

# Prescription drug list.

This “drug list” is a summary of the most commonly prescribed drugs that your insurance plan covers. **PRO TIP:** If you log in to your member account, you can use our drug search tool to view all the drugs your plan covers (i.e. the complete “formulary”), and see the costs of different medications.

## Drug costs

Your formulary is divided into tiers. In most cases, drugs on lower tiers will cost you less. Additionally, there are preventive medications, that vary by age and gender (e.g., contraception for women or fluoride tablets for children), that may be available to you at no-out-of-pocket cost.

Some maintenance medications that you use regularly for chronic conditions such as asthma or diabetes may have additional coverage that makes them less expensive for you. However, coverage varies by plan and the cost-sharing amounts you pay for different drug tiers or categories of medications are shown on your Member Payment Summary (MPS) or our online search tool.

You can also call Pharmacy Services to find out how much a drug costs, whether it is covered by your insurance, and whether preauthorization or other steps are required for coverage. Select Health members call **800-538-5038**.

## The formulary is regularly updated

The contents of the formulary are reviewed each month by our team of doctors and pharmacists. This team reviews and evaluates the clinical efficacy, safety, and cost effectiveness of all medications and may remove drugs from, or add drugs to, this list. Please note that the inclusion of a drug in the formulary does not guarantee that a healthcare provider will prescribe that drug for you.

## Noncovered drug exceptions

For drugs that are not covered, you, your physician, or your pharmacy may request coverage based on medical necessity. Requests are granted on a case-by-case basis. Use the Drug Coverage Exception Form found on our website.

## LEGEND

### (PA) Preauthorization

Coverage of drugs is based on medical necessity. For certain drugs, you will need preauthorization from us; otherwise, you will be responsible to pay the drug’s full retail price.

### (ST) Step Therapy

Drugs that require step therapy are covered only after you have tried an alternative therapy and it didn’t work (i.e., the drug didn’t alleviate your symptoms or caused adverse reactions). Step therapy most often applies to brand-name drugs.

### (QL) Quantity Limits

Quantity limitations apply to certain drugs (e.g., opioids). Preauthorization is required if the medication exceeds the plan limits.

### (AGE) Age limit

A minimum or maximum age limit requirement must be met for coverage.

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This information is available for free in other languages and alternate formats by contacting:

Scripius: **800-442-3127** / Select Health: **800-538-5038**

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística.

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電

# Table of Contents

ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS.....	1
AMINOGLYCOSIDES.....	2
ANALGESICS - ANTI-INFLAMMATORY.....	2
ANALGESICS - NONNARCOTIC.....	5
ANALGESICS - OPIOID.....	8
ANDROGENS-ANABOLIC.....	11
ANORECTAL AND RELATED PRODUCTS.....	11
ANTHELMINTICS.....	12
ANTI-INFECTIVE AGENTS - MISC.....	12
ANTIANGINAL AGENTS.....	13
ANTIANSXIETY AGENTS.....	14
ANTIARRHYTHMICS.....	15
ANTIASTHMATIC AND BRONCHODILATOR AGENTS.....	15
ANTICOAGULANTS.....	18
ANTICONVULSANTS.....	19
ANTIDEPRESSANTS.....	24
ANTIDIABETICS.....	25
ANTIDIARRHEAL/PROBIOTIC AGENTS.....	29
ANTIDOTES AND SPECIFIC ANTAGONISTS.....	29
ANTIEMETICS.....	29
ANTIFUNGALS.....	30
ANTIHISTAMINES.....	31
ANTIHYPERTENSIVES.....	31
ANTIHYPERTENSIVES.....	33
ANTIMALARIALS.....	36
ANTIMYASTHENIC/CHOLINERGIC AGENTS.....	36
ANTIMYCOBACTERIAL AGENTS.....	36
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES.....	36
ANTIPARKINSON AND RELATED THERAPY AGENTS.....	45
ANTIPSYCHOTICS/ANTIMANIC AGENTS.....	46
ANTIVIRALS.....	49
BETA BLOCKERS.....	53
CALCIUM CHANNEL BLOCKERS.....	54
CARDIOTONICS.....	55
CARDIOVASCULAR AGENTS - MISC.....	56
CEPHALOSPORINS.....	57
CONTRACEPTIVES.....	58
CORTICOSTEROIDS.....	67

COUGH/COLD/ALLERGY.....	68
DERMATOLOGICALS.....	69
DIAGNOSTIC PRODUCTS.....	76
DIGESTIVE AIDS.....	83
DIURETICS.....	83
ENDOCRINE AND METABOLIC AGENTS - MISC.....	84
ESTROGENS.....	88
FLUOROQUINOLONES.....	90
GASTROINTESTINAL AGENTS - MISC.....	90
GENITOURINARY AGENTS - MISCELLANEOUS.....	92
GOUT AGENTS.....	93
HEMATOLOGICAL AGENTS - MISC.....	94
HEMATOPOIETIC AGENTS.....	94
HEMOSTATICS.....	96
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS.....	96
LAXATIVES.....	96
MACROLIDES.....	97
MEDICAL DEVICES AND SUPPLIES.....	98
MIGRAINE PRODUCTS.....	133
MINERALS & ELECTROLYTES.....	134
MISCELLANEOUS THERAPEUTIC CLASSES.....	136
MOUTH/THROAT/DENTAL AGENTS.....	137
MULTIVITAMINS.....	138
MUSCULOSKELETAL THERAPY AGENTS.....	142
NASAL AGENTS - SYSTEMIC AND TOPICAL.....	143
NEUROMUSCULAR AGENTS.....	143
OPHTHALMIC AGENTS.....	143
OTIC AGENTS.....	147
OXYTOCICS.....	147
PENICILLINS.....	148
PROGESTINS.....	148
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.....	149
RESPIRATORY AGENTS - MISC.....	153
SULFONAMIDES.....	154
TETRACYCLINES.....	154
THYROID AGENTS.....	154
TOXOIDS.....	155
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS.....	155
URINARY ANTISPASMODICS.....	157
VACCINES.....	158

VAGINAL AND RELATED PRODUCTS.....160  
VASOPRESSORS.....161  
VITAMINS.....161

# RxCore Colorado Option

Drug Name	Drug Tier	Requirements / Limits
<b>ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS (CONTINUED)</b>		
<b>ADHD AGENT - SELECTIVE ALPHA ADRENERGIC AGONISTS</b>		
<i>clonidine hcl er</i>	2	MDD (4.0 Per Day)
<i>guanfacine hcl er</i>	2	
<b>ADHD AGENT - SELECTIVE NOREPINEPHRINE REUPTAKE INHIBITOR</b>		
<i>atomoxetine hcl</i>	2	MDD (2.0 Per Day)
<b>AMPHETAMINE MIXTURES</b>		
<i>amphetamine-dextroamphet er</i>	2	MDD (2.0 Per Day)
<i>amphetamine-dextroamphetamine (5 mg tab, 7.5 mg tab, 10 mg tab)</i>	2	MDD (6.0 Per Day)
<i>amphetamine-dextroamphetamine 12.5 mg tab</i>	2	MDD (5.0 Per Day)
<i>amphetamine-dextroamphetamine 15 mg tab</i>	2	MDD (4.0 Per Day)
<i>amphetamine-dextroamphetamine 20 mg tab</i>	2	MDD (3.0 Per Day)
<i>amphetamine-dextroamphetamine 30 mg tab</i>	2	MDD (2.0 Per Day)
<b>AMPHETAMINES</b>		
<i>dextroamphetamine sulfate (2.5 mg tab, 7.5 mg tab, 15 mg tab, 20 mg tab, 30 mg tab)</i>	3	MDD (6.0 Per Day)
<i>dextroamphetamine sulfate (5 mg tab, 10 mg tab)</i>	2	MDD (6.0 Per Day)
<i>dextroamphetamine sulfate er</i>	2	MDD (2.0 Per Day)
<i>lisdexamfetamine dimesylate (10 mg cap, 20 mg cap, 30 mg cap, 40 mg cap, 50 mg cap, 60 mg cap, 70 mg cap)</i>	2	MDD (1.0 Per Day)
<b>ANALEPTICS</b>		
<i>caffeine citrate</i>	2	MDD (2.0 Per Day)
<b>STIMULANTS - MISC.</b>		
<i>armodafinil</i>	2	MDD (3.0 Per Day)
<i>dexmethylphenidate hcl</i>	2	MDD (6.0 Per Day)
<i>dexmethylphenidate hcl er</i>	2	MDD (2.0 Per Day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>methylphenidate hcl (2.5 mg chew tab, 5 mg chew tab, 10 mg chew tab, 20 mg tab)</i>	2	MDD (3.0 Per Day)
<i>methylphenidate hcl (5 mg tab, 10 mg tab)</i>	2	MDD (6.0 Per Day)
<i>methylphenidate hcl 10 mg/5ml solution</i>	2	MDD (10.0 Per Day)
<i>methylphenidate hcl 5 mg/5ml solution</i>	2	MDD (15.0 Per Day)
METHYLPHENIDATE HCL ER (10 MG TAB ER, 18 MG TAB ER, 18 MG TAB ER 24H, 20 MG TAB ER, 27 MG TAB ER, 27 MG TAB ER 24H, 36 MG TAB ER, 36 MG TAB ER 24H, 54 MG TAB ER, 54 MG TAB ER 24H)	2	MDD (2.0 Per Day)
<i>methylphenidate hcl er (cd)</i>	2	MDD (2.0 Per Day)
<i>methylphenidate hcl er (la)</i>	2	MDD (2.0 Per Day)
<i>methylphenidate hcl er (osm) (18 mg tab er, 27 mg tab er, 36 mg tab er, 54 mg tab er)</i>	2	MDD (2.0 Per Day)
<i>modafinil</i>	2	MDD (3.0 Per Day)
<b>AMINOGLYCOSIDES (CONTINUED)</b>		
<i>neomycin sulfate</i>	2	
TOBRAMYCIN 300 MG/5ML NEBU SOLN	5	MDD (14.0 Per Day), MDS1 (31 / Fill)
<b>ANALGESICS - ANTI-INFLAMMATORY (CONTINUED)</b>		
<b>ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES</b>		
AMJEVITA (10 MG/0.2ML SOLN PRSYR, 20 MG/0.2ML SOLN PRSYR)	2	PA, MFL (0.8 / Fill), MDS1 (31 / Fill)
AMJEVITA (40 MG/0.4ML SOLN A-INJ, 40 MG/0.4ML SOLN PRSYR, 80 MG/0.8ML SOLN A-INJ)	2	PA, MFL (1.6 / Fill), MDS1 (31 / Fill)
HADLIMA 40 MG/0.4ML SOLN PRSYR	2	PA, MFL (1.6 / Fill), MDS1 (31 / Fill)
HADLIMA 40 MG/0.8ML SOLN PRSYR	2	PA, MFL (3.2 / Fill), MDS1 (31 / Fill)
HADLIMA PUSHTOUCH 40 MG/0.4ML SOLN A-INJ	2	PA, MFL (1.6 / Fill), MDS1 (31 / Fill)
HADLIMA PUSHTOUCH 40 MG/0.8ML SOLN A-INJ	2	PA, MFL (3.2 / Fill), MDS1 (31 / Fill)

Drug Name	Drug Tier	Requirements / Limits
<b>ANTIRHEUMATIC - JANUS KINASE (JAK) INHIBITORS</b>		
RINVOQ (15 MG TAB ER 24H, 30 MG TAB ER 24H)	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
RINVOQ 45 MG TAB ER 24H	5	PA, MDD (1.0 Per Day), MFL (84 / lifetime), MDS1 (31 / Fill)
RINVOQ LQ	5	PA, MDD (12.0 Per Day), MDS1 (31 / Fill)
<b>ANTIRHEUMATIC ANTIMETABOLITES</b>		
OTREXUP (10 MG/0.4ML SOLN A-INJ, 12.5 MG/0.4ML SOLN A-INJ, 15 MG/0.4ML SOLN A-INJ, 17.5 MG/0.4ML SOLN A-INJ, 22.5 MG/0.4ML SOLN A-INJ, 25 MG/0.4ML SOLN A-INJ)	5	PA, MFL (1.6 / Fill(s)), MDS1 (31 / Fill)
OTREXUP 20 MG/0.4ML SOLN A-INJ	3	MFL (1.6 / Fill(s))
RASUVO 10 MG/0.2ML SOLN A-INJ	3	ST, MFL (0.8 / Fill)
RASUVO 12.5 MG/0.25ML SOLN A-INJ	3	ST, MFL (1 / Fill)
RASUVO 15 MG/0.3ML SOLN A-INJ	3	ST, MFL (1.2 / Fill)
RASUVO 17.5 MG/0.35ML SOLN A-INJ	3	ST, MFL (1.4 / Fill)
RASUVO 20 MG/0.4ML SOLN A-INJ	3	ST, MFL (1.6 / Fill(s))
RASUVO 22.5 MG/0.45ML SOLN A-INJ	3	ST, MFL (1.8 / Fill)
RASUVO 25 MG/0.5ML SOLN A-INJ	3	ST, MFL (2 / Fill)
RASUVO 30 MG/0.6ML SOLN A-INJ	3	ST, MFL (2.4 / Fill)
RASUVO 7.5 MG/0.15ML SOLN A-INJ	3	ST, MFL (0.6 / Fill)
<b>CYCLOOXYGENASE 2 (COX-2) INHIBITORS</b>		
<i>celecoxib (50 mg cap, 100 mg cap, 200 mg cap)</i>	2	MDD (2.0 Per Day)
<i>celecoxib 400 mg cap</i>	2	MDD (1.0 Per Day)
<b>INTERLEUKIN-6 RECEPTOR INHIBITORS</b>		
TYENNE (162 MG/0.9ML SOLN A-INJ, 162 MG/0.9ML SOLN PRSYR)	2	PA, MFL (3.6 / Fill), MDS1 (31 / Fill)
<b>NONSTEROIDAL ANTI-INFLAMMATORY AGENT COMBINATIONS</b>		
<i>diclofenac-misoprostol</i>	3	

Drug Name	Drug Tier	Requirements / Limits
<b>NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)</b>		
<i>diclofenac potassium 50 mg tab</i>	2	
<i>diclofenac sodium (25 mg tab dr, 50 mg tab dr, 75 mg tab dr)</i>	2	
<i>diclofenac sodium er</i>	2	
<i>etodolac</i>	2	
<i>etodolac er</i>	2	
FENOPROFEN CALCIUM 600 MG TAB	2	
<i>flurbiprofen (50 mg tab, 100 mg tab)</i>	2	
<i>ibu</i>	2	
<i>ibuprofen (100 mg/5ml suspension, 200 mg/10ml suspension, 400 mg tab, 600 mg tab, 800 mg tab)</i>	2	
<i>indomethacin (25 mg cap, 50 mg cap)</i>	2	
<i>indomethacin 25 mg/5ml suspension</i>	2	AGE
<i>indomethacin er</i>	2	
<i>ketorolac tromethamine 10 mg tab</i>	2	MFL (20 / Fill(s))
MECLOFENAMATE SODIUM	2	
<i>mefenamic acid</i>	2	PA, MDD (6.0 Per Day), MDS1 (7 / Fill)
<i>meloxicam (7.5 mg tab, 15 mg tab)</i>	2	
<i>nabumetone</i>	2	
<i>naproxen (250 mg tab, 375 mg tab, 500 mg tab)</i>	2	
<i>naproxen 125 mg/5ml suspension</i>	2	AGE
<i>naproxen sodium (275 mg tab, 550 mg tab)</i>	2	
<i>oxaprozin 600 mg tab</i>	2	MDD (3.0 Per Day)
<i>piroxicam</i>	2	
<i>sulindac</i>	2	
<b>PHOSPHODIESTERASE 4 (PDE4) INHIBITORS</b>		
OTEZLA (20 MG TAB, 30 MG TAB)	5	PA, MDD (2.0 Per Day), MDS1 (31 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
OTEZLA (4 X 10 & 51 X20 MG TAB THPK, 10 & 20 & 30 MG TAB THPK)	5	PA, MFL (55 / Fill), MDS1 (31 / Fill)
OTEZLA XR	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
OTEZLA/OTEZLA XR INITIATION PK	5	PA, MFL (41 / Fill), MDS1 (31 / Fill)
<b>PYRIMIDINE SYNTHESIS INHIBITORS</b>		
<i>leflunomide</i>	2	
<b>SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS</b>		
ENBREL (25 MG/0.5ML SOLN PRSYR, 25 MG/0.5ML SOLUTION)	5	PA, MFL (4 / Fill), MDS1 (31 / Fill)
ENBREL 50 MG/ML SOLN PRSYR	5	PA, MFL (8 / Fill), MDS1 (31 / Fill)
ENBREL MINI	5	PA, MFL (8 / Fill), MDS1 (31 / Fill)
ENBREL SURECLICK	5	PA, MFL (8 / Fill), MDS1 (31 / Fill)
<b>ANALGESICS - NONNARCOTIC (CONTINUED)</b>		
<b>ANALGESICS-SEDATIVES</b>		
<i>bac (butalbital-acetamin-caff)</i>	2	MDD (6.0 Per Day)
<i>butalbital-acetaminophen (50-300 mg tab, 50-325 mg tab)</i>	2	MDD (6.0 Per Day)
<i>butalbital-apap-caffeine 50-325-40 mg tab</i>	2	MDD (6.0 Per Day)
<i>butalbital-aspirin-caffeine</i>	2	MDD (6.0 Per Day)
<b>SALICYLATES</b>		
<i>adult aspirin regimen</i>	1	AGE, MDD (1.0 Per Day)
<i>aspirin (81 mg chew tab, 81 mg tab dr, 325 mg tab, 325 mg tab dr)</i>	1	AGE, MDD (1.0 Per Day)
<i>aspirin 81</i>	1	AGE, MDD (1.0 Per Day)
<i>aspirin adult low dose</i>	1	AGE, MDD (1.0 Per Day)
<i>aspirin adult low strength</i>	1	AGE, MDD (1.0 Per Day)
<i>aspirin childrens</i>	1	AGE, MDD (1.0 Per Day)
<i>aspirin ec adult low dose</i>	1	AGE, MDD (1.0 Per Day)
<i>aspirin ec low dose</i>	1	AGE, MDD (1.0 Per Day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>aspirin ec low strength</i>	1	AGE, MDD (1.0 Per Day)
<i>aspirin low dose</i>	1	AGE, MDD (1.0 Per Day)
<i>aspirin regimen</i>	1	AGE, MDD (1.0 Per Day)
<i>bayer advanced aspirin reg st</i>	1	AGE, MDD (1.0 Per Day)
<i>bayer aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>bayer aspirin ec low dose</i>	1	AGE, MDD (1.0 Per Day)
<i>bayer low dose</i>	1	AGE, MDD (1.0 Per Day)
<i>childrens aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>cvs aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>cvs aspirin adult low dose</i>	1	AGE, MDD (1.0 Per Day)
<i>cvs aspirin adult low strength</i>	1	AGE, MDD (1.0 Per Day)
<i>cvs aspirin ec</i>	1	AGE, MDD (1.0 Per Day)
<i>cvs aspirin low dose</i>	1	AGE, MDD (1.0 Per Day)
<i>cvs aspirin low strength</i>	1	AGE, MDD (1.0 Per Day)
<i>cvs genuine aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>diflunisal</i>	2	
<i>ecotrin</i>	1	AGE, MDD (1.0 Per Day)
<i>ecotrin arthrtis pain</i>	1	AGE, MDD (1.0 Per Day)
<i>ecotrin low strength</i>	1	AGE, MDD (1.0 Per Day)
<i>eq aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>eq aspirin adult low dose</i>	1	AGE, MDD (1.0 Per Day)
<i>eq aspirin low dose</i>	1	AGE, MDD (1.0 Per Day)
<i>eql aspirin ec</i>	1	AGE, MDD (1.0 Per Day)
<i>eql aspirin low dose</i>	1	AGE, MDD (1.0 Per Day)
<i>ft aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>ft aspirin low dose</i>	1	AGE, MDD (1.0 Per Day)
<i>ft enteric coated aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>genuine aspirin</i>	1	AGE, MDD (1.0 Per Day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>gnp adult aspirin low strength</i>	1	AGE, MDD (1.0 Per Day)
<i>gnp aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>gnp aspirin low dose</i>	1	AGE, MDD (1.0 Per Day)
<i>goodsense aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>goodsense aspirin adult low st</i>	1	AGE, MDD (1.0 Per Day)
<i>goodsense aspirin adults</i>	1	AGE, MDD (1.0 Per Day)
<i>goodsense aspirin low dose</i>	1	AGE, MDD (1.0 Per Day)
<i>h-e-b aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>hm adult aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>hm aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>hm aspirin ec</i>	1	AGE, MDD (1.0 Per Day)
<i>hm aspirin ec low dose</i>	1	AGE, MDD (1.0 Per Day)
<i>kls aspirin low dose</i>	1	AGE, MDD (1.0 Per Day)
<i>kp aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>medi-first aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>medique aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>meijer aspirin ec</i>	1	AGE, MDD (1.0 Per Day)
<i>mm aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>px aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>px enteric aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>qc aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>qc aspirin low dose</i>	1	AGE, MDD (1.0 Per Day)
<i>qc childrens aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>qc enteric aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>ra aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>ra aspirin adult low dose</i>	1	AGE, MDD (1.0 Per Day)
<i>ra aspirin adult low strength</i>	1	AGE, MDD (1.0 Per Day)
<i>ra aspirin childrens</i>	1	AGE, MDD (1.0 Per Day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>ra aspirin ec</i>	1	AGE, MDD (1.0 Per Day)
<i>ra aspirin ec adult low st</i>	1	AGE, MDD (1.0 Per Day)
<i>ra pain relief aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>salsalate</i>	2	
<i>sb aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>sb aspirin ec</i>	1	AGE, MDD (1.0 Per Day)
<i>sb childrens aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>sb low dose asa ec</i>	1	AGE, MDD (1.0 Per Day)
<i>sm aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>sm aspirin adult low strength</i>	1	AGE, MDD (1.0 Per Day)
<i>sm aspirin ec</i>	1	AGE, MDD (1.0 Per Day)
<i>sm aspirin ec low strength</i>	1	AGE, MDD (1.0 Per Day)
<i>sm aspirin low dose</i>	1	AGE, MDD (1.0 Per Day)
<i>sm childrens aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>st joseph aspirin</i>	1	AGE, MDD (1.0 Per Day)
<i>st joseph low dose</i>	1	AGE, MDD (1.0 Per Day)
<b>ANALGESICS - OPIOID (CONTINUED)</b>		
<b>CODEINE COMBINATIONS</b>		
ACETAMINOPHEN-CODEINE (120-12 MG/5ML SOLUTION, 300-30 MG/12.5ML SOLUTION)	2	
<i>acetaminophen-codeine (300-15 mg tab, 300-30 mg tab, 300-60 mg tab)</i>	2	MDD (12.0 Per Day)
<i>ascomp-codeine</i>	3	MDD (2.0 Per Day)
<i>butalbital-apap-caff-cod 50-300-40-30 mg cap</i>	3	MDD (6.0 Per Day)
<i>butalbital-apap-caff-cod 50-325-40-30 mg cap</i>	2	MDD (6.0 Per Day)
<i>butalbital-asa-caff-codeine</i>	3	MDD (2.0 Per Day)
<b>HYDROCODONE COMBINATIONS</b>		
<i>hydrocodone-acetaminophen (2.5-108 mg/5ml solution, 5-217 mg/10ml solution, 7.5-325 mg/15ml solution, 10-325 mg/15ml solution)</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
HYDROCODONE-ACETAMINOPHEN (2.5-325 MG TAB, 5-325 MG TAB, 7.5-325 MG TAB, 10-325 MG TAB)	2	MDD (8.0 Per Day)
HYDROCODONE-IBUPROFEN (7.5-200 MG TAB, 10-200 MG TAB)	2	MDD (7.0 Per Day)
<b>OPIOID AGONISTS</b>		
<i>codeine sulfate (15 mg tab, 30 mg tab, 60 mg tab)</i>	2	MDD (8.0 Per Day)
DISKETS	2	MDD (2.0 Per Day)
<i>fentanyl (25 mcg/hr patch 72hr, 50 mcg/hr patch 72hr, 75 mcg/hr patch 72hr, 100 mcg/hr patch 72hr)</i>	2	MDD (0.42 Per Day)
<i>fentanyl 12 mcg/hr patch 72hr</i>	2	
FENTANYL CITRATE (200 MCG LOZ HANDLE, 400 MCG TAB, 600 MCG TAB, 800 MCG LOZ HANDLE, 800 MCG TAB, 1600 MCG LOZ HANDLE)	2	MDD (4.0 Per Day)
HYDROMORPHONE HCL (1 MG/ML LIQUID, 3 MG SUPPOS)	2	MDD (15.0 Per Day)
<i>hydromorphone hcl (2 mg tab, 4 mg tab, 8 mg tab)</i>	2	MDD (6.0 Per Day)
<i>meperidine hcl 50 mg tab</i>	2	MDD (12.0 Per Day)
MEPERIDINE HCL 50 MG/5ML SOLUTION	2	MDD (120.0 Per Day)
<i>methadone hcl (5 mg tab, 10 mg tab)</i>	2	MDD (4.0 Per Day)
METHADONE HCL (5 MG/5ML SOLUTION, 10 MG/5ML SOLUTION, 10 MG/ML CONC)	2	
<i>methadone hcl 40 mg tab sol</i>	2	MDD (2.0 Per Day)
<i>methadone hcl intensol</i>	2	
<i>methadose 40 mg tab sol</i>	2	MDD (2.0 Per Day)
<i>morphine sulfate (10 mg/5ml solution, 20 mg/5ml solution)</i>	2	
<i>morphine sulfate (15 mg tab, 30 mg tab)</i>	2	MDD (6.0 Per Day)
MORPHINE SULFATE (CONCENTRATE) (100 MG/5ML SOLUTION)	2	
MORPHINE SULFATE ER (10 MG CAP ER 24H, 20 MG CAP ER 24H, 30 MG CAP ER 24H, 50 MG CAP ER 24H, 60 MG CAP ER 24H, 80 MG CAP ER 24H, 100 MG CAP ER 24H)	3	MDD (2.0 Per Day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>morphine sulfate er (100 mg tab er, 200 mg tab er)</i>	2	MDD (2.0 Per Day)
<i>morphine sulfate er (15 mg tab er, 30 mg tab er, 60 mg tab er)</i>	2	MDD (3.0 Per Day)
MORPHINE SULFATE ER BEADS	3	MDD (4.0 Per Day)
<i>oxycodone hcl (15 mg tab, 20 mg tab, 30 mg tab)</i>	2	MDD (6.0 Per Day)
<i>oxycodone hcl (5 mg cap, 5 mg tab, 10 mg tab)</i>	2	MDD (12.0 Per Day)
<i>oxycodone hcl 100 mg/5ml conc</i>	2	PA
<i>oxycodone hcl 5 mg/5ml solution</i>	2	
<i>oxymorphone hcl</i>	3	MDD (6.0 Per Day)
OXYMORPHONE HCL ER	4	MDD (2.0 Per Day)
<i>tramadol hcl (50 mg tab, 100 mg tab)</i>	2	MDD (8.0 Per Day)
TRAMADOL HCL (ER BIPHASIC)	2	MDD (1.0 Per Day)
<i>tramadol hcl er (100 mg tab er 24h, 200 mg tab er 24h, 300 mg tab er 24h)</i>	2	MDD (1.0 Per Day)
<b>OPIOID COMBINATIONS</b>		
<i>endocet</i>	2	MDD (12.0 Per Day)
<i>oxycodone-acetaminophen (2.5-325 mg tab, 5-325 mg tab, 5-325 mg/5ml solution, 7.5-325 mg tab, 10-300 mg/5ml solution, 10-325 mg tab)</i>	2	MDD (12.0 Per Day)
<b>OPIOID PARTIAL AGONISTS</b>		
BELBUCA	3	MFL (60 / Fill)
BRIXADI (WEEKLY) 16 MG/0.32ML SOLN PRSYR	5	MDD (0.08 Per Day), MDS1 (31 / Fill)
BRIXADI (WEEKLY) 24 MG/0.48ML SOLN PRSYR	5	MDD (0.13 Per Day), MDS1 (31 / Fill)
BRIXADI (WEEKLY) 32 MG/0.64ML SOLN PRSYR	5	MDD (0.17 Per Day), MDS1 (31 / Fill)
BRIXADI (WEEKLY) 8 MG/0.16ML SOLN PRSYR	5	MDD (0.04 Per Day), MDS1 (31 / Fill)
BRIXADI 128 MG/0.36ML SOLN PRSYR	5	MDD (0.09 Per Day), MDS1 (31 / Fill)
BRIXADI 64 MG/0.18ML SOLN PRSYR	5	MDD (0.05 Per Day), MDS1 (31 / Fill)

RxCore CO Option

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
BRIXADI 96 MG/0.27ML SOLN PRSYR	5	MDD (0.07 Per Day), MDS1 (31 / Fill)
<i>buprenorphine</i>	3	MFL (4 / Fill)
<i>buprenorphine hcl (2 mg sl tab, 8 mg sl tab)</i>	2	MDD (4.0 Per Day)
<i>buprenorphine hcl-naloxone hcl</i>	2	MDD (4.0 Per Day)
<i>pentazocine-naloxone hcl</i>	3	MDD (12.0 Per Day)
SUBLOCADE 100 MG/0.5ML SOLN PRSYR	5	MFL (1 / Fill), MDS1 (31 / Fill)
SUBLOCADE 300 MG/1.5ML SOLN PRSYR	5	MFL (3 / Fill), MDS1 (31 / Fill)
<b>TRAMADOL COMBINATIONS</b>		
<i>tramadol-acetaminophen</i>	2	MDD (8.0 Per Day)
<b>ANDROGENS-ANABOLIC (CONTINUED)</b>		
<b>ANDROGENS</b>		
<i>danazol (50 mg cap, 100 mg cap)</i>	2	
<i>danazol 200 mg cap</i>	4	
<i>depo-testosterone</i>	2	MDS1 (90 / Fill)
METHITEST	4	
<i>methyltestosterone</i>	2	
<i>testosterone (1.62 % gel, 20.25 mg/1.25gm (1.62%) gel, 20.25 mg/act (1.62%) gel, 25 mg/2.5gm (1%) gel, 40.5 mg/2.5gm (1.62%) gel)</i>	3	MDD (5.0 Per Day)
TESTOSTERONE 50 MG/5GM (1%) GEL	3	MDD (10.0 Per Day)
TESTOSTERONE CYPIONATE (200 MG/ML SOLUTION)	2	MDS1 (90 / Fill)
TESTOSTERONE ENANTHATE	2	MDS1 (90 / Fill)
<b>ANORECTAL AND RELATED PRODUCTS (CONTINUED)</b>		
<b>INTRARECTAL STEROIDS</b>		
<i>budesonide (2 mg foam, 2 mg/act foam)</i>	2	ST, MFL (66.8 / Fill), MDS1 (31 / Fill)
<i>hydrocortisone 100 mg/60ml enema</i>	3	
<b>RECTAL ANESTHETIC/STEROIDS</b>		
HYDROCORT-PRAMOXINE (PERIANAL)	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
HYDROCORTISONE ACE-PRAMOXINE 1-1 % CREAM	2	
<i>lidocaine-hydrocort (perianal)</i>	2	
PROCTOFOAM HC	4	
<b>RECTAL STEROIDS</b>		
<i>hydrocortisone (perianal) 2.5 % cream</i>	2	
HYDROCORTISONE ACETATE 25 MG SUPPOS	2	
HYDROCORTISONE ACETATE 30 MG SUPPOS	3	
<i>procto-med hc</i>	2	
<i>proctosol hc</i>	2	
<i>proctozone-hc</i>	2	
<b>ANTHELMINTICS (CONTINUED)</b>		
<i>albendazole</i>	2	PA
<i>ivermectin 3 mg tab</i>	3	
<i>praziquantel</i>	3	
<b>ANTI-INFECTIVE AGENTS - MISC. (CONTINUED)</b>		
AEMCOLO	4	MFL (12 / Fill)
FIRST-METRONIDAZOLE	4	
<i>metronidazole (125 mg tab, 250 mg tab, 500 mg tab)</i>	2	
METRONIDAZOLE BENZO+SYRSPEND	4	
<i>pentamidine isethionate</i>	3	
<i>tinidazole</i>	2	
<i>trimethoprim</i>	2	
XIFAXAN	4	PA
<b>ANTI-INFECTIVE MISC. - COMBINATIONS</b>		
<i>sulfamethoxazole-trimethoprim (200-40 mg/5ml suspension, 400-80 mg tab, 800-160 mg tab, 800-160 mg/20ml suspension)</i>	2	
<i>sulfatrim pediatric</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<b>ANTIPROTOZOAL AGENTS</b>		
<i>atovaquone</i>	3	
LAMPIT	4	PA, AGE
<i>nitazoxanide</i>	5	MFL (20 / Fill)
<b>GLYCOPEPTIDES</b>		
<i>vancomycin hcl (125 mg cap, 250 mg cap)</i>	3	MFL (90 / Fill)
<i>vancomycin hcl (25 mg/ml recon soln, 50 mg/ml recon soln, 250 mg/5ml recon soln)</i>	3	MFL (450 / Fill)
<b>LEPROSTATICS</b>		
<i>dapsone (25 mg tab, 100 mg tab)</i>	2	
<b>LINCOSAMIDES</b>		
<i>clindamycin hcl</i>	2	
<i>clindamycin palmitate hcl</i>	2	
<b>MONOBACTAMS</b>		
CAYSTON	5	PA, MFL (84 / Fill), MDS1 (31 / Fill)
<b>OXAZOLIDINONES</b>		
<i>linezolid 100 mg/5ml recon susp</i>	2	MFL (900 / Fill)
<i>linezolid 600 mg tab</i>	2	MDD (2.0 Per Day)
<b>URINARY ANTI-INFECTIVES</b>		
<i>methenamine hippurate</i>	2	
<i>methenamine mandelate</i>	2	
NITROFURANTOIN (25 MG/5ML SUSPENSION, 50 MG/10ML SUSPENSION, 50 MG/5ML SUSPENSION)	3	AGE
<i>nitrofurantoin macrocrystal</i>	2	
<i>nitrofurantoin monohyd macro</i>	2	
<b>ANTIANGINAL AGENTS (CONTINUED)</b>		
<b>ANTIANGINALS-OTHER</b>		
<i>ranolazine er</i>	2	MDD (4.0 Per Day)

Drug Name	Drug Tier	Requirements / Limits
<b>NITRATES</b>		
<i>isosorbide dinitrate (5 mg tab, 10 mg tab, 20 mg tab, 30 mg tab)</i>	2	
<i>isosorbide mononitrate</i>	2	
<i>isosorbide mononitrate er</i>	2	
NITRO-BID	4	
<i>nitroglycerin (0.1 mg/hr patch 24hr, 0.2 mg/hr patch 24hr, 0.3 mg sl tab, 0.4 mg sl tab, 0.4 mg/hr patch 24hr, 0.4 mg/spray solution, 0.6 mg sl tab, 0.6 mg/hr patch 24hr)</i>	2	
<b>ANTI-ANXIETY AGENTS (CONTINUED)</b>		
<b>ANTI-ANXIETY AGENTS - MISC.</b>		
<i>bupirone hcl</i>	2	
<i>hydroxyzine hcl (10 mg tab, 10 mg/5ml syrup, 25 mg tab, 50 mg tab)</i>	2	
HYDROXYZINE PAMOATE (25 MG CAP, 50 MG CAP, 100 MG CAP)	2	
<i>meprobamate</i>	3	
<b>BENZODIAZEPINES</b>		
<i>alprazolam</i>	2	
<i>alprazolam er</i>	2	MDD (1.0 Per Day)
<i>alprazolam xr</i>	2	MDD (1.0 Per Day)
<i>chlordiazepoxide hcl</i>	2	
<i>clorazepate dipotassium (3.75 mg tab, 7.5 mg tab)</i>	2	MDD (3.0 Per Day)
<i>clorazepate dipotassium 15 mg tab</i>	2	MDD (6.0 Per Day)
<i>diazepam (2 mg tab, 5 mg tab, 5 mg/5ml solution, 5 mg/ml conc, 10 mg tab)</i>	2	
<i>diazepam intensol</i>	2	
<i>lorazepam (0.5 mg tab, 1 mg tab, 2 mg tab, 2 mg/ml conc)</i>	2	
<i>lorazepam intensol</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>oxazepam</i>	2	MDD (4.0 Per Day)
<b>ANTIARRHYTHMICS (CONTINUED)</b>		
<b>ANTIARRHYTHMICS TYPE I-A</b>		
<i>disopyramide phosphate</i>	3	
<i>quinidine gluconate er</i>	2	
QUINIDINE SULFATE	2	
<b>ANTIARRHYTHMICS TYPE I-B</b>		
<i>mexiletine hcl</i>	2	
<b>ANTIARRHYTHMICS TYPE I-C</b>		
<i>flecainide acetate</i>	2	
<i>propafenone hcl</i>	2	
<i>propafenone hcl er</i>	2	
<b>ANTIARRHYTHMICS TYPE III</b>		
<i>amiodarone hcl (100 mg tab, 200 mg tab, 400 mg tab)</i>	2	
<i>dofetilide</i>	2	
MULTAQ	3	
<i>pacerone</i>	2	
<b>ANTIASTHMATIC AND BRONCHODILATOR AGENTS (CONTINUED)</b>		
<b>ADRENERGIC COMBINATIONS</b>		
AIRSUPRA	3	QL, MFL (21.4 / Fill)
ANORO ELLIPTA	3	MDD (2.0 Per Day)
BREZTRI AEROSPHERE	3	AGE, MFL (10.7 / Fill)
COMBIVENT RESPIMAT	3	MFL (8 / Fill)
DULERA	4	PA, MFL (13 / Fill)
FLUTICASONE FUROATE-VILANTEROL	2	PA
<i>fluticasone-salmeterol (100-50 mcg/act aer pow ba, 250-50 mcg/act aer pow ba, 500-50 mcg/act aer pow ba)</i>	2	MDD (2.0 Per Day), MFL (60 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
FLUTICASONE-SALMETEROL (45-21 MCG/ACT AEROSOL, 115-21 MCG/ACT AEROSOL, 230-21 MCG/ACT AEROSOL)	4	PA, MFL (12 / Fill)
FLUTICASONE-SALMETEROL (55-14 MCG/ACT AER POW BA, 113-14 MCG/ACT AER POW BA, 232-14 MCG/ACT AER POW BA)	2	MFL (1 / Fill)
<i>ipratropium-albuterol</i>	2	
STIOLTO RESPIMAT	3	MDD (0.17 Per Day)
SYMBICORT	2	MFL (20.4 / Fill), MDS1 (90 / Fill)
TRELEGY ELLIPTA	3	AGE, MFL (60 / Fill)
<i>wixela inhub</i>	2	MDD (2.0 Per Day), MFL (60 / Fill)
<b>ANTI-IGE MONOCLONAL ANTIBODIES</b>		
XOLAIR (75 MG/0.5ML SOLN A-INJ, 75 MG/0.5ML SOLN PRSYR, 150 MG RECON SOLN, 150 MG/ML SOLN A-INJ, 150 MG/ML SOLN PRSYR, 300 MG/2ML SOLN A-INJ, 300 MG/2ML SOLN PRSYR)	5	PA, MFL (8 / Fill), MDS1 (31 / Fill)
<b>ANTI-INFLAMMATORY AGENTS</b>		
<i>cromolyn sodium 20 mg/2ml nebu soln</i>	3	
<b>BETA ADRENERGICS</b>		
<i>albuterol sulfate (2 mg tab, 2 mg/5ml syrup, 4 mg tab, 8 mg/20ml syrup)</i>	2	
<i>albuterol sulfate hfa</i>	2	MFL (54 / Fill), MDS1 (40 / Fill)
<i>arformoterol tartrate</i>	3	MFL (120 / Fill)
<i>formoterol fumarate</i>	4	MFL (120 / Fill)
LEVALBUTEROL TARTRATE	2	MFL (45 / Fill)
SEREVENT DISKUS	3	
STRIVERDI RESPIMAT	3	
<i>terbutaline sulfate (2.5 mg tab, 5 mg tab)</i>	3	MDD (3.0 Per Day)
VENTOLIN HFA	3	MFL (54 / Fill), MDS1 (40 / Fill)
<b>BRONCHODILATORS - ANTICHOLINERGICS</b>		
<i>ipratropium bromide 0.02 % solution</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
SPIRIVA HANDIHALER	3	MDD (1.0 Per Day)
SPIRIVA RESPIMAT	3	MFL (4 / Fill)
<b>INTERLEUKIN-5 ANTAGONISTS (IGG1 KAPPA)</b>		
FASENRA	5	PA, MFL (1 / Fill), MDS1 (56 / Fill)
FASENRA PEN	5	PA, MFL (1 / Fill), MDS1 (56 / Fill)
<b>LEUKOTRIENE RECEPTOR ANTAGONISTS</b>		
<i>montelukast sodium (4 mg chew tab, 5 mg chew tab, 10 mg tab)</i>	2	MDD (2.0 Per Day)
<i>montelukast sodium 4 mg packet</i>	2	MDD (1.0 Per Day)
<b>SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS</b>		
<i>roflumilast</i>	2	MDD (1.0 Per Day)
<b>STEROID INHALANTS</b>		
ALVESCO	4	PA, MFL (6.1 / Fill)
ARNUITY ELLIPTA	3	MFL (30 / Fill)
ASMANEX (120 METERED DOSES)	3	MFL (1 / Fill)
ASMANEX (14 METERED DOSES)	3	MFL (1 / Fill)
ASMANEX (30 METERED DOSES)	3	MFL (1 / Fill)
ASMANEX (60 METERED DOSES)	3	MFL (1 / Fill)
ASMANEX HFA	3	MFL (13 / Fill)
<i>budesonide (0.25 mg/2ml suspension, 0.5 mg/2ml suspension)</i>	3	MDD (8.0 Per Day)
FLUTICASONE PROPIONATE DISKUS (50 MCG/ACT AER POW BA, 100 MCG/ACT AER POW BA)	3	MFL (60 / Fill)
FLUTICASONE PROPIONATE DISKUS 250 MCG/ACT AER POW BA	3	MFL (120 / Fill)
FLUTICASONE PROPIONATE HFA (110 MCG/ACT AEROSOL, 220 MCG/ACT AEROSOL)	3	MFL (24 / Fill)
<i>fluticasone propionate hfa 44 mcg/act aerosol</i>	3	MFL (21.2 / Fill)
PULMICORT FLEXHALER 180 MCG/ACT AER POW BA	4	PA, MFL (2 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
PULMICORT FLEXHALER 90 MCG/ACT AER POW BA	4	PA, MFL (1 / Fill)
QVAR REDHALER	4	PA, MFL (10.6 / Fill)
<b>THYMIC STROMAL LYMPHOPOIETIN (TSLP) ANTAGONISTS</b>		
TEZSPIRE 210 MG/1.91ML SOLN A-INJ	5	PA, MDD (0.09 Per Day), MDS1 (31 / Fill)
<b>XANTHINES</b>		
<i>theophylline er (100 mg tab er 12h, 200 mg tab er 12h, 300 mg tab er 12h, 400 mg tab er 24h, 450 mg tab er 12h, 600 mg tab er 24h)</i>	2	
<b>ANTICOAGULANTS (CONTINUED)</b>		
<b>COUMARIN ANTICOAGULANTS</b>		
<i>jantoven</i>	2	
<i>warfarin sodium</i>	2	
<b>DIRECT FACTOR XA INHIBITORS</b>		
ELIQUIS (0.15 MG CAP SPRINK, 0.5 MG TAB SOL)	3	AGE, MDD (4.0 Per Day)
ELIQUIS (1.5 MG PACK)	3	AGE, MDD (12.0 Per Day)
ELIQUIS (2 MG PACK)	3	AGE, MDD (16.0 Per Day)
ELIQUIS 2.5 MG TAB	3	MDD (2.0 Per Day)
ELIQUIS 5 MG TAB	3	MDD (4.0 Per Day)
ELIQUIS DVT/PE STARTER PACK	3	MFL (74 / Fill)
XARELTO 1 MG/ML RECON SUSP	3	AGE, MDD (20.0 Per Day)
XARELTO 10 MG TAB	3	MDD (1.0 Per Day)
XARELTO 15 MG TAB	3	MFL (42 / Fill)
XARELTO 2.5 MG TAB	3	MDD (2.0 Per Day)
XARELTO 20 MG TAB	3	MDD (1.0 Per Day), MFL (30 / Fill)
XARELTO STARTER PACK	3	MFL (51 / Fill(s))
<b>HEPARINS AND HEPARINOID-LIKE AGENTS</b>		
<i>heparin sodium (porcine) (5000 unit/ml solution, 10000 unit/ml solution, 20000 unit/ml solution)</i>	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>heparin sodium (porcine) +rfid</i>	2	
<i>heparin sodium (porcine) 1000 unit/ml solution</i>	2	
<i>heparin sodium (porcine) pf 1000 unit/ml solution</i>	2	
<i>heparin sodium (porcine) pf 5000 unit/0.5ml solution</i>	3	
<b>LOW MOLECULAR WEIGHT HEPARINS</b>		
<i>enoxaparin sodium</i>	3	
<b>SYNTHETIC HEPARINOID-LIKE AGENTS</b>		
<i>fondaparinux sodium</i>	2	PA, MDS1 (31 / Fill)
<b>THROMBIN INHIBITORS - SELECTIVE DIRECT &amp; REVERSIBLE</b>		
<i>dabigatran etexilate mesylate</i>	2	MDD (2.0 Per Day)
<b>ANTICONVULSANTS (CONTINUED)</b>		
<b>ANTICONVULSANTS - BENZODIAZEPINES</b>		
<i>clobazam 10 mg tab</i>	2	MDD (2.0 Per Day)
<i>clobazam 2.5 mg/ml suspension</i>	2	MDD (16.0 Per Day)
<i>clobazam 20 mg tab</i>	2	MDD (2.0 Per Day)
<i>clonazepam (0.125 mg tab disp, 0.25 mg tab disp, 0.5 mg tab, 0.5 mg tab disp, 1 mg tab, 1 mg tab disp, 2 mg tab disp)</i>	2	MDD (10.0 Per Day)
<i>clonazepam 2 mg tab</i>	2	MDD (10.0 Per Day)
<i>diazepam (2.5 mg gel, 10 mg gel, 20 mg gel)</i>	2	MFL (5 / Fill)
LIBERVANT	4	MFL (10 / Fill)
NAYZILAM	4	MFL (6 / Fill(s))
<b>ANTICONVULSANTS - MISC.</b>		
<i>carbamazepine (100 mg/5ml suspension, 200 mg/10ml suspension)</i>	2	MDD (80.0 Per Day)
<i>carbamazepine (200 mg chew tab, 200 mg tab)</i>	2	MDD (8.0 Per Day)
<i>carbamazepine 100 mg chew tab</i>	2	MDD (16.0 Per Day)
<i>carbamazepine er (100 mg cap er 12h, 100 mg tab er 12h)</i>	2	MDD (16.0 Per Day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>carbamazepine er (200 mg cap er 12h, 200 mg tab er 12h)</i>	2	MDD (8.0 Per Day)
<i>carbamazepine er 300 mg cap er 12h</i>	2	MDD (5.0 Per Day)
<i>carbamazepine er 400 mg tab er 12h</i>	2	MDD (4.0 Per Day)
<i>epitol</i>	2	MDD (8.0 Per Day)
<i>gabapentin (250 mg/5ml solution, 300 mg/6ml solution)</i>	2	MDD (72.0 Per Day)
<i>gabapentin 100 mg cap</i>	2	MDD (48.0 Per Day)
<i>gabapentin 300 mg cap</i>	2	MDD (16.0 Per Day)
<i>gabapentin 400 mg cap</i>	2	MDD (12.0 Per Day)
<i>gabapentin 600 mg tab</i>	2	MDD (8.0 Per Day)
<i>gabapentin 800 mg tab</i>	2	MDD (6.0 Per Day)
<i>lacosamide (10 mg/ml solution, 50 mg/5ml solution, 100 mg/10ml solution)</i>	2	MDD (40.0 Per Day)
<i>lacosamide (50 mg tab, 100 mg tab, 150 mg tab, 200 mg tab)</i>	2	MDD (2.0 Per Day)
<i>lamotrigine (21 x 25 mg &amp; 7 x 50 mg kit, 25 &amp; 50 &amp; 100 mg kit, 42 x 50 mg &amp; 14x100 mg kit)</i>	2	
<i>lamotrigine (5 mg chew tab, 50 mg tab disp)</i>	2	MDD (4.0 Per Day)
<i>lamotrigine 100 mg tab</i>	2	MDD (8.0 Per Day)
<i>lamotrigine 100 mg tab disp</i>	2	MDD (2.0 Per Day)
<i>lamotrigine 150 mg tab</i>	2	MDD (6.0 Per Day)
<i>lamotrigine 200 mg tab</i>	2	MDD (4.0 Per Day)
<i>lamotrigine 200 mg tab disp</i>	2	MDD (3.0 Per Day)
<i>lamotrigine 25 mg chew tab</i>	2	MDD (7.0 Per Day)
<i>lamotrigine 25 mg tab</i>	2	MDD (10.0 Per Day)
<i>lamotrigine 25 mg tab disp</i>	2	MDD (7.0 Per Day)
<i>lamotrigine er (100 mg tab er 24h, 200 mg tab er 24h)</i>	2	MDD (3.0 Per Day)
<i>lamotrigine er (250 mg tab er 24h, 300 mg tab er 24h)</i>	2	MDD (2.0 Per Day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>lamotrigine er 25 mg tab er 24h</i>	2	MDD (2.0 Per Day)
<i>lamotrigine er 50 mg tab er 24h</i>	2	MDD (1.0 Per Day)
<i>levetiracetam (100 mg/ml solution, 500 mg/5ml solution)</i>	2	MDD (30.0 Per Day)
<i>levetiracetam 1000 mg tab</i>	2	MDD (4.0 Per Day)
<i>levetiracetam 250 mg tab</i>	2	MDD (16.0 Per Day)
<i>levetiracetam 500 mg tab</i>	2	MDD (8.0 Per Day)
<i>levetiracetam 750 mg tab</i>	2	MDD (6.0 Per Day)
<i>levetiracetam er 500 mg tab er 24h</i>	2	MDD (8.0 Per Day)
<i>levetiracetam er 750 mg tab er 24h</i>	2	MDD (6.0 Per Day)
<i>oxcarbazepine (150 mg tab, 300 mg/5ml suspension)</i>	2	MDD (20.0 Per Day)
<i>oxcarbazepine 300 mg tab</i>	2	MDD (10.0 Per Day)
<i>oxcarbazepine 600 mg tab</i>	2	MDD (4.0 Per Day)
<i>pregabalin (200 mg cap, 225 mg cap)</i>	2	MDD (4.0 Per Day)
<i>pregabalin 100 mg cap</i>	2	MDD (8.0 Per Day)
<i>pregabalin 150 mg cap</i>	2	MDD (5.0 Per Day)
<i>pregabalin 20 mg/ml solution</i>	2	
<i>pregabalin 25 mg cap</i>	2	MDD (32.0 Per Day)
<i>pregabalin 300 mg cap</i>	2	MDD (3.0 Per Day)
<i>pregabalin 50 mg cap</i>	2	MDD (16.0 Per Day)
<i>pregabalin 75 mg cap</i>	2	MDD (11.0 Per Day)
<i>primidone 250 mg tab</i>	2	MDD (3.0 Per Day)
<i>primidone 50 mg tab</i>	2	MDD (15.0 Per Day)
<i>roweepira</i>	2	MDD (8.0 Per Day)
<i>rufinamide 200 mg tab</i>	3	MDD (4.0 Per Day)
<i>rufinamide 40 mg/ml suspension</i>	3	MDD (80.0 Per Day)
<i>rufinamide 400 mg tab</i>	3	MDD (8.0 Per Day)
TEGRETOL-XR 100 MG TAB ER 12H	4	ST, MDD (16.0 Per Day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
TEGRETOL-XR 200 MG TAB ER 12H	4	ST, MDD (8.0 Per Day)
TEGRETOL-XR 400 MG TAB ER 12H	4	ST, MDD (4.0 Per Day)
TOPAMAX SPRINKLE 15 MG CAP SPRINK	4	ST, MDD (10.0 Per Day)
TOPAMAX SPRINKLE 25 MG CAP SPRINK	4	ST, MDD (10.0 Per Day)
<i>topiramate 100 mg tab</i>	2	MDD (6.0 Per Day)
<i>topiramate 15 mg cap sprink</i>	2	MDD (10.0 Per Day)
<i>topiramate 200 mg tab</i>	2	MDD (3.0 Per Day)
<i>topiramate 25 mg cap sprink</i>	2	MDD (10.0 Per Day)
<i>topiramate 25 mg tab</i>	2	MDD (24.0 Per Day)
<i>topiramate 25 mg/ml solution</i>	4	AGE, MDD (16.0 Per Day)
<i>topiramate 50 mg tab</i>	2	MDD (12.0 Per Day)
<i>zonisamide 100 mg cap</i>	2	MDD (6.0 Per Day)
<i>zonisamide 25 mg cap</i>	2	MDD (24.0 Per Day)
<i>zonisamide 50 mg cap</i>	2	MDD (12.0 Per Day)
<b>CARBAMATES</b>		
<i>felbamate 400 mg tab</i>	2	MDD (9.0 Per Day)
<i>felbamate 600 mg tab</i>	2	MDD (6.0 Per Day)
<i>felbamate 600 mg/5ml suspension</i>	2	MDD (30.0 Per Day)
XCOPRI (14 X 150 MG & 14 X200 MG TAB THPK, 14 X 50 MG & 14 X100 MG TAB THPK)	4	MDD (1.0 Per Day), MFL (28 / Fill)
XCOPRI (150 MG TAB, 200 MG TAB)	4	MDD (2.0 Per Day)
XCOPRI (25 MG TAB, 50 MG TAB, 100 MG TAB)	4	MDD (1.0 Per Day)
XCOPRI (250 MG DAILY DOSE)	4	MDD (2.0 Per Day), MFL (56 / Fill)
XCOPRI (350 MG DAILY DOSE)	4	MDD (2.0 Per Day), MFL (56 / Fill)
XCOPRI 14 X 12.5 MG & 14 X 25 MG TAB THPK	4	MFL (28 / Fill)
<b>GABA MODULATORS</b>		
TIAGABINE HCL 12 MG TAB	2	MDD (4.0 Per Day)
TIAGABINE HCL 16 MG TAB	2	MDD (3.0 Per Day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>tiagabine hcl 2 mg tab</i>	2	MDD (28.0 Per Day)
<i>tiagabine hcl 4 mg tab</i>	2	MDD (14.0 Per Day)
<b>HYDANTOINS</b>		
DILANTIN 100 MG CAP	4	ST, MDD (10.0 Per Day)
DILANTIN 125 MG/5ML SUSPENSION	4	ST, MDD (15.0 Per Day)
DILANTIN 30 MG CAP	4	ST, MDD (20.0 Per Day)
DILANTIN-125	4	ST, MDD (15.0 Per Day)
<i>phenytek 200 mg cap</i>	2	MDD (6.0 Per Day)
<i>phenytek 300 mg cap</i>	2	MDD (4.0 Per Day)
<i>phenytoin (100 mg/4ml suspension, 125 mg/5ml suspension)</i>	2	MDD (15.0 Per Day)
<i>phenytoin 50 mg chew tab</i>	2	MDD (7.0 Per Day)
<i>phenytoin infatabs</i>	2	MDD (7.0 Per Day)
<i>phenytoin sodium extended 100 mg cap</i>	2	MDD (10.0 Per Day)
<i>phenytoin sodium extended 200 mg cap</i>	2	MDD (6.0 Per Day)
<i>phenytoin sodium extended 300 mg cap</i>	2	MDD (4.0 Per Day)
<b>SUCCINIMIDES</b>		
CELONTIN	4	ST, MDD (4.0 Per Day)
<i>ethosuximide 250 mg cap</i>	2	MDD (8.0 Per Day)
<i>ethosuximide 250 mg/5ml solution</i>	2	MDD (40.0 Per Day)
<i>methsuximide</i>	2	MDD (4.0 Per Day)
<b>VALPROIC ACID</b>		
<i>divalproex sodium (125 mg cap dr, 125 mg tab dr)</i>	2	MDD (20.0 Per Day)
<i>divalproex sodium 250 mg tab dr</i>	2	MDD (17.0 Per Day)
<i>divalproex sodium 500 mg tab dr</i>	2	MDD (9.0 Per Day)
<i>divalproex sodium er 250 mg tab er 24h</i>	2	MDD (17.0 Per Day)
<i>divalproex sodium er 500 mg tab er 24h</i>	2	MDD (9.0 Per Day)
<i>valproic acid (250 mg/5ml solution, 500 mg/10ml solution)</i>	2	MDD (100.0 Per Day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>valproic acid 250 mg cap</i>	2	MDD (17.0 Per Day)
<b>ANTIDEPRESSANTS (CONTINUED)</b>		
<b>ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS)</b>		
<i>mirtazapine</i>	2	
<b>ANTIDEPRESSANTS - MISC.</b>		
<i>bupropion hcl</i>	2	
<i>bupropion hcl er (sr)</i>	2	
<i>bupropion hcl er (xl) (150 mg tab er 24h, 300 mg tab er 24h)</i>	2	
<b>MONOAMINE OXIDASE INHIBITORS (MAOIS)</b>		
PHENELZINE SULFATE	2	
<i>tranylcypromine sulfate</i>	3	
<b>SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)</b>		
<i>citalopram hydrobromide (10 mg tab, 20 mg tab, 40 mg tab)</i>	2	MDD (10.0 Per Day)
<i>citalopram hydrobromide (10 mg/5ml solution, 20 mg/10ml solution)</i>	2	
<i>escitalopram oxalate (5 mg tab, 10 mg tab, 20 mg tab)</i>	2	MDD (10.0 Per Day)
<i>escitalopram oxalate (5 mg/5ml solution, 10 mg/10ml solution)</i>	2	
<i>fluoxetine hcl (10 mg cap, 20 mg cap, 20 mg/5ml solution, 40 mg cap)</i>	2	
<i>fluoxetine hcl (10 mg tab, 20 mg tab, 60 mg tab)</i>	1	
FLUOXETINE HCL 60 MG TAB	1	
FLUOXETINE HCL 90 MG CAP DR	2	MFL (4 / day(s))
<i>fluvoxamine maleate</i>	2	
<i>fluvoxamine maleate er 100 mg cap er 24h</i>	4	MDD (3.0 Per Day)
<i>fluvoxamine maleate er 150 mg cap er 24h</i>	4	MDD (2.0 Per Day)
<i>paroxetine hcl (10 mg tab, 20 mg tab, 30 mg tab, 40 mg tab)</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
PAROXETINE HCL 10 MG/5ML SUSPENSION	2	
<i>paroxetine hcl er</i>	2	
<i>sertraline hcl (25 mg tab, 50 mg tab, 100 mg tab)</i>	2	
<i>sertraline hcl 20 mg/ml conc</i>	2	MDD (10.0 Per Day)
<b>SEROTONIN MODULATORS</b>		
NEFAZODONE HCL (100 MG TAB, 150 MG TAB, 200 MG TAB, 250 MG TAB)	2	
<i>trazodone hcl (50 mg tab, 100 mg tab, 150 mg tab)</i>	2	
<i>vilazodone hcl</i>	2	
<b>SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)</b>		
<i>desvenlafaxine succinate er</i>	2	
<i>duloxetine hcl (20 mg cp dr part, 30 mg cp dr part, 60 mg cp dr part)</i>	2	MDD (10.0 Per Day)
<i>venlafaxine hcl</i>	2	
<i>venlafaxine hcl er</i>	2	
<b>TRICYCLIC AGENTS</b>		
<i>amitriptyline hcl</i>	2	
<i>amoxapine</i>	2	
<i>clomipramine hcl (25 mg cap, 75 mg cap)</i>	2	MDD (3.0 Per Day)
<i>clomipramine hcl 50 mg cap</i>	2	MDD (5.0 Per Day)
<i>desipramine hcl</i>	2	
<i>doxepin hcl (10 mg cap, 25 mg cap, 50 mg cap, 75 mg cap, 100 mg cap, 150 mg cap)</i>	2	
<i>imipramine hcl</i>	2	
<i>nortriptyline hcl (10 mg cap, 10 mg/5ml solution, 25 mg cap, 50 mg cap, 75 mg cap)</i>	2	
<b>ANTIDIABETICS (CONTINUED)</b>		
<b>ALPHA-GLUCOSIDASE INHIBITORS</b>		
<i>acarbose</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
MIGLITOL	2	
<b>BIGUANIDES</b>		
<i>metformin hcl (500 mg tab, 500 mg/5ml solution, 750 mg tab, 850 mg tab, 1000 mg tab)</i>	2	
<i>metformin hcl er 500 mg tab er 24h</i>	2	
<b>DIABETIC OTHER</b>		
BAQSIMI ONE PACK	3	
BAQSIMI TWO PACK	3	
<i>diazoxide</i>	4	
<i>glucagon emergency 1 mg recon soln</i>	2	
GLUCAGON EMERGENCY 1 MG RECON SOLN	2	
GVOKE HYPOPEN 1-PACK	3	
GVOKE HYPOPEN 2-PACK	3	
GVOKE KIT	3	
GVOKE PFS	3	
<b>DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS</b>		
ALOGLIPTIN BENZOATE	2	MDD (1.0 Per Day)
<i>saxagliptin hcl</i>	2	MDD (1.0 Per Day)
<b>DIPEPTIDYL PEPTIDASE-4 INHIBITOR-BIGUANIDE COMBINATIONS</b>		
ALOGLIPTIN-METFORMIN HCL	2	MDD (2.0 Per Day)
<i>saxagliptin-metformin er</i>	2	MDD (1.0 Per Day)
<b>DPP-4 INHIBITOR-THIAZOLIDINEDIONE COMBINATIONS</b>		
ALOGLIPTIN-PIOGLITAZONE (12.5-30 MG TAB, 25-15 MG TAB, 25-30 MG TAB, 25-45 MG TAB)	2	MDD (2.0 Per Day)
<b>HUMAN INSULIN</b>		
FIASP	3	MDS1 (40 / Fill)
FIASP FLEXTOUCH	3	MDS1 (40 / Fill)
FIASP PENFILL	3	MDS1 (40 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
FIASP PUMPCART	3	MDS1 (40 / Fill)
HUMALOG	3	
HUMALOG JUNIOR KWIKPEN	3	
HUMALOG KWIKPEN 100 UNIT/ML SOLN PEN	3	
HUMALOG MIX 50/50 KWIKPEN	3	
HUMALOG MIX 75/25 KWIKPEN	3	
HUMALOG TEMPO PEN	3	
HUMULIN R U-500 (CONCENTRATED)	3	PA, MDD (2.7 Per Day), MDS1 (40 / Fill)
HUMULIN R U-500 KWIKPEN	3	PA, MDD (2.7 Per Day), MDS1 (40 / Fill)
INSULIN ASP PROT & ASP FLEXPEN	3	MDS1 (40 / Fill)
INSULIN ASPART	3	MDS1 (40 / Fill)
INSULIN ASPART FLEXPEN	3	MDS1 (40 / Fill)
INSULIN ASPART PENFILL	3	MDS1 (40 / Fill)
INSULIN ASPART PROT & ASPART	3	MDS1 (40 / Fill)
INSULIN LISPRO	3	
INSULIN LISPRO (1 UNIT DIAL)	3	
INSULIN LISPRO JUNIOR KWIKPEN	3	
INSULIN LISPRO PROT & LISPRO	3	
LANTUS	3	MDS1 (40 / Fill)
LANTUS SOLOSTAR	3	MDS1 (40 / Fill)
NOVOLIN 70/30	1	MDS1 (40 / Fill)
NOVOLIN N	1	MDS1 (40 / Fill)
NOVOLOG	3	MDS1 (40 / Fill)
NOVOLOG 70/30 FLEXPEN RELION	3	MDS1 (40 / Fill)
NOVOLOG FLEXPEN	3	MDS1 (40 / Fill)
NOVOLOG FLEXPEN RELION	3	MDS1 (40 / Fill)
NOVOLOG MIX 70/30	3	MDS1 (40 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
NOVOLOG MIX 70/30 FLEXPEN	3	MDS1 (40 / Fill)
NOVOLOG MIX 70/30 RELION	3	MDS1 (40 / Fill)
NOVOLOG PENFILL	3	MDS1 (40 / Fill)
TOUJEO MAX SOLOSTAR	3	MDS1 (40 / Fill)
TOUJEO SOLOSTAR	3	MDS1 (40 / Fill)
<b>INCRETIN MIMETIC AGENTS (GIP &amp; GLP-1 RECEPTOR AGONISTS)</b>		
MOUNJARO	3	PA, MDD (0.09 Per Day)
<b>INCRETIN MIMETIC AGENTS (GLP-1 RECEPTOR AGONISTS)</b>		
TRULICITY	3	PA, MDD (0.09 Per Day)
<b>INSULIN-INCRETIN MIMETIC COMBINATIONS</b>		
SOLIQUA	3	ST, MFL (30 / Fill), MDS1 (50 / Fill)
<b>MEGLITINIDE ANALOGUES</b>		
<i>nateglinide</i>	2	
<i>repaglinide</i>	2	
<b>SGLT2 INHIBITOR - DPP-4 INHIBITOR COMBINATIONS</b>		
QTERN	3	MDD (1.0 Per Day)
<b>SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS</b>		
BRENZAVVY	3	MDD (1.0 Per Day)
FARXIGA	3	MDD (1.0 Per Day), MFL (30 / Fill)
<b>SODIUM-GLUCOSE CO-TRANSPORTER 2 INHIBITOR-BIGUANIDE COMB</b>		
XIGDUO XR (2.5-1000 MG TAB ER 24H, 5-1000 MG TAB ER 24H)	3	MDD (2.0 Per Day)
XIGDUO XR (5-500 MG TAB ER 24H, 10-1000 MG TAB ER 24H, 10-500 MG TAB ER 24H)	3	MDD (1.0 Per Day)
<b>SULFONYLUREA-BIGUANIDE COMBINATIONS</b>		
<i>glipizide-metformin hcl</i>	2	
<i>glyburide-metformin</i>	2	
<b>SULFONYLUREAS</b>		
<i>glimepiride (1 mg tab, 2 mg tab, 4 mg tab)</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>glipizide (5 mg tab, 10 mg tab)</i>	2	
<i>glipizide er</i>	2	
<i>glipizide xl</i>	2	
<i>glyburide</i>	2	
GLYBURIDE MICRONIZED	2	
<b>THIAZOLIDINEDIONE-BIGUANIDE COMBINATIONS</b>		
<i>pioglitazone hcl-metformin hcl</i>	2	MDD (3.0 Per Day)
<b>THIAZOLIDINEDIONES</b>		
<i>pioglitazone hcl (30 mg tab, 45 mg tab)</i>	2	MDD (1.0 Per Day)
<i>pioglitazone hcl 15 mg tab</i>	2	MDD (2.0 Per Day)
<b>ANTIDIARRHEAL/PROBIOTIC AGENTS (CONTINUED)</b>		
<b>ANTIPERISTALTIC AGENTS</b>		
<i>diphenoxylate-atropine (2.5-0.025 mg tab, 2.5-0.025 mg/5ml liquid)</i>	2	
<b>ANTIDOTES AND SPECIFIC ANTAGONISTS (CONTINUED)</b>		
<b>ANTIDOTES - CHELATING AGENTS</b>		
CHEMET	4	
<i>deferiprone</i>	2	
VISTOGARD	5	MDS1 (31 / Fill)
<b>OPIOID ANTAGONISTS</b>		
<i>naloxone hcl (0.4 mg/ml soln cart, 0.4 mg/ml soln prsyr, 2 mg/2ml soln prsyr)</i>	2	
<i>naltrexone hcl</i>	2	
<b>ANTIEMETICS (CONTINUED)</b>		
<b>5-HT3 RECEPTOR ANTAGONISTS</b>		
<i>granisetron hcl 1 mg tab</i>	3	MDD (2.0 Per Day), MFL (60 / Fill)
<i>ondansetron (4 mg tab disp, 8 mg tab disp)</i>	2	MFL (120 / Fill)
<i>ondansetron hcl (4 mg tab, 8 mg tab)</i>	2	MFL (120 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>ondansetron hcl 4 mg/5ml solution</i>	2	
<b>ANTIEMETICS - ANTICHOLINERGIC</b>		
ANTIVERT 50 MG TAB	2	
<i>meclizine hcl (12.5 mg tab, 25 mg tab, 50 mg tab)</i>	2	
<i>scopolamine</i>	3	
<i>trimethobenzamide hcl</i>	2	
<b>ANTIEMETICS - MISCELLANEOUS</b>		
<i>dronabinol</i>	3	PA, MDD (2.0 Per Day), MFL (60 / Fill)
<b>SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS</b>		
<i>aprepitant (40 mg cap, 125 mg cap)</i>	2	MDD (1.0 Per Day)
<i>aprepitant 80 &amp; 125 mg cap thpk</i>	2	MFL (3 / day(s))
<i>aprepitant 80 mg cap</i>	2	MFL (2 / Fill)
EMEND 125 MG/5ML RECON SUSP	4	MDS1 (3 / Fill)
<b>ANTIFUNGALS (CONTINUED)</b>		
<i>griseofulvin microsize 125 mg/5ml suspension</i>	2	
<i>griseofulvin microsize 500 mg tab</i>	3	
<i>griseofulvin ultramicrosize (125 mg tab, 250 mg tab)</i>	3	
<i>nystatin 500000 unit tab</i>	2	
<i>terbinafine hcl 250 mg tab</i>	2	MDD (2.0 Per Day)
<b>IMIDAZOLES</b>		
<i>ketoconazole 200 mg tab</i>	2	
<b>TRIAZOLES</b>		
CRESEMBA 186 MG CAP	5	PA, MDD (2.0 Per Day), MDS1 (31 / Fill)
CRESEMBA 74.5 MG CAP	5	PA, MDD (5.0 Per Day), MDS1 (31 / Fill)
<i>fluconazole (10 mg/ml recon susp, 40 mg/ml recon susp, 50 mg tab, 100 mg tab, 200 mg tab)</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>fluconazole 150 mg tab</i>	2	MFL (7 / Fill)
<i>itraconazole 10 mg/ml solution</i>	2	
<i>itraconazole 100 mg cap</i>	2	MFL (126 / Fill)
<i>posaconazole 100 mg tab dr</i>	5	PA
<i>posaconazole 40 mg/ml suspension</i>	5	PA, MFL (600 / Fill)
<i>voriconazole 200 mg tab</i>	5	MDD (3.0 Per Day)
<i>voriconazole 40 mg/ml recon susp</i>	5	MDD (20.0 Per Day)
<i>voriconazole 50 mg tab</i>	5	MDD (12.0 Per Day)
<b>ANTIHISTAMINES (CONTINUED)</b>		
<b>ANTIHISTAMINES - ETHANOLAMINES</b>		
<i>carbinoxamine maleate 4 mg tab</i>	2	MDD (8.0 Per Day)
CARBINOXAMINE MALEATE 4 MG/5ML SOLUTION	2	MDD (40.0 Per Day)
<b>ANTIHISTAMINES - NON-SEDATING</b>		
DESLORATADINE (2.5 MG TAB DISP, 5 MG TAB DISP)	2	MDD (1.0 Per Day)
<i>levocetirizine dihydrochloride 2.5 mg/5ml solution</i>	2	
<b>ANTIHISTAMINES - PHENOTHIAZINES</b>		
<i>promethazine hcl (12.5 mg suppos, 25 mg suppos)</i>	2	
<i>promethazine hcl (6.25 mg/5ml solution, 12.5 mg tab, 12.5 mg/10ml solution, 25 mg tab, 50 mg tab)</i>	2	
<i>promethegan (12.5 mg suppos, 25 mg suppos)</i>	2	
<b>ANTIHISTAMINES - PIPERIDINES</b>		
<i>cyproheptadine hcl 2 mg/5ml syrup</i>	2	MDD (80.0 Per Day)
<i>cyproheptadine hcl 4 mg tab</i>	2	MDD (8.0 Per Day)
<b>ANTIHYPERTENSIVES (CONTINUED)</b>		
<b>ACL INHIB-INTestinal CHOLESTEROL ABSORPTION INHIB COMB</b>		
NEXLIZET	3	MDD (1.0 Per Day)
<b>ADENOSINE TRIPHOSPHATE-CITRATE LYASE (ACL) INHIBITORS</b>		
NEXLETOL	3	MDD (1.0 Per Day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<b>ANTIHYPERLIPIDEMICS - MISC.</b>		
<i>icosapent ethyl</i>	3	MFL (120 / Fill)
<i>omega-3-acid ethyl esters</i>	2	MDD (4.0 Per Day)
<b>BILE ACID SEQUESTRANTS</b>		
<i>cholestyramine 4 gm packet</i>	3	MFL (180 / Fill)
<i>cholestyramine 4 gm/dose powder</i>	2	MFL (1890 / Fill)
<i>cholestyramine light 4 gm packet</i>	3	MFL (180 / Fill)
<i>cholestyramine light 4 gm/dose powder</i>	3	MFL (1197 / Fill)
<i>colesevelam hcl</i>	1	MDD (6.0 Per Day)
<i>colestipol hcl (5 gm granules, 5 gm packet)</i>	2	
<i>colestipol hcl 1 gm tab</i>	2	MDD (16.0 Per Day)
<i>prevalite 4 gm packet</i>	3	MFL (180 / Fill)
<i>prevalite 4 gm/dose powder</i>	3	MFL (1197 / Fill)
<b>FIBRIC ACID DERIVATIVES</b>		
<i>fenofibrate (48 mg tab, 54 mg tab, 67 mg cap, 134 mg cap, 145 mg tab, 160 mg tab, 200 mg cap)</i>	2	MDD (2.0 Per Day)
<i>fenofibrate micronized (43 mg cap, 67 mg cap, 134 mg cap, 200 mg cap)</i>	2	MDD (2.0 Per Day)
<i>fenofibric acid (45 mg cap dr, 135 mg cap dr)</i>	2	MDD (1.0 Per Day)
<i>gemfibrozil</i>	2	MDD (2.0 Per Day)
<b>HMG COA REDUCTASE INHIBITORS</b>		
<i>atorvastatin calcium (10 mg tab, 20 mg tab)</i>	2	MDD (5.0 Per Day), MDS1 (90 / day(s))
<i>atorvastatin calcium (40 mg tab, 80 mg tab)</i>	2	MDS1 (90 / day(s))
<i>fluvastatin sodium</i>	2	ST, MDD (2.0 Per Day)
<i>fluvastatin sodium er</i>	2	ST, AGE, MDD (1.0 Per Day)
<i>lovastatin</i>	2	MDD (5.0 Per Day)
<i>pitavastatin calcium</i>	2	ST, MDD (1.0 Per Day)
<i>pravastatin sodium</i>	2	MDD (5.0 Per Day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>rosuvastatin calcium (20 mg tab, 40 mg tab)</i>	2	
<i>rosuvastatin calcium (5 mg tab, 10 mg tab)</i>	2	MDD (5.0 Per Day)
<i>simvastatin (10 mg tab, 20 mg tab, 40 mg tab)</i>	2	MDD (5.0 Per Day)
<i>simvastatin (5 mg tab, 80 mg tab)</i>	2	
<b>INTEST CHOLEST ABSORP INHIB-HMG COA REDUCTASE INHIB COMB</b>		
<i>ezetimibe-simvastatin</i>	2	MDD (1.0 Per Day)
<b>INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS</b>		
<i>ezetimibe</i>	2	MDD (1.0 Per Day)
<b>NICOTINIC ACID DERIVATIVES</b>		
NIACIN (ANTIHYPERLIPIDEMIC)	2	MDD (12.0 Per Day)
<b>PCSK9 INHIBITORS</b>		
REPATHA	3	MFL (2 / Fill)
REPATHA PUSHTRONEX SYSTEM	3	MFL (3.5 / Fill), MDS1 (28 / Fill)
REPATHA SURECLICK	3	MFL (2 / Fill)
<b>ANTIHYPERTENSIVES (CONTINUED)</b>		
<b>ACE INHIBITOR &amp; CALCIUM CHANNEL BLOCKER COMBINATIONS</b>		
<i>amlodipine besy-benazepril hcl</i>	2	
TRANDOLAPRIL-VERAPAMIL HCL ER	2	MDD (2.0 Per Day)
<b>ACE INHIBITORS</b>		
<i>benazepril hcl</i>	2	
<i>captopril</i>	2	
<i>enalapril maleate (2.5 mg tab, 5 mg tab, 10 mg tab, 20 mg tab)</i>	2	
<i>enalapril maleate 1 mg/ml solution</i>	3	AGE, MFL (1200 / Fill)
<i>fosinopril sodium</i>	2	
<i>lisinopril</i>	2	
<i>moexipril hcl</i>	2	
PERINDOPRIL ERBUMINE (2 MG TAB, 8 MG TAB)	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>perindopril erbumine 4 mg tab</i>	2	
<i>quinapril hcl</i>	2	
<i>ramipril</i>	2	
<i>trandolapril</i>	2	
<b>ACE INHIBITORS &amp; THIAZIDE/THIAZIDE-LIKE</b>		
<i>benazepril-hydrochlorothiazide</i>	2	
<i>enalapril-hydrochlorothiazide</i>	2	
<i>fosinopril sodium-hctz</i>	2	
<i>lisinopril-hydrochlorothiazide</i>	2	
<i>quinapril-hydrochlorothiazide (10-12.5 mg tab, 20-12.5 mg tab, 20-25 mg tab)</i>	2	
<b>AGENTS FOR PHEOCHROMOCYTOMA</b>		
<i>phenoxybenzamine hcl</i>	2	PA, MDS1 (31 / Fill)
<b>ANGIOTENSIN II RECEPTOR ANT-CA CHANNEL BLOCKER-THIAZIDES</b>		
<i>amlodipine-valsartan-hctz</i>	2	MDD (1.0 Per Day)
<i>olmesartan-amlodipine-hctz</i>	2	
<b>ANGIOTENSIN II RECEPTOR ANTAG &amp; CA CHANNEL BLOCKER COMB</b>		
<i>amlodipine besylate-valsartan</i>	2	
<i>amlodipine-olmesartan</i>	2	
TELMISARTAN-AMLODIPINE	2	MDD (2.0 Per Day)
<b>ANGIOTENSIN II RECEPTOR ANTAG &amp; THIAZIDE/THIAZIDE-LIKE</b>		
<i>candesartan cilexetil-hctz</i>	2	
<i>irbesartan-hydrochlorothiazide</i>	2	
<i>losartan potassium-hctz</i>	2	
<i>olmesartan medoxomil-hctz</i>	2	
<i>telmisartan-hctz</i>	2	
<i>valsartan-hydrochlorothiazide</i>	2	
<b>ANGIOTENSIN II RECEPTOR ANTAGONISTS</b>		
<i>candesartan cilexetil</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>irbesartan</i>	2	
<i>losartan potassium</i>	2	
<i>olmesartan medoxomil</i>	2	
<i>telmisartan</i>	2	
<i>valsartan (40 mg tab, 80 mg tab, 160 mg tab, 320 mg tab)</i>	2	
<b>ANTIADRENERGICS - CENTRALLY ACTING</b>		
<i>clonidine</i>	2	
<i>clonidine hcl</i>	2	
<i>guanfacine hcl</i>	2	
<i>methyldopa 250 mg tab</i>	2	
METHYLDOPA 500 MG TAB	2	
<b>ANTIADRENERGICS - PERIPHERALLY ACTING</b>		
<i>doxazosin mesylate</i>	2	MDD (2.0 Per Day)
<i>prazosin hcl</i>	2	
<i>terazosin hcl</i>	2	MDD (2.0 Per Day)
<b>BETA BLOCKER &amp; DIURETIC COMBINATIONS</b>		
<i>atenolol-chlorthalidone</i>	2	
<i>bisoprolol-hydrochlorothiazide</i>	2	
<i>metoprolol-hydrochlorothiazide</i>	2	
<b>DIRECT RENIN INHIBITORS</b>		
<i>aliskiren fumarate</i>	3	MDD (1.0 Per Day)
<b>SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)</b>		
<i>eplerenone</i>	2	
<b>VASODILATORS</b>		
<i>hydralazine hcl (10 mg tab, 25 mg tab, 50 mg tab, 100 mg tab)</i>	2	
<i>minoxidil</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<b>ANTIMALARIALS (CONTINUED)</b>		
<b>ANTIMALARIAL COMBINATIONS</b>		
<i>atovaquone-proguanil hcl</i>	2	
CHLOROQUINE PHOSPHATE (250 MG TAB, 500 MG TAB)	2	
<i>hydroxychloroquine sulfate</i>	2	
<i>mefloquine hcl</i>	2	
<i>primaquine phosphate</i>	2	
<i>pyrimethamine</i>	5	MDS1 (31 / Fill)
<i>quinine sulfate</i>	2	
<b>ANTIMYASTHENIC/CHOLINERGIC AGENTS (CONTINUED)</b>		
PYRIDOSTIGMINE BROMIDE 30 MG TAB	3	
<i>pyridostigmine bromide 60 mg tab</i>	2	
<i>pyridostigmine bromide 60 mg/5ml solution</i>	4	AGE
<i>pyridostigmine bromide er 180 mg tab er</i>	3	MDD (1.0 Per Day)
<b>ANTIMYCOBACTERIAL AGENTS (CONTINUED)</b>		
<i>ethambutol hcl</i>	2	
<i>isoniazid (100 mg tab, 300 mg tab)</i>	2	
<i>pyrazinamide</i>	2	
<i>rifabutin</i>	4	
<i>rifampin (150 mg cap, 300 mg cap)</i>	2	
<b>ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES (CONTINUED)</b>		
<b>ANDROGEN BIOSYNTHESIS INHIBITORS</b>		
<i>abiraterone acetate 250 mg tab</i>	2	MDD (4.0 Per Day), MDS1 (90 / Fill)
<i>abirtega</i>	2	MDD (4.0 Per Day), MDS1 (90 / Fill)
<b>ANTIADRENALS</b>		
LYSODREN	4	MDD (32.0 Per Day)

Drug Name	Drug Tier	Requirements / Limits
<b>ANTIANDROGENS</b>		
<i>bicalutamide</i>	2	MFL (90 / Fill)
NILUTAMIDE	4	MFL (60 / Fill), MDS1 (31 / Fill)
NUBEQA	5	PA, MDD (4.0 Per Day), MDS1 (31 / Fill)
XTANDI (40 MG CAP, 40 MG TAB)	5	PA, MDD (4.0 Per Day), MDS1 (31 / Fill)
XTANDI 80 MG TAB	5	PA, MDD (2.0 Per Day), MDS1 (31 / Fill)
<b>ANTIESTROGENS</b>		
<i>tamoxifen citrate</i>	1	MDD (5.0 Per Day)
<i>toremifene citrate</i>	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
<b>ANTIMETABOLITES</b>		
<i>capecitabine 150 mg tab</i>	2	MFL (120 / fill(s))
<i>capecitabine 500 mg tab</i>	2	MFL (300 / fill(s))
<i>mercaptopurine 2000 mg/100ml suspension</i>	2	PA, MFL (200 / Fill), MDS1 (31 / Fill)
<i>mercaptopurine 50 mg tab</i>	2	
METHOTREXATE SODIUM (1 GM RECON SOLN, 50 MG/2ML SOLUTION, 250 MG/10ML SOLUTION)	2	
METHOTREXATE SODIUM (PF) (1 GM/40ML SOLUTION, 1000 MG/40ML SOLUTION)	2	
<i>methotrexate sodium (pf) (1 gm/40ml solution, 50 mg/2ml solution, 250 mg/10ml solution)</i>	2	
<i>methotrexate sodium 2.5 mg tab</i>	2	
TABLOID	4	MDD (10.0 Per Day)
<b>ANTINEOPLASTIC - AKT INHIBITORS</b>		
TRUQAP (160 MG TAB THPK, 200 MG TAB THPK)	5	PA, MDS1 (31 / Fill)
TRUQAP 200 MG TAB	5	PA, MDS1 (31 / Fill)
<b>ANTINEOPLASTIC - ALK INHIBITORS</b>		
ALECENSA	5	PA, MDD (8.0 Per Day), MDS1 (31 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
LORBRENA 100 MG TAB	5	MDD (1.0 Per Day), MDS1 (31 / Fill)
LORBRENA 25 MG TAB	5	MDD (3.0 Per Day), MDS1 (31 / Fill)
XALKORI (20 MG CAP SPRINK, 50 MG CAP SPRINK, 150 MG CAP SPRINK)	5	PA, MDD (4.0 Per Day), MDS1 (31 / Fill)
XALKORI (200 MG CAP, 250 MG CAP)	5	PA, MDD (2.0 Per Day), MDS1 (31 / Fill)
<b>ANTINEOPLASTIC - BCL-2 INHIBITORS</b>		
VENCLEXTA 10 MG TAB	5	PA, MDD (2.0 Per Day), MDS1 (31 / Fill)
VENCLEXTA 100 MG TAB	5	PA, MDD (6.0 Per Day), MDS1 (31 / Fill)
VENCLEXTA 50 MG TAB	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
VENCLEXTA STARTING PACK	5	PA, QL, MDS1 (31 / Fill)
<b>ANTINEOPLASTIC - BCR-ABL KINASE INHIBITORS</b>		
<i>dasatinib (50 mg tab, 70 mg tab)</i>	5	PA, MDD (2.0 Per Day), MDS1 (31 / Fill)
<i>dasatinib 100 mg tab</i>	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
<i>dasatinib 140 mg tab</i>	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
<i>dasatinib 20 mg tab</i>	5	PA, MDD (2.0 Per Day), MDS1 (31 / Fill)
<i>dasatinib 80 mg tab</i>	5	PA, MDD (2.0 Per Day), MDS1 (31 / Fill)
ICLUSIG	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
<i>imatinib mesylate 100 mg tab</i>	2	MDD (3.0 Per Day)
<i>imatinib mesylate 400 mg tab</i>	2	MDD (2.0 Per Day)
<i>nilotinib hcl</i>	5	PA, MDD (4.0 Per Day), MDS1 (31 / Fill)
SCEMBLIX (20 MG TAB, 40 MG TAB)	5	PA, MDD (4.0 Per Day), MDS1 (31 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
SCEMBLIX 100 MG TAB	5	PA, MDD (4.0 Per Day), MDS1 (31 / Fill)
<b>ANTINEOPLASTIC - BRAF KINASE INHIBITORS</b>		
TAFINLAR (50 MG CAP, 75 MG CAP)	5	PA, MDD (4.0 Per Day), MDS1 (31 / Fill)
ZELBORAF	5	PA, MDD (8.0 Per Day), MDS1 (31 / Fill)
<b>ANTINEOPLASTIC - BTK INHIBITORS</b>		
BRUKINSA 160 MG TAB	5	PA, MDD (2.0 Per Day), MDS1 (31 / Fill)
BRUKINSA 80 MG CAP	5	PA, MDD (4.0 Per Day), MDS1 (31 / fill(s))
CALQUENCE 100 MG TAB	5	PA, MDD (2.0 Per Day), MDS1 (31 / Fill)
IMBRUVICA 140 MG CAP	5	PA, MDD (3.0 Per Day), MDS1 (31 / Fill)
IMBRUVICA 420 MG TAB	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
IMBRUVICA 70 MG CAP	5	PA, MDD (1.0 Per Day), MFL (31 / Fill), MDS1 (31 / Fill)
JAYPIRCA 100 MG TAB	5	PA, MDD (2.0 Per Day), MDS1 (31 / Fill)
JAYPIRCA 50 MG TAB	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
<b>ANTINEOPLASTIC - EGFR INHIBITORS</b>		
<i>erlotinib hcl (100 mg tab, 150 mg tab)</i>	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
<i>erlotinib hcl 25 mg tab</i>	5	PA, MDD (2.0 Per Day), MDS1 (31 / Fill)
<i>gefitinib</i>	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
TAGRISSO	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
<b>ANTINEOPLASTIC - FGFR KINASE INHIBITORS</b>		
LYTGOBI (12 MG DAILY DOSE)	5	PA, MDD (3.0 Per Day), MDS1 (31 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
LYTGOBI (16 MG DAILY DOSE)	5	PA, MDD (4.0 Per Day), MDS1 (31 / Fill)
LYTGOBI (20 MG DAILY DOSE)	5	PA, MDD (5.0 Per Day), MDS1 (31 / Fill)
<b>ANTINEOPLASTIC - GAMMA SECRETASE INHIBITORS</b>		
OGSIVEO (100 MG TAB, 150 MG TAB)	5	PA, MDD (2.0 Per Day), MDS1 (31 / Fill)
OGSIVEO 50 MG TAB	5	PA, MDD (6.0 Per Day), MDS1 (31 / Fill)
<b>ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS</b>		
ERIVEDGE	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
<b>ANTINEOPLASTIC - HISTONE DEACETYLASE INHIBITORS</b>		
FARYDAK	5	PA, MFL (6 / Fill), MDS1 (28 / Fill)
ZOLINZA	5	PA, MDD (4.0 Per Day), MDS1 (31 / Fill)
<b>ANTINEOPLASTIC - IMMUNOMODULATORS</b>		
POMALYST (1 MG CAP, 3 MG CAP)	5	PA, MFL (21 / Fill), MDS1 (28 / Fill)
POMALYST (2 MG CAP, 4 MG CAP)	5	MFL (21 / Fill), MDS1 (28 / Fill)
<b>ANTINEOPLASTIC - KRAS INHIBITORS</b>		
KRAZATI	5	PA, MDD (6.0 Per Day), MDS1 (31 / Fill)
LUMAKRAS 120 MG TAB	5	PA, MDD (8.0 Per Day), MDS1 (31 / Fill)
LUMAKRAS 240 MG TAB	5	PA, MDD (4.0 Per Day), MDS1 (31 / Fill)
LUMAKRAS 320 MG TAB	5	PA, MDD (3.0 Per Day), MDS1 (31 / Fill)
<b>ANTINEOPLASTIC - MEK INHIBITORS</b>		
COTELLIC	5	PA, MDS1 (31 / Fill)
MEKINIST 0.5 MG TAB	5	PA, MDD (3.0 Per Day), MDS1 (31 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
MEKINIST 2 MG TAB	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
<b>ANTINEOPLASTIC - MET INHIBITORS</b>		
TEPMETKO	5	PA, MDD (2.0 Per Day), MDS1 (31 / Fill)
<b>ANTINEOPLASTIC - METHYLTRANSFERASE INHIBITORS</b>		
TAZVERIK	5	PA, MDD (8.0 Per Day), MDS1 (31 / Fill)
<b>ANTINEOPLASTIC - MTOR KINASE INHIBITORS</b>		
<i>everolimus (2 mg tab sol, 3 mg tab sol, 5 mg tab sol)</i>	2	PA, MFL (60 / Fill), MDS1 (31 / Fill)
<i>everolimus (2.5 mg tab, 7.5 mg tab, 10 mg tab)</i>	2	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
<i>everolimus 5 mg tab</i>	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
<i>torpenz (2.5 mg tab, 7.5 mg tab, 10 mg tab)</i>	2	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
<i>torpenz 5 mg tab</i>	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
<b>ANTINEOPLASTIC - MULTIKINASE INHIBITORS</b>		
CABOMETYX	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
COMETRIQ (100 MG DAILY DOSE)	5	PA, MDD (140.0 Per Day), MDS1 (31 / Fill)
COMETRIQ (140 MG DAILY DOSE)	5	PA, MDD (140.0 Per Day), MDS1 (31 / Fill)
COMETRIQ (60 MG DAILY DOSE)	5	PA, MDD (140.0 Per Day), MDS1 (31 / Fill)
<i>lapatinib ditosylate</i>	5	PA, MDD (6.0 Per Day), MDS1 (31 / Fill)
<i>pazopanib hcl 200 mg tab</i>	5	PA, MDD (4.0 Per Day), MDS1 (31 / Fill)
<i>sorafenib tosylate</i>	5	PA, MDD (4.0 Per Day), MDS1 (31 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
STIVARGA	5	PA, MDS1 (31 / Fill)
<i>sunitinib malate (25 mg cap, 37.5 mg cap, 50 mg cap)</i>	2	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
<i>sunitinib malate 12.5 mg cap</i>	2	PA, MDD (3.0 Per Day), MDS1 (31 / Fill)
VANFLYTA	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
<b>ANTINEOPLASTIC - PDGFR-ALPHA INHIBITORS</b>		
AYVAKIT	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
<b>ANTINEOPLASTIC - TROPOMYOSIN RECEPTOR KINASE INHIBITORS</b>		
ROZLYTREK (100 MG CAP, 200 MG CAP)	5	MDD (3.0 Per Day), MDS1 (31 / Fill)
<b>ANTINEOPLASTIC COMBINATIONS</b>		
INQOVI	5	PA, MDS1 (31 / Fill)
LONSURF 15-6.14 MG TAB	5	PA, MFL (60 / Fill), MDS1 (28 / Fill)
LONSURF 20-8.19 MG TAB	5	PA, MFL (80 / Fill), MDS1 (28 / Fill)
<b>ANTINEOPLASTICS MISC.</b>		
<i>hydroxyurea</i>	2	
MATULANE	4	
<b>AROMATASE INHIBITORS</b>		
<i>anastrozole</i>	1	MDD (1.0 Per Day)
<i>exemestane</i>	1	MDD (1.0 Per Day)
<i>letrozole</i>	1	MDD (1.0 Per Day)
<b>CYCLIN-DEPENDENT KINASES (CDK) INHIBITORS</b>		
IBRANCE	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
KISQALI (200 MG DOSE)	4	PA, MFL (63 / Fill), MDS1 (28 / Fill)
KISQALI (400 MG DOSE)	4	PA, MFL (63 / Fill), MDS1 (28 / Fill)
KISQALI (600 MG DOSE)	4	PA, MFL (63 / Fill), MDS1 (28 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
VERZENIO	4	PA, MFL (60 / Fill), MDS1 (31 / Fill)
<b>FOLIC ACID ANTAGONISTS RESCUE AGENTS</b>		
<i>leucovorin calcium (15 mg tab, 25 mg tab)</i>	2	MDD (4.0 Per Day)
<i>leucovorin calcium 10 mg tab</i>	2	MDD (6.0 Per Day)
<i>leucovorin calcium 5 mg tab</i>	2	MDD (12.0 Per Day)
<b>GONADOTROPIN RELEASING HORMONE (GNRH) ANTAGONISTS</b>		
ORGOVYX	4	PA
<b>IMIDAZOTETRAZINES</b>		
<i>temozolomide (180 mg cap, 250 mg cap)</i>	4	MDD (2.0 Per Day)
<i>temozolomide (20 mg cap, 100 mg cap)</i>	4	MDD (4.0 Per Day)
<i>temozolomide (5 mg cap, 140 mg cap)</i>	4	MDD (3.0 Per Day)
<b>ISOCITRATE DEHYDROGENASE 1 &amp; 2 (IDH1 &amp; IDH2) INHIBITORS</b>		
VORANIGO 10 MG TAB	5	PA, MDD (2.0 Per Day), MDS1 (31 / Fill)
VORANIGO 40 MG TAB	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
<b>ISOCITRATE DEHYDROGENASE-1 (IDH1) INHIBITORS</b>		
REZLIDHIA	5	PA, MDD (2.0 Per Day), MDS1 (31 / Fill)
<b>JANUS ASSOCIATED KINASE (JAK) INHIBITORS</b>		
JAKAFI	5	PA, MDD (2.0 Per Day), MDS1 (31 / Fill)
<b>LHRH ANALOGS</b>		
ELIGARD 22.5 MG KIT	4	MFL (1 / Fill), MDS1 (90 / Fill)
ELIGARD 30 MG KIT	4	MFL (1 / Fill), MDS1 (120 / Fill)
ELIGARD 45 MG KIT	4	MFL (1 / Fill), MDS1 (180 / Fill)
<i>leuprolide acetate</i>	2	PA, MFL (1 / Fill), MDS1 (31 / Fill)
LEUPROLIDE ACETATE (3 MONTH)	5	MDS1 (31 / Fill)
LUPRON DEPOT (3-MONTH)	5	MFL (1 / Fill), MDS1 (90 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
LUPRON DEPOT (4-MONTH)	5	MFL (1 / Fill), MDS1 (120 / Fill)
LUPRON DEPOT (6-MONTH)	5	MFL (1 / Fill), MDS1 (180 / Fill)
LUTRATE DEPOT	5	MDS1 (31 / Fill)
ZOLADEX	3	MDS1 (31 / Fill)
<b>MITOTIC INHIBITORS</b>		
ETOPOSIDE 50 MG CAP	2	
<b>NITROGEN MUSTARDS AND RELATED ANALOGUES</b>		
CYCLOPHOSPHAMIDE (25 MG CAP, 25 MG TAB, 50 MG CAP, 50 MG TAB)	2	
LEUKERAN	4	
<b>NITROSOUREAS</b>		
<i>lomustine</i>	5	PA, MDS1 (31 / fill(s))
<b>PHOSPHATIDYLINOSITOL 3-KINASE (PI3K) INHIBITORS</b>		
PIQRAY (200 MG DAILY DOSE)	5	MDD (1.0 Per Day), MDS1 (31 / Fill)
PIQRAY (250 MG DAILY DOSE)	5	MDD (2.0 Per Day), MDS1 (31 / Fill)
PIQRAY (300 MG DAILY DOSE)	5	MDD (2.0 Per Day), MDS1 (31 / Fill)
ZYDELIG	5	PA, MDD (2.0 Per Day), MDS1 (31 / Fill)
<b>POLY (ADP-RIBOSE) POLYMERASE (PARP) INHIBITORS</b>		
LYNPARZA	4	PA, MDD (4.0 Per Day), MDS1 (31 / Fill)
TALZENNA	5	MDD (1.0 Per Day), MDS1 (31 / Fill)
<b>PROGESTINS-ANTINEOPLASTIC</b>		
<i>megestrol acetate (20 mg tab, 40 mg tab, 40 mg/ml suspension, 400 mg/10ml suspension, 800 mg/20ml suspension)</i>	2	
<b>RETINOIDS</b>		
<i>tretinoin 10 mg cap</i>	5	MDD (12.0 Per Day)

Drug Name	Drug Tier	Requirements / Limits
<b>SELECTIVE ESTROGEN RECEPTOR DEGRADERS</b>		
ORSERDU	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
<b>TOPOISOMERASE I INHIBITORS</b>		
HYCAMTIN 0.25 MG CAP	5	MDD (10.0 Per Day), MDS1 (31 / Fill)
HYCAMTIN 1 MG CAP	5	MDD (5.0 Per Day), MDS1 (31 / Fill)
<b>URINARY TRACT PROTECTIVE AGENTS</b>		
<i>mesna 400 mg tab</i>	5	MDS1 (31 / Fill)
<b>ANTIPARKINSON AND RELATED THERAPY AGENTS (CONTINUED)</b>		
<b>ANTIPARKINSON ANTICHOLINERGICS</b>		
<i>benztropine mesylate (0.5 mg tab, 1 mg tab, 2 mg tab)</i>	2	MDD (3.0 Per Day)
<i>trihexyphenidyl hcl (2 mg tab, 5 mg tab)</i>	2	MDD (5.0 Per Day)
TRIHEXYPHENIDYL HCL 0.4 MG/ML SOLUTION	2	
<b>ANTIPARKINSON DOPAMINERGICS</b>		
<i>amantadine hcl (100 mg cap, 100 mg tab)</i>	2	MDD (4.0 Per Day)
<i>amantadine hcl (50 mg/5ml solution, 100 mg/10ml solution)</i>	2	
<i>bromocriptine mesylate</i>	3	MDD (4.0 Per Day)
<b>ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS</b>		
<i>rasagiline mesylate</i>	2	MDD (1.0 Per Day)
<i>selegiline hcl</i>	2	MDD (2.0 Per Day)
<b>DECARBOXYLASE INHIBITORS</b>		
<i>carbidopa</i>	3	
<b>LEVODOPA COMBINATIONS</b>		
<i>carbidopa-levodopa (10-100 mg tab disp, 25-100 mg tab disp, 25-250 mg tab disp)</i>	2	MDD (10.0 Per Day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>carbidopa-levodopa (10-100 mg tab, 25-100 mg tab, 25-250 mg tab)</i>	2	MDD (40.0 Per Day)
<i>carbidopa-levodopa er (25-100 mg tab er, 50-200 mg tab er)</i>	2	MDD (40.0 Per Day)
<i>carbidopa-levodopa-entacapone</i>	2	
<b>NONERGOLINE DOPAMINE RECEPTOR AGONISTS</b>		
<i>apomorphine hcl</i>	2	PA, MDD (2.0 Per Day), MDS1 (31 / Fill)
<i>pramipexole dihydrochloride</i>	2	MDD (4.0 Per Day)
<i>pramipexole dihydrochloride er</i>	2	MDD (1.0 Per Day)
<i>ropinirole hcl</i>	2	MDD (5.0 Per Day)
<i>ropinirole hcl er</i>	2	MDD (3.0 Per Day)
<b>PERIPHERAL COMT INHIBITORS</b>		
<i>entacapone</i>	2	
<b>ANTIPSYCHOTICS/ANTIMANIC AGENTS (CONTINUED)</b>		
<b>ANTIMANIC AGENTS</b>		
<i>lithium</i>	2	
<i>lithium carbonate (150 mg cap, 300 mg cap, 300 mg tab, 600 mg cap)</i>	2	
<i>lithium carbonate er</i>	2	
<b>ANTIPSYCHOTICS - MISC.</b>		
<i>lurasidone hcl</i>	2	
<i>ziprasidone hcl</i>	2	
<b>BENZISOXAZOLES</b>		
ERZOFRI	5	MDS1 (31 / Fill)
FANAPT	5	PA, MDD (2.0 Per Day), MDS1 (31 / Fill)
FANAPT TITRATION PACK A	5	PA, MDD (2.0 Per Day), MDS1 (31 / Fill)
FANAPT TITRATION PACK B	5	PA, MFL (12 / Fill), MDS1 (31 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
FANAPT TITRATION PACK C	5	PA, MFL (8 / Fill), MDS1 (31 / Fill)
INVEGA HAFYERA 1092 MG/3.5ML SUSP PRSYR	5	QL, MDS1 (180 / Fill)
INVEGA HAFYERA 1560 MG/5ML SUSP PRSYR	5	QL, MDS1 (180 / Fill)
INVEGA SUSTENNA	5	MDS1 (31 / Fill)
INVEGA TRINZA	5	MDS1 (31 / Fill)
<i>paliperidone er (1.5 mg tab er 24h, 3 mg tab er 24h, 9 mg tab er 24h)</i>	2	MDD (1.0 Per Day)
<i>paliperidone er 6 mg tab er 24h</i>	2	MDD (2.0 Per Day)
<i>risperidone (0.25 mg tab, 0.5 mg tab, 1 mg tab, 2 mg tab, 3 mg tab, 4 mg tab)</i>	2	
<i>risperidone (0.5 mg tab disp, 1 mg tab disp, 2 mg tab disp, 3 mg tab disp, 4 mg tab disp)</i>	2	MDD (2.0 Per Day)
RISPERIDONE 0.25 MG TAB DISP	2	MDD (1.0 Per Day)
<i>risperidone 1 mg/ml solution</i>	2	MDD (8.0 Per Day)
<i>risperidone microspheres er</i>	2	MDS1 (31 / Fill)
UZEDY (150 MG/0.42ML SUSP PRSYR, 200 MG/0.56ML SUSP PRSYR, 250 MG/0.7ML SUSP PRSYR)	5	QL, MDS1 (56 / Fill)
UZEDY (50 MG/0.14ML SUSP PRSYR, 75 MG/0.21ML SUSP PRSYR)	5	MDD (0.01 Per Day), MDS1 (28 / Fill)
UZEDY 100 MG/0.28ML SUSP PRSYR	5	MFL (0.28 / Fill), MDS1 (56 / Fill)
UZEDY 125 MG/0.35ML SUSP PRSYR	5	MDD (0.02 Per Day), MDS1 (28 / Fill)
<b>BUTYROPHENONES</b>		
<i>haloperidol</i>	2	
<i>haloperidol lactate 2 mg/ml conc</i>	2	
<b>DIBENZO-OXEPINO PYRROLES</b>		
<i>asenapine maleate</i>	3	MDD (2.0 Per Day), MFL (60 / Fill)
<b>DIBENZODIAZEPINES</b>		
<i>clozapine (100 mg tab, 150 mg tab disp)</i>	2	MDD (6.0 Per Day)
<i>clozapine (12.5 mg tab disp, 25 mg tab, 25 mg tab disp, 50 mg tab, 100 mg tab disp)</i>	2	MDD (3.0 Per Day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>clozapine (200 mg tab, 200 mg tab disp)</i>	2	MDD (4.5 Per Day)
<b>DIBENZOTHIAZEPINES</b>		
<i>quetiapine fumarate (25 mg tab, 50 mg tab, 100 mg tab, 150 mg tab, 200 mg tab, 300 mg tab, 400 mg tab)</i>	1	
<i>quetiapine fumarate er</i>	1	
<b>DIBENZOXAZEPINES</b>		
<i>loxapine succinate</i>	2	
<b>DIHYDROINDOLONES</b>		
MOLINDONE HCL	2	MDD (4.0 Per Day)
<b>PHENOTHIAZINES</b>		
<i>chlorpromazine hcl (10 mg tab, 25 mg tab, 50 mg tab, 100 mg tab, 200 mg tab)</i>	2	
<i>fluphenazine hcl (1 mg tab, 2.5 mg tab, 5 mg tab, 10 mg tab)</i>	2	
<i>perphenazine</i>	2	
<i>prochlorperazine</i>	2	
<i>prochlorperazine maleate</i>	2	
<i>thioridazine hcl</i>	2	
<i>trifluoperazine hcl</i>	2	
<b>QUINOLINONE DERIVATIVES</b>		
ABILIFY ASIMTUFII 720 MG/2.4ML PRSYR	5	QL, MDS1 (56 / Fill)
ABILIFY ASIMTUFII 960 MG/3.2ML PRSYR	5	QL, MDS1 (56 / Fill)
ABILIFY MAINTENA	5	MDS1 (31 / Fill)
<i>aripiprazole (10 mg tab disp, 15 mg tab disp)</i>	2	MDD (1.0 Per Day)
<i>aripiprazole (2 mg tab, 5 mg tab, 10 mg tab, 15 mg tab, 20 mg tab, 30 mg tab)</i>	2	
<i>aripiprazole 1 mg/ml solution</i>	2	MDD (10.0 Per Day)
<b>THIENBENZODIAZEPINES</b>		
<i>olanzapine (2.5 mg tab, 5 mg tab, 5 mg tab disp, 7.5 mg tab, 10 mg tab, 10 mg tab disp, 15 mg tab, 15 mg tab disp, 20 mg tab, 20 mg tab disp)</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>olanzapine 10 mg recon soln</i>	2	MDS1 (31 / Fill)
ZYPREXA RELPREVV	5	MDS1 (31 / Fill)
<b>THIOXANTHENES</b>		
<i>thiothixene</i>	2	
<b>ANTIVIRALS (CONTINUED)</b>		
<b>ANTIRETROVIRAL COMBINATIONS</b>		
<i>abacavir sulfate-lamivudine</i>	2	MDD (1.0 Per Day)
BIKTARVY	5	MDD (1.0 Per Day), MDS1 (90 / Fill)
CIMDUO	5	MDD (1.0 Per Day), MDS1 (90 / Fill)
DELSTRIGO	5	MDS1 (90 / Fill)
DESCOVY	4	MDD (1.0 Per Day), MDS1 (90 / Fill)
DOVATO	5	MDD (1.0 Per Day), MDS1 (90 / Fill)
<i>efavirenz-emtricitab-tenofo df</i>	2	MDD (1.0 Per Day)
EFAVIRENZ-LAMIVUDINE-TENOFOVIR (400-300-300 MG TAB, 600-300-300 MG TAB)	2	MDD (1.0 Per Day)
<i>emtricitab- rilpivir-tenofovf df</i>	5	MDD (1.0 Per Day), MDS1 (90 / Fill)
<i>emtricitabine-tenofovir df</i>	1	MDD (1.0 Per Day)
EVOTAZ	5	MDD (1.0 Per Day), MDS1 (90 / Fill)
GENVOYA	5	MDD (1.0 Per Day), MDS1 (90 / Fill)
JULUCA	4	MDD (1.0 Per Day), MDS1 (90 / Fill)
<i>lamivudine-zidovudine</i>	2	MDD (2.0 Per Day)
<i>lopinavir-ritonavir 100-25 mg tab</i>	2	MDD (10.0 Per Day)
<i>lopinavir-ritonavir 200-50 mg tab</i>	2	MDD (4.0 Per Day)
<i>lopinavir-ritonavir 400-100 mg/5ml solution</i>	2	MDD (8.0 Per Day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
ODEFSEY	5	MDD (1.0 Per Day), MDS1 (90 / Fill)
PREZCOBIX	5	MDD (1.0 Per Day), MDS1 (90 / Fill)
STRIBILD	4	MDD (1.0 Per Day), MDS1 (90 / Fill)
SYMTUZA	5	MDD (1.0 Per Day), MDS1 (90 / Fill)
TRIUMEQ	5	MDD (1.0 Per Day), MDS1 (90 / Fill)
TRIUMEQ PD	5	MDD (10.0 Per Day), MDS1 (90 / Fill)
TRIZIVIR	2	MDD (2.0 Per Day)
<b>ANTIRETROVIRALS - CAPSID INHIBITORS</b>		
SUNLENCA (4 X 300 MG TAB THPK, 5 X 300 MG TAB THPK)	4	QL, MDS1 (31 / Fill)
<b>ANTIRETROVIRALS - CCR5 ANTAGONISTS (ENTRY INHIBITOR)</b>		
<i>maraviroc</i>	2	MDD (4.0 Per Day), MDS1 (90 / Fill)
<b>ANTIRETROVIRALS - GP120-DIRECTED ATTACHMENT INHIBITOR</b>		
RUKOBIA	5	PA, MDD (2.0 Per Day), MDS1 (90 / Fill)
<b>ANTIRETROVIRALS - INTEGRASE INHIBITORS</b>		
ISENTRESS (25 MG CHEW TAB, 100 MG CHEW TAB)	4	MDD (6.0 Per Day), MDS1 (90 / Fill)
ISENTRESS 100 MG PACKET	4	MDD (2.0 Per Day), MDS1 (90 / Fill)
ISENTRESS 400 MG TAB	5	MDD (2.0 Per Day), MDS1 (90 / Fill)
ISENTRESS HD	5	MDD (2.0 Per Day), MDS1 (90 / Fill)
TIVICAY 50 MG TAB	5	MFL (180 / Fill), MDS1 (90 / Fill)
<b>ANTIRETROVIRALS - PROTEASE INHIBITORS</b>		
APTIVUS	5	MDD (4.0 Per Day), MDS1 (90 / Fill)

RxCore CO Option

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>atazanavir sulfate (150 mg cap, 300 mg cap)</i>	2	MDD (1.0 Per Day)
<i>atazanavir sulfate 200 mg cap</i>	2	MDD (2.0 Per Day)
<i>darunavir</i>	2	MDD (1.0 Per Day), MDS1 (90 / Fill)
<i>fosamprenavir calcium</i>	2	MDD (4.0 Per Day)
PREZISTA (75 MG TAB, 150 MG TAB)	5	MDD (1.0 Per Day), MDS1 (90 / Fill)
PREZISTA 100 MG/ML SUSPENSION	5	MDD (12.0 Per Day), MDS1 (90 / Fill)
REYATAZ 50 MG PACKET	5	MDS1 (90 / Fill)
<i>ritonavir</i>	2	MDD (12.0 Per Day)
VIRACEPT	5	MDD (10.0 Per Day), MDS1 (90 / Fill)
<b>ANTIRETROVIRALS - RTI-NON-NUCLEOSIDE ANALOGUES</b>		
EDURANT	5	MDD (2.0 Per Day), MDS1 (90 / Fill)
<i>efavirenz 600 mg tab</i>	2	MDD (1.0 Per Day)
<i>etravirine</i>	2	MDD (4.0 Per Day)
INTELENCE 25 MG TAB	5	MDD (4.0 Per Day), MDS1 (90 / Fill)
<i>nevirapine 200 mg tab</i>	2	MDD (2.0 Per Day)
NEVIRAPINE 50 MG/5ML SUSPENSION	2	MDD (40.0 Per Day)
<i>nevirapine er 400 mg tab er 24h</i>	2	MDD (1.0 Per Day)
PIFELTRO	5	MDD (1.0 Per Day), MDS1 (90 / Fill)
<b>ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-PURINES</b>		
<i>abacavir sulfate 20 mg/ml solution</i>	2	MFL (900 / Fill)
<i>abacavir sulfate 300 mg tab</i>	2	MDD (2.0 Per Day)
<b>ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-PYRIMIDINES</b>		
<i>emtricitabine</i>	2	MDD (1.0 Per Day)
EMTRIVA 10 MG/ML SOLUTION	5	MDD (24.0 Per Day), MDS1 (90 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>lamivudine (10 mg/ml solution, 300 mg/30ml solution)</i>	2	MFL (900 / Fill)
<i>lamivudine (150 mg tab, 300 mg tab)</i>	2	MDD (2.0 Per Day)
<b>ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-THYMIDINES</b>		
<i>zidovudine 100 mg cap</i>	2	MDD (6.0 Per Day)
<i>zidovudine 300 mg tab</i>	2	MDD (2.0 Per Day)
<i>zidovudine 50 mg/5ml syrup</i>	2	MDD (60.0 Per Day)
<b>ANTIRETROVIRALS - RTI-NUCLEOTIDE ANALOGUES</b>		
<i>tenofovir disoproxil fumarate</i>	2	MDD (1.0 Per Day)
VIREAD (150 MG TAB, 200 MG TAB, 250 MG TAB)	5	MDD (1.0 Per Day), MDS1 (90 / Fill)
<b>ANTIRETROVIRALS ADJUVANTS</b>		
TYBOST	5	MDD (1.0 Per Day), MDS1 (90 / Fill)
<b>ANTIVIRAL COMBINATIONS</b>		
PAXLOVID (150/100)	5	MDD (4.0 Per Day), MFL (20 / Fill), MDS1 (5 / Fill)
PAXLOVID (300/100 & 150/100)	5	MFL (11 / Fill), MDS1 (5 / Fill)
PAXLOVID (300/100)	5	MDD (6.0 Per Day), MFL (30 / Fill), MDS1 (5 / Fill)
<b>CMV AGENTS</b>		
PREVYMIS (240 MG TAB, 480 MG TAB)	5	PA, QL, MDS1 (31 / Fill)
<i>valganciclovir hcl 450 mg tab</i>	5	MFL (102 / Fill)
<i>valganciclovir hcl 50 mg/ml recon soln</i>	5	MFL (1144 / Fill), MDS1 (31 / Fill)
<b>HEPATITIS B AGENTS</b>		
<i>adefovir dipivoxil</i>	5	MDD (1.0 Per Day)
<i>entecavir</i>	2	MDD (1.0 Per Day)
<i>lamivudine 100 mg tab</i>	2	MDD (2.0 Per Day)
<b>HEPATITIS C AGENT - COMBINATIONS</b>		
HARVONI 33.75-150 MG PACKET	4	ST, MDD (1.0 Per Day), MDS1 (31 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
HARVONI 45-200 MG PACKET	4	ST, MDD (1.0 Per Day), MDS1 (31 / Fill)
LEDIPASVIR-SOFOSBUVIR	4	ST, MDD (1.0 Per Day), MDS1 (31 / Fill)
MAVYRET 100-40 MG TAB	3	MDD (3.0 Per Day), MDS1 (28 / Fill)
MAVYRET 50-20 MG PACKET	3	MDD (6.0 Per Day), MDS1 (28 / Fill)
SOFOSBUVIR-VELPATASVIR	3	MDD (1.0 Per Day), MFL (28 / Fill), MDS1 (28 / Fill)
VOSEVI	4	MDD (1.0 Per Day), MDS1 (31 / Fill)
<b>HEPATITIS C AGENTS</b>		
RIBAVIRIN 200 MG CAP	3	MDD (12.0 Per Day)
RIBAVIRIN 200 MG TAB	3	MDD (7.0 Per Day)
<b>HERPES AGENTS - PURINE ANALOGUES</b>		
<i>acyclovir (200 mg cap, 200 mg/5ml suspension, 400 mg tab, 800 mg tab, 800 mg/20ml suspension)</i>	2	
<i>valacyclovir hcl</i>	2	
<b>HERPES AGENTS - THYMIDINE ANALOGUES</b>		
<i>famciclovir</i>	2	
<b>INFLUENZA AGENTS</b>		
RIMANTADINE HCL	2	
<b>MISC. ANTIVIRALS</b>		
LAGEVRIO	5	AGE, MDD (8.0 Per Day), MFL (40 / Fill), MDS1 (5 / Fill)
<b>NEURAMINIDASE INHIBITORS</b>		
<i>oseltamivir phosphate (45 mg cap, 75 mg cap)</i>	2	MFL (10 / Fill)
<i>oseltamivir phosphate 30 mg cap</i>	2	MFL (20 / Fill)
<i>oseltamivir phosphate 6 mg/ml recon susp</i>	2	MFL (180 / Fill)
<b>BETA BLOCKERS (CONTINUED)</b>		
<b>ALPHA-BETA BLOCKERS</b>		
<i>carvedilol</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>carvedilol phosphate er</i>	2	MDD (1.0 Per Day)
<i>labetalol hcl (100 mg tab, 200 mg tab, 300 mg tab)</i>	2	
<b>BETA BLOCKERS CARDIO-SELECTIVE</b>		
<i>acebutolol hcl</i>	2	
<i>atenolol 100 mg tab</i>	2	MDD (2.0 Per Day)
<i>atenolol 25 mg tab</i>	2	MDD (8.0 Per Day)
<i>atenolol 50 mg tab</i>	2	MDD (4.0 Per Day)
<i>betaxolol hcl (10 mg tab, 20 mg tab)</i>	2	
<i>bisoprolol fumarate (5 mg tab, 10 mg tab)</i>	2	
<i>metoprolol succinate er</i>	2	
<i>metoprolol tartrate (25 mg tab, 37.5 mg tab, 50 mg tab, 75 mg tab, 100 mg tab)</i>	2	
<i>nebivolol hcl (10 mg tab, 20 mg tab)</i>	2	MDD (2.0 Per Day)
<i>nebivolol hcl (2.5 mg tab, 5 mg tab)</i>	2	MDD (1.0 Per Day)
<b>BETA BLOCKERS NON-SELECTIVE</b>		
<i>nadolol</i>	2	
<i>pindolol</i>	2	
<i>propranolol hcl (10 mg tab, 20 mg tab, 20 mg/5ml solution, 40 mg tab, 40 mg/5ml solution, 60 mg tab, 80 mg tab)</i>	2	
<i>propranolol hcl er</i>	2	
<i>sotalol hcl (80 mg tab, 120 mg tab, 160 mg tab, 240 mg tab)</i>	2	
<i>sotalol hcl (af)</i>	2	
SOTYLIZE	4	AGE, MDD (64.0 Per Day)
<i>timolol maleate (5 mg tab, 10 mg tab, 20 mg tab)</i>	2	
<b>CALCIUM CHANNEL BLOCKERS (CONTINUED)</b>		
<i>amlodipine besylate</i>	2	
<i>cartia xt</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>dilt-xr</i>	2	
<i>diltiazem hcl (30 mg tab, 60 mg tab, 90 mg tab, 120 mg tab)</i>	2	
<i>diltiazem hcl er</i>	2	
<i>diltiazem hcl er beads (120 mg cap er 24h, 180 mg cap er 24h, 240 mg cap er 24h, 300 mg cap er 24h, 420 mg cap er 24h)</i>	2	
<i>diltiazem hcl er coated beads (120 mg cap er 24h, 180 mg cap er 24h, 240 mg cap er 24h, 300 mg cap er 24h)</i>	2	
<i>felodipine er</i>	2	
<i>isradipine</i>	2	
<i>matzim la</i>	2	
<i>nicardipine hcl (20 mg cap, 30 mg cap)</i>	2	
<i>nifedipine</i>	2	
<i>nifedipine er</i>	2	
<i>nifedipine er osmotic release</i>	2	
<i>nimodipine 30 mg cap</i>	3	
NIMODIPINE 60 MG/20ML SOLUTION	4	
<i>taztia xt (120 mg cap er 24h, 180 mg cap er 24h, 240 mg cap er 24h, 300 mg cap er 24h)</i>	2	
<i>tiadyt er (120 mg cap er 24h, 180 mg cap er 24h, 240 mg cap er 24h, 300 mg cap er 24h, 420 mg cap er 24h)</i>	2	
<i>verapamil hcl (40 mg tab, 80 mg tab, 120 mg tab)</i>	2	
<i>verapamil hcl er (100 mg cap er 24h, 120 mg cap er 24h, 120 mg tab er, 180 mg cap er 24h, 180 mg tab er, 200 mg cap er 24h, 240 mg cap er 24h, 240 mg tab er, 300 mg cap er 24h)</i>	2	
<b>CARDIOTONICS (CONTINUED)</b>		
<b>CARDIAC GLYCOSIDES</b>		
<i>digoxin (62.5 mcg tab, 125 mcg tab, 250 mcg tab)</i>	2	
DIGOXIN 0.05 MG/ML SOLUTION	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>digoxin 0.05 mg/ml solution</i>	3	
<b>CARDIOVASCULAR AGENTS - MISC. (CONTINUED)</b>		
<b>NEPRILYSIN INHIB (ARNI)-ANGIOTENSIN II RECEPT ANTAG COMB</b>		
ENTRESTO (6-6 MG CAP SPRINK, 15-16 MG CAP SPRINK)	3	MDD (2.0 Per Day)
<i>sacubitril-valsartan</i>	2	MDD (2.0 Per Day)
<b>PROSTAGLANDIN VASODILATORS</b>		
<i>epoprostenol sodium</i>	2	PA, MDD (0.26 Per Day), MDS1 (31 / Fill)
ORENITRAM 0.125 MG TAB ER	5	PA, MDD (3.0 Per Day), MDS1 (31 / Fill)
ORENITRAM 0.25 MG TAB ER	5	PA, MDD (10.0 Per Day), MDS1 (31 / Fill)
ORENITRAM 1 MG TAB ER	5	PA, MDD (3.0 Per Day), MDS1 (31 / Fill)
ORENITRAM 2.5 MG TAB ER	5	PA, MDD (10.0 Per Day), MDS1 (31 / Fill)
ORENITRAM 5 MG TAB ER	5	PA, MDD (3.0 Per Day), MDS1 (31 / Fill)
ORENITRAM MONTH 1	5	PA, MFL (336 / Fill), MDS1 (31 / Fill)
ORENITRAM MONTH 2	5	PA, MFL (336 / Fill), MDS1 (31 / Fill)
ORENITRAM MONTH 3	5	PA, MFL (336 / Fill), MDS1 (31 / Fill)
TYVASO	5	PA, MDD (3.4 Per Day), MDS1 (31 / Fill)
TYVASO DPI INSTITUTIONAL KIT (16 MCG POWDER, 32 MCG POWDER, 48 MCG POWDER, 64 MCG POWDER)	5	PA, MFL (112 / Fill), MDS1 (31 / Fill)
TYVASO DPI MAINTENANCE KIT (16 MCG POWDER, 32 MCG POWDER, 48 MCG POWDER, 64 MCG POWDER)	5	PA, MFL (112 / Fill), MDS1 (31 / Fill)
TYVASO DPI TITRATION KIT 16 & 32 & 48 MCG POWDER	5	PA, MFL (252 / Fill), MDS1 (31 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
TYVASO REFILL	5	PA, MDD (3.4 Per Day), MDS1 (31 / Fill)
TYVASO STARTER	5	PA, MDD (3.4 Per Day), MDS1 (31 / Fill)
<b>PULM HYPERTEN-SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)</b>		
ADEMPAS	5	PA, MDD (3.0 Per Day), MDS1 (31 / Fill)
<b>PULMONARY HYPERTENSION - ACTIVIN SIGNALING INHIBITOR</b>		
WINREVAIR	5	PA, MDS1 (31 / Fill)
<b>PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS</b>		
<i>ambrisentan</i>	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
<i>bosentan (62.5 mg tab, 125 mg tab)</i>	5	PA, MDD (2.0 Per Day), MDS1 (31 / Fill)
<b>PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS</b>		
<i>alyq</i>	3	PA, MDD (2.0 Per Day)
<i>sildenafil citrate 10 mg/ml recon susp</i>	5	PA, MDD (5.0 Per Day), MDS1 (31 / Fill)
<i>sildenafil citrate 20 mg tab</i>	2	PA, MDD (3.0 Per Day)
<i>tadalafil (pah)</i>	3	PA, MDD (2.0 Per Day)
TADLIQ	5	PA, MDD (10.0 Per Day), MDS1 (31 / Fill)
<b>SELECTIVE CGMP PHOSPHODIESTERASE TYPE 5 INHIBITORS</b>		
<i>tadalafil (2.5 mg tab, 10 mg tab, 20 mg tab)</i>	3	PA, MFL (30 / Fill)
<i>tadalafil 5 mg tab</i>	3	ST, MFL (30 / Fill)
<b>SINUS NODE INHIBITORS</b>		
<i>ivabradine hcl</i>	3	ST, MDD (2.0 Per Day)
<b>CEPHALOSPORINS (CONTINUED)</b>		
<b>CEPHALOSPORINS - 1ST GENERATION</b>		
<i>cefadroxil (1 gm tab, 250 mg/5ml recon susp, 500 mg cap, 500 mg/5ml recon susp)</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>cephalexin (125 mg/5ml recon susp, 250 mg cap, 250 mg tab, 250 mg/5ml recon susp, 500 mg cap, 500 mg tab)</i>	2	
<b>CEPHALOSPORINS - 2ND GENERATION</b>		
CEFACLOR (250 MG CAP, 250 MG/5ML RECON SUSP, 500 MG CAP)	2	
CEFACLOR ER	2	
<i>cefprozil (125 mg/5ml recon susp, 250 mg tab, 250 mg/5ml recon susp, 500 mg tab)</i>	2	
<i>cefuroxime axetil</i>	2	
<b>CEPHALOSPORINS - 3RD GENERATION</b>		
<i>cefdinir (125 mg/5ml recon susp, 250 mg/5ml recon susp, 300 mg cap)</i>	2	
<i>cefixime (100 mg/5ml recon susp, 200 mg/5ml recon susp)</i>	2	
<i>cefpodoxime proxetil (50 mg/5ml recon susp, 100 mg tab, 100 mg/5ml recon susp, 200 mg tab)</i>	2	
<b>CONTRACEPTIVES (CONTINUED)</b>		
<b>BIPHASIC CONTRACEPTIVES - ORAL</b>		
<i>azurette</i>	1	MDS1 (365 / Fill)
<i>desogestrel-ethinyl estradiol 0.15-0.02/0.01 mg (21/5) tab</i>	1	MDS1 (365 / Fill)
<i>kariva</i>	1	MDS1 (365 / Fill)
LO LOESTRIN FE	1	MDS1 (365 / Fill)
<i>pimtrea</i>	1	MDS1 (365 / Fill)
<i>simliya</i>	1	MDS1 (365 / Fill)
<i>viorele</i>	1	MDS1 (365 / Fill)
<i>volnea</i>	1	MDS1 (365 / Fill)
<b>COMBINATION CONTRACEPTIVES - ORAL</b>		
<i>afirmelle</i>	1	MDS1 (365 / Fill)
<i>altavera</i>	1	MDS1 (365 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>alyacen 1/35</i>	1	MDS1 (365 / Fill)
<i>apri</i>	1	MDS1 (365 / Fill)
<i>aubra</i>	1	MDS1 (365 / Fill)
<i>aubra eq</i>	1	MDS1 (365 / Fill)
<i>aurovela 1.5/30</i>	1	MDS1 (365 / Fill)
<i>aurovela 1/20</i>	1	MDS1 (365 / Fill)
<i>aurovela 24 fe</i>	1	MDS1 (365 / Fill)
<i>aurovela fe 1.5/30</i>	1	MDS1 (365 / Fill)
<i>aurovela fe 1/20</i>	1	MDS1 (365 / Fill)
AVERI	1	MDS1 (365 / Fill)
<i>aviane</i>	1	MDS1 (365 / Fill)
<i>ayuna</i>	1	MDS1 (365 / Fill)
<i>balziva</i>	1	MDS1 (365 / Fill)
<i>blisovi 24 fe</i>	1	MDS1 (365 / Fill)
<i>blisovi fe 1.5/30</i>	1	MDS1 (365 / Fill)
<i>blisovi fe 1/20</i>	1	MDS1 (365 / Fill)
<i>briellyn</i>	1	MDS1 (365 / Fill)
<i>charlotte 24 fe</i>	1	MDS1 (365 / Fill)
<i>chateal</i>	1	MDS1 (365 / Fill)
<i>chateal eq</i>	1	MDS1 (365 / Fill)
<i>cryselle</i>	1	MDS1 (365 / Fill)
<i>cryselle-28</i>	1	MDS1 (365 / Fill)
<i>cyclafem 1/35</i>	1	MDS1 (365 / Fill)
<i>cyred</i>	1	MDS1 (365 / Fill)
<i>cyred eq</i>	1	MDS1 (365 / Fill)
<i>dasetta 1/35</i>	1	MDS1 (365 / Fill)
<i>delyla</i>	1	MDS1 (365 / Fill)
<i>drospiren-eth estrad-levomefol</i>	1	MDS1 (365 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>drospirenone-ethinyl estradiol</i>	1	MDS1 (365 / Fill)
<i>elinest</i>	1	MDS1 (365 / Fill)
<i>emoquette</i>	1	MDS1 (365 / Fill)
<i>enskyce</i>	1	MDS1 (365 / Fill)
<i>estarylla</i>	1	MDS1 (365 / Fill)
<i>ethynodiol diac-eth estradiol</i>	1	MDS1 (365 / Fill)
<i>falmina</i>	1	MDS1 (365 / Fill)
<i>feirza 1.5/30</i>	1	MDS1 (365 / Fill)
<i>feirza 1/20</i>	1	MDS1 (365 / Fill)
FEMLYV	1	MDS1 (365 / Fill)
<i>femynor</i>	1	MDS1 (365 / Fill)
<i>finzala</i>	1	MDS1 (365 / Fill)
<i>galbriela</i>	1	MDS1 (365 / Fill)
<i>gemmily</i>	1	MDS1 (365 / Fill)
<i>hailey 1.5/30</i>	1	MDS1 (365 / Fill)
<i>hailey 24 fe</i>	1	MDS1 (365 / Fill)
<i>hailey fe 1.5/30</i>	1	MDS1 (365 / Fill)
<i>hailey fe 1/20</i>	1	MDS1 (365 / Fill)
<i>isibloom</i>	1	MDS1 (365 / Fill)
<i>jasmiel</i>	1	MDS1 (365 / Fill)
<i>joyeaux</i>	1	MDS1 (365 / Fill)
<i>juleber</i>	1	MDS1 (365 / Fill)
<i>junel 1.5/30</i>	1	MDS1 (365 / Fill)
<i>junel 1/20</i>	1	MDS1 (365 / Fill)
<i>junel fe 1.5/30</i>	1	MDS1 (365 / Fill)
<i>junel fe 1/20</i>	1	MDS1 (365 / Fill)
<i>junel fe 24</i>	1	MDS1 (365 / Fill)
<i>kaitlib fe</i>	1	MDS1 (365 / Fill)

RxCore CO Option

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>kalliga</i>	1	MDS1 (365 / Fill)
<i>kelnor 1/35</i>	1	MDS1 (365 / Fill)
<i>kelnor 1/50</i>	1	MDS1 (365 / Fill)
<i>kurvelo</i>	1	MDS1 (365 / Fill)
<i>larin 1.5/30</i>	1	MDS1 (365 / Fill)
<i>larin 1/20</i>	1	MDS1 (365 / Fill)
<i>larin 24 fe</i>	1	MDS1 (365 / Fill)
<i>larin fe 1.5/30</i>	1	MDS1 (365 / Fill)
<i>larin fe 1/20</i>	1	MDS1 (365 / Fill)
<i>larissia</i>	1	MDS1 (365 / Fill)
<i>layolis fe</i>	1	MDS1 (365 / Fill)
<i>lessina</i>	1	MDS1 (365 / Fill)
<i>levonorgest-eth estradiol-iron</i>	1	MDS1 (365 / Fill)
<i>levonorgestrel-ethinyl estrad (0.1-20 tab, 0.15-30 tab)</i>	1	MDS1 (365 / Fill)
<i>levora 0.15/30 (28)</i>	1	MDS1 (365 / Fill)
<i>lillow</i>	1	MDS1 (365 / Fill)
<i>lo-zumandimine</i>	1	MDS1 (365 / Fill)
<i>loestrin 1.5/30 (21)</i>	1	MDS1 (365 / Fill)
<i>loestrin 1/20 (21)</i>	1	MDS1 (365 / Fill)
<i>loestrin fe 1.5/30</i>	1	MDS1 (365 / Fill)
<i>loestrin fe 1/20</i>	1	MDS1 (365 / Fill)
<i>loryna</i>	1	MDS1 (365 / Fill)
<i>low-ogestrel</i>	1	MDS1 (365 / Fill)
<i>luizza 1.5/30</i>	1	MDS1 (365 / Fill)
<i>luizza 1/20</i>	1	MDS1 (365 / Fill)
<i>lutra</i>	1	MDS1 (365 / Fill)
<i>marlissa</i>	1	MDS1 (365 / Fill)
<i>merzee</i>	1	MDS1 (365 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>mibelas 24 fe</i>	1	MDS1 (365 / Fill)
<i>microgestin 1.5/30</i>	1	MDS1 (365 / Fill)
<i>microgestin 1/20</i>	1	MDS1 (365 / Fill)
<i>microgestin 24 fe</i>	1	MDS1 (365 / Fill)
<i>microgestin fe 1.5/30</i>	1	MDS1 (365 / Fill)
<i>microgestin fe 1/20</i>	1	MDS1 (365 / Fill)
<i>mili</i>	1	MDS1 (365 / Fill)
<i>minzoya</i>	1	MDS1 (365 / Fill)
<i>mono-linyah</i>	1	MDS1 (365 / Fill)
<i>necon 0.5/35 (28)</i>	1	MDS1 (365 / Fill)
NEXTSTELLIS	1	MDS1 (365 / Fill)
<i>nikki</i>	1	MDS1 (365 / Fill)
<i>norethin ace-eth estrad-fe</i>	1	MDS1 (365 / Fill)
<i>norethin-eth estradiol-fe</i>	1	MDS1 (365 / Fill)
<i>norethindrone acet-ethinyl est</i>	1	MDS1 (365 / Fill)
<i>norgestimate-eth estradiol</i>	1	MDS1 (365 / Fill)
<i>nortrel 0.5/35 (28)</i>	1	MDS1 (365 / Fill)
<i>nortrel 1/35 (21)</i>	1	MDS1 (365 / Fill)
<i>nortrel 1/35 (28)</i>	1	MDS1 (365 / Fill)
<i>nylia 1/35</i>	1	MDS1 (365 / Fill)
<i>nymyo</i>	1	MDS1 (365 / Fill)
<i>ocella</i>	1	MDS1 (365 / Fill)
<i>orsythia</i>	1	MDS1 (365 / Fill)
<i>philith</i>	1	MDS1 (365 / Fill)
<i>pirmella 1/35</i>	1	MDS1 (365 / Fill)
<i>portia-28</i>	1	MDS1 (365 / Fill)
<i>previfem</i>	1	MDS1 (365 / Fill)
<i>reclipsen</i>	1	MDS1 (365 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>sprintec 28</i>	1	MDS1 (365 / Fill)
<i>sronyx</i>	1	MDS1 (365 / Fill)
<i>syeda</i>	1	MDS1 (365 / Fill)
<i>tarina 24 fe</i>	1	MDS1 (365 / Fill)
<i>tarina fe 1/20</i>	1	MDS1 (365 / Fill)
<i>tarina fe 1/20 eq</i>	1	MDS1 (365 / Fill)
<i>taysofy</i>	1	MDS1 (365 / Fill)
<i>turqoz</i>	1	MDS1 (365 / Fill)
TYBLUME	1	MDS1 (365 / Fill)
<i>tydemy</i>	1	MDS1 (365 / Fill)
<i>valtya 1/35</i>	1	MDS1 (365 / Fill)
<i>valtya 1/50</i>	1	MDS1 (365 / Fill)
<i>vestura</i>	1	MDS1 (365 / Fill)
<i>vienva</i>	1	MDS1 (365 / Fill)
<i>vyfemla</i>	1	MDS1 (365 / Fill)
<i>vylibra</i>	1	MDS1 (365 / Fill)
<i>wera</i>	1	MDS1 (365 / Fill)
<i>wymzya fe</i>	1	MDS1 (365 / Fill)
<i>xelria fe</i>	1	MDS1 (365 / Fill)
<i>zovia 1/35 (28)</i>	1	MDS1 (365 / Fill)
<i>zumandimine</i>	1	MDS1 (365 / Fill)
<b>COMBINATION CONTRACEPTIVES - TRANSDERMAL</b>		
<i>norelgestromin-eth estradiol</i>	1	MDS1 (365 / Fill)
TWIRLA	1	MDS1 (365 / Fill)
<i>xulane</i>	1	MDS1 (365 / Fill)
<i>zafemy</i>	1	MDS1 (365 / Fill)
<b>COMBINATION CONTRACEPTIVES - VAGINAL</b>		
ANNOVERA	1	MDS1 (365 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>eluryng</i>	1	MDS1 (365 / Fill)
<i>enilloring</i>	1	MDS1 (365 / Fill)
<i>etonogestrel-ethinyl estradiol</i>	1	MDS1 (365 / Fill)
<i>haloette</i>	1	MDS1 (365 / Fill)
<b>CONTINUOUS CONTRACEPTIVES - ORAL</b>		
<i>amethyst</i>	1	MDS1 (365 / Fill)
<i>dolishale</i>	1	MDS1 (365 / Fill)
<i>levonorgestrel-ethinyl estrad 90-20 mcg tab</i>	1	MDS1 (365 / Fill)
<b>EMERGENCY CONTRACEPTIVES</b>		
<i>aftera</i>	1	MDS1 (365 / Fill)
<i>afterpill</i>	1	MDS1 (365 / Fill)
<i>curae</i>	1	MDS1 (365 / Fill)
<i>econtra ez</i>	1	MDS1 (365 / Fill)
<i>econtra one-step</i>	1	MDS1 (365 / Fill)
ELLA	1	MDS1 (365 / Fill)
<i>her style</i>	1	MDS1 (365 / Fill)
<i>levonorgestrel</i>	1	MDS1 (365 / Fill)
<i>my choice</i>	1	MDS1 (365 / Fill)
<i>my way</i>	1	MDS1 (365 / Fill)
<i>new day</i>	1	MDS1 (365 / Fill)
<i>opcicon one-step</i>	1	MDS1 (365 / Fill)
<i>option 2</i>	1	MDS1 (365 / Fill)
<i>plan b one-step</i>	1	MDS1 (365 / Fill)
<i>react</i>	1	MDS1 (365 / Fill)
<i>shewise</i>	1	MDS1 (365 / Fill)
<i>take action</i>	1	MDS1 (365 / Fill)
<b>EXTENDED-CYCLE CONTRACEPTIVES - ORAL</b>		
<i>amethia</i>	1	MDS1 (365 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>ashlyna</i>	1	MDS1 (365 / Fill)
<i>camrese</i>	1	MDS1 (365 / Fill)
<i>camrese lo</i>	1	MDS1 (365 / Fill)
<i>daysee</i>	1	MDS1 (365 / Fill)
<i>fayosim</i>	1	MDS1 (365 / Fill)
<i>iclevia</i>	1	MDS1 (365 / Fill)
<i>introvale</i>	1	MDS1 (365 / Fill)
<i>jaimiess</i>	1	MDS1 (365 / Fill)
<i>jolessa</i>	1	MDS1 (365 / Fill)
<i>levonorgest-eth est &amp; eth est</i>	1	MDS1 (365 / Fill)
<i>levonorgest-eth estrad 91-day</i>	1	MDS1 (365 / Fill)
<i>lojaimiess</i>	1	MDS1 (365 / Fill)
<i>rivelsa</i>	1	MDS1 (365 / Fill)
<i>rosyrah</i>	1	MDS1 (365 / Fill)
<i>setlakin</i>	1	MDS1 (365 / Fill)
<i>simpesse</i>	1	MDS1 (365 / Fill)
<b>FOUR PHASE CONTRACEPTIVES - ORAL</b>		
NATAZIA	1	MDS1 (365 / Fill)
<b>PROGESTIN CONTRACEPTIVES - INJECTABLE</b>		
DEPO-PROVERA 150 MG/ML SUSP PRSYR	4	
DEPO-SUBQ PROVERA 104	1	MDS1 (365 / Fill)
<i>medroxyprogesterone acetate (150 mg/ml susp prsy, 150 mg/ml suspension)</i>	1	MDS1 (365 / Fill)
<b>PROGESTIN CONTRACEPTIVES - ORAL</b>		
<i>camila</i>	1	MDS1 (365 / Fill)
<i>deblitane</i>	1	MDS1 (365 / Fill)
<i>emzahh</i>	1	MDS1 (365 / Fill)
<i>errin</i>	1	MDS1 (365 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>heather</i>	1	MDS1 (365 / Fill)
<i>incassia</i>	1	MDS1 (365 / Fill)
<i>jencycla</i>	1	MDS1 (365 / Fill)
<i>lyleq</i>	1	MDS1 (365 / Fill)
<i>lyza</i>	1	MDS1 (365 / Fill)
<i>meleya</i>	1	MDS1 (365 / Fill)
<i>nora-be</i>	1	MDS1 (365 / Fill)
<i>norethindrone</i>	1	MDS1 (365 / Fill)
<i>norlyda</i>	1	MDS1 (365 / Fill)
<i>norlyroc</i>	1	MDS1 (365 / Fill)
OPILL	1	MDS1 (365 / Fill)
<i>orquidea</i>	1	MDS1 (365 / Fill)
<i>sharobel</i>	1	MDS1 (365 / Fill)
SLYND	1	MDS1 (365 / Fill)
<i>tulana</i>	1	MDS1 (365 / Fill)
<b>TRIPHASIC CONTRACEPTIVES - ORAL</b>		
<i>alyacen 7/7/7</i>	1	MDS1 (365 / Fill)
<i>cyclafem 7/7/7</i>	1	MDS1 (365 / Fill)
<i>dasetta 7/7/7</i>	1	MDS1 (365 / Fill)
<i>enpresse-28</i>	1	MDS1 (365 / Fill)
<i>leena</i>	1	MDS1 (365 / Fill)
<i>levonest</i>	1	MDS1 (365 / Fill)
<i>levonorg-eth estrad triphasic</i>	1	MDS1 (365 / Fill)
<i>norethindron-ethinyl estrad-fe</i>	1	MDS1 (365 / Fill)
<i>norgestim-eth estrad triphasic</i>	1	MDS1 (365 / Fill)
<i>nortrel 7/7/7</i>	1	MDS1 (365 / Fill)
<i>nylia 7/7/7</i>	1	MDS1 (365 / Fill)
<i>pirmella 7/7/7</i>	1	MDS1 (365 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>tilia fe</i>	1	MDS1 (365 / Fill)
<i>tri femynor</i>	1	MDS1 (365 / Fill)
<i>tri-estarylla</i>	1	MDS1 (365 / Fill)
<i>tri-legest fe</i>	1	MDS1 (365 / Fill)
<i>tri-linyah</i>	1	MDS1 (365 / Fill)
<i>tri-lo-estarylla</i>	1	MDS1 (365 / Fill)
<i>tri-lo-marzia</i>	1	MDS1 (365 / Fill)
<i>tri-lo-mili</i>	1	MDS1 (365 / Fill)
<i>tri-lo-sprintec</i>	1	MDS1 (365 / Fill)
<i>tri-mili</i>	1	MDS1 (365 / Fill)
<i>tri-nymyo</i>	1	MDS1 (365 / Fill)
<i>tri-sprintec</i>	1	MDS1 (365 / Fill)
<i>tri-vylibra</i>	1	MDS1 (365 / Fill)
<i>tri-vylibra lo</i>	1	MDS1 (365 / Fill)
<i>trivora (28)</i>	1	MDS1 (365 / Fill)
VELIVET	1	MDS1 (365 / Fill)
<i>xarah fe</i>	1	MDS1 (365 / Fill)

## **CORTICOSTEROIDS (CONTINUED)**

### **GLUCOCORTICOSTEROIDS**

<i>budesonide 3 mg cp dr part</i>	3	MDD (3.0 Per Day)
<i>budesonide er</i>	5	ST, MFL (30 / Fill), MDS1 (31 / Fill)
CORTISONE ACETATE	2	
<i>dexamethasone (0.5 mg tab, 0.5 mg/5ml elixir, 0.5 mg/5ml solution, 0.75 mg tab, 1 mg tab, 1.5 mg tab, 2 mg tab, 4 mg tab, 6 mg tab)</i>	2	
EOHILIA	5	PA, MDD (20.0 Per Day), MDS1 (31 / Fill)
<i>hydrocortisone (5 mg tab, 10 mg tab, 20 mg tab)</i>	2	
<i>hydrocortisone sod suc (pf)</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>methylprednisolone</i>	2	
<i>prednisolone 15 mg/5ml solution</i>	2	
<i>prednisolone sodium phosphate (5 mg/5ml solution, 6.7 (5 base) mg/5ml solution, 10 mg tab disp, 10 mg/5ml solution, 15 mg tab disp, 15 mg/5ml solution, 20 mg/5ml solution, 25 mg/5ml solution, 30 mg tab disp)</i>	2	
PREDNISONE (1 MG TAB, 2.5 MG TAB, 5 MG TAB, 5 MG/5ML SOLUTION, 10 MG TAB, 20 MG TAB, 50 MG TAB)	2	
SOLU-CORTEF (250 MG RECON SOLN, 500 MG RECON SOLN, 1000 MG RECON SOLN)	4	
<b>MINERALOCORTICIDS</b>		
<i>fludrocortisone acetate</i>	2	
<b>COUGH/COLD/ALLERGY (CONTINUED)</b>		
<b>ANTITUSSIVE - NONNARCOTIC</b>		
<i>benzonatate (100 mg cap, 200 mg cap)</i>	2	
<b>ANTITUSSIVE - OPIOID</b>		
<i>hydrocodone bit-homatrop mbr (5-1.5 mg tab, 5-1.5 mg/5ml solution)</i>	2	
<i>hydromet</i>	2	
<b>DECONGESTANT &amp; ANTIHISTAMINE</b>		
PROMETHAZINE VC	3	
PROMETHAZINE-PHENYLEPHRINE	3	
<b>MISC. RESPIRATORY INHALANTS</b>		
HYPERSAL	4	
NEBUSAL 3 % NEBU SOLN	4	
NEBUSAL 6 % NEBU SOLN	4	
PULMOSAL	2	
SODIUM CHLORIDE (0.9 % NEBU SOLN, 3 % NEBU SOLN, 7 % NEBU SOLN, 10 % NEBU SOLN)	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<b>MUCOLYTICS</b>		
<i>acetylcysteine (10 % solution, 20 % solution)</i>	2	
<b>NON-NARC ANTITUSSIVE-ANTIHISTAMINE</b>		
<i>promethazine-dm</i>	2	
<b>NON-NARC ANTITUSSIVE-DECONGESTANT-ANTIHISTAMINE</b>		
<i>pseudoeph-bromphen-dm</i>	2	MDD (60.0 Per Day)
<b>OPIOID ANTITUSSIVE-ANTIHISTAMINE</b>		
<i>promethazine-codeine</i>	2	
<b>DERMATOLOGICALS (CONTINUED)</b>		
<b>ACNE ANTIBIOTICS</b>		
<i>clindacin</i>	3	ST
<i>clindamycin phos (twice-daily)</i>	2	
<i>clindamycin phosphate (1 % lotion, 1 % solution, 1 % swab)</i>	2	
<i>clindamycin phosphate 1 % foam</i>	3	ST
<i>dapsone 5 % gel</i>	3	ST
ERYTHROMYCIN (2 % GEL, 2 % SOLUTION)	2	
<i>sulfacetamide sodium (acne)</i>	3	
<b>ACNE COMBINATIONS</b>		
<i>benzoyl peroxide-erythromycin</i>	2	
BP 10-1	2	
<i>clindamycin phos-benzoyl perox 1.2-2.5 % gel</i>	3	ST
<i>clindamycin phos-benzoyl perox 1.2-5 % gel</i>	2	
SSS 10-5 10-5 % CREAM	3	
SULFACETAMIDE SODIUM-SULFUR (10-5 % LIQUID, 10-5 % LOTION)	2	
SULFACETAMIDE SODIUM-SULFUR (8-4 % SUSPENSION, 9-4.25 % SUSPENSION, 9.8-4.8 % CREAM, 10-5 % CREAM, 10-5 % SUSPENSION)	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
SULFACETAMIDE-SULFUR IN UREA	2	
SULFAMEZ WASH	2	
<b>ACNE PRODUCTS</b>		
<i>acutane (10 mg cap, 20 mg cap)</i>	3	
<i>acutane 30 mg cap</i>	3	
<i>acutane 40 mg cap</i>	3	
<i>adapalene 0.1 % cream</i>	3	ST
<i>adapalene 0.3 % gel</i>	2	ST
<i>amnesteem (10 mg cap, 20 mg cap)</i>	3	
<i>amnesteem 30 mg cap</i>	3	
<i>amnesteem 40 mg cap</i>	3	
<i>claravis (10 mg cap, 20 mg cap)</i>	3	
<i>claravis 30 mg cap</i>	3	
<i>claravis 40 mg cap</i>	3	
<i>isotretinoin (10 mg cap, 20 mg cap)</i>	3	
<i>isotretinoin 30 mg cap</i>	3	
<i>isotretinoin 40 mg cap</i>	3	
<i>myorisan (10 mg cap, 20 mg cap)</i>	3	
<i>myorisan 30 mg cap</i>	3	
<i>myorisan 40 mg cap</i>	3	
<i>tretinoin (0.025 % cream, 0.05 % cream, 0.05 % gel, 0.1 % cream)</i>	3	AGE
<i>tretinoin microsphere 0.04 % gel</i>	3	ST, AGE
TRETINOIN MICROSPHERE PUMP 0.04 % GEL	3	ST, AGE
<i>zenatane (10 mg cap, 20 mg cap)</i>	3	
<i>zenatane 30 mg cap</i>	3	
<i>zenatane 40 mg cap</i>	3	
<b>ANTIBIOTICS - TOPICAL</b>		
<i>gentamicin sulfate (0.1 % cream, 0.1 % ointment)</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>mupirocin</i>	2	
<b>ANTIFUNGALS - TOPICAL</b>		
<i>ciclodan</i>	2	MFL (6.6 / Fill)
<i>ciclopirox (0.77 % gel, 1 % shampoo)</i>	2	
<i>ciclopirox 8 % solution</i>	2	MFL (6.6 / Fill)
<i>ciclopirox olamine (0.77 % cream, 0.77 % suspension)</i>	2	
<i>klayesta</i>	2	MFL (60 / Fill)
NAFTIFINE HCL (1 % CREAM, 2 % CREAM)	3	
<i>nyamyc</i>	2	MFL (60 / Fill)
<i>nystatin (100000 unit/gm cream, 100000 unit/gm ointment)</i>	2	
<i>nystatin 100000 unit/gm powder</i>	2	MFL (60 / Fill)
<i>nystop</i>	2	MFL (60 / Fill)
<b>ANTIFUNGALS - TOPICAL COMBINATIONS</b>		
CLOTRIMAZOLE-BETAMETHASONE (1-0.05 % CREAM, 1-0.05 % LOTION)	2	
<i>nystatin-triamcinolone</i>	2	
<b>ANTINEOPLASTIC ANTIMETABOLITES - TOPICAL</b>		
FLUOROURACIL (2 % SOLUTION, 5 % CREAM, 5 % SOLUTION)	2	
FLUOROURACIL 0.5 % CREAM	2	PA, MFL (30 / Fill)
<b>ANTINEOPLASTIC OR PREMALIGNANT LESIONS - TOPICAL NSAID'S</b>		
<i>diclofenac sodium 3 % gel</i>	3	PA
<b>ANTIPSORIATICS</b>		
CALCIPOTRIENE (0.005 % CREAM, 0.005 % OINTMENT, 0.005 % SOLUTION)	3	
<i>calcitrene</i>	3	
CALCITRIOL 3 MCG/GM OINTMENT	3	ST, MFL (200 / Fill)
<i>tazarotene (0.05 % gel, 0.1 % cream, 0.1 % gel)</i>	3	ST, AGE

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
VTAMA	4	ST, MDD (2.0 Per Day)
<b>ANTIPSORIATICS - SYSTEMIC</b>		
<i>acitretin</i>	4	MDD (2.0 Per Day)
BIMZELX	5	PA, MDS1 (56 / Fill)
COSENTYX (300 MG DOSE)	5	PA, MFL (2 / Fill), MDS1 (56 / Fill)
COSENTYX (75 MG/0.5ML SOLN PRSYR, 150 MG/ML SOLN PRSYR)	5	PA, MFL (2 / Fill), MDS1 (56 / Fill)
COSENTYX SENSOREADY (300 MG)	5	PA, MFL (2 / Fill), MDS1 (56 / Fill)
COSENTYX SENSOREADY PEN	5	PA, MFL (2 / Fill), MDS1 (56 / Fill)
COSENTYX UNOREADY	5	PA, MFL (2 / Fill), MDS1 (56 / Fill)
PYZCHIVA (45 MG/0.5ML SOLN PRSYR, 90 MG/ML SOLN PRSYR)	2	PA, MDS1 (84 / Fill)
SELARSDI (45 MG/0.5ML SOLN PRSYR, 90 MG/ML SOLN PRSYR)	2	PA, MDS1 (84 / Fill)
SELARSDI 45 MG/0.5ML SOLUTION	2	PA, MDD (0.018 Per Day), MFL (1.5 / Fill), MDS1 (84 / Fill)
SKYRIZI 150 MG/ML SOLN PRSYR	5	PA, MFL (2 / Fill), MDS1 (84 / Fill)
SKYRIZI PEN	5	PA, MFL (2 / Fill), MDS1 (84 / Fill)
<b>ANTISEBORRHEIC PRODUCTS</b>		
<i>selenium sulfide (2.25 % shampoo, 2.5 % lotion)</i>	2	
SELENIUM SULFIDE 2.3 % SHAMPOO	3	
<i>sodium sulfacetamide wash</i>	2	
<i>sulfacetamide sodium 10 % liquid</i>	2	
<b>ANTIVIRALS - TOPICAL</b>		
<i>acyclovir 5 % ointment</i>	2	
<b>ASTRINGENTS</b>		
XERAC AC	4	
<b>ATOPIC DERMATITIS - JANUS KINASE (JAK) INHIBITORS</b>		
CIBINQO	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)

Drug Name	Drug Tier	Requirements / Limits
<b>ATOPIC DERMATITIS - MONOCLONAL ANTIBODIES</b>		
ADBRY 150 MG/ML SOLN PRSYR	5	PA, MDS1 (31 / Fill)
ADBRY 300 MG/2ML SOLN A-INJ	5	PA, MDS1 (31 / Fill)
EBGLYSS	5	PA, MFL (4 / Fill), MDS1 (28 / Fill)
<b>BURN PRODUCTS</b>		
<i>silver sulfadiazine</i>	2	
<i>ssd</i>	2	
<b>CORTICOSTEROIDS - TOPICAL</b>		
<i>ala-cort</i>	2	
<i>alclometasone dipropionate (0.05 % cream, 0.05 % ointment)</i>	2	
AMCINONIDE 0.1 % OINTMENT	2	
<i>betamethasone dipropionate (0.05 % cream, 0.05 % lotion, 0.05 % ointment)</i>	2	
<i>betamethasone dipropionate aug (0.05 % cream, 0.05 % gel, 0.05 % lotion, 0.05 % ointment)</i>	2	
<i>betamethasone valerate (0.1 % cream, 0.1 % lotion, 0.1 % ointment, 0.12 % foam)</i>	2	
<i>clobetasol prop emollient base</i>	2	
<i>clobetasol propionate (0.025 % cream, 0.05 % cream, 0.05 % foam, 0.05 % gel, 0.05 % ointment, 0.05 % shampoo, 0.05 % solution)</i>	2	
<i>clobetasol propionate 0.05 % liquid</i>	2	MFL (125 / Fill)
<i>clobetasol propionate e</i>	2	
<i>clobetasol propionate emulsion</i>	3	
<i>desonide (0.05 % cream, 0.05 % lotion, 0.05 % ointment)</i>	2	
DESONIDE 0.05 % GEL	4	MFL (60 / Fill)
<i>desoximetasone (0.05 % gel, 0.25 % cream)</i>	2	
<i>desoximetasone 0.05 % cream</i>	3	
<i>desrx</i>	4	MFL (60 / fill(s))

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>fluocinolone acetonide (0.01 % cream, 0.01 % solution, 0.025 % cream, 0.025 % ointment)</i>	2	
<i>fluocinolone acetonide body</i>	2	
<i>fluocinolone acetonide scalp</i>	2	
<i>fluocinonide (0.05 % cream, 0.05 % gel, 0.05 % ointment, 0.05 % solution)</i>	2	
<i>fluocinonide 0.1 % cream</i>	2	ST, MFL (60 / Fill)
<i>fluocinonide emulsified base</i>	2	
FLUTICASONE PROPIONATE (0.005 % OINTMENT, 0.05 % CREAM, 0.05 % LOTION)	2	
<i>halobetasol propionate (0.05 % cream, 0.05 % ointment)</i>	2	
<i>hydrocortisone (1 % cream, 1 % ointment, 2 % lotion, 2.5 % cream, 2.5 % lotion, 2.5 % ointment)</i>	2	
HYDROCORTISONE BUTYRATE (0.1 % CREAM, 0.1 % OINTMENT, 0.1 % SOLUTION)	2	
<i>hydrocortisone valerate</i>	2	
<i>mometasone furoate (0.1 % cream, 0.1 % ointment, 0.1 % solution)</i>	2	
<i>tovet 0.05 % foam</i>	3	
<i>triamcinolone acetonide (0.025 % cream, 0.025 % lotion, 0.025 % ointment, 0.1 % cream, 0.1 % lotion, 0.1 % ointment, 0.5 % cream, 0.5 % ointment)</i>	2	
<i>triamcinolone acetonide 0.147 mg/gm aero soln</i>	3	MFL (63 / Fill)
TRIAMCINOLONE ACETONIDE 0.147 MG/GM AERO SOLN	3	ST, MFL (63 / Fill)
<i>triderm</i>	3	
<b>EMOLLIENTS</b>		
<i>ammonium lactate 12 % cream</i>	2	
<b>ENZYMES - TOPICAL</b>		
SANTYL	4	
<b>IMIDAZOLE-RELATED ANTIFUNGALS - TOPICAL</b>		
<i>clotrimazole (1 % cream, 1 % solution)</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>econazole nitrate 1 % cream</i>	2	
<i>ketoconazole (2 % cream, 2 % shampoo)</i>	2	
<i>ketoconazole 2 % foam</i>	4	ST
<b>IMMUNOMODULATORS IMIDAZOQUINOLINAMINES - TOPICAL</b>		
<i>imiquimod 5 % cream</i>	2	
<b>INTERLEUKIN-31 RECEPTOR ANTAGONISTS - SYSTEMIC</b>		
NEMLUVIO	5	PA, MFL (4 / Fill), MDS1 (56 / Fill)
<b>KERATOLYTIC/ANTIMITOTIC/VESICANT AGENTS</b>		
KERALYT 6 % SHAMPOO	3	
SALICYLIC ACID 6 % SHAMPOO	3	
<b>LOCAL ANESTHETICS - TOPICAL</b>		
<i>glydo</i>	2	
<i>lidocaine 5 % ointment</i>	2	
<i>lidocaine hcl 4 % solution</i>	2	
<i>lidocaine hcl urethral/mucosal 2 % prsyr</i>	2	
PREMIUM LIDOCAINE	2	
<b>MACROLIDE IMMUNOSUPPRESSANTS - TOPICAL</b>		
<i>tacrolimus (0.03 % ointment, 0.1 % ointment)</i>	3	MFL (100 / Fill)
<b>MISC. TOPICAL</b>		
DRYSOL	4	
QBREXZA	4	MFL (30 / Fill)
<b>PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - TOPICAL</b>		
EUCRISA	3	MFL (100 / Fill)
<b>ROSACEA AGENTS</b>		
<i>azelaic acid</i>	2	
<i>ivermectin 1 % cream</i>	3	ST, MFL (45 / Fill(s))
<i>metronidazole 0.75 % cream</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>metronidazole 0.75 % gel</i>	3	MFL (90 / Fill)
<i>metronidazole 0.75 % lotion</i>	3	
<i>metronidazole 1 % gel</i>	3	MFL (60 / Fill)
<b>SCABICIDES &amp; PEDICULICIDES</b>		
<i>malathion</i>	3	
PERMETHRIN	2	
<b>TOPICAL ANESTHETIC COMBINATIONS</b>		
<i>lidocaine-prilocaine 2.5-2.5 % cream</i>	2	
<b>TOPICAL STEROID COMBINATIONS</b>		
<i>calcipotriene-betameth diprop</i>	4	ST
<b>WOUND DRESSINGS</b>		
FILSUVEZ	5	PA, MDS1 (31 / Fill)
<b>DIAGNOSTIC PRODUCTS (CONTINUED)</b>		
<b>DIAGNOSTIC TESTS</b>		
ACCU-CHEK AVIVA PLUS STRIP	4	PA, MDD (10.0 Per Day)
ACCU-CHEK GUIDE TEST	4	PA, MDD (10.0 Per Day)
ACCU-CHEK SMARTVIEW	4	PA, MDD (10.0 Per Day)
ACCUTREND GLUCOSE	4	PA, MDD (10.0 Per Day)
ADVANCE INTUITION TEST	4	PA, MDD (10.0 Per Day)
ADVANCE MICRO-DRAW TEST	4	PA, MDD (10.0 Per Day)
ADVOCATE REDI-CODE STRIP	4	PA, MDD (10.0 Per Day)
ADVOCATE REDI-CODE+ TEST	4	PA, MDD (10.0 Per Day)
ADVOCATE TEST	4	PA, MDD (10.0 Per Day)
AGAMATRIX AMP TEST	4	PA, MDD (10.0 Per Day)
AGAMATRIX JAZZ TEST	4	PA, MDD (10.0 Per Day)
AGAMATRIX KEYNOTE TEST	4	PA, MDD (10.0 Per Day)
AGAMATRIX PRESTO TEST	4	PA, MDD (10.0 Per Day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
ASSURE 3 TEST	4	PA, MDD (10.0 Per Day)
ASSURE 4 TEST	4	PA, MDD (10.0 Per Day)
ASSURE II	4	PA, MDD (10.0 Per Day)
ASSURE II CHECK	4	PA, MDD (10.0 Per Day)
ASSURE PLATINUM	4	PA, MDD (10.0 Per Day)
ASSURE PRISM MULTI TEST	4	PA, MDD (10.0 Per Day)
ASSURE PRO TEST	4	PA, MDD (10.0 Per Day)
ASSURE TITANIUM	4	PA, MDD (10.0 Per Day)
BIOSCANNER GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
BIOTEL CARE TEST STRIPS	4	PA, MDD (10.0 Per Day)
BLOOD GLUCOSE TEST	2	PA, MDD (10.0 Per Day)
BLOOD GLUCOSE TEST STRIPS 333	2	PA, MDD (10.0 Per Day)
BLULINK GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
CAREONE BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
CARESENS N GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
CARESENS S GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
CARETOUCH TEST	4	PA, MDD (10.0 Per Day)
CLEVER CHEK AUTO-CODE TEST	4	PA, MDD (10.0 Per Day)
CLEVER CHEK AUTO-CODE VOICE STRIP	4	PA, MDD (10.0 Per Day)
CLEVER CHEK TEST	4	PA, MDD (10.0 Per Day)
CLEVER CHOICE AUTO-CODE TEST	4	PA, MDD (10.0 Per Day)
CLEVER CHOICE MICRO TEST	4	PA, MDD (10.0 Per Day)
CLEVER CHOICE NO CODING	4	PA, MDD (10.0 Per Day)
CLEVER CHOICE TALK SYSTEM STRIP	4	PA, MDD (10.0 Per Day)
CONTOUR NEXT TEST	4	PA, MDD (10.0 Per Day)
CONTOUR PLUS TEST	4	PA, MDD (10.0 Per Day)
CONTOUR TEST	4	PA, MDD (10.0 Per Day)
COOL BLOOD GLUCOSE TEST STRIPS	4	PA, MDD (10.0 Per Day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
CVS ADVANCED GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
CVS GLUCOSE METER TEST STRIPS	4	PA, MDD (10.0 Per Day)
CVS TRUE METRIX GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
D-CARE BLOOD GLUCOSE	4	PA, MDD (10.0 Per Day)
DIATHRIVE BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
DIATHRIVE GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
DIATHRIVE+ GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
DIATRUE PLUS TEST	4	PA, MDD (10.0 Per Day)
DUO-CARE TEST	4	PA, MDD (10.0 Per Day)
EASY MAX BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
EASY PLUS II GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
EASY STEP TEST	4	PA, MDD (10.0 Per Day)
EASY TALK BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
EASY TALK PLUS II TEST STRIPS	4	PA, MDD (10.0 Per Day)
EASY TOUCH HEALTHPRO GLUCOSE STRIP	4	PA, MDD (10.0 Per Day)
EASY TOUCH TEST	4	PA, MDD (10.0 Per Day)
EASY TRAK BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
EASY TRAK II GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
EASYGLUCO STRIP	4	PA, MDD (10.0 Per Day)
EASYMAX 15 TEST	4	PA, MDD (10.0 Per Day)
EASYMAX TEST	4	PA, MDD (10.0 Per Day)
EASYPRO BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
EASYPRO PLUS STRIP	4	PA, MDD (10.0 Per Day)
ELEMENT COMPACT TEST	4	PA, MDD (10.0 Per Day)
ELEMENT TEST	4	PA, MDD (10.0 Per Day)
EMBRACE BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
EMBRACE EVO BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
EMBRACE PRO GLUCOSE TEST	4	PA, MDD (10.0 Per Day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
EMBRACE TALK GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
EMBRACE WAVE BLOOD GLUCOSE STRIP	4	PA, MDD (10.0 Per Day)
EQ BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
EVOLUTION AUTOCODE STRIP	4	PA, MDD (10.0 Per Day)
FIFTY50 GLUCOSE TEST 2.0	4	PA, MDD (10.0 Per Day)
FONDCIRCLE BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
FORA 6 CONNECT STRIP	4	PA, MDD (10.0 Per Day)
FORA 6 CONNECT/GTEL TEST	4	PA, MDD (10.0 Per Day)
FORA BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
FORA D15G BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
FORA D20 BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
FORA D40/G31 BLOOD GLUCOSE	4	PA, MDD (10.0 Per Day)
FORA G20 BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
FORA G30/PREM V10 GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
FORA GD20 TEST	4	PA, MDD (10.0 Per Day)
FORA GD50 BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
FORA GTEL BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
FORA TN'G ADVANCE PRO STRIP	4	PA, MDD (10.0 Per Day)
FORA TN'G/TN'G VOICE	4	PA, MDD (10.0 Per Day)
FORA V10 BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
FORA V12 BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
FORA V20 BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
FORA V30A BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
FORACARE GD40 TEST	4	PA, MDD (10.0 Per Day)
FORACARE PREMIUM V10 TEST	4	PA, MDD (10.0 Per Day)
FORACARE TEST N GO TEST	4	PA, MDD (10.0 Per Day)
FORTISCARE G1 TEST STRIP	4	PA, MDD (10.0 Per Day)
FORTISCARE TEST	4	PA, MDD (10.0 Per Day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
FREESTYLE INSULINX TEST	3	MDD (10.0 Per Day), MDS1 (90 / Fill)
FREESTYLE LITE TEST	3	MDD (10.0 Per Day), MDS1 (90 / Fill)
FREESTYLE PRECISION NEO TEST	3	MDD (10.0 Per Day), MDS1 (90 / Fill)
FREESTYLE TEST	3	MDD (10.0 Per Day), MDS1 (90 / Fill)
GE100 BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
GENULTIMATE TEST	4	PA, MDD (10.0 Per Day)
GHT TEST	4	PA, MDD (10.0 Per Day)
GLUCO PERFECT 3 TEST	4	PA, MDD (10.0 Per Day)
GLUCOCARD 01 SENSOR PLUS	4	PA, MDD (10.0 Per Day)
GLUCOCARD EXPRESSION TEST	4	PA, MDD (10.0 Per Day)
GLUCOCARD SHINE TEST	4	PA, MDD (10.0 Per Day)
GLUCOCARD VITAL TEST	4	PA, MDD (10.0 Per Day)
GLUCOCARD X-SENSOR	4	PA, MDD (10.0 Per Day)
GLUCOCOM TEST	4	PA, MDD (10.0 Per Day)
GLUCONAVII BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
GLUCOSE METER TEST	4	PA, MDD (10.0 Per Day)
GNP EASY TOUCH GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
GNP TRUE METRIX GLUCOSE STRIPS	4	PA, MDD (10.0 Per Day)
GNP TRUETRACK SMART SYSTEM	4	PA, MDD (10.0 Per Day)
GNP TRUETRACK TEST STRIPS	4	PA, MDD (10.0 Per Day)
GOJJI BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
GOJJI BLOOD TEST STRIP/LANCETS	4	PA, MDD (10.0 Per Day)
GOODSENSE BLOOD GLUCOSE STRIP	4	PA, MDD (10.0 Per Day)
HW EMBRACE PRO GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
HW EMBRACE TALK GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
IGLUCOSE TEST STRIPS	4	PA, MDD (10.0 Per Day)

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
IHEALTH BLOOD GLUCOSE TEST STR	4	PA, MDD (10.0 Per Day)
IN TOUCH BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
INFINITY BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
INFINITY VOICE STRIP	4	PA, MDD (10.0 Per Day)
KROGER BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
KROGER HEALTHPRO GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
KROGER PREMIUM GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
LIBERTY NEXT GENERATION TEST	4	PA, MDD (10.0 Per Day)
LIBERTY TEST	4	PA, MDD (10.0 Per Day)
MEIJER BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
MEIJER ESSENTIAL GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
MEIJER TRUETEST TEST	4	PA, MDD (10.0 Per Day)
MEIJER TRUETRACK TEST	4	PA, MDD (10.0 Per Day)
MICRODOT TEST	4	PA, MDD (10.0 Per Day)
MM BLULINK GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
MM EASY TOUCH GLUCOSE	4	PA, MDD (10.0 Per Day)
MYGLUCOHEALTH TEST	4	PA, MDD (10.0 Per Day)
NEUTEK 2TEK TEST	4	PA, MDD (10.0 Per Day)
NOVA MAX GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
ON CALL EXPRESS BLOOD GLUCOSE	4	PA, MDD (10.0 Per Day)
ONE DROP TEST	4	PA, MDD (10.0 Per Day)
ONETOUCH ULTRA	4	PA, MDD (10.0 Per Day)
ONETOUCH ULTRA BLUE TEST	4	PA, MDD (10.0 Per Day)
ONETOUCH ULTRA TEST	4	PA, MDD (10.0 Per Day)
ONETOUCH VERIO STRIP	4	PA, MDD (10.0 Per Day)
OPTIUMEZ TEST	4	PA, MDD (10.0 Per Day)
PHARMACIST CHOICE AUTOCODE	4	PA, MDD (10.0 Per Day)
PHARMACIST CHOICE NO CODING	4	PA, MDD (10.0 Per Day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
PIP BLOOD GLUCOSE TEST STRIP	4	PA, MDD (10.0 Per Day)
POCKETCHEM EZ TEST	4	PA, MDD (10.0 Per Day)
PRECISION XTRA BLOOD GLUCOSE	4	PA, MDD (10.0 Per Day), MDS1 (90 / Fill)
PRECISION XTRA KETONE	3	MDD (10.0 Per Day)
PREMIUM BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
PRO VOICE V8/V9 GLUCOSE	4	PA, MDD (10.0 Per Day)
PRODIGY NO CODING BLOOD GLUC STRIP	4	PA, MDD (10.0 Per Day)
PTS PANELS GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
PTS PANELSEGLU TEST	4	PA, MDD (10.0 Per Day)
QUICK TOUCH BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
QUICKTEK TEST	4	PA, MDD (10.0 Per Day)
QUINTET AC BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
QUINTET BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
REFUAH PLUS BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
RELION BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
RELION CONFIRM/MICRO TEST	4	PA, MDD (10.0 Per Day)
RELION GLUCOSE TEST STRIPS	4	PA, MDD (10.0 Per Day)
RELION PREMIER TEST	4	PA, MDD (10.0 Per Day)
RELION PRIME TEST	4	PA, MDD (10.0 Per Day)
RELION TRUE METRIX TEST STRIPS	4	PA, MDD (10.0 Per Day)
RELION ULTIMA TEST	4	PA, MDD (10.0 Per Day)
REXALL BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
RIGHTEST GS100 BLOOD GLUCOSE	4	PA, MDD (10.0 Per Day)
RIGHTEST GS300 BLOOD GLUCOSE	4	PA, MDD (10.0 Per Day)
RIGHTEST GS550 BLOOD GLUCOSE	4	PA, MDD (10.0 Per Day)
RIGHTEST GT333 BLOOD GLUCOSE STRIP	4	PA, MDD (10.0 Per Day)
RIGHTEST GT333 GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
SMART SENSE PREMIUM TEST	4	PA, MDD (10.0 Per Day)

RxCore CO Option

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
SMART SENSE VALUE TEST	4	PA, MDD (10.0 Per Day)
SMARTEST BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
SOLUS V2 TEST	4	PA, MDD (10.0 Per Day)
SUPREME TEST	4	PA, MDD (10.0 Per Day)
TGT BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
TRUE FOCUS BLOOD GLUCOSE STRIP	4	PA, MDD (10.0 Per Day)
TRUE METRIX BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
TRUE METRIX PRO BLOOD GLUCOSE	4	PA, MDD (10.0 Per Day)
TRUETEST TEST	4	PA, MDD (10.0 Per Day)
TRUETRACK TEST	4	PA, MDD (10.0 Per Day)
UNISTRIP1 GENERIC	4	PA, MDD (10.0 Per Day)
VERASENS BLOOD GLUCOSE TEST	4	PA, MDD (10.0 Per Day)
VIVAGUARD INO TEST STRIPS	4	PA, MDD (10.0 Per Day)
<b>DIGESTIVE AIDS (CONTINUED)</b>		
<b>DIGESTIVE ENZYMES</b>		
CREON	3	MDD (33.0 Per Day)
ZENPEP	3	MDD (33.0 Per Day)
<b>DIURETICS (CONTINUED)</b>		
<b>CARBONIC ANHYDRASE INHIBITORS</b>		
<i>acetazolamide</i>	2	
<i>acetazolamide er</i>	2	
<i>dichlorphenamide</i>	5	PA, AGE, MDD (4.0 Per Day), MDS1 (31 / Fill)
<i>methazolamide</i>	3	
<b>DIURETIC COMBINATIONS</b>		
AMILORIDE-HYDROCHLOROTHIAZIDE	2	
<i>spironolactone-hctz</i>	2	
<i>triamterene-hctz</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<b>LOOP DIURETICS</b>		
<i>bumetanide (0.5 mg tab, 1 mg tab, 2 mg tab)</i>	2	
<i>ethacrynic acid</i>	3	PA, MDD (8.0 Per Day)
<i>furosemide (10 mg/ml solution, 20 mg tab, 40 mg tab, 80 mg tab)</i>	2	
FUROSEMIDE (8 MG/ML SOLUTION, 10 MG/ML SOLUTION)	2	
<i>torseamide</i>	2	
<b>POTASSIUM SPARING DIURETICS</b>		
<i>amiloride hcl</i>	2	
<i>spironolactone (25 mg tab, 50 mg tab, 100 mg tab)</i>	2	
<i>triamterene</i>	3	
<b>THIAZIDES AND THIAZIDE-LIKE DIURETICS</b>		
<i>chlorthalidone</i>	2	
DIURIL	3	AGE, MDD (20.0 Per Day)
<i>hydrochlorothiazide</i>	2	
<i>indapamide</i>	2	
<i>metolazone</i>	2	
<b>ENDOCRINE AND METABOLIC AGENTS - MISC. (CONTINUED)</b>		
<b>ABORTIFACIENT - PROGESTERONE RECEPTOR ANTAGONISTS</b>		
<i>mifepristone 200 mg tab</i>	1	MDD (1.0 Per Day)
<b>BISPHOSPHONATES</b>		
<i>alendronate sodium (35 mg tab, 70 mg tab)</i>	2	MFL (4 / Fill)
<i>alendronate sodium (5 mg tab, 10 mg tab)</i>	2	MDD (1.0 Per Day)
<i>ibandronate sodium 150 mg tab</i>	2	MFL (1 / Fill)
<i>risedronate sodium (5 mg tab, 30 mg tab)</i>	2	ST, MDD (1.0 Per Day)
<i>risedronate sodium 150 mg tab</i>	2	MFL (1 / fill(s))
<b>CALCIMIMETIC AGENTS</b>		
<i>cinacalcet hcl</i>	2	MDD (4.0 Per Day)

Drug Name	Drug Tier	Requirements / Limits
<b>CALCITONINS</b>		
<i>calcitonin (salmon) 200 unit/act solution</i>	2	
<b>CARNITINE REPLENISHER - AGENTS</b>		
<i>levocarnitine (1 gm/10ml solution, 330 mg tab)</i>	3	
<i>levocarnitine sf</i>	3	
<b>CKD AGENT-SODIUM/HYDROGEN EXCHANGER 3 (NHE3) INHIBITOR</b>		
XPHOZAH	5	PA, MDD (2.0 Per Day), MDS1 (31 / Fill)
<b>CORTISOL SYNTHESIS INHIBITORS</b>		
ISTURISA 1 MG TAB	5	PA, MDD (8.0 Per Day), MDS1 (31 / Fill)
ISTURISA 5 MG TAB	5	PA, MDD (2.0 Per Day), MDS1 (31 / Fill)
<b>DOPAMINE RECEPTOR AGONISTS</b>		
<i>cabergoline</i>	2	MDD (2.0 Per Day)
<b>GAA DEFICIENCY TREATMENT - AGENTS</b>		
OPFOLDA	3	PA, MDD (0.36 Per Day)
<b>GROWTH HORMONES</b>		
GENOTROPIN 12 MG CARTRIDGE	4	PA, MFL (8 / Fill), MDS1 (38 / Fill)
GENOTROPIN 5 MG CARTRIDGE	4	PA, MFL (18 / Fill), MDS1 (38 / Fill)
GENOTROPIN MINIQUICK (0.4 MG PRSYR, 0.6 MG PRSYR, 0.8 MG PRSYR, 1 MG PRSYR, 1.2 MG PRSYR, 1.4 MG PRSYR, 1.6 MG PRSYR, 1.8 MG PRSYR, 2 MG PRSYR)	5	PA, MDD (1.2 Per Day), MDS1 (31 / Fill)
GENOTROPIN MINIQUICK 0.2 MG PRSYR	4	PA, MDD (1.2 Per Day), MDS1 (31 / Fill)
ZOMACTON (FOR ZOMA-JET 10)	5	PA, MDD (1.2 Per Day), MDS1 (31 / Fill)
ZOMACTON 10 MG RECON SOLN	5	PA, MDD (1.2 Per Day), MDS1 (31 / Fill)
ZOMACTON 5 MG RECON SOLN	5	PA, MFL (18 / Fill), MDS1 (38 / Fill)

Drug Name	Drug Tier	Requirements / Limits
<b>HEREDITARY TYROSINEMIA TYPE 1 (HT-1) TREATMENT - AGENTS</b>		
<i>nitisinone</i>	5	PA, MDD (4.0 Per Day), MDS1 (31 / Fill)
<b>HOMOCYSTINURIA TREATMENT - AGENTS</b>		
<i>betaine</i>	2	PA, MDS1 (31 / Fill)
CYSTADANE	5	PA
<b>HYPERPARATHYROID TREATMENT - VITAMIN D ANALOGS</b>		
<i>calcitriol (0.25 mcg cap, 0.5 mcg cap)</i>	2	
<i>calcitriol 1 mcg/ml solution</i>	2	MDD (2.6 Per Day)
CALCITRIOL 1 MCG/ML SOLUTION	2	MDD (2.6 Per Day)
<i>paricalcitol (1 mcg cap, 2 mcg cap, 4 mcg cap)</i>	2	
<b>HYPOPHOSPHATASIA (HPP) AGENTS</b>		
STRENSIQ 18 MG/0.45ML SOLUTION	5	PA, MFL (10.8 / Fill), MDS1 (31 / Fill)
STRENSIQ 28 MG/0.7ML SOLUTION	5	PA, MFL (16.8 / Fill), MDS1 (31 / Fill)
STRENSIQ 40 MG/ML SOLUTION	5	PA, MFL (24 / Fill), MDS1 (31 / Fill)
STRENSIQ 80 MG/0.8ML SOLUTION	5	PA, MFL (19.2 / Fill), MDS1 (31 / Fill)
<b>LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS</b>		
LUPRON DEPOT-PED (1-MONTH)	5	MDS1 (31 / Fill)
LUPRON DEPOT-PED (3-MONTH)	5	MDS1 (31 / Fill)
<b>OVULATION STIMULANTS-GONADOTROPINS</b>		
CHORIONIC GONADOTROPIN	3	PA
NOVAREL	4	PA
PREGNYL	4	PA
<b>PARATHYROID HORMONE AND DERIVATIVES</b>		
TYMLOS	5	PA, MDS1 (31 / Fill)
<b>PHENYLKETONURIA TREATMENT - AGENTS</b>		
<i>javygtor</i>	5	PA, MDD (20.0 Per Day), MDS1 (31 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>sapropterin dihydrochloride (100 mg packet, 500 mg packet)</i>	5	PA, MDD (20.0 Per Day), MDS1 (31 / Fill)
<i>sapropterin dihydrochloride 100 mg tab</i>	5	PA, MDD (20.0 Per Day), MDS1 (31 / Fill)
<i>zelvysia</i>	5	PA, MDD (20.0 Per Day), MDS1 (31 / Fill)
<b>RANK LIGAND (RANKL) INHIBITORS</b>		
BILDYOS	5	MFL (1 / rx), MDS1 (180 / Fill)
JUBBONTI	5	MFL (1 / Fill), MDS1 (180 / Fill)
<b>SELECTIVE ESTROGEN RECEPTOR MODULATORS (SERMS)</b>		
OSPHENA	4	MDD (1.0 Per Day)
<i>raloxifene hcl</i>	1	MDD (1.0 Per Day)
<b>SELECTIVE VASOPRESSIN V2-RECEPTOR ANTAGONISTS</b>		
<i>tolvaptan (15 mg tab, 30 mg tab)</i>	2	PA, MDD (2.0 Per Day), MDS1 (31 / Fill)
<i>tolvaptan (hyponatremia) 15 mg tab</i>	2	PA, MDD (2.0 Per Day), MDS1 (31 / day(s))
<i>tolvaptan (hyponatremia) 30 mg tab</i>	2	PA, MDD (2.0 Per Day), MDS1 (31 / day(s))
<b>SOMATOSTATIC AGENTS</b>		
BYNFEZIA PEN	5	PA, MDS1 (31 / Fill)
<i>octreotide acetate (10 mg kit, 20 mg kit, 30 mg kit)</i>	5	MDS1 (31 / Fill)
OCTREOTIDE ACETATE 100 MCG/ML SOLN PRSYR	3	MDD (15.0 Per Day), MDS1 (31 / Fill)
<i>octreotide acetate 100 mcg/ml solution</i>	3	MDD (15.0 Per Day)
<i>octreotide acetate 1000 mcg/ml solution</i>	3	MDD (1.5 Per Day)
<i>octreotide acetate 200 mcg/ml solution</i>	3	MDD (7.5 Per Day)
OCTREOTIDE ACETATE 50 MCG/ML SOLN PRSYR	3	MDD (30.0 Per Day), MDS1 (31 / Fill)
<i>octreotide acetate 50 mcg/ml solution</i>	3	MDD (30.0 Per Day)
OCTREOTIDE ACETATE 500 MCG/ML SOLN PRSYR	3	MDD (3.0 Per Day), MDS1 (31 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>octreotide acetate 500 mcg/ml solution</i>	3	MDD (3.0 Per Day)
SANDOSTATIN	5	PA
<b>UREA CYCLE DISORDER - AGENTS</b>		
OLPRUVA (2 GM DOSE)	5	PA, MDD (20.0 Per Day), MDS1 (31 / Fill)
OLPRUVA (3 GM DOSE)	5	PA, MDD (12.0 Per Day), MDS1 (31 / Fill)
OLPRUVA (4 GM DOSE)	5	PA, MDD (15.0 Per Day), MDS1 (31 / Fill)
OLPRUVA (5 GM DOSE)	5	PA, MDD (12.0 Per Day), MDS1 (31 / Fill)
OLPRUVA (6 GM DOSE)	5	PA, MDD (9.0 Per Day), MDS1 (31 / Fill)
OLPRUVA (6.67 GM DOSE)	5	PA, MDD (9.0 Per Day), MDS1 (31 / Fill)
PHEBURANE	5	PA, MDD (41.4 Per Day), MDS1 (31 / Fill)
<b>VASOPRESSIN</b>		
<i>desmopressin ace spray refrig</i>	2	MFL (15 / fill(s))
<i>desmopressin acetate 0.1 mg tab</i>	2	MDD (2.0 Per Day)
<i>desmopressin acetate 0.2 mg tab</i>	2	MDD (4.0 Per Day)
DESMOPRESSIN ACETATE 1.5 MG/ML SOLUTION	2	MDD (0.22 Per Day), MDS1 (31 / Fill)
<i>desmopressin acetate 4 mcg/ml solution</i>	2	MDD (1.0 Per Day), MDS1 (31 / Fill)
<i>desmopressin acetate pf</i>	2	MDD (1.0 Per Day), MDS1 (31 / Fill)
<i>desmopressin acetate spray</i>	2	MFL (15 / Fill)
<b>ESTROGENS (CONTINUED)</b>		
<b>ESTROGEN &amp; ANDROGEN</b>		
COVARYX	2	MDD (1.0 Per Day)
COVARYX HS	2	MDD (1.0 Per Day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
EEMT	2	MDD (1.0 Per Day)
EEMT HS	2	MDD (1.0 Per Day)
<i>est estrogens-methyltest</i>	2	MDD (1.0 Per Day)
<i>est estrogens-methyltest ds</i>	2	MDD (1.0 Per Day)
<i>est estrogens-methyltest hs</i>	2	MDD (1.0 Per Day)
<i>estratest f.s.</i>	2	MDD (1.0 Per Day)
ESTRATEST H.S.	2	MDD (1.0 Per Day)
<b>ESTROGEN &amp; PROGESTIN</b>		
<i>abigale</i>	2	MDD (1.0 Per Day)
<i>abigale lo</i>	2	MDD (1.0 Per Day)
<i>amabelz</i>	2	MDD (1.0 Per Day)
<i>estradiol-norethindrone acet</i>	2	MDD (1.0 Per Day)
<i>fyavolv</i>	1	
<i>jinteli</i>	1	
<i>mimvey</i>	2	MDD (1.0 Per Day)
<i>norethindrone-eth estradiol</i>	1	
PREMPHASE	3	MDD (1.0 Per Day)
PREMPRO	3	MDD (1.0 Per Day)
<b>ESTROGEN-SELECTIVE ESTROGEN RECEPTOR MODULATOR COMB</b>		
DUAVEE	3	MDD (1.0 Per Day)
DEPO-ESTRADIOL	4	
<i>dotti</i>	2	MFL (8 / Fill), MDS1 (28 / Fill)
<i>estradiol (0.025 mg/24hr patch tw, 0.0375 mg/24hr patch tw, 0.05 mg/24hr patch tw, 0.075 mg/24hr patch tw, 0.1 mg/24hr patch tw)</i>	2	MFL (8 / Fill), MDS1 (28 / Fill)
<i>estradiol (0.025 mg/24hr patch wk, 0.0375 mg/24hr patch wk, 0.05 mg/24hr patch wk, 0.06 mg/24hr patch wk, 0.075 mg/24hr patch wk, 0.1 mg/24hr patch wk)</i>	2	
<i>estradiol (0.25 mg/0.25gm gel, 0.5 mg/0.5gm gel, 0.75 mg/0.75gm gel, 1 mg/gm gel)</i>	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>estradiol (0.5 mg tab, 1 mg tab, 2 mg tab)</i>	2	MDD (6.0 Per Day)
<i>estradiol 0.75 mg/1.25 gm (0.06%) gel</i>	2	MFL (50 / Fill)
<i>estradiol valerate</i>	2	
EVAMIST	4	MFL (16.2 / Fill)
<i>lyllana</i>	2	MFL (8 / Fill), MDS1 (28 / Fill)
MENEST	4	MDD (3.0 Per Day)
PREMARIN (0.3 MG TAB, 0.45 MG TAB, 0.625 MG TAB, 0.9 MG TAB, 1.25 MG TAB)	3	
<b>FLUOROQUINOLONES (CONTINUED)</b>		
<i>ciprofloxacin hcl (250 mg tab, 500 mg tab, 750 mg tab)</i>	2	
<i>levofloxacin (25 mg/ml solution, 250 mg tab, 500 mg tab, 750 mg tab)</i>	2	
<i>moxifloxacin hcl 400 mg tab</i>	2	
OFLOXACIN (300 MG TAB, 400 MG TAB)	2	
<b>GASTROINTESTINAL AGENTS - MISC. (CONTINUED)</b>		
<b>GALLSTONE SOLUBILIZING AGENTS</b>		
<i>ursodiol (250 mg tab, 300 mg cap, 500 mg tab)</i>	3	
<b>GASTROINTESTINAL ANTIALLERGY AGENTS</b>		
<i>cromolyn sodium 100 mg/5ml conc</i>	3	
<b>GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS</b>		
<i>lubiprostone</i>	3	AGE, MDD (2.0 Per Day)
<b>GASTROINTESTINAL STIMULANTS</b>		
<i>metoclopramide hcl (5 mg tab, 5 mg/5ml solution, 10 mg tab, 10 mg/10ml solution)</i>	2	
<b>HEPATOTROPICS - THYROID HORMONE RECEPTOR-BETA AGONISTS</b>		
REZDIFFRA	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
<b>IBS AGENT - GUANYLATE CYCLASE-C (GC-C) AGONISTS</b>		
LINZESS	3	MDD (1.0 Per Day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<b>IBS AGENT - SELECTIVE 5-HT3 RECEPTOR ANTAGONISTS</b>		
<i>alosetron hcl</i>	2	ST, MDD (2.0 Per Day), MDS1 (90 / Fill)
<b>INFLAMMATORY BOWEL AGENTS</b>		
<i>balsalazide disodium</i>	3	
<i>mesalamine 1.2 gm tab dr</i>	3	MDD (4.0 Per Day)
<i>mesalamine 1000 mg suppos</i>	2	MDD (1.0 Per Day)
<i>mesalamine 4 gm enema</i>	3	
<i>mesalamine 400 mg cap dr</i>	3	MDD (12.0 Per Day)
<i>mesalamine 800 mg tab dr</i>	3	MDD (6.0 Per Day)
<i>mesalamine er 0.375 gm cap er 24h</i>	3	MDD (4.0 Per Day)
<i>mesalamine er 500 mg cap er</i>	3	MDD (8.0 Per Day)
<i>sulfasalazine</i>	2	
<b>INTEGRIN RECEPTOR ANTAGONISTS</b>		
ENTYVIO PEN	5	PA, MDD (0.06 Per Day), MDS1 (31 / Fill)
<b>INTERLEUKIN ANTAGONISTS</b>		
SKYRIZI 180 MG/1.2ML SOLN CART	5	PA, MFL (1.2 / Fill), MDS1 (56 / Fill)
SKYRIZI 360 MG/2.4ML SOLN CART	5	PA, MFL (2.4 / Fill), MDS1 (56 / Fill)
<b>INTESTINAL ACIDIFIERS</b>		
<i>enulose</i>	2	
<i>generlac</i>	2	
<i>lactulose encephalopathy</i>	2	
<b>LIVE FECAL MICROBIOTA (HUMAN)</b>		
VOWST	5	ST, MFL (12 / Fill), MDS1 (31 / Fill)
<b>PHOSPHATE BINDER AGENTS</b>		
<i>calcium acetate (phos binder)</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>calcium acetate 667 mg tab</i>	2	
<i>lanthanum carbonate (500 mg chew tab, 750 mg chew tab)</i>	5	PA, MDD (3.0 Per Day)
<i>lanthanum carbonate 1000 mg chew tab</i>	5	PA, MDD (4.5 Per Day)
<i>sevelamer carbonate (0.8 gm packet, 2.4 gm packet)</i>	5	ST
<i>sevelamer carbonate 800 mg tab</i>	2	
<i>sevelamer hcl</i>	5	ST
<b>TUMOR NECROSIS FACTOR ALPHA BLOCKERS</b>		
CIMZIA	5	PA, MDD (0.1 Per Day), MDS1 (31 / Fill)
CIMZIA (1 SYRINGE)	5	PA, MDD (0.1 Per Day), MDS1 (31 / Fill)
CIMZIA (2 SYRINGE)	5	PA, MDD (0.1 Per Day), MDS1 (31 / Fill)
CIMZIA-STARTER	5	PA, MDD (0.1 Per Day), MDS1 (56 / Fill)
<b>GENITOURINARY AGENTS - MISCELLANEOUS (CONTINUED)</b>		
<b>5-ALPHA REDUCTASE INHIBITORS</b>		
<i>dutasteride</i>	2	MDD (1.0 Per Day)
<i>finasteride 5 mg tab</i>	2	MDD (1.0 Per Day)
<b>ALPHA 1-ADRENOCEPTOR ANTAGONISTS</b>		
<i>alfuzosin hcl er</i>	2	MDD (1.0 Per Day)
<i>silodosin</i>	2	MDD (1.0 Per Day)
<i>tamsulosin hcl</i>	2	MDD (2.0 Per Day)
<b>ANTI-INFECTIVE GENITOURINARY IRRIGANTS</b>		
NEOMYCIN-POLYMYXIN B GU	2	
<b>CITRATES</b>		
<i>pot &amp; sod cit-cit ac</i>	2	
<i>potassium citrate er</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
POTASSIUM CITRATE-CITRIC ACID	2	
<i>sod citrate-citric acid</i>	2	
SODIUM CITRATE-CITRIC ACID	2	
TRICITRATES	2	
<b>CYSTINOSIS AGENTS</b>		
CYSTAGON	3	
<b>GENITOURINARY IRRIGANTS</b>		
<i>acetic acid 0.25 % solution</i>	2	
ARGYLE STERILE SALINE	2	
CURITY STERILE SALINE	2	
RENACIDIN	4	
SODIUM CHLORIDE 0.9 % SOLUTION	2	
<b>PROSTATIC HYPERTROPHY AGENT COMBINATIONS</b>		
<i>dutasteride-tamsulosin hcl</i>	2	MDD (1.0 Per Day)
<b>URINARY ANALGESICS</b>		
<i>phenazo 200 mg tab</i>	2	
PHENAZOPYRIDINE HCL (100 MG TAB, 200 MG TAB)	2	
<b>URINARY STONE AGENTS</b>		
<i>tiopronin 100 mg tab</i>	2	MDS1 (31 / Fill)
<b>GOUT AGENTS (CONTINUED)</b>		
<b>GOUT AGENT COMBINATIONS</b>		
<i>colchicine-probenecid</i>	2	
<i>allopurinol (100 mg tab, 300 mg tab)</i>	2	
<i>colchicine 0.6 mg tab</i>	2	MDD (3.0 Per Day)
<i>febuxostat</i>	2	MDD (1.0 Per Day)
<b>URICOSURICS</b>		
<i>probenecid</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<b>HEMATOLOGICAL AGENTS - MISC. (CONTINUED)</b>		
<b>BRADYKININ B2 RECEPTOR ANTAGONISTS</b>		
<i>icatibant acetate</i>	5	PA, MFL (9 / Fill), MDS1 (31 / Fill)
<b>DIRECT-ACTING P2Y12 INHIBITORS</b>		
<i>ticagrelor</i>	2	MDD (2.0 Per Day)
<b>HEMATORHEOLOGIC AGENTS</b>		
<i>pentoxifylline er</i>	2	
<b>PHOSPHODIESTERASE III INHIBITORS</b>		
<i>cilostazol</i>	2	
<b>PLATELET AGGREGATION INHIBITOR COMBINATIONS</b>		
<i>aspirin-dipyridamole er</i>	3	
<b>PLATELET AGGREGATION INHIBITORS</b>		
<i>dipyridamole (25 mg tab, 50 mg tab, 75 mg tab)</i>	3	
<b>QUINAZOLINE AGENTS</b>		
<i>anagrelide hcl</i>	3	
<b>THIENOPYRIDINE DERIVATIVES</b>		
<i>clopidogrel bisulfate</i>	2	MDD (2.0 Per Day)
<i>prasugrel hcl</i>	2	MDD (1.0 Per Day)
<b>HEMATOPOIETIC AGENTS (CONTINUED)</b>		
<b>AGENTS FOR GAUCHER DISEASE</b>		
<i>miglustat</i>	5	PA, MDD (3.0 Per Day), MDS1 (31 / Fill)
<i>yargesa</i>	5	PA, MDD (3.0 Per Day), MDS1 (31 / Fill)
<b>COBALAMINS</b>		
<i>cyanocobalamin (1000 mcg/ml solution, 2000 mcg/ml solution)</i>	2	MDS1 (90 / day(s))
<i>cyanocobalamin 500 mcg/0.1ml solution</i>	2	MDS1 (90 / day(s))

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<b>FOLIC ACID/FOLATES</b>		
<i>cvs folic acid</i>	1	
<i>folate</i>	1	
<i>folic acid (1 mg tab, 400 mcg tab, 800 mcg tab)</i>	1	
<i>ft folic acid</i>	1	
<i>gnp folic acid</i>	1	
<i>hm folic acid</i>	1	
<i>kp folic acid 800 mcg tab</i>	1	
<i>px folic acid</i>	1	
<i>qc folic acid</i>	1	
<i>ra folic acid</i>	1	
<i>sm folic acid</i>	1	
<i>true folic acid 400 mcg tab</i>	1	
<i>yl folic acid</i>	1	
<b>IRON</b>		
<i>bprotected pedia iron</i>	1	AGE, MFL (50 / Fill)
<i>fe-vite iron</i>	1	AGE, MFL (50 / Fill)
<i>fer-in-sol</i>	1	AGE, MFL (50 / Fill)
<i>ferrous sulfate (75 (15 fe) mg/ml solution, 220 (44 fe) mg/5ml solution, 300 (60 fe) mg/5ml solution, 300 mg/6.8ml solution)</i>	1	AGE, MFL (50 / Fill)
<i>iron (ferrous sulfate) 75 (15 fe) mg/ml solution</i>	1	AGE, MFL (50 / Fill)
<i>iron infant &amp; toddler</i>	1	AGE, MFL (50 / Fill)
<i>iron infant/toddler</i>	1	AGE, MFL (50 / Fill)
<i>iron supplement</i>	1	AGE, MFL (50 / Fill)
<i>iron supplement childrens</i>	1	AGE, MFL (50 / Fill)
<i>one vite ferrous sulfate</i>	1	AGE, MFL (50 / Fill)
<i>pc pediatric iron drops</i>	1	AGE, MFL (50 / Fill)
<b>IRON COMBINATIONS</b>		
MULTIGEN	4	MDD (1.0 Per Day)

Drug Name	Drug Tier	Requirements / Limits
<b>HEMOSTATICS (CONTINUED)</b>		
<b>HEMOSTATICS - SYSTEMIC</b>		
<i>aminocaproic acid 0.25 gm/ml solution</i>	3	MDD (137.0 Per Day)
<i>aminocaproic acid 1000 mg tab</i>	3	MFL (240 / Fill), MDS1 (10 / Fill)
<i>aminocaproic acid 500 mg tab</i>	3	MFL (480 / Fill), MDS1 (10 / Fill)
<i>tranexamic acid 650 mg tab</i>	2	MFL (30 / Fill)
<b>HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS (CONTINUED)</b>		
<b>BARBITURATE HYPNOTICS</b>		
<i>phenobarbital (15 mg tab, 16.2 mg tab, 20 mg/5ml elixir, 30 mg tab, 30 mg/7.5ml elixir, 32.4 mg tab, 60 mg tab, 60 mg/15ml elixir, 64.8 mg tab, 97.2 mg tab, 100 mg tab)</i>	2	
<b>BENZODIAZEPINE HYPNOTICS</b>		
<i>estazolam</i>	2	MDD (1.0 Per Day)
FLURAZEPAM HCL (15 MG CAP, 30 MG CAP)	2	ST, MDD (1.0 Per Day)
<i>temazepam 15 mg cap</i>	2	MDD (2.0 Per Day)
<i>temazepam 30 mg cap</i>	2	MDD (1.0 Per Day)
<i>triazolam</i>	2	MDD (2.0 Per Day)
<b>NON-BENZODIAZEPINE - GABA-RECEPTOR MODULATORS</b>		
<i>eszopiclone</i>	2	MDD (2.0 Per Day)
<i>zaleplon</i>	2	MDD (2.0 Per Day)
<i>zolpidem tartrate (5 mg tab, 10 mg tab)</i>	2	MDD (2.0 Per Day)
<i>zolpidem tartrate er</i>	2	MDD (1.0 Per Day)
<b>SELECTIVE MELATONIN RECEPTOR AGONISTS</b>		
<i>ramelteon</i>	2	MDD (1.0 Per Day)
<i>tasimelteon</i>	5	MDD (1.0 Per Day), MDS1 (31 / Fill)
<b>LAXATIVES (CONTINUED)</b>		
<b>BOWEL EVACUANT COMBINATIONS</b>		
CLENPIQ 10-3.5-12 MG-GM -GM/175ML SOLUTION	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
GAVILYTE-C	4	
<i>gavilyte-g</i>	1	
<i>na sulfate-k sulfate-mg sulf</i>	1	
<i>peg 3350-kcl-na bicarb-nacl</i>	1	
<i>peg-3350/electrolytes</i>	1	
<i>peg-3350/electrolytes/ascorbat</i>	1	
<i>peg-kcl-nacl-nasulf-na asc-c</i>	1	
PEG-PREP	1	
<b>LAXATIVES - MISCELLANEOUS</b>		
<i>constulose</i>	2	
<i>lactulose (10 gm/15ml solution, 20 gm/30ml solution)</i>	2	
<b>MACROLIDES (CONTINUED)</b>		
<b>AZITHROMYCIN</b>		
<i>azithromycin (100 mg/5ml recon susp, 200 mg/5ml recon susp)</i>	2	
<i>azithromycin (250 mg tab, 600 mg tab)</i>	2	MFL (30 / Fill)
<b>CLARITHROMYCIN</b>		
CLARITHROMYCIN (125 MG/5ML RECON SUSP, 250 MG TAB, 250 MG/5ML RECON SUSP, 500 MG TAB)	2	
<i>clarithromycin er</i>	2	
<b>ERYTHROMYCINS</b>		
<i>e.e.s. 400</i>	3	
<i>erythromycin (250 mg tab dr, 333 mg tab dr, 500 mg tab dr)</i>	3	
<i>erythromycin base (250 mg cp dr part, 250 mg tab, 250 mg tab dr, 333 mg tab dr, 500 mg tab, 500 mg tab dr)</i>	3	
<i>erythromycin ethylsuccinate (200 mg/5ml recon susp, 400 mg/5ml recon susp)</i>	3	AGE

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>erythromycin ethylsuccinate 400 mg tab</i>	3	
<b>FIDAXOMICIN</b>		
<i>fidaxomicin</i>	5	PA, MFL (20 / Fill), MDS1 (28 / Fill)
<b>MEDICAL DEVICES AND SUPPLIES (CONTINUED)</b>		
<b>CERVICAL CAPS</b>		
FEMCAP	1	MDS1 (365 / Fill)
<b>CONDOMS - FEMALE</b>		
FC2 FEMALE CONDOM	1	MDS1 (365 / Fill)
<b>CONDOMS - MALE</b>		
AIMSCO LUBRICATED	1	MDS1 (365 / Fill)
CONDOMS	1	MDS1 (365 / Fill)
DUREX EXTRA SENSITIVE THIN	1	MDS1 (365 / Fill)
DUREX REALFEEL	1	MDS1 (365 / Fill)
DUREX TROPICAL	1	MDS1 (365 / Fill)
FANTASY LUBRICATED	1	MDS1 (365 / Fill)
FANTASY LUBRICATED/SPERMICIDE	1	MDS1 (365 / Fill)
K-Y ME & YOU EXTRA LUBRICATED	1	MDS1 (365 / Fill)
K-Y ME & YOU INTENSE	1	MDS1 (365 / Fill)
KAMELEON LUBRICATED	1	MDS1 (365 / Fill)
KIMONO	1	MDS1 (365 / Fill)
KIMONO COLORS	1	MDS1 (365 / Fill)
KIMONO MAXX-LARGE FLARE	1	MDS1 (365 / Fill)
KIMONO MICRO THIN	1	MDS1 (365 / Fill)
KIMONO MICRO THIN PLUS	1	MDS1 (365 / Fill)
KIMONO PLUS	1	MDS1 (365 / Fill)
KIMONO PS	1	MDS1 (365 / Fill)
KIMONO PS PLUS	1	MDS1 (365 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
KIMONO SENSATION	1	MDS1 (365 / Fill)
KIMONO SENSATION PLUS	1	MDS1 (365 / Fill)
KIMONO SPECIAL	1	MDS1 (365 / Fill)
MAXX	1	MDS1 (365 / Fill)
MAXX PLUS	1	MDS1 (365 / Fill)
PREMIUM CONDOMS LUBRICATED	1	MDS1 (365 / Fill)
REALITY LATEX CONDOMS	1	MDS1 (365 / Fill)
REALITY LATEX/ULTRA TEXTURED	1	MDS1 (365 / Fill)
REALITY LATEX/ULTRA THIN	1	MDS1 (365 / Fill)
TROJAN BARESKIN	1	MDS1 (365 / Fill)
TROJAN ENZ	1	MDS1 (365 / Fill)
TROJAN MAGNUM	1	MDS1 (365 / Fill)
TROJAN ULTRA RIBBED LUBRICATED	1	MDS1 (365 / Fill)
TROJAN ULTRA THIN	1	MDS1 (365 / Fill)
TROJAN ULTRA THIN/SPERMICIDAL	1	MDS1 (365 / Fill)
TROJAN-ENZ LUBRICATED	1	MDS1 (365 / Fill)
TROJAN-ENZ/SPERMICIDAL	1	MDS1 (365 / Fill)
TRUE COVER	1	MDS1 (365 / Fill)
TRUSTEX COLOR CONDOMS + LUBE	1	MDS1 (365 / Fill)
TRUSTEX LUB/RIBBED/STUDDED	1	MDS1 (365 / Fill)
TRUSTEX LUB/SPERMICIDE EX ST	1	MDS1 (365 / Fill)
TRUSTEX LUB/SPERMICIDE XL	1	MDS1 (365 / Fill)
TRUSTEX LUBRICATED	1	MDS1 (365 / Fill)
TRUSTEX LUBRICATED EX LARGE	1	MDS1 (365 / Fill)
TRUSTEX LUBRICATED EXTRA ST	1	MDS1 (365 / Fill)
TRUSTEX LUBRICATED/SPERMICIDE	1	MDS1 (365 / Fill)
TRUSTEX NATURAL CONDOMS + LUBE	1	MDS1 (365 / Fill)
TRUSTEX NON-LUBRICATED	1	MDS1 (365 / Fill)

RxCore CO Option

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
TRUSTEX RIA LUB/SPERMICIDE	1	MDS1 (365 / Fill)
TRUSTEX RIA LUBRICATED	1	MDS1 (365 / Fill)
TRUSTEX RIA NON-LUBRICATED	1	MDS1 (365 / Fill)
TRUSTEX-NONOXYNOL-9/RIB/STUD	1	MDS1 (365 / Fill)
<b>DIAPHRAGMS</b>		
CAYA	1	MDS1 (365 / Fill)
OMNIFLEX DIAPHRAGM	1	MDS1 (365 / Fill)
WIDE-SEAL DIAPHRAGM 60	1	MDS1 (365 / Fill)
WIDE-SEAL DIAPHRAGM 65	1	MDS1 (365 / Fill)
WIDE-SEAL DIAPHRAGM 70	1	MDS1 (365 / Fill)
WIDE-SEAL DIAPHRAGM 75	1	MDS1 (365 / Fill)
WIDE-SEAL DIAPHRAGM 80	1	MDS1 (365 / Fill)
WIDE-SEAL DIAPHRAGM 85	1	MDS1 (365 / Fill)
WIDE-SEAL DIAPHRAGM 90	1	MDS1 (365 / Fill)
WIDE-SEAL DIAPHRAGM 95	1	MDS1 (365 / Fill)
<b>GLUCOSE MONITOR &amp; KETONE MONITOR COMBINATIONS</b>		
PRECISION XTRA-GLUCOSE/KETONE	1	MFL (1 / Fill), MDS1 (365 / Fill)
<b>GLUCOSE MONITORING TEST SUPPLIES</b>		
1ST TIER UNILET COMFORTOUCH	2	MDS1 (90 / Fill)
ACCU-CHEK FASTCLIX LANCETS	2	MDS1 (90 / Fill)
ACCU-CHEK SAFE-T PRO LANCETS	2	MDS1 (90 / Fill)
ACCU-CHEK SOFTCLIX LANCETS	2	MDS1 (90 / Fill)
ACTI-LANCE 28G	2	MDS1 (90 / Fill)
ACTI-LANCE LITE LANCETS 28G	2	MDS1 (90 / Fill)
ACTI-LANCE SPECIAL LANCETS 17G	2	MDS1 (90 / Fill)
ACTI-LANCE UNIVERSAL 23G	2	MDS1 (90 / Fill)
ADVANCED MOBILE LANCET	2	MDS1 (90 / Fill)
ADVANTAGE SAFETY LANCETS 28G	2	MDS1 (90 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
ADVOCATE LANCETS	2	MDS1 (90 / Fill)
ADVOCATE LANCETS 30G	2	MDS1 (90 / Fill)
ADVOCATE SAFETY LANCETS	2	MDS1 (90 / Fill)
ADVOCATE SAFETY LANCETS 21G	2	MDS1 (90 / Fill)
ADVOCATE SAFETY LANCETS 23G	2	MDS1 (90 / Fill)
ADVOCATE SAFETY LANCETS 26G	2	MDS1 (90 / Fill)
ADVOCATE SAFETY LANCETS 28G	2	MDS1 (90 / Fill)
AGAMATRIX ULTRA-THIN LANCETS	2	MDS1 (90 / Fill)
AIMSCO TWIST LANCETS 32G	2	MDS1 (90 / Fill)
AIMSCO TWIST LANCETS 33G	2	MDS1 (90 / Fill)
AQUALANCE LANCETS 30G	2	MDS1 (90 / Fill)
ASSURE COMFORT LANCETS 28G	2	MDS1 (90 / Fill)
ASSURE HAEMOLANCE PLUS HIGH	2	MDS1 (90 / Fill)
ASSURE HAEMOLANCE PLUS LOW	2	MDS1 (90 / Fill)
ASSURE HAEMOLANCE PLUS MICRO	2	MDS1 (90 / Fill)
ASSURE HAEMOLANCE PLUS NORMAL	2	MDS1 (90 / Fill)
ASSURE HAEMOLANCE PLUS PED	2	MDS1 (90 / Fill)
ASSURE LANCE LANCETS	2	MDS1 (90 / Fill)
ASSURE LANCE LANCETS 21G	2	MDS1 (90 / Fill)
ASSURE LANCE PLUS SAFETY 25G	2	MDS1 (90 / Fill)
ASSURE LANCE PLUS SAFETY 30G	2	MDS1 (90 / Fill)
ASSURE LANCE SAFETY LANCET 28G	2	MDS1 (90 / Fill)
AURORA LANCET SUPER THIN 30G	2	MDS1 (90 / Fill)
AURORA LANCET THIN 23G	2	MDS1 (90 / Fill)
BD MICROTAINER LANCETS	2	MDS1 (90 / Fill)
CAREONE LANCET SUPER THIN 30G	2	MDS1 (90 / Fill)
CAREONE LANCET THIN 23G	2	MDS1 (90 / Fill)
CARESENS LANCETS	2	MDS1 (90 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
CARESENS LANCETS 30G	2	MDS1 (90 / Fill)
CARETOUCH SAFETY LANCETS	2	MDS1 (90 / Fill)
CARETOUCH SAFETY LANCETS 26G	2	MDS1 (90 / Fill)
CARETOUCH TWIST LANCETS 28G	2	MDS1 (90 / Fill)
CARETOUCH TWIST LANCETS 30G	2	MDS1 (90 / Fill)
CARETOUCH TWIST LANCETS 33G	2	MDS1 (90 / Fill)
CARETOUCH TWIST MC LANCETS 30G	2	MDS1 (90 / Fill)
CHOSEN LANCETS 30G	2	MDS1 (90 / Fill)
CHOSEN SAFETY LANCETS 28G	2	MDS1 (90 / Fill)
CLEANLET LANCETS 28G	2	MDS1 (90 / Fill)
CLEVER CHEK LANCETS	2	MDS1 (90 / Fill)
CLEVER CHOICE COMFORT EZ MISC	2	MDS1 (90 / Fill)
CLEVER CHOICE LANCETS 21G	2	MDS1 (90 / Fill)
CLEVER CHOICE LANCETS 23G	2	MDS1 (90 / Fill)
CLEVER CHOICE LANCETS 28G	2	MDS1 (90 / Fill)
COAGUCHEK LANCETS	2	MDS1 (90 / Fill)
COMFORT ASSURED LANCETS 28G	2	MDS1 (90 / Fill)
COMFORT ASSURED LANCETS 33G	2	MDS1 (90 / Fill)
COMFORT LANCETS	2	MDS1 (90 / Fill)
COMFORT TOUCH LANCETS 31G	2	MDS1 (90 / Fill)
COMFORT TOUCH PLUS LANCETS 28G	2	MDS1 (90 / Fill)
COMFORT TOUCH PLUS LANCETS 30G	2	MDS1 (90 / Fill)
COMFORT TOUCH TWIST LANCET 30G	2	MDS1 (90 / Fill)
CVS LANCETS 21G	2	MDS1 (90 / Fill)
CVS LANCETS MICRO THIN 33G	2	MDS1 (90 / Fill)
CVS LANCETS ORIGINAL	2	MDS1 (90 / Fill)
CVS LANCETS THIN 26G	2	MDS1 (90 / Fill)
CVS LANCETS ULTRA THIN 30G	2	MDS1 (90 / Fill)

RxCore CO Option

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
CVS LANCETS ULTRA-THIN 30G	2	MDS1 (90 / Fill)
CVS ULTRA THIN LANCETS	2	MDS1 (90 / Fill)
DEXCOM G6 RECEIVER	1	ST, QL, AGE, MFL (1 / fill(s)), MDS1 (365 / fill(s))
DEXCOM G6 SENSOR	1	ST, AGE, MDD (0.13 Per Day), MDS1 (90 / Fill)
DEXCOM G6 TRANSMITTER	1	ST, AGE, MDS1 (90 / Fill)
DEXCOM G7 15 DAY SENSOR	3	ST, AGE, MDD (0.13 Per Day), MDS1 (90 / day(s))
DEXCOM G7 RECEIVER	1	ST, QL, AGE, MFL (1 / fill(s)), MDS1 (365 / fill(s))
DEXCOM G7 SENSOR	1	ST, AGE, MDS1 (90 / Fill)
DIATHRIVE LANCET ULTRA THIN 30	2	MDS1 (90 / Fill)
DIATHRIVE LANCETS	2	MDS1 (90 / Fill)
DROPLET LANCETS ULTRA THIN 30G	2	MDS1 (90 / Fill)
DROPLET PERSONAL LANCETS 30G	2	MDS1 (90 / Fill)
DROPSAFE ACTI-LANCE 23G	2	MDS1 (90 / Fill)
DROPSAFE MEDLANCE LANCET 30G	2	MDS1 (90 / Fill)
DRUG MART LANCETS THIN 26G	2	MDS1 (90 / Fill)
DRUG MART ON-THE-GO LANCET 30G	2	MDS1 (90 / Fill)
DRUG MART UNILET LANCETS 28G	2	MDS1 (90 / Fill)
DRUG MART UNILET LANCETS 30G	2	MDS1 (90 / Fill)
DRUG MART UNILET LANCETS 33G	2	MDS1 (90 / Fill)
E-Z JECT LANCET MICRO-THIN 33G	2	MDS1 (90 / Fill)
E-Z JECT LANCET SUPER THIN 30G	2	MDS1 (90 / Fill)
E-Z JECT LANCETS	2	MDS1 (90 / Fill)
E-Z JECT LANCETS 21G	2	MDS1 (90 / Fill)
E-Z JECT LANCETS THIN 26G	2	MDS1 (90 / Fill)
EASY COMFORT LANCETS	2	MDS1 (90 / Fill)
EASY COMFORT LANCETS TWIST TOP	2	MDS1 (90 / Fill)

RxCore CO Option

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
EASY TOUCH LANCETS 21G	2	MDS1 (90 / Fill)
EASY TOUCH LANCETS 23G	2	MDS1 (90 / Fill)
EASY TOUCH LANCETS 26G	2	MDS1 (90 / Fill)
EASY TOUCH LANCETS 28G	2	MDS1 (90 / Fill)
EASY TOUCH LANCETS 28G/TWIST	2	MDS1 (90 / Fill)
EASY TOUCH LANCETS 30G	2	MDS1 (90 / Fill)
EASY TOUCH LANCETS 30G/TWIST	2	MDS1 (90 / Fill)
EASY TOUCH LANCETS 32G	2	MDS1 (90 / Fill)
EASY TOUCH LANCETS 32G/TWIST	2	MDS1 (90 / Fill)
EASY TOUCH LANCETS 33G/TWIST	2	MDS1 (90 / Fill)
EASY TOUCH SAFETY LANCETS 21G	2	MDS1 (90 / Fill)
EASY TOUCH SAFETY LANCETS 23G	2	MDS1 (90 / Fill)
EASY TOUCH SAFETY LANCETS 26G	2	MDS1 (90 / Fill)
EASY TOUCH SAFETY LANCETS 28G	2	MDS1 (90 / Fill)
EMBRACE LANCETS ULTRA THIN 30G	2	MDS1 (90 / Fill)
EMBRACE PRESSURE ACTIVATED 21G	2	MDS1 (90 / Fill)
EMBRACE PRESSURE ACTIVATED 28G	2	MDS1 (90 / Fill)
ENLITE GLUCOSE SENSOR	4	PA, MDD (0.021 Per Day), MDS1 (90 / Fill)
EQL COLOR LANCETS 21G	2	MDS1 (90 / Fill)
EQL COLOR LANCETS MICRO 33G	2	MDS1 (90 / Fill)
EQL SUPER THIN LANCETS 30G	2	MDS1 (90 / Fill)
EQL THIN LANCETS 26G	2	MDS1 (90 / Fill)
EZ-LETS LANCETS 21G	2	MDS1 (90 / Fill)
EZ-LETS LANCETS 26G	2	MDS1 (90 / Fill)
EZ-LETS LANCETS 28G	2	MDS1 (90 / Fill)
EZ-LETS LANCETS 30G	2	MDS1 (90 / Fill)
FIFTY50 SAFETY SEAL LANCETS	2	MDS1 (90 / Fill)
FIFTY50 UNILET LANCETS 33G	2	MDS1 (90 / Fill)

RxCore CO Option

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
FINE 30	2	MDS1 (90 / Fill)
FINGERSTIX LANCETS	2	MDS1 (90 / Fill)
FONDCIRCLE SINGLE USE LANCETS	2	MDS1 (90 / Fill)
FORA LANCETS	2	MDS1 (90 / Fill)
FREDS PHARMACY UNILET LANC 28G	2	MDS1 (90 / Fill)
FREDS PHARMACY UNILET LANC 30G	2	MDS1 (90 / Fill)
FREESTYLE FREEDOM LITE	1	MFL (1 / Fill), MDS1 (365 / Fill)
FREESTYLE LANCETS	2	MDS1 (90 / Fill)
FREESTYLE LIBRE 14 DAY READER	1	ST, QL, AGE, MFL (1 / fill(s)), MDS1 (365 / fill(s))
FREESTYLE LIBRE 14 DAY SENSOR	1	ST, AGE, MDD (0.08 Per Day), MDS1 (90 / Fill)
FREESTYLE LIBRE 2 PLUS SENSOR	1	ST, AGE, MDD (0.08 Per Day), MDS1 (90 / Fill)
FREESTYLE LIBRE 2 READER	1	ST, QL, AGE, MFL (1 / fill(s)), MDS1 (365 / fill(s))
FREESTYLE LIBRE 2 SENSOR	1	ST, AGE, MDD (0.08 Per Day), MDS1 (90 / Fill)
FREESTYLE LIBRE 3 PLUS SENSOR	1	ST, MDD (0.08 Per Day), MDS1 (90 / Fill)
FREESTYLE LIBRE 3 READER	1	ST, QL, AGE, MFL (1 / fill(s)), MDS1 (365 / fill(s))
FREESTYLE LIBRE 3 SENSOR	1	ST, AGE, MDD (0.08 Per Day), MDS1 (90 / Fill)
FREESTYLE LIBRE READER	1	ST, QL, AGE, MFL (1 / fill(s)), MDS1 (365 / fill(s))
FREESTYLE LITE W/DEVICE KIT	1	MFL (1 / Fill), MDS1 (365 / Fill)
FREESTYLE PRECISION NEO SYSTEM	1	MFL (1 / Fill), MDS1 (365 / Fill)
FREESTYLE UNISTICK II LANCETS	2	MDS1 (90 / Fill)
GENTEEL BUTTERFLY TOUCH LANCET	2	MDS1 (90 / Fill)
GENTLE-LET GP LANCETS	2	MDS1 (90 / Fill)
GENTLE-LET LANCETS	2	MDS1 (90 / Fill)

RxCore CO Option

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
GLOBAL INJECT EASE LANCETS 28G	2	MDS1 (90 / Fill)
GLOBAL INJECT EASE LANCETS 30G	2	MDS1 (90 / Fill)
GLUCOCOM LANCETS 28G	2	MDS1 (90 / Fill)
GLUCOCOM LANCETS 30G	2	MDS1 (90 / Fill)
GLUCOCOM LANCETS 33G	2	MDS1 (90 / Fill)
GNP LANCETS 21G	2	MDS1 (90 / Fill)
GNP LANCETS THIN 26G	2	MDS1 (90 / Fill)
GNP STERILE LANCETS 28G	2	MDS1 (90 / Fill)
GNP STERILE LANCETS 30G	2	MDS1 (90 / Fill)
GNP STERILE LANCETS 33G	2	MDS1 (90 / Fill)
GOJJI STERILE LANCETS	2	MDS1 (90 / Fill)
GOODSENSE COLOR LANCETS 33G	2	MDS1 (90 / Fill)
GOODSENSE LANCETS 26G UNIV	2	MDS1 (90 / Fill)
GOODSENSE LANCETS 30G	2	MDS1 (90 / Fill)
GOODSENSE LANCETS 30G UNIV	2	MDS1 (90 / Fill)
GOODSENSE LANCETS 33G	2	MDS1 (90 / Fill)
GOODSENSE LANCETS 33G UNIV	2	MDS1 (90 / Fill)
GUARDIAN 4 GLUCOSE SENSOR	4	PA, AGE, MDD (0.021 Per Day), MDS1 (90 / Fill)
GUARDIAN 4 TRANSMITTER	4	PA, AGE, MDS1 (90 / Fill)
GUARDIAN CONNECT TRANSMITTER	4	PA, AGE, MDS1 (90 / Fill)
GUARDIAN LINK 3 TRANSMITTER	4	PA, AGE, MDS1 (90 / Fill)
GUARDIAN REAL-TIME REPLACE PED	4	PA, QL, AGE, MFL (1 / fill(s)), MDS1 (365 / fill(s))
GUARDIAN SENSOR (3)	4	PA, AGE, MDD (0.021 Per Day), MDS1 (90 / Fill)
GUARDIAN SENSOR 3	4	PA, AGE, MDD (0.021 Per Day), MDS1 (90 / Fill)
H-E-B INCONTROL LANCETS 28G	2	MDS1 (90 / Fill)
H-E-B INCONTROL LANCETS 30G	2	MDS1 (90 / Fill)

RxCore CO Option

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
H-E-B INCONTROL LANCETS 33G	2	MDS1 (90 / Fill)
HAEMOLANCE	2	MDS1 (90 / Fill)
HAEMOLANCE LOW FLOW LANCETS	2	MDS1 (90 / Fill)
HAEMOLANCE PLUS	2	MDS1 (90 / Fill)
HAEMOLANCE PLUS HIGH FLOW	2	MDS1 (90 / Fill)
HAEMOLANCE PLUS LOW FLOW	2	MDS1 (90 / Fill)
HAEMOLANCE PLUS MAX FLOW	2	MDS1 (90 / Fill)
HAEMOLANCE PLUS PEDIATRIC FLOW	2	MDS1 (90 / Fill)
HEALTHY ACCENTS UNILET LANCETS	2	MDS1 (90 / Fill)
HY-VEE LANCETS	2	MDS1 (90 / Fill)
HY-VEE THIN LANCETS	2	MDS1 (90 / Fill)
IN TOUCH STERILE LANCETS 30G	2	MDS1 (90 / Fill)
KINNEY LANCETS	2	MDS1 (90 / Fill)
KINNEY THIN LANCETS	2	MDS1 (90 / Fill)
KROGER HEALTHPRO LANCET 26G	2	MDS1 (90 / Fill)
KROGER LANCETS	2	MDS1 (90 / Fill)
KROGER LANCETS 21G	2	MDS1 (90 / Fill)
KROGER LANCETS MICRO THIN 33G	2	MDS1 (90 / Fill)
KROGER LANCETS SUPER THIN	2	MDS1 (90 / Fill)
KROGER LANCETS THIN	2	MDS1 (90 / Fill)
KROGER LANCETS THIN 26G	2	MDS1 (90 / Fill)
KROGER LANCETS ULTRATHIN 30G	2	MDS1 (90 / Fill)
LANCETS	2	MDS1 (90 / Fill)
LANCETS 28G THIN	2	MDS1 (90 / Fill)
LANCETS 30G	2	MDS1 (90 / Fill)
LANCETS 33G	2	MDS1 (90 / Fill)
LANCETS MICRO THIN 33G	2	MDS1 (90 / Fill)
LANCETS SUPER THIN	2	MDS1 (90 / Fill)

RxCore CO Option

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
LANCETS SUPER THIN 28G	2	MDS1 (90 / Fill)
LANCETS THIN	2	MDS1 (90 / Fill)
LANCETS ULTRA THIN	2	MDS1 (90 / Fill)
LANCETS ULTRA THIN 30G	2	MDS1 (90 / Fill)
LIBERTY MEDICAL LANCETS	2	MDS1 (90 / Fill)
LITE TOUCH LANCETS	2	MDS1 (90 / Fill)
LITETOUCH LANCETS	2	MDS1 (90 / Fill)
LIVE BETTER LANCET SUPER THIN	2	MDS1 (90 / Fill)
LIVE BETTER LANCET ULTRA THIN	2	MDS1 (90 / Fill)
LONGS LANCETS STANDARD	2	MDS1 (90 / Fill)
LONGS LANCETS THIN	2	MDS1 (90 / Fill)
LONGS LANCETS ULTRA THIN	2	MDS1 (90 / Fill)
MEDICHOICE SAFETY LANCET	2	MDS1 (90 / Fill)
MEDICHOICE SAFETY LANCET EXTRA	2	MDS1 (90 / Fill)
MEDICHOICE SAFETY LANCET NORM	2	MDS1 (90 / Fill)
MEDLANCE EXTRA 21G	2	MDS1 (90 / Fill)
MEDLANCE LITE 25G	2	MDS1 (90 / Fill)
MEDLANCE PLUS EXTRA 21G	2	MDS1 (90 / Fill)
MEDLANCE PLUS LANCETS	2	MDS1 (90 / Fill)
MEDLANCE PLUS LITE 25G	2	MDS1 (90 / Fill)
MEDLANCE PLUS SPECIAL 0.8MM	2	MDS1 (90 / Fill)
MEDLANCE PLUS SUPERLITE 30G	2	MDS1 (90 / Fill)
MEDLANCE PLUS UNIVERSAL 21G	2	MDS1 (90 / Fill)
MEDLANCE UNIVERSAL 21G	2	MDS1 (90 / Fill)
MEIJER LANCETS	2	MDS1 (90 / Fill)
MEIJER LANCETS THIN	2	MDS1 (90 / Fill)
MEIJER LANCETS UNIVERSAL 21G	2	MDS1 (90 / Fill)
MEIJER LANCETS UNIVERSAL 30G	2	MDS1 (90 / Fill)

RxCore CO Option

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
MEIJER LANCETS UNIVERSAL 33G	2	MDS1 (90 / Fill)
MEIJER SUPER THIN LANCETS	2	MDS1 (90 / Fill)
MICROLET LANCETS	2	MDS1 (90 / Fill)
MICROLET NEXT LANCETS	2	MDS1 (90 / Fill)
MINILINK REAL-TIME TRANSMITTER	4	PA, AGE, MDS1 (90 / Fill)
MINIMED 630G GUARDIAN PRESS	4	PA, AGE, MDS1 (90 / Fill)
MINIMED INSTINCT GLUC SENSOR	4	PA
MM TWIST LANCETS	2	MDS1 (90 / Fill)
MOBILE LANCETS 30G	2	MDS1 (90 / Fill)
MONOLET LANCETS	2	MDS1 (90 / Fill)
MONOLET OPD LANCETS	2	MDS1 (90 / Fill)
MONOLETTOR SAFETY LANCETS	2	MDS1 (90 / Fill)
MPD SAFETY LANCET 21G	2	MDS1 (90 / Fill)
MPD SAFETY LANCET 23G	2	MDS1 (90 / Fill)
MPD SAFETY LANCET 28G	2	MDS1 (90 / Fill)
MPD SAFETY LANCET 30G	2	MDS1 (90 / Fill)
MYGLUCOHEALTH LANCETS 30G	2	MDS1 (90 / Fill)
NOVA SAFETY LANCETS 23G	2	MDS1 (90 / Fill)
NOVA SAFETY LANCETS 28G	2	MDS1 (90 / Fill)
NOVA SUREFLEX LANCETS	2	MDS1 (90 / Fill)
ONETOUCH DELICA PLUS LANCET30G	2	MDS1 (90 / Fill)
ONETOUCH DELICA PLUS LANCET33G	2	MDS1 (90 / Fill)
ONETOUCH DELICA SAFETY LANCING	2	MDS1 (90 / Fill)
ONETOUCH ULTRASOFT 2 LANCETS	2	MDS1 (90 / Fill)
ONETOUCH ULTRASOFT LANCETS	2	MDS1 (90 / Fill)
PARADIGM REAL-TIME TRANSMITTER	4	PA, AGE, MDS1 (90 / Fill)
PC LANCETS SUPER THIN 30G	2	MDS1 (90 / Fill)
PERFECT LANCETS 28G	2	MDS1 (90 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
PERFECT LANCETS 30G	2	MDS1 (90 / Fill)
PERFECT POINT SAFETY LANCETS	2	MDS1 (90 / Fill)
PHARMACIST CHOICE LANCETS	2	MDS1 (90 / Fill)
PHARMACY COUNTER LANCETS	2	MDS1 (90 / Fill)
PIP LANCETS 28G	2	MDS1 (90 / Fill)
PIP LANCETS 30G	2	MDS1 (90 / Fill)
PRECISION THINS GP LANCETS	2	MDS1 (90 / Fill)
PREFERRED PLUS LANCETS COLORED	2	MDS1 (90 / Fill)
PREFERRED PLUS LANCETS THIN	2	MDS1 (90 / Fill)
PRO COMFORT LANCETS 30G	2	MDS1 (90 / Fill)
PRO COMFORT LANCETS 31G	2	MDS1 (90 / Fill)
PRO COMFORT SAFETY LANCETS 30G	2	MDS1 (90 / Fill)
PRODIGY LANCETS 28G	2	MDS1 (90 / Fill)
PRODIGY SAFETY LANCETS 26G	2	MDS1 (90 / Fill)
PRODIGY TWIST TOP LANCETS 28G	2	MDS1 (90 / Fill)
PSS SELECT GP LANCETS	2	MDS1 (90 / Fill)
PSS SELECT SAFETY LANCETS	2	MDS1 (90 / Fill)
PURE COMFORT LANCETS 30G	2	MDS1 (90 / Fill)
PURE COMFORT SAFETY LANCET 30G	2	MDS1 (90 / Fill)
PX LANCETS MICROTHIN 33G	2	MDS1 (90 / Fill)
PX LANCETS ULTRA THIN	2	MDS1 (90 / Fill)
PX LANCETS ULTRA THIN 28G	2	MDS1 (90 / Fill)
QC LANCETS SUPER THIN 30G	2	MDS1 (90 / Fill)
QC LANCETS ULTRA THIN	2	MDS1 (90 / Fill)
QC UNILET LANCETS 28G	2	MDS1 (90 / Fill)
QC UNILET LANCETS MICRO THIN	2	MDS1 (90 / Fill)
RA E-ZJECT LANCETS 28G	2	MDS1 (90 / Fill)
RA E-ZJECT LANCETS THIN 26G	2	MDS1 (90 / Fill)

RxCore CO Option

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
RA E-ZJECT LANCETS THIN 28G	2	MDS1 (90 / Fill)
RA E-ZJECT LANCETS ULTRA THIN	2	MDS1 (90 / Fill)
READYLANCE SAFETY LANCETS	2	MDS1 (90 / Fill)
REALITY LANCETS	2	MDS1 (90 / Fill)
REALITY TRIGGER LANCETS	2	MDS1 (90 / Fill)
RELION LANCET DEVICES 30G	2	MDS1 (90 / Fill)
RELION LANCETS	2	MDS1 (90 / Fill)
RELION LANCETS MICRO-THIN 33G	2	MDS1 (90 / Fill)
RELION LANCETS THIN 26G	2	MDS1 (90 / Fill)
RELION LANCETS ULTRA-THIN 30G	2	MDS1 (90 / Fill)
RELION ULTRA THIN LANCETS 30G	2	MDS1 (90 / Fill)
RELION ULTRA THIN PLUS LANCETS	2	MDS1 (90 / Fill)
REXALL LANCETS ULTRA THIN 30G	2	MDS1 (90 / Fill)
RIGHTTEST GL300 LANCETS	2	MDS1 (90 / Fill)
SAFE-T-LANCE	2	MDS1 (90 / Fill)
SAFE-T-LANCE PLUS	2	MDS1 (90 / Fill)
SAFETY LANCET 30G/PRESSURE ACT	2	MDS1 (90 / Fill)
SAFETY LANCETS	2	MDS1 (90 / Fill)
SAFETY LANCETS 21G	2	MDS1 (90 / Fill)
SAFETY LANCETS 23G	2	MDS1 (90 / Fill)
SAFETY LANCETS 28G	2	MDS1 (90 / Fill)
SAPS HEALTH PLUS LANCETS	2	MDS1 (90 / Fill)
SAPS HEALTH TWIST TOP LANCETS	2	MDS1 (90 / Fill)
SAPS TWIST TOP LANCETS	2	MDS1 (90 / Fill)
SAPSCARE TWIST TOP LANCETS	2	MDS1 (90 / Fill)
SB LANCETS THIN	2	MDS1 (90 / Fill)
SB LANCETS ULTRA THIN	2	MDS1 (90 / Fill)
SENSILANCE SAFETY LANCETS 21G	2	MDS1 (90 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
SENSILANCE SAFETY LANCETS 26G	2	MDS1 (90 / Fill)
SENSILANCE SAFETY LANCETS 28G	2	MDS1 (90 / Fill)
SHOPKO ON-THE-GO LANCETS 30G	2	MDS1 (90 / Fill)
SHOPKO UNILET LANCETS 28G	2	MDS1 (90 / Fill)
SHOPKO UNILET LANCETS 30G	2	MDS1 (90 / Fill)
SINGLE-LET	2	MDS1 (90 / Fill)
SM LANCETS 33G	2	MDS1 (90 / Fill)
SMART SENSE COLOR LANCETS 33G	2	MDS1 (90 / Fill)
SMART SENSE STANDARD LANCETS	2	MDS1 (90 / Fill)
SMART SENSE SUPER THIN LANCETS	2	MDS1 (90 / Fill)
SMART SENSE THIN LANCETS 26G	2	MDS1 (90 / Fill)
SMARTEST LANCETS 28G	2	MDS1 (90 / Fill)
SOLUS V2 LANCETS 28G	2	MDS1 (90 / Fill)
SOLUS V2 TWIST LANCETS 30G	2	MDS1 (90 / Fill)
STERILANCE TL	2	MDS1 (90 / Fill)
SUPER THIN LANCETS	2	MDS1 (90 / Fill)
SURE COMFORT LANCETS 18G	2	MDS1 (90 / Fill)
SURE COMFORT LANCETS 21G	2	MDS1 (90 / Fill)
SURE COMFORT LANCETS 23G	2	MDS1 (90 / Fill)
SURE COMFORT LANCETS 28G	2	MDS1 (90 / Fill)
SURE COMFORT LANCETS 30G	2	MDS1 (90 / Fill)
SURELITE LANCETS	2	MDS1 (90 / Fill)
TECHLITE AST LANCETS	2	MDS1 (90 / Fill)
TECHLITE LANCETS	2	MDS1 (90 / Fill)
TECHLITE LANCETS 26G	2	MDS1 (90 / Fill)
TECHLITE LANCETS 30G	2	MDS1 (90 / Fill)
TGT LANCET MICRO THIN 33G	2	MDS1 (90 / Fill)
TGT LANCET THIN 26G	2	MDS1 (90 / Fill)

RxCore CO Option

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
TGT LANCET ULTRA THIN 30G	2	MDS1 (90 / Fill)
THINLETS GP LANCETS	2	MDS1 (90 / Fill)
TODAYS HEALTH THIN LANCETS 28G	2	MDS1 (90 / Fill)
TODAYS HEALTH THIN LANCETS 30G	2	MDS1 (90 / Fill)
TOPCARE LANCETS MICRO-THIN 33G	2	MDS1 (90 / Fill)
TRAVEL LANCETS	2	MDS1 (90 / Fill)
TRAVEL LANCETS ADVANCED 28G	2	MDS1 (90 / Fill)
TRUE COMFORT SAFETY LANCETS	2	MDS1 (90 / Fill)
TRUE COMFORT TWIST TOP LANCETS	2	MDS1 (90 / Fill)
TRUEPLUS LANCETS 26G	2	MDS1 (90 / Fill)
TRUEPLUS LANCETS 28G	2	MDS1 (90 / Fill)
TRUEPLUS LANCETS 30G	2	MDS1 (90 / Fill)
TRUEPLUS LANCETS 33G	2	MDS1 (90 / Fill)
TRUEPLUS SAFETY LANCETS 28G	2	MDS1 (90 / Fill)
TWIST TOP LANCETS 30G	2	MDS1 (90 / Fill)
ULTILET CLASSIC LANCETS	2	MDS1 (90 / Fill)
ULTILET LANCETS	2	MDS1 (90 / Fill)
ULTILET SAFETY LANCETS	2	MDS1 (90 / Fill)
ULTILET SAFETY LANCETS 23G	2	MDS1 (90 / Fill)
ULTRA THIN LANCETS 31G	2	MDS1 (90 / Fill)
ULTRA-CARE LANCETS 30G	2	MDS1 (90 / Fill)
ULTRA-THIN II AUTO LANCET	2	MDS1 (90 / Fill)
ULTRA-THIN II LANCETS	2	MDS1 (90 / Fill)
UNILET COMFORTOUCH LANCET	2	MDS1 (90 / Fill)
UNILET EXCELITE	2	MDS1 (90 / Fill)
UNILET EXCELITE II	2	MDS1 (90 / Fill)
UNILET G.P. LANCET	2	MDS1 (90 / Fill)
UNILET G.P. SUPERLITE LANCET	2	MDS1 (90 / Fill)

RxCore CO Option

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
UNILET GP 28 ULTRA THIN	2	MDS1 (90 / Fill)
UNILET LANCET	2	MDS1 (90 / Fill)
UNILET MICRO-THIN 33G	2	MDS1 (90 / Fill)
UNILET SUPER-THIN 30G	2	MDS1 (90 / Fill)
UNILET SUPERLITE LANCET	2	MDS1 (90 / Fill)
UNILET ULTRA-THIN 28G	2	MDS1 (90 / Fill)
UNISTIK 1	2	MDS1 (90 / Fill)
UNISTIK 2	2	MDS1 (90 / Fill)
UNISTIK 2 COMFORT	2	MDS1 (90 / Fill)
UNISTIK 2 EXTRA	2	MDS1 (90 / Fill)
UNISTIK 2 NEONATAL	2	MDS1 (90 / Fill)
UNISTIK 2 NORMAL	2	MDS1 (90 / Fill)
UNISTIK 2 SUPER	2	MDS1 (90 / Fill)
UNISTIK 3	2	MDS1 (90 / Fill)
UNISTIK 3 COMFORT	2	MDS1 (90 / Fill)
UNISTIK 3 EXTRA	2	MDS1 (90 / Fill)
UNISTIK 3 GENTLE	2	MDS1 (90 / Fill)
UNISTIK 3 NEONATAL	2	MDS1 (90 / Fill)
UNISTIK 3 NORMAL	2	MDS1 (90 / Fill)
UNISTIK CZT COMFORT	2	MDS1 (90 / Fill)
UNISTIK CZT NORMAL	2	MDS1 (90 / Fill)
UNISTIK NORMAL	2	MDS1 (90 / Fill)
UNISTIK PRO SAFETY LANCET	2	MDS1 (90 / Fill)
UNISTIK SAFETY LANCETS 28G	2	MDS1 (90 / Fill)
UNISTIK SAFETY LANCETS 30G	2	MDS1 (90 / Fill)
UNISTIK TOUCH SAFETY LANC 21G	2	MDS1 (90 / Fill)
UNISTIK TOUCH SAFETY LANC 23G	2	MDS1 (90 / Fill)
UNISTIK TOUCH SAFETY LANC 28G	2	MDS1 (90 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
UNISTIK TOUCH SAFETY LANC 30G	2	MDS1 (90 / Fill)
UNIVERSAL 1 LANCETS THIN 26G	2	MDS1 (90 / Fill)
UNIVERSAL 1 LANCETS THIN 33G	2	MDS1 (90 / Fill)
UNIVERSAL 1 LANCETS ULTRA THIN	2	MDS1 (90 / Fill)
VALUE PLUS LANCET STANDARD 21G	2	MDS1 (90 / Fill)
VALUE PLUS LANCETS SUPER THIN	2	MDS1 (90 / Fill)
VALUE PLUS LANCETS THIN 26G	2	MDS1 (90 / Fill)
VALUMARK LANCET SUPER THIN 30G	2	MDS1 (90 / Fill)
VALUMARK LANCET ULTRA THIN 28G	2	MDS1 (90 / Fill)
VERIFINE SAFE LANCET MINI 21G	2	MDS1 (90 / Fill)
VERIFINE SAFE LANCET MINI 23G	2	MDS1 (90 / Fill)
VERIFINE SAFE LANCET MINI 28G	2	MDS1 (90 / Fill)
VERIFINE SAFE LANCET MINI 30G	2	MDS1 (90 / Fill)
VERIFINE UNIVERSAL LANCETS 28G	2	MDS1 (90 / Fill)
VERIFINE UNIVERSAL LANCETS 30G	2	MDS1 (90 / Fill)
VERIFINE UNIVERSAL LANCETS 33G	2	MDS1 (90 / Fill)
VIDA MIA UNILET LANCETS 28G	2	MDS1 (90 / Fill)
VIDA MIA UNILET LANCETS 30G	2	MDS1 (90 / Fill)
VIVAGUARD LANCETS	2	MDS1 (90 / Fill)
VIVAGUARD LANCETS 30G	2	MDS1 (90 / Fill)
VIVAGUARD SAFETY LANCETS 28G	2	MDS1 (90 / Fill)
WALGREENS ADV TRAVEL LANCETS	2	MDS1 (90 / Fill)
WALGREENS LANCETS	2	MDS1 (90 / Fill)
WALGREENS LANCETS MICRO THIN	2	MDS1 (90 / Fill)
WALGREENS LANCETS SUPER THIN	2	MDS1 (90 / Fill)
WALGREENS THIN LANCETS	2	MDS1 (90 / Fill)
WALGREENS ULTRA THIN LANCETS	2	MDS1 (90 / Fill)
ZEVRX TWIST TOP LANCETS 30G	2	MDS1 (90 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<b>INSULIN ADMINISTRATION SUPPLIES</b>		
ACCU-CHEK LINKASSIST	4	PA, MFL (1 / fill(s)), MDS1 (90 / Fill)
OMNIPOD 5 DEXG7G6 INTRO GEN 5	3	PA, MFL (1 / Fill)
OMNIPOD 5 DEXG7G6 PODS GEN 5	3	PA, QL, MDD (0.66 Per Day), MDS1 (90 / day(s))
OMNIPOD 5 G7 INTRO (GEN 5)	3	PA, MFL (1 / year(s))
OMNIPOD 5 G7 PODS (GEN 5)	3	PA, QL, MDD (0.66 Per Day), MDS1 (90 / day(s))
OMNIPOD 5 LIBRE2 G6 INTRO GEN5	3	PA, MFL (1 / fill(s))
OMNIPOD 5 LIBRE2 PLUS G6 PODS	3	PA, QL, MDD (0.66 Per Day), MDS1 (90 / day(s))
OMNIPOD CLASSIC PDM (GEN 3)	3	
OMNIPOD CLASSIC PODS (GEN 3)	3	PA, QL, MDD (0.66 Per Day), MDS1 (90 / day(s))
OMNIPOD DASH INTRO (GEN 4)	3	PA, MFL (1 / Fill)
OMNIPOD DASH PDM (GEN 4)	3	
OMNIPOD DASH PODS (GEN 4)	3	PA, QL, MDD (0.66 Per Day), MDS1 (90 / day(s))
<b>NEEDLES &amp; SYRINGES</b>		
1ST TIER UNIFINE PENTIPS	4	MDS1 (90 / Fill)
1ST TIER UNIFINE PENTIPS PLUS	4	MDS1 (90 / Fill)
ABOUTTIME PEN NEEDLE	4	MDS1 (90 / Fill)
ADVOCATE INSULIN PEN NEEDLE	4	MDS1 (90 / Fill)
ADVOCATE INSULIN PEN NEEDLES	4	MDS1 (90 / Fill)
ADVOCATE INSULIN SYRINGE	4	MDS1 (90 / Fill)
AQ INSULIN SYRINGE (29G X 1/2" 1 ML MISC, 30G X 5/16" 0.5 ML MISC)	2	MDS1 (90 / Fill)
AQ INSULIN SYRINGE 31G X 5/16" 1 ML MISC	4	MDS1 (90 / Fill)
AQINJECT PEN NEEDLE	4	MDS1 (90 / Fill)
ASSURE ID DUO PRO PEN NEEDLES	4	MDS1 (90 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
ASSURE ID INSULIN SAFETY SYR	4	MDS1 (90 / Fill)
ASSURE ID PRO PEN NEEDLES	4	MDS1 (90 / Fill)
ASSURE ID SAFETY PEN NEEDLES	4	MDS1 (90 / Fill)
AUM INSULIN SAFETY PEN NEEDLE	4	MDS1 (90 / Fill)
AUM MINI INSULIN PEN NEEDLE	4	MDS1 (90 / Fill)
AUM PEN NEEDLE	4	MDS1 (90 / Fill)
AUM READYGARD DUO PEN NEEDLE	4	MDS1 (90 / Fill)
AUM SAFETY PEN NEEDLE	4	MDS1 (90 / Fill)
AURORA PEN NEEDLES	4	MDS1 (90 / Fill)
AURORA UNIFINE PENTIPS	4	MDS1 (90 / Fill)
AUTOPEN	2	
BARDIA BULB IRRIGATION SYRINGE	4	
BARDIA PISTON IRRIGATION SYR	4	
BD ALLERGY SYRINGE	4	
BD AUTOSHIELD DUO	4	MDS1 (90 / Fill)
BD BLUNT FILL NEEDLE	4	
BD BLUNT FILL NEEDLE W/FILTER	4	
BD CONTROL SYRING LUER-LOK	4	
BD DISP NEEDLE	4	
BD DISP NEEDLES	4	
BD ECLIPSE LUER-LOK NEEDLE	4	
BD ECLIPSE NEEDLE	4	
BD ECLIPSE SHIELDED NEEDLE	4	
BD ECLIPSE SYRINGE	4	
BD ECLIPSE SYRINGE/NEEDLE	4	
BD FILTER NEEDLE	4	
BD HYPODERMIC NEEDLE	4	
BD INSULIN SYR ULTRAFINE II	4	MDS1 (90 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
BD INSULIN SYRINGE	4	MDS1 (90 / Fill)
BD INSULIN SYRINGE HALF-UNIT	4	MDS1 (90 / Fill)
BD INSULIN SYRINGE MICROFINE	4	MDS1 (90 / Fill)
BD INSULIN SYRINGE U-500	4	MDS1 (90 / Fill)
BD INSULIN SYRINGE U/F	4	MDS1 (90 / Fill)
BD INSULIN SYRINGE U/F 1/2UNIT	4	MDS1 (90 / Fill)
BD INSULIN SYRINGE ULTRAFINE	4	MDS1 (90 / Fill)
BD INTEGRA NEEDLE	4	
BD INTEGRA SYRINGE	4	
BD LUER-LOCK SYRINGE	4	
BD LUER-LOK SYRINGE	4	
BD NOKOR ADMIX NEEDLE	4	
BD PEN	4	
BD PEN MINI	4	
BD PEN NEEDLE MICRO ULTRAFINE	4	MDS1 (90 / Fill)
BD PEN NEEDLE MINI ULTRAFINE	4	MDS1 (90 / Fill)
BD PEN NEEDLE NANO 2ND GEN	4	MDS1 (90 / Fill)
BD PEN NEEDLE NANO ULTRAFINE	4	MDS1 (90 / Fill)
BD PEN NEEDLE ORIG ULTRAFINE	4	MDS1 (90 / Fill)
BD PEN NEEDLE SHORT ULTRAFINE	4	MDS1 (90 / Fill)
BD PLASTIPAK SYRINGE	4	
BD PRECISIONGLIDE NEEDLE	4	
BD SAFETYGLIDE ALLERGY SYRINGE	4	
BD SAFETYGLIDE INSULIN SYRINGE	4	MDS1 (90 / Fill)
BD SAFETYGLIDE NEEDLE	4	
BD SAFETYGLIDE SHIELDED NEEDLE	4	
BD SAFETYGLIDE SYRINGE/NEEDLE	4	
BD SYRINGE	4	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
BD SYRINGE BLUNT CANNULA 17G	4	
BD SYRINGE DISPOSABLE	4	
BD SYRINGE DUAL CANNULA	4	
BD SYRINGE LUER SLIP TIP	4	
BD SYRINGE LUER-LOK	4	
BD SYRINGE SLIP TIP	4	
BD SYRINGE/NEEDLE	4	
BD TB SYRINGE	4	
BD VEO INSULIN SYR U/F 1/2UNIT	4	MDS1 (90 / Fill)
BD VEO INSULIN SYR ULTRAFINE	4	MDS1 (90 / Fill)
CAREFINE PEN NEEDLES	4	MDS1 (90 / Fill)
CAREONE INSULIN SYRINGE	4	MDS1 (90 / Fill)
CAREONE UNIFINE PENTIPS	4	MDS1 (90 / Fill)
CAREONE UNIFINE PENTIPS PLUS	4	MDS1 (90 / Fill)
CAREPOINT POLY HUB NEEDLE	4	
CAREPOINT PRECISION POLY HUB	4	
CAREPOINT SAFETY 1ST NEEDLE	4	
CAREPOINT SAFETY1ST SYR/NEEDLE	4	
CAREPOINT SYRINGE CATHETER TIP	4	
CAREPOINT SYRINGE LUER LOCK	4	
CAREPOINT SYRINGE LUER SLIP	4	
CAREPOINT TUBERCLN SYR/LUER SL	4	
CARETOUCH CATHETER TIP SYRINGE	4	
CARETOUCH HYPODERMIC NEEDLE	4	
CARETOUCH INSULIN SYRINGE	4	MDS1 (90 / Fill)
CARETOUCH LUER LOCK	4	
CARETOUCH LUER LOCK SYR/NEEDLE	4	
CARETOUCH LUER SLIP	4	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
CARETOUCH PEN NEEDLES	4	MDS1 (90 / Fill)
CLEVER CHOICE COMFORT EZ (29G X 12MM MISC, 33G X 4 MM MISC)	4	MDS1 (90 / Fill)
CLICKFINE PEN NEEDLES	4	MDS1 (90 / Fill)
COMFORT ASSIST INSULIN SYRINGE	4	MDS1 (90 / Fill)
COMFORT EZ INSULIN SYRINGE	4	MDS1 (90 / Fill)
COMFORT EZ MICRO PEN NEEDLES	4	MDS1 (90 / Fill)
COMFORT EZ PEN NEEDLES	4	MDS1 (90 / Fill)
COMFORT EZ PRO PEN NEEDLES	4	MDS1 (90 / Fill)
COMFORT EZ SHORT PEN NEEDLES	4	MDS1 (90 / Fill)
COMFORT TOUCH INSULIN PEN NEED	4	MDS1 (90 / Fill)
CRONO SYRINGE	4	
DEFLUX METAL NEEDLE	4	
DIATHRIVE PEN NEEDLE	4	MDS1 (90 / Fill)
DROPLET INSULIN SYRINGE	4	MDS1 (90 / Fill)
DROPLET MICRON	4	MDS1 (90 / Fill)
DROPLET PEN NEEDLES	4	MDS1 (90 / Fill)
DROPSAFE AUTOPROTECT DUO	4	MDS1 (90 / Fill)
DROPSAFE SAFETY PEN NEEDLES	4	MDS1 (90 / Fill)
DROPSAFE SAFETY SYRINGE/NEEDLE (X 5/16" 0.3 ML MISC, X 5/16" 0.5 ML MISC, X 5/16" 1 ML MISC, X 15/64" 0.3 ML MISC, X 15/64" 0.5 ML MISC, X 15/64" 1 ML MISC)	4	MDS1 (90 / Fill)
DROPSAFE SAFETY SYRINGE/NEEDLE 29G X 1/2" 1 ML MISC	2	MDS1 (90 / Fill)
DROPSAFE SICURA	4	
DRUG MART UNIFINE PENTIPS	4	MDS1 (90 / Fill)
DRUG MART UNIFINE PENTIPS PLUS	4	MDS1 (90 / Fill)
EASY COMFORT INSULIN SYRINGE (29G X 5/16" 0.5 ML MISC, 29G X 5/16" 1 ML MISC, 30G X 1/2" 0.5 ML MISC, 30G X 1/2" 1 ML MISC, 30G X 5/16" 0.5 ML MISC, 30G X 5/16" 1 ML MISC, 31G X 1/2" 0.3 ML MISC, 31G X 5/16" 0.3 ML MISC, 31G X 5/16" 0.5 ML MISC, 31G X 5/16" 1 ML MISC, 32G X 5/16" 0.5 ML MISC)	4	MDS1 (90 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
EASY COMFORT INSULIN SYRINGE 32G X 5/16" 1 ML MISC	4	MDS1 (90 / day(s))
EASY COMFORT PEN NEEDLES	4	MDS1 (90 / Fill)
EASY GLIDE CATH TIP SYRINGE	4	
EASY GLIDE LUER LOCK SYRINGE	4	
EASY GLIDE PEN NEEDLES	4	MDS1 (90 / Fill)
EASY GLIDE SLIP LOCK SYRINGE	4	
EASY TOUCH ALLERGY SYRINGE	4	
EASY TOUCH FLIPLOCK INSULIN SY	4	MDS1 (90 / Fill)
EASY TOUCH FLIPLOCK NEEDLES	4	
EASY TOUCH FLIPLOCK SAFETY SYR	4	
EASY TOUCH FLURINGE	4	
EASY TOUCH FLURINGE FLIPLOCK	4	
EASY TOUCH FLURINGE SHEATHLOCK	4	
EASY TOUCH HYPODERMIC NEEDLE	4	
EASY TOUCH INSULIN BARRELS	4	MDS1 (90 / Fill)
EASY TOUCH INSULIN SAFETY SYR	4	MDS1 (90 / Fill)
EASY TOUCH INSULIN SYRINGE	4	MDS1 (90 / Fill)
EASY TOUCH PEN NEEDLES	4	MDS1 (90 / Fill)
EASY TOUCH SAFETY PEN NEEDLES	4	MDS1 (90 / Fill)
EASY TOUCH SAFETY SYRINGE	4	
EASY TOUCH SHEATHLOCK SYRINGE (21G X 1" 3 ML MISC, 21G X 1-1/2" 10 ML MISC, 21G X 1-1/2" 3 ML MISC, 21G X 1-1/2" 5 ML MISC, 22G X 1" 3 ML MISC, 22G X 1-1/2" 10 ML MISC, 22G X 1-1/2" 3 ML MISC, 22G X 1-1/2" 5 ML MISC, 23G X 1" 3 ML MISC, 25G X 1" 10 ML MISC, 25G X 1" 3 ML MISC, 25G X 1" 5 ML MISC, 25G X 5/8" 3 ML MISC)	4	
EASY TOUCH SHEATHLOCK SYRINGE (29G X 1/2" 1 ML MISC, 30G X 1/2" 1 ML MISC, 30G X 5/16" 1 ML MISC, 31G X 5/16" 1 ML MISC)	4	MDS1 (90 / Fill)
EASY TOUCH SYRINGE BARREL	4	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
EASY TOUCH TB FLIPLOCK SYRINGE	4	
EASY TOUCH TB SHEATHLOCK SYR	4	
EASYPOINT NEEDLE	4	
EASYPOINT NEEDLE/SYRINGE	4	
EMBECTA AUTOSHIELD DUO	4	MDS1 (90 / Fill)
EMBECTA INS SYR U/F 1/2 UNIT	4	MDS1 (90 / Fill)
EMBECTA INSULIN SYRINGE	4	MDS1 (90 / Fill)
EMBECTA INSULIN SYRINGE U-100	4	MDS1 (90 / Fill)
EMBECTA INSULIN SYRINGE U-500	4	MDS1 (90 / Fill)
EMBECTA INSULIN SYRINGE U/F	4	MDS1 (90 / Fill)
EMBECTA PEN NEEDLE NANO	4	MDS1 (90 / Fill)
EMBECTA PEN NEEDLE NANO 2 GEN	4	MDS1 (90 / Fill)
EMBECTA PEN NEEDLE U/F	4	MDS1 (90 / Fill)
EMBECTA PEN NEEDLE ULTRAFINE	4	MDS1 (90 / Fill)
EMBRACE PEN NEEDLES	4	MDS1 (90 / Fill)
EQL INSULIN SYRINGE	4	MDS1 (90 / Fill)
EXEL COMFORT POINT INSULIN SYR	4	MDS1 (90 / Fill)
EXEL COMFORT POINT PEN NEEDLE	4	MDS1 (90 / Fill)
FIFTY50 PEN NEEDLES	4	MDS1 (90 / Fill)
FIFTY50 SUPERIOR COMFORT SYR	4	MDS1 (90 / Fill)
FLOW-EZE VENTED NEEDLE	4	
FREDS PHARMACY UNIFINE PENTIP+	4	MDS1 (90 / Fill)
FREDS PHARMACY UNIFINE PENTIPS	4	MDS1 (90 / Fill)
GLOBAL EASE INJECT PEN NEEDLES	4	MDS1 (90 / Fill)
GLOBAL EASY GLIDE INSULIN SYR	4	MDS1 (90 / Fill)
GLOBAL EASY GLIDE PEN NEEDLES	4	MDS1 (90 / Fill)
GLOBAL INJECT EASE INSULIN SYR	4	MDS1 (90 / Fill)
GLOBAL INSULIN SYRINGES	4	MDS1 (90 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
GLUCOPRO INSULIN SYRINGE	4	MDS1 (90 / Fill)
GNP CLICKFINE PEN NEEDLES	4	MDS1 (90 / Fill)
GNP INSULIN SYRINGE	4	MDS1 (90 / Fill)
GNP INSULIN SYRINGES	4	MDS1 (90 / Fill)
GNP INSULIN SYRINGES 28GX1/2"	4	MDS1 (90 / Fill)
GNP INSULIN SYRINGES 29GX1/2"	4	MDS1 (90 / Fill)
GNP INSULIN SYRINGES 30GX5/16"	4	MDS1 (90 / Fill)
GNP INSULIN SYRINGES 31GX5/16"	4	MDS1 (90 / Fill)
GNP PEN NEEDLES	4	MDS1 (90 / Fill)
GNP ULTICARE PEN NEEDLES	4	MDS1 (90 / Fill)
GNP ULTIGUARD SAFEPAK NEEDLE	4	MDS1 (90 / Fill)
GNP ULTRA COM INSULIN SYRINGE	4	MDS1 (90 / Fill)
GOODSENSE CLICKFINE PEN NEEDLE	4	MDS1 (90 / Fill)
GOODSENSE PEN NEEDLE PENFINE	4	MDS1 (90 / Fill)
H-E-B INCONTROL PEN NEEDLES	4	MDS1 (90 / Fill)
H-E-B INCONTROL UNIFINE PENTIP	4	MDS1 (90 / Fill)
HEALTHWISE INSULIN SYR/NEEDLE	4	MDS1 (90 / Fill)
HEALTHWISE MICRON PEN NEEDLES	4	MDS1 (90 / Fill)
HEALTHWISE MINI PEN NEEDLES	4	MDS1 (90 / Fill)
HEALTHWISE PEN NEEDLES	4	MDS1 (90 / Fill)
HEALTHWISE SHORT PEN NEEDLES	4	MDS1 (90 / Fill)
HEALTHWISE UNIFINE PENTIPS	4	MDS1 (90 / Fill)
HEALTHY ACCENTS UNIFINE PENTIP	4	MDS1 (90 / Fill)
HM ULTICARE INSULIN SYRINGE	4	MDS1 (90 / Fill)
HM ULTICARE MINI PEN NEEDLES	4	MDS1 (90 / Fill)
HM ULTICARE SHORT PEN NEEDLES	4	MDS1 (90 / Fill)
HUBER NEEDLE (20G X 1" MISC, 20G X 1-1/2" MISC, 22G X 1" MISC, 22G X 1-1/2" MISC)	2	
HYPODERMIC NEEDLE (18G X 1" MISC, 18G X 1-1/2" MISC, 20G X 1" MISC, 20G X 1-1/2" MISC, 21G X 1" MISC, 21G X 1-1/2" MISC, 22G X 1" MISC, 22G X 1-1/2" MISC, 23G X 1" MISC, 23G X 1-1/2" MISC, 25G X 1-1/2" MISC, 25G X 5/8" MISC, 26G X 1/2" MISC, 27G X 1-1/2" MISC, 27G X	2	

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1/2" MISC)		
<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
INCONTROL ULTICARE PEN NEEDLES	4	MDS1 (90 / Fill)
INPEN 100-BLUE-LILLY-HUMALOG	3	QL
INPEN 100-BLUE-NOVOLOG-FIASP	3	QL
INPEN 100-GREY-LILLY-HUMALOG	3	QL
INPEN 100-GREY-NOVOLOG-FIASP	3	QL
INPEN 100-PINK-LILLY-HUMALOG	3	QL
INPEN 100-PINK-NOVOLOG-FIASP	3	QL
INSULIN SYRINGE	2	MDS1 (90 / Fill)
INSULIN SYRINGE-NEEDLE U-100	2	MDS1 (90 / Fill)
INSULIN SYRINGE/NEEDLE	2	MDS1 (90 / Fill)
INSUPEN PEN NEEDLES	4	MDS1 (90 / Fill)
INSUPEN SENSITIVE	4	MDS1 (90 / Fill)
INSUPEN ULTRAFIN	4	MDS1 (90 / Fill)
INSUPEN32G EXTR3ME	4	MDS1 (90 / Fill)
KINRAY INSULIN SYRINGE	4	MDS1 (90 / Fill)
KMART VALU INSULIN SYRINGE 29G	4	MDS1 (90 / Fill)
KMART VALU INSULIN SYRINGE 30G	4	MDS1 (90 / Fill)
KROGER INSULIN SYRINGE	4	MDS1 (90 / Fill)
KROGER PEN NEEDLES	4	MDS1 (90 / Fill)
LEADER INSULIN SYRINGE	4	MDS1 (90 / Fill)
LEADER UNIFINE PENTIPS	4	MDS1 (90 / Fill)
LEADER UNIFINE PENTIPS PLUS	4	MDS1 (90 / Fill)
LITETOUCH INSULIN SYRINGE	4	MDS1 (90 / Fill)
LITETOUCH PEN NEEDLES	4	MDS1 (90 / Fill)
LONGS INSULIN SYRINGE	4	MDS1 (90 / Fill)
LUER LOCK SAFETY SYRINGES	4	
MAGELLAN INSULIN SAFETY SYR	2	MDS1 (90 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
MAGELLAN SYRINGE-SAFETY NEEDLE	4	
MAGELLAN TUBERCULIN SYRINGE	4	
MARATHON MEDICAL PENTIPS	4	MDS1 (90 / Fill)
MAXI-COMFORT INSULIN SYRINGE	4	MDS1 (90 / Fill)
MAXI-COMFORT SAFETY PEN NEEDLE	4	MDS1 (90 / Fill)
MAXICOMFORT II PEN NEEDLE	4	MDS1 (90 / Fill)
MAXICOMFORT SYR 27G X 1/2"	4	MDS1 (90 / Fill)
MEDIC INSULIN SYRINGE	4	MDS1 (90 / Fill)
MEDICINE SHOPPE PEN NEEDLES	4	MDS1 (90 / Fill)
MEIJER PEN NEEDLES	4	MDS1 (90 / Fill)
MICRODOT PEN NEEDLE	4	MDS1 (90 / Fill)
MM INSULIN SYRINGE/NEEDLE	4	MDS1 (90 / Fill)
MM PEN NEEDLES	4	MDS1 (90 / Fill)
MONOJECT BLUNTIP CANNULA	4	
MONOJECT BLUNTIP SYR/CANNULA	4	
MONOJECT CONTROL SYRINGE	4	
MONOJECT FILTER NEEDLE	4	
MONOJECT HYPODERMIC NEEDLE	4	
MONOJECT INSULIN SYRINGE (25G X 5/8" 1 ML MISC, 27G X 1/2" 1 ML MISC, 28G X 1/2" 0.5 ML MISC, 28G X 1/2" 1 ML MISC, 31G X 5/16" 1 ML MISC, U-100 1 ML MISC)	4	MDS1 (90 / Fill)
MONOJECT INSULIN SYRINGE (29G X 1/2" 0.3 ML MISC, 29G X 1/2" 0.5 ML MISC, 29G X 1/2" 1 ML MISC, 30G X 5/16" 0.3 ML MISC, 30G X 5/16" 0.5 ML MISC, 30G X 5/16" 1 ML MISC)	2	MDS1 (90 / Fill)
MONOJECT INTRODUCER NEEDLE	4	
MONOJECT LIFESHIELD SYRINGE	4	
MONOJECT MAGELLAN SAFETY NDL	4	
MONOJECT MAGELLAN SYRINGE	4	
MONOJECT MEDICATION TRANSF NDL	4	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
MONOJECT PHARMACY TRAY	4	
MONOJECT PISTON SYRINGE	4	
MONOJECT SOFTPACK/CATH TIP	4	
MONOJECT SOFTPACK/LLOCK	4	
MONOJECT SOFTPACK/LTIP	4	
MONOJECT SOFTPACK/RG LOCK	4	
MONOJECT SOFTPACK/RG LUER	4	
MONOJECT SYRINGE	4	
MONOJECT SYRINGE CATH TIP	4	
MONOJECT SYRINGE ECC LUER	4	
MONOJECT SYRINGE ECCENTRIC TIP	4	
MONOJECT SYRINGE LUER LOCK	4	
MONOJECT SYRINGE LUER-LOCK TIP	4	
MONOJECT SYRINGE PHARMACY TRAY	4	
MONOJECT SYRINGE REG LUER	4	
MONOJECT SYRINGE REGULAR TIP	4	
MONOJECT SYRINGE TOOMEY TYPE	4	
MONOJECT TB SAFETY SYRINGE	4	
MONOJECT TB SYRINGE	4	
MONOJECT ULTRA COMFORT SYRINGE (28G X 1/2" 0.5 ML MISC, 28G X 1/2" 1 ML MISC, 29G X 1/2" 0.3 ML MISC, 29G X 1/2" 0.5 ML MISC, 29G X 1/2" 1 ML MISC, 31G X 5/16" 0.3 ML MISC, 31G X 5/16" 0.5 ML MISC)	4	MDS1 (90 / Fill)
MONOJECT ULTRA COMFORT SYRINGE (X 5/16" 0.3 ML MISC, X 5/16" 0.5 ML MISC)	2	MDS1 (90 / Fill)
MS INSULIN SYRINGE	4	MDS1 (90 / Fill)
MULTI-DRAW NEEDLE (20G X 1-1/2" MISC, 21G X 1-1/2" MISC, 22G X 1-1/2" MISC)	2	
NOKOR VENTED NEEDLE	4	
NORM-JECT LUER LOCK SYRINGE	4	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
NORM-JECT LUER SLIP SYRINGE	4	
NOVOFINE AUTOCOVER PEN NEEDLE	4	MDS1 (90 / Fill)
NOVOFINE PEN NEEDLE	4	MDS1 (90 / Fill)
NOVOFINE PLUS PEN NEEDLE	4	MDS1 (90 / Fill)
NOVOPEN ECHO	3	QL
NOVOTWIST PEN NEEDLE	4	MDS1 (90 / Fill)
PC UNIFINE PENTIPS	4	MDS1 (90 / Fill)
PEN NEEDLE/5-BEVEL TIP	2	MDS1 (90 / Fill)
PEN NEEDLES	2	MDS1 (90 / Fill)
PEN NEEDLES 5/16"	2	MDS1 (90 / Fill)
PENTIPS	4	MDS1 (90 / Fill)
PENTIPS GENERIC PEN NEEDLES	4	MDS1 (90 / Fill)
PERFECT POINT SAFETY NEEDLE	4	
PIP PEN NEEDLES 31G X 5MM	4	MDS1 (90 / Fill)
PIP PEN NEEDLES 32G X 4MM	4	MDS1 (90 / Fill)
POLY HUB NEEDLE	4	
PRECISION SURE-DOSE SYRINGE	4	MDS1 (90 / Fill)
PREFERRED PLUS INSULIN SYRINGE	4	MDS1 (90 / Fill)
PREFERRED PLUS UNIFINE PENTIPS	4	MDS1 (90 / Fill)
PREVENT DROPSAFE PEN NEEDLES	4	MDS1 (90 / Fill)
PREVENT SAFETY PEN NEEDLES	4	MDS1 (90 / Fill)
PRO COMFORT INSULIN SYRINGE	4	MDS1 (90 / Fill)
PRO COMFORT PEN NEEDLES	4	MDS1 (90 / Fill)
PRODIGY INSULIN SYRINGE	4	MDS1 (90 / Fill)
PURE COMFORT PEN NEEDLE	4	MDS1 (90 / Fill)
PURE COMFORT SAFETY PEN NEEDLE	4	MDS1 (90 / Fill)
PX EXTRA SHORT PEN NEEDLES	4	MDS1 (90 / Fill)
PX INSULIN SYRINGE	4	MDS1 (90 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
PX MINI PEN NEEDLES	4	MDS1 (90 / Fill)
PX PEN NEEDLE	4	MDS1 (90 / Fill)
PX SHORTLENGTH PEN NEEDLES	4	MDS1 (90 / Fill)
QC PEN NEEDLES	4	MDS1 (90 / Fill)
QC UNIFINE PENTIPS	4	MDS1 (90 / Fill)
QUICK TOUCH INSULIN PEN NEEDLE	4	MDS1 (90 / Fill)
RA INSULIN SYRINGE	4	MDS1 (90 / Fill)
RA PEN NEEDLES	4	MDS1 (90 / Fill)
RAYA SURE PEN NEEDLE	4	MDS1 (90 / Fill)
REALITY INSULIN SYRINGE	4	MDS1 (90 / Fill)
RELION INSULIN SYRINGE	4	MDS1 (90 / Fill)
RELION MINI PEN NEEDLES	4	MDS1 (90 / Fill)
RELION PEN NEEDLES	4	MDS1 (90 / Fill)
RELION SHORT PEN NEEDLES	4	MDS1 (90 / Fill)
SAFETY INSULIN SYRINGES	4	MDS1 (90 / Fill)
SAFETY PEN NEEDLES	2	MDS1 (90 / Fill)
SB INSULIN SYRINGE	4	MDS1 (90 / Fill)
SECURESAFE HYPODERMIC NEEDLE	4	
SECURESAFE INSULIN SYRINGE	4	MDS1 (90 / Fill)
SECURESAFE SAFETY PEN NEEDLES	4	MDS1 (90 / Fill)
SECURESAFE SYRINGE/NEEDLE	4	
SHOPKO UNIFINE PENTIPS	4	MDS1 (90 / Fill)
SHOPKO UNIFINE PENTIPS PLUS	4	MDS1 (90 / Fill)
SURE COMFORT INSULIN SYRINGE	4	MDS1 (90 / Fill)
SURE COMFORT PEN NEEDLES	4	MDS1 (90 / Fill)
SYRINGE (SYRINGE 20G X 1" 3 ML MISC, SYRINGE 20G X 1-1/2" 3 ML MISC, SYRINGE 21G X 1" 3 ML MISC, SYRINGE 21G X 1-1/2" 3 ML MISC, SYRINGE 22G X 1" 3 ML MISC, SYRINGE 22G X 1-1/2" 3 ML MISC, SYRINGE 23G X 1" 3 ML MISC, SYRINGE 25G X 1" 3 ML MISC, SYRINGE 25G X 1-1/2" 3 ML MISC, SYRINGE 25G X 5/8" 3 ML MISC)	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
SYRINGE 2-3 ML	2	
SYRINGE 30-35 ML	2	
SYRINGE 50-60 ML	2	
SYRINGE DISPOSABLE	2	
SYRINGE ECCENTRIC TIP	2	
SYRINGE LUER LOCK	2	
SYRINGE LUER SLIP	2	
SYRINGE/HYPODERMIC SAFETY	2	
TECHLITE INSULIN SYRINGE	4	MDS1 (90 / Fill)
TECHLITE PEN NEEDLES	4	MDS1 (90 / Fill)
TECHLITE PLUS PEN NEEDLES	4	MDS1 (90 / Fill)
TODAYS HEALTH MINI PEN NEEDLES	4	MDS1 (90 / Fill)
TODAYS HEALTH PEN NEEDLES	4	MDS1 (90 / Fill)
TODAYS HEALTH SHORT PEN NEEDLE	4	MDS1 (90 / Fill)
TOOMEY SYRINGE	2	
TOPCARE CLICKFINE PEN NEEDLES	4	MDS1 (90 / Fill)
TOPCARE ULTRA COMFORT INS SYR	4	MDS1 (90 / Fill)
TRUE COMFORT INSULIN SYRINGE (30G X 1/2" 0.5 ML MISC, 30G X 1/2" 1 ML MISC, 30G X 5/16" 0.5 ML MISC, 30G X 5/16" 1 ML MISC, 31G X 5/16" 0.5 ML MISC, 31G X 5/16" 1 ML MISC)	4	MDS1 (90 / Fill)
TRUE COMFORT INSULIN SYRINGE 32G X 5/16" 1 ML MISC	4	MDS1 (90 / day(s))
TRUE COMFORT PEN NEEDLES	4	MDS1 (90 / Fill)
TRUE COMFORT PRO INSULIN SYR (30G X 1/2" 0.5 ML MISC, 30G X 1/2" 1 ML MISC, 30G X 5/16" 0.5 ML MISC, 30G X 5/16" 1 ML MISC, 31G X 5/16" 0.5 ML MISC, 31G X 5/16" 1 ML MISC, 32G X 5/16" 0.5 ML MISC)	4	MDS1 (90 / Fill)
TRUE COMFORT PRO INSULIN SYR 32G X 5/16" 1 ML MISC	4	MDS1 (90 / day(s))
TRUE COMFORT PRO PEN NEEDLES	4	MDS1 (90 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
TRUE COMFORT SAFETY PEN NEEDLE	4	MDS1 (90 / Fill)
TRUEPLUS 5-BEVEL PEN NEEDLES	4	MDS1 (90 / Fill)
TRUEPLUS INSULIN SYRINGE	4	MDS1 (90 / Fill)
TRUEPLUS PEN NEEDLES	4	MDS1 (90 / Fill)
ULTICARE INSULIN SAFETY SYR	2	MDS1 (90 / Fill)
ULTICARE INSULIN SYR 1/2 UNIT	4	MDS1 (90 / Fill)
ULTICARE INSULIN SYRINGE	4	MDS1 (90 / Fill)
ULTICARE MICRO PEN NEEDLES	4	MDS1 (90 / Fill)
ULTICARE MINI PEN NEEDLES	4	MDS1 (90 / Fill)
ULTICARE PEN NEEDLES	4	MDS1 (90 / Fill)
ULTICARE SHORT PEN NEEDLES	4	MDS1 (90 / Fill)
ULTICARE SYRINGE	4	
ULTICARE TUBERCULIN SAFETY SYR	4	
ULTIGUARD SAFEPACK PEN NEEDLE	4	MDS1 (90 / Fill)
ULTIGUARD SAFEPACK SYR/NEEDLE	4	MDS1 (90 / Fill)
ULTILET PEN NEEDLE	4	MDS1 (90 / Fill)
ULTRA COMFORT INSULIN SYRINGE	4	MDS1 (90 / Fill)
ULTRA FLO INSULIN PEN NEEDLES	4	MDS1 (90 / Fill)
ULTRA FLO INSULIN SYR 1/2 UNIT	4	MDS1 (90 / Fill)
ULTRA FLO INSULIN SYRINGE	4	MDS1 (90 / Fill)
ULTRA THIN PEN NEEDLES	4	MDS1 (90 / Fill)
ULTRA-THIN II INS SYR SHORT	4	MDS1 (90 / Fill)
ULTRA-THIN II INSULIN SYRINGE	4	MDS1 (90 / Fill)
ULTRA-THIN II MINI PEN NEEDLE	4	MDS1 (90 / Fill)
ULTRA-THIN II PEN NEEDLE SHORT	4	MDS1 (90 / Fill)
ULTRA-THIN II PEN NEEDLES	4	MDS1 (90 / Fill)
ULTRACARE INSULIN SYRINGE	4	MDS1 (90 / Fill)
ULTRACARE PEN NEEDLES	4	MDS1 (90 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
UNIFINE OTC PEN NEEDLES	4	MDS1 (90 / Fill)
UNIFINE PEN NEEDLES	4	MDS1 (90 / Fill)
UNIFINE PENTIPS	4	MDS1 (90 / Fill)
UNIFINE PENTIPS PLUS	4	MDS1 (90 / Fill)
UNIFINE PROTECT PEN NEEDLE	4	MDS1 (90 / Fill)
UNIFINE SAFECONTROL PEN NEEDLE	4	MDS1 (90 / Fill)
UNIFINE ULTRA PEN NEEDLE	4	MDS1 (90 / Fill)
VALUE HEALTH INSULIN SYRINGE	4	MDS1 (90 / Fill)
VALUMARK PEN NEEDLES	4	MDS1 (90 / Fill)
VANISHPOINT INSULIN SYRINGE	4	MDS1 (90 / Fill)
VANISHPOINT SAFETY SYRINGE	4	
VANISHPOINT SYRINGE	4	
VANISHPOINT TUBERCULIN SYRINGE	4	
VERIFINE INSULIN PEN NEEDLE	4	MDS1 (90 / Fill)
VERIFINE INSULIN SYRINGE	4	MDS1 (90 / Fill)
VERIFINE PLUS PEN NEEDLE	4	MDS1 (90 / Fill)
VERISAFE SAFE STERILE SYRINGE	4	
VERISAFE SAFETY STERILE NEEDLE	4	
VIDA MIA UNIFINE PENTIPS	4	MDS1 (90 / Fill)
VP INSULIN SYRINGE	4	MDS1 (90 / Fill)
WEGMANS UNIFINE PENTIPS PLUS	4	MDS1 (90 / Fill)
YALE DISP NEEDLES	4	
ZEV RX INSULIN SYRINGE	4	MDS1 (90 / Fill)
ZEV RX PEN NEEDLES	4	MDS1 (90 / Fill)
<b>SPACER/AEROSOL-HOLDING CHAMBERS &amp; SUPPLIES</b>		
AEROCHAMBER HOLDING CHAMBER	2	MFL (2 / Fill)
AEROCHAMBER MINI CHAMBER	2	MFL (2 / Fill)
AEROCHAMBER MV	2	MFL (2 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
AEROCHAMBER PLS FLOVU MTHPIECE	2	MFL (2 / Fill)
AEROCHAMBER PLUS FLO-VU	2	MFL (2 / Fill)
AEROCHAMBER PLUS FLO-VU INTERM	2	MFL (2 / Fill)
AEROCHAMBER PLUS FLO-VU LARGE	2	MFL (2 / Fill)
AEROCHAMBER PLUS FLO-VU MEDIUM	2	MFL (2 / Fill)
AEROCHAMBER PLUS FLO-VU SMALL	2	MFL (2 / Fill)
AEROCHAMBER PLUS FLO-VU W/MASK	2	MFL (2 / Fill)
AEROCHAMBER PLUS FLOW VU	2	MFL (2 / Fill)
AEROCHAMBER W/FLOWSIGNAL	2	MFL (2 / Fill)
AEROCHAMBER Z-STAT PLUS	2	MFL (2 / Fill)
AEROCHAMBER Z-STAT PLUS CHAMBR	2	MFL (2 / Fill)
AEROCHAMBER Z-STAT PLUS/LARGE	2	MFL (2 / Fill)
AEROCHAMBER Z-STAT PLUS/MEDIUM	2	MFL (2 / Fill)
AEROCHAMBER Z-STAT PLUS/SMALL	2	MFL (2 / Fill)
AEROCHAMBER2GO ANTI-STATIC	2	MFL (2 / Fill)
AEROVENT PLUS	2	MFL (2 / Fill)
BREATHE EASE LARGE	2	MFL (2 / Fill)
BREATHE EASE MEDIUM	2	MFL (2 / Fill)
BREATHE EASE SMALL	2	MFL (2 / Fill)
BREATHERITE VALVED MDI CHAMBER	2	MFL (2 / Fill)
CLEVER CHOICE HOLDING CHAMBER	2	MFL (2 / Fill)
COMPACT SPACE CHAMBER	2	MFL (2 / Fill)
COMPACT SPACE CHAMBER/LG MASK	2	MFL (2 / Fill)
COMPACT SPACE CHAMBER/MED MASK	2	MFL (2 / Fill)
COMPACT SPACE CHAMBER/SM MASK	2	MFL (2 / Fill)
EASIVENT	2	MFL (2 / Fill)
EASIVENT MASK LARGE	2	MFL (2 / Fill)
EASIVENT MASK MEDIUM	2	MFL (2 / Fill)

RxCore CO Option

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
EASIVENT MASK SMALL	2	MFL (2 / Fill)
EQ SPACE CHAMBER ANTI-STATIC	2	MFL (2 / Fill)
EQ SPACE CHAMBER ANTI-STATIC L	2	MFL (2 / Fill)
EQ SPACE CHAMBER ANTI-STATIC M	2	MFL (2 / Fill)
EQ SPACE CHAMBER ANTI-STATIC S	2	MFL (2 / Fill)
FLEXICHAMBER	2	MFL (2 / Fill)
FLEXICHAMBER ADULT MASK/SMALL	4	MFL (2 / Fill)
FLEXICHAMBER CHILD MASK/LARGE	4	MFL (2 / Fill)
FLEXICHAMBER CHILD MASK/SMALL	4	MFL (2 / Fill)
INSPIREASE	2	MFL (2 / Fill)
INSPIREASE RESERVOIR BAGS	4	MFL (2 / Fill)
MICROCHAMBER	2	MFL (2 / Fill)
MICROSPACER	2	MFL (2 / Fill)
OPTICHAMBER DIAMOND	2	MFL (2 / Fill)
OPTICHAMBER DIAMOND-LG MASK	2	MFL (2 / Fill)
OPTICHAMBER DIAMOND-MD MASK	2	MFL (2 / Fill)
OPTICHAMBER DIAMOND-SM MASK	2	MFL (2 / Fill)
POCKET CHAMBER	2	MFL (2 / Fill)
POCKET SPACER	2	MFL (2 / Fill)
PROCHAMBER VHC	2	MFL (2 / Fill)
RITEFLO	2	MFL (2 / Fill)
VORTEX HOLD CHMBR/MASK/CHILD	2	MFL (2 / Fill)
VORTEX HOLD CHMBR/MASK/TODDLER	2	MFL (2 / Fill)
VORTEX VALVE CHAMBER-PEDI MASK	2	MFL (2 / Fill)
VORTEX VALVED HOLDING CHAMBER	2	MFL (2 / Fill)
<b>MIGRAINE PRODUCTS (CONTINUED)</b>		
<b>CALCITONIN GENE-RELATED PEPTIDE RECEPTOR ANTAG (CGRP)</b>		
NURTEC	3	PA, MFL (8 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
UBRELVY	3	PA, MFL (10 / Fill)
<b>CGRP RECEPTOR ANTAGONISTS - MONOCLONAL ANTIBODIES</b>		
AJOVY	3	MFL (1.5 / Fill)
EMGALITY	3	MFL (2 / fill(s))
EMGALITY (300 MG DOSE)	3	MFL (3 / Fill)
<b>ERGOT COMBINATIONS</b>		
ERGOTAMINE-CAFFEINE	2	PA, MFL (40 / Fill(s))
<i>dihydroergotamine mesylate 1 mg/ml solution</i>	5	MDD (0.67 Per Day)
<i>dihydroergotamine mesylate 4 mg/ml solution</i>	5	PA, MDD (0.35 Per Day)
ERGOMAR	4	PA
<b>SELECTIVE SEROTONIN AGONISTS 5-HT(1)</b>		
<i>almotriptan malate</i>	3	ST, MFL (9 / Fill(s))
<i>eletriptan hydrobromide</i>	2	MFL (9 / Fill(s))
<i>frovatriptan succinate</i>	2	ST, MFL (9 / Fill(s))
<i>naratriptan hcl</i>	2	MFL (9 / Fill(s))
<i>rizatriptan benzoate</i>	2	
<i>sumatriptan</i>	3	ST, MDD (0.52 Per Day)
<i>sumatriptan succinate (25 mg tab, 50 mg tab, 100 mg tab)</i>	2	
<i>sumatriptan succinate (4 mg/0.5ml soln a-inj, 6 mg/0.5ml soln a-inj, 6 mg/0.5ml solution)</i>	3	ST, MFL (3 / Fill(s))
SUMATRIPTAN SUCCINATE REFILL	3	ST, MFL (3 / Fill(s))
ZOLMITRIPTAN (2.5 MG SOLUTION, 5 MG SOLUTION)	3	ST, MFL (12 / Fill(s))
<i>zolmitriptan (2.5 mg tab, 2.5 mg tab disp, 5 mg tab, 5 mg tab disp)</i>	2	MFL (9 / Fill(s))
<b>SELECTIVE SEROTONIN AGONISTS 5-HT(1F)</b>		
REYVOW	4	PA, MFL (8 / Fill)
<b>MINERALS &amp; ELECTROLYTES (CONTINUED)</b>		
<b>FLUORIDE</b>		
SODIUM FLUORIDE (0.55 (0.25 F) MG CHEW TAB, 1.1 (0.5 F) MG CHEW TAB, 1.1 (0.5 F) MG TAB, 2.2 (1 F) MG CHEW TAB, 2.2 (1 F) MG TAB)	1	AGE, MDD (1.0 Per Day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
SODIUM FLUORIDE 1.1 (0.5 F) MG/ML SOLUTION	1	AGE, MFL (50 / Fill)
<b>PHOSPHATE</b>		
PHOSPHA 250 NEUTRAL	2	
PHOSPHO-TRIN 250 NEUTRAL	2	
PHOSPHOROUS	2	
<i>virt-phos 250 neutral</i>	2	
WES-PHOS 250 NEUTRAL	2	
<b>POTASSIUM</b>		
EFFER-K 25 MEQ EFFER TAB	2	
<i>k-prime</i>	2	
<i>klor-con 10</i>	2	
<i>klor-con 20 meq packet</i>	3	
<i>klor-con m10</i>	2	
<i>klor-con m15</i>	2	
<i>klor-con m20</i>	2	
<i>klor-con/ef</i>	2	
<i>potassium chloride (10 % solution, 20 meq packet, 20 meq/15ml (10%) solution, 40 meq/15ml (20%) solution)</i>	3	
<i>potassium chloride crys er</i>	2	
<i>potassium chloride er (8 cap er, 8 tab er, 10 cap er, 10 tab er, 20 tab er)</i>	2	
POTASSIUM CHLORIDE ER 15 MEQ TAB ER	4	
<b>SODIUM</b>		
AQUASTAT	4	
AQUASTAT SFR	4	
BD POSIFLUSH	4	
BD POSIFLUSH SAFESCRUB	4	
MONOJECT FLUSH SYRINGE	4	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
MONOJECT SODIUM CHLORIDE FLUSH	4	
NORMAL SALINE FLUSH	2	
SALINE FLUSH	2	
<i>sodium chloride (0.45 % solution, 2.5 meq/ml solution, 3 % solution, 4 meq/ml solution, 5 % solution)</i>	2	
<i>sodium chloride (pf)</i>	2	
<i>sodium chloride flush</i>	2	
<b>MISCELLANEOUS THERAPEUTIC CLASSES (CONTINUED)</b>		
<b>ANTILEPTOTICS</b>		
THALOMID (50 MG CAP, 100 MG CAP)	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
<b>CHELATING AGENTS</b>		
<i>trientine hcl (250 mg cap, 500 mg cap)</i>	5	PA, MDD (8.0 Per Day), MDS1 (31 / Fill)
<b>CYCLOSPORINE ANALOGS</b>		
<i>cyclosporine (25 mg cap, 100 mg cap)</i>	2	
<i>cyclosporine modified (25 mg cap, 50 mg cap, 100 mg cap, 100 mg/ml solution)</i>	2	
<i>gengraf (25 mg cap, 100 mg cap, 100 mg/ml solution)</i>	2	
<b>IMMUNOMODULATORS FOR MYELOYDYSPLASTIC SYNDROMES</b>		
<i>lenalidomide</i>	5	PA, MDS1 (31 / Fill)
<b>INOSINE MONOPHOSPHATE DEHYDROGENASE INHIBITORS</b>		
<i>mycophenolate mofetil (200 mg/ml recon susp, 250 mg cap, 500 mg tab)</i>	2	
<i>mycophenolate sodium 180 mg tab dr</i>	2	MDD (8.0 Per Day)
<i>mycophenolate sodium 360 mg tab dr</i>	2	MDD (4.0 Per Day)
<i>mycophenolic acid 180 mg tab dr</i>	2	MDD (8.0 Per Day)
<i>mycophenolic acid 360 mg tab dr</i>	2	MDD (4.0 Per Day)

Drug Name	Drug Tier	Requirements / Limits
<b>MACROLIDE IMMUNOSUPPRESSANTS</b>		
ENVARUSUS XR	4	ST
<i>everolimus (0.25 mg tab, 0.5 mg tab, 0.75 mg tab, 1 mg tab)</i>	5	MDD (6.0 Per Day), MDS1 (31 / Fill)
<i>sirolimus (0.5 mg tab, 1 mg tab, 2 mg tab)</i>	3	
<i>sirolimus 1 mg/ml solution</i>	5	
<i>tacrolimus (0.5 mg cap, 1 mg cap, 5 mg cap)</i>	2	
<b>POTASSIUM REMOVING AGENTS</b>		
<i>kionex</i>	2	
LOKELMA	3	MDD (2.0 Per Day), MDS1 (90 / Fill)
<i>sodium polystyrene sulfonate powder</i>	4	
<i>sodium polystyrene sulfonate 15 gm/60ml suspension</i>	2	
<i>sps (sodium polystyrene sulf) 15 gm/60ml suspension</i>	2	
VELTASSA	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
<b>PURINE ANALOGS</b>		
<i>azasan</i>	2	
<i>azathioprine</i>	2	
<b>ROCK INHIBITORS</b>		
REZUROCK	5	PA, AGE, MFL (30 / Fill), MDS1 (31 / Fill)
<b>MOUTH/THROAT/DENTAL AGENTS (CONTINUED)</b>		
<b>ANESTHETICS TOPICAL ORAL</b>		
<i>lidocaine viscous hcl</i>	2	
<b>ANTI-INFECTIVES - THROAT</b>		
<i>clotrimazole 10 mg troche</i>	2	
<i>nystatin 100000 unit/ml suspension</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<b>ANTISEPTICS - MOUTH/THROAT</b>		
<i>chlorhexidine gluconate 0.12 % solution</i>	2	
<i>periogard</i>	2	
<b>FLUORIDE DENTAL PRODUCTS</b>		
<i>dentagel</i>	2	
FRAICHE 5000 DENTAL	2	
<i>just right 5000 1.1 % gel</i>	2	
SF	2	
SODIUM FLUORIDE 1.1 % GEL	2	
SODIUM FLUORIDE 5000 PPM 1.1 % GEL	2	
<b>SALIVA STIMULANTS</b>		
<i>cevimeline hcl</i>	3	
<i>pilocarpine hcl (5 mg tab, 7.5 mg tab)</i>	2	
<b>STEROIDS - MOUTH/THROAT/DENTAL</b>		
<i>kourzeq</i>	2	
<i>oralone</i>	2	
<i>triamcinolone acetonide 0.1 % paste</i>	2	
<b>MULTIVITAMINS (CONTINUED)</b>		
<b>PED MULTI VITAMINS W/FL &amp; FE</b>		
MULTI-VITAMIN/FLUORIDE/IRON	2	
POLY-VI-FLOR/IRON (POLY-VI-FLOR/IRON 0.25-7 MG/ML SUSPENSION, POLY-VI-FLOR/IRON 0.5-10 MG CHEW TAB)	4	
QUFLORA FE PEDIATRIC	4	
<b>PED MV W/ FLUORIDE</b>		
FLORAFOL PEDIATRIC (0.5 MG CHEW TAB, 1 MG CHEW TAB)	4	
FLORAFOL PEDIATRIC 0.25 MG/ML SUSPENSION	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
FLORIVA PLUS	2	
FLOTREX	4	
MULTI-VIT-FLOR	4	
MULTI-VITAMIN/FLUORIDE	2	
MULTIVITAMIN W/FLUORIDE	2	
MULTIVITAMIN/FLUORIDE (MULTIVITAMIN/FLUORIDE 0.25 MG CHEW TAB, MULTIVITAMIN/FLUORIDE 0.25 MG/ML SUSPENSION, MULTIVITAMIN/FLUORIDE 0.5 MG CHEW TAB, MULTIVITAMIN/FLUORIDE 1 MG CHEW TAB)	2	
POLY-VI-FLOR (0.25 MG CHEW TAB, 0.5 MG CHEW TAB, 1 MG CHEW TAB)	4	
POLY-VI-FLOR 0.25 MG/ML SUSPENSION	2	
QUFLORA PEDIATRIC (0.25 MG CHEW TAB, 0.5 MG CHEW TAB, 1 MG CHEW TAB)	4	
QUFLORA PEDIATRIC (0.25 MG/ML SUSPENSION, 0.5 MG/ML SUSPENSION)	2	
TRI-VI-FLOR 0.25 MG/ML SUSPENSION	2	
TRI-VITAMIN WITH FLUORIDE	2	
<b>PED VITAMINS ACD &amp; FA W/ FLUORIDE</b>		
TRI-VI-FLORO	4	
<b>PED VITAMINS ACD W/ FLUORIDE</b>		
TRI-VITE/FLUORIDE	4	
<b>PRENATAL MV &amp; MIN W/FE-FA</b>		
ATABEX EC	4	
ATABEX OB	4	
CO-NATAL FA	4	
COMPLETENATE	2	
CONCEPT OB	4	
DERMACINRX PRETRATE	4	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
FOLIVANE-OB	4	
INATAL GT	4	
JENLIVA PRENATAL/POSTNATAL	4	
KOSHER PRENATAL PLUS IRON	4	
M-NATAL PLUS	2	
MATERVIA	4	
MATRONEX	2	
NATALCHEW	2	
NATALVIT	4	
NEO-VITAL RX	4	
NEONATAL COMPLETE 27-1 MG TAB	2	
NEONATAL PLUS	4	
NESTABS	4	
NIVA-PLUS	4	
OB COMPLETE ONE	4	
OB COMPLETE PETITE	4	
OB COMPLETE PREMIER	4	
OB COMPLETE/DHA	4	
ONE VITE WOMENS PLUS	2	
ONENATAL RX	4	
PNV 27-CA/FE/FA	2	
PNV PRENATAL PLUS MULTIVIT+DHA	4	
PNV-OMEGA	4	
PNV-SELECT	4	
PRENATAL 19 (29-1 MG CHEW TAB, CHEW TAB)	2	
PRENATAL 19 29-1 MG TAB	2	
PRENATAL 27-1 MG TAB	2	
PRENATAL PLUS	2	

RxCore CO Option

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
PRENATAL PLUS VITAMIN/MINERAL	2	
PRENATAL VITAMIN PLUS LOW IRON	2	
PRENATAL-U	4	
PRENATRIX	4	
PRENATRYL	4	
PRENATVITE COMPLETE	4	
PRENATVITE PLUS	4	
PREPLUS	2	
PROVIDA OB	4	
RELEVIA	4	
SE-NATAL 19 29-1 MG CHEW TAB	2	
SE-NATAL 19 29-1 MG TAB	2	
SELECT-OB	4	
THRIVITE RX	4	
TRICARE	4	
TRINATAL RX 1	2	
TRINATE	4	
VINATE II	4	
VITAFOL GUMMIES	4	
VITAFOL-OB	4	
VITATHELY WITH GINGER	4	
WESTAB PLUS	2	
<b>PRENATAL MV &amp; MIN W/FE-FA-CA-OMEGA 3 FISH OIL</b>		
COMPLETE NATAL DHA	2	
WESNATAL DHA COMPLETE	2	
<b>PRENATAL MV &amp; MIN W/FE-FA-DHA</b>		
NESTABS ONE	4	
PRENA 1 TRUE	4	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
PRENAISSANCE PLUS	4	
PRENATE ENHANCE	4	
PRENATE PIXIE	4	
PRENATE RESTORE	4	
SELECT-OB+DHA	4	
TRISTART DHA	4	
VITAFOL FE+	4	
VITAFOL-OB+DHA	4	
VITAMEDMD ONE RX/QUATREFOLIC	4	
VITATRUE	4	
WESTGEL DHA	4	
<b>PRENATAL MV &amp; MINERALS W/FA WITHOUT IRON</b>		
PRENATE	4	
<b>PRENATAL VITAMINS</b>		
PREMESISRX	4	
PRENATE AM	4	
<b>MUSCULOSKELETAL THERAPY AGENTS (CONTINUED)</b>		
<b>CENTRAL MUSCLE RELAXANTS</b>		
<i>baclofen (5 mg tab, 10 mg tab, 20 mg tab)</i>	2	MDS1 (90 / day(s))
<i>carisoprodol 350 mg tab</i>	2	MDD (4.0 Per Day)
<i>chlorzoxazone 500 mg tab</i>	2	
<i>cyclobenzaprine hcl (5 mg tab, 10 mg tab)</i>	2	
<i>metaxalone 800 mg tab</i>	3	
<i>methocarbamol (500 mg tab, 750 mg tab)</i>	2	
<i>orphenadrine citrate er</i>	2	
<i>tizanidine hcl (2 mg cap, 4 mg cap, 6 mg cap)</i>	2	MDD (6.0 Per Day)
<i>tizanidine hcl (2 mg tab, 4 mg tab)</i>	2	MDD (9.0 Per Day)
<b>DIRECT MUSCLE RELAXANTS</b>		
<i>dantrolene sodium (25 mg cap, 50 mg cap, 100 mg cap)</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<b>NASAL AGENTS - SYSTEMIC AND TOPICAL (CONTINUED)</b>		
<b>ANTI-HISTAMINE-STEROID</b>		
<i>azelastine-fluticasone</i>	3	ST, MFL (23 / Fill)
DYMISTA	3	MFL (23 / Fill)
<b>NASAL ANTICHOLINERGICS</b>		
<i>ipratropium bromide (0.03 % solution, 0.06 % solution)</i>	2	
<b>NASAL ANTIHISTAMINES</b>		
<i>azelastine hcl (0.1 % solution, 0.15 % solution, 137 mcg/spray solution)</i>	2	MFL (120 / Fill), MDS1 (100 / Fill)
<i>olopatadine hcl 0.6 % solution</i>	2	ST
<b>NASAL STEROIDS</b>		
<i>flunisolide</i>	2	MDD (2.2 Per Day)
<i>fluticasone propionate 50 mcg/act suspension</i>	2	MFL (32 / Fill)
<i>mometasone furoate 50 mcg/act suspension</i>	2	MFL (17 / Fill)
XHANCE	3	PA, MFL (16 / Fill)
<b>NEUROMUSCULAR AGENTS (CONTINUED)</b>		
<b>BENZATHIAZOLES</b>		
<i>riluzole</i>	2	
<b>OPHTHALMIC AGENTS (CONTINUED)</b>		
<b>ALPHA ADRENERGIC AGONIST &amp; CARBONIC ANHYDRASE INHIB COMB</b>		
SIMBRINZA	4	MFL (16 / Fill)
<b>BETA-BLOCKERS - OPHTHALMIC</b>		
BETAXOLOL HCL 0.5 % SOLUTION	3	
CARTEOLOL HCL	2	
LEVOBUNOLOL HCL	2	
<i>timolol maleate (0.25 % gel f soln, 0.5 % gel f soln)</i>	3	
<i>timolol maleate (0.25 % solution, 0.5 % solution)</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>timolol maleate (once-daily)</i>	3	
<i>timolol maleate oculosol</i>	2	
<i>timolol maleate pf</i>	2	
<b>BETA-BLOCKERS - OPHTHALMIC COMBINATIONS</b>		
COMBIGAN	2	MFL (10 / Fill)
<i>dorzolamide hcl-timolol mal (22.3-6.8 mg/ml solution)</i>	2	MFL (10 / Fill)
<b>CHOLINERGIC AGONISTS</b>		
TYRVAYA	4	ST, MFL (8.4 / Fill)
<b>CYCLOPLEGIC MYDRIATICS</b>		
ALTAFRIN	2	
<i>atropine sulfate (0.01 % solution, 0.025 % solution, 0.05 % solution, 1 % solution)</i>	2	
ATROPINE SULFATE 1 % SOLUTION	2	
<i>cyclopentolate hcl 1 % solution</i>	2	
<i>phenylephrine hcl (2.5 % solution, 10 % solution)</i>	2	
<b>MIOTICS - CHOLINESTERASE INHIBITORS</b>		
PHOSPHOLINE IODIDE	4	
<b>MIOTICS - DIRECT ACTING</b>		
<i>pilocarpine hcl (1 % solution, 2 % solution, 4 % solution)</i>	2	
<b>OPHTHALMIC ANTI-INFECTIVE COMBINATIONS</b>		
BACITRACIN-POLYMYXIN B	2	
<i>neo-polycin</i>	2	
<i>neomycin-bacitracin zn-polymyx (5-400-10000 ointment)</i>	2	
NEOMYCIN-POLYMYXIN-GRAMICIDIN	2	
<i>polycin</i>	2	
<i>polymyxin b-trimethoprim</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<b>OPHTHALMIC ANTIALLERGIC</b>		
<i>azelastine hcl 0.05 % solution</i>	2	
CROMOLYN SODIUM 4 % SOLUTION	2	
<i>epinastine hcl</i>	2	ST
<b>OPHTHALMIC ANTIBIOTICS</b>		
BACITRACIN 500 UNIT/GM OINTMENT	3	
<i>ciprofloxacin hcl 0.3 % solution</i>	2	
ERYTHROMYCIN 5 MG/GM OINTMENT	2	AGE
<i>gatifloxacin</i>	2	MFL (15 / Fill)
<i>gentamicin sulfate 0.3 % solution</i>	2	
LEVOFLOXACIN 0.5 % SOLUTION	2	
MOXIFLOXACIN HCL (0.5 % SOLUTION, 1 MG/ML SOLUTION, 5 MG/ML SOLUTION)	2	
MOXIFLOXACIN HCL (2X DAY)	2	
<i>ofloxacin 0.3 % solution</i>	2	
<i>tobramycin 0.3 % solution</i>	2	
<b>OPHTHALMIC ANTIVIRALS</b>		
TRIFLURIDINE	3	
<b>OPHTHALMIC CARBONIC ANHYDRASE INHIBITORS</b>		
<i>brinzolamide</i>	3	MFL (15 / Fill)
DORZOLAMIDE HCL	2	
<b>OPHTHALMIC IMMUNOMODULATORS</b>		
<i>cyclosporine (pf)</i>	3	
KLARITY-C DROPS	5	MDD (4.0 Per Day), MDS1 (31 / Fill)
VERKAZIA	5	MDD (4.0 Per Day), MDS1 (31 / Fill)
<b>OPHTHALMIC LOCAL ANESTHETICS</b>		
ALTACAINE	3	

Drug Name	Drug Tier	Requirements / Limits
<i>proparacaine hcl</i>	2	
TETRACAINE HCL 0.5 % SOLUTION	3	
<b>OPHTHALMIC NERVE GROWTH FACTORS</b>		
OXERVATE	5	PA, MFL (14 / Fill), MDS1 (7 / Fill)
<b>OPHTHALMIC NONSTEROIDAL ANTI-INFLAMMATORY AGENTS</b>		
<i>bromfenac sodium (once-daily)</i>	3	
<i>diclofenac sodium 0.1 % solution</i>	2	
FLURBIPROFEN SODIUM	2	
<i>ketorolac tromethamine (0.4 % solution, 0.5 % solution)</i>	2	
<b>OPHTHALMIC SELECTIVE ALPHA ADRENERGIC AGONISTS</b>		
ALPHAGAN P 0.1 % SOLUTION	3	MFL (15 / Fill)
APRACLONIDINE HCL	2	
<i>brimonidine tartrate 0.2 % solution</i>	2	
<b>OPHTHALMIC STEROID COMBINATIONS</b>		
BACITRA-NEOMYCIN-POLYMYXIN-HC	2	
BLEPHAMIDE	4	
<i>neo-polycin hc</i>	2	
<i>neomycin-polymyxin-dexameth (0.1 % suspension, 3.5-10000-0.1 ointment, 3.5-10000-0.1 suspension)</i>	2	
NEOMYCIN-POLYMYXIN-HC 3.5-10000-1 SUSPENSION	2	
SULFACETAMIDE-PREDNISOLONE	2	
<i>tobramycin-dexamethasone</i>	2	
<b>OPHTHALMIC STEROIDS</b>		
DEXAMETHASONE SODIUM PHOSPHATE 0.1 % SOLUTION	2	
<i>difluprednate</i>	3	MFL (15 / Fill)
<i>fluorometholone</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>loteprednol etabonate (0.5 % gel, 0.5 % suspension)</i>	3	MFL (15 / Fill)
<i>prednisolone acetate</i>	2	MDD (1.0 Per Day), MFL (30 / Fill)
PREDNISOLONE SODIUM PHOSPHATE 1 % SOLUTION	2	
<b>OPHTHALMIC SULFONAMIDES</b>		
<i>sulfacetamide sodium (10 % ointment, 10 % solution)</i>	2	
<b>OPHTHALMICS - BLEPHAROPTOSIS AGENTS</b>		
UPNEEQ	4	PA, MDD (1.0 Per Day)
<b>PROSTAGLANDINS - OPHTHALMIC</b>		
<i>bimatoprost 0.03 % solution</i>	3	MFL (5 / Fill)
LATANOPROST	2	MFL (15 / Fill)
LUMIGAN	3	MFL (5 / day(s))
<i>tafluprost (pf)</i>	2	ST, MFL (60 / Fill)
<i>travoprost (bak free)</i>	3	ST, MFL (7.5 / Fill)
<b>OTIC AGENTS (CONTINUED)</b>		
<b>OTIC AGENTS - MISCELLANEOUS</b>		
<i>acetic acid 2 % solution</i>	2	
<b>OTIC STEROID-ANTI-INFECTIVE COMBINATIONS</b>		
<i>ciprofloxacin-dexamethasone</i>	3	
CIPROFLOXACIN-FLUOCINOLONE PF	2	
<i>neomycin-polymyxin-hc</i>	2	
<b>OTIC STEROIDS</b>		
<i>flac</i>	2	
<i>fluocinolone acetonide 0.01 % oil</i>	2	
<i>hydrocortisone-acetic acid</i>	2	
<b>OXYTOCICS (CONTINUED)</b>		
<b>ABORTIFACIENTS/CERVICAL RIPENING - PROSTAGLANDINS</b>		
CERVIDIL	4	MFL (1 / Fill(s))

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>methylergonovine maleate 0.2 mg tab</i>	2	PA, MFL (28 / Fill), MDS1 (7 / Fill)
<b>PENICILLINS (CONTINUED)</b>		
<b>AMINOPENICILLINS</b>		
<i>amoxicillin (125 mg chew tab, 125 mg/5ml recon susp, 200 mg/5ml recon susp, 250 mg cap, 250 mg chew tab, 250 mg/5ml recon susp, 400 mg/5ml recon susp, 500 mg cap, 500 mg tab, 875 mg tab)</i>	2	
<i>ampicillin</i>	2	
<b>NATURAL PENICILLINS</b>		
PENICILLIN G POT IN DEXTROSE 40000 UNIT/ML SOLUTION	2	MFL (3000 / Fill)
PENICILLIN G POT IN DEXTROSE 60000 UNIT/ML SOLUTION	2	MFL (1500 / Fill)
PENICILLIN V POTASSIUM (125 MG/5ML RECON SOLN, 250 MG TAB, 250 MG/5ML RECON SOLN, 500 MG TAB)	2	
<b>PENICILLIN COMBINATIONS</b>		
<i>amoxicillin-pot clavulanate (200-28.5 mg/5ml recon susp, 250-125 mg tab, 250-62.5 mg/5ml recon susp, 400-57 mg chew tab, 400-57 mg/5ml recon susp, 500-125 mg tab, 600-42.9 mg/5ml recon susp, 875-125 mg tab)</i>	2	
<i>amoxicillin-pot clavulanate er</i>	2	
<b>PENICILLINASE-RESISTANT PENICILLINS</b>		
<i>dicloxacillin sodium</i>	2	
<b>PROGESTINS (CONTINUED)</b>		
EC-RX PROGESTERONE	4	MFL (60 / Fill)
<i>gallifrey</i>	2	MDS1 (90 / Fill)
<i>medroxyprogesterone acetate (2.5 mg tab, 5 mg tab)</i>	2	MDD (1.0 Per Day)
<i>medroxyprogesterone acetate 10 mg tab</i>	2	
MEGESTROL ACETATE 625 MG/5ML SUSPENSION	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>norethindrone acetate</i>	2	MDS1 (90 / Fill)
<i>progesterone (100 mg cap, 200 mg cap)</i>	2	
<i>progesterone 50 mg/ml oil</i>	2	MFL (10 / Fill)
PROGESTERONE MICRONIZED	2	MFL (60 / Fill)
<b>PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. (CONTINUED)</b>		
<b>AGENTS FOR OPIOID WITHDRAWAL</b>		
<i>lofexidine hcl</i>	2	MDD (12.0 Per Day), MDS1 (14 / Fill)
<b>ALCOHOL DETERRENTS</b>		
<i>acamprosate calcium</i>	2	
<b>BENZODIAZEPINES &amp; TRICYCLIC AGENTS</b>		
CHLORDIAZEPOXIDE-AMITRIPTYLINE	2	
<b>CHOLINOMIMETICS - ACHE INHIBITORS</b>		
<i>donepezil hcl</i>	2	
<i>galantamine hydrobromide (4 mg tab, 8 mg tab, 12 mg tab)</i>	2	
<i>galantamine hydrobromide er</i>	2	
<i>rivastigmine</i>	2	
<i>rivastigmine tartrate</i>	2	
<b>FIBROMYALGIA AGENT - SNRIS</b>		
SAVELLA	3	ST, MDD (2.0 Per Day)
SAVELLA TITRATION PACK	3	ST, MFL (55 / Fill)
<b>MOVEMENT DISORDER DRUG THERAPY</b>		
<i>tetrabenazine 12.5 mg tab</i>	5	PA, MDD (12.0 Per Day), MDS1 (31 / Fill)
<i>tetrabenazine 25 mg tab</i>	5	PA, MDD (6.0 Per Day), MDS1 (31 / Fill)
<b>MS AGENTS - PYRIMIDINE SYNTHESIS INHIBITORS</b>		
<i>teriflunomide</i>	2	MDD (1.0 Per Day), MDS1 (90 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<b>MULTIPLE SCLEROSIS AGENTS</b>		
<i>glatiramer acetate 20 mg/ml soln prsyr</i>	5	MDD (1.0 Per Day), MDS1 (31 / Fill)
<i>glatiramer acetate 40 mg/ml soln prsyr</i>	5	MDD (0.42 Per Day), MDS1 (31 / Fill)
<i>glatopa 20 mg/ml soln prsyr</i>	5	MDD (1.0 Per Day), MDS1 (31 / Fill)
<i>glatopa 40 mg/ml soln prsyr</i>	5	MDD (0.42 Per Day), MDS1 (31 / Fill)
<b>MULTIPLE SCLEROSIS AGENTS - ANTIMETABOLITES</b>		
<i>cladribine (10 tabs)</i>	5	PA, MFL (10 / day(s)), MDS1 (31 / day(s))
<i>cladribine (4 tabs)</i>	5	PA, MFL (10 / day(s)), MDS1 (31 / day(s))
<i>cladribine (5 tabs)</i>	5	PA, MFL (10 / day(s)), MDS1 (31 / day(s))
<i>cladribine (6 tabs)</i>	5	PA, MFL (10 / day(s)), MDS1 (31 / day(s))
<i>cladribine (7 tabs)</i>	5	PA, MFL (10 / day(s)), MDS1 (31 / day(s))
<i>cladribine (8 tabs)</i>	5	PA, MFL (10 / day(s)), MDS1 (31 / day(s))
<i>cladribine (9 tabs)</i>	5	PA, MFL (10 / day(s)), MDS1 (31 / day(s))
<b>MULTIPLE SCLEROSIS AGENTS - INTERFERONS</b>		
AVONEX PEN	4	PA, MDS1 (31 / Fill)
AVONEX PREFILLED	4	PA, MDS1 (31 / Fill)
BETASERON	5	PA, MDD (0.5 Per Day), MDS1 (31 / Fill)
EXTAVIA	5	PA, MDD (0.5 Per Day), MDS1 (31 / Fill)
PLEGRIDY	4	PA, MDS1 (31 / Fill)
PLEGRIDY STARTER PACK	4	PA, MDS1 (31 / Fill)

RxCore CO Option

Drug Name	Drug Tier	Requirements / Limits
<b>MULTIPLE SCLEROSIS AGENTS - MONOCLONAL ANTIBODIES</b>		
KESIMPTA	5	PA, MFL (0.4 / Fill(s)), MDS1 (31 / Fill)
<b>MULTIPLE SCLEROSIS AGENTS - NRF2 PATHWAY ACTIVATORS</b>		
<i>dimethyl fumarate</i>	2	MFL (180 / Fill), MDS1 (90 / Fill)
<i>dimethyl fumarate starter pack</i>	2	MDD (2.0 Per Day), MDS1 (31 / Fill)
VUMERITY	4	PA, MDD (4.0 Per Day), MDS1 (31 / Fill)
<b>MULTIPLE SCLEROSIS AGENTS - POTASSIUM CHANNEL BLOCKERS</b>		
<i>dalfampridine er</i>	2	MDD (2.0 Per Day), MDS1 (31 / Fill)
<b>N-METHYL-D-ASPARTATE (NMDA) RECEPTOR ANTAGONISTS</b>		
<i>memantine hcl (2 mg/ml solution, 10 mg/5ml solution)</i>	2	
<i>memantine hcl 10 mg tab</i>	2	MDD (2.0 Per Day)
MEMANTINE HCL 28 X 5 MG & 21 X 10 MG TAB	2	MFL (49 / Fill(s))
<i>memantine hcl 5 mg tab</i>	2	MFL (120 / Fill)
<i>memantine hcl er</i>	2	MDD (1.0 Per Day)
NAMENDA TITRATION PAK	2	MFL (49 / Fill(s))
<b>PHENOTHIAZINES &amp; TRICYCLIC AGENTS</b>		
PERPHENAZINE-AMITRIPTYLINE	2	
ERGOLOID MESYLATES	3	
PIMOZIDE	2	
<b>SMOKING DETERRENTS</b>		
<i>bupropion hcl er (smoking det)</i>	1	AGE
<i>cvs nicotine</i>	1	AGE
<i>cvs nicotine polacrilex</i>	1	AGE
<i>eq nicotine</i>	1	AGE

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>eq nicotine polacrilex</i>	1	AGE
<i>eq nicotine step 3</i>	1	AGE
<i>eql nicotine polacrilex</i>	1	AGE
<i>ft nicotine</i>	1	AGE
<i>ft nicotine mini</i>	1	AGE
<i>gnp nicotine</i>	1	AGE
<i>gnp nicotine mini</i>	1	AGE
<i>gnp nicotine polacrilex</i>	1	AGE
<i>goodsense nicotine</i>	1	AGE
<i>goodsense nicotine polacrilex</i>	1	AGE
<i>habitrol</i>	1	AGE
<i>hm nicotine</i>	1	AGE
<i>hm nicotine polacrilex</i>	1	AGE
<i>kls quit2</i>	1	AGE
<i>kls quit4</i>	1	AGE
<i>nicoderm cq 21 mg/24hr patch 24hr</i>	1	AGE
<i>nicorette</i>	1	AGE
<i>nicorette mini</i>	1	AGE
<i>nicorette starter kit</i>	1	AGE
<i>nicotine (7 mg/24hr patch 24hr, 14 mg/24hr patch 24hr, 21 mg/24hr patch 24hr)</i>	1	AGE
NICOTINE 21-14-7 MG/24HR KIT	1	AGE
<i>nicotine mini</i>	1	AGE
<i>nicotine polacrilex</i>	1	AGE
<i>nicotine polacrilex mini</i>	1	AGE
<i>nicotine step 1</i>	1	AGE
<i>nicotine step 2</i>	1	AGE
<i>nicotine step 3</i>	1	AGE
NICOTROL	1	AGE

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
NICOTROL NS	1	AGE
<i>px stop smoking aid</i>	1	AGE
<i>qc nicotine transdermal system</i>	1	AGE
<i>ra mini nicotine</i>	1	AGE
<i>ra nicotine</i>	1	AGE
<i>ra nicotine gum</i>	1	AGE
<i>ra nicotine polacrilex</i>	1	AGE
<i>sm nicotine</i>	1	AGE
<i>sm nicotine polacrilex</i>	1	AGE
<i>thrive</i>	1	AGE
<i>varenicline tartrate</i>	1	AGE
<i>varenicline tartrate (starter)</i>	1	AGE
<i>varenicline tartrate(continue)</i>	1	AGE
<b>SPHINGOSINE 1-PHOSPHATE (S1P) RECEPTOR MODULATORS</b>		
<i>fingolimod hcl</i>	2	MDD (1.0 Per Day), MFL (90 / Fill), MDS1 (90 / Fill)
ZEPOSIA	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
ZEPOSIA 7-DAY STARTER PACK	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
ZEPOSIA STARTER KIT 0.23MG &0.46MG 0.92MG(21) CAP THPK	5	PA, MDD (1.0 Per Day), MDS1 (31 / Fill)
<b>THIENBENZODIAZEPINES &amp; SSRIS</b>		
<i>olanzapine-fluoxetine hcl</i>	3	
<b>RESPIRATORY AGENTS - MISC. (CONTINUED)</b>		
<b>CYSTIC FIBROSIS AGENT - COMBINATIONS</b>		
ORKAMBI (100-125 MG TAB, 200-125 MG TAB)	5	PA, MDD (4.0 Per Day), MDS1 (31 / Fill)
ORKAMBI (75-94 MG PACKET, 100-125 MG PACKET, 150-188 MG PACKET)	5	PA, MDD (2.0 Per Day), MDS1 (31 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<b>HYDROLYTIC ENZYMES</b>		
PULMOZYME	5	MDD (5.0 Per Day), MDS1 (31 / Fill)
<b>PULMONARY FIBROSIS AGENTS</b>		
<i>pirfenidone (267 mg cap, 267 mg tab, 534 mg tab, 801 mg tab)</i>	2	PA, MDD (9.0 Per Day), MDS1 (31 / Fill)
<b>PULMONARY FIBROSIS AGENTS - KINASE INHIBITORS</b>		
OFEV	5	PA, MDD (2.0 Per Day), MDS1 (31 / Fill)
<b>SULFONAMIDES (CONTINUED)</b>		
<i>sulfadiazine</i>	3	
<b>TETRACYCLINES (CONTINUED)</b>		
<i>avidoxy</i>	2	
<i>demeclocycline hcl</i>	2	
<i>doxycycline hyclate (50 mg cap, 100 mg cap, 100 mg tab)</i>	2	
<i>doxycycline hyclate 20 mg tab</i>	2	MDD (2.0 Per Day)
<i>doxycycline monohydrate (25 mg/5ml recon susp, 50 mg cap, 50 mg tab, 75 mg tab, 100 mg cap, 100 mg tab)</i>	2	
<i>minocycline hcl (50 mg cap, 75 mg cap, 100 mg cap)</i>	2	
<i>mondoxylene nl</i>	2	
<i>tetracycline hcl (250 mg cap, 500 mg cap)</i>	2	
<b>THYROID AGENTS (CONTINUED)</b>		
<b>ANTITHYROID AGENTS</b>		
<i>methimazole</i>	2	
<i>propylthiouracil</i>	2	
<b>THYROID HORMONES</b>		
ADTHYZA	4	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
ARMOUR THYROID	4	
<i>euthyrox</i>	2	
EVEXITHROID (15 MG TAB, 30 MG TAB, 60 MG TAB, 90 MG TAB, 120 MG TAB, 180 MG TAB)	4	
<i>levo-t</i>	2	
LEVOTHYROXINE SODIUM (13 MCG CAP, 25 MCG CAP, 50 MCG CAP, 75 MCG CAP, 88 MCG CAP, 100 MCG CAP, 112 MCG CAP, 125 MCG CAP, 137 MCG CAP, 150 MCG CAP, 175 MCG CAP, 200 MCG CAP)	4	ST, MDD (3.0 Per Day)
<i>levothyroxine sodium (25 mcg tab, 50 mcg tab, 75 mcg tab, 88 mcg tab, 100 mcg tab, 112 mcg tab, 125 mcg tab, 137 mcg tab, 150 mcg tab, 175 mcg tab, 200 mcg tab, 300 mcg tab)</i>	2	
<i>levoxyl</i>	2	
<i>liomny</i>	2	
<i>liothyronine sodium (5 mcg tab, 25 mcg tab, 50 mcg tab)</i>	2	
NIVA THYROID	4	
NP THYROID	4	
RENTHYROID (15 MG TAB, 30 MG TAB, 60 MG TAB, 90 MG TAB, 120 MG TAB)	4	
THYROID	4	
<i>unithroid</i>	2	
<b>TOXOIDS (CONTINUED)</b>		
<b>TOXOID COMBINATIONS</b>		
ADACEL	1	
BOOSTRIX 5-2.5-18.5 LF-MCG/0.5 SUSP PRSYR	1	
PEDIARIX	1	AGE
VAXELIS	1	AGE, MFL (0.5 / Fill)
<b>ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS (CONTINUED)</b>		
<b>ANTISPASMODICS</b>		
<i>dicyclomine hcl (10 mg cap, 10 mg/5ml solution, 20 mg tab)</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<b>BELLADONNA ALKALOIDS</b>		
<i>hyoscyamine sulfate (0.125 mg sl tab, 0.125 mg tab, 0.125 mg tab disp, 0.125 mg/5ml elixir, 0.125 mg/ml solution)</i>	2	
<i>hyoscyamine sulfate er</i>	2	
HYOSCYAMINE SULFATE SL	2	
HYOSYNE	2	
NULEV	2	
OSCIMIN	2	
<b>H-2 ANTAGONISTS</b>		
<i>cimetidine</i>	2	
<i>famotidine (20 mg tab, 40 mg tab)</i>	2	
<i>famotidine 40 mg/5ml recon susp</i>	2	AGE
<i>nizatidine (150 mg cap, 300 mg cap)</i>	2	
<b>MISC. ANTI-ULCER</b>		
<i>sucralfate 1 gm tab</i>	2	
<i>sucralfate 1 gm/10ml suspension</i>	3	
<b>PROTON PUMP INHIBITORS</b>		
<i>acid reducer 20.6 (20 base) mg cap dr</i>	2	
<i>cvs omeprazole magnesium</i>	2	
<i>eq omeprazole magnesium</i>	2	
<i>esomeprazole magnesium (20 mg cap dr, 40 mg cap dr)</i>	2	MDD (2.0 Per Day)
FIRST-LANSOPRAZOLE	3	AGE
FIRST-OMEPRAZOLE	3	AGE, MFL (300 / Fill)
FIRST-PANTOPRAZOLE	2	AGE
<i>gnp omeprazole 20.6 (20 base) mg cap dr</i>	2	
<i>kp omeprazole magnesium</i>	2	
<i>lansoprazole (15 mg cap dr, 30 mg cap dr)</i>	2	MDD (2.0 Per Day)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>lansoprazole (15 mg tab dr disp, 30 mg tab dr disp)</i>	3	ST, AGE, MDD (2.0 Per Day)
<i>omeprazole 10 mg cap dr</i>	2	MDD (3.0 Per Day)
<i>omeprazole 20 mg cap dr</i>	2	MDD (4.0 Per Day)
<i>omeprazole 40 mg cap dr</i>	2	MDD (2.0 Per Day)
<i>omeprazole magnesium 20.6 (20 base) mg cap dr</i>	2	
OMEPRAZOLE+SYRSPEND SF ALKA	3	AGE, MFL (300 / Fill)
<i>pantoprazole sodium (20 mg tab dr, 40 mg tab dr)</i>	2	MDD (2.0 Per Day)
<i>pantoprazole sodium 40 mg packet</i>	2	ST
<i>qc omeprazole magnesium</i>	2	
<i>rabeprazole sodium 20 mg tab dr</i>	2	MDD (2.0 Per Day)
<b>QUATERNARY ANTICHOLINERGICS</b>		
<i>glycopyrrolate (1 mg tab, 2 mg tab)</i>	2	
<i>glycopyrrolate 1 mg/5ml solution</i>	2	MFL (473 / Fill)
<i>methscopolamine bromide</i>	2	
<b>ULCER DRUGS - PROSTAGLANDINS</b>		
<i>misoprostol</i>	1	
<b>URINARY ANTISPASMODICS (CONTINUED)</b>		
<b>URINARY ANTISPASMODIC - ANTIMUSCARINIC (ANTICHOLINERGIC)</b>		
<i>darifenacin hydrobromide er</i>	2	MDD (1.0 Per Day)
<i>fesoterodine fumarate er</i>	3	MDD (1.0 Per Day)
<i>oxybutynin chloride 5 mg tab</i>	2	MDD (4.0 Per Day)
<i>oxybutynin chloride 5 mg/5ml solution</i>	2	MFL (473 / Fill)
<i>oxybutynin chloride er</i>	2	MDD (2.0 Per Day)
<i>solifenacin succinate</i>	2	MDD (1.0 Per Day)
<i>tolterodine tartrate</i>	2	MDD (2.0 Per Day)
<i>tolterodine tartrate er</i>	2	MDD (1.0 Per Day)
<i>trospium chloride</i>	2	MDD (2.0 Per Day)
<i>trospium chloride er</i>	3	MDD (1.0 Per Day)

Drug Name	Drug Tier	Requirements / Limits
<b>URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS</b>		
<i>mirabegron er</i>	4	ST, MDD (1.0 Per Day)
<b>URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS</b>		
<i>bethanechol chloride</i>	2	
<b>URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS</b>		
<i>flavoxate hcl</i>	2	
<b>VACCINES (CONTINUED)</b>		
<b>BACTERIAL VACCINES</b>		
ACTHIB	1	AGE
CAPVAXIVE	1	AGE
HIBERIX	1	AGE
MENQUADFI	1	
PENBRAYA	1	AGE
PENMENVY	3	
PREVNAR 20	1	
VAXNEUVANCE	1	
<b>VIRAL VACCINE COMBINATIONS</b>		
M-M-R II	1	
PRIORIX	1	
PROQUAD	1	AGE
<b>VIRAL VACCINES</b>		
ABRYSVO	3	QL
AFLURIA PRESERVATIVE FREE	1	
AREXVY	3	QL, AGE
AUDENZ	1	
COMIRNATY 30 MCG/0.3ML SUSP PRSYR	1	MFL (0.3 / Fill)
COMIRNATY 5-11 YEARS	1	MFL (0.3 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
DENGVAXIA	3	
ERVEBO	1	PA
FLUARIX	1	
FLUBLOK	1	
FLUCELVAX SUSPENSION	1	MDS1 (34 / Fill)
FLUCELVAX 0.5 ML SUSP PRSYR	1	
FLULAVAL	1	
FLUMIST	1	
FLUZONE 0.5 ML SUSP PRSYR	1	
GARDASIL 9	1	AGE
HAVRIX 720 EL U/0.5ML SUSP PRSYR	1	
MNEXSPIKE	3	MFL (0.2 / Fill)
MODERNA COVID-19 VAC 6M-11Y 25 MCG/0.25ML SUSP PRSYR	1	MFL (0.25 / Fill)
NOVAVAX COVID-19 VACCINE 5 MCG/0.5ML SUSP PRSYR	1	MFL (0.5 / Fill)
NUVAXOVID COVID-19 VACCINE	1	MFL (0.5 / Fill)
PFIZER COVID-19 VAC-TRIS 5-11Y 10 MCG/0.3ML SUSPENSION	1	MFL (0.3 / Fill)
PFIZER COVID-19 VAC-TRIS 6M-4Y 3 MCG/0.3ML SUSPENSION	1	MFL (0.3 / Fill)
ROTATEQ	1	AGE
SHINGRIX 50 MCG/0.5ML RECON SUSP	1	AGE, MFL (1 / Fill)
SHINGRIX 50 MCG/0.5ML SUSP PRSYR	1	AGE, MFL (1 / fill(s))
SPIKEVAX 50 MCG/0.5ML SUSP PRSYR	1	MFL (0.5 / Fill)
SPIKEVAX 50 MCG/0.5ML SUSPENSION	1	MFL (0.5 / Fill)
SPIKEVAX 6M-11Y	1	MFL (0.25 / Fill)
VAQTA (25 UNIT/0.5ML SUSP PRSYR, 25 UNIT/0.5ML SUSPENSION)	1	
VARIVAX	1	

Drug Name	Drug Tier	Requirements / Limits
<b>VAGINAL AND RELATED PRODUCTS (CONTINUED)</b>		
<b>IMIDAZOLE-RELATED ANTIFUNGALS</b>		
GYNAZOLE-1	4	
<i>terconazole (0.4 % cream, 0.8 % cream)</i>	2	
<b>MISCELLANEOUS VAGINAL COMBINATIONS</b>		
FEM PH	4	
<b>MISCELLANEOUS VAGINAL PRODUCTS</b>		
INTRAROSA	4	MDD (1.0 Per Day)
<b>SPERMICIDES</b>		
ENCARE	1	MDS1 (365 / Fill)
OPTIONS GYNOL II CONTRACEPTIVE	1	MDS1 (365 / Fill)
TODAY SPONGE	1	MDS1 (365 / Fill)
VCF VAGINAL CONTRACEPTIVE 28 % FILM	1	MDS1 (365 / Fill)
VCF VAGINAL CONTRACEPTIVE 4 % GEL	1	MDS1 (365 / Fill)
<b>VAGINAL ANTI-INFECTIVES</b>		
CLEOCIN 100 MG SUPPOS	4	
<i>clindamycin phosphate 2 % cream</i>	3	
<b>VAGINAL CONTRACEPTIVE PH MODULATOR - COMBINATIONS</b>		
PHEXX	1	MDS1 (365 / Fill)
PHEXXI	1	MDS1 (365 / Fill)
<b>VAGINAL ESTROGENS</b>		
<i>estradiol 0.01 % cream</i>	2	MFL (127.5 / Fill(s))
<i>estradiol 10 mcg tab</i>	3	MDD (1.0 Per Day)
ESTRING	3	MFL (1 / Fill), MDS1 (90 / Fill)
IMVEXXY MAINTENANCE PACK	4	ST, MDD (1.0 Per Day)
IMVEXXY STARTER PACK	4	ST, MDD (1.0 Per Day)
PREMARIN 0.625 MG/GM CREAM	4	MFL (60 / Fill)

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>yuvafem</i>	3	MDD (1.0 Per Day)
<b>VAGINAL PROGESTINS</b>		
FIRST-PROGESTERONE VGS	4	AGE
<b>VASOPRESSORS (CONTINUED)</b>		
<b>ANAPHYLAXIS THERAPY AGENTS</b>		
AUVI-Q (0.1 MG/0.1ML SOLN A-INJ, 0.15 MG/0.15ML SOLN A-INJ, 0.3 MG/0.3ML SOLN A-INJ)	3	MFL (2 / Fill)
<i>epinephrine (0.15 mg/0.15ml soln a-inj, 0.15 mg/0.3ml soln a-inj, 0.3 mg/0.3ml soln a-inj)</i>	2	MFL (2 / Fill)
<b>NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS</b>		
<i>droxidopa 100 mg cap</i>	4	PA, MDD (9.0 Per Day)
<i>droxidopa 200 mg cap</i>	4	PA, MDD (6.0 Per Day)
<i>droxidopa 300 mg cap</i>	4	PA, MDD (6.0 Per Day)
<i>midodrine hcl</i>	2	
<b>VITAMINS (CONTINUED)</b>		
<b>VITAMIN D</b>		
<i>ergocalciferol 1.25 mg (50000 ut) cap</i>	2	
<i>vitamin d (ergocalciferol) (1.25 mg (50000 ut) cap, 50000 unit cap)</i>	2	
<b>VITAMIN K</b>		
<i>phytonadione 1 mg/0.5ml solution</i>	2	MFL (18 / Fill(s))
<i>phytonadione 10 mg/ml solution</i>	2	MFL (10 / Fill(s))
<i>phytonadione 5 mg tab</i>	3	MDD (5.0 Per Day)
<i>vitamin k1 1 mg/0.5ml solution</i>	2	MFL (18 / Fill(s))
<i>vitamin k1 10 mg/ml solution</i>	2	MFL (10 / Fill(s))

# Index

## 1

1ST TIER UNIFINE PENTIPS . . . . .116  
 1ST TIER UNIFINE PENTIPS PLUS . . . . .116  
 1ST TIER UNILET COMFORTOUCH . . . . .100

## A

abacavir sulfate . . . . .51  
 abacavir sulfate-lamivudine . . . . .49  
 abigale . . . . .89  
 abigale lo . . . . .89  
 ABILIFY ASIMTUFII . . . . .48  
 ABILIFY MAINTENA . . . . .48  
 abiraterone acetate . . . . .36  
 abirtega . . . . .36  
 ABOUTTIME PEN NEEDLE . . . . .116  
 ABRYSCO . . . . .158  
 acamprosate calcium . . . . .149  
 acarbose . . . . .25  
 ACCU-CHEK AVIVA PLUS . . . . .76  
 ACCU-CHEK FASTCLIX LANCETS 100  
 ACCU-CHEK GUIDE TEST . . . . .76  
 ACCU-CHEK LINKASSIST . . . . .116  
 ACCU-CHEK SAFE-T PRO LANCETS . . . . .100  
 ACCU-CHEK SMARTVIEW . . . . .76  
 ACCU-CHEK SOFTCLIX LANCETS 100  
 accutane . . . . .70  
 ACCUTREND GLUCOSE . . . . .76  
 acebutolol hcl . . . . .54  
 ACETAMINOPHEN-CODEINE . . . . .8  
 acetaminophen-codeine . . . . .8  
 acetazolamide . . . . .83  
 acetazolamide er . . . . .83  
 acetic acid . . . . .93,147  
 acetylcysteine . . . . .69  
 acid reducer . . . . .156  
 acitretin . . . . .72  
 ACTHIB . . . . .158

ACTI-LANCE 28G . . . . .100  
 ACTI-LANCE LITE LANCETS 28G . . . . .100  
 ACTI-LANCE SPECIAL LANCETS 17G . . . . .100  
 ACTI-LANCE UNIVERSAL 23G . . . . .100  
 acyclovir . . . . .53,72  
 ADACEL . . . . .155  
 adapalene . . . . .70  
 ADBRY . . . . .73  
 adefovir dipivoxil . . . . .52  
 ADEMPAS . . . . .57  
 ADTHYZA . . . . .154  
 adult aspirin regimen . . . . .5  
 ADVANCE INTUITION TEST . . . . .76  
 ADVANCE MICRO-DRAW TEST . . . . .76  
 ADVANCED MOBILE LANCET . . . . .100  
 ADVANTAGE SAFETY LANCETS 28G . . . . .100  
 ADVOCATE INSULIN PEN NEEDLE . . . . .116  
 ADVOCATE INSULIN PEN NEEDLES . . . . .116  
 ADVOCATE INSULIN SYRINGE . . . . .116  
 ADVOCATE LANCETS . . . . .101  
 ADVOCATE LANCETS 30G . . . . .101  
 ADVOCATE REDI-CODE . . . . .76  
 ADVOCATE REDI-CODE+ TEST . . . . .76  
 ADVOCATE SAFETY LANCETS . . . . .101  
 ADVOCATE SAFETY LANCETS 21G . . . . .101  
 ADVOCATE SAFETY LANCETS 23G . . . . .101  
 ADVOCATE SAFETY LANCETS 26G . . . . .101  
 ADVOCATE SAFETY LANCETS 28G . . . . .101  
 ADVOCATE TEST . . . . .76  
 AEMCOLO . . . . .12  
 AEROCHAMBER HOLDING CHAMBER . . . . .131  
 AEROCHAMBER MINI CHAMBER . . . . .131

AEROCHAMBER MV . . . . .131  
 AEROCHAMBER PLS FLOVU MTHPIECE . . . . .132  
 AEROCHAMBER PLUS FLO-VU . . . . .132  
 AEROCHAMBER PLUS FLO-VU INTERM . . . . .132  
 AEROCHAMBER PLUS FLO-VU LARGE . . . . .132  
 AEROCHAMBER PLUS FLO-VU MEDIUM . . . . .132  
 AEROCHAMBER PLUS FLO-VU SMALL . . . . .132  
 AEROCHAMBER PLUS FLO-VU W/MASK . . . . .132  
 AEROCHAMBER PLUS FLOW VU . . . . .132  
 AEROCHAMBER W/FLOWSIGNAL . . . . .132  
 AEROCHAMBER Z-STAT PLUS . . . . .132  
 AEROCHAMBER Z-STAT PLUS CHAMBR . . . . .132  
 AEROCHAMBER Z-STAT PLUS/LARGE . . . . .132  
 AEROCHAMBER Z-STAT PLUS/MEDIUM . . . . .132  
 AEROCHAMBER Z-STAT PLUS/SMALL . . . . .132  
 AEROCHAMBER2GO ANTI-STATIC . . . . .132  
 AEROVENT PLUS . . . . .132  
 afirmelle . . . . .58  
 AFLURIA PRESERVATIVE FREE . . . . .158  
 aftera . . . . .64  
 afterpill . . . . .64  
 AGAMATRIX AMP TEST . . . . .76  
 AGAMATRIX JAZZ TEST . . . . .76  
 AGAMATRIX KEYNOTE TEST . . . . .76  
 AGAMATRIX PRESTO TEST . . . . .76  
 AGAMATRIX ULTRA-THIN LANCETS . . . . .101  
 AIMSCO LUBRICATED . . . . .98  
 AIMSCO TWIST LANCETS 32G . . . . .101  
 AIMSCO TWIST LANCETS 33G . . . . .101

AIRSUPRA.....	15	amlodipine besy-benazepril hcl... 33	ASMANEX (14 METERED DOSES).. 17
AJOVY.....	134	amlodipine besylate..... 54	ASMANEX (30 METERED DOSES).. 17
ala-cort.....	73	amlodipine besylate-valsartan... 34	ASMANEX (60 METERED DOSES).. 17
albendazole.....	12	amlodipine-olmesartan..... 34	ASMANEX HFA..... 17
albuterol sulfate.....	16	amlodipine-valsartan-hctz..... 34	aspirin..... 5
albuterol sulfate hfa.....	16	ammonium lactate..... 74	aspirin 81..... 5
alclometasone dipropionate... 73		amnesteam..... 70	aspirin adult low dose..... 5
ALECENSA.....	37	amoxapine..... 25	aspirin adult low strength..... 5
alendronate sodium.....	84	amoxicillin..... 148	aspirin childrens..... 5
alfuzosin hcl er.....	92	amoxicillin-pot clavulanate... 148	aspirin ec adult low dose..... 5
aliskiren fumarate.....	35	amoxicillin-pot clavulanate er... 148	aspirin ec low dose..... 5
allopurinol.....	93	amphetamine-dextroamphet er... 1	aspirin ec low strength..... 6
almotriptan malate.....	134	amphetamine- dextroamphetamine..... 1	aspirin low dose..... 6
ALOGLIPTIN BENZOATE.....	26	ampicillin..... 148	aspirin regimen..... 6
ALOGLIPTIN-METFORMIN HCL... 26		anagrelide hcl..... 94	aspirin-dipyridamole er..... 94
ALOGLIPTIN-PIOGLITAZONE... 26		anastrozole..... 42	ASSURE 3 TEST..... 77
alosetron hcl.....	91	ANNOVERA..... 63	ASSURE 4 TEST..... 77
ALPHAGAN P.....	146	ANORO ELLIPTA..... 15	ASSURE COMFORT LANCETS 28G 101
alprazolam.....	14	ANTIVERT..... 30	ASSURE HAEMOLANCE PLUS HIGH..... 101
alprazolam er.....	14	apomorphine hcl..... 46	ASSURE HAEMOLANCE PLUS LOW..... 101
alprazolam xr.....	14	APRACLONIDINE HCL..... 146	ASSURE HAEMOLANCE PLUS MICRO..... 101
ALTACAINE.....	145	aprepitant..... 30	ASSURE HAEMOLANCE PLUS NORMAL..... 101
ALTAFRIN.....	144	apri..... 59	ASSURE HAEMOLANCE PLUS PED 101
altavera.....	58	APTIVUS..... 50	ASSURE ID DUO PRO PEN NEEDLES..... 116
ALVESCO.....	17	AQ INSULIN SYRINGE..... 116	ASSURE ID INSULIN SAFETY SYR... 117
alyacen 1/35.....	59	AQINJECT PEN NEEDLE..... 116	ASSURE ID PRO PEN NEEDLES... 117
alyacen 7/7/7.....	66	AQUALANCE LANCETS 30G... 101	ASSURE ID SAFETY PEN NEEDLES 117
alyq.....	57	AQUASTAT..... 135	ASSURE II..... 77
amabelz.....	89	AQUASTAT SFR..... 135	ASSURE II CHECK..... 77
amantadine hcl.....	45	AREXVY..... 158	ASSURE LANCE LANCETS..... 101
ambrisentan.....	57	arformoterol tartrate..... 16	ASSURE LANCE LANCETS 21G... 101
AMCINONIDE.....	73	ARGYLE STERILE SALINE..... 93	ASSURE LANCE PLUS SAFETY 25G 101
amethia.....	64	aripiprazole..... 48	ASSURE LANCE PLUS SAFETY 30G 101
amethyst.....	64	armodafinil..... 1	ASSURE LANCE SAFETY LANCET 28G..... 101
amiloride hcl.....	84	ARMOUR THYROID..... 155	ASSURE PLATINUM..... 77
AMILORIDE- HYDROCHLOROTHIAZIDE..... 83		ARNUITY ELLIPTA..... 17	
aminocaproic acid.....	96	ascomp-codeine..... 8	
amiodarone hcl.....	15	asenapine maleate..... 47	
amitriptyline hcl.....	25	ashlyna..... 65	
AMJEVITA.....	2	ASMANEX (120 METERED DOSES)17	

ASSURE PRISM MULTI TEST . . . . .	77	AVONEX PREFILLED . . . . .	150	BD ECLIPSE SYRINGE . . . . .	117
ASSURE PRO TEST . . . . .	77	ayuna . . . . .	59	BD ECLIPSE SYRINGE/NEEDLE . . . . .	117
ASSURE TITANIUM . . . . .	77	AYVAKIT . . . . .	42	BD FILTER NEEDLE . . . . .	117
ATABEX EC . . . . .	139	azasan . . . . .	137	BD HYPODERMIC NEEDLE . . . . .	117
ATABEX OB . . . . .	139	azathioprine . . . . .	137	BD INSULIN SYR ULTRAFINE II . . . . .	117
atazanavir sulfate . . . . .	51	azelaic acid . . . . .	75	BD INSULIN SYRINGE . . . . .	118
atenolol . . . . .	54	azelastine hcl . . . . .	143,145	BD INSULIN SYRINGE HALF-UNIT . . . . .	118
atenolol-chlorthalidone . . . . .	35	azelastine-fluticasone . . . . .	143	BD INSULIN SYRINGE MICROFINE . . . . .	118
atomoxetine hcl . . . . .	1	azithromycin . . . . .	97	BD INSULIN SYRINGE U-500 . . . . .	118
atorvastatin calcium . . . . .	32	azurette . . . . .	58	BD INSULIN SYRINGE U/F . . . . .	118
atovaquone . . . . .	13			BD INSULIN SYRINGE U/F	
atovaquone-proguanil hcl . . . . .	36	<b>B</b>		1/2UNIT . . . . .	118
atropine sulfate . . . . .	144	bac (butalbital-acetamin-caff) . . . . .	5	BD INSULIN SYRINGE ULTRAFINE . . . . .	118
ATROPINE SULFATE . . . . .	144	BACITRA-NEOMYCIN-POLYMYXIN- . . . . .		BD INTEGRA NEEDLE . . . . .	118
aubra . . . . .	59	HC . . . . .	146	BD INTEGRA SYRINGE . . . . .	118
aubra eq . . . . .	59	BACITRACIN . . . . .	145	BD LUER-LOCK SYRINGE . . . . .	118
AUDENZ . . . . .	158	BACITRACIN-POLYMYXIN B . . . . .	144	BD LUER-LOK SYRINGE . . . . .	118
AUM INSULIN SAFETY PEN		baclofen . . . . .	142	BD MICROTAINER LANCETS . . . . .	101
NEEDLE . . . . .	117	balsalazide disodium . . . . .	91	BD NOKOR ADMIX NEEDLE . . . . .	118
AUM MINI INSULIN PEN		balziva . . . . .	59	BD PEN . . . . .	118
NEEDLE . . . . .	117	BAQSIMI ONE PACK . . . . .	26	BD PEN MINI . . . . .	118
AUM PEN NEEDLE . . . . .	117	BAQSIMI TWO PACK . . . . .	26	BD PEN NEEDLE MICRO	
AUM READYGARD DUO PEN		BARDIA BULB IRRIGATION		ULTRAFINE . . . . .	118
NEEDLE . . . . .	117	SYRINGE . . . . .	117	BD PEN NEEDLE MINI ULTRAFINE . . . . .	118
AUM SAFETY PEN NEEDLE . . . . .	117	BARDIA PISTON IRRIGATION		BD PEN NEEDLE NANO 2ND GEN . . . . .	118
AURORA LANCET SUPER THIN		SYR . . . . .	117	BD PEN NEEDLE NANO	
30G . . . . .	101	bayer advanced aspirin reg st . . . . .	6	ULTRAFINE . . . . .	118
AURORA LANCET THIN 23G . . . . .	101	bayer aspirin . . . . .	6	BD PEN NEEDLE ORIG ULTRAFINE . . . . .	118
AURORA PEN NEEDLES . . . . .	117	bayer aspirin ec low dose . . . . .	6	BD PEN NEEDLE SHORT	
AURORA UNIFINE PENTIPS . . . . .	117	bayer low dose . . . . .	6	ULTRAFINE . . . . .	118
aurovela 1.5/30 . . . . .	59	BD ALLERGY SYRINGE . . . . .	117	BD PLASTIPAK SYRINGE . . . . .	118
aurovela 1/20 . . . . .	59	BD AUTOSHIELD DUO . . . . .	117	BD POSIFLUSH . . . . .	135
aurovela 24 fe . . . . .	59	BD BLUNT FILL NEEDLE . . . . .	117	BD POSIFLUSH SAFESCRUB . . . . .	135
aurovela fe 1.5/30 . . . . .	59	BD BLUNT FILL NEEDLE		BD PRECISIONGLIDE NEEDLE . . . . .	118
aurovela fe 1/20 . . . . .	59	W/FILTER . . . . .	117	BD SAFETYGLIDE ALLERGY	
AUTOPEN . . . . .	117	BD CONTROL SYRING LUER-LOK . . . . .	117	SYRINGE . . . . .	118
AUVI-Q . . . . .	161	BD DISP NEEDLE . . . . .	117	BD SAFETYGLIDE INSULIN	
AVERI . . . . .	59	BD DISP NEEDLES . . . . .	117	SYRINGE . . . . .	118
aviane . . . . .	59	BD ECLIPSE LUER-LOK NEEDLE . . . . .	117	BD SAFETYGLIDE NEEDLE . . . . .	118
avidoxy . . . . .	154	BD ECLIPSE NEEDLE . . . . .	117	BD SAFETYGLIDE SHIELDED	
AVONEX PEN . . . . .	150	BD ECLIPSE SHIELDED NEEDLE . . . . .	117	NEEDLE . . . . .	118

BD SAFETYGLIDE	blisovi 24 fe	59	butalbital-aspirin-caffeine	5	
SYRINGE/NEEDLE	118	blisovi fe 1.5/30	59	BYNFEZIA PEN	87
BD SYRINGE	118	blisovi fe 1/20	59	<b>C</b>	
BD SYRINGE BLUNT CANNULA		BLOOD GLUCOSE TEST	77	cabergoline	85
17G	119	BLOOD GLUCOSE TEST STRIPS		CABOMETYX	41
BD SYRINGE DISPOSABLE	119	333	77	caffeine citrate	1
BD SYRINGE DUAL CANNULA	119	BLULINK GLUCOSE TEST	77	CALCIPOTRIENE	71
BD SYRINGE LUER SLIP TIP	119	BOOSTRIX	155	calcipotriene-betameth diprop	76
BD SYRINGE LUER-LOK	119	bosentan	57	calcitonin (salmon)	85
BD SYRINGE SLIP TIP	119	BP 10-1	69	calcitrene	71
BD SYRINGE/NEEDLE	119	bprotected pedia iron	95	CALCITRIOL	71,86
BD TB SYRINGE	119	BREATHE EASE LARGE	132	calcitriol	86
BD VEO INSULIN SYR U/F		BREATHE EASE MEDIUM	132	calcium acetate	92
1/2UNIT	119	BREATHE EASE SMALL	132	calcium acetate (phos binder)	91
BD VEO INSULIN SYR		BREATHERITE VALVED MDI		CALQUENCE	39
ULTRAFINE	119	CHAMBER	132	camila	65
BELBUCA	10	BRENZAVVY	28	camrese	65
benazepril hcl	33	BREZTRI AEROSPHERE	15	camrese lo	65
benazepril-hydrochlorothiazide	34	briellyn	59	candesartan cilexetil	34
benzonatate	68	brimonidine tartrate	146	candesartan cilexetil-hctz	34
benzoyl peroxide-erythromycin	69	brinzolamide	145	capecitabine	37
benztropine mesylate	45	BRIXADI	10,11	captopril	33
betaine	86	BRIXADI (WEEKLY)	10	CAPVAXIVE	158
betamethasone dipropionate	73	bromfenac sodium (once-daily)	146	carbamazepine	19
betamethasone dipropionate		bromocriptine mesylate	45	carbamazepine er	19,20
aug	73	BRUKINSA	39	carbidopa	45
betamethasone valerate	73	budesonide	11,17,67	carbidopa-levodopa	45,46
BETASERON	150	budesonide er	67	carbidopa-levodopa er	46
betaxolol hcl	54	bumetanide	84	carbidopa-levodopa-entacapone	46
BETAXOLOL HCL	143	buprenorphine	11	carbinoxamine maleate	31
bethanechol chloride	158	buprenorphine hcl	11	CARBINOXAMINE MALEATE	31
bicalutamide	37	buprenorphine hcl-naloxone hcl	11	CAREFINE PEN NEEDLES	119
BIKTARVY	49	bupropion hcl	24	CAREONE BLOOD GLUCOSE TEST	77
BILDYOS	87	bupropion hcl er (smoking det)	151	CAREONE INSULIN SYRINGE	119
bimatoprost	147	bupropion hcl er (sr)	24	CAREONE LANCET SUPER THIN	
BIMZELX	72	bupropion hcl er (xl)	24	30G	101
BIOSCANNER GLUCOSE TEST	77	buspironone hcl	14	CAREONE LANCET THIN 23G	101
BIOTEL CARE TEST STRIPS	77	butalbital-acetaminophen	5	CAREONE UNIFINE PENTIPS	119
bisoprolol fumarate	54	butalbital-apap-caff-cod	8	CAREONE UNIFINE PENTIPS PLUS	119
bisoprolol-hydrochlorothiazide	35	butalbital-apap-caffeine	5	CAREPOINT POLY HUB NEEDLE	119
BLEPHAMIDE	146	butalbital-asa-caff-codeine	8		

CAREPOINT PRECISION POLY HUB.....	119	cartia xt.....	54	CIMDUO.....	49
CAREPOINT SAFETY 1ST NEEDLE.....	119	carvedilol.....	53	cimetidine.....	156
CAREPOINT SAFETY1ST SYR/NEEDLE.....	119	carvedilol phosphate er.....	54	CIMZIA.....	92
CAREPOINT SYRINGE CATHETER TIP.....	119	CAYA.....	100	CIMZIA (1 SYRINGE).....	92
CAREPOINT SYRINGE LUER LOCK.....	119	CAYSTON.....	13	CIMZIA (2 SYRINGE).....	92
CAREPOINT SYRINGE LUER SLIP.....	119	CEFACLOR.....	58	CIMZIA-STARTER.....	92
CAREPOINT TUBERCLN SYR/LUER SL.....	119	CEFACLOR ER.....	58	cinacalcet hcl.....	84
CARESENS LANCETS.....	101	cefadroxil.....	57	ciprofloxacin hcl.....	90,145
CARESENS LANCETS 30G.....	102	cefdinir.....	58	ciprofloxacin-dexamethasone.....	147
CARESENS N GLUCOSE TEST.....	77	cefixime.....	58	CIPROFLOXACIN-FLUOCINOLONE PF.....	147
CARESENS S GLUCOSE TEST.....	77	cefpodoxime proxetil.....	58	citalopram hydrobromide.....	24
CARETOUCH CATHETER TIP SYRINGE.....	119	cefprozil.....	58	cladribine (10 tabs).....	150
CARETOUCH HYPODERMIC NEEDLE.....	119	cefuroxime axetil.....	58	cladribine (4 tabs).....	150
CARETOUCH INSULIN SYRINGE.....	119	celecoxib.....	3	cladribine (5 tabs).....	150
CARETOUCH LUER LOCK.....	119	CELONTIN.....	23	cladribine (6 tabs).....	150
CARETOUCH LUER LOCK SYR/NEEDLE.....	119	cephalexin.....	58	cladribine (7 tabs).....	150
CARETOUCH LUER SLIP.....	119	CERVIDIL.....	147	cladribine (8 tabs).....	150
CARETOUCH PEN NEEDLES.....	120	cevimeline hcl.....	138	cladribine (9 tabs).....	150
CARETOUCH SAFETY LANCETS.....	102	charlotte 24 fe.....	59	claravis.....	70
CARETOUCH SAFETY LANCETS 26G.....	102	chateal.....	59	CLARITHROMYCIN.....	97
CARETOUCH TEST.....	77	chateal eq.....	59	clarithromycin er.....	97
CARETOUCH TWIST LANCETS 28G.....	102	CHEMET.....	29	CLEANLET LANCETS 28G.....	102
CARETOUCH TWIST LANCETS 30G.....	102	childrens aspirin.....	6	CLENPIQ.....	96
CARETOUCH TWIST LANCETS 33G.....	102	chlordiazepoxide hcl.....	14	CLEOCIN.....	160
CARETOUCH TWIST MC LANCETS 30G.....	102	CHLORDIAZEPOXIDE-AMITRIPTYLINE.....	149	CLEVER CHEK AUTO-CODE TEST.....	77
carisoprodol.....	142	chlorhexidine gluconate.....	138	CLEVER CHEK AUTO-CODE VOICE.....	77
CARTEOLOL HCL.....	143	CHLOROQUINE PHOSPHATE.....	36	CLEVER CHEK LANCETS.....	102
		chlorpromazine hcl.....	48	CLEVER CHEK TEST.....	77
		chlorthalidone.....	84	CLEVER CHOICE AUTO-CODE TEST.....	77
		chlorzoxazone.....	142	CLEVER CHOICE COMFORT EZ.....	102,120
		cholestyramine.....	32	CLEVER CHOICE HOLDING CHAMBER.....	132
		cholestyramine light.....	32	CLEVER CHOICE LANCETS 21G.....	102
		CHORIONIC GONADOTROPIN.....	86	CLEVER CHOICE LANCETS 23G.....	102
		CHOSEN LANCETS 30G.....	102	CLEVER CHOICE LANCETS 28G.....	102
		CHOSEN SAFETY LANCETS 28G.....	102	CLEVER CHOICE MICRO TEST.....	77
		CIBINQO.....	72	CLEVER CHOICE NO CODING.....	77
		ciclodan.....	71	CLEVER CHOICE TALK SYSTEM.....	77
		ciclopirox.....	71	CLICKFINE PEN NEEDLES.....	120
		ciclopirox olamine.....	71		
		cilostazol.....	94		

clindacin.....	69	COMFORT ASSURED LANCETS	COSENTYX (300 MG DOSE).....	72
clindamycin hcl.....	13	33G.....	COSENTYX SENSOREADY (300	
clindamycin palmitate hcl.....	13	COMFORT EZ INSULIN SYRINGE.....	MG).....	72
clindamycin phos (twice-daily) ..	69	COMFORT EZ MICRO PEN	COSENTYX SENSOREADY PEN.....	72
clindamycin phos-benzoyl perox	69	NEEDLES.....	COSENTYX UNOREADY.....	72
clindamycin phosphate.....	69,160	COMFORT EZ PEN NEEDLES.....	COTELIC.....	40
clobazam.....	19	COMFORT EZ PRO PEN NEEDLES	COVARYX.....	88
clobetasol prop emollient base.....	73	COMFORT EZ SHORT PEN	COVARYX HS.....	88
clobetasol propionate.....	73	NEEDLES.....	CREON.....	83
clobetasol propionate e.....	73	COMFORT LANCETS.....	CRESEMBA.....	30
clobetasol propionate emulsion.....	73	COMFORT TOUCH INSULIN PEN	cromolyn sodium.....	16,90
clomipramine hcl.....	25	NEED.....	CROMOLYN SODIUM.....	145
clonazepam.....	19	COMFORT TOUCH LANCETS	CRONO SYRINGE.....	120
clonidine.....	35	31G.....	cryselle.....	59
clonidine hcl.....	35	COMFORT TOUCH PLUS LANCETS	cryselle-28.....	59
clonidine hcl er.....	1	28G.....	curae.....	64
clopidogrel bisulfate.....	94	COMFORT TOUCH PLUS LANCETS	CURITY STERILE SALINE.....	93
clorazepate dipotassium.....	14	30G.....	CVS ADVANCED GLUCOSE TEST... ..	78
clotrimazole.....	74,137	COMFORT TOUCH TWIST LANCET	cvs aspirin.....	6
CLOTTRIMAZOLE-		30G.....	cvs aspirin adult low dose.....	6
BETAMETHASONE.....	71	COMIRNATY.....	cvs aspirin adult low strength.....	6
clozapine.....	47,48	COMIRNATY 5-11 YEARS.....	cvs aspirin ec.....	6
CO-NATAL FA.....	139	COMPACT SPACE CHAMBER.....	cvs aspirin low dose.....	6
COAGUCHEK LANCETS.....	102	COMPACT SPACE CHAMBER/LG	cvs aspirin low strength.....	6
codeine sulfate.....	9	MASK.....	cvs folic acid.....	95
colchicine.....	93	COMPACT SPACE CHAMBER/MED	cvs genuine aspirin.....	6
colchicine-probenecid.....	93	MASK.....	CVS GLUCOSE METER TEST STRIPS	78
colesevelam hcl.....	32	COMPACT SPACE CHAMBER/SM	CVS LANCETS 21G.....	102
colestipol hcl.....	32	MASK.....	CVS LANCETS MICRO THIN 33G..	102
COMBIGAN.....	144	COMPLETE NATAL DHA.....	CVS LANCETS ORIGINAL.....	102
COMBIVENT RESPIMAT.....	15	COMPLETENATE.....	CVS LANCETS THIN 26G.....	102
COMETRIQ (100 MG DAILY		CONCEPT OB.....	CVS LANCETS ULTRA THIN 30G..	102
DOSE).....	41	CONDOMS.....	CVS LANCETS ULTRA-THIN 30G..	103
COMETRIQ (140 MG DAILY		constulose.....	cvs nicotine.....	151
DOSE).....	41	CONTOUR NEXT TEST.....	cvs nicotine polacrilex.....	151
COMETRIQ (60 MG DAILY DOSE)	41	CONTOUR PLUS TEST.....	cvs omeprazole magnesium.....	156
COMFORT ASSIST INSULIN		CONTOUR TEST.....	CVS TRUE METRIX GLUCOSE TEST..	78
SYRINGE.....	120	COOL BLOOD GLUCOSE TEST	CVS ULTRA THIN LANCETS.....	103
COMFORT ASSURED LANCETS		STRIPS.....	cyanocobalamin.....	94
28G.....	102	CORTISONE ACETATE.....	cyclafem 1/35.....	59
		COSENTYX.....	cyclafem 7/7/7.....	66

cyclobenzaprine hcl	142	desmopressin ace spray refrig	88	dicloxacillin sodium	148
cyclopentolate hcl	144	desmopressin acetate	88	dicyclomine hcl	155
CYCLOPHOSPHAMIDE	44	DESMOPRESSIN ACETATE	88	diflunisal	6
cyclosporine	136	desmopressin acetate pf	88	difluprednate	146
cyclosporine (pf)	145	desmopressin acetate spray	88	digoxin	55,56
cyclosporine modified	136	desogestrel-ethinyl estradiol	58	DIGOXIN	55
cyproheptadine hcl	31	desonide	73	dihydroergotamine mesylate	134
cyred	59	DESONIDE	73	DILANTIN	23
cyred eq	59	desoximetasone	73	DILANTIN-125	23
CYSTADANE	86	desrx	73	dilt-xr	55
CYSTAGON	93	desvenlafaxine succinate er	25	diltiazem hcl	55
		dexamethasone	67	diltiazem hcl er	55
		DEXAMETHASONE SODIUM		diltiazem hcl er beads	55
D-CARE BLOOD GLUCOSE	78	PHOSPHATE	146	diltiazem hcl er coated beads	55
dabigatran etexilate mesylate	19	DEXCOM G6 RECEIVER	103	dimethyl fumarate	151
dalfampridine er	151	DEXCOM G6 SENSOR	103	dimethyl fumarate starter pack	151
danazol	11	DEXCOM G6 TRANSMITTER	103	diphenoxylate-atropine	29
dantrolene sodium	142	DEXCOM G7 15 DAY SENSOR	103	dipyridamole	94
dapsone	13,69	DEXCOM G7 RECEIVER	103	DISKETS	9
darifenacin hydrobromide er	157	DEXCOM G7 SENSOR	103	disopyramide phosphate	15
darunavir	51	dexmethylphenidate hcl	1	DIURIL	84
dasatinib	38	dexmethylphenidate hcl er	1	divalproex sodium	23
dasetta 1/35	59	dextroamphetamine sulfate	1	divalproex sodium er	23
dasetta 7/7/7	66	dextroamphetamine sulfate er	1	dofetilide	15
daysee	65	DIATHRIVE BLOOD GLUCOSE		dolishale	64
deblitane	65	TEST	78	donepezil hcl	149
deferiprone	29	DIATHRIVE GLUCOSE TEST	78	DORZOLAMIDE HCL	145
DEFLUX METAL NEEDLE	120	DIATHRIVE LANCET ULTRA THIN		dorzolamide hcl-timolol mal	144
DELSTRIGO	49	30	103	dotti	89
delyla	59	DIATHRIVE LANCETS	103	DOVATO	49
demeclocycline hcl	154	DIATHRIVE PEN NEEDLE	120	doxazosin mesylate	35
DENGVAXIA	159	DIATHRIVE+ GLUCOSE TEST	78	doxepin hcl	25
dentagel	138	DIATRUE PLUS TEST	78	doxycycline hyclate	154
DEPO-ESTRADIOL	89	diazepam	14,19	doxycycline monohydrate	154
DEPO-PROVERA	65	diazepam intensol	14	dronabinol	30
DEPO-SUBQ PROVERA 104	65	diazoxide	26	DROPLET INSULIN SYRINGE	120
depo-testosterone	11	dichlorphenamide	83	DROPLET LANCETS ULTRA THIN	
DERMACINRX PRETRATE	139	diclofenac potassium	4	30G	103
DESCOVY	49	diclofenac sodium	4,71,146	DROPLET MICRON	120
desipramine hcl	25	diclofenac sodium er	4	DROPLET PEN NEEDLES	120
DESLORATADINE	31	diclofenac-misoprostol	3		



EASY TOUCH TEST	78	EMBECTA INSULIN SYRINGE	122	endocet	10
EASY TRAK BLOOD GLUCOSE TEST	78	EMBECTA INSULIN SYRINGE U-100	122	enilloring	64
EASY TRAK II GLUCOSE TEST	78	EMBECTA INSULIN SYRINGE U-500	122	ENLITE GLUCOSE SENSOR	104
EASYGLUCO	78	EMBECTA INSULIN SYRINGE U/F	122	enoxaparin sodium	19
EASYMAX 15 TEST	78	EMBECTA PEN NEEDLE NANO	122	enpresse-28	66
EASYMAX TEST	78	EMBECTA PEN NEEDLE NANO 2	122	enskyce	60
EASYPOINT NEEDLE	122	EMBECTA PEN NEEDLE NANO 2 GEN	122	entacapone	46
EASYPOINT NEEDLE/SYRINGE	122	EMBECTA PEN NEEDLE U/F	122	entecavir	52
EASYPRO BLOOD GLUCOSE TEST	78	EMBECTA PEN NEEDLE U/F	122	ENTRESTO	56
EASYPRO PLUS	78	EMBECTA PEN NEEDLE ULTRAFINE	122	ENTYVIO PEN	91
EBGLYSS	73	EMBRACE BLOOD GLUCOSE TEST	78	enulose	91
EC-RX PROGESTERONE	148	EMBRACE EVO BLOOD GLUCOSE TEST	78	ENVARBUS XR	137
econazole nitrate	75	EMBRACE EVO BLOOD GLUCOSE TEST	78	EOHILIA	67
econtra ez	64	EMBRACE LANCETS ULTRA THIN 30G	104	epinastine hcl	145
econtra one-step	64	EMBRACE PEN NEEDLES	122	epinephrine	161
ecotrin	6	EMBRACE PRESSURE ACTIVATED 21G	104	epitol	20
ecotrin arthrtis pain	6	EMBRACE PRESSURE ACTIVATED 28G	104	eplerenone	35
ecotrin low strength	6	EMBRACE PRO GLUCOSE TEST	78	epoprostenol sodium	56
EDURANT	51	EMBRACE TALK GLUCOSE TEST	79	eq aspirin	6
EEMT	89	EMBRACE WAVE BLOOD GLUCOSE	79	eq aspirin adult low dose	6
EEMT HS	89	EMEND	30	eq aspirin low dose	6
efavirenz	51	EMGALITY	134	EQ BLOOD GLUCOSE TEST	79
efavirenz-emtricitab-tenofo df	49	EMGALITY (300 MG DOSE)	134	eq nicotine	151
EFAVIRENZ-LAMIVUDINE-TENOFOVIR	49	emoquette	60	eq nicotine polacrilex	152
EFFER-K	135	emtricitab- rilpivir-tenofov df	49	eq nicotine step 3	152
ELEMENT COMPACT TEST	78	emtricitabine	51	eq omeprazole magnesium	156
ELEMENT TEST	78	emtricitabine-tenofovir df	49	EQ SPACE CHAMBER ANTI-STATIC	133
eletriptan hydrobromide	134	EMTRIVA	51	EQ SPACE CHAMBER ANTI-STATIC L	133
ELIGARD	43	emzahh	65	EQ SPACE CHAMBER ANTI-STATIC M	133
elinest	60	enalapril maleate	33	EQ SPACE CHAMBER ANTI-STATIC S	133
ELIQUIS	18	enalapril-hydrochlorothiazide	34	eql aspirin ec	6
ELIQUIS (1.5 MG PACK)	18	ENBREL	5	eql aspirin low dose	6
ELIQUIS (2 MG PACK)	18	ENBREL MINI	5	EQL COLOR LANCETS 21G	104
ELIQUIS DVT/PE STARTER PACK	18	ENBREL SURECLICK	5	EQL COLOR LANCETS MICRO 33G	104
ELLA	64	ENCARE	160	EQL INSULIN SYRINGE	122
eluryng	64			eql nicotine polacrilex	152
EMBECTA AUTOSHIELD DUO	122			EQL SUPER THIN LANCETS 30G	104
EMBECTA INS SYR U/F 1/2 UNIT	122				

EQL THIN LANCETS 26G	104	EVEXITHROID	155	FEMLYV	60	
ergocalciferol	161	EVOLUTION AUTOCODE	79	femynor	60	
ERGOLOID MESYLATES	151	EVOTAZ	49	fenofibrate	32	
ERGOMAR	134	EXEL COMFORT POINT INSULIN		fenofibrate micronized	32	
ERGOTAMINE-CAFFEINE	134	SYR	122	fenofibric acid	32	
ERIVEDGE	40	EXEL COMFORT POINT PEN		FENOPROFEN CALCIUM	4	
erlotinib hcl	39	NEEDLE	122	fentanyl	9	
errin	65	exemestane	42	FENTANYL CITRATE	9	
ERVEBO	159	EXTAVIA	150	fer-in-sol	95	
ERYTHROMYCIN	69,145	EZ-LETS LANCETS 21G	104	ferrous sulfate	95	
erythromycin	97	EZ-LETS LANCETS 26G	104	fesoterodine fumarate er	157	
erythromycin base	97	EZ-LETS LANCETS 28G	104	FIASP	26	
erythromycin ethylsuccinate	97,98	EZ-LETS LANCETS 30G	104	FIASP FLEXTOUCH	26	
ERZOFRI	46	ezetimibe	33	FIASP PENFILL	26	
escitalopram oxalate	24	ezetimibe-simvastatin	33	FIASP PUMPCART	27	
esomeprazole magnesium	156	<b>F</b>			fidaxomicin	98
est estrogens-methyltest	89	falmina	60	FIFTY50 GLUCOSE TEST 2.0	79	
est estrogens-methyltest ds	89	famciclovir	53	FIFTY50 PEN NEEDLES	122	
est estrogens-methyltest hs	89	famotidine	156	FIFTY50 SAFETY SEAL LANCETS	104	
estarylla	60	FANAPT	46	FIFTY50 SUPERIOR COMFORT		
estazolam	96	FANAPT TITRATION PACK A	46	SYR	122	
estradiol	89,90,160	FANAPT TITRATION PACK B	46	FIFTY50 UNILET LANCETS 33G	104	
estradiol valerate	90	FANAPT TITRATION PACK C	47	FILSUVEZ	76	
estradiol-norethindrone acet	89	FANTASY LUBRICATED	98	finasteride	92	
estratest f.s.	89	FANTASY		FINE 30	105	
ESTRATEST H.S.	89	LUBRICATED/SPERMICIDE	98	FINGERSTIX LANCETS	105	
ESTRING	160	FARXIGA	28	ingolimod hcl	153	
eszopiclone	96	FARYDAK	40	finzala	60	
ethacrynic acid	84	FASENRA	17	FIRST-LANSOPRAZOLE	156	
ethambutol hcl	36	FASENRA PEN	17	FIRST-METRONIDAZOLE	12	
ethosuximide	23	fayosim	65	FIRST-OMEPRAZOLE	156	
ethynodiol diac-eth estradiol	60	FC2 FEMALE CONDOM	98	FIRST-PANTOPRAZOLE	156	
etodolac	4	fe-vite iron	95	FIRST-PROGESTERONE VGS	161	
etodolac er	4	febuxostat	93	flac	147	
etonogestrel-ethinyl estradiol	64	feirza 1.5/30	60	flavoxate hcl	158	
ETOPOSIDE	44	feirza 1/20	60	flecainide acetate	15	
etravirine	51	felbamate	22	FLEXICHAMBER	133	
EUCRISA	75	felodipine er	55	FLEXICHAMBER ADULT		
euthyrox	155	FEM PH	160	MASK/SMALL	133	
EVAMIST	90	FEMCAP	98	FLEXICHAMBER CHILD		
everolimus	41,137			MASK/LARGE	133	

FLEXICHAMBER CHILD MASK/SMALL	FLUZONE	159	FRAICHE 5000 DENTAL	138
FLORAFOL PEDIATRIC	folate	95	FREDS PHARMACY UNIFINE	
FLORIVA PLUS	folic acid	95	PENTIP+	122
FLOTREX	FOLIVANE-OB	140	FREDS PHARMACY UNIFINE	
FLOW-EZE VENTED NEEDLE	fondaparinux sodium	19	PENTIPS	122
FLUARIX	FONDIRCLE BLOOD GLUCOSE TEST	79	FREDS PHARMACY UNILET LANC	
FLUBLOK	FONDIRCLE SINGLE USE LANCETS	105	28G	105
FLUCELVAX	FORA 6 CONNECT	79	FREDS PHARMACY UNILET LANC	
fluconazole	FORA 6 CONNECT/GTEL TEST	79	30G	105
fludrocortisone acetate	FORA BLOOD GLUCOSE TEST	79	FREESTYLE FREEDOM LITE	105
FLULAVAL	FORA D15G BLOOD GLUCOSE TEST	79	FREESTYLE INSULINX TEST	80
FLUMIST	FORA D20 BLOOD GLUCOSE TEST	79	FREESTYLE LANCETS	105
flunisolide	FORA D40/G31 BLOOD GLUCOSE TEST	79	FREESTYLE LIBRE 14 DAY READER	105
fluocinolone acetonide	FORA G20 BLOOD GLUCOSE TEST	79	FREESTYLE LIBRE 14 DAY SENSOR	105
fluocinolone acetonide body	FORA G30/PREM V10 GLUCOSE TEST	79	FREESTYLE LIBRE 2 PLUS SENSOR	105
fluocinolone acetonide scalp	FORA GD20 TEST	79	FREESTYLE LIBRE 2 READER	105
fluocinonide	FORA GD50 BLOOD GLUCOSE TEST	79	FREESTYLE LIBRE 2 SENSOR	105
fluocinonide emulsified base	FORA TN'G ADVANCE PRO	79	FREESTYLE LIBRE 3 PLUS SENSOR	105
fluorometholone	FORA TN'G/TN'G VOICE	79	FREESTYLE LIBRE 3 READER	105
FLUOROURACIL	FORA V10 BLOOD GLUCOSE TEST	79	FREESTYLE LIBRE 3 SENSOR	105
flouxetine hcl	FORA V12 BLOOD GLUCOSE TEST	79	FREESTYLE LIBRE READER	105
FLUOXETINE HCL	FORA V20 BLOOD GLUCOSE TEST	79	FREESTYLE LITE	105
fluphenazine hcl	FORA V30A BLOOD GLUCOSE TEST	79	FREESTYLE LITE TEST	80
FLURAZEPAM HCL	FORACARE GD40 TEST	79	FREESTYLE PRECISION NEO SYSTEM	105
flurbiprofen	FORACARE PREMIUM V10 TEST	79	FREESTYLE PRECISION NEO TEST	80
FLURBIPROFEN SODIUM	FORACARE TEST N GO TEST	79	FREESTYLE TEST	80
FLUTICASONE FUROATE-VILANTEROL	formoterol fumarate	16	FREESTYLE UNISTICK II LANCETS	105
FLUTICASONE PROPIONATE	FORTISCARE G1 TEST STRIP	79	frovatriptan succinate	134
fluticasone propionate	FORTISCARE TEST	79	ft aspirin	6
FLUTICASONE PROPIONATE DISKUS	fosamprenavir calcium	51	ft aspirin low dose	6
FLUTICASONE PROPIONATE HFA17	fosinopril sodium	33	ft enteric coated aspirin	6
fluticasone propionate hfa	fosinopril sodium-hctz	34	ft folic acid	95
fluticasone-salmeterol			ft nicotine	152
FLUTICASONE-SALMETEROL			ft nicotine mini	152
fluvastatin sodium			furosemide	84
fluvastatin sodium er			FUROSEMIDE	84
fluvoxamine maleate			fyavolv	89
fluvoxamine maleate er				

## G

gabapentin	20
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galantamine hydrobromide . . .	149	GLOBAL INJECT EASE LANCETS	GNP INSULIN SYRINGES
galantamine hydrobromide er.	149	28G . . . . .	106
galbriela . . . . .	60	GLOBAL INJECT EASE LANCETS	GNP LANCETS 21G . . . . .
gallifrey . . . . .	148	30G . . . . .	106
GARDASIL 9 . . . . .	159	GLOBAL INSULIN SYRINGES . . . . .	122
gatifloxacin . . . . .	145	glucagon emergency . . . . .	26
GAVILYTE-C . . . . .	97	GLUCAGON EMERGENCY . . . . .	26
gavilyte-g . . . . .	97	GLUCO PERFECT 3 TEST . . . . .	80
GE100 BLOOD GLUCOSE TEST . . . . .	80	GLUCOCARD 01 SENSOR PLUS . . . . .	80
gefitinib . . . . .	39	GLUCOCARD EXPRESSION TEST . . . . .	80
gemfibrozil . . . . .	32	GLUCOCARD SHINE TEST . . . . .	80
gemmily . . . . .	60	GLUCOCARD VITAL TEST . . . . .	80
generlac . . . . .	91	GLUCOCARD X-SENSOR . . . . .	80
gengraf . . . . .	136	GLUCOCOM LANCETS 28G . . . . .	106
GENOTROPIN . . . . .	85	GLUCOCOM LANCETS 30G . . . . .	106
GENOTROPIN MINIQUICK . . . . .	85	GLUCOCOM LANCETS 33G . . . . .	106
gentamicin sulfate . . . . .	70,145	GLUCOCOM TEST . . . . .	80
GENTEEL BUTTERFLY TOUCH		GLUCONAVII BLOOD GLUCOSE	GNP ULTICARE PEN NEEDLES . . . . .
LANCET . . . . .	105	TEST . . . . .	80
GENTLE-LET GP LANCETS . . . . .	105	GLUCOPRO INSULIN SYRINGE . . . . .	123
GENTLE-LET LANCETS . . . . .	105	GLUCOSE METER TEST . . . . .	80
genuine aspirin . . . . .	6	glyburide . . . . .	29
GENULTIMATE TEST . . . . .	80	GLYBURIDE MICRONIZED . . . . .	29
GENVOYA . . . . .	49	glyburide-metformin . . . . .	28
GHT TEST . . . . .	80	glycopyrrolate . . . . .	157
glatiramer acetate . . . . .	150	glydo . . . . .	75
glatopa . . . . .	150	gnp adult aspirin low strength . . . . .	7
glimepiride . . . . .	28	gnp aspirin . . . . .	7
glipizide . . . . .	29	gnp aspirin low dose . . . . .	7
glipizide er . . . . .	29	GNP CLICKFINE PEN NEEDLES . . . . .	123
glipizide xl . . . . .	29	GNP EASY TOUCH GLUCOSE TEST	80
glipizide-metformin hcl . . . . .	28	gnp folic acid . . . . .	95
GLOBAL EASE INJECT PEN		GNP INSULIN SYRINGE . . . . .	123
NEEDLES . . . . .	122	GNP INSULIN SYRINGES . . . . .	123
GLOBAL EASY GLIDE INSULIN		GNP INSULIN SYRINGES	GNP ULTRA COM INSULIN
SYR . . . . .	122	28GX1/2" . . . . .	123
GLOBAL EASY GLIDE PEN		GNP INSULIN SYRINGES	SYRINGE . . . . .
NEEDLES . . . . .	122	29GX1/2" . . . . .	123
GLOBAL INJECT EASE INSULIN		GNP INSULIN SYRINGES	GOJJI BLOOD GLUCOSE TEST . . . . .
SYR . . . . .	122	30GX5/16" . . . . .	123
			GOJJI BLOOD TEST STRIP/LANCETS
			80
			GOJJI STERILE LANCETS . . . . .
			106
			goodsense aspirin . . . . .
			7
			goodsense aspirin adult low st . . . . .
			7
			goodsense aspirin adults . . . . .
			7
			goodsense aspirin low dose . . . . .
			7
			GOODSENSE BLOOD GLUCOSE . . . . .
			80
			GOODSENSE CLICKFINE PEN
			NEEDLE . . . . .
			123
			GOODSENSE COLOR LANCETS
			33G . . . . .
			106
			GOODSENSE LANCETS 26G UNIV . . . . .
			106
			GOODSENSE LANCETS 30G . . . . .
			106
			GOODSENSE LANCETS 30G UNIV . . . . .
			106
			GOODSENSE LANCETS 33G . . . . .
			106
			GOODSENSE LANCETS 33G UNIV . . . . .
			106
			goodsense nicotine . . . . .
			152
			goodsense nicotine polacrillex . . . . .
			152

GOODSENSE PEN NEEDLE	HAEMOLANCE LOW FLOW	hm aspirin ec . . . . .	7
PENFINE . . . . .	LANCETS . . . . .	hm aspirin ec low dose . . . . .	7
granisetron hcl . . . . .	HAEMOLANCE PLUS . . . . .	hm folic acid . . . . .	95
griseofulvin microsize . . . . .	HAEMOLANCE PLUS HIGH	hm nicotine . . . . .	152
griseofulvin ultramicrosize . . . . .	FLOW . . . . .	hm nicotine polacrilex . . . . .	152
guanfacine hcl . . . . .	HAEMOLANCE PLUS LOW FLOW	HM ULTICARE INSULIN SYRINGE . . . . .	123
guanfacine hcl er . . . . .	HAEMOLANCE PLUS MAX FLOW	HM ULTICARE MINI PEN	
GUARDIAN 4 GLUCOSE	HAEMOLANCE PLUS PEDIATRIC	NEEDLES . . . . .	123
SENSOR . . . . .	FLOW . . . . .	HM ULTICARE SHORT PEN	
GUARDIAN 4 TRANSMITTER . . . . .	hailey 1.5/30 . . . . .	NEEDLES . . . . .	123
GUARDIAN CONNECT	hailey 24 fe . . . . .	HUBER NEEDLE . . . . .	123
TRANSMITTER . . . . .	hailey fe 1.5/30 . . . . .	HUMALOG . . . . .	27
GUARDIAN LINK 3	hailey fe 1/20 . . . . .	HUMALOG JUNIOR KWIKPEN . . . . .	27
TRANSMITTER . . . . .	halobetasol propionate . . . . .	HUMALOG KWIKPEN . . . . .	27
GUARDIAN REAL-TIME REPLACE	haloette . . . . .	HUMALOG MIX 50/50 KWIKPEN . . . . .	27
PED . . . . .	haloperidol . . . . .	HUMALOG MIX 75/25 KWIKPEN . . . . .	27
GUARDIAN SENSOR (3) . . . . .	haloperidol lactate . . . . .	HUMALOG TEMPO PEN . . . . .	27
GUARDIAN SENSOR 3 . . . . .	HARVONI . . . . .	HUMULIN R U-500	
GVOKE HYPOPEN 1-PACK . . . . .	HAVRIX . . . . .	(CONCENTRATED) . . . . .	27
GVOKE HYPOPEN 2-PACK . . . . .	HEALTHWISE INSULIN	HUMULIN R U-500 KWIKPEN . . . . .	27
GVOKE KIT . . . . .	SYR/NEEDLE . . . . .	HW EMBRACE PRO GLUCOSE TEST80	
GVOKE PFS . . . . .	HEALTHWISE MICRON PEN	HW EMBRACE TALK GLUCOSE	
GYNAZOLE-1 . . . . .	NEEDLES . . . . .	TEST . . . . .	80
<b>H</b>	HEALTHWISE MINI PEN	HY-VEE LANCETS . . . . .	107
h-e-b aspirin . . . . .	NEEDLES . . . . .	HY-VEE THIN LANCETS . . . . .	107
H-E-B INCONTROL LANCETS	HEALTHWISE PEN NEEDLES . . . . .	HYCAMTIN . . . . .	45
28G . . . . .	HEALTHWISE SHORT PEN	hydralazine hcl . . . . .	35
H-E-B INCONTROL LANCETS	NEEDLES . . . . .	hydrochlorothiazide . . . . .	84
30G . . . . .	HEALTHWISE UNIFINE PENTIPS . . . . .	hydrocodone bit-homatrop mbr . . . . .	68
H-E-B INCONTROL LANCETS	HEALTHY ACCENTS UNIFINE	hydrocodone-acetaminophen . . . . .	8
33G . . . . .	PENTIP . . . . .	HYDROCODONE-ACETAMINOPHEN . . . . .	9
H-E-B INCONTROL PEN	HEALTHY ACCENTS UNILET	HYDROCODONE-IBUPROFEN . . . . .	9
NEEDLES . . . . .	LANCETS . . . . .	HYDROCORT-PRAMOXINE	
H-E-B INCONTROL UNIFINE	heather . . . . .	(PERIANAL) . . . . .	11
PENTIP . . . . .	heparin sodium (porcine) . . . . .	hydrocortisone . . . . .	11,67,74
habitrol . . . . .	heparin sodium (porcine) +rfid . . . . .	hydrocortisone (perianal) . . . . .	12
HADLIMA . . . . .	heparin sodium (porcine) pf . . . . .	HYDROCORTISONE ACE-	
HADLIMA PUSH TOUCH . . . . .	her style . . . . .	PRAMOXINE . . . . .	12
HAEMOLANCE . . . . .	HIBERIX . . . . .	HYDROCORTISONE ACETATE . . . . .	12
	hm adult aspirin . . . . .	HYDROCORTISONE BUTYRATE . . . . .	74
	hm aspirin . . . . .	hydrocortisone sod suc (pf) . . . . .	67

hydrocortisone valerate . . . . .	74	INCONTROL ULTICARE PEN	INTELENCE . . . . .	51
hydrocortisone-acetic acid . . . . .	147	NEEDLES . . . . .	INTRAROSA . . . . .	160
hydromet . . . . .	68	indapamide . . . . .	introvale . . . . .	65
HYDROMORPHONE HCL . . . . .	9	indomethacin . . . . .	INVEGA HAFYERA . . . . .	47
hydromorphone hcl . . . . .	9	indomethacin er . . . . .	INVEGA SUSTENNA . . . . .	47
hydroxychloroquine sulfate . . . . .	36	INFINITY BLOOD GLUCOSE TEST . . . . .	INVEGA TRINZA . . . . .	47
hydroxyurea . . . . .	42	INFINITY VOICE . . . . .	ipratropium bromide . . . . .	16,143
hydroxyzine hcl . . . . .	14	INPEN 100-BLUE-LILLY-	ipratropium-albuterol . . . . .	16
HYDROXYZINE PAMOATE . . . . .	14	HUMALOG . . . . .	irbesartan . . . . .	35
hyoscyamine sulfate . . . . .	156	INPEN 100-BLUE-NOVOLOG-	irbesartan-hydrochlorothiazide . . . . .	34
hyoscyamine sulfate er . . . . .	156	FIASP . . . . .	iron (ferrous sulfate) . . . . .	95
HYOSCYAMINE SULFATE SL . . . . .	156	INPEN 100-GREY-LILLY-	iron infant & toddler . . . . .	95
HYOSYNE . . . . .	156	HUMALOG . . . . .	iron infant/toddler . . . . .	95
HYPERSAL . . . . .	68	INPEN 100-GREY-NOVOLOG-	iron supplement . . . . .	95
HYPODERMIC NEEDLE . . . . .	124	FIASP . . . . .	iron supplement childrens . . . . .	95
		INPEN 100-PINK-LILLY-	ISENTRESS . . . . .	50
		HUMALOG . . . . .	ISENTRESS HD . . . . .	50
		INPEN 100-PINK-NOVOLOG-	isibloom . . . . .	60
		FIASP . . . . .	isoniazid . . . . .	36
ibandronate sodium . . . . .	84	INQOVI . . . . .	isosorbide dinitrate . . . . .	14
IBRANCE . . . . .	42	INSPIREASE . . . . .	isosorbide mononitrate . . . . .	14
ibu . . . . .	4	INSPIREASE RESERVOIR BAGS . . . . .	isosorbide mononitrate er . . . . .	14
ibuprofen . . . . .	4	INSULIN ASP PROT & ASP	isotretinoin . . . . .	70
icatibant acetate . . . . .	94	FLEXPEN . . . . .	isradipine . . . . .	55
iclevia . . . . .	65	INSULIN ASPART . . . . .	ISTURISA . . . . .	85
ICLUSIG . . . . .	38	INSULIN ASPART FLEXPEN . . . . .	itraconazole . . . . .	31
icosapent ethyl . . . . .	32	INSULIN ASPART PENFILL . . . . .	ivabradine hcl . . . . .	57
IGLUCOSE TEST STRIPS . . . . .	80	INSULIN ASPART PROT & ASPART 27	ivermectin . . . . .	12,75
IHEALTH BLOOD GLUCOSE TEST		INSULIN LISPRO . . . . .		
STR . . . . .	81	INSULIN LISPRO (1 UNIT DIAL) . . . . .		
imatinib mesylate . . . . .	38	INSULIN LISPRO JUNIOR		
IMBRUVICA . . . . .	39	KWIKPEN . . . . .	jaimiess . . . . .	65
imipramine hcl . . . . .	25	INSULIN LISPRO PROT & LISPRO . . . . .	JAKAFI . . . . .	43
imiquimod . . . . .	75	INSULIN SYRINGE . . . . .	jantoven . . . . .	18
IMVEXXY MAINTENANCE PACK 160		INSULIN SYRINGE-NEEDLE U-	jasmiel . . . . .	60
IMVEXXY STARTER PACK . . . . .	160	100 . . . . .	javygtor . . . . .	86
IN TOUCH BLOOD GLUCOSE		INSULIN SYRINGE/NEEDLE . . . . .	JAYPIRCA . . . . .	39
TEST . . . . .	81	INSUPEN PEN NEEDLES . . . . .	jencycla . . . . .	66
IN TOUCH STERILE LANCETS		INSUPEN SENSITIVE . . . . .	JENLIVA PRENATAL/POSTNATAL . . . . .	140
30G . . . . .	107	INSUPEN ULTRAFIN . . . . .	jinteli . . . . .	89
INATAL GT . . . . .	140	INSUPEN32G EXTR3ME . . . . .	jolessa . . . . .	65
incassia . . . . .	66		joyeaux . . . . .	60

JUBBONTI.....	87	KISQALI (400 MG DOSE).....	42	kurvelo.....	61
juleber.....	60	KISQALI (600 MG DOSE).....	42		
JULUCA.....	49	KLARITY-C DROPS.....	145	<b>L</b>	
junel 1.5/30.....	60	klayesta.....	71	labetalol hcl.....	54
junel 1/20.....	60	klor-con.....	135	lacosamide.....	20
junel fe 1.5/30.....	60	klor-con 10.....	135	lactulose.....	97
junel fe 1/20.....	60	klor-con m10.....	135	lactulose encephalopathy.....	91
junel fe 24.....	60	klor-con m15.....	135	LAGEVRIO.....	53
just right 5000.....	138	klor-con m20.....	135	lamivudine.....	52
		klor-con/ef.....	135	lamivudine-zidovudine.....	49
<b>K</b>		klz aspirin low dose.....	7	lamotrigine.....	20
k-prime.....	135	klz quit2.....	152	lamotrigine er.....	20,21
K-Y ME & YOU EXTRA		klz quit4.....	152	LAMPIT.....	13
LUBRICATED.....	98	KMART VALU INSULIN SYRINGE		LANCETS.....	107
K-Y ME & YOU INTENSE.....	98	29G.....	124	LANCETS 28G THIN.....	107
kaitlib fe.....	60	KMART VALU INSULIN SYRINGE		LANCETS 30G.....	107
kalliga.....	61	30G.....	124	LANCETS 33G.....	107
KAMELEON LUBRICATED.....	98	KOSHER PRENATAL PLUS IRON.....	140	LANCETS MICRO THIN 33G.....	107
kariva.....	58	kourzeq.....	138	LANCETS SUPER THIN.....	107
kelnor 1/35.....	61	kp aspirin.....	7	LANCETS SUPER THIN 28G.....	108
kelnor 1/50.....	61	kp folic acid.....	95	LANCETS THIN.....	108
KERALYT.....	75	kp omeprazole magnesium.....	156	LANCETS ULTRA THIN.....	108
KESIMPTA.....	151	KRAZATI.....	40	LANCETS ULTRA THIN 30G.....	108
ketoconazole.....	30,75	KROGER BLOOD GLUCOSE TEST.....	81	lansoprazole.....	156,157
ketorolac tromethamine.....	4,146	KROGER HEALTHPRO GLUCOSE		lanthanum carbonate.....	92
KIMONO.....	98	TEST.....	81	LANTUS.....	27
KIMONO COLORS.....	98	KROGER HEALTHPRO LANCET		LANTUS SOLOSTAR.....	27
KIMONO MAXX-LARGE FLARE.....	98	26G.....	107	lapatinib ditosylate.....	41
KIMONO MICRO THIN.....	98	KROGER INSULIN SYRINGE.....	124	larin 1.5/30.....	61
KIMONO MICRO THIN PLUS.....	98	KROGER LANCETS.....	107	larin 1/20.....	61
KIMONO PLUS.....	98	KROGER LANCETS 21G.....	107	larin 24 fe.....	61
KIMONO PS.....	98	KROGER LANCETS MICRO THIN		larin fe 1.5/30.....	61
KIMONO PS PLUS.....	98	33G.....	107	larin fe 1/20.....	61
KIMONO SENSATION.....	99	KROGER LANCETS SUPER THIN.....	107	larissia.....	61
KIMONO SENSATION PLUS.....	99	KROGER LANCETS THIN.....	107	LATANOPROST.....	147
KIMONO SPECIAL.....	99	KROGER LANCETS THIN 26G.....	107	layolis fe.....	61
KINNEY LANCETS.....	107	KROGER LANCETS ULTRATHIN		LEADER INSULIN SYRINGE.....	124
KINNEY THIN LANCETS.....	107	30G.....	107	LEADER UNIFINE PENTIPS.....	124
KINRAY INSULIN SYRINGE.....	124	KROGER PEN NEEDLES.....	124	LEADER UNIFINE PENTIPS PLUS.....	124
kionex.....	137	KROGER PREMIUM GLUCOSE		LEDIPASVIR-SOFOSBUVIR.....	53
KISQALI (200 MG DOSE).....	42	TEST.....	81	leena.....	66

leflunomide	5	lillow	61	loteprednol etabonate	147
lenalidomide	136	linezolid	13	lovastatin	32
lessina	61	LINZESS	90	low-ogestrel	61
letrozole	42	liomny	155	loxapine succinate	48
leucovorin calcium	43	liothyronine sodium	155	lubiprostone	90
LEUKERAN	44	lisdexamfetamine dimesylate	1	LUER LOCK SAFETY SYRINGES	124
leuprolide acetate	43	lisinopril	33	luizza 1.5/30	61
LEUPROLIDE ACETATE (3 MONTH)	43	lisinopril-hydrochlorothiazide	34	luizza 1/20	61
LEVALBUTEROL TARTRATE	16	LITE TOUCH LANCETS	108	LUMAKRAS	40
levetiracetam	21	LITETOUCH INSULIN SYRINGE	124	LUMIGAN	147
levetiracetam er	21	LITETOUCH LANCETS	108	LUPRON DEPOT (3-MONTH)	43
levo-t	155	LITETOUCH PEN NEEDLES	124	LUPRON DEPOT (4-MONTH)	44
LEVOBUNOLOL HCL	143	lithium	46	LUPRON DEPOT (6-MONTH)	44
levocarnitine	85	lithium carbonate	46	LUPRON DEPOT-PED (1-MONTH)	86
levocarnitine sf	85	lithium carbonate er	46	LUPRON DEPOT-PED (3-MONTH)	86
levocetirizine dihydrochloride	31	LIVE BETTER LANCET SUPER THIN	108	lurasidone hcl	46
levofloxacin	90	LIVE BETTER LANCET ULTRA THIN	108	lutera	61
LEVOFLOXACIN	145	LO LOESTRIN FE	58	LUTRATE DEPOT	44
levonest	66	lo-zumandimine	61	lyleq	66
levonorg-eth estrad triphasic	66	loestrin 1.5/30 (21)	61	lyllana	90
levonorgest-eth est & eth est	65	loestrin 1/20 (21)	61	LYNPARZA	44
levonorgest-eth estrad 91-day	65	loestrin fe 1.5/30	61	LYSODREN	36
levonorgest-eth estradiol-iron	61	loestrin fe 1/20	61	LYTGOBI (12 MG DAILY DOSE)	39
levonorgestrel	64	lofexidine hcl	149	LYTGOBI (16 MG DAILY DOSE)	40
levonorgestrel-ethinyl estrad	61,64	lojaimiess	65	LYTGOBI (20 MG DAILY DOSE)	40
levora 0.15/30 (28)	61	LOKELMA	137	lyza	66
LEVOTHYROXINE SODIUM	155	lomustine	44		
levothyroxine sodium	155	LONGS INSULIN SYRINGE	124	<b>M</b>	
levoxyl	155	LONGS LANCETS STANDARD	108	M-M-R II	158
LIBERTY MEDICAL LANCETS	108	LONGS LANCETS THIN	108	M-NATAL PLUS	140
LIBERTY NEXT GENERATION TEST	81	LONGS LANCETS ULTRA THIN	108	MAGELLAN INSULIN SAFETY SYR	124
LIBERTY TEST	81	LONSURF	42	MAGELLAN SYRINGE-SAFETY NEEDLE	125
LIBERVANT	19	lopinavir-ritonavir	49	MAGELLAN TUBERCULIN SYRINGE	125
lidocaine	75	lorazepam	14	malathion	76
lidocaine hcl	75	lorazepam intensol	14	MARATHON MEDICAL PENTIPS	125
lidocaine hcl urethral/mucosal	75	LORBRENA	38	maraviroc	50
lidocaine viscous hcl	137	loryna	61	marlissa	61
lidocaine-hydrocort (perianal)	12	losartan potassium	35	MATERVIA	140
lidocaine-prilocaine	76	losartan potassium-hctz	34	MATRONEX	140

MATULANE.....	42	MEGESTROL ACETATE.....	148	methenamine hippurate.....	13
matzim la.....	55	meijer aspirin ec.....	7	methenamine mandelate.....	13
MAVYRET.....	53	MEIJER BLOOD GLUCOSE TEST.....	81	methimazole.....	154
MAXI-COMFORT INSULIN SYRINGE.....	125	MEIJER ESSENTIAL GLUCOSE TEST.....	81	METHITEST.....	11
MAXI-COMFORT SAFETY PEN NEEDLE.....	125	MEIJER LANCETS.....	108	methocarbamol.....	142
MAXICOMFORT II PEN NEEDLE.....	125	MEIJER LANCETS THIN.....	108	METHOTREXATE SODIUM.....	37
MAXICOMFORT SYR 27G X 1/2".....	125	MEIJER LANCETS UNIVERSAL 21G.....	108	methotrexate sodium.....	37
MAXX.....	99	MEIJER LANCETS UNIVERSAL 30G.....	108	METHOTREXATE SODIUM (PF).....	37
MAXX PLUS.....	99	MEIJER LANCETS UNIVERSAL 33G.....	109	methotrexate sodium (pf).....	37
meclizine hcl.....	30	MEIJER LANCETS UNIVERSAL MEIJER PEN NEEDLES.....	125	methscopolamine bromide.....	157
MECLOFENAMATE SODIUM.....	4	MEIJER SUPER THIN LANCETS.....	109	methsuximide.....	23
medi-first aspirin.....	7	MEIJER TRUETEST TEST.....	81	methyl dopa.....	35
MEDIC INSULIN SYRINGE.....	125	MEIJER TRUETRACK TEST.....	81	METHYLDOPA.....	35
MEDICHOICE SAFETY LANCET.....	108	MEKINIST.....	40,41	methylergonovine maleate.....	148
MEDICHOICE SAFETY LANCET EXTRA.....	108	meleya.....	66	methylphenidate hcl.....	2
MEDICHOICE SAFETY LANCET NORM.....	108	meloxicam.....	4	METHYLPHENIDATE HCL ER.....	2
MEDICINE SHOPPE PEN NEEDLES.....	125	memantine hcl.....	151	methylphenidate hcl er (cd).....	2
medique aspirin.....	7	MEMANTINE HCL.....	151	methylphenidate hcl er (la).....	2
MEDLANCE EXTRA 21G.....	108	memantine hcl er.....	151	methylphenidate hcl er (osm).....	2
MEDLANCE LITE 25G.....	108	MENEST.....	90	methylprednisolone.....	68
MEDLANCE PLUS EXTRA 21G.....	108	MENQUADFI.....	158	methyltestosterone.....	11
MEDLANCE PLUS LANCETS.....	108	mepерidine hcl.....	9	metoclopramide hcl.....	90
MEDLANCE PLUS LITE 25G.....	108	MEPERIDINE HCL.....	9	metolazone.....	84
MEDLANCE PLUS SPECIAL 0.8MM.....	108	meprobamate.....	14	metoprolol succinate er.....	54
MEDLANCE PLUS SUPERLITE 30G.....	108	mercaptopurine.....	37	metoprolol tartrate.....	54
MEDLANCE PLUS UNIVERSAL 21G.....	108	merzee.....	61	metoprolol-hydrochlorothiazide.....	35
MEDLANCE UNIVERSAL 21G.....	108	mesalamine.....	91	metronidazole.....	12,75,76
medroxyprogesterone acetate.....	65,148	mesalamine er.....	91	METRONIDAZOLE BENZO+SYRSPEND.....	12
mefenamic acid.....	4	mesna.....	45	mexiletine hcl.....	15
mefloquine hcl.....	36	metaxalone.....	142	mibelas 24 fe.....	62
megestrol acetate.....	44	metformin hcl.....	26	MICROCHAMBER.....	133
		metformin hcl er.....	26	MICRODOT PEN NEEDLE.....	125
		methadone hcl.....	9	MICRODOT TEST.....	81
		METHADONE HCL.....	9	microgestin 1.5/30.....	62
		methadone hcl intensol.....	9	microgestin 1/20.....	62
		methadose.....	9	microgestin 24 fe.....	62
		methazolamide.....	83	microgestin fe 1.5/30.....	62
				microgestin fe 1/20.....	62
				MICROLET LANCETS.....	109
				MICROLET NEXT LANCETS.....	109

MICROSPACER.....	133	MONOJECT HYPODERMIC	MONOLET LANCETS.....	109
midodrine hcl.....	161	NEEDLE.....	MONOLET OPD LANCETS.....	109
mifepristone.....	84	MONOJECT INSULIN SYRINGE... 125	MONOLETTOR SAFETY LANCETS. 109	
MIGLITOL.....	26	MONOJECT INTRODUCER	montelukast sodium.....	17
miglustat.....	94	NEEDLE.....	morphine sulfate.....	9
mili.....	62	MONOJECT LIFESHIELD	MORPHINE SULFATE	
mimvey.....	89	SYRINGE.....	(CONCENTRATE).....	9
MINILINK REAL-TIME		MONOJECT MAGELLAN SAFETY	MORPHINE SULFATE ER.....	9
TRANSMITTER.....	109	NDL.....	morphine sulfate er.....	10
MINIMED 630G GUARDIAN		MONOJECT MAGELLAN	MORPHINE SULFATE ER BEADS... 10	
PRESS.....	109	SYRINGE.....	MOUNJARO.....	28
MINIMED INSTINCT GLUC		MONOJECT MEDICATION TRANSF	moxifloxacin hcl.....	90
SENSOR.....	109	NDL.....	MOXIFLOXACIN HCL.....	145
minocycline hcl.....	154	MONOJECT PHARMACY TRAY... 126	MOXIFLOXACIN HCL (2X DAY)... 145	
minoxidil.....	35	MONOJECT PISTON SYRINGE... 126	MPD SAFETY LANCET 21G.....	109
minzoya.....	62	MONOJECT SODIUM CHLORIDE	MPD SAFETY LANCET 23G.....	109
mirabegron er.....	158	FLUSH.....	MPD SAFETY LANCET 28G.....	109
mirtazapine.....	24	MONOJECT SOFTPACK/CATHTIP 126	MPD SAFETY LANCET 30G.....	109
misoprostol.....	157	MONOJECT SOFTPACK/LLOCK.. 126	MS INSULIN SYRINGE.....	126
mm aspirin.....	7	MONOJECT SOFTPACK/LTIP.... 126	MULTAQ.....	15
MM BLULINK GLUCOSE TEST... 81		MONOJECT SOFTPACK/RG LOCK126	MULTI-DRAW NEEDLE.....	126
MM EASY TOUCH GLUCOSE... 81		MONOJECT SOFTPACK/RG LUER126	MULTI-VIT-FLOR.....	139
MM INSULIN SYRINGE/NEEDLE 125		MONOJECT SYRINGE.....	MULTI-VITAMIN/FLUORIDE.....	139
MM PEN NEEDLES.....	125	MONOJECT SYRINGE CATH TIP .126	MULTI-	
MM TWIST LANCETS.....	109	MONOJECT SYRINGE ECC LUER. 126	VITAMIN/FLUORIDE/IRON.....	138
MNEXSPIKE.....	159	MONOJECT SYRINGE ECCENTRIC	MULTIGEN.....	95
MOBILE LANCETS 30G.....	109	TIP.....	MULTIVITAMIN W/FLUORIDE... 139	
modafinil.....	2	MONOJECT SYRINGE LUER LOCK126	MULTIVITAMIN/FLUORIDE.....	139
MODERNA COVID-19 VAC 6M-		MONOJECT SYRINGE LUER-LOCK	mupirocin.....	71
11Y.....	159	TIP.....	my choice.....	64
moexipril hcl.....	33	MONOJECT SYRINGE PHARMACY	my way.....	64
MOLINDONE HCL.....	48	TRAY.....	mycophenolate mofetil.....	136
mometasone furoate.....	74,143	MONOJECT SYRINGE REG LUER. 126	mycophenolate sodium.....	136
mondoxyne nl.....	154	MONOJECT SYRINGE REGULAR	mycophenolic acid.....	136
mono-linyah.....	62	TIP.....	MYGLUCOHEALTH LANCETS 30G.109	
MONOJECT BLUNTIP CANNULA125		MONOJECT SYRINGE TOOMEY	MYGLUCOHEALTH TEST.....	81
MONOJECT BLUNTIP		TYPE.....	myorisan.....	70
SYR/CANNULA.....	125	MONOJECT TB SAFETY SYRINGE.126		
MONOJECT CONTROL SYRINGE 125		MONOJECT TB SYRINGE.....	<b>N</b>	
MONOJECT FILTER NEEDLE... 125		MONOJECT ULTRA COMFORT	na sulfate-k sulfate-mg sulf.....	97
MONOJECT FLUSH SYRINGE... 135		SYRINGE.....	nabumetone.....	4

nadolol	54	NEXLIZET	31	norethindron-ethinyl estrad-fe	66
NAFTIFINE HCL	71	NEXTSTELLIS	62	norethindrone	66
naloxone hcl	29	NIACIN (ANTIHYPERLIPIDEMIC)	33	norethindrone acet-ethinyl est	62
naltrexone hcl	29	nicardipine hcl	55	norethindrone acetate	149
NAMENDA TITRATION PAK	151	nicoderm cq	152	norethindrone-eth estradiol	89
naproxen	4	nicorette	152	norgestim-eth estrad triphasic	66
naproxen sodium	4	nicorette mini	152	norgestimate-eth estradiol	62
naratriptan hcl	134	nicorette starter kit	152	norlyda	66
NATALCHEW	140	nicotine	152	norlyroc	66
NATALVIT	140	NICOTINE	152	NORM-JECT LUER LOCK SYRINGE	126
NATAZIA	65	nicotine mini	152	NORM-JECT LUER SLIP SYRINGE	127
nateglinide	28	nicotine polacrilex	152	NORMAL SALINE FLUSH	136
NAYZILAM	19	nicotine polacrilex mini	152	nortrel 0.5/35 (28)	62
nebivolol hcl	54	nicotine polacrilex mini	152	nortrel 1/35 (21)	62
NEBUSAL	68	nicotine step 1	152	nortrel 1/35 (28)	62
necon 0.5/35 (28)	62	nicotine step 2	152	nortrel 7/7/7	66
NEFAZODONE HCL	25	nicotine step 3	152	nortriptyline hcl	25
NEMLUVIO	75	NICOTROL	152	NOVA MAX GLUCOSE TEST	81
neo-polycin	144	NICOTROL NS	153	NOVA SAFETY LANCETS 23G	109
neo-polycin hc	146	nifedipine	55	NOVA SAFETY LANCETS 28G	109
NEO-VITAL RX	140	nifedipine er	55	NOVA SUREFLEX LANCETS	109
neomycin sulfate	2	nifedipine er osmotic release	55	NOVAREL	86
neomycin-bacitracin zn-		nikki	62	NOVAVAX COVID-19 VACCINE	159
polymyx	144	nilotinib hcl	38	NOVOFINE AUTOCOVER PEN	
NEOMYCIN-POLYMYXIN B GU	92	NILUTAMIDE	37	NEEDLE	127
neomycin-polymyxin-		nimodipine	55	NOVOFINE PEN NEEDLE	127
dexameth	146	NIMODIPINE	55	NOVOFINE PLUS PEN NEEDLE	127
NEOMYCIN-POLYMYXIN-		nitazoxanide	13	NOVOLIN 70/30	27
GRAMICIDIN	144	nitisinone	86	NOVOLIN N	27
NEOMYCIN-POLYMYXIN-HC	146	NITRO-BID	14	NOVOLOG	27
neomycin-polymyxin-hc	147	NITROFURANTOIN	13	NOVOLOG 70/30 FLEXPEN RELION	27
NEONATAL COMPLETE	140	nitrofurantoin macrocrystal	13	NOVOLOG FLEXPEN	27
NEONATAL PLUS	140	nitrofurantoin monohyd macro	13	NOVOLOG FLEXPEN RELION	27
NESTABS	140	nitroglycerin	14	NOVOLOG MIX 70/30	27
NESTABS ONE	141	NIVA THYROID	155	NOVOLOG MIX 70/30 FLEXPEN	28
NEUTEK 2TEK TEST	81	NIVA-PLUS	140	NOVOLOG MIX 70/30 RELION	28
nevirapine	51	nizatidine	156	NOVOLOG PENFILL	28
NEVIRAPINE	51	NOKOR VENTED NEEDLE	126	NOVOPEN ECHO	127
nevirapine er	51	nora-be	66	NOVOTWIST PEN NEEDLE	127
new day	64	norelgestromin-eth estradiol	63	NP THYROID	155
NEXLETOL	31	norethin ace-eth estrad-fe	62	NUBEQA	37
		norethin-eth estradiol-fe	62		

NULEV.....	156	OMEPRAZOLE+SYRSPEND SF	ONETOUCH VERIO.....	81
NURTEC.....	133	ALKA.....	opcicon one-step.....	64
NUVAXOVID COVID-19		OMNIFLEX DIAPHRAGM.....	OPFOLDA.....	85
VACCINE.....	159	OMNIPOD 5 DEXG7G6 INTRO GEN	OPILL.....	66
nyamyc.....	71	5.....	OPTICHAMBER DIAMOND.....	133
nylia 1/35.....	62	OMNIPOD 5 DEXG7G6 PODS GEN	OPTICHAMBER DIAMOND-LG	
nylia 7/7/7.....	66	5.....	MASK.....	133
nymyo.....	62	OMNIPOD 5 G7 INTRO (GEN 5)	OPTICHAMBER DIAMOND-MD	
nystatin.....	30,71,137	OMNIPOD 5 G7 PODS (GEN 5)	MASK.....	133
nystatin-triamcinolone.....	71	OMNIPOD 5 LIBRE2 G6 INTRO	OPTICHAMBER DIAMOND-SM	
nystop.....	71	GEN5.....	MASK.....	133
		OMNIPOD 5 LIBRE2 PLUS G6	option 2.....	64
<b>O</b>		PODS.....	OPTIONS GYNOL II	
OB COMPLETE ONE.....	140	OMNIPOD CLASSIC PDM (GEN	CONTRACEPTIVE.....	160
OB COMPLETE PETITE.....	140	3).....	OPTIUMEZ TEST.....	81
OB COMPLETE PREMIER.....	140	OMNIPOD CLASSIC PODS (GEN	oralone.....	138
OB COMPLETE/DHA.....	140	3).....	ORENITRAM.....	56
ocella.....	62	OMNIPOD DASH INTRO (GEN 4)	ORENITRAM MONTH 1.....	56
octreotide acetate.....	87,88	OMNIPOD DASH PDM (GEN 4)	ORENITRAM MONTH 2.....	56
OCTREOTIDE ACETATE.....	87	OMNIPOD DASH PODS (GEN 4)	ORENITRAM MONTH 3.....	56
ODEFSEY.....	50	ON CALL EXPRESS BLOOD	ORGOVYX.....	43
OFEV.....	154	GLUCOSE.....	ORKAMBI.....	153
OFLOXACIN.....	90	ondansetron.....	orphenadrine citrate er.....	142
ofloxacin.....	145	ondansetron hcl.....	orquidea.....	66
OGSIVEO.....	40	ONE DROP TEST.....	ORSERDU.....	45
olanzapine.....	48,49	one vite ferrous sulfate.....	orsythia.....	62
olanzapine-fluoxetine hcl.....	153	ONE VITE WOMENS PLUS.....	OSCIMIN.....	156
olmesartan medoxomil.....	35	ONENATAL RX.....	oseltamivir phosphate.....	53
olmesartan medoxomil-hctz....	34	ONETOUCH DELICA PLUS	OSPHENA.....	87
olmesartan-amlodipine-hctz....	34	LANCET30G.....	OTEZLA.....	4,5
olopatadine hcl.....	143	ONETOUCH DELICA PLUS	OTEZLA XR.....	5
OLPRUVA (2 GM DOSE).....	88	LANCET33G.....	OTEZLA/OTEZLA XR INITIATION PK.	5
OLPRUVA (3 GM DOSE).....	88	ONETOUCH DELICA SAFETY	OTREXUP.....	3
OLPRUVA (4 GM DOSE).....	88	LANCING.....	oxaprozin.....	4
OLPRUVA (5 GM DOSE).....	88	ONETOUCH ULTRA.....	oxazepam.....	15
OLPRUVA (6 GM DOSE).....	88	ONETOUCH ULTRA BLUE TEST...	oxcarbazepine.....	21
OLPRUVA (6.67 GM DOSE).....	88	ONETOUCH ULTRA TEST.....	OXERVATE.....	146
omega-3-acid ethyl esters.....	32	ONETOUCH ULTRASOFT 2	oxybutynin chloride.....	157
omeprazole.....	157	LANCETS.....	oxybutynin chloride er.....	157
omeprazole magnesium.....	157	ONETOUCH ULTRASOFT	oxycodone hcl.....	10
		LANCETS.....	oxycodone-acetaminophen.....	10

oxymorphone hcl.....	10	PERFECT LANCETS 30G.....	110	PIMOZIDE.....	151
OXYMORPHONE HCL ER.....	10	PERFECT POINT SAFETY LANCETS.....	110	pimtrea.....	58
<b>P</b>		PERFECT POINT SAFETY NEEDLE	127	pindolol.....	54
pacerone.....	15	PERINDOPRIL ERBUMINE.....	33	pioglitazone hcl.....	29
paliperidone er.....	47	perindopril erbumine.....	34	pioglitazone hcl-metformin hcl...	29
pantoprazole sodium.....	157	perio gard.....	138	PIP BLOOD GLUCOSE TEST STRIP..	82
PARADIGM REAL-TIME TRANSMITTER.....	109	PERMETHRIN.....	76	PIP LANCETS 28G.....	110
paricalcitol.....	86	perphenazine.....	48	PIP LANCETS 30G.....	110
paroxetine hcl.....	24	PERPHENAZINE-AMITRIPTYLINE	151	PIP PEN NEEDLES 31G X 5MM...	127
PAROXETINE HCL.....	25	PFIZER COVID-19 VAC-TRIS 5- 11Y.....	159	PIP PEN NEEDLES 32G X 4MM...	127
paroxetine hcl er.....	25	PFIZER COVID-19 VAC-TRIS 6M- 4Y.....	159	PIQRAY (200 MG DAILY DOSE)...	44
PAXLOVID (150/100).....	52	PHARMACIST CHOICE AUTOCODE.....	81	PIQRAY (250 MG DAILY DOSE)...	44
PAXLOVID (300/100 & 150/100)	52	PHARMACIST CHOICE LANCETS	110	PIQRAY (300 MG DAILY DOSE)...	44
PAXLOVID (300/100).....	52	PHARMACIST CHOICE NO CODING.....	81	pirfenidone.....	154
pazopanib hcl.....	41	PHARMACY COUNTER LANCETS	110	pirmella 1/35.....	62
PC LANCETS SUPER THIN 30G..	109	PHEBURANE.....	88	pirmella 7/7/7.....	66
pc pediatric iron drops.....	95	phenazo.....	93	piroxicam.....	4
PC UNIFINE PENTIPS.....	127	PHENAZOPYRIDINE HCL.....	93	pitavastatin calcium.....	32
PEDIARIX.....	155	PHENELZINE SULFATE.....	24	plan b one-step.....	64
peg 3350-kcl-na bicarb-nacl....	97	phenobarbital.....	96	PLEGRIDY.....	150
peg-3350/electrolytes.....	97	phenoxybenzamine hcl.....	34	PLEGRIDY STARTER PACK.....	150
peg-3350/electrolytes/ascorbat	97	phenylephrine hcl.....	144	PNV 27-CA/FE/FA.....	140
peg-kcl-nacl-nasulf-na asc-c....	97	phenytek.....	23	PNV PRENATAL PLUS MULTIVIT+DHA.....	140
PEG-PREP.....	97	phenytoin.....	23	PNV-OMEGA.....	140
PEN NEEDLE/5-BEVEL TIP.....	127	phenytoin infatabs.....	23	PNV-SELECT.....	140
PEN NEEDLES.....	127	phenytoin sodium extended....	23	POCKET CHAMBER.....	133
PEN NEEDLES 5/16".....	127	PHEXX.....	160	POCKET SPACER.....	133
PENBRAYA.....	158	PHEXXI.....	160	POCKETCHEM EZ TEST.....	82
PENICILLIN G POT IN DEXTROSE.....	148	philith.....	62	POLY HUB NEEDLE.....	127
PENICILLIN V POTASSIUM.....	148	PHOSPHA 250 NEUTRAL.....	135	POLY-VI-FLOR.....	139
PENMENVY.....	158	PHOSPHO-TRIN 250 NEUTRAL..	135	POLY-VI-FLOR/IRON.....	138
pentamidine isethionate.....	12	PHOSPHOLINE IODIDE.....	144	polycin.....	144
pentazocine-naloxone hcl.....	11	PHOSPHOROUS.....	135	polymyxin b-trimethoprim.....	144
PENTIPS.....	127	phytonadione.....	161	POMALYST.....	40
PENTIPS GENERIC PEN NEEDLES.....	127	PIFELTRO.....	51	portia-28.....	62
pentoxifylline er.....	94	pilocarpine hcl.....	138,144	posaconazole.....	31
PERFECT LANCETS 28G.....	109			pot & sod cit-cit ac.....	92

POTASSIUM CHLORIDE ER.....	135	PREMPHASE.....	89	PRO VOICE V8/V9 GLUCOSE.....	82
potassium citrate er.....	92	PREMPRO.....	89	probenecid.....	93
POTASSIUM CITRATE-CITRIC		PRENA 1 TRUE.....	141	PROCHAMBER VHC.....	133
ACID.....	93	PRENAISSANCE PLUS.....	142	prochlorperazine.....	48
pramipexole dihydrochloride...	46	PRENATAL.....	140	prochlorperazine maleate.....	48
pramipexole dihydrochloride er	46	PRENATAL 19.....	140	procto-med hc.....	12
prasugrel hcl.....	94	PRENATAL PLUS.....	140	PROCTOFOAM HC.....	12
pravastatin sodium.....	32	PRENATAL PLUS		proctosol hc.....	12
praziquantel.....	12	VITAMIN/MINERAL.....	141	proctozone-hc.....	12
prazosin hcl.....	35	PRENATAL VITAMIN PLUS LOW		PRODIGY INSULIN SYRINGE.....	127
PRECISION SURE-DOSE		IRON.....	141	PRODIGY LANCETS 28G.....	110
SYRINGE.....	127	PRENATAL-U.....	141	PRODIGY NO CODING BLOOD	
PRECISION THINS GP LANCETS.	110	PRENATE.....	142	GLUC.....	82
PRECISION XTRA BLOOD		PRENATE AM.....	142	PRODIGY SAFETY LANCETS 26G..	110
GLUCOSE.....	82	PRENATE ENHANCE.....	142	PRODIGY TWIST TOP LANCETS	
PRECISION XTRA KETONE.....	82	PRENATE PIXIE.....	142	28G.....	110
PRECISION XTRA-		PRENATE RESTORE.....	142	progesterone.....	149
GLUCOSE/KETONE.....	100	PRENATRIX.....	141	PROGESTERONE MICRONIZED...	149
prednisolone.....	68	PRENATRYL.....	141	promethazine hcl.....	31
prednisolone acetate.....	147	PRENATVITE COMPLETE.....	141	PROMETHAZINE VC.....	68
prednisolone sodium phosphate	68	PRENATVITE PLUS.....	141	promethazine-codeine.....	69
PREDNISOLONE SODIUM		PREPLUS.....	141	promethazine-dm.....	69
PHOSPHATE.....	147	prevalite.....	32	PROMETHAZINE-PHENYLEPHRINE	68
PREDNISON.....	68	PREVENT DROPSAFE PEN		promethegan.....	31
PREFERRED PLUS INSULIN		NEEDLES.....	127	propafenone hcl.....	15
SYRINGE.....	127	PREVENT SAFETY PEN NEEDLES.	127	propafenone hcl er.....	15
PREFERRED PLUS LANCETS		previfem.....	62	proparacaine hcl.....	146
COLORED.....	110	PREVNAR 20.....	158	propranolol hcl.....	54
PREFERRED PLUS LANCETS		PREVYMIS.....	52	propranolol hcl er.....	54
THIN.....	110	PREZCOBIX.....	50	propylthiouracil.....	154
PREFERRED PLUS UNIFINE		PREZISTA.....	51	PROQUAD.....	158
PENTIPS.....	127	primaquine phosphate.....	36	PROVIDA OB.....	141
pregabalin.....	21	primidone.....	21	pseudoeph-bromphen-dm.....	69
PREGNYL.....	86	PRIORIX.....	158	PSS SELECT GP LANCETS.....	110
PREMARIN.....	90,160	PRO COMFORT INSULIN		PSS SELECT SAFETY LANCETS....	110
PREMESISRX.....	142	SYRINGE.....	127	PTS PANELS GLUCOSE TEST.....	82
PREMIUM BLOOD GLUCOSE		PRO COMFORT LANCETS 30G..	110	PTS PANELSEGLU TEST.....	82
TEST.....	82	PRO COMFORT LANCETS 31G..	110	PULMICORT FLEXHALER.....	17,18
PREMIUM CONDOMS		PRO COMFORT PEN NEEDLES..	127	PULMOSAL.....	68
LUBRICATED.....	99	PRO COMFORT SAFETY LANCETS		PULMOZYME.....	154
PREMIUM LIDOCAINE.....	75	30G.....	110	PURE COMFORT LANCETS 30G..	110

PURE COMFORT PEN NEEDLE . . . . .	127	QC UNILET LANCETS MICRO	RA PEN NEEDLES . . . . .	128
PURE COMFORT SAFETY LANCET		THIN . . . . .	rabeprazole sodium . . . . .	157
30G . . . . .	110	QTERN . . . . .	raloxifene hcl . . . . .	87
PURE COMFORT SAFETY PEN		quetiapine fumarate . . . . .	ramelteon . . . . .	96
NEEDLE . . . . .	127	quetiapine fumarate er . . . . .	ramipril . . . . .	34
px aspirin . . . . .	7	QUFLORA FE PEDIATRIC . . . . .	ranolazine er . . . . .	13
px enteric aspirin . . . . .	7	QUFLORA PEDIATRIC . . . . .	rasagiline mesylate . . . . .	45
PX EXTRA SHORT PEN NEEDLES	127	QUICK TOUCH BLOOD GLUCOSE	RASUVO . . . . .	3
px folic acid . . . . .	95	TEST . . . . .	RAYA SURE PEN NEEDLE . . . . .	128
PX INSULIN SYRINGE . . . . .	127	QUICK TOUCH INSULIN PEN	react . . . . .	64
PX LANCETS MICROTHIN 33G . . . . .	110	NEEDLE . . . . .	READYLANCE SAFETY LANCETS . . . . .	111
PX LANCETS ULTRA THIN . . . . .	110	QUICKTEK TEST . . . . .	REALITY INSULIN SYRINGE . . . . .	128
PX LANCETS ULTRA THIN 28G . . . . .	110	quinapril hcl . . . . .	REALITY LANCETS . . . . .	111
PX MINI PEN NEEDLES . . . . .	128	quinapril-hydrochlorothiazide . . . . .	REALITY LATEX CONDOMS . . . . .	99
PX PEN NEEDLE . . . . .	128	quinidine gluconate er . . . . .	REALITY LATEX/ULTRA TEXTURED . . . . .	99
PX SHORTLENGTH PEN		QUINIDINE SULFATE . . . . .	REALITY LATEX/ULTRA THIN . . . . .	99
NEEDLES . . . . .	128	quinine sulfate . . . . .	REALITY TRIGGER LANCETS . . . . .	111
px stop smoking aid . . . . .	153	QUINTET AC BLOOD GLUCOSE	reclipsen . . . . .	62
pyrazinamide . . . . .	36	TEST . . . . .	REFUAH PLUS BLOOD GLUCOSE	
PYRIDOSTIGMINE BROMIDE . . . . .	36	QUINTET BLOOD GLUCOSE TEST . . . . .	TEST . . . . .	82
pyridostigmine bromide . . . . .	36	QVAR REDHALER . . . . .	RELEVIA . . . . .	141
pyridostigmine bromide er . . . . .	36	<b>R</b>	RELION BLOOD GLUCOSE TEST . . . . .	82
pyrimethamine . . . . .	36	ra aspirin . . . . .	RELION CONFIRM/MICRO TEST . . . . .	82
PYZCHIVA . . . . .	72	ra aspirin adult low dose . . . . .	RELION GLUCOSE TEST STRIPS . . . . .	82
<b>Q</b>		ra aspirin adult low strength . . . . .	RELION INSULIN SYRINGE . . . . .	128
QBREXZA . . . . .	75	ra aspirin childrens . . . . .	RELION LANCET DEVICES 30G . . . . .	111
qc aspirin . . . . .	7	ra aspirin ec . . . . .	RELION LANCETS . . . . .	111
qc aspirin low dose . . . . .	7	ra aspirin ec adult low st . . . . .	RELION LANCETS MICRO-THIN	
qc childrens aspirin . . . . .	7	RA E-ZJECT LANCETS 28G . . . . .	33G . . . . .	111
qc enteric aspirin . . . . .	7	RA E-ZJECT LANCETS THIN 26G . . . . .	RELION LANCETS THIN 26G . . . . .	111
qc folic acid . . . . .	95	RA E-ZJECT LANCETS THIN 28G . . . . .	RELION LANCETS ULTRA-THIN	
QC LANCETS SUPER THIN 30G . . . . .	110	RA E-ZJECT LANCETS ULTRA	30G . . . . .	111
QC LANCETS ULTRA THIN . . . . .	110	THIN . . . . .	RELION MINI PEN NEEDLES . . . . .	128
qc nicotine transdermal		ra folic acid . . . . .	RELION PEN NEEDLES . . . . .	128
system . . . . .	153	RA INSULIN SYRINGE . . . . .	RELION PREMIER TEST . . . . .	82
qc omeprazole magnesium . . . . .	157	ra mini nicotine . . . . .	RELION PRIME TEST . . . . .	82
QC PEN NEEDLES . . . . .	128	ra nicotine . . . . .	RELION SHORT PEN NEEDLES . . . . .	128
QC UNIFINE PENTIPS . . . . .	128	ra nicotine gum . . . . .	RELION TRUE METRIX TEST STRIPS	82
QC UNILET LANCETS 28G . . . . .	110	ra nicotine polacrilex . . . . .	RELION ULTIMA TEST . . . . .	82
		ra pain relief aspirin . . . . .	RELION ULTRA THIN LANCETS	
			30G . . . . .	111

RELION ULTRA THIN PLUS	rivelsa	65	sb aspirin ec	8	
LANCETS	111	rizatriptan benzoate	134	sb childrens aspirin	8
RENACIDIN	93	roflumilast	17	SB INSULIN SYRINGE	128
RENTHYROID	155	ropinirole hcl	46	SB LANCETS THIN	111
repaglinide	28	ropinirole hcl er	46	SB LANCETS ULTRA THIN	111
REPATHA	33	rosuvastatin calcium	33	sb low dose asa ec	8
REPATHA PUSHTRONEX SYSTEM	33	rosyrah	65	SCEMBLIX	38,39
REPATHA SURECLICK	33	ROTATEQ	159	scopolamine	30
REXALL BLOOD GLUCOSE TEST	82	roweepra	21	SE-NATAL 19	141
REXALL LANCETS ULTRA THIN		ROZLYTREK	42	SECURESAFE HYPODERMIC	
30G	111	rufinamide	21	NEEDLE	128
REYATAZ	51	RUKOBIA	50	SECURESAFE INSULIN SYRINGE	128
REYVOW	134			SECURESAFE SAFETY PEN	
REZDIFFRA	90	<b>S</b>		NEEDLES	128
REZLIDHIA	43	sacubitril-valsartan	56	SECURESAFE SYRINGE/NEEDLE	128
REZUROCK	137	SAFE-T-LANCE	111	SELARSDI	72
RIBAVIRIN	53	SAFE-T-LANCE PLUS	111	SELECT-OB	141
rifabutin	36	SAFETY INSULIN SYRINGES	128	SELECT-OB+DHA	142
rifampin	36	SAFETY LANCET 30G/PRESSURE		selegiline hcl	45
RIGHTEST GL300 LANCETS	111	ACT	111	selenium sulfide	72
RIGHTEST GS100 BLOOD		SAFETY LANCETS	111	SELENIUM SULFIDE	72
GLUCOSE	82	SAFETY LANCETS 21G	111	SENSILANCE SAFETY LANCETS	
RIGHTEST GS300 BLOOD		SAFETY LANCETS 23G	111	21G	111
GLUCOSE	82	SAFETY LANCETS 28G	111	SENSILANCE SAFETY LANCETS	
RIGHTEST GS550 BLOOD		SAFETY PEN NEEDLES	128	26G	112
GLUCOSE	82	SALICYLIC ACID	75	SENSILANCE SAFETY LANCETS	
RIGHTEST GT333 BLOOD		SALINE FLUSH	136	28G	112
GLUCOSE	82	salsalate	8	SEREVENT DISKUS	16
RIGHTEST GT333 GLUCOSE TEST	82	SANDOSTATIN	88	sertraline hcl	25
riluzole	143	SANTYL	74	setlakin	65
RIMANTADINE HCL	53	sapropterin dihydrochloride	87	sevelamer carbonate	92
RINVOQ	3	SAPS HEALTH PLUS LANCETS	111	sevelamer hcl	92
RINVOQ LQ	3	SAPS HEALTH TWIST TOP		SF	138
risedronate sodium	84	LANCETS	111	sharobel	66
risperidone	47	SAPS TWIST TOP LANCETS	111	shewise	64
RISPERIDONE	47	SAPSCARE TWIST TOP LANCETS	111	SHINGRIX	159
risperidone microspheres er	47	SAVELLA	149	SHOPKO ON-THE-GO LANCETS	
RITEFLO	133	SAVELLA TITRATION PACK	149	30G	112
ritonavir	51	saxagliptin hcl	26	SHOPKO UNIFINE PENTIPS	128
rivastigmine	149	saxagliptin-metformin er	26	SHOPKO UNIFINE PENTIPS PLUS	128
rivastigmine tartrate	149	sb aspirin	8	SHOPKO UNILET LANCETS 28G	112

SHOPKO UNILET LANCETS 30G	112	SODIUM CITRATE-CITRIC ACID	93	SULFACETAMIDE-
sildenafil citrate	57	SODIUM FLUORIDE	134,135,138	PREDNISOLONE
silodosin	92	SODIUM FLUORIDE 5000 PPM	138	SULFACETAMIDE-SULFUR IN UREA
silver sulfadiazine	73	sodium polystyrene sulfonate	137	sulfadiazine
SIMBRINZA	143	sodium sulfacetamide wash	72	sulfamethoxazole-trimethoprim
simliya	58	SOFOSBUVIR-VELPATASVIR	53	SULFAMEZ WASH
simpesse	65	solifenacin succinate	157	sulfasalazine
simvastatin	33	SOLQUA	28	sulfatrim pediatric
SINGLE-LET	112	SOLU-CORTEF	68	sulindac
sirolimus	137	SOLUS V2 LANCETS 28G	112	sumatriptan
SKYRIZI	72,91	SOLUS V2 TEST	83	sumatriptan succinate
SKYRIZI PEN	72	SOLUS V2 TWIST LANCETS 30G	112	SUMATRIPTAN SUCCINATE
SLYND	66	sorafenib tosylate	41	REFILL
sm aspirin	8	sotalol hcl	54	sunitinib malate
sm aspirin adult low strength	8	sotalol hcl (af)	54	SUNLENCA
sm aspirin ec	8	SOTYLIZE	54	SUPER THIN LANCETS
sm aspirin ec low strength	8	SPIKEVAX	159	SUPREME TEST
sm aspirin low dose	8	SPIKEVAX 6M-11Y	159	SURE COMFORT INSULIN
sm childrens aspirin	8	SPIRIVA HANDIHALER	17	SYRINGE
sm folic acid	95	SPIRIVA RESPIMAT	17	SURE COMFORT LANCETS 18G
SM LANCETS 33G	112	spironolactone	84	SURE COMFORT LANCETS 21G
sm nicotine	153	spironolactone-hctz	83	SURE COMFORT LANCETS 23G
sm nicotine polacrilex	153	sprintec 28	63	SURE COMFORT LANCETS 28G
SMART SENSE COLOR LANCETS		sps (sodium polystyrene sulf)	137	SURE COMFORT LANCETS 30G
33G	112	sronyx	63	SURE COMFORT PEN NEEDLES
SMART SENSE PREMIUM TEST	82	ssd	73	SURELITE LANCETS
SMART SENSE STANDARD		SSS 10-5	69	syeda
LANCETS	112	st joseph aspirin	8	SYMBICORT
SMART SENSE SUPER THIN		st joseph low dose	8	SYM TUZA
LANCETS	112	STERILANCE TL	112	SYRINGE
SMART SENSE THIN LANCETS		STIOLTO RESPIMAT	16	SYRINGE 2-3 ML
26G	112	STIVARGA	42	SYRINGE 30-35 ML
SMART SENSE VALUE TEST	83	STRENSIQ	86	SYRINGE 50-60 ML
SMARTEST BLOOD GLUCOSE		STRIBILD	50	SYRINGE DISPOSABLE
TEST	83	STRIVERDI RESPIMAT	16	SYRINGE ECCENTRIC TIP
SMARTEST LANCETS 28G	112	SUBLOCADE	11	SYRINGE LUER LOCK
sod citrate-citric acid	93	sucralfate	156	SYRINGE LUER SLIP
SODIUM CHLORIDE	68,93	sulfacetamide sodium	72,147	SYRINGE/HYPODERMIC SAFETY
sodium chloride	136	sulfacetamide sodium (acne)	69	
sodium chloride (pf)	136	SULFACETAMIDE SODIUM-		<b>T</b>
sodium chloride flush	136	SULFUR	69	TABLOID

tacrolimus.....	75,137	TESTOSTERONE CYPIONATE.....	11	TODAYS HEALTH THIN LANCETS	
tadalafil.....	57	TESTOSTERONE ENANTHATE.....	11	28G.....	113
tadalafil (pah).....	57	tetrabenazine.....	149	TODAYS HEALTH THIN LANCETS	
TADLIQ.....	57	TETRACAINE HCL.....	146	30G.....	113
TAFINLAR.....	39	tetracycline hcl.....	154	tolterodine tartrate.....	157
tafluprost (pf).....	147	TEZSPIRE.....	18	tolterodine tartrate er.....	157
TAGRISSO.....	39	TGT BLOOD GLUCOSE TEST.....	83	tolvaptan.....	87
take action.....	64	TGT LANCET MICRO THIN 33G..	112	tolvaptan (hyponatremia).....	87
TALZENNA.....	44	TGT LANCET THIN 26G.....	112	TOOMEY SYRINGE.....	129
tamoxifen citrate.....	37	TGT LANCET ULTRA THIN 30G..	113	TOPAMAX SPRINKLE.....	22
tamsulosin hcl.....	92	THALOMID.....	136	TOPCARE CLICKFINE PEN	
tarina 24 fe.....	63	theophylline er.....	18	NEEDLES.....	129
tarina fe 1/20.....	63	THINLETS GP LANCETS.....	113	TOPCARE LANCETS MICRO-THIN	
tarina fe 1/20 eq.....	63	thioridazine hcl.....	48	33G.....	113
tasimelteon.....	96	thiothixene.....	49	TOPCARE ULTRA COMFORT INS	
taysofy.....	63	thrive.....	153	SYR.....	129
tazarotene.....	71	THRIVITE RX.....	141	topiramate.....	22
taztia xt.....	55	THYROID.....	155	toremifene citrate.....	37
TAZVERIK.....	41	tiadylt er.....	55	torpenz.....	41
TECHLITE AST LANCETS.....	112	TIAGABINE HCL.....	22	torsemide.....	84
TECHLITE INSULIN SYRINGE.....	129	tiagabine hcl.....	23	TOUJEO MAX SOLOSTAR.....	28
TECHLITE LANCETS.....	112	ticagrelor.....	94	TOUJEO SOLOSTAR.....	28
TECHLITE LANCETS 26G.....	112	tilia fe.....	67	tovet.....	74
TECHLITE LANCETS 30G.....	112	timolol maleate.....	54,143	tramadol hcl.....	10
TECHLITE PEN NEEDLES.....	129	timolol maleate (once-daily)...	144	TRAMADOL HCL (ER BIPHASIC)...	10
TECHLITE PLUS PEN NEEDLES..	129	timolol maleate ocudose.....	144	tramadol hcl er.....	10
TEGRETOL-XR.....	21,22	timolol maleate pf.....	144	tramadol-acetaminophen.....	11
telmisartan.....	35	tinidazole.....	12	trandolapril.....	34
TELMISARTAN-AMLODIPINE.....	34	tiopronin.....	93	TRANDOLAPRIL-VERAPAMIL HCL	
telmisartan-hctz.....	34	TIVICAY.....	50	ER.....	33
temazepam.....	96	tizanidine hcl.....	142	tranexamic acid.....	96
temozolomide.....	43	TOBRAMYCIN.....	2	tranylcypromine sulfate.....	24
tenofovir disoproxil fumarate..	52	tobramycin.....	145	TRAVEL LANCETS.....	113
TEPMETKO.....	41	tobramycin-dexamethasone...	146	TRAVEL LANCETS ADVANCED	
terazosin hcl.....	35	TODAY SPONGE.....	160	28G.....	113
terbinafine hcl.....	30	TODAYS HEALTH MINI PEN		travoprost (bak free).....	147
terbutaline sulfate.....	16	NEEDLES.....	129	trazodone hcl.....	25
terconazole.....	160	TODAYS HEALTH PEN NEEDLES..	129	TRELEGY ELLIPTA.....	16
teriflunomide.....	149	TODAYS HEALTH SHORT PEN		tretinoin.....	44,70
testosterone.....	11	NEEDLE.....	129	tretinoin microsphere.....	70
TESTOSTERONE.....	11			TRETINOIN MICROSPHERE PUMP..	70

tri femynor	67	TROJAN MAGNUM	99	TRUETEST TEST	83
tri-estarylla	67	TROJAN ULTRA RIBBED		TRUETRACK TEST	83
tri-legest fe	67	LUBRICATED	99	TRULICITY	28
tri-linyah	67	TROJAN ULTRA THIN	99	TRUQAP	37
tri-lo-estarylla	67	TROJAN ULTRA		TRUSTEX COLOR CONDOMS +	
tri-lo-marzia	67	THIN/SPERMICIDAL	99	LUBE	99
tri-lo-mili	67	TROJAN-ENZ LUBRICATED	99	TRUSTEX LUB/RIBBED/STUDED	99
tri-lo-sprintec	67	TROJAN-ENZ/SPERMICIDAL	99	TRUSTEX LUB/SPERMICIDE EX ST	99
tri-mili	67	tropium chloride	157	TRUSTEX LUB/SPERMICIDE XL	99
tri-nymyo	67	tropium chloride er	157	TRUSTEX LUBRICATED	99
tri-sprintec	67	TRUE COMFORT INSULIN		TRUSTEX LUBRICATED EX LARGE	99
TRI-VI-FLOR	139	SYRINGE	129	TRUSTEX LUBRICATED EXTRA ST	99
TRI-VI-FLORO	139	TRUE COMFORT PEN NEEDLES	129	TRUSTEX	
TRI-VITAMIN WITH FLUORIDE	139	TRUE COMFORT PRO INSULIN		LUBRICATED/SPERMICIDE	99
TRI-VITE/FLUORIDE	139	SYR	129	TRUSTEX NATURAL CONDOMS +	
tri-vylibra	67	TRUE COMFORT PRO PEN		LUBE	99
tri-vylibra lo	67	NEEDLES	129	TRUSTEX NON-LUBRICATED	99
triamcinolone acetonide	74,138	TRUE COMFORT SAFETY		TRUSTEX RIA LUB/SPERMICIDE	100
TRIAMCINOLONE ACETONIDE	74	LANCETS	113	TRUSTEX RIA LUBRICATED	100
triamterene	84	TRUE COMFORT SAFETY PEN		TRUSTEX RIA NON-LUBRICATED	100
triamterene-hctz	83	NEEDLE	130	TRUSTEX-NONOXYNOL-	
triazolam	96	TRUE COMFORT TWIST TOP		9/RIB/STUD	100
TRICARE	141	LANCETS	113	tulana	66
TRICITRATES	93	TRUE COVER	99	turqoz	63
triderm	74	TRUE FOCUS BLOOD GLUCOSE		TWIRLA	63
trientine hcl	136	STRIP	83	TWIST TOP LANCETS 30G	113
trifluoperazine hcl	48	true folic acid	95	TYBLUME	63
TRIFLURIDINE	145	TRUE METRIX BLOOD GLUCOSE		TYBOST	52
trihexyphenidyl hcl	45	TEST	83	tydemy	63
TRIHEXYPHENIDYL HCL	45	TRUE METRIX PRO BLOOD		TYENNE	3
trimethobenzamide hcl	30	GLUCOSE	83	TYMLOS	86
trimethoprim	12	TRUEPLUS 5-BEVEL PEN		TYRVAYA	144
TRINATAL RX 1	141	NEEDLES	130	TYVASO	56
TRINATE	141	TRUEPLUS INSULIN SYRINGE	130	TYVASO DPI INSTITUTIONAL KIT	56
TRISTART DHA	142	TRUEPLUS LANCETS 26G	113	TYVASO DPI MAINTENANCE KIT	56
TRIUMEQ	50	TRUEPLUS LANCETS 28G	113	TYVASO DPI TITRATION KIT	56
TRIUMEQ PD	50	TRUEPLUS LANCETS 30G	113	TYVASO REFILL	57
trivora (28)	67	TRUEPLUS LANCETS 33G	113	TYVASO STARTER	57
TRIZIVIR	50	TRUEPLUS PEN NEEDLES	130		
TROJAN BARESKIN	99	TRUEPLUS SAFETY LANCETS		<b>U</b>	
TROJAN ENZ	99	28G	113	UBRELVY	134

ULTICARE INSULIN SAFETY SYR	130	ULTRACARE INSULIN SYRINGE	130	UNISTIK TOUCH SAFETY LANC	
ULTICARE INSULIN SYR 1/2		ULTRACARE PEN NEEDLES	130	21G	114
UNIT	130	UNIFINE OTC PEN NEEDLES	131	UNISTIK TOUCH SAFETY LANC	
ULTICARE INSULIN SYRINGE	130	UNIFINE PEN NEEDLES	131	23G	114
ULTICARE MICRO PEN		UNIFINE PENTIPS	131	UNISTIK TOUCH SAFETY LANC	
NEEDLES	130	UNIFINE PENTIPS PLUS	131	28G	114
ULTICARE MINI PEN NEEDLES	130	UNIFINE PROTECT PEN NEEDLE	131	UNISTIK TOUCH SAFETY LANC	
ULTICARE PEN NEEDLES	130	UNIFINE SAFECONTROL PEN		30G	115
ULTICARE SHORT PEN NEEDLES	130	NEEDLE	131	UNISTRIP1 GENERIC	83
ULTICARE SYRINGE	130	UNIFINE ULTRA PEN NEEDLE	131	unithroid	155
ULTICARE TUBERCULIN SAFETY		UNILET COMFORTOUCH		UNIVERSAL 1 LANCETS THIN 26G	115
SYR	130	LANCET	113	UNIVERSAL 1 LANCETS THIN 33G	115
ULTIGUARD SAFEPACK PEN		UNILET EXCELITE	113	UNIVERSAL 1 LANCETS ULTRA	
NEEDLE	130	UNILET EXCELITE II	113	THIN	115
ULTIGUARD SAFEPACK		UNILET G.P. LANCET	113	UPNEEQ	147
SYR/NEEDLE	130	UNILET G.P. SUPERLITE LANCET	113	ursodiol	90
ULTILET CLASSIC LANCETS	113	UNILET GP 28 ULTRA THIN	114	UZEDY	47
ULTILET LANCETS	113	UNILET LANCET	114		
ULTILET PEN NEEDLE	130	UNILET MICRO-THIN 33G	114	<b>V</b>	
ULTILET SAFETY LANCETS	113	UNILET SUPER-THIN 30G	114	valacyclovir hcl	53
ULTILET SAFETY LANCETS 23G	113	UNILET SUPERLITE LANCET	114	valganciclovir hcl	52
ULTRA COMFORT INSULIN		UNILET ULTRA-THIN 28G	114	valproic acid	23,24
SYRINGE	130	UNISTIK 1	114	valsartan	35
ULTRA FLO INSULIN PEN		UNISTIK 2	114	valsartan-hydrochlorothiazide	34
NEEDLES	130	UNISTIK 2 COMFORT	114	valtya 1/35	63
ULTRA FLO INSULIN SYR 1/2		UNISTIK 2 EXTRA	114	valtya 1/50	63
UNIT	130	UNISTIK 2 NEONATAL	114	VALUE HEALTH INSULIN SYRINGE	131
ULTRA FLO INSULIN SYRINGE	130	UNISTIK 2 NORMAL	114	VALUE PLUS LANCET STANDARD	
ULTRA THIN LANCETS 31G	113	UNISTIK 2 SUPER	114	21G	115
ULTRA THIN PEN NEEDLES	130	UNISTIK 3	114	VALUE PLUS LANCETS SUPER	
ULTRA-CARE LANCETS 30G	113	UNISTIK 3 COMFORT	114	THIN	115
ULTRA-THIN II AUTO LANCET	113	UNISTIK 3 EXTRA	114	VALUE PLUS LANCETS THIN 26G	115
ULTRA-THIN II INS SYR SHORT	130	UNISTIK 3 GENTLE	114	VALUMARK LANCET SUPER THIN	
ULTRA-THIN II INSULIN		UNISTIK 3 NEONATAL	114	30G	115
SYRINGE	130	UNISTIK 3 NORMAL	114	VALUMARK LANCET ULTRA THIN	
ULTRA-THIN II LANCETS	113	UNISTIK CZT COMFORT	114	28G	115
ULTRA-THIN II MINI PEN		UNISTIK CZT NORMAL	114	VALUMARK PEN NEEDLES	131
NEEDLE	130	UNISTIK NORMAL	114	vancomycin hcl	13
ULTRA-THIN II PEN NEEDLE		UNISTIK PRO SAFETY LANCET	114	VANFLYTA	42
SHORT	130	UNISTIK SAFETY LANCETS 28G	114	VANISHPOINT INSULIN SYRINGE	131
ULTRA-THIN II PEN NEEDLES	130	UNISTIK SAFETY LANCETS 30G	114	VANISHPOINT SAFETY SYRINGE	131

VANISHPOINT SYRINGE . . . . .	131	VERISAFE SAFETY STERILE		VORTEX VALVED HOLDING	
VANISHPOINT TUBERCULIN		NEEDLE . . . . .	131	CHAMBER . . . . .	133
SYRINGE . . . . .	131	VERKAZIA . . . . .	145	VOSEVI . . . . .	53
VAQTA . . . . .	159	VERZENIO . . . . .	43	VOWST . . . . .	91
varenicline tartrate . . . . .	153	vestura . . . . .	63	VP INSULIN SYRINGE . . . . .	131
varenicline tartrate (starter) . . . . .	153	VIDA MIA UNIFINE PENTIPS . . . . .	131	VTAMA . . . . .	72
varenicline tartrate(continue) . . . . .	153	VIDA MIA UNILET LANCETS 28G . . . . .	115	VUMERITY . . . . .	151
VARIVAX . . . . .	159	VIDA MIA UNILET LANCETS 30G . . . . .	115	vyfemla . . . . .	63
VAXELIS . . . . .	155	vienva . . . . .	63	vylibra . . . . .	63
VAXNEUVANCE . . . . .	158	vilazodone hcl . . . . .	25		
VCF VAGINAL CONTRACEPTIVE	160	VINATE II . . . . .	141	<b>W</b>	
VELIVET . . . . .	67	viorele . . . . .	58	WALGREENS ADV TRAVEL	
VELTASSA . . . . .	137	VIRACEPT . . . . .	51	LANCETS . . . . .	115
VENCLEXTA . . . . .	38	VIREAD . . . . .	52	WALGREENS LANCETS . . . . .	115
VENCLEXTA STARTING PACK . . . . .	38	virt-phos 250 neutral . . . . .	135	WALGREENS LANCETS MICRO	
venlafaxine hcl . . . . .	25	VISTOGARD . . . . .	29	THIN . . . . .	115
venlafaxine hcl er . . . . .	25	VITAFOL FE+ . . . . .	142	WALGREENS LANCETS SUPER	
VENTOLIN HFA . . . . .	16	VITAFOL GUMMIES . . . . .	141	THIN . . . . .	115
verapamil hcl . . . . .	55	VITAFOL-OB . . . . .	141	WALGREENS THIN LANCETS . . . . .	115
verapamil hcl er . . . . .	55	VITAFOL-OB+DHA . . . . .	142	WALGREENS ULTRA THIN	
VERASENS BLOOD GLUCOSE		VITAMEDMD ONE		LANCETS . . . . .	115
TEST . . . . .	83	RX/QUATREFOLIC . . . . .	142	warfarin sodium . . . . .	18
VERIFINE INSULIN PEN NEEDLE	131	vitamin d (ergocalciferol) . . . . .	161	WEGMANS UNIFINE PENTIPS	
VERIFINE INSULIN SYRINGE . . . . .	131	vitamin k1 . . . . .	161	PLUS . . . . .	131
VERIFINE PLUS PEN NEEDLE . . . . .	131	VITATHELY WITH GINGER . . . . .	141	wera . . . . .	63
VERIFINE SAFE LANCET MINI		VITATRUE . . . . .	142	WES-PHOS 250 NEUTRAL . . . . .	135
21G . . . . .	115	VIVAGUARD INO TEST STRIPS . . . . .	83	WESNATAL DHA COMPLETE . . . . .	141
VERIFINE SAFE LANCET MINI		VIVAGUARD LANCETS . . . . .	115	WESTAB PLUS . . . . .	141
23G . . . . .	115	VIVAGUARD LANCETS 30G . . . . .	115	WESTGEL DHA . . . . .	142
VERIFINE SAFE LANCET MINI		VIVAGUARD SAFETY LANCETS		WIDE-SEAL DIAPHRAGM 60 . . . . .	100
28G . . . . .	115	28G . . . . .	115	WIDE-SEAL DIAPHRAGM 65 . . . . .	100
VERIFINE SAFE LANCET MINI		volnea . . . . .	58	WIDE-SEAL DIAPHRAGM 70 . . . . .	100
30G . . . . .	115	VORANIGO . . . . .	43	WIDE-SEAL DIAPHRAGM 75 . . . . .	100
VERIFINE UNIVERSAL LANCETS		voriconazole . . . . .	31	WIDE-SEAL DIAPHRAGM 80 . . . . .	100
28G . . . . .	115	VORTEX HOLD		WIDE-SEAL DIAPHRAGM 85 . . . . .	100
VERIFINE UNIVERSAL LANCETS		CHMBR/MASK/CHILD . . . . .	133	WIDE-SEAL DIAPHRAGM 90 . . . . .	100
30G . . . . .	115	VORTEX HOLD		WIDE-SEAL DIAPHRAGM 95 . . . . .	100
VERIFINE UNIVERSAL LANCETS		CHMBR/MASK/TODDLER . . . . .	133	WINREVAIR . . . . .	57
33G . . . . .	115	VORTEX VALVE CHAMBER-PEDI		wixela inhub . . . . .	16
VERISAFE SAFE STERILE		MASK . . . . .	133	wymzya fe . . . . .	63
SYRINGE . . . . .	131				

<b>X</b>	ZOLADEX.....	44
	ZOLINZA.....	40
XALKORI.....	ZOLMITRIPTAN.....	134
xarah fe.....	zolmitriptan.....	134
XARELTO.....	zolpidem tartrate.....	96
XARELTO STARTER PACK.....	zolpidem tartrate er.....	96
XCOPRI.....	ZOMACTON.....	85
XCOPRI (250 MG DAILY DOSE) ..	ZOMACTON (FOR ZOMA-JET 10) ..	85
XCOPRI (350 MG DAILY DOSE) ..	zonisamide.....	22
xelria fe.....	zovia 1/35 (28).....	63
XERAC AC.....	zumandimine.....	63
XHANCE.....	ZYDELIG.....	44
XIFAXAN.....	ZYPREXA RELPREVV.....	49
XIGDUO XR.....		
XOLAIR.....		
XPHOZAH.....		
XTANDI.....		
xulane.....		

<b>Y</b>		
YALE DISP NEEDLES.....		131
yargesa.....		94
yl folic acid.....		95
yuvafem.....		161

<b>Z</b>		
zafemy.....		63
zaleplon.....		96
ZELBORAF.....		39
zelvysia.....		87
zenatane.....		70
ZENPEP.....		83
ZEPOSIA.....		153
ZEPOSIA 7-DAY STARTER PACK.....		153
ZEPOSIA STARTER KIT.....		153
ZEV RX INSULIN SYRINGE.....		131
ZEV RX PEN NEEDLES.....		131
ZEV RX TWIST TOP LANCETS		
30G.....		115
zidovudine.....		52
ziprasidone hcl.....		46