

This formulary details coverage for medications filled through the pharmacy benefit portion of your plan. For medications administered by a health care professional, please refer to your medical benefit for coverage details or call Member Services for assistance at (855) 624-6463 M-F 8:00 am – 5:00 pm.

****To Search for your medication press Ctrl + F and type in your medication in the search box. If the search does not automatically advance, select the previous or next arrows.**

List of Abbreviations

ACA (Affordable Care Act): This designation reference preventive medications on all plans that have no cost-share when ACA conditions are met and when the medication is filled with a prescription at a participating pharmacy.

CISP: This designation is only applicable for plans that include the Chronic Illness Support Program (CISP) benefit. Enhanced coverage is limited to \$0 cost-share for Tier 1 medications, and reduced cost shares on select Tier 2 and Tier 3 medications according to your plan design without having to meet deductibles first. Reduced cost-share is only available through Express Scripts Home Delivery (mail). For non-CISP eligible plans, please refer to the numeric listing in the Drug Tier column.

CISP-1: This designation is only applicable for plans that include the Chronic Illness Support Program (CISP) benefit. The CISP-1 designation indicates the cost-share for the medication/item is \$0 through Express Scripts Home Delivery (mail).

DAW-9: Certain generic medications will be substituted with the brand name equivalent at the generic cost-share. The inclusion of the brand name product in this program is subject to change without notice.

HSA+: This designation is only applicable for HSA Plus plans, which are Health Savings Account compatible and have Plus in the name (HSA Plus). For drugs with this designation, the deductible is waived and the Member pays the applicable drug Tier cost-share.

INS: This designation indicates the cost-share for this medication will be no more than \$35 for up to a 30-day supply.

MSP (Mandatory Specialty Pharmacy): These drugs must be obtained directly through our exclusive mandatory pharmacy, Accredo (mail order), or the drug is not covered. We may require that you try certain drugs to treat your medical condition before you are provided coverage. These drugs are limited to a 30-day supply.

OTC: This drug is an over-the-counter product that is covered with a prescription from the prescriber and when filled at an in-network pharmacy.

PA (Prior Approval): The Plan requires you or your Provider to get Prior Approval for certain drugs. This means that you will need to get approval before you fill your prescriptions. If you do not get approval, we may not cover the drug. We may require that you try certain drugs to treat your medical condition before you are provided coverage.

QL (Quantity Limit): A quantity limit (QL) defines how much of a particular drug you may get during a specific time period (days supply limit) or the maximum days supply you may get at once (quantity per days supply limit).

SP (Specialty Pharmacy): This means the out-of-pocket cost is at the 'specialty' cost-share. The Plan offers one courtesy fill at a retail pharmacy as a covered benefit. Then, this drug must be obtained directly through the exclusive specialty pharmacy, Accredo (mail), or you pay 100% of the retail cost. We may require that you try certain drugs to treat your medical condition before you are provided coverage.

ST (Step Therapy): In some cases, the Plan requires you to first try certain drugs to treat your medical condition within a certain look-back period before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, we may not cover Drug B unless you try Drug A first. If Drug A does not work for you, the Plan may cover Drug B. *Note: The Prior Approval process may be used to facilitate this process.

Effective July 1, 2026

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Drug Name	Drug Tier	Requirements / Limits
ANTI - INFECTIVES		
ANTIFUNGAL AGENTS		
<i>clotrimazole</i>	2	
CRESEMBA	3	PA
<i>fluconazole oral suspension for reconstitution</i>	2	
<i>fluconazole oral tablet 100 mg, 200 mg</i>	2	
<i>fluconazole oral tablet 150 mg</i>	1	QL
<i>fluconazole oral tablet 50 mg</i>	1	
<i>flucytosine</i>	2	PA
<i>griseofulvin microsize</i>	2	
<i>griseofulvin ultramicrosize</i>	2	
<i>itraconazole</i>	2	QL
<i>ketoconazole</i>	2	
NOXAFIL	3	PA
<i>nystatin</i>	2	
<i>posaconazole</i>	2	PA
<i>terbinafine hcl</i>	2	
<i>voriconazole</i>	2	PA
ANTIVIRALS		
<i>abacavir</i>	2	
<i>abacavir-lamivudine</i>	2	
<i>acyclovir oral capsule</i>	1	
<i>acyclovir oral suspension</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>acyclovir oral tablet</i>	1	
<i>adefovir</i>	2	
<i>amantadine hcl oral capsule</i>	2	
<i>amantadine hcl oral solution</i>	1	
<i>amantadine hcl oral tablet</i>	1	
APRETUDE	5	ACA
APTIVUS	3	
<i>atazanavir</i>	2	
BARACLUDE	3	
BEYFORTUS	3	ACA
BIKTARVY	3	
CABENUVA	5	PA; QL
CIMDUO	3	
<i>darunavir</i>	2	
DELSTRIGO	3	
DESCOVY ORAL TABLET 120-15 MG	3	
DESCOVY ORAL TABLET 200-25 MG	3	ACA
DOVATO	3	
EDURANT PED	3	
<i>efavirenz</i>	2	
<i>efavirenz-emtricitabin-tenofov</i>	2	
<i>efavirenz-lamivudine-tenofov disop</i>	2	
<i>emtricitabine</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>emtricitabine-tenofovir (tdf) oral tablet 100-150 mg, 133-200 mg, 167-250 mg</i>	2	
<i>emtricitabine-tenofovir (tdf) oral tablet 200-300 mg</i>	2	ACA
<i>emtricitabine-rilpivirine-tenofovir (df)</i>	2	
EMTRIVA	3	
ENFLONIA	3	ACA
<i>entecavir</i>	2	
EPCLUSA	5	PA; MSP; QL
<i>etravirine</i>	2	
<i>famciclovir</i>	2	QL
<i>fosamprenavir</i>	2	
GENVOYA	3	
HARVONI	5	PA; MSP; QL
INTELENCE	3	
ISENTRESS	3	
ISENTRESS HD	3	
JULUCA	3	
LAGEVRIO (EUA)	3	QL
<i>lamivudine</i>	2	
<i>lamivudine-zidovudine</i>	2	
<i>lopinavir-ritonavir</i>	2	
<i>maraviroc</i>	2	
<i>nevirapine</i>	2	
NORVIR	3	
ODEFSEY	3	
<i>oseltamivir</i>	2	QL
PAXLOVID	3	QL

Drug Name	Drug Tier	Requirements / Limits
PIFELTRO	3	
PREVYMIS	3	QL
PREZISTA	3	
RELENZA DISKHALER	3	QL
REYATAZ	3	
<i>ribavirin inhalation</i>	2	PA
<i>ribavirin oral</i>	5	ST; MSP
<i>rilpivirine hcl</i>	2	
<i>rimantadine</i>	2	
<i>ritonavir</i>	2	
SELZENTRY	3	
SYMTUZA	3	
<i>tenofovir disoproxil fumarate</i>	2	
TIVICAY	3	
TIVICAY PD	3	
TRIUMEQ	3	
TRIUMEQ PD	3	
<i>valacyclovir</i>	2	QL
<i>valganciclovir</i>	2	
VEMLIDY	3	
VIRACEPT	3	
VIREAD	3	
VOSEVI	5	PA; MSP; QL
YEZTUGO	5	ACA
ZEPATIER	2	PA; MSP; QL
<i>zidovudine</i>	2	
CEPHALOSPORINS		
<i>cefaclor</i>	1	
<i>cefadroxil</i>	1	
<i>cefdinir oral capsule</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>cefдинир oral suspension for reconstitution</i>	1	
<i>cefixime oral capsule</i>	2	
<i>cefixime oral suspension for reconstitution 100 mg/5 ml</i>	2	
<i>cefixime oral suspension for reconstitution 200 mg/5 ml</i>	1	
<i>cefixime oral tablet</i>	1	
<i>cefподoxime</i>	2	
<i>cefпроzil oral suspension for reconstitution 125 mg/5 ml</i>	1	
<i>cefпроzil oral suspension for reconstitution 250 mg/5 ml</i>	2	
<i>cefпроzil oral tablet 250 mg</i>	1	
<i>cefпроzil oral tablet 500 mg</i>	2	
<i>cefuroxime axetil</i>	2	
<i>cephalexin oral capsule</i>	1	
<i>cephalexin oral suspension for reconstitution</i>	2	
<i>cephalexin oral tablet</i>	2	

ERYTHROMYCINS & OTHER MACROLIDES

Drug Name	Drug Tier	Requirements / Limits
<i>azithromycin oral packet</i>	1	
<i>azithromycin oral suspension for reconstitution</i>	2	
<i>azithromycin oral tablet</i>	1	
<i>clarithromycin oral suspension for reconstitution</i>	1	
<i>clarithromycin oral tablet</i>	2	
<i>clarithromycin oral tablet extended release 24 hr</i>	1	
<i>e.e.s. 400</i>	2	
<i>ery-tab</i>	2	
<i>erythrocin (as stearate)</i>	2	
<i>erythromycin</i>	2	
<i>erythromycin ethylsuccinate</i>	2	
<i>fidaxomicin</i>	2	QL
MISCELLANEOUS ANTIINFECTIVES		
<i>albendazole</i>	2	QL
ALINIA	3	QL
ARIKAYCE	5	PA
<i>atovaquone</i>	2	
<i>atovaquone-proguanil</i>	2	QL
BENZNIDAZOLE	3	QL
CAYSTON	5	PA; MSP; QL
<i>chloroquine phosphate</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>clindamycin hcl</i>	1	
<i>clindamycin pediatric</i>	2	
COARTEM	3	QL
<i>cycloserine</i>	2	
<i>dapsone</i>	2	
EMVERM	3	QL
<i>ethambutol</i>	2	
<i>hydroxychloroquine</i>	2	HSA+
<i>imipenem-cilastatin</i>	2	PA
IMPAVIDO	3	PA; QL
<i>isoniazid</i>	2	
<i>ivermectin</i>	2	PA; QL
KITABIS PAK	5	PA; MSP; QL
<i>linezolid</i>	2	PA
<i>mefloquine</i>	2	QL
<i>metronidazole oral capsule</i>	2	
<i>metronidazole oral tablet</i>	1	
<i>neomycin</i>	2	
<i>nitazoxanide</i>	2	QL
<i>pentamidine</i>	2	QL
<i>praziquantel</i>	2	
PRETOMANID	3	PA
PRIFTIN	3	
<i>primaquine</i>	2	QL
<i>pyrazinamide</i>	2	
<i>pyrimethamine</i>	2	PA
<i>quinine sulfate</i>	2	QL
<i>rifabutin</i>	2	
<i>rifampin</i>	2	

Drug Name	Drug Tier	Requirements / Limits
SIRTURO	3	PA
SOLOSEC	3	QL
<i>tinidazole</i>	2	QL
TOBI PODHALER	5	PA; MSP; QL
<i>tobramycin</i>	5	PA; MSP; QL
<i>tobramycin in 0.225 % nacl</i>	5	PA; MSP; QL
XIFAXAN	3	QL
PENICILLINS		
<i>amoxicillin</i>	1	
<i>amoxicillin-pot clavulanate oral suspension for reconstitution</i>	1	
<i>amoxicillin-pot clavulanate oral tablet</i>	1	
<i>amoxicillin-pot clavulanate oral tablet extended release 12 hr</i>	2	
<i>amoxicillin-pot clavulanate oral tablet, chewable</i>	1	
<i>ampicillin</i>	1	
AUGMENTIN	3	
<i>dicloxacillin</i>	2	
<i>penicillin v potassium</i>	1	
QUINOLONES		
BAXDELA	3	QL
<i>ciprofloxacin</i>	2	
<i>ciprofloxacin hcl</i>	1	
<i>levofloxacin oral solution</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>levofloxacin oral tablet</i>	1	
<i>moxifloxacin</i>	2	
<i>ofloxacin</i>	2	
SULFA'S & RELATED AGENTS		
<i>sulfadiazine</i>	2	
<i>sulfamethoxazole-trimethoprim</i>	1	
<i>sulfatrim</i>	1	
TETRACYCLINES		
<i>avidoxy</i>	1	
<i>demeclocycline</i>	2	
<i>doxycycline hyclate oral capsule</i>	1	
<i>doxycycline hyclate oral tablet 100 mg, 20 mg</i>	1	
<i>doxycycline hyclate oral tablet 150 mg, 75 mg</i>	1	ST
<i>doxycycline hyclate oral tablet 50 mg</i>	2	ST
<i>doxycycline hyclate oral tablet, delayed release (dr/ec) 100 mg, 150 mg, 200 mg, 75 mg</i>	2	ST
<i>doxycycline hyclate oral tablet, delayed release (dr/ec) 50 mg</i>	1	ST
<i>doxycycline monohydrate oral capsule 100 mg, 50 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>doxycycline monohydrate oral capsule 150 mg, 75 mg</i>	2	ST
<i>doxycycline monohydrate oral capsule, ir - delay rel, biphase</i>	2	ST
<i>doxycycline monohydrate oral suspension for reconstitution</i>	1	
<i>doxycycline monohydrate oral tablet 100 mg, 75 mg</i>	1	
<i>doxycycline monohydrate oral tablet 150 mg, 50 mg</i>	2	
<i>minocycline oral capsule</i>	1	
<i>minocycline oral tablet</i>	2	ST
<i>minocycline oral tablet extended release 24 hr</i>	2	ST
<i>mondoxyne nl oral capsule 100 mg</i>	1	
<i>mondoxyne nl oral capsule 75 mg</i>	2	ST
<i>tetracycline oral capsule</i>	2	
<i>tetracycline oral tablet</i>	2	ST
URINARY TRACT AGENTS		
<i>methenamine hippurate</i>	2	
<i>methenamine mandelate</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>nitrofurantoin</i>	2	
<i>nitrofurantoin macrocrystal oral capsule 100 mg, 25 mg</i>	1	
<i>nitrofurantoin macrocrystal oral capsule 50 mg</i>	2	
<i>nitrofurantoin monohyd/m-cryst</i>	2	
<i>trimethoprim</i>	1	

VANCOMYCIN

<i>vancomycin oral capsule</i>	2	PA; QL
<i>vancomycin oral recon soln</i>	2	QL

ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS

ADJUNCTIVE AGENTS

<i>leucovorin calcium oral tablet 10 mg, 25 mg, 5 mg</i>	1	
<i>leucovorin calcium oral tablet 15 mg</i>	2	
VISTOGARD	5	PA; QL

ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS

<i>abiraterone</i>	5	PA; MSP; QL
<i>abirtega</i>	5	PA; MSP; QL
ALECENSA	5	PA; MSP; QL
ALUNBRIG	5	PA; QL
<i>anastrozole</i>	1	
AUGTYRO	5	PA

Drug Name	Drug Tier	Requirements / Limits
AVMAPKI-FAKZYNJA	5	PA
<i>azathioprine</i>	2	
BALVERSA	5	PA
<i>bevacizumab</i>	2	
<i>bexarotene</i>	5	PA; MSP
<i>bicalutamide</i>	2	
BOSULIF	5	PA; MSP; QL
BRAFTOVI	5	PA; MSP; QL
BRUKINSA	5	PA
CABOMETYX	5	PA; MSP; QL
CALQUENCE (ACALABRUTINIB MAL)	5	PA; QL
<i>capecitabine</i>	5	PA; MSP; QL
CAPRELSA	5	PA; QL
COMETRIQ	5	PA; MSP; QL
COTELLIC	5	PA; MSP; QL
<i>cyclophosphamide</i>	2	
<i>cyclosporine</i>	2	
<i>cyclosporine modified</i>	2	
DANZITEN	5	PA
<i>dasatinib</i>	5	PA; MSP; QL
DROXIA	3	
ELIGARD	5	PA; MSP
ELIGARD (3 MONTH)	5	PA; MSP
ELIGARD (4 MONTH)	5	PA; MSP
ELIGARD (6 MONTH)	5	PA; MSP
ENSACOVE	5	PA
ENSPRYNG	5	PA; MSP

Drug Name	Drug Tier	Requirements / Limits
ERIVEDGE	5	PA; MSP; QL
ERLEADA	5	PA; MSP; QL
<i>erlotinib</i>	5	PA; MSP; QL
<i>etoposide</i>	2	
<i>everolimus (antineoplastic)</i>	5	PA; MSP; QL
<i>everolimus (immunosuppressive)</i>	2	
<i>exemestane</i>	2	
FENSOLVI	5	MSP
FRUZAQLA	5	PA
GAVRETO	5	PA; QL
<i>gefitinib</i>	5	PA; MSP; QL
<i>gengraf</i>	2	
GILOTRIF	5	PA; MSP; QL
GOMEKLI	5	PA
HYCAMTIN	5	PA; MSP
<i>hydroxyurea</i>	1	
IBTROZI	5	PA
ICLUSIG	5	PA; QL
IDHIFA	5	PA; MSP; QL
<i>imatinib</i>	5	PA; MSP; QL
IMBRUVICA ORAL CAPSULE	5	ST; QL
IMBRUVICA ORAL SUSPENSION	5	ST; QL
IMBRUVICA ORAL TABLET 140 MG, 280 MG	5	PA; QL
IMBRUVICA ORAL TABLET 420 MG	5	ST; QL

Drug Name	Drug Tier	Requirements / Limits
IMKELDI	5	PA
INLURIYO	5	PA
INLYTA	5	PA; MSP; QL
IWILFIN	5	PA
JAKAFI	5	ST; MSP; QL
KISQALI	5	PA; MSP; QL
KOMZIFTI	5	PA
<i>lanreotide</i>	5	PA; QL
<i>lapatinib</i>	5	PA; MSP; QL
<i>lenalidomide</i>	5	PA; MSP; QL
LENVIMA	5	PA; MSP; QL
<i>letrozole</i>	1	
LEUKERAN	3	
<i>leuprolide</i>	5	PA
<i>lomustine</i>	2	
LONSURF	5	PA; MSP
LORBRENA	5	PA; MSP; QL
LUPKYNIS	5	PA; QL
LUPRON DEPOT (3 MONTH) INTRAMUSCULAR SYRINGE KIT 11.25 MG	5	MSP
LUPRON DEPOT (3 MONTH) INTRAMUSCULAR SYRINGE KIT 22.5 MG	5	PA; MSP
LUPRON DEPOT (4 MONTH)	5	PA; MSP
LUPRON DEPOT (6 MONTH)	5	PA; MSP

Drug Name	Drug Tier	Requirements / Limits
LUPRON DEPOT INTRAMUSCULAR SYRINGE KIT 3.75 MG	5	MSP
LUPRON DEPOT INTRAMUSCULAR SYRINGE KIT 7.5 MG	5	PA; MSP
LUTRATE DEPOT (3 MONTH)	5	PA
LYNPARZA	5	PA; MSP; QL
LYSODREN	5	
LYTGOBI	5	PA
MATULANE	5	
<i>megestrol oral suspension</i>	2	
<i>megestrol oral tablet</i>	1	
MEKINIST	5	PA; MSP; QL
MEKTOVI	5	PA; MSP; QL
<i>mercaptopurine oral suspension</i>	5	ST; MSP
<i>mercaptopurine oral tablet</i>	2	
<i>methotrexate sodium (pf) injection recon soln</i>	2	
<i>methotrexate sodium (pf) injection solution</i>	1	
<i>methotrexate sodium injection</i>	1	
<i>methotrexate sodium oral</i>	2	
MODEYSO	5	PA
<i>mycophenolate mofetil</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>mycophenolate sodium</i>	2	
MYHIBBIN	3	
MYLERAN	3	
NEMLUVIO	5	PA; MSP; QL
NERLYNX	5	PA; MSP
<i>nilotinib hcl</i>	5	PA; MSP; QL
<i>nilutamide</i>	2	PA
NINLARO	5	PA; MSP; QL
NUBEQA	5	PA; MSP; QL
<i>octreotide acetate</i>	5	PA; MSP
ODOMZO	5	PA; MSP; QL
OJEMDA	5	PA
ORSERDU	5	PA; QL
<i>pazopanib</i>	5	PA; MSP; QL
PEMAZYRE	5	PA; QL
PIQRAY	5	PA
<i>pomalidomide</i>	5	PA; MSP
PROGRAF	3	
REVUFORJ	5	PA
ROZLYTREK	5	PA; MSP; QL
RYDAPT	5	PA; MSP; QL
SCSEMBLIX	5	PA; QL
SIGNIFOR	5	PA
<i>sirolimus</i>	2	
SOMATULINE DEPOT	5	PA; MSP; QL
<i>sorafenib</i>	5	PA; MSP; QL
STIVARGA	5	PA; MSP; QL
<i>sunitinib malate</i>	5	PA; MSP; QL
SUPPRELIN LA	5	PA; MSP
TABRECTA	5	PA; MSP

Drug Name	Drug Tier	Requirements / Limits
<i>tacrolimus</i>	2	
TAFINLAR	5	PA; MSP; QL
TAGRISSE	5	PA; MSP; QL
TALZENNA	5	PA; MSP; QL
<i>tamoxifen oral tablet 10 mg</i>	1	
<i>tamoxifen oral tablet 20 mg</i>	2	
<i>temozolomide</i>	5	MSP
THALOMID	5	PA; MSP; QL
TIBSOVO	5	PA
<i>toremifene</i>	2	
<i>torpenz</i>	5	PA; QL
<i>tretinoin (antineoplastic)</i>	2	
TRIPTODUR	5	
TRUQAP	5	PA
VENCLEXTA	5	PA; QL
VENCLEXTA STARTING PACK	5	PA; QL
VERZENIO	5	PA; MSP; QL
VIJOICE	5	PA; QL
VITRAKVI	5	PA; MSP; QL
VIZIMPRO	5	PA; MSP; QL
VONJO	5	PA; QL
VOYXACT	5	PA; QL
XALKORI	5	PA; MSP; QL
XERMELO	5	PA; QL
XOSPATA	5	PA; QL
XTANDI	5	PA; MSP; QL
YONSA	5	PA; MSP; QL
<i>yulithira</i>	2	PA; MSP; QL
ZELBORAF	5	PA; MSP; QL

Drug Name	Drug Tier	Requirements / Limits
ZOLINZA	5	PA; MSP; QL
ZYDELIG	5	PA; MSP; QL
ZYKADIA	5	PA; MSP; QL

AUTONOMIC & CNS DRUGS, NEUROLOGY & PSYCH

ANTICONVULSANTS

<i>brivaracetam</i>	2	
<i>carbamazepine</i>	2	
<i>clobazam</i>	2	PA
<i>clonazepam oral tablet</i>	1	
<i>clonazepam oral tablet, disintegrating</i>	2	
DIACOMIT	5	PA
<i>diazepam</i>	2	
DILANTIN	3	
<i>divalproex</i>	2	
EPIDIOLEX	5	PA; MSP
<i>eslicarbazepine</i>	2	
<i>ethosuximide</i>	2	
<i>felbamate</i>	2	
FYCOMPA	3	
<i>gabapentin oral capsule</i>	2	HSA+
<i>gabapentin oral solution</i>	2	HSA+
<i>gabapentin oral tablet</i>	2	HSA+
<i>gabapentin oral tablet extended release 24 hr</i>	2	ST
<i>lacosamide</i>	2	
<i>lamotrigine oral tablet</i>	1	HSA+

Drug Name	Drug Tier	Requirements / Limits
<i>lamotrigine oral tablet disintegrating, dose pk</i>	2	HSA+
<i>lamotrigine oral tablet extended release 24hr</i>	2	HSA+
<i>lamotrigine oral tablet, chewable dispersible 25 mg</i>	2	HSA+
<i>lamotrigine oral tablet, chewable dispersible 5 mg</i>	1	HSA+
<i>lamotrigine oral tablet, disintegrating</i>	2	HSA+
<i>lamotrigine oral tablets, dose pack</i>	2	HSA+
<i>levetiracetam oral solution 100 mg/ml</i>	2	HSA+
<i>levetiracetam oral solution 500 mg/5 ml (5 ml)</i>	1	HSA+
<i>levetiracetam oral tablet</i>	2	HSA+
<i>levetiracetam oral tablet extended release 24 hr</i>	2	HSA+
<i>methsuximide</i>	2	
NAYZILAM	3	PA; QL
<i>oxcarbazepine oral suspension</i>	2	HSA+
<i>oxcarbazepine oral tablet</i>	2	HSA+
<i>oxcarbazepine oral tablet extended release 24 hr</i>	2	
<i>perampanel</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>phenobarbital oral elixir</i>	1	
<i>phenobarbital oral tablet 100 mg, 15 mg</i>	1	
<i>phenobarbital oral tablet 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg</i>	2	
<i>phenytoin</i>	2	
<i>phenytoin sodium extended</i>	2	
<i>pregabalin oral capsule</i>	2	HSA+
<i>pregabalin oral solution</i>	2	HSA+
<i>pregabalin oral tablet extended release 24 hr</i>	2	PA
<i>primidone</i>	1	
<i>relgaabi</i>	2	
<i>roweepra</i>	1	
<i>rufinamide</i>	2	PA
<i>subvenite</i>	1	HSA+
<i>subvenite starter (blue) kit</i>	2	HSA+
<i>subvenite starter (green) kit</i>	2	HSA+
<i>subvenite starter (orange) kit</i>	2	HSA+
<i>tiagabine</i>	2	
<i>topiramate oral capsule, sprinkle</i>	2	HSA+
<i>topiramate oral capsule, extended release 24hr</i>	2	ST

Drug Name	Drug Tier	Requirements / Limits
<i>topiramate oral capsule, sprinkle, er 24hr</i>	2	ST
<i>topiramate oral solution</i>	2	HSA+
<i>topiramate oral tablet</i>	2	HSA+
<i>valproic acid</i>	2	
<i>valproic acid (as sodium salt)</i>	1	
VALTOCO	3	PA; QL
<i>vigabatrin</i>	5	PA; MSP; QL
<i>vigadrone</i>	5	PA; QL
<i>zonisamide</i>	2	
ZTALMY	5	PA
ANTIPARKINSONISM AGENTS		
<i>apomorphine</i>	5	PA; QL
<i>benztropine</i>	1	
<i>bromocriptine</i>	2	
<i>carbidopa</i>	2	PA
<i>carbidopa-levodopa</i>	2	
<i>carbidopa-levodopa-entacapone</i>	2	
<i>entacapone</i>	2	
INBRIJA	5	PA; QL
NEUPRO	3	
<i>pramipexole</i>	2	
<i>rasagiline</i>	2	
<i>ropinirole</i>	2	
<i>selegiline hcl</i>	2	
<i>tolcapone</i>	2	PA
<i>trihexyphenidyl</i>	1	

Drug Name	Drug Tier	Requirements / Limits
MIGRAINE & CLUSTER HEADACHE THERAPY		
AIMOVIG AUTOINJECTOR	3	PA; QL
AJOVY AUTOINJECTOR	3	PA; QL
AJOVY SYRINGE	3	PA; QL
<i>almotriptan malate</i>	2	ST; QL
<i>dihydroergotamine injection</i>	2	
<i>dihydroergotamine nasal</i>	2	ST; QL
<i>eletriptan</i>	2	QL
EMGALITY PEN	3	PA; QL
EMGALITY SYRINGE	3	PA; QL
ERGOMAR	3	
<i>ergotamine-caffeine</i>	2	
<i>frovatriptan</i>	2	ST; QL
<i>migergot</i>	2	
<i>naratriptan</i>	2	QL
QULIPTA	3	PA; QL
<i>rizatriptan</i>	2	QL
<i>sumatriptan</i>	2	QL
<i>sumatriptan succinate</i>	2	QL
<i>zolmitriptan nasal</i>	2	ST; QL
<i>zolmitriptan oral</i>	2	QL
ZOMIG	3	ST; QL
MISCELLANEOUS NEUROLOGICAL THERAPY		
<i>dalfampridine</i>	5	PA; MSP; QL
<i>dichlorphenamide</i>	5	PA; MSP

Drug Name	Drug Tier	Requirements / Limits
<i>donepezil oral tablet 10 mg, 5 mg</i>	2	
<i>donepezil oral tablet 23 mg</i>	2	PA
<i>donepezil oral tablet, disintegrating</i>	2	
FIRDAPSE	5	PA
<i>galantamine</i>	2	
INGREZZA	5	PA; QL
INGREZZA INITIATION PK(TARDIV)	5	PA; QL
INGREZZA SPRINKLE	5	PA; QL
<i>memantine</i>	2	
<i>memantine-donepezil</i>	2	ST
NAMZARIC	3	PA
NUEDEXTA	3	PA
<i>ormalvi</i>	5	PA
RADICAVA ORS STARTER KIT SUSP	5	PA; MSP
<i>rivastigmine</i>	2	
<i>rivastigmine tartrate</i>	2	
<i>tetrabenazine</i>	5	PA; MSP; QL
ZEPOSIA	5	PA; MSP; QL
ZEPOSIA STARTER KIT (28-DAY)	5	PA; MSP; QL
ZEPOSIA STARTER PACK (7-DAY)	5	PA; MSP; QL

MUSCLE RELAXANTS & ANTISPASMODIC THERAPY

Drug Name	Drug Tier	Requirements / Limits
<i>baclofen oral solution</i>	1	PA
<i>baclofen oral suspension</i>	1	
<i>baclofen oral tablet</i>	1	
<i>carisoprodol</i>	2	
<i>chlorzoxazone oral tablet 250 mg</i>	2	PA
<i>chlorzoxazone oral tablet 375 mg, 750 mg</i>	1	PA
<i>chlorzoxazone oral tablet 500 mg</i>	2	
<i>cyclobenzaprine oral capsule, extended release 24hr</i>	1	PA
<i>cyclobenzaprine oral tablet 10 mg, 5 mg</i>	1	
<i>cyclobenzaprine oral tablet 7.5 mg</i>	1	PA
<i>dantrolene</i>	2	
<i>meprobamate</i>	2	
<i>metaxalone</i>	2	
<i>methocarbamol</i>	1	
<i>orphenadrine citrate</i>	2	
<i>pyridostigmine bromide</i>	2	
<i>tanlor</i>	1	
<i>tizanidine oral capsule</i>	2	PA
<i>tizanidine oral tablet</i>	1	
NARCOTIC ANALGESICS		
<i>acetaminophen-caff-dihydrocod</i>	2	ST; QL

Drug Name	Drug Tier	Requirements / Limits
<i>acetaminophen-codeine</i>	2	ST; QL
<i>ascomp with codeine</i>	2	ST; QL
BELBUCA	3	ST; QL
BRIXADI	5	MSP; QL
<i>buprenorphine</i>	2	ST; QL
<i>buprenorphine hcl</i>	2	QL
<i>butalbital-acetaminop-caf-cod</i>	2	ST; QL
<i>butalbital-acetaminophen</i>	2	
<i>butalbital-acetaminophen-caff</i>	2	
<i>butalbital-aspirin-caffeine</i>	2	
<i>codeine sulfate</i>	2	ST; QL
<i>codeine-butalbital-asa-caff</i>	2	ST; QL
<i>diskets</i>	2	QL
<i>endocet</i>	2	ST; QL
<i>fentanyl</i>	2	ST; QL
<i>hydrocodone bitartrate</i>	2	ST; QL
<i>hydrocodone-acetaminophen oral solution</i>	2	ST; QL
<i>hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg</i>	2	ST; QL
<i>hydrocodone-acetaminophen oral tablet 2.5-325 mg</i>	1	ST; QL

Drug Name	Drug Tier	Requirements / Limits
<i>hydrocodone-ibuprofen</i>	2	ST; QL
<i>hydromorphone oral liquid</i>	1	ST; QL
<i>hydromorphone oral tablet 2 mg, 4 mg</i>	2	ST; QL
<i>hydromorphone oral tablet 8 mg</i>	1	ST; QL
<i>hydromorphone oral tablet extended release 24 hr</i>	2	ST; QL
<i>hydromorphone rectal</i>	1	ST; QL
<i>levorphanol tartrate</i>	2	PA; QL
<i>methadone oral concentrate</i>	2	QL
<i>methadone oral solution</i>	1	QL
<i>methadone oral tablet</i>	2	QL
<i>methadone oral tablet, soluble</i>	2	QL
<i>methadose</i>	2	QL
<i>morphine concentrate</i>	2	ST; QL
<i>morphine oral capsule, er multiphase 24 hr</i>	2	ST; QL
<i>morphine oral solution</i>	2	ST; QL
<i>morphine oral tablet</i>	1	ST; QL
<i>morphine oral tablet extended release</i>	2	ST; QL
<i>morphine rectal suppository 10 mg, 20 mg, 5 mg</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>morphine rectal suppository 30 mg</i>	2	QL
<i>oxycodone</i>	2	ST; QL
<i>oxycodone-acetaminophen oral solution</i>	2	PA; QL
<i>oxycodone-acetaminophen oral tablet 10-300 mg, 2.5-300 mg, 5-300 mg, 7.5-300 mg</i>	2	PA; QL
<i>oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	2	ST; QL
<i>oxymorphone</i>	2	ST; QL
<i>prolactin</i>	2	PA; QL
SUBLOCADE	5	MSP; QL
<i>tenoxicam</i>	1	
<i>xylocaine</i>	2	PA; QL
NON-NARCOTIC ANALGESICS		
<i>adult aspirin regimen</i>	1	ACA; OTC
<i>aspirin</i>	1	ACA; OTC
<i>aspirin childrens</i>	1	ACA; OTC
<i>bayer low dose aspirin</i>	1	ACA; OTC
<i>buprenorphine-naloxone</i>	2	
<i>butorphanol injection</i>	1	QL
<i>butorphanol nasal</i>	2	QL
<i>celecoxib</i>	2	
<i>diclofenac potassium oral capsule</i>	2	ST

Drug Name	Drug Tier	Requirements / Limits
<i>diclofenac potassium oral powder in packet</i>	2	ST; QL
<i>diclofenac potassium oral tablet 25 mg</i>	2	ST
<i>diclofenac potassium oral tablet 50 mg</i>	2	
<i>diclofenac sodium oral</i>	2	
<i>diclofenac sodium topical drops</i>	1	QL
<i>diclofenac sodium topical gel</i>	2	QL
<i>diclofenac sodium topical solution in metered-dose pump</i>	2	ST; QL
<i>diclofenac-misoprostol</i>	2	
<i>diflunisal</i>	2	
<i>ecotrin low strength</i>	1	ACA; OTC
<i>etodolac</i>	2	
<i>fenoprofen</i>	2	ST
FLECTOR	3	ST; QL
<i>flurbiprofen</i>	2	
<i>ibu</i>	1	
<i>ibuprofen</i>	1	
<i>indomethacin oral capsule</i>	1	
<i>indomethacin oral capsule, extended release</i>	1	
<i>indomethacin oral suspension</i>	1	ST
<i>indomethacin rectal</i>	2	
<i>ketoprofen oral capsule 25 mg</i>	2	PA

Drug Name	Drug Tier	Requirements / Limits
<i>ketoprofen oral capsule 50 mg, 75 mg</i>	2	
<i>ketoprofen oral capsule, ext rel. pellets 24 hr</i>	1	ST
<i>ketorolac</i>	2	QL
KLOXXADO	3	QL
LICART	3	ST; QL
<i>lofena</i>	2	ST
<i>lofexidine</i>	2	PA; QL
<i>lurbiro</i>	2	
<i>meclofenamate</i>	2	
<i>mefenamic acid</i>	2	
<i>meloxicam</i>	1	QL
<i>meloxicam submicronized</i>	2	ST; QL
<i>nabumetone</i>	2	
<i>naloxone 0.4 mg/ml carpject inner, p/f, sup</i>	1	HSA+
<i>naloxone injection solution</i>	2	HSA+
<i>naloxone injection syringe 0.4 mg/ml, 1 mg/ml</i>	2	HSA+
<i>naloxone nasal</i>	2	HSA+; OTC; QL
<i>naltrexone</i>	2	
<i>naproxen oral suspension</i>	2	ST
<i>naproxen oral tablet</i>	1	
<i>naproxen oral tablet, delayed release (dr/ec) 375 mg</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>naproxen oral tablet, delayed release (dr/ec) 500 mg</i>	2	ST
<i>naproxen sodium oral tablet</i>	2	
<i>naproxen sodium oral tablet, er multiphase 24 hr</i>	2	ST
<i>oxaprozin</i>	2	
<i>piroxicam</i>	2	
REXTOVY	3	HSA+; QL
<i>salsalate</i>	1	
<i>st. joseph aspirin</i>	1	ACA; OTC
<i>st. joseph aspirin</i>	1	ACA; OTC
<i>sulindac</i>	1	
<i>tapentadol</i>	2	ST; QL
<i>tolectin ds</i>	2	ST
<i>tolmetin</i>	2	ST
<i>tramadol</i>	2	ST; QL
<i>tramadol-acetaminophen</i>	2	ST; QL
VIVITROL	5	MSP
ZUBSOLV	3	
PSYCHOTHERAPEUTIC DRUGS		
ABILIFY MAINTENA	3	
<i>alprazolam intensol</i>	1	
<i>alprazolam oral tablet 0.25 mg, 0.5 mg</i>	1	
<i>alprazolam oral tablet 1 mg, 2 mg</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>alprazolam oral tablet extended release 24 hr 0.5 mg, 1 mg, 2 mg</i>	2	
<i>alprazolam oral tablet extended release 24 hr 3 mg</i>	1	
<i>alprazolam oral tablet, disintegrating 0.25 mg</i>	1	
<i>alprazolam oral tablet, disintegrating 0.5 mg, 1 mg, 2 mg</i>	2	
<i>amitriptyline oral tablet 10 mg, 25 mg</i>	1	
<i>amitriptyline oral tablet 100 mg, 150 mg, 50 mg, 75 mg</i>	2	
<i>amitriptyline-chlordiazepoxide</i>	1	
<i>amoxapine</i>	2	
<i>amphetamine</i>	2	ST
<i>amphetamine sulfate</i>	2	PA
<i>aripiprazole oral solution</i>	2	
<i>aripiprazole oral tablet</i>	2	QL
<i>aripiprazole oral tablet, disintegrating</i>	2	QL
ARISTADA	3	
ARISTADA INITIO	3	
<i>armodafinil</i>	2	PA; QL
<i>asenapine maleate</i>	2	QL
<i>atomoxetine</i>	2	PA
AZSTARYS	3	ST

Drug Name	Drug Tier	Requirements / Limits
<i>bupropion hcl oral tablet</i>	2	
<i>bupropion hcl oral tablet extended release 24 hr</i>	2	QL
<i>bupropion hcl oral tablet sustained-release 12 hr</i>	2	QL
<i>buspirone</i>	2	
<i>chlordiazepoxide hcl</i>	1	
<i>chlorpromazine</i>	2	
<i>citalopram oral capsule</i>	2	ST; HSA+; QL
<i>citalopram oral solution</i>	2	HSA+
<i>citalopram oral tablet</i>	1	HSA+; QL
<i>clomipramine</i>	2	
<i>clonidine hcl</i>	2	PA
<i>clorazepate dipotassium</i>	2	
<i>clozapine</i>	2	
<i>desipramine</i>	2	
<i>desvenlafaxine succinate</i>	2	ST; HSA+; QL
<i>dexmethylphenidate</i>	2	PA
<i>dextroamphetamine sulfate</i>	2	PA
<i>dextroamphetamine-amphetamine</i>	2	PA
<i>diazepam</i>	1	
<i>diazepam intensol</i>	1	
<i>doxepin oral capsule</i>	2	HSA+
<i>doxepin oral concentrate</i>	2	HSA+

Drug Name	Drug Tier	Requirements / Limits
<i>doxepin oral tablet</i>	2	PA; HSA+; QL
<i>duloxetine oral capsule, delayed release(dr/ec) 20 mg, 30 mg, 60 mg</i>	2	HSA+; QL
<i>duloxetine oral capsule, delayed release(dr/ec) 40 mg</i>	2	ST; HSA+; QL
<i>ergoloid</i>	1	
<i>escitalopram oxalate oral solution</i>	2	ST; HSA+
<i>escitalopram oxalate oral tablet</i>	1	HSA+; QL
<i>estazolam</i>	1	QL
<i>eszopiclone</i>	2	QL
FETZIMA	3	ST; QL
<i>fluoxetine oral capsule 10 mg, 40 mg</i>	1	HSA+; QL
<i>fluoxetine oral capsule 20 mg</i>	1	HSA+
<i>fluoxetine oral capsule, delayed release(dr/ec)</i>	2	ST; QL
<i>fluoxetine oral solution</i>	2	HSA+
<i>fluoxetine oral tablet 10 mg</i>	2	ST; QL
<i>fluoxetine oral tablet 20 mg, 60 mg</i>	2	ST
<i>fluphenazine hcl</i>	2	
<i>flurazepam</i>	1	QL
<i>fluvoxamine oral capsule, extended release 24hr</i>	2	ST; QL
<i>fluvoxamine oral tablet</i>	2	HSA+; QL

Drug Name	Drug Tier	Requirements / Limits
<i>guanfacine</i>	2	PA; HSA+
<i>haloperidol lactate</i>	2	
<i>haloperidol oral tablet 0.5 mg, 2 mg, 20 mg</i>	1	
<i>haloperidol oral tablet 1 mg, 10 mg, 5 mg</i>	2	
<i>imipramine hcl</i>	1	
<i>imipramine pamoate</i>	2	
INVEGA SUSTENNA	3	
<i>lisdexamfetamine</i>	2	PA
<i>lithium carbonate</i>	1	HSA+
<i>lithium citrate</i>	1	
<i>lorazepam intensol</i>	2	
<i>lorazepam oral concentrate</i>	2	
<i>lorazepam oral tablet</i>	1	
<i>loxapine succinate</i>	2	
LUMRYZ	5	ST; MSP; QL
LUMRYZ STARTER PACK	5	ST; QL
<i>lurasidone</i>	2	QL
MARPLAN	3	
<i>methamphetamine</i>	2	PA
<i>methylphenidate</i>	2	ST
<i>methylphenidate hcl oral cap, er sprinkle, biphasic 40-60</i>	2	ST
<i>methylphenidate hcl oral capsule, er biphasic 30-70</i>	2	PA

Drug Name	Drug Tier	Requirements / Limits
<i>methylphenidate hcl oral capsule,er biphasic 50-50</i>	2	PA
<i>methylphenidate hcl oral solution</i>	2	PA
<i>methylphenidate hcl oral tablet</i>	2	PA
<i>methylphenidate hcl oral tablet extended release</i>	2	PA
<i>methylphenidate hcl oral tablet extended release 24hr</i>	2	PA
<i>methylphenidate hcl oral tablet,chewable</i>	2	PA
<i>midazolam</i>	2	
<i>mirtazapine</i>	2	HSA+
<i>modafinil</i>	2	PA; QL
<i>molindone</i>	2	
<i>nefazodone</i>	2	
<i>nortriptyline oral capsule</i>	1	HSA+
<i>nortriptyline oral solution</i>	2	HSA+
<i>olanzapine oral tablet</i>	1	HSA+; QL
<i>olanzapine oral tablet,disintegrating</i>	2	QL
<i>olanzapine-fluoxetine</i>	2	
<i>oxazepam</i>	2	
<i>paliperidone</i>	2	QL
<i>paroxetine hcl oral suspension</i>	2	ST; HSA+
<i>paroxetine hcl oral tablet</i>	1	HSA+; QL

Drug Name	Drug Tier	Requirements / Limits
<i>paroxetine hcl oral tablet extended release 24 hr</i>	2	ST; QL
<i>perphenazine</i>	2	
<i>perphenazine-amitriptyline</i>	2	
<i>phenelzine</i>	2	
<i>pimozide</i>	2	
<i>procentra</i>	2	PA
<i>quetiapine</i>	2	QL
<i>ramelteon</i>	2	QL
REXULTI	3	QL
<i>risperidone oral solution</i>	2	HSA+
<i>risperidone oral tablet</i>	1	HSA+; QL
<i>risperidone oral tablet,disintegrating</i>	2	QL
<i>sertraline oral capsule</i>	2	ST; HSA+; QL
<i>sertraline oral concentrate</i>	2	HSA+
<i>sertraline oral tablet</i>	1	HSA+; QL
<i>sodium oxybate</i>	5	ST; MSP; QL
SPRAVATO	5	PA
SUNOSI	3	PA; QL
<i>temazepam oral capsule 15 mg, 22.5 mg, 7.5 mg</i>	2	QL
<i>temazepam oral capsule 30 mg</i>	1	QL
<i>thioridazine</i>	1	
<i>thiothixene</i>	2	
<i>tranylcypromine</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>trazodone oral tablet 100 mg, 50 mg</i>	1	HSA+
<i>trazodone oral tablet 150 mg, 300 mg</i>	2	HSA+
<i>triazolam</i>	2	QL
<i>trifluoperazine</i>	1	
<i>trimipramine</i>	2	
<i>venlafaxine oral capsule, extended release 24hr</i>	1	HSA+; QL
<i>venlafaxine oral tablet</i>	2	HSA+; QL
<i>venlafaxine oral tablet extended release 24hr</i>	2	PA; HSA+; QL
<i>vilazodone</i>	2	ST; QL
XYWAV	5	ST; QL
<i>zaleplon</i>	2	QL
<i>zenzedi</i>	2	PA
<i>ziprasidone hcl</i>	2	QL
<i>zolpidem</i>	2	QL
ZURZUVAE	5	QL

AUTONOMIC & CNS DRUGS, NEUROLOGY

MULTIPLE SCLEROSIS AGENTS

AVONEX	5	PA; MSP; QL
BAFIERTAM	5	PA; MSP; QL
BETASERON	5	PA; MSP; QL
<i>cladribine(multiple sclerosis)</i>	5	PA; QL
<i>dimethyl fumarate</i>	2	PA; MSP; QL
<i> fingolimod</i>	5	PA; MSP; QL
<i>glatiramer</i>	5	PA; MSP; QL
<i>glatopa</i>	5	PA; MSP; QL

Drug Name	Drug Tier	Requirements / Limits
KESIMPTA PEN	5	PA; MSP; QL
MAYZENT	5	PA; MSP; QL
MAYZENT STARTER(FOR 1MG MAINT)	5	PA; MSP; QL
MAYZENT STARTER(FOR 2MG MAINT)	5	PA; MSP; QL
PLEGRIDY	5	PA; MSP; QL
REBIF (WITH ALBUMIN)	5	PA; MSP; QL
REBIF REBIDOSE	5	PA; MSP; QL
REBIF TITRATION PACK	5	PA; MSP; QL
<i>teriflunomide</i>	5	PA; MSP; QL
VUMERITY	5	PA; MSP; QL

CARDIOVASCULAR, HYPERTENSION & LIPIDS

ANTIARRHYTHMIC AGENTS

<i>amiodarone</i>	2	
<i>dofetilide</i>	2	
<i>flecainide</i>	2	
<i>mexiletine</i>	2	
MULTAQ	3	
<i>pacerone</i>	2	
<i>propafenone</i>	2	
<i>quinidine gluconate</i>	2	
<i>quinidine sulfate oral tablet 200 mg</i>	1	
<i>quinidine sulfate oral tablet 300 mg</i>	2	
<i>sotalol</i>	2	
<i>sotalol af</i>	2	
SOTYLIZE	3	

Drug Name	Drug Tier	Requirements / Limits
ANTIHYPERTENSIVE THERAPY		
<i>acebutolol</i>	1	CISP; HSA+
<i>aliskiren</i>	2	
<i>amiloride</i>	1	
<i>amiloride-hydrochlorothiazide</i>	1	
<i>amlodipine</i>	1	CISP; HSA+
<i>amlodipine-benazepril oral capsule 10-20 mg, 10-40 mg, 2.5-10 mg, 5-20 mg</i>	1	CISP; HSA+
<i>amlodipine-benazepril oral capsule 5-10 mg, 5-40 mg</i>	2	CISP; CISP-1; HSA+
<i>amlodipine-olmesartan</i>	2	CISP; HSA+
<i>amlodipine-valsartan</i>	2	CISP; HSA+
<i>amlodipine-valsartan-hcthiazid</i>	2	HSA+
<i>atenolol</i>	1	CISP; HSA+
<i>atenolol-chlorthalidone</i>	1	CISP; HSA+
<i>benazepril</i>	1	CISP; HSA+
<i>benazepril-hydrochlorothiazide</i>	1	CISP; HSA+
<i>betaxolol</i>	2	CISP; HSA+
<i>bisoprolol fumarate</i>	2	CISP; HSA+
<i>bisoprolol-hydrochlorothiazide</i>	2	CISP; HSA+
<i>bumetanide</i>	2	
<i>candesartan</i>	2	CISP; HSA+
<i>candesartan-hydrochlorothiazid</i>	2	CISP; HSA+

Drug Name	Drug Tier	Requirements / Limits
<i>captopril</i>	2	CISP; HSA+
<i>captopril-hydrochlorothiazide</i>	2	CISP; HSA+
<i>cartia xt</i>	2	CISP; HSA+
<i>carvedilol</i>	1	CISP; HSA+
<i>carvedilol phosphate</i>	2	
<i>chlorthalidone</i>	1	CISP; HSA+
<i>clonidine</i>	2	QL
<i>clonidine hcl</i>	1	CISP; HSA+
<i>diltiazem</i>	2	CISP; HSA+
<i>dilt-xr</i>	2	CISP; HSA+
<i>doxazosin</i>	2	QL
<i>enalapril maleate oral solution</i>	2	HSA+
<i>enalapril maleate oral tablet 10 mg, 2.5 mg, 5 mg</i>	1	CISP; HSA+
<i>enalapril maleate oral tablet 20 mg</i>	2	CISP; CISP-1; HSA+
<i>enalapril-hydrochlorothiazide</i>	2	CISP; HSA+
<i>eplerenone</i>	2	CISP; HSA+
<i>ethacrynic acid</i>	2	
<i>felodipine</i>	2	CISP; HSA+
<i>fosinopril</i>	1	CISP; HSA+
<i>fosinopril-hydrochlorothiazide</i>	2	CISP; HSA+
<i>furosemide</i>	1	CISP; HSA+
<i>guanfacine</i>	1	
HEMANGEOL	5	PA
<i>hydralazine</i>	1	CISP; HSA+
<i>hydrochlorothiazide</i>	1	CISP; HSA+
<i>indapamide</i>	1	CISP; HSA+
<i>irbesartan</i>	1	CISP; HSA+

Drug Name	Drug Tier	Requirements / Limits
<i>irbesartan-hydrochlorothiazide</i>	1	CISP; HSA+
<i>isosorbide-hydralazine</i>	2	
<i>isradipine</i>	2	CISP; HSA+
KERENDIA ORAL TABLET 10 MG, 20 MG	3	PA; QL
KERENDIA ORAL TABLET 40 MG	3	PA
<i>labetalol</i>	2	CISP; HSA+
<i>lisinopril</i>	1	CISP; HSA+
<i>lisinopril-hydrochlorothiazide</i>	1	CISP; HSA+
<i>losartan</i>	1	CISP; HSA+
<i>losartan-hydrochlorothiazide</i>	1	CISP; HSA+
<i>matzim la</i>	2	CISP; HSA+
<i>methyldopa</i>	1	
<i>metolazone</i>	2	CISP; HSA+
<i>metoprolol succinate</i>	2	CISP; HSA+
<i>metoprolol ta-hydrochlorothiaz</i>	2	CISP; HSA+
<i>metoprolol tartrate</i>	1	CISP; HSA+
<i>metyrosine</i>	2	PA
<i>minoxidil</i>	2	
<i>moexipril</i>	2	CISP; HSA+
<i>nadolol</i>	2	CISP; HSA+
<i>nebivolol</i>	2	CISP; HSA+
<i>nicardipine</i>	2	CISP; HSA+
<i>nifedipine</i>	2	CISP; HSA+
<i>nimodipine</i>	2	
<i>nisoldipine</i>	2	CISP; HSA+
<i>olmesartan</i>	1	CISP; HSA+

Drug Name	Drug Tier	Requirements / Limits
<i>olmesartan-amlodipin-hcthiazid oral tablet 20-5-12.5 mg, 40-10-12.5 mg, 40-10-25 mg, 40-5-12.5 mg</i>	2	CISP; HSA+
<i>olmesartan-amlodipin-hcthiazid oral tablet 40-5-25 mg</i>	2	HSA+
<i>olmesartan-hydrochlorothiazide</i>	1	CISP; HSA+
<i>perindopril erbumine</i>	2	CISP; HSA+
<i>phenoxybenzamine</i>	2	PA
<i>pindolol</i>	2	CISP; HSA+
<i>prazosin</i>	2	
<i>propranolol oral capsule, extended release 24 hr</i>	2	CISP; HSA+
<i>propranolol oral solution</i>	1	CISP; HSA+
<i>propranolol oral tablet</i>	1	CISP; HSA+
<i>quinapril oral tablet 10 mg</i>	2	CISP; CISP-1; HSA+
<i>quinapril oral tablet 20 mg, 40 mg, 5 mg</i>	1	CISP; HSA+
<i>quinapril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg</i>	1	CISP; HSA+
<i>quinapril-hydrochlorothiazide oral tablet 20-25 mg</i>	2	CISP; HSA+
<i>ramipril oral capsule 1.25 mg</i>	2	CISP; HSA+

Drug Name	Drug Tier	Requirements / Limits
<i>ramipril oral capsule 10 mg, 2.5 mg, 5 mg</i>	1	CISP; HSA+
<i>spironolactone</i>	1	CISP; HSA+
<i>spironolacton-hydrochlorothiaz</i>	1	CISP; HSA+
<i>telmisartan</i>	1	CISP; HSA+
<i>telmisartan-hydrochlorothiazid</i>	2	CISP; HSA+
<i>terazosin</i>	2	QL
<i>tiadylt er</i>	2	CISP; HSA+
<i>timolol maleate</i>	2	CISP; HSA+
<i>torse mide</i>	1	CISP; HSA+
<i>trandolapril</i>	1	CISP; HSA+
<i>trandolapril-verapamil</i>	2	CISP; HSA+
<i>triamterene-hydrochlorothiazid</i>	1	CISP; HSA+
UPTRAVI	5	PA; MSP; QL
<i>valsartan oral solution</i>	2	HSA+
<i>valsartan oral tablet</i>	2	CISP; HSA+
<i>valsartan-hydrochlorothiazide</i>	2	CISP; HSA+
<i>verapamil oral capsule, 24 hr er pellet ct</i>	2	ST; CISP; HSA+
<i>verapamil oral capsule, ext rel. pellets 24 hr</i>	2	CISP; HSA+
<i>verapamil oral tablet</i>	1	CISP; HSA+
<i>verapamil oral tablet extended release</i>	2	CISP; HSA+
CARDIAC GLYCOSIDES		
<i>digoxin</i>	2	HSA+

Drug Name	Drug Tier	Requirements / Limits
COAGULATION THERAPY		
ADVATE	5	PA; MSP
ADYNOVATE	5	PA; MSP
AFSTYLA	5	PA; MSP
ALHEMO PEN	5	PA; MSP
ALPROLIX	5	PA; MSP
ALTUVIIIIO	5	PA; MSP
<i>aminocaproic acid</i>	2	
<i>aspirin-dipyridamole</i>	2	HSA+
BENEFIX	5	PA; MSP
CABLIVI	5	PA
CEPROTIN (BLUE BAR)	5	PA; MSP
CEPROTIN (GREEN BAR)	5	PA; MSP
<i>cilostazol</i>	1	
<i>clopidogrel oral tablet 300 mg</i>	2	CISP; CISP-1; HSA+
<i>clopidogrel oral tablet 75 mg</i>	1	CISP; HSA+
COAGADEX	5	PA; MSP
<i>dabigatran etexilate</i>	2	HSA+
<i>dipyridamole</i>	2	HSA+
DOPTELET (15 TAB PACK)	5	PA; MSP; QL
DOPTELET SPRINKLE	5	PA; MSP; QL
ELIQUIS	3	
ELIQUIS DVT-PE TREAT 30D START	3	
ELIQUIS SPRINKLE	3	
ELOCTATE	5	PA; MSP

Drug Name	Drug Tier	Requirements / Limits
<i>eltrombopag olamine</i>	5	PA; MSP
<i>enoxaparin</i>	5	SP
ESPEROCT	5	PA; MSP
<i>fondaparinux</i>	5	SP
FRAGMIN	5	SP
HEMLIBRA	5	PA; MSP
<i>hep flush-10 (pf)</i>	1	
<i>heparin (porcine) in 0.9% nacl</i>	1	
<i>heparin (porcine) in 5 % dex</i>	1	
<i>heparin (porcine) in nacl (pf)</i>	1	
<i>heparin (porcine) injection cartridge</i>	1	
<i>heparin (porcine) injection solution 1,000 unit/ml, 20,000 unit/ml</i>	1	
<i>heparin (porcine) injection solution 10,000 unit/ml, 5,000 unit/ml</i>	2	
<i>heparin (porcine) injection syringe</i>	1	
<i>heparin lock flush (porcine)</i>	1	
<i>heparin lockflush(porcine)(pf) intravenous syringe 10 unit/ml</i>	1	
<i>heparin lockflush(porcine)(pf) intravenous syringe 100 unit/ml</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>heparin(porcine) in 0.45% nacl</i>	1	
<i>heparin, porcine (pf)</i>	1	
HYMPAVZI PEN	5	PA; MSP
IDELVION	5	PA; MSP
JIVI	5	PA; MSP
KOVALTRY	5	PA; MSP
NOVOEIGHT	5	PA; MSP
<i>pentoxifylline</i>	1	
<i>phytonadione (vitamin k1) injection</i>	2	
<i>phytonadione (vitamin k1) oral</i>	2	QL
<i>prasugrel hcl</i>	2	HSA+
<i>rivaroxaban</i>	2	HSA+
SEVENFACT	5	PA; MSP
TAVALISSE	5	PA; QL
<i>ticagrelor</i>	2	HSA+
TRETTEN	5	PA; MSP
<i>vitamin k</i>	2	
<i>vitamin k1</i>	2	
VONVENDI	5	PA; MSP
<i>warfarin</i>	1	HSA+
WILATE	5	PA; MSP
XARELTO	3	
XARELTO DVT-PE TREAT 30D START	3	
XYNTHA	5	PA; MSP
XYNTHA SOLOFUSE	5	PA; MSP

LIPID/CHOLESTEROL LOWERING AGENTS

Drug Name	Drug Tier	Requirements / Limits
<i>amlodipine-atorvastatin</i>	2	CISP; HSA+; QL
<i>atorvastatin oral tablet 10 mg, 20 mg</i>	1	CISP; HSA+; ACA; QL
<i>atorvastatin oral tablet 40 mg, 80 mg</i>	1	CISP; HSA+; QL
<i>cholestyramine (with sugar)</i>	2	CISP; HSA+
<i>cholestyramine light oral powder</i>	2	HSA+
<i>cholestyramine light oral powder in packet</i>	2	CISP; HSA+
<i>colesevelam</i>	2	
<i>colestipol oral granules</i>	2	HSA+
<i>colestipol oral packet</i>	2	HSA+
<i>colestipol oral tablet</i>	2	CISP; HSA+
<i>ezetimibe</i>	2	CISP; HSA+
<i>ezetimibe-simvastatin</i>	2	CISP; HSA+; QL
<i>fenofibrate micronized oral capsule 130 mg</i>	2	ST; CISP; HSA+
<i>fenofibrate micronized oral capsule 134 mg, 200 mg, 43 mg, 67 mg</i>	2	CISP; HSA+
<i>fenofibrate nanocrystallized</i>	2	CISP; HSA+
<i>fenofibrate oral tablet 120 mg</i>	2	PA; CISP; HSA+
<i>fenofibrate oral tablet 160 mg, 54 mg</i>	2	CISP; HSA+
<i>fenofibrate oral tablet 40 mg</i>	2	ST; CISP; HSA+

Drug Name	Drug Tier	Requirements / Limits
<i>fenofibric acid</i>	2	HSA+
<i>fenofibric acid (choline)</i>	2	CISP; HSA+
<i>gemfibrozil</i>	2	CISP; HSA+
<i>icosapent ethyl</i>	2	HSA+
JUXTAPID	5	PA; MSP
<i>lovastatin</i>	1	CISP; HSA+; ACA; QL
NEXLETOL	3	PA
NEXLIZET	3	PA
<i>niacin oral tablet</i>	2	PA; CISP; HSA+
<i>niacin oral tablet extended release 24 hr</i>	2	CISP; HSA+
<i>omega-3 acid ethyl esters</i>	2	
<i>pitavastatin calcium</i>	2	CISP; HSA+; ACA; QL
<i>pravastatin</i>	1	CISP; HSA+; ACA; QL
<i>prevalite oral powder</i>	2	HSA+
<i>prevalite oral powder in packet</i>	2	CISP; HSA+
REPATHA PUSHTRONEX	3	PA; QL
REPATHA SURECLICK	3	PA; QL
REPATHA SYRINGE	3	PA; QL
<i>rosuvastatin oral tablet 10 mg, 5 mg</i>	1	CISP; HSA+; ACA; QL
<i>rosuvastatin oral tablet 20 mg, 40 mg</i>	1	CISP; HSA+; QL

Drug Name	Drug Tier	Requirements / Limits
<i>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1	CISP; HSA+; ACA; QL
<i>simvastatin oral tablet 80 mg</i>	1	CISP; HSA+; QL
MISCELLANEOUS CARDIOVASCULAR AGENTS		
ATTRUBY	5	PA
CAMZYOS	5	PA; MSP; QL
ENTRESTO SPRINKLE	3	QL
FILSPARI	5	PA; QL
<i>ivabradine</i>	2	PA
MYQORZO	5	PA; QL
<i>ranolazine</i>	2	
<i>sacubitril-valsartan</i>	2	QL
VANRAFIA	5	PA
VERQUVO	3	QL
VYNDAMAX	5	PA; MSP
VYNDAQEL	5	PA; MSP
NITRATES		
<i>isosorbide dinitrate oral tablet 10 mg, 40 mg, 5 mg</i>	1	
<i>isosorbide dinitrate oral tablet 20 mg, 30 mg</i>	2	
<i>isosorbide mononitrate oral tablet 10 mg</i>	2	
<i>isosorbide mononitrate oral tablet 20 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>isosorbide mononitrate oral tablet extended release 24 hr</i>	2	
<i>nitro-bid</i>	2	
<i>nitroglycerin sublingual</i>	1	
<i>nitroglycerin transdermal</i>	2	
<i>nitroglycerin translingual</i>	2	
<i>nitro-time</i>	1	
DERMATOLOGICALS/TOPICAL THERAPY		
ANTIPSORIATIC / ANTISEBORRHEIC		
<i>acitretin</i>	2	
<i>calcipotriene</i>	2	QL
<i>calcipotriene-betamethasone</i>	2	ST; QL
<i>calcitriol</i>	2	
ENSTILAR	3	ST; QL
<i>hydrocortisone-pramoxine</i>	2	ST
ICOTYDE	5	PA; MSP
IMULDOSA	5	PA; QL
SELARSDI	5	PA; MSP; QL
<i>selenium sulfide topical lotion</i>	2	
<i>selenium sulfide topical shampoo 2.25 %</i>	1	
<i>selenium sulfide topical shampoo 2.3 %</i>	2	

Drug Name	Drug Tier	Requirements / Limits
SKYRIZI	5	PA; MSP; QL
SOTYKTU	5	PA; MSP; QL
<i>sulfacetamide sodium topical cleanser</i>	2	
<i>sulfacetamide sodium topical cleanser, gel</i>	2	
<i>sulfacetamide sodium topical shampoo</i>	1	
TALTZ AUTOINJECTOR	5	PA; MSP; QL
TALTZ AUTOINJECTOR (2 PACK)	5	PA; MSP; QL
TALTZ AUTOINJECTOR (3 PACK)	5	PA; MSP; QL
TALTZ SYRINGE	5	PA; MSP; QL
TREMFYA	5	PA; MSP; QL
TREMFYA ONE-PRESS	5	PA; MSP; QL
TREMFYA PEN	5	PA; MSP; QL
TREMFYA PEN INDUCTION PK(2PEN)	5	PA; MSP; QL
USTEKINUMAB-TTWE	5	PA; MSP; QL
VTAMA	3	ST; QL
YESINTEK	5	PA; MSP; QL
ZORYVE TOPICAL CREAM 0.05 %	3	ST
ZORYVE TOPICAL CREAM 0.15 %	3	ST; QL

BURN THERAPY

Drug Name	Drug Tier	Requirements / Limits
<i>silver sulfadiazine</i>	1	
<i>ssd</i>	1	
MISCELLANEOUS DERMATOLOGICALS		
ADBRY	5	PA; MSP; QL
<i>ammonium lactate</i>	2	
ANZUPGO	5	ST; QL
CIBINQO	5	PA; MSP; QL
<i>diclofenac sodium</i>	2	QL
DUPIXENT PEN	5	PA; MSP; QL
DUPIXENT SYRINGE	5	PA; MSP; QL
EBGLYSS PEN	5	PA; MSP; QL
EBGLYSS SYRINGE	5	PA; MSP
EUCRISA	3	PA; QL
<i>fluorouracil</i>	2	
<i>imiquimod</i>	2	
<i>methoxsalen</i>	2	
<i>methyl salicylate</i>	2	
<i>pimecrolimus</i>	2	PA; QL
<i>podofilox topical gel</i>	2	ST; QL
<i>podofilox topical solution</i>	2	
<i>tacrolimus</i>	2	PA; QL
VALCHLOR	5	PA; MSP
<i>wintergreen oil</i>	2	
THERAPY FOR ACNE		
<i>accutane</i>	2	
<i>adapalene topical cream</i>	2	
<i>adapalene topical gel</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>adapalene topical gel with pump</i>	2	
<i>adapalene topical solution</i>	2	
<i>adapalene topical swab</i>	2	ST
<i>adapalene-benzoyl peroxide</i>	2	
<i>amnesteem</i>	2	
<i>avar</i>	2	ST
<i>azelaic acid</i>	2	
<i>benzepro</i>	2	
<i>benzoyl peroxide topical cleanser</i>	1	
<i>benzoyl peroxide topical foam</i>	2	
<i>bp 10-1</i>	2	ST
<i>brimonidine</i>	2	PA
<i>claravis</i>	2	
<i>clindacin</i>	2	ST; QL
<i>clindacin etz</i>	1	
<i>clindacin p</i>	1	
<i>clindamycin phosphate topical foam</i>	2	ST; QL
<i>clindamycin phosphate topical gel</i>	2	QL
<i>clindamycin phosphate topical gel, once daily</i>	2	ST; QL
<i>clindamycin phosphate topical lotion</i>	2	QL

Drug Name	Drug Tier	Requirements / Limits
<i>clindamycin phosphate topical solution</i>	2	QL
<i>clindamycin phosphate topical swab</i>	2	
<i>clindamycin-benzoyl peroxide topical gel</i>	2	
<i>clindamycin-benzoyl peroxide topical gel with pump 1.2 %(1 % base) -3.75 %</i>	2	DAW-9
<i>clindamycin-benzoyl peroxide topical gel with pump 1-5 %, 1.2-2.5 %</i>	2	
<i>clindamycin-tretinoin</i>	2	
<i>dapsone</i>	2	
<i>ery pads</i>	2	
<i>erythromycin with ethanol</i>	2	
<i>erythromycin-benzoyl peroxide</i>	2	
FINACEA	3	ST
<i>isotretinoin</i>	2	DAW-9
<i>ivermectin</i>	2	DAW-9; QL
<i>metronidazole</i>	2	
<i>neuac</i>	2	
<i>rosadan</i>	2	
<i>sss 10-5 topical cream</i>	2	
<i>sss 10-5 topical foam</i>	2	ST

Drug Name	Drug Tier	Requirements / Limits
<i>sulfacetamide sodium-sulfur topical cleanser 10-2 %</i> , 9-4.5 %, 9.8-4.8 %	2	ST
<i>sulfacetamide sodium-sulfur topical cleanser 10-5 % (w/w)</i> , 9-4 %	2	
<i>sulfacetamide sodium-sulfur topical cream 10-2 %</i> , 9.8-4.8 %	2	ST
<i>sulfacetamide sodium-sulfur topical cream 10-5 % (w/w)</i>	2	
<i>sulfacetamide sodium-sulfur topical lotion</i>	2	ST
<i>sulfacetamide sodium-sulfur topical pads, medicated</i>	2	
<i>sulfacetamide sodium-sulfur topical suspension</i>	2	ST
<i>sulfacetamide-sulfur 9-4% wash</i>	2	ST
<i>sulfacleanse 8-4</i>	2	ST
<i>tazarotene topical cream</i>	2	DAW-9
<i>tazarotene topical gel</i>	2	
<i>tretinoin</i>	2	
<i>tretinoin microspheres topical gel</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>tretinoin microspheres topical gel with pump 0.04 %</i> , 0.1 %	2	
<i>tretinoin microspheres topical gel with pump 0.08 %</i>	2	DAW-9
<i>zenatane</i>	2	
TOPICAL ANESTHETICS		
<i>dermacinrx lidocan</i>	2	ST
<i>lidocaine hcl</i>	1	
<i>lidocaine hcl-hydrocortison ac</i>	2	
<i>lidocaine topical adhesive patch, medicated</i>	2	ST
<i>lidocaine topical ointment</i>	2	QL
<i>lidocaine-prilocaine topical cream</i>	2	QL
<i>lidocaine-prilocaine topical kit</i>	2	
<i>lidocan iii</i>	2	ST
<i>lidocan iv</i>	2	ST
<i>lidocan v</i>	2	ST
<i>lidocort</i>	2	
ZTLIDO	3	ST
TOPICAL ANTIBACTERIALS		
<i>gentamicin</i>	2	QL
<i>lugols</i>	1	
<i>mupirocin</i>	2	QL
<i>mupirocin calcium</i>	2	ST; QL
<i>strong iodine</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>sulfacetamide sodium (acne)</i>	2	
SULFAMYLON	3	
TOPICAL ANTIFUNGALS		
<i>ciclodan topical cream</i>	2	QL
<i>ciclodan topical solution</i>	2	
<i>ciclopirox topical cream</i>	2	QL
<i>ciclopirox topical gel</i>	2	QL
<i>ciclopirox topical shampoo</i>	2	QL
<i>ciclopirox topical solution</i>	2	
<i>ciclopirox topical suspension</i>	2	QL
<i>clotrimazole</i>	2	QL
<i>clotrimazole-betamethasone</i>	2	QL
<i>econazole nitrate</i>	2	QL
EXELDERM	3	QL
<i>ketconazole topical cream</i>	2	QL
<i>ketconazole topical foam</i>	2	ST; QL
<i>ketconazole topical shampoo</i>	1	QL
<i>ketodan</i>	2	ST; QL
<i>ketodan kit</i>	2	ST
<i>klayesta</i>	2	QL
<i>nystatin</i>	2	QL
<i>nystatin-triamcinolone</i>	2	QL
<i>nystop</i>	2	QL

Drug Name	Drug Tier	Requirements / Limits
SULCONAZOLE	3	QL
<i>tavaborole</i>	2	ST
TOPICAL ANTIVIRALS		
<i>acyclovir</i>	2	PA; QL
TOPICAL CORTICOSTEROIDS		
<i>ala-cort</i>	2	
<i>alclometasone</i>	2	
<i>amcinonide</i>	2	ST
<i>beser</i>	2	ST
<i>betamethasone dipropionate</i>	2	
<i>betamethasone valerate topical cream</i>	2	
<i>betamethasone valerate topical foam</i>	2	ST
<i>betamethasone valerate topical lotion</i>	2	
<i>betamethasone valerate topical ointment</i>	2	
<i>betamethasone, augmented</i>	2	
<i>clobetasol scalp</i>	2	QL
<i>clobetasol topical cream</i>	2	QL
<i>clobetasol topical foam</i>	2	ST; QL
<i>clobetasol topical gel</i>	2	QL
<i>clobetasol topical lotion</i>	2	ST; QL
<i>clobetasol topical ointment</i>	2	QL

Drug Name	Drug Tier	Requirements / Limits
<i>clobetasol topical shampoo</i>	2	ST; QL
<i>clobetasol topical spray, non-aerosol</i>	2	ST; QL
<i>clobetasol-emollient topical cream</i>	2	QL
<i>clobetasol-emollient topical foam</i>	2	ST; QL
<i>clodan</i>	2	ST; QL
<i>desonide topical cream</i>	2	
<i>desonide topical gel</i>	2	ST
<i>desonide topical lotion</i>	2	ST
<i>desonide topical ointment</i>	2	
<i>desoximetasone</i>	2	ST
<i>fluocinolone</i>	2	
<i>fluocinolone and shower cap</i>	2	
<i>fluocinonide topical cream 0.05 %</i>	2	QL
<i>fluocinonide topical cream 0.1 %</i>	2	ST; QL
<i>fluocinonide topical gel</i>	2	QL
<i>fluocinonide topical ointment</i>	2	QL
<i>fluocinonide topical solution</i>	2	QL
<i>fluocinonide-e</i>	2	QL
<i>fluticasone propionate topical cream</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>fluticasone propionate topical lotion</i>	2	ST
<i>fluticasone propionate topical ointment</i>	2	
<i>halobetasol propionate topical cream</i>	2	
<i>halobetasol propionate topical foam</i>	2	ST
<i>halobetasol propionate topical ointment</i>	2	
<i>hydrocortisone butyrate topical cream</i>	2	QL
<i>hydrocortisone butyrate topical lotion</i>	2	ST; QL
<i>hydrocortisone butyrate topical ointment</i>	2	ST; QL
<i>hydrocortisone butyrate topical solution</i>	2	ST; QL
<i>hydrocortisone topical cream</i>	1	
<i>hydrocortisone topical lotion 2 %</i>	1	
<i>hydrocortisone topical lotion 2.5 %</i>	2	
<i>hydrocortisone topical ointment</i>	1	
<i>hydrocortisone topical solution</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>hydrocortisone valerate</i>	2	
<i>lexette</i>	2	ST
<i>mometasone</i>	2	
<i>prednicarbate</i>	2	
<i>scalacort</i>	2	
<i>tovet emollient</i>	2	ST; QL
<i>triamcinolone acetonide topical aerosol</i>	1	ST; QL
<i>triamcinolone acetonide topical cream</i>	1	
<i>triamcinolone acetonide topical lotion</i>	1	
<i>triamcinolone acetonide topical ointment 0.025 %, 0.1 %, 0.5 %</i>	1	
<i>triamcinolone acetonide topical ointment 0.05 %</i>	1	ST
<i>triderm</i>	1	ST
TOPICAL ENZYMES		
SANTYL	3	QL
TOPICAL SCABICIDES / PEDICULICIDES		
<i>malathion</i>	2	
<i>permethrin</i>	2	
<i>spinosad</i>	2	
DIAGNOSTICS & MISCELLANEOUS AGENTS		
IRRIGATING SOLUTIONS		
<i>lactated ringers</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>neomycin-polymyxin b gu</i>	2	
MISCELLANEOUS AGENTS		
<i>acamprosate</i>	2	
<i>acetic acid</i>	2	
<i>anagrelide</i>	2	
ARALAST NP	5	PA; MSP
<i>caffeine citrate</i>	2	
<i>carglumic acid</i>	5	PA
<i>cevimeline</i>	2	
CHEMET	3	PA
<i>deferasirox</i>	5	PA; MSP
<i>deferiprone</i>	5	PA; MSP
<i>disulfiram</i>	2	
EMPAVELI	5	PA
FABHALTA	5	PA
FERRIPROX	5	PA
FERRIPROX (2 TIMES A DAY)	5	PA
GLASSIA	5	PA; MSP
<i>glutamine (sickle cell)</i>	5	PA; MSP
<i>glycerol phenylbutyrate</i>	5	PA; MSP
INCRELEX	5	
<i>levocarnitine</i>	2	
<i>levocarnitine (with sugar)</i>	2	
<i>midodrine</i>	2	
<i>nitisinone</i>	5	PA; MSP
NITYR	5	PA; MSP
PHEBURANE	5	PA; MSP
PROLASTIN-C	5	PA; MSP

Drug Name	Drug Tier	Requirements / Limits
REZDIFFRA	5	PA; MSP; QL
RHAPSIDO	3	PA
<i>riluzole</i>	2	PA
<i>risedronate</i>	2	HSA+; QL
<i>sodium chloride</i>	2	
<i>sodium chloride 0.9 %</i>	2	
<i>sodium phenylbutyrate</i>	2	PA
<i>tiopronin oral tablet</i>	5	PA; MSP
<i>tiopronin oral tablet, delayed release (dr/ec)</i>	5	PA
<i>trientine</i>	2	PA
<i>venxxiva</i>	5	PA
VOYDEYA	5	PA
<i>water for irrigation, sterile</i>	2	
XURIDEN	5	PA
SMOKING DETERRENENTS		
<i>bupropion hcl (smoking deter)</i>	2	ACA
<i>nicorette buccal gum</i>	2	ACA; OTC
NICORETTE BUCCAL LOZENGE	3	OTC
NICORETTE BUCCAL MINI LOZENGE	3	OTC
<i>nicotine</i>	2	ACA; OTC
<i>nicotine (polacrilex)</i>	2	ACA; OTC
<i>stop smoking aid</i>	2	ACA; OTC
<i>varenicline tartrate</i>	2	ACA

Drug Name	Drug Tier	Requirements / Limits
EAR, NOSE & THROAT MEDICATIONS		
MISCELLANEOUS AGENTS		
<i>azelastine nasal spray, non-aerosol 137 mcg (0.1 %)</i>	2	QL
<i>azelastine nasal spray, non-aerosol 205.5 mcg (0.15 %)</i>	2	
<i>chlorhexidine gluconate</i>	2	
<i>denta 5000 plus</i>	1	
<i>denta 5000 plus sensitive</i>	2	
<i>dentagel</i>	1	
<i>fluoride (sodium) dental cream</i>	1	
<i>fluoride (sodium) dental gel</i>	2	
<i>fluoride (sodium) dental paste</i>	2	
<i>fluoride (sodium) dental solution</i>	1	
<i>ipratropium bromide</i>	1	QL
<i>kourzeq</i>	2	
<i>olopatadine</i>	2	QL
<i>paroex oral rinse</i>	2	
<i>periogard</i>	2	
<i>pilocarpine hcl</i>	2	
<i>sf</i>	1	
<i>sf 5000 plus</i>	1	
<i>sodium fluoride 5000 plus</i>	2	
<i>sodium fluoride-pot nitrate</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>triamcinolone acetonide</i>	2	
MISCELLANEOUS OTIC PREPARATIONS		
<i>acetic acid</i>	2	
<i>ciprofloxacin hcl</i>	2	
<i>flac otic oil</i>	2	
<i>fluocinolone acetonide oil</i>	2	
<i>hydrocortisone-acetic acid</i>	2	
<i>ofloxacin</i>	2	
OTIC STEROID / ANTIBIOTIC		
<i>ciprofloxacin-dexamethasone</i>	2	
<i>ciprofloxacin-hydrocortisone</i>	2	
CORTISPORIN-TC	3	
<i>neomycin-polymyxin-hc</i>	2	
OTOVEL	3	
ENDOCRINE/DIABETES		
ADRENAL HORMONES		
<i>cortisone</i>	1	
<i>deflazacort</i>	5	PA; MSP
<i>dexabliss</i>	1	PA
<i>dexamethasone intensol</i>	2	
<i>dexamethasone oral elixir</i>	2	
<i>dexamethasone oral solution</i>	1	
<i>dexamethasone oral tablet</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>dexamethasone oral tablets,dose pack</i>	1	PA
<i>fludrocortisone</i>	1	
<i>hydrocortisone</i>	1	
<i>hydrocortisone sod succinate</i>	2	
<i>jaythari</i>	5	PA
<i>kymbee</i>	5	PA
<i>methylprednisolone</i>	2	
<i>millipred</i>	2	
<i>millipred dp</i>	2	
<i>prednisolone</i>	2	
<i>prednisolone sodium phosphate oral solution 10 mg/5 ml, 15 mg/5 ml (3 mg/ml), 20 mg/5 ml (4 mg/ml), 5 mg base/5 ml (6.7 mg/5 ml)</i>	2	
<i>prednisolone sodium phosphate oral solution 25 mg/5 ml (5 mg/ml)</i>	1	
<i>prednisolone sodium phosphate oral tablet,disintegrating</i>	2	
<i>prednisone intensol</i>	2	
<i>prednisone oral solution</i>	2	
<i>prednisone oral tablet</i>	1	
<i>prednisone oral tablet,delayed release (dr/ec)</i>	1	PA
<i>prednisone oral tablets,dose pack</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>pyquvi</i>	5	PA
SOLU-CORTEF	3	
ANTITHYROID AGENTS		
<i>methimazole</i>	1	
<i>potassium iodide</i>	2	
<i>propylthiouracil</i>	2	
BLOOD GLUCOSE MONITORING DEVICES & SUPPLIES		
DEXCOM G6 RECEIVER	3	ST; QL
DEXCOM G6 SENSOR	3	ST; HSA+; QL
DEXCOM G6 TRANSMITTER	3	ST; HSA+; QL
DEXCOM G7 15 DAY SENSOR	3	ST; HSA+; QL
DEXCOM G7 RECEIVER	3	ST; QL
DEXCOM G7 SENSOR	3	ST; HSA+; QL
FREESTYLE CONTROL	3	CISP-1; HSA+; OTC
FREESTYLE FREEDOM	3	CISP-1; HSA+; OTC
FREESTYLE FREEDOM LITE	3	CISP-1; HSA+; OTC
FREESTYLE INSULINX	3	OTC
FREESTYLE INSULINX STRIP	3	CISP-1; HSA+; OTC
FREESTYLE INSULINX TEST STRIPS	3	CISP-1; HSA+; OTC
FREESTYLE LIBRE 14 DAY READER	3	ST; CISP-1; HSA+

Drug Name	Drug Tier	Requirements / Limits
FREESTYLE LIBRE 14 DAY SENSOR	3	ST; CISP-1; HSA+; QL
FREESTYLE LIBRE 2 PLUS SENSOR	3	ST; CISP-1; HSA+; QL
FREESTYLE LIBRE 2 READER	3	ST; CISP-1; HSA+; QL
FREESTYLE LIBRE 2 SENSOR	3	ST; CISP-1; HSA+; QL
FREESTYLE LIBRE 3 PLUS SENSOR	3	ST; CISP-1; HSA+; QL
FREESTYLE LIBRE 3 READER	3	ST; CISP-1; QL
FREESTYLE LIBRE 3 SENSOR	3	ST; CISP-1; HSA+; QL
FREESTYLE LITE METER	3	CISP-1; HSA+; OTC
FREESTYLE LITE STRIPS	3	CISP-1; HSA+; OTC
FREESTYLE PRECISION NEO STRIPS	3	ST; CISP-1; HSA+; OTC
FREESTYLE TEST	3	CISP-1; HSA+; OTC
GLUCOSE KETONE CONTROL SOLN	3	OTC
PRECISION XTRA KETONE-GLUCOSE	3	OTC
PRECISION XTRA MONITOR	3	OTC
PRECISION XTRA TEST	3	ST; OTC

Drug Name	Drug Tier	Requirements / Limits
TRUE METRIX AIR GLUCOSE METER	3	CISP-1; HSA+; OTC
TRUE METRIX GLUCOSE METER	3	CISP-1; HSA+; OTC
TRUE METRIX GO GLUCOSE METER	3	CISP-1; HSA+; OTC
TRUE METRIX LEVEL 1	3	OTC

DIABETES, SUPPLIES, & DURABLE MEDICAL EQUIPMENT

INSULIN SYRINGE-NEEDLE U-100	3	CISP-1
OMNIPOD 5 INTRO(G6/LIBRE2 PLUS)	3	QL

GLUCOSE ELEVATING AGENTS

BAQSIMI	3	QL
<i>diazoxide</i>	2	
<i>glucagon emergency kit (human)</i>	2	CISP; HSA+; QL
GVOKE	3	QL
GVOKE HYPOPEN 2-PACK	3	QL
GVOKE PFS 2-PACK SYRINGE	3	QL

INSULIN SYRINGES/MISCELLANEOUS DURABLE MEDICAL EQU

AUTOJECT 2 INJECTION DEVICE	3	OTC
AUTOPEN 1 TO 21 UNITS	3	OTC

Drug Name	Drug Tier	Requirements / Limits
BD MICROTAINER LANCET	3	CISP-1; HSA+; OTC
BD SPECIALTY USE NEEDLES	3	CISP-1; HSA+
CEQR SIMPLICITY	3	
ILET STARTER KIT-INSET	3	
LANCETS	3	CISP-1; HSA+; OTC
LANCING DEVICE	3	CISP-1; HSA+; OTC
OMNIPOD 5 (G6/LIBRE 2 PLUS)	3	QL
OMNIPOD 5 G6-G7 INTRO KT(GEN5)	3	QL
OMNIPOD 5 G6-G7 PODS (GEN 5)	3	QL
OMNIPOD DASH INTRO KIT (GEN 4)	3	QL
OMNIPOD DASH PODS (GEN 4)	3	QL
TWIIST STARTER KIT	3	
V-GO 20	3	
V-GO 30	3	
V-GO 40	3	

INSULIN THERAPY

HUMALOG JUNIOR KWIKPEN U-100	3	INS; HSA+
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Drug Name	Drug Tier	Requirements / Limits
HUMALOG KWIKPEN INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML	3	INS; HSA+
HUMALOG KWIKPEN INSULIN SUBCUTANEOUS INSULIN PEN 200 UNIT/ML (3 ML)	3	INS; HSA+
HUMALOG MIX 50-50 KWIKPEN	3	INS; HSA+
HUMALOG MIX 75-25 KWIKPEN	3	INS; HSA+
HUMALOG MIX 75-25(U-100)INSULN	3	INS; HSA+
HUMALOG TEMPO PEN(U-100)INSULN	3	ST; INS; HSA+
HUMALOG U-100 INSULIN	3	INS; HSA+
HUMULIN 70/30 U-100 INSULIN	3	INS; HSA+
HUMULIN 70/30 U-100 KWIKPEN	3	INS; HSA+
HUMULIN N NPH INSULIN KWIKPEN	3	INS; HSA+
HUMULIN N NPH U-100 INSULIN	3	INS; HSA+
HUMULIN R REGULAR U-100 INSULN	3	INS; HSA+
HUMULIN R U-500 (CONC) KWIKPEN	3	INS; HSA+

Drug Name	Drug Tier	Requirements / Limits
INSULIN GLARGINE-YFGN	3	INS; HSA+
INSULIN LISPRO	3	INS; HSA+
INSULIN LISPRO PROTAMIN-LISPRO	3	INS; HSA+
LANTUS SOLOSTAR U-100 INSULIN	3	INS; HSA+
LANTUS U-100 INSULIN	3	INS; HSA+
LYUMJEV KWIKPEN U-100 INSULIN	3	INS; HSA+
LYUMJEV KWIKPEN U-200 INSULIN	3	INS; HSA+
LYUMJEV TEMPO PEN(U-100)INSULN	3	ST; INS; HSA+
LYUMJEV U-100 INSULIN	3	INS; HSA+
MERILOG	3	INS
MERILOG SOLOSTAR	3	INS
SEMGLEE(INSULIN GLARGINE-YFGN)	3	INS; HSA+
SEMGLEE(INSULIN GLARG-YFGN)PEN	3	INS; HSA+
SOLIQUA 100/33	3	INS; HSA+; QL
TOUJEO MAX U-300 SOLOSTAR	3	INS; HSA+
TOUJEO SOLOSTAR U-300 INSULIN	3	INS; HSA+

Drug Name	Drug Tier	Requirements / Limits
TRESIBA FLEXTOUCH U-100	3	INS; HSA+
TRESIBA FLEXTOUCH U-200	3	INS; HSA+
TRESIBA U-100 INSULIN	3	INS; HSA+
XULTOPHY 100/3.6	3	INS; HSA+; QL
MISCELLANEOUS HORMONES		
<i>cabergoline</i>	2	QL
<i>calcitonin (salmon)</i>	2	
<i>calcitriol</i>	2	
CERDELGA	5	PA; MSP; QL
<i>cetrotrelax</i>	5	
<i>cinacalcet</i>	2	ST
<i>clomid</i>	2	
<i>clomiphene citrate</i>	2	
CRYSVITA	5	PA; MSP; QL
<i>danazol</i>	2	
<i>desmopressin injection</i>	5	MSP
<i>desmopressin nasal spray with pump</i>	2	
DESMOPRESSIN NASAL SPRAY, NON-AEROSOL	3	
<i>desmopressin oral</i>	2	
<i>doxercalciferol</i>	2	ST
<i>fyremadel</i>	5	
<i>ganirelix</i>	5	ST
GONAL-F	5	ST

Drug Name	Drug Tier	Requirements / Limits
GONAL-F RFF REDI-JECT	5	ST
<i>javygtor</i>	5	PA; MSP
MENOPUR	5	
METHITEST	3	
<i>methyltestosterone</i>	2	
<i>mifepristone</i>	5	PA; MSP
<i>miglustat</i>	5	PA; MSP; QL
<i>milophene</i>	2	
MYALEPT	5	PA; MSP
ORILISSA	3	ST; QL
OVIDREL	5	
PALYNZIQ	5	PA; MSP; QL
<i>paricalcitol intravenous</i>	2	
<i>paricalcitol oral</i>	2	ST
PREGNYL	5	QL
<i>sapropterin</i>	5	PA; MSP
SOMAVERT	5	PA; MSP
STRENSIQ	5	PA
SYNAREL	3	PA
<i>testosterone</i>	2	QL
<i>testosterone cypionate</i>	2	
<i>testosterone enanthate</i>	2	
<i>tolvaptan</i>	5	PA; MSP; QL
<i>tolvaptan (polycystic kidney dis)</i>	5	MSP; QL
XYOSTED	3	QL
<i>zelvysia</i>	5	PA
NON-INSULIN HYPOGLYCEMIC AGENTS		

Drug Name	Drug Tier	Requirements / Limits
<i>acarbose</i>	1	CISP; HSA+
<i>dapagliflozin</i>	2	ST; QL
<i>dapagliflozin-metformin</i>	2	ST; CISP; QL
<i>dapagliflozin-saxagliptin</i>	2	HSA+
<i>glimepiride</i>	1	CISP; HSA+
<i>glipizide</i>	1	CISP; HSA+
<i>glipizide-metformin</i>	1	CISP; HSA+
<i>glyburide</i>	1	CISP; HSA+
<i>glyburide-metformin</i>	1	CISP; HSA+
GLYXAMBI	3	ST; CISP; HSA+; QL
JANUMET	3	ST; CISP; HSA+; QL
JANUMET XR	3	ST; CISP; HSA+; QL
JANUVIA	3	ST; CISP; HSA+; QL
JARDIANCE	3	ST; CISP; HSA+; QL
<i>liraglutide 2-pak 18 mg/3 ml outer, suv</i>	2	ST; CISP; HSA+
<i>liraglutide 2-pak 18 mg/3 ml suv, outer</i>	2	ST; CISP; HSA+
<i>liraglutide 3-pak 18 mg/3 ml outer, suv</i>	2	ST; CISP; HSA+
<i>liraglutide 3-pak 18 mg/3 ml suv, outer</i>	2	ST; CISP; HSA+
<i>liraglutide subcutaneous pen injector 0.6 mg/0.1 ml (18 mg/3 ml)</i>	2	ST; CISP; HSA+; QL
<i>metformin oral solution</i>	2	ST; HSA+

Drug Name	Drug Tier	Requirements / Limits
<i>metformin oral tablet 1,000 mg, 500 mg, 625 mg, 850 mg</i>	1	CISP; HSA+
<i>metformin oral tablet 750 mg</i>	1	ST; CISP; HSA+
<i>metformin oral tablet extended release 24 hr</i>	1	CISP; HSA+; QL
<i>metformin oral tablet osmotic extended release 24hr</i>	2	PA; QL
<i>metformin oral tablet,er gast.retention 24 hr</i>	2	PA; QL
<i>miglitol</i>	2	CISP; HSA+
MOUNJARO	3	ST; CISP; HSA+; QL
<i>nateglinide</i>	2	CISP; HSA+
OZEMPIC	3	ST; CISP; HSA+; QL
<i>pioglitazone</i>	1	CISP; HSA+; QL
<i>pioglitazone-glimepiride</i>	2	CISP; HSA+; QL
<i>pioglitazone-metformin</i>	2	CISP; HSA+; QL
<i>repaglinide</i>	2	CISP; HSA+
RYBELSUS	3	ST; CISP; HSA+; QL
<i>saxagliptin</i>	2	ST; CISP; HSA+; QL
<i>saxagliptin-metformin</i>	2	ST; CISP; HSA+; QL
SYNJARDY	3	ST; CISP; HSA+; QL

Drug Name	Drug Tier	Requirements / Limits
SYNJARDY XR	3	ST; CISP; HSA+; QL
TRIJARDY XR	3	ST
TRULICITY	3	ST; CISP; HSA+; QL

THYROID HORMONES

<i>adthyza</i>	1	
ARMOUR THYROID	3	
<i>evexithroid</i>	1	
<i>levo-t</i>	2	
<i>levothyroxine</i>	1	
<i>levoxyl</i>	1	
<i>liomny</i>	1	
<i>liothyronine</i>	1	
<i>niva thyroid</i>	1	
<i>np thyroid</i>	1	
<i>renthyroid</i>	1	
<i>thyroid (pork)</i>	1	
<i>unithroid</i>	2	

GASTROENTEROLOGY

ANTIDIARRHEALS & ANTISPASMODICS

<i>belladonna alkaloids-opium rectal suppository 16.2-30 mg</i>	1	
<i>belladonna alkaloids-opium rectal suppository 16.2-60 mg</i>	2	
<i>chlordiazepoxide-clidinium</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>dicyclomine oral capsule</i>	1	
<i>dicyclomine oral solution</i>	2	
<i>dicyclomine oral tablet</i>	1	
<i>diphenoxylate-atropine oral liquid</i>	1	
<i>diphenoxylate-atropine oral tablet</i>	2	
<i>ed-spaz</i>	1	
<i>glycopyrrolate</i>	2	
<i>hyoscyamine sulfate oral drops</i>	1	
<i>hyoscyamine sulfate oral elixir</i>	1	
<i>hyoscyamine sulfate oral tablet</i>	2	
<i>hyoscyamine sulfate oral tablet extended release 12 hr</i>	2	
<i>hyoscyamine sulfate oral tablet, disintegrating</i>	2	
<i>hyoscyamine sulfate sublingual</i>	2	
<i>hyosyne oral drops</i>	1	
<i>hyosyne oral elixir</i>	2	
<i>loperamide</i>	2	
<i>methscopolamine</i>	2	
<i>oscimin</i>	1	
<i>oscimin sl</i>	1	
<i>phenobarb-hyoscy-atropine-scop</i>	2	
<i>phenohydro</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>symax fastabs</i>	1	
<i>symax-sl</i>	1	
<i>symax-sr</i>	1	
MISCELLANEOUS GASTROINTESTINAL AGENTS		
<i>alosetron</i>	2	
<i>alvimopan</i>	2	
<i>anucort-hc</i>	2	
<i>aprepitant</i>	2	QL
<i>balsalazide</i>	2	
<i>betaine</i>	5	PA
<i>bisacodyl</i>	1	ACA; OTC
<i>budesonide oral capsule, delayed, extended release</i>	2	
<i>budesonide oral tablet, delayed and extended release</i>	2	DAW-9
<i>budesonide rectal</i>	2	
CHOLBAM ORAL CAPSULE 250 MG	5	PA
CHOLBAM ORAL CAPSULE 50 MG	5	PA; QL
<i>citroma</i>	1	ACA; OTC
<i>clearlax</i>	1	ACA; OTC
<i>compro</i>	2	
<i>constulose</i>	1	
CREON	3	
<i>cromolyn</i>	2	HSA+
CTEXLI	5	PA
DIPENTUM	3	ST
<i>doxylamine-pyridoxine (vit b6)</i>	2	QL
<i>dronabinol</i>	2	PA

Drug Name	Drug Tier	Requirements / Limits
<i>dulcolax (magnesium hydroxide)</i>	1	ACA; OTC
<i>enulose</i>	2	
<i>gavilax</i>	1	ACA; OTC
<i>gavilyte-c</i>	1	ACA
<i>gavilyte-g</i>	1	ACA
<i>gavilyte-n</i>	1	ACA
<i>generlac</i>	1	
<i>gentle laxative (bisacodyl)</i>	1	ACA; OTC
<i>gentle laxative (magnesium hydroxide)</i>	1	ACA; OTC
<i>gentlelax</i>	1	ACA; OTC
<i>granisetron hcl</i>	2	QL
<i>hemmorex-hc</i>	2	
<i>hydrocortisone acetate</i>	2	
<i>hydrocortisone rectal</i>	1	
<i>hydrocortisone topical</i>	2	
<i>hydrocortisone-pramoxine rectal cream 1-1 %</i>	2	
<i>hydrocortisone-pramoxine rectal cream 2.5-1 %, 2.5-1 % (4g)</i>	2	ST
IQIRVO	5	PA; MSP
<i>lactulose oral packet 10 gram</i>	1	PA
<i>lactulose oral packet 20 gram</i>	1	
<i>lactulose oral solution</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>laxative (bisacodyl)</i>	1	ACA; OTC
<i>lidocaine hcl- hydrocortison ac rectal cream</i>	2	
<i>lidocaine hcl- hydrocortison ac rectal kit 3-0.5 %, 3-2.5 % (7 gram)</i>	2	
<i>lidocaine hcl- hydrocortison ac rectal kit 3-1 % (7 gram)</i>	2	PA
<i>lidocaine- hydrocortisone-aloe</i>	2	
LINZESS	3	QL
<i>lubiprostone</i>	2	QL
<i>magnesium citrate</i>	1	ACA; OTC
<i>meclizine oral tablet</i>	1	
<i>meclizine oral tablet, chewable</i>	2	
<i>mesalamine oral capsule (with del rel tablets)</i>	2	
<i>mesalamine oral capsule, extended release</i>	2	DAW-9
<i>mesalamine oral capsule, extended release 24hr</i>	2	DAW-9
<i>mesalamine oral tablet, delayed release (dr/ec)</i>	2	
<i>mesalamine rectal</i>	2	
<i>mesalamine with cleansing wipe</i>	2	
<i>metoclopramide hcl</i>	1	
<i>milk of magnesia</i>	1	ACA; OTC

Drug Name	Drug Tier	Requirements / Limits
<i>milk of magnesia concentrated</i>	1	ACA; OTC
MOVANTIK	3	QL
<i>nitroglycerin</i>	2	
OMVOH	5	PA; MSP; QL
OMVOH PEN	5	PA; MSP; QL
<i>ondansetron</i>	2	QL
<i>ondansetron hcl</i>	2	QL
<i>onelax magnesium citrate</i>	1	ACA; OTC
<i>oral saline laxative</i>	1	ACA; OTC
<i>palonosetron</i>	2	
PANCREAZE	3	
<i>peg 3350- electrolytes</i>	1	ACA
<i>peg3350-sod sul- nacl-kcl-asb-c</i>	2	ACA
<i>peg-electrolyte soln</i>	1	ACA
PENTASA	3	
<i>phosphate laxative</i>	1	ACA; OTC
<i>polyethylene glycol 3350</i>	2	ACA; OTC
<i>powderlax</i>	1	ACA; OTC
<i>prochlorperazine</i>	2	HSA+
<i>prochlorperazine maleate</i>	1	HSA+
<i>procto-med hc</i>	2	
<i>proctosol hc</i>	2	
<i>proctozone-hc</i>	2	
<i>prucalopride</i>	2	QL
<i>purelax</i>	1	ACA; OTC
RELISTOR	3	ST
<i>scopolamine base</i>	2	

Drug Name	Drug Tier	Requirements / Limits
SKYRIZI	5	PA; MSP; QL
<i>smoothlax</i>	1	ACA; OTC
<i>sodium,potassium,mag sulfates</i>	2	HSA+; ACA
SUCRAID	5	PA
<i>sulfasalazine oral tablet</i>	1	
<i>sulfasalazine oral tablet,delayed release (dr/ec)</i>	2	
SYMPROIC	3	
<i>trimethobenzamide</i>	2	
TRULANCE	3	
<i>ursodiol</i>	2	
VARUBI	3	QL
VELSIPITY	5	PA; MSP; QL
VIBERZI	3	
VIOKACE	3	
<i>women's gentle laxative(bisac)</i>	1	ACA; OTC
ZENPEP	3	
ZYMFENTRA	5	PA; MSP; QL
ULCER THERAPY		
<i>amoxicil-clarithromy-lansopraz</i>	2	QL
<i>bismuth subcit k-metronidz-ten</i>	2	
<i>cimetidine</i>	2	
<i>cimetidine hcl</i>	2	
<i>esomeprazole magnesium oral capsule,delayed release(dr/ec)</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>esomeprazole magnesium oral granules dr for susp in packet 10 mg, 2.5 mg, 20 mg, 5 mg</i>	2	ST; QL
<i>esomeprazole magnesium oral granules dr for susp in packet 40 mg</i>	2	ST
<i>famotidine oral suspension for reconstitution</i>	2	
<i>famotidine oral tablet</i>	1	
<i>lansoprazole oral capsule,delayed release(dr/ec) 15 mg</i>	2	QL
<i>lansoprazole oral capsule,delayed release(dr/ec) 30 mg</i>	2	
<i>lansoprazole oral tablet,disintegrat,delay rel 15 mg</i>	2	ST; QL
<i>lansoprazole oral tablet,disintegrat,delay rel 30 mg</i>	2	ST
<i>misoprostol</i>	1	
<i>nizatidine</i>	2	
<i>omeprazole oral capsule,delayed release(dr/ec) 10 mg, 20 mg</i>	1	QL
<i>omeprazole oral capsule,delayed release(dr/ec) 40 mg</i>	1	
<i>omeprazole-sodium bicarbonate oral capsule 20-1.1 mg-gram</i>	2	PA; QL

Drug Name	Drug Tier	Requirements / Limits
<i>omeprazole-sodium bicarbonate oral capsule 40-1.1 mg-gram</i>	2	PA
<i>omeprazole-sodium bicarbonate oral packet 20-1,680 mg</i>	2	PA; QL
<i>omeprazole-sodium bicarbonate oral packet 40-1,680 mg</i>	2	PA
<i>pantoprazole oral granules dr for susp in packet</i>	2	ST
<i>pantoprazole oral tablet, delayed release (dr/ec) 20 mg</i>	1	QL
<i>pantoprazole oral tablet, delayed release (dr/ec) 40 mg</i>	1	
<i>rabeprazole</i>	2	
<i>ranitidine hcl</i>	1	
<i>sucralfate</i>	2	
TALICIA	3	QL

IMMUNOLOGY, VACCINES & BIOTECHNOLOGY

BIOTECHNOLOGY DRUGS

FULPHILA	5	PA; MSP; QL
ILARIS (PF)	5	PA; MSP; QL
LEUKINE	5	PA; MSP
NIVESTYM	5	PA; MSP
<i>plerixafor</i>	5	MSP
PROCRIT	5	PA; MSP
PROLEUKIN	5	PA; MSP
RETACRIT	5	PA; MSP

Drug Name	Drug Tier	Requirements / Limits
ZIEXTENZO	5	PA; MSP; QL

GROWTH HORMONES

EGRIFTA SV	5	MSP
EGRIFTA WR	5	PA; MSP
GENOTROPIN	5	PA; MSP
GENOTROPIN MINIQUICK	5	PA; MSP
NGENLA	5	PA; MSP
OMNITROPE	5	PA; MSP
SEROSTIM	5	MSP

INTERFERONS

ACTIMMUNE	5	PA; MSP
ALFERON N	3	
PEGASYS	5	MSP; QL

VACCINES & MISCELLANEOUS IMMUNOLOGICALS

ABRYSVO (PF)	3	ACA
ACAM2000 (NATIONAL STOCKPILE)	3	
ACTHIB (PF)	3	ACA
ADACEL(TDAP ADOLESN/ADULT)(PF)	3	ACA
AFLURIA 2025-2026 (3YR UP)(PF)	3	ACA
AFLURIA 2025-2026 (6MO UP)	3	ACA
AREXVY (PF)	3	ACA
AUDENZ (NATIONAL STOCKPILE)	3	
AUDENZ(PF)(NATIONAL STOCKPILE)	3	

Drug Name	Drug Tier	Requirements / Limits
BCG VACCINE, LIVE (PF)	3	
BEXSERO	3	ACA
BIOTHRAX	3	
BOOSTRIX TDAP	3	ACA
CAPVAXIVE	3	ACA
COMIRNATY 2025-2026(5-11Y)(PF)	3	ACA
COMIRNATY 2025-26 (12Y UP)(PF)	3	ACA
DAPTACEL (DTAP PEDIATRIC) (PF)	3	ACA
DENG VAXIA (PF)	3	ACA
ENGERIX-B (PF)	3	ACA
ENGERIX-B PEDIATRIC (PF)	3	ACA
ERVEBO(PF)(NATIONAL STOCKPILE)	3	
FLUAD 2025-2026 (65 YR UP)(PF)	3	ACA
FLUARIX 2025-2026 (PF)	3	ACA
FLUBLOK 2025-2026 (PF)	3	ACA
FLUCELVAX 2025-2026	3	ACA
FLUCELVAX 2025-2026 (PF)	3	ACA
FLULAVAL 2025-2026 (PF)	3	ACA
FLUMIST 2025-2026	3	ACA
FLUMIST HOME 2025-2026	3	ACA

Drug Name	Drug Tier	Requirements / Limits
FLUZONE 2025-2026	3	ACA
FLUZONE 2025-2026 (PF)	3	ACA
FLUZONE HIGH-DOSE 2025-26 (PF)	3	ACA
GAMMAGARD LIQUID	5	MSP
GAMMAGARD LIQUID ERC	5	MSP
GAMUNEX-C	5	MSP
GARDASIL 9 (PF)	3	ACA
HAVRIX (PF)	3	ACA
HEPAGAM B	3	
HEPLISAV-B (PF)	3	ACA
HIBERIX (PF)	3	ACA
HYPERHEP B	3	
HYPERHEP B NEONATAL	3	
HYPERRAB (PF)	3	
IMOGAM RABIES-HT (PF)	3	
IMOVAX RABIES VACCINE (PF)	3	
INFANRIX (DTAP) (PF)	3	ACA
IPOLE	3	ACA
IXIARO (PF)	3	
JYNNEOS (PF)	3	ACA
KINRIX (PF)	3	ACA
MENQUADFI (PF)	3	ACA
MENVEO A-C-Y-W-135-DIP (PF)	3	ACA
M-M-R II (PF)	3	ACA

Drug Name	Drug Tier	Requirements / Limits
MNEXSPIKE 2025-2026 (PF)	3	ACA
MRESVIA (PF)	3	ACA
MYOBLOC	5	PA; MSP
NUVAXOVID 2025-2026 (PF)	3	ACA
PEDIARIX (PF)	3	ACA
PEDVAX HIB (PF)	3	ACA
PENBRAYA (PF)	3	ACA
PENMENVY MEN A-B-C-W-Y (PF)	3	ACA
PENTACEL (PF)	3	ACA
PNEUMOVAX-23	3	ACA
PREVNAR 20 (PF)	3	ACA
PRIORIX (PF)	3	ACA
PROQUAD (PF)	3	ACA
QUADRACEL (PF)	3	ACA
RABAVERT (PF)	3	
RECOMBIVAX HB (PF)	3	ACA
ROTARIX	3	ACA
ROTATEQ VACCINE	3	ACA
SHINGRIX (PF)	3	ACA
SPIKEVAX 2025-2026(12Y UP)(PF)	3	ACA
SPIKEVAX 2025-26 (6M-11Y) (PF)	3	ACA
STAMARIL (PF)	3	
TENIVAC (PF)	3	ACA
TICOVAC	3	
TRUMENBA	3	ACA
TWINRIX (PF)	3	ACA
TYPHIM VI	3	

Drug Name	Drug Tier	Requirements / Limits
VAQTA (PF)	3	ACA
VARIVAX (PF)	3	ACA
VARIZIG	3	
VAXCHORA VACCINE	3	
VAXELIS (PF)	3	ACA
VAXNEUVANCE (PF)	3	ACA
VIMKUNYA	3	
VIVOTIF	3	
XEMBIFY	5	MSP
YF-VAX (PF)	3	

MUSCULOSKELETAL & RHEUMATOLOGY

GOUT THERAPY

<i>allopurinol</i>	1	
<i>colchicine oral capsule</i>	2	ST
<i>colchicine oral tablet</i>	2	
<i>febuxostat</i>	2	ST
<i>probenecid</i>	2	
<i>probenecid-colchicine</i>	2	

OSTEOPOROSIS THERAPY

<i>alendronate oral solution</i>	2	HSA+; QL
<i>alendronate oral tablet</i>	1	HSA+; QL
<i>ibandronate</i>	2	HSA+; QL
<i>raloxifene</i>	2	HSA+
<i>risedronate</i>	2	HSA+; QL
<i>teriparatide</i>	5	PA; MSP; QL

Drug Name	Drug Tier	Requirements / Limits
TYMLOS	5	PA; MSP; QL
OTHER RHEUMATOLOGICALS		
ADALIMUMAB-ADAZ	5	PA; QL
ADALIMUMAB-ADBM	5	PA; MSP; QL
ADALIMUMAB-RYVK	5	PA; QL
AURANOFIN	3	
BENLYSTA	5	PA; MSP; QL
ENBREL	5	PA; MSP; QL
ENBREL MINI	5	PA; MSP; QL
ENBREL SURECLICK	5	PA; MSP; QL
<i>leflunomide</i>	2	QL
<i>milnacipran</i>	2	QL
OTEZLA	5	PA; MSP; QL
OTEZLA STARTER	5	PA; MSP; QL
OTEZLA XR	5	PA; MSP
OTEZLA XR INITIATION	5	PA; MSP
<i>penicillamine</i>	2	PA
RIDAURA	3	
RINVOQ	5	PA; MSP; QL
RINVOQ LQ	5	PA; MSP; QL
SIMLANDI(CF)	5	PA; MSP; QL
SIMLANDI(CF) AUTOINJECTOR	5	PA; MSP; QL
SIMPONI	5	PA; MSP; QL
TYENNE	5	PA; MSP; QL
TYENNE AUTOINJECTOR	5	PA; MSP; QL
XELJANZ	5	PA; MSP; QL

Drug Name	Drug Tier	Requirements / Limits
XELJANZ XR	5	PA; MSP; QL
OBSTETRICS & GYNECOLOGY		
DIAPHRAGMS AND OTHER NON-ORAL CONTRACEPTIVES		
CAYA	3	ACA
CONTOURED		
FC2 FEMALE CONDOM	3	ACA; OTC
FEMCAP	3	ACA
KYLEENA	5	ACA
MIRENA	5	ACA
PARAGARD T 380A	5	ACA
SKYLA	5	ACA
TRUSTEX-RIA	3	ACA; OTC
NON-LUB CONDOMS		
ESTROGENS & PROGESTINS		
<i>abigale</i>	2	
<i>abigale lo</i>	2	
<i>camila</i>	1	ACA
COMBIPATCH	3	
<i>conjugated estrogens</i>	2	
<i>covaryx</i>	2	
<i>covaryx h.s.</i>	2	
CRINONE	5	
<i>deblitane</i>	1	ACA
DEPO-ESTRADIOL	3	
<i>dotti</i>	2	HSA+; QL
DUAVEE	3	
<i>eemt</i>	2	
<i>eemt hs</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>emzahh</i>	2	ACA
ENDOMETRIN	5	
<i>errin</i>	1	ACA
<i>estradiol oral</i>	1	HSA+
<i>estradiol transdermal</i>	2	HSA+; QL
<i>estradiol vaginal</i>	2	HSA+
<i>estradiol valerate</i>	2	
<i>estradiol-norethindrone acet</i>	2	HSA+
<i>estrogens-methyltestosterone</i>	2	
<i>fyavolv</i>	2	
<i>gallifrey</i>	2	
<i>heather</i>	1	ACA
<i>incassia</i>	2	ACA
<i>jencycla</i>	1	ACA
<i>jinteli</i>	1	
<i>lyleq</i>	2	ACA
<i>lyllana</i>	2	QL
<i>lyza</i>	1	ACA
<i>medroxyprogesterone intramuscular</i>	2	HSA+; ACA; QL
<i>medroxyprogesterone oral</i>	1	HSA+
<i>meleya</i>	2	ACA
<i>mimvey</i>	2	
<i>nora-be</i>	2	ACA
<i>norethindrone (contraceptive)</i>	1	ACA
<i>norethindrone acetate</i>	2	
<i>norethindrone ac-eth estradiol</i>	1	HSA+

Drug Name	Drug Tier	Requirements / Limits
OPILL	3	ACA; OTC
<i>orquidea</i>	2	ACA
PREMARIN	3	
<i>progesterone micronized oral</i>	2	
<i>progesterone micronized vaginal</i>	5	
<i>sharobel</i>	1	ACA
<i>tulana</i>	2	ACA
<i>yuvafem</i>	2	
MISCELLANEOUS OB/GYN		
<i>clindamycin phosphate</i>	2	
<i>eluryng</i>	2	ACA
<i>enilloring</i>	2	ACA
<i>etonogestrel-ethinyl estradiol</i>	2	ACA
<i>fem ph</i>	1	
GYNAZOLE-1	3	
<i>haloette</i>	2	ACA
<i>metronidazole</i>	2	
<i>miconazole-3</i>	1	
MYFEMBREE	3	PA
NEXPLANON	5	ACA
<i>norelgestromin-ethin.estradiol</i>	2	ACA
ORIAHNN	3	PA
OSPHENA	3	
<i>terconazole</i>	2	
<i>tranexamic acid</i>	2	
<i>vandazole</i>	2	

Drug Name	Drug Tier	Requirements / Limits
VCF CONTRACEPTIVE FILM	3	ACA; OTC
VCF CONTRACEPTIVE GEL	3	ACA; OTC
XACIATO	3	
<i>xulane</i>	2	ACA
<i>zafemy</i>	2	ACA
ORAL CONTRACEPTIVES & RELATED AGENTS		
<i>afirmelle</i>	2	ACA
<i>after pill</i>	2	ACA; OTC; QL
<i>altavera (28)</i>	1	ACA
<i>alyacen 1/35 (28)</i>	1	ACA
<i>alyacen 7/7/7 (28)</i>	1	ACA
<i>amethia</i>	2	ACA
<i>amethyst (28)</i>	2	ACA
<i>apri</i>	1	ACA
<i>aranelle (28)</i>	1	ACA
<i>ashlyna</i>	2	ACA
<i>aubra</i>	1	ACA
<i>aubra eq</i>	1	ACA
<i>aurovela 1.5/30 (21)</i>	2	ACA
<i>aurovela 1/20 (21)</i>	2	ACA
<i>aurovela 24 fe</i>	2	ACA
<i>aurovela fe 1.5/30 (28)</i>	1	ACA
<i>aurovela fe 1-20 (28)</i>	1	ACA
<i>aviane</i>	1	ACA
<i>ayuna</i>	2	ACA
<i>azurette (28)</i>	1	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>balziva (28)</i>	1	ACA
<i>blisovi 24 fe</i>	2	ACA
<i>blisovi fe 1.5/30 (28)</i>	2	ACA
<i>blisovi fe 1/20 (28)</i>	1	ACA
<i>briellyn</i>	2	ACA
<i>camrese</i>	1	ACA
<i>camrese lo</i>	1	ACA
<i>caziant (28)</i>	1	ACA
<i>charlotte 24 fe</i>	2	ACA
<i>chateal eq (28)</i>	2	ACA
<i>cryselle (28)</i>	1	ACA
<i>cyred</i>	1	ACA
<i>cyred eq</i>	1	ACA
<i>dasetta 1/35 (28)</i>	1	ACA
<i>dasetta 7/7/7 (28)</i>	1	ACA
<i>daysee</i>	2	ACA
<i>desog- e.estradiol/e.estradio l</i>	1	ACA
<i>dolishale</i>	2	ACA
<i>drospirenone- e.estradiol-lm.fa</i>	2	ACA
<i>drospirenone-ethinyl estradiol</i>	1	ACA
<i>econtra ez</i>	2	ACA; OTC; QL
<i>econtra one-step</i>	2	ACA; OTC; QL
<i>elinest</i>	1	ACA
ELLA	3	ACA; QL
<i>enpresse</i>	1	ACA
<i>enskyce</i>	1	ACA
<i>estarylla</i>	1	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>falmina (28)</i>	1	ACA
<i>feirza</i>	2	ACA
<i>finzala</i>	2	ACA
<i>galbriela</i>	2	ACA
<i>gemmily</i>	2	ACA
<i>hailey</i>	2	ACA
<i>hailey 24 fe</i>	2	ACA
<i>hailey fe 1.5/30 (28)</i>	2	ACA
<i>hailey fe 1/20 (28)</i>	2	ACA
<i>iclevia</i>	2	ACA
<i>introvale</i>	2	ACA
<i>isibloom</i>	1	ACA
<i>jaimiess</i>	2	ACA
<i>jasmiel (28)</i>	1	ACA
<i>jolessa</i>	1	ACA
<i>joyeaux</i>	2	ACA
<i>juleber</i>	1	ACA
<i>junel 1.5/30 (21)</i>	1	ACA
<i>junel 1/20 (21)</i>	1	ACA
<i>junel fe 1.5/30 (28)</i>	1	ACA
<i>junel fe 1/20 (28)</i>	1	ACA
<i>junel fe 24</i>	1	ACA
<i>kaitlib fe</i>	1	ACA
<i>kalliga</i>	1	ACA
<i>kariva (28)</i>	1	ACA
<i>kelnor 1/35 (28)</i>	1	ACA
<i>kurvelo (28)</i>	1	ACA
<i>l norgest/e.estradiol-e.estradiol</i>	2	ACA
<i>larin 1.5/30 (21)</i>	1	ACA
<i>larin 1/20 (21)</i>	1	ACA
<i>larin 24 fe</i>	1	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>larin fe 1.5/30 (28)</i>	1	ACA
<i>larin fe 1/20 (28)</i>	1	ACA
<i>lessina</i>	1	ACA
<i>levonest (28)</i>	1	ACA
<i>levonorgest-eth.estradiol-iron</i>	2	ACA
<i>levonorgestrel</i>	2	ACA; OTC; QL
<i>levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-0.03 mg</i>	1	ACA
<i>levonorgestrel-ethinyl estrad oral tablet 90-20 mcg (28)</i>	2	ACA
<i>levonorgestrel-ethinyl estrad oral tablets,dose pack,3 month</i>	1	ACA
<i>levonorg-eth estrad triphasic</i>	1	ACA
<i>lojaimiess</i>	2	ACA
<i>loryna (28)</i>	1	ACA
<i>low-ogestrel (28)</i>	1	ACA
<i>lo-zumandimine (28)</i>	1	ACA
<i>luizza</i>	2	ACA
<i>lutura (28)</i>	1	ACA
<i>marlissa (28)</i>	1	ACA
<i>mibelas 24 fe</i>	2	ACA
<i>microgestin 1.5/30 (21)</i>	1	ACA
<i>microgestin 1/20 (21)</i>	1	ACA
<i>microgestin fe 1.5/30 (28)</i>	1	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>microgestin fe 1/20 (28)</i>	1	ACA
<i>mili</i>	1	ACA
<i>minzoya</i>	2	ACA
<i>mono-linyah</i>	1	ACA
<i>my choice</i>	2	ACA; OTC; QL
<i>my way</i>	1	ACA; OTC; QL
<i>necon 0.5/35 (28)</i>	1	ACA
<i>new day</i>	2	ACA; OTC; QL
<i>nikki (28)</i>	1	ACA
<i>norethindrone ac-eth estradiol</i>	1	HSA+; ACA
<i>norethindrone-e.estradiol-iron</i>	2	HSA+; ACA
<i>norgestimate-ethinyl estradiol</i>	1	HSA+; ACA
<i>nortrel 0.5/35 (28)</i>	1	ACA
<i>nortrel 1/35 (21)</i>	1	ACA
<i>nortrel 1/35 (28)</i>	1	ACA
<i>nortrel 7/7/7 (28)</i>	1	ACA
<i>nylia 1/35 (28)</i>	2	ACA
<i>nylia 7/7/7 (28)</i>	2	ACA
<i>ocella</i>	1	ACA
<i>opcicon one-step</i>	1	ACA; OTC; QL
<i>option-2</i>	1	ACA; OTC; QL
<i>philith</i>	2	ACA
<i>pimtrea (28)</i>	2	ACA
<i>portia 28</i>	1	ACA
<i>reclipsen (28)</i>	1	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>rivelsa</i>	1	ACA
<i>rosyrah</i>	2	ACA
<i>setlakin</i>	1	ACA
<i>shewise</i>	2	ACA; OTC; QL
<i>simliya (28)</i>	2	ACA
<i>simpesse</i>	2	ACA
<i>sprintec (28)</i>	1	ACA
<i>syeda</i>	1	ACA
<i>tarina 24 fe</i>	1	ACA
<i>tarina fe 1/20 (28)</i>	1	ACA
<i>tilia fe</i>	2	ACA
<i>tri-estarylla</i>	1	ACA
<i>tri-legest fe</i>	1	ACA
<i>tri-linyah</i>	1	ACA
<i>tri-lo-estarylla</i>	1	ACA
<i>tri-lo-marzia</i>	1	ACA
<i>tri-lo-mili</i>	1	ACA
<i>tri-lo-sprintec</i>	1	ACA
<i>tri-mili</i>	2	ACA
<i>tri-sprintec (28)</i>	1	ACA
<i>tri-vylibra</i>	1	ACA
<i>tri-vylibra lo</i>	1	ACA
<i>turqoz (28)</i>	1	ACA
<i>tydemy</i>	2	ACA
<i>valtya</i>	1	ACA
<i>velivet triphasic regimen (28)</i>	2	ACA
<i>vestura (28)</i>	1	ACA
<i>vienva</i>	1	ACA
<i>viorele (28)</i>	1	ACA
<i>volnea (28)</i>	2	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>vyfemla (28)</i>	1	ACA
<i>vylibra</i>	1	ACA
<i>wera (28)</i>	1	ACA
<i>wymzya fe</i>	2	ACA
<i>xarah fe</i>	2	ACA
<i>xelria fe</i>	2	ACA
<i>zarah</i>	1	ACA
<i>zovia 1-35 (28)</i>	1	ACA
<i>zumandimine (28)</i>	1	ACA

OXYTOCICS

<i>methylergonovine</i>	2	QL
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OPHTHALMOLOGY

ANTIBIOTICS

AZASITE	3	
<i>bacitracin</i>	2	
<i>bacitracin-polymyxin b</i>	2	
<i>ciprofloxacin hcl</i>	2	
<i>erythromycin</i>	2	
<i>gatifloxacin</i>	2	
<i>gentamicin</i>	1	
<i>levofloxacin</i>	1	
<i>moxifloxacin ophthalmic (eye) drops</i>	2	
<i>moxifloxacin ophthalmic (eye) drops, viscous</i>	1	
NATACYN	3	
<i>neomycin-bacitracin-polymyxin</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>neomycin-polymyxin-gramicidin</i>	1	
<i>neo-polycin</i>	2	
<i>ofloxacin</i>	2	
<i>polycin</i>	2	
<i>polymyxin b sulf-trimethoprim</i>	1	
<i>povidone-iodine</i>	2	
<i>tobramycin</i>	1	

ANTIVIRALS

<i>trifluridine</i>	1	
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BETA-BLOCKERS

<i>betaxolol</i>	2	
<i>carteolol</i>	1	
<i>levobunolol</i>	1	
<i>timolol</i>	2	
<i>timolol maleate (pf)</i>	2	
<i>timolol maleate ophthalmic (eye) drops</i>	1	
<i>timolol maleate ophthalmic (eye) drops, once daily</i>	2	
<i>timolol maleate ophthalmic (eye) gel forming solution</i>	2	

CHOLINESTERASE INHIBITOR MIOTICS

PHOSPHOLINE IODIDE	5	
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CYCLOPLEGIC MYDRIATICS

<i>atropine</i>	2	
<i>cyclopentolate</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>cyclopen-tropic-phenyleph-watr</i>	2	
<i>homatropaire</i>	1	
<i>phenyleph-tropicamide in water</i>	2	
<i>tropicamide</i>	1	
DIRECT ACTING MIOTICS		
<i>pilocarpine hcl</i>	1	
MISCELLANEOUS OPHTHALMOLOGICS		
<i>alaway</i>	2	OTC
<i>allergy eye (ketotifen)</i>	2	OTC
<i>altacaine</i>	1	
<i>azelastine</i>	2	
<i>bepotastine besilate</i>	2	ST
BYOOVIZ	5	PA
<i>children's alaway</i>	2	OTC
CIMERLI	5	PA; MSP
<i>cromolyn</i>	2	HSA+
<i>cyclosporine</i>	2	PA; DAW-9; QL
CYSTARAN	5	PA
<i>epinastine</i>	2	
<i>eye itch relief</i>	2	OTC
<i>fluorescein-proparacaine</i>	1	
<i>ketotifen fumarate</i>	2	OTC
LUXTURNA	5	PA; MSP
MIEBO (PF)	3	PA; QL
OXERVATE	5	PA; MSP
PAVBLU	5	PA; MSP

Drug Name	Drug Tier	Requirements / Limits
<i>prednisoln sp-moxiflox-bromfen</i>	2	
<i>prednisolone sod ph-bromfenac</i>	2	
<i>proparacaine</i>	1	
RESTASIS MULTIDOSE	3	PA; QL
<i>tetracaine hcl</i>	1	
<i>wal-zyr (ketotifen)</i>	2	OTC
XDEMVY	5	QL
XIIDRA	3	PA; QL
ZADITOR	3	OTC
ZERVIATE	3	ST
NON-STEROIDAL ANTI-INFLAMMATORY AGENTS		
<i>bromfenac</i>	2	
<i>diclofenac sodium</i>	2	
<i>flurbiprofen sodium</i>	1	
<i>ketorolac</i>	1	
ORAL DRUGS FOR GLAUCOMA		
<i>acetazolamide</i>	2	
<i>methazolamide</i>	2	
OTHER GLAUCOMA DRUGS		
<i>bimatoprost</i>	2	ST
<i>brimonidine-timolol</i>	2	
<i>brinzolamide</i>	2	
<i>dorzolamide</i>	1	
<i>dorzolamide-timolol</i>	1	
<i>dorzolamide-timolol (pf)</i>	2	
<i>latanoprost</i>	1	ST
<i>miostat</i>	2	

Drug Name	Drug Tier	Requirements / Limits
STEROID-ANTIBIOTIC COMBINATIONS		
<i>neomycin-bacitracin-poly-hc</i>	2	
<i>neomycin-polymyxin b-dexameth</i>	2	
<i>neomycin-polymyxin-hc</i>	2	
<i>neo-polycin hc</i>	2	
<i>tobramycin-dexamethasone</i>	2	
<i>tobramycin-lotepred</i>	2	
STEROIDS		
<i>dexamethasone sodium phosphate</i>	2	
<i>difluprednate</i>	2	
EYSUVIS	3	PA; QL
<i>fluorometholone</i>	2	
<i>loteprednol etabonate</i>	2	ST
OZURDEX	5	MSP
<i>prednisolone acetate</i>	2	
<i>prednisolone sodium phosphate</i>	1	
STEROID-SULFONAMIDE COMBINATIONS		
<i>sulfacetamide-prednisolone</i>	1	
SULFONAMIDES		
<i>sulfacetamide sodium</i>	2	
SYMPATHOMIMETICS		
<i>apraclonidine</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>brimonidine ophthalmic (eye) drops 0.1 %, 0.2 %</i>	1	
<i>brimonidine ophthalmic (eye) drops 0.15 %</i>	2	
VASOCONSTRICTOR DECONGESTANTS		
<i>phenylephrine hcl</i>	1	
RESPIRATORY, ALLERGY, COUGH & COLD		
ANTI-HISTAMINE & ANTI-ALLERGENIC AGENTS		
AUVI-Q	3	QL
<i>carbinoxamine maleate oral liquid</i>	1	
<i>carbinoxamine maleate oral tablet 4 mg</i>	1	
<i>carbinoxamine maleate oral tablet 6 mg</i>	1	ST
<i>carbzah</i>	1	ST
<i>cetirizine</i>	2	
<i>corphena</i>	2	
<i>cyproheptadine</i>	1	
<i>desloratadine</i>	2	QL
<i>dexchlorpheniramine maleate</i>	2	PA
<i>epinephrine</i>	2	HSA+; QL
<i>hydroxyzine hcl</i>	1	
<i>hydroxyzine pamoate oral capsule 100 mg, 50 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>hydroxyzine pamoate oral capsule 25 mg</i>	2	
<i>levocetirizine oral solution</i>	2	
<i>levocetirizine oral tablet</i>	2	QL
NEFFY	3	QL
<i>promethazine oral</i>	1	
<i>promethazine rectal</i>	2	
<i>promethegan</i>	2	

COUGH & COLD THERAPY

<i>benzonatate</i>	2	
<i>brompheniramine-pseudoeph-dm</i>	2	
<i>codeine-guaiifenesin</i>	2	
<i>g tussin ac</i>	2	
<i>hydrocodone-chlorpheniramine</i>	2	
<i>hydrocodone-homatropine</i>	1	
<i>maxi-tuss ac</i>	2	
<i>promethazine-codeine</i>	2	
<i>promethazine-dm</i>	1	
<i>promethazine-phenylephrine</i>	1	

PULMONARY AGENTS

<i>acetylcysteine</i>	2	
ADEMPAS	5	PA; MSP; QL
ADVAIR HFA	3	ST; CISP; HSA+; QL
AIRSUPRA	3	

Drug Name	Drug Tier	Requirements / Limits
<i>albuterol sulfate inhalation hfa aerosol inhaler</i>	1	CISP; HSA+; QL
<i>albuterol sulfate inhalation solution for nebulization</i>	1	CISP; HSA+
<i>albuterol sulfate oral syrup</i>	1	
<i>albuterol sulfate oral tablet</i>	2	
ALYFTREK	5	PA; MSP; QL
<i>alyq</i>	5	PA; QL
<i>ambriasantan</i>	5	PA; MSP; QL
<i>aminophylline</i>	2	
ANDEMBRY AUTOINJECTOR	5	PA; MSP
ANORO ELLIPTA	3	CISP; HSA+; QL
<i>arformoterol</i>	2	QL
ASMANEX HFA	3	CISP; HSA+; QL
ASMANEX TWISTHALER	3	CISP; HSA+; QL
<i>beclomethasone dipropionate</i>	2	HSA+
<i>bosentan</i>	5	PA; MSP; QL
BREO ELLIPTA	3	ST; CISP; HSA+; QL
<i>breyana</i>	2	ST; QL
BREZTRI AEROSPHERE	3	QL
BRINSUPRI	5	ST
<i>budesonide</i>	2	CISP; HSA+; QL
<i>budesonide-formoterol</i>	2	ST; CISP; HSA+; QL

Drug Name	Drug Tier	Requirements / Limits
CINRYZE	5	PA; MSP; QL
COMBIVENT RESPIMAT	3	CISP; HSA+; QL
<i>cromolyn</i>	2	CISP; HSA+
DULERA	3	ST; CISP; HSA+; QL
FASENRA PEN	5	PA; MSP; QL
<i>flunisolide</i>	2	ST; QL
<i>fluticasone propionate inhalation</i>	2	HSA+; QL
<i>fluticasone propionate nasal</i>	1	HSA+; QL
<i>fluticasone propion-salmeterol</i>	2	ST; CISP; HSA+; QL
<i>formoterol fumarate</i>	2	QL
HAEGARDA	5	PA; MSP; QL
<i>icatibant</i>	5	PA; SP; QL
INCRUSE ELLIPTA	3	QL
<i>ipratropium bromide inhalation hfa aerosol inhaler</i>	1	CISP; QL
<i>ipratropium bromide inhalation solution</i>	1	CISP; HSA+
<i>ipratropium-albuterol</i>	1	CISP; HSA+; QL
JASCAYD	5	PA; MSP
KALYDECO	5	MSP; QL
<i>levalbuterol hcl</i>	2	CISP; HSA+
<i>mometasone</i>	2	ST; QL
<i>montelukast oral granules in packet</i>	2	CISP; HSA+
<i>montelukast oral tablet</i>	1	CISP; HSA+

Drug Name	Drug Tier	Requirements / Limits
<i>montelukast oral tablet, chewable</i>	1	CISP; HSA+
<i>nebusal</i>	1	
<i>nintedanib</i>	5	PA; MSP; QL
NUCALA SUBCUTANEOUS AUTO-INJECTOR	5	PA; MSP; QL
NUCALA SUBCUTANEOUS SYRINGE 100 MG/ML	5	PA; MSP; QL
NUCALA SUBCUTANEOUS SYRINGE 40 MG/0.4 ML	5	PA; QL
OPSUMIT	5	PA; MSP; QL
OPSYNVI	5	PA; MSP; QL
ORKAMBI	5	PA; MSP; QL
<i>pirfenidone</i>	5	PA; MSP; QL
<i>pulmosal</i>	1	
PULMOZYME	5	PA; MSP
QVAR REDIHALER	3	HSA+; QL
<i>roflumilast oral tablet 250 mcg</i>	2	PA; QL
<i>roflumilast oral tablet 500 mcg</i>	2	PA
<i>sajazir</i>	5	PA; MSP; QL
<i>sildenafil (pulm.hypertension)</i>	5	PA; MSP; QL
<i>sodium chloride</i>	1	
SPIRIVA RESPIMAT	3	CISP; HSA+; QL
STIOLTO RESPIMAT	3	CISP; HSA+; QL

Drug Name	Drug Tier	Requirements / Limits
STRIVERDI RESPIMAT	3	QL
SYMDEKO	5	PA; MSP; QL
<i>tadalafil (pulm. hypertension)</i>	5	PA; MSP; QL
TAKHZYRO	5	PA; MSP; QL
<i>terbutaline</i>	2	CISP; HSA+
TEZSPIRE	5	PA; MSP; QL
<i>theophylline oral elixir</i>	2	CISP; HSA+
<i>theophylline oral solution</i>	1	CISP; HSA+
<i>theophylline oral tablet extended release 12 hr</i>	2	CISP; HSA+
<i>theophylline oral tablet extended release 24 hr 400 mg</i>	2	CISP; HSA+
<i>theophylline oral tablet extended release 24 hr 600 mg</i>	2	CISP; CISP-1; HSA+
<i>tiotropium bromide</i>	2	CISP; HSA+
TRELEGY ELLIPTA	3	CISP; HSA+; QL
TRIKAFTA	5	PA; MSP; QL
TYVASO	5	PA; MSP
TYVASO DPI	5	PA; MSP
TYVASO REFILL KIT	5	PA; MSP
TYVASO STARTER KIT	5	PA; MSP
WINREVAIR	5	PA; MSP
<i>wixela inhub</i>	2	ST; HSA+; QL
XHANCE	3	ST; QL
XOLAIR	5	MSP; QL

Drug Name	Drug Tier	Requirements / Limits
YUPELRI	3	QL
YUTREPIA	5	PA; MSP
<i>zafirlukast</i>	2	CISP; HSA+
PULMONARY DEVICES		
ACE AEROSOL CLOUD ENHANCER	3	
AEROCHAMBER MECHANICAL VENT	3	
AEROCHAMBER MINI	3	CISP-1; HSA+
AEROCHAMBER PLUS FLOW-VU	3	CISP-1; HSA+
AEROCHAMBER PLUS Z STAT	3	CISP-1; HSA+
AEROCHAMBER2 GO	3	
AEROTRACH PLUS	3	CISP-1; HSA+
AEROVENT PLUS	3	
BREATHERITE MDI SPACER	3	
COMPACT SPACE CHAMBER	3	
EASIVENT HOLDING CHAMBER	3	CISP-1; HSA+
FLEXICHAMBER	3	
LITEAIRE MDI CHAMBER	3	CISP-1; HSA+
MICROCHAMBER	3	CISP-1; HSA+
MICROSPACER	3	
OPTICHAMBER DIAMOND VHC	3	CISP-1; HSA+

Drug Name	Drug Tier	Requirements / Limits
POCKET CHAMBER	3	
PRIMEAIRE	3	
PROCHAMBER	3	
RITEFLO AEROCHAMBER	3	CISP-1; HSA+
SPACE CHAMBER	3	
VORTEX HOLDING CHAMBER	3	

UROLOGICALS

ANTICHOLINERGICS & ANTISPASMODICS

<i>darifenacin</i>	2	
<i>flavoxate</i>	1	
<i>mirabegron</i>	2	
MYRBETRIQ	3	
<i>oxybutynin chloride oral syrup</i>	1	
<i>oxybutynin chloride oral tablet</i>	2	
<i>oxybutynin chloride oral tablet extended release 24hr</i>	2	
<i>solifenacin</i>	2	
<i>tolterodine</i>	2	
<i>trospium</i>	2	

BENIGN PROSTATIC HYPERPLASIA (BPH) THERAPY

<i>alfuzosin</i>	2	
<i>dutasteride</i>	2	PA
<i>dutasteride-tamsulosin</i>	2	PA
<i>finasteride</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>silodosin</i>	2	
<i>tadalafil</i>	2	ST; QL
<i>tamsulosin</i>	1	

CHOLINERGIC STIMULANTS

<i>bethanechol chloride</i>	2	
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MISCELLANEOUS UROLOGICALS

CAVERJECT	3	QL
CAVERJECT IMPULSE	3	QL
CYSTAGON	5	
ELMIRON	3	
K-PHOS ORIGINAL	3	
<i>mb caps</i>	2	
<i>methen-sod phos-meth blue-hyos</i>	2	
<i>potassium citrate</i>	2	
RENACIDIN	3	
<i>sildenafil</i>	2	ST; QL
<i>sodium citrate-citric acid</i>	1	
<i>uretron d-s</i>	1	
<i>urimar-t</i>	2	
<i>urogesic-blue</i>	2	
<i>uro-mp</i>	2	
<i>uro-sp</i>	2	
<i>uryl</i>	2	

URINARY ANESTHETICS

<i>phenazopyridine</i>	2	
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VITAMINS, HEMATINICS & ELECTROLYTES

ELECTROLYTES

Drug Name	Drug Tier	Requirements / Limits
<i>calcium acetate(phosphat bind)</i>	2	QL
<i>effer-k</i>	2	
<i>ferric citrate</i>	2	
<i>kionex</i>	1	
<i>klor-con</i>	2	
<i>klor-con 10</i>	1	
<i>klor-con 8</i>	1	
<i>klor-con m10</i>	2	
<i>klor-con m15</i>	1	
<i>klor-con m20</i>	2	
<i>lanthanum</i>	2	QL
LOKELMA	3	QL
<i>lugols</i>	1	
<i>potassium chloride oral capsule, extended release</i>	1	
<i>potassium chloride oral packet</i>	2	
<i>potassium chloride oral tablet extended release</i>	1	
<i>potassium chloride oral tablet,er particles/crystals</i>	1	
<i>sevelamer carbonate oral powder in packet</i>	1	QL
<i>sevelamer carbonate oral tablet</i>	2	QL
<i>sevelamer hcl</i>	2	QL
<i>sodium polystyrene sulfonate</i>	1	
<i>sps (with sorbitol)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>strong iodine</i>	1	
VELTASSA	3	QL
MISCELLANEOUS VITAMINS, HEMATINICS, & ELECTROLYTES		
AQNEURSA	5	PA
VITAMINS & HEMATINICS		
<i>b complex 1 (with folic acid)</i>	1	ACA; OTC
<i>b complex-vitamin c-folic acid</i>	1	ACA; OTC
<i>bal-care dha</i>	1	HSA+
<i>b-complex with vitamin c</i>	1	ACA; OTC
<i>cholecalciferol (vitamin d3)</i>	1	OTC
<i>classic prenatal</i>	1	ACA; OTC
<i>complete natal dha</i>	1	HSA+
<i>cyanocobalamin (vitamin b-12) injection</i>	1	
<i>cyanocobalamin (vitamin b-12) nasal</i>	2	ST; QL
<i>dialyvite 800</i>	1	ACA; OTC
<i>elite-ob</i>	1	
<i>ergocalciferol (vitamin d2)</i>	1	
<i>ferrous sulfat</i>	1	OTC
<i>flotrex</i>	2	ACA; OTC
<i>fluoride (sodium) oral drops</i>	2	ACA; OTC
<i>fluoride (sodium) oral tablet,chewable</i>	1	ACA; OTC
<i>folic acid oral tablet 1 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>folic acid oral tablet 400 mcg, 800 mcg</i>	1	ACA; OTC
<i>folitab</i>	2	ACA; OTC
<i>folivane-ob</i>	1	
<i>fortabs 800</i>	2	ACA; OTC
<i>full spectrum b-vitamin c</i>	1	ACA; OTC
<i>hydroxocobalamin</i>	1	
<i>kobee</i>	1	ACA; OTC
<i>ludent fluoride</i>	1	ACA; OTC
<i>m-natal plus</i>	1	HSA+
<i>multi-vitamin with fluoride oral drops 0.25 mg/ml</i>	2	HSA+; ACA; OTC
<i>multi-vitamin with fluoride oral drops 0.5 mg/ml</i>	2	ACA; OTC
<i>multi-vitamin with fluoride oral tablet, chewable</i>	2	ACA; OTC
<i>multivit-fluor 0.25 mg/ml drop (rx)</i>	2	ACA; OTC
<i>multivit-fluoride (metafolin)</i>	2	HSA+; ACA; OTC
<i>mvc-fluoride</i>	2	ACA; OTC
<i>mynatal</i>	1	HSA+
<i>mynatal plus</i>	1	HSA+
<i>mynatal-z</i>	1	HSA+
<i>neo-vital rx</i>	2	HSA+
<i>newgen</i>	1	HSA+
<i>one natal rx</i>	2	HSA+
<i>pnv-dha</i>	2	
<i>pnv-omega</i>	2	
<i>pnv-select</i>	2	HSA+

Drug Name	Drug Tier	Requirements / Limits
<i>pr natal 400</i>	1	HSA+
<i>pr natal 400 ec</i>	1	HSA+
<i>pr natal 430</i>	1	HSA+
<i>pr natal 430 ec</i>	1	HSA+
<i>prenatabs fa</i>	1	HSA+
<i>prenatabs rx</i>	1	HSA+
<i>prenatal</i>	1	ACA; OTC
<i>prenatal complete</i>	1	ACA; OTC
<i>prenatal multi-dha (algal oil)</i>	1	ACA; OTC
<i>prenatal multivitamins</i>	1	ACA; OTC
<i>prenatal one daily</i>	1	ACA; OTC
<i>prenatal plus</i>	1	HSA+
<i>prenatal plus (calcium carb)</i>	1	HSA+
<i>prenatal vit no.179-iron-folic</i>	2	ACA; OTC
<i>prenatal vitamin</i>	1	ACA; OTC
<i>prenatal vitamin with minerals</i>	1	ACA; OTC
<i>prenatal-u</i>	1	
<i>purevita folic acid</i>	1	ACA; OTC
<i>rena-vite</i>	1	ACA; OTC
<i>se-natal 19</i>	2	HSA+
<i>se-natal 19 chewable</i>	1	HSA+
<i>soluvita a,c,d with fluoride</i>	2	ACA; OTC
<i>stress formula with iron(sulf)</i>	1	ACA; OTC
<i>super b-50 complex</i>	2	ACA; OTC
<i>super quintis</i>	1	ACA; OTC
<i>taron-c dha</i>	1	
<i>tricon</i>	2	ACA; OTC

Drug Name	Drug Tier	Requirements / Limits
<i>trinatal rx 1</i>	1	HSA+
<i>trinate</i>	1	HSA+
<i>tri-vitamin with fluoride</i>	2	ACA; OTC
<i>vitamin d3</i>	1	OTC
<i>wescap-pn dha</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>wesnate dha</i>	2	HSA+
<i>westab plus</i>	1	HSA+
<i>westgel dha</i>	2	HSA+
<i>zatean-pn dha</i>	2	
<i>zatean-pn plus</i>	2	
<i>zingiber</i>	1	

Index

A		
<i>abacavir</i>	2	ADALIMUMAB-ADAZ.....
<i>abacavir-lamivudine</i>	2	ADALIMUMAB-ADB.....
<i>abigale</i>	47	ADALIMUMAB-RYVK.....
<i>abigale lo</i>	47	<i>adapalene</i>
ABILIFY MAINTENA.....	16	27, 28
<i>abiraterone</i>	7	<i>adapalene-benzoyl peroxide</i> .
<i>abirtega</i>	7	28
ABRYSSO (PF).....	44	ADBRY
ACAM2000 (NATIONAL STOCKPILE).....	44	<i>adefovir</i>
<i>acamprosate</i>	32	2
<i>acarbose</i>	39	ADEMPAS
<i>accutane</i>	27	55
ACE AEROSOL CLOUD ENHANCER.....	57	<i>adthyza</i>
<i>acebutolol</i>	21	40
<i>acetaminophen-caff-dihydrocod</i>	13	<i>adult aspirin regimen</i>
<i>acetaminophen-codeine</i>	14	15
<i>acetazolamide</i>	53	ADVAIR HFA
<i>acetic acid</i>	32, 34	55
<i>acetylcysteine</i>	55	ADVATE
<i>acitretin</i>	26	23
ACTHIB (PF).....	44	ADYNOVATE.....
ACTIMMUNE	44	23
<i>acyclovir</i>	2, 30	AEROCHAMBER MECHANICAL VENT
ADACEL(TDAP ADOLESN/ADULT)(PF) 44		57
		AEROCHAMBER MINI.....
		57
		AEROCHAMBER PLUS FLOW-VU.....
		57
		AEROCHAMBER PLUS Z STAT.....
		57
		AEROCHAMBER2GO.....
		57
		AEROTRACH PLUS.....
		57
		AEROVENT PLUS.....
		57
		<i>afirmelle</i>
		49
		AFLURIA 2025-2026 (3YR UP)(PF)
		44
		AFLURIA 2025-2026 (6MO UP).....
		44
		AFSTYLA
		23
		<i>after pill</i>
		49
		AIMOVIG AUTOINJECTOR
		12
		AIRSUPRA
		55
		AJOVY AUTOINJECTOR...12
		AJOVY SYRINGE.....
		12
		<i>ala-cort</i>
		30
		<i>alaway</i>
		53
		<i>albendazole</i>
		4
		<i>albuterol sulfate</i>
		55
		<i>alclometasone</i>
		30
		ALECENSA
		7
		<i>alendronate</i>
		46
		ALFERON N.....
		44
		<i>alfuzosin</i>
		58
		ALHEMO PEN
		23
		ALINIA
		4
		<i>aliskiren</i>
		21
		<i>allergy eye (ketotifen)</i>
		53
		<i>allopurinol</i>
		46
		<i>almotriptan malate</i>
		12
		<i>alosectron</i>
		41
		<i>alprazolam</i>
		16, 17
		<i>alprazolam intensol</i>
		16
		ALPROLIX
		23
		<i>altacaine</i>
		53
		<i>altavera (28)</i>
		49
		ALTUVIIIIO.....
		23
		ALUNBRIG
		7

<i>alvimopan</i>	41	<i>amoxicillin</i>	5	<i>asenapine maleate</i>	17
<i>alyacen 1/35 (28)</i>	49	<i>amoxicillin-pot clavulanate</i>	5	<i>ashlyna</i>	49
<i>alyacen 7/7/7 (28)</i>	49	<i>amphetamine</i>	17	ASMANEX HFA.....	55
ALYFTREK	55	<i>amphetamine sulfate</i>	17	ASMANEX TWISTHALER	55
<i>alyq</i>	55	<i>ampicillin</i>	5	<i>aspirin</i>	15
<i>amantadine hcl</i>	2	<i>anagrelide</i>	32	<i>aspirin childrens</i>	15
<i>ambrisentan</i>	55	<i>anastrozole</i>	7	<i>aspirin-dipyridamole</i>	23
<i>amcinonide</i>	30	ANDEMBRY		<i>atazanavir</i>	2
<i>amethia</i>	49	AUTOINJECTOR	55	<i>atenolol</i>	21
<i>amethyst (28)</i>	49	ANORO ELLIPTA.....	55	<i>atenolol-chlorthalidone</i>	21
<i>amiloride</i>	21	<i>anucort-hc</i>	41	<i>atomoxetine</i>	17
<i>amiloride-hydrochlorothiazide</i>		ANZUPGO.....	27	<i>atorvastatin</i>	25
.....	21	<i>apomorphine</i>	12	<i>atovaquone</i>	4
<i>aminocaproic acid</i>	23	<i>apraclonidine</i>	54	<i>atovaquone-proguanil</i>	4
<i>aminophylline</i>	55	<i>aprepitant</i>	41	<i>atropine</i>	52
<i>amiodarone</i>	20	APRETUDE	2	ATTRUBY.....	26
<i>amitriptyline</i>	17	<i>apri</i>	49	<i>aubra</i>	49
<i>amitriptyline-chlordiazepoxide</i>		APTIVUS	2	<i>aubra eq</i>	49
.....	17	AQNEURSA	59	AUDENZ (NATIONAL	
<i>amlodipine</i>	21	ARALAST NP	32	STOCKPILE)	44
<i>amlodipine-atorvastatin</i>	25	<i>aranelle (28)</i>	49	AUDENZ(PF)(NATIONAL	
<i>amlodipine-benazepril</i>	21	AREXVY (PF)	44	STOCKPILE)	44
<i>amlodipine-olmesartan</i>	21	<i>arformoterol</i>	55	AUGMENTIN.....	5
<i>amlodipine-valsartan</i>	21	ARIKAYCE.....	4	AUGTYRO.....	7
<i>amlodipine-valsartan-hcthiazid</i>		<i>aripiprazole</i>	17	AURANOFIN.....	47
.....	21	ARISTADA	17	<i>aurovela 1.5/30 (21)</i>	49
<i>ammonium lactate</i>	27	ARISTADA INITIO	17	<i>aurovela 1/20 (21)</i>	49
<i>amnestem</i>	28	<i>armodafinil</i>	17	<i>aurovela 24 fe</i>	49
<i>amoxapine</i>	17	ARMOUR THYROID	40	<i>aurovela fe 1.5/30 (28)</i>	49
<i>amoxicil-clarithromy-</i>		<i>ascomp with codeine</i>	14	<i>aurovela fe 1-20 (28)</i>	49
<i>lansopraz</i>	43				

AUTOJECT 2 INJECTION DEVICE	36	BAXDELA.....	5	<i>bevacizumab</i>	7
AUTOPEN 1 TO 21 UNITS	36	<i>bayer low dose aspirin</i>	15	<i>bexarotene</i>	7
AUVI-Q.....	54	BCG VACCINE, LIVE (PF)	45	BEXSERO.....	45
<i>avar</i>	28	<i>b-complex with vitamin c</i>	59	BEYFORTUS.....	2
<i>aviane</i>	49	BD MICROTAINER LANCET	36	<i>bicalutamide</i>	7
<i>avidoxy</i>	6	BD SPECIALTY USE NEEDLES	36	BIKTARVY	2
AVMAPKI-FAKZYNJA	7	<i>beclomethasone dipropionate</i>	55	<i>bimatoprost</i>	53
AVONEX	20	BELBUCA	14	BIOTHRIX	45
<i>ayuna</i>	49	<i>belladonna alkaloids-opium</i> .	40	<i>bisacodyl</i>	41
AZASITE	52	<i>benazepril</i>	21	<i>bismuth subcit k-metronidz-ten</i>	43
<i>azathioprine</i>	7	<i>benazepril-hydrochlorothiazide</i>	21	<i>bisoprolol fumarate</i>	21
<i>azelaic acid</i>	28	BENEFIX.....	23	<i>bisoprolol-hydrochlorothiazide</i>	21
<i>azelastine</i>	33, 53	BENLYSTA.....	47	<i>blisovi 24 fe</i>	49
<i>azithromycin</i>	4	<i>benzepril</i>	28	<i>blisovi fe 1.5/30 (28)</i>	49
AZSTARYS.....	17	BENZNIDAZOLE	4	<i>blisovi fe 1/20 (28)</i>	49
<i>azurette (28)</i>	49	<i>benzonatate</i>	55	BOOSTRIX TDAP	45
B		<i>benzoyl peroxide</i>	28	<i>bosentan</i>	55
<i>b complex 1 (with folic acid)</i>	59	<i>benztropine</i>	12	BOSULIF	7
<i>b complex-vitamin c-folic acid</i>	59	<i>bepotastine besilate</i>	53	<i>bp 10-1</i>	28
<i>bacitracin</i>	52	<i>beser</i>	30	BRAFTOVI	7
<i>bacitracin-polymyxin b</i>	52	<i>betaine</i>	41	BREATHERITE MDI SPACER	57
<i>baclofen</i>	13	<i>betamethasone dipropionate</i>	30	BREO ELLIPTA.....	55
BAFIERTAM	20	<i>betamethasone valerate</i>	30	<i>breyana</i>	55
<i>bal-care dha</i>	59	<i>betamethasone, augmented</i> ..	30	BREZTRI AEROSPHERE...55	
<i>balsalazide</i>	41	BETASERON.....	20	<i>briellyn</i>	49
BALVERSA	7	<i>betaxolol</i>	21, 52	<i>brimonidine</i>	28, 54
<i>balziva (28)</i>	49	<i>bethanechol chloride</i>	58	<i>brimonidine-timolol</i>	53
BAQSIMI.....	36			BRINSUPRI	55
BARACLUDGE	2				

<i>brinzolamide</i>	53	<i>caffeine citrate</i>	32	<i>carteolol</i>	52
<i>brivaracetam</i>	10	<i>calcipotriene</i>	26	<i>cartia xt</i>	21
BRIXADI	14	<i>calcipotriene-betamethasone</i>	26	<i>carvedilol</i>	21
<i>bromfenac</i>	53	<i>calcitonin (salmon)</i>	38	<i>carvedilol phosphate</i>	21
<i>bromocriptine</i>	12	<i>calcitriol</i>	26, 38	CAVERJECT	58
<i>brompheniramine-pseudoeph-</i> <i>dm</i>	55	<i>calcium acetate(phosphat bind)</i>	59	CAVERJECT IMPULSE	58
BRUKINSA	7	CALQUENCE (ACALABRUTINIB MAL)	7	CAYA CONTOURED	47
<i>budesonide</i>	41, 55	<i>camila</i>	47	CAYSTON.....	4
<i>budesonide-formoterol</i>	55	<i>camrese</i>	49	<i>caziant (28)</i>	49
<i>bumetanide</i>	21	<i>camrese lo</i>	49	<i>cefaclor</i>	3
<i>buprenorphine</i>	14	CAMZYOS	26	<i>cefadroxil</i>	3
<i>buprenorphine hcl</i>	14	<i>candesartan</i>	21	<i>cefдинир</i>	3, 4
<i>buprenorphine-naloxone</i>	15	<i>candesartan-</i> <i>hydrochlorothiazid</i>	21	<i>cefixime</i>	4
<i>bupropion hcl</i>	17	<i>capecitabine</i>	7	<i>cefpodoxime</i>	4
<i>bupropion hcl (smoking deter)</i>	33	CAPRELSA.....	7	<i>cefprozil</i>	4
<i>buspirone</i>	17	<i>captopril</i>	21	<i>cefuroxime axetil</i>	4
<i>butalbital-acetaminop-caf-cod</i>	14	<i>captopril-hydrochlorothiazide</i>	21	<i>celecoxib</i>	15
<i>butalbital-acetaminophen</i>	14	CAPVAXIVE	45	<i>cephalexin</i>	4
<i>butalbital-acetaminophen-caff</i>	14	<i>carbamazepine</i>	10	CEPROTIN (BLUE BAR) ...	23
<i>butalbital-aspirin-caffeine</i>	14	<i>carbidopa</i>	12	CEPROTIN (GREEN BAR) 23	
<i>butorphanol</i>	15	<i>carbidopa-levodopa</i>	12	CEQUR SIMPLICITY	36
BYOOVIZ.....	53	<i>carbidopa-levodopa-</i> <i>entacapone</i>	12	CERDELGA.....	38
C		<i>carbinoxamine maleate</i>	54	<i>cetirizine</i>	54
CABENUVA	2	<i>carbzah</i>	54	<i>cetrorelix</i>	38
<i>cabergoline</i>	38	<i>carglumic acid</i>	32	<i>cevimeline</i>	32
CABLIVI.....	23	<i>carisoprodol</i>	13	<i>charlotte 24 fe</i>	49
CABOMETYX.....	7			<i>chateal eq (28)</i>	49
				CHEMET.....	32
				<i>children's alaway</i>	53
				<i>chlordiazepoxide hcl</i>	17

<i>chlordiazepoxide-clidinium</i> ..	40	<i>classic prenatal</i>	59	<i>codeine-guaifenesin</i>	55
<i>chlorhexidine gluconate</i>	33	<i>clearlax</i>	41	<i>colchicine</i>	46
<i>chloroquine phosphate</i>	4	<i>clindacin</i>	28	<i>colesevelam</i>	25
<i>chlorpromazine</i>	17	<i>clindacin etz</i>	28	<i>colestipol</i>	25
<i>chlorthalidone</i>	21	<i>clindacin p</i>	28	COMBIPATCH.....	47
<i>chlorzoxazone</i>	13	<i>clindamycin hcl</i>	5	COMBIVENT RESPIMAT ..	56
CHOLBAM.....	41	<i>clindamycin pediatric</i>	5	COMETRIQ	7
<i>cholecalciferol (vitamin d3)</i> .	59	<i>clindamycin phosphate</i> ...	28, 48	COMIRNATY 2025-2026(5-11Y)(PF)	45
<i>cholestyramine (with sugar)</i> .	25	<i>clindamycin-benzoyl peroxide</i>	28	COMIRNATY 2025-26 (12Y UP)(PF).....	45
<i>cholestyramine light</i>	25	<i>clindamycin-tretinoin</i>	28	COMPACT SPACE CHAMBER	57
CIBINQO	27	<i>clobazam</i>	10	<i>complete natal dha</i>	59
<i>ciclodan</i>	30	<i>clobetasol</i>	30, 31	<i>compro</i>	41
<i>ciclopirox</i>	30	<i>clobetasol-emollient</i>	31	<i>conjugated estrogens</i>	47
<i>cilostazol</i>	23	<i>clodan</i>	31	<i>constulose</i>	41
CIMDUO.....	2	<i>clomid</i>	38	<i>corphena</i>	54
CIMERLI	53	<i>clomiphene citrate</i>	38	<i>cortisone</i>	34
<i>cimetidine</i>	43	<i>clomipramine</i>	17	CORTISPORIN-TC.....	34
<i>cimetidine hcl</i>	43	<i>clonazepam</i>	10	COTELLIC.....	7
<i>cinacalcet</i>	38	<i>clonidine</i>	21	<i>covaryx</i>	47
CINRYZE.....	56	<i>clonidine hcl</i>	17, 21	<i>covaryx h.s.</i>	47
<i>ciprofloxacin</i>	5	<i>clopidogrel</i>	23	CREON.....	41
<i>ciprofloxacin hcl</i>	5, 34, 52	<i>clorazepate dipotassium</i>	17	CRESEMBA.....	2
<i>ciprofloxacin-dexamethasone</i>	34	<i>clotrimazole</i>	2, 30	CRINONE	47
<i>ciprofloxacin-hydrocortisone</i>	34	<i>clotrimazole-betamethasone</i> .	30	<i>cromolyn</i>	41, 53, 56
<i>citalopram</i>	17	<i>clozapine</i>	17	<i>cryelle (28)</i>	49
<i>citroma</i>	41	COAGADEX.....	23	CRYSVITA.....	38
<i>cladribine(multiple sclerosis)</i>	20	COARTEM.....	5	CTEXLI.....	41
<i>claravis</i>	28	<i>codeine sulfate</i>	14		
<i>clarithromycin</i>	4	<i>codeine-butalbital-asa-caff</i> ..	14		

<i>cyanocobalamin (vitamin b-12)</i>	<i>dasetta 7/7/7 (28)</i>	DEXCOM G6 SENSOR.....
59	49	35
<i>cyclobenzaprine</i>	<i>daysee</i>	DEXCOM G6 TRANSMITTER
13	49	35
<i>cyclopentolate</i>	<i>deblitane</i>	DEXCOM G7 15 DAY SENSOR.....
52	47	35
<i>cyclopen-tropic-phenyleph- watr</i>	<i>deferasirox</i>	DEXCOM G7 RECEIVER ..
53	32	35
<i>cyclophosphamide</i>	<i>deferiprone</i>	DEXCOM G7 SENSOR.....
7	32	35
<i>cycloserine</i>	<i>deflazacort</i>	<i>dexmethylphenidate</i>
5	34	17
<i>cyclosporine</i>	DELSTRIGO.....	<i>dextroamphetamine sulfate</i> ...
7, 53	2	17
<i>cyclosporine modified</i>	<i>demeclocycline</i>	<i>dextroamphetamine- amphetamine</i>
7	6	17
<i>cyproheptadine</i>	DENGVAXIA (PF).....	DIACOMIT
54	45	10
<i>cyred</i>	<i>denta 5000 plus</i>	<i>dialyvite 800</i>
49	33	59
<i>cyred eq</i>	<i>denta 5000 plus sensitive</i>	<i>diazepam</i>
49	33	10, 17
CYSTAGON	<i>dentagel</i>	<i>diazepam intensol</i>
58	33	17
CYSTARAN.....	DEPO-ESTRADIOL	<i>diazoxide</i>
53	47	36
D	<i>dermacinrx lidocan</i>	<i>dichlorphenamide</i>
<i>dabigatran etexilate</i>	DESCOVY	12
23	2	<i>diclofenac potassium</i>
<i>dalfampridine</i>	<i>desipramine</i>	15
12	17	<i>diclofenac sodium</i> 15, 27, 53
<i>danazol</i>	<i>desloratadine</i>	<i>diclofenac-misoprostol</i>
38	54	15
<i>dantrolene</i>	<i>desmopressin</i>	<i>dicloxacillin</i>
13	38	5
DANZITEN.....	DESMOPRESSIN	<i>dicyclomine</i>
7	38	40
<i>dapagliflozin</i>	<i>desog-e.estradiol/e.estradiol</i> 49	<i>diflunisal</i>
39	49	15
<i>dapagliflozin-metformin</i>	<i>desonide</i>	<i>difluprednate</i>
39	31	54
<i>dapagliflozin-saxagliptin</i>	<i>desoximetasone</i>	<i>digoxin</i>
39	31	23
<i>dapsone</i>	<i>desvenlafaxine succinate</i>	<i>dihydroergotamine</i>
5, 28	17	12
DAPTACEL (DTAP PEDIATRIC) (PF).....	<i>dexabliss</i>	DILANTIN
45	34	10
<i>darifenacin</i>	<i>dexamethasone</i>	<i>diltiazem</i>
58	34	21
<i>darunavir</i>	<i>dexamethasone intensol</i>	<i>dilt-xr</i>
2	34	21
<i>dasatinib</i>	<i>dexamethasone sodium phosphate</i>	<i>dimethyl fumarate</i>
7	54	20
<i>dasetta 1/35 (28)</i>	<i>dexchlorpheniramine maleate</i>	DIPENTUM
49	54	41
	DEXCOM G6 RECEIVER ..	
	35	

<i>diphenoxylate-atropine</i>	40	DULERA.....	56	ELIGARD (6 MONTH)	7
<i>dipyridamole</i>	23	<i>duloxetine</i>	18	<i>elinest</i>	49
<i>diskets</i>	14	DUPIXENT PEN	27	ELIQUIS.....	23
<i>disulfiram</i>	32	DUPIXENT SYRINGE.....	27	ELIQUIS DVT-PE TREAT 30D START	23
<i>divalproex</i>	10	<i>dutasteride</i>	58	ELIQUIS SPRINKLE	23
<i>dofetilide</i>	20	<i>dutasteride-tamsulosin</i>	58	<i>elite-ob</i>	59
<i>dolishale</i>	49	E		ELLA.....	49
<i>donepezil</i>	13	<i>e.e.s. 400</i>	4	ELMIRON.....	58
DOPTELET (15 TAB PACK)	23	EASIVENT HOLDING CHAMBER	57	ELOCTATE	23
DOPTELET SPRINKLE.....	23	EBGLYSS PEN	27	<i>eltrombopag olamine</i>	24
<i>dorzolamide</i>	53	EBGLYSS SYRINGE	27	<i>eluryng</i>	48
<i>dorzolamide-timolol</i>	53	<i>econazole nitrate</i>	30	EMGALITY PEN.....	12
<i>dorzolamide-timolol (pf)</i>	53	<i>econtra ez</i>	49	EMGALITY SYRINGE	12
<i>dotti</i>	47	<i>econtra one-step</i>	49	EMPAVELI.....	32
DOVATO	2	<i>ecotrin low strength</i>	15	<i>emtricitabine</i>	2
<i>doxazosin</i>	21	<i>ed-spaz</i>	40	<i>emtricitabine-tenofovir (tdf)</i> ...	3
<i>doxepin</i>	17, 18	EDURANT PED	2	<i>emtricitabine-tenofovir (tdf)</i> ...3	
<i>doxercalciferol</i>	38	<i>eemt</i>	47	EMTRIVA	3
<i>doxycycline hyclate</i>	6	<i>eemt hs</i>	47	EMVERM.....	5
<i>doxycycline monohydrate</i>	6	<i>efavirenz</i>	2	<i>emzahh</i>	48
<i>doxylamine-pyridoxine (vit b6)</i>	41	<i>efavirenz-emtricitabin-tenofov</i> 2		<i>enalapril maleate</i>	21
<i>dronabinol</i>	41	<i>efavirenz-lamivuv-tenofov disop</i>	2	<i>enalapril-hydrochlorothiazide</i>	21
<i>drospirenone-e.estradiol-lm.fa</i>	49	<i>effe-k</i>	59	ENBREL.....	47
<i>drospirenone-ethinyl estradiol</i>	49	EGRIFTA SV	44	ENBREL MINI.....	47
DROXIA	7	EGRIFTA WR	44	ENBREL SURECLICK	47
DUAVEE.....	47	<i>eletriptan</i>	12	<i>endocet</i>	14
<i>dulcolax (magnesium hydroxide)</i>	41	ELIGARD	7	ENDOMETRIN.....	48
		ELIGARD (3 MONTH).....	7	ENFLONSIA.....	3
		ELIGARD (4 MONTH).....	7	ENGERIX-B (PF)	45

ENGERIX-B PEDIATRIC (PF).....	45	<i>erythromycin</i>	4, 52	<i>eye itch relief</i>	53
<i>enilloring</i>	48	<i>erythromycin ethylsuccinate</i> ...	4	EYSUVIS	54
<i>enoxaparin</i>	24	<i>erythromycin with ethanol</i>	28	<i>ezetimibe</i>	25
<i>enpresse</i>	49	<i>erythromycin-benzoyl peroxide</i>	28	<i>ezetimibe-simvastatin</i>	25
ENSACOVE.....	7	<i>escitalopram oxalate</i>	18	F	
<i>enskyce</i>	49	<i>eslicarbazepine</i>	10	FABHALTA.....	32
ENSPRYNG.....	7	<i>esomeprazole magnesium</i>	43	<i>falmina (28)</i>	50
ENSTILAR.....	26	ESPEROCT	24	<i>famciclovir</i>	3
<i>entacapone</i>	12	<i>estarylla</i>	49	<i>famotidine</i>	43
<i>entecavir</i>	3	<i>estazolam</i>	18	FASENRA PEN.....	56
ENTRESTO SPRINKLE	26	<i>estradiol</i>	48	FC2 FEMALE CONDOM ..	47
<i>enulose</i>	41	<i>estradiol valerate</i>	48	<i>febuxostat</i>	46
EPCLUSA	3	<i>estradiol-norethindrone acet</i>	48	<i>feirza</i>	50
EPIDIOLEX	10	<i>estrogens-methyltestosterone</i>	48	<i>felbamate</i>	10
<i>epinastine</i>	53	<i>eszopiclone</i>	18	<i>felodipine</i>	21
<i>epinephrine</i>	54	<i>ethacrynic acid</i>	21	<i>fem ph</i>	48
<i>eplerenone</i>	21	<i>ethambutol</i>	5	FEMCAP	47
<i>ergocalciferol (vitamin d2)</i> ...	59	<i>ethosuximide</i>	10	<i>fenofibrate</i>	25
<i>ergoloid</i>	18	<i>etodolac</i>	15	<i>fenofibrate micronized</i>	25
ERGOMAR.....	12	<i>etonogestrel-ethinyl estradiol</i>	48	<i>fenofibrate nanocrystallized</i> .	25
<i>ergotamine-caffeine</i>	12	<i>etoposide</i>	8	<i>fenofibric acid</i>	25
ERIVEDGE.....	8	<i>etravirine</i>	3	<i>fenofibric acid (choline)</i>	25
ERLEADA	8	EUCRISA.....	27	<i>fenopropfen</i>	15
<i>erlotinib</i>	8	<i>everolimus (antineoplastic)</i>	8	FENSOLVI	8
<i>errin</i>	48	<i>everolimus</i> (<i>immunosuppressive</i>)	8	<i>fentanyl</i>	14
ERVEBO(PF)(NATIONAL STOCKPILE).....	45	<i>evexithroid</i>	40	<i>ferric citrate</i>	59
<i>ery pads</i>	28	EXELDERM	30	FERRIPROX	32
<i>ery-tab</i>	4	<i>exemestane</i>	8	FERRIPROX (2 TIMES A DAY)	32
<i>erythrocin (as stearate)</i>	4			<i>ferrous sulfate</i>	59

FETZIMA.....	18	<i>fluocinolone and shower cap</i>	31	FREESTYLE CONTROL	35
<i>fidaxomicin</i>	4	<i>fluocinonide</i>	31	FREESTYLE FREEDOM....	35
FILSPARI.....	26	<i>fluocinonide-e</i>	31	FREESTYLE FREEDOM	
FINACEA.....	28	<i>fluorescein-proparacaine</i>	53	LITE	35
<i>finasteride</i>	58	<i>fluoride (sodium)</i>	33, 59	FREESTYLE INSULINX....	35
<i>finzala</i>	50	<i>fluorometholone</i>	54	FREESTYLE INSULINX	
FIRDAPSE	13	<i>fluorouracil</i>	27	TEST STRIPS.....	35
<i>flac otic oil</i>	34	<i>fluoxetine</i>	18	FREESTYLE LIBRE 14 DAY	
<i>flavoxate</i>	58	<i>fluphenazine hcl</i>	18	READER	35
<i>flecainide</i>	20	<i>flurazepam</i>	18	FREESTYLE LIBRE 14 DAY	
FLECTOR.....	15	<i>flurbiprofen</i>	15	SENSOR.....	35
FLEXICHAMBER.....	57	<i>flurbiprofen sodium</i>	53	FREESTYLE LIBRE 2 PLUS	
<i>flotrex</i>	59	<i>fluticasone propionate</i>	31, 56	SENSOR.....	35
FLUAD 2025-2026 (65 YR		<i>fluticasone propion-salmeterol</i>		FREESTYLE LIBRE 2	
UP)(PF)	45	.....	56	READER	35
FLUARIX 2025-2026 (PF)..	45	<i>fluvoxamine</i>	18	FREESTYLE LIBRE 2	
FLUBLOK 2025-2026 (PF).	45	FLUZONE 2025-2026	45	SENSOR.....	35
FLUCELVAX 2025-2026....	45	FLUZONE 2025-2026 (PF).	45	FREESTYLE LIBRE 3	
FLUCELVAX 2025-2026 (PF)		FLUZONE HIGH-DOSE		READER	35
.....	45	2025-26 (PF).....	45	FREESTYLE LIBRE 3	
<i>fluconazole</i>	2	<i>folic acid</i>	59, 60	SENSOR.....	35
<i>flucytosine</i>	2	<i>folitab</i>	60	FREESTYLE LITE METER	35
<i>fludrocortisone</i>	34	<i>folivane-ob</i>	60	FREESTYLE LITE STRIPS	35
FLULAVAL 2025-2026 (PF)	45	<i>foltabs 800</i>	60	FREESTYLE PRECISION	
FLUMIST 2025-2026	45	<i>fondaparinux</i>	24	NEO STRIPS.....	35
FLUMIST HOME 2025-2026		<i>formoterol fumarate</i>	56	FREESTYLE TEST	35
.....	45	<i>fosamprenavir</i>	3	<i>frovatriptan</i>	12
<i>flunisolide</i>	56	<i>fosinopril</i>	21	FRUZAQLA.....	8
<i>fluocinolone</i>	31	<i>fosinopril-hydrochlorothiazide</i>		<i>full spectrum b-vitamin c</i>	60
<i>fluocinolone acetonide oil</i>	34	.....	21	FULPHILA.....	44
		FRAGMIN.....	24	<i>furosemide</i>	21
				<i>fyavolv</i>	48

FYCOMPA.....	10	<i>gentlelax</i>	41	GYNAZOLE-1	48
<i>fyremadel</i>	38	GENVOYA.....	3	H	
G		GILOTRIF	8	HAEGARDA.....	56
<i>g tussin ac</i>	55	GLASSIA	32	<i>hailey</i>	50
<i>gabapentin</i>	10	<i>glatiramer</i>	20	<i>hailey 24 fe</i>	50
<i>galantamine</i>	13	<i>glatopa</i>	20	<i>hailey fe 1.5/30 (28)</i>	50
<i>galbriela</i>	50	<i>glimepiride</i>	39	<i>hailey fe 1/20 (28)</i>	50
<i>gallifrey</i>	48	<i>glipizide</i>	39	<i>halobetasol propionate</i>	31
GAMMAGARD LIQUID	45	<i>glipizide-metformin</i>	39	<i>haloette</i>	48
GAMMAGARD LIQUID ERC		<i>glucagon emergency kit</i>		<i>haloperidol</i>	18
.....	45	<i>(human)</i>	36	<i>haloperidol lactate</i>	18
GAMUNEX-C	45	GLUCOSE KETONE		HARVONI.....	3
<i>ganirelix</i>	38	CONTROL SOLN.....	35	HAVRIX (PF)	45
GARDASIL 9 (PF).....	45	<i>glutamine (sickle cell)</i>	32	<i>heather</i>	48
<i>gatifloxacin</i>	52	<i>glyburide</i>	39	HEMANGEOL.....	21
<i>gavilax</i>	41	<i>glyburide-metformin</i>	39	HEMLIBRA	24
<i>gavilyte-c</i>	41	<i>glycerol phenylbutyrate</i>	32	<i>hemmorex-hc</i>	41
<i>gavilyte-g</i>	41	<i>glycopyrrolate</i>	40	<i>hep flush-10 (pf)</i>	24
<i>gavilyte-n</i>	41	GLYXAMBI.....	39	HEPAGAM B	45
GAVRETO	8	GOMEKLI.....	8	<i>heparin (porcine)</i>	24
<i>gefitinib</i>	8	GONAL-F	38	<i>heparin (porcine) in 0.9% nacl</i>	
<i>gemfibrozil</i>	25	GONAL-F RFF REDI-JECT	38	.....	24
<i>gemmily</i>	50	<i>granisetron hcl</i>	41	<i>heparin (porcine) in 5 % dex</i>	24
<i>generlac</i>	41	<i>griseofulvin microsize</i>	2	<i>heparin (porcine) in nacl (pf)</i>	
<i>engraf</i>	8	<i>griseofulvin ultramicrosize</i>	2	.....	24
GENOTROPIN	44	<i>guanfacine</i>	18, 21	<i>heparin lock flush (porcine)</i> .	24
GENOTROPIN MINIQUICK		GVOKE	36	<i>heparin lockflush(porcine)(pf)</i>	
.....	44	GVOKE HYPOPEN 2-PACK		.....	24
<i>gentamicin</i>	29, 52	.....	36	<i>heparin(porcine) in 0.45% nacl</i>	
<i>gentle laxative (bisacodyl)</i> ...	41	GVOKE PFS 2-PACK		.....	24
<i>gentle laxative (mag hydrox)</i>	41	SYRINGE.....	36	<i>heparin, porcine (pf)</i>	24

HEPLISAV-B (PF)	45	<i>hydrocodone-chlorpheniramine</i>	55	ICLUSIG	8
HIBERIX (PF).....	45	<i>hydrocodone-homatropine</i>	55	<i>icosapent ethyl</i>	25
<i>homatropaire</i>	53	<i>hydrocodone-ibuprofen</i>	14	ICOTYDE.....	26
HUMALOG JUNIOR		<i>hydrocortisone</i>	31, 34, 41	IDELVION	24
KWIKPEN U-100	36	<i>hydrocortisone acetate</i>	41	IDHIFA	8
HUMALOG KWIKPEN		<i>hydrocortisone butyrate</i>	31	ILARIS (PF)	44
INSULIN.....	37	<i>hydrocortisone sod succinate</i>	34	ILET STARTER KIT-INSET	36
HUMALOG MIX 50-50		<i>hydrocortisone valerate</i>	32	<i>imatinib</i>	8
KWIKPEN	37	<i>hydrocortisone-acetic acid</i> ...	34	IMBRUVICA	8
HUMALOG MIX 75-25		<i>hydrocortisone-pramoxine</i> ..26,	41	<i>imipenem-cilastatin</i>	5
KWIKPEN	37	<i>hydromorphone</i>	14	<i>imipramine hcl</i>	18
HUMALOG MIX 75-25(U-		<i>hydroxocobalamin</i>	60	<i>imipramine pamoate</i>	18
100)INSULN.....	37	<i>hydroxychloroquine</i>	5	<i>imiquimod</i>	27
HUMALOG TEMPO PEN(U-		<i>hydroxyurea</i>	8	IMKELDI	8
100)INSULN.....	37	<i>hydroxyzine hcl</i>	54	IMOGAM RABIES-HT (PF)	
HUMALOG U-100 INSULIN		<i>hydroxyzine pamoate</i>	54, 55	.....	45
.....	37	HYMPAVZI PEN	24	IMOVAX RABIES VACCINE	
HUMULIN 70/30 U-100		<i>hyoscyamine sulfate</i>	40	(PF).....	45
INSULIN.....	37	<i>hyosyne</i>	40	IMPAVIDO	5
HUMULIN 70/30 U-100		HYPERHEP B.....	45	IMULDOSA	26
KWIKPEN	37	HYPERHEP B NEONATAL	45	INBRIJA.....	12
HUMULIN N NPH INSULIN		HYPERRAB (PF).....	45	<i>incassia</i>	48
KWIKPEN	37	I		INCRELEX	32
HUMULIN N NPH U-100		<i>ibandronate</i>	46	INCRUSE ELLIPTA	56
INSULIN.....	37	IBTROZI	8	<i>indapamide</i>	21
HUMULIN R REGULAR U-		<i>ibu</i>	15	<i>indomethacin</i>	15
100 INSULN	37	<i>ibuprofen</i>	15	INFANRIX (DTAP) (PF)	45
HUMULIN R U-500 (CONC)		<i>icatibant</i>	56	INGREZZA	13
KWIKPEN	37	<i>iclevia</i>	50	INGREZZA INITIATION	
HYCAMTIN	8			PK(TARDIV).....	13
<i>hydralazine</i>	21			INGREZZA SPRINKLE	13
<i>hydrochlorothiazide</i>	21				
<i>hydrocodone bitartrate</i>	14				
<i>hydrocodone-acetaminophen</i>	14				

INLURIYO.....	8	IWILFIN.....	8	KALYDECO.....	56
INLYTA.....	8	IXIARO (PF).....	45	<i>kariva (28)</i>	50
INSULIN GLARGINE-YFGN	37	J		<i>kelnor 1/35 (28)</i>	50
INSULIN LISPRO	37	<i>jaimiess</i>	50	KERENDIA.....	22
INSULIN LISPRO PROTAMIN-LISPRO	37	JAKAFI	8	KESIMPTA PEN	20
INSULIN SYRINGE- NEEDLE U-100	36	JANUMET	39	<i>ketoconazole</i>	2, 30
INTELENCE.....	3	JANUMET XR.....	39	<i>ketodan</i>	30
<i>introvale</i>	50	JANUVIA.....	39	<i>ketodan kit</i>	30
INVEGA SUSTENNA.....	18	JARDIANCE.....	39	<i>ketoprofen</i>	15, 16
IPOL	45	JASCAYD	56	<i>ketorolac</i>	16, 53
<i>ipratropium bromide</i>	33, 56	<i>jasmiel (28)</i>	50	<i>ketotifen fumarate</i>	53
<i>ipratropium-albuterol</i>	56	<i>javygtor</i>	38	KINRIX (PF).....	45
IQIRVO	41	<i>jaythari</i>	34	<i>kionex</i>	59
<i>irbesartan</i>	21	<i>jencycla</i>	48	KISQALI	8
<i>irbesartan-hydrochlorothiazide</i>	22	<i>jinteli</i>	48	KITABIS PAK.....	5
ISENTRESS	3	JIVI.....	24	<i>klayesta</i>	30
ISENTRESS HD	3	<i>jolessa</i>	50	<i>klor-con</i>	59
<i>isibloom</i>	50	<i>joyeaux</i>	50	<i>klor-con 10</i>	59
<i>isoniazid</i>	5	<i>juleber</i>	50	<i>klor-con 8</i>	59
<i>isosorbide dinitrate</i>	26	JULUCA.....	3	<i>klor-con m10</i>	59
<i>isosorbide mononitrate</i>	26	<i>junel 1.5/30 (21)</i>	50	<i>klor-con m15</i>	59
<i>isosorbide-hydralazine</i>	22	<i>junel 1/20 (21)</i>	50	<i>klor-con m20</i>	59
<i>isotretinoin</i>	28	<i>junel fe 1.5/30 (28)</i>	50	KLOXXADO	16
<i>isradipine</i>	22	<i>junel fe 1/20 (28)</i>	50	<i>kobee</i>	60
<i>itraconazole</i>	2	<i>junel fe 24</i>	50	KOMZIFTI	8
<i>ivabradine</i>	26	JUXTAPID	25	<i>kourzeq</i>	33
<i>ivermectin</i>	5, 28	JYNNEOS (PF).....	45	KOVALTRY	24
		K		K-PHOS ORIGINAL	58
		<i>kaitlib fe</i>	50	<i>kurvelo (28)</i>	50
		<i>kalliga</i>	50	KYLEENA	47

<i>kymbee</i>	34	<i>lessina</i>	50	<i>lidocaine-prilocaine</i>	29
L		<i>letrozole</i>	8	<i>lidocan iii</i>	29
<i>l norgest/e.estradiol-e.estrad</i>	50	<i>leucovorin calcium</i>	7	<i>lidocan iv</i>	29
<i>labetalol</i>	22	LEUKERAN	8	<i>lidocan v</i>	29
<i>lacosamide</i>	10	LEUKINE.....	44	<i>lidocort</i>	29
<i>lactated ringers</i>	32	<i>leuprolide</i>	8	<i>linezolid</i>	5
<i>lactulose</i>	41	<i>levabuterol hcl</i>	56	LINZESS	42
LAGEVRIO (EUA).....	3	<i>levetiracetam</i>	11	<i>liomny</i>	40
<i>lamivudine</i>	3	<i>levobunolol</i>	52	<i>liothyronine</i>	40
<i>lamivudine-zidovudine</i>	3	<i>levocarnitine</i>	32	<i>liraglutide</i>	39
<i>lamotrigine</i>	10, 11	<i>levocarnitine (with sugar)</i>	32	<i>lisdexamfetamine</i>	18
LANCETS.....	36	<i>levocetirizine</i>	55	<i>lisinopril</i>	22
LANCING DEVICE	36	<i>levofloxacin</i>	5, 6, 52	<i>lisinopril-hydrochlorothiazide</i>	22
<i>lanreotide</i>	8	<i>levonest (28)</i>	50	LITEAIRE MDI CHAMBER	57
<i>lansoprazole</i>	43	<i>levonorgest-eth.estradiol-iron</i>	50	<i>lithium carbonate</i>	18
<i>lanthanum</i>	59	<i>levonorgestrel</i>	50	<i>lithium citrate</i>	18
LANTUS SOLOSTAR U-100 INSULIN.....	37	<i>levonorgestrel-ethinyl estrad</i>	50	<i>lofena</i>	16
LANTUS U-100 INSULIN..	37	<i>levonorg-eth estrad triphasic</i>	50	<i>lofexidine</i>	16
<i>lapatinib</i>	8	<i>levorphanol tartrate</i>	14	<i>lojaimiess</i>	50
<i>larin 1.5/30 (21)</i>	50	<i>levo-t</i>	40	LOKELMA.....	59
<i>larin 1/20 (21)</i>	50	<i>levothyroxine</i>	40	<i>lomustine</i>	8
<i>larin 24 fe</i>	50	<i>levoxyl</i>	40	LONSURF	8
<i>larin fe 1.5/30 (28)</i>	50	<i>lexette</i>	32	<i>loperamide</i>	40
<i>larin fe 1/20 (28)</i>	50	LICART.....	16	<i>lopinavir-ritonavir</i>	3
<i>latanoprost</i>	53	<i>lidocaine</i>	29	<i>lorazepam</i>	18
<i>laxative (bisacodyl)</i>	42	<i>lidocaine hcl</i>	29	<i>lorazepam intensol</i>	18
<i>leflunomide</i>	47	<i>lidocaine hcl-hydrocortison ac</i>	29, 42	LORBRENA.....	8
<i>lenalidomide</i>	8	<i>lidocaine-hydrocortisone-aloe</i>	42	<i>loryna (28)</i>	50
LENVIMA	8			<i>losartan</i>	22

<i>losartan-hydrochlorothiazide</i>.....22	LYUMJEV KWIKPEN U-100 INSULIN.....37	<i>meloxicam</i>.....16
<i>loteprednol etabonate</i>.....54	LYUMJEV KWIKPEN U-200 INSULIN.....37	<i>meloxicam submicronized</i>.....16
<i>lovastatin</i>.....25	LYUMJEV TEMPO PEN(U- 100)INSULN.....37	<i>memantine</i>.....13
<i>low-ogestrel (28)</i>.....50	LYUMJEV U-100 INSULIN37	<i>memantine-donepezil</i>.....13
<i>loxapine succinate</i>.....18	<i>lyza</i>.....48	MENOPUR.....38
<i>lo-zumandimine (28)</i>.....50	M	MENQUADFI (PF).....45
<i>lubiprostone</i>.....42	<i>magnesium citrate</i>.....42	MENVEO A-C-Y-W-135-DIP (PF).....45
<i>ludent fluoride</i>.....60	<i>malathion</i>.....32	<i>meprobamate</i>.....13
<i>lugols</i>.....29, 59	<i>maraviroc</i>.....3	<i>mercaptopurine</i>.....9
<i>luizza</i>.....50	<i>marlissa (28)</i>.....50	MERILOG.....37
LUMRYZ.....18	MARPLAN.....18	MERILOG SOLOSTAR.....37
LUMRYZ STARTER PACK 18	MATULANE.....9	<i>mesalamine</i>.....42
LUPKYNIS.....8	<i>matzim la</i>.....22	<i>mesalamine with cleansing wipe</i>.....42
LUPRON DEPOT.....9	<i>maxi-tuss ac</i>.....55	<i>metaxalone</i>.....13
LUPRON DEPOT (3 MONTH).....8	MAYZENT.....20	<i>metformin</i>.....39
LUPRON DEPOT (4 MONTH).....8	MAYZENT STARTER(FOR 1MG MAINT).....20	<i>methadone</i>.....14
LUPRON DEPOT (6 MONTH).....8	MAYZENT STARTER(FOR 2MG MAINT).....20	<i>methadose</i>.....14
<i>lurasidone</i>.....18	<i>mb caps</i>.....58	<i>methamphetamine</i>.....18
<i>lurbiro</i>.....16	<i>meclizine</i>.....42	<i>methazolamide</i>.....53
<i>lutera (28)</i>.....50	<i>meclofenamate</i>.....16	<i>methenamine hippurate</i>.....6
LUTRATE DEPOT (3 MONTH).....9	<i>medroxyprogesterone</i>.....48	<i>methenamine mandelate</i>.....6
LUXTURNA.....53	<i>mefenamic acid</i>.....16	<i>methen-sod phos-meth blue- hyos</i>.....58
<i>lyleq</i>.....48	<i>mefloquine</i>.....5	<i>methimazole</i>.....35
<i>lyllana</i>.....48	<i>megestrol</i>.....9	METHITEST.....38
LYNPARZA.....9	MEKINIST.....9	<i>methocarbamol</i>.....13
LYSODREN.....9	MEKTOVI.....9	<i>methotrexate sodium</i>.....9
LYTGOBI.....9	<i>meleya</i>.....48	<i>methotrexate sodium (pf)</i>.....9
		<i>methoxsalen</i>.....27

<i>methscopolamine</i>	40	<i>migergot</i>	12	<i>montelukast</i>	56
<i>methsuximide</i>	11	<i>miglitol</i>	39	<i>morphine</i>	14, 15
<i>methyl salicylate</i>	27	<i>miglustat</i>	38	<i>morphine concentrate</i>	14
<i>methyldopa</i>	22	<i>mili</i>	51	MOUNJARO.....	39
<i>methylergonovine</i>	52	<i>milk of magnesia</i>	42	MOVANTIK.....	42
<i>methylphenidate</i>	18	<i>milk of magnesia concentrated</i>	42	<i>moxifloxacin</i>	6, 52
<i>methylphenidate hcl</i>	18, 19	<i>millipred</i>	34	MRESVIA (PF).....	46
<i>methylprednisolone</i>	34	<i>millipred dp</i>	34	MULTAQ.....	20
<i>methyltestosterone</i>	38	<i>milnacipran</i>	47	<i>multi-vitamin with fluoride</i> ...	60
<i>metoclopramide hcl</i>	42	<i>milophene</i>	38	<i>multivit-fluoride (metafolin)</i> .	60
<i>metolazone</i>	22	<i>mimvey</i>	48	<i>mupirocin</i>	29
<i>metoprolol succinate</i>	22	<i>minocycline</i>	6	<i>mupirocin calcium</i>	29
<i>metoprolol ta-hydrochlorothiaz</i>	22	<i>minoxidil</i>	22	<i>mvc-fluoride</i>	60
<i>metoprolol tartrate</i>	22	<i>minzoya</i>	51	<i>my choice</i>	51
<i>metronidazole</i>	5, 28, 48	<i>miostat</i>	53	<i>my way</i>	51
<i>metyrosine</i>	22	<i>mirabegron</i>	58	MYALEPT.....	38
<i>mexiletine</i>	20	MIRENA.....	47	<i>mycophenolate mofetil</i>	9
<i>mibelas 24 fe</i>	50	<i>mirtazapine</i>	19	<i>mycophenolate sodium</i>	9
<i>miconazole-3</i>	48	MISOPROSTOL.....	43	MYFEMBREE.....	48
MICROCHAMBER.....	57	M-M-R II (PF).....	45	MYHIBBIN.....	9
<i>microgestin 1.5/30 (21)</i>	50	<i>m-natal plus</i>	60	MYLERAN.....	9
<i>microgestin 1/20 (21)</i>	50	MNEXSPIKE 2025-2026 (PF)	46	<i>mynatal</i>	60
<i>microgestin fe 1.5/30 (28)</i>	50	<i>modafinil</i>	19	<i>mynatal plus</i>	60
<i>microgestin fe 1/20 (28)</i>	51	MODEYSO.....	9	<i>mynatal-z</i>	60
MICROSPACER.....	57	<i>moexipril</i>	22	MYOBLOC.....	46
<i>midazolam</i>	19	<i>molindone</i>	19	MYQORZO.....	26
<i>midodrine</i>	32	<i>mometasone</i>	32, 56	MYRBETRIQ.....	58
MIEBO (PF).....	53	<i>mondoxyne nl</i>	6	N	
<i>mifepristone</i>	38	<i>mono-lynyah</i>	51	<i>nabumetone</i>	16
				<i>nadolol</i>	22

<i>naloxone</i>	16	<i>nevirapine</i>	3	NITYR.....	32
<i>naltrexone</i>	16	<i>new day</i>	51	<i>niva thyroid</i>	40
NAMZARIC.....	13	<i>newgen</i>	60	NIVESTYM	44
<i>naproxen</i>	16	NEXLETOL	25	<i>nizatidine</i>	43
<i>naproxen sodium</i>	16	NEXLIZET.....	25	<i>nora-be</i>	48
<i>naratriptan</i>	12	NEXPLANON.....	48	<i>norelgestromin-ethin.estradiol</i>	48
NATACYN	52	NGENLA.....	44	<i>norethindrone (contraceptive)</i>	48
<i>nateglinide</i>	39	<i>niacin</i>	25	<i>norethindrone acetate</i>	48
NAYZILAM.....	11	<i>nicardipine</i>	22	<i>norethindrone ac-eth estradiol</i>	48, 51
<i>nebivolol</i>	22	<i>nicorette</i>	33	<i>norethindrone-e.estradiol-iron</i>	51
<i>nebusal</i>	56	NICORETTE.....	33	<i>norgestimate-ethinyl estradiol</i>	51
<i>necon 0.5/35 (28)</i>	51	<i>nicotine</i>	33	<i>nortrel 0.5/35 (28)</i>	51
<i>nefazodone</i>	19	<i>nicotine (polacrilex)</i>	33	<i>nortrel 1/35 (21)</i>	51
NEFFY	55	<i>nifedipine</i>	22	<i>nortrel 1/35 (28)</i>	51
NEMLUVIO.....	9	<i>nikki (28)</i>	51	<i>nortrel 7/7/7 (28)</i>	51
<i>neomycin</i>	5	<i>nilotinib hcl</i>	9	<i>nortriptyline</i>	19
<i>neomycin-bacitracin-poly-hc</i>	54	<i>nilutamide</i>	9	NORVIR	3
<i>neomycin-bacitracin- polymyxin</i>	52	<i>nimodipine</i>	22	NOVOEIGHT.....	24
<i>neomycin-polymyxin b gu</i>	32	NINLARO	9	NOXAFIL.....	2
<i>neomycin-polymyxin b- dexameth</i>	54	<i>nintedanib</i>	56	<i>np thyroid</i>	40
<i>neomycin-polymyxin- gramicidin</i>	52	<i>nisoldipine</i>	22	NUBEQA	9
<i>neomycin-polymyxin-hc</i> ..	34, 54	<i>nitazoxanide</i>	5	NUCALA	56
<i>neo-polycin</i>	52	<i>nitisinone</i>	32	NUEDEXTA.....	13
<i>neo-polycin hc</i>	54	<i>nitro-bid</i>	26	NUVAXOVID 2025-2026 (PF)	46
<i>neo-vital rx</i>	60	<i>nitrofurantoin</i>	7	<i>nylia 1/35 (28)</i>	51
NERLYNX	9	<i>nitrofurantoin macrocrystal</i> ...	7	<i>nylia 7/7/7 (28)</i>	51
<i>neuac</i>	28	<i>nitrofurantoin monohyd/m- cryst</i>	7		
NEUPRO.....	12	<i>nitroglycerin</i>	26, 42		
		<i>nitro-time</i>	26		

<i>nystatin</i>	2, 30	OMNIPOD DASH PODS (GEN 4)	36	OTEZLA XR INITIATION ..	47
<i>nystatin-triamcinolone</i>	30	OMNITROPE.....	44	OTOVEL	34
<i>nystop</i>	30	OMVOH.....	42	OVIDREL.....	38
O		OMVOH PEN	42	<i>oxaprozin</i>	16
<i>ocella</i>	51	<i>ondansetron</i>	42	<i>oxazepam</i>	19
<i>octreotide acetate</i>	9	<i>ondansetron hcl</i>	42	<i>oxcarbazepine</i>	11
ODEFSEY	3	<i>one natal rx</i>	60	OXERVATE.....	53
ODOMZO	9	<i>onelix magnesium citrate</i>	42	<i>oxybutynin chloride</i>	58
<i>ofloxacin</i>	6, 34, 52	<i>opcicon one-step</i>	51	<i>oxycodone</i>	15
OJEMDA.....	9	OPILL.....	48	<i>oxycodone-acetaminophen</i> ...	15
<i>olanzapine</i>	19	OPSUMIT	56	<i>oxymorphone</i>	15
<i>olanzapine-fluoxetine</i>	19	OPSYNVI.....	56	OZEMPIC.....	39
<i>olmesartan</i>	22	OPTICHAMBER DIAMOND VHC.....	57	OZURDEX	54
<i>olmesartan-amlodipin- hcthiazid</i>	22	<i>option-2</i>	51	P	
<i>olmesartan- hydrochlorothiazide</i>	22	<i>oral saline laxative</i>	42	<i>pacerone</i>	20
<i>olopatadine</i>	33	ORIAHNN.....	48	<i>paliperidone</i>	19
<i>omega-3 acid ethyl esters</i>	25	ORLISSA	38	<i>palonosetron</i>	42
<i>omeprazole</i>	43	ORKAMBI	56	PALYNZIQ.....	38
<i>omeprazole-sodium bicarbonate</i>	43, 44	<i>ormalvi</i>	13	PANCREAZE	42
OMNIPOD 5 (G6/LIBRE 2 PLUS).....	36	<i>orphenadrine citrate</i>	13	<i>pantoprazole</i>	44
OMNIPOD 5 G6-G7 INTRO KT(GEN5).....	36	<i>orquidea</i>	48	PARAGARD T 380A	47
OMNIPOD 5 G6-G7 PODS (GEN 5).....	36	ORSERDU	9	<i>paricalcitol</i>	38
OMNIPOD 5 INTRO(G6/LIBRE2PLUS)	36	<i>oscimin</i>	40	<i>paroex oral rinse</i>	33
OMNIPOD DASH INTRO KIT (GEN 4)	36	<i>oscimin sl</i>	40	<i>paroxetine hcl</i>	19
		<i>oseltamivir</i>	3	PAVBLU	53
		OSPHENA.....	48	PAXLOVID	3
		OTEZLA	47	<i>pazopanib</i>	9
		OTEZLA STARTER	47	PEDIARIX (PF)	46
		OTEZLA XR	47	PEDVAX HIB (PF)	46
				<i>peg 3350-electrolytes</i>	42

<i>peg3350-sod sul-nacl-kcl-asb-c</i>	42	<i>phenytoin</i>	11	<i>polymyxin b sulf-trimethoprim</i>	52
PEGASYS	44	<i>phenytoin sodium extended</i> ..	11	<i>pomalidomide</i>	9
<i>peg-electrolyte soln</i>	42	<i>philith</i>	51	<i>portia 28</i>	51
PEMAZYRE	9	<i>phosphate laxative</i>	42	<i>posaconazole</i>	2
PENBRAYA (PF)	46	PHOSPHOLINE IODIDE	52	<i>potassium chloride</i>	59
<i>penicillamine</i>	47	<i>phytonadione (vitamin k1)</i>	24	<i>potassium citrate</i>	58
<i>penicillin v potassium</i>	5	PIFELTRO.....	3	<i>potassium iodide</i>	35
PENMENVY MEN A-B-C-W- Y (PF)	46	<i>pilocarpine hcl</i>	33, 53	<i>povidone-iodine</i>	52
PENTACEL (PF).....	46	<i>pimecrolimus</i>	27	<i>powderlax</i>	42
<i>pentamidine</i>	5	<i>pimozide</i>	19	<i>pr natal 400</i>	60
PENTASA	42	<i>pimtrea (28)</i>	51	<i>pr natal 400 ec</i>	60
<i>pentoxifylline</i>	24	<i>pindolol</i>	22	<i>pr natal 430</i>	60
<i>perampanel</i>	11	<i>pioglitazone</i>	39	<i>pr natal 430 ec</i>	60
<i>perindopril erbumine</i>	22	<i>pioglitazone-glimepiride</i>	39	<i>pramipexole</i>	12
<i>periogard</i>	33	<i>pioglitazone-metformin</i>	39	<i>prasugrel hcl</i>	24
<i>permethrin</i>	32	PIQRAY	9	<i>pravastatin</i>	25
<i>perphenazine</i>	19	<i>pirfenidone</i>	56	<i>praziquantel</i>	5
<i>perphenazine-amitriptyline</i> ..	19	<i>piroxicam</i>	16	<i>prazosin</i>	22
PHEBURANE.....	32	<i>pitavastatin calcium</i>	25	PRECISION XTRA KETONE- GLUCOSE.....	35
<i>phenazopyridine</i>	58	PLEGRIDY	20	PRECISION XTRA MONITOR.....	35
<i>phenelzine</i>	19	<i>plerixafor</i>	44	PRECISION XTRA TEST ...	35
<i>phenobarb-hyoscy-atropine- scop</i>	40	PNEUMOVAX-23.....	46	<i>prednicarbate</i>	32
<i>phenobarbital</i>	11	<i>pnv-dha</i>	60	<i>prednisoln sp-moxiflox- bromfen</i>	53
<i>phenohydro</i>	40	<i>pnv-omega</i>	60	<i>prednisolone</i>	34
<i>phenoxybenzamine</i>	22	<i>pnv-select</i>	60	<i>prednisolone acetate</i>	54
<i>phenylephrine hcl</i>	54	POCKET CHAMBER.....	58	<i>prednisolone sod ph-bromfenac</i>	53
<i>phenyleph-tropicamide in water</i>	53	<i>podofilox</i>	27		
		<i>polycin</i>	52		
		<i>polyethylene glycol 3350</i>	42		

<i>prednisolone sodium phosphate</i>	PRIORIX (PF).....	<i>purevita folic acid</i>
34, 54	46	60
<i>prednisone</i>	<i>probenecid</i>	<i>pyquvi</i>
34	46	35
<i>prednisone intensol</i>	<i>probenecid-colchicine</i>	<i>pyrazinamide</i>
34	46	5
<i>pregabalin</i>	<i>procentra</i>	<i>pyridostigmine bromide</i>
11	19	13
PREGNYL.....	PROCHAMBER.....	<i>pyrimethamine</i>
38	58	5
PREMARIN.....	<i>prochlorperazine</i>	Q
48	42	QUADRACEL (PF).....
<i>prenatabs fa</i>	<i>prochlorperazine maleate</i>	46
60	42	<i>quetiapine</i>
<i>prenatabs rx</i>	PROCRIT.....	19
60	44	<i>quinapril</i>
<i>prenatal</i>	<i>procto-med hc</i>	22
60	42	<i>quinapril-hydrochlorothiazide</i>
<i>prenatal complete</i>	<i>proctosol hc</i>	22
60	42	<i>quinidine gluconate</i>
<i>prenatal multi-dha (algal oil)</i>	<i>proctozone-hc</i>	20
60	42	<i>quinidine sulfate</i>
<i>prenatal multivitamins</i>	<i>progesterone micronized</i>	20
60	48	<i>quinine sulfate</i>
<i>prenatal one daily</i>	PROGRAF.....	5
60	9	QULIPTA.....
<i>prenatal plus</i>	PROLASTIN-C.....	12
60	32	QVAR REDIHALER.....
<i>prenatal plus (calcium carb)</i> 60	<i>prolate</i>	56
<i>prenatal vit no.179-iron-folic</i> 60	PROLEUKIN.....	R
<i>prenatal vitamin</i>	44	RABAVERT (PF).....
60	<i>promethazine</i>	46
<i>prenatal vitamin with minerals</i>	55	<i>rabeprazole</i>
60	<i>promethazine-codeine</i>	44
<i>prenatal-u</i>	<i>promethazine-dm</i>	RADICAVA ORS STARTER KIT SUSP.....
60	55	13
PRETOMANID.....	<i>promethazine-phenylephrine</i> 55	<i>raloxifene</i>
5	<i>promethegan</i>	46
<i>prevalite</i>	55	<i>ramelteon</i>
25	<i>propafenone</i>	19
PREVNAR 20 (PF).....	20	<i>ramipril</i>
46	<i>propranolol</i>	22, 23
PREVYMIS.....	22	<i>ranitidine hcl</i>
3	<i>propylthiouracil</i>	44
PREZISTA.....	35	<i>ranolazine</i>
3	PROQUAD (PF).....	26
PRIFTIN.....	46	<i>rasagiline</i>
5	<i>prucalopride</i>	12
<i>primaquine</i>	42	REBIF (WITH ALBUMIN) .20
5	<i>pulmosal</i>	20
PRIMEAIRE.....	56	REBIF REBIDOSE.....
58	PULMOZYME.....	20
<i>primidone</i>	56	REBIF TITRATION PACK..20
11	<i>purelax</i>	20
	42	<i>reclipsen (28)</i>
		51

RECOMBIVAX HB (PF).....	46	RITEFLO AEROCHAMBER	58	<i>scopolamine base</i>	42
RELENZA DISKHALER	3	<i>ritonavir</i>	3	SELARSDI.....	26
<i>relgaabi</i>	11	<i>rivaroxaban</i>	24	<i>selegiline hcl</i>	12
RELISTOR.....	42	<i>rivastigmine</i>	13	<i>selenium sulfide</i>	26
RENACIDIN.....	58	<i>rivastigmine tartrate</i>	13	SELZENTRY	3
<i>rena-vite</i>	60	<i>rivelsa</i>	51	SEMGLEE(INSULIN	
<i>renthyroid</i>	40	<i>rizatriptan</i>	12	GLARGINE-YFGN).....	37
<i>repaglinide</i>	39	<i>roflumilast</i>	56	SEMGLEE(INSULIN	
REPATHA PUSHTRONEX .25		<i>ropinirole</i>	12	GLARG-YFGN)PEN	37
REPATHA SURECLICK	25	<i>rosadan</i>	28	<i>se-natal 19</i>	60
REPATHA SYRINGE	25	<i>rosuvastatin</i>	25	<i>se-natal 19 chewable</i>	60
RESTASIS MULTIDOSE	53	<i>rosyrah</i>	51	SEROSTIM	44
RETACRIT.....	44	ROTARIX.....	46	<i>sertraline</i>	19
REVUFORJ.....	9	ROTATEQ VACCINE.....	46	<i>setlakin</i>	51
REXTOVY	16	<i>roweepra</i>	11	<i>sevelamer carbonate</i>	59
REXULTI	19	ROZLYTREK.....	9	<i>sevelamer hcl</i>	59
REYATAZ	3	<i>rufinamide</i>	11	SEVENFACT	24
REZDIFFRA.....	33	RYBELSUS.....	39	<i>sf 33</i>	
RHAPSIDO.....	33	RYDAPT	9	<i>sf 5000 plus</i>	33
<i>ribavirin</i>	3	S		<i>sharobel</i>	48
RIDAURA.....	47	<i>sacubitril-valsartan</i>	26	<i>shewise</i>	51
<i>rifabutin</i>	5	<i>sajazir</i>	56	SHINGRIX (PF).....	46
<i>rifampin</i>	5	<i>salsalate</i>	16	SIGNIFOR.....	9
<i>rilpivirine hcl</i>	3	SANTYL	32	<i>sildenafil</i>	58
<i>riluzole</i>	33	<i>sapropterin</i>	38	<i>sildenafil (pulm.hypertension)</i>	
<i>rimantadine</i>	3	<i>saxagliptin</i>	39	.....	56
RINVOQ	47	<i>saxagliptin-metformin</i>	39	<i>silodosin</i>	58
RINVOQ LQ.....	47	<i>scalacort</i>	32	<i>silver sulfadiazine</i>	27
<i>risedronate</i>	33, 46	SCEMBLIX.....	9	SIMLANDI(CF).....	47
<i>risperidone</i>	19			SIMLANDI(CF)	
				AUTOINJECTOR	47

<i>simliya (28)</i>	51	SOTYLIZE.....	20	SUCRAID.....	43
<i>simpesse</i>	51	SPACE CHAMBER.....	58	<i>sucralfate</i>	44
SIMPONI.....	47	SPIKEVAX 2025-2026(12Y UP)(PF).....	46	SULCONAZOLE.....	30
<i>simvastatin</i>	26	SPIKEVAX 2025-26 (6M- 11Y) (PF).....	46	<i>sulfacetamide sodium</i>	27, 54
<i>sirolimus</i>	9	<i>spinosad</i>	32	<i>sulfacetamide sodium (acne)</i>	30
SIRTURO.....	5	SPIRIVA RESPIMAT.....	56	<i>sulfacetamide sodium-sulfur</i>	29
SKYLA.....	47	<i>spironolactone</i>	23	<i>sulfacetamide-prednisolone</i>	54
SKYRIZI.....	27, 43	<i>spironolacton-hydrochlorothiaz</i>	23	<i>sulfacleanse 8-4</i>	29
<i>smoothlax</i>	43	SPRAVATO.....	19	<i>sulfadiazine</i>	6
<i>sodium chloride</i>	33, 56	<i>sprintec (28)</i>	51	<i>sulfamethoxazole-trimethoprim</i>	6
<i>sodium chloride 0.9 %</i>	33	<i>sps (with sorbitol)</i>	59	SULFAMYLON.....	30
<i>sodium citrate-citric acid</i>	58	<i>ssd</i>	27	<i>sulfasalazine</i>	43
<i>sodium fluoride 5000 plus</i>	33	<i>sss 10-5</i>	28	<i>sulfatrim</i>	6
<i>sodium fluoride-pot nitrate</i>	33	<i>st joseph aspirin</i>	16	<i>sulindac</i>	16
<i>sodium oxybate</i>	19	<i>st. joseph aspirin</i>	16	<i>sumatriptan</i>	12
<i>sodium phenylbutyrate</i>	33	STAMARIL (PF).....	46	<i>sumatriptan succinate</i>	12
<i>sodium polystyrene sulfonate</i>	59	STIOLTO RESPIMAT.....	56	<i>sunitinib malate</i>	9
<i>sodium,potassium,mag sulfates</i>	43	STIVARGA.....	9	SUNOSI.....	19
<i>solifenacin</i>	58	<i>stop smoking aid</i>	33	<i>super b-50 complex</i>	60
SOLQUA 100/33.....	37	STRENSIQ.....	38	<i>super quints</i>	60
SOLOSEC.....	5	<i>stress formula with iron(sulf)</i>	60	SUPPRELIN LA.....	9
SOLU-CORTEF.....	35	STRIVERDI RESPIMAT.....	57	<i>syeda</i>	51
<i>soluvita a,c,d with fluoride</i>	60	<i>strong iodine</i>	29, 59	<i>symax fastabs</i>	40
SOMATULINE DEPOT.....	9	SUBLOCADE.....	15	<i>symax-sl</i>	40
SOMAVERT.....	38	<i>subvenite</i>	11	<i>symax-sr</i>	41
<i>sorafenib</i>	9	<i>subvenite starter (blue) kit</i>	11	SYMDEKO.....	57
<i>sotalol</i>	20	<i>subvenite starter (green) kit</i>	11	SYMPROIC.....	43
<i>sotalol af</i>	20	<i>subvenite starter (orange) kit</i>	11	SYMTUZA.....	3
SOTYKTU.....	27			SYNAREL.....	38

<i>tramadol</i>	16	<i>trifluridine</i>	52	TRUE METRIX LEVEL 1 ...	36
<i>tramadol-acetaminophen</i>	16	<i>trihexyphenidyl</i>	12	TRULANCE	43
<i>trandolapril</i>	23	TRIJARDY XR	40	TRULICITY	40
<i>trandolapril-verapamil</i>	23	TRIKAFTA	57	TRUMENBA	46
<i>tranexamic acid</i>	48	<i>tri-legest fe</i>	51	TRUQAP	10
<i>tranylcypromine</i>	19	<i>tri-linyah</i>	51	TRUSTEX-RIA NON-LUB CONDOMS	47
<i>trazodone</i>	20	<i>tri-lo-estarylla</i>	51	<i>tulana</i>	48
TRELEGY ELLIPTA	57	<i>tri-lo-marzia</i>	51	<i>turqoz (28)</i>	51
TREMFYA	27	<i>tri-lo-mili</i>	51	TWIIST STARTER KIT	36
TREMFYA ONE-PRESS	27	<i>tri-lo-sprintec</i>	51	TWINRIX (PF)	46
TREMFYA PEN	27	<i>trimethobenzamide</i>	43	<i>tydemy</i>	51
TREMFYA PEN INDUCTION PK(2PEN)	27	<i>trimethoprim</i>	7	TYENNE	47
TRESIBA FLEXTOUCH U- 100	38	<i>tri-mili</i>	51	TYENNE AUTOINJECTOR	47
TRESIBA FLEXTOUCH U- 200	38	<i>trimipramine</i>	20	TYMLOS	47
TRESIBA U-100 INSULIN .	38	<i>trinatal rx 1</i>	61	TYPHIM VI	46
<i>tretinoin</i>	29	<i>trinate</i>	61	TYVASO	57
<i>tretinoin (antineoplastic)</i>	10	TRIPTODUR	10	TYVASO DPI	57
<i>tretinoin microspheres</i>	29	<i>tri-sprintec (28)</i>	51	TYVASO REFILL KIT	57
TRETTEN	24	TRIUMEQ	3	TYVASO STARTER KIT	57
<i>triamcinolone acetonide</i> .	32, 34	TRIUMEQ PD	3	U	
<i>triamterene-hydrochlorothiazid</i>	23	<i>tri-vitamin with fluoride</i>	61	<i>unithroid</i>	40
<i>triazolam</i>	20	<i>tri-vylibra</i>	51	UPTRAVI	23
<i>tricon</i>	60	<i>tri-vylibra lo</i>	51	<i>uretron d-s</i>	58
<i>triderm</i>	32	<i>tropicamide</i>	53	<i>urimar-t</i>	58
<i>trientine</i>	33	<i>trosipium</i>	58	<i>urogesic-blue</i>	58
<i>tri-estarylla</i>	51	TRUE METRIX AIR GLUCOSE METER	36	<i>uro-mp</i>	58
<i>trifluoperazine</i>	20	TRUE METRIX GLUCOSE METER	36	<i>uro-sp</i>	58
		TRUE METRIX GO GLUCOSE METER	36	<i>ursodiol</i>	43
				<i>uryl</i>	58

USTEKINUMAB-TTWE	27	VEMLIDY	3	VIVOTIF	46
V		VENCLEXTA	10	VIZIMPRO	10
<i>valacyclovir</i>	3	VENCLEXTA STARTING PACK	10	<i>volnea (28)</i>	51
VALCHLOR	27	<i>venlafaxine</i>	20	VONJO	10
<i>valganciclovir</i>	3	<i>venxxiva</i>	33	VONVENDI	24
<i>valproic acid</i>	12	<i>verapamil</i>	23	<i>voriconazole</i>	2
<i>valproic acid (as sodium salt)</i>	12	VERQUVO	26	VORTEX HOLDING CHAMBER	58
<i>valsartan</i>	23	VERZENIO	10	VOSEVI	3
<i>valsartan-hydrochlorothiazide</i>	23	<i>vestura (28)</i>	51	VOYDEYA	33
VALTOCO	12	V-GO 20	36	VOYXACT	10
<i>valtya</i>	51	V-GO 30	36	VTAMA	27
<i>vancomycin</i>	7	V-GO 40	36	VUMERITY	20
<i>vandazole</i>	48	VIBERZI	43	<i>vyfemla (28)</i>	52
VANRAFIA	26	<i>vienna</i>	51	<i>vylibra</i>	52
VAQTA (PF)	46	<i>vigabatrin</i>	12	VYNDAMAX	26
<i>varenicline tartrate</i>	33	<i>vigadrone</i>	12	VYNDAQEL	26
VARIVAX (PF)	46	VIJOICE	10	W	
VARIZIG	46	<i>vilazodone</i>	20	<i>wal-zyr (ketotifen)</i>	53
VARUBI	43	VIMKUNYA	46	<i>warfarin</i>	24
VAXCHORA VACCINE	46	VIOKACE	43	<i>water for irrigation, sterile</i> ...	33
VAXELIS (PF)	46	<i>viorele (28)</i>	51	<i>wera (28)</i>	52
VAXNEUVANCE (PF)	46	VIRACEPT	3	<i>wescap-pn dha</i>	61
VCF CONTRACEPTIVE FILM	49	VIREAD	3	<i>wesnate dha</i>	61
VCF CONTRACEPTIVE GEL	49	VISTOGARD	7	<i>westab plus</i>	61
<i>velivet triphasic regimen (28)</i>	51	<i>vitamin d3</i>	61	<i>westgel dha</i>	61
VELSIPITY	43	<i>vitamin k</i>	24	WILATE	24
VELTASSA	59	<i>vitamin k1</i>	24	WINREVAIR	57
		VITRAKVI	10	<i>wintergreen oil</i>	27
		VIVITROL	16	<i>wixela inhub</i>	57

<i>women's gentle laxative(bisac)</i>	43	XYOSTED	38	ZEPOSIA.....	13
<i>wymzya fe</i>	52	<i>xyvona</i>	15	ZEPOSIA STARTER KIT (28- DAY)	13
X		XYWAV	20	ZEPOSIA STARTER PACK (7-DAY).....	13
XACIATO	49	Y		ZERVIATE	53
XALKORI.....	10	YESINTEK	27	<i>zidovudine</i>	3
<i>xarah fe</i>	52	YEZTUGO	3	ZIEXTENZO	44
XARELTO.....	24	YF-VAX (PF)	46	<i>zingiber</i>	61
XARELTO DVT-PE TREAT 30D START	24	YONSA	10	<i>ziprasidone hcl</i>	20
XDEMVY	53	<i>yulithira</i>	10	ZOLINZA.....	10
XELJANZ	47	YUPELRI.....	57	<i>zolmitriptan</i>	12
XELJANZ XR.....	47	YUTREPIA	57	<i>zolpidem</i>	20
<i>xelria fe</i>	52	<i>yuvafem</i>	48	ZOMIG	12
XEMBIFY	46	Z		<i>zonisamide</i>	12
XERMELO.....	10	ZADITOR	53	ZORYVE	27
XHANCE	57	<i>zafemy</i>	49	<i>zovia 1-35 (28)</i>	52
XIFAXAN	5	<i>zafirlukast</i>	57	ZTALMY	12
XIIDRA.....	53	<i>zaleplon</i>	20	ZTLIDO.....	29
XOLAIR.....	57	<i>zarah</i>	52	ZUBSOLV	16
XOSPATA.....	10	<i>zatean-pn dha</i>	61	<i>zumandimine (28)</i>	52
XTANDI.....	10	<i>zatean-pn plus</i>	61	ZURZUVAE	20
<i>xulane</i>	49	ZELBORAF	10	ZYDELIG.....	10
XULTOPHY 100/3.6.....	38	<i>zelvysia</i>	38	ZYKADIA.....	10
XURIDEN.....	33	<i>zenatane</i>	29	ZYMFENTRA.....	43
XYNTHA	24	ZENPEP	43		
XYNTHA SOLOFUSE.....	24	<i>zenzedi</i>	20		
		ZEPATIER	3		