

2019

Formulary/ Formulario

(List of Covered Drugs) / (Lista de medicinas cubiertas)

California

MolinaMarketplace.com



Your Extended Family.

09162019

Welcome to Molina Healthcare!

Molina Healthcare Drug Formulary (List of Drugs)

Molina Healthcare has a list of drugs that it will cover. The list is called the Drug Formulary. The drugs on the list are chosen by a group of doctors and pharmacists from Molina Healthcare and the medical community. The group meets every three months to talk about the drugs that are in the formulary. They review new drugs and changes in health care. They try to find the most effective drugs for different conditions. Drugs are added or removed from the Drug Formulary for different reasons. This could be:

- Changes in medical practice
- Medical technology
- When new FDA-approved drugs come on the market.
- When drugs are removed from the market by the FDA
- When a drug is identified with a new safety issue

You can look at Our Drug Formulary on Our Molina Healthcare website. The address is www.MolinaMarketplace.com. You may call Molina Healthcare and ask about a drug, including whether a prescription may be obtained at a retail pharmacy.. Call toll free 1 (888) 858-2150, Monday through Friday and choose the pharmacy option, 8:00 a.m. through 6:00 p.m. If You are deaf or hard of hearing, dial 711 for the Telecommunications Service.

You can also ask Us to mail You a copy of the Drug Formulary. A drug listed on the Drug Formulary does not guarantee that Your doctor will prescribe it for You.

Access to Nonformulary Drugs

Molina has a process to allow You to request clinically appropriate drugs that are not on the formulary under Your product. Your doctor may order a drug that is not in the Drug Formulary that he or she believes is best for You. Your doctor may contact Molina's Pharmacy Department to request that Molina cover the drug for You. If the request is approved, Molina will contact Your doctor. If the request is denied, Molina Healthcare will send a letter to You and Your doctor. The letter will explain why the drug was denied.

If You disagree with the denial of a "non-formulary drug" and/or step therapy exception request You can file a grievance requesting an external exception review. Please refer to section titled "Complaints and Appeals" for information on how to file a grievance.

You may be taking a drug that is no longer on Our Drug Formulary. Your doctor can ask Us to keep covering it by sending Us a Prior Authorization request for the drug. The drug must be safe and effective for Your medical condition. Your doctor must write Your prescription for the usual amount of the drug for You. Molina may cover specific non-Drug Formulary drugs under the following conditions:

- Document in Your medical record;
- Certify that the Drug Formulary alternatives have not been effective in Your treatment; or
- The Drug Formulary alternatives cause or are reasonably expected by the prescriber to cause a harmful or adverse reaction in the Member.

There are two types of requests for clinically appropriate drugs that are not covered under Your product:

- Exception Request for urgent circumstances that may seriously jeopardize life, health, or ability to regain maximum function, or for undergoing current treatment using NonFormulary drugs.
- Standard Exception Request.

You and/or Your Participating Provider will be notified of Our decision no later than:

- 24 hours following receipt of request for Expedited Exception Request
- 72 hours following receipt of request for Standard Exception Request

If initial request is denied for a non-formulary drug” and/or step therapy exception, You can file a grievance requesting an external exception review. Please refer to section titled “Complaints and Appeals” for information on how to file a grievance.

Also, You and/or Your Participating Provider may request an Independent Review Organization (IRO) review. You and or Your Participating Provider will be notified of the IRO’s decision no later than:

- 24 hours following receipt of request for Expedited Exception Request
- 72 hours following receipt of request for Standard Exception Request

If You disagree with the denial of a “non-formulary drug” and/or step therapy exception request You, Your representative, or Your provider can file a grievance requesting an external exception review. Information as to how to request a review will also be included in the enrollee’s notice of denial. Please refer to section titled “Complaints and Appeals” for information on how to file a grievance. The external exception review process is in addition to the right of the member to file a grievance or request independent medical review. Molina will respond to the external review request within:

- 24 hours following receipt of request for Exigent
- 72 hours following receipt of request for non-urgent

Your Extended Family

Molina Healthcare (Molina) complies with all Federal civil rights laws that relate to healthcare services. Molina offers healthcare services to all members and does not discriminate based on race, color, national origin, age, disability, or sex.

Molina also complies with applicable state laws and does not discriminate on the basis of creed, gender, gender expression or identity, sexual orientation, marital status, religion, honorably discharged veteran or military status, or the use of a trained dog guide or service animal by a person with a disability.

To help you talk with us, Molina provides services free of charge:

- Aids and services to people with disabilities
 - Skilled sign language interpreters
 - Written material in other formats (large print, audio, accessible electronic formats, Braille)
- Language services to people who speak another language or have limited English skills
 - Skilled interpreters
 - Written material translated in your language

If you need these services, contact Molina Member Services. The number is on the back of your Member ID card (TTY: 711).

If you think that Molina failed to provide these services or discriminated based on your race, color, national origin, age, disability, or sex, you can file a complaint. You can file a complaint in person, by mail, fax, or email. If you need help writing your complaint, we will help you. Call our Civil Rights Coordinator at (866) 606-3889, or TTY: 711.

Mail your complaint to: Civil Rights Coordinator, 200 Oceangate, Long Beach, CA 90802

You can also email your complaint to civil.rights@molinahealthcare.com. Or, fax your complaint.

FAX Numbers for Molina Civil Rights Coordinator									
CA	(844) 479-5337	MI	(248) 925-1799	OH	(866) 713-1891	UT	(866) 472-0589	WI	(888) 560-2043
FL	(877) 508-5748	NM	(505) 342-0583	TX	(877) 816-6416	WA	(800) 816-3778		

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights. Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>. You can mail it to: U.S. Department of Health and Human Services, 200 Independence Avenue, SW, Room 509F, HHH Building, Washington, D.C. 20201

You can also send it to a website through the Office for Civil Rights Complaint Portal at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>.

If you need help, call (800) 368-1019; TTY (800) 537-7697.

You have the right to get this information in a different format, such as audio, Braille, or large font due to special needs or in your language at no additional cost.

Usted tiene derecho a recibir esta información en un formato distinto, como audio, braille, o letra grande, debido a necesidades especiales; o en su idioma sin costo adicional.

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call Member Services. The number is on the back of your Member ID card. (English)

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame a Servicios para Miembros. El número de teléfono está al reverso de su tarjeta de identificación del miembro. (Spanish)

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電會員服務。電話號碼載於您的會員證背面。(Chinese)

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Hãy gọi Dịch vụ Thành viên. Số điện thoại có trên mặt sau thẻ ID Thành viên của bạn. (Vietnamese)

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa Mga Serbisyo sa Miyembro. Makikita ang numero sa likod ng iyong ID card ng Miyembro. (Tagalog)

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 회원 서비스로 전화하십시오. 전화번호는 회원 ID 카드 뒷면에 있습니다. (Korean)

تنبيه: إذا كنت تستخدم اللغة العربية، تتاح خدمات المساعدة اللغوية، مجاناً، لك. اتصل بقسم خدمات الأعضاء. ورقم الهاتف هذا موجود خلف بطاقة تعريف العضو الخاصة بك. (Arabic)

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele Sèvis Manm. W ap jwenn nimewo a sou do kat idantifikasyon manm ou a. (French Creole)

ВНИМАНИЕ: Если вы говорите на русском языке, вы можете бесплатно воспользоваться услугами переводчика. Позвоните в Отдел обслуживания участников. Номер телефона указан на обратной стороне вашей ID-карты участника. (Russian)

ՈՒՇԱԴՐՈՒԹՅՈՒՆ. Եթե դուք խոսում եք հայերեն, կարող եք անվճար օգտվել լեզվի օժանդակ ծառայություններից: Ձանգահարե՛ք Հաճախորդների սպասարկման բաժին: Հեռախոսի համարը նշված է ձեր Անդամակցության նույնականացման քարտի ետևի մասում: (Armenian)

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。

会員サービスまでお電話ください。電話番号は会員IDカードの裏面に記載されております。(Japanese)

توجه؛ اگر به زبان فارسی صحبت می‌کنید، خدمات کمک زبانی، بدون هزینه در دسترس شما هستند. با خدمات اعضا تماس بگیرید. شماره تلفن روی پشت کارت شناسایی عضویت شما درج شده است. (Farsi)

ਧਿਆਨ ਦਿਓ: ਜੇਕਰ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਤੁਹਾਡੇ ਲਈ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ ਮੁਫਤ ਉਪਲਬਧ ਹਨ। ਮੈਂਬਰ ਸਰਵਿਸਜ

(Member Services) ਨੂੰ ਫੋਨ ਕਰੋ। ਨੰਬਰ ਤੁਹਾਡੇ Member ID (ਮੈਂਬਰ ਆਈ.ਡੀ.) ਕਾਰਡ ਦੇ ਪਿਛਲੇ ਪਾਸੇ ਹੈ। (Punjabi)

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Wenden Sie sich telefonisch an die Mitgliederbetreuungen. Die Nummer finden Sie auf der Rückseite Ihrer Mitgliedskarte. (German)

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez les Services aux membres. Le numéro figure au dos de votre carte de membre. (French)

LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Cov npawb xov tooj nyob tom qab ntawm koj daim npav tswv cuab. (Hmong)

Drug Name	Drug Tier	Requirements/Limits
<i>dextroamphetamine sulfate cap er 24hr 5 mg</i>	Tier 2	QL (300 caps / 30 days), PA; AGE; Covered for ages 18 and under
<i>dextroamphetamine sulfate cap er 24hr 10 mg</i>	Tier 2	QL (180 caps / 30 days), PA; AGE; Covered for ages 18 and under
<i>dextroamphetamine sulfate cap er 24hr 15 mg</i>	Tier 2	QL (120 caps / 30 days), PA; AGE; Covered for ages 18 and under
<i>dextroamphetamine sulfate tab 5 mg</i>	Tier 1	QL (180 tabs / 30 days); AGE; Covered for ages 3-18
<i>dextroamphetamine sulfate tab 10 mg</i>	Tier 1	QL (180 tabs / 30 days); AGE; Covered for ages 3-18
<i>methamphetamine hcl tab 5 mg</i>	Tier 2	PA; Covered for ages 18 and under
VYVANSE CAP 10MG	Tier 3	QL (30 caps / 30 days), PA; AGE; Covered for ages 6-18
VYVANSE CAP 20MG	Tier 3	QL (30 caps / 30 days), PA; AGE; Covered for ages 6-18
VYVANSE CAP 30MG	Tier 3	QL (30 caps / 30 days), PA; AGE; Covered for ages 6-18
VYVANSE CAP 40MG	Tier 3	QL (30 caps / 30 days), PA; AGE; Covered for ages 6-18
VYVANSE CAP 50MG	Tier 3	QL (30 caps / 30 days), PA; AGE; Covered for ages 6-18
VYVANSE CAP 60MG	Tier 3	QL (30 caps / 30 days), PA; AGE; Covered for ages 6-18
VYVANSE CAP 70MG	Tier 3	QL (30 caps / 30 days), PA; AGE; Covered for ages 6-18

PA - Prior Authorization **ST** - Step Therapy **AGE** - Age Limit
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MED - Max 90 mg Morphine EQ Dose Per Day
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Drug Name	Drug Tier	Requirements/Limits
<i>zenzedi tab 5mg</i>	Tier 1	QL (180 tabs / 30 days); AGE; Covered for ages 3-18
<i>zenzedi tab 10mg</i>	Tier 1	QL (180 tabs / 30 days); AGE; Covered for ages 3-18
<i>Attention-Deficit/Hyperactivity Disorder (ADHD) Agents</i>		
<i>atomoxetine hcl cap 10 mg (base equiv)</i>	Tier 2	QL (30 caps / 30 days); AGE; MAIL; Covered for ages 6-18
<i>atomoxetine hcl cap 18 mg (base equiv)</i>	Tier 2	QL (30 caps / 30 days); AGE; MAIL; Covered for ages 6-18
<i>atomoxetine hcl cap 25 mg (base equiv)</i>	Tier 2	QL (30 caps / 30 days); AGE; MAIL; Covered for ages 6-18
<i>atomoxetine hcl cap 40 mg (base equiv)</i>	Tier 2	QL (30 caps / 30 days); AGE; MAIL; Covered for ages 6-18
<i>atomoxetine hcl cap 60 mg (base equiv)</i>	Tier 2	QL (30 caps / 30 days); AGE; MAIL; Covered for ages 6-18
<i>atomoxetine hcl cap 80 mg (base equiv)</i>	Tier 2	QL (30 caps / 30 days); AGE; MAIL; Covered for ages 6-18
<i>atomoxetine hcl cap 100 mg (base equiv)</i>	Tier 2	QL (30 caps / 30 days); AGE; MAIL; Covered for ages 6-18
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i>	Tier 1	PA; MAIL
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i>	Tier 1	PA; MAIL
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	Tier 1	PA; MAIL
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	Tier 1	PA; MAIL
<i>Miscellaneous</i>		
<i>caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)</i>	Tier 1	QL (120 ml in lifetime); AGE; Covered for ages 1 and over

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Drug Name	Drug Tier	Requirements/Limits
Stimulants - Misc.		
<i>armodafinil tab 50 mg</i>	Tier 1	PA; AGE; Covered for ages 64 and under
<i>armodafinil tab 150 mg</i>	Tier 1	PA; AGE; Covered for ages 64 and under
<i>armodafinil tab 200 mg</i>	Tier 1	PA
<i>armodafinil tab 250 mg</i>	Tier 1	PA; AGE; Covered for ages 64 and under
<i>dexmethylphenidate hcl tab 2.5 mg</i>	Tier 1	QL (60 tabs / 30 days); AGE; Covered for ages 18 and under
<i>dexmethylphenidate hcl tab 5 mg</i>	Tier 1	QL (60 tabs / 30 days); AGE; Covered for ages 18 and under
<i>dexmethylphenidate hcl tab 10 mg</i>	Tier 1	QL (60 tabs / 30 days); AGE; Covered for ages 18 and under
<i>metadate tab 20mg er</i>	Tier 2	QL (90 tabs / 30 days); AGE; Covered for ages 6-18
<i>methylphenidate hcl cap er 10 mg (cd)</i>	Tier 2	QL (30 caps / 30 days); AGE; Covered for ages 6-18
<i>methylphenidate hcl cap er 20 mg (cd)</i>	Tier 2	QL (30 caps / 30 days); AGE; Covered for ages 6-18
<i>methylphenidate hcl cap er 24hr 10 mg (la)</i>	Tier 2	QL (30 caps / 30 days), PA; AGE; Covered for ages 6-18
<i>methylphenidate hcl cap er 24hr 20 mg (la)</i>	Tier 2	QL (30 caps / 30 days); AGE; Covered for ages 6-18
<i>methylphenidate hcl cap er 24hr 30 mg (la)</i>	Tier 2	QL (30 caps / 30 days); AGE; Covered for ages 6-18
<i>methylphenidate hcl cap er 24hr 40 mg (la)</i>	Tier 2	QL (30 caps / 30 days); AGE; Covered for ages 6-18
<i>methylphenidate hcl cap er 30 mg (cd)</i>	Tier 2	QL (30 caps / 30 days); AGE; Covered for ages 6-18

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Drug Name	Drug Tier	Requirements/Limits
<i>methylphenidate hcl cap er 40 mg (cd)</i>	Tier 2	QL (30 caps / 30 days); AGE; Covered for ages 6-18
<i>methylphenidate hcl cap er 50 mg (cd)</i>	Tier 2	QL (30 caps / 30 days); AGE; Covered for ages 6-18
<i>methylphenidate hcl cap er 60 mg (cd)</i>	Tier 2	QL (30 caps / 30 days); AGE; Covered for ages 6-18
<i>methylphenidate hcl soln 5 mg/5ml</i>	Tier 2	QL (450 mL / 30 days); AGE; Covered for ages 6-18
<i>methylphenidate hcl soln 10 mg/5ml</i>	Tier 2	QL (900 mL / 30 days); AGE; Covered for ages 6-18
<i>methylphenidate hcl tab 5 mg</i>	Tier 1	QL (90 tabs / 30 days); AGE; Covered for ages 6-18
<i>methylphenidate hcl tab 10 mg</i>	Tier 1	QL (90 tabs / 30 days); AGE; Covered for ages 6-18
<i>methylphenidate hcl tab 20 mg</i>	Tier 1	QL (90 tabs / 30 days); AGE; Covered for ages 6-18
<i>methylphenidate hcl tab er 10 mg</i>	Tier 2	QL (30 tabs / 30 days); AGE; Covered for ages 6-18
<i>methylphenidate hcl tab er 20 mg</i>	Tier 2	QL (90 tabs / 30 days); AGE; Covered for ages 6-18
<i>methylphenidate hcl tab er 24hr 36 mg</i>	Tier 2	QL (60 tabs / 30 days); AGE; Covered for ages 6-18
<i>methylphenidate hcl tab er osmotic release (osm) 18 mg</i>	Tier 2	QL (30 tabs / 30 days); AGE; Covered for ages 6-18
<i>methylphenidate hcl tab er osmotic release (osm) 27 mg</i>	Tier 2	QL (30 tabs / 30 days); AGE; Covered for ages 6-18

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Drug Name	Drug Tier	Requirements/Limits
<i>methylphenidate hcl tab er osmotic release (osm) 36 mg</i>	Tier 2	QL (60 tabs / 30 days); AGE; Covered for ages 6-18
<i>methylphenidate hcl tab er osmotic release (osm) 54 mg</i>	Tier 2	QL (30 tabs / 30 days); AGE; Covered for ages 6-18
<i>modafinil tab 100 mg</i>	Tier 2	QL (30 tabs / 30 days), PA; AGE; Covered for ages 6-64
<i>modafinil tab 200 mg</i>	Tier 2	QL (60 tabs / 30 days), PA
RITALIN LA CAP 10MG	Tier 2	QL (30 caps / 30 days), PA; AGE; Covered for ages 6-18

ALTERNATIVE MEDICINES**Alternative Medicine - M's**

<i>melatonin cap 3 mg</i>	Tier 1	OTC, QL (60 caps / 30 days); MAIL
<i>melatonin cap 5 mg</i>	Tier 1	OTC, QL (60 caps / 30 days); MAIL
MELATONIN LIQ 1MG/4ML	Tier 1	OTC, QL (600 mL / 30 days); MAIL
<i>melatonin tab 1 mg</i>	Tier 1	OTC, QL (30 tabs / 25 days); MAIL
<i>melatonin tab 3 mg</i>	Tier 1	OTC, QL (30 tabs / 25 days); MAIL
<i>melatonin tab 5 mg</i>	Tier 1	OTC, QL (30 tabs / 25 days); MAIL
<i>melatonin tab 5mg</i>	Tier 1	OTC, QL (30 tabs / 25 days); MAIL
<i>melatonin tab 300 mcg</i>	Tier 1	OTC, QL (30 tabs / 25 days); MAIL
<i>melatonin tab er 10 mg</i>	Tier 1	OTC; MAIL
<i>melatonin tab max st</i>	Tier 1	OTC, QL (30 tabs / 25 days); MAIL
<i>melatonin tablet disintegrating 5 mg</i>	Tier 1	OTC; MAIL
<i>pa melatonin tab 5mg</i>	Tier 1	OTC, QL (30 tabs / 25 days); MAIL
<i>ra melatonin tab 5mg</i>	Tier 1	OTC, QL (30 tabs / 25 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
Alternative Medicine Combinations		
<i>melatin tab 3-1mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>melatonin tab vit b-6</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>melatonin tr tab /vit-b6</i>	Tier 1	OTC; MAIL
<i>melatonin-pyridoxine tab 3-2 mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>ra melatonin tab 3mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL

AMINOGLYCOSIDES**Aminoglycosides**

<i>amikacin sulfate inj 1 gm/4ml (250 mg/ml)</i>	Tier 1	
<i>neomycin sulfate tab 500 mg</i>	Tier 1	QL (720 tabs / 30 days)
<i>paromomycin sulfate cap 250 mg</i>	Tier 2	
<i>streptomycin sulfate for inj 1 gm</i>	Tier 1	
<i>tobramycin nebu soln 300 mg/5ml</i>	Tier 3	PA

ANALGESICS - ANTI-INFLAMMATORY**Anti-TNF-alpha - Monoclonal Antibodies**

HUMIRA INJ 10/0.1ML	Tier 4	QL (2.16 injections / 30 days), PA; Preferred Brand
HUMIRA INJ 10MG/0.2	Tier 4	QL (2.16 injections / 30 days), PA; Preferred Brand
HUMIRA INJ 20/0.2ML	Tier 4	QL (2.16 injections / 30 days), PA; Preferred Brand
HUMIRA INJ 40/0.4ML	Tier 4	QL (2.16 injections / 30 days), PA; Preferred Brand
HUMIRA KIT 20MG/0.4	Tier 4	QL (2.16 injections / 30 days), PA; Preferred Brand
HUMIRA KIT 40MG/0.8	Tier 4	QL (2.16 injections / 30 days), PA; Preferred Brand
HUMIRA PEDIA INJ CROHNS	Tier 4	QL (2.16 injections / 30 days), PA; Preferred Brand

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Drug Name	Drug Tier	Requirements/Limits
HUMIRA PEN INJ 40/0.4ML	Tier 4	QL (2.16 pens / 30 days), PA; Preferred Brand
HUMIRA PEN INJ 40MG/0.8	Tier 4	QL (2.16 pens / 30 days), PA; Preferred Brand
HUMIRA PEN INJ CD/UC/HS	Tier 4	QL (2.16 pens / 30 days), PA; Preferred Brand
HUMIRA PEN INJ PS/UV	Tier 4	QL (2.16 pens / 30 days), PA; Preferred Brand
HUMIRA PEN KIT CD/UC/HS	Tier 4	QL (2.16 pens / 30 days), PA; Preferred Brand
HUMIRA PEN KIT PS/UV	Tier 4	QL (2.16 pens / 30 days), PA; Preferred Brand
SIMPONI INJ 50/0.5ML	Tier 4	PA; Medical Necessity PA; Prior use of appropriate Preferred Brands
SIMPONI INJ 100MG/ML	Tier 4	PA; Medical Necessity PA; Prior use of appropriate Preferred Brands
Gold Compounds		
RIDAURA CAP 3MG	Tier 3	QL (90 caps / 30 days), PA; MAIL
Interleukin-6 Receptor Inhibitors		
ACTEMRA INJ 80MG/4ML	Tier 4	PA; Medical Necessity PA; Prior use of appropriate Preferred Brands
ACTEMRA INJ 162/0.9	Tier 4	PA; Medical Necessity PA; Prior use of appropriate Preferred Brands

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Drug Name	Drug Tier	Requirements/Limits
ACTEMRA INJ 200/10ML	Tier 4	PA; Medical Necessity PA; Prior use of appropriate Preferred Brands
ACTEMRA INJ 400/20ML	Tier 4	PA; Medical Necessity PA; Prior use of appropriate Preferred Brands
KEVZARA INJ 150/1.14	Tier 4	PA; Preferred Brand
KEVZARA INJ 200/1.14	Tier 4	PA; Preferred Brand
Nonsteroidal Anti-inflammatory Agents (NSAIDs)		
<i>addaprin tab 200mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>advil jr st tab 100mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>advil jr str chw 100mg</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>all day pain tab 220mg</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>all day relf tab 220mg</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>celecoxib cap 50 mg</i>	Tier 1	QL (60 caps / 30 days), PA; MAIL; Covered for ages 65 and over
<i>celecoxib cap 100 mg</i>	Tier 1	QL (120 caps / 30 days), PA; MAIL
<i>celecoxib cap 200 mg</i>	Tier 1	QL (60 caps / 30 days), PA; MAIL
<i>celecoxib cap 400 mg</i>	Tier 1	QL (120 caps / 30 days), PA; MAIL
<i>cvs ibuprof dro 50/1.25</i>	Tier 1	OTC, QL (4800 mL / 30 days); MAIL
<i>diclofenac potassium tab 50 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>diclofenac sodium tab delayed release 25 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>diclofenac sodium tab delayed release 50 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>diclofenac sodium tab delayed release 75 mg</i>	Tier 1	QL (60 ea / 30 days); MAIL
<i>diclofenac sodium tab er 24hr 100 mg</i>	Tier 1	MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>dyspel tab 200mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>eq ibuprofen tab 200mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>etodolac tab 400 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>etodolac tab 500 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>flanax pain tab 220mg</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>flurbiprofen tab 50 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>flurbiprofen tab 100 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>genpril tab 200mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>hm ibuprofen tab 200mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>i-prin tab 200mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>ibu-drops dro 40mg/ml</i>	Tier 1	OTC, QL (4800 mL / 30 days); MAIL
<i>ibu-drops dro 50/1.25</i>	Tier 1	OTC, QL (4800 mL / 30 days); MAIL
<i>ibuprfrn liqd cap 200mg</i>	Tier 1	OTC; MAIL
<i>ibuprofen cap 200 mg</i>	Tier 1	OTC; MAIL
<i>ibuprofen ch sus 100/5ml</i>	Tier 1	OTC, QL (4800 mL / 30 days); MAIL
<i>ibuprofen dro 50/1.25</i>	Tier 1	OTC, QL (4800 mL / 30 days); MAIL
<i>ibuprofen ib chw 100mg</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>ibuprofen ib tab 200mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>ibuprofen jr chw 100mg</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>ibuprofen js chw 100mg</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>ibuprofen sus 100/5ml</i>	Tier 1	OTC, QL (4800 mL / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>ibuprofen tab 200 mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>ibuprofen tab 400 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>ibuprofen tab 600 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>ibuprofen tab 800 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>indomethacin cap 25 mg</i>	Tier 1	QL (120 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>indomethacin cap 50 mg</i>	Tier 1	QL (120 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>ketoprofen cap 50 mg</i>	Tier 1	QL (120 caps / 30 days); MAIL
<i>ketoprofen cap 75 mg</i>	Tier 1	QL (120 caps / 30 days); MAIL
<i>ketorolac tromethamine tab 10 mg</i>	Tier 1	QL (Max day supply 5); AGE; MAIL; covered for ages 64 and under
<i>kls ibuprofen tab 200mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>kls naproxen tab 220mg</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>ks ibuprofen cap 200mg</i>	Tier 1	OTC; MAIL
<i>meclofenamate sodium cap 50 mg</i>	Tier 1	PA; MAIL
<i>meclofenamate sodium cap 100 mg</i>	Tier 1	PA; MAIL
<i>medi-profen cap 200mg</i>	Tier 1	OTC; MAIL
<i>medi-profen sus 100/5ml</i>	Tier 1	OTC, QL (4800 mL / 30 days); MAIL
<i>medi-profen tab 200mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>mediproxen tab 220mg</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>mefenamic acid cap 250 mg</i>	Tier 2	MAIL
<i>meloxicam tab 7.5 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>meloxicam tab 15 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>motrin ib tab 200mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>nabumetone tab 500 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>nabumetone tab 750 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>naproxen dr tab 375mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>naproxen dr tab 500mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>naproxen sod tab 220mg</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>naproxen sodium tab 275 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>naproxen sodium tab 550 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>naproxen susp 125 mg/5ml</i>	Tier 2	QL (3000 mL / 30 days); MAIL
<i>naproxen tab 250 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>naproxen tab 375 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>naproxen tab 500 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>oxaprozin tab 600 mg</i>	Tier 2	QL (90 tabs / 30 days), PA; MAIL
<i>pamprin tab 220mg</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>piroxicam cap 10 mg</i>	Tier 1	QL (120 caps / 30 days), PA; MAIL
<i>piroxicam cap 20 mg</i>	Tier 1	QL (60 caps / 30 days), PA; MAIL
<i>provil tab 200mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>px ibuprofen tab 200mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>px profen ib dro 50/1.25</i>	Tier 1	OTC, QL (4800 mL / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>px profen ib sus 100/5ml</i>	Tier 1	OTC, QL (4800 mL / 30 days); MAIL
<i>qc ibuprofen tab 200mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>ra ibuprofen cap 200mg</i>	Tier 1	OTC; MAIL
<i>ra ibuprofen tab 200mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>sb ibuprofen tab 200mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>sm ibuprofen cap 200mg</i>	Tier 1	OTC; MAIL
<i>sm ibuprofen tab 100mg jr</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>sm ibuprofen tab 200mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>sulindac tab 150 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>sulindac tab 200 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>wal-profen cap 200mg</i>	Tier 1	OTC; MAIL
<i>wal-profen tab 200mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>Pyrimidine Synthesis Inhibitors</i>		
<i>leflunomide tab 10 mg</i>	Tier 2	QL (30 tabs / 30 days); MAIL
<i>leflunomide tab 20 mg</i>	Tier 2	QL (30 tabs / 30 days); MAIL
<i>Soluble Tumor Necrosis Factor Receptor Agents</i>		
ENBREL INJ 25/0.5ML	Tier 4	QL (8.235 syringes / 30 days), PA; Preferred Brand
ENBREL INJ 25MG	Tier 4	QL (4.2 syringes / 30 days), PA; Preferred Brand
ENBREL INJ 50MG/ML	Tier 4	QL (4.286 syringes / 30 days), PA; Preferred Brand
ENBREL MINI INJ 50MG/ML	Tier 4	QL (4.286 injections / 30 days), PA; Preferred Brand

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Drug Name	Drug Tier	Requirements/Limits
ENBREL SRCLK INJ 50MG/ML	Tier 4	QL (4.2 syringes / 30 days), PA; Preferred Brand

ANALGESICS - NonNarcotic***Analgesic Combinations***

<i>butalbital tab cpd</i>	Tier 1	QL (60 tabs / 25 days); AGE; Covered for ages 64 and under
<i>butalbital-acetaminophen tab 50-325 mg</i>	Tier 1	QL (300 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>butalbital-acetaminophen-cafeine cap 50-325-40 mg</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>butalbital-acetaminophen-cafeine tab 50-325-40 mg</i>	Tier 1	QL (180 ea / 30 days); MAIL
<i>butalbital-acetaminophen-cafeine tab 50-325-40 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>butalbital-aspirin-cafeine cap 50-325-40 mg</i>	Tier 1	QL (60 caps / 25 days); AGE; Covered for ages 64 and under
<i>butalbital-aspirin-cafeine tab 50-325-40 mg</i>	Tier 1	QL (60 tabs / 25 days); AGE; Covered for ages 64 and under
<i>capacet cap</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>marten-tab tab 50-325mg</i>	Tier 1	QL (300 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>zebutal cap</i>	Tier 1	QL (60 caps / 30 days); MAIL

Analgesics Other

<i>acephen sup 120mg</i>	Tier 1	OTC, QL (1020 supp / 30 days); MAIL
<i>acephen sup 325mg</i>	Tier 1	OTC, QL (360 supp / 30 days); MAIL
<i>acephen sup 650mg</i>	Tier 1	OTC, QL (180 supp / 30 days); MAIL
<i>acetam melts tab 80mg</i>	Tier 1	OTC, QL (1500 tabs / 30 days); MAIL
<i>acetamin cap 500mg</i>	Tier 1	OTC, QL (240 caps / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>acetamin liq 500/15ml</i>	Tier 1	OTC; MAIL
<i>acetamin tab 500mg</i>	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
<i>acetaminophe tab 160mg</i>	Tier 1	OTC, QL (750 tabs / 30 days); MAIL
<i>acetaminophen soln 160 mg/5ml</i>	Tier 1	OTC; MAIL
<i>acetaminophen suppos 120 mg</i>	Tier 1	OTC, QL (1020 supp / 30 days); MAIL
<i>acetaminophen suppos 650 mg</i>	Tier 1	OTC, QL (180 supp / 30 days); MAIL
<i>acetaminophen tab 325 mg</i>	Tier 1	OTC, QL (360 ea / 30 days); MAIL
<i>acetaminophen tab 325 mg</i>	Tier 1	OTC, QL (360 tabs / 30 days); MAIL
<i>acetaminophen tab er 650 mg</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>acetaminophn sus 325mg</i>	Tier 1	OTC; MAIL
<i>acetaminophn tab 500mg</i>	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
<i>aminofen tab 325mg</i>	Tier 1	OTC, QL (360 tabs / 30 days); MAIL
<i>aminofen tab 500mg</i>	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
<i>APAP 500 LIQ 500/5ML</i>	Tier 2	OTC; MAIL
<i>apap dro 80/0.8ml</i>	Tier 1	OTC; MAIL
<i>apap melt tab 80mg</i>	Tier 1	OTC, QL (1500 tabs / 30 days); MAIL
<i>apap melts tab 160mg</i>	Tier 1	OTC, QL (750 tabs / 30 days); MAIL
<i>apra elx 160/5ml</i>	Tier 1	OTC; MAIL
<i>arthrts pain tab 650mg</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>betatemp sus 160/5ml</i>	Tier 1	OTC; MAIL
<i>child apap tab 80mg</i>	Tier 1	OTC, QL (1500 tabs / 30 days); MAIL
<i>child nonasa chw pain/rel</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>chld meditab chw 80mg</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>chld non-asa chw 80mg grp</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>chld pain rl tab 80mg</i>	Tier 1	OTC, QL (1500 tabs / 30 days); MAIL
<i>chld silapap liq 160/5ml</i>	Tier 1	OTC; MAIL
<i>chlds mapap tab 80mg rt</i>	Tier 1	OTC, QL (1500 tabs / 30 days); MAIL
<i>chloraseptic liq sore thr</i>	Tier 1	OTC; MAIL
<i>cvs childs chw 80mg</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>easy-melts tab 80mg</i>	Tier 1	OTC, QL (1500 tabs / 30 days); MAIL
<i>ed-apap liq 80mg/2.5</i>	Tier 1	OTC; MAIL
<i>eq acetamin tab 80mg</i>	Tier 1	OTC, QL (1500 tabs / 30 days); MAIL
<i>eq acetamin tab 160mg</i>	Tier 1	OTC, QL (750 tabs / 30 days); MAIL
<i>eq acetamin tab 500mg</i>	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
<i>eq acetamin tab 160mg</i>	Tier 1	OTC, QL (750 tabs / 30 days); MAIL
<i>fever reduce sup 120mg</i>	Tier 1	OTC, QL (1020 supp / 30 days); MAIL
<i>fever/pain sus 160/5ml</i>	Tier 1	OTC; MAIL
FEVERALL INF SUP 80MG	Tier 1	OTC, QL (1500 ea / 30 days); MAIL
<i>feverall sup 120mg</i>	Tier 1	OTC, QL (1020 supp / 30 days); MAIL
<i>feverall sup 325mg</i>	Tier 1	OTC, QL (360 supp / 30 days); MAIL
<i>feverall sup 650mg</i>	Tier 1	OTC, QL (180 supp / 30 days); MAIL
<i>fevr reducng sup 120mg</i>	Tier 1	OTC, QL (1020 supp / 30 days); MAIL
<i>hm rpd melt tab 160mg</i>	Tier 1	OTC, QL (750 tabs / 30 days); MAIL
<i>8 hour pain tab 650mg</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>inf silapap dro 80/0.8ml</i>	Tier 1	OTC; MAIL
<i>junior mapap tab 160mg rt</i>	Tier 1	OTC, QL (750 tabs / 30 days); MAIL
<i>little remed liq 160/5ml</i>	Tier 1	OTC; MAIL
<i>mapap apap liq 500/15ml</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>mapap cap 500mg</i>	Tier 1	OTC, QL (240 caps / 30 days); MAIL
<i>mapap child chw 80mg</i>	Tier 1	OTC, QL (1500 tabs / 30 days); MAIL
<i>mapap childr sus 160/5ml</i>	Tier 1	OTC; MAIL
<i>mapap chw 80mg</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>mapap liq 160/5ml</i>	Tier 1	OTC; MAIL
<i>mapap tab 325mg</i>	Tier 1	OTC, QL (360 tabs / 30 days); MAIL
<i>mapap tab 500mg</i>	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
<i>mapap tab 500mg/rr</i>	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
<i>maxapap rs tab 325mg</i>	Tier 1	OTC, QL (360 tabs / 30 days); MAIL
<i>maxapap tab 500mg</i>	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
<i>medi-tabs tab 500mg</i>	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
<i>non-asa jr tab 160mg</i>	Tier 1	OTC, QL (750 tabs / 30 days); MAIL
<i>non-aspirin chw 80mg</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>non-aspirin chw 160mg jr</i>	Tier 1	OTC, QL (180 ea / 30 days); MAIL
<i>non-aspirin sus 160/5ml</i>	Tier 1	OTC; MAIL
<i>non-aspirin tab 325mg</i>	Tier 1	OTC, QL (360 tabs / 30 days); MAIL
<i>non-aspirin tab 500mg/rr</i>	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
<i>non-aspirin tab 650mg</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>nortemp sus 160/5ml</i>	Tier 1	OTC; MAIL
<i>nortemp sus infants</i>	Tier 1	OTC; MAIL
<i>pain & fever chw 80mg</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>pain & fever sol 160/5ml</i>	Tier 1	OTC; MAIL
<i>pain & fever sus 160/5ml</i>	Tier 1	OTC; MAIL
<i>pain & fever tab 325mg</i>	Tier 1	OTC, QL (360 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>pain & fever tab 500mg</i>	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
<i>pain relief liq 160/5ml</i>	Tier 1	OTC; MAIL
<i>pain relief liq 500/15ml</i>	Tier 1	OTC; MAIL
<i>pain relief tab 325mg</i>	Tier 1	OTC, QL (360 tabs / 30 days); MAIL
<i>pain relief tab 500mg</i>	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
<i>pain relieve chw 160mg jr</i>	Tier 1	OTC, QL (180 ea / 30 days); MAIL
<i>pain relieve dro 80/0.8ml</i>	Tier 1	OTC; MAIL
<i>pain relieve sus 160/5ml</i>	Tier 1	OTC; MAIL
<i>pain relieve tab 325mg</i>	Tier 1	OTC, QL (360 tabs / 30 days); MAIL
<i>pain relieve tab 500mg</i>	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
<i>pain relieve tab 500mg/rr</i>	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
<i>pain relievr chw 80mg</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>pain relievr tab 160mg</i>	Tier 1	OTC, QL (750 tabs / 30 days); MAIL
<i>pain relievr tab 325mg</i>	Tier 1	OTC, QL (360 tabs / 30 days); MAIL
<i>pain relievr tab 500mg</i>	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
<i>pain/fever sup 120mg</i>	Tier 1	OTC, QL (1020 supp / 30 days); MAIL
<i>pain/fever sus 160/5ml</i>	Tier 1	OTC; MAIL
<i>pediacare sus 160/5ml</i>	Tier 1	OTC; MAIL
<i>pharbetol tab 325mg</i>	Tier 1	OTC, QL (360 tabs / 30 days); MAIL
<i>pharbetol tab 500mg</i>	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
<i>q-pap child sus 160/5ml</i>	Tier 1	OTC; MAIL
<i>q-pap infant dro 80/0.8ml</i>	Tier 1	OTC; MAIL
<i>q-pap liq 160/5ml</i>	Tier 1	OTC; MAIL
<i>q-pap tab 325mg</i>	Tier 1	OTC, QL (360 tabs / 30 days); MAIL
<i>q-pap tab 500mg</i>	Tier 1	OTC, QL (240 tabs / 30 days); MAIL

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MED - Max 90 mg Morphine EQ Dose Per Day

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Tier 3 = Non-preferred brand name drugs

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Drug Name	Drug Tier	Requirements/Limits
<i>ra acetamin tab 325mg</i>	Tier 1	OTC, QL (360 tabs / 30 days); MAIL
<i>sm pain rel cap 500mg</i>	Tier 1	OTC, QL (240 caps / 30 days); MAIL
<i>sm rpd melt tab 160mg</i>	Tier 1	OTC, QL (750 tabs / 30 days); MAIL
<i>tactinal chw children</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>tactinal tab 325mg</i>	Tier 1	OTC, QL (360 tabs / 30 days); MAIL
<i>tactinal tab 500mg</i>	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
<i>tgt acetamin tab 500mg</i>	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
<i>tgt apap dro infants</i>	Tier 1	OTC; MAIL
Salicylates		
<i>aspir-low tab 81mg ec</i>	PREV	OTC, QL (150 tabs / 30 days); MAIL
<i>aspirin 81 tab 81mg ec</i>	PREV	OTC, QL (150 tabs / 30 days); MAIL
<i>aspirin chld chw 81mg</i>	PREV	OTC, QL (30 tabs / 30 days); MAIL
<i>aspirin tab 81 mg</i>	PREV	OTC, QL (150 tabs / 30 days); MAIL
ASPIRIN TAB 81MG	PREV	OTC, QL (150 tabs / 30 days); MAIL
<i>aspirin tab 325mg</i>	PREV	OTC, QL (300 tabs / 30 days); MAIL
<i>aspirin tab delayed release 81 mg</i>	PREV	OTC, QL (150 tabs / 30 days); MAIL
<i>aspirin tab delayed release 325 mg</i>	PREV	OTC, QL (360 tabs / 30 days); MAIL
<i>aspirtab tab 324mg ec</i>	PREV	OTC, QL (360 tabs / 30 days); MAIL
<i>bayer adv tab 325mg</i>	PREV	OTC, QL (300 tabs / 30 days); MAIL
<i>bayer asa tab 325mg</i>	PREV	OTC, QL (300 tabs / 30 days); MAIL
<i>bayer asa tab 325mg</i>	PREV	OTC, QL (360 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>bayer low chw 81mg</i>	PREV	OTC, QL (30 tabs / 30 days); MAIL
<i>child asa ls chw 81mg</i>	PREV	OTC, QL (30 tabs / 30 days); MAIL
<i>cvs aspirin tab 81mg ec</i>	PREV	OTC, QL (150 tabs / 30 days); MAIL
<i>cvs aspirin tab 325mg</i>	PREV	OTC, QL (300 tabs / 30 days); MAIL
<i>cvs aspirin tab 325mg ec</i>	PREV	OTC, QL (360 tabs / 30 days); MAIL
<i>cvs chld asa chw 81mg</i>	PREV	OTC, QL (30 tabs / 30 days); MAIL
<i>ecotrin low tab 81mg ec</i>	PREV	OTC, QL (150 tabs / 30 days); MAIL
<i>ecpirin tab 325mg ec</i>	PREV	OTC, QL (360 tabs / 30 days); MAIL
<i>eq aspirin tab 325mg</i>	PREV	OTC, QL (300 tabs / 30 days); MAIL
<i>eq aspirin tab 325mg ec</i>	PREV	OTC, QL (360 tabs / 30 days); MAIL
<i>eq child asa chw 81mg</i>	PREV	OTC, QL (30 tabs / 30 days); MAIL
<i>eq aspirin chw 81mg</i>	PREV	OTC, QL (30 tabs / 30 days); MAIL
<i>eq aspirin tab 325mg</i>	PREV	OTC, QL (300 tabs / 30 days); MAIL
<i>eq aspirin tab 325mg ec</i>	PREV	OTC, QL (360 tabs / 30 days); MAIL
<i>gnp aspirin chw 81mg</i>	PREV	OTC, QL (30 tabs / 30 days); MAIL
<i>gnp aspirin tab 81mg ec</i>	PREV	OTC, QL (150 tabs / 30 days); MAIL
<i>gnp aspirin tab 325mg</i>	PREV	OTC, QL (300 tabs / 30 days); MAIL
<i>gnp aspirin tab 325mg ec</i>	PREV	OTC, QL (360 tabs / 30 days); MAIL
<i>hm aspirin chw 81mg</i>	PREV	OTC, QL (30 tabs / 30 days); MAIL
<i>hm aspirin tab 325mg</i>	PREV	OTC, QL (300 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>kls aspirin tab 81mg ec</i>	PREV	OTC, QL (150 tabs / 30 days); MAIL
<i>kls aspirin tab 325mg ec</i>	PREV	OTC, QL (360 tabs / 30 days); MAIL
<i>kp aspirin tab 81mg ec</i>	PREV	OTC, QL (150 tabs / 30 days); MAIL
<i>miniprin low tab 81mg ec</i>	PREV	OTC, QL (150 tabs / 30 days); MAIL
<i>mm aspirin tab 325mg</i>	PREV	OTC, QL (300 tabs / 30 days); MAIL
<i>norwich asa tab 325mg</i>	PREV	OTC, QL (300 tabs / 30 days); MAIL
<i>px aspirin chw 81mg</i>	PREV	OTC, QL (30 tabs / 30 days); MAIL
<i>px aspirin tab 81mg ec</i>	PREV	OTC, QL (150 tabs / 30 days); MAIL
<i>px aspirin tab 325mg</i>	PREV	OTC, QL (300 tabs / 30 days); MAIL
<i>px aspirin tab 325mg ec</i>	PREV	OTC, QL (360 tabs / 30 days); MAIL
<i>qc aspirin tab 325mg</i>	PREV	OTC, QL (300 tabs / 30 days); MAIL
<i>qc aspirin tab 325mg ec</i>	PREV	OTC, QL (360 tabs / 30 days); MAIL
<i>ra aspirin chw 81mg</i>	PREV	OTC, QL (30 tabs / 30 days); MAIL
<i>ra aspirin tab 81mg ec</i>	PREV	OTC, QL (150 tabs / 30 days); MAIL
<i>ra aspirin tab 325mg</i>	PREV	OTC, QL (300 tabs / 30 days); MAIL
<i>ra aspirin tab 325mg ec</i>	PREV	OTC, QL (360 tabs / 30 days); MAIL
<i>ra child asa chw 81mg</i>	PREV	OTC, QL (30 tabs / 30 days); MAIL
<i>salsalate tab 500 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>salsalate tab 750 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>sb aspirin tab 325mg</i>	PREV	OTC, QL (300 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>sb aspirin tab 325mg ec</i>	PREV	OTC, QL (360 tabs / 30 days); MAIL
<i>sm aspirin chw 81mg</i>	PREV	OTC, QL (30 tabs / 30 days); MAIL
<i>sm aspirin tab 81mg ec</i>	PREV	OTC, QL (150 tabs / 30 days); MAIL
<i>sm aspirin tab 325mg</i>	PREV	OTC, QL (300 tabs / 30 days); MAIL
<i>sm aspirin tab 325mg ec</i>	PREV	OTC, QL (360 tabs / 30 days); MAIL
<i>sm child asa chw 81mg</i>	PREV	OTC, QL (30 tabs / 30 days); MAIL
<i>st joseph chw low 81mg</i>	PREV	OTC, QL (30 tabs / 30 days); MAIL
<i>tgt aspirin chw 81mg</i>	PREV	OTC, QL (30 tabs / 30 days); MAIL
<i>tgt aspirin chw child</i>	PREV	OTC, QL (30 tabs / 30 days); MAIL
<i>tgt aspirin tab 81mg ec</i>	PREV	OTC, QL (150 tabs / 30 days); MAIL
<i>tgt aspirin tab 325mg</i>	PREV	OTC, QL (300 tabs / 30 days); MAIL

ANALGESICS - OPIOID**Opioid Agonists**

<i>codeine sulf tab 15mg</i>	Tier 1	QL (360 tabs / 30 days); MED; >7 days per 90 days will require PA
<i>codeine sulf tab 30mg</i>	Tier 1	QL (360 tabs / 30 days); MED; >7 days per 90 days will require PA
<i>codeine sulf tab 60mg</i>	Tier 1	QL (240 tabs / 30 days); MED; >7 days per 90 days will require PA
<i>fentanyl td patch 72hr 12 mcg/hr</i>	Tier 1	QL (10 patches / 25 days), PA; MED
<i>fentanyl td patch 72hr 25 mcg/hr</i>	Tier 1	QL (10 patches / 25 days), PA; MED
FENTANYL TD PATCH 72HR 37.5 MCG/HR	Tier 1	PA; MED
<i>fentanyl td patch 72hr 50 mcg/hr</i>	Tier 1	QL (10 patches / 25 days), PA; MED

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Drug Name	Drug Tier	Requirements/Limits
<i>fentanyl td patch 72hr 75 mcg/hr</i>	Tier 1	QL (10 patches / 25 days), PA; MED
<i>fentanyl td patch 72hr 100 mcg/hr</i>	Tier 1	QL (10 patches / 25 days), PA; MED
<i>hydromorphone hcl tab 2 mg</i>	Tier 1	QL (360 ea / 30 days); MED; >7 days per 90 days will require PA
<i>hydromorphone hcl tab 4 mg</i>	Tier 1	QL (360 ea / 30 days); MED; >7 days per 90 days will require PA
<i>meperidine hcl oral soln 50 mg/5ml</i>	Tier 1	QL (500 mL / 25 days); AGE; MED; >7 days per 90 days will require PA; Covered for ages 64 and under
<i>meperidine hcl tab 50 mg</i>	Tier 1	QL (300 tabs / 30 days); AGE; MED; >7 days per 90 days will require PA; Covered for ages 64 and under
<i>meperidine hcl tab 100 mg</i>	Tier 1	QL (240 tabs / 30 days); AGE; MED; >7 days per 90 days will require PA; Covered for ages 64 and under
<i>methadone hcl soln 5 mg/5ml</i>	Tier 1	QL (1200 mL / 30 days), PA; MED; >7 days per 90 days will require PA
<i>methadone hcl soln 10 mg/5ml</i>	Tier 1	QL (600 mL / 30 days), PA; MED; >7 days per 90 days will require PA
<i>methadone hcl tab 5 mg</i>	Tier 1	QL (360 tabs / 25 days), PA; MED; >7 days per 90 days will require PA
<i>methadone hcl tab 10 mg</i>	Tier 1	QL (360 tabs / 25 days), PA; MED; >7 days per 90 days will require PA
<i>morphine sulfate oral soln 10 mg/5ml</i>	Tier 1	QL (450 mL / 30 days), PA; MED; >7 days per 90 days will require PA

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Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate oral soln 20 mg/5ml</i>	Tier 1	QL (450 mL / 30 days), PA; MED; >7 days per 90 days will require PA
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	Tier 1	QL (450 mL / 30 days), PA; MED; >7 days per 90 days will require PA
<i>morphine sulfate tab 15 mg</i>	Tier 1	QL (90 tabs / 25 days); MED; >7 days per 90 days will require PA
<i>morphine sulfate tab 30 mg</i>	Tier 1	QL (90 tabs / 25 days); MED; >7 days per 90 days will require PA
<i>morphine sulfate tab er 15 mg</i>	Tier 1	QL (90 ea / 30 days), ST; MED; Prior Use IR Opioid Required
<i>morphine sulfate tab er 30 mg</i>	Tier 1	QL (90 ea / 30 days), ST; MED; Prior Use IR Opioid Required
<i>morphine sulfate tab er 60 mg</i>	Tier 1	QL (90 ea / 30 days), ST; MED; Prior Use IR Opioid Required
<i>morphine sulfate tab er 100 mg</i>	Tier 1	QL (90 ea / 30 days), ST; MED; Prior Use IR Opioid Required
NUCYNTA TAB 50MG	Tier 3	QL (360 tabs / 25 days), PA; MED; >7 days per 90 days will require PA
NUCYNTA TAB 75MG	Tier 3	QL (240 tabs / 25 days), PA; MED; >7 days per 90 days will require PA
NUCYNTA TAB 100MG	Tier 3	QL (180 tabs / 25 days), PA; MED; >7 days per 90 days will require PA
<i>oxycodone hcl soln 5 mg/5ml</i>	Tier 1	QL (240 ml per fill, max 1 fill per 90 days); MED; >7 days per 90 days will require PA
<i>oxycodone hcl tab 5 mg</i>	Tier 1	QL (Max 4 per day); MED; >7 days per 90 days will require PA

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Drug Name	Drug Tier	Requirements/Limits
<i>oxycodone hcl tab 10 mg</i>	Tier 1	QL (Max 90 per fill, max 1 fill per 90 days); MED; >7 days per 90 days will require PA
<i>oxycodone hcl tab 15 mg</i>	Tier 1	QL (Max 90 per fill, max 1 fill per 90 days); MED; >7 days per 90 days will require PA
<i>oxycodone hcl tab 20 mg</i>	Tier 1	QL (Max 90 per fill, max 1 fill per 90 days); MED; >7 days per 90 days will require PA
<i>oxycodone hcl tab 30 mg</i>	Tier 1	QL (Max 90 per fill, max 1 fill per 90 days); MED; >7 days per 90 days will require PA
<i>oxymorphone hcl tab 5 mg</i>	Tier 2	QL (180 tabs / 25 days), PA; MED; >7 days per 90 days will require PA
<i>oxymorphone hcl tab 10 mg</i>	Tier 2	QL (120 tabs / 25 days), PA; MED; >7 days per 90 days will require PA
<i>tramadol hcl tab 50 mg</i>	Tier 1	QL (240 tabs / 30 days); MED; >7 days per 90 days will require PA
<i>tramadol hcl tab er 24hr 100 mg</i>	Tier 1	QL (30 tabs / 30 days), PA; MED; >7 days per 90 days will require PA
<i>tramadol hcl tab er 24hr 300 mg</i>	Tier 1	QL (30 tabs / 30 days), PA; MED; >7 days per 90 days will require PA
<i>tramadol hcl tab er 24hr biphasic release 200 mg</i>	Tier 1	QL (30 tabs / 30 days), PA; MED; >7 days per 90 days will require PA
Opioid Combinations		
<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	Tier 1	QL (3750 mL / 25 days); MED; >7 days per 90 days will require PA

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Drug Name	Drug Tier	Requirements/Limits
<i>acetaminophen w/ codeine tab 300-15 mg</i>	Tier 1	QL (120 tabs / 25 days); MED; >7 days per 90 days will require PA
<i>acetaminophen w/ codeine tab 300-30 mg</i>	Tier 1	QL (180 ea / 25 days); MED; >7 days per 90 days will require PA
<i>acetaminophen w/ codeine tab 300-60 mg</i>	Tier 1	QL (120 ea / 25 days); MED; >7 days per 90 days will require PA
<i>butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg</i>	Tier 1	QL (240 caps / 30 days); MED; >7 days per 90 days will require PA
<i>co-gesic tab 5-500mg</i>	Tier 1	QL (180 tabs / 25 days); MED; >7 days per 90 days will require PA
<i>endocet tab 5-325mg</i>	Tier 1	QL (240 tabs / 30 days); MED; >7 days per 90 days will require PA
<i>endocet tab 10-325mg</i>	Tier 1	QL (180 tabs / 25 days); MED; >7 days per 90 days will require PA
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	Tier 1	QL (3750 mL / 25 days); MED; >7 days per 90 days will require PA
<i>hydrocodone-acetaminophen tab 2.5-500 mg</i>	Tier 1	QL (180 tabs / 25 days); MED; >7 days per 90 days will require PA
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	Tier 1	QL (180 tabs / 25 days); MED; >7 days per 90 days will require PA
<i>hydrocodone-acetaminophen tab 5-500 mg</i>	Tier 1	QL (180 tabs / 25 days); MED; >7 days per 90 days will require PA
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	Tier 1	QL (180 tabs / 25 days); MED; >7 days per 90 days will require PA
<i>hydrocodone-acetaminophen tab 7.5-500 mg</i>	Tier 1	QL (180 ea / 25 days); MED; >7 days per 90 days will require PA

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Drug Name	Drug Tier	Requirements/Limits
<i>hydrocodone-acetaminophen tab 7.5-650 mg</i>	Tier 1	QL (180 tabs / 25 days); MED; >7 days per 90 days will require PA
<i>hydrocodone-acetaminophen tab 7.5-750 mg</i>	Tier 1	QL (180 ea / 25 days); MED; >7 days per 90 days will require PA
<i>hydrocodone-acetaminophen tab 10-325 mg</i>	Tier 1	QL (180 tabs / 25 days); MED; >7 days per 90 days will require PA
<i>hydrocodone-acetaminophen tab 10-500 mg</i>	Tier 1	QL (180 ea / 25 days); MED; >7 days per 90 days will require PA
<i>hydrocodone-acetaminophen tab 10-650 mg</i>	Tier 1	QL (180 tabs / 25 days); MED; >7 days per 90 days will require PA
<i>hydrogesic cap 5-500mg</i>	Tier 1	MED; >7 days per 90 days will require PA
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	Tier 1	QL (240 tabs / 30 days); MED; >7 days per 90 days will require PA
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	Tier 1	QL (180 tabs / 25 days); MED; >7 days per 90 days will require PA
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	Tier 1	QL (180 tabs / 25 days); MED; >7 days per 90 days will require PA
<i>stagesic cap 5-500mg</i>	Tier 1	MED; >7 days per 90 days will require PA

Opioid Partial Agonists

<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	Tier 1	QL (360 tabs / 30 days)
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	Tier 1	QL (90 tabs / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	Tier 1	
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	Tier 1	
<i>buprenorphine td patch weekly 10 mcg/hr</i>	Tier 1	PA
BUTRANS DIS 10MCG/HR	Tier 3	PA

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Drug Name	Drug Tier	Requirements/Limits
ANDROGENS-ANABOLIC		
<i>Anabolic Steroids</i>		
<i>oxandrolone tab 2.5 mg</i>	Tier 2	PA; AGE; Covered for ages 64 and under
<i>oxandrolone tab 10 mg</i>	Tier 2	PA; AGE; Covered for ages 64 and under
<i>Androgens</i>		
ANDROXY TAB 10MG	Tier 3	
<i>danazol cap 50 mg</i>	Tier 2	QL (120 caps / 30 days); MAIL
<i>danazol cap 100 mg</i>	Tier 2	QL (120 caps / 30 days); MAIL
<i>danazol cap 200 mg</i>	Tier 2	QL (120 caps / 30 days); MAIL
METHITEST TAB 10MG	Tier 3	AGE; Covered for ages 64 and under
<i>testosterone cypionate im inj in oil 100 mg/ml</i>	Tier 1	
<i>testosterone cypionate im inj in oil 200 mg/ml</i>	Tier 1	
<i>testosterone enanthate im inj in oil 200 mg/ml</i>	Tier 1	
ANORECTAL AGENTS		
<i>INTRARECTAL STEROIDS</i>		
<i>hydrocortisone enema 100 mg/60ml</i>	Tier 2	QL (1680 mL / 30 days); MAIL
<i>Rectal Combinations</i>		
<i>hemorrhoidal cre</i>	Tier 1	OTC; MAIL
<i>Rectal Local Anesthetics</i>		
<i>dibucaine rectal ointment 1%</i>	Tier 1	OTC; MAIL
<i>Rectal Steroids</i>		
<i>procto-med cre hc 2.5%</i>	Tier 1	QL (450 gm / 30 days); MAIL
<i>proctosol hc cre 2.5%</i>	Tier 1	QL (450 gm / 30 days); MAIL
<i>proctozone cre -hc 2.5%</i>	Tier 1	QL (450 gm / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
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ANTACIDS**Antacid Combinations**

<i>acid gone chw</i>	Tier 1	OTC; MAIL
<i>acid gone sus</i>	Tier 1	OTC; MAIL
<i>advanced sus antacid</i>	Tier 1	OTC; MAIL
<i>almacone chw</i>	Tier 1	OTC; MAIL
<i>almacone dbl sus strength</i>	Tier 1	OTC; MAIL
<i>almacone sus</i>	Tier 1	OTC; MAIL
<i>alum & mag hydroxide-simethicone susp 500-450-40 mg/5ml</i>	Tier 1	OTC; MAIL
<i>antacid adv sus max st</i>	Tier 1	OTC; MAIL
<i>antacid chw dbl st</i>	Tier 1	OTC; MAIL
<i>antacid extr chw 675-135</i>	Tier 1	OTC; MAIL
<i>antacid fast sus acting</i>	Tier 1	OTC; MAIL
<i>antacid fast sus relief</i>	Tier 1	OTC; MAIL
<i>antacid i sus</i>	Tier 1	OTC; MAIL
<i>antacid iii sus</i>	Tier 1	OTC; MAIL
<i>antacid liq sus</i>	Tier 1	OTC; MAIL
<i>antacid m sus</i>	Tier 1	OTC; MAIL
<i>antacid plus sus anti-gas</i>	Tier 1	OTC; MAIL
<i>antacid plus sus gas rel</i>	Tier 1	OTC; MAIL
<i>antacid sus</i>	Tier 1	OTC; MAIL
<i>antacid sus anti-gas</i>	Tier 1	OTC; MAIL
<i>antacid sus ex st</i>	Tier 1	OTC; MAIL
<i>antacid sus max st</i>	Tier 1	OTC; MAIL
<i>antacid sus mint crm</i>	Tier 1	OTC; MAIL
<i>antacid sus reg</i>	Tier 1	OTC; MAIL
<i>antacid sus reg st</i>	Tier 1	OTC; MAIL
<i>antacid sus ultra st</i>	Tier 1	OTC; MAIL
<i>antacid/gas sus rel max</i>	Tier 1	OTC; MAIL
<i>antacid/sime sus ds</i>	Tier 1	OTC; MAIL
<i>comfort gel sus</i>	Tier 1	OTC; MAIL
<i>comfort gel sus antacid</i>	Tier 1	OTC; MAIL
<i>comfort gel sus anti-gas</i>	Tier 1	OTC; MAIL
<i>cvs antacid sus antigas</i>	Tier 1	OTC; MAIL
<i>cvs antacid sus supreme</i>	Tier 1	OTC; MAIL
<i>cvs antacid/ sus anti-gas</i>	Tier 1	OTC; MAIL
<i>eq antacid chw 160-105</i>	Tier 1	OTC; MAIL
<i>eq antacid chw ex st</i>	Tier 1	OTC; MAIL

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<i>eq antacid sus</i>	Tier 1	OTC; MAIL
<i>eq antacid sus anti-gas</i>	Tier 1	OTC; MAIL
<i>eq antacid sus max st</i>	Tier 1	OTC; MAIL
<i>eq antacid sus anti-gas</i>	Tier 1	OTC; MAIL
<i>flanax sus relief</i>	Tier 1	OTC; MAIL
<i>foam antacid chw 80-20mg</i>	Tier 1	OTC; MAIL
<i>foam antacid sus</i>	Tier 1	OTC; MAIL
<i>geri-lanta sus</i>	Tier 1	OTC; MAIL
<i>gnp antacid chw 160-105</i>	Tier 1	OTC; MAIL
<i>gnp antacid sus anti-gas</i>	Tier 1	OTC; MAIL
<i>gnp antacid sus cherry</i>	Tier 1	OTC; MAIL
<i>gnp antacid sus coolmint</i>	Tier 1	OTC; MAIL
<i>gnp antacid sus original</i>	Tier 1	OTC; MAIL
<i>heartbrn ant chw 160-105</i>	Tier 1	OTC; MAIL
<i>heartburn chw ex st</i>	Tier 1	OTC; MAIL
<i>hm antacid sus anti-gas</i>	Tier 1	OTC; MAIL
<i>maalox advan sus max st</i>	Tier 1	OTC; MAIL
<i>maalox max sus cherry</i>	Tier 1	OTC; MAIL
<i>maalox max sus lemon</i>	Tier 1	OTC; MAIL
<i>maalox max sus wild bry</i>	Tier 1	OTC; MAIL
<i>maalox multi sus symp max</i>	Tier 1	OTC; MAIL
<i>mag-al plus liq</i>	Tier 1	OTC; MAIL
<i>mag-al plus liq xs</i>	Tier 1	OTC; MAIL
<i>meijer sus antacid</i>	Tier 1	OTC; MAIL
<i>mi-acid chw</i>	Tier 1	OTC; MAIL
<i>mi-acid sus</i>	Tier 1	OTC; MAIL
<i>mi-acid sus max st</i>	Tier 1	OTC; MAIL
<i>milantex sus ex st</i>	Tier 1	OTC; MAIL
<i>milantex sus original</i>	Tier 1	OTC; MAIL
<i>mintox plus chw</i>	Tier 1	OTC; MAIL
<i>mintox sus</i>	Tier 1	OTC; MAIL
<i>mintox sus max st</i>	Tier 1	OTC; MAIL
<i>px antacid sus max st</i>	Tier 1	OTC; MAIL
<i>px antacid sus reg st</i>	Tier 1	OTC; MAIL
<i>qc antacid sus</i>	Tier 1	OTC; MAIL
<i>qc antacid sus anti-gas</i>	Tier 1	OTC; MAIL
<i>ra antacid sus anti-gas</i>	Tier 1	OTC; MAIL
<i>ra antacid sus antigas</i>	Tier 1	OTC; MAIL
<i>ra liquid sus antacid</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>rulox sus</i>	Tier 1	OTC; MAIL
<i>sb antacid sus anti-gas</i>	Tier 1	OTC; MAIL
<i>sb antacid/ sus antigas</i>	Tier 1	OTC; MAIL
<i>sm antacid chw ex-str</i>	Tier 1	OTC; MAIL
<i>sm antacid sus advanced</i>	Tier 1	OTC; MAIL
<i>sm antacid sus max st</i>	Tier 1	OTC; MAIL
<i>tgt antacid sus anti-gas</i>	Tier 1	OTC; MAIL

Antacids - Bicarbonate

<i>sodium bicarbonate tab 325 mg</i>	Tier 1	OTC; MAIL
<i>sodium bicarbonate tab 650 mg</i>	Tier 1	OTC; MAIL

Antacids - Calcium Salts

<i>antacid chw 500mg</i>	Tier 1	OTC; MAIL
<i>antacid chw 1000mg</i>	Tier 1	OTC; MAIL
<i>antacid extr chw 750mg</i>	Tier 1	OTC; MAIL
<i>antacid max chw 1000mg</i>	Tier 1	OTC; MAIL
<i>cal antacid chw 1000mg</i>	Tier 1	OTC; MAIL
<i>cal-gest chw 500mg</i>	Tier 1	OTC; MAIL
<i>calc antacid chw 500mg</i>	Tier 1	OTC; MAIL
<i>calc antacid chw 750mg</i>	Tier 1	OTC; MAIL
<i>calc antacid chw 1000mg</i>	Tier 1	OTC; MAIL
<i>calcium carbonate (antacid) chew tab 500 mg</i>	Tier 1	OTC; MAIL
<i>calcium carbonate (antacid) tab 648 mg</i>	Tier 1	OTC, QL (480 tabs / 30 days); MAIL
<i>child soothe chw 400mg</i>	Tier 1	OTC; MAIL
<i>childrens chw pepto</i>	Tier 1	OTC; MAIL
<i>childrens chw soothe</i>	Tier 1	OTC; MAIL
<i>eq antacid chw 1000mg</i>	Tier 1	OTC; MAIL
<i>eql antacid chw 1000mg</i>	Tier 1	OTC; MAIL
<i>gnp antacid chw 1000mg</i>	Tier 1	OTC; MAIL
<i>maalox child chw</i>	Tier 1	OTC; MAIL
<i>px antacid chw 1000mg</i>	Tier 1	OTC; MAIL
<i>ra antacid chw 1000mg</i>	Tier 1	OTC; MAIL
<i>sm antacid chw 1000mg</i>	Tier 1	OTC; MAIL
<i>stomach rlf chw 400mg</i>	Tier 1	OTC; MAIL
<i>tgt antacid chw 1000mg</i>	Tier 1	OTC; MAIL
<i>tums fresher chw 500mg</i>	Tier 1	OTC; MAIL

Antacids - Magnesium Salts

<i>hm magnesium tab 250mg</i>	Tier 1	OTC; MAIL
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Drug Name	Drug Tier	Requirements/Limits
<i>magnesium oxide tab 250 mg</i>	Tier 1	OTC; MAIL
<i>magnesium oxide tab 400 mg (240 mg elemental mg)</i>	Tier 1	OTC; MAIL
<i>magnesium oxide tab 420 mg</i>	Tier 1	OTC; MAIL
<i>magnesium tab 250mg</i>	Tier 1	OTC; MAIL

ANTHELMINTICS***Anthelmintics***

<i>albendazole tab 200 mg</i>	Tier 1	QL (2 tabs / 25 days), PA
ALBENZA TAB 200MG	Tier 3	QL (2 tabs / 25 days), PA
BILTRICIDE TAB 600MG	Tier 3	PA
<i>ivermectin tab 3 mg</i>	Tier 1	QL (300 tabs / 30 days)
PIN-X CHW 250MG	Tier 2	OTC, QL (Max 2 fill per year)
<i>pinworm med sus 144mg/ml</i>	Tier 1	OTC
<i>praziquantel tab 600 mg</i>	Tier 2	PA
<i>reeses med sus pinworm</i>	Tier 1	OTC

ANTI-INFECTIVE AGENTS - MISC.***Anti-infective Agents - Misc.***

CAYSTON INH 75MG	Tier 4	PA
FIRST-VANC SOL 25MG/ML	Tier 2	
FIRST-VANC SOL 50MG/ML	Tier 2	
FIRVANQ SOL 25MG/ML	Tier 2	
FIRVANQ SOL 50MG/ML	Tier 2	
<i>metronidazole tab 250 mg</i>	Tier 1	QL (240 tabs / 30 days)
<i>metronidazole tab 500 mg</i>	Tier 1	QL (120 tabs / 30 days)
NEBUPENT INH 300MG	Tier 3	
<i>trimethoprim tab 100 mg</i>	Tier 1	QL (180 tabs / 30 days)

Anti-infective Misc. - Combinations

<i>e.s.p. sus 200-600</i>	Tier 2	QL (2400 mL / 30 days)
<i>erythromycin-sulfisoxazole for susp 200-600 mg/5ml</i>	Tier 2	QL (2400 mL / 30 days)
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	Tier 1	QL (1200 mL / 30 days)
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	Tier 1	QL (120 tabs / 30 days)
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	Tier 1	QL (120 tabs / 30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>sulfatrim pd sus 200-40/5</i>	Tier 1	QL (1200 mL / 30 days)
Antiprotozoal Agents		
<i>atovaquone susp 750 mg/5ml</i>	Tier 2	QL (300 mL / 30 days), PA; Covered for ages 13 and over
Carbapenems		
<i>ertapenem sodium for inj 1 gm (base equivalent)</i>	Tier 1	PA
<i>imipenem-cilastatin intravenous for soln 250 mg</i>	Tier 1	PA
<i>imipenem-cilastatin intravenous for soln 500 mg</i>	Tier 1	PA
INVANZ INJ 1GM	Tier 3	PA
<i>meropenem iv for soln 500 mg</i>	Tier 1	PA
Leprostatics		
<i>dapsone tab 25 mg</i>	Tier 1	QL (120 tabs / 30 days)
<i>dapsone tab 100 mg</i>	Tier 1	QL (90 tabs / 30 days)
Lincosamides		
<i>clindamycin hcl cap 150 mg</i>	Tier 1	QL (240 ea / 30 days)
<i>clindamycin hcl cap 300 mg</i>	Tier 1	QL (270 ea / 30 days)
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	Tier 1	Covered for ages 18 and under
Oxazolidinones		
<i>linezolid for susp 100 mg/5ml</i>	Tier 2	QL (Max day supply 7), PA
<i>linezolid tab 600 mg</i>	Tier 2	QL (Max day supply 7), PA
ANTIANGINAL AGENTS		
Antianginals-Other		
RANEXA TAB 500MG	Tier 2	ST; MAIL; PRIOR USE Beta Blocker/Ca Channel Blockers/LA Nitrate
RANEXA TAB 1000MG	Tier 2	ST; MAIL; PRIOR USE Beta Blocker/Ca Channel Blockers/LA Nitrate
Nitrates		
<i>isosorbide dinitrate sl tab 2.5 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>isosorbide dinitrate tab 5 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>isosorbide dinitrate tab 10 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>isosorbide dinitrate tab 20 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>isosorbide dinitrate tab 30 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>isosorbide mononitrate tab 10 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>isosorbide mononitrate tab 20 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>isosorbide mononitrate tab er 24hr 30 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>isosorbide mononitrate tab er 24hr 60 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>isosorbide mononitrate tab er 24hr 120 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>minitran dis 0.2mg/hr</i>	Tier 1	QL (30 patches / 30 days); MAIL
<i>minitran dis 0.4mg/hr</i>	Tier 1	QL (30 patches / 30 days); MAIL
<i>minitran dis 0.6mg/hr</i>	Tier 1	QL (30 patches / 30 days); MAIL
<i>nitro-time cap 9mg cr</i>	Tier 1	QL (90 caps / 30 days); MAIL
<i>nitroglycerin cap er 9 mg</i>	Tier 1	QL (90 caps / 30 days); MAIL
<i>nitroglycerin sl tab 0.3 mg</i>	Tier 1	QL (300 tabs / 30 days); MAIL
<i>nitroglycerin sl tab 0.4 mg</i>	Tier 1	QL (300 tabs / 30 days); MAIL
<i>nitroglycerin sl tab 0.6 mg</i>	Tier 1	QL (300 tabs / 30 days); MAIL
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	Tier 1	QL (30 patches / 30 days); MAIL
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	Tier 1	QL (30 patches / 30 days); MAIL
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	Tier 1	QL (30 patches / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
ANTIANXIETY AGENTS		
<i>Antianxiety Agents - Misc.</i>		
<i>buspirone hcl tab 5 mg</i>	Tier 1	QL (240 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>buspirone hcl tab 7.5 mg</i>	Tier 1	QL (240 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>buspirone hcl tab 10 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>buspirone hcl tab 15 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>hydroxyzine hcl syrup 10 mg/5ml</i>	Tier 1	QL (1800 mL / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>hydroxyzine hcl tab 10 mg</i>	Tier 1	QL (240 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>hydroxyzine hcl tab 25 mg</i>	Tier 1	QL (240 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>hydroxyzine hcl tab 50 mg</i>	Tier 1	QL (240 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>hydroxyzine pamoate cap 25 mg</i>	Tier 1	QL (240 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>hydroxyzine pamoate cap 50 mg</i>	Tier 1	QL (240 ea / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>hydroxyzine pamoate cap 100 mg</i>	Tier 1	QL (120 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>meprobamate tab 200 mg</i>	Tier 1	
<i>meprobamate tab 400 mg</i>	Tier 2	

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Drug Name	Drug Tier	Requirements/Limits
<i>Benzodiazepines</i>		
<i>alprazolam tab 0.5 mg</i>	Tier 1	QL (90 ea / 30 days); Covered for ages 18 and over
<i>alprazolam tab 0.25 mg</i>	Tier 1	QL (90 ea / 30 days); Covered for ages 18 and over
<i>alprazolam tab 1 mg</i>	Tier 1	QL (90 tabs / 30 days); Covered for ages 18 and over
<i>alprazolam tab 2 mg</i>	Tier 1	QL (90 tabs / 30 days); Covered for ages 18 and over
<i>chlordiazepoxide hcl cap 5 mg</i>	Tier 1	QL (90 caps / 30 days); AGE; Covered for ages 6-64
<i>chlordiazepoxide hcl cap 10 mg</i>	Tier 1	QL (90 caps / 30 days); AGE; Covered for ages 6-64
<i>chlordiazepoxide hcl cap 25 mg</i>	Tier 1	QL (90 caps / 30 days); AGE; Covered for ages 6-64
<i>clorazepate dipotassium tab 3.75 mg</i>	Tier 1	QL (90 tabs / 30 days); AGE; Covered for ages 6-64
<i>clorazepate dipotassium tab 7.5 mg</i>	Tier 1	QL (120 tabs / 30 days); AGE; Covered for ages 6-64
<i>clorazepate dipotassium tab 15 mg</i>	Tier 1	QL (90 tabs / 30 days); AGE; Covered for ages 6-64
DIAZEPAM CON 5MG/ML	Tier 1	QL (90 mL / 30 days), PA; AGE; Covered for ages 64 and under
<i>diazepam oral soln 1 mg/ml</i>	Tier 1	QL (120 mL / 30 days); AGE; Covered for ages 64 and under
<i>diazepam tab 2 mg</i>	Tier 1	QL (90 tabs / 30 days); AGE; Covered for ages 64 and under

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Drug Name	Drug Tier	Requirements/Limits
<i>diazepam tab 5 mg</i>	Tier 1	QL (90 tabs / 30 days); AGE; Covered for ages 64 and under
<i>diazepam tab 10 mg</i>	Tier 1	QL (90 tabs / 30 days); AGE; Covered for ages 64 and under
<i>lorazepam conc 2 mg/ml</i>	Tier 1	QL (90 mL / 30 days); Covered for ages 12 and over
<i>lorazepam tab 0.5 mg</i>	Tier 1	QL (90 tabs / 30 days); Covered for ages 12 and over
<i>lorazepam tab 1 mg</i>	Tier 1	QL (90 tabs / 30 days); Covered for ages 12 and over
<i>lorazepam tab 2 mg</i>	Tier 1	QL (90 tabs / 30 days); Covered for ages 12 and over
<i>oxazepam cap 10 mg</i>	Tier 2	QL (90 ea / 30 days); Covered for ages 6 and over
<i>oxazepam cap 15 mg</i>	Tier 2	QL (90 ea / 30 days); Covered for ages 6 and over
<i>oxazepam cap 30 mg</i>	Tier 2	QL (120 ea / 30 days); Covered for ages 6 and over

ANTIARRHYTHMICS***Antiarrhythmics Type I-A***

<i>disopyramide phosphate cap 100 mg</i>	Tier 1	MAIL
<i>disopyramide phosphate cap 150 mg</i>	Tier 1	QL (150 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>quinidine sulfate tab 300 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL

Antiarrhythmics Type I-B

<i>mexiletine hcl cap 150 mg</i>	Tier 1	QL (180 caps / 30 days); MAIL
<i>mexiletine hcl cap 200 mg</i>	Tier 1	QL (180 caps / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>mexiletine hcl cap 250 mg</i>	Tier 1	QL (180 caps / 30 days); MAIL
<i>Antiarrhythmics Type I-C</i>		
<i>flecainide acetate tab 50 mg</i>	Tier 1	QL (210 tabs / 30 days); MAIL
<i>flecainide acetate tab 100 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>flecainide acetate tab 150 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>propafenone hcl tab 150 mg</i>	Tier 1	QL (180 ea / 30 days); MAIL
<i>propafenone hcl tab 225 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>propafenone hcl tab 300 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>Antiarrhythmics Type III</i>		
<i>amiodarone hcl tab 200 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>dofetilide cap 125 mcg (0.125 mg)</i>	Tier 4	QL (240 caps / 30 days)
<i>dofetilide cap 250 mcg (0.25 mg)</i>	Tier 4	QL (120 caps / 30 days)
<i>dofetilide cap 500 mcg (0.5 mg)</i>	Tier 4	QL (60 caps / 30 days)
MULTAQ TAB 400MG	Tier 3	QL (60 tabs / 30 days); MAIL
<i>pacerone tab 200mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
<i>ANTIASTHMATIC - MONOCLONAL ANTIBODIES</i>		
XOLAIR INJ 75/0.5	Tier 4	QL (5 syringes / 24 days), PA
XOLAIR INJ 150MG/ML	Tier 4	QL (5 syringes / 24 days), PA
<i>Anti-Inflammatory Agents</i>		
<i>cromolyn sodium soln nebu 20 mg/2ml</i>	Tier 2	QL (780 mL / 30 days); MAIL
<i>Antiasthmatic - Monoclonal Antibodies</i>		
DUPIXENT INJ 200/1.14	Tier 4	PA
NUCALA INJ 100MG	Tier 4	PA
XOLAIR SOL 150MG	Tier 4	QL (5 vials / 24 days), PA

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Drug Name	Drug Tier	Requirements/Limits
BRONCHODILATORS - ANTICHOLINERGICS		
TUDORZA PRES AER 400/ACT	Tier 2	
Bronchodilators - Anticholinergics		
ATROVENT HFA AER 17MCG	Tier 2	QL (2.326 inhalers / 30 days); MAIL
INCRUSE ELPT INH 62.5MCG	Tier 2	MAIL
<i>ipratropium bromide inhal soln 0.02%</i>	Tier 1	QL (300 mL / 30 days); MAIL
Leukotriene Modulators		
<i>montelukast sodium chew tab 4 mg (base equiv)</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>montelukast sodium chew tab 5 mg (base equiv)</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>montelukast sodium tab 10 mg (base equiv)</i>	Tier 1	QL (30 tabs / 30 days); MAIL
STEROID INHALANTS		
FLOVENT HFA AER 44MCG	Tier 2	QL (1 inhaler / 25 days); AGE; MAIL; Covered for ages 11 and under
FLOVENT HFA AER 110MCG	Tier 2	QL (1 inhaler / 25 days); AGE; MAIL; Covered for ages 11 and under
Selective Phosphodiesterase 4 (PDE4) Inhibitors		
DALIRESP TAB 500MCG	Tier 3	PA; MAIL
Steroid Inhalants		
AEROSPAN AER 80MCG	Tier 2	MAIL
<i>budesonide inhalation susp 0.5 mg/2ml</i>	Tier 2	QL (120 mL / 30 days); AGE; MAIL; Covered for ages 9 and under
<i>budesonide inhalation susp 0.25 mg/2ml</i>	Tier 2	QL (120 mL / 30 days); MAIL; Covered for ages 9 and under
QVAR REDIHA AER 80MCG	Tier 2	QL (10.6 gm / 25 days); MAIL
QVAR REDIHAL AER 40MCG	Tier 2	QL (10.6 gm / 25 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
Sympathomimetics		
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	Tier 1	QL (150 mL / 25 days); MAIL
<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	Tier 1	QL (300 mL / 25 days); MAIL
<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i>	Tier 1	QL (225 mL / 25 days); MAIL
<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	Tier 1	QL (150 mL / 25 days); MAIL
<i>albuterol sulfate syrup 2 mg/5ml</i>	Tier 1	QL (4500 mL / 30 days); MAIL
<i>albuterol sulfate tab 4 mg</i>	Tier 2	QL (240 tabs / 30 days); MAIL
BREO ELLIPTA INH 100-25	Tier 3	QL (60 blisters / 30 days); MAIL
BREO ELLIPTA INH 200-25	Tier 3	QL (60 blisters / 30 days); MAIL
COMBIVENT AER 20-100	Tier 2	MAIL
DULERA AER 100-5MCG	Tier 2	QL (1.477 inhalers / 25 days); MAIL
DULERA AER 200-5MCG	Tier 2	QL (1.477 inhalers / 25 days); MAIL
<i>fluticasone-salmeterol aer powder ba 55- 14 mcg/act</i>	Tier 1	QL (1 inhaler / 30 days); MAIL
<i>fluticasone-salmeterol aer powder ba 113- 14 mcg/act</i>	Tier 1	QL (1 inhaler / 30 days); MAIL
<i>fluticasone-salmeterol aer powder ba 232- 14 mcg/act</i>	Tier 1	QL (1 inhaler / 30 days); MAIL
FORADIL CAP AEROLIZE	Tier 2	QL (60 caps / 30 days); MAIL
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	Tier 1	QL (360 ml / 30 days); MAIL
PROAIR HFA AER	Tier 2	MAIL
STRIVERDI AER 2.5MCG	Tier 2	QL (1 inhaler / 30 days); MAIL
SYMBICORT AER 80-4.5	Tier 2	QL (1.478 inhalers / 25 days); MAIL
SYMBICORT AER 160-4.5	Tier 2	QL (1 inhaler / 25 days); MAIL
<i>terbutaline sulfate tab 2.5 mg</i>	Tier 2	QL (240 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>terbutaline sulfate tab 5 mg</i>	Tier 2	QL (180 tabs / 30 days); MAIL
VENTOLIN HFA AER	Tier 3	ST; MAIL; PRIOR USE PROAIR

Xanthines

<i>aminophylline inj 25 mg/ml</i>	Tier 1	MAIL
<i>aminophylline tab 100 mg</i>	Tier 1	MAIL
<i>aminophylline tab 200 mg</i>	Tier 1	MAIL
<i>theochron tab 100mg cr</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>theochron tab 200mg cr</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>theochron tab 300mg cr</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>theophylline soln 80 mg/15ml</i>	Tier 1	MAIL
<i>theophylline tab er 12hr 100 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>theophylline tab er 12hr 200 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>theophylline tab er 12hr 300 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>theophylline tab er 12hr 450 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>theophylline tab er 24hr 400 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>theophylline tab er 24hr 600 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL

ANTICOAGULANTS**Coumarin Anticoagulants**

COUMADIN TAB 1MG	Tier 2	QL (300 tabs / 30 days); MAIL
COUMADIN TAB 2.5MG	Tier 2	QL (300 tabs / 30 days); MAIL
COUMADIN TAB 2MG	Tier 2	QL (300 tabs / 30 days); MAIL
COUMADIN TAB 3MG	Tier 2	QL (300 ea / 30 days); MAIL
COUMADIN TAB 4MG	Tier 2	QL (300 ea / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
COUMADIN TAB 5MG	Tier 2	QL (300 tabs / 30 days); MAIL
COUMADIN TAB 6MG	Tier 2	QL (300 ea / 30 days); MAIL
COUMADIN TAB 7.5MG	Tier 2	QL (300 tabs / 30 days); MAIL
COUMADIN TAB 10MG	Tier 2	QL (300 tabs / 30 days); MAIL
<i>jantoven tab 1mg</i>	Tier 1	QL (300 ea / 30 days); MAIL
<i>jantoven tab 2.5mg</i>	Tier 1	QL (300 ea / 30 days); MAIL
<i>jantoven tab 2mg</i>	Tier 1	QL (300 ea / 30 days); MAIL
<i>jantoven tab 3mg</i>	Tier 1	QL (300 ea / 30 days); MAIL
<i>jantoven tab 4mg</i>	Tier 1	QL (300 ea / 30 days); MAIL
<i>jantoven tab 5mg</i>	Tier 1	QL (300 ea / 30 days); MAIL
<i>jantoven tab 6mg</i>	Tier 1	QL (300 ea / 30 days); MAIL
<i>jantoven tab 7.5mg</i>	Tier 1	QL (300 ea / 30 days); MAIL
<i>jantoven tab 10mg</i>	Tier 1	QL (300 ea / 30 days); MAIL
<i>warfarin sodium tab 1 mg</i>	Tier 1	QL (300 tabs / 30 days); MAIL
<i>warfarin sodium tab 2 mg</i>	Tier 1	QL (300 tabs / 30 days); MAIL
<i>warfarin sodium tab 2.5 mg</i>	Tier 1	QL (300 tabs / 30 days); MAIL
<i>warfarin sodium tab 3 mg</i>	Tier 1	QL (300 tabs / 30 days); MAIL
<i>warfarin sodium tab 4 mg</i>	Tier 1	QL (300 tabs / 30 days); MAIL
<i>warfarin sodium tab 5 mg</i>	Tier 1	QL (300 tabs / 30 days); MAIL
<i>warfarin sodium tab 6 mg</i>	Tier 1	QL (300 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>warfarin sodium tab 7.5 mg</i>	Tier 1	QL (300 tabs / 30 days); MAIL
<i>warfarin sodium tab 10 mg</i>	Tier 1	QL (300 tabs / 30 days); MAIL
<i>Direct Factor Xa Inhibitors</i>		
XARELTO TAB 10MG	Tier 3	PA; MAIL
XARELTO TAB 15MG	Tier 3	PA; MAIL
XARELTO TAB 20MG	Tier 3	PA; MAIL
<i>Heparins And Heparinoid-Like Agents</i>		
<i>enoxaparin sodium inj 30 mg/0.3ml</i>	Tier 4	QL (Max 7 days supply without PA; Max 0.6 per day); available at an in-network retail pharmacy
<i>enoxaparin sodium inj 40 mg/0.4ml</i>	Tier 4	QL (Max 7 days supply without PA; Max 0.8 per day); available at an in-network retail pharmacy
<i>enoxaparin sodium inj 60 mg/0.6ml</i>	Tier 4	QL (Max 7 days supply without PA; Max 1.2 per day); available at an in-network retail pharmacy
<i>enoxaparin sodium inj 80 mg/0.8ml</i>	Tier 4	QL (Max 7 days supply without PA; Max 1.6 per day); available at an in-network retail pharmacy
<i>enoxaparin sodium inj 100 mg/ml</i>	Tier 4	QL (Max 7 days supply without PA; Max 2 per day); available at an in-network retail pharmacy
<i>enoxaparin sodium inj 120 mg/0.8ml</i>	Tier 4	QL (Max 7 days supply without PA; Max 1.6 per day); available at an in-network retail pharmacy
<i>enoxaparin sodium inj 150 mg/ml</i>	Tier 4	QL (Max 7 days supply without PA; Max 2 per day); available at an in-network retail pharmacy
<i>enoxaparin sodium inj 300 mg/3ml</i>	Tier 4	QL (Max 7 days supply without PA); available at an in-network retail pharmacy

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Drug Name	Drug Tier	Requirements/Limits
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	Tier 4	PA; available at an in-network retail pharmacy
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	Tier 4	PA; available at an in-network retail pharmacy
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	Tier 4	PA; available at an in-network retail pharmacy
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	Tier 4	PA; available at an in-network retail pharmacy
FRAGMIN INJ 2500/0.2	Tier 4	PA; available at an in-network retail pharmacy
FRAGMIN INJ 5000/0.2	Tier 4	PA; available at an in-network retail pharmacy
FRAGMIN INJ 7500/0.3	Tier 4	PA; available at an in-network retail pharmacy
FRAGMIN INJ 10000/ML	Tier 4	PA; available at an in-network retail pharmacy
FRAGMIN INJ 12500UNT	Tier 4	PA; available at an in-network retail pharmacy
FRAGMIN INJ 15000UNT	Tier 4	PA; available at an in-network retail pharmacy
FRAGMIN INJ 18000UNT	Tier 4	PA; available at an in-network retail pharmacy

ANTICONVULSANTS***Anticonvulsants - Benzodiazepines***

<i>clobazam tab 10 mg</i>	Tier 1	PA
<i>clobazam tab 20 mg</i>	Tier 1	PA
<i>clonazepam tab 0.5 mg</i>	Tier 1	QL (300 tabs / 30 days)
<i>clonazepam tab 1 mg</i>	Tier 1	QL (300 tabs / 30 days)
<i>clonazepam tab 2 mg</i>	Tier 1	QL (300 tabs / 30 days)
<i>diazepam rectal gel delivery system 2.5 mg</i>	Tier 2	QL (2 kits / month)
<i>diazepam rectal gel delivery system 10 mg</i>	Tier 2	QL (2 kits / month)
<i>diazepam rectal gel delivery system 20 mg</i>	Tier 2	QL (2 kits / month)
ONFI TAB 5MG	Tier 3	PA
ONFI TAB 10MG	Tier 3	PA
ONFI TAB 20MG	Tier 3	PA

Anticonvulsants - Misc.

BANZEL SUS 40MG/ML	Tier 3	PA; MAIL
BANZEL TAB 200MG	Tier 3	PA; MAIL
BANZEL TAB 400MG	Tier 3	PA; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>carbamazepine cap er 12hr 100 mg</i>	Tier 1	QL (240 caps / 30 days); MAIL
<i>carbamazepine cap er 12hr 200 mg</i>	Tier 1	QL (240 caps / 30 days); MAIL
<i>carbamazepine cap er 12hr 300 mg</i>	Tier 1	QL (240 caps / 30 days); MAIL
<i>carbamazepine chew tab 100 mg</i>	Tier 1	QL (240 tabs / 30 days); MAIL
<i>carbamazepine susp 100 mg/5ml</i>	Tier 1	QL (1800 mL / 30 days); MAIL
<i>carbamazepine tab 200 mg</i>	Tier 1	QL (240 tabs / 30 days); MAIL
<i>carbamazepine tab er 12hr 100 mg</i>	Tier 1	QL (240 tabs / 30 days); MAIL
<i>carbamazepine tab er 12hr 200 mg</i>	Tier 1	QL (240 ea / 30 days); MAIL
<i>carbamazepine tab er 12hr 400 mg</i>	Tier 1	QL (240 ea / 30 days); MAIL
<i>epitol tab 200mg</i>	Tier 1	QL (240 tabs / 30 days); MAIL
<i>gabapentin cap 100 mg</i>	Tier 1	QL (300 caps / 30 days); MAIL
<i>gabapentin cap 300 mg</i>	Tier 1	QL (300 caps / 30 days); MAIL
<i>gabapentin cap 400 mg</i>	Tier 1	QL (270 caps / 30 days); MAIL
<i>gabapentin oral soln 250 mg/5ml</i>	Tier 1	QL (2100 mL / 30 days); MAIL
<i>gabapentin tab 600 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>gabapentin tab 800 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>lamotrigine tab 25 mg</i>	Tier 1	QL (300 tabs / 30 days); MAIL
<i>lamotrigine tab 100 mg</i>	Tier 1	QL (240 tabs / 30 days); MAIL
<i>lamotrigine tab 150 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>lamotrigine tab 200 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>lamotrigine tab chewable dispersible 5 mg</i>	Tier 1	QL (240 tabs / 30 days); MAIL
<i>lamotrigine tab chewable dispersible 25 mg</i>	Tier 1	QL (240 tabs / 30 days); MAIL
<i>levetiracetam oral soln 100 mg/ml</i>	Tier 1	QL (900 mL / 30 days); MAIL
<i>levetiracetam tab 250 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>levetiracetam tab 500 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>levetiracetam tab 750 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>levetiracetam tab 1000 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>levetiracetam tab er 24hr 500 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>levetiracetam tab er 24hr 750 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
LYRICA CAP 25MG	Tier 3	QL (90 caps / 30 days), PA
LYRICA CAP 50MG	Tier 3	QL (180 caps / 30 days), PA
LYRICA CAP 75MG	Tier 3	QL (240 caps / 30 days), PA
LYRICA CAP 100MG	Tier 3	QL (90 caps / 30 days), PA
LYRICA CAP 150MG	Tier 3	QL (90 caps / 30 days), PA
LYRICA CAP 200MG	Tier 3	QL (90 caps / 30 days), PA
LYRICA CAP 225MG	Tier 3	QL (60 caps / 30 days), PA
LYRICA CAP 300MG	Tier 3	QL (60 caps / 30 days), PA
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i>	Tier 2	QL (1200 mL / 30 days); MAIL
<i>oxcarbazepine tab 150 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>oxcarbazepine tab 300 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>oxcarbazepine tab 600 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
POTIGA TAB 50MG	Tier 2	PA
POTIGA TAB 200MG	Tier 2	PA
POTIGA TAB 400MG	Tier 2	PA
<i>primidone tab 50 mg</i>	Tier 1	QL (120 ea / 30 days); MAIL
<i>primidone tab 250 mg</i>	Tier 1	QL (120 ea / 30 days); MAIL
TEGRETOL-XR TAB 100MG	Tier 2	QL (240 tabs / 30 days); MAIL
<i>topiramate sprinkle cap 15 mg</i>	Tier 1	QL (240 caps / 30 days); MAIL
<i>topiramate sprinkle cap 25 mg</i>	Tier 1	QL (240 caps / 30 days); MAIL
<i>topiramate tab 25 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>topiramate tab 50 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>topiramate tab 100 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>topiramate tab 200 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
VIMPAT SOL 10MG/ML	Tier 2	PA
VIMPAT TAB 50MG	Tier 2	PA
VIMPAT TAB 100MG	Tier 2	PA
VIMPAT TAB 150MG	Tier 2	PA
VIMPAT TAB 200MG	Tier 2	PA
<i>zonisamide cap 25 mg</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>zonisamide cap 50 mg</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>zonisamide cap 100 mg</i>	Tier 1	QL (180 caps / 30 days); MAIL
Carbamates		
<i>felbamate susp 600 mg/5ml</i>	Tier 2	MAIL
<i>felbamate tab 400 mg</i>	Tier 2	QL (270 tabs / 30 days); MAIL
<i>felbamate tab 600 mg</i>	Tier 2	QL (180 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
GABA Modulators		
SABRIL TAB 500MG	Tier 4	QL (180 tabs / 30 days), PA
<i>tiagabine hcl tab 2 mg</i>	Tier 2	QL (840 tabs / 30 days), PA; MAIL
<i>tiagabine hcl tab 4 mg</i>	Tier 2	QL (420 tabs / 30 days), PA; MAIL
<i>vigabatrin powd pack 500 mg</i>	Tier 4	PA
Hydantoins		
DILANTIN CAP 30MG	Tier 2	QL (180 caps / 30 days); MAIL
<i>phenytoin chw 50mg</i>	Tier 1	QL (150 tabs / 30 days); MAIL
<i>phenytoin sodium extended cap 100 mg</i>	Tier 1	QL (180 ea / 30 days); MAIL
<i>phenytoin sodium extended cap 200 mg</i>	Tier 1	QL (180 caps / 30 days); MAIL
<i>phenytoin sodium extended cap 300 mg</i>	Tier 1	QL (180 caps / 30 days); MAIL
<i>phenytoin susp 125 mg/5ml</i>	Tier 1	QL (600 mL / 30 days); MAIL
Succinimides		
<i>ethosuximide cap 250 mg</i>	Tier 1	QL (180 caps / 30 days); MAIL
<i>ethosuximide soln 250 mg/5ml</i>	Tier 1	QL (900 mL / 30 days); MAIL
Valproic Acid		
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	Tier 1	QL (300 ea / 30 days); MAIL
<i>divalproex sodium tab delayed release 125 mg</i>	Tier 1	QL (450 tabs / 30 days); MAIL
<i>divalproex sodium tab delayed release 250 mg</i>	Tier 1	QL (300 tabs / 30 days); MAIL
<i>divalproex sodium tab delayed release 500 mg</i>	Tier 1	QL (300 tabs / 30 days); MAIL
<i>divalproex sodium tab er 24 hr 250 mg</i>	Tier 1	QL (300 tabs / 30 days); MAIL
<i>divalproex sodium tab er 24 hr 500 mg</i>	Tier 1	QL (240 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	Tier 1	QL (3000 mL / 30 days); MAIL
<i>valproic acid cap 250 mg</i>	Tier 1	QL (600 caps / 30 days); MAIL

ANTIDEPRESSANTS**Alpha-2 Receptor Antagonists (Tetracyclics)**

<i>mirtazapine tab 15 mg</i>	Tier 1	QL (30 ea / 30 days); MAIL
<i>mirtazapine tab 30 mg</i>	Tier 1	QL (120 ea / 30 days); MAIL
<i>mirtazapine tab 45 mg</i>	Tier 1	QL (30 ea / 30 days); MAIL

Antidepressants - Misc.

<i>bupropion hcl tab 75 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>bupropion hcl tab 100 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>bupropion hcl tab er 12hr 100 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>bupropion hcl tab er 12hr 150 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>bupropion hcl tab er 12hr 200 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>bupropion hcl tab er 24hr 150 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>bupropion hcl tab er 24hr 300 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>maprotiline hcl tab 25 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>maprotiline hcl tab 50 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>maprotiline hcl tab 75 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL

Modified Cyclics

<i>trazodone hcl tab 50 mg</i>	Tier 1	QL (60 ea / 30 days); MAIL
<i>trazodone hcl tab 100 mg</i>	Tier 1	QL (60 ea / 30 days); MAIL
<i>trazodone hcl tab 150 mg</i>	Tier 1	QL (60 ea / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
TRINTELLIX TAB 5MG	Tier 3	PA; MAIL
TRINTELLIX TAB 10MG	Tier 3	PA; MAIL
TRINTELLIX TAB 20MG	Tier 3	PA; MAIL
VIIBRYD KIT	Tier 3	PA; MAIL
VIIBRYD KIT STARTER	Tier 3	PA; MAIL
VIIBRYD TAB 10MG	Tier 3	PA; MAIL
VIIBRYD TAB 20MG	Tier 3	PA; MAIL
VIIBRYD TAB 40MG	Tier 3	PA; MAIL
<i>Monoamine Oxidase Inhibitors (MAOIs)</i>		
MARPLAN TAB 10MG	Tier 3	PA; MAIL
<i>phenelzine sulfate tab 15 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>tranylcypromine sulfate tab 10 mg</i>	Tier 2	QL (240 tabs / 30 days); MAIL
<i>Selective Serotonin Reuptake Inhibitors (SSRIs)</i>		
<i>citalopram hydrobromide oral soln 10 mg/5ml</i>	Tier 1	QL (600 mL / 30 days); MAIL
<i>citalopram hydrobromide tab 10 mg (base equiv)</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>citalopram hydrobromide tab 20 mg (base equiv)</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>citalopram hydrobromide tab 40 mg (base equiv)</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	Tier 1	MAIL
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	Tier 1	MAIL
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	Tier 1	MAIL
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	Tier 1	MAIL
<i>fluoxetine hcl cap 10 mg</i>	Tier 1	QL (90 caps / 30 days); MAIL
<i>fluoxetine hcl cap 20 mg</i>	Tier 1	QL (120 caps / 30 days); MAIL
<i>fluoxetine hcl solution 20 mg/5ml</i>	Tier 1	MAIL
<i>fluvoxamine maleate tab 25 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>fluvoxamine maleate tab 50 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>fluvoxamine maleate tab 100 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>paroxetine hcl tab 10 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>paroxetine hcl tab 20 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>paroxetine hcl tab 30 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>paroxetine hcl tab 40 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>sertraline hcl oral concentrate for solution 20 mg/ml</i>	Tier 1	QL (300 mL / 30 days); MAIL
<i>sertraline hcl tab 25 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>sertraline hcl tab 50 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>sertraline hcl tab 100 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)		
<i>duloxetine hcl cap 20 mg</i>	Tier 1	ST; MAIL; PRIOR USE VENLAFAXINE/VENLAFAXINE ER
<i>duloxetine hcl cap 30 mg</i>	Tier 1	QL (60 caps / 30 days), ST; MAIL; PRIOR USE VENLAFAXINE/VENLAFAXINE ER
<i>duloxetine hcl cap 60 mg</i>	Tier 1	QL (60 caps / 30 days), ST; MAIL; PRIOR USE VENLAFAXINE/VENLAFAXINE ER
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i>	Tier 1	QL (30 caps / 30 days); MAIL
<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>venlafaxine hcl tab 37.5 mg (base equivalent)</i>	Tier 1	QL (90 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>venlafaxine hcl tab 100 mg (base equivalent)</i>	Tier 1	QL (90 tabs / 30 days); MAIL
Tricyclic Agents		
<i>amitriptyline hcl tab 10 mg</i>	Tier 1	QL (180 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>amitriptyline hcl tab 25 mg</i>	Tier 1	QL (180 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>amitriptyline hcl tab 50 mg</i>	Tier 1	QL (120 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>amitriptyline hcl tab 75 mg</i>	Tier 1	QL (120 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>amitriptyline hcl tab 100 mg</i>	Tier 1	QL (90 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>amitriptyline hcl tab 150 mg</i>	Tier 1	QL (90 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>amoxapine tab 25 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>amoxapine tab 50 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>amoxapine tab 100 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>amoxapine tab 150 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>clomipramine hcl cap 25 mg</i>	Tier 2	QL (180 caps / 30 days); MAIL
<i>clomipramine hcl cap 50 mg</i>	Tier 2	QL (180 caps / 30 days); MAIL
<i>clomipramine hcl cap 75 mg</i>	Tier 2	QL (120 caps / 30 days); MAIL
<i>desipramine hcl tab 10 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>desipramine hcl tab 25 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>desipramine hcl tab 50 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>desipramine hcl tab 75 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>desipramine hcl tab 100 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>desipramine hcl tab 150 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>doxepin hcl cap 10 mg</i>	Tier 1	QL (90 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>doxepin hcl cap 25 mg</i>	Tier 1	QL (90 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>doxepin hcl cap 50 mg</i>	Tier 1	QL (90 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>doxepin hcl cap 75 mg</i>	Tier 1	QL (90 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>doxepin hcl cap 100 mg</i>	Tier 1	QL (90 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>doxepin hcl cap 150 mg</i>	Tier 1	QL (60 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>doxepin hcl conc 10 mg/ml</i>	Tier 1	AGE; MAIL; Covered for ages 64 and under
<i>imipramine hcl tab 10 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>imipramine hcl tab 25 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>imipramine hcl tab 50 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>nortriptyline hcl cap 10 mg</i>	Tier 1	QL (180 caps / 30 days); MAIL
<i>nortriptyline hcl cap 25 mg</i>	Tier 1	QL (180 caps / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>nortriptyline hcl cap 50 mg</i>	Tier 1	QL (120 caps / 30 days); MAIL
<i>nortriptyline hcl cap 75 mg</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>protriptyline hcl tab 5 mg</i>	Tier 2	QL (240 tabs / 30 days); MAIL
<i>protriptyline hcl tab 10 mg</i>	Tier 2	QL (240 tabs / 30 days); MAIL
<i>trimipramine maleate cap 25 mg</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>trimipramine maleate cap 50 mg</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>trimipramine maleate cap 100 mg</i>	Tier 1	QL (30 caps / 30 days); MAIL

ANTIDIABETICS**Alpha-Glucosidase Inhibitors**

<i>acarbose tab 25 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>acarbose tab 50 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>acarbose tab 100 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL

Antidiabetic - Amylin Analogs

SYMLINPEN 60 INJ 1000MCG	Tier 3	PA; MAIL
SYMLINPEN 120 INJ 1000MCG	Tier 3	PA; MAIL

Antidiabetic Combinations

<i>alogliptin-metformin hcl tab 12.5-500 mg</i>	Tier 2	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione for 90 days
<i>alogliptin-metformin hcl tab 12.5-1000 mg</i>	Tier 2	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione for 90 days

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Drug Name	Drug Tier	Requirements/Limits
<i>alogliptin-pioglitazone tab 12.5-15 mg</i>	Tier 2	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione for 90 days
<i>alogliptin-pioglitazone tab 12.5-30 mg</i>	Tier 2	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione for 90 days
<i>alogliptin-pioglitazone tab 12.5-45 mg</i>	Tier 2	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione for 90 days
<i>alogliptin-pioglitazone tab 25-15 mg</i>	Tier 2	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione for 90 days
<i>alogliptin-pioglitazone tab 25-30 mg</i>	Tier 2	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione for 90 days
<i>alogliptin-pioglitazone tab 25-45 mg</i>	Tier 2	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione for 90 days
<i>glyburide-metformin tab 1.25-250 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>glyburide-metformin tab 2.5-500 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>glyburide-metformin tab 5-500 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
KOMBIGLYZ XR TAB 2.5-1000	Tier 3	PA; MAIL
KOMBIGLYZ XR TAB 5-500MG	Tier 3	PA; MAIL
KOMBIGLYZ XR TAB 5-1000MG	Tier 3	PA; MAIL

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Drug Name	Drug Tier	Requirements/Limits
XIGDUO XR TAB 2.5-1000	Tier 3	QL (60 tabs / 30 days), ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione AND Alogliptin for 90 days
XIGDUO XR TAB 5-500MG	Tier 3	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione AND Alogliptin for 90 days
XIGDUO XR TAB 5-1000MG	Tier 3	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione AND Alogliptin for 90 days
XIGDUO XR TAB 10-500MG	Tier 3	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione AND Alogliptin for 90 days
XIGDUO XR TAB 10-1000	Tier 3	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione AND Alogliptin for 90 days
<i>Biguanides</i>		
<i>metformin hcl tab 500 mg</i>	Tier 1	QL (150 tabs / 30 days); MAIL
<i>metformin hcl tab 850 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>metformin hcl tab 1000 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>metformin hcl tab er 24hr 500 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>metformin hcl tab er 24hr 750 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>DIABETIC OTHER</i>		
BAQSIMI ONE POW 3MG/DOSE	Tier 2	QL (2 ea / 30 days)
<i>Diabetic Other</i>		
CVS GLUCOSE CHW FRUIT	Tier 1	OTC; MAIL

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Tier 2 = Non-Preferred generics; Preferred brand name drugs

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Drug Name	Drug Tier	Requirements/Limits
CVS GLUCOSE CHW GRAPE	Tier 1	OTC; MAIL
CVS GLUCOSE CHW TROP BLS	Tier 1	OTC; MAIL
DEX4 CHW FRUIT	Tier 1	OTC; MAIL
DEX4 CHW GRAPE	Tier 1	OTC; MAIL
DEX4 CHW ORANGE	Tier 1	OTC; MAIL
DEX4 CHW RASPBERR	Tier 1	OTC; MAIL
DEX4 CHW RASPBERRY	Tier 1	OTC; MAIL
DEX4 CHW SOUR APL	Tier 1	OTC; MAIL
DEX4 CHW TROP FRT	Tier 1	OTC; MAIL
DEX4 CHW WATERMLN	Tier 1	OTC; MAIL
DEX4 NATURAL CHW ORANGE	Tier 1	OTC; MAIL
DEX4 POUCH CHW PACK	Tier 1	OTC; MAIL
GLUCAGON KIT 1MG	Tier 2	QL (1 kit / 25 days); MAIL
GLUCOSE CHW FRT PNCH	Tier 1	OTC; MAIL
GLUCOSE CHW GRAPE	Tier 1	OTC; MAIL
GLUCOSE CHW RASPBRRY	Tier 1	OTC; MAIL
GLUCOSE CHW TROP FRT	Tier 1	OTC; MAIL
GNP GLUCOSE CHW GRAPE	Tier 1	OTC; MAIL
GNP GLUCOSE CHW ORANGE	Tier 1	OTC; MAIL
GNP GLUCOSE CHW RASPBERRY	Tier 1	OTC; MAIL
GNP GLUCOSE CHW WATERMLN	Tier 1	OTC; MAIL
HM GLUCOSE CHW ORANGE	Tier 1	OTC; MAIL
HM GLUCOSE CHW RASPBERRY	Tier 1	OTC; MAIL
KROG GLUCOSE CHW ORANGE	Tier 1	OTC; MAIL
KROG GLUCOSE CHW RASPBERRY	Tier 1	OTC; MAIL
KROG GLUCOSE CHW TROP FRT	Tier 1	OTC; MAIL
KROG GLUCOSE CHW WATERMLN	Tier 1	OTC; MAIL
PX GLUCOSE CHW FRUIT	Tier 1	OTC; MAIL
PX GLUCOSE CHW ORANGE	Tier 1	OTC; MAIL
PX GLUCOSE CHW RASPBERRY	Tier 1	OTC; MAIL
PX GLUCOSE CHW SOUR APL	Tier 1	OTC; MAIL
RA GLUCOSE CHW GRAPE	Tier 1	OTC; MAIL
RA GLUCOSE CHW ORANGE	Tier 1	OTC; MAIL
RA GLUCOSE CHW RASPBERRY	Tier 1	OTC; MAIL
RA GLUCOSE CHW TROP FRT	Tier 1	OTC; MAIL
SM GLUCOSE CHW ORANGE	Tier 1	OTC; MAIL
SM GLUCOSE CHW RASPBERRY	Tier 1	OTC; MAIL
TGT GLUCOSE CHW GRAPE	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
TGT GLUCOSE CHW ORANGE	Tier 1	OTC; MAIL
TGT GLUCOSE CHW RASPBERRY	Tier 1	OTC; MAIL
UP&UP CHW GRAPE	Tier 1	OTC; MAIL
UP&UP CHW ORANGE	Tier 1	OTC; MAIL
UP&UP CHW RASPBERRY	Tier 1	OTC; MAIL
VP GLUCOSE CHW FRUIT	Tier 1	OTC; MAIL
VP GLUCOSE CHW GRAPE	Tier 1	OTC; MAIL
<i>Dipeptidyl Peptidase-4 (DPP-4) Inhibitors</i>		
<i>alogliptin benzoate tab 6.25 mg (base equiv)</i>	Tier 2	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione for 90 days
<i>alogliptin benzoate tab 12.5 mg (base equiv)</i>	Tier 2	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione for 90 days
<i>alogliptin benzoate tab 25 mg (base equiv)</i>	Tier 2	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione for 90 days
ONGLYZA TAB 2.5MG	Tier 3	PA; MAIL
ONGLYZA TAB 5MG	Tier 3	PA; MAIL
<i>Incretin Mimetic Agents (GLP-1 Receptor Agonists)</i>		
BYETTA INJ 5MCG	Tier 2	QL (1 pen / 25 days), PA; MAIL
BYETTA INJ 10MCG	Tier 2	QL (1 pen / 25 days), PA; MAIL
<i>Insulin</i>		
BASAGLAR KWIKPEN	Tier 2	QL (10 pens / 30 days); MAIL
HUMALOG INJ 100/ML	Tier 3	QL (10 cartridges / 30 days), ST; MAIL; PRIOR USE NOVOLOG
HUMALOG INJ 100/ML	Tier 3	QL (30 mL / 30 days), ST; MAIL; PRIOR USE NOVOLOG

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Drug Name	Drug Tier	Requirements/Limits
HUMALOG KWIK INJ 100/ML	Tier 3	QL (10 pens / 30 days), ST; MAIL; PRIOR USE NOVOLOG
HUMALOG MIX INJ 50/50	Tier 3	QL (30 mL / 30 days), ST; MAIL; PRIOR USE NOVOLOG
HUMALOG MIX INJ 50/50KWP	Tier 3	QL (10 pens / 30 days), ST; MAIL; PRIOR USE NOVOLOG
HUMALOG MIX INJ 75/25KWP	Tier 3	QL (10 pens / 30 days), ST; MAIL; PRIOR USE NOVOLOG
HUMALOG MIX SUS 75/25	Tier 3	QL (30 mL / 30 days), ST; MAIL; PRIOR USE NOVOLOG
HUMULIN INJ 70/30	Tier 3	OTC, QL (30 mL / 30 days), ST; MAIL; PRIOR USE NOVOLIN
HUMULIN INJ 70/30KWP	Tier 3	OTC, QL (10 pens / 30 days), ST; MAIL; PRIOR USE NOVOLIN
HUMULIN N INJ U-100	Tier 3	OTC, QL (30 mL / 30 days), ST; MAIL; PRIOR USE NOVOLIN
HUMULIN N INJ U-100KWP	Tier 3	OTC, QL (10 pens / 30 days), ST; MAIL; PRIOR USE NOVOLIN
HUMULIN R INJ U-100	Tier 3	OTC, QL (3 vials / 30 days), ST; MAIL; PRIOR USE NOVOLIN
HUMULIN R INJ U-500	Tier 3	QL (1.5 vials / 30 days), ST; MAIL; PRIOR USE NOVOLIN
NOVOLIN INJ 70/30	Tier 2	OTC, QL (30 mL / 30 days); MAIL
NOVOLIN N INJ U-100	Tier 2	OTC, QL (30 mL / 30 days); MAIL
NOVOLIN R INJ PENFILL	Tier 2	OTC, QL (30 mL / 30 days); MAIL
NOVOLIN R INJ U-100	Tier 2	OTC, QL (3 vials / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
NOVOLOG INJ 100/ML	Tier 2	QL (3 vials / 30 days); MAIL
NOVOLOG INJ FLEXPEN	Tier 2	QL (10 pens / 30 days); MAIL
NOVOLOG INJ PENFILL	Tier 2	QL (10 cartridges / 30 days); MAIL
NOVOLOG MIX INJ 70/30	Tier 2	QL (30 mL / 30 days); MAIL
NOVOLOG MIX INJ FLEXPEN	Tier 2	QL (10 pens / 30 days); MAIL
Insulin Sensitizing Agents		
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>pioglitazone hcl tab 30 mg (base equiv)</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>pioglitazone hcl tab 45 mg (base equiv)</i>	Tier 1	QL (30 tabs / 30 days); MAIL
Meglitinide Analogues		
<i>nateglinide tab 60 mg</i>	Tier 1	MAIL
<i>nateglinide tab 120 mg</i>	Tier 1	MAIL
<i>repaglinide tab 0.5 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>repaglinide tab 1 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>repaglinide tab 2 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
Sulfonylureas		
<i>chlorpropamide tab 100 mg</i>	Tier 1	QL (120 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>chlorpropamide tab 250 mg</i>	Tier 1	QL (90 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>glimepiride tab 1 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>glimepiride tab 2 mg</i>	Tier 1	QL (120 ea / 30 days); MAIL
<i>glimepiride tab 4 mg</i>	Tier 1	QL (90 ea / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>glipizide tab 5 mg</i>	Tier 1	QL (240 tabs / 30 days); MAIL
<i>glipizide tab 10 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>glipizide tab er 24hr 2.5 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>glipizide tab er 24hr 5 mg</i>	Tier 1	QL (60 ea / 30 days); MAIL
<i>glipizide tab er 24hr 10 mg</i>	Tier 1	QL (60 ea / 30 days); MAIL
<i>glipizide xl tab 2.5mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>glipizide xl tab 5mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>glipizide xl tab 10mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>glyburide micronized tab 1.5 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>glyburide micronized tab 3 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>glyburide micronized tab 6 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>glyburide tab 1.25 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>glyburide tab 2.5 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>glyburide tab 5 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>tolbutamide tab 500 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL

ANTIDIARRHEALS***Antidiarrheal Agents - Misc.***

<i>bismatrol chw 262mg</i>	Tier 1	OTC; MAIL
<i>bismatrol sus 262/15ml</i>	Tier 1	OTC; MAIL
<i>bismatrol sus 525/15ml</i>	Tier 1	OTC; MAIL
<i>bismuth subsalicylate chew tab 262 mg</i>	Tier 1	OTC; MAIL
<i>cvs bismuth chw 262mg</i>	Tier 1	OTC; MAIL
<i>cvs bismuth sus max str</i>	Tier 1	OTC; MAIL
<i>cvs bismuth tab 262mg</i>	Tier 1	OTC; MAIL
<i>diarrhea rel sus 262/15ml</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>diarrhea sus 262/15ml</i>	Tier 1	OTC; MAIL
<i>diotame chw 262mg</i>	Tier 1	OTC; MAIL
<i>eq stomach chw 262mg</i>	Tier 1	OTC; MAIL
<i>eq stomach chw 262mg</i>	Tier 1	OTC; MAIL
<i>gnp k-pec sus 262/15ml</i>	Tier 1	OTC; MAIL
<i>kao-tin sus 262/15ml</i>	Tier 1	OTC; MAIL
<i>kaopectate sus 262/15ml</i>	Tier 1	OTC; MAIL
<i>medi-bismuth chw 262mg</i>	Tier 1	OTC; MAIL
<i>peptic relf chw 262mg</i>	Tier 1	OTC; MAIL
<i>peptic relf sus 262/15ml</i>	Tier 1	OTC; MAIL
<i>pink bismuth chw 262mg</i>	Tier 1	OTC; MAIL
<i>pink bismuth sus 262/15ml</i>	Tier 1	OTC; MAIL
<i>pink bismuth sus max str</i>	Tier 1	OTC; MAIL
<i>pink bismuth tab 262mg</i>	Tier 1	OTC; MAIL
<i>px stomach chw 262mg</i>	Tier 1	OTC; MAIL
<i>px stomach sus 262/15ml</i>	Tier 1	OTC; MAIL
<i>px stomach sus 525/15ml</i>	Tier 1	OTC; MAIL
<i>ra k-pec sus 262/15ml</i>	Tier 1	OTC; MAIL
<i>ra pink bism chw 262mg</i>	Tier 1	OTC; MAIL
<i>ra pink bism tab 262mg</i>	Tier 1	OTC; MAIL
<i>sm stomach sus 262/15ml</i>	Tier 1	OTC; MAIL
<i>sm stomach sus 525/30ml</i>	Tier 1	OTC; MAIL
<i>soothe chw 262mg</i>	Tier 1	OTC; MAIL
<i>soothe sus 262/15ml</i>	Tier 1	OTC; MAIL
<i>soothe sus 525/15ml</i>	Tier 1	OTC; MAIL
<i>soothe tab 262mg</i>	Tier 1	OTC; MAIL
<i>stomach relf chw 262mg</i>	Tier 1	OTC; MAIL
<i>stomach relf sus 262/15ml</i>	Tier 1	OTC; MAIL
<i>stomach relf sus 524/30ml</i>	Tier 1	OTC; MAIL
<i>stomach relf sus 525/15ml</i>	Tier 1	OTC; MAIL
<i>stomach relf sus 527/30ml</i>	Tier 1	OTC; MAIL
<i>stomach relf sus plus</i>	Tier 1	OTC; MAIL
<i>stomach relf tab 262mg</i>	Tier 1	OTC; MAIL
<i>stomach rlf tab 262mg</i>	Tier 1	OTC; MAIL
Antiperistaltic Agents		
<i>anti-diarrhe cap 2mg</i>	Tier 1	OTC, QL (240 caps / 30 days); MAIL
<i>anti-diarrhe liq 1mg/5ml</i>	Tier 1	OTC; MAIL
<i>anti-diarrhe tab 2mg</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>diamode tab 2mg</i>	Tier 1	OTC; MAIL
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	Tier 1	
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	Tier 1	QL (240 tabs / 30 days)
<i>kls anti-dia tab 2mg</i>	Tier 1	OTC; MAIL
<i>loperamide cap 2mg</i>	Tier 1	OTC, QL (240 caps / 30 days); MAIL
<i>loperamide hcl liq 1 mg/5ml (0.2 mg/ml)</i>	Tier 1	OTC; MAIL
<i>loperamide sus 1mg/7.5</i>	Tier 1	OTC; MAIL
<i>loperamide tab 2mg</i>	Tier 1	OTC; MAIL
<i>sm anti-diar tab 2mg</i>	Tier 1	OTC; MAIL

ANTIDOTES**Antidotes - Chelating Agents**

CHEMET CAP 100MG	Tier 3	QL (630 caps / 30 days), PA; MAIL
EXJADE TAB 125MG	Tier 4	PA
EXJADE TAB 250MG	Tier 4	PA
EXJADE TAB 500MG	Tier 4	PA

Opioid Antagonists

<i>naloxone hcl soln cartridge 0.4 mg/ml</i>	Tier 1	
<i>naloxone hcl soln prefilled syringe 2 mg/2ml</i>	Tier 1	
<i>naltrexone hcl tab 50 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
NARCAN SPR	Tier 2	

ANTIEMETICS**5-HT3 Receptor Antagonists**

<i>granisetron hcl tab 1 mg</i>	Tier 2	QL (60 tabs / 30 days); MAIL
<i>ondansetron hcl inj 4 mg/2ml (2 mg/ml)</i>	Tier 1	QL (375 vials / 30 days); MAIL
<i>ondansetron hcl oral soln 4 mg/5ml</i>	Tier 1	PA; MAIL
<i>ondansetron hcl tab 4 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>ondansetron hcl tab 8 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>ondansetron orally disintegrating tab 4 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>ondansetron orally disintegrating tab 8 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
Antiemetics - Anticholinergic		
<i>dimenhydrinate tab 50 mg</i>	Tier 1	OTC; MAIL
<i>dramamine tab 25mg</i>	Tier 1	OTC, QL (120 ea / 30 days); MAIL
<i>dramamine tab 25mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>driminate tab 50mg</i>	Tier 1	OTC; MAIL
<i>meclizine hcl chew tab 25 mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>meclizine hcl tab 12.5 mg</i>	Tier 1	QL (120 ea / 30 days); MAIL
<i>meclizine hcl tab 25 mg</i>	Tier 1	QL (120 ea / 30 days); MAIL
<i>motion relf tab 25mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>motion sick chw 25mg</i>	Tier 1	OTC, QL (120 ea / 30 days); MAIL
<i>motion sick tab 25mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>motion sick tab 50mg</i>	Tier 1	OTC; MAIL
<i>scopolamine td patch 72hr 1 mg/3days</i>	Tier 2	PA; AGE; MAIL; Covered for ages 64 and under
<i>trav-tabs tab 50mg</i>	Tier 1	OTC; MAIL
<i>travel sick chw 25mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>travel sick tab 50mg</i>	Tier 1	OTC; MAIL
<i>wal-dram ii tab 25mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>wal-dram tab 50mg</i>	Tier 1	OTC; MAIL
Antiemetics - Miscellaneous		
<i>anti-nausea liq</i>	Tier 1	OTC; MAIL
<i>anti-nausea sol</i>	Tier 1	OTC; MAIL
<i>anti-nausea sol cherry</i>	Tier 1	OTC; MAIL
<i>anti-nausea sol liquid</i>	Tier 1	OTC; MAIL
<i>anti-nausea/ sol rekemat</i>	Tier 1	OTC; MAIL
<i>dronabinol cap 2.5 mg</i>	Tier 2	QL (180 ea / 30 days)
<i>dronabinol cap 5 mg</i>	Tier 2	QL (180 caps / 30 days)
<i>dronabinol cap 10 mg</i>	Tier 2	

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Drug Name	Drug Tier	Requirements/Limits
<i>formula em sol</i>	Tier 1	OTC; MAIL
<i>little tummy sol nausea</i>	Tier 1	OTC; MAIL
<i>nausea contr sol</i>	Tier 1	OTC; MAIL
<i>nausea liq relief</i>	Tier 1	OTC; MAIL

Substance P/Neurokinin 1 (NK1) Receptor Antagonists

<i>aprepitant capsule 40 mg</i>	Tier 2	PA; MAIL
<i>aprepitant capsule 80 mg</i>	Tier 2	PA; MAIL
<i>aprepitant capsule 125 mg</i>	Tier 2	PA; MAIL
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	Tier 2	PA; MAIL

ANTIFUNGALS

Antifungals

<i>griseofulvin microsize susp 125 mg/5ml</i>	Tier 1	QL (1200 mL / 30 days)
<i>nystatin tab 500000 unit</i>	Tier 1	QL (240 tabs / 30 days)
<i>terbinafine hcl tab 250 mg</i>	Tier 1	QL (Max day supply 28; max 6 fills per year)

Imidazole-Related Antifungals

<i>fluconazole for susp 10 mg/ml</i>	Tier 1	QL (35mL per month); AGE; Covered for ages 12 and under
<i>fluconazole for susp 40 mg/ml</i>	Tier 1	QL (35mL per month); AGE; Covered for ages 12 and under
<i>fluconazole tab 50 mg</i>	Tier 1	QL (60 tabs / 30 days)
<i>fluconazole tab 100 mg</i>	Tier 1	QL (21 tabs / 25 days)
<i>fluconazole tab 150 mg</i>	Tier 1	QL (Max 1 fill per month)
<i>fluconazole tab 200 mg</i>	Tier 1	QL (21 tabs / 25 days)
<i>itraconazole cap 100 mg</i>	Tier 2	QL (120 caps / 30 days)
<i>ketoconazole tab 200 mg</i>	Tier 1	QL (60 tabs / 30 days)

ANTI-HISTAMINES

Antihistamines - Alkylamines

<i>aller-chlor syp 2mg/5ml</i>	Tier 1	OTC; MAIL
<i>allergy 4 hr tab 4mg</i>	Tier 1	OTC; MAIL
<i>allergy relf tab 4mg</i>	Tier 1	OTC; MAIL
<i>allergy relf tab 12mg cr</i>	Tier 1	OTC, QL (60 ea / 30 days); MAIL
<i>allergy tab 4mg</i>	Tier 1	OTC; MAIL
<i>allergy-time tab 4mg</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>chlor-phenir tab 4mg</i>	Tier 1	OTC; MAIL
<i>chlorhist tab 4mg</i>	Tier 1	OTC; MAIL
<i>chlorpheniramine maleate tab 4 mg</i>	Tier 1	OTC; MAIL
<i>chlorpheniramine maleate tab er 12 mg</i>	Tier 1	OTC, QL (60 ea / 30 days); MAIL
<i>cvs allergy tab 4mg</i>	Tier 1	OTC; MAIL
<i>diabet tuss syp allergy</i>	Tier 1	OTC; MAIL
<i>ed chlorped syp jr</i>	Tier 1	OTC; MAIL
<i>ed-chlortan tab 4mg</i>	Tier 1	OTC; MAIL
<i>eq chlortabs tab 4mg</i>	Tier 1	OTC; MAIL
<i>eq allergy tab 4mg</i>	Tier 1	OTC; MAIL
<i>gnp allergy tab 4mg</i>	Tier 1	OTC; MAIL
<i>hm allergy tab 4mg</i>	Tier 1	OTC; MAIL
<i>pharbechlor tab 4mg</i>	Tier 1	OTC; MAIL
<i>ra chlorphen tab 4mg</i>	Tier 1	OTC; MAIL
<i>sm allergy tab 4mg</i>	Tier 1	OTC; MAIL
<i>wal-finate tab 4mg</i>	Tier 1	OTC; MAIL
Antihistamines - Ethanolamines		
<i>a-s pls alrg tab 25mg</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under
<i>aler-cap cap 25mg</i>	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
ALER-DRYL TAB 50MG	Tier 1	OTC, QL (180 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>alertab tab 25mg</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under
<i>allergy 25mg tab dye-free</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under
<i>allergy cap 25mg</i>	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and under

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Drug Name	Drug Tier	Requirements/Limits
<i>allergy chld liq 12.5/5ml</i>	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and under
<i>allergy liq 12.5/5ml</i>	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and under
<i>allergy med cap 25mg</i>	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>allergy med liq 12.5/5ml</i>	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and under
<i>allergy medi tab 25mg</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under
<i>allergy rel elx 12.5/5ml</i>	Tier 1	OTC, QL (2400 mL / 30 days); MAIL; Covered for ages 12 and under
<i>allergy rel tab 25mg</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under
<i>allergy relf cap 25mg</i>	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>allergy relf liq 12.5/5ml</i>	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and under
<i>allergy relf liq 50/20ml</i>	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and under
<i>allergy relf tab 1.34mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>allergy relf tab 25mg</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under
<i>allergy tab 25mg</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under

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Drug Name	Drug Tier	Requirements/Limits
<i>allerhist-1 tab 1.34mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>allrgy melts tab 12.5mg</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under
<i>allrgy relf tab 12.5mg</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under
<i>altaryl syp 12.5/5ml</i>	Tier 1	OTC, QL (2400 mL / 30 days); MAIL; Covered for ages 12 and under
<i>anti-hist tab 25mg</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under
<i>banophen cap 25mg</i>	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>banophen cap 50mg</i>	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>banophen liq 12.5/5ml</i>	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and under
<i>banophen tab 25mg</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under
<i>carbinoxamine maleate soln 4 mg/5ml</i>	Tier 1	MAIL
<i>carbinoxamine maleate tab 4 mg</i>	Tier 1	MAIL
<i>chld allergy liq 12.5/5ml</i>	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and under
<i>clemastine fumarate syrup 0.67 mg/5ml (0.5 mg/5ml base eq)</i>	Tier 1	QL (900 mL / 30 days); MAIL; Covered for ages 12 and under
<i>clemastine fumarate tab 1.34 mg (1 mg base equiv)</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>clemastine fumarate tab 2.68 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>comp allergy cap 25mg</i>	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>comp allergy tab 25mg</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under
<i>comp allergy tab 25mg med</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under
<i>comp allergy tab 25mg rlf</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under
<i>cvs allergy cap 25mg</i>	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>cvs allergy chw 12.5mg</i>	Tier 1	OTC; MAIL; Covered for ages 12 and under
<i>cvs allergy liq 12.5/5ml</i>	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and under
<i>cvs allergy tab 25mg</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under
<i>dayhist alrg tab 12 hour</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>diphedryl liq 12.5/5ml</i>	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and under
<i>diphen tab 25mg</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under
<i>diphenhist cap 25mg</i>	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>diphenhist liq 12.5/5ml</i>	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and under

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Drug Name	Drug Tier	Requirements/Limits
<i>diphenhydram cap 50mg</i>	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>diphenhydramine hcl cap 25 mg</i>	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>diphenhydramine hcl elixir 12.5 mg/5ml</i>	Tier 1	QL (2400 mL / 30 days); MAIL; Covered for ages 12 and under
<i>diphenhydramine hcl inj 50 mg/ml</i>	Tier 1	AGE; MAIL; Covered for ages 64 and under
<i>diphenhydramine hcl tab 25 mg</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under
<i>dytuss syp 12.5/5ml</i>	Tier 1	QL (2400 mL / 30 days); MAIL; Covered for ages 12 and under
<i>eq allergy cap 25mg</i>	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>eq dayhist tab 1.34mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>eq1 allergy tab 25mg</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under
<i>genahist cap 25mg</i>	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>geri-dryl cap 25mg</i>	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>geri-dryl tab 25mg</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under

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Drug Name	Drug Tier	Requirements/Limits
<i>gnp allergy cap 25mg</i>	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>gnp allergy chw 12.5mg</i>	Tier 1	OTC; MAIL; Covered for ages 12 and under
<i>gnp allergy tab 25mg</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under
<i>gnp dayhist tab 1.34mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>hm allergy tab 25mg</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under
<i>kls allergy tab 25mg</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under
<i>medi-phedryl cap 25mg</i>	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>ormir cap 50mg</i>	Tier 1	OTC; AGE; MAIL
<i>pediacare al liq 12.5/5ml</i>	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and under
<i>pharbedryl cap 25mg</i>	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>pharbedryl cap 50mg</i>	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>px allergy cap 25mg</i>	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>px allergy tab 25mg</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under

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Drug Name	Drug Tier	Requirements/Limits
<i>px dayhist tab 1.34mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>q-dryl cap 25mg</i>	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>q-dryl liq 12.5/5ml</i>	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and under
<i>quenalin syp 12.5/5ml</i>	Tier 1	OTC, QL (2400 mL / 30 days); MAIL; Covered for ages 12 and under
<i>ra allergy tab 25mg</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under
<i>sb allergy tab 25mg med</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under
<i>scot-tussin liq 12.5/5ml</i>	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and under
<i>siladryl alr liq 12.5/5ml</i>	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and under
<i>silphen coug syp 12.5/5ml</i>	Tier 1	OTC, QL (2400 mL / 30 days); MAIL; Covered for ages 12 and under
<i>sm allergy tab 25mg</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under
<i>total allerg liq 12.5/5ml</i>	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and under
<i>total allerg tab 25mg</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under
<i>wal-dryl alr tab 12.5mg</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under

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Drug Name	Drug Tier	Requirements/Limits
<i>wal-dryl cap 25mg</i>	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>wal-dryl liq 12.5/5ml</i>	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and under
<i>wal-dryl tab 25mg</i>	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and under
<i>wal-hist tab 1.34mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>Antihistamines - Non-Sedating</i>		
<i>alavert tab 10mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL; Covered for ages 12 and under
<i>all day allg sol 1mg/ml</i>	Tier 1	OTC, QL (300 mL / 30 days); MAIL; Covered for ages 12 and under
<i>all day allg sol 5mg/5ml</i>	Tier 1	OTC, QL (300 mL / 30 days); MAIL; Covered for ages 12 and under
<i>all day allg tab 10mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ALLEGRA ALRG TAB 30MG	Tier 2	OTC, QL (60 tabs / 30 days); MAIL
<i>aller-ease tab 60mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>aller-tec sol 1mg/ml</i>	Tier 1	OTC, QL (300 mL / 30 days); MAIL; Covered for ages 12 and under
<i>aller-tec tab 10mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>allerclear tab 10mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>allergy chld sol 1mg/ml</i>	Tier 1	OTC, QL (300 mL / 30 days); MAIL; Covered for ages 12 and under
<i>allergy comp sol 1mg/ml</i>	Tier 1	OTC, QL (300 mL / 30 days); MAIL; Covered for ages 12 and under

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Drug Name	Drug Tier	Requirements/Limits
<i>allergy rel sol 1mg/ml</i>	Tier 1	OTC, QL (300 mL / 30 days); MAIL; Covered for ages 12 and under
<i>allergy rel tab 10mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>allergy relf sol 5mg/5ml</i>	Tier 1	OTC, QL (300 mL / 30 days); MAIL; Covered for ages 12 and under
<i>allergy relf syp 5mg/5ml</i>	Tier 1	OTC, QL (300 mL / 30 days); MAIL; Covered for ages 12 and under
<i>allergy relf tab 10mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>allergy relf tab 10mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL; Covered for ages 12 and under
<i>allergy relf tab 60mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>cetirizine hcl tab 5 mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>cetirizine hcl tab 10 mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>cetirizine sol 5mg/5ml</i>	Tier 1	OTC, QL (300 mL / 30 days); MAIL; Covered for ages 12 and under
<i>cvs allergy tab 10mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>eql all day tab allergy</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>fexofenadine hcl tab 60 mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>fexofenadine hcl tab 180 mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>gnp all day tab allergy</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>kp loratadin tab 10mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)</i>	Tier 1	MAIL
<i>levocetirizine dihydrochloride tab 5 mg</i>	Tier 1	MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>loradamed tab 10mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>loratadine syp 5mg/5ml</i>	Tier 1	OTC, QL (300 mL / 30 days); MAIL; Covered for ages 12 and under
<i>loratadine tab 10 mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>loratadine tab 10mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL; Covered for ages 12 and under
<i>qc allergy tab 10mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ra cetirizin tab 10mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>sb allergy tab 10mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>sm all day tab allergy</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>triaminic tab 10mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL; Covered for ages 12 and under
<i>wal-fex alrg tab 60mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>wal-itin syp 5mg/5ml</i>	Tier 1	OTC, QL (300 mL / 30 days); MAIL; Covered for ages 12 and under
<i>wal-itin tab 10mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>wal-itin tab 10mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL; Covered for ages 12 and under
<i>wal-vert tab 10mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL; Covered for ages 12 and under
<i>wal-zyr sol 1mg/ml</i>	Tier 1	OTC, QL (300 mL / 30 days); MAIL; Covered for ages 12 and under
<i>wal-zyr sol 5mg/5ml</i>	Tier 1	OTC, QL (300 mL / 30 days); MAIL; Covered for ages 12 and under

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Drug Name	Drug Tier	Requirements/Limits
<i>wal-zyr tab 10mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>Antihistamines - Phenothiazines</i>		
<i>phenadoz sup 12.5mg</i>	Tier 2	QL (240 supp / 30 days); AGE; MAIL; Covered for ages 2-64
<i>phenergan sup 25mg</i>	Tier 2	QL (240 supp / 30 days); AGE; MAIL; Covered for ages 2-64
<i>promethazine hcl inj 25 mg/ml</i>	Tier 1	QL (3000 vials / 30 days); AGE; MAIL; Covered for ages 2-64
<i>promethazine hcl suppos 12.5 mg</i>	Tier 2	QL (240 supp / 30 days); AGE; MAIL; Covered for ages 2-64
<i>promethazine hcl suppos 25 mg</i>	Tier 2	QL (240 supp / 30 days); AGE; MAIL; Covered for ages 2-64
<i>promethazine hcl syrup 6.25 mg/5ml</i>	Tier 1	QL (3000 mL / 30 days); AGE; MAIL; Covered for ages 2-64
<i>promethazine hcl tab 12.5 mg</i>	Tier 1	QL (60 tabs / 30 days); AGE; MAIL; Covered for ages 2-64
<i>promethazine hcl tab 25 mg</i>	Tier 1	QL (60 tabs / 30 days); AGE; MAIL; Covered for ages 2-64
<i>promethazine hcl tab 50 mg</i>	Tier 1	QL (60 tabs / 30 days); AGE; MAIL; Covered for ages 2-64
<i>promethegan sup 12.5mg</i>	Tier 2	QL (240 supp / 30 days); AGE; MAIL; Covered for ages 2-64
<i>promethegan sup 25mg</i>	Tier 2	QL (240 supp / 30 days); AGE; MAIL; Covered for ages 2-64
<i>promethegan sup 50mg</i>	Tier 2	QL (180 supp / 30 days), PA; AGE; MAIL; Covered for ages 2-64

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Drug Name	Drug Tier	Requirements/Limits
Antihistamines - Piperidines		
<i>cyproheptadine hcl syrup 2 mg/5ml</i>	Tier 1	QL (600 mL / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>cyproheptadine hcl tab 4 mg</i>	Tier 1	QL (180 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
ANTIHYPERLIPIDEMICS		
Bile Acid Sequestrants		
<i>cholestyramine light powder 4 gm/dose</i>	Tier 1	QL (240 gm / 25 days); USE BULK POWDER; MAIL
<i>cholestyramine powder 4 gm/dose</i>	Tier 1	QL (1440 gm / 30 days); USE BULK POWDER; MAIL
<i>colestipol hcl tab 1 gm</i>	Tier 1	QL (480 tabs / 30 days); MAIL
<i>prevalite pow 4gm</i>	Tier 1	QL (240 gm / 25 days); USE BULK POWDER; MAIL
Fibric Acid Derivatives		
<i>choline fenofibrate cap dr 45 mg (fenofibric acid equiv)</i>	Tier 1	QL (30 caps / 30 days); MAIL
<i>fenofibrate micronized cap 43 mg</i>	Tier 1	QL (30 caps / 30 days); MAIL
<i>fenofibrate micronized cap 67 mg</i>	Tier 1	QL (30 caps / 30 days); MAIL
<i>fenofibrate micronized cap 134 mg</i>	Tier 1	QL (30 caps / 30 days); MAIL
<i>fenofibrate micronized cap 200 mg</i>	Tier 1	QL (30 caps / 30 days); MAIL
<i>fenofibrate tab 48 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>fenofibrate tab 54 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>fenofibrate tab 145 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>fenofibrate tab 160 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>fenofibric acid tab 35 mg</i>	Tier 1	MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>gemfibrozil tab 600 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
HMG CoA Reductase Inhibitors		
<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	PREV	QL (30 tabs / 30 days); MAIL
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	PREV	QL (30 tabs / 30 days); MAIL
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	PREV	QL (30 tabs / 30 days); MAIL
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	PREV	MAIL
<i>lovastatin tab 10 mg</i>	PREV	QL (30 tabs / 30 days); MAIL
<i>lovastatin tab 20 mg</i>	PREV	QL (30 tabs / 30 days); MAIL
<i>lovastatin tab 40 mg</i>	PREV	QL (30 tabs / 30 days); MAIL
<i>pravastatin sodium tab 10 mg</i>	Tier 1	MAIL
<i>pravastatin sodium tab 20 mg</i>	Tier 1	MAIL
<i>pravastatin sodium tab 40 mg</i>	Tier 1	MAIL
<i>pravastatin sodium tab 80 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>simvastatin tab 5 mg</i>	PREV	QL (30 tabs / 30 days); MAIL
<i>simvastatin tab 10 mg</i>	PREV	QL (30 tabs / 30 days); MAIL
<i>simvastatin tab 20 mg</i>	PREV	QL (30 tabs / 30 days); MAIL
<i>simvastatin tab 40 mg</i>	PREV	QL (30 tabs / 30 days); MAIL
Intestinal Cholesterol Absorption Inhibitors		
<i>ezetimibe tab 10 mg</i>	Tier 2	QL (30 tabs / 30 days), ST; MAIL; PRIOR USE FORMULARY STATIN
Nicotinic Acid Derivatives		
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>niacor tab 500mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
ANTIHYPERTENSIVES		
ACE Inhibitors		
<i>benazepril hcl tab 5 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>benazepril hcl tab 10 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>benazepril hcl tab 20 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>benazepril hcl tab 40 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>captopril tab 12.5 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>captopril tab 25 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>captopril tab 50 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>captopril tab 100 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>enalapril maleate tab 2.5 mg</i>	Tier 1	QL (60 ea / 30 days); MAIL
<i>enalapril maleate tab 5 mg</i>	Tier 1	QL (30 ea / 30 days); MAIL
<i>enalapril maleate tab 10 mg</i>	Tier 1	QL (30 ea / 30 days); MAIL
<i>enalapril maleate tab 20 mg</i>	Tier 1	QL (60 ea / 30 days); MAIL
<i>fosinopril sodium tab 10 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>fosinopril sodium tab 20 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>fosinopril sodium tab 40 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>lisinopril tab 2.5 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>lisinopril tab 5 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>lisinopril tab 10 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>lisinopril tab 20 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>lisinopril tab 30 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>lisinopril tab 40 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>quinapril hcl tab 5 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>quinapril hcl tab 10 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>quinapril hcl tab 20 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>quinapril hcl tab 40 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>ramipril cap 1.25 mg</i>	Tier 1	MAIL
<i>ramipril cap 2.5 mg</i>	Tier 1	MAIL
<i>ramipril cap 5 mg</i>	Tier 1	MAIL
<i>ramipril cap 10 mg</i>	Tier 1	MAIL
<i>trandolapril tab 1 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>trandolapril tab 2 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>trandolapril tab 4 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
Agents for Pheochromocytoma		
<i>phenoxybenzamine hcl cap 10 mg</i>	Tier 2	QL (360 caps / 30 days); MAIL
Angiotensin II Receptor Antagonists		
<i>irbesartan tab 75 mg</i>	Tier 1	MAIL
<i>irbesartan tab 150 mg</i>	Tier 1	MAIL
<i>irbesartan tab 300 mg</i>	Tier 1	MAIL
<i>losartan potassium tab 25 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>losartan potassium tab 50 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>losartan potassium tab 100 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
Antiadrenergic Antihypertensives		
<i>clonidine hcl tab 0.1 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>clonidine hcl tab 0.2 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>clonidine hcl tab 0.3 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>doxazosin mesylate tab 1 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>doxazosin mesylate tab 2 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>doxazosin mesylate tab 4 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>doxazosin mesylate tab 8 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>guanfacine hcl tab 1 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>guanfacine hcl tab 2 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>methyldopa tab 250 mg</i>	Tier 1	QL (120 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>methyldopa tab 500 mg</i>	Tier 1	QL (180 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>prazosin hcl cap 1 mg</i>	Tier 1	QL (180 caps / 30 days); MAIL
<i>prazosin hcl cap 2 mg</i>	Tier 1	QL (180 caps / 30 days); MAIL
<i>prazosin hcl cap 5 mg</i>	Tier 1	QL (180 caps / 30 days); MAIL
<i>terazosin hcl cap 1 mg (base equivalent)</i>	Tier 1	QL (30 caps / 30 days); MAIL
<i>terazosin hcl cap 2 mg (base equivalent)</i>	Tier 1	QL (60 ea / 30 days); MAIL
<i>terazosin hcl cap 5 mg (base equivalent)</i>	Tier 1	QL (30 ea / 30 days); MAIL
<i>terazosin hcl cap 10 mg (base equivalent)</i>	Tier 1	QL (60 caps / 30 days); MAIL

Antihypertensive Combinations

<i>atenolol & chlorthalidone tab 50-25 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>atenolol & chlorthalidone tab 100-25 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>benazepril & hydrochlorothiazide tab 5- 6.25 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL

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Tier 3 = Non-preferred brand name drugs

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Drug Name	Drug Tier	Requirements/Limits
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
BYVALSON TAB 5-80MG	Tier 3	PA; MAIL
<i>captopril & hydrochlorothiazide tab 25-15 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>captopril & hydrochlorothiazide tab 25-25 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>captopril & hydrochlorothiazide tab 50-15 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>captopril & hydrochlorothiazide tab 50-25 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	Tier 1	MAIL
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	Tier 1	MAIL
<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	Tier 1	MAIL
<i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i>	Tier 1	MAIL
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	Tier 1	MAIL

Vasodilators

<i>hydralazine hcl tab 10 mg</i>	Tier 1	QL (300 tabs / 30 days); MAIL
<i>hydralazine hcl tab 25 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>hydralazine hcl tab 50 mg</i>	Tier 1	QL (240 tabs / 30 days); MAIL
<i>hydralazine hcl tab 100 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>minoxidil tab 2.5 mg</i>	Tier 1	QL (150 ea / 30 days); MAIL
<i>minoxidil tab 10 mg</i>	Tier 1	QL (150 ea / 30 days); MAIL

ANTIMALARIALS**Antimalarial Combinations**

<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	Tier 1
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	Tier 1
COARTEM TAB 20-120MG	Tier 3

Antimalarials

<i>chloroquine phosphate tab 250 mg</i>	Tier 1	
<i>chloroquine phosphate tab 500 mg</i>	Tier 1	
<i>hydroxychloroquine sulfate tab 200 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>mefloquine hcl tab 250 mg</i>	Tier 1	QL (120 tabs / 30 days)
PRIMAQUINE TAB 26.3MG	Tier 2	QL (120 tabs / 30 days), PA
<i>quinine sulfate cap 324 mg</i>	Tier 2	QL (30 caps / 25 days)

ANTIMETABOLITES**ANTIMETABOLITES**

<i>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</i>	Tier 1	MAIL
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Drug Name	Drug Tier	Requirements/Limits
<i>methotrexate sodium inj 250 mg/10ml (25 mg/ml)</i>	Tier 1	MAIL
<i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i>	Tier 1	MAIL
<i>methotrexate sodium inj pf 100 mg/4ml (25 mg/ml)</i>	Tier 1	MAIL
<i>methotrexate sodium inj pf 200 mg/8ml (25 mg/ml)</i>	Tier 1	MAIL
<i>methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)</i>	Tier 1	MAIL
<i>methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)</i>	Tier 1	MAIL

ANTIMYASTHENIC AGENTS**Antimyasthenic Agents**

GUANIDINE TAB 125MG	Tier 3	MAIL
<i>pyridostigmine bromide tab 60 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL

ANTIMYCOBACTERIAL AGENTS**ANTIMYCOBACTERIAL AGENTS**

TRECTOR TAB 250MG	Tier 3	
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Anti TB Combinations

<i>isonarif cap</i>	Tier 1	QL (60 caps / 30 days)
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Antimycobacterial Agents

<i>cycloserine cap 250 mg</i>	Tier 1	
<i>ethambutol hcl tab 100 mg</i>	Tier 1	QL (150 tabs / 30 days)
<i>ethambutol hcl tab 400 mg</i>	Tier 1	QL (150 tabs / 30 days)
<i>isoniazid syrup 50 mg/5ml</i>	Tier 2	QL (900 mL / 30 days)
<i>isoniazid tab 100 mg</i>	Tier 1	QL (180 tabs / 30 days)
<i>isoniazid tab 300 mg</i>	Tier 1	QL (90 tabs / 30 days)
PRIFTIN TAB 150MG	Tier 2	QL (32 tabs / 30 days)
<i>pyrazinamide tab 500 mg</i>	Tier 2	QL (180 tabs / 30 days)
<i>rifabutin cap 150 mg</i>	Tier 2	
<i>rifampin cap 150 mg</i>	Tier 1	QL (240 caps / 30 days)
<i>rifampin cap 300 mg</i>	Tier 1	QL (120 ea / 30 days)

ANTINEOPLASTIC - IMMUNOMODULATORS**ANTINEOPLASTIC - IMMUNOMODULATORS**

POMALYST CAP 1MG	Tier 4	PA
POMALYST CAP 2MG	Tier 4	PA

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Drug Name	Drug Tier	Requirements/Limits
POMALYST CAP 3MG	Tier 4	PA
POMALYST CAP 4MG	Tier 4	PA

ANTINEOPLASTIC COMBINATIONS**ANTINEOPLASTIC COMBINATIONS**

LONSURF TAB 15-6.14	Tier 4	PA
LONSURF TAB 20-8.19	Tier 4	PA

ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES**Alkylating Agents**

<i>busulfan inj 6 mg/ml</i>	Tier 1	PA; MAIL
<i>cyclophosphamide cap 25 mg</i>	Tier 2	PA; MAIL
CYCLOPHOSPHAMIDE CAP 25 MG	Tier 3	PA; MAIL
<i>cyclophosphamide cap 50 mg</i>	Tier 2	PA; MAIL
CYCLOPHOSPHAMIDE CAP 50 MG	Tier 3	PA; MAIL
<i>cyclophosphamide tab 25 mg</i>	Tier 1	QL (480 tabs / 30 days), PA; MAIL
<i>cyclophosphamide tab 50 mg</i>	Tier 1	QL (480 tabs / 30 days), PA; MAIL
GLEOSTINE CAP 5MG	Tier 4	PA
GLEOSTINE CAP 10MG	Tier 4	PA
GLEOSTINE CAP 40MG	Tier 4	PA
GLEOSTINE CAP 100MG	Tier 4	PA
HEXALEN CAP 50MG	Tier 4	PA
LEUKERAN TAB 2MG	Tier 3	QL (240 tabs / 30 days), PA; MAIL
<i>lomustine cap 10 mg</i>	Tier 4	PA
<i>lomustine cap 40 mg</i>	Tier 4	PA
<i>lomustine cap 100 mg</i>	Tier 4	PA
<i>melphalan hcl for inj 50 mg (base equiv)</i>	Tier 4	PA
<i>melphalan tab 2 mg</i>	Tier 1	PA; MAIL
<i>temozolomide cap 5 mg</i>	Tier 4	PA
<i>temozolomide cap 20 mg</i>	Tier 4	PA
<i>temozolomide cap 100 mg</i>	Tier 4	PA
<i>temozolomide cap 140 mg</i>	Tier 4	PA
<i>temozolomide cap 180 mg</i>	Tier 4	PA
<i>temozolomide cap 250 mg</i>	Tier 4	PA

Antimetabolites

<i>capecitabine tab 150 mg</i>	Tier 4	PA
<i>capecitabine tab 500 mg</i>	Tier 4	PA

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Drug Name	Drug Tier	Requirements/Limits
<i>fludarabine phosphate for inj 50 mg</i>	Tier 1	PA; MAIL
<i>mercaptopurine tab 50 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	Tier 1	QL (720 tabs / 30 days); MAIL
TABLOID TAB 40MG	Tier 3	QL (210 tabs / 30 days), PA; MAIL

Antineoplastic - Antibodies

RITUXAN INJ 100MG	Tier 4	PA
RITUXAN INJ 500MG	Tier 4	PA

Antineoplastic - Hedgehog Pathway Inhibitors

ERIVEDGE CAP 150MG	Tier 4	QL (Max day supply 14), PA
ODOMZO CAP 200MG	Tier 4	QL (Max day supply 15; Max 1 per day), PA

Antineoplastic - Hormonal and Related Agents

<i>abiraterone acetate tab 250 mg</i>	Tier 4	QL (Max day supply 15), PA
<i>anastrozole tab 1 mg</i>	Tier 1	MAIL
<i>bicalutamide tab 50 mg</i>	Tier 1	MAIL
EMCYT CAP 140MG	Tier 3	QL (300 caps / 30 days), PA; MAIL
<i>exemestane tab 25 mg</i>	Tier 2	PA; MAIL
FARESTON TAB 60MG	Tier 3	PA; MAIL
<i>flutamide cap 125 mg</i>	Tier 1	QL (180 caps / 30 days), PA; MAIL
<i>hydroxyprogesterone caproate im in oil 1.25 gm/5ml</i>	Tier 3	PA
<i>letrozole tab 2.5 mg</i>	Tier 1	QL (30 tabs / 30 days), PA; MAIL
<i>leuprolide acetate inj kit 5 mg/ml</i>	Tier 4	QL (6 kits / 30 days), PA
LUPRON DEPOT INJ 3.75MG	Tier 4	PA
LUPRON DEPOT INJ 22.5MG	Tier 4	PA
LYSODREN TAB 500MG	Tier 3	PA; MAIL
<i>megestrol acetate susp 40 mg/ml</i>	Tier 1	QL (1200 mL / 30 days); MAIL
<i>megestrol acetate tab 20 mg</i>	Tier 1	QL (1200 tabs / 30 days); MAIL
<i>megestrol acetate tab 40 mg</i>	Tier 1	QL (600 tabs / 30 days); MAIL

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Tier 3 = Non-preferred brand name drugs

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Drug Name	Drug Tier	Requirements/Limits
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	Tier 1	QL (60 tabs / 30 days); \$0 Copay for Breast Cancer Prevention for Women age 35+; MAIL
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	Tier 1	QL (60 tabs / 30 days); \$0 Copay for Breast Cancer Prevention for Women age 35+; MAIL
ZOLADEX IMP 3.6MG	Tier 4	QL (1 ea / 24 days), PA
ZOLADEX IMP 10.8MG	Tier 4	QL (1 ea / 75 days), PA
ZYTIGA TAB 250MG	Tier 4	QL (Max day supply 15), PA

Antineoplastic Antibiotics

<i>mitoxantrone hcl inj conc 20 mg/10ml (2 mg/ml)</i>	Tier 4	PA
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Antineoplastic Enzyme Inhibitors

AFINITOR DIS TAB 2MG	Tier 4	QL (Max day supply 14), PA
AFINITOR DIS TAB 3MG	Tier 4	QL (Max day supply 14), PA
AFINITOR DIS TAB 5MG	Tier 4	QL (Max day supply 14), PA
AFINITOR TAB 2.5MG	Tier 4	QL (Max day supply 14), PA
AFINITOR TAB 5MG	Tier 4	QL (Max day supply 14), PA
AFINITOR TAB 7.5MG	Tier 4	QL (Max day supply 14), PA
AFINITOR TAB 10MG	Tier 4	QL (Max day supply 14), PA
CAPRELSA TAB 100MG	Tier 4	PA
CAPRELSA TAB 300MG	Tier 4	PA
COMETRIQ KIT 60MG	Tier 4	PA
COMETRIQ KIT 100MG	Tier 4	PA
COMETRIQ KIT 140MG	Tier 4	PA
FARYDAK CAP 10MG	Tier 4	PA
FARYDAK CAP 15MG	Tier 4	PA
FARYDAK CAP 20MG	Tier 4	PA
GILOTRIF TAB 20MG	Tier 4	PA
GILOTRIF TAB 30MG	Tier 4	PA

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Drug Name	Drug Tier	Requirements/Limits
GILOTRIF TAB 40MG	Tier 4	PA
IBRANCE CAP 75MG	Tier 4	PA
IBRANCE CAP 100MG	Tier 4	PA
IBRANCE CAP 125MG	Tier 4	PA
ICLUSIG TAB 15MG	Tier 4	PA
ICLUSIG TAB 45MG	Tier 4	PA
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	Tier 4	QL (Max day supply 15; Max 6 per day), PA
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	Tier 4	QL (Max day supply 15; Max 2 per day), PA
IMBRUVICA CAP 140MG	Tier 4	PA
JAKAFI TAB 5MG	Tier 4	QL (Max day supply 15), PA
JAKAFI TAB 10MG	Tier 4	QL (Max day supply 15), PA
JAKAFI TAB 15MG	Tier 4	QL (Max day supply 15), PA
JAKAFI TAB 20MG	Tier 4	QL (Max day supply 15), PA
JAKAFI TAB 25MG	Tier 4	QL (Max day supply 15), PA
LENVIMA CAP 10 MG	Tier 4	PA
LENVIMA CAP 14 MG	Tier 4	PA
LENVIMA CAP 20 MG	Tier 4	PA
LENVIMA CAP 24 MG	Tier 4	PA
LYNPARZA CAP 50MG	Tier 4	PA
LYNPARZA TAB 100MG	Tier 4	PA
LYNPARZA TAB 150MG	Tier 4	PA
MEKINIST TAB 0.5MG	Tier 4	QL (Max day supply 15; Max 4 per day), PA
MEKINIST TAB 2MG	Tier 4	PA
NEXAVAR TAB 200MG	Tier 4	QL (Max day supply 15; Max 4 per day), PA
SPRYCEL TAB 20MG	Tier 4	QL (Max day supply 15; Max 1 per day), PA
SPRYCEL TAB 50MG	Tier 4	QL (Max day supply 15; Max 1 per day), PA
SPRYCEL TAB 70MG	Tier 4	QL (Max day supply 15; Max 1 per day), PA

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Drug Name	Drug Tier	Requirements/Limits
SPRYCEL TAB 80MG	Tier 4	QL (Max day supply 15), PA
SPRYCEL TAB 100MG	Tier 4	QL (Max day supply 15; Max 1 per day), PA
SPRYCEL TAB 140MG	Tier 4	QL (Max day supply 15; Max 1 per day), PA
STIVARGA TAB 40MG	Tier 4	PA
SUTENT CAP 12.5MG	Tier 4	QL (Max day supply 14; Max 1 per day), PA
SUTENT CAP 25MG	Tier 4	QL (Max day supply 14; Max 1 per day), PA
SUTENT CAP 37.5MG	Tier 4	QL (Max day supply 14; Max 1 per day), PA
SUTENT CAP 50MG	Tier 4	QL (Max day supply 14; Max 1 per day), PA
TAFINLAR CAP 50MG	Tier 4	QL (Max day supply 15), PA
TAFINLAR CAP 75MG	Tier 4	QL (Max day supply 15), PA
TARCEVA TAB 25MG	Tier 4	QL (Max day supply 15), PA
TARCEVA TAB 100MG	Tier 4	QL (Max day supply 15), PA
TARCEVA TAB 150MG	Tier 4	QL (Max day supply 15), PA
TASIGNA CAP 150MG	Tier 4	QL (Max day supply 14), PA
TASIGNA CAP 200MG	Tier 4	QL (Max day supply 14), PA
<i>temsirolimus soln for iv infusion 25 mg/ml</i>	Tier 1	PA
TORISEL SOL 25MG/ML	Tier 4	PA
TYKERB TAB 250MG	Tier 4	QL (180 tabs / 30 days), PA
VOTRIENT TAB 200MG	Tier 4	QL (Max day supply 15), PA
XALKORI CAP 200MG	Tier 4	QL (Max day supply 15), PA
XALKORI CAP 250MG	Tier 4	QL (Max day supply 15), PA
ZOLINZA CAP 100MG	Tier 4	QL (Max day supply 15; Max 4 per day), PA

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Tier 1 = Generics; Low cost preferred brand

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Drug Name	Drug Tier	Requirements/Limits
ZYDELIG TAB 100MG	Tier 4	PA
ZYDELIG TAB 150MG	Tier 4	PA
ZYKADIA CAP 150MG	Tier 4	QL (Max day supply 14), PA
<i>Antineoplastics Misc.</i>		
ACTIMMUNE INJ 2MU/0.5	Tier 4	PA
<i>hydroxyurea cap 500 mg</i>	Tier 1	QL (720 ea / 30 days); MAIL
INTRON A INJ 10MU	Tier 4	PA
INTRON A INJ 18MU	Tier 4	PA
INTRON A INJ 25MU	Tier 4	PA
INTRON A INJ 50MU	Tier 4	PA
MATULANE CAP 50MG	Tier 3	PA; MAIL
<i>tretinoin cap 10 mg</i>	Tier 2	PA; MAIL
<i>Chemotherapy Adjuncts</i>		
KEPIVANCE INJ 6.25MG	Tier 4	PA
<i>Chemotherapy Rescue/Antidote Agents</i>		
<i>amifostine for inj 500 mg</i>	Tier 4	PA
<i>leucovorin calcium tab 5 mg</i>	Tier 1	QL (240 tabs / 30 days); MAIL
<i>leucovorin calcium tab 10 mg</i>	Tier 1	MAIL
<i>leucovorin calcium tab 15 mg</i>	Tier 1	MAIL
<i>leucovorin calcium tab 25 mg</i>	Tier 1	MAIL
<i>Mitotic Inhibitors</i>		
<i>etoposide cap 50 mg</i>	Tier 4	PA; MAIL
<i>etoposide inj 20mg/ml</i>	Tier 4	PA
<i>etoposide inj 100 mg/5ml (20 mg/ml)</i>	Tier 4	PA
<i>toposar inj 100/5ml</i>	Tier 4	PA
<i>toposar inj 200/10ml</i>	Tier 4	PA
<i>toposar inj 500/25ml</i>	Tier 4	PA
<i>Topoisomerase I Inhibitors</i>		
<i>topotecan hcl for inj 4 mg (base equiv)</i>	Tier 3	PA; MAIL
ANTIPARKINSON AGENTS		
<i>Antiparkinson Adjuvants</i>		
<i>carbidopa tab 25 mg</i>	Tier 2	QL (240 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
Antiparkinson Anticholinergics		
<i>benztropine mesylate tab 0.5 mg</i>	Tier 1	QL (150 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>benztropine mesylate tab 1 mg</i>	Tier 1	QL (180 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>benztropine mesylate tab 2 mg</i>	Tier 1	QL (90 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>trihexyphenidyl hcl elixir 0.4 mg/ml</i>	Tier 1	PA; AGE; MAIL; Covered for ages 64 and under
<i>trihexyphenidyl hcl tab 2 mg</i>	Tier 1	QL (360 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>trihexyphenidyl hcl tab 5 mg</i>	Tier 1	QL (90 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
Antiparkinson COMT Inhibitors		
<i>entacapone tab 200 mg</i>	Tier 2	QL (240 tabs / 30 days); MAIL
Antiparkinson Dopaminergics		
<i>amantadine hcl cap 100 mg</i>	Tier 1	QL (120 ea / 30 days); MAIL
<i>amantadine hcl syrup 50 mg/5ml</i>	Tier 1	MAIL
APOKYN INJ	Tier 4	PA
APOKYN INJ 10MG/ML	Tier 4	PA
<i>bromocriptine mesylate cap 5 mg (base equivalent)</i>	Tier 2	QL (180 caps / 30 days); MAIL
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	Tier 2	QL (180 tabs / 30 days); MAIL
<i>carbidopa & levodopa tab 10-100 mg</i>	Tier 1	QL (240 tabs / 30 days); MAIL
<i>carbidopa & levodopa tab 25-100 mg</i>	Tier 1	QL (360 ea / 30 days); MAIL
<i>carbidopa & levodopa tab 25-250 mg</i>	Tier 1	QL (240 ea / 30 days); MAIL
<i>carbidopa & levodopa tab er 25-100 mg</i>	Tier 1	QL (120 ea / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>carbidopa & levodopa tab er 25-100 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>carbidopa & levodopa tab er 50-200 mg</i>	Tier 1	QL (240 ea / 30 days); MAIL
<i>carbidopa & levodopa tab er 50-200 mg</i>	Tier 1	QL (240 tabs / 30 days); MAIL
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	Tier 2	QL (240 tabs / 30 days); MAIL
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	Tier 2	QL (240 tabs / 30 days); MAIL
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	Tier 2	QL (240 tabs / 30 days); MAIL
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	Tier 2	QL (240 tabs / 30 days); MAIL
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	Tier 2	QL (240 tabs / 30 days); MAIL
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	Tier 2	QL (180 tabs / 30 days); MAIL
<i>pramipexole dihydrochloride tab 0.5 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>pramipexole dihydrochloride tab 0.25 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>pramipexole dihydrochloride tab 0.75 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>pramipexole dihydrochloride tab 0.125 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>pramipexole dihydrochloride tab 1 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>pramipexole dihydrochloride tab 1.5 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>ropinirole hydrochloride tab 0.5 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>ropinirole hydrochloride tab 0.25 mg</i>	Tier 1	QL (360 tabs / 30 days); MAIL
<i>ropinirole hydrochloride tab 1 mg</i>	Tier 1	QL (360 tabs / 30 days); MAIL
<i>ropinirole hydrochloride tab 2 mg</i>	Tier 1	QL (360 tabs / 30 days); MAIL
<i>ropinirole hydrochloride tab 3 mg</i>	Tier 1	QL (360 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>ropinirole hydrochloride tab 4 mg</i>	Tier 1	QL (360 tabs / 30 days); MAIL
<i>ropinirole hydrochloride tab 5 mg</i>	Tier 1	QL (360 tabs / 30 days); MAIL

Antiparkinson Monoamine Oxidase Inhibitors

<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	Tier 2	QL (60 tabs / 30 days); MAIL
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	Tier 2	QL (30 tabs / 30 days); MAIL
<i>selegiline hcl cap 5 mg</i>	Tier 2	QL (60 caps / 30 days); MAIL
<i>selegiline hcl tab 5 mg</i>	Tier 2	QL (60 tabs / 30 days); MAIL

ANTIPSYCHOTICS/ANTIMANIC AGENTS**Antimanic Agents**

<i>lithium carbonate cap 150 mg</i>	Tier 1	QL (360 caps / 30 days); MAIL; Covered for ages 6 and over
<i>lithium carbonate cap 300 mg</i>	Tier 1	QL (180 caps / 30 days); MAIL; Covered for ages 6 and over
<i>lithium carbonate cap 600 mg</i>	Tier 1	QL (180 caps / 30 days); MAIL
<i>lithium carbonate tab 300 mg</i>	Tier 1	MAIL
<i>lithium carbonate tab er 300 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>lithium carbonate tab er 450 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL; Covered for ages 6 and over
LITHIUM SOL 8MEQ/5ML	Tier 2	MAIL

Antipsychotics - Misc.

LATUDA TAB 20MG	Tier 2	PA; MAIL
LATUDA TAB 40MG	Tier 2	PA; MAIL
LATUDA TAB 60MG	Tier 2	PA; MAIL
LATUDA TAB 80MG	Tier 2	PA; MAIL
LATUDA TAB 120MG	Tier 2	PA; MAIL
VRAYLAR CAP 1.5MG	Tier 3	PA; MAIL
VRAYLAR CAP 3MG	Tier 3	PA; MAIL
VRAYLAR CAP 4.5MG	Tier 3	PA; MAIL

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Drug Name	Drug Tier	Requirements/Limits
VRAYLAR CAP 6MG	Tier 3	PA; MAIL
<i>ziprasidone hcl cap 20 mg</i>	Tier 2	QL (60 caps / 30 days); MAIL; Covered for ages 16 and over
<i>ziprasidone hcl cap 40 mg</i>	Tier 2	QL (60 caps / 30 days); MAIL; Covered for ages 16 and over
<i>ziprasidone hcl cap 60 mg</i>	Tier 2	QL (60 caps / 30 days); MAIL; Covered for ages 16 and over
<i>ziprasidone hcl cap 80 mg</i>	Tier 2	QL (60 caps / 30 days); MAIL; Covered for ages 16 and over

Benzisoxazoles

FANAPT PAK	Tier 3	PA; MAIL
FANAPT TAB 1MG	Tier 3	PA; MAIL
FANAPT TAB 2MG	Tier 3	PA; MAIL
FANAPT TAB 4MG	Tier 3	PA; MAIL
FANAPT TAB 6MG	Tier 3	PA; MAIL
FANAPT TAB 8MG	Tier 3	PA; MAIL
FANAPT TAB 10MG	Tier 3	PA; MAIL
FANAPT TAB 12MG	Tier 3	PA; MAIL
INVEGA SUST INJ 39/0.25	Tier 3	QL (.25 injections / 25 days); MAIL
INVEGA SUST INJ 78/0.5ML	Tier 3	QL (.5 injections / 25 days); MAIL
INVEGA SUST INJ 117/0.75	Tier 3	QL (.75 injections / 25 days); MAIL
INVEGA SUST INJ 156MG/ML	Tier 3	QL (1 injection / 25 days); MAIL
INVEGA SUST INJ 234/1.5	Tier 3	QL (1.5 injections / 25 days); MAIL
INVEGA TRINZ INJ 273MG	Tier 3	QL (Max day supply 90), PA; MAIL
INVEGA TRINZ INJ 410MG	Tier 3	QL (Max day supply 90), PA; MAIL
INVEGA TRINZ INJ 546MG	Tier 3	QL (Max day supply 90), PA; MAIL
INVEGA TRINZ INJ 819MG	Tier 3	QL (Max day supply 90), PA; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>paliperidone tab er 24hr 1.5 mg</i>	Tier 2	PA; MAIL
<i>paliperidone tab er 24hr 3 mg</i>	Tier 2	PA; MAIL
<i>paliperidone tab er 24hr 6 mg</i>	Tier 2	PA; MAIL
<i>paliperidone tab er 24hr 9 mg</i>	Tier 2	PA; MAIL
RISPERDAL INJ 12.5MG	Tier 3	QL (Max day supply 28)
RISPERDAL INJ 25MG	Tier 3	QL (Max day supply 28)
RISPERDAL INJ 37.5MG	Tier 3	QL (Max day supply 28)
RISPERDAL INJ 50MG	Tier 3	QL (Max day supply 28)
<i>risperidone orally disintegrating tab 0.5 mg</i>	Tier 2	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>risperidone orally disintegrating tab 0.25 mg</i>	Tier 2	MAIL
<i>risperidone orally disintegrating tab 1 mg</i>	Tier 2	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>risperidone orally disintegrating tab 2 mg</i>	Tier 2	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>risperidone orally disintegrating tab 3 mg</i>	Tier 2	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>risperidone orally disintegrating tab 4 mg</i>	Tier 2	QL (120 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>risperidone soln 1 mg/ml</i>	Tier 1	QL (480 mL / 30 days); MAIL; Covered for ages 6 and over
<i>risperidone tab 0.5 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>risperidone tab 0.25 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>risperidone tab 1 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>risperidone tab 2 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over

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Drug Name	Drug Tier	Requirements/Limits
<i>risperidone tab 3 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>risperidone tab 4 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL; Covered for ages 6 and over
Butyrophenones		
<i>haloperidol decanoate im soln 50 mg/ml</i>	Tier 1	MAIL
<i>haloperidol decanoate im soln 100 mg/ml</i>	Tier 1	MAIL
<i>haloperidol lactate inj 5 mg/ml</i>	Tier 1	MAIL
<i>haloperidol lactate oral conc 2 mg/ml</i>	Tier 1	MAIL
<i>haloperidol tab 0.5 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>haloperidol tab 1 mg</i>	Tier 1	QL (150 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>haloperidol tab 2 mg</i>	Tier 1	QL (150 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>haloperidol tab 5 mg</i>	Tier 1	QL (150 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>haloperidol tab 10 mg</i>	Tier 1	QL (150 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>haloperidol tab 20 mg</i>	Tier 1	QL (150 tabs / 30 days); MAIL; Covered for ages 6 and over
Dibenzapines		
<i>clozapine tab 25 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>clozapine tab 50 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>clozapine tab 100 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over

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Drug Name	Drug Tier	Requirements/Limits
<i>clozapine tab 200 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>loxapine succinate cap 5 mg</i>	Tier 1	QL (450 caps / 30 days); MAIL; Covered for ages 6 and over
<i>loxapine succinate cap 10 mg</i>	Tier 1	QL (450 caps / 30 days); MAIL; Covered for ages 6 and over
<i>loxapine succinate cap 25 mg</i>	Tier 1	QL (180 caps / 30 days); MAIL; Covered for ages 6 and over
<i>loxapine succinate cap 50 mg</i>	Tier 1	QL (450 caps / 30 days); MAIL; Covered for ages 6 and over
<i>olanzapine tab 2.5 mg</i>	Tier 2	QL (30 ea / 30 days), ST; MAIL; PRIOR USE RISPERIDONE OR QUETIAPINE; Covered for ages 6 and over
<i>olanzapine tab 5 mg</i>	Tier 2	QL (30 tabs / 30 days), ST; MAIL; PRIOR USE RISPERIDONE OR QUETIAPINE; Covered for ages 6 and over
<i>olanzapine tab 7.5 mg</i>	Tier 2	QL (30 tabs / 30 days), ST; MAIL; PRIOR USE RISPERIDONE OR QUETIAPINE; Covered for ages 6 and over
<i>olanzapine tab 10 mg</i>	Tier 2	QL (30 tabs / 30 days), ST; MAIL; PRIOR USE RISPERIDONE OR QUETIAPINE; Covered for ages 6 and over
<i>olanzapine tab 15 mg</i>	Tier 2	QL (30 ea / 30 days), ST; MAIL; PRIOR USE RISPERIDONE OR QUETIAPINE; Covered for ages 6 and over

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Drug Name	Drug Tier	Requirements/Limits
<i>olanzapine tab 20 mg</i>	Tier 2	QL (30 ea / 30 days), ST; MAIL; PRIOR USE RISPERIDONE OR QUETIAPINE; Covered for ages 6 and over
<i>quetiapine fumarate tab 25 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>quetiapine fumarate tab 50 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>quetiapine fumarate tab 100 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>quetiapine fumarate tab 200 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>quetiapine fumarate tab 300 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>quetiapine fumarate tab 400 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>quetiapine fumarate tab er 24hr 50 mg</i>	Tier 2	QL (30 tabs / 30 days), PA; MAIL; Covered for ages 16 and over
<i>quetiapine fumarate tab er 24hr 150 mg</i>	Tier 2	QL (30 tabs / 30 days), PA; MAIL; Covered for ages 16 and over
<i>quetiapine fumarate tab er 24hr 200 mg</i>	Tier 2	QL (30 tabs / 30 days), PA; MAIL; Covered for ages 16 and over
<i>quetiapine fumarate tab er 24hr 300 mg</i>	Tier 2	QL (30 tabs / 30 days), PA; MAIL; Covered for ages 16 and over
<i>quetiapine fumarate tab er 24hr 400 mg</i>	Tier 2	QL (30 tabs / 30 days), PA; MAIL; Covered for ages 16 and over
SAPHRIS SUB 5MG	Tier 2	PA; MAIL
SAPHRIS SUB 10MG	Tier 2	PA; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>Phenothiazines</i>		
<i>chlorpromazine hcl tab 10 mg</i>	Tier 2	QL (360 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>chlorpromazine hcl tab 25 mg</i>	Tier 2	QL (360 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>chlorpromazine hcl tab 50 mg</i>	Tier 2	QL (360 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>chlorpromazine hcl tab 100 mg</i>	Tier 2	QL (360 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>chlorpromazine hcl tab 200 mg</i>	Tier 2	QL (360 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>compro sup 25mg</i>	Tier 2	QL (360 supp / 30 days); MAIL
<i>fluphenazine decanoate inj 25 mg/ml</i>	Tier 1	MAIL
<i>fluphenazine hcl inj 2.5 mg/ml</i>	Tier 1	MAIL
<i>fluphenazine hcl tab 1 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>fluphenazine hcl tab 2.5 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>fluphenazine hcl tab 5 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>fluphenazine hcl tab 10 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>perphenazine tab 2 mg</i>	Tier 1	QL (90 tabs / 30 days); AGE; MAIL; Covered for ages 6-64
<i>perphenazine tab 4 mg</i>	Tier 1	QL (90 ea / 30 days); AGE; MAIL; Covered for ages 6-64
<i>perphenazine tab 8 mg</i>	Tier 1	QL (90 ea / 30 days); AGE; MAIL; Covered for ages 6-64

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Drug Name	Drug Tier	Requirements/Limits
<i>perphenazine tab 16 mg</i>	Tier 1	QL (90 tabs / 30 days); AGE; MAIL; Covered for ages 6-64
<i>prochlorperazine maleate tab 5 mg (base equivalent)</i>	Tier 1	QL (300 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>prochlorperazine maleate tab 10 mg (base equivalent)</i>	Tier 1	QL (240 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>prochlorperazine suppos 25 mg</i>	Tier 2	QL (360 supp / 30 days); MAIL
<i>thioridazine hcl tab 10 mg</i>	Tier 1	QL (90 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>thioridazine hcl tab 25 mg</i>	Tier 1	QL (90 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>thioridazine hcl tab 50 mg</i>	Tier 1	QL (90 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>thioridazine hcl tab 100 mg</i>	Tier 1	QL (90 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	Tier 1	QL (180 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	Tier 1	QL (180 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	Tier 1	QL (180 tabs / 30 days); MAIL; Covered for ages 6 and over
<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	Tier 1	QL (120 tabs / 30 days); MAIL; Covered for ages 6 and over
Quinolinone Derivatives		
ABILIFY MAIN INJ 300MG	Tier 2	QL (1 vial / 25 days); MAIL; Covered for ages 6 and over

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MED - Max 90 mg Morphine EQ Dose Per Day
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Drug Name	Drug Tier	Requirements/Limits
ABILIFY MAIN INJ 400MG	Tier 2	QL (1 vial / 25 days); MAIL; Covered for ages 6 and over
<i>aripiprazole oral solution 1 mg/ml</i>	Tier 2	PA; MAIL; Covered for ages 10 and over
<i>aripiprazole orally disintegrating tab 10 mg</i>	Tier 2	QL (30 tabs / 30 days), PA; MAIL; Covered for ages 10 and over
<i>aripiprazole orally disintegrating tab 15 mg</i>	Tier 2	QL (30 tabs / 30 days), PA; MAIL; Covered for ages 10 and over
<i>aripiprazole tab 2 mg</i>	Tier 2	QL (60 tabs / 30 days), PA; MAIL; Covered for ages 10 and over
<i>aripiprazole tab 5 mg</i>	Tier 2	QL (60 tabs / 30 days), PA; MAIL; Covered for ages 10 and over
<i>aripiprazole tab 10 mg</i>	Tier 2	QL (60 tabs / 30 days), PA; MAIL; Covered for ages 10 and over
<i>aripiprazole tab 15 mg</i>	Tier 2	QL (60 tabs / 30 days), PA; MAIL; Covered for ages 10 and over
<i>aripiprazole tab 20 mg</i>	Tier 2	QL (60 tabs / 30 days), PA; MAIL; Covered for ages 10 and over
<i>aripiprazole tab 30 mg</i>	Tier 2	QL (60 tabs / 30 days), PA; MAIL; Covered for ages 10 and over
ARISTADA INJ 441MG/1.	Tier 2	QL (1 injection / 25 days); MAIL
ARISTADA INJ 662MG/2	Tier 2	QL (1 injection / 25 days); MAIL
ARISTADA INJ 882MG/3	Tier 2	QL (1 injection / 25 days); MAIL
<i>Thioxanthenes</i>		
<i>thiothixene cap 1 mg</i>	Tier 1	QL (180 caps / 30 days); MAIL; Covered for ages 6 and over

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Drug Name	Drug Tier	Requirements/Limits
<i>thiothixene cap 2 mg</i>	Tier 1	QL (180 caps / 30 days); MAIL; Covered for ages 6 and over
<i>thiothixene cap 5 mg</i>	Tier 1	QL (180 caps / 30 days); MAIL; Covered for ages 6 and over
<i>thiothixene cap 10 mg</i>	Tier 1	QL (180 caps / 30 days); MAIL; Covered for ages 6 and over

ANTIRHEUMATIC - ENZYME INHIBITORS**ANTIRHEUMATIC - JANUS KINASE (JAK) INHIBITORS**

XELJANZ TAB 5MG	Tier 4	PA; Preferred Brand
XELJANZ XR TAB 11MG	Tier 4	PA; Preferred Brand

ANTISEPTICS DISINFECTANTS**Chlorine Antiseptics**

<i>betasept liq 4%</i>	Tier 1	OTC; MAIL
<i>chlorhexidine gluconate liquid 4%</i>	Tier 1	OTC; MAIL
PHISOHEX LIQ 3%	Tier 2	QL (473 mL / 25 days); MAIL

ANTIVIRALS**ANTIRETROVIRALS**

BIKTARVY TAB	Tier 2	QL (30 tabs / 30 days); MAIL
DOVATO TAB 50-300MG	Tier 3	QL (30 tabs / 30 days), PA
JULUCA TAB 50-25MG	Tier 2	QL (30 tabs / 30 days); MAIL

Antiretrovirals

<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	Tier 2	QL (900 mL / 30 days); MAIL
<i>abacavir sulfate tab 300 mg (base equiv)</i>	Tier 2	QL (60 tabs / 30 days); MAIL
<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	Tier 2	QL (30 tabs / 30 days); MAIL
<i>abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg</i>	Tier 2	QL (60 tabs / 30 days); MAIL
APTIVUS CAP 250MG	Tier 3	QL (120 caps / 30 days); MAIL
APTIVUS SOL	Tier 3	QL (300 mL / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>atazanavir sulfate cap 150 mg (base equiv)</i>	Tier 2	QL (60 caps / 30 days); MAIL
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	Tier 2	QL (60 caps / 30 days); MAIL
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	Tier 2	QL (30 caps / 30 days); MAIL
CIMDUO TAB 300-300	Tier 2	QL (30 tabs / 30 days); MAIL
COMPLERA TAB	Tier 3	QL (30 tabs / 30 days); MAIL
CRIXIVAN CAP 200MG	Tier 3	QL (360 caps / 30 days); MAIL
CRIXIVAN CAP 400MG	Tier 3	QL (180 caps / 30 days); MAIL
DESCOVY TAB 200/25	Tier 3	QL (30 tabs / 30 days); MAIL
<i>didanosine delayed release capsule 125 mg</i>	Tier 2	QL (60 caps / 30 days); MAIL
<i>didanosine delayed release capsule 200 mg</i>	Tier 2	MAIL
<i>didanosine delayed release capsule 250 mg</i>	Tier 2	QL (30 caps / 30 days); MAIL
<i>didanosine delayed release capsule 400 mg</i>	Tier 2	QL (30 caps / 30 days); MAIL
EDURANT TAB 25MG	Tier 3	MAIL
<i>efavirenz cap 50 mg</i>	Tier 1	QL (360 caps / 30 days); MAIL
<i>efavirenz cap 200 mg</i>	Tier 1	QL (90 caps / 30 days); MAIL
<i>efavirenz tab 600 mg</i>	Tier 2	QL (30 tabs / 30 days); MAIL
EMTRIVA CAP 200MG	Tier 3	QL (30 caps / 30 days); MAIL
EMTRIVA SOL 10MG/ML	Tier 3	QL (600 mL / 30 days); MAIL
EVOTAZ TAB 300-150	Tier 3	MAIL
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	Tier 2	QL (120 tabs / 30 days); MAIL
FUZEON INJ 90MG	Tier 4	PA
GENVOYA TAB	Tier 3	QL (30 tabs / 30 days); MAIL
INTELENCE TAB 25MG	Tier 3	PA

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Drug Name	Drug Tier	Requirements/Limits
INTELENCE TAB 100MG	Tier 3	QL (120 tabs / 30 days), PA
INTELENCE TAB 200MG	Tier 3	QL (60 tabs / 30 days), PA
INVIRASE CAP 200MG	Tier 3	MAIL
INVIRASE TAB 500MG	Tier 3	QL (120 tabs / 30 days); MAIL
ISENTRESS CHW 25MG	Tier 3	MAIL
ISENTRESS CHW 100MG	Tier 3	MAIL
ISENTRESS HD TAB 600MG	Tier 3	QL (60 tabs / 30 days); MAIL
ISENTRESS TAB 400MG	Tier 3	QL (60 tabs / 30 days); MAIL
KALETRA TAB 100-25MG	Tier 3	QL (360 tabs / 30 days); MAIL
KALETRA TAB 200-50MG	Tier 3	QL (180 tabs / 30 days); MAIL
<i>lamivudine oral soln 10 mg/ml</i>	Tier 2	QL (900 mL / 30 days); MAIL
<i>lamivudine tab 100 mg (hbv)</i>	Tier 2	QL (90 tabs / 30 days); MAIL
<i>lamivudine tab 150 mg</i>	Tier 2	QL (60 tabs / 30 days); MAIL
<i>lamivudine tab 300 mg</i>	Tier 2	QL (30 tabs / 30 days); MAIL
<i>lamivudine-zidovudine tab 150-300 mg</i>	Tier 2	QL (60 tabs / 30 days); MAIL
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	Tier 2	MAIL
<i>nevirapine susp 50 mg/5ml</i>	Tier 2	QL (1200 mL / 30 days); MAIL
<i>nevirapine tab 200 mg</i>	Tier 2	QL (60 tabs / 30 days); MAIL
<i>nevirapine tab er 24hr 100 mg</i>	Tier 2	MAIL
<i>nevirapine tab er 24hr 400 mg</i>	Tier 2	MAIL
NORVIR CAP 100MG	Tier 3	QL (360 caps / 30 days); MAIL
NORVIR SOL 80MG/ML	Tier 3	QL (450 mL / 30 days); MAIL
NORVIR TAB 100MG	Tier 3	QL (360 tabs / 30 days); MAIL

PA - Prior Authorization **ST** - Step Therapy **AGE** - Age Limit

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Drug Name	Drug Tier	Requirements/Limits
ODEFSEY TAB	Tier 3	QL (30 tabs / 30 days); MAIL
PREZCOBIX TAB 800-150	Tier 3	MAIL
PREZISTA SUS 100MG/ML	Tier 3	MAIL
PREZISTA TAB 75MG	Tier 3	MAIL
PREZISTA TAB 150MG	Tier 3	MAIL
PREZISTA TAB 400MG	Tier 3	QL (60 tabs / 30 days); MAIL
PREZISTA TAB 600MG	Tier 3	QL (60 tabs / 30 days); MAIL
PREZISTA TAB 800MG	Tier 3	MAIL
RESCRIPTOR TAB 100 MG	Tier 3	QL (360 tabs / 30 days); MAIL
RESCRIPTOR TAB 200MG	Tier 3	QL (180 tabs / 30 days); MAIL
<i>ritonavir tab 100 mg</i>	Tier 2	QL (360 tabs / 30 days); MAIL
SELZENTRY TAB 25MG	Tier 3	MAIL
SELZENTRY TAB 75MG	Tier 3	MAIL
SELZENTRY TAB 150MG	Tier 3	QL (120 tabs / 30 days); MAIL
SELZENTRY TAB 300MG	Tier 3	QL (120 tabs / 30 days); MAIL
<i>stavudine cap 15 mg</i>	Tier 2	MAIL
<i>stavudine cap 20 mg</i>	Tier 2	QL (60 caps / 30 days); MAIL
<i>stavudine cap 30 mg</i>	Tier 2	QL (30 caps / 30 days); MAIL
<i>stavudine cap 40 mg</i>	Tier 2	QL (60 caps / 30 days); MAIL
STRIBILD TAB	Tier 3	MAIL
SUSTIVA TAB 600MG	Tier 3	QL (30 tabs / 30 days); MAIL
SYMFI LO TAB	Tier 2	QL (30 tabs / 30 days); MAIL
SYMFI TAB	Tier 2	QL (30 tabs / 30 days); MAIL
<i>tenofovir disoproxil fumarate tab 300 mg</i>	Tier 2	QL (30 tabs / 30 days); MAIL
TIVICAY TAB 10MG	Tier 3	MAIL

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Drug Name	Drug Tier	Requirements/Limits
TIVICAY TAB 25MG	Tier 3	MAIL
TIVICAY TAB 50MG	Tier 3	MAIL
TRIUMEQ TAB	Tier 3	MAIL
TRUVADA TAB 100-150	Tier 3	QL (30 tabs / 30 days); MAIL
TRUVADA TAB 133-200	Tier 3	QL (30 tabs / 30 days); MAIL
TRUVADA TAB 167-250	Tier 3	QL (30 tabs / 30 days); MAIL
TRUVADA TAB 200-300	Tier 3	QL (30 tabs / 30 days); MAIL
TYBOST TAB 150MG	Tier 3	PA; MAIL
VIRACEPT TAB 250MG	Tier 3	QL (300 tabs / 30 days); MAIL
VIRACEPT TAB 625MG	Tier 3	QL (120 tabs / 30 days); MAIL
VIREAD TAB 150MG	Tier 3	MAIL
VIREAD TAB 200MG	Tier 3	MAIL
VIREAD TAB 250MG	Tier 3	MAIL
VITEKTA TAB 150MG	Tier 3	MAIL
<i>zidovudine cap 100 mg</i>	Tier 2	QL (180 caps / 30 days); MAIL
<i>zidovudine syrup 10 mg/ml</i>	Tier 2	QL (1800 mL / 30 days); MAIL
<i>zidovudine tab 300 mg</i>	Tier 2	QL (60 tabs / 30 days); MAIL

CMV Agents

FOSCAVIR INJ 24MG/ML	Tier 3	PA
<i>valganciclovir hcl for soln 50 mg/ml (base equiv)</i>	Tier 2	PA
<i>valganciclovir hcl tab 450 mg (base equivalent)</i>	Tier 2	QL (120 tabs / 30 days), PA

Hepatitis Agents

<i>adefovir dipivoxil tab 10 mg</i>	Tier 2	QL (30 tabs / 30 days)
BARACLUDE SOL .05MG/ML	Tier 2	QL (900 mL / 30 days)
DAKLINZA TAB 30MG	Tier 4	QL (Max day supply 7; Max 1 per day), PA
DAKLINZA TAB 60MG	Tier 4	QL (Max day supply 7; Max 1 per day), PA
<i>entecavir tab 0.5 mg</i>	Tier 2	QL (30 tabs / 30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>entecavir tab 1 mg</i>	Tier 2	QL (30 tabs / 30 days)
EPCLUSA TAB 400-100	Tier 4	QL (Max day supply 7; Max 1 per day), PA
HARVONI TAB 90-400MG	Tier 4	QL (Max day supply 7; Max 1 per day), PA
INFERGEN INJ 15MCG	Tier 4	PA
LEDIP-SOFOSB TAB 90-400MG	Tier 4	QL (Max day supply 7; Max 1 per day), PA; Preferred
MAVYRET TAB 100-40MG	Tier 4	QL (Max day supply 7; Max 3 per day), PA
<i>moderiba tab 200mg</i>	Tier 3	QL (Max day supply 7), PA
PEG-INTRON KIT 150MCG	Tier 4	PA
PEGASYS INJ	Tier 4	PA
PEGASYS INJ 180MCG/M	Tier 4	PA
<i>ribasphere cap 200mg</i>	Tier 3	QL (Max day supply 7), PA
<i>ribasphere tab 200mg</i>	Tier 3	QL (Max day supply 7), PA
<i>ribavirin cap 200 mg</i>	Tier 3	QL (Max day supply 7), PA
SOFOS/VELPAT TAB 400-100	Tier 4	QL (Max day supply 7; Max 1 per day), PA; Preferred
SOVALDI TAB 400MG	Tier 4	QL (Max day supply 7; Max 1 per day), PA
TECHNIVIE TAB	Tier 4	QL (Max day supply 7; Max 2 per day), PA
TYZEKA TAB 600MG	Tier 3	QL (30 tabs / 30 days)
VOSEVI TAB	Tier 4	PA
ZEPATIER TAB 50-100MG	Tier 4	QL (Max day supply 14; Max 1 per day), PA

Herpes Agents

<i>acyclovir cap 200 mg</i>	Tier 1	QL (150 caps / 30 days)
<i>acyclovir susp 200 mg/5ml</i>	Tier 1	QL (750 mL / 30 days)
<i>acyclovir tab 400 mg</i>	Tier 1	QL (150 tabs / 30 days)
<i>acyclovir tab 800 mg</i>	Tier 1	QL (150 tabs / 30 days)
<i>famciclovir tab 125 mg</i>	Tier 1	QL (90 tabs / 30 days)
<i>famciclovir tab 250 mg</i>	Tier 1	QL (90 tabs / 30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>famciclovir tab 500 mg</i>	Tier 1	QL (90 tabs / 30 days)
<i>valacyclovir hcl tab 1 gm</i>	Tier 1	QL (240 tabs / 30 days)
<i>valacyclovir hcl tab 500 mg</i>	Tier 1	QL (240 tabs / 30 days)

Influenza Agents

<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	Tier 2	QL (1 treatment per year)
<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	Tier 2	QL (1 treatment per year)
<i>oseltamivir phosphate cap 75 mg (base equiv)</i>	Tier 2	QL (1 treatment per year)
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	Tier 2	QL (1 mL / year)
RELENZA MIS DISKHALE	Tier 2	QL (60 per 30 Days)
<i>rimantadine hydrochloride tab 100 mg</i>	Tier 1	QL (60 per 30 Days)

ASSORTED CLASSES**Chelating Agents**

CUPRIMINE CAP 250MG	Tier 2	MAIL
DEPEN TITRA TAB 250MG	Tier 2	MAIL
SYPRINE CAP 250MG	Tier 3	MAIL
<i>trientine hcl cap 250 mg</i>	Tier 2	MAIL

Immunomodulators

REVLIMID CAP 2.5MG	Tier 4	PA
REVLIMID CAP 5MG	Tier 4	QL (30 caps / 30 days), PA
REVLIMID CAP 10MG	Tier 4	QL (30 caps / 30 days), PA
REVLIMID CAP 15MG	Tier 4	QL (30 caps / 30 days), PA
REVLIMID CAP 20MG	Tier 4	PA
REVLIMID CAP 25MG	Tier 4	QL (30 caps / 30 days), PA
THALOMID CAP 50MG	Tier 3	PA; MAIL
THALOMID CAP 100MG	Tier 3	PA; MAIL
THALOMID CAP 150MG	Tier 3	PA; MAIL
THALOMID CAP 200MG	Tier 3	PA; MAIL

Immunosuppressive Agents

<i>azathioprine tab 50 mg</i>	Tier 1	QL (240 tabs / 30 days); MAIL
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Drug Name	Drug Tier	Requirements/Limits
<i>cyclosporine cap 25 mg</i>	Tier 2	QL (480 caps / 30 days); MAIL
<i>cyclosporine cap 100 mg</i>	Tier 2	QL (150 caps / 30 days); MAIL
<i>cyclosporine modified cap 25 mg</i>	Tier 2	QL (450 ea / 30 days); MAIL
<i>cyclosporine modified cap 100 mg</i>	Tier 2	QL (300 ea / 30 days); MAIL
<i>cyclosporine modified oral soln 100 mg/ml</i>	Tier 2	QL (300 mL / 30 days); MAIL
<i>engraf cap 25mg</i>	Tier 2	QL (450 caps / 30 days); MAIL
<i>engraf cap 50mg</i>	Tier 2	QL (450 caps / 30 days); MAIL
<i>engraf cap 100mg</i>	Tier 2	QL (300 caps / 30 days); MAIL
<i>engraf sol 100mg/ml</i>	Tier 2	QL (300 mL / 30 days); MAIL
<i>mycophenolate mofetil cap 250 mg</i>	Tier 1	QL (360 caps / 30 days); MAIL
<i>mycophenolate mofetil tab 500 mg</i>	Tier 1	QL (240 tabs / 30 days); MAIL
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	Tier 2	MAIL
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	Tier 2	QL (120 tabs / 30 days); MAIL
NEORAL CAP 25MG	Tier 2	QL (450 ea / 30 days); MAIL
NEORAL CAP 100MG	Tier 2	QL (300 ea / 30 days); MAIL
NEORAL SOL 100MG/ML	Tier 2	QL (300 mL / 30 days); MAIL
NULOJIX INJ 250MG	Tier 3	PA; MAIL
RAPAMUNE SOL 1MG/ML	Tier 3	QL (240 mL / 30 days); MAIL
SANDIMMUNE CAP 25MG	Tier 2	QL (480 ea / 30 days); MAIL
SANDIMMUNE CAP 100MG	Tier 2	QL (150 ea / 30 days); MAIL
<i>sirolimus tab 0.5 mg</i>	Tier 2	QL (240 tabs / 30 days); MAIL

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Tier 3 = Non-preferred brand name drugs

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Drug Name	Drug Tier	Requirements/Limits
<i>sirolimus tab 1 mg</i>	Tier 2	QL (240 tabs / 30 days); MAIL
<i>sirolimus tab 2 mg</i>	Tier 2	MAIL
<i>tacrolimus cap 0.5 mg</i>	Tier 2	QL (60 caps / 30 days); MAIL
<i>tacrolimus cap 0.5 mg</i>	Tier 2	QL (60 ea / 30 days); MAIL
<i>tacrolimus cap 1 mg</i>	Tier 2	QL (420 caps / 30 days); MAIL
<i>tacrolimus cap 1 mg</i>	Tier 2	QL (420 ea / 30 days); MAIL
<i>tacrolimus cap 5 mg</i>	Tier 2	MAIL
ZORTRESS TAB 0.5MG	Tier 4	PA
ZORTRESS TAB 0.25MG	Tier 4	PA
ZORTRESS TAB 0.75MG	Tier 4	PA

Irrigation Solutions

<i>argyl saline sol 100ml</i>	Tier 1	MAIL
<i>physiolyte sol</i>	Tier 1	MAIL
<i>physiosol sol irrigat</i>	Tier 1	MAIL
<i>water for irrigation, sterile irrigation soln</i>	Tier 1	MAIL

Potassium Removing Resins

<i>kionex pow</i>	Tier 1	MAIL
<i>kionex sus 15gm/60</i>	Tier 1	MAIL

BETA BLOCKERS**Alpha-Beta Blockers**

<i>carvedilol tab 3.125 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>carvedilol tab 6.25 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>carvedilol tab 12.5 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>carvedilol tab 25 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>labetalol hcl tab 100 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>labetalol hcl tab 200 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>labetalol hcl tab 300 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
Beta Blockers Cardio-Selective		
<i>acebutolol hcl cap 200 mg</i>	Tier 1	QL (480 caps / 30 days); MAIL
<i>acebutolol hcl cap 400 mg</i>	Tier 1	QL (480 caps / 30 days); MAIL
<i>atenolol tab 25 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>atenolol tab 50 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>atenolol tab 100 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>bisoprolol fumarate tab 5 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>bisoprolol fumarate tab 10 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>metoprolol tartrate tab 25 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>metoprolol tartrate tab 50 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>metoprolol tartrate tab 75 mg</i>	Tier 1	MAIL
<i>metoprolol tartrate tab 100 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
Beta Blockers Non-Selective		
LEVATOL TAB 20MG	Tier 3	MAIL
<i>nadolol tab 20 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>nadolol tab 40 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>nadolol tab 80 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>propranolol hcl cap er 24hr 60 mg</i>	Tier 1	QL (90 ea / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>propranolol hcl cap er 24hr 80 mg</i>	Tier 1	QL (120 caps / 30 days); MAIL
<i>propranolol hcl cap er 24hr 120 mg</i>	Tier 1	QL (90 caps / 30 days); MAIL
<i>propranolol hcl cap er 24hr 160 mg</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>propranolol hcl oral soln 20 mg/5ml</i>	Tier 1	QL (600 mL / 30 days); MAIL
<i>propranolol hcl oral soln 40 mg/5ml</i>	Tier 1	QL (2400 mL / 30 days); MAIL
<i>propranolol hcl tab 10 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>propranolol hcl tab 20 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>propranolol hcl tab 40 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>propranolol hcl tab 60 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>propranolol hcl tab 80 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>sorine tab 80mg</i>	Tier 1	QL (60 ea / 30 days); MAIL
<i>sorine tab 120mg</i>	Tier 1	QL (60 ea / 30 days); MAIL
<i>sorine tab 160mg</i>	Tier 1	QL (60 ea / 30 days); MAIL
<i>sorine tab 240mg</i>	Tier 1	QL (60 ea / 30 days); MAIL
<i>sotalol hcl (afib/afl) tab 80 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>sotalol hcl (afib/afl) tab 120 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>sotalol hcl tab 80 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>sotalol hcl tab 120 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>sotalol hcl tab 160 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>sotalol hcl tab 240 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>timolol maleate tab 5 mg</i>	Tier 1	QL (360 tabs / 30 days); MAIL
<i>timolol maleate tab 10 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>timolol maleate tab 20 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL

CALCIUM CHANNEL BLOCKERS***Calcium Channel Blockers***

<i>afeditab tab 30mg cr</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>afeditab tab 60mg cr</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>amlodipine besylate tab 5 mg (base equivalent)</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>amlodipine besylate tab 10 mg (base equivalent)</i>	Tier 1	QL (30 ea / 30 days); MAIL
<i>cartia xt cap 180/24hr</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>cartia xt cap 240/24hr</i>	Tier 1	QL (30 caps / 30 days); MAIL
<i>cartia xt cap 300/24hr</i>	Tier 1	QL (30 caps / 30 days); MAIL
<i>dilt-xr cap 180mg</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>dilt-xr cap 240mg</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>diltiazem cap 180mg cd</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>diltiazem cap 240mg cd</i>	Tier 1	QL (30 caps / 30 days); MAIL
<i>diltiazem hcl cap er 24hr 120 mg</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>diltiazem hcl cap er 24hr 180 mg</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>diltiazem hcl cap er 24hr 240 mg</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>diltiazem hcl coated beads cap er 24hr 120 mg</i>	Tier 1	QL (30 caps / 30 days); MAIL

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Tier 2 = Non-Preferred generics; Preferred brand name drugs
Tier 3 = Non-preferred brand name drugs
Tier 4 = Specialty Drugs (available at an in-network retail pharmacy when indicated)
PREV = Preventative Services at \$0 copay; **DME** = Coinsurance may apply

Drug Name	Drug Tier	Requirements/Limits
<i>diltiazem hcl coated beads cap er 24hr 180 mg</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>diltiazem hcl coated beads cap er 24hr 240 mg</i>	Tier 1	QL (30 caps / 30 days); MAIL
<i>diltiazem hcl coated beads cap er 24hr 300 mg</i>	Tier 1	QL (30 caps / 30 days); MAIL
<i>diltiazem hcl extended release beads cap er 24hr 120 mg</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>diltiazem hcl extended release beads cap er 24hr 180 mg</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>diltiazem hcl extended release beads cap er 24hr 240 mg</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>diltiazem hcl extended release beads cap er 24hr 300 mg</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i>	Tier 1	QL (30 caps / 30 days); MAIL
<i>diltiazem hcl tab 30 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>diltiazem hcl tab 60 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>diltiazem hcl tab 90 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>diltiazem hcl tab 120 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>felodipine tab er 24hr 2.5 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>felodipine tab er 24hr 5 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>felodipine tab er 24hr 10 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>nicardipine hcl cap 20 mg</i>	Tier 1	QL (180 caps / 30 days); MAIL
<i>nicardipine hcl cap 30 mg</i>	Tier 1	QL (120 caps / 30 days); MAIL
<i>nifediac cc tab 30mg er</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>nifedical xl tab 60mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>nifedipine cap 10 mg</i>	Tier 1	AGE; MAIL

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MED - Max 90 mg Morphine EQ Dose Per Day

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Tier 2 = Non-Preferred generics; Preferred brand name drugs

Tier 3 = Non-preferred brand name drugs

Tier 4 = Specialty Drugs (available at an in-network retail pharmacy when indicated)

PREV = Preventative Services at \$0 copay; **DME** = Coinsurance may apply

Drug Name	Drug Tier	Requirements/Limits
<i>nifedipine cap 20 mg</i>	Tier 1	QL (120 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>nifedipine tab er 24hr 60 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>nifedipine tab er 24hr 90 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>nifedipine tab er 24hr osmotic release 30 mg</i>	Tier 1	QL (30 ea / 30 days); MAIL
<i>nifedipine tab er 24hr osmotic release 30 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>nifedipine tab er 24hr osmotic release 60 mg</i>	Tier 1	QL (30 ea / 30 days); MAIL
<i>nifedipine tab er 24hr osmotic release 90 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>taztia xt cap 120mg/24</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>taztia xt cap 180mg/24</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>taztia xt cap 240mg/24</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>verapamil hcl cap er 24hr 100 mg</i>	Tier 1	QL (30 caps / 30 days); MAIL
<i>verapamil hcl cap er 24hr 120 mg</i>	Tier 1	QL (30 caps / 30 days); MAIL
<i>verapamil hcl cap er 24hr 180 mg</i>	Tier 1	QL (30 caps / 30 days); MAIL
<i>verapamil hcl cap er 24hr 240 mg</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>verapamil hcl cap er 24hr 300 mg</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>verapamil hcl cap er 24hr 360 mg</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>verapamil hcl tab 40 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>verapamil hcl tab 80 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>verapamil hcl tab 120 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL

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Tier 3 = Non-preferred brand name drugs
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PREV = Preventative Services at \$0 copay; **DME** = Coinsurance may apply

Drug Name	Drug Tier	Requirements/Limits
<i>verapamil hcl tab er 120 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>verapamil hcl tab er 180 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>verapamil hcl tab er 240 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL

CARDIOTONICS***Cardiac Glycosides***

<i>digox tab 0.25mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>digox tab 0.125mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>digoxin oral soln 0.05 mg/ml</i>	Tier 1	MAIL; Covered for ages 12 and under
<i>digoxin tab 125 mcg (0.125 mg)</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>digoxin tab 250 mcg (0.25 mg)</i>	Tier 1	QL (30 tabs / 30 days); MAIL
LANOXIN TAB 0.25MG	Tier 2	QL (30 tabs / 30 days); MAIL
LANOXIN TAB 0.125MG	Tier 2	QL (30 tabs / 30 days); MAIL

CARDIOVASCULAR AGENTS - MISC.***Peripheral Vasodilators***

<i>niacin cap 500mg</i>	Tier 1	OTC; MAIL
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Prostaglandin Vasodilators

REMODYLIN INJ 1MG/ML	Tier 4	PA
REMODYLIN INJ 2.5MG/ML	Tier 4	PA
REMODYLIN INJ 5MG/ML	Tier 4	PA
VENTAVIS SOL 10MCG/ML	Tier 4	PA
VENTAVIS SOL 20MCG/ML	Tier 4	PA

Pulmonary Hypertension - Endothelin Receptor Antagonists

LETAIRIS TAB 5MG	Tier 4	QL (30 tabs / 30 days), PA
LETAIRIS TAB 10MG	Tier 4	QL (30 tabs / 30 days), PA
OPSUMIT TAB 10MG	Tier 4	QL (30 tabs / 30 days), PA
TRACLEER TAB 32MG	Tier 4	PA

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Drug Name	Drug Tier	Requirements/Limits
TRACLEER TAB 62.5MG	Tier 4	QL (60 tabs / 30 days), PA
TRACLEER TAB 125MG	Tier 4	QL (60 tabs / 30 days), PA

Pulmonary Hypertension - Phosphodiesterase Inhibitors

ADCIRCA TAB 20MG	Tier 4	PA
<i>sildenafil citrate tab 20 mg</i>	Tier 2	QL (90 tabs / 30 days), PA; MAIL
<i>tadalafil tab 20 mg (pah)</i>	Tier 4	PA

CEPHALOSPORINS

CEPHALOSPORINS - 3RD GENERATION

SUPRAX CAP 400MG	Tier 3	QL (60 caps / 30 days)
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Cephalosporins - 1st Generation

<i>cefadroxil for susp 250 mg/5ml</i>	Tier 1	Covered for ages 12 and under
<i>cefadroxil for susp 500 mg/5ml</i>	Tier 1	Covered for ages 12 and under
<i>cefazolin sodium for inj 1 gm</i>	Tier 1	PA
<i>cefazolin sodium for inj 20 gm</i>	Tier 1	PA
<i>cefazolin sodium for inj 500 mg</i>	Tier 1	PA
<i>cephalexin cap 250 mg</i>	Tier 1	QL (180 caps / 30 days)
<i>cephalexin cap 500 mg</i>	Tier 1	QL (180 caps / 30 days)
<i>cephalexin for susp 125 mg/5ml</i>	Tier 1	Covered for ages 12 and under
<i>cephalexin for susp 250 mg/5ml</i>	Tier 1	Covered for ages 12 and under

Cephalosporins - 2nd Generation

<i>cefaclor cap 250 mg</i>	Tier 1	QL (180 caps / 30 days)
<i>cefaclor for susp 125 mg/5ml</i>	Tier 2	QL (1200 mL / 30 days); Covered for ages 12 and under
<i>cefaclor for susp 250 mg/5ml</i>	Tier 2	QL (1800 mL / 30 days); Covered for ages 12 and under
CEFOTAN INJ 1GM/10ML	Tier 3	PA
CEFOTAN INJ 2GM/20ML	Tier 3	PA
CEFOTAN INJ 10G/100M	Tier 3	PA
CEFOTET/DEX INJ 1-3.58%	Tier 3	PA
CEFOTET/DEX INJ 2-2.08%	Tier 3	PA

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Tier 2 = Non-Preferred generics; Preferred brand name drugs
Tier 3 = Non-preferred brand name drugs
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Drug Name	Drug Tier	Requirements/Limits
CEFOTETAN DISODIUM FOR INJ 1 GM	Tier 3	PA
CEFOTETAN DISODIUM FOR INJ 2 GM	Tier 3	PA
CEFOTETAN DISODIUM FOR INJ 10 GM	Tier 3	PA
<i>cefoxitin sodium for inj 10 gm</i>	Tier 1	PA
<i>cefoxitin sodium for iv soln 1 gm</i>	Tier 1	PA
<i>cefoxitin sodium for iv soln 2 gm</i>	Tier 1	PA
<i>cefprozil for susp 125 mg/5ml</i>	Tier 1	Covered for ages 12 and under
<i>cefprozil for susp 250 mg/5ml</i>	Tier 1	Covered for ages 12 and under
<i>cefuroxime axetil tab 250 mg</i>	Tier 1	QL (Max day supply 10)
<i>cefuroxime axetil tab 500 mg</i>	Tier 1	QL (Max day supply 10)
Cephalosporins - 3rd Generation		
<i>cefdinir cap 300 mg</i>	Tier 1	QL (60 caps / 30 days)
<i>cefdinir for susp 125 mg/5ml</i>	Tier 1	Covered for ages 12 and under
<i>cefdinir for susp 250 mg/5ml</i>	Tier 1	Covered for ages 12 and under
<i>cefditoren pivoxil tab 200 mg (base equivalent)</i>	Tier 1	QL (120 tabs / 30 days), PA
<i>cefditoren pivoxil tab 400 mg (base equivalent)</i>	Tier 1	QL (60 tabs / 30 days), PA
<i>cefixime for susp 100 mg/5ml</i>	Tier 2	Covered for ages 12 and under
<i>cefixime for susp 200 mg/5ml</i>	Tier 2	Covered for ages 12 and under
<i>cefotaxime sodium for inj 1 gm</i>	Tier 1	PA
<i>cefotaxime sodium for inj 2 gm</i>	Tier 1	PA
<i>cefotaxime sodium for inj 10 gm</i>	Tier 1	PA
<i>cefotaxime sodium for inj 500 mg</i>	Tier 1	PA
<i>cefpodoxime proxetil for susp 50 mg/5ml</i>	Tier 2	QL (1200 mL / 30 days)
<i>cefpodoxime proxetil for susp 100 mg/5ml</i>	Tier 2	QL (1200 mL / 30 days)
<i>cefpodoxime proxetil tab 100 mg</i>	Tier 1	QL (60 tabs / 30 days)
<i>cefpodoxime proxetil tab 200 mg</i>	Tier 1	QL (60 tabs / 30 days)
<i>ceftibuten cap 400 mg</i>	Tier 1	QL (30 caps / 30 days), PA
CLAFORAN INJ 2GM	Tier 2	PA
CLAFORAN/D5W INJ 1GM	Tier 2	PA
SUPRAX TAB 400MG	Tier 3	QL (60 tabs / 30 days)

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Drug Name	Drug Tier	Requirements/Limits
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CHEMICALS**BULK CHEMICALS - H'S**

HYDROXYPROG POW CAPROATE	Tier 2	Covered for ages 16-60
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LIQUIDS

BENZYL BENZO LIQ	Tier 2	MAIL; Covered for ages 16-60
SESAME OIL	Tier 2	

COMPLEMENT INHIBITORS**C1 INHIBITORS**

BERINERT INJ 500UNIT	Tier 4	PA
CINRYZE SOL 500 UNIT	Tier 4	PA
RUCONEST INJ 2100UNIT	Tier 4	PA

CONTRACEPTIVES**Combination Contraceptives - Oral**

<i>altavera tab</i>	PREV	MAIL
<i>alyacen tab 1/35</i>	PREV	MAIL
<i>alyacen tab 7/7/7</i>	PREV	QL (Max day supply 365; Max 1 per day); MAIL
<i>amethia tab</i>	PREV	QL (Max day supply 364; Max 1 per day); MAIL
<i>amethyst tab 90-20mcg</i>	PREV	MAIL
<i>apri tab</i>	PREV	MAIL
<i>aranelle tab</i>	PREV	MAIL
<i>ashlyna tab</i>	PREV	QL (Max day supply 364; Max 1 per day); MAIL
<i>aubra tab 0.1-0.02</i>	PREV	MAIL
<i>aviane tab</i>	PREV	MAIL
<i>azurette tab 28 day</i>	PREV	QL (Max day supply 365; Max 1 per day); MAIL
<i>balziva tab</i>	PREV	MAIL
<i>briellyn tab</i>	PREV	MAIL
<i>camrese tab</i>	PREV	QL (Max day supply 364; Max 1 per day); MAIL
<i>caziant pak</i>	PREV	MAIL

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Tier 1 = Generics; Low cost preferred brand

Tier 2 = Non-Preferred generics; Preferred brand name drugs

Tier 3 = Non-preferred brand name drugs

Tier 4 = Specialty Drugs (available at an in-network retail pharmacy when indicated)

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Drug Name	Drug Tier	Requirements/Limits
<i>cesia pak</i>	PREV	MAIL
<i>chateal eq tab 0.15/30</i>	PREV	MAIL
<i>cryselle-28 tab 28 tabs</i>	PREV	MAIL
<i>cyclafem tab 1/35</i>	PREV	MAIL
<i>cyclafem tab 7/7/7</i>	PREV	QL (Max day supply 365; Max 1 per day); MAIL
<i>dasetta tab 1/35</i>	PREV	MAIL
<i>dasetta tab 7/7/7</i>	PREV	QL (Max day supply 365; Max 1 per day); MAIL
<i>daysee tab</i>	PREV	QL (Max day supply 364; Max 1 per day); MAIL
<i>delyla tab 0.1-0.02</i>	PREV	MAIL
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	PREV	QL (Max day supply 365; Max 1 per day); MAIL
<i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	PREV	MAIL
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	PREV	MAIL
<i>elinest tab</i>	PREV	MAIL
<i>emoquette tab</i>	PREV	MAIL
<i>enpresse-28 tab</i>	PREV	MAIL
<i>enskyce tab</i>	PREV	MAIL
<i>estarylla tab 0.25-35</i>	PREV	MAIL
<i>falmina tab</i>	PREV	MAIL
<i>gianvi tab 3-0.02mg</i>	PREV	MAIL
<i>gildagia tab 0.4-35</i>	PREV	MAIL
<i>gildess fe tab 1.5/30</i>	PREV	MAIL
<i>gildess fe tab 1/20</i>	PREV	MAIL
<i>introvale tab</i>	PREV	QL (Max day supply 364; Max 1 per day); MAIL
<i>jolessa tab</i>	PREV	QL (Max day supply 364; Max 1 per day); MAIL
<i>junel 1.5/30 tab</i>	PREV	MAIL
<i>junel 1/20 tab</i>	PREV	MAIL

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Tier 1 = Generics; Low cost preferred brand

Tier 2 = Non-Preferred generics; Preferred brand name drugs

Tier 3 = Non-preferred brand name drugs

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Drug Name	Drug Tier	Requirements/Limits
<i>junel fe tab 1.5/30</i>	PREV	MAIL
<i>junel fe tab 1/20</i>	PREV	MAIL
<i>kariva tab 28 day</i>	PREV	QL (Max day supply 365; Max 1 per day); MAIL
<i>kelnor tab 1/35</i>	PREV	MAIL
<i>kurvelo tab 0.15/30</i>	PREV	MAIL
<i>larin fe tab 1.5/30</i>	PREV	MAIL
<i>larin fe tab 1/20</i>	PREV	MAIL
<i>larin tab 1.5/30</i>	PREV	MAIL
<i>larin tab 1/20</i>	PREV	MAIL
<i>leena tab</i>	PREV	MAIL
<i>lessina tab</i>	PREV	MAIL
<i>levonest tab</i>	PREV	MAIL
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	PREV	QL (Max day supply 364; Max 1 per day); MAIL
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	PREV	QL (Max day supply 364; Max 1 per day); MAIL
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	PREV	MAIL
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	PREV	MAIL
<i>levora-28 tab 0.15/30</i>	PREV	MAIL
<i>loryna tab 3-0.02mg</i>	PREV	MAIL
<i>low-ogestrel tab</i>	PREV	MAIL
<i>lutra tab</i>	PREV	MAIL
<i>marlissa tab 0.15/30</i>	PREV	MAIL
<i>microgestin tab 1.5/30</i>	PREV	MAIL
<i>microgestin tab 1/20</i>	PREV	MAIL
<i>microgestin tab fe1.5/30</i>	PREV	MAIL
<i>microgestin tab fe 1/20</i>	PREV	MAIL
<i>mono-lynyah tab 0.25-35</i>	PREV	MAIL
<i>mononessa tab</i>	PREV	MAIL
<i>myzilra tab</i>	PREV	MAIL
<i>necon tab 0.5/35</i>	PREV	MAIL
<i>necon tab 1/35</i>	PREV	MAIL
<i>necon tab 1/50-28</i>	PREV	MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>necon tab 7/7/7</i>	PREV	QL (Max day supply 365; Max 1 per day); MAIL
<i>norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i>	PREV	MAIL
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	PREV	MAIL
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	PREV	MAIL
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	PREV	QL (Max day supply 365; Max 1 per day); MAIL
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	PREV	MAIL
<i>nortrel tab 0.5/35</i>	PREV	MAIL
<i>nortrel tab 1/35</i>	PREV	MAIL
<i>nortrel tab 7/7/7</i>	PREV	QL (Max day supply 365; Max 1 per day); MAIL
<i>ocella tab 3-0.03mg</i>	PREV	MAIL
<i>ogestrel tab</i>	PREV	MAIL
<i>orsythia tab</i>	PREV	MAIL
<i>philith tab 0.4-35</i>	PREV	MAIL
<i>pimtrea tab</i>	PREV	QL (Max day supply 365; Max 1 per day); MAIL
<i>pirmella tab 1/35</i>	PREV	MAIL
<i>pirmella tab 7/7/7</i>	PREV	QL (Max day supply 365; Max 1 per day); MAIL
<i>portia-28 tab</i>	PREV	MAIL
<i>previfem tab</i>	PREV	MAIL
<i>quasense tab</i>	PREV	QL (Max day supply 364; Max 1 per day); MAIL
<i>reclipsen tab</i>	PREV	MAIL
<i>setlakin tab</i>	PREV	QL (Max day supply 364; Max 1 per day); MAIL
<i>solia tab</i>	PREV	MAIL
<i>sprintec 28 tab 28 day</i>	PREV	MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>sronyx tab</i>	PREV	MAIL
<i>syeda tab 3-0.03mg</i>	PREV	MAIL
<i>tilia fe tab</i>	PREV	MAIL
<i>tri-estaryl tab</i>	PREV	MAIL
<i>tri-legest tab fe</i>	PREV	MAIL
<i>tri-linyah tab</i>	PREV	MAIL
<i>tri-previfem tab</i>	PREV	MAIL
<i>tri-sprintec tab</i>	PREV	MAIL
<i>trinessa tab</i>	PREV	MAIL
<i>trivora-28 tab</i>	PREV	MAIL
<i>velivet pak</i>	PREV	MAIL
<i>vestura tab 3-0.02mg</i>	PREV	MAIL
<i>viorele tab</i>	PREV	QL (Max day supply 365; Max 1 per day); MAIL
<i>vyfemla tab 0.4-35</i>	PREV	MAIL
<i>wera tab 0.5/35</i>	PREV	MAIL
<i>wymzya fe chw 0.4mg-35</i>	PREV	MAIL
<i>zarah tab 3-0.03mg</i>	PREV	MAIL
<i>zenchent fe chw 0.4mg-35</i>	PREV	MAIL
<i>zenchent tab</i>	PREV	MAIL
<i>zovia 1/35e tab</i>	PREV	MAIL
<i>zovia 1/50e tab</i>	PREV	MAIL
Combination Contraceptives - Transdermal		
<i>xulane dis 150-35</i>	PREV	QL (Max day supply 365); MAIL
Combination Contraceptives - Vaginal		
NUVARING MIS	PREV	QL (Max day supply 365); MAIL
Copper Contraceptives - IUD		
PARAGARD IUD T380A	PREV	PA; Covered through Medical Benefit
Emergency Contraceptives		
ELLA TAB 30MG	PREV	QL (4 tabs / year)
<i>levonorgestrel tab 1.5 mg</i>	PREV	OTC, QL (Max 4 fills per year)
<i>my way tab 1.5mg</i>	PREV	OTC, QL (Max 4 fills per year)

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Drug Name	Drug Tier	Requirements/Limits
<i>next choice tab 1.5mg</i>	PREV	OTC, QL (Max 4 fills per year)
Progestin Contraceptives - IUD		
KYLEENA IUD 19.5MG	PREV	QL (1 IUD / 5 years)
LILETTA IUD 52MG	PREV	QL (1 IUD / 3 years)
MIRENA IUD SYSTEM	PREV	QL (1 IUD / 5 years)
SKYLA IUD 13.5MG	PREV	QL (1 IUD / 3 years)
Progestin Contraceptives - Injectable		
<i>medroxyprogesterone acetate im susp 150 mg/ml</i>	PREV	QL (Max day supply 365); MAIL
<i>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml</i>	PREV	QL (Max day supply 365); MAIL
Progestin Contraceptives - Oral		
<i>camila tab 0.35mg</i>	PREV	QL (Max day supply 365; Max 1 per day); MAIL
<i>errin tab 0.35mg</i>	PREV	QL (Max day supply 365; Max 1 per day); MAIL
<i>heather tab 0.35mg</i>	PREV	QL (Max day supply 365; Max 1 per day); MAIL
<i>jencycla tab 0.35mg</i>	PREV	QL (Max day supply 365; Max 1 per day); MAIL
<i>jolivette tab 0.35mg</i>	PREV	QL (Max day supply 365; Max 1 per day); MAIL
<i>lyza tab 0.35mg</i>	PREV	QL (Max day supply 365; Max 1 per day); MAIL
<i>nora-be tab 0.35mg</i>	PREV	QL (Max day supply 365; Max 1 per day); MAIL
<i>norethindrone tab 0.35 mg</i>	PREV	QL (Max day supply 365; Max 1 per day); MAIL

CORTICOSTEROIDS**GLUCOCORTICOSTEROIDS**

<i>prednisone tab therapy pack 5 mg (21)</i>	Tier 1
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Drug Name	Drug Tier	Requirements/Limits
<i>prednisone tab therapy pack 10 mg (21)</i>	Tier 1	
Glucocorticosteroids		
<i>budesonide delayed release particles cap 3 mg</i>	Tier 2	PA; MAIL
<i>cortisone acetate tab 25 mg</i>	Tier 1	QL (720 tabs / 30 days); MAIL
<i>dexamethasone elixir 0.5 mg/5ml</i>	Tier 1	QL (1800 mL / 30 days); MAIL
<i>dexamethasone sod phosphate preservative free inj 10 mg/ml</i>	Tier 1	MAIL
<i>dexamethasone sodium phosphate inj 10 mg/ml</i>	Tier 1	MAIL
<i>dexamethasone sodium phosphate inj 100 mg/10ml</i>	Tier 1	MAIL
<i>dexamethasone soln 0.5 mg/5ml</i>	Tier 1	MAIL
<i>dexamethasone tab 0.5 mg</i>	Tier 1	QL (360 tabs / 30 days); MAIL
<i>dexamethasone tab 0.75 mg</i>	Tier 1	QL (300 tabs / 30 days); MAIL
<i>dexamethasone tab 1 mg</i>	Tier 1	QL (300 tabs / 30 days); MAIL
<i>dexamethasone tab 1.5 mg</i>	Tier 1	QL (300 tabs / 30 days); MAIL
<i>dexamethasone tab 2 mg</i>	Tier 1	QL (300 tabs / 30 days); MAIL
<i>dexamethasone tab 4 mg</i>	Tier 1	QL (300 tabs / 30 days); MAIL
<i>dexamethasone tab 6 mg</i>	Tier 1	QL (300 tabs / 30 days); MAIL
<i>hydrocortisone tab 5 mg</i>	Tier 1	QL (720 tabs / 30 days); MAIL
<i>hydrocortisone tab 10 mg</i>	Tier 1	QL (360 ea / 30 days); MAIL
<i>hydrocortisone tab 20 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>methylprednisolone tab 4 mg</i>	Tier 1	QL (360 tabs / 30 days); MAIL
<i>methylprednisolone tab 8 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>methylprednisolone tab 16 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>methylprednisolone tab 32 mg</i>	Tier 1	QL (360 tabs / 30 days); MAIL
<i>methylprednisolone tab therapy pack 4 mg (21)</i>	Tier 1	QL (360 tabs / 30 days); MAIL
<i>prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)</i>	Tier 1	MAIL
<i>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</i>	Tier 1	QL (1500 mL / 30 days); MAIL
<i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</i>	Tier 1	MAIL
<i>prednisolone syrup 15 mg/5ml (usp solution equivalent)</i>	Tier 1	QL (1800 mL / 30 days); MAIL
<i>prednisone oral soln 5 mg/5ml</i>	Tier 1	QL (1800 mL / 30 days); MAIL
<i>prednisone tab 1 mg</i>	Tier 1	QL (300 tabs / 30 days); MAIL
<i>prednisone tab 2.5 mg</i>	Tier 1	QL (240 tabs / 30 days); MAIL
<i>prednisone tab 5 mg</i>	Tier 1	QL (480 tabs / 30 days); MAIL
<i>prednisone tab 10 mg</i>	Tier 1	QL (270 tabs / 30 days); MAIL
<i>prednisone tab 20 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>prednisone tab 50 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>prednisone tab therapy pack 5 mg (48)</i>	Tier 1	MAIL
<i>prednisone tab therapy pack 10 mg (48)</i>	Tier 1	MAIL

Mineralocorticoids

<i>fludrocortisone acetate tab 0.1 mg</i>	Tier 1	QL (150 ea / 30 days); MAIL
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COUGH/COLD/ALLERGY**Antitussives**

<i>benzonatate cap 100 mg</i>	Tier 1	QL (180 caps / 30 days); MAIL
<i>benzonatate cap 200 mg</i>	Tier 1	QL (150 caps / 30 days); MAIL
<i>hydrocodone w/ homatropine syrup 5-1.5 mg/5ml</i>	Tier 1	QL (1800 mL / 30 days)
<i>hydromet syp 5-1.5/5</i>	Tier 1	QL (1800 mL / 30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>robitussin syp 7.5/5ml</i>	Tier 1	OTC, QL (180 mL / 30 days); MAIL; Covered for ages 4 and over
<i>triaminic syp cough</i>	Tier 1	OTC, QL (180 mL / 30 days); MAIL; Covered for ages 4 and over
Cough/Cold/Allergy Combinations		
<i>alavert alrg tab /sinus</i>	Tier 1	OTC, QL (60 ea / 30 days); MAIL
<i>all day alrg tab 5-120mg</i>	Tier 1	OTC, QL (60 ea / 30 days); MAIL; Covered for ages 4 and over
<i>aller-tec d tab 5-120mg</i>	Tier 1	OTC, QL (60 ea / 30 days); MAIL; Covered for ages 4 and over
<i>aller/conges tab 10-240mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>allerclear d tab 5-120mg</i>	Tier 1	OTC, QL (60 ea / 30 days); MAIL
<i>allerclear d tab 10-240mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>allerclear tab d-24hr</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>allergy d tab 5-120mg</i>	Tier 1	OTC, QL (60 ea / 30 days); MAIL; Covered for ages 4 and over
<i>allergy rel/ tab deconges</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>allergy relf tab 5-120mg</i>	Tier 1	OTC, QL (60 ea / 30 days); MAIL
<i>allergy relf tab 5-120mg</i>	Tier 1	OTC, QL (60 ea / 30 days); MAIL; Covered for ages 4 and over
<i>allergy relf tab /congest</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>allergy relf tab d</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>allergy relf tab d12</i>	Tier 1	OTC, QL (60 ea / 30 days); MAIL
<i>allergy relf tab d 24 hr</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>allergy relf tab d-24</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>allergy relf tab deconges</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>allergy-d tab 5-120mg</i>	Tier 1	OTC, QL (60 ea / 30 days); MAIL; Covered for ages 4 and over
<i>allergy/cong tab 5-120mg</i>	Tier 1	OTC, QL (60 ea / 30 days); MAIL
<i>allgy comp-d tab 5-120mg</i>	Tier 1	OTC, QL (60 ea / 30 days); MAIL; Covered for ages 4 and over
<i>allrgy rel d tab 10-240mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>allrgy relf tab 5-120mg</i>	Tier 1	OTC, QL (60 ea / 30 days); MAIL; Covered for ages 4 and over
<i>allrgy rlf-d tab 5-120mg</i>	Tier 1	OTC, QL (60 ea / 30 days); MAIL
<i>altarusn dm syp 100-10/5</i>	Tier 1	OTC, QL (180 mL / 25 days); MAIL
<i>biocotron liq 100-10/5</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>bromfed dm syp</i>	Tier 1	QL (1800 mL / 30 days); MAIL
<i>brotapp dm liq 15-1-5/5</i>	Tier 1	OTC, QL (1800 mL / 30 days); MAIL
<i>brotapp liq</i>	Tier 1	OTC, QL (480 mL / 25 days); MAIL
CAPMIST DM TAB	Tier 2	OTC; MAIL
<i>cetirizine-pseudoephedrine tab er 12hr 5-120 mg</i>	Tier 1	OTC, QL (60 ea / 30 days); MAIL; Covered for ages 4 and over
<i>cgh dm max liq 10-200</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>cheratussin syp ac</i>	Tier 1	OTC, QL (1800 mL / 30 days); Covered for ages 2 and over
<i>cold & cough liq 6.25-2.5</i>	Tier 1	OTC, QL (180 mL / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>cold/allergy elx children</i>	Tier 1	OTC, QL (480 mL / 25 days); MAIL
<i>cold/cough elx children</i>	Tier 1	OTC, QL (1800 mL / 30 days); MAIL
<i>cold/cough elx dm</i>	Tier 1	OTC, QL (1800 mL / 30 days); MAIL
<i>cold/cough liq 6.25-2.5</i>	Tier 1	OTC, QL (180 mL / 30 days); MAIL
<i>cough cont liq dm max</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>dextromethorphan-guaifenesin liquid 10-100 mg/5ml</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>dextromethorphan-guaifenesin syrup 10-100 mg/5ml</i>	Tier 1	OTC, QL (180 mL / 25 days); MAIL
<i>diabetic tus liq children</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>diabetic tus liq dm</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>diabetic tus liq max st</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>dimetapp liq nighttim</i>	Tier 1	OTC, QL (180 mL / 30 days); MAIL
<i>eq tussin dm liq max</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>eq tussin dm syp cgh/chst</i>	Tier 1	OTC, QL (180 mL / 25 days); MAIL
<i>eq allergy tab 10-240mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>eq triactin elx cld/cgh</i>	Tier 1	OTC, QL (1800 mL / 30 days); MAIL
<i>eq tussin liq 10-200</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>eq tussin syp dm</i>	Tier 1	OTC, QL (180 mL / 25 days); MAIL
<i>extra action syp 100-10/5</i>	Tier 1	OTC, QL (180 mL / 25 days); MAIL
<i>g-tron liq 10-100/5</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>geri-tussin syp dm</i>	Tier 1	OTC, QL (180 mL / 25 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>gnp tussin liq dm cough</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>gnp tussin liq dm max</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>guaiasorb dm liq 100-10/5</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>guaiatuss ac syp 100-10/5</i>	Tier 1	OTC, QL (1800 mL / 30 days); Covered for ages 2 and over
<i>guaicon dms syp 100-10/5</i>	Tier 1	OTC, QL (180 mL / 25 days); MAIL
<i>guaifenesin syp 100-10/5</i>	Tier 1	OTC, QL (1800 mL / 30 days); Covered for ages 2 and over
<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	Tier 1	OTC, QL (1800 mL / 30 days); Covered for ages 2 and over
<i>hm tussin liq adlt dm</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>hm tussin liq dm max</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>lorata-dine tab d 24hr</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>loratadine d tab 5-120mg</i>	Tier 1	OTC, QL (60 ea / 30 days); MAIL
<i>loratadine-d tab 5-120mg</i>	Tier 1	OTC, QL (60 ea / 30 days); MAIL
<i>loratadine-d tab 10-240mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>medi-tuss dm liq diabetic</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>medi-tussin syp dm</i>	Tier 1	OTC, QL (180 mL / 25 days); MAIL
<i>mucus relf d tab 60-600mg</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>mucus-dm tab 30-600mg</i>	Tier 1	OTC, QL (60 ea / 30 days); MAIL
<i>ped formula liq 100-10/5</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
PRO-CLEAR AC SYP 9-8.33MG	Tier 1	OTC, QL (180 mL / 25 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>prometh vc sol plain</i>	Tier 1	QL (1800 mL / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>prometh vc/ syp codeine</i>	Tier 1	QL (1800 mL / 30 days); AGE; Covered for ages 2-64
<i>promethazine & phenylephrine syrup 6.25-5 mg/5ml</i>	Tier 1	QL (1800 mL / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	Tier 1	QL (240 mL / 30 days); AGE; Covered for ages 2-64
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	Tier 1	QL (180 mL / 25 days); AGE; MAIL; Covered for ages 4-64
<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	Tier 1	QL (1800 mL / 30 days); MAIL
<i>px tussin dm liq 100-10/5</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>q-tapp dm elx</i>	Tier 1	OTC, QL (1800 mL / 30 days); MAIL
<i>q-tussin dm syp 100-10/5</i>	Tier 1	OTC, QL (180 mL / 25 days); MAIL
<i>ra allergy tab sinus</i>	Tier 1	OTC; MAIL
<i>ra cetiri-d tab 5-120mg</i>	Tier 1	OTC, QL (60 ea / 30 days); MAIL; Covered for ages 4 and over
<i>ra lorata-d tab 24 hour</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ra tussin dm liq 100-10/5</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>ra tussin liq dm max</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>robafen dm syp 100-10/5</i>	Tier 1	OTC, QL (180 mL / 25 days); MAIL
<i>robitussin liq cgh/cong</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>robitussin liq to go dm</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>rynex pse liq</i>	Tier 1	OTC, QL (480 mL / 25 days); MAIL
<i>safe tussin liq 10-100/5</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>sb cgh contr liq dm</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>siltussin dm liq das</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>siltussin-dm liq diabetic</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>siltussin-dm liq max st</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>siltussin-dm syp alc free</i>	Tier 1	OTC, QL (180 mL / 25 days); MAIL
<i>sm tussin dm liq max</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>sm tussin dm syp 100-10/5</i>	Tier 1	OTC, QL (180 mL / 25 days); MAIL
<i>sm tussin syp dm</i>	Tier 1	OTC, QL (180 mL / 25 days); MAIL
<i>tgt allergy/ tab congest</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>tgt cough liq form dm</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>tolu-sed dm liq 100-10/5</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>triacting nt liq cold/cgh</i>	Tier 1	OTC, QL (180 mL / 30 days); MAIL
<i>tusnel diabt liq 10-100/5</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>tussin adult liq cgh/cong</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>tussin cough liq 10-100/5</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>tussin cough syp dm</i>	Tier 1	OTC, QL (180 mL / 25 days); MAIL
<i>tussin dm cg liq 20-400</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>tussin dm liq</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>tussin dm liq 10-100mg</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>tussin dm liq 10-200</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>tussin dm liq 10-200/5</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>tussin dm liq clear</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>tussin dm mx liq 10-200/5</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>tussin dm syp 100-10/5</i>	Tier 1	OTC, QL (180 mL / 25 days); MAIL
<i>virtussin ac sol 100-10/5</i>	Tier 1	OTC, QL (1800 mL / 30 days); Covered for ages 2 and over
<i>wal-dryl pe tab 25-10mg</i>	Tier 1	OTC; MAIL
<i>wal-itin d tab 5-120mg</i>	Tier 1	OTC, QL (60 ea / 30 days); MAIL
<i>wal-itin d tab 10-240mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>wal-itin d tab 24 hour</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>wal-tap dm elx cold/cgh</i>	Tier 1	OTC, QL (1800 mL / 30 days); MAIL
<i>wal-tap elx cld/alle</i>	Tier 1	OTC, QL (480 mL / 25 days); MAIL
<i>wal-tussin liq 10-100/5</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>wal-tussin liq 10-200/5</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>wal-tussin liq dm max</i>	Tier 1	OTC, QL (90 mL / 30 days); MAIL
<i>wal-tussin syp dm</i>	Tier 1	OTC, QL (180 mL / 25 days); MAIL
<i>wal-zyr d tab 5-120mg</i>	Tier 1	OTC, QL (60 ea / 30 days); MAIL; Covered for ages 4 and over

Expectorants

<i>altarussin syp 100/5ml</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
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Drug Name	Drug Tier	Requirements/Limits
<i>bidex tab 400mg</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>buckleys liq chest</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>chest conges liq child</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>chest conges liq childrns</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>chest conges tab 400mg</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>cough syp</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>cough syp 100/5ml</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>coughtab tab 200mg</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>cvs mucus er tab 600mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>diabetic tus liq 100/5ml</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>diabtc tussn syp 100/5ml</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>eq tussin liq 100/5ml</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>fenesin ir tab 400mg</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>g-fen ex tab 400mg</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>geri-tussin syp 100/5ml</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>gnp mucus-er tab 600mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>gnp tussin syp 100/5ml</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>guaifenesin liquid 100 mg/5ml</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>guaifenesin syrup 100 mg/5ml</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>guaifenesin tab 200 mg</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over

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Drug Name	Drug Tier	Requirements/Limits
<i>guaifenesin tab 400 mg</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>guaifenesin tab er 12hr 600 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>hm mucus er tab 600mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>liquibid tab 400mg</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>medifin 400 tab 400mg</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>mucinex chld liq 100/5ml</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>mucosa tab 400mg</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>mucus relief liq 100/5ml</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>mucus relief liq 400/20ml</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>mucus relief tab 400mg</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>mucus relief tab 600mg er</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>mucus+chst liq 100/5ml</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>mucus-er tab 600mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>organ-i nr tab 200mg</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>pa mucus rel tab 600mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>px tussin sol 100/5ml</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>qc medifin liq mucus rl</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>ra tussin liq 100/5ml</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>ra tussin syp 100/5ml</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>refenesen tab 200mg</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over

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Drug Name	Drug Tier	Requirements/Limits
<i>refenesen tab 400mg</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>robafen syp 100/5ml</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>sb cgh contr syp 100/5ml</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>scot-tussin liq expct sf</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>siltuss das liq 100/5ml</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>siltussin sa syp 100/5ml</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>sm mucus er tab 600mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>sm tussin syp 100/5ml</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>tab tussin tab 400mg</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>tussin adult liq 100/5ml</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>tussin chest syp 100/5ml</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>tussin syp 100/5ml</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>wal-tussin syp 100/5ml</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
<i>xpect tab 400mg</i>	Tier 1	OTC; MAIL; Covered for ages 4 and over
Misc. Respiratory Inhalants		
<i>nebusal neb 3%</i>	Tier 1	QL (480 mL / 30 days); MAIL
<i>sodium chloride soln nebu 0.9%</i>	Tier 1	QL (480 mL / 30 days); MAIL
<i>sodium chloride soln nebu 3%</i>	Tier 1	QL (480 mL / 30 days); MAIL
<i>sodium chloride soln nebu 7%</i>	Tier 1	QL (480 mL / 30 days); MAIL
Mucolytics		
<i>acetylcysteine inhal soln 20%</i>	Tier 1	QL (Max day supply 5 per 25); MAIL

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Drug Name	Drug Tier	Requirements/Limits
DERMATOLOGICALS		
ANTIFUNGALS - TOPICAL		
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	Tier 1	QL (60 mL / 30 days)
<i>ciclopirox solution 8%</i>	Tier 1	QL (6.6 mL / 30 days)
ANTIPSORIATICS		
SKYRIZI INJ 150DOSE	Tier 4	PA; Preferred Brand
Acne Products		
ACNE MEDICAT LOT 5%	Tier 1	OTC, QL (141 mL / 25 days); MAIL
ACNE MEDICAT LOT 10%	Tier 1	OTC, QL (30 mL / 25 days); MAIL
<i>adapalene cream 0.1%</i>	Tier 1	QL (45 gm / 25 days); MAIL
<i>adapalene gel 0.1%</i>	Tier 1	QL (45 gm / 25 days); MAIL
<i>adapalene gel 0.3%</i>	Tier 2	QL (45 gm / 25 days); MAIL
<i>adapalene lotion 0.1%</i>	Tier 1	QL (59 mL / 25 days); MAIL
<i>amneesteem cap 10mg</i>	Tier 2	PA; MAIL
<i>amneesteem cap 20mg</i>	Tier 2	PA; MAIL
<i>amneesteem cap 40mg</i>	Tier 2	PA; MAIL
<i>avita cre 0.025%</i>	Tier 2	QL (45 gms per month); AGE; MAIL; Covered for ages 35 and younger
<i>avita gel 0.025%</i>	Tier 2	QL (45 gms per month); AGE; MAIL; Covered for ages 35 and younger
<i>benzoyl per liq 5% wash</i>	Tier 1	OTC, QL (240 gm / 25 days); MAIL
<i>benzoyl per liq 10% wash</i>	Tier 1	OTC, QL (240 gm / 25 days); MAIL
<i>benzoyl peroxide gel 5%</i>	Tier 1	OTC; MAIL
<i>benzoyl peroxide gel 10%</i>	Tier 1	OTC; MAIL
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	Tier 2	MAIL
<i>claravis cap 10mg</i>	Tier 2	PA; MAIL
<i>claravis cap 20mg</i>	Tier 2	PA; MAIL
<i>claravis cap 30mg</i>	Tier 2	PA; MAIL
<i>claravis cap 40mg</i>	Tier 2	PA; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i>	Tier 2	QL (45 gm / 25 days), PA; MAIL
<i>clindamycin phosphate gel 1%</i>	Tier 1	QL (60 gm / 25 days); MAIL
<i>clindamycin phosphate lotion 1%</i>	Tier 1	QL (300 mL / 30 days), ST; MAIL; PRIOR USE OF Clindamycin Phosphate topical and Adapalene or Erythromycin and Adapalene
<i>clindamycin phosphate soln 1%</i>	Tier 1	QL (300 mL / 30 days); MAIL
<i>erythromycin gel 2%</i>	Tier 1	QL (450 gm / 30 days), ST; MAIL; PRIOR USE OF Clindamycin Phosphate topical or Erythromycin and Adapalene OR Tretinoin
<i>erythromycin soln 2%</i>	Tier 1	QL (450 mL / 30 days); MAIL
<i>isotretinoin cap 10 mg</i>	Tier 2	PA; MAIL
<i>isotretinoin cap 20 mg</i>	Tier 2	PA; MAIL
<i>isotretinoin cap 30 mg</i>	Tier 2	PA; MAIL
<i>isotretinoin cap 40 mg</i>	Tier 2	PA; MAIL
<i>myorisan cap 10mg</i>	Tier 2	PA; MAIL
<i>myorisan cap 20mg</i>	Tier 2	PA; MAIL
<i>myorisan cap 30mg</i>	Tier 2	PA; MAIL
<i>myorisan cap 40mg</i>	Tier 2	PA; MAIL
<i>tretinoin cream 0.1%</i>	Tier 1	QL (45 gms per month), ST; AGE; MAIL; Covered for ages 35 and younger; PRIOR USE OF Clindamycin Phosphate topical and Adapalene OR Erythromycin and Adapalene

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Drug Name	Drug Tier	Requirements/Limits
<i>tretinoin cream 0.05%</i>	Tier 1	QL (45 gms per month), ST; AGE; MAIL; Covered for ages 35 and younger; PRIOR USE OF Clindamycin Phosphate topical and Adapalene OR Erythromycin and Adapalene
<i>tretinoin cream 0.025%</i>	Tier 2	QL (45 gms per month); AGE; MAIL; Covered for ages 35 and younger
<i>tretinoin gel 0.01%</i>	Tier 1	QL (45 gms per month), ST; AGE; MAIL; Covered for ages 35 and younger; PRIOR USE OF Clindamycin Phosphate topical and Adapalene OR Erythromycin and Adapalene
<i>tretinoin gel 0.025%</i>	Tier 2	QL (45 gms per month); AGE; MAIL; Covered for ages 35 and younger
<i>zenatane cap 10mg</i>	Tier 2	PA; MAIL
<i>zenatane cap 20mg</i>	Tier 2	PA; MAIL
<i>zenatane cap 30mg</i>	Tier 2	PA; MAIL
<i>zenatane cap 40mg</i>	Tier 2	PA; MAIL
Anti-inflammatory Agents - Topical		
<i>diclofenac sodium gel 1%</i>	Tier 1	QL (1000 gm / 25 days), PA; MAIL
Antibiotics - Topical		
ALTABAX OIN 1%	Tier 3	PA; MAIL
<i>antibiotic oin</i>	Tier 1	OTC; MAIL
<i>antibiotic oin pain rlf</i>	Tier 1	OTC; MAIL
<i>bacitracin oin 500/gm</i>	Tier 1	OTC, QL (300 gm / 30 days); MAIL
<i>bacitracin oint 500 unit/gm</i>	Tier 1	OTC, QL (300 gm / 30 days); MAIL
<i>bacitracin zinc oint 500 unit/gm</i>	Tier 1	OTC; MAIL
<i>bacitraycin oin 500/gm</i>	Tier 1	OTC, QL (300 gm / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>cvs triple oin antibiot</i>	Tier 1	OTC; MAIL
<i>double antib oin</i>	Tier 1	OTC; MAIL
<i>eq triple oin antibiot</i>	Tier 1	OTC; MAIL
<i>first aid oin antibiot</i>	Tier 1	OTC; MAIL
<i>gentamicin sulfate cream 0.1%</i>	Tier 1	MAIL
<i>gentamicin sulfate oint 0.1%</i>	Tier 1	QL (30 gm / 30 days); MAIL
<i>gnp first oin aid anti</i>	Tier 1	OTC; MAIL
<i>hm triple oin antibiot</i>	Tier 1	OTC; MAIL
<i>lanabiotic oin</i>	Tier 1	OTC; MAIL
<i>mupirocin oint 2%</i>	Tier 1	QL (44 gm / 25 days); MAIL
<i>neomycin-bacitracin-polymyxin oint</i>	Tier 1	OTC; MAIL
<i>neosporin oin</i>	Tier 1	OTC; MAIL
<i>neosporin+pn oin relf max</i>	Tier 1	OTC; MAIL
<i>poly bacitra oin</i>	Tier 1	OTC; MAIL
<i>px triple oin</i>	Tier 1	OTC; MAIL
<i>ra triple oin antibiot</i>	Tier 1	OTC; MAIL
<i>sm triple oin antibiot</i>	Tier 1	OTC; MAIL
<i>tgt antibiot oin</i>	Tier 1	OTC; MAIL
<i>tri-biozene oin</i>	Tier 1	OTC; MAIL
<i>triple antib oin</i>	Tier 1	OTC; MAIL
<i>triple antib oin max st</i>	Tier 1	OTC; MAIL
<i>triple antib oin plus</i>	Tier 1	OTC; MAIL
<i>triple antib oin plus max</i>	Tier 1	OTC; MAIL
<i>wal-sporin oin</i>	Tier 1	OTC; MAIL
Antifungals - Topical		
<i>af spty powd aer 1%</i>	Tier 1	OTC; MAIL
<i>anti-fungal cre 1%</i>	Tier 1	OTC; MAIL
<i>anti-fungal pow 1%</i>	Tier 1	OTC; MAIL
<i>anti-fungal pow 2%</i>	Tier 1	OTC; MAIL
<i>anti-fungal sol 1%</i>	Tier 1	OTC; MAIL
<i>antifung pow aer 1%</i>	Tier 1	OTC; MAIL
<i>antifungal cre 1%</i>	Tier 1	OTC; MAIL
<i>antifungal cre 1%</i>	Tier 1	OTC, QL (210 gm / 30 days); MAIL
<i>antifungal cre 2%</i>	Tier 1	OTC, QL (150 gm / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>antifungal cre foot 1%</i>	Tier 1	OTC, QL (30 gm / 25 days); MAIL
<i>ath foot pow aer 1%</i>	Tier 1	OTC; MAIL
<i>athlete foot aer 1%</i>	Tier 1	OTC; MAIL
<i>athlete foot aer 2%</i>	Tier 1	OTC; MAIL
<i>athlete foot cre 1%</i>	Tier 1	OTC; MAIL
<i>athlete foot cre 1%</i>	Tier 1	OTC, QL (210 gm / 30 days); MAIL
<i>athlete foot cre 1%</i>	Tier 1	OTC, QL (30 gm / 25 days); MAIL
<i>athlete foot cre af</i>	Tier 1	OTC, QL (30 gm / 25 days); MAIL
<i>baza antifun cre 2%</i>	Tier 1	OTC, QL (150 gm / 30 days); MAIL
<i>blis-to-sol liq 1%</i>	Tier 1	OTC; MAIL
<i>ciclodan cre 0.77%</i>	Tier 1	QL (600 gm / 30 days); MAIL
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	Tier 1	QL (600 gm / 30 days); MAIL
<i>clotrimazole cre 1%</i>	Tier 1	OTC, QL (210 gm / 30 days); MAIL
<i>clotrimazole cream 1%</i>	Tier 1	QL (210 gm / 30 days); MAIL
<i>clotrimazole soln 1%</i>	Tier 1	MAIL
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	Tier 1	QL (45 gm / 25 days); MAIL
<i>clotrimazole w/ betamethasone lotion 1-0.05%</i>	Tier 1	QL (450 mL / 30 days); MAIL
<i>critic-aid oin 2%</i>	Tier 1	OTC; MAIL
<i>cruex aer 2%</i>	Tier 1	OTC; MAIL
<i>dermafungal oin 2%</i>	Tier 1	OTC; MAIL
<i>desenex aer 2%</i>	Tier 1	OTC; MAIL
<i>desenex cre 1%</i>	Tier 1	OTC, QL (210 gm / 30 days); MAIL
<i>desenex shak pow 2%</i>	Tier 1	OTC; MAIL
<i>dr gs clear sol nail 1%</i>	Tier 1	OTC; MAIL
<i>econazole nitrate cream 1%</i>	Tier 2	PA; MAIL
<i>foot care cre 1%</i>	Tier 1	OTC, QL (30 gm / 25 days); MAIL
<i>foot&sneaker aer 1%</i>	Tier 1	OTC; MAIL

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<i>fungi-guard cre 1%</i>	Tier 1	OTC; MAIL
<i>fungicure spr intens</i>	Tier 1	OTC; MAIL
<i>fungoid-d cre 1%</i>	Tier 1	OTC; MAIL
<i>jck itch pow aer 1%</i>	Tier 1	OTC; MAIL
<i>jock itch aer 1%</i>	Tier 1	OTC; MAIL
<i>jock itch cre 1%</i>	Tier 1	OTC, QL (210 gm / 30 days); MAIL
<i>jock itch cre 1%</i>	Tier 1	OTC, QL (30 gm / 25 days); MAIL
<i>ketoconazole cream 2%</i>	Tier 1	QL (60 gm / 25 days); MAIL
<i>ketoconazole shampoo 2%</i>	Tier 1	QL (120 mL / 25 days); MAIL
<i>lamisil af aer 1%</i>	Tier 1	OTC; MAIL
<i>lotrimin af aer 2%</i>	Tier 1	OTC; MAIL
<i>lotrimin af pow 2%</i>	Tier 1	OTC; MAIL
<i>micaderm cre 2%</i>	Tier 1	OTC, QL (150 gm / 30 days); MAIL
<i>miconazole aer 2%</i>	Tier 1	OTC; MAIL
<i>miconazole cre 2%</i>	Tier 1	OTC, QL (150 gm / 30 days); MAIL
<i>miconazole nitrate aerosol pow 2%</i>	Tier 1	OTC; MAIL
<i>miconazorb pow af 2%</i>	Tier 1	OTC; MAIL
<i>micro guard pow 2%</i>	Tier 1	OTC; MAIL
<i>mycocide ns sol 1%</i>	Tier 1	OTC; MAIL
<i>nyamyc pow 100000</i>	Tier 1	QL (30 gm / 25 days); MAIL
<i>nyata pow 100000</i>	Tier 1	QL (30 gm / 25 days); MAIL
<i>nystatin cream 100000 unit/gm</i>	Tier 1	QL (90 gm / 25 days); MAIL
<i>nystatin oint 100000 unit/gm</i>	Tier 1	QL (90 gm / 25 days); MAIL
<i>nystatin topical powder 100000 unit/gm</i>	Tier 1	QL (30 gm / 25 days); MAIL
<i>nystatin-triamcinolone cream 100000-0.1 unit/gm-%</i>	Tier 2	QL (30 gm / 30 days); MAIL
<i>nystatin-triamcinolone oint 100000-0.1 unit/gm-%</i>	Tier 2	QL (30 gm / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>nystop pow 100000</i>	Tier 1	QL (30 gm / 25 days); MAIL
<i>odor control aer powd 1%</i>	Tier 1	OTC; MAIL
<i>odor eaters aer 1%</i>	Tier 1	OTC; MAIL
<i>odor eaters pow 1%</i>	Tier 1	OTC; MAIL
<i>podactin cre 2%</i>	Tier 1	OTC, QL (150 gm / 30 days); MAIL
<i>podactin pow 1%</i>	Tier 1	OTC; MAIL
<i>remedy cre antifung</i>	Tier 1	OTC, QL (150 mL / 30 days); MAIL
<i>remedy oin af 2%</i>	Tier 1	OTC; MAIL
<i>remedy pow antifung</i>	Tier 1	OTC; MAIL
<i>ringworm cre 1%</i>	Tier 1	OTC, QL (210 gm / 30 days); MAIL
<i>sm antifungl cre 1%</i>	Tier 1	OTC; MAIL
<i>sm antifungl cre 2%</i>	Tier 1	OTC, QL (150 gm / 30 days); MAIL
<i>soothe&cool cre inzo 2%</i>	Tier 1	OTC, QL (150 gm / 30 days); MAIL
<i>terbinafine cre 1%</i>	Tier 1	OTC, QL (30 gm / 25 days); MAIL
<i>tetterine oin 2%</i>	Tier 1	OTC; MAIL
<i>tgt antifung cre 1%</i>	Tier 1	OTC; MAIL
<i>tgt athletes cre foot</i>	Tier 1	OTC, QL (30 gm / 25 days); MAIL
<i>tinaspore sol 1%</i>	Tier 1	OTC; MAIL
<i>tolnaftate aerosol pow 1%</i>	Tier 1	OTC; MAIL
<i>tolnaftate cre 1%</i>	Tier 1	OTC; MAIL
<i>tolnaftate powder 1%</i>	Tier 1	OTC; MAIL
<i>tolnaftate soln 1%</i>	Tier 1	OTC; MAIL
<i>triple paste oin af 2%</i>	Tier 1	OTC; MAIL
<i>zeasorb-af pow 2%</i>	Tier 1	OTC; MAIL
Antihistamines-Topical		
<i>allergy cre 2-0.1%</i>	Tier 1	OTC; MAIL
<i>eq anti-itch cre 2-0.1%</i>	Tier 1	OTC; MAIL
Antineoplastic or Premalignant Lesion Agents - Topical		
<i>fluorouracil cream 5%</i>	Tier 2	MAIL
PANRETIN GEL 0.1%	Tier 4	PA
PICATO GEL 0.05%	Tier 3	PA; MAIL

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Drug Name	Drug Tier	Requirements/Limits
PICATO GEL 0.015%	Tier 3	PA; MAIL
TARGRETIN GEL 1%	Tier 4	PA
Antipsoriatics		
<i>calcipotriene oint 0.005%</i>	Tier 2	QL (60 gm / 30 days), PA; MAIL
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	Tier 2	QL (60 mL / 30 days), PA; MAIL
<i>calcitrene oin 0.005%</i>	Tier 2	QL (60 gm / 30 days), PA; MAIL
DRITHO-CREME CRE HP 1%	Tier 2	QL (50 gm / 25 days); MAIL
STELARA INJ 45MG/0.5	Tier 4	PA; Preferred Brand
STELARA INJ 90MG/ML	Tier 4	PA; Preferred Brand
Antiseborrheic Products		
<i>anti-dandruff sha 1%</i>	Tier 1	OTC; MAIL
<i>dandruff sha 1%</i>	Tier 1	OTC; MAIL
<i>ra dandruff sha 1%</i>	Tier 1	OTC; MAIL
<i>selenium sulfide lotion 2.5%</i>	Tier 1	MAIL
Antivirals - Topical		
ABREVA CRE 10%	Tier 1	OTC, QL (2 gm / 15 days); MAIL
<i>acyclovir oint 5%</i>	Tier 2	PA; AGE; MAIL; Covered for ages 18 and under
ZOVIRAX CRE 5%	Tier 2	PA; AGE; MAIL; Covered for ages 18 and under
Burn Products		
<i>mafenide acetate packet for topical soln 5% (50 gm)</i>	Tier 1	MAIL
<i>silver sulfadiazine cream 1%</i>	Tier 1	QL (1050 gm / 30 days); MAIL
<i>ssd cre 1%</i>	Tier 1	QL (1050 gm / 30 days); MAIL
SULFAMYLLON CRE 85MG/GM	Tier 3	MAIL
<i>thermazene cre 1%</i>	Tier 1	QL (1050 gm / 30 days); MAIL
Corticosteroids - Topical		
<i>ala-cort cre 1%</i>	Tier 1	QL (60 gm / 25 days); MAIL
<i>alclometasone dipropionate cream 0.05%</i>	Tier 1	MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>alclometasone dipropionate oint 0.05%</i>	Tier 1	MAIL
<i>anti-itch cre 1%</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>anti-itch cre 1%pls 10</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>anti-itch cre /aloe/e</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>anti-itch cre /oatmeal</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>anti-itch lot 1%</i>	Tier 1	OTC, QL (120 gm / 25 days); MAIL
<i>anti-itch oin 1%</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>anti-itch oin max st</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>anti-itch/ cre aloe</i>	Tier 1	OTC; MAIL
<i>aquanil hc lot 1%</i>	Tier 1	OTC, QL (120 mL / 25 days); MAIL
<i>aveeno cre 1%</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>beta hc lot 1%</i>	Tier 1	OTC, QL (120 mL / 25 days); MAIL
<i>betamethasone dipropionate augmented cream 0.05%</i>	Tier 1	QL (60 gm / 30 days); MAIL
<i>betamethasone dipropionate augmented gel 0.05%</i>	Tier 1	MAIL
<i>betamethasone dipropionate augmented lotion 0.05%</i>	Tier 1	MAIL
<i>betamethasone dipropionate augmented oint 0.05%</i>	Tier 1	MAIL
<i>betamethasone dipropionate cream 0.05%</i>	Tier 1	MAIL
<i>betamethasone dipropionate lotion 0.05%</i>	Tier 1	MAIL
<i>betamethasone dipropionate oint 0.05%</i>	Tier 1	QL (210 gm / 25 days); MAIL
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	Tier 1	QL (450 gm / 30 days); MAIL
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	Tier 1	MAIL
<i>clobetasol propionate cream 0.05%</i>	Tier 2	QL (60 gm / 25 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>clobetasol propionate gel 0.05%</i>	Tier 2	QL (60 gm / 25 days); MAIL
<i>clobetasol propionate oint 0.05%</i>	Tier 2	QL (60 gm / 25 days); MAIL
<i>clobetasol propionate soln 0.05%</i>	Tier 2	QL (50 mL / 25 days); MAIL
<i>clocortolone pivalate cream 0.1%</i>	Tier 2	MAIL
<i>cormax scalp sol 0.05%</i>	Tier 2	QL (50 mL / 25 days); MAIL
<i>cort intense cre heal 1%</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>corticoool gel 1%</i>	Tier 1	OTC; MAIL
<i>cortisone cre 1%</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>cortisone gel cooling</i>	Tier 1	OTC; MAIL
<i>cortisone lot 1%</i>	Tier 1	OTC, QL (120 gm / 25 days); MAIL
<i>cortisone oin 1%max st</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>cortizone-10 cre /aloe 1%</i>	Tier 1	OTC; MAIL
<i>cortizone-10 cre healing</i>	Tier 1	OTC; MAIL
<i>cortizone-10 cre plus</i>	Tier 1	OTC; MAIL
<i>cortizone-10 gel 1%</i>	Tier 1	OTC; MAIL
<i>cortizone-10 lot eczema</i>	Tier 1	OTC, QL (120 gm / 25 days); MAIL
<i>cortizone-10 lot hydraten</i>	Tier 1	OTC, QL (120 gm / 25 days); MAIL
<i>cortizone-10 oin 1%</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>desonide cream 0.05%</i>	Tier 1	QL (450 gm / 30 days), ST; MAIL; Prior use of 3; Alclometasone Crm Oint, Desonide Oint, Fluocinolone Oil, Hydrocortisone Crm (0.5%, 0.1%, 2.5%), Gel (1%), Lotion (1%, 2.5%) or Oint (1%, 2.5%), Hydrocortisone Crm 0.5% for 30 days.

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Drug Name	Drug Tier	Requirements/Limits
<i>desonide oint 0.05%</i>	Tier 1	QL (60 gm / 25 days); MAIL
<i>desoximetasone cream 0.25%</i>	Tier 2	MAIL
<i>eq hydrocort cre 1%</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>fluocinolone acetonide cream 0.025%</i>	Tier 1	MAIL
<i>fluocinolone acetonide oil 0.01% (body oil)</i>	Tier 2	QL (Max day supply 28); MAIL
<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>	Tier 2	QL (Max day supply 28); MAIL
<i>fluocinolone acetonide oint 0.025%</i>	Tier 1	MAIL
<i>fluocinonide cream 0.05%</i>	Tier 1	QL (150 gm / 25 days); MAIL
<i>fluocinonide emulsified base cream 0.05%</i>	Tier 1	QL (60 gm / 25 days); MAIL
<i>fluocinonide gel 0.05%</i>	Tier 1	QL (60 gm / 25 days); MAIL
<i>fluocinonide oint 0.05%</i>	Tier 1	QL (60 gm / 30 days), ST; MAIL; Prior use of 2; Mometasone Cream, Fluocinolone Cream, or Triamcinolone Ointment for 20 days.
<i>fluocinonide soln 0.05%</i>	Tier 1	QL (60 mL / 25 days); MAIL
<i>fluticasone propionate cream 0.05%</i>	Tier 1	QL (60 gm / 25 days); MAIL
<i>fluticasone propionate oint 0.005%</i>	Tier 1	QL (60 gm / 25 days); MAIL
<i>gnp hydrocor cre 1% plus</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>gynecort 10 cre 1%</i>	Tier 1	OTC; MAIL
<i>halobetasol propionate cream 0.05%</i>	Tier 2	MAIL
<i>halobetasol propionate oint 0.05%</i>	Tier 2	MAIL
<i>hc-1% hemorr oin 1%</i>	Tier 1	OTC; MAIL
<i>hm hydrocort cre 1% plus</i>	Tier 1	OTC; MAIL
<i>hydro-lotion lot 1%</i>	Tier 1	OTC, QL (120 mL / 25 days); MAIL
<i>hydrocort ac cre 1%</i>	Tier 1	OTC; MAIL
<i>hydrocort cre 0.5%</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>hydrocort cre 1%pls 10</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>hydrocort/ cre aloe 1%</i>	Tier 1	OTC; MAIL
<i>hydrocortisone acetate-aloe vera cream 0.5%</i>	Tier 1	OTC; MAIL
<i>hydrocortisone cream 0.5%</i>	Tier 1	OTC; MAIL
<i>hydrocortisone cream 1%</i>	Tier 1	QL (60 gm / 25 days); MAIL
<i>hydrocortisone cream 2.5%</i>	Tier 1	QL (60 gm / 25 days); MAIL
<i>hydrocortisone lotion 2.5%</i>	Tier 1	QL (60 mL / 25 days); MAIL
<i>hydrocortisone oint 0.5%</i>	Tier 1	OTC; MAIL
<i>hydrocortisone oint 1%</i>	Tier 1	QL (60 gm / 25 days); MAIL
<i>hydrocortisone oint 2.5%</i>	Tier 1	QL (60 gm / 25 days); MAIL
<i>hydrocortisone valerate cream 0.2%</i>	Tier 1	QL (60 gm / 25 days); MAIL
<i>hydrocortisone-aloe vera cream 0.5%</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>hydrocream cre 1%</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>hydroskin cre 1%</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>instacort 5 cre 0.5%</i>	Tier 1	OTC; MAIL
<i>kericort 10 cre 1%</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>kls hydrocrt cre pls 1%</i>	Tier 1	OTC; MAIL
<i>lanacort 10 cre 1%</i>	Tier 1	OTC; MAIL
<i>med-derm hc cre 0.5%</i>	Tier 1	OTC; MAIL
<i>med-derm hc cre 1%</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>mg217 gel 1%</i>	Tier 1	OTC; MAIL
<i>mometasone furoate cream 0.1%</i>	Tier 1	QL (60 gm / 25 days); MAIL
<i>mometasone furoate oint 0.1%</i>	Tier 1	QL (60 gm / 25 days); MAIL
<i>mometasone furoate solution 0.1% (lotion)</i>	Tier 1	MAIL
<i>noble formul cre hc 1%</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL

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<i>prednicarbate cream 0.1%</i>	Tier 2	MAIL
<i>prednicarbate oint 0.1%</i>	Tier 2	MAIL
<i>prep h cre 1%</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>qc hydrocort cre 1%</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>ra anti-itch cre 1%</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>ra anti-itch oin 1%</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>ra hydrocort cre 0.5%</i>	Tier 1	OTC; MAIL
<i>ra hydrocort cre 1%</i>	Tier 1	OTC; MAIL
<i>ra hydrocort cre 1%</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>ra hydrocort cre 1%pls 12</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>recort plus cre 1%</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>rederm lot 1%</i>	Tier 1	OTC, QL (120 mL / 25 days); MAIL
<i>sarnol-hc lot 1%</i>	Tier 1	OTC, QL (120 mL / 25 days); MAIL
<i>sm hydrocort cre 1%</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>sm hydrocort cre 1% plus</i>	Tier 1	OTC; MAIL
<i>sm hydrocort oin 1%</i>	Tier 1	OTC, QL (60 gm / 25 days); MAIL
<i>triamcinolone acetone cream 0.1%</i>	Tier 1	QL (480 gm / 30 days); MAIL
<i>triamcinolone acetone cream 0.5%</i>	Tier 1	QL (450 gm / 30 days); MAIL
<i>triamcinolone acetone cream 0.025%</i>	Tier 1	QL (450 gm / 30 days); MAIL
<i>triamcinolone acetone lotion 0.1%</i>	Tier 1	QL (450 mL / 30 days); MAIL
<i>triamcinolone acetone lotion 0.025%</i>	Tier 1	QL (60 mL / 25 days); MAIL
<i>triamcinolone acetone oint 0.1%</i>	Tier 1	QL (450 gm / 30 days); MAIL
<i>triamcinolone acetone oint 0.5%</i>	Tier 1	QL (15 gm / 25 days); MAIL

PA - Prior Authorization **ST** - Step Therapy **AGE** - Age Limit

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QL – Quantity Limits **OTC** – Over the Counter **MAIL** – Mail Order Available

MED - Max 90 mg Morphine EQ Dose Per Day

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Drug Name	Drug Tier	Requirements/Limits
<i>triamcinolone acetonide oint 0.025%</i>	Tier 1	QL (450 gm / 30 days); MAIL
<i>triderm cre 0.1%</i>	Tier 1	QL (480 gm / 30 days); MAIL
ECZEMA AGENTS		
DUPIXENT INJ 300/2ML	Tier 4	PA
Emollients		
<i>al12 lot 12%</i>	Tier 1	OTC, QL (225 gm / 25 days); MAIL
<i>amlactin lot 12%</i>	Tier 1	OTC, QL (225 gm / 25 days); MAIL
<i>geri-hydrola cre 12%</i>	Tier 1	OTC, QL (280 gm / 25 days); MAIL
<i>geri-hydrola lot 12%</i>	Tier 1	OTC, QL (225 gm / 25 days); MAIL
<i>hydrophor oin</i>	Tier 1	OTC; MAIL
<i>lactic acid (ammonium lactate) cream 12%</i>	Tier 1	OTC, QL (280 gm / 25 days); MAIL
<i>lactic acid (ammonium lactate) lotion 12%</i>	Tier 1	OTC, QL (225 gm / 25 days); MAIL
<i>skin trtment lot 12%</i>	Tier 1	OTC, QL (225 gm / 25 days); MAIL
Enzymes - Topical		
SANTYL OIN 250/GM	Tier 3	QL (30 gm / 30 days), PA; MAIL
<i>tbc aer</i>	Tier 1	
Immunomodulating Agents - Topical		
<i>imiquimod cream 5%</i>	Tier 1	QL (24 ea / 25 days), PA; MAIL
Immunosuppressive Agents - Topical		
ELIDEL CRE 1%	Tier 2	QL (60 gm / 30 days), PA; MAIL; Covered for ages 2 and over
<i>pimecrolimus cream 1%</i>	Tier 1	QL (60 gm / 30 days), PA; MAIL; Covered for ages 2 and over
<i>tacrolimus oint 0.1%</i>	Tier 2	QL (30 gm / 25 days), PA; MAIL; Covered for ages 2 and over

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Drug Name	Drug Tier	Requirements/Limits
<i>tacrolimus oint 0.03%</i>	Tier 2	QL (30 gm / 25 days), PA; MAIL; Covered for ages 2 and over
Keratolytic/Antimitotic Agents		
<i>podofilox soln 0.5%</i>	Tier 1	QL (7 mL / 180 days); MAIL
LOCAL ANESTHETICS - TOPICAL		
<i>capsaicin cream 0.1%</i>	Tier 1	OTC
<i>capsaicin cream 0.025%</i>	Tier 1	OTC
Local Anesthetics - Topical		
<i>aspercreme pad lido 4%</i>	Tier 1	OTC, QL (120 patches / 30 days); MAIL
<i>lidocaine hcl soln 4%</i>	Tier 1	QL (225 mL / 30 days); MAIL
<i>lidocaine hcl urethral/mucosal gel 2%</i>	Tier 1	QL (500 mL / 25 days); MAIL
<i>lidocaine patch 5%</i>	Tier 2	QL (90 patches / 30 days), PA; MAIL
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	Tier 1	QL (60 gm / 25 days); MAIL
<i>lidocream cre 4%</i>	Tier 1	OTC; MAIL
<i>regenecare gel ha 2%</i>	Tier 1	OTC, QL (500 mL / 25 days); MAIL
Misc. Topical		
<i>DRYSOL SOL 20%</i>	Tier 2	QL (180 mL / 30 days); MAIL
<i>minerin cre</i>	Tier 1	OTC; MAIL
<i>ZINC-OXYDE OIN 0.44-20%</i>	Tier 1	OTC; MAIL
Pigmenting-Depigmenting Agents		
<i>OXSORALEN LOT 1%</i>	Tier 3	QL (29.57 mL / 25 days), PA; MAIL
Rosacea Agents		
<i>azelaic acid gel 15%</i>	Tier 1	QL (50 gm / 25 days), PA; MAIL
<i>FINACEA GEL 15%</i>	Tier 3	QL (50 gm / 25 days), PA; MAIL
<i>metronidazole cream 0.75%</i>	Tier 1	QL (45 gm / 25 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>metronidazole gel 0.75%</i>	Tier 1	QL (45 gm / 25 days); MAIL
<i>metronidazole lotion 0.75%</i>	Tier 1	QL (59 mL / 25 days); MAIL
<i>rosadan cre 0.75%</i>	Tier 1	QL (45 gm / 25 days); MAIL
<i>rosadan gel 0.75%</i>	Tier 1	QL (45 gm / 25 days); MAIL

Scabicides Pediculicides

<i>bedding spra aer 0.5%</i>	Tier 1	OTC; MAIL
<i>complete kit lice</i>	Tier 1	OTC; MAIL
<i>cvs lice kit solution</i>	Tier 1	OTC; MAIL
<i>cvs permethr lot 1%</i>	Tier 1	OTC; MAIL
<i>eql lice kit solution</i>	Tier 1	OTC; MAIL
EURAX CRE 10%	Tier 2	ST; MAIL; PRIOR USE PERMETHRIN
<i>gnp lice kit</i>	Tier 1	OTC; MAIL
<i>lice bedding aer</i>	Tier 1	OTC; MAIL
<i>lice bedding aer 0.5%</i>	Tier 1	OTC; MAIL
<i>lice killing sha</i>	Tier 1	OTC; MAIL
<i>lice killing sha 0.33-4%</i>	Tier 1	OTC; MAIL
<i>lice soln kit</i>	Tier 1	OTC; MAIL
<i>lice soln kit complete</i>	Tier 1	OTC; MAIL
<i>lice treatmt lot 1%</i>	Tier 1	OTC; MAIL
<i>lice treatmt sha 0.33-4%</i>	Tier 1	OTC; MAIL
<i>lice trtmnt liq 1%</i>	Tier 1	OTC; MAIL
<i>lice trtmnt liq crm rnse</i>	Tier 1	OTC; MAIL
<i>licide aer 0.5%</i>	Tier 1	OTC; MAIL
<i>licide comp kit treatmnt</i>	Tier 1	OTC; MAIL
<i>licide liq max st</i>	Tier 1	OTC; MAIL
<i>licide sha 0.33-4%</i>	Tier 1	OTC; MAIL
<i>malathion lotion 0.5%</i>	Tier 2	QL (Max 2 fills per 25 days), ST; MAIL; PRIOR USE PERMETHRIN OR PYRETHRIN
<i>permethrin cream 5%</i>	Tier 1	QL (3600 gm / 30 days); MAIL
<i>sm bedding aer lice</i>	Tier 1	OTC; MAIL
<i>sm lice lot treatmnt</i>	Tier 1	OTC; MAIL
<i>sm lice soln kit</i>	Tier 1	OTC; MAIL

PA - Prior Authorization ST - Step Therapy AGE - Age Limit

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Drug Name	Drug Tier	Requirements/Limits
<i>spinosad susp 0.9%</i>	Tier 2	ST; MAIL; Prior use of Malathion for 7 days.
<i>stop lice kit complete</i>	Tier 1	OTC; MAIL
<i>stop lice liq max st</i>	Tier 1	OTC; MAIL
<i>stop lice ms sha 0.33-4%</i>	Tier 1	OTC; MAIL
<i>tgt lice kit complete</i>	Tier 1	OTC; MAIL

DIAGNOSTIC PRODUCTS***Diagnostic Drugs***

THYROGEN INJ 1.1MG	Tier 4	QL (2 vials / 180 days), PA
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Diagnostic Tests

TRUE METRIX TES GLUCOSE	Tier 2	OTC, QL (50/30 for non-insulin, 200/30 for insulin/pregnant); MAIL
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DIAGNOSTIC TESTS***DIAGNOSTIC TESTS***

RELION KETON TES	Tier 2	OTC; MAIL
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DIBENZAPINES***THIENBENZODIAZEPINES***

ZYPREXA RELP INJ 210MG	Tier 3	
ZYPREXA RELP INJ 300MG	Tier 3	
ZYPREXA RELP INJ 405MG	Tier 3	

DIGESTIVE AIDS***Digestive Enzymes***

CREON CAP 3000UNIT	Tier 2	QL (180 caps / 30 days); MAIL
CREON CAP 6000UNIT	Tier 2	QL (180 caps / 30 days); MAIL
CREON CAP 12000UNT	Tier 2	QL (180 caps / 30 days); MAIL
CREON CAP 24000UNT	Tier 2	QL (180 caps / 30 days); MAIL
CREON CAP 36000UNT	Tier 2	QL (180 caps / 30 days); MAIL
<i>pancrelipase (lip-prot-amyl) dr cap 5000-17000-27000 unit</i>	Tier 1	QL (180 caps / 30 days); MAIL
ZENPEP CAP 3000UNIT	Tier 2	QL (180 caps / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
ZENPEP CAP 5000UNT	Tier 2	QL (180 caps / 30 days); MAIL
ZENPEP CAP 10000UNT	Tier 2	QL (180 caps / 30 days); MAIL
ZENPEP CAP 15000UNT	Tier 2	QL (180 caps / 30 days); MAIL
ZENPEP CAP 20000UNT	Tier 2	QL (180 caps / 30 days); MAIL
ZENPEP CAP 25000UNT	Tier 2	QL (180 caps / 30 days); MAIL
ZENPEP CAP 40000UNT	Tier 2	QL (180 caps / 30 days); MAIL

DIURETICS**Carbonic Anhydrase Inhibitors**

<i>acetazolamide cap er 12hr 500 mg</i>	Tier 2	QL (60 caps / 30 days); MAIL
<i>acetazolamide tab 125 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>acetazolamide tab 250 mg</i>	Tier 1	QL (120 ea / 30 days); MAIL
<i>methazolamide tab 25 mg</i>	Tier 2	QL (180 tabs / 30 days); MAIL
<i>methazolamide tab 50 mg</i>	Tier 2	QL (180 tabs / 30 days); MAIL

Diuretic Combinations

ALDACTAZIDE TAB 50/50	Tier 2	QL (60 tabs / 30 days); MAIL
<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL

Loop Diuretics

<i>bumetanide tab 0.5 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
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Drug Name	Drug Tier	Requirements/Limits
<i>bumetanide tab 1 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>bumetanide tab 2 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>furosemide oral soln 8 mg/ml</i>	Tier 2	MAIL; Covered for ages 12 and under
<i>furosemide oral soln 10 mg/ml</i>	Tier 1	MAIL; Covered for ages 12 and under
<i>furosemide tab 20 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>furosemide tab 40 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>furosemide tab 80 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>torsemide tab 5 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>torsemide tab 10 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>torsemide tab 20 mg</i>	Tier 1	QL (120 ea / 30 days); MAIL
<i>torsemide tab 100 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL

Potassium Sparing Diuretics

<i>amiloride hcl tab 5 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>spironolactone tab 25 mg</i>	Tier 1	QL (240 ea / 30 days); MAIL
<i>spironolactone tab 50 mg</i>	Tier 1	QL (120 ea / 30 days); MAIL
<i>spironolactone tab 100 mg</i>	Tier 1	QL (60 ea / 30 days); MAIL

Thiazides and Thiazide-Like Diuretics

<i>chlorthalidone tab 25 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>chlorthalidone tab 50 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>chlorthalidone tab 100 mg</i>	Tier 1	MAIL
<i>hydrochlorothiazide cap 12.5 mg</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>hydrochlorothiazide tab 12.5 mg</i>	Tier 1	QL (240 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>hydrochlorothiazide tab 25 mg</i>	Tier 1	QL (240 tabs / 30 days); MAIL
<i>hydrochlorothiazide tab 50 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>indapamide tab 1.25 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>indapamide tab 2.5 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>metolazone tab 2.5 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>metolazone tab 5 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>metolazone tab 10 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL

ENDOCRINE AND METABOLIC AGENTS - MISC.**Bone Density Regulators**

<i>alendronate sodium tab 5 mg</i>	Tier 1	QL (240 tabs / 30 days); MAIL
<i>alendronate sodium tab 10 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>alendronate sodium tab 35 mg</i>	Tier 1	QL (4.29 tabs / 30 days); MAIL
<i>alendronate sodium tab 40 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>alendronate sodium tab 70 mg</i>	Tier 1	QL (4.29 tabs / 30 days); MAIL
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	Tier 1	QL (30 mL / 30 days); MAIL; Covered for ages 50 and over
<i>etidronate disodium tab 200 mg</i>	Tier 1	MAIL
<i>etidronate disodium tab 400 mg</i>	Tier 1	MAIL
FORTEO SOL 600/2.4	Tier 4	QL (2.58 mL / 30 days), PA
FOSAMAX + D TAB 70-2800	Tier 2	MAIL
FOSAMAX + D TAB 70-5600	Tier 2	MAIL
<i>ibandronate sodium tab 150 mg (base equivalent)</i>	Tier 1	QL (3.216 tabs / 30 days); MAIL
PROLIA SOL 60MG/ML	Tier 4	PA
TYMLOS INJ	Tier 4	PA
XGEVA INJ	Tier 4	PA

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Drug Name	Drug Tier	Requirements/Limits
Growth Hormones		
OMNITROPE INJ PEN 5/1.5ML	Tier 4	PA
OMNITROPE INJ PEN 10/1.5ML	Tier 4	PA
Hormone Receptor Modulators		
<i>raloxifene hcl tab 60 mg</i>	Tier 2	QL (30 tabs / 30 days); \$0 Copay for Breast Cancer Prevention for Women age 35+; MAIL
Insulin-Like Growth Factors (Somatomedins)		
INCRELEX INJ 40MG/4ML	Tier 4	PA
LHRH/GnRH Agonist Analog Pituitary Suppressants		
LUPR DEP-PED INJ 3M 30MG	Tier 4	QL (1 kit / 100 days), PA
LUPR DEP-PED INJ 7.5MG	Tier 4	QL (1 kit / 25 days), PA
LUPR DEP-PED INJ 11.25MG	Tier 4	QL (1 kit / 25 days), PA
LUPR DEP-PED INJ 11.25MG	Tier 4	QL (1 kit / 75 days), PA
LUPR DEP-PED INJ 15MG	Tier 4	QL (1 kit / 25 days), PA
SYNAREL SOL 2MG/ML	Tier 4	QL (32 mL / 28 days), PA
Metabolic Modifiers		
<i>calcitriol cap 0.5 mcg</i>	Tier 1	QL (120 caps / 30 days); MAIL
<i>calcitriol cap 0.25 mcg</i>	Tier 1	QL (120 caps / 30 days); MAIL
CYSTADANE POW	Tier 3	PA; MAIL
ELAPRASE INJ 6MG/3ML	Tier 4	PA
FABRAZYME INJ 5MG	Tier 4	PA
KUVAN TAB 100MG	Tier 4	PA
<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	Tier 2	QL (1800 mL / 30 days); MAIL
<i>levocarnitine tab 330 mg</i>	Tier 1	QL (540 tabs / 30 days); MAIL
ORFADIN CAP 2MG	Tier 4	PA
ORFADIN CAP 5MG	Tier 4	PA
ORFADIN CAP 10MG	Tier 4	PA
SENSIPAR TAB 30MG	Tier 4	PA
SENSIPAR TAB 60MG	Tier 4	PA
SENSIPAR TAB 90MG	Tier 4	PA

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Drug Name	Drug Tier	Requirements/Limits
<i>sodium phenylbutyrate oral powder 3 gm/teaspoonful</i>	Tier 4	PA
<i>sodium phenylbutyrate tab 500 mg</i>	Tier 4	PA
Posterior Pituitary Hormones		
<i>desmopressin acetate nasal spray soln 0.01% (refrigerated)</i>	Tier 2	PA; MAIL
<i>desmopressin acetate tab 0.1 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>desmopressin acetate tab 0.2 mg</i>	Tier 1	QL (150 tabs / 30 days); MAIL
STIMATE SOL 1.5MG/ML	Tier 4	PA
Prolactin Inhibitors		
<i>cabergoline tab 0.5 mg</i>	Tier 1	MAIL
Somatostatic Agents		
<i>octreotide acetate inj 50 mcg/ml (0.05 mg/ml)</i>	Tier 4	PA
<i>octreotide acetate inj 100 mcg/ml (0.1 mg/ml)</i>	Tier 4	PA
<i>octreotide acetate inj 200 mcg/ml (0.2 mg/ml)</i>	Tier 4	PA
<i>octreotide acetate inj 500 mcg/ml (0.5 mg/ml)</i>	Tier 4	PA
<i>octreotide acetate inj 1000 mcg/ml (1 mg/ml)</i>	Tier 4	PA
SANDOSTATIN KIT LAR 10MG	Tier 4	PA
SANDOSTATIN KIT LAR 20MG	Tier 4	QL (1 kit / 24 days), PA
SANDOSTATIN KIT LAR 30MG	Tier 4	QL (1 kit / 24 days), PA
Vasopressin Receptor Antagonists		
SAMSCA TAB 15MG	Tier 4	PA
SAMSCA TAB 30MG	Tier 4	PA
ESTROGENS		
Estrogen Combinations		
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
PREMPHASE TAB	Tier 2	QL (30 tabs / 30 days); MAIL
PREMPRO TAB 0.3-1.5	Tier 2	QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
PREMPRO TAB 0.45-1.5	Tier 2	QL (30 tabs / 30 days); MAIL
PREMPRO TAB 0.625-5	Tier 2	QL (30 tabs / 30 days); MAIL
PREMPRO TAB .625-2.5	Tier 2	QL (30 tabs / 30 days); MAIL

Estrogens

<i>estradiol tab 0.5 mg</i>	Tier 1	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>estradiol tab 1 mg</i>	Tier 1	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>estradiol tab 2 mg</i>	Tier 1	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>estropipate tab 0.75 mg</i>	Tier 1	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>estropipate tab 1.5 mg</i>	Tier 1	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>estropipate tab 3 mg</i>	Tier 1	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
PREMARIN TAB 0.3MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
PREMARIN TAB 0.9MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
PREMARIN TAB 0.45MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
PREMARIN TAB 0.625MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
PREMARIN TAB 1.25MG	Tier 2	QL (60 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under

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Tier 3 = Non-preferred brand name drugs
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PREV = Preventative Services at \$0 copay; **DME** = Coinsurance may apply

Drug Name	Drug Tier	Requirements/Limits
FLUOROQUINOLONES		

Fluoroquinolones

<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	Tier 1	QL (Max 2 per day)
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	Tier 1	QL (Max 2 per day)
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	Tier 1	QL (Max 2 per day)
FACTIVE TAB 320MG	Tier 3	QL (30 tabs / 30 days), PA
<i>levofloxacin oral soln 25 mg/ml</i>	Tier 1	QL (Max day supply 20), PA
<i>levofloxacin tab 250 mg</i>	Tier 1	QL (Max 10 per 10 day; Max 1 fill per 45 days)
<i>levofloxacin tab 500 mg</i>	Tier 1	QL (Max 10 per 10 day; Max 1 fill per 45 days)
<i>levofloxacin tab 750 mg</i>	Tier 1	QL (Max 10 per 10 day; Max 1 fill per 45 days)
NOROXIN TAB 400MG	Tier 3	QL (60 tabs / 30 days)

GASTROINTESTINAL AGENTS - MISC.**Antiflatulents**

<i>anti-gas cap 180mg</i>	Tier 1	OTC; MAIL
<i>cvs gas relf chw 80mg</i>	Tier 1	OTC; MAIL
<i>cvs gas relf chw 125mg</i>	Tier 1	OTC; MAIL
<i>cvs gas relf dro ex st</i>	Tier 1	OTC; MAIL
<i>eql gas gone chw 125mg</i>	Tier 1	OTC; MAIL
<i>gas relief cap 125mg</i>	Tier 1	OTC; MAIL
<i>gas relief cap 180mg</i>	Tier 1	OTC; MAIL
<i>gas relief chw 80mg</i>	Tier 1	OTC; MAIL
<i>gas relief chw 125mg</i>	Tier 1	OTC; MAIL
<i>gas relief dro 20/0.3ml</i>	Tier 1	OTC; MAIL
<i>gas relief dro infants</i>	Tier 1	OTC; MAIL
<i>gas-x cap 125mg</i>	Tier 1	OTC; MAIL
<i>gas-x cap 180mg</i>	Tier 1	OTC; MAIL
<i>gas-x infant dro</i>	Tier 1	OTC; MAIL
<i>gnp gas relf chw 80mg</i>	Tier 1	OTC; MAIL
<i>gnp gas relf chw 125mg</i>	Tier 1	OTC; MAIL
<i>hm gas relf chw 80mg</i>	Tier 1	OTC; MAIL
<i>hm gas relf chw 125mg</i>	Tier 1	OTC; MAIL
<i>little remed sus 20/.03ml</i>	Tier 1	OTC; MAIL
LITTLE TUMMY DRO 20/0.3ML	Tier 1	OTC; MAIL
<i>mi-acid gas chw 80mg</i>	Tier 1	OTC; MAIL

PA - Prior Authorization ST - Step Therapy AGE - Age Limit

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QL – Quantity Limits OTC – Over the Counter MAIL – Mail Order Available

MED - Max 90 mg Morphine EQ Dose Per Day

Tier 1 = Generics; Low cost preferred brand

Tier 2 = Non-Preferred generics; Preferred brand name drugs

Tier 3 = Non-preferred brand name drugs

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Drug Name	Drug Tier	Requirements/Limits
<i>mytab gas chw 80mg</i>	Tier 1	OTC; MAIL
<i>mytab gas chw 125mg</i>	Tier 1	OTC; MAIL
<i>phazyme chw 125mg</i>	Tier 1	OTC; MAIL
<i>qc gas relf chw 80mg</i>	Tier 1	OTC; MAIL
<i>qc gas relf chw 125mg</i>	Tier 1	OTC; MAIL
<i>ra gas relf chw 80mg</i>	Tier 1	OTC; MAIL
<i>ra gas relf chw 125mg</i>	Tier 1	OTC; MAIL
<i>sb gas relf chw 125mg</i>	Tier 1	OTC; MAIL
<i>simeped dro 40/0.6ml</i>	Tier 1	OTC; MAIL
<i>simethicone cap 180 mg</i>	Tier 1	OTC; MAIL
<i>simethicone chew tab 80 mg</i>	Tier 1	OTC; MAIL
<i>simethicone chew tab 125 mg</i>	Tier 1	OTC; MAIL
<i>simethicone dro 20/0.3ml</i>	Tier 1	OTC; MAIL
<i>simethicone susp 40 mg/0.6ml</i>	Tier 1	OTC; MAIL
<i>sm gas rel chw 125mg</i>	Tier 1	OTC; MAIL
<i>sm gas relie chw 80mg</i>	Tier 1	OTC; MAIL
Gallstone Solubilizing Agents		
<i>ursodiol cap 300 mg</i>	Tier 2	QL (60 caps / 30 days); MAIL
<i>ursodiol tab 250 mg</i>	Tier 2	QL (120 tabs / 30 days); MAIL
<i>ursodiol tab 500 mg</i>	Tier 2	QL (60 per 30 days); MAIL
Gastrointestinal Chloride Channel Activators		
AMITIZA CAP 8MCG	Tier 3	PA; MAIL
AMITIZA CAP 24MCG	Tier 3	PA; MAIL
Gastrointestinal Stimulants		
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	Tier 1	QL (480 mL / 30 days); MAIL; Covered for ages 11 and under
<i>metoclopramide hcl tab 5 mg (base equivalent)</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>metoclopramide hcl tab 10 mg (base equivalent)</i>	Tier 1	QL (180 tabs / 30 days); MAIL
Inflammatory Bowel Agents		
APRISO CAP 0.375GM	Tier 2	QL (120 caps / 30 days); MAIL
<i>balsalazide disodium cap 750 mg</i>	Tier 2	QL (270 caps / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
CIMZIA KIT	Tier 4	PA; Medical Necessity PA; Prior use of appropriate Preferred Brands
CIMZIA KIT STARTER	Tier 4	PA; Medical Necessity PA; Prior use of appropriate Preferred Brands
CIMZIA PREFL KIT 200MG/ML	Tier 4	PA; Medical Necessity PA; Prior use of appropriate Preferred Brands
<i>mesalamine tab delayed release 800 mg</i>	Tier 2	MAIL
STELARA INJ 5MG/ML	Tier 4	PA; Preferred Brand
<i>sulfasalazine tab 500 mg</i>	Tier 1	QL (300 tabs / 30 days); MAIL
<i>sulfasalazine tab delayed release 500 mg</i>	Tier 1	QL (240 tabs / 30 days); MAIL
Intestinal Acidifiers		
<i>enulose sol 10gm/15</i>	Tier 1	QL (5400 mL / 30 days); MAIL
<i>generlac sol 10gm/15</i>	Tier 1	QL (5400 mL / 30 days); MAIL
<i>lactulose (encephalopathy) solution 10 gm/15ml</i>	Tier 1	QL (5400 mL / 30 days); MAIL
Phosphate Binder Agents		
<i>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</i>	Tier 1	QL (360 ea / 30 days); MAIL
<i>sevelamer carbonate packet 0.8 gm</i>	Tier 2	QL (525 packets / 30 days), ST; MAIL; PRIOR USE CALCIUM ACETATE
<i>sevelamer carbonate packet 2.4 gm</i>	Tier 2	QL (175.2 packets / 30 days), ST; MAIL; PRIOR USE CALCIUM ACETATE
<i>sevelamer carbonate tab 800 mg</i>	Tier 2	QL (525 tabs / 30 days), ST; MAIL; PRIOR USE CALCIUM ACETATE

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Drug Name	Drug Tier	Requirements/Limits
GENITOURINARY		
Miscellaneous		
<i>bethanechol chloride tab 5 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>bethanechol chloride tab 10 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>bethanechol chloride tab 25 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>bethanechol chloride tab 50 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
Urinary Antispasmodics		
<i>oxybutynin chloride syrup 5 mg/5ml</i>	Tier 1	QL (600 mL / 30 days); MAIL
<i>oxybutynin chloride tab 5 mg</i>	Tier 1	QL (90 ea / 30 days); MAIL
<i>oxybutynin chloride tab er 24hr 5 mg</i>	Tier 1	QL (30 ea / 30 days), ST; MAIL; PRIOR USE OXYBUTYNIN IR
<i>oxybutynin chloride tab er 24hr 10 mg</i>	Tier 1	QL (30 tabs / 30 days), ST; MAIL; PRIOR USE OXYBUTYNIN IR
<i>oxybutynin chloride tab er 24hr 15 mg</i>	Tier 1	QL (30 tabs / 30 days), ST; MAIL; PRIOR USE OXYBUTYNIN IR
<i>tolterodine tartrate tab 1 mg</i>	Tier 2	ST; MAIL; PRIOR USE OXYBUTYNIN IR
<i>tolterodine tartrate tab 2 mg</i>	Tier 2	ST; MAIL; PRIOR USE OXYBUTYNIN IR
<i>trospium chloride tab 20 mg</i>	Tier 2	ST; MAIL; PRIOR USE OXYBUTYNIN IR
GENITOURINARY AGENTS - MISCELLANEOUS		
Alkalinizers		
<i>potassium citrate & citric acid soln 1100-334 mg/5ml</i>	Tier 1	MAIL
<i>potassium citrate tab er 5 meq (540 mg)</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>potassium citrate tab er 10 meq (1080 mg)</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>sodium citrate & citric acid soln 500-334 mg/5ml</i>	Tier 1	MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>Cystinosis Agents</i>		
CYSTAGON CAP 50MG	Tier 4	PA
CYSTAGON CAP 150MG	Tier 4	PA
<i>Genitourinary Irrigants</i>		
<i>acetic acid irrigation soln 0.25%</i>	Tier 1	MAIL
<i>argyl saline sol 0.9%</i>	Tier 1	QL (100000 mL / 25 days); MAIL
<i>curity salin sol 0.9% irr</i>	Tier 1	QL (100000 mL / 25 days); MAIL
<i>sodium chloride irrigation soln 0.9%</i>	Tier 1	QL (100000 mL / 25 days); MAIL
<i>Interstitial Cystitis Agents</i>		
ELMIRON CAP 100MG	Tier 3	MAIL
<i>Prostatic Hypertrophy Agents</i>		
<i>alfuzosin hcl tab er 24hr 10 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>finasteride tab 5 mg</i>	Tier 1	QL (30 ea / 30 days); MAIL
<i>tamsulosin hcl cap 0.4 mg</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>Urinary Analgesics</i>		
<i>phenazo tab 200mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>phenazopyridine hcl tab 100 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>phenazopyridine hcl tab 200 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
GOUT AGENTS		
<i>Gout Agent Combinations</i>		
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>Gout Agents</i>		
<i>allopurinol tab 100 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>allopurinol tab 300 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>colchicine tab 0.6 mg</i>	Tier 1	QL (30 tabs / 90 days; Max 1 fill per 90 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
Uricosurics		
<i>probenecid tab 500 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL

HEMATOLOGICAL AGENTS - MISC.**Antihemophilic Products**

ADVATE INJ 250UNIT	Tier 4	PA
ADVATE INJ 500UNIT	Tier 4	PA
ADVATE INJ 1000UNIT	Tier 4	PA
ADVATE INJ 1500UNIT	Tier 4	PA
ADVATE INJ 2000UNIT	Tier 4	PA
ADVATE INJ 3000UNIT	Tier 4	PA
ADVATE INJ 4000UNIT	Tier 4	PA
ALPHANINE SD INJ 500UNIT	Tier 4	PA
ALPHANINE SD INJ 1500UNIT	Tier 4	PA
ALPROLIX INJ 250UNIT	Tier 4	PA
ALPROLIX INJ 500UNIT	Tier 4	PA
ALPROLIX INJ 1000UNIT	Tier 4	PA
ALPROLIX INJ 2000UNIT	Tier 4	PA
ALPROLIX INJ 3000UNIT	Tier 4	PA
ALPROLIX INJ 4000UNIT	Tier 4	PA
BENEFIX INJ 250UNIT	Tier 4	PA
BENEFIX INJ 500UNIT	Tier 4	PA
BENEFIX INJ 1000UNIT	Tier 4	PA
BENEFIX INJ 2000UNIT	Tier 4	PA
BENEFIX INJ 3000UNIT	Tier 4	PA
FEIBA INJ	Tier 4	PA
HELIXATE FS INJ 250UNIT	Tier 4	PA
HELIXATE FS INJ 500UNIT	Tier 4	PA
HELIXATE FS INJ 1000UNIT	Tier 4	PA
HEMLIBRA INJ 30MG/ML	Tier 4	PA
HEMLIBRA INJ 60/0.4	Tier 4	PA
HEMLIBRA INJ 105/0.7	Tier 4	PA
HEMLIBRA INJ 150/ML	Tier 4	PA
HEMOFIL M INJ 250UNIT	Tier 4	PA
HEMOFIL M INJ 500UNIT	Tier 4	PA
HEMOFIL M INJ 1000UNIT	Tier 4	PA
HEMOFIL M INJ 1700UNIT	Tier 4	PA
HUMATE-P SOL 500-1200	Tier 4	PA

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Drug Name	Drug Tier	Requirements/Limits
HUMATE-P SOL 2400UNIT	Tier 4	PA
KOATE INJ 250UNIT	Tier 4	PA
KOATE INJ 500 UNIT	Tier 4	PA
KOATE INJ 1000UNIT	Tier 4	PA
KOATE-DVI INJ 250UNIT	Tier 4	PA
KOATE-DVI INJ 500UNIT	Tier 4	PA
KOATE-DVI INJ 1000UNIT	Tier 4	PA
KOGENATE FS INJ 250UNIT	Tier 4	PA
KOGENATE FS INJ 500UNIT	Tier 4	PA
KOGENATE FS INJ 1000UNIT	Tier 4	PA
KOVALTRY INJ 250UNIT	Tier 4	PA
KOVALTRY INJ 500UNIT	Tier 4	PA
KOVALTRY INJ 1000UNIT	Tier 4	PA
KOVALTRY INJ 2000UNIT	Tier 4	PA
KOVALTRY INJ 3000UNIT	Tier 4	PA
MONOCLATE-P INJ 1000UNIT	Tier 4	PA
MONOCLATE-P INJ 1500UNIT	Tier 4	PA
NOVOEIGHT INJ 1500UNIT	Tier 4	PA
NOVOSEVEN RT INJ 2MG	Tier 4	PA
NOVOSEVEN RT INJ 5MG	Tier 4	PA
NOVOSEVEN RT INJ 8MG	Tier 4	PA
NUWIK INJ 250UNIT	Tier 4	PA
NUWIK INJ 500UNIT	Tier 4	PA
NUWIK INJ 1000UNIT	Tier 4	PA
NUWIK INJ 2000UNIT	Tier 4	PA
NUWIK INJ 2500UNIT	Tier 4	PA
NUWIK INJ 3000UNIT	Tier 4	PA
NUWIK INJ 4000UNIT	Tier 4	PA
NUWIK KIT 250UNIT	Tier 4	PA
NUWIK KIT 500UNIT	Tier 4	PA
NUWIK KIT 1000UNIT	Tier 4	PA
NUWIK KIT 2000UNIT	Tier 4	PA
NUWIK KIT 2500UNIT	Tier 4	PA
NUWIK KIT 3000UNIT	Tier 4	PA
NUWIK KIT 4000UNIT	Tier 4	PA
PROFILNINE INJ 1500UNIT	Tier 4	PA
RECOMBINATE INJ	Tier 4	PA
RECOMBINATE INJ 220-400	Tier 4	PA
RECOMBINATE INJ 401-800	Tier 4	PA

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Drug Name	Drug Tier	Requirements/Limits
RECOMBINATE INJ 801-1240	Tier 4	PA
RIXUBIS INJ 250 UNIT	Tier 4	PA
RIXUBIS INJ 500UNIT	Tier 4	PA
RIXUBIS INJ 1000UNIT	Tier 4	PA
RIXUBIS INJ 2000UNIT	Tier 4	PA
RIXUBIS INJ 3000UNIT	Tier 4	PA
XYNTHA INJ 250UNIT	Tier 4	PA
XYNTHA INJ 500UNIT	Tier 4	PA
XYNTHA INJ 1000UNIT	Tier 4	PA
XYNTHA INJ 2000UNIT	Tier 4	PA
XYNTHA SOLOF INJ 500UNIT	Tier 4	PA
XYNTHA SOLOF INJ 1000UNIT	Tier 4	PA
XYNTHA SOLOF INJ 2000UNIT	Tier 4	PA
XYNTHA SOLOF INJ 3000UNIT	Tier 4	PA
XYNTHA SOLOF KIT 250UNIT	Tier 4	PA
Bradykinin B2 Receptor Antagonists		
FIRAZYR INJ 30MG/3ML	Tier 4	PA
Hematorheologic Agents		
<i>pentoxifylline tab er 400 mg</i>	Tier 1	QL (120 ea / 30 days); MAIL
Platelet Aggregation Inhibitors		
<i>anagrelide hcl cap 0.5 mg</i>	Tier 1	QL (600 caps / 30 days); MAIL
<i>anagrelide hcl cap 1 mg</i>	Tier 1	QL (300 caps / 30 days); MAIL
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	Tier 2	PA; MAIL
BRILINTA TAB 90MG	Tier 3	QL (60 tabs / 30 days), PA; MAIL
<i>cilostazol tab 50 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>cilostazol tab 100 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>dipyridamole tab 25 mg</i>	Tier 1	QL (300 tabs / 30 days); MAIL
<i>dipyridamole tab 50 mg</i>	Tier 1	QL (240 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>dipyridamole tab 75 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>prasugrel hcl tab 5 mg (base equiv)</i>	Tier 2	QL (60 tabs / 30 days), PA; MAIL
<i>prasugrel hcl tab 10 mg (base equiv)</i>	Tier 2	QL (30 tabs / 30 days), PA; MAIL
<i>ticlopidine hcl tab 250 mg</i>	Tier 1	QL (60 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under

HEMATOPOIETIC AGENTS**Cobalamins**

<i>b-12 micrloz sub 500mcg</i>	Tier 1	OTC; MAIL
<i>b-12 tr tab 1000 mcg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>b-12-sl sub 1000mcg</i>	Tier 1	OTC; MAIL
<i>cvs b-12 sub 500mcg</i>	Tier 1	OTC; MAIL
<i>cvs vit b-12 tab 1000 tr</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>cyanocobalamin sl tab 500 mcg</i>	Tier 1	OTC; MAIL
<i>cyanocobalamin sl tab 1000 mcg</i>	Tier 1	OTC; MAIL
<i>cyanocobalamin sl tab 2500 mcg</i>	Tier 1	OTC; MAIL
<i>cyanocobalamin tab 100 mcg</i>	Tier 1	OTC; MAIL
<i>cyanocobalamin tab 250 mcg</i>	Tier 1	OTC; MAIL
<i>cyanocobalamin tab 500 mcg</i>	Tier 1	OTC; MAIL
<i>cyanocobalamin tab 1000 mcg</i>	Tier 1	OTC; MAIL
<i>cyanocobalamin tab er 1000 mcg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>gnp vit b-12 tab 500mcg</i>	Tier 1	OTC; MAIL
<i>gnp vit b-12 tab 1000 cr</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>gnp vit b-12 tab 1000 pr</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>hm vit b12 tab 500mcg</i>	Tier 1	OTC; MAIL
<i>ra vit b-12 tab 100mcg</i>	Tier 1	OTC; MAIL
<i>ra vit b-12 tab 1000 tr</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>sm vit b12 tab 500mcg</i>	Tier 1	OTC; MAIL
<i>sm vit b12 tab 1000mcg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>sm vit b-12 tab 100mcg</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>sm vit b-12 tab 500mcg</i>	Tier 1	OTC; MAIL
<i>vitamin b12 tab 1000mcg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
Folic Acid/Folates		
<i>fa-8 tab 0.8mg</i>	PREV	OTC, QL (150 tabs / 30 days); MAIL
<i>folic acid tab 1 mg</i>	Tier 1	QL (150 tabs / 30 days); MAIL
<i>folic acid tab 1 mg</i>	Tier 1	OTC, QL (150 tabs / 30 days); MAIL
<i>folic acid tab 400mcg</i>	PREV	OTC, QL (150 tabs / 30 days); MAIL
<i>folic acid tab 800 mcg</i>	PREV	OTC, QL (150 tabs / 30 days); MAIL
<i>sm folic acd tab 400mcg</i>	PREV	OTC, QL (150 tabs / 30 days); MAIL
<i>yl folic aci tab 400mcg</i>	PREV	OTC, QL (150 tabs / 30 days); MAIL
Hematopoietic Growth Factors		
ARANESP INJ 25MCG	Tier 4	PA
ARANESP INJ 40MCG	Tier 4	PA
ARANESP INJ 60MCG	Tier 4	PA
ARANESP INJ 100MCG	Tier 4	PA
ARANESP INJ 150MCG	Tier 4	PA
ARANESP INJ 200MCG	Tier 4	PA
ARANESP INJ 300MCG	Tier 4	PA
ARANESP INJ 500MCG	Tier 4	PA
EPOGEN INJ 2000/ML	Tier 4	PA
EPOGEN INJ 4000/ML	Tier 4	PA
EPOGEN INJ 10000/ML	Tier 4	PA
EPOGEN INJ 20000/ML	Tier 4	PA
FULPHILA INJ 6/0.6ML	Tier 4	PA
LEUKINE INJ 250MCG	Tier 4	PA
NEULASTA INJ 6MG/0.6M	Tier 4	PA
NEUPOGEN INJ 300/0.5	Tier 4	PA
NEUPOGEN INJ 300MCG	Tier 4	PA
NEUPOGEN INJ 480/0.8	Tier 4	PA
NEUPOGEN INJ 480MCG	Tier 4	PA
NIVESTYM INJ 300/0.5	Tier 4	PA

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Drug Name	Drug Tier	Requirements/Limits
NIVESTYM INJ 480/0.8	Tier 4	PA
PROCRIT INJ 2000/ML	Tier 4	PA
PROCRIT INJ 4000/ML	Tier 4	PA
PROCRIT INJ 10000/ML	Tier 4	PA
PROCRIT INJ 20000/ML	Tier 4	PA
PROCRIT INJ 40000/ML	Tier 4	PA
UDENYCA INJ 6MG/.6ML	Tier 4	PA
ZARXIO INJ 300/0.5	Tier 4	PA
ZARXIO INJ 480/0.8	Tier 4	PA
Hematopoietic Mixtures		
<i>ferocon cap</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>ferottrinsic cap</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>foltrin cap</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>hematogen cap</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>iferex 150 cap forte</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>iron complex cap</i>	Tier 1	OTC, QL (60 caps / 30 days); MAIL
<i>myferon 150 cap forte</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>poly-iron cap 150 fort</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>polysacchari cap iron</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>tl icon cap</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>tricon cap</i>	Tier 1	QL (60 caps / 30 days); MAIL
Iron		
<i>cvs iron tab 27mg</i>	Tier 1	OTC; MAIL
<i>cvs iron tab 325mg</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>fe tabs tab 325mg ec</i>	Tier 1	OTC; MAIL
<i>fer-iron dro 15mg/ml</i>	PREV	OTC, QL (150 mL / 30 days); MAIL

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<i>ferosul elx 220/5ml</i>	PREV	OTC, QL (1050 mL / 30 days); MAIL
<i>ferretts tab 325mg</i>	Tier 1	OTC; MAIL
<i>ferric x-150 cap 150mg</i>	Tier 1	OTC, QL (60 caps / 30 days); MAIL
<i>ferro-bob tab 325mg</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>ferrous fumarate tab 324 mg (106 mg elemental fe)</i>	Tier 1	OTC; MAIL
FERROUS GLUC TAB 324MG	Tier 1	OTC; MAIL
<i>ferrous gluconate tab 239 mg (27 mg fe equivalent)</i>	Tier 1	OTC; MAIL
<i>ferrous gluconate tab 240 mg (27 mg elemental fe)</i>	Tier 1	OTC; MAIL
<i>ferrous gluconate tab 324 mg (37.5 mg elemental iron)</i>	Tier 1	OTC; MAIL
FERROUS SUL LIQ 220/5ML	Tier 1	OTC; MAIL
FERROUS SULF TAB 324MG EC	Tier 1	OTC; MAIL
<i>ferrous sulf tab 325mg</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>ferrous sulfate elixir 220 mg/5ml (44 mg/5ml elemental fe)</i>	PREV	OTC, QL (1050 mL / 30 days); MAIL
<i>ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe)</i>	PREV	OTC, QL (150 mL / 30 days); MAIL
<i>ferrous sulfate tab 325 mg (65 mg elemental fe)</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>ferrous sulfate tab ec 325 mg (65 mg fe equivalent)</i>	Tier 1	OTC; MAIL
<i>ferrousul tab 325mg</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>gnp iron tab 45mg</i>	Tier 1	OTC; MAIL
<i>gnp iron tab 65mg</i>	Tier 1	OTC; MAIL
<i>hm iron tab 45mg</i>	Tier 1	OTC; MAIL
<i>hm iron tab 65mg</i>	Tier 1	OTC; MAIL
<i>iferex 150 cap</i>	Tier 1	OTC, QL (60 caps / 30 days); MAIL
<i>iron chw pediatri</i>	Tier 1	OTC; MAIL
<i>iron slow tab 45mg</i>	Tier 1	OTC; MAIL
<i>iron supplem tab therapy</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>iron supplmt dro 15mg/ml</i>	PREV	OTC, QL (150 mL / 30 days); MAIL
<i>myferon 150 cap 150mg</i>	Tier 1	OTC, QL (60 caps / 30 days); MAIL
<i>nu-iron 150 cap 150mg</i>	Tier 1	OTC, QL (60 caps / 30 days); MAIL
<i>pedia iron dro 15mg/ml</i>	PREV	OTC, QL (150 mL / 30 days); MAIL
<i>poly-iron cap 150mg</i>	Tier 1	OTC, QL (60 caps / 30 days); MAIL
<i>px iron tab 200mg</i>	Tier 1	OTC; MAIL
<i>ra iron tab 65mg</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>ra iron tab 325mg</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>slow iron tab 50mg</i>	Tier 1	OTC; MAIL
<i>slow iron tab 160mg cr</i>	Tier 1	OTC; MAIL
<i>slow release tab 45mg</i>	Tier 1	OTC; MAIL
<i>slow release tab 47.5mg</i>	Tier 1	OTC; MAIL
<i>slow-release tab fe 45mg</i>	Tier 1	OTC; MAIL
<i>sm iron slow tab 160mg cr</i>	Tier 1	OTC; MAIL
<i>sm iron tab 45mg</i>	Tier 1	OTC; MAIL
<i>sm iron tab 325mg</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>wee care sus 15/1.25</i>	PREV	OTC, QL (118.2 mL / 30 days); MAIL

HEMOSTATICS***Hemostatics - Systemic***

<i>tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)</i>	Tier 1	PA; MAIL
<i>tranexamic acid tab 650 mg</i>	Tier 1	MAIL

HYPNOTICS***Antihistamine Hypnotics***

<i>compoz tab 50mg</i>	Tier 1	OTC; MAIL
<i>diphenhydramine hcl (sleep) tab 50 mg</i>	Tier 1	OTC; MAIL
<i>hm nighttime tab 25mg</i>	Tier 1	OTC; MAIL
<i>night time tab 25mg</i>	Tier 1	OTC; MAIL
<i>nighttime tab 25mg</i>	Tier 1	OTC; MAIL
<i>nytol tab 25mg</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>ra nighttime tab 25mg</i>	Tier 1	OTC; MAIL
<i>ra sleep aid tab 25mg</i>	Tier 1	OTC; MAIL
<i>restfully sl tab 25mg</i>	Tier 1	OTC; MAIL
<i>simply sleep tab 25mg</i>	Tier 1	OTC; MAIL
<i>sleep aid tab 25mg</i>	Tier 1	OTC; MAIL
<i>sleep aid tab 25mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>sleep aid tab 50mg</i>	Tier 1	OTC; MAIL
<i>sleep ii tab 25mg</i>	Tier 1	OTC; MAIL
<i>sleep tab 25mg</i>	Tier 1	OTC; MAIL
<i>sleep-aid tab 25mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>sleep-tabs tab 25mg</i>	Tier 1	OTC; MAIL
<i>sm sleep aid tab 25mg</i>	Tier 1	OTC; MAIL
<i>sominex tab 25mg</i>	Tier 1	OTC; MAIL
<i>ultra sleep tab 25mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>wal-som tab 25mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

Barbiturate Hypnotics

<i>phenobarbital elixir 20 mg/5ml</i>	Tier 1	QL (1500 mL / 30 days); Covered for ages 12 and under
<i>phenobarbital tab 15 mg</i>	Tier 1	QL (60 tabs / 30 days)
<i>phenobarbital tab 16.2 mg</i>	Tier 1	QL (60 tabs / 30 days)
<i>phenobarbital tab 30 mg</i>	Tier 1	QL (60 tabs / 30 days)
<i>phenobarbital tab 32.4 mg</i>	Tier 1	QL (60 tabs / 30 days)
<i>phenobarbital tab 60 mg</i>	Tier 1	QL (60 tabs / 30 days)
<i>phenobarbital tab 64.8 mg</i>	Tier 1	QL (90 tabs / 30 days)
<i>phenobarbital tab 97.2 mg</i>	Tier 1	QL (60 tabs / 30 days)
<i>phenobarbital tab 100 mg</i>	Tier 1	QL (60 tabs / 30 days)

Non-Barbiturate Hypnotics

<i>chloral hydrate syrup 500 mg/5ml</i>	Tier 1	
<i>estazolam tab 1 mg</i>	Tier 1	QL (30 tabs / 30 days); Covered for ages 18 and over
<i>estazolam tab 2 mg</i>	Tier 1	QL (30 tabs / 30 days); Covered for ages 18 and over

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Drug Name	Drug Tier	Requirements/Limits
<i>flurazepam hcl cap 15 mg</i>	Tier 1	QL (30 caps / 30 days); AGE; Covered for ages 15-64
<i>flurazepam hcl cap 30 mg</i>	Tier 1	QL (30 caps / 30 days); AGE; Covered for ages 15-64
<i>temazepam cap 15 mg</i>	Tier 1	QL (30 caps / 30 days); Covered for ages 18 and over
<i>temazepam cap 30 mg</i>	Tier 1	QL (60 caps / 30 days); Covered for ages 18 and over
<i>triazolam tab 0.25 mg</i>	Tier 1	QL (30 tabs / 30 days); Covered for ages 18 and over
<i>triazolam tab 0.125 mg</i>	Tier 1	QL (30 tabs / 30 days); Covered for ages 18 and over
<i>zaleplon cap 5 mg</i>	Tier 1	QL (30 / 30 days)
<i>zaleplon cap 10 mg</i>	Tier 1	QL (30 / 30 days)
<i>zolpidem tartrate tab 5 mg</i>	Tier 1	QL (60 tabs / 30 days); Covered for ages 18 and over
<i>zolpidem tartrate tab 10 mg</i>	Tier 1	QL (30 tabs / 30 days); Covered for ages 18 and over

LAXATIVES**Bulk Laxatives**

<i>best fiber pow</i>	Tier 1	OTC; MAIL
<i>clr soluble pow fiber</i>	Tier 1	OTC; MAIL
<i>corn dextrin oral powder</i>	Tier 1	OTC; MAIL
<i>cvs fiber cap 0.52gm</i>	Tier 1	OTC; MAIL
<i>cvs fiber la tab 625mg</i>	Tier 1	OTC; MAIL
<i>easy fiber pow</i>	Tier 1	OTC; MAIL
<i>eq daily cap fiber</i>	Tier 1	OTC; MAIL
<i>eq fiber pow</i>	Tier 1	OTC; MAIL
<i>eq fiber la tab 625mg</i>	Tier 1	OTC; MAIL
<i>eq fiber pow supplemn</i>	Tier 1	OTC; MAIL
<i>fiber laxatv tab 625mg</i>	Tier 1	OTC; MAIL
<i>fiber laxtiv cap 0.52gm</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>fiber therap pow 28.3%</i>	Tier 1	OTC; MAIL
<i>fiber therap pow 48.57%</i>	Tier 1	OTC; MAIL
<i>fiber therap pow sf orang</i>	Tier 1	OTC; MAIL
<i>fiber therap tab 500mg</i>	Tier 1	OTC; MAIL
<i>fiber therap tab 625mg</i>	Tier 1	OTC; MAIL
<i>fiber-lax tab 625mg</i>	Tier 1	OTC; MAIL
<i>fibergen tab 625mg</i>	Tier 1	OTC; MAIL
<i>gnp best pow fiber</i>	Tier 1	OTC; MAIL
<i>hm fiber cap 0.52gm</i>	Tier 1	OTC; MAIL
<i>hm fiber pow 28.3%</i>	Tier 1	OTC; MAIL
<i>hm fiber pow 30.9%</i>	Tier 1	OTC; MAIL
<i>hm fiber pow 48.57%</i>	Tier 1	OTC; MAIL
<i>hm fiber pow 58.6%</i>	Tier 1	OTC; MAIL
<i>hm fiber tab 500mg</i>	Tier 1	OTC; MAIL
<i>kls fiber tb tab 625mg</i>	Tier 1	OTC; MAIL
<i>konsyl cap 520mg</i>	Tier 1	OTC; MAIL
<i>konsyl daily pow 28.3%</i>	Tier 1	OTC; MAIL
KONSYL DAILY POW 28.3%	Tier 1	OTC; MAIL
KONSYL DAILY POW 100%	Tier 1	OTC; MAIL
<i>konsyl fiber tab 625mg</i>	Tier 1	OTC; MAIL
<i>konsyl pow 30.9%</i>	Tier 1	OTC; MAIL
KONSYL-D POW 52.3%	Tier 1	OTC; MAIL
<i>medi-mucil cap 0.52gm</i>	Tier 1	OTC; MAIL
METAMUCIL POW 28%ORG	Tier 1	OTC; MAIL
<i>metamucil pow 28.3%org</i>	Tier 1	OTC; MAIL
METAMUCIL POW 55.46%	Tier 1	OTC; MAIL
<i>metamucil pow 58.6%</i>	Tier 1	OTC; MAIL
<i>metamucil pow 58.6%org</i>	Tier 1	OTC; MAIL
METAMUCIL POW 58.12%	Tier 1	OTC; MAIL
METAMUCIL POW CLEAR	Tier 2	OTC; MAIL
METAMUCIL WAF	Tier 1	OTC; MAIL
<i>nat fiber pow 48.57%</i>	Tier 1	OTC; MAIL
NAT FIBER POW 58.6%	Tier 1	OTC; MAIL
<i>nat fiber pow therapy</i>	Tier 1	OTC; MAIL
<i>nat psyllium pow fiber</i>	Tier 1	OTC; MAIL
<i>nat veg fibr pow</i>	Tier 1	OTC; MAIL
<i>naturl fiber pow 28.3%</i>	Tier 1	OTC; MAIL
<i>naturl fiber pow 30.9%</i>	Tier 1	OTC; MAIL
<i>naturl fiber pow 58.6%</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>psyllium powder 100%</i>	Tier 1	OTC; MAIL
<i>psyllium see pow 100%</i>	Tier 1	OTC; MAIL
<i>px fiber cap 0.52gm</i>	Tier 1	OTC; MAIL
<i>px fiber tab 625mg</i>	Tier 1	OTC; MAIL
<i>qc natural pow vegetabl</i>	Tier 1	OTC; MAIL
<i>ra fib lax pow 48.57%</i>	Tier 1	OTC; MAIL
<i>ra fiber cap 0.52gm</i>	Tier 1	OTC; MAIL
<i>ra fiber pow 28.3%</i>	Tier 1	OTC; MAIL
<i>ra fiber pow 48.57%</i>	Tier 1	OTC; MAIL
<i>ra fiber pow 58.6%</i>	Tier 1	OTC; MAIL
<i>ra fiber tab 500mg</i>	Tier 1	OTC; MAIL
<i>ra fiber-cap tab 625mg</i>	Tier 1	OTC; MAIL
<i>ra fiber-tab tab 625mg</i>	Tier 1	OTC; MAIL
<i>reguloid cap 0.52gm</i>	Tier 1	OTC; MAIL
<i>reguloid pow 28.3%</i>	Tier 1	OTC; MAIL
<i>reguloid pow 48.57%</i>	Tier 1	OTC; MAIL
<i>reguloid pow 58.6%</i>	Tier 1	OTC; MAIL
<i>sb fib lax pow 33%</i>	Tier 1	OTC; MAIL
<i>sb fiber lax tab 625mg</i>	Tier 1	OTC; MAIL
<i>sm fiber lax tab 500mg</i>	Tier 1	OTC; MAIL
<i>sm fiber pow 28.3%</i>	Tier 1	OTC; MAIL
<i>sm fiber pow 48.57%</i>	Tier 1	OTC; MAIL
<i>sm fiber pow 58.6%</i>	Tier 1	OTC; MAIL
<i>soluble fib tab therapy</i>	Tier 1	OTC; MAIL
<i>sorbulax pow 100%</i>	Tier 1	OTC; MAIL
<i>tgt psyllium cap 0.52gm</i>	Tier 1	OTC; MAIL
<i>total fiber pow</i>	Tier 1	OTC; MAIL
UNIFIBER POW	Tier 1	OTC; MAIL
<i>veg fiber pow 63%</i>	Tier 1	OTC; MAIL
<i>wal-mucil cap 0.52gm</i>	Tier 1	OTC; MAIL
<i>wal-mucil pow 28.3%</i>	Tier 1	OTC; MAIL
<i>wal-mucil pow 48.57%</i>	Tier 1	OTC; MAIL
<i>wal-mucil pow 58.6%</i>	Tier 1	OTC; MAIL
<i>wal-mucil pow 100%</i>	Tier 1	OTC; MAIL
Laxative Combinations		
<i>doc-q-lax tab 8.6-50mg</i>	Tier 1	OTC; MAIL
<i>dok plus tab 8.6-50mg</i>	Tier 1	OTC; MAIL
<i>easy-lax pls tab 8.6-50mg</i>	Tier 1	OTC; MAIL
<i>eq senna-s tab 8.6-50mg</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>gavilyte-c sol</i>	Tier 1	QL (120000 mL / 30 days); MAIL
<i>gavilyte-g sol</i>	Tier 1	QL (120000 mL / 30 days); MAIL
<i>gavilyte-n sol flav pk</i>	Tier 1	QL (120000 mL / 30 days); MAIL
GOLYTELY SOL	Tier 2	QL (30 ea / 30 days); MAIL
HALFLYTELY KIT FLAV PKS	Tier 2	MAIL; \$0 Copay for Bowel Preparation for age +50
<i>lax/stl soft tab 8.6-50mg</i>	Tier 1	OTC; MAIL
<i>laxacin tab 8.6-50mg</i>	Tier 1	OTC; MAIL
<i>laxative pls tab 8.6-50mg</i>	Tier 1	OTC; MAIL
<i>medi-laxx cap 8.6-50mg</i>	Tier 1	OTC; MAIL
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	Tier 1	QL (120000 mL / 30 days); MAIL
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm</i>	Tier 1	QL (120000 mL / 30 days); MAIL
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	Tier 1	QL (120000 mL / 30 days); MAIL
<i>peg-prep kit</i>	Tier 1	MAIL; \$0 Copay for Bowel Preparation for age +50
<i>ra p col-rit tab 8.6-50mg</i>	Tier 1	OTC; MAIL
<i>sb docusate tab 8.6-50mg</i>	Tier 1	OTC; MAIL
<i>senexon-s tab 8.6-50mg</i>	Tier 1	OTC; MAIL
<i>senna plus tab 8.6-50mg</i>	Tier 1	OTC; MAIL
<i>senna s tab 8.6-50mg</i>	Tier 1	OTC; MAIL
<i>senna tab 8.6-50mg</i>	Tier 1	OTC; MAIL
<i>senna-s tab 8.6-50mg</i>	Tier 1	OTC; MAIL
<i>senna-time s tab 8.6-50mg</i>	Tier 1	OTC; MAIL
<i>sennalax-s tab 8.6-50mg</i>	Tier 1	OTC; MAIL
<i>sennosides-docusate sodium tab 8.6-50 mg</i>	Tier 1	OTC; MAIL
<i>stool softnr tab 8.6-50mg</i>	Tier 1	OTC; MAIL
<i>trilyte sol</i>	Tier 1	QL (120000 mL / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>Laxatives - Miscellaneous</i>		
<i>clearlax pow</i>	Tier 1	OTC, QL (527 gm / 25 days); MAIL
<i>constulose sol 10gm/15</i>	Tier 1	QL (5400 mL / 30 days); MAIL
<i>cvs glycerin sup 2.1gm</i>	Tier 1	OTC; MAIL
<i>cvs purelax pak</i>	Tier 1	OTC; MAIL
<i>cvs purelax pow</i>	Tier 1	OTC, QL (527 gm / 25 days); MAIL
<i>eq clearlax pow</i>	Tier 1	OTC, QL (527 gm / 25 days); MAIL
<i>eql clearlax pow</i>	Tier 1	OTC, QL (527 gm / 25 days); MAIL
<i>gavilax pow</i>	Tier 1	OTC, QL (527 gm / 25 days); MAIL
<i>gentlelax pow</i>	Tier 1	OTC, QL (527 gm / 25 days); MAIL
<i>glycerin ped sup 1.2gm</i>	Tier 1	OTC; MAIL
<i>glycerin sup 2gm</i>	Tier 1	OTC; MAIL
<i>glycerin suppos 1.2 gm</i>	Tier 1	OTC; MAIL
<i>glycerin suppos 2.1 gm</i>	Tier 1	OTC; MAIL
<i>glycolax pow 3350 nf</i>	Tier 1	OTC, QL (527 gm / 25 days); MAIL
<i>gnp clearlax pow</i>	Tier 1	OTC, QL (527 gm / 25 days); MAIL
<i>gnp glycerin sup 1.2gm</i>	Tier 1	OTC; MAIL
<i>gnp glycerin sup 2.1gm</i>	Tier 1	OTC; MAIL
<i>healthylax pow</i>	Tier 1	OTC; MAIL
<i>hm clearlax pow</i>	Tier 1	OTC, QL (527 gm / 25 days); MAIL
<i>lactulose solution 10 gm/15ml</i>	Tier 1	QL (5400 mL / 30 days); MAIL
<i>laxaclear pow</i>	Tier 1	OTC, QL (527 gm / 25 days); MAIL
<i>natura-lax pow 3350 nf</i>	Tier 1	OTC, QL (527 gm / 25 days); MAIL
<i>pegylax pow</i>	Tier 1	QL (527 gm / 25 days); MAIL
<i>polyethylene glycol 3350 oral packet</i>	Tier 1	MAIL
<i>polyethylene glycol 3350 oral packet</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>polyethylene glycol 3350 oral powder</i>	Tier 1	QL (527 gm / 25 days); MAIL
<i>polyethylene glycol 3350 oral powder</i>	Tier 1	OTC, QL (527 gm / 25 days); MAIL
<i>px glycerin sup 2.1gm</i>	Tier 1	OTC; MAIL
<i>ra glycerin sup 80.7%</i>	Tier 1	OTC; MAIL
<i>ra laxative pow</i>	Tier 1	OTC; MAIL
<i>ra laxative pow</i>	Tier 1	OTC, QL (527 gm / 25 days); MAIL
<i>sani-suppl sup adult</i>	Tier 1	OTC; MAIL
<i>sani-suppl sup pediatri</i>	Tier 1	OTC; MAIL
<i>sb glycerin sup 1.2gm</i>	Tier 1	OTC; MAIL
<i>sb glycerin sup 2.1gm</i>	Tier 1	OTC; MAIL
<i>sm clearlax pow</i>	Tier 1	OTC, QL (527 gm / 25 days); MAIL
<i>sm glycerin sup 80.7%</i>	Tier 1	OTC; MAIL
<i>smooth lax pow 3350</i>	Tier 1	OTC, QL (527 gm / 25 days); MAIL
<i>smooth lax pow 3350 nf</i>	Tier 1	OTC; MAIL
<i>sw clearlax pow</i>	Tier 1	OTC, QL (527 gm / 25 days); MAIL

Lubricant Laxatives

CVS MINERAL OIL	Tier 1	OTC; MAIL
GNP MINERAL OIL HEAVY	Tier 1	OTC; MAIL
HM MINERAL OIL	Tier 1	OTC; MAIL
MINERAL OIL	Tier 1	MAIL
MINERAL OIL	Tier 1	OTC; MAIL
<i>mineral oil enema</i>	Tier 1	OTC; MAIL
QC MINERAL OIL HEAVY	Tier 1	OTC; MAIL
RA MINERAL OIL	Tier 1	OTC; MAIL
SM MINERAL OIL	Tier 1	OTC; MAIL
TH MINERAL OIL	Tier 1	OTC; MAIL

Saline Laxatives

<i>citroma</i>	Tier 1	OTC; MAIL
<i>cvs enema ene disposab</i>	Tier 1	OTC; MAIL
<i>disposable ene single</i>	Tier 1	OTC; MAIL
<i>dulcolax mom sus mint</i>	Tier 1	OTC; MAIL
<i>eq enema ene double</i>	Tier 1	OTC; MAIL
<i>eq enema ene rtu</i>	Tier 1	OTC; MAIL

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<i>gnp enema ene</i>	Tier 1	OTC; MAIL
<i>gnp milk mag sus</i>	Tier 1	OTC; MAIL
<i>hm enema ene</i>	Tier 1	OTC; MAIL
<i>mag citrate sol cherry</i>	Tier 1	OTC; MAIL
<i>mag citrate sol lemon</i>	Tier 1	OTC; MAIL
<i>magnesium citrate soln</i>	Tier 1	OTC; MAIL
<i>milk of magn sus</i>	Tier 1	OTC; MAIL
<i>milk of magn sus 400/5ml</i>	Tier 1	OTC; MAIL
<i>milk of magn sus 1200/15</i>	Tier 1	OTC; MAIL
MILK OF MAGN SUS 2400MG	Tier 1	OTC; MAIL
<i>milk of magn sus cherry</i>	Tier 1	OTC; MAIL
<i>milk of magn sus frsh mnt</i>	Tier 1	OTC; MAIL
<i>milk of magn sus mint</i>	Tier 1	OTC; MAIL
OSMOPREP TAB 1.5GM	Tier 3	PA; MAIL
<i>pediatric ene enema</i>	Tier 1	OTC; MAIL
<i>phosphate sol laxative</i>	Tier 1	OTC; MAIL
<i>qc enema ene</i>	Tier 1	OTC; MAIL
<i>ra enema ene</i>	Tier 1	OTC; MAIL
<i>ra milk magn sus 400/5ml</i>	Tier 1	OTC; MAIL
<i>saline ene laxative</i>	Tier 1	OTC; MAIL
<i>sm enema ene</i>	Tier 1	OTC; MAIL
<i>sm milk magn sus cherry</i>	Tier 1	OTC; MAIL
<i>sm milk magn sus mint</i>	Tier 1	OTC; MAIL
<i>sm milk magn sus original</i>	Tier 1	OTC; MAIL
<i>sodium phosphates - enema</i>	Tier 1	OTC; MAIL
Stimulant Laxatives		
<i>alophen tab 5mg ec</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>bisac-evac sup 10mg</i>	Tier 1	OTC, QL (60 supp / 30 days); MAIL
<i>bisacodyl sup 10mg</i>	Tier 1	OTC, QL (60 supp / 30 days); MAIL
<i>bisacodyl tab 5mg ec</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>biscolax sup 10mg</i>	Tier 1	OTC, QL (60 supp / 30 days); MAIL
<i>carters tab 5mg ec</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>correct tab 5mg ec</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>correctol tab 5mg ec</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>cvs laxative chw 15mg</i>	Tier 1	OTC; MAIL
<i>cvs laxative tab 25mg</i>	Tier 1	OTC; MAIL
<i>cvs senna tab 8.6mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>dr edwards tab 8.6mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>ducodyl tab 5mg ec</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>eq laxative chw 15mg</i>	Tier 1	OTC; MAIL
<i>eq laxative tab 8.6mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>eq laxative tab 25mg</i>	Tier 1	OTC; MAIL
<i>eql laxative tab 5mg ec</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>eql laxative tab 25mg</i>	Tier 1	OTC; MAIL
<i>evac-u-gen tab 8.6mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>ex-lax ultra tab 5mg ec</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>fast relief sup 10mg</i>	Tier 1	OTC, QL (60 supp / 30 days); MAIL
<i>feenamint tab 5mg ec</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>feminine lax tab 5mg ec</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>fleet laxati tab 5mg ec</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>gentle laxat sup 10mg</i>	Tier 1	OTC, QL (60 supp / 30 days); MAIL
<i>gentle laxat tab 5mg ec</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>geri-kot tab 8.6mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>gnp bisa-lax tab 5mg ec</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>gnp laxative sup 10mg</i>	Tier 1	OTC, QL (60 supp / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>gnp laxative tab 25mg</i>	Tier 1	OTC; MAIL
<i>gnp senna tab 8.6mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>hm laxative tab 5mg ec</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>hm senna tab 8.6mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>kp bisacodyl tab 5mg ec</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>laxative chw 15mg</i>	Tier 1	OTC; MAIL
<i>laxative tab 5mg ec</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>laxative tab 25mg</i>	Tier 1	OTC; MAIL
<i>laxative tab max-str</i>	Tier 1	OTC; MAIL
<i>laxative tab w/senna</i>	Tier 1	OTC; MAIL
<i>magic bullet sup 10mg</i>	Tier 1	OTC, QL (60 supp / 30 days); MAIL
<i>medi-natural tab 8.6mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>nat veg lax tab 8.6mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>px laxative tab 8.6mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>qc laxative sup 10mg</i>	Tier 1	OTC, QL (60 supp / 30 days); MAIL
<i>qc laxative tab 5mg ec</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>qc senna tab 8.6mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>ra laxative chw 15mg</i>	Tier 1	OTC; MAIL
<i>ra laxative sup 10mg</i>	Tier 1	OTC, QL (60 supp / 30 days); MAIL
<i>ra laxative tab 5mg ec</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>ra laxative tab 25mg</i>	Tier 1	OTC; MAIL
<i>ra senna tab 8.6mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>sb laxative sup 10mg</i>	Tier 1	OTC, QL (60 supp / 30 days); MAIL
<i>senexon liq 8.8mg/5</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>senexon tab 8.6mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>senna lax tab 8.6mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>senna laxati tab 8.6mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
SENNA TAB 8.6MG	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>senna-grx syp 8.8mg/5</i>	Tier 1	OTC; MAIL
<i>senna-tabs tab 8.6mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>senna-time tab 8.6mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>sennacon tab 8.6mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>sennazon syp 8.8mg/5</i>	Tier 1	OTC; MAIL
<i>senno tab 8.6mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>sennosides syrup 8.8 mg/5ml</i>	Tier 1	OTC; MAIL
<i>sm laxative sup 10mg</i>	Tier 1	OTC, QL (60 supp / 30 days); MAIL
<i>sm laxative tab 5mg ec</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>sm senna lax tab 8.6mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>sm senna lax tab max str</i>	Tier 1	OTC; MAIL
<i>stim laxat tab 5mg ec</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>tgt natural tab laxative</i>	Tier 1	OTC; MAIL
<i>tgt senna tab 8.6mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
VERACOLATE TAB	Tier 1	OTC; MAIL
<i>womans laxat tab 5mg ec</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
<i>womens laxat tab 5mg ec</i>	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
Surfactant Laxatives		
<i>correctol cap 100mg</i>	Tier 1	OTC, QL (180 caps / 30 days); MAIL
<i>diocto liq 50mg/5ml</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>diecto syp 60/15ml</i>	Tier 1	OTC; MAIL
<i>docqlace cap 100mg</i>	Tier 1	OTC, QL (180 caps / 30 days); MAIL
<i>docu liq 50mg/5ml</i>	Tier 1	OTC; MAIL
<i>docu soft cap 100mg</i>	Tier 1	OTC, QL (180 caps / 30 days); MAIL
<i>docuprene tab 100mg</i>	Tier 1	OTC; MAIL
<i>docusate calcium cap 240 mg</i>	Tier 1	OTC, QL (60 caps / 30 days); MAIL
<i>docusate sod liq 50mg/5ml</i>	Tier 1	OTC; MAIL
<i>docusate sodium cap 100 mg</i>	Tier 1	OTC, QL (180 caps / 30 days); MAIL
<i>docusate sodium cap 250 mg</i>	Tier 1	OTC, QL (180 caps / 30 days); MAIL
<i>docusate sodium liquid 150 mg/15ml</i>	Tier 1	OTC; MAIL
<i>docusate sodium syrup 60 mg/15ml</i>	Tier 1	OTC; MAIL
<i>docusate sodium tab 100 mg</i>	Tier 1	OTC; MAIL
<i>docusil cap 100mg</i>	Tier 1	OTC, QL (180 caps / 30 days); MAIL
<i>docusol plus ene 20-283</i>	Tier 1	OTC; MAIL
<i>dok cap 100mg</i>	Tier 1	OTC, QL (180 caps / 30 days); MAIL
<i>dok cap 250mg</i>	Tier 1	OTC, QL (180 caps / 30 days); MAIL
<i>dok tab 100mg</i>	Tier 1	OTC; MAIL
<i>dulcolax ss cap 100mg</i>	Tier 1	OTC, QL (180 caps / 30 days); MAIL
<i>easy-lax cap 100mg</i>	Tier 1	OTC, QL (180 caps / 30 days); MAIL
<i>enemeez plus ene 20-283</i>	Tier 1	OTC; MAIL
<i>kao-tin cap 240mg</i>	Tier 1	OTC, QL (60 caps / 30 days); MAIL
<i>laxa basic cap 100mg</i>	Tier 1	OTC, QL (180 caps / 30 days); MAIL
PEDIA-LAX LIQ 50MG	Tier 1	OTC; MAIL
<i>phillips cap 100mg</i>	Tier 1	OTC, QL (180 caps / 30 days); MAIL
<i>promolaxin tab 100mg</i>	Tier 1	OTC; MAIL
<i>ra col-rite cap 50mg</i>	Tier 1	OTC, QL (60 caps / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>ra col-rite cap 100mg</i>	Tier 1	OTC, QL (180 caps / 30 days); MAIL
<i>ra col-rite cap 250mg</i>	Tier 1	OTC, QL (180 caps / 30 days); MAIL
<i>silace liq 10mg/ml</i>	Tier 1	OTC; MAIL
<i>silace syp 60/15ml</i>	Tier 1	OTC; MAIL
<i>sof-lax cap 100mg</i>	Tier 1	OTC, QL (180 caps / 30 days); MAIL
<i>stool softnr cap 50mg</i>	Tier 1	OTC, QL (60 caps / 30 days); MAIL
<i>stool softnr cap 100mg</i>	Tier 1	OTC, QL (180 caps / 30 days); MAIL
<i>stool softnr cap 240mg</i>	Tier 1	OTC, QL (60 caps / 30 days); MAIL
<i>stool softnr cap 250mg</i>	Tier 1	OTC, QL (180 caps / 30 days); MAIL
<i>stool softnr syp 60/15ml</i>	Tier 1	OTC; MAIL
<i>stool softnr tab 100mg</i>	Tier 1	OTC; MAIL
<i>surfak cap 240mg</i>	Tier 1	OTC, QL (60 caps / 30 days); MAIL
<i>vacuant plus ene 20-283</i>	Tier 1	OTC; MAIL

MACROLIDES**Azithromycin**

<i>azithromycin for susp 100 mg/5ml</i>	Tier 1	QL (Max 1 fill per 45 days); covered for ages 12 and under
<i>azithromycin for susp 200 mg/5ml</i>	Tier 1	QL (Max 1 fill per 45 days); covered for ages 12 and under
<i>azithromycin powd pack for susp 1 gm</i>	Tier 1	QL (Max day supply 1; Max 1 per day)
<i>azithromycin tab 250 mg</i>	Tier 1	QL (13 tabs / 25 days)
<i>azithromycin tab 500 mg</i>	Tier 1	QL (13 tabs / 25 days)
<i>azithromycin tab 600 mg</i>	Tier 1	QL (8 tabs / 25 days)

Clarithromycin

<i>clarithromycin for susp 125 mg/5ml</i>	Tier 2	
<i>clarithromycin for susp 250 mg/5ml</i>	Tier 2	
<i>clarithromycin tab 250 mg</i>	Tier 1	
<i>clarithromycin tab 500 mg</i>	Tier 1	

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Drug Name	Drug Tier	Requirements/Limits
<i>Erythromycins</i>		
<i>e.e.s. 400 tab 400mg</i>	Tier 2	QL (180 tabs / 30 days)
ERY-TAB TAB 250MG EC	Tier 2	QL (240 tabs / 30 days)
ERY-TAB TAB 333MG EC	Tier 2	QL (180 tabs / 30 days)
ERY-TAB TAB 500MG EC	Tier 2	QL (120 tabs / 30 days)
<i>erythrocin tab 250mg</i>	Tier 2	QL (240 tabs / 30 days)
<i>erythromycin ethylsuccinate for susp 200 mg/5ml</i>	Tier 2	Covered for ages 12 and under
<i>erythromycin ethylsuccinate tab 400 mg</i>	Tier 2	QL (180 tabs / 30 days)
<i>erythromycin tab 250 mg</i>	Tier 2	QL (240 tabs / 30 days)
<i>erythromycin tab 500 mg</i>	Tier 2	QL (180 tabs / 30 days)

MEDICAL DEVICES***Contraceptives***

FC2 FEMALE MIS CONDOM	PREV	OTC; MAIL
FC FEMALE MIS CONDOM	PREV	OTC; MAIL
FEMCAP MIS 22MM	PREV	MAIL
FEMCAP MIS 26MM	PREV	MAIL
FEMCAP MIS 30MM	PREV	MAIL
OMNIFLEX DPR	PREV	QL (2 each / year); MAIL
ORTHO COIL DPR KIT 50	PREV	QL (2 kits / year); MAIL
ORTHO COIL DPR KIT 100	PREV	QL (2 kits / year); MAIL
ORTHO COIL DPR KIT 105	PREV	QL (2 kits / year); MAIL
ORTHO FLAT DPR KIT 55	PREV	QL (2 kits / year); MAIL
ORTHO FLAT DPR KIT 60	PREV	QL (2 kits / year); MAIL
ORTHO FLAT DPR KIT 65	PREV	QL (2 kits / year); MAIL
ORTHO FLAT DPR KIT 70	PREV	QL (2 kits / year); MAIL
ORTHO FLAT DPR KIT 75	PREV	QL (2 kits / year); MAIL
ORTHO FLAT DPR KIT 80	PREV	QL (2 kits / year); MAIL
ORTHO FLAT DPR KIT 85	PREV	QL (2 kits / year); MAIL
ORTHO FLAT DPR KIT 90	PREV	QL (2 kits / year); MAIL
ORTHO FLAT DPR KIT 95	PREV	QL (2 kits / year); MAIL
ORTHO FLEX DPR 65MM	PREV	QL (2 each / year); MAIL
ORTHO FLEX DPR 70MM	PREV	QL (2 each / year); MAIL
ORTHO FLEX DPR 75MM	PREV	QL (2 each / year); MAIL

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Drug Name	Drug Tier	Requirements/Limits
ORTHO FLEX DPR 80MM	PREV	QL (2 each / year); MAIL
PRENTIF MIS 25MM	PREV	MAIL
PRENTIF MIS 28MM	PREV	MAIL
PRENTIF MIS 31MM	PREV	MAIL
PRENTIF MIS FITTING	PREV	MAIL
TODAY SPONGE MIS	PREV	OTC; MAIL
WIDE-SEAL DPR KIT 60	PREV	QL (2 each / year); MAIL
WIDE-SEAL DPR KIT 65	PREV	QL (2 each / year); MAIL
WIDE-SEAL DPR KIT 70	PREV	QL (2 each / year); MAIL
WIDE-SEAL DPR KIT 75	PREV	QL (2 each / year); MAIL
WIDE-SEAL DPR KIT 80	PREV	QL (2 each / year); MAIL
WIDE-SEAL DPR KIT 85	PREV	QL (2 each / year); MAIL
WIDE-SEAL DPR KIT 90	PREV	QL (2 each / year); MAIL
WIDE-SEAL DPR KIT 95	PREV	QL (2 each / year); MAIL
<i>Diabetic Supplies</i>		
LANCETS	DME	OTC, QL (200.1 boxes / 30 days); MAIL; CERTAIN LABELERS EXCLUDED
TRUE METRIX KIT AIR	DME	OTC, QL (1 per 365 days); MAIL
TRUE METRIX KIT METER	DME	OTC, QL (1 per 365 Days); MAIL
<i>Misc. Devices</i>		
ALCOHOL SWABS	Tier 1	QL (200.1 ea / 30 days); MAIL
ALCOHOL SWABS	Tier 1	OTC, QL (200.1 ea / 30 days); MAIL; CERTAIN LABELERS EXCLUDED

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Drug Name	Drug Tier	Requirements/Limits
<i>Parenteral Therapy Supplies</i>		
BD U-500 MIS 31GX6MM	DME	QL (150 / 30 days); MAIL
INSULIN PEN NEEDLES	DME	OTC, QL (200.1 boxes / 30 days); MAIL; CERTAIN LABELERS EXCLUDED
INSULIN SYRINGES	DME	OTC, QL (150 / 30 days); MAIL
<i>Respiratory Therapy Supplies</i>		
MABIS COSMO MIS NEBULIZR	Tier 2	MAIL
NEBULIZERS	Tier 2	MAIL
NEBULIZERS	Tier 2	OTC; MAIL
RESPIRATORY THERAPY SUPPLIES - MISC	Tier 2	QL (1 each / 25 days); MAIL
RESPIRATORY THERAPY SUPPLIES - MISC	Tier 2	QL (Max day supply 365); MAIL
RESPIRATORY THERAPY SUPPLIES - MISC	Tier 2	OTC, QL (Max day supply 365); MAIL
SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE	Tier 2	QL (1 per 365 Days; Max day supply 365); MAIL
SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE	Tier 2	OTC, QL (1 per 365 Days; Max day supply 365); MAIL
MIGRAINE PRODUCTS		
<i>Migraine Products</i>		
<i>dihydroergotamine mesylate inj 1 mg/ml</i>	Tier 2	MAIL
ERGOMAR SUB 2MG	Tier 3	MAIL
<i>Serotonin Agonists</i>		
<i>naratriptan hcl tab 1 mg (base equiv)</i>	Tier 1	QL (9 per 30 Days); MAIL
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	Tier 1	QL (9 per 30 Days); MAIL
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	Tier 1	QL (12 / 30 days), ST; MAIL; PRIOR USE SUMATRIPTAN AND NARATRIPTAN FOR 5 DAYS

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<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	Tier 1	QL (12 / 30 days), ST; MAIL; PRIOR USE SUMATRIPTAN AND NARATRIPTAN FOR 5 DAYS
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	Tier 2	QL (2 / 30 days; Max day supply 25), ST; PRIOR USE OF SUMATRIPTAN TAB OR NARATRIPTAN TAB
<i>sumatriptan succinate tab 25 mg</i>	Tier 1	QL (9 per 30 Days); MAIL
<i>sumatriptan succinate tab 50 mg</i>	Tier 1	QL (9 per 30 Days); MAIL
<i>sumatriptan succinate tab 100 mg</i>	Tier 1	QL (9 per 30 Days); MAIL

MINERALS ELECTROLYTES**Calcium**

<i>ca citrate + tab</i>	Tier 1	OTC; MAIL
<i>ca citrate tab plus d</i>	Tier 1	OTC; MAIL
<i>calc 600+d tab 600-800</i>	Tier 1	OTC; MAIL
<i>calc cit+d3 tab 250-200</i>	Tier 1	OTC; MAIL
<i>calc citr+d3 tab 200-250</i>	Tier 1	OTC; MAIL
<i>calc citr/d3 tab 200-250</i>	Tier 1	OTC; MAIL
<i>calc citrate tab +d</i>	Tier 1	OTC; MAIL
<i>calcarb/d tab 600</i>	Tier 1	OTC; MAIL
<i>calcitrate tab</i>	Tier 1	OTC; MAIL
<i>calcitrate tab 950mg</i>	Tier 1	OTC; MAIL
<i>calcium 500 tab +d</i>	Tier 1	OTC; MAIL
<i>calcium 500 tab /vit d</i>	Tier 1	OTC; MAIL
<i>calcium 600 chw +d/miner</i>	Tier 1	OTC; MAIL
<i>CALCIUM 600 CHW +D/MINER</i>	Tier 1	OTC; MAIL
<i>calcium 600 chw +d/mnrsls</i>	Tier 1	OTC; MAIL
<i>calcium 600 chw w/vit d</i>	Tier 1	OTC; MAIL
<i>calcium 600 tab</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>calcium 600 tab + d</i>	Tier 1	OTC; MAIL
<i>calcium 600 tab +d3</i>	Tier 1	OTC; MAIL
<i>calcium 600 tab -d</i>	Tier 1	OTC; MAIL
<i>calcium 600/ tab vit d</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>calcium + d tab</i>	Tier 1	OTC; MAIL
<i>calcium + d tab 600-200</i>	Tier 1	OTC; MAIL
<i>calcium +d3 tab maximum</i>	Tier 1	OTC; MAIL
<i>calcium +d tab maximum</i>	Tier 1	OTC; MAIL
<i>calcium carb tab 1250mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>calcium carb-vit d w/ minerals chew tab 600 mg-400 unit</i>	Tier 1	OTC; MAIL
<i>calcium carbonate (antacid) susp 1250 mg/5ml</i>	Tier 1	OTC, QL (500.1 mL / 30 days); MAIL
<i>calcium carbonate tab 600 mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>calcium carbonate tab 1250 mg (500 mg elemental ca)</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>calcium carbonate-cholecalciferol chew tab 500 mg-100 unit</i>	Tier 1	OTC; MAIL
<i>calcium carbonate-cholecalciferol tab 250 mg-125 unit</i>	Tier 1	OTC; MAIL
<i>calcium carbonate-cholecalciferol tab 500 mg-125 unit</i>	Tier 1	OTC; MAIL
<i>calcium carbonate-cholecalciferol tab 500 mg-400 unit</i>	Tier 1	OTC; MAIL
<i>calcium carbonate-cholecalciferol tab 600 mg-200 unit</i>	Tier 1	OTC; MAIL
<i>calcium carbonate-cholecalciferol tab 600 mg-400 unit</i>	Tier 1	OTC; MAIL
<i>calcium carbonate-ergocalciferol tab 500mg-200 unit</i>	Tier 1	OTC; MAIL
<i>calcium carbonate-vitamin d cap 600 mg-200 unit</i>	Tier 1	OTC; MAIL
<i>calcium carbonate-vitamin d tab 250 mg-125 unit</i>	Tier 1	OTC; MAIL
<i>calcium carbonate-vitamin d tab 500 mg-125 unit</i>	Tier 1	OTC; MAIL
<i>calcium carbonate-vitamin d tab 500 mg-200 unit</i>	Tier 1	OTC; MAIL
<i>calcium carbonate-vitamin d tab 500 mg-400 unit</i>	Tier 1	OTC; MAIL
<i>calcium carbonate-vitamin d tab 600 mg-125 unit</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>calcium carbonate-vitamin d tab 600 mg-200 unit</i>	Tier 1	OTC; MAIL
<i>calcium carbonate-vitamin d tab 600 mg-400 unit</i>	Tier 1	OTC; MAIL
<i>calcium citr tab +d</i>	Tier 1	OTC; MAIL
<i>calcium citr tab plus d-3</i>	Tier 1	OTC; MAIL
<i>calcium citr tab w/vit d3</i>	Tier 1	OTC; MAIL
<i>calcium citrate tab 950 mg (200 mg elemental ca)</i>	Tier 1	OTC; MAIL
<i>calcium citrate-vitamin d tab 200 mg-250 unit (elemental ca)</i>	Tier 1	OTC; MAIL
<i>calcium citrate-vitamin d tab 315 mg-200 unit (elemental ca)</i>	Tier 1	OTC; MAIL
<i>calcium citrate-vitamin d tab 315 mg-250 unit (elemental ca)</i>	Tier 1	OTC; MAIL
<i>calcium tab 500+d</i>	Tier 1	OTC; MAIL
<i>calcium tab 500/d</i>	Tier 1	OTC; MAIL
<i>calcium tab 600mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>calcium tab vit d</i>	Tier 1	OTC; MAIL
<i>calcium w/ vitamin d tab 600 mg-200 unit</i>	Tier 1	OTC; MAIL
<i>calcium+d3 tab 600-400</i>	Tier 1	OTC; MAIL
<i>calcium+d3 tab 600-800</i>	Tier 1	OTC; MAIL
<i>calcium-magnesium-zinc tab 333-133-5 mg</i>	Tier 1	OTC; MAIL
<i>calcium/d3 cap 600-500</i>	Tier 1	OTC; MAIL
<i>calcium/d3 tab</i>	Tier 1	OTC; MAIL
<i>calcium/d3 tab 600-800</i>	Tier 1	OTC; MAIL
<i>calcium/d chw 500-400</i>	Tier 1	OTC; MAIL
<i>calcium/d tab 500-200</i>	Tier 1	OTC; MAIL
<i>calcium/d tab 600-800</i>	Tier 1	OTC; MAIL
<i>caltrate 600 chw 600-800</i>	Tier 1	OTC; MAIL
<i>caltrate 600 tab</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>calvite p&d tab</i>	Tier 1	OTC; MAIL
<i>cit calc/d tab 315-250</i>	Tier 1	OTC; MAIL
<i>creamies chw 600-400</i>	Tier 1	OTC; MAIL
<i>cvs ca/mg/zn tab</i>	Tier 1	OTC; MAIL
<i>cvs calcium tab 600mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>eq calcium tab citr+d</i>	Tier 1	OTC; MAIL
<i>eql calcium tab w/vit d</i>	Tier 1	OTC; MAIL
<i>gnp ca/mg/zn tab</i>	Tier 1	OTC; MAIL
<i>gnp ca/vit d chw minerals</i>	Tier 1	OTC; MAIL
<i>gnp calcium tab 600/d</i>	Tier 1	OTC; MAIL
<i>hm ca/vit d3 tab 600-800</i>	Tier 1	OTC; MAIL
<i>hm calcium tab citr+d</i>	Tier 1	OTC; MAIL
<i>kp ca/mg/zn tab</i>	Tier 1	OTC; MAIL
<i>kp calcium tab 600+d</i>	Tier 1	OTC; MAIL
<i>liq ca/vit d cap 600mg</i>	Tier 1	OTC; MAIL
<i>os calcium tab /vit d</i>	Tier 1	OTC; MAIL
<i>os-cal 500 chw</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>oscal 500/ tab 200 d-3</i>	Tier 1	OTC; MAIL
<i>oys shell+d chw 500-400</i>	Tier 1	OTC; MAIL
<i>oys shell+d tab 250-125</i>	Tier 1	OTC; MAIL
<i>oysco 500 tab 500mg</i>	Tier 1	OTC; MAIL
<i>oysco 500+d chw</i>	Tier 1	OTC; MAIL
<i>oysco 500+d tab</i>	Tier 1	OTC; MAIL
<i>oyst cal/d tab 250mg</i>	Tier 1	OTC; MAIL
<i>oyst cal/d tab 500mg</i>	Tier 1	OTC; MAIL
<i>oyst shell/d tab 250mg</i>	Tier 1	OTC; MAIL
<i>oyst shell/d tab 500-125</i>	Tier 1	OTC; MAIL
<i>oyst shell/d tab 500-200</i>	Tier 1	OTC; MAIL
<i>oyst shell/d tab 500-400</i>	Tier 1	OTC; MAIL
<i>oyst shell/d tab 500mg</i>	Tier 1	OTC; MAIL
<i>oyst-cal d tab 250mg</i>	Tier 1	OTC; MAIL
<i>oyst-cal-d tab 500mg</i>	Tier 1	OTC; MAIL
<i>oyster shell calcium tab 500 mg</i>	Tier 1	OTC; MAIL
<i>oyster-cal/d tab 500mg</i>	Tier 1	OTC; MAIL
<i>oystercal tab 500mg</i>	Tier 1	OTC; MAIL
<i>oystercal-d tab 500mg</i>	Tier 1	OTC; MAIL
<i>pa calcium tab vit d</i>	Tier 1	OTC; MAIL
<i>pa oyster sh tab 500mg</i>	Tier 1	OTC; MAIL
<i>px calcium&d tab 600-400</i>	Tier 1	OTC; MAIL
<i>ra ca/mg/zn tab</i>	Tier 1	OTC; MAIL
<i>ra ca/vit d3 chw minerals</i>	Tier 1	OTC; MAIL
<i>ra ca/vit d3 tab 600-400</i>	Tier 1	OTC; MAIL
<i>ra calcium tab vit d</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>ra calcium+d tab 600mg</i>	Tier 1	OTC; MAIL
<i>ra hi cal tab 500-200</i>	Tier 1	OTC; MAIL
<i>ra hi-cal tab 500mg</i>	Tier 1	OTC; MAIL
<i>ra hi-cal/d tab 500mg</i>	Tier 1	OTC; MAIL
<i>ra oys shl/d tab 500mg</i>	Tier 1	OTC; MAIL
<i>sm ca/mg/zn tab</i>	Tier 1	OTC; MAIL
<i>sm ca/vit d3 tab 600-400</i>	Tier 1	OTC; MAIL
<i>sm calcium tab /vit d3</i>	Tier 1	OTC; MAIL
<i>sm calcium/d tab 500-200</i>	Tier 1	OTC; MAIL
<i>sm calcium/d tab 600-400</i>	Tier 1	OTC; MAIL
<i>super ca 600 tab + d3</i>	Tier 1	OTC; MAIL
<i>super ca 600 tab + d 400</i>	Tier 1	OTC; MAIL
<i>super calciu tab 600mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>tgt calcium chw suppleme</i>	Tier 1	OTC; MAIL
Electrolyte Mixtures		
<i>naturalyte sol bubblegm</i>	Tier 1	OTC; MAIL
<i>naturalyte sol fruit</i>	Tier 1	OTC; MAIL
<i>naturalyte sol grape</i>	Tier 1	OTC; MAIL
<i>naturalyte sol unflavor</i>	Tier 1	OTC; MAIL
<i>oral electrolyte solution</i>	Tier 1	OTC; MAIL
<i>oralyte sol</i>	Tier 1	OTC; MAIL
<i>oralyte sol freeze</i>	Tier 1	OTC; MAIL
<i>ped elctryt sol</i>	Tier 1	OTC; MAIL
<i>pedia vance sol apple</i>	Tier 1	OTC; MAIL
<i>pedia vance sol grape</i>	Tier 1	OTC; MAIL
<i>rehydralyte sol</i>	Tier 1	OTC; MAIL
<i>revital frzr sol pops</i>	Tier 1	OTC; MAIL
<i>revital jell sol cups</i>	Tier 1	OTC; MAIL
<i>revital lqd sol squeezer</i>	Tier 1	OTC; MAIL
Fluoride		
<i>fluor-a-day dro 0.125mg</i>	PREV	QL (60 mL / 30 days); MAIL
<i>fluoritab chw 0.5mg f</i>	PREV	QL (30 tabs / 30 days); MAIL
<i>fluoritab chw 0.25mg f</i>	PREV	QL (30 tabs / 30 days); MAIL
<i>fluoritab chw 1mg f</i>	PREV	QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>fluoritab chw 2.2mg</i>	PREV	QL (30 tabs / 30 days); MAIL
<i>fluoritab dro 0.125mg</i>	PREV	QL (60 mL / 30 days); MAIL
<i>flura-drops dro 0.25mg f</i>	PREV	QL (30 mL / 30 days); MAIL
<i>karidium dro 0.125mg</i>	PREV	QL (60 mL / 30 days); MAIL
<i>ludent chw 0.5mg f</i>	PREV	QL (30 tabs / 30 days); MAIL
<i>ludent chw 0.25mg f</i>	PREV	QL (30 tabs / 30 days); MAIL
<i>ludent chw 1mg f</i>	PREV	QL (30 tabs / 30 days); MAIL
<i>nafrinse chw 1mg f</i>	PREV	QL (30 tabs / 30 days); MAIL
<i>nafrinse dro 0.125mg</i>	PREV	QL (60 mL / 30 days); MAIL
<i>sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf)</i>	PREV	QL (30 tabs / 30 days); MAIL
<i>sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf)</i>	PREV	QL (30 tabs / 30 days); MAIL
<i>sodium fluoride chew tab 1 mg f (from 2.2 mg naf)</i>	PREV	QL (30 tabs / 30 days); MAIL
<i>sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)</i>	PREV	QL (50.1 mL / 30 days); MAIL
<i>sodium fluoride tab 0.5 mg f (from 1.1 mg naf)</i>	PREV	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and under

Magnesium

<i>gnp magnesi tab 250mg</i>	Tier 1	OTC; MAIL
<i>mag-g tab 500mg</i>	Tier 1	OTC; MAIL
<i>mag-sr tab 535mg</i>	Tier 1	OTC; MAIL
<i>magdelay tab 70mg</i>	Tier 1	OTC; MAIL
<i>magnesium gluconate tab 27.5 mg (elemental mg)</i>	Tier 1	OTC; MAIL
<i>magnesium gluconate tab 500 mg (27 mg elemental mg)</i>	Tier 1	OTC; MAIL
<i>magnesium oxide cap 500 mg (elemental mg)</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>magnesium oxide tab 250 mg (mg supplement)</i>	Tier 1	OTC; MAIL
<i>magnesium oxide tab 400 mg (241.3 mg elemental mg)</i>	Tier 1	OTC; MAIL
<i>magnesium oxide tab 500 mg (mg supplement)</i>	Tier 1	OTC; MAIL
<i>magnesium sulfate inj 50%</i>	Tier 1	MAIL
<i>magnesium tab 200 mg</i>	Tier 1	OTC; MAIL
<i>magnesium tab 250mg</i>	Tier 1	OTC; MAIL
<i>magnesium tab 400 mg</i>	Tier 1	OTC; MAIL
<i>magnesium-ox tab 400mg</i>	Tier 1	OTC; MAIL
<i>magonate tab 500mg</i>	Tier 1	OTC; MAIL
<i>mgo tab 400mg</i>	Tier 1	OTC; MAIL
<i>ra magnesium cap 500mg</i>	Tier 1	OTC; MAIL
<i>sm magnesium tab 250mg</i>	Tier 1	OTC; MAIL
<i>th magnesium tab 200mg</i>	Tier 1	OTC; MAIL
Phosphate		
<i>phospha 250 tab neutral</i>	Tier 1	QL (120 tabs / 30 days); MAIL
Potassium		
<i>effer-k tab 25meq ef</i>	Tier 1	QL (60 ea / 30 days); MAIL
<i>k-effervesce tab 25meq ef</i>	Tier 1	QL (60 ea / 30 days); MAIL
<i>k-prime tab 25meq ef</i>	Tier 1	QL (60 ea / 30 days); MAIL
<i>k-vescent tab 25meq ef</i>	Tier 1	QL (60 ea / 30 days); MAIL
<i>klor-con 8 tab 8meq er</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>klor-con 10 tab 10meq er</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>klor-con m10 tab 10meq er</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>klor-con m20 tab 20meq er</i>	Tier 1	QL (150 tabs / 30 days); MAIL
<i>klor-con/ef tab 25meq fr</i>	Tier 1	QL (60 ea / 30 days); MAIL
<i>potassium bicarbonate effer tab 25 meq</i>	Tier 1	QL (60 ea / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>potassium chloride cap er 8 meq</i>	Tier 1	QL (120 caps / 30 days); MAIL
<i>potassium chloride cap er 10 meq</i>	Tier 1	QL (120 caps / 30 days); MAIL
<i>potassium chloride microencapsulated crys er tab 10 meq</i>	Tier 1	QL (120 ea / 30 days); MAIL
<i>potassium chloride microencapsulated crys er tab 10 meq</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>potassium chloride microencapsulated crys er tab 20 meq</i>	Tier 1	QL (150 tabs / 30 days); MAIL
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	Tier 2	MAIL
<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	Tier 2	MAIL
<i>potassium chloride tab er 8 meq (600 mg)</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>potassium chloride tab er 10 meq</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>potassium chloride tab er 20 meq (1500 mg)</i>	Tier 1	QL (150 ea / 30 days); MAIL
Sodium		
<i>sodium chloride tab 1 gm</i>	Tier 1	OTC; MAIL
Zinc		
<i>orazinc cap 220mg</i>	Tier 1	OTC; MAIL
<i>zinc sulfate cap 220 mg (50 mg elemental zn)</i>	Tier 1	OTC; MAIL
<i>zinc-220 cap</i>	Tier 1	OTC; MAIL
MISC. NUTRITIONAL SUBSTANCES		
MISC. NUTRITIONAL SUBSTANCES		
<i>prenatal dha cap 200mg</i>	Tier 1	OTC, QL (30 caps / 30 days); MAIL
MOUTH/THROAT/DENTAL AGENTS		
Anesthetics Topical Oral		
<i>lidocaine hcl viscous soln 2%</i>	Tier 1	MAIL
Anti-infectives - Throat		
<i>clotrimazole troche 10 mg</i>	Tier 1	QL (70 ea / 10 days); MAIL
<i>clotrimazole troche 10 mg</i>	Tier 1	QL (70 lozgs / 10 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>nystatin susp 100000 unit/ml</i>	Tier 1	QL (3600 mL / 30 days); MAIL
Antiseptics - Mouth/Throat		
<i>paroex sol 0.12%</i>	Tier 1	MAIL
<i>periogard sol 0.12%</i>	Tier 1	MAIL
Dental Products		
<i>cavarest gel 1.1%</i>	Tier 1	MAIL
<i>denta 5000 cre plus</i>	Tier 1	MAIL
<i>denta 5000 cre plus 2pk</i>	Tier 1	MAIL
<i>dentagel gel 1.1%</i>	Tier 1	MAIL
<i>karigel gel 0.5%</i>	Tier 1	MAIL
<i>karigel-n gel 1.1%</i>	Tier 1	MAIL
<i>neutragard gel 1.1%</i>	Tier 1	MAIL
<i>sf 5000 plus cre 1.1%</i>	Tier 1	MAIL
<i>sf gel 1.1%</i>	Tier 1	MAIL
Steroids - Mouth/Throat		
<i>oralone dent pst 0.1%</i>	Tier 1	MAIL
<i>triamcinolone acetonide dental paste 0.1%</i>	Tier 1	MAIL
Throat Products - Misc.		
<i>cevimeline hcl cap 30 mg</i>	Tier 2	PA; MAIL
<i>pilocarpine hcl tab 5 mg</i>	Tier 1	MAIL
<i>pilocarpine hcl tab 7.5 mg</i>	Tier 1	MAIL
MULTIVITAMINS		
B-Complex w/ Folic Acid		
<i>b complex tab vit c</i>	Tier 1	OTC; MAIL
<i>b-complex tab balanced</i>	Tier 1	OTC; MAIL
<i>b-complex w/ c & folic acid tab</i>	Tier 1	OTC; MAIL
<i>b-plex tab</i>	Tier 1	MAIL
<i>dialyvite tab</i>	Tier 1	MAIL
<i>dialyvite tab 800</i>	Tier 1	OTC; MAIL
<i>folbee plus tab</i>	Tier 1	MAIL
<i>hm b complex tab with c</i>	Tier 1	OTC; MAIL
<i>kp b complex tab /c</i>	Tier 1	OTC; MAIL
<i>mynephrocaps cap</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>nephronex tab</i>	Tier 1	MAIL
<i>rena-vite rx tab</i>	Tier 1	OTC; MAIL
<i>rena-vite tab</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>renal cap</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>renal tab multivit</i>	Tier 1	OTC; MAIL
<i>reno cap</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>stress form tab</i>	Tier 1	OTC; MAIL
<i>super b-comp tab /fa/vitc</i>	Tier 1	OTC; MAIL
<i>super b-comp tab vit c/fa</i>	Tier 1	OTC; MAIL
<i>triphrocaps cap</i>	Tier 1	QL (60 caps / 30 days); MAIL
<i>virt-vite tab plus</i>	Tier 1	MAIL
<i>vita-bee/c tab</i>	Tier 1	OTC; MAIL
<i>vol-care rx tab</i>	Tier 1	MAIL
Multiple Vitamins w/ Iron		
<i>daily vit tab +iron</i>	Tier 1	OTC; MAIL
<i>daily vite tab iron</i>	Tier 1	OTC; MAIL
<i>daily-vitam tab</i>	Tier 1	OTC; MAIL
<i>daily-vite/ tab iron</i>	Tier 1	OTC; MAIL
<i>hm one daily tab /iron</i>	Tier 1	OTC; MAIL
<i>multi-day tab /iron</i>	Tier 1	OTC; MAIL
<i>multi-vit/fe tab</i>	Tier 1	OTC; MAIL
<i>multiple vitamins w/ iron tab</i>	Tier 1	OTC; MAIL
<i>once daily tab iron</i>	Tier 1	OTC; MAIL
<i>one daily tab pls iron</i>	Tier 1	OTC; MAIL
<i>ra one daily tab +iron</i>	Tier 1	OTC; MAIL
<i>sm multiple tab vit/iron</i>	Tier 1	OTC; MAIL
<i>stress b com tab w/iron</i>	Tier 1	OTC; MAIL
<i>stress form tab /iron</i>	Tier 1	OTC; MAIL
<i>stress formu tab w/iron</i>	Tier 1	OTC; MAIL
<i>tab-a-vite tab /iron</i>	Tier 1	OTC; MAIL
Multiple Vitamins w/ Minerals		
<i>a thru z sel tab 50+ adva</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>a thru z sel tab advanced</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>a thru z tab advanced</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>a thru z tab high pot</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>a thru z tab select</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>a thru z tab ultimate</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>abc plus tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>abc plus tab senior</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>actical cap</i>	Tier 1	OTC; MAIL
<i>advanced tab formula</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>amoryn mood cap booster</i>	Tier 1	OTC; MAIL
<i>anti-oxidant cap formula</i>	Tier 1	OTC; MAIL
<i>anti-oxidant tab plus</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>antiox form/ cap minerals</i>	Tier 1	OTC; MAIL
<i>antioxidant cap</i>	Tier 1	OTC; MAIL
<i>antioxidant tab protecti</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>antioxidant tab vitamins</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>antioxin cap 4000</i>	Tier 1	OTC; MAIL
<i>b-plex plus tab</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>b-redi/rd hr tab ts/rd ro</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>bdy/hair/skn cap nails</i>	Tier 1	OTC; MAIL
<i>biocel tab</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>biotin plus/ tab cal/vitd</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>bprotected liq multi-vi</i>	Tier 1	OTC; MAIL
<i>carravite tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>cent mature tab womn 50+</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>centamin liq</i>	Tier 1	OTC; MAIL
<i>centavite az tab minerals</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>centavite liq</i>	Tier 1	OTC; MAIL

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<i>central-vite tab mens mat</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>central-vite tab wmn's mat</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>centravites tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>centravites tab 50 plus</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>century tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>century tab mature</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>cerovite tab advanced</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>cerovite tab senior</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>certa plus tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>certagen tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>certavite liq antioxidant</i>	Tier 1	OTC; MAIL
<i>certavite/ tab antioxidant</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>comp daily tab w/lutein</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>comp energy tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>comp multivitamin liq mineral</i>	Tier 1	OTC; MAIL
<i>companion tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>compete tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>comple multi tab adult 50+</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>complere tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>complete tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>complete tab senior</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>complete tab womens</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>coral calciu cap plus</i>	Tier 1	OTC; MAIL
<i>corvite free tab</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>cvs daily tab fe/ca/zn</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>cvs vision tab formula</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>daily betic tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>daily diet tab support</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>daily mens tab health</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>daily multi tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>daily multi tab 50+</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>daily multi tab men</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>daily multi tab vit/mens</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>daily multi tab vit/min</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>daily multi tab women</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>daily multi tab womn 50+</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>daily vit tab +mineral</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>daily vitamn cap plus</i>	Tier 1	OTC; MAIL
<i>daily womens tab health</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>daily-vitamn tab maximum</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>diabetic sup tab formula</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>diabets hlth tab formula</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>dialyvite tab 800/d</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>drs choice tab men</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ecolovit tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>enviro-stres tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>eql century tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>eql century tab mature</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>eql vision tab formula</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>essentia tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>essential tab balance</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>eye vitamins cap</i>	Tier 1	OTC; MAIL
<i>eye vitamins tab /mineral</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>eye-vites tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>gerivite tab complete</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>glucoten cap</i>	Tier 1	OTC; MAIL
<i>gnp century tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>gnp century tab adult</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>gnp century tab cardio</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>gnp century tab senior</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>gnp century tab ultimate</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>gnp healthy tab eyes</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>gnp one dail tab maximum</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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<i>gnp opti-vit tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>hair formula tab ex stren</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>hair formula tab ultr man</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>hair vitamin tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>hair/skin/ tab nails</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>healthy eyes cap supervis</i>	Tier 1	OTC; MAIL
<i>healthy eyes tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>hi-kovite tab 2-part</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>hi-potency tab multivit</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>hm complete tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>hm complete tab 50+</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>i-vite prote tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>i-vite tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>icaps cap</i>	Tier 1	OTC; MAIL
<i>icaps lutein cap /omega-3</i>	Tier 1	OTC; MAIL
<i>icaps mv tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>kp adult 50+ tab daily</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>kp adults tab daily</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>kp mens 50+ tab daily</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>kp mens tab daily</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>kp women 50+ tab daily</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>kp womens tab daily</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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<i>life pack tab mens</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>life pack tab womens</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>lysiplex liq plus</i>	Tier 1	OTC; MAIL
<i>lysiplex tab plus</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>macuvite tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>macuvite tab eye care</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>macuvite tab lutein</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>max daily tab green</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>maximum tab blue lab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>maximum tab green lb</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>maximum tab red labl</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>mediplex tab plus</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>mega multi tab men</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>mega multi tab women</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>mega vm-80 tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>mens 50+ adv tab one daly</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>mens daily cap lycopene</i>	Tier 1	OTC; MAIL
<i>milltrium sr tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>milltrium tab advanced</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>milltrium tab cardio</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>mult vitamin tab womens</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>multi 50+ cap for her</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>multi 50+ tab for her</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>multi 50+ tab for him</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>multi cap complete</i>	Tier 1	OTC; MAIL
<i>multi cap for her</i>	Tier 1	OTC; MAIL
<i>multi cap for him</i>	Tier 1	OTC; MAIL
<i>multi complt tab /iron</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>multi tab for her</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>multi tab for him</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>multi vitamn tab mineral</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>multi-day tab minerals</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>multi-day tab wght trm</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>multi-lean tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>multi-vit/ tab minerals</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>multi-vitami tab menopaus</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>multi-vite tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>multi-vite tab 50&over</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>multi-vite tab plus</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>multilex tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>multilex-t&m tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>multimineral tab plus</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>multiple vitamins w/ minerals tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>multivitamin liq</i>	Tier 1	OTC; MAIL
<i>multivitamin liq mineral</i>	Tier 1	OTC; MAIL

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<i>multivitamin tab mineral</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>multivitamin tab womens</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>my-vitalife cap</i>	Tier 1	OTC; MAIL
<i>myamulti tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>nutrifac zx tab</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>ocutabs tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ocutabs tab lutein</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ocuvite eye cap health</i>	Tier 1	OTC; MAIL
<i>ocuvite eye tab + multi</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ocuvite tab lutein</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ocuvite xtra tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>one daily tab 50 plus</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>one daily tab 50+</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>one daily tab /mineral</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>one daily tab complete</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>one daily tab fe/ca</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>one daily tab healthy</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>one daily tab maximum</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>one daily tab men</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>one daily tab men 50+</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>one daily tab mens</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>one daily tab mens 50+</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>one daily tab multivit</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>one daily tab plus iro</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>one daily tab women</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>one daily tab women 50</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>one daily tab womens</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>one daily wm tab pro-actv</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>one daily/ tab minerals</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>one dly hlth tab wght adv</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>one-a-day tab teen/her</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>optic-vites tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>optimum pms tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>orthovite tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>osteoprime tab ultra</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>pms support cap complex</i>	Tier 1	OTC; MAIL
<i>prevent cap</i>	Tier 1	OTC; MAIL
<i>prorenal+d cap omega-3</i>	Tier 1	OTC; MAIL
<i>prosight cap w/lutein</i>	Tier 1	OTC; MAIL
<i>prosight tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>px advanced tab multivit</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>px complete tab senior</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>px mens mult tab vitamins</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>qc therin-m tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>quintabs-m tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ra central tab -vite</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ra central tab energy</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ra central tab vite sel</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ra central tab vite sen</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ra hair/skin tab /nails</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ra mature wm tab diet sup</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ra one daily pak mens 50+</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ra one daily tab energy</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ra one daily tab maximum</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ra one daily tab mens</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ra one daily tab mens/d3</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ra one daily tab womens</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ra therapeut tab m/beta</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ra vision tab vite/zn</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>renal tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>savision tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>sclerex tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>senior tabs tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>sentry tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>sentry tab senior</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>sm complete tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>sm complete tab 50+</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>sm complete tab 50+ mens</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>sm complete tab 50+ wmn</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>sm complete tab senior</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>sm hair/skin tab /nails</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>sm opti-vita tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>spectr women tab hlth sen</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>spectra ultr tab hlth men</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>spectravite tab advanced</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>spectravite tab senior</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>stress b-com tab /c/zinc</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>stress form tab /iron</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>stress form/ tab zinc</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>stress formu tab advanced</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>stress formu tab energy</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>stress tab formula</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>sunvite actv tab adult</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>sunvite tab advanced</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>super 28 tab formula</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>super antiox cap protect</i>	Tier 1	OTC; MAIL
<i>super antiox tab a/c/e/se</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>super liq nu-thera</i>	Tier 1	OTC; MAIL
<i>super multip cap</i>	Tier 1	OTC; MAIL
<i>super multip tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>super tab nu-thera</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>super thera tab vite m</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>super vikaps tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>supr aytinal tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>supr aytinal tab 50 plus</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>supr vitamin tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>tab-a-vite tab maximum</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>thera form/ tab hematin</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>thera vital tab m</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>thera-m tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>thera-mill m tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>therabasic-m tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>theradex m tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>theradex m/ tab beta car</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>theramill cap plus</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>therapeutic tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>therapeutic- tab m</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>therapeutic- tab m/lutein</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>theratrum co tab 50 plus</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>theratrum tab complete</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>theravim -m tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>thrive for tab women</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>total formul tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>total formul tab 2</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>total formul tab 3</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>trueplus tab diabetic</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ultra antiox tab formula</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ultra freeda tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ultra freeda tab /iron</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ultra vita-t tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ultrachoice tab advanced</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>v-c forte cap</i>	Tier 1	MAIL
<i>vic-forte cap</i>	Tier 1	MAIL
<i>vision form/ tab lutein</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>vision plus cap</i>	Tier 1	OTC; MAIL
<i>vision tab vitamins</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>visivites tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>visivites tab /lutein</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>vita hair tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>vita s forte tab</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>vita-min cap</i>	Tier 1	MAIL
<i>vita-min cap</i>	Tier 1	OTC; MAIL
<i>vitabasic tab complete</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>vitabasic tab senior</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>vitacel tab</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>vitatrum tab complete</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>viteyes ared cap advanced</i>	Tier 1	OTC; MAIL
<i>viteyes ared cap formula</i>	Tier 1	OTC; MAIL
<i>viteyes cap /lutein</i>	Tier 1	OTC; MAIL
<i>viteyes cap complete</i>	Tier 1	OTC; MAIL
<i>viteyes smkr cap advanced</i>	Tier 1	OTC; MAIL
<i>viteyes smkr cap w/lutein</i>	Tier 1	OTC; MAIL
<i>viteyes tab lycopene</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>vitrum tab senior</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>whole source tab dietary</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>whole source tab for men</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>whole source tab mature</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>whole source tab women</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>womens 50+ cap advanced</i>	Tier 1	OTC; MAIL
<i>womens cap multi</i>	Tier 1	OTC; MAIL
<i>womens daily tab fa/ca/fe</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>womens daily tab formula</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>womens mult tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>womens one tab daily</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>womns active tab daily</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>your life tab mens 50+</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>your life tab wmnns 50+</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

Multivitamins

<i>anti-oxidant tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>antioxidant cap formula</i>	Tier 1	OTC; MAIL
<i>cvs daily tab multiple</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>daily tab vitamin</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>daily value tab multivit</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>daily vit tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>daily vite tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>daily-vitamn tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>essentl one tab daily</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>mult vitamin tab daily</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>mult vitamin tab essent</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>multi-day tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>multi-vitamn tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>multiple vitamin cap</i>	Tier 1	OTC; MAIL
<i>multiple vitamin tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>multivitamin cap</i>	Tier 1	OTC; MAIL
<i>mv-one cap</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>once daily tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>one daily tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>one daily tab essenti</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>one daily tab multivit</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>one-daily tab mult vit</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>qc essential tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ra one daily tab essentia</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ra one daily tab multivit</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>renal/zinc tab multivit</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>sigtab tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>sm multiple tab vitamins</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>stress form tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>stress formu tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>stresstabs tab energy</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>tab-a-vite tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>tab-a-vite tab beta car</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>thera tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>thera-mill tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>thera-tabs tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>therapeutic tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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<i>therems tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>vitalee tab</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
PRENATAL VITAMINS		
ATABEX OB TAB 29-1MG	Tier 2	QL (30 tabs / 30 days); MAIL
BE WELL PAK ROUNDED	Tier 2	OTC, QL (30 ea / 30 days); MAIL
BRAINSTRONG MIS PRENATAL	Tier 2	OTC, QL (30 boxes / 30 days); MAIL
CALNA TAB	Tier 2	OTC, QL (30 tabs / 30 days); MAIL
CENTRUM SPEC PAK PRENATAL	Tier 2	OTC, QL (30 ea / 30 days); MAIL
COMPL PRENAT MIS +DHA	Tier 2	OTC, QL (30 boxes / 30 days); MAIL
CVS PRENATAL CHW GUMMY	Tier 2	OTC, QL (30 tabs / 30 days); MAIL
EZFE FORTE CAP	Tier 2	OTC, QL (30 caps / 30 days); MAIL
GNP DAILY MIS PRENATAL	Tier 2	OTC, QL (30 boxes / 30 days); MAIL
HM ONE DAILY MIS PRENATAL	Tier 2	OTC, QL (30 boxes / 30 days); MAIL
KPN PRENATAL TAB	Tier 2	OTC, QL (30 tabs / 30 days); MAIL
MYNATAL CAP	Tier 2	QL (30 caps / 30 days); MAIL
MYNATAL PLUS TAB	Tier 2	QL (30 tabs / 30 days); MAIL
MYNATAL TAB	Tier 1	QL (30 tabs / 30 days); MAIL
MYNATAL TAB ADVANCE	Tier 1	QL (30 tabs / 30 days); MAIL
MYNATAL-Z TAB	Tier 2	QL (30 tabs / 30 days); MAIL
MYNATE 90 TAB PLUS	Tier 2	QL (30 tabs / 30 days); MAIL
NATALVIT TAB 75-1MG	Tier 2	QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
NUTRICION TAB PORVIDA	Tier 2	OTC, QL (30 tabs / 30 days); MAIL
NUTRIENTS TAB PRENATAL	Tier 2	OTC, QL (30 tabs / 30 days); MAIL
O-CAL TAB PRENATAL	Tier 2	QL (30 tabs / 30 days); MAIL
ONE A DAY MIS PRENATAL	Tier 2	OTC, QL (30 boxes / 30 days); MAIL
ONE A DAY PAK PRENATAL	Tier 2	OTC, QL (30 boxes / 30 days); MAIL
ONE-A-DAY PAK PRENATAL	Tier 2	OTC, QL (30 boxes / 30 days); MAIL
PERRY PRENAT CAP	Tier 2	OTC, QL (30 caps / 30 days); MAIL
PRENAT MULTI CAP +DHA	Tier 2	OTC, QL (30 caps / 30 days); MAIL
<i>prenatabs rx tab</i>	Tier 1	QL (30 tabs / 30 days)
PRENATAL 19 CHW 29-1MG	Tier 2	QL (30 tabs / 30 days)
<i>prenatal 19 chw tab</i>	Tier 2	QL (30 tabs / 30 days)
PRENATAL 19 TAB 29-1MG	Tier 1	QL (30 tabs / 30 days); MAIL
PRENATAL CAP FORMULA	Tier 2	OTC, QL (30 caps / 30 days); MAIL
PRENATAL CAP OMEGA-3	Tier 2	OTC, QL (30 caps / 30 days); MAIL
PRENATAL DHA PAK MULTI	Tier 2	OTC, QL (30 ea / 30 days); MAIL
PRENATAL FRM TAB A-FREE	Tier 2	OTC, QL (30 tabs / 30 days); MAIL
PRENATAL TAB	Tier 2	OTC, QL (30 tabs / 30 days); MAIL
PRENATAL TAB 27-0.8MG	Tier 1	OTC, QL (30 tabs / 30 days)
PRENATAL TAB 28-0.8MG	Tier 1	OTC, QL (30 tabs / 30 days)
PRENATAL TAB FORMULA	Tier 2	OTC, QL (30 tabs / 30 days); MAIL
PRENATAL TAB PLUS	Tier 1	QL (30 tabs / 30 days)
PRENATAL+DHA MIS	Tier 2	OTC, QL (30 boxes / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
PRENATAL+DHA MIS WOMENS	Tier 2	OTC, QL (30 boxes / 30 days); MAIL
PRENATAL+FE TAB 29-1MG	Tier 2	QL (30 tabs / 30 days)
<i>prenatal/fa tab</i>	Tier 1	QL (30 tabs / 30 days)
PRENATL MULT CAP + DHA	Tier 2	OTC, QL (30 caps / 30 days); MAIL
PRENTAT MULT CAP PLUS DHA	Tier 2	OTC, QL (30 caps / 30 days); MAIL
PRETAB TAB 29-1MG	Tier 2	QL (30 tabs / 30 days)
RA ONE DAILY MIS	Tier 2	OTC, QL (30 boxes / 30 days); MAIL
SIMILAC PREN PAK EARLY SH	Tier 2	OTC, QL (30 boxes / 30 days); MAIL
SM ONE DAILY MIS PRENATAL	Tier 2	OTC, QL (30 boxes / 30 days); MAIL
THERANATAL MIS COMPLETE	Tier 2	OTC, QL (30 boxes / 30 days); MAIL
TL FOLATE TAB	Tier 2	MAIL
TRINATAL GT TAB	Tier 1	QL (30 tabs / 30 days); MAIL
TRINATAL RX TAB 1	Tier 2	QL (30 tabs / 30 days)
VINATE II TAB	Tier 2	QL (30 tabs / 30 days); MAIL
VINATE M TAB	Tier 2	QL (30 tabs / 30 days); MAIL
VIRT-ADVANCE TAB 90-1MG	Tier 1	QL (30 tabs / 30 days); MAIL
VIRT-VITE GT TAB 90-1MG	Tier 1	QL (30 tabs / 30 days); MAIL
VITAFOL-OB TAB 65-1MG	Tier 2	QL (30 tabs / 30 days); MAIL
YOUR LIFE CAP PRENATAL	Tier 2	OTC, QL (30 caps / 30 days); MAIL
<i>Ped MV w/ Fluoride</i>		
<i>mult vit-bet chw fl0.25mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>mult-vit/fl chw 0.5mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>multi vit/fl chw 1mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>multi-vit/fl dro 0.5mg/ml</i>	Tier 1	QL (100 mL / 59 days); MAIL
<i>multi-vit/fl dro 0.25mg</i>	Tier 1	QL (100 mL / 59 days); MAIL
<i>multivit/fl chw 0.5mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>multivit/fl chw 0.25mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>multivit/fl chw 1mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>mvc-fluoride chw 0.5mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>mvc-fluoride chw 0.25mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>mvc-fluoride chw 1mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>tri-vit/fl dro 0.5mg</i>	Tier 1	QL (50.1 mL / 30 days); MAIL
<i>tri-vit/fl dro 0.25mg</i>	Tier 1	QL (60 mL / 30 days); MAIL
<i>tri-vit/fluoro dro 0.5mg</i>	Tier 1	QL (50.1 mL / 30 days); MAIL
<i>tri-vit/fluoro dro 0.25mg</i>	Tier 1	QL (60 mL / 30 days); MAIL
<i>vit a/c/d/fl dro 0.25mg</i>	Tier 1	QL (60 mL / 30 days); MAIL
Ped MV w/ Iron		
<i>animal shape chw /iron</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>animal shape chw iron</i>	Tier 1	OTC; MAIL
<i>bite-a-mins chw /iron</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>child chew chw iron</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>child multiv chw iron</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>childrens chw /iron</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>chld vitamin chw iron</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>flnston plus chw iron</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>fruity chews chw /iron</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>land bfr tim chw vit/iron</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>little anima chw plus fe</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>poly-vita dro /iron</i>	Tier 1	OTC; MAIL
<i>poly-vitamin dro /iron</i>	Tier 1	OTC; MAIL
<i>poly-vite sol /iron</i>	Tier 1	OTC; MAIL
<i>polyvitamin dro /iron</i>	Tier 1	OTC; MAIL
<i>qc childrens chw iron</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ra child vit chw /iron</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>vite/iron chw children</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>zoo friends chw pls iron</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>Ped Multi Vitamins w/Fl FE</i>		
<i>multi-vit/fe dro /fl 0.25</i>	Tier 1	QL (100 mL / 59 days); MAIL
<i>multi-vit/fl dro /fe 0.25</i>	Tier 1	QL (100 mL / 59 days); MAIL
<i>tri-vit/fe dro /fl 0.25</i>	Tier 1	QL (60 mL / 30 days); MAIL
<i>Ped Multiple Vitamins w/ Minerals</i>		
<i>animal shape chw complete</i>	Tier 1	OTC; MAIL
<i>aquadeks dro</i>	Tier 1	OTC; MAIL
<i>centrum kids chw complete</i>	Tier 1	OTC; MAIL
<i>cerovite jr chw</i>	Tier 1	OTC; MAIL
<i>child vitami chw</i>	Tier 1	OTC; MAIL
<i>childrens chw complete</i>	Tier 1	OTC; MAIL
<i>childrens chw gummies</i>	Tier 1	OTC; MAIL
<i>childrens chw multivit</i>	Tier 1	OTC; MAIL
<i>chld mltivit chw /mineral</i>	Tier 1	OTC; MAIL
<i>compl multiv chw childrns</i>	Tier 1	OTC; MAIL
<i>cvs children chw complete</i>	Tier 1	OTC; MAIL
<i>disney cars chw gummies</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>eq multivita chw gummies</i>	Tier 1	OTC; MAIL
<i>flintstones chw bone bld</i>	Tier 1	OTC; MAIL
<i>flintstones chw complete</i>	Tier 1	OTC; MAIL
<i>gnp zoochews chw gummies</i>	Tier 1	OTC; MAIL
<i>gummi bear chw multivit</i>	Tier 1	OTC; MAIL
<i>gummies chw</i>	Tier 1	OTC; MAIL
<i>gummy dinos chw</i>	Tier 1	OTC; MAIL
<i>gummy vit/ chw minerals</i>	Tier 1	OTC; MAIL
<i>hm animal chw shapes</i>	Tier 1	OTC; MAIL
<i>mvw complete chw orange</i>	Tier 1	OTC; MAIL
<i>polyvitamin chw /iron</i>	Tier 1	OTC; MAIL
<i>princess chw gummies</i>	Tier 1	OTC; MAIL
<i>qc childrens chw complete</i>	Tier 1	OTC; MAIL
<i>sea buddies chw dly mult</i>	Tier 1	OTC; MAIL
<i>sm animal sh chw complete</i>	Tier 1	OTC; MAIL
<i>ultra choice chw kids</i>	Tier 1	OTC; MAIL
<i>vitamax ped dro</i>	Tier 1	MAIL
<i>zoo friends chw</i>	Tier 1	OTC; MAIL

Pediatric Multiple Vitamins

<i>animal chews chw</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>animal shape chw</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>bite-a-mins chw</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>bounty bears chw /c</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>chewabl vite chw childrns</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>child chew chw vitamins</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>child chew/ chw extra c</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>children vit chw</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>childrens chw multivit</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>childrens chw vitamins</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>dino-life chw</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>dino-life chw extra c</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>flintstones chw extra c</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>flintstones chw my first</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>flintstones chw omega-3</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>flintstones chw pls calc</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>fruity chews chw</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>gnp animal chw plus c</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>gnp animal chw shapes</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>gnp little chw ones</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>land bfr tim chw vit/c</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>little chw animals</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>pediavit liq</i>	Tier 1	OTC, QL (30 mL / 30 days); MAIL
<i>poly vitamin chw</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>poly-vita dro</i>	Tier 1	OTC; MAIL
<i>poly-vite dro</i>	Tier 1	OTC; MAIL
<i>polyvitamin dro</i>	Tier 1	OTC; MAIL
<i>qc childrens chw extra c</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>sm animal chw shapes</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>zoo friends chw extra c</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>zoo friends chw gummies</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>Pediatric Vitamins</i>		
<i>tri-vita sol</i>	Tier 1	OTC, QL (100 mL / 59 days); MAIL
<i>tri-vitamin dro</i>	Tier 1	OTC, QL (100 mL / 59 days); MAIL
<i>Prenatal Vitamins</i>		
<i>inatal gt tab</i>	Tier 1	QL (30 tabs / 30 days); MAIL
MISSION PREN TAB /FA	Tier 2	OTC, QL (30 tabs / 30 days); MAIL
MISSION PREN TAB HP	Tier 2	OTC, QL (30 tabs / 30 days); MAIL
PRE-NATAL TAB FORMULA	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>prenatal 19 tab</i>	Tier 1	QL (30 tabs / 30 days); MAIL
PRENATAL TAB	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
PRENATAL TAB COMPLETE	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
PRENATAL TAB FORTE	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
PRENATAL/FE TAB	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>triadvance tab</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>trinate tab</i>	Tier 1	QL (30 tabs / 30 days); MAIL

MUSCULOSKELETAL THERAPY AGENTS***Central Muscle Relaxants***

<i>baclofen tab 10 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>baclofen tab 20 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>chlorzoxazone tab 500 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>cyclobenzaprine hcl tab 5 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>cyclobenzaprine hcl tab 10 mg</i>	Tier 1	QL (90 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>methocarbamol tab 500 mg</i>	Tier 1	QL (180 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>methocarbamol tab 750 mg</i>	Tier 1	QL (300 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>orphenadrine citrate tab er 12hr 100 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	Tier 1	QL (90 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	Tier 1	QL (90 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under

Direct Muscle Relaxants

<i>dantrolene sodium cap 25 mg</i>	Tier 1	QL (240 caps / 30 days); MAIL
<i>dantrolene sodium cap 50 mg</i>	Tier 1	QL (240 caps / 30 days); MAIL
<i>dantrolene sodium cap 100 mg</i>	Tier 1	QL (240 caps / 30 days); MAIL

Viscosupplements

EUFLEXXA INJ 10MG/ML	Tier 4	QL (3 syringes / 180 days), PA
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NASAL AGENTS - SYSTEMIC AND TOPICAL**Nasal Agents - Misc.**

<i>afrin saline spr 0.65%</i>	Tier 1	OTC; MAIL
<i>altamist spr 0.65%</i>	Tier 1	OTC; MAIL
<i>ayr spr 0.65%</i>	Tier 1	OTC; MAIL
<i>baby ayr spr 0.65%</i>	Tier 1	OTC; MAIL
<i>deep sea spr 0.65%</i>	Tier 1	OTC; MAIL
<i>hm saline spr 0.65%</i>	Tier 1	OTC; MAIL
<i>humist spr 0.65%</i>	Tier 1	OTC; MAIL
<i>little noses dro stof nos</i>	Tier 1	OTC; MAIL
<i>little noses spr 0.65%</i>	Tier 1	OTC; MAIL
<i>na-zone spr 0.65%</i>	Tier 1	OTC; MAIL
<i>nasal moist spr 0.65%</i>	Tier 1	OTC; MAIL
<i>nasal saline spr 0.65%</i>	Tier 1	OTC; MAIL
<i>ocean kids spr 0.65%</i>	Tier 1	OTC; MAIL
<i>saline mist spr 0.65%</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>saline nasal spr 0.65%</i>	Tier 1	OTC; MAIL
<i>saline nose spr 0.65%</i>	Tier 1	OTC; MAIL
<i>tgt nasal spr 0.65%</i>	Tier 1	OTC; MAIL
Nasal Anti-infectives		
BACTROBAN OIN NASAL 2%	Tier 2	QL (10 gm / 25 days), PA; MAIL
Nasal Antiallergy		
<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	Tier 1	QL (1 bottle / 25 days); MAIL
<i>cromolyn sodium nasal aerosol soln 5.2 mg/act (4%)</i>	Tier 1	OTC, QL (52 mL / 25 days); MAIL
Nasal Anticholinergics		
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	Tier 1	QL (30 mL / 25 days); MAIL
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	Tier 1	QL (15 mL / 25 days); MAIL
Nasal Steroids		
<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	Tier 1	QL (1 bottle / 25 days); MAIL; Covered for ages 6 and over
<i>flunisolide nasal soln 29 mcg/act (0.025%)</i>	Tier 1	QL (25 mL / 25 days); MAIL; Covered for ages 6 and over
<i>fluticasone propionate nasal susp 50 mcg/act</i>	Tier 1	QL (1 bottle / 25 days); MAIL; Covered for ages 4 and over
Sympathomimetic Decongestants		
<i>child silfed liq 15mg/5ml</i>	Tier 1	OTC; MAIL
<i>decongestant tab 30mg</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>decongestant tab 120mg er</i>	Tier 1	OTC; MAIL
<i>eq suphedrin tab 30mg</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>eq suphedrin tab 120mg cr</i>	Tier 1	OTC; MAIL
<i>genaphed tab 30mg</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>gnp suphedrn liq 15mg/5ml</i>	Tier 1	OTC; MAIL
<i>nasal decon syp 30mg/5ml</i>	Tier 1	OTC, QL (1200 mL / 30 days); MAIL
<i>nasal decong liq 30mg/5ml</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>nasal decong tab 10mg</i>	Tier 1	OTC; MAIL
<i>nasal decong tab 30mg</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>nasal decong tab 120mg er</i>	Tier 1	OTC; MAIL
<i>nasal spr 0.05%</i>	Tier 1	OTC; MAIL
<i>non-pseudo tab 10mg</i>	Tier 1	OTC; MAIL
<i>pseudoephedr tab 60mg</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>pseudoephedr tab 120mg er</i>	Tier 1	OTC; MAIL
<i>pseudoephedrine hcl syrup 30 mg/5ml</i>	Tier 1	OTC, QL (1200 mL / 30 days); MAIL
<i>pseudoephedrine hcl tab 30 mg</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>qc suphedrin tab 120mg sr</i>	Tier 1	OTC; MAIL
<i>ra suphedrin tab 30mg</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>ra suphedrin tab 120mg cr</i>	Tier 1	OTC; MAIL
<i>sinus/conges tab 10mg</i>	Tier 1	OTC; MAIL
<i>sm nasal dec tab 30mg</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>sudafed 12hr tab 120mg cr</i>	Tier 1	OTC; MAIL
SUDAFED PE SOL CHILDREN	Tier 1	OTC; MAIL
<i>sudogest pe tab 10mg</i>	Tier 1	OTC; MAIL
<i>sudogest tab 30mg</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>sudogest tab 60mg</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>sudogest tab 120mg er</i>	Tier 1	OTC; MAIL
<i>suphedrin tab 120mg er</i>	Tier 1	OTC; MAIL
<i>suphedrine tab 10mg</i>	Tier 1	OTC; MAIL
<i>suphedrine tab 30mg</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>suphedrine tab pe 10mg</i>	Tier 1	OTC; MAIL
<i>sw nasal dec tab 30mg</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
TYZINE PED DRO 0.05%	Tier 3	MAIL
TYZINE SOL 0.1%	Tier 3	MAIL
<i>unifed liq 30mg/5ml</i>	Tier 1	OTC; MAIL
<i>wal-phed d tab 120mg</i>	Tier 1	OTC; MAIL
<i>wal-phed pe tab 10mg</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>wal-phed tab 30mg</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL

NEUROMUSCULAR AGENTS**ALS Agents**

<i>riluzole tab 50 mg</i>	Tier 2	QL (60 tabs / 30 days), PA; MAIL
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NUTRIENTS**Misc. Nutritional Substances**

<i>kp omega-3 cap 1200mg</i>	Tier 1	OTC; MAIL
<i>omega 3 500 cap 500mg</i>	Tier 1	OTC, QL (180 caps / 30 days); MAIL
<i>omega iii cap epa+dha</i>	Tier 1	OTC, QL (180 caps / 30 days); MAIL
<i>omega-3 cap 1200mg</i>	Tier 1	OTC, QL (180 caps / 30 days); MAIL
<i>omega-3 fish cap 1000mg</i>	Tier 1	OTC; MAIL
<i>omega-3 fish cap 1200mg</i>	Tier 1	OTC; MAIL
<i>ra fish oil cap 1000mg</i>	Tier 1	OTC; MAIL

OPHTHALMIC AGENTS**Artificial Tears and Lubricants**

<i>akwa tears oin op</i>	Tier 1	OTC; MAIL
<i>altalube oin</i>	Tier 1	OTC; MAIL
<i>artifi tears dro</i>	Tier 1	OTC; MAIL
<i>artifi tears dro 1-0.3%</i>	Tier 1	OTC; MAIL
<i>artifi tears oin op</i>	Tier 1	OTC; MAIL
<i>artificial dro tears</i>	Tier 1	OTC; MAIL
<i>artificial sol tears</i>	Tier 1	OTC; MAIL
<i>artificial sol tears op</i>	Tier 1	OTC; MAIL
<i>bion tears sol op</i>	Tier 1	OTC; MAIL
<i>clear eyes dro 0.5-0.6%</i>	Tier 1	OTC; MAIL
<i>cvs dry eye dro relief</i>	Tier 1	OTC; MAIL
<i>cvs lubricnt dro 0.5% op</i>	Tier 1	OTC; MAIL
<i>cvs natural sol tears</i>	Tier 1	OTC; MAIL
<i>eq gentle dro 0.3%</i>	Tier 1	OTC; MAIL
<i>eq lubricant dro eye drop</i>	Tier 1	OTC; MAIL
<i>eq revive pl dro 0.5% op</i>	Tier 1	OTC; MAIL
<i>eye lubrican oin op</i>	Tier 1	OTC; MAIL
<i>for sty reli oin</i>	Tier 1	OTC; MAIL
<i>genteal tear oin nt-time</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>gnp eye drop sol 0.5% op</i>	Tier 1	OTC; MAIL
<i>hm dry eye sol relief</i>	Tier 1	OTC; MAIL
<i>hypotears oin op</i>	Tier 1	OTC; MAIL
<i>just tears sol eye drop</i>	Tier 1	OTC; MAIL
LACRISERT MIS 5MG OP	Tier 3	PA; MAIL
<i>liquitears sol</i>	Tier 1	OTC; MAIL
<i>lubricant dro 0.4-0.3%</i>	Tier 1	OTC; MAIL
<i>lubricant dro eye</i>	Tier 1	OTC; MAIL
<i>lubricant oin eye</i>	Tier 1	OTC; MAIL
<i>lubricating dro 0.5%</i>	Tier 1	OTC; MAIL
<i>lubricnt eye dro</i>	Tier 1	OTC; MAIL
<i>lubricnt eye dro 0.4-0.3%</i>	Tier 1	OTC; MAIL
<i>lubricnt eye dro 0.5% op</i>	Tier 1	OTC; MAIL
<i>lubricnt eye oin fast act</i>	Tier 1	OTC; MAIL
<i>murine tears dro dry eyes</i>	Tier 1	OTC; MAIL
<i>polyvinyl alcohol ophth soln 1.4%</i>	Tier 1	OTC; MAIL
<i>purulube oin</i>	Tier 1	OTC; MAIL
<i>pure & gentl dro 0.3%</i>	Tier 1	OTC; MAIL
<i>ra lubricant dro 0.4-0.3%</i>	Tier 1	OTC; MAIL
<i>refresh lacr oin op</i>	Tier 1	OTC; MAIL
<i>refresh p.m. oin op</i>	Tier 1	OTC; MAIL
<i>retaine cmc sol 0.5% op</i>	Tier 1	OTC; MAIL
<i>revive tears dro 0.5% op</i>	Tier 1	OTC; MAIL
<i>sm artificia sol tears</i>	Tier 1	OTC; MAIL
<i>sm dry eye sol relief</i>	Tier 1	OTC; MAIL
<i>soothe dro hydratio</i>	Tier 1	OTC; MAIL
<i>soothe night oin op</i>	Tier 1	OTC; MAIL
<i>soothe xp dro</i>	Tier 1	OTC; MAIL
<i>stye oin</i>	Tier 1	OTC; MAIL
<i>systane dro contacts</i>	Tier 1	OTC; MAIL
<i>systane oin</i>	Tier 1	OTC; MAIL
<i>tears again dro 1.4%</i>	Tier 1	OTC; MAIL
<i>tears again oin op</i>	Tier 1	OTC; MAIL
<i>tears again sol adv eye</i>	Tier 1	OTC; MAIL
<i>tears pure sol</i>	Tier 1	OTC; MAIL
<i>tgt lubricnt dro eye</i>	Tier 1	OTC; MAIL
<i>tgt lubricnt oin eye nite</i>	Tier 1	OTC; MAIL
<i>ultra fresh dro 0.5% op</i>	Tier 1	OTC; MAIL
<i>ultra fresh oin pm</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
Beta-blockers - Ophthalmic		
<i>betaxolol hcl ophth soln 0.5%</i>	Tier 1	MAIL
<i>carteolol hcl ophth soln 1%</i>	Tier 1	QL (720 mL / 30 days); MAIL
<i>dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml</i>	Tier 1	QL (Max day supply 28); MAIL
<i>levobunolol hcl ophth soln 0.5%</i>	Tier 1	QL (720 mL / 30 days); MAIL
<i>levobunolol hcl ophth soln 0.25%</i>	Tier 1	QL (720 mL / 30 days); MAIL
<i>metipranolol ophth soln 0.3%</i>	Tier 1	MAIL
<i>timolol maleate ophth gel forming soln 0.5%</i>	Tier 2	QL (30 mL / 30 days); MAIL
<i>timolol maleate ophth gel forming soln 0.25%</i>	Tier 2	MAIL
<i>timolol maleate ophth soln 0.5%</i>	Tier 1	QL (60 mL / 30 days); MAIL
<i>timolol maleate ophth soln 0.25%</i>	Tier 1	MAIL
Cycloplegic Mydriatics		
<i>atropine sul sol 1% op</i>	Tier 1	QL (900 mL / 30 days); MAIL
<i>tropicamide ophth soln 0.5%</i>	Tier 1	MAIL
<i>tropicamide ophth soln 1%</i>	Tier 1	MAIL
Miotics		
PHOSPHOLINE SOL 0.125%OP	Tier 2	MAIL
<i>pilocarpine hcl ophth soln 1%</i>	Tier 1	MAIL
<i>pilocarpine hcl ophth soln 2%</i>	Tier 1	MAIL
<i>pilocarpine hcl ophth soln 4%</i>	Tier 1	MAIL
OPHTHALMICS - MISC.		
<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i>	Tier 2	MAIL
Ophthalmic Adrenergic Agents		
<i>apraclonidine hcl ophth soln 0.5% (base equivalent)</i>	Tier 1	MAIL
<i>brimonidine tartrate ophth soln 0.2%</i>	Tier 2	MAIL
<i>brimonidine tartrate ophth soln 0.15%</i>	Tier 2	QL (60 mL / 30 days); MAIL
Ophthalmic Anti-infectives		
<i>ak-poly-bac oin op</i>	Tier 1	MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>bacitracin ophth oint 500 unit/gm</i>	Tier 1	MAIL
<i>bacitracin-polymyxin b ophth oint</i>	Tier 1	MAIL
BESIVANCE SUS 0.6%	Tier 3	PA
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	Tier 1	QL (60 mL / 30 days)
<i>erythromycin ophth oint 5 mg/gm</i>	Tier 1	MAIL
<i>gatifloxacin ophth soln 0.5%</i>	Tier 1	
<i>gentak oin 0.3% op</i>	Tier 1	MAIL
<i>gentamicin sulfate ophth oint 0.3%</i>	Tier 1	MAIL
<i>gentamicin sulfate ophth soln 0.3%</i>	Tier 1	QL (5 mL / 25 days); MAIL
<i>levofloxacin ophth soln 0.5%</i>	Tier 1	
<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i>	Tier 1	PA
<i>neo-polycin oin op</i>	Tier 1	MAIL
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	Tier 1	MAIL
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	Tier 1	MAIL
<i>ofloxacin ophth soln 0.3%</i>	Tier 1	QL (5 mL / 25 days)
<i>polycin oin op</i>	Tier 1	MAIL
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	Tier 1	QL (10 mL / 25 days); MAIL
<i>sulfacetamide sodium ophth soln 10%</i>	Tier 1	QL (15 mL / 25 days); MAIL
<i>tobramycin ophth soln 0.3%</i>	Tier 1	QL (5 mL / 25 days); MAIL
<i>trifluridine ophth soln 1%</i>	Tier 2	QL (720 mL / 30 days); MAIL
ZIRGAN GEL 0.15%	Tier 3	PA; MAIL
Ophthalmic Decongestants		
<i>naphazoline hcl ophth soln 0.1%</i>	Tier 1	MAIL
Ophthalmic Local Anesthetics		
<i>proparacaine hcl ophth soln 0.5%</i>	Tier 1	MAIL
Ophthalmic Steroids		
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	Tier 1	MAIL
<i>dexamethasone sodium phosphate ophth soln 0.1%</i>	Tier 1	MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>fluorometholone ophth susp 0.1%</i>	Tier 1	QL (15 mL / 25 days); MAIL
<i>neo-polycin oin hc 1%op</i>	Tier 1	MAIL
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	Tier 1	MAIL
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	Tier 1	MAIL
<i>prednisolone acetate ophth susp 1%</i>	Tier 1	MAIL
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	Tier 1	MAIL
TOBRADEX OIN 0.3-0.1%	Tier 2	MAIL
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	Tier 2	QL (10 mL / 25 days); MAIL
Ophthalmics - Misc.		
<i>alaway child dro 0.025%op</i>	Tier 1	OTC, QL (5 mL / 25 days); MAIL
<i>alaway dro 0.025%op</i>	Tier 1	OTC, QL (5 mL / 25 days); MAIL
<i>allergy eye dro 0.025%op</i>	Tier 1	OTC, QL (5 mL / 25 days); MAIL
<i>altachlore oin 5% op</i>	Tier 1	OTC; MAIL
<i>altachlore sol 5% op</i>	Tier 1	OTC; MAIL
<i>antihistamin dro 0.025%op</i>	Tier 1	OTC, QL (5 mL / 25 days); MAIL
<i>azelastine hcl ophth soln 0.05%</i>	Tier 1	PA; MAIL
<i>claritin eye dro 0.025%op</i>	Tier 1	OTC, QL (5 mL / 25 days); MAIL
<i>cromolyn sodium ophth soln 4%</i>	Tier 1	QL (60 mL / 30 days); MAIL
<i>cvs allergy dro 0.025%op</i>	Tier 1	OTC, QL (5 mL / 25 days); MAIL
<i>diclofenac sodium ophth soln 0.1%</i>	Tier 1	QL (60 mL / 30 days); MAIL
<i>dorzolamide hcl ophth soln 2%</i>	Tier 1	QL (60 mL / 30 days); MAIL
<i>epinastine hcl ophth soln 0.05%</i>	Tier 1	PA; MAIL
<i>eq itchy eye dro 0.025%op</i>	Tier 1	OTC, QL (5 mL / 25 days); MAIL
<i>eye itch rel dro 0.025%op</i>	Tier 1	OTC, QL (5 mL / 25 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>flurbiprofen sodium ophth soln 0.03%</i>	Tier 1	MAIL
<i>itchy eye dro 0.025%op</i>	Tier 1	OTC, QL (5 mL / 25 days); MAIL
<i>ketorolac tromethamine ophth soln 0.4%</i>	Tier 1	QL (60 mL / 30 days); MAIL
<i>ketorolac tromethamine ophth soln 0.5%</i>	Tier 1	QL (60 mL / 30 days); MAIL
<i>ketotif fum dro 0.025%op</i>	Tier 1	OTC, QL (5 mL / 25 days); MAIL
<i>ketotifen fumarate ophth soln 0.025% (base equiv)</i>	Tier 1	OTC, QL (5 mL / 25 days); MAIL
<i>sochlor sol 5% op</i>	Tier 1	OTC; MAIL
<i>sodium chloride hypertonic ophth oint 5%</i>	Tier 1	OTC; MAIL
<i>sodium chloride hypertonic ophth soln 5%</i>	Tier 1	OTC; MAIL
<i>wal-zyr dro 0.025%op</i>	Tier 1	OTC, QL (5 mL / 25 days); MAIL

Prostaglandins - Ophthalmic

<i>bimatoprost ophth soln 0.03%</i>	Tier 2	QL (5 mL / 30 days); MAIL
<i>latanoprost ophth soln 0.005%</i>	Tier 1	QL (720 mL / 30 days); MAIL
TRAVATAN Z DRO 0.004%	Tier 2	QL (720 mL / 30 days), ST; MAIL; Prior use of Bimatoprost 0.03% for 30 days
<i>travoprost ophth soln 0.004%</i>	Tier 1	QL (720 mL / 30 days), ST; MAIL; PRIOR USE BIMATOPROST

OTIC AGENTS**Otic Agents - Miscellaneous**

<i>acetic acid otic soln 2%</i>	Tier 1	QL (20 mL / 25 days); MAIL
<i>auraphene-b sol 6.5% ot</i>	Tier 1	OTC; MAIL
<i>cvs ear dro 6.5% ot</i>	Tier 1	OTC; MAIL
<i>e-r-o ear dro 6.5% ot</i>	Tier 1	OTC; MAIL
<i>ear drops sol 6.5% ot</i>	Tier 1	OTC; MAIL
<i>ear drying dro 95-5%</i>	Tier 1	OTC; MAIL
<i>ear wax kit sol 6.5% ot</i>	Tier 1	OTC; MAIL
<i>ear wax remv dro 6.5% ot</i>	Tier 1	OTC; MAIL
<i>ear wax remv sol 6.5% ot</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>earwax remv sol 6.5% ot</i>	Tier 1	OTC; MAIL
<i>earwax trmnt dro 6.5% ot</i>	Tier 1	OTC; MAIL
<i>eq ear wax sol removal</i>	Tier 1	OTC; MAIL
<i>ero ear wax sol removal</i>	Tier 1	OTC; MAIL
<i>gnp ear dro 6.5% ot</i>	Tier 1	OTC; MAIL
<i>gnp ear sys sol 6.5% ot</i>	Tier 1	OTC; MAIL
<i>inst ear-dry dro 95-5%</i>	Tier 1	OTC; MAIL
<i>murine ear dro 6.5% ot</i>	Tier 1	OTC; MAIL
<i>murine ear sol 6.5% ot</i>	Tier 1	OTC; MAIL
<i>otix sol 6.5% ot</i>	Tier 1	OTC; MAIL
<i>ra ear dro 6.5% ot</i>	Tier 1	OTC; MAIL
<i>sm ear dro 6.5% ot</i>	Tier 1	OTC; MAIL
Otic Anti-infectives		
<i>ciprofloxacin hcl otic soln 0.2% (base equivalent)</i>	Tier 1	QL (14 ea / 7 days)
<i>ofloxacin otic soln 0.3%</i>	Tier 1	QL (5 mL / 30 days)
Otic Combinations		
<i>antipyrine-benzocaine otic soln 54-14 mg/ml (5.4-1.4%)</i>	Tier 1	MAIL
<i>aurodex sol otic</i>	Tier 1	MAIL
CIPRO HC SUS OTIC	Tier 3	PA
CIPRODEX SUS 0.3-0.1%	Tier 3	QL (7.5 mL / year), PA
<i>neomycin-polymyxin-hc otic soln 1%</i>	Tier 1	MAIL
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	Tier 1	QL (300 mL / 30 days); MAIL
Otic Steroids		
<i>acetasol hc sol otic</i>	Tier 1	MAIL
<i>fluocinolone acetone (otic) oil 0.01%</i>	Tier 2	MAIL
<i>hydrocortisone w/ acetic acid otic soln 1-2%</i>	Tier 1	MAIL
OXYTOCICS		
Oxytocics		
<i>methergine tab 0.2mg</i>	Tier 2	QL (210 tabs / 30 days); MAIL
PASSIVE IMMUNIZING AGENTS		
Immune Serums		
CARIMUNE NF INJ 12GM	Tier 3	PA; MAIL

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Drug Name	Drug Tier	Requirements/Limits
FLEBOGAMMA INJ 20/200ML	Tier 4	QL (3 vials / 25 days), PA
FLEBOGAMMA INJ DIF 5%	Tier 4	PA
GAMASTAN INJ	Tier 4	PA
GAMASTAN S/D INJ	Tier 4	PA
GAMMAGARD INJ 1GM/10ML	Tier 4	PA
GAMMAGARD SD INJ 10GM HU	Tier 4	PA
GAMMAKED INJ 1GM/10ML	Tier 4	PA
GAMMAPLEX INJ 5%	Tier 4	PA
GAMUNEX-C INJ 1GM/10ML	Tier 4	PA
HIZENTRA INJ 2GM/10ML	Tier 4	PA
MICRHOGAM PL INJ 50MCG	Tier 2	
OCTAGAM INJ 5GM	Tier 4	PA
PRIVIGEN INJ 20GRAMS	Tier 4	QL (3 vials / 25 days), PA
RHOGAM PLUS INJ 300MCG	Tier 2	
RHOPHYLAC INJ 1500/2ML	Tier 2	

Monoclonal Antibodies

SYNAGIS INJ 50MG	Tier 4	PA
SYNAGIS INJ 100MG/ML	Tier 4	PA

PASSIVE IMMUNIZING AGENTS - COMBINATIONS**PASSIVE IMMUNIZING AGENTS - COMBINATIONS**

HYQVIA INJ 2.5-200	Tier 4	PA
HYQVIA INJ 5-400	Tier 4	PA
HYQVIA INJ 10-800	Tier 4	PA
HYQVIA INJ 20-1600	Tier 4	PA
HYQVIA INJ 30-2400	Tier 4	PA

PENICILLINS**Aminopenicillins**

<i>amoxicillin (trihydrate) cap 250 mg</i>	Tier 1	QL (240 caps / 30 days)
<i>amoxicillin (trihydrate) cap 500 mg</i>	Tier 1	QL (240 caps / 30 days)
<i>amoxicillin (trihydrate) chew tab 125 mg</i>	Tier 1	QL (180 tabs / 30 days)
<i>amoxicillin (trihydrate) chew tab 250 mg</i>	Tier 1	QL (240 tabs / 30 days)
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	Tier 1	
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	Tier 1	
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	Tier 1	

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Drug Name	Drug Tier	Requirements/Limits
<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	Tier 1	
<i>amoxicillin (trihydrate) tab 500 mg</i>	Tier 1	QL (150 tabs / 30 days)
<i>amoxicillin (trihydrate) tab 875 mg</i>	Tier 1	QL (120 tabs / 30 days)
<i>ampicillin cap 250 mg</i>	Tier 1	QL (240 caps / 30 days)
<i>ampicillin cap 500 mg</i>	Tier 1	QL (240 caps / 30 days)
<i>ampicillin for susp 125 mg/5ml</i>	Tier 1	QL (900 mL / 30 days); Covered for ages 12 and under
<i>ampicillin for susp 250 mg/5ml</i>	Tier 1	QL (900 mL / 30 days); Covered for ages 12 and under

Natural Penicillins

<i>penicillin g potassium for inj 2000000 unit</i>	Tier 1	PA
<i>penicillin g sodium for inj 5000000 unit</i>	Tier 1	PA
<i>penicillin v potassium for soln 125 mg/5ml</i>	Tier 1	QL (1200 mL / 30 days)
<i>penicillin v potassium for soln 250 mg/5ml</i>	Tier 1	QL (1200 mL / 30 days)
<i>penicillin v potassium tab 250 mg</i>	Tier 1	QL (240 tabs / 30 days)
<i>penicillin v potassium tab 500 mg</i>	Tier 1	QL (240 tabs / 30 days)
<i>pfizerpen inj 20mu</i>	Tier 1	PA

Penicillin Combinations

<i>amoxicillin & k clavulanate chew tab 200-28.5 mg</i>	Tier 1	QL (90 tabs / 30 days); AGE; Covered for ages 12 and under
<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	Tier 1	QL (120 tabs / 30 days); AGE; Covered for ages 12 and under
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	Tier 1	AGE; Covered for ages 12 and under
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	Tier 1	QL (150 mL / 30 days); AGE; Covered for ages 12 and under
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	Tier 1	AGE; Covered for ages 12 and under
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	Tier 1	AGE; Covered for ages 12 and under
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	Tier 1	QL (Max day supply 10)
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	Tier 1	QL (Max day supply 10)
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	Tier 1	QL (Max day supply 10)

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Drug Name	Drug Tier	Requirements/Limits
<i>ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm</i>	Tier 1	PA
<i>ampicillin & sulbactam sodium for iv soln 3 (2-1) gm</i>	Tier 1	PA
<i>ampicillin & sulbactam sodium for iv soln 15 (10-5) gm</i>	Tier 1	PA
AUGMENTIN SUS 125/5ML	Tier 3	QL (150 mL / 30 days); AGE; Covered for ages 12 and under
<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	Tier 2	PA
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	Tier 2	PA
<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	Tier 2	PA
TIMENTIN INJ 3.1GM	Tier 3	PA
Penicillinase-Resistant Penicillins		
<i>dicloxacillin sodium cap 250 mg</i>	Tier 1	QL (240 caps / 30 days)
<i>dicloxacillin sodium cap 500 mg</i>	Tier 1	QL (180 caps / 30 days)
<i>nafcillin sodium for inj 1 gm</i>	Tier 1	PA
<i>nafcillin sodium for iv soln 2 gm</i>	Tier 1	PA
<i>nafcillin sodium for iv soln 10 gm</i>	Tier 1	PA
<i>nallpen inj 10gm</i>	Tier 1	PA
<i>oxacillin sodium for inj 2 gm (base equivalent)</i>	Tier 1	PA
<i>oxacillin sodium for inj 10 gm (base equivalent)</i>	Tier 1	PA
PHARMACEUTICAL ADJUVANTS		
ANTIMICROBIAL AGENTS		
BENZYL ALC LIQ	Tier 2	MAIL; Covered for ages 16-60
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
OTEZLA TAB 10/20/30	Tier 4	PA; Preferred Brand
OTEZLA TAB 30MG	Tier 4	PA; Preferred Brand
PRENATAL VITAMINS		
PRENATAL MV & MIN W/FE-FA		
PRENATAL MUL CAP +DHA	Tier 1	OTC, QL (30 caps / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
PRENATAL MV & MIN W/FE-FA-DHA		
PRENATAL MV MIS + DHA	Tier 1	OTC, QL (60 boxes / 30 days); MAIL
PROGESTINS		
PROGESTINS		
<i>hydroxyprogesterone caproate im in oil 250 mg/ml</i>	Tier 4	PA
Progestins		
<i>medroxyprogesterone acetate tab 2.5 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>medroxyprogesterone acetate tab 5 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>medroxyprogesterone acetate tab 10 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>norethindrone acetate tab 5 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>progesterone micronized cap 100 mg</i>	Tier 1	QL (30 caps / 30 days); MAIL
<i>progesterone micronized cap 200 mg</i>	Tier 1	QL (60 caps / 30 days); MAIL
PROTEIN CONVERTASE SUBTILISIN/KEXIN TYPE 9 INHIBITORS		
PCSK9 INHIBITORS		
REPATHA INJ 140MG/ML	Tier 4	QL (2 syringes / 24 days), PA
REPATHA PUSH INJ 420/3.5	Tier 4	QL (1 cartridge / 24 days), PA
REPATHA SURE INJ 140MG/ML	Tier 4	QL (2 pens / 24 days), PA
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
Agents for Chemical Dependency		
<i>acamprosate calcium tab delayed release 333 mg</i>	Tier 2	MAIL
<i>disulfiram tab 250 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>disulfiram tab 500 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
Anti-Cataleptic Agents		
XYREM SOL 500MG/ML	Tier 3	PA

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Drug Name	Drug Tier	Requirements/Limits
Antidementia Agents		
<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>donepezil hydrochloride tab 5 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>donepezil hydrochloride tab 10 mg</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>galantamine hydrobromide cap er 24hr 8 mg</i>	Tier 1	QL (90 caps / 30 days); MAIL
<i>galantamine hydrobromide cap er 24hr 24 mg</i>	Tier 1	QL (30 caps / 30 days); MAIL
<i>galantamine hydrobromide tab 4 mg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>galantamine hydrobromide tab 8 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>galantamine hydrobromide tab 12 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>memantine hcl cap er 24hr 7 mg</i>	Tier 2	PA; MAIL
<i>memantine hcl cap er 24hr 14 mg</i>	Tier 2	PA; MAIL
<i>memantine hcl cap er 24hr 21 mg</i>	Tier 2	PA; MAIL
<i>memantine hcl cap er 24hr 28 mg</i>	Tier 2	PA; MAIL
<i>memantine hcl oral solution 2 mg/ml</i>	Tier 2	MAIL
<i>memantine hcl tab 5 mg</i>	Tier 2	QL (120 tabs / 30 days); MAIL
<i>memantine hcl tab 5 mg (28) & 10 mg (21) titration pak</i>	Tier 2	MAIL
<i>memantine hcl tab 10 mg</i>	Tier 2	QL (60 tabs / 30 days); MAIL
NAMENDA XR CAP 7MG	Tier 3	PA; MAIL
NAMENDA XR CAP 14MG	Tier 3	PA; MAIL
NAMENDA XR CAP 21MG	Tier 3	PA; MAIL
NAMENDA XR CAP 28MG	Tier 3	PA; MAIL
NAMENDA XR CAP TITRATIO	Tier 3	PA; MAIL
<i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i>	Tier 2	MAIL
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	Tier 2	MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i>	Tier 2	MAIL
<i>rivastigmine tartrate cap 6 mg (base equivalent)</i>	Tier 2	MAIL
<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	Tier 2	PA; MAIL
<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	Tier 2	PA; MAIL
<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	Tier 2	PA; MAIL
MULTIPLE SCLEROSIS AGENTS		
<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	Tier 4	PA
Movement Disorder Drug Therapy		
<i>tetrabenazine tab 12.5 mg</i>	Tier 4	PA
<i>tetrabenazine tab 25 mg</i>	Tier 4	PA
Multiple Sclerosis Agents		
AMPYRA TAB 10MG	Tier 4	PA
AVONEX KIT 30MCG	Tier 4	PA
AVONEX PEN KIT 30MCG	Tier 4	PA
AVONEX PREFL KIT 30MCG	Tier 4	PA
<i>dalfampridine tab er 12hr 10 mg</i>	Tier 4	PA
EXTAVIA INJ 0.3MG	Tier 4	PA
GILENYA CAP 0.5MG	Tier 4	PA
<i>glatiramer acetate soln prefilled syringe 20 mg/ml</i>	Tier 4	PA
TECFIDERA CAP 120MG	Tier 4	QL (60 caps / 30 days), PA
TECFIDERA CAP 240MG	Tier 4	QL (60 caps / 30 days), PA
TECFIDERA MIS STARTER	Tier 4	QL (1 kit / 30 days), PA
TYSABRI INJ 300/15ML	Tier 4	PA
Psychotherapeutic and Neurological Agents - Misc.		
<i>ergoloid mesylates tab 1 mg</i>	Tier 2	MAIL
<i>pimozide tab 1 mg</i>	Tier 1	QL (300 tabs / 30 days); MAIL
<i>pimozide tab 2 mg</i>	Tier 1	QL (150 tabs / 30 days); MAIL
Smoking Deterrents		
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	PREV	QL (60 per 30 Days; Max day supply 90 per year); MAIL

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Drug Name	Drug Tier	Requirements/Limits
CHANTIX PAK 0.5& 1MG	PREV	QL (Max day supply 52 per year); MAIL
CHANTIX PAK 1MG	PREV	QL (165 tabs / year); MAIL
CHANTIX TAB 0.5MG	PREV	QL (165 tabs / year); MAIL
CHANTIX TAB 1MG	PREV	QL (165 tabs / year); MAIL
<i>cvs nicotine dis 7mg/24hr</i>	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
<i>cvs nicotine dis 14mg/24h</i>	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
<i>cvs nicotine dis 21mg/24h</i>	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
<i>cvs nicotine gum 2mg cinn</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>cvs nicotine gum 2mg mint</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>cvs nicotine gum 2mg orig</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>cvs nicotine gum 2mgfruit</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>cvs nicotine gum 4mg cinn</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>cvs nicotine gum 4mg mint</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>cvs nicotine gum 4mg orig</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>cvs nicotine gum 4mgfruit</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>cvs nicotine loz 2mg mint</i>	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
<i>cvs nicotine loz 4mg mint</i>	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
<i>cvs nts dis step 1</i>	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
<i>eq nicotine dis 7mg/24hr</i>	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
<i>eq nicotine dis 14mg/24h</i>	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
<i>eq nicotine dis 21mg/24h</i>	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
<i>eq nicotine gum 2mg cinn</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>eq nicotine gum 2mg mint</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>eq nicotine gum 2mg orig</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>eq nicotine gum 2mgfruit</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>eq nicotine gum 4mg cinn</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>eq nicotine gum 4mg mint</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>eq nicotine gum 4mg orig</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>eq nicotine gum 4mg ref</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>eq nicotine gum 4mg strt</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>eq nicotine gum 4mgfruit</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>eq nicotine loz 2mg cher</i>	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
<i>eq nicotine loz 2mg mint</i>	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
<i>eq nicotine loz 4mg chry</i>	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
<i>eq nicotine loz 4mg mint</i>	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
<i>eql nicotine gum 2mg</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>eql nicotine gum 4mg</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>eql nicotine loz 2mg mint</i>	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
<i>eql nicotine loz 4mg mint</i>	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
<i>gnp nicotine gum 2mg mint</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>gnp nicotine gum 2mg orig</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>gnp nicotine gum 4mg mint</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>gnp nicotine gum 4mg orig</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>gnp nicotine loz 2mg mint</i>	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
<i>gnp nicotine loz 4mg mint</i>	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
<i>hm nicotine dis 14mg/24h</i>	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
<i>hm nicotine dis 21mg/24h</i>	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
<i>hm nicotine gum 2mg mint</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>hm nicotine gum 4mg mint</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>hm nicotine loz 2mg mint</i>	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
<i>hm nicotine loz 4mg mint</i>	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
<i>kls quit2 gum 2mg</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>kls quit4 gum 4mg</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>nicorelief gum 2mg mint</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>nicorelief gum 2mg orig</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>nicorelief gum 4mg mint</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>nicorelief gum 4mg orig</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>nicotine dis step 1</i>	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
<i>nicotine dis step 2</i>	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
<i>nicotine dis step 3</i>	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
<i>nicotine gum 4mg</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>nicotine polacrilex gum 2 mg</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>nicotine polacrilex gum 4 mg</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>nicotine polacrilex lozenge 2 mg</i>	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
<i>nicotine polacrilex lozenge 4 mg</i>	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
<i>nicotine td patch 24hr 7 mg/24hr</i>	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
<i>nicotine td patch 24hr 14 mg/24hr</i>	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>nicotine td patch 24hr 21 mg/24hr</i>	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
NICOTROL INH	PREV	QL (480 per 30 Days); MAIL; Covered for ages 18 and over
NICOTROL NS SPR 10MG/ML	PREV	QL (30 per 30 Days); MAIL; Covered for ages 18 and over
<i>ra nicotine dis 7mg/24hr</i>	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
<i>ra nicotine dis 14mg/24h</i>	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
<i>ra nicotine dis 21mg/24h</i>	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
<i>ra nicotine gum 2mg</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>ra nicotine gum 2mg cinn</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>ra nicotine gum 2mg mint</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>ra nicotine gum 2mgfruit</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>ra nicotine gum 4mg</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>ra nicotine gum 4mg frut</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>ra nicotine gum 4mg mint</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL

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Tier 3 = Non-preferred brand name drugs
Tier 4 = Specialty Drugs (available at an in-network retail pharmacy when indicated)
PREV = Preventative Services at \$0 copay; **DME** = Coinsurance may apply

Drug Name	Drug Tier	Requirements/Limits
<i>ra nicotine loz 2mg mint</i>	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
<i>ra nicotine loz 4mg mint</i>	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
<i>sm nicotine dis 7mg/24hr</i>	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
<i>sm nicotine dis 14mg/24h</i>	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
<i>sm nicotine dis 21mg/24h</i>	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
<i>sm nicotine gum 2mg</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>sm nicotine gum 4mg</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>sm nicotine loz 2mg mint</i>	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
<i>sm nicotine loz 4mg mint</i>	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
<i>stop smoking gum 2mg mint</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>stop smoking gum 2mg orig</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>stop smoking gum 4mg</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>stop smoking loz 2mg mint</i>	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over

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Drug Name	Drug Tier	Requirements/Limits
<i>stop smoking loz 4mg mint</i>	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
<i>sw nicotine gum 2mg mint</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>sw nicotine gum 4mg</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>sw nicotine loz 2mg mint</i>	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
<i>sw nicotine loz 4mg mint</i>	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
<i>tgt nicotine dis 7mg/24hr</i>	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
<i>tgt nicotine dis 14mg/24h</i>	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
<i>tgt nicotine dis 21mg/24h</i>	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
<i>tgt nicotine gum 2mg mint</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>tgt nicotine gum 2mg orig</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>tgt nicotine gum 2mgfruit</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>tgt nicotine gum 4mg</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>tgt nicotine gum 4mg mint</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>tgt nicotine gum 4mg orig</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
<i>tgt nicotine loz 2mg chry</i>	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
<i>tgt nicotine loz 2mg mint</i>	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
<i>tgt nicotine loz 4mg chry</i>	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
<i>tgt nicotine loz 4mg mint</i>	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
<i>thrive gum 2mg mint</i>	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL

PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST
PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST

UPTRAVI TAB 200/800	Tier 4	QL (60 tabs / 30 days), PA
UPTRAVI TAB 200MCG	Tier 4	QL (60 tabs / 30 days), PA
UPTRAVI TAB 400MCG	Tier 4	QL (60 tabs / 30 days), PA
UPTRAVI TAB 600MCG	Tier 4	QL (60 tabs / 30 days), PA
UPTRAVI TAB 800MCG	Tier 4	QL (60 tabs / 30 days), PA
UPTRAVI TAB 1000MCG	Tier 4	QL (60 tabs / 30 days), PA
UPTRAVI TAB 1200MCG	Tier 4	QL (60 tabs / 30 days), PA
UPTRAVI TAB 1400MCG	Tier 4	QL (60 tabs / 30 days), PA
UPTRAVI TAB 1600MCG	Tier 4	QL (60 tabs / 30 days), PA

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Drug Name	Drug Tier	Requirements/Limits
RESPIRATORY AGENTS - MISC.		
<i>Cystic Fibrosis Agents</i>		
KALYDECO PAK 50MG	Tier 4	PA
KALYDECO PAK 75MG	Tier 4	PA
KALYDECO TAB 150MG	Tier 4	PA
PULMOZYME SOL 1MG/ML	Tier 4	QL (75 mL / 30 days), PA
<i>PULMONARY FIBROSIS AGENTS</i>		
ESBRIET CAP 267MG	Tier 1	QL (90 caps / 30 days), PA
ESBRIET TAB 267MG	Tier 3	QL (90 tabs / 30 days), PA
ESBRIET TAB 801MG	Tier 3	QL (90 tabs / 30 days), PA
RESPIRATORY THERAPY SUPPLIES		
<i>PEAK FLOW METERS</i>		
PEAK AIR FLO MIS ADLT/PED	DME	OTC, QL (1 per year); MAIL
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS		
<i>SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS</i>		
FARXIGA TAB 5MG	Tier 3	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione AND Alogliptin for 90 days
FARXIGA TAB 10MG	Tier 3	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione AND Alogliptin for 90 days
JARDIANCE TAB 10MG	Tier 3	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione AND Alogliptin for 90 days
JARDIANCE TAB 25MG	Tier 3	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione AND Alogliptin for 90 days

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MED - Max 90 mg Morphine EQ Dose Per Day

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Tier 3 = Non-preferred brand name drugs

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Drug Name	Drug Tier	Requirements/Limits
SULFONAMIDES		
<i>Sulfonamides</i>		
SULFADIAZINE TAB 500MG	Tier 2	
TETRACYCLINES		
<i>Tetracyclines</i>		
<i>avidoxy tab 100mg</i>	Tier 1	QL (90 tabs / 30 days)
<i>demeclocycline hcl tab 150 mg</i>	Tier 2	Covered for ages 8 and over
<i>demeclocycline hcl tab 300 mg</i>	Tier 2	Covered for ages 8 and over
<i>doxycycline monohydrate cap 50 mg</i>	Tier 1	QL (90 caps / 30 days)
<i>doxycycline monohydrate cap 100 mg</i>	Tier 1	QL (90 caps / 30 days)
<i>doxycycline monohydrate tab 100 mg</i>	Tier 1	QL (90 tabs / 30 days)
<i>minocycline hcl cap 50 mg</i>	Tier 1	QL (60 caps / 30 days)
<i>minocycline hcl cap 100 mg</i>	Tier 1	QL (60 caps / 30 days)
<i>tetracycline hcl cap 250 mg</i>	Tier 2	QL (180 caps / 30 days)
<i>tetracycline hcl cap 500 mg</i>	Tier 2	QL (120 caps / 30 days)
THYROID AGENTS		
<i>Antithyroid Agents</i>		
<i>methimazole tab 5 mg</i>	Tier 1	QL (180 ea / 30 days); MAIL
<i>methimazole tab 10 mg</i>	Tier 1	QL (180 ea / 30 days); MAIL
<i>propylthiouracil tab 50 mg</i>	Tier 1	QL (600 tabs / 30 days); MAIL
<i>Thyroid Hormones</i>		
ARMOUR THYRO TAB 15MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
ARMOUR THYRO TAB 30MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
ARMOUR THYRO TAB 60MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
ARMOUR THYRO TAB 90MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under

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Drug Name	Drug Tier	Requirements/Limits
ARMOUR THYRO TAB 120MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
ARMOUR THYRO TAB 180MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
ARMOUR THYRO TAB 240MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
ARMOUR THYRO TAB 300MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>levo-t tab 300 mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>levothyroxine sodium tab 25 mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>levothyroxine sodium tab 50 mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>levothyroxine sodium tab 75 mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>levothyroxine sodium tab 88 mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>levothyroxine sodium tab 100 mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>levothyroxine sodium tab 112 mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>levothyroxine sodium tab 125 mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>levothyroxine sodium tab 137 mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>levothyroxine sodium tab 150 mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>levothyroxine sodium tab 175 mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>levothyroxine sodium tab 200 mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>levothyroxine sodium tab 300 mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>levoxyl tab 25mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>levoxyl tab 50mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>levoxyl tab 75mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>levoxyl tab 88mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>levoxyl tab 100mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>levoxyl tab 112mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>levoxyl tab 125mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>levoxyl tab 137mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>levoxyl tab 150mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>levoxyl tab 175mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>levoxyl tab 200mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>liothyronine sodium iv soln 10 mcg/ml</i>	Tier 1	MAIL
<i>liothyronine sodium tab 5 mcg</i>	Tier 1	QL (180 tabs / 30 days); MAIL
<i>liothyronine sodium tab 25 mcg</i>	Tier 1	QL (90 tabs / 30 days); MAIL
<i>liothyronine sodium tab 50 mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
NATURE THROI TAB 162.5MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
NATURE-THROI TAB 16.25MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
NATURE-THROI TAB 32.5MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
NATURE-THROI TAB 48.75MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under

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Drug Name	Drug Tier	Requirements/Limits
NATURE-THROI TAB 65MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
NATURE-THROI TAB 97.5MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
NATURE-THROI TAB 113.75MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
NATURE-THROI TAB 130MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
NATURE-THROI TAB 146.25MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
NATURE-THROI TAB 195MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
NATURE-THROI TAB 260MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
NATURE-THROI TAB 325MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>np thyroid tab 15mg</i>	Tier 1	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>np thyroid tab 30mg</i>	Tier 1	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>np thyroid tab 60mg</i>	Tier 1	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>np thyroid tab 90mg</i>	Tier 1	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>np thyroid tab 120mg</i>	Tier 1	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
SYNTHROID TAB 25MCG	Tier 2	QL (60 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
SYNTHROID TAB 50MCG	Tier 2	QL (60 tabs / 30 days); MAIL
SYNTHROID TAB 75MCG	Tier 2	QL (60 tabs / 30 days); MAIL
SYNTHROID TAB 88MCG	Tier 2	QL (60 tabs / 30 days); MAIL
SYNTHROID TAB 100MCG	Tier 2	QL (60 tabs / 30 days); MAIL
SYNTHROID TAB 112MCG	Tier 2	QL (60 tabs / 30 days); MAIL
SYNTHROID TAB 125MCG	Tier 2	QL (60 tabs / 30 days); MAIL
SYNTHROID TAB 137MCG	Tier 2	QL (60 tabs / 30 days); MAIL
SYNTHROID TAB 150MCG	Tier 2	QL (60 tabs / 30 days); MAIL
SYNTHROID TAB 175MCG	Tier 2	QL (60 tabs / 30 days); MAIL
SYNTHROID TAB 200MCG	Tier 2	QL (60 tabs / 30 days); MAIL
SYNTHROID TAB 300MCG	Tier 2	QL (60 tabs / 30 days); MAIL
<i>unithroid tab 25mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>unithroid tab 50mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>unithroid tab 75mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>unithroid tab 88mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>unithroid tab 100mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>unithroid tab 112mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>unithroid tab 125mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>unithroid tab 137mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>unithroid tab 150mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>unithroid tab 175mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>unithroid tab 200mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>unithroid tab 300mcg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
WESTHROID TAB 32.5MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
WESTHROID TAB 65MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
WESTHROID TAB 97.5MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
WESTHROID TAB 130MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
WESTHROID TAB 195MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
WP THYROID TAB 16.25MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
WP THYROID TAB 32.5MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
WP THYROID TAB 48.75MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
WP THYROID TAB 65MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
WP THYROID TAB 81.25MG	Tier 2	MAIL
WP THYROID TAB 97.5MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
WP THYROID TAB 130MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under

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Drug Name	Drug Tier	Requirements/Limits
ULCER DRUGS		
<i>Antispasmodics</i>		
<i>atropine sulfate soln prefill syr 0.5 mg/5ml (0.1 mg/ml)</i>	Tier 1	AGE; MAIL; Covered for ages 64 and under
<i>atropine sulfate soln prefill syr 0.25 mg/5ml (0.05 mg/ml)</i>	Tier 1	AGE; MAIL; Covered for ages 64 and under
<i>atropine sulfate soln prefill syr 1 mg/10ml (0.1 mg/ml)</i>	Tier 1	AGE; MAIL; Covered for ages 64 and under
CUVPOSA SOL 1MG/5ML	Tier 2	PA; MAIL
<i>dicyclomine hcl cap 10 mg</i>	Tier 1	QL (120 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	Tier 1	QL (2400 mL / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>dicyclomine hcl tab 20 mg</i>	Tier 1	QL (240 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>ed-spaz tab 0.125mg</i>	Tier 1	QL (360 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>glycopyrrolate tab 1 mg</i>	Tier 1	MAIL
<i>glycopyrrolate tab 2 mg</i>	Tier 1	MAIL
<i>hyoscyamine sulfate sl tab 0.125 mg</i>	Tier 1	QL (360 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>hyoscyamine sulfate soln 0.125 mg/ml</i>	Tier 1	QL (1800 mL / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>hyoscyamine sulfate tab 0.125 mg</i>	Tier 1	QL (360 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>hyoscyamine sulfate tab disint 0.125 mg</i>	Tier 1	QL (360 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>hyoscyamine sulfate tab er 12hr 0.375 mg</i>	Tier 1	QL (120 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under

PA - Prior Authorization **ST** - Step Therapy **AGE** - Age Limit

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MED - Max 90 mg Morphine EQ Dose Per Day

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Tier 2 = Non-Preferred generics; Preferred brand name drugs

Tier 3 = Non-preferred brand name drugs

Tier 4 = Specialty Drugs (available at an in-network retail pharmacy when indicated)

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Drug Name	Drug Tier	Requirements/Limits
<i>hyosyne dro 0.125/ml</i>	Tier 1	QL (1800 mL / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>hyosyne elx 0.125/5</i>	Tier 1	QL (1800 mL / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>nulev tab 0.125mg</i>	Tier 1	QL (360 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>oscimin sr tab 0.375mg</i>	Tier 1	QL (120 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>oscimin sub 0.125mg</i>	Tier 1	QL (360 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>oscimin tab 0.125mg</i>	Tier 1	QL (360 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>symax-sl sub 0.125mg</i>	Tier 1	QL (360 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>symax-sr tab 0.375mg</i>	Tier 1	QL (120 tabs / 30 days); AGE; MAIL; Covered for ages 64 and under

H-2 Antagonists

<i>acid control tab 10mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>acid control tab 20mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>acid control tab 75mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>acid control tab 150mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>acid reducer tab 10mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>acid reducer tab 20mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>acid reducer tab 75mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>acid reducer tab 150mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>acid reducer tab 200mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>cimetidine hcl soln 300 mg/5ml</i>	Tier 1	QL (1800 mL / 30 days); MAIL
<i>cimetidine tab 200 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>cimetidine tab 300 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>cimetidine tab 400 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>cimetidine tab 800 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>eq heartburn tab relief</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>eq heartbrn tab 10mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>famotidine tab 10mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>famotidine tab 20mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>famotidine tab 40 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>heartbrn rel tab 75mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>heartbrn rel tab 200mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>heartburn tab 20mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>heartburn tab 150mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>heartburn tab 200mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>heartburn tab relief</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>nizatidine cap 150 mg</i>	Tier 1	QL (120 caps / 30 days), ST; MAIL; PRIOR USE CIMETIDINE OR FAMOTIDINE OR RANITIDINE

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Drug Name	Drug Tier	Requirements/Limits
<i>nizatidine oral soln 15 mg/ml</i>	Tier 2	ST; MAIL; PRIOR USE CIMETIDINE OR FAMOTIDINE OR RANITIDINE
<i>ranitidine hcl syrup 15 mg/ml (75 mg/5ml)</i>	Tier 1	QL (600 mL / 30 days); MAIL; Covered for ages 12 and under
<i>ranitidine hcl tab 75 mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>ranitidine hcl tab 150 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>ranitidine hcl tab 300 mg</i>	Tier 1	QL (60 tabs / 30 days); MAIL
<i>sm acid redu tab 200mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>wal-zan tab 75mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>wal-zan tab 150mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
Misc. Anti-Ulcer		
CARAFATE SUS 1GM/10ML	Tier 2	QL (1200 mL / 30 days), PA; MAIL; Covered for ages 18 and under
<i>sucralfate tab 1 gm</i>	Tier 1	QL (120 tabs / 30 days); MAIL
PROTON PUMP INHIBITORS		
DEXILANT CAP 30MG DR	Tier 3	QL (30 caps / 30 days), ST; MAIL; PRIOR USE PANTOPRAZOLE AND ESOMEPRAZOLE OTC
Proton Pump Inhibitors		
DEXILANT CAP 60MG DR	Tier 3	QL (30 caps / 30 days), ST; MAIL; PRIOR USE PANTOPRAZOLE AND ESOMEPRAZOLE OTC
<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>	Tier 2	QL (60 caps / 30 days); MAIL
FIRST-OMEPRASUS 2MG/ML	Tier 2	QL (150 mL / 25 days), PA; MAIL; Covered for ages 12 and under

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Drug Name	Drug Tier	Requirements/Limits
<i>lansoprazole cap 15mg dr</i>	Tier 1	OTC, QL (60 caps / 30 days), PA; MAIL
<i>lansoprazole cap delayed release 15 mg</i>	Tier 1	OTC, QL (60 per 30 days); MAIL
OMEPRAZOLE + SUS SYRSPEND	Tier 2	QL (150 mL / 25 days), PA; MAIL; Covered for ages 12 and under
<i>omeprazole cap 20.6mgdr</i>	Tier 1	OTC, QL (30 caps / 30 days); MAIL
<i>omeprazole cap delayed release 10 mg</i>	Tier 1	QL (90 caps / 30 days); MAIL
<i>omeprazole cap delayed release 20 mg</i>	Tier 1	QL (90 caps / 30 days); MAIL
<i>omeprazole cap delayed release 40 mg</i>	Tier 1	QL (30 caps / 30 days); MAIL
<i>pantoprazole sodium ec tab 20 mg (base equiv)</i>	Tier 1	QL (30 tabs / 30 days); MAIL
<i>pantoprazole sodium ec tab 40 mg (base equiv)</i>	Tier 1	QL (90 tabs / 30 days); MAIL
PRILOSEC OTC TAB 20MG	Tier 1	OTC, QL (90 tabs / 30 days); MAIL

Ulcer Drugs - Prostaglandins

<i>misoprostol tab 100 mcg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
<i>misoprostol tab 200 mcg</i>	Tier 1	QL (120 tabs / 30 days); MAIL

URINARY ANTI-INFECTIVES

Urinary Anti-infectives

<i>methenamine hippurate tab 1 gm</i>	Tier 1	MAIL
MONUROL PAK GRANULES	Tier 3	MAIL
<i>nitrofurantoin macrocrystalline cap 50 mg</i>	Tier 1	QL (60 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	Tier 1	QL (120 caps / 30 days); AGE; MAIL; Covered for ages 64 and under
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	Tier 1	QL (60 ea / 30 days); AGE; MAIL; Covered for ages 64 and under

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Drug Name	Drug Tier	Requirements/Limits
<i>nitrofurantoin susp 25 mg/5ml</i>	Tier 2	QL (Max day supply 10; Max 40 per day); covered for ages 12 and under

URINARY ANTISPASMODICS***Beta-3 Adrenergic Agonists***

MYRBETRIQ TAB 25MG	Tier 3	QL (30 tabs / 30 days); MAIL
MYRBETRIQ TAB 50MG	Tier 3	QL (30 tabs / 30 days); MAIL

Urinary Antispasmodics

<i>flavoxate hcl tab 100 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
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VACCINES***Viral Vaccines***

AFLURIA INJ	PREV	
AFLURIA INJ PF	PREV	
FLUARIX QUAD INJ 2017-18	PREV	
FLUCLVX QUAD INJ 2016-17	PREV	
FLULAVAL QUA INJ 2016-17	PREV	
FLUVIRIN INJ	PREV	
FLUVIRIN INJ PF	PREV	
FLUZONE QUAD INJ	PREV	
PNEUMOVAX 23 INJ 25/0.5	PREV	QL (2 FILLS/LIFETIME)
PREVNAR 13 INJ	PREV	QL (4 FILLS/LIFETIME)
SHINGRIX INJ 50MCG	PREV	QL (2 INJ/LIFETIME); AGE; Covered for ages 50 and over
ZOSTAVAX INJ	PREV	AGE; Covered in ages 50 and older

VAGINAL PRODUCTS***Spermicides***

<i>vcf vaginal gel contrace</i>	PREV	OTC, QL (6 gm / 30 days); MAIL
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Vaginal Anti-infectives

<i>clindamycin phosphate vaginal cream 2%</i>	Tier 1	MAIL
<i>clotrimazole cre 1% vag</i>	Tier 1	OTC; MAIL
<i>clotrimazole cre 2%</i>	Tier 1	OTC; MAIL
<i>clotrimazole cre 3 day</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>clotrimazole vaginal cream 1%</i>	Tier 1	OTC; MAIL
<i>cvs 3-day cre</i>	Tier 1	OTC; MAIL
<i>1-day 6.5% oin monistat</i>	Tier 1	OTC; MAIL
<i>3 day vaginl cre 2%</i>	Tier 1	OTC; MAIL
<i>3 day vaginal cre 4%</i>	Tier 1	OTC; MAIL
<i>metronidazole vaginal gel 0.75%</i>	Tier 1	QL (70 gm / 5 days); MAIL
<i>miconazole 3 cre 4%</i>	Tier 1	OTC; MAIL
<i>miconazole 3 kit 4%</i>	Tier 1	OTC; MAIL
<i>miconazole 3 kit combinat</i>	Tier 1	OTC; MAIL
<i>miconazole 3 kit combo pk</i>	Tier 1	OTC; MAIL
<i>miconazole 7 cre</i>	Tier 1	OTC; MAIL
<i>miconazole 7 cre 2%</i>	Tier 1	OTC; MAIL
<i>miconazole 7 cre tube/kit</i>	Tier 1	OTC; MAIL
<i>miconazole 7 sup 100mg</i>	Tier 1	OTC; MAIL
<i>miconazole nitrate vaginal cream 2%</i>	Tier 1	OTC; MAIL
<i>miconazole nitrate vaginal suppos 100 mg</i>	Tier 1	OTC; MAIL
<i>monistat 7 kit combo pk</i>	Tier 1	OTC; MAIL
<i>ra clotrimaz cre 3</i>	Tier 1	OTC; MAIL
<i>sm micon 7 sup 100mg</i>	Tier 1	OTC; MAIL
<i>terconazole vaginal cream 0.4%</i>	Tier 1	MAIL
<i>terconazole vaginal cream 0.8%</i>	Tier 1	MAIL
<i>terconazole vaginal suppos 80 mg</i>	Tier 1	QL (30 supp / 30 days); MAIL
<i>tioconazole oin 6.5% vag</i>	Tier 1	OTC; MAIL
<i>vagistat-3 kit combo pk</i>	Tier 1	OTC; MAIL
<i>vandazole gel 0.75%</i>	Tier 1	QL (70 gm / 5 days); MAIL

Vaginal Estrogens

<i>estradiol vaginal cream 0.1 mg/gm</i>	Tier 1	QL (42.5 gm / 25 days); MAIL
PREMARIN VAG CRE 0.625MG	Tier 2	MAIL
<i>yuvaferm tab 10mcg</i>	Tier 2	QL (60 tabs / 30 days); MAIL

VASOPRESSORS**Anaphylaxis Therapy Agents**

EPIPEN 2-PAK INJ 0.3MG	Tier 2	MAIL
EPIPEN-JR INJ 0.15MG	Tier 2	MAIL

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Drug Name	Drug Tier	Requirements/Limits
Vasopressors		
<i>midodrine hcl tab 2.5 mg</i>	Tier 1	QL (480 ea / 30 days); MAIL
<i>midodrine hcl tab 5 mg</i>	Tier 1	QL (240 ea / 30 days); MAIL
<i>midodrine hcl tab 10 mg</i>	Tier 1	QL (120 tabs / 30 days); MAIL
VITAMINS		
Oil Soluble Vitamins		
<i>bio-d-mulsio liq 400unit</i>	Tier 1	OTC, QL (30 mL / 30 days); MAIL; Covered for ages 65 and over
<i>cholecalciferol cap 1000 unit</i>	Tier 1	OTC, QL (30 caps / 30 days); MAIL
<i>cholecalciferol cap 2000 unit</i>	Tier 1	OTC, QL (30 caps / 30 days); MAIL
<i>cholecalciferol chew tab 1000 unit</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>cholecalciferol drops 5000 unit/ml (1000 unit/0.2ml)</i>	Tier 1	OTC, QL (180 mL / 30 days); MAIL
<i>cholecalciferol oral liquid 400 unit/ml</i>	Tier 1	OTC, QL (180 mL / 30 days); MAIL
<i>cholecalciferol tab 400 unit</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>cholecalciferol tab 1000 unit</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>cholecalciferol tab 2000 unit</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>cvs d3 cap 2000unit</i>	Tier 1	OTC, QL (30 caps / 30 days); MAIL
<i>d3 max st dro 5000unit</i>	Tier 1	OTC, QL (180 mL / 30 days); MAIL
<i>d 1000 chw 1000unit</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>ergocalciferol cap 50000 unit</i>	Tier 1	QL (180 caps / 30 days); MAIL
<i>ergocalciferol cap 50000 unit</i>	Tier 1	QL (180 ea / 30 days); MAIL
MEPHYTON TAB 5MG	Tier 2	QL (150 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>phytonadione tab 5 mg</i>	Tier 2	QL (150 ea / 30 days); MAIL
<i>vitamin d3 cap 2000 unt</i>	Tier 1	OTC, QL (30 ea / 30 days); MAIL
<i>vitamin d3 cap 2000unit</i>	Tier 1	OTC, QL (30 caps / 30 days); MAIL
<i>vitamin d3 cap 5000unit</i>	Tier 1	OTC, QL (30 caps / 30 days); MAIL
<i>vitamin d3 cap 10000unt</i>	Tier 1	OTC, QL (30 caps / 30 days); MAIL
<i>vitamin d3 cap 50000unt</i>	Tier 1	OTC, QL (30 caps / 30 days); MAIL
<i>vitamin d3 chw 400unit</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>vitamin d3 dro 400unit</i>	Tier 1	OTC, QL (180 mL / 30 days); MAIL
<i>vitamin d3 tab 400unit</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>vitamin d3 tab 1000unit</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>vitamin d3 tab 5000unit</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>vitamin d cap 1000unit</i>	Tier 1	OTC, QL (30 caps / 30 days); MAIL
<i>vitamin d tab 2000unit</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
<i>vitamin d tab 5000iu</i>	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
Water Soluble Vitamins		
<i>ascorbic acid tab 500 mg</i>	Tier 1	OTC; MAIL
<i>b6 natural tab 100mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>cvs b6 tab 100mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>endur-acin tab 250mg sr</i>	Tier 1	OTC; MAIL
<i>endur-acin tab 500mg sr</i>	Tier 1	OTC; MAIL
<i>eql b-6 tab 100mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>gnp niacin tab 250mg</i>	Tier 1	OTC; MAIL
<i>gnp niacin tab 250mg tr</i>	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>gnp vit b-6 tab 100mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>hm niacin tab 250mg</i>	Tier 1	OTC; MAIL
<i>hm vit b6 tab 100mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>neuro-k-50 tab</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>niacin cap er 250 mg</i>	Tier 1	OTC; MAIL
<i>niacin cap er 500 mg</i>	Tier 1	OTC; MAIL
<i>niacin tab 50 mg</i>	Tier 1	OTC; MAIL
<i>niacin tab 100 mg</i>	Tier 1	OTC; MAIL
<i>niacin tab 250 mg</i>	Tier 1	OTC; MAIL
<i>niacin tab 500 mg</i>	Tier 1	OTC; MAIL
<i>niacin tab er 250 mg</i>	Tier 1	OTC; MAIL
<i>niacin tab er 500 mg</i>	Tier 1	OTC; MAIL
<i>niacin tab er 750 mg</i>	Tier 1	OTC; MAIL
<i>niacin-50 tab</i>	Tier 1	OTC; MAIL
<i>niacinamide tab 500 mg</i>	Tier 1	OTC; MAIL
<i>pyridoxine hcl tab 25 mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>pyridoxine hcl tab 50 mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>pyridoxine hcl tab 100 mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>pyridoxine hcl tab er 200 mg</i>	Tier 1	OTC; MAIL
<i>ra niacin tab 100mg</i>	Tier 1	OTC; MAIL
<i>ra niacin tab 500mg</i>	Tier 1	OTC; MAIL
<i>ra vit b-6 tab 50mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>ra vit b-6 tab 100mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>ra vit b-6 tab 200mg tr</i>	Tier 1	OTC; MAIL
<i>riboflavin tab 100 mg</i>	Tier 1	OTC; MAIL
<i>slo-niacin tab 250mg cr</i>	Tier 1	OTC; MAIL
<i>sm niacin tab 250mg cr</i>	Tier 1	OTC; MAIL
<i>sm vit b6 tab 100mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
<i>sm vit b-6 tab 100mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
<i>thiamine hcl tab 50 mg</i>	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
<i>thiamine hcl tab 100 mg</i>	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
<i>thiamine hcl tab 250 mg</i>	Tier 1	OTC; MAIL
<i>yl vit b-6 tab 100mg</i>	Tier 1	OTC, QL (120 tabs / 30 days); MAIL

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acid control tab 10mg	256
acid control tab 150mg	256
acid control tab 20mg	256
acid control tab 75mg	256
acid gone chw.....	29
acid gone sus	29
acid reducer tab 10mg	256
acid reducer tab 150mg	257
acid reducer tab 200mg	257
acid reducer tab 20mg	256
acid reducer tab 75mg	256
ACNE MEDICAT LOT 10%	137
ACNE MEDICAT LOT 5%.....	137
ACTEMRA INJ 162/0.9	8
ACTEMRA INJ 200/10ML.....	9
ACTEMRA INJ 400/20ML.....	9
ACTEMRA INJ 80MG/4ML.....	8
actical cap.....	199
ACTIMMUNE INJ 2MU/0.5	90
acyclovir cap 200 mg.....	107
acyclovir oint 5%	144

<i>acyclovir susp 200 mg/5ml</i>	107	<i>mg/3ml)</i>	40
<i>acyclovir tab 400 mg</i>	107	<i>albuterol sulfate soln nebu 0.5% (5</i>	
<i>acyclovir tab 800 mg</i>	107	<i>mg/ml)</i>	40
<i>adapalene cream 0.1%</i>	137	<i>albuterol sulfate soln nebu 0.63 mg/3ml</i>	
<i>adapalene gel 0.1%</i>	137	<i>(base equiv)</i>	40
<i>adapalene gel 0.3%</i>	137	<i>albuterol sulfate soln nebu 1.25 mg/3ml</i>	
<i>adapalene lotion 0.1%</i>	137	<i>(base equiv)</i>	40
<i>ADCIRCA TAB 20MG</i>	117	<i>albuterol sulfate syrup 2 mg/5ml</i>	40
<i>addaprin tab 200mg</i>	9	<i>albuterol sulfate tab 4 mg</i>	40
<i>adefovir dipivoxil tab 10 mg</i>	106	<i>alclometasone dipropionate cream 0.05%</i>	
<i>advanced sus antacid</i>	29	.....	144
<i>advanced tab formula</i>	199	<i>alclometasone dipropionate oint 0.05%</i>	
<i>ADVATE INJ 1000UNIT</i>	165	.....	145
<i>ADVATE INJ 1500UNIT</i>	165	<i>ALCOHOL SWABS</i>	187
<i>ADVATE INJ 2000UNIT</i>	165	<i>ALDACTAZIDE TAB 50/50</i>	154
<i>ADVATE INJ 250UNIT</i>	165	<i>alendronate sodium tab 10 mg</i>	156
<i>ADVATE INJ 3000UNIT</i>	165	<i>alendronate sodium tab 35 mg</i>	156
<i>ADVATE INJ 4000UNIT</i>	165	<i>alendronate sodium tab 40 mg</i>	156
<i>ADVATE INJ 500UNIT</i>	165	<i>alendronate sodium tab 5 mg</i>	156
<i>advil jr st tab 100mg</i>	9	<i>alendronate sodium tab 70 mg</i>	156
<i>advil jr str chw 100mg</i>	9	<i>aler-cap cap 25mg</i>	66
<i>AEROSPAN AER 80MCG</i>	39	<i>ALER-DRYL TAB 50MG</i>	66
<i>af spry powd aer 1%</i>	140	<i>alertab tab 25mg</i>	66
<i>afeditab tab 30mg cr</i>	113	<i>alfuzosin hcl tab er 24hr 10 mg</i>	164
<i>afeditab tab 60mg cr</i>	113	<i>all day allg sol 1mg/ml</i>	73
<i>AFINITOR DIS TAB 2MG</i>	87	<i>all day allg sol 5mg/5ml</i>	73
<i>AFINITOR DIS TAB 3MG</i>	87	<i>all day allg tab 10mg</i>	73
<i>AFINITOR DIS TAB 5MG</i>	87	<i>all day alrg tab 5-120mg</i>	127
<i>AFINITOR TAB 10MG</i>	87	<i>all day pain tab 220mg</i>	9
<i>AFINITOR TAB 2.5MG</i>	87	<i>all day relf tab 220mg</i>	9
<i>AFINITOR TAB 5MG</i>	87	<i>ALLEGRA ALRG TAB 30MG</i>	73
<i>AFINITOR TAB 7.5MG</i>	87	<i>aller/conges tab 10-240mg</i>	127
<i>AFLURIA INJ</i>	260	<i>aller-chlor syp 2mg/5ml</i>	65
<i>AFLURIA INJ PF</i>	260	<i>allerclear d tab 10-240mg</i>	127
<i>afrin saline spr 0.65%</i>	223	<i>allerclear d tab 5-120mg</i>	127
<i>ak-poly-bac oin op</i>	228	<i>allerclear tab 10mg</i>	73
<i>akwa tears oin op</i>	226	<i>allerclear tab d-24hr</i>	127
<i>al12 lot 12%</i>	150	<i>aller-ease tab 60mg</i>	73
<i>ala-cort cre 1%</i>	144	<i>allergy 25mg tab dye-free</i>	66
<i>alavert alrg tab /sinus</i>	127	<i>allergy 4 hr tab 4mg</i>	65
<i>alavert tab 10mg</i>	73	<i>allergy cap 25mg</i>	66
<i>alaway child dro 0.025%op</i>	230	<i>allergy chld liq 12.5/5ml</i>	67
<i>alaway dro 0.025%op</i>	230	<i>allergy chld sol 1mg/ml</i>	73
<i>albendazole tab 200 mg</i>	32	<i>allergy comp sol 1mg/ml</i>	73
<i>ALBENZA TAB 200MG</i>	32	<i>allergy cre 2-0.1%</i>	143
<i>albuterol sulfate soln nebu 0.083% (2.5</i>		<i>allergy d tab 5-120mg</i>	127

<i>allergy eye dro 0.025%op</i>	230	<i>almacone dbl sus strength</i>	29
<i>allergy liq 12.5/5ml</i>	67	<i>almacone sus</i>	29
<i>allergy med cap 25mg</i>	67	<i>alogliptin benzoate tab 12.5 mg (base equiv)</i>	58
<i>allergy med liq 12.5/5ml</i>	67	<i>alogliptin benzoate tab 25 mg (base equiv)</i>	58
<i>allergy medi tab 25mg</i>	67	<i>alogliptin benzoate tab 6.25 mg (base equiv)</i>	58
<i>allergy rel elx 12.5/5ml</i>	67	<i>alogliptin-metformin hcl tab 12.5-1000 mg</i>	54
<i>allergy rel sol 1mg/ml</i>	74	<i>alogliptin-metformin hcl tab 12.5-500 mg</i>	54
<i>allergy rel tab 10mg</i>	74	<i>alogliptin-pioglitazone tab 12.5-15 mg</i>	55
<i>allergy rel tab 25mg</i>	67	<i>alogliptin-pioglitazone tab 12.5-30 mg</i>	55
<i>allergy rel/ tab deconges</i>	127	<i>alogliptin-pioglitazone tab 12.5-45 mg</i>	55
<i>allergy relf cap 25mg</i>	67	<i>alogliptin-pioglitazone tab 25-15 mg...</i>	55
<i>allergy relf liq 12.5/5ml</i>	67	<i>alogliptin-pioglitazone tab 25-30 mg...</i>	55
<i>allergy relf liq 50/20ml</i>	67	<i>alogliptin-pioglitazone tab 25-45 mg...</i>	55
<i>allergy relf sol 5mg/5ml</i>	74	<i>alophen tab 5mg ec</i>	180
<i>allergy relf syp 5mg/5ml</i>	74	<i>ALPHANINE SD INJ 1500UNIT</i>	165
<i>allergy relf tab /congest</i>	127	<i>ALPHANINE SD INJ 500UNIT</i>	165
<i>allergy relf tab 1.34mg</i>	67	<i>alprazolam tab 0.25 mg</i>	36
<i>allergy relf tab 10mg</i>	74	<i>alprazolam tab 0.5 mg</i>	36
<i>allergy relf tab 12mg cr</i>	65	<i>alprazolam tab 1 mg</i>	36
<i>allergy relf tab 25mg</i>	67	<i>alprazolam tab 2 mg</i>	36
<i>allergy relf tab 4mg</i>	65	<i>ALPROLIX INJ 1000UNIT</i>	165
<i>allergy relf tab 5-120mg</i>	127	<i>ALPROLIX INJ 2000UNIT</i>	165
<i>allergy relf tab 60mg</i>	74	<i>ALPROLIX INJ 250UNIT</i>	165
<i>allergy relf tab d</i>	127	<i>ALPROLIX INJ 3000UNIT</i>	165
<i>allergy relf tab d 24 hr</i>	127	<i>ALPROLIX INJ 4000UNIT</i>	165
<i>allergy relf tab d12</i>	127	<i>ALPROLIX INJ 500UNIT</i>	165
<i>allergy relf tab d-24</i>	128	<i>ALTABAX OIN 1%</i>	139
<i>allergy relf tab deconges</i>	128	<i>altachlore oin 5% op</i>	230
<i>allergy tab 25mg</i>	67	<i>altachlore sol 5% op</i>	230
<i>allergy tab 4mg</i>	65	<i>altalube oin</i>	226
<i>allergy/cong tab 5-120mg</i>	128	<i>altamist spr 0.65%</i>	223
<i>allergy-d tab 5-120mg</i>	128	<i>altarussin syp 100/5ml</i>	133
<i>allergy-time tab 4mg</i>	65	<i>altarussn dm syp 100-10/5</i>	128
<i>allerhist-1 tab 1.34mg</i>	68	<i>altaryl syp 12.5/5ml</i>	68
<i>aller-tec d tab 5-120mg</i>	127	<i>altavera tab</i>	119
<i>aller-tec sol 1mg/ml</i>	73	<i>alum & mag hydroxide-simethicone susp 500-450-40 mg/5ml</i>	29
<i>aller-tec tab 10mg</i>	73	<i>alyacen tab 1/35</i>	119
<i>allgy comp-d tab 5-120mg</i>	128	<i>alyacen tab 7/7/7</i>	119
<i>allopurinol tab 100 mg</i>	164	<i>amantadine hcl cap 100 mg</i>	91
<i>allopurinol tab 300 mg</i>	164	<i>amantadine hcl syrup 50 mg/5ml</i>	91
<i>allrgy melts tab 12.5mg</i>	68		
<i>allrgy rel d tab 10-240mg</i>	128		
<i>allrgy relf tab 12.5mg</i>	68		
<i>allrgy relf tab 5-120mg</i>	128		
<i>allrgy rlf-d tab 5-120mg</i>	128		
<i>almacone chw</i>	29		

<i>amethia tab</i>	119	<i>57 mg/5ml</i>	234
<i>amethyst tab 90-20mcg</i>	119	<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	234
<i>amifostine for inj 500 mg</i>	90	<i>amoxicillin & k clavulanate tab 250-125 mg</i>	234
<i>amikacin sulfate inj 1 gm/4ml (250 mg/ml)</i>	7	<i>amoxicillin & k clavulanate tab 500-125 mg</i>	234
<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	154	<i>amoxicillin & k clavulanate tab 875-125 mg</i>	234
<i>amiloride hcl tab 5 mg</i>	155	<i>amoxicillin (trihydrate) cap 250 mg ..</i>	233
<i>aminofen tab 325mg</i>	15	<i>amoxicillin (trihydrate) cap 500 mg ..</i>	233
<i>aminofen tab 500mg</i>	15	<i>amoxicillin (trihydrate) chew tab 125 mg</i>	233
<i>aminophylline inj 25 mg/ml</i>	41	<i>amoxicillin (trihydrate) chew tab 250 mg</i>	233
<i>aminophylline tab 100 mg</i>	41	<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	233
<i>aminophylline tab 200 mg</i>	41	<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	233
<i>amiodarone hcl tab 200 mg</i>	38	<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	233
<i>AMITIZA CAP 24MCG</i>	161	<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	234
<i>AMITIZA CAP 8MCG</i>	161	<i>amoxicillin (trihydrate) tab 500 mg ..</i>	234
<i>amitriptyline hcl tab 10 mg</i>	52	<i>amoxicillin (trihydrate) tab 875 mg ..</i>	234
<i>amitriptyline hcl tab 100 mg</i>	52	<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	1
<i>amitriptyline hcl tab 150 mg</i>	52	<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	1
<i>amitriptyline hcl tab 25 mg</i>	52	<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	1
<i>amitriptyline hcl tab 50 mg</i>	52	<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	1
<i>amitriptyline hcl tab 75 mg</i>	52	<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	1
<i>amlactin lot 12%</i>	150	<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	1
<i>amlodipine besylate tab 10 mg (base equivalent)</i>	113	<i>amphetamine-dextroamphetamine tab 10 mg</i>	1
<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	113	<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	1
<i>amlodipine besylate tab 5 mg (base equivalent)</i>	113	<i>amphetamine-dextroamphetamine tab 15 mg</i>	1
<i>amnestem cap 10mg</i>	137	<i>amphetamine-dextroamphetamine tab 20 mg</i>	1
<i>amnestem cap 20mg</i>	137	<i>amphetamine-dextroamphetamine tab</i>	
<i>amnestem cap 40mg</i>	137		
<i>amoryn mood cap booster</i>	199		
<i>amoxapine tab 100 mg</i>	52		
<i>amoxapine tab 150 mg</i>	52		
<i>amoxapine tab 25 mg</i>	52		
<i>amoxapine tab 50 mg</i>	52		
<i>amoxicillin & k clavulanate chew tab 200-28.5 mg</i>	234		
<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	234		
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	234		
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	234		
<i>amoxicillin & k clavulanate for susp 400-</i>			

30 mg	1	antacid sus reg st.....	29
amphetamine-dextroamphetamine tab 5 mg.....	1	antacid sus ultra st.....	29
amphetamine-dextroamphetamine tab 7.5 mg	1	antacid/gas sus rel max	29
ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm.....	235	antacid/sime sus ds.....	29
ampicillin & sulbactam sodium for iv soln 15 (10-5) gm	235	antibiotic oin.....	139
ampicillin & sulbactam sodium for iv soln 3 (2-1) gm.....	235	antibiotic oin pain rlf.....	139
ampicillin cap 250 mg.....	234	anti-dandruf sha 1%.....	144
ampicillin cap 500 mg.....	234	anti-diarrhe cap 2mg	62
ampicillin for susp 125 mg/5ml.....	234	anti-diarrhe liq 1mg/5ml	62
ampicillin for susp 250 mg/5ml.....	234	anti-diarrhe tab 2mg	62
AMPYRA TAB 10MG	238	antifung pow aer 1%	140
anagrelide hcl cap 0.5 mg	167	antifungal cre 1%.....	140
anagrelide hcl cap 1 mg.....	167	anti-fungal cre 1%	140
anastrozole tab 1 mg	86	antifungal cre 2%.....	140
ANDROXY TAB 10MG.....	28	antifungal cre foot 1%	141
animal chews chw	220	anti-fungal pow 1%	140
animal shape chw	220	anti-fungal pow 2%	140
animal shape chw /iron.....	218	anti-fungal sol 1%.....	140
animal shape chw complete	219	anti-gas cap 180mg.....	160
animal shape chw iron.....	218	anti-hist tab 25mg	68
antacid adv sus max st.....	29	antihistamin dro 0.025%op	230
antacid chw 1000mg	31	anti-itch cre /aloe/e.....	145
antacid chw 500mg.....	31	anti-itch cre /oatmeal	145
antacid chw dbl st.....	29	anti-itch cre 1%	145
antacid extr chw 675-135	29	anti-itch cre 1%pls 10	145
antacid extr chw 750mg	31	anti-itch lot 1%.....	145
antacid fast sus acting	29	anti-itch oin 1%	145
antacid fast sus relief	29	anti-itch oin max st	145
antacid i sus.....	29	anti-itch/ cre aloe.....	145
antacid iii sus	29	anti-nausea liq.....	64
antacid liq sus	29	anti-nausea sol	64
antacid m sus.....	29	anti-nausea sol cherry	64
antacid max chw 1000mg	31	anti-nausea sol liquid.....	64
antacid plus sus anti-gas	29	anti-nausea/ sol rekemat	64
antacid plus sus gas rel	29	antiox form/ cap minerals	199
antacid sus	29	antioxidant cap	199
antacid sus anti-gas	29	antioxidant cap formula	213
antacid sus ex st.....	29	anti-oxidant cap formula	199
antacid sus max st.....	29	anti-oxidant tab	213
antacid sus mint crm	29	anti-oxidant tab plus	199
antacid sus reg.....	29	antioxidant tab protecti.....	199
		antioxidant tab vitamins.....	199
		antioxin cap 4000.....	199
		antipyrine-benzocaine otic soln 54-14 mg/ml (5.4-1.4%).....	232
		APAP 500 LIQ 500/5ML	15

<i>apap dro 80/0.8ml</i>	15	<i>armodafinil tab 250 mg</i>	4
<i>apap melt tab 80mg</i>	15	<i>armodafinil tab 50 mg</i>	4
<i>apap melts tab 160mg</i>	15	ARMOUR THYRO TAB 120MG	250
APOKYN INJ	91	ARMOUR THYRO TAB 15MG	249
APOKYN INJ 10MG/ML	91	ARMOUR THYRO TAB 180MG	250
<i>apra elx 160/5ml</i>	15	ARMOUR THYRO TAB 240MG	250
<i>apraclonidine hcl ophth soln 0.5% (base equivalent)</i>	228	ARMOUR THYRO TAB 300MG	250
<i>aprepitant capsule 125 mg</i>	65	ARMOUR THYRO TAB 30MG	249
<i>aprepitant capsule 40 mg</i>	65	ARMOUR THYRO TAB 60MG	249
<i>aprepitant capsule 80 mg</i>	65	ARMOUR THYRO TAB 90MG	249
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	65	<i>arthrts pain tab 650mg</i>	15
<i>apri tab</i>	119	<i>artifi tears dro</i>	226
APRISO CAP 0.375GM	161	<i>artifi tears dro 1-0.3%</i>	226
APTIVUS CAP 250MG	102	<i>artifi tears oin op</i>	226
APTIVUS SOL	102	<i>artificial dro tears</i>	226
<i>aquadeks dro</i>	219	<i>artificial sol tears</i>	226
<i>aquanil hc lot 1%</i>	145	<i>artificial sol tears op</i>	226
<i>aranelle tab</i>	119	<i>a-s pls alrg tab 25mg</i>	66
ARANESP INJ 100MCG	169	<i>ascorbic acid tab 500 mg</i>	263
ARANESP INJ 150MCG	169	<i>ashlyna tab</i>	119
ARANESP INJ 200MCG	169	<i>aspercreme pad lido 4%</i>	151
ARANESP INJ 25MCG	169	<i>aspirin 81 tab 81mg ec</i>	19
ARANESP INJ 300MCG	169	<i>aspirin chld chw 81mg</i>	19
ARANESP INJ 40MCG	169	<i>aspirin tab 325mg</i>	19
ARANESP INJ 500MCG	169	<i>aspirin tab 81 mg</i>	19
ARANESP INJ 60MCG	169	ASPIRIN TAB 81MG	19
<i>argyl saline sol 0.9%</i>	164	<i>aspirin tab delayed release 325 mg</i>	19
<i>argyl saline sol 100ml</i>	110	<i>aspirin tab delayed release 81 mg</i>	19
<i>aripiprazole oral solution 1 mg/ml</i>	101	<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	167
<i>aripiprazole orally disintegrating tab 10 mg</i>	101	<i>aspir-low tab 81mg ec</i>	19
<i>aripiprazole orally disintegrating tab 15 mg</i>	101	<i>aspirtab tab 324mg ec</i>	19
<i>aripiprazole tab 10 mg</i>	101	ATABEX OB TAB 29-1MG	215
<i>aripiprazole tab 15 mg</i>	101	<i>atazanavir sulfate cap 150 mg (base equiv)</i>	103
<i>aripiprazole tab 2 mg</i>	101	<i>atazanavir sulfate cap 200 mg (base equiv)</i>	103
<i>aripiprazole tab 20 mg</i>	101	<i>atazanavir sulfate cap 300 mg (base equiv)</i>	103
<i>aripiprazole tab 30 mg</i>	101	<i>atenolol & chlorthalidone tab 100-25 mg</i>	81
<i>aripiprazole tab 5 mg</i>	101	<i>atenolol & chlorthalidone tab 50-25 mg</i>	81
ARISTADA INJ 441MG/1.	101	<i>atenolol tab 100 mg</i>	111
ARISTADA INJ 662MG/2	101	<i>atenolol tab 25 mg</i>	111
ARISTADA INJ 882MG/3	101	<i>atenolol tab 50 mg</i>	111
<i>armodafinil tab 150 mg</i>	4		
<i>armodafinil tab 200 mg</i>	4		

<i>ath foot pow aer 1%</i>	141	<i>avidoxy tab 100mg</i>	249
<i>athlete foot aer 1%</i>	141	<i>avita cre 0.025%</i>	137
<i>athlete foot aer 2%</i>	141	<i>avita gel 0.025%</i>	137
<i>athlete foot cre 1%</i>	141	AVONEX KIT 30MCG	238
<i>athlete foot cre af</i>	141	AVONEX PEN KIT 30MCG.....	238
<i>atomoxetine hcl cap 10 mg (base equiv)</i>	3	AVONEX PREFL KIT 30MCG.....	238
<i>atomoxetine hcl cap 100 mg (base equiv)</i>	3	<i>ayr spr 0.65%</i>	223
<i>atomoxetine hcl cap 18 mg (base equiv)</i>	3	<i>azathioprine tab 50 mg</i>	108
<i>atomoxetine hcl cap 25 mg (base equiv)</i>	3	<i>azelaic acid gel 15%</i>	151
<i>atomoxetine hcl cap 40 mg (base equiv)</i>	3	<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	224
<i>atomoxetine hcl cap 60 mg (base equiv)</i>	3	<i>azelastine hcl ophth soln 0.05%</i>	230
<i>atomoxetine hcl cap 80 mg (base equiv)</i>	3	<i>azithromycin for susp 100 mg/5ml</i> ...	185
<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	78	<i>azithromycin for susp 200 mg/5ml</i> ...	185
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	78	<i>azithromycin powd pack for susp 1 gm</i>	185
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	78	<i>azithromycin tab 250 mg</i>	185
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	78	<i>azithromycin tab 500 mg</i>	185
<i>atovaquone susp 750 mg/5ml</i>	33	<i>azithromycin tab 600 mg</i>	185
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	83	<i>azurette tab 28 day</i>	119
<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	83	B	
<i>atropine sul sol 1% op</i>	228	<i>b complex tab vit c</i>	197
<i>atropine sulfate soln prefill syr 0.25 mg/5ml (0.05 mg/ml)</i>	255	<i>b-12 micrloz sub 500mcg</i>	168
<i>atropine sulfate soln prefill syr 0.5 mg/5ml (0.1 mg/ml)</i>	255	<i>b-12 tr tab 1000 mcg</i>	168
<i>atropine sulfate soln prefill syr 1 mg/10ml (0.1 mg/ml)</i>	255	<i>b-12-sl sub 1000mcg</i>	168
ATROVENT HFA AER 17MCG	39	<i>b6 natural tab 100mg</i>	263
<i>aubra tab 0.1-0.02</i>	119	<i>baby ayr spr 0.65%</i>	223
AUGMENTIN SUS 125/5ML	235	<i>bacitracin oin 500/gm</i>	139
<i>auraphene-b sol 6.5% ot</i>	231	<i>bacitracin oint 500 unit/gm</i>	139
<i>aurodex sol otic</i>	232	<i>bacitracin ophth oint 500 unit/gm</i> ...	229
<i>aveeno cre 1%</i>	145	<i>bacitracin zinc oint 500 unit/gm</i>	139
<i>aviane tab</i>	119	<i>bacitracin-polymyxin b ophth oint</i> ...	229
		<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	229
		<i>bacitraycin oin 500/gm</i>	139
		<i>baclofen tab 10 mg</i>	222
		<i>baclofen tab 20 mg</i>	222
		BACTROBAN OIN NASAL 2%.....	224
		<i>balsalazide disodium cap 750 mg</i>	161
		<i>balziva tab</i>	119
		<i>banophen cap 25mg</i>	68
		<i>banophen cap 50mg</i>	68
		<i>banophen liq 12.5/5ml</i>	68
		<i>banophen tab 25mg</i>	68
		BANZEL SUS 40MG/ML	44
		BANZEL TAB 200MG	44

BANZEL TAB 400MG.....	44	<i>best fiber pow.....</i>	174
BAQSIMI ONE POW 3MG/DOSE.....	56	<i>beta hc lot 1%.....</i>	145
BARACLUDE SOL .05MG/ML	106	<i>betamethasone dipropionate augmented cream 0.05%.....</i>	145
BASAGLAR KWIKPEN.....	58	<i>betamethasone dipropionate augmented gel 0.05%</i>	145
<i>bayer adv tab 325mg</i>	19	<i>betamethasone dipropionate augmented lotion 0.05%</i>	145
<i>bayer asa tab 325mg</i>	19	<i>betamethasone dipropionate augmented oint 0.05%.....</i>	145
<i>bayer low chw 81mg</i>	20	<i>betamethasone dipropionate cream 0.05%</i>	145
<i>baza antifun cre 2%.....</i>	141	<i>betamethasone dipropionate lotion 0.05%</i>	145
<i>b-complex tab balanced.....</i>	197	<i>betamethasone dipropionate oint 0.05%.....</i>	145
<i>b-complex w/ c & folic acid tab</i>	197	<i>betamethasone dipropionate cream 0.05%</i>	145
BD U-500 MIS 31GX6MM	188	<i>betamethasone dipropionate lotion 0.05%</i>	145
<i>bdy/hair/skn cap nails</i>	199	<i>betamethasone dipropionate oint 0.05%</i>	145
BE WELL PAK ROUNDED	215	<i>betamethasone valerate cream 0.1% (base equivalent)</i>	145
<i>bedding spra aer 0.5%</i>	152	<i>betamethasone valerate oint 0.1% (base equivalent).....</i>	145
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	82	<i>betasept liq 4%</i>	102
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	82	<i>betatemp sus 160/5ml.....</i>	15
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	82	<i>betaxolol hcl ophth soln 0.5%.....</i>	228
<i>benazepril & hydrochlorothiazide tab 5-6.25 mg</i>	81	<i>bethanechol chloride tab 10 mg</i>	163
<i>benazepril hcl tab 10 mg</i>	79	<i>bethanechol chloride tab 25 mg</i>	163
<i>benazepril hcl tab 20 mg</i>	79	<i>bethanechol chloride tab 5 mg</i>	163
<i>benazepril hcl tab 40 mg</i>	79	<i>bethanechol chloride tab 50 mg</i>	163
<i>benazepril hcl tab 5 mg</i>	79	<i>bicalutamide tab 50 mg</i>	86
BENEFIX INJ 1000UNIT	165	<i>bidex tab 400mg.....</i>	134
BENEFIX INJ 2000UNIT	165	BIKTARVY TAB.....	102
BENEFIX INJ 250UNIT	165	BILTRICIDE TAB 600MG.....	32
BENEFIX INJ 3000UNIT	165	<i>bimatoprost ophth soln 0.03%.....</i>	231
BENEFIX INJ 500UNIT	165	<i>biocel tab</i>	199
<i>benzonatate cap 100 mg</i>	126	<i>biocotron liq 100-10/5</i>	128
<i>benzonatate cap 200 mg</i>	126	<i>bio-d-mulsio liq 400unit</i>	262
<i>benzoyl per liq 10% wash</i>	137	<i>bion tears sol op</i>	226
<i>benzoyl per liq 5% wash.....</i>	137	<i>biotin plus/ tab cal/vitd</i>	199
<i>benzoyl peroxide gel 10%.....</i>	137	<i>bisac-evac sup 10mg.....</i>	180
<i>benzoyl peroxide gel 5%.....</i>	137	<i>bisacodyl sup 10mg.....</i>	180
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	137	<i>bisacodyl tab 5mg ec.....</i>	180
<i>benztropine mesylate tab 0.5 mg.....</i>	91	<i>biscolax sup 10mg.....</i>	180
<i>benztropine mesylate tab 1 mg</i>	91	<i>bismatrol chw 262mg</i>	61
<i>benztropine mesylate tab 2 mg</i>	91	<i>bismatrol sus 262/15ml</i>	61
BENZYL ALC LIQ.....	235	<i>bismatrol sus 525/15ml</i>	61
BENZYL BENZO LIQ.....	119	<i>bismuth subsalicylate chew tab 262 mg</i>	61
BERINERT INJ 500UNIT	119		
BESIVANCE SUS 0.6%.....	229		

<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	82
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	82
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	82
<i>bisoprolol fumarate tab 10 mg</i>	111
<i>bisoprolol fumarate tab 5 mg</i>	111
<i>bite-a-mins chw</i>	220
<i>bite-a-mins chw /iron</i>	218
<i>blis-to-sol liq 1%</i>	141
<i>bounty bears chw /c</i>	220
<i>b-plex plus tab</i>	199
<i>b-plex tab</i>	197
<i>bprotected liq multi-vi</i>	199
BRAINSTRONG MIS PRENATAL	215
<i>b-redi/rd hr tab ts/rd ro</i>	199
BREO ELLIPTA INH 100-25	40
BREO ELLIPTA INH 200-25	40
<i>briellyn tab</i>	119
BRILINTA TAB 90MG	167
<i>brimonidine tartrate ophth soln 0.15%</i>	228
<i>brimonidine tartrate ophth soln 0.2%</i>	228
<i>bromfed dm syp</i>	128
<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i>	228
<i>bromocriptine mesylate cap 5 mg (base equivalent)</i>	91
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	91
<i>brotapp dm liq 15-1-5/5</i>	128
<i>brotapp liq</i>	128
<i>buckleys liq chest</i>	134
<i>budesonide delayed release particles cap 3 mg</i>	125
<i>budesonide inhalation susp 0.25 mg/2ml</i>	39
<i>budesonide inhalation susp 0.5 mg/2ml</i>	39
<i>bumetanide tab 0.5 mg</i>	154
<i>bumetanide tab 1 mg</i>	155
<i>bumetanide tab 2 mg</i>	155
<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	27
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	27
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	27
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	27
<i>buprenorphine td patch weekly 10 mcg/hr</i>	27
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	238
<i>bupropion hcl tab 100 mg</i>	49
<i>bupropion hcl tab 75 mg</i>	49
<i>bupropion hcl tab er 12hr 100 mg</i>	49
<i>bupropion hcl tab er 12hr 150 mg</i>	49
<i>bupropion hcl tab er 12hr 200 mg</i>	49
<i>bupropion hcl tab er 24hr 150 mg</i>	49
<i>bupropion hcl tab er 24hr 300 mg</i>	49
<i>buspirone hcl tab 10 mg</i>	35
<i>buspirone hcl tab 15 mg</i>	35
<i>buspirone hcl tab 5 mg</i>	35
<i>buspirone hcl tab 7.5 mg</i>	35
<i>busulfan inj 6 mg/ml</i>	85
<i>butalbital tab cpd</i>	14
<i>butalbital-acetaminophen tab 50-325 mg</i>	14
<i>butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg</i>	26
<i>butalbital-acetaminophen-caffeine cap 50-325-40 mg</i>	14
<i>butalbital-acetaminophen-caffeine tab 50-325-40 mg</i>	14
<i>butalbital-aspirin-caffeine cap 50-325-40 mg</i>	14
<i>butalbital-aspirin-caffeine tab 50-325-40 mg</i>	14
BUTRANS DIS 10MCG/HR	27
BYETTA INJ 10MCG	58
BYETTA INJ 5MCG	58
BYVALSON TAB 5-80MG	82
C	
<i>ca citrate + tab</i>	189
<i>ca citrate tab plus d</i>	189
<i>cabergoline tab 0.5 mg</i>	158
<i>caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)</i>	3
<i>cal antacid chw 1000mg</i>	31
<i>calc 600+d tab 600-800</i>	189

<i>calc antacid chw 1000mg</i>	31	<i>tab 500 mg-100 unit</i>	190
<i>calc antacid chw 500mg</i>	31	<i>calcium carbonate-cholecalciferol tab 250</i>	
<i>calc antacid chw 750mg</i>	31	<i>mg-125 unit</i>	190
<i>calc cit+d3 tab 250-200</i>	189	<i>calcium carbonate-cholecalciferol tab 500</i>	
<i>calc citr/d3 tab 200-250</i>	189	<i>mg-125 unit</i>	190
<i>calc citr+d3 tab 200-250</i>	189	<i>calcium carbonate-cholecalciferol tab 500</i>	
<i>calc citrate tab +d</i>	189	<i>mg-400 unit</i>	190
<i>calcarb/d tab 600</i>	189	<i>calcium carbonate-cholecalciferol tab 600</i>	
<i>calcipotriene oint 0.005%</i>	144	<i>mg-200 unit</i>	190
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>		<i>calcium carbonate-cholecalciferol tab 600</i>	
.....	144	<i>mg-400 unit</i>	190
<i>calcitonin (salmon) nasal soln 200</i>		<i>calcium carbonate-ergocalciferol tab</i>	
<i>unit/act</i>	156	<i>500mg-200 unit</i>	190
<i>calcitrate tab</i>	189	<i>calcium carbonate-vitamin d cap 600</i>	
<i>calcitrate tab 950mg</i>	189	<i>mg-200 unit</i>	190
<i>calcitrene oin 0.005%</i>	144	<i>calcium carbonate-vitamin d tab 250 mg-</i>	
<i>calcitriol cap 0.25 mcg</i>	157	<i>125 unit</i>	190
<i>calcitriol cap 0.5 mcg</i>	157	<i>calcium carbonate-vitamin d tab 500 mg-</i>	
<i>calcium + d tab</i>	190	<i>125 unit</i>	190
<i>calcium + d tab 600-200</i>	190	<i>calcium carbonate-vitamin d tab 500 mg-</i>	
<i>calcium +d tab maximum</i>	190	<i>200 unit</i>	190
<i>calcium +d3 tab maximum</i>	190	<i>calcium carbonate-vitamin d tab 500 mg-</i>	
<i>calcium 500 tab /vit d</i>	189	<i>400 unit</i>	190
<i>calcium 500 tab +d</i>	189	<i>calcium carbonate-vitamin d tab 600 mg-</i>	
<i>calcium 600 chw +d/miner</i>	189	<i>125 unit</i>	190
<i>CALCIUM 600 CHW +D/MINER</i>	189	<i>calcium carbonate-vitamin d tab 600 mg-</i>	
<i>calcium 600 chw +d/mnrsls</i>	189	<i>200 unit</i>	191
<i>calcium 600 chw w/vit d</i>	189	<i>calcium carbonate-vitamin d tab 600 mg-</i>	
<i>calcium 600 tab</i>	189	<i>400 unit</i>	191
<i>calcium 600 tab + d</i>	189	<i>calcium carb-vit d w/ minerals chew tab</i>	
<i>calcium 600 tab +d3</i>	189	<i>600 mg-400 unit</i>	190
<i>calcium 600 tab -d</i>	189	<i>calcium citr tab +d</i>	191
<i>calcium 600/ tab vit d</i>	189	<i>calcium citr tab plus d-3</i>	191
<i>calcium acetate (phosphate binder) cap</i>		<i>calcium citr tab w/vit d3</i>	191
<i>667 mg (169 mg ca)</i>	162	<i>calcium citrate tab 950 mg (200 mg</i>	
<i>calcium carb tab 1250mg</i>	190	<i>elemental ca)</i>	191
<i>calcium carbonate (antacid) chew tab</i>		<i>calcium citrate-vitamin d tab 200 mg-</i>	
<i>500 mg</i>	31	<i>250 unit (elemental ca)</i>	191
<i>calcium carbonate (antacid) susp 1250</i>		<i>calcium citrate-vitamin d tab 315 mg-</i>	
<i>mg/5ml</i>	190	<i>200 unit (elemental ca)</i>	191
<i>calcium carbonate (antacid) tab 648 mg</i>		<i>calcium citrate-vitamin d tab 315 mg-</i>	
.....	31	<i>250 unit (elemental ca)</i>	191
<i>calcium carbonate tab 1250 mg (500 mg</i>		<i>calcium tab 500/d</i>	191
<i>elemental ca)</i>	190	<i>calcium tab 500+d</i>	191
<i>calcium carbonate tab 600 mg</i>	190	<i>calcium tab 600mg</i>	191
<i>calcium carbonate-cholecalciferol chew</i>		<i>calcium tab vit d</i>	191

<i>calcium w/ vitamin d tab 600 mg-200 unit</i>	191	<i>carbamazepine tab er 12hr 100 mg</i>	45
<i>calcium/d chw 500-400</i>	191	<i>carbamazepine tab er 12hr 200 mg</i>	45
<i>calcium/d tab 500-200</i>	191	<i>carbamazepine tab er 12hr 400 mg</i>	45
<i>calcium/d tab 600-800</i>	191	<i>carbidopa & levodopa tab 10-100 mg .</i>	91
<i>calcium/d3 cap 600-500</i>	191	<i>carbidopa & levodopa tab 25-100 mg .</i>	91
<i>calcium/d3 tab</i>	191	<i>carbidopa & levodopa tab 25-250 mg .</i>	91
<i>calcium/d3 tab 600-800</i>	191	<i>carbidopa & levodopa tab er 25-100 mg</i>	
<i>calcium+d3 tab 600-400</i>	191	.....	91, 92
<i>calcium+d3 tab 600-800</i>	191	<i>carbidopa & levodopa tab er 50-200 mg</i>	
<i>calcium-magnesium-zinc tab 333-133-5 mg</i>	191	.....	92
<i>cal-gest chw 500mg</i>	31	<i>carbidopa tab 25 mg</i>	90
<i>CALNA TAB</i>	215	<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	92
<i>caltrate 600 chw 600-800</i>	191	<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	92
<i>caltrate 600 tab</i>	191	<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	92
<i>calvite p&d tab</i>	191	<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	92
<i>camila tab 0.35mg</i>	124	<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	92
<i>camrese tab</i>	119	<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	92
<i>capacet cap</i>	14	<i>carbinoxamine maleate soln 4 mg/5ml</i>	68
<i>capecitabine tab 150 mg</i>	85	<i>carbinoxamine maleate tab 4 mg</i>	68
<i>capecitabine tab 500 mg</i>	85	<i>CARIMUNE NF INJ 12GM</i>	232
<i>CAPMIST DM TAB</i>	128	<i>carravite tab</i>	199
<i>CAPRELSA TAB 100MG</i>	87	<i>carteolol hcl ophth soln 1%</i>	228
<i>CAPRELSA TAB 300MG</i>	87	<i>carters tab 5mg ec</i>	180
<i>capsaicin cream 0.025%</i>	151	<i>cartia xt cap 180/24hr</i>	113
<i>capsaicin cream 0.1%</i>	151	<i>cartia xt cap 240/24hr</i>	113
<i>captopril & hydrochlorothiazide tab 25-15 mg</i>	82	<i>cartia xt cap 300/24hr</i>	113
<i>captopril & hydrochlorothiazide tab 25-25 mg</i>	82	<i>carvedilol tab 12.5 mg</i>	110
<i>captopril & hydrochlorothiazide tab 50-15 mg</i>	82	<i>carvedilol tab 25 mg</i>	110
<i>captopril & hydrochlorothiazide tab 50-25 mg</i>	82	<i>carvedilol tab 3.125 mg</i>	110
<i>captopril tab 100 mg</i>	79	<i>carvedilol tab 6.25 mg</i>	110
<i>captopril tab 12.5 mg</i>	79	<i>cavarest gel 1.1%</i>	197
<i>captopril tab 25 mg</i>	79	<i>CAYSTON INH 75MG</i>	32
<i>captopril tab 50 mg</i>	79	<i>caziant pak</i>	119
<i>CARAFATE SUS 1GM/10ML</i>	258	<i>cefaclor cap 250 mg</i>	117
<i>carbamazepine cap er 12hr 100 mg</i>	45	<i>cefaclor for susp 125 mg/5ml</i>	117
<i>carbamazepine cap er 12hr 200 mg</i>	45	<i>cefaclor for susp 250 mg/5ml</i>	117
<i>carbamazepine cap er 12hr 300 mg</i>	45	<i>cefadroxil for susp 250 mg/5ml</i>	117
<i>carbamazepine chew tab 100 mg</i>	45	<i>cefadroxil for susp 500 mg/5ml</i>	117
<i>carbamazepine susp 100 mg/5ml</i>	45	<i>cefazolin sodium for inj 1 gm</i>	117
<i>carbamazepine tab 200 mg</i>	45	<i>cefazolin sodium for inj 20 gm</i>	117

<i>cefazolin sodium for inj 500 mg</i>	117	<i>centavite liq</i>	199
<i>cefdinir cap 300 mg</i>	118	<i>central-vite tab mens mat</i>	200
<i>cefdinir for susp 125 mg/5ml</i>	118	<i>central-vite tab wmns mat</i>	200
<i>cefdinir for susp 250 mg/5ml</i>	118	<i>centravites tab</i>	200
<i>cefditoren pivoxil tab 200 mg (base equivalent)</i>	118	<i>centravites tab 50 plus</i>	200
<i>cefditoren pivoxil tab 400 mg (base equivalent)</i>	118	<i>centrum kids chw complete</i>	219
<i>cefixime for susp 100 mg/5ml</i>	118	CENTRUM SPEC PAK PRENATAL.....	215
<i>cefixime for susp 200 mg/5ml</i>	118	<i>century tab</i>	200
CEFOTAN INJ 10G/100M	117	<i>century tab mature</i>	200
CEFOTAN INJ 1GM/10ML.....	117	<i>cephalexin cap 250 mg</i>	117
CEFOTAN INJ 2GM/20ML.....	117	<i>cephalexin cap 500 mg</i>	117
<i>cefotaxime sodium for inj 1 gm</i>	118	<i>cephalexin for susp 125 mg/5ml</i>	117
<i>cefotaxime sodium for inj 10 gm</i>	118	<i>cephalexin for susp 250 mg/5ml</i>	117
<i>cefotaxime sodium for inj 2 gm</i>	118	<i>cerovite jr chw</i>	219
<i>cefotaxime sodium for inj 500 mg</i>	118	<i>cerovite tab advanced</i>	200
CEFOTET/DEX INJ 1-3.58%.....	117	<i>cerovite tab senior</i>	200
CEFOTET/DEX INJ 2-2.08%.....	117	<i>certa plus tab</i>	200
CEFOTETAN DISODIUM FOR INJ 1 GM	118	<i>certagen tab</i>	200
CEFOTETAN DISODIUM FOR INJ 10 GM	118	<i>certavite liq antioxid</i>	200
CEFOTETAN DISODIUM FOR INJ 2 GM	118	<i>certavite/ tab antioxid</i>	200
<i>cefoxitin sodium for inj 10 gm</i>	118	<i>cesia pak</i>	120
<i>cefoxitin sodium for iv soln 1 gm</i>	118	<i>cetirizine hcl tab 10 mg</i>	74
<i>cefoxitin sodium for iv soln 2 gm</i>	118	<i>cetirizine hcl tab 5 mg</i>	74
<i>cefpodoxime proxetil for susp 100 mg/5ml</i>	118	<i>cetirizine sol 5mg/5ml</i>	74
<i>cefpodoxime proxetil for susp 50 mg/5ml</i>	118	<i>cetirizine-pseudoephedrine tab er 12hr 5-120 mg</i>	128
<i>cefpodoxime proxetil tab 100 mg</i>	118	<i>cevimeline hcl cap 30 mg</i>	197
<i>cefpodoxime proxetil tab 200 mg</i>	118	<i>cgh dm max liq 10-200</i>	128
<i>cefprozil for susp 125 mg/5ml</i>	118	CHANTIX PAK 0.5& 1MG	239
<i>cefprozil for susp 250 mg/5ml</i>	118	CHANTIX PAK 1MG	239
<i>ceftibuten cap 400 mg</i>	118	CHANTIX TAB 0.5MG	239
<i>cefuroxime axetil tab 250 mg</i>	118	CHANTIX TAB 1MG	239
<i>cefuroxime axetil tab 500 mg</i>	118	<i>chateal eq tab 0.15/30</i>	120
<i>celecoxib cap 100 mg</i>	9	CHEMET CAP 100MG.....	63
<i>celecoxib cap 200 mg</i>	9	<i>cheratussin syp ac</i>	128
<i>celecoxib cap 400 mg</i>	9	<i>chest conges liq child</i>	134
<i>celecoxib cap 50 mg</i>	9	<i>chest conges liq childrns</i>	134
<i>cent mature tab womn 50+</i>	199	<i>chest conges tab 400mg</i>	134
<i>centamin liq</i>	199	<i>chewabl vite chw childrns</i>	220
<i>centavite az tab minerals</i>	199	<i>child apap tab 80mg</i>	15
		<i>child asa ls chw 81mg</i>	20
		<i>child chew chw iron</i>	218
		<i>child chew chw vitamins</i>	220
		<i>child chew/ chw extra c</i>	220
		<i>child multiv chw iron</i>	218
		<i>child nonasa chw pain/rel</i>	15

<i>child silfed liq 15mg/5ml</i>	224	<i>cholecalciferol drops 5000 unit/ml (1000 unit/0.2ml)</i>	262
<i>child soothe chw 400mg</i>	31	<i>cholecalciferol oral liquid 400 unit/ml</i>	262
<i>child vitam chw</i>	219	<i>cholecalciferol tab 1000 unit</i>	262
<i>children vit chw</i>	220	<i>cholecalciferol tab 2000 unit</i>	262
<i>childrens chw /iron</i>	218	<i>cholecalciferol tab 400 unit</i>	262
<i>childrens chw complete</i>	219	<i>cholestyramine light powder 4 gm/dose</i>	
<i>childrens chw gummies</i>	219	.....	77
<i>childrens chw multivit</i>	219, 220	<i>cholestyramine powder 4 gm/dose</i>	77
<i>childrens chw pepto</i>	31	<i>choline fenofibrate cap dr 45 mg</i>	
<i>childrens chw soothe</i>	31	<i>(fenofibric acid equiv)</i>	77
<i>childrens chw vitamins</i>	220	<i>ciclodan cre 0.77%</i>	141
<i>chld allergy liq 12.5/5ml</i>	68	<i>ciclopirox olamine cream 0.77% (base equiv)</i>	141
<i>chld meditab chw 80mg</i>	15	<i>ciclopirox olamine susp 0.77% (base equiv)</i>	137
<i>chld mltivit chw /mineral</i>	219	<i>ciclopirox solution 8%</i>	137
<i>chld non-asa chw 80mg grp</i>	15	<i>cilostazol tab 100 mg</i>	167
<i>chld pain rl tab 80mg</i>	16	<i>cilostazol tab 50 mg</i>	167
<i>chld silapap liq 160/5ml</i>	16	<i>CIMDUO TAB 300-300</i>	103
<i>chld vitamin chw iron</i>	218	<i>cimetidine hcl soln 300 mg/5ml</i>	257
<i>chlds mapap tab 80mg rt</i>	16	<i>cimetidine tab 200 mg</i>	257
<i>chloral hydrate syrup 500 mg/5ml</i>	173	<i>cimetidine tab 300 mg</i>	257
<i>chloraseptic liq sore thr</i>	16	<i>cimetidine tab 400 mg</i>	257
<i>chlordiazepoxide hcl cap 10 mg</i>	36	<i>cimetidine tab 800 mg</i>	257
<i>chlordiazepoxide hcl cap 25 mg</i>	36	<i>CIMZIA KIT</i>	162
<i>chlordiazepoxide hcl cap 5 mg</i>	36	<i>CIMZIA KIT STARTER</i>	162
<i>chlorhexidine gluconate liquid 4%</i>	102	<i>CIMZIA PREFL KIT 200MG/ML</i>	162
<i>chlorhist tab 4mg</i>	66	<i>CINRYZE SOL 500 UNIT</i>	119
<i>chloroquine phosphate tab 250 mg</i>	83	<i>CIPRO HC SUS OTIC</i>	232
<i>chloroquine phosphate tab 500 mg</i>	83	<i>CIPRODEX SUS 0.3-0.1%</i>	232
<i>chlor-phenir tab 4mg</i>	66	<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	229
<i>chlorpheniramine maleate tab 4 mg</i>	66	<i>ciprofloxacin hcl otic soln 0.2% (base equivalent)</i>	232
<i>chlorpheniramine maleate tab er 12 mg</i>		<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	
.....	66	.....	160
<i>chlorpromazine hcl tab 10 mg</i>	99	<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	
<i>chlorpromazine hcl tab 100 mg</i>	99	.....	160
<i>chlorpromazine hcl tab 200 mg</i>	99	<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	
<i>chlorpromazine hcl tab 25 mg</i>	99	.....	160
<i>chlorpromazine hcl tab 50 mg</i>	99	<i>cit calc/d tab 315-250</i>	191
<i>chlorpropamide tab 100 mg</i>	60	<i>citalopram hydrobromide oral soln 10 mg/5ml</i>	50
<i>chlorpropamide tab 250 mg</i>	60	<i>citalopram hydrobromide tab 10 mg</i>	
<i>chlorthalidone tab 100 mg</i>	155	<i>(base equiv)</i>	50
<i>chlorthalidone tab 25 mg</i>	155		
<i>chlorthalidone tab 50 mg</i>	155		
<i>chlorzoxazone tab 500 mg</i>	222		
<i>cholecalciferol cap 1000 unit</i>	262		
<i>cholecalciferol cap 2000 unit</i>	262		
<i>cholecalciferol chew tab 1000 unit</i>	262		

<i>citalopram hydrobromide tab 20 mg</i> (base equiv).....	50	<i>clonazepam tab 2 mg</i>	44
<i>citalopram hydrobromide tab 40 mg</i> (base equiv).....	50	<i>clonidine hcl tab 0.1 mg</i>	80
<i>citroma</i>	179	<i>clonidine hcl tab 0.2 mg</i>	80
<i>CLAFORAN INJ 2GM</i>	118	<i>clonidine hcl tab 0.3 mg</i>	81
<i>CLAFORAN/D5W INJ 1GM</i>	118	<i>clopidogrel bisulfate tab 75 mg (base</i> <i>equiv)</i>	167
<i>claravis cap 10mg</i>	137	<i>clorazepate dipotassium tab 15 mg</i>	36
<i>claravis cap 20mg</i>	137	<i>clorazepate dipotassium tab 3.75 mg.</i>	36
<i>claravis cap 30mg</i>	137	<i>clorazepate dipotassium tab 7.5 mg</i> ...	36
<i>claravis cap 40mg</i>	137	<i>clotrimazole cre 1%</i>	141
<i>clarithromycin for susp 125 mg/5ml</i> ..	185	<i>clotrimazole cre 1% vag</i>	260
<i>clarithromycin for susp 250 mg/5ml</i> ..	185	<i>clotrimazole cre 2%</i>	260
<i>clarithromycin tab 250 mg</i>	185	<i>clotrimazole cre 3 day</i>	260
<i>clarithromycin tab 500 mg</i>	185	<i>clotrimazole cream 1%</i>	141
<i>claritin eye dro 0.025%op</i>	230	<i>clotrimazole soln 1%</i>	141
<i>clear eyes dro 0.5-0.6%</i>	226	<i>clotrimazole troche 10 mg</i>	196
<i>clearlax pow</i>	178	<i>clotrimazole vaginal cream 1%</i>	261
<i>clemastine fumarate syrup 0.67 mg/5ml</i> (0.5 mg/5ml base eq)	68	<i>clotrimazole w/ betamethasone cream 1-</i> <i>0.05%</i>	141
<i>clemastine fumarate tab 1.34 mg (1 mg</i> <i>base equiv)</i>	68	<i>clotrimazole w/ betamethasone lotion 1-</i> <i>0.05%</i>	141
<i>clemastine fumarate tab 2.68 mg</i>	68	<i>clozapine tab 100 mg</i>	96
<i>clindamycin hcl cap 150 mg</i>	33	<i>clozapine tab 200 mg</i>	97
<i>clindamycin hcl cap 300 mg</i>	33	<i>clozapine tab 25 mg</i>	96
<i>clindamycin palmitate hcl for soln 75</i> <i>mg/5ml (base equiv)</i>	33	<i>clozapine tab 50 mg</i>	96
<i>clindamycin phosphate gel 1%</i>	138	<i>clr soluble pow fiber</i>	174
<i>clindamycin phosphate lotion 1%</i>	138	<i>COARTEM TAB 20-120MG</i>	83
<i>clindamycin phosphate soln 1%</i>	138	<i>codeine sulf tab 15mg</i>	22
<i>clindamycin phosphate vaginal cream 2%</i>	260	<i>codeine sulf tab 30mg</i>	22
<i>clindamycin phosph-benzoyl peroxide</i> (refrig) gel 1.2 (1)-5%	138	<i>codeine sulf tab 60mg</i>	22
<i>clobazam tab 10 mg</i>	44	<i>co-gesic tab 5-500mg</i>	26
<i>clobazam tab 20 mg</i>	44	<i>colchicine tab 0.6 mg</i>	164
<i>clobetasol propionate cream 0.05%</i> ..	145	<i>colchicine w/ probenecid tab 0.5-500 mg</i>	164
<i>clobetasol propionate gel 0.05%</i>	146	<i>cold & cough liq 6.25-2.5</i>	128
<i>clobetasol propionate oint 0.05%</i>	146	<i>cold/allergy elx children</i>	129
<i>clobetasol propionate soln 0.05%</i>	146	<i>cold/cough elx children</i>	129
<i>clocortolone pivalate cream 0.1%</i>	146	<i>cold/cough elx dm</i>	129
<i>clomipramine hcl cap 25 mg</i>	52	<i>cold/cough liq 6.25-2.5</i>	129
<i>clomipramine hcl cap 50 mg</i>	52	<i>colestipol hcl tab 1 gm</i>	77
<i>clomipramine hcl cap 75 mg</i>	52	<i>COMBIVENT AER 20-100</i>	40
<i>clonazepam tab 0.5 mg</i>	44	<i>COMETRIQ KIT 100MG</i>	87
<i>clonazepam tab 1 mg</i>	44	<i>COMETRIQ KIT 140MG</i>	87
		<i>COMETRIQ KIT 60MG</i>	87
		<i>comfort gel sus</i>	29
		<i>comfort gel sus antacid</i>	29

<i>comfort gel sus anti-gas</i>	29	<i>cough tab 200mg</i>	134
<i>comp allergy cap 25mg</i>	69	COUMADIN TAB 10MG	42
<i>comp allergy tab 25mg</i>	69	COUMADIN TAB 1MG	41
<i>comp allergy tab 25mg med</i>	69	COUMADIN TAB 2.5MG	41
<i>comp allergy tab 25mg rlf</i>	69	COUMADIN TAB 2MG	41
<i>comp daily tab w/lutein</i>	200	COUMADIN TAB 3MG	41
<i>comp energy tab</i>	200	COUMADIN TAB 4MG	41
<i>comp multivi liq mineral</i>	200	COUMADIN TAB 5MG	42
<i>companion tab</i>	200	COUMADIN TAB 6MG	42
<i>compete tab</i>	200	COUMADIN TAB 7.5MG	42
<i>compl multiv chw childrns</i>	219	<i>creamies chw 600-400</i>	191
COMPL PRENAT MIS +DHA	215	CREON CAP 12000UNT	153
<i>comple multi tab adlt 50+</i>	200	CREON CAP 24000UNT	153
COMPLERA TAB	103	CREON CAP 3000UNIT	153
<i>complere tab</i>	200	CREON CAP 36000UNT	153
<i>complete kit lice</i>	152	CREON CAP 6000UNIT	153
<i>complete tab</i>	200	<i>critic-aid oin 2%</i>	141
<i>complete tab senior</i>	200	CRIXIVAN CAP 200MG	103
<i>complete tab womens</i>	201	CRIXIVAN CAP 400MG	103
<i>compoz tab 50mg</i>	172	<i>cromolyn sodium nasal aerosol soln 5.2</i>	
<i>compro sup 25mg</i>	99	<i>mg/act (4%)</i>	224
<i>constulose sol 10gm/15</i>	178	<i>cromolyn sodium ophth soln 4%</i>	230
<i>coral calciu cap plus</i>	201	<i>cromolyn sodium soln nebu 20 mg/2ml</i>	
<i>cormax scalp sol 0.05%</i>	146	.....	38
<i>corn dextrin oral powder</i>	174	<i>cruex aer 2%</i>	141
<i>correct tab 5mg ec</i>	181	<i>cryselle-28 tab 28 tabs</i>	120
<i>correctol cap 100mg</i>	183	CUPRIMINE CAP 250MG	108
<i>correctol tab 5mg ec</i>	181	<i>curity salin sol 0.9% irr</i>	164
<i>cort intense cre heal 1%</i>	146	CUVPOSA SOL 1MG/5ML	255
<i>corticool gel 1%</i>	146	<i>cvs 3-day cre</i>	261
<i>cortisone acetate tab 25 mg</i>	125	<i>cvs allergy cap 25mg</i>	69
<i>cortisone cre 1%</i>	146	<i>cvs allergy chw 12.5mg</i>	69
<i>cortisone gel cooling</i>	146	<i>cvs allergy dro 0.025%op</i>	230
<i>cortisone lot 1%</i>	146	<i>cvs allergy liq 12.5/5ml</i>	69
<i>cortisone oin 1%max st</i>	146	<i>cvs allergy tab 10mg</i>	74
<i>cortizone-10 cre /aloe 1%</i>	146	<i>cvs allergy tab 25mg</i>	69
<i>cortizone-10 cre healing</i>	146	<i>cvs allergy tab 4mg</i>	66
<i>cortizone-10 cre plus</i>	146	<i>cvs antacid sus antigas</i>	29
<i>cortizone-10 gel 1%</i>	146	<i>cvs antacid sus supreme</i>	29
<i>cortizone-10 lot eczema</i>	146	<i>cvs antacid/ sus anti-gas</i>	29
<i>cortizone-10 lot hydraten</i>	146	<i>cvs aspirin tab 325mg</i>	20
<i>cortizone-10 oin 1%</i>	146	<i>cvs aspirin tab 325mg ec</i>	20
<i>corvite free tab</i>	201	<i>cvs aspirin tab 81mg ec</i>	20
<i>cough cont liq dm max</i>	129	<i>cvs b-12 sub 500mcg</i>	168
<i>cough syp</i>	134	<i>cvs b6 tab 100mg</i>	263
<i>cough syp 100/5ml</i>	134	<i>cvs bismuth chw 262mg</i>	61

<i>cvs bismuth sus max str</i>	61	<i>cvs permethr lot 1%</i>	152
<i>cvs bismuth tab 262mg</i>	61	CVS PRENATAL CHW GUMMY	215
<i>cvs ca/mg/zn tab</i>	191	<i>cvs purelax pak</i>	178
<i>cvs calcium tab 600mg</i>	191	<i>cvs purelax pow</i>	178
<i>cvs children chw complete</i>	219	<i>cvs senna tab 8.6mg</i>	181
<i>cvs childs chw 80mg</i>	16	<i>cvs triple oin antibiot</i>	140
<i>cvs chld asa chw 81mg</i>	20	<i>cvs vision tab formula</i>	201
<i>cvs d3 cap 2000unit</i>	262	<i>cvs vit b-12 tab 1000 tr</i>	168
<i>cvs daily tab fe/ca/zn</i>	201	<i>cyanocobalamin sl tab 1000 mcg</i>	168
<i>cvs daily tab multiple</i>	213	<i>cyanocobalamin sl tab 2500 mcg</i>	168
<i>cvs dry eye dro relief</i>	226	<i>cyanocobalamin sl tab 500 mcg</i>	168
<i>cvs ear dro 6.5% ot</i>	231	<i>cyanocobalamin tab 100 mcg</i>	168
<i>cvs enema ene disposab</i>	179	<i>cyanocobalamin tab 1000 mcg</i>	168
<i>cvs fiber cap 0.52gm</i>	174	<i>cyanocobalamin tab 250 mcg</i>	168
<i>cvs fiber la tab 625mg</i>	174	<i>cyanocobalamin tab 500 mcg</i>	168
<i>cvs gas relf chw 125mg</i>	160	<i>cyanocobalamin tab er 1000 mcg</i>	168
<i>cvs gas relf chw 80mg</i>	160	<i>cyclafem tab 1/35</i>	120
<i>cvs gas relf dro ex st</i>	160	<i>cyclafem tab 7/7/7</i>	120
CVS GLUCOSE CHW FRUIT	56	<i>cyclobenzaprine hcl tab 10 mg</i>	222
CVS GLUCOSE CHW GRAPE	57	<i>cyclobenzaprine hcl tab 5 mg</i>	222
CVS GLUCOSE CHW TROP BLS	57	<i>cyclophosphamide cap 25 mg</i>	85
<i>cvs glycerin sup 2.1gm</i>	178	CYCLOPHOSPHAMIDE CAP 25 MG	85
<i>cvs ibuprof dro 50/1.25</i>	9	<i>cyclophosphamide cap 50 mg</i>	85
<i>cvs iron tab 27mg</i>	170	CYCLOPHOSPHAMIDE CAP 50 MG	85
<i>cvs iron tab 325mg</i>	170	<i>cyclophosphamide tab 25 mg</i>	85
<i>cvs laxative chw 15mg</i>	181	<i>cyclophosphamide tab 50 mg</i>	85
<i>cvs laxative tab 25mg</i>	181	<i>cycloserine cap 250 mg</i>	84
<i>cvs lice kit solution</i>	152	<i>cyclosporine cap 100 mg</i>	109
<i>cvs lubricnt dro 0.5% op</i>	226	<i>cyclosporine cap 25 mg</i>	109
CVS MINERAL OIL	179	<i>cyclosporine modified cap 100 mg</i>	109
<i>cvs mucus er tab 600mg</i>	134	<i>cyclosporine modified cap 25 mg</i>	109
<i>cvs natural sol tears</i>	226	<i>cyclosporine modified oral soln 100</i>	
<i>cvs nicotine dis 14mg/24h</i>	239	<i>mg/ml</i>	109
<i>cvs nicotine dis 21mg/24h</i>	239	<i>cypheptadine hcl syrup 2 mg/5ml</i>	77
<i>cvs nicotine dis 7mg/24hr</i>	239	<i>cypheptadine hcl tab 4 mg</i>	77
<i>cvs nicotine gum 2mg cinn</i>	239	CYSTADANE POW	157
<i>cvs nicotine gum 2mg mint</i>	239	CYSTAGON CAP 150MG	164
<i>cvs nicotine gum 2mg orig</i>	239	CYSTAGON CAP 50MG	164
<i>cvs nicotine gum 2mgfruit</i>	239	D	
<i>cvs nicotine gum 4mg cinn</i>	239	<i>d 1000 chw 1000unit</i>	262
<i>cvs nicotine gum 4mg mint</i>	239	<i>d3 max st dro 5000unit</i>	262
<i>cvs nicotine gum 4mg orig</i>	239	<i>daily betic tab</i>	201
<i>cvs nicotine gum 4mgfruit</i>	239	<i>daily diet tab support</i>	201
<i>cvs nicotine loz 2mg mint</i>	240	<i>daily mens tab health</i>	201
<i>cvs nicotine loz 4mg mint</i>	240	<i>daily multi tab</i>	201
<i>cvs nts dis step 1</i>	240	<i>daily multi tab 50+</i>	201

<i>daily multi tab men</i>	201	<i>desenex aer 2%</i>	141
<i>daily multi tab vit/mens</i>	201	<i>desenex cre 1%</i>	141
<i>daily multi tab vit/min</i>	201	<i>desenex shak pow 2%</i>	141
<i>daily multi tab women</i>	201	<i>desipramine hcl tab 10 mg</i>	52
<i>daily multi tab womn 50+</i>	201	<i>desipramine hcl tab 100 mg</i>	53
<i>daily tab vitamin</i>	213	<i>desipramine hcl tab 150 mg</i>	53
<i>daily value tab multivit</i>	213	<i>desipramine hcl tab 25 mg</i>	53
<i>daily vit tab</i>	213	<i>desipramine hcl tab 50 mg</i>	53
<i>daily vit tab +iron</i>	198	<i>desipramine hcl tab 75 mg</i>	53
<i>daily vit tab +mineral</i>	201	<i>desmopressin acetate nasal spray soln</i> <i>0.01% (refrigerated)</i>	158
<i>daily vitamn cap plus</i>	201	<i>desmopressin acetate tab 0.1 mg</i>	158
<i>daily vite tab</i>	213	<i>desmopressin acetate tab 0.2 mg</i>	158
<i>daily vite tab iron</i>	198	<i>desogest-eth estrad & eth estrad tab</i> <i>0.15-0.02/0.01 mg(21/5)</i>	120
<i>daily womens tab health</i>	201	<i>desogestrel & ethinyl estradiol tab 0.15</i> <i>mg-30 mcg</i>	120
<i>daily-vitamn tab</i>	198, 213	<i>desonide cream 0.05%</i>	146
<i>daily-vitamn tab maximum</i>	201	<i>desonide oint 0.05%</i>	147
<i>daily-vite/ tab iron</i>	198	<i>desoximetasone cream 0.25%</i>	147
DAKLINZA TAB 30MG	106	DEX4 CHW FRUIT	57
DAKLINZA TAB 60MG	106	DEX4 CHW GRAPE	57
<i>dalfampridine tab er 12hr 10 mg</i>	238	DEX4 CHW ORANGE	57
DALIRESP TAB 500MCG	39	DEX4 CHW RASPBERR	57
<i>danazol cap 100 mg</i>	28	DEX4 CHW RASPBERRY	57
<i>danazol cap 200 mg</i>	28	DEX4 CHW SOUR APL	57
<i>danazol cap 50 mg</i>	28	DEX4 CHW TROP FRT	57
<i>dandruff sha 1%</i>	144	DEX4 CHW WATERMLN	57
<i>dantrolene sodium cap 100 mg</i>	223	DEX4 NATURAL CHW ORANGE	57
<i>dantrolene sodium cap 25 mg</i>	223	DEX4 POUCH CHW PACK	57
<i>dantrolene sodium cap 50 mg</i>	223	<i>dexamethasone elixir 0.5 mg/5ml</i>	125
<i>dapsone tab 100 mg</i>	33	<i>dexamethasone sod phosphate</i> <i>preservative free inj 10 mg/ml</i>	125
<i>dapsone tab 25 mg</i>	33	<i>dexamethasone sodium phosphate inj 10</i> <i>mg/ml</i>	125
<i>dasetta tab 1/35</i>	120	<i>dexamethasone sodium phosphate inj</i> <i>100 mg/10ml</i>	125
<i>dasetta tab 7/7/7</i>	120	<i>dexamethasone sodium phosphate ophth</i> <i>soln 0.1%</i>	229
<i>dayhist alrg tab 12 hour</i>	69	<i>dexamethasone soln 0.5 mg/5ml</i>	125
<i>daysee tab</i>	120	<i>dexamethasone tab 0.5 mg</i>	125
<i>decongestant tab 120mg er</i>	224	<i>dexamethasone tab 0.75 mg</i>	125
<i>decongestant tab 30mg</i>	224	<i>dexamethasone tab 1 mg</i>	125
<i>deep sea spr 0.65%</i>	223	<i>dexamethasone tab 1.5 mg</i>	125
<i>delyla tab 0.1-0.02</i>	120	<i>dexamethasone tab 2 mg</i>	125
<i>demeclocycline hcl tab 150 mg</i>	249	<i>dexamethasone tab 4 mg</i>	125
<i>demeclocycline hcl tab 300 mg</i>	249		
<i>denta 5000 cre plus</i>	197		
<i>denta 5000 cre plus 2pk</i>	197		
<i>dentagel gel 1.1%</i>	197		
DEPEN TITRA TAB 250MG	108		
<i>dermafungal oin 2%</i>	141		
DESCOVY TAB 200/25	103		

<i>dexamethasone tab 6 mg</i>	125	<i>diclofenac sodium ophth soln 0.1%</i> ..	230
DEXILANT CAP 30MG DR	258	<i>diclofenac sodium tab delayed release 25</i>	
DEXILANT CAP 60MG DR	258	<i>mg</i>	9
<i>dexmethylphenidate hcl tab 10 mg</i>	4	<i>diclofenac sodium tab delayed release 50</i>	
<i>dexmethylphenidate hcl tab 2.5 mg</i>	4	<i>mg</i>	9
<i>dexmethylphenidate hcl tab 5 mg</i>	4	<i>diclofenac sodium tab delayed release 75</i>	
<i>dextroamphetamine sulfate cap er 24hr</i>		<i>mg</i>	9
<i>10 mg</i>	2	<i>diclofenac sodium tab er 24hr 100 mg</i> ..	9
<i>dextroamphetamine sulfate cap er 24hr</i>		<i>dicloxacillin sodium cap 250 mg</i>	235
<i>15 mg</i>	2	<i>dicloxacillin sodium cap 500 mg</i>	235
<i>dextroamphetamine sulfate cap er 24hr 5</i>		<i>dicyclomine hcl cap 10 mg</i>	255
<i>mg</i>	2	<i>dicyclomine hcl oral soln 10 mg/5ml</i> .	255
<i>dextroamphetamine sulfate tab 10 mg</i> .	2	<i>dicyclomine hcl tab 20 mg</i>	255
<i>dextroamphetamine sulfate tab 5 mg</i> ...	2	<i>didanosine delayed release capsule 125</i>	
<i>dextromethorphan-guaifenesin liquid 10-</i>		<i>mg</i>	103
<i>100 mg/5ml</i>	129	<i>didanosine delayed release capsule 200</i>	
<i>dextromethorphan-guaifenesin syrup 10-</i>		<i>mg</i>	103
<i>100 mg/5ml</i>	129	<i>didanosine delayed release capsule 250</i>	
<i>diabet tuss syp allergy</i>	66	<i>mg</i>	103
<i>diabetic sup tab formula</i>	201	<i>didanosine delayed release capsule 400</i>	
<i>diabetic tus liq 100/5ml</i>	134	<i>mg</i>	103
<i>diabetic tus liq children</i>	129	<i>digox tab 0.125mg</i>	116
<i>diabetic tus liq dm</i>	129	<i>digox tab 0.25mg</i>	116
<i>diabetic tus liq max st</i>	129	<i>digoxin oral soln 0.05 mg/ml</i>	116
<i>diabets hlth tab formula</i>	201	<i>digoxin tab 125 mcg (0.125 mg)</i>	116
<i>diabtc tussn syp 100/5ml</i>	134	<i>digoxin tab 250 mcg (0.25 mg)</i>	116
<i>dialyvite tab</i>	197	<i>dihydroergotamine mesylate inj 1 mg/ml</i>	
<i>dialyvite tab 800</i>	197	.....	188
<i>dialyvite tab 800/d</i>	202	DILANTIN CAP 30MG	48
<i>diamode tab 2mg</i>	63	<i>diltiazem cap 180mg cd</i>	113
<i>diarrhea rel sus 262/15ml</i>	61	<i>diltiazem cap 240mg cd</i>	113
<i>diarrhea sus 262/15ml</i>	62	<i>diltiazem hcl cap er 24hr 120 mg</i>	113
DIAZEPAM CON 5MG/ML	36	<i>diltiazem hcl cap er 24hr 180 mg</i>	113
<i>diazepam oral soln 1 mg/ml</i>	36	<i>diltiazem hcl cap er 24hr 240 mg</i>	113
<i>diazepam rectal gel delivery system 10</i>		<i>diltiazem hcl coated beads cap er 24hr</i>	
<i>mg</i>	44	<i>120 mg</i>	113
<i>diazepam rectal gel delivery system 2.5</i>		<i>diltiazem hcl coated beads cap er 24hr</i>	
<i>mg</i>	44	<i>180 mg</i>	114
<i>diazepam rectal gel delivery system 20</i>		<i>diltiazem hcl coated beads cap er 24hr</i>	
<i>mg</i>	44	<i>240 mg</i>	114
<i>diazepam tab 10 mg</i>	37	<i>diltiazem hcl coated beads cap er 24hr</i>	
<i>diazepam tab 2 mg</i>	36	<i>300 mg</i>	114
<i>diazepam tab 5 mg</i>	37	<i>diltiazem hcl extended release beads cap</i>	
<i>dibucaine rectal ointment 1%</i>	28	<i>er 24hr 120 mg</i>	114
<i>diclofenac potassium tab 50 mg</i>	9	<i>diltiazem hcl extended release beads cap</i>	
<i>diclofenac sodium gel 1%</i>	139	<i>er 24hr 180 mg</i>	114

<i>diltiazem hcl extended release beads cap er 24hr 240 mg</i>	114
<i>diltiazem hcl extended release beads cap er 24hr 300 mg</i>	114
<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i>	114
<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i>	114
<i>diltiazem hcl tab 120 mg</i>	114
<i>diltiazem hcl tab 30 mg</i>	114
<i>diltiazem hcl tab 60 mg</i>	114
<i>diltiazem hcl tab 90 mg</i>	114
<i>dilt-xr cap 180mg</i>	113
<i>dilt-xr cap 240mg</i>	113
<i>dimenhydrinate tab 50 mg</i>	64
<i>dimetapp liq nighttim</i>	129
<i>dino-life chw</i>	221
<i>dino-life chw extra c</i>	221
<i>diocto liq 50mg/5ml</i>	183
<i>diocto syp 60/15ml</i>	184
<i>diotame chw 262mg</i>	62
<i>diphedryl liq 12.5/5ml</i>	69
<i>diphen tab 25mg</i>	69
<i>diphenhist cap 25mg</i>	69
<i>diphenhist liq 12.5/5ml</i>	69
<i>diphenhydram cap 50mg</i>	70
<i>diphenhydramine hcl (sleep) tab 50 mg</i>	172
<i>diphenhydramine hcl cap 25 mg</i>	70
<i>diphenhydramine hcl elixir 12.5 mg/5ml</i>	70
<i>diphenhydramine hcl inj 50 mg/ml</i>	70
<i>diphenhydramine hcl tab 25 mg</i>	70
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	63
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	63
<i>dipyridamole tab 25 mg</i>	167
<i>dipyridamole tab 50 mg</i>	167
<i>dipyridamole tab 75 mg</i>	168
<i>disney cars chw gummies</i>	219
<i>disopyramide phosphate cap 100 mg</i> ..	37
<i>disopyramide phosphate cap 150 mg</i> ..	37
<i>disposable ene single</i>	179
<i>disulfiram tab 250 mg</i>	236
<i>disulfiram tab 500 mg</i>	236
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	48
<i>divalproex sodium tab delayed release 125 mg</i>	48
<i>divalproex sodium tab delayed release 250 mg</i>	48
<i>divalproex sodium tab delayed release 500 mg</i>	48
<i>divalproex sodium tab er 24 hr 250 mg</i>	48
<i>divalproex sodium tab er 24 hr 500 mg</i>	48
<i>docqlace cap 100mg</i>	184
<i>doc-q-lax tab 8.6-50mg</i>	176
<i>docu liq 50mg/5ml</i>	184
<i>docu soft cap 100mg</i>	184
<i>docuprene tab 100mg</i>	184
<i>docusate calcium cap 240 mg</i>	184
<i>docusate sod liq 50mg/5ml</i>	184
<i>docusate sodium cap 100 mg</i>	184
<i>docusate sodium cap 250 mg</i>	184
<i>docusate sodium liquid 150 mg/15ml</i> ..	184
<i>docusate sodium syrup 60 mg/15ml</i> ..	184
<i>docusate sodium tab 100 mg</i>	184
<i>docusil cap 100mg</i>	184
<i>docusol plus ene 20-283</i>	184
<i>dofetilide cap 125 mcg (0.125 mg)</i>	38
<i>dofetilide cap 250 mcg (0.25 mg)</i>	38
<i>dofetilide cap 500 mcg (0.5 mg)</i>	38
<i>dok cap 100mg</i>	184
<i>dok cap 250mg</i>	184
<i>dok plus tab 8.6-50mg</i>	176
<i>dok tab 100mg</i>	184
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	237
<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	237
<i>donepezil hydrochloride tab 10 mg</i> ...	237
<i>donepezil hydrochloride tab 5 mg</i>	237
<i>dorzolamide hcl ophth soln 2%</i>	230
<i>dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml</i>	228
<i>double antib oin</i>	140
<i>DOVATO TAB 50-300MG</i>	102
<i>doxazosin mesylate tab 1 mg</i>	81
<i>doxazosin mesylate tab 2 mg</i>	81

<i>doxazosin mesylate tab 4 mg</i>	81	<i>earwax trmnt dro 6.5% ot</i>	232
<i>doxazosin mesylate tab 8 mg</i>	81	<i>easy fiber pow</i>	174
<i>doxepin hcl cap 10 mg</i>	53	<i>easy-lax cap 100mg</i>	184
<i>doxepin hcl cap 100 mg</i>	53	<i>easy-lax pls tab 8.6-50mg</i>	176
<i>doxepin hcl cap 150 mg</i>	53	<i>easy-melts tab 80mg</i>	16
<i>doxepin hcl cap 25 mg</i>	53	<i>ecolovit tab</i>	202
<i>doxepin hcl cap 50 mg</i>	53	<i>econazole nitrate cream 1%</i>	141
<i>doxepin hcl cap 75 mg</i>	53	<i>ecotrin low tab 81mg ec</i>	20
<i>doxepin hcl conc 10 mg/ml</i>	53	<i>ecpirin tab 325mg ec</i>	20
<i>doxycycline monohydrate cap 100 mg</i>	249	<i>ed chlorped syp jr</i>	66
<i>doxycycline monohydrate cap 50 mg</i>	249	<i>ed-apap liq 80mg/2.5</i>	16
<i>doxycycline monohydrate tab 100 mg</i>	249	<i>ed-chlortan tab 4mg</i>	66
<i>dr edwards tab 8.6mg</i>	181	<i>ed-spaz tab 0.125mg</i>	255
<i>dr gs clear sol nail 1%</i>	141	<i>EDURANT TAB 25MG</i>	103
<i>dramamine tab 25mg</i>	64	<i>efavirenz cap 200 mg</i>	103
<i>driminate tab 50mg</i>	64	<i>efavirenz cap 50 mg</i>	103
<i>DRITHO-CREME CRE HP 1%</i>	144	<i>efavirenz tab 600 mg</i>	103
<i>dronabinol cap 10 mg</i>	64	<i>effer-k tab 25meq ef</i>	195
<i>dronabinol cap 2.5 mg</i>	64	<i>ELAPRASE INJ 6MG/3ML</i>	157
<i>dronabinol cap 5 mg</i>	64	<i>ELIDEL CRE 1%</i>	150
<i>drospirenone-ethinyl estradiol tab 3-0.03</i> <i>mg</i>	120	<i>elinetab</i>	120
<i>drs choice tab men</i>	202	<i>ELLA TAB 30MG</i>	123
<i>DRYSOL SOL 20%</i>	151	<i>ELMIRON CAP 100MG</i>	164
<i>ducodyl tab 5mg ec</i>	181	<i>EMCYT CAP 140MG</i>	86
<i>dulcolax mom sus mint</i>	179	<i>emoquette tab</i>	120
<i>dulcolax ss cap 100mg</i>	184	<i>EMTRIVA CAP 200MG</i>	103
<i>DULERA AER 100-5MCG</i>	40	<i>EMTRIVA SOL 10MG/ML</i>	103
<i>DULERA AER 200-5MCG</i>	40	<i>enalapril maleate & hydrochlorothiazide</i> <i>tab 10-25 mg</i>	82
<i>duloxetine hcl cap 20 mg</i>	51	<i>enalapril maleate & hydrochlorothiazide</i> <i>tab 5-12.5 mg</i>	82
<i>duloxetine hcl cap 30 mg</i>	51	<i>enalapril maleate tab 10 mg</i>	79
<i>duloxetine hcl cap 60 mg</i>	51	<i>enalapril maleate tab 2.5 mg</i>	79
<i>DUPIXENT INJ 200/1.14</i>	38	<i>enalapril maleate tab 20 mg</i>	79
<i>DUPIXENT INJ 300/2ML</i>	150	<i>enalapril maleate tab 5 mg</i>	79
<i>dyspel tab 200mg</i>	10	<i>ENBREL INJ 25/0.5ML</i>	13
<i>dytuss syp 12.5/5ml</i>	70	<i>ENBREL INJ 25MG</i>	13
E		<i>ENBREL INJ 50MG/ML</i>	13
<i>e.e.s. 400 tab 400mg</i>	186	<i>ENBREL MINI INJ 50MG/ML</i>	13
<i>e.s.p. sus 200-600</i>	32	<i>ENBREL SRCLK INJ 50MG/ML</i>	14
<i>ear drops sol 6.5% ot</i>	231	<i>endocet tab 10-325mg</i>	26
<i>ear drying dro 95-5%</i>	231	<i>endocet tab 5-325mg</i>	26
<i>ear wax kit sol 6.5% ot</i>	231	<i>endur-acin tab 250mg sr</i>	263
<i>ear wax remv dro 6.5% ot</i>	231	<i>endur-acin tab 500mg sr</i>	263
<i>ear wax remv sol 6.5% ot</i>	231	<i>enemeez plus ene 20-283</i>	184
<i>earwax remv sol 6.5% ot</i>	232	<i>enoxaparin sodium inj 100 mg/ml</i>	43

<i>enoxaparin sodium inj 120 mg/0.8ml</i> ..43
<i>enoxaparin sodium inj 150 mg/ml</i>.....43
<i>enoxaparin sodium inj 30 mg/0.3ml</i> ....43
<i>enoxaparin sodium inj 300 mg/3ml</i> ....43
<i>enoxaparin sodium inj 40 mg/0.4ml</i> ....43
<i>enoxaparin sodium inj 60 mg/0.6ml</i> ....43
<i>enoxaparin sodium inj 80 mg/0.8ml</i> ....43
<i>enpresse-28 tab</i> .....120
<i>enskyce tab</i> .....120
<i>entacapone tab 200 mg</i> .....91
<i>entecavir tab 0.5 mg</i> .....106
<i>entecavir tab 1 mg</i> .....107
<i>enulose sol 10gm/15</i> .....162
<i>enviro-stres tab</i> .....202
<i>EPCLUSA TAB 400-100</i> .....107
<i>epinastine hcl ophth soln 0.05%</i> .....230
<i>EPIPEN 2-PAK INJ 0.3MG</i> .....261
<i>EPIPEN-JR INJ 0.15MG</i> .....261
<i>epitol tab 200mg</i> .....45
<i>EPOGEN INJ 10000/ML</i> .....169
<i>EPOGEN INJ 2000/ML</i> .....169
<i>EPOGEN INJ 20000/ML</i> .....169
<i>EPOGEN INJ 4000/ML</i> .....169
<i>eq acetamin tab 160mg</i> .....16
<i>eq acetamin tab 500mg</i> .....16
<i>eq acetamin tab 80mg</i> .....16
<i>eq allergy cap 25mg</i> .....70
<i>eq antacid chw 1000mg</i> .....31
<i>eq antacid chw 160-105</i> .....29
<i>eq antacid chw ex st</i> .....29
<i>eq antacid sus</i> .....30
<i>eq antacid sus anti-gas</i> .....30
<i>eq antacid sus max st</i> .....30
<i>eq anti-itch cre 2-0.1%</i> .....143
<i>eq aspirin tab 325mg</i> .....20
<i>eq aspirin tab 325mg ec</i> .....20
<i>eq calcium tab citr+d</i> .....192
<i>eq child asa chw 81mg</i> .....20
<i>eq chlortabs tab 4mg</i> .....66
<i>eq clearlax pow</i> .....178
<i>eq daily cap fiber</i> .....174
<i>eq dayhist tab 1.34mg</i> .....70
<i>eq ear wax sol removal</i> .....232
<i>eq enema ene double</i> .....179
<i>eq fiber pow</i> .....174
<i>eq gentle dro 0.3%</i> .....226

<i>eq heartburn tab relief</i> 257
<i>eq hydrocort cre 1%</i> 147
<i>eq ibuprofen tab 200mg</i> 10
<i>eq itchy eye dro 0.025%op</i> 230
<i>eq laxative chw 15mg</i> 181
<i>eq laxative tab 25mg</i> 181
<i>eq laxative tab 8.6mg</i> 181
<i>eq lubricant dro eye drop</i> 226
<i>eq multivita chw gummies</i> 220
<i>eq nicotine dis 14mg/24h</i> 240
<i>eq nicotine dis 21mg/24h</i> 240
<i>eq nicotine dis 7mg/24hr</i> 240
<i>eq nicotine gum 2mg cinn</i> 240
<i>eq nicotine gum 2mg mint</i> 240
<i>eq nicotine gum 2mg orig</i> 240
<i>eq nicotine gum 2mgfruit</i> 240
<i>eq nicotine gum 4mg cinn</i> 240
<i>eq nicotine gum 4mg mint</i> 240
<i>eq nicotine gum 4mg orig</i> 240
<i>eq nicotine gum 4mg ref</i> 241
<i>eq nicotine gum 4mg strt</i> 241
<i>eq nicotine gum 4mgfruit</i> 241
<i>eq nicotine loz 2mg cher</i> 241
<i>eq nicotine loz 2mg mint</i> 241
<i>eq nicotine loz 4mg chry</i> 241
<i>eq nicotine loz 4mg mint</i> 241
<i>eq revive pl dro 0.5% op</i> 226
<i>eq senna-s tab 8.6-50mg</i> 176
<i>eq stomach chw 262mg</i> 62
<i>eq suphedrin tab 120mg cr</i> 224
<i>eq suphedrin tab 30mg</i> 224
<i>eq triple oin antibiot</i> 140
<i>eq tussin dm liq max</i> 129
<i>eq tussin dm syp cgh/chst</i> 129
<i>eq tussin liq 100/5ml</i> 134
<i>eql acetamin tab 160mg</i> 16
<i>eql all day tab allergy</i> 74
<i>eql allergy tab 10-240mg</i> 129
<i>eql allergy tab 25mg</i> 70
<i>eql allergy tab 4mg</i> 66
<i>eql antacid chw 1000mg</i> 31
<i>eql antacid sus anti-gas</i> 30
<i>eql aspirin chw 81mg</i> 20
<i>eql aspirin tab 325mg</i> 20
<i>eql aspirin tab 325mg ec</i> 20
<i>eql b-6 tab 100mg</i> 263

<i>eql calcium tab w/vit d</i>	192	ESBRIET TAB 267MG	248
<i>eql century tab</i>	202	ESBRIET TAB 801MG	248
<i>eql century tab mature</i>	202	<i>escitalopram oxalate soln 5 mg/5ml</i>	
<i>eql clearlax pow</i>	178	(base equiv)	50
<i>eql enema ene rtu</i>	179	<i>escitalopram oxalate tab 10 mg (base</i>	
<i>eql fiber la tab 625mg</i>	174	<i>equiv)</i>	50
<i>eql fiber pow supplemn</i>	174	<i>escitalopram oxalate tab 20 mg (base</i>	
<i>eql gas gone chw 125mg</i>	160	<i>equiv)</i>	50
<i>eql heartbrn tab 10mg</i>	257	<i>escitalopram oxalate tab 5 mg (base</i>	
<i>eql laxative tab 25mg</i>	181	<i>equiv)</i>	50
<i>eql laxative tab 5mg ec</i>	181	<i>esomeprazole magnesium cap delayed</i>	
<i>eql lice kit solution</i>	152	<i>release 20 mg (base eq)</i>	258
<i>eql nicotine gum 2mg</i>	241	<i>essentia tab</i>	202
<i>eql nicotine gum 4mg</i>	241	<i>essential tab balance</i>	202
<i>eql nicotine loz 2mg mint</i>	241	<i>essentl one tab daily</i>	213
<i>eql nicotine loz 4mg mint</i>	241	<i>estarylla tab 0.25-35</i>	120
<i>eql stomach chw 262mg</i>	62	<i>estazolam tab 1 mg</i>	173
<i>eql triactin elx cld/cgh</i>	129	<i>estazolam tab 2 mg</i>	173
<i>eql tussin liq 10-200</i>	129	<i>estradiol tab 0.5 mg</i>	159
<i>eql tussin syp dm</i>	129	<i>estradiol tab 1 mg</i>	159
<i>eql vision tab formula</i>	202	<i>estradiol tab 2 mg</i>	159
<i>ergocalciferol cap 50000 unit</i>	262	<i>estradiol vaginal cream 0.1 mg/gm</i> ..	261
<i>ergoloid mesylates tab 1 mg</i>	238	<i>estropipate tab 0.75 mg</i>	159
ERGOMAR SUB 2MG	188	<i>estropipate tab 1.5 mg</i>	159
ERIVEDGE CAP 150MG	86	<i>estropipate tab 3 mg</i>	159
<i>e-r-o ear dro 6.5% ot</i>	231	<i>ethambutol hcl tab 100 mg</i>	84
<i>ero ear wax sol removal</i>	232	<i>ethambutol hcl tab 400 mg</i>	84
<i>errin tab 0.35mg</i>	124	<i>ethosuximide cap 250 mg</i>	48
<i>ertapenem sodium for inj 1 gm (base</i>		<i>ethosuximide soln 250 mg/5ml</i>	48
<i>equivalent)</i>	33	<i>etidronate disodium tab 200 mg</i>	156
ERY-TAB TAB 250MG EC	186	<i>etidronate disodium tab 400 mg</i>	156
ERY-TAB TAB 333MG EC	186	<i>etodolac tab 400 mg</i>	10
ERY-TAB TAB 500MG EC	186	<i>etodolac tab 500 mg</i>	10
<i>erythrocin tab 250mg</i>	186	<i>etoposide cap 50 mg</i>	90
<i>erythromycin ethylsuccinate for susp 200</i>		<i>etoposide inj 100 mg/5ml (20 mg/ml)</i>	90
<i>mg/5ml</i>	186	<i>etoposide inj 20mg/ml</i>	90
<i>erythromycin ethylsuccinate tab 400 mg</i>		EUFLEXXA INJ 10MG/ML	223
.....	186	EURAX CRE 10%	152
<i>erythromycin gel 2%</i>	138	<i>evac-u-gen tab 8.6mg</i>	181
<i>erythromycin ophth oint 5 mg/gm</i>	229	EVOTAZ TAB 300-150	103
<i>erythromycin soln 2%</i>	138	<i>exemestane tab 25 mg</i>	86
<i>erythromycin tab 250 mg</i>	186	EXJADE TAB 125MG	63
<i>erythromycin tab 500 mg</i>	186	EXJADE TAB 250MG	63
<i>erythromycin-sulfisoxazole for susp 200-</i>		EXJADE TAB 500MG	63
<i>600 mg/5ml</i>	32	<i>ex-lax ultra tab 5mg ec</i>	181
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<i>extra action syp 100-10/5</i>	129	FEMCAP MIS 26MM.....	186
<i>eye itch rel dro 0.025%op</i>	230	FEMCAP MIS 30MM.....	186
<i>eye lubrican oin op</i>	226	<i>feminine lax tab 5mg ec</i>	181
<i>eye vitamins cap</i>	202	<i>fenesin ir tab 400mg</i>	134
<i>eye vitamins tab /mineral</i>	202	<i>fenofibrate micronized cap 134 mg</i>	77
<i>eye-vites tab</i>	202	<i>fenofibrate micronized cap 200 mg</i>	77
<i>ezetimibe tab 10 mg</i>	78	<i>fenofibrate micronized cap 43 mg</i>	77
EZFE FORTE CAP.....	215	<i>fenofibrate micronized cap 67 mg</i>	77
F		<i>fenofibrate tab 145 mg</i>	77
<i>fa-8 tab 0.8mg</i>	169	<i>fenofibrate tab 160 mg</i>	77
FABRAZYME INJ 5MG.....	157	<i>fenofibrate tab 48 mg</i>	77
FACTIVE TAB 320MG	160	<i>fenofibrate tab 54 mg</i>	77
<i>falmina tab</i>	120	<i>fenofibric acid tab 35 mg</i>	77
<i>famciclovir tab 125 mg</i>	107	<i>fentanyl td patch 72hr 100 mcg/hr</i>	23
<i>famciclovir tab 250 mg</i>	107	<i>fentanyl td patch 72hr 12 mcg/hr</i>	22
<i>famciclovir tab 500 mg</i>	108	<i>fentanyl td patch 72hr 25 mcg/hr</i>	22
<i>famotidine tab 10mg</i>	257	FENTANYL TD PATCH 72HR 37.5 MCG/HR	
<i>famotidine tab 20mg</i>	257	.....	22
<i>famotidine tab 40 mg</i>	257	<i>fentanyl td patch 72hr 50 mcg/hr</i>	22
FANAPT PAK	94	<i>fentanyl td patch 72hr 75 mcg/hr</i>	23
FANAPT TAB 10MG.....	94	<i>fer-iron dro 15mg/ml</i>	170
FANAPT TAB 12MG.....	94	<i>ferocon cap</i>	170
FANAPT TAB 1MG.....	94	<i>ferosul elx 220/5ml</i>	171
FANAPT TAB 2MG.....	94	<i>ferotinsic cap</i>	170
FANAPT TAB 4MG.....	94	<i>ferretts tab 325mg</i>	171
FANAPT TAB 6MG.....	94	<i>ferric x-150 cap 150mg</i>	171
FANAPT TAB 8MG.....	94	<i>ferro-bob tab 325mg</i>	171
FARESTON TAB 60MG.....	86	<i>ferrous fumarate tab 324 mg (106 mg</i>	
FARXIGA TAB 10MG	248	<i>elemental fe)</i>	171
FARXIGA TAB 5MG	248	FERROUS GLUC TAB 324MG	171
FARYDAK CAP 10MG.....	87	<i>ferrous gluconate tab 239 mg (27 mg fe</i>	
FARYDAK CAP 15MG.....	87	<i>equivalent)</i>	171
FARYDAK CAP 20MG.....	87	<i>ferrous gluconate tab 240 mg (27 mg</i>	
<i>fast relief sup 10mg</i>	181	<i>elemental fe)</i>	171
FC FEMALE MIS CONDOM.....	186	<i>ferrous gluconate tab 324 mg (37.5 mg</i>	
FC2 FEMALE MIS CONDOM.....	186	<i>elemental iron)</i>	171
<i>fe tabs tab 325mg ec</i>	170	FERROUS SUL LIQ 220/5ML.....	171
<i>feenamint tab 5mg ec</i>	181	FERROUS SULF TAB 324MG EC	171
FEIBA INJ	165	<i>ferrous sulf tab 325mg</i>	171
<i>felbamate susp 600 mg/5ml</i>	47	<i>ferrous sulfate elixir 220 mg/5ml (44</i>	
<i>felbamate tab 400 mg</i>	47	<i>mg/5ml elemental fe)</i>	171
<i>felbamate tab 600 mg</i>	47	<i>ferrous sulfate soln 75 mg/ml (15 mg/ml</i>	
<i>felodipine tab er 24hr 10 mg</i>	114	<i>elemental fe)</i>	171
<i>felodipine tab er 24hr 2.5 mg</i>	114	<i>ferrous sulfate tab 325 mg (65 mg</i>	
<i>felodipine tab er 24hr 5 mg</i>	114	<i>elemental fe)</i>	171
FEMCAP MIS 22MM	186	<i>ferrous sulfate tab ec 325 mg (65 mg fe</i>	

<i>equivalent</i>)	171	FLOVENT HFA AER 44MCG.....	39
<i>ferrousul tab 325mg</i>	171	FLUARIX QUAD INJ 2017-18	260
<i>fever reduce sup 120mg</i>	16	FLUCLVX QUAD INJ 2016-17	260
<i>fever/pain sus 160/5ml</i>	16	<i>fluconazole for susp 10 mg/ml</i>	65
FEVERALL INF SUP 80MG.....	16	<i>fluconazole for susp 40 mg/ml</i>	65
<i>feverall sup 120mg</i>	16	<i>fluconazole tab 100 mg</i>	65
<i>feverall sup 325mg</i>	16	<i>fluconazole tab 150 mg</i>	65
<i>feverall sup 650mg</i>	16	<i>fluconazole tab 200 mg</i>	65
<i>fevr reducng sup 120mg</i>	16	<i>fluconazole tab 50 mg</i>	65
<i>fexofenadine hcl tab 180 mg</i>	74	<i>fludarabine phosphate for inj 50 mg ...</i>	86
<i>fexofenadine hcl tab 60 mg</i>	74	<i>fludrocortisone acetate tab 0.1 mg ...</i>	126
<i>fiber laxatv tab 625mg</i>	174	FLULAVAL QUA INJ 2016-17	260
<i>fiber laxtiv cap 0.52gm</i>	174	<i>flunisolide nasal soln 25 mcg/act</i> <i>(0.025%)</i>	224
<i>fiber therap pow 28.3%</i>	175	<i>flunisolide nasal soln 29 mcg/act</i> <i>(0.025%)</i>	224
<i>fiber therap pow 48.57%</i>	175	<i>fluocinolone acetonide (otic) oil 0.01%</i>	232
<i>fiber therap pow sf orang</i>	175	<i>fluocinolone acetonide cream 0.025%</i>	147
<i>fiber therap tab 500mg</i>	175	<i>fluocinolone acetonide oil 0.01% (body</i> <i>oil)</i>	147
<i>fiber therap tab 625mg</i>	175	<i>fluocinolone acetonide oil 0.01% (scalp</i> <i>oil)</i>	147
<i>fibergen tab 625mg</i>	175	<i>fluocinolone acetonide oint 0.025% ..</i>	147
<i>fiber-lax tab 625mg</i>	175	<i>fluocinonide cream 0.05%</i>	147
FINACEA GEL 15%.....	151	<i>fluocinonide emulsified base cream</i> <i>0.05%</i>	147
<i>finasteride tab 5 mg</i>	164	<i>fluocinonide gel 0.05%</i>	147
FIRAZYR INJ 30MG/3ML.....	167	<i>fluocinonide oint 0.05%</i>	147
<i>first aid oin antibiot</i>	140	<i>fluocinonide soln 0.05%</i>	147
FIRST-OMEPRASUS 2MG/ML.....	258	<i>fluor-a-day dro 0.125mg</i>	193
FIRST-VANC SOL 25MG/ML	32	<i>fluoritab chw 0.25mg f</i>	193
FIRST-VANC SOL 50MG/ML	32	<i>fluoritab chw 0.5mg f</i>	193
FIRVANQ SOL 25MG/ML.....	32	<i>fluoritab chw 1mg f</i>	193
FIRVANQ SOL 50MG/ML.....	32	<i>fluoritab chw 2.2mg</i>	194
<i>flanax pain tab 220mg</i>	10	<i>fluoritab dro 0.125mg</i>	194
<i>flanax sus relief</i>	30	<i>fluorometholone ophth susp 0.1%</i>	230
<i>flavoxate hcl tab 100 mg</i>	260	<i>fluorouracil cream 5%</i>	143
FLEBOGAMMA INJ 20/200ML	233	<i>fluoxetine hcl cap 10 mg</i>	50
FLEBOGAMMA INJ DIF 5%	233	<i>fluoxetine hcl cap 20 mg</i>	50
<i>flecainide acetate tab 100 mg</i>	38	<i>fluoxetine hcl solution 20 mg/5ml</i>	50
<i>flecainide acetate tab 150 mg</i>	38	<i>fluphenazine decanoate inj 25 mg/ml .</i>	99
<i>flecainide acetate tab 50 mg</i>	38	<i>fluphenazine hcl inj 2.5 mg/ml</i>	99
<i>fleet laxati tab 5mg ec</i>	181	<i>fluphenazine hcl tab 1 mg</i>	99
<i>flintstones chw bone bld</i>	220	<i>fluphenazine hcl tab 10 mg</i>	99
<i>flintstones chw complete</i>	220	<i>fluphenazine hcl tab 2.5 mg</i>	99
<i>flintstones chw extra c</i>	221		
<i>flintstones chw my first</i>	221		
<i>flintstones chw omega-3</i>	221		
<i>flintstones chw pls calc</i>	221		
<i>flnston plus chw iron</i>	219		
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<i>fluphenazine hcl tab 5 mg</i>	99	FOSAMAX + D TAB 70-2800	156
<i>flura-drops dro 0.25mg f</i>	194	FOSAMAX + D TAB 70-5600	156
<i>flurazepam hcl cap 15 mg</i>	174	<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	103
<i>flurazepam hcl cap 30 mg</i>	174	FOSCAVIR INJ 24MG/ML	106
<i>flurbiprofen sodium ophth soln 0.03%</i>	231	<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	82
<i>flurbiprofen tab 100 mg</i>	10	<i>fosinopril sodium tab 10 mg</i>	79
<i>flurbiprofen tab 50 mg</i>	10	<i>fosinopril sodium tab 20 mg</i>	79
<i>flutamide cap 125 mg</i>	86	<i>fosinopril sodium tab 40 mg</i>	79
<i>fluticasone propionate cream 0.05%</i> .	147	FRAGMIN INJ 10000/ML.....	44
<i>fluticasone propionate nasal susp 50 mcg/act</i>	224	FRAGMIN INJ 12500UNT	44
<i>fluticasone propionate oint 0.005%</i> ...	147	FRAGMIN INJ 15000UNT	44
<i>fluticasone-salmeterol aer powder ba 113-14 mcg/act</i>	40	FRAGMIN INJ 18000UNT	44
<i>fluticasone-salmeterol aer powder ba 232-14 mcg/act</i>	40	FRAGMIN INJ 2500/0.2	44
<i>fluticasone-salmeterol aer powder ba 55-14 mcg/act</i>	40	FRAGMIN INJ 5000/0.2	44
FLUVIRIN INJ	260	FRAGMIN INJ 7500/0.3	44
FLUVIRIN INJ PF	260	<i>fruity chews chw</i>	221
<i>fluvoxamine maleate tab 100 mg</i>	51	<i>fruity chews chw /iron</i>	219
<i>fluvoxamine maleate tab 25 mg</i>	50	FULPHILA INJ 6/0.6ML	169
<i>fluvoxamine maleate tab 50 mg</i>	50	<i>fungicure spr intens</i>	142
FLUZONE QUAD INJ	260	<i>fungi-guard cre 1%</i>	142
<i>foam antacid chw 80-20mg</i>	30	<i>fungoid-d cre 1%</i>	142
<i>foam antacid sus</i>	30	<i>furosemide oral soln 10 mg/ml</i>	155
<i>folbee plus tab</i>	197	<i>furosemide oral soln 8 mg/ml</i>	155
<i>folic acid tab 1 mg</i>	169	<i>furosemide tab 20 mg</i>	155
<i>folic acid tab 400mcg</i>	169	<i>furosemide tab 40 mg</i>	155
<i>folic acid tab 800 mcg</i>	169	<i>furosemide tab 80 mg</i>	155
<i>foltrin cap</i>	170	FUZEON INJ 90MG	103
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	44	G	
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	44	<i>gabapentin cap 100 mg</i>	45
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	44	<i>gabapentin cap 300 mg</i>	45
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	44	<i>gabapentin cap 400 mg</i>	45
<i>foot care cre 1%</i>	141	<i>gabapentin oral soln 250 mg/5ml</i>	45
<i>foot&sneaker aer 1%</i>	141	<i>gabapentin tab 600 mg</i>	45
<i>for sty reli oin</i>	226	<i>gabapentin tab 800 mg</i>	45
FORADIL CAP AEROLIZE	40	<i>galantamine hydrobromide cap er 24hr 24 mg</i>	237
<i>formula em sol</i>	65	<i>galantamine hydrobromide cap er 24hr 8 mg</i>	237
FORTEO SOL 600/2.4	156	<i>galantamine hydrobromide tab 12 mg</i> 237	
		<i>galantamine hydrobromide tab 4 mg</i> 237	
		<i>galantamine hydrobromide tab 8 mg</i> 237	
		GAMASTAN INJ	233
		GAMASTAN S/D INJ	233
		GAMMAGARD INJ 1GM/10ML	233

GAMMAGARD SD INJ 10GM HU	233	<i>g-fen ex tab 400mg</i>	134
GAMMAKED INJ 1GM/10ML	233	<i>gianvi tab 3-0.02mg</i>	120
GAMMAPLEX INJ 5%	233	<i>gildagia tab 0.4-35</i>	120
GAMUNEX-C INJ 1GM/10ML	233	<i>gildess fe tab 1.5/30</i>	120
<i>gas relief cap 125mg</i>	160	<i>gildess fe tab 1/20</i>	120
<i>gas relief cap 180mg</i>	160	GILENYA CAP 0.5MG	238
<i>gas relief chw 125mg</i>	160	GILOTRIF TAB 20MG	87
<i>gas relief chw 80mg</i>	160	GILOTRIF TAB 30MG	87
<i>gas relief dro 20/0.3ml</i>	160	GILOTRIF TAB 40MG	88
<i>gas relief dro infants</i>	160	<i>glatiramer acetate soln prefilled syringe</i>	
<i>gas-x cap 125mg</i>	160	<i>20 mg/ml</i>	238
<i>gas-x cap 180mg</i>	160	<i>glatiramer acetate soln prefilled syringe</i>	
<i>gas-x infant dro</i>	160	<i>40 mg/ml</i>	238
<i>gatifloxacin ophth soln 0.5%</i>	229	GLEOSTINE CAP 100MG	85
<i>gavilax pow</i>	178	GLEOSTINE CAP 10MG	85
<i>gavilyte-c sol</i>	177	GLEOSTINE CAP 40MG	85
<i>gavilyte-g sol</i>	177	GLEOSTINE CAP 5MG	85
<i>gavilyte-n sol flav pk</i>	177	<i>glimepiride tab 1 mg</i>	60
<i>gemfibrozil tab 600 mg</i>	78	<i>glimepiride tab 2 mg</i>	60
<i>genahist cap 25mg</i>	70	<i>glimepiride tab 4 mg</i>	60
<i>genaphed tab 30mg</i>	224	<i>glipizide tab 10 mg</i>	61
<i>generlac sol 10gm/15</i>	162	<i>glipizide tab 5 mg</i>	61
<i>gengraf cap 100mg</i>	109	<i>glipizide tab er 24hr 10 mg</i>	61
<i>gengraf cap 25mg</i>	109	<i>glipizide tab er 24hr 2.5 mg</i>	61
<i>gengraf cap 50mg</i>	109	<i>glipizide tab er 24hr 5 mg</i>	61
<i>gengraf sol 100mg/ml</i>	109	<i>glipizide xl tab 10mg</i>	61
<i>genpril tab 200mg</i>	10	<i>glipizide xl tab 2.5mg</i>	61
<i>gentak oin 0.3% op</i>	229	<i>glipizide xl tab 5mg</i>	61
<i>gentamicin sulfate cream 0.1%</i>	140	GLUCAGON KIT 1MG	57
<i>gentamicin sulfate oint 0.1%</i>	140	GLUCOSE CHW FRT PNCH	57
<i>gentamicin sulfate ophth oint 0.3%</i>	229	GLUCOSE CHW GRAPE	57
<i>gentamicin sulfate ophth soln 0.3%</i>	229	GLUCOSE CHW RASPBERRY	57
<i>genteal tear oin nt-time</i>	226	GLUCOSE CHW TROP FRT	57
<i>gentle laxat sup 10mg</i>	181	<i>glucoten cap</i>	202
<i>gentle laxat tab 5mg ec</i>	181	<i>glyburide micronized tab 1.5 mg</i>	61
<i>gentlelax pow</i>	178	<i>glyburide micronized tab 3 mg</i>	61
GENVOYA TAB	103	<i>glyburide micronized tab 6 mg</i>	61
<i>geri-dryl cap 25mg</i>	70	<i>glyburide tab 1.25 mg</i>	61
<i>geri-dryl tab 25mg</i>	70	<i>glyburide tab 2.5 mg</i>	61
<i>geri-hydrola cre 12%</i>	150	<i>glyburide tab 5 mg</i>	61
<i>geri-hydrola lot 12%</i>	150	<i>glyburide-metformin tab 1.25-250 mg</i>	55
<i>geri-kot tab 8.6mg</i>	181	<i>glyburide-metformin tab 2.5-500 mg</i>	55
<i>geri-lanta sus</i>	30	<i>glyburide-metformin tab 5-500 mg</i>	55
<i>geri-tussin syp 100/5ml</i>	134	<i>glycerin ped sup 1.2gm</i>	178
<i>geri-tussin syp dm</i>	129	<i>glycerin sup 2gm</i>	178
<i>gerivite tab complete</i>	202	<i>glycerin suppos 1.2 gm</i>	178

<i>glycerin suppos 2.1 gm</i>	178	<i>gnp glycerin sup 2.1gm</i>	178
<i>glycolax pow 3350 nf</i>	178	<i>gnp healthy tab eyes</i>	202
<i>glycopyrrolate tab 1 mg</i>	255	<i>gnp hydrocor cre 1% plus</i>	147
<i>glycopyrrolate tab 2 mg</i>	255	<i>gnp iron tab 45mg</i>	171
<i>gnp all day tab allergy</i>	74	<i>gnp iron tab 65mg</i>	171
<i>gnp allergy cap 25mg</i>	71	<i>gnp k-pec sus 262/15ml</i>	62
<i>gnp allergy chw 12.5mg</i>	71	<i>gnp laxative sup 10mg</i>	181
<i>gnp allergy tab 25mg</i>	71	<i>gnp laxative tab 25mg</i>	182
<i>gnp allergy tab 4mg</i>	66	<i>gnp lice kit</i>	152
<i>gnp animal chw plus c</i>	221	<i>gnp little chw ones</i>	221
<i>gnp animal chw shapes</i>	221	<i>gnp magnesi tab 250mg</i>	194
<i>gnp antacid chw 1000mg</i>	31	<i>gnp milk mag sus</i>	180
<i>gnp antacid chw 160-105</i>	30	GNP MINERAL OIL HEAVY.....	179
<i>gnp antacid sus anti-gas</i>	30	<i>gnp mucus-er tab 600mg</i>	134
<i>gnp antacid sus cherry</i>	30	<i>gnp niacin tab 250mg</i>	263
<i>gnp antacid sus coolmint</i>	30	<i>gnp niacin tab 250mg tr</i>	263
<i>gnp antacid sus original</i>	30	<i>gnp nicotine gum 2mg mint</i>	241
<i>gnp aspirin chw 81mg</i>	20	<i>gnp nicotine gum 2mg orig</i>	241
<i>gnp aspirin tab 325mg</i>	20	<i>gnp nicotine gum 4mg mint</i>	242
<i>gnp aspirin tab 325mg ec</i>	20	<i>gnp nicotine gum 4mg orig</i>	242
<i>gnp aspirin tab 81mg ec</i>	20	<i>gnp nicotine loz 2mg mint</i>	242
<i>gnp best pow fiber</i>	175	<i>gnp nicotine loz 4mg mint</i>	242
<i>gnp bisa-lax tab 5mg ec</i>	181	<i>gnp one dail tab maximum</i>	202
<i>gnp ca/mg/zn tab</i>	192	<i>gnp opti-vit tab</i>	203
<i>gnp ca/vit d chw minerals</i>	192	<i>gnp senna tab 8.6mg</i>	182
<i>gnp calcium tab 600/d</i>	192	<i>gnp suphedrn liq 15mg/5ml</i>	224
<i>gnp century tab</i>	202	<i>gnp tussin liq dm cough</i>	130
<i>gnp century tab adult</i>	202	<i>gnp tussin liq dm max</i>	130
<i>gnp century tab cardio</i>	202	<i>gnp tussin syp 100/5ml</i>	134
<i>gnp century tab senior</i>	202	<i>gnp vit b-12 tab 1000 cr</i>	168
<i>gnp century tab ultimate</i>	202	<i>gnp vit b-12 tab 1000 pr</i>	168
<i>gnp clearlax pow</i>	178	<i>gnp vit b-12 tab 500mcg</i>	168
GNP DAILY MIS PRENATAL.....	215	<i>gnp vit b-6 tab 100mg</i>	264
<i>gnp dayhist tab 1.34mg</i>	71	<i>gnp zoochews chw gummies</i>	220
<i>gnp ear dro 6.5% ot</i>	232	GOLYTELY SOL.....	177
<i>gnp ear sys sol 6.5% ot</i>	232	<i>granisetron hcl tab 1 mg</i>	63
<i>gnp enema ene</i>	180	<i>griseofulvin microsize susp 125 mg/5ml</i>	65
<i>gnp eye drop sol 0.5% op</i>	227	<i>g-tron liq 10-100/5</i>	129
<i>gnp first oin aid anti</i>	140	<i>guaiasorb dm liq 100-10/5</i>	130
<i>gnp gas relf chw 125mg</i>	160	<i>guaiatuss ac syp 100-10/5</i>	130
<i>gnp gas relf chw 80mg</i>	160	<i>guaicon dms syp 100-10/5</i>	130
GNP GLUCOSE CHW GRAPE.....	57	<i>guaifenesin liquid 100 mg/5ml</i>	134
GNP GLUCOSE CHW ORANGE	57	<i>guaifenesin syp 100-10/5</i>	130
GNP GLUCOSE CHW RASPBERRY	57	<i>guaifenesin syrup 100 mg/5ml</i>	134
GNP GLUCOSE CHW WATERMLN	57	<i>guaifenesin tab 200 mg</i>	134
<i>gnp glycerin sup 1.2gm</i>	178		

<i>guaifenesin tab 400 mg</i>	135	<i>heartbrn rel tab 200mg</i>	257
<i>guaifenesin tab er 12hr 600 mg</i>	135	<i>heartbrn rel tab 75mg</i>	257
<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	130	<i>heartburn chw ex st</i>	30
<i>guanfacine hcl tab 1 mg</i>	81	<i>heartburn tab 150mg</i>	257
<i>guanfacine hcl tab 2 mg</i>	81	<i>heartburn tab 200mg</i>	257
<i>guanfacine hcl tab er 24hr 1 mg (base</i> <i>equiv)</i>	3	<i>heartburn tab 20mg</i>	257
<i>guanfacine hcl tab er 24hr 2 mg (base</i> <i>equiv)</i>	3	<i>heartburn tab relief</i>	257
<i>guanfacine hcl tab er 24hr 3 mg (base</i> <i>equiv)</i>	3	<i>heather tab 0.35mg</i>	124
<i>guanfacine hcl tab er 24hr 4 mg (base</i> <i>equiv)</i>	3	HELIXATE FS INJ 1000UNIT	165
GUANIDINE TAB 125MG	84	HELIXATE FS INJ 250UNIT	165
<i>gummi bear chw multivit</i>	220	HELIXATE FS INJ 500UNIT	165
<i>gummies chw</i>	220	<i>hematogen cap</i>	170
<i>gummy dinos chw</i>	220	HEMLIBRA INJ 105/0.7	165
<i>gummy vit/ chw minerals</i>	220	HEMLIBRA INJ 150/ML	165
<i>gynecort 10 cre 1%</i>	147	HEMLIBRA INJ 30MG/ML	165
H		HEMLIBRA INJ 60/0.4	165
<i>hair formula tab ex stren</i>	203	HEMOFIL M INJ 1000UNIT	165
<i>hair formula tab ultr man</i>	203	HEMOFIL M INJ 1700UNIT	165
<i>hair vitamin tab</i>	203	HEMOFIL M INJ 250UNIT	165
<i>hair/skin/ tab nails</i>	203	HEMOFIL M INJ 500UNIT	165
HALFLYTELY KIT FLAV PKS	177	<i>hemorrhoidal cre</i>	28
<i>halobetasol propionate cream 0.05%</i>	147	HEXALEN CAP 50MG	85
<i>halobetasol propionate oint 0.05%</i>	147	<i>hi-kovite tab 2-part</i>	203
<i>haloperidol decanoate im soln 100 mg/ml</i>	96	<i>hi-potency tab multivit</i>	203
<i>haloperidol decanoate im soln 50 mg/ml</i>	96	HIZENTRA INJ 2GM/10ML	233
<i>haloperidol lactate inj 5 mg/ml</i>	96	<i>hm allergy tab 25mg</i>	71
<i>haloperidol lactate oral conc 2 mg/ml</i>	96	<i>hm allergy tab 4mg</i>	66
<i>haloperidol tab 0.5 mg</i>	96	<i>hm animal chw shapes</i>	220
<i>haloperidol tab 1 mg</i>	96	<i>hm antacid sus anti-gas</i>	30
<i>haloperidol tab 10 mg</i>	96	<i>hm aspirin chw 81mg</i>	20
<i>haloperidol tab 2 mg</i>	96	<i>hm aspirin tab 325mg</i>	20
<i>haloperidol tab 20 mg</i>	96	<i>hm b complex tab with c</i>	197
<i>haloperidol tab 5 mg</i>	96	<i>hm ca/vit d3 tab 600-800</i>	192
HARVONI TAB 90-400MG	107	<i>hm calcium tab citr+d</i>	192
<i>hc-1% hemorr oin 1%</i>	147	<i>hm clearlax pow</i>	178
<i>healthy eyes cap supervis</i>	203	<i>hm complete tab</i>	203
<i>healthy eyes tab</i>	203	<i>hm complete tab 50+</i>	203
<i>healthylax pow</i>	178	<i>hm dry eye sol relief</i>	227
<i>heartbrn ant chw 160-105</i>	30	<i>hm enema ene</i>	180
		<i>hm fiber cap 0.52gm</i>	175
		<i>hm fiber pow 28.3%</i>	175
		<i>hm fiber pow 30.9%</i>	175
		<i>hm fiber pow 48.57%</i>	175
		<i>hm fiber pow 58.6%</i>	175
		<i>hm fiber tab 500mg</i>	175
		<i>hm gas relf chw 125mg</i>	160

<i>hm gas relf chw 80mg</i>	160	HUMIRA PEN INJ CD/UC/HS.....	8
HM GLUCOSE CHW ORANGE.....	57	HUMIRA PEN INJ PS/UV	8
HM GLUCOSE CHW RASPBERRY.....	57	HUMIRA PEN KIT CD/UC/HS	8
<i>hm hydrocort cre 1% plus</i>	147	HUMIRA PEN KIT PS/UV	8
<i>hm ibuprofen tab 200mg</i>	10	<i>humist spr 0.65%</i>	223
<i>hm iron tab 45mg</i>	171	HUMULIN INJ 70/30	59
<i>hm iron tab 65mg</i>	171	HUMULIN INJ 70/30KWP	59
<i>hm laxative tab 5mg ec</i>	182	HUMULIN N INJ U-100	59
<i>hm magnesium tab 250mg</i>	31	HUMULIN N INJ U-100KWP.....	59
HM MINERAL OIL	179	HUMULIN R INJ U-100	59
<i>hm mucus er tab 600mg</i>	135	HUMULIN R INJ U-500	59
<i>hm niacin tab 250mg</i>	264	<i>hydralazine hcl tab 10 mg</i>	83
<i>hm nicotine dis 14mg/24h</i>	242	<i>hydralazine hcl tab 100 mg</i>	83
<i>hm nicotine dis 21mg/24h</i>	242	<i>hydralazine hcl tab 25 mg</i>	83
<i>hm nicotine gum 2mg mint</i>	242	<i>hydralazine hcl tab 50 mg</i>	83
<i>hm nicotine gum 4mg mint</i>	242	<i>hydrochlorothiazide cap 12.5 mg</i>	155
<i>hm nicotine loz 2mg mint</i>	242	<i>hydrochlorothiazide tab 12.5 mg</i>	155
<i>hm nicotine loz 4mg mint</i>	242	<i>hydrochlorothiazide tab 25 mg</i>	156
<i>hm nightttime tab 25mg</i>	172	<i>hydrochlorothiazide tab 50 mg</i>	156
HM ONE DAILY MIS PRENATAL	215	<i>hydrocodone w/ homatropine syrup 5-</i> <i>1.5 mg/5ml</i>	126
<i>hm one daily tab /iron</i>	198	<i>hydrocodone-acetaminophen soln 7.5-</i> <i>325 mg/15ml</i>	26
<i>hm rpd melt tab 160mg</i>	16	<i>hydrocodone-acetaminophen tab 10-325</i> <i>mg</i>	27
<i>hm saline spr 0.65%</i>	223	<i>hydrocodone-acetaminophen tab 10-500</i> <i>mg</i>	27
<i>hm senna tab 8.6mg</i>	182	<i>hydrocodone-acetaminophen tab 10-650</i> <i>mg</i>	27
<i>hm triple oin antibiot</i>	140	<i>hydrocodone-acetaminophen tab 2.5-500</i> <i>mg</i>	26
<i>hm tussin liq adlt dm</i>	130	<i>hydrocodone-acetaminophen tab 5-325</i> <i>mg</i>	26
<i>hm tussin liq dm max</i>	130	<i>hydrocodone-acetaminophen tab 5-500</i> <i>mg</i>	26
<i>hm vit b12 tab 500mcg</i>	168	<i>hydrocodone-acetaminophen tab 7.5-325</i> <i>mg</i>	26
<i>hm vit b6 tab 100mg</i>	264	<i>hydrocodone-acetaminophen tab 7.5-500</i> <i>mg</i>	26
HUMALOG INJ 100/ML	58	<i>hydrocodone-acetaminophen tab 7.5-650</i> <i>mg</i>	27
HUMALOG KWIK INJ 100/ML	59	<i>hydrocodone-acetaminophen tab 7.5-750</i> <i>mg</i>	27
HUMALOG MIX INJ 50/50.....	59	<i>hydrocort ac cre 1%</i>	147
HUMALOG MIX INJ 50/50KWP	59	<i>hydrocort cre 0.5%</i>	147
HUMALOG MIX INJ 75/25KWP	59	<i>hydrocort cre 1%pls 10</i>	148
HUMALOG MIX SUS 75/25	59		
HUMATE-P SOL 2400UNIT.....	166		
HUMATE-P SOL 500-1200	165		
HUMIRA INJ 10/0.1ML	7		
HUMIRA INJ 10MG/0.2	7		
HUMIRA INJ 20/0.2ML	7		
HUMIRA INJ 40/0.4ML	7		
HUMIRA KIT 20MG/0.4	7		
HUMIRA KIT 40MG/0.8	7		
HUMIRA PEDIA INJ CROHNS.....	7		
HUMIRA PEN INJ 40/0.4ML.....	8		
HUMIRA PEN INJ 40MG/0.8	8		

<i>hydrocort/ cre aloe 1%</i>	148		
<i>hydrocortisone acetate-aloe vera cream 0.5%</i>	148		
<i>hydrocortisone cream 0.5%</i>	148		
<i>hydrocortisone cream 1%</i>	148		
<i>hydrocortisone cream 2.5%</i>	148		
<i>hydrocortisone enema 100 mg/60ml</i> ...	28		
<i>hydrocortisone lotion 2.5%</i>	148		
<i>hydrocortisone oint 0.5%</i>	148		
<i>hydrocortisone oint 1%</i>	148		
<i>hydrocortisone oint 2.5%</i>	148		
<i>hydrocortisone tab 10 mg</i>	125		
<i>hydrocortisone tab 20 mg</i>	125		
<i>hydrocortisone tab 5 mg</i>	125		
<i>hydrocortisone valerate cream 0.2%</i> .	148		
<i>hydrocortisone w/ acetic acid otic soln 1-2%</i>	232		
<i>hydrocortisone-aloe vera cream 0.5%</i>	148		
<i>hydrocream cre 1%</i>	148		
<i>hydrogesic cap 5-500mg</i>	27		
<i>hydro-lotion lot 1%</i>	147		
<i>hydromet syp 5-1.5/5</i>	126		
<i>hydromorphone hcl tab 2 mg</i>	23		
<i>hydromorphone hcl tab 4 mg</i>	23		
<i>hydrophor oin</i>	150		
<i>hydroskin cre 1%</i>	148		
<i>hydroxychloroquine sulfate tab 200 mg</i>	83		
HYDROXYPROG POW CAPROATE	119		
<i>hydroxyprogesterone caproate im in oil 1.25 gm/5ml</i>	86		
<i>hydroxyprogesterone caproate im in oil 250 mg/ml</i>	236		
<i>hydroxyurea cap 500 mg</i>	90		
<i>hydroxyzine hcl syrup 10 mg/5ml</i>	35		
<i>hydroxyzine hcl tab 10 mg</i>	35		
<i>hydroxyzine hcl tab 25 mg</i>	35		
<i>hydroxyzine hcl tab 50 mg</i>	35		
<i>hydroxyzine pamoate cap 100 mg</i>	35		
<i>hydroxyzine pamoate cap 25 mg</i>	35		
<i>hydroxyzine pamoate cap 50 mg</i>	35		
<i>hyoscyamine sulfate sl tab 0.125 mg</i> .255			
<i>hyoscyamine sulfate soln 0.125 mg/ml</i>	255		
<i>hyoscyamine sulfate tab 0.125 mg</i>	255		
<i>hyoscyamine sulfate tab disint 0.125 mg</i>	255		
<i>hyoscyamine sulfate tab er 12hr 0.375 mg</i>	255		
<i>hyosyne dro 0.125/ml</i>	256		
<i>hyosyne elx 0.125/5</i>	256		
<i>hypotears oin op</i>	227		
HYQVIA INJ 10-800	233		
HYQVIA INJ 2.5-200	233		
HYQVIA INJ 20-1600	233		
HYQVIA INJ 30-2400	233		
HYQVIA INJ 5-400	233		
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<i>ibandronate sodium tab 150 mg (base equivalent)</i>	156		
IBRANCE CAP 100MG	88		
IBRANCE CAP 125MG	88		
IBRANCE CAP 75MG	88		
<i>ibu-drops dro 40mg/ml</i>	10		
<i>ibu-drops dro 50/1.25</i>	10		
<i>ibuprfn liqd cap 200mg</i>	10		
<i>ibuprofen cap 200 mg</i>	10		
<i>ibuprofen ch sus 100/5ml</i>	10		
<i>ibuprofen dro 50/1.25</i>	10		
<i>ibuprofen ib chw 100mg</i>	10		
<i>ibuprofen ib tab 200mg</i>	10		
<i>ibuprofen jr chw 100mg</i>	10		
<i>ibuprofen js chw 100mg</i>	10		
<i>ibuprofen sus 100/5ml</i>	10		
<i>ibuprofen tab 200 mg</i>	11		
<i>ibuprofen tab 400 mg</i>	11		
<i>ibuprofen tab 600 mg</i>	11		
<i>ibuprofen tab 800 mg</i>	11		
icaps cap	203		
icaps lutein cap /omega-3	203		
icaps mv tab	203		
ICLUSIG TAB 15MG	88		
ICLUSIG TAB 45MG	88		
<i>iferex 150 cap</i>	171		
<i>iferex 150 cap forte</i>	170		
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	88		
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	88		
IMBRUVICA CAP 140MG	88		
<i>imipenem-cilastatin intravenous for soln 250 mg</i>	33		

<i>imipenem-cilastatin intravenous for soln</i>	
500 mg	33
<i>imipramine hcl tab 10 mg</i>	53
<i>imipramine hcl tab 25 mg</i>	53
<i>imipramine hcl tab 50 mg</i>	53
<i>imiquimod cream 5%</i>	150
<i>inatal gt tab</i>	222
INCRELEX INJ 40MG/4ML.....	157
INCRUSE ELPT INH 62.5MCG.....	39
<i>indapamide tab 1.25 mg</i>	156
<i>indapamide tab 2.5 mg</i>	156
<i>indomethacin cap 25 mg</i>	11
<i>indomethacin cap 50 mg</i>	11
<i>inf silapap dro 80/0.8ml</i>	16
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<i>inst ear-dry dro 95-5%</i>	232
<i>instacort 5 cre 0.5%</i>	148
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INTRON A INJ 18MU.....	90
INTRON A INJ 25MU.....	90
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<i>introvale tab</i>	120
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INVEGA SUST INJ 117/0.75	94
INVEGA SUST INJ 156MG/ML	94
INVEGA SUST INJ 234/1.5	94
INVEGA SUST INJ 39/0.25	94
INVEGA SUST INJ 78/0.5ML.....	94
INVEGA TRINZ INJ 273MG	94
INVEGA TRINZ INJ 410MG	94
INVEGA TRINZ INJ 546MG	94
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<i>ipratropium bromide inhal soln 0.02%</i>	39
<i>ipratropium bromide nasal soln 0.03%</i> (21 mcg/spray)	224
<i>ipratropium bromide nasal soln 0.06%</i> (42 mcg/spray)	224
<i>ipratropium-albuterol nebu soln 0.5-</i> <i>2.5(3) mg/3ml</i>	40
<i>i-prin tab 200mg</i>	10
<i>irbesartan tab 150 mg</i>	80
<i>irbesartan tab 300 mg</i>	80
<i>irbesartan tab 75 mg</i>	80
<i>irbesartan-hydrochlorothiazide tab 150-</i> <i>12.5 mg</i>	82
<i>irbesartan-hydrochlorothiazide tab 300-</i> <i>12.5 mg</i>	82
<i>iron chw pediatri</i>	171
<i>iron complex cap</i>	170
<i>iron slow tab 45mg</i>	171
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<i>isoniazid syrup 50 mg/5ml</i>	84
<i>isoniazid tab 100 mg</i>	84
<i>isoniazid tab 300 mg</i>	84
<i>isosorbide dinitrate sl tab 2.5 mg</i>	33
<i>isosorbide dinitrate tab 10 mg</i>	34
<i>isosorbide dinitrate tab 20 mg</i>	34
<i>isosorbide dinitrate tab 30 mg</i>	34
<i>isosorbide dinitrate tab 5 mg</i>	34
<i>isosorbide mononitrate tab 10 mg</i>	34
<i>isosorbide mononitrate tab 20 mg</i>	34
<i>isosorbide mononitrate tab er 24hr 120</i> <i>mg</i>	34
<i>isosorbide mononitrate tab er 24hr 30</i> <i>mg</i>	34
<i>isosorbide mononitrate tab er 24hr 60</i> <i>mg</i>	34
<i>isotretinoin cap 10 mg</i>	138
<i>isotretinoin cap 20 mg</i>	138
<i>isotretinoin cap 30 mg</i>	138
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<i>itraconazole cap 100 mg</i>	65
<i>ivermectin tab 3 mg</i>	32
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<i>i-vite tab</i>	203
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JAKAFI TAB 10MG	88
JAKAFI TAB 15MG	88

JAKAFI TAB 20MG	88	<i>ketoconazole tab 200 mg</i>	65
JAKAFI TAB 25MG	88	<i>ketoprofen cap 50 mg</i>	11
JAKAFI TAB 5MG	88	<i>ketoprofen cap 75 mg</i>	11
<i>jantoven tab 10mg</i>	42	<i>ketorolac tromethamine ophth soln 0.4%</i>	231
<i>jantoven tab 1mg</i>	42	<i>ketorolac tromethamine ophth soln 0.5%</i>	231
<i>jantoven tab 2.5mg</i>	42	<i>ketorolac tromethamine tab 10 mg</i>	11
<i>jantoven tab 2mg</i>	42	<i>ketotif fum dro 0.025%op</i>	231
<i>jantoven tab 3mg</i>	42	<i>ketotifen fumarate ophth soln 0.025%</i> (base equiv)	231
<i>jantoven tab 4mg</i>	42	KEVZARA INJ 150/1.14	9
<i>jantoven tab 5mg</i>	42	KEVZARA INJ 200/1.14	9
<i>jantoven tab 6mg</i>	42	<i>kionex pow</i>	110
<i>jantoven tab 7.5mg</i>	42	<i>kionex sus 15gm/60</i>	110
JARDIANCE TAB 10MG	248	<i>klor-con 10 tab 10meq er</i>	195
JARDIANCE TAB 25MG	248	<i>klor-con 8 tab 8meq er</i>	195
<i>jck itch pow aer 1%</i>	142	<i>klor-con m10 tab 10meq er</i>	195
<i>jencycla tab 0.35mg</i>	124	<i>klor-con m20 tab 20meq er</i>	195
<i>jock itch aer 1%</i>	142	<i>klor-con/ef tab 25meq fr</i>	195
<i>jock itch cre 1%</i>	142	<i>kls allergy tab 25mg</i>	71
<i>jolessa tab</i>	120	<i>kls anti-dia tab 2mg</i>	63
<i>jolivette tab 0.35mg</i>	124	<i>kls aspirin tab 325mg ec</i>	21
JULUCA TAB 50-25MG	102	<i>kls aspirin tab 81mg ec</i>	21
<i>junel 1.5/30 tab</i>	120	<i>kls fiber tb tab 625mg</i>	175
<i>junel 1/20 tab</i>	120	<i>kls hydrocrt cre pls 1%</i>	148
<i>junel fe tab 1.5/30</i>	121	<i>kls ibuprofn tab 200mg</i>	11
<i>junel fe tab 1/20</i>	121	<i>kls naproxen tab 220mg</i>	11
<i>junior mapap tab 160mg rt</i>	16	<i>kls quit2 gum 2mg</i>	242
<i>just tears sol eye drop</i>	227	<i>kls quit4 gum 4mg</i>	242
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KALETRA TAB 200-50MG	104	KOATE INJ 500 UNIT	166
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KALYDECO TAB 150MG	248	KOATE-DVI INJ 500UNIT	166
<i>kaopectate sus 262/15ml</i>	62	KOGENATE FS INJ 1000UNIT	166
<i>kao-tin cap 240mg</i>	184	KOGENATE FS INJ 250UNIT	166
<i>kao-tin sus 262/15ml</i>	62	KOGENATE FS INJ 500UNIT	166
<i>karidium dro 0.125mg</i>	194	KOMBIGLYZ XR TAB 2.5-1000	55
<i>karigel gel 0.5%</i>	197	KOMBIGLYZ XR TAB 5-1000MG	55
<i>karigel-n gel 1.1%</i>	197	KOMBIGLYZ XR TAB 5-500MG	55
<i>kariva tab 28 day</i>	121	<i>konsyl cap 520mg</i>	175
<i>k-effervesce tab 25meq ef</i>	195	KONSYL DAILY POW 100%	175
<i>kelnor tab 1/35</i>	121	<i>konsyl daily pow 28.3%</i>	175
KEPIVANCE INJ 6.25MG	90	KONSYL DAILY POW 28.3%	175
<i>kericort 10 cre 1%</i>	148		
<i>ketoconazole cream 2%</i>	142		
<i>ketoconazole shampoo 2%</i>	142		

<i>konsyl fiber tab 625mg</i>	175	<i>lamivudine tab 100 mg (hbv)</i>	104
<i>konsyl pow 30.9%</i>	175	<i>lamivudine tab 150 mg</i>	104
KONSYL-D POW 52.3%.....	175	<i>lamivudine tab 300 mg</i>	104
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KOVALTRY INJ 250UNIT.....	166	<i>lamotrigine tab 150 mg</i>	45
KOVALTRY INJ 3000UNIT.....	166	<i>lamotrigine tab 200 mg</i>	45
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<i>kp adult 50+ tab daily</i>	203	<i>lamotrigine tab chewable dispersible 25</i> <i>mg</i>	46
<i>kp adults tab daily</i>	203	<i>lamotrigine tab chewable dispersible 5</i> <i>mg</i>	46
<i>kp aspirin tab 81mg ec</i>	21	<i>lanabiotic oin</i>	140
<i>kp b complex tab /c</i>	197	<i>lanacort 10 cre 1%</i>	148
<i>kp bisacodyl tab 5mg ec</i>	182	LANCETS.....	187
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<i>kp mens tab daily</i>	203	<i>lansoprazole cap 15mg dr</i>	259
<i>kp omega-3 cap 1200mg</i>	226	<i>lansoprazole cap delayed release 15 mg</i>	259
<i>kp women 50+ tab daily</i>	203	<i>larin fe tab 1.5/30</i>	121
<i>kp womens tab daily</i>	203	<i>larin fe tab 1/20</i>	121
KPN PRENATAL TAB.....	215	<i>larin tab 1.5/30</i>	121
<i>k-prime tab 25meq ef</i>	195	<i>larin tab 1/20</i>	121
KROG GLUCOSE CHW ORANGE.....	57	<i>latanoprost ophth soln 0.005%</i>	231
KROG GLUCOSE CHW RASPBERRY.....	57	LATUDA TAB 120MG.....	93
KROG GLUCOSE CHW TROP FRT.....	57	LATUDA TAB 20MG.....	93
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<i>ks ibuprofen cap 200mg</i>	11	LATUDA TAB 60MG.....	93
<i>kurvelo tab 0.15/30</i>	121	LATUDA TAB 80MG.....	93
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<i>k-vescent tab 25meq ef</i>	195	<i>laxa basic cap 100mg</i>	184
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L		<i>laxaclear pow</i>	178
<i>labetalol hcl tab 100 mg</i>	110	<i>laxative chw 15mg</i>	182
<i>labetalol hcl tab 200 mg</i>	110	<i>laxative pls tab 8.6-50mg</i>	177
<i>labetalol hcl tab 300 mg</i>	110	<i>laxative tab 25mg</i>	182
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<i>lactic acid (ammonium lactate) cream</i> <i>12%</i>	150	<i>laxative tab max-str</i>	182
<i>lactic acid (ammonium lactate) lotion</i> <i>12%</i>	150	<i>laxative tab w/senna</i>	182
<i>lactulose (encephalopathy) solution 10</i> <i>gm/15ml</i>	162	LEDIP-SOFOSB TAB 90-400MG.....	107
<i>lactulose solution 10 gm/15ml</i>	178	<i>leena tab</i>	121
<i>lamisil af aer 1%</i>	142	<i>leflunomide tab 10 mg</i>	13
<i>lamivudine oral soln 10 mg/ml</i>	104		

<i>leflunomide tab 20 mg</i>	13	<i>eth est tab 0.01mg(7)</i>	121
LENVIMA CAP 10 MG	88	<i>levora-28 tab 0.15/30</i>	121
LENVIMA CAP 14 MG	88	<i>levo-t tab 300 mcg</i>	250
LENVIMA CAP 20 MG	88	<i>levothyroxine sodium tab 100 mcg</i> ...	250
LENVIMA CAP 24 MG	88	<i>levothyroxine sodium tab 112 mcg</i> ...	250
<i>lessina tab</i>	121	<i>levothyroxine sodium tab 125 mcg</i> ...	250
LETAIRIS TAB 10MG.....	116	<i>levothyroxine sodium tab 137 mcg</i> ...	250
LETAIRIS TAB 5MG	116	<i>levothyroxine sodium tab 150 mcg</i> ...	250
<i>letrozole tab 2.5 mg</i>	86	<i>levothyroxine sodium tab 175 mcg</i> ...	250
<i>leucovorin calcium tab 10 mg</i>	90	<i>levothyroxine sodium tab 200 mcg</i> ...	250
<i>leucovorin calcium tab 15 mg</i>	90	<i>levothyroxine sodium tab 25 mcg</i>	250
<i>leucovorin calcium tab 25 mg</i>	90	<i>levothyroxine sodium tab 300 mcg</i> ...	250
<i>leucovorin calcium tab 5 mg</i>	90	<i>levothyroxine sodium tab 50 mcg</i>	250
LEUKERAN TAB 2MG.....	85	<i>levothyroxine sodium tab 75 mcg</i>	250
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<i>leuprolide acetate inj kit 5 mg/ml</i>	86	<i>levoxyl tab 100mcg</i>	251
LEVATOL TAB 20MG	111	<i>levoxyl tab 112mcg</i>	251
<i>levetiracetam oral soln 100 mg/ml</i>	46	<i>levoxyl tab 125mcg</i>	251
<i>levetiracetam tab 1000 mg</i>	46	<i>levoxyl tab 137mcg</i>	251
<i>levetiracetam tab 250 mg</i>	46	<i>levoxyl tab 150mcg</i>	251
<i>levetiracetam tab 500 mg</i>	46	<i>levoxyl tab 175mcg</i>	251
<i>levetiracetam tab 750 mg</i>	46	<i>levoxyl tab 200mcg</i>	251
<i>levetiracetam tab er 24hr 500 mg</i>	46	<i>levoxyl tab 25mcg</i>	250
<i>levetiracetam tab er 24hr 750 mg</i>	46	<i>levoxyl tab 50mcg</i>	251
<i>levobunolol hcl ophth soln 0.25%</i>	228	<i>levoxyl tab 75mcg</i>	251
<i>levobunolol hcl ophth soln 0.5%</i>	228	<i>levoxyl tab 88mcg</i>	251
<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	157	<i>lice bedding aer</i>	152
<i>levocarnitine tab 330 mg</i>	157	<i>lice bedding aer 0.5%</i>	152
<i>levocetirizine dihydrochloride soln 2.5</i> <i>mg/5ml (0.5 mg/ml)</i>	74	<i>lice killing sha</i>	152
<i>levocetirizine dihydrochloride tab 5 mg</i> 74		<i>lice killing sha 0.33-4%</i>	152
<i>levofloxacin ophth soln 0.5%</i>	229	<i>lice soln kit</i>	152
<i>levofloxacin oral soln 25 mg/ml</i>	160	<i>lice soln kit complete</i>	152
<i>levofloxacin tab 250 mg</i>	160	<i>lice treatmt lot 1%</i>	152
<i>levofloxacin tab 500 mg</i>	160	<i>lice treatmt sha 0.33-4%</i>	152
<i>levofloxacin tab 750 mg</i>	160	<i>lice trtmnt liq 1%</i>	152
<i>levonest tab</i>	121	<i>lice trtmnt liq crm rnse</i>	152
<i>levonorgestrel & ethinyl estradiol (91-</i> <i>day) tab 0.15-0.03 mg</i>	121	<i>licide aer 0.5%</i>	152
<i>levonorgestrel & ethinyl estradiol tab 0.1</i> <i>mg-20 mcg</i>	121	<i>licide comp kit treatmnt</i>	152
<i>levonorgestrel & ethinyl estradiol tab</i> <i>0.15 mg-30 mcg</i>	121	<i>licide liq max st</i>	152
<i>levonorgestrel tab 1.5 mg</i>	123	<i>licide sha 0.33-4%</i>	152
<i>levonorg-eth est tab 0.15-0.03mg(84) &</i>		<i>lidocaine hcl soln 4%</i>	151
		<i>lidocaine hcl urethral/mucosal gel 2%</i> 151	
		<i>lidocaine hcl viscous soln 2%</i>	196
		<i>lidocaine patch 5%</i>	151
		<i>lidocaine-prilocaine cream 2.5-2.5%</i> . 151	
		<i>lidocream cre 4%</i>	151

<i>life pack tab mens</i>	204	<i>loperamide hcl liq 1 mg/5ml (0.2 mg/ml)</i>	
<i>life pack tab womens</i>	204		63
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<i>linezolid for susp 100 mg/5ml</i>	33	<i>loperamide tab 2mg</i>	63
<i>linezolid tab 600 mg</i>	33	<i>lopinavir-ritonavir soln 400-100 mg/5ml</i>	
<i>liothyronine sodium iv soln 10 mcg/ml</i>		<i>(80-20 mg/ml)</i>	104
.....	251	<i>loradamed tab 10mg</i>	75
<i>liothyronine sodium tab 25 mcg</i>	251	<i>loratadine d tab 5-120mg</i>	130
<i>liothyronine sodium tab 5 mcg</i>	251	<i>loratadine syp 5mg/5ml</i>	75
<i>liothyronine sodium tab 50 mcg</i>	251	<i>loratadine tab 10 mg</i>	75
<i>liq ca/vit d cap 600mg</i>	192	<i>loratadine tab 10mg</i>	75
<i>liquibid tab 400mg</i>	135	<i>lorata-dine tab d 24hr</i>	130
<i>liquitears sol</i>	227	<i>loratadine-d tab 10-240mg</i>	130
<i>lisinopril & hydrochlorothiazide tab 10-</i>		<i>loratadine-d tab 5-120mg</i>	130
<i>12.5 mg</i>	82	<i>lorazepam conc 2 mg/ml</i>	37
<i>lisinopril & hydrochlorothiazide tab 20-</i>		<i>lorazepam tab 0.5 mg</i>	37
<i>12.5 mg</i>	82	<i>lorazepam tab 1 mg</i>	37
<i>lisinopril & hydrochlorothiazide tab 20-25</i>		<i>lorazepam tab 2 mg</i>	37
<i>mg</i>	82	<i>loryna tab 3-0.02mg</i>	121
<i>lisinopril tab 10 mg</i>	79	<i>losartan potassium & hydrochlorothiazide</i>	
<i>lisinopril tab 2.5 mg</i>	79	<i>tab 100-12.5 mg</i>	82
<i>lisinopril tab 20 mg</i>	79	<i>losartan potassium & hydrochlorothiazide</i>	
<i>lisinopril tab 30 mg</i>	80	<i>tab 100-25 mg</i>	83
<i>lisinopril tab 40 mg</i>	80	<i>losartan potassium & hydrochlorothiazide</i>	
<i>lisinopril tab 5 mg</i>	79	<i>tab 50-12.5 mg</i>	82
<i>lithium carbonate cap 150 mg</i>	93	<i>losartan potassium tab 100 mg</i>	80
<i>lithium carbonate cap 300 mg</i>	93	<i>losartan potassium tab 25 mg</i>	80
<i>lithium carbonate cap 600 mg</i>	93	<i>losartan potassium tab 50 mg</i>	80
<i>lithium carbonate tab 300 mg</i>	93	<i>lotrimin af aer 2%</i>	142
<i>lithium carbonate tab er 300 mg</i>	93	<i>lotrimin af pow 2%</i>	142
<i>lithium carbonate tab er 450 mg</i>	93	<i>lovastatin tab 10 mg</i>	78
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<i>little anima chw plus fe</i>	219	<i>lovastatin tab 40 mg</i>	78
<i>little chw animals</i>	221	<i>low-ogestrel tab</i>	121
<i>little noses dro stuf nos</i>	223	<i>loxapine succinate cap 10 mg</i>	97
<i>little noses spr 0.65%</i>	223	<i>loxapine succinate cap 25 mg</i>	97
<i>little remed liq 160/5ml</i>	16	<i>loxapine succinate cap 5 mg</i>	97
<i>little remed sus 20/.03ml</i>	160	<i>loxapine succinate cap 50 mg</i>	97
LITTLE TUMMY DRO 20/0.3ML	160	<i>lubricant dro 0.4-0.3%</i>	227
<i>little tummy sol nausea</i>	65	<i>lubricant dro eye</i>	227
<i>lomustine cap 10 mg</i>	85	<i>lubricant oin eye</i>	227
<i>lomustine cap 100 mg</i>	85	<i>lubricating dro 0.5%</i>	227
<i>lomustine cap 40 mg</i>	85	<i>lubricnt eye dro</i>	227
LONSURF TAB 15-6.14	85	<i>lubricnt eye dro 0.4-0.3%</i>	227
LONSURF TAB 20-8.19	85	<i>lubricnt eye dro 0.5% op</i>	227
<i>loperamide cap 2mg</i>	63	<i>lubricnt eye oin fast act</i>	227

<i>ludent chw 0.25mg f</i>	194
<i>ludent chw 0.5mg f</i>	194
<i>ludent chw 1mg f</i>	194
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<i>lyza tab 0.35mg</i>	124

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<i>maalox advan sus max st</i>	30
<i>maalox child chw</i>	31
<i>maalox max sus cherry</i>	30
<i>maalox max sus lemon</i>	30
<i>maalox max sus wild bry</i>	30
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<i>macuvite tab eye care</i>	204
<i>macuvite tab lutein</i>	204
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<i>mag citrate sol cherry</i>	180
<i>mag citrate sol lemon</i>	180
<i>mag-al plus liq</i>	30
<i>mag-al plus liq xs</i>	30
<i>magdelay tab 70mg</i>	194
<i>mag-g tab 500mg</i>	194
<i>magic bullet sup 10mg</i>	182
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<i>magnesium gluconate tab 500 mg (27</i> <i>mg elemental mg)</i>	194
<i>magnesium oxide cap 500 mg (elemental</i> <i>mg)</i>	194
<i>magnesium oxide tab 250 mg</i>	32
<i>magnesium oxide tab 250 mg (mg</i> <i>supplement)</i>	195
<i>magnesium oxide tab 400 mg (240 mg</i> <i>elemental mg)</i>	32
<i>magnesium oxide tab 400 mg (241.3 mg</i> <i>elemental mg)</i>	195
<i>magnesium oxide tab 420 mg</i>	32
<i>magnesium oxide tab 500 mg (mg</i> <i>supplement)</i>	195
<i>magnesium sulfate inj 50%</i>	195
<i>magnesium tab 200 mg</i>	195
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<i>magnesium tab 400 mg</i>	195
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<i>mapap child chw 80mg</i>	17
<i>mapap childr sus 160/5ml</i>	17
<i>mapap chw 80mg</i>	17
<i>mapap liq 160/5ml</i>	17
<i>mapap tab 325mg</i>	17
<i>mapap tab 500mg</i>	17
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<i>maxapap rs tab 325mg</i>	17
<i>maxapap tab 500mg</i>	17
<i>maximum tab blue lab</i>	204
<i>maximum tab green lb</i>	204

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<i>meclizine hcl chew tab 25 mg</i>	64	<i>melatonin tab 1 mg</i>	6
<i>meclizine hcl tab 12.5 mg</i>	64	<i>melatonin tab 3 mg</i>	6
<i>meclizine hcl tab 25 mg</i>	64	<i>melatonin tab 300 mcg</i>	6
<i>meclofenamate sodium cap 100 mg</i>	11	<i>melatonin tab 5 mg</i>	6
<i>meclofenamate sodium cap 50 mg</i>	11	<i>melatonin tab 5mg</i>	6
<i>med-derm hc cre 0.5%</i>	148	<i>melatonin tab er 10 mg</i>	6
<i>med-derm hc cre 1%</i>	148	<i>melatonin tab max st</i>	6
<i>medi-bismuth chw 262mg</i>	62	<i>melatonin tab vit b-6</i>	7
<i>medifin 400 tab 400mg</i>	135	<i>melatonin tablet disintegrating 5 mg</i>	6
<i>medi-laxx cap 8.6-50mg</i>	177	<i>melatonin tr tab /vit-b6</i>	7
<i>medi-mucil cap 0.52gm</i>	175	<i>melatonin-pyridoxine tab 3-2 mg</i>	7
<i>medi-natural tab 8.6mg</i>	182	<i>meloxicam tab 15 mg</i>	12
<i>medi-phedryl cap 25mg</i>	71	<i>meloxicam tab 7.5 mg</i>	11
<i>mediplex tab plus</i>	204	<i>melphalan hcl for inj 50 mg (base equiv)</i>	85
<i>medi-profen cap 200mg</i>	11	<i>melphalan tab 2 mg</i>	85
<i>medi-profen sus 100/5ml</i>	11	<i>memantine hcl cap er 24hr 14 mg</i>	237
<i>medi-profen tab 200mg</i>	11	<i>memantine hcl cap er 24hr 21 mg</i>	237
<i>mediproxen tab 220mg</i>	11	<i>memantine hcl cap er 24hr 28 mg</i>	237
<i>medi-tabs tab 500mg</i>	17	<i>memantine hcl cap er 24hr 7 mg</i>	237
<i>medi-tuss dm liq diabetic</i>	130	<i>memantine hcl oral solution 2 mg/ml</i>	237
<i>medi-tussin syp dm</i>	130	<i>memantine hcl tab 10 mg</i>	237
<i>medroxyprogesterone acetate im susp</i> <i>150 mg/ml</i>	124	<i>memantine hcl tab 5 mg</i>	237
<i>medroxyprogesterone acetate im susp</i> <i>prefilled syr 150 mg/ml</i>	124	<i>memantine hcl tab 5 mg (28) & 10 mg</i> <i>(21) titration pak</i>	237
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<i>medroxyprogesterone acetate tab 5 mg</i>	236	<i>meperidine hcl oral soln 50 mg/5ml</i>	23
<i>mefenamic acid cap 250 mg</i>	11	<i>meperidine hcl tab 100 mg</i>	23
<i>mefloquine hcl tab 250 mg</i>	83	<i>meperidine hcl tab 50 mg</i>	23
<i>mega multi tab men</i>	204	MEPHYTON TAB 5MG	262
<i>mega multi tab women</i>	204	<i>meprobamate tab 200 mg</i>	35
<i>mega vm-80 tab</i>	204	<i>meprobamate tab 400 mg</i>	35
<i>megestrol acetate susp 40 mg/ml</i>	86	<i>mercaptopurine tab 50 mg</i>	86
<i>megestrol acetate tab 20 mg</i>	86	<i>meropenem iv for soln 500 mg</i>	33
<i>megestrol acetate tab 40 mg</i>	86	<i>mesalamine tab delayed release 800 mg</i>	162
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<i>melatin tab 3-1mg</i>	7	METAMUCIL POW 55.46%	175
<i>melatonin cap 3 mg</i>	6	METAMUCIL POW 58.12%	175
<i>melatonin cap 5 mg</i>	6	<i>metamucil pow 58.6%</i>	175
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metformin hcl tab 850 mg.....	56	methylphenidate hcl cap er 50 mg (cd) .	5
metformin hcl tab er 24hr 500 mg	56	methylphenidate hcl cap er 60 mg (cd) .	5
metformin hcl tab er 24hr 750 mg	56	methylphenidate hcl soln 10 mg/5ml	5
methadone hcl soln 10 mg/5ml	23	methylphenidate hcl soln 5 mg/5ml	5
methadone hcl soln 5 mg/5ml	23	methylphenidate hcl tab 10 mg	5
methadone hcl tab 10 mg	23	methylphenidate hcl tab 20 mg	5
methadone hcl tab 5 mg	23	methylphenidate hcl tab 5 mg.....	5
methamphetamine hcl tab 5 mg	2	methylphenidate hcl tab er 10 mg	5
methazolamide tab 25 mg	154	methylphenidate hcl tab er 20 mg	5
methazolamide tab 50 mg	154	methylphenidate hcl tab er 24hr 36 mg	5
methenamine hippurate tab 1 gm	259	methylphenidate hcl tab er osmotic release (osm) 18 mg	5
methergine tab 0.2mg	232	methylphenidate hcl tab er osmotic release (osm) 27 mg	5
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<i>metoprolol tartrate tab 100 mg</i>	111	<i>milk of magn sus</i>	180
<i>metoprolol tartrate tab 25 mg</i>	111	<i>milk of magn sus 1200/15</i>	180
<i>metoprolol tartrate tab 50 mg</i>	111	MILK OF MAGN SUS 2400MG.....	180
<i>metoprolol tartrate tab 75 mg</i>	111	<i>milk of magn sus 400/5ml</i>	180
<i>metronidazole cream 0.75%</i>	151	<i>milk of magn sus cherry</i>	180
<i>metronidazole gel 0.75%</i>	152	<i>milk of magn sus frsh mnt</i>	180
<i>metronidazole lotion 0.75%</i>	152	<i>milk of magn sus mint</i>	180
<i>metronidazole tab 250 mg</i>	32	<i>milltrium sr tab</i>	204
<i>metronidazole tab 500 mg</i>	32	<i>milltrium tab advanced</i>	204
<i>metronidazole vaginal gel 0.75%</i>	261	<i>milltrium tab cardio</i>	204
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<i>mexiletine hcl cap 250 mg</i>	38	<i>minerin cre</i>	151
<i>mg217 gel 1%</i>	148	<i>miniprin low tab 81mg ec</i>	21
<i>mgo tab 400mg</i>	195	<i>minitrans dis 0.2mg/hr</i>	34
<i>mi-acid chw</i>	30	<i>minitrans dis 0.4mg/hr</i>	34
<i>mi-acid gas chw 80mg</i>	160	<i>minitrans dis 0.6mg/hr</i>	34
<i>mi-acid sus</i>	30	<i>minocycline hcl cap 100 mg</i>	249
<i>mi-acid sus max st</i>	30	<i>minocycline hcl cap 50 mg</i>	249
<i>micaderm cre 2%</i>	142	<i>minoxidil tab 10 mg</i>	83
<i>miconazole 3 cre 4%</i>	261	<i>minoxidil tab 2.5 mg</i>	83
<i>miconazole 3 kit 4%</i>	261	<i>mintox plus chw</i>	30
<i>miconazole 3 kit combinat</i>	261	<i>mintox sus</i>	30
<i>miconazole 3 kit combo pk</i>	261	<i>mintox sus max st</i>	30
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<i>miconazole 7 cre tube/kit</i>	261	<i>mirtazapine tab 30 mg</i>	49
<i>miconazole 7 sup 100mg</i>	261	<i>mirtazapine tab 45 mg</i>	49
<i>miconazole aer 2%</i>	142	<i>misoprostol tab 100 mcg</i>	259
<i>miconazole cre 2%</i>	142	<i>misoprostol tab 200 mcg</i>	259
<i>miconazole nitrate aerosol pow 2%</i> ...	142	MISSION PREN TAB /FA	222
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<i>miconazole nitrate vaginal suppos 100</i>		<i>mitoxantrone hcl inj conc 20 mg/10ml (2</i>	
<i>mg</i>	261	<i>mg/ml)</i>	87
<i>miconazorb pow af 2%</i>	142	<i>mm aspirin tab 325mg</i>	21
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<i>micro guard pow 2%</i>	142	<i>modafinil tab 200 mg</i>	6
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<i>microgestin tab 1/20</i>	121	<i>mometasone furoate cream 0.1%</i> ...	148
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<i>microgestin tab fe1.5/30</i>	121	<i>mometasone furoate solution 0.1%</i>	
<i>midodrine hcl tab 10 mg</i>	262	<i>(lotion)</i>	148
<i>midodrine hcl tab 2.5 mg</i>	262	<i>monistat 7 kit combo pk</i>	261
<i>midodrine hcl tab 5 mg</i>	262	MONOCLATE-P INJ 1000UNIT	166
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<i>milantex sus original</i>	30	<i>mono-lynyah tab 0.25-35</i>	121

<i>mononessa tab</i>	121	<i>multi complt tab /iron</i>	205
<i>montelukast sodium chew tab 4 mg</i>		<i>multi tab for her</i>	205
<i>(base equiv)</i>	39	<i>multi tab for him</i>	205
<i>montelukast sodium chew tab 5 mg</i>		<i>multi vit/fl chw 1mg</i>	217
<i>(base equiv)</i>	39	<i>multi vitamn tab mineral</i>	205
<i>montelukast sodium tab 10 mg (base</i>		<i>multi-day tab</i>	213
<i>equiv)</i>	39	<i>multi-day tab /iron</i>	198
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<i>(20 mg/ml)</i>	24	<i>multilex tab</i>	205
<i>morphine sulfate oral soln 20 mg/5ml</i> .24		<i>multilex-t&m tab</i>	205
<i>morphine sulfate tab 15 mg</i>	24	<i>multimineral tab plus</i>	205
<i>morphine sulfate tab 30 mg</i>	24	<i>multiple vitamin cap</i>	213
<i>morphine sulfate tab er 100 mg</i>	24	<i>multiple vitamin tab</i>	213
<i>morphine sulfate tab er 15 mg</i>	24	<i>multiple vitamins w/ iron tab</i>	198
<i>morphine sulfate tab er 30 mg</i>	24	<i>multiple vitamins w/ minerals tab</i>	205
<i>morphine sulfate tab er 60 mg</i>	24	<i>multi-vit/ tab minerals</i>	205
<i>motion relf tab 25mg</i>	64	<i>multi-vit/fe dro /fl 0.25</i>	219
<i>motion sick chw 25mg</i>	64	<i>multi-vit/fe tab</i>	198
<i>motion sick tab 25mg</i>	64	<i>multivit/fl chw 0.25mg</i>	218
<i>motion sick tab 50mg</i>	64	<i>multivit/fl chw 0.5mg</i>	218
<i>motrin ib tab 200mg</i>	12	<i>multivit/fl chw 1mg</i>	218
<i>moxifloxacin hcl ophth soln 0.5% (base</i>		<i>multi-vit/fl dro /fe 0.25</i>	219
<i>equiv)</i>	229	<i>multi-vit/fl dro 0.25mg</i>	218
<i>mucinex chld liq 100/5ml</i>	135	<i>multi-vit/fl dro 0.5mg/ml</i>	218
<i>mucosa tab 400mg</i>	135	<i>multi-vitami tab menopaus</i>	205
<i>mucus relf d tab 60-600mg</i>	130	<i>multivitamin cap</i>	213
<i>mucus relief liq 100/5ml</i>	135	<i>multivitamin liq</i>	205
<i>mucus relief liq 400/20ml</i>	135	<i>multivitamin liq mineral</i>	205
<i>mucus relief tab 400mg</i>	135	<i>multivitamin tab mineral</i>	206
<i>mucus relief tab 600mg er</i>	135	<i>multivitamin tab womens</i>	206
<i>mucus+chst liq 100/5ml</i>	135	<i>multi-vitamn tab</i>	213
<i>mucus-dm tab 30-600mg</i>	130	<i>multi-vite tab</i>	205
<i>mucus-er tab 600mg</i>	135	<i>multi-vite tab 50&over</i>	205
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<i>mult vitamin tab essent</i>	213	<i>mult-vit/fl chw 0.5mg</i>	217
<i>mult vitamin tab womens</i>	204	<i>mupirocin oint 2%</i>	140
<i>mult vit-bet chw fl0.25mg</i>	217	<i>murine ear dro 6.5% ot</i>	232
<i>MULTAQ TAB 400MG</i>	38	<i>murine ear sol 6.5% ot</i>	232
<i>multi 50+ cap for her</i>	204	<i>murine tears dro dry eyes</i>	227
<i>multi 50+ tab for her</i>	205	<i>mvc-fluoride chw 0.25mg</i>	218
<i>multi 50+ tab for him</i>	205	<i>mvc-fluoride chw 0.5mg</i>	218
<i>multi cap complete</i>	205	<i>mvc-fluoride chw 1mg</i>	218
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<i>multi cap for him</i>	205	<i>mvw complete chw orange</i>	220

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<i>mycophenolate sodium tab dr 360 mg</i> (<i>mycophenolic acid equiv</i>).....	109	<i>naproxen sod tab 220mg</i>	12
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<i>myferon 150 cap forte</i>	170	<i>naproxen sodium tab 550 mg</i>	12
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MYNATAL PLUS TAB	215	<i>naproxen tab 250 mg</i>	12
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<i>myorisan cap 40mg</i>	138	<i>nasal decong tab 120mg er</i>	225
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MYRBETRIQ TAB 50MG	260	<i>nasal moist spr 0.65%</i>	223
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<i>nausea contr sol</i>	65	<i>niacin cap er 500 mg</i>	264
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<i>oyst shell/d tab 500mg</i>	192	<i>PANRETIN GEL 0.1%</i>	143
<i>oyst-cal d tab 250mg</i>	192	<i>pantoprazole sodium ec tab 20 mg (base equiv)</i>	259
<i>oyst-cal-d tab 500mg</i>	192	<i>pantoprazole sodium ec tab 40 mg (base equiv)</i>	259
<i>oyster shell calcium tab 500 mg</i>	192	<i>PARAGARD IUD T380A</i>	123
<i>oystercal tab 500mg</i>	192	<i>paroex sol 0.12%</i>	197
<i>oyster-cal/d tab 500mg</i>	192	<i>paromomycin sulfate cap 250 mg</i>	7
		<i>paroxetine hcl tab 10 mg</i>	51
		<i>paroxetine hcl tab 20 mg</i>	51
		<i>paroxetine hcl tab 30 mg</i>	51

<i>paroxetine hcl tab 40 mg</i>	51	<i>pharbedryl cap 50mg</i>	71
PEAK AIR FLO MIS ADLT/PED	248	<i>pharbetol tab 325mg</i>	18
<i>ped elctrlt sol</i>	193	<i>pharbetol tab 500mg</i>	18
<i>ped formula liq 100-10/5</i>	130	<i>phazyme chw 125mg</i>	161
<i>pedia iron dro 15mg/ml</i>	172	<i>phenadoz sup 12.5mg</i>	76
<i>pedia vance sol apple</i>	193	<i>phenazo tab 200mg</i>	164
<i>pedia vance sol grape</i>	193	<i>phenazopyridine hcl tab 100 mg</i>	164
<i>pediacare al liq 12.5/5ml</i>	71	<i>phenazopyridine hcl tab 200 mg</i>	164
<i>pediacare sus 160/5ml</i>	18	<i>phenelzine sulfate tab 15 mg</i>	50
PEDIA-LAX LIQ 50MG	184	<i>phenergan sup 25mg</i>	76
<i>pediatric ene enema</i>	180	<i>phenobarbital elixir 20 mg/5ml</i>	173
<i>pediavit liq</i>	221	<i>phenobarbital tab 100 mg</i>	173
<i>peg 3350-kcl-na bicarb-nacl-na sulfate</i>		<i>phenobarbital tab 15 mg</i>	173
<i>for soln 236 gm</i>	177	<i>phenobarbital tab 16.2 mg</i>	173
<i>peg 3350-kcl-na bicarb-nacl-na sulfate</i>		<i>phenobarbital tab 30 mg</i>	173
<i>for soln 240 gm</i>	177	<i>phenobarbital tab 32.4 mg</i>	173
<i>peg 3350-kcl-sod bicarb-nacl for soln</i>		<i>phenobarbital tab 60 mg</i>	173
<i>420 gm</i>	177	<i>phenobarbital tab 64.8 mg</i>	173
PEGASYS INJ	107	<i>phenobarbital tab 97.2 mg</i>	173
PEGASYS INJ 180MCG/M	107	<i>phenoxybenzamine hcl cap 10 mg</i>	80
PEG-INTRON KIT 150MCG	107	<i>phenytoin chw 50mg</i>	48
<i>peg-prep kit</i>	177	<i>phenytoin sodium extended cap 100 mg</i>	
<i>pegylax pow</i>	178	.....	48
<i>penicillin g potassium for inj 20000000</i>		<i>phenytoin sodium extended cap 200 mg</i>	
<i>unit</i>	234	.....	48
<i>penicillin g sodium for inj 5000000 unit</i>		<i>phenytoin sodium extended cap 300 mg</i>	
.....	234	.....	48
<i>penicillin v potassium for soln 125</i>		<i>phenytoin susp 125 mg/5ml</i>	48
<i>mg/5ml</i>	234	<i>philith tab 0.4-35</i>	122
<i>penicillin v potassium for soln 250</i>		<i>phillips cap 100mg</i>	184
<i>mg/5ml</i>	234	PHISOHEX LIQ 3%	102
<i>penicillin v potassium tab 250 mg</i>	234	<i>phospha 250 tab neutral</i>	195
<i>penicillin v potassium tab 500 mg</i>	234	<i>phosphate sol laxative</i>	180
<i>pentoxifylline tab er 400 mg</i>	167	PHOSPHOLINE SOL 0.125%OP	228
<i>peptic relf chw 262mg</i>	62	<i>physiolyte sol</i>	110
<i>peptic relf sus 262/15ml</i>	62	<i>physiosol sol irrigat</i>	110
<i>periogard sol 0.12%</i>	197	<i>phytonadione tab 5 mg</i>	263
<i>permethrin cream 5%</i>	152	PICATO GEL 0.015%	144
<i>perphenazine tab 16 mg</i>	100	PICATO GEL 0.05%	143
<i>perphenazine tab 2 mg</i>	99	<i>pilocarpine hcl ophth soln 1%</i>	228
<i>perphenazine tab 4 mg</i>	99	<i>pilocarpine hcl ophth soln 2%</i>	228
<i>perphenazine tab 8 mg</i>	99	<i>pilocarpine hcl ophth soln 4%</i>	228
PERRY PRENAT CAP	216	<i>pilocarpine hcl tab 5 mg</i>	197
<i>pfizerpen inj 20mu</i>	234	<i>pilocarpine hcl tab 7.5 mg</i>	197
<i>pharbechlor tab 4mg</i>	66	<i>pimecrolimus cream 1%</i>	150
<i>pharbedryl cap 25mg</i>	71	<i>pimozide tab 1 mg</i>	238

<i>pimozide tab 2 mg</i>	238	<i>poly-vite dro</i>	221
<i>pimtreea tab</i>	122	<i>poly-vite sol /iron</i>	219
<i>pink bismuth chw 262mg</i>	62	POMALYST CAP 1MG	84
<i>pink bismuth sus 262/15ml</i>	62	POMALYST CAP 2MG	84
<i>pink bismuth sus max str</i>	62	POMALYST CAP 3MG	85
<i>pink bismuth tab 262mg</i>	62	POMALYST CAP 4MG	85
<i>pinworm med sus 144mg/ml</i>	32	<i>portia-28 tab</i>	122
PIN-X CHW 250MG	32	<i>potassium bicarbonate effer tab 25 meq</i>	195
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	60	<i>potassium chloride cap er 10 meq</i>	196
<i>pioglitazone hcl tab 30 mg (base equiv)</i>	60	<i>potassium chloride cap er 8 meq</i>	196
<i>pioglitazone hcl tab 45 mg (base equiv)</i>	60	<i>potassium chloride microencapsulated</i> <i>crys er tab 10 meq</i>	196
<i>piperacillin sod-tazobactam na for inj</i> <i>3.375 gm (3-0.375 gm)</i>	235	<i>potassium chloride microencapsulated</i> <i>crys er tab 20 meq</i>	196
<i>piperacillin sod-tazobactam sod for inj</i> <i>2.25 gm (2-0.25 gm)</i>	235	<i>potassium chloride oral soln 10% (20</i> <i>meq/15ml)</i>	196
<i>piperacillin sod-tazobactam sod for inj</i> <i>4.5 gm (4-0.5 gm)</i>	235	<i>potassium chloride oral soln 20% (40</i> <i>meq/15ml)</i>	196
<i>pirmella tab 1/35</i>	122	<i>potassium chloride tab er 10 meq</i>	196
<i>pirmella tab 7/7/7</i>	122	<i>potassium chloride tab er 20 meq (1500</i> <i>mg)</i>	196
<i>piroxicam cap 10 mg</i>	12	<i>potassium chloride tab er 8 meq (600</i> <i>mg)</i>	196
<i>piroxicam cap 20 mg</i>	12	<i>potassium citrate & citric acid soln 1100-</i> <i>334 mg/5ml</i>	163
<i>pms support cap complex</i>	207	<i>potassium citrate tab er 10 meq (1080</i> <i>mg)</i>	163
PNEUMOVAX 23 INJ 25/0.5	260	<i>potassium citrate tab er 5 meq (540 mg)</i>	163
<i>podactin cre 2%</i>	143	POTIGA TAB 200MG	47
<i>podactin pow 1%</i>	143	POTIGA TAB 400MG	47
<i>podofilox soln 0.5%</i>	151	POTIGA TAB 50MG	47
<i>poly bacitra oin</i>	140	<i>pramipexole dihydrochloride tab 0.125</i> <i>mg</i>	92
<i>poly vitamin chw</i>	221	<i>pramipexole dihydrochloride tab 0.25 mg</i>	92
<i>polycin oin op</i>	229	<i>pramipexole dihydrochloride tab 0.5 mg</i>	92
<i>polyethylene glycol 3350 oral packet</i>	178	<i>pramipexole dihydrochloride tab 0.75 mg</i>	92
<i>polyethylene glycol 3350 oral powder</i>	179	<i>pramipexole dihydrochloride tab 1 mg</i>	92
<i>poly-iron cap 150 fort</i>	170	<i>pramipexole dihydrochloride tab 1.5 mg</i>	92
<i>poly-iron cap 150mg</i>	172	<i>prasugrel hcl tab 10 mg (base equiv)</i>	168
<i>polymyxin b-trimethoprim ophth soln</i> <i>10000 unit/ml-0.1%</i>	229	<i>prasugrel hcl tab 5 mg (base equiv)</i> .	168
<i>polysacchari cap iron</i>	170		
<i>polyvinyl alcohol ophth soln 1.4%</i>	227		
<i>poly-vita dro</i>	221		
<i>poly-vita dro /iron</i>	219		
<i>polyvitamin chw /iron</i>	220		
<i>polyvitamin dro</i>	221		
<i>polyvitamin dro /iron</i>	219		
<i>poly-vitamin dro /iron</i>	219		

<i>pravastatin sodium tab 10 mg</i>	78	<i>prenatabs rx tab</i>	216
<i>pravastatin sodium tab 20 mg</i>	78	PRENATAL 19 CHW 29-1MG	216
<i>pravastatin sodium tab 40 mg</i>	78	<i>prenatal 19 chw tab</i>	216
<i>pravastatin sodium tab 80 mg</i>	78	<i>prenatal 19 tab</i>	222
<i>praziquantel tab 600 mg</i>	32	PRENATAL 19 TAB 29-1MG	216
<i>prazosin hcl cap 1 mg</i>	81	PRENATAL CAP FORMULA	216
<i>prazosin hcl cap 2 mg</i>	81	PRENATAL CAP OMEGA-3	216
<i>prazosin hcl cap 5 mg</i>	81	<i>prenatal dha cap 200mg</i>	196
<i>prednicarbate cream 0.1%</i>	149	PRENATAL DHA PAK MULTI	216
<i>prednicarbate oint 0.1%</i>	149	PRENATAL FRM TAB A-FREE	216
<i>prednisolone acetate ophth susp 1%</i>	230	PRENATAL MUL CAP +DHA	235
<i>prednisolone sod phosph oral soln 6.7</i> <i>mg/5ml (5 mg/5ml base)</i>	126	PRENATAL MV MIS + DHA	236
<i>prednisolone sod phosphate oral soln 15</i> <i>mg/5ml (base equiv)</i>	126	PRENATAL TAB	216, 222
<i>prednisolone sodium phosphate oral soln</i> <i>25 mg/5ml (base eq)</i>	126	PRENATAL TAB 27-0.8MG	216
<i>prednisolone syrup 15 mg/5ml (usp</i> <i>solution equivalent)</i>	126	PRENATAL TAB 28-0.8MG	216
<i>prednisone oral soln 5 mg/5ml</i>	126	PRENATAL TAB COMPLETE	222
<i>prednisone tab 1 mg</i>	126	PRENATAL TAB FORMULA	216
<i>prednisone tab 10 mg</i>	126	PRE-NATAL TAB FORMULA	222
<i>prednisone tab 2.5 mg</i>	126	PRENATAL TAB FORTE	222
<i>prednisone tab 20 mg</i>	126	PRENATAL TAB PLUS	216
<i>prednisone tab 5 mg</i>	126	<i>prenatal/fa tab</i>	217
<i>prednisone tab 50 mg</i>	126	PRENATAL/FE TAB	222
<i>prednisone tab therapy pack 10 mg (21)</i>	125	PRENATAL+DHA MIS	216
<i>prednisone tab therapy pack 10 mg (48)</i>	126	PRENATAL+DHA MIS WOMENS	217
<i>prednisone tab therapy pack 5 mg (21)</i>	124	PRENATAL+FE TAB 29-1MG	217
<i>prednisone tab therapy pack 5 mg (48)</i>	126	PRENATL MULT CAP + DHA	217
PREMARIN TAB 0.3MG	159	PRENTAT MULT CAP PLUS DHA	217
PREMARIN TAB 0.45MG	159	PRENTIF MIS 25MM	187
PREMARIN TAB 0.625MG	159	PRENTIF MIS 28MM	187
PREMARIN TAB 0.9MG	159	PRENTIF MIS 31MM	187
PREMARIN TAB 1.25MG	159	PRENTIF MIS FITTING	187
PREMARIN VAG CRE 0.625MG	261	<i>prep h cre 1%</i>	149
PREMPHASE TAB	158	PRETAB TAB 29-1MG	217
PREMPRO TAB .625-2.5	159	<i>prevalite pow 4gm</i>	77
PREMPRO TAB 0.3-1.5	158	<i>prevent cap</i>	207
PREMPRO TAB 0.45-1.5	159	<i>previfem tab</i>	122
PREMPRO TAB 0.625-5	159	PREVNAR 13 INJ	260
PRENAT MULTI CAP +DHA	216	PREZCOBIX TAB 800-150	105
		PREZISTA SUS 100MG/ML	105
		PREZISTA TAB 150MG	105
		PREZISTA TAB 400MG	105
		PREZISTA TAB 600MG	105
		PREZISTA TAB 75MG	105
		PREZISTA TAB 800MG	105
		PRIFTIN TAB 150MG	84
		PRILOSEC OTC TAB 20MG	259

PRIMAQUINE TAB 26.3MG.....	83	propafenone hcl tab 300 mg	38
primidone tab 250 mg	47	proparacaine hcl ophth soln 0.5%	229
primidone tab 50 mg	47	propranolol hcl cap er 24hr 120 mg ..	112
princess chw gummies.....	220	propranolol hcl cap er 24hr 160 mg ..	112
PRIVIGEN INJ 20GRAMS	233	propranolol hcl cap er 24hr 60 mg....	111
PROAIR HFA AER	40	propranolol hcl cap er 24hr 80 mg....	112
probenecid tab 500 mg.....	165	propranolol hcl oral soln 20 mg/5ml .	112
prochlorperazine maleate tab 10 mg		propranolol hcl oral soln 40 mg/5ml .	112
(base equivalent).....	100	propranolol hcl tab 10 mg	112
prochlorperazine maleate tab 5 mg (base		propranolol hcl tab 20 mg	112
equivalent)	100	propranolol hcl tab 40 mg	112
prochlorperazine suppos 25 mg	100	propranolol hcl tab 60 mg	112
PRO-CLEAR AC SYP 9-8.33MG	130	propranolol hcl tab 80 mg	112
PROCRIT INJ 10000/ML	170	propylthiouracil tab 50 mg.....	249
PROCRIT INJ 2000/ML	170	prorenal+d cap omega-3.....	207
PROCRIT INJ 20000/ML	170	prosight cap w/lutein	207
PROCRIT INJ 4000/ML	170	prosight tab.....	207
PROCRIT INJ 40000/ML	170	protriptyline hcl tab 10 mg	54
procto-med cre hc 2.5%	28	protriptyline hcl tab 5 mg	54
proctosol hc cre 2.5%	28	provil tab 200mg.....	12
proctozone cre -hc 2.5%.....	28	pseudoephed-bromphen-dm syrup 30-2-	
PROFILNINE INJ 1500UNIT	166	10 mg/5ml	131
progesterone micronized cap 100 mg	236	pseudoephedr tab 120mg er.....	225
progesterone micronized cap 200 mg	236	pseudoephedr tab 60mg	225
PROLIA SOL 60MG/ML	156	pseudoephedrine hcl syrup 30 mg/5ml	
prometh vc sol plain.....	131	.....	225
prometh vc/ syp codeine.....	131	pseudoephedrine hcl tab 30 mg	225
promethazine & phenylephrine syrup		psyllium powder 100%	176
6.25-5 mg/5ml	131	psyllium see pow 100%	176
promethazine hcl inj 25 mg/ml	76	PULMOZYME SOL 1MG/ML	248
promethazine hcl suppos 12.5 mg.....	76	puralube oin	227
promethazine hcl suppos 25 mg	76	pure & gentl dro 0.3%	227
promethazine hcl syrup 6.25 mg/5ml ..	76	px advanced tab multivit.....	207
promethazine hcl tab 12.5 mg	76	px allergy cap 25mg	71
promethazine hcl tab 25 mg.....	76	px allergy tab 25mg	71
promethazine hcl tab 50 mg.....	76	px antacid chw 1000mg	31
promethazine w/ codeine syrup 6.25-10		px antacid sus max st.....	30
mg/5ml	131	px antacid sus reg st	30
promethazine-dm syrup 6.25-15 mg/5ml		px aspirin chw 81mg	21
.....	131	px aspirin tab 325mg.....	21
promethegan sup 12.5mg	76	px aspirin tab 325mg ec.....	21
promethegan sup 25mg.....	76	px aspirin tab 81mg ec	21
promethegan sup 50mg.....	76	px calcium&d tab 600-400.....	192
promolaxin tab 100mg	184	px complete tab senior	207
propafenone hcl tab 150 mg.....	38	px dayhist tab 1.34mg	72
propafenone hcl tab 225 mg.....	38	px fiber cap 0.52gm	176

<i>px fiber tab 625mg</i>	176
PX GLUCOSE CHW FRUIT	57
PX GLUCOSE CHW ORANGE	57
PX GLUCOSE CHW RASPBERRY	57
PX GLUCOSE CHW SOUR APL	57
<i>px glycerin sup 2.1gm</i>	179
<i>px ibuprofen tab 200mg</i>	12
<i>px iron tab 200mg</i>	172
<i>px laxative tab 8.6mg</i>	182
<i>px mens mult tab vitamins</i>	207
<i>px profen ib dro 50/1.25</i>	12
<i>px profen ib sus 100/5ml</i>	13
<i>px stomach chw 262mg</i>	62
<i>px stomach sus 262/15ml</i>	62
<i>px stomach sus 525/15ml</i>	62
<i>px triple oin</i>	140
<i>px tussin dm liq 100-10/5</i>	131
<i>px tussin sol 100/5ml</i>	135
<i>pyrazinamide tab 500 mg</i>	84
<i>pyridostigmine bromide tab 60 mg</i>	84
<i>pyridoxine hcl tab 100 mg</i>	264
<i>pyridoxine hcl tab 25 mg</i>	264
<i>pyridoxine hcl tab 50 mg</i>	264
<i>pyridoxine hcl tab er 200 mg</i>	264
Q	
<i>qc allergy tab 10mg</i>	75
<i>qc antacid sus</i>	30
<i>qc antacid sus anti-gas</i>	30
<i>qc aspirin tab 325mg</i>	21
<i>qc aspirin tab 325mg ec</i>	21
<i>qc childrens chw complete</i>	220
<i>qc childrens chw extra c</i>	221
<i>qc childrens chw iron</i>	219
<i>qc enema ene</i>	180
<i>qc essential tab</i>	214
<i>qc gas relf chw 125mg</i>	161
<i>qc gas relf chw 80mg</i>	161
<i>qc hydrocort cre 1%</i>	149
<i>qc ibuprofen tab 200mg</i>	13
<i>qc laxative sup 10mg</i>	182
<i>qc laxative tab 5mg ec</i>	182
<i>qc medifin liq mucus rl</i>	135
QC MINERAL OIL HEAVY	179
<i>qc natural pow vegetabl</i>	176
<i>qc senna tab 8.6mg</i>	182
<i>qc suphedrin tab 120mg sr</i>	225

<i>qc therin-m tab</i>	208
<i>q-dryl cap 25mg</i>	72
<i>q-dryl liq 12.5/5ml</i>	72
<i>q-pap child sus 160/5ml</i>	18
<i>q-pap infant dro 80/0.8ml</i>	18
<i>q-pap liq 160/5ml</i>	18
<i>q-pap tab 325mg</i>	18
<i>q-pap tab 500mg</i>	18
<i>q-tapp dm elx</i>	131
<i>q-tussin dm syp 100-10/5</i>	131
<i>quasense tab</i>	122
<i>quenalin syp 12.5/5ml</i>	72
<i>quetiapine fumarate tab 100 mg</i>	98
<i>quetiapine fumarate tab 200 mg</i>	98
<i>quetiapine fumarate tab 25 mg</i>	98
<i>quetiapine fumarate tab 300 mg</i>	98
<i>quetiapine fumarate tab 400 mg</i>	98
<i>quetiapine fumarate tab 50 mg</i>	98
<i>quetiapine fumarate tab er 24hr 150 mg</i>	98
<i>quetiapine fumarate tab er 24hr 200 mg</i>	98
<i>quetiapine fumarate tab er 24hr 300 mg</i>	98
<i>quetiapine fumarate tab er 24hr 400 mg</i>	98
<i>quetiapine fumarate tab er 24hr 50 mg</i>	98
<i>quinapril hcl tab 10 mg</i>	80
<i>quinapril hcl tab 20 mg</i>	80
<i>quinapril hcl tab 40 mg</i>	80
<i>quinapril hcl tab 5 mg</i>	80
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	83
<i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i>	83
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	83
<i>quinidine sulfate tab 300 mg</i>	37
<i>quinine sulfate cap 324 mg</i>	83
<i>quintabs-m tab</i>	208
QVAR REDIHA AER 80MCG	39
QVAR REDIHAL AER 40MCG	39
R	
<i>ra acetamin tab 325mg</i>	19
<i>ra allergy tab 25mg</i>	72

<i>ra allergy tab sinus</i>	131	<i>ra glycerin sup 80.7%</i>	179
<i>ra antacid chw 1000mg</i>	31	<i>ra hair/skin tab /nails</i>	208
<i>ra antacid sus antigas</i>	30	<i>ra hi cal tab 500-200</i>	193
<i>ra antacid sus anti-gas</i>	30	<i>ra hi-cal tab 500mg</i>	193
<i>ra anti-itch cre 1%</i>	149	<i>ra hi-cal/d tab 500mg</i>	193
<i>ra anti-itch oin 1%</i>	149	<i>ra hydrocort cre 0.5%</i>	149
<i>ra aspirin chw 81mg</i>	21	<i>ra hydrocort cre 1%</i>	149
<i>ra aspirin tab 325mg</i>	21	<i>ra hydrocort cre 1%pls 12</i>	149
<i>ra aspirin tab 325mg ec</i>	21	<i>ra ibuprofen cap 200mg</i>	13
<i>ra aspirin tab 81mg ec</i>	21	<i>ra ibuprofen tab 200mg</i>	13
<i>ra ca/mg/zn tab</i>	192	<i>ra iron tab 325mg</i>	172
<i>ra ca/vit d3 chw minerals</i>	192	<i>ra iron tab 65mg</i>	172
<i>ra ca/vit d3 tab 600-400</i>	192	<i>ra k-pec sus 262/15ml</i>	62
<i>ra calcium tab vit d</i>	192	<i>ra laxative chw 15mg</i>	182
<i>ra calcium+d tab 600mg</i>	193	<i>ra laxative pow</i>	179
<i>ra central tab energy</i>	208	<i>ra laxative sup 10mg</i>	182
<i>ra central tab -vite</i>	208	<i>ra laxative tab 25mg</i>	182
<i>ra central tab vite sel</i>	208	<i>ra laxative tab 5mg ec</i>	182
<i>ra central tab vite sen</i>	208	<i>ra liquid sus antacid</i>	30
<i>ra cetiri-d tab 5-120mg</i>	131	<i>ra lorata-d tab 24 hour</i>	131
<i>ra cetirizin tab 10mg</i>	75	<i>ra lubricant dro 0.4-0.3%</i>	227
<i>ra child asa chw 81mg</i>	21	<i>ra magnesium cap 500mg</i>	195
<i>ra child vit chw /iron</i>	219	<i>ra mature wm tab diet sup</i>	208
<i>ra chlorphen tab 4mg</i>	66	<i>ra melatonin tab 3mg</i>	7
<i>ra clotrimaz cre 3</i>	261	<i>ra melatonin tab 5mg</i>	6
<i>ra col-rite cap 100mg</i>	185	<i>ra milk magn sus 400/5ml</i>	180
<i>ra col-rite cap 250mg</i>	185	RA MINERAL OIL	179
<i>ra col-rite cap 50mg</i>	184	<i>ra niacin tab 100mg</i>	264
<i>ra dandruff sha 1%</i>	144	<i>ra niacin tab 500mg</i>	264
<i>ra ear dro 6.5% ot</i>	232	<i>ra nicotine dis 14mg/24h</i>	244
<i>ra enema ene</i>	180	<i>ra nicotine dis 21mg/24h</i>	244
<i>ra fib lax pow 48.57%</i>	176	<i>ra nicotine dis 7mg/24hr</i>	244
<i>ra fiber cap 0.52gm</i>	176	<i>ra nicotine gum 2mg</i>	244
<i>ra fiber pow 28.3%</i>	176	<i>ra nicotine gum 2mg cinn</i>	244
<i>ra fiber pow 48.57%</i>	176	<i>ra nicotine gum 2mg mint</i>	244
<i>ra fiber pow 58.6%</i>	176	<i>ra nicotine gum 2mgfruit</i>	244
<i>ra fiber tab 500mg</i>	176	<i>ra nicotine gum 4mg</i>	244
<i>ra fiber-cap tab 625mg</i>	176	<i>ra nicotine gum 4mg frut</i>	244
<i>ra fiber-tab tab 625mg</i>	176	<i>ra nicotine gum 4mg mint</i>	244
<i>ra fish oil cap 1000mg</i>	226	<i>ra nicotine loz 2mg mint</i>	245
<i>ra gas relf chw 125mg</i>	161	<i>ra nicotine loz 4mg mint</i>	245
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<i>ra one daily tab mens/d3</i>	208	<i>rederm lot 1%</i>	149
<i>ra one daily tab multivit</i>	214	<i>reeses med sus pinworm</i>	32
<i>ra one daily tab womens</i>	208	<i>refenesen tab 200mg</i>	135
<i>ra oys shl/d tab 500mg</i>	193	<i>refenesen tab 400mg</i>	136
<i>ra p col-rit tab 8.6-50mg</i>	177	<i>refresh lacr oin op</i>	227
<i>ra pink bism chw 262mg</i>	62	<i>refresh p.m. oin op</i>	227
<i>ra pink bism tab 262mg</i>	62	<i>regenecare gel ha 2%</i>	151
<i>ra senna tab 8.6mg</i>	182	<i>reguloid cap 0.52gm</i>	176
<i>ra sleep aid tab 25mg</i>	173	<i>reguloid pow 28.3%</i>	176
<i>ra suphedrin tab 120mg cr</i>	225	<i>reguloid pow 48.57%</i>	176
<i>ra suphedrin tab 30mg</i>	225	<i>reguloid pow 58.6%</i>	176
<i>ra therapeut tab m/beta</i>	208	<i>rehydralyte sol</i>	193
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<i>ra tussin liq 100/5ml</i>	135	<i>remedy cre antifung</i>	143
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<i>ra tussin syp 100/5ml</i>	135	<i>remedy pow antifung</i>	143
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<i>ramipril cap 2.5 mg</i>	80	<i>reno cap</i>	198
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RANEXA TAB 500MG	33	<i>repaglinide tab 2 mg</i>	60
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<i>sb allergy tab 25mg med</i>	72	<i>senno tab 8.6mg</i>	183
<i>sb antacid sus anti-gas</i>	31	<i>sennosides syrup 8.8 mg/5ml</i>	183
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<i>sb glycerin sup 2.1gm</i>	179	<i>sertraline hcl tab 25 mg</i>	51
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<i>siltuss das liq 100/5ml</i>	136	<i>sm antacid chw 1000mg</i>	31
<i>siltussin dm liq das</i>	132	<i>sm antacid chw ex-str</i>	31
<i>siltussin sa syp 100/5ml</i>	136	<i>sm antacid sus advanced</i>	31
<i>siltussin-dm liq diabetic</i>	132	<i>sm antacid sus max st</i>	31
<i>siltussin-dm liq max st</i>	132	<i>sm anti-diar tab 2mg</i>	63
<i>siltussin-dm syp alc free</i>	132	<i>sm antifun gl cre 1%</i>	143
<i>silver sulfadiazine cream 1%</i>	144	<i>sm antifun gl cre 2%</i>	143
<i>simeped dro 40/0.6ml</i>	161	<i>sm artificia sol tears</i>	227
<i>simethicone cap 180 mg</i>	161	<i>sm aspirin chw 81mg</i>	22
<i>simethicone chew tab 125 mg</i>	161	<i>sm aspirin tab 325mg</i>	22
<i>simethicone chew tab 80 mg</i>	161	<i>sm aspirin tab 325mg ec</i>	22
<i>simethicone dro 20/0.3ml</i>	161	<i>sm aspirin tab 81mg ec</i>	22
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<i>simply sleep tab 25mg</i>	173	<i>sm ca/vit d3 tab 600-400</i>	193
<i>SIMPONI INJ 100MG/ML</i>	8	<i>sm calcium tab /vit d3</i>	193
<i>SIMPONI INJ 50/0.5ML</i>	8	<i>sm calcium/d tab 500-200</i>	193
<i>simvastatin tab 10 mg</i>	78	<i>sm calcium/d tab 600-400</i>	193
<i>simvastatin tab 20 mg</i>	78	<i>sm child asa chw 81mg</i>	22
<i>simvastatin tab 40 mg</i>	78	<i>sm clearlax pow</i>	179
<i>simvastatin tab 5 mg</i>	78	<i>sm complete tab</i>	209
<i>sinus/conges tab 10mg</i>	225	<i>sm complete tab 50+</i>	209
<i>sirolimus tab 0.5 mg</i>	109	<i>sm complete tab 50+ mens</i>	209
<i>sirolimus tab 1 mg</i>	110	<i>sm complete tab 50+ wmn</i>	209
<i>sirolimus tab 2 mg</i>	110	<i>sm complete tab senior</i>	209
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<i>SKYRIZI INJ 150DOSE</i>	137	<i>sm enema ene</i>	180
<i>sleep aid tab 25mg</i>	173	<i>sm fiber lax tab 500mg</i>	176
<i>sleep aid tab 50mg</i>	173	<i>sm fiber pow 28.3%</i>	176
<i>sleep ii tab 25mg</i>	173	<i>sm fiber pow 48.57%</i>	176
<i>sleep tab 25mg</i>	173	<i>sm fiber pow 58.6%</i>	176
<i>sleep-aid tab 25mg</i>	173	<i>sm folic acd tab 400mcg</i>	169
<i>sleep-tabs tab 25mg</i>	173	<i>sm gas rel chw 125mg</i>	161
<i>slo-niacin tab 250mg cr</i>	264	<i>sm gas relie chw 80mg</i>	161
<i>slow iron tab 160mg cr</i>	172	<i>SM GLUCOSE CHW ORANGE</i>	57
<i>slow iron tab 50mg</i>	172	<i>SM GLUCOSE CHW RASPBERRY</i>	57
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<i>slow release tab 47.5mg</i>	172	<i>sm hair/skin tab /nails</i>	209
<i>slow-release tab fe 45mg</i>	172	<i>sm hydrocort cre 1%</i>	149
<i>sm acid redu tab 200mg</i>	258	<i>sm hydrocort cre 1% plus</i>	149
<i>sm all day tab allergy</i>	75	<i>sm hydrocort oin 1%</i>	149
<i>sm allergy tab 25mg</i>	72	<i>sm ibuprofen cap 200mg</i>	13
<i>sm allergy tab 4mg</i>	66	<i>sm ibuprofen tab 100mg jr</i>	13
<i>sm animal chw shapes</i>	221	<i>sm ibuprofen tab 200mg</i>	13

<i>sm iron slow tab 160mg cr</i>	172	<i>smooth lax pow 3350 nf</i>	179
<i>sm iron tab 325mg</i>	172	<i>sochlor sol 5% op</i>	231
<i>sm iron tab 45mg</i>	172	<i>sodium bicarbonate tab 325 mg</i>	31
<i>sm laxative sup 10mg</i>	183	<i>sodium bicarbonate tab 650 mg</i>	31
<i>sm laxative tab 5mg ec</i>	183	<i>sodium chloride hypertonic ophth oint</i> <i>5%</i>	231
<i>sm lice lot treatmnt</i>	152	<i>sodium chloride hypertonic ophth soln</i> <i>5%</i>	231
<i>sm lice soln kit</i>	152	<i>sodium chloride irrigation soln 0.9%</i> ..	164
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<i>sm micon 7 sup 100mg</i>	261	<i>sodium chloride soln nebu 3%</i>	136
<i>sm milk magn sus cherry</i>	180	<i>sodium chloride soln nebu 7%</i>	136
<i>sm milk magn sus mint</i>	180	<i>sodium chloride tab 1 gm</i>	196
<i>sm milk magn sus original</i>	180	<i>sodium citrate & citric acid soln 500-334</i> <i>mg/5ml</i>	163
<i>SM MINERAL OIL</i>	179	<i>sodium fluoride chew tab 0.25 mg f</i> <i>(from 0.55 mg naf)</i>	194
<i>sm mucus er tab 600mg</i>	136	<i>sodium fluoride chew tab 0.5 mg f (from</i> <i>1.1 mg naf)</i>	194
<i>sm multiple tab vit/iron</i>	198	<i>sodium fluoride chew tab 1 mg f (from</i> <i>2.2 mg naf)</i>	194
<i>sm multiple tab vitamins</i>	214	<i>sodium fluoride soln 0.5 mg/ml f (from</i> <i>1.1 mg/ml naf)</i>	194
<i>sm nasal dec tab 30mg</i>	225	<i>sodium fluoride tab 0.5 mg f (from 1.1</i> <i>mg naf)</i>	194
<i>sm niacin tab 250mg cr</i>	264	<i>sodium phenylbutyrate oral powder 3</i> <i>gm/teaspoonful</i>	158
<i>sm nicotine dis 14mg/24h</i>	245	<i>sodium phenylbutyrate tab 500 mg</i> ..	158
<i>sm nicotine dis 21mg/24h</i>	245	<i>sodium phosphates - enema</i>	180
<i>sm nicotine dis 7mg/24hr</i>	245	<i>sof-lax cap 100mg</i>	185
<i>sm nicotine gum 2mg</i>	245	<i>SOFOS/VELPAT TAB 400-100</i>	107
<i>sm nicotine gum 4mg</i>	245	<i>solia tab</i>	122
<i>sm nicotine loz 2mg mint</i>	245	<i>soluble fib tab therapy</i>	176
<i>sm nicotine loz 4mg mint</i>	245	<i>sominex tab 25mg</i>	173
<i>SM ONE DAILY MIS PRENATAL</i>	217	<i>soothe chw 262mg</i>	62
<i>sm opti-vita tab</i>	209	<i>soothe dro hydratio</i>	227
<i>sm pain rel cap 500mg</i>	19	<i>soothe night oin op</i>	227
<i>sm rpd melt tab 160mg</i>	19	<i>soothe sus 262/15ml</i>	62
<i>sm senna lax tab 8.6mg</i>	183	<i>soothe sus 525/15ml</i>	62
<i>sm senna lax tab max str</i>	183	<i>soothe tab 262mg</i>	62
<i>sm sleep aid tab 25mg</i>	173	<i>soothe xp dro</i>	227
<i>sm stomach sus 262/15ml</i>	62	<i>soothe&cool cre inzo 2%</i>	143
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<i>sm triple oin antibiot</i>	140	<i>sorine tab 120mg</i>	112
<i>sm tussin dm liq max</i>	132	<i>sorine tab 160mg</i>	112
<i>sm tussin dm syp 100-10/5</i>	132	<i>sorine tab 240mg</i>	112
<i>sm tussin syp 100/5ml</i>	136		
<i>sm tussin syp dm</i>	132		
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<i>sm vit b-12 tab 100mcg</i>	168		
<i>sm vit b12 tab 500mcg</i>	168		
<i>sm vit b-12 tab 500mcg</i>	169		
<i>sm vit b6 tab 100mg</i>	264		
<i>sm vit b-6 tab 100mg</i>	264		
<i>smooth lax pow 3350</i>	179		

<i>sorine tab 80mg</i>	112	<i>stomach relf sus plus</i>	62
<i>sotalol hcl (afib/afl) tab 120 mg</i>	112	<i>stomach relf tab 262mg</i>	62
<i>sotalol hcl (afib/afl) tab 80 mg</i>	112	<i>stomach rlf chw 400mg</i>	31
<i>sotalol hcl tab 120 mg</i>	112	<i>stomach rlf tab 262mg</i>	62
<i>sotalol hcl tab 160 mg</i>	112	<i>stool softnr cap 100mg</i>	185
<i>sotalol hcl tab 240 mg</i>	112	<i>stool softnr cap 240mg</i>	185
<i>sotalol hcl tab 80 mg</i>	112	<i>stool softnr cap 250mg</i>	185
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<i>spectr women tab hlth sen</i>	209	<i>stool softnr tab 8.6-50mg</i>	177
<i>spectra ultr tab hlth men</i>	209	<i>stop lice kit complete</i>	153
<i>spectravite tab advanced</i>	209	<i>stop lice liq max st</i>	153
<i>spectravite tab senior</i>	209	<i>stop lice ms sha 0.33-4%</i>	153
<i>spinosad susp 0.9%</i>	153	<i>stop smoking gum 2mg mint</i>	245
<i>spironolactone & hydrochlorothiazide tab</i>		<i>stop smoking gum 2mg orig</i>	245
<i>25-25 mg</i>	154	<i>stop smoking gum 4mg</i>	245
<i>spironolactone tab 100 mg</i>	155	<i>stop smoking loz 2mg mint</i>	245
<i>spironolactone tab 25 mg</i>	155	<i>stop smoking loz 4mg mint</i>	246
<i>spironolactone tab 50 mg</i>	155	<i>streptomycin sulfate for inj 1 gm</i>	7
<i>sprintec 28 tab 28 day</i>	122	<i>stress b com tab w/iron</i>	198
SPRYCEL TAB 100MG	89	<i>stress b-com tab /c/zinc</i>	209
SPRYCEL TAB 140MG	89	<i>stress form tab</i>	198, 214
SPRYCEL TAB 20MG	88	<i>stress form tab /iron</i>	198, 209
SPRYCEL TAB 50MG	88	<i>stress form/ tab zinc</i>	209
SPRYCEL TAB 70MG	88	<i>stress formu tab</i>	214
SPRYCEL TAB 80MG	89	<i>stress formu tab advanced</i>	209
<i>sronyx tab</i>	123	<i>stress formu tab energy</i>	209
<i>ssd cre 1%</i>	144	<i>stress formu tab w/iron</i>	198
<i>st joseph chw low 81mg</i>	22	<i>stress tab formula</i>	209
<i>stagesic cap 5-500mg</i>	27	<i>stresstabs tab energy</i>	214
<i>stavudine cap 15 mg</i>	105	STRIBILD TAB.....	105
<i>stavudine cap 20 mg</i>	105	STRIVERDI AER 2.5MCG	40
<i>stavudine cap 30 mg</i>	105	<i>stye oin</i>	227
<i>stavudine cap 40 mg</i>	105	<i>sucalfate tab 1 gm</i>	258
STELARA INJ 45MG/0.5	144	<i>sudafed 12hr tab 120mg cr</i>	225
STELARA INJ 5MG/ML.....	162	SUDAFED PE SOL CHILDREN	225
STELARA INJ 90MG/ML.....	144	<i>sudogest pe tab 10mg</i>	225
<i>stim laxat tab 5mg ec</i>	183	<i>sudogest tab 120mg er</i>	225
STIMATE SOL 1.5MG/ML.....	158	<i>sudogest tab 30mg</i>	225
STIVARGA TAB 40MG	89	<i>sudogest tab 60mg</i>	225
<i>stomach relf chw 262mg</i>	62	<i>sulfacetamide sodium ophth soln 10%</i>	
<i>stomach relf sus 262/15ml</i>	62	.....	229
<i>stomach relf sus 524/30ml</i>	62	<i>sulfacetamide sodium-prednisolone</i>	
<i>stomach relf sus 525/15ml</i>	62	<i>ophth soln 10-0.23(0.25)%</i>	230
<i>stomach relf sus 527/30ml</i>	62	SULFADIAZINE TAB 500MG	249

<i>sulfamethoxazole-trimethoprim susp</i>	
<i>200-40 mg/5ml</i>	32
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	32
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	32
SULFAMYLON CRE 85MG/GM	144
<i>sulfasalazine tab 500 mg</i>	162
<i>sulfasalazine tab delayed release 500 mg</i>	162
<i>sulfatrim pd sus 200-40/5</i>	33
<i>sulindac tab 150 mg</i>	13
<i>sulindac tab 200 mg</i>	13
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	189
<i>sumatriptan succinate tab 100 mg</i>	189
<i>sumatriptan succinate tab 25 mg</i>	189
<i>sumatriptan succinate tab 50 mg</i>	189
<i>sunvite actv tab adult</i>	209
<i>sunvite tab advanced</i>	210
<i>super 28 tab formula</i>	210
<i>super antiox cap protect</i>	210
<i>super antiox tab a/c/e/se</i>	210
<i>super b-comp tab /fa/vitc</i>	198
<i>super b-comp tab vit c/fa</i>	198
<i>super ca 600 tab + d 400</i>	193
<i>super ca 600 tab + d3</i>	193
<i>super calciu tab 600mg</i>	193
<i>super liq nu-thera</i>	210
<i>super multip cap</i>	210
<i>super multip tab</i>	210
<i>super tab nu-thera</i>	210
<i>super thera tab vite m</i>	210
<i>super vikaps tab</i>	210
<i>suphedrin tab 120mg er</i>	225
<i>suphedrine tab 10mg</i>	225
<i>suphedrine tab 30mg</i>	225
<i>suphedrine tab pe 10mg</i>	225
<i>supr aytinal tab</i>	210
<i>supr aytinal tab 50 plus</i>	210
<i>supr vitamin tab</i>	210
SUPRAX CAP 400MG	117
SUPRAX TAB 400MG	118
<i>surfak cap 240mg</i>	185
SUSTIVA TAB 600MG	105
SUTENT CAP 12.5MG	89
SUTENT CAP 25MG	89

SUTENT CAP 37.5MG	89
SUTENT CAP 50MG	89
<i>sw clearlax pow</i>	179
<i>sw nasal dec tab 30mg</i>	225
<i>sw nicotine gum 2mg mint</i>	246
<i>sw nicotine gum 4mg</i>	246
<i>sw nicotine loz 2mg mint</i>	246
<i>sw nicotine loz 4mg mint</i>	246
<i>syeda tab 3-0.03mg</i>	123
<i>symax-sl sub 0.125mg</i>	256
<i>symax-sr tab 0.375mg</i>	256
SYMBICORT AER 160-4.5	40
SYMBICORT AER 80-4.5	40
SYMFI LO TAB	105
SYMFI TAB	105
SYMLINPEN 60 INJ 1000MCG	54
SYMLNPEN 120 INJ 1000MCG	54
SYNAGIS INJ 100MG/ML	233
SYNAGIS INJ 50MG	233
SYNAREL SOL 2MG/ML	157
SYNTHROID TAB 100MCG	253
SYNTHROID TAB 112MCG	253
SYNTHROID TAB 125MCG	253
SYNTHROID TAB 137MCG	253
SYNTHROID TAB 150MCG	253
SYNTHROID TAB 175MCG	253
SYNTHROID TAB 200MCG	253
SYNTHROID TAB 25MCG	252
SYNTHROID TAB 300MCG	253
SYNTHROID TAB 50MCG	253
SYNTHROID TAB 75MCG	253
SYNTHROID TAB 88MCG	253
SYPRINE CAP 250MG	108
<i>systane dro contacts</i>	227
<i>systane oin</i>	227

T

<i>tab tussin tab 400mg</i>	136
<i>tab-a-vite tab</i>	214
<i>tab-a-vite tab /iron</i>	198
<i>tab-a-vite tab beta car</i>	214
<i>tab-a-vite tab maximum</i>	210
TABLOID TAB 40MG	86
<i>tacrolimus cap 0.5 mg</i>	110
<i>tacrolimus cap 1 mg</i>	110
<i>tacrolimus cap 5 mg</i>	110
<i>tacrolimus oint 0.03%</i>	151

<i>tacrolimus oint 0.1%</i>	150	<i>equivalent)</i>	81
<i>tactinal chw children</i>	19	<i>terazosin hcl cap 2 mg (base equivalent)</i>	81
<i>tactinal tab 325mg</i>	19	<i>terazosin hcl cap 5 mg (base equivalent)</i>	81
<i>tactinal tab 500mg</i>	19	<i>terbinafine cre 1%</i>	143
<i>tadalafil tab 20 mg (pah)</i>	117	<i>terbinafine hcl tab 250 mg</i>	65
TAFINLAR CAP 50MG	89	<i>terbutaline sulfate tab 2.5 mg</i>	40
TAFINLAR CAP 75MG	89	<i>terbutaline sulfate tab 5 mg</i>	41
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	87	<i>terconazole vaginal cream 0.4%</i>	261
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	87	<i>terconazole vaginal cream 0.8%</i>	261
<i>tamsulosin hcl cap 0.4 mg</i>	164	<i>terconazole vaginal suppos 80 mg</i>	261
TARCEVA TAB 100MG	89	<i>testosterone cypionate im inj in oil 100 mg/ml</i>	28
TARCEVA TAB 150MG	89	<i>testosterone cypionate im inj in oil 200 mg/ml</i>	28
TARCEVA TAB 25MG	89	<i>testosterone enanthate im inj in oil 200 mg/ml</i>	28
TARGRETIN GEL 1%	144	<i>tetrabenazine tab 12.5 mg</i>	238
TASIGNA CAP 150MG	89	<i>tetrabenazine tab 25 mg</i>	238
TASIGNA CAP 200MG	89	<i>tetracycline hcl cap 250 mg</i>	249
<i>taztia xt cap 120mg/24</i>	115	<i>tetracycline hcl cap 500 mg</i>	249
<i>taztia xt cap 180mg/24</i>	115	<i>tetterine oin 2%</i>	143
<i>taztia xt cap 240mg/24</i>	115	<i>tgt acetamin tab 500mg</i>	19
<i>tbc aer</i>	150	<i>tgt allergy/ tab congest</i>	132
<i>tears again dro 1.4%</i>	227	<i>tgt antacid chw 1000mg</i>	31
<i>tears again oin op</i>	227	<i>tgt antacid sus anti-gas</i>	31
<i>tears again sol adv eye</i>	227	<i>tgt antibiot oin</i>	140
<i>tears pure sol</i>	227	<i>tgt antifung cre 1%</i>	143
TECFIDERA CAP 120MG	238	<i>tgt apap dro infants</i>	19
TECFIDERA CAP 240MG	238	<i>tgt aspirin chw 81mg</i>	22
TECFIDERA MIS STARTER	238	<i>tgt aspirin chw child</i>	22
TECHNIVIE TAB	107	<i>tgt aspirin tab 325mg</i>	22
TEGRETOL-XR TAB 100MG	47	<i>tgt aspirin tab 81mg ec</i>	22
<i>temazepam cap 15 mg</i>	174	<i>tgt athletes cre foot</i>	143
<i>temazepam cap 30 mg</i>	174	<i>tgt calcium chw suppleme</i>	193
<i>temozolomide cap 100 mg</i>	85	<i>tgt cough liq form dm</i>	132
<i>temozolomide cap 140 mg</i>	85	TGT GLUCOSE CHW GRAPE	57
<i>temozolomide cap 180 mg</i>	85	TGT GLUCOSE CHW ORANGE	58
<i>temozolomide cap 20 mg</i>	85	TGT GLUCOSE CHW RASPBERRY	58
<i>temozolomide cap 250 mg</i>	85	<i>tgt lice kit complete</i>	153
<i>temozolomide cap 5 mg</i>	85	<i>tgt lubricnt dro eye</i>	227
<i>temsirolimus soln for iv infusion 25 mg/ml</i>	89	<i>tgt lubricnt oin eye nite</i>	227
<i>tenofovir disoproxil fumarate tab 300 mg</i>	105	<i>tgt nasal spr 0.65%</i>	224
<i>terazosin hcl cap 1 mg (base equivalent)</i>	81	<i>tgt natural tab laxative</i>	183
<i>terazosin hcl cap 10 mg (base</i>		<i>tgt nicotine dis 14mg/24h</i>	246

<i>tgt nicotine dis 21mg/24h</i>	246	<i>theratrum tab complete</i>	211
<i>tgt nicotine dis 7mg/24hr</i>	246	<i>theravim -m tab</i>	211
<i>tgt nicotine gum 2mg mint</i>	246	<i>therems tab</i>	215
<i>tgt nicotine gum 2mg orig</i>	246	<i>thermazene cre 1%</i>	144
<i>tgt nicotine gum 2mgfruit</i>	246	<i>thiamine hcl tab 100 mg</i>	265
<i>tgt nicotine gum 4mg</i>	246	<i>thiamine hcl tab 250 mg</i>	265
<i>tgt nicotine gum 4mg mint</i>	246	<i>thiamine hcl tab 50 mg</i>	265
<i>tgt nicotine gum 4mg orig</i>	247	<i>thioridazine hcl tab 10 mg</i>	100
<i>tgt nicotine loz 2mg chry</i>	247	<i>thioridazine hcl tab 100 mg</i>	100
<i>tgt nicotine loz 2mg mint</i>	247	<i>thioridazine hcl tab 25 mg</i>	100
<i>tgt nicotine loz 4mg chry</i>	247	<i>thioridazine hcl tab 50 mg</i>	100
<i>tgt nicotine loz 4mg mint</i>	247	<i>thiothixene cap 1 mg</i>	101
<i>tgt psyllium cap 0.52gm</i>	176	<i>thiothixene cap 10 mg</i>	102
<i>tgt senna tab 8.6mg</i>	183	<i>thiothixene cap 2 mg</i>	102
<i>th magnesium tab 200mg</i>	195	<i>thiothixene cap 5 mg</i>	102
TH MINERAL OIL	179	<i>thrive for tab women</i>	211
THALOMID CAP 100MG	108	<i>thrive gum 2mg mint</i>	247
THALOMID CAP 150MG	108	THYROGEN INJ 1.1MG	153
THALOMID CAP 200MG	108	<i>tiagabine hcl tab 2 mg</i>	48
THALOMID CAP 50MG	108	<i>tiagabine hcl tab 4 mg</i>	48
<i>theochron tab 100mg cr</i>	41	<i>ticlopidine hcl tab 250 mg</i>	168
<i>theochron tab 200mg cr</i>	41	<i>tilia fe tab</i>	123
<i>theochron tab 300mg cr</i>	41	TIMENTIN INJ 3.1GM	235
<i>theophylline soln 80 mg/15ml</i>	41	<i>timolol maleate ophth gel forming soln</i> <i>0.25%</i>	228
<i>theophylline tab er 12hr 100 mg</i>	41	<i>timolol maleate ophth gel forming soln</i> <i>0.5%</i>	228
<i>theophylline tab er 12hr 200 mg</i>	41	<i>timolol maleate ophth soln 0.25%</i>	228
<i>theophylline tab er 12hr 300 mg</i>	41	<i>timolol maleate ophth soln 0.5%</i>	228
<i>theophylline tab er 12hr 450 mg</i>	41	<i>timolol maleate tab 10 mg</i>	113
<i>theophylline tab er 24hr 400 mg</i>	41	<i>timolol maleate tab 20 mg</i>	113
<i>theophylline tab er 24hr 600 mg</i>	41	<i>timolol maleate tab 5 mg</i>	113
<i>thera form/ tab hematin</i>	210	<i>tinaspore sol 1%</i>	143
<i>thera tab</i>	214	<i>tioconazole oin 6.5% vag</i>	261
<i>thera vital tab m</i>	210	TIVICAY TAB 10MG	105
<i>therabasic-m tab</i>	210	TIVICAY TAB 25MG	106
<i>theradex m tab</i>	210	TIVICAY TAB 50MG	106
<i>theradex m/ tab beta car</i>	210	<i>tizanidine hcl tab 2 mg (base equivalent)</i>	223
<i>thera-m tab</i>	210	<i>tizanidine hcl tab 4 mg (base equivalent)</i>	223
<i>theramill cap plus</i>	210	TL FOLATE TAB	217
<i>thera-mill m tab</i>	210	<i>tl icon cap</i>	170
<i>thera-mill tab</i>	214	TOBRADEX OIN 0.3-0.1%	230
THERANATAL MIS COMPLETE	217	<i>tobramycin nebu soln 300 mg/5ml</i>	7
<i>therapeutic tab</i>	211, 214	<i>tobramycin ophth soln 0.3%</i>	229
<i>therapeutic- tab m</i>	211		
<i>therapeutic- tab m/lutein</i>	211		
<i>thera-tabs tab</i>	214		
<i>theratrum co tab 50 plus</i>	211		

<i>tobramycin-dexamethasone ophth susp</i>	
0.3-0.1%	230
TODAY SPONGE MIS	187
tolbutamide tab 500 mg	61
tolnaftate aerosol pow 1%	143
tolnaftate cre 1%	143
tolnaftate powder 1%	143
tolnaftate soln 1%	143
tolterodine tartrate tab 1 mg	163
tolterodine tartrate tab 2 mg	163
tolu-sed dm liq 100-10/5	132
topiramate sprinkle cap 15 mg	47
topiramate sprinkle cap 25 mg	47
topiramate tab 100 mg	47
topiramate tab 200 mg	47
topiramate tab 25 mg	47
topiramate tab 50 mg	47
toposar inj 100/5ml	90
toposar inj 200/10ml	90
toposar inj 500/25ml	90
topotecan hcl for inj 4 mg (base equiv)	90
TORISEL SOL 25MG/ML	89
torsemide tab 10 mg	155
torsemide tab 100 mg	155
torsemide tab 20 mg	155
torsemide tab 5 mg	155
total allerg liq 12.5/5ml	72
total allerg tab 25mg	72
total fiber pow	176
total formul tab	211
total formul tab 2	211
total formul tab 3	211
TRACLEER TAB 125MG	117
TRACLEER TAB 32MG	116
TRACLEER TAB 62.5MG	117
tramadol hcl tab 50 mg	25
tramadol hcl tab er 24hr 100 mg	25
tramadol hcl tab er 24hr 300 mg	25
tramadol hcl tab er 24hr biphasic release	
200 mg	25
trandolapril tab 1 mg	80
trandolapril tab 2 mg	80
trandolapril tab 4 mg	80
tranexamic acid iv soln 1000 mg/10ml	
(100 mg/ml)	172
tranexamic acid tab 650 mg	172
<i>tranylcypromine sulfate tab 10 mg</i>	50
TRAVATAN Z DRO 0.004%	231
travel sick chw 25mg	64
travel sick tab 50mg	64
travoprost ophth soln 0.004%	231
trav-tabs tab 50mg	64
trazodone hcl tab 100 mg	49
trazodone hcl tab 150 mg	49
trazodone hcl tab 50 mg	49
TRECATOR TAB 250MG	84
tretinoin cap 10 mg	90
tretinoin cream 0.025%	139
tretinoin cream 0.05%	139
tretinoin cream 0.1%	138
tretinoin gel 0.01%	139
tretinoin gel 0.025%	139
triacting nt liq cold/cgh	132
triadvance tab	222
triamcinolone acetonide cream 0.025%	
.....	149
triamcinolone acetonide cream 0.1%	149
triamcinolone acetonide cream 0.5%	149
triamcinolone acetonide dental paste	
0.1%	197
triamcinolone acetonide lotion 0.025%	
.....	149
triamcinolone acetonide lotion 0.1%	149
triamcinolone acetonide oint 0.025%	150
triamcinolone acetonide oint 0.1% ...	149
triamcinolone acetonide oint 0.5% ...	149
triaminic syp cough	127
triaminic tab 10mg	75
triamterene & hydrochlorothiazide cap	
37.5-25 mg	154
triamterene & hydrochlorothiazide tab	
37.5-25 mg	154
triamterene & hydrochlorothiazide tab	
75-50 mg	154
triazolam tab 0.125 mg	174
triazolam tab 0.25 mg	174
tri-biozene oin	140
tricon cap	170
triderm cre 0.1%	150
trientine hcl cap 250 mg	108
tri-estaryl tab	123
trifluoperazine hcl tab 1 mg (base	

<i>equivalent</i>)	100	TRUE METRIX KIT METER	187
<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	100	TRUE METRIX TES GLUCOSE	153
<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	100	<i>trueplus tab diabetic</i>	211
<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	100	TRUVADA TAB 100-150	106
<i>trifluridine ophth soln 1%</i>	229	TRUVADA TAB 133-200	106
<i>trihexyphenidyl hcl elixir 0.4 mg/ml</i>	91	TRUVADA TAB 167-250	106
<i>trihexyphenidyl hcl tab 2 mg</i>	91	TRUVADA TAB 200-300	106
<i>trihexyphenidyl hcl tab 5 mg</i>	91	TUDORZA PRES AER 400/ACT	39
<i>tri-legest tab fe</i>	123	<i>tums fresher chw 500mg</i>	31
<i>tri-linyah tab</i>	123	<i>tusnel diabt liq 10-100/5</i>	132
<i>trilyte sol</i>	177	<i>tussin adult liq 100/5ml</i>	136
<i>trimethoprim tab 100 mg</i>	32	<i>tussin adult liq cgh/cong</i>	132
<i>trimipramine maleate cap 100 mg</i>	54	<i>tussin chest syp 100/5ml</i>	136
<i>trimipramine maleate cap 25 mg</i>	54	<i>tussin cough liq 10-100/5</i>	132
<i>trimipramine maleate cap 50 mg</i>	54	<i>tussin cough syp dm</i>	132
TRINATAL GT TAB	217	<i>tussin dm cg liq 20-400</i>	132
TRINATAL RX TAB 1	217	<i>tussin dm liq</i>	132
<i>trinate tab</i>	222	<i>tussin dm liq 10-100mg</i>	133
<i>trinessa tab</i>	123	<i>tussin dm liq 10-200</i>	133
TRINTELLIX TAB 10MG	50	<i>tussin dm liq 10-200/5</i>	133
TRINTELLIX TAB 20MG	50	<i>tussin dm liq clear</i>	133
TRINTELLIX TAB 5MG	50	<i>tussin dm mx liq 10-200/5</i>	133
<i>triphrocaps cap</i>	198	<i>tussin dm syp 100-10/5</i>	133
<i>triple antib oin</i>	140	<i>tussin syp 100/5ml</i>	136
<i>triple antib oin max st</i>	140	TYBOST TAB 150MG	106
<i>triple antib oin plus</i>	140	TYKERB TAB 250MG	89
<i>triple antib oin plus max</i>	140	TYMLOS INJ	156
<i>triple paste oin af 2%</i>	143	TYSABRI INJ 300/15ML	238
<i>tri-previfem tab</i>	123	TYZEKA TAB 600MG	107
<i>tri-sprintec tab</i>	123	TYZINE PED DRO 0.05%	225
TRIUMEQ TAB	106	TYZINE SOL 0.1%	225
<i>tri-vit/fe dro /fl 0.25</i>	219	U	
<i>tri-vit/fl dro 0.25mg</i>	218	UDENYCA INJ 6MG/.6ML	170
<i>tri-vit/fl dro 0.5mg</i>	218	<i>ultra antiox tab formula</i>	211
<i>tri-vit/fluo dro 0.25mg</i>	218	<i>ultra choice chw kids</i>	220
<i>tri-vit/fluo dro 0.5mg</i>	218	<i>ultra freedra tab</i>	211
<i>tri-vita sol</i>	222	<i>ultra freedra tab /iron</i>	211
<i>tri-vitamin dro</i>	222	<i>ultra fresh dro 0.5% op</i>	227
<i>trivora-28 tab</i>	123	<i>ultra fresh oin pm</i>	227
<i>tropicamide ophth soln 0.5%</i>	228	<i>ultra sleep tab 25mg</i>	173
<i>tropicamide ophth soln 1%</i>	228	<i>ultra vita-t tab</i>	211
<i>tropium chloride tab 20 mg</i>	163	<i>ultrachoice tab advanced</i>	211
TRUE METRIX KIT AIR	187	<i>unifed liq 30mg/5ml</i>	225
		UNIFIBER POW	176
		<i>unithroid tab 100mcg</i>	253
		<i>unithroid tab 112mcg</i>	253

<i>unithroid tab 125mcg</i>	253
<i>unithroid tab 137mcg</i>	253
<i>unithroid tab 150mcg</i>	253
<i>unithroid tab 175mcg</i>	254
<i>unithroid tab 200mcg</i>	254
<i>unithroid tab 25mcg</i>	253
<i>unithroid tab 300mcg</i>	254
<i>unithroid tab 50mcg</i>	253
<i>unithroid tab 75mcg</i>	253
<i>unithroid tab 88mcg</i>	253
UP&UP CHW GRAPE	58
UP&UP CHW ORANGE	58
UP&UP CHW RASPBERRY	58
UPTRAVI TAB 1000MCG	247
UPTRAVI TAB 1200MCG	247
UPTRAVI TAB 1400MCG	247
UPTRAVI TAB 1600MCG	247
UPTRAVI TAB 200/800	247
UPTRAVI TAB 200MCG	247
UPTRAVI TAB 400MCG	247
UPTRAVI TAB 600MCG	247
UPTRAVI TAB 800MCG	247
<i>ursodiol cap 300 mg</i>	161
<i>ursodiol tab 250 mg</i>	161
<i>ursodiol tab 500 mg</i>	161

V

<i>vacuant plus ene 20-283</i>	185
<i>vagistat-3 kit combo pk</i>	261
<i>valacyclovir hcl tab 1 gm</i>	108
<i>valacyclovir hcl tab 500 mg</i>	108
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<i>valproate sodium oral soln 250 mg/5ml</i> <i>(base equiv)</i>	49
<i>valproic acid cap 250 mg</i>	49
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<i>vcf vaginal gel contrace</i>	260
<i>veg fiber pow 63%</i>	176
<i>velivet pak</i>	123
<i>venlafaxine hcl cap er 24hr 150 mg</i> <i>(base equivalent)</i>	51
<i>venlafaxine hcl cap er 24hr 37.5 mg</i> <i>(base equivalent)</i>	51

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<i>vita s forte tab</i>	212	VYVANSE CAP 30MG	2
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