

Drug Name	Drug Requirements/ Tier Limits		Drug Name	Drug Requirements/ Tier Limits	
ANALGESICS			ANALGESICS		
GOUT			GOUT		
<i>allopurinol</i> TABS 100mg, 300mg	1		<i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg (generic of ARTHROTEC 50)</i>	1	
<i>allopurinol</i> TABS 200mg	1	ST	<i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg (generic of ARTHROTEC 75)</i>	1	
<i>allopurinol sodium</i> (generic of ALOPRIM) SOLR 500mg	3	NDS	<i>diflunisal</i> TABS 500mg	1	
<i>colchicine</i> (generic of MITIGARE) CAPS .6mg QL (60 caps / 30 days)	1	QL	<i>etodolac</i> CAPS 200mg, 300mg; TABS 500mg; TB24 400mg, 500mg, 600mg	1	
<i>colchicine</i> TABS .6mg QL (120 tabs / 30 days)	1	QL	<i>etodolac</i> (generic of LODINE) TABS 400mg	1	
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	1		<i>flurbiprofen</i> TABS 100mg	1	
<i>febuxostat</i> (generic of ULORIC) TABS 40mg, 80mg	1	PA	<i>ibu</i> TABS 400mg, 600mg, 800mg	1	
GLOPERBA SOLN .6mg/5ml QL (300 mL / 30 days)	3	QL	<i>ibuprofen</i> SUSP 100mg/5ml; TABS 400mg, 600mg, 800mg	1	
KRYSTEXXA SOLN 8mg/50ml, 8mg/ml	3	NDS NM PA	<i>ketorolac tromethamine</i> TABS 10mg QL (20 tabs / 30 days) PA applies if 65 years and older	1	QL PA
<i>probenecid</i> TABS 500mg	1		<i>meclofenamate sodium</i> CAPS 50mg, 100mg	1	
MISCELLANEOUS			<i>meloxicam</i> TABS 7.5mg, 15mg	1	
JOURNAVX TABS 50mg QL (29 tabs / 14 days)	3	QL PA	<i>nabumetone</i> TABS 500mg, 750mg	1	
<i>lidocaine hcl</i> (local anesth.) SOLN 4%	1	B/D	<i>naproxen</i> TABS 250mg, 375mg, 500mg	1	
<i>lidocaine hcl</i> (local anesth.) (generic of XYLOCAINE-MPF) SOLN .5%, 1%, 1.5%, 2%	1	B/D	<i>naproxen</i> TBEC 375mg QL (120 tabs / 30 days)	1	QL
<i>lidocaine hcl</i> (local anesth.) (generic of XYLOCAINE) SOLN .5%, 1%, 2%	1	B/D	<i>naproxen dr</i> TBEC 500mg QL (90 tabs / 30 days)	1	QL
NSAIDS			<i>naproxen sodium</i> TABS 275mg, 550mg	1	
<i>celecoxib</i> (generic of CELEBREX) CAPS 50mg, 100mg, 200mg QL (60 caps / 30 days)	1	QL	<i>oxaprozin</i> TABS 600mg	1	
<i>celecoxib</i> (generic of CELEBREX) CAPS 400mg QL (30 caps / 30 days)	1	QL	<i>piroxicam</i> CAPS 10mg, 20mg	1	
<i>diclofenac potassium</i> TABS 50mg QL (120 tabs / 30 days)	1	QL	<i>sulindac</i> TABS 150mg, 200mg	1	
<i>diclofenac sodium</i> TB24 100mg; TBEC 25mg, 50mg, 75mg	1		<i>tolmetin sodium</i> CAPS 400mg	3	NDS
			OPIOID ANALGESICS, LONG-ACTING		
			BELBUCA FILM 75mcg, 150mcg, 300mcg, 450mcg, 600mcg QL (60 buccal films / 30 days)	3	QL PA

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BELBUCA FILM 750mcg, 900mcg QL (60 buccal films / 30 days)	3	NDS QL PA
<i>buprenorphine</i> (generic of BUTRANS) PTWK 5mcg/hr, 7.5mcg/hr, 10mcg/hr, 15mcg/hr, 20mcg/hr QL (4 patches / 28 days)	1	QL PA
<i>fentanyl</i> PT72 12mcg/hr, 25mcg/hr, 37.5mcg/hr, 50mcg/hr, 62.5mcg/hr, 75mcg/hr, 87.5mcg/hr, 100mcg/hr QL (10 patches / 30 days)	1	QL PA
<i>hydrocodone bitartrate</i> CP12 10mg, 15mg, 20mg, 30mg, 40mg, 50mg QL (60 caps / 30 days)	1	QL PA
<i>hydrocodone bitartrate</i> T24A 20mg, 30mg, 40mg, 60mg, 80mg QL (30 tabs / 30 days)	1	QL PA
<i>hydrocodone bitartrate</i> T24A 100mg, 120mg QL (30 tabs / 30 days)	3	NDS QL PA
<i>hydromorphone hcl</i> TB24 8mg, 12mg, 16mg, 32mg QL (30 tabs / 30 days)	1	QL PA
<i>methadone hcl</i> SOLN 5mg/5ml, 10mg/5ml QL (450 mL / 30 days)	1	QL PA
<i>methadone hcl</i> TABS 5mg, 10mg QL (90 tabs / 30 days)	1	QL PA
METHADONE HCL INJ SOLN 10mg/ml	3	
<i>methadone hydrochloride i</i> (generic of METHADOSE) CONC 10mg/ml QL (90 mL / 30 days)	1	QL PA
<i>morphine sulfate</i> CP24 10mg, 20mg, 30mg, 50mg, 60mg, 80mg, 100mg QL (60 caps / 30 days)	1	QL PA

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<i>morphine sulfate</i> (generic of MS CONTIN) TBCR 15mg, 30mg, 60mg QL (90 tabs / 30 days)	1	QL PA
<i>morphine sulfate</i> TBCR 100mg, 200mg QL (90 tabs / 30 days)	1	QL PA
<i>morphine sulfate beads</i> CP24 30mg, 45mg, 60mg, 75mg, 90mg, 120mg QL (30 caps / 30 days)	1	QL PA
<i>tramadol hcl</i> TB24 100mg, 200mg, 300mg QL (30 tabs / 30 days)	1	QL PA
OPIOID ANALGESICS, SHORT-ACTING		
<i>acetaminophen w/ codeine</i> <i>soln 120-12 mg/5ml</i> QL (2700 mL / 30 days)	1	QL
<i>acetaminophen w/ codeine</i> <i>tab 300-15 mg</i> QL (400 tabs / 30 days)	1	QL
<i>acetaminophen w/ codeine</i> <i>tab 300-30 mg</i> QL (360 tabs / 30 days)	1	QL
<i>acetaminophen w/ codeine</i> <i>tab 300-60 mg</i> QL (180 tabs / 30 days)	1	QL
<i>acetaminophen-caffeine- dihydrocodeine cap 320.5-30- 16 mg</i> QL (300 caps / 30 days)	1	QL
<i>butorphanol tartrate</i> SOLN 1mg/ml, 2mg/ml	3	
<i>butorphanol tartrate</i> SOLN 10mg/ml QL (10 mL / 30 days)	1	QL
CODEINE SULFATE TABS 15mg, 60mg QL (180 tabs / 30 days)	3	QL
<i>codeine sulfate</i> TABS 30mg QL (180 tabs / 30 days)	1	QL
<i>endocet tab 2.5-325mg</i> QL (360 tabs / 30 days)	1	QL
<i>endocet tab 5-325mg</i> (generic of PERCOCET) QL (360 tabs / 30 days)	1	QL

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<i>endocet tab 7.5-325mg</i> (generic of PERCOCET) QL (240 tabs / 30 days)	1	QL	<i>hydromorphone hcl SOLN</i> 4mg/ml, 10mg/ml, 50mg/5ml	3	B/D
<i>endocet tab 10-325mg</i> (generic of PERCOCET) QL (180 tabs / 30 days)	1	QL	<i>hydromorphone hcl</i> (generic of DILAUDID) SOLN .2mg/ml, 1mg/ml, 2mg/ml	3	B/D
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i> QL (2700 mL / 30 days)	1	QL	<i>hydromorphone hcl</i> (generic of DILAUDID) TABS 2mg, 4mg, 8mg QL (180 tabs / 30 days)	1	QL
<i>hydrocodone-acetaminophen soln 10-300 mg/15ml</i> QL (2700 mL / 30 days)	1	QL	HYDROMORPHONE HYDROCHLORI SOLN .25mg/0.5ml, 1mg/ml, 2mg/ml, 4mg/ml	3	B/D
<i>hydrocodone-acetaminophen soln 10-325 mg/15ml</i> QL (2700 mL / 30 days)	1	QL	MORPHINE SULFATE SOLN 2mg/ml, 4mg/ml, 5mg/ml, 8mg/ml, 10mg/ml, 50mg/ml	3	B/D
<i>hydrocodone-acetaminophen tab 2.5-325 mg</i> QL (240 tabs / 30 days)	1	QL	<i>morphine sulfate</i> SOLN 2mg/ml, 4mg/ml, 8mg/ml, 10mg/ml	3	B/D
<i>hydrocodone-acetaminophen tab 5-300 mg</i> QL (240 tabs / 30 days)	1	QL	<i>morphine sulfate</i> SOLN 10mg/5ml, 20mg/5ml QL (900 mL / 30 days)	1	QL
<i>hydrocodone-acetaminophen tab 5-325 mg</i> QL (240 tabs / 30 days)	1	QL	<i>morphine sulfate</i> SOLN 100mg/5ml QL (180 mL / 30 days)	1	QL
<i>hydrocodone-acetaminophen tab 7.5-300 mg</i> QL (180 tabs / 30 days)	1	QL	<i>morphine sulfate</i> TABS 15mg, 30mg QL (180 tabs / 30 days)	1	QL
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i> QL (180 tabs / 30 days)	1	QL	MORPHINE SULFATE/SODIUM C SOLN 1mg/ml	3	B/D
<i>hydrocodone-acetaminophen tab 10-300 mg</i> QL (180 tabs / 30 days)	1	QL	<i>nalbuphine hcl</i> SOLN 10mg/ml, 20mg/ml	3	
<i>hydrocodone-acetaminophen tab 10-325 mg</i> QL (180 tabs / 30 days)	1	QL	<i>oxycodone hcl</i> CAPS 5mg QL (180 caps / 30 days)	1	QL
<i>hydrocodone-ibuprofen tab 5- 200 mg</i> QL (150 tabs / 30 days)	1	QL	<i>oxycodone hcl</i> CONC 100mg/5ml QL (180 mL / 30 days)	1	QL
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i> QL (150 tabs / 30 days)	1	QL	<i>oxycodone hcl</i> SOLN 5mg/5ml QL (900 mL / 30 days)	1	QL
<i>hydrocodone-ibuprofen tab 10-200 mg</i> QL (150 tabs / 30 days)	1	QL	<i>oxycodone hcl</i> TABS 5mg, 10mg, 20mg QL (180 tabs / 30 days)	1	QL
<i>hydromorphone hcl</i> (generic of DILAUDID) LIQD 1mg/ml QL (600 mL / 30 days)	1	QL	<i>oxycodone hcl</i> (generic of ROXICODONE) TABS 15mg, 30mg QL (180 tabs / 30 days)	1	QL

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<i>oxycodone w/ acetaminophen soln 5-325 mg/5ml</i> QL (1800 mL / 30 days)	1	QL	<i>clindamycin palmitate hydrochloride (generic of CLEOCIN PEDIATRIC GRANULE) SOLR 75mg/5ml</i>	1	
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i> QL (360 tabs / 30 days)	1	QL	<i>clindamycin phosphate (generic of CLEOCIN PHOSPHATE) SOLN 300mg/2ml, 600mg/4ml, 900mg/6ml</i>	1	
<i>oxycodone w/ acetaminophen tab 5-325 mg (generic of PERCOCET)</i> QL (360 tabs / 30 days)	1	QL	<i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i>	1	
<i>oxycodone w/ acetaminophen tab 7.5-325 mg (generic of PERCOCET)</i> QL (240 tabs / 30 days)	1	QL	<i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i>	1	
<i>oxycodone w/ acetaminophen tab 10-325 mg (generic of PERCOCET)</i> QL (180 tabs / 30 days)	1	QL	<i>clindamycin phosphate in d5w iv soln 900 mg/50ml</i>	1	
<i>oxymorphone hcl TABS 5mg, 10mg</i> QL (180 tabs / 30 days)	1	QL	CLINDMYC/NAC INJ 300/50ML	3	
<i>tramadol hcl TABS 50mg</i> QL (240 tabs / 30 days)	1	QL	CLINDMYC/NAC INJ 600/50ML	3	
<i>tramadol-acetaminophen tab 37.5-325 mg</i> QL (240 tabs / 30 days)	1	QL	CLINDMYC/NAC INJ 900/50ML	3	
<i>trezix</i> QL (300 caps / 30 days)	1	QL	<i>colistimethate sodium (generic of COLY-MYCIN M) SOLR 150mg</i>	1	
ANTI-INFECTIVES			<i>dalbavancin hcl (generic of DALVANCE) SOLR 500mg</i>	3	NDS
ANTI-INFECTIVES - MISCELLANEOUS			DALVANCE SOLR 500mg	3	NDS
<i>albendazole TABS 200mg</i> QL (672 tabs / year)	1	QL PA	<i>dapsone TABS 25mg, 100mg</i>	1	
<i>amikacin sulfate SOLN 1gm/4ml, 500mg/2ml</i>	1		DAPTOMY/NAACL INJ 350/50ML	3	
ARIKAYCE SUSP 590mg/8.4ml	3	NDS NM PA	DAPTOMY/NAACL INJ 500/50ML	3	
<i>atovaquone (generic of MEPRON) SUSP 750mg/5ml</i> QL (300 mL / 30 days)	1	QL PA	DAPTOMYCIN SOLR 350mg	3	NDS
<i>aztreonam (generic of AZACTAM) SOLR 1gm, 2gm</i>	1		<i>daptomycin (generic of DAPTOMYCIN) SOLR 350mg</i>	3	NDS
BLUJEPa TABS 750mg	2		<i>daptomycin SOLR 500mg</i>	3	NDS
CAYSTON SOLR 75mg	3	NDS NM PA	EMBLAVEO INJ 2GM	3	NDS
<i>clindamycin hcl (generic of CLEOCIN) CAPS 75mg, 150mg, 300mg</i>	1		EMVERM CHEW 100mg QL (12 tabs / year)	3	NDS QL
			<i>ertapenem sodium SOLR 1gm</i>	1	
			<i>fosfomycin tromethamine PACK 3gm</i>	1	
			<i>gentamicin in saline inj 0.8 mg/ml</i>	1	
			<i>gentamicin in saline inj 1 mg/ml</i>	1	

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<i>gentamicin in saline inj 1.2 mg/ml</i>	1	
<i>gentamicin in saline inj 1.6 mg/ml</i>	1	
<i>gentamicin in saline inj 2 mg/ml</i>	1	
<i>gentamicin sulfate</i> SOLN 10mg/ml, 40mg/ml	1	
HUMATIN CAPS 250mg	3	NDS
<i>imipenem-cilastatin intravenous for soln 250 mg</i>	1	
<i>imipenem-cilastatin intravenous for soln 500 mg (generic of PRIMAXIN IV)</i>	1	
IMPAVIDO CAPS 50mg	3	NDS PA
<i>ivermectin (generic of STROMECTOL) TABS 3mg QL (20 tabs / 90 days)</i>	1	QL PA
<i>ivermectin TABS 6mg QL (10 tabs / 90 days)</i>	1	QL PA
KIMYRSA SOLR 1200mg	3	NDS
LIKMEZ SUSP 500mg/5ml	3	
<i>linezolid (generic of ZYVOX) SOLN 600mg/300ml</i>	1	
<i>linezolid (generic of ZYVOX) SUSR 100mg/5ml QL (1800 mL / 30 days)</i>	3	NDS QL
<i>linezolid TABS 600mg QL (60 tabs / 30 days)</i>	1	QL
LINEZOLID INJ 2MG/ML	3	
MEROP/NACL INJ 1GM/50ML	3	
MEROP/NACL INJ 500/50ML	3	
<i>meropenem SOLR 1gm, 500mg</i>	1	
<i>meropenem (generic of MEROPENEM) SOLR 2gm</i>	1	
<i>methenamine hippurate (generic of HIPREX) TABS 1gm</i>	1	
<i>metronidazole CAPS 375mg; TABS 125mg, 250mg, 500mg</i>	1	
<i>metronidazole (generic of METRONIDAZOLE) SOLN 500mg/100ml</i>	1	
<i>neomycin sulfate TABS 500mg</i>	1	

Drug Name	Drug Requirements/ Tier	Limits
<i>nitazoxanide TABS 500mg QL (6 tabs / 30 days)</i>	3	NDS QL
<i>nitrofurantoin macrocrystal (generic of MACRODANTIN) CAPS 25mg, 50mg, 100mg</i>	2	
<i>nitrofurantoin monohyd macro (generic of MACROBID) CAPS 100mg</i>	2	
ORBACTIV SOLR 400mg	3	NDS
ORLYNVAH TAB 500-500	3	NDS NM
<i>pentamidine isethionate inh (generic of NEBUPENT) SOLR 300mg</i>	1	B/D
<i>pentamidine isethionate inj (generic of PENTAM 300) SOLR 300mg</i>	1	
<i>polymyxin b sulfate SOLR 500000unit</i>	1	
<i>praziquantel TABS 600mg</i>	1	
<i>pyrimethamine (generic of DARAPRIM) TABS 25mg QL (90 tabs / 30 days)</i>	3	NDS QL PA
RECARBRIO INJ 1.25GM	3	NDS
SIVEXTRO SOLR 200mg; TABS 200mg	3	NDS
SOLOSEC PACK 2gm	3	
<i>streptomycin sulfate SOLR 1gm</i>	3	NDS
<i>sulfadiazine TABS 500mg</i>	3	NDS
<i>sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml</i>	1	
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	1	
<i>sulfamethoxazole-trimethoprim tab 400-80 mg (generic of BACTRIM)</i>	1	
<i>sulfamethoxazole-trimethoprim tab 800-160 mg (generic of BACTRIM DS)</i>	1	
<i>tinidazole TABS 250mg, 500mg</i>	1	
TOBI PODHALER CAPS 28mg	3	NDS NM PA
<i>tobramycin (generic of BETHKIS) NEBU 300mg/4ml</i>	3	NDS NM PA

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<i>tobramycin</i> (generic of KITABIS PAK) NEBU 300mg/5ml	3	NDS NM PA
<i>tobramycin sulfate</i> SOLN 1.2gm/30ml, 10mg/ml, 80mg/2ml	1	
<i>trimethoprim</i> TABS 100mg	1	
TYZAVAN SOLN 500mg/100ml, 750mg/150ml, 1000mg/200ml, 1250mg/250ml, 1500mg/300ml, 1750mg/350ml, 2000mg/400ml	3	
VABOMERE INJ 2GM(1-1)	3	NDS
VANCOMYC/D5W INJ 1.5/300	3	
VANCOMYC/D5W INJ 1.25/250	3	
<i>vancomycin hcl</i> (generic of VANCOCIN) CAPS 125mg QL (80 caps / 180 days)	1	QL
<i>vancomycin hcl</i> (generic of VANCOCIN) CAPS 250mg QL (160 caps / 180 days)	1	QL
<i>vancomycin hcl</i> SOLN 750mg/150ml, 1000mg/200ml, 1250mg/250ml, 1500mg/300ml, 1750mg/350ml, 2000mg/400ml; SOLR 1gm, 1.5gm, 5gm, 10gm, 500mg	1	
<i>vancomycin hcl</i> (generic of VANCOMYCIN HYDROCHLORIDE) SOLR 1.25gm, 750mg	1	
<i>vancomycin hcl</i> (generic of FIRVANQ) SOLR 25mg/ml QL (1800 mL / 180 days)	1	QL
<i>vancomycin hcl</i> SOLR 250mg/5ml QL (1800 mL / 180 days)	1	QL

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VANCOMYCIN HYDROCHLORIDE SOLN 500mg/100ml; SOLR 1gm, 1.75gm, 2gm, 5gm, 10gm, 500mg, 750mg	3	
VANCOMYCIN INJ 1 GM	3	
VANCOMYCIN INJ 500MG	3	
VANCOMYCIN INJ 750MG	3	
VIBATIV SOLR 750mg	3	NDS
XACDURO INJ 1-1GM	3	NDS
XIFAXAN TABS 200mg QL (9 tabs / 30 days)	3	QL
ZEMDRI SOLN 500mg/10ml	3	NDS
ANTIFUNGALS		
<i>amphotericin b</i> SOLR 50mg	1	B/D
<i>amphotericin b liposome</i> (generic of AMBISOME) SUSR 50mg	3	NDS B/D
<i>caspofungin acetate</i> SOLR 50mg, 70mg	1	
CRESEMBA CAPS 74.5mg, 186mg; SOLR 372mg	3	NDS PA
ERAXIS SOLR 50mg	3	
ERAXIS SOLR 100mg	3	NDS
<i>fluconazole</i> SUSR 10mg/ml; TABS 50mg, 100mg, 200mg	1	
<i>fluconazole</i> (generic of DIFLUCAN) SUSR 40mg/ml; TABS 150mg	1	
<i>fluconazole in nacl 0.9% inj</i> 200 mg/100ml	1	
<i>fluconazole in nacl 0.9% inj</i> 400 mg/200ml	1	
<i>flucytosine</i> (generic of ANCOBON) CAPS 250mg, 500mg	3	NDS PA
<i>fulvicin p/g 165</i> TABS 165mg	3	NDS
<i>griseofulvin microsize</i> SUSP 125mg/5ml; TABS 500mg	1	
<i>griseofulvin ultramicrosize</i> TABS 125mg, 250mg	1	
<i>griseofulvin ultramicrosize</i> TABS 165mg	3	NDS
<i>itraconazole</i> (generic of SPORANOX) CAPS 100mg QL (120 caps / 30 days)	1	QL
<i>itraconazole</i> SOLN 10mg/ml	3	NDS

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<i>ketoconazole</i> TABS 200mg	1	PA
<i>micafungin sodium</i> SOLR 50mg, 100mg	1	
MICAFUNGIN/NACL INJ 50MG/50ML	3	NDS
MICAFUNGIN/NACL INJ 100MG/100ML	3	NDS
MICAFUNGIN/NACL INJ 150MG/150ML	3	NDS
NOXAFIL PACK 300mg QL (32 packets / 30 days)	3	NDS QL PA
<i>nystatin</i> TABS 500000unit	1	
<i>posaconazole</i> (generic of NOXAFIL) SOLN 300mg/16.7ml	3	NDS
<i>posaconazole</i> SUSP 40mg/ml QL (630 mL / 30 days)	3	NDS QL PA
<i>posaconazole</i> TBEC 100mg QL (93 tabs / 30 days)	3	NDS QL PA
REZZAYO SOLR 200mg	3	NDS
<i>terbinafine hcl</i> TABS 250mg QL (30 tabs / 30 days) PA applies after a 90 day supply in a calendar year	1	QL PA
TOLSURA CAPS 65mg QL (120 caps / 30 days)	3	NDS QL PA
VIVJOA CPPK 150mg QL (18 caps / 84 days)	3	NDS QL NM PA
<i>voriconazole</i> (generic of VFEND IV) SOLR 200mg	1	PA
<i>voriconazole</i> (generic of VFEND) SUSR 40mg/ml QL (600 mL / 28 days)	3	NDS QL PA
<i>voriconazole</i> TABS 50mg QL (480 tabs / 30 days)	1	QL
<i>voriconazole</i> TABS 200mg QL (120 tabs / 30 days)	1	QL
ANTIMALARIALS		
<i>atovaquone-proguanil hcl tab</i> 62.5-25 mg (generic of MALARONE)	1	
<i>atovaquone-proguanil hcl tab</i> 250-100 mg (generic of MALARONE)	1	
<i>chloroquine phosphate</i> TABS 250mg, 500mg	1	

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COARTEM TAB 20-120MG	3	
KRINTAFEL TABS 150mg	3	
<i>mefloquine hcl</i> TABS 250mg	1	
PRIMAQUINE PHOSPHATE TABS 26.3mg	2	
<i>primaquine phosphate</i> (generic of PRIMAQUINE PHOSPHATE) TABS 26.3mg	1	
<i>quinine sulfate</i> CAPS 324mg	1	PA
ANTIRETROVIRAL AGENTS		
<i>abacavir sulfate</i> (generic of ZIAGEN) SOLN 20mg/ml	1	NM
<i>abacavir sulfate</i> TABS 300mg	1	NM
APTIVUS CAPS 250mg	3	NDS NM
<i>atazanavir sulfate</i> CAPS 150mg	1	NM
<i>atazanavir sulfate</i> (generic of REYATAZ) CAPS 200mg, 300mg	1	NM
<i>darunavir</i> (generic of PREZISTA) TABS 600mg QL (60 tabs / 30 days)	1	QL NM
<i>darunavir</i> (generic of PREZISTA) TABS 800mg QL (30 tabs / 30 days)	1	QL NM
EDURANT TABS 25mg	3	NDS NM
EDURANT PED TBSO 2.5mg	3	NDS NM
<i>efavirenz</i> TABS 600mg	1	NM
<i>emtricitabine</i> (generic of EMTRIVA) CAPS 200mg	1	NM
EMTRIVA SOLN 10mg/ml	3	NM
<i>etravirine</i> (generic of INTELENCE) TABS 100mg, 200mg	3	NDS NM
<i>fosamprenavir calcium</i> TABS 700mg	3	NDS NM
INTELENCE TABS 25mg	3	NM
ISENTRESS CHEW 25mg	3	NM
ISENTRESS CHEW 100mg; PACK 100mg; TABS 400mg	3	NDS NM
ISENTRESS HD TABS 600mg	3	NDS NM
<i>lamivudine</i> (generic of EPIVIR) SOLN 10mg/ml; TABS 150mg, 300mg	1	NM
<i>maraviroc</i> (generic of SELZENTRY) TABS 150mg, 300mg	3	NDS NM

Information on the symbols, abbreviations, and what they mean can be found on the page prior to the start of the drug list.

Drug Name	Drug Requirements/ Tier	Limits
<i>nevirapine</i> SUSP 50mg/5ml; TABS 200mg; TB24 400mg	1	NM
NORVIR PACK 100mg	3	NM
PIFELTRO TABS 100mg	3	NDS NM
PREZISTA SUSP 100mg/ml QL (400 mL / 30 days)	3	NDS QL NM
PREZISTA TABS 75mg QL (480 tabs / 30 days)	3	QL NM
PREZISTA TABS 150mg QL (240 tabs / 30 days)	3	NDS QL NM
REYATAZ PACK 50mg	3	NDS NM
<i>ritonavir</i> (generic of NORVIR) TABS 100mg	1	NM
RUKOBIA TB12 600mg	3	NDS NM
SELZENTRY SOLN 20mg/ml	3	NDS NM
SUNLENCA TABS 300mg; TBPK 300mg	3	NDS NM
<i>tenofovir disoproxil fumarate</i> (generic of VIREAD) TABS 300mg	1	NM
TIVICAY TABS 50mg	3	NDS NM
TIVICAY PD TBSO 5mg	3	NDS NM
TROGARZO SOLN 200mg/1.33ml	3	NDS NM
TYBOST TABS 150mg	2	NM
VIRACEPT TABS 250mg, 625mg	3	NDS NM
VIREAD POWD 40mg/gm; TABS 150mg, 200mg, 250mg	3	NDS NM
<i>zidovudine</i> (generic of RETROVIR) CAPS 100mg; SYRP 50mg/5ml	1	NM
<i>zidovudine</i> TABS 300mg	1	NM
ANTIRETROVIRAL COMBINATION AGENTS		
<i>abacavir sulfate-lamivudine</i> <i>tab 600-300 mg</i>	1	NM
BIKTARVY TAB 30-120-15 MG	3	NDS NM
BIKTARVY TAB 50-200-25 MG	3	NDS NM
CIMDUO TAB 300-300	3	NDS NM
DELSTRIGO TAB	3	NDS NM
DESCOVY TAB 120-15MG	3	NDS NM
DESCOVY TAB 200/25MG	3	NDS NM
DOVATO TAB 50-300MG	3	NDS NM

Drug Name	Drug Requirements/ Tier	Limits
<i>efavirenz-emtricitabine- tenofovir df tab 600-200-300 mg</i>	1	NM
<i>efavirenz-lamivudine-tenofovir</i> <i>df tab 400-300-300 mg</i>	3	NDS NM
<i>efavirenz-lamivudine-tenofovir</i> <i>df tab 600-300-300 mg</i> (generic of SYMFI)	3	NDS NM
<i>emtricitabine- rilpivirine- tenofovir df tab 200-25-300 mg</i> (generic of COMPLERA)	3	NDS NM
<i>emtricitabine-tenofovir</i> <i>disoproxil fumarate tab 100- 150 mg</i> (generic of TRUVADA)	1	NM
<i>emtricitabine-tenofovir</i> <i>disoproxil fumarate tab 133- 200 mg</i> (generic of TRUVADA)	3	NDS NM
<i>emtricitabine-tenofovir</i> <i>disoproxil fumarate tab 167- 250 mg</i> (generic of TRUVADA)	1	NM
<i>emtricitabine-tenofovir</i> <i>disoproxil fumarate tab 200- 300 mg</i> (generic of TRUVADA)	1	NM
EVOTAZ TAB 300-150	3	NDS NM
GENVOYA TAB	3	NDS NM
JULUCA TAB 50-25MG	3	NDS NM
KALETRA SOL	3	NM
<i>lamivudine-zidovudine tab</i> <i>150-300 mg</i>	1	NM
<i>lopinavir-ritonavir tab 100-25 mg</i> (generic of KALETRA)	1	NM
<i>lopinavir-ritonavir tab 200-50 mg</i> (generic of KALETRA)	1	NM
ODEFSEY TAB	3	NDS NM
PREZCOBIX TAB 675/150	3	NDS NM
PREZCOBIX TAB 800-150	3	NDS NM
STRIBILD TAB	3	NDS NM
SYMTUZA TAB	3	NDS NM
TRIUMEQ PD TAB	3	NM
TRIUMEQ TAB	3	NDS NM
ANTITUBERCULAR AGENTS		
<i>cycloserine</i> CAPS 250mg	3	NDS
<i>ethambutol hcl</i> TABS 100mg, 400mg	1	

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>isoniazid</i> SYRP 50mg/5ml; TABS 100mg, 300mg	1	
PRETOMANID TABS 200mg	3	
PRIFTIN TABS 150mg	3	
<i>pyrazinamide</i> TABS 500mg	1	
<i>rifabutin</i> CAPS 150mg	1	
<i>rifampin</i> CAPS 150mg, 300mg	1	
<i>rifampin</i> (generic of RIFADIN) SOLR 600mg	1	
SIRTURO TABS 20mg, 100mg	3	NDS NM PA
ANTIVIRALS		
<i>acyclovir</i> CAPS 200mg; SUSP 200mg/5ml; TABS 400mg, 800mg	1	
<i>acyclovir sodium</i> SOLN 50mg/ml	1	B/D
<i>adefovir dipivoxil</i> TABS 10mg	1	NM
BARACLUDE SOLN .05mg/ml	3	NDS NM ST
<i>cidofovir</i> SOLN 75mg/ml	1	
<i>entecavir</i> (generic of BARACLUDE) TABS .5mg, 1mg	1	NM
EPCLUSA PAK 150-37.5	3	NDS NM PA
EPCLUSA PAK 200-50MG	3	NDS NM PA
EPCLUSA TAB 200-50MG	3	NDS NM PA
EPCLUSA TAB 400-100	3	NDS NM PA
<i>famciclovir</i> TABS 125mg, 250mg, 500mg	1	
<i>foscarnet sodium</i> (generic of FOSCAVIR) SOLN 6000mg/250ml	3	NDS B/D
GANCICLOVIR SOLN 500mg/10ml	3	B/D
<i>ganciclovir sodium</i> SOLR 500mg	1	B/D
HARVONI PAK 33.75-150MG	3	NDS NM PA
HARVONI PAK 45-200MG	3	NDS NM PA
HARVONI TAB 45-200MG	3	NDS NM PA
HARVONI TAB 90-400MG	3	NDS NM PA
<i>lamivudine (hbv)</i> TABS 100mg	1	NM
LIVTENCITY TABS 200mg QL (336 tabs / 28 days)	3	NDS QL NM PA
MAVYRET PAK 50-20MG	3	NDS NM PA

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
MAVYRET TAB 100-40MG	3	NDS NM PA
<i>oseltamivir phosphate</i> CAPS 30mg QL (168 caps / year)	1	QL
<i>oseltamivir phosphate</i> (generic of TAMIFLU) CAPS 45mg, 75mg QL (84 caps / year)	1	QL
<i>oseltamivir phosphate</i> (generic of TAMIFLU) SUSR 6mg/ml QL (1080 mL / year)	1	QL
PAXLOVID PAK QL (22 tabs / 90 days)	1	QL
PAXLOVID TAB 150-100 QL (40 tabs / 90 days)	1	QL
PAXLOVID TAB 300-100 QL (60 tabs / 90 days)	1	QL
PEGASYS SOLN 180mcg/ml; SOSY 180mcg/0.5ml	3	NDS NM PA
PREVYMIS PACK 20mg, 120mg QL (120 packets / 30 days)	3	NDS QL PA
PREVYMIS SOLN 240mg/12ml, 480mg/24ml	3	NDS
PREVYMIS TABS 240mg, 480mg QL (28 tabs / 28 days)	3	NDS QL PA
RAPIVAB SOLN 200mg/20ml	3	NDS
RELENZA DISKHALER AEPB 5mg/blister QL (6 inhalers / year)	2	QL
<i>ribavirin (hepatitis c)</i> CAPS 200mg; TABS 200mg	1	NM
<i>rimantadine hydrochloride</i> TABS 100mg	1	
<i>valacyclovir hcl</i> (generic of VALTREX) TABS 1gm, 500mg	1	
<i>valganciclovir hcl</i> (generic of VALCYTE) SOLR 50mg/ml	3	NDS
<i>valganciclovir hcl</i> TABS 450mg	1	
VOSEVI TAB	3	NDS NM PA
XOFLUZA TBPK 40mg, 80mg QL (1 tab / 180 days)	3	QL

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
CEPHALOSPORINS					
AVYCAZ INJ 2-0.5GM	3	NDS	<i>ceftazidime</i> SOLR 1gm, 2gm, 6gm	1	
<i>cefaclor</i> CAPS 250mg, 500mg; SUSR 250mg/5ml	1		<i>ceftriaxone sodium</i> SOLR 1gm, 2gm, 10gm, 250mg, 500mg	1	
CEFACLOR ER TB12 500mg	3		<i>cefuroxime axetil</i> TABS 250mg, 500mg	1	
<i>cefadroxil</i> CAPS 500mg; SUSR 250mg/5ml, 500mg/5ml; TABS 1gm	1		<i>cefuroxime sodium</i> SOLR 1.5gm, 750mg	1	
CEFAZOLIN SOLR 2gm, 3gm	3		<i>cephalexin</i> CAPS 250mg, 500mg, 750mg; SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg	1	
CEFAZOLIN INJ 1GM/50ML	3		FETROJA SOLR 1gm	3	NDS
<i>cefazolin sodium</i> SOLR 1gm, 2gm, 3gm, 10gm, 500mg	1		<i>tazicef</i> SOLR 1gm, 2gm, 6gm	1	
CEFAZOLIN SOLN 2GM/100ML-4%	3		TEFLARO SOLR 400mg, 600mg	3	NDS
CEFAZOLIN/DEX SOL 1GM/50ML-4%	3		ZERBAXA INJ 1.5GM	3	NDS
CEFAZOLIN/DEX SOL 2GM/50ML-3%	3		ZEVTERA SOLR 500mg	3	NDS
CEFAZOLIN/DEX SOL 3GM/50ML-2%	3		ERYTHROMYCINS/MACROLIDES		
CEFAZOLIN/DEX SOL 3GM/150ML-4%	3		<i>azithromycin</i> (generic of ZITHROMAX) SOLR 500mg; SUSR 200mg/5ml; TABS 250mg, 500mg	1	
<i>cefdinir</i> CAPS 300mg; SUSR 125mg/5ml, 250mg/5ml	1		<i>azithromycin</i> SUSR 100mg/5ml; TABS 600mg	1	
CEFEPIME SOLN 1gm/50ml, 2gm/100ml	3		<i>clarithromycin</i> SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg	1	
<i>cefepime hcl</i> SOLR 1gm, 2gm	1		<i>clarithromycin</i> (generic of BIAXIN XL) TB24 500mg	1	
CEFEPIME/DEX INJ 1GM	3		DIFICID SUSR 40mg/ml	3	NDS
CEFEPIME/DEX INJ 2GM	3		<i>e.e.s. 400</i> TABS 400mg	1	
<i>cefixime</i> CAPS 400mg; SUSR 100mg/5ml, 200mg/5ml; TABS 400mg	1		ERYTHROCIN LACTOBIONATE SOLR 500mg	3	
<i>cefotetan disodium</i> (generic of CEFOTAN) SOLR 1gm, 2gm	1		<i>erythromycin base</i> CPEP 250mg; TABS 250mg, 500mg; TBEC 250mg, 333mg, 500mg	1	
CEFOXITIN INJ 1GM	3		<i>erythromycin ethylsuccinate</i> (generic of E.E.S. GRANULES) SUSR 200mg/5ml	1	
CEFOXITIN INJ 2GM	3		<i>erythromycin ethylsuccinate</i> (generic of ERYPED 400) SUSR 400mg/5ml	3	NDS
<i>cefoxitin sodium</i> SOLR 1gm, 2gm, 10gm	1		<i>erythromycin ethylsuccinate</i> TABS 400mg	1	
<i>cefpodoxime proxetil</i> SUSR 50mg/5ml, 100mg/5ml; TABS 100mg, 200mg	1				
<i>cefprozil</i> SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg	1				

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
<i>erythromycin lactobionate</i> (generic of ERYTHROCIN LACTOBIONATE) SOLR 500mg	1		<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	1	
<i>fidaxomicin</i> (generic of DIFICID) TABS 200mg	3	NDS	<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i> (generic of AUGMENTIN ES-600)	1	
FLUOROQUINOLONES			<i>amoxicillin & k clavulanate tab 250-125 mg</i>	1	
BAXDELA SOLR 300mg; TABS 450mg	3	NDS	<i>amoxicillin & k clavulanate tab 500-125 mg</i>	1	
CIPRO SUSR 5gm/100ml, 500mg/5ml	3		<i>amoxicillin & k clavulanate tab 875-125 mg</i>	1	
<i>ciprofloxacin 200 mg/100ml in d5w</i>	1		<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	1	
<i>ciprofloxacin 400 mg/200ml in d5w</i>	1		<i>ampicillin CAPS 500mg</i>	1	
<i>ciprofloxacin hcl</i> (generic of CIPRO) TABS 250mg, 500mg	1		<i>ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm</i> (generic of UNASYN)	1	
<i>ciprofloxacin hcl</i> TABS 750mg	1		<i>ampicillin & sulbactam sodium for inj 3 (2-1) gm</i> (generic of UNASYN)	1	
<i>levofloxacin</i> SOLN 25mg/ml; TABS 250mg, 500mg, 750mg	1		<i>ampicillin & sulbactam sodium for iv soln 1.5 (1-0.5) gm</i>	1	
<i>levofloxacin in d5w iv soln 250 mg/50ml</i>	1		<i>ampicillin & sulbactam sodium for iv soln 3 (2-1) gm</i>	1	
<i>levofloxacin in d5w iv soln 500 mg/100ml</i>	1		<i>ampicillin & sulbactam sodium for iv soln 15 (10-5) gm</i> (generic of UNASYN BULK PACK)	1	
<i>levofloxacin in d5w iv soln 750 mg/150ml</i>	1		<i>ampicillin sodium</i> SOLR 1gm, 2gm, 10gm, 250mg, 500mg	1	
<i>moxifloxacin hcl</i> TABS 400mg	1		AUGMENTIN SUS 125/5ML	3	
<i>moxifloxacin hcl 400 mg/250ml in sodium chloride 0.8% inj</i>	1		BICILLIN C-R INJ 900/300	3	
MOXIFLOXACIN HYDROCHLORID SOLN 400mg/250ml	3		BICILLIN C-R INJ 1200000	3	
PENICILLINS			BICILLIN L-A SUSY 600000unit/ml, 1200000unit/2ml, 2400000unit/4ml	3	
<i>amoxicillin</i> CAPS 250mg, 500mg; CHEW 125mg, 250mg; SUSR 125mg/5ml, 200mg/5ml, 250mg/5ml, 400mg/5ml; TABS 500mg, 875mg	1		<i>dicloxacillin sodium</i> CAPS 250mg, 500mg	1	
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	1		NAFCILLIN INJ 2GM/100	3	NDS
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	1		<i>nafcillin sodium</i> SOLR 1gm, 2gm	1	
			<i>nafcillin sodium</i> SOLR 10gm	3	NDS
			OXACILLIN INJ 2GM	3	
			<i>oxacillin sodium</i> SOLR 1gm, 2gm, 10gm	1	

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
PEN GK/DEXTR INJ 40000/ML	3	
PEN GK/DEXTR INJ 60000/ML	3	
<i>penicillin g potassium</i> SOLR 5000000unit, 20000000unit	1	
<i>penicillin g sodium</i> SOLR 5000000unit	1	
<i>penicillin v potassium</i> SOLR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg	1	
<i>pfizerpen</i> SOLR 5000000unit, 1 20000000unit	1	
PIP/TAZ/NACL INJ 2-0.25GM	3	
PIP/TAZ/NACL INJ 3-0.375G	3	
PIP/TAZ/NACL INJ 4-0.5GM	3	
<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	1	
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	1	
<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	1	
<i>piperacillin sod-tazobactam sod for inj 13.5 gm (12-1.5 gm)</i>	1	
<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	1	
ZOSYN SOL 2-0.25GM	3	
ZOSYN SOL 3-0.375G	3	
ZOSYN SOL 4-0.50GM	3	
TETRACYCLINES		
<i>demeclocycline hcl</i> TABS 150mg, 300mg	1	
<i>doxy 100</i> SOLR 100mg	1	
<i>doxycycline (monohydrate)</i> CAPS 50mg, 100mg; SUSR 25mg/5ml; TABS 50mg, 75mg, 100mg, 150mg	1	
<i>doxycycline hyclate</i> CAPS 50mg, 100mg; SOLR 100mg; TABS 20mg, 100mg	1	
<i>minocycline hcl</i> CAPS 50mg, 75mg, 100mg; TABS 50mg, 75mg, 100mg	1	
NUZYRA SOLR 100mg	3	NDS NM

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
NUZYRA TABS 150mg QL (30 tabs / 14 days)	3	NDS QL NM
<i>tetracycline hcl</i> CAPS 250mg, 1 500mg	1	
<i>tigecycline</i> (generic of TYGACIL) SOLR 50mg	1	
XERAVA SOLR 50mg, 100mg	3	
ANTINEOPLASTIC AGENTS ALKYLATING AGENTS		
<i>bendamustine hcl</i> (generic of TREANDA) SOLR 25mg, 100mg	3	NDS B/D NM
BENDAMUSTINE HYDROCHLORID SOLN 100mg/4ml	3	NDS B/D NM
BENDEKA SOLN 100mg/4ml	3	NDS B/D NM
<i>carboplatin</i> SOLN 50mg/5ml, 150mg/15ml, 450mg/45ml, 600mg/60ml	1	B/D
<i>cisplatin</i> SOLN 50mg/50ml, 100mg/100ml	1	B/D
<i>cisplatin</i> (generic of CISPLATIN) SOLN 200mg/200ml	1	B/D
<i>cyclophosphamide</i> CAPS 25mg, 50mg; SOLR 1gm, 500mg	1	B/D
CYCLOPHOSPHAMIDE SOLN 1gm/2ml, 2gm/4ml, 500mg/ml	3	NDS B/D NM
CYCLOPHOSPHAMIDE SOLN 1gm/5ml, 500mg/2.5ml, 500mg/5ml, 1000mg/10ml, 2000mg/20ml	3	NDS B/D
<i>cyclophosphamide</i> SOLR 2gm	3	NDS B/D
CYCLOPHOSPHAMIDE TABS 25mg, 50mg	3	B/D
CYCLOPHOSPHAMIDE MONOHYDR SOLN 2gm/10ml	3	NDS B/D
FRINDOVYX SOLN 1gm/2ml, 2gm/4ml, 500mg/ml	3	NDS B/D NM
GLEOSTINE CAPS 10mg, 40mg	3	NM
GLEOSTINE CAPS 100mg	3	NDS NM
GRAFAPEX SOLR 1gm, 5gm	3	NDS B/D NM

Drug Name	Drug Requirements/ Tier	Limits
IFEX SOLR 3gm	3	B/D
<i>ifosfamide</i> SOLN 1gm/20ml, 3gm/60ml	1	B/D
IFOSFAMIDE SOLR 3gm	3	B/D
KYXATA SOLN 80mg/8ml, 500mg/50ml	3	NDS B/D NM
LEUKERAN TABS 2mg	3	NDS PA
<i>lomustine</i> (generic of GLEOSTINE) CAPS 10mg, 40mg	1	NM
<i>lomustine</i> (generic of GLEOSTINE) CAPS 100mg	3	NDS NM
<i>oxaliplatin</i> SOLN 50mg/10ml, 100mg/20ml, 200mg/40ml	1	B/D
<i>oxaliplatin</i> SOLR 50mg, 100mg	3	NDS B/D
VIVIMUSTA SOLN 100mg/4ml	3	NDS B/D NM
ZEPZELCA SOLR 4mg	3	NDS NM PA
ANTIMETABOLITES		
AXTLE SOLR 100mg, 500mg	3	NDS B/D NM
<i>azacitidine</i> (generic of VIDAZA) SUSR 100mg	3	NDS B/D NM
<i>cytarabine</i> SOLN 20mg/ml, 100mg/ml	1	B/D
<i>decitabine</i> SOLR 50mg	3	NDS B/D NM
<i>fludarabine phosphate</i> SOLN 50mg/2ml; SOLR 50mg	1	B/D
<i>fluorouracil</i> SOLN 1gm/20ml, 2.5gm/50ml, 5gm/100ml, 500mg/10ml	1	B/D
FOLOTYN SOLN 20mg/ml, 40mg/2ml	3	NDS NM PA
<i>gemcitabine hcl</i> (generic of GEMCITABINE HYDROCHLORIDE) SOLN 1gm/26.3ml, 2gm/52.6ml, 200mg/5.26ml	1	B/D
<i>gemcitabine hcl</i> SOLR 1gm, 2gm, 200mg	1	B/D
GEMCITABINE HYDROCHLORIDE SOLN 1gm/10ml, 2gm/20ml, 200mg/2ml	3	B/D
INQOVI TAB 35-100MG QL (5 tabs / 28 days)	3	NDS QL NM PA
LONSURF TAB 15-6.14 QL (100 tabs / 28 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Tier	Limits
LONSURF TAB 20-8.19 QL (80 tabs / 28 days)	3	NDS QL NM PA
<i>mercaptopurine</i> (generic of PURIXAN) SUSP 2000mg/100ml	3	NDS NM
<i>mercaptopurine</i> TABS 50mg	1	
<i>methotrexate sodium</i> SOLN 1gm/40ml, 50mg/2ml, 250mg/10ml; SOLR 1gm	1	B/D
ONUREG TABS 200mg, 300mg QL (14 tabs / 28 days)	3	NDS QL NM PA
PEMETREXED SOLN 1gm/40ml, 100mg/4ml, 500mg/20ml	3	NDS B/D
<i>pemetrexed disodium</i> (generic of ALIMTA) SOLR 100mg, 500mg	3	NDS B/D
<i>pemetrexed disodium</i> SOLR 750mg, 1000mg	3	NDS B/D
PEMRYDI RTU SOLN 100mg/10ml, 500mg/50ml	3	NDS B/D
TABLOID TABS 40mg	3	NDS PA
HORMONAL ANTINEOPLASTIC AGENTS		
<i>abiraterone acetate</i> (generic of ZYTIGA) TABS 250mg QL (120 tabs / 30 days)	3	NDS QL NM PA
<i>abiraterone acetate</i> (generic of ZYTIGA) TABS 500mg QL (60 tabs / 30 days)	3	NDS QL NM PA
<i>abirtega</i> (generic of ZYTIGA) TABS 250mg QL (120 tabs / 30 days)	1	QL NM PA
AKEEGA TAB 50/500MG QL (60 tabs / 30 days)	3	NDS QL NM PA
AKEEGA TAB 100/500 QL (60 tabs / 30 days)	3	NDS QL NM PA
<i>anastrozole</i> (generic of ARIMIDEX) TABS 1mg	1	
<i>bicalutamide</i> (generic of CASODEX) TABS 50mg	1	
CAMCEVI PRSY 42mg	3	NM PA
ELIGARD KIT 7.5mg, 22.5mg, 30mg, 45mg	2	NM PA
ERLEADA TABS 60mg QL (120 tabs / 30 days)	3	NDS QL NM PA
ERLEADA TABS 240mg QL (30 tabs / 30 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
EULEXIN CAPS 125mg	3	NDS
<i>exemestane</i> (generic of AROMASIN) TABS 25mg	1	
FIRMAGON SOLR 80mg	3	NM PA
FIRMAGON SOLR 120mg/vial	3	NDS NM PA
<i>fulvestrant</i> (generic of FASLODEX) SOSY 250mg/5ml	3	NDS B/D
INLURIYO TABS 200mg QL (56 tabs / 28 days)	3	NDS QL NM PA
<i>letrozole</i> (generic of FEMARA) TABS 2.5mg	1	
<i>leuprolide acetate</i> KIT 1mg/0.2ml	1	NM PA
<i>leuprolide acetate</i> (3 month) INJ 22.5mg	1	NM PA
LUPRON DEPOT (1-MONTH) KIT 3.75mg, 7.5mg	3	NDS NM PA
LUPRON DEPOT (3-MONTH) KIT 11.25mg, 22.5mg	3	NDS NM PA
LUPRON DEPOT (4-MONTH) KIT 30mg	3	NDS NM PA
LUPRON DEPOT (6-MONTH) KIT 45mg	3	NDS NM PA
LUTRATE DEPOT INJ 22.5mg	3	NM PA
LYSODREN TABS 500mg	3	NDS NM
<i>megestrol acetate</i> TABS 20mg, 40mg	2	
<i>nilutamide</i> TABS 150mg	3	NDS
NUBEQA TABS 300mg QL (120 tabs / 30 days)	3	NDS QL NM PA
ORGOVYX TABS 120mg	3	NDS NM PA
ORSERDU TABS 86mg QL (90 tabs / 30 days)	3	NDS QL NM PA
ORSERDU TABS 345mg QL (30 tabs / 30 days)	3	NDS QL NM PA
SOLTAMOX SOLN 10mg/5ml	3	NDS
<i>tamoxifen citrate</i> TABS 10mg, 20mg	1	
<i>toremifene citrate</i> (generic of FARESTON) TABS 60mg	1	PA
TRELSTAR MIXJECT 3.75mg, 11.25mg, 22.5mg	2	NM PA
VABRINTY KIT 22.5mg, 30mg, 45mg	3	NDS NM PA

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
XTANDI CAPS 40mg QL (120 caps / 30 days)	3	NDS QL NM PA
XTANDI TABS 40mg QL (120 tabs / 30 days)	3	NDS QL NM PA
XTANDI TABS 80mg QL (60 tabs / 30 days)	3	NDS QL NM PA
YONSA TABS 125mg QL (120 tabs / 30 days)	3	NDS QL NM PA
ZOLADEX IMPL 3.6mg, 10.8mg	3	NM PA
IMMUNOMODULATORS		
<i>lenalidomide</i> CAPS 2.5mg, 5mg, 10mg, 15mg QL (28 caps / 28 days)	3	NDS QL NM PA
<i>lenalidomide</i> CAPS 20mg, 25mg QL (21 caps / 28 days)	3	NDS QL NM PA
POMALYST CAPS 1mg, 2mg, 3mg, 4mg QL (21 caps / 28 days)	3	NDS QL NM PA
REVLIMID CAPS 2.5mg, 5mg, 10mg, 15mg QL (28 caps / 28 days)	3	NDS QL NM PA
REVLIMID CAPS 20mg, 25mg QL (21 caps / 28 days)	3	NDS QL NM PA
THALOMID CAPS 50mg QL (84 caps / 28 days)	3	NDS QL NM PA
THALOMID CAPS 100mg QL (112 caps / 28 days)	3	NDS QL NM PA
MISCELLANEOUS		
ASPARLAS SOLN 3750unit/5ml	3	NDS NM PA
BESREMI SOSY 500mcg/ml QL (2 syringes / 28 days)	3	NDS QL NM PA
<i>bexarotene</i> (generic of TARGRETIN) CAPS 75mg QL (300 caps / 30 days)	3	NDS QL NM PA
<i>bleomycin sulfate</i> SOLR 15unit, 30unit	1	B/D
<i>dacarbazine</i> SOLR 100mg	1	B/D
<i>dexrazoxane hcl</i> SOLR 250mg, 500mg	3	NDS B/D
<i>doxorubicin hcl</i> (generic of DOXORUBICIN HYDROCHLORIDE) SOLN 2mg/ml	1	B/D

Drug Name	Drug Requirements/ Tier	Limits
<i>doxorubicin hcl liposomal</i> (generic of DOXIL) SUSP 2mg/ml	3	NDS B/D
ELITEK SOLR 1.5mg, 7.5mg	3	NDS B/D
ELLECE SOLN 50mg/25ml, 200mg/100ml	3	B/D
<i>hydroxyurea</i> (generic of HYDREA) CAPS 500mg	1	
<i>irinotecan hcl</i> (generic of CAMPTOSAR) SOLN 40mg/2ml, 100mg/5ml, 300mg/15ml	1	B/D
<i>irinotecan hcl</i> SOLN 500mg/25ml	1	B/D
IWILFIN TABS 192mg QL (240 tabs / 30 days)	3	NDS QL NM PA
KHAPZORY SOLR 175mg	3	NDS B/D NM
<i>leucovorin calcium</i> SOLN 500mg/50ml; SOLR 50mg, 100mg, 200mg, 350mg, 500mg	1	B/D
<i>leucovorin calcium</i> TABS 5mg, 10mg, 15mg, 25mg	1	
<i>levoleucovorin calcium</i> SOLN 175mg/17.5ml, 250mg/25ml; SOLR 50mg	1	B/D NM
MATULANE CAPS 50mg	3	NDS NM
<i>mesna</i> (generic of MESNEX) TABS 400mg	3	NDS
<i>mitomycin</i> SOLR 5mg	1	B/D
<i>mitomycin</i> SOLR 20mg, 40mg	3	NDS B/D
<i>mitoxantrone hcl</i> CONC 2mg/ml	1	B/D NM
MODEYSO CAPS 125mg QL (20 caps / 28 days)	3	NDS QL NM PA
NIPENT SOLR 10mg	3	NDS B/D
ONCASPAR SOLN 750unit/ml	3	NDS NM PA
ONIVYDE SUSP 43mg/10ml	3	NDS B/D NM
RYLAZE SOLN 10mg/0.5ml	3	NDS NM PA
<i>topotecan hcl</i> (generic of TOPOTECAN HCL) SOLN 4mg/4ml	1	B/D
<i>topotecan hcl</i> (generic of HYCAMTIN) SOLR 4mg	3	NDS B/D
<i>tretinoin (chemotherapy)</i> CAPS 10mg	3	NDS

Drug Name	Drug Requirements/ Tier	Limits
<i>valrubicin</i> (generic of VALSTAR) SOLN 40mg/ml	3	NDS B/D NM
WELIREG TABS 40mg QL (90 tabs / 30 days)	3	NDS QL NM PA
MITOTIC INHIBITORS		
BEIZRAY INJ 80MG/4ML	3	NDS B/D NM
BEIZRAY INJ 160/8ML	3	NDS B/D NM
DOCETAXEL CONC 20mg/ml	3	B/D
<i>docetaxel</i> (generic of DOCETAXEL) CONC 20mg/ml	1	B/D
DOCETAXEL CONC 80mg/4ml, 160mg/8ml; SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	3	NDS B/D
<i>docetaxel</i> (generic of DOCETAXEL) CONC 80mg/4ml, 160mg/8ml; SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	3	NDS B/D
DOCIVYX SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	3	NDS B/D NM
<i>eribulin mesylate</i> (generic of HALAVEN) SOLN 1mg/2ml	3	NDS B/D NM
ETOPOPHOS SOLR 100mg	3	B/D
<i>etoposide</i> SOLN 1gm/50ml, 100mg/5ml, 500mg/25ml	1	B/D
IXEMPRA KIT SOLR 15mg, 45mg	3	NDS B/D NM
JEVTANA SOLN 60mg/1.5ml	3	NDS NM PA
<i>paclitaxel</i> CONC 6mg/ml, 30mg/5ml, 150mg/25ml, 300mg/50ml	1	B/D
<i>paclitaxel inj 100mg</i> (generic of ABRAXANE)	3	NDS B/D NM
<i>vinblastine sulfate</i> SOLN 1mg/ml	1	B/D
<i>vincristine sulfate</i> SOLN 1mg/ml	1	B/D
<i>vinorelbine tartrate</i> SOLN 10mg/ml, 50mg/5ml	1	B/D
MOLECULAR TARGET AGENTS		
ALECENSA CAPS 150mg QL (240 caps / 30 days)	3	NDS QL NM PA
ALUNBRIG TABS 30mg QL (120 tabs / 30 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Tier	Limits
ALUNBRIG TABS 90mg, 180mg QL (30 tabs / 30 days)	3	NDS QL NM PA
ALUNBRIG PAK QL (30 tabs / 30 days)	3	NDS QL NM PA
AUGTYRO CAPS 40mg QL (240 caps / 30 days)	3	NDS QL NM PA
AUGTYRO CAPS 160mg QL (60 caps / 30 days)	3	NDS QL NM PA
AVMAPKI PAK FAKZYNJA QL (1 pack / 28 days)	3	NDS QL NM PA
AYVAKIT TABS 25mg, 50mg, 100mg, 200mg, 300mg QL (30 tabs / 30 days)	3	NDS QL NM PA
BALVERSA TABS 3mg QL (84 tabs / 28 days)	3	NDS QL NM PA
BALVERSA TABS 4mg QL (56 tabs / 28 days)	3	NDS QL NM PA
BALVERSA TABS 5mg QL (28 tabs / 28 days)	3	NDS QL NM PA
BAVENCIO SOLN 200mg/10ml	3	NDS NM PA
BELEODAQ SOLR 500mg	3	NDS NM PA
BESPONSA SOLR .9mg	3	NDS NM PA
BLENREP SOLR 70mg	3	NDS NM PA
BORTEZOMIB SOLR 1mg, 2.5mg <i>bortezomib</i> (generic of VELCADE) SOLR 3.5mg	3	NM PA NDS NM PA
BORUZU SOLN 3.5mg/1.4ml	3	NDS NM PA
BOSULIF CAPS 50mg QL (30 caps / 30 days)	3	NDS QL NM PA
BOSULIF CAPS 100mg QL (300 caps / 30 days)	3	NDS QL NM PA
BOSULIF TABS 100mg QL (180 tabs / 30 days)	3	NDS QL NM PA
BOSULIF TABS 400mg, 500mg QL (30 tabs / 30 days)	3	NDS QL NM PA
BRAFTOVI CAPS 75mg QL (180 caps / 30 days)	3	NDS QL NM PA
BRUKINSA CAPS 80mg QL (120 caps / 30 days)	3	NDS QL NM PA
BRUKINSA TABS 160mg QL (60 tabs / 30 days)	3	NDS QL NM PA
CABOMETYX TABS 20mg, 40mg, 60mg QL (30 tabs / 30 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Tier	Limits
CALQUENCE TABS 100mg QL (60 tabs / 30 days)	3	NDS QL NM PA
CAPRELSA TABS 100mg QL (60 tabs / 30 days)	3	NDS QL NM PA
CAPRELSA TABS 300mg QL (30 tabs / 30 days)	3	NDS QL NM PA
COLUMVI SOLN 2.5mg/2.5ml, 10mg/10ml	3	NDS NM PA
COMETRIQ (60MG DOSE) KIT 20mg QL (84 caps / 28 days)	3	NDS QL NM PA
COMETRIQ KIT 100MG QL (56 caps / 28 days)	3	NDS QL NM PA
COMETRIQ KIT 140MG QL (112 caps / 28 days)	3	NDS QL NM PA
COPIKTRA CAPS 15mg, 25mg QL (56 caps / 28 days)	3	NDS QL NM PA
COTELLIC TABS 20mg QL (63 tabs / 28 days)	3	NDS QL NM PA
CYRAMZA SOLN 100mg/10ml, 500mg/50ml	3	NDS NM PA
DANZITEN TABS 71mg, 95mg QL (112 tabs / 28 days)	3	NDS QL NM PA
DARZALEX SOLN 100mg/5ml, 400mg/20ml	3	NDS NM PA
DARZALEX INJ FASPRO <i>dasatinib</i> (generic of SPRYCEL) TABS 20mg QL (90 tabs / 30 days)	3	NDS NM PA NDS QL NM PA
<i>dasatinib</i> (generic of SPRYCEL) TABS 50mg, 70mg, 80mg, 100mg, 140mg QL (30 tabs / 30 days)	3	NDS QL NM PA
DATROWAY SOLR 100mg	3	NDS NM PA
DAURISMO TABS 25mg QL (60 tabs / 30 days)	3	NDS QL NM PA
DAURISMO TABS 100mg QL (30 tabs / 30 days)	3	NDS QL NM PA
ELAHERE SOLN 100mg/20ml	3	NDS NM PA
EMPLICITI SOLR 300mg, 400mg	3	NDS NM PA
EMRELIS SOLR 20mg, 100mg	3	NDS NM PA
ENHERTU SOLR 100mg	3	NDS NM PA

Drug Name	Drug Requirements/ Tier	Limits
ENSACOVE CAPS 25mg QL (270 caps / 30 days)	3	NDS QL NM PA
ENSACOVE CAPS 100mg QL (60 caps / 30 days)	3	NDS QL NM PA
EPKINLY SOLN 4mg/0.8ml, 48mg/0.8ml	3	NDS NM PA
ERBITUX SOLN 100mg/50ml, 200mg/100ml	3	NDS B/D NM
ERIVEDGE CAPS 150mg QL (30 caps / 30 days)	3	NDS QL NM PA
<i>erlotinib hcl</i> TABS 25mg QL (90 tabs / 30 days)	3	NDS QL NM PA
<i>erlotinib hcl</i> TABS 100mg, 150mg QL (30 tabs / 30 days)	3	NDS QL NM PA
<i>everolimus</i> (generic of AFINITOR) TABS 2.5mg, 5mg, 7.5mg, 10mg QL (30 tabs / 30 days)	3	NDS QL NM PA
<i>everolimus</i> (generic of AFINITOR DISPERZ) TBSO 2mg, 5mg QL (60 tabs / 30 days)	3	NDS QL NM PA
<i>everolimus</i> (generic of AFINITOR DISPERZ) TBSO 3mg QL (90 tabs / 30 days)	3	NDS QL NM PA
FOTIVDA CAPS .89mg, 1.34mg QL (21 caps / 28 days)	3	NDS QL NM PA
FRUZAQLA CAPS 1mg QL (84 caps / 28 days)	3	NDS QL NM PA
FRUZAQLA CAPS 5mg QL (21 caps / 28 days)	3	NDS QL NM PA
FYARRO SUSR 100mg	3	NDS NM PA
GAVRETO CAPS 100mg QL (120 caps / 30 days)	3	NDS QL NM PA
GAZYVA SOLN 1000mg/40ml	3	NDS NM PA
<i>gefitinib</i> (generic of IRESSA) TABS 250mg QL (60 tabs / 30 days)	3	NDS QL NM PA
GILOTRIF TABS 20mg, 30mg, 40mg QL (30 tabs / 30 days)	3	NDS QL NM PA
GOMEKLI CAPS 1mg QL (168 caps / 28 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Tier	Limits
GOMEKLI CAPS 2mg QL (84 caps / 28 days)	3	NDS QL NM PA
GOMEKLI TBSO 1mg QL (168 tabs / 28 days)	3	NDS QL NM PA
HERCEP HYLEC SOL 60- 10000	3	NDS NM PA
HERCEPTIN SOLR 150mg	3	NDS NM PA
HERCESSI SOLR 150mg, 420mg	3	NDS NM PA
HERNEXEOS TABS 60mg QL (120 tabs / 30 days)	3	NDS QL NM PA
HERZUMA SOLR 150mg, 420mg	3	NDS NM PA
IBRANCE CAPS 75mg, 100mg, 125mg QL (21 caps / 28 days)	3	NDS QL NM PA
IBRANCE TABS 75mg, 100mg, 125mg QL (21 tabs / 28 days)	3	NDS QL NM PA
IBTROZI CAPS 200mg QL (90 caps / 30 days)	3	NDS QL NM PA
ICLUSIG TABS 10mg, 15mg, 30mg, 45mg QL (30 tabs / 30 days)	3	NDS QL NM PA
IDHIFA TABS 50mg, 100mg QL (30 tabs / 30 days)	3	NDS QL NM PA
<i>imatinib mesylate</i> (generic of GLEEVEC) TABS 100mg QL (90 tabs / 30 days)	1	QL NM PA
<i>imatinib mesylate</i> (generic of GLEEVEC) TABS 400mg QL (60 tabs / 30 days)	3	NDS QL NM PA
IMBRUVICA CAPS 70mg QL (30 caps / 30 days)	3	NDS QL NM PA
IMBRUVICA CAPS 140mg QL (120 caps / 30 days)	3	NDS QL NM PA
IMBRUVICA SUSP 70mg/ml QL (216 mL / 27 days)	3	NDS QL NM PA
IMBRUVICA TABS 140mg, 280mg, 420mg QL (30 tabs / 30 days)	3	NDS QL NM PA
IMDELLTRA SOLR 1mg, 10mg	3	NDS NM PA
IMFINZI SOLN 120mg/2.4ml, 500mg/10ml	3	NDS NM PA
IMJUDO SOLN 25mg/1.25ml, 300mg/15ml	3	NDS NM PA

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
IMKELDI SOLN 80mg/ml QL (280 mL / 28 days)	3	NDS QL NM PA	KOMZIFTI CAPS 200mg QL (90 caps / 30 days)	3	NDS QL NM PA
INLYTA TABS 1mg QL (180 tabs / 30 days)	3	NDS QL NM PA	KOSELUGO CAPS 10mg QL (240 caps / 30 days)	3	NDS QL NM PA
INLYTA TABS 5mg QL (120 tabs / 30 days)	3	NDS QL NM PA	KOSELUGO CAPS 25mg QL (120 caps / 30 days)	3	NDS QL NM PA
INREBIC CAPS 100mg QL (120 caps / 30 days)	3	NDS QL NM PA	KOSELUGO CPSP 5mg QL (600 caps / 30 days)	3	NDS QL NM PA
ITOVEBI TABS 3mg QL (56 tabs / 28 days)	3	NDS QL NM PA	KOSELUGO CPSP 7.5mg QL (360 caps / 30 days)	3	NDS QL NM PA
ITOVEBI TABS 9mg QL (28 tabs / 28 days)	3	NDS QL NM PA	KRAZATI TABS 200mg QL (180 tabs / 30 days)	3	NDS QL NM PA
JAKAFI TABS 5mg, 10mg, 15mg, 20mg, 25mg QL (60 tabs / 30 days)	3	NDS QL NM PA	KYPROLIS SOLR 10mg, 30mg, 60mg <i>lapatinib ditosylate</i> (generic of TYKERB) TABS 250mg QL (180 tabs / 30 days)	3	NDS NM PA NDS QL NM PA
JAYPIRCA TABS 50mg QL (30 tabs / 30 days)	3	NDS QL NM PA	LAZCLUZE TABS 80mg QL (60 tabs / 30 days)	3	NDS QL NM PA
JAYPIRCA TABS 100mg QL (60 tabs / 30 days)	3	NDS QL NM PA	LAZCLUZE TABS 240mg QL (30 tabs / 30 days)	3	NDS QL NM PA
JEMPERLI SOLN 500mg/10ml	3	NDS NM PA	LENVIMA 4 MG DAILY DOSE CPPK 4mg QL (30 caps / 30 days)	3	NDS QL NM PA
KADCYLA SOLR 100mg, 160mg	3	NDS B/D NM	LENVIMA 8 MG DAILY DOSE CPPK 4mg QL (60 caps / 30 days)	3	NDS QL NM PA
KANJINTI SOLR 150mg, 420mg	3	NDS NM PA	LENVIMA 10 MG DAILY DOSE CPPK 10mg QL (30 caps / 30 days)	3	NDS QL NM PA
KEYTRUDA SOLN 100mg/4ml	3	NDS NM PA	LENVIMA 12MG DAILY DOSE CPPK 4mg QL (90 caps / 30 days)	3	NDS QL NM PA
KEYTRUDA INJ QLEX 395- 4800 MG-UNIT/2.4ML QL (1 vial / 21 days)	3	NDS QL NM PA	LENVIMA 20 MG DAILY DOSE CPPK 10mg QL (60 caps / 30 days)	3	NDS QL NM PA
KEYTRUDA INJ QLEX 790- 9600 MG-UNIT/4.8ML QL (1 vial / 42 days)	3	NDS QL NM PA	LENVIMA CAP 14 MG QL (60 caps / 30 days)	3	NDS QL NM PA
KIMMTRAK SOLN 100mcg/0.5ml	3	NDS NM PA	LENVIMA CAP 18 MG QL (90 caps / 30 days)	3	NDS QL NM PA
KISQALI 200 DOSE TBPK 200mg QL (21 tabs / 28 days)	3	NDS QL NM PA	LENVIMA CAP 24 MG QL (90 caps / 30 days)	3	NDS QL NM PA
KISQALI 400 DOSE TBPK 200mg QL (42 tabs / 28 days)	3	NDS QL NM PA	LIBTAYO SOLN 350mg/7ml	3	NDS NM PA
KISQALI 400 PAK FEMARA QL (70 tabs / 28 days)	3	NDS QL NM PA	LOQTORZI SOLN 240mg/6ml	3	NDS NM PA
KISQALI 600 DOSE TBPK 200mg QL (63 tabs / 28 days)	3	NDS QL NM PA	LORBRENA TABS 25mg QL (90 tabs / 30 days)	3	NDS QL NM PA
KISQALI 600 PAK FEMARA QL (91 tabs / 28 days)	3	NDS QL NM PA			

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
LORBRENA TABS 100mg QL (30 tabs / 30 days)	3	NDS QL NM PA	<i>nilotinib hcl</i> (generic of TASIGNA) CAPS 150mg, 200mg QL (112 caps / 28 days)	3	NDS QL NM PA
LUMAKRAS TABS 120mg QL (240 tabs / 30 days)	3	NDS QL NM PA	NINLARO CAPS 2.3mg, 3mg, 4mg QL (3 caps / 28 days)	3	NDS QL NM PA
LUMAKRAS TABS 240mg QL (120 tabs / 30 days)	3	NDS QL NM PA	ODOMZO CAPS 200mg QL (30 caps / 30 days)	3	NDS QL NM PA
LUMAKRAS TABS 320mg QL (90 tabs / 30 days)	3	NDS QL NM PA	OGIVRI SOLR 150mg, 420mg	3	NDS NM PA
LUNSUMIO SOLN 1mg/ml, 30mg/30ml	3	NDS NM PA	OGSIVEO TABS 100mg, 150mg QL (56 tabs / 28 days)	3	NDS QL NM PA
LYNOZYFIC SOLN 5mg/2.5ml, 200mg/10ml	3	NDS NM PA	OJEMDA SUSR 25mg/ml QL (96 mL / 28 days)	3	NDS QL NM PA
LYNPARZA TABS 100mg, 150mg QL (120 tabs / 30 days)	3	NDS QL NM PA	OJEMDA TABS 100mg QL (24 tabs / 28 days)	3	NDS QL NM PA
LYTGOBI (12 MG DAILY DOSE) TBPK 4mg QL (84 tabs / 28 days)	3	NDS QL NM PA	OJJAARA TABS 100mg, 150mg, 200mg QL (30 tabs / 30 days)	3	NDS QL NM PA
LYTGOBI (16 MG DAILY DOSE) TBPK 4mg QL (112 tabs / 28 days)	3	NDS QL NM PA	ONTRUZANT SOLR 150mg, 420mg	3	NDS NM PA
LYTGOBI (20 MG DAILY DOSE) TBPK 4mg QL (140 tabs / 28 days)	3	NDS QL NM PA	OPDIVO SOLN 40mg/4ml, 100mg/10ml, 120mg/12ml, 240mg/24ml	3	NDS NM PA
MARGENZA SOLN 250mg/10ml	3	NDS NM PA	OPDIVO INJ QVANTIG	3	NDS NM PA
MEKINIST SOLR .05mg/ml QL (1260 mL / 30 days)	3	NDS QL NM PA	OPDUALAG SOL	3	NDS NM PA
MEKINIST TABS 2mg QL (30 tabs / 30 days)	3	NDS QL NM PA	PADCEV SOLR 20mg, 30mg	3	NDS NM PA
MEKINIST TABS .5mg QL (90 tabs / 30 days)	3	NDS QL NM PA	<i>pazopanib hcl</i> (generic of VOTRIENT) TABS 200mg QL (120 tabs / 30 days)	3	NDS QL NM PA
MEKTOVI TABS 15mg QL (180 tabs / 30 days)	3	NDS QL NM PA	<i>pazopanib hcl</i> TABS 400mg QL (60 tabs / 30 days)	3	NDS QL PA
MONJUVI SOLR 200mg	3	NDS NM PA	PEMAZYRE TABS 4.5mg, 9mg, 13.5mg QL (28 tabs / 28 days)	3	NDS QL NM PA
MYLOTARG SOLR 4.5mg	3	NDS NM PA	PERJETA SOLN 420mg/14ml	3	NDS NM PA
NERLYNX TABS 40mg QL (180 tabs / 30 days)	3	NDS QL NM PA	PHESGO SOL	3	NDS NM PA
NILOTINIB CAPS 50mg QL (120 caps / 30 days)	3	NDS QL NM PA	PIQRAY 200MG DAILY DOSE TBPK 200mg QL (28 tabs / 28 days)	3	NDS QL NM PA
NILOTINIB CAPS 150mg, 200mg QL (112 caps / 28 days)	3	NDS QL NM PA	PIQRAY 250MG TAB DOSE QL (56 tabs / 28 days)	3	NDS QL NM PA
<i>nilotinib hcl</i> (generic of TASIGNA) CAPS 50mg QL (120 caps / 30 days)	3	NDS QL NM PA	PIQRAY 300MG DAILY DOSE TBPK 150mg QL (56 tabs / 28 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Tier	Limits
POLIVY SOLR 30mg, 140mg	3	NDS NM PA
POTELIGEO SOLN 20mg/5ml	3	NDS NM PA
QINLOCK TABS 50mg QL (90 tabs / 30 days)	3	NDS QL NM PA
RETEVMO TABS 40mg QL (90 tabs / 30 days)	3	NDS QL NM PA
RETEVMO TABS 80mg QL (120 tabs / 30 days)	3	NDS QL NM PA
RETEVMO TABS 120mg, 160mg QL (60 tabs / 30 days)	3	NDS QL NM PA
REVUFORJ TABS 25mg QL (240 tabs / 30 days)	3	NDS QL NM PA
REVUFORJ TABS 110mg QL (120 tabs / 30 days)	3	NDS QL NM PA
REVUFORJ TABS 160mg QL (60 tabs / 30 days)	3	NDS QL NM PA
REZLIDHIA CAPS 150mg QL (60 caps / 30 days)	3	NDS QL NM PA
ROMVIMZA CAPS 14mg, 20mg, 30mg QL (8 caps / 28 days)	3	NDS QL NM PA
ROZLYTREK CAPS 100mg QL (180 caps / 30 days)	3	NDS QL NM PA
ROZLYTREK CAPS 200mg QL (90 caps / 30 days)	3	NDS QL NM PA
ROZLYTREK PACK 50mg QL (336 packets / 28 days)	3	NDS QL NM PA
RUBRACA TABS 200mg, 250mg, 300mg QL (120 tabs / 30 days)	3	NDS QL NM PA
RYBREVANT SOLN 350mg/7ml	3	NDS NM PA
RYBREVANT INJ FASPRO	3	NDS NM PA
RYDAPT CAPS 25mg QL (224 caps / 28 days)	3	NDS QL NM PA
SARCLISA SOLN 100mg/5ml, 500mg/25ml	3	NDS NM PA
SCEMBLIX TABS 20mg QL (60 tabs / 30 days)	3	NDS QL NM PA
SCEMBLIX TABS 40mg QL (300 tabs / 30 days)	3	NDS QL NM PA
SCEMBLIX TABS 100mg QL (120 tabs / 30 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Tier	Limits
<i>sorafenib tosylate</i> (generic of NEXAVAR) TABS 200mg QL (120 tabs / 30 days)	3	NDS QL NM PA
STIVARGA TABS 40mg QL (84 tabs / 28 days)	3	NDS QL NM PA
<i>sunitinib malate</i> (generic of SUTENT) CAPS 12.5mg, 25mg, 37.5mg, 50mg QL (30 caps / 30 days)	3	NDS QL NM PA
TABRECTA TABS 150mg, 200mg QL (112 tabs / 28 days)	3	NDS QL NM PA
TAFINLAR CAPS 50mg, 75mg QL (120 caps / 30 days)	3	NDS QL NM PA
TAFINLAR TBSO 10mg QL (840 tabs / 28 days)	3	NDS QL NM PA
TAGRISO TABS 40mg, 80mg QL (30 tabs / 30 days)	3	NDS QL NM PA
TALZENNA CAPS .1mg, .35mg, .5mg, .75mg, 1mg QL (30 caps / 30 days)	3	NDS QL NM PA
TALZENNA CAPS .25mg QL (90 caps / 30 days)	3	NDS QL NM PA
TAZVERIK TABS 200mg QL (240 tabs / 30 days)	3	NDS QL NM PA
TECENTRIQ SOLN 840mg/14ml, 1200mg/20ml	3	NDS NM PA
TECENTRIQ INJ HYBREZA QL (1 vial / 21 days)	3	NDS QL NM PA
TECVAYLI SOLN 30mg/3ml, 153mg/1.7ml	3	NDS NM PA
<i>temsirolimus</i> (generic of TORISEL) SOLN 25mg/ml	3	NDS B/D NM
TEPMETKO TABS 225mg QL (60 tabs / 30 days)	3	NDS QL NM PA
TEVIMBRA SOLN 100mg/10ml	3	NDS NM PA
TIBSOVO TABS 250mg QL (60 tabs / 30 days)	3	NDS QL NM PA
TIVDAK SOLR 40mg	3	NDS NM PA
<i>torpenz</i> (generic of AFINITOR) TABS 2.5mg, 5mg, 7.5mg, 10mg QL (30 tabs / 30 days)	3	NDS QL NM PA
TRAZIMERA SOLR 150mg, 420mg	3	NDS NM PA

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
TRODELVY SOLR 180mg	3	NDS NM PA	XALKORI CAPS 200mg,	3	NDS QL NM
TRUQAP TABS 160mg,	3	NDS QL NM	250mg; CPSP 20mg, 50mg		PA
200mg		PA	QL (120 caps / 30 days)		
QL (64 tabs / 28 days)			XALKORI CPSP 150mg	3	NDS QL NM
TRUQAP TBPK 160mg,	3	NDS QL NM	QL (180 caps / 30 days)		PA
200mg		PA	XOSPATA TABS 40mg	3	NDS QL NM
QL (4 packs / 28 days)			QL (90 tabs / 30 days)		PA
TRUXIMA SOLN	3	NDS NM PA	XPOVIO PAK (40 MG ONCE	3	NDS QL NM
100mg/10ml, 500mg/50ml			WEEKLY) TBPK 10mg		PA
TUKYSA TABS 50mg,	3	NDS QL NM	QL (16 tabs / 28 days)		
150mg		PA	XPOVIO PAK (40 MG ONCE	3	NDS QL NM
QL (120 tabs / 30 days)			WEEKLY) TBPK 40mg		PA
TURALIO CAPS 125mg	3	NDS QL NM	QL (4 tabs / 28 days)		
QL (120 caps / 30 days)		PA	XPOVIO PAK (40 MG TWICE	3	NDS QL NM
VANFLYTA TABS 17.7mg,	3	NDS QL NM	WEEKLY) TBPK 40mg		PA
26.5mg		PA	QL (8 tabs / 28 days)		
QL (56 tabs / 28 days)			XPOVIO PAK (60 MG ONCE	3	NDS QL NM
VECTIBIX SOLN 100mg/5ml,	3	NDS B/D NM	WEEKLY) TBPK 60mg		PA
400mg/20ml			QL (4 tabs / 28 days)		
VENCLEXTA TABS 10mg	2	QL NM PA	XPOVIO PAK (60 MG TWICE	3	NDS QL NM
QL (112 tabs / 28 days)			WEEKLY) TBPK 20mg		PA
VENCLEXTA TABS 50mg	3	NDS QL NM	QL (24 tabs / 28 days)		
QL (112 tabs / 28 days)		PA	XPOVIO PAK (80 MG ONCE	3	NDS QL NM
VENCLEXTA TABS 100mg	3	NDS QL NM	WEEKLY) TBPK 40mg		PA
QL (180 tabs / 30 days)		PA	QL (8 tabs / 28 days)		
VENCLEXTA TAB START PK	3	NDS QL NM	XPOVIO PAK (80 MG ONCE	3	NDS QL NM
QL (42 tabs / 28 days)		PA	WEEKLY) TBPK 80mg		PA
VERZENIO TABS 50mg,	3	NDS QL NM	QL (4 tabs / 28 days)		
100mg, 150mg, 200mg		PA	XPOVIO PAK (80 MG TWICE	3	NDS QL NM
QL (56 tabs / 28 days)			WEEKLY) TBPK 20mg		PA
VITRAKVI CAPS 25mg	3	NDS QL NM	QL (32 tabs / 28 days)		
QL (180 caps / 30 days)		PA	XPOVIO PAK (100 MG ONCE	3	NDS QL NM
VITRAKVI CAPS 100mg	3	NDS QL NM	WEEKLY) TBPK 50mg		PA
QL (60 caps / 30 days)		PA	QL (8 tabs / 28 days)		
VITRAKVI SOLN 20mg/ml	3	NDS QL NM	YERVOY SOLN 50mg/10ml,	3	NDS NM PA
QL (300 mL / 30 days)		PA	200mg/40ml		
VIZIMPRO TABS 15mg,	3	NDS QL NM	ZALTRAP SOLN 100mg/4ml,	3	NDS NM PA
30mg, 45mg		PA	200mg/8ml		
QL (30 tabs / 30 days)			ZEJULA TABS 100mg,	3	NDS QL NM
VONJO CAPS 100mg	3	NDS QL NM	200mg, 300mg		PA
QL (120 caps / 30 days)		PA	QL (30 tabs / 30 days)		
VORANIGO TABS 10mg	3	NDS QL NM	ZELBORAF TABS 240mg	3	NDS QL NM
QL (60 tabs / 30 days)		PA	QL (240 tabs / 30 days)		PA
VORANIGO TABS 40mg	3	NDS QL NM	ZIIHERA SOLR 300mg	3	NDS NM PA
QL (30 tabs / 30 days)		PA	ZIRABEV SOLN 100mg/4ml,	3	NDS NM PA
VYLOY SOLR 100mg,	3	NDS NM PA	400mg/16ml		
300mg			ZOLINZA CAPS 100mg	3	NDS QL NM
			QL (120 caps / 30 days)		PA

Drug Name	Drug Requirements/ Tier	Limits
ZYDELIG TABS 100mg, 150mg QL (60 tabs / 30 days)	3	NDS QL NM PA
ZYKADIA TABS 150mg QL (84 tabs / 28 days)	3	NDS QL NM PA
ZYNLONTA SOLR 10mg	3	NDS NM PA
ZYNYZ SOLN 500mg/20ml	3	NDS NM PA

CARDIOVASCULAR**ACE INHIBITOR COMBINATIONS**

<i>amlodipine besylate- benazepril hcl cap 2.5-10 mg</i> QL (30 caps / 30 days)	1	QL
<i>amlodipine besylate- benazepril hcl cap 5-10 mg</i> (generic of LOTREL) QL (30 caps / 30 days)	1	QL
<i>amlodipine besylate- benazepril hcl cap 5-20 mg</i> (generic of LOTREL) QL (30 caps / 30 days)	1	QL
<i>amlodipine besylate- benazepril hcl cap 5-40 mg</i> QL (30 caps / 30 days)	1	QL
<i>amlodipine besylate- benazepril hcl cap 10-20 mg</i> (generic of LOTREL) QL (30 caps / 30 days)	1	QL
<i>amlodipine besylate- benazepril hcl cap 10-40 mg</i> (generic of LOTREL) QL (30 caps / 30 days)	1	QL
<i>benazepril & hydrochlorothiazide tab 5- 6.25mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 10- 12.5 mg</i> (generic of LOTENSIN HCT)	1	
<i>benazepril & hydrochlorothiazide tab 20- 12.5 mg</i> (generic of LOTENSIN HCT)	1	
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i> (generic of LOTENSIN HCT)	1	

Drug Name	Drug Requirements/ Tier	Limits
<i>captopril & hydrochlorothiazide tab 25-15 mg</i>	1	
<i>captopril & hydrochlorothiazide tab 25-25 mg</i>	1	
<i>captopril & hydrochlorothiazide tab 50-15 mg</i>	1	
<i>captopril & hydrochlorothiazide tab 50-25 mg</i>	1	
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	1	
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i> (generic of VASERETIC)	1	
<i>fosinopril sodium & hydrochlorothiazide tab 10- 12.5 mg</i>	1	
<i>fosinopril sodium & hydrochlorothiazide tab 20- 12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i> (generic of ZESTORETIC)	1	
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i> (generic of ZESTORETIC)	1	
<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i> (generic of ZESTORETIC)	1	
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	1	
<i>trandolapril-verapamil hcl tab er 1-240 mg</i>	1	
<i>trandolapril-verapamil hcl tab er 2-180 mg</i>	1	
<i>trandolapril-verapamil hcl tab er 2-240 mg</i>	1	
<i>trandolapril-verapamil hcl tab er 4-240 mg</i>	1	

Drug Name	Drug Requirements/ Tier	Limits
ACE INHIBITORS		
<i>benazepril hcl</i> TABS 5mg	1	
<i>benazepril hcl</i> (generic of LOTENSIN) TABS 10mg, 20mg, 40mg	1	
<i>captopril</i> TABS 12.5mg, 25mg, 50mg, 100mg	1	
<i>enalapril maleate</i> (generic of EPANED) SOLN 1mg/ml	1	
<i>enalapril maleate</i> (generic of VASOTEC) TABS 2.5mg, 5mg, 10mg, 20mg	1	
<i>fosinopril sodium</i> TABS 10mg, 20mg, 40mg	1	
<i>lisinopril</i> (generic of ZESTRIL) TABS 2.5mg, 5mg, 10mg, 20mg, 30mg, 40mg	1	
<i>moexipril hcl</i> TABS 7.5mg, 15mg	1	
<i>perindopril erbumine</i> TABS 2mg, 4mg, 8mg	1	
QBRELIS SOLN 1mg/ml	3	NDS
<i>quinapril hcl</i> TABS 5mg, 10mg, 20mg, 40mg	1	
<i>ramipril</i> CAPS 1.25mg, 2.5mg, 5mg, 10mg	1	
<i>trandolapril</i> TABS 1mg, 2mg, 4mg	1	
ALDOSTERONE RECEPTOR ANTAGONISTS		
<i>eplerenone</i> TABS 25mg, 50mg	1	
KERENDIA TABS 10mg, 20mg, 40mg QL (30 tabs / 30 days)	2	QL
<i>spironolactone</i> (generic of CAROSPIR) SUSP 25mg/5ml	1	
<i>spironolactone</i> (generic of ALDACTONE) TABS 25mg, 50mg, 100mg	1	
ALPHA BLOCKERS		
<i>doxazosin mesylate</i> (generic of CARDURA) TABS 1mg, 2mg, 4mg, 8mg	1	
<i>prazosin hcl</i> CAPS 1mg, 2mg, 5mg	1	
<i>terazosin hcl</i> CAPS 1mg, 2mg, 5mg, 10mg	1	

Drug Name	Drug Requirements/ Tier	Limits
TEZRULY SOLN 1mg/ml QL (600 mL / 30 days)	3	QL ST
ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS		
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i> (generic of AMLODIPINE/OLMESARTAN MED) QL (30 tabs / 30 days)	1	QL
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i> (generic of AMLODIPINE/OLMESARTAN MED) QL (30 tabs / 30 days)	1	QL
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i> (generic of AMLODIPINE/OLMESARTAN MED) QL (30 tabs / 30 days)	1	QL
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i> (generic of AMLODIPINE/OLMESARTAN MED) QL (30 tabs / 30 days)	1	QL
<i>amlodipine besylate-valsartan tab 5-160 mg</i> (generic of EXFORGE) QL (30 tabs / 30 days)	1	QL
<i>amlodipine besylate-valsartan tab 5-320 mg</i> (generic of EXFORGE) QL (30 tabs / 30 days)	1	QL
<i>amlodipine besylate-valsartan tab 10-160 mg</i> (generic of EXFORGE) QL (30 tabs / 30 days)	1	QL
<i>amlodipine besylate-valsartan tab 10-320 mg</i> (generic of EXFORGE) QL (30 tabs / 30 days)	1	QL
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i> (generic of EXFORGE HCT) QL (30 tabs / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg (generic of EXFORGE HCT)</i> QL (30 tabs / 30 days)	1	QL	<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg (generic of AVALIDE)</i> QL (30 tabs / 30 days)	1	QL
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg (generic of EXFORGE HCT)</i> QL (30 tabs / 30 days)	1	QL	<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg (generic of HYZAAR)</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg (generic of EXFORGE HCT)</i> QL (30 tabs / 30 days)	1	QL	<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg (generic of HYZAAR)</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg (generic of EXFORGE HCT)</i> QL (30 tabs / 30 days)	1	QL	<i>losartan potassium & hydrochlorothiazide tab 100-25 mg (generic of HYZAAR)</i>	1	
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg (generic of ATACAND HCT)</i> QL (60 tabs / 30 days)	1	QL	<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg (generic of BENICAR HCT)</i> QL (30 tabs / 30 days)	1	QL
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg (generic of ATACAND HCT)</i> QL (30 tabs / 30 days)	1	QL	<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg (generic of BENICAR HCT)</i> QL (30 tabs / 30 days)	1	QL
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg (generic of ATACAND HCT)</i> QL (30 tabs / 30 days)	1	QL	<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg (generic of BENICAR HCT)</i> QL (30 tabs / 30 days)	1	QL
EDARBYCLOR TAB 40-12.5 QL (30 tabs / 30 days)	3	QL ST	<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg (generic of TRIBENZOR)</i> QL (30 tabs / 30 days)	1	QL
EDARBYCLOR TAB 40-25MG QL (30 tabs / 30 days)	3	QL ST	<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg (generic of TRIBENZOR)</i> QL (30 tabs / 30 days)	1	QL
ENTRESTO CAP 6-6MG QL (240 caps / 30 days)	2	QL	<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg (generic of TRIBENZOR)</i> QL (30 tabs / 30 days)	1	QL
ENTRESTO CAP 15-16MG QL (240 caps / 30 days)	2	QL	<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg (generic of TRIBENZOR)</i> QL (30 tabs / 30 days)	1	QL
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg (generic of AVALIDE)</i> QL (60 tabs / 30 days)	1	QL			

Drug Name	Drug Requirements/ Tier	Limits
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg (generic of TRIBENZOR)</i> QL (30 tabs / 30 days)	1	QL
<i>sacubitril-valsartan tab 24-26 mg (generic of ENTRESTO)</i> QL (60 tabs / 30 days)	1	QL
<i>sacubitril-valsartan tab 49-51 mg (generic of ENTRESTO)</i> QL (60 tabs / 30 days)	1	QL
<i>sacubitril-valsartan tab 97-103 mg (generic of ENTRESTO)</i> QL (60 tabs / 30 days)	1	QL
<i>telmisartan-amlodipine tab 40-5 mg</i> QL (30 tabs / 30 days)	1	QL
<i>telmisartan-amlodipine tab 40-10 mg</i> QL (30 tabs / 30 days)	1	QL
<i>telmisartan-amlodipine tab 80-5 mg</i> QL (30 tabs / 30 days)	1	QL
<i>telmisartan-amlodipine tab 80-10 mg</i> QL (30 tabs / 30 days)	1	QL
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg (generic of MICARDIS HCT)</i> QL (30 tabs / 30 days)	1	QL
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg (generic of MICARDIS HCT)</i> QL (60 tabs / 30 days)	1	QL
<i>telmisartan-hydrochlorothiazide tab 80-25 mg (generic of MICARDIS HCT)</i> QL (30 tabs / 30 days)	1	QL
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg (generic of DIOVAN HCT)</i> QL (30 tabs / 30 days)	1	QL
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg (generic of DIOVAN HCT)</i> QL (30 tabs / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits
<i>valsartan-hydrochlorothiazide tab 160-25 mg (generic of DIOVAN HCT)</i> QL (30 tabs / 30 days)	1	QL
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg (generic of DIOVAN HCT)</i> QL (30 tabs / 30 days)	1	QL
<i>valsartan-hydrochlorothiazide tab 320-25 mg (generic of DIOVAN HCT)</i> QL (30 tabs / 30 days)	1	QL
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
ARBLI SUSP 10mg/ml QL (330 mL / 30 days)	3	QL
<i>candesartan cilexetil (generic of ATACAND) TABS 4mg, 8mg, 16mg</i> QL (60 tabs / 30 days)	1	QL
<i>candesartan cilexetil (generic of ATACAND) TABS 32mg</i> QL (30 tabs / 30 days)	1	QL
EDARBI TABS 40mg, 80mg QL (30 tabs / 30 days)	3	QL ST
<i>irbesartan TABS 75mg</i> QL (30 tabs / 30 days)	1	QL
<i>irbesartan (generic of AVAPRO) TABS 150mg, 300mg</i> QL (30 tabs / 30 days)	1	QL
<i>losartan potassium (generic of COZAAR) TABS 25mg, 50mg, 100mg</i>	1	
<i>olmesartan medoxomil (generic of BENICAR) TABS 5mg</i> QL (60 tabs / 30 days)	1	QL
<i>olmesartan medoxomil (generic of BENICAR) TABS 20mg, 40mg</i> QL (30 tabs / 30 days)	1	QL
<i>telmisartan TABS 20mg</i> QL (30 tabs / 30 days)	1	QL
<i>telmisartan (generic of MICARDIS) TABS 40mg, 80mg</i> QL (30 tabs / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
<i>valsartan</i> (generic of DIOVAN) TABS 40mg, 80mg, 160mg QL (60 tabs / 30 days)	1	QL	<i>gemfibrozil</i> (generic of LOPID) TABS 600mg	1	
<i>valsartan</i> (generic of DIOVAN) TABS 320mg QL (30 tabs / 30 days)	1	QL	ANTILIPEMICS, HMG-CoA REDUCTASE INHIBITORS		
ANTIARRHYTHMICS			ATORVALIQ SUSP 20mg/5ml QL (600 mL / 30 days)	3	QL ST
<i>amiodarone hcl</i> SOLN 50mg/ml, 150mg/3ml, 900mg/18ml; TABS 100mg, 200mg, 400mg	1		<i>atorvastatin calcium</i> (generic of LIPITOR) TABS 10mg, 20mg, 40mg, 80mg QL (30 tabs / 30 days)	1	QL
<i>disopyramide phosphate</i> (generic of NORPACE) CAPS 100mg, 150mg	3		EZALLOR SPRINKLE CPSP 5mg, 10mg, 20mg, 40mg QL (30 caps / 30 days)	3	QL ST
<i>dofetilide</i> (generic of TIKOSYN) CAPS 125mcg, 250mcg, 500mcg	1	NM	FLOLIPID SUSP 20mg/5ml, 40mg/5ml QL (300 mL / 30 days)	3	QL ST
<i>flecainide acetate</i> TABS 50mg, 100mg, 150mg	1		<i>fluvastatin sodium</i> CAPS 20mg, 40mg QL (60 caps / 30 days)	1	QL ST
MULTAQ TABS 400mg QL (60 tabs / 30 days)	3	QL	<i>fluvastatin sodium</i> (generic of LESCOL XL) TB24 80mg QL (30 tabs / 30 days)	1	QL ST
NORPACE CR CP12 100mg, 150mg	3		<i>lovastatin</i> TABS 10mg, 20mg, 40mg QL (60 tabs / 30 days)	1	QL
<i>pacerone</i> TABS 100mg, 200mg, 400mg	1		<i>pitavastatin calcium</i> (generic of LIVALO) TABS 1mg, 2mg, 4mg QL (30 tabs / 30 days)	1	QL ST
<i>propafenone hcl</i> CP12 225mg, 325mg, 425mg; TABS 150mg, 225mg, 300mg	1		<i>pravastatin sodium</i> TABS 10mg, 20mg, 40mg, 80mg QL (30 tabs / 30 days)	1	QL
<i>quinidine sulfate</i> TABS 200mg, 300mg	1		<i>rosuvastatin calcium</i> (generic of CRESTOR) TABS 5mg, 10mg, 20mg, 40mg QL (30 tabs / 30 days)	1	QL
<i>sotalol hcl</i> (generic of BETAPACE) TABS 80mg, 120mg, 160mg	1		<i>simvastatin</i> TABS 5mg, 80mg QL (30 tabs / 30 days)	1	QL
<i>sotalol hcl</i> TABS 240mg	1		<i>simvastatin</i> (generic of ZOCOR) TABS 10mg, 20mg, 40mg QL (30 tabs / 30 days)	1	QL
<i>sotalol hcl (afib/af)</i> (generic of BETAPACE AF) TABS 80mg, 120mg, 160mg	1		ZYPITAMAG TABS 2mg, 4mg QL (30 tabs / 30 days)	3	QL ST
SOTYLIZE SOLN 5mg/ml	3				
ANTILIPEMICS, FIBRATES					
<i>choline fenofibrate</i> CPDR 45mg, 135mg	1				
<i>fenofibrate</i> TABS 48mg, 54mg, 160mg	1				
<i>fenofibrate</i> (generic of TRICOR) TABS 145mg	1				
<i>fenofibrate micronized</i> CAPS 43mg, 67mg, 134mg, 200mg	1				

Drug Name	Drug Requirements/ Tier	Limits
ANTILIPEMICS, MISCELLANEOUS		
<i>cholestyramine</i> (generic of QUESTRAN) PACK 4gm; POWD 4gm/dose	1	
<i>cholestyramine light</i> PACK 4gm	1	
<i>cholestyramine light</i> (generic of QUESTRAN LIGHT) POWD 4gm/dose	1	
<i>colesevelam hcl</i> (generic of WELCHOL) PACK 3.75gm; TABS 625mg	1	
<i>colestipol hcl</i> (generic of COLESTID) GRAN 5gm; TABS 1gm	1	
<i>colestipol hcl</i> PACK 5gm	1	
EVKEEZA SOLN 345mg/2.3ml, 1200mg/8ml	3	NDS NM PA
<i>ezetimibe</i> (generic of ZETIA) TABS 10mg QL (30 tabs / 30 days)	1	QL
<i>ezetimibe-simvastatin tab 10-10 mg</i> (generic of VYTORIN) QL (30 tabs / 30 days)	1	QL
<i>ezetimibe-simvastatin tab 10-20 mg</i> (generic of VYTORIN) QL (30 tabs / 30 days)	1	QL
<i>ezetimibe-simvastatin tab 10-40 mg</i> (generic of VYTORIN) QL (30 tabs / 30 days)	1	QL
<i>ezetimibe-simvastatin tab 10-80 mg</i> (generic of VYTORIN) QL (30 tabs / 30 days)	1	QL
JUXTAPID CAPS 5mg, 10mg, 20mg, 30mg	3	NDS NM PA
NEXLETOL TABS 180mg QL (30 tabs / 30 days)	2	QL
NEXLIZET TAB 180/10MG QL (30 tabs / 30 days)	2	QL
<i>niacin (antihyperlipidemic)</i> TBCR 500mg, 750mg, 1000mg QL (60 tabs / 30 days)	1	QL
<i>omega-3-acid ethyl esters cap 1 gm</i> (generic of LOVAZA)	1	PA
<i>prevalite</i> PACK 4gm	1	

Drug Name	Drug Requirements/ Tier	Limits
<i>prevalite</i> (generic of QUESTRAN LIGHT) POWD 4gm/dose	1	
REPATHA SOSY 140mg/ml QL (6 syringes / 28 days)	2	QL NM PA
REPATHA SURECLICK SOAJ 140mg/ml QL (6 autoinjectors / 28 days)	2	QL NM PA
VASCEPA CAPS .5gm, 1gm	2	
BETA-BLOCKER/DIURETIC COMBINATIONS		
<i>atenolol & chlorthalidone tab 50-25 mg</i> (generic of TENORETIC 50)	1	
<i>atenolol & chlorthalidone tab 100-25 mg</i> (generic of TENORETIC 100)	1	
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	1	
<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	1	
<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	1	
<i>metoprolol & hydrochlorothiazide tab 100-50 mg</i>	1	
BETA-BLOCKERS		
<i>acebutolol hcl</i> CAPS 200mg, 400mg	1	
<i>atenolol</i> (generic of TENORMIN) TABS 25mg, 50mg, 100mg	1	
<i>betaxolol hcl</i> TABS 10mg, 20mg	1	
<i>bisoprolol fumarate</i> TABS 2.5mg, 5mg, 10mg	1	

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
<i>carvedilol</i> (generic of COREG) TABS 3.125mg, 6.25mg, 12.5mg, 25mg	1		<i>cartia xt</i> (generic of CARDIZEM CD) CP24 120mg, 180mg, 240mg, 300mg	1	
<i>carvedilol phosphate</i> (generic of COREG CR) CP24 10mg, 20mg, 40mg, 80mg QL (30 caps / 30 days)	1	QL	<i>dilt-xr</i> CP24 120mg, 180mg, 240mg	1	
KAPSPARGO SPRINKLE CS24 25mg, 50mg, 100mg, 200mg	3		<i>diltiazem hcl</i> CP12 60mg, 90mg, 120mg; SOLN 25mg/5ml, 50mg/10ml, 125mg/25ml; TABS 90mg	1	
<i>labetalol hcl</i> SOLN 5mg/ml; TABS 100mg, 200mg, 300mg, 400mg	1		<i>diltiazem hcl</i> (generic of CARDIZEM) TABS 30mg, 60mg, 120mg	1	
LOPRESSOR SOLN 10mg/ml	3		<i>diltiazem hcl</i> (generic of CARDIZEM LA) TB24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	1	
<i>metoprolol succinate</i> (generic of TOPROL XL) TB24 25mg, 50mg, 100mg, 200mg	1		<i>diltiazem hcl coated beads</i> (generic of CARDIZEM CD) CP24 120mg, 180mg, 240mg, 300mg, 360mg	1	
<i>metoprolol tartrate</i> SOLN 5mg/5ml; TABS 25mg, 37.5mg, 75mg	1		<i>diltiazem hcl extended release beads</i> (generic of TIAZAC) CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	1	
<i>metoprolol tartrate</i> (generic of LOPRESSOR) TABS 50mg, 100mg	1		<i>felodipine</i> TB24 2.5mg, 5mg, 10mg	1	
<i>nadolol</i> TABS 20mg, 40mg, 80mg	1		<i>isradipine</i> CAPS 2.5mg, 5mg	1	
<i>nebivolol hcl</i> (generic of BYSTOLIC) TABS 2.5mg, 5mg, 10mg QL (30 tabs / 30 days)	1	QL	KATERZIA SUSP 1mg/ml	3	
<i>nebivolol hcl</i> (generic of BYSTOLIC) TABS 20mg QL (60 tabs / 30 days)	1	QL	<i>matzim la</i> (generic of CARDIZEM LA) TB24 180mg, 240mg, 300mg, 360mg, 420mg	1	
<i>pindolol</i> TABS 5mg, 10mg	1		<i>nicardipine hcl</i> CAPS 20mg, 30mg	1	
<i>propranolol hcl</i> (generic of INDERAL LA) CP24 60mg, 80mg, 120mg, 160mg	1		<i>nicardipine hcl iv soln 20 mg/200ml in sodium chloride 0.9%</i> (generic of NICARDIPINE HYDROCHLORIDE)	1	
<i>propranolol hcl</i> SOLN 1mg/ml, 20mg/5ml, 40mg/5ml; TABS 10mg, 20mg, 40mg, 60mg, 80mg	1		<i>nicardipine hcl iv soln 40 mg/200ml in sodium chloride 0.9%</i> (generic of NICARDIPINE HYDROCHLORIDE)	1	
<i>timolol maleate</i> TABS 5mg, 10mg, 20mg	1		NICARDIPINE SOL 20/200ML	3	
CALCIUM CHANNEL BLOCKERS			NICARDIPINE SOL 40/200ML	3	
<i>amlodipine besylate</i> (generic of NORVASC) TABS 2.5mg, 5mg, 10mg	1				

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
<i>nifedipine</i> (generic of PROCARDIA XL) TB24 30mg, 60mg	1		<i>furosemide inj</i> SOLN 10mg/ml	1	
<i>nifedipine</i> TB24 30mg, 60mg, 90mg	1		HEMICLOR TABS 12.5mg	3	
<i>nimodipine</i> CAPS 30mg	1		<i>hydrochlorothiazide</i> CAPS 12.5mg; TABS 12.5mg, 25mg, 50mg	1	
<i>nimodipine</i> SOLN 60mg/20ml	3	NDS	<i>indapamide</i> TABS 1.25mg, 2.5mg	1	
<i>nisoldipine</i> (generic of SULAR) TB24 8.5mg, 17mg, 34mg	1		INZIRQO SUSR 10mg/ml QL (320 mL / 30 days)	3	QL
<i>nisoldipine</i> TB24 20mg, 25.5mg, 30mg, 40mg	1		<i>methazolamide</i> TABS 25mg, 50mg	1	
NORLIQVA SOLN 1mg/ml	3		<i>metolazone</i> TABS 2.5mg, 5mg, 10mg	1	
NYMALIZE SOLN 6mg/ml	3	NDS	<i>ormarvi</i> (generic of KEVEYIS) TABS 50mg	3	NDS NM PA
<i>tiadylt er</i> (generic of TIAZAC) CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	1		SOANZ TABS 40mg	3	
<i>verapamil hcl</i> CP24 100mg, 120mg, 180mg, 200mg, 240mg, 300mg, 360mg; SOLN 2.5mg/ml; TABS 40mg, 80mg, 120mg; TBCR 120mg, 180mg, 240mg	1		<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	1	
DIURETICS			THALITONE TABS 15mg	3	
<i>acetazolamide</i> CP12 500mg; TABS 125mg, 250mg	1		<i>torseamide</i> TABS 5mg, 10mg, 20mg, 100mg	1	
<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	1		<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	1	
<i>amiloride hcl</i> TABS 5mg	1		<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	1	
<i>bumetanide</i> SOLN .25mg/ml; TABS 1mg, 2mg	1		<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	1	
<i>bumetanide</i> (generic of BUMEX) TABS .5mg	1		MISCELLANEOUS		
<i>chlorthalidone</i> TABS 25mg, 50mg	1		<i>aliskiren fumarate</i> (generic of TEKTURN) TABS 150mg, 300mg QL (30 tabs / 30 days)	1	QL
<i>dichlorphenamide</i> (generic of KEVEYIS) TABS 50mg	3	NDS NM PA	<i>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg</i>	1	
DIURIL SUSP 250mg/5ml	3		<i>amlodipine besylate-atorvastatin calcium tab 2.5-20 mg</i>	1	
ENBUMYST SOLN .5mg/0.1ml	3	NDS	<i>amlodipine besylate-atorvastatin calcium tab 2.5-40 mg</i>	1	
<i>ethacrynic acid</i> (generic of EDECRIN) TABS 25mg	1				
<i>furosemide</i> SOLN 10mg/ml, 40mg/5ml	1				
<i>furosemide</i> (generic of LASIX) TABS 20mg, 40mg, 80mg	1				

Drug Name	Drug Requirements/ Tier	Limits
<i>amlodipine besylate-atorvastatin calcium tab 5-10 mg</i> (generic of CADUET)	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-20 mg</i> (generic of CADUET)	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-40 mg</i> (generic of CADUET)	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-80 mg</i> (generic of CADUET)	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-10 mg</i> (generic of CADUET)	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-20 mg</i> (generic of CADUET)	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-40 mg</i> (generic of CADUET)	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-80 mg</i> (generic of CADUET)	1	
ATTRUBY TBPk 356mg QL (112 tabs / 28 days)	3	NDS QL NM PA
CAMZYOS CAPS 2.5mg, 5mg, 10mg, 15mg QL (30 caps / 30 days)	3	NDS QL NM PA
<i>clonidine</i> (generic of CATAPRES-TTS-1) PTWK .1mg/24hr	1	
<i>clonidine</i> (generic of CATAPRES-TTS-2) PTWK .2mg/24hr	1	
<i>clonidine</i> (generic of CATAPRES-TTS-3) PTWK .3mg/24hr	1	
<i>clonidine</i> TB24 .17mg	1	
<i>clonidine hcl</i> TABS .1mg, .2mg, .3mg	1	
CORLANOR SOLN 5mg/5ml QL (450 mL / 30 days)	2	QL
<i>digoxin</i> SOLN .05mg/ml	1	
<i>digoxin</i> (generic of LANOXIN) SOLN .25mg/ml; TABS 62.5mcg	1	

Drug Name	Drug Requirements/ Tier	Limits
<i>digoxin</i> (generic of LANOXIN) TABS 125mcg, 250mcg QL (30 tabs / 30 days)	1	QL
<i>droxidopa</i> (generic of NORTHERA) CAPS 100mg QL (90 caps / 30 days)	1	QL NM PA
<i>droxidopa</i> (generic of NORTHERA) CAPS 200mg, 300mg QL (180 caps / 30 days)	3	NDS QL NM PA
<i>epinephrine (anaphylaxis)</i> (generic of ADRENALIN) SOLN 1mg/ml	1	
<i>guanfacine hcl</i> TABS 1mg, 2mg PA applies if 65 years and older	2	PA
<i>hydralazine hcl</i> SOLN 20mg/ml; TABS 10mg, 25mg, 50mg, 100mg	1	
INPEFA TABS 200mg, 400mg QL (30 tabs / 30 days)	3	QL
<i>isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg</i> (generic of BIDIL)	1	
<i>ivabradine hcl</i> (generic of CORLANOR) TABS 5mg, 7.5mg QL (60 tabs / 30 days)	1	QL
JAVADIN SOLN .02mg/ml	3	
LANOXIN PEDIATRIC SOLN .1mg/ml	3	
LODOCO TABS .5mg QL (30 tabs / 30 days)	3	QL PA
<i>methylidopa</i> TABS 250mg, 500mg PA applies if 65 years and older	3	PA
<i>metirosine</i> CAPS 250mg	3	NDS NM PA
<i>midodrine hcl</i> TABS 2.5mg, 5mg, 10mg	1	
<i>minoxidil</i> TABS 2.5mg, 10mg	1	
<i>phenoxybenzamine hcl</i> CAPS 10mg	3	NDS PA
<i>ranolazine</i> TB12 500mg, 1000mg	1	

Drug Name	Drug Requirements/ Tier	Limits
TRYNGOLZA SOAJ 80mg/0.8ml QL (1 autoinjector / 30 days)	3	NDS QL NM PA
TRYVIO TABS 12.5mg QL (30 tabs / 30 days)	3	QL PA
VERQUVO TABS 2.5mg, 5mg, 10mg QL (30 tabs / 30 days)	2	QL PA
VYNDAMAX CAPS 61mg QL (30 caps / 30 days)	3	NDS QL NM PA
VYNDAQEL CAPS 20mg QL (120 caps / 30 days)	3	NDS QL NM PA
NITRATES		
<i>isosorbide dinitrate</i> TABS 5mg, 10mg, 20mg, 30mg	1	
ISOSORBIDE MONONITRATE TABS 10mg, 20mg	3	
<i>isosorbide mononitrate</i> TB24 30mg, 60mg, 120mg	1	
NITRO-BID OINT 2%	2	
NITRO-DUR PT24 .3mg/hr, .8mg/hr	3	NDS
<i>nitroglycerin</i> PT24 .1mg/hr, .2mg/hr, .4mg/hr, .6mg/hr	1	
<i>nitroglycerin</i> (generic of NITROLINGUAL) SOLN .4mg/spray	1	
<i>nitroglycerin</i> (generic of NITROSTAT) SUBL .3mg, .4mg, .6mg	1	
PULMONARY ARTERIAL HYPERTENSION		
ADEMPAS TABS .5mg, 1mg, 1.5mg, 2mg, 2.5mg QL (90 tabs / 30 days)	3	NDS QL NM PA
<i>alyq</i> (generic of ADCIRCA) TABS 20mg QL (60 tabs / 30 days)	3	NDS QL NM PA
<i>ambrisentan</i> (generic of LETAIRIS) TABS 5mg, 10mg QL (30 tabs / 30 days)	3	NDS QL NM PA
<i>bosentan</i> (generic of TRACLEER) TABS 62.5mg, 125mg QL (60 tabs / 30 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Tier	Limits
<i>bosentan</i> (generic of TRACLEER) TBSO 32mg QL (120 tabs / 30 days)	3	NDS QL NM PA
<i>epoprostenol sodium</i> (generic of VELETRI) SOLR .5mg, 1.5mg	3	NDS B/D NM
OPSUMIT TABS 10mg QL (30 tabs / 30 days)	3	NDS QL NM PA
ORENITRAM TBCR .25mg, 1mg, 2.5mg, 5mg	3	NDS NM PA
ORENITRAM TBCR .125mg	3	NM PA
ORENITRAM TAB MONTH 1	3	NDS NM PA
ORENITRAM TAB MONTH 2	3	NDS NM PA
ORENITRAM TAB MONTH 3	3	NDS NM PA
REMODULIN SOLN 8mg/20ml, 20mg/20ml, 50mg/20ml, 100mg/20ml, 200mg/20ml	3	NDS NM PA
<i>sildenafil citrate</i> (pulmonary hypertension) (generic of REVATIO) SOLN 10mg/12.5ml	3	NDS NM PA
<i>sildenafil citrate</i> (pulmonary hypertension) SUSR 10mg/ml QL (784 mL / 30 days)	3	NDS QL NM PA
<i>sildenafil citrate</i> (pulmonary hypertension) (generic of REVATIO) TABS 20mg QL (360 tabs / 30 days)	1	QL NM PA
<i>tadalafil</i> (pulmonary hypertension) (generic of ADCIRCA) TABS 20mg QL (60 tabs / 30 days)	1	QL NM PA
TADLIQ SUSP 20mg/5ml QL (300 mL / 30 days)	3	NDS QL NM PA
TRACLEER TBSO 32mg QL (120 tabs / 30 days)	3	NDS QL NM PA
<i>treprostinil</i> SOLN 20mg/20ml, 50mg/20ml, 100mg/20ml, 200mg/20ml	3	NDS NM PA
TYVASO SOLN .6mg/ml	3	NDS NM PA
TYVASO DPI INSTITUTIONAL POWD 80mcg QL (112 cartridges / 28 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Tier	Limits
TYVASO DPI MAINTENANCE KI POWD 16mcg, 32mcg, 48mcg, 64mcg, 80mcg QL (112 cartridges / 28 days)	3	NDS QL NM PA
TYVASO DPI POW 16-32-48 QL (252 cartridges / 28 days)	3	NDS QL NM PA
TYVASO DPI POW MAIN KIT 32-64MCG QL (224 cartridges / 28 days)	3	NDS QL NM PA
TYVASO DPI POW MAIN KIT 48-64MCG QL (224 cartridges / 28 days)	3	NDS QL NM PA
UPTRAVI SOLR 1800mcg	3	NDS NM PA
UPTRAVI TABS 200mcg QL (140 tabs / 28 days)	3	NDS QL NM PA
UPTRAVI TABS 400mcg, 600mcg, 800mcg, 1000mcg, 1200mcg, 1400mcg, 1600mcg QL (60 tabs / 30 days)	3	NDS QL NM PA
UPTRAVI PACK TAB 200/800 QL (1 pack / 28 days)	3	NDS QL NM PA
WINREVAIR KIT 45mg, 60mg QL (2 vials / 21 days)	3	NDS QL NM PA
WINREVAIR INJ 45MG QL (2 vials / 21 days)	3	NDS QL NM PA
WINREVAIR INJ 60MG QL (2 vials / 21 days)	3	NDS QL NM PA
YUTREPIA CAPS 26.5mcg, 53mcg, 79.5mcg QL (140 caps / 28 days)	3	NDS QL NM PA
YUTREPIA CAPS 106mcg QL (224 caps / 28 days)	3	NDS QL NM PA
CENTRAL NERVOUS SYSTEM ANTI-ANXIETY		
<i>alprazolam</i> (generic of XANAX) TABS .25mg, .5mg, 1mg, 2mg QL (150 tabs / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits
<i>alprazolam</i> (generic of XANAX XR) TB24 2mg QL (90 tabs / 30 days) PA applies if 65 years and older	1	QL PA
<i>alprazolam</i> TB24 3mg QL (90 tabs / 30 days) PA applies if 65 years and older	1	QL PA
<i>alprazolam</i> TB24 .5mg, 1mg QL (150 tabs / 30 days) PA applies if 65 years and older	1	QL PA
<i>alprazolam</i> TBDP .5mg, 1mg, 2mg QL (150 tabs / 30 days)	1	QL
<i>alprazolam</i> TBDP .25mg QL (120 tabs / 30 days)	1	QL
ALPRAZOLAM INTENSOL CONC 1mg/ml QL (300 mL / 30 days)	3	QL
<i>buspirone hcl</i> TABS 5mg, 7.5mg, 10mg, 15mg, 30mg	1	
<i>chlordiazepoxide hcl</i> CAPS 5mg, 10mg, 25mg QL (120 caps / 30 days) PA applies if 65 years and older	1	QL PA
<i>fluvoxamine maleate</i> CP24 100mg, 150mg QL (60 caps / 30 days)	1	QL
<i>fluvoxamine maleate</i> TABS 25mg, 50mg, 100mg	1	
<i>lorazepam</i> CONC 2mg/ml QL (150 mL / 30 days)	1	QL
<i>lorazepam</i> (generic of ATIVAN) SOLN 4mg/ml, 20mg/10ml	1	
<i>lorazepam</i> (generic of ATIVAN) TABS .5mg, 1mg, 2mg QL (150 tabs / 30 days)	1	QL
<i>lorazepam intensol</i> CONC 2mg/ml QL (150 mL / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits
oxazepam CAPS 10mg, 15mg, 30mg QL (120 caps / 30 days) PA applies if 65 years and older	1	QL PA
ANTIDEMENTIA		
donepezil hydrochloride (generic of ARICEPT) TABS 5mg QL (30 tabs / 30 days)	1	QL
donepezil hydrochloride (generic of ARICEPT) TABS 10mg, 23mg	1	
donepezil hydrochloride TBDP 5mg QL (30 tabs / 30 days)	1	QL
donepezil hydrochloride TBDP 10mg	1	
galantamine hydrobromide CP24 8mg, 16mg, 24mg QL (30 caps / 30 days)	1	QL
galantamine hydrobromide SOLN 4mg/ml QL (200 mL / 30 days)	1	QL
galantamine hydrobromide TABS 4mg, 8mg, 12mg QL (60 tabs / 30 days)	1	QL
memantine hcl CP24 7mg, 14mg, 21mg, 28mg; SOLN 2mg/ml; TABS 5mg, 10mg PA applies if 29 years and younger	1	PA
memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack PA applies if 29 years and younger	1	PA
memantine hcl-donepezil hcl cap er 24hr 14-10 mg (generic of NAMZARIC)	1	
memantine hcl-donepezil hcl cap er 24hr 21-10 mg (generic of NAMZARIC)	1	
memantine hcl-donepezil hcl cap er 24hr 28-10 mg (generic of NAMZARIC)	1	
NAMZARIC CAP 7-10MG	3	

Drug Name	Drug Requirements/ Tier	Limits
rivastigmine (generic of EXELON) PT24 4.6mg/24hr, 9.5mg/24hr, 13.3mg/24hr QL (30 patches / 30 days)	1	QL
rivastigmine tartrate CAPS 1.5mg, 3mg, 4.5mg, 6mg QL (60 caps / 30 days)	1	QL
ZUNVEYL TBEC 5mg, 10mg, 15mg QL (60 tabs / 30 days)	3	QL PA
ANTIDEPRESSANTS		
amitriptyline hcl TABS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg PA applies if 65 years and older	2	PA
amoxapine TABS 25mg, 50mg, 100mg, 150mg PA applies if 65 years and older	2	PA
AUVELITY TAB 45-105MG QL (60 tabs / 30 days)	3	QL PA
bupropion hcl TABS 75mg, 100mg	1	
bupropion hcl (generic of WELLBUTRIN SR) TB12 100mg, 150mg, 200mg QL (60 tabs / 30 days)	1	QL
bupropion hcl (generic of WELLBUTRIN XL) TB24 150mg QL (60 tabs / 30 days)	1	QL
bupropion hcl (generic of WELLBUTRIN XL) TB24 300mg QL (30 tabs / 30 days)	1	QL
citalopram hydrobromide SOLN 10mg/5ml	1	
citalopram hydrobromide (generic of CELEXA) TABS 10mg, 20mg, 40mg	1	
clomipramine hcl (generic of ANAFRANIL) CAPS 25mg, 50mg, 75mg	3	PA

Drug Name	Drug Requirements/ Tier	Limits
<i>desipramine hcl</i> (generic of NORPRAMIN) TABS 10mg, 25mg PA applies if 65 years and older	3	PA
<i>desipramine hcl</i> TABS 50mg, 75mg, 100mg, 150mg PA applies if 65 years and older	3	PA
DESVENLAFAXINE ER TB24 50mg, 100mg QL (30 tabs / 30 days)	3	QL
<i>desvenlafaxine succinate</i> (generic of PRISTIQ) TB24 25mg, 50mg, 100mg QL (30 tabs / 30 days)	1	QL
<i>doxepin hcl</i> CAPS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg; CONC 10mg/ml PA applies if 65 years and older	2	PA
DRIZALMA SPRINKLE CSDR 20mg, 30mg, 40mg, 60mg QL (60 caps / 30 days)	3	QL PA
<i>duloxetine hcl</i> CPEP 20mg, 30mg, 40mg, 60mg QL (60 caps / 30 days)	1	QL
EMSAM PT24 6mg/24hr, 9mg/24hr, 12mg/24hr QL (30 patches / 30 days)	3	NDS QL PA
ESCITALOPRAM OXALATE CAPS 15mg QL (30 caps / 30 days)	3	QL
<i>escitalopram oxalate</i> SOLN 5mg/5ml	1	
<i>escitalopram oxalate</i> (generic of LEXAPRO) TABS 5mg, 10mg, 20mg	1	
EXXUA TB24 18.2mg, 36.3mg, 54.5mg, 72.6mg QL (30 tabs / 30 days)	3	NDS QL PA
EXXUA TITRATION PACK TB24 18.2mg QL (2 packs / year)	3	NDS QL PA
FETZIMA CP24 20mg, 40mg QL (60 caps / 30 days)	3	QL PA

Drug Name	Drug Requirements/ Tier	Limits
FETZIMA CP24 80mg, 120mg QL (30 caps / 30 days)	3	QL PA
FETZIMA CAP TITRATIO QL (2 packs / year)	3	QL PA
<i>fluoxetine hcl</i> CAPS 10mg, 20mg, 40mg; SOLN 20mg/5ml	1	
<i>fluoxetine hcl</i> CPDR 90mg QL (4 caps / 28 days)	1	QL
<i>imipramine hcl</i> TABS 10mg, 25mg, 50mg PA applies if 65 years and older	1	PA
<i>imipramine pamoate</i> CAPS 75mg, 100mg, 125mg, 150mg PA applies if 65 years and older	3	PA
MARPLAN TABS 10mg QL (180 tabs / 30 days)	3	QL
<i>mirtazapine</i> TABS 7.5mg, 45mg	1	
<i>mirtazapine</i> (generic of REMERON) TABS 15mg, 30mg	1	
<i>mirtazapine</i> (generic of REMERON SOLTAB) TBDP 15mg, 30mg, 45mg	1	
<i>nefazodone hcl</i> TABS 50mg, 100mg, 150mg, 200mg, 250mg	1	
<i>nortriptyline hcl</i> (generic of PAMELOR) CAPS 10mg, 25mg, 50mg, 75mg	1	
<i>nortriptyline hcl</i> SOLN 10mg/5ml	3	
<i>paroxetine hcl</i> SUSP 10mg/5ml QL (900 mL / 30 days) PA applies if 65 years and older	3	QL PA
<i>paroxetine hcl</i> (generic of PAXIL) TABS 10mg, 20mg, 30mg, 40mg PA applies if 65 years and older	1	PA

Drug Name	Drug Requirements/ Tier	Limits
<i>paroxetine hcl</i> (generic of PAXIL CR) TB24 12.5mg, 25mg, 37.5mg QL (60 tabs / 30 days) PA applies if 65 years and older	3	QL PA
<i>perphenazine-amitriptyline tab</i> 2-10 mg PA applies if 65 years and older	2	PA
<i>perphenazine-amitriptyline tab</i> 2-25 mg PA applies if 65 years and older	2	PA
<i>perphenazine-amitriptyline tab</i> 4-10 mg PA applies if 65 years and older	2	PA
<i>perphenazine-amitriptyline tab</i> 4-25 mg PA applies if 65 years and older	2	PA
<i>perphenazine-amitriptyline tab</i> 4-50 mg PA applies if 65 years and older	2	PA
<i>phenelzine sulfate</i> (generic of NARDIL) TABS 15mg	1	
<i>protriptyline hcl</i> TABS 5mg, 10mg	3	
RALDESY SOLN 10mg/ml QL (1800 mL / 30 days)	3	QL PA
<i>sertraline hcl</i> (generic of ZOLOFT) CONC 20mg/ml; TABS 25mg, 50mg, 100mg	1	
SPRAVATO SOL 56MG DOS	3	NDS NM PA
SPRAVATO SOL 84MG DOS	3	NDS NM PA
<i>tranylcypromine sulfate</i> (generic of PARNATE) TABS 10mg	1	
<i>trazodone hcl</i> TABS 50mg, 100mg, 150mg, 300mg	1	
<i>trimipramine maleate</i> CAPS 25mg, 50mg QL (120 caps / 30 days)	3	QL
<i>trimipramine maleate</i> CAPS 100mg QL (60 caps / 30 days)	3	QL

Drug Name	Drug Requirements/ Tier	Limits
TRINTELLIX TABS 5mg, 10mg, 20mg QL (30 tabs / 30 days)	3	QL PA
<i>venlafaxine hcl</i> (generic of EFFEXOR XR) CP24 37.5mg, 75mg, 150mg	1	
<i>venlafaxine hcl</i> TABS 25mg, 37.5mg, 50mg, 75mg, 100mg	1	
<i>vilazodone hcl</i> (generic of VIIBRYD) TABS 10mg, 20mg, 40mg QL (30 tabs / 30 days)	1	QL
ZURZUVAE CAPS 20mg, 25mg QL (28 caps / 14 days)	3	NDS QL NM PA
ZURZUVAE CAPS 30mg QL (14 caps / 14 days)	3	NDS QL NM PA
ANTIPARKINSONIAN AGENTS		
<i>amantadine hcl</i> CAPS 100mg QL (120 caps / 30 days)	1	QL
<i>amantadine hcl</i> SOLN 50mg/5ml; TABS 100mg	1	
<i>benztropine mesylate</i> SOLN 1mg/ml	1	
<i>benztropine mesylate</i> TABS .5mg, 1mg, 2mg PA applies if 65 years and older	1	PA
<i>bromocriptine mesylate</i> (generic of PARLODEL) CAPS 5mg; TABS 2.5mg	1	
<i>carb/levo orally disintegrating tab</i> 10-100mg	1	
<i>carb/levo orally disintegrating tab</i> 25-100mg	1	
<i>carb/levo orally disintegrating tab</i> 25-250mg	1	
<i>carbidopa</i> (generic of LODOSYN) TABS 25mg	1	
<i>carbidopa & levodopa cap er</i> 23.75-95 mg	1	
<i>carbidopa & levodopa cap er</i> 36.25-145 mg	1	
<i>carbidopa & levodopa cap er</i> 48.75-195 mg	1	
<i>carbidopa & levodopa cap er</i> 61.25-245 mg	1	

Drug Name	Drug Requirements/ Tier Limits	
<i>carbidopa & levodopa tab 10-100 mg (generic of SINEMET)</i>	1	
<i>carbidopa & levodopa tab 25-100 mg (generic of SINEMET)</i>	1	
<i>carbidopa & levodopa tab 25-250 mg</i>	1	
<i>carbidopa & levodopa tab er 25-100 mg</i>	1	
<i>carbidopa & levodopa tab er 50-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	1	
CREXONT CAP 35-140MG	3	ST
CREXONT CAP 52.5-210	3	ST
CREXONT CAP 70-280MG	3	ST
CREXONT CAP 87.5-350	3	ST
DUOPA SUS 4.63-20	3	NDS B/D NM
<i>entacapone TABS 200mg</i>	1	
GOCOVRI CP24 68.5mg QL (30 caps / 30 days)	3	NDS QL NM PA
GOCOVRI CP24 137mg QL (60 caps / 30 days)	3	NDS QL NM PA
INBRIJA CAPS 42mg QL (300 caps / 30 days)	3	NDS QL NM PA
NOURIANZ TABS 20mg, 40mg QL (30 tabs / 30 days)	3	NDS QL NM
ONGENTYS CAPS 25mg, 50mg QL (30 caps / 30 days)	3	QL PA

Drug Name	Drug Requirements/ Tier Limits	
<i>pramipexole dihydrochloride</i> TABS .125mg, .25mg, .5mg, .75mg, 1mg, 1.5mg; TB24 .375mg, .75mg, 1.5mg, 2.25mg, 3mg, 3.75mg, 4.5mg	1	
<i>rasagiline mesylate (generic of AZILECT)</i> TABS .5mg, 1mg QL (30 tabs / 30 days)	1	QL
<i>ropinirole hydrochloride</i> TABS .25mg, .5mg, 1mg, 2mg, 3mg, 4mg, 5mg; TB24 2mg, 4mg, 6mg, 8mg, 12mg	1	
RYTARY CAP 95MG	3	ST
RYTARY CAP 145MG	3	ST
RYTARY CAP 195MG	3	ST
RYTARY CAP 245MG	3	ST
<i>selegiline hcl</i> CAPS 5mg; TABS 5mg	1	
<i>trihexyphenidyl hcl</i> SOLN .4mg/ml	2	
<i>trihexyphenidyl hcl</i> TABS 2mg, 5mg	1	
VYALEV INJ 12-240MG	3	NDS NM PA
XADAGO TABS 50mg, 100mg	3	NDS
ZELAPAR TBDP 1.25mg	3	NDS
ANTIPSYCHOTICS		
ABILIFY ASIMTUFII PRSY 720mg/2.4ml, 960mg/3.2ml QL (1 syringe / 56 days)	3	NDS QL
ABILIFY MAINTENA PRSY 300mg, 400mg QL (1 syringe / 28 days)	3	NDS QL
ABILIFY MAINTENA SRER 300mg, 400mg QL (1 injection / 28 days)	3	NDS QL
ABILIFY MYCITE MAINTENANC TBPK 2mg, 5mg, 10mg, 15mg, 20mg, 30mg QL (30 tabs / 30 days)	3	NDS QL PA
ABILIFY MYCITE STARTER KI TBPK 2mg, 5mg, 10mg, 15mg, 20mg, 30mg QL (30 tabs / 30 days)	3	NDS QL PA

Drug Name	Drug Requirements/ Limits		Drug Name	Drug Requirements/ Limits	
	Tier	Limits		Tier	Limits
<i>aripiprazole</i> SOLN 1mg/ml QL (900 mL / 30 days)	1	QL	COBENFY CAP 100-20MG QL (60 caps / 30 days)	3	NDS QL PA
<i>aripiprazole</i> (generic of ABILIFY) TABS 2mg, 5mg, 10mg, 15mg, 20mg, 30mg QL (30 tabs / 30 days)	1	QL	COBENFY CAP 125-30MG QL (60 caps / 30 days)	3	NDS QL PA
<i>aripiprazole</i> TBDP 10mg, 15mg QL (60 tabs / 30 days)	1	QL ST	COBENFY STRT CAP PACK QL (2 packs / year)	3	NDS QL PA
ARISTADA PRSY 441mg/1.6ml, 662mg/2.4ml, 882mg/3.2ml QL (1 syringe / 28 days)	3	NDS QL	ERZOFRI SUSY 39mg/0.25ml QL (1 syringe / 28 days)	3	QL
ARISTADA PRSY 1064mg/3.9ml QL (1 syringe / 56 days)	3	NDS QL	ERZOFRI SUSY 78mg/0.5ml, 117mg/0.75ml, 156mg/ml, 234mg/1.5ml QL (1 syringe / 28 days)	3	NDS QL
ARISTADA INITIO PRSY 675mg/2.4ml	3	NDS	ERZOFRI SUSY 351mg/2.25ml QL (2 syringes / year)	3	NDS QL
<i>asenapine maleate</i> (generic of SAPHRIS) SUBL 2.5mg, 5mg, 10mg QL (60 tabs / 30 days)	1	QL	FANAPT TABS 1mg, 2mg, 4mg, 6mg, 8mg, 10mg, 12mg QL (60 tabs / 30 days)	3	NDS QL PA
CAPLYTA CAPS 10.5mg, 21mg, 42mg QL (30 caps / 30 days)	3	NDS QL	FANAPT PAK PACK A QL (2 packs / year)	3	QL PA
<i>chlorpromazine hcl</i> CONC 30mg/ml, 100mg/ml; SOLN 25mg/ml, 50mg/2ml; TABS 10mg, 25mg, 50mg, 100mg, 200mg	1		FANAPT PAK PACK B QL (2 packs / year)	3	QL PA
<i>clozapine</i> (generic of CLOZARIL) TABS 25mg	1		FANAPT PAK PACK C QL (2 packs / year)	3	QL PA
<i>clozapine</i> TABS 50mg	1		<i>fluphenazine decanoate</i> SOLN 25mg/ml	1	
<i>clozapine</i> (generic of CLOZARIL) TABS 100mg QL (270 tabs / 30 days)	1	QL	<i>fluphenazine hcl</i> CONC 5mg/ml; ELIX 2.5mg/5ml; SOLN 2.5mg/ml; TABS 1mg, 2.5mg, 5mg, 10mg	1	
<i>clozapine</i> TABS 200mg QL (120 tabs / 30 days)	1	QL	<i>haloperidol</i> TABS .5mg, 1mg, 2mg, 5mg, 10mg, 20mg	1	
<i>clozapine</i> TBDP 12.5mg, 25mg	1	PA	<i>haloperidol decanoate</i> SOLN 50mg/ml, 100mg/ml	1	
<i>clozapine</i> TBDP 100mg QL (270 tabs / 30 days)	1	QL PA	<i>haloperidol lactate</i> CONC 2mg/ml; SOLN 5mg/ml	1	
<i>clozapine</i> TBDP 150mg QL (180 tabs / 30 days)	1	QL PA	INVEGA HAFYERA SUSY 1092mg/3.5ml, 1560mg/5ml QL (1 injection / 180 days)	3	NDS QL
<i>clozapine</i> TBDP 200mg QL (120 tabs / 30 days)	1	QL PA	INVEGA SUSTENNA SUSY 39mg/0.25ml QL (1 syringe / 28 days)	3	QL
COBENFY CAP 50-20MG QL (60 caps / 30 days)	3	NDS QL PA	INVEGA SUSTENNA SUSY 78mg/0.5ml, 117mg/0.75ml, 156mg/ml, 234mg/1.5ml QL (1 syringe / 28 days)	3	NDS QL

Drug Name	Drug Requirements/ Tier	Limits
INVEGA TRINZA SUSY 273mg/0.88ml, 410mg/1.32ml, 546mg/1.75ml, 819mg/2.63ml QL (1 syringe / 90 days)	3	NDS QL
<i>loxapine succinate</i> CAPS 5mg, 10mg, 25mg, 50mg	1	
<i>lurasidone hcl</i> (generic of LATUDA) TABS 20mg, 40mg, 60mg, 120mg QL (30 tabs / 30 days)	1	QL
<i>lurasidone hcl</i> (generic of LATUDA) TABS 80mg QL (60 tabs / 30 days)	1	QL
LYBALVI TAB 5-10MG QL (30 tabs / 30 days)	3	NDS QL
LYBALVI TAB 10-10MG QL (30 tabs / 30 days)	3	NDS QL
LYBALVI TAB 15-10MG QL (30 tabs / 30 days)	3	NDS QL
LYBALVI TAB 20-10MG QL (30 tabs / 30 days)	3	NDS QL
<i>molindone hcl</i> TABS 5mg, 10mg, 25mg	1	
NUPLAZID CAPS 34mg QL (30 caps / 30 days)	3	NDS QL NM PA
NUPLAZID TABS 10mg QL (30 tabs / 30 days)	3	NDS QL NM PA
<i>olanzapine</i> (generic of ZYPREXA) SOLR 10mg QL (3 vials / 1 day)	1	QL
<i>olanzapine</i> (generic of ZYPREXA) TABS 2.5mg, 5mg QL (60 tabs / 30 days)	1	QL
<i>olanzapine</i> TABS 7.5mg, 15mg QL (30 tabs / 30 days)	1	QL
<i>olanzapine</i> TABS 10mg QL (60 tabs / 30 days)	1	QL
<i>olanzapine</i> (generic of ZYPREXA) TABS 20mg QL (30 tabs / 30 days)	1	QL
<i>olanzapine</i> TBDP 5mg, 15mg, 20mg QL (30 tabs / 30 days)	1	QL ST
<i>olanzapine</i> TBDP 10mg QL (60 tabs / 30 days)	1	QL ST

Drug Name	Drug Requirements/ Tier	Limits
OPIPZA FILM 2mg, 5mg QL (30 films / 30 days)	3	NDS QL PA
OPIPZA FILM 10mg QL (90 films / 30 days)	3	NDS QL PA
<i>paliperidone</i> TB24 1.5mg QL (30 tabs / 30 days)	1	QL
<i>paliperidone</i> (generic of INVEGA) TB24 3mg, 9mg QL (30 tabs / 30 days)	1	QL
<i>paliperidone</i> (generic of INVEGA) TB24 6mg QL (60 tabs / 30 days)	1	QL
<i>perphenazine</i> TABS 2mg, 4mg, 8mg, 16mg	1	
PERSERIS PRSY 90mg, 120mg QL (1 syringe / 30 days)	3	NDS QL
<i>pimozide</i> TABS 1mg, 2mg	1	
<i>quetiapine fumarate</i> (generic of SEROQUEL) TABS 25mg QL (180 tabs / 30 days)	1	QL
<i>quetiapine fumarate</i> (generic of SEROQUEL) TABS 50mg, 100mg, 200mg QL (90 tabs / 30 days)	1	QL
<i>quetiapine fumarate</i> TABS 150mg QL (90 tabs / 30 days)	1	QL
<i>quetiapine fumarate</i> (generic of SEROQUEL) TABS 300mg, 400mg QL (60 tabs / 30 days)	1	QL
<i>quetiapine fumarate</i> (generic of SEROQUEL XR) TB24 50mg, 300mg, 400mg QL (60 tabs / 30 days)	1	QL PA
<i>quetiapine fumarate</i> (generic of SEROQUEL XR) TB24 150mg, 200mg QL (30 tabs / 30 days)	1	QL PA
REXULTI TABS 3mg, 4mg QL (30 tabs / 30 days)	3	NDS QL
REXULTI TABS .25mg, .5mg, 1mg, 2mg QL (60 tabs / 30 days)	3	NDS QL
<i>risperidone</i> (generic of RISPERDAL) SOLN 1mg/ml QL (240 mL / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits
<i>risperidone</i> (generic of RISPEDAL) TABS .5mg, 1mg, 2mg, 3mg, 4mg	1	
<i>risperidone</i> TABS .25mg	1	
<i>risperidone</i> TBDP 1mg, 2mg, 3mg QL (60 tabs / 30 days)	1	QL ST
<i>risperidone</i> TBDP 4mg QL (120 tabs / 30 days)	1	QL ST
<i>risperidone</i> TBDP .25mg, .5mg QL (90 tabs / 30 days)	1	QL ST
<i>risperidone microspheres</i> (generic of RISPEDAL CONSTA) SRER 12.5mg, 25mg QL (2 injections / 28 days)	1	QL
<i>risperidone microspheres</i> (generic of RISPEDAL CONSTA) SRER 37.5mg, 50mg QL (2 injections / 28 days)	3	NDS QL
RYKINDO SRER 25mg, 37.5mg, 50mg QL (2 vials / 28 days)	3	NDS QL PA
SECUADO PT24 3.8mg/24hr, 5.7mg/24hr, 7.6mg/24hr QL (30 patches / 30 days)	3	NDS QL
<i>thioridazine hcl</i> TABS 10mg, 25mg, 50mg, 100mg	1	
<i>thiothixene</i> CAPS 1mg, 2mg, 5mg, 10mg	1	
<i>trifluoperazine hcl</i> TABS 1mg, 2mg, 5mg, 10mg	1	
UZEDY SUSY 50mg/0.14ml, 75mg/0.21ml, 100mg/0.28ml, 125mg/0.35ml QL (1 syringe / 30 days)	3	NDS QL
UZEDY SUSY 150mg/0.42ml, 200mg/0.56ml, 250mg/0.7ml QL (1 syringe / 60 days)	3	NDS QL
VERSACLOZ SUSP 50mg/ml QL (600 mL / 30 days)	3	NDS QL PA

Drug Name	Drug Requirements/ Tier	Limits
VRAYLAR CAPS 1.5mg QL (60 caps / 30 days)	3	NDS QL
VRAYLAR CAPS .5mg, .75mg, 3mg, 4.5mg, 6mg QL (30 caps / 30 days)	3	NDS QL
<i>ziprasidone hcl</i> (generic of GEODON) CAPS 20mg, 40mg, 60mg, 80mg QL (60 caps / 30 days)	1	QL
<i>ziprasidone mesylate</i> (generic of GEODON) SOLR 20mg QL (6 injections / 3 days)	1	QL
ZYPREXA RELPREVV SUSR 210mg QL (2 vials / 28 days)	3	QL NM PA
ZYPREXA RELPREVV SUSR 300mg QL (2 vials / 28 days)	3	NDS QL NM PA
ZYPREXA RELPREVV SUSR 405mg QL (1 vial / 28 days)	3	NDS QL NM PA
ANTISEIZURE AGENTS		
APTIOM TABS 200mg, 400mg QL (30 tabs / 30 days)	3	NDS QL
APTIOM TABS 600mg, 800mg QL (60 tabs / 30 days)	3	NDS QL
BRIVIACT SOLN 10mg/ml QL (600 mL / 30 days)	3	NDS QL PA
BRIVIACT SOLN 50mg/5ml	3	PA
BRIVIACT TABS 10mg, 25mg, 50mg, 75mg, 100mg QL (60 tabs / 30 days)	3	NDS QL PA
<i>carbamazepine</i> CHEW 100mg, 200mg	1	
<i>carbamazepine</i> (generic of CARBATROL) CP12 100mg, 200mg, 300mg	1	
<i>carbamazepine</i> (generic of TEGRETOL) SUSP 100mg/5ml; TABS 200mg	1	
<i>carbamazepine</i> (generic of TEGRETOL-XR) TB12 100mg, 200mg, 400mg	1	

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
<i>clobazam</i> (generic of ONFI) SUSP 2.5mg/ml QL (480 mL / 30 days)	1	QL PA	<i>diazepam intensol</i> CONC 5mg/ml QL (240 mL / 30 days) PA applies if 65 years and older when greater than 5 day supply	1	QL PA
<i>clobazam</i> (generic of ONFI) TABS 10mg, 20mg QL (60 tabs / 30 days)	1	QL PA	DILANTIN CAPS 30mg	3	
<i>clonazepam</i> (generic of KLONOPIN) TABS 2mg QL (300 tabs / 30 days)	1	QL	<i>divalproex sodium</i> (generic of DEPAKOTE SPRINKLES) CSDR 125mg	1	
<i>clonazepam</i> (generic of KLONOPIN) TABS .5mg, 1mg QL (90 tabs / 30 days)	1	QL	<i>divalproex sodium</i> (generic of DEPAKOTE ER) TB24 250mg, 500mg	1	
<i>clonazepam</i> TBDP 2mg QL (300 tabs / 30 days)	1	QL	<i>divalproex sodium</i> (generic of DEPAKOTE) TBEC 125mg, 250mg, 500mg	1	
<i>clonazepam</i> TBDP .125mg, .25mg, .5mg, 1mg QL (90 tabs / 30 days)	1	QL	ELEPSIA XR TB24 1000mg	3	
<i>clorazepate dipotassium</i> TABS 3.75mg, 7.5mg, 15mg QL (180 tabs / 30 days) PA applies if 65 years and older	1	QL PA	ELEPSIA XR TB24 1500mg	3	NDS
DIACOMIT CAPS 250mg QL (360 caps / 30 days)	3	NDS QL NM PA	EPIDIOLEX SOLN 100mg/ml QL (600 mL / 30 days)	3	NDS QL NM PA
DIACOMIT CAPS 500mg QL (180 caps / 30 days)	3	NDS QL NM PA	<i>eslicarbazepine acetate</i> (generic of APTIOM) TABS 200mg, 400mg QL (30 tabs / 30 days)	1	QL
DIACOMIT PACK 250mg QL (360 packets / 30 days)	3	NDS QL NM PA	<i>eslicarbazepine acetate</i> (generic of APTIOM) TABS 600mg, 800mg QL (60 tabs / 30 days)	1	QL
DIACOMIT PACK 500mg QL (180 packets / 30 days)	3	NDS QL NM PA	<i>ethosuximide</i> (generic of ZARONTIN) CAPS 250mg; SOLN 250mg/5ml	1	
<i>diazepam</i> SOLN 5mg/5ml QL (1200 mL / 30 days) PA applies if 65 years and older when greater than 5 day supply	1	QL PA	<i>felbamate</i> SUSP 600mg/5ml	1	
<i>diazepam</i> (generic of VALIUM) TABS 2mg, 5mg, 10mg QL (120 tabs / 30 days) PA applies if 65 years and older when greater than 5 day supply	1	QL PA	<i>felbamate</i> (generic of FELBATOL) TABS 400mg, 600mg	1	
<i>diazepam</i> (anticonvulsant) GEL 2.5mg, 10mg, 20mg	1		FINTEPLA SOLN 2.2mg/ml QL (360 mL / 30 days)	3	NDS QL NM PA
<i>diazepam inj</i> SOLN 5mg/ml	1		FYCOMPA SUSP .5mg/ml QL (680 mL / 28 days)	3	NDS QL PA
			FYCOMPA TABS 2mg QL (60 tabs / 30 days)	3	QL PA
			FYCOMPA TABS 4mg, 6mg, 8mg, 10mg, 12mg QL (30 tabs / 30 days)	3	NDS QL PA
			<i>gabapentin</i> (generic of NEURONTIN) CAPS 100mg, 300mg QL (360 caps / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
<i>gabapentin</i> (generic of NEURONTIN) CAPS 400mg QL (270 caps / 30 days)	1	QL	<i>lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit</i> (generic of LAMICTAL STARTER/TAKING C)	3	NDS
<i>gabapentin</i> (generic of NEURONTIN) SOLN 250mg/5ml, 300mg/6ml QL (2160 mL / 30 days)	1	QL	<i>lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit</i> (generic of LAMICTAL ODT)	1	
<i>gabapentin</i> (generic of NEURONTIN) TABS 600mg QL (180 tabs / 30 days)	1	QL	<i>lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit</i> (generic of LAMICTAL ODT)	1	
<i>gabapentin</i> (generic of NEURONTIN) TABS 800mg QL (120 tabs / 30 days)	1	QL	<i>lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit</i> (generic of LAMICTAL ODT)	1	
<i>lacosamide</i> (generic of VIMPAT) SOLN 200mg/20ml	1		<i>levetiracetam</i> (generic of KEPBRA) SOLN 100mg/ml, 500mg/5ml; TABS 250mg, 500mg, 750mg, 1000mg	1	
<i>lacosamide</i> (generic of VIMPAT) TABS 50mg QL (120 tabs / 30 days)	1	QL	LEVETIRACETAM TB3D 250mg QL (360 tabs / 30 days)	3	QL
<i>lacosamide</i> (generic of VIMPAT) TABS 100mg, 150mg, 200mg QL (60 tabs / 30 days)	1	QL	<i>levetiracetam</i> (generic of KEPBRA XR) TB24 500mg, 750mg	1	
<i>lacosamide oral</i> (generic of VIMPAT) SOLN 10mg/ml QL (1200 mL / 30 days)	1	QL	<i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i> (generic of LEVETIRACETAM/SODIUM CHLO)	1	
LAMICTAL XR KIT	3		<i>levetiracetam in sodium chloride iv soln 1000 mg/100ml</i> (generic of LEVETIRACETAM/SODIUM CHLO)	1	
<i>lamotrigine</i> (generic of LAMICTAL CHEWABLE DISPERS) CHEW 5mg, 25mg	1		<i>levetiracetam in sodium chloride iv soln 1500 mg/100ml</i> (generic of LEVETIRACETAM/SODIUM CHLO)	1	
<i>lamotrigine</i> (generic of LAMICTAL) TABS 25mg, 100mg, 150mg, 200mg	1		<i>methsuximide</i> (generic of CELONTIN) CAPS 300mg	1	
<i>lamotrigine</i> (generic of LAMICTAL XR) TB24 25mg, 50mg, 100mg, 200mg, 250mg, 300mg	1	ST	MOTPOLY XR CP24 100mg QL (60 caps / 30 days)	3	QL PA
<i>lamotrigine</i> (generic of LAMICTAL ODT) TBDP 25mg, 50mg, 100mg, 200mg	1	ST	MOTPOLY XR CP24 150mg, 200mg QL (60 caps / 30 days)	3	NDS QL PA
<i>lamotrigine tab 25 mg (42) & 100 mg (7) starter kit</i> (generic of LAMICTAL STARTER/NOT TAKI)	1		NAYZILAM SOLN 5mg/0.1ml QL (10 nasal units / 30 days)	3	QL
<i>lamotrigine tab 35 x 25 mg starter kit</i> (generic of LAMICTAL STARTER/TAKING V) KIT 25mg	1				

Information on the symbols, abbreviations, and what they mean can be found on the page prior to the start of the drug list.

Drug Name	Drug Requirements/ Tier	Limits
<i>oxcarbazepine</i> (generic of TRILEPTAL) SUSP 300mg/5ml; TABS 150mg, 300mg, 600mg	1	
<i>oxcarbazepine</i> (generic of OXTELLAR XR) TB24 150mg, 300mg	1	PA
<i>oxcarbazepine</i> (generic of OXTELLAR XR) TB24 600mg	3	NDS PA
<i>perampanel</i> (generic of FYCOMPA) SUSP .5mg/ml QL (680 mL / 28 days)	3	NDS QL PA
<i>perampanel</i> (generic of FYCOMPA) TABS 2mg QL (60 tabs / 30 days)	1	QL PA
<i>perampanel</i> (generic of FYCOMPA) TABS 4mg, 6mg, 8mg, 10mg, 12mg QL (30 tabs / 30 days)	1	QL PA
<i>phenobarbital</i> ELIX 20mg/5ml QL (1500 mL / 30 days) PA applies if 65 years and older	3	QL PA
<i>phenobarbital</i> TABS 15mg, 16.2mg, 30mg, 32.4mg, 60mg, 64.8mg, 97.2mg, 100mg QL (120 tabs / 30 days) PA applies if 65 years and older	2	QL PA
<i>phenobarbital sodium</i> SOLN 65mg/ml, 130mg/ml PA applies if 65 years and older	3	PA
<i>phenytek</i> CAPS 200mg, 300mg	1	
<i>phenytoin</i> (generic of DILANTIN INFATABS) CHEW 50mg	1	
<i>phenytoin</i> (generic of DILANTIN-125) SUSP 125mg/5ml	1	
<i>phenytoin sodium</i> SOLN 50mg/ml	1	
<i>phenytoin sodium extended</i> (generic of DILANTIN) CAPS 100mg	1	
<i>phenytoin sodium extended</i> CAPS 200mg, 300mg	1	

Drug Name	Drug Requirements/ Tier	Limits
<i>pregabalin</i> (generic of LYRICA) CAPS 25mg, 50mg, 75mg, 100mg, 150mg QL (120 caps / 30 days) PA applies if 65 years and older	1	QL PA
<i>pregabalin</i> (generic of LYRICA) CAPS 200mg QL (90 caps / 30 days) PA applies if 65 years and older	1	QL PA
<i>pregabalin</i> (generic of LYRICA) CAPS 225mg, 300mg QL (60 caps / 30 days) PA applies if 65 years and older	1	QL PA
<i>pregabalin</i> (generic of LYRICA) SOLN 20mg/ml QL (900 mL / 30 days) PA applies if 65 years and older	1	QL PA
<i>primidone</i> (generic of MYSOLINE) TABS 50mg, 250mg	1	
<i>primidone</i> TABS 125mg	1	
<i>roweepra</i> (generic of KEPPRA) TABS 500mg	1	
<i>rufinamide</i> (generic of BANZEL) SUSP 40mg/ml QL (2400 mL / 30 days)	3	NDS QL PA
<i>rufinamide</i> (generic of BANZEL) TABS 200mg QL (480 tabs / 30 days)	1	QL PA
<i>rufinamide</i> (generic of BANZEL) TABS 400mg QL (240 tabs / 30 days)	3	NDS QL PA
SPRITAM TB3D 250mg QL (360 tabs / 30 days)	3	QL
SPRITAM TB3D 500mg QL (180 tabs / 30 days)	3	QL
SPRITAM TB3D 750mg QL (120 tabs / 30 days)	3	QL
SPRITAM TB3D 1000mg QL (90 tabs / 30 days)	3	QL
SUBVENITE SUSP 10mg/ml	3	NDS ST

Drug Name	Drug Requirements/ Tier	Limits
<i>subvenite</i> (generic of LAMICTAL) TABS 25mg, 100mg, 150mg, 200mg	1	
<i>subvenite starter kit/blu</i> (generic of LAMICTAL STARTER/TAKING V) KIT 25mg	1	
<i>subvenite starter kit/gre</i> (generic of LAMICTAL STARTER/TAKING C)	3	NDS
<i>subvenite starter kit/ora</i> (generic of LAMICTAL STARTER/NOT TAKI)	1	
SYMPAZAN FILM 5mg, 10mg, 20mg QL (60 films / 30 days)	3	NDS QL PA
<i>tiagabine hcl</i> TABS 2mg, 4mg, 12mg, 16mg	1	
<i>topiramate</i> (generic of TOPAMAX SPRINKLE) CPSP 15mg, 25mg	1	
<i>topiramate</i> CPSP 50mg	1	
<i>topiramate</i> (generic of EPRONTIA) SOLN 25mg/ml QL (480 mL / 30 days)	1	QL PA
<i>topiramate</i> (generic of TOPAMAX) TABS 25mg, 50mg, 100mg, 200mg	1	
<i>valproate sodium</i> SOLN 100mg/ml, 250mg/5ml	1	
<i>valproic acid</i> CAPS 250mg	1	
VALTOCO 5 MG DOSE LIQD 5mg/0.1ml QL (10 blister packs / 30 days)	3	QL
VALTOCO 10 MG DOSE LIQD 10mg/0.1ml QL (10 blister packs / 30 days)	3	QL
VALTOCO 15 MG DOSE LQPK 7.5mg/0.1ml QL (10 blister packs / 30 days)	3	QL
VALTOCO 20 MG DOSE LQPK 10mg/0.1ml QL (10 blister packs / 30 days)	3	QL

Drug Name	Drug Requirements/ Tier	Limits
<i>vigabatrin</i> (generic of SABRIL) PACK 500mg QL (180 packets / 30 days)	3	NDS QL NM PA
<i>vigabatrin</i> (generic of SABRIL) TABS 500mg QL (180 tabs / 30 days)	3	NDS QL NM PA
<i>vigadrone</i> (generic of SABRIL) PACK 500mg QL (180 packets / 30 days)	3	NDS QL NM PA
<i>vigadrone</i> (generic of SABRIL) TABS 500mg QL (180 tabs / 30 days)	3	NDS QL NM PA
VIGAFYDE SOLN 100mg/ml QL (900 mL / 30 days)	3	NDS QL NM PA
XCOPRI TABS 25mg, 50mg, 100mg QL (30 tabs / 30 days)	3	NDS QL
XCOPRI TABS 150mg, 200mg QL (60 tabs / 30 days)	3	NDS QL
XCOPRI PAK 12.5-25 QL (28 tabs / 28 days)	3	QL
XCOPRI PAK 50-100MG QL (28 tabs / 28 days)	3	NDS QL
XCOPRI PAK 100-150 QL (56 tabs / 28 days)	3	NDS QL
XCOPRI PAK 150-200MG (MAINTENANCE) QL (56 tabs / 28 days)	3	NDS QL
XCOPRI PAK 150-200MG (TITRATION) QL (28 tabs / 28 days)	3	NDS QL
ZONISADE SUSP 100mg/5ml QL (900 mL / 30 days)	3	NDS QL PA
<i>zonisamide</i> (generic of ZONEGRAN) CAPS 25mg, 100mg	1	
<i>zonisamide</i> CAPS 50mg	1	
ZTALMY SUSP 50mg/ml QL (1100 mL / 30 days)	3	NDS QL NM PA
ATTENTION DEFICIT HYPERACTIVITY DISORDER		
ADZENYS XR-ODT TBED 3.1mg, 6.3mg, 9.4mg QL (60 tabs / 30 days)	3	QL PA

Drug Name	Drug Requirements/ Tier	Limits
ADZENYS XR-ODT TBED 12.5mg, 15.7mg, 18.8mg QL (30 tabs / 30 days)	3	QL PA
<i>amphetamine</i> (generic of ADZENYS XR-ODT) TBED 3.1mg, 6.3mg, 9.4mg QL (60 tabs / 30 days)	1	QL PA
<i>amphetamine</i> (generic of ADZENYS XR-ODT) TBED 12.5mg, 15.7mg, 18.8mg QL (30 tabs / 30 days)	1	QL PA
<i>amphetamine- dextroamphetamine 3-bead cap er 24hr 12.5 mg</i> (generic of MYDAYIS) QL (30 caps / 30 days)	1	QL PA
<i>amphetamine- dextroamphetamine 3-bead cap er 24hr 25 mg</i> (generic of MYDAYIS) QL (30 caps / 30 days)	1	QL PA
<i>amphetamine- dextroamphetamine 3-bead cap er 24hr 37.5 mg</i> (generic of MYDAYIS) QL (30 caps / 30 days)	1	QL PA
<i>amphetamine- dextroamphetamine 3-bead cap er 24hr 50 mg</i> (generic of MYDAYIS) QL (30 caps / 30 days)	1	QL PA
<i>amphetamine- dextroamphetamine cap er 24hr 5 mg</i> (generic of ADDERALL XR) QL (30 caps / 30 days)	1	QL PA
<i>amphetamine- dextroamphetamine cap er 24hr 10 mg</i> (generic of ADDERALL XR) QL (30 caps / 30 days)	1	QL PA
<i>amphetamine- dextroamphetamine cap er 24hr 15 mg</i> (generic of ADDERALL XR) QL (30 caps / 30 days)	1	QL PA

Drug Name	Drug Requirements/ Tier	Limits
<i>amphetamine- dextroamphetamine cap er 24hr 20 mg</i> (generic of ADDERALL XR) QL (30 caps / 30 days)	1	QL PA
<i>amphetamine- dextroamphetamine cap er 24hr 25 mg</i> (generic of ADDERALL XR) QL (30 caps / 30 days)	1	QL PA
<i>amphetamine- dextroamphetamine cap er 24hr 30 mg</i> (generic of ADDERALL XR) QL (30 caps / 30 days)	1	QL PA
<i>amphetamine- dextroamphetamine tab 5 mg</i> (generic of ADDERALL) QL (60 tabs / 30 days)	1	QL PA
<i>amphetamine- dextroamphetamine tab 7.5 mg</i> (generic of ADDERALL) QL (60 tabs / 30 days)	1	QL PA
<i>amphetamine- dextroamphetamine tab 10 mg</i> (generic of ADDERALL) QL (60 tabs / 30 days)	1	QL PA
<i>amphetamine- dextroamphetamine tab 12.5 mg</i> (generic of ADDERALL) QL (60 tabs / 30 days)	1	QL PA
<i>amphetamine- dextroamphetamine tab 15 mg</i> (generic of ADDERALL) QL (60 tabs / 30 days)	1	QL PA
<i>amphetamine- dextroamphetamine tab 20 mg</i> (generic of ADDERALL) QL (90 tabs / 30 days)	1	QL PA
<i>amphetamine- dextroamphetamine tab 30 mg</i> (generic of ADDERALL) QL (60 tabs / 30 days)	1	QL PA
<i>atomoxetine hcl</i> CAPS 10mg, 18mg, 25mg QL (120 caps / 30 days)	1	QL
<i>atomoxetine hcl</i> CAPS 40mg QL (60 caps / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits
<i>atomoxetine hcl</i> CAPS 60mg, 80mg, 100mg QL (30 caps / 30 days)	1	QL
AZSTARYS CAP 26.1-5.2 QL (30 caps / 30 days)	3	QL PA
AZSTARYS CAP 39.2-7.8 QL (30 caps / 30 days)	3	QL PA
AZSTARYS CAP 52.3-10. QL (30 caps / 30 days)	3	QL PA
COTEMPLA XR-ODT TBED 8.6mg, 17.3mg, 25.9mg QL (60 tabs / 30 days)	3	QL PA
<i>dexmethylphenidate hcl</i> (generic of FOCALIN XR) CP24 5mg, 10mg, 15mg, 20mg QL (60 caps / 30 days)	1	QL PA
<i>dexmethylphenidate hcl</i> (generic of FOCALIN XR) CP24 25mg, 30mg, 35mg, 40mg QL (30 caps / 30 days)	1	QL PA
<i>dexmethylphenidate hcl</i> (generic of FOCALIN) TABS 2.5mg, 5mg QL (120 tabs / 30 days)	1	QL PA
<i>dexmethylphenidate hcl</i> (generic of FOCALIN) TABS 10mg QL (60 tabs / 30 days)	1	QL PA
<i>dextroamphetamine sulfate</i> CP24 5mg QL (150 caps / 30 days)	1	QL PA
<i>dextroamphetamine sulfate</i> (generic of DEXEDRINE) CP24 10mg QL (150 caps / 30 days)	1	QL PA
<i>dextroamphetamine sulfate</i> (generic of DEXEDRINE) CP24 15mg QL (120 caps / 30 days)	1	QL PA
<i>dextroamphetamine sulfate</i> TABS 2.5mg, 5mg, 7.5mg, 10mg QL (180 tabs / 30 days)	1	QL PA
<i>dextroamphetamine sulfate</i> TABS 15mg QL (120 tabs / 30 days)	1	QL PA

Drug Name	Drug Requirements/ Tier	Limits
<i>dextroamphetamine sulfate</i> TABS 20mg QL (90 tabs / 30 days)	1	QL PA
<i>dextroamphetamine sulfate</i> TABS 30mg QL (60 tabs / 30 days)	1	QL PA
DYANAVEL XR SUER 2.5mg/ml QL (240 mL / 30 days)	3	QL PA
DYANAVEL XR TBCR 5mg QL (60 tabs / 30 days)	3	QL PA
DYANAVEL XR TBCR 10mg, 15mg, 20mg QL (30 tabs / 30 days)	3	QL PA
<i>guanfacine hcl (adhd)</i> (generic of INTUNIV) TB24 1mg, 2mg, 4mg QL (30 tabs / 30 days) PA applies if 65 years and older	2	QL PA
<i>guanfacine hcl (adhd)</i> (generic of INTUNIV) TB24 3mg QL (60 tabs / 30 days) PA applies if 65 years and older	2	QL PA
JORNAY PM CP24 20mg, 40mg QL (60 caps / 30 days)	3	QL PA
JORNAY PM CP24 60mg, 80mg, 100mg QL (30 caps / 30 days)	3	QL PA
<i>lisdexamfetamine dimesylate</i> CAPS 10mg, 20mg, 30mg QL (60 caps / 30 days)	1	QL PA
<i>lisdexamfetamine dimesylate</i> CAPS 40mg, 50mg, 60mg, 70mg QL (30 caps / 30 days)	1	QL PA
<i>lisdexamfetamine dimesylate</i> CHEW 10mg, 20mg, 30mg QL (60 tabs / 30 days)	1	QL PA
<i>lisdexamfetamine dimesylate</i> CHEW 40mg, 50mg, 60mg QL (30 tabs / 30 days)	1	QL PA

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
<i>methylphenidate</i> (generic of DAYTRANA) PTCH 10mg/9hr, 15mg/9hr, 20mg/9hr, 30mg/9hr QL (30 patches / 30 days)	1	QL PA	<i>methylphenidate hcl</i> TB24 54mg; TBCR 45mg, 54mg, 63mg, 72mg QL (30 tabs / 30 days)	1	QL PA
<i>methylphenidate hcl</i> CHEW 2.5mg, 5mg, 10mg QL (180 tabs / 30 days)	1	QL PA	<i>methylphenidate hcl</i> TBCR 10mg, 20mg QL (90 tabs / 30 days)	1	QL PA
<i>methylphenidate hcl</i> (generic of RITALIN LA) CP24 10mg, 20mg, 30mg QL (60 caps / 30 days)	1	QL PA	<i>methylphenidate hcl</i> (generic of CONCERTA) TBCR 18mg, 27mg, 36mg QL (60 tabs / 30 days)	1	QL PA
<i>methylphenidate hcl</i> (generic of RITALIN LA) CP24 40mg QL (30 caps / 30 days)	1	QL PA	<i>methylphenidate hcl</i> (generic of CONCERTA) TBCR 54mg QL (30 tabs / 30 days)	1	QL PA
<i>methylphenidate hcl</i> CP24 60mg QL (30 caps / 30 days)	1	QL PA	QELBREE CP24 100mg QL (180 caps / 30 days)	3	QL PA
<i>methylphenidate hcl</i> (generic of METADATE CD) CPCR 10mg, 20mg, 30mg QL (60 caps / 30 days)	1	QL PA	QELBREE CP24 150mg QL (60 caps / 30 days)	3	QL PA
<i>methylphenidate hcl</i> (generic of METADATE CD) CPCR 40mg, 50mg, 60mg QL (30 caps / 30 days)	1	QL PA	QELBREE CP24 200mg QL (90 caps / 30 days)	3	QL PA
<i>methylphenidate hcl</i> (generic of METHYLIN) SOLN 5mg/5ml QL (1800 mL / 30 days)	1	QL PA	QUILLICHEW ER CHER 20mg, 30mg QL (60 tabs / 30 days)	3	QL PA
<i>methylphenidate hcl</i> (generic of METHYLIN) SOLN 10mg/5ml QL (900 mL / 30 days)	1	QL PA	QUILLICHEW ER CHER 40mg QL (30 tabs / 30 days)	3	QL PA
<i>methylphenidate hcl</i> (generic of RITALIN) TABS 5mg, 10mg QL (180 tabs / 30 days)	1	QL PA	QUILLIVANT XR SRER 25mg/5ml QL (360 mL / 30 days)	3	QL PA
<i>methylphenidate hcl</i> (generic of RITALIN) TABS 20mg QL (90 tabs / 30 days)	1	QL PA	VYVANSE CAPS 10mg, 20mg, 30mg QL (60 caps / 30 days)	3	QL PA
<i>methylphenidate hcl</i> TB24 18mg, 27mg, 36mg; TBCR 27mg, 36mg QL (60 tabs / 30 days)	1	QL PA	VYVANSE CAPS 40mg, 50mg, 60mg, 70mg QL (30 caps / 30 days)	3	QL PA
			VYVANSE CHEW 10mg, 20mg, 30mg QL (60 tabs / 30 days)	3	QL PA
			VYVANSE CHEW 40mg, 50mg, 60mg QL (30 tabs / 30 days)	3	QL PA
			XELSTRYM PTCH 4.5mg/9hr, 9mg/9hr, 13.5mg/9hr, 18mg/9hr QL (30 patches / 30 days)	3	QL PA
			zenzedi TABS 2.5mg, 5mg, 7.5mg, 10mg QL (180 tabs / 30 days)	1	QL PA

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>zenzedi</i> TABS 15mg QL (120 tabs / 30 days)	1	QL PA
<i>zenzedi</i> TABS 20mg QL (90 tabs / 30 days)	1	QL PA
<i>zenzedi</i> TABS 30mg QL (60 tabs / 30 days)	1	QL PA
HYPNOTICS		
BELSOMRA TABS 5mg, 10mg, 15mg, 20mg QL (30 tabs / 30 days)	2	QL
DAYVIGO TABS 5mg, 10mg QL (30 tabs / 30 days)	2	QL
<i>doxepin hcl (sleep)</i> (generic of SILENOR) TABS 3mg, 6mg QL (30 tabs / 30 days)	1	QL
EDLUAR SUBL 5mg, 10mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	3	QL PA
<i>estazolam</i> TABS 1mg, 2mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	1	QL PA
<i>eszopiclone</i> (generic of LUNESTA) TABS 1mg, 2mg, 3mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	3	QL PA
HETLIOZ LQ SUSP 4mg/ml QL (158 ml / 30 days)	3	NDS QL NM PA
QUVIVIQ TABS 25mg, 50mg QL (30 tabs / 30 days)	3	QL
<i>ramelteon</i> (generic of ROZEREM) TABS 8mg QL (30 tabs / 30 days)	1	QL
<i>tasimelteon</i> (generic of HETLIOZ) CAPS 20mg QL (30 caps / 30 days)	3	NDS QL NM PA
<i>temazepam</i> (generic of RESTORIL) CAPS 7.5mg, 22.5mg, 30mg QL (30 caps / 30 days) PA applies if 65 years and older	1	QL PA

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>temazepam</i> (generic of RESTORIL) CAPS 15mg QL (60 caps / 30 days) PA applies if 65 years and older	1	QL PA
<i>triazolam</i> (generic of HALCION) TABS .25mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
<i>triazolam</i> TABS .125mg QL (60 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
<i>zaleplon</i> CAPS 5mg QL (30 caps / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
<i>zaleplon</i> CAPS 10mg QL (60 caps / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
ZOLPIDEM TARTRATE CAPS 7.5mg QL (30 caps / 30 days)	3	QL PA
<i>zolpidem tartrate</i> (generic of AMBIEN) TABS 5mg, 10mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	1	QL PA
<i>zolpidem tartrate</i> (generic of AMBIEN CR) TBCR 6.25mg, 12.5mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
MIGRAINE		
AIMOVIG SOAJ 70mg/ml, 140mg/ml QL (1 pen / 30 days)	2	QL NM PA
<i>almotriptan malate</i> TABS 6.25mg, 12.5mg QL (12 tabs / 30 days)	1	QL ST

Drug Name	Drug Requirements/ Tier	Limits
BREKIYA SOAJ 1mg/ml QL (24 pens / 28 days)	3	NDS QL NM PA
<i>dihydroergotamine mesylate</i> SOLN 1mg/ml	3	NDS
<i>dihydroergotamine mesylate</i> SOLN 4mg/ml QL (8 mL / 30 days)	3	NDS QL PA
<i>eletriptan hydrobromide</i> (generic of RELPAX) TABS 20mg, 40mg QL (12 tabs / 30 days)	1	QL ST
EMGALITY SOAJ 120mg/ml QL (2 pens / 30 days)	2	QL NM PA
EMGALITY SOSY 100mg/ml QL (3 syringes / 30 days)	2	QL NM PA
EMGALITY SOSY 120mg/ml QL (2 syringes / 30 days)	2	QL NM PA
ERGOMAR SUBL 2mg QL (20 tabs / 28 days)	3	NDS QL PA
<i>ergotamine w/ caffeine tab 1- 100 mg</i> QL (40 tabs / 28 days)	1	QL PA
<i>frovatriptan succinate</i> (generic of FROVA) TABS 2.5mg QL (18 tabs / 30 days)	1	QL ST
<i>naratriptan hcl</i> TABS 1mg, 2.5mg QL (12 tabs / 30 days)	1	QL
NURTEC TBDP 75mg QL (16 tabs / 30 days)	2	QL PA
QULIPTA TABS 10mg, 30mg, 60mg QL (30 tabs / 30 days)	2	QL PA
<i>rizatriptan benzoate</i> TABS 5mg; TBDP 5mg QL (18 tabs / 30 days)	1	QL
<i>rizatriptan benzoate</i> (generic of MAXALT) TABS 10mg QL (18 tabs / 30 days)	1	QL
<i>rizatriptan benzoate</i> (generic of MAXALT-MLT) TBDP 10mg QL (18 tabs / 30 days)	1	QL
<i>sumatriptan</i> SOLN 5mg/act QL (24 units / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits
<i>sumatriptan</i> SOLN 20mg/act QL (12 units / 30 days)	1	QL
<i>sumatriptan succinate</i> (generic of IMITREX STATDOSE SYSTEM) SOAJ 6mg/0.5ml QL (12 injections / 30 days)	1	QL
<i>sumatriptan succinate</i> SOLN 6mg/0.5ml QL (12 injections / 30 days)	1	QL
<i>sumatriptan succinate</i> (generic of IMITREX) TABS 25mg, 50mg, 100mg QL (12 tabs / 30 days)	1	QL
UBRELVY TABS 50mg, 100mg QL (16 tabs / 30 days)	2	QL PA
ZEMBRACE SYMTOUCH SOAJ 3mg/0.5ml QL (24 pens / 30 days)	3	NDS QL ST
<i>zolmitriptan</i> (generic of ZOMIG) SOLN 2.5mg, 5mg QL (12 units / 30 days)	1	QL ST
<i>zolmitriptan</i> TABS 2.5mg, 5mg; TBDP 2.5mg, 5mg QL (12 tabs / 30 days)	1	QL ST
<i>zomig</i> TABS 2.5mg, 5mg QL (12 tabs / 30 days)	1	QL ST
MISCELLANEOUS		
AMVUTTRA SOSY 25mg/0.5ml QL (1 syringe / 90 days)	3	NDS QL NM PA
AUSTEDO TABS 6mg QL (60 tabs / 30 days)	3	NDS QL NM PA
AUSTEDO TABS 9mg, 12mg QL (120 tabs / 30 days)	3	NDS QL NM PA
AUSTEDO XR TB24 6mg QL (90 tabs / 30 days)	3	NDS QL NM PA
AUSTEDO XR TB24 12mg QL (120 tabs / 30 days)	3	NDS QL NM PA
AUSTEDO XR TB24 18mg, 30mg, 36mg, 42mg, 48mg QL (30 tabs / 30 days)	3	NDS QL NM PA
AUSTEDO XR TB24 24mg QL (60 tabs / 30 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Tier	Limits
AUSTEDO XR TAB TITR KIT QL (2 packs / year)	3	NDS QL NM PA
DAYBUE SOLN 200mg/ml QL (3600 mL / 30 days)	3	NDS QL NM PA
DAYBUE STIX PACK 5000mg, 6000mg QL (120 packets / 30 days)	3	NDS QL NM PA
DAYBUE STIX PACK 8000mg QL (60 packets / 30 days)	3	NDS QL NM PA
DUVYZAT SUSP 8.86mg/ml QL (420 mL / 30 days)	3	NDS QL NM PA
<i>edaravone</i> (generic of RADICAVA) SOLN 30mg/100ml	3	NDS NM PA
<i>edaravone</i> SOLN 60mg/100ml	3	NDS NM PA
ENSPRYNG SOSY 120mg/ml	3	NDS NM PA
EQUETRO CP12 100mg, 200mg, 300mg	3	
EVRYSDI SOLR .75mg/ml; TABS 5mg	3	NDS NM PA
FIRDAPSE TABS 10mg QL (300 tabs / 30 days)	3	NDS QL NM PA
<i>gabapentin</i> (once-daily) (generic of GRALISE) TABS 300mg QL (180 tabs / 30 days)	1	QL PA
<i>gabapentin</i> (once-daily) (generic of GRALISE) TABS 450mg, 600mg QL (90 tabs / 30 days)	1	QL PA
<i>gabapentin</i> (once-daily) (generic of GRALISE) TABS 750mg, 900mg QL (60 tabs / 30 days)	1	QL PA
GRALISE TABS 450mg QL (90 tabs / 30 days)	3	QL PA
GRALISE TABS 750mg, 900mg QL (60 tabs / 30 days)	3	QL PA
HORIZANT TBCR 300mg, 600mg QL (60 tabs / 30 days)	3	QL PA
<i>lithium</i> SOLN 8meq/5ml	1	

Drug Name	Drug Requirements/ Tier	Limits
<i>lithium carbonate</i> CAPS 150mg, 300mg, 600mg; TABS 300mg; TBCR 450mg	1	
<i>lithium carbonate</i> (generic of LITHOBID) TBCR 300mg	1	
NUDEXTA CAP 20-10MG QL (60 caps / 30 days)	3	NDS QL PA
<i>pregabalin</i> (once-daily) (generic of LYRICA CR) TB24 82.5mg, 165mg QL (90 tabs / 30 days)	1	QL PA
<i>pregabalin</i> (once-daily) (generic of LYRICA CR) TB24 330mg QL (60 tabs / 30 days)	1	QL PA
<i>pyridostigmine bromide</i> (generic of MESTINON) SOLN 60mg/5ml; TABS 60mg	1	
<i>pyridostigmine bromide</i> TABS 30mg	1	
<i>pyridostigmine bromide</i> (generic of MESTINON TIMESPAN) TBCR 180mg	1	
RADICAVA ORS SUSP 105mg/5ml QL (70 mL / 28 days)	3	NDS QL NM PA
RADICAVA ORS STARTER KIT SUSP 105mg/5ml QL (70 mL / 28 days)	3	NDS QL NM PA
<i>riluzole</i> TABS 50mg	1	
SAVELLA TABS 12.5mg, 25mg, 50mg, 100mg QL (60 tabs / 30 days)	3	QL PA
SAVELLA MIS TITR PAK QL (2 packs / year)	3	QL PA
SKYCLARYS CAPS 50mg QL (90 caps / 30 days)	3	NDS QL NM PA
<i>tetrabenazine</i> (generic of XENAZINE) TABS 12.5mg QL (90 tabs / 30 days)	1	QL NM PA
<i>tetrabenazine</i> (generic of XENAZINE) TABS 25mg QL (120 tabs / 30 days)	3	NDS QL NM PA
TIGLUTIK SUSP 50mg/10ml QL (600 mL / 30 days)	3	NDS QL NM PA
TONMYA SUBL 2.8mg QL (60 tabs / 30 days)	3	NDS QL PA
UPLIZNA SOLN 100mg/10ml	3	NDS NM PA

Drug Name	Drug Requirements/ Tier	Limits
WAINUA SOAJ 45mg/0.8ml QL (1 pen / 30 days)	3	NDS QL NM PA
MULTIPLE SCLEROSIS AGENTS		
AVONEX PSKT 30mcg/0.5ml QL (4 syringes / 28 days)	3	NDS QL NM PA
AVONEX PEN AJKT 30mcg/0.5ml QL (4 injections / 28 days)	3	NDS QL NM PA
BAFIERTAM CPDR 95mg QL (120 caps / 30 days)	3	NDS QL NM PA
BETASERON KIT .3mg QL (14 kits / 28 days)	3	NDS QL NM PA
<i>cladribine</i> (4 tabs) (generic of MAVENCLAD) TBPK 10mg QL (16 tabs per lifetime)	3	NDS QL NM PA
<i>cladribine</i> (5 tabs) (generic of MAVENCLAD) TBPK 10mg QL (20 tabs per lifetime)	3	NDS QL NM PA
<i>cladribine</i> (6 tabs) (generic of MAVENCLAD) TBPK 10mg QL (24 tabs per lifetime)	3	NDS QL NM PA
<i>cladribine</i> (7 tabs) (generic of MAVENCLAD) TBPK 10mg QL (28 tabs per lifetime)	3	NDS QL NM PA
<i>cladribine</i> (8 tabs) (generic of MAVENCLAD) TBPK 10mg QL (32 tabs per lifetime)	3	NDS QL NM PA
<i>cladribine</i> (9 tabs) (generic of MAVENCLAD) TBPK 10mg QL (36 tabs per lifetime)	3	NDS QL NM PA
<i>cladribine</i> (10 tabs) (generic of MAVENCLAD) TBPK 10mg QL (40 tabs per lifetime)	3	NDS QL NM PA
COPAXONE SOSY 20mg/ml QL (30 syringes / 30 days)	3	NDS QL NM PA
COPAXONE SOSY 40mg/ml QL (12 syringes / 28 days)	3	NDS QL NM PA
<i>dalfampridine</i> (generic of AMPYRA) TB12 10mg QL (60 tabs / 30 days)	1	QL NM PA
<i>dimethyl fumarate</i> (generic of TECFIDERA) CPDR 120mg QL (14 caps / 7 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Tier	Limits
<i>dimethyl fumarate</i> (generic of TECFIDERA) CPDR 240mg QL (60 caps / 30 days)	3	NDS QL NM PA
<i>dimethyl fumarate capsule dr starter pack 120 mg & 240 mg</i> (generic of TECFIDERA STARTER PACK) QL (2 packs / year)	3	NDS QL NM PA
<i> fingolimod hcl</i> (generic of GILENYA) CAPS .5mg QL (30 caps / 30 days)	3	NDS QL NM PA
GILENYA CAPS .25mg QL (30 caps / 30 days)	3	NDS QL NM PA
<i>glatiramer acetate</i> (generic of COPAXONE) SOSY 20mg/ml QL (30 syringes / 30 days)	3	NDS QL NM PA
<i>glatiramer acetate</i> (generic of COPAXONE) SOSY 40mg/ml QL (12 syringes / 28 days)	3	NDS QL NM PA
<i>glatopa</i> (generic of COPAXONE) SOSY 20mg/ml QL (30 syringes / 30 days)	3	NDS QL NM PA
<i>glatopa</i> (generic of COPAXONE) SOSY 40mg/ml QL (12 syringes / 28 days)	3	NDS QL NM PA
MAVENCLAD (4 TABS) TBPK 10mg QL (16 tabs per lifetime)	3	NDS QL NM PA
MAVENCLAD (5 TABS) TBPK 10mg QL (20 tabs per lifetime)	3	NDS QL NM PA
MAVENCLAD (6 TABS) TBPK 10mg QL (24 tabs per lifetime)	3	NDS QL NM PA
MAVENCLAD (7 TABS) TBPK 10mg QL (28 tabs per lifetime)	3	NDS QL NM PA
MAVENCLAD (8 TABS) TBPK 10mg QL (32 tabs per lifetime)	3	NDS QL NM PA
MAVENCLAD (9 TABS) TBPK 10mg QL (36 tabs per lifetime)	3	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
MAVENCLAD (10 TABS) TBPk 10mg QL (40 tabs per lifetime)	3	NDS QL NM PA
MAYZENT TABS 1mg, 2mg QL (30 tabs / 30 days)	3	NDS QL NM PA
MAYZENT TABS .25mg QL (112 tabs / 28 days)	3	NDS QL NM PA
MAYZENT STARTER PACK (7) TBPk .25mg QL (2 packs / year)	3	NDS QL NM PA
MAYZENT STARTER PACK (12) TBPk .25mg QL (2 packs / year)	3	NDS QL NM PA
OCREVUS SOLN 300mg/10ml	3	NDS NM PA
OCREVUS INJ ZUNOVO QL (23 mL / 180 days)	3	NDS QL NM PA
PLEGRIDY SOAJ 125mcg/0.5ml QL (2 pens / 28 days)	3	NDS QL NM PA
PLEGRIDY SOSY 125mcg/0.5ml QL (2 syringes / 28 days)	3	NDS QL NM PA
PLEGRIDY INJ STARTER QL (2 packs / year)	3	NDS QL NM PA
PLEGRIDY PEN INJ STARTER QL (2 packs / year)	3	NDS QL NM PA
PONVORY TABS 20mg QL (30 tabs / 30 days)	3	NDS QL NM PA
PONVORY TAB STARTER QL (2 packs / year)	3	NDS QL NM PA
TASCENSO ODT TBPk .25mg, .5mg QL (30 tabs / 30 days)	3	NDS QL NM PA
<i>teriflunomide</i> (generic of AUBAGIO) TABS 7mg, 14mg QL (30 tabs / 30 days)	3	NDS QL NM PA
VUMERITY CPDR 231mg QL (120 caps / 30 days)	3	NDS QL NM PA
ZEPOSIA CAPS .92mg QL (30 caps / 30 days)	3	NDS QL NM PA
ZEPOSIA 7DAY CAP STR PACK QL (2 packs / year)	3	NDS QL NM PA
ZEPOSIA CAP STR KIT QL (2 packs / year)	3	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
MUSCULOSKELETAL THERAPY AGENTS		
<i>baclofen</i> SOLN 5mg/5ml	1	PA
<i>baclofen</i> (generic of OZOBAX DS) SOLN 10mg/5ml	1	PA
<i>baclofen</i> (generic of FLEQSUVY) SUSP 25mg/5ml	3	NDS PA
<i>baclofen</i> TABS 5mg QL (90 tabs / 30 days)	1	QL
<i>baclofen</i> TABS 10mg, 15mg, 20mg	1	
BOTOX SOLR 100unit, 200unit	3	NDS PA
<i>carisoprodol</i> (generic of SOMA) TABS 350mg QL (120 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
<i>cyclobenzaprine hcl</i> TABS 5mg, 10mg QL (90 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
<i>dantrolene sodium</i> (generic of DANTRIUM) CAPS 25mg	1	
<i>dantrolene sodium</i> CAPS 50mg, 100mg	1	
DAXXIFY SOLR 100unit	3	NM PA
DYSPORT SOLR 300unit	3	NM PA
DYSPORT SOLR 500unit	3	NDS NM PA
<i>metaxalone</i> TABS 800mg QL (120 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	3	QL PA
<i>methocarbamol</i> TABS 500mg QL (360 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
<i>methocarbamol</i> TABS 750mg QL (240 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
MYOBLOC SOLN 2500unit/0.5ml, 5000unit/ml	3	NM PA	BRIXADI SOSY 8mg/0.16ml, 16mg/0.32ml, 24mg/0.48ml, 32mg/0.64ml, 64mg/0.18ml, 96mg/0.27ml, 128mg/0.36ml	3	NDS NM
MYOBLOC SOLN 10000unit/2ml	3	NDS NM PA	<i>buprenorphine hcl</i> SUBL 2mg QL (180 tabs / 30 days)	1	QL
<i>tizanidine hcl</i> CAPS 2mg, 4mg, 6mg; TABS 2mg	1		<i>buprenorphine hcl</i> SUBL 8mg QL (120 tabs / 30 days)	1	QL
<i>tizanidine hcl</i> (generic of ZANAFLEX) TABS 4mg	1		<i>buprenorphine hcl-naloxone</i> <i>hcl sl film 2-0.5 mg (base</i> <i>equiv)</i> (generic of SUBOXONE) QL (180 films / 30 days)	1	QL
XEOMIN SOLR 50unit	3	NM PA	<i>buprenorphine hcl-naloxone</i> <i>hcl sl film 4-1 mg (base equiv)</i> (generic of SUBOXONE) QL (90 films / 30 days)	1	QL
XEOMIN SOLR 100unit, 200unit	3	NDS NM PA	<i>buprenorphine hcl-naloxone</i> <i>hcl sl film 8-2 mg (base equiv)</i> (generic of SUBOXONE) QL (120 films / 30 days)	1	QL
ZANAFLEX CAPS 8mg	3	NDS	<i>buprenorphine hcl-naloxone</i> <i>hcl sl film 12-3 mg (base</i> <i>equiv)</i> (generic of SUBOXONE) QL (90 films / 30 days)	1	QL
NARCOLEPSY/CATAPLEXY			<i>buprenorphine hcl-naloxone</i> <i>hcl sl tab 2-0.5 mg (base</i> <i>equiv)</i> QL (180 tabs / 30 days)	1	QL
<i>armodafinil</i> (generic of NUVIGIL) TABS 50mg QL (60 tabs / 30 days)	1	QL PA	<i>buprenorphine hcl-naloxone</i> <i>hcl sl tab 8-2 mg (base equiv)</i> QL (120 tabs / 30 days)	1	QL
<i>armodafinil</i> (generic of NUVIGIL) TABS 150mg, 200mg, 250mg QL (30 tabs / 30 days)	1	QL PA	<i>bupropion hcl (smoking</i> <i>deterrent)</i> TB12 150mg QL (60 tabs / 30 days)	1	QL
LUMRYZ PACK 4.5gm, 6gm, 7.5gm, 9gm QL (30 packets / 30 days)	3	NDS QL NM PA	<i>disulfiram</i> TABS 250mg, 500mg	1	
LUMRYZ PAK STARTER QL (2 packs / year)	3	NDS QL NM PA	KLOXXADO LIQD 8mg/0.1ml	2	
<i>modafinil</i> (generic of PROVIGIL) TABS 100mg QL (30 tabs / 30 days)	1	QL PA	<i>lofexidine hcl</i> (generic of LUCEMYRA) TABS .18mg QL (228 tabs / 14 days)	3	NDS QL PA
<i>modafinil</i> (generic of PROVIGIL) TABS 200mg QL (60 tabs / 30 days)	1	QL PA	<i>naloxone hcl</i> LIQD 4mg/0.1ml; SOCT .4mg/ml; SOLN .4mg/ml, 4mg/10ml; SOSY .4mg/ml, 2mg/2ml	1	
<i>sodium oxybate</i> SOLN 500mg/ml QL (540 mL / 30 days)	3	NDS QL NM PA	<i>naltrexone hcl</i> TABS 50mg	1	
SUNOSI TABS 75mg, 150mg QL (30 tabs / 30 days)	3	QL PA			
WAKIX TABS 4.45mg, 17.8mg QL (60 tabs / 30 days)	3	NDS QL NM PA			
XYREM SOLN 500mg/ml QL (540 mL / 30 days)	3	NDS QL NM PA			
XYWAV SOL 0.5GM/ML QL (540 mL / 30 days)	3	NDS QL NM PA			
PSYCHOTHERAPEUTIC-MISC					
<i>acamprosate calcium</i> TBEC 333mg	1				

Drug Name	Drug Requirements/ Tier	Limits
NICOTROL NS SOLN 10mg/ml	3	
OPVEE SOLN 2.7mg/0.1ml	3	
REXTOVY LIQD 4mg/0.25ml	3	
SUBLOCADE SOSY 100mg/0.5ml, 300mg/1.5ml	3	NDS NM
<i>varenicline tartrate</i> (generic of CHANTIX) TABS .5mg, 1mg QL (56 tabs / 28 days)	1	QL
<i>varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack</i> QL (2 packs / year)	1	QL
VIVITROL SUSR 380mg	3	NDS NM
ZUBSOLV SUB 0.7-0.18 QL (90 tabs / 30 days)	3	QL
ZUBSOLV SUB 1.4-0.36 QL (90 tabs / 30 days)	3	QL
ZUBSOLV SUB 2.9-0.71 QL (90 tabs / 30 days)	3	QL
ZUBSOLV SUB 5.7-1.4 QL (90 tabs / 30 days)	3	QL
ZUBSOLV SUB 8.6-2.1 QL (60 tabs / 30 days)	3	QL
ZUBSOLV SUB 11.4-2.9 QL (30 tabs / 30 days)	3	QL
ZURNAI SOAJ 1.5mg/0.5ml	3	
ENDOCRINE AND METABOLIC		
ANDROGENS		
AVEED SOLN 750mg/3ml	3	NDS NM PA
AZMIRO SOSY 200mg/ml	3	PA
<i>danazol</i> CAPS 50mg, 100mg, 1 200mg	1	PA
<i>depo-testosterone</i> SOLN 100mg/ml, 200mg/ml	1	PA
JATENZO CAPS 158mg, 198mg QL (120 caps / 30 days)	3	QL PA
JATENZO CAPS 237mg QL (60 caps / 30 days)	3	NDS QL PA
<i>testosterone</i> GEL 1%, 25mg/2.5gm, 50mg/5gm QL (300 gm / 30 days)	1	QL PA
<i>testosterone</i> GEL 20.25mg/1.25gm, 40.5mg/2.5gm QL (150 gm / 30 days)	1	QL PA
<i>testosterone</i> SOLN 30mg/act QL (180 mL / 30 days)	1	QL PA

Drug Name	Drug Requirements/ Tier	Limits
<i>testosterone cypionate</i> SOLN 1 100mg/ml, 200mg/ml	1	PA
<i>testosterone enanthate</i> SOLN 1 200mg/ml	1	PA
<i>testosterone pump</i> (generic of ANDROGEL PUMP) GEL 1.62% QL (150 gm / 30 days)	1	QL PA
TLANDO CAPS 112.5mg QL (120 caps / 30 days)	3	QL PA
XYOSTED SOAJ 50mg/0.5ml, 75mg/0.5ml, 100mg/0.5ml	3	PA
ANTIDIABETICS		
<i>acarbose</i> TABS 25mg, 50mg, 1 100mg	1	
<i>dapagliflozin propanediol</i> TABS 5mg, 10mg QL (30 tabs / 30 days)	2	QL
FARXIGA TABS 5mg, 10mg QL (30 tabs / 30 days)	2	QL
<i>glimepiride</i> TABS 1mg, 2mg QL (90 tabs / 30 days)	1	QL
<i>glimepiride</i> TABS 4mg QL (60 tabs / 30 days)	1	QL
<i>glipizide</i> TABS 5mg QL (240 tabs / 30 days)	1	QL
<i>glipizide</i> TABS 10mg QL (120 tabs / 30 days)	1	QL
<i>glipizide</i> TB24 2.5mg QL (90 tabs / 30 days)	1	QL
<i>glipizide</i> (generic of GLUCOTROL XL) TB24 5mg QL (90 tabs / 30 days)	1	QL
<i>glipizide</i> TB24 10mg QL (60 tabs / 30 days)	1	QL
<i>glipizide-metformin hcl tab</i> 2.5-250 mg QL (240 tabs / 30 days)	1	QL
<i>glipizide-metformin hcl tab</i> 2.5-500 mg QL (120 tabs / 30 days)	1	QL
<i>glipizide-metformin hcl tab 5- 500 mg</i> QL (120 tabs / 30 days)	1	QL
GLYXAMBI TAB 10-5 MG QL (30 tabs / 30 days)	2	QL

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
GLYXAMBI TAB 25-5 MG QL (30 tabs / 30 days)	2	QL	<i>metformin hcl</i> TB24 750mg QL (60 tabs / 30 days) (generic of GLUCOPHAGE XR)	1	QL
JANUMET TAB 50-500MG QL (60 tabs / 30 days)	2	QL	<i>migliol</i> TABS 25mg, 50mg, 100mg	1	
JANUMET TAB 50-1000 QL (60 tabs / 30 days)	2	QL	MOUNJARO SOAJ 2.5mg/0.5ml, 5mg/0.5ml, 7.5mg/0.5ml, 10mg/0.5ml, 12.5mg/0.5ml, 15mg/0.5ml QL (4 pens / 28 days)	2	QL PA
JANUMET XR TAB 50- 500MG QL (60 tabs / 30 days)	2	QL	<i>nateglinide</i> TABS 60mg, 120mg QL (90 tabs / 30 days)	1	QL
JANUMET XR TAB 50-1000 QL (60 tabs / 30 days)	2	QL	OZEMPIC (0.25 OR 0.5MG/DOSE) SOPN 2mg/3ml QL (1 pen / 28 days)	2	QL PA
JANUMET XR TAB 100-1000 QL (30 tabs / 30 days)	2	QL	OZEMPIC (1MG/DOSE) SOPN 4mg/3ml QL (1 pen / 28 days)	2	QL PA
JANUVIA TABS 25mg, 50mg, 2 100mg QL (30 tabs / 30 days)	2	QL	OZEMPIC (2MG/DOSE) SOPN 8mg/3ml QL (1 pen / 28 days)	2	QL PA
JARDIANCE TABS 10mg, 25mg QL (30 tabs / 30 days)	2	QL	<i>pioglitazone hcl</i> (generic of ACTOS) TABS 15mg, 30mg, 45mg QL (30 tabs / 30 days)	1	QL
JENTADUETO TAB 2.5-500 QL (60 tabs / 30 days)	2	QL	<i>pioglitazone hcl-glimepiride tab 30-2 mg</i> (generic of DUETACT) QL (30 tabs / 30 days)	1	QL
JENTADUETO TAB 2.5-850 QL (60 tabs / 30 days)	2	QL	<i>pioglitazone hcl-glimepiride tab 30-4 mg</i> (generic of DUETACT) QL (30 tabs / 30 days)	1	QL
JENTADUETO TAB 2.5-1000 QL (60 tabs / 30 days)	2	QL	<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i> QL (90 tabs / 30 days)	1	QL
JENTADUETO TAB XR 2.5- 1000MG QL (60 tabs / 30 days)	2	QL	<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i> (generic of ACTOPLUS MET) QL (90 tabs / 30 days)	1	QL
JENTADUETO TAB XR 5- 1000MG QL (30 tabs / 30 days)	2	QL	<i>repaglinide</i> TABS 2mg QL (240 tabs / 30 days)	1	QL
<i>liraglutide</i> (generic of VICTOZA) SOPN 6mg/ml QL (3 pens / 30 days)	1	QL PA	<i>repaglinide</i> TABS .5mg, 1mg QL (120 tabs / 30 days)	1	QL
<i>metformin hcl</i> (generic of RIOMET) SOLN 500mg/5ml QL (765 mL / 30 days)	1	QL ST			
<i>metformin hcl</i> TABS 500mg QL (150 tabs / 30 days)	1	QL			
<i>metformin hcl</i> TABS 850mg QL (90 tabs / 30 days)	1	QL			
<i>metformin hcl</i> TABS 1000mg QL (75 tabs / 30 days)	1	QL			
<i>metformin hcl</i> TB24 500mg QL (120 tabs / 30 days) (generic of GLUCOPHAGE XR)	1	QL			

Drug Name	Drug Requirements/ Tier	Limits
RYBELSUS TABS 3mg, 7mg, 14mg	2	QL PA
QL (30 tabs / 30 days)		
SYMLINPEN 60 SOPN 1500mcg/1.5ml	3	NDS PA
SYMLINPEN 120 SOPN 2700mcg/2.7ml	3	NDS PA
SYNJARDY TAB 5-500MG	2	QL
QL (120 tabs / 30 days)		
SYNJARDY TAB 5-1000MG	2	QL
QL (60 tabs / 30 days)		
SYNJARDY TAB 12.5-500	2	QL
QL (60 tabs / 30 days)		
SYNJARDY TAB 12.5-1000MG	2	QL
QL (60 tabs / 30 days)		
SYNJARDY XR TAB 5-1000MG	2	QL
QL (60 tabs / 30 days)		
SYNJARDY XR TAB 10-1000	2	QL
QL (60 tabs / 30 days)		
SYNJARDY XR TAB 12.5-1000	2	QL
QL (60 tabs / 30 days)		
SYNJARDY XR TAB 25-1000	2	QL
QL (30 tabs / 30 days)		
TRADJENTA TABS 5mg	2	QL
QL (30 tabs / 30 days)		
TRIJARDY XR TAB ER 24HR 5-2.5-1000MG	2	QL
QL (60 tabs / 30 days)		
TRIJARDY XR TAB ER 24HR 10-5-1000MG	2	QL
QL (30 tabs / 30 days)		
TRIJARDY XR TAB ER 24HR 12.5-2.5-1000MG	2	QL
QL (60 tabs / 30 days)		
TRIJARDY XR TAB ER 24HR 25-5-1000MG	2	QL
QL (30 tabs / 30 days)		
TRULICITY SOAJ .75mg/0.5ml, 1.5mg/0.5ml, 3mg/0.5ml, 4.5mg/0.5ml	2	QL PA
QL (4 pens / 28 days)		
TZIELD SOLN 2mg/2ml	3	NDS NM PA
XIGDUO XR TAB 2.5-1000	2	QL
QL (60 tabs / 30 days)		

Drug Name	Drug Requirements/ Tier	Limits
XIGDUO XR TAB 5-500MG	2	QL
QL (60 tabs / 30 days)		
XIGDUO XR TAB 5-1000MG	2	QL
QL (60 tabs / 30 days)		
XIGDUO XR TAB 10-500MG	2	QL
QL (30 tabs / 30 days)		
XIGDUO XR TAB 10-1000	2	QL
QL (30 tabs / 30 days)		
ANTIDIABETICS, INSULINS		
ADMELOG SOLN 100unit/ml	2	B/D
ADMELOG SOLOSTAR SOPN 100unit/ml	2	
ALCOHOL SWABS:	2	PA
EMBECTA-BD/MHC/RUGBY		
CEQUR SIMPL KIT PATCH 2U (3-DAY)	3	QL PA
QL (10 patches / 30 days)		
CEQUR SIMPL KIT PATCH 2U (4-DAY)	3	QL PA
QL (8 patches / 24 days)		
CEQUR SIMPL MIS INSERTER	3	QL PA
QL (2 inserters / year)		
FIASP SOLN 100unit/ml	2	B/D
FIASP FLEXTOUCH SOPN 100unit/ml	2	
FIASP PENFILL SOCT 100unit/ml	2	
FIASP PUMPCART SOCT 100unit/ml	2	B/D
GAUZE PADS 2X2	2	PA
HUMULIN R U-500 (CONCENTR SOLN 500unit/ml)	3	NDS B/D
HUMULIN R U-500 KWIKPEN SOPN 500unit/ml	3	NDS
INSULIN PEN NEEDLES:	2	PA
EMBECTA-BD		
INSULIN SAFETY NEEDLES:	2	PA
EMBECTA-BD		
INSULIN SYRINGES:	2	PA
EMBECTA-BD		
LANTUS SOLN 100unit/ml	2	
LANTUS SOLOSTAR SOPN 100unit/ml	2	

Drug Name	Drug Requirements/ Tier	Limits
NOVOLIN INJ 70/30 (brand RELION not covered)	2	
NOVOLIN INJ 70/30 FP (brand RELION not covered)	2	
NOVOLIN N SUSP 100unit/ml (brand RELION not covered)	2	
NOVOLIN N FLEXPEN SOPN 100unit/ml (brand RELION not covered)	2	
NOVOLIN R SOLN 100unit/ml (brand RELION not covered)	2	B/D
NOVOLIN R FLEXPEN SOPN 100unit/ml (brand RELION not covered)	2	
NOVOLOG SOLN 100unit/ml	2	B/D
NOVOLOG FLEXPEN SOPN 100unit/ml	2	
NOVOLOG FLEXPEN RELION SOPN 100unit/ml	2	
NOVOLOG MIX INJ 70/30 (brand RELION not covered)	2	
NOVOLOG MIX INJ FLEXPEN (brand RELION not covered)	2	
NOVOLOG PENFILL SOCT 100unit/ml	2	
NOVOLOG RELION SOLN 100unit/ml	2	B/D
OMNIPOD 5 DX KIT INT G7G6 QL (1 kit / year)	3	QL PA
OMNIPOD 5 DX MIS POD G7G6 QL (15 pods / 30 days)	3	QL PA
OMNIPOD 5 L2 KIT INTRO G6 QL (1 kit / year)	3	QL PA

Drug Name	Drug Requirements/ Tier	Limits
OMNIPOD 5 L2 MIS PODS G6 QL (15 pods / 30 days)	3	QL PA
OMNIPOD DASH KIT INTRO QL (1 kit / year)	3	QL PA
OMNIPOD DASH MIS PODS QL (15 pods / 30 days)	3	QL PA
SOLIQUA INJ 100/33 QL (5 pens / 25 days)	2	QL
TOUJEO MAX SOLOSTAR SOPN 300unit/ml	2	
TOUJEO SOLOSTAR SOPN 300unit/ml	2	
XULTOPHY INJ 100/3.6 QL (5 pens / 30 days)	2	QL
CALCIUM REGULATORS		
<i>alendronate sodium</i> SOLN 70mg/75ml	1	ST
<i>alendronate sodium</i> TABS 10mg, 35mg	1	
<i>alendronate sodium</i> (generic of FOSAMAX) TABS 70mg	1	
BILDYOS SOSY 60mg/ml QL (1 syringe / 180 days)	3	QL NM
BINOSTO TBEF 70mg	3	ST
BONSITY SOPN 560mcg/2.24ml QL (1 pen / 28 days)	3	NDS QL NM PA
<i>calcitonin (salmon) spray</i> SOLN 200unit/act	1	B/D
EVENITY SOSY 105mg/1.17ml	3	NDS NM PA
FOSAMAX + D TAB 70-2800	3	ST
FOSAMAX + D TAB 70-5600	3	ST
<i>ibandronate sodium</i> SOLN 3mg/3ml QL (1 injection / 90 days)	1	B/D QL
<i>ibandronate sodium</i> TABS 150mg	1	B/D
OSPOMYV SOSY 60mg/ml QL (1 syringe / 180 days)	3	QL NM
PAMIDRONATE DISODIUM SOLN 6mg/ml	2	B/D
<i>pamidronate disodium</i> SOLN 30mg/10ml, 90mg/10ml	1	B/D

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
PROLIA SOSY 60mg/ml QL (1 syringe / 180 days)	3	QL NM
<i>risedronate sodium</i> TABS 5mg, 30mg	1	
<i>risedronate sodium</i> (generic of ACTONEL) TABS 35mg, 150mg	1	
<i>risedronate sodium</i> (generic of ATELVIA) TBEC 35mg	1	ST
TERIPARATIDE SOPN 560mcg/2.24ml QL (1 pen / 28 days) (ALVOGEN product)	3	NDS QL NM PA
<i>teriparatide</i> (generic of FORTEO) SOPN 560mcg/2.24ml QL (1 pen / 28 days)	3	NDS QL NM PA
TYMLOS SOPN 3120mcg/1.56ml QL (1 pen / 30 days)	3	NDS QL NM PA
WYOST SOLN 120mg/1.7ml	3	NDS NM PA
XTRENBO SOLN 120mg/1.7ml	3	PA
YORVIPATH SOPN 168mcg/0.56ml, 294mcg/0.98ml, 420mcg/1.4ml	3	NDS NM PA
<i>zoledronic acid</i> CONC 4mg/5ml	1	B/D NM
ZOLEDRONIC ACID SOLN 4mg/100ml	3	B/D NM
<i>zoledronic acid</i> (generic of RECLAST) SOLN 5mg/100ml	1	B/D NM
CHELATING AGENTS		
CHEMET CAPS 100mg	3	NDS
CUVRIOR TABS 300mg	3	NDS NM PA
<i>deferasirox</i> (generic of JADENU SPRINKLE) PACK 90mg, 180mg, 360mg	3	NDS NM PA
<i>deferasirox</i> (generic of JADENU) TABS 90mg	1	NM PA
<i>deferasirox</i> (generic of JADENU) TABS 180mg, 360mg	3	NM PA
<i>deferasirox</i> (generic of EXJADE) TBSO 125mg	1	NM PA

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>deferasirox</i> (generic of EXJADE) TBSO 250mg, 500mg	3	NDS NM PA
<i>deferiprone</i> TABS 500mg	3	NDS NM PA
<i>deferiprone</i> (generic of FERRIPROX) TABS 1000mg	3	NDS NM PA
<i>deferoxamine mesylate</i> SOLR 2gm	1	NM PA
<i>deferoxamine mesylate</i> (generic of DESFERAL) SOLR 500mg	1	NM PA
FERRIPROX SOLN 100mg/ml	3	NDS NM PA
FERRIPROX TWICE-A-DAY TABS 1000mg	3	NDS NM PA
<i>kionex</i> SUSP 15gm/60ml	1	
LOKELMA PACK 5gm, 10gm	2	
<i>penicillamine</i> (generic of DEPEN TITRATABS) TABS 250mg	3	NDS NM
<i>sodium polystyrene sulfonate</i> powder	1	
<i>sps</i> SUSP 15gm/60ml	1	
<i>sps rectal</i> SUSP 15gm/60ml	1	
<i>trientine hcl</i> (generic of SYPRINE) CAPS 250mg	3	NDS NM PA
<i>trientine hcl</i> CAPS 500mg	3	NDS NM PA
VELTASSA PACK 1gm, 8.4gm, 16.8gm, 25.2gm	2	
CONTRACEPTIVES		
<i>afirmelle</i>	1	
<i>altavera</i>	1	
<i>alyacen 1/35</i>	1	
<i>alyacen 7/7/7</i>	1	
<i>amethyst</i>	1	
ANNOVERA MIS	3	
<i>apri</i>	1	
<i>aranelle</i>	1	
<i>ashlyna</i>	1	
<i>aubra eq</i>	1	
<i>aurovela 1/20</i>	1	
<i>aurovela 24 fe</i>	1	
<i>aurovela fe 1.5/30</i>	1	
<i>aurovela fe 1/20</i>	1	
AVERI TAB	3	
<i>aviane</i>	1	

Drug Name	Drug Requirements/ Tier Limits	Drug Name	Drug Requirements/ Tier Limits
<i>ayuna</i>	1	<i>etonogestrel-ethinyl estradiol</i>	1
<i>azurette</i>	1	<i>va ring 0.12-0.015 mg/24hr</i>	
<i>balziva</i>	1	(generic of NUVARING)	
<i>blisovi 24 fe</i>	1	<i>falmina</i>	1
<i>blisovi fe 1.5/30</i>	1	<i>feirza 1.5/30</i>	1
<i>briellyn</i>	1	<i>feirza 1/20</i>	1
<i>camila</i> TABS .35mg	1	FEMLYV TAB 1/0.02MG	3
<i>camrese</i>	1	<i>finzala</i>	1
<i>camrese lo</i>	1	<i>galbriela</i>	1
<i>chateal eq</i>	1	<i>gemmily</i> (generic of TAYTULLA)	1
<i>cryselle</i>	1	<i>hailey 1.5/30</i>	1
<i>cyred eq</i>	1	<i>hailey 24 fe</i>	1
<i>dasetta 1/35</i>	1	<i>haloette</i> (generic of NUVARING)	1
<i>dasetta 7/7/7</i>	1	<i>heather</i> TABS .35mg	1
<i>daysee</i>	1	<i>iclevia</i>	1
<i>deblitane</i> TABS .35mg	1	<i>incassia</i> TABS .35mg	1
DEPO-SUBQ PROVERA 104 SUSY 104mg/0.65ml	2	<i>introvale</i>	1
<i>desogest-eth estrad & eth</i>	1	<i>isibloom</i>	1
<i>estrad tab 0.15-0.02/0.01</i>		<i>jaimiess</i>	1
<i>mg(21/5)</i>		<i>jasmiel</i> (generic of YAZ)	1
<i>dolishale</i>	1	<i>jolessa</i>	1
<i>drospirenone-ethinyl estrad-</i>	1	<i>juleber</i>	1
<i>levomefolate tab 3-0.02-0.451</i>		<i>junel 1.5/30</i>	1
<i>mg (generic of BEYAZ)</i>		<i>junel 1/20</i>	1
<i>drospirenone-ethinyl estrad-</i>	1	<i>junel fe 1.5/30</i>	1
<i>levomefolate tab 3-0.03-0.451</i>		<i>junel fe 1/20</i>	1
<i>mg (generic of SAFYRAL)</i>		<i>junel fe 24</i>	1
<i>drospirenone-ethinyl estradiol</i>	1	<i>kaitlib fe</i>	1
<i>tab 3-0.02 mg (generic of</i>		<i>kariva</i>	1
<i>YAZ)</i>		<i>kelnor 1/35</i>	1
<i>drospirenone-ethinyl estradiol</i>	1	<i>kurvelo</i>	1
<i>tab 3-0.03 mg (generic of</i>		<i>larin 1.5/30</i>	1
<i>YASMIN 28)</i>		<i>larin 1/20</i>	1
<i>elinest</i>	1	<i>larin 24 fe</i>	1
<i>eluryng</i> (generic of NUVARING)	1	<i>larin fe 1.5/30</i>	1
<i>emzahh</i> TABS .35mg	1	<i>larin fe 1/20</i>	1
<i>enilloring</i> (generic of NUVARING)	1	<i>lessina</i>	1
<i>enskyce</i>	1	<i>levonest</i>	1
<i>errin</i> TABS .35mg	1	<i>levonor-eth est tab 0.15-</i>	1
<i>estarylla</i>	1	<i>0.02/0.025/0.03 mg &eth est</i>	
<i>ethynodiol diacetate & ethinyl</i>	1	<i>0.01 mg</i>	
<i>estradiol tab 1 mg-50 mcg</i>			

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	1	
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	1	
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	1	
<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i>	1	
<i>levora 0.15/30-28</i>	1	
LILETTA IUD 20.1mcg/day	2	NM
LO LOESTRIN TAB 1-10-10	3	
<i>loestrin 1.5/30-21</i>	1	
<i>loestrin 1/20-21</i>	1	
<i>loestrin fe 1.5/30</i>	1	
<i>loestrin fe 1/20</i>	1	
<i>lojaimiess</i>	1	
<i>loryna (generic of YAZ)</i>	1	
<i>low-ogestrel</i>	1	
<i>luizza 1.5/30</i>	1	
<i>luizza 1/20</i>	1	
<i>lutura</i>	1	
<i>lyleq TABS .35mg</i>	1	
<i>lyza TABS .35mg</i>	1	
<i>marlissa</i>	1	
<i>medroxyprogesterone acetate (contraceptive) (generic of DEPO-PROVERA CONTRACEPTIV) SUSP 150mg/ml; SUSY 150mg/ml</i>	1	
<i>meleya TABS .35mg</i>	1	
<i>merzee (generic of TAYTULLA)</i>	1	
<i>mibelas 24 fe</i>	1	
<i>microgestin 1.5/30</i>	1	
<i>microgestin 1/20</i>	1	
<i>microgestin fe 1.5/30</i>	1	
<i>microgestin fe 1/20</i>	1	
<i>mili</i>	1	
<i>mono-linyah</i>	1	

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
NATAZIA TAB	3	
<i>necon 0.5/35-28</i>	1	
NEXPLANON IMPL 68mg	2	NM
NEXTSTELLIS TAB 3-14.2MG	3	
<i>nikki (generic of YAZ)</i>	1	
<i>nora-be TABS .35mg</i>	1	
<i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</i>	1	
<i>norethindrone (contraceptive) TABS .35mg</i>	1	
<i>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	1	
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>	1	
<i>norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24) (generic of TAYTULLA)</i>	1	
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	1	
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	1	
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	1	
<i>norlyroc TABS .35mg</i>	1	
<i>nortrel 0.5/35 (28)</i>	1	
<i>nortrel 1/35 (21)</i>	1	
<i>nortrel 1/35 (28)</i>	1	
<i>nortrel 7/7/7</i>	1	
<i>nylia 1/35</i>	1	
<i>nylia 7/7/7</i>	1	
<i>orquidea TABS .35mg</i>	1	
PHEXX GEL	3	
PHEXXI GEL	3	
<i>philith</i>	1	

Drug Name	Drug Requirements/ Tier Limits
<i>pimtree</i>	1
<i>portia-28</i>	1
<i>reclipsen</i>	1
<i>rivelsa</i>	1
<i>rosyrah</i>	1
<i>setlakin</i>	1
<i>sharobel</i> TABS .35mg	1
<i>simliya</i>	1
<i>simpesse</i>	1
<i>sprintec 28</i>	1
<i>sronyx</i>	1
<i>syeda</i> (generic of YASMIN 28)	1
<i>tarina 24 fe</i>	1
<i>tarina fe 1/20 eq</i>	1
<i>tilia fe</i>	1
<i>tri-estarylla</i>	1
<i>tri-legest fe</i>	1
<i>tri-lynyah</i>	1
<i>tri-lo-estarylla</i>	1
<i>tri-lo-marzia</i>	1
<i>tri-lo-mili</i>	1
<i>tri-lo-sprintec</i>	1
<i>tri-mili</i>	1
<i>tri-sprintec</i>	1
<i>tri-vylibra</i>	1
<i>tri-vylibra lo</i>	1
<i>turqoz</i>	1
<i>tydemy</i> (generic of SAFYRAL)	1
<i>valtya 1/35</i>	1
<i>valtya 1/50</i>	1
<i>velivet</i>	1
<i>vestura</i> (generic of YAZ)	1
<i>vienva</i>	1
<i>viorele</i>	1
<i>vyfemla</i>	1
<i>vylibra</i>	1
<i>wera</i>	1
<i>wymzya fe</i>	1
<i>xarah fe</i>	1
<i>xelria fe</i>	1
<i>xulane</i>	1
<i>zafemy</i>	1
<i>zovia 1/35</i>	1

Drug Name	Drug Requirements/ Tier Limits
<i>zumandimine</i> (generic of YASMIN 28)	1
ESTROGENS	
<i>abigale</i> (generic of ACTIVELLA)	2
<i>abigale lo</i>	2
BIJUVA CAP 0.5-100	3
BIJUVA CAP 1-100MG	3
CLIMARA PRO DIS WEEKLY	3
COMBIPATCH DIS	3
DEPO-ESTRADIOL OIL 5mg/ml	3
<i>dotti</i> (generic of VIVELLE-DOT) PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr	2
ELESTRIN GEL .06%	3
<i>estradiol</i> (generic of ESTROGEL) GEL .06%	3
<i>estradiol</i> (generic of DIVIGEL) GEL .25mg/0.25gm, .5mg/0.5gm, .75mg/0.75gm, 1mg/gm, 1.25mg/1.25gm	3
<i>estradiol</i> (generic of VIVELLE-DOT) PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr	2
<i>estradiol</i> (generic of CLIMARA) PTWK .025mg/24hr, .05mg/24hr, .06mg/24hr, .075mg/24hr, .1mg/24hr, 37.5mcg/24hr	2
<i>estradiol</i> TABS .5mg, 1mg, 2mg	1
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	2
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i> (generic of ACTIVELLA)	2
<i>estradiol vaginal</i> (generic of ESTRACE) CREA .1mg/gm	1
<i>estradiol vaginal</i> (generic of VAGIFEM) TABS 10mcg	1
<i>estradiol valerate</i> (generic of DELESTROGEN) OIL 10mg/ml, 20mg/ml	1
<i>estradiol valerate</i> OIL 40mg/ml	1

Drug Name	Drug Requirements/ Tier Limits		Drug Name	Drug Requirements/ Tier Limits	
ESTRING RING 7.5mcg/24hr	3		<i>betamethasone sod phosphate & acetate inj susp</i>	1	
<i>estrogens, conjugated</i> (generic of PREMARIN) TABS .3mg, .45mg, .625mg, .9mg, 1.25mg	2		6 (3-3) mg/ml (generic of CELESTONE SOLUSPAN)		
EVAMIST SOLN	3		DEPO-MEDROL SUSP	3	B/D
1.53mg/spray			20mg/ml		
FEMRING RING .05mg/24hr, .1mg/24hr	3		<i>dexamethasone</i> ELIX	1	
<i>fyavolv tab 0.5mg-2.5mcg</i>	2		.5mg/5ml; SOLN .5mg/5ml; TABS .5mg, .75mg, 1mg, 1.5mg, 2mg, 4mg, 6mg		
<i>fyavolv tab 1mg-5mcg</i>	2		DEXAMETHASONE	3	
IMVEXXY MAINTENANCE PACK INST 4mcg, 10mcg	3	PA	INTENSOL CONC 1mg/ml		
IMVEXXY STARTER PACK INST 4mcg, 10mcg	3	PA	<i>dexamethasone sodium phosphate</i> SOLN 4mg/ml, 10mg/ml, 20mg/5ml, 100mg/10ml, 120mg/30ml; SOSY 4mg/ml, 10mg/ml	1	
<i>jinteli</i>	2		<i>fludrocortisone acetate</i> TABS	1	
<i>lyllana</i> (generic of MINIVELLE) PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr	2		.1mg		
MENEST TABS 1.25mg, 2.5mg	3		HEMADY TABS 20mg	3	PA
MENOSTAR PTWK 14mcg/24hr	3		<i>hydrocortisone</i> (generic of CORTEF) TABS 5mg, 10mg, 20mg	1	
<i>mimvey</i> (generic of ACTIVELLA)	2		<i>hydrocortisone sod succinate</i> (generic of SOLU-CORTEF) SOLR 100mg	1	
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	2		KENALOG-10 SUSP	3	B/D
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	2		10mg/ml		
PREMARIN CREA .625mg/gm; SOLR 25mg	3		KENALOG-80 SUSP	3	B/D
PREMARIN TABS .3mg, .45mg, .625mg, .9mg, 1.25mg	2		80mg/ml		
PREMPHASE TAB	2		KHINDIVI SOLN 1mg/ml	3	NDS PA
PREMPRO TAB 0.3-1.5	2		MEDROL TABS 2mg	3	B/D
PREMPRO TAB 0.45-1.5	2		<i>methylprednisolone</i> (generic of MEDROL) TABS 4mg, 8mg, 16mg	1	B/D
PREMPRO TAB 0.625-2.5	2		<i>methylprednisolone</i> TABS	1	B/D
PREMPRO TAB 0.625-5	2		32mg		
<i>yuvaferm</i> (generic of VAGIFEM) TABS 10mcg	1		<i>methylprednisolone</i> (generic of MEDROL DOSEPAK) TBPk 4mg	1	
GLUCOCORTICOIDS			<i>methylprednisolone acetate</i> (generic of DEPO-MEDROL) SUSP 40mg/ml, 80mg/ml	1	B/D
ALKINDI SPRINKLE CPSP	3	NDS NM PA	<i>methylprednisolone sod succ</i> SOLR 40mg, 125mg	1	B/D
1mg, 2mg, 5mg			<i>methylprednisolone sod succ</i> (generic of SOLU-MEDROL) SOLR 500mg, 1000mg	1	B/D
ALKINDI SPRINKLE CPSP	3	NM PA			
.5mg					

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>prednisolone</i> SOLN 15mg/5ml	1	B/D
<i>prednisolone sodium phosphate</i> SOLN 5mg/5ml, 15mg/5ml, 25mg/5ml	1	B/D
<i>prednisone</i> SOLN 5mg/5ml; TABS 1mg, 2.5mg, 5mg, 10mg, 20mg, 50mg	1	B/D
<i>prednisone</i> TBPK 5mg, 10mg	1	
PREDNISON INTENSOL CONC 5mg/ml	3	B/D
SOLU-CORTEF SOLR 250mg, 500mg, 1000mg	3	
SOLU-MEDROL SOLR 2gm, 40mg, 125mg, 500mg, 1000mg	3	B/D
<i>triamcinolone acetonide</i> (generic of KENALOG-10) SUSP 10mg/ml	1	B/D
<i>triamcinolone acetonide</i> (generic of KENALOG-40) SUSP 40mg/ml	1	B/D
ZILRETTA SRER 32mg	3	B/D NM
GLUCOSE ELEVATING AGENTS		
<i>diazoxide</i> (generic of PROGLYCEM) SUSP 50mg/ml	3	NDS
ZEGALOGUE SOAJ .6mg/0.6ml; SOSY .6mg/0.6ml	2	
MISCELLANEOUS		
ALDURAZYME SOLN 2.9mg/5ml	3	NDS NM PA
AQNEURSA PACK 1gm QL (112 packets / 28 days)	3	NDS QL NM PA
<i>betaine powder for oral solution</i> (generic of CYSTADANE)	3	NDS NM
BYNFEZIA PEN SOPN 2500mcg/ml	3	NDS PA
<i>cabergoline</i> TABS .5mg	1	
<i>carglumic acid</i> (generic of CARBAGLU) TBSO 200mg	3	NDS NM PA
CERDELGA CAPS 84mg	3	NDS NM PA
CEREZYME SOLR 400unit	3	NDS NM PA
CHORIONIC GONADOTROPIN SOLR 10000unit	3	NM PA

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>cinacalcet hcl</i> (generic of SENSIPAR) TABS 30mg, 60mg QL (60 tabs / 30 days)	1	B/D QL NM
<i>cinacalcet hcl</i> (generic of SENSIPAR) TABS 90mg QL (120 tabs / 30 days)	1	B/D QL NM
CRENESSITY CAPS 25mg, 50mg, 100mg QL (60 caps / 30 days)	3	NDS QL NM PA
CRENESSITY SOLN 50mg/ml QL (120 mL / 30 days)	3	NDS QL NM PA
CRYSVITA SOLN 10mg/ml, 20mg/ml, 30mg/ml	3	NDS NM PA
CYSTAGON CAPS 50mg, 150mg	3	NM PA
<i>desmopressin acetate</i> (generic of DDAVP) SOLN 4mcg/ml	3	NDS
<i>desmopressin acetate</i> (generic of DDAVP) TABS .1mg, .2mg	1	
<i>desmopressin acetate spray</i> SOLN .01%	1	
<i>desmopressin acetate spray refrigerated</i> SOLN .01%	1	
DOJOLVI LIQD 100%	3	NDS NM PA
EGRIFTA SV SOLR 2mg	3	NDS NM PA
EGRIFTA WR KIT 11.6mg	3	NDS NM PA
ELAPRASE SOLN 6mg/3ml	3	NDS NM PA
ELELYSO SOLR 200unit	3	NDS NM PA
ELFABRIO SOLN 5mg/2.5ml, 20mg/10ml	3	NDS NM PA
FABRAZYME SOLR 5mg, 35mg	3	NDS NM PA
FENSOLVI KIT 45mg	3	NDS NM PA
GALAFOLD CAPS 123mg	3	NDS NM PA
GENOTROPIN CART 5mg, 12mg	3	NDS NM PA
GENOTROPIN MINIQUICK PRSY .2mg	2	NM PA
GENOTROPIN MINIQUICK PRSY .4mg, .6mg, .8mg, 1mg, 1.2mg, 1.4mg, 1.6mg, 1.8mg, 2mg	3	NDS NM PA

Drug Name	Drug Requirements/ Tier	Limits
<i>glycerol phenylbutyrate</i> (generic of RAVICTI) LIQD 1.1gm/ml	3	NDS NM PA
INCRELEX SOLN 40mg/4ml	3	NDS NM PA
ISTURISA TABS 1mg QL (240 tabs / 30 days)	3	NDS QL NM PA
ISTURISA TABS 5mg QL (360 tabs / 30 days)	3	NDS QL NM PA
<i>javygtor</i> (generic of KUVAN) PACK 100mg, 500mg; TABS 100mg	3	NDS NM PA
JYNARQUE TABS 15mg, 30mg	3	NDS NM PA
KANUMA SOLN 20mg/10ml	3	NDS NM PA
LAMZEDE SOLR 10mg	3	NDS NM PA
<i>lanreotide acetate</i> SOLN 120mg/0.5ml	3	NDS NM PA
LANREOTIDE ACETATE SOLN 120mg/0.5ml	3	NDS NM PA
<i>levocarnitine (metabolic modifiers)</i> (generic of CARNITOR) SOLN 1gm/10ml, 200mg/ml; TABS 330mg	1	B/D
LUMIZYME SOLR 50mg	3	NDS NM PA
LUPRON DEPOT-PED (1-MONTH KIT 7.5mg, 11.25mg, 15mg)	3	NDS NM PA
LUPRON DEPOT-PED (3-MONTH KIT 11.25mg, 30mg)	3	NDS NM PA
LUPRON DEPOT-PED (6-MONTH KIT 45mg)	3	NDS NM PA
<i>mifepristone (hyperglycemia)</i> (generic of KORLYM) TABS 300mg	3	NDS NM PA
<i>miglustat</i> (generic of ZAVESCA) CAPS 100mg QL (90 caps / 30 days)	3	NDS QL NM PA
MIPLYFFA CAPS 47mg, 62mg, 93mg, 124mg QL (90 caps / 30 days)	3	NDS QL NM PA
MYALEPT SOLR 11.3mg	3	NDS NM PA
MYCAPSSA CPDR 20mg QL (112 caps / 28 days)	3	NDS QL NM PA
MYFEMBREE TAB	3	NDS PA
NAGLAZYME SOLN 1mg/ml	3	NDS NM PA
NEXVIAZYME SOLR 100mg	3	NDS NM PA

Drug Name	Drug Requirements/ Tier	Limits
NGENLA SOPN 24mg/1.2ml, 60mg/1.2ml	3	NDS NM PA
<i>nitisinone</i> (generic of ORFADIN) CAPS 2mg, 5mg, 10mg, 20mg	3	NDS NM PA
NITYR TABS 2mg, 5mg, 10mg	3	NDS NM PA
NORDITROPIN FLEXPOR SOPN 5mg/1.5ml, 10mg/1.5ml, 15mg/1.5ml, 30mg/3ml	3	NDS NM PA
NOVAREL SOLR 5000unit	3	NM PA
<i>octreotide acetate</i> (generic of SANDOSTATIN LAR DEPOT) KIT 10mg, 20mg, 30mg	3	NDS NM PA
<i>octreotide acetate</i> (generic of SANDOSTATIN) SOLN 50mcg/ml, 100mcg/ml	1	NM PA
<i>octreotide acetate</i> SOLN 200mcg/ml; SOSY 50mcg/ml, 100mcg/ml	1	NM PA
<i>octreotide acetate</i> (generic of SANDOSTATIN) SOLN 500mcg/ml	3	NDS NM PA
<i>octreotide acetate</i> SOLN 1000mcg/ml; SOSY 500mcg/ml	3	NDS NM PA
OLPRUVA THPK 2gm, 3gm, 4gm, 5gm, 6gm, 6.67gm	3	NDS NM PA
OMNITROPE SOCT 5mg/1.5ml, 10mg/1.5ml; SOLR 5.8mg	3	NDS NM PA
OPFOLDA CAPS 65mg QL (8 caps / 28 days)	3	QL NM PA
ORFADIN SUSP 4mg/ml	3	NDS NM PA
ORIAHNN CAP	3	NDS PA
ORLISSA TABS 150mg, 200mg	3	NDS PA
PALSONIFY TABS 20mg QL (90 tabs / 30 days)	3	NDS QL NM PA
PALSONIFY TABS 30mg QL (120 tabs / 30 days)	3	NDS QL NM PA
PALYNZIQ SOSY 2.5mg/0.5ml, 10mg/0.5ml, 20mg/ml	3	NDS NM PA
PHEBURANE PLLT 483mg/gm	3	NDS NM PA
POMBILITI SOLR 105mg	3	NDS NM PA

Drug Name	Drug Requirements/ Tier	Limits
PREGNYL W/DILUENT BENZYL SOLR 1000unit	3	NM PA
PROCYSBI CPDR 25mg, 75mg; PACK 75mg, 300mg	3	NDS NM PA
<i>raloxifene hcl</i> (generic of EVISTA) TABS 60mg	1	
RAVICTI LIQD 1.1gm/ml	3	NDS NM PA
RECORLEV TABS 150mg QL (240 tabs / 30 days)	3	NDS QL NM PA
REVCIVI SOLN 2.4mg/1.5ml	3	NDS NM PA
REZDIFFRA TABS 60mg, 80mg, 100mg QL (30 tabs / 30 days)	3	NDS QL NM PA
SAMSCA TABS 15mg, 30mg	3	NDS NM PA
<i>sapropterin dihydrochloride</i> (generic of KUVAN) PACK 100mg, 500mg; TABS 100mg	3	NDS NM PA
SEPHIENCE PACK 250mg, 1000mg	3	NDS NM PA
SEROSTIM SOLR 4mg, 5mg, 6mg	3	NDS NM PA
SIGNIFOR SOLN .3mg/ml, .6mg/ml, .9mg/ml	3	NDS NM PA
SIGNIFOR LAR SRER 10mg, 20mg, 30mg, 40mg, 60mg	3	NDS NM PA
SKYTROFA CART .7mg, 1.4mg, 1.8mg, 2.1mg, 2.5mg, 3mg, 3.6mg, 4.3mg, 5.2mg, 6.3mg, 7.6mg, 9.1mg, 11mg, 13.3mg	3	NDS NM PA
<i>sodium phenylbutyrate</i> (generic of BUPHENYL) POWD 3gm/tsp; TABS 500mg	3	NDS NM PA
SOGROYA SOPN 5mg/1.5ml, 10mg/1.5ml, 15mg/1.5ml	3	NDS NM PA
SOMATULINE DEPOT SOLN 60mg/0.2ml, 90mg/0.3ml, 120mg/0.5ml	3	NDS NM PA
SOMAVERT SOLR 10mg, 15mg, 20mg, 25mg, 30mg	3	NDS NM PA
STRENSIQ SOLN 18mg/0.45ml, 28mg/0.7ml, 40mg/ml, 80mg/0.8ml	3	NDS NM PA
SYNAREL SOLN 2mg/ml	3	NDS PA
TEPEZZA SOLR 500mg	3	NDS NM PA

Drug Name	Drug Requirements/ Tier	Limits
<i>tolvaptan</i> (generic of JYNARQUE) TABS 15mg, 30mg (generic of JYNARQUE)	3	NDS NM PA
<i>tolvaptan</i> (generic of SAMSCA) TABS 15mg, 30mg (generic of SAMSCA)	3	NDS NM PA
<i>tolvaptan</i> (generic of JYNARQUE) TBPK 15mg	3	NDS NM PA
<i>tolvaptan tab therapy pack 30 & 15 mg</i>	3	NDS NM PA
<i>tolvaptan tab therapy pack 45 & 15 mg</i>	3	NDS NM PA
<i>tolvaptan tab therapy pack 60 & 30 mg</i>	3	NDS NM PA
<i>tolvaptan tab therapy pack 90 & 30 mg</i>	3	NDS NM PA
VEOZAH TABS 45mg QL (30 tabs / 30 days)	3	QL PA
VIJOICE PACK 50mg QL (28 packets / 28 days)	3	NDS QL NM PA
VIJOICE TBPK 50mg, 125mg QL (28 tabs / 28 days)	3	NDS QL NM PA
VIJOICE TAB 250MG QL (56 tabs / 28 days)	3	NDS QL NM PA
VIMIZIM SOLN 5mg/5ml	3	NDS NM PA
VOXZOGO SOLR .4mg, .56mg, 1.2mg	3	NDS NM PA
VPRIV SOLR 400unit	3	NDS NM PA
VYKAT XR TB24 25mg QL (120 tabs / 30 days)	3	NDS QL NM PA
VYKAT XR TB24 75mg QL (30 tabs / 30 days)	3	NDS QL NM PA
VYKAT XR TB24 150mg QL (90 tabs / 30 days)	3	NDS QL NM PA
XENPOZYME SOLR 4mg, 20mg	3	NDS NM PA
<i>yargesa</i> (generic of ZAVESCA) CAPS 100mg QL (90 caps / 30 days)	3	NDS QL NM PA
<i>zelvysia</i> (generic of KUVAN) PACK 100mg, 500mg	3	NDS NM PA
ZOMACTON SOLR 5mg	3	NM PA
ZOMACTON SOLR 10mg	3	NDS NM PA
PROGESTINS		
CRINONE GEL 4%, 8%	3	PA

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>gallifrey</i> TABS 5mg	1	
<i>medroxyprogesterone acetate</i> (generic of PROVERA) TABS 2.5mg, 5mg, 10mg	1	
<i>megestrol acetate</i> SUSP 40mg/ml	2	
<i>megestrol acetate (appetite)</i> SUSP 625mg/5ml	3	PA
<i>norethindrone acetate</i> TABS 5mg	1	
<i>progesterone</i> (generic of PROMETRIUM) CAPS 100mg, 200mg	1	
THYROID AGENTS		
ERMEZA SOLN 150mcg/5ml	3	
<i>levo-t</i> (generic of SYNTHROID) TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	1	
<i>levothyroxine sodium</i> CAPS 13mcg, 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg	1	ST
<i>levothyroxine sodium</i> (generic of SYNTHROID) TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	1	
<i>levoxyl</i> (generic of SYNTHROID) TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg	1	
<i>liomny</i> (generic of CYTOMEL) TABS 5mcg, 25mcg, 50mcg	1	
<i>liothyronine sodium</i> (generic of CYTOMEL) TABS 5mcg, 25mcg, 50mcg	1	
<i>methimazole</i> TABS 5mg, 10mg	1	
<i>propylthiouracil</i> TABS 50mg	1	

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
SYNTHROID TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	3	
THYQUIDITY SOLN 100mcg/5ml	3	
TIROSINT CAPS 37.5mcg, 44mcg, 62.5mcg	3	ST
TIROSINT-SOL SOLN 13mcg/ml, 25mcg/ml, 37.5mcg/ml, 44mcg/ml, 50mcg/ml, 62.5mcg/ml, 75mcg/ml, 88mcg/ml, 100mcg/ml, 112mcg/ml, 125mcg/ml, 137mcg/ml, 150mcg/ml, 175mcg/ml, 200mcg/ml	3	
<i>unithroid</i> (generic of SYNTHROID) TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	1	
VITAMIN D ANALOGS		
<i>calcitriol</i> (generic of ROCALTRON) CAPS .25mcg, .5mcg	1	B/D
<i>calcitriol (oral)</i> (generic of ROCALTRON) SOLN 1mcg/ml	1	B/D
<i>doxercalciferol</i> CAPS .5mcg, 1mcg, 2.5mcg	1	B/D
<i>paricalcitol</i> (generic of ZEMPLAR) CAPS 1mcg, 2mcg	1	B/D
<i>paricalcitol</i> CAPS 4mcg	1	B/D
RAYALDEE CPCR 30mcg	3	NDS
GASTROINTESTINAL ANTIEMETICS		
AKYNZEO CAP 300-0.5	3	B/D
AKYNZEO INJ 235-0.25	3	NM
AKYNZEO INJ 235-0.25MG/20ML	3	NM
APONVIE EMUL 32mg/4.4ml	3	
<i>aprepitant</i> CAPS 40mg, 125mg	1	B/D

Drug Name	Drug Requirements/ Tier	Limits
<i>aprepitant</i> (generic of EMEND BIPACK) CAPS 80mg	1	B/D
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	1	B/D
BONJESTA TAB 20-20MG	3	
CINVANTI EMUL 130mg/18ml	3	
<i>compro</i> SUPP 25mg	1	
DIMENHYDRINATE SOLN 50mg/ml	3	
<i>doxylamine-pyridoxine tab delayed release 10-10 mg</i> (generic of DICLEGIS)	3	
<i>dronabinol</i> (generic of MARINOL) CAPS 2.5mg QL (60 caps / 30 days)	1	B/D QL
<i>dronabinol</i> CAPS 5mg, 10mg QL (60 caps / 30 days)	1	B/D QL
EMEND SUSR 125mg/5ml	3	NDS B/D
FOCINVEZ SOLN 150mg/50ml	3	
<i>fosaprepitant dimeglumine</i> (generic of EMEND) SOLR 150mg	1	
GIMOTI SOLN 15mg/act	3	NDS PA
<i>granisetron hcl</i> SOLN 1mg/ml, 4mg/4ml	1	
<i>granisetron hcl</i> TABS 1mg	1	B/D
<i>meclizine hcl</i> TABS 12.5mg, 25mg PA applies if 65 years and older after a 30 day supply in a calendar year	1	PA
<i>metoclopramide hcl</i> SOLN 5mg/5ml, 5mg/ml; TBDP 5mg	1	
<i>metoclopramide hcl</i> (generic of REGLAN) TABS 5mg, 10mg	1	
<i>ondansetron</i> TBDP 4mg, 8mg	1	B/D
<i>ondansetron</i> TBDP 16mg	3	NDS B/D
<i>ondansetron hcl</i> SOLN 4mg/2ml, 40mg/20ml; SOSY 4mg/2ml	1	
<i>ondansetron hcl</i> SOLN 4mg/5ml; TABS 4mg, 8mg	1	B/D
<i>palonosetron hcl</i> SOLN .25mg/5ml; SOSY .25mg/5ml	1	
POSFREA SOLN .25mg/5ml	3	

Drug Name	Drug Requirements/ Tier	Limits
<i>prochlorperazine</i> SUPP 25mg	1	
<i>prochlorperazine edisylate</i> SOLN 10mg/2ml	1	
<i>prochlorperazine maleate</i> TABS 5mg, 10mg	1	
<i>promethazine hcl</i> SOLN 6.25mg/5ml; TABS 12.5mg, 25mg, 50mg PA applies if 65 years and older after a 30 day supply in a calendar year	1	PA
<i>promethazine hcl</i> (generic of PHENERGAN) SOLN 25mg/ml, 50mg/ml PA applies if 65 years and older after a 30 day supply in a calendar year	2	PA
<i>promethazine hcl</i> SUPP 12.5mg, 25mg PA applies if 65 years and older after a 30 day supply in a calendar year	3	PA
<i>promethegan</i> SUPP 12.5mg, 25mg, 50mg PA applies if 65 years and older after a 30 day supply in a calendar year	3	PA
SANCUSO PTCH 3.1mg/24hr QL (4 patches / 28 days)	3	NDS QL
<i>scopolamine</i> (generic of TRANSDERM SCOP) PT72 1mg/3days QL (10 patches / 30 days)	3	QL
SUSTOL PRSY 10mg/0.4ml	3	
<i>trimethobenzamide hcl</i> CAPS 300mg	1	
VARUBI TBPK 90mg	3	B/D NM
ANTISPASMODICS		
<i>atropine sulfate</i> (generic of ATROPINE SULFATE) SOSY 1mg/10ml	3	
ATROPINE SULFATE SOSY .25mg/5ml	3	

Drug Name	Drug Requirements/ Tier	Limits
<i>dicyclomine hcl</i> CAPS 10mg; TABS 20mg PA applies if 65 years and older	2	PA
<i>dicyclomine hcl</i> SOLN 10mg/5ml PA applies if 65 years and older	3	PA
<i>dicyclomine hcl</i> (generic of BENTYL) SOLN 10mg/ml PA applies if 65 years and older	3	PA
<i>glycopyrrolate</i> SOLN .2mg/ml, .4mg/2ml, 1mg/5ml, 4mg/20ml	1	
<i>glycopyrrolate</i> (generic of GLYCOPYRROLATE) SOSY .2mg/ml, .4mg/2ml	1	
<i>glycopyrrolate</i> TABS 1mg QL (90 tabs / 30 days)	1	QL
<i>glycopyrrolate</i> TABS 2mg QL (120 tabs / 30 days)	1	QL
<i>glycopyrrolate (oral)</i> (generic of CUVPOSA) SOLN 1mg/5ml	1	
<i>methscopolamine bromide</i> TABS 2.5mg, 5mg PA applies if 65 years and older	3	PA
H2-RECEPTOR ANTAGONISTS		
<i>cimetidine</i> TABS 200mg, 300mg, 400mg, 800mg	1	
<i>cimetidine hcl</i> SOLN 300mg/5ml QL (1200 mL / 30 days)	1	QL
<i>famotidine</i> SOLN 20mg/2ml, 40mg/4ml, 200mg/20ml; SUSR 40mg/5ml	1	
FAMOTIDINE SOLN 20mg/5ml, 40mg/10ml, 200mg/50ml	3	
<i>famotidine</i> (generic of PEPCID) TABS 20mg, 40mg	1	
<i>famotidine in nacl 0.9% iv soln</i> 20 mg/50ml	1	
<i>nizatidine</i> CAPS 150mg, 300mg	1	

Drug Name	Drug Requirements/ Tier	Limits
INFLAMMATORY BOWEL DISEASE		
<i>balsalazide disodium</i> CAPS 750mg	1	
<i>budesonide</i> CPEP 3mg QL (90 caps / 30 days)	1	QL
<i>budesonide</i> (generic of UCERIS) TB24 9mg QL (30 tabs / 30 days)	3	NDS QL PA
<i>budesonide (intrarectal)</i> (generic of UCERIS) FOAM 2mg	1	
DIPENTUM CAPS 250mg	3	NDS
<i>hydrocortisone (intrarectal)</i> (generic of CORTENEMA) ENEM 100mg/60ml	1	
<i>mesalamine</i> (generic of APRISO) CP24 .375gm QL (120 caps / 30 days)	1	QL
<i>mesalamine</i> (generic of PENTASA) CPCR 500mg QL (240 caps / 30 days)	1	QL
<i>mesalamine</i> CPDR 400mg QL (180 caps / 30 days)	1	QL
<i>mesalamine</i> ENEM 4gm QL (1680 mL / 28 days)	1	QL
<i>mesalamine</i> (generic of CANASA) SUPP 1000mg QL (30 suppositories / 30 days)	1	QL
<i>mesalamine</i> (generic of LIALDA) TBEC 1.2gm QL (120 tabs / 30 days)	1	QL
<i>mesalamine</i> TBEC 800mg QL (180 tabs / 30 days)	1	QL
<i>mesalamine w/ cleanser</i> (generic of ROWASA) KIT 4gm QL (28 bottles / 28 days)	1	QL
PENTASA CPCR 250mg QL (480 caps / 30 days)	3	QL
SFROWASA ENEM 4gm/60ml QL (1680 mL / 28 days)	3	NDS QL
<i>sulfasalazine</i> (generic of AZULFIDINE) TABS 500mg	1	
<i>sulfasalazine</i> (generic of AZULFIDINE EN-TABS) TBEC 500mg	1	

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
LAXATIVES					
CLENPIQ SOL 10 MG-3.5 GM-12 GM/175ML	3		CREON CAP 36000UNT	2	
<i>constulose</i> SOLN 10gm/15ml	1		<i>cromolyn sodium</i> (<i>mastocytosis</i>) (generic of GASTROCROM) CONC 100mg/5ml	1	
<i>enulose</i> SOLN 10gm/15ml	1		<i>diphenoxylate w/ atropine liq</i> 2.5-0.025 mg/5ml	3	
<i>gavilyte-c</i>	1		<i>diphenoxylate w/ atropine tab</i> 2.5-0.025 mg (generic of LOMOTIL)	3	
<i>gavilyte-g</i> (generic of GOLYTELY)	1		EOHILIA SUSP 2mg/10ml QL (600 mL / 30 days)	3	NDS QL PA
<i>gavilyte-n/ flavor pack</i>	1		GATTEX KIT 5mg	3	NDS NM PA
<i>generlac</i> SOLN 10gm/15ml	1		IQIRVO TABS 80mg QL (30 tabs / 30 days)	3	NDS QL NM PA
<i>lactulose</i> SOLN 10gm/15ml	1		LINZESS CAPS 72mcg, 145mcg, 290mcg QL (30 caps / 30 days)	2	QL
<i>lactulose (encephalopathy)</i> SOLN 10gm/15ml	1		LIVDELZI CAPS 10mg QL (30 caps / 30 days)	3	NDS QL NM PA
<i>peg 3350-kcl-na bicarb-nacl- na sulfate for soln 236 gm</i> (generic of GOLYTELY)	1		LIVMARLI SOLN 9.5mg/ml, 19mg/ml; TABS 10mg, 15mg, 20mg, 30mg	3	NDS NM PA
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	1		<i>loperamide hcl</i> CAPS 2mg	1	
<i>peg-3350/electrolytes/asc</i> (generic of MOVIPREP)	1		<i>lubiprostone</i> (generic of AMITIZA) CAPS 8mcg, 24mcg QL (60 caps / 30 days)	1	QL
PLENVU SOL	3		<i>misoprostol</i> (generic of CYTOTEC) TABS 100mcg, 200mcg	1	
<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml</i> (generic of SUPREP BOWEL PREP KIT)	1		MOVANTIK TABS 12.5mg, 25mg QL (30 tabs / 30 days)	2	QL
SUFLAVE SOL	3		PANCREAZE CAP 2600UNIT	3	
SUTAB TAB	3		PANCREAZE CAP 4200UNIT	3	
MISCELLANEOUS					
<i>alosetron hcl</i> (generic of LOTRONEX) TABS 1mg QL (60 tabs / 30 days)	3	NDS QL PA	PANCREAZE CAP 10500UNT	3	
<i>alosetron hcl</i> (generic of LOTRONEX) TABS .5mg QL (60 tabs / 30 days)	1	QL PA	PANCREAZE CAP 16800UNT	3	
<i>amoxicil cap & clarithro tab & lansopraz cap dr 500 & 500 & 30mg</i>	1		PANCREAZE CAP 21000UNT	3	
BYLVAY CAPS 400mcg, 1200mcg	3	NDS NM PA	PANCREAZE CAP 37000	3	
BYLVAY (PELLETS) CPSP 200mcg, 600mcg	3	NDS NM PA	PERTZYE CAP 4000UNIT	3	
CHOLBAM CAPS 50mg, 250mg	3	NDS NM PA	PERTZYE CAP 8000UNIT	3	
CREON CAP 3000UNIT	2		PERTZYE CAP 16000U	3	
CREON CAP 6000UNIT	2		PERTZYE CAP 24000U	3	
CREON CAP 12000UNT	2				
CREON CAP 24000UNT	2				

Information on the symbols, abbreviations, and what they mean can be found on the page prior to the start of the drug list.

Drug Name	Drug Requirements/ Tier	Limits
REBYOTA SUSP 150ml QL (150 mL / 30 days)	3	NDS QL NM PA
RELISTOR SOLN 12mg/0.6ml QL (28 vials / 28 days)	3	NDS QL PA
RELISTOR SOSY 8mg/0.4ml, 12mg/0.6ml QL (28 syringes / 28 days)	3	NDS QL PA
RELISTOR TABS 150mg QL (90 tabs / 30 days)	3	NDS QL PA
SUCRAID SOLN 8500unit/ml <i>sucralfate</i> (generic of CARAFATE) TABS 1gm	3 1	NDS NM PA
SYMPROIC TABS .2mg QL (30 tabs / 30 days)	3	QL
TALICIA CAP	3	
TRULANCE TABS 3mg QL (30 tabs / 30 days)	3	QL
<i>ursodiol</i> CAPS 300mg; TABS 250mg	1	
<i>ursodiol</i> (generic of URSO FORTE) TABS 500mg	1	
VIBERZI TABS 75mg, 100mg	3	NDS PA
VIOKACE TAB 10440	3	
VIOKACE TAB 20880	3	NDS
VOQUEZNA PAK DUAL PAK QL (2 kits / year)	2	QL PA
VOQUEZNA PAK TRIP PK QL (2 kits / year)	2	QL PA
VOWST CAP QL (12 caps / 30 days)	3	NDS QL NM PA
XERMELO TABS 250mg QL (84 tabs / 28 days)	3	NDS QL NM PA
XIFAXAN TABS 550mg	3	NDS PA
ZENPEP CAP 3000UNIT	2	
ZENPEP CAP 5000UNIT	2	
ZENPEP CAP 10000UNT	2	
ZENPEP CAP 15000UNT	2	
ZENPEP CAP 20000UNT	2	
ZENPEP CAP 25000UNT	2	
ZENPEP CAP 40000UNT	2	
ZENPEP CAP 60000UNT	2	

Drug Name	Drug Requirements/ Tier	Limits
PROTON PUMP INHIBITORS		
<i>dexlansoprazole</i> (generic of DEXILANT) CPDR 30mg, 60mg QL (30 caps / 30 days)	1	QL
<i>esomeprazole magnesium</i> (generic of NEXIUM) CPDR 20mg, 40mg QL (30 caps / 30 days)	1	QL ST
<i>esomeprazole magnesium</i> (generic of NEXIUM) PACK 2.5mg, 5mg	1	
<i>esomeprazole magnesium</i> (generic of NEXIUM) PACK 10mg, 20mg, 40mg QL (30 packets / 30 days)	1	QL
<i>esomeprazole sodium</i> SOLR 40mg	1	
<i>lansoprazole</i> CPDR 15mg QL (60 caps / 30 days)	1	QL
<i>lansoprazole</i> (generic of PREVACID) CPDR 30mg QL (60 caps / 30 days)	1	QL
<i>omeprazole</i> CPDR 10mg, 20mg, 40mg	1	
PANTOPR/NACL SOL 40MG/100	3	
PANTOPR/NACL SOL 80MG/100	3	
<i>pantoprazole sodium</i> (generic of PANTOPRAZOLE SODIUM) SOLR 40mg	1	
<i>pantoprazole sodium</i> (generic of PROTONIX) TBEC 20mg, 40mg	1	
PANTOPRAZOLE SOL 40/50ML	3	
PRILOSEC PACK 2.5mg, 10mg	3	PA
<i>rabeprazole sodium</i> (generic of ACIPHEX) TBEC 20mg QL (30 tabs / 30 days)	1	QL
VOQUEZNA TABS 10mg QL (30 tabs / 30 days)	3	QL PA
VOQUEZNA TABS 20mg QL (60 tabs / 30 days)	3	QL PA

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
GENITOURINARY					
BENIGN PROSTATIC HYPERPLASIA					
<i>alfuzosin hcl</i> (generic of UROXATRAL) TB24 10mg QL (30 tabs / 30 days)	1	QL	RIVFLOZA SOLN 80mg/0.5ml; SOSY 128mg/0.8ml, 160mg/ml	3	NDS NM PA
CARDURA XL TB24 4mg, 8mg QL (30 tabs / 30 days)	3	QL ST	TARPEYO CPDR 4mg QL (120 caps / 30 days)	3	NDS QL NM PA
<i>dutasteride</i> (generic of AVODART) CAPS .5mg QL (30 caps / 30 days)	1	QL	<i>tiopronin</i> (generic of THIOLA) TABS 100mg	3	NDS NM
<i>dutasteride-tamsulosin hcl cap</i> 0.5-0.4 mg (generic of JALYN) QL (30 caps / 30 days)	1	QL	<i>tiopronin</i> (generic of THIOLA EC) TBEC 100mg, 300mg	3	NDS NM
<i>finasteride</i> (generic of PROSCAR) TABS 5mg QL (30 tabs / 30 days)	1	QL	VANRAFIA TABS .75mg QL (30 tabs / 30 days)	3	NDS QL NM PA
<i>silodosin</i> (generic of RAPAFLO) CAPS 4mg, 8mg QL (30 caps / 30 days)	1	QL	<i>venxxiva</i> (generic of THIOLA EC) TBEC 100mg, 300mg	3	NDS NM
<i>tadalafil</i> (generic of CIALIS) TABS 5mg QL (30 tabs / 30 days)	1	QL PA	URINARY ANTISPASMODICS		
<i>tamsulosin hcl</i> CAPS .4mg QL (60 caps / 30 days)	1	QL	<i>darifenacin hydrobromide</i> TB24 7.5mg, 15mg QL (30 tabs / 30 days)	1	QL ST
MISCELLANEOUS			<i>fesoterodine fumarate</i> (generic of TOVIAZ) TB24 4mg, 8mg QL (30 tabs / 30 days)	1	QL
<i>acetic acid</i> SOLN .25%	1		GEMTESA TABS 75mg QL (30 tabs / 30 days)	2	QL
<i>bethanechol chloride</i> TABS 5mg, 10mg, 25mg, 50mg	1		<i>mirabegron</i> (generic of MYRBETRIQ) TB24 25mg, 50mg QL (30 tabs / 30 days)	1	QL
ELMIRON CAPS 100mg QL (90 caps / 30 days)	3	NDS QL	<i>oxybutynin chloride</i> SOLN 5mg/5ml QL (600 mL / 30 days)	1	QL
FILSPARI TABS 200mg, 400mg QL (30 tabs / 30 days)	3	NDS QL NM PA	<i>oxybutynin chloride</i> TABS 5mg QL (120 tabs / 30 days)	1	QL
INTRAROSA INST 6.5mg	3	PA	<i>oxybutynin chloride</i> TB24 5mg QL (30 tabs / 30 days)	1	QL
LITHOSTAT TABS 250mg	3		<i>oxybutynin chloride</i> TB24 10mg, 15mg QL (60 tabs / 30 days)	1	QL
<i>neomycin-polymyxin b gu irrigation soln</i>	1		OXYTROL PTTW 3.9mg/24hr QL (8 patches / 28 days)	3	QL ST
OXLUMO SOLN 94.5mg/0.5ml	3	NDS NM PA	<i>solifenacin succinate</i> (generic of VESICARE) TABS 5mg, 10mg QL (30 tabs / 30 days)	1	QL
<i>potassium citrate (alkalinizer)</i> (generic of UROCIT-K 15) TBCR 15meq	1		<i>tolterodine tartrate</i> CP24 2mg, 4mg QL (30 caps / 30 days)	1	QL
<i>potassium citrate (alkalinizer)</i> TBCR 540mg	1				
<i>potassium citrate (alkalinizer)</i> (generic of UROCIT-K 10) TBCR 1080mg	1				

Information on the symbols, abbreviations, and what they mean can be found on the page prior to the start of the drug list.

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
<i>tolterodine tartrate</i> TABS 1mg, 2mg QL (60 tabs / 30 days)	1	QL	ELIQUIS (2MG PACK) 4 X TBSO .5mg QL (592 tabs / 30 days)	2	QL
<i>tropium chloride</i> CP24 60mg QL (30 caps / 30 days)	1	QL	ELIQUIS STARTER PACK TBPK 5mg QL (74 tabs / 30 days)	2	QL
<i>tropium chloride</i> TABS 20mg QL (60 tabs / 30 days)	1	QL	<i>enoxaparin sodium</i> (generic of LOVENOX) SOLN 300mg/3ml; SOSY 30mg/0.3ml, 40mg/0.4ml, 60mg/0.6ml, 80mg/0.8ml, 100mg/ml, 120mg/0.8ml, 150mg/ml	1	
VESICARE LS SUSP 5mg/5ml QL (300 mL / 30 days)	3	QL	<i>fondaparinux sodium</i> (generic of ARIXTRA) SOLN 2.5mg/0.5ml	1	
VAGINAL ANTI-INFECTIVES			<i>fondaparinux sodium</i> (generic of ARIXTRA) SOLN 5mg/0.4ml, 7.5mg/0.6ml, 10mg/0.8ml	3	NDS
CLEOCIN SUPP 100mg	3		FRAGMIN SOLN 10000unit/4ml; SOSY 2500unit/0.2ml	3	
<i>clindamycin phosphate</i> vaginal (generic of CLEOCIN) CREA 2%	1		FRAGMIN SOLN 95000unit/3.8ml; SOSY 5000unit/0.2ml, 7500unit/0.3ml, 10000unit/ml, 12500unit/0.5ml, 15000unit/0.6ml, 18000unt/0.72ml	3	NDS
CLINDESSE CREA 2%	3		HEP SOD/D5W INJ 20000UNT	3	
GYNAZOLE-1 CREA 2%	3		HEP SOD/D5W INJ 25000UNT	3	
<i>metronidazole vaginal</i> GEL .75%	1		HEP SOD/NACL INJ 12500UNT	2	
<i>miconazole 3</i> SUPP 200mg	1		HEP SOD/NACL INJ 25000UNT	2	
<i>terconazole vaginal</i> CREA .4%, .8%; SUPP 80mg	1		HEPARIN SODIUM SOLN 5000unit/ml; SOSY 5000unit/0.5ml	3	B/D
VANDAZOLE GEL .75%	3		<i>heparin sodium (porcine)</i> SOLN 1000unit/ml, 5000unit/0.5ml, 5000unit/ml, 10000unit/ml, 20000unit/ml	1	B/D
XACIATO GEL 2%	3		HEPARIN/NACL INJ 25000UNT	2	
HEMATOLOGIC ANTICOAGULANTS					
<i>dabigatran etexilate mesylate</i> (generic of PRADAXA) CAPS 75mg, 150mg QL (60 caps / 30 days)	1	QL			
<i>dabigatran etexilate mesylate</i> (generic of PRADAXA) CAPS 110mg QL (120 caps / 30 days)	1	QL			
ELIQUIS CPSP .15mg QL (56 caps / 21 days)	2	QL			
ELIQUIS TABS 2.5mg QL (60 tabs / 30 days)	2	QL			
ELIQUIS TABS 5mg QL (74 tabs / 30 days)	2	QL			
ELIQUIS TBSO .5mg QL (588 tabs / 29 days)	2	QL			
ELIQUIS (1.5MG PACK) 3 X TBSO .5mg QL (591 tabs / 29 days)	2	QL			

Drug Name	Drug Requirements/ Limits		Drug Name	Drug Requirements/ Limits	
	Tier	Limits		Tier	Limits
<i>jantoven</i> TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	1		ZARXIO SOSY 300mcg/0.5ml, 480mcg/0.8ml	3	NDS NM PA
<i>rivaroxaban</i> (generic of XARELTO) SUSR 1mg/ml QL (620 mL / 30 days)	1	QL	MISCELLANEOUS		
<i>rivaroxaban</i> (generic of XARELTO) TABS 2.5mg QL (60 tabs / 30 days)	1	QL	ADAKVEO SOLN 100mg/10ml	3	NDS NM PA
<i>warfarin sodium</i> TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	1		ADZYNMA KIT 500unit, 1500unit	3	NDS NM PA
XARELTO TABS 2.5mg QL (60 tabs / 30 days)	2	QL	ALVAIZ TABS 9mg, 54mg QL (60 tabs / 30 days)	3	NDS QL NM PA
XARELTO TABS 10mg, 15mg, 20mg QL (30 tabs / 30 days)	2	QL	ALVAIZ TABS 18mg, 36mg QL (90 tabs / 30 days)	3	NDS QL NM PA
XARELTO STAR TAB 15/20MG QL (51 tabs / 30 days)	2	QL	<i>aminocaproic acid</i> SOLN .25gm/ml; TABS 500mg, 1000mg	3	NDS
HEMATOPOIETIC GROWTH FACTORS			<i>anagrelide hcl</i> CAPS 1mg	1	
ARANESP ALBUMIN FREE SOLN 25mcg/ml, 40mcg/ml, 60mcg/ml; SOSY 10mcg/0.4ml, 25mcg/0.42ml, 40mcg/0.4ml	2	NM PA	<i>anagrelide hcl</i> (generic of AGRYLIN) CAPS .5mg	1	
ARANESP ALBUMIN FREE SOLN 100mcg/ml, 200mcg/ml; SOSY 60mcg/0.3ml, 100mcg/0.5ml, 150mcg/0.3ml, 200mcg/0.4ml, 300mcg/0.6ml, 500mcg/ml	3	NDS NM PA	ANDEMBRY SOAJ 200mg/1.2ml QL (13 pens / 365 days)	3	NDS QL NM PA
FULPHILA SOSY 6mg/0.6ml QL (2 syringes / 28 days)	3	NDS QL NM PA	BERINERT KIT 500unit QL (24 boxes / 30 days)	3	NDS QL NM PA
LEUKINE SOLR 250mcg	3	NDS NM PA	BKEMV SOLN 300mg/30ml	3	NDS NM PA
NPLATE SOLR 125mcg, 250mcg, 500mcg	3	NDS NM PA	CABLIVI KIT 11mg	3	NDS NM PA
<i>plerixafor</i> (generic of MOZOBIL) SOLN 24mg/1.2ml	3	NDS NM PA	<i>cilostazol</i> TABS 50mg, 100mg	1	
PROCRIT SOLN 2000unit/ml, 3000unit/ml, 4000unit/ml, 10000unit/ml	2	NM PA	CINRYZE SOLR 500unit QL (20 vials / 30 days)	3	NDS QL NM PA
PROCRIT SOLN 20000unit/ml, 40000unit/ml	3	NDS NM PA	DAWNZERA SOAJ 80mg/0.8ml QL (1 pen / 28 days)	3	NDS QL NM PA
XOLREMDI CAPS 100mg QL (120 caps / 30 days)	3	NDS QL NM PA	DOPTELET TABS 20mg	3	NDS NM PA
			DOPTELET SPRINKLE CPSP 10mg	3	NDS NM PA
			DROXIA CAPS 200mg, 300mg, 400mg	3	
			EKTERLY TABS 300mg QL (12 tabs / 30 days)	3	NDS QL NM PA
			EMPAVELI SOLN 1080mg/20ml QL (200 mL / 30 days)	3	NDS QL NM PA
			ENJAYMO SOLN 1100mg/22ml	3	NDS NM PA
			EPYSQLI SOLN 300mg/30ml	3	NDS NM PA
			FABHALTA CAPS 200mg QL (60 caps / 30 days)	3	NDS QL NM PA
			GIVLAARI SOLN 189mg/ml	3	NDS NM PA

Drug Name	Drug Requirements/ Tier	Limits
HAEGARDA SOLR 2000unit QL (30 vials / 30 days)	3	NDS QL NM PA
HAEGARDA SOLR 3000unit QL (20 vials / 30 days)	3	NDS QL NM PA
<i>icatibant acetate</i> (generic of FIRAZYR) SOSY 30mg/3ml QL (9 syringes / 30 days)	3	NDS QL NM PA
KALBITOR SOLN 10mg/ml QL (18 mL / 30 days)	3	NDS QL NM PA
<i>l-glutamine (sickle cell)</i> (generic of ENDARI) PACK 5gm	3	NDS NM PA
MULPLETA TABS 3mg	3	NDS NM PA
ORLADEYO CAPS 110mg, 150mg QL (28 caps / 28 days)	3	NDS QL NM PA
<i>pentoxifylline</i> TBCR 400mg	1	
PIASKY SOLN 340mg/2ml	3	NDS NM PA
PYRUKYND TABS 5mg, 20mg, 50mg QL (56 tabs / 28 days)	3	NDS QL NM PA
PYRUKYND TAB 20MGX5MG QL (14 tabs / 14 days)	3	NDS QL NM PA
PYRUKYND TAB 50MGX20M QL (14 tabs / 14 days)	3	NDS QL NM PA
PYRUKYND TAPER PACK TBPK 5mg QL (7 tabs / 7 days)	3	NDS QL NM PA
REBLOZYL SOLR 25mg, 75mg	3	NDS NM PA
RUCONEST SOLR 2100unit QL (12 vials / 30 days)	3	NDS QL NM PA
RYTELO SOLR 47mg, 188mg	3	NDS NM PA
<i>sajazir</i> (generic of FIRAZYR) SOSY 30mg/3ml QL (9 syringes / 30 days)	3	NDS QL NM PA
SIKLOS TABS 100mg	3	
SIKLOS TABS 1000mg	3	NDS
SOLIRIS SOLN 300mg/30ml	3	NDS NM PA
TAKHZYRO SOSY 150mg/ml, 300mg/2ml QL (2 syringes / 28 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Tier	Limits
TAVALISSE TABS 100mg, 150mg QL (60 tabs / 30 days)	3	NDS QL NM PA
TAVNEOS CAPS 10mg QL (180 caps / 30 days)	3	NDS QL NM PA
<i>tranexamic acid</i> (generic of CYKLOKAPRON) SOLN 1000mg/10ml	1	
<i>tranexamic acid</i> TABS 650mg	1	
ULTOMIRIS SOLN 300mg/3ml, 1100mg/11ml	3	NDS NM PA
VOYDEYA TABS 100mg QL (180 tabs / 30 days)	3	NDS QL NM PA
VOYDEYA TAB 50-100MG QL (180 tabs / 30 days)	3	NDS QL NM PA
WAYRILZ TABS 400mg QL (60 tabs / 30 days)	3	NDS QL NM PA
XROMI SOLN 100mg/ml	3	NDS
PLATELET AGGREGATION INHIBITORS		
<i>aspirin-dipyridamole cap er</i> 12hr 25-200 mg	1	
<i>clopidogrel bisulfate</i> (generic of PLAVIX) TABS 75mg	1	
<i>clopidogrel bisulfate</i> TABS 300mg	1	
<i>dipyridamole</i> TABS 25mg, 50mg, 75mg PA applies if 65 years and older	2	PA
<i>prasugrel hcl</i> (generic of EFFIENT) TABS 5mg, 10mg	1	
<i>ticagrelor</i> (generic of BRILINTA) TABS 60mg, 90mg	1	
IMMUNOLOGIC AGENTS		
AUTOIMMUNE AGENTS		
ADALIMUMAB-BWWD SOAJ 40mg/0.4ml QL (6 autoinjectors / 28 days)	3	NDS QL NM PA
ADALIMUMAB-BWWD SOSY 40mg/0.4ml QL (6 syringes / 28 days)	3	NDS QL NM PA
ADBRY SOAJ 300mg/2ml QL (28 pens / 365 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Tier	Limits
ADBRY SOSY 150mg/ml QL (56 syringes / 365 days)	3	NDS QL NM PA
AVSOLA SOLR 100mg	3	NDS NM PA
BIMZELX SOAJ 160mg/ml, 320mg/2ml QL (2 pens / 28 days)	3	NDS QL NM PA
BIMZELX SOSY 160mg/ml, 320mg/2ml QL (2 syringes / 28 days)	3	NDS QL NM PA
CIBINQO TABS 50mg, 100mg, 200mg QL (30 tabs / 30 days)	3	NDS QL NM PA
DUPIXENT SOAJ 200mg/1.14ml, 300mg/2ml QL (4 pens / 28 days)	3	NDS QL NM PA
DUPIXENT SOSY 200mg/1.14ml, 300mg/2ml QL (4 syringes / 28 days)	3	NDS QL NM PA
EBGLYSS SOAJ 250mg/2ml QL (20 pens / 365 days)	3	NDS QL NM PA
EBGLYSS SOSY 250mg/2ml QL (20 syringes / 365 days)	3	NDS QL NM PA
ENBREL SOLN 25mg/0.5ml QL (16 vials / 28 days)	3	NDS QL NM PA
ENBREL SOSY 25mg/0.5ml QL (16 syringes / 28 days)	3	NDS QL NM PA
ENBREL SOSY 50mg/ml QL (8 syringes / 28 days)	3	NDS QL NM PA
ENBREL MINI SOCT 50mg/ml QL (8 cartridges / 28 days)	3	NDS QL NM PA
ENBREL SURECLICK SOAJ 50mg/ml QL (8 pens / 28 days)	3	NDS QL NM PA
HADLIMA SOSY 40mg/0.4ml, 40mg/0.8ml QL (6 syringes / 28 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Tier	Limits
HADLIMA PUSH TOUCH SOAJ 40mg/0.4ml, 40mg/0.8ml QL (6 autoinjectors / 28 days)	3	NDS QL NM PA
HUMIRA PSKT 10mg/0.1ml QL (2 syringes / 28 days)	3	NDS QL NM PA
HUMIRA PSKT 20mg/0.2ml QL (4 syringes / 28 days)	3	NDS QL NM PA
HUMIRA PSKT 40mg/0.4ml, 40mg/0.8ml QL (6 syringes / 28 days)	3	NDS QL NM PA
HUMIRA PEN AJKT 40mg/0.4ml, 40mg/0.8ml QL (6 pens / 28 days)	3	NDS QL NM PA
HUMIRA PEN AJKT 80mg/0.8ml QL (4 pens / 28 days)	3	NDS QL NM PA
HUMIRA PEN KIT PS/UV QL (3 pens / 28 days)	3	NDS QL NM PA
HUMIRA PEN-CD/UC/HS START AJKT 80mg/0.8ml QL (3 pens / 28 days)	3	NDS QL NM PA
KINERET SOSY 100mg/0.67ml QL (28 syringes / 28 days)	3	NDS QL NM PA
NEMLUVIO AUIJ 30mg QL (2 pens / 28 days)	3	NDS QL NM PA
PYZCHIVA SOAJ 45mg/0.5ml QL (1 pen / 28 days)	2	QL NM PA
PYZCHIVA SOAJ 90mg/ml QL (1 pen / 28 days)	3	NDS QL NM PA
PYZCHIVA SOLN 45mg/0.5ml QL (1 vial / 28 days)	2	QL NM PA
PYZCHIVA SOLN 130mg/26ml	3	NDS NM PA
PYZCHIVA SOSY 45mg/0.5ml QL (1 syringe / 28 days)	2	QL NM PA
PYZCHIVA SOSY 90mg/ml QL (1 syringe / 28 days)	3	NDS QL NM PA
RENFLEXIS SOLR 100mg	3	NDS NM PA

Drug Name	Drug Requirements/ Tier	Limits
RHAPSIDO TABS 25mg QL (60 tabs / 30 days)	3	NDS QL NM PA
RINVOQ TB24 15mg, 30mg QL (30 tabs / 30 days)	3	NDS QL NM PA
RINVOQ TB24 45mg QL (168 tabs / year)	3	NDS QL NM PA
RINVOQ LQ SOLN 1mg/ml QL (360 mL / 30 days)	3	NDS QL NM PA
SKYRIZI SOCT 180mg/1.2ml, 360mg/2.4ml QL (1 cartridge / 56 days)	3	NDS QL NM PA
SKYRIZI SOLN 600mg/10ml	3	NDS NM PA
SKYRIZI SOSY 150mg/ml QL (6 syringes / 365 days)	3	NDS QL NM PA
SKYRIZI PEN SOAJ 150mg/ml QL (6 pens / 365 days)	3	NDS QL NM PA
SOTYKTU TABS 6mg QL (30 tabs / 30 days)	3	NDS QL NM PA
SPEVIGO SOLN 450mg/7.5ml	3	NDS NM PA
SPEVIGO SOSY 150mg/ml QL (28 syringes / 365 days)	3	NDS QL NM PA
SPEVIGO SOSY 300mg/2ml QL (14 syringes / 365 days)	3	NDS QL NM PA
STELARA SOLN 45mg/0.5ml QL (1 vial / 28 days)	3	NDS QL NM PA
STELARA SOLN 130mg/26ml	3	NDS NM PA
STELARA SOSY 45mg/0.5ml, 90mg/ml QL (1 syringe / 28 days)	3	NDS QL NM PA
TREMFYA SOAJ 200mg/2ml QL (2 pens / 28 days)	3	NDS QL NM PA
TREMFYA SOLN 200mg/20ml	3	NDS NM PA
TREMFYA SOPN 100mg/ml QL (1 pen / 28 days)	3	NDS QL NM PA
TREMFYA SOSY 100mg/ml QL (1 syringe / 28 days)	3	NDS QL NM PA
TREMFYA SOSY 200mg/2ml QL (2 syringes / 28 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Tier	Limits
TREMFYA INDUCTION PACK FO SOAJ 200mg/2ml QL (2 pens / 28 days)	3	NDS QL NM PA
TREMFYA PEN SOAJ 100mg/ml QL (1 pen / 28 days)	3	NDS QL NM PA
TYENNE SOAJ 162mg/0.9ml QL (4 pens / 28 days)	3	NDS QL NM PA
TYENNE SOLN 80mg/4ml, 200mg/10ml, 400mg/20ml	3	NDS NM PA
TYENNE SOSY 162mg/0.9ml QL (4 syringes / 28 days)	3	NDS QL NM PA
USTEKINUMAB SOLN 45mg/0.5ml QL (1 vial / 28 days)	3	NDS QL NM PA
USTEKINUMAB SOLN 130mg/26ml	3	NDS NM PA
USTEKINUMAB SOSY 45mg/0.5ml, 90mg/ml QL (1 syringe / 28 days)	3	NDS QL NM PA
VELSIPITY TABS 2mg QL (30 tabs / 30 days)	3	NDS QL NM PA
XELJANZ SOLN 1mg/ml QL (480 mL / 24 days)	3	NDS QL NM PA
XELJANZ TABS 5mg, 10mg QL (60 tabs / 30 days)	3	NDS QL NM PA
XELJANZ XR TB24 11mg, 22mg QL (30 tabs / 30 days)	3	NDS QL NM PA
YESINTEK SOLN 45mg/0.5ml QL (1 vial / 28 days)	2	QL NM PA
YESINTEK SOLN 130mg/26ml	2	NM PA
YESINTEK SOSY 45mg/0.5ml QL (1 syringe / 28 days)	2	QL NM PA
YESINTEK SOSY 90mg/ml QL (1 syringe / 28 days)	3	NDS QL NM PA
<i>DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDS)</i>		
<i>hydroxychloroquine sulfate</i> TABs 100mg, 300mg, 400mg	1	
<i>hydroxychloroquine sulfate</i> (generic of PLAQUENIL) TABs 200mg	1	
JYLAMVO SOLN 2mg/ml	3	B/D

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>leflunomide</i> (generic of ARAVA) TABS 10mg, 20mg QL (30 tabs / 30 days)	1	QL
<i>methotrexate sodium</i> TABS 2.5mg	1	
SOVUNA TABS 300mg	3	
TREXALL TABS 5mg, 7.5mg, 10mg, 15mg	3	B/D
XATMEP SOLN 2.5mg/ml	3	B/D
IMMUNOGLOBULINS		
ALYGLO SOLN 5gm/50ml, 10gm/100ml, 20gm/200ml	3	NDS NM PA
BIVIGAM SOLN 5gm/50ml, 10%	3	NDS NM PA
CUTAQUIG SOLN 1gm/6ml, 1.65gm/10ml, 2gm/12ml, 3.3gm/20ml, 4gm/24ml, 8gm/48ml	3	NDS NM PA
CUVITRU SOLN 1gm/5ml, 2gm/10ml, 4gm/20ml, 8gm/40ml, 10gm/50ml	3	NDS NM PA
CYTOGAM SOLN 50mg/ml	3	NDS B/D NM
FLEBOGAMMA DIF SOLN 5gm/100ml, 10gm/200ml, 20gm/400ml	3	NDS NM PA
GAMASTAN INJ	3	B/D NM
GAMMAGARD LIQUID SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 30gm/300ml	3	NDS NM PA
GAMMAGARD S/D IGA LESS TH SOLR 5gm, 10gm	3	NDS NM PA
GAMMAKED SOLN 1gm/10ml, 5gm/50ml, 10gm/100ml, 20gm/200ml	3	NDS NM PA
GAMMAPLEX SOLN 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 20gm/400ml	3	NDS NM PA
GAMUNEX-C SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 40gm/400ml	3	NDS NM PA
HEPAGAM B SOLN 312unit/ml	3	NDS B/D NM

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
HIZENTRA SOLN 1gm/5ml, 2gm/10ml, 4gm/20ml, 10gm/50ml; SOSY 1gm/5ml, 2gm/10ml, 4gm/20ml, 10gm/50ml	3	NDS NM PA
HYQVIA INJ 2.5-200	3	NDS NM PA
HYQVIA INJ 5-400	3	NDS NM PA
HYQVIA INJ 10-800	3	NDS NM PA
HYQVIA INJ 20-1600	3	NDS NM PA
HYQVIA INJ 30-2400	3	NDS NM PA
OCTAGAM SOLN 1gm/20ml, 2gm/20ml, 2.5gm/50ml, 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 30gm/300ml	3	NDS NM PA
PANZYGA SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 30gm/300ml	3	NDS NM PA
PRIVIGEN SOLN 5gm/50ml, 10gm/100ml, 20gm/200ml, 40gm/400ml	3	NDS NM PA
XEMBIFY SOLN 1gm/5ml, 2gm/10ml, 4gm/20ml, 10gm/50ml	3	NDS NM PA
YIMMUGO SOLN 5gm/50ml, 10gm/100ml, 20gm/200ml	3	NDS NM PA
IMMUNOMODULATORS		
ACTIMMUNE SOLN 100mcg/0.5ml	3	NDS NM PA
ARCALYST SOLR 220mg	3	NDS NM PA
GRASTEK SUBL 2800bau	3	PA
ILARIS SOLN 150mg/ml	3	NDS NM PA
IMAAVY SOLN 300mg/1.62ml, 1200mg/6.5ml	3	NDS NM PA
JOENJA TABS 70mg QL (60 tabs / 30 days)	3	NDS QL NM PA
ODACTRA SUB	3	PA
PALFORZIA CAP ESCALAT	3	NDS NM PA
PALFORZIA CAP LEVEL 3	3	NDS NM PA
PALFORZIA CAP LEVEL 7	3	NDS NM PA
PALFORZIA CAP LEVEL 8	3	NDS NM PA
PALFORZIA CAP LEVEL 10	3	NDS NM PA
PALFORZIA LEVEL 1 CSPK 1mg	3	NDS NM PA
PALFORZIA LEVEL 2 CSPK 1mg	3	NDS NM PA

Drug Name	Drug Requirements/ Tier	Limits
PALFORZIA LEVEL 4 CSPK 20mg	3	NDS NM PA
PALFORZIA LEVEL 5 CSPK 20mg	3	NDS NM PA
PALFORZIA LEVEL 6 CSPK 20mg	3	NDS NM PA
PALFORZIA LEVEL 9 CSPK 100mg	3	NDS NM PA
PALFORZIA LEVEL 11 (MAINT PACK 300mg)	3	NDS NM PA
PALFORZIA LEVEL 11 (TITRA PACK 300mg)	3	NDS NM PA
RAGWITEK SUBL 12amba1-u	3	PA
RYSTIGGO SOLN 280mg/2ml, 420mg/3ml, 560mg/4ml, 840mg/6ml	3	NDS NM PA
VYVGART SOLN 400mg/20ml	3	NDS NM PA
VYVGART INJ HYTRULO	3	NDS NM PA
ZILBRYSQ SOSY 16.6mg/0.416ml, 23mg/0.574ml, 32.4mg/0.81ml QL (28 syringes / 28 days)	3	NDS QL NM PA
IMMUNOSUPPRESSANTS		
ASTAGRAF XL CP24 5mg	3	NDS B/D NM
ASTAGRAF XL CP24 .5mg, 1mg	3	B/D NM
ATGAM SOLN 50mg/ml	3	NDS B/D
azasan TABS 75mg, 100mg	1	B/D
azathioprine (generic of IMURAN) TABS 50mg	1	B/D
azathioprine TABS 75mg, 100mg	1	B/D
BENLYSTA SOAJ 200mg/ml QL (8 pens / 28 days)	3	NDS QL NM PA
BENLYSTA SOLR 120mg, 400mg	3	NDS NM PA
BENLYSTA SOSY 200mg/ml QL (8 syringes / 28 days)	3	NDS QL NM PA
cyclosporine (generic of SANDIMMUNE) CAPS 25mg, 100mg	1	B/D NM

Drug Name	Drug Requirements/ Tier	Limits
cyclosporine modified (for microemulsion) (generic of NEORAL) CAPS 25mg, 100mg; SOLN 100mg/ml	1	B/D NM
cyclosporine modified (for microemulsion) CAPS 50mg	1	B/D NM
ENVARBUS XR TB24 4mg	3	NDS B/D NM
ENVARBUS XR TB24 .75mg, 1mg	3	B/D NM
everolimus (immunosuppressant) (generic of ZORTRESS) TABS .5mg, .75mg, 1mg	3	NDS B/D NM
everolimus (immunosuppressant) (generic of ZORTRESS) TABS .25mg	1	B/D NM
engraf (generic of NEORAL) CAPS 25mg, 100mg	1	B/D NM
LUPKYNIS CAPS 7.9mg	3	NDS NM PA
mycophenolate mofetil (generic of CELLCEPT) CAPS 250mg; TABS 500mg	1	B/D NM
mycophenolate mofetil (generic of CELLCEPT) SUSR 200mg/ml	3	NDS B/D NM
mycophenolate sodium (generic of MYFORTIC) TBEC 180mg, 360mg	1	B/D NM
MYHIBBIN SUSP 200mg/ml	3	NDS B/D NM
NIKTIMVO SOLN 9mg/0.18ml, 22mg/0.44ml	3	NDS NM PA
NULOJIX SOLR 250mg	3	NDS B/D NM
PROGRAF PACK .2mg, 1mg	3	B/D NM
REZUROCK TABS 200mg QL (30 tabs / 30 days)	3	NDS QL NM PA
SAPHNELO SOLN 300mg/2ml	3	NDS NM PA
sirolimus SOLN 1mg/ml; TABS .5mg, 1mg, 2mg	1	B/D NM
tacrolimus (generic of PROGRAF) CAPS .5mg, 1mg, 5mg	1	B/D NM
VACCINES		
ABRYSVO SOLR 120mcg/0.5ml	1	PA
ACTHIB INJ	1	
ADACEL INJ	1	

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
AREXVY SUSR 120mcg/0.5ml	1	PA
BCG VACCINE SOLR 50mg	1	
BEXSERO SUSY .5ml	1	
BOOSTRIX INJ	1	
DAPTACEL INJ	1	
DENG VAXIA SUS	1	
ENGERIX-B SUSP 20mcg/ml; SUSY 10mcg/0.5ml, 20mcg/ml	1	B/D
GARDASIL 9 SUSP .5ml; SUSY .5ml	1	
HAVRIX SUSY 720elu/0.5ml, 1440unit/ml	1	
HEPLISAV-B SOSY 20mcg/0.5ml	1	B/D
HIBERIX SOLR 10mcg	1	
IMOVAX RABIES (H.D.C.V.) SUSR 2.5unit/ml	1	B/D
INFANRIX INJ	1	
I POL INJ INACTIVE	1	
IXIARO INJ	1	
JYNNEOS SUSP .5ml	1	B/D
KINRIX INJ	1	
M-M-R II INJ	1	
MENQUADFI SOLN .5ml	1	
MENVEO INJ	1	
MENVEO SOL	1	
MRESVIA SUSY 50mcg/0.5ml	1	PA
PEDIARIX INJ 0.5ML	1	
PEDVAX HIB SUSP 7.5mcg/0.5ml	1	
PENBRAYA INJ	1	
PENMENVY INJ	1	
PENTACEL INJ	1	
PRIORIX INJ	1	
PROQUAD INJ	1	
QUADRACEL INJ 0.5ML	1	
RABAVERT INJ	1	B/D
RECOMBIVAX HB SUSP 5mcg/0.5ml, 10mcg/ml, 40mcg/ml; SUSY 5mcg/0.5ml, 10mcg/ml	1	B/D
ROTARIX SUS	1	

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
ROTATEQ SOL	1	
SHINGRIX SUSR 50mcg/0.5ml QL (2 vials per lifetime)	1	QL
TENIVAC INJ 5-2LF	1	B/D
TICOVAC SUSY 1.2mcg/0.25ml, 2.4mcg/0.5ml	1	
TRUMENBA SUSY .5ml	1	
TWINRIX INJ	1	
TYPHIM VI SOLN 25mcg/0.5ml; SOSY 25mcg/0.5ml	1	
VAQTA SUSP 25unit/0.5ml, 50unit/ml; SUSY 25unit/0.5ml, 50unit/ml	1	
VARIVAX SUSR 1350pfu/0.5ml	1	
VAXCHORA SUS	1	
VIMKUNYA SUSY 40mcg/0.8ml	1	
VIVOTIF CAP EC	1	
YF-VAX INJ	1	
NUTRITIONAL/SUPPLEMENTS		
<i>ELECTROLYTES/MINERALS, INJECTABLE</i>		
D2.5W/NACL INJ 0.45%	3	
D5W/LYTES INJ #48	3	
D5W/NACL INJ 0.2%	1	
D5W/NACL INJ 0.45%	1	
D10W/NACL INJ 0.2%	2	
D10W/NACL INJ 0.45%	1	
<i>dextrose 2.5% w/ sodium chloride 0.45% (generic of DEXTROSE 2.5%/SODIUM CHLO)</i>	1	
<i>dextrose 5% in lactated ringers</i>	1	
<i>dextrose 5% w/ sodium chloride 0.3% (generic of DEXTROSE 5%/SODIUM CHLORI)</i>	1	
<i>dextrose 5% w/ sodium chloride 0.9% (generic of DEXTROSE 5%/SODIUM CHLORI)</i>	1	

Drug Name	Drug Requirements/ Tier Limits	Drug Name	Drug Requirements/ Tier Limits
<i>dextrose 5% w/ sodium chloride 0.45%</i> (generic of DEXTROSE 5%/SODIUM CHLORI)	1	<i>kcl 40 meq/l (0.298%) in nacl 0.9% inj</i>	1
<i>dextrose 5% w/ sodium chloride 0.225%</i> (generic of DEXTROSE/SODIUM CHLORIDE)	1	KCL/D5W/LACT INJ 20MEQ/L	3
ISOLYTE-P INJ /D5W	3	KCL/D5W/NACL INJ 0.3/0.9%	3
ISOLYTE-S INJ	3	KCL/D5W/NACL INJ 0.15/0.2	1
ISOLYTE-S INJ PH 7.4	3	KCL/D5W/NACL INJ 0.15/0.9	3
<i>kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj</i> (generic of KCL 0.075%/D5W/NACL 0.45%)	1	KCL/D5W/NACL INJ 0.15/0.45	3
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj</i>	1	LACTATED RIN INJ	3
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj</i>	1	<i>lactated ringer's solution</i>	1
<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i> (generic of POTASSIUM CHLORIDE/SODIUM)	1	MAGNESIUM SULFATE SOLN 2gm/50ml, 4gm/100ml, 4gm/50ml, 20gm/500ml, 40gm/1000ml	2
<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i> (generic of POTASSIUM CHLORIDE/SODIUM)	1	<i>magnesium sulfate</i> (generic of MAGNESIUM SULFATE) SOLN 2gm/50ml, 4gm/100ml, 4gm/50ml, 20gm/500ml, 40gm/1000ml, 50%	2
<i>kcl 20 meq/l (0.149%) in nacl 0.9% inj</i>	1	<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i> (generic of MAGNESIUM SULFATE IN D5W)	2
<i>kcl 20 meq/l (0.149%) in nacl 0.45% inj</i>	1	<i>multiple electrolytes ph 5.5</i> (generic of PLASMA-LYTE A)	1
<i>kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj</i> (generic of POTASSIUM CHLORIDE/DEXTRO)	1	POT CHL 20MEQ/L IN NACL 0.9% INJ	3
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.9% inj</i> (generic of KCL 0.3%/D5W/NACL 0.9%)	1	POT CHL 20MEQ/L IN NACL 0.45% INJ	3
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj</i> (generic of KCL 0.3%/D5W/NACL 0.45%)	1	POT CHL 40MEQ/L IN NACL 0.9% INJ	3
<i>kcl 40 meq/l (0.3%) in nacl 0.9% inj</i> (generic of POTASSIUM CHLORIDE/SODIUM)	1	POT CHL/D5W INJ 20MEQ/L	3
		<i>potassium chloride</i> SOLN 2meq/ml	1
		<i>potassium chloride</i> (generic of POTASSIUM CHLORIDE) SOLN 10meq/100ml, 10meq/50ml, 20meq/100ml, 20meq/50ml, 40meq/100ml	1
		<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i> (generic of POTASSIUM CHLORIDE/DEXTRO)	1
		<i>sodium chloride</i> SOLN .45%, .9%, 2.5meq/ml, 3%, 5%	1
		TPN ELECTROL INJ	3 B/D

Information on the symbols, abbreviations, and what they mean can be found on the page prior to the start of the drug list.

Drug Name	Drug Requirements/ Tier	Limits
ELECTROLYTES/MINERALS/VITAMINS, ORAL		
<i>klor-con</i> PACK 20meq	1	
KLOR-CON 8 TBCR 8meq	1	
<i>klor-con 10</i> TBCR 10meq	1	
KLOR-CON 10 TBCR 10meq	1	
<i>klor-con m10</i> TBCR 10meq	1	
<i>klor-con m15</i> TBCR 15meq	1	
<i>klor-con m20</i> TBCR 20meq	1	
M-NATAL PLUS TAB	2	
POKONZA PACK 10meq	3	
POKONZA PACK 15meq	3	NDS
<i>potassium chloride</i> CPCR 8meq, 10meq; PACK 20meq; SOLN 10%, 20%; TBCR 10meq, 15meq, 20meq	1	
<i>potassium chloride</i> (generic of KLOR-CON 8) TBCR 8meq	1	
<i>potassium chloride</i> <i>microencapsulated crystals er</i> TBCR 10meq, 15meq, 20meq	1	
PRENATAL TAB 27-1MG	2	
PRENATAL TAB PLUS	2	
<i>sodium fluoride chew; tab; 1.1</i> <i>(0.5 f) mg/ml soln</i>	1	
WESTAB PLUS TAB 27-1MG	2	
IV NUTRITION		
<i>aminosyn ii soln 15%</i>	1	B/D
AMINOSYN INJ 10%	3	B/D
AMINOSYN-PF INJ 7%	3	B/D
AMINOSYN-PF INJ 10%	3	B/D
CLINIMIX E INJ 2.75/D5W	3	B/D
CLINIMIX E INJ 4.25/D5W	3	B/D
CLINIMIX E INJ 4.25/D10	3	B/D
CLINIMIX E INJ 5%/D15W	3	B/D
CLINIMIX E INJ 5%/D20W	3	B/D
CLINIMIX E INJ 8/10	3	B/D
CLINIMIX E INJ 8/14	3	B/D
CLINIMIX INJ 4.25/D5W	3	B/D
CLINIMIX INJ 4.25/D10	3	B/D
CLINIMIX INJ 5%/D15W	3	B/D
CLINIMIX INJ 5%/D20W	3	B/D
CLINIMIX INJ 6/5	3	B/D
CLINIMIX INJ 8/10	3	B/D
CLINIMIX INJ 8/14	3	B/D
<i>clinisol sf 15%</i>	1	B/D

Drug Name	Drug Requirements/ Tier	Limits
CLINOLIPID EMU 20%	3	B/D
<i>dextrose</i> (generic of DEXTROSE 5%) SOLN 5%	1	
<i>dextrose</i> (generic of DEXTROSE 10%) SOLN 10%	1	
<i>dextrose</i> SOLN 50%	1	B/D
DEXTROSE 10% SOLN 10%	1	
DEXTROSE 70% SOLN 70%	1	B/D
INTRALIPID EMUL 20gm/100ml, 30gm/100ml	3	B/D
KABIVEN EMU	3	NDS B/D
NUTRILIPID EMUL 20gm/100ml	3	B/D
<i>plenamine</i>	1	B/D
PREMASOL SOL 10%	3	NDS B/D
PROSOL INJ 20%	3	B/D
SMOFLIPID EMU	3	B/D
TRAVASOL INJ 10%	3	B/D
TROPHAMINE INJ 10%	3	B/D
OPHTHALMIC ANTI-INFECTIVE/ANTI-INFLAMMATORY		
<i>bacitracin-polymyxin- neomycin-hc ophth oint 1%</i>	1	
<i>loteprednol etabonate- tobramycin ophth susp 0.5- 0.3%</i>	1	
<i>neomycin-polymyxin- dexamethasone ophth oint 0.1% (generic of MAXITROL)</i>	1	
<i>neomycin-polymyxin- dexamethasone ophth susp 0.1% (generic of MAXITROL)</i>	1	
<i>neomycin-polymyxin-hc ophth susp</i>	1	
<i>sulfacetamide sodium- prednisolone ophth soln 10- 0.23(0.25)%</i>	1	
TOBRADEX OIN 0.3-0.1%	2	
TOBRADEX ST SUS 0.3-0.05	3	
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	1	
ZYLET SUS 0.5-0.3%	2	
ANTI-INFECTIVES		
AZASITE SOLN 1%	3	
<i>bacitracin (ophthalmic) OINT 500unit/gm</i>	1	

Drug Name	Drug Requirements/ Tier	Limits
<i>bacitracin-polymyxin b ophth oint</i>	1	
<i>besifloxacin hcl SUSP .6%</i>	1	
BESIVANCE SUSP .6%	2	
CILOXAN OINT .3%	2	
<i>ciprofloxacin hcl (ophth) SOLN .3%</i>	1	
<i>erythromycin (ophth) OINT 5mg/gm</i>	1	
<i>gatifloxacin (ophth) SOLN .5%</i>	1	
<i>gentamicin sulfate (ophth) SOLN .3%</i>	1	
<i>levofloxacin (ophth) SOLN .5%, 1.5%</i>	1	
<i>moxifloxacin hcl (ophth) SOLN .5%</i> QL (12 mL / 30 days)	1	QL
<i>moxifloxacin hcl (ophth) (generic of VIGAMOX) SOLN .5%</i> QL (12 mL / 30 days)	1	QL
NATACYN SUSP 5%	3	
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	1	
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	1	
<i>ofloxacin (ophth) (generic of OCUFLOX) SOLN .3%</i>	1	
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	1	
<i>sulfacetamide sodium (ophth) SOLN 10%</i>	1	
<i>tobramycin (ophth) SOLN .3%</i>	1	
TOBREX OINT .3%	3	
<i>trifluridine SOLN 1%</i>	1	
XDEMZY SOLN .25%	3	NDS NM PA
ZIRGAN GEL .15%	3	
ANTI-INFLAMMATORIES		
ACUVAIL SOLN .45%	3	
<i>bromfenac sodium (ophth) (generic of PROLENSA) SOLN .07%</i>	1	

Drug Name	Drug Requirements/ Tier	Limits
<i>bromfenac sodium (ophth) SOLN .09%</i>	1	
<i>bromfenac sodium (ophth) (generic of BROMSITE) SOLN .075%</i>	1	
<i>dexamethasone sodium phosphate (ophth) SOLN .1%</i>	1	
<i>diclofenac sodium (ophth) SOLN .1%</i>	1	
<i>difluprednate (generic of DUREZOL) EMUL .05%</i>	1	
FLAREX SUSP .1%	3	
<i>fluorometholone (ophth) (generic of FML LIQUIFILM) SUSP .1%</i>	1	
<i>flurbiprofen sodium SOLN .03%</i>	1	
FML FORTE SUSP .25%	3	
ILEVRO SUSP .3%	3	
INVELTYS SUSP 1%	3	
<i>ketorolac tromethamine (ophth) (generic of ACULAR LS) SOLN .4%</i>	1	
<i>ketorolac tromethamine (ophth) (generic of ACULAR) SOLN .5%</i>	1	
LOTEMAX OINT .5%	2	
LOTEMAX SM GEL .38%	2	
<i>loteprednol etabonate (generic of LOTEVIA) GEL .5%; SUSP .5%</i>	1	
<i>loteprednol etabonate (generic of ALREX) SUSP .2%</i>	1	
MAXIDEX SUSP .1%	3	
NEVANAC SUSP .1%	3	
PRED MILD SUSP .12%	3	
<i>prednisolone acetate (ophth) (generic of PRED FORTE) SUSP 1%</i>	1	
PREDNISOLONE SODIUM PHOSP SOLN 1%	2	
TRIESENCE SUSP 40mg/ml	3	PA
XIPERE SUSP 40mg/ml	3	NM PA
YUTIQ IMPL .18mg	3	NDS NM

Drug Name	Drug Requirements/ Tier Limits		Drug Name	Drug Requirements/ Tier Limits	
ANTIALLERGICS			ANTIALLERGICS		
azelastine hcl (ophth) SOLN .05%	1		timolol hemihydrate (ophth) (generic of BETIMOL) SOLN .5%	1	
bepotastine besilate (generic of BEPREVE) SOLN 1.5%	1		timolol maleate (ophth) .25%, .5%; SOLN .25%, .5%	SOLG 1	
cromolyn sodium (ophth) SOLN 4%	1		timolol maleate (ophth) once-daily (generic of ISTALOL) SOLN .5%	1	
epinastine hcl (ophth) SOLN .05%	1		timolol maleate (ophth) pf (generic of TIMOPTIC OCUDOSE) SOLN .25%, .5%	1	
ZERVIATE SOLN .24%	3		travoprost (generic of TRAVATAN Z) SOLN .004%	1	
ANTIGLAUCOMA			MISCELLANEOUS		
betaxolol hcl (ophth) SOLN .5%	1		VYZULTA SOLN .024%	3	
brimonidine tartrate (generic of ALPHAGAN P) SOLN .1%, .15%	1		ATROPINE SULFATE SOLN 2 1%		
brimonidine tartrate SOLN .2%	1		atropine sulfate (ophthalmic) SOLN 1%	1	
brimonidine tartrate-timolol maleate ophth soln 0.2-0.5% (generic of COMBIGAN)	1		BEOVU SOSY 6mg/0.05ml	3	NDS NM PA
brinzolamide (generic of AZOPT) SUSP 1%	1	ST	BYOOVIZ SOLN .5mg/0.05ml	3	NDS NM PA
carteolol hcl (ophth) SOLN 1%	1		CIMERLI SOLN .3mg/0.05ml, .5mg/0.05ml	3	NDS NM PA
COMBIGAN SOL 0.2/0.5%	2		CYSTADROPS SOLN .37%	3	NDS NM PA
dorzolamide hcl SOLN 2%	1		CYSTARAN SOLN .44%	3	NDS NM PA
dorzolamide hcl-timolol maleate ophth soln 2-0.5% (generic of COSOPT)	1		EYLEA SOLN 2mg/0.05ml; SOSY 2mg/0.05ml	3	NDS NM PA
dorzolamide hcl-timolol maleate pf ophth soln 2-0.5% (generic of COSOPT PF)	1		EYLEA HD SOLN 8mg/0.07ml	3	NDS NM PA
IYUZEH SOLN .005%	3	ST	EYSUVIS SUSP .25%	3	
latanoprost (generic of XALATAN) SOLN .005%	1		IZERVAY SOLN 2mg/0.1ml	3	NDS NM PA
levobunolol hcl SOLN .5%	1		LUCENTIS SOSY .3mg/0.05ml, .5mg/0.05ml	3	NDS NM PA
LUMIGAN SOLN .01%	2		MIEBO SOLN 1.338gm/ml	2	
PHOSPHOLINE IODIDE SOLR .125%	3	NDS NM	OXERVATE SOLN .002% QL (112 mL / year)	3	NDS QL NM PA
pilocarpine hcl SOLN 1%, 2%, 4%	1		PAVBLU SOSY 2mg/0.05ml	3	NDS NM PA
RHOPRESSA SOLN .02%	2		proparacaine hcl (generic of ALCAINE) SOLN .5%	1	
ROCKLATAN DRO	2		RESTASIS EMUL .05%	2	
SIMBRINZA SUS 1-0.2%	3		RESTASIS MULTIDOSE EMUL .05%	2	
			SUSVIMO SOLN 10mg/0.1ml	3	NDS NM PA
			SYFOVRE SOLN 15mg/0.1ml	3	NDS NM PA

Drug Name	Drug Requirements/ Tier	Limits
VABYSMO SOLN 6mg/0.05ml; SOSY 6mg/0.05ml	3	NDS NM PA
XIIDRA SOLN 5%	2	
OTIC		
OTIC AGENTS		
<i>acetic acid (otic)</i> SOLN 2%	1	
CIPRO HC SUS 0.2-1%OT	3	
<i>ciprofloxacin hcl (otic)</i> (generic of CETRAXAL) SOLN .2%	1	
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	1	
<i>ciprofloxacin-hydrocortisone otic susp 0.2-1%</i> (generic of CIPRO HC)	1	
CORTISPORIN SUS -TC OTIC	3	
<i>flac</i> (generic of DERMOTIC) OIL .01%	1	
<i>fluocinolone acetonide (otic)</i> (generic of DERMOTIC) OIL .01%	1	
<i>hydrocortisone w/ acetic acid otic soln 1-2%</i>	1	
<i>neomycin-polymyxin-hc otic soln 1%</i>	1	
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	1	
<i>ofloxacin (otic)</i> SOLN .3%	1	
RESPIRATORY		
ANTICHOLINERGIC/BETA AGONIST COMBINATIONS		
ANORO ELLIPT AER 62.5-25 QL (60 blisters / 30 days)	2	QL
BEVESPI AER 9-4.8MCG QL (1 inhaler / 30 days)	2	QL
BREZTRI AERO AER SPHERE QL (1 inhaler / 30 days)	2	QL
BREZTRI AERO AER SPHERE (INSTITUTIONAL PACK) QL (4 inhalers / 28 days)	2	QL
COMBIVENT AER 20-100 QL (2 inhalers / 30 days)	3	QL

Drug Name	Drug Requirements/ Tier	Limits
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	1	B/D
TRELEGY AER ELLIPTA 100-62.5-25 MCG QL (60 blisters / 30 days)	2	QL
TRELEGY AER ELLIPTA 200-62.5-25 MCG QL (60 blisters / 30 days)	2	QL
ANTICHOLINERGICS		
ATROVENT HFA AERS 17mcg/act QL (2 inhalers / 30 days)	3	QL
INCRUSE ELLIPTA AEPB 62.5mcg/inh QL (30 blisters / 30 days)	2	QL
<i>ipratropium bromide</i> SOLN .02%	1	B/D
<i>ipratropium bromide (nasal)</i> SOLN .03%, .06%	1	
SPIRIVA RESPIMAT AERS 1.25mcg/act, 2.5mcg/act QL (1 inhaler / 30 days)	3	QL
<i>tiotropium bromide</i> (generic of SPIRIVA HANDIHALER) CAPS 18mcg QL (30 caps / 30 days)	1	QL
ANTI HISTAMINE COMBINATIONS		
<i>azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act</i> (generic of DYMISTA) QL (1 bottle / 30 days)	1	QL
CLARINEX-D TAB 2.5-120 <i>promethazine & phenylephrine syrup 6.25-5 mg/5ml</i> PA applies if 65 years and older	3 2	PA
RYALTRIS SPR 665-25 QL (29 gm / 30 days)	3	QL
ANTI HISTAMINES		
<i>azelastine hcl</i> SOLN .1%	1	

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
<i>carbinoxamine maleate</i> SOLN 4mg/5ml; SUER 4mg/5ml PA applies if 65 years and older	3	PA	<i>levocetirizine dihydrochloride</i> TABS 5mg QL (30 tabs / 30 days)	1	QL
<i>carbinoxamine maleate</i> TABS 4mg PA applies if 65 years and older	2	PA	<i>olopatadine hcl (nasal)</i> SOLN .6%	1	
<i>carbzah</i> SOLN 4mg/5ml PA applies if 65 years and older	3	PA	QUZYTIR SOLN 10mg/ml QL (30 mL / 30 days)	3	NDS QL PA
<i>cetirizine hcl</i> SOLN 5mg/5ml QL (300 mL / 30 days)	1	QL	BETA AGONISTS		
<i>clemastine fumarate</i> TABS 2.68mg PA applies if 65 years and older	2	PA	<i>albuterol sulfate</i> AERS 108mcg/act QL (2 inhalers / 30 days) (generic of Proair HFA)	1	QL
<i>ciproheptadine hcl</i> SYRP 2mg/5ml; TABS 4mg PA applies if 65 years and older after a 30 day supply in a calendar year	2	PA	<i>albuterol sulfate</i> AERS 108mcg/act QL (2 inhalers / 30 days) (generic of Proventil HFA)	1	QL
<i>desloratadine</i> (generic of CLARINEX) TABS 5mg QL (30 tabs / 30 days)	1	QL	<i>albuterol sulfate</i> AERS 108mcg/act QL (2 inhalers / 30 days) (generic of Ventolin HFA)	1	QL
<i>desloratadine</i> TBDP 2.5mg, 5mg QL (30 tabs / 30 days)	1	QL	<i>albuterol sulfate</i> NEBU .083%, .63mg/3ml, 1.25mg/3ml, 2.5mg/0.5ml	1	B/D
<i>diphenhydramine hcl</i> SOLN 50mg/ml	1		<i>albuterol sulfate</i> SYRP 2mg/5ml; TABS 2mg, 4mg	1	
<i>hydroxyzine hcl</i> SOLN 25mg/ml, 50mg/ml PA applies if 65 years and older	3	PA	<i>arformoterol tartrate</i> NEBU 15mcg/2ml	1	B/D
<i>hydroxyzine hcl</i> SYRP 10mg/5ml; TABS 10mg, 25mg, 50mg PA applies if 65 years and older after a 30 day supply in a calendar year	2	PA	<i>formoterol fumarate</i> (generic of PERFOROMIST) NEBU 20mcg/2ml	1	B/D
<i>hydroxyzine pamoate</i> CAPS 25mg, 50mg, 100mg PA applies if 65 years and older after a 30 day supply in a calendar year	2	PA	<i>levalbuterol hcl</i> NEBU .31mg/3ml, .63mg/3ml, 1.25mg/0.5ml, 1.25mg/3ml	1	B/D
<i>levocetirizine dihydrochloride</i> SOLN 2.5mg/5ml QL (300 mL / 30 days)	1	QL	<i>levalbuterol tartrate</i> AERO 45mcg/act QL (2 inhalers / 30 days)	1	QL ST
			SEREVENT DISKUS AEPB 50mcg/dose QL (60 inhalations / 30 days)	2	QL
			STRIVERDI RESPIMAT AERS 2.5mcg/act QL (1 inhaler / 30 days)	3	QL
			<i>terbutaline sulfate</i> SOLN 1mg/ml; TABS 2.5mg, 5mg	1	
			VENTOLIN HFA AERS 108mcg/act QL (2 inhalers / 30 days)	2	QL

Information on the symbols, abbreviations, and what they mean can be found on the page prior to the start of the drug list.

Drug Name	Drug Requirements/ Limits		Drug Name	Drug Requirements/ Limits	
	Tier	Limits		Tier	Limits
VENTOLIN HFA (INSTITUTIONAL PACK) AERS 108mcg/act QL (6 inhalers / 30 days)	2	QL	KALYDECO PACK 5.8mg, 13.4mg, 25mg, 50mg, 75mg QL (56 packets / 28 days)	3	NDS QL NM PA
LEUKOTRIENE MODULATORS			KALYDECO TABS 150mg QL (60 tabs / 30 days)	3	NDS QL NM PA
<i>montelukast sodium</i> (generic of SINGULAIR) CHEW 4mg, 5mg; PACK 4mg; TABS 10mg	1		OFEV CAPS 100mg, 150mg QL (60 caps / 30 days)	3	NDS QL NM PA
<i>zafirlukast</i> (generic of ACCOLATE) TABS 10mg, 20mg	1		OHTUVAYRE SUSP 3mg/2.5ml	3	NDS NM PA
MISCELLANEOUS			ORKAMBI GRA 75-94MG QL (56 packets / 28 days)	3	NDS QL NM PA
<i>acetylcysteine</i> SOLN 10%, 20%	1	B/D	ORKAMBI GRA 100-125 QL (56 packets / 28 days)	3	NDS QL NM PA
ALYFTREK TAB 4-20-50 QL (84 tabs / 28 days)	3	NDS QL NM PA	ORKAMBI GRA 150-188 QL (56 packets / 28 days)	3	NDS QL NM PA
ALYFTREK TAB 10-50-125 QL (56 tabs / 28 days)	3	NDS QL NM PA	ORKAMBI TAB 100-125 QL (112 tabs / 28 days)	3	NDS QL NM PA
ARALAST NP SOLR 500mg, 1000mg	3	NDS NM PA	ORKAMBI TAB 200-125 QL (112 tabs / 28 days)	3	NDS QL NM PA
BRINSUPRI TABS 10mg, 25mg QL (30 tabs / 30 days)	3	NDS QL NM PA	<i>pirfenidone</i> CAPS 267mg QL (270 caps / 30 days)	3	NDS QL NM PA
<i>cromolyn sodium</i> NEBU 20mg/2ml	1	B/D	<i>pirfenidone</i> (generic of ESBRIET) TABS 267mg QL (270 tabs / 30 days)	3	NDS QL NM PA
<i>elixophyllin</i> ELIX 80mg/15ml	3	NDS	<i>pirfenidone</i> TABS 534mg QL (90 tabs / 30 days)	3	NDS QL NM PA
<i>epinephrine (anaphylaxis)</i> (generic of EPIPEN 2-PAK) SOAJ .3mg/0.3ml (generic of EpiPen)	1		<i>pirfenidone</i> (generic of ESBRIET) TABS 801mg QL (90 tabs / 30 days)	3	NDS QL NM PA
<i>epinephrine (anaphylaxis)</i> (generic of EPIPEN-JR 2- PAK) SOAJ .15mg/0.3ml (generic of EpiPen)	1		PROLASTIN-C SOLN 1000mg/20ml	3	NDS NM PA
<i>epinephrine (anaphylaxis)</i> SOAJ .15mg/0.15ml, .3mg/0.3ml (generic of Adrenaclick)	1		PULMOZYME SOLN 2.5mg/2.5ml	3	NDS NM PA
FASENRA SOSY 10mg/0.5ml, 30mg/ml QL (1 syringe / 28 days)	3	NDS QL NM PA	<i>roflumilast</i> (generic of DALIRESP) TABS 250mcg QL (56 tabs / year)	1	QL
FASENRA PEN SOAJ 30mg/ml QL (1 pen / 28 days)	3	NDS QL NM PA	<i>roflumilast</i> (generic of DALIRESP) TABS 500mcg QL (30 tabs / 30 days)	1	QL
GLASSIA SOLN 4gm/200ml, 5gm/250ml, 1000mg/50ml	3	NDS NM PA	SYMDEKO TAB 50-75MG QL (56 tabs / 28 days)	3	NDS QL NM PA
			SYMDEKO TAB 100-150 QL (56 tabs / 28 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Tier Limits	
THEO-24 CP24 100mg, 200mg, 300mg, 400mg	3	
<i>theophylline</i> ELIX 80mg/15ml; SOLN 80mg/15ml; TB12 100mg, 200mg, 300mg, 450mg; TB24 400mg, 600mg	1	
TRIKAFTA PAK 59.5MG QL (56 packs / 28 days)	3	NDS QL NM PA
TRIKAFTA PAK 75MG QL (56 packs / 28 days)	3	NDS QL NM PA
TRIKAFTA TAB 50-25- 37.5MG & 75MG QL (84 tabs / 28 days)	3	NDS QL NM PA
TRIKAFTA TAB 100-50-75MG & 150MG QL (84 tabs / 28 days)	3	NDS QL NM PA
XOLAIR SOAJ 75mg/0.5ml, 300mg/2ml QL (4 pens / 28 days)	3	NDS QL NM PA
XOLAIR SOAJ 150mg/ml QL (8 pens / 28 days)	3	NDS QL NM PA
XOLAIR SOLR 150mg QL (8 vials / 28 days)	3	NDS QL NM PA
XOLAIR SOSY 75mg/0.5ml, 300mg/2ml QL (4 syringes / 28 days)	3	NDS QL NM PA
XOLAIR SOSY 150mg/ml QL (8 syringes / 28 days)	3	NDS QL NM PA
ZEMAIRA SOLR 1000mg, 4000mg, 5000mg	3	NDS NM PA
NASAL STEROIDS		
<i>flunisolide (nasal)</i> SOLN .025% QL (3 bottles / 30 days)	1	QL
<i>fluticasone propionate (nasal)</i> SUSP 50mcg/act QL (1 bottle / 30 days)	1	QL
<i>mometasone furoate (nasal)</i> SUSP 50mcg/act QL (2 bottles / 30 days)	1	QL
OMNARIS SUSP 50mcg/act QL (1 inhaler / 30 days)	3	QL ST
QNASL AERS 80mcg/act QL (1 inhaler / 30 days)	3	QL ST

Drug Name	Drug Requirements/ Tier Limits	
QNASL CHILDRENS AERS 40mcg/act QL (1 inhaler / 30 days)	3	QL ST
XHANCE EXHU 93mcg/act QL (32 mL / 30 days)	3	QL PA
STEROID INHALANTS		
ALVESCO AERS 80mcg/act QL (3 inhalers / 30 days)	3	QL
ALVESCO AERS 160mcg/act QL (2 inhalers / 30 days)	3	QL
ARNUITY ELLIPTA AEPB 50mcg/act, 100mcg/act, 200mcg/act QL (30 inhalations / 30 days)	2	QL
<i>budesonide (inhalation)</i> (generic of PULMICORT) SUSP .25mg/2ml, .5mg/2ml, 1mg/2ml	1	B/D
STEROID/BETA-AGONIST COMBINATIONS		
ADVAIR HFA AER 45/21 QL (1 inhaler / 30 days)	2	QL
ADVAIR HFA AER 115/21 QL (1 inhaler / 30 days)	2	QL
ADVAIR HFA AER 230/21 QL (1 inhaler / 30 days)	2	QL
AIRSUPRA AER 90-80MCG QL (3 inhalers / 30 days)	2	QL
BREO ELLIPTA INH 50- 25MCG QL (60 blisters / 30 days)	2	QL
BREO ELLIPTA INH 100-25 QL (60 blisters / 30 days)	2	QL
BREO ELLIPTA INH 200-25 QL (60 blisters / 30 days)	2	QL
<i>breynga</i> (generic of SYMBICORT) QL (3 inhalers / 30 days)	1	QL
<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i> (generic of SYMBICORT) QL (3 inhalers / 30 days)	1	QL

Drug Name	Tier	Drug Requirements/ Limits
<i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</i> (generic of SYMBICORT) QL (3 inhalers / 30 days)	1	QL
DULERA AER 50-5MCG QL (3 inhalers / 30 days)	3	QL
DULERA AER 100-5MCG QL (3 inhalers / 30 days)	3	QL
DULERA AER 200-5MCG QL (3 inhalers / 30 days)	3	QL
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act</i> (generic of ADVAIR DISKUS) QL (60 inhalations / 30 days) (generic PRASCO not covered)	1	QL
<i>fluticasone-salmeterol aer powder ba 250-50 mcg/act</i> (generic of ADVAIR DISKUS) QL (60 inhalations / 30 days) (generic PRASCO not covered)	1	QL
<i>fluticasone-salmeterol aer powder ba 500-50 mcg/act</i> (generic of ADVAIR DISKUS) QL (60 inhalations / 30 days) (generic PRASCO not covered)	1	QL
<i>wixela inhub</i> (generic of ADVAIR DISKUS) QL (60 inhalations / 30 days)	1	QL
TOPICAL DERMATOLOGY, ACNE		
ABSORICA LD CAPS 8mg, 16mg, 24mg, 32mg	3	NDS PA
<i>accutane</i> CAPS 10mg, 20mg, 30mg, 40mg	1	PA
<i>adapalene</i> (generic of DIFFERIN) CREA .1%; GEL .3% QL (45 gm / 30 days)	1	QL PA
ADAPALENE SOLN .1% QL (120 mL / 30 days)	3	QL PA

Drug Name	Tier	Drug Requirements/ Limits
<i>adapalene-benzoyl peroxide gel 0.1-2.5%</i> (generic of EPIDUO) QL (45 gm / 30 days)	1	QL PA
<i>adapalene-benzoyl peroxide gel 0.3-2.5%</i> (generic of EPIDUO FORTE) QL (60 gm / 30 days)	1	QL PA
AKLIEF CREA .005% QL (45 gm / 30 days)	3	QL PA
ALTRENO LOTN .05% QL (45 gm / 30 days)	3	QL PA
<i>amnestem</i> CAPS 10mg, 20mg, 30mg, 40mg	1	PA
AMZEEQ FOAM 4% QL (30 gm / 30 days)	3	QL PA
ARAZLO LOTN .045% QL (45 gm / 30 days)	3	QL PA
AZELEX CREA 20% QL (50 gm / 30 days)	3	QL PA
<i>benzoyl peroxide-erythromycin gel 5-3%</i> (generic of BENZAMYCIN) QL (46.6 gm / 30 days)	1	QL
CABTREGO GEL QL (50 gm / 30 days)	3	NDS QL PA
<i>claravis</i> CAPS 10mg, 20mg, 30mg, 40mg	1	PA
<i>clindacin</i> FOAM 1% QL (100 gm / 30 days)	1	QL
<i>clindacin etz pledgets</i> SWAB 1% QL (69 pledgets / 30 days)	1	QL
<i>clindacin-p</i> SWAB 1% QL (69 pledgets / 30 days)	1	QL
<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i> QL (45 gm / 30 days)	1	QL
<i>clindamycin phosphate (topical)</i> FOAM 1% QL (100 gm / 30 days)	1	QL
<i>clindamycin phosphate (topical)</i> (generic of CLINDAGEL) GEL 1% QL (75 mL / 30 days)	1	QL PA

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>clindamycin phosphate (topical)</i> (generic of CLEOCIN-T) LOTN 1% QL (60 mL / 30 days)	1	QL
<i>clindamycin phosphate (topical)</i> SOLN 1% QL (60 mL / 30 days)	1	QL
<i>clindamycin phosphate (topical)</i> SWAB 1% QL (69 pledgets / 30 days)	1	QL
<i>clindamycin phosphate-benzoyl peroxide gel 1-5%</i> QL (50 gm / 30 days)	1	QL
<i>clindamycin phosphate-benzoyl peroxide gel 1.2-2.5%</i> (generic of ACANYA) QL (50 gm / 30 days)	1	QL
<i>clindamycin phosphate-benzoyl peroxide gel 1.2-3.75%</i> (generic of ONEXTON) QL (50 gm / 30 days)	1	QL
<i>clindamycin phosphate-tretinoin gel 1.2-0.025%</i> QL (60 gm / 30 days)	1	QL PA
<i>dapsone (topical)</i> GEL 5% QL (90 gm / 30 days)	1	QL
<i>dapsone (topical)</i> (generic of ACZONE) GEL 7.5% QL (90 gm / 30 days)	1	QL
<i>ery</i> PADS 2% QL (60 pledgets / 30 days)	1	QL
<i>erythromycin (acne aid)</i> GEL 2% QL (60 gm / 30 days)	1	QL
<i>erythromycin (acne aid)</i> SOLN 2% QL (60 mL / 30 days)	1	QL
FABIOR FOAM .1% QL (100 gm / 30 days)	3	QL PA
<i>isotretinoin</i> CAPS 10mg, 20mg, 30mg, 40mg	1	PA
<i>isotretinoin</i> (generic of ABSORICA) CAPS 25mg, 35mg	1	PA
<i>neuac gel 1.2-5%</i> QL (45 gm / 30 days)	1	QL

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
RETIN-A MICRO GEL .06% QL (50 gm / 30 days)	3	QL PA
<i>sulfacetamide sodium (acne)</i> (generic of KLARON) LOTN 10% QL (118 mL / 30 days)	1	QL
TAZAROTENE FOAM .1% QL (100 gm / 30 days)	3	QL PA
<i>tretinoin</i> (generic of RETIN-A) CREA .025%, .05%, .1%; GEL .01%, .025% QL (45 gm / 30 days)	1	QL PA
<i>tretinoin</i> (generic of ATRALIN) GEL .05% QL (45 gm / 30 days)	1	QL PA
<i>tretinoin microsphere</i> GEL .04%, .1% QL (50 gm / 30 days)	1	QL PA
<i>tretinoin microsphere</i> (generic of RETIN-A MICRO PUMP) GEL .08% QL (50 gm / 30 days)	1	QL PA
<i>twice-daily clindamycin phosphate (topical)</i> GEL 1% QL (60 gm / 30 days)	1	QL
TWYNEO CRE 0.1-3% QL (30 gm / 30 days)	3	QL PA
WINLEVI CREA 1% QL (60 gm / 30 days)	3	QL PA
<i>zenatane</i> CAPS 10mg, 20mg, 30mg, 40mg	1	PA
DERMATOLOGY, ANTIBIOTICS		
<i>gentamicin sulfate (topical)</i> CREA .1%; OINT .1% QL (30 gm / 30 days)	1	QL
<i>mupirocin</i> OINT 2% QL (220 gm / 30 days)	1	QL
<i>silver sulfadiazine</i> (generic of SILVADENE) CREA 1%	1	
<i>ssd</i> (generic of SILVADENE) CREA 1%	1	
SULFAMYLON CREA 85mg/gm QL (453.6 gm / 30 days)	3	QL
DERMATOLOGY, ANTIFUNGALS		
<i>ciclopirox</i> GEL .77% QL (100 gm / 30 days)	1	QL

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>ciclopirox SHAM</i> 1% QL (120 mL / 30 days)	1	QL
<i>ciclopirox olamine</i> CREA .77% QL (90 gm / 30 days)	1	QL
<i>ciclopirox olamine</i> SUSP .77% QL (60 mL / 30 days)	1	QL
<i>clotrimazole (topical)</i> CREA 1% QL (45 gm / 30 days)	1	QL
<i>clotrimazole (topical)</i> SOLN 1% QL (60 mL / 30 days)	1	QL
<i>clotrimazole w/ betamethasone cream 1- 0.05%</i> QL (45 gm / 30 days)	1	QL
<i>econazole nitrate</i> CREA 1% QL (85 gm / 30 days)	1	QL
JUBLIA SOLN 10% QL (8 mL / 30 days)	3	NDS QL
<i>ketoconazole (topical)</i> CREA 2% QL (60 gm / 30 days)	1	QL
<i>ketoconazole (topical)</i> SHAM 2% QL (120 mL / 30 days)	1	QL
<i>klayesta</i> POWD 100000unit/gm QL (60 gm / 30 days)	1	QL
<i>miconazole-zinc oxide-white petrolatum oint 0.25-15- 81.35%</i> QL (50 gm / 30 days)	1	QL PA
<i>naftifine hcl</i> CREA 1% QL (90 gm / 30 days)	1	QL
<i>naftifine hcl</i> CREA 2% QL (60 gm / 30 days)	1	QL
<i>naftifine hcl</i> (generic of NAFTIN) GEL 2% QL (60 gm / 30 days)	1	QL
<i>nyamyc</i> POWD 100000unit/gm QL (60 gm / 30 days)	1	QL

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>nystatin (topical)</i> CREA 100000unit/gm; OINT 100000unit/gm QL (30 gm / 30 days)	1	QL
<i>nystatin (topical)</i> POWD 100000unit/gm QL (60 gm / 30 days)	1	QL
<i>nystop</i> POWD 100000unit/gm QL (60 gm / 30 days)	1	QL
OXISTAT LOTN 1% QL (60 mL / 30 days)	3	QL PA
<i>selenium sulfide</i> LOTN 2.5% ZORYVE FOAM .3% QL (60 gm / 30 days)	1 3	PA QL PA
DERMATOLOGY, ANTIPSORIATICS		
<i>acitretin</i> CAPS 10mg, 17.5mg, 25mg	1	PA
<i>calcipotriene</i> CREA .005%; OINT .005% QL (120 gm / 30 days)	1	QL PA
CALCIPOTRIENE FOAM .005% QL (120 gm / 30 days)	3	NDS QL PA
<i>calcipotriene</i> SOLN .005% QL (120 mL / 30 days)	1	QL PA
<i>calcitrene</i> OINT .005% QL (120 gm / 30 days)	1	QL PA
ENSTILAR AER QL (120 gm / 30 days)	3	NDS QL PA
<i>methoxsalen rapid</i> CAPS 10mg	3	NDS
SORILUX FOAM .005% QL (120 gm / 30 days)	3	NDS QL PA
<i>tazarotene</i> (generic of TAZORAC) CREA .05%, .1% QL (60 gm / 30 days)	1	QL PA
<i>tazarotene</i> (generic of TAZORAC) GEL .05%, .1% QL (100 gm / 30 days)	1	QL PA
VTAMA CREA 1% QL (60 gm / 30 days)	3	NDS QL PA
ZORYVE CREA .3% QL (60 gm / 30 days)	3	QL PA
DERMATOLOGY, CORTICOSTEROIDS		
<i>ala-cort</i> CREA 1%	1	
<i>ala-scalp</i> LOTN 2% QL (60 mL / 30 days)	3	NDS QL

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
<i>alclometasone dipropionate</i> CREA .05%; OINT .05% QL (60 gm / 30 days)	1	QL	<i>clobetasol propionate</i> <i>emulsion</i> FOAM .05% QL (100 gm / 30 days)	1	QL
<i>betamethasone dipropionate</i> (<i>topical</i>) CREA .05%; OINT .05% QL (120 gm / 30 days)	1	QL	<i>clodan</i> (generic of CLOBEX) SHAM .05% QL (236 mL / 30 days)	1	QL
<i>betamethasone dipropionate</i> (<i>topical</i>) LOTN .05% QL (120 mL / 30 days)	1	QL	<i>desonide</i> CREA .05%; OINT .05% QL (60 gm / 30 days)	1	QL
<i>betamethasone dipropionate</i> <i>augmented</i> CREA .05%; GEL .05% QL (120 gm / 30 days)	1	QL	<i>desonide</i> LOTN .05% QL (118 mL / 30 days)	1	QL
<i>betamethasone dipropionate</i> <i>augmented</i> LOTN .05% QL (120 mL / 30 days)	1	QL	<i>desoximetasone</i> (generic of TOPICORT) LIQD .25% QL (100 mL / 30 days)	1	QL
<i>betamethasone dipropionate</i> <i>augmented</i> (generic of DIPROLENE) OINT .05% QL (120 gm / 30 days)	1	QL	DUOBRII LOT QL (200 gm / 28 days)	3	NDS QL PA
<i>betamethasone valerate</i> CREA .1%; FOAM .12%; OINT .1% QL (120 gm / 30 days)	1	QL	EPIFOAM AER 1% QL (200 gm / 28 days)	3	
<i>betamethasone valerate</i> LOTN .1% QL (120 mL / 30 days)	1	QL	<i>fluocinolone acetonide</i> CREA .01% QL (60 gm / 30 days)	1	QL
<i>clobetasol propionate</i> CREA .05%; GEL .05%; OINT .05% QL (120 gm / 30 days)	1	QL	<i>fluocinolone acetonide</i> (generic of SYNALAR) CREA .025%; OINT .025% QL (120 gm / 30 days)	1	QL
<i>clobetasol propionate</i> FOAM .05% QL (100 gm / 30 days)	1	QL	<i>fluocinolone acetonide</i> (generic of DERMA- SMOOTHE/FS BODY) OIL .01% QL (118.28 mL / 30 days)	1	QL
<i>clobetasol propionate</i> (generic of CLOBEX) LIQD .05% QL (125 mL / 30 days)	1	QL	<i>fluocinolone acetonide</i> (generic of DERMA- SMOOTHE/FS SCALP) OIL .01% QL (118.28 mL / 30 days)	1	QL
<i>clobetasol propionate</i> (generic of CLOBEX) LOTN .05% QL (118 mL / 30 days)	1	QL	<i>fluocinolone acetonide</i> SOLN .01% QL (60 mL / 30 days)	1	QL
<i>clobetasol propionate</i> (generic of CLOBEX) SHAM .05% QL (236 mL / 30 days)	1	QL	<i>fluocinonide</i> (generic of VANOS) CREA .1% QL (120 gm / 30 days)	1	QL
<i>clobetasol propionate</i> SOLN .05% QL (100 mL / 30 days)	1	QL	<i>fluocinonide</i> CREA .05% QL (120 gm / 30 days)	1	QL
<i>clobetasol propionate e</i> CREA .05% QL (120 gm / 30 days)	1	QL	<i>fluocinonide</i> GEL .05%; OINT .05% QL (60 gm / 30 days)	1	QL

Information on the symbols, abbreviations, and what they mean can be found on the page prior to the start of the drug list.

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>fluocinonide</i> SOLN .05% QL (60 mL / 30 days)	1	QL
<i>fluocinonide emulsified base</i> CREA .05% QL (120 gm / 30 days)	1	QL
<i>fluticasone propionate</i> CREA 1 .05%; OINT .005%	1	
<i>fluticasone propionate</i> LOTN 1 .05% QL (120 mL / 30 days)	1	QL
<i>halobetasol propionate</i> CREA 1 .05%; OINT .05% QL (50 gm / 30 days)	1	QL
<i>hydrocortisone (topical)</i> CREA 1%, 2.5%; LOTN 2.5%; OINT 2.5%	1	
<i>hydrocortisone (topical)</i> LOTN 2% QL (60 mL / 30 days)	3	NDS QL
<i>hydrocortisone (topical)</i> OINT 1% QL (30 gm / 30 days)	1	QL
<i>hydrocortisone butyrate</i> SOLN .1% QL (60 mL / 30 days)	1	QL
<i>hydrocortisone valerate</i> CREA .2% QL (60 gm / 30 days)	1	QL
<i>mometasone furoate</i> CREA .1%; OINT .1%; SOLN .1%	1	
PRAMOSONE LOT 1-1%	3	
PRAMOSONE LOT 2.5%	3	
<i>tovet</i> FOAM .05% QL (100 gm / 30 days)	1	QL
<i>triamcinolone acetonide (topical)</i> CREA .025%, .1%, .5% QL (454 gm / 30 days)	1	QL
<i>triamcinolone acetonide (topical)</i> LOTN .025%, .1%; OINT .025%, .1%, .5%	1	
<i>triderm</i> CREA .5% QL (454 gm / 30 days)	1	QL
DERMATOLOGY, LOCAL ANESTHETICS		
DYCLOPRO SOLN .5%	3	
<i>glydo</i> PRSY 2% QL (60 mL / 30 days)	1	QL PA

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>lidocaine</i> OINT 5% QL (50 gm / 30 days)	1	QL PA
<i>lidocaine</i> (generic of LIDODERM) PTCH 5% QL (3 patches / 1 day)	1	QL PA
<i>lidocaine hcl</i> SOLN 4% QL (50 mL / 30 days)	1	QL PA
<i>lidocaine-prilocaine cream</i> 2.5-2.5% QL (30 gm / 30 days)	1	B/D QL
<i>lidocan</i> (generic of LIDODERM) PTCH 5% QL (3 patches / 1 day)	1	QL PA
QUTENZA KIT 8% 1-PCH QL (4 patches / 90 days)	3	NDS QL NM PA
QUTENZA KIT 8% 2-PCH QL (4 patches / 90 days)	3	NDS QL NM PA
QUTENZA KIT 8% 4-PCH QL (4 patches / 90 days)	3	NDS QL NM PA
<i>tridacaine ii</i> (generic of LIDODERM) PTCH 5% QL (3 patches / 1 day)	1	QL PA
ZTLIDO PTCH 1.8% QL (3 patches / 1 day)	3	QL PA
DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE		
<i>acyclovir topical</i> (generic of ZOVIRAX) OINT 5% QL (30 gm / 30 days)	1	QL
ANALPRAM HC LOT 2.5%	3	
ANZUPGO CREA 20mg/gm QL (60 gm / 30 days)	3	NDS QL NM PA
<i>azelaic acid</i> (generic of FINACEA) GEL 15% QL (50 gm / 30 days)	1	QL
<i>bexarotene (topical)</i> (generic of TARGRETIN) GEL 1% QL (60 gm / 30 days)	3	NDS QL NM PA
<i>brimonidine tartrate (topical)</i> (generic of MIRVASO) GEL .33% QL (30 gm / 30 days)	1	QL PA
CORTIFOAM FOAM 10%	3	
<i>diclofenac sodium (actinic keratoses)</i> GEL 3% QL (100 gm / 30 days)	1	QL PA

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>diclofenac sodium (topical)</i> SOLN 1.5% QL (300 mL / 28 days)	1	QL
<i>doxycycline (rosacea)</i> (generic of ORACEA) CPDR 40mg	1	
EMROSI CP24 40mg QL (30 caps / 30 days)	3	NDS QL PA
EPSOLAY CREA 5% QL (30 gm / 30 days)	3	QL PA
EUCRISA OINT 2% QL (120 gm / 30 days)	3	QL PA
FINACEA FOAM 15% QL (50 gm / 30 days)	3	QL PA
<i>fluorouracil (topical)</i> CREA 5% QL (40 gm / 30 days)	1	QL
<i>fluorouracil (topical)</i> SOLN 2%, 5% QL (10 mL / 30 days)	1	QL
<i>hydrocortisone (rectal)</i> CREA 1%	1	
<i>hydrocortisone (rectal)</i> (generic of ANUSOL-HC) CREA 2.5%	1	
HYFTOR GEL .2% QL (20 gm / 25 days)	3	NDS QL NM PA
<i>imiquimod</i> CREA 5% QL (24 packets / 30 days)	1	QL
KLISYRI OINT 1% QL (5 packets / 30 days)	3	NDS QL PA
<i>lactic acid (ammonium lactate)</i> CREA 12%; LOTN 12%	1	
<i>metronidazole (topical)</i> (generic of METROCREAM) CREA .75% QL (45 gm / 30 days)	1	QL
<i>metronidazole (topical)</i> GEL .75% QL (45 gm / 30 days)	1	QL
<i>metronidazole (topical)</i> LOTN .75% QL (59 mL / 30 days)	1	QL
<i>nitroglycerin (intra-anal)</i> (generic of RECTIV) OINT .4% QL (30 gm / 30 days)	1	QL

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
NORITATE CREA 1% QL (60 gm / 30 days)	3	NDS QL PA
OPZELURA CREA 1.5% QL (240 gm / 28 days)	3	NDS QL PA
PANRETIN GEL .1% QL (60 gm / 30 days)	3	NDS QL PA
<i>peniclovir</i> (generic of DENAVIR) CREA 1% QL (5 gm / 30 days)	1	QL
<i>pimecrolimus</i> CREA 1% QL (100 gm / 30 days)	1	QL PA
<i>podofilox</i> GEL .5% QL (7 gm / 28 days)	1	QL
<i>podofilox</i> SOLN .5% QL (7 mL / 28 days)	1	QL
<i>procto-med hc</i> (generic of ANUSOL-HC) CREA 2.5%	1	
<i>proctocort</i> CREA 1%	1	
PROCTOFOAM AER HC 1%	3	
<i>proctosol hc</i> (generic of ANUSOL-HC) CREA 2.5%	1	
<i>proctozone-hc</i> (generic of ANUSOL-HC) CREA 2.5%	1	
QBREXZA PADS 2.4% QL (30 cloths / 30 days)	3	QL PA
RHOFADE CREA 1% QL (30 gm / 30 days)	3	QL
SOFDRA GEL 12.45% QL (50 mL / 30 days)	3	QL NM PA
<i>tacrolimus (topical)</i> OINT .03%, .1% QL (100 gm / 30 days)	1	QL PA
VALCHLOR GEL .016% QL (60 gm / 30 days)	3	NDS QL NM PA
XERESE CRE 5-1% QL (5 gm / 30 days)	3	NDS QL
YCANATH SOLN .7% ZELSUVMI GEL 10.3%	3	NM PA NDS PA
ZILXI FOAM 1.5% QL (30 gm / 30 days)	3	QL PA
ZORYVE CREA .05%, .15% QL (60 gm / 30 days)	3	QL PA
DERMATOLOGY, SCABICIDES AND PEDICULIDES		
<i>crotan</i> LOTN 10% QL (454 gm / 30 days)	3	NDS QL PA
<i>malathion</i> LOTN .5% QL (59 mL / 30 days)	1	QL

Information on the symbols, abbreviations, and what they mean can be found on the page prior to the start of the drug list.

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>permethrin</i> (generic of PERMETHRIN) CREA 5% QL (60 gm / 30 days)	1	QL
<i>pruradik</i> LOTN 10% QL (454 gm / 30 days)	3	NDS QL PA
<i>spinosad</i> SUSP .9%	1	
DERMATOLOGY, WOUND CARE AGENTS		
SANTYL OINT 250unit/gm QL (180 gm / 30 days)	3	QL PA
<i>sodium chloride (gu irrigant)</i> SOLN .9%	1	
<i>water for irrigation, sterile irrigation soln</i>	1	
MOUTH/THROAT/DENTAL AGENTS		
<i>cevimeline hcl</i> (generic of EVOXAC) CAPS 30mg	1	
<i>chlorhexidine gluconate (mouth-throat)</i> (generic of PERIDEX) SOLN .12%	1	
<i>clotrimazole</i> TROC 10mg QL (150 lozenges / 30 days)	1	QL
<i>kourzeq</i> PSTE .1%	1	
<i>lidocaine hcl (mouth-throat)</i> SOLN 2%	1	
<i>nystatin (mouth-throat)</i> (generic of NYSTATIN) SUSP 100000unit/ml	1	
<i>periogard</i> (generic of PERIDEX) SOLN .12%	1	
<i>pilocarpine hcl (oral)</i> (generic of SALAGEN) TABS 5mg, 7.5mg	1	
<i>triamcinolone acetonide (mouth)</i> PSTE .1%	1	

Index

A		
<i>abacavir sulfate</i>	7	
<i>abacavir sulfate-lamivudine</i> <i>tab 600-300 mg</i>	8	
<i>abigale</i>	60	
<i>abigale lo</i>	60	
ABILIFY		
see <i>aripiprazole</i>	37	
ABILIFY ASIMTUFII.....	36	
ABILIFY MAINTENA.....	36	
ABILIFY MYCITE MAINTENANC.....	36	
ABILIFY MYCITE STARTER KI.....	36	
<i>abiraterone acetate</i>	13	
<i>abirtega</i>	13	
ABRAXANE		
see <i>paclitaxel inj 100mg</i>	15	
ABRYSVO.....	77	
ABSORICA		
see <i>isotretinoin</i>	88	
ABSORICA LD.....	87	
<i>acamprosate calcium</i>	52	
ACANYA		
see <i>clindamycin</i> <i>phosphate-benzoyl</i> <i>peroxide gel 1.2-2.5%</i>	88	
<i>acarbose</i>	53	
ACCOLATE		
see <i>zafirlukast</i>	85	
<i>accutane</i>	87	
<i>acebutolol hcl</i>	27	
<i>acetaminophen-caffeine-</i> <i>dihydrocodeine cap</i> <i>320.5-30-16 mg</i>	2	
<i>acetaminophen w/ codeine</i> <i>soln 120-12 mg/5ml</i>	2	
<i>acetaminophen w/ codeine</i> <i>tab 300-15 mg</i>	2	
<i>acetaminophen w/ codeine</i> <i>tab 300-30 mg</i>	2	
<i>acetaminophen w/ codeine</i> <i>tab 300-60 mg</i>	2	
<i>acetazolamide</i>	29	
<i>acetic acid</i>	70	
<i>acetic acid (otic)</i>	83	
<i>acetylcysteine</i>	85	
ACIPHEX		
see <i>rabeprazole sodium</i>	69	
<i>acitretin</i>	89	
ACTHIB INJ.....	77	
ACTIMMUNE.....	76	
ACTIVELLA		
see <i>abigale</i>	60	
see <i>estradiol &</i> <i>norethindrone acetate</i> <i>tab 1-0.5 mg</i>	60	
see <i>mimvey</i>	61	
ACTONEL		
see <i>risedronate sodium</i>	57	
ACTOPLUS MET		
see <i>pioglitazone hcl-</i> <i>metformin hcl tab 15-</i> <i>850 mg</i>	54	
ACTOS		
see <i>pioglitazone hcl</i>	54	
ACULAR		
see <i>ketorolac</i> <i>tromethamine (ophth)</i>	81	
ACULAR LS		
see <i>ketorolac</i> <i>tromethamine (ophth)</i>	81	
ACUVAIL.....	81	
<i>acyclovir</i>	9	
<i>acyclovir sodium</i>	9	
<i>acyclovir topical</i>	91	
ACZONE		
see <i>dapsone (topical)</i> ..	88	
ADACEL INJ.....	77	
ADAKVEO.....	72	
ADALIMUMAB-BWWD ...	73	
<i>adapalene</i>	87	
ADAPALENE.....	87	
<i>adapalene-benzoyl</i> <i>peroxide gel 0.1-2.5%</i> ..	87	
<i>adapalene-benzoyl</i> <i>peroxide gel 0.3-2.5%</i> ..	87	
ADBRY.....	73, 74	
ADCIRCA		
see <i>alyq</i>	31	
see <i>tadalafil (pulmonary</i> <i>hypertension)</i>	31	
ADDERALL		
see <i>amphetamine-</i> <i>dextroamphetamine</i> <i>tab 10 mg</i>	44	
see <i>amphetamine-</i> <i>dextroamphetamine</i> <i>tab 12.5 mg</i>	44	
see <i>amphetamine-</i> <i>dextroamphetamine</i> <i>tab 15 mg</i>	44	
see <i>amphetamine-</i> <i>dextroamphetamine</i> <i>tab 20 mg</i>	44	
see <i>amphetamine-</i> <i>dextroamphetamine</i> <i>tab 30 mg</i>	44	
see <i>amphetamine-</i> <i>dextroamphetamine</i> <i>tab 5 mg</i>	44	
see <i>amphetamine-</i> <i>dextroamphetamine</i> <i>tab 7.5 mg</i>	44	
ADDERALL XR		
see <i>amphetamine-</i> <i>dextroamphetamine</i> <i>cap er 24hr 10 mg</i>	44	
see <i>amphetamine-</i> <i>dextroamphetamine</i> <i>cap er 24hr 15 mg</i>	44	
see <i>amphetamine-</i> <i>dextroamphetamine</i> <i>cap er 24hr 20 mg</i>	44	
see <i>amphetamine-</i> <i>dextroamphetamine</i> <i>cap er 24hr 25 mg</i>	44	
see <i>amphetamine-</i> <i>dextroamphetamine</i> <i>cap er 24hr 30 mg</i>	44	
see <i>amphetamine-</i> <i>dextroamphetamine</i> <i>cap er 24hr 5 mg</i>	44	
<i>adefovir dipivoxil</i>	9	
ADEMPAS.....	31	

<i>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg</i>	29	<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	23	<i>amoxicillin & k clavulanate tab 500-125 mg</i>	11
<i>amlodipine besylate-atorvastatin calcium tab 2.5-20 mg</i>	29	<i>amlodipine besylate-valsartan tab 10-160 mg</i>	23	<i>amoxicillin & k clavulanate tab 875-125 mg</i>	11
<i>amlodipine besylate-atorvastatin calcium tab 2.5-40 mg</i>	29	<i>amlodipine besylate-valsartan tab 10-320 mg</i>	23	<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	11
<i>amlodipine besylate-atorvastatin calcium tab 5-10 mg</i>	30	<i>amlodipine besylate-valsartan tab 5-160 mg</i> 23		<i>amphetamine</i>	44
<i>amlodipine besylate-atorvastatin calcium tab 5-20 mg</i>	30	<i>amlodipine besylate-valsartan tab 5-320 mg</i> 23		<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg</i>	44
<i>amlodipine besylate-atorvastatin calcium tab 5-40 mg</i>	30	<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i>	24	<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 25 mg</i>	44
<i>amlodipine besylate-atorvastatin calcium tab 5-80 mg</i>	30	<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i>	24	<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 37.5 mg</i>	44
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	22	<i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg</i>	24	<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 50 mg</i>	44
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	22	<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i>	23	<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	44
<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	22	<i>amnestem</i>	87	<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	44
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	22	<i>amoxapine</i>	33	<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	44
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	22	<i>amoxicil cap & clarithro tab & lansopraz cap dr 500 & 500 & 30mg</i>	68	<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	44
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	22	<i>amoxicillin</i>	11	<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	44
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	23	<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	11	<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	44
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	23	<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	11	<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	44
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	23	<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	11	<i>amphetamine-dextroamphetamine tab 10 mg</i>	44
		<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	11	<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	44
		<i>amoxicillin & k clavulanate tab 250-125 mg</i>	11		

<i>amphetamine-</i>	see <i>testosterone pump</i> 53	AROMASIN
<i>dextroamphetamine tab</i>	ANNOVERA MIS .....57	see <i>exemestane</i> 14
15 mg .....44	ANORO ELLIPT AER 62.5-	ARTHROTEC 50
<i>amphetamine-</i>	25 .....83	see <i>diclofenac w/</i>
<i>dextroamphetamine tab</i>	ANUSOL-HC	<i>misoprostol tab</i>
20 mg .....44	see <i>hydrocortisone</i>	<i>delayed release 50-0.2</i>
<i>amphetamine-</i>	<i>(rectal)</i>.....92	mg.....1
<i>dextroamphetamine tab</i>	see <i>procto-med hc</i>.....92	ARTHROTEC 75
30 mg .....44	see <i>proctosol hc</i> .....92	see <i>diclofenac w/</i>
<i>amphetamine-</i>	see <i>proctozone-hc</i>.....92	<i>misoprostol tab</i>
<i>dextroamphetamine tab 5</i>	ANZUPGO .....91	<i>delayed release 75-0.2</i>
mg .....44	APONVIE .....65	mg.....1
<i>amphetamine-</i>	<i>aprepitant</i> .....65, 66	<i>asenapine maleate</i>.....37
<i>dextroamphetamine tab</i>	<i>aprepitant capsule therapy</i>	<i>ashlyna</i>.....57
7.5 mg .....44	<i>pack 80 & 125 mg</i> .....66	ASPARLAS 14
<i>amphotericin b</i> .....6	<i>apri</i>.....57	<i>aspirin-dipyridamole cap er</i>
<i>amphotericin b liposome</i> ...6	APRISO	12hr 25-200 mg .....73
<i>ampicillin</i> .....11	see <i>mesalamine</i> .....67	ASTAGRAF XL .....77
<i>ampicillin & sulbactam</i>	APTIOM .....39	ATACAND
<i>sodium for inj 1.5 (1-0.5)</i>	see <i>eslicarbazepine</i>	see <i>candesartan cilexetil</i>
gm .....11	<i>acetate</i> .....40	.....25
<i>ampicillin & sulbactam</i>	APTIVUS.....7	ATACAND HCT
<i>sodium for inj 3 (2-1) gm</i>	AQNEURSA.....62	see <i>candesartan cilexetil-</i>
.....11	ARALAST NP.....85	<i>hydrochlorothiazide tab</i>
<i>ampicillin & sulbactam</i>	<i>aranelle</i> .....57	16-12.5 mg.....24
<i>sodium for iv soln 1.5 (1-</i>	ARANESP ALBUMIN	see <i>candesartan cilexetil-</i>
0.5) gm .....11	FREE.....72	<i>hydrochlorothiazide tab</i>
<i>ampicillin & sulbactam</i>	ARAVA	32-12.5 mg.....24
<i>sodium for iv soln 15 (10-</i>	see <i>leflunomide</i> .....76	see <i>candesartan cilexetil-</i>
5) gm .....11	ARAZLO.....87	<i>hydrochlorothiazide tab</i>
<i>ampicillin & sulbactam</i>	ARBLI.....25	32-25 mg.....24
<i>sodium for iv soln 3 (2-1)</i>	ARCALYST .....76	<i>atazanavir sulfate</i>.....7
gm .....11	AREXVY .....78	ATELVIA
<i>ampicillin sodium</i>.....11	<i>arformoterol tartrate</i> .....84	see <i>risedronate sodium</i>
AMPYRA	ARICEPT	.....57
see <i>dalfampridine</i> .....50	see <i>donepezil</i>	<i>atenolol</i> .....27
AMVUTTRA .....48	<i>hydrochloride</i> .....33	<i>atenolol & chlorthalidone</i>
AMZEEQ.....87	ARIKAYCE .....4	<i>tab 100-25 mg</i> .....27
ANAFRANIL	ARIMIDEX	<i>atenolol & chlorthalidone</i>
see <i>clomipramine hcl</i> ...33	see <i>anastrozole</i> .....13	<i>tab 50-25 mg</i> .....27
<i>anagrelide hcl</i>.....72	<i>aripiprazole</i> .....37	ATGAM .....77
ANALPRAM HC LOT 2.5%	ARISTADA .....37	ATIVAN
.....91	ARISTADA INITIO .....37	see <i>lorazepam</i>.....32
<i>anastrozole</i> .....13	ARIXTRA	<i>atomoxetine hcl</i>.....44, 45
ANCOBON	see <i>fondaparinux sodium</i>	ATORVALIQ .....26
see <i>flucytosine</i>.....6	.....71	<i>atorvastatin calcium</i> .....26
ANDEMBRY.....72	<i>armodafinil</i> .....52	<i>atovaquone</i> .....4
ANDROGEL PUMP	ARNUITY ELLIPTA.....86	

<i>atovaquone-proguanil hcl</i> <i>tab 250-100 mg</i>.....7	AVODART see <i>dutasteride</i>.....70	<i>baclofen</i> .....51
<i>atovaquone-proguanil hcl</i> <i>tab 62.5-25 mg</i> .....7	AVONEX.....50	BACTRIM see <i>sulfamethoxazole-</i> <i>trimethoprim tab 400-</i> <i>80 mg</i>.....5
ATRALIN see <i>tretinoin</i>.....88	AVONEX PEN.....50	BACTRIM DS see <i>sulfamethoxazole-</i> <i>trimethoprim tab 800-</i> <i>160 mg</i>.....5
<i>atropine sulfate</i> .....66	AVSOLA.....74	BAFIERTAM .....50
ATROPINE SULFATE66, 82 see <i>atropine sulfate</i> .....66	AVYCAZ INJ 2-0.5GM ...10	<i>balsalazide disodium</i>.....67
<i>atropine sulfate</i> (<i>ophthalmic</i>).....82	AXTLE.....13	BALVERSA.....16
ATROVENT HFA .....83	<i>ayuna</i> .....58	<i>balziva</i> .....58
ATTRUBY .....30	AYVAKIT.....16	BANZEL see <i>rufinamide</i>.....42
AUBAGIO see <i>teriflunomide</i> .....51	<i>azacitidine</i> .....13	BARACLUDGE .....9 see <i>entecavir</i>.....9
<i>aubra eq</i>.....57	AZACTAM see <i>aztreonam</i>.....4	BAVENCIO .....16
AUGMENTIN ES-600 see <i>amoxicillin & k</i> <i>clavulanate for susp</i> <i>600-42.9 mg/5ml</i>.....11	<i>azasan</i> .....77	BAXDELA .....11
AUGMENTIN SUS 125/5ML .....11	AZASITE .....80	BCG VACCINE .....78
AUGTYRO .....16	<i>azathioprine</i> .....77	BEIZRAY INJ 160/8ML ...15
<i>aurovela 1/20</i> .....57	<i>azelaic acid</i> .....91	BEIZRAY INJ 80MG/4ML .....15
<i>aurovela 24 fe</i> .....57	<i>azelastine hcl</i> .....83	BELBUCA .....1, 2
<i>aurovela fe 1/20</i> .....57	<i>azelastine hcl (ophth)</i>.....82	BELEODAQ .....16
<i>aurovela fe 1.5/30</i> .....57	<i>azelastine hcl-fluticasone</i> <i>prop nasal spray 137-50</i> <i>mcg/act</i>.....83	BELSOMRA .....47
AUSTEDO.....48	AZELEX .....87	<i>benazepril &</i> <i>hydrochlorothiazide tab</i> <i>10-12.5 mg</i> .....22
AUSTEDO XR.....48	AZILECT see <i>rasagiline mesylate</i> .....36	<i>benazepril &</i> <i>hydrochlorothiazide tab</i> <i>20-12.5 mg</i> .....22
AUSTEDO XR TAB TITR KIT.....49	<i>azithromycin</i>.....10	<i>benazepril &</i> <i>hydrochlorothiazide tab</i> <i>20-25 mg</i> .....22
AUVELITY TAB 45-105MG .....33	AZMIRO .....53	<i>benazepril &</i> <i>hydrochlorothiazide tab</i> <i>5-6.25mg</i> .....22
AVALIDE see <i>irbesartan-</i> <i>hydrochlorothiazide tab</i> <i>150-12.5 mg</i>.....24	AZOPT see <i>brinzolamide</i> .....82	<i>benazepril hcl</i>.....23
see <i>irbesartan-</i> <i>hydrochlorothiazide tab</i> <i>300-12.5 mg</i>.....24	AZSTARYS CAP 26.1-5.2 .....45	<i>bendamustine hcl</i>.....12
AVAPRO see <i>irbesartan</i>.....25	AZSTARYS CAP 39.2-7.8 .....45	BENDAMUSTINE HYDROCHLORID .....12
AVEED.....53	AZSTARYS CAP 52.3-10. .....45	BENDEKA.....12
AVERI TAB .....57	<i>aztreonam</i> .....4	BENICAR see <i>olmesartan</i> <i>medoxomil</i> .....25
<i>aviane</i> .....57	AZULFIDINE see <i>sulfasalazine</i>.....67	BENICAR HCT
AVMAPKI PAK FAKZYNJA .....16	AZULFIDINE EN-TABS see <i>sulfasalazine</i>.....67	
	<i>azurette</i> .....58	
	B	
	<i>bacitracin (ophthalmic)</i> ...80	
	<i>bacitracin-polymyxin b</i> <i>ophth oint</i>.....81	
	<i>bacitracin-polymyxin-</i> <i>neomycin-hc ophth oint</i> 1% .....80	

see olmesartan	<i>betaxolol hcl</i>.....27	BIVIGAM.....76
<i>medoxomil-</i>	<i>betaxolol hcl (ophth)</i>.....82	BKEMV.....72
<i>hydrochlorothiazide tab</i>	<i>bethanechol chloride</i>.....70	BLNREP.....16
20-12.5 mg.....24	BETHKIS	<i>bleomycin sulfate</i>.....14
see olmesartan	see <i>tobramycin</i>.....5	<i>blisovi 24 fe</i>.....58
<i>medoxomil-</i>	BETIMOL	<i>blisovi fe 1.5/30</i>.....58
<i>hydrochlorothiazide tab</i>	see <i>timolol hemihydrate</i>	BLUJEP.....4
40-12.5 mg.....24	(<i>ophth</i>).....82	BONJESTA TAB 20-20MG
see olmesartan	BEVESPI AER 9-4.8MCG	.....66
<i>medoxomil-</i>	.....83	BONSITY.....56
<i>hydrochlorothiazide tab</i>	<i>bexarotene</i>.....14	BOOSTRIX INJ.....78
40-25 mg.....24	<i>bexarotene (topical)</i>.....91	<i>bortezomib</i>.....16
BENLYSTA.....77	BEXSERO.....78	BORTEZOMIB.....16
BENTYL	BEYAZ	BORUZU.....16
see <i>dicyclomine hcl</i>.....67	see <i>drospirenone-ethinyl</i>	<i>bosentan</i>.....31
BENZAMYCIN	<i>estradiol-levomefolate</i>	BOSULIF.....16
see <i>benzoyl peroxide-</i>	<i>tab 3-0.02-0.451 mg</i> 58	BOTOX.....51
<i>erythromycin gel 5-3%</i>	BIAXIN XL	BRAFTOVI.....16
.....87	see <i>clarithromycin</i>.....10	BREKIYA.....48
<i>benzoyl peroxide-</i>	<i>bicalutamide</i>.....13	BREO ELLIPTA INH 100-
<i>erythromycin gel 5-3%</i> .87	BICILLIN C-R INJ 1200000	25.....86
<i>benztropine mesylate</i>.....35	.....11	BREO ELLIPTA INH 200-
BEOVU.....82	BICILLIN C-R INJ 900/300	25.....86
<i>bepotastine besilate</i>.....82	.....11	BREO ELLIPTA INH 50-
BEPREVE	BICILLIN L-A.....11	25MCG.....86
see <i>bepotastine besilate</i>	BIDIL	<i>breyana</i>.....86
.....82	see <i>isosorbide dinitrate-</i>	BREZTRI AERO AER
BERINERT.....72	<i>hydralazine hcl tab 20-</i>	SPHERE.....83
<i>besifloxacin hcl</i>.....81	37.5 mg.....30	BREZTRI AERO AER
BESIVANCE.....81	BIJUVA CAP 0.5-100.....60	SPHERE
BESPONSA.....16	BIJUVA CAP 1-100MG...60	(INSTITUTIONAL PACK)
BESREMI.....14	BIKTARVY TAB 30-120-15	.....83
<i>betaine powder for oral</i>	MG.....8	<i>briellyn</i>.....58
<i>solution</i>.....62	BIKTARVY TAB 50-200-25	BRILINTA
<i>betamethasone</i>	MG.....8	see <i>ticagrelor</i>.....73
<i>dipropionate (topical)</i> ...90	BILDYOS.....56	<i>brimonidine tartrate</i>.....82
<i>betamethasone</i>	BIMZELX.....74	<i>brimonidine tartrate</i>
<i>dipropionate augmented</i>	BINOSTO.....56	(<i>topical</i>).....91
.....90	<i>bisoprolol &</i>	<i>brimonidine tartrate-timolol</i>
<i>betamethasone sod</i>	<i>hydrochlorothiazide tab</i>	<i>maleate ophth soln 0.2-</i>
<i>phosphate & acetate inj</i>	10-6.25 mg.....27	0.5%.....82
<i>susp 6 (3-3) mg/ml</i>.....61	<i>bisoprolol &</i>	BRINSUPRI.....85
<i>betamethasone valerate</i> .90	<i>hydrochlorothiazide tab</i>	<i>brinzolamide</i>.....82
BETAPACE	2.5-6.25 mg.....27	BRIVIACT.....39
see <i>sotalol hcl</i>.....26	<i>bisoprolol &</i>	BRIXADI.....52
BETAPACE AF	<i>hydrochlorothiazide tab</i>	<i>bromfenac sodium (ophth)</i>
see <i>sotalol hcl (afib/af)</i> 26	5-6.25 mg.....27	.....81
BETASERON.....50	<i>bisoprolol fumarate</i>.....27	<i>bromocriptine mesylate</i> ...35

BROMSITE		
see <i>bromfenac sodium</i>		
(<i>ophth</i>)	81	
BRUKINSA.....	16	
<i>budesonide</i>	67	
<i>budesonide (inhalation)</i> ...	86	
<i>budesonide (intrarectal)</i> ..	67	
<i>budesonide-formoterol</i>		
<i>fumarate dihyd aerosol</i>		
160-4.5 mcg/act.....	87	
<i>budesonide-formoterol</i>		
<i>fumarate dihyd aerosol</i>		
80-4.5 mcg/act.....	86	
<i>bumetanide</i>	29	
BUMEX		
see <i>bumetanide</i>	29	
BUPHENYL		
see <i>sodium</i>		
<i>phenylbutyrate</i>	64	
<i>buprenorphine</i>	2	
<i>buprenorphine hcl</i>	52	
<i>buprenorphine hcl-</i>		
<i>naloxone hcl sl film 12-3</i>		
<i>mg (base equiv)</i>	52	
<i>buprenorphine hcl-</i>		
<i>naloxone hcl sl film 2-0.5</i>		
<i>mg (base equiv)</i>	52	
<i>buprenorphine hcl-</i>		
<i>naloxone hcl sl film 4-1</i>		
<i>mg (base equiv)</i>	52	
<i>buprenorphine hcl-</i>		
<i>naloxone hcl sl film 8-2</i>		
<i>mg (base equiv)</i>	52	
<i>buprenorphine hcl-</i>		
<i>naloxone hcl sl tab 2-0.5</i>		
<i>mg (base equiv)</i>	52	
<i>buprenorphine hcl-</i>		
<i>naloxone hcl sl tab 8-2</i>		
<i>mg (base equiv)</i>	52	
<i>bupropion hcl</i>	33	
<i>bupropion hcl (smoking</i>		
<i>deterrent)</i>	52	
<i>bupirone hcl</i>	32	
<i>butorphanol tartrate</i>	2	
BUTRANS		
see <i>buprenorphine</i>	2	
BYLVAY	68	
BYLVAY (PELLETS).....	68	
BYNFEZIA PEN	62	
BYOOVIZ	82	
BYSTOLIC		
see <i>nebivolol hcl</i>	28	
C		
<i>cabergoline</i>	62	
CABLIVI	72	
CABOMETYX	16	
CABTREO GEL	87	
CADUET		
see <i>amlodipine besylate-</i>		
<i>atorvastatin calcium</i>		
<i>tab 10-10 mg</i>	30	
see <i>amlodipine besylate-</i>		
<i>atorvastatin calcium</i>		
<i>tab 10-20 mg</i>	30	
see <i>amlodipine besylate-</i>		
<i>atorvastatin calcium</i>		
<i>tab 10-40 mg</i>	30	
see <i>amlodipine besylate-</i>		
<i>atorvastatin calcium</i>		
<i>tab 10-80 mg</i>	30	
see <i>amlodipine besylate-</i>		
<i>atorvastatin calcium</i>		
<i>tab 5-10 mg</i>	30	
see <i>amlodipine besylate-</i>		
<i>atorvastatin calcium</i>		
<i>tab 5-20 mg</i>	30	
see <i>amlodipine besylate-</i>		
<i>atorvastatin calcium</i>		
<i>tab 5-40 mg</i>	30	
see <i>amlodipine besylate-</i>		
<i>atorvastatin calcium</i>		
<i>tab 5-80 mg</i>	30	
<i>calcipotriene</i>	89	
CALCIPOTRIENE	89	
<i>calcitonin (salmon) spray</i>	56	
<i>calcitrene</i>	89	
<i>calcitriol</i>	65	
<i>calcitriol (oral)</i>	65	
CALQUENCE.....	16	
CAMCEVI.....	13	
<i>camila</i>	58	
CAMPTOSAR		
see <i>irinotecan hcl</i>	15	
<i>camrese</i>	58	
<i>camrese lo</i>	58	
CAMZYOS	30	
CANASA		
see <i>mesalamine</i>	67	
<i>candesartan cilexetil</i>	25	
<i>candesartan cilexetil-</i>		
<i>hydrochlorothiazide tab</i>		
16-12.5 mg	24	
<i>candesartan cilexetil-</i>		
<i>hydrochlorothiazide tab</i>		
32-12.5 mg	24	
<i>candesartan cilexetil-</i>		
<i>hydrochlorothiazide tab</i>		
32-25 mg	24	
CAPLYTA.....	37	
CAPRELSA.....	16	
<i>captopril</i>	23	
<i>captopril &</i>		
<i>hydrochlorothiazide tab</i>		
25-15 mg	22	
<i>captopril &</i>		
<i>hydrochlorothiazide tab</i>		
25-25 mg	22	
<i>captopril &</i>		
<i>hydrochlorothiazide tab</i>		
50-15 mg	22	
<i>captopril &</i>		
<i>hydrochlorothiazide tab</i>		
50-25 mg	22	
CARAFATE		
see <i>sucralfate</i>	69	
<i>carb/levo orally</i>		
<i>disintegrating tab 10-</i>		
100mg	35	
<i>carb/levo orally</i>		
<i>disintegrating tab 25-</i>		
100mg	35	
<i>carb/levo orally</i>		
<i>disintegrating tab 25-</i>		
250mg	35	
CARBAGLU		
see <i>carglumic acid</i>	62	
<i>carbamazepine</i>	39	
CARBATROL		
see <i>carbamazepine</i>	39	
<i>carbidopa</i>	35	
<i>carbidopa & levodopa cap</i>		
<i>er 23.75-95 mg</i>	35	
<i>carbidopa & levodopa cap</i>		
<i>er 36.25-145 mg</i>	35	

<i>carbidopa & levodopa cap er 48.75-195 mg</i>.....35	<i>carglumic acid</i>.....62	<i>see cefotetan disodium</i>.....10
<i>carbidopa & levodopa cap er 61.25-245 mg</i>.....35	<i>carisoprodol</i>.....51	<i>cefotetan disodium</i>.....10
<i>carbidopa & levodopa tab 10-100 mg</i>.....36	CARNITOR <i>see levocarnitine</i> <i>(metabolic modifiers)</i> .....63	CEFOXITIN INJ 1GM.....10
<i>carbidopa & levodopa tab 25-100 mg</i>.....36	CAROSPIR <i>see spironolactone</i>.....23	CEFOXITIN INJ 2GM.....10
<i>carbidopa & levodopa tab 25-250 mg</i>.....36	<i>carteolol hcl (ophth)</i>.....82	<i>cefodoxime proxetil</i>.....10
<i>carbidopa & levodopa tab er 25-100 mg</i>.....36	<i>cartia xt</i>.....28	<i>cefprozil</i>.....10
<i>carbidopa & levodopa tab er 50-200 mg</i>.....36	<i>carvedilol</i>.....28	<i>ceftazidime</i>.....10
<i>carbidopa-levodopa- entacapone tabs 12.5- 50-200 mg</i>.....36	<i>carvedilol phosphate</i>.....28	<i>ceftriaxone sodium</i>.....10
<i>carbidopa-levodopa- entacapone tabs 18.75- 75-200 mg</i>.....36	CASODEX <i>see bicalutamide</i>.....13	<i>cefuroxime axetil</i>.....10
<i>carbidopa-levodopa- entacapone tabs 25-100- 200 mg</i>.....36	<i>caspofungin acetate</i>.....6	<i>cefuroxime sodium</i>.....10
<i>carbidopa-levodopa- entacapone tabs 31.25- 125-200 mg</i>.....36	CATAPRES-TTS-1 <i>see clonidine</i>.....30	CELEBREX <i>see celecoxib</i>.....1
<i>carbidopa-levodopa- entacapone tabs 37.5- 150-200 mg</i>.....36	CATAPRES-TTS-2 <i>see clonidine</i>.....30	<i>celecoxib</i>.....1
<i>carbidopa-levodopa- entacapone tabs 50-200- 200 mg</i>.....36	CATAPRES-TTS-3 <i>see clonidine</i>.....30	CELESTONE SOLUSPAN <i>see betamethasone sod phosphate & acetate inj susp 6 (3-3) mg/ml</i>.....61
<i>carbinoxamine maleate</i> ...84	CAYSTON.....4	CELEXA <i>see citalopram hydrobromide</i>.....33
<i>carboplatin</i>.....12	<i>cefactor</i>.....10	CELLCEPT <i>see mycophenolate mofetil</i>.....77
<i>carbzah</i>.....84	CEFACTOR ER.....10	CELONTIN <i>see methsuximide</i>.....41
CARDIZEM <i>see diltiazem hcl</i>.....28	<i>cefadroxil</i>.....10	<i>cephalexin</i>.....10
CARDIZEM CD <i>see cartia xt</i>.....28	CEFAZOLIN.....10	CEQUR SIMPL KIT PATCH 2U (3-DAY).....55
<i>see diltiazem hcl coated beads</i>.....28	CEFAZOLIN/DEX SOL 1GM/50ML-4%.....10	CEQUR SIMPL KIT PATCH 2U (4-DAY).....55
CARDIZEM LA <i>see diltiazem hcl</i>.....28	CEFAZOLIN/DEX SOL 2GM/50ML-3%.....10	CEQUR SIMPL MIS INSERTER.....55
<i>see matzim la</i>.....28	CEFAZOLIN/DEX SOL 3GM/150ML-4%.....10	CERDELGA.....62
CARDURA <i>see doxazosin mesylate</i>.....23	CEFAZOLIN INJ 1GM/50ML.....10	CEREZYME.....62
CARDURA XL.....70	<i>cefazolin sodium</i>.....10	<i>cetirizine hcl</i>.....84
	CEFAZOLIN SOLN 2GM/100ML-4%.....10	CETRAXAL <i>see ciprofloxacin hcl (otic)</i>.....83
	<i>cefdinir</i>.....10	<i>cevimeline hcl</i>.....93
	CEFEPIME.....10	CHANTIX <i>see varenicline tartrate</i> 53
	CEFEPIME/DEX INJ 1GM.....10	<i>chateal eq</i>.....58
	CEFEPIME/DEX INJ 2GM.....10	CHEMET.....57
	<i>cefepime hcl</i>.....10	<i>chlordiazepoxide hcl</i>.....32
	<i>cefixime</i>.....10	
	CEFOTAN	

<i>chlorhexidine gluconate</i> (mouth-throat).....93	CISPLATIN see <i>cisplatin</i>.....12	<i>clindamycin phosphate</i> (topical).....87, 88
<i>chloroquine phosphate</i>.....7	<i>citalopram hydrobromide</i> 33	<i>clindamycin phosphate- benzoyl peroxide gel 1.2- 2.5%</i>.....88
<i>chlorpromazine hcl</i>.....37	<i>cladribine (10 tabs)</i> .....50	<i>clindamycin phosphate- benzoyl peroxide gel 1.2- 3.75%</i>.....88
<i>chlorthalidone</i>.....29	<i>cladribine (4 tabs)</i> .....50	<i>clindamycin phosphate- benzoyl peroxide gel 1- 5%</i>.....88
CHOLBAM .....68	<i>cladribine (5 tabs)</i> .....50	<i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i>.....4
<i>cholestyramine</i>.....27	<i>cladribine (6 tabs)</i> .....50	<i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i>.....4
<i>cholestyramine light</i> .....27	<i>cladribine (7 tabs)</i> .....50	<i>clindamycin phosphate in d5w iv soln 900 mg/50ml</i>.....4
<i>choline fenofibrate</i>.....26	<i>cladribine (8 tabs)</i> .....50	<i>clindamycin phosphate- tretinoin gel 1.2-0.025%</i> .....88
CHORIONIC GONADOTROPIN.....62	<i>cladribine (9 tabs)</i> .....50	<i>clindamycin phosphate vaginal</i>.....71
CIALIS see <i>tadalafil</i> .....70	<i>claravis</i>.....87	<i>clindamycin phosph- benzoyl peroxide (refrig) gel 1.2 (1)-5%</i>.....87
CIBINQO.....74	CLARINEX see <i>desloratadine</i> .....84	CLINDESSE.....71
<i>ciclopirox</i> .....88, 89	CLARINEX-D TAB 2.5-120.....83	CLINDMYC/NAC INJ 300/50ML .....4
<i>ciclopirox olamine</i> .....89	<i>clarithromycin</i>.....10	CLINDMYC/NAC INJ 600/50ML .....4
<i>cidofovir</i>.....9	<i>clemastine fumarate</i>.....84	CLINDMYC/NAC INJ 900/50ML .....4
<i>cilostazol</i> .....72	CLENPIQ SOL 10 MG-3.5 GM-12 GM/175ML.....68	CLINIMIX E INJ 2.75/D5W.....80
CILOXAN .....81	CLEOCIN .....71	CLINIMIX E INJ 4.25/D10.....80
CIMDUO TAB 300-300 .....8	see <i>clindamycin hcl</i> .....4	CLINIMIX E INJ 4.25/D5W.....80
CIMERLI .....82	see <i>clindamycin phosphate vaginal</i> ...71	CLINIMIX E INJ 5%/D15W.....80
<i>cimetidine</i>.....67	CLEOCIN PEDIATRIC GRANULE see <i>clindamycin palmitate hydrochloride</i>.....4	CLINIMIX E INJ 5%/D20W.....80
<i>cimetidine hcl</i> .....67	CLEOCIN PHOSPHATE see <i>clindamycin phosphate</i> .....4	CLINIMIX E INJ 8/10.....80
<i>cinacalcet hcl</i> .....62	CLEOCIN-T see <i>clindamycin phosphate (topical)</i> ..88	CLINIMIX E INJ 8/14.....80
CINRYZE .....72	CLIMARA see <i>estradiol</i>.....60	CLINIMIX INJ 4.25/D10 ..80
CINVANTI .....66	CLIMARA PRO DIS WEEKLY .....60	
CIPRO.....11	<i>clindacin</i> .....87	
see <i>ciprofloxacin hcl</i>....11	<i>clindacin etz pledgets</i>.....87	
<i>ciprofloxacin 200 mg/100ml in d5w</i>.....11	<i>clindacin-p</i>.....87	
<i>ciprofloxacin 400 mg/200ml in d5w</i>.....11	CLINDAGEL see <i>clindamycin phosphate (topical)</i> ..87	
<i>ciprofloxacin- dexamethasone otic susp 0.3-0.1%</i>.....83	<i>clindamycin hcl</i>.....4	
<i>ciprofloxacin hcl</i> .....11	<i>clindamycin palmitate hydrochloride</i>.....4	
<i>ciprofloxacin hcl (ophth)</i> ..81	<i>clindamycin phosphate</i> .....4	
<i>ciprofloxacin hcl (otic)</i> ....83		
<i>ciprofloxacin- hydrocortisone otic susp 0.2-1%</i>.....83		
CIPRO HC see <i>ciprofloxacin- hydrocortisone otic susp 0.2-1%</i>.....83		
CIPRO HC SUS 0.2-1%OT.....83		
<i>cisplatin</i> .....12		

CLINIMIX INJ 4.25/D5W .80	COLESTID	CORTISPORIN SUS -TC
CLINIMIX INJ 5%/D15W .80	see <i>colestipol hcl</i> .....27	OTIC .....83
CLINIMIX INJ 5%/D20W .80	<i>colestipol hcl</i> .....27	COSOPT
CLINIMIX INJ 6/5 .....80	<i>colistimethate sodium</i> .....4	see <i>dorzolamide hcl-</i>
CLINIMIX INJ 8/10 .....80	COLUMVI .....16	<i>timolol maleate ophth</i>
CLINIMIX INJ 8/14 .....80	COLY-MYCIN M	<i>soln 2-0.5%</i> .....82
<i>clinisol sf 15%</i> .....80	see <i>colistimethate</i>	COSOPT PF
CLINOLIPID EMU 20%...80	<i>sodium</i> .....4	see <i>dorzolamide hcl-</i>
<i>clobazam</i> .....40	COMBIGAN	<i>timolol maleate pf</i>
<i>clobetasol propionate</i> .....90	see <i>brimonidine tartrate-</i>	<i>ophth soln 2-0.5%</i> ....82
<i>clobetasol propionate e</i> ...90	<i>timolol maleate ophth</i>	COTELLIC .....16
<i>clobetasol propionate</i>	<i>soln 0.2-0.5%</i> .....82	COTEMPLA XR-ODT .....45
<i>emulsion</i> .....90	COMBIGAN SOL 0.2/0.5%	COZAAR
CLOBEX	.....82	see <i>losartan potassium</i>
see <i>clobetasol</i>	COMBIPATCH DIS .....60	.....25
<i>propionate</i> .....90	COMBIVENT AER 20-100	CRENESSITY .....62
see <i>clodan</i> .....90	.....83	CREON CAP 12000UNT 68
<i>clodan</i> .....90	COMETRIQ (60MG DOSE)	CREON CAP 24000UNT 68
<i>clomipramine hcl</i> .....33	.....16	CREON CAP 3000UNIT .68
<i>clonazepam</i> .....40	COMETRIQ KIT 100MG .16	CREON CAP 36000UNT 68
<i>clonidine</i> .....30	COMETRIQ KIT 140MG .16	CREON CAP 6000UNIT .68
<i>clonidine hcl</i> .....30	COMPLERA	CRESEMBA .....6
<i>clopidogrel bisulfate</i> .....73	see <i>emtricitabine-</i>	CRESTOR
<i>clorazepate dipotassium</i> .40	<i>rilpivirine-tenofovir df</i>	see <i>rosuvastatin calcium</i>
<i>clotrimazole</i> .....93	<i>tab 200-25-300 mg</i> ....8	.....26
<i>clotrimazole (topical)</i> .....89	<i>compro</i> .....66	CREXONT CAP 35-140MG
<i>clotrimazole w/</i>	CONCERTA	.....36
<i>betamethasone cream 1-</i>	see <i>methylphenidate hcl</i>	CREXONT CAP 52.5-210
<i>0.05%</i> .....89	.....46	.....36
<i>clozapine</i> .....37	<i>constulose</i> .....68	CREXONT CAP 70-280MG
CLOZARIL	COPAXONE .....50	.....36
see <i>clozapine</i> .....37	see <i>glatiramer acetate</i> .50	CREXONT CAP 87.5-350
COARTEM TAB 20-120MG	see <i>glatopa</i> .....50	.....36
.....7	COPIKTRA .....16	CRINONE .....64
COBENFY CAP 100-20MG	COREG	<i>cromolyn sodium</i> .....85
.....37	see <i>carvedilol</i> .....28	<i>cromolyn sodium</i>
COBENFY CAP 125-30MG	COREG CR	(<i>mastocytosis</i>) .....68
.....37	see <i>carvedilol phosphate</i>	<i>cromolyn sodium (ophth)</i> 82
COBENFY CAP 50-20MG	.....28	<i>crotan</i> .....92
.....37	CORLANOR .....30	<i>cryelle</i> .....58
COBENFY STRT CAP	see <i>ivabradine hcl</i> .....30	CRYSVITA .....62
PACK .....37	CORTEF	CUTAQUIG .....76
<i>codeine sulfate</i> .....2	see <i>hydrocortisone</i> .....61	CUVITRU .....76
CODEINE SULFATE .....2	CORTENEMA	CUVPOSA
<i>colchicine</i> .....1	see <i>hydrocortisone</i>	see <i>glycopyrrolate (oral)</i>
<i>colchicine w/ probenecid</i>	(<i>intrarectal</i>) .....67	.....67
<i>tab 0.5-500 mg</i> .....1	CORTIFOAM .....91	CUVRIOR .....57
<i>colesevelam hcl</i> .....27		<i>cyclobenzaprine hcl</i> .....51

<i>cyclophosphamide</i>	12	<i>dapagliflozin propanediol</i> 53	<i>see divalproex sodium</i> .40
CYCLOPHOSPHAMIDE .12		<i>dapsone</i>	4
CYCLOPHOSPHAMIDE		<i>dapsone (topical)</i>	88
MONOHYDR.....	12	DAPTACEL INJ.....	78
<i>cycloserine</i>	8	DAPTOMY/NACL INJ	
<i>cyclosporine</i>	77	350/50ML	4
<i>cyclosporine modified (for</i>		DAPTOMY/NACL INJ	
<i>microemulsion)</i>	77	500/50ML	4
CYKLOKAPRON		<i>daptomycin</i>	4
<i>see tranexamic acid</i>	73	DAPTOMYCIN.....	4
<i>cyproheptadine hcl</i>	84	<i>see daptomycin</i>	4
CYRAMZA	16	DARAPRIM	
<i>cyred eq</i>	58	<i>see pyrimethamine</i>	5
CYSTADANE		<i>darifenacin hydrobromide</i>	
<i>see betaine powder for</i>		.....	70
<i>oral solution</i>	62	<i>darunavir</i>	7
CYSTADROPS	82	DARZALEX.....	16
CYSTAGON.....	62	DARZALEX INJ FASPRO	
CYSTARAN	82	.....	16
<i>cytarabine</i>	13	<i>dasatinib</i>	16
CYTOGAM.....	76	<i>dasetta 1/35</i>	58
CYTOMEL		<i>dasetta 7/7/7</i>	58
<i>see liomny</i>	65	DATROWAY	16
<i>see liothyronine sodium</i>		DAURISMO.....	16
.....	65	DAWNZERA	72
CYTOTEC		DAXXIFY.....	51
<i>see misoprostol</i>	68	DAYBUE	49
D		DAYBUE STIX	49
D10W/NACL INJ 0.2%....	78	<i>daysee</i>	58
D10W/NACL INJ 0.45%..	78	DAYTRANA	
D2.5W/NACL INJ 0.45%.78		<i>see methylphenidate</i> ...	46
D5W/LYTES INJ #48	78	DAYVIGO.....	47
D5W/NACL INJ 0.2%.....	78	DDAVP	
D5W/NACL INJ 0.45%....	78	<i>see desmopressin</i>	
<i>dabigatran etexilate</i>		<i>acetate</i>	62
<i>mesylate</i>	71	<i>deblitane</i>	58
<i>dacarbazine</i>	14	<i>decitabine</i>	13
<i>dalbavancin hcl</i>	4	<i>deferasirox</i>	57
<i>dalfampridine</i>	50	<i>deferiprone</i>	57
DALIRESP		<i>deferoxamine mesylate</i> ...57	
<i>see roflumilast</i>	85	DELESTROGEN	
DALVANCE.....	4	<i>see estradiol valerate</i> ..	60
<i>see dalbavancin hcl</i>	4	DELSTRIGO TAB	8
<i>danazol</i>	53	<i>demeclocycline hcl</i>	12
DANTRIUM		DENAVIR	
<i>see dantrolene sodium</i> 51		<i>see penciclovir</i>	92
<i>dantrolene sodium</i>	51	DENGXAXIA SUS.....	78
DANZITEN.....	16	DEPAKOTE	

<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>.....58	see <i>dextrose 5% w/ sodium chloride 0.45%</i>.....79	see <i>fidaxomicin</i>.....11
<i>desonide</i>.....90	see <i>dextrose 5% w/ sodium chloride 0.9%</i>.....78	DIFLUCAN see <i>fluconazole</i>.....6
<i>desoximetasone</i>.....90	<i>dextrose 5% in lactated ringers</i>.....78	<i>diflunisal</i>.....1
DESVENLAFAXINE ER..34	<i>dextrose 5% w/ sodium chloride 0.225%</i>.....79	<i>difluprednate</i>.....81
<i>desvenlafaxine succinate</i> 34	<i>dextrose 5% w/ sodium chloride 0.3%</i>.....78	<i>digoxin</i>.....30
<i>dexamethasone</i>.....61	<i>dextrose 5% w/ sodium chloride 0.45%</i>.....79	<i>dihydroergotamine mesylate</i>.....48
DEXAMETHASONE INTENSOL.....61	<i>dextrose 5% w/ sodium chloride 0.9%</i>.....78	DILANTIN.....40 see <i>phenytoin sodium extended</i>.....42
<i>dexamethasone sodium phosphate</i>.....61	DEXTROSE 70%.....80	DILANTIN-125 see <i>phenytoin</i>.....42
<i>dexamethasone sodium phosphate (ophth)</i>.....81	DIACOMIT.....40	DILANTIN INFATABS see <i>phenytoin</i>.....42
DEXEDRINE see <i>dextroamphetamine sulfate</i>.....45	DIAZEPAM.....40	DILAUDID see <i>hydromorphone hcl</i> .3
DEXILANT see <i>dexlansoprazole</i> ...69	<i>diazepam (anticonvulsant)</i>.....40	<i>diltiazem hcl</i>.....28
<i>dexlansoprazole</i>.....69	<i>diazepam inj</i>.....40	<i>diltiazem hcl coated beads</i>.....28
<i>dexmethylphenidate hcl</i> ..45	<i>diazepam intensol</i>.....40	<i>diltiazem hcl extended release beads</i>.....28
<i>dexrazoxane hcl</i>.....14	<i>diazoxide</i>.....62	<i>dilt-xr</i>.....28
<i>dextroamphetamine sulfate</i>.....45	<i>dichlorphenamide</i>.....29	DIMENHYDRINATE.....66
<i>dextrose</i>.....80	DICLEGIS see <i>doxylamine-pyridoxine tab delayed release 10-10 mg</i>....66	<i>dimethyl fumarate</i>.....50
DEXTROSE/SODIUM CHLORIDE see <i>dextrose 5% w/ sodium chloride 0.225%</i>.....79	<i>diclofenac potassium</i>.....1	<i>dimethyl fumarate capsule dr starter pack 120 mg & 240 mg</i>.....50
DEXTROSE 10%.....80	<i>diclofenac sodium</i>.....1	DIOVAN see <i>valsartan</i>.....26
see <i>dextrose</i>.....80	<i>diclofenac sodium (actinic keratoses)</i>.....91	DIOVAN HCT see <i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>.....25
DEXTROSE 2.5%/SODIUM CHLO see <i>dextrose 2.5% w/ sodium chloride 0.45%</i>.....78	<i>diclofenac sodium (ophth)</i>.....81	see <i>valsartan-hydrochlorothiazide tab 160-25 mg</i>.....25
<i>dextrose 2.5% w/ sodium chloride 0.45%</i>.....78	<i>diclofenac sodium (topical)</i>.....92	see <i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>.....25
DEXTROSE 5% see <i>dextrose</i>.....80	<i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg</i>.....1	see <i>valsartan-hydrochlorothiazide tab 320-25 mg</i>.....25
DEXTROSE 5%/SODIUM CHLORI see <i>dextrose 5% w/ sodium chloride 0.3%</i>.....78	<i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg</i>.....1	see <i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>.....25
	<i>dicloxacillin sodium</i>.....11	DIPENTUM.....67
	<i>dicyclomine hcl</i>.....67	<i>diphenhydramine hcl</i>.....84
	DIFFERIN see <i>adapalene</i>.....87	
	DIFICID.....10	

<i>diphenoxylate w/ atropine</i> <i>liq 2.5-0.025 mg/5ml</i>.....68	<i>doxycycline (monohydrate)</i> .....12	<i>spray 137-50 mcg/act</i>.....83
<i>diphenoxylate w/ atropine</i> <i>tab 2.5-0.025 mg</i> .....68	<i>doxycycline (rosacea)</i> .....92	DYSPORT.....51
DIPROLENE see <i>betamethasone</i> <i>dipropionate</i> <i>augmented</i>.....90	<i>doxycycline hyclate</i> .....12	E
<i>dipyridamole</i>.....73	<i>doxylamine-pyridoxine tab</i> <i>delayed release 10-10</i> <i>mg</i> .....66	<i>e.e.s. 400</i> .....10
<i>disopyramide phosphate</i> ..26	DRIZALMA SPRINKLE ...34	E.E.S. GRANULES see <i>erythromycin</i> <i>ethylsuccinate</i> .....10
<i>disulfiram</i>.....52	<i>dronabinol</i> .....66	EBGLYSS .....74
DIURIL .....29	<i>drospirenone-ethinyl</i> <i>estradiol tab 3-0.02 mg</i> 58	<i>econazole nitrate</i>.....89
<i>divalproex sodium</i>.....40	<i>drospirenone-ethinyl</i> <i>estradiol tab 3-0.03 mg</i> 58	<i>edaravone</i> .....49
DIVIGEL see <i>estradiol</i> .....60	<i>drospirenone-ethinyl</i> <i>estrad-levomefolate tab</i> <i>3-0.02-0.451 mg</i> .....58	EDARBI.....25
<i>docetaxel</i>.....15	<i>drospirenone-ethinyl</i> <i>estrad-levomefolate tab</i> <i>3-0.03-0.451 mg</i> .....58	EDARBYCLOR TAB 40- 12.5 .....24
DOCETAXEL .....15	<i>drospirenone-ethinyl</i> <i>estrad-levomefolate tab</i> <i>3-0.03-0.451 mg</i> .....58	EDARBYCLOR TAB 40- 25MG .....24
see <i>docetaxel</i> .....15	DROXIA .....72	EDECIN see <i>ethacrynic acid</i>.....29
DOCIVYX.....15	<i>droxidopa</i> .....30	EDLUAR .....47
<i>dofetilide</i>.....26	DUETACT see <i>pioglitazone hcl-</i> <i>glimepiride tab 30-2</i> <i>mg</i>.....54	EDURANT.....7
DOJOLVI.....62	see <i>pioglitazone hcl-</i> <i>glimepiride tab 30-4</i> <i>mg</i>.....54	EDURANT PED .....7
<i>dolishale</i>.....58	DULERA AER 100-5MCG.....87	<i>efavirenz</i> .....7
<i>donepezil hydrochloride</i> ..33	DULERA AER 200-5MCG.....87	<i>efavirenz-emtricitabine-</i> <i>tenofovir df tab 600-200-</i> <i>300 mg</i> .....8
DOPTELET .....72	DULERA AER 50-5MCG 87	<i>efavirenz-lamivudine-</i> <i>tenofovir df tab 400-300-</i> <i>300 mg</i> .....8
DOPTELET SPRINKLE ..72	<i>duloxetine hcl</i>.....34	<i>efavirenz-lamivudine-</i> <i>tenofovir df tab 600-300-</i> <i>300 mg</i> .....8
<i>dorzolamide hcl</i>.....82	DUOBRII LOT .....90	EFEXOR XR see <i>venlafaxine hcl</i>.....35
<i>dorzolamide hcl-timolol</i> <i>maleate ophth soln 2-</i> <i>0.5%</i> .....82	DUOPA SUS 4.63-20.....36	EFFIENT see <i>prasugrel hcl</i> .....73
<i>dorzolamide hcl-timolol</i> <i>maleate pf ophth soln 2-</i> <i>0.5%</i> .....82	DUPIXENT .....74	EGRIFTA SV .....62
<i>dotti</i> .....60	DUREZOL see <i>difluprednate</i>.....81	EGRIFTA WR .....62
DOVATO TAB 50-300MG 8	<i>dutasteride</i> .....70	EKTERLY.....72
<i>doxazosin mesylate</i> .....23	<i>dutasteride-tamsulosin hcl</i> <i>cap 0.5-0.4 mg</i> .....70	ELAHERE .....16
<i>doxepin hcl</i>.....34	DUVYZAT .....49	ELAPRASE .....62
<i>doxepin hcl (sleep)</i>.....47	DYANAVEL XR.....45	ELELYSO.....62
<i>doxercalciferol</i>.....65	DYCLOPRO .....91	ELEPSIA XR .....40
DOXIL see <i>doxorubicin hcl</i> <i>liposomal</i>.....15	DYMISTA see <i>azelastine hcl-</i> <i>fluticasone prop nasal</i> <i>spray 137-50 mcg/act</i>.....83	ELESTRIN .....60
<i>doxorubicin hcl</i>.....14		<i>eletriptan hydrobromide</i> ..48
<i>doxorubicin hcl liposomal</i> 15		ELFABRIO .....62
DOXORUBICIN HYDROCHLORIDE see <i>doxorubicin hcl</i>.....14		ELIGARD .....13
<i>doxy 100</i> .....12		<i>elinest</i>.....58
		ELIQUIS.....71

ELIQUIS (1.5MG PACK) 3 X.....71	<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>.....22	<i>see adapalene-benzoyl peroxide gel 0.1-2.5%</i> .....87
ELIQUIS (2MG PACK) 4 X.....71	ENBREL.....74	EPIDUO FORTE <i>see adapalene-benzoyl peroxide gel 0.3-2.5%</i> .....87
ELIQUIS STARTER PACK.....71	ENBREL MINI.....74	EPIFOAM AER 1%.....90
ELITEK.....15	ENBREL SURECLICK...74	<i>epinastine hcl (ophth)</i>.....82
<i>elixophyllin</i>.....85	ENBUMYST.....29	<i>epinephrine (anaphylaxis)</i> .....30, 85
ELLENCÉ.....15	ENDARI <i>see l-glutamine (sickle cell)</i>.....73	EPIPEN 2-PAK <i>see epinephrine (anaphylaxis)</i>.....85
ELMIRON.....70	<i>endocet tab 10-325mg</i>.....3	EPIPEN-JR 2-PAK <i>see epinephrine (anaphylaxis)</i>.....85
<i>eluryng</i>.....58	<i>endocet tab 2.5-325mg</i>.....2	EPIVIR <i>see lamivudine</i>.....7
EMBLAVEO INJ 2GM.....4	<i>endocet tab 5-325mg</i>.....2	EPKINLY.....17
EMEND.....66	<i>endocet tab 7.5-325mg</i>.....3	<i>eplerenone</i>.....23
<i>see fosaprepitant dimeglumine</i>.....66	ENGERIX-B.....78	<i>epoprostenol sodium</i>.....31
EMEND BIPACK <i>see aprepitant</i>.....66	ENHERTU.....16	EPRONTIA <i>see topiramate</i>.....43
EMGALITY.....48	<i>enilloring</i>.....58	EPSOLAY.....92
EMPAVELI.....72	ENJAYMO.....72	EPYSQLI.....72
EMPLICITI.....16	<i>enoxaparin sodium</i>.....71	EQUETRO.....49
EMRELIS.....16	ENSACOVE.....17	ERAXIS.....6
EMROSI.....92	<i>enskyce</i>.....58	ERBITUX.....17
EMSAM.....34	ENSPRYNG.....49	ERGOMAR.....48
<i>emtricitabine</i>.....7	ENSTILAR AER.....89	<i>ergotamine w/ caffeine tab 1-100 mg</i>.....48
<i>emtricitabine- rilpivirine- tenofovir df tab 200-25- 300 mg</i>.....8	<i>entacapone</i>.....36	<i>eribulin mesylate</i>.....15
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>.....8	<i>entecavir</i>.....9	ERIVEDGE.....17
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>.....8	ENTRESTO <i>see sacubitril-valsartan tab 24-26 mg</i>.....25	ERLEADA.....13
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>.....8	<i>see sacubitril-valsartan tab 49-51 mg</i>.....25	<i>erlotinib hcl</i>.....17
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>.....8	<i>see sacubitril-valsartan tab 97-103 mg</i>.....25	ERMEZA.....65
EMTRIVA.....7	ENTRESTO CAP 15-16MG.....24	<i>errin</i>.....58
<i>see emtricitabine</i>.....7	ENTRESTO CAP 6-6MG 24	<i>ertapenem sodium</i>.....4
EMVERM.....4	<i>enulose</i>.....68	<i>ery</i>.....88
<i>emzahn</i>.....58	ENVARUS XR.....77	ERYPED 400 <i>see erythromycin ethylsuccinate</i>.....10
<i>enalapril maleate</i>.....23	EOHILIA.....68	ERYTHROCIN LACTOBIONATE.....10
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>.....22	EPANED <i>see enalapril maleate</i> ..23	<i>see erythromycin lactobionate</i>.....11
	EPCLUSA PAK 150-37.5..9	<i>erythromycin (acne aid)</i> ..88
	EPCLUSA PAK 200-50MG.....9	
	EPCLUSA TAB 200-50MG.....9	
	EPCLUSA TAB 400-100...9	
	EPIDIOLEX.....40	
	EPIDUO	

<i>erythromycin (ophth)</i>.....81	EVENITY.....56	EXJADE
<i>erythromycin base</i>.....10	<i>everolimus</i>.....17	see <i>deferasirox</i>.....57
<i>erythromycin ethylsuccinate</i>.....10	<i>everolimus</i> (immunosuppressant)..77	EXXUA.....34
<i>erythromycin lactobionate</i>.....11	EVISTA	EXXUA TITRATION PACK.....34
ERZOFRI.....37	see <i>raloxifene hcl</i>.....64	EYLEA.....82
ESBRIET	EVKEEZA.....27	EYLEA HD.....82
see <i>pirfenidone</i>.....85	EVOTAZ TAB 300-150.....8	EYSUVIS.....82
<i>escitalopram oxalate</i>.....34	EVOXAC	EZALLOR SPRINKLE.....26
ESCITALOPRAM	see <i>cevimeline hcl</i>.....93	<i>ezetimibe</i>.....27
OXALATE.....34	EVRYSDI.....49	<i>ezetimibe-simvastatin tab</i> 10-10 mg.....27
<i>eslicarbazepine acetate</i> ..40	EXELON	<i>ezetimibe-simvastatin tab</i> 10-20 mg.....27
<i>esomeprazole magnesium</i>.....69	see <i>rivastigmine</i>.....33	<i>ezetimibe-simvastatin tab</i> 10-40 mg.....27
<i>esomeprazole sodium</i>....69	<i>exemestane</i>.....14	<i>ezetimibe-simvastatin tab</i> 10-80 mg.....27
<i>estarylla</i>.....58	EXFORGE	F
<i>estazolam</i>.....47	see <i>amlodipine besylate-</i> <i>valsartan tab 10-160</i> <i>mg</i>.....23	FABHALTA.....72
ESTRACE	see <i>amlodipine besylate-</i> <i>valsartan tab 10-320</i> <i>mg</i>.....23	FABIOR.....88
see <i>estradiol vaginal</i>....60	see <i>amlodipine besylate-</i> <i>valsartan tab 5-160 mg</i>.....23	FABRAZYME.....62
<i>estradiol</i>.....60	see <i>amlodipine besylate-</i> <i>valsartan tab 5-320 mg</i>.....23	<i>falmina</i>.....58
<i>estradiol & norethindrone</i> <i>acetate tab 0.5-0.1 mg</i> 60	EXFORGE HCT	<i>famciclovir</i>.....9
<i>estradiol & norethindrone</i> <i>acetate tab 1-0.5 mg</i> ...60	see <i>amlodipine-</i> <i>valsartan-</i> <i>hydrochlorothiazide tab</i> 10-160-12.5 mg.....24	<i>famotidine</i>.....67
<i>estradiol vaginal</i>.....60	see <i>amlodipine-</i> <i>valsartan-</i> <i>hydrochlorothiazide tab</i> 10-160-25 mg.....24	FAMOTIDINE.....67
<i>estradiol valerate</i>.....60	see <i>amlodipine-</i> <i>valsartan-</i> <i>hydrochlorothiazide tab</i> 10-320-25 mg.....24	<i>famotidine in nacl 0.9% iv</i> <i>soln 20 mg/50ml</i>.....67
ESTRING.....61	see <i>amlodipine-</i> <i>valsartan-</i> <i>hydrochlorothiazide tab</i> 5-160-12.5 mg.....23	FANAPT.....37
ESTROGEL	see <i>amlodipine-</i> <i>valsartan-</i> <i>hydrochlorothiazide tab</i> 5-160-25 mg.....24	FANAPT PAK PACK A...37
see <i>estradiol</i>.....60	see <i>amlodipine-</i> <i>valsartan-</i> <i>hydrochlorothiazide tab</i> 5-160-25 mg.....24	FANAPT PAK PACK B...37
<i>estrogens, conjugated</i> ...61	see <i>amlodipine-</i> <i>valsartan-</i> <i>hydrochlorothiazide tab</i> 5-160-25 mg.....24	FANAPT PAK PACK C...37
<i>eszopiclone</i>.....47	see <i>amlodipine-</i> <i>valsartan-</i> <i>hydrochlorothiazide tab</i> 5-160-25 mg.....24	FARESTON
<i>ethacrynic acid</i>.....29	see <i>amlodipine-</i> <i>valsartan-</i> <i>hydrochlorothiazide tab</i> 5-160-25 mg.....24	see <i>toremifene citrate</i> ..14
<i>ethambutol hcl</i>.....8	see <i>amlodipine-</i> <i>valsartan-</i> <i>hydrochlorothiazide tab</i> 5-160-25 mg.....24	FARXIGA.....53
<i>ethosuximide</i>.....40	see <i>amlodipine-</i> <i>valsartan-</i> <i>hydrochlorothiazide tab</i> 5-160-25 mg.....24	FASENRA.....85
<i>ethynodiol diacetate &</i> <i>ethinyl estradiol tab 1</i> <i>mg-50 mcg</i>.....58	see <i>amlodipine-</i> <i>valsartan-</i> <i>hydrochlorothiazide tab</i> 5-160-25 mg.....24	FASENRA PEN.....85
<i>etodolac</i>.....1	see <i>amlodipine-</i> <i>valsartan-</i> <i>hydrochlorothiazide tab</i> 5-160-25 mg.....24	FASLODEX
<i>etonogestrel-ethinyl</i> <i>estradiol va ring 0.12-</i> <i>0.015 mg/24hr</i>.....58	see <i>amlodipine-</i> <i>valsartan-</i> <i>hydrochlorothiazide tab</i> 5-160-25 mg.....24	see <i>fulvestrant</i>.....14
ETOPOPHOS.....15	see <i>amlodipine-</i> <i>valsartan-</i> <i>hydrochlorothiazide tab</i> 5-160-25 mg.....24	<i>febuxostat</i>.....1
<i>etoposide</i>.....15	see <i>amlodipine-</i> <i>valsartan-</i> <i>hydrochlorothiazide tab</i> 5-160-25 mg.....24	<i>feirza 1/20</i>.....58
<i>etravirine</i>.....7	see <i>amlodipine-</i> <i>valsartan-</i> <i>hydrochlorothiazide tab</i> 5-160-25 mg.....24	<i>feirza 1.5/30</i>.....58
EUCRISA.....92	see <i>amlodipine-</i> <i>valsartan-</i> <i>hydrochlorothiazide tab</i> 5-160-25 mg.....24	<i>felbamate</i>.....40
EULEXIN.....14	see <i>amlodipine-</i> <i>valsartan-</i> <i>hydrochlorothiazide tab</i> 5-160-25 mg.....24	FELBATOL
EVAMIST.....61	see <i>amlodipine-</i> <i>valsartan-</i> <i>hydrochlorothiazide tab</i> 5-160-25 mg.....24	see <i>felbamate</i>.....40
	see <i>amlodipine-</i> <i>valsartan-</i> <i>hydrochlorothiazide tab</i> 5-160-25 mg.....24	<i>felodipine</i>.....28
	see <i>amlodipine-</i> <i>valsartan-</i> <i>hydrochlorothiazide tab</i> 5-160-25 mg.....24	FEMARA
	see <i>amlodipine-</i> <i>valsartan-</i> <i>hydrochlorothiazide tab</i> 5-160-25 mg.....24	see <i>letrozole</i>.....14

FEMLYV TAB 1/0.02MG	58	<i>fludrocortisone acetate</i>	61	see <i>alendronate sodium</i>	
FEMRING	61	<i>flunisolide (nasal)</i>	86		56
<i>fenofibrate</i>	26	<i>fluocinolone acetonide</i>	90	FOSAMAX + D TAB 70-	
<i>fenofibrate micronized</i>	26	<i>fluocinolone acetonide</i>		2800	56
FENSOLVI	62	(<i>otic</i>)	83	FOSAMAX + D TAB 70-	
<i>fentanyl</i>	2	<i>fluocinonide</i>	90, 91	5600	56
FERRIPROX	57	<i>fluocinonide emulsified</i>		<i>fosamprenavir calcium</i>	7
see <i>deferiprone</i>	57	base	91	<i>fosaprepitant dimeglumine</i>	
FERRIPROX TWICE-A-		<i>fluorometholone (ophth)</i>	81		66
DAY	57	<i>fluorouracil</i>	13	<i>foscarnet sodium</i>	9
<i>fesoterodine fumarate</i>	70	<i>fluorouracil (topical)</i>	92	FOSCAVIR	
FETROJA	10	<i>fluoxetine hcl</i>	34	see <i>foscarnet sodium</i>	9
FETZIMA	34	<i>fluphenazine decanoate</i>	37	<i>fosfomycin tromethamine</i>	4
FETZIMA CAP TITRATIO		<i>fluphenazine hcl</i>	37	<i>fosinopril sodium</i>	23
	34	<i>flurbiprofen</i>	1	<i>fosinopril sodium &</i>	
FIASP	55	<i>flurbiprofen sodium</i>	81	<i>hydrochlorothiazide tab</i>	
FIASP FLEXTOUCH	55	<i>fluticasone propionate</i>	91	10-12.5 mg	22
FIASP PENFILL	55	<i>fluticasone propionate</i>		<i>fosinopril sodium &</i>	
FIASP PUMPCART	55	(<i>nasal</i>)	86	<i>hydrochlorothiazide tab</i>	
<i>fidaxomicin</i>	11	<i>fluticasone-salmeterol aer</i>		20-12.5 mg	22
FILSPARI	70	powder ba 100-50		FOTIVDA	17
FINACEA	92	mcg/act	87	FRAGMIN	71
see <i>azelaic acid</i>	91	<i>fluticasone-salmeterol aer</i>		FRINDOVYX	12
<i>finasteride</i>	70	powder ba 250-50		FROVA	
<i>ingolimod hcl</i>	50	mcg/act	87	see <i>frovatriptan</i>	
FINTEPLA	40	<i>fluticasone-salmeterol aer</i>		<i>succinate</i>	48
<i>finzala</i>	58	powder ba 500-50		<i>frovatriptan succinate</i>	48
FIRAZYR		mcg/act	87	FRUZAQLA	17
see <i>icatibant acetate</i>	73	<i>fluvastatin sodium</i>	26	FULPHILA	72
see <i>sajazir</i>	73	<i>fluvoxamine maleate</i>	32	<i>fulvestrant</i>	14
FIRDAPSE	49	FML FORTE	81	<i>fulvicin p/g 165</i>	6
FIRMAGON	14	FML LIQUIFILM		<i>furosemide</i>	29
FIRVANQ		see <i>fluorometholone</i>		<i>furosemide inj</i>	29
see <i>vancomycin hcl</i>	6	(<i>ophth</i>)	81	FYARRO	17
<i>flac</i>	83	FOCALIN		<i>fyavolv tab 0.5mg-2.5mcg</i>	
FLAREX	81	see <i>dexmethylphenidate</i>			61
FLEBOGAMMA DIF	76	<i>hcl</i>	45	<i>fyavolv tab 1mg-5mcg</i>	61
<i>flecainide acetate</i>	26	FOCALIN XR		FYCOMPA	40
FLEQSUVY		see <i>dexmethylphenidate</i>		see <i>perampanel</i>	42
see <i>baclofen</i>	51	<i>hcl</i>	45	G	
FLOLIPID	26	FOCINVEZ	66	<i>gabapentin</i>	40, 41
<i>fluconazole</i>	6	FOLOTYN	13	<i>gabapentin (once-daily)</i>	49
<i>fluconazole in nacl 0.9% inj</i>		<i>fondaparinux sodium</i>	71	GALAFOLD	62
200 mg/100ml	6	<i>formoterol fumarate</i>	84	<i>galantamine hydrobromide</i>	
<i>fluconazole in nacl 0.9% inj</i>		FORTEO			33
400 mg/200ml	6	see <i>teriparatide</i>	57	<i>galbriela</i>	58
<i>flucytosine</i>	6	FOSAMAX		<i>gallifrey</i>	65
<i>fludarabine phosphate</i>	13			GAMASTAN INJ	76

GAMMAGARD LIQUID ...76	GENVOYA TAB .....8	see <i>gabapentin (once-daily)</i> .....49
GAMMAGARD S/D IGA	GEODON	<i>granisetron hcl</i> .....66
LESS TH .....76	see <i>ziprasidone hcl</i>.....39	GRASTEK.....76
GAMMAKED .....76	see <i>ziprasidone mesylate</i>	<i>griseofulvin microsize</i>.....6
GAMMAPLEX .....76	.....39	<i>griseofulvin ultramicrosize</i> .6
GAMUNEX-C .....76	GILENYA .....50	<i>guanfacine hcl</i>.....30
GANCICLOVIR .....9	see <i> fingolimod hcl</i>.....50	<i>guanfacine hcl (adhd)</i> .....45
<i>ganciclovir sodium</i> .....9	GILOTRIF .....17	GYNAZOLE-1 .....71
GARDASIL 9 .....78	GIMOTI .....66	H
GASTROCROM	GIVLAARI .....72	HADLIMA .....74
see <i>cromolyn sodium</i>	GLASSIA.....85	HADLIMA PUSH TOUCH 74
(<i>mastocytosis</i>).....68	<i>glatiramer acetate</i> .....50	HAEGARDA.....73
<i>gatifloxacin (ophth)</i>.....81	<i>glatopa</i> .....50	<i>hailey 1.5/30</i>.....58
GATTEX.....68	GLEEVEC	<i>hailey 24 fe</i>.....58
GAUZE PADS 2X2 .....55	see <i>imatinib mesylate</i> ..17	HALAVEN
<i>gavilyte-c</i>.....68	GLEOSTINE .....12	see <i>eribulin mesylate</i> ...15
<i>gavilyte-g</i>.....68	see <i>lomustine</i> .....13	HALCION
<i>gavilyte-n/flavor pack</i> .....68	<i>glimepiride</i>.....53	see <i>triazolam</i> .....47
GAVRETO .....17	<i>glipizide</i> .....53	<i>halobetasol propionate</i> ...91
GAZYVA .....17	<i>glipizide-metformin hcl tab</i>	<i>haloette</i> .....58
<i>gefitinib</i>.....17	2.5-250 mg .....53	<i>haloperidol</i> .....37
<i>gemcitabine hcl</i>.....13	<i>glipizide-metformin hcl tab</i>	<i>haloperidol decanoate</i>....37
GEMCITABINE	2.5-500 mg .....53	<i>haloperidol lactate</i>.....37
HYDROCHLORIDE.....13	<i>glipizide-metformin hcl tab</i>	HARVONI PAK 33.75-
see <i>gemcitabine hcl</i>....13	5-500 mg .....53	150MG.....9
<i>gemfibrozil</i>.....26	GLOPERBA .....1	HARVONI PAK 45-200MG
<i>gemmily</i>.....58	GLUCOTROL XL	.....9
GEMTESA .....70	see <i>glipizide</i>.....53	HARVONI TAB 45-200MG9
<i>generlac</i> .....68	<i>glycerol phenylbutyrate</i> ..63	HARVONI TAB 90-400MG9
<i>gengraf</i>.....77	<i>glycopyrrolate</i>.....67	HAVRIX.....78
GENOTROPIN.....62	GLYCOPYRROLATE	<i>heather</i>.....58
GENOTROPIN MINIQUICK	see <i>glycopyrrolate</i> .....67	HEMADY.....61
.....62	<i>glycopyrrolate (oral)</i> .....67	HEMICLOR.....29
<i>gentamicin in saline inj 0.8</i>	<i>glydo</i> .....91	HEPAGAM B.....76
<i>mg/ml</i>.....4	GLYXAMBI TAB 10-5 MG	HEPARIN/NACL INJ
<i>gentamicin in saline inj 1.2</i>	.....53	25000UNT .....71
<i>mg/ml</i>.....5	GLYXAMBI TAB 25-5 MG	HEPARIN SODIUM.....71
<i>gentamicin in saline inj 1.6</i>	.....54	<i>heparin sodium (porcine)</i> 71
<i>mg/ml</i>.....5	GOCOVRI .....36	HEPLISAV-B.....78
<i>gentamicin in saline inj 1</i>	GOLYTELY	HEP SOD/D5W INJ
<i>mg/ml</i>.....4	see <i>gavilyte-g</i> .....68	20000UNT .....71
<i>gentamicin in saline inj 2</i>	see <i>peg 3350-kcl-na</i>	HEP SOD/D5W INJ
<i>mg/ml</i>.....5	<i>bicarb-nacl-na sulfate</i>	25000UNT .....71
<i>gentamicin sulfate</i> .....5	<i>for soln 236 gm</i> .....68	HEP SOD/NACL INJ
<i>gentamicin sulfate (ophth)</i>	GOMEKLI.....17	12500UNT .....71
.....81	GRAFAPEX .....12	HEP SOD/NACL INJ
<i>gentamicin sulfate (topical)</i>	GRALISE .....49	25000UNT .....71
.....88		

HERCEP HYLEC SOL 60-10000	17	<i>hydrocodone- acetaminophen tab 2.5-325 mg</i>	3	see <i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	24
HERCEPTIN	17	<i>hydrocodone- acetaminophen tab 5-300 mg</i>	3	see <i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	24
HERCESSI.....	17	<i>hydrocodone- acetaminophen tab 5-325 mg</i>	3	see <i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	24
HERNEXEOS	17	<i>hydrocodone- acetaminophen tab 7.5-300 mg</i>	3		
HERZUMA	17	<i>hydrocodone- acetaminophen tab 7.5-325 mg</i>	3		
HETLIOZ see <i>tasimelteon</i>	47	<i>hydrocodone bitartrate</i>	2		
HETLIOZ LQ	47	<i>hydrocodone-ibuprofen tab 10-200 mg</i>	3		
HIBERIX.....	78	<i>hydrocodone-ibuprofen tab 5-200 mg</i>	3		
HIPREX see <i>methenamine hippurate</i>	5	<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>	3		
HIZENTRA.....	76	<i>hydrocortisone</i>	61		
HORIZANT.....	49	<i>hydrocortisone (intrarectal)</i>	67		
HUMATIN.....	5	<i>hydrocortisone (rectal)</i>	92		
HUMIRA.....	74	<i>hydrocortisone (topical)</i>	91		
HUMIRA PEN	74	<i>hydrocortisone butyrate</i>	91		
HUMIRA PEN-CD/UC/HS START.....	74	<i>hydrocortisone sod succinate</i>	61		
HUMIRA PEN KIT PS/UV	74	<i>hydrocortisone valerate</i>	91		
HUMULIN R U-500 (CONCENTR.....)	55	<i>hydrocortisone w/ acetic acid otic soln 1-2%</i>	83		
HUMULIN R U-500 KWIKPEN.....	55	<i>hydromorphone hcl</i>	2, 3		
HYCANTIN see <i>topotecan hcl</i>	15	HYDROMORPHONE HYDROCHLORI.....	3		
<i>hydralazine hcl</i>	30	<i>hydroxychloroquine sulfate</i>	75		
HYDREA see <i>hydroxyurea</i>	15	<i>hydroxyurea</i>	15		
<i>hydrochlorothiazide</i>	29	<i>hydroxyzine hcl</i>	84		
<i>hydrocodone- acetaminophen soln 10-300 mg/15ml</i>	3	<i>hydroxyzine pamoate</i>	84		
<i>hydrocodone- acetaminophen soln 10-325 mg/15ml</i>	3	HYFTOR	92		
<i>hydrocodone- acetaminophen soln 7.5-325 mg/15ml</i>	3	HYQVIA INJ 10-800.....	76		
<i>hydrocodone- acetaminophen tab 10-300 mg</i>	3	HYQVIA INJ 2.5-200.....	76		
<i>hydrocodone- acetaminophen tab 10-325 mg</i>	3	HYQVIA INJ 20-1600.....	76		
		HYQVIA INJ 30-2400.....	76		
		HYQVIA INJ 5-400.....	76		
		HYZAAR			
				I	
				<i>ibandronate sodium</i>	56
				IBRANCE	17
				IBTROZI.....	17
				<i>ibu</i>	1
				<i>ibuprofen</i>	1
				<i>icatibant acetate</i>	73
				<i>iclevia</i>	58
				ICLUSIG.....	17
				IDHIFA	17
				IFEX.....	13
				<i>ifosfamide</i>	13
				IFOSFAMIDE	13
				ILARIS.....	76
				ILEVRO	81
				IMAAVY	76
				<i>imatinib mesylate</i>	17
				IMBRUVICA	17
				IMDELLTRA.....	17
				IMFINZI	17
				<i>imipenem-cilastatin intravenous for soln 250 mg</i>	5
				<i>imipenem-cilastatin intravenous for soln 500 mg</i>	5
				<i>imipramine hcl</i>	34
				<i>imipramine pamoate</i>	34
				<i>imiquimod</i>	92
				IMITREX see <i>sumatriptan succinate</i>	48
				IMITREX STATDOSE SYSTEM see <i>sumatriptan succinate</i>	48
				IMJUDO	17
				IMKELDI.....	18

IMOVAX RABIES (H.D.C.V.).....	78	<i>ipratropium bromide (nasal)</i>	83	JAKAFI.....	18
IMPAVIDO	5	IQIRVO	68	JALYN see <i>dutasteride-</i> <i>tamsulosin hcl cap 0.5-</i> <i>0.4 mg</i>	70
IMURAN see <i>azathioprine</i>	77	<i>irbesartan</i>	25	<i>jantoven</i>	72
IMVEXXY MAINTENANCE PACK.....	61	<i>irbesartan-</i> <i>hydrochlorothiazide tab</i> <i>150-12.5 mg</i>	24	JANUMET TAB 50-1000.....	54
IMVEXXY STARTER PACK	61	<i>irbesartan-</i> <i>hydrochlorothiazide tab</i> <i>300-12.5 mg</i>	24	JANUMET TAB 50-500MG	54
INBRIJA	36	IRESSA see <i>gefitinib</i>	17	JANUMET XR TAB 100- 1000	54
<i>incassia</i>	58	<i>irinotecan hcl</i>	15	JANUMET XR TAB 50- 1000	54
INCRELEX.....	63	ISENTRESS.....	7	JANUMET XR TAB 50- 500MG.....	54
INCRUSE ELLIPTA	83	ISENTRESS HD	7	JANUVIA.....	54
<i>indapamide</i>	29	<i>isibloom</i>	58	JARDIANCE.....	54
INDERAL LA see <i>propranolol hcl</i>	28	ISOLYTE-P INJ /D5W.....	79	<i>jasmiel</i>	58
INFANRIX INJ.....	78	ISOLYTE-S INJ.....	79	JATENZO.....	53
INLURIYO	14	ISOLYTE-S INJ PH 7.4...79		JAVADIN.....	30
INLYTA	18	<i>isoniazid</i>	9	<i>javygtor</i>	63
INPEFA.....	30	<i>isosorbide dinitrate</i>	31	JAYPIRCA	18
INQOVI TAB 35-100MG .	13	<i>isosorbide dinitrate-</i> <i>hydralazine hcl tab 20-</i> <i>37.5 mg</i>	30	JEMPERLI	18
INREBIC	18	<i>isosorbide mononitrate</i>	31	JENTADUETO TAB 2.5- 1000	54
INSULIN PEN NEEDLES: EMBECTA-BD.....	55	ISOSORBIDE MONONITRATE.....	31	JENTADUETO TAB 2.5- 500	54
INSULIN SAFETY NEEDLES: EMBECTA- BD	55	<i>isotretinoin</i>	88	JENTADUETO TAB 2.5- 850	54
INSULIN SYRINGES: EMBECTA-BD.....	55	<i>isradipine</i>	28	JENTADUETO TAB XR 2.5-1000MG	54
INTELENCE.....	7	ISTALOL see <i>timolol maleate</i> <i>(ophth) once-daily</i> ...	82	JENTADUETO TAB XR 5- 1000MG.....	54
see <i>etravirine</i>	7	ISTURISA	63	JEVTANA.....	15
INTRALIPID	80	ITOVEBI.....	18	<i>jinteli</i>	61
INTRAROSA	70	<i>itraconazole</i>	6	JOENJA	76
<i>introvale</i>	58	<i>ivabradine hcl</i>	30	<i>jolessa</i>	58
INTUNIV see <i>guanfacine hcl</i> <i>(adhd)</i>	45	<i>ivermectin</i>	5	JORNAY PM	45
INVEGA see <i>paliperidone</i>	38	IWILFIN.....	15	JOURNAVX	1
INVEGA HAFYERA	37	IXEMPRA KIT	15	JUBLIA.....	89
INVEGA SUSTENNA.....	37	IXIARO INJ	78	<i>juleber</i>	58
INVEGA TRINZA	38	IYUZEH.....	82	JULUCA TAB 50-25MG ...	8
INVELTYS.....	81	IZERVAY.....	82	<i>junel 1/20</i>	58
INZIRQO	29	J		<i>junel 1.5/30</i>	58
IPOL INJ INACTIVE.....	78	JADENU see <i>deferasirox</i>	57	<i>junel fe 1/20</i>	58
<i>ipratropium-albuterol nebu</i> <i>soln 0.5-2.5(3) mg/3ml</i>	83	JADENU SPRINKLE see <i>deferasirox</i>	57	<i>junel fe 1.5/30</i>	58
<i>ipratropium bromide</i>	83	<i>jaimiess</i>	58	<i>junel fe 24</i>	58
				JUXTAPID.....	27

JYLAMVO	75	<i>kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj</i>	79	<i>ketorolac tromethamine (ophth)</i>	81
JYNARQUE	63	<i>kcl 20 meq/l (0.149%) in nacl 0.45% inj</i>	79	KEYVEYIS see <i>dichlorphenamide</i>	29
see <i>tolvaptan</i>	64	<i>kcl 20 meq/l (0.149%) in nacl 0.9% inj</i>	79	KEYTRUDA	18
JYNNEOS	78	<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj</i>	79	KEYTRUDA INJ QLEX 395-4800 MG- UNIT/2.4ML.....	18
K		<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj</i>	79	KEYTRUDA INJ QLEX 790-9600 MG- UNIT/4.8ML.....	18
KABIVEN EMU	80	<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i>	79	KHAPZORY	15
KADCYLA	18	<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>	79	KHINDIVI	61
<i>kaitlib fe</i>	58	<i>kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj</i>	79	KIMMTRAK.....	18
KALBITOR.....	73	<i>kcl 40 meq/l (0.298%) in nacl 0.9% inj</i>	79	KIMYRSA.....	5
KALETRA see <i>lopinavir-ritonavir tab 100-25 mg</i>	8	<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj</i>	79	KINERET	74
see <i>lopinavir-ritonavir tab 200-50 mg</i>	8	<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.9% inj</i>	79	KINRIX INJ.....	78
KALETRA SOL	8	<i>kclnol 1/35</i>	58	<i>kionex</i>	57
KALYDECO	85	KENALOG-10	61	KISQALI 200 DOSE.....	18
KANJINTI.....	18	see <i>triamcinolone acetone</i>	62	KISQALI 400 DOSE.....	18
KANUMA.....	63	KENALOG-40 see <i>triamcinolone acetone</i>	62	KISQALI 400 PAK FEMARA	18
KAPSPARGO SPRINKLE	28	KENALOG-80	61	KISQALI 600 DOSE.....	18
<i>kariva</i>	58	KEPPRA see <i>levetiracetam</i>	41	KISQALI 600 PAK FEMARA	18
KATERZIA	28	see <i>rowepra</i>	42	KITABIS PAK see <i>tobramycin</i>	6
KCL/D5W/LACT INJ 20MEQ/L	79	KEPPRA XR see <i>levetiracetam</i>	41	KLARON see <i>sulfacetamide sodium (acne)</i>	88
KCL/D5W/NACL INJ 0.15/0.2	79	KERENDIA.....	23	<i>klayesta</i>	89
KCL/D5W/NACL INJ 0.15/0.45	79	<i>ketoconazole</i>	7	KLISYRI	92
KCL/D5W/NACL INJ 0.15/0.9	79	<i>ketoconazole (topical)</i>	89	KLONOPIN see <i>clonazepam</i>	40
KCL/D5W/NACL INJ 0.3/0.9%	79	<i>ketorolac tromethamine</i>	1	<i>klor-con</i>	80
KCL 0.075%/D5W/NACL 0.45% see <i>kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj</i>	79			<i>klor-con 10</i>	80
KCL 0.3%/D5W/NACL 0.45% see <i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj</i>	79			KLOR-CON 10.....	80
KCL 0.3%/D5W/NACL 0.9% see <i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.9% inj</i>	79			KLOR-CON 8	80

KOSELUGO.....	18	LAMICTAL		larin 1/20.....	58
<i>kourzeq</i>	93	STARTER/TAKING C		larin 1.5/30.....	58
KRAZATI.....	18	see <i>lamotrigine tab 84 x</i>		larin 24 fe.....	58
KRINTAFEL.....	7	25 mg & 14 x 100 mg		larin fe 1/20.....	58
KRYSTEXXA.....	1	starter kit.....	41	larin fe 1.5/30.....	58
<i>kurvelo</i>	58	see <i>subvenite starter</i>		LASIX	
KUVAN		<i>kit/gre</i>	43	see <i>furosemide</i>	29
see <i>javygtor</i>	63	LAMICTAL		<i>latanoprost</i>	82
see <i>sapropterin</i>		STARTER/TAKING V		LATUDA	
<i>dihydrochloride</i>	64	see <i>lamotrigine tab 35 x</i>		see <i>lurasidone hcl</i>	38
see <i>zelyvsia</i>	64	25 mg starter kit.....	41	LAZCLUZE.....	18
KYPROLIS.....	18	see <i>subvenite starter</i>		<i>leflunomide</i>	76
KYXATA.....	13	<i>kit/blu</i>	43	<i>lenalidomide</i>	14
L		LAMICTAL XR		LENVIMA 10 MG DAILY	
<i>labetalol hcl</i>	28	see <i>lamotrigine</i>	41	DOSE.....	18
<i>lacosamide</i>	41	LAMICTAL XR KIT.....	41	LENVIMA 12MG DAILY	
<i>lacosamide oral</i>	41	<i>lamivudine</i>	7	DOSE.....	18
<i>lactated ringer's solution</i>	79	<i>lamivudine (hbv)</i>	9	LENVIMA 20 MG DAILY	
LACTATED RIN INJ.....	79	<i>lamivudine-zidovudine tab</i>		DOSE.....	18
<i>lactic acid (ammonium</i>		150-300 mg.....	8	LENVIMA 4 MG DAILY	
<i>lactate)</i>	92	<i>lamotrigine</i>	41	DOSE.....	18
<i>lactulose</i>	68	<i>lamotrigine tab 25 mg (42)</i>		LENVIMA 8 MG DAILY	
<i>lactulose (encephalopathy)</i>		& 100 mg (7) starter kit.....	41	DOSE.....	18
.....	68	<i>lamotrigine tab 35 x 25 mg</i>		LENVIMA CAP 14 MG.....	18
LAMICTAL		starter kit.....	41	LENVIMA CAP 18 MG.....	18
see <i>lamotrigine</i>	41	<i>lamotrigine tab 84 x 25 mg</i>		LENVIMA CAP 24 MG.....	18
see <i>subvenite</i>	43	& 14 x 100 mg starter kit		LESCOL XL	
LAMICTAL CHEWABLE		.....	41	see <i>fluvastatin sodium</i>	26
DISPERS		<i>lamotrigine tab disint 21 x</i>		<i>lessina</i>	58
see <i>lamotrigine</i>	41	25 mg & 7 x 50 mg		LETAIRIS	
LAMICTAL ODT		<i>titration kit</i>	41	see <i>ambrisentan</i>	31
see <i>lamotrigine</i>	41	<i>lamotrigine tab disint 25</i>		<i>letrozole</i>	14
see <i>lamotrigine tab disint</i>		(14) & 50 mg (14) & 100		<i>leucovorin calcium</i>	15
21 x 25 mg & 7 x 50		mg (7) kit.....	41	LEUKERAN.....	13
mg titration kit.....	41	<i>lamotrigine tab disint 42 x</i>		LEUKINE.....	72
see <i>lamotrigine tab disint</i>		50mg & 14 x 100mg		<i>leuprolide acetate</i>	14
25 (14) & 50 mg (14) &		<i>titration kit</i>	41	<i>leuprolide acetate (3</i>	
100 mg (7) kit.....	41	LAMZEDE.....	63	month).....	14
see <i>lamotrigine tab disint</i>		LANOXIN		<i>levalbuterol hcl</i>	84
42 x 50mg & 14 x		see <i>digoxin</i>	30	<i>levalbuterol tartrate</i>	84
100mg titration kit.....	41	LANOXIN PEDIATRIC.....	30	<i>levetiracetam</i>	41
LAMICTAL STARTER/NOT		<i>lanreotide acetate</i>	63	LEVETIRACETAM.....	41
TAKI		LANREOTIDE ACETATE		LEVETIRACETAM/SODIU	
see <i>lamotrigine tab 25</i>		.....	63	M CHLO	
mg (42) & 100 mg (7)		<i>lansoprazole</i>	69	see <i>levetiracetam in</i>	
starter kit.....	41	LANTUS.....	55	<i>sodium chloride iv soln</i>	
see <i>subvenite starter</i>		LANTUS SOLOSTAR.....	55	1000 mg/100ml.....	41
<i>kit/ora</i>	43	<i>lapatinib ditosylate</i>	18		

see <i>levetiracetam in sodium chloride iv soln 1500 mg/100ml</i>.....41	<i>levora 0.15/30-28</i>.....59	<i>lithium carbonate</i>.....49
see <i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i>.....41	<i>levo-t</i>.....65	LITHOBID see <i>lithium carbonate</i> ..49
<i>levetiracetam in sodium chloride iv soln 1000 mg/100ml</i>.....41	<i>levothyroxine sodium</i> .....65	LITHOSTAT .....70
<i>levetiracetam in sodium chloride iv soln 1500 mg/100ml</i>.....41	<i>levoxyl</i>.....65	LIVALO see <i>pitavastatin calcium</i>.....26
<i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i>.....41	LEXAPRO see <i>escitalopram oxalate</i>.....34	LIVDELZI .....68
<i>levobunolol hcl</i> .....82	<i>l-glutamine (sickle cell)</i>....73	LIVMARLI.....68
<i>levocarnitine (metabolic modifiers)</i>.....63	LIALDA see <i>mesalamine</i> .....67	LIVTENCITY .....9
<i>levocetirizine dihydrochloride</i>.....84	LIBTAYO.....18	LODINE see <i>etodolac</i>.....1
<i>levofloxacin</i> .....11	<i>lidocaine</i>.....91	LODOCO .....30
<i>levofloxacin (ophth)</i>.....81	<i>lidocaine hcl</i>.....91	LODOSYN see <i>carbidopa</i>.....35
<i>levofloxacin in d5w iv soln 250 mg/50ml</i>.....11	<i>lidocaine hcl (local anesth.)</i> .....1	<i>loestrin 1/20-21</i> .....59
<i>levofloxacin in d5w iv soln 500 mg/100ml</i>.....11	<i>lidocaine hcl (mouth-throat)</i> .....93	<i>loestrin 1.5/30-21</i> .....59
<i>levofloxacin in d5w iv soln 750 mg/150ml</i>.....11	<i>lidocaine-prilocaine cream 2.5-2.5%</i>.....91	<i>loestrin fe 1/20</i> .....59
<i>levoleucovorin calcium</i>....15	<i>lidocan</i>.....91	<i>loestrin fe 1.5/30</i> .....59
<i>levonest</i>.....58	LIDODERM see <i>lidocaine</i> .....91	<i>lofexidine hcl</i> .....52
<i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg</i>.....58	see <i>lidocan</i> .....91	<i>lojaimiess</i> .....59
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i> .....59	see <i>tridacaine ii</i> .....91	LOKELMA.....57
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>.....59	LIKMEZ.....5	LO LOESTRIN TAB 1-10-10 .....59
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i> .....59	LILETTA.....59	LOMOTIL see <i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>.....68
<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i> .....59	<i>linezolid</i>.....5	<i>lomustine</i>.....13
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i> .....59	LINEZOLID INJ 2MG/ML ..5	LONSURF TAB 15-6.14..13
	LINZESS .....68	LONSURF TAB 20-8.19..13
	<i>liomny</i>.....65	<i>loperamide hcl</i>.....68
	<i>liothyronine sodium</i>.....65	LOPID see <i>gemfibrozil</i> .....26
	LIPITOR see <i>atorvastatin calcium</i>.....26	<i>lopinavir-ritonavir tab 100-25 mg</i> .....8
	<i>liraglutide</i>.....54	<i>lopinavir-ritonavir tab 200-50 mg</i> .....8
	<i>lisdexamphetamine dimesylate</i> .....45	LOPRESSOR.....28 see <i>metoprolol tartrate</i> 28
	<i>lisinopril</i>.....23	LOQTORZI.....18
	<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i> .....22	<i>lorazepam</i> .....32
	<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i> .....22	<i>lorazepam intensol</i>.....32
	<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i> .....22	LORBRENA .....18, 19
	<i>lithium</i>.....49	<i>loryna</i> .....59
		<i>losartan potassium</i>.....25

<i>losartan potassium & hydrochlorothiazide tab</i> 100-12.5 mg .....24	LOVENOX see <i>enoxaparin sodium</i>.....71	LYRICA CR see <i>pregabalin (once-daily)</i> .....49
<i>losartan potassium & hydrochlorothiazide tab</i> 100-25 mg .....24	<i>low-ogestrel</i>.....59	LYSODREN .....14
<i>losartan potassium & hydrochlorothiazide tab</i> 50-12.5 mg .....24	<i>loxapine succinate</i> .....38	LYTGOBI (12 MG DAILY DOSE).....19
LOTEMAX.....81	<i>lubiprostone</i> .....68	LYTGOBI (16 MG DAILY DOSE).....19
see <i>loteprednol etabonate</i> .....81	LUCEMYRA see <i>lofexidine hcl</i>.....52	LYTGOBI (20 MG DAILY DOSE).....19
LOTEMAX SM .....81	LUCENTIS .....82	<i>lyza</i>.....59
LOTENSIN see <i>benazepril hcl</i> .....23	<i>luizza 1/20</i>.....59	M
LOTENSIN HCT see <i>benazepril & hydrochlorothiazide tab</i> 10-12.5 mg.....22	<i>luizza 1.5/30</i>.....59	MACROBID see <i>nitrofurantoin monohyd macro</i> .....5
see <i>benazepril & hydrochlorothiazide tab</i> 20-12.5 mg.....22	LUMAKRAS .....19	MACRODANTIN see <i>nitrofurantoin macrocrystal</i> .....5
see <i>benazepril & hydrochlorothiazide tab</i> 20-25 mg.....22	LUMIGAN.....82	<i>magnesium sulfate</i>.....79
<i>loteprednol etabonate</i> .....81	LUMIZYME .....63	MAGNESIUM SULFATE.79 see <i>magnesium sulfate</i>.....79
<i>loteprednol etabonate-tobramycin ophth susp</i> 0.5-0.3%.....80	LUMRYZ .....52	MAGNESIUM SULFATE IN D5W see <i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i>.....79
LOTREL see <i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>.....22	LUMRYZ PAK STARTER.....52	<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i>.....79
see <i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>.....22	LUNESTA see <i>eszopiclone</i>.....47	MALARONE see <i>atovaquone-proguanil hcl tab 250-100 mg</i>.....7
see <i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>.....22	LUNSUMIO .....19	see <i>atovaquone-proguanil hcl tab 62.5-25 mg</i>.....7
see <i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>.....22	LUPKYNIS .....77	<i>malathion</i> .....92
LOTRONEX see <i>alose tron hcl</i> .....68	LUPRON DEPOT (1-MONTH).....14	<i>maraviroc</i> .....7
<i>lovastatin</i>.....26	LUPRON DEPOT (3-MONTH).....14	MARGENZA.....19
LOVAZA see <i>omega-3-acid ethyl esters cap 1 gm</i> .....27	LUPRON DEPOT (4-MONTH).....14	MARINOL see <i>dronabinol</i>.....66
	LUPRON DEPOT (6-MONTH).....14	<i>marlissa</i>.....59
	LUPRON DEPOT-PED (1-MONTH).....63	MARPLAN.....34
	LUPRON DEPOT-PED (3-MONTH).....63	MATULANE .....15
	LUPRON DEPOT-PED (6-MONTH).....63	<i>matzim la</i>.....28
	<i>lurasidone hcl</i>.....38	MAVENCLAD
	<i>lutra</i> .....59	
	LUTRATE DEPOT .....14	
	LYBALVI TAB 10-10MG .38	
	LYBALVI TAB 15-10MG .38	
	LYBALVI TAB 20-10MG .38	
	LYBALVI TAB 5-10MG ...38	
	<i>lyleq</i>.....59	
	<i>lyllana</i>.....61	
	LYNOZYFIC.....19	
	LYNPARZA.....19	
	LYRICA see <i>pregabalin</i>.....42	

see <i>cladribine (10 tabs)</i>	<i>medroxyprogesterone</i>	see <i>pyridostigmine</i>
.....50	acetate (contraceptive) 59	bromide .....49
see <i>cladribine (4 tabs)</i> .50	<i>mefloquine hcl</i>.....7	METADATE CD
see <i>cladribine (5 tabs)</i> .50	<i>megestrol acetate</i> .....14, 65	see <i>methylphenidate hcl</i>
see <i>cladribine (6 tabs)</i> .50	<i>megestrol acetate</i>	.....46
see <i>cladribine (7 tabs)</i> .50	(appetite) .....65	<i>metaxalone</i> .....51
see <i>cladribine (8 tabs)</i> .50	MEKINIST .....19	<i>metformin hcl</i> .....54
see <i>cladribine (9 tabs)</i> .50	MEKTOVI.....19	<i>methadone hcl</i> .....2
MAVENCLAD (10 TABS) 51	<i>meleya</i> .....59	METHADONE HCL INJ ....2
MAVENCLAD (4 TABS)..50	<i>meloxicam</i>.....1	<i>methadone hydrochloride i2</i>
MAVENCLAD (5 TABS)..50	<i>memantine hcl</i>.....33	METHADOSE
MAVENCLAD (6 TABS)..50	<i>memantine hcl-donepezil</i>	see <i>methadone</i>
MAVENCLAD (7 TABS)..50	<i>hcl cap er 24hr 14-10 mg</i>	hydrochloride i .....2
MAVENCLAD (8 TABS)..50	.....33	<i>methazolamide</i>.....29
MAVENCLAD (9 TABS)..50	<i>memantine hcl-donepezil</i>	<i>methenamine hippurate</i> ....5
MAVYRET PAK 50-20MG 9	<i>hcl cap er 24hr 21-10 mg</i>	<i>methimazole</i>.....65
MAVYRET TAB 100-40MG	.....33	<i>methocarbamol</i> .....51
.....9	<i>memantine hcl-donepezil</i>	<i>methotrexate sodium</i> 13, 76
MAXALT	<i>hcl cap er 24hr 28-10 mg</i>	<i>methoxsalen rapid</i>.....89
see <i>rizatriptan benzoate</i>	.....33	<i>methscopolamine bromide</i>
.....48	<i>memantine hcl tab 28 x 5</i>	.....67
MAXALT-MLT	<i>mg & 21 x 10 mg titration</i>	<i>methsuximide</i> .....41
see <i>rizatriptan benzoate</i>	<i>pack</i>.....33	<i>methyldopa</i> .....30
.....48	MENEST .....61	METHYLIN
MAXIDEX.....81	MENOSTAR.....61	see <i>methylphenidate hcl</i>
MAXITROL	MENQUADFI .....78	.....46
see <i>neomycin-polymyxin-</i>	MENVEO INJ .....78	<i>methylphenidate</i>.....46
<i>dexamethasone ophth</i>	MENVEO SOL .....78	<i>methylphenidate hcl</i> .....46
<i>oint 0.1%</i>.....80	MEPRON	<i>methylprednisolone</i> .....61
see <i>neomycin-polymyxin-</i>	see <i>atovaquone</i>.....4	<i>methylprednisolone acetate</i>
<i>dexamethasone ophth</i>	<i>mercaptapurine</i> .....13	.....61
<i>susp 0.1%</i>.....80	MEROP/NACL INJ	<i>methylprednisolone sod</i>
MAYZENT .....51	1GM/50ML.....5	succ .....61
MAYZENT STARTER	MEROP/NACL INJ	<i>metoclopramide hcl</i>.....66
PACK (12) .....51	500/50ML .....5	<i>metolazone</i> .....29
MAYZENT STARTER	<i>meropenem</i>.....5	<i>metoprolol &</i>
PACK (7) .....51	MEROPENEM	<i>hydrochlorothiazide tab</i>
<i>meclizine hcl</i> .....66	see <i>meropenem</i> .....5	100-25 mg .....27
<i>meclofenamate sodium</i>....1	<i>merzee</i> .....59	<i>metoprolol &</i>
MEDROL.....61	<i>mesalamine</i>.....67	<i>hydrochlorothiazide tab</i>
see <i>methylprednisolone</i>	<i>mesalamine w/ cleanser</i> .67	100-50 mg .....27
.....61	<i>mesna</i> .....15	<i>metoprolol &</i>
MEDROL DOSEPAK	MESNEX	<i>hydrochlorothiazide tab</i>
see <i>methylprednisolone</i>	see <i>mesna</i>.....15	50-25 mg .....27
.....61	MESTINON	<i>metoprolol succinate</i> .....28
<i>medroxyprogesterone</i>	see <i>pyridostigmine</i>	<i>metoprolol tartrate</i> .....28
<i>acetate</i>.....65	bromide.....49	METROCREAM
	MESTINON TIMESPAN	

see <i>metronidazole</i>	MIPLYFFA	63	MULTAQ	26
(<i>topical</i>)	<i>mirabegron</i>	70	<i>multiple electrolytes ph 5.5</i>	
<i>metronidazole</i>	<i>mirtazapine</i>	34	.....	79
METRONIDAZOLE	MIRVASO		<i>mupirocin</i>	88
see <i>metronidazole</i>	see <i>brimonidine tartrate</i>		MYALEPT	63
<i>metronidazole (topical)</i>	(<i>topical</i>)	91	MYCAPSSA	63
<i>metronidazole vaginal</i>	<i>misoprostol</i>	68	<i>mycophenolate mofetil</i>	77
<i>metryrosine</i>	MITIGARE		<i>mycophenolate sodium</i>	77
<i>mibelas 24 fe</i>	see <i>colchicine</i>	1	MYDAYIS	
MICAFUNGIN/NAACL INJ	<i>mitomycin</i>	15	see <i>amphetamine-</i>	
100MG/100ML	<i>mitoxantrone hcl</i>	15	<i>dextroamphetamine 3-</i>	
MICAFUNGIN/NAACL INJ	M-M-R II INJ	78	<i>bead cap er 24hr 12.5</i>	
150MG/150ML	M-NATAL PLUS TAB	80	<i>mg</i>	44
MICAFUNGIN/NAACL INJ	<i>modafinil</i>	52	see <i>amphetamine-</i>	
50MG/50ML	MODEYSO	15	<i>dextroamphetamine 3-</i>	
<i>micafungin sodium</i>	<i>moexipril hcl</i>	23	<i>bead cap er 24hr 25</i>	
MICARDIS	<i>molindone hcl</i>	38	<i>mg</i>	44
see <i>telmisartan</i>	<i>mometasone furoate</i>	91	see <i>amphetamine-</i>	
MICARDIS HCT	<i>mometasone furoate</i>		<i>dextroamphetamine 3-</i>	
see <i>telmisartan-</i>	(<i>nasal</i>)	86	<i>bead cap er 24hr 37.5</i>	
<i>hydrochlorothiazide tab</i>	MONJUVI	19	<i>mg</i>	44
40-12.5 <i>mg</i>	<i>mono-lynyah</i>	59	see <i>amphetamine-</i>	
see <i>telmisartan-</i>	<i>montelukast sodium</i>	85	<i>dextroamphetamine 3-</i>	
<i>hydrochlorothiazide tab</i>	<i>morphine sulfate</i>	2, 3	<i>bead cap er 24hr 50</i>	
80-12.5 <i>mg</i>	MORPHINE SULFATE	3	<i>mg</i>	44
see <i>telmisartan-</i>	MORPHINE		MYFEMBREE TAB	63
<i>hydrochlorothiazide tab</i>	SULFATE/SODIUM C ...	3	MYFORTIC	
80-25 <i>mg</i>	<i>morphine sulfate beads</i>	2	see <i>mycophenolate</i>	
<i>miconazole 3</i>	MOTPOLY XR	41	<i>sodium</i>	77
<i>miconazole-zinc oxide-</i>	MOUNJARO	54	MYHIBBIN	77
<i>white petrolatum oint</i>	MOVANTIK	68	MYLOTARG	19
0.25-15-81.35%	MOVIPREP		MYOBLOC	52
89	see <i>peg-</i>		MYRBETRIQ	
<i>microgestin 1/20</i>	3350/electrolytes/asc		see <i>mirabegron</i>	70
<i>microgestin 1.5/30</i> .....	.....	68	MYSOLINE	
<i>microgestin fe 1/20</i>	<i>moxifloxacin hcl</i>	11	see <i>primidone</i>	42
<i>microgestin fe 1.5/30</i>	<i>moxifloxacin hcl (ophth)</i>	81	N	
<i>midodrine hcl</i>	<i>moxifloxacin hcl 400</i>		<i>nabumetone</i>	1
30	<i>mg/250ml in sodium</i>		<i>nadolol</i>	28
MIEBO	<i>chloride 0.8% inj</i>	11	NAFCILLIN INJ 2GM/100	
82	MOXIFLOXACIN		.....	11
<i>mifepristone</i>	HYDROCHLORID	11	<i>nafcillin sodium</i>	11
(<i>hyperglycemia</i>)	MOZOBIL		<i>naftifine hcl</i>	89
63	see <i>plerixafor</i>	72	NAFTIN	
<i>miglitol</i>	MRESVIA	78	see <i>naftifine hcl</i>	89
54	MS CONTIN		NAGLAZYME	63
<i>miglustat</i>	see <i>morphine sulfate</i>	2	<i>nalbuphine hcl</i>	3
63	MULPLETA	73	<i>naloxone hcl</i>	52
<i>mili</i>				
59				
<i>mimvey</i>				
61				
MINIVELLE				
see <i>lyllana</i>				
61				
<i>minocycline hcl</i>				
12				
<i>minoxidil</i>				
30				

<i>naltrexone hcl</i>.....52	<i>neomycin-polymyxin-hc otic soln 1%</i>.....83	<i>sodium chloride 0.9%</i>.....28
NAMZARIC	<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>.....83	NICARDIPINE SOL 20/200ML .....28
see <i>memantine hcl-donepezil hcl cap er 24hr 14-10 mg</i> .....33	<i>neomycin sulfate</i>.....5	NICARDIPINE SOL 40/200ML .....28
see <i>memantine hcl-donepezil hcl cap er 24hr 21-10 mg</i> .....33	NEORAL	NICOTROL NS .....53
see <i>memantine hcl-donepezil hcl cap er 24hr 28-10 mg</i> .....33	see <i>cyclosporine modified (for microemulsion)</i> .....77	<i>nifedipine</i>.....29
NAMZARIC CAP 7-10MG .....33	see <i>gengraf</i> .....77	<i>nikki</i>.....59
<i>naproxen</i> .....1	NERLYNX .....19	NIKTIMVO.....77
<i>naproxen dr</i>.....1	<i>neuac gel 1.2-5%</i>.....88	NILOTINIB .....19
<i>naproxen sodium</i> .....1	NEURONTIN	<i>nilotinib hcl</i> .....19
<i>naratriptan hcl</i> .....48	see <i>gabapentin</i>.....40, 41	<i>nilutamide</i>.....14
NARDIL	NEVANAC.....81	<i>nimodipine</i>.....29
see <i>phenelzine sulfate</i> .35	<i>nevirapine</i> .....8	NINLARO .....19
NATACYN.....81	NEXAVAR	NIPENT .....15
NATAZIA TAB .....59	see <i>sorafenib tosylate</i> .20	<i>nisoldipine</i> .....29
<i>nateglinide</i>.....54	NEXIUM	<i>nitazoxanide</i> .....5
NAYZILAM .....41	see <i>esomeprazole magnesium</i> .....69	<i>nitisinone</i>.....63
<i>nebivolol hcl</i> .....28	NEXLETOL .....27	NITRO-BID.....31
NEBUPENT	NEXLIZET TAB 180/10MG .....27	NITRO-DUR.....31
see <i>pentamidine isethionate inh</i>.....5	NEXPLANON.....59	<i>nitrofurantoin macrocrystal5 nitrofurantoin monohyd macro</i> .....5
<i>necon 0.5/35-28</i> .....59	NEXTSTELLIS TAB 3-14.2MG.....59	<i>nitroglycerin</i>.....31
<i>nefazodone hcl</i>.....34	NEXVIAZYME.....63	<i>nitroglycerin (intra-anal)</i> ..92
NEMLUVIO .....74	NGENLA .....63	NITROLINGUAL
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i> .....81	<i>niacin (antihyperlipidemic)</i> .....27	see <i>nitroglycerin</i> .....31
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i> .....81	<i>nicardipine hcl</i>.....28	NITROSTAT
<i>neomycin-polymyxin b gu irrigation soln</i> .....70	<i>nicardipine hcl iv soln 20 mg/200ml in sodium chloride 0.9%</i>.....28	see <i>nitroglycerin</i> .....31
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i> .....80	<i>nicardipine hcl iv soln 40 mg/200ml in sodium chloride 0.9%</i>.....28	NITYR .....63
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>.....80	NICARDIPINE	<i>nizatidine</i>.....67
<i>neomycin-polymyxin-hc ophth susp</i>.....80	HYDROCHLORIDE	<i>nora-be</i>.....59
	see <i>nicardipine hcl iv soln 20 mg/200ml in sodium chloride 0.9%</i>.....28	NORDITROPIN FLEXPRO .....63
	see <i>nicardipine hcl iv soln 40 mg/200ml in</i>	<i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</i> .....59

<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>.....59	see <i>ritonavir</i>.....8	<i>nystatin (topical)</i>.....89
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>.....59	NOURIANZ .....36	<i>nystop</i> .....89
<i>norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24)</i>.....59	NOVAREL.....63	O
<i>norethindrone acetate</i> .....65	NOVOLIN INJ 70/30 .....56	OCREVUS .....51
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i> .....61	NOVOLIN INJ 70/30 FP ..56	OCREVUS INJ ZUNOVO51
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i> .....61	NOVOLIN N .....56	OCTAGAM.....76
<i>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg</i> .....59	NOVOLIN N FLEXPEN...56	<i>octreotide acetate</i> .....63
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>.....59	NOVOLIN R .....56	OCUFLOX
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i> .....59	NOVOLIN R FLEXPEN...56	see <i>ofloxacin (ophth)</i> ...81
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i> .....59	NOVOLOG.....56	ODACTRA SUB.....76
NORITATE.....92	NOVOLOG FLEXPEN ....56	ODEFSEY TAB.....8
NORLIQVA .....29	NOVOLOG FLEXPEN	ODOMZO.....19
<i>norlyroc</i> .....59	RELION .....56	OFEV .....85
NORPACE	NOVOLOG MIX INJ 70/30	<i>ofloxacin (ophth)</i> .....81
see <i>disopyramide phosphate</i> .....26	.....56	<i>ofloxacin (otic)</i>.....83
NORPACE CR.....26	NOVOLOG MIX INJ	OGIVRI .....19
NORPRAMIN	FLEXPEN.....56	OGSIVEO .....19
see <i>desipramine hcl</i> ....34	NOVOLOG PENFILL .....56	OHTUVAYRE.....85
NORTHERA	NOVOLOG RELION .....56	OJEMDA .....19
see <i>droxidopa</i>.....30	NOXAFIL.....7	OJJAARA.....19
<i>nortrel 0.5/35 (28)</i> .....59	see <i>posaconazole</i> .....7	<i>olanzapine</i>.....38
<i>nortrel 1/35 (21)</i> .....59	NPLATE .....72	<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>.....24
<i>nortrel 1/35 (28)</i> .....59	NUBEQA.....14	<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i>.....24
<i>nortrel 7/7/7</i>.....59	NUDEXTA CAP 20-10MG	<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>.....25
<i>nortriptyline hcl</i>.....34	.....49	<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>.....24
NORVASC	NULOJIX.....77	<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>.....24
see <i>amlodipine besylate</i> .....28	NUPLAZID .....38	<i>olmesartan medoxomil</i>....25
NORVIR .....8	NURTEC .....48	<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i> .....24
	NUTRILIPID .....80	<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i> .....24
	NUVARING	<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>.....24
	see <i>eluryng</i>.....58	<i>olopatadine hcl (nasal)</i>....84
	see <i>enilloring</i> .....58	OLPRUVA.....63
	see <i>etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr</i>.....58	
	see <i>haloette</i>.....58	
	NUVIGIL	
	see <i>armodafinil</i> .....52	
	NUZYRA .....12	
	<i>nyamyc</i>.....89	
	<i>nylia 1/35</i>.....59	
	<i>nylia 7/7/7</i>.....59	
	NYMALIZE .....29	
	<i>nystatin</i>.....7	
	NYSTATIN	
	see <i>nystatin (mouth-throat)</i> .....93	
	<i>nystatin (mouth-throat)</i>.....93	

<i>omega-3-acid ethyl esters</i>	ORENITRAM TAB MONTH	<i>oxymorphone hcl</i>.....4
<i>cap 1 gm</i>.....27	3 .....31	OXYTROL.....70
<i>omeprazole</i> .....69	ORFADIN .....63	OZEMPIC (0.25 OR
OMNARIS .....86	<i>see nitisinone</i> .....63	0.5MG/DOSE) .....54
OMNIPOD 5 DX KIT INT	ORGOVYX.....14	OZEMPIC (1MG/DOSE) .54
G7G6.....56	ORIAHNN CAP .....63	OZEMPIC (2MG/DOSE) .54
OMNIPOD 5 DX MIS POD	ORLISSA .....63	OZOBAX DS
G7G6.....56	ORKAMBI GRA 100-125 85	<i>see baclofen</i> .....51
OMNIPOD 5 L2 KIT INTRO	ORKAMBI GRA 150-188 85	P
G6.....56	ORKAMBI GRA 75-94MG	<i>pacerone</i> .....26
OMNIPOD 5 L2 MIS PODS	.....85	<i>paclitaxel</i> .....15
G6.....56	ORKAMBI TAB 100-125 .85	<i>paclitaxel inj 100mg</i> .....15
OMNIPOD DASH KIT	ORKAMBI TAB 200-125 .85	PADCEV .....19
INTRO .....56	ORLADEYO .....73	PALFORZIA CAP
OMNIPOD DASH MIS	ORLYNVAH TAB 500-500 5	ESCALAT .....76
PODS .....56	<i>ormarvi</i> .....29	PALFORZIA CAP LEVEL
OMNITROPE .....63	<i>orquidea</i> .....59	10 .....76
ONCASPAR.....15	ORSERDU .....14	PALFORZIA CAP LEVEL 3
<i>ondansetron</i> .....66	<i>oseltamivir phosphate</i> .....9	.....76
<i>ondansetron hcl</i> .....66	OSPOMYV .....56	PALFORZIA CAP LEVEL 7
ONEXTON	OXACILLIN INJ 2GM .....11	.....76
<i>see clindamycin</i>	<i>oxacillin sodium</i>.....11	PALFORZIA CAP LEVEL 8
<i>phosphate-benzoyl</i>	<i>oxaliplatin</i> .....13	.....76
<i>peroxide gel 1.2-3.75%</i>	<i>oxaprozin</i> .....1	PALFORZIA LEVEL 1.....76
.....88	<i>oxazepam</i> .....33	PALFORZIA LEVEL 11
ONFI	<i>oxcarbazepine</i>.....42	(MAINT .....77
<i>see clobazam</i> .....40	OXERVATE .....82	(TITRA.....77
ONGENTYS.....36	OXISTAT.....89	PALFORZIA LEVEL 2.....76
ONIVYDE.....15	OXLUMO .....70	PALFORZIA LEVEL 4.....77
ONTRUZANT.....19	OXTELLAR XR	PALFORZIA LEVEL 5.....77
ONUREG .....13	<i>see oxcarbazepine</i> .....42	PALFORZIA LEVEL 6.....77
OPDIVO .....19	<i>oxybutynin chloride</i> .....70	PALFORZIA LEVEL 9.....77
OPDIVO INJ QVANTIG ..19	<i>oxycodone hcl</i>.....3	<i>paliperidone</i> .....38
OPDUALAG SOL.....19	<i>oxycodone w/</i>	<i>palonosetron hcl</i>.....66
OPFOLDA.....63	<i>acetaminophen soln 5-</i>	PALSONIFY .....63
OPIPZA.....38	325 mg/5ml.....4	PALYNZIQ .....63
OPSUMIT.....31	<i>oxycodone w/</i>	PAMELOR
OPVEE.....53	<i>acetaminophen tab 10-</i>	<i>see nortriptyline hcl</i> .....34
OPZELURA.....92	325 mg .....4	<i>pamidronate disodium</i>.....56
ORACEA	<i>oxycodone w/</i>	PAMIDRONATE
<i>see doxycycline</i>	<i>acetaminophen tab 2.5-</i>	DISODIUM .....56
(<i>rosacea</i>).....92	325 mg .....4	PANCREAZE CAP
ORBACTIV.....5	<i>oxycodone w/</i>	10500UNT .....68
ORENITRAM .....31	<i>acetaminophen tab 5-325</i>	PANCREAZE CAP
ORENITRAM TAB MONTH	mg .....4	16800UNT .....68
1 .....31	<i>oxycodone w/</i>	PANCREAZE CAP
ORENITRAM TAB MONTH	<i>acetaminophen tab 7.5-</i>	21000UNT .....68
2 .....31	325 mg .....4	

PANCREAZE CAP 2600UNIT	68	PEMRYDI RTU	13	see <i>chlorhexidine</i>
PANCREAZE CAP 37000	68	PENBRAYA INJ	78	<i>gluconate (mouth-</i>
PANCREAZE CAP 4200UNIT	68	<i>penciclovir</i>	92	<i>throat)</i>
PANRETIN.....	92	PEN GK/DEXTR INJ 40000/ML	12	see <i>perio gard</i>
PANTOPR/NACL SOL 40MG/100.....	69	PEN GK/DEXTR INJ 60000/ML	12	<i>perindopril erbumine</i>
PANTOPR/NACL SOL 80MG/100.....	69	<i>penicillamine</i>	57	<i>perio gard</i>
<i>pantoprazole sodium</i>	69	<i>penicillin g potassium</i>	12	PERJETA.....
PANTOPRAZOLE SODIUM see <i>pantoprazole sodium</i>	69	<i>penicillin g sodium</i>	12	<i>permethrin</i>
PANTOPRAZOLE SOL 40/50ML	69	<i>penicillin v potassium</i>	12	PERMETHRIN see <i>permethrin</i>
PANZYGA.....	76	PENMENVY INJ	78	<i>perphenazine</i>
<i>paricalcitol</i>	65	PENTACEL INJ.....	78	<i>perphenazine-amitriptyline</i> tab 2-10 mg
PARLODEL see <i>bromocriptine</i> <i>mesylate</i>	35	PENTAM 300 see <i>pentamidine</i> <i>isethionate inj</i>	5	<i>perphenazine-amitriptyline</i> tab 2-25 mg
PARNATE see <i>tranylcypromine</i> <i>sulfate</i>	35	<i>pentamidine isethionate inh</i>	5	<i>perphenazine-amitriptyline</i> tab 4-10 mg
<i>paroxetine hcl</i>	34, 35	<i>pentamidine isethionate inj</i>	5	<i>perphenazine-amitriptyline</i> tab 4-25 mg
PAVBLU.....	82	PENTASA	67	<i>perphenazine-amitriptyline</i> tab 4-50 mg
PAXIL see <i>paroxetine hcl</i>	34	see <i>mesalamine</i>	67	PERSERIS.....
PAXIL CR see <i>paroxetine hcl</i>	35	<i>pentoxifylline</i>	73	PERTZYE CAP 16000U .
PAXLOVID PAK.....	9	PEPCID see <i>famotidine</i>	67	PERTZYE CAP 24000U .
PAXLOVID TAB 150-100..	9	<i>perampanel</i>	42	PERTZYE CAP 4000UNIT
PAXLOVID TAB 300-100..	9	PERCOCET see <i>endocet tab 10-</i> <i>325mg</i>	3	PERTZYE CAP 8000UNIT
<i>pazopanib hcl</i>	19	see <i>endocet tab 5-325mg</i>	2	<i>pfizerpen</i>
PEDIARIX INJ 0.5ML.....	78	see <i>endocet tab 7.5-</i> <i>325mg</i>	3	PHEBURANE.....
PEDVAX HIB	78	see <i>oxycodone w/</i> <i>acetaminophen tab 10-</i> <i>325 mg</i>	4	<i>phenelzine sulfate</i>
<i>peg-3350/electrolytes/asc</i>	68	see <i>oxycodone w/</i> <i>acetaminophen tab 5-</i> <i>325 mg</i>	4	PHENERGAN see <i>promethazine hcl</i> ..
<i>peg 3350-kcl-na bicarb-</i> <i>nacl-na sulfate for soln</i> <i>236 gm</i>	68	see <i>oxycodone w/</i> <i>acetaminophen tab</i> <i>7.5-325 mg</i>	4	<i>phenobarbital</i>
<i>peg 3350-kcl-sod bicarb-</i> <i>nacl for soln 420 gm</i>	68	PERFOROMIST see <i>formoterol fumarate</i>	84	<i>phenobarbital sodium</i>
PEGASYS.....	9	PERIDEX		<i>phenoxybenzamine hcl</i> ...
PEMAZYRE	19			<i>phenytek</i>
PEMETREXED	13			<i>phenytoin</i>
<i>pemetrexed disodium</i>	13			<i>phenytoin sodium</i>
				<i>phenytoin sodium extended</i>
				PHESGO SOL
				PHEXX GEL.....
				PHEXXI GEL.....
				<i>philith</i>
				PHOSPHOLINE IODIDE.82
				PIASKY
				PIFELTRO

<i>pilocarpine hcl</i>.....82	PLASMA-LYTE A	<i>potassium chloride 20</i>
<i>pilocarpine hcl (oral)</i>.....93	<i>see multiple electrolytes</i>	<i>meq/l (0.15%) in</i>
<i>pimecrolimus</i>.....92	<i>ph 5.5</i>.....79	<i>dextrose 5% inj</i>.....79
<i>pimozide</i>.....38	PLAVIX	<i>potassium chloride</i>
<i>pimtrea</i>.....60	<i>see clopidogrel bisulfate</i>	<i>microencapsulated</i>
<i>pindolol</i>.....28	.....73	<i>crystals er</i>.....80
<i>pioglitazone hcl</i>.....54	PLEGRIDY.....51	<i>potassium citrate</i>
<i>pioglitazone hcl-glimepiride</i>	PLEGRIDY INJ STARTER	<i>(alkalinizer)</i>.....70
<i>tab 30-2 mg</i>.....54	.....51	POT CHL/D5W INJ
<i>pioglitazone hcl-glimepiride</i>	PLEGRIDY PEN INJ	20MEQ/L.....79
<i>tab 30-4 mg</i>.....54	STARTER.....51	POT CHL 20MEQ/L IN
<i>pioglitazone hcl-metformin</i>	<i>plenamine</i>.....80	NACL 0.45% INJ.....79
<i>hcl tab 15-500 mg</i>.....54	PLENVU SOL.....68	POT CHL 20MEQ/L IN
<i>pioglitazone hcl-metformin</i>	<i>plerixafor</i>.....72	NACL 0.9% INJ.....79
<i>hcl tab 15-850 mg</i>.....54	<i>podofilox</i>.....92	POT CHL 40MEQ/L IN
PIP/TAZ/NACL INJ 2-	POKONZA.....80	NACL 0.9% INJ.....79
0.25GM.....12	POLIVY.....20	POTELIGEO.....20
PIP/TAZ/NACL INJ 3-	<i>polymyxin b sulfate</i>.....5	PRADAXA
0.375G.....12	<i>polymyxin b-trimethoprim</i>	<i>see dabigatran etexilate</i>
PIP/TAZ/NACL INJ 4-	<i>ophth soln 10000 unit/ml-</i>	<i>mesylate</i>.....71
0.5GM.....12	0.1%.....81	<i>pramipexole</i>
<i>piperacillin sod-tazobactam</i>	POMALYST.....14	<i>dihydrochloride</i>.....36
<i>na for inj 3.375 gm (3-</i>	POMBILITI.....63	PRAMOSONE LOT 1-1%
0.375 gm).....12	PONVORY.....51	.....91
<i>piperacillin sod-tazobactam</i>	PONVORY TAB STARTER	PRAMOSONE LOT 2.5%
<i>sod for inj 13.5 gm (12-</i>	.....51	.....91
1.5 gm).....12	<i>portia-28</i>.....60	<i>prasugrel hcl</i>.....73
<i>piperacillin sod-tazobactam</i>	<i>posaconazole</i>.....7	<i>pravastatin sodium</i>.....26
<i>sod for inj 2.25 gm (2-</i>	POSFREA.....66	<i>praziquantel</i>.....5
0.25 gm).....12	<i>potassium chloride</i>....79, 80	<i>prazosin hcl</i>.....23
<i>piperacillin sod-tazobactam</i>	POTASSIUM CHLORIDE	PRED FORTE
<i>sod for inj 4.5 gm (4-0.5</i>	<i>see potassium chloride</i> 79	<i>see prednisolone acetate</i>
gm).....12	POTASSIUM	<i>(ophth)</i>.....81
<i>piperacillin sod-tazobactam</i>	CHLORIDE/DEXTRO	PRED MILD.....81
<i>sod for inj 40.5 gm (36-</i>	<i>see kcl 30 meq/l</i>	<i>prednisolone</i>.....62
4.5 gm).....12	<i>(0.224%) in dextrose</i>	<i>prednisolone acetate</i>
PIQRAY 200MG DAILY	5% & nacl 0.45% inj.79	<i>(ophth)</i>.....81
DOSE.....19	<i>see potassium chloride</i>	PREDNISOLONE SODIUM
PIQRAY 250MG TAB	20 meq/l (0.15%) in	PHOSP.....81
DOSE.....19	dextrose 5% inj.....79	<i>prednisolone sodium</i>
PIQRAY 300MG DAILY	POTASSIUM	<i>phosphate</i>.....62
DOSE.....19	CHLORIDE/SODIUM	<i>prednisone</i>.....62
<i>pirfenidone</i>.....85	<i>see kcl 20 meq/l (0.15%)</i>	PREDNISONE INTENSOL
<i>piroxicam</i>.....1	<i>in nacl 0.45% inj</i>.....79	.....62
<i>pitavastatin calcium</i>.....26	<i>see kcl 20 meq/l (0.15%)</i>	<i>pregabalin</i>.....42
PLAQUENIL	<i>in nacl 0.9% inj</i>.....79	<i>pregabalin (once-daily)</i> ...49
<i>see hydroxychloroquine</i>	<i>see kcl 40 meq/l (0.3%)</i>	PREGNYL W/DILUENT
<i>sulfate</i>.....75	<i>in nacl 0.9% inj</i>.....79	BENZYL.....64

PREMARIN.....61	<i>prochlorperazine maleate</i>	see <i>budesonide</i>
see <i>estrogens,</i>	.....66	(<i>inhalation</i>) .....86
<i>conjugated</i> .....61	PROCRIT .....72	PULMOZYME .....85
PREMASOL SOL 10%...80	<i>proctocort</i> .....92	PURIXAN
PREMPHASE TAB .....61	PROCTOFOAM AER HC	see <i>mercaptopurine</i>....13
PREMPRO TAB 0.3-1.5..61	1% .....92	<i>pyrazinamide</i>.....9
PREMPRO TAB 0.45-1.561	<i>procto-med hc</i> .....92	<i>pyridostigmine bromide</i> ...49
PREMPRO TAB 0.625-2.5	<i>proctosol hc</i>.....92	<i>pyrimethamine</i> .....5
.....61	<i>proctozone-hc</i> .....92	PYRUKYND .....73
PREMPRO TAB 0.625-5.61	PROCYSBI .....64	PYRUKYND TAB
PRENATAL TAB 27-1MG	<i>progesterone</i>.....65	20MGX5MG .....73
.....80	PROGLYCEM	PYRUKYND TAB
PRENATAL TAB PLUS...80	see <i>diazoxide</i> .....62	50MGX20M .....73
PRETOMANID .....9	PROGRAF .....77	PYRUKYND TAPER PACK
PREVACID	see <i>tacrolimus</i> .....77	.....73
see <i>lansoprazole</i> .....69	PROLASTIN-C.....85	PYZCHIVA .....74
<i>prevalite</i> .....27	PROLENSA	Q
PREVYMIS .....9	see <i>bromfenac sodium</i>	QBRELIS .....23
PREZCOBIX TAB 675/150	(<i>ophth</i>) .....81	QBREXZA.....92
.....8	PROLIA.....57	QELBREE .....46
PREZCOBIX TAB 800-150	<i>promethazine &</i>	QINLOCK.....20
.....8	<i>phenylephrine syrup</i>	QNASL.....86
PREZISTA .....8	6.25-5 mg/5ml .....83	QNASL CHILDRENS .....86
see <i>darunavir</i>.....7	<i>promethazine hcl</i>.....66	QUADRACEL INJ 0.5ML 78
PRIFTIN .....9	<i>promethegan</i>.....66	QUESTRAN
PRILOSEC.....69	PROMETRIUM	see <i>cholestyramine</i> .....27
<i>primaquine phosphate</i> .....7	see <i>progesterone</i> .....65	QUESTRAN LIGHT
PRIMAQUINE	<i>propafenone hcl</i> .....26	see <i>cholestyramine light</i>
PHOSPHATE .....7	<i>proparacaine hcl</i> .....82	.....27
see <i>primaquine</i>	<i>propranolol hcl</i> .....28	see <i>prevalite</i> .....27
<i>phosphate</i> .....7	<i>propylthiouracil</i>.....65	<i>quetiapine fumarate</i> .....38
PRIMAXIN IV	PROQUAD INJ .....78	QUILLICHEW ER.....46
see <i>imipenem-cilastatin</i>	PROSCAR	QUILLIVANT XR .....46
<i>intravenous for soln</i>	see <i>finasteride</i> .....70	<i>quinapril hcl</i>.....23
500 mg.....5	PROSOL INJ 20% .....80	<i>quinapril-</i>
<i>primidone</i> .....42	PROTONIX	<i>hydrochlorothiazide tab</i>
PRIORIX INJ.....78	see <i>pantoprazole sodium</i>	10-12.5 mg .....22
PRISTIQ	.....69	<i>quinapril-</i>
see <i>desvenlafaxine</i>	<i>protriptyline hcl</i>.....35	<i>hydrochlorothiazide tab</i>
<i>succinate</i>.....34	PROVERA	20-12.5 mg .....22
PRIVIGEN.....76	see	<i>quinapril-</i>
<i>probenecid</i> .....1	<i>medroxyprogesterone</i>	<i>hydrochlorothiazide tab</i>
PROCARDIA XL	<i>acetate</i> .....65	20-25 mg .....22
see <i>nifedipine</i> .....29	PROVIGIL	<i>quinidine sulfate</i> .....26
<i>prochlorperazine</i> .....66	see <i>modafinil</i> .....52	<i>quinine sulfate</i> .....7
<i>prochlorperazine edisylate</i>	<i>pruradik</i>.....93	QULIPTA.....48
.....66	PULMICORT	QUTENZA KIT 8% 1-PCH
		.....91

QUTENZA KIT 8% 2-PCH	91	see <i>mirtazapine</i>	34	RIOMET see <i>metformin hcl</i>	54
QUTENZA KIT 8% 4-PCH	91	REMERON SOLTAB see <i>mirtazapine</i>	34	<i>risedronate sodium</i>	57
QUVIVIQ	47	REMODULIN	31	RISPERDAL see <i>risperidone</i>	38, 39
QUZYTIR	84	RENFLXIS	74	RISPERDAL CONSTA see <i>risperidone</i> microspheres	39
R		<i>repaglinide</i>	54	<i>risperidone</i>	38, 39
RABAVERT INJ	78	REPATHA	27	<i>risperidone microspheres</i>	39
<i>rabeprazole sodium</i>	69	REPATHA SURECLICK	27	<i>risperidone</i>	38, 39
RADICAVA see <i>edaravone</i>	49	RESTASIS	82	<i>risperidone microspheres</i>	39
RADICAVA ORS	49	RESTASIS MULTIDOSE	82	RITALIN see <i>methylphenidate hcl</i>	46
RADICAVA ORS STARTER KIT	49	RESTORIL see <i>temazepam</i>	47	RITALIN LA see <i>methylphenidate hcl</i>	46
RAGWITEK	77	RETEVMO	20	<i>ritonavir</i>	8
RALDESY	35	RETIN-A see <i>tretinoin</i>	88	<i>rivaroxaban</i>	72
<i>raloxifene hcl</i>	64	RETIN-A MICRO	88	<i>rivastigmine</i>	33
<i>ramelteon</i>	47	RETIN-A MICRO PUMP see <i>tretinoin microsphere</i>	88	<i>rivastigmine tartrate</i>	33
<i>ramipril</i>	23	RETROVIR see <i>zidovudine</i>	8	<i>rivelsa</i>	60
<i>ranolazine</i>	30	REVATIO see <i>sildenafil citrate</i> (pulmonary hypertension)	31	RIVFLOZA	70
RAPAFLO see <i>silodosin</i>	70	REVCIVI	64	<i>rizatriptan benzoate</i>	48
RAPIVAB	9	REVLIMID	14	ROCALTROL see <i>calcitriol</i>	65
<i>rasagiline mesylate</i>	36	REVUFORJ	20	see <i>calcitriol (oral)</i>	65
RAVICTI	64	REXTOVY	53	ROCKLATAN DRO	82
see <i>glycerol</i> <i>phenylbutyrate</i>	63	REXULTI	38	<i>roflumilast</i>	85
RAYALDEE	65	REYATAZ	8	ROMVIMZA	20
REBLOZYL	73	see <i>atazanavir sulfate</i>	7	<i>ropinirole hydrochloride</i>	36
REBYOTA	69	REZDIFFRA	64	<i>rosuvastatin calcium</i>	26
RECARBRIO INJ 1.25GM 5 RECLAST see <i>zoledronic acid</i>	57	REZLIDHIA	20	<i>rosyrah</i>	60
<i>reclipsen</i>	60	REZUROCK	77	ROTARIX SUS	78
RECOMBIVAX HB	78	REZZAYO	7	ROTATEQ SOL	78
RECORLEV	64	RHAPSIDO	75	ROWASA see <i>mesalamine w/</i> cleanser	67
RECTIV see <i>nitroglycerin (intra-</i> <i>anal)</i>	92	RHOFADE	92	<i>roweepra</i>	42
REGLAN see <i>metoclopramide hcl</i>	66	RHOPRESSA	82	ROXICODONE see <i>oxycodone hcl</i>	3
RELENZA DISKHALER	9	<i>ribavirin (hepatitis c)</i>	9	ROZEREM see <i>ramelteon</i>	47
RELISTOR	69	<i>rifabutin</i>	9	ROZLYTREK	20
RELPAK see <i>eletriptan</i> <i>hydrobromide</i>	48	RIFADIN see <i>rifampin</i>	9	RUBRACA	20
REMERON		<i>rifampin</i>	9	RUCONEST	73
		<i>riluzole</i>	49	<i>rufinamide</i>	42
		<i>rimantadine hydrochloride</i>	9	RUKOBIA	8
		RINVOQ	75	RYALTRIS SPR 665-25	83
		RINVOQ LQ	75		

RYBELSUS.....	55	<i>sapropterin dihydrochloride</i>	.....	64	see <i>carbidopa &</i>
RYBREVANT.....	20	SARCLISA.....	20		<i>levodopa tab 10-100</i>
RYBREVANT INJ FASPRO	20	SAVELLA.....	49		<i>mg.....</i>
.....	20	SAVELLA MIS TITR PAK	49		see <i>carbidopa &</i>
RYDAPT.....	20	.....	49		<i>levodopa tab 25-100</i>
RYKINDO.....	39	SCSEMBLIX.....	20		<i>mg.....</i>
RYLAZE.....	15	<i>scopolamine</i>	66		SINGULAIR
RYSTIGGO.....	77	SECUADO.....	39		see <i>montelukast sodium</i>
RYTARY CAP 145MG....	36	<i>selegiline hcl</i>	36		.....
RYTARY CAP 195MG....	36	<i>selenium sulfide</i>	89		<i>sirolimus</i>
RYTARY CAP 245MG....	36	SELZENTRY.....	8		SIRTURO.....
RYTARY CAP 95MG....	36	see <i>maraviroc</i>	7		SIVEXTRO.....
RYTELO.....	73	SENSIPAR	62		SKYCLARYS.....
S		see <i>cinacalcet hcl</i>	62		SKYRIZI.....
SABRIL		SEPHIENCE.....	64		SKYRIZI PEN.....
see <i>vigabatrin</i>	43	SEREVENT DISKUS....	84		SKYTROFA.....
see <i>vigadrone</i>	43	SEROQUEL	38		SMOFLIPID EMU.....
<i>sacubitril-valsartan tab 24-</i>		see <i>quetiapine fumarate</i>	38		SOANZ.....
<i>26 mg</i>	25	.....	38		<i>sodium chloride</i>
<i>sacubitril-valsartan tab 49-</i>		SEROQUEL XR	38		<i>sodium chloride (gu</i>
<i>51 mg</i>	25	see <i>quetiapine fumarate</i>	38		<i>irrigant)</i>
<i>sacubitril-valsartan tab 97-</i>		.....	38		<i>sodium fluoride chew; tab;</i>
<i>103 mg</i>	25	SEROSTIM.....	64		<i>1.1 (0.5 f) mg/ml soln...</i>
SAFYRAL		<i>sertraline hcl</i>	35		<i>sodium oxybate</i>
see <i>drospirenone-ethinyl</i>		<i>setlakin</i>	60		<i>sodium phenylbutyrate</i>
<i>estradiol-levomefolate</i>		SFROWASA.....	67		<i>sodium polystyrene</i>
<i>tab 3-0.03-0.451 mg</i>	58	<i>sharobel</i>	60		<i>sulfonate powder</i>
see <i>tydemy</i>	60	SHINGRIX.....	78		<i>sod sulfate-pot sulf-mg sulf</i>
<i>sajazir</i>	73	SIGNIFOR.....	64		<i>oral sol 17.5-3.13-1.6</i>
SALAGEN		SIGNIFOR LAR.....	64		<i>gm/177ml</i>
see <i>pilocarpine hcl (oral)</i>		SIKLOS.....	73		SOFDRA.....
.....	93	<i>sildenafil citrate (pulmonary</i>			SOGROYA.....
SAMSCA.....	64	<i>hypertension)</i>	31		<i>solifenacin succinate</i>
see <i>tolvaptan</i>	64	SILENOR			SOLQUA INJ 100/33.....
SANCUSO.....	66	see <i>doxepin hcl (sleep)</i>			SOLIRIS.....
SANDIMMUNE		.....	47		SOLOSEC.....
see <i>cyclosporine</i>	77	<i>silodosin</i>	70		SOLTAMOX.....
SANDOSTATIN		SILVADENE			SOLU-CORTEF.....
see <i>octreotide acetate</i>	63	see <i>silver sulfadiazine</i>	88		see <i>hydrocortisone sod</i>
SANDOSTATIN LAR		see <i>ssd</i>	88		<i>succinate</i>
DEPOT		<i>silver sulfadiazine</i>	88		SOLU-MEDROL.....
see <i>octreotide acetate</i>	63	SIMBRINZA SUS 1-0.2%	82		see <i>methylprednisolone</i>
SANTYL.....	93	<i>simliya</i>	60		<i>sod succ</i>
SAPHNELO.....	77	<i>simpesse</i>	60		SOMA
SAPHRIS		<i>simvastatin</i>	26		see <i>carisoprodol</i>
see <i>asenapine maleate</i>		SINEMET			SOMATULINE DEPOT...64
.....	37				SOMAVERT.....
					<i>sorafenib tosylate</i>

see <i>levo-t</i>	65	TAZORAC		TENORETIC 50	
see <i>levothyroxine sodium</i>		see <i>tazarotene</i>	89	see <i>atenolol &</i>	
.....	65	TAZVERIK	20	<i>chlorthalidone tab 50-</i>	
see <i>levoxyl</i>	65	TECENTRIQ	20	25 mg.....	27
see <i>unithroid</i>	65	TECENTRIQ INJ		TENORMIN	
SYPRINE		HYBREZA	20	see <i>atenolol</i>	27
see <i>trientine hcl</i>	57	TECFIDERA		TEPEZZA.....	64
T		see <i>dimethyl fumarate</i> .	50	TEPMETKO	20
TABLOID.....	13	TECFIDERA STARTER		<i>terazosin hcl</i>	23
TABRECTA.....	20	PACK		<i>terbinafine hcl</i>	7
<i>tacrolimus</i>	77	see <i>dimethyl fumarate</i>		<i>terbutaline sulfate</i>	84
<i>tacrolimus (topical)</i>	92	<i>capsule dr starter pack</i>		<i>terconazole vaginal</i>	71
<i>tadalafil</i>	70	120 mg & 240 mg ...	50	<i>teriflunomide</i>	51
<i>tadalafil (pulmonary</i>		TECVAYLI.....	20	<i>teriparatide</i>	57
<i>hypertension)</i>	31	TEFLARO	10	TERIPARATIDE.....	57
TADLIQ.....	31	TEGRETOL		<i>testosterone</i>	53
TAFINLAR.....	20	see <i>carbamazepine</i>	39	<i>testosterone cypionate</i>	53
TAGRISSE	20	TEGRETOL-XR		<i>testosterone enanthate</i> ...	53
TAKHZYRO	73	see <i>carbamazepine</i>	39	<i>testosterone pump</i>	53
TALICIA CAP	69	TEKTRUNA		<i>tetrabenazine</i>	49
TALZENNA	20	see <i>aliskiren fumarate</i> .	29	<i>tetracycline hcl</i>	12
TAMIFLU		<i>telmisartan</i>	25	TEVIMBRA.....	20
see <i>oseltamivir</i>		<i>telmisartan-amlodipine tab</i>		TEZRULY.....	23
<i>phosphate</i>	9	40-10 mg	25	THALITONE.....	29
<i>tamoxifen citrate</i>	14	<i>telmisartan-amlodipine tab</i>		THALOMID	14
<i>tamsulosin hcl</i>	70	40-5 mg	25	THEO-24.....	86
TARGRETIN		<i>telmisartan-amlodipine tab</i>		<i>theophylline</i>	86
see <i>bexarotene</i>	14	80-10 mg	25	THIOLA	
see <i>bexarotene (topical)</i>		<i>telmisartan-amlodipine tab</i>		see <i>tiopronin</i>	70
.....	91	80-5 mg	25	THIOLA EC	
<i>tarina 24 fe</i>	60	<i>telmisartan-</i>		see <i>tiopronin</i>	70
<i>tarina fe 1/20 eq</i>	60	<i>hydrochlorothiazide tab</i>		see <i>venxxiva</i>	70
TARPEYO.....	70	40-12.5 mg	25	<i>thioridazine hcl</i>	39
TASCENSO ODT.....	51	<i>telmisartan-</i>		<i>thiothixene</i>	39
TASIGNA		<i>hydrochlorothiazide tab</i>		THYQUIDITY	65
see <i>nilotinib hcl</i>	19	80-12.5 mg	25	<i>tiadylt er</i>	29
<i>tasimelteon</i>	47	<i>telmisartan-</i>		<i>tiagabine hcl</i>	43
TAVALISSE	73	<i>hydrochlorothiazide tab</i>		TIAZAC	
TAVNEOS.....	73	80-25 mg	25	see <i>diltiazem hcl</i>	
TAYTULLA		<i>temazepam</i>	47	<i>extended release</i>	
see <i>gemmily</i>	58	<i>temsirolimus</i>	20	<i>beads</i>	28
see <i>merzee</i>	59	TENIVAC INJ 5-2LF.....	78	see <i>tiadylt er</i>	29
see <i>norethindrone ace-</i>		<i>tenofovir disoproxil</i>		TIBSOVO	20
<i>ethinyl estradiol-fe cap</i>		<i>fumarate</i>	8	<i>ticagrelor</i>	73
1 mg-20 mcg (24) ...	59	TENORETIC 100		TICOVAC	78
<i>tazarotene</i>	89	see <i>atenolol &</i>		<i>tigecycline</i>	12
TAZAROTENE.....	88	<i>chlorthalidone tab 100-</i>		TIGLUTIK.....	49
<i>tazicef</i>	10	25 mg.....	27	TIKOSYN	

<i>see dofetilide</i>	26	<i>see topiramate</i>	43	TRAZIMERA	20
<i>tilia fe</i>	60	TOPAMAX SPRINKLE		<i>trazodone hcl</i>	35
<i>timolol hemihydrate (ophth)</i>		<i>see topiramate</i>	43	TREANDA	
.....	82	TOPICORT		<i>see bendamustine hcl</i> .	12
<i>timolol maleate</i>	28	<i>see desoximetasone</i> ...	90	TRELEGY AER ELLIPTA	
<i>timolol maleate (ophth)</i> ...	82	<i>topiramate</i>	43	100-62.5-25 MCG.....	83
<i>timolol maleate (ophth)</i>		<i>topotecan hcl</i>	15	TRELEGY AER ELLIPTA	
<i>once-daily</i>	82	TOPOTECAN HCL		200-62.5-25 MCG.....	83
<i>timolol maleate (ophth) pf</i>		<i>see topotecan hcl</i>	15	TRELSTAR MIXJECT	14
.....	82	TOPROL XL		TREMFYA.....	75
TIMOPTIC OCUDOSE		<i>see metoprolol succinate</i>		TREMFYA INDUCTION	
<i>see timolol maleate</i>		.....	28	PACK FO.....	75
<i>(ophth) pf</i>	82	<i>toremifene citrate</i>	14	TREMFYA PEN	75
<i>tinidazole</i>	5	TORISEL		<i>treprostinil</i>	31
<i>tiopronin</i>	70	<i>see temsirolimus</i>	20	<i>tretinoin</i>	88
<i>tiotropium bromide</i>	83	<i>torpenz</i>	20	<i>tretinoin (chemotherapy)</i> .	15
TIROSINT	65	<i>torsemide</i>	29	<i>tretinoin microsphere</i>	88
TIROSINT-SOL.....	65	TOUJEO MAX SOLOSTAR		TREXALL	76
TIVDAK.....	20	.....	56	<i>trezix</i>	4
TIVICAY	8	TOUJEO SOLOSTAR.....	56	<i>triamcinolone acetonide</i> ..	62
TIVICAY PD	8	<i>tovet</i>	91	<i>triamcinolone acetonide</i>	
<i>tizanidine hcl</i>	52	TOVIAZ		<i>(mouth)</i>	93
TLANDO	53	<i>see fesoterodine</i>		<i>triamcinolone acetonide</i>	
TOBI PODHALER.....	5	<i>fumarate</i>	70	<i>(topical)</i>	91
TOBRADEX OIN 0.3-0.1%		TPN ELECTROL INJ	79	<i>triamterene &</i>	
.....	80	TRACLEER.....	31	<i>hydrochlorothiazide cap</i>	
TOBRADEX ST SUS 0.3-		<i>see bosentan</i>	31	37.5-25 mg	29
0.05	80	TRADJENTA.....	55	<i>triamterene &</i>	
<i>tobramycin</i>	5, 6	<i>tramadol-acetaminophen</i>		<i>hydrochlorothiazide tab</i>	
<i>tobramycin (ophth)</i>	81	<i>tab 37.5-325 mg</i>	4	37.5-25 mg	29
<i>tobramycin-dexamethasone</i>		<i>tramadol hcl</i>	2, 4	<i>triamterene &</i>	
<i>ophth susp 0.3-0.1%</i> ...	80	<i>trandolapril</i>	23	<i>hydrochlorothiazide tab</i>	
<i>tobramycin sulfate</i>	6	<i>trandolapril-verapamil hcl</i>		75-50 mg	29
TOBREX	81	<i>tab er 1-240 mg</i>	22	<i>triazolam</i>	47
<i>tolmetin sodium</i>	1	<i>trandolapril-verapamil hcl</i>		TRIBENZOR	
TOLSURA	7	<i>tab er 2-180 mg</i>	22	<i>see olmesartan-</i>	
<i>tolterodine tartrate</i>	70, 71	<i>trandolapril-verapamil hcl</i>		<i>amlodipine-</i>	
<i>tolvaptan</i>	64	<i>tab er 2-240 mg</i>	22	<i>hydrochlorothiazide tab</i>	
<i>tolvaptan tab therapy pack</i>		<i>trandolapril-verapamil hcl</i>		20-5-12.5 mg	24
30 & 15 mg	64	<i>tab er 4-240 mg</i>	22	<i>see olmesartan-</i>	
<i>tolvaptan tab therapy pack</i>		<i>tranexamic acid</i>	73	<i>amlodipine-</i>	
45 & 15 mg	64	TRANSDERM SCOP		<i>hydrochlorothiazide tab</i>	
<i>tolvaptan tab therapy pack</i>		<i>see scopolamine</i>	66	40-10-12.5 mg	24
60 & 30 mg	64	<i>tranylcypromine sulfate</i> ...	35	<i>see olmesartan-</i>	
<i>tolvaptan tab therapy pack</i>		TRAVASOL INJ 10%	80	<i>amlodipine-</i>	
90 & 30 mg	64	TRAVATAN Z		<i>hydrochlorothiazide tab</i>	
TONMYA.....	49	<i>see travoprost</i>	82	40-10-25 mg	25
TOPAMAX		<i>travoprost</i>	82		

see <i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i> .....24	TRIUMEQ TAB .....8	TYVASO DPI
see <i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i> .....24	<i>tri-vylibra</i> .....60	INSTITUTIONAL .....31
TRICOR	<i>tri-vylibra lo</i>.....60	TYVASO DPI
see <i>fenofibrate</i>.....26	TRODELVY.....21	MAINTENANCE KI.....32
<i>tridacaine ii</i>.....91	TROGARZO.....8	TYVASO DPI POW 16-32-48 .....32
<i>triderm</i>.....91	TROPHAMINE INJ 10% .80	TYVASO DPI POW MAIN
<i>trientine hcl</i>.....57	<i>trosapium chloride</i>.....71	KIT 32-64MCG .....32
TRIESENCE .....81	TRULANCE.....69	TYVASO DPI POW MAIN
<i>tri-estarylla</i> .....60	TRULICITY .....55	KIT 48-64MCG .....32
<i>trifluoperazine hcl</i>.....39	TRUMENBA.....78	TYZAVAN .....6
<i>trifluridine</i> .....81	TRUQAP .....21	TZIELD.....55
<i>trihexyphenidyl hcl</i> .....36	TRUVADA	U
TRIJARDY XR TAB ER	see <i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>.....8	UBRELVY .....48
24HR 10-5-1000MG....55	see <i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>.....8	UCERIS
TRIJARDY XR TAB ER	see <i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>.....8	see <i>budesonide</i> .....67
24HR 12.5-2.5-1000MG .....55	see <i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>.....8	see <i>budesonide (intrarectal)</i>.....67
TRIJARDY XR TAB ER	TRUXIMA.....21	ULORIC
24HR 25-5-1000MG....55	TRYNGOLZA.....31	see <i>febuxostat</i>.....1
TRIJARDY XR TAB ER	TRYVIO.....31	ULTOMIRIS .....73
24HR 5-2.5-1000MG...55	TUKYSA.....21	UNASYN
TRIKAFTA PAK 59.5MG.86	TURALIO .....21	see <i>ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm</i>.....11
TRIKAFTA PAK 75MG...86	<i>turqoz</i> .....60	see <i>ampicillin & sulbactam sodium for inj 3 (2-1) gm</i>.....11
TRIKAFTA TAB 100-50-75MG & 150MG .....86	<i>twice-daily clindamycin phosphate (topical)</i>.....88	UNASYN BULK PACK
TRIKAFTA TAB 50-25-37.5MG & 75MG .....86	TWINRIX INJ .....78	see <i>ampicillin & sulbactam sodium for iv soln 15 (10-5) gm</i> .11
<i>tri-legest fe</i> .....60	TWYNEO CRE 0.1-3% ...88	<i>unithroid</i> .....65
TRILEPTAL	TYBOST.....8	UPLIZNA.....49
see <i>oxcarbazepine</i> .....42	<i>tydemy</i> .....60	UPTRAVI .....32
<i>tri-linyah</i> .....60	TYENNE .....75	UPTRAVI PACK TAB
<i>tri-lo-estarylla</i> .....60	TYGACIL	200/800 .....32
<i>tri-lo-marzia</i> .....60	see <i>tigecycline</i>.....12	UROCIT-K 10
<i>tri-lo-mili</i> .....60	TYKERB	see <i>potassium citrate (alkalinizer)</i> .....70
<i>tri-lo-sprintec</i> .....60	see <i>lapatinib ditosylate</i> 18	UROCIT-K 15
<i>trimethobenzamide hcl</i>....66	TYMLOS .....57	see <i>potassium citrate (alkalinizer)</i> .....70
<i>trimethoprim</i> .....6	TYPHIM VI .....78	UROXATRAL
<i>tri-mili</i> .....60	TYVASO .....31	see <i>alfuzosin hcl</i>.....70
<i>trimipramine maleate</i> .....35		<i>ursodiol</i> .....69
TRINTELLIX.....35		URSO FORTE
<i>tri-sprintec</i> .....60		see <i>ursodiol</i> .....69
TRIUMEQ PD TAB .....8		

USTEKINUMAB	75	VANCOMYC/D5W INJ		VENTOLIN HFA	
UZEDY	39	1.25/250	6	(INSTITUTIONAL PACK)	
V		VANCOMYC/D5W INJ		.....	85
VABOMERE INJ 2GM(1-1)		1.5/300	6	<i>venxxiva</i>	70
.....	6	<i>vancomycin hcl</i>	6	VEOZAH	64
VABRINTY	14	VANCOMYCIN		<i>verapamil hcl</i>	29
VABYSMO	83	HYDROCHLORIDE	6	VERQUVO	31
VAGIFEM		see <i>vancomycin hcl</i>	6	VERSACLOZ	39
see <i>estradiol vaginal</i>	60	VANCOMYCIN INJ 1 GM	6	VERZENIO	21
see <i>yuvafem</i>	61	VANCOMYCIN INJ 500MG		VESICARE	
<i>valacyclovir hcl</i>	9	.....	6	see <i>solifenacin succinate</i>	
VALCHLOR	92	VANCOMYCIN INJ 750MG		.....	70
VALCYTE		.....	6	VESICARE LS	71
see <i>valganciclovir hcl</i>	9	VANDAZOLE	71	<i>vestura</i>	60
<i>valganciclovir hcl</i>	9	VANFLYTA	21	VFEND	
VALIUM		VANOS		see <i>voriconazole</i>	7
see <i>diazepam</i>	40	see <i>fluocinonide</i>	90	VFEND IV	
<i>valproate sodium</i>	43	VANRAFIA	70	see <i>voriconazole</i>	7
<i>valproic acid</i>	43	VAQTA	78	VIBATIV	6
<i>valrubicin</i>	15	<i>varenicline tartrate</i>	53	VIBERZI	69
<i>valsartan</i>	26	<i>varenicline tartrate tab 11 x</i>		VICTOZA	
<i>valsartan-</i>		<i>0.5 mg & 42 x 1 mg start</i>		see <i>liraglutide</i>	54
<i>hydrochlorothiazide tab</i>		<i>pack</i>	53	VIDAZA	
<i>160-12.5 mg</i>	25	VARIVAX	78	see <i>azacitidine</i>	13
<i>valsartan-</i>		VARUBI	66	<i>vienna</i>	60
<i>hydrochlorothiazide tab</i>		VASCEPA	27	<i>vigabatrin</i>	43
<i>160-25 mg</i>	25	VASERETIC		<i>vigadrone</i>	43
<i>valsartan-</i>		see <i>enalapril maleate &</i>		VIGAFYDE	43
<i>hydrochlorothiazide tab</i>		<i>hydrochlorothiazide tab</i>		VIGAMOX	
<i>320-12.5 mg</i>	25	<i>10-25 mg</i>	22	see <i>moxifloxacin hcl</i>	
<i>valsartan-</i>		VASOTEC		(<i>ophth</i>)	81
<i>hydrochlorothiazide tab</i>		see <i>enalapril maleate</i>	23	VIIBRYD	
<i>320-25 mg</i>	25	VAXCHORA SUS	78	see <i>vilazodone hcl</i>	35
<i>valsartan-</i>		VECTIBIX	21	VIJOICE	64
<i>hydrochlorothiazide tab</i>		VELCADE		VIJOICE TAB 250MG	64
<i>80-12.5 mg</i>	25	see <i>bortezomib</i>	16	<i>vilazodone hcl</i>	35
VALSTAR		VELETRI		VIMIZIM	64
see <i>valrubicin</i>	15	see <i>epoprostenol sodium</i>		VIMKUNYA	78
VALTOCO 10 MG DOSE	43	.....	31	VIMPAT	
VALTOCO 15 MG DOSE	43	<i>velivet</i>	60	see <i>lacosamide</i>	41
VALTOCO 20 MG DOSE	43	VELSIPITY	75	see <i>lacosamide oral</i>	41
VALTOCO 5 MG DOSE	43	VELTASSA	57	<i>vinblastine sulfate</i>	15
VALTRESX		VENCLEXTA	21	<i>vincristine sulfate</i>	15
see <i>valacyclovir hcl</i>	9	VENCLEXTA TAB START		<i>vinorelbine tartrate</i>	15
<i>valtya 1/35</i>	60	PK	21	VIOKACE TAB 10440	69
<i>valtya 1/50</i>	60	<i>venlafaxine hcl</i>	35	VIOKACE TAB 20880	69
VANCOCIN		VENTOLIN HFA	84	<i>viorele</i>	60
see <i>vancomycin hcl</i>	6			VIRACEPT	8

VIREAD.....8	see ezetimibe-	see rivaroxaban.....72
see tenofovir disoproxil	simvastatin tab 10-40	XARELTO STAR TAB
fumarate.....8	mg.....27	15/20MG.....72
VITRAKVI.....21	see ezetimibe-	XATMEP .....76
VIVELLE-DOT	simvastatin tab 10-80	XCOPRI .....43
see dotted.....60	mg.....27	XCOPRI PAK 100-150...43
see estradiol.....60	VYVANSE .....46	XCOPRI PAK 12.5-25....43
VIVIMUSTA.....13	VYVGART.....77	XCOPRI PAK 150-200MG
VIVITROL.....53	VYVGART INJ HYTRULO	(MAINTENANCE).....43
VIVJOA .....7	.....77	XCOPRI PAK 150-200MG
VIVOTIF CAP EC.....78	VYZULTA.....82	(TITRATION).....43
VIZIMPRO.....21	W	XCOPRI PAK 50-100MG 43
VONJO.....21	WAINUA.....50	XDEMVI .....81
VOQUEZNA.....69	WAKIX .....52	XELJANZ .....75
VOQUEZNA PAK DUAL	warfarin sodium.....72	XELJANZ XR .....75
PAK.....69	water for irrigation, sterile	xelria fe .....60
VOQUEZNA PAK TRIP PK	irrigation soln .....93	XELSTRYM.....46
.....69	WAYRILZ .....73	XEMBIFY .....76
VORANIGO.....21	WELCHOL	XENAZINE
voriconazole.....7	see colesevelam hcl...27	see tetrabenazine.....49
VOSEVI TAB.....9	WELIREG .....15	XENPOZYME .....64
VOTRIENT	WELLBUTRIN SR	XEOMIN.....52
see pazopanib hcl .....19	see bupropion hcl.....33	XERAVA .....12
VOWST CAP .....69	WELLBUTRIN XL	XERESE CRE 5-1% .....92
VOXZOGO.....64	see bupropion hcl.....33	XERMELO .....69
VOYDEYA.....73	wera .....60	XHANCE .....86
VOYDEYA TAB 50-100MG	WESTAB PLUS TAB 27-	XIFAXAN.....6, 69
.....73	1MG.....80	XIGDUO XR TAB 10-1000
VPRIV .....64	WINLEVI .....88	.....55
VRAYLAR .....39	WINREVAIR.....32	XIGDUO XR TAB 10-
VTAMA.....89	WINREVAIR INJ 45MG ..32	500MG.....55
VUMERITY .....51	WINREVAIR INJ 60MG ..32	XIGDUO XR TAB 2.5-1000
VYALEV INJ 12-240MG..36	wixela inhub .....87	.....55
vyfemla.....60	wymzya fe .....60	XIGDUO XR TAB 5-
VYKAT XR .....64	WYOST.....57	1000MG.....55
vylibra.....60	X	XIGDUO XR TAB 5-500MG
VYLOY .....21	XACDURO INJ 1-1GM.....6	.....55
VYNDAMAX.....31	XACIATO .....71	XIIDRA .....83
VYNDAQEL .....31	XADAGO.....36	XIPERE .....81
VYTORIN	XALATAN	XOFLUZA .....9
see ezetimibe-	see latanoprost.....82	XOLAIR.....86
simvastatin tab 10-10	XALKORI .....21	XOLREMDI .....72
mg.....27	XANAX	XOSPATA.....21
see ezetimibe-	see alprazolam .....32	XPOVIO PAK (100 MG
simvastatin tab 10-20	XANAX XR	ONCE WEEKLY).....21
mg.....27	see alprazolam .....32	XPOVIO PAK (40 MG
	xarah fe .....60	ONCE WEEKLY).....21
	XARELTO .....72	

XPOVIO PAK (40 MG TWICE WEEKLY).....21	YUTREPIA .....32	ZERBAXA INJ 1.5GM .....10
XPOVIO PAK (60 MG ONCE WEEKLY).....21	<i>yuvafem</i> .....61	ZERVIATE .....82
XPOVIO PAK (60 MG TWICE WEEKLY).....21	Z	ZESTORETIC
XPOVIO PAK (80 MG ONCE WEEKLY).....21	<i>zafemy</i> .....60	see <i>lisinopril</i> &
XPOVIO PAK (80 MG TWICE WEEKLY).....21	<i>zafirlukast</i>.....85	<i>hydrochlorothiazide tab</i>
XROMI .....73	<i>zaleplon</i>.....47	10-12.5 mg.....22
XTANDI.....14	ZALTRAP .....21	see <i>lisinopril</i> &
XTRENBO.....57	ZANAFLEX .....52	<i>hydrochlorothiazide tab</i>
<i>xulane</i> .....60	see <i>tizanidine hcl</i>.....52	20-12.5 mg.....22
XULTOPHY INJ 100/3.6 .56	ZARONTIN	see <i>lisinopril</i> &
XYLOCAINE	see <i>ethosuximide</i> .....40	<i>hydrochlorothiazide tab</i>
see <i>lidocaine hcl (local</i>	ZARXIO.....72	20-25 mg.....22
<i>anesth.</i>).....1	ZAVESCA	ZESTRIL
XYLOCAINE-MPF	see <i>miglustat</i> .....63	see <i>lisinopril</i>.....23
see <i>lidocaine hcl (local</i>	see <i>yargesa</i>.....64	ZETIA
<i>anesth.</i>).....1	ZEGALOGUE.....62	see <i>ezetimibe</i> .....27
XYOSTED.....53	ZEJULA.....21	ZEVTERA .....10
XYREM .....52	ZELAPAR.....36	ZIAGEN
XYWAV SOL 0.5GM/ML .52	ZELBORAF .....21	see <i>abacavir sulfat</i> e .....7
Y	ZELSUVMI .....92	<i>zidovudine</i>.....8
<i>yargesa</i> .....64	<i>zelvysia</i> .....64	ZIIHERA.....21
YASMIN 28	ZEMAIRA .....86	ZILBRYSQ .....77
see <i>drospirenone-ethinyl</i>	ZEMBRACE SYMTOUCH	ZILRETTA.....62
<i>estradiol tab 3-0.03 mg</i>	.....48	ZILXI .....92
.....58	ZEMDRI .....6	<i>ziprasidone hcl</i>.....39
see <i>syeda</i>.....60	ZEMPLAR	<i>ziprasidone mesylate</i> .....39
see <i>zumandimine</i> .....60	see <i>paricalcitol</i>.....65	ZIRABEV.....21
YAZ	<i>zenatane</i> .....88	ZIRGAN .....81
see <i>drospirenone-ethinyl</i>	ZENPEP CAP 10000UNT	ZITHROMAX
<i>estradiol tab 3-0.02 mg</i>	.....69	see <i>azithromycin</i> .....10
.....58	ZENPEP CAP 15000UNT	ZOCOR
see <i>jasmiel</i> .....58	.....69	see <i>simvastatin</i>.....26
see <i>loryna</i>.....59	ZENPEP CAP 20000UNT	ZOLADEX .....14
see <i>nikki</i> .....59	.....69	<i>zoledronic acid</i>.....57
see <i>vestura</i>.....60	ZENPEP CAP 25000UNT	ZOLEDRONIC ACID.....57
YCANTH .....92	.....69	ZOLINZA.....21
YERVOY .....21	ZENPEP CAP 3000UNIT69	<i>zolmitriptan</i>.....48
YESINTEK .....75	ZENPEP CAP 40000UNT	ZOLOFT
YF-VAX INJ.....78	.....69	see <i>sertraline hcl</i> .....35
YIMMUGO .....76	ZENPEP CAP 5000UNIT69	<i>zolpidem tartrate</i> .....47
YONSA .....14	ZENPEP CAP 60000UNT	ZOLPIDEM TARTRATE.47
YORVIPATH .....57	.....69	ZOMACTON .....64
YUTIQ.....81	<i>zenzedi</i>.....46, 47	<i>zomig</i> .....48
	ZEPOSIA .....51	ZOMIG
	ZEPOSIA 7DAY CAP STR	see <i>zolmitriptan</i> .....48
	PACK.....51	ZONEGRAN
	ZEPOSIA CAP STR KIT .51	see <i>zonisamide</i> .....43
	ZEPZELCA .....13	ZONISADE.....43

<i>zonisamide</i>.....43	ZTLIDO .....91	ZYLET SUS 0.5-0.3% .....80
ZORTRESS	ZUBSOLV SUB 0.7-0.18.53	ZYNLONTA.....22
see <i>everolimus</i>	ZUBSOLV SUB 1.4-0.36.53	ZYNYZ .....22
(<i>immunosuppressant</i>)	ZUBSOLV SUB 11.4-2.9.53	ZYPITAMAG .....26
.....77	ZUBSOLV SUB 2.9-0.71.53	ZYPREXA
ZORYVE .....89, 92	ZUBSOLV SUB 5.7-1.4...53	see <i>olanzapine</i> .....38
ZOSYN SOL 2-0.25GM ..12	ZUBSOLV SUB 8.6-2.1...53	ZYPREXA RELPREVV...39
ZOSYN SOL 3-0.375G ...12	<i>zumandimine</i>.....60	ZYTIGA
ZOSYN SOL 4-0.50GM ..12	ZUNVEYL .....33	see <i>abiraterone acetate</i>
<i>zovia 1/35</i>.....60	ZURNAL.....53	.....13
ZOVIRAX	ZURZUVAE.....35	see <i>abirtega</i>.....13
see <i>acyclovir topical</i> ....91	ZYDELIG.....22	ZYVOX
ZTALMY .....43	ZYKADIA.....22	see <i>linezolid</i>.....5