%	ESTRADIOL GEL 0.06% (0.52 MG/0.87 GM METERED-DOSE PUMP)	Tier 3				
ELINEST TAB	NORGESTREL & ETHINYL ESTRADIOL TAB 0.3 MG-30 MCG	HCR				
ELURYNG MIS	ETONOGESTREL-ETHINYL ESTRADIOL VA RING 0.12-0.015 MG/24HR	HCR				
ENILLORING MIS	ETONOGESTREL-ETHINYL ESTRADIOL VA RING 0.12-0.015 MG/24HR	HCR				
ENPRESSE-28 TAB	LEVONORGESTREL-ETH ESTRA TAB 0.05-30/0.075-40/0.125-30MG-MCG	HCR				
ENSKYCE TAB	DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	HCR				
EST ESTROGEN TAB MTEST HS	ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 0.625-1.25 MG	Tier 1				
ESTARYLLA TAB 0.25-35	NORGESTIMATE & ETHINYL ESTRADIOL TAB 0.25 MG-35 MCG	HCR				
ESTRA/NORETH TAB 0.5-0.1	ESTRADIOL & NORETHINDRONE ACETATE TAB 0.5-0.1 MG	Tier 1				
ESTRA/NORETH TAB 1-0.5MG	ESTRADIOL & NORETHINDRONE ACETATE TAB 1-0.5 MG	Tier 1				
ESTRAD VAL INJ 10MG/ML	ESTRADIOL VALERATE IM IN OIL 10 MG/ML	Tier 1				
ESTRAD VAL INJ 20MG/ML	ESTRADIOL VALERATE IM IN OIL 20 MG/ML	Tier 1				
ESTRAD VAL INJ 40MG/ML	ESTRADIOL VALERATE IM IN OIL 40 MG/ML	Tier 1				
ESTRADIOL CRE 0.01%	ESTRADIOL VAGINAL CREAM 0.01%	Tier 1				
ESTRADIOL DIS 0.025MG	ESTRADIOL TD PATCH WEEKLY 0.025 MG/24HR	Tier 1		X		
ESTRADIOL DIS 0.025MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.025 MG/24HR	Tier 1		X		
ESTRADIOL DIS 0.0375MG	ESTRADIOL TD PATCH WEEKLY 0.0375 MG/24HR (37.5 MCG/24HR)	Tier 1		X		
ESTRADIOL DIS 0.0375MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.0375 MG/24HR	Tier 1		X		
ESTRADIOL DIS 0.05MG	ESTRADIOL TD PATCH WEEKLY 0.05 MG/24HR	Tier 1		X		
ESTRADIOL DIS 0.05MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.05 MG/24HR	Tier 1		X		
ESTRADIOL DIS 0.06MG	ESTRADIOL TD PATCH WEEKLY 0.06 MG/24HR	Tier 1		X		

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ESTRADIOL DIS 0.075MG	ESTRADIOL TD PATCH WEEKLY 0.075 MG/24HR	Tier 1		X		
ESTRADIOL DIS 0.075MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.075 MG/24HR	Tier 1		X		
ESTRADIOL DIS 0.1MG	ESTRADIOL TD PATCH WEEKLY 0.1 MG/24HR	Tier 1		X		
ESTRADIOL DIS 0.1MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.1 MG/24HR	Tier 1		X		
ESTRADIOL GEL 0.06%	ESTRADIOL GEL 0.06% (0.75 MG/1.25 GM METERED-DOSE PUMP)	Tier 1		X		
ESTRADIOL GEL 0.25MG	ESTRADIOL TD GEL 0.25 MG/0.25GM (0.1%)	Tier 1				
ESTRADIOL GEL 0.5MG	ESTRADIOL TD GEL 0.5 MG/0.5GM (0.1%)	Tier 1				
ESTRADIOL GEL 0.75MG	ESTRADIOL TD GEL 0.75 MG/0.75GM (0.1%)	Tier 1				
ESTRADIOL GEL 1.25MG	ESTRADIOL TD GEL 1.25 MG/1.25GM (0.1%)	Tier 1				
ESTRADIOL GEL 1MG/GM	ESTRADIOL TD GEL 1 MG/GM (0.1%)	Tier 1				
ESTRADIOL TAB 0.5MG	ESTRADIOL TAB 0.5 MG	Tier 1				
ESTRADIOL TAB 10MCG	ESTRADIOL VAGINAL TAB 10 MCG	Tier 1				
ESTRADIOL TAB 1MG	ESTRADIOL TAB 1 MG	Tier 1				
ESTRADIOL TAB 2MG	ESTRADIOL TAB 2 MG	Tier 1				
ESTRATEST FS TAB 1.25-2.5	ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 1.25-2.5 MG	Tier 1				
ESTRATEST HS TAB	ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 0.625-1.25 MG	Tier 3				
ESTRING MIS 7.5/24HR	ESTRADIOL VAGINAL RING 2 MG (7.5 MCG/24HRS)	Tier 2		X		
ESTROG/MTEST TAB 1.25-2.5	ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 1.25-2.5 MG	Tier 1				
ESTROGEL GEL 0.06%	ESTRADIOL GEL 0.06% (0.75 MG/1.25 GM METERED-DOSE PUMP)	Tier 3		X		
ETHY ETH EST TAB 1-35	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG	HCR				
ETHYNODIOL TAB 1-50	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-50 MCG	HCR				
ETONOGESTREL MIS ETHY EST	ETONOGESTREL-ETHINYL ESTRADIOL VA RING 0.12-0.015 MG/24HR	HCR				
EVAMIST SPR 1.53MG	ESTRADIOL TRANSDERMAL SPRAY 1.53 MG/ SPRAY	Tier 2				
FALMINA TAB	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG	HCR				
FEIRZA TAB 1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	HCR				
FEIRZA TAB 1/20	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	HCR				
FEMLYV TAB 1/0.02MG	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB DISINT 1 MG-20 MCG	Tier 3/4				

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FEMRING MIS 0.05/24H	ESTRADIOL ACETATE VAGINAL RING 0.05 MG/24HR	Tier 3		X		
FEMRING MIS 0.1MG/24	ESTRADIOL ACETATE VAGINAL RING 0.1 MG/24HR	Tier 3		X		
FINZALA CHW FE 1/20	NORETHINDRONE ACE-ETH ESTRADIOL-FE CHEW TAB 1 MG-20 MCG (24)	HCR				
FYAVOLV TAB 0.5-2.5	NORETHINDRONE ACETATE-ETHINYL ESTRADIOL TAB 0.5 MG-2.5 MCG	Tier 1				
FYAVOLV TAB 1-5	NORETHINDRONE ACETATE-ETHINYL ESTRADIOL TAB 1 MG-5 MCG	Tier 1				
GALBRIELA CHW	NORETHINDRONE & ETHINYL ESTRADIOL-FE CHEW TAB 0.8 MG-25 MCG	HCR				
GEMMILY CAP 1/20	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE CAP 1 MG-20 MCG (24)	Tier 1				
HAILEY TAB 1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG	HCR				
HAILEY 24 TAB FE	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24)	HCR				
HAILEY FE TAB 1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	HCR				
HAILEY FE TAB 1/20	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	HCR				
HALOETTE MIS	ETONOGESTREL-ETHINYL ESTRADIOL VA RING 0.12-0.015 MG/24HR	HCR				
ICLEVIA TAB	LEVONORGESTREL & ETHINYL ESTRADIOL (91-DAY) TAB 0.15-0.03 MG	HCR				
IMVEXXY MAIN SUP 10MCG	ESTRADIOL VAGINAL INSERT 10 MCG	Tier 2		X		
IMVEXXY MAIN SUP 4MCG	ESTRADIOL VAGINAL INSERT 4 MCG	Tier 2		X		
IMVEXXY STRT SUP 10MCG	ESTRADIOL VAGINAL INSERT STARTER PACK 10 MCG	Tier 2		X		
IMVEXXY STRT SUP 4MCG	ESTRADIOL VAGINAL INSERT STARTER PACK 4 MCG	Tier 2		X		
INTROVALE TAB	LEVONORGESTREL & ETHINYL ESTRADIOL (91-DAY) TAB 0.15-0.03 MG	HCR				
ISIBLOOM TAB	DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	HCR				
JAIMIESS TAB	LEVONORG-ETH EST TAB 0.15-0.03MG(84) & ETH EST TAB 0.01MG(7)	HCR				
JASMIEL TAB 3-0.02MG	DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.02 MG	HCR				
JINTELI TAB 1MG-5MCG	NORETHINDRONE ACETATE-ETHINYL ESTRADIOL TAB 1 MG-5 MCG	Tier 1				
JOLESSA TAB	LEVONORGESTREL & ETHINYL ESTRADIOL (91-DAY) TAB 0.15-0.03 MG	HCR				

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JOYEUX TAB 0.1-20	LEVONORGESTREL-ETHINYL ESTRADIOL-FE TAB 0.1 MG-20 MCG (21)	HCR				
JULEBER TAB	DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	HCR				
JUNEL 1.5/30 TAB	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG	HCR				
JUNEL 1/20 TAB	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1 MG-20 MCG	HCR				
JUNEL FE TAB 1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	HCR				
JUNEL FE TAB 1/20	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	HCR				
JUNEL FE 24 TAB 1/20	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24)	HCR				
KAITLIB FE CHW	NORETHINDRONE & ETHINYL ESTRADIOL-FE CHEW TAB 0.8 MG-25 MCG	HCR				
KALLIGA TAB	DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	HCR				
KARIVA TAB 28 DAY	DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5)	HCR				
KELNOR TAB 1/35	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG	HCR				
KELNOR 1/50 TAB	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-50 MCG	HCR				
KURVELO TAB 0.15/30	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	HCR				
LARIN TAB 1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG	HCR				
LARIN TAB 1/20	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1 MG-20 MCG	HCR				
LARIN 24 TAB FE 1/20	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24)	HCR				
LARIN FE TAB 1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	HCR				
LARIN FE TAB 1/20	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	HCR				
LAYOLIS FE CHW	NORETHINDRONE & ETHINYL ESTRADIOL-FE CHEW TAB 0.8 MG-25 MCG	HCR				
LEENA TAB	NORETHINDRONE-ETH ESTRADIOL TAB 0.5-35/1-35/0.5-35 MG-MCG	HCR				
LESSINA TAB	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG	HCR				
LEVO-ETH EST TAB 90-20MCG	LEVONORGESTREL-ETHINYL ESTRADIOL (CONTINUOUS) TAB 90-20 MCG	HCR				
LEVONEST TAB	LEVONORGESTREL-ETH ESTRA TAB 0.05-30/0.075-40/0.125-30MG-MCG	HCR				

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LEVONOR/ETHI TAB	LEVONORGESTREL-ETH ESTRA TAB 0.05-30/0.075-40/0.125-30MG-MCG	HCR				
LEVONOR/ETHI TAB 0.1-0.02	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG	HCR				
LEVONOR/ETHI TAB 0.1-20	LEVONORGESTREL-ETHINYL ESTRADIOL-FE TAB 0.1 MG-20 MCG (21)	HCR				
LEVONOR/ETHI TAB ESTRADIO	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	HCR				
LEVONOR/ETHI TAB ESTRADIO	LEVONORGESTREL & ETHINYL ESTRADIOL (91-DAY) TAB 0.15-0.03 MG	HCR				
LEVONOR/ETHI TAB ESTRADIO	LEVONORG-ETH EST TAB 0.1-0.02MG(84) & ETH EST TAB 0.01MG(7)	HCR				
LEVONOR/ETHI TAB ESTRADIO	LEVONORG-ETH EST TAB 0.15-0.03MG(84) & ETH EST TAB 0.01MG(7)	HCR				
LEVONOR/ETHI TAB ESTRADIO	LEVONOR-ETH EST TAB 0.15-0.02/0.025/0.03 MG & ETH EST 0.01 MG	HCR				
LEVORA-28 TAB 0.15/30	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	HCR				
LO LOESTRIN TAB 1-10-10	NORETHIN-ETH ESTRADIOL-FE TAB 1 MG-10 MCG (24)/10 MCG (2)	HCR				
LO-ZUMANDIMI TAB 3-0.02MG	DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.02 MG	HCR				
LOJAIMIESS TAB	LEVONORG-ETH EST TAB 0.1-0.02MG(84) & ETH EST TAB 0.01MG(7)	HCR				
LORYNA TAB 3-0.02MG	DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.02 MG	HCR				
LOW-OGESTREL TAB	NORGESTREL & ETHINYL ESTRADIOL TAB 0.3 MG-30 MCG	HCR				
LUIZZA TAB 1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG	HCR				
LUIZZA 1/20 TAB	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1 MG-20 MCG	HCR				
LUTERA TAB	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG	HCR				
LYLLANA DIS 0.025MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.025 MG/24HR	Tier 1		X		
LYLLANA DIS 0.0375MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.0375 MG/24HR	Tier 1		X		
LYLLANA DIS 0.05MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.05 MG/24HR	Tier 1		X		
LYLLANA DIS 0.075MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.075 MG/24HR	Tier 1		X		
LYLLANA DIS 0.1MG	ESTRADIOL TD PATCH TWICE WEEKLY 0.1 MG/24HR	Tier 1		X		
MARLISSA TAB 0.15/30	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	HCR				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
MENEST TAB 0.3MG	ESTERIFIED ESTROGENS TAB 0.3 MG	Tier 3				
MENEST TAB 0.625MG	ESTERIFIED ESTROGENS TAB 0.625 MG	Tier 3				
MENEST TAB 1.25MG	ESTERIFIED ESTROGENS TAB 1.25 MG	Tier 3				
MENEST TAB 2.5MG	ESTERIFIED ESTROGENS TAB 2.5 MG	Tier 3				
MENOSTAR DIS 14MCG	ESTRADIOL TD PATCH WEEKLY 14 MCG/24HR	Tier 3		X		
MERZEE CAP 1/20	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE CAP 1 MG-20 MCG (24)	Tier 1				
MIBELAS 24 CHW FE	NORETHINDRONE ACE-ETH ESTRADIOL-FE CHEW TAB 1 MG-20 MCG (24)	HCR				
MICROGESTIN TAB 1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG	HCR				
MICROGESTIN TAB 1/20	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1 MG-20 MCG	HCR				
MICROGESTIN TAB FE 1/20	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	HCR				
MICROGESTIN TAB FE1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	HCR				
MILI TAB 0.25/35	NORGESTIMATE & ETHINYL ESTRADIOL TAB 0.25 MG-35 MCG	HCR				
MIMVEY TAB 1-0.5MG	ESTRADIOL & NORETHINDRONE ACETATE TAB 1-0.5 MG	Tier 1				
MINZOYA TAB 0.1-20	LEVONORGESTREL-ETHINYL ESTRADIOL-FE TAB 0.1 MG-20 MCG (21)	HCR				
MONO-LINYAH TAB 0.25-35	NORGESTIMATE & ETHINYL ESTRADIOL TAB 0.25 MG-35 MCG	HCR				
MYFEMBREE TAB	RELUGOLIX-ESTRADIOL-NORETHINDRONE ACETATE TAB 40-1-0.5 MG	Tier 2	X	X		
NATAZIA TAB	ESTRADIOL VALERATE-DIENOGEST TAB 3 MG /2-2 MG/2-3 MG/1 MG	Tier 1				
NECON TAB 0.5/35	NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.5 MG-35 MCG	HCR				
NEXTSTELLIS TAB 3-14.2MG	DROSPIRENONE-ESTETROL TAB 3-14.2 MG	Tier 3/4				
NIKKI TAB 3-0.02MG	DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.02 MG	HCR				
NOR/EST/FF TAB 1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	HCR				
NORE/ETH/FER CAP 1/20	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE CAP 1 MG-20 MCG (24)	Tier 1				
NORE/ETH/FER CHW 0.4MG-35	NORETHINDRONE & ETHINYL ESTRADIOL-FE CHEW TAB 0.4 MG-35 MCG	HCR				
NORELGE/ETHI DIS 150/35	NORELGESTROMIN-ETHINYL ESTRADIOL TD PTWK 150-35 MCG/24HR	HCR				
NORETH/ETHIN CHW FE	NORETHINDRONE & ETHINYL ESTRADIOL-FE CHEW TAB 0.8 MG-25 MCG	HCR				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
NORETH/ETHIN CHW FE 1/20	NORETHINDRONE ACE-ETH ESTRADIOL-FE CHEW TAB 1 MG-20 MCG (24)	HCR				
NORETH/ETHIN TAB 0.5-2.5	NORETHINDRONE ACETATE-ETHINYL ESTRADIOL TAB 0.5 MG-2.5 MCG	Tier 1				
NORETH/ETHIN TAB 1.5/30	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG	HCR				
NORETH/ETHIN TAB 1/20	NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1 MG-20 MCG	HCR				
NORETH/ETHIN TAB 1MG-5MCG	NORETHINDRONE ACETATE-ETHINYL ESTRADIOL TAB 1 MG-5 MCG	Tier 1				
NORETH/ETHIN TAB FE	NORETHINDRONE AC-ETHINYL ESTRAD-FE TAB 1-20/1-30/1-35 MG-MCG	HCR				
NORETH/ETHIN TAB FE 1/20	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	HCR				
NORGEST/ETHI TAB 0.25/35	NORGESTIMATE & ETHINYL ESTRADIOL TAB 0.25 MG-35 MCG	HCR				
NORGEST/ETHI TAB ESTRADIO	NORGESTIMATE-ETH ESTRAD TAB 0.18-25/0.215-25/0.25-25 MG-MCG	HCR				
NORGEST/ETHI TAB ESTRADIO	NORGESTIMATE-ETH ESTRAD TAB 0.18-35/0.215-35/0.25-35 MG-MCG	HCR				
NORTREL TAB 0.5/35	NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.5 MG-35 MCG	HCR				
NORTREL TAB 1/35	NORETHINDRONE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG	HCR				
NORTREL TAB 7/7/7	NORETHINDRONE-ETH ESTRADIOL TAB 0.5-35/0.75-35/1-35 MG-MCG	HCR				
NYLIA TAB 1/35	NORETHINDRONE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG	HCR				
NYLIA TAB 7/7/7	NORETHINDRONE-ETH ESTRADIOL TAB 0.5-35/0.75-35/1-35 MG-MCG	HCR				
OCELLA TAB 3-0.03MG	DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.03 MG	HCR				
PHILITH TAB 0.4-35	NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.4 MG-35 MCG	HCR				
PIMTREA TAB	DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5)	HCR				
PORTIA-28 TAB	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	HCR				
PREMARIN TAB 0.3MG	ESTROGENS, CONJUGATED TAB 0.3 MG	Tier 3				
PREMARIN TAB 0.45MG	ESTROGENS, CONJUGATED TAB 0.45 MG	Tier 3				
PREMARIN TAB 0.625MG	ESTROGENS, CONJUGATED TAB 0.625 MG	Tier 3				
PREMARIN TAB 0.9MG	ESTROGENS, CONJUGATED TAB 0.9 MG	Tier 3				
PREMARIN TAB 1.25MG	ESTROGENS, CONJUGATED TAB 1.25 MG	Tier 3				
PREMARIN VAG CRE 0.625MG	ESTROGENS, CONJUGATED VAGINAL CREAM 0.625 MG/GM	Tier 3				

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PREMPHASE TAB	CONJ EST 0.625(14)/CONJ EST-MEDROXYPRO AC TAB 0.625-5MG(14)	Tier 2				
PREMPRO TAB	CONJUGATED ESTROGEN-MEDROXYPROGEST ACETATE TAB 0.625-2.5 MG	Tier 2				
PREMPRO TAB 0.3-1.5	CONJUGATED ESTROGEN-MEDROXYPROGEST ACETATE TAB 0.3-1.5 MG	Tier 2				
PREMPRO TAB 0.45-1.5	CONJUGATED ESTROGEN-MEDROXYPROGEST ACETATE TAB 0.45-1.5 MG	Tier 2				
PREMPRO TAB 0.625-5	CONJUGATED ESTROGEN-MEDROXYPROGEST ACETATE TAB 0.625-5 MG	Tier 2				
RECLIPSEN TAB	DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	HCR				
RIVELSA TAB	LEVONOR-ETH EST TAB 0.15-0.02/0.025/0.03 MG & ETH EST 0.01 MG	HCR				
ROSYRAH TAB	LEVONOR-ETH EST TAB 0.15-0.02/0.025/0.03 MG & ETH EST 0.01 MG	HCR				
SETLAKIN TAB	LEVONORGESTREL & ETHINYL ESTRADIOL (91-DAY) TAB 0.15-0.03 MG	HCR				
SIMLIYA TAB 28 DAY	DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5)	HCR				
SIMPESSE TAB	LEVONORG-ETH EST TAB 0.15-0.03MG(84) & ETH EST TAB 0.01MG(7)	HCR				
SPRINTEC 28 TAB 28 DAY	NORGESTIMATE & ETHINYL ESTRADIOL TAB 0.25 MG-35 MCG	HCR				
SRONYX TAB	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG	HCR				
SYEDA TAB 3-0.03MG	DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.03 MG	HCR				
TARINA 24 FE TAB	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24)	HCR				
TARINA FE TAB 1/20 EQ	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	HCR				
TAYSOFY CAP 1/20	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE CAP 1 MG-20 MCG (24)	Tier 1				
TAYTULLA CAP 1MG/20MC	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE CAP 1 MG-20 MCG (24)	Tier 3/4				
TILIA FE TAB	NORETHINDRONE AC-ETHINYL ESTRAD-FE TAB 1-20/1-30/1-35 MG-MCG	HCR				
TRI-ESTARYLL TAB	NORGESTIMATE-ETH ESTRAD TAB 0.18-35/0.215-35/0.25-35 MG-MCG	HCR				
TRI-LEGEST TAB FE	NORETHINDRONE AC-ETHINYL ESTRAD-FE TAB 1-20/1-30/1-35 MG-MCG	HCR				
TRI-LINYAH TAB	NORGESTIMATE-ETH ESTRAD TAB 0.18-35/0.215-35/0.25-35 MG-MCG	HCR				

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TRI-LO TAB ESTARYLL	NORGESTIMATE-ETH ESTRAD TAB 0.18-25/0.215-25/0.25-25 MG-MCG	HCR				
TRI-LO- TAB MARZIA	NORGESTIMATE-ETH ESTRAD TAB 0.18-25/0.215-25/0.25-25 MG-MCG	HCR				
TRI-LO- TAB SPRINTEC	NORGESTIMATE-ETH ESTRAD TAB 0.18-25/0.215-25/0.25-25 MG-MCG	HCR				
TRI-LO-MILI TAB	NORGESTIMATE-ETH ESTRAD TAB 0.18-25/0.215-25/0.25-25 MG-MCG	HCR				
TRI-MILI TAB	NORGESTIMATE-ETH ESTRAD TAB 0.18-35/0.215-35/0.25-35 MG-MCG	HCR				
TRI-SPRINTEC TAB	NORGESTIMATE-ETH ESTRAD TAB 0.18-35/0.215-35/0.25-35 MG-MCG	HCR				
TRI-VYLIBRA TAB	NORGESTIMATE-ETH ESTRAD TAB 0.18-35/0.215-35/0.25-35 MG-MCG	HCR				
TRI-VYLIBRA TAB LO	NORGESTIMATE-ETH ESTRAD TAB 0.18-25/0.215-25/0.25-25 MG-MCG	HCR				
TRIVORA-28 TAB	LEVONORGESTREL-ETH ESTRA TAB 0.05-30/0.075-40/0.125-30MG-MCG	HCR				
TURQOZ TAB	NORGESTREL & ETHINYL ESTRADIOL TAB 0.3 MG-30 MCG	HCR				
TWIRLA DIS 120-30	LEVONORGESTREL-ETHINYL ESTRADIOL TD PTWK 120-30 MCG/24HR	Tier 3/4				
TYBLUME CHW 0.1-0.02	LEVONORGESTREL & ETHINYL ESTRADIOL CHEW TAB 0.1 MG-20 MCG	HCR				
TYDEMY TAB	DROSPIRENONE-ETHINYL ESTRAD-LEVOMEFOLATE TAB 3-0.03-0.451 MG	HCR				
VALTYA 1/35 TAB	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG	HCR				
VALTYA 1/50 TAB	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-50 MCG	HCR				
VELIVET PAK	DESOGEST-ETHIN EST TAB 0.1-0.025/0.125-0.025/0.15-0.025MG-MG	HCR				
VESTURA TAB 3-0.02MG	DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.02 MG	HCR				
VIENVA TAB 0.1-20	LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG	HCR				
VIORELE TAB	DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5)	HCR				
VOLNEA TAB	DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5)	HCR				
VYFEMLA TAB 0.4-35	NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.4 MG-35 MCG	HCR				
VYLIBRA TAB 0.25-35	NORGESTIMATE & ETHINYL ESTRADIOL TAB 0.25 MG-35 MCG	HCR				
WERA TAB 0.5/35	NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.5 MG-35 MCG	HCR				

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WYMZYA FE CHW 0.4MG-35	NORETHINDRONE & ETHINYL ESTRADIOL-FE CHEW TAB 0.4 MG-35 MCG	HCR				
XARAH FE TAB	NORETHINDRONE AC-ETHINYL ESTRAD-FE TAB 1-20/1-30/1-35 MG-MCG	HCR				
XELRIA FE CHW 0.4MG-35	NORETHINDRONE & ETHINYL ESTRADIOL-FE CHEW TAB 0.4 MG-35 MCG	HCR				
XULANE DIS 150-35	NORELGESTROMIN-ETHINYL ESTRADIOL TD PTWK 150-35 MCG/24HR	HCR				
YASMIN 28 TAB 3-0.03MG	DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.03 MG	Tier 3				
YAZ TAB 3-0.02MG	DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.02 MG	Tier 3				
YUVAFEM TAB 10MCG	ESTRADIOL VAGINAL TAB 10 MCG	Tier 1				
ZAFEMY DIS 150/35	NORELGESTROMIN-ETHINYL ESTRADIOL TD PTWK 150-35 MCG/24HR	HCR				
ZOVIA 1/35 TAB	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG	HCR				
ZUMANDIMINE TAB 3-0.03MG	DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.03 MG	HCR				
Eye, ear, nose and throat drugs, misc.						
TYRVAYA SOL 0.03MG	VARENICLINE TARTRATE NASAL SOLN 0.03 MG/ACT	Tier 3/4	X	X		
Fibromyalgia Agents - Drugs to Treat Muscle and Soft Tissue Pain						
DULOXETINE CAP 20MG DR	DULOXETINE HCL ENTERIC COATED PELLETS CAP 20 MG (BASE EQ)	Tier 1				
DULOXETINE CAP 30MG DR	DULOXETINE HCL ENTERIC COATED PELLETS CAP 30 MG (BASE EQ)	Tier 1				
DULOXETINE CAP 40MG DR	DULOXETINE HCL ENTERIC COATED PELLETS CAP 40 MG (BASE EQ)	Tier 1				
DULOXETINE CAP 60MG DR	DULOXETINE HCL ENTERIC COATED PELLETS CAP 60 MG (BASE EQ)	Tier 1				
LYRICA CAP 100MG	PREGABALIN CAP 100 MG	Tier 3/4				
LYRICA CAP 150MG	PREGABALIN CAP 150 MG	Tier 3/4				
LYRICA CAP 200MG	PREGABALIN CAP 200 MG	Tier 3/4				
LYRICA CAP 225MG	PREGABALIN CAP 225 MG	Tier 3/4				
LYRICA CAP 25MG	PREGABALIN CAP 25 MG	Tier 3/4				
LYRICA CAP 300MG	PREGABALIN CAP 300 MG	Tier 3/4				
LYRICA CAP 50MG	PREGABALIN CAP 50 MG	Tier 3/4				
LYRICA CAP 75MG	PREGABALIN CAP 75 MG	Tier 3/4				
LYRICA SOL 20MG/ML	PREGABALIN SOLN 20 MG/ML	Tier 3/4				
PREGABALIN CAP 100MG	PREGABALIN CAP 100 MG	Tier 1				
PREGABALIN CAP 150MG	PREGABALIN CAP 150 MG	Tier 1				
PREGABALIN CAP 200MG	PREGABALIN CAP 200 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PREGABALIN CAP 225MG	PREGABALIN CAP 225 MG	Tier 1				
PREGABALIN CAP 25MG	PREGABALIN CAP 25 MG	Tier 1				
PREGABALIN CAP 300MG	PREGABALIN CAP 300 MG	Tier 1				
PREGABALIN CAP 50MG	PREGABALIN CAP 50 MG	Tier 1				
PREGABALIN CAP 75MG	PREGABALIN CAP 75 MG	Tier 1				
PREGABALIN SOL 20MG/ML	PREGABALIN SOLN 20 MG/ML	Tier 1				
PREGABALN ER TAB 165MG	PREGABALIN TAB ER 24HR 165 MG	Tier 1				
PREGABALN ER TAB 330MG	PREGABALIN TAB ER 24HR 330 MG	Tier 1				
PREGABALN ER TAB 82.5MG	PREGABALIN TAB ER 24HR 82.5 MG	Tier 1				
SAVELLA MIS TITR PAK	MILNACIPRAN HCL TAB 12.5 MG (5) & 25 MG (8) & 50 MG (42) PAK	Tier 3/4		X		
SAVELLA TAB 100MG	MILNACIPRAN HCL TAB 100 MG	Tier 3/4		X		
SAVELLA TAB 12.5MG	MILNACIPRAN HCL TAB 12.5 MG	Tier 3/4		X		
SAVELLA TAB 25MG	MILNACIPRAN HCL TAB 25 MG	Tier 3/4		X		
SAVELLA TAB 50MG	MILNACIPRAN HCL TAB 50 MG	Tier 3/4		X		
VENLAFAXINE TAB 112.5MG	VENLAFAXINE BESYLATE TAB ER 24HR 112.5 MG	Tier 3/4				
GABA Receptor Modulators - Drugs for Sleeping						
EDLUAR SUB 10MG	ZOLPIDEM TARTRATE SL TAB 10 MG	Tier 3/4		X		
EDLUAR SUB 5MG	ZOLPIDEM TARTRATE SL TAB 5 MG	Tier 3/4		X		
ESZOPICLONE TAB 1MG	ESZOPICLONE TAB 1 MG	Tier 1				
ESZOPICLONE TAB 2MG	ESZOPICLONE TAB 2 MG	Tier 1				
ESZOPICLONE TAB 3MG	ESZOPICLONE TAB 3 MG	Tier 1				
FLURAZEPAM CAP 15MG	FLURAZEPAM HCL CAP 15 MG	Tier 1				
FLURAZEPAM CAP 30MG	FLURAZEPAM HCL CAP 30 MG	Tier 1				
RESTORIL CAP 15MG	TEMAZEPAM CAP 15 MG	Tier 3/4				
RESTORIL CAP 22.5MG	TEMAZEPAM CAP 22.5 MG	Tier 3/4				
RESTORIL CAP 30MG	TEMAZEPAM CAP 30 MG	Tier 3/4				
RESTORIL CAP 7.5MG	TEMAZEPAM CAP 7.5 MG	Tier 3/4				
TEMAZEPAM CAP 15MG	TEMAZEPAM CAP 15 MG	Tier 1				
TEMAZEPAM CAP 22.5MG	TEMAZEPAM CAP 22.5 MG	Tier 1				
TEMAZEPAM CAP 30MG	TEMAZEPAM CAP 30 MG	Tier 1				
TEMAZEPAM CAP 7.5MG	TEMAZEPAM CAP 7.5 MG	Tier 1				
ZALEPLON CAP 10MG	ZALEPLON CAP 10 MG	Tier 1				
ZALEPLON CAP 5MG	ZALEPLON CAP 5 MG	Tier 1				
ZOLPIDEM TAB 10MG	ZOLPIDEM TARTRATE TAB 10 MG	Tier 1				
ZOLPIDEM TAB 5MG	ZOLPIDEM TARTRATE TAB 5 MG	Tier 1				
ZOLPIDEM ER TAB 12.5MG	ZOLPIDEM TARTRATE TAB ER 12.5 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ZOLPIDEM ER TAB 6.25MG	ZOLPIDEM TARTRATE TAB ER 6.25 MG	Tier 1				
ZOLPIDEM TAR CAP 7.5MG	ZOLPIDEM TARTRATE CAP 7.5 MG	Tier 3/4		X		
ZOLPIDEM TAR SUB 1.75MG	ZOLPIDEM TARTRATE SL TAB 1.75 MG	Tier 1		X		
ZOLPIDEM TAR SUB 3.5MG	ZOLPIDEM TARTRATE SL TAB 3.5 MG	Tier 1		X		
Gamma-Aminobutyric Acid (GABA) Augmenting Agents - Seizure Control Drugs						
CLOBAZAM SUS 2.5MG/ML	CLOBAZAM SUSPENSION 2.5 MG/ML	Tier 1	X			
CLOBAZAM TAB 10MG	CLOBAZAM TAB 10 MG	Tier 1	X			
CLOBAZAM TAB 20MG	CLOBAZAM TAB 20 MG	Tier 1	X			
DIAZEPAM GEL 10MG	DIAZEPAM RECTAL GEL DELIVERY SYSTEM 10 MG	Tier 1				
DIAZEPAM GEL 2.5MG	DIAZEPAM RECTAL GEL DELIVERY SYSTEM 2.5 MG	Tier 1				
DIAZEPAM GEL 20MG	DIAZEPAM RECTAL GEL DELIVERY SYSTEM 20 MG	Tier 1				
GABAPENTIN CAP 100MG	GABAPENTIN CAP 100 MG	Tier 1				
GABAPENTIN CAP 300MG	GABAPENTIN CAP 300 MG	Tier 1				
GABAPENTIN CAP 400MG	GABAPENTIN CAP 400 MG	Tier 1				
GABAPENTIN SOL 250/5ML	GABAPENTIN ORAL SOLN 250 MG/5ML	Tier 1				
GABAPENTIN TAB 600MG	GABAPENTIN TAB 600 MG	Tier 1				
GABAPENTIN TAB 800MG	GABAPENTIN TAB 800 MG	Tier 1				
LIBERVANT MIS 10MG	DIAZEPAM BUCCAL FILM 10 MG	Tier 3	X			
LIBERVANT MIS 12.5MG	DIAZEPAM BUCCAL FILM 12.5 MG	Tier 3	X			
LIBERVANT MIS 15MG	DIAZEPAM BUCCAL FILM 15 MG	Tier 3	X			
LIBERVANT MIS 5MG	DIAZEPAM BUCCAL FILM 5 MG	Tier 3	X			
LIBERVANT MIS 7.5MG	DIAZEPAM BUCCAL FILM 7.5 MG	Tier 3	X			
MYSOLINE TAB 250MG	PRIMIDONE TAB 250 MG	Tier 2				
MYSOLINE TAB 50MG	PRIMIDONE TAB 50 MG	Tier 2				
NEURONTIN CAP 100MG	GABAPENTIN CAP 100 MG	Tier 3/4				
NEURONTIN CAP 300MG	GABAPENTIN CAP 300 MG	Tier 3/4				
NEURONTIN CAP 400MG	GABAPENTIN CAP 400 MG	Tier 3/4				
NEURONTIN SOL 250/5ML	GABAPENTIN ORAL SOLN 250 MG/5ML	Tier 3/4				
NEURONTIN TAB 600MG	GABAPENTIN TAB 600 MG	Tier 3/4				
NEURONTIN TAB 800MG	GABAPENTIN TAB 800 MG	Tier 3/4				
ONFI SUS 2.5MG/ML	CLOBAZAM SUSPENSION 2.5 MG/ML	Tier 3/4				
ONFI TAB 10MG	CLOBAZAM TAB 10 MG	Tier 3/4				
ONFI TAB 20MG	CLOBAZAM TAB 20 MG	Tier 3/4				
PRIMIDONE TAB 125MG	PRIMIDONE TAB 125 MG	Tier 1	X			
PRIMIDONE TAB 250MG	PRIMIDONE TAB 250 MG	Tier 1				
PRIMIDONE TAB 50MG	PRIMIDONE TAB 50 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
SYMPAZAN MIS 10MG	CLOBAZAM ORAL FILM 10 MG	Tier 3/4	X			
SYMPAZAN MIS 20MG	CLOBAZAM ORAL FILM 20 MG	Tier 3/4	X			
SYMPAZAN MIS 5MG	CLOBAZAM ORAL FILM 5 MG	Tier 3/4	X			
TIAGABINE TAB 12MG	TIAGABINE HCL TAB 12 MG	Tier 1				
TIAGABINE TAB 16MG	TIAGABINE HCL TAB 16 MG	Tier 1				
TIAGABINE TAB 2MG	TIAGABINE HCL TAB 2 MG	Tier 1				
TIAGABINE TAB 4MG	TIAGABINE HCL TAB 4 MG	Tier 1				
VALPROIC ACD CAP 250MG	VALPROIC ACID CAP 250 MG	Tier 1				
VALPROIC ACD SOL 250/5ML	VALPROATE SODIUM ORAL SOLN 250 MG/5ML (BASE EQUIV)	Tier 1				
VALTOCO SPR 10MG	DIAZEPAM NASAL SPRAY 10 MG/0.1 ML	Tier 3	X	X		
VALTOCO SPR 15MG	DIAZEPAM NASAL SPRAY THER PACK 2 X 7.5 MG/0.1ML (15 MG DOSE)	Tier 3	X	X		
VALTOCO SPR 20MG	DIAZEPAM NASAL SPRAY THER PACK 2 X 10 MG/0.1ML (20 MG DOSE)	Tier 3	X	X		
VALTOCO SPR 5MG	DIAZEPAM NASAL SPRAY 5 MG/0.1 ML	Tier 3	X	X		
VIGABATRIN PAK 500MG	VIGABATRIN POWD PACK 500 MG	Tier 1	X	X		
VIGABATRIN TAB 500MG	VIGABATRIN TAB 500 MG	Tier 1	X	X		
VIGADRONE POW 500MG	VIGABATRIN POWD PACK 500 MG	Tier 1	X	X		
VIGADRONE TAB 500MG	VIGABATRIN TAB 500 MG	Tier 1	X	X		
VIGAFYDE SOL 100MG/ML	VIGABATRIN ORAL SOLN 100 MG/ML	Tier 1	X	X		
VIGPODER POW 500MG	VIGABATRIN POWD PACK 500 MG	Tier 1	X	X		
Gastrointestinal Agents, Other						
SUFLAVE SOL	PEG 3350-KCL-NAACL-NA SULFATE-MAG SULFATE FOR SOLN 178.7 GM	Tier 3				
Gastrointestinal Agents, Other - Miscellaneous Gastrointestinal Drugs						
ALVIMOPAN CAP 12MG	ALVIMOPAN CAP 12 MG	Tier 1				
BISMTH/METR/ CAP TETRACY	BISMUTH SUBCIT-METRONIDAZOLE-TETRACYCLINE CAP 140-125-125 MG	Tier 1		X		
BYLVAY CAP 1200MCG	ODEVIXIBAT CAP 1200 MCG	Tier 3/4	X	X		
BYLVAY CAP 200MCG	ODEVIXIBAT PELLETS CAP SPRINKLE 200 MCG	Tier 3/4	X	X		
BYLVAY CAP 400MCG	ODEVIXIBAT CAP 400 MCG	Tier 3/4	X	X		
BYLVAY CAP 600MCG	ODEVIXIBAT PELLETS CAP SPRINKLE 600 MCG	Tier 3/4	X	X		
CHENODAL TAB 250MG	CHENODIOL TAB 250 MG	Tier 3		X		
CROMOLYN SOD CON 100/5ML	CROMOLYN SODIUM ORAL CONC 100 MG/5ML	Tier 1				
CTEXLI TAB 250MG	CHENODIOL (BASDS) TAB 250 MG	Tier 3/4	X	X	X	
DIPHEN/ATROP LIQ 2.5/5	DIPHENOXYLATE W/ ATROPINE LIQ 2.5-0.025 MG/5ML	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
DIPHEN/ATROP TAB 2.5MG	DIPHENOXYLATE W/ ATROPINE TAB 2.5-0.025 MG	Tier 1				
ENTEREG CAP 12MG	ALVIMOPAN CAP 12 MG	Tier 3/4				
GATTEX KIT 5MG	TEDUGLUTIDE (RDNA) FOR INJ KIT 5 MG	Tier 2	X	X		
IQIRVO TAB 80MG	ELAFIBRANOR TAB 80 MG	Tier 3/4	X	X	X	
LANSOPR/AMOX PAK /CLARITH	AMOXICIL CAP &CLARITHRO TAB &LANSOPRAZ CAP DR 500 &500 &30MG	Tier 1		X		
LIVDELZI CAP 10MG	SELADELPAR LYSINE CAP 10 MG	Tier 3/4	X	X	X	
LIVMARLI SOL 19MG/ML	MARALIXIBAT CHLORIDE ORAL SOLN 19 MG/ ML	Tier 3/4	X	X		
LIVMARLI SOL 9.5MG/ML	MARALIXIBAT CHLORIDE ORAL SOLN 9.5 MG/ML	Tier 3/4	X	X		
LIVMARLI TAB 10MG	MARALIXIBAT CHLORIDE TAB 10 MG	Tier 3/4	X	X		
LIVMARLI TAB 15MG	MARALIXIBAT CHLORIDE TAB 15 MG	Tier 3/4	X	X		
LIVMARLI TAB 20MG	MARALIXIBAT CHLORIDE TAB 20 MG	Tier 3/4	X	X		
LIVMARLI TAB 30MG	MARALIXIBAT CHLORIDE TAB 30 MG	Tier 3/4	X	X		
LOMOTIL TAB 2.5MG	DIPHENOXYLATE W/ ATROPINE TAB 2.5-0.025 MG	Tier 3/4				
MILK OF MAGN SUS 1200/15	MAGNESIUM HYDROXIDE SUSP 400 MG/5ML	Tier 1				
MOTOFEN TAB 1-0.025	DIFENOXIN W/ ATROPINE TAB 1-0.025 MG	Tier 3/4				
MYALEPT INJ 11.3MG	METRELEPTIN FOR SUBCUTANEOUS INJ 11.3 MG	Tier 3	X	X		
MYTESI TAB 125MG	CROFELEMER TAB DELAYED RELEASE 125 MG	Tier 3/4	X	X		
OPIUM TIN 10MG/ML	OPIUM TINCTURE 1% (10 MG/ML) (MORPHINE EQUIV)	Tier 1				
PROBIOTIC CAP ACIDOPHI	*LACTOBACILLUS CAP**	Tier 1				
PROBIOTIC AD CAP FORMULA	*PROBIOTIC PRODUCT - CAP**	Tier 1				
PRUCALOPRIDE TAB 1MG	PRUCALOPRIDE SUCCINATE TAB 1 MG (BASE EQUIVALENT)	Tier 1	X	X		
PRUCALOPRIDE TAB 2MG	PRUCALOPRIDE SUCCINATE TAB 2 MG (BASE EQUIVALENT)	Tier 1	X	X		
PYLERA CAP	BISMUTH SUBCIT-METRONIDAZOLE-TETRACYCLINE CAP 140-125-125 MG	Tier 3/4		X		
RELISTOR INJ 12/0.6ML	METHYLNALTREXONE BROMIDE INJ 12 MG/0.6ML (20 MG/ML)	Tier 3/4		X		
RELISTOR INJ 12/0.6ML	METHYLNALTREXONE BROMIDE SOLN PREF SYR 12 MG/0.6ML	Tier 3/4		X		
RELISTOR INJ 8/0.4ML	METHYLNALTREXONE BROMIDE SOLN PREF SYR 8 MG/0.4ML	Tier 3/4		X		
REZDIFFRA TAB 100MG	RESMETIROM 100 MG TAB	Tier 3/4	X	X		
REZDIFFRA TAB 60MG	RESMETIROM 60 MG TAB	Tier 3/4	X	X		
REZDIFFRA TAB 80MG	RESMETIROM 80 MG TAB	Tier 3/4	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
SEROSTIM INJ 4MG	SOMATROPIN (NON-REFRIGERATED) FOR SUBCUTANEOUS INJ 4 MG	Tier 3/4	X	X		
SEROSTIM INJ 5MG	SOMATROPIN (NON-REFRIGERATED) FOR SUBCUTANEOUS INJ 5 MG	Tier 3/4	X	X		
SEROSTIM INJ 6MG	SOMATROPIN (NON-REFRIGERATED) FOR SUBCUTANEOUS INJ 6 MG	Tier 3/4	X	X		
SYMPROIC TAB 0.2MG	NALDEMEDINE TOSYLATE TAB 0.2 MG (BASE EQUIVALENT)	Tier 2	X	X		
TRULANCE TAB 3MG	PLECANATIDE TAB 3 MG	Tier 3/4		X	X	
URSODIOL CAP 300MG	URSODIOL CAP 300 MG	Tier 1				
URSODIOL TAB 250MG	URSODIOL TAB 250 MG	Tier 1				
URSODIOL TAB 500MG	URSODIOL TAB 500 MG	Tier 1				
VOQUEZNA PAK DUAL PAK	AMOXICILLIN CAP 500 MG & VONOPRAZAN TAB 20 MG THERAPY PACK	Tier 3/4		X	X	
VOQUEZNA PAK TRIP PK	AMOXICILLIN CAP & CLARITHROMYCIN TAB & VONOPRAZAN TAB PACK	Tier 3/4		X	X	
XERMELO TAB 250MG	TELOTRISTAT ETHYL TAB 250 MG (AS TELOTRISTAT ETIPRATE)	Tier 3	X	X		
Genetic or Enzyme Disorder: Replacement, Modifiers, Treatment						
BETAINE ANHY POW	*BETAINE POWDER FOR ORAL SOLUTION***	Tier 1				
CERDELGA CAP 84MG	ELIGLUSTAT TARTRATE CAP 84 MG (BASE EQUIVALENT)	Tier 2	X			
CHOLBAM CAP 250MG	CHOLIC ACID CAP 250 MG	Tier 2	X	X		
CHOLBAM CAP 50MG	CHOLIC ACID CAP 50 MG	Tier 2	X	X		
CREON CAP 12000UNT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 12000-38000-60000 UNIT	Tier 2				
CREON CAP 24000UNT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 24000-76000-120000 UNIT	Tier 2				
CREON CAP 3000UNIT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 3000-9500-15000 UNIT	Tier 2				
CREON CAP 36000UNT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 36000-114000-180000 UNIT	Tier 2				
CREON CAP 6000UNIT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 6000-19000-30000 UNIT	Tier 2				
CYSTADANE POW	*BETAINE POWDER FOR ORAL SOLUTION***	Tier 3/4				
CYSTAGON CAP 150MG	CYSTEAMINE BITARTRATE CAP 150 MG	Tier 2				
CYSTAGON CAP 50MG	CYSTEAMINE BITARTRATE CAP 50 MG	Tier 2				
GALAFOLD CAP 123MG	MIGALASTAT HCL CAP 123 MG (BASE EQUIVALENT)	Tier 3/4	X	X		
GLYCEROL PHE LIQ 1.1GM/ML	GLYCEROL PHENYLBUTYRATE LIQUID 1.1 GM/ML	Tier 1	X	X		
JAVYGTOR PAK 100MG	SAPROPTERIN DIHYDROCHLORIDE POWDER PACKET 100 MG	Tier 3/4	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
JAVYGTOR POW 500MG	SAPROPTERIN DIHYDROCHLORIDE POWDER PACKET 500 MG	Tier 3/4	X	X		
JAVYGTOR TAB 100MG	SAPROPTERIN DIHYDROCHLORIDE TAB 100 MG	Tier 3/4	X	X		
MIGLUSTAT CAP 100MG	MIGLUSTAT CAP 100 MG	Tier 1				
OCALIVA TAB 10MG	OBETICHOLIC ACID TAB 10 MG	Tier 3/4	X	X	X	
OCALIVA TAB 5MG	OBETICHOLIC ACID TAB 5 MG	Tier 3/4	X	X	X	
OPFOLDA CAP 65MG	MIGLUSTAT (GAA DEFICIENCY) CAP 65 MG	Tier 2	X	X		
ORFADIN CAP 10MG	NITISINONE CAP 10 MG	Tier 1	X			
ORFADIN CAP 20MG	NITISINONE CAP 20 MG	Tier 1	X			
ORFADIN CAP 2MG	NITISINONE CAP 2 MG	Tier 1	X			
ORFADIN CAP 5MG	NITISINONE CAP 5 MG	Tier 1	X			
ORFADIN SUS 4MG/ML	NITISINONE SUSP 4 MG/ML	Tier 2	X			
PALYNZIQ INJ 10/0.5ML	PEGVALIASE-PQPZ SUBCUTANEOUS SOLN PREF SYRINGE 10 MG/0.5ML	Tier 3	X	X	X	
PALYNZIQ INJ 2.5/0.5	PEGVALIASE-PQPZ SUBCUTANEOUS SOLN PREF SYRINGE 2.5 MG/0.5ML	Tier 3	X	X	X	
PALYNZIQ INJ 20MG/ML	PEGVALIASE-PQPZ SUBCUTANEOUS SOLN PREF SYRINGE 20 MG/ML	Tier 3	X	X	X	
PANCREAZE CAP 10500UNT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 10500-35500-61500 UNIT	Tier 3			X	
PANCREAZE CAP 16800UNT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 16800-56800-98400 UNIT	Tier 3			X	
PANCREAZE CAP 21000UNT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 21000-54700-83900 UNIT	Tier 3			X	
PANCREAZE CAP 2600UNIT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 2600-8800-15200 UNIT	Tier 3			X	
PANCREAZE CAP 37000	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 37000-97300-149900 UNIT	Tier 3			X	
PANCREAZE CAP 4200UNIT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 4200-14200-24600 UNIT	Tier 3			X	
PERTZYE CAP 16000U	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 16000-57500-60500 UNIT	Tier 3/4			X	
PERTZYE CAP 24000U	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 24000-86250-90750 UNIT	Tier 3/4			X	
PERTZYE CAP 4000UNIT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 4000-14375-15125 UNIT	Tier 3/4			X	
PERTZYE CAP 8000UNIT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 8000-28750-30250 UNIT	Tier 3/4			X	
PHENYLBUTYRA POW SODIUM	SODIUM PHENYLBUTYRATE ORAL POWDER 3 GM/TEASPOONFUL	Tier 1	X			
PROCYSBI CAP 25MG	CYSTEAMINE BITARTRATE CAP DELAYED RELEASE 25 MG (BASE EQUIV)	Tier 3/4	X		X	

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PROCYSBI CAP 75MG	CYSTEAMINE BITARTRATE CAP DELAYED RELEASE 75 MG (BASE EQUIV)	Tier 3/4	X		X	
PROCYSBI GRA 300MG	CYSTEAMINE BITARTRATE DELAYED RELEASE GRANULES PACKET 300 MG	Tier 3/4				
PROCYSBI GRA 75MG	CYSTEAMINE BITARTRATE DELAYED RELEASE GRANULES PACKET 75 MG	Tier 3/4				
SAPROPTERIN POW 100MG	SAPROPTERIN DIHYDROCHLORIDE POWDER PACKET 100 MG	Tier 1	X	X		
SAPROPTERIN POW 500MG	SAPROPTERIN DIHYDROCHLORIDE POWDER PACKET 500 MG	Tier 1	X	X		
SAPROPTERIN TAB 100MG	SAPROPTERIN DIHYDROCHLORIDE TAB 100 MG	Tier 1	X	X		
SODIUM PHENY TAB 500MG	SODIUM PHENYLBUTYRATE TAB 500 MG	Tier 1	X			
STRENSIQ INJ 18/0.45	ASFOTASE ALFA SUBCUTANEOUS INJ 18 MG/0.45ML	Tier 2	X	X		
STRENSIQ INJ 28/0.7ML	ASFOTASE ALFA SUBCUTANEOUS INJ 28 MG/0.7ML	Tier 2	X	X		
STRENSIQ INJ 40MG/ML	ASFOTASE ALFA SUBCUTANEOUS INJ 40 MG/ML	Tier 2	X	X		
STRENSIQ INJ 80/0.8ML	ASFOTASE ALFA SUBCUTANEOUS INJ 80 MG/0.8ML	Tier 2	X	X		
SUCRAID SOL 8500/ML	SACROSIDASE SOLN 8500 UNIT/ML	Tier 2	X			
TEGSEDI INJ 284/1.5	INOTERSEN SOD SUBCUTANEOUS PREF SYR 284 MG/1.5ML (BASE EQ)	Tier 2		X		
VIOKACE TAB 10440	PANCRELIPASE (LIP-PROT-AMYL) TAB 10440-39150-39150 UNIT	Tier 3/4			X	
VIOKACE TAB 20880	PANCRELIPASE (LIP-PROT-AMYL) TAB 20880-78300-78300 UNIT	Tier 3/4			X	
VOXZOGO INJ 0.4MG	VOSORITIDE FOR SUBCUTANEOUS INJ 0.4 MG	Tier 3/4	X	X		
VOXZOGO INJ 0.56MG	VOSORITIDE FOR SUBCUTANEOUS INJ 0.56 MG	Tier 3/4	X	X		
VOXZOGO INJ 1.2MG	VOSORITIDE FOR SUBCUTANEOUS INJ 1.2 MG	Tier 3/4	X	X		
WAINUA INJ 45/0.8ML	EPLONTERSEN SODIUM SUBCUTANEOUS SOLN AUTO-INJ 45 MG/0.8ML	Tier 2	X	X		
XPHOZAH TAB 20MG	TENAPANOR HCL TAB 20 MG	Tier 3/4	X	X		
XPHOZAH TAB 30MG	TENAPANOR HCL TAB 30 MG	Tier 3/4	X	X		
XURIDEN POW 2GM	URIDINE TRIACETATE ORAL GRANULES PACKET 2 GM	Tier 2	X	X		
YORVIPATH INJ 168/0.56	PALOPEGTERIPARATIDE PEN-INJ 168 MCG/0.56ML (TERIPARATIDE EQ)	Tier 3/4	X	X		
YORVIPATH INJ 294/0.98	PALOPEGTERIPARATIDE PEN-INJ 294 MCG/0.98ML (TERIPARATIDE EQ)	Tier 3/4	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
YORVIPATH INJ 420/1.4	PALOPEGTERIPARATIDE PEN-INJ 420 MCG/1.4ML (TERIPARATIDE EQ)	Tier 3/4	X	X		
ZELVYSIA POW 100MG	SAPROPTERIN DIHYDROCHLORIDE POWDER PACKET 100 MG	Tier 1	X	X		
ZELVYSIA POW 500MG	SAPROPTERIN DIHYDROCHLORIDE POWDER PACKET 500 MG	Tier 1	X	X		
ZENPEP CAP 10000UNT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 10000-32000-42000 UNIT	Tier 2				
ZENPEP CAP 15000UNT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 15000-47000-63000 UNIT	Tier 2				
ZENPEP CAP 20000UNT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 20000-63000-84000 UNIT	Tier 2				
ZENPEP CAP 25000UNT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 25000-79000-105000 UNIT	Tier 2				
ZENPEP CAP 3000UNIT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 3000-10000-14000 UNIT	Tier 2				
ZENPEP CAP 40000UNT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 40000-126000-168000 UNIT	Tier 2				
ZENPEP CAP 5000UNIT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 5000-17000-24000 UNIT	Tier 2				
ZENPEP CAP 60000UNT	PANCRELIPASE (LIP-PROT-AMYL) DR CAP 60000-189600-252600 UNIT	Tier 2				
Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment						
ATTRUBY PAK 356MG	ACORAMIDIS HCL TAB PACK 356 MG (712 MG TWICE DAILY)	Tier 2	X	X		
DUVYZAT SUS 8.86MG	GIVINOSTAT HCL ORAL SUSP 8.86 MG/ML	Tier 3/4	X	X		
Genitourinary Agents, Other - Miscellaneous Bladder, Genital, and Kidney Conditions Drugs						
AVANAFIL TAB 100MG	AVANAFIL TAB 100 MG	Tier 1	X	X		
AVANAFIL TAB 200MG	AVANAFIL TAB 200 MG	Tier 1	X	X		
AVANAFIL TAB 50MG	AVANAFIL TAB 50 MG	Tier 1	X	X		
BETHANECHOL TAB 10MG	BETHANECHOL CHLORIDE TAB 10 MG	Tier 1				
BETHANECHOL TAB 25MG	BETHANECHOL CHLORIDE TAB 25 MG	Tier 1				
BETHANECHOL TAB 50MG	BETHANECHOL CHLORIDE TAB 50 MG	Tier 1				
BETHANECHOL TAB 5MG	BETHANECHOL CHLORIDE TAB 5 MG	Tier 1				
CAVERJECT INJ 20MCG	ALPROSTADIL FOR INJ 20 MCG	Tier 3		X		
CAVERJECT INJ 40MCG	ALPROSTADIL FOR INJ 40 MCG	Tier 3		X		
CAVERJECT IM KIT 10MCG	ALPROSTADIL FOR INJ KIT 10 MCG	Tier 3		X		
CAVERJECT IM KIT 20MCG	ALPROSTADIL FOR INJ KIT 20 MCG	Tier 3		X		
CERVIDIL VAG MIS 10MG INS	DINOPROSTONE VAGINAL INSERTS 10 MG	Tier 3				
DEPEN TITRA TAB 250MG	PENICILLAMINE TAB 250 MG	Tier 2				
EDEX 2-CRTDG KIT 10MCG	ALPROSTADIL FOR INJ KIT 10 MCG	Tier 3		X		
EDEX 2-CRTDG KIT 20MCG	ALPROSTADIL FOR INJ KIT 20 MCG	Tier 3		X		

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EDEX 2-CRTDG KIT 40MCG	ALPROSTADIL FOR INJ KIT 40 MCG	Tier 3		X		
EDEX 6-CRTDG KIT 10MCG	ALPROSTADIL FOR INJ KIT 10 MCG	Tier 3		X		
EDEX 6-CRTDG KIT 20MCG	ALPROSTADIL FOR INJ KIT 20 MCG	Tier 3		X		
EDEX 6-CRTDG KIT 40MCG	ALPROSTADIL FOR INJ KIT 40 MCG	Tier 3		X		
ELMIRON CAP 100MG	PENTOSAN POLYSULFATE SODIUM CAPS 100 MG	Tier 3/4			X	
ENCARE SUP 100MG	NONOXYNOL-9 VAGINAL SUPPOS 100 MG	HCR				
FILSPARI TAB 200MG	SPARSENTAN TAB 200 MG	Tier 3/4	X	X		
FILSPARI TAB 400MG	SPARSENTAN TAB 400 MG	Tier 3/4	X	X		
GYNOL II GEL 3%	NONOXYNOL-9 GEL 3%	HCR				
LITHOSTAT TAB 250MG	ACETOHYDROXAMIC ACID TAB 250 MG	Tier 3				
ME/NAPHOS/MB TAB HYO 1	*METHENAMINE-HYOSCAMINE-METH BLUE-SOD PHOS TAB 81.6 MG***	Tier 1				
MUSE SUP 1000MCG	ALPROSTADIL URETHRAL PELLET 1000 MCG	Tier 3		X		
MUSE SUP 250MCG	ALPROSTADIL URETHRAL PELLET 250 MCG	Tier 3		X		
MUSE SUP 500MCG	ALPROSTADIL URETHRAL PELLET 500 MCG	Tier 3		X		
PENICILLAMIN TAB 250MG	PENICILLAMINE TAB 250 MG	Tier 1				
PHENAZO TAB 200MG	PHENAZOPYRIDINE HCL TAB 200 MG	Tier 1				
PHENAZOPYRID TAB 100MG	PHENAZOPYRIDINE HCL TAB 100 MG	Tier 1				
PHENAZOPYRID TAB 200MG	PHENAZOPYRIDINE HCL TAB 200 MG	Tier 1				
PREPIDIL GEL 0.5MG/3G	DINOPROSTONE CERVICAL GEL 0.5 MG/3GM	Tier 3				
PYRIDIUM TAB 100MG	PHENAZOPYRIDINE HCL TAB 100 MG	Tier 3				
PYRIDIUM TAB 200MG	PHENAZOPYRIDINE HCL TAB 200 MG	Tier 3				
RIVFLOZA INJ 128/0.8	NEDOSIRAN SODIUM SUBCUTANEOUS SOLN PREF SYR 128 MG/0.8ML	Tier 3/4	X	X		
RIVFLOZA INJ 160MG/ML	NEDOSIRAN SODIUM SUBCUTANEOUS SOLN PREF SYR 160 MG/ML	Tier 3/4	X	X		
RIVFLOZA INJ 80/0.5ML	NEDOSIRAN SODIUM SUBCUTANEOUS SOLN 80 MG/0.5ML	Tier 3/4	X	X		
SILDENAFIL TAB 100MG	SILDENAFIL CITRATE TAB 100 MG	Tier 1		X		
SILDENAFIL TAB 25MG	SILDENAFIL CITRATE TAB 25 MG	Tier 1		X		
SILDENAFIL TAB 50MG	SILDENAFIL CITRATE TAB 50 MG	Tier 1		X		
STENDRA TAB 100MG	AVANAFIL TAB 100 MG	Tier 3/4	X	X		
STENDRA TAB 200MG	AVANAFIL TAB 200 MG	Tier 3/4	X	X		
STENDRA TAB 50MG	AVANAFIL TAB 50 MG	Tier 3/4	X	X		
TADALAFIL TAB 10MG	TADALAFIL TAB 10 MG	Tier 1		X		
TADALAFIL TAB 20MG	TADALAFIL TAB 20 MG	Tier 1		X		
TIOPRONIN TAB 100MG	TIOPRONIN TAB 100 MG	Tier 1				
TIOPRONIN TAB 100MG DR	TIOPRONIN TAB DELAYED RELEASE 100 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
TIOPRONIN TAB 300MG DR	TIOPRONIN TAB DELAYED RELEASE 300 MG	Tier 1				
TODAY SPONGE MIS	NONOXYNOL-9 VAGINAL SPONGE 1000 MG	HCR				
URELLE TAB	*METHENAMINE-HYOSC-METH BLUE-SOD PHOS-PHEN SAL TAB 81 MG***	Tier 3				
URETRON D/S TAB	*METHENAMINE-HYOS-METH BLUE-SOD PHOS-PHEN SAL TAB 81.6 MG***	Tier 1				
UROGESIC- TAB BLUE	*METHENAMINE-HYOSCAMINE-METH BLUE-SOD PHOS TAB 81.6 MG***	Tier 2				
VARDENAFIL TAB 10MG	VARDENAFIL HCL TAB 10 MG	Tier 1		X		
VARDENAFIL TAB 10MG ODT	VARDENAFIL HCL ORALLY DISINTEGRATING TAB 10 MG	Tier 1		X		
VARDENAFIL TAB 2.5MG	VARDENAFIL HCL TAB 2.5 MG	Tier 1		X		
VARDENAFIL TAB 20MG	VARDENAFIL HCL TAB 20 MG	Tier 1		X		
VARDENAFIL TAB 5MG	VARDENAFIL HCL TAB 5 MG	Tier 1		X		
VCF VAGINAL GEL CONTRACE	NONOXYNOL-9 GEL 4%	HCR				
VCF VAGINAL MIS CONTRACP	NONOXYNOL-9 FILM 28%	HCR				
VILEEV MB TAB 81MG	*METHENAMINE-HYOSC-METH BLUE-SOD PHOS-PHEN SAL TAB 81 MG***	Tier 3				
Glucocorticoids - Drugs to Treat Inflammation						
ANALPRAM HC CRE 1-1%	HYDROCORTISONE ACETATE W/ PRAMOXINE PERIANAL CREAM 1-1%	Tier 3/4				
ANALPRAM HC LOT 2.5%	HYDROCORTISONE ACETATE W/ PRAMOXINE PERIANAL LOTN 2.5-1%	Tier 3				
ANALPRAM-HC CRE 1-1%	HYDROCORTISONE ACETATE W/ PRAMOXINE PERIANAL CREAM 1-1%	Tier 3/4				
ANALPRAM-HC LOT 2.5%	HYDROCORTISONE ACETATE W/ PRAMOXINE PERIANAL LOTN 2.5-1%	Tier 3				
ANUCORT-HC SUP 25MG	HYDROCORTISONE ACETATE SUPPOS 25 MG	Tier 2				
ANUSOL-HC CRE 2.5%	HYDROCORTISONE PERIANAL CREAM 2.5%	Tier 3/4				
ANUSOL-HC SUP 25MG	HYDROCORTISONE ACETATE SUPPOS 25 MG	Tier 3/4				
BUDESONIDE AER 2MG/ACT	BUDESONIDE RECTAL FOAM 2 MG/ACT	Tier 1				
BUDESONIDE CAP 3MG DR	BUDESONIDE DELAYED RELEASE PARTICLES CAP 3 MG	Tier 1				
CORTENEMA ENE 100MG	HYDROCORTISONE ENEMA 100 MG/60ML	Tier 3/4				
CORTIFOAM AER 90MG	HYDROCORTISONE ACETATE PERIANAL FOAM 10% (90 MG/DOSE)	Tier 2				
HC PRAMOXINE CRE 1-1%	HYDROCORTISONE ACETATE W/ PRAMOXINE PERIANAL CREAM 1-1%	Tier 1				
HC PRAMOXINE CRE 2.5-1%	PRAMOXINE-HC CREAM 1-2.5%	Tier 1				
HEMMOREX-HC SUP 25MG	HYDROCORTISONE ACETATE SUPPOS 25 MG	Tier 3				
HEMMOREX-HC SUP 30MG	HYDROCORTISONE ACETATE SUPPOS 30 MG	Tier 3/4				
HYDROCORT ENE 100MG	HYDROCORTISONE ENEMA 100 MG/60ML	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
HYDROCORT AC SUP 25MG	HYDROCORTISONE ACETATE SUPPOS 25 MG	Tier 1				
HYDROCORT AC SUP 30MG	HYDROCORTISONE ACETATE SUPPOS 30 MG	Tier 1				
HYDROCORTISO CRE 2.5%	HYDROCORTISONE PERIANAL CREAM 2.5%	Tier 1				
PRAMOSONE CRE 1-2.5%	PRAMOXINE-HC CREAM 1-2.5%	Tier 3/4				
PRAMOSONE OIN 1%	PRAMOXINE-HC OINT 1-1%	Tier 2				
PRAMOSONE OIN 2.5%	PRAMOXINE-HC OINT 1-2.5%	Tier 3/4				
PROCTO-MED CRE HC 2.5%	HYDROCORTISONE PERIANAL CREAM 2.5%	Tier 1				
PROCTOCORT SUP 30MG	HYDROCORTISONE ACETATE SUPPOS 30 MG	Tier 3/4				
PROCTOFOAM AER HC 1%	HYDROCORTISONE ACETATE W/ PRAMOXINE PERIANAL FOAM 1-1%	Tier 2				
PROCTOSOL HC CRE 2.5%	HYDROCORTISONE PERIANAL CREAM 2.5%	Tier 3/4				
PROCTOZONE CRE -HC 2.5%	HYDROCORTISONE PERIANAL CREAM 2.5%	Tier 3/4				
TARPEYO CAP 4MG	BUDESONIDE DELAYED RELEASE CAP 4 MG	Tier 3/4	X	X		
UCERIS TAB 9MG	BUDESONIDE TAB ER 24HR 9 MG	Tier 1				
Glutamate Reducing Agents - Seizure Control Drugs						
FELBAMATE SUS 600/5ML	FELBAMATE SUSP 600 MG/5ML	Tier 1				
FELBAMATE TAB 400MG	FELBAMATE TAB 400 MG	Tier 1				
FELBAMATE TAB 600MG	FELBAMATE TAB 600 MG	Tier 1				
FELBATOL TAB 400MG	FELBAMATE TAB 400 MG	Tier 3/4				
FELBATOL TAB 600MG	FELBAMATE TAB 600 MG	Tier 3/4				
FYCOMPA SUS 0.5MG/ML	PERAMPANEL SUSP 0.5 MG/ML	Tier 3/4	X			
FYCOMPA TAB 10MG	PERAMPANEL TAB 10 MG	Tier 3	X			
FYCOMPA TAB 12MG	PERAMPANEL TAB 12 MG	Tier 3	X			
FYCOMPA TAB 2MG	PERAMPANEL TAB 2 MG	Tier 3	X			
FYCOMPA TAB 4MG	PERAMPANEL TAB 4 MG	Tier 3	X			
FYCOMPA TAB 6MG	PERAMPANEL TAB 6 MG	Tier 3	X			
FYCOMPA TAB 8MG	PERAMPANEL TAB 8 MG	Tier 3	X			
LAMICTAL CHW 25MG	LAMOTRIGINE TAB CHEWABLE DISPERSIBLE 25 MG	Tier 3/4				
LAMICTAL CHW 5MG	LAMOTRIGINE TAB CHEWABLE DISPERSIBLE 5 MG	Tier 3/4				
LAMICTAL KIT START 35	LAMOTRIGINE TAB 35 X 25 MG STARTER KIT	Tier 3/4				
LAMICTAL KIT START 49	LAMOTRIGINE TAB 25 MG (42) & 100 MG (7) STARTER KIT	Tier 3/4				
LAMICTAL KIT START 98	LAMOTRIGINE TAB 84 X 25 MG & 14 X 100 MG STARTER KIT	Tier 3/4				
LAMICTAL TAB 100MG	LAMOTRIGINE TAB 100 MG	Tier 3/4				
LAMICTAL TAB 150MG	LAMOTRIGINE TAB 150 MG	Tier 3/4				
LAMICTAL TAB 200MG	LAMOTRIGINE TAB 200 MG	Tier 3/4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
LAMICTAL TAB 25MG	LAMOTRIGINE TAB 25 MG	Tier 3/4				
LAMICTAL ODT KIT	LAMOTRIGINE TAB DISINT 25 (14) & 50 MG (14) & 100 MG (7) KIT	Tier 3/4				
LAMICTAL ODT KIT	LAMOTRIGINE TAB DISINT 21 X 25 MG & 7 X 50 MG TITRATION KIT	Tier 3/4				
LAMICTAL ODT KIT	LAMOTRIGINE TAB DISINT 42 X 50MG & 14 X 100MG TITRATION KIT	Tier 3/4				
LAMICTAL ODT TAB 100MG	LAMOTRIGINE ORALLY DISINTEGRATING TAB 100 MG	Tier 3/4				
LAMICTAL ODT TAB 200MG	LAMOTRIGINE ORALLY DISINTEGRATING TAB 200 MG	Tier 3/4				
LAMICTAL ODT TAB 25MG	LAMOTRIGINE ORALLY DISINTEGRATING TAB 25 MG	Tier 3/4				
LAMICTAL ODT TAB 50MG	LAMOTRIGINE ORALLY DISINTEGRATING TAB 50 MG	Tier 3/4				
LAMICTAL XR KIT	LAMOTRIGINE TAB ER 24HR 21 X 25 MG & 7 X 50 MG TITRATION KIT	Tier 3				
LAMICTAL XR KIT	LAMOTRIGINE TAB ER 24HR 50 (14) & 100 MG(14) & 200 MG(7) KIT	Tier 3				
LAMICTAL XR KIT	LAMOTRIGINE TAB ER 24HR 25 (14) & 50 MG (14) & 100 MG(7) KIT	Tier 3				
LAMICTAL XR TAB 100MG	LAMOTRIGINE TAB ER 24HR 100 MG	Tier 3				
LAMICTAL XR TAB 200MG	LAMOTRIGINE TAB ER 24HR 200 MG	Tier 3				
LAMICTAL XR TAB 250MG	LAMOTRIGINE TAB ER 24HR 250 MG	Tier 3				
LAMICTAL XR TAB 25MG	LAMOTRIGINE TAB ER 24HR 25 MG	Tier 3				
LAMICTAL XR TAB 300MG	LAMOTRIGINE TAB ER 24HR 300 MG	Tier 3				
LAMICTAL XR TAB 50MG	LAMOTRIGINE TAB ER 24HR 50 MG	Tier 3				
LAMOTRIG ODT KIT 25/50MG	LAMOTRIGINE TAB DISINT 21 X 25 MG & 7 X 50 MG TITRATION KIT	Tier 1				
LAMOTRIG ODT KIT 50/100MG	LAMOTRIGINE TAB DISINT 42 X 50MG & 14 X 100MG TITRATION KIT	Tier 1				
LAMOTRIG ODT TAB 100MG	LAMOTRIGINE ORALLY DISINTEGRATING TAB 100 MG	Tier 1				
LAMOTRIGINE CHW 25MG	LAMOTRIGINE TAB CHEWABLE DISPERSIBLE 25 MG	Tier 1				
LAMOTRIGINE CHW 5MG	LAMOTRIGINE TAB CHEWABLE DISPERSIBLE 5 MG	Tier 1				
LAMOTRIGINE KIT ODT	LAMOTRIGINE TAB DISINT 25 (14) & 50 MG (14) & 100 MG (7) KIT	Tier 1				
LAMOTRIGINE KIT START 35	LAMOTRIGINE TAB 35 X 25 MG STARTER KIT	Tier 1				
LAMOTRIGINE KIT START 49	LAMOTRIGINE TAB 25 MG (42) & 100 MG (7) STARTER KIT	Tier 1				
LAMOTRIGINE KIT START 98	LAMOTRIGINE TAB 84 X 25 MG & 14 X 100 MG STARTER KIT	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
LAMOTRIGINE TAB 100MG	LAMOTRIGINE ORALLY DISINTEGRATING TAB 100 MG	Tier 1				
LAMOTRIGINE TAB 100MG	LAMOTRIGINE TAB 100 MG	Tier 1				
LAMOTRIGINE TAB 100MG ER	LAMOTRIGINE TAB ER 24HR 100 MG	Tier 1				
LAMOTRIGINE TAB 150MG	LAMOTRIGINE TAB 150 MG	Tier 1				
LAMOTRIGINE TAB 200MG	LAMOTRIGINE ORALLY DISINTEGRATING TAB 200 MG	Tier 1				
LAMOTRIGINE TAB 200MG	LAMOTRIGINE TAB 200 MG	Tier 1				
LAMOTRIGINE TAB 200MG ER	LAMOTRIGINE TAB ER 24HR 200 MG	Tier 1				
LAMOTRIGINE TAB 250MG ER	LAMOTRIGINE TAB ER 24HR 250 MG	Tier 1				
LAMOTRIGINE TAB 25MG	LAMOTRIGINE TAB 25 MG	Tier 1				
LAMOTRIGINE TAB 25MG ER	LAMOTRIGINE TAB ER 24HR 25 MG	Tier 1				
LAMOTRIGINE TAB 25MG ODT	LAMOTRIGINE ORALLY DISINTEGRATING TAB 25 MG	Tier 1				
LAMOTRIGINE TAB 300MG ER	LAMOTRIGINE TAB ER 24HR 300 MG	Tier 1				
LAMOTRIGINE TAB 50MG ER	LAMOTRIGINE TAB ER 24HR 50 MG	Tier 1				
LAMOTRIGINE TAB 50MG ODT	LAMOTRIGINE ORALLY DISINTEGRATING TAB 50 MG	Tier 1				
PERAMPANEL SUS 0.5MG/ML	PERAMPANEL SUSP 0.5 MG/ML	Tier 1	X			
PERAMPANEL TAB 10MG	PERAMPANEL TAB 10 MG	Tier 1	X			
PERAMPANEL TAB 12MG	PERAMPANEL TAB 12 MG	Tier 1	X			
PERAMPANEL TAB 2MG	PERAMPANEL TAB 2 MG	Tier 1	X			
PERAMPANEL TAB 4MG	PERAMPANEL TAB 4 MG	Tier 1	X			
PERAMPANEL TAB 6MG	PERAMPANEL TAB 6 MG	Tier 1	X			
PERAMPANEL TAB 8MG	PERAMPANEL TAB 8 MG	Tier 1	X			
SUBVENITE KIT START 35	LAMOTRIGINE TAB 35 X 25 MG STARTER KIT	Tier 1				
SUBVENITE KIT START 49	LAMOTRIGINE TAB 25 MG (42) & 100 MG (7) STARTER KIT	Tier 1				
SUBVENITE KIT START 98	LAMOTRIGINE TAB 84 X 25 MG & 14 X 100 MG STARTER KIT	Tier 1				
SUBVENITE TAB 100MG	LAMOTRIGINE TAB 100 MG	Tier 1				
SUBVENITE TAB 150MG	LAMOTRIGINE TAB 150 MG	Tier 1				
SUBVENITE TAB 200MG	LAMOTRIGINE TAB 200 MG	Tier 1				
SUBVENITE TAB 25MG	LAMOTRIGINE TAB 25 MG	Tier 1				
TOPAMAX TAB 100MG	TOPIRAMATE TAB 100 MG	Tier 3/4	X			
TOPAMAX TAB 200MG	TOPIRAMATE TAB 200 MG	Tier 3/4	X			
TOPAMAX TAB 25MG	TOPIRAMATE TAB 25 MG	Tier 3/4	X			
TOPAMAX TAB 50MG	TOPIRAMATE TAB 50 MG	Tier 3/4	X			
TOPAMAX SPR CAP 15MG	TOPIRAMATE SPRINKLE CAP 15 MG	Tier 3/4	X			
TOPAMAX SPR CAP 25MG	TOPIRAMATE SPRINKLE CAP 25 MG	Tier 3/4	X			

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
TOPIRAMATE CAP 15MG	TOPIRAMATE SPRINKLE CAP 15 MG	Tier 1				
TOPIRAMATE CAP 25MG	TOPIRAMATE SPRINKLE CAP 25 MG	Tier 1				
TOPIRAMATE CAP 50MG	TOPIRAMATE SPRINKLE CAP 50 MG	Tier 1				
TOPIRAMATE TAB 100MG	TOPIRAMATE TAB 100 MG	Tier 1				
TOPIRAMATE TAB 200MG	TOPIRAMATE TAB 200 MG	Tier 1				
TOPIRAMATE TAB 25MG	TOPIRAMATE TAB 25 MG	Tier 1				
TOPIRAMATE TAB 50MG	TOPIRAMATE TAB 50 MG	Tier 1				
Glycemic Agents - Diabetic Drugs						
BAQSIMI ONE POW 3MG/DOSE	GLUCAGON NASAL POWDER 3 MG/DOSE	Tier 2				
BAQSIMI TWO POW 3MG/DOSE	GLUCAGON NASAL POWDER 3 MG/DOSE	Tier 2				
DIAZOXIDE SUS 50MG/ML	DIAZOXIDE SUSP 50 MG/ML	Tier 1				
GLUCAGEN INJ HYPOKIT	GLUCAGON HCL FOR INJ 1 MG	Tier 3/4				
GLUCAGON INJ 1MG	GLUCAGON FOR INJ 1 MG	Tier 1				
GLUCAGON EMR SOL 1MG	GLUCAGON HCL FOR INJ 1 MG	Tier 2				
GVOKE HYPO 1 INJ 0.5/.1ML	GLUCAGON SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.5 MG/0.1ML	Tier 2				
GVOKE HYPO 1 INJ 1/0.2ML	GLUCAGON SUBCUTANEOUS SOLUTION AUTO-INJECTOR 1 MG/0.2ML	Tier 2				
GVOKE HYPO 2 INJ 0.5/.1ML	GLUCAGON SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.5 MG/0.1ML	Tier 2				
GVOKE HYPO 2 INJ 1/0.2ML	GLUCAGON SUBCUTANEOUS SOLUTION AUTO-INJECTOR 1 MG/0.2ML	Tier 2				
GVOKE KIT SOL 1/0.2ML	GLUCAGON SUBCUTANEOUS SOLN 1 MG/0.2ML	Tier 2				
GVOKE PFS INJ 1/0.2ML	GLUCAGON SUBCUTANEOUS SOLN PREF SYRINGE 1 MG/0.2ML	Tier 2				
PROGLYCEM SUS 50MG/ML	DIAZOXIDE SUSP 50 MG/ML	Tier 3/4				
ZEGALOGUE INJ 0.6/0.6	DASIGLUCAGON HCL SUBCUTANEOUS SOLN AUTO-INJ 0.6 MG/0.6ML	Tier 2				
ZEGALOGUE INJ 0.6/0.6	DASIGLUCAGON HCL SUBCUTANEOUS SOLN PREF SYRINGE 0.6 MG/0.6ML	Tier 2				
Hemostasis Agents - Drugs to Stop Bleeding						
ADVATE INJ 1000UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 1000 UNIT	Tier 2				
ADVATE INJ 1500UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 1500 UNIT	Tier 2				
ADVATE INJ 2000UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 2000 UNIT	Tier 2				
ADVATE INJ 250UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 250 UNIT	Tier 2				
ADVATE INJ 3000UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 3000 UNIT	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ADVATE INJ 4000UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 4000 UNIT	Tier 2				
ADVATE INJ 500UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 500 UNIT	Tier 2				
ADYNOVATE INJ 1000UNIT	ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 1000 UNIT	Tier 3/4				
ADYNOVATE INJ 1500UNIT	ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 1500 UNIT	Tier 3/4				
ADYNOVATE INJ 2000UNIT	ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 2000 UNIT	Tier 3/4				
ADYNOVATE INJ 250UNIT	ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 250 UNIT	Tier 3/4				
ADYNOVATE INJ 3000UNIT	ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 3000 UNIT	Tier 3/4				
ADYNOVATE INJ 500UNIT	ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 500 UNIT	Tier 3/4				
ADYNOVATE INJ 750UNIT	ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 750 UNIT	Tier 3/4				
AFSTYLA KIT 1000UNIT	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 1000 UNIT	Tier 3/4				
AFSTYLA KIT 1500UNIT	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 1500 UNIT	Tier 3/4				
AFSTYLA KIT 2000UNIT	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 2000 UNIT	Tier 3/4				
AFSTYLA KIT 2500UNIT	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 2500 UNIT	Tier 3/4				
AFSTYLA KIT 250UNIT	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 250 UNIT	Tier 3/4				
AFSTYLA KIT 3000UNIT	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 3000 UNIT	Tier 3/4				
AFSTYLA KIT 500UNIT	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 500 UNIT	Tier 3/4				
ALPHANATE INJ 1000UNIT	ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 1000 UNIT	Tier 2				
ALPHANATE INJ 1500UNIT	ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 1500 UNIT	Tier 2				
ALPHANATE INJ 2000UNIT	ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 2000 UNIT	Tier 2				
ALPHANATE INJ 250 UNIT	ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 250 UNIT	Tier 2				
ALPHANATE INJ 500 UNIT	ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 500 UNIT	Tier 2				
ALPHANINE SD INJ 1000UNIT	COAGULATION FACTOR IX FOR INJ 1000 UNIT	Tier 2				
ALPHANINE SD INJ 1500UNIT	COAGULATION FACTOR IX FOR INJ 1500 UNIT	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ALPHANINE SD INJ 500UNIT	COAGULATION FACTOR IX FOR INJ 500 UNIT	Tier 2				
ALPROLIX INJ 1000UNIT	COAGULATION FACTOR IX (RECOMB) (RFIXFC) FOR INJ 1000 UNIT	Tier 3				
ALPROLIX INJ 2000UNIT	COAGULATION FACTOR IX (RECOMB) (RFIXFC) FOR INJ 2000 UNIT	Tier 3				
ALPROLIX INJ 250UNIT	COAGULATION FACTOR IX (RECOMB) (RFIXFC) FOR INJ 250 UNIT	Tier 3				
ALPROLIX INJ 3000UNIT	COAGULATION FACTOR IX (RECOMB) (RFIXFC) FOR INJ 3000 UNIT	Tier 3				
ALPROLIX INJ 4000UNIT	COAGULATION FACTOR IX (RECOMB) (RFIXFC) FOR INJ 4000 UNIT	Tier 3				
ALPROLIX INJ 500UNIT	COAGULATION FACTOR IX (RECOMB) (RFIXFC) FOR INJ 500 UNIT	Tier 3				
ALTUVIIIIO INJ 1000UNIT	ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 1000 UNIT	Tier 3/4				
ALTUVIIIIO INJ 2000UNIT	ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 2000 UNIT	Tier 3/4				
ALTUVIIIIO INJ 250 UNIT	ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 250 UNIT	Tier 3/4				
ALTUVIIIIO INJ 250UNIT	ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 250 UNIT	Tier 3/4				
ALTUVIIIIO INJ 3000UNIT	ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 3000 UNIT	Tier 3/4				
ALTUVIIIIO INJ 4000UNIT	ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 4000 UNIT	Tier 3/4				
ALTUVIIIIO INJ 500UNIT	ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 500 UNIT	Tier 3/4				
AMINOCAPR AC TAB 1000MG	AMINOCAPROIC ACID TAB 1000 MG	Tier 1				
AMINOCAPR AC TAB 500MG	AMINOCAPROIC ACID TAB 500 MG	Tier 1				
AMINOCAPROIC SOL 0.25/ML	AMINOCAPROIC ACID ORAL SOLN 0.25 GM/ML	Tier 1				
ASTRINGYN SOL 259MG/GM	FERRIC SUBSULFATE SOLN 259 MG/GM	Tier 3				
BENEFIX INJ 1000UNIT	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ KIT 1000 UNIT	Tier 2				
BENEFIX INJ 2000UNIT	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ KIT 2000 UNIT	Tier 2				
BENEFIX INJ 250UNIT	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ KIT 250 UNIT	Tier 2				
BENEFIX INJ 3000UNIT	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ KIT 3000 UNIT	Tier 2				
BENEFIX INJ 500UNIT	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ KIT 500 UNIT	Tier 2				
COAGADEX INJ 250UNIT	COAGULATION FACTOR X (HUMAN) FOR INJ 250 UNIT	Tier 2				

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COAGADEX INJ 500UNIT	COAGULATION FACTOR X (HUMAN) FOR INJ 500 UNIT	Tier 2				
CORIFACT KIT	FACTOR XIII CONCENTRATE (HUMAN) FOR INJ KIT 1000-1600 UNIT	Tier 2				
ELOCTATE INJ 1000UNIT	ANTIHEMOPHILIC FACTOR RCMB (BDD-RFVIIIIC) FOR INJ 1000 UNIT	Tier 3/4				
ELOCTATE INJ 1500UNIT	ANTIHEMOPHILIC FACTOR RCMB (BDD-RFVIIIIC) FOR INJ 1500 UNIT	Tier 3/4				
ELOCTATE INJ 2000UNIT	ANTIHEMOPHILIC FACTOR RCMB (BDD-RFVIIIIC) FOR INJ 2000 UNIT	Tier 3/4				
ELOCTATE INJ 250UNIT	ANTIHEMOPHILIC FACTOR RCMB (BDD-RFVIIIIC) FOR INJ 250 UNIT	Tier 3/4				
ELOCTATE INJ 3000UNIT	ANTIHEMOPHILIC FACTOR RCMB (BDD-RFVIIIIC) FOR INJ 3000 UNIT	Tier 3/4				
ELOCTATE INJ 4000UNIT	ANTIHEMOPHILIC FACTOR RCMB (BDD-RFVIIIIC) FOR INJ 4000 UNIT	Tier 3/4				
ELOCTATE INJ 5000UNIT	ANTIHEMOPHILIC FACTOR RCMB (BDD-RFVIIIIC) FOR INJ 5000 UNIT	Tier 3/4				
ELOCTATE INJ 500UNIT	ANTIHEMOPHILIC FACTOR RCMB (BDD-RFVIIIIC) FOR INJ 500 UNIT	Tier 3/4				
ELOCTATE INJ 6000UNIT	ANTIHEMOPHILIC FACTOR RCMB (BDD-RFVIIIIC) FOR INJ 6000 UNIT	Tier 3/4				
ELOCTATE INJ 750UNIT	ANTIHEMOPHILIC FACTOR RCMB (BDD-RFVIIIIC) FOR INJ 750 UNIT	Tier 3/4				
FEIBA INJ	ANTIINHIBITOR COAGULANT COMPLEX FOR IV SOLN 1000 UNIT	Tier 2				
FEIBA INJ	ANTIINHIBITOR COAGULANT COMPLEX FOR IV SOLN 2500 UNIT	Tier 2				
FEIBA INJ	ANTIINHIBITOR COAGULANT COMPLEX FOR IV SOLN 500 UNIT	Tier 2				
HEMLIBRA INJ 105/0.7	EMICIZUMAB-KXWH SUBCUTANEOUS SOLN 105 MG/0.7ML (150 MG/ML)	Tier 2	X			
HEMLIBRA INJ 150/ML	EMICIZUMAB-KXWH SUBCUTANEOUS SOLN 150 MG/ML	Tier 2	X			
HEMLIBRA INJ 300/2ML	EMICIZUMAB-KXWH SUBCUTANEOUS SOLN 300 MG/2ML (150 MG/ML)	Tier 2	X			
HEMLIBRA INJ 30MG/ML	EMICIZUMAB-KXWH SUBCUTANEOUS SOLN 30 MG/ML	Tier 2	X			
HEMLIBRA INJ 60/0.4	EMICIZUMAB-KXWH SUBCUTANEOUS SOLN 60 MG/0.4ML (150 MG/ML)	Tier 2	X			
HEMLIBRA SOL 12/0.4ML	EMICIZUMAB-KXWH SUBCUTANEOUS SOLN 12 MG/0.4ML (30 MG/ML)	Tier 2	X			
HEMOFIL M INJ 1000UNIT	ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 1000 UNIT	Tier 2				
HEMOFIL M INJ 1700UNIT	ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 1700 UNIT	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
HEMOFIL M INJ 250UNIT	ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 250 UNIT	Tier 2				
HEMOFIL M INJ 500UNIT	ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 500 UNIT	Tier 2				
HUMATE-P SOL 2400UNIT	ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 1000-2400 UNIT	Tier 2				
HUMATE-P SOL 250-600	ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 250-600 UNIT	Tier 2				
HUMATE-P SOL 500-1200	ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 500-1200 UNIT	Tier 2				
HYMPAVZI INJ 150MG/ML	MARSTACIMAB-HNCQ SUBCUTANEOUS SOLN AUTO-INJ 150 MG/ML	Tier 2	X	X		
IDELVION SOL 1000UNIT	COAGULATION FACTOR IX (RECOMB) (RIX-FP) FOR INJ 1000 UNIT	Tier 3				
IDELVION SOL 2000UNIT	COAGULATION FACTOR IX (RECOMB) (RIX-FP) FOR INJ 2000 UNIT	Tier 3				
IDELVION SOL 250UNIT	COAGULATION FACTOR IX (RECOMB) (RIX-FP) FOR INJ 250 UNIT	Tier 3				
IDELVION SOL 3500UNIT	COAGULATION FACTOR IX (RECOMB) (RIX-FP) FOR INJ 3500 UNIT	Tier 3				
IDELVION SOL 500UNIT	COAGULATION FACTOR IX (RECOMB) (RIX-FP) FOR INJ 500 UNIT	Tier 3				
JIVI INJ 1000UNIT	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII PEG-AUCL)FOR INJ 1000 UNIT	Tier 3/4				
JIVI INJ 2000UNIT	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII PEG-AUCL)FOR INJ 2000 UNIT	Tier 3/4				
JIVI INJ 3000UNIT	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII PEG-AUCL)FOR INJ 3000 UNIT	Tier 3/4				
JIVI INJ 4000UNIT	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII PEG-AUCL)FOR INJ 4000 UNIT	Tier 3/4				
JIVI INJ 500 UNIT	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII PEG-AUCL) FOR INJ 500 UNIT	Tier 3/4				
KOATE INJ 1000UNIT	ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 1000 UNIT	Tier 2				
KOATE INJ 250UNIT	ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 250 UNIT	Tier 2				
KOATE INJ 500 UNIT	ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 500 UNIT	Tier 2				
KOATE-DVI INJ 1000UNIT	ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 1000 UNIT	Tier 2				
KOGENATE FS INJ 1000UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ KIT 1000 UNIT	Tier 2				
KOGENATE FS INJ 2000UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ KIT 2000 UNIT	Tier 2				
KOGENATE FS INJ 250UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ KIT 250 UNIT	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
KOGENATE FS INJ 3000UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ KIT 3000 UNIT	Tier 2				
KOGENATE FS INJ 500UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ KIT 500 UNIT	Tier 2				
KOVALTRY INJ 1000UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 1000 UNIT	Tier 2				
KOVALTRY INJ 2000UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 2000 UNIT	Tier 2				
KOVALTRY INJ 250UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 250 UNIT	Tier 2				
KOVALTRY INJ 3000UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 3000 UNIT	Tier 2				
KOVALTRY INJ 500UNIT	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 500 UNIT	Tier 2				
MONSELS FERR SOL SUBSULF	*FERRIC SUBSULFATE SOLN**	Tier 3				
NOVOEIGHT INJ 1000UNIT	ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 1000 UNIT	Tier 2				
NOVOEIGHT INJ 1500UNIT	ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 1500 UNIT	Tier 2				
NOVOEIGHT INJ 2000UNIT	ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 2000 UNIT	Tier 2				
NOVOEIGHT INJ 250UNIT	ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 250 UNIT	Tier 2				
NOVOEIGHT INJ 3000UNIT	ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 3000 UNIT	Tier 2				
NOVOEIGHT INJ 500UNIT	ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 500 UNIT	Tier 2				
NOVOSEVEN RT INJ 1MG	COAGULATION FACTOR VIIA (RECOMB) FOR INJ 1 MG (1000 MCG)	Tier 2				
NOVOSEVEN RT INJ 2MG	COAGULATION FACTOR VIIA (RECOMB) FOR INJ 2 MG (2000 MCG)	Tier 2				
NOVOSEVEN RT INJ 5MG	COAGULATION FACTOR VIIA (RECOMB) FOR INJ 5 MG (5000 MCG)	Tier 2				
NOVOSEVEN RT INJ 8MG	COAGULATION FACTOR VIIA (RECOMB) FOR INJ 8 MG (8000 MCG)	Tier 2				
NUWIQ INJ 1000UNIT	ANTIHEMOPHILIC FACT RCMB (BDD-RFVIII,SIM) FOR INJ 1000 UNIT	Tier 2				
NUWIQ INJ 1500UNIT	ANTIHEMOPHILIC FACT RCMB (BDD-RFVIII,SIM) FOR INJ 1500 UNIT	Tier 2				
NUWIQ INJ 2000UNIT	ANTIHEMOPHILIC FACT RCMB (BDD-RFVIII,SIM) FOR INJ 2000 UNIT	Tier 2				
NUWIQ INJ 2500UNIT	ANTIHEMOPHILIC FACT RCMB (BDD-RFVIII,SIM) FOR INJ 2500 UNIT	Tier 2				
NUWIQ INJ 250UNIT	ANTIHEMOPHILIC FACTOR RCMB (BDD-RFVIII,SIM) FOR INJ 250 UNIT	Tier 2				

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NUWIQ INJ 3000UNIT	ANTIHEMOPHILIC FACT RCMB (BDD-RFVIII,SIM) FOR INJ 3000 UNIT	Tier 2				
NUWIQ INJ 4000UNIT	ANTIHEMOPHILIC FACT RCMB (BDD-RFVIII,SIM) FOR INJ 4000 UNIT	Tier 2				
NUWIQ INJ 500UNIT	ANTIHEMOPHILIC FACTOR RCMB (BDD-RFVIII,SIM) FOR INJ 500 UNIT	Tier 2				
NUWIQ KIT 1000UNIT	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII,SIM) FOR INJ KIT 1000 UNIT	Tier 2				
NUWIQ KIT 1500UNIT	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII,SIM) FOR INJ KIT 1500 UNIT	Tier 2				
NUWIQ KIT 2000UNIT	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII,SIM) FOR INJ KIT 2000 UNIT	Tier 2				
NUWIQ KIT 2500UNIT	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII,SIM) FOR INJ KIT 2500 UNIT	Tier 2				
NUWIQ KIT 250UNIT	ANTIHEMOPHIL FACT RCMB (BDD-RFVIII,SIM) FOR INJ KIT 250 UNIT	Tier 2				
NUWIQ KIT 3000UNIT	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII,SIM) FOR INJ KIT 3000 UNIT	Tier 2				
NUWIQ KIT 4000UNIT	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII,SIM) FOR INJ KIT 4000 UNIT	Tier 2				
NUWIQ KIT 500UNIT	ANTIHEMOPHIL FACT RCMB (BDD-RFVIII,SIM) FOR INJ KIT 500 UNIT	Tier 2				
OBIZUR INJ 500 UNIT	ANTIHEMOPHILIC FACTOR (RECOMB PORC) RPFVIII FOR INJ 500 UNIT	Tier 3				
PROFILNINE INJ 1000UNIT	FACTOR IX COMPLEX FOR INJ 1000 UNIT	Tier 2				
PROFILNINE INJ 1500UNIT	FACTOR IX COMPLEX FOR INJ 1500 UNIT	Tier 2				
PROFILNINE INJ 500UNIT	FACTOR IX COMPLEX FOR INJ 500 UNIT	Tier 2				
PYRUKYND TAB 20MG	MITAPIVAT SULFATE TAB 20 MG	Tier 3	X	X		
PYRUKYND TAB 20MGX5MG	MITAPIVAT SULFATE TAB THERAPY PACK 7 X 20 MG & 7 X 5 MG	Tier 3	X	X		
PYRUKYND TAB 50MG	MITAPIVAT SULFATE TAB 50 MG	Tier 3	X	X		
PYRUKYND TAB 50MGX20M	MITAPIVAT SULFATE TAB THERAPY PACK 7 X 50 MG & 7 X 20 MG	Tier 3	X	X		
PYRUKYND TAB 5MG	MITAPIVAT SULFATE TAB 5 MG	Tier 3	X	X		
PYRUKYND TAB 5MG TP	MITAPIVAT SULFATE TAB THERAPY PACK 5 MG	Tier 3	X	X		
RECOMBINATE INJ	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ 1241-1800 UNIT	Tier 2				
RECOMBINATE INJ	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ 1801-2400 UNIT	Tier 2				
RECOMBINATE INJ 220-400	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ 220-400 UNIT	Tier 2				
RECOMBINATE INJ 401-800	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ 401-800 UNIT	Tier 2				

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RECOMBIMATE INJ 801-1240	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ 801-1240 UNIT	Tier 2				
RECOTHROM SOL 20000UNT	THROMBIN (RECOMBINANT) FOR SOLN 20000 UNIT	Tier 3				
RECOTHROM SOL 5000UNIT	THROMBIN (RECOMBINANT) FOR SOLN 5000 UNIT	Tier 3				
RIXUBIS INJ 1000UNIT	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 1000 UNIT	Tier 2				
RIXUBIS INJ 2000UNIT	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 2000 UNIT	Tier 2				
RIXUBIS INJ 250 UNIT	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 250 UNIT	Tier 2				
RIXUBIS INJ 3000UNIT	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 3000 UNIT	Tier 2				
RIXUBIS INJ 500UNIT	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 500 UNIT	Tier 2				
SEVENFACT INJ 1MG	COAGULATION FACTOR VIIA (RECOM)-JNCW FOR INJ 1 MG (1000 MCG)	Tier 3/4				
SEVENFACT INJ 5MG	COAGULATION FACTOR VIIA (RECOM)-JNCW FOR INJ 5 MG (5000 MCG)	Tier 3/4				
SEVENFACT SOL 2MG	COAGULATION FACTOR VIIA (RECOM)-JNCW FOR INJ 2 MG (2000 MCG)	Tier 3/4				
TAVALISSE TAB 100MG	FOSTAMATINIB DISODIUM TAB 100 MG (BASE EQUIVALENT)	Tier 3/4	X	X		
TAVALISSE TAB 150MG	FOSTAMATINIB DISODIUM TAB 150 MG (BASE EQUIVALENT)	Tier 3/4	X	X		
THROMBIN KIT 5000UNIT	THROMBIN FOR SOLN KIT 5000 UNIT	Tier 3				
THROMBIN-JMI KIT 20000UNT	THROMBIN FOR SOLN KIT 20000 UNIT	Tier 3				
THROMBIN-JMI KIT 5000UNIT	THROMBIN FOR SOLN KIT 5000 UNIT	Tier 3				
THROMBOGEN KIT 10000UNT	THROMBIN FOR SOLN KIT 10000 UNIT	Tier 3				
THROMBOGEN SOL 10000UNT	THROMBIN FOR SOLN 10000 UNIT	Tier 3				
THROMBOGEN SOL 1000UNIT	THROMBIN FOR SOLN 1000 UNIT	Tier 3				
TRANEX ACID TAB 650MG	TRANEXAMIC ACID TAB 650 MG	Tier 1		X		
TRETEN INJ	COAGULATION FACTOR XIII A-SUBUNIT FOR INJ 2500 UNIT	Tier 3				
VONVENDI INJ 1300UNIT	VON WILLEBRAND FACTOR (RECOMBINANT) FOR INJ 1300 UNIT	Tier 2				
VONVENDI INJ 650UNIT	VON WILLEBRAND FACTOR (RECOMBINANT) FOR INJ 650 UNIT	Tier 2				
WILATE INJ	ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 500-500 UNIT KIT	Tier 2				
WILATE INJ	ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 1000-1000 UNIT KIT	Tier 2				

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XYNTHA INJ 1000UNIT	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII,MOR) FOR INJ KIT 1000 UNIT	Tier 3/4	X		X	
XYNTHA INJ 2000UNIT	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII,MOR) FOR INJ KIT 2000 UNIT	Tier 3/4	X		X	
XYNTHA INJ 250UNIT	ANTIHEMOPHIL FACT RCMB (BDD-RFVIII,MOR) FOR INJ KIT 250 UNIT	Tier 3/4	X		X	
XYNTHA INJ 500UNIT	ANTIHEMOPHIL FACT RCMB (BDD-RFVIII,MOR) FOR INJ KIT 500 UNIT	Tier 3/4	X		X	
XYNTHA SOLOF INJ 1000UNIT	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII,MOR) FOR INJ KIT 1000 UNIT	Tier 3/4	X		X	
XYNTHA SOLOF INJ 2000UNIT	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII,MOR) FOR INJ KIT 2000 UNIT	Tier 3/4	X		X	
XYNTHA SOLOF INJ 3000UNIT	ANTIHEMOPHIL FACT RCMB(BDD-RFVIII,MOR) FOR INJ KIT 3000 UNIT	Tier 3/4	X		X	
XYNTHA SOLOF INJ 500UNIT	ANTIHEMOPHIL FACT RCMB (BDD-RFVIII,MOR) FOR INJ KIT 500 UNIT	Tier 3/4	X		X	
XYNTHA SOLOF KIT 250UNIT	ANTIHEMOPHIL FACT RCMB (BDD-RFVIII,MOR) FOR INJ KIT 250 UNIT	Tier 3/4	X		X	
Histamine2 (H2) Receptor Antagonists - Ulcer and Stomach Acid Drugs						
CIMETIDINE SOL 300/5ML	CIMETIDINE HCL SOLN 300 MG/5ML	Tier 1				
CIMETIDINE TAB 200MG	CIMETIDINE TAB 200 MG	Tier 1				
CIMETIDINE TAB 300MG	CIMETIDINE TAB 300 MG	Tier 1				
CIMETIDINE TAB 400MG	CIMETIDINE TAB 400 MG	Tier 1				
CIMETIDINE TAB 800MG	CIMETIDINE TAB 800 MG	Tier 1				
FAMOTIDINE SUS 40MG/5ML	FAMOTIDINE FOR SUSP 40 MG/5ML	Tier 1				
NIZATIDINE CAP 150MG	NIZATIDINE CAP 150 MG	Tier 1				
NIZATIDINE CAP 300MG	NIZATIDINE CAP 300 MG	Tier 1				
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) - Hormone Replacement/Modifying Drugs						
ACTHAR INJ 80UNIT	CORTICOTROPIN INJ GEL 80 UNIT/ML	Tier 3/4	X	X	X	
ALCLOMETASON CRE 0.05%	ALCLOMETASONE DIPROPIONATE CREAM 0.05%	Tier 1				
ALCLOMETASON OIN 0.05%	ALCLOMETASONE DIPROPIONATE OINT 0.05%	Tier 1				
AMCINONIDE CRE 0.1%	AMCINONIDE CREAM 0.1%	Tier 1				
AMCINONIDE OIN 0.1%	AMCINONIDE OINT 0.1%	Tier 1				
APEXICON E CRE 0.05%	DIFLORASONE DIACETATE EMOLLIENT BASE CREAM 0.05%	Tier 2				
BETA DIPROP CRE 0.05%	BETAMETHASONE DIPROPIONATE AUGMENTED CREAM 0.05%	Tier 1				
BETA DIPROP GEL 0.05%	BETAMETHASONE DIPROPIONATE AUGMENTED GEL 0.05%	Tier 1				
BETA DIPROP LOT 0.05%	BETAMETHASONE DIPROPIONATE AUGMENTED LOTION 0.05%	Tier 1				

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BETA DIPROP OIN 0.05%	BETAMETHASONE DIPROPIONATE AUGMENTED OINT 0.05%	Tier 1				
BETAMETH DIP CRE 0.05%	BETAMETHASONE DIPROPIONATE CREAM 0.05%	Tier 1				
BETAMETH DIP LOT 0.05%	BETAMETHASONE DIPROPIONATE LOTION 0.05%	Tier 1				
BETAMETH DIP OIN 0.05%	BETAMETHASONE DIPROPIONATE OINT 0.05%	Tier 1				
BETAMETH VAL AER 0.12%	BETAMETHASONE VALERATE AEROSOL FOAM 0.12%	Tier 1				
BETAMETH VAL CRE 0.1%	BETAMETHASONE VALERATE CREAM 0.1% (BASE EQUIVALENT)	Tier 1				
BETAMETH VAL LOT 0.1%	BETAMETHASONE VALERATE LOTION 0.1% (BASE EQUIVALENT)	Tier 1				
BETAMETH VAL OIN 0.1%	BETAMETHASONE VALERATE OINT 0.1% (BASE EQUIVALENT)	Tier 1				
BRYHALI LOT 0.01%	HALOBETASOL PROPIONATE LOTION 0.01%	Tier 3/4			X	
CAPEX SHA 0.01%	FLUOCINOLONE ACETONIDE SHAMPOO 0.01%	Tier 2				
CLOBETASOL AER 0.05%	CLOBETASOL PROPIONATE FOAM 0.05%	Tier 1				
CLOBETASOL AER 0.05%	CLOBETASOL PROPIONATE EMULSION FOAM 0.05%	Tier 1				
CLOBETASOL CRE 0.05%	CLOBETASOL PROPIONATE CREAM 0.05%	Tier 1				
CLOBETASOL CRE 0.05%	CLOBETASOL PROPIONATE EMOLLIENT BASE CREAM 0.05%	Tier 1				
CLOBETASOL GEL 0.05%	CLOBETASOL PROPIONATE GEL 0.05%	Tier 1				
CLOBETASOL LOT 0.05%	CLOBETASOL PROPIONATE LOTION 0.05%	Tier 1				
CLOBETASOL OIN 0.05%	CLOBETASOL PROPIONATE OINT 0.05%	Tier 1				
CLOBETASOL SHA 0.05%	CLOBETASOL PROPIONATE SHAMPOO 0.05%	Tier 1				
CLOBETASOL SOL 0.05%	CLOBETASOL PROPIONATE SOLN 0.05%	Tier 1				
CLOBETASOL SPR 0.05%	CLOBETASOL PROPIONATE SPRAY 0.05%	Tier 1				
CLOBETASOL E CRE 0.05%	CLOBETASOL PROPIONATE EMOLLIENT BASE CREAM 0.05%	Tier 1				
CLOCORTOLONE CRE 0.1%	CLOCORTOLONE PIVALATE CREAM 0.1%	Tier 1				
CLODAN SHA 0.05%	CLOBETASOL PROPIONATE SHAMPOO 0.05%	Tier 1				
CORDRAN 80X3 TAP 4MCG/CM	FLURANDRENOLIDE TAPE 4 MCG/SQCM	Tier 3				
CORTEF TAB 10MG	HYDROCORTISONE TAB 10 MG	Tier 3/4				
CORTEF TAB 20MG	HYDROCORTISONE TAB 20 MG	Tier 3/4				
CORTEF TAB 5MG	HYDROCORTISONE TAB 5 MG	Tier 3/4				
CORTISONE TAB 25MG	CORTISONE ACETATE TAB 25 MG	Tier 3/4				
CORTROPHIN INJ 80UNT/ML	CORTICOTROPIN INJ GEL 80 UNIT/ML	Tier 3/4	X	X	X	

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DERMA-SMOOTH OIL /FS BODY	FLUOCINOLONE ACETONIDE OIL 0.01% (BODY OIL)	Tier 3/4				
DERMA-SMOOTH OIL /FS SCLP	FLUOCINOLONE ACETONIDE OIL 0.01% (SCALP OIL)	Tier 3/4				
DESONIDE CRE 0.05%	DESONIDE CREAM 0.05%	Tier 1				
DESONIDE GEL 0.05%	DESONIDE GEL 0.05%	Tier 1				
DESONIDE LOT 0.05%	DESONIDE LOTION 0.05%	Tier 1				
DESONIDE OIN 0.05%	DESONIDE OINT 0.05%	Tier 1				
DESONIDE CRE 0.05%	DESONIDE CREAM 0.05%	Tier 3				
DESOXIMETAS CRE 0.05%	DESOXIMETASONE CREAM 0.05%	Tier 1				
DESOXIMETAS CRE 0.25%	DESOXIMETASONE CREAM 0.25%	Tier 1				
DESOXIMETAS GEL 0.05%	DESOXIMETASONE GEL 0.05%	Tier 1				
DESOXIMETAS OIN 0.05%	DESOXIMETASONE OINT 0.05%	Tier 1				
DESOXIMETAS OIN 0.25%	DESOXIMETASONE OINT 0.25%	Tier 1				
DESOXIMETASO SPR 0.25%	DESOXIMETASONE SPRAY 0.25%	Tier 1				
DEXAMETHASON CON 1MG/ML	DEXAMETHASONE CONC 1 MG/ML	Tier 1				
DEXAMETHASON ELX 0.5/5ML	DEXAMETHASONE ELIXIR 0.5 MG/5ML	Tier 1				
DEXAMETHASON SOL 0.5/5ML	DEXAMETHASONE SOLN 0.5 MG/5ML	Tier 1				
DEXAMETHASON TAB 0.5MG	DEXAMETHASONE TAB 0.5 MG	Tier 1				
DEXAMETHASON TAB 0.75MG	DEXAMETHASONE TAB 0.75 MG	Tier 1				
DEXAMETHASON TAB 1.5MG	DEXAMETHASONE TAB 1.5 MG	Tier 1				
DEXAMETHASON TAB 10-DAY	DEXAMETHASONE TAB THERAPY PACK 1.5 MG (35)	Tier 1				
DEXAMETHASON TAB 13-DAY	DEXAMETHASONE TAB THERAPY PACK 1.5 MG (51)	Tier 1				
DEXAMETHASON TAB 1MG	DEXAMETHASONE TAB 1 MG	Tier 1				
DEXAMETHASON TAB 2MG	DEXAMETHASONE TAB 2 MG	Tier 1				
DEXAMETHASON TAB 4MG	DEXAMETHASONE TAB 4 MG	Tier 1				
DEXAMETHASON TAB 6-DAY	DEXAMETHASONE TAB THERAPY PACK 1.5 MG (21)	Tier 1				
DEXAMETHASON TAB 6MG	DEXAMETHASONE TAB 6 MG	Tier 1				
DIFLORASONE CRE 0.05%	DIFLORASONE DIACETATE CREAM 0.05%	Tier 1				
DIFLORASONE OIN 0.05%	DIFLORASONE DIACETATE OINT 0.05%	Tier 1				
DIPROLENE OIN 0.05%	BETAMETHASONE DIPROPIONATE AUGMENTED OINT 0.05%	Tier 3/4				
FLUDROCORT TAB 0.1MG	FLUDROCORTISONE ACETATE TAB 0.1 MG	Tier 1				
FLUOCINOLONE CRE 0.01%	FLUOCINOLONE ACETONIDE CREAM 0.01%	Tier 1				
FLUOCINOLONE CRE 0.025%	FLUOCINOLONE ACETONIDE CREAM 0.025%	Tier 1				
FLUOCINOLONE OIL 0.01% SC	FLUOCINOLONE ACETONIDE OIL 0.01% (SCALP OIL)	Tier 1				

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FLUOCINOLONE OIL 0.01%BDY	FLUOCINOLONE ACETONIDE OIL 0.01% (BODY OIL)	Tier 1				
FLUOCINOLONE OIL 0.01%TOP	FLUOCINOLONE ACETONIDE OIL 0.01% (BODY OIL)	Tier 1				
FLUOCINOLONE OIN 0.025%	FLUOCINOLONE ACETONIDE OINT 0.025%	Tier 1				
FLUOCINOLONE SOL 0.01%	FLUOCINOLONE ACETONIDE SOLN 0.01%	Tier 1				
FLUOCINONIDE CRE 0.05%	FLUOCINONIDE CREAM 0.05%	Tier 1				
FLUOCINONIDE CRE 0.1%	FLUOCINONIDE CREAM 0.1%	Tier 1				
FLUOCINONIDE CRE E 0.05%	FLUOCINONIDE EMULSIFIED BASE CREAM 0.05%	Tier 1				
FLUOCINONIDE GEL 0.05%	FLUOCINONIDE GEL 0.05%	Tier 1				
FLUOCINONIDE OIN 0.05%	FLUOCINONIDE OINT 0.05%	Tier 1				
FLUOCINONIDE SOL 0.05%	FLUOCINONIDE SOLN 0.05%	Tier 1				
FLURANDRENOL CRE 0.05%	FLURANDRENOLIDE CREAM 0.05%	Tier 1				
FLURANDRENOL LOT 0.05%	FLURANDRENOLIDE LOTION 0.05%	Tier 1				
FLUTICASONE CRE 0.05%	FLUTICASONE PROPIONATE CREAM 0.05%	Tier 1				
FLUTICASONE LOT 0.05%	FLUTICASONE PROPIONATE LOTION 0.05%	Tier 1				
FLUTICASONE OIN 0.005%	FLUTICASONE PROPIONATE OINT 0.005%	Tier 1				
HALCINONIDE CRE 0.1%	HALCINONIDE CREAM 0.1%	Tier 1				
HALOBETASOL CRE 0.05%	HALOBETASOL PROPIONATE CREAM 0.05%	Tier 1				
HALOBETASOL OIN 0.05%	HALOBETASOL PROPIONATE OINT 0.05%	Tier 1				
HALOG OIN 0.1%	HALCINONIDE OINT 0.1%	Tier 3				
HC BUTYRATE CRE 0.1%	HYDROCORTISONE BUTYRATE CREAM 0.1%	Tier 1				
HC BUTYRATE OIN 0.1%	HYDROCORTISONE BUTYRATE OINT 0.1%	Tier 1				
HC BUTYRATE SOL 0.1%	HYDROCORTISONE BUTYRATE SOLN 0.1%	Tier 1				
HC VALERATE CRE 0.2%	HYDROCORTISONE VALERATE CREAM 0.2%	Tier 1				
HC VALERATE OIN 0.2%	HYDROCORTISONE VALERATE OINT 0.2%	Tier 1				
HYDROCORT CRE 2.5%	HYDROCORTISONE CREAM 2.5%	Tier 1				
HYDROCORT LOT 2.5%	HYDROCORTISONE LOTION 2.5%	Tier 1				
HYDROCORT OIN 1%	HYDROCORTISONE OINT 1%	Tier 1				
HYDROCORT OIN 2.5%	HYDROCORTISONE OINT 2.5%	Tier 1				
HYDROCORT TAB 10MG	HYDROCORTISONE TAB 10 MG	Tier 1				
HYDROCORT TAB 20MG	HYDROCORTISONE TAB 20 MG	Tier 1				
HYDROCORT TAB 5MG	HYDROCORTISONE TAB 5 MG	Tier 1				
HYDROCORT AC CRE 2.5%	HYDROCORTISONE ACETATE CREAM 2.5%	Tier 3/4				
KHINDIVI SOL 1MG/ML	HYDROCORTISONE ORAL SOLN 1 MG/ML	Tier 3/4	X			
LOCOID LIPO CRE 0.1%	HYDROCORTISONE BUTYRATE HYDROPHILIC LIPO BASE CREAM 0.1%	Tier 3/4				
MEDROL TAB 16MG	METHYLPREDNISOLONE TAB 16 MG	Tier 3/4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
MEDROL TAB 2MG	METHYLPREDNISOLONE TAB 2 MG	Tier 2				
MEDROL TAB 4MG	METHYLPREDNISOLONE TAB 4 MG	Tier 3/4				
MEDROL TAB 4MG	METHYLPREDNISOLONE TAB THERAPY PACK 4 MG (21)	Tier 3/4				
MEDROL TAB 8MG	METHYLPREDNISOLONE TAB 8 MG	Tier 3/4				
METHYLPRED TAB 16MG	METHYLPREDNISOLONE TAB 16 MG	Tier 1				
METHYLPRED TAB 32MG	METHYLPREDNISOLONE TAB 32 MG	Tier 1				
METHYLPRED TAB 4MG	METHYLPREDNISOLONE TAB THERAPY PACK 4 MG (21)	Tier 1				
METHYLPRED TAB 4MG	METHYLPREDNISOLONE TAB 4 MG	Tier 1				
METHYLPRED TAB 8MG	METHYLPREDNISOLONE TAB 8 MG	Tier 1				
MICORT HC CRE 2.5%	HYDROCORTISONE ACETATE CREAM 2.5%	Tier 3/4				
MOMETASONE CRE 0.1%	MOMETASONE FUROATE CREAM 0.1%	Tier 1				
MOMETASONE OIN 0.1%	MOMETASONE FUROATE OINT 0.1%	Tier 1				
MOMETASONE SOL 0.1%	MOMETASONE FUROATE SOLUTION 0.1% (LOTION)	Tier 1				
NUCORT LOT 2%	HYDROCORTISONE ACETATE LOTION 2%	Tier 3				
ORAPRED ODT TAB 10MG	PREDNISOLONE SOD PHOS ORALLY DISINTEGR TAB 10 MG (BASE EQ)	Tier 3/4				
ORAPRED ODT TAB 15MG	PREDNISOLONE SOD PHOS ORALLY DISINTEGR TAB 15 MG (BASE EQ)	Tier 3/4				
ORAPRED ODT TAB 30MG	PREDNISOLONE SOD PHOS ORALLY DISINTEGR TAB 30 MG (BASE EQ)	Tier 3/4				
PANDEL CRE 0.1%	HYDROCORTISONE PROBUTATE CREAM 0.1%	Tier 3				
PEDIAPRED SOL 5MG/5ML	PREDNISOLONE SOD PHOSPHATE ORAL SOLN 5 MG/5ML (BASE EQUIV)	Tier 2				
PREDNISOLONE SOL 15MG/5ML	PREDNISOLONE SOD PHOSPHATE ORAL SOLN 15 MG/5ML (BASE EQUIV)	Tier 1				
PREDNISOLONE SOL 15MG/5ML	PREDNISOLONE SOLN 15 MG/5ML	Tier 1				
PREDNISOLONE TAB 10MG ODT	PREDNISOLONE SOD PHOS ORALLY DISINTEGR TAB 10 MG (BASE EQ)	Tier 1				
PREDNISOLONE TAB 15MG ODT	PREDNISOLONE SOD PHOS ORALLY DISINTEGR TAB 15 MG (BASE EQ)	Tier 1				
PREDNISOLONE TAB 30MG ODT	PREDNISOLONE SOD PHOS ORALLY DISINTEGR TAB 30 MG (BASE EQ)	Tier 1				
PREDNISOLONE TAB 5MG	PREDNISOLONE TAB 5 MG	Tier 1				
PREDNISONE CON 5MG/ML	PREDNISONE CONC 5 MG/ML	Tier 1				
PREDNISONE PAK 10MG	PREDNISONE TAB THERAPY PACK 10 MG (21)	Tier 1				
PREDNISONE PAK 10MG	PREDNISONE TAB THERAPY PACK 10 MG (48)	Tier 1				
PREDNISONE PAK 5MG	PREDNISONE TAB THERAPY PACK 5 MG (21)	Tier 1				
PREDNISONE PAK 5MG	PREDNISONE TAB THERAPY PACK 5 MG (48)	Tier 1				
PREDNISONE SOL 5MG/5ML	PREDNISONE ORAL SOLN 5 MG/5ML	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PREDNISONE TAB 10MG	PREDNISONE TAB 10 MG	Tier 1				
PREDNISONE TAB 1MG	PREDNISONE TAB 1 MG	Tier 1				
PREDNISONE TAB 2.5MG	PREDNISONE TAB 2.5 MG	Tier 1				
PREDNISONE TAB 20MG	PREDNISONE TAB 20 MG	Tier 1				
PREDNISONE TAB 50MG	PREDNISONE TAB 50 MG	Tier 1				
PREDNISONE TAB 5MG	PREDNISONE TAB 5 MG	Tier 1				
SERNIVO SPR 0.05%	BETAMETHASONE DIPROPIONATE SPRAY EMULSION 0.05% (BASE EQUIV)	Tier 3/4				
SYNALAR CRE 0.025%	FLUOCINOLONE ACETONIDE CREAM 0.025%	Tier 3/4				
SYNALAR OIN 0.025%	FLUOCINOLONE ACETONIDE OINT 0.025%	Tier 3/4				
TAPERDEX PAK 12-DAY	DEXAMETHASONE TAB THERAPY PACK 1.5 MG (49)	Tier 3				
TAPERDEX PAK 6 DAY	DEXAMETHASONE TAB THERAPY PACK 1.5 MG (21)	Tier 3				
TAPERDEX PAK 6 DAY	DEXAMETHASONE TAB THERAPY PACK 1.5 MG (21)	Tier 3/4				
TAPERDEX PAK 7-DAY	DEXAMETHASONE TAB THERAPY PACK 1.5 MG (27)	Tier 3				
TEXACORT SOL 2.5%	HYDROCORTISONE SOLN 2.5%	Tier 2				
TOPICORT CRE 0.05%	DESOXIMETASONE CREAM 0.05%	Tier 3/4				
TOPICORT CRE 0.25%	DESOXIMETASONE CREAM 0.25%	Tier 3/4				
TOPICORT GEL 0.05%	DESOXIMETASONE GEL 0.05%	Tier 3/4				
TOPICORT OIN 0.05%	DESOXIMETASONE OINT 0.05%	Tier 3/4				
TOPICORT OIN 0.25%	DESOXIMETASONE OINT 0.25%	Tier 3/4				
TOVET AER 0.05%	CLOBETASOL PROPIONATE EMULSION FOAM 0.05%	Tier 1				
TRIAMCINOLON AER SPRAY	TRIAMCINOLONE ACETONIDE AEROSOL SOLN 0.147 MG/GM	Tier 1				
TRIAMCINOLON CRE 0.025%	TRIAMCINOLONE ACETONIDE CREAM 0.025%	Tier 1				
TRIAMCINOLON CRE 0.1%	TRIAMCINOLONE ACETONIDE CREAM 0.1%	Tier 1				
TRIAMCINOLON CRE 0.5%	TRIAMCINOLONE ACETONIDE CREAM 0.5%	Tier 1				
TRIAMCINOLON LOT 0.025%	TRIAMCINOLONE ACETONIDE LOTION 0.025%	Tier 1				
TRIAMCINOLON LOT 0.1%	TRIAMCINOLONE ACETONIDE LOTION 0.1%	Tier 1				
TRIAMCINOLON OIN 0.025%	TRIAMCINOLONE ACETONIDE OINT 0.025%	Tier 1				
TRIAMCINOLON OIN 0.1%	TRIAMCINOLONE ACETONIDE OINT 0.1%	Tier 1				
TRIAMCINOLON OIN 0.5%	TRIAMCINOLONE ACETONIDE OINT 0.5%	Tier 1				
TRIDERM CRE 0.5%	TRIAMCINOLONE ACETONIDE CREAM 0.5%	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)						
NGENLA INJ 24/1.2ML	SOMATROGON-GHLA SOLUTION PEN-INJECTOR 24 MG/1.2ML (20 MG/ML)	Tier 3/4	X	X		
NGENLA INJ 60/1.2ML	SOMATROGON-GHLA SOLUTION PEN-INJECTOR 60 MG/1.2ML (50 MG/ML)	Tier 3/4	X	X		
VEOZAH TAB 45MG	FEZOLINETANT TAB 45 MG	Tier 3/4	X	X		
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) - Hormone Replacement/Modifying Drugs						
ACTHAR INJ GEL	CORTICOTROPIN SUBCUTANEOUS GEL PEN-INJECTOR 80 UNIT/ML	Tier 3/4	X	X	X	
ACTHAR INJ GEL	CORTICOTROPIN SUBCUTANEOUS GEL PEN-INJECTOR 40 UNIT/0.5ML	Tier 3/4	X	X	X	
CHOR GONADOT INJ 10000UNT	CHORIONIC GONADOTROPIN FOR IM INJ 10000 UNIT	Tier 3				
CLOBETASOL CRE 0.025%	CLOBETASOL PROPIONATE CREAM 0.025%	Tier 3/4				
CORTROPHIN INJ 40/0.5ML	CORTICOTROPIN SUBCUTANEOUS GEL PREFILLED SYR 40 UNIT/0.5ML	Tier 3/4	X		X	
CORTROPHIN INJ 80UNT/ML	CORTICOTROPIN SUBCUTANEOUS GEL PREFILLED SYRINGE 80 UNIT/ML	Tier 3/4	X		X	
DESMOPRESSIN INJ 40/10ML	DESMOPRESSIN ACETATE INJ 4 MCG/ML	Tier 1				
DESMOPRESSIN INJ 4MCG/ML	DESMOPRESSIN ACETATE PRESERVATIVE FREE (PF) INJ 4 MCG/ML	Tier 1				
DESMOPRESSIN INJ 4MCG/ML	DESMOPRESSIN ACETATE INJ 4 MCG/ML	Tier 1				
DESMOPRESSIN SOL 1.5MG/ML	DESMOPRESSIN ACETATE NASAL SOLN 1.5 MG/ML	Tier 3				
DESMOPRESSIN SPR 0.01%	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	Tier 1				
DESMOPRESSIN SPR 0.01%	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01%	Tier 1				
DESMOPRESSIN TAB 0.1MG	DESMOPRESSIN ACETATE TAB 0.1 MG	Tier 1				
DESMOPRESSIN TAB 0.2MG	DESMOPRESSIN ACETATE TAB 0.2 MG	Tier 1				
EGRIFTA SV INJ 2MG	TESAMORELIN ACETATE FOR INJ 2 MG (BASE EQUIV)	Tier 3/4	X	X		
EGRIFTA WR KIT 11.6MG	TESAMORELIN ACETATE FOR SUBCUTANEOUS SOLN KIT 11.6 MG	Tier 3/4	X	X		
FOLLISTIM AQ INJ 300UNIT	FOLLITROPIN BETA INJ 300 UNIT/0.36ML	Tier 2	X	X		
FOLLISTIM AQ INJ 600UNIT	FOLLITROPIN BETA INJ 600 UNIT/0.72ML	Tier 2	X	X		
FOLLISTIM AQ INJ 900UNIT	FOLLITROPIN BETA INJ 900 UNIT/1.08ML	Tier 2	X	X		
GONAL-F INJ 1050UNIT	FOLLITROPIN ALFA FOR INJ 1050 UNIT	Tier 3/4	X		X	
GONAL-F INJ 450UNIT	FOLLITROPIN ALFA FOR INJ 450 UNIT	Tier 3/4	X		X	
GONAL-F RFF INJ 300/0.48	FOLLITROPIN ALFA SUBCUTANEOUS SOLN PEN-INJ 300 UNIT/0.48ML	Tier 3/4	X		X	
GONAL-F RFF INJ 450/0.72	FOLLITROPIN ALFA SUBCUTANEOUS SOLN PEN-INJ 450 UNIT/0.72ML	Tier 3/4	X		X	

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
GONAL-F RFF INJ 75UNIT	FOLLITROPIN ALFA FOR SUBCUTANEOUS INJ 75 UNIT	Tier 3/4	X		X	
GONAL-F RFF INJ 900/1.44	FOLLITROPIN ALFA SUBCUTANEOUS SOLN PEN-INJ 900 UNIT/1.44ML	Tier 3/4	X		X	
IMPOYZ CRE 0.025%	CLOBETASOL PROPIONATE CREAM 0.025%	Tier 3/4				
INCRELEX INJ 40MG/4ML	MECASERMIN INJ 40 MG/4ML (10 MG/ML)	Tier 2	X	X		
MENOPUR INJ 75UNIT	MENOTROPINS FOR SUBCUTANEOUS INJ 75 UNIT	Tier 3/4	X	X		
NOC DURNA SUB 277MCG	DESMOPRESSIN ACETATE SUBLINGUAL TAB 277 MCG	Tier 3	X	X		
NOC DURNA SUB 55.3MCG	DESMOPRESSIN ACETATE SUBLINGUAL TAB 55.3 MCG	Tier 3	X	X		
NORDITROPIN INJ 10/1.5ML	SOMATROPIN SOLUTION PEN-INJECTOR 10 MG/1.5ML	Tier 2	X	X		
NORDITROPIN INJ 15/1.5ML	SOMATROPIN SOLUTION PEN-INJECTOR 15 MG/1.5ML	Tier 2	X	X		
NORDITROPIN INJ 30/3ML	SOMATROPIN SOLUTION PEN-INJECTOR 30 MG/3ML	Tier 2	X	X		
NORDITROPIN INJ 5/1.5ML	SOMATROPIN SOLUTION PEN-INJECTOR 5 MG/1.5ML	Tier 2	X	X		
NOVAREL INJ 5000UNIT	CHORIONIC GONADOTROPIN FOR IM INJ 5000 UNIT	Tier 3				
OMNITROPE INJ 10/1.5ML	SOMATROPIN SOLUTION CARTRIDGE 10 MG/1.5ML	Tier 2	X	X		
OMNITROPE INJ 5.8MG	SOMATROPIN FOR INJ 5.8 MG	Tier 2	X	X		
OMNITROPE INJ 5/1.5ML	SOMATROPIN SOLUTION CARTRIDGE 5 MG/1.5ML	Tier 2	X	X		
OVIDREL INJ	CHORIOGONADOTROPIN ALFA SOLN PREFILLED SYR 250 MCG/0.5ML	Tier 3/4				
PREGNYL INJ 10000UNT	CHORIONIC GONADOTROPIN FOR IM INJ 10000 UNIT	Tier 3				
SKYTROFA INJ 0.7MG	LONAPEG SOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 0.7 MG	Tier 3/4	X	X		
SKYTROFA INJ 1.4MG	LONAPEG SOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 1.4 MG	Tier 3/4	X	X		
SKYTROFA INJ 1.8MG	LONAPEG SOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 1.8 MG	Tier 3/4	X	X		
SKYTROFA INJ 11MG	LONAPEG SOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 11 MG	Tier 3/4	X	X		
SKYTROFA INJ 13.3MG	LONAPEG SOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CART 13.3 MG	Tier 3/4	X	X		
SKYTROFA INJ 2.1MG	LONAPEG SOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 2.1 MG	Tier 3/4	X	X		
SKYTROFA INJ 2.5MG	LONAPEG SOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 2.5 MG	Tier 3/4	X	X		

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

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
EVEXITHROID TAB 15MG	THYROID TAB 15 MG (1/4 GRAIN)	Tier 3				
EVEXITHROID TAB 180MG	THYROID TAB 180 MG (3 GRAIN)	Tier 3				
EVEXITHROID TAB 30MG	THYROID TAB 30 MG (1/2 GRAIN)	Tier 3				
EVEXITHROID TAB 60MG	THYROID TAB 60 MG (1 GRAIN)	Tier 3				
EVEXITHROID TAB 90MG	THYROID TAB 90 MG (1 1/2 GRAIN)	Tier 3				
LEVO-T TAB 100MCG	LEVOTHYROXINE SODIUM TAB 100 MCG	Tier 1				
LEVO-T TAB 112MCG	LEVOTHYROXINE SODIUM TAB 112 MCG	Tier 1				
LEVO-T TAB 125MCG	LEVOTHYROXINE SODIUM TAB 125 MCG	Tier 1				
LEVO-T TAB 137MCG	LEVOTHYROXINE SODIUM TAB 137 MCG	Tier 1				
LEVO-T TAB 150MCG	LEVOTHYROXINE SODIUM TAB 150 MCG	Tier 1				
LEVO-T TAB 175MCG	LEVOTHYROXINE SODIUM TAB 175 MCG	Tier 1				
LEVO-T TAB 200MCG	LEVOTHYROXINE SODIUM TAB 200 MCG	Tier 1				
LEVO-T TAB 25MCG	LEVOTHYROXINE SODIUM TAB 25 MCG	Tier 1				
LEVO-T TAB 300 MCG	LEVOTHYROXINE SODIUM TAB 300 MCG	Tier 1				
LEVO-T TAB 50MCG	LEVOTHYROXINE SODIUM TAB 50 MCG	Tier 1				
LEVO-T TAB 75MCG	LEVOTHYROXINE SODIUM TAB 75 MCG	Tier 1				
LEVO-T TAB 88MCG	LEVOTHYROXINE SODIUM TAB 88 MCG	Tier 1				
LEVOTHYROXIN CAP 100MCG	LEVOTHYROXINE SODIUM CAP 100 MCG	Tier 3/4				
LEVOTHYROXIN CAP 112MCG	LEVOTHYROXINE SODIUM CAP 112 MCG	Tier 3/4				
LEVOTHYROXIN CAP 125MCG	LEVOTHYROXINE SODIUM CAP 125 MCG	Tier 3/4				
LEVOTHYROXIN CAP 137MCG	LEVOTHYROXINE SODIUM CAP 137 MCG	Tier 3/4				
LEVOTHYROXIN CAP 13MCG	LEVOTHYROXINE SODIUM CAP 13 MCG	Tier 3/4				
LEVOTHYROXIN CAP 150MCG	LEVOTHYROXINE SODIUM CAP 150 MCG	Tier 3/4				
LEVOTHYROXIN CAP 175MCG	LEVOTHYROXINE SODIUM CAP 175 MCG	Tier 3/4				
LEVOTHYROXIN CAP 200MCG	LEVOTHYROXINE SODIUM CAP 200 MCG	Tier 3/4				
LEVOTHYROXIN CAP 25MCG	LEVOTHYROXINE SODIUM CAP 25 MCG	Tier 3/4				
LEVOTHYROXIN CAP 50MCG	LEVOTHYROXINE SODIUM CAP 50 MCG	Tier 3/4				
LEVOTHYROXIN CAP 75MCG	LEVOTHYROXINE SODIUM CAP 75 MCG	Tier 3/4				
LEVOTHYROXIN CAP 88MCG	LEVOTHYROXINE SODIUM CAP 88 MCG	Tier 3/4				
LEVOTHYROXIN TAB 100MCG	LEVOTHYROXINE SODIUM TAB 100 MCG	Tier 1				
LEVOTHYROXIN TAB 112MCG	LEVOTHYROXINE SODIUM TAB 112 MCG	Tier 1				
LEVOTHYROXIN TAB 125MCG	LEVOTHYROXINE SODIUM TAB 125 MCG	Tier 1				
LEVOTHYROXIN TAB 137MCG	LEVOTHYROXINE SODIUM TAB 137 MCG	Tier 1				
LEVOTHYROXIN TAB 150MCG	LEVOTHYROXINE SODIUM TAB 150 MCG	Tier 1				
LEVOTHYROXIN TAB 175MCG	LEVOTHYROXINE SODIUM TAB 175 MCG	Tier 1				
LEVOTHYROXIN TAB 200MCG	LEVOTHYROXINE SODIUM TAB 200 MCG	Tier 1				
LEVOTHYROXIN TAB 25MCG	LEVOTHYROXINE SODIUM TAB 25 MCG	Tier 1				
LEVOTHYROXIN TAB 300MCG	LEVOTHYROXINE SODIUM TAB 300 MCG	Tier 1				

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

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
THYQUIDITY SOL 100MCG	LEVOTHYROXINE SODIUM ORAL SOLUTION 100 MCG/5ML	Tier 3/4	X			
THYROID TAB 120MG	THYROID TAB 120 MG (2 GRAIN)	Tier 1				
THYROID TAB 15MG	THYROID TAB 15 MG (1/4 GRAIN)	Tier 1				
THYROID TAB 30MG	THYROID TAB 30 MG (1/2 GRAIN)	Tier 1				
THYROID TAB 60MG	THYROID TAB 60 MG (1 GRAIN)	Tier 1				
THYROID TAB 90MG	THYROID TAB 90 MG (1 1/2 GRAIN)	Tier 1				
TIROSINT CAP 100MCG	LEVOTHYROXINE SODIUM CAP 100 MCG	Tier 3/4				
TIROSINT CAP 112MCG	LEVOTHYROXINE SODIUM CAP 112 MCG	Tier 3/4				
TIROSINT CAP 125MCG	LEVOTHYROXINE SODIUM CAP 125 MCG	Tier 3/4				
TIROSINT CAP 137MCG	LEVOTHYROXINE SODIUM CAP 137 MCG	Tier 3/4				
TIROSINT CAP 13MCG	LEVOTHYROXINE SODIUM CAP 13 MCG	Tier 3/4				
TIROSINT CAP 150MCG	LEVOTHYROXINE SODIUM CAP 150 MCG	Tier 3/4				
TIROSINT CAP 175MCG	LEVOTHYROXINE SODIUM CAP 175 MCG	Tier 3/4				
TIROSINT CAP 200MCG	LEVOTHYROXINE SODIUM CAP 200 MCG	Tier 3/4				
TIROSINT CAP 25MCG	LEVOTHYROXINE SODIUM CAP 25 MCG	Tier 3/4				
TIROSINT CAP 37.5MCG	LEVOTHYROXINE SODIUM CAP 37.5 MCG	Tier 3/4				
TIROSINT CAP 44MCG	LEVOTHYROXINE SODIUM CAP 44 MCG	Tier 3/4				
TIROSINT CAP 50MCG	LEVOTHYROXINE SODIUM CAP 50 MCG	Tier 3/4				
TIROSINT CAP 62.5MCG	LEVOTHYROXINE SODIUM CAP 62.5 MCG	Tier 3/4				
TIROSINT CAP 75MCG	LEVOTHYROXINE SODIUM CAP 75 MCG	Tier 3/4				
TIROSINT CAP 88MCG	LEVOTHYROXINE SODIUM CAP 88 MCG	Tier 3/4				
TIROSINT-SOL SOL 100MCG	LEVOTHYROXINE SODIUM ORAL SOLUTION 100 MCG/ML	Tier 2	X			
TIROSINT-SOL SOL 112MCG	LEVOTHYROXINE SODIUM ORAL SOLUTION 112 MCG/ML	Tier 2	X			
TIROSINT-SOL SOL 125MCG	LEVOTHYROXINE SODIUM ORAL SOLUTION 125 MCG/ML	Tier 2	X			
TIROSINT-SOL SOL 137MCG	LEVOTHYROXINE SODIUM ORAL SOLUTION 137 MCG/ML	Tier 2	X			
TIROSINT-SOL SOL 13MCG/ML	LEVOTHYROXINE SODIUM ORAL SOLUTION 13 MCG/ML	Tier 2	X			
TIROSINT-SOL SOL 150MCG	LEVOTHYROXINE SODIUM ORAL SOLUTION 150 MCG/ML	Tier 2	X			
TIROSINT-SOL SOL 175MCG	LEVOTHYROXINE SODIUM ORAL SOLUTION 175 MCG/ML	Tier 2	X			
TIROSINT-SOL SOL 200MCG	LEVOTHYROXINE SODIUM ORAL SOLUTION 200 MCG/ML	Tier 2	X			
TIROSINT-SOL SOL 25MCG/ML	LEVOTHYROXINE SODIUM ORAL SOLUTION 25 MCG/ML	Tier 2	X			
TIROSINT-SOL SOL 37.5/ML	LEVOTHYROXINE SODIUM ORAL SOLUTION 37.5 MCG/ML	Tier 2	X			

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
TIROSINT-SOL SOL 44MCG/ML	LEVOTHYROXINE SODIUM ORAL SOLUTION 44 MCG/ML	Tier 2	X			
TIROSINT-SOL SOL 50MCG/ML	LEVOTHYROXINE SODIUM ORAL SOLUTION 50 MCG/ML	Tier 2	X			
TIROSINT-SOL SOL 62.5/ML	LEVOTHYROXINE SODIUM ORAL SOLUTION 62.5 MCG/ML	Tier 2	X			
TIROSINT-SOL SOL 75MCG/ML	LEVOTHYROXINE SODIUM ORAL SOLUTION 75 MCG/ML	Tier 2	X			
TIROSINT-SOL SOL 88MCG/ML	LEVOTHYROXINE SODIUM ORAL SOLUTION 88 MCG/ML	Tier 2	X			
UNITHROID TAB 100MCG	LEVOTHYROXINE SODIUM TAB 100 MCG	Tier 1				
UNITHROID TAB 112MCG	LEVOTHYROXINE SODIUM TAB 112 MCG	Tier 1				
UNITHROID TAB 125MCG	LEVOTHYROXINE SODIUM TAB 125 MCG	Tier 1				
UNITHROID TAB 137MCG	LEVOTHYROXINE SODIUM TAB 137 MCG	Tier 1				
UNITHROID TAB 150MCG	LEVOTHYROXINE SODIUM TAB 150 MCG	Tier 1				
UNITHROID TAB 175MCG	LEVOTHYROXINE SODIUM TAB 175 MCG	Tier 1				
UNITHROID TAB 200MCG	LEVOTHYROXINE SODIUM TAB 200 MCG	Tier 1				
UNITHROID TAB 25MCG	LEVOTHYROXINE SODIUM TAB 25 MCG	Tier 1				
UNITHROID TAB 300MCG	LEVOTHYROXINE SODIUM TAB 300 MCG	Tier 1				
UNITHROID TAB 50MCG	LEVOTHYROXINE SODIUM TAB 50 MCG	Tier 1				
UNITHROID TAB 75MCG	LEVOTHYROXINE SODIUM TAB 75 MCG	Tier 1				
UNITHROID TAB 88MCG	LEVOTHYROXINE SODIUM TAB 88 MCG	Tier 1				
Hormonal Agents, Suppressant (Adrenal) - Drugs to Regulate Hormones						
ISTURISA TAB 1MG	OSILODROSTAT PHOSPHATE TAB 1 MG	Tier 3/4	X	X		
ISTURISA TAB 5MG	OSILODROSTAT PHOSPHATE TAB 5 MG	Tier 3/4	X	X		
LYSODREN TAB 500MG	MITOTANE TAB 500 MG	Tier 2				
Hormonal Agents, Suppressant (Pituitary) - Hormone Suppressants						
CABERGOLINE TAB 0.5MG	CABERGOLINE TAB 0.5 MG	Tier 1				
CETROTIDE KIT 0.25MG	CETRORELIX ACETATE FOR INJ KIT 0.25 MG	Tier 3/4	X	X	X	
FIRMAGON INJ 120MG	DEGARELIX ACETATE FOR INJ 120 MG/VIAL (240 MG DOSE)	Tier 3				
FIRMAGON INJ 80MG	DEGARELIX ACETATE FOR INJ 80 MG (BASE EQUIV)	Tier 3				
FYREMADEL SOL 250/0.5	GANIRELIX ACETATE SOLN PREFILLED SYRINGE 250 MCG/0.5ML	Tier 3		X		
GANIRELIX AC INJ 250/0.5	GANIRELIX ACETATE SOLN PREFILLED SYRINGE 250 MCG/0.5ML	Tier 1		X		
LEUPROLIDE INJ 14 DAY	LEUPROLIDE ACETATE INJ KIT 1 MG/0.2ML (5 MG/ML)	Tier 1	X			
LEUPROLIDE INJ 1MG/0.2	LEUPROLIDE ACETATE INJ KIT 1 MG/0.2ML (5 MG/ML)	Tier 1	X			

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
LEUPROLIDE KIT 14 DAY	LEUPROLIDE ACETATE INJ KIT 1 MG/0.2ML (5 MG/ML)	Tier 1	X			
LEUPROLIDE KIT 1MG/0.2	LEUPROLIDE ACETATE INJ KIT 1 MG/0.2ML (5 MG/ML)	Tier 1	X			
OCTREOTIDE INJ 1000/5ML	OCTREOTIDE ACETATE INJ 200 MCG/ML (0.2 MG/ML)	Tier 1	X			
OCTREOTIDE INJ 1000MCG	OCTREOTIDE ACETATE INJ 1000 MCG/ML (1 MG/ML)	Tier 1	X			
OCTREOTIDE INJ 100MCG	OCTREOTIDE ACETATE INJ 100 MCG/ML (0.1 MG/ML)	Tier 1	X			
OCTREOTIDE INJ 100MCG	OCTREOTIDE ACETATE SUBCUTANEOUS SOLN PREF SYR 100 MCG/ML	Tier 1	X			
OCTREOTIDE INJ 200MCG	OCTREOTIDE ACETATE INJ 200 MCG/ML (0.2 MG/ML)	Tier 1	X			
OCTREOTIDE INJ 5000/5ML	OCTREOTIDE ACETATE INJ 1000 MCG/ML (1 MG/ML)	Tier 1	X			
OCTREOTIDE INJ 500MCG	OCTREOTIDE ACETATE INJ 500 MCG/ML (0.5 MG/ML)	Tier 1	X			
OCTREOTIDE INJ 500MCG	OCTREOTIDE ACETATE SUBCUTANEOUS SOLN PREF SYR 500 MCG/ML	Tier 1	X			
OCTREOTIDE INJ 50MCG/ML	OCTREOTIDE ACETATE INJ 50 MCG/ML (0.05 MG/ML)	Tier 1	X			
OCTREOTIDE INJ 50MCG/ML	OCTREOTIDE ACETATE SUBCUTANEOUS SOLN PREF SYR 50 MCG/ML	Tier 1	X			
ORIAHNN CAP	ELAGOLIX-ESTRAD-NORETH 300-1-0.5MG & ELAGOLIX 300MG CAP PACK	Tier 2	X	X		
ORILISSA TAB 150MG	ELAGOLIX SODIUM TAB 150 MG (BASE EQUIV)	Tier 2	X	X		
ORILISSA TAB 200MG	ELAGOLIX SODIUM TAB 200 MG (BASE EQUIV)	Tier 2	X	X		
SIGNIFOR INJ 0.3MG/ML	PASIREOTIDE DIASPARTATE INJ 0.3 MG/ML (BASE EQUIV)	Tier 3/4	X	X		
SIGNIFOR INJ 0.6MG/ML	PASIREOTIDE DIASPARTATE INJ 0.6 MG/ML (BASE EQUIV)	Tier 3/4	X	X		
SIGNIFOR INJ 0.9MG/ML	PASIREOTIDE DIASPARTATE INJ 0.9 MG/ML (BASE EQUIV)	Tier 3/4	X	X		
SOMAVERT INJ 10MG	PEGVISOMANT FOR INJ 10 MG (AS PROTEIN)	Tier 3/4	X	X		
SOMAVERT INJ 15MG	PEGVISOMANT FOR INJ 15 MG (AS PROTEIN)	Tier 3/4	X	X		
SOMAVERT INJ 20MG	PEGVISOMANT FOR INJ 20 MG (AS PROTEIN)	Tier 3/4	X	X		
SOMAVERT INJ 25MG	PEGVISOMANT FOR INJ 25 MG (AS PROTEIN)	Tier 3/4	X	X		
SOMAVERT INJ 30MG	PEGVISOMANT FOR INJ 30 MG (AS PROTEIN)	Tier 3/4	X	X		
SYNAREL SOL 2MG/ML	NAFARELIN ACETATE NASAL SOLN 2 MG/ML (200 MCG/ACT) (BASE EQ)	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
Immune Suppressants						
SKYRIZI INJ 150MG/ML	RISANKIZUMAB-RZAA SOLN PREFILLED SYRINGE 150 MG/ML	Tier 2	X	X		
SKYRIZI PEN INJ 150MG/ML	RISANKIZUMAB-RZAA SOLN AUTO-INJECTOR 150 MG/ML	Tier 2	X	X		
Immune Suppressants - Immune System Drugs						
ADALIMU-ADAZ INJ 10/0.1ML	ADALIMUMAB-ADAZ SOLN PREFILLED SYRINGE 10 MG/0.1ML	Tier 2	X	X		
ADALIMU-ADAZ INJ 20/0.2ML	ADALIMUMAB-ADAZ SOLN PREFILLED SYRINGE 20 MG/0.2ML	Tier 2	X	X		
ADALIMU-ADAZ INJ 40/0.4ML	ADALIMUMAB-ADAZ SOLN AUTO-INJECTOR 40 MG/0.4ML	Tier 2	X	X		
ADALIMU-ADAZ INJ 40/0.4ML	ADALIMUMAB-ADAZ SOLN PREFILLED SYRINGE 40 MG/0.4ML	Tier 2	X	X		
ADALIMU-ADAZ INJ 80/0.8ML	ADALIMUMAB-ADAZ SOLN AUTO-INJECTOR 80 MG/0.8ML	Tier 2	X	X		
AMJEVITA INJ 20/0.2ML	ADALIMUMAB-ATTO SOLN PREFILLED SYRINGE 20 MG/0.2ML	Tier 2	X			
AMJEVITA INJ 40/0.4ML	ADALIMUMAB-ATTO SOLN PREFILLED SYRINGE 40 MG/0.4ML	Tier 2	X	X		
AMJEVITA INJ 40/0.4ML	ADALIMUMAB-ATTO SOLN AUTO-INJECTOR 40 MG/0.4ML	Tier 2	X	X		
AMJEVITA INJ 80/0.8ML	ADALIMUMAB-ATTO SOLN AUTO-INJECTOR 80 MG/0.8ML	Tier 2	X	X		
AZASAN TAB 100MG	AZATHIOPRINE TAB 100 MG	Tier 3/4				
AZASAN TAB 75 MG	AZATHIOPRINE TAB 75 MG	Tier 3/4				
AZATHIOPRINE TAB 100MG	AZATHIOPRINE TAB 100 MG	Tier 1				
AZATHIOPRINE TAB 50MG	AZATHIOPRINE TAB 50 MG	Tier 1				
AZATHIOPRINE TAB 75MG	AZATHIOPRINE TAB 75 MG	Tier 1				
CIMZIA PREFL KIT 200MG/ML	CERTOLIZUMAB PEGOL PREFILLED SYRINGE KIT 200 MG/ML	Tier 2	X	X		
CIMZIA START KIT 200MG/ML	CERTOLIZUMAB PEGOL PREFILLED SYRINGE KIT 200 MG/ML	Tier 2	X	X		
CYCLOSPORINE CAP 100MG	CYCLOSPORINE CAP 100 MG	Tier 1				
CYCLOSPORINE CAP 100MG MD	CYCLOSPORINE MODIFIED CAP 100 MG	Tier 1				
CYCLOSPORINE CAP 25MG	CYCLOSPORINE CAP 25 MG	Tier 1				
CYCLOSPORINE CAP 25MG MOD	CYCLOSPORINE MODIFIED CAP 25 MG	Tier 1				
CYCLOSPORINE CAP 50MG MOD	CYCLOSPORINE MODIFIED CAP 50 MG	Tier 1				
CYCLOSPORINE SOL MODIFIED	CYCLOSPORINE MODIFIED ORAL SOLN 100 MG/ML	Tier 1				
ENBREL INJ 25/0.5ML	ETANERCEPT SUBCUTANEOUS SOLN PREFILLED SYRINGE 25 MG/0.5ML	Tier 2	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ENBREL INJ 25MG	ETANERCEPT SUBCUTANEOUS INJ 25 MG/0.5ML	Tier 2	X	X		
ENBREL INJ 50MG/ML	ETANERCEPT SUBCUTANEOUS SOLN PREFILLED SYRINGE 50 MG/ML	Tier 2	X	X		
ENBREL MINI INJ 50MG/ML	ETANERCEPT SUBCUTANEOUS SOLUTION CARTRIDGE 50 MG/ML	Tier 2	X	X		
ENBREL SRCLK INJ 50MG/ML	ETANERCEPT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 50 MG/ML	Tier 2	X	X		
ENSPRYNG INJ	SATRALIZUMAB-MWGE SUBCUTANEOUS SOLN PREF SYRINGE 120 MG/ML	Tier 3/4	X	X		
EVEROLIMUS TAB 0.25MG	EVEROLIMUS TAB 0.25 MG	Tier 1				
EVEROLIMUS TAB 0.5 MG	EVEROLIMUS TAB 0.5 MG	Tier 1				
EVEROLIMUS TAB 0.75MG	EVEROLIMUS TAB 0.75 MG	Tier 1				
EVEROLIMUS TAB 1MG	EVEROLIMUS TAB 1 MG	Tier 1				
GENGRAF CAP 100MG	CYCLOSPORINE MODIFIED CAP 100 MG	Tier 1				
GENGRAF CAP 25MG	CYCLOSPORINE MODIFIED CAP 25 MG	Tier 1				
GENGRAF SOL 100MG/ML	CYCLOSPORINE MODIFIED ORAL SOLN 100 MG/ML	Tier 1				
JYLAMVO SOL 2MG/ML	METHOTREXATE ORAL SOLN 2 MG/ML	Tier 3/4	X			
KINERET INJ	ANAKINRA SUBCUTANEOUS SOLN PREFILLED SYRINGE 100 MG/0.67ML	Tier 3	X	X	X	
LUPKYNIS CAP 7.9MG	VOCLOSPORIN CAP 7.9 MG	Tier 3/4	X	X		
METHOTREXATE INJ 1GM	METHOTREXATE SODIUM FOR INJ 1 GM	Tier 1				
METHOTREXATE INJ 1GM/40ML	METHOTREXATE SODIUM INJ PF 1000 MG/40ML (25 MG/ML)	Tier 1				
METHOTREXATE INJ 250/10ML	METHOTREXATE SODIUM INJ PF 250 MG/10ML (25 MG/ML)	Tier 1				
METHOTREXATE INJ 25MG/ML	METHOTREXATE SODIUM INJ 50 MG/2ML (25 MG/ML)	Tier 1				
METHOTREXATE INJ 25MG/ML	METHOTREXATE SODIUM INJ PF 1000 MG/40ML (25 MG/ML)	Tier 1				
METHOTREXATE INJ 25MG/ML	METHOTREXATE SODIUM INJ 250 MG/10ML (25 MG/ML)	Tier 1				
METHOTREXATE INJ 50MG/2ML	METHOTREXATE SODIUM INJ PF 50 MG/2ML (25 MG/ML)	Tier 1				
METHOTREXATE INJ 50MG/2ML	METHOTREXATE SODIUM INJ 50 MG/2ML (25 MG/ML)	Tier 1				
METHOTREXATE TAB 2.5MG	METHOTREXATE SODIUM TAB 2.5 MG (BASE EQUIV)	Tier 1				
MYCOPHENOLAT CAP 250MG	MYCOPHENOLATE MOFETIL CAP 250 MG	Tier 1				
MYCOPHENOLAT SUS 200MG/ML	MYCOPHENOLATE MOFETIL FOR ORAL SUSP 200 MG/ML	Tier 1				
MYCOPHENOLAT TAB 500MG	MYCOPHENOLATE MOFETIL TAB 500 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
MYCOPHENOLIC TAB 180MG DR	MYCOPHENOLATE SODIUM TAB DR 180 MG (MYCOPHENOLIC ACID EQUIV)	Tier 1				
MYCOPHENOLIC TAB 360MG DR	MYCOPHENOLATE SODIUM TAB DR 360 MG (MYCOPHENOLIC ACID EQUIV)	Tier 1				
MYHIBBIN SUS 200MG/ML	MYCOPHENOLATE MOFETIL ORAL SUSP 200 MG/ML	Tier 1				
OLUMIANT TAB 1MG	BARICITINIB TAB 1 MG	Tier 3	X	X	X	
OLUMIANT TAB 2MG	BARICITINIB TAB 2 MG	Tier 3	X	X	X	
OLUMIANT TAB 4MG	BARICITINIB TAB 4 MG	Tier 3	X	X	X	
OMVOH INJ 100/200	MIRIKIZUMAB-MRKZ SUBCUTANEOUS AUTO-INJ 100 MG/ML & 200MG/2ML	Tier 2	X	X		
OMVOH INJ 100/200	MIRIKIZUMAB-MRKZ SUBCUTANEOUS PREF SYR 100 MG/ML & 200MG/2ML	Tier 2	X	X		
OMVOH INJ 100MG/ML	MIRIKIZUMAB-MRKZ SUBCUTANEOUS SOLN AUTO-INJECTOR 100 MG/ML	Tier 2	X	X		
OMVOH INJ 100MG/ML	MIRIKIZUMAB-MRKZ SUBCUTANEOUS SOL PREFILL SYRINGE 100 MG/ML	Tier 2	X	X		
OMVOH INJ 200/2ML	MIRIKIZUMAB-MRKZ SUBCUTANEOUS SOL PREFILL SYRINGE 200 MG/2ML	Tier 2	X	X		
OMVOH INJ 200/2ML	MIRIKIZUMAB-MRKZ SUBCUTANEOUS SOLN AUTO-INJECTOR 200 MG/2ML	Tier 2	X	X		
ORENCIA INJ 125MG/ML	ABATACEPT SUBCUTANEOUS SOLN PREFILLED SYRINGE 125 MG/ML	Tier 3	X	X	X	
ORENCIA INJ 50/0.4ML	ABATACEPT SUBCUTANEOUS SOLN PREFILLED SYRINGE 50 MG/0.4ML	Tier 3	X	X	X	
ORENCIA INJ 87.5/0.7	ABATACEPT SUBCUTANEOUS SOLN PREFILLED SYRINGE 87.5 MG/0.7ML	Tier 3	X	X	X	
ORENCIA CLCK INJ 125MG/ML	ABATACEPT SUBCUTANEOUS SOLN AUTO-INJECTOR 125 MG/ML	Tier 3	X	X	X	
PROGRAF CAP 0.5MG	TACROLIMUS CAP 0.5 MG	Tier 3/4				
PROGRAF CAP 1MG	TACROLIMUS CAP 1 MG	Tier 3/4				
PROGRAF CAP 5MG	TACROLIMUS CAP 5 MG	Tier 3/4				
PROGRAF GRA 0.2MG	TACROLIMUS PACKET FOR SUSP 0.2 MG	Tier 3/4	X			
PROGRAF GRA 1MG	TACROLIMUS PACKET FOR SUSP 1 MG	Tier 3/4	X			
RASUVO INJ 10MG	METHOTREXATE SOLN PF AUTO-INJECTOR 10 MG/0.2ML	Tier 2		X		
RASUVO INJ 12.5MG	METHOTREXATE SOLN PF AUTO-INJECTOR 12.5 MG/0.25ML	Tier 2		X		
RASUVO INJ 15MG	METHOTREXATE SOLN PF AUTO-INJECTOR 15 MG/0.3ML	Tier 2		X		
RASUVO INJ 17.5MG	METHOTREXATE SOLN PF AUTO-INJECTOR 17.5 MG/0.35ML	Tier 2		X		
RASUVO INJ 20MG	METHOTREXATE SOLN PF AUTO-INJECTOR 20 MG/0.4ML	Tier 2		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
RASUVO INJ 22.5MG	METHOTREXATE SOLN PF AUTO-INJECTOR 22.5 MG/0.45ML	Tier 2		X		
RASUVO INJ 25MG	METHOTREXATE SOLN PF AUTO-INJECTOR 25 MG/0.5ML	Tier 2		X		
RASUVO INJ 30MG	METHOTREXATE SOLN PF AUTO-INJECTOR 30 MG/0.6ML	Tier 2		X		
RASUVO INJ 7.5MG	METHOTREXATE SOLN PF AUTO-INJECTOR 7.5 MG/0.15ML	Tier 2		X		
SANDIMMUNE SOL 100MG/ML	CYCLOSPORINE ORAL SOLN 100 MG/ML	Tier 3/4				
SIMPONI INJ 100MG/ML	GOLIMUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 100 MG/ML	Tier 2	X	X		
SIMPONI INJ 100MG/ML	GOLIMUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 100 MG/ML	Tier 2	X	X		
SIMPONI INJ 50/0.5ML	GOLIMUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 50 MG/0.5ML	Tier 2	X	X		
SIMPONI INJ 50/0.5ML	GOLIMUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 50 MG/0.5ML	Tier 2	X	X		
SIROLIMUS SOL 1MG/ML	SIROLIMUS ORAL SOLN 1 MG/ML	Tier 1				
SIROLIMUS TAB 0.5MG	SIROLIMUS TAB 0.5 MG	Tier 1				
SIROLIMUS TAB 1MG	SIROLIMUS TAB 1 MG	Tier 1				
SIROLIMUS TAB 2MG	SIROLIMUS TAB 2 MG	Tier 1				
SKYRIZI INJ 180/1.2	RISANKIZUMAB-RZAA SUBCUTANEOUS SOLN CARTRIDGE 180 MG/1.2ML	Tier 2	X	X		
SKYRIZI INJ 360/2.4	RISANKIZUMAB-RZAA SUBCUTANEOUS SOLN CARTRIDGE 360 MG/2.4ML	Tier 2	X	X		
TACROLIMUS CAP 0.5MG	TACROLIMUS CAP 0.5 MG	Tier 1				
TACROLIMUS CAP 1MG	TACROLIMUS CAP 1 MG	Tier 1				
TACROLIMUS CAP 5MG	TACROLIMUS CAP 5 MG	Tier 1				
TREXALL TAB 10MG	METHOTREXATE SODIUM TAB 10 MG (BASE EQUIV)	Tier 2				
TREXALL TAB 15MG	METHOTREXATE SODIUM TAB 15 MG (BASE EQUIV)	Tier 2				
TREXALL TAB 5MG	METHOTREXATE SODIUM TAB 5 MG (BASE EQUIV)	Tier 2				
TREXALL TAB 7.5MG	METHOTREXATE SODIUM TAB 7.5 MG (BASE EQUIV)	Tier 2				
XATMEP SOL 2.5MG/ML	METHOTREXATE ORAL SOLN 2.5 MG/ML	Tier 3/4	X			
XELJANZ SOL 1MG/ML	TOFACITINIB CITRATE ORAL SOLN 1 MG/ML (BASE EQUIVALENT)	Tier 2	X	X		
XELJANZ TAB 10MG	TOFACITINIB CITRATE TAB 10 MG (BASE EQUIVALENT)	Tier 2	X	X		
XELJANZ TAB 5MG	TOFACITINIB CITRATE TAB 5 MG (BASE EQUIVALENT)	Tier 2	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
XELJANZ XR TAB 11MG	TOFACITINIB CITRATE TAB ER 24HR 11 MG (BASE EQUIVALENT)	Tier 2	X	X		
XELJANZ XR TAB 22MG	TOFACITINIB CITRATE TAB ER 24HR 22 MG (BASE EQUIVALENT)	Tier 2	X	X		
Immunological Agents, Other						
BIMZELX INJ 160MG/ML	BIMEKIZUMAB-BKZX SUBCUTANEOUS SOLN PREFILLED SYR 160 MG/ML	Tier 3	X	X	X	
BIMZELX INJ 160MG/ML	BIMEKIZUMAB-BKZX SUBCUTANEOUS SOLN AUTO-INJECTOR 160 MG/ML	Tier 3	X	X	X	
BIMZELX INJ 320MG/2	BIMEKIZUMAB-BKZX SUBCUTANEOUS SOLN AUTO-INJECTOR 320 MG/2ML	Tier 3	X	X	X	
BIMZELX INJ 320MG/2	BIMEKIZUMAB-BKZX SUBCUTANEOUS SOLN PREFILLED SYR 320 MG/2ML	Tier 3	X	X	X	
JOENJA TAB 70MG	LENIOLISIB PHOSPHATE TAB 70 MG	Tier 2	X	X		
REZUROCK TAB 200MG	BELUMOSUDIL MESYLATE TAB 200 MG	Tier 3/4	X	X		
VIJOICE GRA 50MG	ALPELISIB (PROS) ORAL GRANULES PACKET 50 MG	Tier 3/4	X	X		
VIJOICE TAB 125MG	ALPELISIB (PROS) TAB THERAPY PACK 125 MG DAILY DOSE	Tier 3/4	X	X		
VIJOICE TAB 250MG	ALPELISIB (PROS) PAK 250 MG DAILY DOSE (200 MG & 50 MG TABS)	Tier 3/4	X	X		
VIJOICE TAB 50MG	ALPELISIB (PROS) TAB THERAPY PACK 50 MG DAILY DOSE	Tier 3/4	X	X		
VYVGART INJ HYTRULO	EFGARTIGIMOD ALF-HYALUR-QVFC PREF SYR 1000-10000 MG-UNIT/5ML	Tier 3/4	X	X		
Immunomodulators - Immune System Drugs						
ACTEMRA INJ 162/0.9	TOCILIZUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 162 MG/0.9ML	Tier 3	X	X	X	
ACTEMRA INJ ACTPEN	TOCILIZUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 162 MG/0.9ML	Tier 3	X	X	X	
ACTIMMUNE INJ 2MU/0.5	INTERFERON GAMMA-1B INJ 100 MCG/0.5ML (2000000 UNIT/0.5ML)	Tier 2	X	X		
ALFERON N INJ 5MU/ML	INTERFERON ALFA-N3 INJ 5000000 UNIT/ML	Tier 2				
ARCALYST INJ 220MG	RILONACEPT FOR INJ 220 MG	Tier 2	X	X		
AURANOFIN CAP 3MG	AURANOFIN CAP 3 MG	Tier 3				
BENLYSTA INJ 200MG/ML	BELIMUMAB SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/ML	Tier 2	X	X		
BENLYSTA INJ 200MG/ML	BELIMUMAB SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/ML	Tier 2	X	X		
BEYFORTUS INJ 100MG/ML	NIRSEVIMAB-ALIP IM SOLN PREFILLED SYRINGE 100 MG/ML	HCR				
BEYFORTUS INJ 50/0.5ML	NIRSEVIMAB-ALIP IM SOLN PREFILLED SYRINGE 50 MG/0.5ML	HCR				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ENFLONIA INJ 105MG	CLESROVIMAB-CFOR IM SOLN PREFILLED SYRINGE 105 MG/0.7ML	HCR				
ENTYVIO PEN INJ 108/0.68	VEDOLIZUMAB SOLN AUTO-INJECTOR 108 MG/0.68ML	Tier 2	X	X		
KEVZARA INJ 150/1.14	SARILUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 150 MG/1.14ML	Tier 3/4	X	X	X	
KEVZARA INJ 150/1.14	SARILUMAB SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/1.14ML	Tier 3/4	X	X	X	
KEVZARA INJ 200/1.14	SARILUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 200 MG/1.14ML	Tier 3/4	X	X	X	
KEVZARA INJ 200/1.14	SARILUMAB SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/1.14ML	Tier 3/4	X	X	X	
LEFLUNOMIDE TAB 10MG	LEFLUNOMIDE TAB 10 MG	Tier 1				
LEFLUNOMIDE TAB 20MG	LEFLUNOMIDE TAB 20 MG	Tier 1				
OTEZLA TAB 10/20	APREMILAST TAB STARTER THERAPY PACK 4 X 10 MG & 51 X 20 MG	Tier 2	X	X		
OTEZLA TAB 10/20/30	APREMILAST TAB STARTER THERAPY PACK 10 MG & 20 MG & 30 MG	Tier 2	X	X		
OTEZLA TAB 20MG	APREMILAST TAB 20 MG	Tier 2	X	X		
OTEZLA TAB 30MG	APREMILAST TAB 30 MG	Tier 2	X	X		
OTEZLA XR TAB 75MG	APREMILAST TAB ER 24HR 75 MG	Tier 2	X	X		
RIDAURA CAP 3MG	AURANOFIN CAP 3 MG	Tier 3				
RINVOQ TAB 15MG ER	UPADACITINIB TAB ER 24HR 15 MG	Tier 2	X	X		
RINVOQ TAB 30MG ER	UPADACITINIB TAB ER 24HR 30 MG	Tier 2	X	X		
RINVOQ TAB 45MG ER	UPADACITINIB TAB ER 24HR 45 MG	Tier 2	X	X		
RINVOQ LQ SOL 1MG/ML	UPADACITINIB ORAL SOLN 1 MG/ML	Tier 2	X	X		
TAKHZYRO INJ 150MG/ML	LANADELUMAB-FLYO SOLN PREF SYRINGE 150 MG/ML	Tier 2	X	X		
TAKHZYRO INJ 300/2ML	LANADELUMAB-FLYO SOLN PREF SYRINGE 300 MG/2ML (150 MG/ML)	Tier 2	X	X		
TYENNE INJ 162/0.9	TOCILIZUMAB-AAZG SUBCUTANEOUS SOLN AUTO-INJ 162 MG/0.9ML	Tier 3	X		X	
TYENNE INJ 162MG	TOCILIZUMAB-AAZG SUBCUTANEOUS SOLN PREF SYR 162 MG/0.9ML	Tier 3	X		X	
Insulins - Diabetic Drugs						
ADMIX NEEDLE MIS 18GX1.5"	NEEDLE (DISP) 18 X 1-1/2"	Tier 2				
AFREZZA POW 12 UNIT	INSULIN REGULAR (HUMAN) INHALATION POWDER 12 UNIT/CARTRIDGE	Tier 3/4				
AFREZZA POW 4-8 UNIT	INSULIN REGULAR (HUMAN) INHAL POWD 90 X 4 UNIT & 90 X 8 UNIT	Tier 3/4				
AFREZZA POW 4-8-12	INSULIN REGULAR (HUMAN) INH POWD 60X4 & 60X8 & 60X12 UT/CART	Tier 3/4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
AFREZZA POW 4UNIT	INSULIN REGULAR (HUMAN) INHALATION POWDER 4 UNIT/CARTRIDGE	Tier 3/4				
AFREZZA POW 8 UNIT	INSULIN REGULAR (HUMAN) INHALATION POWDER 8 UNIT/CARTRIDGE	Tier 3/4				
AFREZZA POW 8-12UNIT	INSULIN REGULAR (HUMAN) INH POWD 90 X 8 UNIT & 90 X 12 UNIT	Tier 3/4				
BD BLNT FILL MIS 18GX1.5	NEEDLE (DISP) 18 X 1-1/2"	Tier 2				
BD BLUNT FIL MIS 18GX1"	NEEDLE (DISP) 18 X 1"	Tier 2				
BD ECLIPSE MIS 18GX1.5"	NEEDLE (DISP) 18 X 1-1/2"	Tier 2				
HUMALOG INJ 100/ML	INSULIN LISPRO INJ SOLN 100 UNIT/ML	Tier 3/4				
HUMALOG INJ 100/ML	INSULIN LISPRO SOLN CARTRIDGE 100 UNIT/ML	Tier 2				
HUMALOG JR INJ 100/ML	INSULIN LISPRO SOLN PEN-INJECTOR 100 UNIT/ML (0.5 UNIT DIAL)	Tier 2				
HUMALOG KWIK INJ 100/ML	INSULIN LISPRO SOLN PEN-INJECTOR 100 UNIT/ML (1 UNIT DIAL)	Tier 2				
HUMALOG KWIK INJ 200/ML	INSULIN LISPRO SOLN PEN-INJECTOR 200 UNIT/ML	Tier 2				
HUMALOG MIX INJ 50/50	INSULIN LISPRO PROTAMINE & LISPRO INJ 100 UNIT/ML (50-50)	Tier 1				
HUMALOG MIX INJ 50/50KWP	INSULIN LISPRO PROT & LISPRO SUS PEN-INJ 100 UNIT/ML (50-50)	Tier 2				
HUMALOG MIX INJ 75/25KWP	INSULIN LISPRO PROT & LISPRO SUS PEN-INJ 100 UNIT/ML (75-25)	Tier 2				
HUMALOG MIX SUS 75/25	INSULIN LISPRO PROT & LISPRO INJ 100 UNIT/ML (75-25)	Tier 1				
HUMULIN INJ 70/30	INSULIN NPH ISOPHANE & REGULAR HUMAN INJ 100 UNIT/ML (70-30)	Tier 1				
HUMULIN INJ 70/30KWP	INSULIN NPH & REGULAR SUSP PEN-INJ 100 UNIT/ML (70-30)	Tier 2				
HUMULIN N INJ U-100	INSULIN NPH (HUMAN) (ISOPHANE) INJ 100 UNIT/ML	Tier 1				
HUMULIN N INJ U-100KWP	INSULIN NPH (HUMAN) (ISOPHANE) SUSP PEN-INJECTOR 100 UNIT/ML	Tier 2				
HUMULIN R INJ U-100	INSULIN REGULAR (HUMAN) INJ 100 UNIT/ML	Tier 1				
HUMULIN R INJ U-500	INSULIN REGULAR (HUMAN) INJ 500 UNIT/ML	Tier 1				
HUMULIN R INJ U-500	INSULIN REGULAR (HUMAN) SOLN PEN-INJECTOR 500 UNIT/ML	Tier 2				
HYPO NEEDLE MIS 18GX1.5"	NEEDLE (DISP) 18 X 1-1/2"	Tier 2				
HYPO NEEDLE MIS 18GX1"	NEEDLE (DISP) 18 X 1"	Tier 2				
INSULIN LISP INJ 100/ML	INSULIN LISPRO INJ SOLN 100 UNIT/ML	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
INSULIN LISP INJ 100/ML	INSULIN LISPRO SOLN PEN-INJECTOR 100 UNIT/ML (1 UNIT DIAL)	Tier 2				
INSULIN LISP INJ JUNIOR	INSULIN LISPRO SOLN PEN-INJECTOR 100 UNIT/ML (0.5 UNIT DIAL)	Tier 2				
INSULIN LISP INJ PROTAMIN	INSULIN LISPRO PROT & LISPRO SUS PEN-INJ 100 UNIT/ML (75-25)	Tier 2				
LANTUS INJ 100/ML	INSULIN GLARGINE INJ 100 UNIT/ML	Tier 1				
LANTUS SOLOS INJ 100/ML	INSULIN GLARGINE SOLN PEN-INJECTOR 100 UNIT/ML	Tier 1				
LYUMJEV INJ 100UT/ML	INSULIN LISPRO-AABC INJ 100 UNIT/ML	Tier 1				
LYUMJEV KWPN INJ 100UT/ML	INSULIN LISPRO-AABC SOLN PEN-INJ 100 UNIT/ML (1 UNIT DIAL)	Tier 2				
LYUMJEV KWPN INJ 200UT/ML	INSULIN LISPRO-AABC SOLN PEN-INJECTOR 200 UNIT/ML	Tier 2				
MYXREDLIN SOL 1UNIT/ML	INSULIN REGULAR (HUMAN) IN NACL 0.9% IV SOLN 100 UNIT/100ML	Tier 3				
NOVOLIN R INJ 100 UNIT	INSULIN REGULAR (HUMAN) SOLN PEN-INJECTOR 100 UNIT/ML	Tier 2			X	
POLY HUB MIS 18GX1.5"	NEEDLE (DISP) 18 X 1-1/2"	Tier 2				
POLY HUB MIS 18GX1"	NEEDLE (DISP) 18 X 1"	Tier 2				
SAFTY NEEDLE MIS 18GX1.5"	NEEDLE (DISP) 18 X 1-1/2"	Tier 2				
SAFTY NEEDLE MIS 18GX1"	NEEDLE (DISP) 18 X 1"	Tier 2				
SOLIQUA INJ 100/33	INSULIN GLARGINE-LIXISENATIDE SOL PEN-INJ 100-33 UNIT-MCG/ML	Tier 2		X		
TOUJEO MAX INJ 300/ML	INSULIN GLARGINE SOLN PEN-INJECTOR 300 UNIT/ML (2 UNIT DIAL)	Tier 2				
TOUJEO SOLO INJ 300/ML	INSULIN GLARGINE SOLN PEN-INJECTOR 300 UNIT/ML (1 UNIT DIAL)	Tier 2				
VENT NEEDLE MIS 18GX1"	NEEDLE (DISP) 18 X 1"	Tier 2				
Irritable Bowel Syndrome Agents - Bowel Treatment Drugs						
ALOSETRON TAB 0.5MG	ALOSETRON HCL TAB 0.5 MG (BASE EQUIV)	Tier 1	X	X		
ALOSETRON TAB 1MG	ALOSETRON HCL TAB 1 MG (BASE EQUIV)	Tier 1	X	X		
AMITIZA CAP 24MCG	LUBIPROSTONE CAP 24 MCG	Tier 3/4	X	X		
AMITIZA CAP 8MCG	LUBIPROSTONE CAP 8 MCG	Tier 3/4	X	X		
LINZESS CAP 145MCG	LINACLOTIDE CAP 145 MCG	Tier 2	X	X		
LINZESS CAP 290MCG	LINACLOTIDE CAP 290 MCG	Tier 2	X	X		
LINZESS CAP 72MCG	LINACLOTIDE CAP 72 MCG	Tier 2	X	X		
LUBIPROSTONE CAP 24MCG	LUBIPROSTONE CAP 24 MCG	Tier 1	X	X		
LUBIPROSTONE CAP 8MCG	LUBIPROSTONE CAP 8 MCG	Tier 1	X	X		
VIBERZI TAB 100MG	ELUXADOLINE TAB 100 MG	Tier 3	X	X		
VIBERZI TAB 75MG	ELUXADOLINE TAB 75 MG	Tier 3	X	X		
XIFAXAN TAB 200MG	RIFAXIMIN TAB 200 MG	Tier 3	X			

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
XIFAXAN TAB 550MG	RIFAXIMIN TAB 550 MG	Tier 3	X	X		
Laxatives - Bowel Treatment Drugs						
CLEARLAX POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	HCR				
CVS PURELAX POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	HCR				
DAILY FIBER POW 43%	PSYLLIUM POWDER 43%	Tier 1				
EQ CLEARLAX POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	HCR				
EQL CLEARLAX POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	HCR				
FT CLEARLAX POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	HCR				
GAVILAX POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	HCR				
GENTLELAX POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	HCR				
GLYCOLAX POW 3350 NF	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	HCR				
GNP CLEARLAX POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	HCR				
HM CLEARLAX POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	HCR				
LAXACLEAR POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	HCR				
LAXATIVE POW OSMOTIC	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	HCR				
MINERAL OIL HEAVY	MINERAL OIL	Tier 1				
MM CLEARLAX POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	HCR				
NATURA-LAX POW 3350 NF	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	HCR				
PEG 3350 POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	HCR				
POLYETH GLYC POW 3350	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	HCR				
POLYETH GLYC POW 3350 NF	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	HCR				
RA LAXATIVE POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	HCR				
SM CLEARLAX POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	HCR				
SMOOTH LAX POW	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	HCR				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
SMOOTH LAX POW 3350	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	HCR				
SUTAB TAB	SOD SULFATE-MG SULFATE-POT CHLORIDE TAB 1479-225-188 MG	Tier 2				
TRUE LAXATIV POW 3350	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP	HCR				
WAL-MUCIL POW 43%	PSYLLIUM POWDER 43%	Tier 1				
Laxatives - Drugs to treat Constipation						
BASE A PEG POW 1450	POLYETHYLENE GLYCOL 1450 POWDER	Tier 3				
BISACODYL TAB 5MG DR	BISACODYL TAB DELAYED RELEASE 5 MG	HCR				
BISACODYL TAB 5MG EC	BISACODYL TAB DELAYED RELEASE 5 MG	HCR				
CITROMA SOL LEMONY	MAGNESIUM CITRATE SOLN	HCR				
CLENPIQ SOL	SOD PICOSULFATE-MG OX-CITRIC AC SOL 10 MG-3.5 GM-12 GM/175ML	Tier 2				
CONSTULOSE SOL 10GM/15	LACTULOSE SOLUTION 10 GM/15ML	Tier 1				
CVS C-LAX TAB 5MG	BISACODYL TAB DELAYED RELEASE 5 MG	HCR				
ENULOSE SOL 10GM/15	LACTULOSE (ENCEPHALOPATHY) SOLUTION 10 GM/15ML	Tier 1				
EQ LAXATIVE CHW 15MG	SENNOSIDES CHEW TAB 15 MG	Tier 1				
EQL GENTLE TAB LAXATIVE	BISACODYL TAB DELAYED RELEASE 5 MG	HCR				
FT LAXATIVE TAB 5MG EC	BISACODYL TAB DELAYED RELEASE 5 MG	HCR				
FT MAG CITRA SOL CHERRY	MAGNESIUM CITRATE SOLN	HCR				
FT MAG CITRA SOL LEMON	MAGNESIUM CITRATE SOLN	HCR				
GAVILYTE-C SOL	PEG 3350-KCL-NA BICARB-NACL-NA SULFATE FOR SOLN 240 GM	HCR				
GAVILYTE-G SOL	PEG 3350-KCL-NA BICARB-NACL-NA SULFATE FOR SOLN 236 GM	HCR				
GAVILYTE-N SOL FLAV PK	PEG 3350-KCL-SOD BICARB-NACL FOR SOLN 420 GM	HCR				
GENERLAC SOL 10/15ML	LACTULOSE (ENCEPHALOPATHY) SOLUTION 10 GM/15ML	Tier 1				
GENERLAC SOL 10GM/15	LACTULOSE (ENCEPHALOPATHY) SOLUTION 10 GM/15ML	Tier 1				
GENTLE LAXAT TAB 5MG EC	BISACODYL TAB DELAYED RELEASE 5 MG	HCR				
GNP GNTL LAX TAB 5MG EC	BISACODYL TAB DELAYED RELEASE 5 MG	HCR				
GNP LAXATIVE TAB 5MG EC	BISACODYL TAB DELAYED RELEASE 5 MG	HCR				
GNP MAG CITR SOL CHERRY	MAGNESIUM CITRATE SOLN	HCR				
GOLYTELY SOL	PEG 3350-KCL-NA BICARB-NACL-NA SULFATE FOR SOLN 236 GM	HCR				
KP BISACODYL TAB 5MG EC	BISACODYL TAB DELAYED RELEASE 5 MG	HCR				
KRISTALOSE PAK 10GM	LACTULOSE ORAL CRYSTAL PACKET 10 GM	Tier 3				
KRISTALOSE PAK 20GM	LACTULOSE ORAL CRYSTAL PACKET 20 GM	Tier 3				

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LACTULOSE PAK 20GM	LACTULOSE ORAL CRYSTAL PACKET 20 GM	Tier 1				
LACTULOSE SOL 10/15ML	LACTULOSE SOLUTION 10 GM/15ML	Tier 1				
LACTULOSE SOL 10GM/15	LACTULOSE SOLUTION 10 GM/15ML	Tier 1				
LACTULOSE SOL 10GM/15	LACTULOSE (ENCEPHALOPATHY) SOLUTION 10 GM/15ML	Tier 1				
LACTULOSE SOL 20/30ML	LACTULOSE SOLUTION 10 GM/15ML	Tier 1				
LAXATIVE TAB 5MG EC	BISACODYL TAB DELAYED RELEASE 5 MG	HCR				
MAG CITRATE SOL CHERRY	MAGNESIUM CITRATE SOLN	HCR				
MAG CITRATE SOL GRAPE	MAGNESIUM CITRATE SOLN	HCR				
MAG CITRATE SOL LEMON	MAGNESIUM CITRATE SOLN	HCR				
MOVIPREP SOL	PEG 3350-KCL-NA-CL-NACL-NA SULFATE-NA ASCORBATE-C FOR SOLN 100 GM	Tier 3/4				
PEG 3350 POW	POLYETHYLENE GLYCOL 3350 POWDER	Tier 3				
PEG-3350 SOL ELECTROL	PEG 3350-KCL-NA BICARB-NA-CL-NACL-NA SULFATE FOR SOLN 236 GM	HCR				
PEG-3350/KCL SOL /SODIUM	PEG 3350-KCL-SOD BICARB-NA-CL FOR SOLN 420 GM	HCR				
PEG-PREP KIT	BISACODYL TAB & PEG 3350-KCL-SOD BICARB-NA-CL FOR SOLN KIT	Tier 3/4				
PEG/NASUL/C/ SOL NACL/POT	PEG 3350-KCL-NA-CL-NACL-NA SULFATE-NA ASCORBATE-C FOR SOLN 100 GM	Tier 1				
PLENVU SOL	PEG 3350-KCL-NA-CL-NACL-NA SULFATE-NA ASCORBATE-C FOR SOLN 140 GM	Tier 2				
POLY GLYCOL LIQ 1450	POLYETHYLENE GLYCOL 1450 LIQUID	Tier 3				
POLYETH GLYC POW 1450	POLYETHYLENE GLYCOL 1450 POWDER	Tier 3				
QC LAXATIVE TAB 5MG EC	BISACODYL TAB DELAYED RELEASE 5 MG	HCR				
RA LAXATIVE TAB 5MG EC	BISACODYL TAB DELAYED RELEASE 5 MG	HCR				
SODIUM/POTAS SOL MAGNESIU	SOD SULFATE-POT SULF-MG SULF ORAL SOL 175-3.13-1.6 GM/177ML	Tier 1				
SUPREP BOWEL SOL PREP KIT	SOD SULFATE-POT SULF-MG SULF ORAL SOL 175-3.13-1.6 GM/177ML	Tier 3				
WOMANS LAXAT TAB 5MG EC	BISACODYL TAB DELAYED RELEASE 5 MG	HCR				
WOMENS LAXAT TAB 5MG EC	BISACODYL TAB DELAYED RELEASE 5 MG	HCR				
Local Anesthetics						
GLYDO GEL 2%	LIDOCAINE HCL URETHRAL/MUCOSAL GEL PREFILLED SYRINGE 2%	Tier 1				
LIDO/PRILOCN CRE 2.5-2.5%	LIDOCAINE-PRILOCAINE CREAM 2.5-2.5%	Tier 1				
LIDOCAINE DIS 5% PATCH	LIDOCAINE PATCH 5%	Tier 1	X	X		
LIDOCAINE GEL 2%	LIDOCAINE HCL URETHRAL/MUCOSAL GEL PREFILLED SYRINGE 2%	Tier 1				
LIDOCAINE GEL 2% JELLY	LIDOCAINE HCL URETHRAL/MUCOSAL GEL 2%	Tier 1				

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LIDOCAINE GEL 2% JELLY	LIDOCAINE HCL URETHRAL/MUCOSAL GEL PREFILLED SYRINGE 2%	Tier 1				
LIDOCAINE OIN 5%	LIDOCAINE OINT 5%	Tier 1		X		
LIDOCAINE SOL 2% ORAL	LIDOCAINE HCL VISCOUS SOLN 2%	Tier 1				
LIDOCAINE SOL 2% VISC	LIDOCAINE HCL VISCOUS SOLN 2%	Tier 1				
LIDOCAINE SOL 4%	LIDOCAINE HCL SOLN 4%	Tier 1				
LIDOCAINE SOL 4%	LIDOCAINE HCL LARYNGOTRACHEAL SOLN 4%	Tier 1				
ZTLIDO PAD 1.8%	LIDOCAINE PATCH 1.8% (36 MG)	Tier 3	X	X		
Macrolides - Antibiotics						
AZITHROMYCIN POW 1GM PAK	AZITHROMYCIN POWD PACK FOR SUSP 1 GM	Tier 1				
AZITHROMYCIN SUS 100/5ML	AZITHROMYCIN FOR SUSP 100 MG/5ML	Tier 1				
AZITHROMYCIN SUS 200/5ML	AZITHROMYCIN FOR SUSP 200 MG/5ML	Tier 1				
AZITHROMYCIN TAB 250MG	AZITHROMYCIN TAB 250 MG	Tier 1				
AZITHROMYCIN TAB 500MG	AZITHROMYCIN TAB 500 MG	Tier 1				
AZITHROMYCIN TAB 600MG	AZITHROMYCIN TAB 600 MG	Tier 1				
CLARITHROMYC SUS 125/5ML	CLARITHROMYCIN FOR SUSP 125 MG/5ML	Tier 1				
CLARITHROMYC SUS 250/5ML	CLARITHROMYCIN FOR SUSP 250 MG/5ML	Tier 1				
CLARITHROMYC TAB 250MG	CLARITHROMYCIN TAB 250 MG	Tier 1				
CLARITHROMYC TAB 500MG	CLARITHROMYCIN TAB 500 MG	Tier 1				
CLARITHROMYC TAB 500MG ER	CLARITHROMYCIN TAB ER 24HR 500 MG	Tier 1				
DIFICID SUS	FIDAXOMICIN FOR SUSP 40 MG/ML	Tier 3		X		
E.E.S. GRAN SUS 200/5ML	ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 200 MG/5ML	Tier 3				
ERY-TAB TAB 250MG EC	ERYTHROMYCIN TAB DELAYED RELEASE 250 MG	Tier 3/4				
ERY-TAB TAB 333MG EC	ERYTHROMYCIN TAB DELAYED RELEASE 333 MG	Tier 3/4				
ERY-TAB TAB 500MG EC	ERYTHROMYCIN TAB DELAYED RELEASE 500 MG	Tier 3/4				
ERYPED SUS 200/5ML	ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 200 MG/5ML	Tier 3				
ERYPED SUS 400/5ML	ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 400 MG/5ML	Tier 3/4				
ERYTHROCIN TAB 250MG	ERYTHROMYCIN STEARATE TAB 250 MG	Tier 2				
ERYTHROM ETH SUS 200/5ML	ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 200 MG/5ML	Tier 1				
ERYTHROM ETH SUS 400/5ML	ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 400 MG/5ML	Tier 1				
ERYTHROM ETH TAB 400MG	ERYTHROMYCIN ETHYLSUCCINATE TAB 400 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ERYTHROMYCIN CAP 250MG DR	ERYTHROMYCIN W/ DELAYED RELEASE PARTICLES CAP 250 MG	Tier 1				
ERYTHROMYCIN TAB 250MG BS	ERYTHROMYCIN TAB 250 MG	Tier 1				
ERYTHROMYCIN TAB 250MG EC	ERYTHROMYCIN TAB DELAYED RELEASE 250 MG	Tier 1				
ERYTHROMYCIN TAB 333MG EC	ERYTHROMYCIN TAB DELAYED RELEASE 333 MG	Tier 1				
ERYTHROMYCIN TAB 500MG BS	ERYTHROMYCIN TAB 500 MG	Tier 1				
ERYTHROMYCIN TAB 500MG EC	ERYTHROMYCIN TAB DELAYED RELEASE 500 MG	Tier 1				
FIDAXOMICIN TAB 200MG	FIDAXOMICIN TAB 200 MG	Tier 1		X		
ZITHROMAX POW 1GM PAK	AZITHROMYCIN POWD PACK FOR SUSP 1 GM	Tier 3/4				
ZITHROMAX SUS 200/5ML	AZITHROMYCIN FOR SUSP 200 MG/5ML	Tier 3/4				
ZITHROMAX TAB 250MG	AZITHROMYCIN TAB 250 MG	Tier 3/4				
ZITHROMAX TAB 500MG	AZITHROMYCIN TAB 500 MG	Tier 3/4				
ZITHROMAX TAB TRI-PAK	AZITHROMYCIN TAB 500 MG	Tier 3/4				
ZITHROMAX TAB Z-PAK	AZITHROMYCIN TAB 250 MG	Tier 3/4				
Mast Cell Stabilizers - Drugs for the Lungs						
CROMOLYN SOD NEB 20MG/2ML	CROMOLYN SODIUM SOLN NEBU 20 MG/2ML	Tier 1				
Metabolic Bone Disease Agents - Osteoporosis (Bone Loss) Drugs						
ALENDRONATE SOL 70/75ML	ALENDRONATE SODIUM ORAL SOLN 70 MG/75ML	Tier 1				
ALENDRONATE TAB 10MG	ALENDRONATE SODIUM TAB 10 MG	Tier 1				
ALENDRONATE TAB 35MG	ALENDRONATE SODIUM TAB 35 MG	Tier 1				
ALENDRONATE TAB 70MG	ALENDRONATE SODIUM TAB 70 MG	Tier 1				
BINOSTO TAB 70MG	ALENDRONATE SODIUM EFFERVESCENT TAB 70 MG	Tier 3/4				
BONSITY INJ 560/2.24	TERIPARATIDE SOLN PEN-INJ 560 MCG/2.24ML	Tier 3	X			
CALCITONIN INJ 200/ML	CALCITONIN (SALMON) INJ 200 UNIT/ML	Tier 1				
CALCITONIN INJ 400/2ML	CALCITONIN (SALMON) INJ 200 UNIT/ML	Tier 1				
CALCITONIN SPR 200/ACT	CALCITONIN (SALMON) NASAL SOLN 200 UNIT/ACT	Tier 1				
CINACALCET TAB 30MG	CINACALCET HCL TAB 30 MG (BASE EQUIV)	Tier 1				
CINACALCET TAB 60MG	CINACALCET HCL TAB 60 MG (BASE EQUIV)	Tier 1				
CINACALCET TAB 90MG	CINACALCET HCL TAB 90 MG (BASE EQUIV)	Tier 1				
FOSAMAX TAB 70MG	ALENDRONATE SODIUM TAB 70 MG	Tier 3/4				
FOSAMAX + D TAB 70-2800	ALENDRONATE SODIUM-CHOLECALCIFEROL TAB 70-2800 MG-UNIT	Tier 3				
FOSAMAX + D TAB 70-5600	ALENDRONATE SODIUM-CHOLECALCIFEROL TAB 70-5600 MG-UNIT	Tier 3				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
IBANDRONATE TAB 150MG	IBANDRONATE SODIUM TAB 150 MG (BASE EQUIVALENT)	Tier 1				
MIACALCIN INJ 200/ML	CALCITONIN (SALMON) INJ 200 UNIT/ML	Tier 3				
MIACALCIN INJ 400/2ML	CALCITONIN (SALMON) INJ 200 UNIT/ML	Tier 3				
RISEDRON SOD TAB 35MG DR	RISEDRONATE SODIUM TAB DELAYED RELEASE 35 MG	Tier 1				
RISEDRONATE TAB 150MG	RISEDRONATE SODIUM TAB 150 MG	Tier 1				
RISEDRONATE TAB 30MG	RISEDRONATE SODIUM TAB 30 MG	Tier 1				
RISEDRONATE TAB 35MG	RISEDRONATE SODIUM TAB 35 MG	Tier 1				
RISEDRONATE TAB 5MG	RISEDRONATE SODIUM TAB 5 MG	Tier 1				
TERIPARATIDE INJ 560/2.24	TERIPARATIDE SOLN PEN-INJ 560 MCG/2.24ML	Tier 3	X			
TYMLOS INJ	ABALOPARATIDE SUBCUTANEOUS SOLN PEN-INJECTOR 3120 MCG/1.56ML	Tier 3	X			
Metabolic Bone Disease Agents - Other						
CALCITRIOL CAP 0.25MCG	CALCITRIOL CAP 0.25 MCG	Tier 1				
CALCITRIOL CAP 0.5MCG	CALCITRIOL CAP 0.5 MCG	Tier 1				
CALCITRIOL SOL 1MCG/ML	CALCITRIOL ORAL SOLN 1 MCG/ML	Tier 1				
DOXERCALCIF CAP 0.5MCG	DOXERCALCIFEROL CAP 0.5 MCG	Tier 1				
DOXERCALCIF CAP 1MCG	DOXERCALCIFEROL CAP 1 MCG	Tier 1				
DOXERCALCIF CAP 2.5MCG	DOXERCALCIFEROL CAP 2.5 MCG	Tier 1				
PARICALCITOL CAP 1 MCG	PARICALCITOL CAP 1 MCG	Tier 1				
PARICALCITOL CAP 2 MCG	PARICALCITOL CAP 2 MCG	Tier 1				
PARICALCITOL CAP 4 MCG	PARICALCITOL CAP 4 MCG	Tier 1				
ROCALTROL CAP 0.25MCG	CALCITRIOL CAP 0.25 MCG	Tier 3/4				
ROCALTROL CAP 0.5MCG	CALCITRIOL CAP 0.5 MCG	Tier 3/4				
ROCALTROL SOL 1MCG/ML	CALCITRIOL ORAL SOLN 1 MCG/ML	Tier 3/4				
ZEMPLAR CAP 1MCG	PARICALCITOL CAP 1 MCG	Tier 3/4				
ZEMPLAR CAP 2MCG	PARICALCITOL CAP 2 MCG	Tier 3/4				
Mineralocorticoid Receptor Antagonists						
KERENDIA TAB 10MG	FINERENONE TAB 10 MG	Tier 3/4	X	X		
KERENDIA TAB 20MG	FINERENONE TAB 20 MG	Tier 3/4	X	X		
KERENDIA TAB 40MG	FINERENONE TAB 40 MG	Tier 3/4	X	X		
Miscellaneous Therapeutic Agents						
1ML SYRINGE MIS 29G	INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 5/16"	Tier 2		X		
2-DEOXY-D POW -GLUCOSE	2-DEOXY-D-GLUCOSE POWDER	Tier 3				
ADAPTADERM GEL	*GEL BASE - GEL**	Tier 3				
AERCHMBR PLS MIS INTERMED	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 2				

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

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
AUM SAFETY MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
AUTOSHIELD MIS 30GX5MM	INSULIN PEN NEEDLE 30 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
AVERI TAB	DESOGESTREL-ETHINYL ESTRADIOL-FE TAB 0.15-0.03 MG	Tier 3/4				
AXONA POW	*DIETARY MANAGEMENT PRODUCT - PACKET***	Tier 2				
BACOCALMINE LIQ	*PHARMACEUTICAL EXCIPIENTS (BULK) LIQUID**	Tier 3				
BASE CRE LIPOSOME	*CREAM BASE LIPOSOMIC**	Tier 3				
BD ECLIPSE MIS 23GX1"	NEEDLE (DISP) 23 X 1"	Tier 2				
BD ECLIPSE MIS 25GX5/8"	NEEDLE (DISP) 25 X 5/8"	Tier 2				
BD NEEDLE MIS 30G X 1"	NEEDLE (DISP) 30 X 1"	Tier 3				
BD NEEDLE MIS 30GX1/2"	NEEDLE (DISP) 30 X 1/2"	Tier 2				
BD NEEDLES MIS 27GX1/2"	NEEDLE (DISP) 27 X 1/2"	Tier 2				
BD PEN NEEDL MIS 29GX12.7	INSULIN PEN NEEDLE 29 G X 12.7 MM (1/2")	Tier 2		X		
BD PEN NEEDL MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
BD PEN NEEDL MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
BD SAFETY MIS 23GX1.5"	NEEDLE (DISP) 23 X 1-1/2"	Tier 2				
BD SHARPS MIS 1.4QT	*SHARPS CONTAINER - MISC***	Tier 3				
BD SHARPS MIS 3.3QT	*SHARPS CONTAINER - MISC***	Tier 3				
BD SHARPS MIS 5.1L	*SHARPS CONTAINER - MISC***	Tier 3				
BENEPROTEIN POW UNFLAVOR	*PROTEIN ORAL POWDER***	Tier 3				
BIGFOOT UNIT KIT PROGRAM	*BLOOD GLUCOSE MONITOR KIT W/ MONITOR DEVICE & DIGITAL APP**	Tier 3				
BISMUTH SUBC POW	BISMUTH SUBCARBONATE POWDER	Tier 3				
BISOPROL FUM POW	BISOPROLOL FUMARATE (BULK) POWDER	Tier 3				
BLUJEPa TAB 750MG	GEPOTIDACIN MESYLATE TAB 750 MG	Tier 3/4				
BOOST SOOTHE LIQ PCH/MINT	*PROTEIN ORAL LIQUID***	Tier 3	X			
BOOST SOOTHE LIQ PCH/MINT	*PROTEIN ORAL LIQUID***	Tier 3				
BOOST SOOTHE LIQ STR/KIWI	*PROTEIN ORAL LIQUID***	Tier 3				
BOOST SOOTHE LIQ STR/KIWI	*PROTEIN ORAL LIQUID***	Tier 3	X			
BREXAFEMME TAB 150MG	IBREXAFUNGERP CITRATE TAB 150 MG	Tier 3/4	X			
BRINSUPRI TAB 10MG	BRENSOCATIB TAB 10 MG	Tier 3/4	X	X		
BRINSUPRI TAB 25MG	BRENSOCATIB TAB 25 MG	Tier 3/4	X	X		
BUPIVACAINE POW HCL	BUPIVACAINE HCL POWDER	Tier 3				
CALCIUM POW FOLINATE	LEUCOVORIN CALCIUM POWDER	Tier 3				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
CAM PRO COMP BAR GLYTACTI	*NUTRITIONAL SUPPLEMENT BAR**	Tier 3				
CAM PRO COMP BAR GLYTACTI	*NUTRITIONAL SUPPLEMENT BAR**	Tier 2				
CARBOGEL GEL 940	*CARBOMER GEL BASE**	Tier 3				
CARBOHOL GEL 940	*CARBOMER GEL BASE**	Tier 2				
CARBOMER GEL AQUEOUS	*CARBOMER GEL BASE**	Tier 3				
CARBOMER GEL HYDROALC	*CARBOMER GEL BASE**	Tier 3				
CAREFINE MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
CAREPOINT SA MIS 23GX1"	NEEDLE (DISP) 23 X 1"	Tier 2				
CAREPOINT SA MIS 23GX11/2	NEEDLE (DISP) 23 X 1-1/2"	Tier 2				
CAREPOINT SA MIS 25GX1"	NEEDLE (DISP) 25 X 1"	Tier 2				
CAREPOINT SA MIS 25GX11/2	NEEDLE (DISP) 25 X 1-1/2"	Tier 2				
CAREPOINT SA MIS 25GX5/8"	NEEDLE (DISP) 25 X 5/8"	Tier 2				
CARETOUCH MIS 27GX1.5"	NEEDLE (DISP) 27 X 1-1/2"	Tier 2				
CARETOUCH MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
CARETOUCH MIS 31GX6MM	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
CARETOUCH MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
CAYA DPR	*DIAPHRAGM ARC-SPRING***	HCR				
CEQUR SIMPL KIT PATCH 2U	INJECTION DEVICE FOR INSULIN	Tier 3			X	
CHEMSIL K-51 GEL	*GEL BASE - GEL**	Tier 3				
CHEMSTRIP BG MIS LOG	*BLOOD GLUCOSE MONITORING MISC.***	Tier 1				
CHERRY SYP	CHERRY SYRUP	Tier 3				
CHOLESTYRAMI POW	CHOLESTYRAMINE (BULK) POWDER	Tier 3				
CHOLESTYRAMI POW RESIN	CHOLESTYRAMINE (BULK) POWDER	Tier 3				
CISPLATIN POW	CISPLATIN (BULK) POWDER	Tier 3				
CITRULLINE POW (L)	CITRULLINE (BULK) POWDER	Tier 3				
CITRULLINE POW 1000	CITRULLINE ORAL PACKET 1 GM	Tier 2	X			
CLOPIDOGREL POW BISULFAT	CLOPIDOGREL BISULFATE (BULK) POWDER	Tier 3				
CLOVAGEL GEL	*GEL BASE - GEL**	Tier 3				
CO Q 10 CAP 100MG	COENZYME Q10 CAP 100 MG	Tier 1				
CO Q-10 CAP 100MG	COENZYME Q10 CAP 100 MG	Tier 1				
CO Q-10 CAP 200MG	COENZYME Q10 CAP 200 MG	Tier 1	X			
CO Q-10 CAP 50MG	COENZYME Q10 CAP 50 MG	Tier 2	X			
COENZYME Q10 CAP 100MG	COENZYME Q10 CAP 100 MG	Tier 1	X			
COENZYME Q10 CAP 100MG	COENZYME Q10 CAP 100 MG	Tier 2				
COENZYME Q10 CAP 200MG	COENZYME Q10 CAP 200 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
COENZYME Q10 CAP 200MG	COENZYME Q10 CAP 200 MG	Tier 2				
COENZYME Q10 CAP 30MG	COENZYME Q10 CAP 30 MG	Tier 1				
COENZYME Q10 CAP 50MG	COENZYME Q10 CAP 50 MG	Tier 2				
COENZYME Q10 CAP 50MG	COENZYME Q10 CAP 50 MG	Tier 2	X			
COLLODION LIQ FLEXIBLE	COLLODION FLEXIBLE	Tier 3				
COMFORT EZ MIS 31GX4MM	INSULIN PEN NEEDLE 31 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
COMFORT EZ MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
COMFORT TOUC MIS 31GX4MM	INSULIN PEN NEEDLE 31 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
COMFORT TOUC MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
COMFORT TOUC MIS 31GX6MM	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
COMFORT TOUC MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
COMFORT TOUC MIS 32GX8MM	INSULIN PEN NEEDLE 32 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
COMFORT TOUC MIS 33GX1/4"	INSULIN PEN NEEDLE 33 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
COMFORT TOUC MIS 33GX3/16	INSULIN PEN NEEDLE 33 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
COMFORT TOUC MIS 33GX5/32	INSULIN PEN NEEDLE 33 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
COMPLEAT ORG LIQ PLNT BAS	*NUTRITIONAL SUPPLEMENT LIQUID (ENTERAL)**	Tier 3	X			
COMPLEAT PED LIQ PLNT BAS	*NUTRITIONAL SUPPLEMENT LIQUID (ENTERAL)**	Tier 3	X			
CONDOMS MIS	*CONDOMS - MALE***	HCR		X		
CONTOUR HIGH LIQ CONTROL	*BLOOD GLUCOSE CALIBRATION - LIQUID - HIGH***	Tier 3				
CONTOUR LOW LIQ CONTROL	*BLOOD GLUCOSE CALIBRATION - LIQUID - LOW***	Tier 2				
CONTOUR NEXT SOL LEVEL 1	*BLOOD GLUCOSE CALIBRATION - LIQUID - LOW***	Tier 2				
CONTOUR NEXT SOL LEVEL 2	*BLOOD GLUCOSE CALIBRATION - LIQUID - NORMAL***	Tier 2				
CONTOUR NORM LIQ CONTROL	*BLOOD GLUCOSE CALIBRATION - LIQUID - NORMAL***	Tier 2				
CONTROL MIS SOLUTION	*BLOOD GLUCOSE CALIBRATION - LIQUID - NORMAL***	Tier 2				
CONTROL HIGH SOL UNISTRIP	*BLOOD GLUCOSE CALIBRATION - LIQUID - HIGH***	Tier 3				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
CONTROL LOW SOL UNISTRIP	*BLOOD GLUCOSE CALIBRATION - LIQUID - LOW***	Tier 3				
COQ-10 CAP 100MG	COENZYME Q10 CAP 100 MG	Tier 1	X			
COQ10 CAP 100MG	COENZYME Q10 CAP 100 MG	Tier 1				
COQ10 CAP 200MG	COENZYME Q10 CAP 200 MG	Tier 1	X			
CORN OIL	CORN OIL (BULK)	Tier 3				
CORN SYP	CORN SYRUP	Tier 3				
CORTROSYN INJ 0.25MG	COSYNTROPIN FOR INJ 0.25 MG	Tier 3/4				
COSYNTROPIN INJ 0.25MG	COSYNTROPIN FOR INJ 0.25 MG	Tier 1				
CREAM BASE CRE NIOSOMES	*CREAM BASE NIOSOMES**	Tier 3				
CREAM-HEAVY CRE BASE	*CREAM BASE NIOSOMES**	Tier 3				
CRENESSITY CAP 100MG	CRINECERFONT CAP 100 MG	Tier 3/4	X	X		
CRENESSITY CAP 25MG	CRINECERFONT CAP 25 MG	Tier 3/4	X	X		
CRENESSITY CAP 50MG	CRINECERFONT CAP 50 MG	Tier 3/4	X	X		
CRENESSITY SOL 50MG/ML	CRINECERFONT ORAL SOLN 50 MG/ML	Tier 3/4	X	X		
CRYOSERV SOL	*DIMETHYL SULFOXIDE - SOLUTION***	Tier 3				
CVS ADVANTAG POW /IRON	*INFANT FOODS POWDER**	Tier 2				
CVS COQ-10 CAP 100MG	COENZYME Q10 CAP 100 MG	Tier 1				
CVS COQ-10 CAP 200MG	COENZYME Q10 CAP 200 MG	Tier 1	X			
CVS COQ-10 CAP 50MG	COENZYME Q10 CAP 50 MG	Tier 1				
CVS COQ-10 CAP 50MG	COENZYME Q10 CAP 50 MG	Tier 1	X			
CVS SENSITIV POW /IRON	*INFANT FOODS POWDER**	Tier 2				
CVS TENDER POW /IRON	*INFANT FOODS POWDER**	Tier 2				
CVS TODDLER POW INFANT	*INFANT FOODS POWDER**	Tier 2				
CYCLOPHOSPHA POW	CYCLOPHOSPHAMIDE (BULK) POWDER	Tier 3				
CYCLOSPORINE POW	CYCLOSPORINE (BULK) POWDER	Tier 3				
CYCLOSPORINE POW A	CYCLOSPORINE (BULK) POWDER	Tier 3				
CYSTINE PAK 500MG	CYSTINE PACKET 500 MG	Tier 2	X			
DERMASHIELD GEL HYDROGEL	*GEL BASE - GEL**	Tier 3				
DEXCOM G6 MIS TRANSMIT	*CONTINUOUS GLUCOSE SYSTEM TRANSMITTER***	Tier 3	X	X		
DIABECIN HR CRE	LIDOCAINE-BENZALKONIUM (PODIATRIC) CREAM 4.12-0.13%	Tier 3				
DIABETES KIT ADD-ON	*BLOOD GLUCOSE MONITOR KIT W/ MONITOR DEVICE & DIGITAL APP**	Tier 3				
DIABETES KIT SOLUTION	*BLOOD GLUCOSE MONITOR KIT W/ MONITOR DEVICE & DIGITAL APP**	Tier 3				
DIHYDROERGOT POW MESYLATE	DIHYDROERGOTAMINE MESYLATE POWDER	Tier 3				
DIMETHYL SOL SULFOXID	*DIMETHYL SULFOXIDE - SOLUTION***	Tier 3				

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DOXYCYCLINE POW HYCLATE	DOXYCYCLINE HYCLATE POWDER	Tier 3				
DR BROWNS POW GOOD ST	*INFANT FOODS POWDER**	Tier 2				
DROPLET MICR MIS 34GX9/64	INSULIN PEN NEEDLE 34 G X 3.5 MM (9/64")	Tier 2		X		
DROPSAFE MIS 31GX4MM	INSULIN PEN NEEDLE 31 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
DROPSAFE MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
DROPSAFE MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
DROPSAFE SIC MIS 25GX1"	NEEDLE (DISP) 25 X 1"	Tier 2				
DROPSAFE SIC MIS 25GX5/8"	NEEDLE (DISP) 25 X 5/8"	Tier 2				
DUREX MIS TROPICAL	CONDOMS LATEX LUBRICATED	HCR		X		
DUREX EXTRA MIS SENSITIV	CONDOMS LATEX LUBRICATED	HCR		X		
EASIVENT MIS	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 2				
EASIVENT MIS MASK LG	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 2				
EASIVENT MIS MASK SM	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 2				
EASIVENT MIS MASK MED	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 2				
EASY COMFORT MIS 0.3/31G	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16"	Tier 2		X		
EASY COMFORT MIS 0.3/31G	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 1/2"	Tier 2		X		
EASY COMFORT MIS 29GX4MM	INSULIN PEN NEEDLE 29 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
EASY COMFORT MIS 29GX5MM	INSULIN PEN NEEDLE 29 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
EASY COMFORT MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
EASY COMFORT MIS 31GX6MM	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
EASY COMFORT MIS SHARPS	*SHARPS CONTAINER - MISC***	Tier 3				
EASYMAX SOL NORMAL	*BLOOD GLUCOSE CALIBRATION - LIQUID - NORMAL***	Tier 3				
EC-RX DHEA CRE 10%	*PRASTERONE (DHEA) CREAM 10% (COMPOUND KIT)***	Tier 3				
EC-RX DHEA CRE 4%	*PRASTERONE (DHEA) CREAM 4% (COMPOUND KIT)***	Tier 3				
ECLIPSE NDL MIS 21GX1"	NEEDLE (DISP) 21 X 1"	Tier 2				
ECLIPSE NDLE MIS 21GX1.5"	NEEDLE (DISP) 21 X 1-1/2"	Tier 2				
ECLIPSE NDLE MIS 25GX1.5"	NEEDLE (DISP) 25 X 1-1/2"	Tier 2				

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

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ENFAMIL NEUR LIQ INFANT	*INFANT FOODS LIQUID**	Tier 3				
ENFAMIL NEUR POW ENFACARE	*INFANT FOODS POWDER**	Tier 2				
ENFAMIL NEUR POW GENTLEAS	*INFANT FOODS POWDER**	Tier 2				
ENFAMIL NEUR POW SENSITIV	*INFANT FOODS POWDER**	Tier 2				
ENFAMIL PREM CON LIPIL	*INFANT FOODS CONC**	Tier 2				
ENFAMIL PREM LIQ INFANT	*INFANT FOODS LIQUID**	Tier 2	X			
ENFAMIL PREM POW INFANT	*INFANT FOODS POWDER**	Tier 2				
ENFAMIL PREM POW NEWBORN	*INFANT FOODS POWDER**	Tier 2				
ENFAMIL SOY POW PROSOBEE	*INFANT FOODS POWDER**	Tier 2				
ENFAROW LIQ NEUROPRO	*INFANT FOODS LIQUID**	Tier 3	X			
ENFAROW NEXT LIQ VANILLA	*INFANT FOODS LIQUID**	Tier 3				
ENTERAGAM POW 5GM	SERUM-DERIVED BOVINE IMMUNOGLOB/ PROTEIN ISOLATE 5 GM PACKET	Tier 2				
ERGOLOID MES TAB 1MG ORAL	ERGOLOID MESYLATES TAB 1 MG	Tier 1				
ESSENTRA MIS 9X9"	*ALCOHOL SHEETS***	Tier 3				
ETHOSUXIMIDE POW	ETHOSUXIMIDE (BULK) POWDER	Tier 3				
ETHYLPARABEN POW	*BULK CHEMICALS - POWDER**	Tier 3				
ETOPOSIDE POW	ETOPOSIDE (BULK) POWDER	Tier 3				
FC2 FEMALE MIS CONDOM	*CONDOMS - FEMALE***	HCR		X		
FE PYROPHOSP POW	*BULK CHEMICALS - POWDER**	Tier 3				
FEMCAP MIS 22MM	CERVICAL CAP 22 MM	HCR				
FEMCAP MIS 26MM	CERVICAL CAP 26 MM	HCR				
FEMCAP MIS 30MM	CERVICAL CAP 30 MM	HCR				
FIRDAPSE TAB 10MG	AMIFAMPRIDINE PHOSPHATE TAB 10 MG (BASE EQUIVALENT)	Tier 2	X	X		
FISH OIL CAP 300MG	*OMEGA-3 FATTY ACIDS CAP 300 MG**	Tier 1				
FLAVOR BLEND SUS	*ORAL VEHICLES - SUSP***	Tier 3				
FLAVOR PLUS LIQ	*ORAL VEHICLES***	Tier 3				
FLAVOR SWEET SOL DYE FREE	*ORAL VEHICLES - SYRUP***	Tier 3				
FLAVOR SWEET SOL SF DYE	*ORAL VEHICLES - SYRUP***	Tier 3				
FLAVOR SWEET SYP	*ORAL VEHICLES - SYRUP***	Tier 3				
FLEXICHAMBER MIS	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 2				
FLEXICHAMBER MIS MASK LRG	*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS***	Tier 2				
FLEXICHAMBER MIS MASK SM	*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS***	Tier 2				
FLUOROURACIL POW	FLUOROURACIL (BULK) POWDER	Tier 3				
FOLIC ACID POW	FOLIC ACID POWDER	Tier 3				

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FOOD COLOR LIQ BLUE	DYE FDC BLUE 1 (BRILLIANT BLUE FCF) - LIQUID	Tier 3				
FORA TEST GO MIS ADV MOBL	*BLOOD GLUCOSE/KETONE MONITORING DEVICES***	Tier 3				
FORANE SOL	ISOFLURANE INHAL SOLN	Tier 2				
FORMALDEHYDE SOL 10%	FORMALDEHYDE SOLUTION 10%	Tier 1				
FORMALDEHYDE SOL 37%	FORMALDEHYDE SOLUTION 37%	Tier 1				
FREEDOM GEL CEPAPRO	*GEL BASE - GEL**	Tier 3				
FREEDOM GEL SILOMAC	*GEL BASE - GEL**	Tier 3				
FT CO Q-10 CAP 100MG	COENZYME Q10 CAP 100 MG	Tier 1				
FT CO Q-10 CAP 200MG	COENZYME Q10 CAP 200 MG	Tier 1				
G-PREPROTEIN LIQ	*AMINO ACIDS ORAL LIQUID***	Tier 2	X			
GERBER GOOD CON SOY/IRON	*INFANT FOODS CONC**	Tier 2	X			
GERBER GOOD CON W/IRON	*INFANT FOODS CONC**	Tier 2	X			
GERBER GOOD LIQ SOY/IRON	*INFANT FOODS LIQUID**	Tier 2	X			
GERBER GOOD LIQ W/IRON	*INFANT FOODS LIQUID**	Tier 2	X			
GERBER GOOD POW SOY/IRON	*INFANT FOODS POWDER**	Tier 2	X			
GERBER GOOD POW W/IRON	*INFANT FOODS POWDER**	Tier 2	X			
GLIPIZIDE POW	GLIPIZIDE POWDER	Tier 3				
GLUCOSE SUP LIQ 1.2	*NUTRITIONAL SUPPLEMENT LIQUID (ENTERAL)**	Tier 3	X			
GLUTARALDEHY SOL 25%	GLUTARAL SOLN 25%	Tier 1				
GLYBURIDE POW	GLYBURIDE POWDER	Tier 3				
GLYCERIN LIQ	GLYCERIN LIQUID	Tier 2				
GLYCERIN LIQ	GLYCERIN LIQUID	Tier 3				
GLYCEROL LIQ FORMAL	GLYCERIN LIQUID	Tier 3				
GLYTAC COMPL BAR 10PE	*NUTRITIONAL SUPPLEMENT BAR**	Tier 3				
GNP PEN NEED MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
GNP PEN NEED MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
GNP ULTICARE MIS 31GX5/16	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
GOOD START CON SOY/IRON	*INFANT FOODS CONC**	Tier 2	X			
GOOD START CON W/IRON	*INFANT FOODS CONC**	Tier 2	X			
GOOD START LIQ SOY/IRON	*INFANT FOODS LIQUID**	Tier 2	X			
GOOD START LIQ W/IRON	*INFANT FOODS LIQUID**	Tier 2	X			
GOOD START POW NATURAL	*INFANT FOODS POWDER**	Tier 2				
GOOD START POW SOY PLS2	*INFANT FOODS POWDER**	Tier 2	X			
GOOD START POW SOY/IRON	*INFANT FOODS POWDER**	Tier 2	X			

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GOOD START POW W/IRON	*INFANT FOODS POWDER**	Tier 2	X			
GOOD START 2 CON W/IRON	*INFANT FOODS CONC**	Tier 2				
GOOD START 2 LIQ W/IRON	*INFANT FOODS LIQUID**	Tier 2				
GOOD START 2 POW SOY/IRON	*INFANT FOODS POWDER**	Tier 2	X			
GUARDIAN MIS LINK 3	*CONTINUOUS GLUCOSE SYSTEM TRANSMITTER***	Tier 3	X	X		
GUARDIAN 4 MIS TRANSMIT	*CONTINUOUS GLUCOSE SYSTEM TRANSMITTER***	Tier 3	X	X		
GUARDIAN CON MIS TRANSMIT	*CONTINUOUS GLUCOSE SYSTEM TRANSMITTER***	Tier 3	X	X		
GUARDIAN RT MIS CHARGER	*CONTINUOUS GLUCOSE MONITOR SUPPLIES***	Tier 3				
GUARDIAN RT MIS TST PLUG	*CONTINUOUS GLUCOSE MONITOR SUPPLIES***	Tier 3				
HAN-EASE MIS	*INJECTION DEVICE - MISC***	Tier 3				
HEPARIN LOCK INJ 100/ML	HEPARIN SODIUM (PORCINE) LOCK FLUSH IV SOLN 100 UNIT/ML	Tier 1				
HEPARIN LOCK INJ 100/ML	HEPARIN SODIUM (PORCINE) LOCK FLUSH PF IV SOLN 100 UNIT/ML	Tier 1				
HEPARIN LOCK INJ 10UNT/ML	HEPARIN SODIUM (PORCINE) LOCK FLUSH IV SOLN 10 UNIT/ML	Tier 1				
HEPARIN LOCK INJ 10UNT/ML	HEPARIN SODIUM (PORCINE) LOCK FLUSH PF IV SOLN 10 UNIT/ML	Tier 1				
HERNEXEOS TAB 60MG	ZONGERTINIB TAB 60 MG	Tier 3/4	X	X		
HOLDING CHAM MIS ADULT	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 2				
HOLDING CHAM MIS CHILD	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 2				
HORMONE BASE CRE NIOSOMES	*HORMONE CREAM BASE NIOSOMES**	Tier 3				
HORMONE HEAV CRE NIOSOMES	*HORMONE CREAM BASE NIOSOMES**	Tier 3				
HYDROGEL GEL	*CARBOMER GEL BASE**	Tier 3				
HYDROXYUREA POW	HYDROXYUREA (BULK) POWDER	Tier 3				
HYPO NEEDLE MIS 20GX1"	NEEDLE (DISP) 20 X 1"	Tier 2				
HYPO NEEDLE MIS 22GX1"	NEEDLE (DISP) 22 X 1"	Tier 2				
HYPO NEEDLE MIS 23GX1.5"	NEEDLE (DISP) 23 X 1-1/2"	Tier 2				
HYPO NEEDLE MIS 23GX1"	NEEDLE (DISP) 23 X 1"	Tier 2				
HYPO NEEDLE MIS 25GX1.5"	NEEDLE (DISP) 25 X 1-1/2"	Tier 2				
HYPO NEEDLE MIS 25GX1"	NEEDLE (DISP) 25 X 1"	Tier 2				
HYPO NEEDLE MIS 25GX5/8"	NEEDLE (DISP) 25 X 5/8"	Tier 2				
IGG 2000 CWP CAP	*PROTEIN CAP***	Tier 3				

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IGG 2000 CWP POW	*PROTEIN ORAL POWDER***	Tier 3				
IGG PURE POW	*PROTEIN ORAL POWDER***	Tier 3				
IMPACT PEPT LIQ 1.5	*NUTRITIONAL SUPPLEMENT LIQUID (ENTERAL)**	Tier 3	X			
INBRIJA CAP 42MG	LEVODOPA INHAL POWDER CAP 42 MG	Tier 3	X	X		
INFANT FORM POW /IRON	*INFANT FOODS POWDER**	Tier 2				
INFINITY SOL HIGH CON	*BLOOD GLUCOSE CALIBRATION - LIQUID - HIGH***	Tier 2				
INFINITY SOL LOW CON	*BLOOD GLUCOSE CALIBRATION - LIQUID - LOW***	Tier 2				
INPEN 100EL MIS BLUE-HUM	INJECTION DEVICE FOR INSULIN	Tier 3			X	
INPEN 100EL MIS GREY-HUM	INJECTION DEVICE FOR INSULIN	Tier 3			X	
INPEN 100EL MIS PINK HUM	INJECTION DEVICE FOR INSULIN	Tier 3			X	
INPEN 100NN MIS BLUE NOV	INJECTION DEVICE FOR INSULIN	Tier 3			X	
INPEN 100NN MIS GREY NOV	INJECTION DEVICE FOR INSULIN	Tier 3			X	
INPEN 100NN MIS PINK NOV	INJECTION DEVICE FOR INSULIN	Tier 3			X	
INPEN BLUE MIS HUMALOG	INJECTION DEVICE FOR INSULIN	Tier 3			X	
INPEN BLUE MIS NOVO/FIA	INJECTION DEVICE FOR INSULIN	Tier 3			X	
INPEN GREY MIS HUMALOG	INJECTION DEVICE FOR INSULIN	Tier 3			X	
INPEN GREY MIS NOVO/FIA	INJECTION DEVICE FOR INSULIN	Tier 3			X	
INPEN PINK MIS HUMALOG	INJECTION DEVICE FOR INSULIN	Tier 3			X	
INPEN PINK MIS NOVO/FIA	INJECTION DEVICE FOR INSULIN	Tier 3			X	
INS SYR U500 MIS 0.5/31G	INSULIN SYRINGE/NEEDLE U-500 0.5 ML 31G X 6MM (15/64")	Tier 2		X		
INS SYR U500 MIS 31GX6MM	INSULIN SYRINGE/NEEDLE U-500 0.5 ML 31G X 6MM (15/64")	Tier 2		X		
INSPIREASE MIS DD SYST	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 2				
INSPIREASE MIS RES BAG	*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - BAGS***	Tier 2				
INSUL-TOTE MIS ULTIMATE	*BLOOD GLUCOSE MONITORING SUPPLIES***	Tier 3				
INSULIN SYRG MIS 0.3/29G	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 29 X 1/2"	Tier 2		X		
INSULIN SYRG MIS 0.3/30G	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 30 X 1/2"	Tier 2		X		
INSULIN SYRG MIS 0.3/30G	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 30 X 5/16"	Tier 2		X		
INSULIN SYRG MIS 0.3/31G	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 15/64"	Tier 2		X		
INSULIN SYRG MIS 0.3/31G	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16"	Tier 2		X		

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INSULIN SYRG MIS 0.3ML/31	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16"	Tier 2		X		
INSULIN SYRG MIS 0.5/28G	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 28 X 1/2"	Tier 2		X		
INSULIN SYRG MIS 0.5/29G	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 29 X 1/2"	Tier 2		X		
INSULIN SYRG MIS 0.5/29G	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 29 X 5/16"	Tier 2		X		
INSULIN SYRG MIS 0.5/30G	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 1/2"	Tier 2		X		
INSULIN SYRG MIS 0.5/30G	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 5/16"	Tier 2		X		
INSULIN SYRG MIS 0.5/31G	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 15/64"	Tier 2		X		
INSULIN SYRG MIS 0.5/31G	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16"	Tier 2		X		
INSULIN SYRG MIS 1/2ML/30	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 5/16"	Tier 2		X		
INSULIN SYRG MIS 1/2ML/31	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16"	Tier 2		X		
INSULIN SYRG MIS 1ML/27G	INSULIN SYRINGE/NEEDLE U-100 1 ML 27 X 5/8"	Tier 2		X		
INSULIN SYRG MIS 1ML/27G	INSULIN SYRINGE/NEEDLE U-100 1 ML 27 X 1/2"	Tier 2		X		
INSULIN SYRG MIS 1ML/28G	INSULIN SYRINGE/NEEDLE U-100 1 ML 28 X 1/2"	Tier 2		X		
INSULIN SYRG MIS 1ML/28G	INSULIN SYRINGE/NEEDLE U-100 1 ML 28 X 5/16"	Tier 2		X		
INSULIN SYRG MIS 1ML/29G	INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 1/2"	Tier 2		X		
INSULIN SYRG MIS 1ML/29G	INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 5/16"	Tier 2		X		
INSULIN SYRG MIS 1ML/30G	INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 1/2"	Tier 2		X		
INSULIN SYRG MIS 1ML/30G	INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 5/16"	Tier 2		X		
INSULIN SYRG MIS 1ML/31G	INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 15/64"	Tier 2		X		
INSULIN SYRG MIS 1ML/31G	INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 5/16"	Tier 2		X		
INSULIN SYRG MIS 1ML/32G	INSULIN SYRINGE/NEEDLE U-100 1 ML 32 X 5/16"	Tier 2		X		
INSULIN SYRG MIS 27GX1/2"	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 27 X 1/2"	Tier 2		X		
INSULIN SYRG MIS 27GX1/2"	INSULIN SYRINGE/NEEDLE U-100 1 ML 27 X 1/2"	Tier 2		X		

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INSULIN SYRG MIS 28GX1/2"	INSULIN SYRINGE/NEEDLE U-100 1 ML 28 X 1/2"	Tier 2		X		
INSULIN SYRG MIS 28GX1/2"	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 28 X 1/2"	Tier 2		X		
INSULIN SYRG MIS 28GX12MM	INSULIN SYRINGE/NEEDLE U-100 1 ML 28 X 1/2"	Tier 2		X		
INSULIN SYRG MIS 29GX1/2"	INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 1/2"	Tier 2		X		
INSULIN SYRG MIS 29GX1/2"	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 29 X 1/2"	Tier 2		X		
INSULIN SYRG MIS 29GX12MM	INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 1/2"	Tier 2		X		
INSULIN SYRG MIS 29GX12MM	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 29 X 1/2"	Tier 2		X		
INSULIN SYRG MIS 30GX1/2"	INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 1/2"	Tier 2		X		
INSULIN SYRG MIS 30GX1/2"	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 30 X 1/2"	Tier 2		X		
INSULIN SYRG MIS 30GX12MM	INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 1/2"	Tier 2		X		
INSULIN SYRG MIS 30GX5/16	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 5/16"	Tier 2		X		
INSULIN SYRG MIS 30GX5/16	INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 5/16"	Tier 2		X		
INSULIN SYRG MIS 30GX8MM	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 5/16"	Tier 2		X		
INSULIN SYRG MIS 30GX8MM	INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 5/16"	Tier 2		X		
INSULIN SYRG MIS 31GX5/16	INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 5/16"	Tier 2		X		
INSULIN SYRG MIS 31GX5/16	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16"	Tier 2		X		
INSULIN SYRG MIS 31GX5/16	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16"	Tier 2		X		
INSULIN SYRG MIS 31GX8MM	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16"	Tier 2		X		
INSULIN SYRG MIS 31GX8MM	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16"	Tier 2		X		
INSULIN SYRG MIS 31GX8MM	INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 5/16"	Tier 2		X		
INSUPEN MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
INSUPEN MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
IODINE SOL STRONG	IODINE SOLUTION STRONG 5% (LUGOL'S)	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
IODINE SOL STRONG	IODINE SOLUTION STRONG (LUGOL'S) (BULK)	Tier 3				
ISOFLURANE SOL	ISOFLURANE INHAL SOLN	Tier 1				
JASCAYD TAB 18MG	NERANDOMILAST TAB 18 MG	Tier 3/4	X			
JASCAYD TAB 9MG	NERANDOMILAST TAB 9 MG	Tier 3/4	X			
JOURNAVX TAB 50MG	SUZETRIGINE TAB 50 MG	Tier 3/4		X		
KATE FARMS LIQ 1.5	*NUTRITIONAL SUPPLEMENT LIQUID (ENTERAL)**	Tier 3				
KERALYT KIT SCALP 6%	SALICYLIC ACID SHAMPOO 6% & SALICYLIC ACID GEL 6% KIT	Tier 3/4				
KRISGEL 100 GEL	KRISGEL 100 GEL	Tier 3				
KT TAPE MIS CGM PTCH	*CONTINUOUS GLUCOSE MONITOR SUPPLIES***	Tier 3				
L-ARGININE CAP 500MG	ARGININE CAP 500 MG	Tier 2				
L-ASPARAGINE POW MONOHYDR	*BULK CHEMICALS - POWDER**	Tier 3				
L-CITRULLINE CAP 600MG	CITRULLINE CAP 600 MG	Tier 2	X			
L-CITRULLINE POW	CITRULLINE (BULK) POWDER	Tier 3				
L-LYSINE HCL TAB 500MG	LYSINE HCL TAB 500 MG	Tier 2	X			
LANOLIN ANHY OIN	LANOLIN ANHYDROUS OINTMENT	Tier 3				
LECITHIN GEL	PREMIUM LECITHIN ORGANOGEL BASE GEL	Tier 3				
LECITHIN GRA	LECITHIN GRANULES	Tier 1				
LEUCINE PAK 100MG	LEUCINE ORAL POWDER PACKET 100 MG	Tier 2				
LEUCOVORIN POW CALCIUM	LEUCOVORIN CALCIUM POWDER	Tier 3				
LIMBREL CAP 250MG	FLAVOCOXID CAP 250 MG	Tier 2				
LIMBREL CAP 500MG	FLAVOCOXID CAP 500 MG	Tier 2				
LIMBREL250 CAP 250-50MG	FLAVOCOXID-CITRATED ZINC BISGLYCINATE CAP 250-50 MG	Tier 2				
LIMBREL500 CAP 500-50MG	FLAVOCOXID-CITRATED ZINC BISGLYCINATE CAP 500-50 MG	Tier 2				
LIPODERM HMW GEL PCCA	*GEL BASE - GEL**	Tier 3				
LIPOLAYER CRE	*CREAM BASE LIPOSOMIC**	Tier 3				
LIPOZYME CRE	*CREAM BASE LIPOSOMIC**	Tier 3				
LIQ PROTEIN LIQ FORTIFIE	*INFANT FOODS LIQUID**	Tier 1				
LIQUACEL LIQ	*AMINO ACIDS ORAL LIQUID***	Tier 3				
LIQUACEL LIQ	*AMINO ACIDS ORAL LIQUID***	Tier 3	X			
LIQUACEL LIQ APPLE	*AMINO ACIDS ORAL LIQUID***	Tier 3				
LIQUACEL LIQ GING ALE	*AMINO ACIDS ORAL LIQUID***	Tier 3				
LIQUACEL LIQ PUMP+GO	*AMINO ACIDS ORAL LIQUID***	Tier 3				
LOVASTATIN POW	LOVASTATIN (BULK) POWDER	Tier 3				

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

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
MODEYSO CAP 125MG	DORDAIVPRONE HCL CAP 125 MG	Tier 3/4	X	X		
MUCOLOX LIQ	*PHARMACEUTICAL EXCIPIENTS (BULK) LIQUID**	Tier 3				
NEEDL COLLEC MIS DISPOSAL	*SHARPS CONTAINER - MISC***	Tier 3				
NEEDLE COLLE MIS DISPOSAL	*SHARPS CONTAINER - MISC***	Tier 3				
NITROFURANTN SUS 25MG/5ML	NITROFURANTOIN SUSP 25 MG/5ML	Tier 1				
NORDIPEN 5 MIS DEVICE	*INJECTION DEVICE - MISC***	Tier 3				
NORDIPEN DEL MIS SYSTEM	*INJECTION DEVICE - MISC***	Tier 3				
NOVAFILM GEL	*GEL BASE - GEL**	Tier 3				
NOVOPEN ECHO MIS	INJECTION DEVICE FOR INSULIN	Tier 3				
NZ WHEY PROT POW ISOLATE	*PROTEIN ORAL POWDER***	Tier 3				
OCCLUSADERM GEL PCCA	*GEL BASE - GEL**	Tier 3				
OMNIFLEX DPR	*DIAPHRAGMS***	HCR				
OMNIPOD 5 DX KIT INT G7G6	*INSULIN INFUSION DISPOSABLE PUMP KIT***	Tier 2	X	X		
OMNIPOD 5 DX MIS POD G7G6	*INSULIN INFUSION DISPOSABLE PUMP RESERVOIR***	Tier 2	X			
OMNIPOD 5 G7 KIT INTRO	*INSULIN INFUSION DISPOSABLE PUMP KIT***	Tier 2	X	X		
OMNIPOD 5 G7 MIS PODS	*INSULIN INFUSION DISPOSABLE PUMP RESERVOIR***	Tier 2	X			
OMNIPOD 5 L2 KIT INTRO G6	*INSULIN INFUSION DISPOSABLE PUMP KIT***	Tier 2	X			
OMNIPOD 5 L2 MIS PODS G6	*INSULIN INFUSION DISPOSABLE PUMP RESERVOIR***	Tier 2	X			
ONETOUCH LIQ VERIO 4	*BLOOD GLUCOSE CALIBRATION - LIQUID - HIGH***	Tier 1				
ORA-BLEND SUS	*ORAL VEHICLES - SUSP***	Tier 3				
ORA-BLEND SF SUS	*ORAL VEHICLES - SUSP***	Tier 3				
ORA-PLUS LIQ	*ORAL VEHICLES***	Tier 3				
ORA-SWEET SYP	*ORAL VEHICLES - SYRUP***	Tier 2				
ORA-SWEET SF SYP	*ORAL VEHICLES - SYRUP***	Tier 3				
ORAPENN SD LIQ SWEET	*ORAL VEHICLES***	Tier 3				
ORLYNVAH TAB 500-500	SULOPENEM ETZADROXIL-PROBENECID TAB 500-500 MG	Tier 3/4				
OSELTAMIVIR POW	OSELTAMIVIR PHOSPHATE (BULK) POWDER	Tier 3				
PALFORZIA CAP 1-3YRS	PEANUT POWDER-DNFP STARTER PACK 0.5 & 1 & 1.5 & 3 MG	Tier 3	X	X		
PALFORZIA CAP 4-17YRS	PEANUT POWDER-DNFP STARTER PACK 0.5 & 1 & 1.5 & 3 & 6 MG	Tier 3	X	X		
PALFORZIA CAP ESCALAT	PEANUT POWDER-DNFP STARTER PACK 0.5 & 1 & 1.5 & 3 & 6 MG	Tier 3	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PALFORZIA CAP LEVEL 0	PEANUT POWDER-DNFP CAP SPRINKLE PACK 1 X 1 MG (1 MG DOSE)	Tier 3	X			
PALFORZIA CAP LEVEL 1	PEANUT POWDER-DNFP CAP SPRINKLE PACK 3 X 1 MG (3 MG DOSE)	Tier 3	X	X		
PALFORZIA CAP LEVEL 10	PEANUT POWDER-DNFP PACK 2 X 20 MG & 2 X 100 MG (240 MG DOSE)	Tier 3	X	X		
PALFORZIA CAP LEVEL 2	PEANUT POWDER-DNFP CAP SPRINKLE PACK 6 X 1 MG (6 MG DOSE)	Tier 3	X	X		
PALFORZIA CAP LEVEL 3	PEANUT POWDER-DNFP PACK 2 X 1 MG & 10 MG (12 MG DOSE)	Tier 3	X	X		
PALFORZIA CAP LEVEL 4	PEANUT POWDER-DNFP CAP SPRINKLE PACK 20 MG (20 MG DOSE)	Tier 3	X	X		
PALFORZIA CAP LEVEL 5	PEANUT POWDER-DNFP CAP SPRINKLE PACK 2 X 20 MG (40 MG DOSE)	Tier 3	X	X		
PALFORZIA CAP LEVEL 6	PEANUT POWDER-DNFP CAP SPRINKLE PACK 4 X 20 MG (80 MG DOSE)	Tier 3	X	X		
PALFORZIA CAP LEVEL 7	PEANUT POWDER-DNFP PACK 20 MG & 100 MG (120 MG DOSE)	Tier 3	X	X		
PALFORZIA CAP LEVEL 8	PEANUT POWDER-DNFP PACK 3 X 20 MG & 100 MG (160 MG DOSE)	Tier 3	X	X		
PALFORZIA CAP LEVEL 9	PEANUT POWDER-DNFP PACK 2 X 100 MG (200 MG DOSE)	Tier 3	X	X		
PALFORZIA POW LEVEL 11	PEANUT ALLERGEN POWDER-DNFP TITRATION PACKET 300 MG	Tier 3	X	X		
PALFORZIA POW LEVEL 11	PEANUT ALLERGEN POWDER-DNFP MAINTENANCE PACKET 300 MG	Tier 3	X	X		
PARI VORTEX MIS ADL MASK	*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS***	Tier 2				
PCCA ACACIA SYP BASE	ACACIA SYRUP	Tier 3				
PCCA COBASE OIN #1	COBASE #1 OINTMENT BASE	Tier 3				
PCCA CUSTOM CRE LIPO-MAX	*CREAM BASE LIPOSOMIC**	Tier 3				
PCCA LIPOSOM CRE DRY	*CREAM BASE LIPOSOMIC**	Tier 3				
PCCA LIPOSOM CRE NORMAL	*CREAM BASE LIPOSOMIC**	Tier 3				
PCCA LIPOSOM CRE OILY	*CREAM BASE LIPOSOMIC**	Tier 3				
PCCA LIPOSOM CRE SENSITIV	*CREAM BASE LIPOSOMIC**	Tier 3				
PCCA SWEET SYP -SF	*ORAL VEHICLES - SYRUP***	Tier 3				
PCCA SYRUP SYP VEHICLE	*ORAL VEHICLES - SYRUP***	Tier 3				
PCCA-PLUS SUS	*ORAL VEHICLES - SUSP***	Tier 3				
PEG BASE OIN	POLYETHYLENE GLYCOL OINTMENT	Tier 3				
PEN NEEDLE MIS 29GX3/16	INSULIN PEN NEEDLE 29 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
PEN NEEDLE MIS 29GX5/16	INSULIN PEN NEEDLE 29 G X 8 MM (1/3" OR 5/16")	Tier 2		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PEN NEEDLE MIS 31GX4MM	INSULIN PEN NEEDLE 31 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
PEN NEEDLE MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
PEN NEEDLE MIS 31GX6MM	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
PEN NEEDLE MIS 33GX4MM	INSULIN PEN NEEDLE 33 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
PEN NEEDLE MIS 33GX5/32	INSULIN PEN NEEDLE 33 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
PEN NEEDLE MIS 33GX5MM	INSULIN PEN NEEDLE 33 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
PEN NEEDLE MIS 33GX6MM	INSULIN PEN NEEDLE 33 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
PEN NEEDLES MIS 29GX1/2"	INSULIN PEN NEEDLE 29 G X 12 MM (1/2")	Tier 2		X		
PEN NEEDLES MIS 29GX10MM	INSULIN PEN NEEDLE 29 G X 10 MM	Tier 2		X		
PEN NEEDLES MIS 29GX12.7	INSULIN PEN NEEDLE 29 G X 12.7 MM (1/2")	Tier 2		X		
PEN NEEDLES MIS 29GX12MM	INSULIN PEN NEEDLE 29 G X 12 MM (1/2")	Tier 2		X		
PEN NEEDLES MIS 30GX3/16	INSULIN PEN NEEDLE 30 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
PEN NEEDLES MIS 30GX5MM	INSULIN PEN NEEDLE 30 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
PEN NEEDLES MIS 31GX1/4"	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
PEN NEEDLES MIS 31GX3/16	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
PEN NEEDLES MIS 31GX5/16	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
PEN NEEDLES MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
PEN NEEDLES MIS 31GX6MM	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
PEN NEEDLES MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
PEN NEEDLES MIS 32GX8MM	INSULIN PEN NEEDLE 32 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
PEN NEEDLES MIS 33GX5/32	INSULIN PEN NEEDLE 33 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
PENTIPS MIS 29GX12MM	INSULIN PEN NEEDLE 29 G X 12 MM (1/2")	Tier 2		X		
PENTIPS MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
PENTIPS MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
PEPTICATE POW	*INFANT FOODS POWDER**	Tier 2				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PERFECT POIN MIS 25GX1"	NEEDLE (DISP) 25 X 1"	Tier 2				
PETROLATUM GEL WHITE	WHITE PETROLATUM TOPICAL GEL	Tier 1				
PETROLATUM OIN WHITE	WHITE PETROLATUM OINTMENT	Tier 3				
PETROLATUM OIN YELLOW	PETROLATUM OINTMENT	Tier 3				
PHENYL-FREE POW 1	*INFANT FOODS POWDER**	Tier 2	X			
PKU EASY TAB MICROTAB	*NUTRITIONAL SUPPLEMENT TABS DELAYED RELEASE**	Tier 3				
PKU EASY TAB PLUS	*NUTRITIONAL SUPPLEMENT TABS DELAYED RELEASE**	Tier 3				
PKU GOLIKE POW PL 4-16	*AMINO ACIDS PACK***	Tier 3				
PKU GOLIKE POW PLUS 16+	*AMINO ACIDS PACK***	Tier 3				
PLO GEL MEDIFLO	PREMIUM LECITHIN ORGANOGEL BASE GEL	Tier 3				
PLO MEDIFLO GEL 30	PREMIUM LECITHIN ORGANOGEL BASE GEL	Tier 3				
PLO MEDIFLO KIT 30 KIT	PREMIUM LECITHIN ORGANOGEL BASE KIT	Tier 3				
PLO MEDIFLO KIT KIT	PREMIUM LECITHIN ORGANOGEL BASE KIT	Tier 3				
PLO TRANSDER CRE	*TRANSDERMAL BASE CREAM**	Tier 3				
PLO20 GEL FLOWABLE	PREMIUM LECITHIN ORGANOGEL BASE GEL	Tier 3				
PLO20 GEL NON-FLOW	PREMIUM LECITHIN ORGANOGEL BASE GEL	Tier 3				
POLY HUB MIS 20GX1"	NEEDLE (DISP) 20 X 1"	Tier 2				
POLY HUB MIS 21GX1.5"	NEEDLE (DISP) 21 X 1-1/2"	Tier 2				
POLY HUB MIS 21GX1"	NEEDLE (DISP) 21 X 1"	Tier 2				
POLY HUB MIS 22GX1.5"	NEEDLE (DISP) 22 X 1-1/2"	Tier 2				
POLY HUB MIS 22GX1"	NEEDLE (DISP) 22 X 1"	Tier 2				
POLY HUB MIS 23GX1.5"	NEEDLE (DISP) 23 X 1-1/2"	Tier 2				
POLY HUB MIS 23GX1"	NEEDLE (DISP) 23 X 1"	Tier 2				
POLY HUB MIS 25GX1.5"	NEEDLE (DISP) 25 X 1-1/2"	Tier 2				
POLY HUB MIS 25GX1"	NEEDLE (DISP) 25 X 1"	Tier 2				
POLY HUB MIS 25GX5/8"	NEEDLE (DISP) 25 X 5/8"	Tier 2				
POLY HUB MIS 27GX1/2"	NEEDLE (DISP) 27 X 1/2"	Tier 2				
POLY HUB MIS 30GX1/2"	NEEDLE (DISP) 30 X 1/2"	Tier 2				
POLYETH GLYC OIN 8000	POLYETHYLENE GLYCOL 8000 OINT	Tier 3				
POLYMAC GEL PROGEL	*GEL BASE - GEL**	Tier 3				
POLYOX POW WSR-301	*BULK CHEMICALS - POWDER**	Tier 3				
POLYOX WSR POW -301	*BULK CHEMICALS - POWDER**	Tier 3				
POLYPEG OIN BASE	POLYETHYLENE GLYCOL OINTMENT	Tier 3				
POLYSORBATE LIQ 80	POLYSORBATE 80 LIQ	Tier 3				
POLYSORBATE LIQ 80	POLYSORBATE 80 LIQ	Tier 2				
POT IODIDE SOL 1GM/ML	POTASSIUM IODIDE ORAL SOLN 1 GM/ML	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
POT PHOSPHAT GRA DIBASIC	POTASSIUM PHOSPHATE DIBASIC GRANULES	Tier 3				
PRE PROTEIN POW	*PROTEIN ORAL POWDER***	Tier 2				
PRE PROTEIN TAB	*AMINO ACIDS TAB***	Tier 2	X			
PREGESTIMIL POW	*INFANT FOODS POWDER**	Tier 2				
PREPROTEIN LIQ	*AMINO ACIDS ORAL LIQUID***	Tier 2				
PREPROTEIN LIQ 20	*AMINO ACIDS ORAL LIQUID***	Tier 2				
PREVENT DROP MIS 31GX1/4"	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
PREVENT DROP MIS 31GX5/16	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
PREVENT SAFE MIS 31GX1/4"	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
PREVENT SAFE MIS 31GX5/16	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
PRO COMFORT MIS 0.5/30G	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 5/16"	Tier 2		X		
PRO COMFORT MIS 0.5/31G	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16"	Tier 2		X		
PRO COMFORT MIS 1ML/30G	INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 5/16"	Tier 2		X		
PRO COMFORT MIS 1ML/31G	INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 5/16"	Tier 2		X		
PROCEL POW	*PROTEIN ORAL POWDER***	Tier 3	X			
PROCHAMBER MIS VHC	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 2				
PROGESTERONE POW MICRONIZ	PROGESTERONE MICRONIZED (BULK) POWDER	Tier 3				
PROSOURCE LIQ NO CARB	*PROTEIN ORAL LIQUID***	Tier 3				
PROSOURCE LIQ TF FREE	*PROTEIN LIQUID (ENTERAL)***	Tier 3	X			
PROSOURCE LIQ TF20	*PROTEIN LIQUID (ENTERAL)***	Tier 3				
PROSYNMINIC POW	*PROTEIN ORAL POWDER***	Tier 3				
PROTEIN CHW 500MG	PROTEIN CHEW TAB 500 MG	Tier 1				
PROTEIN CHW 500MG	PROTEIN CHEW TAB 500 MG	Tier 2				
PROTEIN POW 80%	PROTEIN POWDER 80%	Tier 2				
PROTEIN POW 80%	PROTEIN POWDER 80%	Tier 1	X			
PROTEIN POW 90%	*PROTEIN ORAL POWDER***	Tier 1	X			
PURAMINO POW DHA/ARA	*INFANT FOODS POWDER**	Tier 2				
PURE BLISS LIQ ORG/IRON	*INFANT FOODS LIQUID**	Tier 3				
PURE COMFORT MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 2		X		

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PURE COMFORT MIS 31GX6MM	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
PURIFIED LIQ WATER	*DISTILLED WATER***	Tier 3				
PYRIDOSTIGMI TAB ER 105MG	PYRIDOSTIGMINE BROMIDE TAB ER 24HR 105 MG (PROTECTIVE)	Tier 3				
QFITLIA INJ 20/0.2ML	FITUSIRAN SODIUM SUBCUTANEOUS SOLN 20 MG/0.2ML	Tier 3/4	X	X	X	
QFITLIA INJ 50/0.5ML	FITUSIRAN SODIUM SUBCUTANEOUS SOLN AUTO-INJ 50 MG/0.5ML	Tier 3/4	X	X	X	
QUICK TOUCH MIS 29GX12.7	INSULIN PEN NEEDLE 29 G X 12.7 MM (1/2")	Tier 2		X		
QUICK TOUCH MIS 31GX4MM	INSULIN PEN NEEDLE 31 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
QUICK TOUCH MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
QUICK TOUCH MIS 31GX6MM	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
QUICK TOUCH MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
QUICK TOUCH MIS 32GX8MM	INSULIN PEN NEEDLE 32 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
QUICK TOUCH MIS 33GX4MM	INSULIN PEN NEEDLE 33 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
QUICK TOUCH MIS 33GX5MM	INSULIN PEN NEEDLE 33 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
QUICK TOUCH MIS 33GX6MM	INSULIN PEN NEEDLE 33 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
QUICK TOUCH MIS 33GX8MM	INSULIN PEN NEEDLE 33 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
RA L-LYSINE TAB 1000MG	LYSINE HCL TAB 1000 MG	Tier 2				
RA L-LYSINE TAB 500MG	LYSINE HCL TAB 500 MG	Tier 2				
RA PEN NEEDL MIS 31GX3/16	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
RADIOGARDASE CAP 0.5GM	PRUSSIAN BLUE INSOLUBLE CAP 0.5 GM	Tier 3				
RASPBERRY SYP	RASPBERRY SYRUP	Tier 3				
RAYA SURE MIS 29GX12MM	INSULIN PEN NEEDLE 29 G X 12 MM (1/2")	Tier 2		X		
RAYA SURE MIS 31GX4MM	INSULIN PEN NEEDLE 31 G X 4 MM (1/6" OR 5/32")	Tier 2		X		
RAYA SURE MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
RAYA SURE MIS 31GX6MM	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
RAYA SURE MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
RAYASAL CRE 5.9%	SALICYLIC ACID CREAM 5.9%	Tier 3				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
REAL FOOD LIQ BLENDS	*NUTRITIONAL SUPPLEMENT LIQUID (ENTERAL)**	Tier 3				
REFRESH AA15 LIQ PKU LEMO	*AMINO ACIDS ORAL LIQUID***	Tier 2	X			
REFRESH AA15 LIQ PKU ORG	*AMINO ACIDS ORAL LIQUID***	Tier 2	X			
REFRESH AA15 LIQ TYR ORG	*AMINO ACIDS ORAL LIQUID***	Tier 3	X			
RENAL SUPPRT LIQ 1.8	*NUTRITIONAL SUPPLEMENT LIQUID (ENTERAL)**	Tier 3	X			
RIBAVIRIN POW	RIBAVIRIN (BULK) POWDER	Tier 3				
SAFETYGLIDE MIS 21GX1.5"	NEEDLE (DISP) 21 X 1-1/2"	Tier 2				
SAFETYGLIDE MIS 21GX1"	NEEDLE (DISP) 21 X 1"	Tier 2				
SAFTY NEEDLE MIS 19GX1.5"	NEEDLE (DISP) 19 X 1-1/2"	Tier 2				
SAFTY NEEDLE MIS 19GX1"	NEEDLE (DISP) 19 X 1"	Tier 2				
SAFTY NEEDLE MIS 20GX1.5"	NEEDLE (DISP) 20 X 1-1/2"	Tier 2				
SAFTY NEEDLE MIS 20GX1"	NEEDLE (DISP) 20 X 1"	Tier 2				
SAFTY NEEDLE MIS 21GX1.5"	NEEDLE (DISP) 21 X 1-1/2"	Tier 2				
SAFTY NEEDLE MIS 21GX1"	NEEDLE (DISP) 21 X 1"	Tier 2				
SAFTY NEEDLE MIS 22GX1.5"	NEEDLE (DISP) 22 X 1-1/2"	Tier 2				
SAFTY NEEDLE MIS 22GX1"	NEEDLE (DISP) 22 X 1"	Tier 2				
SAFTY NEEDLE MIS 23GX1"	NEEDLE (DISP) 23 X 1"	Tier 2				
SAFTY NEEDLE MIS 25GX1"	NEEDLE (DISP) 25 X 1"	Tier 2				
SAFTY NEEDLE MIS 25GX5/8"	NEEDLE (DISP) 25 X 5/8"	Tier 2				
SALICATE LIQ 10%	SALICYLIC ACID LIQUID 10%	Tier 3				
SALICYLIC AC SOL 26%	SALICYLIC ACID SOLN 26%	Tier 1				
SECURESAFE MIS 29GX1/2"	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 29 X 1/2"	Tier 2		X		
SECURESAFE MIS 29GX1/2"	INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 1/2"	Tier 2		X		
SEPHIENCE POW 1000MG	SEPIAPTERIN POWDER PACKET 1000 MG	Tier 3/4	X	X	X	
SEPHIENCE POW 250MG	SEPIAPTERIN POWDER PACKET 250 MG	Tier 3/4	X	X	X	
SEVOFLURANE SOL	SEVOFLURANE INHAL SOLN	Tier 1				
SHARP CONTAI MIS	*SHARPS CONTAINER - MISC***	Tier 3				
SHARPS COLL MIS 0.05GAL	*SHARPS CONTAINER - MISC***	Tier 3				
SHARPS COLL MIS 5.4QT	*SHARPS CONTAINER - MISC***	Tier 3				
SHARPS COLL MIS 6.9QT	*SHARPS CONTAINER - MISC***	Tier 3				
SHARPS COLL MIS 8.2QT	*SHARPS CONTAINER - MISC***	Tier 3				
SHARPS CONT MIS 1 QT	*SHARPS CONTAINER - MISC***	Tier 3				
SHARPS CONTA MIS 0.05L	*SHARPS CONTAINER - MISC***	Tier 3				
SHARPS UNIV MIS CONTAIN	*SHARPS CONTAINER - MISC***	Tier 3				
SIMILAC LIQ SENSITIV	*INFANT FOODS LIQUID**	Tier 3				

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

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
SYRPALTA SYP	*ORAL VEHICLES - SYRUP***	Tier 3				
SYRPALTA SYP	SIMPLE - SYRUP	Tier 3				
SYRSPEND SF LIQ	*ORAL VEHICLES***	Tier 3				
SYRSPEND SF SUS PH4	*ORAL VEHICLES FOR SUSP***	Tier 3				
SYRUP SYP VEHICLE	*ORAL VEHICLES - SYRUP***	Tier 3				
SYRUP SF SYP VEHICLE	*ORAL VEHICLES - SYRUP***	Tier 3				
TACROLIMUS POW	TACROLIMUS (BULK) POWDER	Tier 3				
TACROLIMUS POW MONOHYD	TACROLIMUS (BULK) POWDER	Tier 3				
TAVNEOS CAP 10MG	AVACOPAN CAP 10 MG	Tier 3/4	X	X		
TDC MAX CRE	*TRANSDERMAL BASE CREAM**	Tier 3				
TERBUTALINE POW SULFATE	TERBUTALINE SULFATE POWDER	Tier 3				
TERRELL SOL	ISOFLURANE INHAL SOLN	Tier 1				
TESTOSTERONE CRY YAM	TESTOSTERONE MICRONIZED (BULK) CRYSTALS	Tier 3				
TESTOSTERONE POW	TESTOSTERONE (BULK) POWDER	Tier 3				
TESTOSTERONE POW CYPIONAT	TESTOSTERONE CYPIONATE (BULK) POWDER	Tier 3				
TESTOSTERONE POW ENANTHAT	TESTOSTERONE ENANTHATE (BULK) POWDER	Tier 3				
TESTOSTERONE POW MICRONIZ	TESTOSTERONE MICRONIZED (BULK) POWDER	Tier 3				
TESTOSTERONE POW SOY	TESTOSTERONE MICRONIZED (BULK) POWDER	Tier 3				
TESTOSTERONE POW SOY	TESTOSTERONE (BULK) POWDER	Tier 3				
THIOGUANINE POW	THIOGUANINE (BULK) POWDER	Tier 3				
THIOTEPA POW	THIOTEPA (BULK) POWDER	Tier 3				
TODDLER BEGI POW IRON	*INFANT FOODS POWDER**	Tier 2				
TOMMY GEL GEL	*GEL BASE - GEL**	Tier 3				
TONMYA SUB 2.8MG	CYCLOBENZAPRINE HCL SUBLINGUAL TAB 2.8 MG	Tier 3/4	X	X		
TRANSDERMAL CRE PAIN BAS	*TRANSDERMAL BASE CREAM**	Tier 3				
TRICHLOROACE CRY ACID	TRICHLOROACETIC ACID (BULK) CRYSTALS	Tier 3				
TRICHOSOL SOL	*EXTERNAL VEHICLES - SOLUTION***	Tier 3				
TROJAN MIS BARESKIN	CONDOMS LATEX LUBRICATED	HCR		X		
TROJAN MAGN MIS	CONDOMS LATEX LUBRICATED	HCR		X		
TROJAN ULTRA MIS RIBBED	CONDOMS LATEX LUBRICATED	HCR		X		
TROJAN ULTRA MIS THIN	CONDOMS LATEX LUBRICATED	HCR		X		
TROJAN-ENZ MIS LUBRICAT	CONDOMS LATEX LUBRICATED	HCR		X		
TROJAN-ENZ MIS W/SPERMI	CONDOMS LATEX LUBRICATED	HCR		X		
TRUE COVER MIS CONDOM	CONDOMS LATEX LUBRICATED	HCR		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
TRUE METRIX SOL LEVEL 1	*BLOOD GLUCOSE CALIBRATION - LIQUID - LOW***	Tier 2				
TRUE METRIX SOL LEVEL 2	*BLOOD GLUCOSE CALIBRATION - LIQUID - NORMAL***	Tier 2				
TRUE METRIX SOL LEVEL 3	*BLOOD GLUCOSE CALIBRATION - LIQUID - HIGH***	Tier 2				
TRYNGOLZA INJ 80MG/0.8	OLEZARSEN SOD SUBCUT SOLN AUTO-INJECT 80 MG/0.8ML (BASE EQ)	Tier 3/4	X	X		
TRYPTYR SOL 0.003%	ACOLTREMOM OPTH SOLN 0.003%	Tier 3/4	X	X		
TWIST KIT REFILL	*INSULIN INFUSION DISPOSABLE PUMP RESERVOIR KIT***	Tier 2	X			
TWIST KIT STARTER	*INSULIN INFUSION DISPOSABLE PUMP KIT***	Tier 2	X	X		
TWIST REFIL KIT INFUSION	*INSULIN INFUSION DISPOSABLE PUMP RESERVOIR/INFUS SET KIT***	Tier 2	X			
TWYNEO CRE 0.1-3%	TRETINOIN-BENZOYL PEROXIDE CREAM 0.1-3%	Tier 3/4				
ULTANE SOL	SEVOFLURANE INHAL SOLN	Tier 3				
UNIFINE PNT MIS 29GX12MM	INSULIN PEN NEEDLE 29 G X 12 MM (1/2")	Tier 2		X		
UNIFINE PNT MIS 31GX3/16	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
UNIFINE PNT MIS 31GX5/16	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
UNIFINE PNT MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
UNIFINE PNT MIS 31GX6MM	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
UNIFINE PNT MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
UNIFINE PROT MIS 30GX5MM	INSULIN PEN NEEDLE 30 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
UNIFINE SAFE MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
UNIFINE SAFE MIS 31GX6MM	INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64")	Tier 2		X		
UNIFINE SAFE MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
UNISPEND ANH SUS SWEETENE	*ORAL VEHICLES - SUSP***	Tier 3				
UNJURY POW CHICKEN	*PROTEIN ORAL POWDER***	Tier 3				
UNJURY POW CHOCOLAT	*PROTEIN ORAL POWDER***	Tier 3				
UNJURY POW STRAWBRY	*PROTEIN ORAL POWDER***	Tier 3				
UNJURY POW UNFLAVOR	*PROTEIN ORAL POWDER***	Tier 3				
UNJURY POW VANILLA	*PROTEIN ORAL POWDER***	Tier 3				
UREA POW	UREA POWDER	Tier 3				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
UREA PRILLED BEA	UREA BEADS	Tier 3				
VALINE PAK 50MG	VALINE ORAL POWDER PACKET 50 MG	Tier 2				
VALINE 1000 POW	VALINE ORAL POWDER PACKET 1 GM	Tier 2				
VANRAFIA TAB 0.75MG	ATRASANTAN HCL TAB 0.75 MG	Tier 3/4	X	X		
VEGAPRO POW	*PROTEIN ORAL POWDER***	Tier 3				
VERIFINE PEN MIS 29GX12MM	INSULIN PEN NEEDLE 29 G X 12 MM (1/2")	Tier 2		X		
VERIFINE PEN MIS 31GX5MM	INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16")	Tier 2		X		
VERIFINE PEN MIS 31GX8MM	INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16")	Tier 2		X		
VERISAFE MIS 23GX1.5"	NEEDLE (DISP) 23 X 1-1/2"	Tier 2				
VERISAFE MIS 25GX1"	NEEDLE (DISP) 25 X 1"	Tier 2				
VERSABASE GEL	VERSABASE GEL	Tier 3				
VERSAFREE SYP	*ORAL VEHICLES - SYRUP***	Tier 3				
VERSAPENN AG GEL ANHYDROU	*TRANSDERMAL BASE GEL**	Tier 3				
VERSAPENN AL GEL ANHYDROU	*TRANSDERMAL BASE GEL**	Tier 3				
VERSAPLUS SYP	*ORAL VEHICLES - SYRUP***	Tier 3				
VERSAPRO GEL ANHYDROU	*GEL BASE - GEL**	Tier 3				
VISTOGARD PAK 10GM	URIDINE TRIACETATE ORAL GRANULES PACKET 10 GM	Tier 2	X			
VITATROCHE GRA BASE SF	*TROCHE BASE GRANULES***	Tier 3				
VORTEX CHAMB MIS PEDI MAS	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 2				
VORTEX MASK MIS PEDS MED	*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS***	Tier 2				
VORTEX MASK MIS PEDS SML	*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS***	Tier 2				
VORTEX VALVD MIS CHAMBER	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 2				
VORTEX VALVE MIS CHAMBER	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 2				
VORTEX/MASK MIS CHILDS	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 2				
VORTEX/MASK MIS TODDLER	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	Tier 2				
WA-001 EXPER OIL SOIL SUR	ETHOXYLATED MACADAMIA NUT OIL	Tier 3				
WHEY PROTEIN POW CON	*PROTEIN ORAL POWDER***	Tier 1	X			
WHEY PROTEIN POW CON	*PROTEIN ORAL POWDER***	Tier 1				
WHEY PROTEIN POW COOKIES	*PROTEIN ORAL PACK***	Tier 2	X			
WHEY PROTEIN POW STRAWBER	*PROTEIN ORAL POWDER***	Tier 2				
WIDE-SEAL DPR KIT 60	DIAPHRAGM WIDE SEAL 60 MM	HCR				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
WIDE-SEAL DPR KIT 65	DIAPHRAGM WIDE SEAL 65 MM	HCR				
WIDE-SEAL DPR KIT 70	DIAPHRAGM WIDE SEAL 70 MM	HCR				
WIDE-SEAL DPR KIT 75	DIAPHRAGM WIDE SEAL 75 MM	HCR				
WIDE-SEAL DPR KIT 80	DIAPHRAGM WIDE SEAL 80 MM	HCR				
WIDE-SEAL DPR KIT 85	DIAPHRAGM WIDE SEAL 85 MM	HCR				
WIDE-SEAL DPR KIT 90	DIAPHRAGM WIDE SEAL 90 MM	HCR				
WIDE-SEAL DPR KIT 95	DIAPHRAGM WIDE SEAL 95 MM	HCR				
XPHE MAXAMUM PAK ORANGE	*AMINO ACIDS PACK***	Tier 3				
XPHE MAXAMUM PAK UNFLAVOR	*AMINO ACIDS PACK***	Tier 3				
ZELSUVMI GEL 10.3%	BERDAZIMER SODIUM GEL 10.3%	Tier 3/4	X			
ZOKINVY CAP 50MG	LONAFARNIB CAP 50 MG	Tier 2	X	X		
ZOKINVY CAP 75MG	LONAFARNIB CAP 75 MG	Tier 2	X	X		
Molecular Target Inhibitors - Chemotherapy Agents						
ALECENSA CAP 150MG	ALECTINIB HCL CAP 150 MG (BASE EQUIVALENT)	Tier 2	X	X		
ALUNBRIG PAK	BRIGATINIB TAB INITIATION THERAPY PACK 90 MG & 180 MG	Tier 2	X	X		
ALUNBRIG TAB 180MG	BRIGATINIB TAB 180 MG	Tier 2	X	X		
ALUNBRIG TAB 30MG	BRIGATINIB TAB 30 MG	Tier 2	X	X		
ALUNBRIG TAB 90MG	BRIGATINIB TAB 90 MG	Tier 2	X	X		
AYVAKIT TAB 100MG	AVAPRITINIB TAB 100 MG	Tier 3/4	X	X		
AYVAKIT TAB 200MG	AVAPRITINIB TAB 200 MG	Tier 3/4	X	X		
AYVAKIT TAB 25MG	AVAPRITINIB TAB 25 MG	Tier 3/4	X	X		
AYVAKIT TAB 300MG	AVAPRITINIB TAB 300 MG	Tier 3/4	X	X		
AYVAKIT TAB 50MG	AVAPRITINIB TAB 50 MG	Tier 3/4	X	X		
BOSULIF CAP 100MG	BOSUTINIB CAP 100 MG	Tier 2	X	X	X	
BOSULIF CAP 50MG	BOSUTINIB CAP 50 MG	Tier 2	X	X	X	
BOSULIF TAB 100MG	BOSUTINIB TAB 100 MG	Tier 2	X	X	X	
BOSULIF TAB 400MG	BOSUTINIB TAB 400 MG	Tier 2	X	X	X	
BOSULIF TAB 500MG	BOSUTINIB TAB 500 MG	Tier 2	X	X	X	
BRAFTOVI CAP 75MG	ENCORAFENIB CAP 75 MG	Tier 3/4	X	X	X	
BRUKINSA CAP 80MG	ZANUBRUTINIB CAP 80 MG	Tier 3	X	X	X	
BRUKINSA TAB 160MG	ZANUBRUTINIB TAB 160 MG	Tier 3	X	X	X	
CABOMETYX TAB 20MG	CABOZANTINIB S-MALATE TAB 20 MG (BASE EQUIVALENT)	Tier 2	X	X		
CABOMETYX TAB 40MG	CABOZANTINIB S-MALATE TAB 40 MG (BASE EQUIVALENT)	Tier 2	X	X		
CABOMETYX TAB 60MG	CABOZANTINIB S-MALATE TAB 60 MG (BASE EQUIVALENT)	Tier 2	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
CALQUENCE TAB 100MG	ACALABRUTINIB MALEATE TAB 100 MG	Tier 2	X	X		
CAPRELSA TAB 100MG	VANDETANIB TAB 100 MG	Tier 2	X	X		
CAPRELSA TAB 300MG	VANDETANIB TAB 300 MG	Tier 2	X	X		
COMETRIQ KIT 100MG	CABOZANTINIB S-MAL CAP 1 X 80 MG & 1 X 20 MG (100 DOSE) KIT	Tier 2	X	X		
COMETRIQ KIT 140MG	CABOZANTINIB S-MAL CAP 1 X 80 MG & 3 X 20 MG (140 DOSE) KIT	Tier 2	X	X		
COMETRIQ KIT 60MG	CABOZANTINIB S-MALATE CAP 3 X 20 MG (60 MG DOSE) KIT	Tier 2	X	X		
COTELLIC TAB 20MG	COBIMETINIB FUMARATE TAB 20 MG (BASE EQUIVALENT)	Tier 2	X	X		
DASATINIB TAB 100MG	DASATINIB TAB 100 MG	Tier 1	X	X		
DASATINIB TAB 140MG	DASATINIB TAB 140 MG	Tier 1	X	X		
DASATINIB TAB 20MG	DASATINIB TAB 20 MG	Tier 1	X	X		
DASATINIB TAB 50MG	DASATINIB TAB 50 MG	Tier 1	X	X		
DASATINIB TAB 70MG	DASATINIB TAB 70 MG	Tier 1	X	X		
DASATINIB TAB 80MG	DASATINIB TAB 80 MG	Tier 1	X	X		
DAURISMO TAB 100MG	GLASDEGIB MALEATE TAB 100 MG (BASE EQUIVALENT)	Tier 2	X	X		
DAURISMO TAB 25MG	GLASDEGIB MALEATE TAB 25 MG (BASE EQUIVALENT)	Tier 2	X	X		
ERIVEDGE CAP 150MG	VISMODEGIB CAP 150 MG	Tier 2	X	X		
ERLOTINIB TAB 100MG	ERLOTINIB HCL TAB 100 MG (BASE EQUIVALENT)	Tier 1	X	X		
ERLOTINIB TAB 150MG	ERLOTINIB HCL TAB 150 MG (BASE EQUIVALENT)	Tier 1	X	X		
ERLOTINIB TAB 25MG	ERLOTINIB HCL TAB 25 MG (BASE EQUIVALENT)	Tier 1	X	X		
EVEROLIMUS TAB 10MG	EVEROLIMUS TAB 10 MG	Tier 1	X	X		
EVEROLIMUS TAB 2.5MG	EVEROLIMUS TAB 2.5 MG	Tier 1	X	X		
EVEROLIMUS TAB 2MG	EVEROLIMUS TAB FOR ORAL SUSP 2 MG	Tier 1	X	X		
EVEROLIMUS TAB 3MG	EVEROLIMUS TAB FOR ORAL SUSP 3 MG	Tier 1	X	X		
EVEROLIMUS TAB 5MG	EVEROLIMUS TAB 5 MG	Tier 1	X	X		
EVEROLIMUS TAB 5MG	EVEROLIMUS TAB FOR ORAL SUSP 5 MG	Tier 1	X	X		
EVEROLIMUS TAB 7.5MG	EVEROLIMUS TAB 7.5 MG	Tier 1	X	X		
FOTIVDA CAP 0.89MG	TIVOZANIB HCL CAP 0.89 MG (BASE EQUIVALENT)	Tier 3/4	X	X		
FOTIVDA CAP 1.34MG	TIVOZANIB HCL CAP 1.34 MG (BASE EQUIVALENT)	Tier 3/4	X	X		
GAVRETO CAP 100MG	PRALSETINIB CAP 100 MG	Tier 3/4	X	X		
GEFITINIB TAB 250MG	GEFITINIB TAB 250 MG	Tier 1	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
GILOTRIF TAB 20MG	AFATINIB DIMALEATE TAB 20 MG (BASE EQUIVALENT)	Tier 3	X	X		
GILOTRIF TAB 30MG	AFATINIB DIMALEATE TAB 30 MG (BASE EQUIVALENT)	Tier 3	X	X		
GILOTRIF TAB 40MG	AFATINIB DIMALEATE TAB 40 MG (BASE EQUIVALENT)	Tier 3	X	X		
IBRANCE CAP 100MG	PALBOCICLIB CAP 100 MG	Tier 3/4	X	X	X	
IBRANCE CAP 125MG	PALBOCICLIB CAP 125 MG	Tier 3/4	X	X	X	
IBRANCE CAP 75MG	PALBOCICLIB CAP 75 MG	Tier 3/4	X	X	X	
IBRANCE TAB 100MG	PALBOCICLIB TAB 100 MG	Tier 3/4	X	X	X	
IBRANCE TAB 125MG	PALBOCICLIB TAB 125 MG	Tier 3/4	X	X	X	
IBRANCE TAB 75MG	PALBOCICLIB TAB 75 MG	Tier 3/4	X	X	X	
ICLUSIG TAB 15MG	PONATINIB HCL TAB 15 MG (BASE EQUIV)	Tier 3	X	X		
ICLUSIG TAB 45MG	PONATINIB HCL TAB 45 MG (BASE EQUIV)	Tier 3	X	X		
IDHIFA TAB 100MG	ENASIDENIB MESYLATE TAB 100 MG (BASE EQUIVALENT)	Tier 2	X	X		
IDHIFA TAB 50MG	ENASIDENIB MESYLATE TAB 50 MG (BASE EQUIVALENT)	Tier 2	X	X		
IMATINIB MES TAB 100MG	IMATINIB MESYLATE TAB 100 MG (BASE EQUIVALENT)	Tier 1		X		
IMATINIB MES TAB 400MG	IMATINIB MESYLATE TAB 400 MG (BASE EQUIVALENT)	Tier 1		X		
IMBRUVICA CAP 140MG	IBRUTINIB CAP 140 MG	Tier 2	X	X		
IMBRUVICA CAP 70MG	IBRUTINIB CAP 70 MG	Tier 2	X	X		
IMBRUVICA SUS 70MG/ML	IBRUTINIB ORAL SUSP 70 MG/ML	Tier 2	X	X		
IMBRUVICA TAB 420MG	IBRUTINIB TAB 420 MG	Tier 2	X	X		
IMKELDI SOL 80MG/ML	IMATINIB MESYLATE ORAL SOLN 80 MG/ML (BASE EQUIVALENT)	Tier 3/4	X	X		
INLYTA TAB 1MG	AXITINIB TAB 1 MG	Tier 3	X	X		
INLYTA TAB 5MG	AXITINIB TAB 5 MG	Tier 3	X	X		
IRESSA TAB 250MG	GEFITINIB TAB 250 MG	Tier 3/4	X	X		
JAKAFI TAB 10MG	RUXOLITINIB PHOSPHATE TAB 10 MG (BASE EQUIVALENT)	Tier 2	X	X		
JAKAFI TAB 15MG	RUXOLITINIB PHOSPHATE TAB 15 MG (BASE EQUIVALENT)	Tier 2	X	X		
JAKAFI TAB 20MG	RUXOLITINIB PHOSPHATE TAB 20 MG (BASE EQUIVALENT)	Tier 2	X	X		
JAKAFI TAB 25MG	RUXOLITINIB PHOSPHATE TAB 25 MG (BASE EQUIVALENT)	Tier 2	X	X		
JAKAFI TAB 5MG	RUXOLITINIB PHOSPHATE TAB 5 MG (BASE EQUIVALENT)	Tier 2	X	X		
LAPATINIB TAB 250MG	LAPATINIB DITOSYLATE TAB 250 MG (BASE EQUIV)	Tier 1	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
LAZCLUZE TAB 240MG	LAZERTINIB MESYLATE TAB 240 MG	Tier 3	X	X		
LAZCLUZE TAB 80MG	LAZERTINIB MESYLATE TAB 80 MG	Tier 3	X	X		
LENVIMA CAP 10 MG	LENVATINIB CAP THERAPY PACK 10 MG (10 MG DAILY DOSE)	Tier 2	X	X		
LENVIMA CAP 12MG	LENVATINIB CAP THERAPY PACK 3 X 4 MG (12 MG DAILY DOSE)	Tier 2	X	X		
LENVIMA CAP 14 MG	LENVATINIB CAP THERAPY PACK 10 & 4 MG (14 MG DAILY DOSE)	Tier 2	X	X		
LENVIMA CAP 18 MG	LENVATINIB CAP THER PACK 10 MG & 2 X 4 MG (18 MG DAILY DOSE)	Tier 2	X	X		
LENVIMA CAP 20 MG	LENVATINIB CAP THERAPY PACK 2 X 10 MG (20 MG DAILY DOSE)	Tier 2	X	X		
LENVIMA CAP 24 MG	LENVATINIB CAP THER PACK 2 X 10 MG & 4 MG (24 MG DAILY DOSE)	Tier 2	X	X		
LENVIMA CAP 4MG	LENVATINIB CAP THERAPY PACK 4 MG (4 MG DAILY DOSE)	Tier 2	X	X		
LENVIMA CAP 8 MG	LENVATINIB CAP THERAPY PACK 2 X 4 MG (8 MG DAILY DOSE)	Tier 2	X	X		
LYNPARZA TAB 100MG	OLAPARIB TAB 100 MG	Tier 2	X	X		
LYNPARZA TAB 150MG	OLAPARIB TAB 150 MG	Tier 2	X	X		
MEKINIST SOL 0.05/ML	TRAMETINIB DIMETHYL SULFOXIDE FOR SOLN 0.05 MG/ML (BASE EQ)	Tier 3/4		X	X	
MEKINIST TAB 0.5MG	TRAMETINIB DIMETHYL SULFOXIDE TAB 0.5 MG (BASE EQUIVALENT)	Tier 3/4	X	X	X	
MEKINIST TAB 2MG	TRAMETINIB DIMETHYL SULFOXIDE TAB 2 MG (BASE EQUIVALENT)	Tier 3/4	X	X	X	
MEKTOVI TAB 15MG	BINIMETINIB TAB 15 MG	Tier 3/4	X	X	X	
NERLYNX TAB 40MG	NERATINIB MALEATE TAB 40 MG (BASE EQUIVALENT)	Tier 2	X	X		
NILOTINB HCL CAP 150MG	NILOTINIB HCL CAP 150 MG (BASE EQUIVALENT)	Tier 1	X	X	X	
NILOTINB HCL CAP 200MG	NILOTINIB HCL CAP 200 MG (BASE EQUIVALENT)	Tier 1	X	X	X	
NILOTINB HCL CAP 50MG	NILOTINIB HCL CAP 50 MG (BASE EQUIVALENT)	Tier 1	X	X	X	
ODOMZO CAP 200MG	SONIDEGIB PHOSPHATE CAP 200 MG (BASE EQUIVALENT)	Tier 2	X	X		
OJEMDA SUS 25MG/ML	TOVORAFENIB FOR ORAL SUSP 25 MG/ML	Tier 3/4	X	X		
OJEMDA TAB 100MG	TOVORAFENIB TAB 100 MG	Tier 3/4	X	X		
PAZOPANIB TAB 200MG	PAZOPANIB HCL TAB 200 MG (BASE EQUIV)	Tier 1	X	X		
PAZOPANIB TAB 400MG	PAZOPANIB HCL TAB 400 MG (BASE EQUIV)	Tier 1	X			
QINLOCK TAB 50MG	RIPRETINIB TAB 50 MG	Tier 3/4	X	X		
RETEVMO CAP 40MG	SELPERCATINIB CAP 40 MG	Tier 3/4	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
RETEVMO CAP 80MG	SELPERCATINIB CAP 80 MG	Tier 3/4	X	X		
RETEVMO TAB 120MG	SELPERCATINIB TAB 120 MG	Tier 3/4	X	X		
RETEVMO TAB 160MG	SELPERCATINIB TAB 160 MG	Tier 3/4	X	X		
RETEVMO TAB 40MG	SELPERCATINIB TAB 40 MG	Tier 3/4	X	X		
RETEVMO TAB 80MG	SELPERCATINIB TAB 80 MG	Tier 3/4	X	X		
REZLIDHIA CAP 150MG	OLUTASIDENIB CAP 150 MG	Tier 2	X	X		
RUBRACA TAB 200MG	RUCAPARIB CAMSYLATE TAB 200 MG (BASE EQUIVALENT)	Tier 3	X	X	X	
RUBRACA TAB 250MG	RUCAPARIB CAMSYLATE TAB 250 MG (BASE EQUIVALENT)	Tier 3	X	X	X	
RUBRACA TAB 300MG	RUCAPARIB CAMSYLATE TAB 300 MG (BASE EQUIVALENT)	Tier 3	X	X	X	
RYDAPT CAP 25MG	MIDOSTAURIN CAP 25 MG	Tier 2	X	X		
SORAFENIB TAB 200MG	SORAFENIB TOSYLATE TAB 200 MG (BASE EQUIVALENT)	Tier 1	X	X		
STIVARGA TAB 40MG	REGORAFENIB TAB 40 MG	Tier 2	X	X		
SUNITINIB CAP 12.5MG	SUNITINIB MALATE CAP 12.5 MG (BASE EQUIVALENT)	Tier 1	X	X		
SUNITINIB CAP 25MG	SUNITINIB MALATE CAP 25 MG (BASE EQUIVALENT)	Tier 1	X	X		
SUNITINIB CAP 37.5MG	SUNITINIB MALATE CAP 37.5 MG (BASE EQUIVALENT)	Tier 1	X	X		
SUNITINIB CAP 50MG	SUNITINIB MALATE CAP 50 MG (BASE EQUIVALENT)	Tier 1	X	X		
TABRECTA TAB 150MG	CAPMATINIB HCL TAB 150 MG	Tier 3/4	X	X		
TABRECTA TAB 200MG	CAPMATINIB HCL TAB 200 MG	Tier 3/4	X	X		
TAFINLAR CAP 50MG	DABRAFENIB MESYLATE CAP 50 MG (BASE EQUIVALENT)	Tier 3/4	X	X	X	
TAFINLAR CAP 75MG	DABRAFENIB MESYLATE CAP 75 MG (BASE EQUIVALENT)	Tier 3/4	X	X	X	
TAFINLAR TAB 10MG	DABRAFENIB MESYLATE TAB FOR ORAL SUSP 10 MG (BASE EQUIV)	Tier 3/4		X	X	
TAGRISSO TAB 40MG	OSIMERTINIB MESYLATE TAB 40 MG (BASE EQUIVALENT)	Tier 3	X	X		
TAGRISSO TAB 80MG	OSIMERTINIB MESYLATE TAB 80 MG (BASE EQUIVALENT)	Tier 3	X	X		
TEPMETKO TAB 225MG	TEPOTINIB HCL TAB 225 MG	Tier 3/4	X	X		
TIBSOVO TAB 250MG	IVOSIDENIB TAB 250 MG	Tier 2	X	X		
TORPENZ TAB 10MG	EVEROLIMUS TAB 10 MG	Tier 1	X	X		
TORPENZ TAB 2.5MG	EVEROLIMUS TAB 2.5 MG	Tier 1	X	X		
TORPENZ TAB 5MG	EVEROLIMUS TAB 5 MG	Tier 1	X	X		
TORPENZ TAB 7.5MG	EVEROLIMUS TAB 7.5 MG	Tier 1	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
TUKYSA TAB 150MG	TUCATINIB TAB 150 MG	Tier 2	X	X		
TUKYSA TAB 50MG	TUCATINIB TAB 50 MG	Tier 2	X	X		
TURALIO CAP 125MG	PEXIDARTINIB HCL CAP 125 MG (BASE EQUIVALENT)	Tier 2	X	X		
VENCLEXTA TAB 100MG	VENETOCLAX TAB 100 MG	Tier 2	X	X		
VENCLEXTA TAB 10MG	VENETOCLAX TAB 10 MG	Tier 2	X	X		
VENCLEXTA TAB 50MG	VENETOCLAX TAB 50 MG	Tier 2	X	X		
VENCLEXTA TAB START PK	VENETOCLAX TAB THERAPY STARTER PACK 10 & 50 & 100 MG	Tier 2	X	X		
VITRAKVI CAP 100MG	LAROTRECTINIB SULFATE CAP 100 MG (BASE EQUIVALENT)	Tier 2	X	X		
VITRAKVI CAP 25MG	LAROTRECTINIB SULFATE CAP 25 MG (BASE EQUIVALENT)	Tier 2	X	X		
VITRAKVI SOL 20MG/ML	LAROTRECTINIB SULFATE ORAL SOLN 20 MG/ML (BASE EQUIVALENT)	Tier 2	X	X		
VIZIMPRO TAB 15MG	DACOMITINIB TAB 15 MG	Tier 3	X	X		
VIZIMPRO TAB 30MG	DACOMITINIB TAB 30 MG	Tier 3	X	X		
VIZIMPRO TAB 45MG	DACOMITINIB TAB 45 MG	Tier 3	X	X		
XOSPATA TAB 40MG	GILTERITINIB FUMARATE TABLET 40 MG (BASE EQUIVALENT)	Tier 3	X	X		
ZELBORAF TAB 240MG	VEMURAFENIB TAB 240 MG	Tier 2	X	X		
ZYDELIG TAB 100MG	IDELALISIB TAB 100 MG	Tier 3/4	X	X		
Monoamine Oxidase B (MAO-B) Inhibitors - Parkinson's Disease Drugs						
RASAGILINE TAB 0.5MG	RASAGILINE MESYLATE TAB 0.5 MG (BASE EQUIV)	Tier 1				
RASAGILINE TAB 1MG	RASAGILINE MESYLATE TAB 1 MG (BASE EQUIV)	Tier 1				
SELEGILINE CAP 5MG	SELEGILINE HCL CAP 5 MG	Tier 1				
SELEGILINE TAB 5MG	SELEGILINE HCL TAB 5 MG	Tier 1				
ZELAPAR ODT TAB 1.25MG	SELEGILINE HCL ORALLY DISINTEGRATING TAB 1.25 MG	Tier 3				
Monoamine Oxidase Inhibitors - Antidepressants						
EMSAM DIS 12MG/24H	SELEGILINE TD PATCH 24HR 12 MG/24HR	Tier 3				
EMSAM DIS 6MG/24HR	SELEGILINE TD PATCH 24HR 6 MG/24HR	Tier 3				
EMSAM DIS 9MG/24HR	SELEGILINE TD PATCH 24HR 9 MG/24HR	Tier 3				
MARPLAN TAB 10MG	ISOCARBOXAZID TAB 10 MG	Tier 3				
NARDIL TAB 15MG	PHENELZINE SULFATE TAB 15 MG	Tier 3/4				
PARNATE TAB 10MG	TRANLYCYPROMINE SULFATE TAB 10 MG	Tier 3/4				
PHENELZINE TAB 15MG	PHENELZINE SULFATE TAB 15 MG	Tier 1				
TRANLYCYPROM TAB 10MG	TRANLYCYPROMINE SULFATE TAB 10 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
Mood Stabilizers - Mood Disorder Drugs						
DEPAKOTE TAB 125MG DR	DIVALPROEX SODIUM TAB DELAYED RELEASE 125 MG	Tier 3/4				
DEPAKOTE TAB 250MG DR	DIVALPROEX SODIUM TAB DELAYED RELEASE 250 MG	Tier 3/4				
DEPAKOTE TAB 500MG DR	DIVALPROEX SODIUM TAB DELAYED RELEASE 500 MG	Tier 3/4				
DEPAKOTE ER TAB 250MG	DIVALPROEX SODIUM TAB ER 24 HR 250 MG	Tier 3/4				
DEPAKOTE ER TAB 500MG	DIVALPROEX SODIUM TAB ER 24 HR 500 MG	Tier 3/4				
DEPAKOTE SPR CAP 125MG	DIVALPROEX SODIUM CAP DELAYED RELEASE SPRINKLE 125 MG	Tier 3/4				
DIVALPROEX CAP 125MG DR	DIVALPROEX SODIUM CAP DELAYED RELEASE SPRINKLE 125 MG	Tier 1				
DIVALPROEX TAB 125MG DR	DIVALPROEX SODIUM TAB DELAYED RELEASE 125 MG	Tier 1				
DIVALPROEX TAB 250MG DR	DIVALPROEX SODIUM TAB DELAYED RELEASE 250 MG	Tier 1				
DIVALPROEX TAB 250MG ER	DIVALPROEX SODIUM TAB ER 24 HR 250 MG	Tier 1				
DIVALPROEX TAB 500MG DR	DIVALPROEX SODIUM TAB DELAYED RELEASE 500 MG	Tier 1				
DIVALPROEX TAB 500MG ER	DIVALPROEX SODIUM TAB ER 24 HR 500 MG	Tier 1				
EQUETRO CAP 100MG	CARBAMAZEPINE (MOOD) CAP ER 12HR 100 MG	Tier 3/4				
EQUETRO CAP 200MG	CARBAMAZEPINE (MOOD) CAP ER 12HR 200 MG	Tier 3/4				
EQUETRO CAP 300MG	CARBAMAZEPINE (MOOD) CAP ER 12HR 300 MG	Tier 3/4				
LITHIUM SOL 8MEQ/5ML	LITHIUM ORAL SOLUTION 8 MEQ/5ML	Tier 1				
LITHIUM CARB CAP 150MG	LITHIUM CARBONATE CAP 150 MG	Tier 1				
LITHIUM CARB CAP 300MG	LITHIUM CARBONATE CAP 300 MG	Tier 1				
LITHIUM CARB CAP 600MG	LITHIUM CARBONATE CAP 600 MG	Tier 1				
LITHIUM CARB TAB 300MG	LITHIUM CARBONATE TAB 300 MG	Tier 1				
LITHIUM CARB TAB 300MG ER	LITHIUM CARBONATE TAB ER 300 MG	Tier 1				
LITHIUM CARB TAB 450MG ER	LITHIUM CARBONATE TAB ER 450 MG	Tier 1				
LITHOBID TAB 300MG	LITHIUM CARBONATE TAB ER 300 MG	Tier 3/4				
Multiple Sclerosis Agents						
CLADRIBINE PAK 10MG(10)	CLADRIBINE TAB THERAPY PACK 10 MG (10 TABS)	Tier 1	X	X	X	
CLADRIBINE PAK 10MG(4)	CLADRIBINE TAB THERAPY PACK 10 MG (4 TABS)	Tier 1	X	X	X	
CLADRIBINE PAK 10MG(5)	CLADRIBINE TAB THERAPY PACK 10 MG (5 TABS)	Tier 1	X	X	X	

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
CLADRIBINE PAK 10MG(6)	CLADRIBINE TAB THERAPY PACK 10 MG (6 TABS)	Tier 1	X	X	X	
CLADRIBINE PAK 10MG(7)	CLADRIBINE TAB THERAPY PACK 10 MG (7 TABS)	Tier 1	X	X	X	
CLADRIBINE PAK 10MG(8)	CLADRIBINE TAB THERAPY PACK 10 MG (8 TABS)	Tier 1	X	X	X	
CLADRIBINE PAK 10MG(9)	CLADRIBINE TAB THERAPY PACK 10 MG (9 TABS)	Tier 1	X	X	X	
MAVENCLAD PAK 10MG(10)	CLADRIBINE TAB THERAPY PACK 10 MG (10 TABS)	Tier 3	X	X	X	
MAVENCLAD PAK 10MG(4)	CLADRIBINE TAB THERAPY PACK 10 MG (4 TABS)	Tier 3	X	X	X	
MAVENCLAD PAK 10MG(5)	CLADRIBINE TAB THERAPY PACK 10 MG (5 TABS)	Tier 3	X	X	X	
MAVENCLAD PAK 10MG(6)	CLADRIBINE TAB THERAPY PACK 10 MG (6 TABS)	Tier 3	X	X	X	
MAVENCLAD PAK 10MG(7)	CLADRIBINE TAB THERAPY PACK 10 MG (7 TABS)	Tier 3	X	X	X	
MAVENCLAD PAK 10MG(8)	CLADRIBINE TAB THERAPY PACK 10 MG (8 TABS)	Tier 3	X	X	X	
MAVENCLAD PAK 10MG(9)	CLADRIBINE TAB THERAPY PACK 10 MG (9 TABS)	Tier 3	X	X	X	
Multiple Sclerosis Agents - Multiple Sclerosis Drugs						
AVONEX PEN KIT 30MCG	INTERFERON BETA-1A IM AUTO-INJECTOR KIT 30 MCG/0.5ML	Tier 2	X	X		
AVONEX PREFL KIT 30MCG	INTERFERON BETA-1A IM PREFILLED SYRINGE KIT 30 MCG/0.5ML	Tier 2	X	X		
BAFIERTAM CAP 95MG	MONOMETHYL FUMARATE CAPSULE DELAYED RELEASE 95 MG	Tier 2	X	X		
BETASERON INJ 0.3MG	INTERFERON BETA-1B FOR INJ KIT 0.3 MG	Tier 2	X	X		
DALFAMPRIDIN TAB 10MG ER	DALFAMPRIDINE TAB ER 12HR 10 MG	Tier 1	X	X		
DIMETHYL FUM CAP 120MG DR	DIMETHYL FUMARATE CAPSULE DELAYED RELEASE 120 MG	Tier 1	X	X		
DIMETHYL FUM CAP 240MG DR	DIMETHYL FUMARATE CAPSULE DELAYED RELEASE 240 MG	Tier 1	X	X		
DIMETHYL FUM CAP STARTER	DIMETHYL FUMARATE CAPSULE DR STARTER PACK 120 MG & 240 MG	Tier 1	X	X		
FINGOLIMOD CAP 0.5MG	FINGOLIMOD HCL CAP 0.5 MG (BASE EQUIV)	Tier 1	X	X		
GILENYA CAP 0.25MG	FINGOLIMOD HCL CAP 0.25 MG (BASE EQUIV)	Tier 3/4	X	X		
GLATIRAMER INJ 20MG/ML	GLATIRAMER ACETATE SOLN PREFILLED SYRINGE 20 MG/ML	Tier 1	X	X		
GLATIRAMER INJ 40MG/ML	GLATIRAMER ACETATE SOLN PREFILLED SYRINGE 40 MG/ML	Tier 1	X	X		

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GLATOPA INJ 20MG/ML	GLATIRAMER ACETATE SOLN PREFILLED SYRINGE 20 MG/ML	Tier 1	X	X		
GLATOPA INJ 40MG/ML	GLATIRAMER ACETATE SOLN PREFILLED SYRINGE 40 MG/ML	Tier 1	X	X		
KESIMPTA INJ 20/.4ML	OFATUMUMAB SOLN AUTO-INJECTOR 20 MG/0.4ML	Tier 2	X	X		
MAYZENT PAK STARTER	SIPONIMOD FUMARATE TAB 0.25 MG (12) STARTER PACK	Tier 3	X	X		
MAYZENT PAK STARTER	SIPONIMOD FUMARATE TAB 0.25 MG (7) STARTER PACK	Tier 3	X	X		
MAYZENT TAB 0.25MG	SIPONIMOD FUMARATE TAB 0.25 MG (BASE EQUIV)	Tier 3	X	X		
MAYZENT TAB 1MG	SIPONIMOD FUMARATE TAB 1 MG (BASE EQUIV)	Tier 3	X	X		
MAYZENT TAB 2MG	SIPONIMOD FUMARATE TAB 2 MG (BASE EQUIV)	Tier 3	X	X		
PLEGRIDY INJ	PEGINTERFERON BETA-1A SOLN PREFILLED SYRINGE 125 MCG/0.5ML	Tier 3	X	X		
PLEGRIDY INJ	PEGINTERFERON BETA-1A IM SOLN PREFILLED SYR 125 MCG/0.5ML	Tier 3	X	X		
PLEGRIDY INJ PEN	PEGINTERFERON BETA-1A SOLN AUTO-INJECTOR 125 MCG/0.5ML	Tier 3	X	X		
PLEGRIDY INJ STARTER	PEGINTERFERON BETA-1A SOLN PREF SYR 63 & 94 MCG/0.5ML PACK	Tier 3	X	X		
PLEGRIDY PEN INJ STARTER	PEGINTERFERON BETA-1A SOLN AUTO-INJ 63 & 94 MCG/0.5ML PACK	Tier 3	X	X		
TERIFLUNOMID TAB 14MG	TERIFLUNOMIDE TAB 14 MG	Tier 1	X	X		
TERIFLUNOMID TAB 7MG	TERIFLUNOMIDE TAB 7 MG	Tier 1	X	X		
ZEPOSIA CAP 0.92MG	OZANIMOD HCL CAP 0.92 MG	Tier 3	X	X	X	
ZEPOSIA CAP STR KIT	OZANIMOD CAP PACK 4 X 0.23 MG & 3 X 0.46 MG & 21 X 0.92 MG	Tier 3	X	X	X	
ZEPOSIA 7DAY CAP STR PACK	OZANIMOD CAP PACK 4 X 0.23 MG & 3 X 0.46 MG	Tier 3	X	X	X	
N-methyl-D-aspartate (NMDA) Receptor Antagonist - Alzheimer's Disease and Dementia Drugs						
MEMANT TITRA PAK 5-10MG	MEMANTINE HCL TAB 28 X 5 MG & 21 X 10 MG TITRATION PACK	Tier 1				
MEMANTINE SOL 2MG/ML	MEMANTINE HCL ORAL SOLUTION 2 MG/ML	Tier 1				
MEMANTINE TAB HCL 10MG	MEMANTINE HCL TAB 10 MG	Tier 1				
MEMANTINE TAB HCL 5MG	MEMANTINE HCL TAB 5 MG	Tier 1				
MEMANTINE HC CAP 14MG ER	MEMANTINE HCL CAP ER 24HR 14 MG	Tier 1				
MEMANTINE HC CAP 21MG ER	MEMANTINE HCL CAP ER 24HR 21 MG	Tier 1				
MEMANTINE HC CAP 28MG ER	MEMANTINE HCL CAP ER 24HR 28 MG	Tier 1				
MEMANTINE HC CAP 7MG ER	MEMANTINE HCL CAP ER 24HR 7 MG	Tier 1				

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MEMANTINE HC SOL 2MG/ML	MEMANTINE HCL ORAL SOLUTION 2 MG/ML	Tier 1				
Nonsteroidal Anti-Inflammatory Drugs - Pain/Anti-Inflammatory Drugs						
ASPIRIN CHW 81MG	ASPIRIN CHEW TAB 81 MG	HCR				
ASPIRIN TAB 81MG	ASPIRIN TAB DELAYED RELEASE 81 MG	HCR				
ASPIRIN TAB 81MG EC	ASPIRIN TAB DELAYED RELEASE 81 MG	HCR				
ASPIRIN 81 TAB 81MG EC	ASPIRIN TAB DELAYED RELEASE 81 MG	HCR				
ASPIRIN ADLT TAB 81MG	ASPIRIN TAB DELAYED RELEASE 81 MG	HCR				
ASPIRIN ADLT TAB 81MG EC	ASPIRIN TAB DELAYED RELEASE 81 MG	HCR				
ASPIRIN CHLD CHW 81MG	ASPIRIN CHEW TAB 81 MG	HCR				
ASPIRIN EC TAB 81MG	ASPIRIN TAB DELAYED RELEASE 81 MG	HCR				
ASPIRIN LOW CHW 81MG	ASPIRIN CHEW TAB 81 MG	HCR				
ASPIRIN LOW TAB 81MG	ASPIRIN TAB DELAYED RELEASE 81 MG	HCR				
ASPIRIN LOW TAB 81MG EC	ASPIRIN TAB DELAYED RELEASE 81 MG	HCR				
ASPIRIN REGI TAB 81MG	ASPIRIN TAB DELAYED RELEASE 81 MG	HCR				
ASPIRIN-81 CHW 81MG	ASPIRIN CHEW TAB 81 MG	HCR				
BAYER LOW CHW 81MG	ASPIRIN CHEW TAB 81 MG	HCR				
CAMBIA POW 50MG	DICLOFENAC POTASSIUM (MIGRAINE) PACKET 50 MG	Tier 3/4				
CELECOXIB CAP 100MG	CELECOXIB CAP 100 MG	Tier 1				
CELECOXIB CAP 200MG	CELECOXIB CAP 200 MG	Tier 1				
CELECOXIB CAP 400MG	CELECOXIB CAP 400 MG	Tier 1				
CELECOXIB CAP 50MG	CELECOXIB CAP 50 MG	Tier 1				
CVS ASPIRIN TAB 81MG EC	ASPIRIN TAB DELAYED RELEASE 81 MG	HCR				
DAYPRO TAB 600MG	OXAPROZIN TAB 600 MG	Tier 3/4				
DICLO/MISOPR TAB 50-0.2MG	DICLOFENAC W/ MISOPROSTOL TAB DELAYED RELEASE 50-0.2 MG	Tier 1				
DICLO/MISOPR TAB 75-0.2MG	DICLOFENAC W/ MISOPROSTOL TAB DELAYED RELEASE 75-0.2 MG	Tier 1				
DICLOFEN POT TAB 50MG	DICLOFENAC POTASSIUM TAB 50 MG	Tier 1				
DICLOFENAC CAP 25MG	DICLOFENAC POTASSIUM CAP 25 MG	Tier 1		X		
DICLOFENAC POW 50MG	DICLOFENAC POTASSIUM (MIGRAINE) PACKET 50 MG	Tier 1				
DICLOFENAC TAB 100MG ER	DICLOFENAC SODIUM TAB ER 24HR 100 MG	Tier 1				
DICLOFENAC TAB 25MG DR	DICLOFENAC SODIUM TAB DELAYED RELEASE 25 MG	Tier 1				
DICLOFENAC TAB 50MG DR	DICLOFENAC SODIUM TAB DELAYED RELEASE 50 MG	Tier 1				
DICLOFENAC TAB 75MG DR	DICLOFENAC SODIUM TAB DELAYED RELEASE 75 MG	Tier 1				
DIFLUNISAL TAB 500MG	DIFLUNISAL TAB 500 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
EC-NAPROSYN TAB 375MG	NAPROXEN TAB EC 375 MG	Tier 3				
EC-NAPROSYN TAB 500MG	NAPROXEN TAB EC 500 MG	Tier 3/4				
EC-NAPROXEN TAB 375MG	NAPROXEN TAB EC 375 MG	Tier 1				
EC-NAPROXEN TAB 500MG	NAPROXEN TAB EC 500 MG	Tier 1				
EQ ASPIRIN CHW 81MG	ASPIRIN CHEW TAB 81 MG	HCR				
EQL ASPIRIN CHW 81MG	ASPIRIN CHEW TAB 81 MG	HCR				
ETODOLAC CAP 200MG	ETODOLAC CAP 200 MG	Tier 1				
ETODOLAC CAP 300MG	ETODOLAC CAP 300 MG	Tier 1				
ETODOLAC TAB 400MG	ETODOLAC TAB 400 MG	Tier 1				
ETODOLAC TAB 500MG	ETODOLAC TAB 500 MG	Tier 1				
ETODOLAC ER TAB 400MG	ETODOLAC TAB ER 24HR 400 MG	Tier 1				
ETODOLAC ER TAB 500MG	ETODOLAC TAB ER 24HR 500 MG	Tier 1				
ETODOLAC ER TAB 600MG	ETODOLAC TAB ER 24HR 600 MG	Tier 1				
FLURBIPROFEN TAB 100MG	FLURBIPROFEN TAB 100 MG	Tier 1				
FLURBIPROFEN TAB 50MG	FLURBIPROFEN TAB 50 MG	Tier 1				
FT ASPIRIN CHW 81MG	ASPIRIN CHEW TAB 81 MG	HCR				
FT ASPIRIN TAB 81MG	ASPIRIN TAB DELAYED RELEASE 81 MG	HCR				
GNP ASPIRIN CHW 81MG	ASPIRIN CHEW TAB 81 MG	HCR				
GNP ASPIRIN TAB 81MG	ASPIRIN TAB DELAYED RELEASE 81 MG	HCR				
GNP ASPIRIN TAB 81MG EC	ASPIRIN TAB DELAYED RELEASE 81 MG	HCR				
GOODSENSE TAB 81MG EC	ASPIRIN TAB DELAYED RELEASE 81 MG	HCR				
IBU TAB 400MG	IBUPROFEN TAB 400 MG	Tier 1				
IBU TAB 600MG	IBUPROFEN TAB 600 MG	Tier 1				
IBU TAB 800MG	IBUPROFEN TAB 800 MG	Tier 1				
IBUPROFEN TAB 200MG	IBUPROFEN TAB 200 MG	Tier 1				
IBUPROFEN TAB 400MG	IBUPROFEN TAB 400 MG	Tier 1				
IBUPROFEN TAB 600MG	IBUPROFEN TAB 600 MG	Tier 1				
IBUPROFEN TAB 800MG	IBUPROFEN TAB 800 MG	Tier 1				
INDOMETHACIN CAP 25MG	INDOMETHACIN CAP 25 MG	Tier 1				
INDOMETHACIN CAP 50MG	INDOMETHACIN CAP 50 MG	Tier 1				
INDOMETHACIN CAP 75MG ER	INDOMETHACIN CAP ER 75 MG	Tier 1				
INDOMETHACIN SUP 50MG	INDOMETHACIN SUPPOS 50 MG	Tier 1	X			
INDOMETHACIN SUS 25MG/5ML	INDOMETHACIN SUSP 25 MG/5ML	Tier 1	X			
KETOROLAC TAB 10MG	KETOROLAC TROMETHAMINE TAB 10 MG	Tier 1				
KLS ASPIRIN TAB 81MG EC	ASPIRIN TAB DELAYED RELEASE 81 MG	HCR				
KP ASPIRIN TAB 81MG EC	ASPIRIN TAB DELAYED RELEASE 81 MG	HCR				
LURBIPR TAB 100MG	FLURBIPROFEN TAB 100 MG	Tier 3				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
LURBIRO TAB 100MG	FLURBIPROFEN TAB 100 MG	Tier 3				
MECLOFEN SOD CAP 100MG	MECLOFENAMATE SODIUM CAP 100 MG	Tier 1				
MECLOFEN SOD CAP 50MG	MECLOFENAMATE SODIUM CAP 50 MG	Tier 1				
MEFENAM ACID CAP 250MG	MEFENAMIC ACID CAP 250 MG	Tier 1				
MELOXICAM SUS 7.5/5ML	MELOXICAM SUSP 7.5 MG/5ML	Tier 3/4	X			
MELOXICAM TAB 15MG	MELOXICAM TAB 15 MG	Tier 1				
MELOXICAM TAB 7.5MG	MELOXICAM TAB 7.5 MG	Tier 1				
MM ASPIRIN TAB LOW DOSE	ASPIRIN TAB DELAYED RELEASE 81 MG	HCR				
NABUMETONE TAB 500MG	NABUMETONE TAB 500 MG	Tier 1				
NABUMETONE TAB 750MG	NABUMETONE TAB 750 MG	Tier 1				
NAPROXEN TAB 250MG	NAPROXEN TAB 250 MG	Tier 1				
NAPROXEN TAB 375MG	NAPROXEN TAB 375 MG	Tier 1				
NAPROXEN TAB 500MG	NAPROXEN TAB 500 MG	Tier 1				
NAPROXEN DR TAB 375MG	NAPROXEN TAB EC 375 MG	Tier 1				
NAPROXEN DR TAB 500MG	NAPROXEN TAB EC 500 MG	Tier 1				
NAPROXEN SOD TAB 275MG	NAPROXEN SODIUM TAB 275 MG	Tier 1				
NAPROXEN SOD TAB 375MG CR	NAPROXEN SODIUM TAB ER 24HR 375 MG (BASE EQUIV)	Tier 1				
NAPROXEN SOD TAB 375MG ER	NAPROXEN SODIUM TAB ER 24HR 375 MG (BASE EQUIV)	Tier 1				
NAPROXEN SOD TAB 500MG CR	NAPROXEN SODIUM TAB ER 24HR 500 MG (BASE EQUIV)	Tier 1				
NAPROXEN SOD TAB 500MG ER	NAPROXEN SODIUM TAB ER 24HR 500 MG (BASE EQUIV)	Tier 1				
NAPROXEN SOD TAB 550MG	NAPROXEN SODIUM TAB 550 MG	Tier 1				
NAPROXEN SOD TAB 750MG CR	NAPROXEN SODIUM TAB ER 24HR 750 MG (BASE EQUIV)	Tier 1				
NAPROXEN SOD TAB 750MG ER	NAPROXEN SODIUM TAB ER 24HR 750 MG (BASE EQUIV)	Tier 1				
OXAPROZIN TAB 600MG	OXAPROZIN TAB 600 MG	Tier 1				
PIROXICAM CAP 10MG	PIROXICAM CAP 10 MG	Tier 1				
PIROXICAM CAP 20MG	PIROXICAM CAP 20 MG	Tier 1				
QC ASPIRIN CHW 81MG	ASPIRIN CHEW TAB 81 MG	HCR				
QC CHILD ASA CHW 81MG	ASPIRIN CHEW TAB 81 MG	HCR				
RA ASPIRIN CHW 81MG	ASPIRIN CHEW TAB 81 MG	HCR				
RA ASPIRIN TAB 81MG EC	ASPIRIN TAB DELAYED RELEASE 81 MG	HCR				
SALSALATE TAB 500MG	SALSALATE TAB 500 MG	Tier 1				
SALSALATE TAB 750MG	SALSALATE TAB 750 MG	Tier 1				
SM ASPIRIN CHW 81MG	ASPIRIN CHEW TAB 81 MG	HCR				
SM ASPIRIN TAB 81MG EC	ASPIRIN TAB DELAYED RELEASE 81 MG	HCR				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
SM CHILD ASA CHW 81MG	ASPIRIN CHEW TAB 81 MG	HCR				
SPRIX SPR 15.75MG	KETOROLAC TROMETHAMINE NASAL SPRAY 15.75 MG/SPRAY	Tier 3/4			X	
ST JOSEPH CHW LOW 81MG	ASPIRIN CHEW TAB 81 MG	HCR				
ST JOSEPH TAB LOW 81MG	ASPIRIN TAB DELAYED RELEASE 81 MG	HCR				
SULINDAC TAB 150MG	SULINDAC TAB 150 MG	Tier 1				
SULINDAC TAB 200MG	SULINDAC TAB 200 MG	Tier 1				
ZIPSOR CAP 25MG	DICLOFENAC POTASSIUM CAP 25 MG	Tier 3/4		X		
Ophthalmic Agents, Other - Miscellaneous Eye Drugs						
AKTEN GEL 3.5% OP	LIDOCAINE HCL OPHTH GEL 3.5%	Tier 3				
ALCAINE SOL 0.5% OP	PROPARACAINE HCL OPHTH SOLN 0.5%	Tier 3				
ALTACAINE SOL 0.5% OP	TETRACAINE HCL OPHTH SOLN 0.5%	Tier 3				
ALTAFRIN SOL 10% OP	PHENYLEPHRINE HCL OPHTH SOLN 10%	Tier 1				
ALTAFRIN SOL 2.5% OP	PHENYLEPHRINE HCL OPHTH SOLN 2.5%	Tier 1				
ATROPINE SUL OIN 1% OP	ATROPINE SULFATE OPHTH OINT 1%	Tier 1				
ATROPINE SUL SOL 1% OP	ATROPINE SULFATE OPHTH SOLN 1%	Tier 1				
BACIT/POLYMY OIN OP	BACITRACIN-POLYMYXIN B OPHTH OINT	Tier 1				
CYCLOGYL SOL 0.5% OP	CYCLOPENTOLATE HCL OPHTH SOLN 0.5%	Tier 3/4				
CYCLOGYL SOL 1% OP	CYCLOPENTOLATE HCL OPHTH SOLN 1%	Tier 3/4				
CYCLOGYL SOL 2% OP	CYCLOPENTOLATE HCL OPHTH SOLN 2%	Tier 3/4				
CYCLOPENTOL SOL 1% OP	CYCLOPENTOLATE HCL OPHTH SOLN 1%	Tier 1				
CYSTADROPS SOL 0.37%	CYSTEAMINE HCL OPHTH SOLN 0.37% (BASE EQUIVALENT)	Tier 3/4	X	X		
CYSTARAN SOL 0.44%	CYSTEAMINE HCL OPHTH SOLN 0.44% (BASE EQUIVALENT)	Tier 2	X	X		
GELFILM MIS OP	GELATIN ADSORBABLE OPHTH FILM	Tier 2				
LACRISERT MIS 5MG OP	*ARTIFICIAL TEAR OPHTH INSERT***	Tier 2				
MIEBO DRO 1.3GM/ML	PERFLUOROHEXYLOCTANE OPHTH SOLN 1.338 GM/ML	Tier 3/4	X	X		
NEO-POLYCIN OIN OP	NEOMYCIN-BACITRAC ZN-POLYMYX 5(3.5) MG-400UNT-10000UNT OP OIN	Tier 3				
NEO/BAC/POLY OIN OP	NEOMYCIN-BACITRAC ZN-POLYMYX 5(3.5) MG-400UNT-10000UNT OP OIN	Tier 1				
NEO/POLY/BAC OIN OP	NEOMYCIN-BACITRAC ZN-POLYMYX 5(3.5) MG-400UNT-10000UNT OP OIN	Tier 1				
NEO/POLY/GRA SOL OP	NEOMYCIN-POLYMY-GRAMICID OP SOL 1.75-10000-0.025MG-UNT-MG/ML	Tier 1				
OXERVATE SOL 20MCG/ML	CENEGERMIN-BKBJ OPHTH SOLN 0.002% (20 MCG/ML)	Tier 3/4	X	X		
PHENYLEPHRIN SOL 10% OP	PHENYLEPHRINE HCL OPHTH SOLN 10%	Tier 1				
PHENYLEPHRIN SOL 2.5% OP	PHENYLEPHRINE HCL OPHTH SOLN 2.5%	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
POLYCIN OIN OP	BACITRACIN-POLYMYXIN B OPTH OINT	Tier 3				
POLYMYXIN B/ SOL TRIMETHP	POLYMYXIN B-TRIMETHOPRIM OPTH SOLN 10000 UNIT/ML-0.1%	Tier 1				
PROPARACAINE SOL 0.5% OP	PROPARACAINE HCL OPTH SOLN 0.5%	Tier 1				
RESTASIS EMU 0.05% OP	CYCLOSPORINE (OPHTH) EMULSION 0.05%	Tier 1	X			
RESTASIS MUL EMU 0.05% OP	CYCLOSPORINE (OPHTH) EMULSION 0.05%	Tier 3/4	X	X		
RHOPRESSA SOL 0.02%	NETARSUDIL DIMESYLATE OPTH SOLN 0.02%	Tier 3				
ROCKLATAN DRO	NETARSUDIL DIMESYLATE-LATANOPROST OPTH SOLN 0.02-0.005%	Tier 3				
TETRACAINE SOL 0.5% OP	TETRACAINE HCL OPTH SOLN 0.5%	Tier 1				
TOBRA/DEXAME SUS 0.3-0.1%	TOBRAMYCIN-DEXAMETHASONE OPTH SUSP 0.3-0.1%	Tier 1				
TOBRADEX ST SUS 0.3-0.05	TOBRAMYCIN-DEXAMETHASONE OPTH SUSP 0.3-0.05%	Tier 3/4				
VERKAZIA EMU 0.1% OP	CYCLOSPORINE (OPHTH) EMULSION 0.1%	Tier 3/4	X	X		
XIIDRA DRO 5%	LIFITEGRAST OPTH SOLN 5%	Tier 2	X			
Ophthalmic Anti-allergy Agents - Allergy, Infection and Inflammation Drugs						
ALOCRIL SOL 2%	NEDOCROMIL SODIUM OPTH SOLN 2%	Tier 3				
AZELASTINE DRO 0.05%	AZELASTINE HCL OPTH SOLN 0.05%	Tier 1				
BEPOTASTINE DRO 1.5% OP	BEPOTASTINE BESILATE OPTH SOLN 1.5%	Tier 1				
CROMOLYN SOD SOL 4% OP	CROMOLYN SODIUM OPTH SOLN 4%	Tier 1				
CYCLOMYDRIL SOL OP	CYCLOPENTOLATE W/ PHENYLEPHRINE OPTH SOLN 0.2-1%	Tier 3				
EPINASTINE DRO 0.05%	EPINASTINE HCL OPTH SOLN 0.05%	Tier 1				
UPNEEQ SOL 0.1%	OXYMETAZOLINE HCL OPTH SOLN 0.1%	Tier 3/4	X			
Ophthalmic Anti-inflammatories						
CLOBETASOL SUS 0.05%	CLOBETASOL PROPIONATE OPTH SUSP 0.05%	Tier 3/4				
Ophthalmic Anti-Inflammatories - Allergy, Infection and Inflammation Drugs						
ACULAR SOL 0.5% OP	KETOROLAC TROMETHAMINE OPTH SOLN 0.5%	Tier 3/4				
ACULAR LS SOL 0.4% OP	KETOROLAC TROMETHAMINE OPTH SOLN 0.4%	Tier 3/4				
ACUVAIL SOL 0.45% OP	KETOROLAC TROMETHAMINE (PF) OPTH SOLN 0.45%	Tier 3/4				
ALOMIDE SOL 0.1% OP	LODOXAMIDE TROMETHAMINE OPTH SOLN 0.1%	Tier 3				
ALREX SUS 0.2%	LOTEPREDNOL ETABONATE OPTH SUSP 0.2%	Tier 3/4				
BROMFENAC DRO 0.07% OP	BROMFENAC SODIUM OPTH SOLN 0.07% (BASE EQUIVALENT)	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
BROMFENAC DRO 0.075%OP	BROMFENAC SODIUM OPHTH SOLN 0.075% (BASE EQUIVALENT)	Tier 1				
BROMFENAC DRO 0.09% OP	BROMFENAC SODIUM OPHTH SOLN 0.09% (BASE EQUIV) (ONCE-DAILY)	Tier 1				
BROMSITE DRO 0.075%OP	BROMFENAC SODIUM OPHTH SOLN 0.075% (BASE EQUIVALENT)	Tier 3/4				
DEXAMETH PHO SOL 0.1% OP	DEXAMETHASONE SODIUM PHOSPHATE OPHTH SOLN 0.1%	Tier 1				
DICLOFENAC SOL 0.1% OP	DICLOFENAC SODIUM OPHTH SOLN 0.1%	Tier 1				
DIFLUPREDNAT EMU 0.05%	DIFLUPREDNATE OPHTH EMULSION 0.05%	Tier 1				
EYSUVIS DRO 0.25%	LOTEPREDNOL ETABONATE OPHTH SUSP 0.25%	Tier 2				
FLAREX SUS 0.1% OP	FLUOROMETHOLONE ACETATE OPHTH SUSP 0.1%	Tier 2				
FLUOROMETHOL SUS 0.1% OP	FLUOROMETHOLONE OPHTH SUSP 0.1%	Tier 1				
FLURBIPROFEN SOL 0.03% OP	FLURBIPROFEN SODIUM OPHTH SOLN 0.03%	Tier 1				
FML FORTE SUS 0.25% OP	FLUOROMETHOLONE OPHTH SUSP 0.25%	Tier 3				
FML LIQUIFLM SUS 0.1% OP	FLUOROMETHOLONE OPHTH SUSP 0.1%	Tier 3/4				
ILEVRO DRO 0.3% OP	NEPAFENAC OPHTH SUSP 0.3%	Tier 3/4				
INVELTYS SUS 1%	LOTEPREDNOL ETABONATE OPHTH SUSP 1%	Tier 3				
KETOROLAC SOL 0.4% OP	KETOROLAC TROMETHAMINE OPHTH SOLN 0.4%	Tier 1				
KETOROLAC SOL 0.5% OP	KETOROLAC TROMETHAMINE OPHTH SOLN 0.5%	Tier 1				
LOTEMAX GEL 0.5%	LOTEPREDNOL ETABONATE OPHTH GEL 0.5%	Tier 3/4				
LOTEMAX OIN 0.5%	LOTEPREDNOL ETABONATE OPHTH OINT 0.5%	Tier 3				
LOTEMAX SM GEL 0.38%	LOTEPREDNOL ETABONATE OPHTH GEL 0.38%	Tier 3				
LOTEPR/TOBRA SUS 0.5-0.3%	LOTEPREDNOL ETABONATE-TOBRAMYCIN OPHTH SUSP 0.5-0.3%	Tier 1				
LOTEPREDNOL GEL 0.5%	LOTEPREDNOL ETABONATE OPHTH GEL 0.5%	Tier 1				
LOTEPREDNOL GEL 0.5% OP	LOTEPREDNOL ETABONATE OPHTH GEL 0.5%	Tier 1				
LOTEPREDNOL SUS 0.2%	LOTEPREDNOL ETABONATE OPHTH SUSP 0.2%	Tier 1				
LOTEPREDNOL SUS 0.5%	LOTEPREDNOL ETABONATE OPHTH SUSP 0.5%	Tier 1				
MAXIDEX SUS 0.1% OP	DEXAMETHASONE OPHTH SUSP 0.1%	Tier 2				
MAXITROL OIN 0.1% OP	NEOMYCIN-POLYMYXIN-DEXAMETHASONE OPHTH OINT 0.1%	Tier 3/4				
MAXITROL SUS 0.1% OP	NEOMYCIN-POLYMYXIN-DEXAMETHASONE OPHTH SUSP 0.1%	Tier 3/4				
MITOSOL KIT 0.2MG	MITOMYCIN FOR OPHTH SOLN KIT 0.2 MG	Tier 3				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
NEO-POLYCIN OIN HC 1%OP	BACITRACIN-POLYMYXIN-NEOMYCIN-HC OPTH OINT 1%	Tier 3				
NEO/POLY/BAC OIN /HC 1%OP	BACITRACIN-POLYMYXIN-NEOMYCIN-HC OPTH OINT 1%	Tier 1				
NEO/POLY/DEX OIN 0.1% OP	NEOMYCIN-POLYMYXIN-DEXAMETHASONE OPTH OINT 0.1%	Tier 1				
NEO/POLY/DEX SUS 0.1% OP	NEOMYCIN-POLYMYXIN-DEXAMETHASONE OPTH SUSP 0.1%	Tier 1				
NEO/POLY/HC SUS OP	NEOMYCIN-POLYMYXIN-HC OPTH SUSP	Tier 1				
NEVANAC SUS 0.1% OP	NEPAFENAC OPTH SUSP 0.1%	Tier 3/4				
PRED MILD SUS 0.12% OP	PREDNISOLONE ACETATE OPTH SUSP 0.12%	Tier 3				
PRED SOD PHO SOL 1% OP	PREDNISOLONE SODIUM PHOSPHATE OPTH SOLN 1%	Tier 1				
PREDNISOLONE SUS 1% OP	PREDNISOLONE ACETATE OPTH SUSP 1%	Tier 1				
PROLENSA DRO 0.07% OP	BROMFENAC SODIUM OPTH SOLN 0.07% (BASE EQUIVALENT)	Tier 3/4				
SULF/PRED NA SOL OP	SULFACETAMIDE SODIUM-PREDNISOLONE OPTH SOLN 10-0.23(0.25)%	Tier 1				
ZYLET SUS 0.5-0.3%	LOTEPREDNOL ETABONATE-TOBRAMYCIN OPTH SUSP 0.5-0.3%	Tier 3				
Ophthalmic Antibiotics - Drugs to treat Eye Infections						
AZASITE SOL 1%	AZITHROMYCIN OPTH SOLN 1%	Tier 3				
BACITRACIN OIN OP	BACITRACIN OPTH OINT 500 UNIT/GM	Tier 1				
BESIVANCE SUS 0.6%	BESIFLOXACIN HCL OPTH SUSP 0.6% (BASE EQUIV)	Tier 3				
BETADINE SOL 5% OP	POVIDONE-IODINE OPTH SOLN 5%	Tier 3				
CILOXAN OIN 0.3% OP	CIPROFLOXACIN HCL OPTH OINT 0.3%	Tier 3				
CIPROFLOXACN SOL 0.3% OP	CIPROFLOXACIN HCL OPTH SOLN 0.3% (BASE EQUIVALENT)	Tier 1				
ERYTHROMYCIN OIN 0.5% OP	ERYTHROMYCIN OPTH OINT 5 MG/GM	Tier 1^				
ERYTHROMYCIN OIN 5MG/GM	ERYTHROMYCIN OPTH OINT 5 MG/GM	Tier 1^				
GATIFLOXACIN SOL 0.5%	GATIFLOXACIN OPTH SOLN 0.5%	Tier 1				
GENTAMICIN SOL 0.3% OP	GENTAMICIN SULFATE OPTH SOLN 0.3%	Tier 1				
LEVOFLOXACIN SOL 0.5%	LEVOFLOXACIN OPTH SOLN 0.5%	Tier 1				
LEVOFLOXACIN SOL 1.5%	LEVOFLOXACIN OPTH SOLN 1.5%	Tier 1				
MOXIFLOXACIN SOL 0.5%	MOXIFLOXACIN HCL OPTH SOLN 0.5% (BASE EQ) (2 TIMES DAILY)	Tier 1				
MOXIFLOXACIN SOL 0.5%	MOXIFLOXACIN HCL OPTH SOLN 0.5% (BASE EQUIV)	Tier 1				
MOXIFLOXACIN SOL HCL 0.5%	MOXIFLOXACIN HCL OPTH SOLN 0.5% (BASE EQUIV)	Tier 1				
OCUFLOX DRO 0.3% OP	OFLOXACIN OPTH SOLN 0.3%	Tier 3/4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
OFLOXACIN DRO 0.3% OP	OFLOXACIN OPHTH SOLN 0.3%	Tier 1				
SULFACET SOD OIN 10% OP	SULFACETAMIDE SODIUM OPHTH OINT 10%	Tier 1				
SULFACET SOD SOL 10% OP	SULFACETAMIDE SODIUM OPHTH SOLN 10%	Tier 1				
TOBRAMYCIN SOL 0.3% OP	TOBRAMYCIN OPHTH SOLN 0.3%	Tier 1				
TOBREX OIN 0.3% OP	TOBRAMYCIN OPHTH OINT 0.3%	Tier 3				
XDEMZY DRO 0.25%	LOTILANER OPHTH SOLN 0.25%	Tier 3/4	X	X		
Ophthalmic Antiglaucoma Agents - Glaucoma Drugs						
ACETAZOLAMID CAP 500MG ER	ACETAZOLAMIDE CAP ER 12HR 500 MG	Tier 1				
ACETAZOLAMID TAB 125MG	ACETAZOLAMIDE TAB 125 MG	Tier 1				
ACETAZOLAMID TAB 250MG	ACETAZOLAMIDE TAB 250 MG	Tier 1				
ALPHAGAN P SOL 0.1% OP	BRIMONIDINE TARTRATE OPHTH SOLN 0.1%	Tier 1				
ALPHAGAN P SOL 0.15% OP	BRIMONIDINE TARTRATE OPHTH SOLN 0.15%	Tier 3/4				
APRACLONIDIN SOL 0.5% OP	APRACLONIDINE HCL OPHTH SOLN 0.5% (BASE EQUIVALENT)	Tier 1				
BETAXOLOL SOL 0.5% OP	BETAXOLOL HCL OPHTH SOLN 0.5%	Tier 1				
BETIMOL SOL 0.25% OP	TIMOLOL OPHTH SOLN 0.25%	Tier 2				
BETIMOL SOL 0.5% OP	TIMOLOL OPHTH SOLN 0.5%	Tier 3/4				
BETOPTIC-S SUS 0.25% OP	BETAXOLOL HCL OPHTH SUSP 0.25%	Tier 3				
BRIMONIDINE SOL 0.15% OP	BRIMONIDINE TARTRATE OPHTH SOLN 0.15%	Tier 1				
BRIMONIDINE SOL 0.2% OP	BRIMONIDINE TARTRATE OPHTH SOLN 0.2%	Tier 1				
BRINZOLAMIDE SUS 1%	BRINZOLAMIDE OPHTH SUSP 1%	Tier 1				
BRINZOLAMIDE SUS 1% OP	BRINZOLAMIDE OPHTH SUSP 1%	Tier 1				
CARTEOLOL SOL 1% OP	CARTEOLOL HCL OPHTH SOLN 1%	Tier 1				
COMBIGAN SOL 0.2/0.5%	BRIMONIDINE TARTRATE-TIMOLOL MALEATE OPHTH SOLN 0.2-0.5%	Tier 1				
COSOPT SOL 2-0.5%OP	DORZOLAMIDE HCL-TIMOLOL MALEATE OPHTH SOLN 2-0.5%	Tier 3/4				
DORZOL/TIMOL SOL 2-0.5%OP	DORZOLAMIDE HCL-TIMOLOL MALEATE OPHTH SOLN 2-0.5%	Tier 1				
DORZOL/TIMOL SOL 2%-0.5%	DORZOLAMIDE HCL-TIMOLOL MALEATE PF OPHTH SOLN 2-0.5%	Tier 1				
DORZOLAMIDE SOL 2% OP	DORZOLAMIDE HCL OPHTH SOLN 2%	Tier 1				
DORZOLAMIDE SOL 2% OP	DORZOLAMIDE HCL OPHTH SOLN 2%	Tier 3/4				
IOPIDINE SOL 1% OP	APRACLONIDINE HCL OPHTH SOLN 1% (BASE EQUIVALENT)	Tier 3				
ISTALOL SOL 0.5% OP	TIMOLOL MALEATE OPHTH SOLN 0.5% (ONCE-DAILY)	Tier 3/4				
LEVOBUNOLOL SOL 0.5% OP	LEVOBUNOLOL HCL OPHTH SOLN 0.5%	Tier 1				
METHAZOLAMID TAB 25MG	METHAZOLAMIDE TAB 25 MG	Tier 1				
METHAZOLAMID TAB 50MG	METHAZOLAMIDE TAB 50 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PHOSPHOLINE SOL 0.125%OP	ECHOTHIOPHATE IODIDE OPTH FOR SOLN 0.125%	Tier 2				
PILOCARPINE SOL 1% OP	PILOCARPINE HCL OPTH SOLN 1%	Tier 1				
PILOCARPINE SOL 2% OP	PILOCARPINE HCL OPTH SOLN 2%	Tier 1				
PILOCARPINE SOL 4% OP	PILOCARPINE HCL OPTH SOLN 4%	Tier 1				
SIMBRINZA SUS 1-0.2%	BRINZOLAMIDE-BRIMONIDINE TARTRATE OPTH SUSP 1-0.2%	Tier 3/4				
TIMOLOL GEL SOL 0.25% OP	TIMOLOL MALEATE OPTH GEL FORMING SOLN 0.25%	Tier 1				
TIMOLOL GEL SOL 0.5% OP	TIMOLOL MALEATE OPTH GEL FORMING SOLN 0.5%	Tier 1				
TIMOLOL HEMI SOL 0.5% OP	TIMOLOL OPTH SOLN 0.5%	Tier 1				
TIMOLOL MAL SOL 0.25% OP	TIMOLOL MALEATE PRESERVATIVE FREE OPTH SOLN 0.25%	Tier 1				
TIMOLOL MAL SOL 0.25% OP	TIMOLOL MALEATE OPTH SOLN 0.25%	Tier 1				
TIMOLOL MAL SOL 0.5% OP	TIMOLOL MALEATE PRESERVATIVE FREE OPTH SOLN 0.5%	Tier 1				
TIMOLOL MAL SOL 0.5% OP	TIMOLOL MALEATE OPTH SOLN 0.5%	Tier 1				
TIMOLOL MALE SOL 0.5%	TIMOLOL MALEATE OPTH SOLN 0.5% (ONCE-DAILY)	Tier 1				
TIMOLOL MALE SOL 0.5% OP	TIMOLOL MALEATE OPTH SOLN 0.5% (ONCE-DAILY)	Tier 1				
TIMOPTIC OCU SOL 0.25% OP	TIMOLOL MALEATE PRESERVATIVE FREE OPTH SOLN 0.25%	Tier 3/4				
TIMOPTIC OCU SOL 0.5% OP	TIMOLOL MALEATE PRESERVATIVE FREE OPTH SOLN 0.5%	Tier 3/4				
Ophthalmic Antivirals - Drugs to treat Eye Infections						
NATACYN SUS 5% OP	NATAMYCIN OPTH SUSP 5%	Tier 3				
TRIFLURIDINE SOL 1% OP	TRIFLURIDINE OPTH SOLN 1%	Tier 1				
ZIRGAN GEL 0.15%	GANCICLOVIR OPTH GEL 0.15%	Tier 3				
Ophthalmic Prostaglandin and Prostanoid Analogs - Glaucoma Drugs						
BIMATOPROST SOL 0.01%	BIMATOPROST OPTH SOLN 0.01%	Tier 2				
BIMATOPROST SOL 0.03% OP	BIMATOPROST OPTH SOLN 0.03%	Tier 1				
IYUZEH DRO 0.005%	LATANOPROST (PF) OPTH SOLN 0.005%	Tier 3/4				
LATANOPROST SOL 0.005%	LATANOPROST OPTH SOLN 0.005%	Tier 1				
LATANOPROST SOL 0.005%	LATANOPROST OPTH SOLN 0.005%	Tier 3/4				
LUMIGAN SOL 0.01% OP	BIMATOPROST OPTH SOLN 0.01%	Tier 2				
TAFLUPROST SOL 0.0015%	TAFLUPROST PRESERVATIVE FREE (PF) OPTH SOLN 0.0015%	Tier 1			X	
TRAVOPROST DRO 0.004%	TRAVOPROST OPTH SOLN 0.004% (BENZALKONIUM FREE) (BAK FREE)	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
VYZULTA SOL 0.024%	LATANOPROSTENE BUNOD OPTH SOLN 0.024%	Tier 3/4			X	
XELPROS EMU 0.005%	LATANOPROST OPTH EMULSION 0.005%	Tier 3				
ZIOPTAN DRO 0.0015%	TAFLUPROST PRESERVATIVE FREE (PF) OPTH SOLN 0.0015%	Tier 3			X	
Opioid Analgesics, Long-acting - Opioid Pain Relievers						
BELBUCA MIS 150MCG	BUPRENORPHINE HCL BUCCAL FILM 150 MCG (BASE EQUIVALENT)	Tier 3	X	X		
BELBUCA MIS 300MCG	BUPRENORPHINE HCL BUCCAL FILM 300 MCG (BASE EQUIVALENT)	Tier 3	X	X		
BELBUCA MIS 450MCG	BUPRENORPHINE HCL BUCCAL FILM 450 MCG (BASE EQUIVALENT)	Tier 3	X	X		
BELBUCA MIS 600MCG	BUPRENORPHINE HCL BUCCAL FILM 600 MCG (BASE EQUIVALENT)	Tier 3	X	X		
BELBUCA MIS 750MCG	BUPRENORPHINE HCL BUCCAL FILM 750 MCG (BASE EQUIVALENT)	Tier 3	X	X		
BELBUCA MIS 75MCG	BUPRENORPHINE HCL BUCCAL FILM 75 MCG (BASE EQUIVALENT)	Tier 3	X	X		
BELBUCA MIS 900MCG	BUPRENORPHINE HCL BUCCAL FILM 900 MCG (BASE EQUIVALENT)	Tier 3	X	X		
BUPRENORPHIN DIS 10MCG/HR	BUPRENORPHINE TD PATCH WEEKLY 10 MCG/HR	Tier 1	X	X		
BUPRENORPHIN DIS 15MCG/HR	BUPRENORPHINE TD PATCH WEEKLY 15 MCG/HR	Tier 1	X	X		
BUPRENORPHIN DIS 20MCG/HR	BUPRENORPHINE TD PATCH WEEKLY 20 MCG/HR	Tier 1	X	X		
BUPRENORPHIN DIS 5MCG/HR	BUPRENORPHINE TD PATCH WEEKLY 5 MCG/HR	Tier 1	X	X		
BUPRENORPHIN DIS 7.5/HR	BUPRENORPHINE TD PATCH WEEKLY 7.5 MCG/HR	Tier 1	X	X		
CONZIP CAP 100MG	TRAMADOL HCL CAP ER 24HR BIPHASIC RELEASE 100 MG	Tier 3/4		X		
CONZIP CAP 200MG	TRAMADOL HCL CAP ER 24HR BIPHASIC RELEASE 200 MG	Tier 3/4		X		
CONZIP CAP 300MG	TRAMADOL HCL CAP ER 24HR BIPHASIC RELEASE 300 MG	Tier 3/4		X		
DISKETS TAB 40MG	METHADONE HCL TAB FOR ORAL SUSP 40 MG	Tier 1		X		
FENTANYL DIS 100MCG/HR	FENTANYL TD PATCH 72HR 100 MCG/HR	Tier 1	X	X		
FENTANYL DIS 12MCG/HR	FENTANYL TD PATCH 72HR 12 MCG/HR	Tier 1	X	X		
FENTANYL DIS 25MCG/HR	FENTANYL TD PATCH 72HR 25 MCG/HR	Tier 1	X	X		
FENTANYL DIS 37.5MCG	FENTANYL TD PATCH 72HR 37.5 MCG/HR	Tier 1	X	X		
FENTANYL DIS 50MCG/HR	FENTANYL TD PATCH 72HR 50 MCG/HR	Tier 1	X	X		
FENTANYL DIS 62.5MCG	FENTANYL TD PATCH 72HR 62.5 MCG/HR	Tier 1	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
FENTANYL DIS 75MCG/HR	FENTANYL TD PATCH 72HR 75 MCG/HR	Tier 1	X	X		
FENTANYL DIS 87.5MCG	FENTANYL TD PATCH 72HR 87.5 MCG/HR	Tier 1	X	X		
HYDROCODONE CAP 10MG ER	HYDROCODONE BITARTRATE CAP ER 12HR 10 MG	Tier 1	X	X		
HYDROCODONE CAP 15MG ER	HYDROCODONE BITARTRATE CAP ER 12HR 15 MG	Tier 1	X	X		
HYDROCODONE CAP 20MG ER	HYDROCODONE BITARTRATE CAP ER 12HR 20 MG	Tier 1	X	X		
HYDROCODONE CAP 30MG ER	HYDROCODONE BITARTRATE CAP ER 12HR 30 MG	Tier 1	X	X		
HYDROCODONE CAP 40MG ER	HYDROCODONE BITARTRATE CAP ER 12HR 40 MG	Tier 1	X	X		
HYDROCODONE CAP 50MG ER	HYDROCODONE BITARTRATE CAP ER 12HR 50 MG	Tier 1	X	X		
HYDROCODONE TAB 100MG ER	HYDROCODONE BITARTRATE TAB ER 24HR DETER 100 MG	Tier 1	X	X		
HYDROCODONE TAB 120MG ER	HYDROCODONE BITARTRATE TAB ER 24HR DETER 120 MG	Tier 1	X	X		
HYDROCODONE TAB 20MG ER	HYDROCODONE BITARTRATE TAB ER 24HR DETER 20 MG	Tier 1	X	X		
HYDROCODONE TAB 30MG ER	HYDROCODONE BITARTRATE TAB ER 24HR DETER 30 MG	Tier 1	X	X		
HYDROCODONE TAB 40MG ER	HYDROCODONE BITARTRATE TAB ER 24HR DETER 40 MG	Tier 1	X	X		
HYDROCODONE TAB 60MG ER	HYDROCODONE BITARTRATE TAB ER 24HR DETER 60 MG	Tier 1	X	X		
HYDROCODONE TAB 80MG ER	HYDROCODONE BITARTRATE TAB ER 24HR DETER 80 MG	Tier 1	X	X		
HYDROMORPHON TAB 12MG ER	HYDROMORPHONE HCL TAB ER 24HR 12 MG	Tier 1	X	X		
HYDROMORPHON TAB 16MG ER	HYDROMORPHONE HCL TAB ER 24HR 16 MG	Tier 1	X	X		
HYDROMORPHON TAB 32MG ER	HYDROMORPHONE HCL TAB ER 24HR 32 MG	Tier 1	X	X		
HYDROMORPHON TAB 8MG ER	HYDROMORPHONE HCL TAB ER 24HR 8 MG	Tier 1	X	X		
LEVORPHANOL TAB 2MG	LEVORPHANOL TARTRATE TAB 2 MG	Tier 1		X	X	
LEVORPHANOL TAB 3MG	LEVORPHANOL TARTRATE TAB 3 MG	Tier 1		X	X	
METHADONE CON 10MG/ML	METHADONE HCL CONC 10 MG/ML	Tier 1		X		
METHADONE SOL 10MG/5ML	METHADONE HCL SOLN 10 MG/5ML	Tier 1	X	X		
METHADONE SOL 5MG/5ML	METHADONE HCL SOLN 5 MG/5ML	Tier 1	X	X		
METHADONE TAB 10MG	METHADONE HCL TAB 10 MG	Tier 1	X	X		
METHADONE TAB 40MG	METHADONE HCL TAB FOR ORAL SUSP 40 MG	Tier 1		X		
METHADONE TAB 5MG	METHADONE HCL TAB 5 MG	Tier 1	X	X		
METHADOSE CON 10MG/ML	METHADONE HCL CONC 10 MG/ML	Tier 3		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
METHADOSE TAB 40MG	METHADONE HCL TAB FOR ORAL SUSP 40 MG	Tier 1		X		
METHADOSE SF CON 10MG/ML	METHADONE HCL CONC 10 MG/ML	Tier 3		X		
MORPHINE SUL CAP 100MG ER	MORPHINE SULFATE CAP ER 24HR 100 MG	Tier 1	X	X		
MORPHINE SUL CAP 10MG ER	MORPHINE SULFATE CAP ER 24HR 10 MG	Tier 1	X	X		
MORPHINE SUL CAP 120MG ER	MORPHINE SULFATE BEADS CAP ER 24HR 120 MG	Tier 1	X	X		
MORPHINE SUL CAP 20MG ER	MORPHINE SULFATE CAP ER 24HR 20 MG	Tier 1	X	X		
MORPHINE SUL CAP 30MG ER	MORPHINE SULFATE BEADS CAP ER 24HR 30 MG	Tier 1	X	X		
MORPHINE SUL CAP 30MG ER	MORPHINE SULFATE CAP ER 24HR 30 MG	Tier 1	X	X		
MORPHINE SUL CAP 45MG ER	MORPHINE SULFATE BEADS CAP ER 24HR 45 MG	Tier 1	X	X		
MORPHINE SUL CAP 50MG ER	MORPHINE SULFATE CAP ER 24HR 50 MG	Tier 1	X	X		
MORPHINE SUL CAP 60MG ER	MORPHINE SULFATE BEADS CAP ER 24HR 60 MG	Tier 1	X	X		
MORPHINE SUL CAP 60MG ER	MORPHINE SULFATE CAP ER 24HR 60 MG	Tier 1	X	X		
MORPHINE SUL CAP 75MG ER	MORPHINE SULFATE BEADS CAP ER 24HR 75 MG	Tier 1	X	X		
MORPHINE SUL CAP 80MG ER	MORPHINE SULFATE CAP ER 24HR 80 MG	Tier 1	X	X		
MORPHINE SUL CAP 90MG ER	MORPHINE SULFATE BEADS CAP ER 24HR 90 MG	Tier 1	X	X		
MORPHINE SUL TAB 100MG ER	MORPHINE SULFATE TAB ER 100 MG	Tier 1	X	X		
MORPHINE SUL TAB 15MG ER	MORPHINE SULFATE TAB ER 15 MG	Tier 1	X	X		
MORPHINE SUL TAB 200MG ER	MORPHINE SULFATE TAB ER 200 MG	Tier 1	X	X		
MORPHINE SUL TAB 30MG ER	MORPHINE SULFATE TAB ER 30 MG	Tier 1	X	X		
MORPHINE SUL TAB 60MG ER	MORPHINE SULFATE TAB ER 60 MG	Tier 1	X	X		
NUCYNTA ER TAB 100MG	TAPENTADOL HCL TAB ER 12HR 100 MG	Tier 3	X	X		
NUCYNTA ER TAB 150MG	TAPENTADOL HCL TAB ER 12HR 150 MG	Tier 3	X	X		
NUCYNTA ER TAB 200MG	TAPENTADOL HCL TAB ER 12HR 200 MG	Tier 3	X	X		
NUCYNTA ER TAB 250MG	TAPENTADOL HCL TAB ER 12HR 250 MG	Tier 3	X	X		
NUCYNTA ER TAB 50MG	TAPENTADOL HCL TAB ER 12HR 50 MG	Tier 3	X	X		
OXYMORPHONE TAB 10MG ER	OXYMORPHONE HCL TAB ER 12HR 10 MG	Tier 1	X	X		
OXYMORPHONE TAB 15MG ER	OXYMORPHONE HCL TAB ER 12HR 15 MG	Tier 1	X	X		
OXYMORPHONE TAB 20MG ER	OXYMORPHONE HCL TAB ER 12HR 20 MG	Tier 1	X	X		
OXYMORPHONE TAB 30MG ER	OXYMORPHONE HCL TAB ER 12HR 30 MG	Tier 1	X	X		
OXYMORPHONE TAB 40MG ER	OXYMORPHONE HCL TAB ER 12HR 40 MG	Tier 1	X	X		
OXYMORPHONE TAB 5MG ER	OXYMORPHONE HCL TAB ER 12HR 5 MG	Tier 1	X	X		
OXYMORPHONE TAB 7.5MG ER	OXYMORPHONE HCL TAB ER 12HR 7.5 MG	Tier 1	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
TRAMADOL HCL CAP ER 100MG	TRAMADOL HCL CAP ER 24HR BIPHASIC RELEASE 100 MG	Tier 3/4		X		
TRAMADOL HCL CAP ER 200MG	TRAMADOL HCL CAP ER 24HR BIPHASIC RELEASE 200 MG	Tier 3/4		X		
TRAMADOL HCL CAP ER 300MG	TRAMADOL HCL CAP ER 24HR BIPHASIC RELEASE 300 MG	Tier 3/4		X		
TRAMADOL HCL TAB 100MG ER	TRAMADOL HCL TAB ER 24HR 100 MG	Tier 1		X		
TRAMADOL HCL TAB 100MG ER	TRAMADOL HCL TAB ER 24HR BIPHASIC RELEASE 100 MG	Tier 1		X		
TRAMADOL HCL TAB 200MG ER	TRAMADOL HCL TAB ER 24HR 200 MG	Tier 1		X		
TRAMADOL HCL TAB 200MG ER	TRAMADOL HCL TAB ER 24HR BIPHASIC RELEASE 200 MG	Tier 1		X		
TRAMADOL HCL TAB 300MG ER	TRAMADOL HCL TAB ER 24HR 300 MG	Tier 1		X		
TRAMADOL HCL TAB 300MG ER	TRAMADOL HCL TAB ER 24HR BIPHASIC RELEASE 300 MG	Tier 1		X		
XTAMPZA ER CAP 13.5MG	OXYCODONE CAP ER 12HR ABUSE-DETERRENT 13.5 MG	Tier 3/4	X	X		
XTAMPZA ER CAP 18MG	OXYCODONE CAP ER 12HR ABUSE-DETERRENT 18 MG	Tier 3/4	X	X		
XTAMPZA ER CAP 27MG	OXYCODONE CAP ER 12HR ABUSE-DETERRENT 27 MG	Tier 3/4	X	X		
XTAMPZA ER CAP 36MG	OXYCODONE CAP ER 12HR ABUSE-DETERRENT 36 MG	Tier 3/4	X	X		
XTAMPZA ER CAP 9MG	OXYCODONE CAP ER 12HR ABUSE-DETERRENT 9 MG	Tier 3/4	X	X		
XYVONA TAB 2MG	LEVORPHANOL TARTRATE TAB 2 MG	Tier 1		X	X	
XYVONA TAB 3MG	LEVORPHANOL TARTRATE TAB 3 MG	Tier 1		X	X	
Opioid Analgesics, Short-acting - Opioid Pain Relievers						
APAP-CAFFEIN CAP DIHYDROC	ACETAMINOPHEN-CAFFEINE-DIHYDROCODEINE CAP 320.5-30-16 MG	Tier 1				
APAP/CODEINE SOL 120-12/5	ACETAMINOPHEN W/ CODEINE SOLN 120-12 MG/5ML	Tier 1				
APAP/CODEINE TAB 300-15MG	ACETAMINOPHEN W/ CODEINE TAB 300-15 MG	Tier 1				
APAP/CODEINE TAB 300-30MG	ACETAMINOPHEN W/ CODEINE TAB 300-30 MG	Tier 1				
APAP/CODEINE TAB 300-60MG	ACETAMINOPHEN W/ CODEINE TAB 300-60 MG	Tier 1				
ASCOMP/COD CAP 30MG	BUTALBITAL-ASPIRIN-CAFF W/ CODEINE CAP 50-325-40-30 MG	Tier 1				
BUT/APAP/CAF CAP CODEINE	BUTALBITAL-ACETAMINOPHEN-CAFF W/ COD CAP 50-300-40-30 MG	Tier 1				
BUT/APAP/CAF CAP CODEINE	BUTALBITAL-ACETAMINOPHEN-CAFF W/ COD CAP 50-325-40-30 MG	Tier 1		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
BUT/ASA/CAF/ CAP CODEINE	BUTALBITAL-ASPIRIN-CAFF W/ CODEINE CAP 50-325-40-30 MG	Tier 1				
BUTORPHANOL SOL 10MG/ML	BUTORPHANOL TARTRATE NASAL SOLN 10 MG/ML	Tier 1				
CODEINE SULF TAB 15MG	CODEINE SULFATE TAB 15 MG	Tier 1				
CODEINE SULF TAB 30MG	CODEINE SULFATE TAB 30 MG	Tier 1				
CODEINE SULF TAB 60MG	CODEINE SULFATE TAB 60 MG	Tier 1				
ENDOCET TAB 10-325MG	OXYCODONE W/ ACETAMINOPHEN TAB 10-325 MG	Tier 1				
ENDOCET TAB 2.5-325	OXYCODONE W/ ACETAMINOPHEN TAB 2.5-325 MG	Tier 1				
ENDOCET TAB 5-325MG	OXYCODONE W/ ACETAMINOPHEN TAB 5-325 MG	Tier 1				
ENDOCET TAB 7.5-325	OXYCODONE W/ ACETAMINOPHEN TAB 7.5-325 MG	Tier 1				
FENTANYL CIT TAB 200MCG	FENTANYL CITRATE BUCCAL TAB 200 MCG (BASE EQUIV)	Tier 3/4	X	X		
FENTANYL OT LOZ 1200MCG	FENTANYL CITRATE LOZENGE ON A HANDLE 1200 MCG	Tier 1	X	X		
FENTANYL OT LOZ 1600MCG	FENTANYL CITRATE LOZENGE ON A HANDLE 1600 MCG	Tier 1	X	X		
FENTANYL OT LOZ 200MCG	FENTANYL CITRATE LOZENGE ON A HANDLE 200 MCG	Tier 1	X	X		
FENTANYL OT LOZ 400MCG	FENTANYL CITRATE LOZENGE ON A HANDLE 400 MCG	Tier 1	X	X		
FENTANYL OT LOZ 600MCG	FENTANYL CITRATE LOZENGE ON A HANDLE 600 MCG	Tier 1	X	X		
FENTANYL OT LOZ 800MCG	FENTANYL CITRATE LOZENGE ON A HANDLE 800 MCG	Tier 1	X	X		
FENTORA TAB 100MCG	FENTANYL CITRATE BUCCAL TAB 100 MCG (BASE EQUIV)	Tier 3/4	X	X		
FENTORA TAB 200MCG	FENTANYL CITRATE BUCCAL TAB 200 MCG (BASE EQUIV)	Tier 3/4	X	X		
FENTORA TAB 400MCG	FENTANYL CITRATE BUCCAL TAB 400 MCG (BASE EQUIV)	Tier 3/4	X	X		
FENTORA TAB 600MCG	FENTANYL CITRATE BUCCAL TAB 600 MCG (BASE EQUIV)	Tier 3/4	X	X		
FENTORA TAB 800MCG	FENTANYL CITRATE BUCCAL TAB 800 MCG (BASE EQUIV)	Tier 3/4	X	X		
HYDRO/ACETA SOL 10-325MG	HYDROCODONE-ACETAMINOPHEN SOLN 10-325 MG/15ML	Tier 1				
HYDRO/APAP SOL	HYDROCODONE-ACETAMINOPHEN SOLN 10-300 MG/15ML	Tier 1				
HYDROCO/APAP SOL 7.5-325	HYDROCODONE-ACETAMINOPHEN SOLN 7.5-325 MG/15ML	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
HYDROCO/APAP TAB 10-300MG	HYDROCODONE-ACETAMINOPHEN TAB 10-300 MG	Tier 1				
HYDROCO/APAP TAB 10-325MG	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	Tier 1				
HYDROCO/APAP TAB 2.5-325	HYDROCODONE-ACETAMINOPHEN TAB 2.5-325 MG	Tier 1				
HYDROCO/APAP TAB 5-300MG	HYDROCODONE-ACETAMINOPHEN TAB 5-300 MG	Tier 1				
HYDROCO/APAP TAB 5-325MG	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	Tier 1				
HYDROCO/APAP TAB 7.5-300	HYDROCODONE-ACETAMINOPHEN TAB 7.5-300 MG	Tier 1				
HYDROCO/APAP TAB 7.5-325	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	Tier 1				
HYDROCOD/IBU TAB 10-200MG	HYDROCODONE-IBUPROFEN TAB 10-200 MG	Tier 1				
HYDROCOD/IBU TAB 5-200MG	HYDROCODONE-IBUPROFEN TAB 5-200 MG	Tier 1				
HYDROCOD/IBU TAB 7.5-200	HYDROCODONE-IBUPROFEN TAB 7.5-200 MG	Tier 1				
HYDROMORPHON LIQ 1MG/ML	HYDROMORPHONE HCL LIQD 1 MG/ML	Tier 1				
HYDROMORPHON SUP 3MG	HYDROMORPHONE HCL SUPPOS 3 MG	Tier 1				
HYDROMORPHON TAB 2MG	HYDROMORPHONE HCL TAB 2 MG	Tier 1				
HYDROMORPHON TAB 4MG	HYDROMORPHONE HCL TAB 4 MG	Tier 1				
HYDROMORPHON TAB 8MG	HYDROMORPHONE HCL TAB 8 MG	Tier 1				
MEPERIDINE SOL 50MG/5ML	MEPERIDINE HCL ORAL SOLN 50 MG/5ML	Tier 1				
MEPERIDINE TAB 50MG	MEPERIDINE HCL TAB 50 MG	Tier 1				
MORPHINE SUL SOL 100/5ML	MORPHINE SULFATE ORAL SOLN 100 MG/5ML (20 MG/ML)	Tier 1				
MORPHINE SUL SOL 10MG/5ML	MORPHINE SULFATE ORAL SOLN 10 MG/5ML	Tier 1				
MORPHINE SUL SOL 20MG/5ML	MORPHINE SULFATE ORAL SOLN 20 MG/5ML	Tier 1				
MORPHINE SUL SOL 20MG/ML	MORPHINE SULFATE ORAL SOLN 100 MG/5ML (20 MG/ML)	Tier 1				
MORPHINE SUL SUP 10MG	MORPHINE SULFATE SUPPOS 10 MG	Tier 1				
MORPHINE SUL SUP 20MG	MORPHINE SULFATE SUPPOS 20 MG	Tier 1				
MORPHINE SUL SUP 30MG	MORPHINE SULFATE SUPPOS 30 MG	Tier 1				
MORPHINE SUL SUP 5MG	MORPHINE SULFATE SUPPOS 5 MG	Tier 1				
MORPHINE SUL TAB 15MG	MORPHINE SULFATE TAB 15 MG	Tier 1				
MORPHINE SUL TAB 30MG	MORPHINE SULFATE TAB 30 MG	Tier 1				
NUCYNTA TAB 100MG	TAPENTADOL HCL TAB 100 MG	Tier 2		X		
NUCYNTA TAB 50MG	TAPENTADOL HCL TAB 50 MG	Tier 2		X		
NUCYNTA TAB 75MG	TAPENTADOL HCL TAB 75 MG	Tier 2		X		
OXYCOD/APAP TAB 10-325MG	OXYCODONE W/ ACETAMINOPHEN TAB 10-325 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
OXYCOD/APAP TAB 2.5-325	OXYCODONE W/ ACETAMINOPHEN TAB 2.5-325 MG	Tier 1				
OXYCOD/APAP TAB 5-325MG	OXYCODONE W/ ACETAMINOPHEN TAB 5-325 MG	Tier 1				
OXYCOD/APAP TAB 7.5-325	OXYCODONE W/ ACETAMINOPHEN TAB 7.5-325 MG	Tier 1				
OXYCODONE CAP 5MG	OXYCODONE HCL CAP 5 MG	Tier 1				
OXYCODONE CON 100/5ML	OXYCODONE HCL CONC 100 MG/5ML (20 MG/ML)	Tier 1				
OXYCODONE SOL 5MG/5ML	OXYCODONE HCL SOLN 5 MG/5ML	Tier 1				
OXYCODONE TAB 10MG	OXYCODONE HCL TAB 10 MG	Tier 1				
OXYCODONE TAB 15MG	OXYCODONE HCL TAB 15 MG	Tier 1				
OXYCODONE TAB 20MG	OXYCODONE HCL TAB 20 MG	Tier 1				
OXYCODONE TAB 30MG	OXYCODONE HCL TAB 30 MG	Tier 1				
OXYCODONE TAB 5MG	OXYCODONE HCL TAB 5 MG	Tier 1				
OXYMORPHONE TAB HCL 10MG	OXYMORPHONE HCL TAB 10 MG	Tier 1		X		
OXYMORPHONE TAB HCL 5MG	OXYMORPHONE HCL TAB 5 MG	Tier 1		X		
PENTAZ/NALOX TAB 50-0.5MG	PENTAZOCINE W/ NALOXONE HCL TAB 50-0.5 MG	Tier 1				
TRAMADL/APAP TAB 37.5-325	TRAMADOL-ACETAMINOPHEN TAB 37.5-325 MG	Tier 1				
TRAMADOL HCL TAB 100MG	TRAMADOL HCL TAB 100 MG	Tier 1				
TRAMADOL HCL TAB 25MG	TRAMADOL HCL TAB 25 MG	Tier 1				
TRAMADOL HCL TAB 50MG	TRAMADOL HCL TAB 50 MG	Tier 1				
TREZIX CAP	ACETAMINOPHEN-CAFFEINE-DIHYDROCODEINE CAP 320.5-30-16 MG	Tier 3				
Opioid Dependence Treatments - Antidotes/Deterrents/Protectants						
BUPREN/NALOX MIS 12-3MG	BUPRENORPHINE HCL-NALOXONE HCL SL FILM 12-3 MG (BASE EQUIV)	Tier 1				
BUPREN/NALOX MIS 2-0.5MG	BUPRENORPHINE HCL-NALOXONE HCL SL FILM 2-0.5 MG (BASE EQUIV)	Tier 1				
BUPREN/NALOX MIS 4-1MG	BUPRENORPHINE HCL-NALOXONE HCL SL FILM 4-1 MG (BASE EQUIV)	Tier 1				
BUPREN/NALOX MIS 8-2MG	BUPRENORPHINE HCL-NALOXONE HCL SL FILM 8-2 MG (BASE EQUIV)	Tier 1				
BUPREN/NALOX SUB 2-0.5MG	BUPRENORPHINE HCL-NALOXONE HCL SL TAB 2-0.5 MG (BASE EQUIV)	Tier 1				
BUPREN/NALOX SUB 8-2MG	BUPRENORPHINE HCL-NALOXONE HCL SL TAB 8-2 MG (BASE EQUIV)	Tier 1				
BUPRENORPHIN SUB 2MG	BUPRENORPHINE HCL SL TAB 2 MG (BASE EQUIV)	Tier 1				
BUPRENORPHIN SUB 8MG	BUPRENORPHINE HCL SL TAB 8 MG (BASE EQUIV)	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
NALTREXONE TAB 50MG	NALTREXONE HCL TAB 50 MG	Tier 1				
ZUBSOLV SUB 0.7-0.18	BUPRENORPHINE HCL-NALOXONE HCL SL TAB 0.7-0.18 MG (BASE EQ)	Tier 1				
ZUBSOLV SUB 1.4-0.36	BUPRENORPHINE HCL-NALOXONE HCL SL TAB 1.4-0.36 MG (BASE EQ)	Tier 1				
ZUBSOLV SUB 11.4-2.9	BUPRENORPHINE HCL-NALOXONE HCL SL TAB 11.4-2.9 MG (BASE EQ)	Tier 1				
ZUBSOLV SUB 2.9-0.71	BUPRENORPHINE HCL-NALOXONE HCL SL TAB 2.9-0.71 MG (BASE EQ)	Tier 1				
ZUBSOLV SUB 5.7-1.4	BUPRENORPHINE HCL-NALOXONE HCL SL TAB 5.7-1.4 MG (BASE EQ)	Tier 1				
ZUBSOLV SUB 8.6-2.1	BUPRENORPHINE HCL-NALOXONE HCL SL TAB 8.6-2.1 MG (BASE EQ)	Tier 1				
Opioid Reversal Agents - Antidotes/Deterrents/Protectants						
FT NALOXONE SPR 4MG	NALOXONE HCL NASAL SPRAY 4 MG/0.1ML	Tier 1				
GNP NALOXONE SPR 4MG	NALOXONE HCL NASAL SPRAY 4 MG/0.1ML	Tier 1				
KLOXXADO SPR 8MG	NALOXONE HCL NASAL SPRAY 8 MG/0.1ML	Tier 1				
NALOXONE INJ 0.4MG/ML	NALOXONE HCL INJ 0.4 MG/ML	Tier 1				
NALOXONE INJ 0.4MG/ML	NALOXONE HCL INJ 4 MG/10ML	Tier 1				
NALOXONE INJ 0.4MG/ML	NALOXONE HCL SOLN CARTRIDGE 0.4 MG/ML	Tier 1				
NALOXONE INJ 4MG/10ML	NALOXONE HCL INJ 4 MG/10ML	Tier 1				
NALOXONE SPR	NALOXONE HCL NASAL SPRAY 4 MG/0.1ML	Tier 1				
NALOXONE SPR 4MG	NALOXONE HCL NASAL SPRAY 4 MG/0.1ML	Tier 1				
NALOXONE HCL INJ 0.4MG/ML	NALOXONE HCL SOLN PREFILLED SYRINGE 0.4 MG/ML	Tier 1				
NALOXONE HCL INJ 1MG/ML	NALOXONE HCL SOLN PREFILLED SYRINGE 2 MG/2ML	Tier 1				
NALOXONE HCL INJ 2MG/2ML	NALOXONE HCL SOLN PREFILLED SYRINGE 2 MG/2ML	Tier 1				
NALOXONE HCL SPR 4MG	NALOXONE HCL NASAL SPRAY 4 MG/0.1ML	Tier 1				
NARCAN SPR 4MG	NALOXONE HCL NASAL SPRAY 4 MG/0.1ML	Tier 1				
OPVEE SPR 2.7/0.1	NALMEFENE HCL NASAL SPRAY 2.7 MG/0.1ML (BASE EQUIV)	Tier 1				
REXTOVY SPR 4/0.25ML	NALOXONE HCL NASAL SPRAY 4 MG/0.25ML	Tier 1				
RIVIVE SPR 3/0.1ML	NALOXONE HCL NASAL SPRAY 3 MG/0.1ML	Tier 2				
ZIMHI SOL	NALOXONE HCL SOLN PREFILLED SYRINGE 5 MG/0.5ML	Tier 2				
ZURNAI INJ 1.5/0.5	NALMEFENE HCL SOLN AUTO-INJECTOR 1.5 MG/0.5ML (BASE EQUIV)	Tier 3/4				
Otic Agents - Drugs for the Ear						
ACETIC ACID SOL 2% OTIC	ACETIC ACID OTIC SOLN 2%	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
CETRAXAL SOL 0.2%	CIPROFLOXACIN HCL OTIC SOLN 0.2% (BASE EQUIVALENT)	Tier 3				
CIPRO HC SUS 0.2-1%OT	CIPROFLOXACIN-HYDROCORTISONE OTIC SUSP 0.2-1%	Tier 3/4				
CIPRO/DEXA SUS 0.3-0.1%	CIPROFLOXACIN-DEXAMETHASONE OTIC SUSP 0.3-0.1%	Tier 1				
CIPROFLOX/HC SUS 0.2-1%OT	CIPROFLOXACIN-HYDROCORTISONE OTIC SUSP 0.2-1%	Tier 1				
CIPROFLOXACN SOL 0.2%	CIPROFLOXACIN HCL OTIC SOLN 0.2% (BASE EQUIVALENT)	Tier 1				
CORTISPORIN SUS -TC OTIC	NEOMYCIN-COLISTIN-HC-THONZONIUM OTIC SUSP 3.3-3-10-0.5 MG/ML	Tier 3				
DERMOTIC OIL 0.01%	FLUOCINOLONE ACETONIDE (OTIC) OIL 0.01%	Tier 3/4				
FLAC OIL 0.01% OT	FLUOCINOLONE ACETONIDE (OTIC) OIL 0.01%	Tier 1				
FLUOCINOLONE OIL 0.01% OT	FLUOCINOLONE ACETONIDE (OTIC) OIL 0.01%	Tier 1				
HC/ACET ACID SOL 1-2%OTIC	HYDROCORTISONE W/ ACETIC ACID OTIC SOLN 1-2%	Tier 1				
NEO/POLY/HC SOL 1% OTIC	NEOMYCIN-POLYMYXIN-HC OTIC SOLN 1%	Tier 1				
NEO/POLY/HC SUS 1% OTIC	NEOMYCIN-POLYMYXIN-HC OTIC SUSP 3.5 MG/ML-10000 UNIT/ML-1%	Tier 1				
PRAMOTIC DRO 1-0.1%	PRAMOXINE-CHLOROXYLENOL OTIC LIQUID 1-0.1%	Tier 3				
Otic Agents - Drugs to Treat Ear Conditions						
OFLOXACIN DRO 0.3%OTIC	OFLOXACIN OTIC SOLN 0.3%	Tier 1				
Parasympathomimetics - Myasthenia Gravis Drugs						
MESTINON SOL 60MG/5ML	PYRIDOSTIGMINE BROMIDE ORAL SOLN 60 MG/5ML	Tier 3/4				
PYRIDOSTIGM TAB 60MG	PYRIDOSTIGMINE BROMIDE TAB 60 MG	Tier 1				
PYRIDOSTIGMI SOL 60MG/5ML	PYRIDOSTIGMINE BROMIDE ORAL SOLN 60 MG/5ML	Tier 1				
PYRIDOSTIGMI TAB ER 180MG	PYRIDOSTIGMINE BROMIDE TAB ER 180 MG	Tier 1				
Pediculicides/Scabicides - Scabies and Lice Drugs						
CROTAN LOT 10%	CROTAMITON LOTION 10%	Tier 3				
ELIMITE CRE 5%	PERMETHRIN CREAM 5%	Tier 3/4				
MALATHION LOT 0.5%	MALATHION LOTION 0.5%	Tier 1				
OVIDE LOT 0.5%	MALATHION LOTION 0.5%	Tier 3/4				
PERMETHRIN CRE 5%	PERMETHRIN CREAM 5%	Tier 1				
PRURADIK LOT 10%	CROTAMITON LOTION 10%	Tier 3				
SPINOSAD SUS 0.9%	SPINOSAD SUSP 0.9%	Tier 1				
SULF LIME SOL	SULFURATED LIME SOLUTION	Tier 1				

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Phosphate Binders - Phosphate-Removing Agents						
CALC ACETATE CAP 667MG	CALCIUM ACETATE (PHOSPHATE BINDER) CAP 667 MG (169 MG CA)	Tier 1				
CALC ACETATE TAB 667MG	CALCIUM ACETATE (PHOSPHATE BINDER) TAB 667 MG	Tier 1				
FOSRENOL POW 1000MG	LANTHANUM CARBONATE ORAL POWDER PACK 1000 MG (ELEMENTAL)	Tier 3				
FOSRENOL POW 750MG	LANTHANUM CARBONATE ORAL POWDER PACK 750 MG (ELEMENTAL)	Tier 3				
LANTHANUM CHW 1000MG	LANTHANUM CARBONATE CHEW TAB 1000 MG (ELEMENTAL)	Tier 1				
LANTHANUM CHW 500MG	LANTHANUM CARBONATE CHEW TAB 500 MG (ELEMENTAL)	Tier 1				
LANTHANUM CHW 750MG	LANTHANUM CARBONATE CHEW TAB 750 MG (ELEMENTAL)	Tier 1				
SEVELAM CARB POW 0.8GM	SEVELAMER CARBONATE PACKET 0.8 GM	Tier 1	X			
SEVELAM CARB POW 2.4GM	SEVELAMER CARBONATE PACKET 2.4 GM	Tier 1	X			
SEVELAM CARB TAB 800MG	SEVELAMER CARBONATE TAB 800 MG	Tier 1				
VELPHORO CHW 500MG	SUCROFERRIC OXYHYDROXIDE CHEW TAB 500 MG	Tier 3/4			X	
Phosphodiesterase Inhibitors, Airways Disease - Drugs for the Lungs						
ELIXOPHYLLIN ELX 80/15ML	THEOPHYLLINE ELIXIR 80 MG/15ML	Tier 3				
ROFLUMILAST TAB 250MCG	ROFLUMILAST TAB 250 MCG	Tier 1		X		
ROFLUMILAST TAB 500MCG	ROFLUMILAST TAB 500 MCG	Tier 1		X		
THEO-24 CAP 100MG CR	THEOPHYLLINE CAP ER 24HR 100 MG	Tier 3				
THEO-24 CAP 200MG CR	THEOPHYLLINE CAP ER 24HR 200 MG	Tier 3				
THEO-24 CAP 300MG CR	THEOPHYLLINE CAP ER 24HR 300 MG	Tier 3				
THEO-24 CAP 400MG ER	THEOPHYLLINE CAP ER 24HR 400 MG	Tier 3				
THEOPHYLLINE ELX 80/15ML	THEOPHYLLINE ELIXIR 80 MG/15ML	Tier 1				
THEOPHYLLINE SOL 80/15ML	THEOPHYLLINE SOLN 80 MG/15ML	Tier 1				
THEOPHYLLINE TAB 100MG ER	THEOPHYLLINE TAB ER 12HR 100 MG	Tier 1				
THEOPHYLLINE TAB 200MG ER	THEOPHYLLINE TAB ER 12HR 200 MG	Tier 1				
THEOPHYLLINE TAB 300MG ER	THEOPHYLLINE TAB ER 12HR 300 MG	Tier 1				
THEOPHYLLINE TAB 400MG ER	THEOPHYLLINE TAB ER 24HR 400 MG	Tier 1				
THEOPHYLLINE TAB 450MG ER	THEOPHYLLINE TAB ER 12HR 450 MG	Tier 1				
THEOPHYLLINE TAB 600MG ER	THEOPHYLLINE TAB ER 24HR 600 MG	Tier 1				
Platelet Modifying Agents - Platelet Modifying Drugs						
ASA/DIPYRIDA CAP 25-200MG	ASPIRIN-DIPYRIDAMOLE CAP ER 12HR 25-200 MG	Tier 1				
CABLIVI KIT 11MG	CAPLACIZUMAB-YHDP FOR INJ KIT 11 MG	Tier 2	X	X		
CILOSTAZOL TAB 100MG	CILOSTAZOL TAB 100 MG	Tier 1				

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

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LEVONORGESTR TAB 1.5MG	LEVONORGESTREL TAB 1.5 MG	HCR				
LYLEQ TAB 0.35MG	NORETHINDRONE TAB 0.35 MG	HCR				
LYZA TAB 0.35MG	NORETHINDRONE TAB 0.35 MG	HCR				
MEDROXYPR AC INJ 150MG/ML	MEDROXYPROGESTERONE ACETATE IM SUSP 150 MG/ML	HCR		X		
MEDROXYPR AC INJ 150MG/ML	MEDROXYPROGESTERONE ACETATE IM SUSP PREFILLED SYR 150 MG/ML	HCR		X		
MEDROXYPR AC TAB 10MG	MEDROXYPROGESTERONE ACETATE TAB 10 MG	Tier 1				
MEDROXYPR AC TAB 2.5MG	MEDROXYPROGESTERONE ACETATE TAB 2.5 MG	Tier 1				
MEDROXYPR AC TAB 5MG	MEDROXYPROGESTERONE ACETATE TAB 5 MG	Tier 1				
MEGESTROL SUS 625MG/5M	MEGESTROL ACETATE SUSP 625 MG/5ML	Tier 1				
MEGESTROL AC SUS 40MG/ML	MEGESTROL ACETATE SUSP 40 MG/ML	Tier 1				
MEGESTROL AC TAB 20MG	MEGESTROL ACETATE TAB 20 MG	Tier 1				
MEGESTROL AC TAB 40MG	MEGESTROL ACETATE TAB 40 MG	Tier 1				
MELEYA TAB 0.35MG	NORETHINDRONE TAB 0.35 MG	HCR				
MY CHOICE TAB 1.5MG	LEVONORGESTREL TAB 1.5 MG	HCR				
MY WAY TAB 1.5MG	LEVONORGESTREL TAB 1.5 MG	HCR				
NEW DAY TAB 1.5MG	LEVONORGESTREL TAB 1.5 MG	HCR				
NORA-BE TAB 0.35MG	NORETHINDRONE TAB 0.35 MG	HCR				
NORETHIN ACE TAB 5MG	NORETHINDRONE ACETATE TAB 5 MG	Tier 1				
NORETHINDRON TAB 0.35MG	NORETHINDRONE TAB 0.35 MG	HCR				
NORLYROC TAB 0.35MG	NORETHINDRONE TAB 0.35 MG	HCR				
OPCICON TAB 1.5MG	LEVONORGESTREL TAB 1.5 MG	HCR				
OPTION 2 TAB 1.5MG	LEVONORGESTREL TAB 1.5 MG	HCR				
ORQUIDEA TAB 0.35MG	NORETHINDRONE TAB 0.35 MG	HCR				
PLAN B TAB 1.5MG	LEVONORGESTREL TAB 1.5 MG	HCR				
PROGESTERONE CAP 100MG	PROGESTERONE CAP 100 MG	Tier 1				
PROGESTERONE CAP 200MG	PROGESTERONE CAP 200 MG	Tier 1				
PROGESTERONE INJ 50MG/ML	PROGESTERONE IM IN OIL 50 MG/ML	Tier 1				
PROGESTERONE SUP 100MG	PROGESTERONE VAGINAL INSERT 100 MG	Tier 1				
PROVERA TAB 10MG	MEDROXYPROGESTERONE ACETATE TAB 10 MG	Tier 3/4				
PROVERA TAB 2.5MG	MEDROXYPROGESTERONE ACETATE TAB 2.5 MG	Tier 3/4				
PROVERA TAB 5MG	MEDROXYPROGESTERONE ACETATE TAB 5 MG	Tier 3/4				
REACT TAB 1.5MG	LEVONORGESTREL TAB 1.5 MG	HCR				

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SHAROBEL TAB 0.35MG	NORETHINDRONE TAB 0.35 MG	HCR				
SHEWISE TAB 1.5MG	LEVONORGESTREL TAB 1.5 MG	HCR				
SLYND TAB 4MG	DROSPIRENONE TAB 4 MG	Tier 3/4				
TAKE ACTION TAB 1.5MG	LEVONORGESTREL TAB 1.5 MG	HCR				
Protectants - Ulcer and Stomach Acid Drugs						
CYTOTEC TAB 100MCG	MISOPROSTOL TAB 100 MCG	Tier 3/4				
CYTOTEC TAB 200MCG	MISOPROSTOL TAB 200 MCG	Tier 3/4				
MISOPROSTOL TAB 100MCG	MISOPROSTOL TAB 100 MCG	Tier 1				
MISOPROSTOL TAB 200MCG	MISOPROSTOL TAB 200 MCG	Tier 1				
SUCRALFATE SUS 1GM/10ML	SUCRALFATE SUSP 1 GM/10ML	Tier 1				
SUCRALFATE TAB 1GM	SUCRALFATE TAB 1 GM	Tier 1				
Proton Pump Inhibitors - Ulcer and Stomach Acid Drugs						
ESOMEPRAZOLE GRA 10MG DR	ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 10 MG	Tier 1	X	X		
ESOMEPRAZOLE GRA 2.5MG DR	ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACK 2.5 MG	Tier 1	X	X		
ESOMEPRAZOLE GRA 20MG DR	ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 20 MG	Tier 1	X	X		
ESOMEPRAZOLE GRA 40MG DR	ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 40 MG	Tier 1	X	X		
ESOMEPRAZOLE GRA 5MG DR	ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 5 MG	Tier 1	X	X		
FIRST-OMEPRASUS 2MG/ML	*OMEPRAZOLE SUSP 2 MG/ML (COMPOUND KIT)**	Tier 3	X			
FIRST-PANTPR SUS 4MG/ML	*PANTOPRAZOLE SODIUM SUSP 4 MG/ML (COMPOUND KIT)**	Tier 3				
LANSOPRAZOLE SUS 3MG/ML	*LANSOPRAZOLE SUSP 3 MG/ML (COMPOUND KIT)**	Tier 3	X			
LANSOPRAZOLE TAB 15MG ODT	LANSOPRAZOLE TAB DELAYED RELEASE ORALLY DISINTEGRATING 15 MG	Tier 1	X	X		
LANSOPRAZOLE TAB 30MG ODT	LANSOPRAZOLE TAB DELAYED RELEASE ORALLY DISINTEGRATING 30 MG	Tier 1	X	X		
OMEPRAZOLE CAP 10MG	OMEPRAZOLE CAP DELAYED RELEASE 10 MG	Tier 1				
OMEPRAZOLE CAP 20MG	OMEPRAZOLE CAP DELAYED RELEASE 20 MG	Tier 1				
OMEPRAZOLE CAP 40MG	OMEPRAZOLE CAP DELAYED RELEASE 40 MG	Tier 1				
PANTOPRAZOLE PAK 40MG	PANTOPRAZOLE SODIUM FOR DELAYED RELEASE SUSP PACKET 40 MG	Tier 1				
PANTOPRAZOLE TAB 20MG	PANTOPRAZOLE SODIUM EC TAB 20 MG (BASE EQUIV)	Tier 1				
PANTOPRAZOLE TAB 40MG	PANTOPRAZOLE SODIUM EC TAB 40 MG (BASE EQUIV)	Tier 1				
PRILOSEC POW 10MG	OMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 10 MG	Tier 3/4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PRILOSEC POW 2.5MG	OMEPRazole MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 2.5 MG	Tier 3/4				
PROTONIX PAK 40MG	PANTOPRAZOLE SODIUM FOR DELAYED RELEASE SUSP PACKET 40 MG	Tier 3/4				
RABEPRAZOLE CAP 10MG DR	RABEPRAZOLE SODIUM CAPSULE SPRINKLE DR 10 MG	Tier 3/4				
RABEPRAZOLE TAB 20MG	RABEPRAZOLE SODIUM EC TAB 20 MG	Tier 1		X		
VOQUEZNA TAB 10MG	VONOPRAZAN FUMARATE TAB 10 MG	Tier 3/4	X	X		
VOQUEZNA TAB 20MG	VONOPRAZAN FUMARATE TAB 20 MG	Tier 3/4	X	X		
Pulmonary Antihypertensives - Asthma/Lung Drugs						
ADEMPAS TAB 0.5MG	RIOCIGUAT TAB 0.5 MG	Tier 2	X	X		
ADEMPAS TAB 1.5MG	RIOCIGUAT TAB 1.5 MG	Tier 2	X	X		
ADEMPAS TAB 1MG	RIOCIGUAT TAB 1 MG	Tier 2	X	X		
ADEMPAS TAB 2.5MG	RIOCIGUAT TAB 2.5 MG	Tier 2	X	X		
ADEMPAS TAB 2MG	RIOCIGUAT TAB 2 MG	Tier 2	X	X		
ALYQ TAB 20MG	TADALAFIL TAB 20 MG (PAH)	Tier 1	X	X		
AMBRISANTAN TAB 10MG	AMBRISANTAN TAB 10 MG	Tier 1	X	X		
AMBRISANTAN TAB 5MG	AMBRISANTAN TAB 5 MG	Tier 1	X	X		
BOSENTAN TAB 125MG	BOSENTAN TAB 125 MG	Tier 1	X	X		
BOSENTAN TAB 32MG	BOSENTAN TAB FOR ORAL SUSP 32 MG	Tier 1	X	X		
BOSENTAN TAB 62.5MG	BOSENTAN TAB 62.5 MG	Tier 1	X	X		
OPSUMIT TAB 10MG	MACITENTAN TAB 10 MG	Tier 2	X	X		
ORENITRAM TAB 0.125MG	TREPROSTINIL DIOLAMINE TAB ER 0.125 MG (BASE EQUIV)	Tier 3/4	X	X		
ORENITRAM TAB 0.25MG	TREPROSTINIL DIOLAMINE TAB ER 0.25 MG (BASE EQUIV)	Tier 3/4	X	X		
ORENITRAM TAB 1MG	TREPROSTINIL DIOLAMINE TAB ER 1 MG (BASE EQUIV)	Tier 3/4	X	X		
ORENITRAM TAB 2.5MG	TREPROSTINIL DIOLAMINE TAB ER 2.5 MG (BASE EQUIV)	Tier 3/4	X	X		
ORENITRAM TAB 5MG	TREPROSTINIL DIOLAMINE TAB ER 5 MG (BASE EQUIV)	Tier 3/4	X	X		
ORENITRAM TAB MONTH 1	TREPROSTINIL TAB ER TITR PK (MO1) 126 X0.125MG & 42 X0.25MG	Tier 3/4	X	X		
ORENITRAM TAB MONTH 2	TREPROSTINIL TAB ER TITR PK (MO2) 126 X0.125MG & 210 X0.25MG	Tier 3/4	X	X		
ORENITRAM TAB MONTH 3	TREPROSTINIL TAB ER TITR PK(MO3)126X0.125MG&42X0.25MG&84X1MG	Tier 3/4	X	X		
SILDENAFIL SUS 10MG/ML	SILDENAFIL CITRATE FOR SUSPENSION 10 MG/ML	Tier 1	X	X		
SILDENAFIL TAB 20MG	SILDENAFIL CITRATE TAB 20 MG	Tier 1		X		
TADALAFIL TAB 20MG	TADALAFIL TAB 20 MG (PAH)	Tier 1	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
TADLIQ SUS 20MG/5ML	TADALAFIL ORAL SUSP 20 MG/5ML (PAH)	Tier 3	X	X		
TRACLEER TAB 32MG	BOSENTAN TAB FOR ORAL SUSP 32 MG	Tier 3/4	X	X		
TYVASO SOL 0.6MG/ML	TREPROSTINIL INHALATION SOLUTION 0.6 MG/ML	Tier 2	X			
TYVASO DPI POW 16-32-48	TREPROSTINIL INH POWD 112 X 16MCG & 112 X 32MCG & 28 X 48MCG	Tier 2	X	X		
TYVASO DPI POW 16-32MCG	TREPROSTINIL INH POWDER 112 X 16MCG & 84 X 32MCG	Tier 2	X	X		
TYVASO DPI POW 16MCG	TREPROSTINIL INH POWDER 16 MCG/ CARTRIDGE	Tier 2	X	X		
TYVASO DPI POW 32MCG	TREPROSTINIL INH POWDER 32 MCG/ CARTRIDGE	Tier 2	X	X		
TYVASO DPI POW 48MCG	TREPROSTINIL INH POWDER 48 MCG/ CARTRIDGE	Tier 2	X	X		
TYVASO DPI POW 64MCG	TREPROSTINIL INH POWDER 64 MCG/ CARTRIDGE	Tier 2	X	X		
TYVASO DPI POW 80MCG	TREPROSTINIL INH POWDER 80 MCG/ CARTRIDGE	Tier 2	X			
TYVASO DPI POW INST KIT	TREPROSTINIL INH POWDER 80 MCG/ CARTRIDGE	Tier 2	X			
TYVASO DPI POW MAIN KIT	TREPROSTINIL INH POWDER 112 X 32MCG & 112 X 64MCG	Tier 2	X			
TYVASO DPI POW MAIN KIT	TREPROSTINIL INH POWDER 112 X 48MCG & 112 X 64MCG	Tier 2	X			
TYVASO RF KT SOL 0.6MG/ML	TREPROSTINIL INHALATION SOLUTION 0.6 MG/ML	Tier 2	X			
TYVASO ST KT SOL 0.6MG/ML	TREPROSTINIL INHALATION SOLUTION 0.6 MG/ML	Tier 2	X			
UPTRAVI TAB 1000MCG	SELEXIPAG TAB 1000 MCG	Tier 3/4	X	X		
UPTRAVI TAB 1200MCG	SELEXIPAG TAB 1200 MCG	Tier 3/4	X	X		
UPTRAVI TAB 1400MCG	SELEXIPAG TAB 1400 MCG	Tier 3/4	X	X		
UPTRAVI TAB 1600MCG	SELEXIPAG TAB 1600 MCG	Tier 3/4	X	X		
UPTRAVI TAB 200MCG	SELEXIPAG TAB 200 MCG	Tier 3/4	X	X		
UPTRAVI TAB 400MCG	SELEXIPAG TAB 400 MCG	Tier 3/4	X	X		
UPTRAVI TAB 600MCG	SELEXIPAG TAB 600 MCG	Tier 3/4	X	X		
UPTRAVI TAB 800MCG	SELEXIPAG TAB 800 MCG	Tier 3/4	X	X		
UPTRAVI PACK TAB 200/800	SELEXIPAG TAB THERAPY PACK 200 MCG (140) & 800 MCG (60)	Tier 3/4	X	X		
VENTAVIS SOL 10MCG/ML	ILOPROST INHALATION SOLUTION 10 MCG/ ML	Tier 2	X			
VENTAVIS SOL 20MCG/ML	ILOPROST INHALATION SOLUTION 20 MCG/ ML	Tier 2	X			

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
Pulmonary Fibrosis Agents - Drugs to treat Pulmonary Fibrosis						
OFEV CAP 100MG	NINTEDANIB ESYLATE CAP 100 MG (BASE EQUIVALENT)	Tier 3/4	X	X		
OFEV CAP 150MG	NINTEDANIB ESYLATE CAP 150 MG (BASE EQUIVALENT)	Tier 3/4	X	X		
PIRFENIDONE TAB 267MG	PIRFENIDONE TAB 267 MG	Tier 1	X	X		
PIRFENIDONE TAB 801MG	PIRFENIDONE TAB 801 MG	Tier 1	X	X		
Quinolones - Antibiotics						
BAXDELA TAB 450MG	DELAFOXACIN MEGLUMINE TAB 450 MG (BASE EQUIV)	Tier 3				
CIPRO TAB 250MG	CIPROFLOXACIN HCL TAB 250 MG (BASE EQUIV)	Tier 3/4				
CIPRO TAB 500MG	CIPROFLOXACIN HCL TAB 500 MG (BASE EQUIV)	Tier 3/4				
CIPRO (10%) SUS 500MG/5	CIPROFLOXACIN FOR ORAL SUSP 500 MG/5ML (10%) (10 GM/100ML)	Tier 3				
CIPRO (5%) SUS 250MG/5	CIPROFLOXACIN FOR ORAL SUSP 250 MG/5ML (5%) (5 GM/100ML)	Tier 3				
CIPROFLOXACN TAB 250MG	CIPROFLOXACIN HCL TAB 250 MG (BASE EQUIV)	Tier 1				
CIPROFLOXACN TAB 500MG	CIPROFLOXACIN HCL TAB 500 MG (BASE EQUIV)	Tier 1				
CIPROFLOXACN TAB 750MG	CIPROFLOXACIN HCL TAB 750 MG (BASE EQUIV)	Tier 1				
LEVOFLOXACIN SOL 25MG/ML	LEVOFLOXACIN ORAL SOLN 25 MG/ML	Tier 1				
LEVOFLOXACIN TAB 250MG	LEVOFLOXACIN TAB 250 MG	Tier 1				
LEVOFLOXACIN TAB 500MG	LEVOFLOXACIN TAB 500 MG	Tier 1				
LEVOFLOXACIN TAB 750MG	LEVOFLOXACIN TAB 750 MG	Tier 1				
MOXIFLOXACIN TAB 400MG	MOXIFLOXACIN HCL TAB 400 MG (BASE EQUIV)	Tier 1				
OFLOXACIN TAB 300MG	OFLOXACIN TAB 300 MG	Tier 1				
OFLOXACIN TAB 400MG	OFLOXACIN TAB 400 MG	Tier 1				
XEPI CRE 1%	OZENOXACIN CREAM 1%	Tier 3				
Respiratory Tract Agents, Other - Asthma/Lung Drugs						
ACETYLCYST SOL 10%	ACETYLCYSTEINE INHAL SOLN 10%	Tier 1				
ACETYLCYST SOL 20%	ACETYLCYSTEINE INHAL SOLN 20%	Tier 1				
ADVAIR HFA AER 115/21	FLUTICASONE-SALMETEROL INHAL AEROSOL 115-21 MCG/ACT	Tier 2		X		
ADVAIR HFA AER 230/21	FLUTICASONE-SALMETEROL INHAL AEROSOL 230-21 MCG/ACT	Tier 2		X		
ADVAIR HFA AER 45/21	FLUTICASONE-SALMETEROL INHAL AEROSOL 45-21 MCG/ACT	Tier 2		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
AIRSUPRA AER 90-80MCG	ALBUTEROL-BUDESONIDE INHALATION AEROSOL 90-80 MCG/ACT	Tier 3				
ALLERGY RELI TAB 60-120MG	FEXOFENADINE-PSEUDOEPHEDRINE TAB ER 12HR 60-120 MG	Tier 1				
ANORO ELLIPTA AER 62.5-25	UMECLIDINIUM-VILANTEROL AERO POWD BA 62.5-25 MCG/ACT	Tier 3		X		
BEVESPI AER 9-4.8MCG	GLYCOPYRROLATE-FORMOTEROL FUMARATE AEROSOL 9-4.8 MCG/ACT	Tier 2		X		
BREO ELLIPTA INH 100-25	FLUTICASONE FUROATE-VILANTEROL AERO POWD BA 100-25 MCG/ACT	Tier 2		X		
BREO ELLIPTA INH 200-25	FLUTICASONE FUROATE-VILANTEROL AERO POWD BA 200-25 MCG/ACT	Tier 3		X		
BREO ELLIPTA INH 50-25MCG	FLUTICASONE FUROATE-VILANTEROL AERO POWD BA 50-25 MCG/ACT	Tier 3		X		
BREZTRI AERO AER SPHERE	BUDESONIDE-GLYCOPYRROLATE-FORMOTEROL AERS 160-9-4.8 MCG/ACT	Tier 3		X		
CLARINEX-D TAB 2.5-120	DESLOMATADINE & PSEUDOEPHEDRINE TAB ER 12HR 2.5-120 MG	Tier 3				
CODEINE/GG SOL 10-100/5	GUAIFENESIN-CODEINE SOLN 100-10 MG/5ML	Tier 1				
COMBIVENT AER 20-100	IPRATROPIUM-ALBUTEROL INHAL AEROSOL SOLN 20-100 MCG/ACT	Tier 2		X		
DULERA AER 100-5MCG	MOMETASONE FUROATE-FORMOTEROL FUMARATE AEROSOL 100-5 MCG/ACT	Tier 3/4		X	X	
DULERA AER 200-5MCG	MOMETASONE FUROATE-FORMOTEROL FUMARATE AEROSOL 200-5 MCG/ACT	Tier 3/4		X	X	
DULERA AER 50-5MCG	MOMETASONE FUROATE-FORMOTEROL FUMARATE AEROSOL 50-5 MCG/ACT	Tier 3/4		X	X	
FASENRA PEN INJ 30MG/ML	BENRALIZUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 30 MG/ML	Tier 3/4	X	X		
FLUTIC/SALME AER 100/50	FLUTICASONE-SALMETEROL AER POWDER BA 100-50 MCG/ACT	Tier 1		X		
FLUTIC/SALME AER 115-21	FLUTICASONE-SALMETEROL INHAL AEROSOL 115-21 MCG/ACT	Tier 3/4		X		
FLUTIC/SALME AER 230-21	FLUTICASONE-SALMETEROL INHAL AEROSOL 230-21 MCG/ACT	Tier 3/4		X		
FLUTIC/SALME AER 250/50	FLUTICASONE-SALMETEROL AER POWDER BA 250-50 MCG/ACT	Tier 1		X		
FLUTIC/SALME AER 45-21MCG	FLUTICASONE-SALMETEROL INHAL AEROSOL 45-21 MCG/ACT	Tier 3/4		X		
FLUTIC/SALME AER 500/50	FLUTICASONE-SALMETEROL AER POWDER BA 500-50 MCG/ACT	Tier 1		X		
FLUTIC/SALME INH 113/14	FLUTICASONE-SALMETEROL AER POWDER BA 113-14 MCG/ACT	Tier 2		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
FLUTIC/SALME INH 232/14	FLUTICASONE-SALMETEROL AER POWDER BA 232-14 MCG/ACT	Tier 2		X		
FLUTIC/SALME INH 55/14	FLUTICASONE-SALMETEROL AER POWDER BA 55-14 MCG/ACT	Tier 2		X		
FLUTIC/VILAN INH 100-25	FLUTICASONE FUROATE-VILANTEROL AERO POWD BA 100-25 MCG/ACT	Tier 3/4		X		
FLUTIC/VILAN INH 200-25	FLUTICASONE FUROATE-VILANTEROL AERO POWD BA 200-25 MCG/ACT	Tier 3/4		X		
G TUSSIN AC LIQ 100-10/5	GUAIFENESIN-CODEINE SOLN 100-10 MG/5ML	Tier 1				
GG/CODEINE SOL 100-10/5	GUAIFENESIN-CODEINE SOLN 100-10 MG/5ML	Tier 1				
GG/CODEINE SOL 200-20MG	GUAIFENESIN-CODEINE SOLN 100-10 MG/5ML	Tier 1				
GRASTEK SUB 2800BAU	TIMOTHY GRASS POLLEN ALLERGEN EXT SL TAB 2800 BAU	Tier 3/4	X	X		
GUAIFENESIN SYP 100-10/5	GUAIFENESIN-CODEINE SOLN 100-10 MG/5ML	Tier 1				
HYD POL/CPM SUS 10-8/5ML	HYDROCOD POLST-CHLORPHEN POLST ER SUSP 10-8 MG/5ML	Tier 1	X			
HYDROC/HOMAT TAB 5-1.5MG	HYDROCODONE BITART-HOMATROPINE METHYLBROMIDE TAB 5-1.5 MG	Tier 1	X			
HYDROCOD/HOM SYP 5-1.5/5	HYDROCODONE BITART-HOMATROPINE METHYLBROM SOLN 5-1.5 MG/5ML	Tier 1	X			
HYDROMET SYP 5-1.5/5	HYDROCODONE BITART-HOMATROPINE METHYLBROM SOLN 5-1.5 MG/5ML	Tier 1	X			
HYPERSAL NEB 3.5%	SODIUM CHLORIDE SOLN NEBU 3.5%	Tier 2				
HYPERSAL NEB 7%	SODIUM CHLORIDE SOLN NEBU 7%	Tier 2				
IPRATROPIUM/ SOL ALBUTER	IPRATROPIUM-ALBUTEROL NEBU SOLN 0.5-2.5(3) MG/3ML	Tier 1				
KALYDECO TAB 150MG	IVACAFTOR TAB 150 MG	Tier 2	X	X		
MAXI-TUSS AC SOL	GUAIFENESIN-CODEINE SOLN 100-10 MG/5ML	Tier 1				
NEBUSAL NEB 3%	SODIUM CHLORIDE SOLN NEBU 3%	Tier 3				
NEOTUSS PLUS LIQ	PHENYLEPHRINE-CHLORPHEN-DM LIQUID 7.5-4-30 MG/5ML	Tier 3				
ODACTRA SUB	*DUST MITE MIXED EXT SL TAB 12 SQ-HDM***	Tier 3/4	X	X		
ORALAIR SUB 300 IR	*GRASS MIXED POLLEN EXT SL TAB 300 IR (INDEX OF REACTIVITY)*	Tier 3/4	X	X		
ORALAIR ADLT SUB 300 IR	*GRASS MIXED POLLEN EXT SL TAB 300 IR (INDEX OF REACTIVITY)*	Tier 3/4	X	X		
ORALAIR CHLD SUB 100 IR	*GRASS MIXED POLLEN EXT SL TAB 100 IR (INDEX OF REACTIVITY)*	Tier 3/4	X	X		
PIRFENIDONE CAP 267MG	PIRFENIDONE CAP 267 MG	Tier 1	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PIRFENIDONE TAB 534MG	PIRFENIDONE TAB 534 MG	Tier 1	X	X		
PROMETH VC SYP 6.25-5/5	PROMETHAZINE & PHENYLEPHRINE SYRUP 6.25-5 MG/5ML	Tier 1				
PROMETH VC/ SYP CODEINE	PROMETHAZINE-PHENYLEPHRINE-CODEINE SYRUP 6.25-5-10 MG/5ML	Tier 1	X			
PROMETH/COD SOL 6.25-10	PROMETHAZINE W/ CODEINE SYRUP 6.25-10 MG/5ML	Tier 1	X			
PROMETH/PE SOL 6.25-5/5	PROMETHAZINE & PHENYLEPHRINE SYRUP 6.25-5 MG/5ML	Tier 1				
PULMOSAL NEB 7%	SODIUM CHLORIDE SOLN NEBU 7%	Tier 2				
PULMOZYME SOL 1MG/ML	DORNASE ALFA INHAL SOLN 2.5 MG/2.5ML	Tier 2	X	X		
RAGWITEK SUB	SHORT RAGWEED POLLEN ALLERGEN EXTRACT SL TAB 12 AMB A 1-U	Tier 3/4	X	X		
SOD CHLORIDE NEB 0.9%	SODIUM CHLORIDE SOLN NEBU 0.9%	Tier 1				
SOD CHLORIDE NEB 10%	SODIUM CHLORIDE SOLN NEBU 10%	Tier 1				
SOD CHLORIDE NEB 3%	SODIUM CHLORIDE SOLN NEBU 3%	Tier 1				
SOD CHLORIDE NEB 7%	SODIUM CHLORIDE SOLN NEBU 7%	Tier 1				
STIOLTO AER 2.5-2.5	TIOTROPIUM BR-OLODATEROL INHAL AERO SOLN 2.5-2.5 MCG/ACT	Tier 2		X		
SYMBICORT AER 160-4.5	BUDESONIDE-FORMOTEROL FUMARATE DIHYD AEROSOL 160-4.5 MCG/ACT	Tier 1		X		
SYMBICORT AER 80-4.5	BUDESONIDE-FORMOTEROL FUMARATE DIHYD AEROSOL 80-4.5 MCG/ACT	Tier 1		X		
TEZSPIRE INJ 210MG	TEZEPELUMAB-EKKO SUBCUTANEOUS SOLN AUTO-INJ 210 MG/1.91ML	Tier 3/4	X	X		
TRELEGY AER 100MCG	FLUTICASONE-UMECLIDINIUM-VILANTEROL AEPB 100-62.5-25 MCG/ACT	Tier 3		X		
TRELEGY AER 200MCG	FLUTICASONE-UMECLIDINIUM-VILANTEROL AEPB 200-62.5-25 MCG/ACT	Tier 3		X		
TUXARIN ER TAB 54.3-8MG	CODEINE PHOS-CHLORPHENIRAMINE MALEATE TAB ER 12HR 54.3-8 MG	Tier 3				
WIXELA INHUB AER 100/50	FLUTICASONE-SALMETEROL AER POWDER BA 100-50 MCG/ACT	Tier 1		X		
WIXELA INHUB AER 250/50	FLUTICASONE-SALMETEROL AER POWDER BA 250-50 MCG/ACT	Tier 1		X		
WIXELA INHUB AER 500/50	FLUTICASONE-SALMETEROL AER POWDER BA 500-50 MCG/ACT	Tier 1		X		
XOLAIR INJ 150MG/ML	OMALIZUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 150 MG/ML	Tier 2	X	X		
XOLAIR INJ 150MG/ML	OMALIZUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 150 MG/ML	Tier 2	X	X		
XOLAIR INJ 300/2ML	OMALIZUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 300 MG/2ML	Tier 2	X	X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
XOLAIR INJ 300/2ML	OMALIZUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 300 MG/2ML	Tier 2	X	X		
XOLAIR INJ 75/0.5	OMALIZUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 75 MG/0.5ML	Tier 2	X	X		
XOLAIR INJ 75/0.5	OMALIZUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 75 MG/0.5ML	Tier 2	X	X		
Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions						
ADRENALIN SOL 1:1000	EPINEPHRINE HCL NASAL SOLN 0.1%	Tier 2				
BENZONATATE CAP 100MG	BENZONATATE CAP 100 MG	Tier 1				
BENZONATATE CAP 150MG	BENZONATATE CAP 150 MG	Tier 1				
BENZONATATE CAP 200MG	BENZONATATE CAP 200 MG	Tier 1				
BROM/PSE/DM SYP	PSEUDOEPHED-BROMPHEN-DM SYRUP 30-2-10 MG/5ML	Tier 1				
BROM/PSE/DM SYP 2-30-10	PSEUDOEPHED-BROMPHEN-DM SYRUP 30-2-10 MG/5ML	Tier 1				
BROM/PSE/DM SYP 2/30/10	PSEUDOEPHED-BROMPHEN-DM SYRUP 30-2-10 MG/5ML	Tier 1				
BROMFED DM SOL 2-30-10	PSEUDOEPHED-BROMPHEN-DM SYRUP 30-2-10 MG/5ML	Tier 3				
EPINEPHRINE SOL 30/30ML	EPINEPHRINE HCL NASAL SOLN 0.1%	Tier 1				
PROMETHAZINE SOL DM	PROMETHAZINE-DM SYRUP 6.25-15 MG/5ML	Tier 1				
PROMETHAZINE SYP DM	PROMETHAZINE-DM SYRUP 6.25-15 MG/5ML	Tier 1				
Retinoids - Chemotherapy Agents						
BEXAROTENE CAP 75MG	BEXAROTENE CAP 75 MG	Tier 1				
BEXAROTENE GEL 1%	BEXAROTENE GEL 1%	Tier 1				
PANRETIN GEL 0.1%	ALITRETINOIN GEL 0.1%	Tier 3				
TRETINOIN CAP 10MG	TRETINOIN CAP 10 MG	Tier 1				
Selective Estrogen Receptor Modifying Agents - Hormone Replacement/Modifying Drugs						
CLOMID TAB 50MG	CLOMIPHENE CITRATE TAB 50 MG	Tier 1				
CLOMIPHENE TAB 50MG	CLOMIPHENE CITRATE TAB 50 MG	Tier 1				
MILOPHENE TAB 50MG	CLOMIPHENE CITRATE TAB 50 MG	Tier 1				
OSPHENA TAB 60MG	OSPEMIFENE TAB 60 MG	Tier 2	X	X		
RALOXIFENE TAB 60MG	RALOXIFENE HCL TAB 60 MG	Tier 1^				
Serotonin (5-HT) Receptor Agonists - Migraine Drugs						
ALMOTRIP MAL TAB 12.5MG	ALMOTRIPTAN MALATE TAB 12.5 MG	Tier 1				
ALMOTRIP MAL TAB 6.25MG	ALMOTRIPTAN MALATE TAB 6.25 MG	Tier 1				
ALMOTRIPTAN TAB 12.5MG	ALMOTRIPTAN MALATE TAB 12.5 MG	Tier 1				
ALMOTRIPTAN TAB 6.25MG	ALMOTRIPTAN MALATE TAB 6.25 MG	Tier 1				
ELETRIPTAN TAB 20MG	ELETRIPTAN HYDROBROMIDE TAB 20 MG (BASE EQUIVALENT)	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ELETRIPTAN TAB 40MG	ELETRIPTAN HYDROBROMIDE TAB 40 MG (BASE EQUIVALENT)	Tier 1				
FROVATRIPTAN TAB 2.5MG	FROVATRIPTAN SUCCINATE TAB 2.5 MG (BASE EQUIVALENT)	Tier 1				
NARATRIPTAN TAB 1MG	NARATRIPTAN HCL TAB 1 MG (BASE EQUIV)	Tier 1				
NARATRIPTAN TAB 2.5MG	NARATRIPTAN HCL TAB 2.5 MG (BASE EQUIV)	Tier 1				
ONZETRA XSAI MIS 11MG	SUMATRIPTAN SUCCINATE EXHALER POWDER 11 MG/NOSEPIECE	Tier 3/4				
REYVOW TAB 100MG	LASMIDITAN SUCCINATE TAB 100 MG	Tier 3/4	X	X	X	
REYVOW TAB 50MG	LASMIDITAN SUCCINATE TAB 50 MG	Tier 3/4	X	X	X	
RIZATRIPTAN TAB 10MG	RIZATRIPTAN BENZOATE TAB 10 MG (BASE EQUIVALENT)	Tier 1				
RIZATRIPTAN TAB 10MG ODT	RIZATRIPTAN BENZOATE ORAL DISINTEGRATING TAB 10 MG (BASE EQ)	Tier 1				
RIZATRIPTAN TAB 5MG	RIZATRIPTAN BENZOATE TAB 5 MG (BASE EQUIVALENT)	Tier 1				
RIZATRIPTAN TAB 5MG ODT	RIZATRIPTAN BENZOATE ORAL DISINTEGRATING TAB 5 MG (BASE EQ)	Tier 1				
SUMATRIPTAN INJ 4MG/0.5	SUMATRIPTAN SUCCINATE SOLUTION AUTO-INJECTOR 4 MG/0.5ML	Tier 1				
SUMATRIPTAN INJ 4MG/0.5	SUMATRIPTAN SUCCINATE SOLUTION CARTRIDGE 4 MG/0.5ML	Tier 1				
SUMATRIPTAN INJ 6/0.5ML	SUMATRIPTAN SUCCINATE INJ 6 MG/0.5ML	Tier 1				
SUMATRIPTAN INJ 6MG/.5ML	SUMATRIPTAN SUCCINATE INJ 6 MG/0.5ML	Tier 1				
SUMATRIPTAN INJ 6MG/.5ML	SUMATRIPTAN SUCCINATE SOLUTION AUTO-INJECTOR 6 MG/0.5ML	Tier 1				
SUMATRIPTAN INJ 6MG/0.5	SUMATRIPTAN SUCCINATE INJ 6 MG/0.5ML	Tier 1				
SUMATRIPTAN INJ 6MG/0.5	SUMATRIPTAN SUCCINATE SOLUTION AUTO-INJECTOR 6 MG/0.5ML	Tier 1				
SUMATRIPTAN INJ 6MG/0.5	SUMATRIPTAN SUCCINATE SOLUTION CARTRIDGE 6 MG/0.5ML	Tier 1				
SUMATRIPTAN SPR 20MG/ACT	SUMATRIPTAN NASAL SPRAY 20 MG/ACT	Tier 1				
SUMATRIPTAN SPR 5MG/ACT	SUMATRIPTAN NASAL SPRAY 5 MG/ACT	Tier 1				
SUMATRIPTAN TAB 100MG	SUMATRIPTAN SUCCINATE TAB 100 MG	Tier 1				
SUMATRIPTAN TAB 25MG	SUMATRIPTAN SUCCINATE TAB 25 MG	Tier 1				
SUMATRIPTAN TAB 50MG	SUMATRIPTAN SUCCINATE TAB 50 MG	Tier 1				
TOSYMRA SOL 10MG	SUMATRIPTAN NASAL SPRAY 10 MG/ACT	Tier 3/4				
ZEMBRACE SYM INJ 3/0.5ML	SUMATRIPTAN SUCCINATE SOLUTION AUTO-INJECTOR 3 MG/0.5ML	Tier 3/4				
ZOLMITRIPTAN TAB 2.5 MG	ZOLMITRIPTAN ORALLY DISINTEGRATING TAB 2.5 MG	Tier 1				
ZOLMITRIPTAN TAB 2.5MG	ZOLMITRIPTAN TAB 2.5 MG	Tier 1				
ZOLMITRIPTAN TAB 5MG	ZOLMITRIPTAN TAB 5 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ZOLMITRIPTAN TAB 5MG ODT	ZOLMITRIPTAN ORALLY DISINTEGRATING TAB 5 MG	Tier 1				
ZOMIG SPR 2.5MG	ZOLMITRIPTAN NASAL SPRAY 2.5 MG/SPRAY UNIT	Tier 2				
ZOMIG SPR 5MG	ZOLMITRIPTAN NASAL SPRAY 5 MG/SPRAY UNIT	Tier 1				
Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm						
BACLOFEN TAB 10MG	BACLOFEN TAB 10 MG	Tier 1				
BACLOFEN TAB 20MG	BACLOFEN TAB 20 MG	Tier 1				
CARISOPRODOL TAB 250MG	CARISOPRODOL TAB 250 MG	Tier 1				
CARISOPRODOL TAB 350MG	CARISOPRODOL TAB 350 MG	Tier 1				
CHLORZOXAZON TAB 375MG	CHLORZOXAZONE TAB 375 MG	Tier 1				
CHLORZOXAZON TAB 500MG	CHLORZOXAZONE TAB 500 MG	Tier 1				
CHLORZOXAZON TAB 750MG	CHLORZOXAZONE TAB 750 MG	Tier 1				
CYCLOBENZAPR TAB 10MG	CYCLOBENZAPRINE HCL TAB 10 MG	Tier 1				
CYCLOBENZAPR TAB 5MG	CYCLOBENZAPRINE HCL TAB 5 MG	Tier 1				
DANTRIUM CAP 25MG	DANTROLENE SODIUM CAP 25 MG	Tier 3/4				
DANTROLENE CAP 100MG	DANTROLENE SODIUM CAP 100 MG	Tier 1				
DANTROLENE CAP 25MG	DANTROLENE SODIUM CAP 25 MG	Tier 1				
DANTROLENE CAP 50MG	DANTROLENE SODIUM CAP 50 MG	Tier 1				
METAXALONE TAB 400MG	METAXALONE TAB 400 MG	Tier 1				
METAXALONE TAB 800MG	METAXALONE TAB 800 MG	Tier 1				
METHOCARBAM TAB 500MG	METHOCARBAMOL TAB 500 MG	Tier 1				
METHOCARBAM TAB 750MG	METHOCARBAMOL TAB 750 MG	Tier 1				
METHOCARBAMO TAB 1000MG	METHOCARBAMOL TAB 1000 MG	Tier 1				
ORPHENADRINE TAB 100MG ER	ORPHENADRINE CITRATE TAB ER 12HR 100 MG	Tier 1				
TANLOR TAB 1000MG	METHOCARBAMOL TAB 1000 MG	Tier 3				
TIZANIDINE CAP 2MG	TIZANIDINE HCL CAP 2 MG (BASE EQUIVALENT)	Tier 1				
TIZANIDINE CAP 4MG	TIZANIDINE HCL CAP 4 MG (BASE EQUIVALENT)	Tier 1				
TIZANIDINE CAP 6MG	TIZANIDINE HCL CAP 6 MG (BASE EQUIVALENT)	Tier 1				
TIZANIDINE TAB 2MG	TIZANIDINE HCL TAB 2 MG (BASE EQUIVALENT)	Tier 1				
TIZANIDINE TAB 4MG	TIZANIDINE HCL TAB 4 MG (BASE EQUIVALENT)	Tier 1				
ZANAFLEX CAP 2MG	TIZANIDINE HCL CAP 2 MG (BASE EQUIVALENT)	Tier 3/4				
ZANAFLEX CAP 4MG	TIZANIDINE HCL CAP 4 MG (BASE EQUIVALENT)	Tier 3/4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ZANAFLEX CAP 6MG	TIZANIDINE HCL CAP 6 MG (BASE EQUIVALENT)	Tier 3/4				
ZANAFLEX TAB 4MG	TIZANIDINE HCL TAB 4 MG (BASE EQUIVALENT)	Tier 3/4				
Skeletal Muscle Relaxants - Pain/Swelling Management Drugs						
BACLOFEN SOL 10MG/5ML	BACLOFEN ORAL SOLN 10 MG/5ML	Tier 1	X			
BACLOFEN SOL 5MG/5ML	BACLOFEN ORAL SOLN 5 MG/5ML	Tier 1				
BACLOFEN SUS 25MG/5ML	BACLOFEN SUSP 25 MG/5ML	Tier 1	X			
BACLOFEN TAB 15MG	BACLOFEN TAB 15 MG	Tier 1				
BACLOFEN TAB 5MG	BACLOFEN TAB 5 MG	Tier 1				
OZOBAX DS SOL 10MG/5ML	BACLOFEN ORAL SOLN 10 MG/5ML	Tier 3/4	X			
Sleep Disorders, Other - Drugs for Sleeping						
ARMODAFINIL TAB 150MG	ARMODAFINIL TAB 150 MG	Tier 1		X		
ARMODAFINIL TAB 200MG	ARMODAFINIL TAB 200 MG	Tier 1		X		
ARMODAFINIL TAB 250MG	ARMODAFINIL TAB 250 MG	Tier 1		X		
ARMODAFINIL TAB 50MG	ARMODAFINIL TAB 50 MG	Tier 1		X		
BELSOMRA TAB 10MG	SUVOREXANT TAB 10 MG	Tier 3/4		X		
BELSOMRA TAB 15MG	SUVOREXANT TAB 15 MG	Tier 3/4		X		
BELSOMRA TAB 20MG	SUVOREXANT TAB 20 MG	Tier 3/4		X		
BELSOMRA TAB 5MG	SUVOREXANT TAB 5 MG	Tier 3/4		X		
DOXEPIN TAB 3MG	DOXEPIN HCL (SLEEP) TAB 3 MG (BASE EQUIV)	Tier 1		X		
DOXEPIN TAB 6MG	DOXEPIN HCL (SLEEP) TAB 6 MG (BASE EQUIV)	Tier 1		X		
HETLIOZ CAP 20MG	TASIMELTEON CAPSULE 20 MG	Tier 3/4	X	X		
HETLIOZ LQ SUS 4MG/ML	TASIMELTEON ORAL SUSP 4 MG/ML	Tier 3/4	X	X		
LUMRYZ PAK 6GM	SODIUM OXYBATE PACK FOR ORAL ER SUSP 6 GM	Tier 3/4	X	X		
LUMRYZ PAK 7.5GM	SODIUM OXYBATE PACK FOR ORAL ER SUSP 7.5 GM	Tier 3/4	X	X		
LUMRYZ PAK 9GM	SODIUM OXYBATE PACK FOR ORAL ER SUSP 9 GM	Tier 3/4	X	X		
LUMRYZ PAK STARTER	SODIUM OXYBATE PACK FOR ER SUSP 4.5 & 6 & 7.5 GM STARTER PAK	Tier 3/4	X	X		
LUMRYZ PKG 4.5GM	SODIUM OXYBATE PACK FOR ORAL ER SUSP 4.5 GM	Tier 3/4	X	X		
MODAFINIL TAB 100MG	MODAFINIL TAB 100 MG	Tier 1		X		
MODAFINIL TAB 200MG	MODAFINIL TAB 200 MG	Tier 1		X		
RAMELTEON TAB 8MG	RAMELTEON TAB 8 MG	Tier 1		X		
SILENOR TAB 3MG	DOXEPIN HCL (SLEEP) TAB 3 MG (BASE EQUIV)	Tier 3/4		X		

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
SILENOR TAB 6MG	DOXEPIN HCL (SLEEP) TAB 6 MG (BASE EQUIV)	Tier 3/4		X		
SOD OXYBATE SOL 0.5G/ML	SODIUM OXYBATE ORAL SOLUTION 500 MG/ML	Tier 1	X	X		
SOD OXYBATE SOL 0.5G/ML	SODIUM OXYBATE ORAL SOLUTION 500 MG/ML	Tier 3/4	X	X		
SOD OXYBATE SOL 500MG/ML	SODIUM OXYBATE ORAL SOLUTION 500 MG/ML	Tier 3/4	X	X		
SUNOSI TAB 150MG	SOLRIAMFETOL HCL TAB 150 MG (BASE EQUIV)	Tier 2	X	X		
SUNOSI TAB 75MG	SOLRIAMFETOL HCL TAB 75 MG (BASE EQUIV)	Tier 2	X	X		
TASIMELTEON CAP 20MG	TASIMELTEON CAPSULE 20 MG	Tier 1	X	X		
WAKIX TAB 17.8MG	PITOLISANT HCL TAB 17.8 MG (BASE EQUIVALENT)	Tier 3/4	X	X		
WAKIX TAB 4.45MG	PITOLISANT HCL TAB 4.45 MG (BASE EQUIVALENT)	Tier 3/4	X	X		
XYWAV SOL 0.5GM/ML	CALCIUM, MAG, POTASSIUM, & SOD OXYBATES ORAL SOLN 500 MG/ML	Tier 3/4	X	X		

Smoking Cessation Agents - Deterrents

BUPROPION TAB 150MG SR	BUPROPION HCL (SMOKING DETERRENT) TAB ER 12HR 150 MG	HCR				
CVS NICOTINE DIS 14MG/24H	NICOTINE TD PATCH 24HR 14 MG/24HR	HCR				
CVS NICOTINE DIS 21MG/24H	NICOTINE TD PATCH 24HR 21 MG/24HR	HCR				
CVS NICOTINE DIS 7MG/24HR	NICOTINE TD PATCH 24HR 7 MG/24HR	HCR				
CVS NICOTINE GUM 2MG CINN	NICOTINE POLACRILEX GUM 2 MG	HCR				
CVS NICOTINE GUM 2MG MINT	NICOTINE POLACRILEX GUM 2 MG	HCR				
CVS NICOTINE GUM 2MG ORIG	NICOTINE POLACRILEX GUM 2 MG	HCR				
CVS NICOTINE GUM 2MGFRUIT	NICOTINE POLACRILEX GUM 2 MG	HCR				
CVS NICOTINE GUM 4MG	NICOTINE POLACRILEX GUM 4 MG	HCR				
CVS NICOTINE GUM 4MG CINN	NICOTINE POLACRILEX GUM 4 MG	HCR				
CVS NICOTINE GUM 4MG MINT	NICOTINE POLACRILEX GUM 4 MG	HCR				
CVS NICOTINE GUM 4MG ORIG	NICOTINE POLACRILEX GUM 4 MG	HCR				
CVS NICOTINE GUM 4MGFRUIT	NICOTINE POLACRILEX GUM 4 MG	HCR				
CVS NICOTINE LOZ 2MG	NICOTINE POLACRILEX LOZENGE 2 MG	HCR				
CVS NICOTINE LOZ 2MG MINT	NICOTINE POLACRILEX LOZENGE 2 MG	HCR				
CVS NICOTINE LOZ 4MG MINT	NICOTINE POLACRILEX LOZENGE 4 MG	HCR				
EQ NICOTINE DIS 14MG/24H	NICOTINE TD PATCH 24HR 14 MG/24HR	HCR				
EQ NICOTINE DIS 21MG/24H	NICOTINE TD PATCH 24HR 21 MG/24HR	HCR				
EQ NICOTINE DIS 7MG/24HR	NICOTINE TD PATCH 24HR 7 MG/24HR	HCR				
EQ NICOTINE GUM 2MG CINN	NICOTINE POLACRILEX GUM 2 MG	HCR				

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

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

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
NICOTINE POL GUM 4MG MINT	NICOTINE POLACRILEX GUM 4 MG	HCR				
NICOTINE POL GUM 4MG ORIG	NICOTINE POLACRILEX GUM 4 MG	HCR				
NICOTINE POL GUM 4MG REF	NICOTINE POLACRILEX GUM 4 MG	HCR				
NICOTINE POL GUM 4MG STRT	NICOTINE POLACRILEX GUM 4 MG	HCR				
NICOTINE POL GUM 4MGFRUIT	NICOTINE POLACRILEX GUM 4 MG	HCR				
NICOTINE POL LOZ 2MG CHRY	NICOTINE POLACRILEX LOZENGE 2 MG	HCR				
NICOTINE POL LOZ 2MG CINN	NICOTINE POLACRILEX LOZENGE 2 MG	HCR				
NICOTINE POL LOZ 2MG MINI	NICOTINE POLACRILEX LOZENGE 2 MG	HCR				
NICOTINE POL LOZ 2MG MINT	NICOTINE POLACRILEX LOZENGE 2 MG	HCR				
NICOTINE POL LOZ 4MG CHRY	NICOTINE POLACRILEX LOZENGE 4 MG	HCR				
NICOTINE POL LOZ 4MG CINN	NICOTINE POLACRILEX LOZENGE 4 MG	HCR				
NICOTINE POL LOZ 4MG MINT	NICOTINE POLACRILEX LOZENGE 4 MG	HCR				
NICOTINE SYS KIT TRANSDER	NICOTINE TD PATCH 24 HR KIT 21-14-7 MG/24HR	HCR				
NICOTINE TD DIS 14MG/24H	NICOTINE TD PATCH 24HR 14 MG/24HR	HCR				
NICOTINE TD DIS 21MG/24H	NICOTINE TD PATCH 24HR 21 MG/24HR	HCR				
NICOTINE TD DIS 7MG/24HR	NICOTINE TD PATCH 24HR 7 MG/24HR	HCR				
NICOTINE TD DIS STEP 1	NICOTINE TD PATCH 24HR 21 MG/24HR	HCR				
NICOTINE TD DIS STEP 2	NICOTINE TD PATCH 24HR 14 MG/24HR	HCR				
NICOTINE TD DIS STEP 3	NICOTINE TD PATCH 24HR 7 MG/24HR	HCR				
NICOTROL NS SPR 10MG/ML	NICOTINE NASAL SPRAY 10 MG/ML (0.5 MG/SPRAY)	HCR				
QC NICOTINE DIS 14MG/24H	NICOTINE TD PATCH 24HR 14 MG/24HR	HCR				
QC NICOTINE DIS 21MG/24H	NICOTINE TD PATCH 24HR 21 MG/24HR	HCR				
RA NICOTINE DIS 21MG/24H	NICOTINE TD PATCH 24HR 21 MG/24HR	HCR				
RA NICOTINE GUM 4MG	NICOTINE POLACRILEX GUM 4 MG	HCR				
RA NICOTINE LOZ 2MG MINT	NICOTINE POLACRILEX LOZENGE 2 MG	HCR				
RA NICOTINE LOZ 4MG MINT	NICOTINE POLACRILEX LOZENGE 4 MG	HCR				
SM NICOTINE DIS 14MG/24H	NICOTINE TD PATCH 24HR 14 MG/24HR	HCR				
SM NICOTINE DIS 21MG/24H	NICOTINE TD PATCH 24HR 21 MG/24HR	HCR				
SM NICOTINE DIS 7MG/24HR	NICOTINE TD PATCH 24HR 7 MG/24HR	HCR				
SM NICOTINE GUM 2MG	NICOTINE POLACRILEX GUM 2 MG	HCR				
SM NICOTINE GUM 2MG MINT	NICOTINE POLACRILEX GUM 2 MG	HCR				
SM NICOTINE GUM 4MG	NICOTINE POLACRILEX GUM 4 MG	HCR				
SM NICOTINE GUM 4MG MINT	NICOTINE POLACRILEX GUM 4 MG	HCR				
SM NICOTINE LOZ 2MG CHRY	NICOTINE POLACRILEX LOZENGE 2 MG	HCR				
SM NICOTINE LOZ 4MG	NICOTINE POLACRILEX LOZENGE 4 MG	HCR				
SM NICOTINE LOZ 4MG CINN	NICOTINE POLACRILEX LOZENGE 4 MG	HCR				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
THRIVE GUM 2MG MINT	NICOTINE POLACRILEX GUM 2 MG	HCR				
VARENICLINE TAB 0.5& 1MG	VARENICLINE TARTRATE TAB 11 X 0.5 MG & 42 X 1 MG START PACK	HCR				
VARENICLINE TAB 0.5MG	VARENICLINE TARTRATE TAB 0.5 MG (BASE EQUIV)	HCR				
VARENICLINE TAB 1MG	VARENICLINE TARTRATE TAB 1 MG (BASE EQUIV)	HCR				
Sodium Channel Agents - Seizure Control Drugs						
APTOM TAB 200MG	ESLICARBAZEPINE ACETATE TAB 200 MG	Tier 3/4	X			
APTOM TAB 400MG	ESLICARBAZEPINE ACETATE TAB 400 MG	Tier 3/4	X			
APTOM TAB 600MG	ESLICARBAZEPINE ACETATE TAB 600 MG	Tier 3/4	X			
APTOM TAB 800MG	ESLICARBAZEPINE ACETATE TAB 800 MG	Tier 3/4	X			
BANZEL SUS 40MG/ML	RUFINAMIDE SUSP 40 MG/ML	Tier 3/4	X			
BANZEL TAB 200MG	RUFINAMIDE TAB 200 MG	Tier 3/4	X			
BANZEL TAB 400MG	RUFINAMIDE TAB 400 MG	Tier 3/4	X			
CARBAMAZEPIN CAP 100MG ER	CARBAMAZEPINE CAP ER 12HR 100 MG	Tier 1				
CARBAMAZEPIN CAP 200MG ER	CARBAMAZEPINE CAP ER 12HR 200 MG	Tier 1				
CARBAMAZEPIN CAP 300MG ER	CARBAMAZEPINE CAP ER 12HR 300 MG	Tier 1				
CARBAMAZEPIN CHW 100MG	CARBAMAZEPINE CHEW TAB 100 MG	Tier 1				
CARBAMAZEPIN CHW 200MG	CARBAMAZEPINE CHEW TAB 200 MG	Tier 1				
CARBAMAZEPIN SUS 100/5ML	CARBAMAZEPINE SUSP 100 MG/5ML	Tier 1				
CARBAMAZEPIN TAB 100MG ER	CARBAMAZEPINE TAB ER 12HR 100 MG	Tier 1				
CARBAMAZEPIN TAB 200MG	CARBAMAZEPINE TAB 200 MG	Tier 1				
CARBAMAZEPIN TAB 200MG ER	CARBAMAZEPINE TAB ER 12HR 200 MG	Tier 1				
CARBAMAZEPIN TAB 400MG ER	CARBAMAZEPINE TAB ER 12HR 400 MG	Tier 1				
CARBATROL CAP 100MG	CARBAMAZEPINE CAP ER 12HR 100 MG	Tier 3/4				
CARBATROL CAP 200MG	CARBAMAZEPINE CAP ER 12HR 200 MG	Tier 3/4				
CARBATROL CAP 300MG	CARBAMAZEPINE CAP ER 12HR 300 MG	Tier 3/4				
DILANTIN CAP 100MG	PHENYTOIN SODIUM EXTENDED CAP 100 MG	Tier 3				
DILANTIN CAP 30MG	PHENYTOIN SODIUM EXTENDED CAP 30 MG	Tier 3				
DILANTIN CHW 50MG	PHENYTOIN CHEW TAB 50 MG	Tier 3				
DILANTIN-125 SUS 125/5ML	PHENYTOIN SUSP 125 MG/5ML	Tier 3				
EPITOL TAB 200MG	CARBAMAZEPINE TAB 200 MG	Tier 1				
ESLICARBAZEP TAB 200MG	ESLICARBAZEPINE ACETATE TAB 200 MG	Tier 1	X			
ESLICARBAZEP TAB 400MG	ESLICARBAZEPINE ACETATE TAB 400 MG	Tier 1	X			
ESLICARBAZEP TAB 600MG	ESLICARBAZEPINE ACETATE TAB 600 MG	Tier 1	X			
ESLICARBAZEP TAB 800MG	ESLICARBAZEPINE ACETATE TAB 800 MG	Tier 1	X			
LACOSAMIDE SOL 100/10ML	LACOSAMIDE ORAL SOLUTION 10 MG/ML	Tier 1				
LACOSAMIDE SOL 10MG/ML	LACOSAMIDE ORAL SOLUTION 10 MG/ML	Tier 1				

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LACOSAMIDE SOL 150/15ML	LACOSAMIDE ORAL SOLUTION 10 MG/ML	Tier 1				
LACOSAMIDE SOL 200/20ML	LACOSAMIDE ORAL SOLUTION 10 MG/ML	Tier 1				
LACOSAMIDE SOL 50/5ML	LACOSAMIDE ORAL SOLUTION 10 MG/ML	Tier 1				
LACOSAMIDE SOL 50MG/5ML	LACOSAMIDE ORAL SOLUTION 10 MG/ML	Tier 1				
LACOSAMIDE TAB 100MG	LACOSAMIDE TAB 100 MG	Tier 1				
LACOSAMIDE TAB 150MG	LACOSAMIDE TAB 150 MG	Tier 1				
LACOSAMIDE TAB 200MG	LACOSAMIDE TAB 200 MG	Tier 1				
LACOSAMIDE TAB 50MG	LACOSAMIDE TAB 50 MG	Tier 1				
MOTPOLY XR CAP 100MG	LACOSAMIDE CAP ER 24HR 100 MG	Tier 3	X			
MOTPOLY XR CAP 150MG	LACOSAMIDE CAP ER 24HR 150 MG	Tier 3	X			
MOTPOLY XR CAP 200MG	LACOSAMIDE CAP ER 24HR 200 MG	Tier 3	X			
OXCARBAZEPIN SUS 300/5ML	OXCARBAZEPINE SUSP 300 MG/5ML (60 MG/ML)	Tier 1				
OXCARBAZEPIN TAB 150MG	OXCARBAZEPINE TAB 150 MG	Tier 1				
OXCARBAZEPIN TAB 300MG	OXCARBAZEPINE TAB 300 MG	Tier 1				
OXCARBAZEPIN TAB 600MG	OXCARBAZEPINE TAB 600 MG	Tier 1				
PHENYTEK CAP 200MG	PHENYTOIN SODIUM EXTENDED CAP 200 MG	Tier 1				
PHENYTEK CAP 300MG	PHENYTOIN SODIUM EXTENDED CAP 300 MG	Tier 1				
PHENYTOIN CHW 50MG	PHENYTOIN CHEW TAB 50 MG	Tier 1				
PHENYTOIN SUS 125/5ML	PHENYTOIN SUSP 125 MG/5ML	Tier 1				
PHENYTOIN EX CAP 100MG	PHENYTOIN SODIUM EXTENDED CAP 100 MG	Tier 1				
PHENYTOIN EX CAP 200MG	PHENYTOIN SODIUM EXTENDED CAP 200 MG	Tier 1				
PHENYTOIN EX CAP 300MG	PHENYTOIN SODIUM EXTENDED CAP 300 MG	Tier 1				
RUFINAMIDE SUS 40MG/ML	RUFINAMIDE SUSP 40 MG/ML	Tier 1				
RUFINAMIDE TAB 200MG	RUFINAMIDE TAB 200 MG	Tier 1	X			
RUFINAMIDE TAB 400MG	RUFINAMIDE TAB 400 MG	Tier 1	X			
TEGRETOL SUS 100/5ML	CARBAMAZEPINE SUSP 100 MG/5ML	Tier 3/4				
TEGRETOL TAB 200MG	CARBAMAZEPINE TAB 200 MG	Tier 3/4				
TEGRETOL-XR TAB 100MG	CARBAMAZEPINE TAB ER 12HR 100 MG	Tier 3/4				
TEGRETOL-XR TAB 200MG	CARBAMAZEPINE TAB ER 12HR 200 MG	Tier 3/4				
TEGRETOL-XR TAB 400MG	CARBAMAZEPINE TAB ER 12HR 400 MG	Tier 3/4				
TRILEPTAL SUS 300/5ML	OXCARBAZEPINE SUSP 300 MG/5ML (60 MG/ML)	Tier 3/4				
TRILEPTAL TAB 150MG	OXCARBAZEPINE TAB 150 MG	Tier 3/4				
TRILEPTAL TAB 300MG	OXCARBAZEPINE TAB 300 MG	Tier 3/4				
TRILEPTAL TAB 600MG	OXCARBAZEPINE TAB 600 MG	Tier 3/4				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
VIMPAT SOL 10MG/ML	LACOSAMIDE ORAL SOLUTION 10 MG/ML	Tier 3/4	X			
VIMPAT TAB 100MG	LACOSAMIDE TAB 100 MG	Tier 3/4	X			
VIMPAT TAB 150MG	LACOSAMIDE TAB 150 MG	Tier 3/4	X			
VIMPAT TAB 200MG	LACOSAMIDE TAB 200 MG	Tier 3/4	X			
VIMPAT TAB 50MG	LACOSAMIDE TAB 50 MG	Tier 3/4	X			
SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/Serotonin and Norepinephrine Reuptake Inhibitor) - Antidepressants						
CITALOPRAM CAP 30MG	CITALOPRAM HYDROBROMIDE CAP 30 MG	Tier 3/4				
CITALOPRAM SOL 10MG/5ML	CITALOPRAM HYDROBROMIDE ORAL SOLN 10 MG/5ML	Tier 1				
CITALOPRAM TAB 10MG	CITALOPRAM HYDROBROMIDE TAB 10 MG (BASE EQUIV)	Tier 1				
CITALOPRAM TAB 20MG	CITALOPRAM HYDROBROMIDE TAB 20 MG (BASE EQUIV)	Tier 1				
CITALOPRAM TAB 40MG	CITALOPRAM HYDROBROMIDE TAB 40 MG (BASE EQUIV)	Tier 1				
DESVENLAFAX TAB 100MG ER	DESVENLAFAXINE SUCCINATE TAB ER 24HR 100 MG (BASE EQUIV)	Tier 1				
DESVENLAFAX TAB 100MG ER	DESVENLAFAXINE TAB ER 24HR 100 MG	Tier 3/4				
DESVENLAFAX TAB 25MG ER	DESVENLAFAXINE SUCCINATE TAB ER 24HR 25 MG (BASE EQUIV)	Tier 1				
DESVENLAFAX TAB 50MG ER	DESVENLAFAXINE SUCCINATE TAB ER 24HR 50 MG (BASE EQUIV)	Tier 1				
DESVENLAFAX TAB 50MG ER	DESVENLAFAXINE TAB ER 24HR 50 MG	Tier 3/4				
DRIZALMA CAP 20MG DR	DULOXETINE HCL CAP DELAYED RELEASE SPRINKLE 20 MG (BASE EQ)	Tier 3/4		X		
DRIZALMA CAP 30MG DR	DULOXETINE HCL CAP DELAYED RELEASE SPRINKLE 30 MG (BASE EQ)	Tier 3/4		X		
DRIZALMA CAP 40MG DR	DULOXETINE HCL CAP DELAYED RELEASE SPRINKLE 40 MG (BASE EQ)	Tier 3/4		X		
DRIZALMA CAP 60MG DR	DULOXETINE HCL CAP DELAYED RELEASE SPRINKLE 60 MG (BASE EQ)	Tier 3/4		X		
ESCITALOPRAM SOL 5MG/5ML	ESCITALOPRAM OXALATE SOLN 5 MG/5ML (BASE EQUIV)	Tier 1				
ESCITALOPRAM TAB 10MG	ESCITALOPRAM OXALATE TAB 10 MG (BASE EQUIV)	Tier 1				
ESCITALOPRAM TAB 20MG	ESCITALOPRAM OXALATE TAB 20 MG (BASE EQUIV)	Tier 1				
ESCITALOPRAM TAB 5MG	ESCITALOPRAM OXALATE TAB 5 MG (BASE EQUIV)	Tier 1				
FETZIMA CAP 120MG	LEVOMILNACIPRAN HCL CAP ER 24HR 120 MG (BASE EQUIVALENT)	Tier 3/4		X	X	
FETZIMA CAP 20MG	LEVOMILNACIPRAN HCL CAP ER 24HR 20 MG (BASE EQUIVALENT)	Tier 3/4		X	X	

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
FETZIMA CAP 40MG	LEVOMILNACIPRAN HCL CAP ER 24HR 40 MG (BASE EQUIVALENT)	Tier 3/4		X	X	
FETZIMA CAP 80MG	LEVOMILNACIPRAN HCL CAP ER 24HR 80 MG (BASE EQUIVALENT)	Tier 3/4		X	X	
FETZIMA CAP TITRATIO	LEVOMILNACIPRAN HCL CAP ER 24HR 20 & 40 MG THERAPY PACK	Tier 3/4		X	X	
FLUOXETINE CAP 10MG	FLUOXETINE HCL CAP 10 MG	Tier 1				
FLUOXETINE CAP 20MG	FLUOXETINE HCL CAP 20 MG	Tier 1				
FLUOXETINE CAP 40MG	FLUOXETINE HCL CAP 40 MG	Tier 1				
FLUOXETINE CAP 90MG DR	FLUOXETINE HCL CAP DELAYED RELEASE 90 MG	Tier 1		X		
FLUOXETINE SOL 20MG/5ML	FLUOXETINE HCL SOLUTION 20 MG/5ML	Tier 1				
FLUOXETINE TAB 10MG	FLUOXETINE HCL TAB 10 MG	Tier 1				
FLUOXETINE TAB 10MG	FLUOXETINE HCL (PMDD) TAB 10 MG	Tier 1				
FLUOXETINE TAB 20MG	FLUOXETINE HCL TAB 20 MG	Tier 1				
FLUOXETINE TAB 20MG	FLUOXETINE HCL (PMDD) TAB 20 MG	Tier 1				
FLUOXETINE TAB 60MG	FLUOXETINE HCL TAB 60 MG	Tier 1				
FLUVOXAMINE CAP 100MG ER	FLUVOXAMINE MALEATE CAP ER 24HR 100 MG	Tier 1				
FLUVOXAMINE CAP 150MG ER	FLUVOXAMINE MALEATE CAP ER 24HR 150 MG	Tier 1				
FLUVOXAMINE TAB 100MG	FLUVOXAMINE MALEATE TAB 100 MG	Tier 1				
FLUVOXAMINE TAB 25MG	FLUVOXAMINE MALEATE TAB 25 MG	Tier 1				
FLUVOXAMINE TAB 50MG	FLUVOXAMINE MALEATE TAB 50 MG	Tier 1				
NEFAZODONE TAB 100MG	NEFAZODONE HCL TAB 100 MG	Tier 1				
NEFAZODONE TAB 150MG	NEFAZODONE HCL TAB 150 MG	Tier 1				
NEFAZODONE TAB 200MG	NEFAZODONE HCL TAB 200 MG	Tier 1				
NEFAZODONE TAB 250MG	NEFAZODONE HCL TAB 250 MG	Tier 1				
NEFAZODONE TAB 50MG	NEFAZODONE HCL TAB 50 MG	Tier 1				
OLANZA/FLUOX CAP 12-25MG	OLANZAPINE-FLUOXETINE HCL CAP 12-25 MG	Tier 1		X		
OLANZA/FLUOX CAP 12-50MG	OLANZAPINE-FLUOXETINE HCL CAP 12-50 MG	Tier 1		X		
OLANZA/FLUOX CAP 3-25MG	OLANZAPINE-FLUOXETINE HCL CAP 3-25 MG	Tier 1		X		
OLANZA/FLUOX CAP 6-25MG	OLANZAPINE-FLUOXETINE HCL CAP 6-25 MG	Tier 1		X		
OLANZA/FLUOX CAP 6-50MG	OLANZAPINE-FLUOXETINE HCL CAP 6-50 MG	Tier 1		X		
PAROXETIN ER TAB 12.5MG	PAROXETINE HCL TAB ER 24HR 12.5 MG	Tier 1				
PAROXETIN ER TAB 37.5MG	PAROXETINE HCL TAB ER 24HR 37.5 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PAROXETINE CAP 75MG	PAROXETINE MESYLATE CAP 7.5 MG (BASE EQUIV)	Tier 1		X		
PAROXETINE SUS 10MG/5ML	PAROXETINE HCL ORAL SUSP 10 MG/5ML (BASE EQUIV)	Tier 1				
PAROXETINE TAB 10MG	PAROXETINE HCL TAB 10 MG	Tier 1				
PAROXETINE TAB 20MG	PAROXETINE HCL TAB 20 MG	Tier 1				
PAROXETINE TAB 25MG ER	PAROXETINE HCL TAB ER 24HR 25 MG	Tier 1				
PAROXETINE TAB 30MG	PAROXETINE HCL TAB 30 MG	Tier 1				
PAROXETINE TAB 40MG	PAROXETINE HCL TAB 40 MG	Tier 1				
PAXIL SUS 10MG/5ML	PAROXETINE HCL ORAL SUSP 10 MG/5ML (BASE EQUIV)	Tier 3/4				
RALDESY SOL 10MG/ML	TRAZODONE HCL ORAL SOLN 50 MG/5ML	Tier 3/4	X			
SERTRALINE CAP 150MG	SERTRALINE HCL CAP 150 MG	Tier 1				
SERTRALINE CAP 200MG	SERTRALINE HCL CAP 200 MG	Tier 1				
SERTRALINE CON 20MG/ML	SERTRALINE HCL ORAL CONCENTRATE FOR SOLUTION 20 MG/ML	Tier 1				
SERTRALINE TAB 100MG	SERTRALINE HCL TAB 100 MG	Tier 1				
SERTRALINE TAB 25MG	SERTRALINE HCL TAB 25 MG	Tier 1				
SERTRALINE TAB 50MG	SERTRALINE HCL TAB 50 MG	Tier 1				
SYMBYAX CAP 3-25MG	OLANZAPINE-FLUOXETINE HCL CAP 3-25 MG	Tier 3/4		X		
SYMBYAX CAP 6-25MG	OLANZAPINE-FLUOXETINE HCL CAP 6-25 MG	Tier 3/4		X		
TRAZODONE TAB 100MG	TRAZODONE HCL TAB 100 MG	Tier 1				
TRAZODONE TAB 150MG	TRAZODONE HCL TAB 150 MG	Tier 1				
TRAZODONE TAB 300MG	TRAZODONE HCL TAB 300 MG	Tier 1				
TRAZODONE TAB 50MG	TRAZODONE HCL TAB 50 MG	Tier 1				
TRINTELLIX TAB 10MG	VORTIOXETINE HBR TAB 10 MG (BASE EQUIV)	Tier 3/4		X	X	
TRINTELLIX TAB 20MG	VORTIOXETINE HBR TAB 20 MG (BASE EQUIV)	Tier 3/4		X	X	
TRINTELLIX TAB 5MG	VORTIOXETINE HBR TAB 5 MG (BASE EQUIV)	Tier 3/4		X	X	
VENLAFAXINE CAP 150MG ER	VENLAFAXINE HCL CAP ER 24HR 150 MG (BASE EQUIVALENT)	Tier 1				
VENLAFAXINE CAP 37.5 ER	VENLAFAXINE HCL CAP ER 24HR 37.5 MG (BASE EQUIVALENT)	Tier 1				
VENLAFAXINE CAP 75MG ER	VENLAFAXINE HCL CAP ER 24HR 75 MG (BASE EQUIVALENT)	Tier 1				
VENLAFAXINE TAB 100MG	VENLAFAXINE HCL TAB 100 MG (BASE EQUIVALENT)	Tier 1				
VENLAFAXINE TAB 150MG ER	VENLAFAXINE HCL TAB ER 24HR 150 MG (BASE EQUIVALENT)	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
VENLAFAXINE TAB 225MG ER	VENLAFAXINE HCL TAB ER 24HR 225 MG (BASE EQUIVALENT)	Tier 1				
VENLAFAXINE TAB 25MG	VENLAFAXINE HCL TAB 25 MG (BASE EQUIVALENT)	Tier 1				
VENLAFAXINE TAB 37.5 ER	VENLAFAXINE HCL TAB ER 24HR 37.5 MG (BASE EQUIVALENT)	Tier 1				
VENLAFAXINE TAB 37.5MG	VENLAFAXINE HCL TAB 37.5 MG (BASE EQUIVALENT)	Tier 1				
VENLAFAXINE TAB 50MG	VENLAFAXINE HCL TAB 50 MG (BASE EQUIVALENT)	Tier 1				
VENLAFAXINE TAB 75MG	VENLAFAXINE HCL TAB 75 MG (BASE EQUIVALENT)	Tier 1				
VENLAFAXINE TAB 75MG ER	VENLAFAXINE HCL TAB ER 24HR 75 MG (BASE EQUIVALENT)	Tier 1				
VILAZODONE TAB 10MG	VILAZODONE HCL TAB 10 MG	Tier 1				
VILAZODONE TAB 20MG	VILAZODONE HCL TAB 20 MG	Tier 1				
VILAZODONE TAB 40MG	VILAZODONE HCL TAB 40 MG	Tier 1				
Sulfonamides - Antibiotics						
AZULFIDINE TAB 500MG	SULFASALAZINE TAB 500 MG	Tier 3/4				
AZULFIDINE TAB 500MG EN	SULFASALAZINE TAB DELAYED RELEASE 500 MG	Tier 3/4				
BACTRIM TAB 400-80MG	SULFAMETHOXAZOLE-TRIMETHOPRIM TAB 400-80 MG	Tier 3/4				
BACTRIM DS TAB 800-160	SULFAMETHOXAZOLE-TRIMETHOPRIM TAB 800-160 MG	Tier 3/4				
SMZ-TMP SUS 200-40/5	SULFAMETHOXAZOLE-TRIMETHOPRIM SUSP 200-40 MG/5ML	Tier 1				
SMZ-TMP TAB 400-80MG	SULFAMETHOXAZOLE-TRIMETHOPRIM TAB 400-80 MG	Tier 1				
SMZ/TMP DS TAB 800-160	SULFAMETHOXAZOLE-TRIMETHOPRIM TAB 800-160 MG	Tier 1				
SULFADIAZINE TAB 500MG	SULFADIAZINE TAB 500 MG	Tier 1				
SULFASALAZIN TAB 500MG	SULFASALAZINE TAB 500 MG	Tier 1				
SULFASALAZIN TAB 500MG DR	SULFASALAZINE TAB DELAYED RELEASE 500 MG	Tier 1				
SULFATRIM PD SUS 200-40/5	SULFAMETHOXAZOLE-TRIMETHOPRIM SUSP 200-40 MG/5ML	Tier 1				
Tetracyclines - Antibiotics						
AVIDOXY TAB 100MG	DOXYCYCLINE MONOHYDRATE TAB 100 MG	Tier 3/4				
AVIDOXY DK KIT	*DOXYCYCLINE TAB 100 MG & SUNCREEN & SAL ACID WASH 2% KIT**	Tier 3				
DEMECLOCYCL TAB 150MG	DEMECLOCYCLINE HCL TAB 150 MG	Tier 1				
DEMECLOCYCL TAB 300MG	DEMECLOCYCLINE HCL TAB 300 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
DORYX MPC TAB 120MG	DOXYCYCLINE HYCLATE TAB DELAYED RELEASE 120 MG	Tier 3/4				
DOXYCYC MONO CAP 100MG	DOXYCYCLINE MONOHYDRATE CAP 100 MG	Tier 1				
DOXYCYC MONO CAP 150MG	DOXYCYCLINE MONOHYDRATE CAP 150 MG	Tier 1				
DOXYCYC MONO CAP 50MG	DOXYCYCLINE MONOHYDRATE CAP 50 MG	Tier 1				
DOXYCYC MONO CAP 75MG	DOXYCYCLINE MONOHYDRATE CAP 75 MG	Tier 1				
DOXYCYC MONO TAB 100MG	DOXYCYCLINE MONOHYDRATE TAB 100 MG	Tier 1				
DOXYCYC MONO TAB 150MG	DOXYCYCLINE MONOHYDRATE TAB 150 MG	Tier 1				
DOXYCYC MONO TAB 50MG	DOXYCYCLINE MONOHYDRATE TAB 50 MG	Tier 1				
DOXYCYC MONO TAB 75MG	DOXYCYCLINE MONOHYDRATE TAB 75 MG	Tier 1				
DOXYCYCL HYC CAP 100MG	DOXYCYCLINE HYCLATE CAP 100 MG	Tier 1				
DOXYCYCL HYC CAP 50MG	DOXYCYCLINE HYCLATE CAP 50 MG	Tier 1				
DOXYCYCL HYC TAB 100MG	DOXYCYCLINE HYCLATE TAB 100 MG	Tier 1				
DOXYCYCL HYC TAB 100MG DR	DOXYCYCLINE HYCLATE TAB DELAYED RELEASE 100 MG	Tier 1				
DOXYCYCL HYC TAB 150MG	DOXYCYCLINE HYCLATE TAB 150 MG	Tier 1				
DOXYCYCL HYC TAB 150MG DR	DOXYCYCLINE HYCLATE TAB DELAYED RELEASE 150 MG	Tier 1				
DOXYCYCL HYC TAB 200MG DR	DOXYCYCLINE HYCLATE TAB DELAYED RELEASE 200 MG	Tier 1				
DOXYCYCL HYC TAB 20MG	DOXYCYCLINE HYCLATE TAB 20 MG	Tier 1				
DOXYCYCL HYC TAB 50MG DR	DOXYCYCLINE HYCLATE TAB DELAYED RELEASE 50 MG	Tier 1				
DOXYCYCL HYC TAB 75MG	DOXYCYCLINE HYCLATE TAB 75 MG	Tier 1				
DOXYCYCL HYC TAB 75MG DR	DOXYCYCLINE HYCLATE TAB DELAYED RELEASE 75 MG	Tier 1				
DOXYCYCL HYC TAB 80MG DR	DOXYCYCLINE HYCLATE TAB DELAYED RELEASE 80 MG	Tier 3/4				
DOXYCYCLINE SUS 25MG/5ML	DOXYCYCLINE MONOHYDRATE FOR SUSP 25 MG/5ML	Tier 1				
MINOCYCLINE CAP 100MG	MINOCYCLINE HCL CAP 100 MG	Tier 1				
MINOCYCLINE CAP 135MG ER	MINOCYCLINE HCL CAP ER 24HR 135 MG (BASE EQUIVALENT)	Tier 3/4				
MINOCYCLINE CAP 45MG ER	MINOCYCLINE HCL CAP ER 24HR 45 MG (BASE EQUIVALENT)	Tier 3/4				
MINOCYCLINE CAP 50MG	MINOCYCLINE HCL CAP 50 MG	Tier 1				
MINOCYCLINE CAP 75MG	MINOCYCLINE HCL CAP 75 MG	Tier 1				
MINOCYCLINE CAP 90MG ER	MINOCYCLINE HCL CAP ER 24HR 90 MG (BASE EQUIVALENT)	Tier 3/4				
MINOCYCLINE TAB 100MG	MINOCYCLINE HCL TAB 100 MG	Tier 1				
MINOCYCLINE TAB 105MG ER	MINOCYCLINE HCL TAB ER 24HR 105 MG	Tier 1				
MINOCYCLINE TAB 115MG ER	MINOCYCLINE HCL TAB ER 24HR 115 MG	Tier 1				

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MINOCYCLINE TAB 135MG ER	MINOCYCLINE HCL TAB ER 24HR 135 MG	Tier 1				
MINOCYCLINE TAB 45MG ER	MINOCYCLINE HCL TAB ER 24HR 45 MG	Tier 1				
MINOCYCLINE TAB 50MG	MINOCYCLINE HCL TAB 50 MG	Tier 1				
MINOCYCLINE TAB 55MG ER	MINOCYCLINE HCL TAB ER 24HR 55 MG	Tier 1				
MINOCYCLINE TAB 65MG ER	MINOCYCLINE HCL TAB ER 24HR 65 MG	Tier 1				
MINOCYCLINE TAB 75MG	MINOCYCLINE HCL TAB 75 MG	Tier 1				
MINOCYCLINE TAB 80MG ER	MINOCYCLINE HCL TAB ER 24HR 80 MG	Tier 1				
MINOCYCLINE TAB 90MG ER	MINOCYCLINE HCL TAB ER 24HR 90 MG	Tier 1				
NUZYRA TAB 150MG	OMADACYCLINE TOSYLATE TAB 150 MG (BASE EQUIVALENT)	Tier 3/4				
TETRACYCLINE CAP 250MG	TETRACYCLINE HCL CAP 250 MG	Tier 1				
TETRACYCLINE CAP 500MG	TETRACYCLINE HCL CAP 500 MG	Tier 1				
VIBRAMYCIN CAP 100MG	DOXYCYCLINE HYCLATE CAP 100 MG	Tier 3/4				
VIBRAMYCIN SUS 25MG/5ML	DOXYCYCLINE MONOHYDRATE FOR SUSP 25 MG/5ML	Tier 3/4				
XIMINO CAP 135MG ER	MINOCYCLINE HCL CAP ER 24HR 135 MG (BASE EQUIVALENT)	Tier 3/4				
XIMINO CAP 45MG ER	MINOCYCLINE HCL CAP ER 24HR 45 MG (BASE EQUIVALENT)	Tier 3/4				
XIMINO CAP 90MG ER	MINOCYCLINE HCL CAP ER 24HR 90 MG (BASE EQUIVALENT)	Tier 3/4				
Treatment Adjuncts - Supportive Chemotherapy Drugs						
MESNA TAB 400MG	MESNA TAB 400 MG	Tier 1				
MESNEX TAB 400MG	MESNA TAB 400 MG	Tier 3/4				
Treatment-Resistant - Mood Disorder Drugs						
CLOZAPINE TAB 100MG	CLOZAPINE TAB 100 MG	Tier 1				
CLOZAPINE TAB 200MG	CLOZAPINE TAB 200 MG	Tier 1				
CLOZAPINE TAB 25MG	CLOZAPINE TAB 25 MG	Tier 1				
CLOZAPINE TAB 50MG	CLOZAPINE TAB 50 MG	Tier 1				
CLOZARIL TAB 100MG	CLOZAPINE TAB 100 MG	Tier 3/4				
CLOZARIL TAB 200MG	CLOZAPINE TAB 200 MG	Tier 3/4				
CLOZARIL TAB 25MG	CLOZAPINE TAB 25 MG	Tier 3/4				
CLOZARIL TAB 50MG	CLOZAPINE TAB 50 MG	Tier 3/4				
Tricyclics - Antidepressants						
AMITRIPTYLIN TAB 100MG	AMITRIPTYLINE HCL TAB 100 MG	Tier 1				
AMITRIPTYLIN TAB 10MG	AMITRIPTYLINE HCL TAB 10 MG	Tier 1				
AMITRIPTYLIN TAB 150MG	AMITRIPTYLINE HCL TAB 150 MG	Tier 1				
AMITRIPTYLIN TAB 25MG	AMITRIPTYLINE HCL TAB 25 MG	Tier 1				
AMITRIPTYLIN TAB 50MG	AMITRIPTYLINE HCL TAB 50 MG	Tier 1				

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AMITRIPTYLIN TAB 75MG	AMITRIPTYLINE HCL TAB 75 MG	Tier 1				
AMOXAPINE TAB 100MG	AMOXAPINE TAB 100 MG	Tier 1				
AMOXAPINE TAB 150MG	AMOXAPINE TAB 150 MG	Tier 1				
AMOXAPINE TAB 25MG	AMOXAPINE TAB 25 MG	Tier 1				
AMOXAPINE TAB 50MG	AMOXAPINE TAB 50 MG	Tier 1				
CDP/AMITRIP TAB 10-25MG	CHLORDIAZEPOXIDE-AMITRIPTYLINE TAB 10-25 MG	Tier 1				
CDP/AMITRIP TAB 5-12.5MG	CHLORDIAZEPOXIDE-AMITRIPTYLINE TAB 5-12.5 MG	Tier 1				
CLOMIPRAMINE CAP 25MG	CLOMIPRAMINE HCL CAP 25 MG	Tier 1				
CLOMIPRAMINE CAP 50MG	CLOMIPRAMINE HCL CAP 50 MG	Tier 1				
CLOMIPRAMINE CAP 75MG	CLOMIPRAMINE HCL CAP 75 MG	Tier 1				
DESIPRAMINE TAB 100MG	DESIPRAMINE HCL TAB 100 MG	Tier 1				
DESIPRAMINE TAB 10MG	DESIPRAMINE HCL TAB 10 MG	Tier 1				
DESIPRAMINE TAB 150MG	DESIPRAMINE HCL TAB 150 MG	Tier 1				
DESIPRAMINE TAB 25MG	DESIPRAMINE HCL TAB 25 MG	Tier 1				
DESIPRAMINE TAB 50MG	DESIPRAMINE HCL TAB 50 MG	Tier 1				
DESIPRAMINE TAB 75MG	DESIPRAMINE HCL TAB 75 MG	Tier 1				
DOXEPIN HCL CAP 100MG	DOXEPIN HCL CAP 100 MG	Tier 1				
DOXEPIN HCL CAP 10MG	DOXEPIN HCL CAP 10 MG	Tier 1				
DOXEPIN HCL CAP 150MG	DOXEPIN HCL CAP 150 MG	Tier 1				
DOXEPIN HCL CAP 25MG	DOXEPIN HCL CAP 25 MG	Tier 1				
DOXEPIN HCL CAP 50MG	DOXEPIN HCL CAP 50 MG	Tier 1				
DOXEPIN HCL CAP 75MG	DOXEPIN HCL CAP 75 MG	Tier 1				
DOXEPIN HCL CON 10MG/ML	DOXEPIN HCL CONC 10 MG/ML	Tier 1				
IMIPRAM HCL TAB 10MG	IMIPRAMINE HCL TAB 10 MG	Tier 1				
IMIPRAM HCL TAB 25MG	IMIPRAMINE HCL TAB 25 MG	Tier 1				
IMIPRAM HCL TAB 50MG	IMIPRAMINE HCL TAB 50 MG	Tier 1				
IMIPRAM PAM CAP 100MG	IMIPRAMINE PAMOATE CAP 100 MG	Tier 1				
IMIPRAM PAM CAP 125MG	IMIPRAMINE PAMOATE CAP 125 MG	Tier 1				
IMIPRAM PAM CAP 150MG	IMIPRAMINE PAMOATE CAP 150 MG	Tier 1				
IMIPRAM PAM CAP 75MG	IMIPRAMINE PAMOATE CAP 75 MG	Tier 1				
NORPRAMIN TAB 10MG	DESIPRAMINE HCL TAB 10 MG	Tier 3/4				
NORPRAMIN TAB 25MG	DESIPRAMINE HCL TAB 25 MG	Tier 3/4				
NORTRIPTYLIN CAP 10MG	NORTRIPTYLINE HCL CAP 10 MG	Tier 1				
NORTRIPTYLIN CAP 25MG	NORTRIPTYLINE HCL CAP 25 MG	Tier 1				
NORTRIPTYLIN CAP 50MG	NORTRIPTYLINE HCL CAP 50 MG	Tier 1				
NORTRIPTYLIN CAP 75MG	NORTRIPTYLINE HCL CAP 75 MG	Tier 1				

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

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

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MENVEO INJ	MENINGOCOCCAL (A, C, Y, AND W-135) OLIGO CONJ VAC FOR INJ	HCR				
MENVEO SOL	MENINGOCOCCAL (A, C, Y, AND W-135) OLIGO CONJ VAC IM SOLN	HCR				
MNEXSPIKE INJ 2025-26	COVID-19 MRNA VACCINE-MODERNA IM SUSP PREF SYR 10 MCG/0.2ML	HCR				
PEDIARIX INJ 0.5ML	DIPH-TET TOX-ACELL PERT-HEP B-POLIO IPV VAC SUSP PREF SYR	HCR				
PEDVAX HIB INJ	HAEMOPHILUS B POLYSACCHARIDE CONJ VAC IM SUSP 7.5 MCG/0.5 ML	HCR				
PENBRAYA INJ	MENINGOCOCCAL ACYW (TET CONJ)-MENING B (RCMB) VACC FOR INJ	HCR				
PENMENVY INJ	MENINGOCOCCAL ACWY (OLIGO CONJ)-MENING B (RCMB) VACC FOR INJ	HCR				
PENTACEL INJ	DIPH-AC PER-TET TOX AD-POLIOV-HAEMOPH B POLY VAC FOR IM SUSP	HCR				
PNEUMOVAX 23 INJ 25/0.5	PNEUMOCOCCAL VACCINE POLYVALENT SOLN PREF SYR 25 MCG/0.5ML	HCR				
PNEUMOVAX 23 INJ 25/0.5	PNEUMOCOCCAL VACCINE POLYVALENT INJ SOLN 25 MCG/0.5ML	HCR				
PREHEVBRIO SUS 10MCG/ML	HEPATITIS B VACCINE 3-ANTIGEN (RECOMBINANT) SUSP 10 MCG/ML	HCR				
PREVNAR 20 INJ	PNEUMOCOCCAL 20-VALENT CONJUGATE VACCINE SUS PREF SYR 0.5 ML	HCR				
PRIORIX INJ	MEASLES-MUMPS-RUBELLA VIRUS VACCINES FOR SUBCUTANEOUS SUSP	HCR				
PROQUAD INJ	MEASLES-MUMPS-RUBELLA-VARICELLA VIRUS VACCINES FOR SUSP	HCR				
QUADRACEL INJ	DIPH-TETANUS TOX AD-ACELL PERT & POLIO VIRUS, IPV VAC INJ	HCR				
QUADRACEL INJ 0.5ML	DIPH-TETANUS TOX AD-ACELL PERT & POLIO VIRUS, IPV VAC INJ	HCR				
RECOMBIVA HB INJ 10MCG/ML	HEPATITIS B VACCINE (RECOMBINANT) SUSP PREF SYR 10 MCG/ML	HCR				
RECOMBIVA HB INJ 10MCG/ML	HEPATITIS B VACCINE (RECOMBINANT) SUSP 10 MCG/ML	HCR				
RECOMBIVA HB INJ 5MCG/0.5	HEPATITIS B VACCINE (RECOMBINANT) SUSP PREF SYR 5 MCG/0.5ML	HCR				
RECOMBIVA HB INJ 5MCG/0.5	HEPATITIS B VACCINE (RECOMBINANT) SUSP 5 MCG/0.5ML	HCR				
RECOMBIVA-HB INJ 40MCG/ML	HEPATITIS B VACCINE (RECOMBINANT) SUSP 40 MCG/ML	HCR				
ROTARIX SUS	ROTAVIRUS VACCINE, LIVE ORAL SUSP	HCR				
ROTATEQ SOL	ROTAVIRUS VACCINE, LIVE ORAL PENTAVALENT SOLN	HCR				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
SHINGRIX INJ 50/0.5ML	ZOSTER VAC RECOMBINANT ADJUVANTED FOR IM INJ 50 MCG/0.5ML	HCR				
SPIKEVAX INJ 2025-26	COVID-19 MRNA VACCINE-MODERNA IM SUSP PREF SYR 50 MCG/0.5ML	HCR				
SPIKEVAX INJ 2025-26	COVID-19 MRNA VAC 6MO-11YR-MODERNA IM SUSP PFS 25 MCG/0.25ML	HCR				
TDVAX INJ 2-2 LF	TETANUS-DIPHTHERIA TOXOIDS (TD) INJ 2-2 LF/0.5ML	HCR				
TENIVAC INJ 5-2LF	TETANUS-DIPHTHERIA TOXOIDS (TD) INJ 5-2 LF/0.5ML	HCR				
TRUMENBA INJ	MENINGOCOCCAL GROUP B VAC (RECOMB) IM SUSP PREFILLED SYR	HCR				
TWINRIX INJ	HEP A-HEP B VACCINE SUSP PREF SYR 720-20 ELU-MCG/ML	HCR				
VAQTA INJ 25/0.5ML	HEPATITIS A VACCINE SUSP PREFILLED SYR 25 UNIT/0.5ML	HCR				
VAQTA INJ 25/0.5ML	HEPATITIS A VACCINE INJ SUSP 25 UNIT/0.5ML	HCR				
VAQTA INJ 50UNT/ML	HEPATITIS A VACCINE SUSP PREFILLED SYR 50 UNIT/ML	HCR				
VAQTA INJ 50UNT/ML	HEPATITIS A VACCINE INJ SUSP 50 UNIT/ML	HCR				
VARIVAX INJ	VARICELLA VIRUS VAC LIVE FOR INJ 1350 PFU/0.5ML	HCR				
VAXELIS INJ	DIPH-TET TOX-AC PERT AD-POLIO IPV-HIB-HEPATITIS B RECMB SUSP	HCR				
VAXELIS INJ	DIPH-TET TOX-AC PERT AD-POLIO IPV-HIB-HEP B REC SUSP PRE SYR	HCR				
VAXNEUVANCE INJ	PNEUMOCOCCAL 15-VALENT CONJUGATE VACCINE SUS PREF SYR 0.5 ML	HCR				
Vasodilators, Direct-acting Arterial - Chest Pain Drugs						
HYDRALAZINE TAB 100MG	HYDRALAZINE HCL TAB 100 MG	Tier 1				
HYDRALAZINE TAB 10MG	HYDRALAZINE HCL TAB 10 MG	Tier 1				
HYDRALAZINE TAB 25MG	HYDRALAZINE HCL TAB 25 MG	Tier 1				
HYDRALAZINE TAB 50MG	HYDRALAZINE HCL TAB 50 MG	Tier 1				
MINOXIDIL TAB 10MG	MINOXIDIL TAB 10 MG	Tier 1				
MINOXIDIL TAB 2.5MG	MINOXIDIL TAB 2.5 MG	Tier 1				
Vasodilators, Direct-acting Arterial/Venous - Chest Pain Drugs						
ISOSORB DIN TAB 10MG	ISOSORBIDE DINITRATE TAB 10 MG	Tier 1				
ISOSORB DIN TAB 20MG	ISOSORBIDE DINITRATE TAB 20 MG	Tier 1				
ISOSORB DIN TAB 30MG	ISOSORBIDE DINITRATE TAB 30 MG	Tier 1				
ISOSORB DIN TAB 5MG	ISOSORBIDE DINITRATE TAB 5 MG	Tier 1				
ISOSORB MONO TAB 10MG	ISOSORBIDE MONONITRATE TAB 10 MG	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
ISOSORB MONO TAB 120MG ER	ISOSORBIDE MONONITRATE TAB ER 24HR 120 MG	Tier 1				
ISOSORB MONO TAB 20MG	ISOSORBIDE MONONITRATE TAB 20 MG	Tier 1				
ISOSORB MONO TAB 30MG ER	ISOSORBIDE MONONITRATE TAB ER 24HR 30 MG	Tier 1				
ISOSORB MONO TAB 60MG ER	ISOSORBIDE MONONITRATE TAB ER 24HR 60 MG	Tier 1				
NITRO-BID OIN 2%	NITROGLYCERIN OINT 2%	Tier 2				
NITRO-DUR DIS 0.1MG/HR	NITROGLYCERIN TD PATCH 24HR 0.1 MG/HR	Tier 3				
NITRO-DUR DIS 0.2MG/HR	NITROGLYCERIN TD PATCH 24HR 0.2 MG/HR	Tier 3				
NITRO-DUR DIS 0.3MG/HR	NITROGLYCERIN TD PATCH 24HR 0.3 MG/HR	Tier 3				
NITRO-DUR DIS 0.4MG/HR	NITROGLYCERIN TD PATCH 24HR 0.4 MG/HR	Tier 3				
NITRO-DUR DIS 0.6MG/HR	NITROGLYCERIN TD PATCH 24HR 0.6 MG/HR	Tier 3				
NITRO-DUR DIS 0.8MG/HR	NITROGLYCERIN TD PATCH 24HR 0.8 MG/HR	Tier 3				
NITRO-TIME CAP 2.5MG ER	NITROGLYCERIN CAP ER 2.5 MG	Tier 3				
NITRO-TIME CAP 6.5MG ER	NITROGLYCERIN CAP ER 6.5 MG	Tier 3				
NITRO-TIME CAP 9MG ER	NITROGLYCERIN CAP ER 9 MG	Tier 3				
NITROGLYCER DIS 0.1MG/HR	NITROGLYCERIN TD PATCH 24HR 0.1 MG/HR	Tier 1				
NITROGLYCER DIS 0.2MG/HR	NITROGLYCERIN TD PATCH 24HR 0.2 MG/HR	Tier 1				
NITROGLYCER DIS 0.4MG/HR	NITROGLYCERIN TD PATCH 24HR 0.4 MG/HR	Tier 1				
NITROGLYCER DIS 0.6MG/HR	NITROGLYCERIN TD PATCH 24HR 0.6 MG/HR	Tier 1				
NITROGLYCERI OIN 0.4%	NITROGLYCERIN OINT 0.4%	Tier 1		X		
NITROGLYCER SUB 0.6MG	NITROGLYCERIN SL TAB 0.6 MG	Tier 1				
NITROGLYCERN SUB 0.3MG	NITROGLYCERIN SL TAB 0.3 MG	Tier 1				
NITROGLYCERN SUB 0.4MG	NITROGLYCERIN SL TAB 0.4 MG	Tier 1				
NITROGLYCRN SPR 400MCG	NITROGLYCERIN TL SOLN 0.4 MG/SPRAY (400 MCG/SPRAY)	Tier 1				
NITROSTAT SUB 0.3MG	NITROGLYCERIN SL TAB 0.3 MG	Tier 3/4				
NITROSTAT SUB 0.4MG	NITROGLYCERIN SL TAB 0.4 MG	Tier 3/4				
NITROSTAT SUB 0.6MG	NITROGLYCERIN SL TAB 0.6 MG	Tier 3/4				
RECTIV OIN 0.4%	NITROGLYCERIN OINT 0.4%	Tier 3/4		X		
Vitamins						
3232A INFANT POW FORMULA	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2				
3232A INFANT POW FORMULA	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2	X			
ATABEX OB TAB 29-1MG	*PRENATAL VIT W/ FE BISGLYCINATE CHELATE-FA TAB 29-1 MG***	Tier 3				
BCAD 1 POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2	X			
BCAD 2 POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2				
BLENDED MEAL MIS PEDIATRI	*NUTRITIONAL SUPPLEMENT MISC**	Tier 3	X			

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
BLENDED MEAL MIS PEDIATRI	*NUTRITIONAL SUPPLEMENT MISC**	Tier 3				
BLENDED MEAL MIS SQSH/CRT	*NUTRITIONAL SUPPLEMENT MISC**	Tier 3	X			
BLENDED MEAL MIS SQSH/CRT	*NUTRITIONAL SUPPLEMENT MISC**	Tier 3				
C-NATE DHA CAP 28-1-200	*PRENATAL VIT W/ FE FUM-FA-OMEGA 3 CAP 28-1-200 MG***	Tier 3				
CHICKEN/PEAS POW CARROTS	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2				
CHICKEN/PEAS POW PEDIATRI	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2				
CITRANATAL CAP HARMONY	*PRENAT W/O A W/FE FUM-FE CBN-DSS-FA-DHA CAP 27-1-260 MG***	Tier 3				
CITRANATAL CAP MEDLEY	*PRENAT W/O A W/FE FUM-FE CBN-FA-DHA CAP 27-1-200 MG***	Tier 3				
CITRANATAL MIS 90 DHA	*PRENAT W/O A W/FECBN-FEGL-DSS-FA TAB 90 & DHA CAP 300MG PAK*	Tier 3				
CITRANATAL MIS B-CALM	*PRENAT W/O A W/FECBN-FEGLU-FA TAB 20-1 MG & VIT B6 TAB PAK*	Tier 3				
CITRANATAL PAK ASSURE	*PRENAT W/O A W/FECBN-FEGL-DSS-FA TAB & DHA CAP 300 MG PACK*	Tier 3				
CO-NATAL FA TAB 29-1MG	*PRENATAL VIT W/ FE FUMARATE-FA TAB 29-1 MG***	Tier 2				
COD LIVER CAP OIL	*COD LIVER OIL CAP***	Tier 1				
COMPLETE NAT PAK DHA	*PRENAT-FE BIS-FE PROT SUCC-FA-CA TAB & OMEGA 3 CAP 200 PK**	Tier 2				
COMPLETENATE CHW	*PRENATAL VIT W/ FE FUMARATE-FA CHEW TAB 29-1 MG***	Tier 3				
COMPLEX ESSE POW MSD	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2	X			
CONCEPT DHA CAP	*PRENATAL W/FE FUM-FE POLY -FA-OMEGA 3 CAP 53.5-38-1 MG***	Tier 3/4				
CONCEPT OB CAP	*PRENATAL W/O A W/FE FUM-FE POLY-FA CAP 130-92.4-1 MG***	Tier 3/4				
CYANOCOBALAM INJ 10000MCG	CYANOCOBALAMIN INJ 1000 MCG/ML	Tier 1				
CYANOCOBALAM INJ 1000MCG	CYANOCOBALAMIN INJ 1000 MCG/ML	Tier 1				
CYANOCOBALAM INJ 30000MCG	CYANOCOBALAMIN INJ 1000 MCG/ML	Tier 1				
CYANOCOBALAM SPR 500MCG	CYANOCOBALAMIN NASAL SPRAY 500 MCG/0.1ML	Tier 1				
DAVIMET/FLUO CHW 0.75MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.75 MG***	Tier 3/4				
DODEX INJ	CYANOCOBALAMIN INJ 1000 MCG/ML	Tier 3/4				
DRISDOL CAP 50000UNT	ERGOCALCIFEROL CAP 1.25 MG (50000 UNIT)	Tier 3/4				
DUET DHA 400 MIS 25-1-400	*PRENAT W/FE POLY-NA FERED-FA TAB 25-1 & OMEGA CAP 400 MG***	Tier 3				
ELECARE JR POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2	X			

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ELECARE JR POW VANILLA	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2	X			
ELITE-OB TAB	*PRENATAL VIT W/ IRON CARBONYL-FA TAB 50-1.25 MG***	Tier 3				
ENBRACE HR CAP	*PRENATAL VIT W/ FE GLY CYS-FA-OMEGA 3 FATTY ACIDS CAP***	Tier 3				
ENCALA POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2	X			
ENSURE ORIGN POW VANILLA	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2				
ENU PRO3 POW PLUS	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2				
EQUACARE JR POW CHOCOLA	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2				
EQUACARE JR POW UNFLAVO	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2				
EQUACARE JR POW VANILLA	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2				
ESSENTIAL POW CARE JR	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2	X			
FA-8 CAP 800MCG	FOLIC ACID CAP 0.8 MG	HCR				
FLORAFOL CHW 0.5MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.5 MG***	Tier 3/4				
FLORAFOL FE SOL PEDIATRC	*PEDIATRIC MULTIPLE VITAMINS W/ FL-FE DROPS 0.25-7 MG/ML**	Tier 3/4				
FLORAFOL PED CHW 1MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 1 MG***	Tier 3/4				
FLORAFOL PED SOL 0.25/ML	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE SOLN 0.25 MG/ML***	Tier 3				
FLORIVA DRO PLUS	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE SOLN 0.25 MG/ML***	Tier 3/4				
FLOTREX CHW	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 1 MG***	Tier 3				
FLOTREX CHW 0.25MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.25 MG***	Tier 3/4				
FLOTREX CHW 0.5MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.5 MG***	Tier 3/4				
FOLIC ACID TAB 1000MCG	FOLIC ACID TAB 1 MG	Tier 1				
FOLIC ACID TAB 1MG	FOLIC ACID TAB 1 MG	Tier 1				
FOLIC ACID TAB 400MCG	FOLIC ACID TAB 400 MCG	HCR				
FOLIC ACID TAB 800MCG	FOLIC ACID TAB 800 MCG	HCR				
FOLIVANE-OB CAP	*PRENATAL W/O A W/FE FUM-FE POLY-FA CAP 85-1 MG***	Tier 3/4				
FT FOLIC ACI TAB 400MCG	FOLIC ACID TAB 400 MCG	HCR				
GA POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2	X			
GLYTACTIN POW BETTRMLK	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2				
HCY 1 POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2	X			
HCY 2 POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2				
KALE/QUINOA POW BERRIES	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2				
KALE/QUINOA POW PEDIATRI	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2				

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KOSHR PRENAT TAB 30-1MG	*PRENATAL VIT W/ IRON CARBONYL-FA TAB 30-1 MG***	Tier 1				
LIPISTART POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2				
LMD POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2	X			
M-NATAL PLUS TAB	*PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG***	Tier 3				
MALTOCARB POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2				
MATRONEX TAB	*PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG***	Tier 3				
METHIONINE CAP 200MG	*NUTRITIONAL SUPPLEMENT CAPS**	Tier 2	X			
MULTI VIT/FL CHW 0.25MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.25 MG***	Tier 1				
MULTI-VIT-FL CHW 0.25MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.25 MG***	Tier 3/4				
MULTI-VIT-FL CHW 0.5MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.5 MG***	Tier 3/4				
MULTI-VIT-FL CHW 1MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 1 MG***	Tier 3/4				
MULTI-VIT/FL DRO /FE 0.25	*PEDIATRIC MULTIPLE VITAMINS W/ FL-FE DROPS 0.25-10 MG/ML**	Tier 1				
MULTI-VIT/FL DRO 0.5MG/ML	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE SOLN 0.5 MG/ML***	Tier 1				
MULTIVIT/FL CHW 0.25MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.25 MG***	Tier 1				
MULTIVIT/FL CHW 0.5MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.5 MG***	Tier 1				
MULTIVIT/FL CHW 1MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 1 MG***	Tier 1				
MULTIVIT/FL DRO 0.25MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE SOLN 0.25 MG/ML***	Tier 1				
MULTIVIT/FL SUS 0.25MG	*PEDIATRIC MULTIPLE VITAMIN W/ FLUORIDE SUSP 0.25 MG/ML***	Tier 1				
NAC CAP 600MG	ACETYLCYSTEINE CAP 600 MG	Tier 1				
NASCOBAL SPR 500MCG	CYANOCOBALAMIN NASAL SPRAY 500 MCG/0.1ML	Tier 3				
NATACHEW CHW	*PRENATAL VIT W/ FE FUM-FE BISGLYCIN-FA CHEW TAB 28-1 MG***	Tier 3				
NATAL PNV TAB	*PRENATAL VIT W/ FE GLUCONATE-FA TAB 6-0.5 MG***	Tier 3				
NEEVO DHA CAP 27-1.13	*PRENAT W/O A W/FEFUM-METHYLFOL-OMEGAS CAP 27-1.13 MG***	Tier 3				
NEOCATE INFT POW DHA/ARA	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2	X			
NEOCATE SYNE POW JUNIOR	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2	X			

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

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PHENYLADE60 POW DRNK MIX	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2				
PHENYLD GMP POW DHA/FIBR	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2				
PHYTONADIONE TAB 5MG	PHYTONADIONE TAB 5 MG	Tier 1				
PKU EASY POW SHAKE&GO	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2				
PKU START POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2				
PKU TRIO POW UNFLAVOR	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2	X			
PKU TRIO POW VANILLA	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2	X			
PNV 27-CA/FE TAB /FA	*PRENATAL VIT W/ FE FUMARATE-FA TAB 60-1 MG***	Tier 1				
PNV-DHA CAP	*PRENAT W/O A W/FEFUM-METHFOL-FA-DHA CAP 27-0.6-0.4-300 MG**	Tier 1				
PNV-DHA CAP DOCUSATE	*PRENATAL W/O VIT A W/ FE FUM-DSS-FA-DHA CAP 27-1.25-300 MG*	Tier 1				
PNV-OMEGA CAP	*PRENAT W/O A W/ FE FUMARATE-METHYLFOLATE-FA-OMEGA 3 CAP***	Tier 1				
PNV-SELECT TAB	*PRENATAL VIT W/ FE FUM-METHYLFOLATE-FA TAB 27-0.6-0.4 MG***	Tier 1				
POLY-VI-FLOR CHW 0.25MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.25 MG***	Tier 3/4				
POLY-VI-FLOR CHW 0.5MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.5 MG***	Tier 3/4				
POLY-VI-FLOR CHW 1MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 1 MG***	Tier 3/4				
POLY-VI-FLOR CHW W/IRON	*PEDIATRIC MULTIPLE VITAMINS W/ FL-FE CHEW TAB 0.5-10 MG**	Tier 3				
POLY-VI-FLOR SUS /IRON	*PEDIATRIC MULTIPLE VITAMIN W/ FL-FE SUSP 0.25-7 MG/ML**	Tier 3				
POLY-VI-FLOR SUS 0.25/ML	*PEDIATRIC MULTIPLE VITAMIN W/ FLUORIDE SUSP 0.25 MG/ML***	Tier 3/4				
PORTAGEN POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2				
PREKUNIL TAB	*NUTRITIONAL SUPPLEMENT TABS**	Tier 3				
PREMESISRX TAB	*PRENATAL W/ CALCIUM-VIT B6-VIT B12-FA-GINGER TAB 1 MG***	Tier 3				
PRENA1 PEARL CAP	*PRENAT W/OA W/FEFUM-NA FERED-FA-DHA CAP ER 30-1.4-200 MG***	Tier 3				
PRENAISSANCE CAP	*PRENATAL W/O VIT A W/ FE FUM-DSS-FA-DHA CAP 29-1.25-325 MG*	Tier 2				
PRENAISSANCE CAP PLUS	*PRENATAL W/O A W/FE CBN-DSS-FA-DHA CAP 28-1-250 MG***	Tier 2				
PRENATAL TAB 27-1MG	*PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG***	Tier 1				
PRENATAL TAB PLUS	*PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG***	Tier 1				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
PRENATAL 19 CHW 29-1MG	*PRENATAL VIT W/ FE FUMARATE-FA CHEW TAB 29-1 MG***	Tier 1				
PRENATAL 19 CHW TAB	*PRENATAL VIT W/ FE FUMARATE-FA CHEW TAB 29-1 MG***	Tier 1				
PRENATAL 19 TAB 29-1MG	*PRENATAL VIT W/ DSS-FE FUMARATE-FA TAB 29-1 MG***	Tier 1				
PRENATAL-U CAP 106.5-1	*PRENATAL W/O A VIT W/ FE FUMARATE-FA CAP 106.5-1 MG***	Tier 2				
PRENATE CAP ENHANCE	*PRENAT W/O A W/FEFUM-METHFOL-FA-DHA CAP 28-0.6-0.4-400 MG**	Tier 3				
PRENATE CAP ESSENT	*PRENAT W/O A W/FEASPG-METHFOL-FA-DHA CAP 18-0.6-0.4-300 MG*	Tier 3				
PRENATE CAP PIXIE	*PRENAT W/O A W/FEASPG-METHFOL-FA-DHA CAP 10-0.6-0.4-200 MG*	Tier 3				
PRENATE CAP RESTORE	*PRENAT W/O A W/FEFUM-METHFOL-FA-DHA CAP 27-0.6-0.4-400 MG**	Tier 3				
PRENATE CHW 0.6-0.4	*PRENAT MV & MIN W/ L-METHYLFOLATE-FA CHEW TAB 0.6-0.4 MG***	Tier 3				
PRENATE TAB ELITE	*PRENATAL W/ FE ASP GLY-L METHYLFOL-FA TAB 20-0.6-0.4 MG***	Tier 3				
PRENATE AM TAB 1MG	*PRENATAL W/ CALCIUM-VIT B6-VIT B12-FA-GINGER TAB 1 MG***	Tier 3				
PRENATE DHA CAP	*PRENAT W/O A W/FEASPG-METHFOL-FA-DHA CAP 18-0.6-0.4-300 MG*	Tier 3				
PRENATE MINI CAP	*PRENAT W/OA W/FECB-FEASP-METH-FA-DHA CAP 18-0.6-0.4-350 MG*	Tier 3				
PRENATVITE TAB COMPLETE	*PRENATAL MULTIVITAMINS & MINERALS W/ IRON & FA TAB 1 MG***	Tier 3				
PRENATVITE TAB PLUS	*PRENATAL MULTIVITAMINS & MINERALS W/ IRON & FA TAB 1 MG***	Tier 3				
PRENATVITE TAB RX	*PRENATAL MULTIVITAMINS & MINERALS W/ IRON & FA TAB 0.8 MG***	Tier 3				
PRIMACARE CAP	*PRENAT W/O A W/FEASP-METHLF-FA-OMEG CAP 30-0.75-0.25-470MG*	Tier 3				
PROT COOKIE MIS OATRAISN	*NUTRITIONAL SUPPLEMENT MISC**	Tier 2				
PROVIDA OB CAP	*PRENATAL W/O A W/FE FUM-FE POLY-FA CAP 20-20-1.25 MG***	Tier 3				
QUFLORA PED CHW 0.25MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.25 MG***	Tier 3				
QUFLORA PED CHW 0.5MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.5 MG***	Tier 3				
QUFLORA PED CHW 1MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 1 MG***	Tier 3				
QUFLORA PED DRO 0.25MG	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE SOLN 0.25 MG/ML***	Tier 3				

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
QUFLORA PED DRO 0.5MG/ML	*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE SOLN 0.5 MG/ML***	Tier 3				
RELEVIA TAB 27-1MG	*PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG***	Tier 3				
RELNATE DHA CAP	*PRENATAL VIT W/ FE FUM-FA-OMEGA 3 CAP 28-1-200 MG***	Tier 3				
RENASTART POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2				
RENASTART POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2	X			
SCANDICAL POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2	X			
SCANDISHAKE POW VANILLA	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2	X			
SE-NATAL 19 CHW	*PRENATAL VIT W/ FE FUMARATE-FA CHEW TAB 29-1 MG***	Tier 3				
SE-NATAL 19 TAB	*PRENATAL VIT W/ DSS-FE FUMARATE-FA TAB 29-1 MG***	Tier 3				
SELECT-OB CHW	*PRENATAL VIT W/ FE POLYSAC CMLPX-FA CHEW TAB 29-1 MG***	Tier 3/4				
SELECT-OB CHW	*PRENAT W/ FEPOLYCMPLX-METHYLFOL-FA CHEW TAB 29-0.6-0.4 MG**	Tier 3				
SELECT-OB+ PAK DHA	*PRENATAL MV W/FE POLY-FA CHW 29-1 MG & DHA CAP 250 MG PAK *	Tier 3				
SERACAL POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2	X			
TARON-C DHA CAP	*PRENATAL W/FE FUM-FE POLY -FA-OMEGA 3 CAP 35-1 MG***	Tier 3/4				
THRIVITE RX TAB 29-1MG	*PRENATAL VIT W/ IRON CARBONYL-FA TAB 29-1 MG***	Tier 3				
TRI-VI-FLOR SUS 0.25/ML	*PEDIATRIC MULTIPLE VITAMIN W/ FLUORIDE SUSP 0.25 MG/ML***	Tier 3				
TRI-VI-FLORO SUS 0.25/ML	*PED VIT ACD & L-METHYLFOLATE W/ FLUORIDE SUSP 0.25 MG/ML***	Tier 3				
TRI-VI-FLORO SUS 0.5MG/ML	*PED VIT ACD & L-METHYLFOLATE W/ FLUORIDE SUSP 0.5 MG/ML***	Tier 3				
TRI-VITAMIN SUS 0.25MG	*PEDIATRIC MULTIPLE VITAMIN W/ FLUORIDE SUSP 0.25 MG/ML***	Tier 3/4				
TRICARE TAB PRENATAL	*PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG***	Tier 3				
TRINATAL RX TAB 1	*PRENATAL VIT W/ FE FUMARATE-FA TAB 60-1 MG***	Tier 3				
TRINATE TAB	*PRENATAL VIT W/ FE FUMARATE-FA TAB 28-1 MG***	Tier 3				
TRISTART DHA CAP	*PRENAT W/O A W/FECBN-METHYLF-FA-DHA CAP 31-0.6-0.4-200 MG**	Tier 3				
TYROS 1 POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2	X			
TYROS 2 POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2				
UCD TRIO POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2	X			

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
VINATE DHA CAP 27-1.13	*PRENAT W/O A W/FEFUM-METHYLFOL-OMEGAS CAP 27-1.13 MG***	Tier 3				
VITAFOL CAP ULTRA	*PRENAT W/FE POLY-METHYLFOL-FA-DHA CAP 29-0.6-0.4-200 MG***	Tier 3				
VITAFOL CHW GUMMIES	*PRENAT VIT W/ FE PHOS-FA-OMEGA CHEW TAB 3.33-0.333-34.8 MG*	Tier 3				
VITAFOL FE+ CAP	*PRENAT W/FE POLY-METHYLFOL-FA-DHA CAP 90-0.6-0.4-200 MG***	Tier 3				
VITAFOL STRP MIS 1MG	*PRENATAL W/ B6-B12-CHOLECALCIFEROL-FOLIC ACID FILM 1 MG**	Tier 3				
VITAFOL-NANO TAB	*PRENATAL W/O A W/ FEFUM-L METHYLFOL-FA TAB 18-0.6-0.4 MG***	Tier 3				
VITAFOL-OB PAK +DHA	*PRENATAL MV W/FE FUM-FA TAB 65-1 MG & DHA CAP 250 MG PACK *	Tier 3				
VITAFOL-OB TAB 65-1MG	*PRENATAL VIT W/ FE FUMARATE-FA TAB 65-1 MG***	Tier 3				
VITAFOL-ONE CAP	*PRENATAL MV W/ FE POLYSAC CMLPX-FA-DHA CAP 29-1-200 MG***	Tier 3				
VITAMED MD CAP ONE RX	*PRENAT W/O A W/FEFUM-METHFOL-FA-DHA CAP 30-0.6-0.4-200 MG**	Tier 3				
VITAMIN B-12 TAB 1000MCG	CYANOCOBALAMIN TAB 1000 MCG	Tier 1				
VITAMIN B12 TAB 100MCG	CYANOCOBALAMIN TAB 100 MCG	Tier 1				
VITAMIN D CAP 1.25MG	ERGOCALCIFEROL CAP 1.25 MG (50000 UNIT)	Tier 1				
VITAMIN D CAP 50000	ERGOCALCIFEROL CAP 1.25 MG (50000 UNIT)	Tier 1				
VITAMIN D CAP 50000UNT	ERGOCALCIFEROL CAP 1.25 MG (50000 UNIT)	Tier 1				
VITAPEARL CAP	*PRENAT W/OA W/FEFUM-NA FERED-FA-DHA CAP ER 30-1.4-200 MG***	Tier 3				
VITATHELY TAB	*PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG***	Tier 3				
VIVONEX POW PEDIATRI	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2	X			
WESCAP-C DHA CAP	*PRENATAL W/FE FUM-FE POLY -FA-OMEGA 3 CAP 53.5-38-1 MG***	Tier 3/4				
WESCAP-PN CAP DHA	*PRENAT W/O A W/FEFUM-METHFOL-FA-DHA CAP 27-0.6-0.4-300 MG**	Tier 3/4				
WESNATAL DHA PAK COMPLETE	*PRENAT-FE BIS-FE PROT SUCC-FA-CA TAB & OMEGA 3 CAP 200 PK**	Tier 2				
WESNATE DHA CAP	*PRENATAL VIT W/ FE FUM-FA-OMEGA 3 CAP 28-1-200 MG***	Tier 3				
WESTGEL DHA CAP	*PRENAT W/O A W/FECBN-METHYLF-FA-DHA CAP 31-0.6-0.4-200 MG**	Tier 3				
WHEAT GERM OIL	*WHEAT GERM - OIL***	Tier 1				
WND 1 POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2	X			

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Medication Name	Generic Medication Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy	Specialty
WND 2 POW	*NUTRITIONAL SUPPLEMENT POWDER**	Tier 2				
Vitamins - Vitamin, Mineral and Body Fluid Deficiency Drugs						
CYANOCOBAL POW	CYANOCOBALAMIN (BULK) POWDER	Tier 3				
CYANOCOBALAM CRY	CYANOCOBALAMIN (BULK) CRYSTALS	Tier 3				
CYANOCOBALAM SOL 2000MCG	CYANOCOBALAMIN INJ 2000 MCG/ML	Tier 3				

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ABACAVIR-DOLUTEGRAVIR-LAMIVUDINE TAB 600-50-300 MG	18	ACETAZOLAMIDE CAP ER 12HR 500 MG ...	224	AFATINIB DIMALEATE TAB 40 MG (BASE EQUIVALENT).....	210
ABACAVIR-DOLUTEGRAVIR-LAMIVUDINE TAB FOR ORAL SUS 60-5-30 MG.....	18	ACETAZOLAMIDE TAB 125 MG	224	ALBENDAZOLE TAB 200 MG.....	16
ABACAVIR SULFATE-LAMIVUDINE TAB 600-300 MG	19	ACETAZOLAMIDE TAB 250 MG.....	224	ALBUTEROL-BUDESONIDE INHALATION AEROSOL 90-80 MCG/ACT	242
ABACAVIR SULFATE SOLN 20 MG/ML (BASE EQUIV).....	19	ACETIC ACID OTIC SOLN 2%.....	233	ALBUTEROL SULFATE INHAL AERO 108 MCG/ACT (90MCG BASE EQUIV)	68
ABACAVIR SULFATE SOLN 20 MG/ML (BASE EQUIV).....	20	ACETIC ACID-OXYQUINOLINE VAGINAL GEL 0.9-0.025%.....	26	ALBUTEROL SULFATE SOLN NEBU 0.5% (5 MG/ML)	68
ABACAVIR SULFATE TAB 300 MG (BASE EQUIV).....	19	ACETOHYDROXAMIC ACID TAB 250 MG ...	141	ALBUTEROL SULFATE SOLN NEBU 0.5% (5 MG/ML)	68
ABALOPARATIDE SUBCUTANEOUS SOLN PEN-INJECTOR 3120 MCG/1.56ML	181	ACETONE (URINE) TEST STRIP	96	ALBUTEROL SULFATE SOLN NEBU 0.63 MG/3ML (BASE EQUIV).....	68
ABATACEPT SUBCUTANEOUS SOLN AUTO-INJECTOR 125 MG/ML	170	ACETONE (URINE) TEST STRIP	98	ALBUTEROL SULFATE SOLN NEBU 0.83 MG/3ML (BASE EQUIV).....	68
ABATACEPT SUBCUTANEOUS SOLN PREFILLED SYRINGE 50 MG/0.4ML.....	170	ACETONE (URINE) TEST STRIP	98	ALBUTEROL SULFATE SOLN NEBU 1.25 MG/3ML (BASE EQUIV).....	69
ABATACEPT SUBCUTANEOUS SOLN PREFILLED SYRINGE 87.5 MG/0.7ML	170	ACETYLCYSTEINE CAP 600 MG.....	269	ALBUTEROL SULFATE SYRUP 2 MG/5ML ...	69
ABATACEPT SUBCUTANEOUS SOLN PREFILLED SYRINGE 125 MG/ML.....	170	ACETYLCYSTEINE INHAL SOLN 10%.....	241	ALBUTEROL SULFATE TAB 2 MG.....	69
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ABEMACICLIB TAB 200 MG	48	ACITRETIN CAP 25 MG.....	86	*ALCOHOL SHEETS***	182
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ACALABRUTINIB MALEATE TAB 100 MG ...	209	ACYCLOVIR SUSP 200 MG/5ML.....	43	ALENDRONATE SODIUM TAB 10 MG.....	180
ACAMPROSATE CALCIUM TAB DELAYED RELEASE 333 MG	10	ACYCLOVIR TAB 400 MG.....	43	ALENDRONATE SODIUM TAB 35 MG	180
ACARBOSE TAB 25 MG	34	ACYCLOVIR TAB 800 MG.....	43	ALENDRONATE SODIUM TAB 70 MG	180
ACARBOSE TAB 50 MG	34	ADAGRASIB TAB 200 MG.....	46	ALENDRONATE SODIUM TAB 70 MG	180
ACARBOSE TAB 100 MG.....	34	ADALIMUMAB-ADAZ SOLN AUTO-INJECTOR 40 MG/0.4ML.....	168	ALFUZOSIN HCL TAB ER 24HR 10 MG.....	60
ACEBUTOLOL HCL CAP 200 MG.....	62	ADALIMUMAB-ADAZ SOLN AUTO-INJECTOR 80 MG/0.8ML.....	168	ALISKIREN FUMARATE TAB 150 MG (BASE EQUIVALENT).....	75
ACEBUTOLOL HCL CAP 400 MG	62	ADALIMUMAB-ADAZ SOLN PREFILLED SYRINGE 10 MG/0.1ML.....	168	ALISKIREN FUMARATE TAB 150 MG (BASE EQUIVALENT).....	79
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ACETAMINOPHEN-CAFFEINE-DIHYDROCODEINE CAP 320.5-30-16 MG ..	232	ADALIMUMAB-ADAZ SOLN PREFILLED SYRINGE 40 MG/0.4ML.....	168	ALISKIREN FUMARATE TAB 300 MG (BASE EQUIVALENT).....	79
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ALLOPURINOL TAB 300 MG	42	ALPRAZOLAM TAB ER 24HR 2 MG	61	*AMINO ACIDS-PROTEIN HYDROLYSATE	
ALMOTRIPTAN MALATE TAB 6.25 MG	245	ALPRAZOLAM TAB ER 24HR 2 MG	61	LIQUID***	115
ALMOTRIPTAN MALATE TAB 6.25 MG	245	ALPRAZOLAM TAB ER 24HR 3 MG	61	*AMINO ACIDS-PROTEIN HYDROLYSATE	
ALMOTRIPTAN MALATE TAB 12.5 MG	245	ALPRAZOLAM TAB ER 24HR 3 MG	61	LIQUID***	115
ALMOTRIPTAN MALATE TAB 12.5 MG	245	ALPROSTADIL FOR INJ 20 MCG.....	140	*AMINO ACIDS-PROTEIN HYDROLYSATE	
ALOGLIPTIN BENZOATE TAB 6.25 MG		ALPROSTADIL FOR INJ 40 MCG.....	140	LIQUID***	115
(BASE EQUIV).....	35	ALPROSTADIL FOR INJ KIT 10 MCG.....	140	*AMINO ACIDS-PROTEIN HYDROLYSATE	
ALOGLIPTIN BENZOATE TAB 12.5 MG		ALPROSTADIL FOR INJ KIT 10 MCG.....	140	LIQUID***	116
(BASE EQUIV).....	34	ALPROSTADIL FOR INJ KIT 10 MCG.....	141	*AMINO ACIDS TAB***	182
ALOGLIPTIN BENZOATE TAB 25 MG		ALPROSTADIL FOR INJ KIT 20 MCG	140	*AMINO ACIDS TAB***	201
(BASE EQUIV).....	35	ALPROSTADIL FOR INJ KIT 20 MCG	140	AMINOCAPROIC ACID ORAL SOLN 0.25	
ALOGLIPTIN-METFORMIN HCL TAB 12.5-		ALPROSTADIL FOR INJ KIT 20 MCG	141	GM/ML.....	148
500 MG	35	ALPROSTADIL FOR INJ KIT 20 MCG	141	AMINOCAPROIC ACID TAB 500 MG.....	148
ALOGLIPTIN-METFORMIN HCL TAB 12.5-		ALPROSTADIL FOR INJ KIT 40 MCG	141	AMINOCAPROIC ACID TAB 1000 MG.....	148
1000 MG	35	ALPROSTADIL FOR INJ KIT 40 MCG	141	AMINOLEVULINIC ACID HCL FOR SOLN	
ALOGLIPTIN-PIOGLITAZONE TAB 12.5-		ALPROSTADIL URETHRAL PELLETT 250		20% (STICK APPLICATOR)	89
30 MG.....	34	MCG	141	AMINOLEVULINIC ACID HCL GEL 10%.....	86
ALOGLIPTIN-PIOGLITAZONE TAB 25-15 MG	34	ALPROSTADIL URETHRAL PELLETT 500		AMIODARONE HCL TAB 100 MG.....	24
ALOGLIPTIN-PIOGLITAZONE TAB 25-30		MCG	141	AMIODARONE HCL TAB 100 MG.....	24
MG.....	34	ALPROSTADIL URETHRAL PELLETT 1000		AMIODARONE HCL TAB 200 MG	24
ALOGLIPTIN-PIOGLITAZONE TAB 25-45		MCG	141	AMIODARONE HCL TAB 200 MG	24
MG.....	34	ALUMINUM CHLORIDE SOLN 20%	88	AMIODARONE HCL TAB 400 MG	24
ALOSETRON HCL TAB 0.5 MG (BASE		ALVIMOPAN CAP 12 MG.....	135	AMIODARONE HCL TAB 400 MG	24
EQUIV).....	175	ALVIMOPAN CAP 12 MG.....	136	AMITRIPTYLINE HCL TAB 10 MG.....	260
ALOSETRON HCL TAB 1 MG (BASE EQUIV) .	175	AMANTADINE HCL CAP 100 MG.....	49	AMITRIPTYLINE HCL TAB 25 MG.....	260
ALPELISIB (PROS) ORAL GRANULES		AMANTADINE HCL SOLN 50 MG/5ML.....	49	AMITRIPTYLINE HCL TAB 50 MG	260
PACKET 50 MG.....	172	AMANTADINE HCL SOLN 50 MG/5ML.....	49	AMITRIPTYLINE HCL TAB 75 MG.....	261
ALPELISIB (PROS) PAK 250 MG DAILY		AMANTADINE HCL TAB 100 MG	49	AMITRIPTYLINE HCL TAB 100 MG	260
DOSE (200 MG & 50 MG TABS).....	172	AMBRISANTAN TAB 5 MG	239	AMITRIPTYLINE HCL TAB 150 MG	260
ALPELISIB (PROS) TAB THERAPY PACK		AMBRISANTAN TAB 10 MG	239	AMLODIPINE BENZOATE ORAL SUSP 1	
50 MG DAILY DOSE	172	AMCINONIDE CREAM 0.1%	154	MG/ML (BASE EQUIVALENT)	72
ALPELISIB (PROS) TAB THERAPY PACK		AMCINONIDE OINT 0.1%.....	154	AMLODIPINE BESYLATE-ATORVASTATIN	
125 MG DAILY DOSE	172	AMIFAMPRIDINE PHOSPHATE TAB 10 MG		CALCIUM TAB 2.5-10 MG.....	75
ALPELISIB TAB PACK 250 MG DAILY		(BASE EQUIVALENT).....	189	AMLODIPINE BESYLATE-ATORVASTATIN	
DOSE (200 MG & 50 MG TABS).....	47	AMIKACIN SULFATE LIPOSOME INHAL		CALCIUM TAB 2.5-20 MG.....	75
ALPELISIB TAB PACK 300 MG DAILY		SUSP 590 MG/8.4ML (BASE EQ)	12	AMLODIPINE BESYLATE-ATORVASTATIN	
DOSE (2X150 MG TAB)	47	AMILORIDE HCL TAB 5 MG.....	102	CALCIUM TAB 2.5-40 MG	75
ALPELISIB TAB THERAPY PACK 200 MG		AMILORIDE & HYDROCHLOROTHIAZIDE		AMLODIPINE BESYLATE-ATORVASTATIN	
DAILY DOSE.....	47	TAB 5-50 MG	75	CALCIUM TAB 5-10 MG.....	75
ALPRAZOLAM CONC 1 MG/ML.....	60	*AMINO ACIDS ORAL LIQUID***	190	AMLODIPINE BESYLATE-ATORVASTATIN	
ALPRAZOLAM ORALLY DISINTEGRATING		*AMINO ACIDS ORAL LIQUID***	195	CALCIUM TAB 5-20 MG	75
TAB 0.5 MG.....	60	*AMINO ACIDS ORAL LIQUID***	195	CALCIUM TAB 5-40 MG	75
ALPRAZOLAM ORALLY DISINTEGRATING		*AMINO ACIDS ORAL LIQUID***	195	AMLODIPINE BESYLATE-ATORVASTATIN	
TAB 0.25 MG	60	*AMINO ACIDS ORAL LIQUID***	195	CALCIUM TAB 5-80 MG	75
ALPRAZOLAM ORALLY DISINTEGRATING		*AMINO ACIDS ORAL LIQUID***	201	AMLODIPINE BESYLATE-ATORVASTATIN	
TAB 1 MG	60	*AMINO ACIDS ORAL LIQUID***	201	CALCIUM TAB 10-10 MG.....	75
ALPRAZOLAM ORALLY DISINTEGRATING		*AMINO ACIDS ORAL LIQUID***	203	AMLODIPINE BESYLATE-ATORVASTATIN	
TAB 2 MG.....	61	*AMINO ACIDS ORAL LIQUID***	203	CALCIUM TAB 10-20 MG	75
ALPRAZOLAM TAB 0.5 MG	60	*AMINO ACIDS ORAL LIQUID***	203	AMLODIPINE BESYLATE-ATORVASTATIN	
ALPRAZOLAM TAB 0.25 MG	60	*AMINO ACIDS PACK***	200	CALCIUM TAB 10-40 MG	75
ALPRAZOLAM TAB 1 MG.....	60	*AMINO ACIDS PACK***	200	AMLODIPINE BESYLATE-ATORVASTATIN	
ALPRAZOLAM TAB 2 MG	61	*AMINO ACIDS PACK***	208	CALCIUM TAB 10-80 MG	75
ALPRAZOLAM TAB ER 24HR 0.5 MG	60	*AMINO ACIDS PACK***	208		
ALPRAZOLAM TAB ER 24HR 0.5 MG	60				

AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 2.5-10 MG	76	AMOXICILLIN CAP 500 MG & VONOPRAZAN TAB 20 MG THERAPY PACK	137	AMPHETAMINE-DEXTROAMPHETAMINE 3-BEAD CAP ER 24HR 50 MG	56
AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 5-10 MG	76	AMOXICILLIN CAP & CLARITHROMYCIN TAB & VONOPRAZAN TAB PACK	137	AMPHETAMINE-DEXTROAMPHETAMINE CAP ER 24HR 5 MG	54
AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 5-20 MG	76	AMOXICILLIN & K CLAVULANATE CHEW TAB 200-28.5 MG	65	AMPHETAMINE-DEXTROAMPHETAMINE CAP ER 24HR 10 MG	53
AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 5-40 MG	76	AMOXICILLIN & K CLAVULANATE CHEW TAB 400-57 MG	65	AMPHETAMINE-DEXTROAMPHETAMINE CAP ER 24HR 15 MG	54
AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 10-20 MG	75	AMOXICILLIN & K CLAVULANATE FOR SUSP 125-31.25 MG/5ML	66	AMPHETAMINE-DEXTROAMPHETAMINE CAP ER 24HR 20 MG	54
AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 10-40 MG	75	AMOXICILLIN & K CLAVULANATE FOR SUSP 200-28.5 MG/5ML	65	AMPHETAMINE-DEXTROAMPHETAMINE CAP ER 24HR 25 MG	54
AMLODIPINE BESYLATE-OLMESARTAN MEDOXOMIL TAB 5-20 MG	76	AMOXICILLIN & K CLAVULANATE FOR SUSP 250-62.5 MG/5ML	65	AMPHETAMINE-DEXTROAMPHETAMINE CAP ER 24HR 30 MG	54
AMLODIPINE BESYLATE-OLMESARTAN MEDOXOMIL TAB 5-40 MG	76	AMOXICILLIN & K CLAVULANATE FOR SUSP 400-57 MG/5ML	65	AMPHETAMINE-DEXTROAMPHETAMINE TAB 5 MG	54
AMLODIPINE BESYLATE-OLMESARTAN MEDOXOMIL TAB 10-20 MG	76	AMOXICILLIN & K CLAVULANATE FOR SUSP 600-42.9 MG/5ML	65	AMPHETAMINE-DEXTROAMPHETAMINE TAB 7.5 MG	54
AMLODIPINE BESYLATE-OLMESARTAN MEDOXOMIL TAB 10-40 MG	76	AMOXICILLIN & K CLAVULANATE TAB 250-125 MG	65	AMPHETAMINE-DEXTROAMPHETAMINE TAB 10 MG	54
AMLODIPINE BESYLATE ORAL SOLN 1 MG/ML (BASE EQUIVALENT)	72	AMOXICILLIN & K CLAVULANATE TAB 500-125 MG	65	AMPHETAMINE-DEXTROAMPHETAMINE TAB 12.5 MG	54
AMLODIPINE BESYLATE TAB 2.5 MG (BASE EQUIVALENT)	70	AMOXICILLIN & K CLAVULANATE TAB 875-125 MG	65	AMPHETAMINE-DEXTROAMPHETAMINE TAB 15 MG	54
AMLODIPINE BESYLATE TAB 5 MG (BASE EQUIVALENT)	70	AMOXICILLIN & K CLAVULANATE TAB ER 12HR 1000-62.5 MG	65	AMPHETAMINE-DEXTROAMPHETAMINE TAB 20 MG	54
AMLODIPINE BESYLATE TAB 10 MG (BASE EQUIVALENT)	70	AMOXICILLIN (TRIHYDRATE) CAP 250 MG	65	AMPHETAMINE-DEXTROAMPHETAMINE TAB 30 MG	54
AMLODIPINE BESYLATE-VALSARTAN TAB 5-160 MG	76	AMOXICILLIN (TRIHYDRATE) CHEW TAB 125 MG	65	AMPHETAMINE EXTENDED RELEASE SUSP 2.5 MG/ML	55
AMLODIPINE BESYLATE-VALSARTAN TAB 5-320 MG	76	AMOXICILLIN (TRIHYDRATE) CHEW TAB 250 MG	65	AMPHETAMINE SULFATE TAB 5 MG	54
AMLODIPINE BESYLATE-VALSARTAN TAB 10-160 MG	76	AMOXICILLIN (TRIHYDRATE) FOR SUSP 125 MG/5ML	65	AMPHETAMINE SULFATE TAB 5 MG	55
AMLODIPINE BESYLATE-VALSARTAN TAB 10-320 MG	76	AMOXICILLIN (TRIHYDRATE) FOR SUSP 200 MG/5ML	65	AMPHETAMINE SULFATE TAB 10 MG	54
AMLODIPINE-VALSARTAN- HYDROCHLOROTHIAZIDE TAB 5-160-12.5 MG	76	AMOXICILLIN (TRIHYDRATE) FOR SUSP 250 MG/5ML	65	AMPHETAMINE SULFATE TAB 10 MG	55
AMLODIPINE-VALSARTAN- HYDROCHLOROTHIAZIDE TAB 5-160-25 MG	76	AMOXICILLIN (TRIHYDRATE) FOR SUSP 400 MG/5ML	65	AMPHETAMINE TAB EXTENDED RELEASE 5 MG	55
AMLODIPINE-VALSARTAN- HYDROCHLOROTHIAZIDE TAB 10-160- 12.5 MG	76	AMOXICILLIN (TRIHYDRATE) FOR SUSP 500 MG	65	AMPHETAMINE TAB EXTENDED RELEASE 10 MG	55
AMLODIPINE-VALSARTAN- HYDROCHLOROTHIAZIDE TAB 10-160-25 MG	76	AMOXICILLIN (TRIHYDRATE) TAB 875 MG	66	AMPHETAMINE TAB EXTENDED RELEASE 15 MG	55
AMLODIPINE-VALSARTAN- HYDROCHLOROTHIAZIDE TAB 10-320-25 MG	76	AMPHETAMINE-DEXTROAMPHETAMINE 3-BEAD CAP ER 24HR 12.5 MG	53	AMPHETAMINE TAB EXTENDED RELEASE 20 MG	55
AMOXAPINE TAB 25 MG	261	AMPHETAMINE-DEXTROAMPHETAMINE 3-BEAD CAP ER 24HR 12.5 MG	56	AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 3.1 MG	53
AMOXAPINE TAB 50 MG	261	AMPHETAMINE-DEXTROAMPHETAMINE 3-BEAD CAP ER 24HR 25 MG	54	AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 3.1 MG	54
AMOXAPINE TAB 100 MG	261	AMPHETAMINE-DEXTROAMPHETAMINE 3-BEAD CAP ER 24HR 37.5 MG	54	AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 6.3 MG	53
AMOXAPINE TAB 150 MG	261	AMPHETAMINE-DEXTROAMPHETAMINE 3-BEAD CAP ER 24HR 37.5 MG	56	AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 6.3 MG	54
AMOXICIL CAP & CLARITHRO TAB & LANSOPRAZ CAP DR 500 & 500 & 30MG	136	AMPHETAMINE-DEXTROAMPHETAMINE 3-BEAD CAP ER 24HR 50 MG	54	AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 9.4 MG	53
				AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 9.4 MG	54
				AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 12.5 MG	53

AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 12.5 MG.....	54	ANTIHEMOPHIL FACT RCMB(BDD- RFVIII,SIM) FOR INJ KIT 1500 UNIT	152	ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 1000 UNIT	147
AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 15.7 MG.....	53	ANTIHEMOPHIL FACT RCMB(BDD- RFVIII,SIM) FOR INJ KIT 2000 UNIT	152	ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 1500 UNIT	147
AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 15.7 MG.....	54	ANTIHEMOPHIL FACT RCMB(BDD- RFVIII,SIM) FOR INJ KIT 2500 UNIT	152	ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 2000 UNIT	147
AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 18.8 MG.....	53	ANTIHEMOPHIL FACT RCMB(BDD- RFVIII,SIM) FOR INJ KIT 3000 UNIT	152	ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 3000 UNIT	147
AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 18.8 MG.....	54	ANTIHEMOPHIL FACT RCMB(BDD- RFVIII,SIM) FOR INJ KIT 4000 UNIT	152	ANTIHEMOPHILIC FACTOR (RECOMB PORC) RPFVIII FOR INJ 500 UNIT	152
AMPICILLIN CAP 500 MG.....	66	ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 250 UNIT.....	150	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 250 UNIT	146
ANAGRELIDE HCL CAP 0.5 MG.....	66	ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 250 UNIT.....	150	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 250 UNIT	151
ANAKINRA SUBCUTANEOUS SOLN PREFILLED SYRINGE 100 MG/0.67ML	169	ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 500 UNIT	150	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 500 UNIT.....	147
ANASTROZOLE (BULK) POWDER.....	182	ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 500 UNIT	150	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 500 UNIT.....	151
ANASTROZOLE TAB 1 MG.....	53	ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 1000 UNIT	149	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 1000 UNIT.....	146
*ANTICOAGULANT CITRATE DEXTROSE SOLUTION A**	30	ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 1000 UNIT	150	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 1000 UNIT.....	151
ANTICOAGULANT SODIUM CITRATE CONCENTRATE 46.7%.....	31	ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 1000 UNIT	150	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 1500 UNIT.....	146
ANTICOAGULANT SODIUM CITRATE SOLN 4%	28	ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 1700 UNIT	149	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 2000 UNIT	146
ANTIHEMOPHIL FACT RCMB (BDD- RFVIII,MOR) FOR INJ KIT 250 UNIT	154	ANTIHEMOPHILIC FACTOR RCMB (BDD- RFVIIIFC) FOR INJ 250 UNIT	149	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 2000 UNIT	151
ANTIHEMOPHIL FACT RCMB (BDD- RFVIII,MOR) FOR INJ KIT 250 UNIT	154	ANTIHEMOPHILIC FACTOR RCMB (BDD- RFVIIIFC) FOR INJ 500 UNIT	149	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 3000 UNIT	146
ANTIHEMOPHIL FACT RCMB (BDD- RFVIII,MOR) FOR INJ KIT 500 UNIT	154	ANTIHEMOPHILIC FACTOR RCMB (BDD- RFVIIIFC) FOR INJ 750 UNIT	149	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 3000 UNIT	151
ANTIHEMOPHIL FACT RCMB (BDD- RFVIII,MOR) FOR INJ KIT 500 UNIT	154	ANTIHEMOPHILIC FACTOR RCMB (BDD- RFVIIIFC) FOR INJ 1000 UNIT.....	149	ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 4000 UNIT	147
ANTIHEMOPHIL FACT RCMB (BDD- RFVIII,MOR) FOR INJ KIT 1000 UNIT.....	154	ANTIHEMOPHILIC FACTOR RCMB (BDD- RFVIIIFC) FOR INJ 1500 UNIT.....	149	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ 220-400 UNIT.....	152
ANTIHEMOPHIL FACT RCMB (BDD- RFVIII,MOR) FOR INJ KIT 1000 UNIT.....	154	ANTIHEMOPHILIC FACTOR RCMB (BDD- RFVIIIFC) FOR INJ 2000 UNIT.....	149	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ 401-800 UNIT	152
ANTIHEMOPHIL FACT RCMB (BDD- RFVIII,MOR) FOR INJ KIT 2000 UNIT.....	154	ANTIHEMOPHILIC FACTOR RCMB (BDD- RFVIIIFC) FOR INJ 3000 UNIT.....	149	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ 801-1240 UNIT	153
ANTIHEMOPHIL FACT RCMB (BDD- RFVIII,MOR) FOR INJ KIT 2000 UNIT.....	154	ANTIHEMOPHILIC FACTOR RCMB (BDD- RFVIIIFC) FOR INJ 4000 UNIT.....	149	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ 1241-1800 UNIT	152
ANTIHEMOPHIL FACT RCMB (BDD- RFVIII,MOR) FOR INJ KIT 3000 UNIT.....	154	ANTIHEMOPHILIC FACTOR RCMB (BDD- RFVIIIFC) FOR INJ 5000 UNIT.....	149	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ 1801-2400 UNIT	152
ANTIHEMOPHIL FACT RCMB(BDD-RFVIII PEG-AUCL) FOR INJ 500 UNIT	150	ANTIHEMOPHILIC FACTOR RCMB (BDD- RFVIIIFC) FOR INJ 6000 UNIT	149	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ KIT 250 UNIT	150
ANTIHEMOPHIL FACT RCMB(BDD-RFVIII PEG-AUCL)FOR INJ 1000 UNIT	150	ANTIHEMOPHILIC FACTOR RCMB (BDD- RFVIII,SIM) FOR INJ 250 UNIT	151	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ KIT 500 UNIT	151
ANTIHEMOPHIL FACT RCMB(BDD-RFVIII PEG-AUCL)FOR INJ 2000 UNIT	150	ANTIHEMOPHILIC FACTOR RCMB (BDD- RFVIII,SIM) FOR INJ 500 UNIT	152	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ KIT 1000 UNIT	150
ANTIHEMOPHIL FACT RCMB(BDD-RFVIII PEG-AUCL)FOR INJ 3000 UNIT	150	ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 250 UNIT	147	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ KIT 2000 UNIT	150
ANTIHEMOPHIL FACT RCMB (BDD- RFVIII,SIM) FOR INJ KIT 250 UNIT	152	ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 500 UNIT	147	ANTIHEMOPHILIC FACTOR RECOMB (RFVIII) FOR INJ KIT 3000 UNIT	151
ANTIHEMOPHIL FACT RCMB (BDD- RFVIII,SIM) FOR INJ KIT 500 UNIT.....	152	ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 750 UNIT	147	ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 250-600 UNIT	150

ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 250 UNIT	147	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 250 UNIT	147	ARFORMOTEROL TARTRATE SOLN NEBU 15 MCG/2ML (BASE EQUIV).....	69
ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 500-500 UNIT KIT	153	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 500 UNIT	147	ARGININE CAP 500 MG	195
ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 500-1200 UNIT	150	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 1000 UNIT	147	ARGININE POWDER PACKET 500 MG	182
ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 500 UNIT	147	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 1500 UNIT	147	ARGININE TAB 500 MG	182
ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 1000-1000 UNIT KIT ...	153	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 2000 UNIT	147	ARIMOCLOMOL CITRATE CAP 47 MG.....	196
ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 1000-2400 UNIT	150	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 2500 UNIT	147	ARIMOCLOMOL CITRATE CAP 62 MG.....	196
ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 1000 UNIT	147	ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 3000 UNIT	147	ARIMOCLOMOL CITRATE CAP 93 MG.....	196
ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 1500 UNIT	147	ANTIINHIBITOR COAGULANT COMPLEX FOR IV SOLN 500 UNIT	149	ARIMOCLOMOL CITRATE CAP 124 MG.....	196
ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 2000 UNIT	147	ANTIINHIBITOR COAGULANT COMPLEX FOR IV SOLN 1000 UNIT	149	ARIPIRAZOLE ORALLY DISINTEGRATING TAB 10 MG	7
ANTIHEMOPHILIC FACT RCMB (BDD- RFVIII,SIM) FOR INJ 1000 UNIT	151	ANTIINHIBITOR COAGULANT COMPLEX FOR IV SOLN 2500 UNIT	149	ARIPIRAZOLE ORALLY DISINTEGRATING TAB 15 MG	7
ANTIHEMOPHILIC FACT RCMB (BDD- RFVIII,SIM) FOR INJ 1500 UNIT	151	APALUTAMIDE TAB 60 MG	23	ARIPIRAZOLE ORAL SOLUTION 1 MG/ML ..	7
ANTIHEMOPHILIC FACT RCMB (BDD- RFVIII,SIM) FOR INJ 2000 UNIT	151	APALUTAMIDE TAB 240 MG	23	ARIPIRAZOLE TAB 2 MG	7
ANTIHEMOPHILIC FACT RCMB (BDD- RFVIII,SIM) FOR INJ 2500 UNIT	151	APIXABAN CAP SPRINKLE 0.15 MG	28	ARIPIRAZOLE TAB 5 MG	7
ANTIHEMOPHILIC FACT RCMB (BDD- RFVIII,SIM) FOR INJ 3000 UNIT	152	APIXABAN TAB 2.5 MG	28	ARIPIRAZOLE TAB 10 MG	7
ANTIHEMOPHILIC FACT RCMB (BDD- RFVIII,SIM) FOR INJ 4000 UNIT	152	APIXABAN TAB 5 MG	28	ARIPIRAZOLE TAB 15 MG	7
ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 250 UNIT	151	APIXABAN TAB FOR ORAL SUSP 0.5 MG....	28	ARIPIRAZOLE TAB 20 MG	7
ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 500 UNIT	151	APIXABAN TAB FOR ORAL SUSP PACK 3 X 0.5 MG (1.5 MG)	28	ARIPIRAZOLE TAB 30 MG	7
ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 1000 UNIT	151	APIXABAN TAB FOR ORAL SUSP PACK 4 X 0.5 MG (2 MG)	28	ARMODAFINIL TAB 50 MG	248
ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 1500 UNIT	151	APIXABAN TAB STARTER PACK 5 MG	28	ARMODAFINIL TAB 150 MG	248
ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 2000 UNIT	151	APOMORPHINE HCL SOLN CARTRIDGE 30 MG/3ML	103	ARMODAFINIL TAB 200 MG	248
ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 3000 UNIT	151	APOMORPHINE HCL SOLN CARTRIDGE 30 MG/3ML	103	ARMODAFINIL TAB 250 MG	248
ANTIHEMOPHILIC FACT RCMB FC-VWF- XTEN-EHTL FOR INJ 250 UNIT	148	APRACLONIDINE HCL OPHTH SOLN 0.5% (BASE EQUIVALENT).....	224	ARTEMETHER-LUMEFANTRINE TAB 20- 120 MG	49
ANTIHEMOPHILIC FACT RCMB FC-VWF- XTEN-EHTL FOR INJ 250 UNIT	148	APRACLONIDINE HCL OPHTH SOLN 1% (BASE EQUIVALENT).....	224	*ARTIFICIAL SALIVA - PACKET***	84
ANTIHEMOPHILIC FACT RCMB FC-VWF- XTEN-EHTL FOR INJ 500 UNIT	148	APREMILAST TAB 20 MG	173	*ARTIFICIAL SALIVA - SOLUTION***	84
ANTIHEMOPHILIC FACT RCMB FC-VWF- XTEN-EHTL FOR INJ 1000 UNIT	148	APREMILAST TAB 30 MG	173	*ARTIFICIAL SALIVA - SOLUTION***	84
ANTIHEMOPHILIC FACT RCMB FC-VWF- XTEN-EHTL FOR INJ 2000 UNIT	148	APREMILAST TAB ER 24HR 75 MG	173	*ARTIFICIAL TEAR OPHTH INSERT***	220
ANTIHEMOPHILIC FACT RCMB FC-VWF- XTEN-EHTL FOR INJ 3000 UNIT	148	APREMILAST TAB STARTER THERAPY PACK 4 X 10 MG & 51 X 20 MG	173	ASCIMINIB HCL TAB 20 MG	47
ANTIHEMOPHILIC FACT RCMB FC-VWF- XTEN-EHTL FOR INJ 4000 UNIT	148	APREMILAST TAB STARTER THERAPY PACK 10 MG & 20 MG & 30 MG	173	ASCIMINIB HCL TAB 40 MG	47
		APREPITANT CAPSULE 40 MG	118	ASCIMINIB HCL TAB 100 MG	47
		APREPITANT CAPSULE 80 MG	118	ASCORBIC ACID TAB 500 MG	117
		APREPITANT CAPSULE 125 MG	118	ASENAPINE MALEATE SL TAB 2.5 MG (BASE EQUIV)	7
		APREPITANT CAPSULE THERAPY PACK 80 & 125 MG	118	ASENAPINE MALEATE SL TAB 5 MG (BASE EQUIV)	7
		APREPITANT FOR ORAL SUSP 125 MG (125 MG/5ML)	118	ASENAPINE MALEATE SL TAB 10 MG (BASE EQUIV)	7
		APROCITENTAN TAB 12.5 MG	74	ASFOTASE ALFA SUBCUTANEOUS INJ 18 MG/0.45ML	139
		ARFORMOTEROL TARTRATE SOLN NEBU 15 MCG/2ML (BASE EQUIV).....	69	ASFOTASE ALFA SUBCUTANEOUS INJ 28 MG/0.7ML	139
				ASFOTASE ALFA SUBCUTANEOUS INJ 40 MG/ML	139
				ASFOTASE ALFA SUBCUTANEOUS INJ 80 MG/0.8ML	139
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				ASPIRIN CHEW TAB 81 MG	217
				ASPIRIN CHEW TAB 81 MG	217
				ASPIRIN CHEW TAB 81 MG	217
				ASPIRIN CHEW TAB 81 MG	217
				ASPIRIN CHEW TAB 81 MG	218
				ASPIRIN CHEW TAB 81 MG	218
				ASPIRIN CHEW TAB 81 MG	218



ASPIRIN CHEW TAB 81 MG	218	ATOMOXETINE HCL CAP 40 MG (BASE EQUIV).....	57	AZATHIOPRINE TAB 75 MG.....	168
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ASPIRIN CHEW TAB 81 MG	219	ATOMOXETINE HCL CAP 80 MG (BASE EQUIV).....	57	AZATHIOPRINE TAB 100 MG	168
ASPIRIN CHEW TAB 81 MG	219	ATOMOXETINE HCL CAP 100 MG (BASE EQUIV).....	56	AZATHIOPRINE TAB 100 MG	168
ASPIRIN CHEW TAB 81 MG	220	ATORVASTATIN CALCIUM SUSP 20 MG/5ML (4MG/ML) (BASE EQUIV).....	106	AZELAIC ACID CREAM 20%	87
ASPIRIN CHEW TAB 81 MG	220	ATORVASTATIN CALCIUM TAB 10 MG (BASE EQUIVALENT).....	106	AZELAIC ACID FOAM 15%.....	89
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ASPIRIN TAB DELAYED RELEASE 81 MG ...	217	ATORVASTATIN CALCIUM TAB 40 MG (BASE EQUIVALENT).....	106	AZELASTINE HCL NASAL SPRAY 0.1% (137 MCG/SPRAY)	43
ASPIRIN TAB DELAYED RELEASE 81 MG ...	217	ATORVASTATIN CALCIUM TAB 80 MG (BASE EQUIVALENT).....	106	AZELASTINE HCL OPHTH SOLN 0.05%.....	221
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ASPIRIN TAB DELAYED RELEASE 81 MG ...	217	ATOVAQUONE-PROGUANIL HCL TAB 62.5-25 MG.....	50	AZILSARTAN MEDOXOMIL-CHLORTHALIDONE TAB 40-25 MG.....	77
ASPIRIN TAB DELAYED RELEASE 81 MG ...	217	ATOVAQUONE-PROGUANIL HCL TAB 250-100 MG.....	49	AZILSARTAN MEDOXOMIL TAB 40 MG	14
ASPIRIN TAB DELAYED RELEASE 81 MG ...	217	ATOVAQUONE-PROGUANIL HCL TAB 250-100 MG.....	49	AZILSARTAN MEDOXOMIL TAB 80 MG	14
ASPIRIN TAB DELAYED RELEASE 81 MG ...	217	ATOVAQUONE SUSP 750 MG/5ML	49	AZITHROMYCIN FOR SUSP 100 MG/5ML ..	179
ASPIRIN TAB DELAYED RELEASE 81 MG ...	217	ATRASENTAN HCL TAB 0.75 MG	207	AZITHROMYCIN FOR SUSP 200 MG/5ML ..	179
ASPIRIN TAB DELAYED RELEASE 81 MG ...	218	ATROPINE SULFATE OPHTH OINT 1%	220	AZITHROMYCIN FOR SUSP 200 MG/5ML ..	180
ASPIRIN TAB DELAYED RELEASE 81 MG ...	218	ATROPINE SULFATE OPHTH SOLN 1%	220	AZITHROMYCIN OPHTH SOLN 1%.....	223
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ASPIRIN TAB DELAYED RELEASE 81 MG ...	218	AURANOFIN CAP 3 MG.....	172	AZITHROMYCIN POWD PACK FOR SUSP 1 GM.....	180
ASPIRIN TAB DELAYED RELEASE 81 MG ...	218	AURANOFIN CAP 3 MG.....	173	AZITHROMYCIN TAB 250 MG	179
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ASPIRIN TAB DELAYED RELEASE 81 MG ...	218	AVANAFIL TAB 50 MG.....	140	AZITHROMYCIN TAB 250 MG	180
ASPIRIN TAB DELAYED RELEASE 81 MG ...	218	AVANAFIL TAB 50 MG.....	141	AZITHROMYCIN TAB 500 MG	179
ASPIRIN TAB DELAYED RELEASE 81 MG ...	218	AVANAFIL TAB 100 MG.....	140	AZITHROMYCIN TAB 500 MG	180
ASPIRIN TAB DELAYED RELEASE 81 MG ...	218	AVANAFIL TAB 100 MG.....	141	AZITHROMYCIN TAB 500 MG	180
ASPIRIN TAB DELAYED RELEASE 81 MG ...	219	AVANAFIL TAB 200 MG.....	140	AZITHROMYCIN TAB 600 MG	179
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ASPIRIN TAB DELAYED RELEASE 81 MG ...	220	AVAPRITINIB TAB 50 MG	208	BACITRACIN-POLYMYXIN B OPHTH OINT ..	220
ATAZANAVIR SULFATE CAP 150 MG (BASE EQUIV).....	21	AVAPRITINIB TAB 100 MG	208	BACITRACIN-POLYMYXIN B OPHTH OINT ..	221
ATAZANAVIR SULFATE CAP 200 MG (BASE EQUIV).....	21	AVAPRITINIB TAB 200 MG	208	BACITRACIN-POLYMYXIN-NEOMYCIN-HC OPHTH OINT 1%	223
ATAZANAVIR SULFATE CAP 300 MG (BASE EQUIV).....	21	AVAPRITINIB TAB 300 MG	208	BACITRACIN-POLYMYXIN-NEOMYCIN-HC OPHTH OINT 1%	223
ATAZANAVIR SULFATE-COBICISTAT TAB 300-150 MG (BASE EQUIV)	21	AVATROMBOPAG MALEATE CAP SPRINKLE 10 MG (BASE EQUIV)	67	BACITRACIN-POLYMYXIN-NEOMYCIN-HC OPHTH OINT 1%	223
ATAZANAVIR SULFATE ORAL POWDER PACKET 50 MG (BASE EQUIV)	21	AVATROMBOPAG MALEATE TAB 20 MG (BASE EQUIV).....	67	BACLOFEN ORAL SOLN 5 MG/5ML.....	248
ATENOLOL & CHLORTHALIDONE TAB 50-25 MG	76	AVUTOMETINIB CAP 0.8 MG & DEFACTINIB TAB 200 MG THERAPY PACK ..	45	BACLOFEN ORAL SOLN 10 MG/5ML	248
ATENOLOL & CHLORTHALIDONE TAB 100-25 MG	76	AXITINIB TAB 1 MG	210	BACLOFEN ORAL SOLN 10 MG/5ML	248
ATENOLOL TAB 25 MG	62	AXITINIB TAB 5 MG	210	BACLOFEN SUSP 25 MG/5ML	248
ATENOLOL TAB 50 MG	62	AZACITIDINE TAB 200 MG.....	47	BACLOFEN TAB 5 MG.....	248
ATENOLOL TAB 100 MG	62	AZACITIDINE TAB 300 MG.....	47	BACLOFEN TAB 10 MG	247
ATOGEPAANT TAB 10 MG	70	AZATHIOPRINE TAB 50 MG	168	BACLOFEN TAB 15 MG.....	248
ATOGEPAANT TAB 30 MG.....	70			BACLOFEN TAB 20 MG	247
ATOGEPAANT TAB 60 MG.....	70			BALOXAVIR MARBOXIL TAB THERAPY PACK 1 X 40 MG (40 MG DOSE).....	23
ATOMOXETINE HCL CAP 10 MG (BASE EQUIV).....	56			BALOXAVIR MARBOXIL TAB THERAPY PACK 1 X 80 MG (80 MG DOSE).....	23
ATOMOXETINE HCL CAP 18 MG (BASE EQUIV).....	57			BALSALAZIDE DISODIUM CAP 750 MG	12
ATOMOXETINE HCL CAP 25 MG (BASE EQUIV).....	57			*BALSAM PERU-CASTOR OIL OINT***	93
				*BALSAM PERU-CASTOR OIL OINT***	93
				*BALSAM PERU-CASTOR OIL OINT***	94

BARICITINIB TAB 1 MG.....	170	BENZONATATE CAP 150 MG.....	245	BETAMETHASONE VALERATE CREAM	
BARICITINIB TAB 2 MG.....	170	BENZONATATE CAP 200 MG.....	245	0.1% (BASE EQUIVALENT)	155
BARICITINIB TAB 4 MG.....	170	BENZOYL PEROXIDE-ERYTHROMYCIN		BETAMETHASONE VALERATE LOTION	
BECAPLERMIN GEL 0.01%.....	90	GEL 5-3%.....	87	0.1% (BASE EQUIVALENT)	155
BECLOMETHASONE DIPROP HFA BREATH		BENZOYL PEROXIDE-ERYTHROMYCIN		BETAMETHASONE VALERATE OINT 0.1%	
ACT INH AER 40 MCG/ACT.....	22	GEL 5-3%.....	89	(BASE EQUIVALENT).....	155
BECLOMETHASONE DIPROP HFA BREATH		BENZOYL PEROXIDE LOTION 4% &		BETAXOLOL HCL OPHTH SOLN 0.5%.....	224
ACT INH AER 80 MCG/ACT.....	22	HYALURONATE SODIUM GEL 0.2% KIT.....	94	BETAXOLOL HCL OPHTH SUSP 0.25%.....	224
BECLOMETHASONE DIPROPIONATE		BENZOYL PEROXIDE LOTION 8%.....	93	BETAXOLOL HCL TAB 10 MG	62
NASAL AEROSOL 40 MCG/ACT	22	BENZOYL PEROXIDE LOTION 8% &		BETAXOLOL HCL TAB 20 MG	62
BECLOMETHASONE DIPROPIONATE		HYALURONATE SODIUM GEL 0.2% KIT.....	94	BETHANECHOL CHLORIDE TAB 5 MG	140
NASAL AEROSOL 80 MCG/ACT	22	*BENZOYL PEROXIDE PAD 4% & VITAMIN		BETHANECHOL CHLORIDE TAB 10 MG	140
BEDAQUILINE FUMARATE TAB 20 MG		E TOPICAL 5% KIT***	94	BETHANECHOL CHLORIDE TAB 25 MG	140
(BASE EQUIV).....	52	*BENZOYL PEROXIDE PAD 8% & VITAMIN		BETHANECHOL CHLORIDE TAB 50 MG.....	140
BEDAQUILINE FUMARATE TAB 100 MG		E TOPICAL 5% KIT***	94	BEXAGLIFLOZIN TAB 20 MG	34
(BASE EQUIV).....	52	*BENZOYL PEROX PAD 4% & SALICYLIC		BEXAROTENE CAP 75 MG	245
BELIMUMAB SUBCUTANEOUS SOLUTION		AC PAD 1% & VIT E 5% KIT*	94	BEXAROTENE GEL 1%	245
AUTO-INJECTOR 200 MG/ML.....	172	*BENZOYL PEROX PAD 8% & SALICYLIC		BICALUTAMIDE TAB 50 MG	23
BELIMUMAB SUBCUTANEOUS SOLUTION		AC PAD 2% & VIT E 5% KIT*.....	94	*BICARB 22 MEQ/L-DEXT SOLN WITH K 4	
PREFILLED SYRINGE 200 MG/ML	172	BENZTROPINE MESYLATE TAB 0.5 MG	28	MEQ/L (CRRT)***	115
BELLADONNA ALKALOIDS & OPIUM		BENZTROPINE MESYLATE TAB 1 MG	28	*BICARB 32 MEQ/L-DEXT SOLN WITH CA	
SUPPOS 16.2-60 MG	50	BENZTROPINE MESYLATE TAB 2 MG	28	2.5 MEQ/L (CRRT)***	115
BELUMOSUDIL MESYLATE TAB 200 MG....	172	BEPOTASTINE BESILATE OPHTH SOLN		*BICARB 32 MEQ/L-DEXT SOLN WITH K 2	
BELZUTIFAN TAB 40 MG	48	1.5%.....	221	MEQ/L (CRRT)***	115
BEMPEDOIC ACID-EZETIMIBE TAB 180-		BERDAZIMER SODIUM GEL 10.3%.....	208	*BICARB 32 MEQ/L-DEXT SOLN WITH	
10 MG	108	BEROTRALSTAT HCL PELLET PACK 72 MG ..	13	K-CA 2-3.5 MEQ/L (CRRT)**	115
BEMPEDOIC ACID TAB 180 MG.....	108	BEROTRALSTAT HCL PELLET PACK 96 MG ..	13	*BICARB 32 MEQ/L-DEXT SOLN WITH	
BENAZEPRIL HCL TAB 5 MG.....	15	BEROTRALSTAT HCL PELLET PACK 108 MG ..	13	K-CA 4-2.5 MEQ/L (CRRT)**	115
BENAZEPRIL HCL TAB 10 MG.....	15	BEROTRALSTAT HCL PELLET PACK 132 MG ..	13	*BICARB 32 MEQ/L-DEXT SOLN WITH	
BENAZEPRIL HCL TAB 10 MG.....	15	BESIFLOXACIN HCL OPHTH SUSP 0.6%		K-MG 4-1.2 MEQ/L (CRRT)**.....	115
BENAZEPRIL HCL TAB 20 MG	15	(BASE EQUIV).....	223	*BICARB 32 MEQ/L SOLN WITH MG 1.2	
BENAZEPRIL HCL TAB 20 MG	15	*BETAINE POWDER FOR ORAL		MEQ/L (CRRT)***	115
BENAZEPRIL HCL TAB 40 MG	15	SOLUTION***	137	*BICARB-K 22-4 MEQ/L WITH PHOS 1	
BENAZEPRIL HCL TAB 40 MG	15	*BETAINE POWDER FOR ORAL		MMOL/L SOLN (CRRT)***.....	114
BENAZEPRIL & HYDROCHLOROTHIAZIDE		SOLUTION***	137	*BICARB-K-CA 32-4-2.5 MEQ/L WITH	
TAB 5-6.25 MG	77	BETAMETHASONE DIPROPIONATE		PHOS 1 MMOL/L SOLN (CRRT)*	114
BENAZEPRIL & HYDROCHLOROTHIAZIDE		AUGMENTED CREAM 0.05%.....	154	BICTEGRAVIR-EMTRICITABINE-	
TAB 10-12.5 MG.....	76	BETAMETHASONE DIPROPIONATE		TENOFOVIR AF TAB 30-120-15 MG	17
BENAZEPRIL & HYDROCHLOROTHIAZIDE		AUGMENTED GEL 0.05%	154	BICTEGRAVIR-EMTRICITABINE-	
TAB 10-12.5 MG.....	78	BETAMETHASONE DIPROPIONATE		TENOFOVIR AF TAB 50-200-25 MG	17
BENAZEPRIL & HYDROCHLOROTHIAZIDE		AUGMENTED LOTION 0.05%.....	154	BIMATOPROST OPHTH SOLN 0.01%.....	225
TAB 20-12.5 MG	76	BETAMETHASONE DIPROPIONATE		BIMATOPROST OPHTH SOLN 0.01%.....	225
BENAZEPRIL & HYDROCHLOROTHIAZIDE		AUGMENTED OINT 0.05%.....	155	BIMATOPROST OPHTH SOLN 0.03%.....	225
TAB 20-12.5 MG	78	BETAMETHASONE DIPROPIONATE		BIMEKIZUMAB-BKZX SUBCUTANEOUS	
BENAZEPRIL & HYDROCHLOROTHIAZIDE		AUGMENTED OINT 0.05%.....	156	SOLN AUTO-INJECTOR 160 MG/ML	172
TAB 20-25 MG.....	77	BETAMETHASONE DIPROPIONATE		BIMEKIZUMAB-BKZX SUBCUTANEOUS	
BENAZEPRIL & HYDROCHLOROTHIAZIDE		CREAM 0.05%.....	155	SOLN AUTO-INJECTOR 320 MG/2ML	172
TAB 20-25 MG	78	BETAMETHASONE DIPROPIONATE		BIMEKIZUMAB-BKZX SUBCUTANEOUS	
BENRALIZUMAB SUBCUTANEOUS SOLN		LOTION 0.05%	155	SOLN PREFILLED SYR 160 MG/ML	172
AUTO-INJECTOR 30 MG/ML	242	BETAMETHASONE DIPROPIONATE OINT		BIMEKIZUMAB-BKZX SUBCUTANEOUS	
BENZALKONIUM CHLORIDE SOLN.....	25	0.05%	155	SOLN PREFILLED SYR 320 MG/2ML.....	172
BENZALKONIUM CHLORIDE SOLN 50%.....	25	BETAMETHASONE DIPROPIONATE		BINIMETINIB TAB 15 MG.....	211
BENZNIDAZOLE TAB 12.5 MG	16	SPRAY EMULSION 0.05% (BASE EQUIV) ..	159	BIRCH TRITERPENES GEL 10%.....	93
BENZNIDAZOLE TAB 100 MG.....	16	BETAMETHASONE VALERATE AEROSOL		BISACODYL TAB DELAYED RELEASE 5 MG .	177
BENZOIN TINCTURE	87	FOAM 0.12%.....	155	BISACODYL TAB DELAYED RELEASE 5 MG .	177
BENZONATATE CAP 100 MG.....	245			BISACODYL TAB DELAYED RELEASE 5 MG .	177

BISACODYL TAB DELAYED RELEASE 5 MG . 177	*BLOOD GLUCOSE CALIBRATION - LIQUID*** . 97	*BLOOD GLUCOSE/KETONE MONITORING DEVICES*** . 190
BISACODYL TAB DELAYED RELEASE 5 MG . 177	*BLOOD GLUCOSE CALIBRATION - LIQUID*** . 98	*BLOOD GLUCOSE MONITORING KIT*** . 96
BISACODYL TAB DELAYED RELEASE 5 MG . 177	*BLOOD GLUCOSE CALIBRATION - LIQUID*** . 98	*BLOOD GLUCOSE MONITORING KIT W/ DEVICE*** . 94
BISACODYL TAB DELAYED RELEASE 5 MG . 177	*BLOOD GLUCOSE CALIBRATION - LIQUID*** . 99	*BLOOD GLUCOSE MONITORING KIT W/ DEVICE*** . 94
BISACODYL TAB DELAYED RELEASE 5 MG . 178	*BLOOD GLUCOSE CALIBRATION - LIQUID*** . 99	*BLOOD GLUCOSE MONITORING KIT W/ DEVICE*** . 96
BISACODYL TAB DELAYED RELEASE 5 MG . 178	*BLOOD GLUCOSE CALIBRATION - LIQUID*** . 99	*BLOOD GLUCOSE MONITORING KIT W/ DEVICE*** . 96
BISACODYL TAB DELAYED RELEASE 5 MG . 178	*BLOOD GLUCOSE CALIBRATION - LIQUID*** . 99	*BLOOD GLUCOSE MONITORING KIT W/ DEVICE*** . 96
BISACODYL TAB DELAYED RELEASE 5 MG . 178	*BLOOD GLUCOSE CALIBRATION - LIQUID*** . 99	*BLOOD GLUCOSE MONITORING KIT W/ DEVICE*** . 96
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BISOPROLOL & HYDROCHLOROTHIAZIDE TAB 10-6.25 MG . 77	*BLOOD GLUCOSE CALIBRATION - LIQUID - HIGH*** . 206	BOSENTAN TAB FOR ORAL SUSP 32 MG . 239
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*BLOOD GLUCOSE CALIBRATION - LIQUID*** . 95	*BLOOD GLUCOSE CALIBRATION - LIQUID - LOW*** . 186	BOSUTINIB CAP 100 MG . 208
*BLOOD GLUCOSE CALIBRATION - LIQUID*** . 95	*BLOOD GLUCOSE CALIBRATION - LIQUID - LOW*** . 188	BOSUTINIB TAB 100 MG . 208
*BLOOD GLUCOSE CALIBRATION - LIQUID*** . 95	*BLOOD GLUCOSE CALIBRATION - LIQUID - LOW*** . 192	BOSUTINIB TAB 400 MG . 208
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*BLOOD GLUCOSE CALIBRATION - LIQUID*** . 95	*BLOOD GLUCOSE CALIBRATION - LIQUID - NORMAL*** . 185	BREMELANOTIDE ACET SUBCUTANEOUS SOLN AUTO-INJ 1.75 MG/0.3ML . 81
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*BLOOD GLUCOSE CALIBRATION - LIQUID*** . 96	*BLOOD GLUCOSE CALIBRATION - LIQUID - NORMAL*** . 185	BRENSOCATIB TAB 25 MG . 183
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*BLOOD GLUCOSE CALIBRATION - LIQUID*** . 97	*BLOOD GLUCOSE CALIBRATION - LIQUID - NORMAL*** . 206	BREXPIRAZOLE TAB 1 MG . 9
*BLOOD GLUCOSE CALIBRATION - LIQUID*** . 97		BREXPIRAZOLE TAB 2 MG . 9
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		BRIMONIDINE TARTRATE GEL 0.33% (BASE EQUIVALENT). . 89

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BRIMONIDINE TARTRATE OPHTH SOLN 0.2%.....	224	*BULK CHEMICALS - POWDER**	195	BUPRENORPHINE TD PATCH WEEKLY 15 MCG/HR	226
BRIMONIDINE TARTRATE OPHTH SOLN 0.15%.....	224	*BULK CHEMICALS - POWDER**	200	BUPRENORPHINE TD PATCH WEEKLY 20 MCG/HR	226
BRIMONIDINE TARTRATE OPHTH SOLN 0.15%.....	224	*BULK CHEMICALS - POWDER**	200	BUPROPION HCL (SMOKING DETERRENT) TAB ER 12HR 150 MG	249
BRIMONIDINE TARTRATE-TIMOLOL MALEATE OPHTH SOLN 0.2-0.5%	224	BUMETANIDE TAB 0.5 MG.....	102	BUPROPION HCL TAB 75 MG	33
BRINCIDOFOVIR ORAL SUSP 10 MG/ML....	52	BUMETANIDE TAB 0.5 MG.....	102	BUPROPION HCL TAB 100 MG.....	33
BRINCIDOFOVIR TAB 100 MG.....	52	BUMETANIDE TAB 1 MG	102	BUPROPION HCL TAB ER 12HR 100 MG.....	33
BRINZOLAMIDE-BRIMONIDINE TARTRATE OPHTH SUSP 1-0.2%	225	BUMETANIDE TAB 2 MG	102	BUPROPION HCL TAB ER 12HR 150 MG.....	33
BRINZOLAMIDE OPHTH SUSP 1%	224	BUPIVACAINE HCL POWDER.....	183	BUPROPION HCL TAB ER 12HR 200 MG.....	33
BRINZOLAMIDE OPHTH SUSP 1%	224	BUPRENORPHINE HCL BUCCAL FILM 75 MCG (BASE EQUIVALENT).....	226	BUPROPION HCL TAB ER 24HR 150 MG.....	33
BRIVARACETAM ORAL SOLN 10 MG/ML	31	BUPRENORPHINE HCL BUCCAL FILM 150 MCG (BASE EQUIVALENT).....	226	BUPROPION HCL TAB ER 24HR 300 MG.....	33
BRIVARACETAM TAB 10 MG	31	BUPRENORPHINE HCL BUCCAL FILM 300 MCG (BASE EQUIVALENT)	226	BUPROPION HCL TAB ER 24HR 450 MG.....	33
BRIVARACETAM TAB 25 MG	31	BUPRENORPHINE HCL BUCCAL FILM 450 MCG (BASE EQUIVALENT)	226	BUPROPION HCL TAB ER 24HR 450 MG.....	33
BRIVARACETAM TAB 50 MG	31	BUPRENORPHINE HCL BUCCAL FILM 600 MCG (BASE EQUIVALENT)	226	BUSPIRONE HCL TAB 5 MG.....	53
BRIVARACETAM TAB 75 MG	31	BUPRENORPHINE HCL BUCCAL FILM 600 MCG (BASE EQUIVALENT)	226	BUSPIRONE HCL TAB 7.5 MG	53
BRIVARACETAM TAB 100 MG.....	31	BUPRENORPHINE HCL BUCCAL FILM 750 MCG (BASE EQUIVALENT).....	226	BUSPIRONE HCL TAB 10 MG	53
BROMFENAC SODIUM OPHTH SOLN 0.07% (BASE EQUIVALENT).....	221	BUPRENORPHINE HCL BUCCAL FILM 900 MCG (BASE EQUIVALENT)	226	BUSPIRONE HCL TAB 15 MG.....	53
BROMFENAC SODIUM OPHTH SOLN 0.07% (BASE EQUIVALENT).....	223	BUPRENORPHINE HCL BUCCAL FILM 900 MCG (BASE EQUIVALENT)	226	BUSPIRONE HCL TAB 30 MG	53
BROMFENAC SODIUM OPHTH SOLN 0.09% (BASE EQUIV) (ONCE-DAILY).....	222	BUPRENORPHINE HCL-NALOXONE HCL SL FILM 2-0.5 MG (BASE EQUIV).....	232	BUSULFAN TAB 2 MG.....	11
BROMFENAC SODIUM OPHTH SOLN 0.075% (BASE EQUIVALENT).....	222	BUPRENORPHINE HCL-NALOXONE HCL SL FILM 4-1 MG (BASE EQUIV).....	232	BUTALBITAL-ACETAMINOPHEN- CAFFEINE CAP 50-300-40 MG.....	12
BROMFENAC SODIUM OPHTH SOLN 0.075% (BASE EQUIVALENT).....	222	BUPRENORPHINE HCL-NALOXONE HCL SL FILM 4-1 MG (BASE EQUIV).....	232	BUTALBITAL-ACETAMINOPHEN- CAFFEINE CAP 50-300-40 MG.....	13
BROMOCRIPTINE MESYLATE CAP 5 MG (BASE EQUIVALENT).....	103	BUPRENORPHINE HCL-NALOXONE HCL SL FILM 8-2 MG (BASE EQUIV).....	232	BUTALBITAL-ACETAMINOPHEN- CAFFEINE CAP 50-325-40 MG.....	12
BROMOCRIPTINE MESYLATE TAB 0.8 MG (BASE EQUIVALENT).....	35	BUPRENORPHINE HCL-NALOXONE HCL SL FILM 8-2 MG (BASE EQUIV).....	232	BUTALBITAL-ACETAMINOPHEN- CAFFEINE CAP 50-325-40 MG.....	13
BROMOCRIPTINE MESYLATE TAB 2.5 MG (BASE EQUIVALENT).....	103	BUPRENORPHINE HCL-NALOXONE HCL SL FILM 12-3 MG (BASE EQUIV).....	232	BUTALBITAL-ACETAMINOPHEN- CAFFEINE CAP 50-325-40 MG.....	12
BUDESONIDE DELAYED RELEASE CAP 4 MG.....	143	BUPRENORPHINE HCL-NALOXONE HCL SL TAB 0.7-0.18 MG (BASE EQ)	233	BUTALBITAL-ACETAMINOPHEN- CAFFEINE CAP 50-325-40 MG.....	13
BUDESONIDE DELAYED RELEASE PARTICLES CAP 3 MG.....	142	BUPRENORPHINE HCL-NALOXONE HCL SL TAB 1.4-0.36 MG (BASE EQ)	233	BUTALBITAL-ACETAMINOPHEN- CAFFEINE TAB 50-325-40 MG.....	12
BUDESONIDE-FORMOTEROL FUMARATE DIHYD AEROSOL 80-4.5 MCG/ACT	244	BUPRENORPHINE HCL-NALOXONE HCL SL TAB 1.4-0.36 MG (BASE EQ)	233	BUTALBITAL-ACETAMINOPHEN- CAFFEINE TAB 50-325-40 MG.....	13
BUDESONIDE-FORMOTEROL FUMARATE DIHYD AEROSOL 160-4.5 MCG/ACT	244	BUPRENORPHINE HCL-NALOXONE HCL SL TAB 2-0.5 MG (BASE EQUIV)	232	BUTALBITAL-ACETAMINOPHEN-CAFF W/ COD CAP 50-300-40-30 MG	229
BUDESONIDE-GLYCOPYRROLATE- FORMOTEROL AERS 160-9-4.8 MCG/ACT..	242	BUPRENORPHINE HCL-NALOXONE HCL SL TAB 2-0.5 MG (BASE EQUIV)	232	BUTALBITAL-ACETAMINOPHEN-CAFF W/ COD CAP 50-325-40-30 MG	229
BUDESONIDE INHALATION SUSP 0.5 MG/2ML	22	BUPRENORPHINE HCL-NALOXONE HCL SL TAB 8-2 MG (BASE EQ)	232	BUTALBITAL-ACETAMINOPHEN TAB 25- 325 MG.....	12
BUDESONIDE INHALATION SUSP 0.25 MG/2ML	22	BUPRENORPHINE HCL-NALOXONE HCL SL TAB 8-2 MG (BASE EQ)	232	BUTALBITAL-ACETAMINOPHEN TAB 50- 325 MG.....	12
BUDESONIDE INHALATION SUSP 1 MG/2ML	22	BUPRENORPHINE HCL-NALOXONE HCL SL TAB 8.6-2.1 MG (BASE EQ)	233	BUTALBITAL-ACETAMINOPHEN TAB 50- 325 MG.....	13
BUDESONIDE RECTAL FOAM 2 MG/ACT....	142	BUPRENORPHINE HCL-NALOXONE HCL SL TAB 11.4-2.9 MG (BASE EQ)	233	BUTALBITAL-ASPIRIN-CAFFEINE CAP 50-325-40 MG	12
BUDESONIDE TAB ER 24HR 9 MG.....	143	BUPRENORPHINE HCL SL TAB 2 MG (BASE EQUIV).....	232	BUTALBITAL-ASPIRIN-CAFF W/ CODEINE CAP 50-325-40-30 MG.....	229
*BULK CHEMICALS - POWDER**	189	BUPRENORPHINE HCL SL TAB 8 MG (BASE EQUIV).....	232	BUTALBITAL-ASPIRIN-CAFF W/ CODEINE CAP 50-325-40-30 MG.....	230
		BUPRENORPHINE TD PATCH WEEKLY 5 MCG/HR	226	BUTOCONAZOLE NITRATE (ONE DOSE) VAGINAL CREAM 2%.....	40
		BUPRENORPHINE TD PATCH WEEKLY 7.5 MCG/HR	226		

CARBINOXAMINE MALEATE EXTENDED RELEASE SUSP 4 MG/5ML	43	CEFIXIME FOR SUSP 200 MG/5ML	64	CHLORDIAZEPOXIDE-AMITRIPTYLINE TAB 5-12.5 MG	261
CARBINOXAMINE MALEATE EXTENDED RELEASE SUSP 4 MG/5ML	44	CEFIXIME TAB 400 MG	64	CHLORDIAZEPOXIDE-AMITRIPTYLINE TAB 10-25 MG	261
CARBINOXAMINE MALEATE SOLN 4 MG/5ML	43	CEFPODOXIME PROXETIL FOR SUSP 50 MG/5ML	64	CHLORDIAZEPOXIDE HCL CAP 5 MG	61
CARBINOXAMINE MALEATE SOLN 4 MG/5ML	43	CEFPODOXIME PROXETIL FOR SUSP 100 MG/5ML	64	CHLORDIAZEPOXIDE HCL CAP 10 MG	61
CARBINOXAMINE MALEATE TAB 4 MG	43	CEFPODOXIME PROXETIL TAB 100 MG	64	CHLORDIAZEPOXIDE HCL CAP 25 MG	61
*CARBOMER GEL BASE**	184	CEFPODOXIME PROXETIL TAB 200 MG	64	CHLORDIAZEPOXIDE HCL-CLIDINIUM BROMIDE CAP 5-2.5 MG	50
*CARBOMER GEL BASE**	184	CEFPROZIL FOR SUSP 125 MG/5ML	64	CHLORHEXIDINE GLUCONATE SOLN 0.12% 84	
*CARBOMER GEL BASE**	184	CEFPROZIL FOR SUSP 250 MG/5ML	64	CHLORHEXIDINE GLUCONATE SOLN 0.12% 85	
*CARBOMER GEL BASE**	184	CEFPROZIL TAB 250 MG	64	CHLORHEXIDINE GLUCONATE SOLN 0.12% 85	
*CARBOMER GEL BASE**	184	CEFPROZIL TAB 500 MG	64	CHLORHEXIDINE GLUCONATE SOLN 4% ...	86
*CARBOMER GEL BASE**	191	CEFUROXIME AXETIL TAB 250 MG	64	CHLOROQUINE PHOSPHATE TAB 250 MG ...	49
CARGLUMIC ACID SOLUBLE TAB 200 MG	109	CEFUROXIME AXETIL TAB 500 MG	64	CHLOROQUINE PHOSPHATE TAB 500 MG ...	49
CARIPRAZINE HCL CAP 0.5 MG (BASE EQUIVALENT)	10	CELECOXIB CAP 50 MG	217	CHLOROTHIAZIDE (BULK) POWDER	103
CARIPRAZINE HCL CAP 0.75 MG (BASE EQUIVALENT)	10	CELECOXIB CAP 100 MG	217	CHLOROTHIAZIDE SUSP 250 MG/5ML	103
CARIPRAZINE HCL CAP 1.5 MG (BASE EQUIVALENT)	10	CELECOXIB CAP 200 MG	217	CHLORPROMAZINE HCL (BULK) POWDER ...	6
CARIPRAZINE HCL CAP 3 MG (BASE EQUIVALENT)	10	CELECOXIB CAP 400 MG	217	CHLORPROMAZINE HCL CONC 30 MG/ML ..	6
CARIPRAZINE HCL CAP 4.5 MG (BASE EQUIVALENT)	10	CENEGERMIN-BKBJ OPTH SOLN 0.002% (20 MCG/ML)	220	CHLORPROMAZINE HCL CONC 100 MG/ML .	6
CARIPRAZINE HCL CAP 6 MG (BASE EQUIVALENT)	10	CENOBAMATE TAB 25 MG	33	CHLORPROMAZINE HCL TAB 10 MG	6
CARISOPRODOL TAB 250 MG	247	CENOBAMATE TAB 50 MG	33	CHLORPROMAZINE HCL TAB 25 MG	6
CARISOPRODOL TAB 350 MG	247	CENOBAMATE TAB 100 MG	33	CHLORPROMAZINE HCL TAB 50 MG	6
CARTEOLOL HCL OPTH SOLN 1%	224	CENOBAMATE TAB 150 MG	33	CHLORPROMAZINE HCL TAB 100 MG	6
CARVEDILOL PHOSPHATE CAP ER 24HR 10 MG	62	CENOBAMATE TAB 200 MG	33	CHLORPROMAZINE HCL TAB 200 MG	6
CARVEDILOL PHOSPHATE CAP ER 24HR 20 MG	62	CENOBAMATE TAB PACK 100 MG & 150 MG TABS (250 MG DAILY DOSE)	32	CHLORTHALIDONE TAB 12.5 MG	103
CARVEDILOL PHOSPHATE CAP ER 24HR 40 MG	62	CENOBAMATE TAB PACK 150 MG & 200 MG TABS (350 MG DAILY DOSE)	32	CHLORTHALIDONE TAB 15 MG	103
CARVEDILOL PHOSPHATE CAP ER 24HR 80 MG	62	CENOBAMATE TAB TITRATION PACK 14 X 12.5 MG & 14 X 25 MG	32	CHLORTHALIDONE TAB 25 MG	103
CARVEDILOL TAB 3.125 MG	62	CENOBAMATE TAB TITRATION PACK 14 X 50 MG & 14 X 100 MG	33	CHLORTHALIDONE TAB 50 MG	103
CARVEDILOL TAB 6.25 MG	62	CENOBAMATE TAB TITRATION PACK 14 X 150 MG & 14 X 200 MG	33	CHLORZOXAZONE TAB 375 MG	247
CARVEDILOL TAB 12.5 MG	62	CEPHALEXIN CAP 250 MG	65	CHLORZOXAZONE TAB 500 MG	247
CARVEDILOL TAB 25 MG	62	CEPHALEXIN CAP 500 MG	65	CHLORZOXAZONE TAB 750 MG	247
CEFACLOL CAP 250 MG	64	CEPHALEXIN CAP 750 MG	65	CHOLECALCIFEROL CAP 125 MCG (5000 UNIT)	117
CEFACLOL CAP 500 MG	64	CEPHALEXIN FOR SUSP 125 MG/5ML	65	CHOLESTYRAMINE (BULK) POWDER	184
CEFACLOL FOR SUSP 250 MG/5ML	64	CEPHALEXIN FOR SUSP 250 MG/5ML	65	CHOLESTYRAMINE (BULK) POWDER	184
CEFACLOL MONOHYDRATE TAB ER 12HR 500 MG	64	CEPHALEXIN TAB 250 MG	65	CHOLESTYRAMINE LIGHT POWDER 4 GM/DOSE	107
CEFADROXIL CAP 500 MG	64	CEPHALEXIN TAB 500 MG	65	CHOLESTYRAMINE LIGHT POWDER 4 GM/DOSE	108
CEFADROXIL FOR SUSP 250 MG/5ML	64	CERTOLIZUMAB PEGOL PREFILLED SYRINGE KIT 200 MG/ML	168	CHOLESTYRAMINE LIGHT POWDER 4 GM/DOSE	108
CEFADROXIL FOR SUSP 500 MG/5ML	64	CERTOLIZUMAB PEGOL PREFILLED SYRINGE KIT 200 MG/ML	168	CHOLESTYRAMINE LIGHT POWDER PACKETS 4 GM	107
CEFADROXIL TAB 1 GM	64	CERVICAL CAP 22 MM	189	CHOLESTYRAMINE LIGHT POWDER PACKETS 4 GM	108
CEFDINIR CAP 300 MG	64	CERVICAL CAP 26 MM	189	CHOLESTYRAMINE POWDER 4 GM/DOSE .	107
CEFDINIR FOR SUSP 125 MG/5ML	64	CERVICAL CAP 30 MM	189	CHOLESTYRAMINE POWDER 4 GM/DOSE .	108
CEFDINIR FOR SUSP 250 MG/5ML	64	CETRORELIX ACETATE FOR INJ KIT 0.25 MG	166	CHOLESTYRAMINE POWDER PACKETS 4 GM	107
CEFIXIME CAP 400 MG	64	CEVIMELINE HCL CAP 30 MG	84	CHOLESTYRAMINE POWDER PACKETS 4 GM	108
CEFIXIME FOR SUSP 100 MG/5ML	64	CHENODIOL (BASDS) TAB 250 MG	135	CHOLIC ACID CAP 50 MG	137
		CHENODIOL TAB 250 MG	135	CHOLIC ACID CAP 250 MG	137
		CHERRY SYRUP	184	CHOLINE FENOFIBRATE CAP DR 45 MG (FENOFIBRIC ACID EQUIV)	106
		CHLORAMBUCIL TAB 2 MG	10		

CLOBAZAM ORAL FILM 5 MG	135	CLONIDINE HCL TAB 0.1 MG	11	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 2000 UNIT	153
CLOBAZAM ORAL FILM 10 MG	135	CLONIDINE HCL TAB 0.2 MG	11	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 3000 UNIT	153
CLOBAZAM ORAL FILM 20 MG	135	CLONIDINE HCL TAB 0.3 MG	11	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ KIT 250 UNIT	148
CLOBAZAM SUSPENSION 2.5 MG/ML	134	CLONIDINE HCL TAB ER 12HR 0.1 MG	57	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ KIT 500 UNIT	148
CLOBAZAM SUSPENSION 2.5 MG/ML	134	CLONIDINE TD PATCH WEEKLY 0.1 MG/24HR	11	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ KIT 1000 UNIT	148
CLOBAZAM TAB 10 MG	134	CLONIDINE TD PATCH WEEKLY 0.2 MG/24HR	11	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ KIT 2000 UNIT	148
CLOBAZAM TAB 10 MG	134	CLONIDINE TD PATCH WEEKLY 0.3 MG/24HR	11	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ KIT 3000 UNIT	148
CLOBAZAM TAB 20 MG	134	CLOPIDOGREL BISULFATE (BULK) POWDER	184	COAGULATION FACTOR IX (RECOMB) (RFIXFC) FOR INJ 250 UNIT	148
CLOBETASOL PROPIONATE CREAM 0.05%	155	CLOPIDOGREL BISULFATE TAB 75 MG (BASE EQUIV)	236	COAGULATION FACTOR IX (RECOMB) (RFIXFC) FOR INJ 500 UNIT	148
CLOBETASOL PROPIONATE CREAM 0.025%	160	CLOPIDOGREL BISULFATE TAB 300 MG (BASE EQUIV)	236	COAGULATION FACTOR IX (RECOMB) (RFIXFC) FOR INJ 1000 UNIT	148
CLOBETASOL PROPIONATE CREAM 0.025%	161	CLORAZEPATE DIPOTASSIUM TAB 3.75 MG	61	COAGULATION FACTOR IX (RECOMB) (RFIXFC) FOR INJ 2000 UNIT	148
CLOBETASOL PROPIONATE EMOLLIENT BASE CREAM 0.05%	155	CLORAZEPATE DIPOTASSIUM TAB 7.5 MG	61	COAGULATION FACTOR IX (RECOMB) (RFIXFC) FOR INJ 3000 UNIT	148
CLOBETASOL PROPIONATE EMOLLIENT BASE CREAM 0.05%	155	CLORAZEPATE DIPOTASSIUM TAB 15 MG	61	COAGULATION FACTOR IX (RECOMB) (RFIXFC) FOR INJ 4000 UNIT	148
CLOBETASOL PROPIONATE EMULSION FOAM 0.05%	155	CLOTIRMAZOLE TROCHE 10 MG	40	COAGULATION FACTOR IX (RECOMB) (RIX-FP) FOR INJ 250 UNIT	150
CLOBETASOL PROPIONATE EMULSION FOAM 0.05%	159	CLOTIRMAZOLE W/ BETAMETHASONE CREAM 1-0.05%	88	COAGULATION FACTOR IX (RECOMB) (RIX-FP) FOR INJ 500 UNIT	150
CLOBETASOL PROPIONATE FOAM 0.05%	155	CLOTIRMAZOLE W/ BETAMETHASONE CREAM 1-0.05%	88	COAGULATION FACTOR IX (RECOMB) (RIX-FP) FOR INJ 1000 UNIT	150
CLOBETASOL PROPIONATE GEL 0.05%	155	CLOTIRMAZOLE W/ BETAMETHASONE LOTION 1-0.05%	88	COAGULATION FACTOR IX (RECOMB) (RIX-FP) FOR INJ 2000 UNIT	150
CLOBETASOL PROPIONATE LOTION 0.05%	155	CLOZAPINE ORALLY DISINTEGRATING TAB 12.5 MG	7	COAGULATION FACTOR IX (RECOMB) (RIX-FP) FOR INJ 3500 UNIT	150
CLOBETASOL PROPIONATE OINT 0.05%	155	CLOZAPINE ORALLY DISINTEGRATING TAB 25 MG	8	COAGULATION FACTOR VIIA (RECOMB) FOR INJ 1 MG (1000 MCG)	151
CLOBETASOL PROPIONATE OPTH SUSP 0.05%	221	CLOZAPINE ORALLY DISINTEGRATING TAB 100 MG	7	COAGULATION FACTOR VIIA (RECOMB) FOR INJ 2 MG (2000 MCG)	151
CLOBETASOL PROPIONATE SHAMPOO 0.05%	155	CLOZAPINE ORALLY DISINTEGRATING TAB 150 MG	7	COAGULATION FACTOR VIIA (RECOMB) FOR INJ 5 MG (5000 MCG)	151
CLOBETASOL PROPIONATE SHAMPOO 0.05%	155	CLOZAPINE ORALLY DISINTEGRATING TAB 200 MG	7	COAGULATION FACTOR VIIA (RECOMB) FOR INJ 8 MG (8000 MCG)	151
CLOBETASOL PROPIONATE SOLN 0.05%	155	CLOZAPINE SUSP 50 MG/ML	9	COAGULATION FACTOR VIIA (RECOM)- JNCW FOR INJ 1 MG (1000 MCG)	153
CLOBETASOL PROPIONATE SPRAY 0.05%	155	CLOZAPINE TAB 25 MG	260	COAGULATION FACTOR VIIA (RECOM)- JNCW FOR INJ 2 MG (2000 MCG)	153
CLOCORTOLONE PIVALATE CREAM 0.1%	155	CLOZAPINE TAB 25 MG	260	COAGULATION FACTOR VIIA (RECOM)- JNCW FOR INJ 5 MG (5000 MCG)	153
CLOMIPHENE CITRATE TAB 50 MG	245	CLOZAPINE TAB 50 MG	260	COAGULATION FACTOR X (HUMAN) FOR INJ 250 UNIT	148
CLOMIPHENE CITRATE TAB 50 MG	245	CLOZAPINE TAB 50 MG	260	COAGULATION FACTOR X (HUMAN) FOR INJ 500 UNIT	149
CLOMIPHENE CITRATE TAB 50 MG	245	CLOZAPINE TAB 100 MG	260	COAGULATION FACTOR XIII A-SUBUNIT FOR INJ 2500 UNIT	153
CLOMIPRAMINE HCL CAP 25 MG	261	CLOZAPINE TAB 100 MG	260	COAL TAR SOLN 20%	88
CLOMIPRAMINE HCL CAP 50 MG	261	CLOZAPINE TAB 200 MG	260		
CLOMIPRAMINE HCL CAP 75 MG	261	CLOZAPINE TAB 200 MG	260		
CLONAZEPAM ORALLY DISINTEGRATING TAB 0.5 MG	61	COAGULATION FACTOR IX FOR INJ 500 UNIT	148		
CLONAZEPAM ORALLY DISINTEGRATING TAB 0.25 MG	61	COAGULATION FACTOR IX FOR INJ 1000 UNIT	147		
CLONAZEPAM ORALLY DISINTEGRATING TAB 0.125 MG	61	COAGULATION FACTOR IX FOR INJ 1500 UNIT	147		
CLONAZEPAM ORALLY DISINTEGRATING TAB 1 MG	61	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 250 UNIT	153		
CLONAZEPAM ORALLY DISINTEGRATING TAB 2 MG	61	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 500 UNIT	153		
CLONAZEPAM TAB 0.5 MG	61	COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 1000 UNIT	153		
CLONAZEPAM TAB 1 MG	61				
CLONAZEPAM TAB 2 MG	61				
CLONIDINE HCL EXTENDED RELEASE SUSP 0.1 MG/ML	59				

COBASE #1 OINTMENT BASE	198	*CONDOMS - FEMALE***	189	*CONTINUOUS GLUCOSE SYSTEM	
COBICISTAT TAB 150 MG	21	CONDOMS LATEX LUBRICATED	187	SENSOR***	98
COBIMETINIB FUMARATE TAB 20 MG		CONDOMS LATEX LUBRICATED	187	*CONTINUOUS GLUCOSE SYSTEM	
(BASE EQUIVALENT).....	209	CONDOMS LATEX LUBRICATED	205	SENSOR***	98
CODEINE PHOS-CHLORPHENIRAMINE		CONDOMS LATEX LUBRICATED	205	*CONTINUOUS GLUCOSE SYSTEM	
MALEATE TAB ER 12HR 54.3-8 MG	244	CONDOMS LATEX LUBRICATED	205	SENSOR***	98
CODEINE SULFATE TAB 15 MG	230	CONDOMS LATEX LUBRICATED	205	*CONTINUOUS GLUCOSE SYSTEM	
CODEINE SULFATE TAB 30 MG	230	CONDOMS LATEX LUBRICATED	205	SENSOR***	98
CODEINE SULFATE TAB 60 MG	230	CONDOMS LATEX LUBRICATED	205	*CONTINUOUS GLUCOSE SYSTEM	
*COD LIVER OIL CAP***	267	CONDOMS LATEX LUBRICATED	205	SENSOR***	98
COENZYME Q10 CAP 30 MG	185	*CONDOMS - MALE***	185	*CONTINUOUS GLUCOSE SYSTEM	
COENZYME Q10 CAP 50 MG	184	CONJ EST 0.625(14)/CONJ EST-		SENSOR***	98
COENZYME Q10 CAP 50 MG	185	MEDROXYPRO AC TAB 0.625-5MG(14).....	130	*CONTINUOUS GLUCOSE SYSTEM	
COENZYME Q10 CAP 50 MG	185	CONJUGATED ESTROGEN-		SENSOR***	100
COENZYME Q10 CAP 50 MG	186	MEDROXYPROGEST ACETATE TAB 0.3-1.5		*CONTINUOUS GLUCOSE SYSTEM	
COENZYME Q10 CAP 50 MG	186	MG	130	TRANSMITTER***	186
COENZYME Q10 CAP 100 MG	184	CONJUGATED ESTROGEN-		*CONTINUOUS GLUCOSE SYSTEM	
COENZYME Q10 CAP 100 MG	184	MEDROXYPROGEST ACETATE TAB 0.45-		TRANSMITTER***	191
COENZYME Q10 CAP 100 MG	184	1.5 MG	130	*CONTINUOUS GLUCOSE SYSTEM	
COENZYME Q10 CAP 100 MG	184	CONJUGATED ESTROGEN-		TRANSMITTER***	191
COENZYME Q10 CAP 100 MG	186	MEDROXYPROGEST ACETATE TAB 0.625-		*CONTINUOUS GLUCOSE SYSTEM	
COENZYME Q10 CAP 100 MG	186	2.5 MG	130	TRANSMITTER***	191
COENZYME Q10 CAP 100 MG	186	CONJUGATED ESTROGEN-		*CONTINUOUS GLUCOSE SYSTEM	
COENZYME Q10 CAP 100 MG	190	MEDROXYPROGEST ACETATE TAB 0.625-		TRANSMITTER***	196
COENZYME Q10 CAP 200 MG	184	5 MG	130	CORN OIL (BULK).....	186
COENZYME Q10 CAP 200 MG	184	CONJUGATED ESTROGENS-		CORN SYRUP.....	186
COENZYME Q10 CAP 200 MG	185	BAZEDOXIFENE TAB 0.45-20 MG	123	CORTICOTROPIN INJ GEL 80 UNIT/ML.....	154
COENZYME Q10 CAP 200 MG	186	*CONTINUOUS GLUCOSE MONITOR		CORTICOTROPIN INJ GEL 80 UNIT/ML.....	155
COENZYME Q10 CAP 200 MG	186	SUPPLIES***	191	CORTICOTROPIN SUBCUTANEOUS GEL	
COENZYME Q10 CAP 200 MG	190	*CONTINUOUS GLUCOSE MONITOR		PEN-INJECTOR 40 UNIT/0.5ML	160
COLCHICINE CAP 0.6 MG	42	SUPPLIES***	191	CORTICOTROPIN SUBCUTANEOUS GEL	
COLCHICINE CAP 0.6 MG	43	*CONTINUOUS GLUCOSE MONITOR		PEN-INJECTOR 80 UNIT/ML	160
COLCHICINE (CARDIOVASCULAR) TAB		SUPPLIES***	195	CORTICOTROPIN SUBCUTANEOUS GEL	
0.5 MG	74	*CONTINUOUS GLUCOSE SYSTEM		PREFILLED SYR 40 UNIT/0.5ML	160
COLCHICINE ORAL SOLN 0.6 MG/5ML	43	RECEIVER***	97	CORTICOTROPIN SUBCUTANEOUS GEL	
COLCHICINE TAB 0.6 MG	42	*CONTINUOUS GLUCOSE SYSTEM		PREFILLED SYRINGE 80 UNIT/ML	160
COLCHICINE W/ PROBENECID TAB 0.5-		RECEIVER***	97	CORTISONE ACETATE TAB 25 MG	155
500 MG	43	*CONTINUOUS GLUCOSE SYSTEM		COSYNTROPIN FOR INJ 0.25 MG	186
COLESEVELAM HCL PACKET FOR SUSP		RECEIVER***	97	COSYNTROPIN FOR INJ 0.25 MG	186
3.75 GM	107	*CONTINUOUS GLUCOSE SYSTEM		COVID-19 MRNA VAC 6MO-11YR-	
COLESEVELAM HCL TAB 625 MG	107	RECEIVER***	98	MODERNA IM SUSP PFS 25 MCG/0.25ML ..	265
COLESTIPOL HCL GRANULE PACKETS 5		*CONTINUOUS GLUCOSE SYSTEM		COVID-19 MRNA VACCINE-MODERNA IM	
GM	108	RECEIVER***	98	SUSP PREF SYR 10 MCG/0.2ML	264
COLESTIPOL HCL GRANULE PACKETS 5		*CONTINUOUS GLUCOSE SYSTEM		COVID-19 MRNA VACCINE-MODERNA IM	
GM	108	RECEIVER***	98	SUSP PREF SYR 50 MCG/0.5ML	265
COLESTIPOL HCL GRANULES 5 GM	108	*CONTINUOUS GLUCOSE SYSTEM		COVID-19 MRNA VAC TRIS-PFIZER IM	
COLESTIPOL HCL GRANULES 5 GM	108	SENSOR***	97	SUSP PREF SYR 30 MCG/0.3ML	262
COLESTIPOL HCL GRANULES 5 GM	108	*CONTINUOUS GLUCOSE SYSTEM		COVID-19 MRNA VAC TRIS-S	
COLESTIPOL HCL TAB 1 GM	108	SENSOR***	97	5-11Y-PFIZER IM SUSP 10 MCG/0.3ML	262
COLESTIPOL HCL TAB 1 GM	108	*CONTINUOUS GLUCOSE SYSTEM		*CREAM BASE LIPOSOMIC**	183
COLISTIMETHATE SOD FOR INJ 150 MG		SENSOR***	97	*CREAM BASE LIPOSOMIC**	195
(COLISTIN BASE ACTIVITY).....	26	*CONTINUOUS GLUCOSE SYSTEM		*CREAM BASE LIPOSOMIC**	195
COLISTIMETHATE SOD FOR INJ 150 MG		SENSOR***	97	*CREAM BASE LIPOSOMIC**	198
(COLISTIN BASE ACTIVITY).....	26	*CONTINUOUS GLUCOSE SYSTEM		*CREAM BASE LIPOSOMIC**	198
COLLAGENASE OINT 250 UNIT/GM.....	90	SENSOR***	97	*CREAM BASE LIPOSOMIC**	198
COLLODION FLEXIBLE	185	*CONTINUOUS GLUCOSE SYSTEM		*CREAM BASE LIPOSOMIC**	198
		SENSOR***	97		

*CREAM BASE LIPOSOMIC**	198
*CREAM BASE NIOSOMES**	186
*CREAM BASE NIOSOMES**	186
CRINECERFONT CAP 25 MG	186
CRINECERFONT CAP 50 MG	186
CRINECERFONT CAP 100 MG	186
CRINECERFONT ORAL SOLN 50 MG/ML	186
CRISABOROLE OINT 2%	89
CROFELEMER TAB DELAYED RELEASE 125 MG	136
CROMOLYN SODIUM OPTH SOLN 4%	221
CROMOLYN SODIUM ORAL CONC 100 MG/5ML	135
CROMOLYN SODIUM SOLN NEBU 20 MG/2ML	180
CROTAMITON LOTION 10%	234
CROTAMITON LOTION 10%	234
CYANOCOBALAMIN (BULK) CRYSTALS	275
CYANOCOBALAMIN (BULK) POWDER	275
CYANOCOBALAMIN INJ 1000 MCG/ML	267
CYANOCOBALAMIN INJ 1000 MCG/ML	267
CYANOCOBALAMIN INJ 1000 MCG/ML	267
CYANOCOBALAMIN INJ 1000 MCG/ML	267
CYANOCOBALAMIN INJ 2000 MCG/ML	275
CYANOCOBALAMIN NASAL SPRAY 500 MCG/0.1ML	267
CYANOCOBALAMIN NASAL SPRAY 500 MCG/0.1ML	269
CYANOCOBALAMIN TAB 100 MCG	274
CYANOCOBALAMIN TAB 1000 MCG	274
CYCLOBENZAPRINE HCL SUBLINGUAL TAB 2.8 MG	205
CYCLOBENZAPRINE HCL TAB 5 MG	247
CYCLOBENZAPRINE HCL TAB 10 MG	247
CYCLOPENTOLATE HCL OPTH SOLN 0.5%	220
CYCLOPENTOLATE HCL OPTH SOLN 1%	220
CYCLOPENTOLATE HCL OPTH SOLN 1%	220
CYCLOPENTOLATE HCL OPTH SOLN 2%	220
CYCLOPENTOLATE W/ PHENYLEPHRINE OPHTH SOLN 0.2-1%	221
CYCLOPHOSPHAMIDE (BULK) POWDER	186
CYCLOPHOSPHAMIDE CAP 25 MG	10
CYCLOPHOSPHAMIDE CAP 50 MG	10
CYCLOPHOSPHAMIDE TAB 25 MG	10
CYCLOPHOSPHAMIDE TAB 50 MG	10
CYCLOSERINE CAP 250 MG	52
CYCLOSPORINE (BULK) POWDER	186
CYCLOSPORINE (BULK) POWDER	186
CYCLOSPORINE CAP 25 MG	168
CYCLOSPORINE CAP 100 MG	168
CYCLOSPORINE MODIFIED CAP 25 MG	168
CYCLOSPORINE MODIFIED CAP 25 MG	169
CYCLOSPORINE MODIFIED CAP 50 MG	168
CYCLOSPORINE MODIFIED CAP 100 MG	168
CYCLOSPORINE MODIFIED CAP 100 MG	169

CYCLOSPORINE MODIFIED ORAL SOLN 100 MG/ML	168
CYCLOSPORINE MODIFIED ORAL SOLN 100 MG/ML	169
CYCLOSPORINE (OPHTH) EMULSION 0.1%	221
CYCLOSPORINE (OPHTH) EMULSION 0.05%	221
CYCLOSPORINE (OPHTH) EMULSION 0.05%	221
CYCLOSPORINE ORAL SOLN 100 MG/ML	171
CYPROHEPTADINE HCL SYRUP 2 MG/5ML	43
CYPROHEPTADINE HCL TAB 4 MG	43
CYSTEAMINE BITARTRATE CAP 50 MG	137
CYSTEAMINE BITARTRATE CAP 150 MG	137
CYSTEAMINE BITARTRATE CAP DELAYED RELEASE 25 MG (BASE EQUIV)	138
CYSTEAMINE BITARTRATE CAP DELAYED RELEASE 75 MG (BASE EQUIV)	139
CYSTEAMINE BITARTRATE DELAYED RELEASE GRANULES PACKET 75 MG	139
CYSTEAMINE BITARTRATE DELAYED RELEASE GRANULES PACKET 300 MG	139
CYSTEAMINE HCL OPTH SOLN 0.37% (BASE EQUIVALENT)	220
CYSTEAMINE HCL OPTH SOLN 0.44% (BASE EQUIVALENT)	220
CYSTINE PACKET 500 MG	186
DABIGATRAN ETEXILATE MESYLATE CAP 75 MG (ETEXILATE BASE EQ)	28
DABIGATRAN ETEXILATE MESYLATE CAP 110 MG (ETEXILATE BASE EQ)	28
DABIGATRAN ETEXILATE MESYLATE CAP 150 MG (ETEXILATE BASE EQ)	28
DABIGATRAN ETEXILATE MESYLATE PELLET PACK 20 MG	30
DABIGATRAN ETEXILATE MESYLATE PELLET PACK 30 MG	30
DABIGATRAN ETEXILATE MESYLATE PELLET PACK 40 MG	30
DABIGATRAN ETEXILATE MESYLATE PELLET PACK 50 MG	30
DABIGATRAN ETEXILATE MESYLATE PELLET PACK 110 MG	30
DABIGATRAN ETEXILATE MESYLATE PELLET PACK 150 MG	30
DABRAFENIB MESYLATE CAP 50 MG (BASE EQUIVALENT)	212
DABRAFENIB MESYLATE CAP 75 MG (BASE EQUIVALENT)	212
DABRAFENIB MESYLATE TAB FOR ORAL SUSP 10 MG (BASE EQUIV)	212
DACOMITINIB TAB 15 MG	213
DACOMITINIB TAB 30 MG	213
DACOMITINIB TAB 45 MG	213
DALFAMPRIDINE TAB ER 12HR 10 MG	215

DALTEPARIN SODIUM SOLN PREFILLED SYR 2500 UNIT/0.2ML	29
DALTEPARIN SODIUM SOLN PREFILLED SYR 5000 UNIT/0.2ML	29
DALTEPARIN SODIUM SOLN PREFILLED SYR 7500 UNIT/0.3ML	29
DALTEPARIN SODIUM SOLN PREFILLED SYR 10000 UNIT/ML	29
DALTEPARIN SODIUM SOLN PREFILLED SYR 12500 UNIT/0.5ML	29
DALTEPARIN SODIUM SOLN PREFILLED SYR 15000 UNIT/0.6ML	29
DALTEPARIN SODIUM SOLN PREFILLED SYR 18000 UNIT/0.72ML	29
DALTEPARIN SODIUM SUBCUTANEOUS SOLN 10000 UNIT/4ML	29
DALTEPARIN SODIUM SUBCUTANEOUS SOLN 95000 UNIT/3.8ML	29
DANAZOL CAP 50 MG	13
DANAZOL CAP 100 MG	13
DANAZOL CAP 200 MG	13
DANICOPAN TAB 100 MG	13
DANICOPAN TAB THERAPY PACK 50 MG & 100 MG	13
DANTROLENE SODIUM CAP 25 MG	247
DANTROLENE SODIUM CAP 25 MG	247
DANTROLENE SODIUM CAP 50 MG	247
DANTROLENE SODIUM CAP 100 MG	247
DAPRODUSTAT TAB 1 MG	67
DAPRODUSTAT TAB 2 MG	67
DAPRODUSTAT TAB 4 MG	67
DAPRODUSTAT TAB 6 MG	67
DAPRODUSTAT TAB 8 MG	67
DAPSONE GEL 5%	88
DAPSONE GEL 7.5%	88
DAPSONE TAB 25 MG	45
DAPSONE TAB 100 MG	45
DARBEPOETIN ALFA SOLN INJ 25 MCG/ML	66
DARBEPOETIN ALFA SOLN INJ 40 MCG/ML	66
DARBEPOETIN ALFA SOLN INJ 60 MCG/ML	67
DARBEPOETIN ALFA SOLN INJ 100 MCG/ ML	66
DARBEPOETIN ALFA SOLN INJ 200 MCG/ ML	66
DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 10 MCG/0.4ML	66
DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 25 MCG/0.42ML	66
DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 40 MCG/0.4ML	66
DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 60 MCG/0.3ML	67
DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 100 MCG/0.5ML	66
DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 150 MCG/0.3ML	66

DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 200 MCG/0.4ML	66	DEMECLOCYCLINE HCL TAB 300 MG	258	DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	123
DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 300 MCG/0.6ML	66	DENGUE VIRUS VACCINE LIVE TETRAVALENT FOR SUBCUTANEOUS SUSP	263	DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	125
DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 500 MCG/ML	66	*DERMATOLOGICAL PRODUCTS MISC - GEL**	89	DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	126
DARIFENACIN HYDROBROMIDE TAB ER 24HR 7.5 MG (BASE EQUIV)	51	DESIPRAMINE HCL TAB 10 MG	261	DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	126
DARIFENACIN HYDROBROMIDE TAB ER 24HR 15 MG (BASE EQUIV)	51	DESIPRAMINE HCL TAB 10 MG	261	DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	126
DAROLUTAMIDE TAB 300 MG	23	DESIPRAMINE HCL TAB 25 MG	261	DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG	130
DARUNAVIR-COBICISTAT TAB 675-150 MG .	21	DESIPRAMINE HCL TAB 25 MG	261	DESONIDE CREAM 0.05%	156
DARUNAVIR-COBICISTAT TAB 800-150 MG.	21	DESIPRAMINE HCL TAB 50 MG	261	DESONIDE CREAM 0.05%	156
DARUNAVIR ORAL SUSP 100 MG/ML	21	DESIPRAMINE HCL TAB 75 MG	261	DESONIDE GEL 0.05%	156
DARUNAVIR TAB 75 MG	21	DESIPRAMINE HCL TAB 100 MG	261	DESONIDE LOTION 0.05%	156
DARUNAVIR TAB 150 MG	21	DESIPRAMINE HCL TAB 150 MG	261	DESONIDE OINT 0.05%	156
DARUNAVIR TAB 600 MG	21	DESLOMATADINE & PSEUDOEPHEDRINE TAB ER 12HR 2.5-120 MG	242	DESOXIMETASONE CREAM 0.05%	156
DARUNAVIR TAB 800 MG	21	DESLOMATADINE TAB 5 MG	43	DESOXIMETASONE CREAM 0.05%	159
DASATINIB TAB 20 MG	209	DESLOMATADINE TAB ORALLY DISINTEGRATING 5 MG	44	DESOXIMETASONE CREAM 0.25%	156
DASATINIB TAB 50 MG	209	DESMOPRESSIN ACETATE INJ 4 MCG/ML	160	DESOXIMETASONE CREAM 0.25%	159
DASATINIB TAB 70 MG	209	DESMOPRESSIN ACETATE INJ 4 MCG/ML	160	DESOXIMETASONE GEL 0.05%	156
DASATINIB TAB 80 MG	209	DESMOPRESSIN ACETATE NASAL SOLN 1.5 MG/ML	160	DESOXIMETASONE GEL 0.05%	159
DASATINIB TAB 100 MG	209	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01%	160	DESOXIMETASONE OINT 0.05%	156
DASATINIB TAB 140 MG	209	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DESOXIMETASONE OINT 0.05%	159
DASIGLUCAGON HCL SUBCUTANEOUS SOLN AUTO-INJ 0.6 MG/0.6ML	146	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DESOXIMETASONE OINT 0.25%	156
DASIGLUCAGON HCL SUBCUTANEOUS SOLN PREF SYRINGE 0.6 MG/0.6ML	146	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DESOXIMETASONE OINT 0.25%	159
DECITABINE-CEDAZURIDINE TAB 35-100 MG	46	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DESOXIMETASONE SPRAY 0.25%	156
DEFERASIROX GRANULES PACKET 90 MG.	117	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DESVENLAFAXINE SUCCINATE TAB ER 24HR 25 MG (BASE EQUIV)	255
DEFERASIROX GRANULES PACKET 180 MG	117	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DESVENLAFAXINE SUCCINATE TAB ER 24HR 50 MG (BASE EQUIV)	255
DEFERASIROX GRANULES PACKET 360 MG	117	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DESVENLAFAXINE SUCCINATE TAB ER 24HR 100 MG (BASE EQUIV)	255
DEFERASIROX TAB 90 MG	117	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DESVENLAFAXINE TAB ER 24HR 50 MG	255
DEFERASIROX TAB 180 MG	117	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DESVENLAFAXINE TAB ER 24HR 100 MG	255
DEFERASIROX TAB 360 MG	117	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DEUCRAVACITINIB TAB 6 MG	91
DEFERASIROX TAB FOR ORAL SUSP 125 MG	117	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DEUTETRABENAZINE TAB 6 MG	81
DEFERASIROX TAB FOR ORAL SUSP 250 MG	117	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DEUTETRABENAZINE TAB 9 MG	81
DEFERASIROX TAB FOR ORAL SUSP 500 MG	117	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DEUTETRABENAZINE TAB 12 MG	81
DEFERIPRONE ORAL SOLN 100 MG/ML ...	117	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DEUTETRABENAZINE TAB ER 24HR 6 MG ..	81
DEFERIPRONE TAB 500 MG	117	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DEUTETRABENAZINE TAB ER 24HR 12 MG ..	81
DEFERIPRONE TAB 500 MG	117	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DEUTETRABENAZINE TAB ER 24HR 18 MG ..	81
DEFERIPRONE TAB 1000 MG	117	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DEUTETRABENAZINE TAB ER 24HR 24 MG ..	81
DEFERIPRONE TAB 1000 MG	117	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DEUTETRABENAZINE TAB ER 24HR 30 MG ..	81
DEFERIPRONE TAB 1000 MG	117	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DEUTETRABENAZINE TAB ER 24HR 36 MG ..	81
DEFERIPRONE (TWICE DAILY) TAB 1000 MG	117	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DEUTETRABENAZINE TAB ER 24HR 42 MG ..	81
DEGARELIX ACETATE FOR INJ 80 MG (BASE EQUIV)	166	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DEUTETRABENAZINE TAB ER 24HR 48 MG ..	81
DEGARELIX ACETATE FOR INJ 120 MG/ VIAL (240 MG DOSE)	166	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DEUTETRABENAZINE TAB ER TITRATION PACK 6 MG & 12 MG & 24 MG	81
DELAFOXACIN MEGLUMINE TAB 450 MG (BASE EQUIV)	241	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DEUTETRABENAZINE TAB ER TITRATION PACK 12 & 18 & 24 & 30 MG	81
DEMECLOCYCLINE HCL TAB 150 MG	258	DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DEXAMETHASONE CONC 1 MG/ML	156
		DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DEXAMETHASONE ELIXIR 0.5 MG/5ML ...	156
		DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DEXAMETHASONE OPTH SUSP 0.1%	222
		DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DEXAMETHASONE SODIUM PHOSPHATE OPTH SOLN 0.1%	222
		DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED)	160	DEXAMETHASONE SOLN 0.5 MG/5ML	156

DEXAMETHASONE TAB 0.5 MG	156	DEXTROAMPHETAMINE SULFATE ORAL SOLUTION 5 MG/5ML.....	56	DIAZEPAM RECTAL GEL DELIVERY SYSTEM 20 MG.....	134
DEXAMETHASONE TAB 0.75 MG	156	DEXTROAMPHETAMINE SULFATE TAB 2.5 MG.....	55	DIAZEPAM TAB 2 MG	61
DEXAMETHASONE TAB 1.5 MG.....	156	DEXTROAMPHETAMINE SULFATE TAB 5 MG	55	DIAZEPAM TAB 5 MG	61
DEXAMETHASONE TAB 1 MG.....	156	DEXTROAMPHETAMINE SULFATE TAB 7.5 MG.....	55	DIAZEPAM TAB 10 MG	61
DEXAMETHASONE TAB 2 MG.....	156	DEXTROAMPHETAMINE SULFATE TAB 10 MG.....	55	DIAZOXIDE SUSP 50 MG/ML.....	146
DEXAMETHASONE TAB 4 MG	156	DEXTROAMPHETAMINE SULFATE TAB 15 MG.....	55	DIAZOXIDE SUSP 50 MG/ML.....	146
DEXAMETHASONE TAB 6 MG	156	DEXTROAMPHETAMINE SULFATE TAB 20 MG.....	55	DICHLORPHENAMIDE TAB 50 MG.....	102
DEXAMETHASONE TAB THERAPY PACK 1.5 MG (21)	156	DEXTROAMPHETAMINE SULFATE TAB 30 MG.....	55	DICLOFENAC POTASSIUM CAP 25 MG	217
DEXAMETHASONE TAB THERAPY PACK 1.5 MG (21)	159	DEXTROAMPHETAMINE TD PATCH 4.5 MG/9HR.....	56	DICLOFENAC POTASSIUM CAP 25 MG	220
DEXAMETHASONE TAB THERAPY PACK 1.5 MG (21)	159	DEXTROAMPHETAMINE TD PATCH 9 MG/9HR.....	56	DICLOFENAC POTASSIUM (MIGRAINE) PACKET 50 MG	217
DEXAMETHASONE TAB THERAPY PACK 1.5 MG (27).....	159	DEXTROAMPHETAMINE TD PATCH 13.5 MG/9HR.....	56	DICLOFENAC POTASSIUM (MIGRAINE) PACKET 50 MG	217
DEXAMETHASONE TAB THERAPY PACK 1.5 MG (35).....	156	DEXTROAMPHETAMINE TD PATCH 18 MG/9HR.....	56	DICLOFENAC POTASSIUM TAB 50 MG	217
DEXAMETHASONE TAB THERAPY PACK 1.5 MG (49).....	159	DEXTROMETHORPHAN HBR-BUPROPION HCL TAB ER 45-105 MG.....	33	DICLOFENAC SODIUM (ACTINIC KERATOSES) GEL 3%.....	88
DEXAMETHASONE TAB THERAPY PACK 1.5 MG (51)	156	DEXTROMETHORPHAN HBR-QUINIDINE SULFATE CAP 20-10 MG.....	82	DICLOFENAC SODIUM OPHTH SOLN 0.1% .	222
DEXCHLORPHENIRAMINE MALEATE ORAL SOLN 2 MG/5ML.....	43	*DIAPHRAGM ARC-SPRING***	184	DICLOFENAC SODIUM TAB DELAYED RELEASE 25 MG.....	217
DEXCHLORPHENIRAMINE MALEATE ORAL SOLN 2 MG/5ML.....	44	*DIAPHRAGMS***	197	DICLOFENAC SODIUM TAB DELAYED RELEASE 50 MG.....	217
DEXMETHYLPHENIDATE HCL CAP ER 24 HR 5 MG.....	57	DIAPHRAGM WIDE SEAL 60 MM	207	DICLOFENAC SODIUM TAB DELAYED RELEASE 75 MG.....	217
DEXMETHYLPHENIDATE HCL CAP ER 24 HR 10 MG.....	57	DIAPHRAGM WIDE SEAL 65 MM	208	DICLOFENAC SODIUM TAB ER 24HR 100 MG.....	217
DEXMETHYLPHENIDATE HCL CAP ER 24 HR 15 MG.....	57	DIAPHRAGM WIDE SEAL 70 MM	208	DICLOFENAC W/ MISOPROSTOL TAB DELAYED RELEASE 50-0.2 MG.....	217
DEXMETHYLPHENIDATE HCL CAP ER 24 HR 20 MG	57	DIAPHRAGM WIDE SEAL 75 MM.....	208	DICLOFENAC W/ MISOPROSTOL TAB DELAYED RELEASE 75-0.2 MG	217
DEXMETHYLPHENIDATE HCL CAP ER 24 HR 25 MG.....	57	DIAPHRAGM WIDE SEAL 80 MM	208	DICLOXACILLIN SODIUM CAP 250 MG	66
DEXMETHYLPHENIDATE HCL CAP ER 24 HR 30 MG	57	DIAPHRAGM WIDE SEAL 85 MM	208	DICLOXACILLIN SODIUM CAP 500 MG	66
DEXMETHYLPHENIDATE HCL CAP ER 24 HR 35 MG	57	DIAPHRAGM WIDE SEAL 90 MM	208	DICYCLOMINE HCL CAP 10 MG	50
DEXMETHYLPHENIDATE HCL CAP ER 24 HR 40 MG	57	DIAPHRAGM WIDE SEAL 95 MM	208	DICYCLOMINE HCL ORAL SOLN 10 MG/5ML	50
DEXMETHYLPHENIDATE HCL TAB 2.5 MG... 57		DIAZEPAM BUCCAL FILM 5 MG	134	DICYCLOMINE HCL TAB 20 MG	50
DEXMETHYLPHENIDATE HCL TAB 2.5 MG... 57		DIAZEPAM BUCCAL FILM 7.5 MG	134	*DIETARY MANAGEMENT PRODUCT - PACKET***	183
DEXMETHYLPHENIDATE HCL TAB 5 MG..... 57		DIAZEPAM BUCCAL FILM 10 MG.....	134	DIFENOXIN W/ ATROPINE TAB 1-0.025 MG.	136
DEXMETHYLPHENIDATE HCL TAB 5 MG..... 57		DIAZEPAM BUCCAL FILM 12.5 MG	134	DIFLORASONE DIACETATE CREAM 0.05% .	156
DEXMETHYLPHENIDATE HCL TAB 10 MG ... 57		DIAZEPAM BUCCAL FILM 15 MG.....	134	DIFLORASONE DIACETATE EMOLLIENT BASE CREAM 0.05%.....	154
DEXMETHYLPHENIDATE HCL TAB 10 MG ... 57		DIAZEPAM CONC 5 MG/ML	61	DIFLORASONE DIACETATE OINT 0.05% ...	156
DEXMETHYLPHENIDATE HCL TAB 10 MG ... 57		DIAZEPAM CONC 5 MG/ML	61	DIFLUNISAL TAB 500 MG	217
DEXTROAMPHETAMINE SULFATE CAP ER 24HR 5 MG	55	DIAZEPAM NASAL SPRAY 5 MG/0.1 ML ...	135	DIFLUPREDNATE OPHTH EMULSION 0.05%	222
DEXTROAMPHETAMINE SULFATE CAP ER 24HR 10 MG	55	DIAZEPAM NASAL SPRAY 10 MG/0.1 ML ...	135	DIGOXIN ORAL SOLN 0.05 MG/ML	77
DEXTROAMPHETAMINE SULFATE CAP ER 24HR 15 MG	55	DIAZEPAM NASAL SPRAY THER PACK 2 X 7.5 MG/0.1ML (15 MG DOSE)	135	DIGOXIN TAB 62.5 MCG (0.0625 MG)	77
DEXTROAMPHETAMINE SULFATE ORAL SOLUTION 5 MG/5ML.....	55	DIAZEPAM NASAL SPRAY THER PACK 2 X 10 MG/0.1ML (20 MG DOSE)	135	DIGOXIN TAB 62.5 MCG (0.0625 MG)	78
		DIAZEPAM ORAL SOLN 1 MG/ML	61	DIGOXIN TAB 125 MCG (0.125 MG).....	77
		DIAZEPAM RECTAL GEL DELIVERY SYSTEM 2.5 MG	134	DIGOXIN TAB 125 MCG (0.125 MG).....	78
		DIAZEPAM RECTAL GEL DELIVERY SYSTEM 10 MG	134	DIGOXIN TAB 250 MCG (0.25 MG)	77
				DIGOXIN TAB 250 MCG (0.25 MG)	78
				DIHYDROERGOTAMINE MESYLATE CRYSTALS.....	119



DIVALPROEX SODIUM TAB DELAYED RELEASE 500 MG	214	DOXAZOSIN MESYLATE TAB 1 MG	11	DOXYCYCLINE MONOHYDRATE CAP 75 MG	259
DIVALPROEX SODIUM TAB DELAYED RELEASE 500 MG	214	DOXAZOSIN MESYLATE TAB 1 MG	11	DOXYCYCLINE MONOHYDRATE CAP 100 MG	259
DIVALPROEX SODIUM TAB ER 24 HR 250 MG	214	DOXAZOSIN MESYLATE TAB 2 MG	11	DOXYCYCLINE MONOHYDRATE CAP 150 MG	259
DIVALPROEX SODIUM TAB ER 24 HR 250 MG	214	DOXAZOSIN MESYLATE TAB 4 MG	11	DOXYCYCLINE MONOHYDRATE FOR SUSP 25 MG/5ML	259
DIVALPROEX SODIUM TAB ER 24 HR 500 MG	214	DOXAZOSIN MESYLATE TAB 4 MG	11	DOXYCYCLINE MONOHYDRATE FOR SUSP 25 MG/5ML	260
DIVALPROEX SODIUM TAB ER 24 HR 500 MG	214	DOXAZOSIN MESYLATE TAB 8 MG	11	DOXYCYCLINE MONOHYDRATE TAB 50 MG	259
DOFETILIDE CAP 125 MCG (0.125 MG)	24	DOXAZOSIN MESYLATE TAB 8 MG	11	DOXYCYCLINE MONOHYDRATE TAB 75 MG	259
DOFETILIDE CAP 125 MCG (0.125 MG)	25	DOXAZOSIN MESYLATE TAB ER 24 HR 4 MG (BASE EQUIV)	60	DOXYCYCLINE MONOHYDRATE TAB 100 MG	258
DOFETILIDE CAP 250 MCG (0.25 MG)	24	DOXAZOSIN MESYLATE TAB ER 24 HR 8 MG (BASE EQUIV)	60	DOXYCYCLINE MONOHYDRATE TAB 100 MG	259
DOFETILIDE CAP 250 MCG (0.25 MG)	25	DOXEPIN HCL CAP 10 MG	261	DOXYCYCLINE MONOHYDRATE TAB 150 MG	259
DOFETILIDE CAP 500 MCG (0.5 MG)	24	DOXEPIN HCL CAP 25 MG	261	*DOXYCYCLINE TAB 100 MG & SUNSCREEN & SAL ACID WASH 2% KIT**	258
DOFETILIDE CAP 500 MCG (0.5 MG)	25	DOXEPIN HCL CAP 50 MG	261	DOXYLAMINE-PYRIDOXINE TAB DELAYED RELEASE 10-10 MG	38
DOLASETRON MESYLATE TAB 50 MG	118	DOXEPIN HCL CAP 75 MG	261	DOXYLAMINE-PYRIDOXINE TAB ER 20- 20 MG	38
DOLUTEGRAVIR SODIUM-LAMIVUDINE TAB 50-300 MG (BASE EQ)	17	DOXEPIN HCL CAP 100 MG	261	DRONABINOL CAP 2.5 MG	118
DOLUTEGRAVIR SODIUM-RILPIVIRINE HCL TAB 50-25 MG (BASE EQ)	19	DOXEPIN HCL CAP 150 MG	261	DRONABINOL CAP 5 MG	118
DOLUTEGRAVIR SODIUM TAB 50 MG (BASE EQUIV)	18	DOXEPIN HCL CONC 10 MG/ML	261	DRONABINOL CAP 10 MG	118
DOLUTEGRAVIR SODIUM TAB FOR ORAL SUSP 5 MG (BASE EQUIV)	18	DOXEPIN HCL CREAM 5%	88	DRONABINOL SOLN 5 MG/ML	119
DONEPEZIL HYDROCHLORIDE ORALLY DISINTEGRATING TAB 5 MG	82	DOXEPIN HCL (SLEEP) TAB 3 MG (BASE EQUIV)	248	DRONEDARONE HCL TAB 400 MG (BASE EQUIVALENT)	24
DONEPEZIL HYDROCHLORIDE ORALLY DISINTEGRATING TAB 5 MG	82	DOXEPIN HCL (SLEEP) TAB 3 MG (BASE EQUIV)	248	DROSPIRENONE-ESTETROL TAB 3-14.2 MG	128
DONEPEZIL HYDROCHLORIDE ORALLY DISINTEGRATING TAB 10 MG	82	DOXEPIN HCL (SLEEP) TAB 6 MG (BASE EQUIV)	248	DROSPIRENONE-ESTRADIOL TAB 0.5-1 MG	120
DONEPEZIL HYDROCHLORIDE ORALLY DISINTEGRATING TAB 10 MG	82	DOXEPIN HCL (SLEEP) TAB 6 MG (BASE EQUIV)	249	DROSPIRENONE-ESTRADIOL TAB 0.25- 0.5 MG	120
DONEPEZIL HYDROCHLORIDE TAB 5 MG	82	DOXEPIN HCL (SLEEP) TAB 6 MG (BASE EQUIV)	249	DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.02 MG	122
DONEPEZIL HYDROCHLORIDE TAB 10 MG	82	DOXERCALCIFEROL CAP 0.5 MCG	181	DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.02 MG	123
DONEPEZIL HYDROCHLORIDE TAB 23 MG	82	DOXERCALCIFEROL CAP 1 MCG	181	DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.02 MG	125
DONEPEZIL HYDROCHLORIDE TD PATCH WEEKLY 5 MG/DAY	82	DOXERCALCIFEROL CAP 2.5 MCG	181	DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.02 MG	127
DONEPEZIL HYDROCHLORIDE TD PATCH WEEKLY 10 MG/DAY	82	DOXYCYCLINE HYCLATE CAP 50 MG	259	DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.02 MG	127
DORAVIRINE-LAMIVUDINE-TENOFOVIR DF TAB 100-300-300 MG	18	DOXYCYCLINE HYCLATE CAP 100 MG	259	DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.02 MG	128
DORAVIRINE TAB 100 MG	19	DOXYCYCLINE HYCLATE CAP 100 MG	260	DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.02 MG	131
DORDAVIPRONE HCL CAP 125 MG	197	DOXYCYCLINE HYCLATE POWDER	187	DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.02 MG	132
DORNASE ALFA INHAL SOLN 2.5 MG/2.5ML	244	DOXYCYCLINE HYCLATE TAB 20 MG	259	DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.03 MG	122
DORZOLAMIDE HCL OPTH SOLN 2%	224	DOXYCYCLINE HYCLATE TAB 75 MG	259	DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.03 MG	129
DORZOLAMIDE HCL OPTH SOLN 2%	224	DOXYCYCLINE HYCLATE TAB 100 MG	259		
DORZOLAMIDE HCL-TIMOLOL MALEATE OPHTH SOLN 2-0.5%	224	DOXYCYCLINE HYCLATE TAB 150 MG	259		
DORZOLAMIDE HCL-TIMOLOL MALEATE OPHTH SOLN 2-0.5%	224	DOXYCYCLINE HYCLATE TAB DELAYED RELEASE 50 MG	259		
DORZOLAMIDE HCL-TIMOLOL MALEATE PF OPTH SOLN 2-0.5%	224	DOXYCYCLINE HYCLATE TAB DELAYED RELEASE 75 MG	259		
		DOXYCYCLINE HYCLATE TAB DELAYED RELEASE 80 MG	259		
		DOXYCYCLINE HYCLATE TAB DELAYED RELEASE 100 MG	259		
		DOXYCYCLINE HYCLATE TAB DELAYED RELEASE 120 MG	259		
		DOXYCYCLINE HYCLATE TAB DELAYED RELEASE 150 MG	259		
		DOXYCYCLINE HYCLATE TAB DELAYED RELEASE 200 MG	259		
		DOXYCYCLINE MONOHYDRATE CAP 50 MG	259		

DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.03 MG	130	DYE FDC BLUE 1 (BRILLIANT BLUE FCF) - LIQUID	190	ELTROMBOPAG CHOLINE TAB 9 MG (BASE EQUIV)	66
DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.03 MG	132	ECHOTHIOPHATE IODIDE OPHTH FOR SOLN 0.125%	225	ELTROMBOPAG CHOLINE TAB 18 MG (BASE EQUIV)	66
DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.03 MG	132	ECONAZOLE NITRATE CREAM 1%	40	ELTROMBOPAG CHOLINE TAB 36 MG (BASE EQUIV)	66
DROSPIRENONE-ETHINYL ESTRAD- LEVOMEFOLATE TAB 3-0.02-0.451 MG.	122	ECONAZOLE NITRATE FOAM 1%	40	ELTROMBOPAG CHOLINE TAB 54 MG (BASE EQUIV)	66
DROSPIRENONE-ETHINYL ESTRAD- LEVOMEFOLATE TAB 3-0.03-0.451 MG.	122	EDARAVONE ORAL SUSP 105 MG/5ML	82	ELTROMBOPAG OLAMINE POWDER PACK FOR SUSP 12.5 MG (BASE EQ)	67
DROSPIRENONE-ETHINYL ESTRAD- LEVOMEFOLATE TAB 3-0.03-0.451 MG.	131	EDARAVONE ORAL SUSP 105 MG/5ML	82	ELTROMBOPAG OLAMINE POWDER PACK FOR SUSP 12.5 MG (BASE EQ)	67
DROSPIRENONE TAB 4 MG	238	EDOXABAN TOSYLATE TAB 15 MG (BASE EQUIVALENT)	30	ELTROMBOPAG OLAMINE POWDER PACK FOR SUSP 25 MG (BASE EQUIV)	67
DROXIDOPA CAP 100 MG	77	EDOXABAN TOSYLATE TAB 30 MG (BASE EQUIVALENT)	30	ELTROMBOPAG OLAMINE POWDER PACK FOR SUSP 25 MG (BASE EQUIV)	67
DROXIDOPA CAP 200 MG	77	EDOXABAN TOSYLATE TAB 60 MG (BASE EQUIVALENT)	30	ELUXADOLINE TAB 75 MG	175
DROXIDOPA CAP 300 MG	77	EFAVIRENZ CAP 50 MG	18	ELUXADOLINE TAB 100 MG	175
DULAGLUTIDE SOLN AUTO-INJECTOR 0.75 MG/0.5ML	38	EFAVIRENZ CAP 200 MG	18	ELVITEGRAV-COBIC-EMTRICITAB- TENOFV AF TAB 150-150-200-10 MG	18
DULAGLUTIDE SOLN AUTO-INJECTOR 1.5 MG/0.5ML	38	EFAVIRENZ-EMTRICITABINE-TENOFOVIR DF TAB 600-200-300 MG	18	ELVITEGRAV-COBIC-EMTRICITAB- TENOFVDF TAB 150-150-200-300 MG.	18
DULAGLUTIDE SOLN AUTO-INJECTOR 3 MG/0.5ML	38	EFAVIRENZ-LAMIVUDINE-TENOFOVIR DF TAB 400-300-300 MG	18	EMICIZUMAB-KXWH SUBCUTANEOUS SOLN 12 MG/0.4ML (30 MG/ML)	149
DULAGLUTIDE SOLN AUTO-INJECTOR 4.5 MG/0.5ML	38	EFAVIRENZ-LAMIVUDINE-TENOFOVIR DF TAB 400-300-300 MG	19	EMICIZUMAB-KXWH SUBCUTANEOUS SOLN 30 MG/ML	149
DULOXETINE HCL CAP DELAYED RELEASE SPRINKLE 20 MG (BASE EQ)	255	EFAVIRENZ-LAMIVUDINE-TENOFOVIR DF TAB 600-300-300 MG	18	EMICIZUMAB-KXWH SUBCUTANEOUS SOLN 60 MG/0.4ML (150 MG/ML)	149
DULOXETINE HCL CAP DELAYED RELEASE SPRINKLE 30 MG (BASE EQ)	255	EFAVIRENZ-LAMIVUDINE-TENOFOVIR DF TAB 600-300-300 MG	19	EMICIZUMAB-KXWH SUBCUTANEOUS SOLN 105 MG/0.7ML (150 MG/ML)	149
DULOXETINE HCL CAP DELAYED RELEASE SPRINKLE 40 MG (BASE EQ)	255	EFAVIRENZ TAB 600 MG	18	EMICIZUMAB-KXWH SUBCUTANEOUS SOLN 150 MG/ML	149
DULOXETINE HCL CAP DELAYED RELEASE SPRINKLE 60 MG (BASE EQ)	255	EFGARTIGIMOD ALF-HYALUR-QVFC PREF SYR 1000-10000 MG-UNIT/5ML	172	EMICIZUMAB-KXWH SUBCUTANEOUS SOLN 300 MG/2ML (150 MG/ML)	149
DULOXETINE HCL ENTERIC COATED PELLETS CAP 20 MG (BASE EQ)	132	EFINACONAZOLE SOLN 10%	40	*EMOLLIENT - LIQUID**	93
DULOXETINE HCL ENTERIC COATED PELLETS CAP 30 MG (BASE EQ)	132	EFLORNITHINE HCL TAB 192 MG	46	*EMOLLIENT - LIQUID**	93
DULOXETINE HCL ENTERIC COATED PELLETS CAP 40 MG (BASE EQ)	132	ELACESTRANT HYDROCHLORIDE TAB 86 MG	39	EMPAGLIFLOZIN-LINAGLIP- METFORMIN TAB ER 24HR 12.5-2.5-1000MG 38	
DULOXETINE HCL ENTERIC COATED PELLETS CAP 60 MG (BASE EQ)	132	ELAFIBRANOR TAB 80 MG	136	EMPAGLIFLOZIN-LINAGLIPTIN- METFORMIN TAB ER 24HR 5-2.5-1000MG ...	38
DUPILUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 200 MG/1.14ML	88	ELAGOLIX-ESTRAD-NORETH 300-1- 0.5MG & ELAGOLIX 300MG CAP PACK.	167	EMPAGLIFLOZIN-LINAGLIPTIN- METFORMIN TAB ER 24HR 10-5-1000 MG ...	38
DUPILUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 300 MG/2ML	88	ELAGOLIX SODIUM TAB 150 MG (BASE EQUIV)	167	EMPAGLIFLOZIN-LINAGLIPTIN- METFORMIN TAB ER 24HR 25-5-1000 MG ...	38
DUPILUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 200 MG/1.14ML	88	ELAGOLIX SODIUM TAB 200 MG (BASE EQUIV)	167	EMPAGLIFLOZIN-LINAGLIPTIN TAB 10-5 MG	36
DUPILUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 300 MG/2ML	88	ELBASVIR-GRAZOPREXIR TAB 50-100 MG. .	17	EMPAGLIFLOZIN-LINAGLIPTIN TAB 25-5 MG	36
*DUST MITE MIXED EXT SL TAB 12 SQ- HDM***	243	ELETRIPTAN HYDROBROMIDE TAB 20 MG (BASE EQUIVALENT)	245	EMPAGLIFLOZIN-METFORMIN HCL TAB 5-500 MG	38
DUTASTERIDE CAP 0.5 MG	60	ELETRIPTAN HYDROBROMIDE TAB 40 MG (BASE EQUIVALENT)	246	EMPAGLIFLOZIN-METFORMIN HCL TAB 5-1000 MG	38
DUTASTERIDE-TAMSULOSIN HCL CAP 0.5-0.4 MG	60	ELEXACAF-TEZACAF-IVACAF 50-25-37.5 MG & IVACAF 75 MG TBP	84	EMPAGLIFLOZIN-METFORMIN HCL TAB 12.5-500 MG	38
DUVELISIB CAP 15 MG	46	ELEXACAF-TEZACAF-IVACAF 80-40-60 MG & IVACAF 59.5MG THPK GRAN	84	EMPAGLIFLOZIN-METFORMIN HCL TAB 12.5-1000 MG	38
DUVELISIB CAP 25 MG	46	ELEXACAF-TEZACAF-IVACAF 100-50-75 MG & IVACAF 75MG THPK GRAN	84		
DYCLONINE HCL SOLN 0.5%	12	ELEXACAF-TEZACAF-IVACAF 100-50-75 MG & IVACAF 150 MG TBP	84		
		ELIGLUSTAT TARTRATE CAP 84 MG (BASE EQUIVALENT)	137		

EMPAGLIFLOZIN-METFORMIN HCL TAB ER 24HR 5-1000 MG	38	ENOXAPARIN SODIUM INJ SOLN PREF SYR 40 MG/0.4ML	29	EPOETIN ALFA-EPBX INJ 20000 UNIT/ML ..	67
EMPAGLIFLOZIN-METFORMIN HCL TAB ER 24HR 10-1000 MG	38	ENOXAPARIN SODIUM INJ SOLN PREF SYR 60 MG/0.6ML	29	EPOETIN ALFA-EPBX INJ 40000 UNIT/ML ..	67
EMPAGLIFLOZIN-METFORMIN HCL TAB ER 24HR 12.5-1000 MG	38	ENOXAPARIN SODIUM INJ SOLN PREF SYR 80 MG/0.8ML	29	ERDAFITINIB TAB 3 MG	119
EMPAGLIFLOZIN-METFORMIN HCL TAB ER 24HR 25-1000 MG	38	ENOXAPARIN SODIUM INJ SOLN PREF SYR 80 MG/0.8ML	29	ERDAFITINIB TAB 4 MG	119
EMPAGLIFLOZIN TAB 10 MG	36	ENOXAPARIN SODIUM INJ SOLN PREF SYR 100 MG/ML	28	ERDAFITINIB TAB 5 MG	119
EMPAGLIFLOZIN TAB 25 MG	36	ENOXAPARIN SODIUM INJ SOLN PREF SYR 120 MG/0.8ML	28	ERENUMAB-AOOE SUBCUTANEOUS SOLN AUTO-INJECTOR 70 MG/ML	70
EMTRICITABINE CAPS 200 MG	20	ENOXAPARIN SODIUM INJ SOLN PREF SYR 150 MG/ML	28	ERENUMAB-AOOE SUBCUTANEOUS SOLN AUTO-INJECTOR 140 MG/ML	70
EMTRICITABINE CAPS 200 MG	20	ENOXAPARIN SODIUM INJ SOLN PREF SYR 150 MG/ML	28	ERGOCALCIFEROL CAP 1.25 MG (50000 UNIT)	267
EMTRICITABINE-RILPIVIRINE- TENOFIVIR AF TAB 200-25-25 MG	19	ENSARTINIB HCL CAP 25 MG (BASE EQUIVALENT)	46	ERGOCALCIFEROL CAP 1.25 MG (50000 UNIT)	274
EMTRICITABINE-RILPIVIRINE- TENOFIVIR DF TAB 200-25-300 MG	18	ENSARTINIB HCL CAP 100 MG (BASE EQUIVALENT)	46	ERGOCALCIFEROL CAP 1.25 MG (50000 UNIT)	274
EMTRICITABINE-RILPIVIRINE- TENOFIVIR DF TAB 200-25-300 MG	18	ENSIFENTRINE INHALATION SUSP 3 MG/2.5ML	68	ERGOLOID MESYLATES TAB 1 MG	189
EMTRICITABINE SOLN 10 MG/ML	20	ENTACAPONE TAB 200 MG	49	ERGOTAMINE TARTRATE SL TAB 2 MG	119
EMTRICITABINE-TENOFOVIR ALAFENAMIDE FUMARATE TAB 120-15 MG ..	19	ENTACAPONE TAB 200 MG	49	ERGOTAMINE W/ CAFFEINE SUPPOS 2-100 MG	119
EMTRICITABINE-TENOFOVIR ALAFENAMIDE FUMARATE TAB 200-25 MG ..	19	ENTECAVIR ORAL SOLN 0.05 MG/ML	16	ERGOTAMINE W/ CAFFEINE TAB 1-100 MG ..	119
EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE TAB 100-150 MG ..	19	ENTECAVIR TAB 0.5 MG	16	ERLOTINIB HCL TAB 25 MG (BASE EQUIVALENT)	209
EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE TAB 100-150 MG ..	20	ENTRECTINIB CAP 100 MG	47	ERLOTINIB HCL TAB 100 MG (BASE EQUIVALENT)	209
EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE TAB 100-150 MG ..	20	ENTRECTINIB CAP 200 MG	47	ERLOTINIB HCL TAB 150 MG (BASE EQUIVALENT)	209
EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE TAB 133-200 MG ..	19	ENTRECTINIB PELLETT PACK 50 MG	47	ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 200 MG/5ML	179
EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE TAB 133-200 MG ..	20	ENZALUTAMIDE CAP 40 MG	23	ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 200 MG/5ML	179
EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE TAB 167-250 MG ..	19	EPINASTINE HCL OPTH SOLN 0.05%	221	ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 200 MG/5ML	179
EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE TAB 167-250 MG ..	20	EPINEPHRINE HCL NASAL SOLN 0.1%	245	ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 200 MG/5ML	179
EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE TAB 167-250 MG ..	20	EPINEPHRINE HCL NASAL SOLN 0.1%	245	ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 400 MG/5ML	179
EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE TAB 200-300 MG ..	20	EPINEPHRINE NASAL SPRAY 1 MG/0.1ML ..	69	ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 400 MG/5ML	179
ENALAPRIL MALEATE & HYDROCHLOROTHIAZIDE TAB 5-12.5 MG ...	77	EPINEPHRINE NASAL SPRAY 2 MG/0.1ML ..	69	ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 400 MG/5ML	179
ENALAPRIL MALEATE & HYDROCHLOROTHIAZIDE TAB 10-25 MG ...	77	EPINEPHRINE SOLUTION AUTO- INJECTOR 0.1 MG/0.1ML	69	ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 400 MG/5ML	179
ENALAPRIL MALEATE ORAL SOLN 1 MG/ML	15	EPINEPHRINE SOLUTION AUTO- INJECTOR 0.3 MG/0.3ML (1:1000)	69	ERYTHROMYCIN ETHYLSUCCINATE TAB 400 MG	179
ENALAPRIL MALEATE TAB 2.5 MG	15	EPINEPHRINE SOLUTION AUTO- INJECTOR 0.3 MG/0.3ML (1:1000)	69	ERYTHROMYCIN GEL 2%	89
ENALAPRIL MALEATE TAB 5 MG	15	EPINEPHRINE SOLUTION AUTO- INJECTOR 0.15 MG/0.3ML (1:2000)	69	ERYTHROMYCIN GEL 2%	89
ENALAPRIL MALEATE TAB 10 MG	15	EPINEPHRINE SOLUTION AUTO- INJECTOR 0.15 MG/0.15ML (1:1000)	69	ERYTHROMYCIN OPTH OINT 5 MG/GM ..	223
ENALAPRIL MALEATE TAB 20 MG	15	EPINEPHRINE SOLUTION AUTO- INJECTOR 0.15 MG/0.15ML (1:1000)	69	ERYTHROMYCIN OPTH OINT 5 MG/GM ..	223
ENASIDENIB MESYLATE TAB 50 MG (BASE EQUIVALENT)	210	EPINEPHRINE SOLUTION AUTO- INJECTOR 0.15 MG/0.15ML (1:1000)	69	ERYTHROMYCIN PADS 2%	89
ENASIDENIB MESYLATE TAB 100 MG (BASE EQUIVALENT)	210	EPINEPHRINE SOLUTION PREFILLED SYRINGE 0.3 MG/0.3ML (1:1000)	69	ERYTHROMYCIN SOLN 2%	89
ENCORAFENIB CAP 75 MG	208	EPLERENONE TAB 25 MG	103	ERYTHROMYCIN STEARATE TAB 250 MG ...	179
ENFUVIRTIDE FOR INJ 90 MG	20	EPLERENONE TAB 50 MG	103	ERYTHROMYCIN TAB 250 MG	180
ENOXAPARIN SODIUM INJ 300 MG/3ML ...	28	EPLONTERSEN SODIUM SUBCUTANEOUS SOLN AUTO-INJ 45 MG/0.8ML	139	ERYTHROMYCIN TAB 500 MG	180
ENOXAPARIN SODIUM INJ SOLN PREF SYR 30 MG/0.3ML	28	EPOETIN ALFA-EPBX INJ 2000 UNIT/ML ...	67	ERYTHROMYCIN TAB DELAYED RELEASE 250 MG	179
		EPOETIN ALFA-EPBX INJ 3000 UNIT/ML ...	67	ERYTHROMYCIN TAB DELAYED RELEASE 250 MG	180
		EPOETIN ALFA-EPBX INJ 4000 UNIT/ML ...	68	ERYTHROMYCIN TAB DELAYED RELEASE 333 MG	179
		EPOETIN ALFA-EPBX INJ 10000 UNIT/ML ..	67		

ERYTHROMYCIN TAB DELAYED RELEASE 333 MG.....	180	ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 1.25-2.5 MG .	124	ESTRADIOL TD GEL 0.75 MG/0.75GM (0.1%)	124
ERYTHROMYCIN TAB DELAYED RELEASE 500 MG	179	ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 1.25-2.5 MG .	124	ESTRADIOL TD GEL 1.25 MG/1.25GM (0.1%)	122
ERYTHROMYCIN TAB DELAYED RELEASE 500 MG	180	ESTERIFIED ESTROGENS TAB 0.3 MG.....	128	ESTRADIOL TD GEL 1.25 MG/1.25GM (0.1%)	124
ERYTHROMYCIN W/ DELAYED RELEASE PARTICLES CAP 250 MG	180	ESTERIFIED ESTROGENS TAB 0.625 MG ...	128	ESTRADIOL TD GEL 1 MG/GM (0.1%)	122
ESCITALOPRAM OXALATE SOLN 5 MG/5ML (BASE EQUIV).....	255	ESTERIFIED ESTROGENS TAB 1.25 MG.....	128	ESTRADIOL TD GEL 1 MG/GM (0.1%)	124
ESCITALOPRAM OXALATE TAB 5 MG (BASE EQUIV).....	255	ESTERIFIED ESTROGENS TAB 2.5 MG.....	128	ESTRADIOL TD PATCH TWICE WEEKLY 0.1 MG/24HR	120
ESCITALOPRAM OXALATE TAB 10 MG (BASE EQUIV).....	255	ESTRADIOL ACETATE VAGINAL RING 0.1 MG/24HR	125	ESTRADIOL TD PATCH TWICE WEEKLY 0.1 MG/24HR	122
ESCITALOPRAM OXALATE TAB 20 MG (BASE EQUIV).....	255	ESTRADIOL ACETATE VAGINAL RING 0.05 MG/24HR	125	ESTRADIOL TD PATCH TWICE WEEKLY 0.1 MG/24HR	124
ESKETAMINE HCL NASAL SOLN 28 MG/ DEVICE X 2 (56 MG DOSE PACK)	33	ESTRADIOL CYPIONATE IM IN OIL 5 MG/ ML	122	ESTRADIOL TD PATCH TWICE WEEKLY 0.1 MG/24HR	127
ESKETAMINE HCL NASAL SOLN 28 MG/ DEVICE X 3 (84 MG DOSE PACK)	34	ESTRADIOL GEL 0.06% (0.52 MG/0.87 GM METERED-DOSE PUMP).....	123	ESTRADIOL TD PATCH TWICE WEEKLY 0.05 MG/24HR	122
ESLICARBAZEPINE ACETATE TAB 200 MG .	253	ESTRADIOL GEL 0.06% (0.75 MG/1.25 GM METERED-DOSE PUMP).....	124	ESTRADIOL TD PATCH TWICE WEEKLY 0.05 MG/24HR	123
ESLICARBAZEPINE ACETATE TAB 200 MG .	253	ESTRADIOL GEL 0.06% (0.75 MG/1.25 GM METERED-DOSE PUMP).....	124	ESTRADIOL TD PATCH TWICE WEEKLY 0.05 MG/24HR	127
ESLICARBAZEPINE ACETATE TAB 400 MG .	253	ESTRADIOL-LEVONORGESTREL TD PATCH WEEKLY 0.045-0.015 MG/DAY	121	ESTRADIOL TD PATCH TWICE WEEKLY 0.05 MG/24HR	127
ESLICARBAZEPINE ACETATE TAB 400 MG .	253	ESTRADIOL & NORETHINDRONE ACETATE TAB 0.5-0.1 MG.....	119	ESTRADIOL TD PATCH TWICE WEEKLY 0.025 MG/24HR	120
ESLICARBAZEPINE ACETATE TAB 600 MG .	253	ESTRADIOL & NORETHINDRONE ACETATE TAB 0.5-0.1 MG.....	120	ESTRADIOL TD PATCH TWICE WEEKLY 0.025 MG/24HR	122
ESLICARBAZEPINE ACETATE TAB 600 MG .	253	ESTRADIOL & NORETHINDRONE ACETATE TAB 0.5-0.1 MG.....	123	ESTRADIOL TD PATCH TWICE WEEKLY 0.025 MG/24HR	123
ESLICARBAZEPINE ACETATE TAB 800 MG .	253	ESTRADIOL & NORETHINDRONE ACETATE TAB 1-0.5 MG.....	119	ESTRADIOL TD PATCH TWICE WEEKLY 0.025 MG/24HR	127
ESLICARBAZEPINE ACETATE TAB 800 MG .	253	ESTRADIOL & NORETHINDRONE ACETATE TAB 1-0.5 MG.....	119	ESTRADIOL TD PATCH TWICE WEEKLY 0.075 MG/24HR	120
ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACK 2.5 MG.	238	ESTRADIOL & NORETHINDRONE ACETATE TAB 1-0.5 MG.....	123	ESTRADIOL TD PATCH TWICE WEEKLY 0.075 MG/24HR	122
ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 5 MG.	238	ESTRADIOL & NORETHINDRONE ACETATE TAB 1-0.5 MG.....	128	ESTRADIOL TD PATCH TWICE WEEKLY 0.075 MG/24HR	124
ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 10 MG.	238	ESTRADIOL & NORETHINDRONE ACETATE TAB 1-0.5 MG.....	128	ESTRADIOL TD PATCH TWICE WEEKLY 0.075 MG/24HR	127
ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 20 MG .	238	ESTRADIOL-NORETHINDRONE ACE TD PTTW 0.05-0.14 MG/DAY.....	121	ESTRADIOL TD PATCH TWICE WEEKLY 0.0375 MG/24HR.....	122
ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 40 MG .	238	ESTRADIOL-NORETHINDRONE ACE TD PTTW 0.05-0.25 MG/DAY	121	ESTRADIOL TD PATCH TWICE WEEKLY 0.0375 MG/24HR.....	123
ESTAZOLAM TAB 1 MG	61	ESTRADIOL-PROGESTERONE CAP 0.5- 100 MG.....	121	ESTRADIOL TD PATCH TWICE WEEKLY 0.0375 MG/24HR.....	127
ESTAZOLAM TAB 2 MG	61	ESTRADIOL-PROGESTERONE CAP 1-100 MG.....	121	ESTRADIOL TD PATCH WEEKLY 0.1 MG/24HR	124
ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 0.625-1.25 MG.....	121	ESTRADIOL TAB 0.5 MG.....	124	ESTRADIOL TD PATCH WEEKLY 0.05 MG/24HR	123
ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 0.625-1.25 MG.....	123	ESTRADIOL TAB 1 MG.....	124	ESTRADIOL TD PATCH WEEKLY 0.06 MG/24HR	123
ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 0.625-1.25 MG.....	123	ESTRADIOL TAB 2 MG.....	124	ESTRADIOL TD PATCH WEEKLY 0.025 MG/24HR	123
ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 0.625-1.25 MG.....	124	ESTRADIOL TD GEL 0.5 MG/0.5GM (0.1%) .	122	ESTRADIOL TD PATCH WEEKLY 0.075 MG/24HR	124
ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 1.25-2.5 MG .	121	ESTRADIOL TD GEL 0.5 MG/0.5GM (0.1%) .	124	ESTRADIOL TD PATCH WEEKLY 0.0375 MG/24HR (37.5 MCG/24HR).....	123
ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 1.25-2.5 MG .	123	ESTRADIOL TD GEL 0.25 MG/0.25GM (0.1%)	122		
		ESTRADIOL TD GEL 0.25 MG/0.25GM (0.1%)	124		
		ESTRADIOL TD GEL 0.75 MG/0.75GM (0.1%)	122		

ESTRADIOL TD PATCH WEEKLY 14 MCG/24HR.....	128	ETHACRYNIC ACID TAB 25 MG.....	102	EVEROLIMUS TAB 7.5 MG.....	212
ESTRADIOL TRANSDERMAL SPRAY 1.53 MG/SPRAY.....	124	ETHAMBUTOL HCL TAB 100 MG.....	52	EVEROLIMUS TAB 10 MG.....	209
ESTRADIOL VAGINAL CREAM 0.01%.....	123	ETHAMBUTOL HCL TAB 400 MG.....	52	EVEROLIMUS TAB 10 MG.....	212
ESTRADIOL VAGINAL INSERT 4 MCG.....	125	ETHAMBUTOL HCL TAB 400 MG.....	52	EVEROLIMUS TAB FOR ORAL SUSP 2 MG..	209
ESTRADIOL VAGINAL INSERT 10 MCG.....	125	ETHIONAMIDE TAB 250 MG.....	52	EVEROLIMUS TAB FOR ORAL SUSP 3 MG..	209
ESTRADIOL VAGINAL INSERT STARTER PACK 4 MCG.....	125	ETHOSUXIMIDE (BULK) POWDER.....	189	EVEROLIMUS TAB FOR ORAL SUSP 5 MG..	209
ESTRADIOL VAGINAL INSERT STARTER PACK 10 MCG.....	125	ETHOSUXIMIDE CAP 250 MG.....	74	EVOLOCUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 140 MG/ML.....	109
ESTRADIOL VAGINAL RING 2 MG (7.5 MCG/24HRS).....	124	ETHOSUXIMIDE CAP 250 MG.....	74	EVOLOCUMAB SUBCUTANEOUS SOLN CARTRIDGE/INFUSOR 420 MG/3.5ML.....	109
ESTRADIOL VAGINAL TAB 10 MCG.....	124	ETHOSUXIMIDE SOLN 250 MG/5ML.....	74	EVOLOCUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 140 MG/ML.....	109
ESTRADIOL VAGINAL TAB 10 MCG.....	132	ETHOXYLATED MACADAMIA NUT OIL.....	207	EXEMESTANE TAB 25 MG.....	53
ESTRADIOL VALERATE-DIENOGEST TAB 3 MG /2-2 MG/2-3 MG/1 MG.....	128	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG.....	124	EXENATIDE EXTENDED RELEASE SUSP AUTO-INJECTOR 2 MG/0.85ML.....	35
ESTRADIOL VALERATE IM IN OIL 10 MG/ ML.....	122	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG.....	126	EXENATIDE SOLN PEN-INJECTOR 5 MCG/0.02ML.....	35
ESTRADIOL VALERATE IM IN OIL 10 MG/ ML.....	122	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG.....	131	EXENATIDE SOLN PEN-INJECTOR 5 MCG/0.02ML.....	35
ESTRADIOL VALERATE IM IN OIL 10 MG/ ML.....	122	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-50 MCG.....	124	EXENATIDE SOLN PEN-INJECTOR 10 MCG/0.04ML.....	35
ESTRADIOL VALERATE IM IN OIL 20 MG/ ML.....	122	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-50 MCG.....	126	EXENATIDE SOLN PEN-INJECTOR 10 MCG/0.04ML.....	35
ESTRADIOL VALERATE IM IN OIL 20 MG/ ML.....	123	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-50 MCG.....	131	*EXTERNAL VEHICLES - SOLUTION*** ..	205
ESTRADIOL VALERATE IM IN OIL 40 MG/ ML.....	122	ETODOLAC CAP 200 MG.....	218	EZETIMIBE-ROSUVASTATIN CALCIUM TAB 10-5 MG.....	109
ESTRADIOL VALERATE IM IN OIL 40 MG/ ML.....	123	ETODOLAC CAP 300 MG.....	218	EZETIMIBE-ROSUVASTATIN CALCIUM TAB 10-5 MG.....	109
ESTRAMUSTINE PHOSPHATE SODIUM CAP 140 MG.....	39	ETODOLAC TAB 400 MG.....	218	EZETIMIBE-ROSUVASTATIN CALCIUM TAB 10-10 MG.....	109
ESTROGENS, CONJUGATED TAB 0.3 MG...	121	ETODOLAC TAB 500 MG.....	218	EZETIMIBE-ROSUVASTATIN CALCIUM TAB 10-10 MG.....	109
ESTROGENS, CONJUGATED TAB 0.3 MG...	129	ETODOLAC TAB ER 24HR 400 MG.....	218	EZETIMIBE-ROSUVASTATIN CALCIUM TAB 10-10 MG.....	109
ESTROGENS, CONJUGATED TAB 0.9 MG...	121	ETODOLAC TAB ER 24HR 500 MG.....	218	EZETIMIBE-ROSUVASTATIN CALCIUM TAB 10-10 MG.....	109
ESTROGENS, CONJUGATED TAB 0.9 MG...	129	ETODOLAC TAB ER 24HR 600 MG.....	218	EZETIMIBE-ROSUVASTATIN CALCIUM TAB 10-20 MG.....	109
ESTROGENS, CONJUGATED TAB 0.45 MG..	121	ETONOGESTREL-ETHINYL ESTRADIOL VA RING 0.12-0.015 MG/24HR.....	123	EZETIMIBE-ROSUVASTATIN CALCIUM TAB 10-20 MG.....	109
ESTROGENS, CONJUGATED TAB 0.45 MG..	129	ETONOGESTREL-ETHINYL ESTRADIOL VA RING 0.12-0.015 MG/24HR.....	123	EZETIMIBE-ROSUVASTATIN CALCIUM TAB 10-20 MG.....	109
ESTROGENS, CONJUGATED TAB 0.625 MG	121	ETONOGESTREL-ETHINYL ESTRADIOL VA RING 0.12-0.015 MG/24HR.....	124	EZETIMIBE-ROSUVASTATIN CALCIUM TAB 10-40 MG.....	109
ESTROGENS, CONJUGATED TAB 0.625 MG	129	ETONOGESTREL-ETHINYL ESTRADIOL VA RING 0.12-0.015 MG/24HR.....	125	EZETIMIBE-ROSUVASTATIN CALCIUM TAB 10-40 MG.....	109
ESTROGENS, CONJUGATED TAB 1.25 MG..	121	ETOPOSIDE (BULK) POWDER.....	189	EZETIMIBE-SIMVASTATIN TAB 10-10 MG..	108
ESTROGENS, CONJUGATED TAB 1.25 MG..	129	ETOPOSIDE CAP 50 MG.....	119	EZETIMIBE-SIMVASTATIN TAB 10-20 MG..	108
ESTROGENS, CONJUGATED VAGINAL CREAM 0.625 MG/GM.....	129	ETRAVIRINE TAB 25 MG.....	19	EZETIMIBE-SIMVASTATIN TAB 10-40 MG..	108
ESZOPICLONE TAB 1 MG.....	133	ETRAVIRINE TAB 100 MG.....	18	EZETIMIBE-SIMVASTATIN TAB 10-80 MG..	108
ESZOPICLONE TAB 2 MG.....	133	ETRAVIRINE TAB 100 MG.....	19	EZETIMIBE TAB 10 MG.....	108
ESZOPICLONE TAB 3 MG.....	133	ETRAVIRINE TAB 200 MG.....	18	FACTOR IX COMPLEX FOR INJ 500 UNIT ..	152
ETANERCEPT SUBCUTANEOUS INJ 25 MG/0.5ML.....	169	ETRAVIRINE TAB 200 MG.....	19	FACTOR IX COMPLEX FOR INJ 1000 UNIT .	152
ETANERCEPT SUBCUTANEOUS SOLN PREFILLED SYRINGE 25 MG/0.5ML.....	168	EVEROLIMUS TAB 0.5 MG.....	169	FACTOR IX COMPLEX FOR INJ 1500 UNIT .	152
ETANERCEPT SUBCUTANEOUS SOLN PREFILLED SYRINGE 50 MG/ML.....	169	EVEROLIMUS TAB 0.25 MG.....	169	FACTOR XIII CONCENTRATE (HUMAN) FOR INJ KIT 1000-1600 UNIT.....	149
ETANERCEPT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 50 MG/ML.....	169	EVEROLIMUS TAB 0.75 MG.....	169	FAMCICLOVIR TAB 125 MG.....	43
ETANERCEPT SUBCUTANEOUS SOLUTION CARTRIDGE 50 MG/ML.....	169	EVEROLIMUS TAB 1 MG.....	169	FAMCICLOVIR TAB 250 MG.....	43
		EVEROLIMUS TAB 2.5 MG.....	209	FAMCICLOVIR TAB 500 MG.....	43
		EVEROLIMUS TAB 2.5 MG.....	212	FAMOTIDINE FOR SUSP 40 MG/5ML.....	154
		EVEROLIMUS TAB 5 MG.....	209	FEBUXOSTAT TAB 40 MG.....	42
		EVEROLIMUS TAB 5 MG.....	212	FEBUXOSTAT TAB 80 MG.....	43
		EVEROLIMUS TAB 7.5 MG.....	209		

FECAL MICROBIOTA SPORES, LIVE-BRPK CAPS.....	25	FENTANYL TD PATCH 72HR 50 MCG/HR.....	226	FLAVOCOXID CAP 250 MG.....	195
FELBAMATE SUSP 600 MG/5ML.....	143	FENTANYL TD PATCH 72HR 62.5 MCG/HR.....	226	FLAVOCOXID CAP 500 MG.....	195
FELBAMATE TAB 400 MG.....	143	FENTANYL TD PATCH 72HR 75 MCG/HR.....	227	FLAVOCOXID-CITRATED ZINC BISGLYCINATE CAP 250-50 MG.....	195
FELBAMATE TAB 400 MG.....	143	FENTANYL TD PATCH 72HR 87.5 MCG/HR.....	227	FLAVOCOXID-CITRATED ZINC BISGLYCINATE CAP 500-50 MG.....	195
FELBAMATE TAB 600 MG.....	143	FENTANYL TD PATCH 72HR 100 MCG/HR.....	226	FLAVOXATE HCL TAB 100 MG.....	51
FELBAMATE TAB 600 MG.....	143	*FERRIC SUBSULFATE SOLN**.....	151	FLECAINIDE ACETATE TAB 50 MG.....	24
FELODIPINE TAB ER 24HR 2.5 MG.....	72	FERRIC SUBSULFATE SOLN 259 MG/GM.....	148	FLECAINIDE ACETATE TAB 100 MG.....	24
FELODIPINE TAB ER 24HR 5 MG.....	72	FERROUS FUMARATE-FOLIC ACID TAB 324-1 MG.....	112	FLECAINIDE ACETATE TAB 150 MG.....	24
FELODIPINE TAB ER 24HR 10 MG.....	72	FEXOFENADINE-PSEUDOEPHEDRINE TAB ER 12HR 60-120 MG.....	242	FLIBANSERIN TAB 100 MG.....	81
FENFLURAMINE HCL ORAL SOLN 2.2 MG/ML.....	31	FEZOLINETANT TAB 45 MG.....	160	FLUCONAZOLE FOR SUSP 10 MG/ML.....	40
FENOFIBRATE CAP 50 MG.....	105	*FIBRIN SEALANT COMPONENT KIT 2 ML***.....	86	FLUCONAZOLE FOR SUSP 40 MG/ML.....	40
FENOFIBRATE CAP 50 MG.....	106	*FIBRIN SEALANT COMPONENT KIT 2 ML***.....	92	FLUCONAZOLE TAB 50 MG.....	40
FENOFIBRATE CAP 150 MG.....	105	*FIBRIN SEALANT COMPONENT KIT 4 ML***.....	86	FLUCONAZOLE TAB 100 MG.....	40
FENOFIBRATE CAP 150 MG.....	106	*FIBRIN SEALANT COMPONENT KIT 4 ML***.....	92	FLUCONAZOLE TAB 150 MG.....	40
FENOFIBRATE MICRONIZED CAP 43 MG.....	105	*FIBRIN SEALANT COMPONENT KIT 4 ML***.....	86	FLUCONAZOLE TAB 200 MG.....	40
FENOFIBRATE MICRONIZED CAP 67 MG.....	105	*FIBRIN SEALANT COMPONENT KIT 10 ML***.....	86	FLUCYTOSINE CAP 250 MG.....	39
FENOFIBRATE MICRONIZED CAP 130 MG.....	105	*FIBRIN SEALANT COMPONENT KIT 10 ML***.....	92	FLUCYTOSINE CAP 250 MG.....	40
FENOFIBRATE MICRONIZED CAP 134 MG.....	105	*FIBRIN SEALANT COMPONENT KIT 10 ML***.....	86	FLUCYTOSINE CAP 500 MG.....	39
FENOFIBRATE MICRONIZED CAP 200 MG.....	105	*FIBRIN SEALANT COMPONENT KIT 10 ML***.....	92	FLUCYTOSINE CAP 500 MG.....	40
FENOFIBRATE TAB 40 MG.....	106	*FIBRIN SEALANT COMPONENT SOLUTION***.....	86	FLUDROCORTISONE ACETATE TAB 0.1 MG.....	156
FENOFIBRATE TAB 48 MG.....	106	*FIBRIN SEALANT COMPONENT SOLUTION***.....	86	FLUNISOLIDE NASAL SOLN 25 MCG/ACT (0.025%).....	22
FENOFIBRATE TAB 54 MG.....	106	*FIBRIN SEALANT COMPONENT SOLUTION***.....	86	FLUOCINOLONE ACETONIDE CREAM 0.01%.....	156
FENOFIBRATE TAB 120 MG.....	106	FIDAXOMICIN FOR SUSP 40 MG/ML.....	179	FLUOCINOLONE ACETONIDE CREAM 0.025%.....	156
FENOFIBRATE TAB 145 MG.....	106	FIDAXOMICIN TAB 200 MG.....	180	FLUOCINOLONE ACETONIDE CREAM 0.025%.....	159
FENOFIBRATE TAB 160 MG.....	106	FILGRASTIM-AAFI INJ 300 MCG/ML.....	67	FLUOCINOLONE ACETONIDE OIL 0.01% (BODY OIL).....	156
FENOFIBRIC ACID TAB 35 MG.....	106	FILGRASTIM-AAFI INJ 480 MCG/1.6ML (300 MCG/ML).....	67	FLUOCINOLONE ACETONIDE OIL 0.01% (BODY OIL).....	157
FENOFIBRIC ACID TAB 105 MG.....	106	FILGRASTIM-AAFI SOLN PREFILLED SYRINGE 300 MCG/0.5ML.....	67	FLUOCINOLONE ACETONIDE OIL 0.01% (BODY OIL).....	157
FENTANYL CITRATE BUCCAL TAB 100 MCG (BASE EQUIV).....	230	FILGRASTIM-AAFI SOLN PREFILLED SYRINGE 480 MCG/0.8ML.....	67	FLUOCINOLONE ACETONIDE OIL 0.01% (SCALP OIL).....	156
FENTANYL CITRATE BUCCAL TAB 200 MCG (BASE EQUIV).....	230	FILGRASTIM-SNDZ SOLN PREFILLED SYRINGE 300 MCG/0.5ML.....	68	FLUOCINOLONE ACETONIDE OIL 0.01% (SCALP OIL).....	156
FENTANYL CITRATE BUCCAL TAB 200 MCG (BASE EQUIV).....	230	FILGRASTIM-SNDZ SOLN PREFILLED SYRINGE 480 MCG/0.8ML.....	68	FLUOCINOLONE ACETONIDE OINT 0.025%.....	157
FENTANYL CITRATE BUCCAL TAB 400 MCG (BASE EQUIV).....	230	FINASTERIDE TAB 5 MG.....	60	FLUOCINOLONE ACETONIDE OINT 0.025%.....	159
FENTANYL CITRATE BUCCAL TAB 600 MCG (BASE EQUIV).....	230	FINASTERIDE-TADALAFIL CAP 5-5 MG.....	60	FLUOCINOLONE ACETONIDE (OTIC) OIL 0.01%.....	234
FENTANYL CITRATE BUCCAL TAB 800 MCG (BASE EQUIV).....	230	FINERENONE TAB 10 MG.....	181	FLUOCINOLONE ACETONIDE (OTIC) OIL 0.01%.....	234
FENTANYL CITRATE BUCCAL TAB 800 MCG (BASE EQUIV).....	230	FINERENONE TAB 20 MG.....	181	FLUOCINOLONE ACETONIDE (OTIC) OIL 0.01%.....	234
FENTANYL CITRATE LOZENGE ON A HANDLE 200 MCG.....	230	FINERENONE TAB 40 MG.....	181	FLUOCINOLONE ACETONIDE SHAMPOO 0.01%.....	155
FENTANYL CITRATE LOZENGE ON A HANDLE 400 MCG.....	230	FINGOLIMOD HCL CAP 0.5 MG (BASE EQUIV).....	215	FLUOCINOLONE ACETONIDE SOLN 0.01%.....	157
FENTANYL CITRATE LOZENGE ON A HANDLE 600 MCG.....	230	FINGOLIMOD HCL CAP 0.25 MG (BASE EQUIV).....	215	FLUOCINONIDE CREAM 0.1%.....	157
FENTANYL CITRATE LOZENGE ON A HANDLE 800 MCG.....	230	FITUSIRAN SODIUM SUBCUTANEOUS SOLN 20 MG/0.2ML.....	202	FLUOCINONIDE CREAM 0.05%.....	157
FENTANYL CITRATE LOZENGE ON A HANDLE 1200 MCG.....	230	FITUSIRAN SODIUM SUBCUTANEOUS SOLN AUTO-INJ 50 MG/0.5ML.....	202	FLUOCINONIDE EMULSIFIED BASE CREAM 0.05%.....	157
FENTANYL CITRATE LOZENGE ON A HANDLE 1600 MCG.....	230				

FLUOCINONIDE GEL 0.05%.....	157	FLUTICASONE FUROATE-VILANTEROL AERO POWD BA 200-25 MCG/ACT	243	FLUVOXAMINE MALEATE CAP ER 24HR 150 MG.....	256
FLUOCINONIDE OINT 0.05%.....	157	FLUTICASONE PROPIONATE CREAM 0.05%	157	FLUVOXAMINE MALEATE TAB 25 MG	256
FLUOCINONIDE SOLN 0.05%.....	157	FLUTICASONE PROPIONATE HFA INHAL AER 110 MCG/ACT	22	FLUVOXAMINE MALEATE TAB 50 MG	256
FLUOROMETHOLONE ACETATE OPTH SUSP 0.1%.....	222	FLUTICASONE PROPIONATE HFA INHAL AER 220 MCG/ACT	22	FLUVOXAMINE MALEATE TAB 100 MG	256
FLUOROMETHOLONE OPTH SUSP 0.1% ..	222	FLUTICASONE PROPIONATE HFA INHAL AERO 44 MCG/ACT.....	22	FOLIC ACID CAP 0.8 MG	268
FLUOROMETHOLONE OPTH SUSP 0.25% ..	222	FLUTICASONE PROPIONATE LOTION 0.05%	157	FOLIC ACID POWDER	189
FLUOROURACIL (BULK) POWDER	189	FLUTICASONE PROPIONATE NASAL SUSP 50 MCG/ACT.....	22	FOLIC ACID TAB 1 MG	268
FLUOROURACIL CREAM 4%.....	92	FLUTICASONE PROPIONATE OINT 0.005% ..	157	FOLIC ACID TAB 1 MG	268
FLUOROURACIL CREAM 5%.....	89	FLUTICASONE-SALMETEROL AER POWDER BA 55-14 MCG/ACT.....	243	FOLIC ACID TAB 400 MCG	268
FLUOROURACIL CREAM 5%.....	89	FLUTICASONE-SALMETEROL AER POWDER BA 100-50 MCG/ACT.....	242	FOLIC ACID TAB 400 MCG	268
FLUOROURACIL SOLN 2%	89	FLUTICASONE-SALMETEROL AER POWDER BA 100-50 MCG/ACT.....	244	FOLIC ACID TAB 800 MCG	268
FLUOROURACIL SOLN 5%	89	FLUTICASONE-SALMETEROL AER POWDER BA 113-14 MCG/ACT	242	FOLLITROPIN ALFA FOR INJ 450 UNIT ...	160
FLUOXETINE HCL CAP 10 MG.....	256	FLUTICASONE-SALMETEROL AER POWDER BA 232-14 MCG/ACT.....	243	FOLLITROPIN ALFA FOR INJ 1050 UNIT ...	160
FLUOXETINE HCL CAP 20 MG.....	256	FLUTICASONE-SALMETEROL AER POWDER BA 250-50 MCG/ACT.....	242	FOLLITROPIN ALFA FOR SUBCUTANEOUS INJ 75 UNIT.....	161
FLUOXETINE HCL CAP 40 MG	256	FLUTICASONE-SALMETEROL AER POWDER BA 250-50 MCG/ACT.....	244	FOLLITROPIN ALFA SUBCUTANEOUS SOLN PEN-INJ 300 UNIT/0.48ML	160
FLUOXETINE HCL CAP DELAYED RELEASE 90 MG.....	256	FLUTICASONE-SALMETEROL AER POWDER BA 500-50 MCG/ACT.....	242	FOLLITROPIN ALFA SUBCUTANEOUS SOLN PEN-INJ 450 UNIT/0.72ML	160
FLUOXETINE HCL (PMDD) TAB 10 MG.....	256	FLUTICASONE-SALMETEROL AER POWDER BA 500-50 MCG/ACT.....	244	FOLLITROPIN ALFA SUBCUTANEOUS SOLN PEN-INJ 900 UNIT/1.44ML	161
FLUOXETINE HCL (PMDD) TAB 20 MG	256	FLUTICASONE-SALMETEROL INHAL AEROSOL 45-21 MCG/ACT	241	FOLLITROPIN BETA INJ 300 UNIT/0.36ML ..	160
FLUOXETINE HCL SOLUTION 20 MG/5ML ..	256	FLUTICASONE-SALMETEROL INHAL AEROSOL 45-21 MCG/ACT	242	FOLLITROPIN BETA INJ 600 UNIT/0.72ML ..	160
FLUOXETINE HCL TAB 10 MG	256	FLUTICASONE-SALMETEROL INHAL AEROSOL 115-21 MCG/ACT	241	FOLLITROPIN BETA INJ 900 UNIT/1.08ML ..	160
FLUOXETINE HCL TAB 20 MG	256	FLUTICASONE-SALMETEROL INHAL AEROSOL 115-21 MCG/ACT	242	FONDAPARINUX SODIUM SUBCUTANEOUS INJ 2.5 MG/0.5ML	29
FLUOXETINE HCL TAB 60 MG.....	256	FLUTICASONE-SALMETEROL INHAL AEROSOL 230-21 MCG/ACT.....	241	FONDAPARINUX SODIUM SUBCUTANEOUS INJ 5 MG/0.4ML	29
FLUPHENAZINE HCL ELIXIR 2.5 MG/5ML....	6	FLUTICASONE-SALMETEROL INHAL AEROSOL 230-21 MCG/ACT.....	242	FONDAPARINUX SODIUM SUBCUTANEOUS INJ 7.5 MG/0.6ML.....	29
FLUPHENAZINE HCL ORAL CONC 5 MG/ML ..	6	FLUTICASONE-UMECLIDINIUM- VILANTEROL AEPB 100-62.5-25 MCG/ACT ..	244	FONDAPARINUX SODIUM SUBCUTANEOUS INJ 10 MG/0.8ML	29
FLUPHENAZINE HCL TAB 1 MG.....	6	FLUTICASONE-UMECLIDINIUM- VILANTEROL AEPB 200-62.5-25 MCG/ACT ..	244	FORMALDEHYDE SOLUTION 10%	190
FLUPHENAZINE HCL TAB 2.5 MG.....	6	FLUVASTATIN SODIUM CAP 20 MG (BASE EQUIVALENT).....	106	FORMALDEHYDE SOLUTION 37%	190
FLUPHENAZINE HCL TAB 5 MG	6	FLUVASTATIN SODIUM CAP 40 MG (BASE EQUIVALENT).....	107	FORMOTEROL FUMARATE SOLN NEBU 20 MCG/2ML	69
FLUPHENAZINE HCL TAB 10 MG	6	FLUVASTATIN SODIUM TAB ER 24 HR 80 MG (BASE EQUIVALENT)	107	FORMOTEROL FUMARATE SOLN NEBU 20 MCG/2ML	69
FLURANDRENOLIDE CREAM 0.05%.....	157	FLUVOXAMINE MALEATE CAP ER 24HR 100 MG.....	256	FOSAMPRENAVIR CALCIUM TAB 700 MG (BASE EQUIV).....	21
FLURANDRENOLIDE LOTION 0.05%.....	157			FOSFOMYCIN TROMETHAMINE POWD PACK 3 GM (BASE EQUIVALENT).....	26
FLURANDRENOLIDE TAPE 4 MCG/SQCM ..	155			FOSINOPRIL SODIUM & HYDROCHLOROTHIAZIDE TAB 10-12.5 MG..	78
FLURAZEPAM HCL CAP 15 MG	133			FOSINOPRIL SODIUM & HYDROCHLOROTHIAZIDE TAB 20-12.5 MG ..	78
FLURAZEPAM HCL CAP 30 MG	133			FOSINOPRIL SODIUM TAB 10 MG	15
FLURBIPROFEN SODIUM OPTH SOLN 0.03%	222			FOSINOPRIL SODIUM TAB 20 MG	15
FLURBIPROFEN TAB 50 MG	218			FOSINOPRIL SODIUM TAB 40 MG.....	15
FLURBIPROFEN TAB 100 MG.....	218			FOSTAMATINIB DISODIUM TAB 100 MG (BASE EQUIVALENT).....	153
FLURBIPROFEN TAB 100 MG.....	218			FOSTAMATINIB DISODIUM TAB 150 MG (BASE EQUIVALENT).....	153
FLURBIPROFEN TAB 100 MG.....	219			FOSTEMSAVIR TROMETHAMINE TAB ER 12HR 600 MG	20
FLUTICASONE FUROATE AEROSOL POWDER BREATH ACTIV 50 MCG/ACT	22				
FLUTICASONE FUROATE AEROSOL POWDER BREATH ACTIV 100 MCG/ACT.....	21				
FLUTICASONE FUROATE AEROSOL POWDER BREATH ACTIV 200 MCG/ACT.....	22				
FLUTICASONE FUROATE-VILANTEROL AERO POWD BA 50-25 MCG/ACT.....	242				
FLUTICASONE FUROATE-VILANTEROL AERO POWD BA 100-25 MCG/ACT.....	242				
FLUTICASONE FUROATE-VILANTEROL AERO POWD BA 100-25 MCG/ACT.....	243				
FLUTICASONE FUROATE-VILANTEROL AERO POWD BA 200-25 MCG/ACT	242				

FROVATRIPTAN SUCCINATE TAB 2.5 MG (BASE EQUIVALENT).....	246	GANIRELIX ACETATE SOLN PREFILLED SYRINGE 250 MCG/0.5ML	166	GLIPIZIDE-METFORMIN HCL TAB 2.5- 500 MG	35
FRUQUINTINIB CAP 1 MG.....	46	GARADACIMAB-GXII SOLN AUTO- INJECTOR 200 MG/1.2ML.....	182	GLIPIZIDE-METFORMIN HCL TAB 2.5- 500 MG	35
FRUQUINTINIB CAP 5 MG.....	46	GATIFLOXACIN OPTH SOLN 0.5%.....	223	GLIPIZIDE-METFORMIN HCL TAB 5-500 MG	35
FUROSEMIDE ORAL SOLN 8 MG/ML	102	GEFITINIB TAB 250 MG	209	GLIPIZIDE POWDER	190
FUROSEMIDE ORAL SOLN 10 MG/ML	102	GEFITINIB TAB 250 MG	210	GLIPIZIDE TAB 2.5 MG	35
FUROSEMIDE SUBCUTANEOUS CARTRIDGE KIT 80 MG/10ML	102	GELATIN ADSORBABLE OPTH FILM	220	GLIPIZIDE TAB 5 MG	35
FUROSEMIDE TAB 20 MG	102	*GEL BASE - GEL**	181	GLIPIZIDE TAB 10 MG	35
FUROSEMIDE TAB 20 MG	102	*GEL BASE - GEL**	182	GLIPIZIDE TAB ER 24HR 2.5 MG	35
FUROSEMIDE TAB 40 MG	102	*GEL BASE - GEL**	184	GLIPIZIDE TAB ER 24HR 2.5 MG	35
FUROSEMIDE TAB 40 MG	102	*GEL BASE - GEL**	184	GLIPIZIDE TAB ER 24HR 2.5 MG	36
FUROSEMIDE TAB 80 MG	102	*GEL BASE - GEL**	186	GLIPIZIDE TAB ER 24HR 5 MG	35
FUROSEMIDE TAB 80 MG	102	*GEL BASE - GEL**	190	GLIPIZIDE TAB ER 24HR 5 MG	36
FUTIBATINIB TAB THERAPY PACK 4 MG (12 MG DAILY DOSE)	119	*GEL BASE - GEL**	190	GLIPIZIDE TAB ER 24HR 5 MG	36
FUTIBATINIB TAB THERAPY PACK 4 MG (16 MG DAILY DOSE)	119	*GEL BASE - GEL**	195	GLIPIZIDE TAB ER 24HR 10 MG	35
FUTIBATINIB TAB THERAPY PACK 4 MG (20 MG DAILY DOSE)	119	*GEL BASE - GEL**	196	GLIPIZIDE TAB ER 24HR 10 MG	35
GABAPENTIN CAP 100 MG	134	*GEL BASE - GEL**	197	GLIPIZIDE TAB ER 24HR 10 MG	36
GABAPENTIN CAP 100 MG	134	*GEL BASE - GEL**	197	GLUCAGON FOR INJ 1 MG	146
GABAPENTIN CAP 300 MG	134	*GEL BASE - GEL**	200	GLUCAGON HCL FOR INJ 1 MG	146
GABAPENTIN CAP 300 MG	134	*GEL BASE - GEL**	204	GLUCAGON HCL FOR INJ 1 MG	146
GABAPENTIN CAP 400 MG	134	*GEL BASE - GEL**	205	GLUCAGON NASAL POWDER 3 MG/DOSE	146
GABAPENTIN CAP 400 MG	134	*GEL BASE - GEL**	207	GLUCAGON NASAL POWDER 3 MG/DOSE	146
GABAPENTIN ORAL SOLN 250 MG/5ML	134	GEMFIBROZIL TAB 600 MG	106	GLUCAGON SUBCUTANEOUS SOLN 1 MG/0.2ML	146
GABAPENTIN ORAL SOLN 250 MG/5ML	134	GEMFIBROZIL TAB 600 MG	106	GLUCAGON SUBCUTANEOUS SOLN PREF SYRINGE 1 MG/0.2ML	146
GABAPENTIN TAB 600 MG	134	GENTAMICIN SULFATE CREAM 0.1%	12	GLUCAGON SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.5 MG/0.1ML	146
GABAPENTIN TAB 600 MG	134	GENTAMICIN SULFATE OINT 0.1%	12	GLUCAGON SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.5 MG/0.1ML	146
GABAPENTIN TAB 800 MG	134	GENTAMICIN SULFATE OPTH SOLN 0.3%	223	GLUCAGON SUBCUTANEOUS SOLUTION AUTO-INJECTOR 1 MG/0.2ML	146
GABAPENTIN TAB 800 MG	134	GEPOTIDACIN MESYLATE TAB 750 MG	183	GLUCAGON SUBCUTANEOUS SOLUTION AUTO-INJECTOR 1 MG/0.2ML	146
GALANTAMINE HYDROBROMIDE CAP ER 24HR 8 MG	83	GILTRITINIB FUMARATE TABLET 40 MG (BASE EQUIVALENT).....	213	GLUCOSE BLOOD TEST STRIP	95
GALANTAMINE HYDROBROMIDE CAP ER 24HR 16 MG	82	GIVINOSTAT HCL ORAL SUSP 8.86 MG/ML	140	GLUCOSE BLOOD TEST STRIP	96
GALANTAMINE HYDROBROMIDE CAP ER 24HR 24 MG	83	GLASDEGIB MALEATE TAB 25 MG (BASE EQUIVALENT).....	209	GLUCOSE BLOOD TEST STRIP	96
GALANTAMINE HYDROBROMIDE ORAL SOLN 4 MG/ML	83	GLASDEGIB MALEATE TAB 100 MG (BASE EQUIVALENT).....	209	GLUCOSE BLOOD TEST STRIP	100
GALANTAMINE HYDROBROMIDE TAB 4 MG	83	GLATIRAMER ACETATE SOLN PREFILLED SYRINGE 20 MG/ML	215	GLUCOSE URINE TEST-(GLUCOSE OXIDASE) STRIP	97
GALANTAMINE HYDROBROMIDE TAB 8 MG	83	GLATIRAMER ACETATE SOLN PREFILLED SYRINGE 20 MG/ML	216	GLUCOSE URINE TEST-(GLUCOSE OXIDASE) STRIP	97
GALANTAMINE HYDROBROMIDE TAB 12 MG	83	GLATIRAMER ACETATE SOLN PREFILLED SYRINGE 40 MG/ML	215	GLUTAMINE (SICKLE CELL) POWD PACK 5 GM	110
GALCANEZUMAB-GNLM SUBCUTANEOUS SOLN AUTO-INJECTOR 120 MG/ML	70	GLATIRAMER ACETATE SOLN PREFILLED SYRINGE 40 MG/ML	216	GLUTAMINE (SICKLE CELL) POWD PACK 5 GM	113
GALCANEZUMAB-GNLM SUBCUTANEOUS SOLN PREFILLED SYR 100 MG/ML	70	GLECAPREVIR-PIBRENTASVIR PELLET PACK 50-20 MG	17	GLUTARAL SOLN 25%	190
GALCANEZUMAB-GNLM SUBCUTANEOUS SOLN PREFILLED SYR 120 MG/ML	70	GLECAPREVIR-PIBRENTASVIR TAB 100- 40 MG	17	GLYBURIDE-METFORMIN TAB 1.25-250 MG	36
GANAXOLONE SUSP 50 MG/ML	31	GLIMEPIRIDE TAB 1 MG	35	GLYBURIDE-METFORMIN TAB 2.5-500 MG	36
GANCICLOVIR OPTH GEL 0.15%	225	GLIMEPIRIDE TAB 2 MG	35	GLYBURIDE-METFORMIN TAB 5-500 MG	36
GANIRELIX ACETATE SOLN PREFILLED SYRINGE 250 MCG/0.5ML	166	GLIMEPIRIDE TAB 4 MG	35	GLYBURIDE MICRONIZED TAB 1.5 MG	36
		GLIPIZIDE-METFORMIN HCL TAB 2.5- 250 MG	35	GLYBURIDE MICRONIZED TAB 3 MG	36
		GLIPIZIDE-METFORMIN HCL TAB 2.5- 250 MG	35	GLYBURIDE MICRONIZED TAB 6 MG	36
				GLYBURIDE POWDER	190

GLYBURIDE TAB 1.25 MG.....	36	GUANFACINE HCL TAB ER 24HR 3 MG (BASE EQUIV).....	58	HEPARIN SODIUM (PORCINE) LOCK FLUSH IV SOLN 10 UNIT/ML	191
GLYBURIDE TAB 2.5 MG.....	36	GUANFACINE HCL TAB ER 24HR 4 MG (BASE EQUIV).....	58	HEPARIN SODIUM (PORCINE) LOCK FLUSH IV SOLN 100 UNIT/ML.....	191
GLYBURIDE TAB 5 MG.....	36	GUSELKUMAB SOLN AUTO-INJECTOR 100 MG/ML	92	HEPARIN SODIUM (PORCINE) LOCK FLUSH PF IV SOLN 10 UNIT/ML	191
GLYCERIN LIQUID	190	GUSELKUMAB SOLN AUTO-INJECTOR 200 MG/2ML	92	HEPARIN SODIUM (PORCINE) LOCK FLUSH PF IV SOLN 100 UNIT/ML.....	191
GLYCERIN LIQUID	190	GUSELKUMAB SOLN PEN-INJECTOR 100 MG/ML.....	92	HEPARIN SODIUM (PORCINE) PF INJ 1000 UNIT/ML	29
GLYCERIN LIQUID	190	GUSELKUMAB SOLN PREFILLED SYRINGE 100 MG/ML	92	HEPARIN SODIUM (PORCINE) PF INJ 1000 UNIT/ML	29
GLYCERIN TOPICAL LIQUID	93	GUSELKUMAB SOLN PREFILLED SYRINGE 200 MG/2ML.....	92	HEPARIN SODIUM (PORCINE) PF INJ 5000 UNIT/0.5ML.....	30
GLYCEROL PHENYLBUTYRATE LIQUID 1.1 GM/ML.....	137	HAEMOPHILUS B POLYSACCHARIDE CONJUGATE VACCINE FOR INJ.....	262	HEPARIN SODIUM (PORCINE) PF INJ 5000 UNIT/ML	30
GLYCOPYRROLATE-FORMOTEROL FUMARATE AEROSOL 9-4.8 MCG/ACT	242	HAEMOPHILUS B POLYSACCHARIDE CONJUGATE VAC FOR INJ 10 MCG.....	263	HEPATITIS A VACCINE INJ SUSP 25 UNIT/0.5ML.....	265
GLYCOPYRROLATE ORAL SOLN 1 MG/5ML	50	HAEMOPHILUS B POLYSACCHARIDE CONJ VAC IM SUSP 7.5 MCG/0.5 ML	264	HEPATITIS A VACCINE INJ SUSP 50 UNIT/ML	265
GLYCOPYRROLATE ORAL SOLN 1 MG/5ML	50	HALCINONIDE CREAM 0.1%.....	157	HEPATITIS A VACCINE SUSP PREFILLED SYR 25 UNIT/0.5ML	265
GLYCOPYRROLATE TAB 1 MG	50	HALCINONIDE OINT 0.1%.....	157	HEPATITIS A VACCINE SUSP PREFILLED SYR 50 UNIT/ML	265
GLYCOPYRROLATE TAB 2 MG	50	HALOBETASOL PROPIONATE CREAM 0.05%	157	HEPATITIS A VACCINE SUSP PREFILLED SYR 720 EL UNIT/0.5ML.....	263
GOLIMUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 50 MG/0.5ML.....	171	HALOBETASOL PROPIONATE LOTION 0.01%	155	HEPATITIS A VACCINE SUSP PREFILLED SYR 1440 EL UNIT/ML.....	263
GOLIMUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 100 MG/ML	171	HALOPERIDOL LACTATE ORAL CONC 2 MG/ML.....	6	HEPATITIS B VACCINE 3-ANTIGEN (RECOMBINANT) SUSP 10 MCG/ML	264
GOLIMUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 50 MG/0.5ML.....	171	HALOPERIDOL TAB 0.5 MG.....	6	HEPATITIS B VACCINE RECOMB ADJUVANTED PREF SYR 20 MCG/0.5ML	263
GOLIMUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 100 MG/ML.....	171	HALOPERIDOL TAB 1 MG.....	6	HEPATITIS B VACCINE (RECOMBINANT) SUSP 5 MCG/0.5ML	264
GRANISETRON HCL TAB 1 MG.....	118	HALOPERIDOL TAB 2 MG.....	6	HEPATITIS B VACCINE (RECOMBINANT) SUSP 10 MCG/ML	264
GRASS MIXED POLLEN EXT SL TAB 100 IR (INDEX OF REACTIVITY)	243	HALOPERIDOL TAB 5 MG.....	6	HEPATITIS B VACCINE (RECOMBINANT) SUSP 20 MCG/ML.....	263
GRASS MIXED POLLEN EXT SL TAB 300 IR (INDEX OF REACTIVITY)	243	HALOPERIDOL TAB 10 MG	6	HEPATITIS B VACCINE (RECOMBINANT) SUSP 40 MCG/ML.....	264
GRASS MIXED POLLEN EXT SL TAB 300 IR (INDEX OF REACTIVITY)	243	HALOPERIDOL TAB 20 MG	6	HEPATITIS B VACCINE (RECOMBINANT) SUSP PREF SYR 5 MCG/0.5ML.....	264
GRISEOFULVIN MICROSIZE SUSP 125 MG/5ML	40	*HC LOT 2% & SAL ACID-SULFUR SHAMPOO 2-2% & SHAMPOO KIT***	94	HEPATITIS B VACCINE (RECOMBINANT) SUSP PREF SYR 10 MCG/0.5ML	263
GRISEOFULVIN MICROSIZE TAB 500 MG... ..	40	HEP A-HEP B VACCINE SUSP PREF SYR 720-20 ELU-MCG/ML	265	HEPATITIS B VACCINE (RECOMBINANT) SUSP PREF SYR 10 MCG/ML.....	264
GRISEOFULVIN ULTRAMICROSIZE TAB 125 MG.....	40	HEPARIN SODIUM (PORCINE) INJ 1000 UNIT/ML	29	HEPATITIS B VACCINE (RECOMBINANT) SUSP PREF SYR 20 MCG/ML	263
GRISEOFULVIN ULTRAMICROSIZE TAB 250 MG.....	40	HEPARIN SODIUM (PORCINE) INJ 1000 UNIT/ML	29	HEPATITIS B VACCINE (RECOMBINANT) SUSP PREF SYR 5 MCG/0.5ML.....	264
GUAIFENESIN-CODEINE SOLN 100-10 MG/5ML	242	HEPARIN SODIUM (PORCINE) INJ 1000 UNIT/ML.....	30	HEPATITIS B VACCINE (RECOMBINANT) SUSP PREF SYR 10 MCG/0.5ML	263
GUAIFENESIN-CODEINE SOLN 100-10 MG/5ML	243	HEPARIN SODIUM (PORCINE) INJ 5000 UNIT/ML.....	30	HEPATITIS B VACCINE (RECOMBINANT) SUSP PREF SYR 10 MCG/ML.....	264
GUAIFENESIN-CODEINE SOLN 100-10 MG/5ML	243	HEPARIN SODIUM (PORCINE) INJ 5000 UNIT/ML.....	30	HEPATITIS B VACCINE (RECOMBINANT) SUSP PREF SYR 20 MCG/ML	263
GUAIFENESIN-CODEINE SOLN 100-10 MG/5ML	243	HEPARIN SODIUM (PORCINE) INJ 10000 UNIT/ML	29	*HORMONE CREAM BASE NIOSOMES**	191
GUAIFENESIN-CODEINE SOLN 100-10 MG/5ML	243	HEPARIN SODIUM (PORCINE) INJ 20000 UNIT/ML	29	*HORMONE CREAM BASE NIOSOMES**	191
GUAIFENESIN-CODEINE SOLN 100-10 MG/5ML	243	HEPARIN SODIUM (PORCINE) INJ SOLN PREF SYR 5000 UNIT/0.5ML	30	HUMAN PAPILLOMAVIRUS (HPV) 9-VALENT RECOMB VAC IM SUSP	263
GUANFACINE HCL TAB 1 MG	11			HUMAN PAPILLOMAVIRUS (HPV) 9-VALENT RECOMB VAC SUSP PREF SYR.....	263
GUANFACINE HCL TAB 2 MG	11			HYDRALAZINE HCL TAB 10 MG	265
GUANFACINE HCL TAB ER 24HR 1 MG (BASE EQUIV).....	58			HYDRALAZINE HCL TAB 25 MG	265
GUANFACINE HCL TAB ER 24HR 2 MG (BASE EQUIV).....	58			HYDRALAZINE HCL TAB 50 MG	265

HYDRALAZINE HCL TAB 100 MG	265	HYDROCODONE BITARTRATE TAB ER		HYDROCORTISONE ENEMA 100 MG/60ML	142
HYDROCHLOROTHIAZIDE CAP 12.5 MG ...	103	24HR DETER 120 MG	227	HYDROCORTISONE LOTION 2.5%.....	157
HYDROCHLOROTHIAZIDE FOR SUSP 10		HYDROCODONE-IBUPROFEN TAB 5-200		HYDROCORTISONE OINT 1%.....	157
MG/ML.....	103	MG.....	231	HYDROCORTISONE OINT 2.5%.....	157
HYDROCHLOROTHIAZIDE TAB 12.5 MG ...	103	HYDROCODONE-IBUPROFEN TAB 7.5-		HYDROCORTISONE ORAL SOLN 1 MG/ML .	157
HYDROCHLOROTHIAZIDE TAB 25 MG.....	103	200 MG	231	HYDROCORTISONE PERIANAL CREAM	
HYDROCHLOROTHIAZIDE TAB 50 MG	103	HYDROCODONE-IBUPROFEN TAB 10-200		2.5%.....	142
HYDROCODONE-ACETAMINOPHEN		MG.....	231	HYDROCORTISONE PERIANAL CREAM	
SOLN 7.5-325 MG/15ML.....	230	HYDROCOD POLST-CHLORPHEN POLST		2.5%.....	143
HYDROCODONE-ACETAMINOPHEN		ER SUSP 10-8 MG/5ML	243	HYDROCORTISONE PERIANAL CREAM	
SOLN 10-300 MG/15ML.....	230	HYDROCORTISONE ACETATE CREAM 2.5% 157		2.5%.....	143
HYDROCODONE-ACETAMINOPHEN		HYDROCORTISONE ACETATE CREAM 2.5% 158		HYDROCORTISONE PERIANAL CREAM	
SOLN 10-325 MG/15ML	230	HYDROCORTISONE ACETATE LOTION 2% .158		2.5%.....	143
HYDROCODONE-ACETAMINOPHEN TAB		HYDROCORTISONE ACETATE PERIANAL		HYDROCORTISONE PERIANAL CREAM	
2.5-325 MG.....	231	FOAM 10% (90 MG/DOSE)	142	2.5%.....	143
HYDROCODONE-ACETAMINOPHEN TAB		HYDROCORTISONE ACETATE SUPPOS 25		HYDROCORTISONE PERIANAL CREAM	
5-300 MG	231	MG.....	142	2.5%.....	143
HYDROCODONE-ACETAMINOPHEN TAB		HYDROCORTISONE ACETATE SUPPOS 25		HYDROCORTISONE-PRAMOXINE-	
5-325 MG.....	231	MG.....	142	CHLOROXYLENOL LOT 10-10-1MG/ML.....	88
HYDROCODONE-ACETAMINOPHEN TAB		HYDROCORTISONE ACETATE SUPPOS 25		HYDROCORTISONE PROBUTATE CREAM	
7.5-300 MG.....	231	MG.....	142	0.1%.....	158
HYDROCODONE-ACETAMINOPHEN TAB		HYDROCORTISONE ACETATE SUPPOS 25		HYDROCORTISONE SOLN 2.5%	159
7.5-325 MG	231	MG.....	142	HYDROCORTISONE TAB 5 MG	155
HYDROCODONE-ACETAMINOPHEN TAB		HYDROCORTISONE ACETATE SUPPOS 25		HYDROCORTISONE TAB 5 MG	157
7.5-325 MG	231	MG.....	143	HYDROCORTISONE TAB 10 MG	155
HYDROCODONE-ACETAMINOPHEN TAB		HYDROCORTISONE ACETATE SUPPOS 30		HYDROCORTISONE TAB 10 MG	157
10-300 MG	231	MG.....	142	HYDROCORTISONE TAB 20 MG	155
HYDROCODONE-ACETAMINOPHEN TAB		HYDROCORTISONE ACETATE SUPPOS 30		HYDROCORTISONE TAB 20 MG	157
10-325 MG	231	MG.....	143	HYDROCORTISONE VALERATE CREAM	
HYDROCODONE BITART-HOMATROPINE		HYDROCORTISONE ACETATE SUPPOS 30		0.2%.....	157
METHYLBROMIDE TAB 5-1.5 MG	243	MG.....	143	HYDROCORTISONE VALERATE OINT 0.2% .157	
HYDROCODONE BITART-HOMATROPINE		HYDROCORTISONE ACETATE W/		HYDROCORTISONE W/ ACETIC ACID	
METHYLBROM SOLN 5-1.5 MG/5ML.....	243	PRAMOXINE PERIANAL CREAM 1-1%.....	142	OTIC SOLN 1-2%	234
HYDROCODONE BITART-HOMATROPINE		HYDROCORTISONE ACETATE W/		HYDROMORPHONE HCL LIQD 1 MG/ML ...	231
METHYLBROM SOLN 5-1.5 MG/5ML.....	243	PRAMOXINE PERIANAL CREAM 1-1%.....	142	HYDROMORPHONE HCL SUPPOS 3 MG	231
HYDROCODONE BITARTRATE CAP ER		HYDROCORTISONE ACETATE W/		HYDROMORPHONE HCL TAB 2 MG	231
12HR 10 MG	227	PRAMOXINE PERIANAL CREAM 1-1%.....	142	HYDROMORPHONE HCL TAB 4 MG.....	231
HYDROCODONE BITARTRATE CAP ER		HYDROCORTISONE ACETATE W/		HYDROMORPHONE HCL TAB 8 MG.....	231
12HR 15 MG	227	PRAMOXINE PERIANAL CREAM 2.5-1%	86	HYDROMORPHONE HCL TAB ER 24HR 8 MG	227
HYDROCODONE BITARTRATE CAP ER		HYDROCORTISONE ACETATE W/		HYDROMORPHONE HCL TAB ER 24HR 12	
12HR 20 MG	227	PRAMOXINE PERIANAL CREAM 2.5-1%	86	MG	227
HYDROCODONE BITARTRATE CAP ER		HYDROCORTISONE ACETATE W/		HYDROMORPHONE HCL TAB ER 24HR 16	
12HR 30 MG	227	PRAMOXINE PERIANAL CREAM 2.5-1%	89	MG	227
HYDROCODONE BITARTRATE CAP ER		HYDROCORTISONE ACETATE W/		HYDROMORPHONE HCL TAB ER 24HR 32	
12HR 40 MG.....	227	PRAMOXINE PERIANAL FOAM 1-1%.....	143	MG	227
HYDROCODONE BITARTRATE CAP ER		HYDROCORTISONE ACETATE W/		HYDROXYCHLOROQUINE SULFATE TAB	
12HR 50 MG.....	227	PRAMOXINE PERIANAL LOTN 2.5-1%	142	100 MG.....	49
HYDROCODONE BITARTRATE TAB ER		HYDROCORTISONE ACETATE W/		HYDROXYCHLOROQUINE SULFATE TAB	
24HR DETER 20 MG	227	PRAMOXINE PERIANAL LOTN 2.5-1%	142	200 MG	49
HYDROCODONE BITARTRATE TAB ER		HYDROCORTISONE ACET W/		HYDROXYCHLOROQUINE SULFATE TAB	
24HR DETER 30 MG	227	PRAMOXINE PERIANAL CREAM 1.85-1.15% .90		300 MG	49
HYDROCODONE BITARTRATE TAB ER		HYDROCORTISONE BUTYRATE CREAM		HYDROXYCHLOROQUINE SULFATE TAB	
24HR DETER 40 MG	227	0.1%.....	157	400 MG	49
HYDROCODONE BITARTRATE TAB ER		HYDROCORTISONE BUTYRATE		HYDROXYUREA (BULK) POWDER	191
24HR DETER 60 MG	227	HYDROPHILIC LIPO BASE CREAM 0.1%....	157	HYDROXYUREA CAP 200 MG.....	45
HYDROCODONE BITARTRATE TAB ER		HYDROCORTISONE BUTYRATE OINT 0.1% .157		HYDROXYUREA CAP 300 MG.....	45
24HR DETER 80 MG	227	HYDROCORTISONE BUTYRATE SOLN 0.1% 157		HYDROXYUREA CAP 400 MG.....	45
HYDROCODONE BITARTRATE TAB ER		HYDROCORTISONE CREAM 2.5%	157	HYDROXYUREA CAP 500 MG.....	45
24HR DETER 100 MG	227	HYDROCORTISONE ENEMA 100 MG/60ML 142			

HYDROXYUREA ORAL SOLN 100 MG/ML.....	45	ILOPERIDONE TAB 1 MG & 2 MG & 4 MG & 6 MG TITRATION PAK.....	8	*INFANT FOODS LIQUID**.....	188
HYDROXYZINE HCL SYRUP 10 MG/5ML.....	53	ILOPERIDONE TAB 1 MG & 2 MG & 6 MG & 8 MG TITRATION PAK.....	8	*INFANT FOODS LIQUID**.....	188
HYDROXYZINE HCL SYRUP 10 MG/5ML.....	53	ILOPERIDONE TAB 1 MG & 2 MG & 6 MG TITRATION PAK.....	8	*INFANT FOODS LIQUID**.....	188
HYDROXYZINE HCL SYRUP 10 MG/5ML.....	53	ILOPERIDONE TAB 1 MG & 2 MG & 6 MG TITRATION PAK.....	8	*INFANT FOODS LIQUID**.....	188
HYDROXYZINE HCL TAB 10 MG.....	53	ILOPERIDONE TAB 2 MG.....	8	*INFANT FOODS LIQUID**.....	188
HYDROXYZINE HCL TAB 25 MG.....	53	ILOPERIDONE TAB 4 MG.....	8	*INFANT FOODS LIQUID**.....	188
HYDROXYZINE HCL TAB 50 MG.....	53	ILOPERIDONE TAB 6 MG.....	8	*INFANT FOODS LIQUID**.....	188
HYDROXYZINE PAMOATE CAP 25 MG.....	39	ILOPERIDONE TAB 8 MG.....	8	*INFANT FOODS LIQUID**.....	189
HYDROXYZINE PAMOATE CAP 50 MG.....	39	ILOPERIDONE TAB 10 MG.....	8	*INFANT FOODS LIQUID**.....	189
HYDROXYZINE PAMOATE CAP 100 MG.....	39	ILOPERIDONE TAB 12 MG.....	8	*INFANT FOODS LIQUID**.....	189
HYOSCYAMINE SULFATE ELIXIR 0.125 MG/5ML.....	50	ILOPROST INHALATION SOLUTION 10 MCG/ML.....	240	*INFANT FOODS LIQUID**.....	190
HYOSCYAMINE SULFATE ELIXIR 0.125 MG/5ML.....	51	ILOPROST INHALATION SOLUTION 20 MCG/ML.....	240	*INFANT FOODS LIQUID**.....	190
HYOSCYAMINE SULFATE SL TAB 0.125 MG..	50	IMATINIB MESYLATE ORAL SOLN 80 MG/ML (BASE EQUIVALENT).....	210	*INFANT FOODS LIQUID**.....	190
HYOSCYAMINE SULFATE SL TAB 0.125 MG..	51	IMATINIB MESYLATE TAB 100 MG (BASE EQUIVALENT).....	210	*INFANT FOODS LIQUID**.....	191
HYOSCYAMINE SULFATE SL TAB 0.125 MG..	51	IMATINIB MESYLATE TAB 400 MG (BASE EQUIVALENT).....	210	*INFANT FOODS LIQUID**.....	195
HYOSCYAMINE SULFATE SOLN 0.125 MG/ML.....	50	IMIPRAMINE HCL TAB 10 MG.....	261	*INFANT FOODS LIQUID**.....	201
HYOSCYAMINE SULFATE SOLN 0.125 MG/ML.....	51	IMIPRAMINE HCL TAB 25 MG.....	261	*INFANT FOODS LIQUID**.....	203
HYOSCYAMINE SULFATE TAB 0.125 MG.....	51	IMIPRAMINE HCL TAB 50 MG.....	261	*INFANT FOODS LIQUID**.....	204
HYOSCYAMINE SULFATE TAB 0.125 MG.....	51	IMIPRAMINE PAMOATE CAP 75 MG.....	261	*INFANT FOODS LIQUID**.....	204
HYOSCYAMINE SULFATE TAB 0.125 MG.....	51	IMIPRAMINE PAMOATE CAP 100 MG.....	261	*INFANT FOODS LIQUID**.....	204
HYOSCYAMINE SULFATE TAB DISINT 0.125 MG.....	50	IMIPRAMINE PAMOATE CAP 125 MG.....	261	*INFANT FOODS LIQUID**.....	204
HYOSCYAMINE SULFATE TAB DISINT 0.125 MG.....	51	IMIPRAMINE PAMOATE CAP 150 MG.....	261	*INFANT FOODS PACKET**.....	188
HYOSCYAMINE SULFATE TAB DISINT 0.125 MG.....	51	IMIQUIMOD CREAM 5%.....	89	*INFANT FOODS POWDER**.....	186
HYOSCYAMINE SULFATE TAB ER 12HR 0.375 MG.....	51	IMLUNESTRANT TOSYLATE TAB 200 MG....	45	*INFANT FOODS POWDER**.....	186
HYOSCYAMINE SULFATE TAB ER 12HR 0.375 MG.....	51	INAVOLISIB TAB 3 MG.....	46	*INFANT FOODS POWDER**.....	186
HYOSCYAMINE SULFATE TAB ER 12HR 0.375 MG.....	51	INAVOLISIB TAB 9 MG.....	46	*INFANT FOODS POWDER**.....	187
HYOSCYAMINE SULFATE TAB ER 12HR 0.375 MG.....	51	INDAPAMIDE TAB 1.25 MG.....	103	*INFANT FOODS POWDER**.....	188
HYPODERMIC NEEDLES (DISPOSABLE) ...	101	INDAPAMIDE TAB 2.5 MG.....	103	*INFANT FOODS POWDER**.....	188
IBANDRONATE SODIUM TAB 150 MG (BASE EQUIVALENT).....	181	INDOMETHACIN CAP 25 MG.....	218	*INFANT FOODS POWDER**.....	188
IBREXAFUNGERP CITRATE TAB 150 MG ...	183	INDOMETHACIN CAP 50 MG.....	218	*INFANT FOODS POWDER**.....	188
IBRUTINIB CAP 70 MG.....	210	INDOMETHACIN CAP ER 75 MG.....	218	*INFANT FOODS POWDER**.....	188
IBRUTINIB CAP 140 MG.....	210	INDOMETHACIN SUPPOS 50 MG.....	218	*INFANT FOODS POWDER**.....	188
IBRUTINIB ORAL SUSP 70 MG/ML.....	210	INDOMETHACIN SUSP 25 MG/5ML.....	218	*INFANT FOODS POWDER**.....	188
IBRUTINIB TAB 420 MG.....	210	*INFANT FOODS CONC**.....	188	*INFANT FOODS POWDER**.....	188
IBUPROFEN TAB 200 MG.....	218	*INFANT FOODS CONC**.....	188	*INFANT FOODS POWDER**.....	188
IBUPROFEN TAB 400 MG.....	218	*INFANT FOODS CONC**.....	188	*INFANT FOODS POWDER**.....	188
IBUPROFEN TAB 400 MG.....	218	*INFANT FOODS CONC**.....	189	*INFANT FOODS POWDER**.....	189
IBUPROFEN TAB 600 MG.....	218	*INFANT FOODS CONC**.....	190	*INFANT FOODS POWDER**.....	189
IBUPROFEN TAB 600 MG.....	218	*INFANT FOODS CONC**.....	190	*INFANT FOODS POWDER**.....	189
IBUPROFEN TAB 800 MG.....	218	*INFANT FOODS CONC**.....	190	*INFANT FOODS POWDER**.....	189
IBUPROFEN TAB 800 MG.....	218	*INFANT FOODS CONC**.....	191	*INFANT FOODS POWDER**.....	190
ICATIBANT ACETATE SUBCUTANEOUS SOLN PREF SYR 30 MG/3ML.....	14	*INFANT FOODS LIQUID**.....	188	*INFANT FOODS POWDER**.....	190
IDELALISIB TAB 100 MG.....	213	*INFANT FOODS LIQUID**.....	188	*INFANT FOODS POWDER**.....	190
IDELALISIB TAB 150 MG.....	119	*INFANT FOODS LIQUID**.....	188	*INFANT FOODS POWDER**.....	190
ILOPERIDONE TAB 1 MG.....	8	*INFANT FOODS LIQUID**.....	188	*INFANT FOODS POWDER**.....	191

INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	101	INSULIN PEN NEEDLE 32 G X 8 MM (1/3" OR 5/16")	202	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 29 X 1/2"	192
INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	101	INSULIN PEN NEEDLE 33 G X 4 MM (1/6" OR 5/32")	182	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 30 X 1/2"	192
INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	101	INSULIN PEN NEEDLE 33 G X 4 MM (1/6" OR 5/32")	185	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 30 X 1/2"	194
INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32")	101	INSULIN PEN NEEDLE 33 G X 4 MM (1/6" OR 5/32")	199	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 30 X 5/16"	192
INSULIN PEN NEEDLE 32 G X 5 MM (1/5" OR 3/16")	95	INSULIN PEN NEEDLE 33 G X 4 MM (1/6" OR 5/32")	199	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 1/2"	187
INSULIN PEN NEEDLE 32 G X 5 MM (1/5" OR 3/16")	95	INSULIN PEN NEEDLE 33 G X 4 MM (1/6" OR 5/32")	199	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16"	187
INSULIN PEN NEEDLE 32 G X 5 MM (1/5" OR 3/16")	95	INSULIN PEN NEEDLE 33 G X 4 MM (1/6" OR 5/32")	202	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16"	192
INSULIN PEN NEEDLE 32 G X 5 MM (1/5" OR 3/16")	96	INSULIN PEN NEEDLE 33 G X 5 MM (1/5" OR 3/16")	182	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16"	193
INSULIN PEN NEEDLE 32 G X 5 MM (1/5" OR 3/16")	99	INSULIN PEN NEEDLE 33 G X 5 MM (1/5" OR 3/16")	185	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16"	194
INSULIN PEN NEEDLE 32 G X 5 MM (1/5" OR 3/16")	99	INSULIN PEN NEEDLE 33 G X 5 MM (1/5" OR 3/16")	199	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16"	194
INSULIN PEN NEEDLE 32 G X 5 MM (1/5" OR 3/16")	100	INSULIN PEN NEEDLE 33 G X 5 MM (1/5" OR 3/16")	202	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16"	204
INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	95	INSULIN PEN NEEDLE 33 G X 6 MM (1/4" OR 15/64")	182	INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 15/64"	192
INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	95	INSULIN PEN NEEDLE 33 G X 6 MM (1/4" OR 15/64")	185	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 27 X 1/2"	193
INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	95	INSULIN PEN NEEDLE 33 G X 6 MM (1/4" OR 15/64")	199	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 27 X 1/2"	196
INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	96	INSULIN PEN NEEDLE 33 G X 6 MM (1/4" OR 15/64")	202	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 28 X 1/2"	193
INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	97	INSULIN PEN NEEDLE 33 G X 8 MM (1/3" OR 5/16")	202	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 28 X 1/2"	194
INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	98	INSULIN PEN NEEDLE 34 G X 3.5 MM (9/64")	187	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 29 X 1/2"	193
INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	98	INSULIN REGULAR (HUMAN)		INSULIN SYRINGE/NEEDLE U-100 1/2 ML 29 X 1/2"	194
INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	99	INHALATION POWDER 4 UNIT/CARTRIDGE	174	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 29 X 1/2"	194
INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	99	INSULIN REGULAR (HUMAN)		INSULIN SYRINGE/NEEDLE U-100 1/2 ML 29 X 1/2"	203
INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	99	INHALATION POWDER 8 UNIT/CARTRIDGE	174	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 29 X 5/16"	193
INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	99	INSULIN REGULAR (HUMAN)		INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 1/2"	193
INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	100	INHALATION POWDER 12 UNIT/CARTRIDGE	173	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 5/16"	193
INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	101	INSULIN REGULAR (HUMAN) INHAL POWD 90 X 4 UNIT & 90 X 8 UNIT	173	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 5/16"	193
INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64")	101	INSULIN REGULAR (HUMAN) INH POWD 60X4 & 60X8 & 60X12 UT/CART	173	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 5/16"	194
INSULIN PEN NEEDLE 32 G X 8 MM (1/3" OR 5/16")	182	INSULIN REGULAR (HUMAN) INH POWD 90 X 8 UNIT & 90 X 12 UNIT	174	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 5/16"	201
INSULIN PEN NEEDLE 32 G X 8 MM (1/3" OR 5/16")	185	INSULIN REGULAR (HUMAN) INJ 100 UNIT/ML	174	INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16"	193
INSULIN PEN NEEDLE 32 G X 8 MM (1/3" OR 5/16")	199	INSULIN REGULAR (HUMAN) INJ 500 UNIT/ML	174		
		INSULIN REGULAR (HUMAN) IN NACL 0.9% IV SOLN 100 UNIT/100ML	175		
		INSULIN REGULAR (HUMAN) SOLN PEN-INJECTOR 100 UNIT/ML	175		
		INSULIN REGULAR (HUMAN) SOLN PEN-INJECTOR 500 UNIT/ML	174		

INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16"	193	INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 5/16"	193	ISAVUCONAZONIUM SULFATE CAP 186 MG 40	
INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16"	194	INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 5/16"	194	ISOCARBOXAZID TAB 10 MG	213
INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16"	194	INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 5/16"	194	ISOFLURANE INHAL SOLN	190
INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16"	201	INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 5/16"	201	ISOFLURANE INHAL SOLN	195
INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16"	204	INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 5/16"	204	ISOFLURANE INHAL SOLN	205
INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 15/64"	193	INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 15/64"	193	ISOLEUCINE ORAL POWDER PACKET 1 GM 112	
INSULIN SYRINGE/NEEDLE U-100 1 ML 27 X 1/2"	193	INSULIN SYRINGE/NEEDLE U-100 1 ML 32 X 5/16"	193	ISOLEUCINE ORAL POWDER PACKET 50	
INSULIN SYRINGE/NEEDLE U-100 1 ML 27 X 1/2"	193	INSULIN SYRINGE/NEEDLE U-500 0.5 ML 31G X 6MM (15/64")	192	MG	112
INSULIN SYRINGE/NEEDLE U-100 1 ML 27 X 1/2"	196	INSULIN SYRINGE/NEEDLE U-500 0.5 ML 31G X 6MM (15/64")	192	ISONIAZID SYRUP 50 MG/5ML	52
INSULIN SYRINGE/NEEDLE U-100 1 ML 27 X 5/8"	193	INTERFERON ALFA-N3 INJ 5000000 UNIT/ML	172	ISONIAZID TAB 100 MG	52
INSULIN SYRINGE/NEEDLE U-100 1 ML 28 X 1/2"	193	INTERFERON BETA-1A IM AUTO- INJECTOR KIT 30 MCG/0.5ML	215	ISONIAZID TAB 300 MG	52
INSULIN SYRINGE/NEEDLE U-100 1 ML 28 X 1/2"	194	INTERFERON BETA-1A IM PREFILLED SYRINGE KIT 30 MCG/0.5ML	215	ISOSORBIDE DINITRATE-HYDRALAZINE	
INSULIN SYRINGE/NEEDLE U-100 1 ML 28 X 1/2"	194	INTERFERON BETA-1B FOR INJ KIT 0.3 MG	215	HCL TAB 20-37.5 MG	78
INSULIN SYRINGE/NEEDLE U-100 1 ML 28 X 5/16"	193	INTERFERON GAMMA-1B INJ 100 MCG/0.5ML (2000000 UNIT/0.5ML)	172	ISOSORBIDE DINITRATE TAB 5 MG	265
INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 1/2"	193	*IODINE SOLUTION**	26	ISOSORBIDE DINITRATE TAB 10 MG	265
INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 1/2"	194	IODINE SOLUTION STRONG 5% (LUGOL'S)	194	ISOSORBIDE DINITRATE TAB 20 MG	265
INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 1/2"	194	IODINE SOLUTION STRONG (LUGOL'S) (BULK)	195	ISOSORBIDE DINITRATE TAB 30 MG	265
INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 1/2"	194	IODINE SOLUTION STRONG (LUGOL'S) (BULK)	196	ISOSORBIDE MONONITRATE TAB 10 MG ..	265
INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 1/2"	203	*IODINE TINCTURE**	26	ISOSORBIDE MONONITRATE TAB 20 MG ..	266
INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 5/16"	181	IDOQUINOL-HC CREAM 1-1%	40	ISOSORBIDE MONONITRATE TAB ER	
INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 5/16"	193	IPRATROPIUM-ALBUTEROL INHAL AEROSOL SOLN 20-100 MCG/ACT	242	24HR 30 MG	266
INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 1/2"	193	IPRATROPIUM-ALBUTEROL NEBU SOLN 0.5-2.5(3) MG/3ML	243	ISOSORBIDE MONONITRATE TAB ER	
INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 1/2"	194	IPRATROPIUM BROMIDE HFA INHAL AEROSOL 17 MCG/ACT	68	24HR 60 MG	266
INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 1/2"	194	IPRATROPIUM BROMIDE INHAL SOLN 0.02%	68	ISOSORBIDE MONONITRATE TAB ER	
INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 5/16"	193	IPRATROPIUM BROMIDE NASAL SOLN 0.03% (21 MCG/SPRAY)	68	24HR 120 MG	266
INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 5/16"	194	IPRATROPIUM BROMIDE NASAL SOLN 0.06% (42 MCG/SPRAY)	68	ISOTRETINOIN CAP 10 MG	85
INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 5/16"	194	IPTACOPAN HCL CAP 200 MG	13	ISOTRETINOIN CAP 10 MG	86
INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 5/16"	194	IRBESARTAN-HYDROCHLOROTHIAZIDE TAB 150-12.5 MG	78	ISOTRETINOIN CAP 10 MG	87
INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 5/16"	194	IRBESARTAN-HYDROCHLOROTHIAZIDE TAB 300-12.5 MG	78	ISOTRETINOIN CAP 10 MG	89
INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 5/16"	194	IRBESARTAN TAB 75 MG	14	ISOTRETINOIN CAP 10 MG	93
INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 5/16"	201	IRBESARTAN TAB 150 MG	14	ISOTRETINOIN CAP 20 MG	85
		IRBESARTAN TAB 300 MG	14	ISOTRETINOIN CAP 20 MG	86
		ISAVUCONAZONIUM SULFATE CAP 74.5 MG 40		ISOTRETINOIN CAP 20 MG	87
				ISOTRETINOIN CAP 20 MG	89
				ISOTRETINOIN CAP 20 MG	93
				ISOTRETINOIN CAP 20 MG	93
				ISOTRETINOIN CAP 30 MG	86
				ISOTRETINOIN CAP 30 MG	86
				ISOTRETINOIN CAP 30 MG	87
				ISOTRETINOIN CAP 30 MG	89
				ISOTRETINOIN CAP 30 MG	93
				ISOTRETINOIN CAP 40 MG	86
				ISOTRETINOIN CAP 40 MG	86
				ISOTRETINOIN CAP 40 MG	87
				ISOTRETINOIN CAP 40 MG	89
				ISOTRETINOIN CAP 40 MG	93
				ISRADIPINE CAP 2.5 MG	72
				ISRADIPINE CAP 5 MG	72
				ISTRADEFYLLINE TAB 20 MG	48
				ISTRADEFYLLINE TAB 40 MG	49
				ITRACONAZOLE CAP 100 MG	40
				ITRACONAZOLE CAP 100 MG	42
				ITRACONAZOLE ORAL SOLN 10 MG/ML	40
				ITRACONAZOLE ORAL SOLN 10 MG/ML	42
				IVABRADINE HCL ORAL SOLN 5 MG/5ML	
				(BASE EQUIV)	77

IVABRADINE HCL TAB 5 MG (BASE EQUIV) .77	LACOSAMIDE TAB 50 MG 254	LAMOTRIGINE TAB 25 MG 144
IVABRADINE HCL TAB 5 MG (BASE EQUIV) .78	LACOSAMIDE TAB 50 MG 255	LAMOTRIGINE TAB 25 MG 145
IVABRADINE HCL TAB 7.5 MG (BASE EQUIV)77	LACOSAMIDE TAB 100 MG 254	LAMOTRIGINE TAB 25 MG 145
IVABRADINE HCL TAB 7.5 MG (BASE EQUIV)78	LACOSAMIDE TAB 100 MG 255	LAMOTRIGINE TAB 25 MG (42) & 100 MG
IVACFTOR PACKET 5.8 MG 83	LACOSAMIDE TAB 150 MG 254	(7) STARTER KIT 143
IVACFTOR PACKET 13.4 MG 83	LACOSAMIDE TAB 150 MG 255	LAMOTRIGINE TAB 25 MG (42) & 100 MG
IVACFTOR PACKET 25 MG 83	LACOSAMIDE TAB 200 MG.....254	(7) STARTER KIT 144
IVACFTOR PACKET 50 MG 83	LACOSAMIDE TAB 200 MG.....255	LAMOTRIGINE TAB 25 MG (42) & 100 MG
IVACFTOR PACKET 75 MG 83	*LACTOBACILLUS CAP** 136	(7) STARTER KIT 145
IVACFTOR TAB 150 MG 243	LACTULOSE (ENCEPHALOPATHY)	LAMOTRIGINE TAB 35 X 25 MG STARTER
IVERMECTIN CREAM 1% 91	SOLUTION 10 GM/15ML 177	KIT 143
IVERMECTIN TAB 3 MG 16	LACTULOSE (ENCEPHALOPATHY)	LAMOTRIGINE TAB 35 X 25 MG STARTER
IVERMECTIN TAB 3 MG 16	SOLUTION 10 GM/15ML 177	KIT 144
IVERMECTIN TAB 6 MG 16	LACTULOSE (ENCEPHALOPATHY)	LAMOTRIGINE TAB 35 X 25 MG STARTER
IVOSIDENIB TAB 250 MG 212	SOLUTION 10 GM/15ML 177	KIT 145
IXAZOMIB CITRATE CAP 2.3 MG (BASE	LACTULOSE (ENCEPHALOPATHY)	LAMOTRIGINE TAB 84 X 25 MG & 14 X 100
EQUIVALENT).....47	SOLUTION 10 GM/15ML 178	MG STARTER KIT 143
IXAZOMIB CITRATE CAP 3 MG (BASE	LACTULOSE ORAL CRYSTAL PACKET 10	LAMOTRIGINE TAB 84 X 25 MG & 14 X 100
EQUIVALENT).....47	GM 177	MG STARTER KIT 144
IXAZOMIB CITRATE CAP 4 MG (BASE	LACTULOSE ORAL CRYSTAL PACKET 20	LAMOTRIGINE TAB 84 X 25 MG & 14 X 100
EQUIVALENT).....47	GM 177	MG STARTER KIT 145
KETOCONAZOLE CREAM 2%.....41	LACTULOSE ORAL CRYSTAL PACKET 20	LAMOTRIGINE TAB 100 MG 143
KETOCONAZOLE FOAM 2% 41	GM 178	LAMOTRIGINE TAB 100 MG 145
KETOCONAZOLE FOAM 2% 41	LACTULOSE SOLUTION 10 GM/15ML 177	LAMOTRIGINE TAB 100 MG 145
KETOCONAZOLE SHAMPOO 2%.....41	LACTULOSE SOLUTION 10 GM/15ML 178	LAMOTRIGINE TAB 150 MG 143
KETOCONAZOLE TAB 200 MG 41	LACTULOSE SOLUTION 10 GM/15ML 178	LAMOTRIGINE TAB 150 MG 145
KETONE BLOOD TEST STRIP.....97	LACTULOSE SOLUTION 10 GM/15ML 178	LAMOTRIGINE TAB 150 MG 145
KETONE BLOOD TEST STRIP.....99	LAMIVUDINE ORAL SOLN 10 MG/ML 20	LAMOTRIGINE TAB 200 MG.....143
KETOROLAC TROMETHAMINE NASAL	LAMIVUDINE ORAL SOLN 10 MG/ML 20	LAMOTRIGINE TAB 200 MG.....145
SPRAY 15.75 MG/SPRAY.....220	LAMIVUDINE TAB 100 MG (HBV).....17	LAMOTRIGINE TAB 200 MG.....145
KETOROLAC TROMETHAMINE OPHTH	LAMIVUDINE TAB 150 MG.....20	LAMOTRIGINE TAB CHEWABLE
SOLN 0.4% 221	LAMIVUDINE TAB 150 MG.....20	DISPERSIBLE 5 MG 143
KETOROLAC TROMETHAMINE OPHTH	LAMIVUDINE TAB 300 MG 20	LAMOTRIGINE TAB CHEWABLE
SOLN 0.4% 222	LAMIVUDINE TAB 300 MG 20	DISPERSIBLE 5 MG 144
KETOROLAC TROMETHAMINE OPHTH	LAMIVUDINE-TENOFOVIR DISOPROXIL	LAMOTRIGINE TAB CHEWABLE
SOLN 0.5% 221	FUMARATE TAB 300-300 MG.....19	DISPERSIBLE 25 MG 143
KETOROLAC TROMETHAMINE OPHTH	LAMIVUDINE-ZIDOVUDINE TAB 150-300	LAMOTRIGINE TAB CHEWABLE
SOLN 0.5% 222	MG 20	DISPERSIBLE 25 MG 144
KETOROLAC TROMETHAMINE (PF)	LAMOTRIGINE ORALLY	LAMOTRIGINE TAB DISINT 21 X 25 MG &
OPHTH SOLN 0.45%.....221	DISINTEGRATING TAB 25 MG 144	7 X 50 MG TITRATION KIT 144
KETOROLAC TROMETHAMINE TAB 10 MG .218	LAMOTRIGINE ORALLY	LAMOTRIGINE TAB DISINT 21 X 25 MG &
KRISGEL 100 GEL 195	DISINTEGRATING TAB 25 MG 145	7 X 50 MG TITRATION KIT 144
LABETALOL HCL TAB 100 MG 63	LAMOTRIGINE ORALLY	LAMOTRIGINE TAB DISINT 25 (14) & 50
LABETALOL HCL TAB 200 MG.....63	DISINTEGRATING TAB 50 MG.....144	MG (14) & 100 MG (7) KIT 144
LABETALOL HCL TAB 300 MG.....63	LAMOTRIGINE ORALLY	LAMOTRIGINE TAB DISINT 25 (14) & 50
LABETALOL HCL TAB 400 MG.....63	DISINTEGRATING TAB 50 MG.....145	MG (14) & 100 MG (7) KIT 144
LACOSAMIDE CAP ER 24HR 100 MG 254	LAMOTRIGINE ORALLY	LAMOTRIGINE TAB DISINT 42 X 50MG &
LACOSAMIDE CAP ER 24HR 150 MG.....254	DISINTEGRATING TAB 100 MG.....144	14 X 100MG TITRATION KIT.....144
LACOSAMIDE CAP ER 24HR 200 MG 254	LAMOTRIGINE ORALLY	LAMOTRIGINE TAB DISINT 42 X 50MG &
LACOSAMIDE ORAL SOLUTION 10 MG/ML 253	DISINTEGRATING TAB 100 MG.....144	14 X 100MG TITRATION KIT.....144
LACOSAMIDE ORAL SOLUTION 10 MG/ML 253	LAMOTRIGINE ORALLY	LAMOTRIGINE TAB ER 24HR 21 X 25 MG &
LACOSAMIDE ORAL SOLUTION 10 MG/ML 254	DISINTEGRATING TAB 100 MG.....145	7 X 50 MG TITRATION KIT 144
LACOSAMIDE ORAL SOLUTION 10 MG/ML 254	LAMOTRIGINE ORALLY	LAMOTRIGINE TAB ER 24HR 25 (14) & 50
LACOSAMIDE ORAL SOLUTION 10 MG/ML 254	DISINTEGRATING TAB 200 MG 144	MG (14) & 100 MG(7) KIT.....144
LACOSAMIDE ORAL SOLUTION 10 MG/ML 254	LAMOTRIGINE ORALLY	LAMOTRIGINE TAB ER 24HR 25 MG 144
LACOSAMIDE ORAL SOLUTION 10 MG/ML 255	DISINTEGRATING TAB 200 MG 145	LAMOTRIGINE TAB ER 24HR 25 MG 145

LAMOTRIGINE TAB ER 24HR 50 (14) & 100 MG(14) & 200 MG(7) KIT	144	*LANCETS***	97	*LANCETS***	101
LAMOTRIGINE TAB ER 24HR 50 MG	144	*LANCETS***	97	*LANCETS***	101
LAMOTRIGINE TAB ER 24HR 50 MG	145	*LANCETS***	97	*LANCETS***	101
LAMOTRIGINE TAB ER 24HR 100 MG	144	*LANCETS***	97	*LANCETS***	101
LAMOTRIGINE TAB ER 24HR 100 MG	145	*LANCETS***	97	*LANCETS***	101
LAMOTRIGINE TAB ER 24HR 200 MG.....	144	*LANCETS***	97	*LANCETS***	101
LAMOTRIGINE TAB ER 24HR 200 MG.....	145	*LANCETS***	97	*LANCETS***	101
LAMOTRIGINE TAB ER 24HR 250 MG	144	*LANCETS***	98	*LANCETS***	101
LAMOTRIGINE TAB ER 24HR 250 MG.....	145	*LANCETS***	98	*LANCETS***	101
LAMOTRIGINE TAB ER 24HR 300 MG.....	144	*LANCETS***	98	*LANCETS***	101
LAMOTRIGINE TAB ER 24HR 300 MG.....	145	*LANCETS***	98	*LANCETS***	101
LANADELUMAB-FLYO INJ 300 MG/2ML (150 MG/ML).....	14	*LANCETS***	98	*LANCETS KIT***	94
LANADELUMAB-FLYO SOLN PREF SYRINGE 150 MG/ML	173	*LANCETS***	98	*LANCETS KIT***	94
LANADELUMAB-FLYO SOLN PREF SYRINGE 300 MG/2ML (150 MG/ML)	173	*LANCETS***	98	*LANCETS MISC.***	101
*LANCET DEVICES***	101	*LANCETS***	98	*LANCETS MISC.***	102
*LANCET DEVICES***	101	*LANCETS***	98	*LANCETS MISC.***	102
*LANCET DEVICES***	101	*LANCETS***	98	LANOLIN ANHYDROUS OINTMENT	195
*LANCET DEVICES***	101	*LANCETS***	99	*LANSOPRAZOLE SUSP 3 MG/ML (COMPOUND KIT)**	238
*LANCET DEVICES***	101	*LANCETS***	99	LANSOPRAZOLE TAB DELAYED RELEASE ORALLY DISINTEGRATING 15 MG.....	238
*LANCET DEVICES***	101	*LANCETS***	99	LANSOPRAZOLE TAB DELAYED RELEASE ORALLY DISINTEGRATING 30 MG	238
*LANCET DEVICES***	102	*LANCETS***	99	LANTHANUM CARBONATE CHEW TAB 500 MG (ELEMENTAL)	235
*LANCET DEVICES***	102	*LANCETS***	99	LANTHANUM CARBONATE CHEW TAB 750 MG (ELEMENTAL)	235
*LANCET DEVICES***	102	*LANCETS***	100	LANTHANUM CARBONATE CHEW TAB 1000 MG (ELEMENTAL)	235
*LANCET DEVICES***	102	*LANCETS***	100	LANTHANUM CARBONATE ORAL POWDER PACK 750 MG (ELEMENTAL).....	235
*LANCETS***	95	*LANCETS***	100	LANTHANUM CARBONATE ORAL POWDER PACK 1000 MG (ELEMENTAL) ...	235
*LANCETS***	95	*LANCETS***	100	LAPATINIB DITOSYLATE TAB 250 MG (BASE EQUIV).....	210
*LANCETS***	95	*LANCETS***	100	LAROTRECTINIB SULFATE CAP 25 MG (BASE EQUIVALENT).....	213
*LANCETS***	95	*LANCETS***	100	LAROTRECTINIB SULFATE CAP 100 MG (BASE EQUIVALENT).....	213
*LANCETS***	95	*LANCETS***	100	LAROTRECTINIB SULFATE ORAL SOLN 20 MG/ML (BASE EQUIVALENT)	213
*LANCETS***	95	*LANCETS***	100	LAS MIDITAN SUCCINATE TAB 50 MG	246
*LANCETS***	96	*LANCETS***	100	LAS MIDITAN SUCCINATE TAB 100 MG	246
*LANCETS***	96	*LANCETS***	100	LATANOPROSTENE BUNOD OPHTH SOLN 0.024%	226
*LANCETS***	96	*LANCETS***	100	LATANOPROST OPHTH EMULSION 0.005%	226
*LANCETS***	96	*LANCETS***	100	LATANOPROST OPHTH SOLN 0.005%	225
*LANCETS***	96	*LANCETS***	100	LATANOPROST OPHTH SOLN 0.005%	225
*LANCETS***	96	*LANCETS***	100	LATANOPROST (PF) OPHTH SOLN 0.005%	225
*LANCETS***	96	*LANCETS***	100	LAZERTINIB MESYLATE TAB 80 MG.....	211
*LANCETS***	96	*LANCETS***	100	LAZERTINIB MESYLATE TAB 240 MG.....	211
*LANCETS***	96	*LANCETS***	101	LEBRIKIZUMAB-LBKZ SOLUTION PREFILLED SYRINGE 250 MG/2ML	89
*LANCETS***	96	*LANCETS***	101	LEBRIKIZUMAB-LBKZ SUBCUTANEOUS SOLN AUTO-INJECT 250 MG/2ML	88
*LANCETS***	96	*LANCETS***	101		
*LANCETS***	97	*LANCETS***	101		

LECANEMAB-IRMB SOLN AUTO-INJ 360 MG/1.8ML.....	33	LEUCOVORIN CALCIUM TAB 5 MG.....	46	LEVOCARNITINE ORAL SOLN 1 GM/10ML (10%).....	109
LECITHIN GRANULES.....	195	LEUCOVORIN CALCIUM TAB 10 MG.....	46	LEVOCARNITINE ORAL SOLN 1 GM/10ML (10%).....	109
LEDIPASVIR-SOFOSBUVIR PELLET PACK 33.75-150 MG.....	17	LEUCOVORIN CALCIUM TAB 15 MG.....	46	LEVOCARNITINE ORAL SOLN 1 GM/10ML (10%).....	113
LEDIPASVIR-SOFOSBUVIR PELLET PACK 45-200 MG.....	17	LEUCOVORIN CALCIUM TAB 25 MG.....	46	LEVOCARNITINE TAB 330 MG.....	109
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LEDIPASVIR-SOFOSBUVIR TAB 90-400 MG.....	17	LEUPROLIDE ACETATE INJ KIT 1 MG/0.2ML (5 MG/ML).....	167	LEVOCETIRIZINE DIHYDROCHLORIDE SOLN 2.5 MG/5ML (0.5 MG/ML).....	44
LEDIPASVIR-SOFOSBUVIR TAB 90-400 MG.....	17	LEUPROLIDE ACETATE INJ KIT 1 MG/0.2ML (5 MG/ML).....	167	LEVOCETIRIZINE DIHYDROCHLORIDE TAB 5 MG.....	44
LEFLUNOMIDE TAB 10 MG.....	173	LEVACETYLLEUCINE FOR SUSP PACKET 1 GM.....	182	LEVODOPA INHAL POWDER CAP 42 MG.....	192
LEFLUNOMIDE TAB 20 MG.....	173	LEVALBUTEROL HCL SOLN NEBU 0.31 MG/3ML (BASE EQUIV).....	69	LEVOFLOXACIN OPHTH SOLN 0.5%.....	223
LENACAPAVIR SODIUM TAB 300 MG.....	19	LEVALBUTEROL HCL SOLN NEBU 0.63 MG/3ML (BASE EQUIV).....	69	LEVOFLOXACIN OPHTH SOLN 1.5%.....	223
LENACAPAVIR SODIUM TAB 300 MG.....	19	LEVALBUTEROL HCL SOLN NEBU 1.25 MG/3ML (BASE EQUIV).....	69	LEVOFLOXACIN ORAL SOLN 25 MG/ML.....	241
LENACAPAVIR SODIUM TAB THERAPY PACK 4 X 300 MG.....	19	LEVALBUTEROL HCL SOLN NEBU CONC 1.25 MG/0.5ML (BASE EQUIV).....	69	LEVOFLOXACIN TAB 250 MG.....	241
LENACAPAVIR SODIUM TAB THERAPY PACK 5 X 300 MG.....	19	LEVALBUTEROL HCL SOLN NEBU 1.25 MG/3ML (BASE EQUIV).....	69	LEVOFLOXACIN TAB 500 MG.....	241
LENALIDOMIDE CAP 5 MG.....	23	LEVALBUTEROL HCL SOLN NEBU CONC 1.25 MG/0.5ML (BASE EQUIV).....	69	LEVOFLOXACIN TAB 750 MG.....	241
LENALIDOMIDE CAP 5 MG.....	23	LEVALBUTEROL TARTRATE INHAL AEROSOL 45 MCG/ACT (BASE EQUIV).....	69	LEVOMILNACIPRAN HCL CAP ER 24HR 20 & 40 MG THERAPY PACK.....	256
LENALIDOMIDE CAP 10 MG.....	23	LEVALBUTEROL TARTRATE INHAL AEROSOL 45 MCG/ACT (BASE EQUIV).....	70	LEVOMILNACIPRAN HCL CAP ER 24HR 20 MG (BASE EQUIVALENT).....	255
LENALIDOMIDE CAP 10 MG.....	23	LEVETIRACETAM ORAL SOLN 100 MG/ML.....	31	LEVOMILNACIPRAN HCL CAP ER 24HR 40 MG (BASE EQUIVALENT).....	256
LENALIDOMIDE CAP 15 MG.....	23	LEVETIRACETAM ORAL SOLN 100 MG/ML.....	32	LEVOMILNACIPRAN HCL CAP ER 24HR 80 MG (BASE EQUIVALENT).....	256
LENALIDOMIDE CAP 15 MG.....	23	LEVETIRACETAM ORAL SOLN 100 MG/ML.....	32	LEVOMILNACIPRAN HCL CAP ER 24HR 120 MG (BASE EQUIVALENT).....	255
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LENALIDOMIDE CAPS 2.5 MG.....	23	LEVETIRACETAM TAB 750 MG.....	32	LEVONORGESTREL-ETH ESTRA TAB 0.05-30/0.075-40/0.125-30MG-MCG.....	131
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LENAVATINIB CAP THERAPY PACK 2 X 4 MG (8 MG DAILY DOSE).....	211	LEVETIRACETAM TAB 1000 MG.....	32	LEVONORGESTREL & ETHINYL ESTRADIOL (91-DAY) TAB 0.15-0.03 MG.....	125
LENAVATINIB CAP THERAPY PACK 2 X 10 MG (20 MG DAILY DOSE).....	211	LEVETIRACETAM TAB DISINTEGRATING SOLUBLE 250 MG.....	32	LEVONORGESTREL & ETHINYL ESTRADIOL (91-DAY) TAB 0.15-0.03 MG.....	127
LENAVATINIB CAP THERAPY PACK 2 X 10 MG (20 MG DAILY DOSE).....	211	LEVETIRACETAM TAB DISINTEGRATING SOLUBLE 250 MG.....	32	LEVONORGESTREL & ETHINYL ESTRADIOL (91-DAY) TAB 0.15-0.03 MG.....	127
LENAVATINIB CAP THERAPY PACK 3 X 4 MG (12 MG DAILY DOSE).....	211	LEVETIRACETAM TAB DISINTEGRATING SOLUBLE 500 MG.....	32	LEVONORGESTREL & ETHINYL ESTRADIOL (91-DAY) TAB 0.15-0.03 MG.....	130
LENAVATINIB CAP THERAPY PACK 4 MG (4 MG DAILY DOSE).....	211	LEVETIRACETAM TAB DISINTEGRATING SOLUBLE 500 MG.....	32	LEVONORGESTREL & ETHINYL ESTRADIOL (91-DAY) TAB 0.15-0.03 MG.....	130
LENAVATINIB CAP THERAPY PACK 10 & 4 MG (14 MG DAILY DOSE).....	211	LEVETIRACETAM TAB DISINTEGRATING SOLUBLE 750 MG.....	32	LEVONORGESTREL & ETHINYL ESTRADIOL (91-DAY) TAB 0.15-0.03 MG.....	131
LENAVATINIB CAP THERAPY PACK 10 MG (10 MG DAILY DOSE).....	211	LEVETIRACETAM TAB DISINTEGRATING SOLUBLE 1000 MG.....	32	LEVOCARNITINE L-TARTRATE CAP 500 MG.....	113
LENAVATINIB CAP THER PACK 2 X 10 MG & 4 MG (24 MG DAILY DOSE).....	211	LEVETIRACETAM TAB ER 24HR 500 MG.....	32		
LENAVATINIB CAP THER PACK 10 MG & 2 X 4 MG (18 MG DAILY DOSE).....	211	LEVETIRACETAM TAB ER 24HR 500 MG.....	32		
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LETERMOVIR PELLET PACK 120 MG.....	16	LEVETIRACETAM TAB ER 24HR 750 MG.....	32		
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LETERMOVIR TAB 480 MG.....	16				
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LEUCOVORIN CALCIUM POWDER.....	195				
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LEVOTHYROXINE SODIUM TAB 88 MCG ...	164	GEL PREFILLED SYRINGE 2%	179	CHEW TAB 50 MG	56
LEVOTHYROXINE SODIUM TAB 88 MCG ...	164	LIDOCAINE HCL VISCOUS SOLN 2%	179	LISDEXAMFETAMINE DIMESYLATE	
LEVOTHYROXINE SODIUM TAB 88 MCG ...	166	LIDOCAINE HCL VISCOUS SOLN 2%	179	CHEW TAB 60 MG	56
LEVOTHYROXINE SODIUM TAB 100 MCG ..	162	LIDOCAINE OINT 5%	179	LISINAPRIL & HYDROCHLOROTHIAZIDE	
LEVOTHYROXINE SODIUM TAB 100 MCG ..	163	LIDOCAINE PATCH 1.8% (36 MG)	179	TAB 10-12.5 MG	78
LEVOTHYROXINE SODIUM TAB 100 MCG ..	163	LIDOCAINE PATCH 5%	178	LISINAPRIL & HYDROCHLOROTHIAZIDE	
LEVOTHYROXINE SODIUM TAB 100 MCG ..	164	LIDOCAINE-PRILOCAINE CREAM 2.5-2.5% ..	178	TAB 20-12.5 MG	78
LEVOTHYROXINE SODIUM TAB 100 MCG ..	166	LIFITEGRAST OPTH SOLN 5%	221	LISINAPRIL & HYDROCHLOROTHIAZIDE	
LEVOTHYROXINE SODIUM TAB 112 MCG ..	162	LINACLOTIDE CAP 72 MCG	175	TAB 20-25 MG	78
LEVOTHYROXINE SODIUM TAB 112 MCG ..	163	LINACLOTIDE CAP 145 MCG	175	LISINAPRIL ORAL SOLN 1 MG/ML	15
LEVOTHYROXINE SODIUM TAB 112 MCG ..	163	LINACLOTIDE CAP 290 MCG	175	LISINAPRIL TAB 2.5 MG	15
LEVOTHYROXINE SODIUM TAB 112 MCG ..	164	LINAGLIPTIN-METFORMIN HCL TAB 2.5-		LISINAPRIL TAB 5 MG	15
LEVOTHYROXINE SODIUM TAB 112 MCG ..	166	500 MG	36	LISINAPRIL TAB 5 MG	16
LEVOTHYROXINE SODIUM TAB 125 MCG ..	162	LINAGLIPTIN-METFORMIN HCL TAB 2.5-		LISINAPRIL TAB 10 MG	15
LEVOTHYROXINE SODIUM TAB 125 MCG ..	163	850 MG	36	LISINAPRIL TAB 10 MG	16
LEVOTHYROXINE SODIUM TAB 125 MCG ..	163	LINAGLIPTIN-METFORMIN HCL TAB 2.5-		LISINAPRIL TAB 20 MG	15
LEVOTHYROXINE SODIUM TAB 125 MCG ..	164	1000 MG	36	LISINAPRIL TAB 20 MG	16
LEVOTHYROXINE SODIUM TAB 125 MCG ..	166	LINAGLIPTIN-METFORMIN HCL TAB ER		LISINAPRIL TAB 30 MG	15
LEVOTHYROXINE SODIUM TAB 137 MCG ..	162	24HR 2.5-1000 MG	36	LISINAPRIL TAB 40 MG	15
LEVOTHYROXINE SODIUM TAB 137 MCG ..	163	LINAGLIPTIN-METFORMIN HCL TAB ER		LITHIUM CARBONATE CAP 150 MG	214
LEVOTHYROXINE SODIUM TAB 137 MCG ..	163	24HR 5-1000 MG	36	LITHIUM CARBONATE CAP 300 MG	214
LEVOTHYROXINE SODIUM TAB 137 MCG ..	164	LINAGLIPTIN TAB 5 MG	38	LITHIUM CARBONATE CAP 600 MG	214
LEVOTHYROXINE SODIUM TAB 137 MCG ..	166	LINEZOLID FOR SUSP 100 MG/5ML	26	LITHIUM CARBONATE TAB 300 MG	214
LEVOTHYROXINE SODIUM TAB 150 MCG ..	162	LINEZOLID FOR SUSP 100 MG/5ML	28	LITHIUM CARBONATE TAB ER 300 MG	214
LEVOTHYROXINE SODIUM TAB 150 MCG ..	163	LINEZOLID TAB 600 MG	26	LITHIUM CARBONATE TAB ER 300 MG	214
LEVOTHYROXINE SODIUM TAB 150 MCG ..	164	LIOETHYRONINE SODIUM TAB 5 MCG	164	LITHIUM CARBONATE TAB ER 450 MG	214
LEVOTHYROXINE SODIUM TAB 150 MCG ..	164	LIOETHYRONINE SODIUM TAB 5 MCG	164	LITHIUM ORAL SOLUTION 8 MEQ/5ML	214
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LEVOTHYROXINE SODIUM TAB 150 MCG ..	166	LIOETHYRONINE SODIUM TAB 25 MCG	164	SOLN 0.1%	221
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LEVOTHYROXINE SODIUM TAB 175 MCG ..	163	LIRAGLUTIDE SOLN PEN-INJECTOR 18		EQUIVALENT)	10
LEVOTHYROXINE SODIUM TAB 175 MCG ..	163	MG/3ML (6 MG/ML)	36	LOFEXIDINE HCL TAB 0.18 MG (BASE	
LEVOTHYROXINE SODIUM TAB 175 MCG ..	164	LISDEXAMFETAMINE DIMESYLATE CAP		EQUIVALENT)	10
LEVOTHYROXINE SODIUM TAB 175 MCG ..	166	10 MG	55	LOMITAPIDE MESYLATE CAP 5 MG (BASE	
LEVOTHYROXINE SODIUM TAB 200 MCG ..	162	LISDEXAMFETAMINE DIMESYLATE CAP		EQUIV)	108
LEVOTHYROXINE SODIUM TAB 200 MCG ..	163	20 MG	55	LOMITAPIDE MESYLATE CAP 10 MG	
LEVOTHYROXINE SODIUM TAB 200 MCG ..	163	LISDEXAMFETAMINE DIMESYLATE CAP		(BASE EQUIV)	108
LEVOTHYROXINE SODIUM TAB 200 MCG ..	164	30 MG	55	LOMITAPIDE MESYLATE CAP 20 MG	
LEVOTHYROXINE SODIUM TAB 200 MCG ..	166	LISDEXAMFETAMINE DIMESYLATE CAP		(BASE EQUIV)	108
LEVOTHYROXINE SODIUM TAB 300 MCG ..	163	40 MG	55	LOMITAPIDE MESYLATE CAP 30 MG	
LEVOTHYROXINE SODIUM TAB 300 MCG ..	163	LISDEXAMFETAMINE DIMESYLATE CAP		(BASE EQUIV)	108
LEVOTHYROXINE SODIUM TAB 300 MCG ..	166	50 MG	55	LOMUSTINE CAP 10 MG	10
LIDOCAINE-BENZALKONIUM		LISDEXAMFETAMINE DIMESYLATE CAP		LOMUSTINE CAP 10 MG	10
(PODIATRIC) CREAM 4.12-0.13%	186	60 MG	55	LOMUSTINE CAP 40 MG	10
LIDOCAINE HCL LARYNGOTRACHEAL		LISDEXAMFETAMINE DIMESYLATE CAP		LOMUSTINE CAP 40 MG	10
SOLN 4%	179	70 MG	55	LOMUSTINE CAP 100 MG	10
LIDOCAINE HCL OPTH GEL 3.5%	220	LISDEXAMFETAMINE DIMESYLATE		LOMUSTINE CAP 100 MG	10
LIDOCAINE HCL SOLN 4%	179	CHEW TAB 10 MG	55	LONAFARNIB CAP 50 MG	208
LIDOCAINE HCL URETHRAL/MUCOSAL		LISDEXAMFETAMINE DIMESYLATE		LONAFARNIB CAP 75 MG	208
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GEL PREFILLED SYRINGE 2%	178	CHEW TAB 30 MG	56	LONAPEGSOMATROPIN-TCGD FOR	
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LONAPEGSSOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 2.5 MG .. 161	LOTEPREDNOL ETABONATE OPTH OINT 0.5%.....222	LYSINE HCL TAB 500 MG.....202
LONAPEGSSOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 3.6 MG .. 162	LOTEPREDNOL ETABONATE OPTH SUSP 0.2%.....221	LYSINE HCL TAB 1000 MG.....196
LONAPEGSSOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 3 MG.....162	LOTEPREDNOL ETABONATE OPTH SUSP 0.2%.....222	LYSINE HCL TAB 1000 MG.....202
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LONAPEGSSOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 6.3 MG .. 162	LOTEPREDNOL ETABONATE OPTH SUSP 1%.....222	MAFENIDE ACETATE CREAM 85 MG/GM 27
LONAPEGSSOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 7.6 MG .. 162	LOTEPREDNOL ETABONATE- TOBRAMYCIN OPTH SUSP 0.5-0.3% 222	MAFENIDE ACETATE PACKET FOR TOPICAL SOLN 5% (50 GM) 26
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MEDROXYPROGESTERONE ACETATE TAB 2.5 MG.....	237	MENINGOCOCCAL ACWY (OLIGO CONJ)-MENING B (RCMB) VACC FOR INJ.....	264	METFORMIN HCL ORAL SOLN 500 MG/5ML.....	36
MEDROXYPROGESTERONE ACETATE TAB 2.5 MG.....	237	MENINGOCOCCAL (A, C, Y, AND W-135) OLIGO CONJ VAC FOR INJ.....	264	METFORMIN HCL TAB 500 MG.....	36
MEDROXYPROGESTERONE ACETATE TAB 5 MG.....	237	MENINGOCOCCAL (A, C, Y, AND W-135) OLIGO CONJ VAC IM SOLN.....	264	METFORMIN HCL TAB 850 MG.....	36
MEDROXYPROGESTERONE ACETATE TAB 5 MG.....	237	MENINGOCOCCAL (A, C, Y, AND W-135) TETANUS CONJUGATE VACCINE.....	263	METFORMIN HCL TAB 1000 MG.....	36
MEDROXYPROGESTERONE ACETATE TAB 10 MG.....	237	MENINGOCOCCAL ACYW (TET CONJ)-MENING B (RCMB) VACC FOR INJ.....	264	METFORMIN HCL TAB ER 24HR 500 MG.....	36
MEDROXYPROGESTERONE ACETATE TAB 10 MG.....	237	MENINGOCOCCAL GROUP B VAC (RECOMB) IM SUSP PREFILLED SYR.....	265	METFORMIN HCL TAB ER 24HR 750 MG.....	36
MEFENAMIC ACID CAP 250 MG.....	219	MENINGOCOCCAL VAC B (RECOMB OMV ADJUV) INJ PREFILLED SYRINGE.....	262	METHADONE HCL CONC 10 MG/ML.....	227
MEFLOQUINE HCL TAB 250 MG.....	50	MENOTROPINS FOR SUBCUTANEOUS INJ 75 UNIT.....	161	METHADONE HCL CONC 10 MG/ML.....	227
MEGESTROL ACETATE SUSP 40 MG/ML.....	237	MEPERIDINE HCL ORAL SOLN 50 MG/5ML.....	231	METHADONE HCL CONC 10 MG/ML.....	228
MEGESTROL ACETATE SUSP 625 MG/5ML.....	237	MEPERIDINE HCL TAB 50 MG.....	231	METHADONE HCL SOLN 5 MG/5ML.....	227
MEGESTROL ACETATE TAB 20 MG.....	237	MEPOLIZUMAB SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML.....	22	METHADONE HCL SOLN 10 MG/5ML.....	227
MEGESTROL ACETATE TAB 40 MG.....	237	MEPOLIZUMAB SUBCUTANEOUS SOLUTION PREF SYRINGE 40 MG/0.4ML.....	22	METHADONE HCL TAB 5 MG.....	227
MELATONIN LIQUID 1 MG/ML.....	196	MEPOLIZUMAB SUBCUTANEOUS SOLUTION PREF SYRINGE 100 MG/ML.....	22	METHADONE HCL TAB 10 MG.....	227
MELOXICAM SUSP 7.5 MG/5ML.....	219	MEPROBAMATE TAB 200 MG.....	53	METHADONE HCL TAB FOR ORAL SUSP 40 MG.....	226
MELOXICAM TAB 7.5 MG.....	219	MEPROBAMATE TAB 400 MG.....	53	METHADONE HCL TAB FOR ORAL SUSP 40 MG.....	227
MELOXICAM TAB 15 MG.....	219	MERCAPTOPURINE (BULK) POWDER.....	196	METHADONE HCL TAB FOR ORAL SUSP 40 MG.....	228
MELPHALAN HCL FOR INTRA-ARTERIAL SOLN 50 MG (BASE EQUIV).....	10	MERCAPTOPURINE MONOHYDRATE (BULK) POWDER.....	196	METHAMPHETAMINE HCL TAB 5 MG.....	56
MELPHALAN HCL FOR INTRA-ARTERIAL SOLN 50 MG (BASE EQUIV).....	10	MERCAPTOPURINE MONOHYDRATE (BULK) POWDER.....	196	METHAZOLAMIDE TAB 25 MG.....	224
MELPHALAN TAB 2 MG.....	11	MERCAPTOPURINE SUSP 2000 MG/100ML (20 MG/ML).....	45	METHAZOLAMIDE TAB 50 MG.....	224
MEMANTINE-DONEPEZIL CAP ER 24HR 7 & 14 & 21 & 28-10 MG PACK.....	82	MERCAPTOPURINE SUSP 2000 MG/100ML (20 MG/ML).....	45	METHENAMINE HIPPURATE TAB 1 GM.....	26
MEMANTINE HCL CAP ER 24HR 7 MG.....	216	MERCAPTOPURINE TAB 50 MG.....	45	METHENAMINE HIPPURATE TAB 1 GM.....	26
MEMANTINE HCL CAP ER 24HR 14 MG.....	216	MESALAMINE CAP DR 400 MG.....	12	*METHENAMINE-HYOSCAMINE-METH BLUE-SOD PHOS TAB 81.6 MG***.....	141
MEMANTINE HCL CAP ER 24HR 21 MG.....	216	MESALAMINE CAP ER 24HR 0.375 GM.....	12	*METHENAMINE-HYOSCAMINE-METH BLUE-SOD PHOS TAB 81.6 MG***.....	142
MEMANTINE HCL CAP ER 24HR 28 MG.....	216	MESALAMINE ENEMA 4 GM.....	12	*METHENAMINE-HYOSC-METH BLUE-SOD PHOS-PHEN SAL TAB 81 MG***.....	142
MEMANTINE HCL-DONEPEZIL HCL CAP ER 24HR 7-10 MG.....	82	*MESALAMINE RECTAL ENEMA 4 GM & CLEANSER WIPE KIT**.....	12	*METHENAMINE-HYOSC-METH BLUE-SOD PHOS-PHEN SAL TAB 81 MG***.....	142
MEMANTINE HCL-DONEPEZIL HCL CAP ER 24HR 14-10 MG.....	82			*METHENAMINE-HYOS-METH BLUE-SOD PHOS-PHEN SAL TAB 81.6 MG***.....	142
MEMANTINE HCL-DONEPEZIL HCL CAP ER 24HR 14-10 MG.....	82			METHENAMINE MANDELATE TAB 0.5 GM.....	26
MEMANTINE HCL-DONEPEZIL HCL CAP ER 24HR 14-10 MG.....	82			METHENAMINE MANDELATE TAB 1 GM.....	26
MEMANTINE HCL-DONEPEZIL HCL CAP ER 24HR 21-10 MG.....	82			METHIMAZOLE TAB 5 MG.....	52
				METHIMAZOLE TAB 10 MG.....	52
				METHIONINE ORAL PACKET 100 MG.....	196
				METHOCARBAMOL TAB 500 MG.....	247
				METHOCARBAMOL TAB 750 MG.....	247
				METHOCARBAMOL TAB 1000 MG.....	247
				METHOCARBAMOL TAB 1000 MG.....	247
				METHOTREXATE ORAL SOLN 2.5 MG/ML.....	171
				METHOTREXATE ORAL SOLN 2 MG/ML.....	169

METHOTREXATE POWDER	196	METHYLNALTREXONE BROMIDE INJ 12 MG/0.6ML (20 MG/ML)	136	METHYLPHENIDATE HCL CAP ER 24HR 60 MG (XR)	59
METHOTREXATE SODIUM FOR INJ 1 GM	169	METHYLNALTREXONE BROMIDE SOLN PREF SYR 8 MG/0.4ML	136	METHYLPHENIDATE HCL CAP ER 30 MG (CD)	58
METHOTREXATE SODIUM INJ 50 MG/2ML (25 MG/ML)	169	METHYLNALTREXONE BROMIDE SOLN PREF SYR 12 MG/0.6ML	136	METHYLPHENIDATE HCL CAP ER 40 MG (CD)	58
METHOTREXATE SODIUM INJ 50 MG/2ML (25 MG/ML)	169	METHYLPHENIDATE HCL CAP DELAYED ER 24HR 20 MG (PM)	58	METHYLPHENIDATE HCL CAP ER 50 MG (CD)	58
METHOTREXATE SODIUM INJ 250 MG/10ML (25 MG/ML)	169	METHYLPHENIDATE HCL CAP DELAYED ER 24HR 40 MG (PM)	58	METHYLPHENIDATE HCL CAP ER 60 MG (CD)	59
METHOTREXATE SODIUM INJ PF 50 MG/2ML (25 MG/ML)	169	METHYLPHENIDATE HCL CAP DELAYED ER 24HR 60 MG (PM)	58	METHYLPHENIDATE HCL CHEW TAB 2.5 MG	59
METHOTREXATE SODIUM INJ PF 250 MG/10ML (25 MG/ML)	169	METHYLPHENIDATE HCL CAP DELAYED ER 24HR 80 MG (PM)	58	METHYLPHENIDATE HCL CHEW TAB 5 MG ..	59
METHOTREXATE SODIUM INJ PF 1000 MG/40ML (25 MG/ML)	169	METHYLPHENIDATE HCL CAP DELAYED ER 24HR 100 MG (PM)	58	METHYLPHENIDATE HCL CHEW TAB 10 MG ..	59
METHOTREXATE SODIUM INJ PF 1000 MG/40ML (25 MG/ML)	169	METHYLPHENIDATE HCL CAP ER 10 MG (CD)	58	METHYLPHENIDATE HCL CHEW TAB EXTENDED RELEASE 20 MG	59
METHOTREXATE SODIUM TAB 2.5 MG (BASE EQUIV)	169	METHYLPHENIDATE HCL CAP ER 20 MG (CD)	58	METHYLPHENIDATE HCL CHEW TAB EXTENDED RELEASE 30 MG	59
METHOTREXATE SODIUM TAB 5 MG (BASE EQUIV)	171	METHYLPHENIDATE HCL CAP ER 24HR 10 MG (LA)	58	METHYLPHENIDATE HCL CHEW TAB EXTENDED RELEASE 40 MG	59
METHOTREXATE SODIUM TAB 7.5 MG (BASE EQUIV)	171	METHYLPHENIDATE HCL CAP ER 24HR 10 MG (XR)	56	METHYLPHENIDATE HCL FOR ER SUSP 25 MG/5ML (5 MG/ML)	59
METHOTREXATE SODIUM TAB 10 MG (BASE EQUIV)	171	METHYLPHENIDATE HCL CAP ER 24HR 10 MG (XR)	58	METHYLPHENIDATE HCL SOLN 5 MG/5ML ..	58
METHOTREXATE SODIUM TAB 15 MG (BASE EQUIV)	171	METHYLPHENIDATE HCL CAP ER 24HR 15 MG (XR)	56	METHYLPHENIDATE HCL SOLN 5 MG/5ML ..	59
METHOTREXATE SOLN PF AUTO- INJECTOR 7.5 MG/0.15ML	171	METHYLPHENIDATE HCL CAP ER 24HR 15 MG (XR)	58	METHYLPHENIDATE HCL SOLN 10 MG/5ML	58
METHOTREXATE SOLN PF AUTO- INJECTOR 10 MG/0.2ML	170	METHYLPHENIDATE HCL CAP ER 24HR 20 MG (LA)	58	METHYLPHENIDATE HCL SOLN 10 MG/5ML	59
METHOTREXATE SOLN PF AUTO- INJECTOR 12.5 MG/0.25ML	170	METHYLPHENIDATE HCL CAP ER 24HR 20 MG (XR)	56	METHYLPHENIDATE HCL TAB 5 MG	59
METHOTREXATE SOLN PF AUTO- INJECTOR 15 MG/0.3ML	170	METHYLPHENIDATE HCL CAP ER 24HR 20 MG (XR)	58	METHYLPHENIDATE HCL TAB 10 MG	59
METHOTREXATE SOLN PF AUTO- INJECTOR 17.5 MG/0.35ML	170	METHYLPHENIDATE HCL CAP ER 24HR 30 MG (LA)	58	METHYLPHENIDATE HCL TAB 20 MG	59
METHOTREXATE SOLN PF AUTO- INJECTOR 20 MG/0.4ML	170	METHYLPHENIDATE HCL CAP ER 24HR 30 MG (XR)	56	METHYLPHENIDATE HCL TAB ER 10 MG	59
METHOTREXATE SOLN PF AUTO- INJECTOR 22.5 MG/0.45ML	171	METHYLPHENIDATE HCL CAP ER 24HR 30 MG (XR)	58	METHYLPHENIDATE HCL TAB ER 20 MG ...	59
METHOTREXATE SOLN PF AUTO- INJECTOR 25 MG/0.5ML	171	METHYLPHENIDATE HCL CAP ER 24HR 40 MG (LA)	58	METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 18 MG	59
METHOTREXATE SOLN PF AUTO- INJECTOR 30 MG/0.6ML	171	METHYLPHENIDATE HCL CAP ER 24HR 40 MG (XR)	56	METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 27 MG	59
METHOXSALIN RAPID CAP 10 MG	89	METHYLPHENIDATE HCL CAP ER 24HR 40 MG (XR)	58	METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 36 MG	59
METHSCOPOLAMINE BROMIDE TAB 2.5 MG	51	METHYLPHENIDATE HCL CAP ER 24HR 50 MG (XR)	56	METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 54 MG	59
METHSCOPOLAMINE BROMIDE TAB 5 MG ..	51	METHYLPHENIDATE HCL CAP ER 24HR 50 MG (XR)	59	METHYLPHENIDATE TAB EXTENDED RELEASE DISINTEGRATING 8.6 MG	57
METHSUXIMIDE CAP 300 MG	74	METHYLPHENIDATE HCL CAP ER 24HR 60 MG (LA)	59	METHYLPHENIDATE TAB EXTENDED RELEASE DISINTEGRATING 17.3 MG	57
METHSUXIMIDE CAP 300 MG	74	METHYLPHENIDATE HCL CAP ER 24HR 60 MG (XR)	56	METHYLPHENIDATE TAB EXTENDED RELEASE DISINTEGRATING 25.9 MG	57
METHYLDOPA TAB 250 MG	11			METHYLPHENIDATE TD PATCH 10 MG/9HR ..	59
METHYLDOPA TAB 500 MG	11			METHYLPHENIDATE TD PATCH 15 MG/9HR ..	59
METHYLERGONOVINE MALEATE TAB 0.2 MG	196			METHYLPHENIDATE TD PATCH 20 MG/9HR ..	59
METHYLERGONOVINE MALEATE TAB 0.2 MG	196			METHYLPHENIDATE TD PATCH 30 MG/9HR ..	59
				METHYLPREDNISOLONE ACETATE POWDER	196
				METHYLPREDNISOLONE TAB 2 MG	158
				METHYLPREDNISOLONE TAB 4 MG	158
				METHYLPREDNISOLONE TAB 4 MG	158
				METHYLPREDNISOLONE TAB 8 MG	158
				METHYLPREDNISOLONE TAB 8 MG	158
				METHYLPREDNISOLONE TAB 16 MG	157

METHYLPREDNISOLONE TAB 16 MG.....	158	METRELEPTIN FOR SUBCUTANEOUS INJ 11.3 MG	136	MILTEFOSINE CAP 50 MG.....	49
METHYLPREDNISOLONE TAB 32 MG.....	158	METRONIDAZOLE CAP 375 MG	26	MINERAL OIL	176
METHYLPREDNISOLONE TAB THERAPY PACK 4 MG (21)	158	METRONIDAZOLE CAP 375 MG	26	MINOCYCLINE HCL CAP 50 MG.....	259
METHYLPREDNISOLONE TAB THERAPY PACK 4 MG (21)	158	METRONIDAZOLE CREAM 0.75%.....	26	MINOCYCLINE HCL CAP 75 MG.....	259
*METHYL SALICYLATE LIQUID**	89	METRONIDAZOLE CREAM 0.75%.....	26	MINOCYCLINE HCL CAP 100 MG	259
METHYLTESTOSTERONE CAP 10 MG.....	13	METRONIDAZOLE GEL 0.75%	27	MINOCYCLINE HCL CAP ER 24HR 45 MG (BASE EQUIVALENT).....	259
METHYLTESTOSTERONE ORAL TAB 10 MG. .	13	METRONIDAZOLE GEL 1%.....	27	MINOCYCLINE HCL CAP ER 24HR 45 MG (BASE EQUIVALENT).....	260
METOCLOPRAMIDE HCL ORALLY DISINTEGRATING TAB 5 MG (BASE EQ)	39	METRONIDAZOLE LOTION 0.75%.....	26	MINOCYCLINE HCL CAP ER 24HR 90 MG (BASE EQUIVALENT).....	259
METOCLOPRAMIDE HCL SOLN 5 MG/5ML (10 MG/10ML) (BASE EQUIV)	39	METRONIDAZOLE LOTION 0.75%.....	27	MINOCYCLINE HCL CAP ER 24HR 90 MG (BASE EQUIVALENT).....	260
METOCLOPRAMIDE HCL SOLN 5 MG/5ML (10 MG/10ML) (BASE EQUIV)	39	METRONIDAZOLE TAB 250 MG.....	27	MINOCYCLINE HCL CAP ER 24HR 135 MG (BASE EQUIVALENT).....	259
METOCLOPRAMIDE HCL TAB 5 MG (BASE EQUIVALENT).....	39	METRONIDAZOLE TAB 500 MG	27	MINOCYCLINE HCL CAP ER 24HR 135 MG (BASE EQUIVALENT).....	260
METOCLOPRAMIDE HCL TAB 5 MG (BASE EQUIVALENT).....	39	METRONIDAZOLE VAGINAL GEL 0.75%.....	27	MINOCYCLINE HCL CAP ER 24HR 135 MG (BASE EQUIVALENT).....	260
METOCLOPRAMIDE HCL TAB 10 MG (BASE EQUIVALENT).....	39	METRONIDAZOLE VAGINAL GEL 0.75%.....	28	MINOCYCLINE HCL MICRONIZED FOAM 1.5%.....	94
METOCLOPRAMIDE HCL TAB 10 MG (BASE EQUIVALENT).....	39	METRONIDAZOLE VAGINAL GEL 1.3%	27	MINOCYCLINE HCL MICRONIZED FOAM 4%86	
METOCLOPRAMIDE HCL TAB 10 MG (BASE EQUIVALENT).....	39	METYRAPONE CAP 250 MG	196	MINOCYCLINE HCL TAB 50 MG	260
METOLAZONE TAB 2.5 MG	103	METYROSINE CAP 250 MG.....	79	MINOCYCLINE HCL TAB 75 MG	260
METOLAZONE TAB 5 MG	103	MEXILETINE HCL CAP 150 MG.....	24	MINOCYCLINE HCL TAB 100 MG.....	259
METOLAZONE TAB 10 MG.....	103	MEXILETINE HCL CAP 200 MG	24	MINOCYCLINE HCL TAB ER 24HR 45 MG ..	260
METOPROLOL & HYDROCHLOROTHIAZIDE TAB 50-25 MG... .	79	MEXILETINE HCL CAP 250 MG.....	24	MINOCYCLINE HCL TAB ER 24HR 55 MG ..	260
METOPROLOL & HYDROCHLOROTHIAZIDE TAB 100-25 MG. .	78	MICONAZOLE BUCCAL TAB 50 MG (MOUTH-THROAT)	42	MINOCYCLINE HCL TAB ER 24HR 65 MG ..	260
METOPROLOL & HYDROCHLOROTHIAZIDE TAB 100-50 MG .	79	MICONAZOLE NITRATE POWDER.....	196	MINOCYCLINE HCL TAB ER 24HR 80 MG ..	260
METOPROLOL SUCC CAP ER 24HR SPRINKLE 25 MG (TARTRATE EQUIV)	63	MICONAZOLE NITRATE VAGINAL SUPPOS 200 MG	41	MINOCYCLINE HCL TAB ER 24HR 90 MG ..	260
METOPROLOL SUCC CAP ER 24HR SPRINKLE 50 MG (TARTRATE EQUIV).....	63	MICONAZOLE-ZINC OXIDE-WHITE PETROLATUM OINT 0.25-15-81.35%.....	41	MINOCYCLINE HCL TAB ER 24HR 105 MG .	259
METOPROLOL SUCC CAP ER 24HR SPRINKLE 100 MG (TARTRATE EQUIV).....	62	MICONAZOLE-ZINC OXIDE-WHITE PETROLATUM OINT 0.25-15-81.35%.....	42	MINOCYCLINE HCL TAB ER 24HR 115 MG .	259
METOPROLOL SUCC CAP ER 24HR SPRINKLE 200 MG (TARTRATE EQUIV)	63	MIDAZOLAM (BULK) POWDER.....	196	MINOCYCLINE HCL TAB ER 24HR 135 MG ..	260
METOPROLOL SUCCINATE TAB ER 24HR 25 MG (TARTRATE EQUIV)	63	MIDAZOLAM HCL SYRUP 2 MG/ML (BASE EQUIVALENT).....	62	MINOXIDIL TAB 2.5 MG	265
METOPROLOL SUCCINATE TAB ER 24HR 50 MG (TARTRATE EQUIV)	63	MIDAZOLAM NASAL SPRAY SOLN 5 MG/0.1 ML	32	MINOXIDIL TAB 10 MG.....	265
METOPROLOL SUCCINATE TAB ER 24HR 100 MG (TARTRATE EQUIV)	63	MIDODRINE HCL TAB 2.5 MG	11	MIRABEGRON TAB ER 24 HR 25 MG.....	51
METOPROLOL SUCCINATE TAB ER 24HR 200 MG (TARTRATE EQUIV).....	63	MIDODRINE HCL TAB 5 MG	11	MIRABEGRON TAB ER 24 HR 25 MG.....	51
METOPROLOL TARTRATE ORAL SOLN 10 MG/ML.....	63	MIDODRINE HCL TAB 10 MG	11	MIRABEGRON TAB ER 24 HR 50 MG	51
METOPROLOL TARTRATE TAB 25 MG.....	63	MIDOSTAURIN CAP 25 MG.....	212	MIRDAMETINIB CAP 1 MG	46
METOPROLOL TARTRATE TAB 37.5 MG	63	MIFEPRISTONE TAB 200 MG.....	113	MIRDAMETINIB CAP 2 MG	46
METOPROLOL TARTRATE TAB 50 MG	63	MIFEPRISTONE TAB 200 MG.....	113	MIRDAMETINIB TAB FOR ORAL SUSP 1 MG .	46
METOPROLOL TARTRATE TAB 75 MG.....	63	MIFEPRISTONE TAB 300 MG.....	162	MIRIKIZUMAB-MRKZ SUBCUTANEOUS AUTO-INJ 100 MG/ML & 200MG/2ML.....	170
METOPROLOL TARTRATE TAB 100 MG	63	MIGALASTAT HCL CAP 123 MG (BASE EQUIVALENT).....	137	MIRIKIZUMAB-MRKZ SUBCUTANEOUS PREF SYR 100 MG/ML & 200MG/2ML	170
		MIGLITOL TAB 25 MG	36	MIRIKIZUMAB-MRKZ SUBCUTANEOUS SOLN AUTO-INJECTOR 100 MG/ML	170
		MIGLITOL TAB 50 MG.....	36	MIRIKIZUMAB-MRKZ SUBCUTANEOUS SOLN AUTO-INJECTOR 200 MG/2ML	170
		MIGLITOL TAB 100 MG.....	36	MIRIKIZUMAB-MRKZ SUBCUTANEOUS SOL PREFILL SYRINGE 100 MG/ML.....	170
		MIGLUSTAT CAP 100 MG	138	MIRIKIZUMAB-MRKZ SUBCUTANEOUS SOL PREFILL SYRINGE 200 MG/2ML	170
		MIGLUSTAT (GAA DEFICIENCY) CAP 65 MG.....	138	MIRTAZAPINE ORALLY DISINTEGRATING TAB 15 MG.....	33
		MILNACIPRAN HCL TAB 12.5 MG.....	133	MIRTAZAPINE ORALLY DISINTEGRATING TAB 30 MG	33

MIRTAZAPINE ORALLY DISINTEGRATING TAB 45 MG	33	MONTELUKAST SODIUM ORAL GRANULES PACKET 4 MG (BASE EQUIV) ...	44	MYCOPHENOLATE MOFETIL FOR ORAL SUSP 200 MG/ML	169
MIRTAZAPINE TAB 7.5 MG	33	MONTELUKAST SODIUM TAB 10 MG (BASE EQUIV)	44	MYCOPHENOLATE MOFETIL ORAL SUSP 200 MG/ML	170
MIRTAZAPINE TAB 15 MG	33	MORPHINE SULFATE BEADS CAP ER 24HR 30 MG	228	MYCOPHENOLATE MOFETIL TAB 500 MG ..	169
MIRTAZAPINE TAB 30 MG	33	MORPHINE SULFATE BEADS CAP ER 24HR 45 MG	228	MYCOPHENOLATE SODIUM TAB DR 180 MG (MYCOPHENOLIC ACID EQUIV)	170
MIRTAZAPINE TAB 45 MG	33	MORPHINE SULFATE BEADS CAP ER 24HR 60 MG	228	MYCOPHENOLATE SODIUM TAB DR 360 MG (MYCOPHENOLIC ACID EQUIV)	170
MISOPROSTOL TAB 100 MCG	238	MORPHINE SULFATE BEADS CAP ER 24HR 75 MG	228	NABUMETONE TAB 500 MG	219
MISOPROSTOL TAB 100 MCG	238	MORPHINE SULFATE BEADS CAP ER 24HR 90 MG	228	NABUMETONE TAB 750 MG	219
MISOPROSTOL TAB 200 MCG	238	MORPHINE SULFATE BEADS CAP ER 24HR 120 MG	228	NADOLOL TAB 20 MG	63
MISOPROSTOL TAB 200 MCG	238	MORPHINE SULFATE CAP ER 24HR 10 MG ..	228	NADOLOL TAB 40 MG	63
MITAPIVAT SULFATE TAB 5 MG	152	MORPHINE SULFATE CAP ER 24HR 20 MG ..	228	NADOLOL TAB 80 MG	63
MITAPIVAT SULFATE TAB 20 MG	152	MORPHINE SULFATE CAP ER 24HR 30 MG ..	228	NAFARELIN ACETATE NASAL SOLN 2 MG/ ML (200 MCG/ACT) (BASE EQ)	167
MITAPIVAT SULFATE TAB 50 MG	152	MORPHINE SULFATE CAP ER 24HR 50 MG ..	228	NAFTIFINE HCL CREAM 1%	41
MITAPIVAT SULFATE TAB THERAPY PACK 5 MG	152	MORPHINE SULFATE CAP ER 24HR 60 MG ..	228	NAFTIFINE HCL CREAM 2%	41
MITAPIVAT SULFATE TAB THERAPY PACK 7 X 20 MG & 7 X 5 MG	152	MORPHINE SULFATE CAP ER 24HR 80 MG ..	228	NAFTIFINE HCL GEL 1%	41
MITAPIVAT SULFATE TAB THERAPY PACK 7 X 50 MG & 7 X 20 MG	152	MORPHINE SULFATE CAP ER 24HR 100 MG ..	228	NAFTIFINE HCL GEL 2%	41
MITOMYCIN (BULK) POWDER	196	MORPHINE SULFATE ORAL SOLN 10 MG/5ML	231	NAFTIFINE HCL GEL 2%	41
MITOMYCIN FOR OPHTH SOLN KIT 0.2 MG	222	MORPHINE SULFATE ORAL SOLN 20 MG/5ML	231	NALDEMEDINE TOSYLATE TAB 0.2 MG (BASE EQUIVALENT)	137
MITOTANE TAB 500 MG	166	MORPHINE SULFATE ORAL SOLN 100 MG/5ML (20 MG/ML)	231	NALMEFENE HCL NASAL SPRAY 2.7 MG/0.1ML (BASE EQUIV)	233
MODAFINIL TAB 100 MG	248	MORPHINE SULFATE ORAL SOLN 100 MG/5ML (20 MG/ML)	231	NALMEFENE HCL SOLN AUTO-INJECTOR 1.5 MG/0.5ML (BASE EQUIV)	233
MODAFINIL TAB 200 MG	248	MORPHINE SULFATE SUPPOS 5 MG	231	NALOXONE HCL INJ 0.4 MG/ML	233
MOEXIPRIL HCL TAB 7.5 MG	15	MORPHINE SULFATE SUPPOS 10 MG	231	NALOXONE HCL INJ 4 MG/10ML	233
MOEXIPRIL HCL TAB 15 MG	15	MORPHINE SULFATE SUPPOS 20 MG	231	NALOXONE HCL INJ 4 MG/10ML	233
MOLINDONE HCL TAB 5 MG	6	MORPHINE SULFATE SUPPOS 30 MG	231	NALOXONE HCL NASAL SPRAY 3 MG/0.1ML	233
MOLINDONE HCL TAB 10 MG	6	MORPHINE SULFATE TAB 15 MG	231	NALOXONE HCL NASAL SPRAY 4 MG/0.1ML	233
MOLINDONE HCL TAB 25 MG	6	MORPHINE SULFATE TAB 30 MG	231	NALOXONE HCL NASAL SPRAY 4 MG/0.1ML	233
MOLNUPIRAVIR CAP 200 MG	52	MORPHINE SULFATE TAB ER 15 MG	228	NALOXONE HCL NASAL SPRAY 4 MG/0.1ML	233
MOMELOTINIB DIHYDROCHLORIDE TAB 100 MG	47	MORPHINE SULFATE TAB ER 30 MG	228	NALOXONE HCL NASAL SPRAY 4 MG/0.1ML	233
MOMELOTINIB DIHYDROCHLORIDE TAB 150 MG	47	MORPHINE SULFATE TAB ER 60 MG	228	NALOXONE HCL NASAL SPRAY 4 MG/0.1ML	233
MOMELOTINIB DIHYDROCHLORIDE TAB 200 MG	47	MORPHINE SULFATE TAB ER 100 MG	228	NALOXONE HCL NASAL SPRAY 4 MG/0.1ML	233
MOMETASONE FUROATE CREAM 0.1%	158	MORPHINE SULFATE TAB ER 200 MG	228	NALOXONE HCL NASAL SPRAY 4 MG/0.1ML	233
MOMETASONE FUROATE-FORMOTEROL FUMARATE AEROSOL 50-5 MCG/ACT	242	MOXIFLOXACIN HCL OPHTH SOLN 0.5% (BASE EQ) (2 TIMES DAILY)	223	NALOXONE HCL NASAL SPRAY 4 MG/0.25ML	233
MOMETASONE FUROATE-FORMOTEROL FUMARATE AEROSOL 100-5 MCG/ACT	242	MOXIFLOXACIN HCL OPHTH SOLN 0.5% (BASE EQUIV)	223	NALOXONE HCL NASAL SPRAY 8 MG/0.1ML	233
MOMETASONE FUROATE-FORMOTEROL FUMARATE AEROSOL 200-5 MCG/ACT	242	MOXIFLOXACIN HCL OPHTH SOLN 0.5% (BASE EQUIV)	223	NALOXONE HCL SOLN CARTRIDGE 0.4 MG/ML	233
MOMETASONE FUROATE NASAL SUSP 50 MCG/ACT	22	MOXIFLOXACIN HCL TAB 400 MG (BASE EQUIV)	241	NALOXONE HCL SOLN PREFILLED SYRINGE 0.4 MG/ML	233
MOMETASONE FUROATE OINT 0.1%	158	*MULTIPLE VITAMINS W/ MINERALS CHEW TAB**	111	NALOXONE HCL SOLN PREFILLED SYRINGE 2 MG/2ML	233
MOMETASONE FUROATE SOLUTION 0.1% (LOTION)	158	MUPIROCIN CALCIUM CREAM 2%	27	NALOXONE HCL SOLN PREFILLED SYRINGE 2 MG/2ML	233
MONOMETHYL FUMARATE CAPSULE DELAYED RELEASE 95 MG	215	MUPIROCIN OINT 2%	27		
MONTELUKAST SODIUM CHEW TAB 4 MG (BASE EQUIV)	44	MYCOPHENOLATE MOFETIL CAP 250 MG ..	169		
MONTELUKAST SODIUM CHEW TAB 5 MG (BASE EQUIV)	44				
MONTELUKAST SODIUM ORAL GRANULES PACKET 4 MG (BASE EQUIV) ...	44				

NALOXONE HCL SOLN PREFILLED SYRINGE 5 MG/0.5ML	233	NEEDLE (DISP) 18 X 1-1/2"	174	NEFAZODONE HCL TAB 50 MG	256
NALTREXONE HCL TAB 50 MG	233	NEEDLE (DISP) 18 X 1-1/2"	175	NEFAZODONE HCL TAB 100 MG	256
NAPROXEN SODIUM TAB 275 MG	219	NEEDLE (DISP) 18 X 1-1/2"	175	NEFAZODONE HCL TAB 150 MG	256
NAPROXEN SODIUM TAB 550 MG	219	NEEDLE (DISP) 19 X 1"	203	NEFAZODONE HCL TAB 200 MG	256
NAPROXEN SODIUM TAB ER 24HR 375 MG (BASE EQUIV)	219	NEEDLE (DISP) 19 X 1-1/2"	203	NEFAZODONE HCL TAB 250 MG	256
NAPROXEN SODIUM TAB ER 24HR 375 MG (BASE EQUIV)	219	NEEDLE (DISP) 20 X 1"	191	NELFINAVIR MESYLATE TAB 250 MG	21
NAPROXEN SODIUM TAB ER 24HR 500 MG (BASE EQUIV)	219	NEEDLE (DISP) 20 X 1"	200	NELFINAVIR MESYLATE TAB 625 MG	21
NAPROXEN SODIUM TAB ER 24HR 500 MG (BASE EQUIV)	219	NEEDLE (DISP) 20 X 1-1/2"	203	NEMOLIZUMAB-ILTO FOR SUBCUTANEOUS AUTO-INJECTOR 30 MG ..	89
NAPROXEN SODIUM TAB ER 24HR 750 MG (BASE EQUIV)	219	NEEDLE (DISP) 21 X 1"	187	NEOMYCIN-BACITRAC ZN-POLYMYX 5(3.5)MG-400UNT-10000UNT OP OIN	220
NAPROXEN TAB 250 MG	219	NEEDLE (DISP) 21 X 1"	200	NEOMYCIN-BACITRAC ZN-POLYMYX 5(3.5)MG-400UNT-10000UNT OP OIN	220
NAPROXEN TAB 375 MG	219	NEEDLE (DISP) 21 X 1"	203	NEOMYCIN-BACITRAC ZN-POLYMYX 5(3.5)MG-400UNT-10000UNT OP OIN	220
NAPROXEN TAB 500 MG	219	NEEDLE (DISP) 21 X 1-1/2"	187	NEOMYCIN-COLISTIN-HC-THONZONIUM OTIC SUSP 3.3-3-10-0.5 MG/ML	234
NAPROXEN TAB EC 375 MG	218	NEEDLE (DISP) 21 X 1-1/2"	200	NEOMYCIN-POLYMY-GRAMICID OP SOL 1.75-10000-0.025MG-UNT-MG/ML	220
NAPROXEN TAB EC 375 MG	218	NEEDLE (DISP) 21 X 1-1/2"	203	NEOMYCIN-POLYMYXIN-DEXAMETHASONE OPHTH OINT 0.1%	222
NAPROXEN TAB EC 375 MG	219	NEEDLE (DISP) 21 X 1-1/2"	203	NEOMYCIN-POLYMYXIN-DEXAMETHASONE OPHTH OINT 0.1%	223
NAPROXEN TAB EC 500 MG	218	NEEDLE (DISP) 21 X 1-1/2"	203	NEOMYCIN-POLYMYXIN-DEXAMETHASONE OPHTH SUSP 0.1%	222
NAPROXEN TAB EC 500 MG	218	NEEDLE (DISP) 22 X 1"	191	NEOMYCIN-POLYMYXIN-DEXAMETHASONE OPHTH SUSP 0.1%	223
NAPROXEN TAB EC 500 MG	218	NEEDLE (DISP) 22 X 1"	200	NEOMYCIN-POLYMYXIN-DEXAMETHASONE OPHTH SUSP 0.1%	223
NAPROXEN TAB EC 500 MG	219	NEEDLE (DISP) 22 X 1"	203	NEOMYCIN-POLYMYXIN-HC OPHTH SUSP 223	
NARATRIPTAN HCL TAB 1 MG (BASE EQUIV)	246	NEEDLE (DISP) 22 X 1-1/2"	200	NEOMYCIN-POLYMYXIN-HC OTIC SOLN 1%	234
NARATRIPTAN HCL TAB 2.5 MG (BASE EQUIV)	246	NEEDLE (DISP) 22 X 1-1/2"	203	NEOMYCIN-POLYMYXIN-HC OTIC SUSP 3.5 MG/ML-10000 UNIT/ML-1%	234
NATAMYCIN OPHTH SUSP 5%	225	NEEDLE (DISP) 23 X 1"	183	NEOMYCIN SULFATE-FLUOCINOLONE ACETONIDE CREAM 0.5-0.025%	89
NATEGLINIDE TAB 60 MG	37	NEEDLE (DISP) 23 X 1"	184	NEOMYCIN SULFATE TAB 500 MG	12
NATEGLINIDE TAB 120 MG	37	NEEDLE (DISP) 23 X 1-1/2"	191	NEPAFENAC OPHTH SUSP 0.1%	223
NEBIVOLOL HCL TAB 2.5 MG (BASE EQUIVALENT)	63	NEEDLE (DISP) 23 X 1-1/2"	200	NEPAFENAC OPHTH SUSP 0.3%	222
NEBIVOLOL HCL TAB 5 MG (BASE EQUIVALENT)	63	NEEDLE (DISP) 23 X 1-1/2"	207	NERANDOMILAST TAB 9 MG	195
NEBIVOLOL HCL TAB 10 MG (BASE EQUIVALENT)	63	NEEDLE (DISP) 25 X 1"	184	NERANDOMILAST TAB 18 MG	195
NEBIVOLOL HCL TAB 20 MG (BASE EQUIVALENT)	63	NEEDLE (DISP) 25 X 1"	187	NERATINIB MALEATE TAB 40 MG (BASE EQUIVALENT)	211
NEDOCROMIL SODIUM OPHTH SOLN 2% ..	221	NEEDLE (DISP) 25 X 1-1/2"	191	NETARSUDIL DIMESYLATE-LATANOPROST OPHTH SOLN 0.02-0.005% ..	221
NEDOSIRAN SODIUM SUBCUTANEOUS SOLN 80 MG/0.5ML	141	NEEDLE (DISP) 25 X 1-1/2"	200	NETARSUDIL DIMESYLATE OPHTH SOLN 0.02%	221
NEDOSIRAN SODIUM SUBCUTANEOUS SOLN PREF SYR 128 MG/0.8ML	141	NEEDLE (DISP) 25 X 5/8"	183	NETUPITANT-PALONOSETRON CAP 300-0.5 MG	38
NEDOSIRAN SODIUM SUBCUTANEOUS SOLN PREF SYR 160 MG/ML	141	NEEDLE (DISP) 25 X 5/8"	184	NEVIRAPINE SUSP 50 MG/5ML	19
NEEDLE (DISP) 18 X 1"	174	NEEDLE (DISP) 25 X 5/8"	187	NEVIRAPINE TAB 200 MG	19
NEEDLE (DISP) 18 X 1"	174	NEEDLE (DISP) 25 X 5/8"	191	NEVIRAPINE TAB ER 24HR 400 MG	19
NEEDLE (DISP) 18 X 1"	175	NEEDLE (DISP) 25 X 5/8"	200	NIACIN TAB ER 500 MG (ANTHYPERLIPIDEMIC)	108
NEEDLE (DISP) 18 X 1"	175	NEEDLE (DISP) 27 X 1-1/2"	184	NIACIN TAB ER 500 MG (ANTHYPERLIPIDEMIC)	108
NEEDLE (DISP) 18 X 1"	175	NEEDLE (DISP) 27 X 1/2"	183		
NEEDLE (DISP) 18 X 1-1/2"	173	NEEDLE (DISP) 27 X 1/2"	200		
NEEDLE (DISP) 18 X 1-1/2"	174	NEEDLE (DISP) 30 X 1"	183		
NEEDLE (DISP) 18 X 1-1/2"	174	NEEDLE (DISP) 30 X 1/2"	183		
NEEDLE (DISP) 18 X 1-1/2"	174	NEEDLE (DISP) 30 X 1/2"	200		

NINTEDANIB ESYLATE CAP 100 MG (BASE EQUIVALENT).....	241	NITROFURANTOIN MONOHYDRATE MACROCRYSTALLINE CAP 100 MG	27	NORETHINDRONE ACE-ETH ESTRADIOL- FE CHEW TAB 1 MG-20 MCG (24)	128
NINTEDANIB ESYLATE CAP 150 MG (BASE EQUIVALENT).....	241	NITROFURANTOIN SUSP 25 MG/5ML	197	NORETHINDRONE ACE-ETH ESTRADIOL- FE CHEW TAB 1 MG-20 MCG (24)	129
NIRAPARIB TOSYLATE-ABIRATERONE ACETATE TAB 50-500 MG	45	NITROGLYCERIN CAP ER 2.5 MG	266	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE CAP 1 MG-20 MCG (24)	125
NIRAPARIB TOSYLATE-ABIRATERONE ACETATE TAB 100-500 MG	45	NITROGLYCERIN CAP ER 6.5 MG	266	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE CAP 1 MG-20 MCG (24)	128
NIRMATRELVIR TAB 6 X 150 MG & RITONAVIR TAB 5 X 100 MG PAK	52	NITROGLYCERIN CAP ER 9 MG	266	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE CAP 1 MG-20 MCG (24)	128
NIRMATRELVIR TAB 10 X 150 MG & RITONAVIR TAB 10 X 100 MG PAK	53	NITROGLYCERIN OINT 0.4%	266	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE CAP 1 MG-20 MCG (24)	128
NIRMATRELVIR TAB 20 X 150 MG & RITONAVIR TAB 10 X 100 MG PAK	53	NITROGLYCERIN OINT 0.4%	266	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE CAP 1 MG-20 MCG (24)	130
NIROGACESTAT HYDROBROMIDE TAB 50 MG	47	NITROGLYCERIN OINT 2%	266	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE CAP 1 MG-20 MCG (24)	130
NIROGACESTAT HYDROBROMIDE TAB 100 MG	47	NITROGLYCERIN SL TAB 0.3 MG	266	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	120
NIROGACESTAT HYDROBROMIDE TAB 150 MG	47	NITROGLYCERIN SL TAB 0.3 MG	266	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	121
NIRSEVIMAB-ALIP IM SOLN PREFILLED SYRINGE 50 MG/0.5ML	172	NITROGLYCERIN SL TAB 0.4 MG	266	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	124
NIRSEVIMAB-ALIP IM SOLN PREFILLED SYRINGE 100 MG/ML	172	NITROGLYCERIN SL TAB 0.4 MG	266	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	125
NISOLDIPINE TAB ER 24HR 8.5 MG	72	NITROGLYCERIN SL TAB 0.6 MG	266	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	126
NISOLDIPINE TAB ER 24HR 8.5 MG	73	NITROGLYCERIN SL TAB 0.6 MG	266	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	126
NISOLDIPINE TAB ER 24HR 17 MG	72	NITROGLYCERIN TD PATCH 24HR 0.1 MG/ HR	266	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG	128
NISOLDIPINE TAB ER 24HR 17 MG	73	NITROGLYCERIN TD PATCH 24HR 0.1 MG/ HR	266	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	120
NISOLDIPINE TAB ER 24HR 20 MG	72	NITROGLYCERIN TD PATCH 24HR 0.2 MG/HR	266	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	121
NISOLDIPINE TAB ER 24HR 25.5 MG	72	NITROGLYCERIN TD PATCH 24HR 0.2 MG/HR	266	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	124
NISOLDIPINE TAB ER 24HR 30 MG	72	NITROGLYCERIN TD PATCH 24HR 0.3 MG/HR	266	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	125
NISOLDIPINE TAB ER 24HR 34 MG	72	NITROGLYCERIN TD PATCH 24HR 0.4 MG/HR	266	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	126
NISOLDIPINE TAB ER 24HR 34 MG	73	NITROGLYCERIN TD PATCH 24HR 0.4 MG/HR	266	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	126
NISOLDIPINE TAB ER 24HR 40 MG	72	NITROGLYCERIN TD PATCH 24HR 0.6 MG/HR	266	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	128
NITAZOXANIDE FOR SUSP 100 MG/5ML	49	NITROGLYCERIN TD PATCH 24HR 0.6 MG/HR	266	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	128
NITAZOXANIDE TAB 500 MG	50	NITROGLYCERIN TD PATCH 24HR 0.8 MG/HR	266	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	120
NITISINONE CAP 2 MG	138	NITROGLYCERIN TL SOLN 0.4 MG/SPRAY (400 MCG/SPRAY)	266	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	121
NITISINONE CAP 5 MG	138	NIZATIDINE CAP 150 MG	154	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	124
NITISINONE CAP 10 MG	138	NIZATIDINE CAP 300 MG	154	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	125
NITISINONE CAP 20 MG	138	NONOXYNOL-9 FILM 28%	142	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	126
NITISINONE SUSP 4 MG/ML	138	NONOXYNOL-9 GEL 3%	141	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	126
NITROFURANTOIN MACROCRYSTALLINE CAP 25 MG	26	NONOXYNOL-9 GEL 4%	142	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	126
NITROFURANTOIN MACROCRYSTALLINE CAP 25 MG	27	NONOXYNOL-9 VAGINAL SPONGE 1000 MG	142	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	128
NITROFURANTOIN MACROCRYSTALLINE CAP 50 MG	26	NONOXYNOL-9 VAGINAL SUPPOS 100 MG	141	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	129
NITROFURANTOIN MACROCRYSTALLINE CAP 50 MG	27	NORELGESTROMIN-ETHINYL ESTRADIOL TD PTWK 150-35 MCG/24HR ..	128	NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG	130
NITROFURANTOIN MACROCRYSTALLINE CAP 100 MG	26	NORELGESTROMIN-ETHINYL ESTRADIOL TD PTWK 150-35 MCG/24HR ..	132	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24)	120
NITROFURANTOIN MACROCRYSTALLINE CAP 100 MG	27	NORELGESTROMIN-ETHINYL ESTRADIOL TD PTWK 150-35 MCG/24HR ..	132	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24)	121
NITROFURANTOIN MONOHYDRATE MACROCRYSTALLINE CAP 100 MG	26	NORETHINDRONE ACE-ETH ESTRADIOL- FE CHEW TAB 1 MG-20 MCG (24)	121	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24)	125
		NORETHINDRONE ACE-ETH ESTRADIOL- FE CHEW TAB 1 MG-20 MCG (24)	125	NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24)	126



*NUTRITIONAL SUPPLEMENT POWDER**	.267	NYSTATIN (BULK) POWDER.....	41	OFLOXACIN OPHTH SOLN 0.3%.....	224
*NUTRITIONAL SUPPLEMENT POWDER**	.267	NYSTATIN (BULK) POWDER.....	41	OFLOXACIN OTIC SOLN 0.3%.....	234
*NUTRITIONAL SUPPLEMENT POWDER**	.268	NYSTATIN (BULK) POWDER.....	41	OFLOXACIN TAB 300 MG	241
*NUTRITIONAL SUPPLEMENT POWDER**	.268	NYSTATIN (BULK) POWDER.....	41	OFLOXACIN TAB 400 MG	241
*NUTRITIONAL SUPPLEMENT POWDER**	.268	NYSTATIN (BULK) POWDER.....	41	OLANZAPINE-FLUOXETINE HCL CAP	
*NUTRITIONAL SUPPLEMENT POWDER**	.268	NYSTATIN (BULK) POWDER.....	41	3-25 MG.....	.256
*NUTRITIONAL SUPPLEMENT POWDER**	.268	NYSTATIN (BULK) POWDER.....	41	OLANZAPINE-FLUOXETINE HCL CAP	
*NUTRITIONAL SUPPLEMENT POWDER**	.268	NYSTATIN (BULK) POWDER.....	41	3-25 MG.....	.257
*NUTRITIONAL SUPPLEMENT POWDER**	.268	NYSTATIN CREAM 100000 UNIT/GM.....	41	OLANZAPINE-FLUOXETINE HCL CAP	
*NUTRITIONAL SUPPLEMENT POWDER**	.268	NYSTATIN OINT 100000 UNIT/GM.....	41	6-25 MG.....	.256
*NUTRITIONAL SUPPLEMENT POWDER**	.268	NYSTATIN OINT 100000 UNIT/GM.....	41	OLANZAPINE-FLUOXETINE HCL CAP	
*NUTRITIONAL SUPPLEMENT POWDER**	.268	NYSTATIN SUSP 100000 UNIT/ML	42	6-25 MG.....	.257
*NUTRITIONAL SUPPLEMENT POWDER**	.268	NYSTATIN TAB 500000 UNIT	42	OLANZAPINE-FLUOXETINE HCL CAP	
*NUTRITIONAL SUPPLEMENT POWDER**	.268	NYSTATIN TOPICAL POWDER 100000		6-50 MG	.256
*NUTRITIONAL SUPPLEMENT POWDER**	.268	UNIT/GM.....	41	OLANZAPINE-FLUOXETINE HCL CAP	
*NUTRITIONAL SUPPLEMENT POWDER**	.268	NYSTATIN TOPICAL POWDER 100000		12-25 MG.....	.256
*NUTRITIONAL SUPPLEMENT POWDER**	.269	UNIT/GM.....	41	OLANZAPINE-FLUOXETINE HCL CAP	
*NUTRITIONAL SUPPLEMENT POWDER**	.269	NYSTATIN TOPICAL POWDER 100000		12-50 MG.....	.256
*NUTRITIONAL SUPPLEMENT POWDER**	.269	UNIT/GM.....	41	OLANZAPINE ORALLY DISINTEGRATING	
*NUTRITIONAL SUPPLEMENT POWDER**	.269	NYSTATIN TOPICAL POWDER 100000		TAB 5 MG.....	8
*NUTRITIONAL SUPPLEMENT POWDER**	.269	UNIT/GM.....	42	OLANZAPINE ORALLY DISINTEGRATING	
*NUTRITIONAL SUPPLEMENT POWDER**	.270	NYSTATIN-TRIAMCINOLONE CREAM		TAB 10 MG.....	8
*NUTRITIONAL SUPPLEMENT POWDER**	.270	100000-0.1 UNIT/GM-%	41	OLANZAPINE ORALLY DISINTEGRATING	
*NUTRITIONAL SUPPLEMENT POWDER**	.270	NYSTATIN-TRIAMCINOLONE OINT		TAB 15 MG.....	8
*NUTRITIONAL SUPPLEMENT POWDER**	.270	100000-0.1 UNIT/GM-%	41	OLANZAPINE ORALLY DISINTEGRATING	
*NUTRITIONAL SUPPLEMENT POWDER**	.270	OBETICHOLIC ACID TAB 5 MG.....	138	TAB 20 MG	8
*NUTRITIONAL SUPPLEMENT POWDER**	.270	OBETICHOLIC ACID TAB 10 MG.....	138	OLANZAPINE TAB 2.5 MG	8
*NUTRITIONAL SUPPLEMENT POWDER**	.270	OCTREOTIDE ACETATE INJ 50 MCG/ML		OLANZAPINE TAB 5 MG	8
*NUTRITIONAL SUPPLEMENT POWDER**	.270	(0.05 MG/ML).....	167	OLANZAPINE TAB 7.5 MG	8
*NUTRITIONAL SUPPLEMENT POWDER**	.270	OCTREOTIDE ACETATE INJ 100 MCG/ML		OLANZAPINE TAB 10 MG.....	8
*NUTRITIONAL SUPPLEMENT POWDER**	.270	(0.1 MG/ML)	167	OLANZAPINE TAB 15 MG.....	8
*NUTRITIONAL SUPPLEMENT POWDER**	.270	OCTREOTIDE ACETATE INJ 200 MCG/ML		OLANZAPINE TAB 20 MG.....	8
*NUTRITIONAL SUPPLEMENT POWDER**	.271	(0.2 MG/ML)	167	OLAPARIB TAB 100 MG.....	211
*NUTRITIONAL SUPPLEMENT POWDER**	.271	OCTREOTIDE ACETATE INJ 200 MCG/ML		OLAPARIB TAB 150 MG.....	211
*NUTRITIONAL SUPPLEMENT POWDER**	.271	(0.2 MG/ML)	167	OLEZARSEN SOD SUBCUT SOLN AUTO-	
*NUTRITIONAL SUPPLEMENT POWDER**	.271	OCTREOTIDE ACETATE INJ 500 MCG/ML		INJECT 80 MG/0.8ML (BASE EQ)	.206
*NUTRITIONAL SUPPLEMENT POWDER**	.271	(0.5 MG/ML)	167	OLMESARTAN-AMLODIPINE-	
*NUTRITIONAL SUPPLEMENT POWDER**	.271	OCTREOTIDE ACETATE INJ 1000 MCG/		HYDROCHLOROTHIAZIDE TAB 20-5-12.5	
*NUTRITIONAL SUPPLEMENT POWDER**	.271	ML (1 MG/ML).....	167	MG.....	.79
*NUTRITIONAL SUPPLEMENT POWDER**	.273	OCTREOTIDE ACETATE INJ 1000 MCG/		OLMESARTAN-AMLODIPINE-	
*NUTRITIONAL SUPPLEMENT POWDER**	.273	ML (1 MG/ML).....	167	HYDROCHLOROTHIAZIDE TAB 40-5-12.5	
*NUTRITIONAL SUPPLEMENT POWDER**	.273	OCTREOTIDE ACETATE SUBCUTANEOUS		MG.....	.79
*NUTRITIONAL SUPPLEMENT POWDER**	.273	SOLN PREF SYR 50 MCG/ML.....	167	OLMESARTAN-AMLODIPINE-	
*NUTRITIONAL SUPPLEMENT POWDER**	.273	OCTREOTIDE ACETATE SUBCUTANEOUS		HYDROCHLOROTHIAZIDE TAB 40-5-25 MG.79	
*NUTRITIONAL SUPPLEMENT POWDER**	.273	SOLN PREF SYR 100 MCG/ML	167	OLMESARTAN-AMLODIPINE-	
*NUTRITIONAL SUPPLEMENT POWDER**	.273	OCTREOTIDE ACETATE SUBCUTANEOUS		HYDROCHLOROTHIAZIDE TAB 40-10-	
*NUTRITIONAL SUPPLEMENT POWDER**	.273	SOLN PREF SYR 500 MCG/ML	167	12.5 MG	.79
*NUTRITIONAL SUPPLEMENT POWDER**	.274	ODEVIXIBAT CAP 400 MCG.....	135	OLMESARTAN-AMLODIPINE-	
*NUTRITIONAL SUPPLEMENT POWDER**	.274	ODEVIXIBAT CAP 1200 MCG.....	135	HYDROCHLOROTHIAZIDE TAB 40-10-25 MG79	
*NUTRITIONAL SUPPLEMENT POWDER**	.275	ODEVIXIBAT PELLETS CAP SPRINKLE		OLMESARTAN MEDOXOMIL-	
*NUTRITIONAL SUPPLEMENT TABS**	.271	200 MCG.....	135	HYDROCHLOROTHIAZIDE TAB 20-12.5 MG .79	
*NUTRITIONAL SUPPLEMENT TABS		ODEVIXIBAT PELLETS CAP SPRINKLE		OLMESARTAN MEDOXOMIL-	
DELAYED RELEASE**	.200	600 MCG.....	135	HYDROCHLOROTHIAZIDE TAB 40-12.5 MG .79	
*NUTRITIONAL SUPPLEMENT TABS		OFATUMUMAB SOLN AUTO-INJECTOR 20		OLMESARTAN MEDOXOMIL-	
DELAYED RELEASE**	.200	MG/0.4ML	216	HYDROCHLOROTHIAZIDE TAB 40-25 MG...79	
NYSTATIN (BULK) POWDER.....	41	OFLOXACIN OPHTH SOLN 0.3%.....	223	OLMESARTAN MEDOXOMIL TAB 5 MG	14

OLMESARTAN MEDOXOMIL TAB 20 MG	14	*ORAL VEHICLES***	197	OXCARBAZEPINE TAB 300 MG	254
OLMESARTAN MEDOXOMIL TAB 40 MG	14	*ORAL VEHICLES***	205	OXCARBAZEPINE TAB 600 MG	254
OLODATEROL HCL INHAL AEROSOL		*ORAL VEHICLES FOR SUSP***	205	OXCARBAZEPINE TAB 600 MG	254
SOLN 2.5 MCG/ACT (BASE EQUIV)	69	*ORAL VEHICLES - SUSP***	189	OXICONAZOLE NITRATE CREAM 1%	42
OLOPATADINE HCL-MOMETASONE		*ORAL VEHICLES - SUSP***	197	OXICONAZOLE NITRATE CREAM 1%	42
FUROATE NASAL SUSP 665-25 MCG/ACT	44	*ORAL VEHICLES - SUSP***	197	OXICONAZOLE NITRATE LOTION 1%	42
OLOPATADINE HCL NASAL SOLN 0.6%	44	*ORAL VEHICLES - SUSP***	198	OXYBUTYNIN CHLORIDE SOLUTION 5	
OLSALAZINE SODIUM CAP 250 MG	12	*ORAL VEHICLES - SUSP***	204	MG/5ML	51
OLUTASIDENIB CAP 150 MG	212	*ORAL VEHICLES - SUSP***	204	OXYBUTYNIN CHLORIDE TAB 2.5 MG	51
OMADACYCLINE TOSYLATE TAB 150 MG		*ORAL VEHICLES - SUSP***	204	OXYBUTYNIN CHLORIDE TAB 5 MG	51
(BASE EQUIVALENT)	260	*ORAL VEHICLES - SUSP***	206	OXYBUTYNIN CHLORIDE TAB ER 24HR 5 MG	51
OMALIZUMAB SUBCUTANEOUS SOLN		*ORAL VEHICLES - SYRUP***	189	OXYBUTYNIN CHLORIDE TAB ER 24HR 10	
AUTO-INJECTOR 75 MG/0.5ML	245	*ORAL VEHICLES - SYRUP***	189	MG	51
OMALIZUMAB SUBCUTANEOUS SOLN		*ORAL VEHICLES - SYRUP***	189	OXYBUTYNIN CHLORIDE TAB ER 24HR 15	
AUTO-INJECTOR 150 MG/ML	244	*ORAL VEHICLES - SYRUP***	197	MG	51
OMALIZUMAB SUBCUTANEOUS SOLN		*ORAL VEHICLES - SYRUP***	197	OXYBUTYNIN CHLORIDE TD GEL 10%	51
AUTO-INJECTOR 300 MG/2ML	245	*ORAL VEHICLES - SYRUP***	198	OXYCODONE CAP ER 12HR ABUSE-	
OMALIZUMAB SUBCUTANEOUS SOLN		*ORAL VEHICLES - SYRUP***	198	DETERRENT 9 MG	229
PREFILLED SYRINGE 75 MG/0.5ML	245	*ORAL VEHICLES - SYRUP***	205	OXYCODONE CAP ER 12HR ABUSE-	
OMALIZUMAB SUBCUTANEOUS SOLN		*ORAL VEHICLES - SYRUP***	205	DETERRENT 13.5 MG	229
PREFILLED SYRINGE 150 MG/ML	244	*ORAL VEHICLES - SYRUP***	205	OXYCODONE CAP ER 12HR ABUSE-	
OMALIZUMAB SUBCUTANEOUS SOLN		*ORAL VEHICLES - SYRUP***	207	DETERRENT 18 MG	229
PREFILLED SYRINGE 300 MG/2ML	244	*ORAL VEHICLES - SYRUP***	207	OXYCODONE CAP ER 12HR ABUSE-	
OMAVELOXOLONE CAP 50 MG	81	ORPHENADRINE CITRATE TAB ER 12HR		DETERRENT 27 MG	229
OMEGA-3-ACID ETHYL ESTERS CAP 1 GM	108	100 MG	247	OXYCODONE CAP ER 12HR ABUSE-	
*OMEGA-3 FATTY ACIDS CAP 300 MG**	189	OSELTAMIVIR PHOSPHATE (BULK)		DETERRENT 36 MG	229
OMEPRazole CAP DELAYED RELEASE 10		POWDER	197	OXYCODONE HCL CAP 5 MG	232
MG	238	OSELTAMIVIR PHOSPHATE CAP 30 MG		OXYCODONE HCL CONC 100 MG/5ML	
OMEPRazole CAP DELAYED RELEASE		(BASE EQUIV)	22	(20 MG/ML)	232
20 MG	238	OSELTAMIVIR PHOSPHATE CAP 45 MG		OXYCODONE HCL SOLN 5 MG/5ML	232
OMEPRazole CAP DELAYED RELEASE		(BASE EQUIV)	22	OXYCODONE HCL TAB 5 MG	232
40 MG	238	OSELTAMIVIR PHOSPHATE CAP 75 MG		OXYCODONE HCL TAB 10 MG	232
OMEPRazole MAGNESIUM FOR		(BASE EQUIV)	22	OXYCODONE HCL TAB 15 MG	232
DELAYED RELEASE SUSP PACKET 2.5 MG	239	OSELTAMIVIR PHOSPHATE FOR SUSP 6		OXYCODONE HCL TAB 20 MG	232
OMEPRazole MAGNESIUM FOR		MG/ML (BASE EQUIV)	23	OXYCODONE HCL TAB 30 MG	232
DELAYED RELEASE SUSP PACKET 10 MG	238	OSILODROSTAT PHOSPHATE TAB 1 MG	166	OXYCODONE W/ ACETAMINOPHEN TAB	
*OMEPRazole SUSP 2 MG/ML		OSILODROSTAT PHOSPHATE TAB 5 MG	166	2.5-325 MG	230
(COMPOUND KIT)**	238	OSIMERTINIB MESYLATE TAB 40 MG		OXYCODONE W/ ACETAMINOPHEN TAB	
ONDANSETRON HCL ORAL SOLN 4		(BASE EQUIVALENT)	212	2.5-325 MG	232
MG/5ML	118	OSIMERTINIB MESYLATE TAB 80 MG		OXYCODONE W/ ACETAMINOPHEN TAB	
ONDANSETRON HCL TAB 4 MG	118	(BASE EQUIVALENT)	212	5-325 MG	230
ONDANSETRON HCL TAB 8 MG	118	OSPEMIFENE TAB 60 MG	245	OXYCODONE W/ ACETAMINOPHEN TAB	
ONDANSETRON HCL TAB 24 MG	118	OTeseconazole CAP THERAPY PACK		5-325 MG	232
ONDANSETRON ORALLY		150 MG (12 WEEKS)	42	OXYCODONE W/ ACETAMINOPHEN TAB	
DISINTEGRATING TAB 4 MG	118	OXAPROZIN TAB 600 MG	217	7.5-325 MG	230
ONDANSETRON ORALLY		OXAPROZIN TAB 600 MG	219	OXYCODONE W/ ACETAMINOPHEN TAB	
DISINTEGRATING TAB 8 MG	118	OXAZEPAM CAP 10 MG	62	7.5-325 MG	232
OPICAPONE CAP 25 MG	49	OXAZEPAM CAP 15 MG	62	OXYCODONE W/ ACETAMINOPHEN TAB	
OPICAPONE CAP 50 MG	49	OXAZEPAM CAP 30 MG	62	10-325 MG	230
OPIUM TINCTURE 1% (10 MG/ML)		OXCARBAZEPINE SUSP 300 MG/5ML (60		OXYCODONE W/ ACETAMINOPHEN TAB	
(MORPHINE EQUIV)	136	MG/ML)	254	10-325 MG	231
*ORAL ELECTROLYTE SOLUTION***	111	OXCARBAZEPINE SUSP 300 MG/5ML (60		OXYMETAZOLINE HCL CREAM 1%	90
*ORAL ELECTROLYTE SOLUTION***	114	MG/ML)	254	OXYMETAZOLINE HCL OPHTH SOLN 0.1%	221
*ORAL ELECTROLYTE SOLUTION***	114	OXCARBAZEPINE TAB 150 MG	254	OXYMORPHONE HCL TAB 5 MG	232
*ORAL VEHICLES***	189	OXCARBAZEPINE TAB 150 MG	254	OXYMORPHONE HCL TAB 10 MG	232
*ORAL VEHICLES***	197	OXCARBAZEPINE TAB 300 MG	254	OXYMORPHONE HCL TAB ER 12HR 5 MG	228

OXYMORPHONE HCL TAB ER 12HR 7.5 MG .228	PANCRELIPASE (LIP-PROT-AMYL) DR	PAROXETINE MESYLATE CAP 7.5 MG
OXYMORPHONE HCL TAB ER 12HR 10 MG .228	CAP 15000-47000-63000 UNIT .140	(BASE EQUIV).....257
OXYMORPHONE HCL TAB ER 12HR 15 MG .228	PANCRELIPASE (LIP-PROT-AMYL) DR	PASIREOTIDE DIASPARTATE INJ 0.3 MG/
OXYMORPHONE HCL TAB ER 12HR 20 MG .228	CAP 16000-57500-60500 UNIT .138	ML (BASE EQUIV).....167
OXYMORPHONE HCL TAB ER 12HR 30 MG .228	PANCRELIPASE (LIP-PROT-AMYL) DR	PASIREOTIDE DIASPARTATE INJ 0.6 MG/
OXYMORPHONE HCL TAB ER 12HR 40 MG .228	CAP 16800-56800-98400 UNIT .138	ML (BASE EQUIV).....167
OZANIMOD CAP PACK 4 X 0.23 MG & 3 X	PANCRELIPASE (LIP-PROT-AMYL) DR	PASIREOTIDE DIASPARTATE INJ 0.9 MG/
0.46 MG.....216	CAP 20000-63000-84000 UNIT.....140	ML (BASE EQUIV).....167
OZANIMOD CAP PACK 4 X 0.23 MG & 3 X	PANCRELIPASE (LIP-PROT-AMYL) DR	PATROMER SORBITE CALCIUM FOR
0.46 MG & 21 X 0.92 MG 216	CAP 21000-54700-83900 UNIT.....138	SUSP PACKET 1 GM (BASE EQ) 118
OZANIMOD HCL CAP 0.92 MG 216	PANCRELIPASE (LIP-PROT-AMYL) DR	PATROMER SORBITE CALCIUM FOR
OZENOXACIN CREAM 1%.....241	CAP 24000-76000-120000 UNIT 137	SUSP PACKET 8.4 GM (BASE EQ) 118
PALBOCICLIB CAP 75 MG.....210	PANCRELIPASE (LIP-PROT-AMYL) DR	PATROMER SORBITE CALCIUM FOR
PALBOCICLIB CAP 100 MG 210	CAP 24000-86250-90750 UNIT.....138	SUSP PACKET 16.8 GM (BASE EQ) 118
PALBOCICLIB CAP 125 MG.....210	PANCRELIPASE (LIP-PROT-AMYL) DR	PATROMER SORBITE CALCIUM FOR
PALBOCICLIB TAB 75 MG 210	CAP 25000-79000-105000 UNIT 140	SUSP PACKET 25.2 GM (BASE EQ) 118
PALBOCICLIB TAB 100 MG.....210	PANCRELIPASE (LIP-PROT-AMYL) DR	PAZOPANIB HCL TAB 200 MG (BASE
PALBOCICLIB TAB 125 MG 210	CAP 36000-114000-180000 UNIT 137	EQUIV).....211
PALIPERIDONE TAB ER 24HR 1.5 MG 8	PANCRELIPASE (LIP-PROT-AMYL) DR	PAZOPANIB HCL TAB 400 MG (BASE
PALIPERIDONE TAB ER 24HR 3 MG 8	CAP 37000-97300-149900 UNIT 138	EQUIV).....211
PALIPERIDONE TAB ER 24HR 6 MG 8	PANCRELIPASE (LIP-PROT-AMYL) DR	PEANUT ALLERGEN POWDER-DNFP
PALIPERIDONE TAB ER 24HR 9 MG 9	CAP 40000-126000-168000 UNIT 140	MAINTENANCE PACKET 300 MG.....198
PALOPEGTERIPARATIDE PEN-INJ 168	PANCRELIPASE (LIP-PROT-AMYL) DR	PEANUT ALLERGEN POWDER-DNFP
MCG/0.56ML (TERIPARATIDE EQ).....139	CAP 60000-189600-252600 UNIT.....140	TITRATION PACKET 300 MG 198
PALOPEGTERIPARATIDE PEN-INJ 294	PANCRELIPASE (LIP-PROT-AMYL) TAB	PEANUT POWDER-DNFP CAP SPRINKLE
MCG/0.98ML (TERIPARATIDE EQ).....139	10440-39150-39150 UNIT 139	PACK 1 X 1 MG (1 MG DOSE).....198
PALOPEGTERIPARATIDE PEN-INJ 420	PANCRELIPASE (LIP-PROT-AMYL) TAB	PEANUT POWDER-DNFP CAP SPRINKLE
MCG/1.4ML (TERIPARATIDE EQ).....140	20880-78300-78300 UNIT.....139	PACK 2 X 20 MG (40 MG DOSE).....198
PALOVAROTENE CAP 1.5 MG 204	PANTOPRAZOLE SODIUM EC TAB 20 MG	PEANUT POWDER-DNFP CAP SPRINKLE
PALOVAROTENE CAP 1 MG 204	(BASE EQUIV).....238	PACK 3 X 1 MG (3 MG DOSE) 198
PALOVAROTENE CAP 2.5 MG 204	PANTOPRAZOLE SODIUM EC TAB 40 MG	PEANUT POWDER-DNFP CAP SPRINKLE
PALOVAROTENE CAP 5 MG 204	(BASE EQUIV).....238	PACK 4 X 20 MG (80 MG DOSE) 198
PALOVAROTENE CAP 10 MG 204	PANTOPRAZOLE SODIUM FOR DELAYED	PEANUT POWDER-DNFP CAP SPRINKLE
PANCRELIPASE (LIP-PROT-AMYL) DR	RELEASE SUSP PACKET 40 MG.....238	PACK 6 X 1 MG (6 MG DOSE) 198
CAP 2600-8800-15200 UNIT 138	PANTOPRAZOLE SODIUM FOR DELAYED	PEANUT POWDER-DNFP CAP SPRINKLE
PANCRELIPASE (LIP-PROT-AMYL) DR	RELEASE SUSP PACKET 40 MG.....239	PACK 20 MG (20 MG DOSE) 198
CAP 3000-9500-15000 UNIT 137	*PANTOPRAZOLE SODIUM SUSP 4 MG/	PEANUT POWDER-DNFP PACK 2 X 1 MG &
PANCRELIPASE (LIP-PROT-AMYL) DR	ML (COMPOUND KIT)**.....238	10 MG (12 MG DOSE).....198
CAP 3000-10000-14000 UNIT.....140	PARICALCITOL CAP 1 MCG 181	PEANUT POWDER-DNFP PACK 2 X 20 MG
PANCRELIPASE (LIP-PROT-AMYL) DR	PARICALCITOL CAP 1 MCG 181	& 2 X 100 MG (240 MG DOSE) 198
CAP 4000-14375-15125 UNIT 138	PARICALCITOL CAP 2 MCG 181	PEANUT POWDER-DNFP PACK 2 X 100 MG
PANCRELIPASE (LIP-PROT-AMYL) DR	PARICALCITOL CAP 2 MCG 181	(200 MG DOSE).....198
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PANCRELIPASE (LIP-PROT-AMYL) DR	PAROMOMYCIN SULFATE CAP 250 MG 12	& 100 MG (160 MG DOSE).....198
CAP 5000-17000-24000 UNIT.....140	PAROXETINE HCL ORAL SUSP 10	PEANUT POWDER-DNFP PACK 20 MG &
PANCRELIPASE (LIP-PROT-AMYL) DR	MG/5ML (BASE EQUIV).....257	100 MG (120 MG DOSE).....198
CAP 6000-19000-30000 UNIT 137	PAROXETINE HCL ORAL SUSP 10	PEANUT POWDER-DNFP STARTER PACK
PANCRELIPASE (LIP-PROT-AMYL) DR	MG/5ML (BASE EQUIV).....257	0.5 & 1 & 1.5 & 3 & 6 MG 197
CAP 8000-28750-30250 UNIT 138	PAROXETINE HCL TAB 10 MG 257	PEANUT POWDER-DNFP STARTER PACK
PANCRELIPASE (LIP-PROT-AMYL) DR	PAROXETINE HCL TAB 20 MG 257	0.5 & 1 & 1.5 & 3 & 6 MG 197
CAP 10000-32000-42000 UNIT 140	PAROXETINE HCL TAB 30 MG 257	PEANUT POWDER-DNFP STARTER PACK
PANCRELIPASE (LIP-PROT-AMYL) DR	PAROXETINE HCL TAB 40 MG 257	0.5 & 1 & 1.5 & 3 MG.....197
CAP 10500-35500-61500 UNIT.....138	PAROXETINE HCL TAB ER 24HR 12.5 MG ..256	*PEDIATRIC MULTIPLE VITAMINS W/
PANCRELIPASE (LIP-PROT-AMYL) DR	PAROXETINE HCL TAB ER 24HR 25 MG 257	FL-FE CHEW TAB 0.5-10 MG** 271
CAP 12000-38000-60000 UNIT 137	PAROXETINE HCL TAB ER 24HR 37.5 MG ...256	*PEDIATRIC MULTIPLE VITAMINS W/
		FL-FE DROPS 0.25-7 MG/ML**.....268

*PEDIATRIC MULTIPLE VITAMINS W/ FL-FE DROPS 0.25-10 MG/ML**	269	*PEDIATRIC MULTIPLE VITAMIN W/ FLUORIDE SUSP 0.25 MG/ML***	271	PEGVALIASE-PQPZ SUBCUTANEOUS SOLN PREF SYRINGE 10 MG/0.5ML	138
*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.5 MG***	268	*PEDIATRIC MULTIPLE VITAMIN W/ FLUORIDE SUSP 0.25 MG/ML***	273	PEGVALIASE-PQPZ SUBCUTANEOUS SOLN PREF SYRINGE 20 MG/ML	138
*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.5 MG***	268	*PEDIATRIC MULTIPLE VITAMIN W/ FLUORIDE SUSP 0.25 MG/ML***	273	PEGVISOMANT FOR INJ 10 MG (AS PROTEIN)	167
*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.5 MG***	269	*PEDIATRIC VITAMINS ACD W/ FLUORIDE SOLN 0.5 MG/ML***	116	PEGVISOMANT FOR INJ 15 MG (AS PROTEIN)	167
*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.5 MG***	269	*PEDIATRIC VITAMINS ACD W/ FLUORIDE SOLN 0.25 MG/ML***	116	PEGVISOMANT FOR INJ 20 MG (AS PROTEIN)	167
*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.5 MG***	271	*PED VIT ACD & L-METHYLFOLATE W/ FLUORIDE SUSP 0.5 MG/ML***	273	PEGVISOMANT FOR INJ 25 MG (AS PROTEIN)	167
*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.5 MG***	272	*PED VIT ACD & L-METHYLFOLATE W/ FLUORIDE SUSP 0.25 MG/ML***	273	PEGVISOMANT FOR INJ 30 MG (AS PROTEIN)	167
*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.25 MG***	268	PEG 3350-KCL-NA BICARB-NACL-NA SULFATE FOR SOLN 236 GM	177	PEMIGATINIB TAB 4.5 MG	119
*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.25 MG***	269	PEG 3350-KCL-NA BICARB-NACL-NA SULFATE FOR SOLN 236 GM	177	PEMIGATINIB TAB 9 MG	119
*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.25 MG***	269	PEG 3350-KCL-NA BICARB-NACL-NA SULFATE FOR SOLN 236 GM	178	PEMIGATINIB TAB 13.5 MG	119
*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.25 MG***	269	PEG 3350-KCL-NA BICARB-NACL-NA SULFATE FOR SOLN 240 GM	177	PENCICLOVIR CREAM 1%	43
*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.25 MG***	269	PEG 3350-KCL-NACL-NA SULFATE-MAG SULFATE FOR SOLN 178.7 GM	135	PENCICLOVIR CREAM 1%	43
*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.25 MG***	271	PEG 3350-KCL-NACL-NA SULFATE-NA ASCORBATE-C FOR SOLN 100 GM	178	PENICILLAMINE TAB 250 MG	140
*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.25 MG***	272	PEG 3350-KCL-NACL-NA SULFATE-NA ASCORBATE-C FOR SOLN 100 GM	178	PENICILLAMINE TAB 250 MG	141
*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.75 MG***	267	PEG 3350-KCL-NACL-NA SULFATE-NA ASCORBATE-C FOR SOLN 140 GM	178	PENICILLIN V POTASSIUM FOR SOLN 125 MG/5ML	66
*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 1 MG***	268	PEG 3350-KCL-SOD BICARB-NACL FOR SOLN 420 GM	177	PENICILLIN V POTASSIUM FOR SOLN 250 MG/5ML	66
*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 1 MG***	269	PEG 3350-KCL-SOD BICARB-NACL FOR SOLN 420 GM	178	PENICILLIN V POTASSIUM TAB 250 MG	66
*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 1 MG***	269	PEGCETACOPLAN SUBCUTANEOUS SOLN 1080 MG/20ML (54 MG/ML)	67	PENICILLIN V POTASSIUM TAB 500 MG	66
*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 1 MG***	271	PEGFILGRASTIM-CBQV SOLN AUTO- INJECTOR 6 MG/0.6ML	68	PENTAMIDINE ISETHIONATE FOR NEBULIZATION SOLN 300 MG	50
*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 1 MG***	272	PEGFILGRASTIM-CBQV SOLN PREFILLED SYRINGE 6 MG/0.6ML	68	PENTAMIDINE ISETHIONATE FOR NEBULIZATION SOLN 300 MG	50
*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE SOLN 0.5 MG/ML***	269	PEGFILGRASTIM SOLN PREFILLED SYRINGE 6 MG/0.6ML	67	PENTAZOCINE W/ NALOXONE HCL TAB 50-0.5 MG	232
*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE SOLN 0.5 MG/ML***	273	PEGINTERFERON ALFA-2A INJ 180 MCG/ML17 PREFILLED SYR 180 MCG/0.5ML	17	PENTOSAN POLYSULFATE SODIUM CAPS 100 MG	141
*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE SOLN 0.25 MG/ML***	268	PEGINTERFERON ALFA-2A SOLN PREFILLED SYR 125 MCG/0.5ML	216	PENTOXIFYLLINE TAB ER 400 MG	79
*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE SOLN 0.25 MG/ML***	268	PEGINTERFERON BETA-1A IM SOLN PREFILLED SYR 125 MCG/0.5ML	216	PERAMPANEL SUSP 0.5 MG/ML	143
*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE SOLN 0.25 MG/ML***	269	PEGINTERFERON BETA-1A SOLN AUTO- INJ 63 & 94 MCG/0.5ML PACK	216	PERAMPANEL SUSP 0.5 MG/ML	145
*PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE SOLN 0.25 MG/ML***	272	PEGINTERFERON BETA-1A SOLN AUTO- INJECTOR 125 MCG/0.5ML	216	PERAMPANEL TAB 2 MG	143
*PEDIATRIC MULTIPLE VITAMIN W/ FL- FE SUSP 0.25-7 MG/ML**	271	PEGINTERFERON BETA-1A SOLN PREFILLED SYRINGE 125 MCG/0.5ML	216	PERAMPANEL TAB 2 MG	145
*PEDIATRIC MULTIPLE VITAMIN W/ FLUORIDE SUSP 0.25 MG/ML***	269	PEGINTERFERON BETA-1A SOLN PREF SYR 63 & 94 MCG/0.5ML PACK	216	PERAMPANEL TAB 4 MG	143
		PEGVALIASE-PQPZ SUBCUTANEOUS SOLN PREF SYRINGE 2.5 MG/0.5ML	138	PERAMPANEL TAB 4 MG	145
				PERAMPANEL TAB 6 MG	143
				PERAMPANEL TAB 6 MG	145
				PERAMPANEL TAB 8 MG	143
				PERAMPANEL TAB 8 MG	145
				PERAMPANEL TAB 10 MG	143
				PERAMPANEL TAB 10 MG	145
				PERAMPANEL TAB 12 MG	143
				PERAMPANEL TAB 12 MG	145
				PERFLUOROHEXYLOCTANE OPHTH SOLN 1.338 GM/ML	220
				PERINDOPRIL ERBUMINE TAB 2 MG	15
				PERINDOPRIL ERBUMINE TAB 4 MG	15
				PERINDOPRIL ERBUMINE TAB 8 MG	15
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PERMETHRIN CREAM 5%.....	234	PHENYTOIN SODIUM EXTENDED CAP 100 MG.....	253	PIROXICAM CAP 20 MG.....	219
PERPHENAZINE-AMITRIPTYLINE TAB 2-10 MG.....	262	PHENYTOIN SODIUM EXTENDED CAP 100 MG.....	254	PIRTOBRUTINIB TAB 50 MG.....	45
PERPHENAZINE-AMITRIPTYLINE TAB 2-25 MG.....	262	PHENYTOIN SODIUM EXTENDED CAP 200 MG.....	254	PIRTOBRUTINIB TAB 100 MG.....	45
PERPHENAZINE-AMITRIPTYLINE TAB 4-10 MG.....	262	PHENYTOIN SODIUM EXTENDED CAP 200 MG.....	254	PITAVASTATIN CALCIUM TAB 1 MG.....	107
PERPHENAZINE-AMITRIPTYLINE TAB 4-25 MG.....	262	PHENYTOIN SODIUM EXTENDED CAP 300 MG.....	254	PITAVASTATIN CALCIUM TAB 1 MG.....	107
PERPHENAZINE-AMITRIPTYLINE TAB 4-50 MG.....	262	PHENYTOIN SODIUM EXTENDED CAP 300 MG.....	254	PITAVASTATIN CALCIUM TAB 2 MG.....	107
PERPHENAZINE TAB 2 MG.....	39	PHENYTOIN SODIUM EXTENDED CAP 300 MG.....	254	PITAVASTATIN CALCIUM TAB 2 MG.....	107
PERPHENAZINE TAB 4 MG.....	39	PHENYTOIN SUSP 125 MG/5ML.....	253	PITAVASTATIN CALCIUM TAB 4 MG.....	107
PERPHENAZINE TAB 8 MG.....	39	PHENYTOIN SUSP 125 MG/5ML.....	254	PITAVASTATIN CALCIUM TAB 4 MG.....	107
PERPHENAZINE TAB 16 MG.....	39	PHYTONADIONE TAB 5 MG.....	271	PITAVASTATIN CALCIUM TAB 4 MG.....	107
PETROLATUM OINTMENT.....	200	PILOCARPINE HCL OPHTH SOLN 1%.....	225	PITAVASTATIN MAGNESIUM TAB 2 MG (BASE EQUIV).....	107
PEXIDARTINIB HCL CAP 125 MG (BASE EQUIVALENT).....	213	PILOCARPINE HCL OPHTH SOLN 2%.....	225	PITAVASTATIN MAGNESIUM TAB 4 MG (BASE EQUIV).....	107
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*PHARMACEUTICAL EXCIPIENTS (BULK) LIQUID**.....	197	PILOCARPINE HCL TAB 5 MG.....	85	PLECANATIDE TAB 3 MG.....	137
PHENAZOPYRIDINE HCL TAB 100 MG.....	141	PILOCARPINE HCL TAB 7.5 MG.....	85	PLERIXAFOR SUBCUTANEOUS INJ 24 MG/1.2ML (20 MG/ML).....	67
PHENAZOPYRIDINE HCL TAB 100 MG.....	141	PILOCARPINE HCL TAB 7.5 MG.....	85	PLERIXAFOR SUBCUTANEOUS INJ 24 MG/1.2ML (20 MG/ML).....	67
PHENAZOPYRIDINE HCL TAB 200 MG.....	141	PIMAVANSERIN TARTRATE CAP 34 MG (BASE EQUIVALENT).....	8	PNEUMOCOCCAL 15-VALENT CONJUGATE VACCINE SUS PREF SYR 0.5 ML.....	265
PHENAZOPYRIDINE HCL TAB 200 MG.....	141	PIMAVANSERIN TARTRATE TAB 10 MG (BASE EQUIVALENT).....	8	PNEUMOCOCCAL 20-VALENT CONJUGATE VACCINE SUS PREF SYR 0.5 ML.....	264
PHENAZOPYRIDINE HCL TAB 200 MG.....	141	PIMECROLIMUS CREAM 1%.....	90	PNEUMOCOCCAL 21-VALENT CONJUGATE VACCINE SOLN PREF SYR 0.5ML.....	262
PHENELZINE SULFATE TAB 15 MG.....	213	PIMOZIDE TAB 1 MG.....	6	PNEUMOCOCCAL VACCINE POLYVALENT INJ SOLN 25 MCG/0.5ML.....	264
PHENELZINE SULFATE TAB 15 MG.....	213	PIMOZIDE TAB 2 MG.....	6	PNEUMOCOCCAL VACCINE POLYVALENT SOLN PREF SYR 25 MCG/0.5ML.....	264
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PHENOBARBITAL ELIXIR 20 MG/5ML.....	32	PINDOLOL TAB 10 MG.....	63	PODOFILOX GEL 0.5%.....	90
PHENOBARBITAL TAB 15 MG.....	32	PIOGLITAZONE HCL-GLIMEPIRIDE TAB 30-2 MG.....	35	PODOFILOX SOLN 0.5%.....	90
PHENOBARBITAL TAB 16.2 MG.....	32	PIOGLITAZONE HCL-GLIMEPIRIDE TAB 30-2 MG.....	37	PODOPHYLLUM RESIN SOLN 25%.....	90
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PHENOBARBITAL TAB 64.8 MG.....	32	PIOGLITAZONE HCL-METFORMIN HCL TAB 15-850 MG.....	34	POLYETHYLENE GLYCOL 1450 POWDER.....	178
PHENOBARBITAL TAB 97.2 MG.....	32	PIOGLITAZONE HCL-METFORMIN HCL TAB 15-850 MG.....	37	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	176
PHENOL LIQUID (BULK).....	27	PIOGLITAZONE HCL TAB 15 MG (BASE EQUIV).....	37	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	176
PHENOL LIQUID (BULK).....	27	PIOGLITAZONE HCL TAB 30 MG (BASE EQUIV).....	37	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	176
PHENOL LIQUID (BULK).....	27	PIOGLITAZONE HCL TAB 45 MG (BASE EQUIV).....	37	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	176
PHENOXYBENZAMINE HCL CAP 10 MG.....	11	PIRFENIDONE CAP 267 MG.....	243	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	176
PHENYLALANINE PACKET 50 MG.....	114	PIRFENIDONE TAB 267 MG.....	241	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	176
PHENYLEPHRINE-CHLORPHEN-DM LIQUID 7.5-4-30 MG/5ML.....	243	PIRFENIDONE TAB 534 MG.....	244	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	176
PHENYLEPHRINE HCL OPHTH SOLN 2.5%.....	220	PIRFENIDONE TAB 801 MG.....	241	POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	176
PHENYLEPHRINE HCL OPHTH SOLN 2.5%.....	220	PIROXICAM CAP 10 MG.....	219		
PHENYLEPHRINE HCL OPHTH SOLN 10%.....	220				
PHENYLEPHRINE HCL OPHTH SOLN 10%.....	220				
PHENYTOIN CHEW TAB 50 MG.....	253				
PHENYTOIN CHEW TAB 50 MG.....	254				
PHENYTOIN SODIUM EXTENDED CAP 30 MG.....	253				

POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	176	POSACONAZOLE TAB DELAYED RELEASE 100 MG.....	42	POTASSIUM CITRATE & CITRIC ACID SOLN 1100-334 MG/5ML.....	112
POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	176	POTASSIUM BICARBONATE-CITRIC ACID EFFER TAB 10 MEQ.....	110	POTASSIUM CITRATE TAB ER 5 MEQ (540 MG).....	115
POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	176	POTASSIUM BICARBONATE-CITRIC ACID EFFER TAB 20 MEQ.....	110	POTASSIUM CITRATE TAB ER 5 MEQ (540 MG).....	116
POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	176	POTASSIUM BICARBONATE EFFER TAB 25 MEQ.....	110	POTASSIUM CITRATE TAB ER 10 MEQ (1080 MG).....	114
POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	176	POTASSIUM BICARBONATE EFFER TAB 25 MEQ.....	112	POTASSIUM CITRATE TAB ER 10 MEQ (1080 MG).....	116
POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	176	POTASSIUM BICARBONATE EFFER TAB 25 MEQ.....	113	POTASSIUM CITRATE TAB ER 15 MEQ (1620 MG).....	115
POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	176	POTASSIUM CHLORIDE CAP ER 8 MEQ....	114	POTASSIUM CITRATE TAB ER 15 MEQ (1620 MG).....	116
POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	176	POTASSIUM CHLORIDE CAP ER 10 MEQ....	114	POTASSIUM IODIDE ORAL SOLN 1 GM/ML 200	
POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	176	POTASSIUM CHLORIDE MICROENCAPSULATED CRYST ER TAB 10		POTASSIUM IODIDE ORAL SOLN 1 GM/ML 204	
POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	176	MEQ.....	112	POTASSIUM PHOSPHATE DIBASIC GRANULES.....	201
POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	176	POTASSIUM CHLORIDE MICROENCAPSULATED CRYST ER TAB 10		POTASSIUM PHOSPHATE MONOBASIC TAB 500 MG.....	112
POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	176	MEQ.....	115	POTASSIUM & SODIUM ACID PHOSPHATES TAB 305-700 MG.....	112
POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	176	POTASSIUM CHLORIDE MICROENCAPSULATED CRYST ER TAB 10		POT PHOS MONOBASIC W/SOD PHOS DI & MONOBAS TAB 155-852-130MG.....	112
POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	176	MEQ.....	115	POT PHOS MONOBASIC W/SOD PHOS DI & MONOBAS TAB 155-852-130MG.....	114
POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	176	POTASSIUM CHLORIDE MICROENCAPSULATED CRYST ER TAB 15		POT PHOS MONOBASIC W/SOD PHOS DI & MONOBAS TAB 155-852-130MG.....	114
POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	176	MEQ.....	113	POT PHOS MONOBASIC W/SOD PHOS DI & MONOBAS TAB 155-852-130MG.....	114
POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	176	POTASSIUM CHLORIDE MICROENCAPSULATED CRYST ER TAB 15		POT PHOS MONOBASIC W/SOD PHOS DI & MONOBAS TAB 155-852-130MG.....	114
POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	177	MEQ.....	115	POT & SOD CITRATES W/ CIT AC SOLN 550-500-334 MG/5ML.....	116
POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	177	POTASSIUM CHLORIDE MICROENCAPSULATED CRYST ER TAB 20		POVIDONE-IODINE OPHTH SOLN 5%.....	223
POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP.....	177	MEQ.....	113	PRALSETINIB CAP 100 MG.....	209
POLYETHYLENE GLYCOL 3350 POWDER....	178	POTASSIUM CHLORIDE MICROENCAPSULATED CRYST ER TAB 20		PRAMIPEXOLE DIHYDROCHLORIDE TAB 0.5 MG.....	104
POLYETHYLENE GLYCOL 8000 OINT.....	200	MEQ.....	115	PRAMIPEXOLE DIHYDROCHLORIDE TAB 0.25 MG.....	104
POLYETHYLENE GLYCOL OINTMENT.....	182	POTASSIUM CHLORIDE ORAL SOLN 10% (20 MEQ/15ML).....	114	PRAMIPEXOLE DIHYDROCHLORIDE TAB 0.75 MG.....	104
POLYETHYLENE GLYCOL OINTMENT.....	198	POTASSIUM CHLORIDE ORAL SOLN 20% (40 MEQ/15ML).....	114	PRAMIPEXOLE DIHYDROCHLORIDE TAB 0.125 MG.....	104
POLYETHYLENE GLYCOL OINTMENT.....	200	POTASSIUM CHLORIDE POWDER PACKET 20 MEQ.....	112	PRAMIPEXOLE DIHYDROCHLORIDE TAB 0.125 MG.....	104
POLYMYXIN B-TRIMETHOPRIM OPHTH SOLN 10000 UNIT/ML-0.1%.....	221	POTASSIUM CHLORIDE POWDER PACKET 20 MEQ.....	114	PRAMIPEXOLE DIHYDROCHLORIDE TAB 1.5 MG.....	104
POLYSORBATE 80 LIQ.....	200	POTASSIUM CHLORIDE TAB ER 8 MEQ (600 MG).....	112	PRAMIPEXOLE DIHYDROCHLORIDE TAB 1 MG.....	104
POLYSORBATE 80 LIQ.....	200	POTASSIUM CHLORIDE TAB ER 8 MEQ (600 MG).....	114	PRAMLINTIDE ACETATE PEN-INJ 1500 MCG/1.5ML (1000 MCG/ML).....	38
POMALIDOMIDE CAP 1 MG.....	23	POTASSIUM CHLORIDE TAB ER 10 MEQ....	112	PRAMLINTIDE ACETATE PEN-INJ 2700 MCG/2.7ML (1000 MCG/ML).....	38
POMALIDOMIDE CAP 1 MG.....	23	POTASSIUM CHLORIDE TAB ER 10 MEQ....	114	PRAMOXINE-CHLOROXYLENOL OTIC LIQUID 1-0.1%.....	234
POMALIDOMIDE CAP 2 MG.....	23	POTASSIUM CHLORIDE TAB ER 15 MEQ....	114	PRAMOXINE-HC AEROSOL FOAM 1-1%.....	89
POMALIDOMIDE CAP 2 MG.....	23	POTASSIUM CHLORIDE TAB ER 20 MEQ (1500 MG).....	112	PRAMOXINE-HC CREAM 1-1%.....	90
POMALIDOMIDE CAP 3 MG.....	23	POTASSIUM CHLORIDE TAB ER 20 MEQ (1500 MG).....	114	PRAMOXINE-HC CREAM 1-2.5%.....	142
POMALIDOMIDE CAP 3 MG.....	23	POTASSIUM CITRATE & CITRIC ACID POWDER PACK 3300-1002 MG.....	110	PRAMOXINE-HC CREAM 1-2.5%.....	143
POMALIDOMIDE CAP 4 MG.....	23				
POMALIDOMIDE CAP 4 MG.....	23				
PONATINIB HCL TAB 15 MG (BASE EQUIV)	210				
PONATINIB HCL TAB 45 MG (BASE EQUIV)	210				
POSACONAZOLE FOR DELAYED RELEASE SUSP PACKET 300 MG.....	41				
POSACONAZOLE SUSP 40 MG/ML.....	41				
POSACONAZOLE SUSP 40 MG/ML.....	42				
POSACONAZOLE SUSP 40 MG/ML.....	42				

PRAMOXINE-HC LOTION 1-1%	90	PREDNISONE TAB THERAPY PACK 5 MG		*PRENATAL MV W/FE POLY-FA CHW 29-1	
PRAMOXINE-HC LOTION 1-1%	90	(21)	158	MG & DHA CAP 250 MG PAK *	273
PRAMOXINE-HC LOTION 1-2.5%	90	PREDNISONE TAB THERAPY PACK 5 MG		*PRENATAL MV W/ FE POLYSAC CMPLX-	
PRAMOXINE-HC OINT 1-1%	143	(48)	158	FA-DHA CAP 29-1-200 MG***	274
PRAMOXINE-HC OINT 1-2.5%	143	PREDNISONE TAB THERAPY PACK 10 MG		*PRENATAL VITAMIN-FOLIC ACID TAB 1	
*PRASTERONE (DHEA) CREAM 4%		(21)	158	MG**	270
(COMPOUND KIT)***	187	PREDNISONE TAB THERAPY PACK 10 MG		*PRENATAL VITAMIN W/ IRON-FOLIC	
*PRASTERONE (DHEA) CREAM 10%		(48)	158	ACID TAB 90-1 MG***	113
(COMPOUND KIT)***	187	PREGABALIN CAP 25 MG	132	*PRENATAL VIT W/ DSS-FE FUMARATE-	
PRASTERONE VAGINAL INSERT 6.5 MG	13	PREGABALIN CAP 25 MG	133	FA TAB 29-1 MG***	272
PRASUGREL HCL TAB 5 MG (BASE EQUIV)	236	PREGABALIN CAP 50 MG	132	*PRENATAL VIT W/ DSS-FE FUMARATE-	
PRASUGREL HCL TAB 10 MG (BASE		PREGABALIN CAP 50 MG	133	FA TAB 29-1 MG***	273
EQUIV)	236	PREGABALIN CAP 75 MG	132	*PRENATAL VIT W/ DSS-IRON	
PRAVASTATIN SODIUM TAB 10 MG	107	PREGABALIN CAP 75 MG	133	CARBONYL-FA TAB 90-1 MG***	112
PRAVASTATIN SODIUM TAB 20 MG	107	PREGABALIN CAP 100 MG	132	*PRENATAL VIT W/ DSS-IRON	
PRAVASTATIN SODIUM TAB 40 MG	107	PREGABALIN CAP 100 MG	132	CARBONYL-FA TAB DR 29-1 MG***	109
PRAVASTATIN SODIUM TAB 80 MG	107	PREGABALIN CAP 150 MG	132	*PRENATAL VIT W/ FE BISGLYCINATE	
PRAZICUANTEL TAB 600 MG	16	PREGABALIN CAP 150 MG	132	CHELATE-FA TAB 29-1 MG***	266
PRAZICUANTEL TAB 600 MG	16	PREGABALIN CAP 200 MG	132	*PRENATAL VIT W/ FE CBN-FE ASP GLYC-	
PRAZOSIN HCL CAP 1 MG	11	PREGABALIN CAP 200 MG	132	FA TAB 30-20-1 MG***	270
PRAZOSIN HCL CAP 1 MG	11	PREGABALIN CAP 225 MG	132	*PRENATAL VIT W/ FE FUMARATE-FA	
PRAZOSIN HCL CAP 2 MG	11	PREGABALIN CAP 225 MG	133	CHEW TAB 29-1 MG***	267
PRAZOSIN HCL CAP 2 MG	12	PREGABALIN CAP 300 MG	132	*PRENATAL VIT W/ FE FUMARATE-FA	
PRAZOSIN HCL CAP 5 MG	11	PREGABALIN CAP 300 MG	133	CHEW TAB 29-1 MG***	272
PRAZOSIN HCL CAP 5 MG	12	PREGABALIN SOLN 20 MG/ML	132	*PRENATAL VIT W/ FE FUMARATE-FA	
PREDNISOLONE ACETATE OPTH SUSP		PREGABALIN SOLN 20 MG/ML	133	CHEW TAB 29-1 MG***	272
0.12%	223	PREGABALIN TAB ER 24HR 82.5 MG	133	*PRENATAL VIT W/ FE FUMARATE-FA	
PREDNISOLONE ACETATE OPTH SUSP 1%	223	PREGABALIN TAB ER 24HR 165 MG	133	CHEW TAB 29-1 MG***	273
PREDNISOLONE SODIUM PHOSPHATE		PREGABALIN TAB ER 24HR 330 MG	133	*PRENATAL VIT W/ FE FUMARATE-FA TAB	
OPHTH SOLN 1%	223	PREMIUM LECITHIN ORGANOGEL BASE		27-1 MG***	269
PREDNISOLONE SOD PHOS ORALLY		GEL	195	*PRENATAL VIT W/ FE FUMARATE-FA TAB	
DISINTEGR TAB 10 MG (BASE EQ)	158	PREMIUM LECITHIN ORGANOGEL BASE		27-1 MG***	269
PREDNISOLONE SOD PHOS ORALLY		GEL	200	*PRENATAL VIT W/ FE FUMARATE-FA TAB	
DISINTEGR TAB 10 MG (BASE EQ)	158	PREMIUM LECITHIN ORGANOGEL BASE		27-1 MG***	270
PREDNISOLONE SOD PHOS ORALLY		GEL	200	*PRENATAL VIT W/ FE FUMARATE-FA TAB	
DISINTEGR TAB 15 MG (BASE EQ)	158	PREMIUM LECITHIN ORGANOGEL BASE		27-1 MG***	270
PREDNISOLONE SOD PHOS ORALLY		GEL	200	*PRENATAL VIT W/ FE FUMARATE-FA TAB	
DISINTEGR TAB 15 MG (BASE EQ)	158	PREMIUM LECITHIN ORGANOGEL BASE		27-1 MG***	270
PREDNISOLONE SOD PHOS ORALLY		GEL	200	*PRENATAL VIT W/ FE FUMARATE-FA TAB	
DISINTEGR TAB 30 MG (BASE EQ)	158	PREMIUM LECITHIN ORGANOGEL BASE		27-1 MG***	270
PREDNISOLONE SOD PHOS ORALLY		KIT	200	*PRENATAL VIT W/ FE FUMARATE-FA TAB	
DISINTEGR TAB 30 MG (BASE EQ)	158	PREMIUM LECITHIN ORGANOGEL BASE		27-1 MG***	270
PREDNISOLONE SOD PHOSPHATE ORAL		KIT	200	*PRENATAL VIT W/ FE FUMARATE-FA TAB	
SOLN 5 MG/5ML (BASE EQUIV)	158	*PRENATAL MULTIVITAMINS &		27-1 MG***	271
PREDNISOLONE SOD PHOSPHATE ORAL		MINERALS W/IRON & FA TAB 0.8 MG***	272	*PRENATAL VIT W/ FE FUMARATE-FA TAB	
SOLN 15 MG/5ML (BASE EQUIV)	158	*PRENATAL MULTIVITAMINS &		27-1 MG***	271
PREDNISOLONE SOLN 15 MG/5ML	158	MINERALS W/ IRON & FA TAB 1 MG***	270	*PRENATAL VIT W/ FE FUMARATE-FA TAB	
PREDNISOLONE TAB 5 MG	158	*PRENATAL MULTIVITAMINS &		27-1 MG***	273
PREDNISONE CONC 5 MG/ML	158	MINERALS W/ IRON & FA TAB 1 MG***	272	*PRENATAL VIT W/ FE FUMARATE-FA TAB	
PREDNISONE ORAL SOLN 5 MG/5ML	158	*PRENATAL MULTIVITAMINS &		27-1 MG***	273
PREDNISONE TAB 1 MG	159	MINERALS W/ IRON & FA TAB 1 MG***	272	*PRENATAL VIT W/ FE FUMARATE-FA TAB	
PREDNISONE TAB 2.5 MG	159	*PRENATAL MV W/FE FUM-FA TAB 29-1		27-1 MG***	274
PREDNISONE TAB 5 MG	159	MG & DHA CAP 200 MG PACK *	270	*PRENATAL VIT W/ FE FUMARATE-FA TAB	
PREDNISONE TAB 10 MG	159	*PRENATAL MV W/FE FUM-FA TAB 65-1		28-1 MG***	273
PREDNISONE TAB 20 MG	159	MG & DHA CAP 250 MG PACK *	274	*PRENATAL VIT W/ FE FUMARATE-FA TAB	
PREDNISONE TAB 50 MG	159			29-1 MG***	267

*PRENATAL VIT W/ FE FUMARATE-FA TAB 29-1 MG***	270
*PRENATAL VIT W/ FE FUMARATE-FA TAB 60-1 MG***	271
*PRENATAL VIT W/ FE FUMARATE-FA TAB 60-1 MG***	273
*PRENATAL VIT W/ FE FUMARATE-FA TAB 65-1 MG***	274
*PRENATAL VIT W/ FE FUM-FA-OMEGA 3 CAP 28-1-200 MG***	267
*PRENATAL VIT W/ FE FUM-FA-OMEGA 3 CAP 28-1-200 MG***	273
*PRENATAL VIT W/ FE FUM-FA-OMEGA 3 CAP 28-1-200 MG***	274
*PRENATAL VIT W/ FE FUM-FE BISGLYCIN-FA CHEW TAB 28-1 MG***	269
*PRENATAL VIT W/ FE FUM-METHYLFOLATE-FA TAB 27-0.6-0.4 MG***	271
*PRENATAL VIT W/ FE GLUCONATE-FA TAB 6-0.5 MG***	269
*PRENATAL VIT W/ FE GLY CYS-FA-OMEGA 3 FATTY ACIDS CAP***	268
*PRENATAL VIT W/ FE POLYSAC CMLPX-FA CHEW TAB 29-1 MG***	273
*PRENATAL VIT W/ IRON CARBONYL-FA TAB 29-1 MG***	273
*PRENATAL VIT W/ IRON CARBONYL-FA TAB 30-1 MG***	269
*PRENATAL VIT W/ IRON CARBONYL-FA TAB 50-1.25 MG***	268
*PRENATAL VIT W/ IRON CARBONYL-FA TAB 50-1.25 MG***	270
*PRENATAL VIT W/O VIT A W/ FE BISGLYCINATE-FA TAB 32-1 MG***	270
*PRENATAL W/ B6-B12-CHOLECALCIFEROL-FOLIC ACID FILM 1 MG**	274
*PRENATAL W/ CALCIUM-VIT B6-VIT B12-FA-GINGER TAB 1 MG***	271
*PRENATAL W/ CALCIUM-VIT B6-VIT B12-FA-GINGER TAB 1 MG***	272
*PRENATAL W/ FE ASP GLY-L METHYLFOL-FA TAB 20-0.6-0.4 MG***	272
*PRENATAL W/FE FUM-FE POLY -FA-OMEGA 3 CAP 35-1 MG***	273
*PRENATAL W/FE FUM-FE POLY -FA-OMEGA 3 CAP 53.5-38-1 MG***	267
*PRENATAL W/FE FUM-FE POLY -FA-OMEGA 3 CAP 53.5-38-1 MG***	274
*PRENATAL W/O A VIT W/ FE FUMARATE-FA CAP 106.5-1 MG***	272
*PRENATAL W/O A W/FE CBN-DSS-FA-DHA CAP 28-1-250 MG***	271
PRENATAL W/O A W/FECBN-FE ASP GLYC-FA-FISH CAP 50-1-476 MG	270
*PRENATAL W/O A W/FE FUM-FE POLY-FA CAP 20-20-1.25 MG***	272

*PRENATAL W/O A W/FE FUM-FE POLY-FA CAP 85-1 MG***	268
*PRENATAL W/O A W/FE FUM-FE POLY-FA CAP 130-92.4-1 MG***	267
*PRENATAL W/O A W/ FEFUM-L METHYLFOL-FA TAB 18-0.6-0.4 MG***	274
PRENATAL W/O VIT A W/ FE FUM-DSS-FA-DHA CAP 27-1.25-300 MG	271
PRENATAL W/O VIT A W/ FE FUM-DSS-FA-DHA CAP 29-1.25-325 MG	271
*PRENAT-FE BIS-FE PROT SUCC-FA-CA TAB & OMEGA 3 CAP 200 PK**	267
*PRENAT-FE BIS-FE PROT SUCC-FA-CA TAB & OMEGA 3 CAP 200 PK**	274
*PRENAT MV & MIN W/ L-METHYLFOLATE-FA CHEW TAB 0.6-0.4 MG***	272
PRENAT VIT W/ FE PHOS-FA-OMEGA CHEW TAB 3.33-0.333-34.8 MG	274
*PRENAT W/ B2-B6-B12-D3-FOLIC ACID CHEW TAB 1.4 MG**	115
*PRENAT W/ FEPOLYCMPLX-METHYLFOL-FA CHEW TAB 29-0.6-0.4 MG**	273
*PRENAT W/FE POLY-METHYLFOL-FA-DHA CAP 29-0.6-0.4-200 MG***	274
*PRENAT W/FE POLY-METHYLFOL-FA-DHA CAP 90-0.6-0.4-200 MG***	274
*PRENAT W/FE POLY-NA FERED-FA TAB 25-1 & OMEGA CAP 400 MG***	267
PRENAT W/ IRON CBN-FE ASP GLYC-FA-OMEGA CAP 30-10-1-200 MG	270
PRENAT W/O A W/FEASPG-METHFOL-FA-DHA CAP 10-0.6-0.4-200 MG	272
PRENAT W/O A W/FEASPG-METHFOL-FA-DHA CAP 18-0.6-0.4-300 MG	272
PRENAT W/O A W/FEASPG-METHFOL-FA-DHA CAP 18-0.6-0.4-300 MG	272
PRENAT W/O A W/FEASP-METHLF-FA-OMEG CAP 30-0.75-0.25-470MG	272
PRENAT W/O A W/ FE BISGLYC-FA TAB 32-1 MG & OMEGA CAP PACK	270
PRENAT W/OA W/FECB-FEASP-METH-FA-DHA CAP 18-0.6-0.4-350 MG	272
*PRENAT W/O A W/FECBN-BISG-METHYLF-DHA CAP 38-1-225 MG**	270
*PRENAT W/O A W/FECBN-FEASPGLYC-FA-OMEGA CAP 35-5-1-200 MG**	270
PRENAT W/O A W/FECBN-FEGL-DSS-FA TAB 90 & DHA CAP 300MG PAK	267
PRENAT W/O A W/FECBN-FEGL-DSS-FA TAB & DHA CAP 300 MG PACK	267
PRENAT W/O A W/FECBN-FEGLU-FA TAB 20-1 MG & VIT B6 TAB PAK	267
*PRENAT W/O A W/FECBN-METHYLF-FA-DHA CAP 31-0.6-0.4-200 MG**	273

*PRENAT W/O A W/FECBN-METHYLF-FA-DHA CAP 31-0.6-0.4-200 MG**	274
PRENAT W/O A W/FE CHEL-FA TAB 30-1.4 MG & DHA CAP 300MG PK	115
PRENAT W/O A W/FE CHEL-FA TAB 30-1.4 MG & DHA CAP 300MG PK	117
*PRENAT W/O A W/ FE FUMARATE-METHYLFOLATE-FA-OMEGA 3 CAP***	271
*PRENAT W/O A W/FE FUM-FE CBN-DSS-FA-DHA CAP 27-1-260 MG***	267
*PRENAT W/O A W/FE FUM-FE CBN-FA-DHA CAP 27-1-200 MG***	267
*PRENAT W/O A W/FEFUM-METHFOL-FA-DHA CAP 27-0.6-0.4-300 MG**	271
*PRENAT W/O A W/FEFUM-METHFOL-FA-DHA CAP 27-0.6-0.4-300 MG**	274
*PRENAT W/O A W/FEFUM-METHFOL-FA-DHA CAP 27-0.6-0.4-400 MG**	272
*PRENAT W/O A W/FEFUM-METHFOL-FA-DHA CAP 28-0.6-0.4-400 MG**	272
*PRENAT W/O A W/FEFUM-METHFOL-FA-DHA CAP 30-0.6-0.4-200 MG**	274
*PRENAT W/O A W/FEFUM-METHYLFOL-OMEGAS CAP 27-1.13 MG***	269
*PRENAT W/O A W/FEFUM-METHYLFOL-OMEGAS CAP 27-1.13 MG***	274
*PRENAT W/OA W/FEFUM-NA FERED-FA-DHA CAP ER 30-1.4-200 MG***	271
*PRENAT W/OA W/FEFUM-NA FERED-FA-DHA CAP ER 30-1.4-200 MG***	274
PRETOMANID TAB 200 MG	45
PRIMAQUINE PHOSPHATE TAB 26.3 MG (15 MG BASE)	50
PRIMIDONE TAB 50 MG	134
PRIMIDONE TAB 50 MG	134
PRIMIDONE TAB 125 MG	134
PRIMIDONE TAB 250 MG	134
PRIMIDONE TAB 250 MG	134
PROBENECID TAB 500 MG	43
*PROBIOTIC PRODUCT - CAP**	136
PROCARBAZINE HCL CAP 50 MG	10
PROCHLORPERAZINE MALEATE TAB 5 MG (BASE EQUIVALENT)	39
PROCHLORPERAZINE MALEATE TAB 10 MG (BASE EQUIVALENT)	39
PROCHLORPERAZINE SUPPOS 25 MG	39
PROGESTERONE CAP 100 MG	237
PROGESTERONE CAP 200 MG	237
PROGESTERONE IM IN OIL 50 MG/ML	237
PROGESTERONE MICRONIZED (BULK) POWDER	201
PROGESTERONE VAGINAL GEL 4%	236
PROGESTERONE VAGINAL GEL 8%	236
PROGESTERONE VAGINAL INSERT 100 MG	236
PROGESTERONE VAGINAL INSERT 100 MG	237

PROMETHAZINE-DM SYRUP 6.25-15 MG/5ML	245	*PROTEIN ORAL LIQUID***	183	QUETIAPINE FUMARATE TAB 100 MG.....	9
PROMETHAZINE-DM SYRUP 6.25-15 MG/5ML	245	*PROTEIN ORAL LIQUID***	196	QUETIAPINE FUMARATE TAB 150 MG.....	9
PROMETHAZINE HCL ORAL SOLN 6.25 MG/5ML	44	*PROTEIN ORAL LIQUID***	201	QUETIAPINE FUMARATE TAB 200 MG	9
PROMETHAZINE HCL ORAL SOLN 6.25 MG/5ML	44	*PROTEIN ORAL PACK***	207	QUETIAPINE FUMARATE TAB 300 MG	9
PROMETHAZINE HCL SUPPOS 12.5 MG	44	*PROTEIN ORAL POWDER***	183	QUETIAPINE FUMARATE TAB 400 MG	9
PROMETHAZINE HCL SUPPOS 12.5 MG	44	*PROTEIN ORAL POWDER***	192	QUETIAPINE FUMARATE TAB ER 24HR 50 MG 9	
PROMETHAZINE HCL SUPPOS 25 MG	44	*PROTEIN ORAL POWDER***	192	QUETIAPINE FUMARATE TAB ER 24HR 150 MG.....	9
PROMETHAZINE HCL SUPPOS 25 MG	44	*PROTEIN ORAL POWDER***	197	QUETIAPINE FUMARATE TAB ER 24HR 200 MG	9
PROMETHAZINE HCL SUPPOS 50 MG.....	44	*PROTEIN ORAL POWDER***	201	QUETIAPINE FUMARATE TAB ER 24HR 300 MG	9
PROMETHAZINE HCL TAB 12.5 MG	44	*PROTEIN ORAL POWDER***	201	QUETIAPINE FUMARATE TAB ER 24HR 400 MG	9
PROMETHAZINE HCL TAB 25 MG	44	*PROTEIN ORAL POWDER***	201	QUINAPRIL HCL TAB 5 MG	16
PROMETHAZINE HCL TAB 50 MG	44	*PROTEIN ORAL POWDER***	201	QUINAPRIL HCL TAB 10 MG.....	15
PROMETHAZINE-PHENYLEPHRINE-CODEINE SYRUP 6.25-5-10 MG/5ML.....	244	*PROTEIN ORAL POWDER***	201	QUINAPRIL HCL TAB 20 MG.....	15
PROMETHAZINE & PHENYLEPHRINE SYRUP 6.25-5 MG/5ML.....	244	*PROTEIN ORAL POWDER***	206	QUINAPRIL HCL TAB 40 MG	16
PROMETHAZINE & PHENYLEPHRINE SYRUP 6.25-5 MG/5ML.....	244	*PROTEIN ORAL POWDER***	206	QUINAPRIL-HYDROCHLOROTHIAZIDE TAB 10-12.5 MG.....	75
PROMETHAZINE W/ CODEINE SYRUP 6.25-10 MG/5ML	244	*PROTEIN ORAL POWDER***	206	QUINAPRIL-HYDROCHLOROTHIAZIDE TAB 10-12.5 MG.....	79
PROPAFENONE HCL CAP ER 12HR 225 MG ..	24	*PROTEIN ORAL POWDER***	206	QUINAPRIL-HYDROCHLOROTHIAZIDE TAB 20-12.5 MG	75
PROPAFENONE HCL CAP ER 12HR 325 MG ..	24	*PROTEIN ORAL POWDER***	207	QUINAPRIL-HYDROCHLOROTHIAZIDE TAB 20-12.5 MG	79
PROPAFENONE HCL CAP ER 12HR 425 MG ..	24	*PROTEIN ORAL POWDER***	207	QUINAPRIL-HYDROCHLOROTHIAZIDE TAB 20-25 MG	79
PROPAFENONE HCL TAB 150 MG	24	*PROTEIN ORAL POWDER***	207	QUINIDINE GLUCONATE TAB ER 324 MG....	25
PROPAFENONE HCL TAB 225 MG	24	*PROTEIN ORAL POWDER***	207	QUINIDINE GLUCONATE TAB ER 324 MG....	25
PROPAFENONE HCL TAB 300 MG	24	*PROTEIN ORAL POWDER***	207	QUINIDINE SULFATE TAB 200 MG	25
PROPARACAINE HCL OPTH SOLN 0.5%...220		PROTEIN POWDER 80%	201	QUINIDINE SULFATE TAB 300 MG	25
PROPARACAINE HCL OPTH SOLN 0.5%...221		PROTEIN POWDER 80%	201	QUININE SULFATE CAP 324 MG	50
PROPRANOLOL HCL CAP ER 24HR 60 MG...63		PROTRIPTYLINE HCL TAB 5 MG.....	262	QUININE SULFATE CAP 324 MG	50
PROPRANOLOL HCL CAP ER 24HR 80 MG...63		PROTRIPTYLINE HCL TAB 10 MG.....	262	QUIZARTINIB DIHYDROCHLORIDE TAB 17.7 MG.....	48
PROPRANOLOL HCL CAP ER 24HR 120 MG...63		PRUCALOPRIDE SUCCINATE TAB 1 MG (BASE EQUIVALENT).....	136	QUIZARTINIB DIHYDROCHLORIDE TAB 26.5 MG	48
PROPRANOLOL HCL CAP ER 24HR 160 MG...63		PRUCALOPRIDE SUCCINATE TAB 2 MG (BASE EQUIVALENT).....	136	RABEPRAZOLE SODIUM CAPSULE SPRINKLE DR 10 MG	239
PROPRANOLOL HCL ORAL SOLN 4.28 MG/ML (3.75 MG/ML BASE EQUIV)	62	PRUSSIAN BLUE INSOLUBLE CAP 0.5 GM.....	202	RABEPRAZOLE SODIUM EC TAB 20 MG	239
PROPRANOLOL HCL ORAL SOLN 20 MG/5ML	64	PSEUDOEPHED-BROMPHEN-DM SYRUP 30-2-10 MG/5ML.....	245	RALOXIFENE HCL TAB 60 MG.....	245
PROPRANOLOL HCL ORAL SOLN 40 MG/5ML	64	PSEUDOEPHED-BROMPHEN-DM SYRUP 30-2-10 MG/5ML.....	245	RALTEGRAVIR POTASSIUM CHEW TAB 25 MG (BASE EQUIV)	18
PROPRANOLOL HCL ORAL SOLN 40 MG/5ML	64	PSEUDOEPHED-BROMPHEN-DM SYRUP 30-2-10 MG/5ML.....	245	RALTEGRAVIR POTASSIUM CHEW TAB 100 MG (BASE EQUIV)	18
PROPRANOLOL HCL TAB 10 MG.....	64	PSYLLIUM POWDER 43%.....	176	RALTEGRAVIR POTASSIUM PACKET FOR SUSP 100 MG (BASE EQUIV)	18
PROPRANOLOL HCL TAB 20 MG	64	PSYLLIUM POWDER 43%.....	177	RALTEGRAVIR POTASSIUM TAB 400 MG (BASE EQUIV).....	18
PROPRANOLOL HCL TAB 40 MG	64	PYRAZINAMIDE TAB 500 MG	52	RALTEGRAVIR POTASSIUM TAB 600 MG (BASE EQUIV).....	18
PROPRANOLOL HCL TAB 60 MG	64	PYRIDOSTIGMINE BROMIDE ORAL SOLN 60 MG/5ML	234	RAMELTEON TAB 8 MG.....	248
PROPRANOLOL HCL TAB 80 MG	64	PYRIDOSTIGMINE BROMIDE ORAL SOLN 60 MG/5ML	234	RAMIPRIL CAP 1.25 MG	16
PROPYLTHIOURACIL TAB 50 MG.....	52	PYRIDOSTIGMINE BROMIDE TAB 60 MG ..	234	RAMIPRIL CAP 2.5 MG	16
*PROTEIN CAP***	191	PYRIDOSTIGMINE BROMIDE TAB ER 24HR 105 MG (PROTECTIVE).....	202	RAMIPRIL CAP 5 MG	16
PROTEIN CHEW TAB 500 MG.....	201	PYRIDOSTIGMINE BROMIDE TAB ER 180 MG	234		
PROTEIN CHEW TAB 500 MG.....	201	PYRIMETHAMINE TAB 25 MG	49		
*PROTEIN LIQUID (ENTERAL)***	201	PYRIMETHAMINE TAB 25 MG	50		
*PROTEIN LIQUID (ENTERAL)***	201	PYROGALLOL-CHLOROBUTANOL OINT 25-2%	90		
*PROTEIN ORAL LIQUID***	183	QUETIAPINE FUMARATE TAB 25 MG	9		
*PROTEIN ORAL LIQUID***	183	QUETIAPINE FUMARATE TAB 50 MG	9		
*PROTEIN ORAL LIQUID***	183				

RAMIPRIL CAP 10 MG.....	16	RIFAXIMIN TAB 550 MG.....	176	RITLECITINIB TOSYLATE CAP 50 MG (BASE EQUIV).....	89
RANOLAZINE ER GRANULES PACKET 500 MG.....	76	RILONACEPT FOR INJ 220 MG.....	172	RITONAVIR CAP 100 MG.....	21
RANOLAZINE ER GRANULES PACKET 1000 MG.....	76	RILPIVIRINE HCL TAB 25 MG (BASE EQUIVALENT).....	18	RITONAVIR POWDER PACKET 100 MG.....	21
RANOLAZINE TAB ER 12HR 500 MG.....	79	RILPIVIRINE HCL TAB 25 MG (BASE EQUIVALENT).....	19	RITONAVIR TAB 100 MG.....	21
RANOLAZINE TAB ER 12HR 1000 MG.....	79	RILPIVIRINE HCL TAB FOR ORAL SUSP 2.5 MG (BASE EQUIVALENT).....	18	RIVAROXABAN FOR SUSP 1 MG/ML.....	30
RASAGILINE MESYLATE TAB 0.5 MG (BASE EQUIV).....	213	RILUZOLE SUSP 50 MG/10ML.....	82	RIVAROXABAN FOR SUSP 1 MG/ML.....	31
RASAGILINE MESYLATE TAB 1 MG (BASE EQUIV).....	213	RILUZOLE SUSP 50 MG/10ML.....	82	RIVAROXABAN TAB 2.5 MG.....	30
RASPBERRY SYRUP.....	202	RILUZOLE TAB 50 MG.....	82	RIVAROXABAN TAB 2.5 MG.....	31
REGORAFENIB TAB 40 MG.....	212	RIMANTADINE HYDROCHLORIDE TAB 100 MG.....	23	RIVAROXABAN TAB 10 MG.....	31
RELUGOLIX-ESTRADIOL- NORETHINDRONE ACETATE TAB 40-1-0.5 MG.....	128	RIMEGEPANT SULFATE TAB DISINT 75 MG..	70	RIVAROXABAN TAB 15 MG.....	31
RELUGOLIX TAB 120 MG.....	23	RIOCIGUAT TAB 0.5 MG.....	239	RIVAROXABAN TAB 20 MG.....	31
REPAGLINIDE TAB 0.5 MG.....	37	RIOCIGUAT TAB 1.5 MG.....	239	RIVAROXABAN TAB STARTER THERAPY PACK 15 MG & 20 MG.....	31
REPAGLINIDE TAB 1 MG.....	37	RIOCIGUAT TAB 1 MG.....	239	RIVASTIGMINE TARTRATE CAP 1.5 MG (BASE EQUIVALENT).....	83
REPAGLINIDE TAB 2 MG.....	37	RIOCIGUAT TAB 2.5 MG.....	239	RIVASTIGMINE TARTRATE CAP 3 MG (BASE EQUIVALENT).....	83
REPOTRECTINIB CAP 40 MG.....	45	RIOCIGUAT TAB 2 MG.....	239	RIVASTIGMINE TARTRATE CAP 4.5 MG (BASE EQUIVALENT).....	83
REPOTRECTINIB CAP 160 MG.....	45	RIPRETINIB TAB 50 MG.....	211	RIVASTIGMINE TARTRATE CAP 6 MG (BASE EQUIVALENT).....	83
RESMETIROM 60 MG TAB.....	136	RISANKIZUMAB-RZAA SOLN AUTO- INJECTOR 150 MG/ML.....	168	RIVASTIGMINE TD PATCH 24HR 4.6 MG/24HR.....	83
RESMETIROM 80 MG TAB.....	136	RISANKIZUMAB-RZAA SOLN PREFILLED SYRINGE 150 MG/ML.....	168	RIVASTIGMINE TD PATCH 24HR 9.5 MG/24HR.....	83
RESMETIROM 100 MG TAB.....	136	RISANKIZUMAB-RZAA SUBCUTANEOUS SOLN CARTRIDGE 180 MG/1.2ML.....	171	RIVASTIGMINE TD PATCH 24HR 13.3 MG/24HR.....	83
RETAPAMULIN OINT 1%.....	25	RISANKIZUMAB-RZAA SUBCUTANEOUS SOLN CARTRIDGE 360 MG/2.4ML.....	171	RIZATRIPTAN BENZOATE ORAL DISINTEGRATING TAB 5 MG (BASE EQ)....	246
REVEFENACIN INHALATION SOLUTION 175 MCG/3ML.....	68	RISDIPLAM FOR SOLN 0.75 MG/ML.....	119	RIZATRIPTAN BENZOATE ORAL DISINTEGRATING TAB 10 MG (BASE EQ)....	246
REVUMENIB CITRATE TAB 25 MG.....	45	RISDIPLAM TAB 5 MG.....	119	RIZATRIPTAN BENZOATE TAB 5 MG (BASE EQUIVALENT).....	246
REVUMENIB CITRATE TAB 110 MG.....	45	RISEDRONATE SODIUM TAB 5 MG.....	181	RIZATRIPTAN BENZOATE TAB 10 MG (BASE EQUIVALENT).....	246
REVUMENIB CITRATE TAB 160 MG.....	45	RISEDRONATE SODIUM TAB 30 MG.....	181	ROFLUMILAST CREAM 0.3%.....	93
RIBAVIRIN (BULK) POWDER.....	203	RISEDRONATE SODIUM TAB 35 MG.....	181	ROFLUMILAST CREAM 0.05%.....	93
RIBAVIRIN CAP 200 MG.....	17	RISEDRONATE SODIUM TAB 150 MG.....	181	ROFLUMILAST CREAM 0.15%.....	93
RIBAVIRIN FOR INHAL SOLN 6 GM.....	53	RISEDRONATE SODIUM TAB DELAYED RELEASE 35 MG.....	181	ROFLUMILAST FOAM 0.3%.....	94
RIBAVIRIN FOR INHAL SOLN 6 GM.....	53	RISPERIDONE ORALLY DISINTEGRATING TAB 0.5 MG.....	9	ROFLUMILAST TAB 250 MCG.....	235
RIBAVIRIN TAB 200 MG.....	17	RISPERIDONE ORALLY DISINTEGRATING TAB 0.25 MG.....	9	ROFLUMILAST TAB 500 MCG.....	235
RIBOCICLIB 200 MG DOSE (200 MG TAB) & LETROZOLE 2.5 MG TBPk.....	46	RISPERIDONE ORALLY DISINTEGRATING TAB 1 MG.....	9	ROPEGINTERFERON ALFA-2B-NJFT SOLN PREFILLED SYR 500 MCG/ML.....	46
RIBOCICLIB 400 MG DOSE (200 MG TAB) & LETROZOLE 2.5 MG TBPk.....	46	RISPERIDONE ORALLY DISINTEGRATING TAB 2 MG.....	9	ROPINIROLE HYDROCHLORIDE TAB 0.5 MG.....	104
RIBOCICLIB 600 MG DOSE (200 MG TAB) & LETROZOLE 2.5 MG TBPk.....	46	RISPERIDONE ORALLY DISINTEGRATING TAB 3 MG.....	9	ROPINIROLE HYDROCHLORIDE TAB 0.25 MG.....	104
RIBOCICLIB SUCCINATE TAB PACK 200 MG DAILY DOSE.....	46	RISPERIDONE ORALLY DISINTEGRATING TAB 4 MG.....	9	ROPINIROLE HYDROCHLORIDE TAB 1 MG.....	104
RIBOCICLIB SUCCINATE TAB PACK 400 MG DAILY DOSE (200 MG TAB).....	46	RISPERIDONE SOLN 1 MG/ML.....	9	ROPINIROLE HYDROCHLORIDE TAB 2 MG.....	104
RIBOCICLIB SUCCINATE TAB PACK 600 MG DAILY DOSE (200 MG TAB).....	46	RISPERIDONE TAB 0.5 MG.....	9	ROPINIROLE HYDROCHLORIDE TAB 3 MG.....	104
RIFABUTIN CAP 150 MG.....	45	RISPERIDONE TAB 0.25 MG.....	9	ROPINIROLE HYDROCHLORIDE TAB 4 MG.....	104
RIFABUTIN CAP 150 MG.....	45	RISPERIDONE TAB 1 MG.....	9	ROPINIROLE HYDROCHLORIDE TAB 5 MG.....	104
RIFAMPIN CAP 150 MG.....	52	RISPERIDONE TAB 2 MG.....	9	ROPINIROLE HYDROCHLORIDE TAB ER 24HR 2 MG (BASE EQUIVALENT).....	104
RIFAMPIN CAP 300 MG.....	52	RISPERIDONE TAB 3 MG.....	9		
RIFAMYCIN SODIUM TAB DELAYED RELEASE 194 MG (BASE EQUIV).....	25	RISPERIDONE TAB 4 MG.....	9		
RIFAPENTINE TAB 150 MG.....	52				
RIFAXIMIN TAB 200 MG.....	175				

ROPINIROLE HYDROCHLORIDE TAB ER 24HR 4 MG (BASE EQUIVALENT).....	104	RUXOLITINIB PHOSPHATE TAB 20 MG (BASE EQUIVALENT).....	210	SAXAGLIPTIN-METFORMIN HCL TAB ER 24HR 2.5-1000 MG	37
ROPINIROLE HYDROCHLORIDE TAB ER 24HR 6 MG (BASE EQUIVALENT).....	104	RUXOLITINIB PHOSPHATE TAB 25 MG (BASE EQUIVALENT).....	210	SAXAGLIPTIN-METFORMIN HCL TAB ER 24HR 5-500 MG	37
ROPINIROLE HYDROCHLORIDE TAB ER 24HR 8 MG (BASE EQUIVALENT).....	104	SACROSIDASE SOLN 8500 UNIT/ML.....	139	SAXAGLIPTIN-METFORMIN HCL TAB ER 24HR 5-1000 MG	37
ROPINIROLE HYDROCHLORIDE TAB ER 24HR 12 MG (BASE EQUIVALENT).....	104	SACUBITRIL-VALSARTAN SPRINKLE CAP 6-6 MG.....	78	SCOPOLAMINE TD PATCH 72HR 1 MG/3DAYS.....	39
ROSUVASTATIN CALCIUM SPRINKLE CAP 5 MG (BASE EQUIVALENT).....	106	SACUBITRIL-VALSARTAN SPRINKLE CAP 15-16 MG.....	78	SECNIDAZOLE GRANULES PACKET 2 GM ...	27
ROSUVASTATIN CALCIUM SPRINKLE CAP 10 MG (BASE EQUIVALENT).....	106	SACUBITRIL-VALSARTAN TAB 24-26 MG ...	79	SECUKINUMAB SUBCUTANEOUS AUTO- INJ 150 MG/ML (300 MG DOSE).....	88
ROSUVASTATIN CALCIUM SPRINKLE CAP 20 MG (BASE EQUIVALENT)	106	SACUBITRIL-VALSARTAN TAB 49-51 MG ...	79	SECUKINUMAB SUBCUTANEOUS PREF SYR 150 MG/ML (300 MG DOSE).....	88
ROSUVASTATIN CALCIUM SPRINKLE CAP 40 MG (BASE EQUIVALENT)	106	SACUBITRIL-VALSARTAN TAB 97-103 MG ...	79	SECUKINUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 150 MG/ML.....	88
ROSUVASTATIN CALCIUM TAB 5 MG.....	107	SALICYLIC ACID CREAM 5.9%.....	202	SECUKINUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 300 MG/2ML	88
ROSUVASTATIN CALCIUM TAB 10 MG.....	107	SALICYLIC ACID FOAM 6% & UREA IN LACTIC ACID FOAM 35% KIT.....	94	SECUKINUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 75 MG/0.5ML.....	88
ROSUVASTATIN CALCIUM TAB 20 MG.....	107	SALICYLIC ACID LIQUID 10%.....	203	SECUKINUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 150 MG/ML.....	88
ROSUVASTATIN CALCIUM TAB 40 MG	107	SALICYLIC ACID SHAMPOO 6% & SALICYLIC ACID GEL 6% KIT	195	SEGESTERONE ACE-ETHINYL ESTRADIOL VA RING 0.15-0.013 MG/24HR.	120
ROTAVIRUS VACCINE, LIVE ORAL PENTAVALENT SOLN.....	264	SALICYLIC ACID SOLN 26%.....	203	SELADEL PAR LYSINE CAP 10 MG.....	136
ROTAVIRUS VACCINE, LIVE ORAL SUSP ...	264	SALICYLIC & LACTIC ACIDS SOLN 16.7- 16.7%.....	93	SELEGILINE HCL CAP 5 MG.....	213
ROTIGOTINE TD PATCH 24HR 1 MG/24HR..	103	SALMETEROL XINAFOATE AER POW BA 50 MCG/ACT (BASE EQUIV)	69	SELEGILINE HCL ORALLY DISINTEGRATING TAB 1.25 MG	213
ROTIGOTINE TD PATCH 24HR 2 MG/24HR..	103	SALSALATE TAB 500 MG.....	219	SELEGILINE HCL TAB 5 MG	213
ROTIGOTINE TD PATCH 24HR 3 MG/24HR..	103	SALSALATE TAB 750 MG	219	SELEGILINE TD PATCH 24HR 6 MG/24HR ..	213
ROTIGOTINE TD PATCH 24HR 4 MG/24HR..	103	SAPROPTERIN DIHYDROCHLORIDE POWDER PACKET 100 MG.....	137	SELEGILINE TD PATCH 24HR 9 MG/24HR ..	213
ROTIGOTINE TD PATCH 24HR 6 MG/24HR..	104	SAPROPTERIN DIHYDROCHLORIDE POWDER PACKET 100 MG.....	139	SELEGILINE TD PATCH 24HR 12 MG/24HR ..	213
ROTIGOTINE TD PATCH 24HR 8 MG/24HR..	104	SAPROPTERIN DIHYDROCHLORIDE POWDER PACKET 100 MG.....	140	SELENIUM SULFIDE LOTION 2.5%	90
RSVPREF3 VACCINE RECOMB ADJUVANTED FOR IM SUSP 120 MCG/0.5ML.....	262	SAPROPTERIN DIHYDROCHLORIDE POWDER PACKET 500 MG.....	138	SELEXIPAG TAB 200 MCG.....	240
RSV PRE-FUSION F A&B VAC RECOMB FOR IM SOLN 120 MCG/0.5ML	262	SAPROPTERIN DIHYDROCHLORIDE POWDER PACKET 500 MG.....	139	SELEXIPAG TAB 400 MCG.....	240
RSV PRE-FUSION F A&B VAC RECOMB FOR IM SOLN 120 MCG/0.5ML	262	SAPROPTERIN DIHYDROCHLORIDE POWDER PACKET 500 MG.....	140	SELEXIPAG TAB 600 MCG	240
RUCAPARIB CAMSYLATE TAB 200 MG (BASE EQUIVALENT).....	212	SAPROPTERIN DIHYDROCHLORIDE POWDER PACKET 500 MG.....	140	SELEXIPAG TAB 800 MCG.....	240
RUCAPARIB CAMSYLATE TAB 250 MG (BASE EQUIVALENT).....	212	SAPROPTERIN DIHYDROCHLORIDE TAB 100 MG.....	138	SELEXIPAG TAB 1000 MCG	240
RUCAPARIB CAMSYLATE TAB 300 MG (BASE EQUIVALENT).....	212	SAPROPTERIN DIHYDROCHLORIDE TAB 100 MG.....	139	SELEXIPAG TAB 1200 MCG.....	240
RUFINAMIDE SUSP 40 MG/ML.....	253	SARGRAMOSTIM LYOPHILIZED FOR INJ 250 MCG.....	67	SELEXIPAG TAB 1400 MCG.....	240
RUFINAMIDE SUSP 40 MG/ML.....	254	SARILUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 150 MG/1.14ML.....	173	SELEXIPAG TAB 1600 MCG	240
RUFINAMIDE TAB 200 MG	253	SARILUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 200 MG/1.14ML	173	SELEXIPAG TAB THERAPY PACK 200 MCG (140) & 800 MCG (60).....	240
RUFINAMIDE TAB 200 MG	254	SARILUMAB SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/1.14ML.....	173	SELINEXOR TAB THERAPY PACK 10 MG (40 MG ONCE WEEKLY)	48
RUFINAMIDE TAB 400 MG	253	SARILUMAB SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/1.14ML.....	173	SELINEXOR TAB THERAPY PACK 20 MG (60 MG TWICE WEEKLY)	48
RUFINAMIDE TAB 400 MG	254	SATRALIZUMAB-MWGE SUBCUTANEOUS SOLN PREF SYRINGE 120 MG/ML.....	169	SELINEXOR TAB THERAPY PACK 20 MG (80 MG TWICE WEEKLY)	48
RUXOLITINIB PHOSPHATE CREAM 1.5%	94	SAXAGLIPTIN HCL TAB 2.5 MG (BASE EQUIV).....	38	SELINEXOR TAB THERAPY PACK 40 MG (40 MG ONCE WEEKLY)	48
RUXOLITINIB PHOSPHATE TAB 5 MG (BASE EQUIVALENT).....	210	SAXAGLIPTIN HCL TAB 5 MG (BASE EQUIV)	38	SELINEXOR TAB THERAPY PACK 40 MG (40 MG TWICE WEEKLY)	48
RUXOLITINIB PHOSPHATE TAB 10 MG (BASE EQUIVALENT).....	210			SELINEXOR TAB THERAPY PACK 40 MG (80 MG ONCE WEEKLY)	48
RUXOLITINIB PHOSPHATE TAB 15 MG (BASE EQUIVALENT).....	210			SELINEXOR TAB THERAPY PACK 50 MG (100 MG ONCE WEEKLY).....	48

SELINEXOR TAB THERAPY PACK 60 MG (60 MG ONCE WEEKLY)	48	*SHARPS CONTAINER - MISC***	203	SITAGLIPTIN FREE BASE-METFORMIN HCL TAB 50-1000 MG	34
SELINEXOR TAB THERAPY PACK 80 MG (80 MG ONCE WEEKLY)	48	*SHARPS CONTAINER - MISC***	203	SITAGLIPTIN FREE BASE-METFORMIN HCL TAB 50-1000 MG	34
SELPERCATINIB CAP 40 MG	211	*SHARPS CONTAINER - MISC***	203	SITAGLIPTIN FREE BASE-METFORMIN HCL TAB ER 24HR 50-500 MG	34
SELPERCATINIB CAP 80 MG	212	*SHARPS CONTAINER - MISC***	203	SITAGLIPTIN FREE BASE-METFORMIN HCL TAB ER 24HR 50-500 MG	34
SELPERCATINIB TAB 40 MG	212	*SHARPS CONTAINER - MISC***	203	SITAGLIPTIN FREE BASE-METFORMIN HCL TAB ER 24HR 50-1000 MG	34
SELPERCATINIB TAB 80 MG	212	*SHARPS CONTAINER - MISC***	203	SITAGLIPTIN FREE BASE-METFORMIN HCL TAB ER 24HR 50-1000 MG	34
SELPERCATINIB TAB 120 MG	212	SHORT RAGWEED POLLEN ALLERGEN EXTRACT SL TAB 12 AMB A 1-U	244	SITAGLIPTIN FREE BASE-METFORMIN HCL TAB ER 24HR 100-1000 MG	34
SELPERCATINIB TAB 160 MG	212	SILDENAFIL CITRATE FOR SUSPENSION 10 MG/ML	239	SITAGLIPTIN FREE BASE-METFORMIN HCL TAB ER 24HR 100-1000 MG	34
SELUMETINIB SULFATE CAP 10 MG	46	SILDENAFIL CITRATE TAB 20 MG	239	SITAGLIPTIN FREE BASE-METFORMIN HCL TAB ER 24HR 100-1000 MG	34
SELUMETINIB SULFATE CAP 25 MG	46	SILDENAFIL CITRATE TAB 25 MG	141	SITAGLIPTIN FREE BASE-METFORMIN HCL TAB ER 24HR 100-1000 MG	34
SELUMETINIB SULFATE CAP SPRINKLE 5 MG	46	SILDENAFIL CITRATE TAB 50 MG	141	SITAGLIPTIN HYDROCHLORIDE ORAL SOLN 25 MG/ML	35
SELUMETINIB SULFATE CAP SPRINKLE 7.5 MG	46	SILDENAFIL CITRATE TAB 100 MG	141	SITAGLIPTIN TAB 25 MG	34
SEMAGLUTIDE SOLN PEN-INJ 0.25 OR 0.5 MG/DOSE (2 MG/3ML)	37	SILODOSIN CAP 4 MG	60	SITAGLIPTIN TAB 25 MG	34
SEMAGLUTIDE SOLN PEN-INJ 1 MG/ DOSE (4 MG/3ML)	37	SILODOSIN CAP 8 MG	60	SITAGLIPTIN TAB 50 MG	34
SEMAGLUTIDE SOLN PEN-INJ 2 MG/ DOSE (8 MG/3ML)	37	SILVER NITRATE-POTASSIUM NITRATE APPLICATOR 75-25%	25	SITAGLIPTIN TAB 50 MG	34
SEMAGLUTIDE TAB 3 MG	37	SILVER NITRATE SOLN 0.5%	27	SITAGLIPTIN TAB 100 MG	34
SEMAGLUTIDE TAB 7 MG	37	SILVER SULFADIAZINE CREAM 1%	27	SITAGLIPTIN TAB 100 MG	34
SEMAGLUTIDE TAB 14 MG	37	SILVER SULFADIAZINE CREAM 1%	27	SODIUM CHLORIDE GRANULES	116
SENNOSIDES CHEW TAB 15 MG	177	SILVER SULFADIAZINE CREAM 1%	27	SODIUM CHLORIDE POWDER	204
SEPIAPTERIN POWDER PACKET 250 MG	203	SIMPLE - SYRUP	204	SODIUM CHLORIDE SOLN NEBU 0.9%	244
SEPIAPTERIN POWDER PACKET 1000 MG	203	SIMPLE - SYRUP	205	SODIUM CHLORIDE SOLN NEBU 3%	243
SERDEXMETHYLPHENIDATE- DEXMETHYLPHENIDATE CAP 26.1-5.2 MG ..	57	SIMVASTATIN SUSP 20 MG/5ML (4 MG/ ML)	106	SODIUM CHLORIDE SOLN NEBU 3%	244
SERDEXMETHYLPHENIDATE- DEXMETHYLPHENIDATE CAP 39.2-7.8 MG ..	57	SIMVASTATIN SUSP 40 MG/5ML (8 MG/ ML)	106	SODIUM CHLORIDE SOLN NEBU 3.5%	243
SERDEXMETHYLPHENIDATE- DEXMETHYLPHENIDATE CAP 52.3-10.4 MG ..	57	SIMVASTATIN TAB 5 MG	107	SODIUM CHLORIDE SOLN NEBU 7%	243
SERDEXMETHYLPHENIDATE- DEXMETHYLPHENIDATE CAP 52.3-10.4 MG ..	57	SIMVASTATIN TAB 10 MG	107	SODIUM CHLORIDE SOLN NEBU 7%	244
SERTRALINE HCL CAP 150 MG	257	SIMVASTATIN TAB 20 MG	107	SODIUM CHLORIDE SOLN NEBU 7%	244
SERTRALINE HCL CAP 200 MG	257	SIMVASTATIN TAB 40 MG	107	SODIUM CHLORIDE SOLN NEBU 10%	244
SERTRALINE HCL ORAL CONCENTRATE FOR SOLUTION 20 MG/ML	257	SIMVASTATIN TAB 80 MG	107	SODIUM CITRATE & CITRIC ACID SOLN 490-640 MG/5ML	113
SERTRALINE HCL TAB 25 MG	257	SINECATECHINS OINT 15%	93	SODIUM CITRATE & CITRIC ACID SOLN 490-640 MG/5ML	113
SERTRALINE HCL TAB 50 MG	257	SIPONIMOD FUMARATE TAB 0.25 MG (7) STARTER PACK	216	SODIUM CITRATE & CITRIC ACID SOLN 500-334 MG/5ML	116
SERTRALINE HCL TAB 100 MG	257	SIPONIMOD FUMARATE TAB 0.25 MG (12) STARTER PACK	216	SODIUM FLUORIDE CHEW TAB 0.5 MG F (FROM 1.1 MG NAF)	111
SERUM-DERIVED BOVINE IMMUNOGLOB/PROTEIN ISOLATE 5 GM PACKET	189	SIPONIMOD FUMARATE TAB 0.25 MG (BASE EQUIV)	216	SODIUM FLUORIDE CHEW TAB 0.5 MG F (FROM 1.1 MG NAF)	116
SEVELAMER CARBONATE PACKET 0.8 GM	235	SIPONIMOD FUMARATE TAB 1 MG (BASE EQUIV)	216	SODIUM FLUORIDE CHEW TAB 0.25 MG F (FROM 0.55 MG NAF)	111
SEVELAMER CARBONATE PACKET 2.4 GM	235	SIPONIMOD FUMARATE TAB 2 MG (BASE EQUIV)	216	SODIUM FLUORIDE CHEW TAB 0.25 MG F (FROM 0.55 MG NAF)	116
SEVOFLURANE INHAL SOLN	203	SIROLIMUS (BULK) POWDER	204	SODIUM FLUORIDE CHEW TAB 1 MG F (FROM 2.2 MG NAF)	111
SEVOFLURANE INHAL SOLN	206	SIROLIMUS GEL 0.2%	85	SODIUM FLUORIDE CHEW TAB 1 MG F (FROM 2.2 MG NAF)	116
*SHARPS CONTAINER - MISC***	183	SIROLIMUS ORAL SOLN 1 MG/ML	171	SODIUM FLUORIDE CREAM 1.1%	84
*SHARPS CONTAINER - MISC***	183	SIROLIMUS TAB 0.5 MG	171	SODIUM FLUORIDE CREAM 1.1%	84
*SHARPS CONTAINER - MISC***	183	SIROLIMUS TAB 1 MG	171	SODIUM FLUORIDE CREAM 1.1%	85
*SHARPS CONTAINER - MISC***	187	SIROLIMUS TAB 2 MG	171	SODIUM FLUORIDE CREAM 1.1%	85
*SHARPS CONTAINER - MISC***	197	SITAGLIPTIN FREE BASE-METFORMIN HCL TAB 50-500 MG	34		
*SHARPS CONTAINER - MISC***	197	SITAGLIPTIN FREE BASE-METFORMIN HCL TAB 50-500 MG	34		
*SHARPS CONTAINER - MISC***	203				

SODIUM FLUORIDE CREAM 1.1%	85	SODIUM PHENYLBUTYRATE ORAL POWDER 3 GM/TEASPOONFUL	138	SOMATROPIN (NON-REFRIGERATED) FOR SUBCUTANEOUS INJ 4 MG	137
SODIUM FLUORIDE CREAM 1.1%	85	SODIUM PHENYLBUTYRATE TAB 500 MG	139	SOMATROPIN (NON-REFRIGERATED) FOR SUBCUTANEOUS INJ 5 MG	137
SODIUM FLUORIDE GEL 1.1% (0.5% F)	84	SODIUM PHENYLBUTYRATE- TAURURSODIOL POWD PACK 3-1 GM	81	SOMATROPIN (NON-REFRIGERATED) FOR SUBCUTANEOUS INJ 6 MG	137
SODIUM FLUORIDE GEL 1.1% (0.5% F)	84	*SODIUM POLYSTYRENE SULFONATE POWDER**	117	SOMATROPIN SOLUTION CARTRIDGE 5 MG/1.5ML	161
SODIUM FLUORIDE GEL 1.1% (0.5% F)	85	SODIUM POLYSTYRENE SULFONATE RECTAL SUSP 30 GM/120ML	117	SOMATROPIN SOLUTION CARTRIDGE 10 MG/1.5ML	161
SODIUM FLUORIDE GEL 1.1% (0.5% F)	85	SODIUM POLYSTYRENE SULFONATE SUSP 15 GM/60ML	117	SOMATROPIN SOLUTION PEN-INJECTOR 5 MG/1.5ML	161
SODIUM FLUORIDE GEL 1.1% (0.5% F)	85	SODIUM THIOSULFATE-SALICYLIC ACID LOTION 25-1%	40	SOMATROPIN SOLUTION PEN-INJECTOR 10 MG/1.5ML	161
SODIUM FLUORIDE PASTE 1.1%	84	SODIUM ZIRCONIUM CYCLOSILICATE FOR SUSP PACKET 5 GM	117	SOMATROPIN SOLUTION PEN-INJECTOR 15 MG/1.5ML	161
SODIUM FLUORIDE PASTE 1.1%	84	SODIUM ZIRCONIUM CYCLOSILICATE FOR SUSP PACKET 10 GM	117	SOMATROPIN SOLUTION PEN-INJECTOR 30 MG/3ML	161
SODIUM FLUORIDE PASTE 1.1%	84	SOD PICOSULFATE-MG OX-CITRIC AC SOL 10 MG-3.5 GM-12 GM/175ML	177	SONIDEGIB PHOSPHATE CAP 200 MG (BASE EQUIVALENT)	211
SODIUM FLUORIDE PASTE 1.1%	85	SOD SULFATE-MG SULFATE-POT CHLORIDE TAB 1479-225-188 MG	177	SORAFENIB TOSYLATE TAB 200 MG (BASE EQUIVALENT)	212
SODIUM FLUORIDE PASTE 1.1%	85	SOD SULFATE-POT SULF-MG SULF ORAL SOL 17.5-3.13-1.6 GM/177ML	178	SOTALOL HCL (AFIB/AFL) TAB 80 MG	24
SODIUM FLUORIDE PASTE 1.1%	85	SOD SULFATE-POT SULF-MG SULF ORAL SOL 17.5-3.13-1.6 GM/177ML	178	SOTALOL HCL (AFIB/AFL) TAB 80 MG	25
SODIUM FLUORIDE POTASSIUM NITRATE GEL 1.1-5%	84	SOFOBUVIR PELLETT PACK 150 MG	17	SOTALOL HCL (AFIB/AFL) TAB 120 MG	24
SODIUM FLUORIDE POTASSIUM NITRATE GEL 1.1-5%	84	SOFOBUVIR PELLETT PACK 200 MG	17	SOTALOL HCL (AFIB/AFL) TAB 120 MG	25
SODIUM FLUORIDE POTASSIUM NITRATE GEL 1.1-5%	85	SOFOBUVIR TAB 200 MG	17	SOTALOL HCL (AFIB/AFL) TAB 160 MG	24
SODIUM FLUORIDE POTASSIUM NITRATE GEL 1.1-5%	85	SOFOBUVIR TAB 400 MG	17	SOTALOL HCL (AFIB/AFL) TAB 160 MG	25
SODIUM FLUORIDE POTASSIUM NITRATE GEL 1.1-5%	85	SOFOBUVIR-VELPATASVIR PELLETT PACK 150-37.5 MG	17	SOTALOL HCL ORAL SOLUTION 5 MG/ML	25
SODIUM FLUORIDE POTASSIUM NITRATE GEL 1.1-5%	85	SOFOBUVIR-VELPATASVIR PELLETT PACK 200-50 MG	17	SOTALOL HCL TAB 80 MG	25
SODIUM FLUORIDE RINSE 0.2%	85	SOFOBUVIR-VELPATASVIR TAB 200-50 MG	17	SOTALOL HCL TAB 80 MG	25
SODIUM FLUORIDE RINSE 0.2%	85	SOFOBUVIR-VELPATASVIR TAB 400-100 MG	17	SOTALOL HCL TAB 120 MG	25
SODIUM FLUORIDE SOLN 0.5 MG/ML F (FROM 1.1 MG/ML NAF)	116	SOFOBUVIR-VELPATASVIR TAB 400-100 MG	17	SOTALOL HCL TAB 120 MG	25
SODIUM FLUORIDE TAB 0.5 MG F (FROM 1.1 MG NAF)	116	SOFOSBUVIR-VOLPATASVIR TAB 400-100 MG	17	SOTALOL HCL TAB 160 MG	25
SODIUM FLUORIDE TAB 1 MG F (FROM 2.2 MG NAF)	116	SOFOSBUVIR-VOLPATASVIR- VOXILAPREVIR TAB 400-100-100 MG	17	SOTALOL HCL TAB 160 MG	25
SODIUM FLUORIDE-VITAMIN D LIQD DROPS 0.25 MG/ML-400 UNIT/ML	111	SOLIFENACIN SUCCINATE SUSP 5 MG/5ML (1 MG/ML)	52	SOTALOL HCL TAB 240 MG	25
SODIUM OXYBATE ORAL SOLUTION 500 MG/ML	249	SOLIFENACIN SUCCINATE TAB 5 MG	51	SOTATERCEPT-CSRK FOR SUBCUTANEOUS SOLN KIT 2 X 45 MG	75
SODIUM OXYBATE ORAL SOLUTION 500 MG/ML	249	SOLIFENACIN SUCCINATE TAB 5 MG	52	SOTATERCEPT-CSRK FOR SUBCUTANEOUS SOLN KIT 45 MG	75
SODIUM OXYBATE ORAL SOLUTION 500 MG/ML	249	SOLIFENACIN SUCCINATE TAB 10 MG	51	SOTATERCEPT-CSRK FOR SUBCUTANEOUS SOLN KIT 60 MG	75
SODIUM OXYBATE PACK FOR ER SUSP 4.5 & 6 & 7.5 GM STARTER PAK	248	SOLIFENACIN SUCCINATE TAB 10 MG	52	SOTORASIB TAB 120 MG	47
SODIUM OXYBATE PACK FOR ORAL ER SUSP 4.5 GM	248	SOLRIAMFETOL HCL TAB 75 MG (BASE EQUIV)	249	SOTORASIB TAB 240 MG	47
SODIUM OXYBATE PACK FOR ORAL ER SUSP 6 GM	248	SOLRIAMFETOL HCL TAB 150 MG (BASE EQUIV)	249	SOTORASIB TAB 320 MG	47
SODIUM OXYBATE PACK FOR ORAL ER SUSP 7.5 GM	248	SOMATROGON-GHLLA SOLUTION PEN- INJECTOR 24 MG/1.2ML (20 MG/ML)	160	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	181
SODIUM OXYBATE PACK FOR ORAL ER SUSP 9 GM	248	SOMATROGON-GHLLA SOLUTION PEN- INJECTOR 60 MG/1.2ML (50 MG/ML)	160	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	182
		SOMATROPIN FOR INJ 5.8 MG	161	*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	182

*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	182	SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 9.8-4.8%	90
*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	182	SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 9.8-4.8%	91
*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	182	SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 10-2%	86
*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	187	SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 10-2%	91
*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	187	SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 10-5%	86
*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	187	SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 10-5%	91
*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	187	SULFACETAMIDE SODIUM W/ SULFUR CLEANSING CLOTH 9.8-4.8%	90
*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	189	SULFACETAMIDE SODIUM W/ SULFUR CLEANSING CLOTH 9.8-4.8%	91
*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	191	SULFACETAMIDE SODIUM W/ SULFUR CLEANSING PAD 10-4%	92
*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	191	SULFACETAMIDE SODIUM W/ SULFUR CREAM 9.8-4.8%	90
*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	192	SULFACETAMIDE SODIUM W/ SULFUR CREAM 9.8-4.8%	90
*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	196	SULFACETAMIDE SODIUM W/ SULFUR CREAM 10-2%	87
*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	201	SULFACETAMIDE SODIUM W/ SULFUR CREAM 10-2%	90
*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	207	SULFACETAMIDE SODIUM W/ SULFUR CREAM 10-5%	86
*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	207	SULFACETAMIDE SODIUM W/ SULFUR CREAM 10-5%	86
*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	207	SULFACETAMIDE SODIUM W/ SULFUR CREAM 10-5%	90
*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	207	SULFACETAMIDE SODIUM W/ SULFUR CREAM 10-5%	91
*SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE***	207	SULFACETAMIDE SODIUM W/ SULFUR EMULSION 10-1%	87
*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - BAGS***	192	SULFACETAMIDE SODIUM W/ SULFUR EMULSION 10-1%	90
*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS***	189	SULFACETAMIDE SODIUM W/ SULFUR EMULSION 10-1%	92
*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS***	189	SULFACETAMIDE SODIUM W/ SULFUR FOAM 10-5%	91
*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS***	196	SULFACETAMIDE SODIUM W/ SULFUR LOTION 9.8-4.8%	90
*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS***	196	SULFACETAMIDE SODIUM W/ SULFUR LOTION 9.8-4.8%	91
*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS***	198	SULFACETAMIDE SODIUM W/ SULFUR LOTION 10-5%	91
*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS***	207	SULFACETAMIDE SODIUM W/ SULFUR SUSP 8-4%	91
*SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS***	207	SULFACETAMIDE SODIUM W/ SULFUR SUSP 8-4%	91
SPARSENTAN TAB 200 MG	141	SULFACETAMIDE SODIUM W/ SULFUR SUSP 10-5%	91
SPARSENTAN TAB 400 MG	141	*SULFACETAMIDE SOD-SULFUR PAD 10-4% & SKIN CLEANSER KIT***	92
SPESOLIMAB-SBZO SUBCUTANEOUS SOLN PREF SYR 150 MG/ML	91	SULFADIAZINE TAB 500 MG	258
SPESOLIMAB-SBZO SUBCUTANEOUS SOLN PREF SYR 300 MG/2ML	91		
SPINOSAD SUSP 0.9%	234		
SPIRONOLACTONE & HYDROCHLOROTHIAZIDE TAB 25-25 MG	79		
SPIRONOLACTONE SUSP 25 MG/5ML	102		
SPIRONOLACTONE SUSP 25 MG/5ML	103		
SPIRONOLACTONE TAB 25 MG	103		
SPIRONOLACTONE TAB 50 MG	103		
SPIRONOLACTONE TAB 100 MG	103		
STANNOUS FLUORIDE CONC 0.63%	84		
STANNOUS FLUORIDE GEL 0.4%	84		
STANNOUS FLUORIDE GEL 0.4%	84		
STANNOUS FLUORIDE GEL 0.4%	84		
STIRIPENTOL CAP 250 MG	31		
STIRIPENTOL CAP 500 MG	31		
STIRIPENTOL PACKET 250 MG	31		
STIRIPENTOL PACKET 500 MG	31		
SUCCIMER CAP 100 MG	117		
SUCRALFATE SUSP 1 GM/10ML	238		
SUCRALFATE TAB 1 GM	238		
SUCROFERRIC OXYHYDROXIDE CHEW TAB 500 MG	235		
SULCONAZOLE NITRATE CREAM 1%	40		
SULCONAZOLE NITRATE CREAM 1%	42		
SULCONAZOLE NITRATE SOLUTION 1%	40		
SULCONAZOLE NITRATE SOLUTION 1%	42		
SULFACETAMIDE SODIUM CLEANSING GEL 10%	90		
SULFACETAMIDE SODIUM CLEANSING GEL 10%	91		
SULFACETAMIDE SODIUM CREAM 10%	90		
SULFACETAMIDE SODIUM LIQUID 10%	90		
SULFACETAMIDE SODIUM LIQUID 10%	90		
SULFACETAMIDE SODIUM LIQUID 10%	91		
SULFACETAMIDE SODIUM LOTION 9.8%	90		
SULFACETAMIDE SODIUM LOTION 10% (ACNE)	89		
SULFACETAMIDE SODIUM LOTION 10% (ACNE)	91		
SULFACETAMIDE SODIUM OPTH OINT 10%	224		
SULFACETAMIDE SODIUM OPTH SOLN 10%	224		
SULFACETAMIDE SODIUM-PREDNISOLONE OPTH SOLN 10-0.23(0.25)%	223		
SULFACETAMIDE SODIUM SHAMPOO 10%	90		
SULFACETAMIDE SODIUM SHAMPOO 10%	91		
SULFACETAMIDE SODIUM-SULFUR IN UREA EMULSION 10-5%	91		
SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 9-4%	91		
SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 9-4%	91		

SULFAMETHOXAZOLE-TRIMETHOPRIM SUSP 200-40 MG/5ML	258	SUNITINIB MALATE CAP 37.5 MG (BASE EQUIVALENT).....	212	TAMSULOSIN HCL CAP 0.4 MG.....	60
SULFAMETHOXAZOLE-TRIMETHOPRIM SUSP 200-40 MG/5ML	258	SUNITINIB MALATE CAP 50 MG (BASE EQUIVALENT).....	212	TAPENTADOL HCL TAB 50 MG.....	231
SULFAMETHOXAZOLE-TRIMETHOPRIM TAB 400-80 MG	258	SUVOREXANT TAB 5 MG	248	TAPENTADOL HCL TAB 75 MG.....	231
SULFAMETHOXAZOLE-TRIMETHOPRIM TAB 400-80 MG	258	SUVOREXANT TAB 10 MG	248	TAPENTADOL HCL TAB 100 MG	231
SULFAMETHOXAZOLE-TRIMETHOPRIM TAB 400-80 MG	258	SUVOREXANT TAB 15 MG	248	TAPENTADOL HCL TAB ER 12HR 50 MG	228
SULFAMETHOXAZOLE-TRIMETHOPRIM TAB 800-160 MG	258	SUVOREXANT TAB 20 MG	248	TAPENTADOL HCL TAB ER 12HR 100 MG	228
SULFAMETHOXAZOLE-TRIMETHOPRIM TAB 800-160 MG	258	SUZETRIGINE TAB 50 MG	195	TAPENTADOL HCL TAB ER 12HR 150 MG	228
SULFAMETHOXAZOLE-TRIMETHOPRIM TAB 800-160 MG	258	TACROLIMUS (BULK) POWDER	205	TAPENTADOL HCL TAB ER 12HR 200 MG	228
SULFASALAZINE TAB 500 MG	258	TACROLIMUS (BULK) POWDER	205	TAPENTADOL HCL TAB ER 12HR 250 MG	228
SULFASALAZINE TAB 500 MG	258	TACROLIMUS CAP 0.5 MG	170	TAPINAROF CREAM 1%.....	93
SULFASALAZINE TAB DELAYED RELEASE 500 MG	258	TACROLIMUS CAP 0.5 MG	171	TASIMELTEON CAPSULE 20 MG.....	248
SULFASALAZINE TAB DELAYED RELEASE 500 MG	258	TACROLIMUS CAP 1 MG.....	170	TASIMELTEON CAPSULE 20 MG.....	249
SULFURATED LIME SOLUTION	234	TACROLIMUS CAP 1 MG.....	171	TASIMELTEON ORAL SUSP 4 MG/ML.....	248
SULFURIC ACID-SULFONATED PHENOLICS SOLN 30-50%.....	84	TACROLIMUS CAP 5 MG	170	TAURINE CAP 500 MG	116
SULINDAC TAB 150 MG	220	TACROLIMUS CAP 5 MG	171	TAVABOROLE SOLN 5%	42
SULINDAC TAB 200 MG	220	TACROLIMUS CAP 5 MG	171	TAZAROTENE (ACNE) FOAM 0.1%	89
SULOPENEM ETZADROXIL-PROBENECID TAB 500-500 MG.....	197	TACROLIMUS OINT 0.1%	92	TAZAROTENE (ACNE) FOAM 0.1%	92
SUMATRIPTAN NASAL SPRAY 5 MG/ACT	246	TACROLIMUS OINT 0.03%	92	TAZAROTENE CREAM 0.1%	92
SUMATRIPTAN NASAL SPRAY 10 MG/ACT	246	TACROLIMUS PACKET FOR SUSP 0.2 MG.....	170	TAZAROTENE CREAM 0.1%	92
SUMATRIPTAN NASAL SPRAY 20 MG/ACT	246	TACROLIMUS PACKET FOR SUSP 1 MG.....	170	TAZAROTENE CREAM 0.05%	92
SUMATRIPTAN SUCCINATE EXHALER POWDER 11 MG/NOSEPIECE.....	246	TADALAFIL ORAL SUSP 20 MG/5ML (PAH).....	240	TAZAROTENE CREAM 0.05%	92
SUMATRIPTAN SUCCINATE INJ 6 MG/0.5ML	246	TADALAFIL TAB 2.5 MG	60	TAZAROTENE GEL 0.1%	92
SUMATRIPTAN SUCCINATE INJ 6 MG/0.5ML	246	TADALAFIL TAB 5 MG	60	TAZAROTENE GEL 0.1%	92
SUMATRIPTAN SUCCINATE INJ 6 MG/0.5ML	246	TADALAFIL TAB 10 MG	141	TAZAROTENE GEL 0.05%.....	92
SUMATRIPTAN SUCCINATE SOLUTION AUTO-INJECTOR 3 MG/0.5ML	246	TADALAFIL TAB 20 MG	141	TAZAROTENE GEL 0.05%.....	92
SUMATRIPTAN SUCCINATE SOLUTION AUTO-INJECTOR 4 MG/0.5ML	246	TADALAFIL TAB 20 MG (PAH)	239	TAZEMETOSTAT HBR TAB 200 MG	48
SUMATRIPTAN SUCCINATE SOLUTION AUTO-INJECTOR 6 MG/0.5ML	246	TADALAFIL TAB 20 MG (PAH)	239	TECOVIRIMAT CAP 200 MG.....	52
SUMATRIPTAN SUCCINATE SOLUTION AUTO-INJECTOR 6 MG/0.5ML	246	TAFAMIDIS CAP 61 MG.....	80	TEDIZOLID PHOSPHATE TAB 200 MG	27
SUMATRIPTAN SUCCINATE SOLUTION CARTRIDGE 4 MG/0.5ML	246	TAFAMIDIS MEGLUMINE (CARDIAC) CAP 20 MG.....	80	TEDUGLUTIDE (RDNA) FOR INJ KIT 5 MG	136
SUMATRIPTAN SUCCINATE SOLUTION CARTRIDGE 6 MG/0.5ML	246	TAFENOQUINE SUCCINATE TAB 100 MG (BASE EQUIVALENT).....	49	TELMISARTAN-AMLODIPINE TAB 40-5 MG	79
SUMATRIPTAN SUCCINATE TAB 25 MG	246	TAFENOQUINE SUCCINATE TAB 150 MG (BASE EQUIVALENT).....	49	TELMISARTAN-AMLODIPINE TAB 40-10 MG	79
SUMATRIPTAN SUCCINATE TAB 50 MG	246	TAFLUPROST PRESERVATIVE FREE (PF) OPHTH SOLN 0.0015%	225	TELMISARTAN-AMLODIPINE TAB 80-5 MG	79
SUMATRIPTAN SUCCINATE TAB 100 MG	246	TAFLUPROST PRESERVATIVE FREE (PF) OPHTH SOLN 0.0015%	226	TELMISARTAN-AMLODIPINE TAB 80-10 MG	79
SUNITINIB MALATE CAP 12.5 MG (BASE EQUIVALENT).....	212	TALAZOPARIB TOSYLATE CAP 0.1 MG (BASE EQUIVALENT).....	47	TELMISARTAN-HYDROCHLOROTHIAZIDE TAB 40-12.5 MG	80
SUNITINIB MALATE CAP 25 MG (BASE EQUIVALENT).....	212	TALAZOPARIB TOSYLATE CAP 0.5 MG (BASE EQUIVALENT).....	48	TELMISARTAN-HYDROCHLOROTHIAZIDE TAB 80-12.5 MG	80
		TALAZOPARIB TOSYLATE CAP 0.25 MG (BASE EQUIVALENT).....	119	TELMISARTAN-HYDROCHLOROTHIAZIDE TAB 80-25 MG.....	80
		TALAZOPARIB TOSYLATE CAP 0.35 MG (BASE EQUIVALENT).....	48	TELMISARTAN TAB 20 MG.....	14
		TALAZOPARIB TOSYLATE CAP 0.75 MG (BASE EQUIVALENT).....	48	TELMISARTAN TAB 40 MG	14
		TALAZOPARIB TOSYLATE CAP 1 MG (BASE EQUIVALENT).....	119	TELMISARTAN TAB 80 MG	14
		TALETRECTINIB ADIPATE CAP 200 MG	46	TELOTRISTAT ETHYL TAB 250 MG (AS TELOTRISTAT ETIPRATE)	137
		TAMOXIFEN CITRATE TAB 10 MG (BASE EQUIVALENT).....	39	TEMAZEPAM CAP 7.5 MG	133
		TAMOXIFEN CITRATE TAB 20 MG (BASE EQUIVALENT).....	39	TEMAZEPAM CAP 7.5 MG	133
				TEMAZEPAM CAP 15 MG	133
				TEMAZEPAM CAP 15 MG	133
				TEMAZEPAM CAP 22.5 MG	133
				TEMAZEPAM CAP 22.5 MG	133
				TEMAZEPAM CAP 30 MG	133
				TEMAZEPAM CAP 30 MG	133
				TEMOZOLOMIDE CAP 5 MG	11
				TEMOZOLOMIDE CAP 20 MG.....	11
				TEMOZOLOMIDE CAP 100 MG	11

TEMOZOLOMIDE CAP 140 MG	11	TESTOSTERONE ENANTHATE (BULK)		THEOPHYLLINE TAB ER 12HR 200 MG.....	235
TEMOZOLOMIDE CAP 180 MG	11	POWDER	205	THEOPHYLLINE TAB ER 12HR 300 MG.....	235
TEMOZOLOMIDE CAP 250 MG	11	TESTOSTERONE ENANTHATE IM INJ IN		THEOPHYLLINE TAB ER 12HR 450 MG.....	235
TENAPANOR HCL TAB 20 MG.....	139	OIL 200 MG/ML.....	13	THEOPHYLLINE TAB ER 24HR 400 MG	235
TENAPANOR HCL TAB 30 MG.....	139	TESTOSTERONE MICRONIZED (BULK)		THEOPHYLLINE TAB ER 24HR 600 MG	235
TENOFOVIR DISOPROXIL FUMARATE		CRYSTALS.....	205	THIOGUANINE (BULK) POWDER	205
ORAL POWDER 40 MG/GM.....	20	TESTOSTERONE MICRONIZED (BULK)		THIOGUANINE TAB 40 MG	45
TENOFOVIR DISOPROXIL FUMARATE		POWDER	205	THIORIDAZINE HCL TAB 10 MG	6
TAB 150 MG	20	TESTOSTERONE MICRONIZED (BULK)		THIORIDAZINE HCL TAB 25 MG	6
TENOFOVIR DISOPROXIL FUMARATE		POWDER	205	THIORIDAZINE HCL TAB 50 MG.....	7
TAB 200 MG.....	20	TESTOSTERONE TD GEL 12.5 MG/ACT (1%) .	13	THIORIDAZINE HCL TAB 100 MG.....	6
TENOFOVIR DISOPROXIL FUMARATE		TESTOSTERONE TD GEL 20.25 MG/ACT		THIOTEPA (BULK) POWDER.....	205
TAB 250 MG	20	(1.62%).....	13	THIOTHIXENE CAP 1 MG	7
TENOFOVIR DISOPROXIL FUMARATE		TESTOSTERONE TD GEL 50 MG/5GM (1%) .	13	THIOTHIXENE CAP 2 MG.....	7
TAB 300 MG.....	20	TESTOSTERONE UNDECANOATE CAP 100		THIOTHIXENE CAP 5 MG.....	7
TEPOTINIB HCL TAB 225 MG.....	212	MG	13	THIOTHIXENE CAP 10 MG.....	7
TERAZOSIN HCL CAP 1 MG (BASE		TESTOSTERONE UNDECANOATE CAP 150		THROMBIN FOR SOLN 1000 UNIT.....	153
EQUIVALENT).....	60	MG	13	THROMBIN FOR SOLN 10000 UNIT	153
TERAZOSIN HCL CAP 2 MG (BASE		TESTOSTERONE UNDECANOATE CAP		THROMBIN FOR SOLN KIT 5000 UNIT	153
EQUIVALENT).....	60	200 MG	13	THROMBIN FOR SOLN KIT 5000 UNIT	153
TERAZOSIN HCL CAP 5 MG (BASE		TETANUS-DIPHThERIA TOXOIDS (TD)		THROMBIN FOR SOLN KIT 10000 UNIT	153
EQUIVALENT).....	60	INJ 2-2 LF/0.5ML.....	265	THROMBIN FOR SOLN KIT 20000 UNIT	153
TERAZOSIN HCL CAP 10 MG (BASE		TETANUS-DIPHThERIA TOXOIDS (TD)		THROMBIN (RECOMBINANT) FOR SOLN	
EQUIVALENT).....	60	INJ 5-2 LF/0.5ML	265	5000 UNIT	153
TERAZOSIN HCL ORAL SOLN 1 MG/ML		TET-DIPH-ACELL PERTUSS AD PREF SYR		THROMBIN (RECOMBINANT) FOR SOLN	
(BASE EQUIVALENT).....	60	5-2.5-18.5 LF-MCG/0.5ML	262	20000 UNIT.....	153
TERBINAFINE HCL TAB 250 MG	42	TET-DIPH-ACELL PERTUSS AD PREF SYR		THYROID TAB 15 MG (1/4 GRAIN)	162
TERBUTALINE SULFATE POWDER.....	205	5-2-15.5 LF-MCG/0.5ML	262	THYROID TAB 15 MG (1/4 GRAIN)	162
TERBUTALINE SULFATE TAB 2.5 MG.....	69	TETRABENAZINE TAB 12.5 MG	82	THYROID TAB 15 MG (1/4 GRAIN)	163
TERBUTALINE SULFATE TAB 5 MG	70	TETRABENAZINE TAB 25 MG.....	82	THYROID TAB 15 MG (1/4 GRAIN)	164
TERCONAZOLE VAGINAL CREAM 0.4%.....	42	TETRACAIN HCL OPHTH SOLN 0.5%.....	220	THYROID TAB 15 MG (1/4 GRAIN)	164
TERCONAZOLE VAGINAL CREAM 0.8%	42	TETRACAIN HCL OPHTH SOLN 0.5%.....	221	THYROID TAB 15 MG (1/4 GRAIN)	164
TERCONAZOLE VAGINAL SUPPOS 80 MG...	42	TETRACYCLINE HCL CAP 250 MG.....	260	THYROID TAB 15 MG (1/4 GRAIN)	165
TERIFLUNOMIDE TAB 7 MG	216	TETRACYCLINE HCL CAP 500 MG	260	THYROID TAB 30 MG (1/2 GRAIN).....	162
TERIFLUNOMIDE TAB 14 MG.....	216	TET TOX-DIPH-ACELL PERTUSS AD INJ		THYROID TAB 30 MG (1/2 GRAIN).....	163
TERIPARATIDE SOLN PEN-INJ 560		5-2.5-18.5 LF-LF-MCG/0.5ML	262	THYROID TAB 30 MG (1/2 GRAIN).....	164
MCG/2.24ML.....	180	TET TOX-DIPH-ACELL PERTUSS AD INJ		THYROID TAB 30 MG (1/2 GRAIN).....	164
TERIPARATIDE SOLN PEN-INJ 560		5-2-15.5 LF-LF-MCG/0.5ML	262	THYROID TAB 30 MG (1/2 GRAIN).....	164
MCG/2.24ML.....	181	TEZACAF TOR-IVACAF TOR 50-75 MG &		THYROID TAB 30 MG (1/2 GRAIN).....	165
TESAMORELIN ACETATE FOR INJ 2 MG		IVACAF TOR 75 MG TAB TBPk	83	THYROID TAB 60 MG (1 GRAIN).....	162
(BASE EQUIV).....	160	TEZACAF TOR-IVACAF TOR 100-150 MG &		THYROID TAB 60 MG (1 GRAIN).....	163
TESAMORELIN ACETATE FOR		IVACAF TOR 150 MG TAB TBPk	83	THYROID TAB 60 MG (1 GRAIN).....	164
SUBCUTANEOUS SOLN KIT 11.6 MG.....	160	TEZEPELUMAB-EKKO SUBCUTANEOUS		THYROID TAB 60 MG (1 GRAIN).....	164
TESTOSTERONE (BULK) POWDER	205	SOLN AUTO-INJ 210 MG/1.91ML.....	244	THYROID TAB 60 MG (1 GRAIN).....	164
TESTOSTERONE (BULK) POWDER	205	THALIDOMIDE CAP 50 MG.....	24	THYROID TAB 60 MG (1 GRAIN).....	165
TESTOSTERONE CYPIONATE (BULK)		THALIDOMIDE CAP 100 MG.....	24	THYROID TAB 90 MG (1 1/2 GRAIN).....	162
POWDER	205	THALIDOMIDE CAP 150 MG.....	24	THYROID TAB 90 MG (1 1/2 GRAIN).....	163
TESTOSTERONE CYPIONATE IM INJ IN		THALIDOMIDE CAP 200 MG	24	THYROID TAB 90 MG (1 1/2 GRAIN).....	164
OIL 100 MG/ML.....	13	THEOPHYLLINE CAP ER 24HR 100 MG	235	THYROID TAB 90 MG (1 1/2 GRAIN).....	164
TESTOSTERONE CYPIONATE IM INJ IN		THEOPHYLLINE CAP ER 24HR 200 MG	235	THYROID TAB 90 MG (1 1/2 GRAIN).....	165
OIL 100 MG/ML.....	13	THEOPHYLLINE CAP ER 24HR 300 MG	235	THYROID TAB 120 MG (2 GRAIN).....	162
TESTOSTERONE CYPIONATE IM INJ IN		THEOPHYLLINE CAP ER 24HR 400 MG	235	THYROID TAB 120 MG (2 GRAIN).....	162
OIL 200 MG/ML.....	13	THEOPHYLLINE ELIXIR 80 MG/15ML.....	235	THYROID TAB 120 MG (2 GRAIN).....	164
TESTOSTERONE CYPIONATE IM INJ IN		THEOPHYLLINE ELIXIR 80 MG/15ML.....	235	THYROID TAB 120 MG (2 GRAIN).....	164
OIL 200 MG/ML.....	13	THEOPHYLLINE SOLN 80 MG/15ML	235	THYROID TAB 120 MG (2 GRAIN).....	164
		THEOPHYLLINE TAB ER 12HR 100 MG	235		

THYROID TAB 120 MG (2 GRAIN).....	164	TIRBANIBULIN OINTMENT 1%.....	94	TOFACITINIB CITRATE TAB 5 MG (BASE EQUIVALENT).....	171
THYROID TAB 120 MG (2 GRAIN).....	165	TIRBANIBULIN OINTMENT 1%.....	94	TOFACITINIB CITRATE TAB 10 MG (BASE EQUIVALENT).....	171
THYROID TAB 180 MG (3 GRAIN).....	162	TIRZEPATIDE SOLN AUTO-INJECTOR 2.5 MG/0.5ML.....	37	TOFACITINIB CITRATE TAB ER 24HR 11 MG (BASE EQUIVALENT).....	172
THYROID TAB 180 MG (3 GRAIN).....	163	TIRZEPATIDE SOLN AUTO-INJECTOR 5 MG/0.5ML.....	37	TOFACITINIB CITRATE TAB ER 24HR 22 MG (BASE EQUIVALENT).....	172
THYROID TAB 240 MG (4 GRAIN).....	162	TIRZEPATIDE SOLN AUTO-INJECTOR 7.5 MG/0.5ML.....	37	TOLCAPONE TAB 100 MG.....	49
THYROID TAB 300 MG (5 GRAIN).....	162	TIRZEPATIDE SOLN AUTO-INJECTOR 10 MG/0.5ML.....	36	TOLTERODINE TARTRATE CAP ER 24HR 2 MG.....	52
TIAGABINE HCL TAB 2 MG.....	135	TIRZEPATIDE SOLN AUTO-INJECTOR 12.5 MG/0.5ML.....	37	TOLTERODINE TARTRATE CAP ER 24HR 4 MG.....	52
TIAGABINE HCL TAB 4 MG.....	135	TIRZEPATIDE SOLN AUTO-INJECTOR 15 MG/0.5ML.....	37	TOLTERODINE TARTRATE TAB 1 MG.....	52
TIAGABINE HCL TAB 12 MG.....	135	TIVOZANIB HCL CAP 0.89 MG (BASE EQUIVALENT).....	209	TOLTERODINE TARTRATE TAB 2 MG.....	52
TIAGABINE HCL TAB 16 MG.....	135	TIVOZANIB HCL CAP 1.34 MG (BASE EQUIVALENT).....	209	TOLVAPTAN TAB 15 MG.....	117
TICAGRELOR TAB 60 MG.....	236	TIZANIDINE HCL CAP 2 MG (BASE EQUIVALENT).....	247	TOLVAPTAN TAB 15 MG.....	118
TICAGRELOR TAB 90 MG.....	236	TIZANIDINE HCL CAP 2 MG (BASE EQUIVALENT).....	247	TOLVAPTAN TAB 15 MG.....	118
TIMOLOL MALEATE OPHTH GEL FORMING SOLN 0.5%.....	225	TIZANIDINE HCL CAP 4 MG (BASE EQUIVALENT).....	247	TOLVAPTAN TAB 30 MG.....	117
TIMOLOL MALEATE OPHTH GEL FORMING SOLN 0.25%.....	225	TIZANIDINE HCL CAP 4 MG (BASE EQUIVALENT).....	247	TOLVAPTAN TAB 30 MG.....	118
TIMOLOL MALEATE OPHTH SOLN 0.5% (ONCE-DAILY).....	225	TIZANIDINE HCL CAP 6 MG (BASE EQUIVALENT).....	247	TOLVAPTAN TAB 30 MG.....	118
TIMOLOL MALEATE OPHTH SOLN 0.5% (ONCE-DAILY).....	224	TIZANIDINE HCL CAP 6 MG (BASE EQUIVALENT).....	247	TOLVAPTAN TAB THERAPY PACK 15 MG....	118
TIMOLOL MALEATE OPHTH SOLN 0.5% (ONCE-DAILY).....	225	TIZANIDINE HCL CAP 6 MG (BASE EQUIVALENT).....	248	TOLVAPTAN TAB THERAPY PACK 30 & 15 MG.....	118
TIMOLOL MALEATE OPHTH SOLN 0.5% (ONCE-DAILY).....	225	TIZANIDINE HCL TAB 2 MG (BASE EQUIVALENT).....	247	TOLVAPTAN TAB THERAPY PACK 45 & 15 MG.....	118
TIMOLOL MALEATE OPHTH SOLN 0.25%.....	225	TIZANIDINE HCL TAB 4 MG (BASE EQUIVALENT).....	247	TOLVAPTAN TAB THERAPY PACK 60 & 30 MG.....	118
TIMOLOL MALEATE PRESERVATIVE FREE OPHTH SOLN 0.5%.....	225	TIZANIDINE HCL TAB 4 MG (BASE EQUIVALENT).....	248	TOLVAPTAN TAB THERAPY PACK 90 & 30 MG.....	118
TIMOLOL MALEATE PRESERVATIVE FREE OPHTH SOLN 0.5%.....	225	TOBRAMYCIN-DEXAMETHASONE OPHTH OINT 0.3-0.1%.....	12	TOPIRAMATE SPRINKLE CAP 15 MG.....	145
TIMOLOL MALEATE PRESERVATIVE FREE OPHTH SOLN 0.5%.....	225	TOBRAMYCIN-DEXAMETHASONE OPHTH SUSP 0.3-0.1%.....	221	TOPIRAMATE SPRINKLE CAP 15 MG.....	146
TIMOLOL MALEATE PRESERVATIVE FREE OPHTH SOLN 0.25%.....	225	TOBRAMYCIN-DEXAMETHASONE OPHTH SUSP 0.3-0.05%.....	221	TOPIRAMATE SPRINKLE CAP 25 MG.....	145
TIMOLOL MALEATE PRESERVATIVE FREE OPHTH SOLN 0.25%.....	225	TOBRAMYCIN INHAL CAP 28 MG.....	84	TOPIRAMATE SPRINKLE CAP 25 MG.....	146
TIMOLOL MALEATE TAB 5 MG.....	64	TOBRAMYCIN NEBU SOLN 300 MG/4ML.....	84	TOPIRAMATE SPRINKLE CAP 50 MG.....	146
TIMOLOL MALEATE TAB 10 MG.....	64	TOBRAMYCIN NEBU SOLN 300 MG/5ML.....	84	TOPIRAMATE TAB 25 MG.....	145
TIMOLOL MALEATE TAB 20 MG.....	64	TOBRAMYCIN OPHTH OINT 0.3%.....	224	TOPIRAMATE TAB 25 MG.....	146
TIMOLOL OPHTH SOLN 0.5%.....	224	TOBRAMYCIN OPHTH SOLN 0.3%.....	224	TOPIRAMATE TAB 50 MG.....	145
TIMOLOL OPHTH SOLN 0.5%.....	225	TOCILIZUMAB-AAZG SUBCUTANEOUS SOLN AUTO-INJ 162 MG/0.9ML.....	173	TOPIRAMATE TAB 50 MG.....	146
TIMOLOL OPHTH SOLN 0.25%.....	224	TOCILIZUMAB-AAZG SUBCUTANEOUS SOLN PREF SYR 162 MG/0.9ML.....	173	TOPIRAMATE TAB 100 MG.....	145
TIMOTHY GRASS POLLEN ALLERGEN EXT SL TAB 2800 BAU.....	243	TOCILIZUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 162 MG/0.9ML.....	172	TOPIRAMATE TAB 100 MG.....	146
TINIDAZOLE TAB 250 MG.....	27	TOCILIZUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 162 MG/0.9ML.....	172	TOPIRAMATE TAB 200 MG.....	145
TINIDAZOLE TAB 500 MG.....	27	TOFACITINIB CITRATE ORAL SOLN 1 MG/ML (BASE EQUIVALENT).....	171	TOPIRAMATE TAB 200 MG.....	146
TIOPRONIN TAB 100 MG.....	141			TOPOTECAN HCL CAP 0.25 MG (BASE EQUIV).....	119
TIOPRONIN TAB DELAYED RELEASE 100 MG.....	141			TOPOTECAN HCL CAP 1 MG (BASE EQUIV).....	119
TIOPRONIN TAB DELAYED RELEASE 300 MG.....	142			TOREMIFENE CITRATE TAB 60 MG (BASE EQUIVALENT).....	39
TIOTROPIUM BR-OLODATEROL INHAL AERO SOLN 2.5-2.5 MCG/ACT.....	244			TORSEMIDE TAB 5 MG.....	102
TIOTROPIUM BROMIDE INHAL AEROSOL 1.25 MCG/ACT.....	68			TORSEMIDE TAB 10 MG.....	102
TIOTROPIUM BROMIDE INHAL AEROSOL 2.5 MCG/ACT.....	68			TORSEMIDE TAB 20 MG.....	102
TIOTROPIUM BROMIDE INHAL AEROSOL 2.5 MCG/ACT.....	68			TORSEMIDE TAB 20 MG.....	102
TIOTROPIUM BROMIDE INHAL CAP 18 MCG (BASE EQUIV).....	68			TORSEMIDE TAB 40 MG.....	102
TIPRANAVIR CAP 250 MG.....	21			TORSEMIDE TAB 60 MG.....	102
				TORSEMIDE TAB 100 MG.....	102
				TOVORAFENIB FOR ORAL SUSP 25 MG/ML 211	

TOVORAFENIB TAB 100 MG	211	TRAVOPROST OPTH SOLN 0.004% (BENZALKONIUM FREE) (BAK FREE).....	225	TRETINOIN GEL 0.05%.....	92
TRALOKINUMAB-LDRM SUBCUTANEOUS SOLN AUTO-INJECTOR 300 MG/2ML	86	TRAZODONE HCL ORAL SOLN 50 MG/5ML	257	TRETINOIN GEL 0.025%	92
TRALOKINUMAB-LDRM SUBCUTANEOUS SOLN PREFILLED SYR 150 MG/ML	86	TRAZODONE HCL TAB 50 MG	257	TRETINOIN LOTION 0.05%.....	86
TRAMADOL-ACETAMINOPHEN TAB 37.5- 325 MG.....	232	TRAZODONE HCL TAB 100 MG	257	TRETINOIN MICROSPHERE GEL 0.1%	93
TRAMADOL HCL CAP ER 24HR BIPHASIC RELEASE 100 MG	226	TRAZODONE HCL TAB 150 MG	257	TRETINOIN MICROSPHERE GEL 0.1%	93
TRAMADOL HCL CAP ER 24HR BIPHASIC RELEASE 100 MG	229	TRAZODONE HCL TAB 300 MG.....	257	TRETINOIN MICROSPHERE GEL 0.04%	92
TRAMADOL HCL CAP ER 24HR BIPHASIC RELEASE 200 MG	226	TREPROSTINIL DIOLAMINE TAB ER 0.25 MG (BASE EQUIV)	239	TRETINOIN MICROSPHERE GEL 0.04%	92
TRAMADOL HCL CAP ER 24HR BIPHASIC RELEASE 200 MG	229	TREPROSTINIL DIOLAMINE TAB ER 0.125 MG (BASE EQUIV)	239	TRETINOIN MICROSPHERE GEL 0.06%	90
TRAMADOL HCL CAP ER 24HR BIPHASIC RELEASE 300 MG	226	TREPROSTINIL DIOLAMINE TAB ER 1 MG (BASE EQUIV).....	239	TRETINOIN MICROSPHERE GEL 0.08%	90
TRAMADOL HCL CAP ER 24HR BIPHASIC RELEASE 300 MG	229	TREPROSTINIL DIOLAMINE TAB ER 2.5 MG (BASE EQUIV)	239	TRETINOIN MICROSPHERE GEL 0.08%	93
TRAMADOL HCL TAB 25 MG	232	TREPROSTINIL DIOLAMINE TAB ER 5 MG (BASE EQUIV).....	239	TRIAMCINOLONE ACETONIDE AEROSOL SOLN 0.147 MG/GM.....	159
TRAMADOL HCL TAB 50 MG	232	TREPROSTINIL INHALATION SOLUTION 0.6 MG/ML	240	TRIAMCINOLONE ACETONIDE CREAM 0.1%.....	159
TRAMADOL HCL TAB 100 MG	232	TREPROSTINIL INHALATION SOLUTION 0.6 MG/ML	240	TRIAMCINOLONE ACETONIDE CREAM 0.5%.....	159
TRAMADOL HCL TAB ER 24HR 100 MG	229	TREPROSTINIL INHALATION SOLUTION 0.6 MG/ML	240	TRIAMCINOLONE ACETONIDE CREAM 0.5%.....	159
TRAMADOL HCL TAB ER 24HR 200 MG	229	TREPROSTINIL INH POWD 112 X 16MCG & 112 X 32MCG & 28 X 48MCG	240	TRIAMCINOLONE ACETONIDE CREAM 0.025%.....	159
TRAMADOL HCL TAB ER 24HR 300 MG	229	TREPROSTINIL INH POWDER 16 MCG/ CARTRIDGE.....	240	TRIAMCINOLONE ACETONIDE DENTAL PASTE 0.1%.....	84
TRAMADOL HCL TAB ER 24HR BIPHASIC RELEASE 100 MG	229	TREPROSTINIL INH POWDER 32 MCG/ CARTRIDGE.....	240	TRIAMCINOLONE ACETONIDE DENTAL PASTE 0.1%.....	85
TRAMADOL HCL TAB ER 24HR BIPHASIC RELEASE 200 MG	229	TREPROSTINIL INH POWDER 48 MCG/ CARTRIDGE.....	240	TRIAMCINOLONE ACETONIDE DENTAL PASTE 0.1%.....	85
TRAMADOL HCL TAB ER 24HR BIPHASIC RELEASE 300 MG	229	TREPROSTINIL INH POWDER 64 MCG/ CARTRIDGE.....	240	TRIAMCINOLONE ACETONIDE DENTAL PASTE 0.1%.....	85
TRAMETINIB DIMETHYL SULFOXIDE FOR SOLN 0.05 MG/ML (BASE EQ).....	211	TREPROSTINIL INH POWDER 80 MCG/ CARTRIDGE.....	240	TRIAMCINOLONE ACETONIDE LOTION 0.1%.....	159
TRAMETINIB DIMETHYL SULFOXIDE TAB 0.5 MG (BASE EQUIVALENT).....	211	TREPROSTINIL INH POWDER 80 MCG/ CARTRIDGE.....	240	TRIAMCINOLONE ACETONIDE LOTION 0.025%.....	159
TRAMETINIB DIMETHYL SULFOXIDE TAB 2 MG (BASE EQUIVALENT).....	211	TREPROSTINIL INH POWDER 112 X 16MCG & 84 X 32MCG.....	240	TRIAMCINOLONE ACETONIDE OINT 0.1%	159
TRANDOLAPRIL TAB 1 MG	16	TREPROSTINIL INH POWDER 112 X 32MCG & 112 X 64MCG	240	TRIAMCINOLONE ACETONIDE OINT 0.5%	159
TRANDOLAPRIL TAB 2 MG	16	TREPROSTINIL INH POWDER 112 X 48MCG & 112 X 64MCG	240	TRIAMCINOLONE ACETONIDE OINT 0.025%.....	159
TRANDOLAPRIL TAB 4 MG	16	TREPROSTINIL TAB ER TITR PK (MO1) 126 X0.125MG & 42 X0.25MG	239	TRIAMTERENE CAP 50 MG	103
TRANDOLAPRIL-VERAPAMIL HCL TAB ER 1-240 MG.....	80	TREPROSTINIL TAB ER TITR PK (MO2) 126 X0.125MG & 210 X0.25MG	239	TRIAMTERENE CAP 100 MG.....	103
TRANDOLAPRIL-VERAPAMIL HCL TAB ER 2-180 MG.....	80	TREPROSTINIL TAB ER TITR PK(MO3)126 X0.125MG&42X0.25MG&84X1MG	239	TRIAMTERENE & HYDROCHLOROTHIAZIDE CAP 37.5-25 MG	80
TRANDOLAPRIL-VERAPAMIL HCL TAB ER 2-240 MG.....	80	TRETINOIN-BENZOYL PEROXIDE CREAM 0.1-3%.....	206	TRIAMTERENE & HYDROCHLOROTHIAZIDE TAB 37.5-25 MG	78
TRANDOLAPRIL-VERAPAMIL HCL TAB ER 4-240 MG	80	TRETINOIN CAP 10 MG	245	TRIAMTERENE & HYDROCHLOROTHIAZIDE TAB 37.5-25 MG	80
TRANEXAMIC ACID TAB 650 MG	153	TRETINOIN CREAM 0.1%	92	TRIAMTERENE & HYDROCHLOROTHIAZIDE TAB 75-50 MG ...	78
*TRANSDERMAL BASE CREAM**	200	TRETINOIN CREAM 0.05%	92	TRIAMTERENE & HYDROCHLOROTHIAZIDE TAB 75-50 MG ...	80
*TRANSDERMAL BASE CREAM**	205	TRETINOIN CREAM 0.025%	92	TRIAZOLAM TAB 0.25 MG	61
*TRANSDERMAL BASE CREAM**	205	TRETINOIN GEL 0.01%	92	TRIAZOLAM TAB 0.25 MG	62
*TRANSDERMAL BASE GEL**	207			TRIAZOLAM TAB 0.125 MG	62
*TRANSDERMAL BASE GEL**	207			TRICHLOROACETIC ACID (BULK) CRYSTALS.....	205
TRANLYCYPROMINE SULFATE TAB 10 MG	213			TRICLABENDAZOLE TAB 250 MG	16
TRANLYCYPROMINE SULFATE TAB 10 MG	213			TRIENTINE HCL CAP 250 MG	118
				TRIENTINE HCL CAP 500 MG	118

TRIFAROTENE CREAM 0.005%.....	86	UREA FOAM 40%.....	93	VALGANCICLOVIR HCL TAB 450 MG	
TRIFLUOPERAZINE HCL TAB 1 MG (BASE		UREA FOAM 40%.....	94	(BASE EQUIVALENT).....	16
EQUIVALENT).....	7	UREA GEL 45%.....	94	VALINE ORAL POWDER PACKET 1 GM.....	207
TRIFLUOPERAZINE HCL TAB 2 MG (BASE		UREA GEL 45%.....	94	VALINE ORAL POWDER PACKET 50 MG.....	207
EQUIVALENT).....	7	UREA-LACTIC ACID GEL 40-10%.....	94	VALPROATE SODIUM ORAL SOLN 250	
TRIFLUOPERAZINE HCL TAB 5 MG (BASE		UREA-LACTIC ACID GEL 40-10%.....	94	MG/5ML (BASE EQUIV).....	135
EQUIVALENT).....	7	UREA LOTION 40%.....	94	VALPROIC ACID CAP 250 MG.....	135
TRIFLUOPERAZINE HCL TAB 10 MG		UREA POWDER.....	206	VALSARTAN-HYDROCHLOROTHIAZIDE	
(BASE EQUIVALENT).....	7	URIDINE TRIACETATE ORAL GRANULES		TAB 80-12.5 MG.....	80
TRIFLURIDINE OPHTH SOLN 1%.....	225	PACKET 2 GM.....	139	VALSARTAN-HYDROCHLOROTHIAZIDE	
TRIFLURIDINE-TIPIRACIL TAB 15-6.14 MG.....	47	URIDINE TRIACETATE ORAL GRANULES		TAB 160-12.5 MG.....	80
TRIFLURIDINE-TIPIRACIL TAB 20-8.19 MG.....	47	PACKET 10 GM.....	207	VALSARTAN-HYDROCHLOROTHIAZIDE	
TRIHEPTANOIN ORAL LIQUID 100%.....	110	*URINE GLUCOSE-KETONES TEST		TAB 160-25 MG.....	80
TRIHENXYPHENIDYL HCL ORAL SOLN 0.4		STRIPS***.....	96	VALSARTAN-HYDROCHLOROTHIAZIDE	
MG/ML.....	28	*URINE GLUCOSE-KETONES TEST		TAB 320-12.5 MG.....	80
TRIHENXYPHENIDYL HCL TAB 2 MG.....	28	STRIPS***.....	96	VALSARTAN-HYDROCHLOROTHIAZIDE	
TRIHENXYPHENIDYL HCL TAB 5 MG.....	28	*URINE GLUCOSE-KETONES TEST		TAB 320-25 MG.....	80
TRIMETHOENZAMIDE HCL CAP 300 MG.....	39	STRIPS***.....	98	VALSARTAN ORAL SOLN 4 MG/ML.....	14
TRIMETHOPRIM TAB 100 MG.....	27	URSODIOL CAP 300 MG.....	137	VALSARTAN TAB 40 MG.....	15
TRIMIPRAMINE MALEATE CAP 25 MG.....	262	URSODIOL TAB 250 MG.....	137	VALSARTAN TAB 80 MG.....	15
TRIMIPRAMINE MALEATE CAP 50 MG.....	262	URSODIOL TAB 500 MG.....	137	VALSARTAN TAB 160 MG.....	15
TRIMIPRAMINE MALEATE CAP 100 MG.....	262	USTEKINUMAB-AUUB INJ 45 MG/0.5ML.....	93	VALSARTAN TAB 320 MG.....	15
*TROCHE BASE GRANULES***.....	207	USTEKINUMAB-AUUB SOLN PREFILLED		VANCOMYCIN HCL CAP 125 MG (BASE	
TROFINETIDE ORAL POWDER PACKET		SYRINGE 45 MG/0.5ML.....	93	EQUIVALENT).....	27
5000 MG.....	80	USTEKINUMAB-AUUB SOLN PREFILLED		VANCOMYCIN HCL CAP 125 MG (BASE	
TROFINETIDE ORAL POWDER PACKET		SYRINGE 90 MG/ML.....	93	EQUIVALENT).....	27
6000 MG.....	80	USTEKINUMAB-KFCE SOLN PREFILLED		VANCOMYCIN HCL CAP 250 MG (BASE	
TROFINETIDE ORAL POWDER PACKET		SYRINGE 45 MG/0.5ML.....	93	EQUIVALENT).....	27
8000 MG.....	81	USTEKINUMAB-KFCE SOLN PREFILLED		VANCOMYCIN HCL CAP 250 MG (BASE	
TROFINETIDE ORAL SOLN 200 MG/ML.....	80	SYRINGE 90 MG/ML.....	93	EQUIVALENT).....	27
TROSPIMUM CHLORIDE CAP ER 24HR 60 MG.....	52	USTEKINUMAB-KFCE SUBCUTANEOUS		VANCOMYCIN HCL FOR ORAL SOLN 25	
TROSPIMUM CHLORIDE TAB 20 MG.....	52	SOLN 45 MG/0.5ML.....	93	MG/ML (BASE EQUIVALENT).....	26
TUCATINIB TAB 50 MG.....	213	USTEKINUMAB-STBA SOLN PREFILLED		VANCOMYCIN HCL FOR ORAL SOLN 25	
TUCATINIB TAB 150 MG.....	213	SYRINGE 45 MG/0.5ML.....	91	MG/ML (BASE EQUIVALENT).....	28
TURPENTINE SPIRIT.....	13	USTEKINUMAB-STBA SOLN PREFILLED		VANCOMYCIN HCL FOR ORAL SOLN 50	
TYROSINE CAP 500 MG.....	113	SYRINGE 90 MG/ML.....	91	MG/ML (BASE EQUIVALENT).....	26
TYROSINE CAP 500 MG.....	113	VADADUSTAT TAB 150 MG.....	68	VANCOMYCIN HCL FOR ORAL SOLN 50	
TYROSINE ORAL POWDER PACKET 1000		VADADUSTAT TAB 300 MG.....	68	MG/ML (BASE EQUIVALENT).....	27
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ማሳሰቢያ፡- አማርኛ (Amharic) የሚናገሩ ከሆኑ፣ ነፃ የቋንቋ እገዛ አገልግሎቶች እና ነፃ ተግባቦቶች እንደ ትልቅ እትም ባሉ ሌሎች ቅርፀቶች ለእርስዎ ይገኛሉ። በአባልነት መታወቂያ ካርድዎ ላይ ያለውን ነፃ የስልክ ቁጥር ይደውሉ።

দেখুন: আপন দ্রুত **বংলংগ** (Bengali-Bangala) কথা কও : , তাই **ক** ষ্টু ' ভাষা সহ্যে
 পঞ্জাব এক ঝড় ঝুড়ি ফসতে অ: '।: ফসল টি দ্রোণদ্রোণ্ড্রোণ আপ: ফ্রজ: ' **ক** ষ্টু '
 উপ **ক**। আপ: ফ্রস: সে ফ্রপঞ্জচ পে ফ্রকার্ডেফ্র '। -**ক**: স্বকোচ কর:

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ATANSYON: Si w pale **Kreyòl Ayisyen (Haitian Creole)**, gen sèvis lang gratis ak kominikasyon nan lòt fòm lo disponib, tankou sa ki enprime ak gwo lèt. Rele nimewo gratis ki sou kat idantifikasyon manm ou an.

ACHTUNG: Falls Sie **Deutsch (German)** sprechen, stehen Ihnen kostenlose Sprachassistentendienste und kostenlose Kommunikation in anderen Formaten, wie zum Beispiel große Schrift, zur Verfügung. Rufen Sie die gebührenfreie Nummer auf Ihrer Mitgliedskarte an.

ΠΡΟΣΟΧΗ: Εάν μιλάτε **ελληνικά (Greek)**, υπάρχουν διαθέσιμες δωρεάν υπηρεσίες γλωσσικής βοήθειας και δωρεάν επικοινωνία σε άλλες μορφοποιήσεις, όπως μεγάλα γράμματα. Καλέστε τον αριθμό χωρίς χρέωση στην κάρτα μέλους σας.

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

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

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

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

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

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

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

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

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

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

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dạng khác, chẳng hạn như bản in chữ lớn. Gọi đến số điện thoại miễn phí có trên thẻ
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