

Washington

Essential Rx Drug List

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



Welcome to Health Net

What is the Essential Rx Drug List?

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

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

How much will I pay for my drugs?

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

<i>Abbreviation</i>	<i>Copayment/Coinsurance</i>	<i>Description</i>
1	Tier 1 copayment or coinsurance	Generic drugs
2	Tier 2 copayment or coinsurance	Preferred brand drugs
3	Tier 3 copayment or coinsurance	Non-preferred brand drugs
SP	Specialty copayment or coinsurance	Specialty drugs. This category includes self-administered injectable and some oral high cost drugs. You may be required to get these drugs from a Specialty pharmacy.
AC	Anticancer drug copayment or coinsurance	Self-administered anticancer drugs. You may be required to get these drugs from a Specialty pharmacy.
PV	\$0	Preventive benefit drugs. These drugs must be covered at no cost to enrollees under the Affordable Care Act. A deductible does not apply.
GP	Generic Preferred	This includes most brand name drugs with a generic equivalent. Depending on your plan, these drugs are either not covered (non-formulary), covered at Tier 3 or covered at a copayment plus the difference in cost between the brand and generic drug. Refer to your Summary of Benefits or other plan documents.

How do I use the drug list?

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

What if my drug is not on the drug list?

If your drug is not on the drug list, call us at the telephone number on your Health Net ID card and ask if your drug is covered. If your drug is not covered, you can ask your doctor to prescribe a similar drug that is covered. Your doctor can ask us to make an exception if he or she feels you need the drug that is not covered. If we approve an exception request for a drug not on the drug list, the non-preferred brand tier (Tier 3) copayment will apply.

What are generic drugs?

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

Generic drugs are available on the drug list at Tier 1. Brand name drugs with a generic equivalent are either non-formulary or non-preferred, depending on your plan benefits. If your doctor determines that you need a brand name drug instead of its generic equivalent, your doctor can submit a prior authorization request for a formulary exception with documentation of medical necessity.

Are there any limits on my drug coverage?

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

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

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

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

- Your doctor can ask us to cover your drug even if it is not on the drug list.
- Your doctor can ask us to make an exception for limits on your drug. For example, if your drug has a quantity limit of 1 tablet per day, your doctor can ask us to cover more.

To request an exception, your doctor can fax a prior authorization form along with a written statement supporting the request to us at 1-800-255-9198.

Are injectable drugs covered?

Injectable drugs are not covered, except for those listed on the drug list. Some injectable drugs are considered “specialty drugs” and, in most cases, must be obtained from one of Health Net’s approved Specialty Pharmacies.

Are compounded prescriptions covered?

Compounded prescriptions require prior authorization for coverage. If prior authorization is granted, your Tier 3 copayment or coinsurance applies.

Can I go to any pharmacy?

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

If you fill your prescription at an out-of-network pharmacy, the pharmacy may not be able to bill Health Net online, so you may have to pay the full cost of your drug. If you do pay out-of-pocket for your drug, you may be able to send us your pharmacy receipt and ask for reimbursement of our share of the cost. Please refer to your plan documents for more information.

Some injectable and high cost drugs (including anticancer drugs) may be considered “specialty drugs”. These drugs must be obtained from one of Health Net’s approved Specialty pharmacies.

Can I use a mail order pharmacy?

You can use the CVS Caremark Mail Order Pharmacy for the home delivery of most maintenance drugs. Maintenance drugs are those needed for a long term condition.

To use the mail order pharmacy, your doctor must provide new prescriptions that allow up to a 90-day supply of each drug. Mail order forms are available on our website at www.healthnet.com or you may call us at the telephone number on your Health Net ID card to request a form.

How often can I refill my prescription?

- For prescriptions written for 10-days or less, you may refill after 50 percent of the supply has been used as directed.
- For prescriptions written for more than 10-days, you may refill after 74 percent of the supply has been used as directed.

If your physician has increased your dose, your pharmacy must be notified of the change. If this change will result in an early refill request, your pharmacy can contact Health Net for an override.

How can I save money on my prescription drugs?

You can save time and money with these simple steps:

- Ask your doctor about generic drugs that may work for you.
- Fill prescriptions at Health Net participating pharmacies.
- Be sure your doctor prescribes drugs on the drug list
- Fill your maintenance drugs through our mail order pharmacy program.

Nondiscrimination Notice

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

If you need these services, contact Health Net's Customer Contact Center at 1-888-802-7001 (TTY: 711).

If you believe that Health Net has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance by calling the number above and telling them you need help filing a grievance; Health Net's Customer Contact Center is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW, Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019 (TDD: 1-800-537-7697).

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

English

No Cost Language Services. You can get an interpreter. You can get documents read to you and some sent to you in your language. For help, call us at the number listed on your ID card. Employer group members please call 1-888-802-7001 (TTY: 711).

Amharic

ክፍያ የሌለው የቋንቋ አገልግሎት። አስተርጓሚ ማግኘት ይቻላል። ሰነዶች እንዲዘጋጅልዎ ማድረግ ይቻላል። እርዳታ ለማግኘት በመታወቂያ ላይ ያለውን ቁጥር ይደውሉ። አመልካቾች 1-888-802-7001 (TTY: 711) ይደውሉ።

Arabic

خدمات اللغة مجانية. يمكنك الحصول على مترجم فوري. ويمكنك الحصول على وثائق مقروءة لك. للحصول على المساعدة، اتصل بنا على الرقم الموجود على بطاقة الهوية. يرجى من أعضاء مجموعة أصحاب العمل الاتصال على الرقم 1-888-802-7001 (TTY: 711).

Chinese

免費語言服務。您可使用口譯員。您可請人將文件內容唸給您聽。如需協助，請致電您會員卡上所列的電話號碼與我們聯絡。雇主團體的會員請致電 1-888-802-7001 (TTY: 711)。

Cushite (Oromo)

Waa Lacag la'aan Adeegyada Luuqada. Waxaad heli kartaa turjubaan. Waxaad heli kartaa in waraaqaha lagu aqriyo. Wixii caawin ah, naga soo wac lambarka ku qoran kaarka Aqoonsigaaga. Xubnaha kooxda badrooniga fadlan soo wac 1-888-802-7001 (TTY: 711).

German

Kostenloser Sprachendienst. Dolmetscher sind verfügbar. Dokumente können Ihnen vorgelesen werden. Wenn Sie Hilfe benötigen, rufen Sie uns unter der Nummer auf Ihrer ID-Karte an. Arbeitgeber-Gruppenmitglieder rufen bitte unter 1-888-802-7001 (TTY: 711) an.

Japanese

無料の言語サービス。通訳をご利用いただけます。文書をお読みします。援助が必要な場合は、IDカードに記載されている番号までお電話ください。雇用主を通じた団体保険のメンバーの方は、1-888-802-7001 (TTY: 711) までお電話ください。

Korean

무료 언어 서비스. 통역 서비스를 받을 수 있습니다. 문서 낭독 서비스도 받으실 수 있습니다. 도움을 원하시면, 보험 ID에 수록된 번호로 전화해 주십시오. 고용주 그룹 가입자분은 1-888-802-7001 (TTY: 711) 번으로 전화해 주십시오.

Cambodian (Khmer)

សេវាភាសាដោយឥតគិតថ្លៃ។ អ្នកអាចទទួលបានអ្នកបកប្រែផ្ទាល់មាត់។ អ្នកអាចស្តាប់គេអានឯកសារឱ្យអ្នក។ សម្រាប់ជំនួយ សូមទាក់ទងយើងខ្ញុំតាមរយៈលេខទូរស័ព្ទដែលមាននៅលើកាតសម្គាល់ខ្លួនរបស់អ្នក។ សមាជិកក្រុមនិយោជក សូមទាក់ទងទៅលេខ 1-888-802-7001 (TTY: 711)។

Laotian

ລິການພາສາບໍ່ເສຍຄ່າ. ທ່ານສາມາດຂໍຜູ້ແປພາສາໄດ້. ທ່ານສາມາດຂໍໃຫ້ອ່ານເອກະສານໃຫ້ທ່ານຟັງໄດ້. ເພື່ອຂໍຄວາມຊ່ວຍເຫຼືອ, ກະລຸນາໂທຫາພວກເຮົາໄດ້ຕາມເບີທີ່ມີຢູ່ໃນບັດປະຈຳຕົວຂອງທ່ານ. ສະມາຊິກກຸ່ມນາຍຈ້າງ ກະລຸນາໂທຫາເບີ 1-888-802-7001 (TTY: 711).

Punjabi

ਬਿਨਾਂ ਲਾਗਤ ਵਾਲੀਆਂ ਭਾਸ਼ਾ ਸੇਵਾਵਾਂ। ਤੁਸੀਂ ਇੱਕ ਦੁਭਾਸ਼ੀਆਂ ਪ੍ਰਾਪਤ ਕਰ ਸਕਦੇ ਹੋ। ਤੁਹਾਡੇ ਲਈ ਦਸਤਾਵੇਜ਼ਾਂ ਪੜ੍ਹੇ ਜਾ ਸਕਦੇ ਹਨ। ਮਦਦ ਲਈ, ਤੁਹਾਡੇ ਆਈਡੀ (ID) ਕਾਰਡ 'ਤੇ ਦਿੱਤੇ ਨੰਬਰ ਤੇ ਸਾਨੂੰ ਫ਼ੋਨ ਕਰੋ। ਰੋਜ਼ਗਾਰਦਾਤਾ ਗਰੁੱਪ ਦੇ ਸਦੱਸ, ਕਿਰਪਾ ਕਰਕੇ 1-888-802-7001 (TTY: 711) 'ਤੇ ਫ਼ੋਨ ਕਰੋ।

Russian

Бесплатная помощь переводчиков. Вы можете получить помощь устного переводчика. Вам могут прочитать документы. За помощью обращайтесь к нам по телефону, приведенному на вашей идентификационной карточке участника плана. Если вы участник коллективного плана, предоставляемого работодателем, звоните по телефону 1-888-802-7001 (TTY: 711).

Spanish

Servicios de idiomas sin costo. Puede solicitar un intérprete. Puede obtener el servicio de lectura de documentos y recibir algunos en su idioma. Para obtener ayuda, llámenos al número que aparece en su tarjeta de identificación. Los afiliados del grupo del empleador deben llamar al 1-888-802-7001 (TTY: 711).

Tagalog

Walang Gastos na Mga Serbisyo sa Wika. Maaari kayong kumuha ng isang interpreter. Maaari ninyong ipabasa ang mga dokumento. Para sa tulong, tawagan kami sa numerong nakalista sa inyong ID card. Para sa mga miyembro ng grupo ng employer, mangyaring tumawag sa 1-888-802-7001 (TTY: 711).

Ukrainian

Безплатні послуги перекладу. Ви можете скористуватися послугами перекладача. Вам можуть прочитати ваші документи. Щоб отримати допомогу, телефонуйте нам за номером, який вказаний на вашій ідентифікаційній картці (ID). Учасників групового страхового плану від працедавця просимо телефонувати за номером 1-888-802-7001 (TTY: 711).

Vietnamese

Các Dịch Vụ Ngôn Ngữ Miễn Phí. Quý vị có thể có một phiên dịch viên. Quý vị có thể yêu cầu được đọc cho nghe tài liệu. Để nhận trợ giúp, hãy gọi cho chúng tôi theo số được liệt kê trên thẻ ID của quý vị. Các thành viên thuộc chương trình theo nhóm của chủ sử dụng lao động vui lòng gọi số 1-888-802-7001 (TTY: 711).

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OR WA Commercial Notice of Language Assistance

FLY029225ER00 (1/20)

Drug Name	Drug Tier	Requirements/ Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders		
Amphetamines		
(Dextroamphetamine Sulfate) PROCENTRA SOLN	1	
(Dextroamphetamine Sulfate) ZENZEDI TABS 2.5 MG, 7.5 MG	1	1 bal on hand,
(Dextroamphetamine Sulfate) ZENZEDI TABS 5 MG, 10 MG, 7.5 MG	1	
ADDERALL TABS 2.5 MG-2.5 MG-2.5 MG-2.5 MG, 1.25 MG-1.25 MG-1.25 MG-1.25 MG, 3.75 MG-3.75 MG-3.75 MG-3.75 MG, 1.875 MG-1.875 MG-1.875 MG-1.875 MG, 3.125 MG-3.125 MG-3.125 MG-3.125 MG (<i>amphetamine-dextroamphetamine</i>)	GP	
ADDERALL TABS 5 MG-5 MG-5 MG-5 MG, 7.5 MG-7.5 MG-7.5 MG-7.5 MG (<i>amphetamine-dextroamphetamine</i>)	NF	
ADDERALL XR CP24 2.5 MG-2.5 MG-2.5 MG-2.5 MG, 1.25 MG-1.25 MG-1.25 MG-1.25 MG, 3.75 MG-3.75 MG-3.75 MG-3.75 MG (<i>amphetamine-dextroamphetamine</i>)	GP	QL(1 ea daily)
ADDERALL XR CP24 5 MG-5 MG-5 MG-5 MG, 7.5 MG-7.5 MG-7.5 MG-7.5 MG, 6.25 MG-6.25 MG-6.25 MG-6.25 MG (<i>amphetamine-dextroamphetamine</i>)	NF	QL(1 ea daily)
ADZENYS ER SUER (<i>amphetamine</i>)	NF	1 bal on hand,

Drug Name	Drug Tier	Requirements/ Limits
<i>amphetamine-dextroamphetamine cp24 5 mg-5 mg-5 mg-5 mg, 2.5 mg-2.5 mg-2.5 mg-2.5 mg, 7.5 mg-7.5 mg-7.5 mg-7.5 mg, 1.25 mg-1.25 mg-1.25 mg-1.25 mg, 3.75 mg-3.75 mg-3.75 mg-3.75 mg, 6.25 mg-6.25 mg-6.25 mg-6.25 mg</i>	1	QL(1 ea daily)
<i>amphetamine-dextroamphetamine tabs 5 mg-5 mg-5 mg-5 mg, 2.5 mg-2.5 mg-2.5 mg-2.5 mg, 7.5 mg-7.5 mg-7.5 mg-7.5 mg, 1.25 mg-1.25 mg-1.25 mg-1.25 mg, 3.75 mg-3.75 mg-3.75 mg-3.75 mg, 1.875 mg-1.875 mg-1.875 mg-1.875 mg, 3.125 mg-3.125 mg-3.125 mg-3.125 mg</i>	1	
DESOXYN TABS (<i>methamphetamine hcl</i>)	GP	PA
DEXEDRINE CP24 (<i>dextroamphetamine sulfate</i>)	GP	
<i>dextroamphetamine sulfate cp24</i>	1	
<i>dextroamphetamine sulfate soln</i>	1	
<i>dextroamphetamine sulfate tabs</i>	1	
<i>methamphetamine hcl tabs</i>	1	PA
VYVANSE CAPS (<i>lisdexamfetamine dimesylate</i>)	2	QL(1 ea daily)
VYVANSE CHEW (<i>lisdexamfetamine dimesylate</i>)	2	QL(1 ea daily)

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

Drug Name	Drug Tier	Requirements/ Limits
Analeptics		
<i>caffeine citrate soln</i>	1	
Attention-Deficit/Hyperactivity Disorder (ADHD)		
<i>atomoxetine hcl caps 10 mg, 18 mg, 25 mg, 40 mg, 80 mg, 100 mg</i>	1	QL(2 ea daily)
<i>atomoxetine hcl caps 60 mg, 80 mg, 100 mg</i>	1	QL(1 ea daily)
<i>clonidine hcl (adhd) tb12</i>	1	QL(4 ea daily)
<i>guanfacine hcl (adhd) tb24</i>	1	QL(1 ea daily)
INTUNIV TB24 <i>(guanfacine hcl (adhd))</i>	GP	QL(1 ea daily)
KAPVAY TB12 <i>(clonidine hcl (adhd))</i>	GP	QL(4 ea daily)
STRATTERA CAPS 10 MG, 25 MG, 40 MG <i>(atomoxetine hcl)</i>	NF	QL(2 ea daily)
STRATTERA CAPS 18 MG, 80 MG, 100 MG <i>(atomoxetine hcl)</i>	GP	QL(2 ea daily)
STRATTERA CAPS 60 MG, 80 MG, 100 MG <i>(atomoxetine hcl)</i>	GP	QL(1 ea daily)
Stimulants - Misc.		
(Methylphenidate Hcl) METADATE ER TBCR	1	QL(1 ea daily)
<i>armodafinil tabs</i>	1	PA
CONCERTA TBCR 18 MG, 27 MG <i>(methylphenidate hcl)</i>	GP	QL(1 ea daily)
CONCERTA TBCR 36 MG <i>(methylphenidate hcl)</i>	GP	QL(2 ea daily)
CONCERTA TBCR 54 MG <i>(methylphenidate hcl)</i>	NF	QL(1 ea daily)
DAYTRANA PTCH <i>(methylphenidate)</i>	3	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>dexmethylphenidate hcl cp24 25 mg, 30 mg, 35 mg, 40 mg</i>	1	
<i>dexmethylphenidate hcl cp24 5 mg, 10 mg, 15 mg, 20 mg, 30 mg, 35 mg, 40 mg</i>	1	QL(1 ea daily)
<i>dexmethylphenidate hcl tabs 5 mg, 10 mg, 2.5 mg</i>	1	QL(2 ea daily)
FOCALIN TABS <i>(dexmethylphenidate hcl)</i>	GP	QL(2 ea daily)
FOCALIN XR CP24 15 MG <i>(dexmethylphenidate hcl)</i>	NF	QL(1 ea daily)
FOCALIN XR CP24 25 MG <i>(dexmethylphenidate hcl)</i>	NF	
FOCALIN XR CP24 35 MG, 40 MG <i>(dexmethylphenidate hcl)</i>	GP	
FOCALIN XR CP24 5 MG, 10 MG, 20 MG, 30 MG, 40 MG <i>(dexmethylphenidate hcl)</i>	GP	QL(1 ea daily)
METHYLIN SOLN <i>(methylphenidate hcl)</i>	GP	
<i>methylphenidate hcl chew 5 mg, 10 mg, 2.5 mg</i>	1	
<i>methylphenidate hcl cp24 10 mg, 20 mg, 30 mg, 40 mg</i>	1	QL(1 ea daily)
<i>methylphenidate hcl cpcr 10 mg, 30 mg, 40 mg, 50 mg, 60 mg</i>	1	
<i>methylphenidate hcl cpcr 20 mg, 30 mg, 40 mg, 50 mg, 60 mg</i>	1	QL(2 ea daily)

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

Drug Name	Drug Tier	Requirements/ Limits
<i>methylphenidate hcl soln 5 mg/5ml, 10 mg/5ml</i>	1	
<i>methylphenidate hcl tabs 5 mg, 10 mg, 20 mg</i>	1	
<i>methylphenidate hcl tb24 18 mg, 54 mg</i>	1	QL(1 ea daily)1 bal on hand,
<i>methylphenidate hcl tb24 27 mg, 54 mg</i>	1	QL(1 ea daily)
<i>methylphenidate hcl tb24 36 mg, 54 mg</i>	1	QL(2 ea daily)
<i>methylphenidate hcl tbc 10 mg, 18 mg, 20 mg, 27 mg, 54 mg</i>	1	QL(1 ea daily)
<i>methylphenidate hcl tbc 36 mg, 54 mg</i>	1	QL(2 ea daily)
METHYLPHENIDATE HYDROCHLORIDE ER TBC 72 MG (<i>methylphenidate hcl</i>)	3	QL(1 ea daily)
<i>modafinil tabs</i>	1	ST; QL(1 ea daily)
NUVIGIL TABS (<i>armodafinil</i>)	GP	PA
PROVIGIL TABS (<i>modafinil</i>)	GP	ST; QL(1 ea daily)
QUILLIVANT XR SRER (<i>methylphenidate hcl</i>)	3	PA; QL(12 ml daily)
RELEXXII TBC (<i>methylphenidate hcl</i>)	3	QL(1 ea daily)
RITALIN LA CP24 (<i>methylphenidate hcl</i>)	GP	QL(1 ea daily)
RITALIN TABS (<i>methylphenidate hcl</i>)	GP	
ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
Allergenic Extracts		
GRASSTEK SUBL (<i>timothy grass pollen allergen extract</i>)	3	PA

Drug Name	Drug Tier	Requirements/ Limits
ODACTRA SUBL (<i>dust mite mixed allergen extract</i>)	3	PA
ORALAIR ADULT SAMPLE KIT SUBL (<i>grass mixed pollens allergen extract</i>)	3	PA
ORALAIR ADULT STARTER PACK SUBL (<i>grass mixed pollens allergen extract</i>)	3	PA
ORALAIR SUBL (<i>grass mixed pollens allergen extract</i>)	3	PA
RAGWITEK SUBL (<i>short ragweed pollen allergen extract</i>)	3	PA
Biologicals Misc		
ADAGEN SOLN (<i>pegademase bovine</i>)	SP	PA
AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections		
Aminoglycosides		
(Tobramycin) TOBRAMYCIN INHALATION SOLUTION PAK NEBU	SP	
<i>amikacin sulfate soln</i>	SP	PA
ARIKAYCE SUSP (<i>amikacin sulfate liposome</i>)	SP	PA
BETHKIS NEBU (<i>tobramycin</i>)	SP	PA
<i>gentamicin in saline soln 0.9 %-0.8 mg/ml, 0.9 %-1.6 mg/ml, 0.9 %-1 mg/ml</i>	SP	PA; 1 bal on hand,
<i>gentamicin in saline soln 0.9 %-1.2 mg/ml, 0.9 %-1.6 mg/ml, 0.9 %-1 mg/ml</i>	SP	PA

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

Drug Name	Drug Tier	Requirements/ Limits
gentamicin sulfate soln	SP	PA
KITABIS PAK NEBU (tobramycin)	SP	1 bal on hand,
neomycin sulfate tabs	1	
paromomycin sulfate caps	1	1 bal on hand,
paromomycin sulfate caps	1	
streptomycin sulfate solr	SP	PA; 1 bal on hand,
TOBI NEBU (tobramycin)	SP	
TOBI PODHALER CAPS (tobramycin)	SP	PA
tobramycin nebu	SP	
tobramycin nebu	SP	1 bal on hand,
tobramycin sulfate soln 10 mg/ml	SP	PA; 1 bal on hand,
tobramycin sulfate soln 80 mg/2ml	SP	PA
ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions		
Anti-TNF-alpha - Monoclonal Antibodies		
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT (adalimumab)	SP	PA
HUMIRA PEN PNKT (adalimumab)	SP	PA
HUMIRA PEN-CD/UC/HS STARTER PNKT (adalimumab)	SP	PA
HUMIRA PEN-PS/UV STARTER PNKT (adalimumab)	SP	PA
HUMIRA PSKT (adalimumab)	SP	PA
SIMPONI ARIA SOLN (golimumab)	SP	PA

Drug Name	Drug Tier	Requirements/ Limits
SIMPONI SOAJ (golimumab)	SP	PA
SIMPONI SOSY (golimumab)	SP	PA
Antirheumatic - Enzyme Inhibitors		
RINVOQ TB24 (upadacitinib)	SP	PA
XELJANZ TABS (tofacitinib citrate)	SP	PA
XELJANZ XR TB24 11 MG (tofacitinib citrate)	SP	PA
Antirheumatic Antimetabolites		
METHOTREXATE TABS (methotrexate sodium antirheumatic)	2	
OTREXUP SOAJ (methotrexate antirheumatic)	SP	PA
RASUVO SOAJ (methotrexate antirheumatic)	SP	PA
Gold Compounds		
RIDAURA CAPS (auranofin)	2	
Interleukin-1 Blockers		
ARCALYST SOLR (rilonacept)	SP	PA
Interleukin-1 Receptor Antagonist (IL-1Ra)		
KINERET SOSY (anakinra)	SP	PA
Interleukin-6 Receptor Inhibitors		
ACTEMRA SOLN (tocilizumab)	SP	PA
ACTEMRA SOSY (tocilizumab)	SP	PA
KEVZARA SOAJ 150 MG/1.14ML, 200 MG/1.14ML (sarilumab)	SP	PA; SP
KEVZARA SOSY 150 MG/1.14ML, 200 MG/1.14ML (sarilumab)	SP	PA

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

Drug Name	Drug Tier	Requirements/ Limits
Nonsteroidal Anti-inflammatory Agents (NSAIDs)		
(Fenoprofen Calcium) PROFENO TABS	1	
(Ibuprofen) CHILDRENS IBUPROFEN, TGT IBUPROFEN CHILDRENS, TGT CHILDRENS IBUPROFEN, SM CHILDRENS IBUPROFEN, SB CHILDRENS IBUPROFEN, RA IBUPROFEN CHILDRENS, RA IBUPROFEN, QC CHILDRENS IBUPROFEN, PX CHILDRENS PROFEN IB, IBUPROFEN CHILDRENS, HYVEE IBUPROFEN CHILDRENS, HM IBUPROFEN CHILDRENS, GOODSENSE IBUPROFEN CHILDRENS, GNP CHILDRENS IBUPROFEN, EQL CHILDRENS IBUPROFEN, EQ IBUPROFEN CHILDRENS, CVS IBUPROFEN CHILDRENS, CVS CHILDRENS IBUPROFEN, CHILDRENS MEDI-PROFEN, CHILDRENS IBUPROFEN 100 SUSP	1	RX/OTC
(Ibuprofen) IBU TABS	1	
(Naproxen) NAPROXEN DR TBEC	1	
ANAPROX DS TABS (<i>naproxen sodium</i>)	GP	
ARTHROTEC 50 TBEC (<i>diclofenac w/ misoprostol</i>)	GP	
ARTHROTEC 75 TBEC (<i>diclofenac w/ misoprostol</i>)	GP	
CELEBREX CAPS 400 MG (<i>celecoxib</i>)	GP	ST; QL(2 ea daily); AL(At least 60 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
CELEBREX CAPS 50 MG, 100 MG, 200 MG (<i>celecoxib</i>)	GP	ST; QL(2 ea daily)
<i>celecoxib caps 400 mg</i>	1	ST; QL(2 ea daily); AL(At least 60 yrs old)
<i>celecoxib caps 50 mg, 100 mg, 200 mg</i>	1	ST; QL(2 ea daily)
CHILDRENS ADVIL SUSP (<i>ibuprofen</i>)	GP	RX/OTC
CHILDRENS MOTRIN SUSP (<i>ibuprofen</i>)	GP	RX/OTC
DAYPRO TABS (<i>oxaprozin</i>)	GP	
<i>diclofenac potassium tabs</i>	1	
<i>diclofenac sodium tb24 or 100 mg</i>	1	
<i>diclofenac sodium tbec or 25 mg, 50 mg, 75 mg</i>	1	
<i>diclofenac w/ misoprostol tbec</i>	1	
DUEXIS TABS (<i>ibuprofen-famotidine</i>)	3	PA
EC-NAPROSYN TBEC (<i>naproxen</i>)	GP	
EC-NAPROXEN TBEC (<i>naproxen</i>)	GP	
<i>etodolac caps 200 mg, 300 mg</i>	1	
<i>etodolac tabs 400 mg, 500 mg</i>	1	
<i>etodolac tb24 400 mg, 500 mg, 600 mg</i>	1	QL(2 ea daily)
FELDENE CAPS (<i>piroxicam</i>)	GP	
FENOPROFEN CALCIUM CAPS 200 MG (<i>fenoprofen calcium</i>)	3	

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

Drug Name	Drug Tier	Requirements/ Limits
<i>fenoprofen calcium caps 200 mg, 400 mg</i>	1	1 bal on hand,
<i>fenoprofen calcium tabs 600 mg</i>	1	
FENORTHO CAPS (<i>fenoprofen calcium</i>)	3	
<i>flurbiprofen tabs</i>	1	
<i>ibuprofen susp 100 mg/5ml</i>	1	RX/OTC
<i>ibuprofen tabs 400 mg, 600 mg, 800 mg</i>	1	
INDOCIN SUPP RE 50 MG (<i>indomethacin</i>)	3	
INDOCIN SUSP OR 25 MG/5ML (<i>indomethacin</i>)	2	
<i>indomethacin caps 20 mg, 50 mg</i>	1	ST; QL(3 ea daily)1 bal on hand,
<i>indomethacin caps 25 mg, 50 mg</i>	1	
<i>indomethacin cpcr 75 mg</i>	1	
<i>ketoprofen caps</i>	1	1 bal on hand,
<i>ketoprofen cp24</i>	1	1 bal on hand,
KETOROLAC TROMETHAMINE SOLN NA 15.75 MG/SPRAY (<i>ketorolac tromethamine</i>)	3	QL(1 ea daily,5 day(s) limit)
<i>ketorolac tromethamine tabs or 10 mg</i>	1	QL(0.67 ea daily)
LODINE TABS (<i>etodolac</i>)	GP	
<i>meclofenamate sodium caps</i>	1	1 bal on hand,
<i>mefenamic acid caps</i>	1	
<i>meloxicam tabs 15 mg</i>	1	QL(1 ea daily)
<i>meloxicam tabs 7.5 mg</i>	1	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/ Limits
MOBIC TABS 15 MG (<i>meloxicam</i>)	GP	QL(1 ea daily)
MOBIC TABS 7.5 MG (<i>meloxicam</i>)	GP	QL(2 ea daily)
<i>nabumetone tabs 500 mg</i>	1	QL(4 ea daily)
<i>nabumetone tabs 750 mg</i>	1	QL(3 ea daily)
NALFON CAPS 400 MG (<i>fenoprofen calcium</i>)	3	
NALFON TABS 600 MG (<i>fenoprofen calcium</i>)	GP	
NAPRELAN TB24 375 MG, 500 MG (<i>naproxen sodium</i>)	GP	
NAPRELAN TB24 750 MG (<i>naproxen sodium</i>)	3	
NAPROSYN SUSP (<i>naproxen</i>)	GP	
NAPROSYN TABS (<i>naproxen</i>)	GP	
<i>naproxen sodium tabs</i>	1	
<i>naproxen sodium tb24</i>	1	
<i>naproxen susp</i>	1	
<i>naproxen tabs</i>	1	
<i>naproxen-esomeprazole magnesium tbec</i>	1	PA
<i>oxaprozin tabs</i>	1	
<i>piroxicam caps</i>	1	
SPRIX SOLN (<i>ketorolac tromethamine</i>)	3	QL(1 ea daily,5 day(s) limit)
<i>sulindac tabs</i>	1	
TIVORBEX CAPS 20 MG, 40 MG (<i>indomethacin</i>)	3	ST; QL(3 ea daily)

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

Drug Name	Drug Tier	Requirements/ Limits
TIVORBEX CAPS 20 MG, 40 MG (<i>indomethacin</i>)	3	ST; QL(3 ea daily)1 bal on hand,
<i>tolmetin sodium caps</i>	1	1 bal on hand,
<i>tolmetin sodium tabs</i>	1	1 bal on hand,
VIMOVO TBEC (<i>naproxen-esomeprazole magnesium</i>)	GP	PA
ZIPSOR CAPS (<i>diclofenac potassium</i>)	3	ST
ZORVOLEX CAPS (<i>diclofenac</i>)	3	ST; QL(3 ea daily)
Phosphodiesterase 4 (PDE4) Inhibitors		
OTEZLA TABS (<i>apremilast</i>)	SP	PA
OTEZLA TBPB (<i>apremilast</i>)	SP	PA
Pyrimidine Synthesis Inhibitors		
ARAVA TABS 10 MG (<i>leflunomide</i>)	GP	QL(2 ea daily)
ARAVA TABS 20 MG (<i>leflunomide</i>)	GP	QL(1 ea daily)
<i>leflunomide tabs 10 mg</i>	1	QL(2 ea daily)
<i>leflunomide tabs 20 mg</i>	1	QL(1 ea daily)
Selective Costimulation Modulators		
ORENCIA CLICKJECT SOAJ (<i>abatacept</i>)	SP	PA
ORENCIA SOLR (<i>abatacept</i>)	SP	PA
ORENCIA SOSY (<i>abatacept</i>)	SP	PA
Soluble Tumor Necrosis Factor Receptor Agents		
ENBREL MINI SOCT (<i>etanercept</i>)	SP	PA
ENBREL SOLR (<i>etanercept</i>)	SP	PA
ENBREL SOSY (<i>etanercept</i>)	SP	PA

Drug Name	Drug Tier	Requirements/ Limits
ENBREL SURECLICK SOAJ (<i>etanercept</i>)	SP	PA
ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions		
Analgesic Combinations		
(Acetaminophen-Salicylamide-Phenyltoloxamine) DURAXIN CAPS	1	1 bal on hand,
(Butalbital-Acetaminophen) BUPAP, TENCON TABS	1	
(Butalbital-Acetaminophen) BUPAP, TENCON TABS	1	1 bal on hand,
(Butalbital-Acetaminophen-Caffeine) ESGIC, ZEBUTAL, PHRENILIN FORTE CAPS	1	
(Butalbital-Acetaminophen-Caffeine) VANATOL LQ, VTOL LQ, VANATOL S SOLN	1	
<i>butalbital-acetaminophen tabs 300 mg-50 mg, 325 mg-50 mg</i>	1	
<i>butalbital-acetaminophen-caffeine caps</i>	1	
<i>butalbital-acetaminophen-caffeine tabs</i>	1	
<i>butalbital-aspirin-caffeine caps</i>	1	
BUTALBITAL/ACETAMINOPHEN CAPS (<i>butalbital-acetaminophen</i>)	NF	
BUTALBITAL/ASPIRIN/CAFFEINE TABS (<i>butalbital-aspirin-caffeine</i>)	2	
ESGIC TABS (<i>butalbital-acetaminophen-caffeine</i>)	GP	

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

Drug Name	Drug Tier	Requirements/ Limits
FIORICET CAPS (<i>butalbital-acetaminophen-caffeine</i>)	GP	
FIORINAL CAPS (<i>butalbital-aspirin-caffeine</i>)	GP	
Salicylates		
(Aspirin) CVS ASPIRIN ADULT LOW DOSE, CHILDRENS ASPIRIN LOW STRENGTH, CHILDRENS ASPIRIN, BAYER CHEWABLE LOW DOSE, ASPIRIN LOW STRENGTH, ASPIRIN LOW DOSE, ASPIRIN CHILDRENS, ASPIRIN ADULT LOW STRENGTH, ASPIRIN ADULT LOW DOSE, ASPIRIN 81 LOW DOSE, RA ASPIRIN ADULT LOW DOSE, TGT CHILDRENS ASPIRIN, TGT ASPIRIN, ST JOSEPH LOW DOSE ASPIRIN, SM CHILDRENS ASPIRIN, SM ASPIRIN LOW DOSE, SM ASPIRIN ADULT LOW STRENGTH, SB CHILDRENS ASPIRIN, RA CHILDRENS ASPIRIN, RA ASPIRIN CHILDRENS, RA ASPIRIN ADULT LOW STRENGTH, QC CHILDRENS ASPIRIN, QC CHEWABLE ASPIRIN LOW DOSE, QC ASPIRIN LOW DOSE, PX ASPIRIN, HM ASPIRIN, GOODSENSE ASPIRIN ADULT LOW STRENGTH, GOODSENSE ASPIRIN, GNP ADULT ASPIRIN LOW STRENGTH, EQL ASPIRIN LOW DOSE, EQ CHILDRENS ASPIRIN, EQ ASPIRIN LOW DOSE CHEW	PV	

Drug Name	Drug Tier	Requirements/ Limits
(Aspirin) CVS ASPIRIN, BAYER ASPIRIN, BAYER ADVANCED ASPIRIN REGULAR STRENGTH, ASPIRIN ADULT, RA ASPIRIN, TGT ASPIRIN, SM ASPIRIN, SB ASPIRIN, RA PAIN RELIEF ASPIRIN, QC ASPIRIN, PX ASPIRIN, NORWICH ASPIRIN, MM ASPIRIN, MEDIQUE ASPIRIN, HM ASPIRIN, GOODSENSE ASPIRIN, GNP ASPIRIN, EQL ASPIRIN, EQ ASPIRIN TABS	PV	PV

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

Drug Name	Drug Tier	Requirements/ Limits
(Aspirin) CVS ASPIRIN, BAYER LOW DOSE, BAYER ASPIRIN REGIMEN, BAYER ASPIRIN EC LOW DOSE, BAYER ASPIRIN, ASPIRTAB, ASPIRIN REGIMEN LOW DOSE/ADULT, ASPIRIN LOW DOSE, ASPIRIN ENTERIC COATED ADULT LOW STRENGTH, ASPIRIN EC LOW DOSE, ASPIRIN ADULT LOW STRENGTH, ASPIRIN ADULT LOW DOSE, ASPIRIN 81, ASPIR-LOW, ADULT ASPIRIN REGIMEN, ADULT ASPIRIN EC LOW STRENGTH, TGT ENTERIC-COATED ASPIRIN, TGT ASPIRIN LOW DOSE, TGT ASPIRIN, ST JOSEPH ASPIRIN, SM ASPIRIN ENTERIC COATED, SM ASPIRIN EC LOW STRENGTH, SM ASPIRIN ADULT LOW STRENGTH, SB LOW DOSE ASA EC, SB ASPIRIN EC, SB ASPIRIN ADULT LOW STRENGTH, SB ASPIRIN, RA ASPIRIN EC ADULT LOW STRENGTH, RA ASPIRIN EC, QC ENTERIC ASPIRIN, QC ASPIRIN LOW DOSE, QC ASPIRIN, PX ENTERIC ASPIRIN, MINIPRIN LOW DOSE, MEIJER ASPIRIN EC, KP ASPIRIN, KLS ASPIRIN LOW DOSE, KLS ASPIRIN EC, HM ASPIRIN EC LOW DOSE, HM ASPIRIN EC, HM ASPIRIN, H-E-B ASPIRIN, GOODSENSE ASPIRIN LOW DOSE, GOODSENSE ASPIRIN, GNP ASPIRIN LOW	PV	PV

Drug Name	Drug Tier	Requirements/ Limits
DOSE, GNP ASPIRIN, EQL ASPIRIN LOW DOSE, EQL ASPIRIN EC, EQ ASPIRIN LOW DOSE, EQ ASPIRIN EC, EQ ASPIRIN ADULT LOW DOSE, EQ ASPIRIN, EQ ADULT ASPIRIN LOW STRENGTH, ECPIRIN, ECOTRIN LOW STRENGTH, ECOTRIN, EC-81 ASPIRIN, CVS ASPIRIN LOW STRENGTH, CVS ASPIRIN LOW DOSE, CVS ASPIRIN EC, CVS ASPIRIN ADULT LOW STRENGTH TBEC		
ASCRIPITIN TABS (<i>aspirin buffered (al hydrox-mg hydrox-ca carb)</i>)	PV	PV
<i>aspirin chew</i>	PV	PV
<i>aspirin tabs</i>	PV	PV
<i>aspirin tbec</i>	PV	PV
CHOLINE MAGNESIUM TRISALICYLATE LIQD (<i>choline & mag salicylate</i>)	2	
<i>diflunisal tabs</i>	1	
ECOTRIN REGULAR STRENGTH TBEC (<i>aspirin</i>)	GP	PV
<i>salsalate tabs</i>	1	
ST JOSEPH ADULT ANALGESICLOW DOSE BITE SIZE CHEW (<i>aspirin</i>)	GP	PV
ST JOSEPH ADULT CHEW (<i>aspirin</i>)	GP	PV
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions		

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

Drug Name	Drug Tier	Requirements/ Limits
Opioid Agonists		
(Methadone Hcl) METHADONE HCL INTENSOL, METHADOSE SUGAR-FREE, METHADOSE CONC	1	
(Methadone Hcl) METHADOSE TBSO	1	
(Morphine Sulfate) DURAMORPH SOLN	SP	PA
ABSTRAL SUBL (<i>fentanyl citrate</i>)	3	PA
ACTIQ LPOP (<i>fentanyl citrate</i>)	GP	PA
<i>codeine sulfate tabs</i>	1	
CONZIP CP24 (<i>tramadol hcl</i>)	3	1 bal on hand,
DILAUDID LIQD OR 1 MG/ML (<i>hydromorphone hcl</i>)	GP	
DILAUDID TABS OR 2 MG, 4 MG, 8 MG (<i>hydromorphone hcl</i>)	GP	
DOLOPHINE TABS (<i>methadone hcl</i>)	GP	QL(12 ea daily)
DURAGESIC PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 100 MCG/HR (<i>fentanyl</i>)	GP	Limit 15 patches per month;QL(0.5 ea daily)
DURAGESIC PT72 75 MCG/HR (<i>fentanyl</i>)	NF	Limit 15 patches per month;QL(0.5 ea daily)
EMBEDA CPR (<i>morphine-naltrexone</i>)	3	PA
EXALGO T24A (<i>hydromorphone hcl</i>)	GP	QL(4 ea daily)
<i>fentanyl citrate lpop bu 200 mcg, 400 mcg, 600 mcg, 800 mcg, 1200 mcg, 1600 mcg</i>	1	PA

Drug Name	Drug Tier	Requirements/ Limits
<i>fentanyl citrate tabs bu 100 mcg, 200 mcg, 400 mcg, 600 mcg, 800 mcg</i>	1	PA; QL(3 ea daily)1 bal on hand,
<i>fentanyl pt72 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr, 100 mcg/hr</i>	1	Limit 15 patches per month;QL(0.5 ea daily)
FENTORA TABS (<i>fentanyl citrate</i>)	3	PA; QL(3 ea daily)1 bal on hand,
<i>hydromorphone hcl liqd 1 mg/ml</i>	1	
<i>hydromorphone hcl t24a 8 mg, 12 mg, 16 mg</i>	1	QL(4 ea daily)
<i>hydromorphone hcl tabs 2 mg, 4 mg, 8 mg</i>	1	
KADIAN CP24 10 MG, 30 MG, 40 MG, 50 MG, 60 MG, 80 MG, 100 MG (<i>morphine sulfate</i>)	GP	QL(1 ea daily)
KADIAN CP24 20 MG, 30 MG, 40 MG, 50 MG, 60 MG, 80 MG, 100 MG (<i>morphine sulfate</i>)	GP	QL(2 ea daily)
KADIAN CP24 200 MG (<i>morphine sulfate</i>)	3	QL(2 ea daily)
LAZANDA SOLN 100 MCG/ACT, 400 MCG/ACT (<i>fentanyl citrate</i>)	3	PA
<i>meperidine hcl soln 50 mg/5ml</i>	1	1 bal on hand,
<i>meperidine hcl tabs 50 mg, 100 mg, 100 mg</i>	1	1 bal on hand,
<i>meperidine hcl tabs 50 mg, 100 mg, 100 mg</i>	1	
<i>methadone hcl conc or 10 mg/ml</i>	1	
<i>methadone hcl soln ij 10 mg/ml</i>	SP	PA

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

Drug Name	Drug Tier	Requirements/ Limits
METHADONE HCL SOLN IJ 10 MG/ML (<i>methadone hcl</i>)	SP	PA
<i>methadone hcl soln or 5 mg/5ml, 10 mg/5ml, 10 mg/5ml</i>	1	1 bal on hand,
<i>methadone hcl soln or 5 mg/5ml, 10 mg/5ml, 10 mg/5ml</i>	1	
<i>methadone hcl tabs or 5 mg, 10 mg</i>	1	QL(12 ea daily)
<i>methadone hcl tbso or 40 mg</i>	1	
<i>morphine sulfate beads cp24</i>	1	QL(1 ea daily)1 bal on hand,
<i>morphine sulfate cp24 or 10 mg, 30 mg, 40 mg, 50 mg, 60 mg, 80 mg, 100 mg</i>	1	QL(1 ea daily)
<i>morphine sulfate cp24 or 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 80 mg, 100 mg</i>	1	QL(2 ea daily)
<i>morphine sulfate soln ij 0.5 mg/ml, 1 mg/ml</i>	SP	PA
<i>morphine sulfate soln or 20 mg/ml, 10 mg/5ml, 20 mg/5ml, 100 mg/5ml</i>	1	
<i>morphine sulfate supp re 5 mg, 10 mg, 20 mg, 30 mg</i>	1	1 bal on hand,
<i>morphine sulfate tabs or 15 mg, 30 mg</i>	1	1 bal on hand,
<i>morphine sulfate tbc r or 15 mg, 30 mg, 60 mg, 100 mg, 200 mg</i>	1	QL(3 ea daily)
MS CONTIN TBCR (<i>morphine sulfate</i>)	GP	QL(3 ea daily)
NUCYNTA ER TB12 (<i>tapentadol hcl</i>)	2	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/ Limits
NUCYNTA TABS (<i>tapentadol hcl</i>)	2	
OPANA TABS (<i>oxymorphone hcl</i>)	GP	
OXAYDO TABA (<i>oxycodone hcl</i>)	3	QL(4 ea daily)
<i>oxycodone hcl caps 5 mg</i>	1	
<i>oxycodone hcl conc 100 mg/5ml</i>	1	
<i>oxycodone hcl soln 5 mg/5ml</i>	1	
<i>oxycodone hcl tabs 5 mg, 10 mg, 15 mg, 20 mg, 30 mg</i>	1	
<i>oxymorphone hcl tabs 5 mg, 10 mg</i>	1	
<i>oxymorphone hcl tb12 5 mg, 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 7.5 mg</i>	1	QL(2 ea daily)1 bal on hand,
ROXICODONE TABS (<i>oxycodone hcl</i>)	GP	
ROXYBOND TABA 5 MG (<i>oxycodone hcl</i>)	3	QL(4 ea daily)
SUBSYS LIQD (<i>fentanyl</i>)	3	PA
<i>tramadol hcl cp24 100 mg, 150 mg, 200 mg, 300 mg</i>	1	1 bal on hand,
<i>tramadol hcl tabs 100 mg</i>	1	1 bal on hand,
<i>tramadol hcl tabs 50 mg</i>	1	QL(8 ea daily)
<i>tramadol hcl tb24 100 mg, 200 mg, 300 mg</i>	1	
ULTRAM TABS (<i>tramadol hcl</i>)	GP	QL(8 ea daily)
Opioid Combinations		
(Butalbital-Aspirin-Caffeine W/Cod) ASCOMP/CODEINE CAPS	1	

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

Drug Name	Drug Tier	Requirements/ Limits
(Hydrocodone-Acetaminophen) LORCET, LORCET PLUS, LORCET HD TABS	1	
(Hydrocodone-Ibuprofen) IBUDONE TABS 200 MG-10 MG	1	1 bal on hand,
(Hydrocodone-Ibuprofen) IBUDONE TABS 200 MG-5 MG	1	
(Oxycodone W/ Acetaminophen) ENDOCET, NALOCET TABS	1	
<i>acetaminophen w/ codeine soln</i>	1	
<i>acetaminophen w/ codeine tabs</i>	1	
<i>butalbital-acetaminophen-caffeine w/ codeine caps</i>	1	
<i>butalbital-aspirin-caffeine w/cod caps</i>	1	
FIORICET/CODEINE CAPS (<i>butalbital-acetaminophen-caffeine w/ codeine</i>)	GP	
FIORINAL/CODEINE #3 CAPS (<i>butalbital-aspirin-caffeine w/cod</i>)	GP	
HYDROCODONE BITARTRATE/ACETAMINOPHEN SOLN (<i>hydrocodone-acetaminophen</i>)	2	
<i>hydrocodone-acetaminophen soln</i>	1	
<i>hydrocodone-acetaminophen tabs</i>	1	
<i>hydrocodone-ibuprofen tabs</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
LORTAB ELIX (<i>hydrocodone-acetaminophen</i>)	3	
NORCO TABS (<i>hydrocodone-acetaminophen</i>)	GP	
<i>oxycodone w/ acetaminophen soln 5 mg/5ml-325 mg/5ml</i>	1	1 bal on hand,
<i>oxycodone w/ acetaminophen tabs 5 mg-325 mg, 10 mg-325 mg, 2.5 mg-300 mg, 2.5 mg-325 mg, 7.5 mg-325 mg</i>	1	
<i>oxycodone-aspirin tabs</i>	1	
<i>oxycodone-aspirin tabs</i>	1	1 bal on hand,
<i>oxycodone-ibuprofen tabs</i>	1	QL(4 ea daily)1 bal on hand,
PERCOCET TABS 10 MG-325 MG (<i>oxycodone w/ acetaminophen</i>)	NF	
PERCOCET TABS 5 MG-325 MG, 2.5 MG-325 MG, 7.5 MG-325 MG (<i>oxycodone w/ acetaminophen</i>)	GP	
PRIMLEV TABS (<i>oxycodone w/ acetaminophen</i>)	3	
PROLATE TABS (<i>oxycodone w/ acetaminophen</i>)	3	
ROXICET SOLN (<i>oxycodone w/ acetaminophen</i>)	2	
<i>tramadol-acetaminophen tabs</i>	1	
TYLENOL/CODEINE #3 TABS (<i>acetaminophen w/ codeine</i>)	GP	

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

Drug Name	Drug Tier	Requirements/ Limits
TYLENOL/CODEINE #4 TABS (<i>acetaminophen w/ codeine</i>)	GP	
ULTRACET TABS (<i>tramadol-acetaminophen</i>)	GP	
Opioid Partial Agonists		
BELBUCA FILM (<i>buprenorphine hcl</i>)	3	QL(2 ea daily)
BUNAVAIL FILM (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	3	PA
BUPRENEX SOLN (<i>buprenorphine hcl</i>)	SP	PA
<i>buprenorphine hcl soln ij 0.3 mg/ml</i>	SP	PA
<i>buprenorphine hcl subl sl 2 mg</i>	1	PA; QL(3 ea daily)
<i>buprenorphine hcl subl sl 8 mg</i>	1	PA; QL(4 ea daily)
<i>buprenorphine hcl-naloxone hcl dihydrate film 4 mg-1 mg, 8 mg-2 mg, 12 mg-3 mg, 2 mg-0.5 mg</i>	1	PA
<i>buprenorphine hcl-naloxone hcl dihydrate subl 2 mg-0.5 mg</i>	1	PA; QL(3 ea daily)
<i>buprenorphine hcl-naloxone hcl dihydrate subl 8 mg-2 mg</i>	1	PA; QL(4 ea daily)
<i>buprenorphine ptwk td 5 mcg/hr, 10 mcg/hr, 15 mcg/hr, 20 mcg/hr, 7.5 mcg/hr</i>	1	Limit 4 per month;QL(0.15 ea daily)
<i>butorphanol tartrate soln</i>	1	Limit 7.5mls per month;QL(0.25 ml daily)
BUTRANS PTWK (<i>buprenorphine</i>)	GP	Limit 4 per month;QL(0.15 ea daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>pentazocine w/ naloxone tabs</i>	1	
SUBOXONE FILM (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	GP	PA
ZUBSOLV SUBL (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	3	PA
ANDROGENS-ANABOLIC - Drugs to Regulate Hormones		
Anabolic Steroids		
ANADROL-50 TABS (<i>oxymetholone</i>)	3	
<i>oxandrolone tabs</i>	1	
Androgens		
ANDRODERM PT24 (<i>testosterone</i>)	3	ST; QL(1 ea daily)
ANDROGEL GEL 20.25 MG/1.25GM (<i>testosterone</i>)	GP	QL(10 gm daily)
ANDROGEL GEL 40.5 MG/2.5GM (<i>testosterone</i>)	GP	
ANDROGEL GEL 50 MG/5GM, 25 MG/2.5GM (<i>testosterone</i>)	2	QL(10 gm daily)
ANDROGEL PUMP GEL (<i>testosterone</i>)	GP	QL(10 gm daily)
<i>danazol caps</i>	1	
DEPO-TESTOSTERONE SOLN (<i>testosterone cypionate</i>)	GP	
FORTESTA GEL (<i>testosterone</i>)	GP	QL(4 gm daily)
METHITEST TABS (<i>methyltestosterone</i>)	2	
<i>methyltestosterone caps</i>	1	1 bal on hand,
STRIANT MISC (<i>testosterone</i>)	3	QL(2 ea daily)

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

Drug Name	Drug Tier	Requirements/ Limits
TESTIM GEL (<i>testosterone</i>)	3	PA; QL(10 gm daily)
<i>testosterone cypionate soln im 100 mg/ml, 200 mg/ml</i>	1	
<i>testosterone enanthate soln im</i>	1	
<i>testosterone enanthate soln im</i>	1	1 bal on hand,
<i>testosterone gel td 1 %, 1.62 %, 50 mg/5gm, 25 mg/2.5gm, 20.25 mg/1.25gm</i>	1	QL(10 gm daily)
<i>testosterone gel td 1 %, 1.62 %, 50 mg/5gm, 25 mg/2.5gm, 20.25 mg/1.25gm</i>	1	QL(10 gm daily)1 bal on hand,
<i>testosterone gel td 10 mg/act, 50 mg/5gm, 25 mg/2.5gm, 20.25 mg/1.25gm</i>	1	QL(4 gm daily)
<i>testosterone gel td 40.5 mg/2.5gm, 20.25 mg/1.25gm</i>	1	
<i>testosterone soln td 30 mg/act</i>	1	QL(6 ml daily)
VOGELXO GEL (<i>testosterone</i>)	NF	QL(10 gm daily)1 bal on hand,
VOGELXO PUMP GEL (<i>testosterone</i>)	NF	QL(10 gm daily)1 bal on hand,
ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching		
Intrarectal Steroids		
(Hydrocortisone (Intrarectal)) COLOCORT ENEM	1	
CORTENEMA ENEM (<i>hydrocortisone (intrarectal)</i>)	GP	

Drug Name	Drug Tier	Requirements/ Limits
CORTIFOAM FOAM (<i>hydrocortisone acetate (intrarectal)</i>)	2	
<i>hydrocortisone (intrarectal) enem</i>	1	
UCERIS FOAM RE 2 MG/ACT (<i>budesonide (intrarectal)</i>)	3	PA
Rectal Combinations		
ANALPRAM HC CREA (<i>hydrocortisone acetate w/ pramoxine</i>)	NF	
ANALPRAM HC SINGLES CREA (<i>hydrocortisone acetate w/ pramoxine</i>)	NF	
ANALPRAM-HC CREA 1 %-1 % (<i>hydrocortisone acetate w/ pramoxine</i>)	GP	
ANALPRAM-HC LOTN 1 %-2.5 % (<i>hydrocortisone acetate w/ pramoxine</i>)	3	
<i>hydrocortisone acetate w/ pramoxine crea</i>	1	
<i>lidocaine-hydrocortisone acetate (rectal) kit</i>	1	
PROCORT CREA (<i>hydrocortisone acetate w/ pramoxine</i>)	3	
PROCTOFOAM HC FOAM (<i>hydrocortisone acetate w/ pramoxine</i>)	2	
Rectal Steroids		
(Hydrocortisone (Rectal)) PROCTO-MED HC, PROCTOZONE-HC, PROCTOSOL HC CREA	1	
(Hydrocortisone Acetate (Rectal)) ANUCORT-HC, HEMMOREX-HC SUPP	1	
(Hydrocortisone Acetate (Rectal)) ANUSOL-HC SUPP RE 25 MG	1	

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

Drug Name	Drug Tier	Requirements/ Limits
ANUSOL-HC CREA EX 2.5 % (<i>hydrocortisone (rectal)</i>)	GP	
<i>hydrocortisone (rectal) crea</i>	1	
<i>hydrocortisone acetate (rectal) supp</i>	1	
PROCTOCORT SUPP (<i>hydrocortisone acetate (rectal)</i>)	GP	
Vasodilating Agents		
RECTIV OINT (<i>nitroglycerin (intra-anal)</i>)	3	
ANTHELMINTICS - Drugs to Treat Worm Infections		
Anthelmintics		
<i>albendazole tabs</i>	1	
ALBENZA TABS (<i>albendazole</i>)	GP	
BENZNIDAZOLE TABS (<i>benznidazole</i>)	3	AL (At least 2 yrs old - Up to 12 yrs old)
BILTRICIDE TABS (<i>praziquantel</i>)	GP	
EMVERM CHEW (<i>mebendazole</i>)	3	QL(6 ea per fill retail, 6 ea per fill mail)
<i>ivermectin tabs</i>	1	
<i>praziquantel tabs</i>	1	
STROMECTOL TABS (<i>ivermectin</i>)	GP	
ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		
Anti-infective Agents - Misc.		
(Bacitracin) BACIIM SOLR	SP	PA
<i>bacitracin solr</i>	SP	PA

Drug Name	Drug Tier	Requirements/ Limits
FLAGYL CAPS (<i>metronidazole</i>)	GP	
FLAGYL TABS (<i>metronidazole</i>)	GP	
IMPAVIDO CAPS (<i>miltefosine</i>)	SP	
<i>metronidazole caps</i>	1	
<i>metronidazole in nacl soln</i>	SP	PA
<i>metronidazole tabs</i>	1	
NEBUPENT SOLR (<i>pentamidine isethionate</i>)	GP	
<i>pentamidine isethionate solr</i>	1	
PRIMSOL SOLN (<i>trimethoprim hcl</i>)	3	
TINDAMAX TABS (<i>tinidazole</i>)	GP	
<i>tinidazole tabs</i>	1	
<i>trimethoprim tabs</i>	1	
TRIMPEX SOLN (<i>trimethoprim hcl</i>)	3	
XIFAXAN TABS 200 MG (<i>rifaximin</i>)	3	PA; QL(9 ea per fill retail, 9 ea per fill mail)
XIFAXAN TABS 550 MG (<i>rifaximin</i>)	3	PA; QL(2 ea daily)
Anti-infective Misc. - Combinations		
(Sulfamethoxazole-Trimethoprim) SULFATRIM PEDIATRIC SUSP	1	
BACTRIM DS TABS (<i>sulfamethoxazole-trimethoprim</i>)	GP	
BACTRIM TABS (<i>sulfamethoxazole-trimethoprim</i>)	GP	
<i>sulfamethoxazole-trimethoprim susp</i>	1	

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

Drug Name	Drug Tier	Requirements/ Limits
<i>sulfamethoxazole-trimethoprim tabs</i>	1	
Antiprotozoal Agents		
ALINIA SUSR (<i>nitazoxanide</i>)	3	
ALINIA TABS (<i>nitazoxanide</i>)	3	
<i>atovaquone susp</i>	1	
MEPRON SUSP (<i>atovaquone</i>)	GP	
Carbapenems		
<i>doripenem solr</i>	SP	PA; 1 bal on hand,
<i>ertapenem sodium solr</i>	SP	PA
<i>imipenem-cilastatin solr 250 mg-250 mg, 500 mg-500 mg</i>	SP	PA; 1 bal on hand,
<i>imipenem-cilastatin solr 250 mg-250 mg, 500 mg-500 mg</i>	SP	PA
INVANZ SOLR (<i>ertapenem sodium</i>)	SP	PA
<i>meropenem solr</i>	SP	PA
MERREM SOLR (<i>meropenem</i>)	SP	PA
PRIMAXIN IV SOLR (<i>imipenem-cilastatin</i>)	SP	PA
Chloramphenicols		
<i>chloramphenicol sodium succinate solr</i>	SP	PA; 1 bal on hand,
Cyclic Lipopeptides		
CUBICIN RF SOLR (<i>daptomycin</i>)	SP	PA
CUBICIN SOLR (<i>daptomycin</i>)	SP	PA
<i>daptomycin solr</i>	SP	PA
Glycopeptides		

Drug Name	Drug Tier	Requirements/ Limits
FIRVANQ SOLR (<i>vancomycin hcl</i>)	3	PA
VANCOCIN CAPS (<i>vancomycin hcl</i>)	GP	PA
VANCOCIN HCL CAPS (<i>vancomycin hcl</i>)	GP	PA
<i>vancomycin hcl caps</i>	1	PA
Leprostatics		
<i>dapsone tabs</i>	1	
Lincosamides		
CLEOCIN CAPS OR 75 MG, 150 MG, 300 MG (<i>clindamycin hcl</i>)	GP	
CLEOCIN IN D5W SOLN (<i>clindamycin phosphate in d5w</i>)	SP	PA
CLEOCIN PEDIATRIC GRANULES SOLR (<i>clindamycin palmitate hydrochloride</i>)	GP	
CLEOCIN PHOSPHATE SOLN IJ 900 MG/6ML (<i>clindamycin phosphate</i>)	SP	PA
CLEOCIN PHOSPHATE SOLN IV 300 MG/50ML-5 %, 600 MG/50ML-5 % (<i>clindamycin phosphate in d5w</i>)	SP	PA
CLEOCIN PHOSPHATE SOLN IV 600 MG/4ML (<i>clindamycin phosphate</i>)	SP	PA
<i>clindamycin hcl caps</i>	1	
<i>clindamycin palmitate hydrochloride solr</i>	1	
<i>clindamycin phosphate in d5w soln</i>	SP	PA
<i>clindamycin phosphate soln</i>	SP	PA

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

Drug Name	Drug Tier	Requirements/ Limits
LINCOCIN SOLN (<i>lincomycin hcl</i>)	SP	PA
<i>lincomycin hcl soln</i>	SP	PA
Oxazolidinones		
<i>linezolid susr 100 mg/5ml</i>	1	
<i>linezolid tabs 600 mg</i>	1	QL(20 ea per 90 days retail, 20 ea per 90 days mail)
SIVEXTRO TABS (<i>tedizolid phosphate</i>)	2	QL(6 ea per 90 days retail)
ZYVOX SUSR 100 MG/5ML (<i>linezolid</i>)	GP	
ZYVOX TABS 600 MG (<i>linezolid</i>)	GP	QL(20 ea per 90 days retail, 20 ea per 90 days mail)
Polymyxins		
<i>polymyxin b sulfate solr</i>	SP	PA
ANTIANGINAL AGENTS - Drugs to Treat Chest Pain		
Antianginals-Other		
RANEXA TB12 1000 MG (<i>ranolazine</i>)	GP	
RANEXA TB12 500 MG (<i>ranolazine</i>)	GP	QL(4 ea daily)
<i>ranolazine tb12 1000 mg</i>	1	
<i>ranolazine tb12 500 mg</i>	1	QL(4 ea daily)
Nitrates		
(Nitroglycerin) MINITRAN PT24	1	QL(1 ea daily)
(Nitroglycerin) NITRO-TIME CPCR	1	1 bal on hand,
DILATRATE SR CPCR (<i>isosorbide dinitrate</i>)	3	
GONITRO PACK (<i>nitroglycerin</i>)	3	PA

Drug Name	Drug Tier	Requirements/ Limits
ISORDIL TITRADOSE TABS (<i>isosorbide dinitrate</i>)	GP	
<i>isosorbide dinitrate tabs 5 mg, 10 mg, 20 mg, 30 mg, 40 mg</i>	1	
<i>isosorbide dinitrate tbc 40 mg</i>	1	1 bal on hand,
<i>isosorbide mononitrate tabs</i>	1	
<i>isosorbide mononitrate tb24</i>	1	
NITRO-BID OINT (<i>nitroglycerin</i>)	2	
NITRO-DUR PT24 0.1 MG/HR, 0.2 MG/HR, 0.4 MG/HR, 0.6 MG/HR (<i>nitroglycerin</i>)	GP	QL(1 ea daily)
NITRO-DUR PT24 0.3 MG/HR, 0.8 MG/HR (<i>nitroglycerin</i>)	2	QL(1 ea daily)
<i>nitroglycerin cpcr or 9 mg, 2.5 mg</i>	1	
<i>nitroglycerin pt24 td 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr</i>	1	QL(1 ea daily)
<i>nitroglycerin soln tl 0.4 mg/spray</i>	1	
<i>nitroglycerin subl sl 0.3 mg, 0.4 mg, 0.6 mg</i>	1	
NITROLINGUAL PUMPSPRAY SOLN (<i>nitroglycerin</i>)	GP	
NITROMIST AERS (<i>nitroglycerin</i>)	3	
NITROSTAT SUBL (<i>nitroglycerin</i>)	GP	
ANTIANXIETY AGENTS - Drugs to Treat Anxiety		
Antianxiety Agents - Misc.		
<i>buspirone hcl tabs</i>	1	

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

Drug Name	Drug Tier	Requirements/ Limits
<i>hydroxyzine hcl soln im 25 mg/ml, 50 mg/ml</i>	SP	PA; 1 bal on hand,
<i>hydroxyzine hcl syrp or 10 mg/5ml</i>	1	
<i>hydroxyzine hcl tabs or 10 mg, 25 mg, 50 mg</i>	1	
<i>hydroxyzine pamoate caps 100 mg</i>	1	1 bal on hand,
<i>hydroxyzine pamoate caps 25 mg, 50 mg</i>	1	
<i>meprobamate tabs</i>	1	
VISTARIL CAPS (<i>hydroxyzine pamoate</i>)	GP	
Benzodiazepines		
(Alprazolam) ALPRAZOLAM XR TB24	1	
(Diazepam) DIAZEPAM INTENSOL CONC	1	
(Lorazepam) LORAZEPAM INTENSOL CONC	1	
ALPRAZOLAM INTENSOL CONC (<i>alprazolam</i>)	3	
<i>alprazolam tabs</i>	1	
<i>alprazolam tb24</i>	1	
<i>alprazolam tbdp</i>	1	
ATIVAN TABS 0.5 MG, 2 MG (<i>lorazepam</i>)	GP	
ATIVAN TABS 1 MG (<i>lorazepam</i>)	NF	
<i>chlordiazepoxide hcl caps</i>	1	
<i>clorazepate dipotassium tabs</i>	1	
<i>diazepam conc 5 mg/ml</i>	1	
<i>diazepam soln 5 mg/5ml</i>	1	1 bal on hand,

Drug Name	Drug Tier	Requirements/ Limits
<i>diazepam tabs 2 mg, 5 mg, 10 mg</i>	1	
<i>lorazepam conc</i>	1	
<i>lorazepam tabs</i>	1	
<i>oxazepam caps 10 mg, 15 mg, 15 mg, 30 mg</i>	1	
<i>oxazepam caps 10 mg, 15 mg, 15 mg, 30 mg</i>	1	1 bal on hand,
TRANXENE T TABS (<i>clorazepate dipotassium</i>)	GP	
VALIUM TABS 2 MG, 10 MG (<i>diazepam</i>)	GP	
VALIUM TABS 5 MG (<i>diazepam</i>)	NF	
XANAX TABS (<i>alprazolam</i>)	GP	
XANAX XR TB24 (<i>alprazolam</i>)	GP	
ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
Antiarrhythmics Type I-A		
<i>disopyramide phosphate caps</i>	1	
NORPACE CAPS (<i>disopyramide phosphate</i>)	GP	
NORPACE CR CP12 100 MG (<i>disopyramide phosphate</i>)	2	
NORPACE CR CP12 150 MG (<i>disopyramide phosphate</i>)	3	
<i>procainamide hcl soln</i>	SP	PA
<i>quinidine gluconate tbc</i>	1	
<i>quinidine sulfate tabs</i>	1	1 bal on hand,
Antiarrhythmics Type I-B		

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

Drug Name	Drug Tier	Requirements/ Limits
<i>mexiletine hcl caps 150 mg, 200 mg, 250 mg, 250 mg</i>	1	1 bal on hand,
<i>mexiletine hcl caps 200 mg, 250 mg, 250 mg</i>	1	
Antiarrhythmics Type I-C		
<i>flecainide acetate tabs</i>	1	
<i>propafenone hcl cp12 225 mg, 325 mg, 425 mg</i>	1	
<i>propafenone hcl tabs 150 mg, 300 mg</i>	1	QL(6 ea daily)
<i>propafenone hcl tabs 225 mg, 300 mg</i>	1	QL(3 ea daily)
RYTHMOL SR CP12 (<i>propafenone hcl</i>)	GP	
Antiarrhythmics Type III		
(Amiodarone Hcl) PACERONE TABS	1	
<i>amiodarone hcl tabs</i>	1	
CORDARONE TABS (<i>amiodarone hcl</i>)	GP	
<i>dofetilide caps</i>	1	
MULTAQ TABS (<i>dronedarone hcl</i>)	2	
TIKOSYN CAPS (<i>dofetilide</i>)	GP	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions		
Anti-Inflammatory Agents		
<i>cromolyn sodium nebu</i>	1	
CROMOLYN SODIUM NEBU (<i>cromolyn sodium</i>)	2	
Antiasthmatic - Monoclonal Antibodies		
XOLAIR SOLR (<i>omalizumab</i>)	SP	PA

Drug Name	Drug Tier	Requirements/ Limits
XOLAIR SOSY (<i>omalizumab</i>)	SP	PA
Bronchodilators - Anticholinergics		
ATROVENT HFA AERS (<i>ipratropium bromide hfa</i>)	2	Limit 2 inhalers per month;QL(0.86 gm daily)
INCRUSE ELLIPTA AEPB (<i>umeclidinium bromide</i>)	2	Limit 1 inhaler per month;QL(1 ea daily)
<i>ipratropium bromide soln</i>	1	
SEEBRI NEOHALER CAPS (<i>glycopyrrolate (inhalation)</i>)	3	ST; QL(2 ea daily)
SPIRIVA HANDIHALER CAPS (<i>tiotropium bromide monohydrate</i>)	2	QL(1 ea daily)
SPIRIVA RESPIMAT AERS (<i>tiotropium bromide monohydrate</i>)	2	Limit 1 inhaler per month;QL(0.14 gm daily)
TUDORZA PRESSAIR AEPB (<i>aclidinium bromide</i>)	3	ST; Limit 1 inhaler per month;QL(0.04 ea daily)
Leukotriene Modulators		
ACCOLATE TABS (<i>zafirlukast</i>)	GP	
<i>montelukast sodium chew</i>	1	QL(1 ea daily)
<i>montelukast sodium pack</i>	1	QL(1 ea daily)
<i>montelukast sodium tabs</i>	1	QL(1 ea daily)
SINGULAIR CHEW 4 MG, 5 MG (<i>montelukast sodium</i>)	GP	QL(1 ea daily)
SINGULAIR PACK 4 MG (<i>montelukast sodium</i>)	GP	QL(1 ea daily)
SINGULAIR TABS 10 MG (<i>montelukast sodium</i>)	NF	QL(1 ea daily)
<i>zafirlukast tabs</i>	1	

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

Drug Name	Drug Tier	Requirements/ Limits
<i>zileuton tb12</i>	1	ST
ZYFLO CR TB12 (<i>zileuton</i>)	NF	ST
ZYFLO TABS (<i>zileuton</i>)	3	ST
Selective Phosphodiesterase 4 (PDE4) Inhibitors		
DALIRESP TABS (<i>roflumilast</i>)	3	QL(1 ea daily)
Steroid Inhalants		
ALVESCO AERS (<i>ciclesonide</i>)	3	Limit 2 inhalers per month;QL(0.41 gm daily)
ARMONAIR RESPICLICK 113 AEPB (<i>fluticasone propionate (inhalation)</i>)	3	QL(0.04 ea daily)
ARMONAIR RESPICLICK 232 AEPB (<i>fluticasone propionate (inhalation)</i>)	3	QL(0.04 ea daily)
ARMONAIR RESPICLICK 55 AEPB (<i>fluticasone propionate (inhalation)</i>)	3	QL(0.04 ea daily)
ARNUITY ELLIPTA AEPB (<i>fluticasone furoate (inhalation)</i>)	2	QL(1 ea daily)
ASMANEX HFA AERO 100 MCG/ACT, 200 MCG/ACT (<i>mometasone furoate (inhalation)</i>)	2	Limit 1 inhaler per month;QL(0.44 gm daily)
ASMANEX HFA AERO 50 MCG/ACT, 200 MCG/ACT (<i>mometasone furoate (inhalation)</i>)	2	Limit 1 Inhaler per month;QL(0.44 gm daily)
ASMANEX TWISTHALER 120 METERED DOSES AEPB (<i>mometasone furoate (inhalation)</i>)	2	Limit 1 inhaler per month;QL(0.04 ea daily)
ASMANEX TWISTHALER 14 METERED DOSES AEPB (<i>mometasone furoate (inhalation)</i>)	2	Limit 1 inhaler per month;QL(0.04 ea daily)

Drug Name	Drug Tier	Requirements/ Limits
ASMANEX TWISTHALER 30 METERED DOSES AEPB (<i>mometasone furoate (inhalation)</i>)	2	Limit 1 inhaler per month;QL(0.04 ea daily)
ASMANEX TWISTHALER 60 METERED DOSES AEPB (<i>mometasone furoate (inhalation)</i>)	2	Limit 1 inhaler per month;QL(0.04 ea daily)
ASMANEX TWISTHALER 7 METERED DOSES AEPB (<i>mometasone furoate (inhalation)</i>)	2	Limit 1 inhaler per month;QL(0.04 ea daily)
<i>budesonide (inhalation) susp 0.25 mg/2ml</i>	1	QL(8 ml daily)
<i>budesonide (inhalation) susp 0.5 mg/2ml</i>	1	QL(4 ml daily)
<i>budesonide (inhalation) susp 1 mg/2ml</i>	1	QL(2 ml daily)
FLOVENT DISKUS AEPB 100 MCG/BLIST (<i>fluticasone propionate (inhalation)</i>)	2	QL(20 ea daily)
FLOVENT DISKUS AEPB 250 MCG/BLIST (<i>fluticasone propionate (inhalation)</i>)	2	QL(8 ea daily)
FLOVENT DISKUS AEPB 50 MCG/BLIST (<i>fluticasone propionate (inhalation)</i>)	2	QL(40 ea daily)
FLOVENT HFA AERO 110 MCG/ACT, 220 MCG/ACT (<i>fluticasone propionate hfa</i>)	2	Limit 2 inhalers per month;QL(0.8 gm daily)
FLOVENT HFA AERO 44 MCG/ACT, 220 MCG/ACT (<i>fluticasone propionate hfa</i>)	2	Limit 1 inhaler per month;QL(0.36 gm daily)
PULMICORT FLEXHALER AEPB 180 MCG/ACT (<i>budesonide (inhalation)</i>)	2	Limit 2 inhalers per month;QL(0.07 ea daily)

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

Drug Name	Drug Tier	Requirements/ Limits
PULMICORT FLEXHALER AEPB 90 MCG/ACT (<i>budesonide (inhalation)</i>)	2	Limit 8 inhalers per month; QL(0.27 ea daily)
PULMICORT SUSP 0.25 MG/2ML (<i>budesonide (inhalation)</i>)	NF	QL(8 ml daily)
PULMICORT SUSP 0.5 MG/2ML (<i>budesonide (inhalation)</i>)	GP	QL(4 ml daily)
PULMICORT SUSP 1 MG/2ML (<i>budesonide (inhalation)</i>)	GP	QL(2 ml daily)
QVAR REDIHALER AERB 40 MCG/ACT (<i>beclomethasone dipropionate hfa</i>)	2	Limit 1 inhaler per month; QL(0.36 gm daily)
QVAR REDIHALER AERB 80 MCG/ACT (<i>beclomethasone dipropionate hfa</i>)	2	Limit 2 Inhalers per month; QL(0.72 gm daily)
Sympathomimetics		
(Fluticasone-Salmeterol) WIXELA INHUB AEPB	1	QL(2 ea daily)
ADVAIR DISKUS AEPB (<i>fluticasone-salmeterol</i>)	GP	QL(2 ea daily)
ADVAIR HFA AERO (<i>fluticasone-salmeterol</i>)	2	Limit 1 inhaler per month; QL(0.4 gm daily)
AIRDUO RESPICLICK 113/14 AEPB (<i>fluticasone-salmeterol</i>)	NF	QL(0.04 ea daily)1 bal on hand,
AIRDUO RESPICLICK 232/14 AEPB (<i>fluticasone-salmeterol</i>)	NF	QL(0.04 ea daily)1 bal on hand,
AIRDUO RESPICLICK 55/14 AEPB (<i>fluticasone-salmeterol</i>)	NF	QL(0.04 ea daily)1 bal on hand,
<i>albuterol sulfate aers in 108 mcg/act</i>	1	Limit 2 inhalers per month; QL(0.57 gm daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>albuterol sulfate aers in 108 mcg/act</i>	1	QL(1.2 gm daily)1 bal on hand,
<i>albuterol sulfate aers in 108 mcg/act</i>	1	QL(0.45 gm daily)
<i>albuterol sulfate aers in 108 mcg/act</i>	1	QL(1.2 gm daily)
<i>albuterol sulfate nebu in 0.63 mg/3ml, 0.083 %, 0.5 %, 1.25 mg/3ml, 2.5 mg/0.5ml</i>	1	
<i>albuterol sulfate syrp or 2 mg/5ml</i>	1	
<i>albuterol sulfate tabs or 2 mg, 4 mg</i>	1	
<i>albuterol sulfate tb12 or 4 mg, 8 mg</i>	1	QL(2 ea daily)1 bal on hand,
ANORO ELLIPTA AEPB (<i>umeclidinium-vilanterol</i>)	2	QL(2 ea daily)
ARCAPTA NEOHALER CAPS (<i>indacaterol maleate</i>)	3	QL(1 ea daily)
BEVESPI AEROSPHERE AERO (<i>glycopyrrolate-formoterol fumarate</i>)	3	Limit 1 inhaler per month; QL(0.36 gm daily)
BREO ELLIPTA AEPB (<i>fluticasone furoate-vilanterol</i>)	2	QL(2 ea daily)
BROVANA NEBU (<i>arformoterol tartrate</i>)	3	
<i>budesonide-formoterol fumarate dihydrate aero</i>	1	Limit 1 inhaler per month; QL(0.34 gm daily)1 bal on hand,
COMBIVENT RESPIMAT AERS (<i>ipratropium-albuterol</i>)	3	Limit 1 inhaler per month; QL(0.2 gm daily)
<i>epinephrine hcl soln</i>	SP	PA

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

Drug Name	Drug Tier	Requirements/ Limits
fluticasone-salmeterol aepb 50 mcg/dose-100 mcg/dose, 50 mcg/dose-250 mcg/dose, 50 mcg/dose-500 mcg/dose	1	QL(2 ea daily)
ipratropium-albuterol soln	1	
levalbuterol hcl nebu	1	
levalbuterol tartrate aero	1	Limit 2 inhalers per month;QL(1 gm daily)1 bal on hand,
metaproterenol sulfate syrup	1	1 bal on hand,
metaproterenol sulfate tabs	1	1 bal on hand,
PERFOROMIST NEBU (formoterol fumarate)	3	QL(4 ml daily)
PROAIR HFA AERS (albuterol sulfate)	1	Limit 2 inhalers per month;QL(0.57 gm daily)
PROAIR RESPICLICK AEPB (albuterol sulfate)	3	Limit 2 inhalers per month;QL(0.07 ea daily)
PROVENTIL HFA AERS (albuterol sulfate)	NF	Limit 2 inhalers per month;QL(0.45 gm daily)
PROVENTIL HFA AERS (albuterol sulfate)	1	Limit 2 inhalers per month;QL(0.45 gm daily)
SEREVENT DISKUS AEPB (salmeterol xinafoate)	2	QL(2 ea daily)
STIOLTO RESPIMAT AERS (tiotropium bromide-olodaterol hcl)	2	Limit 1 inhaler per month;QL(0.14 gm daily)

Drug Name	Drug Tier	Requirements/ Limits
STRIVERDI RESPIMAT AERS (olodaterol hcl)	2	Limit 1 inhaler per month;QL(0.14 gm daily)
SYMBICORT AERO (budesonide-formoterol fumarate dihydrate)	2	Limit 1 inhaler per month;QL(0.34 gm daily)1 bal on hand,
terbutaline sulfate tabs	1	
TRELEGY ELLIPTA AEPB (fluticasone-umeclidinium-vilanterol)	2	QL(2 ea daily)
UTIBRON NEOHALER CAPS (indacaterol maleate-glycopyrrolate)	3	QL(2 ea daily)
VENTOLIN HFA AERS (albuterol sulfate)	1	Limit 2 inhalers per month;QL(0.54 gm daily)1 bal on hand,
VENTOLIN HFA AERS (albuterol sulfate)	1	Limit 2 inhalers per month;QL(1.2 gm daily)1 bal on hand,
XOPENEX CONCENTRATE NEBU (levalbuterol hcl)	GP	
XOPENEX HFA AERO (levalbuterol tartrate)	1	Limit 2 inhalers per month;QL(1 gm daily)1 bal on hand,
XOPENEX NEBU (levalbuterol hcl)	GP	
Xanthines		
aminophylline soln	SP	PA
ELIXOPHYLLIN ELIX (theophylline)	3	
THEO-24 CP24 (theophylline)	2	
theophylline soln 80 mg/15ml	1	

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

Drug Name	Drug Tier	Requirements/ Limits
<i>theophylline tb12 100 mg, 200 mg, 300 mg, 450 mg, 450 mg</i>	1	
<i>theophylline tb12 300 mg, 300 mg, 450 mg, 450 mg</i>	1	1 bal on hand,
<i>theophylline tb24 400 mg, 600 mg</i>	1	
ANTICOAGULANTS - Blood Thinners		
Coumarin Anticoagulants		
(Warfarin Sodium) JANTOVEN TABS	1	
COUMADIN TABS (<i>warfarin sodium</i>)	GP	
<i>warfarin sodium tabs</i>	1	
Direct Factor Xa Inhibitors		
BEVYXXA CAPS (<i>betrixaban maleate</i>)	3	QL(42 ea per 42 days retail)
ELIQUIS STARTER PACK TABS (<i>apixaban</i>)	2	
ELIQUIS TABS (<i>apixaban</i>)	2	
SAVAYSA TABS (<i>edoxaban tosylate</i>)	3	
XARELTO STARTER PACK TBPB (<i>rivaroxaban</i>)	2	
XARELTO TABS 10 MG, 15 MG, 20 MG (<i>rivaroxaban</i>)	2	
Heparins And Heparinoid-Like Agents		
ARIXTRA SOLN (<i>fondaparinux sodium</i>)	SP	PA;
<i>enoxaparin sodium soln ij 300 mg/3ml</i>	SP	QL(3 ml per 10 days retail)
<i>enoxaparin sodium soln sc 100 mg/ml, 150 mg/ml, 120 mg/0.8ml</i>	SP	QL(20 ml per 10 days retail)

Drug Name	Drug Tier	Requirements/ Limits
<i>enoxaparin sodium soln sc 30 mg/0.3ml, 120 mg/0.8ml</i>	SP	QL(6 ml per 10 days retail)
<i>enoxaparin sodium soln sc 40 mg/0.4ml, 120 mg/0.8ml</i>	SP	QL(8 ml per 10 days retail)
<i>enoxaparin sodium soln sc 60 mg/0.6ml, 120 mg/0.8ml</i>	SP	QL(12 ml per 10 days retail)
<i>enoxaparin sodium soln sc 80 mg/0.8ml, 120 mg/0.8ml</i>	SP	QL(16 ml per 10 days retail)
<i>fondaparinux sodium soln</i>	SP	PA;
FRAGMIN SOLN 10000 UNIT/ML, 5000 UNIT/0.2ML (<i>dalteparin sodium</i>)	SP	QL(20 ml per 365 days retail)
FRAGMIN SOLN 12500 UNIT/0.5ML (<i>dalteparin sodium</i>)	SP	QL(10 ml per 365 days retail)
FRAGMIN SOLN 15000 UNIT/0.6ML (<i>dalteparin sodium</i>)	SP	QL(12 ml per 365 days retail)
FRAGMIN SOLN 18000 UNT/0.72ML (<i>dalteparin sodium</i>)	SP	QL(14 ml per 365 days retail)
FRAGMIN SOLN 2500 UNIT/0.2ML, 5000 UNIT/0.2ML (<i>dalteparin sodium</i>)	SP	QL(4 ml per 365 days retail)
FRAGMIN SOLN 7500 UNIT/0.3ML (<i>dalteparin sodium</i>)	SP	QL(6 ml per 365 days retail)
FRAGMIN SOLN 95000 UNIT/3.8ML (<i>dalteparin sodium</i>)	SP	PA
<i>heparin (porcine) in sodium chloride soln 2000 unit/l-0.9 %, 1000 unit/500ml-0.9 %, 1000 unit/500ml-0.9 %</i>	SP	

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

Drug Name	Drug Tier	Requirements/ Limits
heparin (porcine) in sodium chloride soln 2000 unit/l-0.9 %, 1000 unit/500ml-0.9 %, 1000 unit/500ml-0.9 %	SP	1 bal on hand,
heparin sod (porcine) in d5w soln	SP	1 bal on hand,
heparin sodium (porcine) soln	SP	
HEPARIN SODIUM/NACL 0.45% SOLN (heparin (porcine) in sodium chloride)	SP	
HEPARIN SODIUM/SODIUM CHLORIDE 0.9% SOLN (heparin (porcine) in sodium chloride)	SP	
HEPARIN SODIUM/SODIUM CHLORIDE SOLN 2000 UNIT/L-0.9 %, 1000 UNIT/500ML-0.9 %, 25000 UNIT/250ML-0.45 %, 25000 UNIT/500ML-0.45 % (heparin (porcine) in sodium chloride)	SP	
LOVENOX SOLN IJ 300 MG/3ML (enoxaparin sodium)	SP	QL(3 ml per 10 days retail)
LOVENOX SOLN SC 100 MG/ML, 150 MG/ML, 120 MG/0.8ML (enoxaparin sodium)	SP	QL(20 ml per 10 days retail)
LOVENOX SOLN SC 30 MG/0.3ML, 120 MG/0.8ML (enoxaparin sodium)	SP	QL(6 ml per 10 days retail)
LOVENOX SOLN SC 40 MG/0.4ML, 120 MG/0.8ML (enoxaparin sodium)	SP	QL(8 ml per 10 days retail)
LOVENOX SOLN SC 60 MG/0.6ML, 120 MG/0.8ML (enoxaparin sodium)	SP	QL(12 ml per 10 days retail)

Drug Name	Drug Tier	Requirements/ Limits
LOVENOX SOLN SC 80 MG/0.8ML, 120 MG/0.8ML (enoxaparin sodium)	SP	QL(16 ml per 10 days retail)
Thrombin Inhibitors		
PRADAXA CAPS (dabigatran etexilate mesylate)	3	
ANTICONVULSANTS - Drugs to Treat Seizures		
AMPA Glutamate Receptor Antagonists		
FYCOMPA SUSP (perampanel)	3	
FYCOMPA TABS (perampanel)	3	
Anticonvulsants - Benzodiazepines		
clobazam susp	1	
clobazam tabs	1	
clonazepam tabs	1	
clonazepam tbdp	1	
DIASTAT ACUDIAL GEL (diazepam (anticonvulsant))	3	Limit 4 per month;QL(0.14 ea daily)1 bal on hand,
DIASTAT PEDIATRIC GEL (diazepam (anticonvulsant))	3	Limit 4 per month;QL(0.14 ea daily)1 bal on hand,
diazepam (anticonvulsant) gel 10 mg	3	Limit 4 per month;QL(0.14 ea daily)1 bal on hand,
diazepam (anticonvulsant) gel 20 mg, 2.5 mg	1	Limit 4 per month;QL(0.14 ea daily)1 bal on hand,
KLONOPIN TABS (clonazepam)	GP	
NAYZILAM SOLN (midazolam (anticonvulsant))	SP	PA; QL(10 ea per 30 days retail)
ONFI SUSP (clobazam)	GP	

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

Drug Name	Drug Tier	Requirements/ Limits
ONFI TABS (<i>clobazam</i>)	GP	
VALTOCO LIQD (<i>diazepam</i> (<i>anticonvulsant</i>))	SP	PA; QL(10 ea per 30 days retail)
VALTOCO LQPK (<i>diazepam</i> (<i>anticonvulsant</i>))	SP	PA; QL(10 ea per 30 days retail)
Anticonvulsants - Misc.		
(Carbamazepine) EPITOL TABS	1	
(Lamotrigine) SUBVENITE STARTER KIT/BLUE, SUBVENITE STARTER KIT/ORANGE, SUBVENITE STARTER KIT/GREEN KIT	1	
(Lamotrigine) SUBVENITE TABS	1	
(Levetiracetam) ROWEEPRA TABS	1	
(Levetiracetam) ROWEEPRA XR TB24	1	
APTOM TABS 200 MG, 400 MG, 600 MG (<i>eslicarbazepine acetate</i>)	3	QL(2 ea daily)
APTOM TABS 800 MG (<i>eslicarbazepine acetate</i>)	3	QL(1 ea daily)
BANZEL SUSP (<i>rufinamide</i>)	2	
BANZEL TABS (<i>rufinamide</i>)	2	
BRIVIACT SOLN (<i>brivaracetam</i>)	3	PA
BRIVIACT TABS (<i>brivaracetam</i>)	3	PA
<i>carbamazepine chew</i>	1	
<i>carbamazepine cp12</i>	1	
<i>carbamazepine susp</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
<i>carbamazepine tabs</i>	1	
<i>carbamazepine tb12</i>	1	
CARBATROL CP12 (<i>carbamazepine</i>)	3	
DIACOMIT CAPS 250 MG (<i>stiripentol</i>)	SP	PA; QL(12 ea daily)
DIACOMIT CAPS 500 MG (<i>stiripentol</i>)	SP	PA; QL(6 ea daily)
DIACOMIT PACK 250 MG (<i>stiripentol</i>)	SP	PA; QL(12 ea daily)
DIACOMIT PACK 500 MG (<i>stiripentol</i>)	SP	PA; QL(6 ea daily)
EPIDIOLEX SOLN (<i>cannabidiol</i>)	SP	PA
<i>gabapentin caps</i>	1	
<i>gabapentin soln</i>	1	
<i>gabapentin tabs</i>	1	
KEPPRA SOLN IV 500 MG/5ML (<i>levetiracetam</i>)	SP	PA
KEPPRA SOLN OR 100 MG/ML (<i>levetiracetam</i>)	3	
KEPPRA TABS OR 250 MG, 500 MG, 750 MG, 1000 MG (<i>levetiracetam</i>)	3	
KEPPRA XR TB24 (<i>levetiracetam</i>)	3	
LAMICTAL CHEWABLE DISPERSIBLE CHEW (<i>lamotrigine</i>)	3	
LAMICTAL ODT KIT (<i>lamotrigine</i>)	3	PA
LAMICTAL ODT TBDP 25 MG, 50 MG, 100 MG, 200 MG (<i>lamotrigine</i>)	3	PA
LAMICTAL STARTER/NOT TAKING CARBAMAZEPINE KIT (<i>lamotrigine</i>)	GP	

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

Drug Name	Drug Tier	Requirements/ Limits
LAMICTAL STARTER/TAKING CARBAMAZEPINE/NOT TAKING VALPROATE KIT (<i>lamotrigine</i>)	GP	
LAMICTAL STARTER/TAKING VALPROATE KIT (<i>lamotrigine</i>)	GP	
LAMICTAL TABS (<i>lamotrigine</i>)	3	
LAMICTAL XR KIT (<i>lamotrigine</i>)	3	PA
LAMICTAL XR TB24 25 MG, 50 MG, 100 MG, 200 MG (<i>lamotrigine</i>)	3	PA; QL(1 ea daily)
LAMICTAL XR TB24 250 MG (<i>lamotrigine</i>)	3	PA
LAMICTAL XR TB24 300 MG (<i>lamotrigine</i>)	3	
<i>lamotrigine chew 5 mg, 25 mg</i>	1	
<i>lamotrigine kit</i>	1	PA
<i>lamotrigine kit 25 mg,</i>	1	
<i>lamotrigine tabs 25 mg, 100 mg, 150 mg, 200 mg</i>	1	
<i>lamotrigine tb24 25 mg, 50 mg, 100 mg, 200 mg</i>	1	PA; QL(1 ea daily)
<i>lamotrigine tb24 250 mg</i>	1	PA
<i>lamotrigine tb24 300 mg</i>	1	
<i>lamotrigine tbdp 25 mg, 50 mg, 100 mg, 200 mg</i>	1	PA
<i>levetiracetam soln iv 500 mg/5ml</i>	SP	PA
<i>levetiracetam soln or 100 mg/ml, 500 mg/5ml</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
<i>levetiracetam tabs or 250 mg, 500 mg, 750 mg, 1000 mg</i>	1	
<i>levetiracetam tb24 or 500 mg, 750 mg</i>	1	
LYRICA CAPS 150 MG, 200 MG, 225 MG, 300 MG (<i>pregabalin</i>)	3	PA; QL(2 ea daily)
LYRICA CAPS 25 MG, 50 MG, 75 MG, 100 MG, 200 MG, 225 MG, 300 MG (<i>pregabalin</i>)	3	PA; QL(3 ea daily)
LYRICA SOLN 20 MG/ML (<i>pregabalin</i>)	3	PA
MYSOLINE TABS (<i>primidone</i>)	3	
NEURONTIN CAPS (<i>gabapentin</i>)	3	
NEURONTIN SOLN (<i>gabapentin</i>)	3	
NEURONTIN TABS (<i>gabapentin</i>)	3	
<i>oxcarbazepine susp</i>	1	
<i>oxcarbazepine tabs</i>	1	
OXTELLAR XR TB24 (<i>oxcarbazepine</i>)	3	
<i>pregabalin caps 150 mg, 200 mg, 225 mg, 300 mg</i>	1	PA; QL(2 ea daily)
<i>pregabalin caps 25 mg, 50 mg, 75 mg, 100 mg, 200 mg, 225 mg, 300 mg</i>	1	PA; QL(3 ea daily)
<i>pregabalin soln 20 mg/ml</i>	1	PA
<i>primidone tabs</i>	1	
QUDEXY XR CS24 (<i>topiramate</i>)	3	PA; 1 bal on hand,
TEGRETOL SUSP (<i>carbamazepine</i>)	3	

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

Drug Name	Drug Tier	Requirements/ Limits
TEGRETOL TABS (<i>carbamazepine</i>)	3	
TEGRETOL-XR TB12 100 MG (<i>carbamazepine</i>)	GP	
TEGRETOL-XR TB12 200 MG, 400 MG (<i>carbamazepine</i>)	3	
TOPAMAX SPRINKLE CPSP (<i>topiramate</i>)	3	
TOPAMAX TABS (<i>topiramate</i>)	3	
<i>topiramate cpsp 15 mg, 25 mg</i>	1	
<i>topiramate cs24 25 mg, 50 mg, 100 mg, 150 mg, 200 mg</i>	1	PA; 1 bal on hand,
<i>topiramate tabs 25 mg, 50 mg, 100 mg, 200 mg</i>	1	
TRILEPTAL SUSP (<i>oxcarbazepine</i>)	3	
TRILEPTAL TABS (<i>oxcarbazepine</i>)	3	
TROKENDI XR CP24 (<i>topiramate</i>)	3	PA
VIMPAT SOLN (<i>lacosamide</i>)	2	
VIMPAT TABS (<i>lacosamide</i>)	2	
ZONEGRAN CAPS (<i>zonisamide</i>)	3	
<i>zonisamide caps</i>	1	
Carbamates		
<i>felbamate susp</i>	1	
<i>felbamate tabs</i>	1	
FELBATOL SUSP (<i>felbamate</i>)	3	
FELBATOL TABS (<i>felbamate</i>)	3	

Drug Name	Drug Tier	Requirements/ Limits
GABA Modulators		
(Vigabatrin) VIGADRONE PACK	1	
GABITRIL TABS 12 MG, 16 MG (<i>tiagabine hcl</i>)	3	
GABITRIL TABS 2 MG, 4 MG (<i>tiagabine hcl</i>)	GP	
SABRIL PACK (<i>vigabatrin</i>)	GP	
SABRIL TABS (<i>vigabatrin</i>)	GP	
<i>tiagabine hcl tabs</i>	1	
<i>vigabatrin pack</i>	1	
<i>vigabatrin tabs</i>	1	
Hydantoins		
(Phenytoin) PHENYTOIN INFATABS CHEW	1	
CEREBYX SOLN (<i>fosphenytoin sodium</i>)	SP	PA
DILANTIN CAPS 100 MG (<i>phenytoin sodium extended</i>)	3	
DILANTIN CAPS 30 MG (<i>phenytoin sodium extended</i>)	2	
DILANTIN INFATABS CHEW (<i>phenytoin</i>)	3	
DILANTIN-125 SUSP (<i>phenytoin</i>)	3	
<i>fosphenytoin sodium soln</i>	SP	PA
PEGANONE TABS (<i>ethotoin</i>)	3	
PHENYTEK CAPS (<i>phenytoin sodium extended</i>)	3	
<i>phenytoin chew</i>	1	
<i>phenytoin sodium extended caps</i>	1	

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

Drug Name	Drug Tier	Requirements/ Limits
<i>phenytoin sodium soln</i>	SP	PA
<i>phenytoin susp</i>	1	
Succinimides		
CELONTIN CAPS (<i>methsuximide</i>)	2	
<i>ethosuximide caps</i>	1	
<i>ethosuximide soln</i>	1	
ZARONTIN CAPS (<i>ethosuximide</i>)	3	
ZARONTIN SOLN (<i>ethosuximide</i>)	3	
Valproic Acid		
DEPAKENE CAPS 250 MG (<i>valproic acid</i>)	3	
DEPAKOTE ER TB24 (<i>divalproex sodium</i>)	3	
DEPAKOTE SPRINKLES CSDR (<i>divalproex sodium</i>)	3	
DEPAKOTE TBEC (<i>divalproex sodium</i>)	3	
<i>divalproex sodium csdr</i>	1	
<i>divalproex sodium tb24</i>	1	
<i>divalproex sodium tbec</i>	1	
<i>valproic acid caps or</i>	1	
ANTIDEPRESSANTS - Drugs to Treat Depression		
Alpha-2 Receptor Antagonists (Tetracyclics)		
<i>mirtazapine tabs</i>	1	
<i>mirtazapine tbdp</i>	1	
REMERON SOLTAB TBDP (<i>mirtazapine</i>)	GP	
REMERON TABS (<i>mirtazapine</i>)	GP	

Drug Name	Drug Tier	Requirements/ Limits
Antidepressants - Misc.		
APLENZIN TB24 (<i>bupropion hydrobromide</i>)	3	ST; QL(1 ea daily)
<i>bupropion hcl tabs 75 mg, 100 mg</i>	1	
<i>bupropion hcl tb12 100 mg, 150 mg, 200 mg</i>	1	
<i>bupropion hcl tb24 150 mg, 300 mg</i>	1	QL(1 ea daily)
<i>bupropion hcl tb24 450 mg</i>	1	ST; QL(1 ea daily)1 bal on hand,
FORFIVO XL TB24 (<i>bupropion hcl</i>)	3	ST; QL(1 ea daily)1 bal on hand,
<i>maprotiline hcl tabs</i>	1	1 bal on hand,
WELLBUTRIN SR TB12 100 MG (<i>bupropion hcl</i>)	GP	
WELLBUTRIN SR TB12 150 MG, 200 MG (<i>bupropion hcl</i>)	NF	
WELLBUTRIN XL TB24 150 MG (<i>bupropion hcl</i>)	NF	QL(1 ea daily)
WELLBUTRIN XL TB24 300 MG (<i>bupropion hcl</i>)	GP	QL(1 ea daily)
Monoamine Oxidase Inhibitors (MAOIs)		
EMSAM PT24 (<i>selegiline</i>)	3	QL(1 ea daily)
MARPLAN TABS (<i>isocarboxazid</i>)	3	
NARDIL TABS (<i>phenelzine sulfate</i>)	GP	
PARNATE TABS (<i>tranylcypromine sulfate</i>)	GP	
<i>phenelzine sulfate tabs</i>	1	
<i>tranylcypromine sulfate tabs</i>	1	
Selective Serotonin Reuptake Inhibitors (SSRIs)		

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

Drug Name	Drug Tier	Requirements/ Limits
CELEXA TABS 10 MG (<i>citalopram hydrobromide</i>)	GP	QL(4 ea daily)
CELEXA TABS 20 MG (<i>citalopram hydrobromide</i>)	GP	QL(2 ea daily)
CELEXA TABS 40 MG (<i>citalopram hydrobromide</i>)	GP	QL(1 ea daily)
<i>citalopram hydrobromide soln 10 mg/5ml</i>	1	QL(20 ml daily)
<i>citalopram hydrobromide tabs 10 mg</i>	1	QL(4 ea daily)
<i>citalopram hydrobromide tabs 20 mg</i>	1	QL(2 ea daily)
<i>citalopram hydrobromide tabs 40 mg</i>	1	QL(1 ea daily)
<i>escitalopram oxalate soln</i>	1	
<i>escitalopram oxalate tabs</i>	1	
<i>fluoxetine hcl caps 10 mg, 20 mg, 40 mg</i>	1	
<i>fluoxetine hcl cpdr 90 mg</i>	1	1 bal on hand,
<i>fluoxetine hcl soln 20 mg/5ml</i>	1	
<i>fluoxetine hcl tabs 10 mg, 20 mg</i>	1	
<i>fluoxetine hcl tabs 60 mg</i>	1	ST; QL(1 ea daily)1 bal on hand,
<i>fluoxetine hcl tabs 60 mg</i>	1	ST; QL(1 ea daily)
FLUOXETINE HYDROCHLORIDE TABS (<i>fluoxetine hcl</i>)	3	ST; QL(1 ea daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>fluvoxamine maleate cp24</i>	1	
<i>fluvoxamine maleate tabs</i>	1	
LEXAPRO TABS 10 MG, 20 MG (<i>escitalopram oxalate</i>)	NF	
LEXAPRO TABS 5 MG (<i>escitalopram oxalate</i>)	GP	
<i>paroxetine hcl tabs</i>	1	
<i>paroxetine hcl tb24</i>	1	
PAXIL CR TB24 25 MG, 12.5 MG (<i>paroxetine hcl</i>)	GP	
PAXIL CR TB24 37.5 MG (<i>paroxetine hcl</i>)	NF	
PAXIL TABS 10 MG, 30 MG, 40 MG (<i>paroxetine hcl</i>)	GP	
PAXIL TABS 20 MG (<i>paroxetine hcl</i>)	NF	
PEXEVA TABS (<i>paroxetine mesylate</i>)	3	
PROZAC CAPS (<i>fluoxetine hcl</i>)	GP	
<i>sertraline hcl conc</i>	1	
<i>sertraline hcl tabs</i>	1	
ZOLOFT CONC 20 MG/ML (<i>sertraline hcl</i>)	GP	
ZOLOFT TABS 100 MG (<i>sertraline hcl</i>)	NF	
ZOLOFT TABS 25 MG, 50 MG (<i>sertraline hcl</i>)	GP	
Serotonin Modulators		
<i>nefazodone hcl tabs 50 mg, 100 mg, 150 mg, 200 mg, 250 mg, 250 mg</i>	1	

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

Drug Name	Drug Tier	Requirements/ Limits
nefazodone hcl tabs 50 mg, 100 mg, 150 mg, 200 mg, 250 mg, 250 mg	1	1 bal on hand,
trazodone hcl tabs	1	
TRINTELLIX TABS (vortioxetine hbr)	3	ST; QL(1 ea daily)
VIIBRYD STARTER PACK KIT (vilazodone hcl)	3	ST
VIIBRYD TABS (vilazodone hcl)	3	ST
Serotonin-Norepinephrine Reuptake Inhibitors		
CYMBALTA CPEP 20 MG (duloxetine hcl)	GP	QL(2 ea daily)
CYMBALTA CPEP 30 MG, 60 MG (duloxetine hcl)	NF	QL(2 ea daily)
DESVENLAFAXINE ER TB24 (desvenlafaxine)	3	ST; QL(1 ea daily)
desvenlafaxine succinate tb24	1	
desvenlafaxine tb24	1	ST; QL(1 ea daily)1 bal on hand,
duloxetine hcl cpep 20 mg, 30 mg, 60 mg	1	QL(2 ea daily)
EFFEXOR XR CP24 150 MG (venlafaxine hcl)	NF	QL(2 ea daily)
EFFEXOR XR CP24 75 MG, 37.5 MG (venlafaxine hcl)	GP	QL(1 ea daily)
FETZIMA CP24 20 MG, 80 MG, 120 MG (levomilnacipran hcl)	3	ST; QL(2 ea daily)
FETZIMA CP24 40 MG, 80 MG, 120 MG (levomilnacipran hcl)	3	ST; QL(1 ea daily)
FETZIMA TITRATION PACK C4PK (levomilnacipran hcl)	3	ST
KHEDEZLA TB24 (desvenlafaxine)	3	ST; QL(1 ea daily)1 bal on hand,

Drug Name	Drug Tier	Requirements/ Limits
PRISTIQ TB24 (desvenlafaxine succinate)	NF	
venlafaxine hcl cp24 150 mg, 37.5 mg	1	QL(2 ea daily)
venlafaxine hcl cp24 75 mg, 37.5 mg	1	QL(1 ea daily)
venlafaxine hcl tabs 25 mg, 50 mg, 75 mg, 100 mg, 37.5 mg	1	
venlafaxine hcl tb24 75 mg, 150 mg, 225 mg, 37.5 mg	1	
Tricyclic Agents		
amitriptyline hcl tabs	1	
amoxapine tabs	1	1 bal on hand,
ANAFRANIL CAPS (clomipramine hcl)	GP	
clomipramine hcl caps	1	
desipramine hcl tabs	1	
doxepin hcl caps 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg	1	
doxepin hcl caps 150 mg, 150 mg	1	1 bal on hand,
doxepin hcl conc 10 mg/ml	1	
imipramine hcl tabs	1	
imipramine pamoate caps	1	
NORPRAMIN TABS (desipramine hcl)	GP	
nortriptyline hcl caps 10 mg, 25 mg, 50 mg, 75 mg	1	
PAMELOR CAPS (nortriptyline hcl)	GP	

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

Drug Name	Drug Tier	Requirements/ Limits
<i>protriptyline hcl tabs 5 mg, 10 mg</i>	1	
SURMONTIL CAPS (<i>trimipramine maleate</i>)	GP	
TOFRANIL TABS (<i>imipramine hcl</i>)	GP	
<i>trimipramine maleate caps</i>	1	
ANTIDIABETICS - Drugs to Regulate Blood Sugar		
Alpha-Glucosidase Inhibitors		
<i>acarbose tabs</i>	1	
GLYSET TABS (<i>miglitol</i>)	GP	
<i>miglitol tabs</i>	1	
PRECOSE TABS (<i>acarbose</i>)	GP	
Antidiabetic - Amylin Analogs		
SYMLINPEN 120 SOPN (<i>pramlintide acetate</i>)	3	PA
SYMLINPEN 60 SOPN (<i>pramlintide acetate</i>)	SP	PA
Antidiabetic Combinations		
ACTOPLUS MET TABS (<i>pioglitazone hcl-metformin hcl</i>)	GP	
ACTOPLUS MET XR TB24 (<i>pioglitazone hcl-metformin hcl</i>)	3	
DUETACT TABS (<i>pioglitazone hcl-glimepiride</i>)	GP	
<i>glipizide-metformin hcl tabs</i>	1	
GLUCOVANCE TABS (<i>glyburide-metformin</i>)	GP	
<i>glyburide-metformin tabs</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
GLYXAMBI TABS (<i>empagliflozin-linagliptin</i>)	2	
INVOKAMET TABS (<i>canagliflozin-metformin hcl</i>)	2	
INVOKAMET XR TB24 (<i>canagliflozin-metformin hcl</i>)	2	
JANUMET TABS (<i>sitagliptin-metformin hcl</i>)	2	
JANUMET XR TB24 (<i>sitagliptin-metformin hcl</i>)	2	
KAZANO TABS (<i>alogliptin-metformin hcl</i>)	NF	1 bal on hand,
OSENI TABS (<i>alogliptin-pioglitazone</i>)	NF	1 bal on hand,
<i>pioglitazone hcl-glimepiride tabs</i>	1	
<i>pioglitazone hcl-metformin hcl tabs</i>	1	
<i>repaglinide-metformin hcl tabs</i>	1	1 bal on hand,
SEGLUROMET TABS (<i>ertugliflozin-metformin hcl</i>)	3	
SOLIQUA 100/33 SOPN (<i>insulin glargine-lixisenatide</i>)	SP	PA
SYNJARDY TABS (<i>empagliflozin-metformin hcl</i>)	2	
SYNJARDY XR TB24 (<i>empagliflozin-metformin hcl</i>)	2	
XULTOPHY 100/3.6 SOPN (<i>insulin degludec-liraglutide</i>)	SP	PA
Biguanides		

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

Drug Name	Drug Tier	Requirements/ Limits
GLUCOPHAGE TABS (<i>metformin hcl</i>)	GP	
GLUCOPHAGE XR TB24 (<i>metformin hcl</i>)	GP	
GLUMETZA TB24 (<i>metformin hcl</i>)	SP	PA
<i>metformin hcl soln 500 mg/5ml</i>	1	
<i>metformin hcl tabs 500 mg, 850 mg, 1000 mg</i>	1	
<i>metformin hcl tb24 500 mg, 1000 mg</i>	SP	PA
<i>metformin hcl tb24 500 mg, 750 mg</i>	1	
METFORMIN HYDROCHLORIDE SOLN (<i>metformin hcl</i>)	1	1 bal on hand,
RIOMET SOLN (<i>metformin hcl</i>)	3	1 bal on hand,
Diabetic Other		
BAQSIMI ONE PACK POWD (<i>glucagon</i>)	2	QL(0.069 ea daily)
BAQSIMI TWO PACK POWD (<i>glucagon</i>)	2	QL(0.069 ea daily)
<i>diazoxide susp</i>	1	
GLUCAGEN HYPOKIT SOLR (<i>glucagon hcl (rdna)</i>)	2	
GLUCAGON EMERGENCY KIT FOR LOW BLOOD SUGAR SOLR (<i>glucagon hcl</i>)	2	
GLUCAGON EMERGENCY KIT KIT (<i>glucagon (rdna)</i>)	2	
GVOKE PFS SOSY (<i>glucagon</i>)	2	QL(0.02 ml daily)
KORLYM TABS (<i>mifepristone (hyperglycemia)</i>)	SP	PA
PROGLYCEM SUSP (<i>diazoxide</i>)	GP	

Drug Name	Drug Tier	Requirements/ Limits
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
JANUVIA TABS (<i>sitagliptin phosphate</i>)	2	
NESINA TABS (<i>alogliptin benzoate</i>)	NF	1 bal on hand,
Dopamine Receptor Agonists - Antidiabetic		
CYCLOSET TABS (<i>bromocriptine mesylate (diabetes)</i>)	3	
Incretin Mimetic Agents (GLP-1 Receptor		
ADLYXIN SOPN (<i>lixisenatide</i>)	SP	PA
ADLYXIN STARTER PACK PNKT (<i>lixisenatide</i>)	SP	PA
BYDUREON BCISE AUIJ (<i>exenatide</i>)	SP	PA
BYDUREON PEN PEN (<i>exenatide</i>)	SP	PA
BYDUREON SRER (<i>exenatide</i>)	SP	PA
BYETTA SOPN (<i>exenatide</i>)	SP	PA
OZEMPIC SOPN (<i>semaglutide</i>)	SP	PA
TANZEUM PEN (<i>albiglutide</i>)	SP	PA
TRULICITY SOPN (<i>dulaglutide</i>)	SP	PA
VICTOZA SOPN (<i>liraglutide</i>)	SP	PA
Insulin Sensitizing Agents		
ACTOS TABS (<i>pioglitazone hcl</i>)	GP	
AVANDIA TABS (<i>rosiglitazone maleate</i>)	2	
<i>pioglitazone hcl tabs</i>	1	
Insulin		

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

Drug Name	Drug Tier	Requirements/ Limits
(Insulin Lispro Protamine & Lispro) HUMALOG MIX 50/50 KWIKPEN, HUMALOG MIX 75/25 KWIKPEN SUPN	1	Limit 3 boxes per month; QL(1.5 ml daily)
(Insulin Lispro Protamine & Lispro) HUMALOG MIX 50/50, HUMALOG MIX 75/25 SUSP	1	Limit 4 vials per month; QL(1.5 ml daily)
(Insulin Lispro) HUMALOG KWIKPEN SOPN 100 UNIT/ML	1	Limit 3 boxes per month; QL(1.5 ml daily)
(Insulin Lispro) HUMALOG KWIKPEN SOPN 200 UNIT/ML	1	Limit 4 boxes per month; QL(0.8 ml daily)
(Insulin Lispro) HUMALOG SOLN	1	Limit 4 vials per month; QL(1.5 ml daily)
(Insulin Nph (Human) (Isophane)) HUMULIN N KWIKPEN SUPN	1	Limit 3 boxes per month; QL(1.5 ml daily)
(Insulin Nph (Human) (Isophane)) HUMULIN N SUSP	1	Limit 4 vials per month; QL(1.5 ml daily)
(Insulin Nph Isophane & Reg (Human)) HUMULIN 70/30 KWIKPEN SUPN	1	Limit 45mls per month; QL(1.5 ml daily)
(Insulin Nph Isophane & Reg (Human)) HUMULIN 70/30 SUSP	1	Limit 4 vials per month; QL(1.5 ml daily)
(Insulin Regular (Human)) HUMULIN R U-500 KWIKPEN SOPN	1	Limit 3 boxes per month; QL(1.5 ml daily)
(Insulin Regular (Human)) HUMULIN R, HUMULIN R U-500 (CONCENTRATED) SOLN	1	Limit 4 vials per month; QL(1.5 ml daily)
(Insulin Regular (Human)) HUMULIN R, HUMULIN R U-500 (CONCENTRATED) SOLN	1	Limit 2 vials per month; QL(1.5 ml daily)
HUMALOG SOCT (<i>insulin lispro</i>)	2	Limit 45mls per month; QL(1.5 ml daily)

Drug Name	Drug Tier	Requirements/ Limits
HUMULIN N SUSP (<i>insulin nph (human)</i> (isophane))	2	Limit 45mls per month; QL(1.5 ml daily)
LANTUS SOLN (<i>insulin glargine</i>)	2	Limit 4 vials per month; QL(1.5 ml daily)
LANTUS SOLOSTAR SOPN (<i>insulin glargine</i>)	2	Limit 45mls per month; QL(1.5 ml daily)
LEVEMIR FLEXTOUCH SOPN (<i>insulin detemir</i>)	2	Limit 3 boxes per month; QL(1.5 ml daily)
LEVEMIR SOLN (<i>insulin detemir</i>)	2	Limit 4 vials per month; QL(1.5 ml daily)
TOUJEO MAX SOLOSTAR SOPN (<i>insulin glargine</i>)	2	Limit 3 boxes per month; QL(0.6 ml daily)
TOUJEO SOLOSTAR SOPN (<i>insulin glargine</i>)	2	Limit 3 boxes per month; QL(0.6 ml daily)
TRESIBA FLEXTOUCH SOPN 100 UNIT/ML (<i>insulin degludec</i>)	2	Limit 3 boxes per month; QL(1.5 ml daily)
TRESIBA FLEXTOUCH SOPN 200 UNIT/ML (<i>insulin degludec</i>)	2	Limit 3 boxes per month; QL(0.9 ml daily)
TRESIBA SOLN (<i>insulin degludec</i>)	2	
Meglitinide Analogues		
<i>nateglinide tabs</i>	1	
PRANDIN TABS (<i>repaglinide</i>)	GP	
<i>repaglinide tabs</i>	1	
STARLIX TABS (<i>nateglinide</i>)	GP	
Sodium-Glucose Co-Transporter 2 (SGLT2)		
INVOKANA TABS (<i>canagliflozin</i>)	2	

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

Drug Name	Drug Tier	Requirements/ Limits
JARDIANCE TABS (<i>empagliflozin</i>)	2	
STEGLATRO TABS (<i>ertugliflozin l-pyroglutamic acid</i>)	3	
Sulfonylureas		
(Glipizide) GLIPIZIDE XL TB24	1	
AMARYL TABS (<i>glimepiride</i>)	GP	
<i>glimepiride tabs</i>	1	
<i>glipizide tabs</i>	1	
<i>glipizide tb24</i>	1	
GLUCOTROL TABS (<i>glipizide</i>)	GP	
GLUCOTROL XL TB24 10 MG (<i>glipizide</i>)	NF	
GLUCOTROL XL TB24 5 MG, 2.5 MG (<i>glipizide</i>)	GP	
<i>glyburide micronized tabs</i>	1	
<i>glyburide tabs</i>	1	
GLYNASE TABS (<i>glyburide micronized</i>)	GP	
<i>tolazamide tabs</i>	1	1 bal on hand,
<i>tolbutamide tabs</i>	1	1 bal on hand,
ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea		
Antidiarrheal - Chloride Channel Antagonists		
MYTESI TBEC (<i>crofelemer</i>)	3	PA; QL(2 ea daily)
Antiperistaltic Agents		

Drug Name	Drug Tier	Requirements/ Limits
(Loperamide Hcl) ANTI-DIARRHEAL, TGT LOPERAMIDE HCL, SM ANTI-DIARRHEAL, RA ANTI-DIARRHEAL, QC ANTI-DIARRHEAL, HM LOPERAMIDE HCL, HM ANTI-DIARRHEAL, GNP ANTI-DIARRHEAL, EQ ANTI-DIARRHEAL, CVS ANTI-DIARRHEAL CAPS	1	RX/OTC
<i>diphenoxylate w/ atropine liqd 2.5 mg/5ml-0.025 mg/5ml</i>	1	1 bal on hand,
<i>diphenoxylate w/ atropine tabs 2.5 mg-0.025 mg</i>	1	
IMODIUM A-D CAPS (<i>loperamide hcl</i>)	GP	RX/OTC
LOMOTIL TABS (<i>diphenoxylate w/ atropine</i>)	GP	
<i>loperamide hcl caps</i>	1	RX/OTC
MOTOFEN TABS (<i>difenoxin w/ atropine</i>)	2	
<i>opium tincture tinc</i>	1	
<i>paregoric tinc</i>	1	1 bal on hand,
ANTIDOTES AND SPECIFIC ANTAGONISTS		
Antidotes - Chelating Agents		
CHEMET CAPS (<i>succimer</i>)	3	
<i>deferasirox tabs</i>	SP	PA
<i>deferasirox tbso</i>	SP	PA
EXJADE TBDO (<i>deferasirox</i>)	SP	PA
FERRIPROX TABS 500 MG (<i>deferiprone</i>)	SP	PA
JADENU SPRINKLE PACK (<i>deferasirox</i>)	SP	PA

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

Drug Name	Drug Tier	Requirements/ Limits
JADENU TABS (<i>deferiasirox</i>)	SP	PA
Antidotes and Specific Antagonists		
RADIOGARDASE CAPS (<i>prussian blue insoluble (ferric hexacyanoferrate ii)</i>)	3	
VISTOGARD PACK (<i>uridine triacetate (emergency treatment)</i>)	SP	
Opioid Antagonists		
EVZIO SOAJ 0.4 MG/0.4ML (<i>naloxone hcl</i>)	SP	PA
EVZIO SOAJ 2 MG/0.4ML (<i>naloxone hcl</i>)	SP	PA; 1 bal on hand,
<i>naloxone hcl soaj 2 mg/0.4ml</i>	SP	PA; 1 bal on hand,
<i>naloxone hcl sosy 2 mg/2ml</i>	SP	
<i>naltrexone hcl tabs</i>	1	
NARCAN LIQD (<i>naloxone hcl</i>)	3	Limit 2 boxes per month;QL(4 ea per 30 days retail)
ANTIEMETICS - Drugs to Treat Nausea and Vomiting		
5-HT3 Receptor Antagonists		
ALOXI SOLN (<i>palonosetron hcl</i>)	SP	PA
ANZEMET TABS (<i>dolasetron mesylate</i>)	3	PA; QL(0.07 ea daily)
<i>granisetron hcl tabs</i>	1	QL(2 ea daily)
<i>ondansetron hcl soln 4 mg/5ml</i>	1	PA; Limit 1 bottle per month;QL(1.67 ml daily)
<i>ondansetron hcl tabs 4 mg, 8 mg</i>	1	QL(20 ea per fill retail,60 ea per fill mail)
<i>ondansetron tbdp</i>	1	QL(20 ea per fill retail,60 ea per fill mail)

Drug Name	Drug Tier	Requirements/ Limits
<i>palonosetron hcl soln</i>	SP	PA
PALONOSETRON HYDROCHLORIDE SOLN (<i>palonosetron hcl</i>)	SP	PA
SANCUSO PTCH (<i>granisetron</i>)	3	PA
ZOFRAN ODT TBDP (<i>ondansetron</i>)	GP	QL(20 ea per fill retail,60 ea per fill mail)
ZOFRAN SOLN 4 MG/5ML (<i>ondansetron hcl</i>)	GP	PA; Limit 1 bottle per month;QL(1.67 ml daily)
ZOFRAN TABS 4 MG, 8 MG (<i>ondansetron hcl</i>)	GP	QL(20 ea per fill retail,60 ea per fill mail)
ZUPLENZ FILM (<i>ondansetron</i>)	3	QL(20 ea per fill retail,60 ea per fill mail)
Antiemetics - Anticholinergic		
(Meclizine Hcl) CVS MOTION SICKNESS II, WAL-DRAM II, TRAVEL-EASE, SM MOTION SICKNESS, RA MOTION SICKNESS RELIEF, HM MOTION SICKNESS RELIEF, HM MOTION RELIEF, GNP MOTION SICKNESS RELIEF, EQL MOTION SICKNESS RELIEF, EQ MOTION SICKNESS RELIEF, DRAMAMINE LESS DROWSY TABS	1	RX/OTC
<i>meclizine hcl tabs</i>	1	RX/OTC
<i>scopolamine pt72</i>	1	
TIGAN CAPS (<i>trimethobenzamide hcl</i>)	GP	
TRANSDERM SCOP PT72 (<i>scopolamine</i>)	NF	
TRANSDERM-SCOP PT72 (<i>scopolamine</i>)	NF	

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

Drug Name	Drug Tier	Requirements/ Limits
trimethobenzamide hcl caps	1	
Antiemetics - Miscellaneous		
AKYNZEO CAPS OR 300 MG-0.5 MG (netupitant-palonosetron)	3	QL(2 ea per 28 days retail)
BONJESTA TBCR (doxylamine-pyridoxine)	3	QL(2 ea daily)
CESAMET CAPS (nabilone)	3	PA; QL(2 ea daily)
DICLEGIS TBEC (doxylamine-pyridoxine)	GP	QL(4 ea daily)
doxylamine-pyridoxine tbec	1	QL(4 ea daily)
dronabinol caps	1	
MARINOL CAPS (dronabinol)	GP	
Substance P/Neurokinin 1 (NK1) Receptor		
aprepitant caps	1	QL(3 ea per fill retail,9 ea per fill mail)
aprepitant caps 40 mg, 125 mg	1	QL(2 ea per fill retail,6 ea per fill mail)
aprepitant caps 80 mg, 125 mg	1	QL(1 ea per fill retail,3 ea per fill mail)
EMEND CAPS 40 MG, 125 MG (aprepitant)	GP	QL(2 ea per fill retail,6 ea per fill mail)
EMEND CAPS 80 MG, 125 MG (aprepitant)	GP	QL(1 ea per fill retail,3 ea per fill mail)
EMEND TRIPACK CAPS (aprepitant)	GP	QL(3 ea per fill retail,9 ea per fill mail)
VARUBI TBPK (rolapitant hcl)	3	QL(4 ea per fill retail)
ANTIFUNGALS - Drugs to Treat Fungal Infections		
Antifungal - Glucan Synthesis Inhibitors		

Drug Name	Drug Tier	Requirements/ Limits
CANCIDAS SOLR (caspofungin acetate)	SP	PA
caspofungin acetate solr 50 mg, 70 mg	SP	PA
CASPOFUNGIN ACETATE SOLR 50 MG, 70 MG (caspofungin acetate)	SP	PA
ERAXIS SOLR (anidulafungin)	SP	PA
micafungin sodium solr	SP	PA
MYCAMINE SOLR (micafungin sodium)	SP	PA; 1 bal on hand,
Antifungals		
(Nystatin) BIO-STATIN POWD	1	
ABELCET SUSP (amphotericin b lipid)	SP	PA
AMBISOME SUSR (amphotericin b liposome)	SP	PA
amphotericin b solr	SP	PA; 1 bal on hand,
ANCOBON CAPS (flucytosine)	GP	
BIO-STATIN CAPS 500000 UNIT, 1000000 UNIT (nystatin)	3	
flucytosine caps	1	
griseofulvin microsize susp	1	
griseofulvin microsize tabs	1	
griseofulvin ultramicrosize tabs	1	
nystatin tabs	1	
terbinafine hcl tabs	1	QL(90 ea per 365 days retail,90 ea per 365 days mail)
Imidazole-Related Antifungals		

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

Drug Name	Drug Tier	Requirements/ Limits
CRESEMBA CAPS (<i>isavuconazonium sulfate</i>)	3	
DIFLUCAN SUSR (<i>fluconazole</i>)	GP	
DIFLUCAN TABS (<i>fluconazole</i>)	GP	
<i>fluconazole in dextrose soln</i>	SP	PA
<i>fluconazole susr</i>	1	
<i>fluconazole tabs</i>	1	
<i>itraconazole caps</i>	1	PA
<i>itraconazole soln</i>	1	PA
<i>ketoconazole tabs</i>	1	
NOXAFIL SUSP 40 MG/ML (<i>posaconazole</i>)	3	
NOXAFIL TBEC 100 MG (<i>posaconazole</i>)	GP	
<i>posaconazole tbec</i>	1	
SPORANOX CAPS (<i>itraconazole</i>)	GP	PA
SPORANOX PULSEPAK CAPS (<i>itraconazole</i>)	GP	PA
SPORANOX SOLN (<i>itraconazole</i>)	GP	PA
TOLSURA CAPS (<i>itraconazole</i>)	SP	PA
VFEND SUSR (<i>voriconazole</i>)	GP	
VFEND TABS (<i>voriconazole</i>)	GP	
<i>voriconazole susr or 40 mg/ml</i>	1	
<i>voriconazole tabs or 50 mg, 200 mg</i>	1	
ANTIHISTAMINES - Drugs to Treat Allergies		
Antihistamines - Alkylamines		

Drug Name	Drug Tier	Requirements/ Limits
(Dexchlorpheniramine Maleate) RYCLORA SOLN	1	1 bal on hand,
<i>brompheniramine tannate chew</i>	1	1 bal on hand,
<i>dexchlorpheniramine maleate soln</i>	1	1 bal on hand,
Antihistamines - Ethanolamines		
(Diphenhydramine Hcl) BANOPHEN, PHARBEDRYL, KP DIPHENHYDRAMINE HCL CAPS	1	
(Diphenhydramine Hcl) DIPHEN, EQ ALLERGY RELIEF CHILDRENS ELIX	1	RX/OTC
<i>carbinoxamine maleate soln 4 mg/5ml</i>	1	
<i>carbinoxamine maleate soln 4 mg/5ml</i>	1	1 bal on hand,
<i>carbinoxamine maleate tabs 4 mg</i>	1	
<i>carbinoxamine maleate tabs 4 mg</i>	1	1 bal on hand,
<i>clemastine fumarate tabs</i>	1	1 bal on hand,
<i>diphenhydramine hcl caps or 50 mg</i>	1	
<i>diphenhydramine hcl elix or 12.5 mg/5ml</i>	1	RX/OTC
<i>diphenhydramine hcl soln ij 50 mg/ml</i>	SP	PA
KARBINAL ER SUER (<i>carbinoxamine maleate</i>)	3	
Antihistamines - Non-Sedating		

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

Drug Name	Drug Tier	Requirements/ Limits
(Cetirizine Hcl) ALL DAY ALLERGY CHILDRENS, WAL-ZYR CHILDRENS, WAL-ZYR ALL DAY ALLERGYCHILDRENS, WAL-ZYR ALL DAY ALLERGY CHILDRENS, WAL-ZYR, TGT ALL DAY ALLERGY RELIEF CHILDRENS, SM ALL DAY ALLERGY CHILDRENS, SB CETIRIZINE HCL CHILDRENS, RA CETIRIZINE HCL CHILDRENS ALLERGY, RA ALLERGY RELIEF CHILDRENS, QC CHILDRENS ALLERGY, PX CHILDRENS ALLERGY, KLS ALLER-TEC CHILDRENS, HM CETIRIZINE HCL CHILDRENS, HM ALL DAY ALLERGY CHILDRENS, GOODSENSE ALL DAY ALLERGYCHILDRENS, GNP ALL DAY ALLERGY CHILDRENS, EQL ALL DAY ALLERGY CHILDRENS, EQ ALLERGY RELIEF CHILDRENS, CVS ALLERGY RELIEF CHILDRENS, CETIRIZINE HYDROCHLORIDECHILDRENS ALLERGY, CETIRIZINE HCL HIVES RELIEF CHILDRENS, CETIRIZINE HCL CHILDRENSALLERGY, CETIRIZINE HCL CHILDRENS, CETIRIZINE HCL ALLERGY CHILDRENS, ALLERGY RELIEF CHILDRENS, ALL-DAY ALLERGY CHILDRENS SOLN	1	RX/OTC
(Cetirizine Hcl) EQ ALLERGY RELIEF SOLN OR 1 MG/ML	1	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
(Cetirizine Hcl) QC ALLERGY RELIEF CHILDRENS, RA ALLERGY RELIEF CHILDRENS SYRP	1	RX/OTC
(Levocetirizine Dihydrochloride) ALLERGY RELIEF 24HR, CVS ALLERGY RELIEF TABS	1	RX/OTC
cetirizine hcl soln	1	RX/OTC
CLARINEX SYRP 0.5 MG/ML (desloratadine)	3	
CLARINEX TABS 5 MG (desloratadine)	GP	PA; QL(1 ea daily)
desloratadine tabs 5 mg	1	PA; QL(1 ea daily)
desloratadine tbdp 5 mg, 2.5 mg	1	1 bal on hand,
levocetirizine dihydrochloride tabs or	1	RX/OTC
XYZAL ALLERGY 24HR TABS (levocetirizine dihydrochloride)	GP	RX/OTC
ZYRTEC CHILDRENS ALLERGY SOLN (cetirizine hcl)	GP	RX/OTC
Antihistamines - Phenothiazines		
(Promethazine Hcl) PHENADOZ SUPP	1	
(Promethazine Hcl) PROMETHEGAN SUPP 25 MG, 12.5 MG	1	
(Promethazine Hcl) PROMETHEGAN SUPP 50 MG, 12.5 MG	1	1 bal on hand,
PHENERGAN SOLN (promethazine hcl)	SP	PA
promethazine hcl soln ij 25 mg/ml, 50 mg/ml	SP	PA
promethazine hcl soln or 6.25 mg/5ml	1	

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

Drug Name	Drug Tier	Requirements/ Limits
<i>promethazine hcl supp re 25 mg, 50 mg, 12.5 mg</i>	1	
<i>promethazine hcl syrp or 6.25 mg/5ml</i>	1	
<i>promethazine hcl tabs or 25 mg, 50 mg, 12.5 mg</i>	1	
Antihistamines - Piperidines		
<i>cyproheptadine hcl syrp</i>	1	
<i>cyproheptadine hcl tabs</i>	1	
ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol		
Antihyperlipidemics - Combinations		
<i>ezetimibe-simvastatin tabs</i>	1	QL(1 ea daily)
VYTORIN TABS 10 MG-10 MG (<i>ezetimibe-simvastatin</i>)	NF	QL(1 ea daily)
VYTORIN TABS 10 MG-20 MG, 40 MG-10 MG, 80 MG-10 MG (<i>ezetimibe-simvastatin</i>)	GP	QL(1 ea daily)
Antihyperlipidemics - Misc.		
(Omega-3-Acid Ethyl Esters) TRIKLO CAPS	1	
LOVAZA CAPS (<i>omega-3-acid ethyl esters</i>)	GP	
<i>omega-3-acid ethyl esters caps</i>	1	
VASCEPA CAPS (<i>icosapent ethyl</i>)	3	ST
Bile Acid Sequestrants		
(Cholestyramine Light) PREVALITE PACK	1	
(Cholestyramine Light) PREVALITE POWD	1	
<i>cholestyramine light pack</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
<i>cholestyramine light powd</i>	1	
<i>cholestyramine pack</i>	1	
<i>cholestyramine powd</i>	1	
<i>colesevelam hcl pack</i>	1	
<i>colesevelam hcl tabs</i>	1	
COLESTID FLAVORED GRAN (<i>colestipol hcl</i>)	GP	
COLESTID FLAVORED PACK (<i>colestipol hcl</i>)	GP	
COLESTID GRAN (<i>colestipol hcl</i>)	GP	
COLESTID PACK (<i>colestipol hcl</i>)	GP	
COLESTID TABS (<i>colestipol hcl</i>)	GP	
<i>colestipol hcl gran</i>	1	
<i>colestipol hcl pack</i>	1	
<i>colestipol hcl tabs</i>	1	
QUESTRAN LIGHT POWD (<i>cholestyramine light</i>)	GP	
QUESTRAN PACK (<i>cholestyramine</i>)	GP	
QUESTRAN POWD (<i>cholestyramine</i>)	GP	
WELCHOL PACK (<i>colesevelam hcl</i>)	GP	
WELCHOL TABS (<i>colesevelam hcl</i>)	GP	
Fibric Acid Derivatives		
ANTARA CAPS (<i>fenofibrate micronized</i>)	3	
<i>choline fenofibrate cpdr</i>	1	
<i>fenofibrate caps 50 mg, 150 mg</i>	1	1 bal on hand,

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

Drug Name	Drug Tier	Requirements/ Limits
<i>fenofibrate micronized caps</i>	1	
<i>fenofibrate tabs 160 mg</i>	1	1 bal on hand,
FENOFIBRATE TABS 160 MG (<i>fenofibrate</i>)	3	1 bal on hand,
<i>fenofibrate tabs 48 mg, 54 mg, 145 mg, 160 mg</i>	1	
FENOFIBRIC ACID TABS 105 MG (<i>fenofibric acid</i>)	3	
<i>fenofibric acid tabs 35 mg, 105 mg</i>	1	1 bal on hand,
FIBRICOR TABS 35 MG, 105 MG (<i>fenofibric acid</i>)	3	
FIBRICOR TABS 35 MG, 105 MG (<i>fenofibric acid</i>)	3	1 bal on hand,
<i>gemfibrozil tabs</i>	1	
LIPOFEN CAPS (<i>fenofibrate</i>)	3	1 bal on hand,
LOPID TABS (<i>gemfibrozil</i>)	GP	
TRICOR TABS (<i>fenofibrate</i>)	GP	
TRIGLIDE TABS (<i>fenofibrate</i>)	3	
TRILIPIX CPDR (<i>choline fenofibrate</i>)	GP	
HMG CoA Reductase Inhibitors		
ADVICOR TB24 20 MG-1000 MG (<i>niacin-lovastatin</i>)	2	
ADVICOR TB24 40 MG-1000 MG (<i>niacin-lovastatin</i>)	2	QL(1 ea daily)
ALTOPREV TB24 (<i>lovastatin</i>)	3	
<i>atorvastatin calcium tabs</i>	1	QL(1 ea daily)
CRESTOR TABS (<i>rosuvastatin calcium</i>)	NF	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>fluvastatin sodium caps</i>	1	QL(1 ea daily)
<i>fluvastatin sodium tb24</i>	1	QL(1 ea daily)
LESCOL XL TB24 (<i>fluvastatin sodium</i>)	GP	QL(1 ea daily)
LIPITOR TABS (<i>atorvastatin calcium</i>)	NF	QL(1 ea daily)
LIVALO TABS (<i>pitavastatin calcium</i>)	3	ST; QL(1 ea daily)
<i>lovastatin tabs</i>	1	\$0 copay, age 40 to 76;PV
PRAVACHOL TABS 20 MG, 80 MG (<i>pravastatin sodium</i>)	GP	QL(1 ea daily)
PRAVACHOL TABS 40 MG, 80 MG (<i>pravastatin sodium</i>)	GP	QL(2 ea daily)
<i>pravastatin sodium tabs 10 mg, 20 mg, 80 mg</i>	1	QL(1 ea daily)
<i>pravastatin sodium tabs 40 mg, 80 mg</i>	1	QL(2 ea daily)
<i>rosuvastatin calcium tabs</i>	1	QL(1 ea daily)
SIMCOR TB24 (<i>niacin-simvastatin</i>)	2	
<i>simvastatin tabs 5 mg, 10 mg, 20 mg, 40 mg, 80 mg</i>	1	QL(1 ea daily)
ZOCOR TABS (<i>simvastatin</i>)	GP	QL(1 ea daily)
Intestinal Cholesterol Absorption Inhibitors		
<i>ezetimibe tabs</i>	1	
ZETIA TABS (<i>ezetimibe</i>)	GP	
Microsomal Triglyceride Transfer Protein (MTP)		
JUXTAPID CAPS (<i>lomitapide mesylate</i>)	SP	PA
Nicotinic Acid Derivatives		

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

Drug Name	Drug Tier	Requirements/ Limits
<i>niacin (antihyperlipidemic) tbc</i>	1	
NIASPAN TBCR (<i>niacin (antihyperlipidemic)</i>)	GP	
Proprotein Convertase Subtilisin/Kexin Type 9		
PRALUENT SOAJ (<i>alirocumab</i>)	SP	PA
REPATHA PUSHTRONEX SYSTEM SOCT (<i>evolocumab</i>)	SP	PA
REPATHA SOSY (<i>evolocumab</i>)	SP	PA
REPATHA SURECLICK SOAJ (<i>evolocumab</i>)	SP	PA
ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure		
ACE Inhibitors		
ACCUPRIL TABS 10 MG (<i>quinapril hcl</i>)	NF	
ACCUPRIL TABS 5 MG, 20 MG, 40 MG (<i>quinapril hcl</i>)	GP	
ALTACE CAPS 10 MG, 1.25 MG (<i>ramipril</i>)	GP	QL(2 ea daily)
ALTACE CAPS 2.5 MG (<i>ramipril</i>)	NF	QL(1 ea daily)
ALTACE CAPS 5 MG, 1.25 MG (<i>ramipril</i>)	GP	QL(1 ea daily)
<i>benazepril hcl tabs</i>	1	
<i>captopril tabs</i>	1	
<i>enalapril maleate tabs</i>	1	QL(2 ea daily)
EPANED SOLN (<i>enalapril maleate</i>)	3	QL(5 ml daily)
<i>fosinopril sodium tabs</i>	1	
<i>lisinopril tabs</i>	1	
LOTENSIN TABS (<i>benazepril hcl</i>)	GP	

Drug Name	Drug Tier	Requirements/ Limits
<i>moexipril hcl tabs</i>	1	
<i>perindopril erbumine tabs</i>	1	
PRINIVIL TABS (<i>lisinopril</i>)	GP	
QBRELIS SOLN (<i>lisinopril</i>)	3	Limited to 1 bottle per month.;QL(5 ml daily)
<i>quinapril hcl tabs</i>	1	
<i>ramipril caps 10 mg, 2.5 mg, 1.25 mg</i>	1	QL(2 ea daily)
<i>ramipril caps 5 mg, 2.5 mg, 1.25 mg</i>	1	QL(1 ea daily)
<i>trandolapril tabs</i>	1	
VASOTEC TABS (<i>enalapril maleate</i>)	GP	QL(2 ea daily)
ZESTRIL TABS (<i>lisinopril</i>)	GP	
Agents for Pheochromocytoma		
DEMSEER CAPS (<i>metirosine</i>)	3	
DIBENZYLIN CAPS (<i>phenoxybenzamine hcl</i>)	GP	
<i>phenoxybenzamine hcl caps</i>	1	
Angiotensin II Receptor Antagonists		
ATACAND TABS (<i>candesartan cilexetil</i>)	GP	
AVAPRO TABS (<i>irbesartan</i>)	GP	
BENICAR TABS (<i>olmesartan medoxomil</i>)	NF	
<i>candesartan cilexetil tabs</i>	1	
COZAAR TABS (<i>losartan potassium</i>)	GP	

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

Drug Name	Drug Tier	Requirements/ Limits
DIOVAN TABS (<i>valsartan</i>)	GP	
EDARBI TABS (<i>azilsartan medoxomil</i>)	3	
<i>eprosartan mesylate tabs</i>	1	1 bal on hand,
<i>irbesartan tabs</i>	1	
<i>losartan potassium tabs</i>	1	
MICARDIS TABS (<i>telmisartan</i>)	GP	
<i>olmesartan medoxomil tabs</i>	1	
<i>telmisartan tabs</i>	1	
<i>valsartan tabs</i>	1	
Antiadrenergic Antihypertensives		
CARDURA TABS (<i>doxazosin mesylate</i>)	GP	
CATAPRES TABS (<i>clonidine hcl</i>)	GP	
CATAPRES-TTS-1 PTWK (<i>clonidine</i>)	GP	
CATAPRES-TTS-2 PTWK (<i>clonidine</i>)	GP	
CATAPRES-TTS-3 PTWK (<i>clonidine</i>)	GP	
<i>clonidine hcl tabs</i>	1	
<i>clonidine ptwk</i>	1	
<i>doxazosin mesylate tabs</i>	1	
<i>guanfacine hcl tabs</i>	1	
<i>methyldopa tabs</i>	1	
<i>methyldopate hcl soln</i>	SP	PA; 1 bal on hand,
MINIPRESS CAPS (<i>prazosin hcl</i>)	GP	

Drug Name	Drug Tier	Requirements/ Limits
<i>prazosin hcl caps</i>	1	
<i>terazosin hcl caps</i>	1	
Antihypertensive Combinations		
ACCURETIC TABS (<i>quinapril-hydrochlorothiazide</i>)	GP	
<i>amlodipine besylate-benazepril hcl caps</i>	1	
<i>amlodipine besylate-olmesartan medoxomil tabs</i>	1	
<i>amlodipine besylate-valsartan tabs</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tabs</i>	1	
ATACAND HCT TABS (<i>candesartan cilexetil-hydrochlorothiazide</i>)	GP	
<i>atenolol & chlorthalidone tabs</i>	1	
AVALIDE TABS (<i>irbesartan-hydrochlorothiazide</i>)	GP	
AZOR TABS 20 MG-5 MG, 40 MG-5 MG, 20 MG-10 MG (<i>amlodipine besylate-olmesartan medoxomil</i>)	GP	
AZOR TABS 40 MG-10 MG (<i>amlodipine besylate-olmesartan medoxomil</i>)	NF	
<i>benazepril & hydrochlorothiazide tabs</i>	1	
BENICAR HCT TABS 20 MG-12.5 MG (<i>olmesartan medoxomil-hydrochlorothiazide</i>)	GP	

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

Drug Name	Drug Tier	Requirements/ Limits
BENICAR HCT TABS 40 MG-25 MG, 40 MG-12.5 MG (<i>olmesartan medoxomil-hydrochlorothiazide</i>)	NF	
<i>bisoprolol & hydrochlorothiazide tabs</i>	1	
BYVALSON TABS (<i>nebivolol-valsartan</i>)	3	
<i>candesartan cilexetil-hydrochlorothiazide tabs</i>	1	
<i>captopril & hydrochlorothiazide tabs</i>	1	1 bal on hand,
CORZIDE TABS 40 MG-5 MG (<i>nadolol & bendroflumethiazide</i>)	3	
CORZIDE TABS 80 MG-5 MG (<i>nadolol & bendroflumethiazide</i>)	3	
DIOVAN HCT TABS 160 MG-25 MG, 80 MG-12.5 MG, 160 MG-12.5 MG, 320 MG-12.5 MG (<i>valsartan-hydrochlorothiazide</i>)	GP	
DIOVAN HCT TABS 320 MG-25 MG (<i>valsartan-hydrochlorothiazide</i>)	NF	
DUTOPROL TB24 (<i>metoprolol & hydrochlorothiazide</i>)	3	
EDARBYCLOR TABS (<i>azilsartan medoxomil-chlorthalidone</i>)	3	
<i>enalapril maleate & hydrochlorothiazide tabs</i>	1	
EXFORGE HCT TABS (<i>amlodipine-valsartan-hydrochlorothiazide</i>)	GP	

Drug Name	Drug Tier	Requirements/ Limits
EXFORGE TABS (<i>amlodipine besylate-valsartan</i>)	GP	
<i>fosinopril sodium & hydrochlorothiazide tabs</i>	1	
HYZAAR TABS (<i>losartan potassium & hydrochlorothiazide</i>)	GP	
<i>irbesartan-hydrochlorothiazide tabs</i>	1	
<i>lisinopril & hydrochlorothiazide tabs</i>	1	
LOPRESSOR HCT TABS (<i>metoprolol & hydrochlorothiazide</i>)	GP	
<i>losartan potassium & hydrochlorothiazide tabs</i>	1	
LOTENSIN HCT TABS (<i>benazepril & hydrochlorothiazide</i>)	GP	
LOTREL CAPS (<i>amlodipine besylate-benazepril hcl</i>)	GP	
<i>methyldopa & hydrochlorothiazide tabs</i>	1	1 bal on hand,
<i>metoprolol & hydrochlorothiazide tabs 100 mg-50 mg</i>	1	1 bal on hand,
<i>metoprolol & hydrochlorothiazide tabs 50 mg-25 mg, 100 mg-25 mg</i>	1	
METOPROLOL SUCCINATE ER/HYDROCHLOROTHIAZIDE TB24 (<i>metoprolol & hydrochlorothiazide</i>)	3	

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

Drug Name	Drug Tier	Requirements/ Limits
MICARDIS HCT TABS (<i>telmisartan-hydrochlorothiazide</i>)	GP	
<i>moexipril-hydrochlorothiazide tabs</i>	1	
<i>nadolol & bendroflumethiazide tabs</i>	1	1 bal on hand,
<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide tabs</i>	1	
<i>olmesartan medoxomil-hydrochlorothiazide tabs</i>	1	
<i>propranolol & hydrochlorothiazide tabs</i>	1	1 bal on hand,
<i>quinapril-hydrochlorothiazide tabs</i>	1	
TARKA TBCR (<i>trandolapril-verapamil hcl</i>)	GP	
TEKTURNA HCT TABS (<i>aliskiren-hydrochlorothiazide</i>)	3	
<i>telmisartan-amlodipine tabs</i>	1	
<i>telmisartan-hydrochlorothiazide tabs</i>	1	
TENORETIC 100 TABS (<i>atenolol & chlorthalidone</i>)	GP	
TENORETIC 50 TABS (<i>atenolol & chlorthalidone</i>)	GP	

Drug Name	Drug Tier	Requirements/ Limits
<i>trandolapril-verapamil hcl tbc</i> 1 mg-240 mg, 2 mg-240 mg, 4 mg-240 mg	1	1 bal on hand,
<i>trandolapril-verapamil hcl tbc</i> 2 mg-180 mg, 2 mg-240 mg, 4 mg-240 mg	1	
TRIBENZOR TABS (<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>)	GP	
TWYNSTA TABS (<i>telmisartan-amlodipine</i>)	GP	
<i>valsartan-hydrochlorothiazide tabs</i>	1	
VASERETIC TABS (<i>enalapril maleate & hydrochlorothiazide</i>)	GP	
ZESTORETIC TABS (<i>lisinopril & hydrochlorothiazide</i>)	GP	
ZIAC TABS (<i>bisoprolol & hydrochlorothiazide</i>)	GP	
Antihypertensives - Misc.		
VECAMEYL TABS (<i>mecamylamine hcl</i>)	SP	PA
Direct Renin Inhibitors		
<i>aliskiren fumarate tabs</i>	1	
TEKTURNA TABS 150 MG, 300 MG, 300 MG (<i>aliskiren fumarate</i>)	3	
TEKTURNA TABS 150 MG, 300 MG, 300 MG (<i>aliskiren fumarate</i>)	3	1 bal on hand,
Selective Aldosterone Receptor Antagonists		
<i>eplerenone tabs</i>	1	

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

Drug Name	Drug Tier	Requirements/ Limits
INSPIRA TABS (<i>eplerenone</i>)	GP	
Vasodilators		
<i>hydralazine hcl soln ij 20 mg/ml</i>	SP	PA
<i>hydralazine hcl tabs or 10 mg, 25 mg, 50 mg, 100 mg</i>	1	
<i>minoxidil tabs</i>	1	
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)		
Antimalarial Combinations		
<i>atovaquone-proguanil hcl tabs</i>	1	
COARTEM TABS (<i>artemether-lumefantrine</i>)	2	QL(0.8 ea daily)
MALARONE TABS (<i>atovaquone-proguanil hcl</i>)	GP	
Antimalarials		
<i>chloroquine phosphate tabs 250 mg, 500 mg</i>	1	
<i>chloroquine phosphate tabs 500 mg, 500 mg</i>	1	1 bal on hand,
DARAPRIM TABS (<i>pyrimethamine</i>)	3	PA; 1 bal on hand,
<i>hydroxychloroquine sulfate tabs</i>	1	
KRINTAFEL TABS (<i>tafenoquine succinate</i>)	2	QL(2 ea per 30 days retail)
<i>mefloquine hcl tabs</i>	1	QL(6 ea per fill retail)1 bal on hand,
PLAQUENIL TABS (<i>hydroxychloroquine sulfate</i>)	1	
<i>primaquine phosphate tabs</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
PRIMAQUINE PHOSPHATE TABS (<i>primaquine phosphate</i>)	GP	
<i>pyrimethamine tabs</i>	1	PA
QUALAQUIN CAPS (<i>quinine sulfate</i>)	GP	PA; QL(42 ea per 7 days retail)
<i>quinine sulfate caps</i>	1	PA; QL(42 ea per 7 days retail)
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
Antimyasthenic/Cholinergic Agents		
FIRDAPSE TABS (<i>amifampridine phosphate</i>)	SP	PA
GUANIDINE HCL TABS (<i>guanidine hcl</i>)	2	
MESTINON SOLN 60 MG/5ML (<i>pyridostigmine bromide</i>)	GP	PA
MESTINON TABS 60 MG (<i>pyridostigmine bromide</i>)	GP	
MESTINON TIMESPAN TBCR (<i>pyridostigmine bromide</i>)	GP	
<i>pyridostigmine bromide soln 60 mg/5ml</i>	1	PA
<i>pyridostigmine bromide tabs 60 mg</i>	1	
<i>pyridostigmine bromide tbc 180 mg</i>	1	
RUZURGI TABS (<i>amifampridine</i>)	SP	PA; QL(10 ea daily)
ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)		
Anti TB Combinations		
RIFAMATE CAPS (<i>isoniazid & rifampin</i>)	2	

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

Drug Name	Drug Tier	Requirements/ Limits
RIFATER TABS (<i>isoniazid-rifampin w/ pyrazinamide</i>)	3	
Antimycobacterial Agents		
CAPASTAT SULFATE SOLR (<i>capreomycin sulfate</i>)	SP	PA
<i>cycloserine caps</i>	1	
<i>ethambutol hcl tabs</i>	1	
<i>isoniazid soln ij 100 mg/ml</i>	SP	PA; 1 bal on hand,
<i>isoniazid syrp or 50 mg/5ml</i>	1	1 bal on hand,
ISONIAZID TABS OR 100 MG (<i>isoniazid</i>)	2	
<i>isoniazid tabs or 100 mg, 300 mg</i>	1	
MYAMBUTOL TABS (<i>ethambutol hcl</i>)	GP	
MYCOBUTIN CAPS (<i>rifabutin</i>)	GP	
PASER PACK (<i>aminosalicylic acid</i>)	3	
PRIFTIN TABS (<i>rifapentine</i>)	3	
<i>pyrazinamide tabs</i>	1	
<i>rifabutin caps</i>	1	
RIFADIN CAPS OR 150 MG, 300 MG (<i>rifampin</i>)	GP	
RIFADIN SOLR IV 600 MG (<i>rifampin</i>)	SP	PA
<i>rifampin caps or 150 mg, 300 mg</i>	1	
<i>rifampin solr iv 600 mg</i>	SP	PA
SIRTURO TABS (<i>bedaquiline fumarate</i>)	SP	
TRECTOR TABS (<i>ethionamide</i>)	2	

Drug Name	Drug Tier	Requirements/ Limits
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer		
Alkylating Agents		
ALKERAN SOLR IV 50 MG (<i>melphalan hcl</i>)	AC	PA
ALKERAN TABS OR 2 MG (<i>melphalan</i>)	AC	
<i>busulfan soln</i>	AC	PA
BUSULFEX SOLN (<i>busulfan</i>)	AC	PA
<i>cyclophosphamide caps 25 mg, 50 mg, 50 mg</i>	AC	
<i>cyclophosphamide caps 25 mg, 50 mg, 50 mg</i>	AC	1 bal on hand,
GLEOSTINE CAPS (<i>lomustine</i>)	AC	PA
HEXALEN CAPS (<i>altretamine</i>)	AC	
LEUKERAN TABS (<i>chlorambucil</i>)	AC	
<i>melphalan hcl solr</i>	AC	PA
<i>melphalan tabs</i>	AC	
MYLERAN TABS (<i>busulfan</i>)	AC	
TEMODAR CAPS (<i>temozolomide</i>)	AC	
<i>temozolomide caps</i>	AC	
TEPADINA SOLR (<i>thiotepa</i>)	AC	
TEPADINA SOLR (<i>thiotepa</i>)	AC	1 bal on hand,
<i>thiotepa solr</i>	AC	
ZANOSAR SOLR (<i>streptozocin</i>)	AC	PA
Antimetabolites		

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

Drug Name	Drug Tier	Requirements/ Limits
(Fluorouracil) ADRUCIL SOLN	AC	PA
ALIMTA SOLR (<i>pemetrexed disodium</i>)	AC	PA
ARRANON SOLN (<i>nelarabine</i>)	AC	PA
<i>azacitidine susr</i>	AC	PA
<i>capecitabine tabs</i>	AC	
<i>cladribine soln</i>	AC	PA
<i>clofarabine soln</i>	AC	PA
CLOLAR SOLN (<i>clofarabine</i>)	AC	PA
<i>cytarabine soln 100 mg/ml</i>	AC	PA
<i>cytarabine soln 20 mg/ml</i>	SP	PA; 1 bal on hand,
DACOGEN SOLR (<i>decitabine</i>)	AC	PA
<i>decitabine solr</i>	AC	PA
<i>floxuridine solr</i>	AC	PA
<i>fludarabine phosphate soln</i>	AC	PA
<i>fludarabine phosphate solr</i>	AC	PA
<i>fluorouracil soln</i>	AC	PA
<i>gemcitabine hcl soln 1 gm/10ml, 2 gm/20ml, 200 mg/2ml</i>	AC	PA; 1 bal on hand,
<i>gemcitabine hcl solr 1 gm, 200 mg</i>	AC	PA
GEMCITABINE HYDROCHLORIDE SOLN 1 GM/10ML, 2 GM/20ML, 200 MG/2ML (<i>gemcitabine hcl</i>)	AC	PA; 1 bal on hand,

Drug Name	Drug Tier	Requirements/ Limits
GEMCITABINE HYDROCHLORIDE SOLN 1.5 GM/15ML (<i>gemcitabine hcl</i>)	AC	PA
GEMZAR SOLR (<i>gemcitabine hcl</i>)	AC	PA
<i>mercaptopurine tabs</i>	AC	
<i>methotrexate sodium soln ij 25 mg/ml, 1 gm/40ml, 50 mg/2ml, 250 mg/10ml</i>	SP	
<i>methotrexate sodium soln ij 250 mg/10ml, 250 mg/10ml</i>	SP	1 bal on hand,
<i>methotrexate sodium solr ij 1 gm</i>	SP	
<i>methotrexate sodium tabs or 2.5 mg</i>	1	
PURIXAN SUSP (<i>mercaptopurine</i>)	AC	PA; AL(Up to 13 yrs old)
TABLOID TABS (<i>thioguanine</i>)	AC	
TREXALL TABS (<i>methotrexate sodium</i>)	3	
VIDAZA SUSR (<i>azacitidine</i>)	AC	PA
XATMEP SOLN (<i>methotrexate</i>)	AC	PA
XELODA TABS (<i>capecitabine</i>)	AC	
Antineoplastic - Antibodies		
ARZERRA CONC (<i>ofatumumab</i>)	AC	PA
CAMPATH SOLN (<i>alemtuzumab</i>)	AC	PA
ERBITUX SOLN (<i>cetuximab</i>)	AC	PA
RITUXAN SOLN (<i>rituximab</i>)	AC	PA
YERVOY SOLN (<i>ipilimumab</i>)	AC	PA

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

Drug Name	Drug Tier	Requirements/ Limits
Antineoplastic - BCL-2 Inhibitors		
VENCLEXTA STARTING PACK TBPk (<i>venetoclax</i>)	AC	PA
VENCLEXTA TABS (<i>venetoclax</i>)	AC	PA
Antineoplastic - Hedgehog Pathway Inhibitors		
DAURISMO TABS (<i>glasdegib maleate</i>)	AC	PA
ERIVEDGE CAPS (<i>vismodegib</i>)	AC	PA
ODOMZO CAPS (<i>sonidegib phosphate</i>)	AC	PA
Antineoplastic - Hormonal and Related Agents		
<i>abiraterone acetate tabs</i>	AC	PA
<i>anastrozole tabs</i>	AC	
ARIMIDEX TABS (<i>anastrozole</i>)	AC	
AROMASIN TABS (<i>exemestane</i>)	AC	
<i>bicalutamide tabs</i>	AC	
CASODEX TABS (<i>bicalutamide</i>)	AC	
DEPO-PROVERA SUSP (<i>medroxyprogesterone acetate (antineoplastic)</i>)	SP	PA
ELIGARD KIT (<i>leuprolide acetate (3 month)</i>)	AC	PA
ELIGARD KIT (<i>leuprolide acetate (4 month)</i>)	AC	PA
ELIGARD KIT (<i>leuprolide acetate (6 month)</i>)	AC	PA
ELIGARD KIT (<i>leuprolide acetate</i>)	AC	PA
EMCYT CAPS (<i>estramustine phosphate sodium</i>)	AC	

Drug Name	Drug Tier	Requirements/ Limits
ERLEADA TABS (<i>apalutamide</i>)	AC	PA
<i>exemestane tabs</i>	AC	
FARESTON TABS (<i>toremifene citrate</i>)	AC	
FEMARA TABS (<i>letrozole</i>)	AC	
FENSOLVI KIT (<i>leuprolide acetate (6 month)</i>)	AC	PA
FIRMAGON SOLR (<i>degarelix acetate</i>)	AC	PA
<i>flutamide caps</i>	AC	
<i>letrozole tabs</i>	AC	
<i>leuprolide acetate kit</i>	AC	PA
LEUPROLIDE ACETATE/BUPIVACAINE HYDROCHLORIDE SOLN (<i>leuprolide acetate-bupivacaine hcl</i>)	AC	PA
LUPRON DEPOT (1-MONTH) KIT 3.75 MG (leuprolide acetate)	SP	PA
LUPRON DEPOT (1-MONTH) KIT 7.5 MG (leuprolide acetate)	AC	PA
LUPRON DEPOT (3-MONTH) KIT 11.25 MG (leuprolide acetate (3 month))	SP	PA
LUPRON DEPOT (3-MONTH) KIT 22.5 MG (leuprolide acetate (3 month))	AC	PA
LUPRON DEPOT (4-MONTH) KIT (leuprolide acetate (4 month))	AC	PA
LUPRON DEPOT (6-MONTH) KIT (leuprolide acetate (6 month))	AC	PA

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

Drug Name	Drug Tier	Requirements/ Limits
LYSODREN TABS (<i>mitotane</i>)	AC	
<i>megestrol acetate susp</i> 40 mg/ml, 400 mg/10ml	1	
<i>megestrol acetate tabs</i> 20 mg, 40 mg	AC	
NILANDRON TABS (<i>nilutamide</i>)	AC	
<i>nilutamide tabs</i>	AC	
NUBEQA TABS (<i>darolutamide</i>)	AC	PA
SOLTAMOX SOLN (<i>tamoxifen citrate</i>)	AC	
<i>tamoxifen citrate tabs</i>	PV	PV
<i>toremifene citrate tabs</i>	AC	
TRELSTAR MIXJECT SUSR (<i>triptorelin pamoate</i>)	AC	PA
XTANDI CAPS (<i>enzalutamide</i>)	AC	PA
YONSA TABS (<i>abiraterone acetate</i>)	AC	PA
ZYTIGA TABS 250 MG (<i>abiraterone acetate</i>)	AC	PA
ZYTIGA TABS 500 MG (<i>abiraterone acetate</i>)	AC	PA
Antineoplastic - Immunomodulators		
POMALYST CAPS (<i>pomalidomide</i>)	AC	PA
Antineoplastic - XPO1 Inhibitors		
XPOVIO 100 MG ONCE WEEKLY TBPB (<i>selinexor</i>)	AC	PA
XPOVIO 60 MG ONCE WEEKLY TBPB (<i>selinexor</i>)	AC	PA
XPOVIO 80 MG ONCE WEEKLY TBPB (<i>selinexor</i>)	AC	PA

Drug Name	Drug Tier	Requirements/ Limits
XPOVIO 80 MG TWICE WEEKLY TBPB (<i>selinexor</i>)	AC	PA
Antineoplastic Antibiotics		
<i>mitoxantrone hcl conc</i>	SP	PA
Antineoplastic Combinations		
KISQALI FEMARA 200 DOSE TBPB (<i>ribociclib succinate-letrozole</i>)	AC	PA
KISQALI FEMARA 400 DOSE TBPB (<i>ribociclib succinate-letrozole</i>)	AC	PA
KISQALI FEMARA 600 DOSE TBPB (<i>ribociclib succinate-letrozole</i>)	AC	PA
LONSURF TABS (<i>trifluridine-tipiracil</i>)	AC	PA
RITUXAN HYCELA SOLN (<i>rituximab-hyaluronidase human</i>)	AC	PA
Antineoplastic Enzyme Inhibitors		
AFINITOR DISPERZ TBSO (<i>everolimus</i>)	AC	PA; QL(1 ea daily)
AFINITOR TABS 10 MG (<i>everolimus</i>)	AC	PA; QL(1 ea daily)
AFINITOR TABS 5 MG, 2.5 MG, 7.5 MG (<i>everolimus</i>)	AC	PA; QL(1 ea daily)
ALECENSA CAPS (<i>alectinib hcl</i>)	AC	PA
ALUNBRIG TABS (<i>brigatinib</i>)	AC	PA
ALUNBRIG TBPB (<i>brigatinib</i>)	AC	PA
AYVAKIT TABS (<i>avapritinib</i>)	AC	PA; QL(1 ea daily)
BALVERSA TABS (<i>erdafitinib</i>)	AC	PA
BOSULIF TABS (<i>bosutinib</i>)	AC	PA
BRAFTOVI CAPS (<i>encorafenib</i>)	AC	PA

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

Drug Name	Drug Tier	Requirements/ Limits
BRUKINSA CAPS (<i>zanubrutinib</i>)	AC	PA
CABOMETYX TABS (<i>cabozantinib s-malate</i>)	AC	PA
CALQUENCE CAPS (<i>acalabrutinib</i>)	AC	PA
CAPRELSA TABS (<i>vandetanib</i>)	AC	
COMETRIQ KIT (<i>cabozantinib s-malate</i>)	AC	
COPIKTRA CAPS (<i>duvelisib</i>)	AC	PA
COTELLIC TABS (<i>cobimetinib fumarate</i>)	AC	PA
<i>erlotinib hcl tabs</i>	AC	PA
<i>everolimus tabs</i>	AC	PA; QL(1 ea daily)
FARYDAK CAPS (<i>panobinostat lactate</i>)	AC	PA
GILOTRIF TABS (<i>afatinib dimaleate</i>)	AC	PA
GLEEVEC TABS (<i>imatinib mesylate</i>)	AC	PA
IBRANCE CAPS 75 MG, 100 MG, 125 MG (<i>palbociclib</i>)	AC	PA
ICLUSIG TABS (<i>ponatinib hcl</i>)	AC	PA
IDHIFA TABS (<i>enasidenib mesylate</i>)	AC	PA
<i>imatinib mesylate tabs</i>	AC	PA
IMBRUVICA CAPS (<i>ibrutinib</i>)	AC	PA
IMBRUVICA TABS (<i>ibrutinib</i>)	AC	PA
INLYTA TABS (<i>axitinib</i>)	AC	PA
INREBIC CAPS (<i>fedratinib hcl</i>)	AC	PA
IRESSA TABS (<i>gefitinib</i>)	AC	PA

Drug Name	Drug Tier	Requirements/ Limits
ISTODAX (<i>OVERFILL</i>) SOLR (romidepsin)	AC	PA
JAKAFI TABS (<i>ruxolitinib phosphate</i>)	AC	PA
KISQALI TBPK (<i>ribociclib succinate</i>)	AC	PA
LENVIMA 10 MG DAILY DOSE CPPK (<i>lenvatinib mesylate</i>)	AC	PA
LENVIMA 12MG DAILY DOSE CPPK (<i>lenvatinib mesylate</i>)	AC	PA
LENVIMA 14 MG DAILY DOSE CPPK (<i>lenvatinib mesylate</i>)	AC	PA
LENVIMA 18 MG DAILY DOSE CPPK (<i>lenvatinib mesylate</i>)	AC	PA
LENVIMA 20 MG DAILY DOSE CPPK (<i>lenvatinib mesylate</i>)	AC	PA
LENVIMA 24 MG DAILY DOSE CPPK (<i>lenvatinib mesylate</i>)	AC	PA
LENVIMA 4 MG DAILY DOSE CPPK (<i>lenvatinib mesylate</i>)	AC	PA
LENVIMA 8 MG DAILY DOSE CPPK (<i>lenvatinib mesylate</i>)	AC	PA
LORBRENA TABS (<i>lorlatinib</i>)	AC	PA
LYNPARZA CAPS (<i>olaparib</i>)	AC	PA
LYNPARZA TABS (<i>olaparib</i>)	AC	PA
MEKINIST TABS (<i>trametinib dimethyl sulfoxide</i>)	AC	PA
MEKTOVI TABS (<i>binimetinib</i>)	AC	PA

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

Drug Name	Drug Tier	Requirements/ Limits
NERLYNX TABS (<i>neratinib maleate</i>)	AC	PA
NEXAVAR TABS (<i>sorafenib tosylate</i>)	AC	PA
NINLARO CAPS (<i>ixazomib citrate</i>)	AC	PA
PIQRAY 200MG DAILY DOSE TBPk (<i>alpelisib</i>)	AC	PA
PIQRAY 250MG DAILY DOSE TBPk (<i>alpelisib</i>)	AC	PA
PIQRAY 300MG DAILY DOSE TBPk (<i>alpelisib</i>)	AC	PA
ROMIDEPSIN SOLR (<i>romidepsin</i>)	AC	PA
ROZLYTREK CAPS (<i>entrectinib</i>)	AC	PA
RUBRACA TABS (<i>rucaparib camsylate</i>)	AC	PA
RYDAPT CAPS (<i>midostaurin</i>)	AC	PA
SPRYCEL TABS (<i>dasatinib</i>)	AC	PA
STIVARGA TABS (<i>regorafenib</i>)	AC	PA; SP
SUTENT CAPS (<i>sunitinib malate</i>)	AC	PA
TAFINLAR CAPS (<i>dabrafenib mesylate</i>)	AC	PA
TAGRISSO TABS (<i>osimertinib mesylate</i>)	AC	PA
TALZENNA CAPS (<i>talazoparib tosylate</i>)	AC	PA
TARCEVA TABS (<i>erlotinib hcl</i>)	AC	PA
TASIGNA CAPS (<i>nilotinib hcl</i>)	AC	PA
TAZVERIK TABS (<i>tazemetostat hbr</i>)	AC	PA
<i>temsirolimus soln</i>	AC	PA
TIBSOVO TABS (<i>ivosidenib</i>)	AC	PA

Drug Name	Drug Tier	Requirements/ Limits
TORISEL SOLN (<i>temsirolimus</i>)	AC	PA
TURALIO CAPS (<i>pexidartinib hcl</i>)	AC	PA
TYKERB TABS (<i>lapatinib ditosylate</i>)	AC	PA
VELCADE SOLR (<i>bortezomib</i>)	AC	PA
VERZENIO TABS (<i>abemaciclib</i>)	AC	PA
VITRAKVI CAPS (<i>larotrectinib sulfate</i>)	AC	PA
VITRAKVI SOLN (<i>larotrectinib sulfate</i>)	AC	PA
VIZIMPRO TABS (<i>dacomitinib</i>)	AC	PA
VOTRIENT TABS (<i>pazopanib hcl</i>)	AC	PA
XALKORI CAPS (<i>crizotinib</i>)	AC	PA
XOSPATA TABS (<i>gilteritinib fumarate</i>)	AC	PA
ZEJULA CAPS (<i>niraparib tosylate</i>)	AC	PA
ZELBORAF TABS (<i>vemurafenib</i>)	AC	PA
ZOLINZA CAPS (<i>vorinostat</i>)	AC	PA
ZYDELIG TABS (<i>idelalisib</i>)	AC	PA
ZYKADIA CAPS (<i>ceritinib</i>)	AC	PA
ZYKADIA TABS (<i>ceritinib</i>)	AC	PA
Antineoplastics Misc.		
ACTIMMUNE SOLN (<i>interferon gamma-1b</i>)	SP	PA
ALFERON N SOLN (<i>interferon alfa-n3</i>)	AC	PA
<i>bexarotene caps</i>	AC	PA

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

Drug Name	Drug Tier	Requirements/Limits
HYDREA CAPS (<i>hydroxyurea</i>)	AC	
<i>hydroxyurea caps</i>	AC	
INTRON A SOLN (<i>interferon alfa-2b</i>)	AC	PA
INTRON A SOLR (<i>interferon alfa-2b</i>)	AC	PA
MATULANE CAPS (<i>procarbazine hcl</i>)	AC	
SYLATRON KIT (<i>peginterferon alfa-2b antineoplastic</i>)	AC	PA
TARGRETIN CAPS OR 75 MG (<i>bexarotene</i>)	AC	PA
<i>tretinoin (chemotherapy) caps</i>	AC	
Chemotherapy Adjuncts		
KEPIVANCE SOLR (<i>palifermin</i>)	SP	PA
Chemotherapy Rescue/Antidote Agents		
ETHYOL SOLR (<i>amifostine crystalline</i>)	SP	PA
<i>leucovorin calcium soln ij 500 mg/50ml</i>	AC	PA
<i>leucovorin calcium solr ij 100 mg, 350 mg</i>	AC	PA
<i>leucovorin calcium tabs or 10 mg, 15 mg, 25 mg</i>	AC	1 bal on hand,
<i>leucovorin calcium tabs or 5 mg, 15 mg, 25 mg</i>	AC	
MESNEX TABS (<i>mesna</i>)	AC	
Mitotic Inhibitors		
(Etoposide) TOPOSAR SOLN	AC	PA
ETOPOPHOS SOLR (<i>etoposide phosphate</i>)	AC	PA
<i>etoposide caps or 50 mg</i>	AC	1 bal on hand,

Drug Name	Drug Tier	Requirements/Limits
<i>etoposide soln iv 1 gm/50ml, 100 mg/5ml, 500 mg/25ml</i>	AC	PA
Topoisomerase I Inhibitors		
HYCAMTIN CAPS OR 0.25 MG, 1 MG (<i>topotecan hcl</i>)	AC	PA
HYCAMTIN SOLR IV 4 MG (<i>topotecan hcl</i>)	AC	PA
<i>topotecan hcl soln 4 mg/4ml</i>	AC	PA
TOPOTECAN HCL SOLN 4 MG/4ML (<i>topotecan hcl</i>)	AC	PA
TOPOTECAN HCL SOLN 4 MG/4ML (<i>topotecan hcl</i>)	AC	PA
<i>topotecan hcl solr 4 mg</i>	AC	PA
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease		
Antiparkinson Adjunctive Therapy		
<i>carbidopa tabs</i>	1	
LODOSYN TABS (<i>carbidopa</i>)	GP	
Antiparkinson Anticholinergics		
<i>benztropine mesylate soln ij 1 mg/ml</i>	SP	PA
<i>benztropine mesylate tabs or 0.5 mg, 1 mg, 2 mg</i>	1	
COGENTIN SOLN (<i>benztropine mesylate</i>)	SP	PA
<i>trihexyphenidyl hcl soln</i>	1	
<i>trihexyphenidyl hcl tabs</i>	1	
Antiparkinson COMT Inhibitors		
COMTAN TABS (<i>entacapone</i>)	GP	
<i>entacapone tabs</i>	1	

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

Drug Name	Drug Tier	Requirements/ Limits
TASMAR TABS (<i>tolcapone</i>)	GP	
<i>tolcapone tabs</i>	1	
Antiparkinson Dopaminergics		
<i>amantadine hcl caps</i>	1	
<i>amantadine hcl syrp</i>	1	
<i>amantadine hcl tabs</i>	1	
<i>bromocriptine mesylate caps</i>	1	
<i>bromocriptine mesylate tabs</i>	1	
<i>carbidopa-levodopa tabs</i>	1	
<i>carbidopa-levodopa tbc</i>	1	
<i>carbidopa-levodopa tbdp</i>	1	
<i>carbidopa-levodopa-entacapone tabs</i>	1	1 bal on hand,
DUOPA SUSP (<i>carbidopa-levodopa</i>)	SP	
GOCOVRI CP24 (<i>amantadine hcl</i>)	3	PA
MIRAPEX ER TB24 (<i>pramipexole dihydrochloride</i>)	GP	
MIRAPEX TABS (<i>pramipexole dihydrochloride</i>)	GP	
NEUPRO PT24 1 MG/24HR, 3 MG/24HR, 6 MG/24HR, 8 MG/24HR (<i>rotigotine</i>)	3	
NEUPRO PT24 2 MG/24HR, 3 MG/24HR, 6 MG/24HR, 8 MG/24HR (<i>rotigotine</i>)	3	QL(3 ea daily)

Drug Name	Drug Tier	Requirements/ Limits
NEUPRO PT24 4 MG/24HR, 6 MG/24HR, 8 MG/24HR (<i>rotigotine</i>)	3	QL(1 ea daily)
OSMOLEX ER T4PK (<i>amantadine hcl</i>)	3	PA
OSMOLEX ER TB24 (<i>amantadine hcl</i>)	3	PA
PARLODEL CAPS (<i>bromocriptine mesylate</i>)	GP	
PARLODEL TABS (<i>bromocriptine mesylate</i>)	GP	
<i>pramipexole dihydrochloride tabs</i>	1	
<i>pramipexole dihydrochloride tb24</i>	1	
REQUIP TABS (<i>ropinirole hydrochloride</i>)	GP	
REQUIP XL TB24 (<i>ropinirole hydrochloride</i>)	GP	
<i>ropinirole hydrochloride tabs</i>	1	
<i>ropinirole hydrochloride tb24</i>	1	
RYTARY CPR (<i>carbidopa-levodopa</i>)	3	PA
SINEMET CR TBCR (<i>carbidopa-levodopa</i>)	GP	
SINEMET TABS (<i>carbidopa-levodopa</i>)	GP	
STALEVO 100 TABS (<i>carbidopa-levodopa-entacapone</i>)	2	1 bal on hand,
STALEVO 125 TABS (<i>carbidopa-levodopa-entacapone</i>)	2	1 bal on hand,
STALEVO 150 TABS (<i>carbidopa-levodopa-entacapone</i>)	2	1 bal on hand,

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

Drug Name	Drug Tier	Requirements/ Limits
STALEVO 200 TABS (<i>carbidopa-levodopa-entacapone</i>)	2	1 bal on hand,
STALEVO 50 TABS (<i>carbidopa-levodopa-entacapone</i>)	2	1 bal on hand,
STALEVO 75 TABS (<i>carbidopa-levodopa-entacapone</i>)	2	1 bal on hand,
Antiparkinson Monoamine Oxidase Inhibitors		
AZILECT TABS (<i>rasagiline mesylate</i>)	GP	
ELDEPRYL CAPS (<i>selegiline hcl</i>)	GP	
<i>rasagiline mesylate tabs</i>	1	
<i>selegiline hcl caps</i>	1	
<i>selegiline hcl tabs</i>	1	
<i>selegiline hcl tabs</i>	1	1 bal on hand,
ZELAPAR TBDP (<i>selegiline hcl</i>)	3	
ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
Antimanic Agents		
<i>lithium carbonate caps 150 mg, 300 mg, 600 mg, 600 mg</i>	1	
<i>lithium carbonate caps 150 mg, 300 mg, 600 mg, 600 mg</i>	1	1 bal on hand,
<i>lithium carbonate tabs 300 mg</i>	1	
<i>lithium carbonate tbcr 300 mg, 450 mg</i>	1	
LITHIUM SOLN (<i>lithium</i>)	3	
LITHOBID TBCR (<i>lithium carbonate</i>)	3	
Antipsychotics - Misc.		

Drug Name	Drug Tier	Requirements/ Limits
CAPLYTA CAPS (<i>lumateperone tosylate</i>)	3	PA; QL(1 ea daily)
EQUETRO CP12 (<i>carbamazepine (antipsychotic)</i>)	3	
GEODON CAPS OR 20 MG, 40 MG, 60 MG, 80 MG (<i>ziprasidone hcl</i>)	GP	
GEODON SOLR IM 20 MG (<i>ziprasidone mesylate</i>)	SP	PA
LATUDA TABS (<i>lurasidone hcl</i>)	3	PA
NUPLAZID CAPS 34 MG (<i>pimavanserin tartrate</i>)	SP	PA; QL(1 ea daily)
NUPLAZID TABS 10 MG (<i>pimavanserin tartrate</i>)	SP	PA; QL(1 ea daily)
NUPLAZID TABS 17 MG (<i>pimavanserin tartrate</i>)	SP	PA
VRAYLAR CAPS (<i>cariprazine hcl</i>)	3	PA
VRAYLAR CPPK (<i>cariprazine hcl</i>)	3	PA
<i>ziprasidone hcl caps</i>	1	
<i>ziprasidone mesylate solr</i>	SP	PA
Benzisoxazoles		
(Risperidone) RISPERIDONE M-TAB TBDP	1	
FANAPT TABS (<i>iloperidone</i>)	3	PA
FANAPT TITRATION PACK TABS (<i>iloperidone</i>)	3	PA
INVEGA SUSTENNA SUSY (<i>paliperidone palmitate</i>)	SP	PA
INVEGA TB24 (<i>paliperidone</i>)	GP	
INVEGA TRINZA SUSY (<i>paliperidone palmitate</i>)	SP	PA

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

Drug Name	Drug Tier	Requirements/ Limits
<i>paliperidone tb24</i>	1	
PERSERIS PRSY (<i>risperidone</i>)	SP	PA
RISPERDAL CONSTA SRER (<i>risperidone microspheres</i>)	SP	PA
RISPERDAL SOLN (<i>risperidone</i>)	GP	
RISPERDAL TABS (<i>risperidone</i>)	GP	
<i>risperidone soln 1 mg/ml</i>	1	
<i>risperidone tabs 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	1	
<i>risperidone tbdp 0.25 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	1	1 bal on hand,
<i>risperidone tbdp 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	1	
Butyrophenones		
<i>haloperidol lactate conc</i>	1	
<i>haloperidol tabs</i>	1	
Dibenzapines		
<i>clozapine tabs 25 mg, 50 mg, 100 mg, 200 mg</i>	1	
<i>clozapine tbdp 150 mg, 200 mg, 12.5 mg</i>	1	1 bal on hand,
<i>clozapine tbdp 25 mg, 100 mg, 200 mg, 12.5 mg</i>	1	
CLOZARIL TABS (<i>clozapine</i>)	GP	
FAZACLO TBDP 12.5 MG (<i>clozapine</i>)	3	
FAZACLO TBDP 150 MG, 200 MG (<i>clozapine</i>)	3	1 bal on hand,

Drug Name	Drug Tier	Requirements/ Limits
FAZACLO TBDP 25 MG, 100 MG (<i>clozapine</i>)	GP	
<i>loxapine succinate caps</i>	1	
<i>olanzapine solr im 10 mg</i>	SP	PA
<i>olanzapine tabs or 5 mg, 10 mg, 15 mg, 20 mg, 2.5 mg, 7.5 mg</i>	1	
<i>olanzapine tbdp or 5 mg, 10 mg, 15 mg, 20 mg</i>	1	
<i>quetiapine fumarate tabs 25 mg, 50 mg, 100 mg, 200 mg, 300 mg, 400 mg</i>	1	
<i>quetiapine fumarate tb24 50 mg, 150 mg, 200 mg, 300 mg, 400 mg</i>	1	PA
SAPHRIS SUBL (<i>asenapine maleate</i>)	3	PA
SECUADO PT24 (<i>asenapine</i>)	3	PA; QL(1 ea daily)
SEROQUEL TABS (<i>quetiapine fumarate</i>)	GP	
SEROQUEL XR TB24 300 MG (<i>quetiapine fumarate</i>)	NF	PA
SEROQUEL XR TB24 50 MG, 150 MG, 200 MG, 400 MG (<i>quetiapine fumarate</i>)	GP	PA
VERSACLOZ SUSP (<i>clozapine</i>)	3	QL(18 ml daily)
ZYPREXA SOLR IM 10 MG (<i>olanzapine</i>)	SP	PA
ZYPREXA TABS OR 5 MG, 10 MG, 15 MG, 20 MG, 2.5 MG, 7.5 MG (<i>olanzapine</i>)	GP	

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

Drug Name	Drug Tier	Requirements/ Limits
ZYPREXA ZYDIS TBDP (<i>olanzapine</i>)	GP	
Dihydroindolones		
<i>molindone hcl tabs</i>	1	1 bal on hand,
Phenothiazines		
(Prochlorperazine) COMPRO SUPP	1	
<i>chlorpromazine hcl tabs</i>	1	
<i>fluphenazine hcl conc 5 mg/ml</i>	1	1 bal on hand,
<i>fluphenazine hcl elix 2.5 mg/5ml</i>	1	1 bal on hand,
<i>fluphenazine hcl tabs 1 mg, 5 mg, 5 mg, 10 mg, 10 mg, 2.5 mg, 2.5 mg</i>	1	
<i>fluphenazine hcl tabs 1 mg, 5 mg, 5 mg, 10 mg, 10 mg, 2.5 mg, 2.5 mg</i>	1	1 bal on hand,
<i>perphenazine tabs</i>	1	
<i>prochlorperazine maleate tabs</i>	1	
<i>prochlorperazine supp</i>	1	
<i>thioridazine hcl tabs</i>	1	
<i>trifluoperazine hcl tabs</i>	1	
Quinolinone Derivatives		
ABILIFY TABS 2 MG, 10 MG, 30 MG (<i>aripiprazole</i>)	GP	
ABILIFY TABS 5 MG, 15 MG, 20 MG (<i>aripiprazole</i>)	NF	
<i>aripiprazole soln 1 mg/ml</i>	1	
<i>aripiprazole tabs 2 mg, 5 mg, 10 mg, 15 mg, 20 mg, 30 mg</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
<i>aripiprazole tbdp 10 mg, 15 mg</i>	1	PA
REXULTI TABS (<i>brexipiprazole</i>)	3	PA
Thioxanthenes		
<i>thiothixene caps</i>	1	
ANTISEPTICS & DISINFECTANTS		
Antiseptics & Disinfectants		
(Formaldehyde) FORMADON SOLN	1	
<i>formaldehyde soln</i>	1	1 bal on hand,
<i>formaldehyde soln</i>	1	
ANTIVIRALS - Drugs to Treat Viral Infections		
Antiretrovirals		
<i>abacavir sulfate soln</i>	1	
<i>abacavir sulfate tabs</i>	1	
<i>abacavir sulfate-lamivudine tabs</i>	1	
<i>abacavir sulfate-lamivudine-zidovudine tabs</i>	1	
APTIVUS CAPS (<i>tipranavir</i>)	2	
APTIVUS SOLN (<i>tipranavir</i>)	2	
<i>atazanavir sulfate caps</i>	1	
ATRIPLA TABS (<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>)	2	ST
COMBIVIR TABS (<i>lamivudine-zidovudine</i>)	GP	
COMPLERA TABS (<i>emtricitabine-rilpivirine-tenofovir disoproxil fumarate</i>)	2	ST

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

Drug Name	Drug Tier	Requirements/ Limits
CRIXIVAN CAPS (<i>indinavir sulfate</i>)	2	
DELSTRIGO TABS (<i>doravirine-lamivudine-tenofovir disoproxil fumarate</i>)	3	ST
DESCOVY TABS (<i>emtricitabine-tenofovir alafenamide fumarate</i>)	2	PA
<i>didanosine cpdr</i>	1	1 bal on hand,
DOVATO TABS (<i>dolutegravir sodium-lamivudine</i>)	2	
EDURANT TABS (<i>rilpivirine hcl</i>)	2	
<i>efavirenz caps</i>	1	
<i>efavirenz tabs</i>	1	
EMTRIVA CAPS (<i>emtricitabine</i>)	2	
EMTRIVA SOLN (<i>emtricitabine</i>)	2	
EPIVIR SOLN (<i>lamivudine</i>)	GP	
EPIVIR TABS (<i>lamivudine</i>)	GP	
EPZICOM TABS (<i>abacavir sulfate-lamivudine</i>)	GP	
EVOTAZ TABS (<i>atazanavir sulfate-cobicistat</i>)	2	
<i>fosamprenavir calcium tabs</i>	1	
FUZEON SOLR (<i>enfuvirtide</i>)	SP	PA
GENVOYA TABS (<i>elvitegravir-cobicistat-emtricitabine-tenofovir alafenamide</i>)	2	

Drug Name	Drug Tier	Requirements/ Limits
INTELENCE TABS (<i>etravirine</i>)	2	
INVIRASE CAPS (<i>saquinavir mesylate</i>)	2	
INVIRASE TABS (<i>saquinavir mesylate</i>)	2	
ISENTRESS CHEW (<i>raltegravir potassium</i>)	2	
ISENTRESS HD TABS (<i>raltegravir potassium</i>)	2	
ISENTRESS PACK (<i>raltegravir potassium</i>)	2	
ISENTRESS TABS (<i>raltegravir potassium</i>)	2	
JULUCA TABS (<i>dolutegravir sodium-rilpivirine hcl</i>)	2	
KALETRA SOLN 400 MG/5ML-100 MG/5ML (<i>lopinavir-ritonavir</i>)	GP	
KALETRA TABS 100 MG-25 MG, 200 MG-50 MG (<i>lopinavir-ritonavir</i>)	2	
<i>lamivudine soln</i>	1	
<i>lamivudine tabs</i>	1	
<i>lamivudine-zidovudine tabs</i>	1	
LEXIVA SUSP 50 MG/ML (<i>fosamprenavir calcium</i>)	2	
LEXIVA TABS 700 MG (<i>fosamprenavir calcium</i>)	GP	
<i>lopinavir-ritonavir soln</i>	1	
<i>nevirapine susp 50 mg/5ml</i>	1	
<i>nevirapine tabs 200 mg</i>	1	
<i>nevirapine tb24 100 mg, 400 mg</i>	1	

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

Drug Name	Drug Tier	Requirements/ Limits
nevirapine tb24 100 mg, 400 mg	1	1 bal on hand,
NORVIR CAPS 100 MG (ritonavir)	2	
NORVIR SOLN 80 MG/ML (ritonavir)	2	
NORVIR TABS 100 MG (ritonavir)	GP	
ODEFSEY TABS (emtricitabine-rilpivirine-tenofovir alafenamide fumarate)	2	ST
PIFELTRO TABS (doravirine)	2	
PREZCOBIX TABS (darunavir-cobicistat)	2	
PREZISTA SUSP (darunavir ethanolate)	2	
PREZISTA TABS (darunavir ethanolate)	2	
RESCRIPTOR TABS (delavirdine mesylate)	2	
RETROVIR CAPS (zidovudine)	GP	
RETROVIR SYRP (zidovudine)	GP	
REYATAZ CAPS 150 MG, 200 MG (atazanavir sulfate)	GP	
REYATAZ CAPS 300 MG (atazanavir sulfate)	NF	
REYATAZ PACK 50 MG (atazanavir sulfate)	2	
ritonavir tabs	1	
SELZENTRY SOLN (maraviroc)	2	
SELZENTRY TABS (maraviroc)	2	
stavudine caps	1	

Drug Name	Drug Tier	Requirements/ Limits
STRIBILD TABS (elvitegravir-cobicistat-emtricitabine-tenofovir df)	2	
SUSTIVA CAPS (efavirenz)	GP	
SUSTIVA TABS (efavirenz)	GP	
SYMTUZA TABS (darunavir-cobicistat-emtricitabine-tenofovir alafenamide)	3	ST
tenofovir disoproxil fumarate tabs	1	
TIVICAY TABS 50 MG (dolutegravir sodium)	2	
TRIUMEQ TABS (abacavir-dolutegravir-lamivudine)	2	
TRIZIVIR TABS (abacavir sulfate-lamivudine-zidovudine)	GP	
TRUVADA TABS (emtricitabine-tenofovir disoproxil fumarate)	2	
TYBOST TABS (cobicistat)	2	
VIDEX EC CPDR 125 MG (didanosine)	2	
VIDEX EC CPDR 200 MG, 250 MG, 400 MG (didanosine)	3	
VIDEXPEDIATRIC SOLR (didanosine)	2	
VIRACEPT TABS (nelfinavir mesylate)	2	
VIRAMUNE SUSP (nevirapine)	GP	
VIRAMUNE TABS (nevirapine)	GP	
VIRAMUNE XR TB24 100 MG (nevirapine)	3	

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

Drug Name	Drug Tier	Requirements/ Limits
VIRAMUNE XR TB24 400 MG (<i>nevirapine</i>)	GP	
VIREAD POWD 40 MG/GM (<i>tenofovir disoproxil fumarate</i>)	2	
VIREAD TABS 150 MG, 200 MG, 250 MG (<i>tenofovir disoproxil fumarate</i>)	2	
VIREAD TABS 300 MG (<i>tenofovir disoproxil fumarate</i>)	NF	
ZERIT CAPS 15 MG, 20 MG, 30 MG, 40 MG (<i>stavudine</i>)	GP	
ZERIT SOLR 1 MG/ML (<i>stavudine</i>)	2	
ZIAGEN SOLN (<i>abacavir sulfate</i>)	GP	
ZIAGEN TABS (<i>abacavir sulfate</i>)	GP	
<i>zidovudine caps</i>	1	
<i>zidovudine syrp</i>	1	
<i>zidovudine tabs</i>	1	
CMV Agents		
<i>cidofovir soln</i>	SP	PA
FOSCAVIR SOLN (<i>foscarnet sodium</i>)	SP	PA
PREVYMIS TABS (<i>letermovir</i>)	SP	PA; SP
VALCYTE SOLR 50 MG/ML (<i>valganciclovir hcl</i>)	GP	QL(21 ml daily)
VALCYTE TABS 450 MG (<i>valganciclovir hcl</i>)	GP	
<i>valganciclovir hcl solr 50 mg/ml</i>	1	QL(21 ml daily)
<i>valganciclovir hcl tabs 450 mg</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
Hepatitis Agents		
(Ribavirin (Hepatitis C)) MODERIBA TABS	1	PA
(Ribavirin (Hepatitis C)) RIBASPHERE CAPS 200 MG	1	PA
(Ribavirin (Hepatitis C)) RIBASPHERE RIBAPAK TBPK 400 MG, 600 MG	1	PA
(Ribavirin (Hepatitis C)) RIBASPHERE TABS 200 MG, 400 MG	1	PA
(Ribavirin (Hepatitis C)) RIBASPHERE TABS 600 MG	1	PA; 1 bal on hand,
<i>adefovir dipivoxil tabs</i>	1	
BARACLUDE SOLN 0.05 MG/ML (<i>entecavir</i>)	2	
BARACLUDE TABS 0.5 MG, 1 MG (<i>entecavir</i>)	GP	
DAKLINZA TABS (<i>daclatasvir dihydrochloride</i>)	SP	PA
<i>entecavir tabs</i>	1	
EPCLUSA TABS (<i>sofosbuvir-velpatasvir</i>)	SP	PA
EPIVIR HBV SOLN 5 MG/ML (<i>lamivudine (hcv)</i>)	3	
EPIVIR HBV TABS 100 MG (<i>lamivudine (hcv)</i>)	GP	
HARVONI TABS 200 MG-45 MG, 400 MG-90 MG (<i>ledipasvir-sofosbuvir</i>)	SP	PA
HEPSERA TABS (<i>adefovir dipivoxil</i>)	NF	
<i>lamivudine (hcv) tabs</i>	1	
LEDIPASVIR/SOFOSBUVI R TABS (<i>ledipasvir-sofosbuvir</i>)	SP	PA

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

Drug Name	Drug Tier	Requirements/ Limits
MAVYRET TABS (<i>glecaprevir-pibrentasvir</i>)	SP	PA
MODERIBA 1200 DOSE PACK TBPK (<i>ribavirin (hepatitis c)</i>)	3	PA
PEGASYS PROCLICK SOLN (<i>peginterferon alfa-2a</i>)	SP	PA
PEGASYS SOLN (<i>peginterferon alfa-2a</i>)	SP	PA
PEGINTRON KIT (<i>peginterferon alfa-2b</i>)	SP	PA
REBETOL CAPS 200 MG (<i>ribavirin (hepatitis c)</i>)	GP	PA
REBETOL SOLN 40 MG/ML (<i>ribavirin (hepatitis c)</i>)	2	PA
RIBASPHERE RIBAPAK TBPK (<i>ribavirin (hepatitis c)</i>)	3	PA
<i>ribavirin (hepatitis c) caps</i>	1	PA
<i>ribavirin (hepatitis c) tabs</i>	1	PA
SOFOBUVIR/VELPATAS VIR TABS (<i>sofosbuvir-velpatasvir</i>)	SP	PA
SOVALDI TABS 200 MG, 400 MG (<i>sofosbuvir</i>)	SP	PA
TECHNIVIE TABS (<i>ombitasvir-paritaprevir-ritonavir</i>)	SP	PA
VEMLIDY TABS (<i>tenofovir alafenamide fumarate</i>)	SP	PA
VIEKIRA PAK TBPK (<i>ombitasvir-paritaprevir-ritonavir-dasabuvir</i>)	SP	PA
VOSEVI TABS (<i>sofosbuvir-velpatasvir-voxilaprevir</i>)	SP	PA

Drug Name	Drug Tier	Requirements/ Limits
ZEPATIER TABS (<i>elbasvir-grazoprevir</i>)	SP	PA
Herpes Agents		
<i>acyclovir caps</i>	1	
<i>acyclovir susp</i>	1	
<i>acyclovir tabs</i>	1	
<i>famciclovir tabs</i>	1	
<i>valacyclovir hcl tabs</i>	1	
VALTREX TABS 1 GM (<i>valacyclovir hcl</i>)	GP	
VALTREX TABS 500 MG (<i>valacyclovir hcl</i>)	NF	
ZOVIRAX CAPS OR 200 MG (<i>acyclovir</i>)	GP	
ZOVIRAX SUSP OR 200 MG/5ML (<i>acyclovir</i>)	GP	
ZOVIRAX TABS OR 400 MG, 800 MG (<i>acyclovir</i>)	GP	
Influenza Agents		
FLUMADINE TABS (<i>rimantadine hydrochloride</i>)	3	
<i>oseltamivir phosphate caps or 30 mg, 45 mg</i>	1	QL(10 ea per 180 days retail)
<i>oseltamivir phosphate caps or 75 mg</i>	1	
<i>oseltamivir phosphate susr or 6 mg/ml</i>	1	QL(180 ml per 180 days retail); AL(At least 1 yrs old)
RELENZA DISKHALER AEPB (<i>zanamivir</i>)	3	Limit 1 inhaler per month;QL(0.67 ea daily)
<i>rimantadine hydrochloride tabs</i>	1	1 bal on hand,
TAMIFLU CAPS 30 MG, 45 MG (<i>oseltamivir phosphate</i>)	GP	QL(10 ea per 180 days retail)

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

Drug Name	Drug Tier	Requirements/ Limits
TAMIFLU CAPS 75 MG (<i>oseltamivir phosphate</i>)	NF	
TAMIFLU SUSR 6 MG/ML (<i>oseltamivir phosphate</i>)	GP	QL(180 ml per 180 days retail); AL(At least 1 yrs old)
Respiratory Syncytial Virus (RSV) Agents		
<i>ribavirin solr</i>	1	
VIRAZOLE SOLR (<i>ribavirin</i>)	GP	
BETA BLOCKERS - Drugs to Treat High Blood Pressure		
Alpha-Beta Blockers		
<i>carvedilol phosphate cp24</i>	1	
<i>carvedilol tabs 25 mg, 12.5 mg, 6.25 mg</i>	1	
<i>carvedilol tabs 3.125 mg</i>	1	QL(2 ea daily)
COREG CR CP24 (<i>carvedilol phosphate</i>)	GP	
COREG TABS 25 MG, 12.5 MG (<i>carvedilol</i>)	GP	
COREG TABS 3.125 MG (<i>carvedilol</i>)	GP	QL(2 ea daily)
COREG TABS 6.25 MG (<i>carvedilol</i>)	NF	
<i>labetalol hcl tabs</i>	1	
Beta Blockers Cardio-Selective		
<i>acebutolol hcl caps</i>	1	
<i>atenolol tabs</i>	1	
<i>betaxolol hcl tabs</i>	1	
<i>bisoprolol fumarate tabs</i>	1	QL(1 ea daily)
BYSTOLIC TABS (<i>nebivolol hcl</i>)	3	
LOPRESSOR TABS (<i>metoprolol tartrate</i>)	GP	

Drug Name	Drug Tier	Requirements/ Limits
<i>metoprolol succinate tb24</i>	1	
<i>metoprolol tartrate tabs</i>	1	
TENORMIN TABS (<i>atenolol</i>)	GP	
TOPROL XL TB24 25 MG, 100 MG, 200 MG (<i>metoprolol succinate</i>)	GP	
TOPROL XL TB24 50 MG (<i>metoprolol succinate</i>)	NF	
Beta Blockers Non-Selective		
(Sotalol Hcl) SORINE TABS	1	
BETAPACE AF TABS (<i>sotalol hcl (afib/afl)</i>)	GP	
BETAPACE TABS (<i>sotalol hcl</i>)	GP	
CORGARD TABS (<i>nadolol</i>)	GP	
HEMANGEOL SOLN (<i>propranolol hcl</i>)	3	AL(Up to 1 yrs old)
INDERAL LA CP24 (<i>propranolol hcl</i>)	GP	
INDERAL XL CP24 80 MG, 120 MG, 120 MG (<i>propranolol hcl sustained-release beads</i>)	3	
INDERAL XL CP24 80 MG, 120 MG, 120 MG (<i>propranolol hcl sustained-release beads</i>)	3	1 bal on hand,
INNOPRAN XL CP24 80 MG, 120 MG, 120 MG (<i>propranolol hcl sustained-release beads</i>)	3	1 bal on hand,

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

Drug Name	Drug Tier	Requirements/ Limits
INNOPRAN XL CP24 80 MG, 120 MG, 120 MG (<i>propranolol hcl sustained-release beads</i>)	3	
<i>nadolol tabs</i>	1	
<i>pindolol tabs</i>	1	
<i>propranolol hcl cp24 60 mg, 80 mg, 120 mg, 160 mg</i>	1	
<i>propranolol hcl soln 20 mg/5ml, 40 mg/5ml</i>	1	1 bal on hand,
<i>propranolol hcl tabs 10 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>	1	
<i>sotalol hcl (afib/afl) tabs</i>	1	
<i>sotalol hcl tabs</i>	1	
SOTYLIZE SOLN (<i>sotalol hcl</i>)	3	
<i>timolol maleate tabs 5 mg, 10 mg, 20 mg</i>	1	QL(2 ea daily)
CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure		
Calcium Channel Blockers		
(Diltiazem Hcl Coated Beads) CARTIA XT, DILTIAZEM CD CP24	1	
(Diltiazem Hcl Coated Beads) MATZIM LA TB24	1	
(Diltiazem Hcl Extended Release Beads) TAZTIA XT, TIADYLT ER CP24	1	
(Diltiazem Hcl) DILT-XR CP24	1	1 bal on hand,
(Nifedipine) AFEDITAB CR TB24	1	
ADALAT CC TB24 30 MG, 60 MG (<i>nifedipine</i>)	GP	
ADALAT CC TB24 90 MG (<i>nifedipine</i>)	GP	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>amlodipine besylate tabs</i>	1	QL(2 ea daily)
CALAN SR TBCR (<i>verapamil hcl</i>)	GP	
CALAN TABS (<i>verapamil hcl</i>)	GP	
CARDIZEM CD CP24 (<i>diltiazem hcl coated beads</i>)	GP	
CARDIZEM LA TB24 120 MG (<i>diltiazem hcl coated beads</i>)	2	
CARDIZEM LA TB24 180 MG, 240 MG, 300 MG, 360 MG, 420 MG (<i>diltiazem hcl coated beads</i>)	GP	
CARDIZEM TABS (<i>diltiazem hcl</i>)	GP	
<i>diltiazem hcl coated beads cp24</i>	1	
<i>diltiazem hcl coated beads tb24</i>	1	
<i>diltiazem hcl cp12</i>	1	
<i>diltiazem hcl cp24</i>	1	
<i>diltiazem hcl extended release beads cp24</i>	1	
<i>diltiazem hcl tabs</i>	1	
<i>felodipine tb24</i>	1	
<i>isradipine caps</i>	1	
<i>nicardipine hcl caps</i>	1	
<i>nifedipine caps 10 mg, 20 mg</i>	1	
<i>nifedipine tb24 30 mg, 60 mg, 60 mg, 90 mg</i>	1	
<i>nifedipine tb24 30 mg, 60 mg, 60 mg, 90 mg</i>	1	QL(1 ea daily)
<i>nimodipine caps</i>	1	

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

Drug Name	Drug Tier	Requirements/ Limits
<i>nisoldipine tb24 17 mg, 30 mg, 34 mg, 40 mg, 8.5 mg, 25.5 mg</i>	1	
<i>nisoldipine tb24 20 mg, 30 mg, 34 mg, 40 mg, 8.5 mg, 25.5 mg</i>	1	1 bal on hand,
NORVASC TABS (<i>amlodipine besylate</i>)	GP	QL(2 ea daily)
NYMALIZE SOLN 30 MG/10ML, 60 MG/20ML (<i>nimodipine</i>)	3	
PROCARDIA CAPS (<i>nifedipine</i>)	GP	
PROCARDIA XL TB24 (<i>nifedipine</i>)	GP	QL(1 ea daily)
SULAR TB24 (<i>nisoldipine</i>)	GP	
TIAZAC CP24 (<i>diltiazem hcl extended release beads</i>)	GP	
<i>verapamil hcl cp24 100 mg, 120 mg, 180 mg, 200 mg, 200 mg, 240 mg, 300 mg, 300 mg, 360 mg</i>	1	1 bal on hand,
<i>verapamil hcl cp24 100 mg, 120 mg, 180 mg, 200 mg, 200 mg, 240 mg, 300 mg, 300 mg, 360 mg</i>	1	
<i>verapamil hcl tabs 40 mg, 80 mg, 120 mg</i>	1	
<i>verapamil hcl tbc 120 mg, 180 mg, 240 mg</i>	1	
VERELAN CP24 120 MG, 180 MG, 240 MG (<i>verapamil hcl</i>)	GP	
VERELAN CP24 360 MG (<i>verapamil hcl</i>)	2	1 bal on hand,
VERELAN PM CP24 (<i>verapamil hcl</i>)	3	1 bal on hand,

Drug Name	Drug Tier	Requirements/ Limits
CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm		
Cardiac Glycosides		
(Digoxin) DIGITEK, DIGOX TABS	1	
<i>digoxin soln ij 0.25 mg/ml</i>	1	
<i>digoxin soln or 0.05 mg/ml</i>	1	
<i>digoxin soln or 0.05 mg/ml</i>	1	1 bal on hand,
<i>digoxin tabs or 0.125 mg, 125 mcg, 250 mcg</i>	1	
LANOXIN PEDIATRIC SOLN (<i>digoxin</i>)	SP	PA
LANOXIN SOLN IJ 0.25 MG/ML (<i>digoxin</i>)	GP	
LANOXIN TABS OR 125 MCG, 250 MCG (<i>digoxin</i>)	3	
LANOXIN TABS OR 62.5 MCG, 187.5 MCG (<i>digoxin</i>)	3	
CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions		
Cardiovascular Agents Misc. - Combinations		
<i>amlodipine besylate-atorvastatin calcium tabs</i>	1	
BIDIL TABS (<i>isosorbide dinitrate-hydralazine hcl</i>)	3	
CADUET TABS (<i>amlodipine besylate-atorvastatin calcium</i>)	GP	
ENTRESTO TABS (<i>sacubitril-valsartan</i>)	3	PA
Impotence Agents		
CIALIS TABS (<i>tadalafil</i>)	GP	PA; QL(1 ea daily)
<i>tadalafil tabs</i>	1	PA; QL(1 ea daily)

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

Drug Name	Drug Tier	Requirements/ Limits
Peripheral Vasodilators		
<i>isoxsuprine hcl tabs</i>	1	
Prostaglandin Vasodilators		
ORENITRAM TBCR (<i>treprostinil diolamine</i>)	SP	PA
REMODULIN SOLN (<i>treprostinil</i>)	SP	PA; 1 bal on hand,
<i>treprostinil soln</i>	SP	PA
VENTAVIS SOLN (<i>iloprost</i>)	SP	PA
Pulmonary Hypertension - Endothelin Receptor		
<i>ambrisentan tabs</i>	SP	PA
<i>bosentan tabs</i>	SP	PA
LETAIRIS TABS (<i>ambrisentan</i>)	SP	PA
OPSUMIT TABS (<i>macitentan</i>)	SP	PA
TRACLEER TABS 125 MG, 62.5 MG (<i>bosentan</i>)	SP	PA
TRACLEER TBSO 32 MG (<i>bosentan</i>)	SP	PA; SP- Acaria Health;SP
Pulmonary Hypertension - Phosphodiesterase		
(Tadalafil (Pulmonary Hypertension)) ALYQ TABS	SP	PA
ADCIRCA TABS (<i>tadalafil (pulmonary hypertension)</i>)	SP	PA
REVATIO SOLN IV 10 MG/12.5ML (<i>sildenafil citrate (pulmonary hypertension)</i>)	SP	PA
REVATIO SUSR OR 10 MG/ML (<i>sildenafil citrate (pulmonary hypertension)</i>)	SP	PA

Drug Name	Drug Tier	Requirements/ Limits
REVATIO TABS OR 20 MG (<i>sildenafil citrate (pulmonary hypertension)</i>)	SP	PA; PAH Only
<i>sildenafil citrate (pulmonary hypertension) soln iv 10 mg/12.5ml</i>	SP	PA
<i>sildenafil citrate (pulmonary hypertension) susr or 10 mg/ml</i>	SP	PA
SILDENAFIL CITRATE TABS (<i>sildenafil citrate (pulmonary hypertension)</i>)	2	PA
SILDENAFIL CITRATE TABS (<i>sildenafil citrate (pulmonary hypertension)</i>)	2	PA; PAH Only
<i>tadalafil (pulmonary hypertension) tabs</i>	SP	PA
Pulmonary Hypertension - Prostacyclin Receptor		
UPTRA VI TABS (<i>selexipag</i>)	SP	PA
UPTRA VI TBPK (<i>selexipag</i>)	SP	PA
Pulmonary Hypertension - Sol Guanylate Cyclase		
ADEMPAS TABS (<i>riociguat</i>)	SP	PA
Sinus Node Inhibitors		
CORLANOR SOLN 5 MG/5ML (<i>ivabradine hcl</i>)	3	ST; QL(15 ml daily)
CORLANOR TABS 5 MG, 7.5 MG (<i>ivabradine hcl</i>)	3	ST
Transthyretin Stabilizers		
VYNDAMAX CAPS (<i>tafamidis</i>)	SP	PA; QL(1 ea daily)
VYND AQEL CAPS (<i>tafamidis meglumine (cardiac)</i>)	SP	PA; QL(4 ea daily)

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

Drug Name	Drug Tier	Requirements/ Limits
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporins - 1st Generation		
<i>cefadroxil caps</i>	1	
<i>cefadroxil susr</i>	1	
<i>cefadroxil tabs</i>	1	
<i>cefazolin sodium solr</i>	SP	PA
<i>cephalexin caps 250 mg, 500 mg, 750 mg</i>	1	
<i>cephalexin susr 125 mg/5ml, 250 mg/5ml</i>	1	
<i>cephalexin tabs 250 mg, 500 mg</i>	1	1 bal on hand,
KEFLEX CAPS (<i>cephalexin</i>)	GP	
Cephalosporins - 2nd Generation		
<i>cefaclor caps 250 mg, 500 mg</i>	1	
CEFACLOR ER TB12 (<i>cefaclor monohydrate</i>)	3	
<i>cefaclor susr 125 mg/5ml, 250 mg/5ml, 375 mg/5ml</i>	1	1 bal on hand,
CEFOTAN SOLR (<i>cefotetan disodium</i>)	SP	PA
<i>cefotetan disodium solr 1 gm, 2 gm</i>	SP	PA
<i>cefotetan disodium solr 10 gm</i>	SP	PA; 1 bal on hand,
<i>cefoxitin sodium solr ij 10 gm</i>	SP	PA
<i>cefoxitin sodium solr iv 1 gm, 2 gm</i>	SP	PA
CEFOXITIN SODIUM SOLR IV 1 GM-4 %, 2 GM-2.2 % (<i>cefoxitin sodium and dextrose</i>)	SP	PA

Drug Name	Drug Tier	Requirements/ Limits
<i>cefprozil susr</i>	1	
<i>cefprozil tabs</i>	1	
<i>cefuroxime axetil tabs</i>	1	
<i>cefuroxime sodium solr</i>	SP	PA
Cephalosporins - 3rd Generation		
(Ceftazidime) TAZICEF SOLR IJ 1 GM, 2 GM, 6 GM	SP	PA
(Ceftazidime) TAZICEF SOLR IV 1 GM, 2 GM	SP	PA; 1 bal on hand,
<i>cefdinir caps</i>	1	
<i>cefdinir susr</i>	1	
<i>cefditoren pivoxil tabs</i>	1	1 bal on hand,
<i>cefixime caps</i>	1	
<i>cefixime susr</i>	1	
<i>cefotaxime sodium solr 1 gm, 2 gm, 10 gm, 500 mg, 500 mg</i>	SP	PA
<i>cefotaxime sodium solr 2 gm, 2 gm, 10 gm, 500 mg, 500 mg</i>	SP	PA; 1 bal on hand,
<i>cefpodoxime proxetil susr</i>	1	
<i>cefpodoxime proxetil tabs</i>	1	
<i>ceftazidime solr</i>	SP	PA
<i>ceftriaxone sodium solr</i>	SP	PA
CLAFORAN SOLR (<i>cefotaxime sodium</i>)	SP	PA
SPECTRACEF TABS (<i>cefditoren pivoxil</i>)	3	1 bal on hand,
SUPRAX CAPS 400 MG (<i>cefixime</i>)	GP	

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

Drug Name	Drug Tier	Requirements/ Limits
SUPRAX CHEW 100 MG, 200 MG (<i>cefixime</i>)	3	
SUPRAX SUSR 100 MG/5ML, 200 MG/5ML (<i>cefixime</i>)	GP	
SUPRAX SUSR 500 MG/5ML (<i>cefixime</i>)	3	
Cephalosporins - 4th Generation		
<i>cefepime hcl solr</i>	SP	PA
CEFEPIME SOLN (<i>cefepime hcl</i>)	SP	PA
CEFEPIME/DEXTROSE SOLR (<i>cefepime hcl-dextrose</i>)	SP	PA
MAXIPIME SOLR (<i>cefepime hcl</i>)	SP	PA
Cephalosporins - 5th Generation		
TEFLARO SOLR (<i>ceftaroline fosamil</i>)	SP	PA
CONTRACEPTIVES - Drugs to Prevent Pregnancy		
Combination Contraceptives - Oral		
(Desogestrel & Ethinyl Estradiol) APRI, RECLIPSEN, KALLIGA, JULEBER, ISIBLOOM, ENSKYCE, EMOQUETTE, CYRED EQ, CYRED TABS	PV	PV
(Desogestrel-Ethinyl Estradiol (Biphasic)) AZURETTE, VOLNEA, VIORELE, SIMLIYA, PIMTREA, KIMIDESS, KARIVA, BEKYREE TABS	PV	PV
(Desogestrel-Ethinyl Estradiol (Triphasic)) CAZANT, VELIVET TABS	PV	PV
(Drospirenone-Ethinyl Estradiol) GIANVI, ZUMANDIMINE, ZARAH, SYEDA, OCELLA, NIKKI, LORYNA, LO-ZUMANDIMINE, JASMIEL TABS	PV	PV

Drug Name	Drug Tier	Requirements/ Limits
(Drospirenone-Ethinyl Estradiol-Levomefolate Calcium) RAJANI, TYDEMY TABS	PV	PV
(Ethinodiol Diacet & Eth Estrad) KELNOR 1/35, ZOVIA 1/35E, KELNOR 1/50 TABS	PV	PV
(Levonorgestrel & Eth Estradiol) AFIRMELLE, VIENVA, SRONYX, PORTIA-28, ORSYTHIA, MARLISSA, LUTERA, LILLOW, LEVORA 0.15/30-28, LESSINA, LARISSIA, KURVELO, FALMINA, DELYLA, CHATEAL EQ, CHATEAL, AYUNA, AVIANE, AUBRA EQ, AUBRA, ALTAVERA TABS	PV	PV
(Levonorgestrel-Eth Estradiol (Triphasic)) ENPRESSE-28, TRIVORA-28, MYZILRA, LEVONEST TABS	PV	PV
(Levonorgestrel-Ethinyl Estradiol (91-Day)) AMETHIA, SIMPESE, SETLAKIN, RIVELSA, QUASENSE, LOJAIMIESS, JOLESSA, JAIMIESS, INTROVALE, FAYOSIM, DAYSEE, CAMRESE LO, CAMRESE, ASHLYNA, AMETHIA LO TABS	PV	PV
(Levonorgestrel-Ethinyl Estradiol (Continuous)) AMETHYST TABS	PV	PV

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

Drug Name	Drug Tier	Requirements/ Limits
(Norethin Acet & Estrad-Fe) AUROVELA 24 FE, TARINA FE 1/20 EQ, TARINA FE 1/20, TARINA 24 FE, MICROGESTIN FE 1.5/30, MICROGESTIN FE, LARIN FE 1/20, LARIN FE 1.5/30, LARIN 24 FE, JUNEL FE 24, JUNEL FE 1/20, JUNEL FE 1.5/30, HAILEY FE 1/20, HAILEY FE 1.5/30, HAILEY 24 FE, BLISOVI FE 1/20, BLISOVI FE 1.5/30, BLISOVI 24 FE, AUROVELA FE 1/20, AUROVELA FE 1.5/30 TABS	PV	PV
(Norethin Acet & Estrad-Fe) MELODETTA 24 FE, MIBELAS 24 FE CHEW	PV	PV
(Norethindrone & Eth Estradiol) NORTREL 0.5/35 (28), NECON 0.5/35-28, DASETTA 1/35, CYCLAFEM 1/35, BRIELLYN, BALZIVA, ALYACEN 1/35, ZENCHENT, WERA, VYFEMLA, PIRMELLA 1/35, PHILITH, NORTREL 1/35 TABS	PV	PV
(Norethindrone & Ethinyl Estradiol-Fe) KAITLIB FE, WYMZYA FE, LAYOLIS FE CHEW	PV	PV
(Norethindrone Acet & Eth Estra) AUROVELA 1.5/30, MICROGESTIN 1.5/30, MICROGESTIN 1/20, LARIN 1/20, LARIN 1.5/30, JUNEL 1/20, JUNEL 1.5/30, HAILEY 1.5/30, AUROVELA 1/20 TABS	PV	PV
(Norethindrone Acetate-Ethinyl Estradiol-Fe) TILIA FE, TRI-LEGEST FE TABS	PV	PV

Drug Name	Drug Tier	Requirements/ Limits
(Norethindrone-Eth Estradiol (Triphasic)) ALYACEN 7/7/7, PIRMELLA 7/7/7, NORTREL 7/7/7, NECON 7/7/7, LEENA, DASETTA 7/7/7, CYCLAFEM 7/7/7, ARANELLE TABS	PV	PV
(Norgestimate-Ethinyl Estradiol (Triphasic)) TRI FEMYNOR, TRINESSA LO, TRINESSA, TRI-VYLIBRA LO, TRI-VYLIBRA, TRI-SPRINTEC, TRI-PREVIFEM, TRI-MILI, TRI-LO-SPRINTEC, TRI-LO-MILI, TRI-LO-MARZIA, TRI-LO-ESTARYLLA, TRI-LINYAH, TRI-ESTARYLLA TABS	PV	PV
(Norgestimate-Ethinyl Estradiol) PREVIFEM, MONONESSA, MONO-LINYAH, MILI, FEMYNOR, ESTARYLLA, VYLIBRA, SPRINTEC 28 TABS	PV	PV
(Norgestrel & Ethinyl Estradiol) OGESTREL, CRYSELLE-28, LOW-OGESTREL, ELINEST TABS	PV	1 bal on hand,; PV
(Norgestrel & Ethinyl Estradiol) OGESTREL, CRYSELLE-28, LOW-OGESTREL, ELINEST TABS	PV	PV
BALCOLTRA TABS (levonorgestrel-ethinyl estradiol-ferrous bisglycinate)	PV	QL(1 ea daily); PV
BEYAZ TABS (drospirenone-ethinyl estradiol-levomefolate calcium)	GP	PV
DESOGEN TABS (desogestrel & ethinyl estradiol)	GP	PV

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

Drug Name	Drug Tier	Requirements/ Limits
desogestrel & ethinyl estradiol tabs	PV	PV
desogestrel-ethinyl estradiol (biphasic) tabs	PV	PV
drospirenone-ethinyl estradiol tabs	PV	PV
drospirenone-ethinyl estradiol-levomefolate calcium tabs	PV	PV
ESTROSTEP FE TABS (norethindrone acetate-ethinyl estradiol-fe)	GP	PV
ethynodiol diacet & eth estrad tabs 1 mg-35 mcg, 1 mg-50 mcg	PV	PV
FALESSA KIT (levonorgestrel-ethinyl estradiol & folic acid)	PV	PA; PV
GENERESS FE CHEW (norethindrone & ethinyl estradiol-fe)	GP	PV
levonorgestrel & eth estradiol tabs	PV	PV
levonorgestrel-eth estradiol (triphasic) tabs	PV	PV
levonorgestrel-ethinyl estradiol (91-day) tabs	PV	PV
levonorgestrel-ethinyl estradiol (continuous) tabs	PV	PV
LO LOESTRIN FE TABS (norethindrone acetate-ethinyl estradiol-fe fum (biphasic))	PV	PV
LOESTRIN 1.5/30-21 TABS (norethindrone acet & eth estra)	GP	PV
LOESTRIN 1/20-21 TABS (norethindrone acet & eth estra)	GP	PV

Drug Name	Drug Tier	Requirements/ Limits
LOESTRIN FE 1.5/30 TABS (norethin acet & estrad-fe)	GP	PV
LOESTRIN FE 1/20 TABS (norethin acet & estrad-fe)	GP	PV
LOSEASONIQUE TABS (levonorgestrel-ethinyl estradiol (91-day))	GP	PV
MINASTRIN 24 FE CHEW (norethin acet & estrad-fe)	PV	PV
MINASTRIN 24 FE CHEW (norethin acet & estrad-fe)	GP	PV
MIRCETTE TABS (desogestrel-ethinyl estradiol (biphasic))	GP	PV
NATAZIA TABS (estradiol valerate-dienogest)	PV	PV
norethin acet & estrad-fe chew	PV	PV
norethin acet & estrad-fe tabs	PV	PV
norethindrone & ethinyl estradiol-fe chew	PV	PV
norethindrone acet & eth estra tabs	PV	PV
norgestimate-ethinyl estradiol (triphasic) tabs	PV	PV
norgestimate-ethinyl estradiol tabs	PV	PV
ORTHO TRI-CYCLEN LO TABS (norgestimate-ethinyl estradiol (triphasic))	GP	PV
ORTHO TRI-CYCLEN TABS (norgestimate-ethinyl estradiol (triphasic))	GP	PV

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

Drug Name	Drug Tier	Requirements/ Limits
ORTHO-CYCLEN TABS (<i>norgestimate-ethinyl estradiol</i>)	GP	PV
ORTHO-NOVUM 1/35 TABS (<i>norethindrone & eth estradiol</i>)	GP	PV
ORTHO-NOVUM 7/7/7 TABS (<i>norethindrone-eth estradiol (triphasic)</i>)	GP	PV
QUARTETTE TABS (<i>levonorgestrel-ethinyl estradiol (91-day)</i>)	GP	PV
SAFYRAL TABS (<i>drospirenone-ethinyl estradiol-levomefolate calcium</i>)	GP	PV
SEASONIQUE TABS (<i>levonorgestrel-ethinyl estradiol (91-day)</i>)	GP	PV
TAYTULLA CAPS (<i>norethin acet & estrad-fe</i>)	PV	PA; PV
TRI-NORINYL 28 TABS (<i>norethindrone-eth estradiol (triphasic)</i>)	GP	PV
YASMIN 28 TABS (<i>drospirenone-ethinyl estradiol</i>)	GP	PV
YAZ TABS (<i>drospirenone-ethinyl estradiol</i>)	GP	PV
Combination Contraceptives - Transdermal		
(Norelgestromin-Ethinyl Estradiol) XULANE PTWK	PV	1 bal on hand,; PV
Combination Contraceptives - Vaginal		
(Etonogestrel-Ethinyl Estradiol) ELURYNG RING	PV	PV
ANNOVERA RING (<i>segesterone acetate-ethinyl estradiol</i>)	PV	PV
<i>etonogestrel-ethinyl estradiol ring</i>	PV	PV

Drug Name	Drug Tier	Requirements/ Limits
NUVARING RING (<i>etonogestrel-ethinyl estradiol</i>)	GP	PV
Copper Contraceptives - IUD		
PARAGARD INTRAUTERINE COPPER CONTRACEPTIVE T380A IUD (<i>copper (iud)</i>)	PV	PV
Emergency Contraceptives		
(Levonorgestrel (Emergency Oc)) AFTERA, TAKE ACTION, REACT, PREVENTEZA, OPTION 2, OPCICON ONE-STEP, NEW DAY, MY WAY, MY CHOICE, ECONTRA ONE-STEP, ECONTRA EZ TABS	PV	PV
ELLA TABS (<i>ulipristal acetate</i>)	PV	PV
<i>levonorgestrel (emergency oc) tabs</i>	PV	PV
PLAN B ONE-STEP TABS (<i>levonorgestrel (emergency oc)</i>)	GP	PV
Progestin Contraceptives - IUD		
KYLEENA IUD (<i>levonorgestrel (iud)</i>)	PV	PV
LILETTA IUD (<i>levonorgestrel (iud)</i>)	PV	PV
MIRENA IUD (<i>levonorgestrel (iud)</i>)	PV	PV
SKYLA IUD (<i>levonorgestrel (iud)</i>)	PV	PV
Progestin Contraceptives - Implants		
NEXPLANON IMPL (<i>etonogestrel</i>)	PV	PV
Progestin Contraceptives - Injectable		
DEPO-PROVERA CONTRACEPTIVE SUSP (<i>medroxyprogesterone acetate (contraceptive)</i>)	GP	PV

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

Drug Name	Drug Tier	Requirements/ Limits
DEPO-PROVERA CONTRACEPTIVE SUSY (<i>medroxyprogesterone acetate (contraceptive)</i>)	GP	PV
DEPO-SUBQ PROVERA 104 SUSY (<i>medroxyprogesterone acetate (contraceptive)</i>)	PV	PV
<i>medroxyprogesterone acetate (contraceptive) susp</i>	PV	PV
<i>medroxyprogesterone acetate (contraceptive) susy</i>	PV	PV
Progestin Contraceptives - Oral		
(Norethindrone (Contraceptive)) CAMILA, TULANA, SHAROBEL, NORLYROC, NORLYDA, NORA-BE, LYZA, JOLIVETTE, JENCYCLA, INCASSIA, HEATHER, ERRIN, DEBLITANE TABS	PV	PV
<i>norethindrone (contraceptive) tabs</i>	PV	PV
ORTHO MICRONOR TABS (<i>norethindrone (contraceptive)</i>)	GP	PV
SLYND TABS (<i>drospirenone</i>)	PV	PV
CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions		
Glucocorticosteroids		
(Dexamethasone) DECADRON ELIX	1	
(Dexamethasone) DECADRON TABS	1	
(Dexamethasone) DEXPAK 10 DAY, TAPERDEX 6-DAY, TAPERDEX 12-DAY, HIDEX 6-DAY, DEXPAK 6 DAY, DEXPAK 13 DAY TBPk	1	

Drug Name	Drug Tier	Requirements/ Limits
<i>budesonide cpep 3 mg</i>	1	
<i>budesonide tb24 9 mg</i>	1	PA
CORTEF TABS (<i>hydrocortisone</i>)	GP	
<i>cortisone acetate tabs</i>	1	1 bal on hand,
<i>dexamethasone elix 0.5 mg/5ml</i>	1	
DEXAMETHASONE INTENSOL CONC (<i>dexamethasone</i>)	2	
<i>dexamethasone sodium phosphate soln 10 mg/ml, 20 mg/5ml, 100 mg/10ml, 120 mg/30ml</i>	SP	PA; 1 bal on hand,
<i>dexamethasone sodium phosphate soln 4 mg/ml, 10 mg/ml, 20 mg/5ml, 100 mg/10ml, 120 mg/30ml</i>	SP	PA
<i>dexamethasone soln 0.5 mg/5ml</i>	1	1 bal on hand,
<i>dexamethasone tabs 0.75 mg, 0.5 mg, 2 mg, 4 mg, 6 mg, 1.5 mg</i>	1	
<i>dexamethasone tabs 1 mg, 2 mg, 4 mg, 6 mg, 1.5 mg</i>	1	1 bal on hand,
<i>dexamethasone tbpk 1.5 mg</i>	1	
ENTOCORT EC CPEP (<i>budesonide</i>)	GP	
<i>hydrocortisone tabs</i>	1	
MEDROL DOSEPAK TBPk (<i>methylprednisolone</i>)	GP	
MEDROL TABS 2 MG (<i>methylprednisolone</i>)	2	

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

Drug Name	Drug Tier	Requirements/ Limits
MEDROL TABS 4 MG, 8 MG, 16 MG, 32 MG (<i>methylprednisolone</i>)	GP	
<i>methylprednisolone tabs</i>	1	
<i>methylprednisolone tbpk</i>	1	
MILLIPRED DP TBPk (<i>prednisolone</i>)	3	
MILLIPRED SOLN 10 MG/5ML (<i>prednisolone sodium phosphate</i>)	GP	
MILLIPRED TABS 5 MG (<i>prednisolone</i>)	2	
ORAPRED ODT TBPk (<i>prednisolone sodium phosphate</i>)	GP	
<i>prednisolone sodium phosphate soln or 10 mg/5ml, 15 mg/5ml, 20 mg/5ml</i>	1	
<i>prednisolone sodium phosphate soln or 25 mg/5ml</i>	1	1 bal on hand,
<i>prednisolone sodium phosphate tbdp or 10 mg, 15 mg, 30 mg</i>	1	
<i>prednisolone soln</i>	1	1 bal on hand,
PREDNISONE INTENSOL CONC (<i>prednisone</i>)	2	
<i>prednisone soln 5 mg/5ml</i>	1	1 bal on hand,
<i>prednisone tabs 1 mg, 5 mg, 10 mg, 20 mg, 50 mg, 2.5 mg</i>	1	
<i>prednisone tbpk 5 mg, 10 mg</i>	1	
RAYOS TBEC (<i>prednisone</i>)	3	PA
UCERIS TB24 OR 9 MG (<i>budesonide</i>)	GP	PA

Drug Name	Drug Tier	Requirements/ Limits
VERIPRED 20 SOLN (<i>prednisolone sodium phosphate</i>)	GP	
Mineralocorticoids		
<i>fludrocortisone acetate tabs</i>	1	
COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms		
Antitussives		
(Hydrocodone W/ Homatropine) HYDROMET SYRP	1	
(Hydrocodone W/ Homatropine) TUSSIGON TABS	1	
<i>benzonatate caps</i>	1	
<i>hydrocodone w/ homatropine syrp</i>	1	
<i>hydrocodone w/ homatropine tabs</i>	1	
TESSALON PERLES CAPS (<i>benzonatate</i>)	GP	
Cough/Cold/Allergy Combinations		
(Guaifenesin-Codeine) CHERATUSSIN AC, GUAIFENESIN AC, GUAIAATUSSIN AC SYRP	1	
(Guaifenesin-Codeine) G TUSSIN AC, VIRTUSSIN A/C, ROBAFEN AC, MAXI-TUSS AC SOLN	1	
(Guaifenesin-Codeine) VIRTUSSIN AC/ALC LIQD	1	
(Phenylephrine W/ Dm-Gg) BIOGTUSS, GILTUSS PEDIATRIC LIQD	1	RX/OTC
(Promethazine & Phenylephrine) PROMETHAZINE VC PLAIN SOLN	1	
(Promethazine-Phenylephrine-Codeine) PROMETHAZINE VC/CODEINE SYRP	1	

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

Drug Name	Drug Tier	Requirements/ Limits
(Pseudoephedrine W/ Codeine-Gg) GUAIFENESIN DAC, VIRTUSSIN DAC SOLN	1	
ACTIDOM DMX LIQD (<i>phenylephrine w/ dm-gg</i>)	3	
BIO-DTUSS DMX LIQD (<i>pseudoephed-bromphen-dm</i>)	3	
CARBAPHEN 12 LIQD (<i>phenylephrine-chlorpheniramine-carbetapentane</i>)	3	
CARBAPHEN 12 PED SUSP (<i>phenylephrine-chlorpheniramine-carbetapentane</i>)	3	
CLARINEX-D 12 HOUR TB12 (<i>desloratadine-pseudoephedrine</i>)	3	PA
CODITUSSIN AC LIQD (<i>guaifenesin-codeine</i>)	3	
DECON-G LIQD (<i>phenylephrine-brompheniramine-guaifenesin</i>)	3	
DOCTOR MANZANILLA PE SYRUP ANTIHISTAMINE/DECON GESTANT LIQD (<i>triprolidine-phenylephrine</i>)	3	
DOMETUSS-DMX LIQD (<i>phenylephrine w/ dm-gg</i>)	3	
EXACTUSS LIQD (<i>phenylephrine w/ dm-gg</i>)	GP	RX/OTC
EXACTUSS TR TABS (<i>phenylephrine w/ dm-gg</i>)	3	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
EXAPHEX TR TABS (<i>phenylephrine-guaifenesin</i>)	3	RX/OTC
GILPHEX TR TABS (<i>phenylephrine-guaifenesin</i>)	3	RX/OTC
GILTUSS COUGH & COLD TABS (<i>phenylephrine w/ dm-gg</i>)	3	RX/OTC
GILTUSS LIQD (<i>phenylephrine w/ dm-gg</i>)	GP	RX/OTC
GILTUSS SINUS & CONGESTION TABS (<i>phenylephrine-guaifenesin</i>)	3	RX/OTC
GILTUSS TR TABS (<i>phenylephrine w/ dm-gg</i>)	3	RX/OTC
<i>guaifenesin-codeine soln</i>	1	
HISTEX-PE SYRP (<i>triprolidine-phenylephrine</i>)	GP	
<i>hydrocodone polistirex-chlorpheniramine polistirex lqcr</i>	1	
<i>hydrocodone polistirex-chlorpheniramine polistirex suer</i>	1	
NEOTUSS PLUS LIQD (<i>phenylephrine-chlorphen-dm</i>)	3	
<i>promethazine & phenylephrine syrup</i>	1	
<i>promethazine & phenylephrine syrup</i>	1	1 bal on hand,
<i>promethazine w/codeine soln</i>	1	
<i>promethazine w/codeine syrup</i>	1	

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

Drug Name	Drug Tier	Requirements/ Limits
<i>promethazine-dm soln</i>	1	1 bal on hand,
<i>promethazine-dm syrp</i>	1	
<i>promethazine-phenylephrine-codeine syrp</i>	1	
<i>promethazine-phenylephrine-codeine syrp</i>	1	1 bal on hand,
<i>pseudoephed-cpm w/ hydrocod soln</i>	1	1 bal on hand,
SEMPREX-D CAPS (<i>acrivastine & pseudoephedrine</i>)	3	
TUSSICAPS CP12 (<i>hydrocodone polistirex-chlorpheniramine polistirex</i>)	3	
TUSSIONEX PENNKINETIC EXTENDED RELEASE SUER (<i>hydrocodone polistirex-chlorpheniramine polistirex</i>)	GP	
TUSSLIN LIQD (<i>phenylephrine w/ dm-gg</i>)	3	RX/OTC
TUSSLIN PEDIATRIC LIQD (<i>phenylephrine w/ dm-gg</i>)	3	RX/OTC
Misc. Respiratory Inhalants		
(Sodium Chloride (Inhalant)) NEBUSAL NEBU 3 %	1	
(Sodium Chloride (Inhalant)) PULMOSAL NEBU	1	
HYPER-SAL NEBU (<i>sodium chloride (inhalant)</i>)	GP	

Drug Name	Drug Tier	Requirements/ Limits
HYPERSAL NEBU 3.5 % (<i>sodium chloride (inhalant)</i>)	3	
HYPERSAL NEBU 7 % (<i>sodium chloride (inhalant)</i>)	GP	
NEBUSAL NEBU 6 % (<i>sodium chloride (inhalant)</i>)	3	
<i>sodium chloride (inhalant) nebu</i>	1	
Mucolytics		
<i>acetylcysteine soln</i>	1	
DERMATOLOGICALS - Drugs to Treat Skin Conditions		
Acne Products		
(Benzoyl Peroxide) BENZEPRO CREAMY WASH, PR BENZOYL PEROXIDE WASH, BP WASH LIQD	1	
(Clindamycin Phosphate (Topical)) CLINDACIN ETZ PLEDGETS, CLINDACIN-P SWAB	1	
(Clindamycin Phosphate-Benzoyl Peroxide (Refrigerate)) NEUAC GEL	1	
(Erythromycin (Acne Aid)) ERY PADS	1	1 bal on hand,
(Isotretinoin) AMNESTEEM, ZENATANE, MYORISAN CAPS	1	Greater than 5 months requires PA;QL(2 ea daily)
(Isotretinoin) CLARAVIS CAPS 10 MG, 20 MG, 30 MG, 40 MG	1	Greater than 5 months requires PA;QL(2 ea daily)
(Sulfacetamide Sodium W/ Sulfur) AVAR CLEANSER, SULFAMEZ WASH, ROSANIL CLEANSER, BP 10-1 EMUL	1	

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

Drug Name	Drug Tier	Requirements/ Limits
(Sulfacetamide Sodium W/ Sulfur) AVAR-E EMOLLIENT, SSS 10%-5%, AVAR-E GREEN CREA	1	
(Sulfacetamide Sodium W/ Sulfur) SSS 10-5 FOAM	1	1 bal on hand,
(Sulfacetamide Sodium W/ Sulfur) SULFACLEANSE 8/4 SUSP	1	
(Sulfacetamide Sodium-Sulfur In Urea Vehicle) BP CLEANSING WASH EMUL	1	1 bal on hand,
(Tretinoin) AVITA CREA	1	
(Tretinoin) AVITA GEL	1	
ABSORICA CAPS (<i>isotretinoin</i>)	3	PA; Limited to 5 months of treatment;QL(2 ea daily)
ABSORICA LD CAPS (<i>isotretinoin micronized</i>)	3	PA; Limited to 5 months of treatment;QL(2 ea daily)
ACZONE GEL 5 % (<i>dapsone (topical)</i>)	GP	PA
ACZONE GEL 7.5 % (<i>dapsone (topical)</i>)	GP	PA; QL(2 gm daily)
<i>adapalene crea 0.1 %</i>	1	Limit 45gms per month;QL(1.5 gm daily)
<i>adapalene gel 0.1 %</i>	1	Limit 45gms per month;QL(1.5 gm daily); RX/OTC
<i>adapalene gel 0.3 %</i>	1	Limit 45gms per month;QL(1.5 gm daily)
<i>adapalene lotn 0.1 %</i>	1	1 bal on hand,
<i>adapalene-benzoyl peroxide gel</i>	1	
ATRALIN GEL (<i>tretinoin</i>)	GP	

Drug Name	Drug Tier	Requirements/ Limits
AVAR LS CLEANSER LIQD (<i>sulfacetamide sodium w/ sulfur</i>)	GP	
AVAR LS PADS (<i>sulfacetamide sodium w/ sulfur</i>)	3	
AVAR PADS (<i>sulfacetamide sodium w/ sulfur</i>)	3	
AVAR-E LS CREA (<i>sulfacetamide sodium w/ sulfur</i>)	GP	
AZELEX CREA (<i>azelaic acid (acne)</i>)	3	
BENZACLIN GEL (<i>clindamycin phosphate-benzoyl peroxide</i>)	GP	
BENZACLIN WITH PUMP GEL (<i>clindamycin phosphate-benzoyl peroxide</i>)	GP	
BENZAMYCIN GEL (<i>benzoyl peroxide-erythromycin</i>)	GP	
<i>benzoyl peroxide-erythromycin gel</i>	1	
CLEOCIN-T GEL (<i>clindamycin phosphate (topical)</i>)	3	
CLEOCIN-T LOTN (<i>clindamycin phosphate (topical)</i>)	GP	
CLEOCIN-T SOLN (<i>clindamycin phosphate (topical)</i>)	GP	
CLEOCIN-T SWAB (<i>clindamycin phosphate (topical)</i>)	GP	
CLINDACIN ETZ KIT (<i>clindamycin phosphate & cleanser</i>)	3	

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

Drug Name	Drug Tier	Requirements/ Limits
CLINDACIN PAC KIT (<i>clindamycin phosphate & cleanser</i>)	3	
CLINDAGEL GEL (<i>clindamycin phosphate (topical)</i>)	3	1 bal on hand,
<i>clindamycin phosphate (topical) foam</i>	1	
<i>clindamycin phosphate (topical) gel</i>	1	
<i>clindamycin phosphate (topical) gel</i>	1	1 bal on hand,
<i>clindamycin phosphate (topical) lotn</i>	1	
<i>clindamycin phosphate (topical) soln</i>	1	
<i>clindamycin phosphate (topical) swab</i>	1	
<i>clindamycin phosphate-benzoyl peroxide (refrigerate) gel</i>	1	
<i>clindamycin phosphate-benzoyl peroxide gel 1 %-5 %</i>	1	
<i>clindamycin phosphate-tretinoin gel</i>	1	
<i>dapsone (topical) gel 5 %</i>	1	PA
<i>dapsone (topical) gel 7.5 %</i>	1	PA; QL(2 gm daily)
DIFFERIN CREA 0.1 % (<i>adapalene</i>)	GP	Limit 45gms per month;QL(1.5 gm daily)
DIFFERIN GEL 0.1 % (<i>adapalene</i>)	GP	Limit 45gms per month;QL(1.5 gm daily); RX/OTC
DIFFERIN GEL 0.3 % (<i>adapalene</i>)	GP	Limit 45gms per month;QL(1.5 gm daily)

Drug Name	Drug Tier	Requirements/ Limits
DIFFERIN LOTN 0.1 % (<i>adapalene</i>)	3	
DUAC GEL (<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>)	GP	
EPIDUO GEL (<i>adapalene-benzoyl peroxide</i>)	NF	
ERYGEL GEL (<i>erythromycin (acne aid)</i>)	GP	
<i>erythromycin (acne aid) gel</i>	1	
<i>erythromycin (acne aid) pads</i>	1	
<i>erythromycin (acne aid) soln</i>	1	
EVOCLIN FOAM (<i>clindamycin phosphate (topical)</i>)	GP	
FABIOR FOAM (<i>tazarotene (acne)</i>)	3	Limit 50gms per month;QL(1.67 gm daily)
<i>isotretinoin caps</i>	1	Greater than 5 months requires PA;QL(2 ea daily)150 rtl MAX day(s) supply,365 rtl lmt day(s),
KLARON LOTN (<i>sulfacetamide sodium (acne)</i>)	GP	
NEUTROGENA CLEAR PORE CLEANSER/MASK LIQD (<i>benzoyl peroxide</i>)	3	
PLEXION CLEANSER LIQD (<i>sulfacetamide sodium w/ sulfur</i>)	GP	

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

Drug Name	Drug Tier	Requirements/ Limits
PLEXION CLEANSING CLOTHS PADS (<i>sulfacetamide sodium w/ sulfur</i>)	3	
PLEXION CREA (<i>sulfacetamide sodium w/ sulfur</i>)	GP	
PLEXION LOTN (<i>sulfacetamide sodium w/ sulfur</i>)	GP	
RETIN-A CREA (<i>tretinoin</i>)	GP	
RETIN-A GEL (<i>tretinoin</i>)	GP	
RETIN-A MICRO GEL 0.04 %, 0.1 % (<i>tretinoin microsphere</i>)	GP	
RETIN-A MICRO PUMP GEL 0.04 %, 0.1 % (<i>tretinoin microsphere</i>)	GP	
RIAX FOAM (<i>benzoyl peroxide</i>)	3	
SODIUM SULFACETAMIDE/SULFUR CLEANSER IN UREA EMUL (<i>sulfacetamide sodium-sulfur in urea vehicle</i>)	3	
SODIUM SULFACETAMIDE/SULFUR SUSP (<i>sulfacetamide sodium w/ sulfur</i>)	3	
<i>sulfacetamide sodium (acne) lotn</i>	1	
<i>sulfacetamide sodium w/ sulfur crea 2 %-10 %, 5 %-10 %, 4.8 %-9.8 %</i>	1	
<i>sulfacetamide sodium w/ sulfur emul 5 %-10 %</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
<i>sulfacetamide sodium w/ sulfur liqd 4 %-9 %, 2 %-10 %, 4.5 %-9 %, 4.8 %-9.8 %</i>	1	
<i>sulfacetamide sodium w/ sulfur lotn 4.8 %-9.8 %</i>	1	
<i>sulfacetamide sodium w/ sulfur lotn 5 %-10 %</i>	1	QL(1 gm daily) ¹ bal on hand,
<i>sulfacetamide sodium w/ sulfur pads 4 %-10 %, 4 %-4 %-10 %-10 %</i>	1	
<i>sulfacetamide sodium w/ sulfur susp 4 %-8 %</i>	1	
SUMADAN WASH LIQD (<i>sulfacetamide sodium w/ sulfur</i>)	GP	
SUMAXIN PADS (<i>sulfacetamide sodium w/ sulfur</i>)	GP	
SUMAXIN TS SUSP (<i>sulfacetamide sodium w/ sulfur</i>)	GP	
SUMAXIN WASH LIQD (<i>sulfacetamide sodium w/ sulfur</i>)	GP	
TRETIN-X CREA (<i>tretinoin</i>)	3	
<i>tretinoin crea</i>	1	
<i>tretinoin gel</i>	1	
<i>tretinoin microsphere gel</i>	1	
VELTIN GEL (<i>clindamycin phosphate-tretinoin</i>)	3	
ZIANA GEL (<i>clindamycin phosphate-tretinoin</i>)	GP	
Agents for External Genital and Perianal Warts		

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

Drug Name	Drug Tier	Requirements/ Limits
VEREGEN OINT (<i>sinecatechins</i>)	3	Limit 30gms per month;QL(1 gm daily)
Anti-inflammatory Agents - Topical		
(Diclofenac Sodium (Topical)) KLOFENSAID II SOLN	1	QL(5 ml daily)
<i>diclofenac epolamine ptch</i>	1	1 bal on hand,
<i>diclofenac sodium (topical) gel 1 %</i>	1	RX/OTC
<i>diclofenac sodium (topical) soln 1.5 %</i>	1	QL(5 ml daily)
FLECTOR PTCH (<i>diclofenac epolamine</i>)	3	
FLECTOR PTCH (<i>diclofenac epolamine</i>)	3	1 bal on hand,
PENNSAID SOLN (<i>diclofenac sodium (topical)</i>)	3	PA; Limit 1 bottle per month;QL(4 gm daily)
VOLTAREN GEL (<i>diclofenac sodium (topical)</i>)	NF	RX/OTC
Antibiotics - Topical		
ALTABAX OINT (<i>retapamulin</i>)	3	
CENTANY AT KIT (<i>mupirocin</i>)	3	
CENTANY OINT (<i>mupirocin</i>)	2	
CORTISPORIN CREA (<i>neomycin-polymyxin-hc</i>)	3	
CORTISPORIN OINT (<i>bacitracin-polymyxin-neomycin hc</i>)	3	
<i>gentamicin sulfate (topical) crea</i>	1	
<i>gentamicin sulfate (topical) oint</i>	1	
<i>mupirocin oint</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
NEO-SYNALAR CREA (<i>neomycin sulfate-fluocinolone acetonide</i>)	3	
Antifungals - Topical		
(Ciclopirox Olamine) CICLODAN CREA	1	
(Ciclopirox) CICLOPIROX TREATMENT KIT	1	1 bal on hand,
(Clotrimazole (Topical)) CVS CLOTRIMAZOLE MAXIMUMSTRENGTH, FUNGICURE INTENSIVE WITHNAILGUARD SOLN	1	RX/OTC
(Iodoquinol-Hc) DERMAZENE CREA	1	
(Iodoquinol-Hydrocortisone In Aloe Vehicle) IODOQUIMEZ-HC CREA	1	
(Ketoconazole (Topical)) KETODAN FOAM	1	
ALA-QUIN CREA (<i>clioquinol-hc</i>)	3	
ALCORTIN A GEL (<i>iodoquinol-hydrocortisone-aloe polysaccharide</i>)	GP	
CICLODAN SOLUTION KIT KIT (<i>ciclopirox</i>)	3	
<i>ciclopirox gel</i>	1	
<i>ciclopirox olamine crea</i>	1	
<i>ciclopirox olamine susp</i>	1	
<i>ciclopirox sham</i>	1	
<i>clotrimazole (topical) soln</i>	1	RX/OTC
<i>clotrimazole w/ betamethasone crea</i>	1	Limit 45gms per month;QL(1.5 gm daily)
<i>clotrimazole w/ betamethasone lotn</i>	1	QL(2 ml daily)
<i>econazole nitrate crea</i>	1	

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

Drug Name	Drug Tier	Requirements/ Limits
ERTACZO CREA (<i>sertaconazole nitrate</i>)	3	PA
EXELDERM CREA (<i>sulconazole nitrate</i>)	3	1 bal on hand,
EXELDERM SOLN (<i>sulconazole nitrate</i>)	2	1 bal on hand,
EXELDERM SOLN (<i>sulconazole nitrate</i>)	2	
EXODERM LOTN (<i>sodium thiosulfate-salicylic acid</i>)	3	
EXTINA FOAM (<i>ketoconazole (topical)</i>)	GP	
HALOTIN CREA (<i>haloprogin</i>)	3	
<i>iodoquinol-hc crea</i>	1	
<i>iodoquinol-hydrocortisone in aloe vehicle crea</i>	1	
<i>iodoquinol-hydrocortisone-aloe polysaccharide gel</i>	1	
<i>ketoconazole (topical) crea</i>	1	QL(2 gm daily)
<i>ketoconazole (topical) foam</i>	1	
<i>ketoconazole (topical) sham</i>	1	
LOPROX CREA (<i>ciclopirox olamine</i>)	GP	
LOPROX SHAMPOO SHAM (<i>ciclopirox</i>)	GP	
LOPROX SUSP (<i>ciclopirox olamine</i>)	GP	
LOTRISONE CREA (<i>clotrimazole w/ betamethasone</i>)	GP	Limit 45gms per month;QL(1.5 gm daily)
<i>luliconazole crea</i>	1	1 bal on hand,
LUZU CREA (<i>luliconazole</i>)	3	1 bal on hand,

Drug Name	Drug Tier	Requirements/ Limits
<i>miconazole-zinc oxide-white petrolatum oint</i>	1	1 bal on hand,
<i>naftifine hcl crea 1 %, 2 %</i>	1	1 bal on hand,
<i>naftifine hcl crea 1 %, 2 %</i>	1	
<i>naftifine hcl gel 1 %</i>	1	
NAFTIN CREA 2 % (<i>naftifine hcl</i>)	GP	
NAFTIN GEL 1 % (<i>naftifine hcl</i>)	GP	
NAFTIN GEL 1 %, 2 % (<i>naftifine hcl</i>)	3	
NIZORAL SHAM (<i>ketoconazole (topical)</i>)	GP	
<i>nystatin (topical) crea</i>	1	
<i>nystatin (topical) oint</i>	1	
<i>nystatin-triamcinolone crea</i>	1	
<i>nystatin-triamcinolone oint</i>	1	
<i>oxiconazole nitrate crea</i>	1	
OXISTAT CREA (<i>oxiconazole nitrate</i>)	NF	
OXISTAT LOTN (<i>oxiconazole nitrate</i>)	3	
QUINJA GEL (<i>iodoquinol-aloe polysaccharides</i>)	3	
<i>sulconazole nitrate crea</i>	1	1 bal on hand,
<i>sulconazole nitrate soln</i>	1	1 bal on hand,
VUSION OINT (<i>miconazole-zinc oxide-white petrolatum</i>)	3	1 bal on hand,
VYTON CREA (<i>iodoquinol-hydrocortisone in aloe vehicle</i>)	GP	

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

Drug Name	Drug Tier	Requirements/ Limits
XOLEGEL GEL (<i>ketoconazole (topical)</i>)	3	
Antineoplastic or Premalignant Lesion Agents -		
CARAC CREA (<i>fluorouracil (topical)</i>)	2	1 bal on hand,
<i>diclofenac sodium (actinic keratoses) gel</i>	1	PA
EFUDEX CREA (<i>fluorouracil (topical)</i>)	AC	
FLUOROPLEX CREA (<i>fluorouracil (topical)</i>)	2	
<i>fluorouracil (topical) crea 0.5 %</i>	1	1 bal on hand,
<i>fluorouracil (topical) crea 5 %</i>	AC	
<i>fluorouracil (topical) soln 2 %</i>	1	1 bal on hand,
<i>fluorouracil (topical) soln 5 %</i>	AC	1 bal on hand,
PANRETIN GEL (<i>alitretinoin</i>)	AC	PA
PICATO GEL (<i>ingenol mebutate</i>)	AC	
TARGRETIN GEL EX 1 % (<i>bexarotene (topical)</i>)	AC	
TOLAK CREA (<i>fluorouracil (topical)</i>)	AC	PA
VALCHLOR GEL (<i>mechlorethamine hcl (topical)</i>)	AC	PA
Antipruritics - Topical		
<i>doxepin hcl (antipruritic) crea</i>	3	1 bal on hand,
PRUDOXIN CREA (<i>doxepin hcl (antipruritic)</i>)	3	1 bal on hand,
ZONALON CREA (<i>doxepin hcl (antipruritic)</i>)	NF	1 bal on hand,

Drug Name	Drug Tier	Requirements/ Limits
ZONALON CREA (<i>doxepin hcl (antipruritic)</i>)	3	1 bal on hand,
Antipsoriatics		
(Calcipotriene) CALCITRENE OINT	1	QL(5 gm daily)
<i>acitretin caps</i>	1	
<i>calcipotriene crea</i>	1	QL(5 gm daily)
CALCIPOTRIENE FOAM (<i>calcipotriene</i>)	3	PA
<i>calcipotriene oint</i>	1	QL(5 gm daily)
<i>calcipotriene soln</i>	1	
<i>calcitriol (topical) oint</i>	1	Limited 100 gms per month;QL(3.4 gm daily)1 bal on hand,
COSENTYX SENSOREADY PEN SOAJ (<i>secukinumab</i>)	SP	PA
COSENTYX SOSY (<i>secukinumab</i>)	SP	PA
DOVONEX CREA (<i>calcipotriene</i>)	GP	QL(5 gm daily)
ILUMYA SOSY (<i>tildrakizumab-asmn</i>)	SP	PA
<i>methoxsalen rapid caps</i>	1	
OXSORALEN ULTRA CAPS (<i>methoxsalen rapid</i>)	GP	
SILIQ SOSY (<i>brodalumab</i>)	SP	PA
SKYRIZI PSKT (<i>risankizumab-rzaa</i>)	SP	PA
SORIATANE CAPS (<i>acitretin</i>)	GP	
SORILUX FOAM (<i>calcipotriene</i>)	3	PA
STELARA SOLN (<i>ustekinumab</i>)	SP	PA

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

Drug Name	Drug Tier	Requirements/ Limits
STELARA SOSY (<i>ustekinumab</i>)	SP	PA
TALTZ SOAJ (<i>ixekizumab</i>)	SP	PA
TALTZ SOSY (<i>ixekizumab</i>)	SP	PA
<i>tazarotene crea</i>	1	
TAZORAC CREA 0.05 % (<i>tazarotene</i>)	2	
TAZORAC CREA 0.1 % (<i>tazarotene</i>)	NF	
TAZORAC GEL 0.05 %, 0.1 % (<i>tazarotene</i>)	2	
TREMFYA SOPN (<i>guselkumab</i>)	SP	PA
TREMFYA SOSY (<i>guselkumab</i>)	SP	PA
VECTICAL OINT (<i>calcitriol (topical)</i>)	3	Limited 100 gms per month;QL(3.4 gm daily)1 bal on hand,
Antiseborrheic Products		
(Sulfacetamide Sodium) SEB-PREV WASH LIQD	1	
(Sulfacetamide Sodium) SODIUM SULFACETAMIDE WASH LIQD 10 %	1	
OVACE PLUS SHAM 10 % (<i>sulfacetamide sodium</i>)	GP	
OVACE PLUS WASH LIQD (<i>sulfacetamide sodium</i>)	GP	
OVACE WASH LIQD (<i>sulfacetamide sodium</i>)	GP	
<i>selenium sulfide lotn</i>	1	
<i>selenium sulfide sham</i>	1	
SODIUM SULFACETAMIDE WASH LIQD 0.5 %-10 % (<i>sulfacetamide sodium in bakuchiol vehicle</i>)	3	

Drug Name	Drug Tier	Requirements/ Limits
<i>sulfacetamide sodium liqd</i>	1	
<i>sulfacetamide sodium sham</i>	1	
Antivirals - Topical		
<i>acyclovir topical crea</i>	1	
<i>acyclovir topical oint</i>	1	QL(1 gm daily)
DENAVIR CREA (<i>penciclovir</i>)	3	Limit 5gms per month;QL(0.17 gm daily)
XERESE CREA (<i>acyclovir-hydrocortisone</i>)	3	Limit 5gms per month;QL(0.17 gm daily)
ZOVIRAX CREA EX 5 % (<i>acyclovir topical</i>)	GP	
ZOVIRAX OINT EX 5 % (<i>acyclovir topical</i>)	GP	QL(1 gm daily)
Burn Products		
(Silver Sulfadiazine) SSD CREA	1	
<i>mafenide acetate pack</i>	1	
SILVADENE CREA (<i>silver sulfadiazine</i>)	GP	
<i>silver sulfadiazine crea</i>	1	
SULFAMYLON CREA 85 MG/GM (<i>mafenide acetate</i>)	3	
SULFAMYLON PACK 5 % (<i>mafenide acetate</i>)	GP	
Corticosteroids - Topical		
(Clobetasol Propionate Emollient Base) CLOBETASOL PROPIONATE E, CLOBETASOL PROPIONATE EMOLLIENT CREA	1	
(Clobetasol Propionate Emulsion) TOVET FOAM	1	

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

Drug Name	Drug Tier	Requirements/ Limits
(Clobetasol Propionate) CLODAN SHAM	1	
(Flurandrenolide) NOLIX CREA	1	
(Fluticasone Propionate) BESER LOTN	1	
(Hydrocortisone (Topical)) ALA-CORT CREA	1	
(Hydrocortisone (Topical)) CORTIZONE-10, SM HYDROCORTISONE MAXIMUM STRENGTH, SB HYDROCORTISONE MAXIMUM STRENGTH, RA ANTI-ITCH/MAXIMUM STRENGTH, KP HYDROCORTISONE MAXIMUM STRENGTH, HYDROCORTISONE IN ABSORBASE, HYDROCORTISONE 1% IN ABSORBASE, GNP HYDROCORTISONE MAXIMUM STRENGTH, EQL ANTI-ITCH MAXIMUM STRENGTH, CVS CORTISONE MAXIMUM STRENGTH OINT	1	RX/OTC
(Pramoxine-Hc) MEZPAROX-HC CREA	1	
(Triamcinolone Acetonide (Topical)) TRIANEX, TRIANEX OINT	1	
(Triamcinolone Acetonide (Topical)) TRIDERM CREA	1	
ALA SCALP LOTN (<i>hydrocortisone (topical)</i>)	3	
<i>alclometasone dipropionate crea</i>	1	
<i>alclometasone dipropionate oint</i>	1	
<i>amcinonide crea</i>	1	1 bal on hand,
<i>amcinonide lotn</i>	1	1 bal on hand,

Drug Name	Drug Tier	Requirements/ Limits
AMCINONIDE OINT (<i>amcinonide</i>)	3	
APEXICON E CREA (<i>diflorasone diacetate emollient base</i>)	2	
<i>betamethasone dipropionate (topical) crea</i>	1	
<i>betamethasone dipropionate (topical) lotn</i>	1	
<i>betamethasone dipropionate (topical) oint</i>	1	
<i>betamethasone dipropionate augmented crea</i>	1	
<i>betamethasone dipropionate augmented gel</i>	1	1 bal on hand,
<i>betamethasone dipropionate augmented gel</i>	1	
<i>betamethasone dipropionate augmented lotn</i>	1	
<i>betamethasone dipropionate augmented oint</i>	1	
<i>betamethasone valerate crea</i>	1	
<i>betamethasone valerate foam</i>	1	
<i>betamethasone valerate lotn</i>	1	
<i>betamethasone valerate oint</i>	1	
<i>calcipotriene-betamethasone dipropionate oint</i>	1	ST

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

Drug Name	Drug Tier	Requirements/ Limits
<i>calcipotriene-betamethasone dipropionate susp</i>	1	ST; QL(2 gm daily)1 bal on hand,
<i>calcipotriene-betamethasone dipropionate susp</i>	1	ST; QL(2 gm daily)
CAPEX SHAM (<i>fluocinolone acetonide</i>)	2	
<i>clobetasol propionate crea</i>	1	
<i>clobetasol propionate emollient base crea</i>	1	
<i>clobetasol propionate emulsion foam</i>	1	
<i>clobetasol propionate foam</i>	1	
<i>clobetasol propionate gel</i>	1	
<i>clobetasol propionate liqd</i>	1	
<i>clobetasol propionate lotn</i>	1	
<i>clobetasol propionate oint</i>	1	
<i>clobetasol propionate sham</i>	1	
<i>clobetasol propionate soln</i>	1	
CLOBEX LIQD (<i>clobetasol propionate</i>)	GP	
CLOBEX LOTN (<i>clobetasol propionate</i>)	GP	
CLOBEX SHAM (<i>clobetasol propionate</i>)	GP	
<i>clocortolone pivalate crea</i>	1	1 bal on hand,
CLODERM CREA (<i>clocortolone pivalate</i>)	3	
CLODERM CREA (<i>clocortolone pivalate</i>)	3	1 bal on hand,

Drug Name	Drug Tier	Requirements/ Limits
CLODERM PUMP CREA (<i>clocortolone pivalate</i>)	3	
CORDRAN CREA 0.05 % (<i>flurandrenolide</i>)	GP	
CORDRAN TAPE 4 MCG/SQCM (<i>flurandrenolide</i>)	3	
CORTANE-B LOTN (<i>hydrocortisone-pramoxine-chloroxylenol</i>)	3	
CUTIVATE LOTN (<i>fluticasone propionate</i>)	GP	
DERMA-SMOOTH/FS BODY OIL (<i>fluocinolone acetonide</i>)	GP	
DERMA-SMOOTH/FS SCALP OIL (<i>fluocinolone acetonide</i>)	GP	
DERMASORB TA KIT (<i>triamcinolone acetonide & emollient</i>)	3	
DESONATE GEL (<i>desonide</i>)	3	
DESONATE GEL (<i>desonide</i>)	GP	
<i>desonide crea</i>	1	
<i>desonide gel</i>	1	
<i>desonide lotn</i>	1	
<i>desonide oint</i>	1	
DESOWEN CREA (<i>desonide</i>)	GP	
DESOWEN LOTN (<i>desonide</i>)	GP	
DESOXIMETASONE CREA 0.05 % (<i>desoximetasone</i>)	2	
<i>desoximetasone crea 0.05 %, 0.25 %</i>	1	

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

Drug Name	Drug Tier	Requirements/ Limits
<i>desoximetasone gel 0.05 %</i>	1	
<i>desoximetasone liqd 0.25 %</i>	1	
<i>desoximetasone oint 0.05 %, 0.25 %</i>	1	
<i>diflorasone diacetate crea</i>	1	1 bal on hand,
<i>diflorasone diacetate oint</i>	1	
DIPROLENE AF CREA (<i>betamethasone dipropionate augmented</i>)	GP	
DIPROLENE OINT (<i>betamethasone dipropionate augmented</i>)	GP	
ELOCON CREA (<i>mometasone furoate</i>)	GP	
ELOCON OINT (<i>mometasone furoate</i>)	GP	
EPIFOAM FOAM (<i>pramoxine-hc</i>)	3	
<i>fluocinolone acetonide crea</i>	1	
<i>fluocinolone acetonide oil</i>	1	
<i>fluocinolone acetonide oint</i>	1	
<i>fluocinolone acetonide soln</i>	1	
<i>fluocinonide crea</i>	1	
<i>fluocinonide emulsified base crea</i>	1	
<i>fluocinonide gel</i>	1	
<i>fluocinonide oint</i>	1	
<i>fluocinonide soln</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
<i>flurandrenolide crea</i>	1	
<i>fluticasone propionate crea</i>	1	
<i>fluticasone propionate lotn</i>	1	
<i>fluticasone propionate oint</i>	1	
HALAC KIT (<i>halobetasol propionate & ammonium lactate</i>)	3	
<i>halcinonide crea</i>	1	
<i>halobetasol propionate crea</i>	1	
<i>halobetasol propionate oint</i>	1	
HALOG CREA (<i>halcinonide</i>)	GP	
HALOG OINT (<i>halcinonide</i>)	3	
HALOG SOLN (<i>halcinonide</i>)	3	
<i>hydrocortisone (topical) crea 2.5 %</i>	1	
<i>hydrocortisone (topical) lotn 2.5 %</i>	1	
<i>hydrocortisone (topical) oint 1 %</i>	1	RX/OTC
<i>hydrocortisone (topical) oint 2.5 %</i>	1	
<i>hydrocortisone butyrate crea</i>	1	
<i>hydrocortisone butyrate hydrophilic lipo base crea</i>	1	
<i>hydrocortisone butyrate lotn</i>	1	
<i>hydrocortisone butyrate oint</i>	1	

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

Drug Name	Drug Tier	Requirements/ Limits
hydrocortisone butyrate soln	1	
hydrocortisone valerate crea	1	
hydrocortisone valerate oint	1	
KENALOG AERS (triamcinolone acetonide (topical))	GP	
LOCOID CREA (hydrocortisone butyrate)	GP	
LOCOID LIPOCREAM CREA (hydrocortisone butyrate hydrophilic lipo base)	GP	
LOCOID LOTN (hydrocortisone butyrate)	GP	
LOCOID OINT (hydrocortisone butyrate)	GP	
LOCOID SOLN (hydrocortisone butyrate)	GP	
LUXIQ FOAM (betamethasone valerate)	GP	
mometasone furoate crea	1	
mometasone furoate oint	1	
mometasone furoate soln	1	
NUCORT LOTN (hydrocortisone acetate (topical))	3	
OLUX FOAM (clobetasol propionate)	GP	
OLUX-E FOAM (clobetasol propionate emulsion)	GP	

Drug Name	Drug Tier	Requirements/ Limits
PANDEL CREA (hydrocortisone probutate)	3	
PRAMOSONE CREA 1 %-1 % (pramoxine-hc)	3	
PRAMOSONE CREA 1 %-2.5 % (pramoxine-hc)	GP	
PRAMOSONE E CREA (pramoxine-hc emollient base)	3	
PRAMOSONE LOTN 1 %-1 %, 1 %-2.5 % (pramoxine-hc)	3	
PRAMOSONE OINT 1 %-1 %, 1 %-2.5 % (pramoxine-hc)	3	
pramoxine-hc crea	1	
prednicarbate crea	1	1 bal on hand,
prednicarbate oint	1	1 bal on hand,
PSORCON CREA (diflorasone diacetate)	3	
SYNALAR CREA (fluocinolone acetonide)	GP	
SYNALAR OINT (fluocinolone acetonide)	GP	
SYNALAR SOLN (fluocinolone acetonide)	GP	
TACLONEX OINT (calcipotriene-betamethasone dipropionate)	GP	ST
TACLONEX SUSP (calcipotriene-betamethasone dipropionate)	3	ST; QL(2 gm daily)1 bal on hand,
TEMOVATE CREA (clobetasol propionate)	GP	
TEMOVATE OINT (clobetasol propionate)	GP	

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

Drug Name	Drug Tier	Requirements/ Limits
TEXACORT SOLN (<i>hydrocortisone topical</i>)	3	
TOPICORT CREA (<i>desoximetasone</i>)	GP	
TOPICORT GEL (<i>desoximetasone</i>)	GP	
TOPICORT LIQD (<i>desoximetasone</i>)	GP	
TOPICORT OINT (<i>desoximetasone</i>)	GP	
<i>triamcinolone acetonide (topical) aers 0.147 mg/gm</i>	1	
<i>triamcinolone acetonide (topical) crea 0.025 %, 0.1 %, 0.5 %</i>	1	
<i>triamcinolone acetonide (topical) lotn 0.025 %, 0.1 %</i>	1	
<i>triamcinolone acetonide (topical) oint 0.025 %, 0.1 %, 0.5 %</i>	1	
TRIDESILON CREA (<i>desonide</i>)	GP	
ULTRAVATE CREA (<i>halobetasol propionate</i>)	GP	
ULTRAVATE OINT (<i>halobetasol propionate</i>)	GP	
VANOS CREA (<i>fluocinonide</i>)	GP	
VERDESO FOAM (<i>desonide</i>)	3	
Eczema Agents		
DUPIXENT SOSY (<i>dupilumab</i>)	SP	PA
Emollient/Keratolytic Agents		
(Urea In Lactic Acid Vehicle) UREA HYDRATING FOAM	1	1 bal on hand,

Drug Name	Drug Tier	Requirements/ Limits
(Urea) CEROVEL, UREA-C40, REA LO 40 LOTN	1	
(Urea) GORDONS UREA, XUREA, UREMEZ-40, UREDEB, REA LO 40, METOPIC CREA	1	RX/OTC
(Urea) GORDONS UREA, XUREA, UREMEZ-40, UREDEB, REA LO 40, METOPIC CREA	1	
(Urea) UMECTA MOUSSE FOAM	1	
(Urea) UREA NAIL GEL 45 %	1	
CEM-UREA SOLN (<i>urea</i>)	3	
GORDONS UREA OINT (<i>urea</i>)	3	
HYDRO 35 FOAM (<i>urea in lactic acid vehicle</i>)	3	
HYDRO 40 FOAM FOAM (<i>urea</i>)	GP	
KERALAC CREA (<i>urea</i>)	GP	
URAMAXIN GEL (<i>urea</i>)	GP	
URE-K CREA (<i>urea</i>)	3	
<i>urea crea 39 %, 41 %, 47 %, 50 %</i>	1	
<i>urea crea 40 %, 41 %, 47 %, 50 %</i>	1	RX/OTC
<i>urea crea 45 %, 47 %, 50 %</i>	1	1 bal on hand,
<i>urea lotn 40 %</i>	1	
UREA NAIL STCK 50 % (<i>urea in zinc undecylenate-lactic acid vehicle</i>)	3	
<i>urea susp 40 %</i>	1	1 bal on hand,
UTOPIC CREA (<i>urea</i>)	GP	
Emollients		

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

Drug Name	Drug Tier	Requirements/ Limits
(Lactic Acid (Ammonium Lactate)) AL12, GERI-HYDROLAC 12, CVS SKIN TREATMENT BODY LOTION, CVS SKIN TREATMENT, CVS HYDRATING SKIN TREATMENT, AMLACTIN DAILY, AMLACTIN LOTN	1	RX/OTC
(Lactic Acid (Ammonium Lactate)) GERI-HYDROLAC 12 CREA	1	RX/OTC
hyaluronate sodium (emollient) gel	1	1 bal on hand,
HYLINATE LOTN (hyaluronate sodium (emollient))	3	
LAC-HYDRIN CREA (lactic acid (ammonium lactate))	GP	RX/OTC
LAC-HYDRIN TWELVE LOTN (lactic acid (ammonium lactate))	GP	RX/OTC
lactic acid (ammonium lactate) crea 12 %	1	RX/OTC
lactic acid (ammonium lactate) lotn 10 %	1	
lactic acid (ammonium lactate) lotn 12 %	1	RX/OTC
Enzymes - Topical		
SANTYL OINT (collagenase)	3	
Immunomodulating Agents - Topical		
ALDARA CREA (imiquimod)	GP	
imiquimod crea 3.75 %	1	QL(1 gm daily)1 bal on hand,
imiquimod crea 5 %	1	
ZYCLARA CREA (imiquimod)	3	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/ Limits
ZYCLARA PUMP CREA 2.5 % (imiquimod)	3	Limit 2 per month;QL(0.6 gm daily)
ZYCLARA PUMP CREA 3.75 % (imiquimod)	3	QL(1 gm daily)1 bal on hand,
Immunosuppressive Agents - Topical		
ELIDEL CREA (pimecrolimus)	GP	QL(2 gm daily)
pimecrolimus crea	1	QL(2 gm daily)
PROTOPIC OINT (tacrolimus (topical))	GP	
tacrolimus (topical) oint	1	
Keratolytic/Antimitotic Agents		
(Salicylic Acid) SALICYLIC ACID WART REMOVER LIQD	1	
(Salicylic Acid) SALIMEZ CREA	1	
(Salicylic Acid) SALISOL FORTE SOLN	1	
(Salicylic Acid) SALITECH FORTE LOTN	1	
BENSAL HP OINT (salicylic acid & benzoic acid)	3	
CONDYLOX GEL (podofilox)	2	
PODOCON 25 IN BENZOIN TINCTURE SOLN (podophyllum resin)	3	
podofilox soln	1	
SALEX LOTION KIT (salicylic acid w/ cleanser)	GP	
SALEX SHAM (salicylic acid)	GP	
salicylic acid crea 6 %	1	
salicylic acid foam 6 %	1	

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

Drug Name	Drug Tier	Requirements/ Limits
salicylic acid in ammonium lactate vehicle foam	1	
salicylic acid liqd 27.5 %	1	
salicylic acid lotn 6 %	1	1 bal on hand,
salicylic acid lotn 6 %	1	
salicylic acid sham 6 %	1	
salicylic acid soln 26 %	1	1 bal on hand,
salicylic acid soln 28.5 %	1	
salicylic acid w/ cleanser kit	1	
SALISOL SOLN (salicylic acid)	3	
SALITECH LOTN (salicylic acid)	3	
SALVAX FOAM (salicylic acid)	GP	
ULTRASAL-ER SOLN (salicylic acid)	GP	
VIRASAL LIQD (salicylic acid)	GP	
Liniments		
MEDROX-RX OINT (capsaicin-menthol-methyl salicylate)	3	PA
Local Anesthetics - Topical		
(Cocaine Hcl) C-TOPICAL SOLN	1	1 bal on hand,
(Lidocaine Hcl) 7T LIDO GEL, REGENECARE HA GEL	1	RX/OTC
(Lidocaine Hcl) GLYDO PRSY	1	
(Lidocaine Hcl) LIDO-K, ZIONODIL 100, ZIONODIL, LIDOZION, LIDO-SORB LOTN	1	

Drug Name	Drug Tier	Requirements/ Limits
(Lidocaine Hcl) LIDOPIN CREA 3 %	1	RX/OTC
(Lidocaine) LIDOCAINE PAK, PREMIUM LIDOCAINE OINT	1	
(Pramoxine Hcl) PRAMEGEL HCL, PRAMOX GEL GEL	1	RX/OTC
ethyl chloride aero	1	1 bal on hand,
ETHYL CHLORIDE/FINE STREAM AERO (ethyl chloride)	3	
ETHYL CHLORIDE/MEDIUM STREAM AERO (ethyl chloride)	3	
GEBAUERS INSTANT ICE AERO (pentafluoropropane-tetrafluoroethane)	3	RX/OTC
GEBAUERS PAIN EASE AERO (pentafluoropropane-tetrafluoroethane)	3	RX/OTC
GEBAUERS SPRAY AND STRETCH AERO (pentafluoropropane-tetrafluoroethane)	3	RX/OTC
lidocaine crea 3 %	1	1 bal on hand,
lidocaine hcl crea 3 %	1	RX/OTC
lidocaine hcl gel 2 %	1	
lidocaine hcl gel 2 %	1	1 bal on hand,
lidocaine hcl lotn 3 %	1	
lidocaine hcl prsy 2 %	1	
lidocaine hcl soln 4 %	1	
lidocaine oint 5 %	1	
lidocaine ptch 5 %	1	QL(3 ea daily)

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

Drug Name	Drug Tier	Requirements/ Limits
<i>lidocaine-prilocaine crea</i>	1	
LIDODERM PTCH (<i>lidocaine</i>)	GP	QL(3 ea daily)
LIDODOSE GEL (<i>lidocaine hcl</i>)	3	RX/OTC
LIDODOSE PEDIATRIC BULK PACK GEL (<i>lidocaine hcl</i>)	3	RX/OTC
LIDORX GEL (<i>lidocaine hcl</i>)	3	RX/OTC
SYNERA PTCH (<i>lidocaine-tetracaine</i>)	3	
Misc. Dermatological Products		
7TOPIC EMUL (<i>dermatological products, misc.</i>)	3	
CERACADE EMUL (<i>dermatological products, misc.</i>)	3	
EMULSION SB EMUL (<i>dermatological products, misc.</i>)	3	
ENTTY SPRAY EMULSION EMUL (<i>dermatological products, misc.</i>)	3	
EPICERAM EMUL (<i>dermatological products, misc.</i>)	3	
ILIDERM EMUL (<i>dermatological products, misc.</i>)	3	
KAMDOY EMUL (<i>dermatological products, misc.</i>)	3	
KIVIK EMUL (<i>dermatological products, misc.</i>)	3	
PENLEN EMUL (<i>dermatological products, misc.</i>)	3	

Drug Name	Drug Tier	Requirements/ Limits
PHLAG SPRAY EMUL (<i>dermatological products, misc.</i>)	3	
SUVICORT EMUL (<i>dermatological products, misc.</i>)	3	
SYNERDERM EMUL (<i>dermatological products, misc.</i>)	3	
Misc. Topical		
DRYSOL SOLN (<i>aluminum chloride</i>)	2	
XERAC AC SOLN (<i>aluminum chloride in alcohol</i>)	3	
Phosphodiesterase 4 (PDE4) Inhibitors - Topical		
EUCRISA OINT (<i>crisaborole</i>)	3	PA
Rosacea Agents		
(Metronidazole (Topical)) ROSADAN CREA	1	
(Metronidazole (Topical)) ROSADAN GEL	1	Limit 45gms per month;QL(1.5 gm daily)
<i>azelaic acid gel</i>	1	
<i>doxycycline (rosacea) cpdr</i>	1	PA; 1 bal on hand,
FINACEA FOAM (<i>azelaic acid</i>)	3	
FINACEA GEL (<i>azelaic acid</i>)	GP	
<i>ivermectin (rosacea) crea</i>	1	PA; QL(1 gm daily)1 bal on hand,
<i>ivermectin (rosacea) crea</i>	1	PA; QL(1 gm daily)
METROCREAM CREA (<i>metronidazole (topical)</i>)	GP	

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

Drug Name	Drug Tier	Requirements/ Limits
METROGEL GEL (<i>metronidazole (topical)</i>)	NF	
METROLOTION LOTN (<i>metronidazole (topical)</i>)	GP	QL(2 ml daily)
<i>metronidazole (topical) crea 0.75 %</i>	1	
<i>metronidazole (topical) gel 0.75 %</i>	1	Limit 45gms per month;QL(1.5 gm daily)
<i>metronidazole (topical) gel 1 %</i>	1	
<i>metronidazole (topical) lotn 0.75 %</i>	1	QL(2 ml daily)
MIRVASO GEL (<i>brimonidine tartrate (topical)</i>)	3	PA
NORITATE CREA (<i>metronidazole (topical)</i>)	3	PA
ORACEA CPDR (<i>doxycycline (rosacea)</i>)	3	PA; 1 bal on hand,
RHOFADE CREA (<i>oxymetazoline hcl (topical)</i>)	3	PA
SOOLANTRA CREA (<i>ivermectin (rosacea)</i>)	3	PA; QL(1 gm daily)1 bal on hand,
Scabicides & Pediculicides		
(Crotamiton) CROTAN LOTN	1	1 bal on hand,
ELIMITE CREA (<i>permethrin</i>)	GP	Limit 2 per month;QL(60 gm per 14 days retail)
EURAX CREA (<i>crotamiton</i>)	2	
EURAX LOTN (<i>crotamiton</i>)	3	
<i>lindane sham</i>	1	1 bal on hand,

Drug Name	Drug Tier	Requirements/ Limits
<i>malathion lotn</i>	1	
NATROBA SUSP (<i>spinosad</i>)	3	1 bal on hand,AL(At least 4 yrs old)
OVIDE LOTN (<i>malathion</i>)	GP	
<i>permethrin crea</i>	1	Limit 2 per month;QL(60 gm per 14 days retail)
SKLICE LOTN (<i>ivermectin (pediculicide)</i>)	3	
<i>spinosad susp</i>	1	1 bal on hand,AL(At least 4 yrs old)
ULESFIA LOTN (<i>benzyl alcohol (pediculicide)</i>)	3	
Wound Care Products		
REGRANEX GEL (<i>becaplermin</i>)	3	Limit 15gms per month;QL(0.5 gm daily)
DIAGNOSTIC PRODUCTS		
Diagnostic Drugs		
GLUCAGEN DIAGNOSTIC SOLR (<i>glucagon hcl rdn (diagnostic)</i>)	2	
METOPIRONONE CAPS (<i>metopirone</i>)	3	
Diagnostic Tests		
FREESTYLE INSULINX BLOODGLUCOSE TEST STRIPS STRP (<i>glucose blood</i>)	2	Limit 200 per month;QL(6.67 ea daily); RX/OTC
FREESTYLE INSULINX BLOODGLUCOSE TEST STRP (<i>glucose blood</i>)	2	Limit 200 per month;QL(6.67 ea daily); RX/OTC
FREESTYLE LITE TEST STRIPS STRP (<i>glucose blood</i>)	2	Limit 200 per month;QL(6.67 ea daily); RX/OTC

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

Drug Name	Drug Tier	Requirements/ Limits
FREESTYLE TEST STRIPS STRP (<i>glucose blood</i>)	2	Limit 200 per month;QL(6.67 ea daily); RX/OTC
NON PREFERRED TEST STRIPS	3	PA
ONETOUCH ULTRA STRP (<i>glucose blood</i>)	2	Limit 200 per month;QL(6.67 ea daily); RX/OTC
ONETOUCH VERIO TEST STRIPS STRP (<i>glucose blood</i>)	2	Limit 200 per month;QL(6.67 ea daily); RX/OTC
PRECISION XTRA BLOOD GLUCOSE TEST STRIPS STRP (<i>glucose blood</i>)	2	Limit 200 per month;QL(6.67 ea daily); RX/OTC
PRECISION XTRA STRP VI (<i>ketone blood test</i>)	2	Limit 200 per month;QL(6.67 ea daily)
DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS		
Dietary Management Products		
(Folic Acid-Pyridoxine-Cyanocobalamin) AV-VITE FB FORTE, WESTAB MAX, NIVA-FOL, FOLBIC TABS	1	
(Folic Acid-Pyridoxine-Cyanocobalamin) AV-VITE FB FORTE, WESTAB MAX, NIVA-FOL, FOLBIC TABS	1	1 bal on hand,
DEPLIN 15 CAPS (<i>l-methylfolate-algae</i>)	3	
DEPLIN 7.5 CAPS (<i>l-methylfolate-algae</i>)	3	
ELFOLATE TABS (<i>l-methylfolate</i>)	3	
FOLBIC RF TABS (<i>l-methylfolate w/ vitamin b6-vitamin b12</i>)	3	

Drug Name	Drug Tier	Requirements/ Limits
FOLTX TABS (<i>l-methylfolate w/ vitamin b6-vitamin b12</i>)	3	
L-METHYLFOLATE CA/S-ALGAL CAPS (<i>l-methylfolate-algae</i>)	3	
L-METHYLFOLATE FORTE CAPS (<i>l-methylfolate-algae</i>)	3	
<i>l-methylfolate tabs</i>	1	1 bal on hand,
LEVOMEFOLATE CALCIUM ALGAL POWDER CAPS (<i>l-methylfolate-algae</i>)	3	
DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes		
Digestive Enzymes		
CREON CPEP (<i>pancrelipase (lipase-protease-amylase)</i>)	2	
PANCREAZE CPEP (<i>pancrelipase (lipase-protease-amylase)</i>)	3	
PERTZYE CPEP (<i>pancrelipase (lipase-protease-amylase)</i>)	3	
SUCRAID SOLN (<i>sacrosidase</i>)	3	PA
VIOKACE TABS (<i>pancrelipase (lipase-protease-amylase)</i>)	3	
ZENPEP CPEP (<i>pancrelipase (lipase-protease-amylase)</i>)	2	
DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure		
Carbonic Anhydrase Inhibitors		
<i>acetazolamide cp12</i>	1	
<i>acetazolamide tabs</i>	1	

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

Drug Name	Drug Tier	Requirements/ Limits
KEVEYIS TABS (<i>dichlorphenamide</i>)	SP	PA
<i>methazolamide tabs</i>	1	
NEPTAZANE TABS (<i>methazolamide</i>)	GP	
Diuretic Combinations		
ALDACTAZIDE TABS 25 MG-25 MG (<i>spironolactone & hydrochlorothiazide</i>)	GP	
ALDACTAZIDE TABS 50 MG-50 MG (<i>spironolactone & hydrochlorothiazide</i>)	2	
<i>amiloride & hydrochlorothiazide tabs</i>	1	
DYAZIDE CAPS (<i>triamterene & hydrochlorothiazide</i>)	GP	
MAXZIDE TABS (<i>triamterene & hydrochlorothiazide</i>)	GP	
MAXZIDE-25 TABS (<i>triamterene & hydrochlorothiazide</i>)	GP	
<i>spironolactone & hydrochlorothiazide tabs</i>	1	
<i>triamterene & hydrochlorothiazide caps</i>	1	
<i>triamterene & hydrochlorothiazide tabs</i>	1	
Loop Diuretics		
<i>bumetanide tabs</i>	1	
BUMEX TABS (<i>bumetanide</i>)	GP	
DEMADEX TABS (<i>torseamide</i>)	GP	

Drug Name	Drug Tier	Requirements/ Limits
EDECIN TABS (<i>ethacrynic acid</i>)	GP	ST
<i>ethacrynate sodium solr</i>	SP	PA
<i>ethacrynic acid tabs</i>	1	ST
<i>furosemide soln 10 mg/ml</i>	1	
<i>furosemide soln 8 mg/ml</i>	1	1 bal on hand,
<i>furosemide tabs 20 mg, 40 mg, 80 mg</i>	1	
LASIX TABS (<i>furosemide</i>)	GP	
SODIUM EDECIN SOLR (<i>ethacrynate sodium</i>)	SP	PA
<i>torseamide tabs</i>	1	
Potassium Sparing Diuretics		
ALDACTONE TABS (<i>spironolactone</i>)	GP	
<i>amiloride hcl tabs</i>	1	
DYRENIUM CAPS (<i>triamterene</i>)	GP	
<i>spironolactone tabs</i>	1	
<i>triamterene caps</i>	1	
Thiazides and Thiazide-Like Diuretics		
<i>chlorothiazide tabs 250 mg, 500 mg</i>	1	1 bal on hand,
<i>chlorothiazide tabs 500 mg</i>	1	
<i>chlorthalidone tabs</i>	1	
DIURIL SUSP (<i>chlorothiazide</i>)	3	
<i>hydrochlorothiazide caps</i>	1	
<i>hydrochlorothiazide tabs</i>	1	

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

Drug Name	Drug Tier	Requirements/ Limits
<i>indapamide tabs</i>	1	
<i>methyclothiazide tabs</i>	1	1 bal on hand,
<i>metolazone tabs</i>	1	
MICROZIDE CAPS (<i>hydrochlorothiazide</i>)	GP	
ENDOCRINE AND METABOLIC AGENTS - MISC. - Drugs to Treat Bone Disease and Regulate Hormones		
Bone Density Regulators		
ACTONEL TABS 150 MG (<i>risedronate sodium</i>)	GP	ST; QL(0.04 ea daily)
ACTONEL TABS 35 MG (<i>risedronate sodium</i>)	GP	ST; QL(0.15 ea daily)
ACTONEL TABS 5 MG, 30 MG (<i>risedronate sodium</i>)	GP	ST; QL(1 ea daily)
<i>alendronate sodium soln 70 mg/75ml</i>	1	1 bal on hand,
<i>alendronate sodium tabs 35 mg, 40 mg, 70 mg</i>	1	QL(0.15 ea daily)
<i>alendronate sodium tabs 5 mg, 10 mg, 40 mg, 70 mg</i>	1	1 bal on hand,
<i>alendronate sodium tabs 5 mg, 10 mg, 40 mg, 70 mg</i>	1	
ATELVIA TBEC (<i>risedronate sodium</i>)	GP	Limit 4 per month;QL(0.15 ea daily)
BINOSTO TBEF (<i>alendronate sodium</i>)	3	Limit 4 per month;QL(0.15 ea daily)
BONIVA SOLN IV 3 MG/3ML (<i>ibandronate sodium</i>)	SP	PA
BONIVA TABS OR 150 MG (<i>ibandronate sodium</i>)	GP	QL(0.04 ea daily)
<i>calcitonin (salmon) soln</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
<i>etidronate disodium tabs</i>	1	1 bal on hand,
FORTEO SOPN (<i>teriparatide (recombinant)</i>)	SP	PA
FOSAMAX PLUS D TABS (<i>alendronate sodium-cholecalciferol</i>)	3	PA; QL(0.15 ea daily)
FOSAMAX TABS (<i>alendronate sodium</i>)	GP	QL(0.15 ea daily)
<i>ibandronate sodium soln iv 3 mg/3ml</i>	SP	PA
<i>ibandronate sodium tabs or 150 mg</i>	1	QL(0.04 ea daily)
MIACALCIN SOLN (<i>calcitonin (salmon)</i>)	SP	PA
NATPARA CART (<i>parathyroid hormone (recombinant)</i>)	SP	PA
<i>pamidronate disodium soln 30 mg/10ml, 90 mg/10ml</i>	SP	PA
PAMIDRONATE DISODIUM SOLN 6 MG/ML (<i>pamidronate disodium</i>)	SP	PA
PROLIA SOSY (<i>denosumab</i>)	SP	PA
RECLAST SOLN (<i>zoledronic acid</i>)	SP	PA
<i>risedronate sodium tabs 150 mg</i>	1	ST; QL(0.04 ea daily)
<i>risedronate sodium tabs 35 mg</i>	1	ST; QL(0.15 ea daily)
<i>risedronate sodium tabs 5 mg, 30 mg</i>	1	ST; QL(1 ea daily)
<i>risedronate sodium tbec 35 mg</i>	1	Limit 4 per month;QL(0.15 ea daily)
TYMLOS SOPN (<i>abaloparatide</i>)	SP	PA

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

Drug Name	Drug Tier	Requirements/ Limits
XGEVA SOLN (<i>denosumab</i>)	SP	PA
<i>zoledronic acid conc 4 mg/5ml</i>	SP	PA
<i>zoledronic acid soln 4 mg/100ml</i>	SP	PA; 1 bal on hand,
ZOLEDRONIC ACID SOLN 4 MG/100ML (<i>zoledronic acid</i>)	SP	PA
<i>zoledronic acid soln 5 mg/100ml</i>	SP	PA
ZOMETA CONC 4 MG/5ML (<i>zoledronic acid</i>)	SP	PA
ZOMETA SOLN 4 MG/100ML (<i>zoledronic acid</i>)	SP	PA
Fertility Regulators		
<i>clomiphene citrate tabs</i>	1	Limit 15 per month; QL(0.5 ea daily) 1 bal on hand,
GnRH/LHRH Antagonists		
CETROTIDE KIT (<i>cetrorelix acetate</i>)	SP	PA
Growth Hormone Receptor Antagonists		
SOMAVERT SOLR (<i>pegvisomant</i>)	SP	PA
Growth Hormones		
GENOTROPIN MINIQUICK SOLR (<i>somatropin</i>)	SP	PA; Use preferred Humatrope or Norditropin
GENOTROPIN SOLR (<i>somatropin</i>)	SP	PA; Use preferred Humatrope or Norditropin
HUMATROPE COMBO PACK SOLR (<i>somatropin</i>)	SP	PA
HUMATROPE SOLR (<i>somatropin</i>)	SP	PA

Drug Name	Drug Tier	Requirements/ Limits
NORDITROPIN FLEXPOR SOLN 30 MG/3ML, 10 MG/1.5ML, 15 MG/1.5ML (<i>somatropin</i>)	SP	PA
NORDITROPIN FLEXPOR SOLN 5 MG/1.5ML, 10 MG/1.5ML, 15 MG/1.5ML (<i>somatropin</i>)	SP	PA; Use preferred Humatrope or Norditropin
NUTROPIN AQ NUSPIN 10 SOLN (<i>somatropin</i>)	SP	PA; Use preferred Humatrope or Norditropin
NUTROPIN AQ NUSPIN 20 SOLN (<i>somatropin</i>)	SP	PA; Use preferred Humatrope or Norditropin
NUTROPIN AQ NUSPIN 5 SOLN (<i>somatropin</i>)	SP	PA; Use preferred Humatrope or Norditropin
OMNITROPE SOLN (<i>somatropin</i>)	SP	PA; Use preferred Humatrope or Norditropin
OMNITROPE SOLR (<i>somatropin</i>)	SP	PA; Use preferred Humatrope or Norditropin
SEROSTIM SOLR (<i>somatropin (non-refrigerated)</i>)	SP	PA; Use preferred Humatrope or Norditropin
ZOMACTON SOLR (<i>somatropin</i>)	SP	PA; Use preferred Humatrope or Norditropin
Hormone Receptor Modulators		
EVISTA TABS (<i>raloxifene hcl</i>)	GP	QL(1 ea daily); PV
OSPHENA TABS (<i>ospemifene</i>)	3	
<i>raloxifene hcl tabs</i>	PV	QL(1 ea daily); PV
Insulin-Like Growth Factors (Somatomedins)		
INCRELEX SOLN (<i>mecasermin</i>)	SP	PA

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

Drug Name	Drug Tier	Requirements/ Limits
LHRH/GnRH Agonist Analog Pituitary		
LUPANETA PACK KIT (<i>leuprolide acetate & norethindrone acetate</i>)	SP	PA
LUPRON DEPOT-PED (1-MONTH) KIT (<i>leuprolide acetate</i> (cpp))	SP	PA
LUPRON DEPOT-PED (3-MONTH) KIT (<i>leuprolide acetate</i> (cpp) (3 month))	SP	PA
SYNAREL SOLN (<i>nafarelin acetate</i>)	2	
Metabolic Modifiers		
(Levocarnitine (Metabolic Modifiers)) MCCARNITINE TABS	1	RX/OTC
ALDURAZYME SOLN (<i>laronidase</i>)	SP	PA
BUPHENYL POWD (<i>sodium phenylbutyrate</i>)	SP	PA
BUPHENYL TABS (<i>sodium phenylbutyrate</i>)	SP	PA
<i>calcitriol caps or 0.25 mcg, 0.5 mcg</i>	1	
<i>calcitriol soln iv 1 mcg/ml</i>	SP	PA; 1 bal on hand,
<i>calcitriol soln or 1 mcg/ml</i>	1	
CARBAGLU TABS (<i>carglumic acid</i>)	SP	PA
CARNITOR SF SOLN (<i>levocarnitine (metabolic modifiers)</i>)	GP	
CARNITOR SOLN 1 GM/10ML (<i>levocarnitine (metabolic modifiers)</i>)	GP	
CARNITOR TABS 330 MG (<i>levocarnitine (metabolic modifiers)</i>)	GP	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
<i>cinacalcet hcl tabs</i>	1	
CYSTADANE POWD (<i>betaine</i>)	SP	PA
<i>doxercalciferol caps or 0.5 mcg, 1 mcg, 2.5 mcg</i>	1	
<i>doxercalciferol soln iv 4 mcg/2ml</i>	SP	PA
ELAPRASE SOLN (<i>idursulfase</i>)	SP	PA
FABRAZYME SOLR (<i>agalsidase beta</i>)	SP	PA
GALAFOLD CAPS (<i>migalastat hcl</i>)	SP	PA; QL(0.5 ea daily)
HECTOROL SOLN 2 MCG/ML (<i>doxercalciferol</i>)	SP	PA
HECTOROL SOLN 4 MCG/2ML (<i>doxercalciferol</i>)	SP	PA
KUVAN PACK (<i>sapropterin dihydrochloride</i>)	SP	PA
KUVAN TBSO (<i>sapropterin dihydrochloride</i>)	SP	PA
<i>levocarnitine (metabolic modifiers) soln 1 gm/10ml</i>	1	
<i>levocarnitine (metabolic modifiers) tabs 330 mg</i>	1	RX/OTC
LUMIZYME SOLR (<i>alglucosidase alfa</i>)	SP	PA
MYALEPT SOLR (<i>metreleptin</i>)	SP	PA
NAGLAZYME SOLN (<i>galsulfase</i>)	SP	PA
<i>nitisinone caps</i>	SP	PA
NITYR TABS (<i>nitisinone</i>)	SP	PA

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

Drug Name	Drug Tier	Requirements/ Limits
ORFADIN CAPS 2 MG, 5 MG, 10 MG (<i>nitisinone</i>)	SP	PA
ORFADIN CAPS 20 MG (<i>nitisinone</i>)	SP	PA
ORFADIN SUSP 4 MG/ML (<i>nitisinone</i>)	SP	PA
PALYNZIQ SOSY (<i>pegvaliase-pqpz</i>)	SP	PA
<i>paricalcitol caps or 1 mcg, 2 mcg, 4 mcg</i>	1	
<i>paricalcitol soln iv 2 mcg/ml, 5 mcg/ml</i>	SP	PA
RAVICTI LIQD (<i>glycerol phenylbutyrate</i>)	SP	PA
RAYALDEE CPCR (<i>calcifediol</i>)	SP	PA
ROCALTROL CAPS (<i>calcitriol</i>)	GP	
ROCALTROL SOLN (<i>calcitriol</i>)	GP	
SENSIPAR TABS (<i>cinacalcet hcl</i>)	GP	
<i>sodium phenylbutyrate powd</i>	SP	PA
<i>sodium phenylbutyrate tabs</i>	SP	PA
STRENSIQ SOLN (<i>asfotase alfa</i>)	SP	PA
XURIDEN PACK (<i>uridine triacetate</i>)	SP	
ZEMPLAR CAPS OR 1 MCG, 2 MCG (<i>paricalcitol</i>)	GP	
ZEMPLAR SOLN IV 2 MCG/ML, 5 MCG/ML (<i>paricalcitol</i>)	SP	PA
Posterior Pituitary Hormones		
DDAVP SOLN NA 0.01 % (<i>desmopressin acetate refrigerated</i>)	2	

Drug Name	Drug Tier	Requirements/ Limits
DDAVP SOLN NA 0.01 % (<i>desmopressin acetate spray</i>)	GP	
DDAVP TABS OR 0.1 MG, 0.2 MG (<i>desmopressin acetate</i>)	GP	
<i>desmopressin acetate spray refrigerated soln</i>	1	
<i>desmopressin acetate spray soln</i>	1	
<i>desmopressin acetate tabs</i>	1	
NOCTIVA EMUL (<i>desmopressin acetate</i>)	3	PA
STIMATE SOLN (<i>desmopressin acetate</i>)	3	PA
Prolactin Inhibitors		
<i>cabergoline tabs</i>	1	
Somatostatic Agents		
<i>octreotide acetate soln 200 mcg/ml, 200 mcg/ml, 500 mcg/ml, 1000 mcg/ml, 1000 mcg/ml, 1000 mcg/5ml</i>	SP	PA; 1 bal on hand,
<i>octreotide acetate soln 50 mcg/ml, 100 mcg/ml, 200 mcg/ml, 500 mcg/ml, 1000 mcg/ml, 1000 mcg/5ml</i>	SP	PA
SANDOSTATIN LAR DEPOT KIT (<i>octreotide acetate</i>)	SP	PA
SANDOSTATIN SOLN (<i>octreotide acetate</i>)	SP	PA
SIGNIFOR SOLN (<i>pasireotide diaspartate</i>)	SP	PA
SOMATULINE DEPOT SOLN (<i>lanreotide acetate</i>)	SP	PA

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

Drug Name	Drug Tier	Requirements/ Limits
Vasopressin Receptor Antagonists		
JYNARQUE TABS 15 MG, 30 MG (<i>tolvaptan</i>)	SP	PA; QL(1 ea daily)
JYNARQUE TBPk (<i>tolvaptan</i>)	SP	PA; SP
SAMSCA TABS 15 MG (<i>tolvaptan</i>)	SP	PA; QL(1 ea daily)
SAMSCA TABS 30 MG (<i>tolvaptan</i>)	SP	PA; QL(1 ea daily)
<i>tolvaptan tabs</i>	SP	PA; QL(1 ea daily)
ESTROGENS - Hormone Replacement/Modifying Drugs		
Estrogen Combinations		
(Esterified Estrogens & Methyltestosterone) COVARYX, ESTERIFIED ESTROGENS/METHYLTESTOSTERONE HS, ESTERIFIED ESTROGENS/METHYLTESTOSTERONE DS, EEMT HS, EEMT, COVARYX HS TABS	1	QL(1 ea daily)
(Estradiol & Norethindrone Acetate) AMABELZ, MIMVEY LO, MIMVEY, LOPREEZA TABS	1	
(Norethindrone Acetate-Ethinyl Estradiol) FYAVOLV TABS 2.5 MCG-0.5 MG	1	
(Norethindrone Acetate-Ethinyl Estradiol) FYAVOLV TABS 5 MCG-1 MG	1	QL(84 ea per fill retail, 112 ea per fill mail)
(Norethindrone Acetate-Ethinyl Estradiol) JEVANTIQUE LO, JINTELI TABS	1	
(Norethindrone Acetate-Ethinyl Estradiol) JEVANTIQUE LO, JINTELI TABS	1	QL(84 ea per fill retail, 112 ea per fill mail)

Drug Name	Drug Tier	Requirements/ Limits
ACTIVEVILLA TABS (<i>estradiol & norethindrone acetate</i>)	GP	
ANGELIQ TABS (<i>drospirenone-estradiol</i>)	3	
CLIMARA PRO PTWK (<i>estradiol-levonorgestrel</i>)	2	
COMBIPATCH PTTW (<i>estradiol & norethindrone acetate</i>)	3	
DUAVEE TABS (<i>conjugated estrogens-bazedoxifene</i>)	3	
<i>esterified estrogens & methyltestosterone tabs</i>	1	QL(1 ea daily)
<i>estradiol & norethindrone acetate tabs</i>	1	
FEMHRT LOW DOSE TABS (<i>norethindrone acetate-ethinyl estradiol</i>)	NF	
<i>norethindrone acetate-ethinyl estradiol tabs 2.5 mcg-0.5 mg</i>	1	
<i>norethindrone acetate-ethinyl estradiol tabs 5 mcg-1 mg</i>	1	QL(84 ea per fill retail, 112 ea per fill mail)
PREFEST TABS (<i>estradiol-norgestimate</i>)	3	
PREMPHASE TABS (<i>conjugated estrogens-medroxyprogesterone acetate</i>)	2	
PREMPRO TABS (<i>conjugated estrogens-medroxyprogesterone acetate</i>)	2	
Estrogens		

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

Drug Name	Drug Tier	Requirements/ Limits
(Estradiol) DOTTI PTTW	1	Limit 8 patches per month;QL(0.29 ea daily)
ALORA PTTW 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (estradiol)	3	Limit 8 patches per month;QL(0.29 ea daily)
ALORA PTTW 0.05 MG/24HR (estradiol)	GP	Limit 8 patches per month;QL(0.29 ea daily)
CLIMARA PTWK 0.025 MG/24HR, 0.075 MG/24HR, 0.06 MG/24HR, 0.1 MG/24HR, 37.5 MCG/24HR (estradiol)	GP	Limit 4 per month;QL(0.15 ea daily)
CLIMARA PTWK 0.05 MG/24HR (estradiol)	NF	Limit 4 per 28 days;QL(0.15 ea daily)
DELESTROGEN OIL 10 MG/ML (estradiol valerate)	SP	PA
DELESTROGEN OIL 20 MG/ML, 40 MG/ML (estradiol valerate)	SP	PA
DEPO-ESTRADIOL OIL (estradiol cypionate)	SP	PA
DIVIGEL GEL 0.25 MG/0.25GM, 0.5 MG/0.5GM, 1 MG/GM, 1.25 MG/1.25GM (estradiol)	3	
ELESTRIN GEL (estradiol)	3	
ESTRACE TABS (estradiol)	GP	
estradiol pttw td 0.0375 mg/24hr, 0.025 mg/24hr, 0.075 mg/24hr, 0.05 mg/24hr, 0.1 mg/24hr	1	Limit 8 patches per month;QL(0.29 ea daily)

Drug Name	Drug Tier	Requirements/ Limits
estradiol ptwk td 0.025 mg/24hr, 0.075 mg/24hr, 0.06 mg/24hr, 0.1 mg/24hr, 37.5 mcg/24hr	1	Limit 4 per month;QL(0.15 ea daily)
estradiol ptwk td 0.05 mg/24hr, 0.06 mg/24hr, 0.1 mg/24hr, 37.5 mcg/24hr	1	Limit 4 per 28 days;QL(0.15 ea daily)
estradiol tabs or 0.5 mg, 1 mg, 2 mg	1	
estradiol valerate oil	SP	PA
ESTROGEL GEL (estradiol)	3	Limit 50gms per month;QL(1.67 gm daily)
estropipate tabs	1	1 bal on hand,
EVAMIST SOLN (estradiol)	3	
MENEST TABS (esterified estrogens)	2	
MENOSTAR PTWK (estradiol)	3	Limit 4 per month;QL(0.14 ea daily)
MINIVELLE PTTW 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (estradiol)	NF	Limit 8 patches per month;QL(0.29 ea daily)
MINIVELLE PTTW 0.0375 MG/24HR, 0.05 MG/24HR (estradiol)	GP	Limit 8 patches per month;QL(0.29 ea daily)
PREMARIN SOLR IJ 25 MG (estrogens, conjugated)	SP	PA
PREMARIN TABS OR 0.625 MG, 0.45 MG, 0.3 MG, 0.9 MG, 1.25 MG (estrogens, conjugated)	2	
VIVELLE-DOT PTTW 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (estradiol)	NF	Limit 8 patches per month;QL(0.29 ea daily)

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

Drug Name	Drug Tier	Requirements/ Limits
VIVELLE-DOT PTTW 0.0375 MG/24HR, 0.05 MG/24HR (<i>estradiol</i>)	GP	Limit 8 patches per month;QL(0.29 ea daily)
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections		
Fluoroquinolones		
AVELOX TABS (<i>moxifloxacin hcl</i>)	GP	
BAXDELA TABS (<i>delafloxacin meglumine</i>)	3	ST
CIPRO SUSR 5 GM/100ML, 500 MG/5ML (<i>ciprofloxacin</i>)	2	
CIPRO TABS 250 MG, 500 MG (<i>ciprofloxacin hcl</i>)	GP	
<i>ciprofloxacin hcl tabs 100 mg, 500 mg, 750 mg</i>	1	1 bal on hand,
<i>ciprofloxacin hcl tabs 250 mg, 500 mg, 750 mg</i>	1	
<i>ciprofloxacin susr</i>	1	
<i>ciprofloxacin- ciprofloxacin hcl tb24</i>	1	QL(14 ea per fill retail)1 bal on hand,
LEVAQUIN TABS (<i>levofloxacin</i>)	GP	QL(14 ea per fill retail)
<i>levofloxacin soln 25 mg/ml</i>	1	
<i>levofloxacin tabs 250 mg, 500 mg, 750 mg</i>	1	QL(14 ea per fill retail)
<i>moxifloxacin hcl tabs</i>	1	
<i>ofloxacin tabs</i>	1	1 bal on hand,
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs		
Agents for Chronic Idiopathic Constipation (CIC)		
TRULANCE TABS (<i>plecanatide</i>)	3	PA

Drug Name	Drug Tier	Requirements/ Limits
Bile Acid Synthesis Disorder Agents		
CHOLBAM CAPS (<i>cholic acid</i>)	SP	PA
Farnesoid X Receptor (FXR) Agonists		
OALIVA TABS (<i>obeticholic acid</i>)	SP	PA
Gallstone Solubilizing Agents		
ACTIGALL CAPS (<i>ursodiol</i>)	GP	
CHENODAL TABS (<i>chenodiol</i>)	3	PA
URSO 250 TABS (<i>ursodiol</i>)	GP	
URSO FORTE TABS (<i>ursodiol</i>)	GP	
<i>ursodiol caps</i>	1	
<i>ursodiol tabs</i>	1	
Gastrointestinal Antiallergy Agents		
<i>cromolyn sodium (mastocytosis) conc</i>	1	
GASTROCROM CONC (<i>cromolyn sodium (mastocytosis)</i>)	GP	
Gastrointestinal Chloride Channel Activators		
AMITIZA CAPS (<i>lubiprostone</i>)	2	
Gastrointestinal Stimulants		
<i>metoclopramide hcl soln ij 5 mg/ml</i>	1	
<i>metoclopramide hcl soln or 5 mg/5ml, 10 mg/10ml</i>	1	
<i>metoclopramide hcl tabs or 5 mg, 10 mg</i>	1	
<i>metoclopramide hcl tbdp or 5 mg</i>	1	1 bal on hand,
METOCLOPRAMIDE ODT TBDP (<i>metoclopramide hcl</i>)	3	

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

Drug Name	Drug Tier	Requirements/ Limits
REGLAN TABS (<i>metoclopramide hcl</i>)	GP	
Inflammatory Bowel Agents		
APRISO CP24 (<i>mesalamine</i>)	NF	
ASACOL HD TBEC (<i>mesalamine</i>)	3	PA
AZULFIDINE EN-TABS TBEC (<i>sulfasalazine</i>)	GP	
AZULFIDINE TABS (<i>sulfasalazine</i>)	GP	
<i>balsalazide disodium caps</i>	1	Limit 282 caps per month; QL(9.4 ea daily)
CANASA SUPP (<i>mesalamine</i>)	GP	
CIMZIA KIT (<i>certolizumab pegol</i>)	SP	PA
CIMZIA STARTER KIT KIT (<i>certolizumab pegol</i>)	SP	PA
COLAZAL CAPS (<i>balsalazide disodium</i>)	GP	Limit 282 caps per month; QL(9.4 ea daily)
DELZICOL CPDR (<i>mesalamine</i>)	NF	QL(12 ea daily)
DIPENTUM CAPS (<i>olsalazine sodium</i>)	3	
GIAZO TABS (<i>balsalazide disodium</i>)	3	ST; QL(6 ea daily)
INFLECTRA SOLR (<i>infliximab-dyyb</i>)	SP	PA
LIALDA TBEC (<i>mesalamine</i>)	NF	
<i>mesalamine cp24 or 0.375 gm</i>	1	
<i>mesalamine cpdr or 400 mg</i>	1	QL(12 ea daily)
<i>mesalamine enem re 4 gm</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
<i>mesalamine supp re 1000 mg</i>	1	
<i>mesalamine tbec or 1.2 gm</i>	1	
<i>mesalamine w/ cleanser kit</i>	1	
PENTASA CPCR (<i>mesalamine</i>)	3	PA
REMICADE SOLR (<i>infliximab</i>)	SP	PA
ROWASA KIT (<i>mesalamine w/ cleanser</i>)	GP	
SFROWASA ENEM (<i>mesalamine</i>)	2	
STELARA SOLN (<i>ustekinumab (iv)</i>)	SP	PA
<i>sulfasalazine tabs</i>	1	
<i>sulfasalazine tbec</i>	1	
Intestinal Acidifiers		
(Lactulose (Encephalopathy)) ENULOSE, GENERLAC SOLN	1	
<i>lactulose (encephalopathy) soln</i>	1	
Irritable Bowel Syndrome (IBS) Agents		
<i>alose tron hcl tabs</i>	1	PA
LINZESS CAPS (<i>linaclotide</i>)	2	
LOTROXEN TABS (<i>alose tron hcl</i>)	GP	PA
VIBERZI TABS (<i>eluxadoline</i>)	3	PA
Peripheral Opioid Receptor Antagonists		
ENTEREG CAPS (<i>alvimopan</i>)	3	
MOVANTIK TABS (<i>naloxegol oxalate</i>)	3	

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

Drug Name	Drug Tier	Requirements/ Limits
RELISTOR SOLN (<i>methylnaltrexone bromide</i>)	SP	PA
RELISTOR TABS (<i>methylnaltrexone bromide</i>)	SP	PA
SYMPROIC TABS (<i>naldemedine tosylate</i>)	3	PA
SYMPROIC TABS (<i>naldemedine tosylate</i>)	3	PA; 1 bal on hand,
Phosphate Binder Agents		
<i>calcium acetate (phosphate binder) caps</i>	1	
FOSRENOL CHEW 500 MG, 750 MG, 1000 MG (<i>lanthanum carbonate</i>)	GP	
<i>lanthanum carbonate chew</i>	1	
PHOSLYRA SOLN (<i>calcium acetate (phosphate binder)</i>)	3	
RENAGEL TABS (<i>sevelamer hcl</i>)	GP	PA
RENVELA PACK (<i>sevelamer carbonate</i>)	GP	
RENVELA TABS (<i>sevelamer carbonate</i>)	GP	
<i>sevelamer carbonate pack</i>	1	
<i>sevelamer carbonate tabs</i>	1	
<i>sevelamer hcl tabs 400 mg</i>	1	PA; 1 bal on hand,
<i>sevelamer hcl tabs 800 mg</i>	1	PA
VELPHORO CHEW (<i>sucroferriic oxyhydroxide</i>)	3	PA
Short Bowel Syndrome (SBS) Agents		

Drug Name	Drug Tier	Requirements/ Limits
GATTEX KIT (<i>teduglutide (rdna)</i>)	SP	PA
Tryptophan Hydroxylase Inhibitors		
XERMELO TABS (<i>telotristat etiprate</i>)	SP	PA
GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System		
Acidifiers		
K-PHOS NO 2 TABS (<i>potassium & sodium acid phosphates</i>)	2	
Alkalinizers		
(Pot & Sod Citrates W/Citric Ac) CYTRA-3 SYRP	1	
(Potassium Citrate-Citric Acid) CYTRA K CRYSTALS, TARON-CRYSTALS PACK	1	
(Potassium Citrate-Citric Acid) CYTRA-K SOLN	1	RX/OTC
(Sodium Citrate & Citric Acid) CYTRA-2 SOLN	1	RX/OTC
ORACIT SOLN (<i>sodium citrate & citric acid</i>)	3	
<i>pot & sod citrates w/citric ac soln</i>	1	
<i>potassium citrate (alkalinizer) tbc</i>	1	
<i>potassium citrate-citric acid soln</i>	1	RX/OTC
<i>sodium citrate & citric acid soln</i>	1	RX/OTC
UROKIT-K 10 TBCR (<i>potassium citrate (alkalinizer)</i>)	GP	
UROKIT-K 15 TBCR (<i>potassium citrate (alkalinizer)</i>)	GP	

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

Drug Name	Drug Tier	Requirements/ Limits
UROCIT-K 5 TBCR (<i>potassium citrate</i> (<i>alkalinizer</i>))	GP	
Cystinosis Agents		
CYSTAGON CAPS (<i>cysteamine bitartrate</i>)	3	
PROCYSBI CPDR 25 MG, 75 MG (<i>cysteamine bitartrate</i>)	3	
Genitourinary Irrigants		
(Sodium Chloride (Gu Irrigant)) ARGYLE STERILE SALINE 100ML, CURITY STERILE SALINE SOLN	1	
<i>neomycin/polymyxin b gu soln</i>	1	
<i>neomycin/polymyxin b gu soln</i>	1	1 bal on hand,
<i>sodium chloride (gu irrigant) soln</i>	1	
Interstitial Cystitis Agents		
ELMIRON CAPS (<i>pentosan polysulfate sodium</i>)	3	QL(3 ea daily)
Prostatic Hypertrophy Agents		
<i>alfuzosin hcl tb24</i>	1	
AVODART CAPS (<i>dutasteride</i>)	GP	AL(At least 40 yrs old)
CARDURA XL TB24 (<i>doxazosin mesylate (bph)</i>)	3	
<i>dutasteride caps</i>	1	AL(At least 40 yrs old)
<i>dutasteride-tamsulosin hcl caps</i>	1	
<i>finasteride tabs</i>	1	QL(1 ea daily); AL(At least 40 yrs old)
FLOMAX CAPS (<i>tamsulosin hcl</i>)	GP	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/ Limits
JALYN CAPS (<i>dutasteride-tamsulosin hcl</i>)	GP	
PROSCAR TABS (<i>finasteride</i>)	GP	QL(1 ea daily); AL(At least 40 yrs old)
RAPAFLO CAPS 4 MG (<i>silodosin</i>)	3	1 bal on hand,
RAPAFLO CAPS 4 MG (<i>silodosin</i>)	3	
RAPAFLO CAPS 8 MG (<i>silodosin</i>)	GP	
<i>silodosin caps</i>	1	
<i>tamsulosin hcl caps</i>	1	QL(2 ea daily)
UROXATRAL TB24 (<i>alfuzosin hcl</i>)	GP	
Urinary Analgesics		
(Phenazopyridine Hcl) PHENAZO TABS	1	
<i>phenazopyridine hcl tabs</i>	1	
PYRIDIUM TABS (<i>phenazopyridine hcl</i>)	GP	
Urinary Stone Agents		
LITHOSTAT TABS (<i>acetohydroxamic acid</i>)	3	
THIOLA EC TBEC (<i>tiopronin</i>)	SP	
THIOLA TABS (<i>tiopronin</i>)	SP	
GOUT AGENTS - Drugs to Treat Gout		
Gout Agent Combinations		
<i>colchicine w/ probenecid tabs</i>	1	
DUZALLO TABS (<i>lesinurad-allopurinol</i>)	3	PA
Gout Agents		
<i>allopurinol tabs</i>	1	

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

Drug Name	Drug Tier	Requirements/ Limits
<i>colchicine caps</i>	1	1 bal on hand,
<i>colchicine tabs</i>	1	
COLCRYS TABS (<i>colchicine</i>)	GP	
<i>febuxostat tabs</i>	1	
MITIGARE CAPS (<i>colchicine</i>)	3	1 bal on hand,
ULORIC TABS (<i>febuxostat</i>)	GP	
ZURAMPIC TABS (<i>lesinurad</i>)	3	PA
ZYLOPRIM TABS (<i>allopurinol</i>)	GP	
Uricosurics		
<i>probenecid tabs</i>	1	
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders		
Bradykinin B2 Receptor Antagonists		
FIRAZYR SOLN (<i>icatibant acetate</i>)	SP	PA
<i>icatibant acetate soln</i>	SP	PA
Complement Inhibitors		
BERINERT KIT (<i>c1 esterase inhibitor (human)</i>)	SP	PA; SP
HAEGARDA SOLR (<i>c1 esterase inhibitor (human)</i>)	SP	PA
RUCONEST SOLR (<i>c1 esterase inhibitor (recombinant)</i>)	SP	PA
Hemataologic - Tyrosine Kinase Inhibitors		
TAVALISSE TABS (<i>fostamatinib disodium</i>)	SP	PA; SP
Hematorheologic Agents		
<i>pentoxifylline tbc</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
Plasma Kallikrein Inhibitors		
TAKHZYRO SOLN (<i>lanadelumab-flyo</i>)	SP	PA
Platelet Aggregation Inhibitors		
AGGRENOX CP12 (<i>aspirin-dipyridamole</i>)	GP	
AGRYLIN CAPS (<i>anagrelide hcl</i>)	GP	
<i>anagrelide hcl caps</i>	1	
<i>aspirin-dipyridamole cp12</i>	1	
BRILINTA TABS (<i>ticagrelor</i>)	2	
CABLIVI KIT (<i>caplacizumab-yhdp</i>)	SP	PA
<i>cilostazol tabs</i>	1	QL(2 ea daily)
<i>clopidogrel bisulfate tabs</i>	1	QL(2 ea daily)
<i>dipyridamole tabs</i>	1	
EFFIENT TABS 10 MG (<i>prasugrel hcl</i>)	NF	
EFFIENT TABS 5 MG (<i>prasugrel hcl</i>)	GP	
PLAVIX TABS (<i>clopidogrel bisulfate</i>)	GP	QL(2 ea daily)
<i>prasugrel hcl tabs</i>	1	
ZONTIVITY TABS (<i>vorapaxar sulfate</i>)	2	
HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders		
Agents for Gaucher Disease		
CERDELGA CAPS (<i>eliglustat tartrate</i>)	SP	PA
ELELYSO SOLR (<i>taliglucerase alfa</i>)	SP	PA
<i>miglustat caps</i>	SP	PA
VPRIV SOLR (<i>velaglucerase alfa</i>)	SP	PA

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

Drug Name	Drug Tier	Requirements/ Limits
ZAVESCA CAPS (<i>miglustat</i>)	SP	PA
Agents for Sickie Cell Disease		
DROXIA CAPS (<i>hydroxyurea (sickle cell anemia)</i>)	3	
ENDARI PACK (<i>glutamine (sickle cell)</i>)	SP	PA
SIKLOS TABS (<i>hydroxyurea (sickle cell anemia)</i>)	SP	PA
Folic Acid/Folates		
(Folic Acid) CVS FOLIC ACID, YL FOLIC ACID, SM FOLIC ACID, RA FOLIC ACID, QC FOLIC ACID, PX FOLIC ACID, HM FOLIC ACID, GNP FOLIC ACID, FOLATE, FA-8 TABS	PV	PV
(Folic Acid) KP FOLIC ACID TABS 1 MG	1	RX/OTC
(Folic Acid) KP FOLIC ACID TABS 800 MCG	PV	PV
<i>folic acid soln ij 5 mg/ml</i>	1	
<i>folic acid tabs or 1 mg</i>	1	RX/OTC
<i>folic acid tabs or 400 mcg, 800 mcg</i>	PV	PV
Hematopoietic Growth Factors		
ARANESP ALBUMIN FREE SOLN (<i>darbepoetin alfa</i>)	SP	PA
ARANESP ALBUMIN FREE SOSY (<i>darbepoetin alfa</i>)	SP	PA
DOPTelet TABS (<i>avatrombopag maleate</i>)	SP	PA
EPOGEN SOLN (<i>epoetin alfa</i>)	SP	PA

Drug Name	Drug Tier	Requirements/ Limits
GRANIX SOSY 300 MCG/0.5ML, 480 MCG/0.8ML (<i>tbo-filgrastim</i>)	SP	PA
LEUKINE SOLR (<i>sargramostim</i>)	SP	PA
MIRCERA SOSY (<i>methoxy polyethylene glycol-epoetin beta</i>)	SP	PA
MULPLETA TABS (<i>lusutrombopag</i>)	SP	PA
NEULASTA ONPRO KIT PSKT (<i>pegfilgrastim</i>)	SP	PA
NEULASTA SOSY (<i>pegfilgrastim</i>)	SP	PA
NEUPOGEN SOLN (<i>filgrastim</i>)	SP	PA
NEUPOGEN SOSY (<i>filgrastim</i>)	SP	PA
NIVESTYM SOSY 300 MCG/0.5ML, 480 MCG/0.8ML (<i>filgrastim-aafi</i>)	SP	PA
PROCrit SOLN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML, 40000 UNIT/ML (<i>epoetin alfa</i>)	SP	PA
PROMACTA PACK 25 MG, 12.5 MG (<i>eltrombopag olamine</i>)	SP	PA
PROMACTA TABS 25 MG, 50 MG, 12.5 MG (<i>eltrombopag olamine</i>)	SP	PA
PROMACTA TABS 75 MG, 12.5 MG (<i>eltrombopag olamine</i>)	SP	PA; QL(1 ea daily)
RETACrit SOLN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 40000 UNIT/ML (<i>epoetin alfa-epbx</i>)	SP	PA

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

Drug Name	Drug Tier	Requirements/ Limits
ZARXIO SOSY (<i>filgrastim-sndz</i>)	SP	PA
ZIEXTENZO SOSY (<i>pegfilgrastim-bmez</i>)	SP	PA
Hematopoietic Mixtures		
FOLIVANE-F CAPS (<i>ferrous fumarate-iron polysaccharide complex-folic acid-c-b3</i>)	2	
FUSION PLUS CAPS (<i>fe fum-iron polysacch complex-fa-b cmplx-c-biotin-probiotic</i>)	3	
INTEGRA F CAPS (<i>ferrous fumarate-iron polysaccharide complex-folic acid-c-b3</i>)	2	
Iron		
(Carbonyl Iron) WEE CARE SUSP	PV	PV
(Ferrous Sulfate) BPROTECTED PEDIA IRON, IRON SUPPLEMENT CHILDRENS SOLN	PV	PV
(Ferrous Sulfate) FEROSUL, IRON SUPPLEMENT ELIX	PV	PV
FER-IN-SOL SOLN (<i>ferrous sulfate</i>)	GP	PV
<i>ferrous sulfate elix 220 mg/5ml</i>	PV	PV
<i>ferrous sulfate soln 15 mg/ml</i>	PV	PV
FERROUS SULFATE SYRP 300 MG/5ML (<i>ferrous sulfate</i>)	PV	PV
ICAR PEDIATRIC SUSP (<i>carbonyl iron</i>)	GP	PV
MYKIDZ IRON 10 SUSP (<i>iron</i>)	PV	PV
Stem Cell Mobilizers		

Drug Name	Drug Tier	Requirements/ Limits
MOZOBIL SOLN (<i>plerixafor</i>)	SP	PA
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
Hemostatics - Systemic		
AMICAR TABS 500 MG, 1000 MG (<i>aminocaproic acid</i>)	GP	
<i>aminocaproic acid tabs 500 mg, 1000 mg</i>	1	
CYKLOKAPRON SOLN (<i>tranexamic acid</i>)	SP	PA
LYSTEDA TABS (<i>tranexamic acid</i>)	GP	QL(6 ea daily,5 day(s) limit)
<i>tranexamic acid soln iv 1000 mg/10ml</i>	SP	PA
<i>tranexamic acid tabs or 650 mg</i>	1	QL(6 ea daily,5 day(s) limit)
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
Antihistamine Hypnotics		

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

Drug Name	Drug Tier	Requirements/ Limits
(Diphenhydramine Hcl (Sleep)) COMPOZ, WAL-SOM MAXIMUM STRENGTH, TGT SLEEP AID MAXIMUM STRENGTH, SM SLEEP AID MAXIMUM STRENGTH, SLEEP-AID MAXIMUM STRENGTH, SLEEP-AID, SLEEP AID, RA SLEEP AID MAXIMUM STRENGTH, RA NIGHTTIME SLEEP AID, QC SLEEP-AID MAXIMUM STRENGTH, QC SLEEP AID MAXIMUM STRENGTH, ORMIR, GOODSENSE SLEEP AID, EQL SLEEP AID MAXIMUM STRENGTH, EQ NIGHTTIME SLEEP AID MAXIMUM STRENGTH, CVS SLEEP-AID NIGHTTIME, CVS SLEEP AID NIGHTTIME/MAXIMUM STRENGTH, CVS NIGHTTIME SLEEP AID MAXIMUM STRENGTH CAPS	1	
UNISOM SLEEPGELS CAPS (<i>diphenhydramine hcl (sleep)</i>)	GP	
Barbiturate Hypnotics		
BUTISOL SODIUM TABS (<i>butabarbital sodium</i>)	3	
<i>phenobarbital elix 20 mg/5ml</i>	1	
<i>phenobarbital soln 20 mg/5ml</i>	1	
<i>phenobarbital tabs 15 mg, 30 mg, 60 mg, 100 mg, 16.2 mg, 32.4 mg, 64.8 mg, 97.2 mg</i>	1	
SECONAL SODIUM CAPS (<i>secobarbital sodium</i>)	3	

Drug Name	Drug Tier	Requirements/ Limits
Hypnotics - Tricyclic Agents		
<i>doxepin hcl (sleep) tabs</i>	1	ST; QL(1 ea daily)
SILENOR TABS (<i>doxepin hcl (sleep)</i>)	GP	ST; QL(1 ea daily)
Non-Barbiturate Hypnotics		
AMBIEN CR TBCR (<i>zolpidem tartrate</i>)	GP	QL(1 ea daily)
AMBIEN TABS 10 MG (<i>zolpidem tartrate</i>)	GP	QL(1 ea daily)
AMBIEN TABS 5 MG (<i>zolpidem tartrate</i>)	NF	QL(1 ea daily)
DORAL TABS (<i>quazepam</i>)	3	1 bal on hand,
EDLUAR SUBL (<i>zolpidem tartrate</i>)	3	ST; QL(1 ea daily)
<i>estazolam tabs</i>	1	
<i>eszopiclone tabs</i>	1	QL(1 ea daily)
<i>flurazepam hcl caps</i>	1	1 bal on hand,
HALCION TABS (<i>triazolam</i>)	GP	
INTERMEZZO SUBL (<i>zolpidem tartrate</i>)	GP	PA
LUNESTA TABS 1 MG, 2 MG (<i>eszopiclone</i>)	NF	QL(1 ea daily)
LUNESTA TABS 3 MG (<i>eszopiclone</i>)	GP	QL(1 ea daily)
<i>midazolam hcl syrp</i>	1	
<i>quazepam tabs</i>	1	1 bal on hand,
RESTORIL CAPS (<i>temazepam</i>)	GP	
SONATA CAPS (<i>zaleplon</i>)	GP	QL(1 ea daily)
<i>temazepam caps</i>	1	
<i>triazolam tabs</i>	1	
<i>zaleplon caps</i>	1	QL(1 ea daily)

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

Drug Name	Drug Tier	Requirements/ Limits
zolpidem tartrate sublingual 3.5 mg, 1.75 mg	1	PA
zolpidem tartrate tabs or 5 mg, 10 mg	1	QL(1 ea daily)
zolpidem tartrate tbc or 12.5 mg, 6.25 mg	1	QL(1 ea daily)
ZOLPIMIST SOLN (zolpidem tartrate)	3	ST; Limit 1 bottle per month; QL(0.26 ml daily)
Orexin Receptor Antagonists		
BELSOMRA TABS (suvorexant)	2	ST; QL(1 ea daily)
Selective Melatonin Receptor Agonists		
HETLIOZ CAPS (tasimelteon)	SP	PA
ramelteon tabs	1	ST; QL(1 ea daily)
ROZEREM TABS (ramelteon)	GP	ST; QL(1 ea daily)
LAXATIVES - Bowel Treatment Drugs		
Laxative Combinations		
(Bisacodyl-Peg 3350-Pot Chloride-Sod Bicarb-Sod Chloride) GAVILYTE-H, PEG-PREP KIT	PV	PV
(Peg 3350-Kcl-Sod Bicarb-Sod Chloride-Sod Sulfate) GAVILYTE-C, GAVILYTE-G SOLR	PV	1 bal on hand, PV
(Peg 3350-Kcl-Sod Bicarb-Sod Chloride-Sod Sulfate) GAVILYTE-C, GAVILYTE-G SOLR	PV	PV
(Peg 3350-Potassium Chloride-Sod Bicarbonate-Sod Chloride) GAVILYTE-N/FLAVOR PACK, TRILYTE SOLR	PV	PV
CLENPIQ SOLN (sodium picosulfate-magnesium oxide-anhydrous citric acid)	PV	PV

Drug Name	Drug Tier	Requirements/ Limits
COLYTE-FLAVOR PACKS SOLR (peg 3350-kcl-sod bicarb-sod chloride-sod sulfate)	3	PV
GOLYTELY SOLR 227.1 GM-21.5 GM-5.53 GM-2.82 GM-6.36 GM (peg 3350-kcl-sod bicarb-sod chloride-sod sulfate)	PV	PA; PV
GOLYTELY SOLR 236 GM-22.74 GM-5.86 GM-2.97 GM-6.74 GM (peg 3350-kcl-sod bicarb-sod chloride-sod sulfate)	GP	PV
MOVIPREP SOLR (peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid)	PV	PA; PV
NULYTELY/FLAVOR PACKS SOLR (peg 3350-potassium chloride-sod bicarbonate-sod chloride)	GP	PV
peg 3350-kcl-sod bicarb-sod chloride-sod sulfate solr	PV	PV
peg 3350-potassium chloride-sod bicarbonate-sod chloride solr	PV	PV
PLENVU SOLR (peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid)	PV	PA; PV
PREPOPIK PACK (sodium picosulfate-magnesium oxide-anhydrous citric acid)	PV	PA; PV

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

Drug Name	Drug Tier	Requirements/ Limits
SUPREP BOWEL PREP KIT SOLN (sodium sulfate-potassium sulfate-magnesium sulfate)	PV	PV
Laxatives - Miscellaneous		
(Lactulose) CONSTULOSE SOLN	1	
(Polyethylene Glycol 3350) CLEARLAX, TGT POWDERLAX, SMOOTH LAX, SM CLEARLAX, SB POLYETHYLENE GLYCOL 3350, RA LAXATIVE, QC NATURA-LAX, PEGYLAX, KLS LAXACLEAR, HM CLEARLAX, GOODSENSE CLEARLAX, GNP CLEARLAX, GLYCOLAX, GENTLELAX, GAVILAX, EQL CLEARLAX, EQ CLEARLAX, CVS PURELAX POWD	1	Limit 510gms per month;QL(17.6 gm daily); RX/OTC
KRISTALOSE PACK 10 GM, 20 GM (lactulose)	3	
LACTULOSE PACK 10 GM (lactulose)	3	
lactulose soln 10 gm/15ml, 20 gm/30ml	1	
MIRALAX POWD (polyethylene glycol 3350)	GP	Limit 510gms per month;QL(17.6 gm daily); RX/OTC
polyethylene glycol 3350 powd	1	Limit 510gms per month;QL(17.6 gm daily); RX/OTC
Saline Laxatives		
OSMOPREP TABS (sodium phosphate monobasic-sodium phosphate dibasic)	PV	PA; PV
MACROLIDES - Drugs to Treat Bacterial Infections		

Drug Name	Drug Tier	Requirements/ Limits
Azithromycin		
azithromycin pack 1 gm	1	1 bal on hand,
azithromycin susr 100 mg/5ml, 200 mg/5ml	1	
azithromycin tabs 250 mg	1	QL(6 ea per fill retail)
azithromycin tabs 500 mg	1	QL(3 ea per fill retail)
azithromycin tabs 600 mg	1	QL(10 ea per fill retail)
ZITHROMAX PACK 1 GM (azithromycin)	2	1 bal on hand,
ZITHROMAX SUSR 100 MG/5ML, 200 MG/5ML (azithromycin)	GP	
ZITHROMAX TABS 250 MG (azithromycin)	GP	QL(6 ea per fill retail)
ZITHROMAX TABS 500 MG (azithromycin)	GP	QL(3 ea per fill retail)
ZITHROMAX TABS 600 MG (azithromycin)	GP	QL(10 ea per fill retail)
ZITHROMAX TRI-PAK TABS (azithromycin)	GP	QL(3 ea per fill retail)
ZITHROMAX Z-PAK TABS (azithromycin)	GP	QL(6 ea per fill retail)
Clarithromycin		
clarithromycin susr 125 mg/5ml, 250 mg/5ml	1	1 bal on hand,
clarithromycin tabs 250 mg, 500 mg	1	
clarithromycin tb24 500 mg	1	QL(14 ea per fill retail)
Erythromycins		
(Erythromycin Base) ERY-TAB TBEC	1	
(Erythromycin Ethylsuccinate) E.E.S. 400 TABS	1	1 bal on hand,

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

Drug Name	Drug Tier	Requirements/ Limits
(Erythromycin Stearate) ERYTHROCIN STEARATE, ERYTHROCIN STEARATE TABS	1	1 bal on hand,
E.E.S. GRANULES SUSR (<i>erythromycin ethylsuccinate</i>)	GP	
ERYPED 200 SUSR (<i>erythromycin ethylsuccinate</i>)	GP	
ERYPED 400 SUSR (<i>erythromycin ethylsuccinate</i>)	GP	
<i>erythromycin base cpep 250 mg</i>	1	1 bal on hand,
<i>erythromycin base cpep 250 mg</i>	1	
<i>erythromycin base tabs 250 mg, 500 mg</i>	1	
<i>erythromycin base tbec 250 mg, 333 mg, 500 mg</i>	1	
<i>erythromycin ethylsuccinate susr 200 mg/5ml, 400 mg/5ml</i>	1	
<i>erythromycin ethylsuccinate tabs 400 mg</i>	1	1 bal on hand,
Fidaxomicin		
DIFICID TABS (<i>fidaxomicin</i>)	3	
MEDICAL DEVICES AND SUPPLIES		
Contraceptives		
AIMSCO LUBRICATED MISC (<i>condoms latex lubricated - male</i>)	PV	PV
DIAPHRAGMS	PV	

Drug Name	Drug Tier	Requirements/ Limits
DUREX EXTRA SENSITIVE DEVI (<i>condoms latex lubricated - male</i>)	PV	PV
FANTASY LUBRICATED MISC (<i>condoms latex lubricated - male</i>)	PV	PV
FANTASY LUBRICATED/SPERMICID E MISC (<i>condoms latex lubricated - male</i>)	PV	PV
FC FEMALE CONDOM MISC (<i>condoms - female</i>)	PV	PV
FC2 FEMALE CONDOM MISC (<i>condoms - female</i>)	PV	PV
FEMCAP DEVI (<i>cervical caps</i>)	PV	PV
KAMELEON LUBRICATED MISC (<i>condoms latex lubricated - male</i>)	PV	PV
KIMONO COLORS DEVI (<i>condoms latex lubricated - male</i>)	PV	PV
KIMONO LUBRICATED MISC (<i>condoms latex lubricated - male</i>)	PV	PV
KIMONO MICRO THIN MISC (<i>condoms latex non-lubricated - male</i>)	PV	PV
KIMONO MICRO THIN PLUS SPERMICIDE LUBRICATED MISC (<i>condoms latex lubricated - male</i>)	PV	PV
KIMONO PLUS SPERMICIDE LUBRICATED MISC (<i>condoms latex lubricated - male</i>)	PV	PV

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

Drug Name	Drug Tier	Requirements/ Limits
KIMONO PLUS SPERMICIDE/LUBRICATED MISC (<i>condoms latex lubricated - male</i>)	PV	PV
KIMONO PS LUBRICATED MISC (<i>condoms latex lubricated - male</i>)	PV	PV
KIMONO PS PLUS SPERMICIDE/LUBRICATED MISC (<i>condoms latex lubricated - male</i>)	PV	PV
KIMONO SENSATION LUBRICATED MISC (<i>condoms latex lubricated - male</i>)	PV	PV
KIMONO SENSATION PLUS SPERMICIDE LUBRICATED MISC (<i>condoms latex lubricated - male</i>)	PV	PV
KIMONO SPECIAL DEVI (<i>condoms latex lubricated - male</i>)	PV	PV
MAXX LUBRICATED MISC (<i>condoms latex lubricated - male</i>)	PV	PV
MAXX PLUS SPERMICIDE LUBRICATED MISC (<i>condoms latex lubricated - male</i>)	PV	PV
PREMIUM CONDOMS LUBRICATED MISC (<i>condoms latex lubricated - male</i>)	PV	PV
REALITY LATEX CONDOMS/LUBRICATED MISC (<i>condoms latex lubricated - male</i>)	PV	PV
REALITY LATEX/ULTRA TEXTURED DEVI (<i>condoms latex lubricated - male</i>)	PV	PV

Drug Name	Drug Tier	Requirements/ Limits
REALITY LATEX/ULTRA THIN DEVI (<i>condoms latex lubricated - male</i>)	PV	PV
TRUSTEX COLOR CONDOMS + LUBE MISC (<i>condoms latex lubricated - male</i>)	PV	PV
TRUSTEX LUBRICATED EXTRALARGE MISC (<i>condoms latex lubricated - male</i>)	PV	PV
TRUSTEX LUBRICATED EXTRASTRENGTH MISC (<i>condoms latex lubricated - male</i>)	PV	PV
TRUSTEX LUBRICATED MISC (<i>condoms latex lubricated - male</i>)	PV	PV
TRUSTEX LUBRICATED/RIBBED/STUDDED MISC (<i>condoms latex lubricated - male</i>)	PV	PV
TRUSTEX LUBRICATED/SPERMICIDE EXTRA LARGE MISC (<i>condoms latex lubricated - male</i>)	PV	PV
TRUSTEX LUBRICATED/SPERMICIDE EXTRA STRENGTH MISC (<i>condoms latex lubricated - male</i>)	PV	PV
TRUSTEX LUBRICATED/SPERMICIDE MISC (<i>condoms latex lubricated - male</i>)	PV	PV
TRUSTEX NATURAL CONDOMS +LUBE/LUBRICATED MISC (<i>condoms latex lubricated - male</i>)	PV	PV
TRUSTEX NON-LUBRICATED MISC (<i>condoms latex non-lubricated - male</i>)	PV	PV

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

Drug Name	Drug Tier	Requirements/ Limits
TRUSTEX WITH NONOXYNOL-9/RIBBED/STUDDED MISC (<i>condoms latex lubricated - male</i>)	PV	PV
TRUSTEX/RIA LUBRICATED MISC (<i>condoms latex lubricated - male</i>)	PV	PV
TRUSTEX/RIA LUBRICATED SPERMICIDE MISC (<i>condoms latex lubricated - male</i>)	PV	PV
TRUSTEX/RIA LUBRICATED/SPERMICIDE MISC (<i>condoms latex lubricated - male</i>)	PV	PV
TRUSTEX/RIA NON-LUBRICATED MISC (<i>condoms latex non-lubricated - male</i>)	PV	PV
Diabetic Supplies		
FREESTYLE FREEDOM LITE KIT (<i>blood glucose monitoring supplies</i>)	2	QL(1 ea per 365 days retail); RX/OTC
FREESTYLE INSULINX BLOODGLUCOSE MONITORING SYSTEM KIT (<i>blood glucose monitoring supplies</i>)	2	QL(1 ea per 365 days retail); RX/OTC
FREESTYLE LITE BLOOD GLUCOSE MONITORING SYSTEM DEVI (<i>blood glucose monitoring supplies</i>)	2	QL(1 ea per 365 days retail)
LANCET	2	
ONETOUCH ULTRA 2 KIT (<i>blood glucose monitoring supplies</i>)	2	QL(1 ea per 365 days retail); RX/OTC
ONETOUCH ULTRA MINI KIT (<i>blood glucose monitoring supplies</i>)	2	QL(1 ea per 365 days retail); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
ONETOUCH VERIO FLEX BLOOD GLUCOSE MONITORING SYSTEM KIT (<i>blood glucose monitoring supplies</i>)	2	Limit 1 per year;QL(1 ea per 365 days retail); RX/OTC
ONETOUCH VERIO IQ BLOOD GLUCOSE MONITORING SYSTEM KIT (<i>blood glucose monitoring supplies</i>)	2	QL(1 ea per 365 days retail); RX/OTC
ONETOUCH VERIO KIT (<i>blood glucose monitoring supplies</i>)	2	Limited to 1 per year;QL(1 ea per 365 days retail); RX/OTC
ONETOUCH VERIO SYNC BLOODGLUCOSE MONITORING SYSTEM KIT (<i>blood glucose monitoring supplies</i>)	2	Limited to 1 per year;QL(1 ea per 365 days retail); RX/OTC
PRECISION XTRA DEVI XX (<i>blood glucose monitoring supplies</i>)	2	QL(1 ea per 365 days retail)
Parenteral Therapy Supplies		
INSULIN SYRINGES AND PEN NEEDLES	2	MO
Respiratory Therapy Supplies		
INHALER SPACERS	2	MO
MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches		
Calcitonin Gene-Related Peptide (CGRP)		
AIMOVIG SOAJ 140 MG/ML (<i>erenumab-aooe</i>)	SP	PA
AIMOVIG SOAJ 70 MG/ML (<i>erenumab-aooe</i>)	SP	PA; SP
AJOVY SOSY (<i>fremanezumab-vfrm</i>)	SP	PA
EMGALITY SOAJ 120 MG/ML (<i>galcanezumab-gnlm</i>)	SP	PA
EMGALITY SOSY 120 MG/ML (<i>galcanezumab-gnlm</i>)	SP	PA

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

Drug Name	Drug Tier	Requirements/ Limits
Migraine Combinations		
(Ergotamine W/ Caffeine) MIGERGOT SUPP	1	1 bal on hand,
CAFERGOT TABS (<i>ergotamine w/ caffeine</i>)	GP	
<i>ergotamine w/ caffeine tabs</i>	1	
<i>isometheptene-dichloralphenazone-acetaminophen caps</i>	1	
<i>isometheptene-dichloralphenazone-acetaminophen caps</i>	1	1 bal on hand,
<i>sumatriptan-naproxen sodium tabs</i>	1	PA; QL(0.3 ea daily)
TREXIMET TABS 10 MG-60 MG (<i>sumatriptan-naproxen sodium</i>)	3	PA; Limit 9 per month;QL(0.3 ea daily)
TREXIMET TABS 85 MG-500 MG (<i>sumatriptan-naproxen sodium</i>)	GP	PA; QL(0.3 ea daily)
Migraine Products - NSAIDs		
CAMBIA PACK (<i>diclofenac potassium (migraine)</i>)	3	PA; Limit 9 per month;QL(0.3 ea daily)
Migraine Products		
D.H.E. 45 SOLN (<i>dihydroergotamine mesylate</i>)	GP	QL(10 ml per fill retail,30 ml per fill mail,20 ml per 30 days retail,60 ml per 90 days mail)
<i>dihydroergotamine mesylate soln ij 1 mg/ml</i>	1	QL(10 ml per fill retail,30 ml per fill mail,20 ml per 30 days retail,60 ml per 90 days mail)
<i>dihydroergotamine mesylate soln na 4 mg/ml</i>	3	QL(8 ml per fill retail,24 ml per fill mail)

Drug Name	Drug Tier	Requirements/ Limits
ERGOMAR SUBL (<i>ergotamine tartrate</i>)	2	
MIGRANAL SOLN (<i>dihydroergotamine mesylate</i>)	3	QL(8 ml per fill retail,24 ml per fill mail)
Serotonin Agonists		
<i>almotriptan malate tabs</i>	1	QL(6 ea per 30 days retail)
AMERGE TABS (<i>naratriptan hcl</i>)	GP	QL(9 ea per 30 days retail)
AXERT TABS (<i>almotriptan malate</i>)	GP	QL(6 ea per 30 days retail)
<i>eletriptan hydrobromide tabs</i>	1	QL(0.2 ea daily)
FROVA TABS (<i>frovatriptan succinate</i>)	GP	QL(0.3 ea daily)
<i>frovatriptan succinate tabs</i>	1	QL(0.3 ea daily)
IMITREX SOLN NA 20 MG/ACT (<i>sumatriptan</i>)	GP	Limited to 6 per month;QL(0.2 ea daily)
IMITREX SOLN NA 5 MG/ACT (<i>sumatriptan</i>)	GP	Limit 6 per month;QL(0.2 ea daily)
IMITREX SOLN SC 6 MG/0.5ML (<i>sumatriptan succinate</i>)	GP	QL(2 ml per fill retail,6 ml per fill mail,4 ml per 30 days retail,12 ml per 90 days mail)
IMITREX STATDOSE REFILL SOCT (<i>sumatriptan succinate</i>)	GP	QL(2 ml per fill retail,6 ml per fill mail,4 ml per 30 days retail,12 ml per 90 days mail)
IMITREX STATDOSE SYSTEM SOAJ (<i>sumatriptan succinate</i>)	GP	QL(2 ml per fill retail,6 ml per fill mail,4 ml per 30 days retail,12 ml per 90 days mail)

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

Drug Name	Drug Tier	Requirements/ Limits
IMITREX TABS OR 25 MG (<i>sumatriptan succinate</i>)	GP	QL(9 ea per fill retail,27 ea per fill mail,18 ea per 30 days retail,54 ea per 90 days mail)
IMITREX TABS OR 50 MG, 100 MG (<i>sumatriptan succinate</i>)	NF	QL(9 ea per fill retail,27 ea per fill mail,18 ea per 30 days retail,54 ea per 90 days mail)
MAXALT TABS (<i>rizatriptan benzoate</i>)	NF	QL(12 ea per fill retail,36 ea per fill mail,24 ea per 30 days retail,72 ea per 90 days mail)
MAXALT-MLT TBDP 10 MG (<i>rizatriptan benzoate</i>)	NF	QL(12 ea per fill retail,36 ea per fill mail,24 ea per 30 days retail,72 ea per 90 days mail)
MAXALT-MLT TBDP 5 MG (<i>rizatriptan benzoate</i>)	GP	QL(12 ea per fill retail,36 ea per fill mail,24 ea per 30 days retail,72 ea per 90 days mail)
<i>naratriptan hcl tabs</i>	1	QL(9 ea per 30 days retail)
RELPAK TABS 20 MG (<i>eletriptan hydrobromide</i>)	GP	QL(0.2 ea daily)
RELPAK TABS 40 MG (<i>eletriptan hydrobromide</i>)	NF	QL(0.2 ea daily)
<i>rizatriptan benzoate tabs</i>	1	QL(12 ea per fill retail,36 ea per fill mail,24 ea per 30 days retail,72 ea per 90 days mail)

Drug Name	Drug Tier	Requirements/ Limits
<i>rizatriptan benzoate tbdp</i>	1	QL(12 ea per fill retail,36 ea per fill mail,24 ea per 30 days retail,72 ea per 90 days mail)
<i>sumatriptan soln 20 mg/act</i>	1	Limited to 6 per month;QL(0.2 ea daily)
<i>sumatriptan soln 5 mg/act</i>	1	Limit 6 per month;QL(0.2 ea daily)
<i>sumatriptan succinate soaj sc 4 mg/0.5ml, 6 mg/0.5ml</i>	1	QL(2 ml per fill retail,6 ml per fill mail,4 ml per 30 days retail,12 ml per 90 days mail)
<i>sumatriptan succinate soct sc 4 mg/0.5ml, 6 mg/0.5ml</i>	1	QL(2 ml per fill retail,6 ml per fill mail,4 ml per 30 days retail,12 ml per 90 days mail)
<i>sumatriptan succinate soln sc 6 mg/0.5ml</i>	1	QL(2 ml per fill retail,6 ml per fill mail,4 ml per 30 days retail,12 ml per 90 days mail)
<i>sumatriptan succinate tabs or 25 mg, 50 mg, 100 mg</i>	1	QL(9 ea per fill retail,27 ea per fill mail,18 ea per 30 days retail,54 ea per 90 days mail)
ZEMBRACE SYMTOUCH SOAJ (<i>sumatriptan succinate</i>)	3	PA
<i>zolmitriptan tabs</i>	1	QL(9 ea per fill retail,27 ea per fill mail,18 ea per 30 days retail,54 ea per 90 days mail)

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

Drug Name	Drug Tier	Requirements/ Limits
<i>zolmitriptan tbdp</i>	1	QL(9 ea per fill retail,27 ea per fill mail,18 ea per 30 days retail,54 ea per 90 days mail)
ZOMIG SOLN NA 2.5 MG (<i>zolmitriptan</i>)	3	QL(9 ea per fill retail,27 ea per fill mail,18 ea per 30 days retail,54 ea per 90 days mail)
ZOMIG SOLN NA 5 MG (<i>zolmitriptan</i>)	3	QL(6 ea per 30 days retail,18 ea per 90 days mail)
ZOMIG TABS OR 5 MG, 2.5 MG (<i>zolmitriptan</i>)	GP	QL(9 ea per fill retail,27 ea per fill mail,18 ea per 30 days retail,54 ea per 90 days mail)
ZOMIG ZMT TBDP (<i>zolmitriptan</i>)	GP	QL(9 ea per fill retail,27 ea per fill mail,18 ea per 30 days retail,54 ea per 90 days mail)
MINERALS & ELECTROLYTES		
Calcium		
CALCIFOL WAFR (<i>calcium carbonate-folic acid-vit d-b6-b12-boron-magnesium</i>)	3	
CALCIUM-FOLIC ACID PLUS D WAFR (<i>calcium carbonate-folic acid-vit d-b6-b12-boron-magnesium</i>)	3	
Electrolyte Mixtures		
ISOLYTE-S SOLN (<i>electrolyte-s</i>)	SP	PA
NORMOSOL-R SOLN (<i>electrolyte-r (ph 7.4)</i>)	SP	PA

Drug Name	Drug Tier	Requirements/ Limits
PLASMA-LYTE A SOLN (<i>electrolyte-a</i>)	SP	PA
PLASMA-LYTE-148 SOLN (<i>electrolyte-148</i>)	SP	PA
<i>potassium chloride in nacl soln 0.45 %-20 meq/l, 0.9 %-20 meq/l, 0.9 %-40 meq/l, 0.9 %-40 meq/l, 0.9 %-0.15 %</i>	SP	PA; 1 bal on hand,
<i>potassium chloride in nacl soln 0.45 %-20 meq/l, 0.9 %-20 meq/l, 0.9 %-40 meq/l, 0.9 %-40 meq/l, 0.9 %-0.15 %</i>	SP	PA
Fluoride		
(Sodium Fluoride) FLUORITAB, NAFRINSE DROPS, FLURA-DROPS SOLN	PV	PV
(Sodium Fluoride) FLUORITAB, NAFRINSE DROPS, FLURA-DROPS SOLN	PV	1 bal on hand,PV
(Sodium Fluoride) FLUORITAB, NAFRINSE, LUDENT CHEW	PV	PV
FLUORABON SOLN (<i>sodium fluoride</i>)	PV	PV
<i>sodium fluoride chew 0.25 mg, 0.5 mg, 1 mg, 2.2 mg</i>	PV	PV
<i>sodium fluoride soln 0.5 mg/ml</i>	PV	PV
<i>sodium fluoride tabs 0.5 mg, 1 mg</i>	PV	1 bal on hand,PV
Magnesium		
MAGNEBIND 400 TABS (<i>magnesium-calcium-folic acid</i>)	3	
<i>magnesium sulfate soln ij 50 %</i>	SP	PA; 1 bal on hand,
<i>magnesium sulfate soln ij 50 %</i>	SP	PA

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

Drug Name	Drug Tier	Requirements/ Limits
<i>magnesium sulfate soln iv 2 gm/50ml, 4 gm/50ml, 4 gm/100ml, 20 gm/500ml, 40 gm/1000ml</i>	SP	PA
MAGNESIUM SULFATE SOLN IV 2 GM/50ML, 4 GM/50ML, 4 GM/100ML, 20 GM/500ML, 40 GM/1000ML (<i>magnesium sulfate</i>)	SP	PA
Phosphate		
(Pot Phosphate Monobasic W/ Sod Phosphate Dibasic & Monobasic) AV-PHOS 250 NEUTRAL, VIRT-PHOS 250 NEUTRAL, PHOSPHO-TRIN 250 NEUTRAL, PHOSPHA 250 NEUTRAL TABS	1	
K-PHOS NEUTRAL TABS (<i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic</i>)	GP	
K-PHOS TABS (<i>potassium phosphate monobasic</i>)	2	
<i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic tabs</i>	1	
Potassium		
(Potassium Bicarb & Chloride) EFFERVESCENT POT CHLORIDE TBEF	1	
(Potassium Bicarbonate) EFFER-K TBEF 25 MEQ	1	
(Potassium Bicarbonate) K-EFFERVESCENT, KLOR-CON/EF, K-VESENT, K-PRIME TBEF	1	

Drug Name	Drug Tier	Requirements/ Limits
(Potassium Chloride Microencapsulated Crystals Er) KLOR-CON M10, KLOR-CON M20, KLOR-CON M15 TBCR	1	
(Potassium Chloride Microencapsulated Crystals Er) KLOR-CON M10, KLOR-CON M20, KLOR-CON M15 TBCR	1	1 bal on hand,
(Potassium Chloride) K-SOL, POTASSIUM CHLORIDE PROAMP SOLN	1	
(Potassium Chloride) K-SOL, POTASSIUM CHLORIDE PROAMP SOLN	SP	PA
(Potassium Chloride) KLOR-CON 10, KLOR-CON 8 TBCR	1	
(Potassium Chloride) KLOR-CON PACK	1	
(Potassium Chloride) KLOR-CON SPRINKLE CPCR	1	
EFFER-K TBEF 1 GM-0.84 GM, 2 GM-1.68 GM (<i>potassium bicarbonate-citric acid</i>)	3	
K-TAB TBCR 10 MEQ, 20 MEQ (<i>potassium chloride</i>)	GP	
K-TAB TBCR 8 MEQ (<i>potassium chloride</i>)	2	1 bal on hand,
<i>potassium bicarb & chloride tbef</i>	1	1 bal on hand,
<i>potassium bicarbonate tbef</i>	1	
<i>potassium chloride cpcr or 8 meq, 10 meq</i>	1	
<i>potassium chloride microencapsulated crystals er tbcr</i>	1	

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

Drug Name	Drug Tier	Requirements/ Limits
<i>potassium chloride pack or 20 meq</i>	1	
POTASSIUM CHLORIDE SOLN IV 0.4 MEQ/ML, 10 MEQ/50ML, 20 MEQ/50ML, 10 MEQ/100ML, 20 MEQ/100ML, 20 MEQ/100ML (<i>potassium chloride</i>)	SP	PA
POTASSIUM CHLORIDE SOLN IV 10 MEQ/100ML, 20 MEQ/100ML, 20 MEQ/100ML (<i>potassium chloride</i>)	SP	PA; 1 bal on hand,
<i>potassium chloride soln iv 2 meq/ml</i>	SP	PA; 1 bal on hand,
<i>potassium chloride soln iv 2 meq/ml</i>	SP	PA
<i>potassium chloride soln or 10 %, 20 %</i>	1	
<i>potassium chloride tbc or 8 meq, 10 meq, 20 meq</i>	1	
<i>potassium chloride tbc or 8 meq, 10 meq, 20 meq</i>	1	1 bal on hand,
Sodium		
<i>sodium chloride soln ij 2.5 meq/ml</i>	SP	PA
<i>sodium chloride soln iv 0.45 %, 0.9 %, 3 %, 5 %</i>	SP	PA
<i>sodium chloride soln iv 0.9 %, 0.9 %, 3 %, 5 %</i>	SP	PA; 1 bal on hand,
Zinc		
(Zinc Sulfate) ORAZINC, ZINC-220 CAPS	1	
GALZIN CAPS (<i>zinc acetate (oral)</i>)	3	
<i>zinc sulfate caps</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
MISCELLANEOUS THERAPEUTIC CLASSES		
Chelating Agents		
(Trientine Hcl) CLOVIQUE CAPS	SP	PA
CUPRIMINE CAPS (<i>penicillamine</i>)	GP	PA
DEPEN TITRATABS TABS (<i>penicillamine</i>)	GP	
<i>penicillamine caps</i>	1	PA
<i>penicillamine tabs</i>	1	
SYPRINE CAPS (<i>trientine hcl</i>)	SP	PA
<i>trientine hcl caps</i>	SP	PA
Enzymes		
XIAFLEX SOLR (<i>collagenase clostridium histolyticum</i>)	SP	PA
Immunomodulators		
REVLIMID CAPS (<i>lenalidomide</i>)	AC	PA
THALOMID CAPS (<i>thalidomide</i>)	AC	
Immunosuppressive Agents		
(Cyclosporine Modified (For Microemulsion)) GENGRAF CAPS	1	
(Cyclosporine Modified (For Microemulsion)) GENGRAF SOLN	1	
ASTAGRAF XL CP24 (<i>tacrolimus</i>)	3	PA
ATGAM INJ (<i>lymphocyte immune globulin, anti-thymocyte globulin (equine)</i>)	SP	PA
AZASAN TABS (<i>azathioprine</i>)	3	

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

Drug Name	Drug Tier	Requirements/ Limits
AZATHIOPRINE SOLR IJ 100 MG (<i>azathioprine sodium</i>)	SP	PA
<i>azathioprine tabs or 50 mg</i>	1	
CELLCEPT CAPS (<i>mycophenolate mofetil</i>)	GP	
CELLCEPT INTRAVENOUS SOLR (<i>mycophenolate mofetil hcl</i>)	SP	PA
CELLCEPT SUSR (<i>mycophenolate mofetil</i>)	GP	
CELLCEPT TABS (<i>mycophenolate mofetil</i>)	GP	
<i>cyclosporine caps or 25 mg, 100 mg</i>	1	
<i>cyclosporine modified (for microemulsion) caps 25 mg, 50 mg, 100 mg</i>	1	
<i>cyclosporine modified (for microemulsion) soln 100 mg/ml</i>	1	
<i>cyclosporine soln iv 50 mg/ml</i>	SP	PA
ENVARUSUS XR TB24 (<i>tacrolimus</i>)	3	PA
<i>everolimus (immunosuppressant) tabs</i>	1	
IMURAN TABS (<i>azathioprine</i>)	GP	
<i>mycophenolate mofetil caps</i>	1	
<i>mycophenolate mofetil hcl solr</i>	SP	PA
<i>mycophenolate mofetil susr</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
<i>mycophenolate mofetil tabs</i>	1	
<i>mycophenolate sodium tbec</i>	1	
MYFORTIC TBEC (<i>mycophenolate sodium</i>)	GP	
NEORAL CAPS (<i>cyclosporine modified (for microemulsion)</i>)	GP	
NEORAL SOLN (<i>cyclosporine modified (for microemulsion)</i>)	GP	
NULOJIX SOLR (<i>belatacept</i>)	SP	PA
PROGRAF CAPS OR 0.5 MG, 1 MG, 5 MG (<i>tacrolimus</i>)	GP	
PROGRAF PACK OR 0.2 MG, 1 MG (<i>tacrolimus</i>)	SP	PA
PROGRAF SOLN IV 5 MG/ML (<i>tacrolimus</i>)	SP	PA
RAPAMUNE SOLN (<i>sirolimus</i>)	GP	
RAPAMUNE TABS (<i>sirolimus</i>)	GP	
SANDIMMUNE CAPS OR 25 MG, 100 MG (<i>cyclosporine</i>)	GP	
SANDIMMUNE SOLN IV 50 MG/ML (<i>cyclosporine</i>)	SP	PA
SIMULECT SOLR (<i>basiliximab</i>)	SP	PA
<i>sirolimus soln</i>	1	
<i>sirolimus tabs</i>	1	
<i>tacrolimus caps</i>	1	
THYMOGLOBULIN SOLR (<i>anti-thymocyte globulin (rabbit)</i> , lymphocyte immune globulin)	SP	PA

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

Drug Name	Drug Tier	Requirements/ Limits
ZORTRESS TABS 0.25 MG, 0.75 MG, 0.5 MG (<i>everolimus</i> (<i>immunosuppressant</i>))	GP	
Irrigation Solutions		
(Irrigation Solutions, Physiological) PHYSIOLYTE, PHYSIOSOL IRRIGATION SOLN	1	
(Ringer'S Irrigation) TIS-U-SOL SOLN	1	
(Water For Irrigation, Sterile) ARGYLE STERILE WATER 100ML SOLN	1	
<i>lactated ringer's (irrigation) soln</i>	1	
<i>ringer's irrigation soln</i>	1	
<i>water for irrigation, sterile soln</i>	1	
Potassium Removing Agents		
(Sodium Polystyrene Sulfonate) KIONEX POWD	1	
(Sodium Polystyrene Sulfonate) KIONEX, SPS SUSP	1	
LOKELMA PACK (<i>sodium zirconium cyclosilicate</i>)	3	ST
<i>sodium polystyrene sulfonate powd</i>	1	
<i>sodium polystyrene sulfonate susp</i>	1	
VELTASSA PACK (<i>patiromer sorbitex calcium</i>)	3	ST
Systemic Lupus Erythematosus Agents		
BENLYSTA SOAJ (<i>belimumab</i>)	SP	PA
BENLYSTA SOLR (<i>belimumab</i>)	SP	PA

Drug Name	Drug Tier	Requirements/ Limits
BENLYSTA SOSY (<i>belimumab</i>)	SP	PA
MOUTH/THROAT/DENTAL AGENTS		
Anesthetics Topical Oral		
FIRST-MOUTHWASH BLM SUSP (<i>diphenhydramine-lidocaine-alum hydroxide-mg hydroxide-simeth</i>)	3	
<i>lidocaine hcl (mouth-throat) soln 2 %</i>	1	
<i>lidocaine hcl (mouth-throat) soln 4 %</i>	1	1 bal on hand,
Anti-infectives - Throat		
<i>clotrimazole lozg</i>	1	
<i>clotrimazole troc</i>	1	
<i>nystatin (mouth-throat) susp</i>	1	
ORAVIG TABS (<i>miconazole (mouth-throat)</i>)	3	
Antiseptics - Mouth/Throat		
(Chlorhexidine Gluconate (Mouth-Throat)) PAROEX, PERIOGARD SOLN	1	
<i>chlorhexidine gluconate (mouth-throat) soln</i>	1	
PERIDEX SOLN (<i>chlorhexidine gluconate (mouth-throat)</i>)	GP	
Steroids - Mouth/Throat/Dental		
(Triamcinolone Acetonide (Mouth)) ORALONE DENTAL PASTE PSTE	1	
<i>triamcinolone acetonide (mouth) pste</i>	1	
Throat Products - Misc.		

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

Drug Name	Drug Tier	Requirements/ Limits
cevimeline hcl caps	1	
EVOXAC CAPS (cevimeline hcl)	GP	
GELCLAIR GEL (povidone-sodium hyaluronate-glycyrrhetinic acid)	3	
MUCOTROL WAFR (oral wound care products)	3	
ORAFATE PSTE (sucralfate-malate)	3	
pilocarpine hcl (oral) tabs	1	
PROTHELIAL PSTE (sucralfate-malate)	3	
SALAGEN TABS (pilocarpine hcl (oral))	GP	
MULTIVITAMINS		
Multiple Vitamins & Fluoride-Folic Acid		
MULTIVITAMIN WITH FLUORIDE CHEW 0.25 MG-15 UNIT-400 UNIT-2500 UNIT-1.2 MG-4.5 MCG-1.05 MG-13.5 MG-1.05 MG-0.3 MG-60 MG, 0.5 MG-15 UNIT-400 UNIT-2500 UNIT-1.2 MG-4.5 MCG-1.05 MG-13.5 MG-1.05 MG-0.3 MG-60 MG, 1 MG-15 UNIT-400 UNIT-2500 UNIT-1.2 MG-4.5 MCG-1.05 MG-13.5 MG-1.05 MG-0.3 MG-60 MG (multiple vitamins & fluoride-folic acid)	2	AL(Up to 6 yrs old)
Multiple Vitamins w/ Minerals		
ONEVITE TABS (multiple vitamins w/ minerals & folic acid)	3	
THRIVITE 19 TABS (multiple vitamins w/ minerals & folic acid)	3	

Drug Name	Drug Tier	Requirements/ Limits
UDAMIN SP TABS (multiple vitamins w/ minerals & folic acid)	3	
Ped MV w/ Fluoride		
(Pediatric Multivitamins W/FI) MULTI-VITAMIN/FLUORIDE DROPS SOLN	1	AL(Up to 6 yrs old)
(Pediatric Multivitamins W/FI) MULTIVITAMIN WITH FLUORIDE CHEW 0.25 MG-15 UNIT-400 UNIT-2500 UNIT-1.2 MG-4.5 MCG-13.5 MG-1.05 MG-0.3 MG-1.05 MG-60 MG, 0.5 MG-15 UNIT-400 UNIT-2500 UNIT-1.2 MG-4.5 MCG-13.5 MG-1.05 MG-0.3 MG-1.05 MG-60 MG, 1 MG-15 UNIT-400 UNIT-2500 UNIT-1.2 MG-4.5 MCG-13.5 MG-1.05 MG-0.3 MG-1.05 MG-60 MG	1	AL(Up to 6 yrs old)
(Pediatric Multivitamins W/FI) MULTIVITAMIN WITH FLUORIDE SOLN 0.25 MG/ML-0.6 MG/ML-8 MG/ML-1500 UNIT/ML-2 MCG/ML-400 UNIT/ML-0.5 MG/ML-5 UNIT/ML-0.4 MG/ML-35 MG/ML, 0.5 MG/ML-0.6 MG/ML-8 MG/ML-1500 UNIT/ML-2 MCG/ML-400 UNIT/ML-0.5 MG/ML-5 UNIT/ML-0.4 MG/ML-35 MG/ML, 5 UNIT/ML-0.5 MG/ML-0.6 MG/ML-8 MG/ML-1500 UNIT/ML-2 MCG/ML-400 UNIT/ML-0.5 MG/ML-0.4 MG/ML-35 MG/ML, 5 UNIT/ML-0.25 MG/ML-0.6 MG/ML-8 MG/ML-1500 UNIT/ML-2 MCG/ML-400 UNIT/ML-0.5 MG/ML-0.4 MG/ML-35 MG/ML	1	AL(Up to 6 yrs old)

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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
(Pediatric Multivitamins W/FI) MULTIVITAMIN/FLUORIDE CHEW 0.25 MG-2500 UNIT-13.5 MG-1.2 MG-4.5 MCG-400 UNIT-1.05 MG-0.3 MG-15 UNIT-1.05 MG-60 MG, 0.5 MG-2500 UNIT-13.5 MG-1.2 MG-4.5 MCG-400 UNIT-1.05 MG-0.3 MG-15 UNIT-1.05 MG-60 MG, 1 MG-2500 UNIT-13.5 MG-1.2 MG-4.5 MCG-400 UNIT-1.05 MG-0.3 MG-15 UNIT-1.05 MG-60 MG, 2500 UNIT-1 MG-15 UNIT-400 UNIT-1.2 MG-4.5 MCG-1.05 MG-13.5 MG-1.05 MG-300 MCG-60 MG, 15 UNIT-0.5 MG-2500 UNIT-13.5 MG-1.2 MG-4.5 MCG-400 UNIT-1.05 MG-0.3 MG-1.05 MG-60 MG, 15 UNIT-0.25 MG-2500 UNIT-13.5 MG-1.2 MG-4.5 MCG-400 UNIT-1.05 MG-0.3 MG-1.05 MG-60 MG, 2500 UNIT-0.5 MG-15 UNIT-400 UNIT-1.2 MG-4.5 MCG-1.05 MG-13.5 MG-1.05 MG-300 MCG-60 MG	1	1 bal on hand,AL(Up to 6 yrs old)	(Pediatric Multivitamins W/FI) MULTIVITAMIN/FLUORIDE CHEW 15 UNIT-1 MG-2500 UNIT-13.5 MG-1.2 MG-4.5 MCG-400 UNIT-1.05 MG-0.3 MG-1.05 MG-60 MG, 2500 UNIT-1 MG-15 UNIT-400 UNIT-1.2 MG-4.5 MCG-1.05 MG-13.5 MG-1.05 MG-300 MCG-60 MG, 15 UNIT-0.5 MG-2500 UNIT-13.5 MG-1.2 MG-4.5 MCG-400 UNIT-1.05 MG-0.3 MG-1.05 MG-60 MG, 15 UNIT-0.25 MG-2500 UNIT-13.5 MG-1.2 MG-4.5 MCG-400 UNIT-1.05 MG-0.3 MG-1.05 MG-60 MG, 2500 UNIT-0.5 MG-15 UNIT-400 UNIT-1.2 MG-4.5 MCG-1.05 MG-13.5 MG-1.05 MG-300 MCG-60 MG, 2500 UNIT-0.25 MG-15 UNIT-400 UNIT-1.2 MG-4.5 MCG-1.05 MG-13.5 MG-1.05 MG-300 MCG-60 MG	1	AL(Up to 6 yrs old)
			(Pediatric Multivitamins W/FI) MULTIVITAMIN/FLUORIDE SOLN 0.25 MG/ML-5 UNIT/ML-0.6 MG/ML-8 MG/ML-1500 UNIT/ML-2 MCG/ML-400 UNIT/ML-0.5 MG/ML-0.4 MG/ML-35 MG/ML, 0.5 MG/ML-5 UNIT/ML-0.6 MG/ML-8 MG/ML-1500 UNIT/ML-2 MCG/ML-400 UNIT/ML-0.5 MG/ML-0.4 MG/ML-35 MG/ML	1	AL(Up to 6 yrs old)
			(Pediatric Multivitamins W/FI) MULTIVITAMINS/FLUORIDE, MVC-FLUORIDE CHEW	1	AL(Up to 6 yrs old)

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

Drug Name	Drug Tier	Requirements/ Limits
(Pediatric Vitamins Acid W/ Fluoride) TRI-VITAMIN/FLUORIDE, VITAMINS A/C/D/FLUORIDE, TRI-VITE/FLUORIDE SOLN	1	AL(Up to 6 yrs old)
FLORIVA PLUS SOLN (<i>pediatric multivitamins w/fl</i>)	2	AL(Up to 6 yrs old)
<i>pediatric vitamins acid w/ fluoride soln</i>	1	AL(Up to 6 yrs old)
POLY-VI-FLOR CHEW 200 MCG-1 MG-15 UNIT-400 UNIT, 200 MCG-0.5 MG-15 UNIT-400 UNIT, 200 MCG-0.25 MG-15 UNIT-400 UNIT (<i>pediatric multivitamins w/fl</i>)	3	AL(Up to 6 yrs old)
POLY-VI-FLOR SUSP 200 MCG/ML-0.25 MG/ML (<i>pediatric multivitamins w/fl</i>)	3	
QUFLORA GUMMIES CHEW (<i>pediatric multivitamins w/fl</i>)	2	AL(Up to 6 yrs old)
QUFLORA PEDIATRIC CHEW (<i>pediatric multivitamins w/fl</i>)	2	AL(Up to 6 yrs old)
QUFLORA PEDIATRIC SOLN (<i>pediatric multivitamins w/fl</i>)	2	AL(Up to 6 yrs old)
TRI-VI-FLOR SUSP (<i>pediatric vitamins acid & l-methylfolate w/ fluoride</i>)	3	
TRI-VI-FLORO SUSP (<i>pediatric vitamins acid & l-methylfolate w/ fluoride</i>)	3	
Ped Multi Vitamins w/Fl & FE		

Drug Name	Drug Tier	Requirements/ Limits
(Ped Multivitamins W/Fl & Iron) MULTI-VIT/IRON/FLUORIDE, MULTIVITAMIN/FLUORIDE/IRON, MULTI-VITAMIN/FLUORIDE/IRON SOLN	1	
POLY-VI-FLOR/IRON CHEW 200 MCG-0.5 MG-10 MG-15 UNIT-400 UNIT (<i>ped multivitamins w/fl & iron</i>)	3	AL(Up to 6 yrs old)
POLY-VI-FLOR/IRON SUSP 200 MCG/ML-7 MG/ML-0.25 MG/ML (<i>ped multivitamins w/fl & iron</i>)	3	
Prenatal Vitamins		
(Prenatal Vit W/ Docusate-Fe Fumarate-Folic Acid) PRENATAL 19 TABS 1000 UNIT-30 UNIT-20 MG-25 MG-3 MG-200 MG-29 MG-15 MG-3 MG-7 MG-12 MCG-400 UNIT-20 MG-1 MG-100 MG	1	1 bal on hand,
(Prenatal Vit W/ Docusate-Iron Carbonyl-Folic Acid) INATAL GT TABS	1	1 bal on hand,
(Prenatal Vit W/ Ferrous Fumarate-Folic Acid) PRENATAL 19 CHEW 1000 UNIT-400 UNIT-20 MG-25 MG-3 MG-200 MG-29 MG-7 MG-6 MG-3 MG-12 MCG-1 MG-30 UNIT-20 MG-100 MG	1	1 bal on hand,
(Prenatal Vit W/ Ferrous Fumarate-L Methylfolate-Folic Acid) PNV-SELECT TABS	1	1 bal on hand,
(Prenatal Vit W/ Iron Carbonyl-Folic Acid) PRENATABS RX TABS	1	1 bal on hand,
(Prenatal Without A W/ Fe Fumarate-L Methylfolate-Fa-Dha) PNV-DHA CAPS	1	1 bal on hand,

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

Drug Name	Drug Tier	Requirements/ Limits
ATABEX EC TBEC (<i>prenatal vit w/ docusate-iron carbonyl-folic acid</i>)	2	
ATABEX OB TABS (<i>prenatal vit w/ fe bisglycinate chelate-folic acid</i>)	2	
BAL-CARE DHA MISC (<i>prenatal w/fe polysacch cmplx-sod feredetate-fa-omega 3</i>)	2	
C-NATE DHA CAPS (<i>prenatal vit w/ ferrous fumarate-fa-omega 3 fatty acids</i>)	3	
CITRANATAL 90 DHA MISC (<i>prenatal w/o vit a w/ fe carbonyl-fe gluconate-dss-fa-dha</i>)	2	
CITRANATAL ASSURE MISC (<i>prenatal w/o vit a w/ fe carbonyl-fe gluconate-dss-fa-dha</i>)	2	
CITRANATAL B-CALM MISC (<i>prenatal w/o vit a w/ fe carbonyl-fe gluconate-fa & vit b6</i>)	3	
CITRANATAL BLOOM DHA MISC (<i>prenatal w/o vit a w/ fe carbonyl-fe gluconate-dss-fa-dha</i>)	2	
CITRANATAL BLOOM TABS (<i>prenatal vit w/ docusate-fe carbonyl-fe gluconate-folic acid</i>)	3	
CITRANATAL DHA MISC (<i>prenatal w/o vit a w/ fe carbonyl-fe gluconate-dss-fa-dha</i>)	2	

Drug Name	Drug Tier	Requirements/ Limits
CITRANATAL HARMONY CAPS (<i>prenatal w/o vit a w/ fe fumarate-fe carbonyl-dss-fa-dha</i>)	3	
CITRANATAL MEDLEY CAPS (<i>prenatal w/o vit a w/ fe fumarate-fe carbonyl-fa-dha</i>)	3	
CITRANATAL RX TABS (<i>prenatal without vit a w/ fe carbonyl-fe gluc-docusate-fa</i>)	3	
COMPLETENATE CHEW (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	2	
CONCEPT DHA CAPS (<i>prenatal vit w/ fe fum-iron polysacch complex -fa-omega 3</i>)	2	
CONCEPT OB CAPS (<i>prenatal without a vit w/ fe fum-iron polysacch complex -fa</i>)	2	
CVS PRENATAL TABS (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	2	
DOTHELLE DHA CAPS (<i>prenatal vit w/ fe fum-iron polysacch complex -fa-omega 3</i>)	2	
DUET DHA 400 MISC (<i>prenatal w/fe polysacch cmplx-sod feredetate-fa-omega 3</i>)	3	
DUET DHA BALANCED MISC (<i>prenatal w/fe polysacch cmplx-sod feredetate-fa-omega 3</i>)	3	
ENBRACE HR CAPS (<i>prenatal vit w/ fe glycine cysteinate-fa-omega 3 fatty acids</i>)	3	

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

Drug Name	Drug Tier	Requirements/ Limits
FOLET DHA THPK (<i>prenatal vit w/fe carbonyl-fe bisglyc-methylfol-dss & dha</i>)	3	
FOLET ONE CAPS (<i>prenatal w/o a w/fe carbonyl-fe bisglyc-l methylfol-dss-dha</i>)	3	
FOLIVANE-OB CAPS (<i>prenatal without a vit w/ fe fum-iron polysacch complex -fa</i>)	2	
HEMENATAL OB + DHA MISC (<i>prenatal vit w/ fe poly cmplx-fe heme polypept-fa & omega 3</i>)	2	
HEMENATAL OB TABS (<i>prenatal vit w/ fe polysacch complex-fe heme polypeptide-fa</i>)	3	
INFANATE BALANCE CAPS (<i>prenatal w/o vit a w/ fe carbonyl-dss-fa-dha</i>)	3	
KOSHER PRENATAL PLUS IRON TABS (<i>prenatal vit w/ iron carbonyl-folic acid</i>)	3	
M-NATAL PLUS TABS (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	2	RX/OTC
M-VIT TABS (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	2	RX/OTC
MARNATAL-F CAPS (<i>prenatal without vit a w/ iron polysaccharide complex-fa</i>)	2	
MULTI PRENATAL TABS (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	2	

Drug Name	Drug Tier	Requirements/ Limits
MYNATAL ADVANCE TABS (<i>prenatal vit w/ docusate-iron carbonyl-folic acid</i>)	2	
MYNATAL ULTRACAPLET TABS (<i>prenatal vit w/ docusate-iron carbonyl-folic acid</i>)	2	
MYNATE 90 PLUS TBCR (<i>prenatal vit w/ docusate-fe fumarate-folic acid</i>)	2	
NATACHEW CHEW (<i>prenatal vit w/ fe fum-fe bisglycinate chelate-folic acid</i>)	3	
NATELLE ONE CAPS (<i>prenatal without vit a w/ fe fum-fa-omega fatty acids</i>)	3	
NEEVO DHA CAPS (<i>prenatal without vit a w/ fe fumarate-l methylfolate-omegas</i>)	3	
NEONATAL COMPLETE TABS (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	2	RX/OTC
NEONATAL PLUS TABS (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	2	RX/OTC
NEONATAL VITAMIN TABS (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	2	
NESTABS ABC MISC (<i>prenatal mv & min w/o vit a w/fe polysac cmplx-fa-ca-omega 3</i>)	3	
NESTABS DHA MISC (<i>prenatal vit without vit a w/ fe bisglycinate-fa-omeg 3</i>)	2	

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

Drug Name	Drug Tier	Requirements/ Limits
NESTABS ONE CAPS (<i>prenatal w/o a w/fe carbonyl-fe bisglyc-l methylfol-dha</i>)	3	
NESTABS TABS (<i>prenatal vit without vit a w/ fe bisglycinate-folic acid</i>)	3	
NEXA PLUS CAPS (<i>prenatal w/o vit a w/fe fumarate-docusate ca-folic acid-dha</i>)	3	
NIVA-PLUS TABS (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	2	RX/OTC
O-CAL FA TABS (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	2	RX/OTC
OB COMPLETE ONE CAPS (<i>prenatal w/o vit a w/ fe carbonyl-fe aspart glyc-fa-fish oil</i>)	3	
OB COMPLETE PETITE CAPS (<i>prenatal w/o vit a w/ fe carbonyl-fe aspart glyc-fa-omega 3</i>)	3	
OB COMPLETE PREMIER TABS (<i>prenatal vit w/ iron carbonyl-fe aspart glycinate-fa</i>)	3	
OB COMPLETE/DHA CAPS (<i>prenat vit w/ iron carbonyl-fe asp glyc-fa-omega fatty acid</i>)	3	
OBSTETRIX ONE CAPS (<i>prenatal w/o a w/fe carbonyl-fe bisglyc-l methylfol-dss-dha</i>)	3	
PNV FOLIC ACID + IRON MULTIVITAMIN TABS (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	2	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
PNV OB+DHA MISC (<i>prenatal w/o vit a w/ fe carbonyl-fe gluconate-dss-fa-dha</i>)	2	
PNV PRENATAL PLUS MULTIVITAMIN TABS (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	2	RX/OTC
PNV TABS 29-1 TABS (<i>prenatal vit w/ iron carbonyl-folic acid</i>)	3	
PNV-DHA+DOCUSATE CAPS (<i>prenatal w/o vit a w/ fe fumarate-dss-fa-dha</i>)	3	
PNV-OMEGA CAPS (<i>prenatal without a w/ fe fumarate-l methylfolate-fa-omega 3</i>)	3	
PNV-TOTAL CAPS (<i>prenatal vit w/ fe carbonyl-fe bisglycinate-fa-fish oil</i>)	3	
PR NATAL 400 EC MISC (<i>prenatal mv & min w/fe bisglyc-fe prot succ-fa-ca-omega 3</i>)	2	
PR NATAL 430 EC MISC (<i>prenatal mv & min w/fe bisglyc-fe prot succ-fa-ca-omega 3</i>)	3	
PR NATAL 430 MISC (<i>prenatal mv & min w/fe bisglyc-fe prot succ-fa-ca-omega 3</i>)	3	
PREFERAOB +DHA MISC (<i>prenatal vit w/ fe polysacch cmplx-fe heme polypept-fa & dha</i>)	3	

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

Drug Name	Drug Tier	Requirements/ Limits
PREMESISRX TABS (<i>prenatal w/ calcium-vit b6-vit b12-folic acid-ginger</i>)	3	
PRENA 1 TRUE MISC (<i>prenatal without a w/ fe amino acid chelate-fa-dha</i>)	3	
PRENA1 PEARL CPCR (<i>prenatal without a w/ fe fumarate-sod feredetate-fa-dha</i>)	3	
PRENAISSANCE BALANCE CAPS (<i>prenatal w/o vit a w/ fe carbonyl-dss-fa-dha</i>)	3	
PRENAISSANCE CAPS (<i>prenatal w/o vit a w/ fe fumarate-dss-fa-dha</i>)	3	
PRENAISSANCE HARMONY DHA MISC (<i>prenatal w/fe polysacch cmplx-sod feredetate-fa-omega 3</i>)	3	
PRENAISSANCE NEXT TABS (<i>prenatal w/ calcium-vit b6-folic acid-ginger</i>)	3	
PRENAISSANCE NEXT-B TABS (<i>prenatal w/ calcium-vit b6-folic acid-ginger</i>)	3	
PRENAISSANCE PLUS CAPS (<i>prenatal w/o vit a w/ fe carbonyl-dss-fa-dha</i>)	3	
PRENATA CHEW (<i>prenatal without a vit w/ fe fumarate-folic acid</i>)	2	

Drug Name	Drug Tier	Requirements/ Limits
PRENATAL 19 CHEW 30 UNIT-1000 UNIT-20 MG-3 MG-200 MG-29 MG-7 MG- 15 MG-3 MG-12 MCG-400 UNIT-1 MG-20 MG-100 MG (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	2	
PRENATAL 19 TABS 30 UNIT-1000 UNIT-20 MG-25 MG-3 MG-200 MG-29 MG- 7 MG-15 MG-3 MG-12 MCG-400 UNIT-1 MG-20 MG-100 MG (<i>prenatal vit w/ docusate-fe fumarate-folic acid</i>)	3	
PRENATAL LOW IRON TABS (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	2	
PRENATAL ONE DAILY TABS (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	2	
PRENATAL PLUS IRON TABS (<i>prenatal vit w/ iron carbonyl-folic acid</i>)	3	
PRENATAL PLUS TABS (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	2	RX/OTC
PRENATAL TABS 11 UNIT-263 MG-25 MG-1.5 MG-27 MG-4000 UNIT-18 MG-1.7 MG-4 MCG-400 UNIT-0.8 MG-2.6 MG-100 MG, 160 MG-11 UNIT-200 MG-25 MG-1.84 MG-27 MG-4000 UNIT-18 MG-1.7 MG-4 MCG-400 UNIT-800 MCG-2.6 MG-100 MG (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	2	

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

Drug Name	Drug Tier	Requirements/ Limits
PRENATAL TABS 22 MG-2 MG-25 MG-1.84 MG-200 MG-27 MG-4000 UNIT-20 MG-3 MG-12 MCG-400 UNIT-1 MG-10 MG-120 MG, 160 MG-11 UNIT-200 MG-25 MG-1.84 MG-27 MG-4000 UNIT-18 MG-1.7 MG-4 MCG-400 UNIT-800 MCG-2.6 MG-100 MG (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	2	RX/OTC
PRENATAL VITAMIN TABS (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	2	
PRENATAL VITAMINS PLUS LOW IRON TABS (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	2	RX/OTC
PRENATAL-U CAPS (<i>prenatal without a vit w/ fe fumarate-folic acid</i>)	2	
PRENATE AM TABS (<i>prenatal w/ calcium-vit b6-vit b12-folic acid-ginger</i>)	3	
PRENATE CHEW (<i>prenatal multivitamins & minerals w/ l-methylfolate-fa</i>)	3	
PRENATE DHA CAPS (<i>prenatal w/o a w/ fe asparto glyc-l methylfolate-fa-dha</i>)	3	
PRENATE ELITE TABS (<i>prenatal w/ fe asparto glycinate-l methylfolate-folic acid</i>)	3	
PRENATE ESSENTIAL CAPS (<i>prenatal w/o a w/ fe asparto glyc-l methylfolate-fa-dha</i>)	3	

Drug Name	Drug Tier	Requirements/ Limits
PRENATE MINI CAPS (<i>prenatal w/o vit a w/ fe carbonyl-fe asp glyc-methfol-fa-dha</i>)	3	
PRENATE PIXIE CAPS (<i>prenatal w/o a w/ fe asparto glyc-l methylfolate-fa-dha</i>)	3	
PREPLUS TABS (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	2	RX/OTC
PRIMACARE CAPS (<i>prenatal without a w/ fe asp glyc-l methylfolate-fa-omega 3</i>)	3	
PROVIDA DHA CAPS (<i>prenatal without a w/fe fum-fe polysacch complex-fa-dha</i>)	3	
PROVIDA OB CAPS (<i>prenatal without a vit w/ fe fum-iron polysacch complex -fa</i>)	2	
R-NATAL OB CAPS (<i>prenatal w/o vit a w/ fe carbonyl-folic acid-dha</i>)	3	
RELNATE DHA CAPS (<i>prenatal vit w/ ferrous fumarate-fa-omega 3 fatty acids</i>)	3	
RIGHT STEP PRENATAL TABS (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	2	
SE-NATAL 19 CHEW 30 UNIT-1000 UNIT-100 MG-20 MG-3 MG-200 MG-29 MG-7 MG-15 MG-3 MG-12 MCG-400 UNIT-1 MG-20 MG (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	2	

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

Drug Name	Drug Tier	Requirements/ Limits
SE-NATAL 19 TABS 30 UNIT-1000 UNIT-20 MG-25 MG-200 MG-29 MG-7 MG-15 MG-3 MG-12 MCG-400 UNIT-3 MG-20 MG-1 MG-100 MG (<i>prenatal vit w/ docusate-fe fumarate-folic acid</i>)	3	
SELECT-OB CHEW 1700 UNIT-29 MG-30 UNIT-15 MG-25 MG-1.6 MG-15 MG-1.8 MG-5 MCG-400 UNIT-1 MG-2.5 MG-60 MG (<i>prenatal vit w/ iron polysaccharide complex-folic acid</i>)	3	
SELECT-OB+DHA MISC (<i>prenatal mv & min w/fe polysaccharide complex-fa-dha</i>)	3	
TARON-BC MISC (<i>prenatal without vit a w/ iron carbonyl-folic acid & vit b6</i>)	3	
TARON-C DHA CAPS (<i>prenatal vit w/ fe fum-iron polysacch complex -fa-omega 3</i>)	2	
TARON-PREX CAPS (<i>prenatal w/o vit a w/ fe fumarate-dss-fa-dha</i>)	3	
THERANATAL CORE NUTRITION TABS (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	2	RX/OTC
THRIVITE RX TABS (<i>prenatal vit w/ iron carbonyl-folic acid</i>)	3	
TL FOLATE TABS (<i>prenatal vit w/ ferrous fumarate-l methylfolate-folic acid</i>)	2	
TL-CARE DHA CAPS (<i>prenatal w/fe fumarate-fa-dss-fish oil</i>)	3	

Drug Name	Drug Tier	Requirements/ Limits
TL-SELECT CAPS (<i>prenatal w/o vit a w/ fe fumarate-dss-fa-dha</i>)	3	
TRI-TABS DHA MISC (<i>prenatal vit without vit a w/ fe bisglycinate-fa-omeg 3</i>)	2	
TRICARE PRENATAL DHA ONE CAPS (<i>prenatal w/fe fumarate-fa-dss-fish oil</i>)	3	
TRICARE PRENATAL DHA ONE/FOLATE CAPS (<i>prenatal multivit-min w/fe-fa</i>)	2	
TRICARE TABS (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	2	RX/OTC
TRISTART DHA CAPS (<i>prenatal without a w/ fe carbonyl-l methylfolate-fa-dha</i>)	3	
TRISTART ONE CAPS (<i>prenatal without a w/ fe carbonyl-l methylfolate-fa-dha</i>)	3	
ULTIMATECARE ONE CAPS (<i>prenatal vit w/ iron carbonyl-fe aspart glyc-fa-omega 3</i>)	3	
VENA-BAL DHA MISC (<i>prenatal w/fe polysacch cmplx-sod feredetate-fa-omega 3</i>)	2	
VIL-RX TABS (<i>prenatal vit w/ iron carbonyl-folic acid</i>)	3	
VINATE DHA RF CAPS (<i>prenatal without vit a w/ fe fumarate-l methylfolate-omegas</i>)	3	

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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
VINATE II TABS (<i>prenatal vit w/ fe bisglycinate chelate-folic acid</i>)	2		VITAFOL-NANO TABS (<i>prenatal w/o a vit w/ fe fumarate-l methylfolate-folic acid</i>)	3	
VIRT-C DHA CAPS (<i>prenatal vit w/ fe fum-iron polysacch complex-fa-omega 3</i>)	2		VITAFOL-ONE CAPS (<i>prenatal mv & min w/fe polysaccharide complex-fa-dha</i>)	3	
VIRT-NATE DHA CAPS (<i>prenatal vit w/ ferrous fumarate-fa-omega 3 fatty acids</i>)	3		VITAMEDMD ONE RX/QUATREFOLIC CAPS (<i>prenatal without a w/ fe fumarate-l methylfolate-fa-dha</i>)	3	
VIRT-PN DHA CAPS (<i>prenatal without a w/ fe fumarate-l methylfolate-fa-dha</i>)	3		VITAPEARL CPR (<i>prenatal without a w/ fe fumarate-sod feredetate-fa-dha</i>)	3	
VIRT-PN PLUS CAPS (<i>prenatal without a w/ fe fumarate-l methylfolate-fa-omega 3</i>)	3		VITATHELY/GINGER TABS (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	2	RX/OTC
VIRT-PN TABS (<i>prenatal vit w/ ferrous fumarate-l methylfolate-folic acid</i>)	3		VITATRUE MISC (<i>prenatal without a w/ fe amino acid chelate-fa-dha</i>)	3	
VITAFOL FE+ CPPK 415 MG-0.6 MG-90 MG-20 UNIT-150 MCG-1100 UNIT-200 MG-2 MG-25 MG-20 MG-50 MG-15 MG-1.8 MG-25 MCG-1000 UNIT-1.6 MG-0.4 MG-2.5 MG-60 MG (<i>prenatal vit w/ fe polysacch complex-l methylfol-fa-dha-dss</i>)	3		VIVA DHA CAPS (<i>prenatal vit w/ ferrous fumarate-fa-omega 3 fatty acids</i>)	3	
VITAFOL GUMMIES CHEW (<i>prenatal vit w/ ferric phosphate-fa-omega 3 fatty acids</i>)	3		VOL-PLUS TABS (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	2	RX/OTC
VITAFOL ULTRA CAPS (<i>prenatal vit w/ fe polysacch complex-l methylfolate-fa-dha</i>)	2		VOL-TAB RX TABS (<i>prenatal vit w/ iron carbonyl-folic acid</i>)	3	
			VP-GGR-B6 PRENATAL TABS (<i>prenatal w/ calcium-vit b6-folic acid-ginger</i>)	3	
			VP-HEME OB + DHA MISC (<i>prenatal vit w/ fe poly cmplx-fe heme polypept-fa & omega 3</i>)	2	

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

Drug Name	Drug Tier	Requirements/ Limits
VP-HEME OB TABS (<i>prenatal vit w/ fe polysacch complex-fe heme polypeptide-fa</i>)	3	
VP-PNV-DHA CAPS (<i>prenatal vit w/ ferrous fumarate-fa-omega 3 fatty acids</i>)	3	
ZATEAN-PN DHA CAPS (<i>prenatal without a w/ fe fumarate-l methylfolate-fa-dha</i>)	3	
ZATEAN-PN PLUS CAPS (<i>prenatal without a w/ fe fumarate-l methylfolate-fa-omega 3</i>)	3	
MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms		
Central Muscle Relaxants		
(Carisoprodol) VANADOM TABS	1	
(Chlorzoxazone) LORZONE TABS	1	
(Cyclobenzaprine Hcl) FEXMID TABS	1	1 bal on hand,
(Metaxalone) METAXALL TABS	1	
AMRIX CP24 (<i>cyclobenzaprine hcl</i>)	GP	ST; QL(1 ea daily)
<i>baclofen soln it 500 mcg/ml</i>	SP	PA
<i>baclofen tabs or 10 mg, 20 mg</i>	1	
<i>baclofen tabs or 5 mg, 20 mg</i>	1	1 bal on hand,
<i>carisoprodol tabs</i>	1	
CHLORZOXAZONE TABS 250 MG (<i>chlorzoxazone</i>)	3	
<i>chlorzoxazone tabs 375 mg, 500 mg, 750 mg</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
<i>cyclobenzaprine hcl cp24 15 mg, 30 mg</i>	1	ST; QL(1 ea daily)
<i>cyclobenzaprine hcl tabs 5 mg, 10 mg, 7.5 mg</i>	1	
GABLOFEN SOLN (<i>baclofen</i>)	SP	PA
LIORESAL INTRATHECAL SOLN 0.05 MG/ML, 10 MG/5ML (<i>baclofen</i>)	SP	PA
LIORESAL INTRATHECAL SOLN 10 MG/20ML (<i>baclofen</i>)	SP	PA
<i>metaxalone tabs</i>	1	
<i>methocarbamol tabs</i>	1	
<i>orphenadrine citrate tb12</i>	1	
ROBAXIN TABS (<i>methocarbamol</i>)	GP	
ROBAXIN-750 TABS (<i>methocarbamol</i>)	GP	
SKELAXIN TABS (<i>metaxalone</i>)	GP	
SOMA TABS (<i>carisoprodol</i>)	GP	
<i>tizanidine hcl caps</i>	1	
<i>tizanidine hcl tabs</i>	1	
ZANAFLEX CAPS (<i>tizanidine hcl</i>)	GP	
ZANAFLEX TABS (<i>tizanidine hcl</i>)	GP	
Direct Muscle Relaxants		
DANTRIU CAPS (<i>dantrolene sodium</i>)	GP	
<i>dantrolene sodium caps</i>	1	
Muscle Relaxant Combinations		
<i>carisoprodol w/ aspirin & codeine tabs</i>	1	1 bal on hand,

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

Drug Name	Drug Tier	Requirements/ Limits
<i>carisoprodol w/ aspirin & codeine tabs</i>	1	
<i>carisoprodol w/ aspirin tabs</i>	1	
<i>carisoprodol w/ aspirin tabs</i>	1	1 bal on hand,
NORGESIC FORTE TABS (<i>orphenadrine w/ aspirin & caff</i>)	NF	1 bal on hand,
<i>orphenadrine w/ aspirin & caff tabs 25 mg-30 mg-385 mg</i>	1	
NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus		
Nasal Agent Combinations		
<i>azelastine hcl-fluticasone propionate susp</i>	1	Limit 1 per month;QL(0.77 gm daily)
DYMISTA SUSP (<i>azelastine hcl-fluticasone propionate</i>)	GP	Limit 1 per month;QL(0.77 gm daily)
Nasal Anti-infectives		
BACTROBAN NASAL OINT (<i>mupirocin calcium</i>)	2	
Nasal Antiallergy		
ASTEPRO SOLN (<i>azelastine hcl</i>)	NF	Limit 1 inhaler per month;QL(1 ml daily)
<i>azelastine hcl soln 0.1 %, 137 mcg/spray</i>	1	Limit 1 inhaler per month;QL(1.2 ml daily)
<i>azelastine hcl soln 0.15 %, 137 mcg/spray</i>	1	Limit 1 inhaler per month;QL(1 ml daily)
<i>olopatadine hcl (nasal) soln</i>	1	
PATANASE SOLN (<i>olopatadine hcl (nasal)</i>)	GP	
Nasal Anticholinergics		

Drug Name	Drug Tier	Requirements/ Limits
<i>ipratropium bromide (nasal) soln</i>	1	
Nasal Steroids		
(Budesonide (Nasal)) CVS BUDESONIDE NASAL SPRAY, RHINOCORT ALLERGY, RA BUDESONIDE NASAL SPRAY, GNP BUDESONIDE NASAL SPRAY, EQ BUDESONIDE NASAL SPRAY SUSP	1	Limit 2 inhalers per month;QL(0.6 ml daily)
(Fluticasone Propionate (Nasal)) ALLERGY NASAL SPRAY 24 HOUR, SM ALLERGY RELIEF NASAL SPRAY, QC FLUTICASONE PROPIONATE, QC ALLERGY RELIEF, KP FLUTICASONE PROPIONATE, KLS ALLER-FLO, HM ALLERGY RELIEF NASAL SPRAY 24HR, GNP FLUTICASONE PROPIONATE CHILDRENS, GNP FLUTICASONE PROPIONATE, EQL FLUTICASONE PROPIONATE CHILDRENS, EQL FLUTICASONE PROPIONATE, CVS FLUTICASONE PROPRIONATE NASAL SPRAY, CLARISPRAY, ALLERGY RELIEF SUSP	1	Limit 2 inhalers per month;QL(1.1 ml daily); RX/OTC
(Fluticasone Propionate (Nasal)) EQ ALLERGY RELIEF SUSP NA 50 MCG/ACT	1	Limit 2 inhalers per month;QL(1.1 ml daily); RX/OTC
BECONASE AQ SUSP (<i>beclomethasone diprop monohyd</i>)	3	Limit 2 inhalers per month;QL(1.67 gm daily)

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

Drug Name	Drug Tier	Requirements/ Limits
budesonide (nasal) susp	1	Limit 2 inhalers per month; QL(0.6 ml daily)
FLONASE ALLERGY RELIEF CHILDRENS SUSP (fluticasone propionate (nasal))	GP	Limit 2 inhalers per month; QL(1.1 ml daily); RX/OTC
FLONASE ALLERGY RELIEF SUSP (fluticasone propionate (nasal))	GP	Limit 2 inhalers per month; QL(1.1 ml daily); RX/OTC
FLONASE SENSIMIST SUSP (fluticasone furoate)	3	Limit 1 inhaler per month; QL(0.34 ml daily)
flunisolide (nasal) soln	1	1 bal on hand,
fluticasone propionate (nasal) susp	1	Limit 2 inhalers per month; QL(1.1 ml daily); RX/OTC
mometasone furoate (nasal) susp	1	Limit 2 inhalers per month; QL(1.14 gm daily)
NASONEX SUSP (mometasone furoate (nasal))	GP	Limit 2 inhalers per month; QL(1.14 gm daily)
OMNARIS SUSP (ciclesonide (nasal))	3	Limit 1 inhaler per month; QL(0.42 gm daily)
QNASL AERS (beclomethasone dipropionate (nasal))	3	Limit 1 inhaler per month; QL(0.29 gm daily)
QNASL CHILDRENS AERS (beclomethasone dipropionate (nasal))	3	Limit 1 inhaler per month; QL(0.17 gm daily)
ZETONNA AERS (ciclesonide (nasal))	3	Limit 1 inhaler per month; QL(0.3 gm daily)

Drug Name	Drug Tier	Requirements/ Limits
NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles		
ALS Agents		
RILUTEK TABS (riluzole)	GP	
riluzole tabs	1	
Neuromuscular Blocking Agent - Neurotoxins		
BOTOX SOLR (onabotulinumtoxinA)	SP	PA
OPHTHALMIC AGENTS - Drugs to Treat the Eye		
Artificial Tears and Lubricants		
LACRISERT INST (artificial tear insert)	3	
Beta-blockers - Ophthalmic		
BETAGAN SOLN (levobunolol hcl)	3	
betaxolol hcl (ophth) soln	1	
BETIMOL SOLN (timolol)	2	
BETOPTIC-S SUSP (betaxolol hcl (ophth))	2	
carteolol hcl (ophth) soln	1	1 bal on hand,
COMBIGAN SOLN (brimonidine tartrate-timolol maleate)	3	
COSOPT PF SOLN (dorzolamide hcl-timolol maleate)	GP	
COSOPT SOLN (dorzolamide hcl-timolol maleate)	3	
dorzolamide hcl-timolol maleate soln 2 %-0.5 %, 20 mg/ml-5 mg/ml, 22.3 mg/ml-6.8 mg/ml	1	1 bal on hand,

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

Drug Name	Drug Tier	Requirements/ Limits
dorzolamide hcl-timolol maleate soln 2 %-0.5 %, 20 mg/ml-5 mg/ml, 22.3 mg/ml-6.8 mg/ml	1	
ISTALOL SOLN (timolol maleate (ophth))	GP	
levobunolol hcl soln	1	1 bal on hand,
levobunolol hcl soln	1	
metipranolol soln	1	1 bal on hand,
timolol maleate (ophth) solg 0.25 %, 0.5 %	1	1 bal on hand,
timolol maleate (ophth) soln 0.25 %, 0.5 %	1	
TIMOPTIC OCULOSE SOLN (timolol maleate (ophth))	3	
TIMOPTIC SOLN (timolol maleate (ophth))	GP	
TIMOPTIC-XE SOLG (timolol maleate (ophth))	2	1 bal on hand,
Cycloplegic Mydriatics		
(Homatropine Hbr) HOMATROPAIRE SOLN	1	1 bal on hand,
(Phenylephrine Hcl (Mydriatic)) ALTAFRIN SOLN	1	
ATROPINE SULFATE SOLN OP 1 % (atropine sulfate (ophthalmic))	2	
CYCLOGYL SOLN (cyclopentolate hcl)	GP	
CYCLOMYDRIL SOLN (cyclopentolate w/ phenylephrine)	3	
cyclopentolate hcl soln	1	
homatropine hbr soln	1	

Drug Name	Drug Tier	Requirements/ Limits
ISOPTO ATROPINE SOLN (atropine sulfate (ophthalmic))	2	
MYDRIACYL SOLN (tropicamide)	GP	
phenylephrine hcl (mydriatic) soln	1	
tropicamide soln	1	
Miotics		
ISOPTO CARPINE SOLN (pilocarpine hcl)	GP	
PHOSPHOLINE IODIDE SOLR (echothiophate iodide)	2	
pilocarpine hcl soln	1	
Ophthalmic Adrenergic Agents		
ALPHAGAN P SOLN 0.1 % (brimonidine tartrate)	2	
ALPHAGAN P SOLN 0.15 % (brimonidine tartrate)	GP	
apraclonidine hcl soln	1	
brimonidine tartrate soln	1	
IOPIDINE SOLN 0.5 % (apraclonidine hcl)	GP	
IOPIDINE SOLN 1 % (apraclonidine hcl)	3	
SIMBRINZA SUSP (brinzolamide-brimonidine tartrate)	3	
Ophthalmic Anti-infectives		
(Bacitracin-Polymyxin B (Ophth)) AK-POLY-BAC, POLYCIN OINT	1	
(Erythromycin (Ophth)) ILOTYCIN OINT	1	
(Gentamicin Sulfate (Ophth)) GENTAK OINT	1	1 bal on hand,

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

Drug Name	Drug Tier	Requirements/ Limits
(Neomycin-Bacitracin Zn-Polymyxin) NEO-POLYCIN OINT	1	
AZASITE SOLN (<i>azithromycin (ophth)</i>)	3	Limit 5mls per month;QL(0.17 ml daily)
<i>bacitracin (ophthalmic) oint</i>	1	1 bal on hand,
<i>bacitracin-polymyxin b (ophth) oint</i>	1	
BESIVANCE SUSP (<i>besifloxacin hcl</i>)	3	
BETADINE OPHTHALMIC PREP SOLN (<i>povidone-iodine (ophth)</i>)	3	
BLEPH-10 SOLN (<i>sulfacetamide sodium (ophth)</i>)	GP	
CILOXAN OINT (<i>ciprofloxacin hcl (ophth)</i>)	2	
CILOXAN SOLN (<i>ciprofloxacin hcl (ophth)</i>)	GP	
<i>ciprofloxacin hcl (ophth) soln</i>	1	
<i>erythromycin (ophth) oint</i>	1	
<i>gatifloxacin (ophth) soln</i>	1	
<i>gentamicin sulfate (ophth) soln</i>	1	
KLARITY-A SOLN (<i>azithromycin (ophth)</i>)	3	Limit 5mls per month;QL(0.17 ml daily)
<i>levofloxacin (ophth) soln</i>	1	
MOXEZA SOLN (<i>moxifloxacin hcl (ophth)</i>)	GP	
<i>moxifloxacin hcl (ophth) soln</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
NATACYN SUSP (<i>natamycin</i>)	2	
<i>neomycin-bacitracin zn-polymyxin oint</i>	1	
<i>neomycin-polymyxin-gramicidin soln</i>	1	1 bal on hand,
NEOSPORIN SOLN (<i>neomycin-polymyxin-gramicidin</i>)	3	
OCUFLOX SOLN (<i>ofloxacin (ophth)</i>)	GP	
<i>ofloxacin (ophth) soln</i>	1	
<i>polymyxin b-trimethoprim soln</i>	1	
POLYTRIM SOLN (<i>polymyxin b-trimethoprim</i>)	GP	
POVIDONE IODINE SOLN (<i>povidone-iodine (ophth)</i>)	3	
<i>sulfacetamide sodium (ophth) oint</i>	1	1 bal on hand,
<i>sulfacetamide sodium (ophth) soln</i>	1	
<i>tobramycin (ophth) soln</i>	1	
TOBREX OINT (<i>tobramycin (ophth)</i>)	2	
TOBREX SOLN (<i>tobramycin (ophth)</i>)	GP	
<i>trifluridine soln</i>	1	1 bal on hand,
VIGAMOX SOLN (<i>moxifloxacin hcl (ophth)</i>)	NF	
VIROPTIC SOLN (<i>trifluridine</i>)	3	
ZIRGAN GEL (<i>ganciclovir ophthalmic</i>)	3	
ZYMAXID SOLN (<i>gatifloxacin (ophth)</i>)	GP	

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

Drug Name	Drug Tier	Requirements/ Limits
Ophthalmic Immunomodulators		
RESTASIS EMUL (<i>cyclosporine (ophth)</i>)	3	QL(2.14 ml daily)
RESTASIS MULTIDOSE EMUL (<i>cyclosporine (ophth)</i>)	3	QL(2.14 ml daily)
Ophthalmic Integrin Antagonists		
XIIDRA SOLN (<i>lifitegrast</i>)	3	PA
Ophthalmic Local Anesthetics		
(Tetracaine Hcl (Ophth)) ALTACAINE, TETRAVISC FORTE, TETRAVISC, TETCAINE SOLN	1	
AKTEN GEL (<i>lidocaine hcl (ophth)</i>)	3	
ALCAINE SOLN (<i>proparacaine hcl</i>)	GP	
<i>proparacaine hcl soln</i>	1	
<i>tetracaine hcl (ophth) soln</i>	1	
Ophthalmic Nerve Growth Factors		
OXERVATE SOLN (<i>cenegermin-bkbj</i>)	SP	PA
Ophthalmic Steroids		
(Bacitracin-Poly-Neomycin-Hc) NEO-POLYCIN HC OINT	1	QL(4 gm per fill retail)
ALREX SUSP (<i>loteprednol etabonate</i>)	3	
<i>bacitracin-poly-neomycin-hc oint</i>	1	QL(4 gm per fill retail)
BLEPHAMIDE S.O.P. OINT (<i>sulfacetamide sod-prednisolone</i>)	2	
BLEPHAMIDE SUSP (<i>sulfacetamide sod-prednisolone</i>)	2	
<i>dexamethasone sodium phosphate (ophth) soln</i>	1	1 bal on hand,

Drug Name	Drug Tier	Requirements/ Limits
DUREZOL EMUL (<i>difluprednate</i>)	3	
FLAREX SUSP (<i>fluorometholone acetate</i>)	2	
<i>fluorometholone (ophth) susp</i>	1	
FML FORTE SUSP (<i>fluorometholone (ophth)</i>)	2	
FML LIQUIFILM SUSP (<i>fluorometholone (ophth)</i>)	GP	
FML OINT (<i>fluorometholone (ophth)</i>)	2	
LOTEMAX GEL (<i>loteprednol etabonate</i>)	3	
LOTEMAX OINT (<i>loteprednol etabonate</i>)	3	
LOTEMAX SUSP (<i>loteprednol etabonate</i>)	GP	
<i>loteprednol etabonate susp</i>	1	
MAXIDEX SUSP (<i>dexamethasone (ophth)</i>)	2	
MAXITROL OINT (<i>neomycin-polymy-dexameth</i>)	GP	
MAXITROL SUSP (<i>neomycin-polymy-dexameth</i>)	GP	
<i>neomycin-polymy-dexameth oint</i>	1	
<i>neomycin-polymy-dexameth susp</i>	1	
<i>neomycin-polymyxin-hc (ophth) susp</i>	1	1 bal on hand,
OMNIPRED SUSP (<i>prednisolone acetate (ophth)</i>)	GP	

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

Drug Name	Drug Tier	Requirements/ Limits
PRED FORTE SUSP (<i>prednisolone acetate (ophth)</i>)	2	
PRED FORTE SUSP (<i>prednisolone acetate (ophth)</i>)	NF	1 bal on hand,
PRED MILD SUSP (<i>prednisolone acetate (ophth)</i>)	2	
PRED-G S.O.P. OINT (<i>gentamicin-prednisolone acetate</i>)	3	
PRED-G SUSP (<i>gentamicin-prednisolone acetate</i>)	3	
<i>prednisolone acetate (ophth) susp</i>	1	1 bal on hand,
PREDNISOLONE ACETATE P-F SUSP (<i>prednisolone acetate (ophth)</i>)	2	
PREDNISOLONE SODIUM PHOSPHATE SOLN OP 1 % (<i>prednisolone sodium phosphate (ophth)</i>)	2	
<i>sulfacetamide sod-prednisolone soln</i>	1	1 bal on hand,
<i>sulfacetamide sod-prednisolone soln</i>	1	
TOBRADEX OINT (<i>tobramycin-dexamethasone</i>)	3	
TOBRADEX ST SUSP (<i>tobramycin-dexamethasone</i>)	3	
TOBRADEX SUSP (<i>tobramycin-dexamethasone</i>)	GP	QL(5 ml per fill retail)
<i>tobramycin-dexamethasone susp</i>	1	QL(5 ml per fill retail)
ZYLET SUSP (<i>loteprednol etabonate-tobramycin</i>)	3	Limit 5mls per fill;QL(5 ml per fill retail)

Drug Name	Drug Tier	Requirements/ Limits
Ophthalmic Surgical Aids		
GELFILM OP FILM (<i>gelatin adsorbable (ophth)</i>)	3	
Ophthalmics - Misc.		
ACULAR LS SOLN (<i>ketorolac tromethamine (ophth)</i>)	GP	
ACULAR SOLN (<i>ketorolac tromethamine (ophth)</i>)	GP	
ACUVAIL SOLN (<i>ketorolac tromethamine (ophth)</i>)	3	
ALOCRIOL SOLN (<i>nedocromil sodium (ophth)</i>)	3	
ALOMIDE SOLN (<i>loxamide tromethamine</i>)	2	
<i>azelastine hcl (ophth) soln</i>	1	
AZOPT SUSP (<i>brinzolamide</i>)	2	Limit 10mls per month;QL(0.4 ml daily)
BEPREVE SOLN (<i>bepotastine besilate</i>)	3	ST; Limit 10mls per month;QL(0.34 ml daily)
<i>bromfenac sodium (ophth) soln</i>	1	
BROMSITE SOLN (<i>bromfenac sodium (ophth)</i>)	3	
<i>cromolyn sodium (ophth) soln</i>	1	
CYSTARAN SOLN (<i>cysteamine hcl</i>)	SP	
<i>diclofenac sodium (ophth) soln</i>	1	
<i>dorzolamide hcl soln</i>	1	Limit 10mls per month;QL(0.34 ml daily)

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

Drug Name	Drug Tier	Requirements/ Limits
DORZOLAMIDE HCL SOLN (<i>dorzolamide hcl</i>)	2	Limit 10mls per month;QL(0.34 ml daily)
ELESTAT SOLN (<i>epinastine hcl (ophth)</i>)	GP	
EMADINE SOLN (<i>emedastine difumarate</i>)	3	
<i>epinastine hcl (ophth) soln</i>	1	
<i>flurbiprofen sodium soln</i>	1	
<i>flurbiprofen sodium soln</i>	1	1 bal on hand,
ILEVRO SUSP (<i>nepafenac</i>)	3	
<i>ketorolac tromethamine (ophth) soln</i>	1	
LASTACAPT SOLN (<i>alcaftadine</i>)	3	ST
NEVANAC SUSP (<i>nepafenac</i>)	3	
<i>olopatadine hcl soln 0.1 %</i>	1	Limit 10mls per month;QL(0.34 ml daily); RX/OTC
<i>olopatadine hcl soln 0.2 %</i>	1	QL(0.09 ml daily); RX/OTC
PAREMYD SOLN (<i>hydroxyamphetamine-tropicamide</i>)	3	
PATADAY SOLN 0.1 % (<i>olopatadine hcl</i>)	NF	Limit 10mls per month;QL(0.34 ml daily); RX/OTC
PATADAY SOLN 0.2 % (<i>olopatadine hcl</i>)	GP	QL(0.09 ml daily); RX/OTC
PATANOL SOLN (<i>olopatadine hcl</i>)	NF	Limit 10mls per month;QL(0.34 ml daily); RX/OTC
PROLENSA SOLN (<i>bromfenac sodium (ophth)</i>)	3	

Drug Name	Drug Tier	Requirements/ Limits
TRUSOPT SOLN (<i>dorzolamide hcl</i>)	GP	Limit 10mls per month;QL(0.34 ml daily)
Prostaglandins - Ophthalmic		
<i>bimatoprost soln</i>	1	Limit 2.5mls per month;QL(0.09 ml daily)
<i>latanoprost soln</i>	1	1 bal on hand,
<i>latanoprost soln</i>	1	
LUMIGAN SOLN (<i>bimatoprost</i>)	2	
RESCULA SOLN (<i>unoprostone isopropyl</i>)	3	
TRAVATAN Z SOLN (<i>travoprost</i>)	GP	Limit 2.5mls per month;QL(0.09 ml daily)
<i>travoprost soln</i>	1	Limit 2.5mls per month;QL(0.09 ml daily)
XALATAN SOLN (<i>latanoprost</i>)	3	
ZIOPTAN SOLN (<i>tafluprost</i>)	3	
OTIC AGENTS - Drugs to Treat the Ear		
Otic Agents - Miscellaneous		
<i>acetic acid (otic) soln</i>	1	
Otic Anti-infectives		
CETRAXAL SOLN (<i>ciprofloxacin hcl (otic)</i>)	3	1 bal on hand,
<i>ciprofloxacin hcl (otic) soln</i>	1	1 bal on hand,
FLOXIN OTIC SOLN (<i>ofloxacin (otic)</i>)	GP	
<i>ofloxacin (otic) soln</i>	1	
Otic Combinations		

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

Drug Name	Drug Tier	Requirements/ Limits
(Pramoxine-Hc-Chloroxylenol) CORTIC-ND, EXOTIC-HC SOLN	1	
CIPRO HC SUSP (<i>ciprofloxacin-hydrocortisone</i>)	3	
CIPRODEX SUSP (<i>ciprofloxacin-dexamethasone</i>)	2	
<i>ciprofloxacin-fluocinolone acetonide soln</i>	1	Limit 1 bottle per month; QL(0.5 ea daily) 1 bal on hand,
COLY-MYCIN S SUSP (<i>neomycin-colistin-hc-thonzonium</i>)	3	
CORTANE-B AQUEOUS SOLN (<i>pramoxine-hc-chloroxylenol aqueous</i>)	3	
CORTANE-B-OTIC SOLN (<i>pramoxine-hc-chloroxylenol</i>)	GP	
CORTISPORIN-TC SUSP (<i>neomycin-colistin-hc-thonzonium</i>)	3	
<i>neomycin-polymyxin-hc (otic) soln</i>	1	
<i>neomycin-polymyxin-hc (otic) susp</i>	1	
OTICIN HC NR SOLN (<i>pramoxine-hc-chloroxylenol</i>)	GP	
OTOVEL SOLN (<i>ciprofloxacin-fluocinolone acetonide</i>)	3	Limit 1 bottle per month; QL(0.5 ea daily) 1 bal on hand,
PRAMOTIC LIQD (<i>pramoxine-chloroxylenol</i>)	3	
Otic Steroids		
(Fluocinolone Acetonide (Otic)) FLAC OIL	1	

Drug Name	Drug Tier	Requirements/ Limits
DERMOTIC OIL (<i>fluocinolone acetonide (otic)</i>)	GP	
<i>fluocinolone acetonide (otic) oil</i>	1	
<i>hydrocortisone w/acetic acid soln</i>	1	QL(10 ml per fill retail, 30 ml per fill mail)
OXYTOCICS - Drugs to Prevent/Control Uterine Bleeding		
Oxytocics		
(Methylergonovine Maleate) METHERGINE TABS	1	
<i>methylergonovine maleate tabs</i>	1	
PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System		
Immune Serums		
BIVIGAM SOLN (<i>immune globulin (human) iv</i>)	SP	PA
CUVITRU SOLN (<i>immune globulin (human) subcutaneous</i>)	SP	PA
FLEBOGAMMA DIF SOLN (<i>immune globulin (human) iv</i>)	SP	PA
GAMASTAN INJ (<i>immune globulin (human) im</i>)	SP	PA
GAMASTAN S/D INJ (<i>immune globulin (human) im</i>)	SP	PA
GAMMAGARD LIQUID SOLN (<i>immune globulin (human) iv or subcutaneous</i>)	SP	PA
GAMMAKED SOLN (<i>immune globulin (human) iv or subcutaneous</i>)	SP	PA

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

Drug Name	Drug Tier	Requirements/ Limits
GAMMAPLEX SOLN (<i>immune globulin (human)</i> iv)	SP	PA
GAMUNEX-C SOLN (<i>immune globulin (human)</i> iv or subcutaneous)	SP	PA
HIZENTRA SOLN (<i>immune globulin (human)</i> subcutaneous)	SP	PA
OCTAGAM SOLN 1 GM/20ML, 2 GM/20ML, 5 GM/50ML, 10 GM/200ML, 20 GM/200ML (<i>immune globulin (human)</i> iv)	SP	PA
PRIVIGEN SOLN (<i>immune globulin (human)</i> iv)	SP	PA
Passive Immunizing Agents - Combinations		
HYQVIA KIT (<i>immune globulin (human)</i> -hyaluronidase (human recombinant))	SP	PA
PENICILLINS - Drugs to Treat Bacterial Infections		
Aminopenicillins		
<i>amoxicillin caps 250 mg, 500 mg</i>	1	
<i>amoxicillin chew 125 mg, 250 mg</i>	1	1 bal on hand,
<i>amoxicillin susr 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml</i>	1	
<i>amoxicillin tabs 500 mg, 875 mg</i>	1	
<i>ampicillin caps</i>	1	1 bal on hand,
<i>ampicillin sodium solr ij 1 gm</i>	SP	PA
<i>ampicillin sodium solr ij 125 mg</i>	SP	PA; 1 bal on hand,

Drug Name	Drug Tier	Requirements/ Limits
<i>ampicillin sodium solr iv 10 gm</i>	SP	PA
MOXATAG TB24 (<i>amoxicillin</i>)	3	PA; QL(1 ea daily, 10 ea per fill retail)
Natural Penicillins		
(Penicillin G Potassium) PFIZERPEN SOLR	SP	PA; 1 bal on hand,
BICILLIN L-A SUSP (<i>penicillin g benzathine</i>)	SP	PA
PENICILLIN G POTASSIUM IN ISO-OSMOTIC DEXTROSE SOLN (<i>penicillin g pot in dextrose</i>)	SP	PA
<i>penicillin g potassium solr</i>	SP	PA
PENICILLIN G PROCAINE SUSP (<i>penicillin g procaine</i>)	SP	PA
<i>penicillin g sodium solr</i>	SP	PA; 1 bal on hand,
<i>penicillin v potassium solr 125 mg/5ml, 250 mg/5ml</i>	1	1 bal on hand,
<i>penicillin v potassium tabs 250 mg, 500 mg</i>	1	
Penicillin Combinations		
<i>amoxicillin & pot clavulanate chew 400 mg-57 mg, 200 mg-28.5 mg</i>	1	1 bal on hand,
<i>amoxicillin & pot clavulanate susr 400 mg/5ml-57 mg/5ml, 200 mg/5ml-28.5 mg/5ml, 250 mg/5ml-62.5 mg/5ml, 600 mg/5ml-42.9 mg/5ml</i>	1	

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

Drug Name	Drug Tier	Requirements/ Limits
amoxicillin & pot clavulanate tabs 250 mg-125 mg, 500 mg-125 mg, 875 mg-125 mg	1	
amoxicillin & pot clavulanate tb12 1000 mg-62.5 mg	1	1 bal on hand,
amoxicillin & pot clavulanate tb12 1000 mg-62.5 mg	1	
ampicillin & sulbactam sodium solr ij 1 gm-2 gm	SP	PA
ampicillin & sulbactam sodium solr iv 0.5 gm-1 gm	SP	PA; 1 bal on hand,
ampicillin & sulbactam sodium solr iv 5 gm-10 gm	SP	PA
AUGMENTIN ES-600 SUSR (amoxicillin & pot clavulanate)	GP	
AUGMENTIN SUSR 125 MG/5ML-31.25 MG/5ML (amoxicillin & pot clavulanate)	2	
AUGMENTIN SUSR 250 MG/5ML-62.5 MG/5ML (amoxicillin & pot clavulanate)	GP	
AUGMENTIN TABS 500 MG-125 MG, 875 MG-125 MG (amoxicillin & pot clavulanate)	GP	
AUGMENTIN XR TB12 (amoxicillin & pot clavulanate)	3	
BICILLIN C-R SUSP (penicillin g benzathine & procaine)	SP	PA

Drug Name	Drug Tier	Requirements/ Limits
piperacillin sodium-tazobactam sodium solr	SP	PA
UNASYN BULK PACK SOLR (ampicillin & sulbactam sodium)	SP	PA
UNASYN SOLR (ampicillin & sulbactam sodium)	SP	PA
ZOSYN SOLN 0.375 GM/50ML-3 GM/50ML-5 %, 0.25 GM/50ML-2 GM/50ML-5 % (piperacillin sodium-tazobactam sodium in dextrose)	SP	PA
ZOSYN SOLR 0.375 GM-3 GM, 0.25 GM-2 GM, 0.5 GM-4 GM (piperacillin sodium-tazobactam sodium)	SP	PA
Penicillinase-Resistant Penicillins		
dicloxacillin sodium caps	1	
nafcillin sodium solr ij 1 gm	SP	PA
NAFCILLIN SODIUM SOLR IJ 10 GM (nafcillin sodium)	SP	PA
nafcillin sodium solr iv 2 gm	SP	PA; 1 bal on hand,
NAFCILLIN SOLN (nafcillin sodium in dextrose)	SP	PA
OXACILLIN SODIUM SOLN IV 1.5 GM/50ML-1 GM/50ML, 300 MG/50ML-2 GM/50ML (oxacillin sodium in dextrose)	SP	PA
oxacillin sodium solr ij 1 gm	SP	PA
oxacillin sodium solr iv 10 gm	SP	PA

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

Drug Name	Drug Tier	Requirements/ Limits
PROGESTINS - Hormone Replacement/Modifying Drugs		
Progestins		
AYGESTIN TABS (<i>norethindrone acetate</i>)	GP	
<i>hydroxyprogesterone caproate oil</i>	SP	PA
MAKENA OIL IM 250 MG/ML (<i>hydroxyprogesterone caproate</i>)	SP	PA
MAKENA SOAJ SC 275 MG/1.1ML (<i>hydroxyprogesterone caproate</i>)	SP	PA
<i>medroxyprogesterone acetate tabs</i>	1	
MEGACE ES SUSP (<i>megestrol acetate (appetite)</i>)	GP	
<i>megestrol acetate (appetite) susp</i>	1	
<i>norethindrone acetate tabs</i>	1	
<i>progesterone micronized caps</i>	1	QL(2 ea daily)
<i>progesterone oil</i>	1	
PROMETRIUM CAPS (<i>progesterone micronized</i>)	GP	QL(2 ea daily)
PROVERA TABS (<i>medroxyprogesterone acetate</i>)	GP	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions		
Agents for Chemical Dependency		
<i>acamprosate calcium tbec</i>	1	
ANTABUSE TABS (<i>disulfiram</i>)	GP	

Drug Name	Drug Tier	Requirements/ Limits
<i>disulfiram tabs</i>	1	
Anti-Cataleptic Agents		
XYREM SOLN (<i>sodium oxybate</i>)	SP	PA
Antidementia Agents		
ARICEPT TABS (<i>donepezil hydrochloride</i>)	GP	QL(1 ea daily)
<i>donepezil hydrochloride tabs</i>	1	QL(1 ea daily)
<i>donepezil hydrochloride tbdp</i>	1	QL(1 ea daily)
EXELON PT24 (<i>rivastigmine</i>)	GP	
<i>galantamine hydrobromide cp24 8 mg, 16 mg, 24 mg</i>	1	QL(1 ea daily)
<i>galantamine hydrobromide soln 4 mg/ml</i>	1	1 bal on hand,
<i>galantamine hydrobromide tabs 4 mg, 8 mg, 12 mg</i>	1	
<i>memantine hcl cp24 7 mg, 14 mg, 21 mg, 28 mg</i>	1	PA
<i>memantine hcl soln 2 mg/ml, 10 mg/5ml</i>	1	
<i>memantine hcl tabs 5 mg, 10 mg,</i>	1	
NAMENDA TABS (<i>memantine hcl</i>)	GP	
NAMENDA TITRATION PAK TABS (<i>memantine hcl</i>)	GP	
NAMENDA XR CP24 (<i>memantine hcl</i>)	GP	PA
NAMENDA XR TITRATION PACK CP24 (<i>memantine hcl</i>)	3	PA

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

Drug Name	Drug Tier	Requirements/ Limits
RAZADYNE ER CP24 (<i>galantamine hydrobromide</i>)	GP	QL(1 ea daily)
RAZADYNE TABS (<i>galantamine hydrobromide</i>)	GP	
<i>rivastigmine pt24</i>	1	
<i>rivastigmine tartrate caps</i>	1	
Combination Psychotherapeutics		
<i>chlordiazepoxide-amitriptyline tabs</i>	1	1 bal on hand,
<i>olanzapine-fluoxetine hcl caps</i>	1	
<i>perphenazine-amitriptyline tabs</i>	1	1 bal on hand,
SYMBYAX CAPS (<i>olanzapine-fluoxetine hcl</i>)	GP	
Fibromyalgia Agents		
SAVELLA TABS (<i>milnacipran hcl</i>)	3	PA; QL(2 ea daily)
SAVELLA TITRATION PACK MISC (<i>milnacipran hcl</i>)	3	PA; QL(2 ea daily)
Movement Disorder Drug Therapy		
AUSTEDO TABS (<i>deutetrabenazine</i>)	3	PA
INGREZZA CAPS (<i>valbenazine tosylate</i>)	3	PA
INGREZZA CPPK (<i>valbenazine tosylate</i>)	3	PA
<i>tetrabenazine tabs</i>	SP	
XENAZINE TABS (<i>tetrabenazine</i>)	SP	
Multiple Sclerosis Agents		
(Glatiramer Acetate) GLATOPA SOSY 20 MG/ML	1	PA

Drug Name	Drug Tier	Requirements/ Limits
(Glatiramer Acetate) GLATOPA SOSY 40 MG/ML	SP	PA
AMPYRA TB12 (<i>dalfampridine</i>)	GP	PA
AUBAGIO TABS (<i>teriflunomide</i>)	3	PA
AVONEX KIT (<i>interferon beta-1a</i>)	SP	PA
AVONEX PEN AJKT (<i>interferon beta-1a</i>)	SP	PA
AVONEX PSKT (<i>interferon beta-1a</i>)	SP	PA
BETASERON KIT (<i>interferon beta-1b</i>)	SP	PA
COPAXONE SOSY (<i>glatiramer acetate</i>)	SP	PA
<i>dalfampridine tb12</i>	1	PA
EXTAVIA KIT (<i>interferon beta-1b</i>)	SP	PA
GILENYA CAPS (<i> fingolimod hcl</i>)	3	PA
<i>glatiramer acetate sosy</i>	SP	PA
MAVENCLAD TBPK (<i>cladribine (multiple sclerosis)</i>)	SP	PA
MAYZENT STARTER PACK TBPK (<i>siponimod fumarate</i>)	3	PA
MAYZENT TABS (<i>siponimod fumarate</i>)	3	PA
PLEGRIDY SOPN (<i>peginterferon beta-1a</i>)	SP	PA
PLEGRIDY SOSY (<i>peginterferon beta-1a</i>)	SP	PA
PLEGRIDY STARTER PACK SOPN (<i>peginterferon beta-1a</i>)	SP	PA
PLEGRIDY STARTER PACK SOSY (<i>peginterferon beta-1a</i>)	SP	PA

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

Drug Name	Drug Tier	Requirements/ Limits
REBIF REBIDOSE SOAJ (<i>interferon beta-1a</i>)	SP	PA
REBIF REBIDOSE TITRATIONPACK SOAJ (<i>interferon beta-1a</i>)	SP	PA
REBIF SOSY (<i>interferon beta-1a</i>)	SP	PA
REBIF TITRATION PACK SOSY (<i>interferon beta-1a</i>)	SP	PA
TECFIDERA CPDR (<i>dimethyl fumarate</i>)	3	PA
TECFIDERA STARTER PACK MISC (<i>dimethyl fumarate</i>)	3	PA
TYSABRI CONC (<i>natalizumab</i>)	SP	PA
Postherpetic Neuralgia (PHN)/Neuropathic Pain		
GRALISE STARTER MISC (<i>gabapentin (once-daily)</i>)	3	PA
GRALISE TABS (<i>gabapentin (once-daily)</i>)	3	PA
Premenstrual Dysphoric Disorder (PMDD) Agents		
<i>fluoxetine hcl (pmdd) caps 10 mg, 20 mg</i>	1	1 bal on hand,
<i>fluoxetine hcl (pmdd) tabs 10 mg, 20 mg</i>	1	
SARAFEM TABS (<i>fluoxetine hcl (pmdd)</i>)	GP	
Pseudobulbar Affect (PBA) Agents		
NUEDEXTA CAPS (<i>dextromethorphan hbr-quinidine sulfate</i>)	3	PA
Psychotherapeutic and Neurological Agents -		
<i>ergoloid mesylates tabs</i>	1	1 bal on hand,
ORAP TABS (<i>pimozide</i>)	3	
<i>pimozide tabs</i>	1	1 bal on hand,

Drug Name	Drug Tier	Requirements/ Limits
Restless Leg Syndrome (RLS) Agents		
HORIZANT TBCR (<i>gabapentin enacarbil</i>)	3	QL(1 ea daily)
Smoking Deterrents		
(Nicotine Polacrilex) EQ NICOTINE LOZENGES, CVS NICOTINE LOZENGE, RA MINI NICOTINE, NICOTINE MINI LOZENGE, KLS QUIT4, KLS QUIT2, GOODSENSE NICOTINE POLACRILEX, GOODSENSE NICOTINE, GNP NICOTINE POLACRILEX MINI, GNP NICOTINE MINI LOZENGE LOZG	PV	PV
(Nicotine Polacrilex) EQ NICOTINE POLACRILEX, CVS NICOTINE POLACRILEX, CVS NICOTINE, TGT NICOTINE POLACRILEX, TGT NICOTINE GUM, SM NICOTINE POLACRILEX, RA NICOTINE POLACRILEX, RA NICOTINE GUM, RA NICOTINE, PX STOP SMOKING AID, NICORELIEF, HM NICOTINE POLACRILEX, GOODSENSE NICOTINE POLACRILEX GUM, GNP NICOTINE POLACRILEX, EQL NICOTINE POLACRILEX GUM 2 MG	PV	PV

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

Drug Name	Drug Tier	Requirements/ Limits
(Nicotine Polacrilex) EQ NICOTINE POLACRILEX, CVS NICOTINE POLACRILEX, CVS NICOTINE, TGT NICOTINE POLACRILEX, TGT NICOTINE GUM, SM NICOTINE POLACRILEX, RA NICOTINE POLACRILEX, RA NICOTINE GUM, RA NICOTINE, PX STOP SMOKING AID, NICORELIEF, HM NICOTINE POLACRILEX, GOODSENSE NICOTINE POLACRILEX GUM, GNP NICOTINE POLACRILEX, EQL NICOTINE POLACRILEX GUM MT 2 MG	PV	PV
(Nicotine Polacrilex) EQ NICOTINE POLACRILEX, CVS NICOTINE POLACRILEX, CVS NICOTINE, TGT NICOTINE POLACRILEX, TGT NICOTINE GUM, SM NICOTINE POLACRILEX, SM NICOTINE, RA NICOTINE POLACRILEX, RA NICOTINE GUM, RA NICOTINE, PX STOP SMOKING AID, NICORELIEF, HM NICOTINE POLACRILEX, GOODSENSE NICOTINE POLACRILEX GUM, GNP NICOTINE POLACRILEX, EQL NICOTINE POLACRILEX GUM 4 MG	1	PV

Drug Name	Drug Tier	Requirements/ Limits
(Nicotine Polacrilex) EQ NICOTINE POLACRILEX, CVS NICOTINE POLACRILEX, CVS NICOTINE, TGT NICOTINE POLACRILEX, TGT NICOTINE GUM, SM NICOTINE POLACRILEX, SM NICOTINE, RA NICOTINE POLACRILEX, RA NICOTINE GUM, RA NICOTINE, PX STOP SMOKING AID, NICORELIEF, HM NICOTINE POLACRILEX, GOODSENSE NICOTINE POLACRILEX GUM, GNP NICOTINE POLACRILEX, EQL NICOTINE POLACRILEX GUM MT 4 MG	1	PV
(Nicotine Polacrilex) EQ NICOTINE POLACRILEX, CVS NICOTINE POLACRILEX, TGT NICOTINE POLACRILEX, RA NICOTINE POLACRILEX, PX STOP SMOKING AID, HM NICOTINE POLACRILEX, GNP NICOTINE POLACRILEX, EQL NICOTINE POLACRILEX LOZG 2 MG, 4 MG	PV	PV
(Nicotine Polacrilex) EQL NICOTINE POLACRILEX REFILL, EQ NICOTINE GUM STARTER, EQ NICOTINE GUM REFILL, CVS NICOTINE POLACRILEX STARTER, THRIVE, SR NICOTINE GUM, KLS QUIT4, KLS QUIT2, GOODSENSE NICOTINE GUM, GNP NICOTINE GUM, EQL NICOTINE POLACRILEX STARTER GUM	PV	PV

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

Drug Name	Drug Tier	Requirements/ Limits
(Nicotine Polacrilex) EQL NICOTINE POLACRILEX REFILL, EQ NICOTINE GUM STARTER, EQ NICOTINE GUM REFILL, CVS NICOTINE POLACRILEX STARTER, THRIVE, SR NICOTINE GUM, KLS QUIT4, KLS QUIT2, GOODSENSE NICOTINE GUM, GNP NICOTINE GUM, EQL NICOTINE POLACRILEX STARTER GUM	1	PV
(Nicotine Polacrilex) SM NICOTINE LOZG 2 MG	PV	PV
(Nicotine Polacrilex) SM NICOTINE POLACRILEX, EQ NICOTINE LOZG 4 MG	PV	PV
(Nicotine Polacrilex) SM NICOTINE POLACRILEX, EQ NICOTINE LOZG MT 4 MG	PV	PV

Drug Name	Drug Tier	Requirements/ Limits
(Nicotine) CVS NICOTINE TRANSDERMALSYSTEM, TGT NICOTINE STEP TWO, TGT NICOTINE STEP THREE, TGT NICOTINE STEP ONE, SM NICOTINE TRANSDERMAL SYSTEM/STEP 3/CLEAR, SM NICOTINE TRANSDERMAL SYSTEM/STEP 2/CLEAR, SM NICOTINE TRANSDERMAL SYSTEM/STEP 1/CLEAR, RA NICOTINE TRANSDERMAL SYSTEM STEP 3, RA NICOTINE TRANSDERMAL SYSTEM, NICOTINE TRANSDERMAL SYSTEM STEP 3, NICOTINE TRANSDERMAL SYSTEM STEP 2, NICOTINE TRANSDERMAL SYSTEM STEP 1, NICOTINE STEP 3, NICOTINE STEP 2, NICOTINE STEP 1, HM NICOTINE TRANSDERMALSYSTEM, HM NICOTINE TRANSDERMAL SYSTEM STEP 3, HM NICOTINE TRANSDERMAL SYSTEM STEP 2, HM NICOTINE TRANSDERMAL SYSTEM STEP 1, HM NICOTINE TRANSDERMAL SYSTEM, GNP NICOTINE TRANSDERMALSYSTEM STEP 2, GNP NICOTINE TRANSDERMALSYSTEM, EQ NICOTINE STEP 3, CVS NICOTINE TRANSDERMALSYSTEM/STEP 3, CVS NICOTINE TRANSDERMALSYSTEM STEP 2, CVS NICOTINE TRANSDERMALSYSTEM STEP 1 PT24	1	PV

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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
(Nicotine) CVS NICOTINE TRANSDERMAL SYSTEM, TGT NICOTINE STEP TWO, TGT NICOTINE STEP THREE, TGT NICOTINE STEP ONE, SM NICOTINE TRANSDERMAL SYSTEM/STEP 3/CLEAR, SM NICOTINE TRANSDERMAL SYSTEM/STEP 2/CLEAR, SM NICOTINE TRANSDERMAL SYSTEM/STEP 1/CLEAR, RA NICOTINE TRANSDERMAL SYSTEM STEP 3, RA NICOTINE TRANSDERMAL SYSTEM, NICOTINE TRANSDERMAL SYSTEM STEP 3, NICOTINE TRANSDERMAL SYSTEM STEP 2, NICOTINE TRANSDERMAL SYSTEM STEP 1, NICOTINE STEP 3, NICOTINE STEP 2, NICOTINE STEP 1, HM NICOTINE TRANSDERMAL SYSTEM, HM NICOTINE TRANSDERMAL SYSTEM STEP 3, HM NICOTINE TRANSDERMAL SYSTEM STEP 2, HM NICOTINE TRANSDERMAL SYSTEM STEP 1, HM NICOTINE TRANSDERMAL SYSTEM, GNP NICOTINE TRANSDERMAL SYSTEM STEP 2, GNP NICOTINE TRANSDERMAL SYSTEM, EQ NICOTINE STEP 3, CVS NICOTINE TRANSDERMAL SYSTEM/STEP 3, CVS NICOTINE TRANSDERMAL SYSTEM STEP 2, CVS NICOTINE TRANSDERMAL SYSTEM STEP 1 PT24	PV	PV	(Nicotine) EQ NICOTINE, SM NICOTINE TRANSDERMAL SYSTEM, RA NICOTINE PT24 14 MG/24HR	1	PV
			(Nicotine) EQ NICOTINE, SM NICOTINE TRANSDERMAL SYSTEM, RA NICOTINE PT24 7 MG/24HR, 21 MG/24HR	PV	PV
			(Nicotine) EQ NICOTINE, SM NICOTINE TRANSDERMAL SYSTEM, RA NICOTINE PT24 TD 14 MG/24HR	1	PV
			(Nicotine) EQ NICOTINE, SM NICOTINE TRANSDERMAL SYSTEM, RA NICOTINE PT24 TD 7 MG/24HR, 21 MG/24HR	PV	PV
			bupropion hcl (smoking deterrent) tb12	PV	PV
			CHANTIX CONTINUING MONTHPAK TABS (varenicline tartrate)	PV	PV
			CHANTIX STARTING MONTH PAK TABS (varenicline tartrate)	PV	PV
			CHANTIX TABS (varenicline tartrate)	PV	PV
			NICODERM CQ PT24 14 MG/24HR (nicotine)	NF	PV
			NICODERM CQ PT24 7 MG/24HR, 21 MG/24HR (nicotine)	GP	PV
			NICORETTE GUM 2 MG (nicotine polacrilex)	GP	PV
			NICORETTE GUM 4 MG (nicotine polacrilex)	NF	PV
			NICORETTE LOZG 2 MG, 4 MG (nicotine polacrilex)	GP	PV
			NICORETTE MINI LOZG (nicotine polacrilex)	GP	PV

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

Drug Name	Drug Tier	Requirements/ Limits
NICORETTE STARTER KIT GUM 2 MG (<i>nicotine polacrilex</i>)	GP	PV
NICORETTE STARTER KIT GUM 4 MG (<i>nicotine polacrilex</i>)	NF	PV
<i>nicotine polacrilex gum 2 mg</i>	PV	PV
<i>nicotine polacrilex gum 4 mg</i>	1	PV
<i>nicotine polacrilex lozg 2 mg, 4 mg</i>	PV	PV
<i>nicotine pt24 14 mg/24hr</i>	1	PV
<i>nicotine pt24 7 mg/24hr, 21 mg/24hr</i>	PV	PV
NICOTINE TRANSDERMAL SYSTEM KIT (<i>nicotine</i>)	PV	PV
NICOTROL INHALER INHA (<i>nicotine</i>)	PV	PV
NICOTROL NS SOLN (<i>nicotine</i>)	PV	PV
ZYBAN TB12 (<i>bupropion hcl (smoking deterrent)</i>)	GP	PV
Transthyretin Amyloidosis Agents		
TEGSEDI SOSY (<i>inotersen sodium</i>)	SP	PA
Vasomotor Symptom Agents		
BRISDELLE CAPS (<i>paroxetine mesylate (vasomotor)</i>)	GP	
<i>paroxetine mesylate (vasomotor) caps</i>	1	
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions		
Alpha-Proteinase Inhibitor (Human)		
ARALAST NP SOLR (<i>alpha1-proteinase inhibitor (human)</i>)	SP	PA

Drug Name	Drug Tier	Requirements/ Limits
GLASSIA SOLN (<i>alpha1-proteinase inhibitor (human)</i>)	SP	PA
PROLASTIN-C SOLN (<i>alpha1-proteinase inhibitor (human)</i>)	SP	PA
PROLASTIN-C SOLR (<i>alpha1-proteinase inhibitor (human)</i>)	SP	PA
ZEMAIRA SOLR (<i>alpha1-proteinase inhibitor (human)</i>)	SP	PA
Cystic Fibrosis Agents		
KALYDECO PACK (<i>ivacaftor</i>)	SP	PA
KALYDECO TABS (<i>ivacaftor</i>)	SP	PA
ORKAMBI PACK (<i>lumacaftor-ivacaftor</i>)	SP	PA
ORKAMBI TABS (<i>lumacaftor-ivacaftor</i>)	SP	PA
PULMOZYME SOLN (<i>dornase alfa</i>)	2	PA; Limited to 75mls per month;QL(2.5 ml daily)
SYMDEKO TBPk (<i>tezacaftor-ivacaftor</i>)	SP	PA
TRIKAFTA TBPk (<i>elexacaftor-tezacaftor-ivacaftor</i>)	SP	PA; QL(3 ea daily)
Pulmonary Fibrosis Agents		
ESBRIET CAPS (<i>pirfenidone</i>)	SP	PA
ESBRIET TABS (<i>pirfenidone</i>)	SP	PA
OFEV CAPS (<i>nintedanib esylate</i>)	SP	PA
SULFONAMIDES - Drugs to Treat Bacterial Infections		
Sulfonamides		
SULFADIAZINE TABS (<i>sulfadiazine</i>)	3	

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

Drug Name	Drug Tier	Requirements/ Limits
TETRACYCLINES - Drugs to Treat Bacterial Infections		
Glycylcyclines		
<i>tigecycline solr</i>	SP	PA
TIGECYCLINE SOLR (<i>tigecycline</i>)	SP	PA
TYGACIL SOLR (<i>tigecycline</i>)	SP	PA
Tetracyclines		
(Doxycycline (Monohydrate)) AVIDOXY TABS	1	
(Doxycycline (Monohydrate)) MONDOXYNE NL, OKEBO CAPS	1	
(Doxycycline Hyclate) MORGIDOX 1X100MG, MORGIDOX 2X100MG, MORGIDOX 1X50MG CAPS	1	
(Minocycline Hcl) COREMINO TB24	1	ST
<i>demeclocycline hcl tabs</i>	1	
<i>doxycycline (monohydrate) caps 50 mg, 75 mg, 100 mg, 150 mg</i>	1	
<i>doxycycline (monohydrate) susr 25 mg/5ml</i>	1	
<i>doxycycline (monohydrate) tabs 50 mg, 100 mg, 150 mg</i>	1	
<i>doxycycline (monohydrate) tabs 75 mg, 100 mg, 150 mg</i>	1	ST
<i>doxycycline hyclate caps 50 mg, 100 mg</i>	1	
<i>doxycycline hyclate tabs 20 mg, 100 mg</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
<i>doxycycline hyclate tbec 75 mg, 100 mg, 150 mg</i>	1	ST
MINOCIN CAPS (<i>minocycline hcl</i>)	GP	
<i>minocycline hcl caps 50 mg, 75 mg, 100 mg</i>	1	
<i>minocycline hcl tabs 50 mg, 100 mg</i>	1	
<i>minocycline hcl tabs 75 mg, 100 mg</i>	1	PA
<i>minocycline hcl tb24 45 mg, 55 mg, 65 mg, 80 mg, 90 mg, 105 mg, 115 mg, 135 mg</i>	1	ST
SOLODYN TB24 (<i>minocycline hcl</i>)	GP	ST
TARGADOX TABS (<i>doxycycline hyclate</i>)	NF	1 bal on hand,
<i>tetracycline hcl caps 250 mg, 500 mg</i>	1	
VIBRAMYCIN CAPS 100 MG (<i>doxycycline hyclate</i>)	GP	
VIBRAMYCIN SUSR 25 MG/5ML (<i>doxycycline (monohydrate)</i>)	GP	
VIBRAMYCIN SYRP 50 MG/5ML (<i>doxycycline calcium</i>)	2	
THYROID AGENTS - Drugs to Regulate Thyroid Hormones		
Antithyroid Agents		
<i>methimazole tabs</i>	1	
<i>propylthiouracil tabs</i>	1	
TAPAZOLE TABS (<i>methimazole</i>)	GP	
Thyroid Hormones		

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

Drug Name	Drug Tier	Requirements/ Limits
(Levothyroxine Sodium) EUTHYROX, UNITHROID, LEVOXYL, LEVO-T TABS	1	
(Thyroid) NP THYROID 120, NP THYROID 90, NP THYROID 60, NP THYROID 30, NP THYROID 15 TABS	1	
ARMOUR THYROID TABS 15 MG, 120 MG (<i>thyroid</i>)	GP	
ARMOUR THYROID TABS 30 MG, 60 MG, 90 MG, 180 MG, 240 MG, 300 MG (<i>thyroid</i>)	2	
CYTOMEL TABS (<i>liothyronine sodium</i>)	3	
<i>levothyroxine sodium tabs or 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg</i>	1	
<i>liothyronine sodium tabs</i>	1	
NATURE-THROID NT-2.5 TABS (<i>thyroid</i>)	2	
NATURE-THROID TABS (<i>thyroid</i>)	2	
SYNTHROID TABS (<i>levothyroxine sodium</i>)	3	
<i>thyroid tabs</i>	1	
THYROLAR-1 TABS (<i>liotrix (t3-t4)</i>)	3	
THYROLAR-1/2 TABS (<i>liotrix (t3-t4)</i>)	3	
THYROLAR-1/4 TABS (<i>liotrix (t3-t4)</i>)	3	
THYROLAR-2 TABS (<i>liotrix (t3-t4)</i>)	3	
THYROLAR-3 TABS (<i>liotrix (t3-t4)</i>)	3	

Drug Name	Drug Tier	Requirements/ Limits
TIROSINT CAPS 13 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG, 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG (<i>levothyroxine sodium</i>)	3	
TIROSINT-SOL SOLN 13 MCG/ML, 25 MCG/ML, 50 MCG/ML, 75 MCG/ML, 88 MCG/ML, 100 MCG/ML, 112 MCG/ML, 125 MCG/ML, 137 MCG/ML, 150 MCG/ML, 200 MCG/ML (<i>levothyroxine sodium</i>)	3	
WESTHROID TABS (<i>thyroid</i>)	2	
WP THYROID TABS (<i>thyroid</i>)	2	
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions		
Antispasmodics		
(Hyoscyamine Sulfate) ED- SPAZ, OSCIMIN, NULEV TBDP	1	
(Hyoscyamine Sulfate) OSCIMIN SR, SYMAX-SR TB12	1	
(Hyoscyamine Sulfate) OSCIMIN TABS	1	
(Hyoscyamine Sulfate) OSCIMIN, SYMAX-SL SUBL	1	
ANASPAZ TBDP (<i>hyoscyamine sulfate</i>)	GP	
BELLADONNA/OPIUM SUPP (<i>belladonna alkaloids & opium</i>)	3	
BENTYL CAPS (<i>dicyclomine hcl</i>)	GP	
<i>chlordiazepoxide hcl- clidinium bromide caps</i>	1	
CUVPOSA SOLN (<i>glycopyrrolate</i>)	2	

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

Drug Name	Drug Tier	Requirements/ Limits
<i>dicyclomine hcl caps</i>	1	
<i>dicyclomine hcl soln</i>	1	
<i>dicyclomine hcl tabs</i>	1	
GLYCATE TABS (<i>glycopyrrolate</i>)	3	
<i>glycopyrrolate tabs or 1 mg, 2 mg</i>	1	
GLYCOPYRROLATE TABS OR 1.5 MG (<i>glycopyrrolate</i>)	3	
<i>hyoscyamine sulfate sub</i>	1	
<i>hyoscyamine sulfate tabs</i>	1	
<i>hyoscyamine sulfate tb12</i>	1	
<i>hyoscyamine sulfate tbdp</i>	1	
LEVBIID TB12 (<i>hyoscyamine sulfate</i>)	GP	
LEVSIN TABS (<i>hyoscyamine sulfate</i>)	GP	
LEVSIN/SL SUBL (<i>hyoscyamine sulfate</i>)	GP	
LIBRAX CAPS (<i>chlordiazepoxide hcl-clidinium bromide</i>)	GP	
<i>methscopolamine bromide tabs 5 mg, 2.5 mg, 2.5 mg</i>	1	
<i>methscopolamine bromide tabs 5 mg, 2.5 mg, 2.5 mg</i>	1	1 bal on hand,
<i>propantheline bromide tabs</i>	1	1 bal on hand,
ROBINUL FORTE TABS (<i>glycopyrrolate</i>)	GP	
ROBINUL TABS (<i>glycopyrrolate</i>)	GP	

Drug Name	Drug Tier	Requirements/ Limits
H-2 Antagonists		
(Cimetidine) CIMETIDINE 200, SM ACID REDUCER, SB CIMETIDINE, RA ACID REDUCER, PX ACID REDUCER, HEARTBURN RELIEF, GNP HEARTBURN RELIEF 200, GNP HEARTBURN RELIEF, EQ HEARTBURN RELIEF, EQ CIMETIDINE ACID REDUCER, EQ ACID REDUCER, CVS HEARTBURN RELIEF, CIMETIDINE ACID REDUCER TABS	1	RX/OTC
(Famotidine) ACID CONTROL MAXIMUM STRENGTH, SM ACID REDUCER MAXIMUM STRENGTH, SB ACID CONTROLLER MAXIMUM STRENGTH, RA ACID REDUCER MAXIMUM STRENGTH, QC ACID CONTROLLER MAXIMUM STRENGTH, PX ACID REDUCER MAXIMUM STRENGTH, MM FAMOTIDINE, KLS ACID CONTROLLER MAXIMUM STRENGTH, HM FAMOTIDINE, HEARTBURN RELIEF MAXIMUMSTRENGTH, GNP ACID REDUCER MAXIMUMSTRENGTH, EQL HEARTBURN PREVENTION/MAXIMUM STRENGTH, EQ ACID REDUCER MAXIMUM STRENGTH, CVS ACID CONTROLLER MAXIMUM STRENGTH, ACID REDUCER MAXIMUM STRENGTH, ACID CONTROLLER MAXIMUM STRENGTH TABS	1	RX/OTC

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

Drug Name	Drug Tier	Requirements/ Limits
(Ranitidine Hcl) ACID CONTROL MAXIMUM STRENGTH, WAL-ZAN 150 MAXIMUM STRENGTH, SM ACID REDUCER MAXIMUM STRENGTH, SB ACID REDUCER, RANITIDINE 150 MAXIMUM STRENGTH, RA ACID REDUCER MAXIMUM STRENGTH, PX ACID REDUCER MAXIMUM STRENGTH, KLS ACID REDUCER MAXIMUMSTRENGTH, HM ACID REDUCER MAXIMUM STRENGTH, HM ACID REDUCER, HEARTBURN RELIEF 150 MAXIMUM STRENGTH, GOODSENSE ACID REDUCER, GNP ACID CONTROL 150 MAXIMUM STRENGTH, EQL HEARTBURN RELIEF MAXIMUM STRENGTH, EQL ACID REDUCER MAXIMUMSTRENGTH, EQ ACID REDUCER, CVS ACID REDUCER MAXIMUMSTRENGTH, ACID REDUCER MAXIMUM STRENGTH, ACID REDUCER TABS	1	RX/OTC
cimetidine hcl soln	1	1 bal on hand,
cimetidine tabs 200 mg, 400 mg, 800 mg	1	RX/OTC
cimetidine tabs 300 mg, 400 mg, 800 mg	1	
famotidine susr 40 mg/5ml	1	
famotidine tabs 20 mg	1	RX/OTC
famotidine tabs 40 mg	1	QL(2 ea daily)
NIZATIDINE CAPS 150 MG (nizatidine)	2	

Drug Name	Drug Tier	Requirements/ Limits
nizatidine caps 150 mg, 300 mg	1	
nizatidine soln 15 mg/ml	1	1 bal on hand,
PEPCID AC MAXIMUM STRENGTH TABS (famotidine)	GP	RX/OTC
PEPCID SUSR 40 MG/5ML (famotidine)	GP	
PEPCID TABS 20 MG (famotidine)	GP	RX/OTC
PEPCID TABS 40 MG (famotidine)	GP	QL(2 ea daily)
ranitidine hcl caps 150 mg, 300 mg	1	
ranitidine hcl syrp 15 mg/ml, 75 mg/5ml, 150 mg/10ml	1	
ranitidine hcl tabs 150 mg	1	RX/OTC
ranitidine hcl tabs 300 mg	1	
TAGAMET HB TABS (cimetidine)	GP	RX/OTC
ZANTAC 150 MAXIMUM STRENGTH TABS (ranitidine hcl)	GP	RX/OTC
ZANTAC TABS (ranitidine hcl)	GP	
Misc. Anti-Ulcer		
CARAFATE SUSP (sucralfate)	GP	
CARAFATE TABS (sucralfate)	GP	
sucralfate susp	1	
sucralfate tabs	1	
Proton Pump Inhibitors		

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

Drug Name	Drug Tier	Requirements/ Limits
(Esomeprazole Magnesium) CVS ESOMEPRAZOLE MAGNESIUM, SM ESOMEPRAZOLE MAGNESIUM, RA ESOMEPRAZOLE MAGNESIUM, QC ESOMEPRAZOLE MAGNESIUM, KLS ESOMEPRAZOLE MAGNESIUM, HM ESOMEPRAZOLE MAGNESIUM DELAYED RELEASE, GOODSENSE ESOMEPRAZOLE MAGNESIUM, GNP ESOMEPRAZOLE MAGNESIUM CPDR	1	PA; QL(1 ea daily); RX/OTC
(Esomeprazole Magnesium) HEARTBURN TREATMENT 24 HOUR CPDR 20 MG	1	PA; QL(1 ea daily); RX/OTC
(Lansoprazole) CVS LANSOPRAZOLE, SM LANSOPRAZOLE, RA LANSOPRAZOLE, QC LANSOPRAZOLE, KLS LANSOPRAZOLE, HM LANSOPRAZOLE, GOODSENSE LANSOPRAZOLE, GNP LANSOPRAZOLE, EQ LANSOPRAZOLE CPDR	1	RX/OTC
(Lansoprazole) HEARTBURN TREATMENT 24 HOUR CPDR 15 MG	1	RX/OTC
ACIPHEX SPRINKLE CPSP 5 MG, 10 MG (<i>rabeprazole sodium</i>)	3	PA
ACIPHEX TBEC (<i>rabeprazole sodium</i>)	NF	PA; QL(2 ea daily)
DEXILANT CPDR (<i>dexlansoprazole</i>)	3	PA; QL(1 ea daily)
<i>esomeprazole magnesium cpdr 20 mg</i>	1	PA; QL(1 ea daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
<i>esomeprazole magnesium cpdr 40 mg</i>	1	PA; QL(1 ea daily)
<i>esomeprazole magnesium pack 10 mg, 20 mg, 40 mg</i>	1	PA
ESOMEPRAZOLE STRONTIUM CPDR (<i>esomeprazole strontium</i>)	3	PA; QL(1 ea daily)
FIRST-LANSOPRAZOLE SUSP (<i>lansoprazole</i>)	3	PA
FIRST-OMEPRAZOLE SUSP (<i>omeprazole</i>)	3	
<i>lansoprazole cpdr 15 mg</i>	1	RX/OTC
<i>lansoprazole cpdr 30 mg</i>	1	
<i>lansoprazole tbdd 15 mg</i>	1	QL(1 ea daily); AL(Up to 12 yrs old); RX/OTC
<i>lansoprazole tbdd 30 mg</i>	1	QL(1 ea daily); AL(Up to 12 yrs old)
NEXIUM 24HR CLEAR MINIS CPDR (<i>esomeprazole magnesium</i>)	GP	PA; QL(1 ea daily); RX/OTC
NEXIUM 24HR CPDR (<i>esomeprazole magnesium</i>)	GP	PA; QL(1 ea daily); RX/OTC
NEXIUM CPDR 20 MG (<i>esomeprazole magnesium</i>)	GP	PA; QL(1 ea daily); RX/OTC
NEXIUM CPDR 40 MG (<i>esomeprazole magnesium</i>)	GP	PA; QL(1 ea daily)
NEXIUM PACK 10 MG, 20 MG, 40 MG (<i>esomeprazole magnesium</i>)	GP	PA
NEXIUM PACK 5 MG, 2.5 MG (<i>esomeprazole magnesium</i>)	3	PA

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

Drug Name	Drug Tier	Requirements/ Limits
OMEPRAZOLE + SYRSPEND SFALKA SUSP (<i>omeprazole</i>)	3	
<i>omeprazole cpdr 10 mg, 40 mg</i>	1	
<i>omeprazole cpdr 20 mg, 40 mg</i>	1	RX/OTC
<i>pantoprazole sodium tbec</i>	1	
PREVACID 24HR CPDR (<i>lansoprazole</i>)	NF	RX/OTC
PREVACID CPDR 15 MG (<i>lansoprazole</i>)	NF	RX/OTC
PREVACID CPDR 30 MG (<i>lansoprazole</i>)	GP	
PREVACID SOLUTAB TBDD 15 MG (<i>lansoprazole</i>)	GP	QL(1 ea daily); AL(Up to 12 yrs old); RX/OTC
PREVACID SOLUTAB TBDD 30 MG (<i>lansoprazole</i>)	GP	QL(1 ea daily); AL(Up to 12 yrs old)
PRILOSEC PACK (<i>omeprazole magnesium</i>)	3	PA
PROTONIX PACK 40 MG (<i>pantoprazole sodium</i>)	3	
PROTONIX TBEC 20 MG (<i>pantoprazole sodium</i>)	GP	
PROTONIX TBEC 40 MG (<i>pantoprazole sodium</i>)	NF	
RABEPRAZOLE SODIUM DR SPRINKLE CPSP (<i>rabeprazole sodium</i>)	3	PA
<i>rabeprazole sodium tbec</i>	1	PA; QL(2 ea daily)
Ulcer Drugs - Prostaglandins		
CYTOTEC TABS (<i>misoprostol</i>)	GP	
<i>misoprostol tabs</i>	1	
Ulcer Therapy Combinations		

Drug Name	Drug Tier	Requirements/ Limits
(Omeprazole-Sodium Bicarbonate) OMEPPI CAPS	1	PA
<i>amoxicillin-clarithromycin w/ lansoprazole misc</i>	1	
OMECLAMOX-PAK MISC (<i>amoxicillin-clarithromycin w/ omeprazole</i>)	3	
<i>omeprazole-sodium bicarbonate caps 40 mg-1100 mg</i>	1	PA
<i>omeprazole-sodium bicarbonate pack 20 mg-1680 mg, 40 mg-1680 mg</i>	1	
PYLERA CAPS (<i>bismuth subcitrate potassium-metronidazole-tetracycline</i>)	3	
ZEGERID CAPS 40 MG-1100 MG (<i>omeprazole-sodium bicarbonate</i>)	GP	PA
ZEGERID PACK 20 MG-1680 MG, 40 MG-1680 MG (<i>omeprazole-sodium bicarbonate</i>)	GP	
URINARY ANTI-INFECTIVES - Drugs to Treat Bladder/Kidney Infections		
Urinary Anti-infective Combinations		
(Methenamine-Hyosc-Methylene Blue-Benzoic Acid-Phenyl Sal) HYOPHEN TABS	1	1 bal on hand,
(Methenamine-Hyosc-Methylene Blue-Sod Phos-Phenyl Sal) PHOSPHASAL, VILEVEV MB, UTRONA-C, UTIRA-C, UROAV-81, URO-458, URIN D/S, URIMAR-T, URETRON D/S, URELLE TABS	1	

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

Drug Name	Drug Tier	Requirements/ Limits
(Methenamine-Hyosc-Methylene Blue-Sod Phos-Phenyl Sal) PHOSPHASAL, VILEVEV MB, UTRONA-C, UTIRA-C, UROAV-81, URO-458, URIN D/S, URIMAR-T, URETRON D/S, URELLE TABS	1	1 bal on hand,
(Methenamine-Hyosc-Methylene Blue-Sod Phos-Phenyl Sal) URIBEL, VILAMIT MB, UTICAP, USTELL, UROAV-B, URO-MP CAPS	1	
Urinary Anti-infectives		
FURADANTIN SUSP (<i>nitrofurantoin</i>)	GP	
HIPREX TABS (<i>methenamine hippurate</i>)	GP	
MACROBID CAPS (<i>nitrofurantoin monohyd macro</i>)	GP	
MACRODANTIN CAPS (<i>nitrofurantoin macrocrystal</i>)	GP	
<i>methenamine hippurate tabs</i>	1	
<i>methenamine mandelate tabs 0.5 gm, 1 gm</i>	1	
MONUROL PACK (<i>fosfomycin tromethamine</i>)	3	
<i>nitrofurantoin macrocrystal caps</i>	1	
<i>nitrofurantoin monohyd macro caps</i>	1	
<i>nitrofurantoin susp</i>	1	
URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms		
Urinary Antispasmodic - Antimuscarinics		

Drug Name	Drug Tier	Requirements/ Limits
<i>darifenacin hydrobromide tb24</i>	1	
DETROL LA CP24 2 MG (<i>tolterodine tartrate</i>)	GP	QL(1 ea daily)
DETROL LA CP24 4 MG (<i>tolterodine tartrate</i>)	NF	QL(1 ea daily)
DETROL TABS 1 MG (<i>tolterodine tartrate</i>)	GP	QL(2 ea daily)
DETROL TABS 2 MG (<i>tolterodine tartrate</i>)	GP	
DITROPAN XL TB24 (<i>oxybutynin chloride</i>)	GP	
ENABLEX TB24 15 MG (<i>darifenacin hydrobromide</i>)	NF	
ENABLEX TB24 7.5 MG (<i>darifenacin hydrobromide</i>)	GP	
GELNIQUE GEL (<i>oxybutynin chloride</i>)	3	
GELNIQUE PUMP GEL (<i>oxybutynin chloride</i>)	3	
<i>oxybutynin chloride syrp</i>	1	
<i>oxybutynin chloride tabs</i>	1	
<i>oxybutynin chloride tb24</i>	1	
OXYTROL FOR WOMEN PTTW (<i>oxybutynin</i>)	3	RX/OTC
OXYTROL PTTW (<i>oxybutynin</i>)	3	RX/OTC
<i>solifenacin succinate tabs</i>	1	
<i>tolterodine tartrate cp24 2 mg, 4 mg</i>	1	QL(1 ea daily)
<i>tolterodine tartrate tabs 1 mg</i>	1	QL(2 ea daily)
<i>tolterodine tartrate tabs 2 mg</i>	1	

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

Drug Name	Drug Tier	Requirements/ Limits
TOVIAZ TB24 (<i>fesoterodine fumarate</i>)	2	QL(1 ea daily)
<i>tropium chloride cp24</i>	1	
<i>tropium chloride tabs</i>	1	
VESICARE TABS (<i>solifenacin succinate</i>)	GP	
Urinary Antispasmodics - Beta-3 Adrenergic		
MYRBETRIQ TB24 (<i>mirabegron</i>)	3	QL(1 ea daily)
Urinary Antispasmodics - Cholinergic Agonists		
<i>bethanechol chloride tabs</i>	1	
URECHOLINE TABS (<i>bethanechol chloride</i>)	GP	
Urinary Antispasmodics - Direct Muscle Relaxants		
<i>flavoxate hcl tabs</i>	1	
VACCINES		
Bacterial Vaccines		
VIVOTIF BERNA CPDR (<i>typhoid vaccine</i>)	3	QL(4 ea per fill retail, 4 ea per fill mail)
VIVOTIF CPDR (<i>typhoid vaccine</i>)	3	QL(4 ea per fill retail, 4 ea per fill mail)
Viral Vaccines		
FLUCELVAX QUADRIVALENT 2017-2018 SUSY (<i>influenza virus vaccine tissue-cultured subunit quadrivalent</i>)	PV	PV
FLUCELVAX QUADRIVALENT 2018-2019 SUSY (<i>influenza virus vaccine tissue-cultured subunit quadrivalent</i>)	PV	PV

Drug Name	Drug Tier	Requirements/ Limits
FLUCELVAX QUADRIVALENT 2019-2020 SUSY (<i>influenza virus vaccine tissue-cultured subunit quadrivalent</i>)	PV	PV
GARDASIL 9 SUSP (<i>human papillomavirus (hvp) 9-valent recombinant vaccine</i>)	PV	PV
GARDASIL 9 SUSY (<i>human papillomavirus (hvp) 9-valent recombinant vaccine</i>)	PV	PV
RECOMBIVAX HB SUSP (<i>hepatitis b vaccine (recomb)</i>)	3	
ROTATEQ SOLN (<i>rotavirus vaccine, live oral pentavalent</i>)	3	
VAGINAL AND RELATED PRODUCTS		
Miscellaneous Vaginal Products		
(Acetic Acid-Oxyquinoline Vaginal) RELAGARD GEL	3	1 bal on hand,
FEM PH GEL (<i>acetic acid-oxyquinoline vaginal</i>)	3	
INTRAROSA INST (<i>prasterone vaginal</i>)	3	
Spermicides		
(Nonoxynol-9) VCF VAGINAL CONTRACEPTIVE GEL	PV	PV
ENCARE SUPP (<i>nonoxynol-9</i>)	PV	PV
OPTIONS CONCEPTROL VAGINAL CONTRACEPTIVE GEL (<i>nonoxynol-9</i>)	GP	PV
OPTIONS GYNOL II VAGINAL CONTRACEPTIVE GEL (<i>nonoxynol-9</i>)	PV	PV

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

Drug Name	Drug Tier	Requirements/ Limits
SHUR-SEAL GEL (<i>nonoxynol-9</i>)	PV	PV
TODAY SPONGE MISC (<i>nonoxynol-9</i>)	PV	PV
VCF VAGINAL CONTRACEPTIVE FILM FILM (<i>nonoxynol-9</i>)	PV	PV
VCF VAGINAL CONTRACEPTIVE FOAM FOAM (<i>nonoxynol-9</i>)	PV	PV
Vaginal Anti-infectives		
(Metronidazole Vaginal) VANDAZOLE GEL	1	
(Miconazole Nitrate Vaginal) MICONAZOLE 3 SUPP	1	1 bal on hand,
AVC CREA (<i>sulfanilamide vaginal</i>)	3	
CLEOCIN CREA VA 2 % (<i>clindamycin phosphate vaginal</i>)	GP	
CLEOCIN SUPP VA 100 MG (<i>clindamycin phosphate vaginal</i>)	3	
<i>clindamycin phosphate vaginal crea</i>	1	
CLINDESSE CREA (<i>clindamycin phosphate (one dose)</i>)	3	
GYNAZOLE-1 CREA (<i>butoconazole nitrate (one dose)</i>)	3	
METROGEL-VAGINAL GEL (<i>metronidazole vaginal</i>)	GP	
<i>metronidazole vaginal gel</i>	1	
TERAZOL 7 CREA (<i>terconazole vaginal</i>)	GP	
<i>terconazole vaginal crea 0.4 %</i>	1	
<i>terconazole vaginal crea 0.8 %</i>	1	1 bal on hand,

Drug Name	Drug Tier	Requirements/ Limits
<i>terconazole vaginal supp 80 mg</i>	1	
Vaginal Estrogens		
(Estradiol Vaginal) YUVAFEM TABS	1	
ESTRACE CREA (<i>estradiol vaginal</i>)	GP	
<i>estradiol vaginal crea</i>	1	
<i>estradiol vaginal tabs</i>	1	
ESTRING RING (<i>estradiol vaginal</i>)	3	
FEMRING RING (<i>estradiol acetate vaginal</i>)	3	QL(1 ea per 90 days retail)
PREMARIN CREA VA 0.625 MG/GM (<i>estrogens, conjugated vaginal</i>)	2	
VAGIFEM TABS (<i>estradiol vaginal</i>)	NF	
Vaginal Progestins		
CRINONE GEL 4 % (<i>progesterone (vaginal)</i>)	3	
CRINONE GEL 8 % (<i>progesterone (vaginal)</i>)	3	PA
ENDOMETRIN INST (<i>progesterone (vaginal)</i>)	3	PA
VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions		
Anaphylaxis Therapy Agents		
<i>epinephrine (anaphylaxis) soaj 0.15 mg/0.15ml, 0.3 mg/0.3ml, 0.3 mg/0.3ml</i>	2	QL(4 ea per fill retail)1 bal on hand,

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

Drug Name	Drug Tier	Requirements/ Limits
<i>epinephrine (anaphylaxis) soaj 0.15 mg/0.3ml, 0.3 mg/0.3ml, 0.3 mg/0.3ml</i>	2	QL(4 ea per fill retail)
EPINEPHRINE SOAJ 0.3 MG/0.3ML (<i>epinephrine (anaphylaxis)</i>)	2	QL(4 ea per fill retail)
EIPEN 2-PAK SOAJ (<i>epinephrine (anaphylaxis)</i>)	2	PA; QL(4 ea per fill retail)
EIPEN-JR 2-PAK SOAJ (<i>epinephrine (anaphylaxis)</i>)	2	PA; QL(4 ea per fill retail)
Neurogenic Orthostatic Hypotension (NOH) -		
NORTHERA CAPS (<i>droxidopa</i>)	SP	PA
Vasopressors		
EPINEPHRINE HCL SOLN (<i>epinephrine</i>)	SP	PA
<i>epinephrine soln 1 mg/ml</i>	SP	PA
<i>midodrine hcl tabs</i>	1	
VITAMINS		
Oil Soluble Vitamins		
(Cholecalciferol) AQUEOUS VITAMIN D INFANTS, VITAMIN D INFANT, JUST D, D3 VITAMIN, D-VITE PEDIATRIC, BPROTECTED PEDIA D-VITE LIQD	PV	AL(At least 65 yrs old); PV
(Cholecalciferol) CVS D3, EQL VITAMIN D3 CAPS	PV	AL(At least 65 yrs old); PV
(Cholecalciferol) D 400, PA VITAMIN D-3 GUMMY, KP VITAMIN D, HEALTHY KIDS VITAMIN D3, GNP VITAMIN D, D3 KIDS CHEW	PV	AL(At least 65 yrs old); PV

Drug Name	Drug Tier	Requirements/ Limits
(Cholecalciferol) D 400, VITAMIN D-400, SM VITAMIN D, QC VITAMIN D3, HM VITAMIN D, GNP VITAMIN D-400, DELTA D3, D3 HIGH POTENCY, D-400 TABS	PV	AL(At least 65 yrs old); PV
BABY DDROPS LIQD (<i>cholecalciferol</i>)	PV	AL(At least 65 yrs old); PV
<i>cholecalciferol caps</i>	PV	AL(At least 65 yrs old); PV
<i>cholecalciferol chew</i>	PV	AL(At least 65 yrs old); PV
<i>cholecalciferol liqd</i>	PV	AL(At least 65 yrs old); PV
<i>cholecalciferol tabs</i>	PV	AL(At least 65 yrs old); PV
D-VI-SOL LIQD (<i>cholecalciferol</i>)	GP	AL(At least 65 yrs old); PV
DRISDOL CAPS (<i>ergocalciferol</i>)	GP	
<i>ergocalciferol caps</i>	1	
MEPHYTON TABS (<i>phytonadione</i>)	GP	
<i>phytonadione tabs</i>	1	
VITAMIN D2 TABS (<i>ergocalciferol</i>)	PV	AL(At least 65 yrs old); PV
VITAMIN D3 IMMUNE HEALTH LIQD (<i>cholecalciferol</i>)	PV	AL(At least 65 yrs old); PV
VITAMIN D3 LIQD (<i>cholecalciferol</i>)	PV	AL(At least 65 yrs old); PV
Water Soluble Vitamins		
POTABA CAPS (<i>potassium aminobenzoate</i>)	3	
<i>potassium aminobenzoate pack</i>	1	1 bal on hand,

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

Index

7t lido gel	87	ADCIRCA	64	alendronate sodium	92
7TOPIC	88	ADDERALL	1	ALFERON N	51
abacavir sulfate	56	ADDERALL XR	1	alfuzosin hcl	101
abacavir sulfate-lamivudine	56	adefovir dipivoxil	59	ALIMTA	47
abacavir sulfate-lamivudine-zidovudine	56	ADEMPAS	64	ALINIA	16
ABELCET	36	ADLYXIN	32	aliskiren fumarate	44
ABILIFY	56	ADLYXIN STARTER PACK	32	ALKERAN	46
abiraterone acetate	48	adrucil	47	all day allergy childrens	38
ABSORICA	74	ADVAIR DISKUS	21	allergy nasal spray 24 hour	129
ABSORICA LD	74	ADVAIR HFA	21	allergy relief 24hr	38
ABSTRAL	10	ADVICOR	40	allopurinol	101
acamprosate calcium	139	ADZENYS ER	1	almotriptan malate	111
acarbose	31	afeditab cr	62	ALOCRIAL	134
ACCOLATE	19	AFINITOR	49	ALOMIDE	134
ACCUPRIL	41	AFINITOR DISPERZ	49	ALORA	97
ACCURETIC	42	afirmelle	66	alosetron hcl	99
acebutolol hcl	61	aftera	69	ALOXI	35
acetaminophen w/ codeine	12	AGGRENOLX	102	ALPHAGAN P	131
acetazolamide	90	AGRYLIN	102	alprazolam	18
acetic acid (otic)	135	AIMOVIG	110	ALPRAZOLAM INTENSOL	18
acetylcysteine	73	AIMSCO LUBRICATED	108	alprazolam xr	18
acid control maximum strength	148	AIRDUO RESPICLICK 113/14	21	ALREX	133
ACIPHEX	150	AIRDUO RESPICLICK 232/14	21	ALTABAX	77
ACIPHEX SPRINKLE	150	AIRDUO RESPICLICK 55/14	21	altacaine	133
acitretin	79	AJOVY	110	ALTACE	41
ACTEMRA	4	ak-poly-bac	131	altafrin	131
ACTIDOM DMX	72	AKTEN	133	ALTOPREV	40
ACTIGALL	98	AKYNZEO	36	ALUNBRIG	49
ACTIMMUNE	51	al12	86	ALVESCO	20
ACTIQ	10	ALA SCALP	81	alyacen 7/7/7	67
ACTIVELLA	96	ala-cort	81	alyq	64
ACTONEL	92	ALA-QUIN	77	amabelz	96
ACTOPLUS MET	31	albendazole	15	amantadine hcl	53
ACTOPLUS MET XR	31	ALBENZA	15	AMARYL	34
ACTOS	32	albuterol sulfate	21	AMBIEN	105
ACULAR	134	ALCAINE	133	AMBIEN CR	105
ACULAR LS	134	alclometasone dipropionate	81	AMBISOME	36
ACUVAIL	134	ALCORTIN A	77	ambrisentan	64
acyclovir	60	ALDACTAZIDE	91	amcinonide	81
acyclovir topical	80	ALDACTONE	91	AMCINONIDE	81
ACZONE	74	ALDARA	86	AMERGE	111
ADAGEN	3	ALDURAZYME	94	amethia	66
ADALAT CC	62	ALECENSA	49	amethyst	66
adapalene	74			AMICAR	104
adapalene-benzoyl peroxide	74			amikacin sulfate	3

amiloride & hydrochlorothiazide	91	ANORO ELLIPTA	21	ASMANEX HFA	20
amiloride hcl	91	ANTABUSE	139	ASMANEX TWISTHALER	120
aminocaproic acid	104	ANTARA	39	METERED DOSES	20
aminophylline	22	anti-diarrheal	34	ASMANEX TWISTHALER	14
amiodarone hcl	19	anucort-hc	14	METERED DOSES	20
AMITIZA	98	anuset-hc	14	ASMANEX TWISTHALER	30
amitriptyline hcl	30	ANUSOL-HC	15	METERED DOSES	20
amlodipine besylate	62	ANZEMET	35	ASMANEX TWISTHALER	60
amlodipine besylate-atorvastatin calcium	63	APEXICON E	81	METERED DOSES	20
amlodipine besylate-benazepril hcl	42	APLENZIN	28	ASMANEX TWISTHALER	7
amlodipine besylate-olmesartan medoxomil	42	apraclonidine hcl	131	METERED DOSES	20
amlodipine besylate-valsartan	42	aprepitant	36	aspirin	9
amlodipine-valsartan-hydrochlorothiazide	42	apri	66	aspirin-dipyridamole	102
amnestem	73	APRISO	99	ASTAGRAF XL	115
amoxapine	30	APTOM	25	ASTEPRO	129
amoxicillin	137	APTIVUS	56	ATABEX EC	121
amoxicillin & pot clavulanate	137,138	aqueous vitamin d infants	155	ATABEX OB	121
amoxicillin-clarithromycin w/ lansoprazole	151	ARALAST NP	145	ATACAND	41
amphetamine-dextroamphetamine	1	ARANESP ALBUMIN FREE	103	ATACAND HCT	42
amphotericin b	36	ARAVA	7	atazanavir sulfate	56
ampicillin	137	ARCALYST	4	ATELVIA	92
ampicillin & sulbactam sodium	138	ARCAPTA NEOHALER	21	atenolol	61
ampicillin sodium	137	argyle sterile saline 100ml	101	atenolol & chlorthalidone	42
AMPYRA	140	argyle sterile water 100ml	117	ATGAM	115
AMRIX	128	ARICEPT	139	ATIVAN	18
ANADROL-50	13	ARIKAYCE	3	atomoxetine hcl	2
ANAFRANIL	30	ARIMIDEX	48	atorvastatin calcium	40
anagrelide hcl	102	aripiprazole	56	atovaquone	16
ANALPRAM HC	14	ARIXTRA	23	atovaquone-proguanil hcl	45
ANALPRAM HC SINGLES	14	armodafinil	2	ATRALIN	74
ANALPRAM-HC	14	ARMONAIR RESPICLICK 113	20	ATRIPLA	56
ANAPROX DS	5	ARMONAIR RESPICLICK 232	20	ATROPINE SULFATE	131
ANASPAZ	147	ARMONAIR RESPICLICK 55	20	ATROVENT HFA	19
anastrozole	48	ARMOUR THYROID	147	AUBAGIO	140
ANCOBON	36	ARNUITY ELLIPTA	20	AUGMENTIN	138
ANDRODERM	13	AROMASIN	48	AUGMENTIN ES-600	138
ANDROGEL	13	ARRANON	47	AUGMENTIN XR	138
ANDROGEL PUMP	13	ARTHROTEC 50	5	aurovela 1.5/30	67
ANGELIQ	96	ARTHROTEC 75	5	aurovela 24 fe	67
ANNOVERA	69	ARZERRA	47	AUSTEDO	140
		ASACOL HD	99	av-phos 250 neutral	114
		ascomp/codeine	11	av-vite fb forte	90
		ASCRIPITIN	9	AVALIDE	42
				AVANDIA	32
				AVAPRO	41
				AVAR	74
				avar cleanser	73
				AVAR LS	74

AVAR LS CLEANSER.....	74	banophen.....	37	BEVESPI AEROSPHERE...	21
avar-e emollient.....	74	BANZEL.....	25	BEVYXXA.....	23
AVAR-E LS.....	74	BAQSIMI ONE PACK.....	32	bexarotene.....	51
AVC.....	154	BAQSIMI TWO PACK.....	32	BEYAZ.....	67
AVELOX.....	98	BARACLUDE.....	59	bicalutamide.....	48
avidoxy.....	146	BAXDELA.....	98	BICILLIN C-R.....	138
avita.....	74	BECONASE AQ.....	129	BICILLIN L-A.....	137
AVODART.....	101	BELBUCA.....	13	BIDIL.....	63
AVONEX.....	140	BELLADONNA/OPIUM.....	147	BILTRICIDE.....	15
AVONEX PEN.....	140	BELSOMRA.....	106	bimatoprost.....	135
AXERT.....	111	benazepril & hydrochlorothiazide.....	42	BINOSTO.....	92
AYGESTIN.....	139	benazepril hcl.....	41	BIO-DTUSS DMX.....	72
AYVAKIT.....	49	BENICAR.....	41	bio-statin.....	36
azacitidine.....	47	BENICAR HCT.....	42,43	BIO-STATIN.....	36
AZASAN.....	115	BENLYSTA.....	117	biogtuss.....	71
AZASITE.....	132	BENSAL HP.....	86	bisoprolol & hydrochlorothiazide.....	43
AZATHIOPRINE.....	116	BENTYL.....	147	bisoprolol fumarate.....	61
azathioprine.....	116	BENZACLIN.....	74	BIVIGAM.....	136
azelaic acid.....	88	BENZACLIN WITH PUMP.....	74	BLEPH-10.....	132
azelastine hcl.....	129	BENZAMYCIN.....	74	BLEPHAMIDE.....	133
azelastine hcl (ophth).....	134	benzepro creamy wash.....	73	BLEPHAMIDE S.O.P.....	133
azelastine hcl-fluticasone propionate.....	129	BENZNIDAZOLE.....	15	BONIVA.....	92
AZELEX.....	74	benzonatate.....	71	BONJESTA.....	36
AZILECT.....	54	benzoyl peroxide- erythromycin.....	74	bosentan.....	64
azithromycin.....	107	benztropine mesylate.....	52	BOSULIF.....	49
AZOPT.....	134	BEPREVE.....	134	BOTOX.....	130
AZOR.....	42	BERINERT.....	102	bp cleansing wash.....	74
AZULFIDINE.....	99	beser.....	81	bprotected pedia iron.....	104
AZULFIDINE EN-TABS.....	99	BESIVANCE.....	132	BRAFTOVI.....	49
azurette.....	66	BETADINE OPHTHALMIC PREP.....	132	BREO ELLIPTA.....	21
BABY DDROPS.....	155	BETAGAN.....	130	BRILINTA.....	102
baciim.....	15	betamethasone dipropionate (topical).....	81	brimonidine tartrate.....	131
bacitracin.....	15	betamethasone dipropionate augmented.....	81	BRISDELLE.....	145
bacitracin (ophthalmic).....	132	betamethasone valerate... ..	81	BRIVIACT.....	25
bacitracin-poly-neomycin-hc	133	BETAPACE.....	61	bromfenac sodium (ophth).....	134
bacitracin-polymyxin b (ophth).....	132	BETAPACE AF.....	61	bromocriptine mesylate.....	53
baclofen.....	128	BETASERON.....	140	brompheniramine tannate... ..	37
BACTRIM.....	15	betaxolol hcl.....	61	BROMSITE.....	134
BACTRIM DS.....	15	betaxolol hcl (ophth).....	130	BROVANA.....	21
BACTROBAN NASAL.....	129	bethanechol chloride.....	153	BRUKINSA.....	50
BAL-CARE DHA.....	121	BETHKIS.....	3	budesonide.....	70
BALCOLTRA.....	67	BETIMOL.....	130	budesonide (inhalation).....	20
balsalazide disodium.....	99	BETOPTIC-S.....	130	budesonide (nasal).....	130
BALVERSA.....	49			budesonide-formoterol fumarate dihydrate.....	21
				bumetanide.....	91

BUMEX.....	91	calcipotriene-betamethasone dipropionate.....	81	CARNITOR SF.....	94
BUNAVAIL.....	13	calcitonin (salmon).....	92	carteolol hcl (ophth).....	130
bupap.....	7	calcitrene.....	79	cartia xt.....	62
BUPHENYL.....	94	calcitriol.....	94	carvedilol.....	61
BUPRENEX.....	13	calcitriol (topical).....	79	carvedilol phosphate.....	61
buprenorphine.....	13	calcium acetate (phosphate binder).....	100	CASODEX.....	48
buprenorphine hcl.....	13	CALCIUM-FOLIC ACID PLUS D.....	113	caspofungin acetate.....	36
buprenorphine hcl-naloxone hcl dihydrate.....	13	CALQUENCE.....	50	CASPOFUNGIN ACETATE.....	36
bupropion hcl.....	28	CAMBIA.....	111	CATAPRES.....	42
bupropion hcl (smoking deterrent).....	144	camila.....	70	CATAPRES-TTS-1.....	42
buspirone hcl.....	17	CAMPATH.....	47	CATAPRES-TTS-2.....	42
busulfan.....	46	CANASA.....	99	CATAPRES-TTS-3.....	42
BUSULFEX.....	46	CANCIDAS.....	36	caziant.....	66
butalbital-acetaminophen.....	7	candesartan cilexetil.....	41	cefaclor.....	65
butalbital-acetaminophen- caffeine.....	7	candesartan cilexetil- hydrochlorothiazide.....	43	CEFACLOER ER.....	65
butalbital-acetaminophen- caffeine w/ codeine.....	12	CAPASTAT SULFATE.....	46	cefadroxil.....	65
butalbital-aspirin-caffeine.....	7	capecitabine.....	47	cefazolin sodium.....	65
butalbital-aspirin-caffeine w/cod.....	12	CAPEX.....	82	cefdinir.....	65
BUTALBITAL/ACETAMINOPHEN	7	CAPLYTA.....	54	cefditoren pivoxil.....	65
BUTALBITAL/ASPIRIN/CAFFEIN E.....	7	CAPRELSA.....	50	CEFEPIME.....	66
BUTISOL SODIUM.....	105	captopril.....	41	cefepime hcl.....	66
butorphanol tartrate.....	13	captopril & hydrochlorothiazide.....	43	CEFEPIME/DEXTROSE.....	66
BUTRANS.....	13	CARAC.....	79	cefixime.....	65
BYDUREON.....	32	CARAFATE.....	149	CEFOTAN.....	65
BYDUREON BCISE.....	32	CARBAGLU.....	94	cefotaxime sodium.....	65
BYDUREON PEN.....	32	carbamazepine.....	25	cefotetan disodium.....	65
BYETTA.....	32	CARBAPHEN 12.....	72	cefoxitin sodium.....	65
BYSTOLIC.....	61	CARBAPHEN 12 PED.....	72	CEFOXITIN SODIUM.....	65
BYVALSON.....	43	CARBATROL.....	25	cefpodoxime proxetil.....	65
C-NATE DHA.....	121	carbidopa.....	52	cefprozil.....	65
c-topical.....	87	carbidopa-levodopa.....	53	ceftazidime.....	65
cabergoline.....	95	carbidopa-levodopa- entacapone.....	53	ceftriaxone sodium.....	65
CABLIVI.....	102	carbinoxamine maleate.....	37	cefuroxime axetil.....	65
CABOMETYX.....	50	CARDIZEM.....	62	cefuroxime sodium.....	65
CADUET.....	63	CARDIZEM CD.....	62	CELEBREX.....	5
CAFERGOT.....	111	CARDIZEM LA.....	62	celecoxib.....	5
caffeine citrate.....	2	CARDURA.....	42	CELEXA.....	29
CALAN.....	62	CARDURA XL.....	101	CELLCEPT.....	116
CALAN SR.....	62	carisoprodol.....	128	CELLCEPT INTRAVENOUS.....	116
CALCIFOL.....	113	carisoprodol w/ aspirin.....	129	CELONTIN.....	28
calcipotriene.....	79	carisoprodol w/ aspirin & codeine.....	128	CEM-UREA.....	85
CALCIPOTRIENE.....	79	CARNITOR.....	94	CENTANY.....	77
				CENTANY AT.....	77
				cephalexin.....	65
				CERACADE.....	88

CERDELGA.....	102	CILOXAN.....	132	clindacin etz pledgets.....	73
CEREBYX.....	27	cimetidine.....	149	CLINDACIN PAC.....	75
cerovel.....	85	cimetidine 200.....	148	CLINDAGEL.....	75
CESAMET.....	36	cimetidine hcl.....	149	clindamycin hcl.....	16
cetirizine hcl.....	38	CIMZIA.....	99	clindamycin palmitate	
CETRAXAL.....	135	CIMZIA STARTER KIT....	99	hydrochloride.....	16
CETROTIDE.....	93	cinacalcet hcl.....	94	clindamycin phosphate.....	16
cevimeline hcl.....	118	CIPRO.....	98	clindamycin phosphate	
CHANTIX.....	144	CIPRO HC.....	136	(topical).....	75
CHANTIX CONTINUING		CIPRODEX.....	136	clindamycin phosphate in	
MONTHPAK.....	144	ciprofloxacin.....	98	d5w.....	16
CHANTIX STARTING MONTH		ciprofloxacin hcl.....	98	clindamycin phosphate	
PAK.....	144	ciprofloxacin hcl (ophth)..	132	vaginal.....	154
CHEMET.....	34	ciprofloxacin hcl (otic)...	135	clindamycin phosphate-benzoyl	
CHENODAL.....	98	ciprofloxacin-ciprofloxacin		peroxide.....	75
cheratussin ac.....	71	hcl.....	98	clindamycin phosphate-benzoyl	
CHILDRENS ADVIL.....	5	ciprofloxacin-fluocinolone		peroxide (refrigerate).....	75
childrens ibuprofen.....	5	acetonide.....	136	clindamycin phosphate-	
CHILDRENS MOTRIN.....	5	citalopram hydrobromide..	29	tretinoin.....	75
chloramphenicol sodium		CITRANATAL 90 DHA....	121	CLINDESSE.....	154
succinate.....	16	CITRANATAL ASSURE....	121	clobazam.....	24
chlordiazepoxide hcl.....	18	CITRANATAL B-CALM....	121	clobetasol propionate.....	82
chlordiazepoxide hcl-clidinium		CITRANATAL BLOOM....	121	clobetasol propionate e.....	80
bromide.....	147	CITRANATAL BLOOM		clobetasol propionate emollient	
chlordiazepoxide-amitriptyline		DHA.....	121	base.....	82
.....	140	CITRANATAL DHA.....	121	clobetasol propionate	
chlorhexidine gluconate (mouth-		CITRANATAL		emulsion.....	82
throat).....	117	HARMONY.....	121	CLOBEX.....	82
chloroquine phosphate.....	45	CITRANATAL MEDLEY....	121	clocortolone pivalate.....	82
chlorothiazide.....	91	CITRANATAL RX.....	121	clodan.....	81
chlorpromazine hcl.....	56	cladribine.....	47	CLODERM.....	82
chlorthalidone.....	91	CLAFORAN.....	65	CLODERM PUMP.....	82
CHLORZOXAZONE.....	128	claravis.....	73	clofarabine.....	47
chlorzoxazone.....	128	CLARINEX.....	38	CLOLAR.....	47
CHOLBAM.....	98	CLARINEX-D 12 HOUR....	72	clomiphene citrate.....	93
cholecalciferol.....	155	clarithromycin.....	107	clomipramine hcl.....	30
cholestyramine.....	39	clearlax.....	107	clonazepam.....	24
cholestyramine light.....	39	clemastine fumarate.....	37	clonidine.....	42
choline fenofibrate.....	39	CLENPIQ.....	106	clonidine hcl.....	42
CHOLINE MAGNESIUM		CLEOCIN.....	16,154	clonidine hcl (adhd).....	2
TRISALICYLATE.....	9	CLEOCIN IN D5W.....	16	clopidogrel bisulfate.....	102
CIALIS.....	63	CLEOCIN PEDIATRIC		clorazepate dipotassium.....	18
ciclodan.....	77	GRANULES.....	16	clotrimazole.....	117
CICLODAN SOLUTION KIT.....	77	CLEOCIN PHOSPHATE....	16	clotrimazole (topical).....	77
ciclopirox.....	77	CLEOCIN-T.....	74	clotrimazole w/	
ciclopirox olamine.....	77	CLIMARA.....	97	betamethasone.....	77
ciclopirox treatment.....	77	CLIMARA PRO.....	96	clovique.....	115
cidofovir.....	59	CLINDACIN ETZ.....	74	clozapine.....	55
cilostazol.....	102			CLOZARIL.....	55
				COARTEM.....	45

codeine sulfate.....	10	cortisone acetate.....	70	CYCLOGYL.....	131
CODITUSSIN AC.....	72	CORTISPORIN.....	77	CYCLOMYDRIL.....	131
COGENTIN.....	52	CORTISPORIN-TC.....	136	cyclopentolate hcl.....	131
COLAZAL.....	99	cortizone-10.....	81	cyclophosphamide.....	46
colchicine.....	102	CORZIDE.....	43	cycloserine.....	46
colchicine w/ probenecid...	101	COSENTYX.....	79	CYCLOSET.....	32
COLCRYS.....	102	COSENTYX SENSOREADY		cyclosporine.....	116
colesevelam hcl.....	39	PEN.....	79	cyclosporine modified (for	
COLESTID.....	39	COSOPT.....	130	microemulsion).....	116
COLESTID FLAVORED.....	39	COSOPT PF.....	130	CYKLOKAPRON.....	104
colestipol hcl.....	39	COTELLIC.....	50	CYMBALTA.....	30
colocort.....	14	COUMADIN.....	23	cyproheptadine hcl.....	39
COLY-MYCIN S.....	136	covaryx.....	96	CYSTADANE.....	94
COLYTE-FLAVOR PACKS.....	106	COZAAR.....	41	CYSTAGON.....	101
COMBIGAN.....	130	CREON.....	90	CYSTARAN.....	134
COMBIPATCH.....	96	CRESEMBA.....	37	cytarabine.....	47
COMBIVENT RESPIMAT.....	21	CRESTOR.....	40	CYTOMEL.....	147
COMBIVIR.....	56	CRINONE.....	154	CYTOTEC.....	151
COMETRIQ.....	50	CRIXIVAN.....	57	cytra k crystals.....	100
COMPLERA.....	56	cromolyn sodium.....	19	cytra-2.....	100
COMPLETENATE.....	121	CROMOLYN SODIUM.....	19	cytra-3.....	100
compoz.....	105	cromolyn sodium		cytra-k.....	100
compro.....	56	(mastocytosis).....	98	d 400.....	155
COMTAN.....	52	cromolyn sodium (ophth).	134	D-VI-SOL.....	155
CONCEPT DHA.....	121	crotan.....	89	D.H.E. 45.....	111
CONCEPT OB.....	121	CUBICIN.....	16	DACOGEN.....	47
CONCERTA.....	2	CUBICIN RF.....	16	DAKLINZA.....	59
CONDYLOX.....	86	CUPRIMINE.....	115	dalfampridine.....	140
constulose.....	107	CUTIVATE.....	82	DALIRESP.....	20
CONZIP.....	10	CUVITRU.....	136	danazol.....	13
COPAXONE.....	140	CUVPOSA.....	147	DANTRIUM.....	128
COPIKTRA.....	50	cvs aspirin.....	8	dantrolene sodium.....	128
CORDARONE.....	19	cvs aspirin adult low dose...	8	dapsone.....	16
CORDRAN.....	82	cvs budesonide nasal		dapsone (topical).....	75
COREG.....	61	spray.....	129	daptomycin.....	16
COREG CR.....	61	cvs clotrimazole		DARAPRIM.....	45
coremino.....	146	maximumstrength.....	77	darifenacin hydrobromide..	152
CORGARD.....	61	cvs d3.....	155	DAURISMO.....	48
CORLANOR.....	64	cvs esomeprazole		DAYPRO.....	5
CORTANE-B.....	82	magnesium.....	150	DAYTRANA.....	2
CORTANE-B AQUEOUS.....	136	cvs folic acid.....	103	DDAVP.....	95
CORTANE-B-OTIC.....	136	cvs lansoprazole.....	150	decadron.....	70
CORTEF.....	70	cvs motion sickness ii.....	35	decitabine.....	47
CORTENEMA.....	14	cvs nicotine		DECON-G.....	72
cortic-nd.....	136	transdermalsystem.....	143	deferasirox.....	34
CORTIFOAM.....	14	cvs nicotine transdermalsystem		DELESTROGEN.....	97
		step 1.....	144		
		CVS PRENATAL.....	121		
		cyclobenzaprine hcl.....	128		

DELSTRIGO.....	57	DETROL LA.....	152	DILAUDID.....	10
DELZICOL.....	99	dexamethasone.....	70	dilt-xr.....	62
DEMADEX.....	91	DEXAMETHASONE		diltiazem hcl.....	62
demeclocycline hcl.....	146	INTENSOL.....	70	diltiazem hcl coated beads.....	62
DEMSEER.....	41	dexamethasone sodium		diltiazem hcl extended release	
DENAVIR.....	80	phosphate.....	70	beads.....	62
DEPAKENE.....	28	dexamethasone sodium		DIOVAN.....	42
DEPAKOTE.....	28	phosphate (ophth).....	133	DIOVAN HCT.....	43
DEPAKOTE ER.....	28	dexchlorpheniramine		DIPENTUM.....	99
DEPAKOTE SPRINKLES.....	28	maleate.....	37	diphen.....	37
DEPEN TITRATABS.....	115	DEXEDRINE.....	1	diphenhydramine hcl.....	37
DEPLIN 15.....	90	DEXILANT.....	150	diphenoxylate w/ atropine.....	34
DEPLIN 7.5.....	90	dexmethylphenidate hcl.....	2	DIPROLENE.....	83
DEPO-ESTRADIOL.....	97	dexpak 10 day.....	70	DIPROLENE AF.....	83
DEPO-PROVERA.....	48	dextroamphetamine sulfate.....	1	dipyridamole.....	102
DEPO-PROVERA		DIACOMIT.....	25	disopyramide phosphate.....	18
CONTRACEPTIVE.....	69	DIAPHRAGMS.....	108	disulfiram.....	139
DEPO-SUBQ PROVERA		DIASTAT ACUDIAL.....	24	DITROPAN XL.....	152
104.....	70	DIASTAT PEDIATRIC.....	24	DIURIL.....	91
DEPO-TESTOSTERONE.....	13	diazepam.....	18	divalproex sodium.....	28
DERMA-SMOOTH/FS		diazepam (anticonvulsant).....	24	DIVIGEL.....	97
BODY.....	82	diazepam intensol.....	18	DOCTOR MANZANILLA PE	
DERMA-SMOOTH/FS		diazoxide.....	32	SYRUP	
SCALP.....	82	DIBENZYLINE.....	41	ANTI HISTAMINE/DECONGESTA	
DERMASORB TA.....	82	DICLEGIS.....	36	NT.....	72
dermazene.....	77	diclofenac epolamine.....	77	dofetilide.....	19
DERMOTIC.....	136	diclofenac potassium.....	5	DOLOPHINE.....	10
DESCOVY.....	57	diclofenac sodium.....	5	DOMETUSS-DMX.....	72
desipramine hcl.....	30	diclofenac sodium (actinic		donepezil hydrochloride.....	139
desloratadine.....	38	keratoses).....	79	DOPTelet.....	103
desmopressin acetate.....	95	diclofenac sodium (ophth).....	134	DORAL.....	105
desmopressin acetate spray.....	95	diclofenac sodium (topical).....	77	doripenem.....	16
desmopressin acetate spray		diclofenac w/ misoprostol.....	5	dorzolamide hcl.....	134
refrigerated.....	95	dicloxacillin sodium.....	138	DORZOLAMIDE HCL.....	135
DESOGEN.....	67	dicyclomine hcl.....	148	dorzolamide hcl-timolol	
desogestrel & ethinyl		didanosine.....	57	maleate.....	130
estradiol.....	68	DIFFERIN.....	75	DOTHELLE DHA.....	121
desogestrel-ethinyl estradiol		DIFICID.....	108	dotti.....	97
(biphasic).....	68	diflorasone diacetate.....	83	DOVATO.....	57
DESONATE.....	82	DIFLUCAN.....	37	DOVONEX.....	79
desonide.....	82	diflunisal.....	9	doxazosin mesylate.....	42
DESOWEN.....	82	digitek.....	63	doxepin hcl.....	30
DESOXIMETASONE.....	82	digoxin.....	63	doxepin hcl (antipruritic).....	79
desoximetasone.....	82,83	dihydroergotamine		doxepin hcl (sleep).....	105
DESOXYN.....	1	mesylate.....	111	doxercalciferol.....	94
desvenlafaxine.....	30	DILANTIN.....	27	doxycycline (monohydrate).....	146
DESVENLAFAXINE ER.....	30	DILANTIN INFATABS.....	27	doxycycline (rosacea).....	88
desvenlafaxine succinate.....	30	DILANTIN-125.....	27	doxycycline hyclate.....	146
DETROL.....	152	DILATRATE SR.....	17		

doxylamine-pyridoxine.....	36	EFFEXOR XR.....	30	entecavir.....	59
DRISDOL.....	155	EFFIENT.....	102	ENTEREG.....	99
dronabinol.....	36	EFUDEX.....	79	ENTOCORT EC.....	70
drospirenone-ethinyl		ELAPRASE.....	94	ENTRESTO.....	63
estradiol.....	68	ELDEPRYL.....	54	ENTTY SPRAY EMULSION.....	88
drospirenone-ethinyl estradiol-		ELELYSO.....	102	enulose.....	99
levomefolate calcium.....	68	ELESTAT.....	135	ENVARBUS XR.....	116
DROXIA.....	103	ELESTRIN.....	97	EPANED.....	41
DRYSOL.....	88	eletriptan hydrobromide..	111	EPCLUSA.....	59
DUAC.....	75	ELFOLATE.....	90	EPICERAM.....	88
DUAVEE.....	96	ELIDEL.....	86	EPIDIOLEX.....	25
DUET DHA 400.....	121	ELIGARD.....	48	EPIDUO.....	75
DUET DHA BALANCED.....	121	ELIMITE.....	89	EPIFOAM.....	83
DUETACT.....	31	elimest.....	67	epinastine hcl (ophth).....	135
DUEXIS.....	5	ELIQUIS.....	23	EPINEPHRINE.....	155
duloxetine hcl.....	30	ELIQUIS STARTER PACK.....	23	epinephrine.....	155
DUOPA.....	53	ELIXOPHYLLIN.....	22	epinephrine	
DUPIXENT.....	85	ELLA.....	69	(anaphylaxis).....	154,155
DURAGESIC.....	10	ELMIRON.....	101	epinephrine hcl.....	21
duramorph.....	10	ELOCON.....	83	EPINEPHRINE HCL.....	155
duraxin.....	7	eluryng.....	69	EPIPEN 2-PAK.....	155
DUREX EXTRA		EMADINE.....	135	EPIPEN-JR 2-PAK.....	155
SENSITIVE.....	108	EMBEDA.....	10	epitol.....	25
DUREZOL.....	133	EMCYT.....	48	EPIVIR.....	57
dutasteride.....	101	EMEND.....	36	EPIVIR HBV.....	59
dutasteride-tamsulosin hcl.....	101	EMEND TRIPACK.....	36	eplerenone.....	44
DUTOPROL.....	43	EMGALITY.....	110	EPOGEN.....	103
DUZALLO.....	101	EMSAM.....	28	eprosartan mesylate.....	42
DYAZIDE.....	91	EMTRIVA.....	57	EPZICOM.....	57
DYMISTA.....	129	EMULSION SB.....	88	eq allergy relief.....	38,129
DYRENIUM.....	91	EMVERM.....	15	eq nicotine.....	143,144
e.e.s. 400.....	107	ENABLEX.....	152	eq nicotine lozenges.....	141
E.E.S. GRANULES.....	108	enalapril maleate.....	41	eq nicotine polacrilex..	141,142
EC-NAPROSYN.....	5	enalapril maleate &		eql nicotine polacrilex refill..	142
EC-NAPROXEN.....	5	hydrochlorothiazide.....	43	EQUETRO.....	54
econazole nitrate.....	77	ENBRACE HR.....	121	ERAXIS.....	36
ECOTRIN REGULAR		ENBREL.....	7	ERBITUX.....	47
STRENGTH.....	9	ENBREL MINI.....	7	ergocalciferol.....	155
ed-spaz.....	147	ENBREL SURECLICK.....	7	ergoloid mesylates.....	141
EDARBI.....	42	ENCARE.....	153	ERGOMAR.....	111
EDARBYCLOR.....	43	ENDARI.....	103	ergotamine w/ caffeine.....	111
EDECRIN.....	91	endocet.....	12	ERIVEDGE.....	48
EDLUAR.....	105	ENDOMETRIN.....	154	ERLEADA.....	48
EDURANT.....	57	enoxaparin sodium.....	23	erlotinib hcl.....	50
efavirenz.....	57	enpresse-28.....	66	ERTACZO.....	78
effer-k.....	114	entacapone.....	52	ertapenem sodium.....	16
EFFER-K.....	114				
effervescent pot chloride...	114				

ery.....	73	EUCRISA.....	88	felodipine.....	62
ery-tab.....	107	EURAX.....	89	FEM PH.....	153
ERYGEL.....	75	euthyrox.....	147	FEMARA.....	48
ERYPED 200.....	108	EVAMIST.....	97	FEMCAP.....	108
ERYPED 400.....	108	everolimus.....	50	FEMHRT LOW DOSE.....	96
erythrocin stearate.....	108	everolimus (immunosuppressant).....	116	FEMRING.....	154
erythromycin (acne aid).....	75	EVISTA.....	93	fenofibrate.....	39,40
erythromycin (ophth).....	132	EVOCLIN.....	75	FENOFIBRATE.....	40
erythromycin base.....	108	EVOTAZ.....	57	fenofibrate.....	40
erythromycin ethylsuccinate.....	108	EVOXAC.....	118	fenofibrate micronized.....	40
ESBRIET.....	145	EVZIO.....	35	FENOFIBRIC ACID.....	40
escitalopram oxalate.....	29	EXACTUSS.....	72	fenofibric acid.....	40
esgic.....	7	EXACTUSS TR.....	72	FENOPROFEN CALCIUM.....	5
ESGIC.....	7	EXALGO.....	10	fenoprofen calcium.....	6
esomeprazole magnesium.....	150	EXAPHEX TR.....	72	FENORTHO.....	6
ESOMEPRAZOLE STRONTIUM.....	150	EXELDERM.....	78	FENSOLVI.....	48
estazolam.....	105	EXELON.....	139	fentanyl.....	10
esterified estrogens & methyltestosterone.....	96	exemestane.....	48	fentanyl citrate.....	10
ESTRACE.....	97	EXFORGE.....	43	FENTORA.....	10
estradiol.....	97	EXFORGE HCT.....	43	FER-IN-SOL.....	104
estradiol & norethindrone acetate.....	96	EXJADE.....	34	ferosul.....	104
estradiol vaginal.....	154	EXODERM.....	78	FERRIPROX.....	34
estradiol valerate.....	97	EXTAVIA.....	140	ferrous sulfate.....	104
ESTRING.....	154	EXTINA.....	78	FERROUS SULFATE.....	104
ESTROGEL.....	97	ezetimibe.....	40	FETZIMA.....	30
estropipate.....	97	ezetimibe-simvastatin.....	39	FETZIMA TITRATION PACK.....	30
ESTROSTEP FE.....	68	FABIOR.....	75	fexmid.....	128
eszopiclone.....	105	FABRAZYME.....	94	FIBRICOR.....	40
ethacrynate sodium.....	91	FALESSA.....	68	FINACEA.....	88
ethacrynic acid.....	91	famciclovir.....	60	finasteride.....	101
ethambutol hcl.....	46	famotidine.....	149	FIORICET.....	8
ethosuximide.....	28	FANAPT.....	54	FIORICET/CODEINE.....	12
ethyl chloride.....	87	FANAPT TITRATION PACK.....	54	FIORINAL.....	8
ETHYL CHLORIDE/FINE STREAM.....	87	FANTASY LUBRICATED.....	108	FIORINAL/CODEINE #3.....	12
ETHYL CHLORIDE/MEDIUM STREAM.....	87	FANTASY LUBRICATED/SPERMICIDE.....	108	FIRAZYR.....	102
ethynodiol diacet & eth estrad.....	68	FARESTON.....	48	FIRDAPSE.....	45
ETHYOL.....	52	FARYDAK.....	50	FIRMAGON.....	48
etidronate disodium.....	92	FAZACLO.....	55	FIRST-LANSOPRAZOLE.....	150
etodolac.....	5	FC FEMALE CONDOM.....	108	FIRST-MOUTHWASH BLM.....	117
etonogestrel-ethinyl estradiol.....	69	FC2 FEMALE CONDOM.....	108	FIRST-OMEPRAZOLE.....	150
ETOPOPHOS.....	52	febuxostat.....	102	FIRVANQ.....	16
etoposide.....	52	felbamate.....	27	flac.....	136
		FELBATOL.....	27	FLAGYL.....	15
		FELDENE.....	5	FLAREX.....	133
				flavoxate hcl.....	153
				FLEBOGAMMA DIF.....	136

flecainide acetate.....	19	fluticasone propionate (nasal).....	130	FROVA.....	111
FLECTOR.....	77	fluticasone-salmeterol.....	22	frovatriptan succinate.....	111
FLOMAX.....	101	fluvastatin sodium.....	40	FURADANTIN.....	152
FLONASE ALLERGY RELIEF.....	130	fluvoxamine maleate.....	29	furosemide.....	91
FLONASE ALLERGY RELIEF CHILDRENS.....	130	FML.....	133	FUSION PLUS.....	104
FLONASE SENSIMIST.....	130	FML FORTE.....	133	FUZEON.....	57
FLORIVA PLUS.....	120	FML LIQUIFILM.....	133	fyavolv.....	96
FLOVENT DISKUS.....	20	FOCALIN.....	2	FYCOMPA.....	24
FLOVENT HFA.....	20	FOCALIN XR.....	2	g tussin ac.....	71
FLOXIN OTIC.....	135	folbic.....	90	gabapentin.....	25
floxuridine.....	47	FOLBIC RF.....	90	GABITRIL.....	27
FLUCELVAX QUADRIVALENT 2017-2018.....	153	FOLET DHA.....	122	GABLOFEN.....	128
FLUCELVAX QUADRIVALENT 2018-2019.....	153	FOLET ONE.....	122	GALAFOLD.....	94
FLUCELVAX QUADRIVALENT 2019-2020.....	153	folic acid.....	103	galantamine hydrobromide.....	139
fluconazole.....	37	FOLIVANE-F.....	104	GALZIN.....	115
fluconazole in dextrose.....	37	FOLIVANE-OB.....	122	GAMASTAN.....	136
flucytosine.....	36	FOLTIX.....	90	GAMASTAN S/D.....	136
fludarabine phosphate.....	47	fondaparinux sodium.....	23	GAMMAGARD LIQUID.....	136
fludrocortisone acetate.....	71	FORFIVO XL.....	28	GAMMAKED.....	136
FLUMADINE.....	60	formadon.....	56	GAMMAPLEX.....	137
flunisolide (nasal).....	130	formaldehyde.....	56	GAMUNEX-C.....	137
fluocinolone acetonide.....	83	FORTEO.....	92	GARDASIL 9.....	153
fluocinolone acetonide (otic).....	136	FORTESTA.....	13	GASTROCROM.....	98
fluocinonide.....	83	FOSAMAX.....	92	gatifloxacin (ophth).....	132
fluocinonide emulsified base.....	83	FOSAMAX PLUS D.....	92	GATTEX.....	100
FLUORABON.....	113	fosamprenavir calcium.....	57	gavilyte-c.....	106
fluoritab.....	113	FOSCAVIR.....	59	gavilyte-g.....	106
fluorometholone (ophth).....	133	fosinopril sodium.....	41	gavilyte-h.....	106
FLUOROPLEX.....	79	fosinopril sodium & hydrochlorothiazide.....	43	gavilyte-n/flavor pack.....	106
fluorouracil.....	47	fosphenytoin sodium.....	27	GEBAUERS INSTANT ICE.....	87
fluorouracil (topical).....	79	FOSRENOL.....	100	GEBAUERS PAIN EASE.....	87
fluoxetine hcl.....	29	FRAGMIN.....	23	GEBAUERS SPRAY AND STRETCH.....	87
fluoxetine hcl (pmdd).....	141	FREESTYLE FREEDOM LITE.....	110	GELCLAIR.....	118
FLUOXETINE HYDROCHLORIDE.....	29	FREESTYLE INSULINX BLOODGLUCOSE MONITORING SYSTEM.....	110	GELFILM OP.....	134
fluphenazine hcl.....	56	FREESTYLE INSULINX BLOODGLUCOSE TEST.....	89	GELNIQUE.....	152
flura-drops.....	113	FREESTYLE INSULINX BLOODGLUCOSE TEST STRIPS.....	89	GELNIQUE PUMP.....	152
flurandrenolide.....	83	FREESTYLE LITE BLOOD GLUCOSE MONITORING SYSTEM.....	110	gemcitabine hcl.....	47
flurazepam hcl.....	105	FREESTYLE LITE TEST STRIPS.....	89	GEMCITABINE HYDROCHLORIDE.....	47
flurbiprofen.....	6	FREESTYLE TEST STRIPS.....	90	gemfibrozil.....	40
flurbiprofen sodium.....	135			GEMZAR.....	47
flutamide.....	48			GENERESS FE.....	68
fluticasone propionate.....	83			gengraf.....	115
				GENOTROPIN.....	93
				GENOTROPIN MINIQUICK.....	93
				gentak.....	131

gentamicin in saline.....	3	GLYXAMBI.....	31	HETLIOZ.....	106
gentamicin sulfate.....	4	gnp nicotine gum.....	143	HEXALEN.....	46
gentamicin sulfate (ophth).....	132	GOCOVRI.....	53	HIPREX.....	152
gentamicin sulfate (topical).....	77	GOLYTELY.....	106	HISTEX-PE.....	72
GENVOYA.....	57	GONITRO.....	17	HIZENTRA.....	137
GEODON.....	54	gordons urea.....	85	homatropaire.....	131
geri-hydrolac 12.....	86	GORDONS UREA.....	85	homatropine hbr.....	131
gianvi.....	66	GRALISE.....	141	HORIZANT.....	141
GIAZO.....	99	GRALISE STARTER.....	141	humalog.....	33
GILENYA.....	140	granisetron hcl.....	35	HUMALOG.....	33
GILOTRIF.....	50	GRANIX.....	103	humalog kwikpen.....	33
GILPHEX TR.....	72	GRASTEK.....	3	humalog mix 50/50.....	33
GILTUSS.....	72	griseofulvin microsize.....	36	humalog mix 50/50 kwikpen.....	33
GILTUSS COUGH & COLD.....	72	griseofulvin ultramicrosize.....	36	HUMATROPE.....	93
GILTUSS SINUS & CONGESTION.....	72	guaifenesin dac.....	72	HUMATROPE COMBO PACK.....	93
GILTUSS TR.....	72	guaifenesin-codeine.....	72	HUMIRA.....	4
GLASSIA.....	145	guanfacine hcl.....	42	HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK.....	4
glatiramer acetate.....	140	guanfacine hcl (adhd).....	2	HUMIRA PEN.....	4
glatopa.....	140	GUANIDINE HCL.....	45	HUMIRA PEN-CD/UC/HS STARTER.....	4
GLEEVEC.....	50	GVOKE PFS.....	32	HUMIRA PEN-PS/UV STARTER.....	4
GLEOSTINE.....	46	GYNAZOLE-1.....	154	humulin 70/30.....	33
glimepiride.....	34	HAEGARDA.....	102	humulin 70/30 kwikpen.....	33
glipizide.....	34	HALAC.....	83	humulin n.....	33
glipizide xl.....	34	halcinonide.....	83	HUMULIN N.....	33
glipizide-metformin hcl.....	31	HALCION.....	105	humulin n kwikpen.....	33
GLUCAGEN DIAGNOSTIC.....	89	halobetasol propionate.....	83	humulin r.....	33
GLUCAGEN HYPOKIT.....	32	HALOG.....	83	humulin r u-500 (concentrated).....	33
GLUCAGON EMERGENCY KIT.....	32	haloperidol.....	55	humulin r u-500 kwikpen.....	33
GLUCAGON EMERGENCY KIT FOR LOW BLOOD SUGAR.....	32	haloperidol lactate.....	55	hyaluronate sodium (emollient).....	86
GLUCOPHAGE.....	32	HALOTIN.....	78	HYCAMTIN.....	52
GLUCOPHAGE XR.....	32	HARVONI.....	59	hydralazine hcl.....	45
GLUCOTROL.....	34	heartburn treatment 24 hour.....	150	HYDREA.....	52
GLUCOTROL XL.....	34	HECTOROL.....	94	HYDRO 35.....	85
GLUCOVANCE.....	31	HEMANGEOL.....	61	HYDRO 40 FOAM.....	85
GLUMETZA.....	32	HEMENATAL OB.....	122	hydrochlorothiazide.....	91
glyburide.....	34	HEMENATAL OB + DHA.....	122	HYDROCODONE BITARTRATE/ACETAMINOPHE N.....	12
glyburide micronized.....	34	heparin (porcine) in sodium chloride.....	23	hydrocodone polistirex- chlorpheniramine polistirex.....	72
glyburide-metformin.....	31	heparin sod (porcine) in d5w.....	24	hydrocodone w/ homatropine.....	71
GLYCATE.....	148	heparin sodium (porcine).....	24	hydrocodone- acetaminophen.....	12
glycopyrrolate.....	148	HEPARIN SODIUM/NACL 0.45%.....	24	hydrocodone-ibuprofen.....	12
GLYCOPYRROLATE.....	148	HEPARIN SODIUM/SODIUM CHLORIDE.....	24		
glydo.....	87	HEPARIN SODIUM/SODIUM CHLORIDE 0.9%.....	24		
GLYNASE.....	34	HEPSERA.....	59		
GLYSET.....	31				

hydrocortisone.....	70	IMITREX.....	111,112	ipratropium bromide (nasal)	129
hydrocortisone (intrarectal) ..	14	IMITREX STATDOSE		ipratropium-albuterol	22
hydrocortisone (rectal).....	15	REFILL.....	111	irbesartan	42
hydrocortisone (topical).....	83	IMITREX STATDOSE		irbesartan-hydrochlorothiazide	
hydrocortisone acetate		SYSTEM.....	111	.....	43
(rectal).....	15	IMODIUM A-D.....	34	IRESSA.....	50
hydrocortisone acetate w/		IMPAVIDO.....	15	ISENTRESS.....	57
pramoxine.....	14	IMURAN.....	116	ISENTRESS HD.....	57
hydrocortisone butyrate.....	83	inatal gt.....	120	ISOLYTE-S.....	113
hydrocortisone butyrate		INCRELEX.....	93	isometheptene-	
hydrophilic lipo base.....	83	INCRUSE ELLIPTA.....	19	dichloralphenazone-	
hydrocortisone valerate.....	84	indapamide.....	92	acetaminophen	111
hydrocortisone w/acetic		INDERAL LA.....	61	isoniazid	46
acid.....	136	INDERAL XL.....	61	ISONIAZID.....	46
hydromet.....	71	INDOCIN.....	6	isoniazid	46
hydromorphone hcl.....	10	indomethacin.....	6	ISOPTO ATROPINE.....	131
hydroxychloroquine sulfate ..	45	INFANATE BALANCE	122	ISOPTO CARPINE.....	131
hydroxyprogesterone		INFLECTRA.....	99	ISORDIL TITRADOSE.....	17
caproate.....	139	INGREZZA.....	140	isosorbide dinitrate	17
hydroxyurea.....	52	INHALER SPACERS.....	110	isosorbide mononitrate.....	17
hydroxyzine hcl.....	18	INLYTA.....	50	isotretinoin.....	75
hydroxyzine pamoate.....	18	INNOPRAN XL.....	61	isoxsuprine hcl.....	64
HYLINATE.....	86	INREBIC.....	50	isradipine.....	62
hyophen.....	151	INSPIRA.....	45	ISTALOL.....	131
hyoscyamine sulfate.....	148	INSULIN SYRINGES AND PEN		ISTODAX (OVERFILL).....	50
HYPER-SAL.....	73	NEEDLES.....	110	itraconazole.....	37
HYPERSAL.....	73	INTEGRA F.....	104	ivermectin.....	15
HYQVIA.....	137	INTELENCE.....	57	ivermectin (rosacea).....	88
HYZAAR.....	43	INTERMEZZO.....	105	JADENU.....	35
ibandronate sodium.....	92	INTRAROSA.....	153	JADENU SPRINKLE.....	34
IBRANCE.....	50	INTRON A.....	52	JAKAFI.....	50
ibu.....	5	INTUNIV.....	2	JALYN.....	101
ibudone.....	12	INVANZ.....	16	jantoven.....	23
ibuprofen.....	6	INVEGA.....	54	JANUMET.....	31
ICAR PEDIATRIC.....	104	INVEGA SUSTENNA.....	54	JANUMET XR.....	31
icatibant acetate.....	102	INVEGA TRINZA.....	54	JANUVIA.....	32
ICLUSIG.....	50	INVIRASE.....	57	JARDIANCE.....	34
IDHIFA.....	50	INVOKAMET.....	31	jevantique lo.....	96
ILEVRO.....	135	INVOKAMET XR.....	31	jinteli.....	96
ILIDERM.....	88	INVOKANA.....	33	JULUCA.....	57
ilotycin.....	131	iodoquimez-hc.....	77	JUXTAPID.....	40
ILUMYA.....	79	iodoquinol-hc.....	78	JYNARQUE.....	96
imatinib mesylate.....	50	iodoquinol-hydrocortisone in		k-effervescent.....	114
IMBRUVICA.....	50	aloe vehicle.....	78	K-PHOS.....	114
imipenem-cilastatin.....	16	iodoquinol-hydrocortisone-aloe		K-PHOS NEUTRAL.....	114
imipramine hcl.....	30	polysaccharide.....	78	K-PHOS NO 2.....	100
imipramine pamoate.....	30	IOPIDINE.....	131	k-sol.....	114
imiquimod.....	86	ipratropium bromide.....	19		

K-TAB.....	114	KINERET.....	4	LAMICTAL STARTER/TAKING	
KADIAN.....	10	kionex.....	117	CARBAMAZEPINE/NOT TAKING	
kaitlib fe.....	67	KISQALI.....	50	VALPROATE.....	26
KALETRA.....	57	KISQALI FEMARA 200		LAMICTAL STARTER/TAKING	
KALYDECO.....	145	DOSE.....	49	VALPROATE.....	26
KAMDOY.....	88	KISQALI FEMARA 400		LAMICTAL XR.....	26
KAMELEON LUBRICATED	108	DOSE.....	49	lamivudine.....	57
KAPVAY.....	2	KISQALI FEMARA 600		lamivudine (hbv).....	59
KARBINAL ER.....	37	DOSE.....	49	lamivudine-zidovudine.....	57
KAZANO.....	31	KITABIS PAK.....	4	lamotrigine.....	26
KEFLEX.....	65	KIVIK.....	88	LANCET.....	110
kelnor 1/35.....	66	KLARITY-A.....	132	LANOXIN.....	63
KENALOG.....	84	KLARON.....	75	LANOXIN PEDIATRIC.....	63
KEPIVANCE.....	52	klofensaid ii.....	77	lansoprazole.....	150
KEPPRA.....	25	KLONOPIN.....	24	lanthanum carbonate.....	100
KEPPRA XR.....	25	klor-con.....	114	LANTUS.....	33
KERALAC.....	85	klor-con 10.....	114	LANTUS SOLOSTAR.....	33
ketoconazole.....	37	klor-con m10.....	114	LASIX.....	91
ketoconazole (topical).....	78	klor-con m15.....	114	LASTACAPT.....	135
ketodan.....	77	klor-con sprinkle.....	114	latanoprost.....	135
ketoprofen.....	6	KORLYM.....	32	LATUDA.....	54
KETOROLAC		KOSHER PRENATAL PLUS		LAZANDA.....	10
TROMETHAMINE.....	6	IRON.....	122	LEDIPASVIR/SOFOSBUVIR	
ketorolac tromethamine.....	6	kp folic acid.....	103	.....	59
ketorolac tromethamine		KRINTAFEL.....	45	leflunomide.....	7
(ophth).....	135	KRISTALOSE.....	107	LENVIMA 10 MG DAILY	
KEVEYIS.....	91	KUVAN.....	94	DOSE.....	50
KEVZARA.....	4	KYLEENA.....	69	LENVIMA 12MG DAILY	
KHEDEZLA.....	30	l-methylfolate.....	90	DOSE.....	50
KIMONO COLORS.....	108	L-METHYLFOLATE CA/S-		LENVIMA 14 MG DAILY	
KIMONO LUBRICATED.....	108	ALGAL.....	90	DOSE.....	50
KIMONO MICRO THIN.....	108	L-METHYLFOLATE		LENVIMA 18 MG DAILY	
KIMONO MICRO THIN PLUS		FORTE.....	90	DOSE.....	50
SPERMICIDE		labetalol hcl.....	61	LENVIMA 20 MG DAILY	
LUBRICATED.....	108	LAC-HYDRIN.....	86	DOSE.....	50
KIMONO PLUS SPERMICIDE		LAC-HYDRIN TWELVE.....	86	LENVIMA 24 MG DAILY	
LUBRICATED.....	108	LACRISERT.....	130	DOSE.....	50
KIMONO PLUS		lactated ringer's		LENVIMA 4 MG DAILY	
SPERMICIDE/LUBRICATED		(irrigation).....	117	DOSE.....	50
.....	109	lactic acid (ammonium		LENVIMA 8 MG DAILY	
KIMONO PS LUBRICATED	109	lactate).....	86	DOSE.....	50
KIMONO PS PLUS		LACTULOSE.....	107	LESCOL XL.....	40
SPERMICIDE/LUBRICATED		lactulose.....	107	LETAIRIS.....	64
.....	109	lactulose (encephalopathy).....	99	letrozole.....	48
KIMONO SENSATION		LAMICTAL.....	26	leucovorin calcium.....	52
LUBRICATED.....	109	LAMICTAL CHEWABLE		LEUKERAN.....	46
KIMONO SENSATION PLUS		DISPERSIBLE.....	25	LEUKINE.....	103
SPERMICIDE		LAMICTAL ODT.....	25	leuprolide acetate.....	48
LUBRICATED.....	109	LAMICTAL STARTER/NOT		LEUPROLIDE	
KIMONO SPECIAL.....	109	TAKING		ACETATE/BUPIVACAINE	
		CARBAMAZEPINE.....	25	HYDROCHLORIDE.....	48
				levalbuterol hcl.....	22

levalbuterol tartrate.....	22	LINZESS.....	99	LOTREL.....	43
LEVAQUIN.....	98	LIORESAL.....		LOTRISONE.....	78
LEVVID.....	148	INTRATHECAL.....	128	LOTRONEX.....	99
LEVEMIR.....	33	liothyronine sodium.....	147	lovastatin.....	40
LEVEMIR FLEXTOUCH.....	33	LIPITOR.....	40	LOVAZA.....	39
levetiracetam.....	26	LIPOFEN.....	40	LOVENOX.....	24
levobunolol hcl.....	131	lisinopril.....	41	loxapine succinate.....	55
levocarnitine (metabolic modifiers).....	94	lisinopril & hydrochlorothiazide.....	43	luliconazole.....	78
levocetirizine dihydrochloride.....	38	LITHIUM.....	54	LUMIGAN.....	135
levofloxacin.....	98	lithium carbonate.....	54	LUMIZYME.....	94
levofloxacin (ophth).....	132	LITHOBID.....	54	LUNESTA.....	105
LEVOMEFOLATE CALCIUM ALGAL POWDER.....	90	LITHOSTAT.....	101	LUPANETA PACK.....	94
levonorgestrel & eth estradiol.....	68	LIVALO.....	40	LUPRON DEPOT (1- MONTH).....	48
levonorgestrel (emergency oc).....	69	LO LOESTRIN FE.....	68	LUPRON DEPOT (3- MONTH).....	48
levonorgestrel-eth estradiol (triphasic).....	68	LOCOID.....	84	LUPRON DEPOT (4- MONTH).....	48
levonorgestrel-ethinyl estradiol (91-day).....	68	LOCOID LIPOCREAM.....	84	LUPRON DEPOT (6- MONTH).....	48
levonorgestrel-ethinyl estradiol (continuous).....	68	LODINE.....	6	LUPRON DEPOT-PED (1- MONTH).....	94
levothyroxine sodium.....	147	LODOSYN.....	52	LUPRON DEPOT-PED (3- MONTH).....	94
LEVSIN.....	148	LOESTRIN 1.5/30-21.....	68	LUXIQ.....	84
LEVSIN/SL.....	148	LOESTRIN 1/20-21.....	68	LUZU.....	78
LEXAPRO.....	29	LOESTRIN FE 1.5/30.....	68	LYNPARZA.....	50
LEXIVA.....	57	LOESTRIN FE 1/20.....	68	LYRICA.....	26
LIALDA.....	99	LOKELMA.....	117	LYSODREN.....	49
LIBRAX.....	148	LOMOTIL.....	34	LYSTEDA.....	104
lido-k.....	87	LONSURF.....	49	M-NATAL PLUS.....	122
lidocaine.....	87	loperamide hcl.....	34	M-VIT.....	122
lidocaine hcl.....	87	LOPID.....	40	MACROBID.....	152
lidocaine hcl (mouth-throat).....	117	lopinavir-ritonavir.....	57	MACRODANTIN.....	152
lidocaine pak.....	87	LOPRESSOR.....	61	mafenide acetate.....	80
lidocaine-hydrocortisone acetate (rectal).....	14	LOPRESSOR HCT.....	43	MAGNEBIND 400.....	113
lidocaine-prilocaine.....	88	LOPROX.....	78	magnesium sulfate.....	113,114
LIDODERM.....	88	LOPROX SHAMPOO.....	78	MAGNESIUM SULFATE.....	114
LIDODOSE.....	88	lorazepam.....	18	MAKENA.....	139
LIDODOSE PEDIATRIC BULK PACK.....	88	lorazepam intensol.....	18	MALARONE.....	45
lidopin.....	87	LORBRENA.....	50	malathion.....	89
LIDORX.....	88	lorcet.....	12	maprotiline hcl.....	28
LILETTA.....	69	LORTAB.....	12	MARINOL.....	36
LINCOCIN.....	17	lorzone.....	128	MARNATAL-F.....	122
lincomycin hcl.....	17	losartan potassium.....	42	MARPLAN.....	28
lindane.....	89	losartan potassium & hydrochlorothiazide.....	43	MATULANE.....	52
linezolid.....	17	LOSEASONIQUE.....	68	matzim la.....	62
		LOTEMAX.....	133	MAVENCLAD.....	140
		LOTENSIN.....	41	MAVYRET.....	60
		LOTENSIN HCT.....	43		
		loteprednol etabonate.....	133		

MAXALT.....	112	MESTINON.....	45	METOPROLOL SUCCINATE	
MAXALT-MLT.....	112	MESTINON TIMESPAN... 45		ER/HYDROCHLOROTHIAZIDE	
MAXIDEX.....	133	metadate er.....	2	.....	43
MAXIPIME.....	66	metaproterenol sulfate.... 22		metoprolol tartrate.....	61
MAXITROL.....	133	metaxall.....	128	METROCREAM.....	88
MAXX LUBRICATED.....	109	metaxalone.....	128	METROGEL.....	89
MAXX PLUS SPERMICIDE		metformin hcl.....	32	METROGEL-VAGINAL.... 154	
LUBRICATED.....	109	METFORMIN		METROLOTION.....	89
MAXZIDE.....	91	HYDROCHLORIDE.....	32	metronidazole.....	15
MAXZIDE-25.....	91	methadone hcl.....	10	metronidazole (topical).... 89	
MAYZENT.....	140	METHADONE HCL.....	11	metronidazole in nacl..... 15	
MAYZENT STARTER		methadone hcl.....	11	metronidazole vaginal..... 154	
PACK.....	140	methadone hcl intensol.... 10		mexiletine hcl.....	19
mccarnitine.....	94	methadose.....	10	mezparox-hc.....	81
meclizine hcl.....	35	methamphetamine hcl..... 1		MIACALCIN.....	92
meclofenamate sodium..... 6		methazolamide.....	91	micafungin sodium.....	36
MEDROL.....	70,71	methenamine hippurate.. 152		MICARDIS.....	42
MEDROL DOSEPAK.....	70	methenamine mandelate. 152		MICARDIS HCT.....	44
MEDROX-RX.....	87	methergine.....	136	miconazole 3.....	154
medroxyprogesterone		methimazole.....	146	miconazole-zinc oxide-white	
acetate.....	139	METHITEST.....	13	petrolatum.....	78
medroxyprogesterone acetate		methocarbamol.....	128	MICROZIDE.....	92
(contraceptive).....	70	METHOTREXATE.....	4	midazolam hcl.....	105
mefenamic acid.....	6	methotrexate sodium..... 47		midodrine hcl.....	155
mefloquine hcl.....	45	methoxsalen rapid.....	79	migergot.....	111
MEGACE ES.....	139	methscopolamine		miglitol.....	31
megestrol acetate.....	49	bromide.....	148	miglustat.....	102
megestrol acetate		methyclothiazide.....	92	MIGRANAL.....	111
(appetite).....	139	methyldopa.....	42	MILLIPRED.....	71
MEKINIST.....	50	methyldopa &		MILLIPRED DP.....	71
MEKTOVI.....	50	hydrochlorothiazide..... 43		MINASTRIN 24 FE.....	68
melodetta 24 fe.....	67	methyldopate hcl.....	42	MINIPRESS.....	42
meloxicam.....	6	methylergonovine		minitran.....	17
melphalan.....	46	maleate.....	136	MINIVELLE.....	97
melphalan hcl.....	46	METHYLIN.....	2	MINOCIN.....	146
memantine hcl.....	139	methylphenidate hcl..... 2,3		minocycline hcl.....	146
MENEST.....	97	METHYLPHENIDATE		minoxidil.....	45
MENOSTAR.....	97	HYDROCHLORIDE ER.... 3		MIRALAX.....	107
meperidine hcl.....	10	methylprednisolone..... 71		MIRAPEX.....	53
MEPHYTON.....	155	methyltestosterone..... 13		MIRAPEX ER.....	53
meprobamate.....	18	metipranolol.....	131	MIRCERA.....	103
MEPRON.....	16	metoclopramide hcl..... 98		MIRCETTE.....	68
mercaptapurine.....	47	METOCLOPRAMIDE ODT 98		MIRENA.....	69
meropenem.....	16	metolazone.....	92	mirtazapine.....	28
MERREM.....	16	metopic.....	85	MIRVASO.....	89
mesalamine.....	99	METOPIRONE.....	89	misoprostol.....	151
mesalamine w/ cleanser.... 99		metoprolol &		MITIGARE.....	102
MESNEX.....	52	hydrochlorothiazide..... 43			
		metoprolol succinate..... 61			

mitoxantrone hcl.....	49	MYFORTIC.....	116	NATURE-THROID.....	147
MOBIC.....	6	MYKIDZ IRON 10.....	104	NATURE-THROID NT-2.5.....	147
modafinil.....	3	MYLERAN.....	46	NAYZILAM.....	24
moderiba.....	59	MYNATAL ADVANCE.....	122	NEBUPENT.....	15
MODERIBA 1200 DOSE		MYNATAL.....		nebusal.....	73
PACK.....	60	ULTRACAPLET.....	122	NEBUSAL.....	73
moexipril hcl.....	41	MYNATE 90 PLUS.....	122	NEEVO DHA.....	122
moexipril-hydrochlorothiazide		MYRBETRIQ.....	153	nefazodone hcl.....	29
.....	44	MYSOLINE.....	26	neo-polycin.....	132
molindone hcl.....	56	MYTESI.....	34	neo-polycin hc.....	133
mometasone furoate.....	84	nabumetone.....	6	NEO-SYNALAR.....	77
mometasone furoate		nadolol.....	62	neomycin sulfate.....	4
(nasal).....	130	nadolol &		neomycin-bacitracin zn-	
mondoxyne nl.....	146	bendroflumethiazide.....	44	polymyxin.....	132
montelukast sodium.....	19	NAFCILLIN.....	138	neomycin-polymy-	
MONUROL.....	152	nafcillin sodium.....	138	dexameth.....	133
morgidox 1x100mg.....	146	NAFCILLIN SODIUM.....	138	neomycin-polymyxin-gramicidin	
morphine sulfate.....	11	nafcillin sodium.....	138	.....	132
morphine sulfate beads.....	11	naftifine hcl.....	78	neomycin-polymyxin-hc	
MOTOFEN.....	34	NAFTIN.....	78	(ophth).....	133
MOVANTIK.....	99	NAGLAZYME.....	94	neomycin-polymyxin-hc	
MOVIPREP.....	106	NALFON.....	6	(otic).....	136
MOXATAG.....	137	naloxone hcl.....	35	neomycin/polymyxin b gu.....	101
MOXEZA.....	132	naltrexone hcl.....	35	NEONATAL COMPLETE.....	122
moxifloxacin hcl.....	98	NAMENDA.....	139	NEONATAL PLUS.....	122
moxifloxacin hcl (ophth).....	132	NAMENDA TITRATION		NEONATAL VITAMIN.....	122
MOZOBIL.....	104	PAK.....	139	NEORAL.....	116
MS CONTIN.....	11	NAMENDA XR.....	139	NEOSPORIN.....	132
MUCOTROL.....	118	NAMENDA XR TITRATION		NEOTUSS PLUS.....	72
MULPLETA.....	103	PACK.....	139	NEPTAZANE.....	91
MULTAQ.....	19	NAPRELAN.....	6	NERLYNX.....	51
MULTI PRENATAL.....	122	NAPROSYN.....	6	NESINA.....	32
multi-vit/iron/fluoride.....	120	naproxen.....	6	NESTABS.....	123
multi-vitamin/fluoride drops.....	118	naproxen dr.....	5	NESTABS ABC.....	122
MULTIVITAMIN WITH		naproxen sodium.....	6	NESTABS DHA.....	122
FLUORIDE.....	118	naproxen-esomeprazole		NESTABS ONE.....	123
multivitamin with fluoride.....	118	magnesium.....	6	neuac.....	73
multivitamin/fluoride.....	119	naratriptan hcl.....	112	NEULASTA.....	103
multivitamins/fluoride.....	119	NARCAN.....	35	NEULASTA ONPRO KIT.....	103
mupirocin.....	77	NARDIL.....	28	NEUPOGEN.....	103
MYALEPT.....	94	NASONEX.....	130	NEUPRO.....	53
MYAMBUTOL.....	46	NATACHEW.....	122	NEURONTIN.....	26
MYCAMINE.....	36	NATACYN.....	132	NEUTROGENA CLEAR PORE	
MYCOBUTIN.....	46	NATAZIA.....	68	CLEANSER/MASK.....	75
mycophenolate mofetil.....	116	nateglinide.....	33	NEVANAC.....	135
mycophenolate mofetil hcl.....	116	NATELLE ONE.....	122	nevirapine.....	57
mycophenolate sodium.....	116	NATPARA.....	92	NEXA PLUS.....	123
MYDRIACYL.....	131	NATROBA.....	89	NEXAVAR.....	51
				NEXIUM.....	150

NEXIUM 24HR.....	150	norethin acet & estrad-fe... 68	OB COMPLETE PETITE... 123
NEXIUM 24HR CLEAR		norethindrone & ethinyl	OB COMPLETE PREMIER.123
MINIS.....	150	estradiol-fe..... 68	OB COMPLETE/DHA..... 123
NEXPLANON.....	69	norethindrone	OBSTETRIX ONE..... 123
niacin (antihyperlipidemic)...	41	(contraceptive)..... 70	OCALIVA..... 98
NIASPAN.....	41	norethindrone acet & eth	OCTAGAM..... 137
nicardipine hcl.....	62	estra..... 68	octreotide acetate..... 95
NICODERM CQ.....	144	norethindrone acetate.... 139	OCUFLOX..... 132
NICORETTE.....	144	norethindrone acetate-ethinyl	ODACTRA..... 3
NICORETTE MINI.....	144	estradiol..... 96	ODEFSEY..... 58
NICORETTE STARTER		NORGESIC FORTE..... 129	ODOMZO..... 48
KIT.....	145	norgestimate-ethinyl	OFEV..... 145
nicotine.....	145	estradiol..... 68	ofloxacin..... 98
nicotine polacrilex.....	145	norgestimate-ethinyl estradiol	ofloxacin (ophth)..... 132
NICOTINE TRANSDERMAL		(triphasic)..... 68	ofloxacin (otic)..... 135
SYSTEM.....	145	NORITATE..... 89	ogestrel..... 67
NICOTROL INHALER.....	145	NORMOSOL-R..... 113	olanzapine..... 55
NICOTROL NS.....	145	NORPACE..... 18	olanzapine-fluoxetine hcl... 140
nifedipine.....	62	NORPACE CR..... 18	olmesartan medoxomil..... 42
NILANDRON.....	49	NORPRAMIN..... 30	olmesartan medoxomil-
nilutamide.....	49	NORTHERA..... 155	amlodipine-hydrochlorothiazide
nimodipine.....	62	nortrel 0.5/35 (28)..... 67	..... 44
NINLARO.....	51	nortriptyline hcl..... 30	olmesartan medoxomil-
nisoldipine.....	63	NORVASC..... 63	hydrochlorothiazide..... 44
nitisinone.....	94	NORVIR..... 58	olopatadine hcl..... 135
NITRO-BID.....	17	NOXAFIL..... 37	olopatadine hcl (nasal).... 129
NITRO-DUR.....	17	np thyroid 120..... 147	OLUX..... 84
nitro-time.....	17	NUBEQA..... 49	OLUX-E..... 84
nitrofurantoin.....	152	NUCORT..... 84	OMECLAMOX-PAK..... 151
nitrofurantoin macrocrystal		NUCYNTA..... 11	omega-3-acid ethyl esters... 39
nitrofurantoin monohyd		NUCYNTA ER..... 11	omeppi..... 151
macro.....	152	NUDEXTA..... 141	omeprazole..... 151
nitroglycerin.....	17	NULOJIX..... 116	OMEPRAZOLE + SYRSPEND
NITROLINGUAL		NULYTELY/FLAVOR	SFALKA..... 151
PUMPSPRAY.....	17	PACKS..... 106	omeprazole-sodium
NITROMIST.....	17	NUPLAZID..... 54	bicarbonate..... 151
NITROSTAT.....	17	NUTROPIN AQ NUSPIN	OMNARIS..... 130
NITYR.....	94	10..... 93	OMNIPRED..... 133
NIVA-PLUS.....	123	NUTROPIN AQ NUSPIN	OMNITROPE..... 93
NIVESTYM.....	103	20..... 93	ondansetron..... 35
NIZATIDINE.....	149	NUTROPIN AQ NUSPIN 5.93	ondansetron hcl..... 35
nizatidine.....	149	NUVARING..... 69	ONETOUCH ULTRA..... 90
NIZORAL.....	78	NUVIGIL..... 3	ONETOUCH ULTRA 2..... 110
NOCTIVA.....	95	NYMALIZE..... 63	ONETOUCH ULTRA MINI... 110
nolix.....	81	nystatin..... 36	ONETOUCH VERIO..... 110
NON PREFERRED TEST		nystatin (mouth-throat)... 117	ONETOUCH VERIO FLEX
STRIPS.....	90	nystatin (topical)..... 78	BLOOD GLUCOSE
NORCO.....	12	nystatin-triamcinolone.... 78	MONITORING SYSTEM... 110
NORDITROPIN FLEXPRO..	93	O-CAL FA..... 123	
		OB COMPLETE ONE.... 123	

ONETOUCH VERIO IQ BLOOD GLUCOSE MONITORING SYSTEM.....	110	OSMOLEX ER.....	53	PARAGARD INTRAUTERINE COPPER CONTRACEPTIVE T380A.....	69
ONETOUCH VERIO SYNC BLOODGLUCOSE MONITORING SYSTEM....	110	OSMOPREP.....	107	paregoric.....	34
ONETOUCH VERIO TEST STRIPS.....	90	OSPHENA.....	93	PAREMYD.....	135
ONEVITE.....	118	OTEZLA.....	7	paricalcitol.....	95
ONFI.....	24	OTICIN HC NR.....	136	PARLODEL.....	53
OPANA.....	11	OTOVEL.....	136	PARNATE.....	28
opium tincture.....	34	OTREXUP.....	4	paroex.....	117
OPSUMIT.....	64	OVACE PLUS.....	80	paromomycin sulfate.....	4
OPTIONS CONCEPTROL VAGINAL CONTRACEPTIVE.....	153	OVACE PLUS WASH.....	80	paroxetine hcl.....	29
OPTIONS GYNOL II VAGINALCONTRACEPTIVE	153	OVACE WASH.....	80	paroxetine mesylate (vasomotor).....	145
ORACEA.....	89	OVIDE.....	89	PASER.....	46
ORACIT.....	100	OXACILLIN SODIUM....	138	PATADAY.....	135
ORAFATE.....	118	oxacillin sodium.....	138	PATANASE.....	129
ORALAIR.....	3	oxandrolone.....	13	PATANOL.....	135
ORALAIR ADULT SAMPLE KIT.....	3	oxaprozin.....	6	PAXIL.....	29
ORALAIR ADULT STARTER PACK.....	3	OXAYDO.....	11	PAXIL CR.....	29
oralone dental paste.....	117	oxazepam.....	18	pediatric vitamins acd w/ fluoride.....	120
ORAP.....	141	oxcarbazepine.....	26	peg 3350-kcl-sod bicarb-sod chloride-sod sulfate.....	106
ORAPRED ODT.....	71	OXERVATE.....	133	peg 3350-potassium chloride-sod bicarbonate-sod chloride...	106
ORAVIG.....	117	oxiconazole nitrate.....	78	PEGANONE.....	27
orazinc.....	115	OXISTAT.....	78	PEGASYS.....	60
ORENCIA.....	7	OXSORALEN ULTRA....	79	PEGASYS PROCLICK.....	60
ORENCIA CLICKJECT.....	7	OXTELLAR XR.....	26	PEGINTRON.....	60
ORENITRAM.....	64	oxybutynin chloride.....	152	penicillamine.....	115
ORFADIN.....	95	oxycodone hcl.....	11	penicillin g potassium.....	137
ORKAMBI.....	145	oxycodone w/ acetaminophen.....	12	PENICILLIN G POTASSIUM IN ISO-OSMOTIC.....	137
orphenadrine citrate.....	128	oxycodone-aspirin.....	12	DEXTROSE.....	137
orphenadrine w/ aspirin & caff.....	129	oxycodone-ibuprofen.....	12	PENICILLIN G PROCAINE.....	137
ORTHO MICRONOR.....	70	oxymorphone hcl.....	11	penicillin g sodium.....	137
ORTHO TRI-CYCLEN.....	68	OXYTROL.....	152	penicillin v potassium.....	137
ORTHO TRI-CYCLEN LO...	68	OXYTROL FOR WOMEN	152	PENLEN.....	88
ORTHO-CYCLEN.....	69	OZEMPIC.....	32	PENNSAID.....	77
ORTHO-NOVUM 1/35.....	69	pacerone.....	19	pentamidine isethionate....	15
ORTHO-NOVUM 7/7/7.....	69	paliperidone.....	55	PENTASA.....	99
oscimin.....	147	palonosetron hcl.....	35	pentazocine w/ naloxone....	13
oscimin sr.....	147	PALONOSETRON HYDROCHLORIDE.....	35	pentoxifylline.....	102
oseltamivir phosphate.....	60	PALYNZIQ.....	95	PEPCID.....	149
OSENI.....	31	PAMELOR.....	30	PEPCID AC MAXIMUM STRENGTH.....	149
		pamidronate disodium.....	92	PERCOCET.....	12
		PAMIDRONATE DISODIUM.....	92	PERFOROMIST.....	22
		PANCREAZE.....	90	PERIDEX.....	117
		PANDEL.....	84	perindopril erbumine.....	41
		PANRETIN.....	79		
		pantoprazole sodium.....	151		

permethrin.....	89	PLASMA-LYTE A.....	113	potassium chloride microencapsulated crystals er.....	114
perphenazine.....	56	PLASMA-LYTE-148.....	113	potassium chloride proamp.....	114
perphenazine-amitriptyline.....	140	PLAVIX.....	102	potassium citrate (alkalinizer).....	100
PERSERIS.....	55	PLEGRIDY.....	140	potassium citrate-citric acid.....	100
PERTZYE.....	90	PLEGRIDY STARTER PACK.....	140	POVIDONE IODINE.....	132
PEXEVA.....	29	PLENVU.....	106	PR NATAL 400 EC.....	123
pfizerpen.....	137	PLEXION.....	76	PR NATAL 430.....	123
phenadoz.....	38	PLEXION CLEANSER.....	75	PR NATAL 430 EC.....	123
phenazo.....	101	PLEXION CLEANSING CLOTHS.....	76	PRADAXA.....	24
phenazopyridine hcl.....	101	PNV FOLIC ACID + IRON MULTIVITAMIN.....	123	PRALUENT.....	41
phenelzine sulfate.....	28	PNV OB+DHA.....	123	pramegel hcl.....	87
PHENERGAN.....	38	PNV PRENATAL PLUS MULTIVITAMIN.....	123	pramipexole dihydrochloride.....	53
phenobarbital.....	105	PNV TABS 29-1.....	123	PRAMOSONE.....	84
phenoxybenzamine hcl.....	41	pnv-dha.....	120	PRAMOSONE E.....	84
phenylephrine hcl (mydriatic).....	131	PNV-DHA+DOCUSATE.....	123	PRAMOTIC.....	136
PHENYTEK.....	27	PNV-OMEGA.....	123	pramoxine-hc.....	84
phenytoin.....	27	pnv-select.....	120	PRANDIN.....	33
phenytoin infatabs.....	27	PNV-TOTAL.....	123	prasugrel hcl.....	102
phenytoin sodium.....	28	PODOCON 25 IN BENZOIN TINCTURE.....	86	PRAVACHOL.....	40
PHLAG SPRAY.....	88	podofilox.....	86	pravastatin sodium.....	40
PHOSLYRA.....	100	POLY-VI-FLOR.....	120	praziquantel.....	15
phosphasal.....	151	POLY-VI-FLOR/IRON.....	120	prazosin hcl.....	42
PHOSPHOLINE IODIDE.....	131	polyethylene glycol 3350.....	107	PRECISION XTRA.....	90
physiolyte.....	117	polymyxin b sulfate.....	17	PRECISION XTRA BLOOD GLUCOSE TEST STRIPS.....	90
phytonadione.....	155	polymyxin b-trimethoprim.....	132	PRECOSE.....	31
PICATO.....	79	POLYTRIM.....	132	PRED FORTE.....	134
PIFELTRO.....	58	POMALYST.....	49	PRED MILD.....	134
pilocarpine hcl.....	131	posaconazole.....	37	PRED-G.....	134
pilocarpine hcl (oral).....	118	pot & sod citrates w/citric ac.....	100	PRED-G S.O.P.....	134
pimecrolimus.....	86	pot phosphate monobasic w/ sod phosphate dibasic & monobasic.....	114	prednicarbate.....	84
pimozide.....	141	POTABA.....	155	prednisolone.....	71
pindolol.....	62	potassium aminobenzoate.....	155	prednisolone acetate (ophth).....	134
pioglitazone hcl.....	32	potassium bicarb & chloride.....	114	PREDNISOLONE ACETATE P- F.....	134
pioglitazone hcl-glimepiride.....	31	potassium bicarbonate.....	114	prednisolone sodium phosphate.....	71
pioglitazone hcl-metformin hcl.....	31	potassium chloride.....	114,115	PREDNISOLONE SODIUM PHOSPHATE.....	134
piperacillin sodium-tazobactam sodium.....	138	POTASSIUM CHLORIDE.....	115	prednisone.....	71
PIQRAY 200MG DAILY DOSE.....	51	potassium chloride.....	115	PREDNISONE INTENSOL.....	71
PIQRAY 250MG DAILY DOSE.....	51	potassium chloride in nacl.....	113	PREFERAOB +DHA.....	123
PIQRAY 300MG DAILY DOSE.....	51			PREFEST.....	96
piroxicam.....	6			pregabalin.....	26
PLAN B ONE-STEP.....	69			PREMARIN.....	97,154
PLAQUENIL.....	45				

PREMESISRX.....	124	primaquine phosphate.....	45	propantheline bromide.....	148
PREMIUM CONDOMS		PRIMAQUINE		proparacaine hcl.....	133
LUBRICATED.....	109	PHOSPHATE.....	45	propranolol &	
PREMPHASE.....	96	PRIMAXIN IV.....	16	hydrochlorothiazide.....	44
PREMPRO.....	96	primidone.....	26	propranolol hcl.....	62
PRENA 1 TRUE.....	124	PRIMLEV.....	12	propylthiouracil.....	146
PRENA1 PEARL.....	124	PRIMSOL.....	15	PROSCAR.....	101
PRENAISSANCE.....	124	PRINIVIL.....	41	PROTHELIAL.....	118
PRENAISSANCE		PRISTIQ.....	30	PROTONIX.....	151
BALANCE.....	124	PRIVIGEN.....	137	PROTOPIC.....	86
PRENAISSANCE HARMONY		PROAIR HFA.....	22	protriptyline hcl.....	31
DHA.....	124	PROAIR RESPIClick.....	22	PROVENTIL HFA.....	22
PRENAISSANCE NEXT.....	124	probenecid.....	102	PROVERA.....	139
PRENAISSANCE NEXT-B.....	124	procainamide hcl.....	18	PROVIDA DHA.....	125
PRENAISSANCE PLUS.....	124	PROCARDIA.....	63	PROVIDA OB.....	125
PRENATA.....	124	PROCARDIA XL.....	63	PROVIGIL.....	3
prenatabs rx.....	120	procentra.....	1	PROZAC.....	29
PRENATAL.....	124,125	prochlorperazine.....	56	PRUDOXIN.....	79
prenatal 19.....	120	prochlorperazine maleate.....	56	pseudoephed-cpm w/	
PRENATAL 19.....	124	PROCORT.....	14	hydrocod.....	73
PRENATAL LOW IRON.....	124	PROCRIT.....	103	PSORCON.....	84
PRENATAL ONE DAILY.....	124	procto-med hc.....	14	PULMICORT.....	21
PRENATAL PLUS.....	124	PROCTOCORT.....	15	PULMICORT	
PRENATAL PLUS IRON.....	124	PROCTOFOAM HC.....	14	FLEXHALER.....	20,21
PRENATAL VITAMIN.....	125	PROCYSBI.....	101	pulmosal.....	73
PRENATAL VITAMINS PLUS		profeno.....	5	PULMOZYME.....	145
LOW IRON.....	125	progesterone.....	139	PURIXAN.....	47
PRENATAL-U.....	125	progesterone micronized.....	139	PYLERA.....	151
PRENATE.....	125	PROGLYCEM.....	32	pyrazinamide.....	46
PRENATE AM.....	125	PROGRAF.....	116	PYRIDIDIUM.....	101
PRENATE DHA.....	125	PROLASTIN-C.....	145	pyridostigmine bromide.....	45
PRENATE ELITE.....	125	PROLATE.....	12	pyrimethamine.....	45
PRENATE ESSENTIAL.....	125	PROLENSA.....	135	QBRELIS.....	41
PRENATE MINI.....	125	PROLIA.....	92	qc allergy relief childrens.....	38
PRENATE PIXIE.....	125	PROMACTA.....	103	QNASL.....	130
PREPLUS.....	125	promethazine &		QNASL CHILDRENS.....	130
PREPOPIK.....	106	phenylephrine.....	72	QUALAQUIN.....	45
PREVACID.....	151	promethazine hcl.....	38,39	QUARTETTE.....	69
PREVACID 24HR.....	151	promethazine vc plain.....	71	quazepam.....	105
PREVACID SOLUTAB.....	151	promethazine vc/codeine.....	71	QUDEXY XR.....	26
prevalite.....	39	promethazine w/codeine.....	72	QUESTRAN.....	39
previfem.....	67	promethazine-dm.....	73	QUESTRAN LIGHT.....	39
PREVYMIS.....	59	promethazine-phenylephrine-		quetiapine fumarate.....	55
PREZCOBIX.....	58	codeine.....	73	QUFLORA GUMMIES.....	120
PREZISTA.....	58	promethegan.....	38	QUFLORA PEDIATRIC.....	120
PRIFTIN.....	46	PROMETRIUM.....	139	QUILLIVANT XR.....	3
PRIOSEC.....	151	propafenone hcl.....	19	quinapril hcl.....	41
PRIMACARE.....	125				

quinapril-hydrochlorothiazide	44	RELEXXII	3	RILUTEK	130
quinidine gluconate	18	RELISTOR	100	riluzole	130
quinidine sulfate	18	RELNATE DHA	125	rimantadine hydrochloride	60
quinine sulfate	45	RELPAK	112	ringer's irrigation	117
QUINJA	78	REMERON	28	RINVOQ	4
QVAR REDIHALER	21	REMERON SOLTAB	28	RIOMET	32
R-NATAL OB	125	REMICADE	99	risedronate sodium	92
ra nicotine	142	REMODULIN	64	RISPERDAL	55
rabeprazole sodium	151	RENAGEL	100	RISPERDAL CONSTA	55
RABEPRAZOLE SODIUM DR		REVELA	100	risperidone	55
SPRINKLE	151	repaglinide	33	risperidone m-tab	54
RADIOGARDASE	35	repaglinide-metformin hcl	31	RITALIN	3
RAGWITEK	3	REPATHA	41	RITALIN LA	3
rajani	66	REPATHA PUSHTRONEX		ritonavir	58
raloxifene hcl	93	SYSTEM	41	RITUXAN	47
ramelteon	106	REPATHA SURECLICK	41	RITUXAN HYCELA	49
ramipril	41	REQUIP	53	rivastigmine	140
RANEXA	17	REQUIP XL	53	rivastigmine tartrate	140
ranitidine hcl	149	RESCRIPTOR	58	rizatriptan benzoate	112
ranolazine	17	RESCULA	135	ROBAXIN	128
RAPAFLO	101	RESTASIS	133	ROBAXIN-750	128
RAPAMUNE	116	RESTASIS MULTIDOSE	133	ROBINUL	148
rasagiline mesylate	54	RESTORIL	105	ROBINUL FORTE	148
RASUVO	4	RETACRIT	103	ROCALTROL	95
RAVICTI	95	RETIN-A	76	ROMIDEPSIN	51
RAYALDEE	95	RETIN-A MICRO	76	ropinirole hydrochloride	53
RAYOS	71	RETIN-A MICRO PUMP	76	rosadan	88
RAZADYNE	140	RETROVIR	58	rosuvastatin calcium	40
RAZADYNE ER	140	REVATIO	64	ROTATEQ	153
REALITY LATEX		REVLIMID	115	ROWASA	99
CONDOMS/LUBRICATED	109	REXULTI	56	roweepra	25
REALITY LATEX/ULTRA		REYATAZ	58	roweepra xr	25
TEXTURED	109	RHOFADE	89	ROXICET	12
REALITY LATEX/ULTRA		RIAX	76	ROXICODONE	11
THIN	109	ribasphere	59	ROXYBOND	11
REBETOL	60	ribasphere ribapak	59	ROZEREM	106
REBIF	141	RIBASPHERE RIBAPAK	60	ROZLYTREK	51
REBIF REBIDOSE	141	ribavirin	61	RUBRACA	51
REBIF REBIDOSE		ribavirin (hepatitis c)	60	RUCONEST	102
TITRATIONPACK	141	RIDAURA	4	RUZURGI	45
REBIF TITRATION PACK	141	rifabutin	46	ryclora	37
RECLAST	92	RIFADIN	46	RYDAPT	51
RECOMBIVAX HB	153	RIFAMATE	45	RYTARY	53
RECTIV	15	rifampin	46	RYTHMOL SR	19
REGLAN	99	RIFATER	46	SABRIL	27
REGRANEX	89	RIGHT STEP		SAFYRAL	69
relagard	153	PRENATAL	125		
RELENZA DISKHALER	60				

SALAGEN.....	118	sertraline hcl.....	29	SODIUM SULFACETAMIDE	
SALEX.....	86	sevelamer carbonate.....	100	WASH.....	80
SALEX LOTION.....	86	sevelamer hcl.....	100	SODIUM	
salicylic acid.....	86,87	SFROWASA.....	99	SULFACETAMIDE/SULFUR	
salicylic acid in ammonium		SHUR-SEAL.....	154	.....	76
lactate vehicle.....	87	SIGNIFOR.....	95	SODIUM	
salicylic acid w/ cleanser.....	87	SIKLOS.....	103	SULFACETAMIDE/SULFUR	
salicylic acid wart remover.....	86	SILDENAFIL CITRATE.....	64	CLEANSER IN UREA.....	76
salimez.....	86	sildenafil citrate (pulmonary		SOFOSBUVIR/VELPATASVIR	
SALISOL.....	87	hypertension).....	64	.....	60
salisol forte.....	86	SILENOR.....	105	solifenacin succinate.....	152
SALITECH.....	87	SILIQ.....	79	SOLQUA 100/33.....	31
salitech forte.....	86	silodosin.....	101	SOLODYN.....	146
salsalate.....	9	SILVADENE.....	80	SOLTAMOX.....	49
SALVAX.....	87	silver sulfadiazine.....	80	SOMA.....	128
SAMSCA.....	96	SIMBRINZA.....	131	SOMATULINE DEPOT.....	95
SANCUSO.....	35	SIMCOR.....	40	SOMAVERT.....	93
SANDIMMUNE.....	116	SIMPONI.....	4	SONATA.....	105
SANDOSTATIN.....	95	SIMPONI ARIA.....	4	SOOLANTRA.....	89
SANDOSTATIN LAR		SIMULECT.....	116	SORIATANE.....	79
DEPOT.....	95	simvastatin.....	40	SORILUX.....	79
SANTYL.....	86	SINEMET.....	53	sorine.....	61
SAPHRIS.....	55	SINEMET CR.....	53	sotalol hcl.....	62
SARAFEM.....	141	SINGULAIR.....	19	sotalol hcl (afib/afib).....	62
SAVAYSA.....	23	sirolimus.....	116	SOTYLIZE.....	62
SAVELLA.....	140	SIRTURO.....	46	SOVALDI.....	60
SAVELLA TITRATION		SIVEXTRO.....	17	SPECTRACEF.....	65
PACK.....	140	SKELAXIN.....	128	spinosad.....	89
scopolamine.....	35	SKLICE.....	89	SPIRIVA HANDIHALER.....	19
SE-NATAL 19.....	125,126	SKYLA.....	69	SPIRIVA RESPIMAT.....	19
SEASONIQUE.....	69	SKYRIZI.....	79	spironolactone.....	91
seb-prev wash.....	80	SLYND.....	70	spironolactone &	
SECONAL SODIUM.....	105	sm nicotine.....	143	hydrochlorothiazide.....	91
SECUADO.....	55	sm nicotine polacrilex.....	143	SPORANOX.....	37
SEEBRI NEOHALER.....	19	sm nicotine transdermal		SPORANOX PULSEPAK.....	37
SEGLUROMET.....	31	system.....	144	SPRIX.....	6
SELECT-OB.....	126	sodium chloride.....	115	SPRYCEL.....	51
SELECT-OB+DHA.....	126	sodium chloride (gu		ssd.....	80
selegiline hcl.....	54	irrigant).....	101	sss 10-5.....	74
selenium sulfide.....	80	sodium chloride (inhalant).....	73	ST JOSEPH ADULT.....	9
SELZENTRY.....	58	sodium citrate & citric		ST JOSEPH ADULT	
SEMPREX-D.....	73	acid.....	100	ANALGESICLOW DOSE BITE	
SENSIPAR.....	95	SODIUM EDECRIN.....	91	SIZE.....	9
SEREVENT DISKUS.....	22	sodium fluoride.....	113	STALEVO 100.....	53
SEROQUEL.....	55	sodium phenylbutyrate.....	95	STALEVO 125.....	53
SEROQUEL XR.....	55	sodium polystyrene		STALEVO 150.....	53
SEROSTIM.....	93	sulfonate.....	117	STALEVO 200.....	54
		sodium sulfacetamide		STALEVO 50.....	54
		wash.....	80	STALEVO 75.....	54

STARLIX.....	33	SURMONTIL.....	31	TASMAR.....	53
stavudine.....	58	SUSTIVA.....	58	TAVALISSE.....	102
STEGLATRO.....	34	SUTENT.....	51	TAYTULLA.....	69
STELARA.....	79	SUVICORT.....	88	tazarotene.....	80
STIMATE.....	95	SYLATRON.....	52	tazicef.....	65
STIOLTO RESPIMAT.....	22	SYMBICORT.....	22	TAZORAC.....	80
STIVARGA.....	51	SYMBYAX.....	140	taztia xt.....	62
STRATTERA.....	2	SYMDEKO.....	145	TAZVERIK.....	51
STRENSIQ.....	95	SYMLINPEN 120.....	31	TECFIDERA.....	141
streptomycin sulfate.....	4	SYMLINPEN 60.....	31	TECFIDERA STARTER	
STRIANT.....	13	SYMPROIC.....	100	PACK.....	141
STRIBILD.....	58	SYMTUZA.....	58	TECHNIVIE.....	60
STRIVERDI RESPIMAT.....	22	SYNALAR.....	84	TEFLARO.....	66
STROMECTOL.....	15	SYNAREL.....	94	TEGRETOL.....	26
SUBOXONE.....	13	SYNERA.....	88	TEGRETOL-XR.....	27
SUBSYS.....	11	SYNERDERM.....	88	TEGSEDI.....	145
subvenite.....	25	SYNJARDY.....	31	TEKTURNA.....	44
subvenite starter kit/blue.....	25	SYNJARDY XR.....	31	TEKTURNA HCT.....	44
SUCRAID.....	90	SYNTHROID.....	147	telmisartan.....	42
sucrafate.....	149	SYPRINE.....	115	telmisartan-amlodipine.....	44
SULAR.....	63	TABLOID.....	47	telmisartan-hydrochlorothiazide	
sulconazole nitrate.....	78	TACLONEX.....	84	.....	44
sulfacetamide sod-		tacrolimus.....	116	temazepam.....	105
prednisolone.....	134	tacrolimus (topical).....	86	TEMODAR.....	46
sulfacetamide sodium.....	80	tadalafil.....	63	TEMOVATE.....	84
sulfacetamide sodium (acne).....	76	tadalafil (pulmonary		temozolomide.....	46
sulfacetamide sodium		hypertension).....	64	temsirolimus.....	51
(ophth).....	132	TAFINLAR.....	51	tencon.....	7
sulfacetamide sodium w/		TAGAMET HB.....	149	tenofovir disoproxil fumarate.....	58
sulfur.....	76	TAGRISSO.....	51	TENORETIC 100.....	44
sulfacleanse 8/4.....	74	TAKHZYRO.....	102	TENORETIC 50.....	44
SULFADIAZINE.....	145	TALTZ.....	80	TENORMIN.....	61
sulfamethoxazole-trimethoprim		TALZENNA.....	51	TEPADINA.....	46
.....	15	TAMIFLU.....	60,61	TERAZOL 7.....	154
SULFAMYLON.....	80	tamoxifen citrate.....	49	terazosin hcl.....	42
sulfasalazine.....	99	tamsulosin hcl.....	101	terbinafine hcl.....	36
sulfatrim pediatric.....	15	TANZEUM.....	32	terbutaline sulfate.....	22
sulindac.....	6	TAPAZOLE.....	146	terconazole vaginal.....	154
SUMADAN WASH.....	76	TARCEVA.....	51	TESSALON PERLES.....	71
sumatriptan.....	112	TARGADOX.....	146	TESTIM.....	14
sumatriptan succinate.....	112	TARGRETIN.....	52,79	testosterone.....	14
sumatriptan-naproxen		TARKA.....	44	testosterone cypionate.....	14
sodium.....	111	TARON-BC.....	126	testosterone enanthate.....	14
SUMAXIN.....	76	TARON-C DHA.....	126	tetrabenazine.....	140
SUMAXIN TS.....	76	TARON-PREX.....	126	tetracaine hcl (ophth).....	133
SUMAXIN WASH.....	76	TASIGNA.....	51	tetracycline hcl.....	146
SUPRAX.....	65,66			TEXACORT.....	85
SUPREP BOWEL PREP					
KIT.....	107				

THALOMID	115	TOBRADEX ST	134	travoprost	135
THEO-24	22	tobramycin	4	trazodone hcl	30
theophylline	22,23	tobramycin (ophth)	132	TRECTOR	46
THERANATAL CORE		tobramycin inhalation solution		TRELEGY ELLIPTA	22
NUTRITION	126	pak	3	TRELSTAR MIXJECT	49
THIOLA	101	tobramycin sulfate	4	TREMFYA	80
THIOLA EC	101	tobramycin-		treprostinil	64
thioridazine hcl	56	dexamethasone	134	TRESIBA	33
thiotepa	46	TOBREX	132	TRESIBA FLEXTOUCH	33
thiothixene	56	TODAY SPONGE	154	TRETIN-X	76
THRIVITE 19	118	TOFRANIL	31	tretinoin	76
THRIVITE RX	126	TOLAK	79	tretinoin (chemotherapy)	52
THYMOGLOBULIN	116	tolazamide	34	tretinoin microsphere	76
thyroid	147	tolbutamide	34	TREXALL	47
THYROLAR-1	147	tolcapone	53	TREXIMET	111
THYROLAR-1/2	147	tolmetin sodium	7	tri femynor	67
THYROLAR-1/4	147	TOLSURA	37	TRI-NORINYL 28	69
THYROLAR-2	147	tolterodine tartrate	152	TRI-TABS DHA	126
THYROLAR-3	147	tolvaptan	96	TRI-VI-FLOR	120
tiagabine hcl	27	TOPAMAX	27	TRI-VI-FLORO	120
TIAZAC	63	TOPAMAX SPRINKLE	27	tri-vitamin/fluoride	120
TIBSOVO	51	TOPICORT	85	triamcinolone acetonide	
TIGAN	35	topiramate	27	(mouth)	117
tigecycline	146	toposar	52	triamcinolone acetonide	
TIGECYCLINE	146	topotecan hcl	52	(topical)	85
TIKOSYN	19	TOPOTECAN HCL	52	triamterene	91
tilia fe	67	topotecan hcl	52	triamterene &	
timolol maleate	62	TOPROL XL	61	hydrochlorothiazide	91
timolol maleate (ophth)	131	toremifene citrate	49	trianex	81
TIMOPTIC	131	TORISEL	51	triazolam	105
TIMOPTIC OCUDOSE	131	torsemide	91	TRIBENZOR	44
TIMOPTIC-XE	131	TOUJEO MAX		TRICARE	126
TINDAMAX	15	SOLOSTAR	33	TRICARE PRENATAL DHA	
tinidazole	15	TOUJEO SOLOSTAR	33	ONE	126
TIROSINT	147	tovet	80	TRICARE PRENATAL DHA	
TIROSINT-SOL	147	TOVIAZ	153	ONE/FOLATE	126
tis-u-sol	117	TRACLEER	64	TRICOR	40
TIVICAY	58	tramadol hcl	11	triderm	81
TIVORBEX	6	tramadol-acetaminophen ..	12	TRIDESILON	85
tizanidine hcl	128	trandolapril	41	trientine hcl	115
TL FOLATE	126	trandolapril-verapamil hcl ..	44	trifluoperazine hcl	56
TL-CARE DHA	126	tranexamic acid	104	trifluridine	132
TL-SELECT	126	TRANSDERM SCOP	35	TRIGLIDE	40
TOBI	4	TRANSDERM-SCOP	35	trihexyphenidyl hcl	52
TOBI PODHALER	4	TRANXENE T	18	TRIKAFTA	145
TOBRADEX	134	tranylcypromine sulfate	28	triklo	39
		TRAVATAN Z	135	TRILEPTAL	27
				TRILIPIX	40

trimethobenzamide hcl.....	36	TUSSICAPS.....	73	VAGIFEM.....	154
trimethoprim.....	15	tussigon.....	71	valacyclovir hcl.....	60
trimipramine maleate.....	31	TUSSIONEX PENNKINETIC		VALCHLOR.....	79
TRIMPEX.....	15	EXTENDED RELEASE.....	73	VALCYTE.....	59
TRINTELLIX.....	30	TUSSLIN.....	73	valganciclovir hcl.....	59
TRISTART DHA.....	126	TUSSLIN PEDIATRIC.....	73	VALIUM.....	18
TRISTART ONE.....	126	TWYNSTA.....	44	valproic acid.....	28
TRIUMEQ.....	58	TYBOST.....	58	valsartan.....	42
TRIZIVIR.....	58	TYGACIL.....	146	valsartan-hydrochlorothiazide	
TROKENDI XR.....	27	TYKERB.....	51	.....	44
tropicamide.....	131	TYLENOL/CODEINE #3... 12		VALTOCO.....	25
tropium chloride.....	153	TYLENOL/CODEINE #4... 13		VALTREX.....	60
TRULANCE.....	98	TYMLOS.....	92	vanadom.....	128
TRULICITY.....	32	TYSABRI.....	141	vanatol lq.....	7
TRUSOPT.....	135	UCERIS.....	14,71	VANCOCCIN.....	16
TRUSTEX COLOR CONDOMS +		UDAMIN SP.....	118	VANCOCCIN HCL.....	16
LUBE.....	109	ULESFIA.....	89	vancomycin hcl.....	16
TRUSTEX LUBRICATED..	109	ULORIC.....	102	vandazole.....	154
TRUSTEX LUBRICATED		ULTIMATECARE ONE... 126		VANOS.....	85
EXTRALARGE.....	109	ULTRACET.....	13	VARUBI.....	36
TRUSTEX LUBRICATED		ULTRAM.....	11	VASCEPA.....	39
EXTRASTRENGTH.....	109	ULTRASAL-ER.....	87	VASERETIC.....	44
TRUSTEX		ULTRAVATE.....	85	VASOTEC.....	41
LUBRICATED/RIBBED/STUDDE		umecta mousse.....	85	VCF VAGINAL	
D.....	109	UNASYN.....	138	CONTRACEPTIVE FILM... 154	
TRUSTEX		UNASYN BULK PACK... 138		VCF VAGINAL	
LUBRICATED/SPERMICIDE		UNISOM SLEEPGELS... 105		CONTRACEPTIVE FOAM... 154	
.....	109	UPTRAVI.....	64	vcf vaginal contraceptivegel 153	
TRUSTEX		URAMAXIN.....	85	VECAMYL.....	44
LUBRICATED/SPERMICIDE		URE-K.....	85	VECTICAL.....	80
EXTRA LARGE.....	109	urea.....	85	VELCADE.....	51
TRUSTEX		urea hydrating.....	85	VELPHORO.....	100
LUBRICATED/SPERMICIDE		urea nail.....	85	VELTASSA.....	117
EXTRA STRENGTH.....	109	UREA NAIL.....	85	VELTIN.....	76
TRUSTEX NATURAL		URECHOLINE.....	153	VEMLIDY.....	60
CONDOMS		uribel.....	152	VENA-BAL DHA.....	126
+LUBE/LUBRICATED.....	109	urimar-t.....	152	VENCLEXTA.....	48
TRUSTEX NON-		UROCIT-K 10.....	100	VENCLEXTA STARTING	
LUBRICATED.....	109	UROCIT-K 15.....	100	PACK.....	48
TRUSTEX WITH NONOXYNOL-		UROCIT-K 5.....	101	venlafaxine hcl.....	30
9/RIBBED/STUDDERED.....	110	UROXATRAL.....	101	VENTAVIS.....	64
TRUSTEX/RIA		URSO 250.....	98	VENTOLIN HFA.....	22
LUBRICATED.....	110	URSO FORTE.....	98	verapamil hcl.....	63
TRUSTEX/RIA LUBRICATED		ursodiol.....	98	VERDESO.....	85
SPERMICIDE.....	110	UTIBRON NEOHALER.....	22	VEREGEN.....	77
TRUSTEX/RIA		UTOPIC.....	85	VERELAN.....	63
LUBRICATED/SPERMICIDE				VERELAN PM.....	63
.....	110			VERIPRED 20.....	71
TRUSTEX/RIA NON-					
LUBRICATED.....	110				
TRUVADA.....	58				
TUDORZA PRESSAIR.....	19				
TURALIO.....	51				

VERSACLOZ.....	55	VITAMIN D3 IMMUNE		XATMEP.....	47
VERZENIO.....	51	HEALTH.....	155	XELJANZ.....	4
VESICARE.....	153	VITAPEARL.....	127	XELJANZ XR.....	4
VFEND.....	37	VITATHELY/GINGER....	127	XELODA.....	47
VIBERZI.....	99	VITATRUE.....	127	XENAZINE.....	140
VIBRAMYCIN.....	146	VITRAKVI.....	51	XERAC AC.....	88
VICTOZA.....	32	VIVA DHA.....	127	XERESE.....	80
VIDAZA.....	47	VIVELLE-DOT.....	97,98	XERMELO.....	100
VIDEX EC.....	58	VIVOTIF.....	153	XGEVA.....	93
VIDEXPEDIATRIC.....	58	VIVOTIF BERNA.....	153	XIAFLEX.....	115
VIEKIRA PAK.....	60	VIZIMPRO.....	51	XIFAXAN.....	15
vigabatrin.....	27	VOGELXO.....	14	XIIDRA.....	133
vigadrone.....	27	VOGELXO PUMP.....	14	XOLAIR.....	19
VIGAMOX.....	132	VOL-PLUS.....	127	XOLEGEL.....	79
VIIBRYD.....	30	VOL-TAB RX.....	127	XOPENEX.....	22
VIIBRYD STARTER PACK..	30	VOLTAREN.....	77	XOPENEX CONCENTRATE	22
VIL-RX.....	126	voriconazole.....	37	XOPENEX HFA.....	22
VIMOVO.....	7	VOSEVI.....	60	XOSPATA.....	51
VIMPAT.....	27	VOTRIENT.....	51	XPOVIO 100 MG ONCE	
VINATE DHA RF.....	126	VP-GGR-B6 PRENATAL..	127	WEEKLY.....	49
VINATE II.....	127	VP-HEME OB.....	128	XPOVIO 60 MG ONCE	
VIOKACE.....	90	VP-HEME OB + DHA....	127	WEEKLY.....	49
VIRACEPT.....	58	VP-PNV-DHA.....	128	XPOVIO 80 MG ONCE	
VIRAMUNE.....	58	VPRIV.....	102	WEEKLY.....	49
VIRAMUNE XR.....	58,59	VRAYLAR.....	54	XPOVIO 80 MG TWICE	
VIRASAL.....	87	VUSION.....	78	WEEKLY.....	49
VIRAZOLE.....	61	VYNDAMAX.....	64	XTANDI.....	49
VIREAD.....	59	VYNDAQEL.....	64	xulane.....	69
VIROPTIC.....	132	VYTONE.....	78	XULTOPHY 100/3.6.....	31
VIRT-C DHA.....	127	VYTORIN.....	39	XURIDEN.....	95
VIRT-NATE DHA.....	127	VYVANSE.....	1	XYREM.....	139
VIRT-PN.....	127	warfarin sodium.....	23	XYZAL ALLERGY 24HR....	38
VIRT-PN DHA.....	127	water for irrigation, sterile	117	YASMIN 28.....	69
VIRT-PN PLUS.....	127	wee care.....	104	YAZ.....	69
virtussin ac/alc.....	71	WELCHOL.....	39	YERVOY.....	47
VISTARIL.....	18	WELLBUTRIN SR.....	28	YONSA.....	49
VISTOGARD.....	35	WELLBUTRIN XL.....	28	yuvafem.....	154
VITAFOL FE+.....	127	WESTHROID.....	147	zafirlukast.....	19
VITAFOL GUMMIES.....	127	wixela inhub.....	21	zaleplon.....	105
VITAFOL ULTRA.....	127	WP THYROID.....	147	ZANAFLEX.....	128
VITAFOL-NANO.....	127	XALATAN.....	135	ZANOSAR.....	46
VITAFOL-ONE.....	127	XALKORI.....	51	ZANTAC.....	149
VITAMEDMD ONE		XANAX.....	18	ZANTAC 150 MAXIMUM	
RX/QUATREFOLIC.....	127	XANAX XR.....	18	STRENGTH.....	149
VITAMIN D2.....	155	XARELTO.....	23	ZARONTIN.....	28
VITAMIN D3.....	155	XARELTO STARTER		ZARXIO.....	104
		PACK.....	23	ZATEAN-PN DHA.....	128
				ZATEAN-PN PLUS.....	128

ZAVESCA.....	103	ZONALON.....	79
ZEGERID.....	151	ZONEGRAN.....	27
ZEJULA.....	51	zonisamide.....	27
ZELAPAR.....	54	ZONTIVITY.....	102
ZELBORAF.....	51	ZORTRESS.....	117
ZEMAIRA.....	145	ZORVOLEX.....	7
ZEMBRACE SYMTOUCH.....	112	ZOSYN.....	138
ZEMPLAR.....	95	ZOVIRAX.....	60,80
ZENPEP.....	90	ZUBSOLV.....	13
zenzedi.....	1	ZUPLENZ.....	35
ZEPATIER.....	60	ZURAMPIC.....	102
ZERIT.....	59	ZYBAN.....	145
ZESTORETIC.....	44	ZYCLARA.....	86
ZESTRIL.....	41	ZYCLARA PUMP.....	86
ZETIA.....	40	ZYDELIG.....	51
ZETONNA.....	130	ZYFLO.....	20
ZIAC.....	44	ZYFLO CR.....	20
ZIAGEN.....	59	ZYKADIA.....	51
ZIANA.....	76	ZYLET.....	134
zidovudine.....	59	ZYLOPRIM.....	102
ZIEXTENZO.....	104	ZYMAXID.....	132
zileuton.....	20	ZYPREXA.....	55
zinc sulfate.....	115	ZYPREXA ZYDIS.....	56
ZIOPTAN.....	135	ZYRTEC CHILDRENS	
ziprasidone hcl.....	54	ALLERGY.....	38
ziprasidone mesylate.....	54	ZYTIGA.....	49
ZIPSOR.....	7	ZYVOX.....	17
ZIRGAN.....	132		
ZITHROMAX.....	107		
ZITHROMAX TRI-PAK.....	107		
ZITHROMAX Z-PAK.....	107		
ZOCOR.....	40		
ZOFRAN.....	35		
ZOFRAN ODT.....	35		
zoledronic acid.....	93		
ZOLEDRONIC ACID.....	93		
zoledronic acid.....	93		
ZOLINZA.....	51		
zolmitriptan.....	112		
ZOLOFT.....	29		
zolpidem tartrate.....	106		
ZOLPIMIST.....	106		
ZOMACTON.....	93		
ZOMETA.....	93		
ZOMIG.....	113		
ZOMIG ZMT.....	113		