



**2022**

# **Formulary**

## **(List of Covered Drugs)**

### **Michigan**

#### **Molina Dual Options MI Health Link Medicare-Medicaid Plan**

HPMS Approved Formulary File Submission 00022280, Version 7

Updated: **10/15/2021**

For more recent information or other questions, contact us at (855) 735-5604, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., ET or visit [MolinaHealthcare.com/Duals](http://MolinaHealthcare.com/Duals)

# Molina Dual Options MI Health Link Medicare-Medicaid Plan | 2022 *List of Covered Drugs (Formulary)*

## Introduction

This document is called the *List of Covered Drugs* (also known as the Drug List). It tells you which prescription drugs and over-the-counter drugs and items are covered by Molina Dual Options. The Drug List also tells you if there are any special rules or restrictions on any drugs covered by Molina Dual Options. Key terms and their definitions appear in the last chapter of the Member Handbook.

## Table of Contents

A. Disclaimers.....	3
B. Frequently Asked Questions (FAQ) .....	3
B1. What prescription drugs are on the <i>List of Covered Drugs</i> ? (We call the <i>List of Covered Drugs</i> the “Drug List” for short.).....	3
B2. Does the Drug List ever change? .....	4
B3. What happens when there is a change to the Drug List?.....	5
B4. Are there any restrictions or limits on drug coverage? Or are there any required actions to take to get certain drugs? .....	6
B5. How will I know if the drug I want has limits or if there are required actions to take to get the drug? .....	6
B6. What happens if Molina Dual Options changes their rules about some drugs (for example, prior authorization (approval), quantity limits, and/or step therapy restrictions)?.....	6
B7. How can I find a drug on the Drug List? .....	6
B8. What if the drug I want to take is not on the Drug List? .....	7
B9. What if I am a new Molina Dual Options member and can't find my drug on the Drug List or have a problem getting my drug? .....	7
B10. Can I ask for an exception to cover my drug? .....	8
B11. How can I ask for an exception? .....	9
B12. How long does it take to get an exception? .....	9

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B13. What are generic drugs? .....	9
B14. What are OTC drugs? .....	9
B15. Does Molina Dual Options cover non-drug OTC products? .....	10
B16. What is my copay?.....	10
B17. What are drug tiers?.....	10
C. Overview of the <i>List of Covered Drugs</i> .....	10
C1. Drugs Grouped by Medical Condition.....	11
D. Index of Covered Drugs.....	107

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## A. Disclaimers

This is a list of drugs that members can get in Molina Dual Options.

- ❖ Molina Dual Options MI Health Link Medicare-Medicaid Plan is a health plan that contracts with both Medicare and Michigan Medicaid to provide benefits of both programs to enrollees.
  - ❖ ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call (855) 735-5604, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., ET. The call is free.
  - ❖ ATENCIÓN: Si usted habla español, los servicios de asistencia del idioma, sin costo, están disponibles para usted. Llame al (855) 735-5604, servicio TTY al 711, de lunes a viernes, de 8:00 a. m. a 8:00 p. m., ET. La llamada es gratuita.
- ❖ ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية متوافر لك بالمجان. اتصل برقم 1-855-735-5604 (رقم هاتف الصم والبكم: 711) من الاثنين حتى الجمعة من 8:00 صباحاً حتى 8:00 مساءً كل يوم.
- ❖ You can also get this document for free in other formats, such as large print, braille, or audio. Call (855) 735-5604, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., ET. The call is free.
  - ❖ Molina Healthcare complies with applicable Federal civil rights laws and does not discriminate on the basis of race, ethnicity, national origin, religion, gender, sex, age, mental or physical disability, health status, receipt of healthcare, claims experience, medical history, genetic information, evidence of insurability, geographic location.
  - ❖ To make a standing request to get this document in a language other than English or in an alternate format now and in the future, please contact Member Services at (855) 735-5604, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., ET.

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## B. Frequently Asked Questions (FAQ)

Find answers here to questions you have about this *List of Covered Drugs*. You can read all of the FAQ to learn more or look for a question and answer.

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### B1. What prescription drugs are on the *List of Covered Drugs*? (We call the *List of Covered Drugs* the “Drug List” for short.)

The drugs on the *List of Covered Drugs* that starts on page 12 are the drugs covered by Molina Dual Options. These drugs are available at pharmacies within our network. A pharmacy is in our network if we have an agreement with them to work with us and provide you services. We refer to these pharmacies as “network pharmacies.”

- Molina Dual Options will cover all medically necessary drugs on the Drug List if:

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If you have questions, please call Molina Dual Options at (855) 735-5604, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., ET. The call is free. For more information, visit MolinaHealthcare.com/Duals.



- your doctor or other prescriber says you need them to get better or stay healthy, **and**
  - you fill the prescription at a Molina Dual Options network pharmacy.
- Molina Dual Options may have additional steps to access certain drugs (refer to question B4 below).

You can also find an up-to-date list of drugs that we cover on our website at [MolinaHealthcare.com/Duals](http://MolinaHealthcare.com/Duals), ask your Care Coordinator for help, or call Member Services toll-free at (855) 735-5604, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., ET.

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## B2. Does the Drug List ever change?

Yes, and Molina Dual Options must follow Medicare and Michigan Medicaid rules when making changes. We may add or remove drugs on the Drug List during the year.

We may also change our rules about drugs. For example, we could:

- Decide to require or not require prior approval for a drug. (Prior approval is permission from Molina Dual Options before you can get a drug.)
- Add or change the amount of a drug you can get (called “quantity limits”).
- Add or change step therapy restrictions on a drug. (Step therapy means you must try one drug before we will cover another drug.)

For more information on these drug rules, refer to question B4.

If you are taking a drug that was covered at the **beginning** of the year, we will generally not remove or change coverage of that drug **during the rest of the year** unless:

- a new, cheaper drug comes on the market that works as well as a drug on the Drug List now, **or**
- we learn that a drug is not safe, **or**
- a drug is removed from the market.

Questions B3 and B6 below have more information on what happens when the Drug List changes.

- You can always check Molina Dual Options up to date Drug List online at [MolinaHealthcare.com/Duals](http://MolinaHealthcare.com/Duals).
- You can also call Member Services to check the current Drug List at (855) 735-5604, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., ET.

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**If you have questions**, please call Molina Dual Options at (855) 735-5604, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., ET. The call is free. **For more information**, visit [MolinaHealthcare.com/Duals](http://MolinaHealthcare.com/Duals).



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### B3. What happens when there is a change to the Drug List?

Some changes to the Drug List will happen **immediately**. For example:

- **A new generic drug becomes available.** Sometimes, a new generic drug comes on the market that works as well as a brand name drug on the Drug List now. When that happens, we may remove the brand name drug and add the new generic drug, but your cost for the new drug will stay the same. When we add the new generic drug, we may also decide to keep the brand name drug on the list but change its coverage rules or limits.
  - We may not tell you before we make this change, but we will send you information about the specific change we made once it happens.
  - You or your provider can ask for an exception from these changes. We will send you a notice with the steps you can take to ask for an exception. Please refer to question B10 for more information on exceptions.
- **A drug is taken off the market.** If the Food and Drug Administration (FDA) says a drug you are taking is not safe or the drug's manufacturer takes a drug off the market, we will take it off the Drug List. If you are taking the drug, we will let you know. Talk with your doctor or other prescriber to find an alternative that is safe for you.

**We may make other changes that affect the drugs you take.** We will tell you in advance about these other changes to the Drug List. These changes might happen if:

- The FDA provides new guidance or there are new clinical guidelines about a drug.
- We add a generic drug that is *not* new to the market **and**
  - Replace a brand name drug currently on the Drug List **or**
  - Change the coverage rules or limits for the brand name drug.

When these changes happen, we will:

- Tell you at least 30 days before we make the change to the Drug List **or**
- Let you know and give you a 60-day supply of the drug after you ask for a refill.

This will give you time to talk to your doctor or other prescriber. They can help you decide:

- If there is a similar drug on the Drug List you can take instead **or**
- Whether to ask for an exception from these changes. To learn more about exceptions, refer to question B10.

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#### **B4. Are there any restrictions or limits on drug coverage? Or are there any required actions to take to get certain drugs?**

Yes, some drugs have coverage rules or have limits on the amount you can get. In some cases you or your doctor or other prescriber must do something before you can get the drug. For example:

- **Prior approval (or prior authorization):** For some drugs, you or your doctor or other prescriber must get approval from Molina Dual Options before you fill your prescription. If you don't get approval, Molina Dual Options may not cover the drug.
- **Quantity limits:** Sometimes Molina Dual Options limits the amount of a drug you can get.
- **Step therapy:** Sometimes Molina Dual Options requires you to do step therapy. This means you will have to try drugs in a certain order for your medical condition. You might have to try one drug before we will cover another drug. If your prescriber thinks the first drug doesn't work for you, then we will cover the second.

You can find out if your drug has any additional requirements or limits by looking in the tables on pages 12 - 106. You can also get more information by visiting our website at MolinaHealthcare.com/Duals. We have posted online documents that explains our prior authorization and step therapy restrictions. You may also ask us to send you a copy.

You can also ask for an exception from these limits. This will give you time to talk to your doctor or other prescriber. They can help you decide if there is a similar drug on the Drug List you can take instead or whether to ask for an exception. Please refer to questions B10-B12 for more information about exceptions.

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#### **B5. How will I know if the drug I want has limits or if there are required actions to take to get the drug?**

The table of drugs on page 11 has a column labeled "Necessary actions, restrictions, or limits on use."

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#### **B6. What happens if Molina Dual Options changes their rules about some drugs (for example, prior authorization (approval), quantity limits, and/or step therapy restrictions)?**

In some cases, we will tell you in advance if we add or change prior approval, quantity limits, and/or step therapy restrictions on a drug. Refer to question B3 for more information about this advance notice and situations where we may not be able to tell you in advance when our rules about drugs on the Drug List change.

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#### **B7. How can I find a drug on the Drug List?**

There are two ways to find a drug:

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If you have questions, please call Molina Dual Options at (855) 735-5604, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., ET. The call is free. For more information, visit MolinaHealthcare.com/Duals.



- You can search alphabetically by the drug's name, **or**
- You can search by medical condition.

To search **alphabetically**, go to the Index of Covered Drugs section. You can find it on page number 107.

To search **by medical condition**, find the section labeled "Drugs Grouped by Medical Condition" on page 11. The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treat. For example, if you have a heart condition, you should look in the category, Beta-blockers. That is where you will find drugs that treat heart conditions.

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## B8. What if the drug I want to take is not on the Drug List?

If you don't find your drug on the Drug List, call Member Services at (855) 735-5604, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., ET and ask about it. If you learn that Molina Dual Options will not cover the drug, you can do one of these things:

- Ask Member Services for a list of drugs like the one you want to take. Then show the list to your doctor or other prescriber. They can prescribe a drug on the Drug List that is like the one you want to take. **Or**
- You can ask the health plan to make an exception to cover your drug. Please refer to questions B10-B12 for more information about exceptions.

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## B9. What if I am a new Molina Dual Options member and can't find my drug on the Drug List or have a problem getting my drug?

We can help. We may cover a temporary 60-day supply of your drug during the first 90 days you are a member of Molina Dual Options. This will give you time to talk to your doctor or other prescriber. They can help you decide if there is a similar drug on the Drug List you can take instead or whether to ask for an exception.

If your prescription is written for fewer days, we will allow multiple refills to provide up to a maximum of 60 days of medication.

We will cover a 60-day supply of your drug if:

- you are taking a drug that is not on our Drug List, **or**
- health plan rules do not let you get the amount ordered by your prescriber, **or**
- the drug requires prior approval by Molina Dual Options, **or**
- you are taking a drug that is part of a step therapy restriction.

If you are in a nursing home or other long-term care facility and need a drug that is not on the Drug List or if you cannot easily get the drug you need, we can help. If you have been in the plan for more than 90 days, live in a long-term care facility, and need a supply right away:

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**If you have questions**, please call Molina Dual Options at (855) 735-5604, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., ET. The call is free. **For more information**, visit [MolinaHealthcare.com/Duals](http://MolinaHealthcare.com/Duals).



- We will cover one 60 supply of the drug you need (unless you have a prescription for fewer days), whether or not you are a new Molina Dual Options member.
- This is in addition to the temporary supply during the first 90 days you are a member of Molina Dual Options.

## Transition Policy

New members in our Plan may be taking drugs that aren't on our formulary or that are subject to certain restrictions, such as prior authorization or step therapy. Current members may also be affected by changes in our formulary from one year to the next. Members should talk to their doctors to decide if they should switch to a different drug that we cover or request a formulary exception in order to get coverage for the drug. See the Member Handbook to learn more about how to request an exception. Please contact Member Services if your drug is not on our formulary, is subject to certain restrictions, such as prior authorization or step therapy, or will no longer be on our formulary next year and you need help switching to a different drug that we cover or requesting a formulary exception.

During the period of time members are talking to their doctors to determine the right course of action, we may provide a temporary supply of the non-formulary drug if those members need a refill for the drug during the first 90 days of new membership in our Plan for Part D drugs (tiers 1 and 2) and 90 days for your Medicaid drugs (tier 3). If you are a current member affected by a formulary change from one year to the next, we will provide a temporary supply of the non-formulary drug if you need a refill for the drug during the first 90 days of the new plan year.

When a member goes to a network pharmacy and we provide a temporary supply of a drug that isn't on our formulary, or that has coverage restrictions or limits (but is otherwise considered a "Part D drug"), we will cover a 60-day supply (unless the prescription is written for fewer days). After we cover the temporary 60-day supply, we generally will not pay for these drugs as part of our transition policy again.

We will provide you with a written notice after we cover your temporary supply. This notice will explain the steps you can take to request an exception and how to work with your doctor to decide if you should switch to an appropriate drug that we cover.

If a new member is a resident of a long-term-care facility (like a nursing home), we will cover a temporary 31-day transition supply (unless the prescription is written for fewer days). If necessary, we will cover more than one refill of these drugs during the first 90 days a new member is enrolled in our Plan. If the resident has been enrolled in our Plan for more than 90 days and needs a drug that isn't on our formulary or is subject to other restrictions, such as step therapy or dosage limits, we will cover a temporary 31-day emergency supply of that drug (unless the prescription is for fewer days) while the new member pursues a formulary exception. Exceptions are available in situations where you experience a change in the level of care you are receiving that also requires you to transition from one facility or treatment center to another. In such circumstances, you

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**If you have questions**, please call Molina Dual Options at (855) 735-5604, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., ET. The call is free. **For more information**, visit [MolinaHealthcare.com/Duals](http://MolinaHealthcare.com/Duals).



would be eligible for a temporary, one-time fill exception even if you are outside of the first 90 days as a member of the plan.

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## **B10. Can I ask for an exception to cover my drug?**

Yes. You can ask Molina Dual Options to make an exception to cover a drug that is not on the Drug List.

You can also ask us to change the rules on your drug.

- For example, Molina Dual Options may limit the amount of a drug we will cover. If your drug has a limit, you can ask us to change the limit and cover more.
  - Other examples: You can ask us to drop step therapy restrictions or prior approval requirements.
- 

## **B11. How can I ask for an exception?**

To ask for an exception, call Member Services. A Member Services representative will work with you and your provider to help you ask for an exception. You can also read Chapter 9, of the *Member Handbook* to learn more about exceptions.

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## **B12. How long does it take to get an exception?**

After we get a statement from your prescriber supporting your request for an exception, we will give you a decision within 72 hours. Your prescriber can call Molina Dual Options or fax the supporting statement to (866) 290-1309.

If you or your prescriber think your health may be harmed if you have to wait 72 hours for a decision, you can ask for an expedited exception. This is a faster decision. If your prescriber supports your request, we will give you a decision within 24 hours of getting your prescriber's supporting statement.

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## **B13. What are generic drugs?**

Generic drugs are made up of the same active ingredients as brand name drugs. They usually cost less than the brand name drug and usually don't have well-known names. Generic drugs are approved by the Food and Drug Administration (FDA).

Molina Dual Options covers both brand name drugs and generic drugs.

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## **B14. What are OTC drugs?**

OTC stands for "over-the-counter." Molina Dual Options covers some OTC drugs when they are written as prescriptions by your provider.

You can read the Molina Dual Options Drug List to find out what OTC drugs are covered.

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## **B15. Does Molina Dual Options cover non-drug OTC products?**

Molina Dual Options covers some non-drug OTC products when they are written as prescriptions by your provider.

Examples of non-drug OTC products include *non-aspirin tab 325mg, cough syrup 100/5ml*.

You can read the Molina Dual Options Drug List to find out what non-drug OTC products are covered.

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## **B16. What is my copay?**

As a Molina Dual Options member, you have no copays for prescription and OTC drugs as long as you follow Molina Dual Options rules.

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## **B17. What are drug tiers?**

Tiers are groups of drugs.

- Tier 1 drugs are generic drugs. For Tier 1 drugs, you pay nothing.
  - Tier 2 drugs are brand name drugs. For Tier 2 drugs, you pay nothing.
  - Tier 3 drugs are Non-Medicare Rx/Over The Counter (OTC) drugs. For Tier 3 drugs, you pay nothing.
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## **C. Overview of the *List of Covered Drugs***

The following list of covered drugs gives you information about the drugs covered by Molina Dual Options. If you have trouble finding your drug in the list, turn to the Index of Covered Drugs that begins on page 107. The index alphabetically lists all drugs covered by Molina Dual Options.

The first column of the chart lists the name of the drug. Brand name drugs are capitalized (e.g., BYSTOLIC), and generic drugs are listed in lower-case italics (e.g., metoprolol).

The information in the necessary actions, restrictions, or limits on use column tells you if Molina Dual Options has any rules for covering your drug.

**Note:** The \* next to a drug means the drug is not a “Part D drug.”

- These drugs have different rules for appeals. An appeal is a formal way of asking us to review a coverage decision and to change it if you think we made a mistake. For example, we might decide that a drug that you want is not covered or is no longer covered by Medicare or Michigan Medicaid.
- If you or your prescriber disagrees with our decision, you can appeal. To ask for instructions on how to appeal, call Member Services at (855) 735-5604, TTY: 711,

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If you have questions, please call Molina Dual Options at (855) 735-5604, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., ET. The call is free. For more information, visit MolinaHealthcare.com/Duals.



Monday – Friday, 8 a.m. to 8 p.m., ET. You can also read Chapter 9 in the *Member Handbook* to learn how to appeal a decision.

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## C1. Drugs Grouped by Medical Condition

The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treat. For example, if you have a heart condition, you should look in the category, Beta-blockers. That is where you will find drugs that treat heart conditions.

Here are the meanings of the codes used in the “Necessary actions, restrictions, or limits on use” column:

PA = Prior Authorization (approval): you must have approval before you can get this drug.

QL = Quantity Limits: the amount of the drug that the plan will cover.

ST = Step Therapy Criteria: you must try another drug before you can get this one.

NM = Non-Mail Order: this drug cannot be filled through mail order.

B/D = This drug may be covered under Medicare Part B or D depending upon the circumstances.

LA = Limited Access Drug: this drug may be available only at certain pharmacies.

(\*) = Non-Part D Drugs, or OTC items that are covered by Medicaid.

NDS = Non-Extended Days Supply: you will be limited to how many days supply you can receive.

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**MOLINA\_MI\_CY22\_2T\_MMP eff 01/01/2022**

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)</b>	<b>LIMITS ON USE</b>
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**ANALGESICS - DRUGS TO TREAT PAIN AND INFLAMMATION****GOUT - DRUGS TO TREAT GOUT**

<i>allopurinol</i> TABS 100mg, 300mg	\$0(1)	
<i>colchicine</i> TABS .6mg	\$0(1)	QL (120 tabs / 30 days)
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	\$0(1)	
<i>MITIGARE CAPS .6mg</i>	\$0(2)	QL (60 caps / 30 days)
<i>probenecid</i> TABS 500mg	\$0(1)	

**MISCELLANEOUS**

<i>acetaminophen</i> SOLN 160mg/5ml, 325mg/10.15ml, 650mg/20.3ml; SUPP 120mg, 650mg; SUSP 160mg/5ml, 325mg/10.15ml; TABS 325mg, 500mg; TBCR 650mg	\$0(3)	NM; *
<i>acetaminophen extra stren</i> TABS 500mg	\$0(3)	NM; *
<i>adult aspirin regimen</i> TBEC 81mg	\$0(3)	NM; *
<i>arthritis pain relief</i> TBCR 650mg	\$0(3)	NM; *
<i>aspirin</i> CHEW 81mg; TABS 325mg; TBEC 81mg, 325mg	\$0(3)	NM; *
<i>ASPIRIN</i> SUPP 300mg	\$0(3)	NM; *
<i>aspirin adult low dose</i> TBEC 81mg	\$0(3)	NM; *
<i>aspirin adult low strengt</i> CHEW 81mg	\$0(3)	NM; *
<i>aspirin low dose</i> CHEW 81mg; TBEC 81mg	\$0(3)	NM; *
<i>childrens acetaminophen</i> SUSP 160mg/5ml	\$0(3)	NM; *
<i>childrens silapap</i> LIQD 160mg/5ml	\$0(3)	NM; *
<i>ed-apap</i> LIQD 160mg/5ml	\$0(3)	NM; *
<i>feverall adults</i> SUPP 650mg	\$0(3)	NM; *
<i>feverall childrens</i> SUPP 120mg	\$0(3)	NM; *
<i>FEVERALL INFANTS</i> SUPP 80mg	\$0(3)	NM; *
<i>FEVERALL JUNIOR STRENGTH</i> SUPP 325mg	\$0(3)	NM; *
<i>gnp 8 hour arthritis reli</i> TBCR 650mg	\$0(3)	NM; *
<i>gnp 8 hour pain relief</i> TBCR 650mg	\$0(3)	NM; *
<i>gnp 8 hour pain reliever</i> TBCR 650mg	\$0(3)	NM; *
<i>gnp acetaminophen</i> TABS 325mg	\$0(3)	NM; *
<i>gnp acetaminophen extra s</i> TABS 500mg	\$0(3)	NM; *
<i>gnp adult aspirin low str</i> CHEW 81mg	\$0(3)	NM; *
<i>gnp arthritis pain relief</i> TBCR 650mg	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)</b>
<i>gnp aspirin TABS 325mg; TBEC 81mg</i>	\$0(3)	NM; *
<i>gnp aspirin low dose TBEC 81mg</i>	\$0(3)	NM; *
<i>gnp infants pain/fever SUSP 160mg/5ml</i>	\$0(3)	NM; *
<i>gnp pain &amp; fever children SUSP 160mg/5ml</i>	\$0(3)	NM; *
<i>gnp pain relief TABS 325mg</i>	\$0(3)	NM; *
<i>gnp pain relief extra str TABS 500mg</i>	\$0(3)	NM; *
<i>goodsense arthritis pain TBCR 650mg</i>	\$0(3)	NM; *
<i>goodsense aspirin CHEW 81mg; TABS 325mg</i>	\$0(3)	NM; *
<i>goodsense aspirin adult / CHEW 81mg</i>	\$0(3)	NM; *
<i>goodsense pain &amp; fever ch SUSP 160mg/5ml</i>	\$0(3)	NM; *
<i>goodsense pain &amp; fever in SUSP 160mg/5ml</i>	\$0(3)	NM; *
<i>goodsense pain relief TABS 325mg</i>	\$0(3)	NM; *
<i>goodsense pain relief ext TABS 500mg</i>	\$0(3)	NM; *
<i>hm arthritis pain relief TBCR 650mg</i>	\$0(3)	NM; *
<i>hm aspirin CHEW 81mg; TABS 325mg</i>	\$0(3)	NM; *
<i>hm aspirin ec low dose TBEC 81mg</i>	\$0(3)	NM; *
<i>hm pain &amp; fever childrens SUSP 160mg/5ml</i>	\$0(3)	NM; *
<i>hm pain &amp; fever infants SUSP 160mg/5ml</i>	\$0(3)	NM; *
<i>hm pain relief TBCR 650mg</i>	\$0(3)	NM; *
<i>hm pain relief extra stre TABS 500mg</i>	\$0(3)	NM; *
<i>hm pain reliever TABS 325mg</i>	\$0(3)	NM; *
<i>8 hour arthritis pain rel TBCR 650mg</i>	\$0(3)	NM; *
<i>8hr muscle aches &amp; pain TBCR 650mg</i>	\$0(3)	NM; *
<i>m-pap LIQD 160mg/5ml</i>	\$0(3)	NM; *
<i>mapap CAPS 500mg</i>	\$0(3)	NM; *
<i>mapap acetaminophen extra LIQD 500mg/15ml</i>	\$0(3)	NM; *
<i>mapap arthritis pain TBCR 650mg</i>	\$0(3)	NM; *
<i>mapap childrens CHEW 80mg</i>	\$0(3)	NM; *
<i>non-aspirin pain relief e TABS 500mg</i>	\$0(3)	NM; *
<i>pain &amp; fever childrens SUSP 160mg/5ml</i>	\$0(3)	NM; *
<i>pain &amp; fever infants SUSP 160mg/5ml</i>	\$0(3)	NM; *
<i>pain relief extra strengt TABS 500mg</i>	\$0(3)	NM; *
<i>pharbetol TABS 325mg</i>	\$0(3)	NM; *
<i>pharbetol extra strength TABS 500mg</i>	\$0(3)	NM; *
<i>qc arthritis pain relief TBCR 650mg</i>	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)</b>
<i>qc aspirin</i> TABS 325mg; TBEC 325mg	\$0(3)	NM; *
<i>qc aspirin low dose</i> CHEW 81mg; TBEC 81mg	\$0(3)	NM; *
<i>qc chewable aspirin low d</i> CHEW 81mg	\$0(3)	NM; *
<i>qc enteric aspirin</i> TBEC 325mg	\$0(3)	NM; *
<i>qc non-aspirin childrens</i> SUSP 160mg/5ml	\$0(3)	NM; *
<i>qc non-aspirin extra stre</i> TABS 500mg	\$0(3)	NM; *
<i>qc pain relief</i> TABS 325mg	\$0(3)	NM; *
<i>qc pain relief childrens</i> SUSP 160mg/5ml	\$0(3)	NM; *
<i>qc pain relief extra stre</i> TABS 500mg	\$0(3)	NM; *
<i>sm arthritis pain relieve</i> TBCR 650mg	\$0(3)	NM; *
<i>sm aspirin</i> TABS 325mg	\$0(3)	NM; *
<i>sm aspirin adult low stre</i> CHEW 81mg; TBEC 81mg	\$0(3)	NM; *
<i>sm aspirin enteric coated</i> TBEC 325mg	\$0(3)	NM; *
<i>sm aspirin low dose</i> CHEW 81mg	\$0(3)	NM; *
<i>sm childrens aspirin</i> CHEW 81mg	\$0(3)	NM; *
<i>sm pain &amp; fever childrens</i> SUSP 80mg/2.5ml, 160mg/5ml	\$0(3)	NM; *
<i>sm pain &amp; fever infants</i> SUSP 160mg/5ml	\$0(3)	NM; *
<i>sm pain relief extra stre</i> TABS 500mg	\$0(3)	NM; *
<i>sm pain reliever</i> TABS 325mg	\$0(3)	NM; *
<i>sm pain reliever extra st</i> TABS 500mg; TBCR 650mg	\$0(3)	NM; *
<i>st joseph aspirin</i> TBEC 81mg	\$0(3)	NM; *
<i>st joseph low dose aspiri</i> CHEW 81mg	\$0(3)	NM; *
<i>tension headache</i>	\$0(3)	NM; *
<i>tri-buffered aspirin</i>	\$0(3)	NM; *

#### **NSAIDS - DRUGS TO TREAT PAIN AND INFLAMMATION**

ADVIL CAPS 200mg; TABS 200mg	\$0(3)	NM; *
<i>advil junior strength</i> CHEW 100mg	\$0(3)	NM; *
ADVIL MIGRAINE CAPS 200mg	\$0(3)	NM; *
<i>all day pain relief</i> TABS 220mg	\$0(3)	NM; *
<i>all day relief</i> TABS 220mg	\$0(3)	NM; *
<i>celecoxib</i> CAPS 50mg	\$0(1)	QL (240 caps / 30 days)
<i>celecoxib</i> CAPS 100mg	\$0(1)	QL (120 caps / 30 days)
<i>celecoxib</i> CAPS 200mg	\$0(1)	QL (60 caps / 30 days)
<i>celecoxib</i> CAPS 400mg	\$0(1)	QL (30 caps / 30 days)
CHILDRENS ADVIL SUSP 100mg/5ml	\$0(3)	NM; *
<i>childrens ibuprofen</i> SUSP 100mg/5ml	\$0(3)	NM; *
<i>diclofenac potassium</i> TABS 50mg	\$0(1)	QL (120 tabs / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<i>diclofenac sodium</i> TB24 100mg; TBEC 25mg, 50mg, 75mg	\$0(1)	
<i>diflunisal</i> TABS 500mg	\$0(1)	
<i>ec-naproxen</i> TBEC 375mg	\$0(1)	QL (120 tabs / 30 days)
<i>ec-naproxen</i> TBEC 500mg	\$0(1)	QL (90 tabs / 30 days)
<i>etodolac</i> CAPS 200mg, 300mg; TABS 400mg, 500mg; TB24 400mg, 500mg, 600mg	\$0(1)	
<i>flurbiprofen</i> TABS 100mg	\$0(1)	
<i>gnp childrens ibuprofen</i> SUSP 100mg/5ml	\$0(3)	NM; *
<i>gnp ibuprofen</i> CAPS 200mg; TABS 200mg	\$0(3)	NM; *
<i>gnp ibuprofen infants</i> SUSP 50mg/1.25ml	\$0(3)	NM; *
<i>gnp ibuprofen junior stre</i> CHEW 100mg	\$0(3)	NM; *
<i>gnp naproxen</i> TABS 220mg	\$0(3)	NM; *
<i>gnp naproxen sodium</i> CAPS 220mg	\$0(3)	NM; *
<i>goodsense ibuprofen</i> CAPS 200mg; TABS 200mg	\$0(3)	NM; *
<i>goodsense ibuprofen child</i> SUSP 100mg/5ml	\$0(3)	NM; *
<i>goodsense ibuprofen infan</i> SUSP 50mg/1.25ml	\$0(3)	NM; *
<i>goodsense naproxen sodium</i> TABS 220mg	\$0(3)	NM; *
<i>hm ibuprofen</i> CAPS 200mg; TABS 200mg	\$0(3)	NM; *
<i>hm ibuprofen childrens</i> SUSP 100mg/5ml	\$0(3)	NM; *
<i>hm ibuprofen ib</i> TABS 200mg	\$0(3)	NM; *
<i>hm ibuprofen ib/junior st</i> CHEW 100mg	\$0(3)	NM; *
<i>hm ibuprofen infants</i> SUSP 50mg/1.25ml	\$0(3)	NM; *
<i>hm naproxen sodium</i> CAPS 220mg; TABS 220mg	\$0(3)	NM; *
<i>ibu</i> TABS 600mg, 800mg	\$0(1)	
<i>ibu-200</i> TABS 200mg	\$0(3)	NM; *
<i>ibuprofen</i> CAPS 200mg; TABS 200mg	\$0(3)	NM; *
<i>ibuprofen</i> SUSP 100mg/5ml; TABS 400mg, 600mg, 800mg	\$0(1)	
<i>ibuprofen childrens</i> SUSP 100mg/5ml	\$0(3)	NM; *
<i>ibuprofen infants</i> SUSP 50mg/1.25ml	\$0(3)	NM; *
<i>ibuprofen infants drops</i> SUSP 50mg/1.25ml	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)</b>
<i>ibuprofen junior strength</i> CHEW 100mg	\$0(3)	NM; *
INFANTS ADVIL SUSP 50mg/1.25ml	\$0(3)	NM; *
<i>infants ibuprofen</i> SUSP 50mg/1.25ml	\$0(3)	NM; *
<i>meloxicam</i> TABS 7.5mg, 15mg	\$0(1)	
<i>nabumetone</i> TABS 500mg, 750mg	\$0(1)	
<i>naproxen</i> TABS 250mg, 375mg, 500mg	\$0(1)	
<i>naproxen</i> TBEC 375mg	\$0(1)	QL (120 tabs / 30 days)
<i>naproxen</i> TBEC 500mg	\$0(1)	QL (90 tabs / 30 days)
<i>naproxen sodium</i> CAPS 220mg; TABS 220mg	\$0(3)	NM; *
<i>naproxen sodium</i> TABS 275mg, 550mg	\$0(1)	
<i>piroxicam</i> CAPS 10mg, 20mg	\$0(1)	
<i>qc childrens ibuprofen</i> SUSP 100mg/5ml	\$0(3)	NM; *
<i>qc ibuprofen</i> CAPS 200mg; TABS 200mg	\$0(3)	NM; *
<i>qc ibuprofen ib</i> TABS 200mg	\$0(3)	NM; *
<i>qc naproxen sodium</i> TABS 220mg	\$0(3)	NM; *
<i>sm childrens ibuprofen</i> SUSP 100mg/5ml	\$0(3)	NM; *
<i>sm ibuprofen</i> CAPS 200mg; TABS 200mg	\$0(3)	NM; *
<i>sm ibuprofen ib</i> CHEW 100mg; TABS 200mg	\$0(3)	NM; *
<i>sm infants ibuprofen</i> SUSP 50mg/1.25ml	\$0(3)	NM; *
<i>sm naproxen sodium</i> TABS 220mg	\$0(3)	NM; *
<i>sulindac</i> TABS 150mg, 200mg	\$0(1)	
<b>OPIOID ANALGESICS, LONG-ACTING</b>		
<i>buprenorphine</i> PTWK 5mcg/hr, 7.5mcg/hr, 10mcg/hr, 15mcg/hr, 20mcg/hr	\$0(1)	QL (4 patches / 28 days), PA
<i>fentanyl</i> PT72 12mcg/hr, 25mcg/hr, 50mcg/hr, 75mcg/hr, 100mcg/hr	\$0(1)	QL (10 patches / 30 days), PA
<i>hydrocodone bitartrate</i> T24A 20mg, 30mg, 40mg, 60mg	\$0(1)	QL (30 tabs / 30 days), PA
<i>hydrocodone bitartrate</i> T24A 80mg, 100mg, 120mg	\$0(2)	QL (30 tabs / 30 days), PA
<i>HYSINGLA ER</i> T24A 20mg, 30mg, 40mg, 60mg, 80mg, 100mg, 120mg	\$0(2)	QL (30 tabs / 30 days), PA
<i>methadone hcl</i> SOLN 5mg/5ml, 10mg/5ml	\$0(1)	QL (450 mL / 30 days), PA
<i>methadone hcl</i> TABS 5mg, 10mg	\$0(1)	QL (90 tabs / 30 days), PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
<i>methadone hydrochloride i CONC 10mg/ml</i>	\$0(1)	QL (90 mL / 30 days), PA
<i>morphine sulfate TBCR 15mg, 30mg, 60mg, 100mg, 200mg</i>	\$0(1)	QL (90 tabs / 30 days), PA
<i>OXYCONTIN T12A 10mg, 15mg, 20mg, 30mg, 40mg, 60mg, 80mg</i>	\$0(2)	QL (60 tabs / 30 days), PA
<b><i>OPIOID ANALGESICS, SHORT-ACTING</i></b>		
<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	\$0(1)	QL (2700 mL / 30 days)
<i>acetaminophen w/ codeine tab 300-15 mg</i>	\$0(1)	QL (400 tabs / 30 days)
<i>acetaminophen w/ codeine tab 300-30 mg</i>	\$0(1)	QL (360 tabs / 30 days)
<i>acetaminophen w/ codeine tab 300-60 mg</i>	\$0(1)	QL (180 tabs / 30 days)
<i>butorphanol tartrate SOLN 1mg/ml, 2mg/ml</i>	\$0(2)	
<i>endocet tab 2.5-325mg</i>	\$0(1)	QL (360 tabs / 30 days)
<i>endocet tab 5-325mg</i>	\$0(1)	QL (360 tabs / 30 days)
<i>endocet tab 7.5-325mg</i>	\$0(1)	QL (240 tabs / 30 days)
<i>endocet tab 10-325mg</i>	\$0(1)	QL (180 tabs / 30 days)
<i>fentanyl citrate LPOP 200mcg</i>	\$0(1)	QL (120 lozenges / 30 days), PA
<i>fentanyl citrate LPOP 400mcg, 600mcg, 800mcg, 1200mcg, 1600mcg</i>	\$0(2)	NDS, QL (120 lozenges / 30 days), PA
<i>hydrocodone-acetaminophen soln 7.5- 325 mg/15ml</i>	\$0(1)	QL (2700 mL / 30 days)
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	\$0(1)	QL (240 tabs / 30 days)
<i>hydrocodone-acetaminophen tab 7.5- 325 mg</i>	\$0(1)	QL (180 tabs / 30 days)
<i>hydrocodone-acetaminophen tab 10- 325 mg</i>	\$0(1)	QL (180 tabs / 30 days)
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>	\$0(1)	QL (150 tabs / 30 days)
<i>hydromorphone hcl LIQD 1mg/ml</i>	\$0(1)	QL (600 mL / 30 days)
<i>hydromorphone hcl TABS 2mg, 4mg, 8mg</i>	\$0(1)	QL (180 tabs / 30 days)
<i>morphine sulfate SOLN 1mg/ml, 4mg/ml, 8mg/ml, 10mg/ml</i>	\$0(2)	B/D
<i>MORPHINE SULFATE SOLN 2mg/ml, 4mg/ml, 5mg/ml, 8mg/ml, 10mg/ml</i>	\$0(2)	B/D
<i>morphine sulfate SOLN 10mg/5ml, 20mg/5ml</i>	\$0(1)	QL (900 mL / 30 days)
<i>morphine sulfate SOLN 100mg/5ml</i>	\$0(1)	QL (180 mL / 30 days)
<i>morphine sulfate TABS 15mg, 30mg</i>	\$0(1)	QL (180 tabs / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<i>nalbuphine hcl</i> SOLN 10mg/ml, 20mg/ml	\$0(2)	
<i>oxycodone hcl</i> CAPS 5mg	\$0(1)	QL (180 caps / 30 days)
<i>oxycodone hcl</i> CONC 100mg/5ml	\$0(1)	QL (180 mL / 30 days)
<i>oxycodone hcl</i> SOLN 5mg/5ml	\$0(1)	QL (900 mL / 30 days)
<i>oxycodone hcl</i> TABS 5mg, 10mg, 15mg, 20mg, 30mg	\$0(1)	QL (180 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 2.5- 325 mg</i>	\$0(1)	QL (360 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	\$0(1)	QL (360 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 7.5- 325 mg</i>	\$0(1)	QL (240 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 10- 325 mg</i>	\$0(1)	QL (180 tabs / 30 days)
<i>tramadol hcl</i> TABS 50mg	\$0(1)	QL (240 tabs / 30 days)
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	\$0(1)	QL (240 tabs / 30 days)

## **ANESTHETICS - DRUGS FOR NUMBING**

### **LOCAL ANESTHETICS**

<i>lidocaine hcl</i> (local anesth.) SOLN .5%, 1%, 1.5%, 2%	\$0(1)	B/D
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## **ANTI-INFECTIVES - DRUGS TO TREAT INFECTIONS**

### **ANTI-INFECTIVES - MISCELLANEOUS**

<i>albendazole</i> TABS 200mg	\$0(2)	NDS
<i>amikacin sulfate</i> SOLN 1gm/4ml, 500mg/2ml	\$0(1)	
<i>atovaquone</i> SUSP 750mg/5ml	\$0(1)	
<i>aztreonam</i> SOLR 1gm, 2gm	\$0(1)	
<i>CAYSTON</i> SOLR 75mg	\$0(2)	NDS, NM, LA, PA
<i>clindamycin hcl</i> CAPS 75mg, 150mg, 300mg	\$0(1)	
<i>clindamycin palmitate hydrochloride</i> SOLR 75mg/5ml	\$0(1)	
<i>clindamycin phosphate</i> SOLN 300mg/2ml, 600mg/4ml, 900mg/6ml, 9000mg/60ml	\$0(1)	
<i>clindamycin phosphate in d5w iv soln</i> <i>300 mg/50ml</i>	\$0(1)	
<i>clindamycin phosphate in d5w iv soln</i> <i>600 mg/50ml</i>	\$0(1)	
<i>clindamycin phosphate in d5w iv soln</i> <i>900 mg/50ml</i>	\$0(1)	
<i>CLINDMYC/NAC INJ</i> 300/50ML	\$0(2)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
CLINDMYC/NAC INJ 600/50ML	\$0(2)	
CLINDMYC/NAC INJ 900/50ML	\$0(2)	
<i>colistimethate sodium</i> SOLR 150mg	\$0(1)	
<i>dapsone</i> TABS 25mg, 100mg	\$0(1)	
DAPTO MYCIN SOLR 350mg	\$0(2)	NDS
<i>daptomycin</i> SOLR 350mg, 500mg	\$0(2)	NDS
EMVERM CHEW 100mg	\$0(2)	NDS, QL (12 tabs / year)
<i>ertapenem sodium</i> SOLR 1gm	\$0(1)	
<i>gentamicin in saline inj</i> 0.8 mg/ml	\$0(1)	
<i>gentamicin in saline inj</i> 1 mg/ml	\$0(1)	
<i>gentamicin in saline inj</i> 1.2 mg/ml	\$0(1)	
<i>gentamicin in saline inj</i> 1.6 mg/ml	\$0(1)	
<i>gentamicin in saline inj</i> 2 mg/ml	\$0(1)	
<i>gentamicin sulfate</i> SOLN 10mg/ml, 40mg/ml	\$0(1)	
<i>imipenem-cilastatin intravenous for soln</i> <i>250 mg</i>	\$0(1)	
<i>imipenem-cilastatin intravenous for soln</i> <i>500 mg</i>	\$0(1)	
<i>ivermectin</i> TABS 3mg	\$0(1)	
<i>linezolid</i> SOLN 600mg/300ml	\$0(1)	
<i>linezolid</i> SUSR 100mg/5ml	\$0(2)	NDS, QL (1800 mL / 30 days)
<i>linezolid</i> TABS 600mg	\$0(1)	QL (60 tabs / 30 days)
<i>linezolid in sodium chloride iv soln</i> 600 mg/300ml-0.9%	\$0(1)	
<i>meropenem</i> SOLR 1gm, 500mg	\$0(1)	
<i>methenamine hippurate</i> TABS 1gm	\$0(1)	
<i>metronidazole</i> TABS 250mg, 500mg	\$0(1)	
<i>metronidazole in nacl 0.79% iv soln</i> 500 mg/100ml	\$0(1)	
<i>neomycin sulfate</i> TABS 500mg	\$0(1)	
<i>nitazoxanide</i> TABS 500mg	\$0(2)	NDS, QL (6 tabs / 30 days)
<i>nitrofurantoin macrocrystal</i> CAPS 50mg, 100mg	\$0(2)	
<i>nitrofurantoin monohyd macro</i> CAPS 100mg	\$0(2)	
<i>paromomycin sulfate</i> CAPS 250mg	\$0(1)	
<i>pentamidine isethionate inh</i> SOLR 300mg	\$0(1)	B/D
<i>pentamidine isethionate inj</i> SOLR 300mg	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<i>praziquantel</i> TABS 600mg	\$0(1)	
SIVEXTRO SOLR 200mg; TABS 200mg	\$0(2)	NDS
<i>streptomycin sulfate</i> SOLR 1gm	\$0(1)	
SULFADIAZINE TABS 500mg	\$0(2)	
<i>sulfamethoxazole-trimethoprim iv soln</i> <i>400-80 mg/5ml</i>	\$0(1)	
<i>sulfamethoxazole-trimethoprim susp</i> <i>200-40 mg/5ml</i>	\$0(1)	
<i>sulfamethoxazole-trimethoprim tab</i> <i>400-80 mg</i>	\$0(1)	
<i>sulfamethoxazole-trimethoprim tab</i> <i>800-160 mg</i>	\$0(1)	
SYNERCID INJ 500MG	\$0(2)	NDS
<i>tobramycin</i> NEBU 300mg/5ml	\$0(2)	NDS, NM, PA
<i>tobramycin sulfate</i> SOLN 1.2gm/30ml, 10mg/ml, 40mg/ml, 80mg/2ml	\$0(1)	
<i>trimethoprim</i> TABS 100mg	\$0(1)	
<i>vancomycin hcl</i> CAPS 125mg	\$0(1)	QL (80 caps / 180 days)
<i>vancomycin hcl</i> CAPS 250mg	\$0(1)	QL (160 caps / 180 days)
<i>vancomycin hcl</i> SOLR 1gm, 5gm, 10gm, 500mg, 750mg	\$0(1)	
VANCOMYCIN INJ 1 GM	\$0(2)	
VANCOMYCIN INJ 500MG	\$0(2)	
VANCOMYCIN INJ 750MG	\$0(2)	

#### **ANTIFUNGALS - DRUGS TO TREAT FUNGAL INFECTIONS**

ABELCET SUSP 5mg/ml	\$0(2)	B/D
AMBISOME SUSR 50mg	\$0(2)	NDS, B/D
<i>amphotericin b</i> SOLR 50mg	\$0(1)	B/D
<i>caspofungin acetate</i> SOLR 50mg, 70mg	\$0(1)	
<i>fluconazole</i> SUSR 10mg/ml, 40mg/ml; TABS 50mg, 100mg, 150mg, 200mg	\$0(1)	
<i>fluconazole in nacl 0.9% inj 200</i> <i>mg/100ml</i>	\$0(1)	
<i>fluconazole in nacl 0.9% inj 400</i> <i>mg/200ml</i>	\$0(1)	
<i>flucytosine</i> CAPS 250mg, 500mg	\$0(2)	NDS, PA
<i>griseofulvin microsize</i> SUSP 125mg/5ml; TABS 500mg	\$0(1)	
<i>griseofulvin ultramicrosize</i> TABS 125mg, 250mg	\$0(1)	
<i>itraconazole</i> CAPS 100mg	\$0(1)	PA
<i>ketoconazole</i> TABS 200mg	\$0(1)	PA
<i>micafungin sodium</i> SOLR 50mg, 100mg	\$0(2)	NDS

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
NOXAFIL SUSP 40mg/ml	\$0(2)	NDS, QL (630 mL / 30 days), PA
<i>nystatin</i> TABS 500000unit	\$0(1)	
posaconazole TBEC 100mg	\$0(2)	NDS, QL (93 tabs / 30 days), PA
<i>terbinafine hcl</i> TABS 250mg	\$0(1)	QL (90 tabs / year)
voriconazole SOLR 200mg; SUSR 40mg/ml	\$0(2)	NDS, PA
voriconazole TABS 50mg	\$0(1)	QL (480 tabs / 30 days), PA
voriconazole TABS 200mg	\$0(1)	QL (120 tabs / 30 days), PA

### **ANTIMALARIALS - DRUGS TO TREAT MALARIA**

<i>atovaquone-proguanil hcl</i> tab 62.5-25 mg	\$0(1)	
<i>atovaquone-proguanil hcl</i> tab 250-100 mg	\$0(1)	
<i>chloroquine phosphate</i> TABS 250mg, 500mg	\$0(1)	
COARTEM TAB 20-120MG	\$0(2)	
<i>mefloquine hcl</i> TABS 250mg	\$0(1)	
<i>primaquine phosphate</i> TABS 26.3mg	\$0(1)	
PRIMAQUINE PHOSPHATE TABS 26.3mg	\$0(2)	
<i>quinine sulfate</i> CAPS 324mg	\$0(1)	PA

### **ANTIRETROVIRAL AGENTS - DRUGS TO SUPPRESS HIV/AIDS**

#### **INFECTION**

<i>abacavir sulfate</i> SOLN 20mg/ml; TABS 300mg	\$0(1)	
APTIVUS CAPS 250mg	\$0(2)	NDS
<i>atazanavir sulfate</i> CAPS 150mg, 200mg, 300mg	\$0(1)	
EDURANT TABS 25mg	\$0(2)	NDS
<i>efavirenz</i> CAPS 50mg, 200mg; TABS 600mg	\$0(1)	
<i>emtricitabine</i> CAPS 200mg	\$0(1)	
EMTRIVA SOLN 10mg/ml	\$0(2)	
<i>etravirine</i> TABS 100mg, 200mg	\$0(2)	NDS
<i>fosamprenavir calcium</i> TABS 700mg	\$0(2)	NDS
FUZEON SOLR 90mg	\$0(2)	NDS
INTELENCE TABS 25mg	\$0(2)	
INVIRASE TABS 500mg	\$0(2)	NDS
ISENTRESS CHEW 25mg; PACK 100mg	\$0(2)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)</b>
ISENTRESS CHEW 100mg; TABS 400mg	\$0(2)	NDS
ISENTRESS HD TABS 600mg	\$0(2)	NDS
<i>lamivudine</i> SOLN 10mg/ml; TABS 150mg, 300mg	\$0(1)	
LEXIVA SUSP 50mg/ml	\$0(2)	
<i>nevirapine</i> SUSP 50mg/5ml; TABS 200mg; TB24 100mg, 400mg	\$0(1)	
NORVIR PACK 100mg; SOLN 80mg/ml	\$0(2)	
PIFELTRO TABS 100mg	\$0(2)	NDS
PREZISTA SUSP 100mg/ml	\$0(2)	NDS, QL (400 mL / 30 days)
PREZISTA TABS 75mg	\$0(2)	QL (480 tabs / 30 days)
PREZISTA TABS 150mg	\$0(2)	NDS, QL (240 tabs / 30 days)
PREZISTA TABS 600mg	\$0(2)	NDS, QL (60 tabs / 30 days)
PREZISTA TABS 800mg	\$0(2)	NDS, QL (30 tabs / 30 days)
REYATAZ PACK 50mg	\$0(2)	NDS
<i>ritonavir</i> TABS 100mg	\$0(1)	
RUKOBIA TB12 600mg	\$0(2)	NDS
SELZENTRY SOLN 20mg/ml; TABS 75mg, 150mg, 300mg	\$0(2)	NDS
SELZENTRY TABS 25mg	\$0(2)	
<i>tenofovir disoproxil fumarate</i> TABS 300mg	\$0(1)	
TIVICAY TABS 10mg	\$0(2)	
TIVICAY TABS 25mg, 50mg	\$0(2)	NDS
TIVICAY PD TBSO 5mg	\$0(2)	
TROGARZO SOLN 200mg/1.33ml	\$0(2)	NDS, LA
TYBOST TABS 150mg	\$0(2)	
VIRACEPT TABS 250mg, 625mg	\$0(2)	NDS
VIREAD POWD 40mg/gm; TABS 150mg, 200mg, 250mg	\$0(2)	NDS
<i>zidovudine</i> CAPS 100mg; SYRP 50mg/5ml; TABS 300mg	\$0(1)	

**ANTIRETROVIRAL COMBINATION AGENTS - DRUGS TO SUPPRESS  
HIV/AIDS INFECTION**

<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	\$0(1)	
<i>abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg</i>	\$0(2)	NDS
BIKTARVY TAB	\$0(2)	NDS

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)</b>
CIMDUO TAB 300-300	\$0(2)	NDS
COMPLERA TAB	\$0(2)	NDS
DELSTRIGO TAB	\$0(2)	NDS
DESCOVY TAB 200/25MG	\$0(2)	NDS
DOVATO TAB 50-300MG	\$0(2)	NDS
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	\$0(2)	NDS
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	\$0(2)	NDS
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	\$0(2)	NDS
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	\$0(2)	NDS, QL (30 tabs / 30 days)
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	\$0(2)	NDS, QL (30 tabs / 30 days)
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	\$0(2)	NDS, QL (30 tabs / 30 days)
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	\$0(2)	NDS, QL (30 tabs / 30 days)
EVOTAZ TAB 300-150	\$0(2)	NDS
GENVOYA TAB	\$0(2)	NDS
JULUCA TAB 50-25MG	\$0(2)	NDS
<i>lamivudine-zidovudine tab 150-300 mg</i>	\$0(1)	
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	\$0(1)	
<i>lopinavir-ritonavir tab 100-25 mg</i>	\$0(1)	
<i>lopinavir-ritonavir tab 200-50 mg</i>	\$0(2)	NDS
ODEFSEY TAB	\$0(2)	NDS
PREZCOBIX TAB 800-150	\$0(2)	NDS
STRIBILD TAB	\$0(2)	NDS
SYMTUZA TAB	\$0(2)	NDS
TEMIXYS TAB 300-300	\$0(2)	NDS
TRIUMEQ TAB	\$0(2)	NDS

#### **ANTITUBERCULAR AGENTS - DRUGS TO TREAT TUBERCULOSIS**

cycloserine CAPS 250mg	\$0(2)	NDS
ethambutol hcl TABS 100mg, 400mg	\$0(1)	
<i>isoniazid SYRP 50mg/5ml; TABS 100mg, 300mg</i>	\$0(1)	
PASER PACK 4gm	\$0(2)	
PRIFTIN TABS 150mg	\$0(2)	
<i>pyrazinamide TABS 500mg</i>	\$0(1)	
<i>rifabutin CAPS 150mg</i>	\$0(1)	
<i>rifampin CAPS 150mg, 300mg; SOLR 600mg</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
SIRTURO TABS 20mg, 100mg	\$0(2)	NDS, LA, PA
TRECATOR TABS 250mg	\$0(2)	
<b><i>ANTIVIRALS - DRUGS TO TREAT VIRAL INFECTIONS</i></b>		
acyclovir CAPS 200mg; SUSP 200mg/5ml; TABS 400mg, 800mg	\$0(1)	
acyclovir sodium SOLN 50mg/ml	\$0(1)	B/D
adefovir dipivoxil TABS 10mg	\$0(2)	NDS
BARACLODE SOLN .05mg/ml	\$0(2)	NDS
entecavir TABS .5mg, 1mg	\$0(1)	
EPCLUSA TAB 200-50MG	\$0(2)	NDS, NM, PA
EPCLUSA TAB 400-100	\$0(2)	NDS, NM, PA
EPIVIR HBV SOLN 5mg/ml	\$0(2)	
famciclovir TABS 125mg, 250mg, 500mg	\$0(1)	
ganciclovir sodium SOLR 500mg	\$0(1)	B/D
HARVONI PAK 33.75-150MG	\$0(2)	NDS, NM, PA
HARVONI PAK 45-200MG	\$0(2)	NDS, NM, PA
HARVONI TAB 45-200MG	\$0(2)	NDS, NM, PA
HARVONI TAB 90-400MG	\$0(2)	NDS, NM, PA
lamivudine (hbv) TABS 100mg	\$0(1)	
MAVYRET TAB 100-40MG	\$0(2)	NDS, NM, PA
oseltamivir phosphate CAPS 30mg	\$0(1)	QL (168 caps / year)
oseltamivir phosphate CAPS 45mg, 75mg	\$0(1)	QL (84 caps / year)
oseltamivir phosphate SUSR 6mg/ml	\$0(1)	QL (1080 mL / year)
PEGASYS SOLN 180mcg/ml; SOSY 180mcg/0.5ml	\$0(2)	NDS, NM, PA
PREVYMIS TABS 240mg, 480mg	\$0(2)	NDS, QL (28 tabs / 28 days), PA
RELENZA DISKHALER AEPB 5mg/blister	\$0(2)	QL (6 inhalers / year)
ribavirin (hepatitis c) CAPS 200mg; TABS 200mg	\$0(1)	NM
rimantadine hydrochloride TABS 100mg	\$0(1)	
valacyclovir hcl TABS 1gm, 500mg	\$0(1)	
valganciclovir hcl SOLR 50mg/ml	\$0(2)	NDS
valganciclovir hcl TABS 450mg	\$0(1)	
VEMLIDY TABS 25mg	\$0(2)	NDS, PA
VOSEVI TAB	\$0(2)	NDS, NM, PA
XOFLUZA TBPK 40mg	\$0(2)	QL (2 tabs / 180 days)
XOFLUZA TBPK 80mg	\$0(2)	QL (1 tab / 180 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
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### **CEPHALOSPORINS - DRUGS TO TREAT INFECTIONS**

<i>cefaclor</i> CAPS 250mg, 500mg; SUSR 125mg/5ml, 250mg/5ml, 375mg/5ml	\$0(1)
<i>CEFACLOR ER</i> TB12 500mg	\$0(2)
<i>cefadroxil</i> CAPS 500mg; SUSR 250mg/5ml, 500mg/5ml	\$0(1)
<i>CEFAZOLIN INJ</i> 1GM/50ML	\$0(2)
<i>cefazin sodium</i> SOLR 1gm, 10gm, 500mg	\$0(1)
<i>CEFAZOLIN SOLN</i> 2GM/100ML-4%	\$0(2)
<i>cefdinir</i> CAPS 300mg; SUSR 125mg/5ml, 250mg/5ml	\$0(1)
<i>cefepime hcl</i> SOLR 1gm, 2gm	\$0(1)
<i>cefixime</i> SUSR 100mg/5ml, 200mg/5ml	\$0(1)
<i>cefoxitin sodium</i> SOLR 1gm, 2gm, 10gm	\$0(1)
<i>cefpodoxime proxetil</i> SUSR 50mg/5ml, 100mg/5ml; TABS 100mg, 200mg	\$0(1)
<i>cefprozil</i> SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg	\$0(1)
<i>ceftazidime</i> SOLR 1gm, 2gm, 6gm	\$0(1)
<i>CEFTAZIDIME/ SOL D5W</i> 1GM	\$0(2)
<i>CEFTAZIDIME/ SOL D5W</i> 2GM	\$0(2)
<i>ceftriaxone sodium</i> SOLR 1gm, 2gm, 10gm, 250mg, 500mg	\$0(1)
<i>cefuroxime axetil</i> TABS 250mg, 500mg	\$0(1)
<i>cefuroxime sodium</i> SOLR 1.5gm, 7.5gm, 750mg	\$0(1)
<i>cephalexin</i> CAPS 250mg, 500mg; SUSR 125mg/5ml, 250mg/5ml	\$0(1)
<i>tazicef</i> SOLR 1gm, 2gm, 6gm	\$0(1)
<i>TEFLARO</i> SOLR 400mg, 600mg	\$0(2) NDS

### **ERYTHROMYCINS/MACROLIDES - DRUGS TO TREAT INFECTIONS**

<i>azithromycin</i> PACK 1gm; SOLR 500mg; SUSR 100mg/5ml, 200mg/5ml; TABS 250mg, 500mg, 600mg	\$0(1)
<i>clarithromycin</i> SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg; TB24 500mg	\$0(1)
<i>DIFICID</i> SUSR 40mg/ml; TABS 200mg	\$0(2) NDS
<i>ery-tab</i> TBEC 250mg, 333mg, 500mg	\$0(1)
<i>ERYTHROCIN LACTOBIONATE</i> SOLR 500mg	\$0(2) NDS

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<i>erythrocin stearate</i> TABS 250mg	\$0(1)	
<i>erythromycin base</i> CPEP 250mg; TABS 250mg, 500mg; TBEC 250mg, 333mg, 500mg	\$0(1)	
<i>erythromycin ethylsuccinate</i> TABS 400mg	\$0(1)	
<b>FLUOROQUINOLONES - DRUGS TO TREAT INFECTIONS</b>		
<i>CIPRO</i> SUSR 500mg/5ml	\$0(2)	
<i>ciprofloxacin 200 mg/100ml in d5w</i>	\$0(1)	
<i>ciprofloxacin 400 mg/200ml in d5w</i>	\$0(1)	
<i>ciprofloxacin hcl</i> TABS 100mg, 250mg, 500mg, 750mg	\$0(1)	
<i>levofloxacin</i> SOLN 25mg/ml; TABS 250mg, 500mg, 750mg	\$0(1)	
<i>levofloxacin in d5w iv soln 250 mg/50ml</i>	\$0(1)	
<i>levofloxacin in d5w iv soln 500 mg/100ml</i>	\$0(1)	
<i>levofloxacin in d5w iv soln 750 mg/150ml</i>	\$0(1)	
<i>moxifloxacin hcl</i> TABS 400mg	\$0(1)	
<b>PENICILLINS - DRUGS TO TREAT INFECTIONS</b>		
<i>amoxicillin</i> CAPS 250mg, 500mg; CHEW 125mg, 250mg; SUSR 125mg/5ml, 200mg/5ml, 250mg/5ml, 400mg/5ml; TABS 500mg, 875mg	\$0(1)	
<i>amoxicillin &amp; k clavulanate chew tab 200-28.5 mg</i>	\$0(1)	
<i>amoxicillin &amp; k clavulanate chew tab 400-57 mg</i>	\$0(1)	
<i>amoxicillin &amp; k clavulanate for susp 200-28.5 mg/5ml</i>	\$0(1)	
<i>amoxicillin &amp; k clavulanate for susp 250-62.5 mg/5ml</i>	\$0(1)	
<i>amoxicillin &amp; k clavulanate for susp 400-57 mg/5ml</i>	\$0(1)	
<i>amoxicillin &amp; k clavulanate for susp 600-42.9 mg/5ml</i>	\$0(1)	
<i>amoxicillin &amp; k clavulanate tab 250-125 mg</i>	\$0(1)	
<i>amoxicillin &amp; k clavulanate tab 500-125 mg</i>	\$0(1)	
<i>amoxicillin &amp; k clavulanate tab 875-125 mg</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<i>amoxicillin &amp; k clavulanate tab er 12hr 1000-62.5 mg</i>	\$0(1)	
<i>ampicillin CAPS 500mg</i>	\$0(1)	
<i>ampicillin &amp; sulbactam sodium for inj 1.5 (1-0.5) gm</i>	\$0(1)	
<i>ampicillin &amp; sulbactam sodium for inj 3 (2-1) gm</i>	\$0(1)	
<i>ampicillin &amp; sulbactam sodium for iv soln 1.5 (1-0.5) gm</i>	\$0(1)	
<i>ampicillin &amp; sulbactam sodium for iv soln 3 (2-1) gm</i>	\$0(1)	
<i>ampicillin &amp; sulbactam sodium for iv soln 15 (10-5) gm</i>	\$0(1)	
<i>ampicillin sodium SOLR 1gm, 2gm, 10gm, 125mg, 250mg, 500mg</i>	\$0(1)	
<i>BICILLIN L-A SUSP 600000unit/ml, 1200000unit/2ml, 2400000unit/4ml</i>	\$0(2)	
<i>dicloxacillin sodium CAPS 250mg, 500mg</i>	\$0(1)	
<i>nafcillin sodium SOLR 1gm, 2gm</i>	\$0(1)	
<i>nafcillin sodium SOLR 10gm</i>	\$0(2)	NDS
<i>oxacillin sodium SOLR 1gm, 2gm, 10gm</i>	\$0(1)	
<i>PEN GK/DEXTR INJ 40000/ML</i>	\$0(2)	
<i>PEN GK/DEXTR INJ 60000/ML</i>	\$0(2)	
<i>penicillin g potassium SOLR 5000000unit, 20000000unit</i>	\$0(1)	
<i>PENICILLIN G PROCAINE SUSP 600000unit/ml</i>	\$0(2)	
<i>penicillin g sodium SOLR 5000000unit</i>	\$0(1)	
<i>penicillin v potassium SOLR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg</i>	\$0(1)	
<i>pfizerpen SOLR 5000000unit, 20000000unit</i>	\$0(1)	
<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	\$0(1)	
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	\$0(1)	
<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	\$0(1)	
<i>piperacillin sod-tazobactam sod for inj 13.5 gm (12-1.5 gm)</i>	\$0(1)	
<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
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#### **TETRACYCLINES - DRUGS TO TREAT INFECTIONS**

<i>doxy 100</i> SOLR 100mg	\$0(1)	
<i>doxycycline (monohydrate)</i> CAPS 50mg, 100mg; TABS 50mg, 75mg, 100mg	\$0(1)	
<i>doxycycline hydrate</i> CAPS 50mg, 100mg; SOLR 100mg; TABS 20mg, 100mg	\$0(1)	
<i>minocycline hcl</i> CAPS 50mg, 75mg, 100mg	\$0(1)	
<i>monodoxine nl</i> CAPS 100mg	\$0(1)	
<i>tetracycline hcl</i> CAPS 250mg, 500mg	\$0(1)	PA
<i>tigecycline</i> SOLR 50mg	\$0(1)	
<i>TIGECYCLINE</i> SOLR 50mg	\$0(2)	NDS

#### **ANTINEOPLASTIC AGENTS - DRUGS TO TREAT CANCER**

##### **ALKYLATING AGENTS**

<i>BENDEKA</i> SOLN 100mg/4ml	\$0(2)	NDS, B/D
<i>carboplatin</i> SOLN 50mg/5ml, 150mg/15ml, 450mg/45ml, 600mg/60ml	\$0(1)	B/D
<i>cisplatin</i> SOLN 50mg/50ml, 100mg/100ml, 200mg/200ml	\$0(1)	B/D
<i>cyclophosphamide</i> CAPS 25mg, 50mg	\$0(1)	B/D, NM
<i>CYCLOPHOSPHAMIDE</i> SOLN 1gm/5ml, 500mg/2.5ml	\$0(2)	NDS, B/D
<i>cyclophosphamide</i> SOLR 1gm, 2gm, 500mg	\$0(2)	NDS, B/D
<i>CYCLOPHOSPHAMIDE</i> TABS 25mg, 50mg	\$0(2)	B/D
<i>LEUKERAN</i> TABS 2mg	\$0(2)	
<i>oxaliplatin</i> SOLN 50mg/10ml, 100mg/20ml, 200mg/40ml	\$0(1)	B/D
<i>oxaliplatin</i> SOLR 50mg, 100mg	\$0(2)	NDS, B/D
<i>paraplatin</i> SOLN 1000mg/100ml	\$0(1)	B/D

##### **ANTIBIOTICS**

<i>adriamycin</i> SOLN 2mg/ml	\$0(1)	B/D
<i>doxorubicin hcl</i> SOLN 2mg/ml	\$0(1)	B/D
<i>doxorubicin hcl liposomal</i> INJ 2mg/ml	\$0(2)	NDS, B/D
<i>epirubicin hcl</i> SOLN 50mg/25ml, 200mg/100ml	\$0(1)	B/D

##### **ANTIMETABOLITES**

<i>ALIMTA</i> SOLR 100mg, 500mg	\$0(2)	NDS, B/D
<i>azacitidine</i> SUSR 100mg	\$0(2)	NDS, B/D
<i>cytarabine</i> SOLN 20mg/ml	\$0(1)	B/D

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
<i>fluorouracil</i> SOLN 1gm/20ml, 2.5gm/50ml, 5gm/100ml, 500mg/10ml	\$0(1)	B/D
<i>gemcitabine hcl</i> SOLN 1gm/26.3ml, 2gm/52.6ml, 200mg/5.26ml; SOLR 1gm, 2gm, 200mg	\$0(1)	B/D
INQOVI TAB 35-100MG	\$0(2)	NDS, NM, LA, PA
LONSURF TAB 15-6.14	\$0(2)	NDS, NM, PA
LONSURF TAB 20-8.19	\$0(2)	NDS, NM, PA
<i>mercaptopurine</i> TABS 50mg	\$0(1)	
<i>methotrexate sodium</i> SOLN 1gm/40ml, 50mg/2ml, 250mg/10ml; SOLR 1gm	\$0(1)	B/D
ONUREG TABS 200mg, 300mg	\$0(2)	NDS, NM, LA, PA
PURIXAN SUSP 2000mg/100ml	\$0(2)	NDS
TABLOID TABS 40mg	\$0(2)	
<b>HORMONAL ANTINEOPLASTIC AGENTS</b>		
<i>abiraterone acetate</i> TABS 250mg, 500mg	\$0(2)	NDS, NM, PA
<i>anastrozole</i> TABS 1mg	\$0(1)	
<i>bicalutamide</i> TABS 50mg	\$0(1)	
EMCYT CAPS 140mg	\$0(2)	NDS
ERLEADA TABS 60mg	\$0(2)	NDS, NM, LA, PA
<i>exemestane</i> TABS 25mg	\$0(1)	
<i>flutamide</i> CAPS 125mg	\$0(1)	
<i>fulvestrant</i> SOLN 250mg/5ml	\$0(2)	NDS, B/D
<i>letrozole</i> TABS 2.5mg	\$0(1)	
<i>leuprolide acetate</i> KIT 1mg/0.2ml	\$0(1)	PA
LUPRON DEPOT (1-MONTH) KIT 3.75mg	\$0(2)	NDS, PA
LUPRON DEPOT (3-MONTH) KIT 11.25mg	\$0(2)	NDS, PA
LYSODREN TABS 500mg	\$0(2)	NDS
<i>megestrol acetate</i> TABS 20mg, 40mg	\$0(2)	
<i>nilutamide</i> TABS 150mg	\$0(2)	NDS
NUBEQA TABS 300mg	\$0(2)	NDS, NM, LA, PA
ORGOVYX TABS 120mg	\$0(2)	NDS, NM, LA, PA
SOLTAMOX SOLN 10mg/5ml	\$0(2)	NDS
<i>tamoxifen citrate</i> TABS 10mg, 20mg	\$0(1)	
<i>toremifene citrate</i> TABS 60mg	\$0(2)	NDS
TRELSTAR MIXJECT SUSR 3.75mg, 11.25mg	\$0(2)	NDS, PA
XTANDI CAPS 40mg	\$0(2)	NDS, NM, LA, PA
XTANDI TABS 40mg, 80mg	\$0(2)	NDS, LA, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<b>IMMUNOMODULATORS</b>		
POMALYST CAPS 1mg, 2mg	\$0(2)	NDS, QL (21 caps / 21 days), NM, LA, PA
POMALYST CAPS 3mg, 4mg	\$0(2)	NDS, QL (21 caps / 28 days), NM, LA, PA
REVLIMID CAPS 2.5mg, 5mg, 10mg, 15mg	\$0(2)	NDS, QL (28 caps / 28 days), NM, LA, PA
REVLIMID CAPS 20mg, 25mg	\$0(2)	NDS, QL (21 caps / 28 days), NM, LA, PA
THALOMID CAPS 50mg, 100mg	\$0(2)	NDS, QL (28 caps / 28 days), NM, PA
THALOMID CAPS 150mg, 200mg	\$0(2)	NDS, QL (56 caps / 28 days), NM, PA
<b>MISCELLANEOUS</b>		
<i>bexarotene</i> CAPS 75mg	\$0(2)	NDS, NM, PA
<i>hydroxyurea</i> CAPS 500mg	\$0(1)	
<i>irinotecan hcl</i> SOLN 40mg/2ml, 100mg/5ml, 300mg/15ml, 500mg/25ml	\$0(1)	B/D
KISQALI 200 PAK FEMARA	\$0(2)	NDS, QL (49 tabs / 28 days), NM, PA
KISQALI 400 PAK FEMARA	\$0(2)	NDS, QL (70 tabs / 28 days), NM, PA
KISQALI 600 PAK FEMARA	\$0(2)	NDS, QL (91 tabs / 28 days), NM, PA
MATULANE CAPS 50mg	\$0(2)	NDS, NM, LA
SYNRIBO SOLR 3.5mg	\$0(2)	NDS, PA
<i>tretinoin (chemotherapy)</i> CAPS 10mg	\$0(2)	NDS
<b>MITOTIC INHIBITORS</b>		
ABRAXANE INJ 100MG	\$0(2)	NDS, B/D
<i>docetaxel</i> CONC 20mg/ml	\$0(1)	B/D
<i>docetaxel</i> CONC 80mg/4ml, 160mg/8ml; SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	\$0(2)	NDS, B/D
DOCETAXEL CONC 80mg/4ml, 160mg/8ml; SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	\$0(2)	NDS, B/D
<i>etoposide</i> SOLN 100mg/5ml, 500mg/25ml	\$0(1)	B/D
<i>paclitaxel</i> CONC 30mg/5ml, 100mg/16.7ml, 150mg/25ml, 300mg/50ml	\$0(1)	B/D
<i>toposar</i> SOLN 1gm/50ml, 100mg/5ml	\$0(1)	B/D
<i>vincristine sulfate</i> SOLN 1mg/ml	\$0(1)	B/D

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
vinorelbine tartrate SOLN 10mg/ml, 50mg/5ml	\$0(1)	B/D
<b>MOLECULAR TARGET AGENTS</b>		
AFINITOR TABS 10mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
AFINITOR DISPERZ TBSO 2mg	\$0(2)	NDS, QL (150 tabs / 30 days), NM, PA
AFINITOR DISPERZ TBSO 3mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, PA
AFINITOR DISPERZ TBSO 5mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
ALECensa CAPS 150mg	\$0(2)	NDS, NM, LA, PA
ALUNBRIG TABS 30mg, 90mg, 180mg	\$0(2)	NDS, NM, LA, PA
ALUNBRIG PAK	\$0(2)	NDS, NM, LA, PA
AVASTIN SOLN 100mg/4ml, 400mg/16ml	\$0(2)	NDS, LA, PA
AYVAKIT TABS 25mg, 50mg	\$0(2)	NDS, QL (30 tabs / 30 days), LA, PA
AYVAKIT TABS 100mg, 200mg, 300mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, LA, PA
BALVERSA TABS 3mg, 4mg, 5mg	\$0(2)	NDS, NM, LA, PA
BORTEZOMIB SOLR 3.5mg	\$0(2)	NDS, PA
BOSULIF TABS 100mg, 400mg, 500mg	\$0(2)	NDS, NM, PA
BRAFTOVI CAPS 75mg	\$0(2)	NDS, LA, PA
BRUKINSA CAPS 80mg	\$0(2)	NDS, NM, LA, PA
CABOMETYX TABS 20mg, 40mg, 60mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, LA, PA
CALQUENCE CAPS 100mg	\$0(2)	NDS, QL (60 caps / 30 days), NM, LA, PA
CAPRELSA TABS 100mg, 300mg	\$0(2)	NDS, NM, LA, PA
COMETRIQ (60MG DOSE) KIT 20mg	\$0(2)	NDS, NM, LA, PA
COMETRIQ KIT 100MG	\$0(2)	NDS, NM, LA, PA
COMETRIQ KIT 140MG	\$0(2)	NDS, NM, LA, PA
COPIKTRA CAPS 15mg, 25mg	\$0(2)	NDS, NM, LA, PA
COTELLIC TABS 20mg	\$0(2)	NDS, NM, LA, PA
DAURISMO TABS 25mg, 100mg	\$0(2)	NDS, NM, LA, PA
ERIVEDGE CAPS 150mg	\$0(2)	NDS, NM, LA, PA
erlotinib hcl TABS 25mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, PA
erlotinib hcl TABS 100mg, 150mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
everolimus TABS 2.5mg, 5mg, 7.5mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
FARYDAK CAPS 10mg, 15mg, 20mg	\$0(2)	NDS, NM, LA, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
FOTIVDA CAPS .89mg, 1.34mg	\$0(2)	NDS, QL (21 caps / 28 days), NM, LA, PA
GAVRETO CAPS 100mg	\$0(2)	NDS, NM, LA, PA
GILOTRIF TABS 20mg, 30mg, 40mg	\$0(2)	NDS, NM, LA, PA
HERCEP HYLEC SOL 60-10000	\$0(2)	NDS, PA
HERCEPTIN SOLR 150mg	\$0(2)	NDS, PA
HERZUMA SOLR 150mg, 420mg	\$0(2)	NDS, PA
IBRANCE CAPS 75mg, 100mg, 125mg	\$0(2)	NDS, QL (21 caps / 28 days), NM, LA, PA
IBRANCE TABS 75mg, 100mg, 125mg	\$0(2)	NDS, QL (21 tabs / 28 days), NM, LA, PA
ICLUSIG TABS 10mg	\$0(2)	NDS, QL (60 tabs / 30 days), LA, PA
ICLUSIG TABS 15mg, 45mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, LA, PA
ICLUSIG TABS 30mg	\$0(2)	NDS, QL (30 tabs / 30 days), LA, PA
IDHIFA TABS 50mg, 100mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, LA, PA
<i>imatinib mesylate</i> TABS 100mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, PA
<i>imatinib mesylate</i> TABS 400mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
IMBRUVICA CAPS 70mg	\$0(2)	NDS, QL (30 caps / 30 days), NM, LA, PA
IMBRUVICA CAPS 140mg	\$0(2)	NDS, QL (120 caps / 30 days), NM, LA, PA
IMBRUVICA TABS 140mg, 280mg, 420mg, 560mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, LA, PA
INLYTA TABS 1mg	\$0(2)	NDS, QL (180 tabs / 30 days), NM, LA, PA
INLYTA TABS 5mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, LA, PA
INREBIC CAPS 100mg	\$0(2)	NDS, NM, LA, PA
IRESSA TABS 250mg	\$0(2)	NDS, NM, LA, PA
JAKAFI TABS 5mg, 10mg, 15mg, 20mg, 25mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, LA, PA
KADCYLA SOLR 100mg, 160mg	\$0(2)	NDS, B/D
KANJINTI SOLR 150mg, 420mg	\$0(2)	NDS, PA
KEYTRUDA SOLN 100mg/4ml	\$0(2)	NDS, PA
KISQALI 200 DOSE TBPK 200mg	\$0(2)	NDS, QL (21 tabs / 28 days), NM, PA
KISQALI 400 DOSE TBPK 200mg	\$0(2)	NDS, QL (42 tabs / 28 days), NM, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
KISQALI 600 DOSE TBPK 200mg	\$0(2)	NDS, QL (63 tabs / 28 days), NM, PA
<i>lapatinib ditosylate</i> TABS 250mg	\$0(2)	NDS, NM, PA
LENVIMA 4 MG DAILY DOSE CPPK 4mg	\$0(2)	NDS, QL (30 caps / 30 days), NM, LA, PA
LENVIMA 8 MG DAILY DOSE CPPK 4mg	\$0(2)	NDS, QL (60 caps / 30 days), NM, LA, PA
LENVIMA 10 MG DAILY DOSE CPPK 10mg	\$0(2)	NDS, QL (30 caps / 30 days), NM, LA, PA
LENVIMA 12MG DAILY DOSE CPPK 4mg	\$0(2)	NDS, QL (90 caps / 30 days), NM, LA, PA
LENVIMA 20 MG DAILY DOSE CPPK 10mg	\$0(2)	NDS, QL (60 caps / 30 days), NM, LA, PA
LENVIMA CAP 14 MG	\$0(2)	NDS, QL (60 caps / 30 days), NM, LA, PA
LENVIMA CAP 18 MG	\$0(2)	NDS, QL (90 caps / 30 days), NM, LA, PA
LENVIMA CAP 24 MG	\$0(2)	NDS, QL (90 caps / 30 days), NM, LA, PA
LORBRENA TABS 25mg, 100mg	\$0(2)	NDS, NM, LA, PA
LUMAKRAS TABS 120mg	\$0(2)	NDS, NM, LA, PA
LYNPARZA TABS 100mg, 150mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, LA, PA
MEKINIST TABS .5mg, 2mg	\$0(2)	NDS, NM, LA, PA
MEKTOVI TABS 15mg	\$0(2)	NDS, LA, PA
MONJUVI SOLR 200mg	\$0(2)	NDS, LA, PA
MVASI SOLN 100mg/4ml, 400mg/16ml	\$0(2)	NDS, LA, PA
NERLYNX TABS 40mg	\$0(2)	NDS, NM, LA, PA
NEXAVAR TABS 200mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, LA, PA
NINLARO CAPS 2.3mg, 3mg, 4mg	\$0(2)	NDS, QL (3 caps / 28 days), NM, PA
ODOMZO CAPS 200mg	\$0(2)	NDS, NM, LA, PA
OGIVRI SOLR 150mg	\$0(2)	NDS, PA
OGIVRI INJ 420MG	\$0(2)	NDS, PA
ONTRUZANT SOLR 150mg, 420mg	\$0(2)	NDS, PA
PEMAZYRE TABS 4.5mg, 9mg, 13.5mg	\$0(2)	NDS, NM, LA, PA
PHESGO SOL	\$0(2)	NDS, NM, LA, PA
PIQRAY 200MG DAILY DOSE TBPK 200mg	\$0(2)	NDS, NM, PA
PIQRAY 250MG TAB DOSE	\$0(2)	NDS, NM, PA
PIQRAY 300MG DAILY DOSE TBPK 150mg	\$0(2)	NDS, NM, PA
QINLOCK TABS 50mg	\$0(2)	NDS, NM, LA, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
RETEVMO CAPS 40mg, 80mg	\$0(2)	NDS, NM, LA, PA
RIABNI SOLN 100mg/10ml, 500mg/50ml	\$0(2)	NDS, NM, LA, PA
RITUXAN SOLN 100mg/10ml, 500mg/50ml	\$0(2)	NDS, NM, LA, PA
RITUXAN INJ HYCELA	\$0(2)	NDS, NM, LA, PA
ROZLYTREK CAPS 100mg, 200mg	\$0(2)	NDS, NM, LA, PA
RUBRACA TABS 200mg, 250mg, 300mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, LA, PA
RUXIENCE SOLN 100mg/10ml, 500mg/50ml	\$0(2)	NDS, NM, PA
RYDAPT CAPS 25mg	\$0(2)	NDS, NM, PA
SPRYCEL TABS 20mg, 50mg, 70mg, 80mg, 100mg, 140mg	\$0(2)	NDS, NM, PA
STIVARGA TABS 40mg	\$0(2)	NDS, NM, LA, PA
sunitinib malate CAPS 12.5mg, 25mg, 37.5mg, 50mg	\$0(2)	NDS, QL (30 caps / 30 days), NM, PA
TABRECTA TABS 150mg, 200mg	\$0(2)	NDS, NM, PA
TAFINLAR CAPS 50mg, 75mg	\$0(2)	NDS, NM, LA, PA
TAGRISSO TABS 40mg, 80mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, LA, PA
TALZENNA CAPS 1mg	\$0(2)	NDS, QL (30 caps / 30 days), NM, LA, PA
TALZENNA CAPS .25mg	\$0(2)	NDS, QL (90 caps / 30 days), NM, LA, PA
TASIGNA CAPS 50mg, 150mg, 200mg	\$0(2)	NDS, NM, PA
TAZVERIK TABS 200mg	\$0(2)	NDS, NM, LA, PA
TECENTRIQ SOLN 840mg/14ml, 1200mg/20ml	\$0(2)	NDS, LA, PA
TEPMETKO TABS 225mg	\$0(2)	NDS, NM, LA, PA
TIBSOVO TABS 250mg	\$0(2)	NDS, NM, LA, PA
TRAZIMERA SOLR 150mg, 420mg	\$0(2)	NDS, PA
TRUSELTIQ 50 MG DAILY DOSE CPPK 25mg	\$0(2)	NDS, NM, LA, PA
TRUSELTIQ 75 MG DAILY DOSE CPPK 25mg	\$0(2)	NDS, NM, LA, PA
TRUSELTIQ 100 MG DAILY DOSE CPPK 100mg	\$0(2)	NDS, NM, LA, PA
TRUSELTIQ 125 MG DAILY DOSE	\$0(2)	NDS, LA, PA
TRUXIMA SOLN 100mg/10ml, 500mg/50ml	\$0(2)	NDS, NM, PA
TUKYSA TABS 50mg, 150mg	\$0(2)	NDS, NM, LA, PA
TURALIO CAPS 200mg	\$0(2)	NDS, NM, LA, PA
UKONIQ TABS 200mg	\$0(2)	NDS, NM, LA, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
VELCADE SOLR 3.5mg	\$0(2)	NDS, PA
VENCLEXTA TABS 10mg	\$0(2)	QL (112 tabs / 28 days), NM, LA, PA
VENCLEXTA TABS 50mg	\$0(2)	NDS, QL (112 tabs / 28 days), NM, LA, PA
VENCLEXTA TABS 100mg	\$0(2)	NDS, QL (180 tabs / 30 days), NM, LA, PA
VENCLEXTA TAB START PK	\$0(2)	NDS, QL (42 tabs / 28 days), NM, LA, PA
VERZENIO TABS 50mg, 100mg, 150mg, 200mg	\$0(2)	NDS, QL (56 tabs / 28 days), NM, LA, PA
VITRAKVI CAPS 25mg, 100mg; SOLN 20mg/ml	\$0(2)	NDS, NM, LA, PA
VIZIMPRO TABS 15mg, 30mg, 45mg	\$0(2)	NDS, NM, LA, PA
VOTRIENT TABS 200mg	\$0(2)	NDS, NM, LA, PA
XALKORI CAPS 200mg, 250mg	\$0(2)	NDS, NM, LA, PA
XOSPATA TABS 40mg	\$0(2)	NDS, NM, LA, PA
XPOVIO 40 MG ONCE WEEKLY TBPK 20mg	\$0(2)	NDS, NM, LA, PA
XPOVIO 40 MG ONCE WEEKLY TBPK 40mg	\$0(2)	NDS, LA, PA
XPOVIO 40 MG TWICE WEEKLY TBPK 20mg	\$0(2)	NDS, NM, LA, PA
XPOVIO 40 MG TWICE WEEKLY TBPK 40mg	\$0(2)	NDS, LA, PA
XPOVIO 60 MG ONCE WEEKLY TBPK 20mg	\$0(2)	NDS, NM, LA, PA
XPOVIO 60 MG ONCE WEEKLY TBPK 60mg	\$0(2)	NDS, LA, PA
XPOVIO 60 MG TWICE WEEKLY TBPK 20mg	\$0(2)	NDS, NM, LA, PA
XPOVIO 80 MG ONCE WEEKLY TBPK 20mg	\$0(2)	NDS, NM, LA, PA
XPOVIO 80 MG ONCE WEEKLY TBPK 40mg	\$0(2)	NDS, LA, PA
XPOVIO 80 MG TWICE WEEKLY TBPK 20mg	\$0(2)	NDS, NM, LA, PA
XPOVIO 100 MG ONCE WEEKLY TBPK 20mg	\$0(2)	NDS, NM, LA, PA
XPOVIO 100 MG ONCE WEEKLY TBPK 50mg	\$0(2)	NDS, LA, PA
ZEJULA CAPS 100mg	\$0(2)	NDS, QL (90 caps / 30 days), NM, LA, PA
ZELBORAF TABS 240mg	\$0(2)	NDS, NM, LA, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
ZIRABEV SOLN 100mg/4ml, 400mg/16ml	\$0(2)	NDS, PA
ZOLINZA CAPS 100mg	\$0(2)	NDS, NM, PA
ZYDELIG TABS 100mg, 150mg	\$0(2)	NDS, NM, LA, PA
ZYKADIA TABS 150mg	\$0(2)	NDS, NM, LA, PA
<b>PROTECTIVE AGENTS</b>		
leucovorin calcium SOLN 500mg/50ml; SOLR 50mg, 100mg, 200mg, 350mg, 500mg	\$0(1)	B/D
leucovorin calcium TABS 5mg, 10mg, 15mg, 25mg	\$0(1)	
MESNEX TABS 400mg	\$0(2)	NDS
<b>CARDIOVASCULAR - DRUGS TO TREAT HEART AND CIRCULATION CONDITIONS</b>		
<b>ACE INHIBITOR COMBINATIONS - DRUGS TO TREAT HIGH BLOOD PRESSURE</b>		
amlodipine besylate-benazepril hcl cap <u>2.5-10 mg</u>	\$0(1)	QL (30 caps / 30 days)
amlodipine besylate-benazepril hcl cap <u>5-10 mg</u>	\$0(1)	QL (30 caps / 30 days)
amlodipine besylate-benazepril hcl cap <u>5-20 mg</u>	\$0(1)	QL (30 caps / 30 days)
amlodipine besylate-benazepril hcl cap <u>5-40 mg</u>	\$0(1)	QL (30 caps / 30 days)
amlodipine besylate-benazepril hcl cap <u>10-20 mg</u>	\$0(1)	QL (30 caps / 30 days)
amlodipine besylate-benazepril hcl cap <u>10-40 mg</u>	\$0(1)	QL (30 caps / 30 days)
BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 5- <u>6.25MG</u>	\$0(1)	
benazepril & hydrochlorothiazide tab <u>10-12.5 mg</u>	\$0(1)	
benazepril & hydrochlorothiazide tab <u>20-12.5 mg</u>	\$0(1)	
benazepril & hydrochlorothiazide tab <u>20-25 mg</u>	\$0(1)	
enalapril maleate & hydrochlorothiazide tab 5-12.5 mg	\$0(1)	
enalapril maleate & hydrochlorothiazide tab 10-25 mg	\$0(1)	
fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<i>fosinopril sodium &amp; hydrochlorothiazide tab 20-12.5 mg</i>	\$0(1)	
<i>lisinopril &amp; hydrochlorothiazide tab 10-12.5 mg</i>	\$0(1)	
<i>lisinopril &amp; hydrochlorothiazide tab 20-12.5 mg</i>	\$0(1)	
<i>lisinopril &amp; hydrochlorothiazide tab 20-25 mg</i>	\$0(1)	
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	\$0(1)	
<i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i>	\$0(1)	
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	\$0(1)	
<b>ACE INHIBITORS - DRUGS TO TREAT HIGH BLOOD PRESSURE</b>		
<i>benazepril hcl TABS 5mg, 10mg, 20mg, 40mg</i>	\$0(1)	
<i>captopril TABS 12.5mg, 25mg, 50mg, 100mg</i>	\$0(1)	
<i>enalapril maleate TABS 2.5mg, 5mg, 10mg, 20mg</i>	\$0(1)	
<i>fosinopril sodium TABS 10mg, 20mg, 40mg</i>	\$0(1)	
<i>lisinopril TABS 2.5mg, 5mg, 10mg, 20mg, 30mg, 40mg</i>	\$0(1)	
<i>moexipril hcl TABS 7.5mg, 15mg</i>	\$0(1)	
<i>perindopril erbumine TABS 2mg, 4mg, 8mg</i>	\$0(1)	
<i>quinapril hcl TABS 5mg, 10mg, 20mg, 40mg</i>	\$0(1)	
<i>ramipril CAPS 1.25mg, 2.5mg, 5mg, 10mg</i>	\$0(1)	
<i>trandolapril TABS 1mg, 2mg, 4mg</i>	\$0(1)	
<b>ALDOSTERONE RECEPTOR ANTAGONISTS - DRUGS TO TREAT HIGH BLOOD PRESSURE</b>		
<i>eplerenone TABS 25mg, 50mg</i>	\$0(1)	
<i>spironolactone TABS 25mg, 50mg, 100mg</i>	\$0(1)	
<b>ALPHA BLOCKERS - DRUGS TO TREAT HIGH BLOOD PRESSURE</b>		
<i>doxazosin mesylate TABS 1mg, 2mg, 4mg, 8mg</i>	\$0(1)	
<i>prazosin hcl CAPS 1mg, 2mg, 5mg</i>	\$0(1)	
<i>terazosin hcl CAPS 1mg, 2mg, 5mg, 10mg</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<b>ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS - DRUGS TO TREAT HIGH BLOOD PRESSURE</b>		
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 5-160 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i>	\$0(1)	QL (60 tabs / 30 days)
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>ENTRESTO TAB 24-26MG</i>	\$0(2)	
<i>ENTRESTO TAB 49-51MG</i>	\$0(2)	
<i>ENTRESTO TAB 97-103MG</i>	\$0(2)	
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>losartan potassium &amp; hydrochlorothiazide tab 50-12.5 mg</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<u>losartan potassium &amp; hydrochlorothiazide tab 100-12.5 mg</u>	\$0(1)	
<u>losartan potassium &amp; hydrochlorothiazide tab 100-25 mg</u>	\$0(1)	
<u>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>olmesartanamlodipine-hydrochlorothiazide tab 20-5-12.5 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>olmesartanamlodipine-hydrochlorothiazide tab 40-5-12.5 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>olmesartanamlodipine-hydrochlorothiazide tab 40-5-25 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>olmesartanamlodipine-hydrochlorothiazide tab 40-10-12.5 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>olmesartanamlodipine-hydrochlorothiazide tab 40-10-25 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>telmisartanamlodipine tab 40-5 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>telmisartanamlodipine tab 40-10 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>telmisartanamlodipine tab 80-5 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>telmisartanamlodipine tab 80-10 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>telmisartanhydrochlorothiazide tab 40-12.5 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>telmisartanhydrochlorothiazide tab 80-12.5 mg</u>	\$0(1)	QL (60 tabs / 30 days)
<u>telmisartanhydrochlorothiazide tab 80-25 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>valsartanhydrochlorothiazide tab 80-12.5 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>valsartanhydrochlorothiazide tab 160-12.5 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>valsartanhydrochlorothiazide tab 160-25 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>valsartanhydrochlorothiazide tab 320-12.5 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>valsartanhydrochlorothiazide tab 320-25 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<b>ANGIOTENSIN II RECEPTOR ANTAGONISTS - DRUGS TO TREAT HIGH BLOOD PRESSURE</b>		
<u>candesartan cilexetil TABS 4mg, 8mg, 16mg</u>	\$0(1)	QL (60 tabs / 30 days)
<u>candesartan cilexetil TABS 32mg</u>	\$0(1)	QL (30 tabs / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<i>irbesartan</i> TABS 75mg, 150mg, 300mg	\$0(1)	QL (30 tabs / 30 days)
<i>losartan potassium</i> TABS 25mg, 50mg, 100mg	\$0(1)	
<i>olmesartan medoxomil</i> TABS 5mg	\$0(1)	QL (60 tabs / 30 days)
<i>olmesartan medoxomil</i> TABS 20mg, 40mg	\$0(1)	QL (30 tabs / 30 days)
<i>telmisartan</i> TABS 20mg, 40mg, 80mg	\$0(1)	QL (30 tabs / 30 days)
<i>valsartan</i> TABS 40mg, 80mg, 160mg	\$0(1)	QL (60 tabs / 30 days)
<i>valsartan</i> TABS 320mg	\$0(1)	QL (30 tabs / 30 days)

#### **ANTIARRHYTHMICS - DRUGS TO CONTROL HEART RHYTHM**

<i>amiodarone hcl</i> SOLN 50mg/ml, 900mg/18ml; TABS 100mg, 200mg, 400mg	\$0(1)
<i>disopyramide phosphate</i> CAPS 100mg, 150mg	\$0(2)
<i>dofetilide</i> CAPS 125mcg, 250mcg, 500mcg	\$0(1)
<i>flecainide acetate</i> TABS 50mg, 100mg, 150mg	\$0(1)
MULTAQ TABS 400mg	\$0(2)
NORPACE CR CP12 100mg, 150mg	\$0(2)
<i>pacerone</i> TABS 100mg, 200mg, 400mg	\$0(1)
<i>propafenone hcl</i> CP12 225mg, 325mg, 425mg; TABS 150mg, 225mg, 300mg	\$0(1)
<i>quinidine sulfate</i> TABS 200mg, 300mg	\$0(1)
<i>sorine</i> TABS 80mg, 120mg, 160mg, 240mg	\$0(1)
<i>sotalol hcl</i> TABS 80mg, 120mg, 160mg, 240mg	\$0(1)
<i>sotalol hcl (afib/afl)</i> TABS 80mg, 120mg, 160mg	\$0(1)

#### **ANTILIPEMICS, FIBRATES**

<i>fenofibrate</i> TABS 48mg, 54mg, 145mg, 160mg	\$0(1)
<i>fenofibrate micronized</i> CAPS 67mg, 134mg, 200mg	\$0(1)
<i>gemfibrozil</i> TABS 600mg	\$0(1)

#### **ANTILIPEMICS, HMG-CoA REDUCTASE INHIBITORS - DRUGS TO TREAT HIGH CHOLESTEROL**

<i>atorvastatin calcium</i> TABS 10mg, 20mg, 40mg, 80mg	\$0(1)	QL (30 tabs / 30 days)
<i>lovastatin</i> TABS 10mg, 20mg, 40mg	\$0(1)	QL (60 tabs / 30 days)
<i>pravastatin sodium</i> TABS 10mg, 20mg, 40mg, 80mg	\$0(1)	QL (30 tabs / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
<i>rosuvastatin calcium TABS 5mg, 10mg, 20mg, 40mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>simvastatin TABS 5mg, 10mg, 20mg, 40mg, 80mg</i>	\$0(1)	QL (30 tabs / 30 days)
<b>ANTI-LIPEMICS, MISCELLANEOUS - DRUGS TO TREAT HIGH CHOLESTEROL</b>		
<i>cholestyramine PACK 4gm; POWD 4gm/dose</i>	\$0(1)	
<i>cholestyramine light PACK 4gm; POWD 4gm/dose</i>	\$0(1)	
<i>colesevelam hcl PACK 3.75gm; TABS 625mg</i>	\$0(1)	
<i>colestipol hcl GRAN 5gm; PACK 5gm; TABS 1gm</i>	\$0(1)	
<i>ezetimibe TABS 10mg</i>	\$0(1)	
<i>ezetimibe-simvastatin tab 10-10 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>ezetimibe-simvastatin tab 10-20 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>ezetimibe-simvastatin tab 10-40 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>ezetimibe-simvastatin tab 10-80 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>niacin (antihyperlipidemic) TBCR 500mg, 750mg, 1000mg</i>	\$0(1)	QL (60 tabs / 30 days)
<i>PRALUENT SOAJ 75mg/ml, 150mg/ml</i>	\$0(2)	PA
<i>prevalite PACK 4gm; POWD 4gm/dose</i>	\$0(1)	
<i>VASCEPA CAPS .5gm, 1gm</i>	\$0(2)	
<b>BETA-BLOCKER/DIURETIC COMBINATIONS - DRUGS TO TREAT HIGH BLOOD PRESSURE AND HEART CONDITIONS</b>		
<i>atenolol &amp; chlorthalidone tab 50-25 mg</i>	\$0(1)	
<i>atenolol &amp; chlorthalidone tab 100-25 mg</i>	\$0(1)	
<i>bisoprolol &amp; hydrochlorothiazide tab 2.5-6.25 mg</i>	\$0(1)	
<i>bisoprolol &amp; hydrochlorothiazide tab 5-6.25 mg</i>	\$0(1)	
<i>bisoprolol &amp; hydrochlorothiazide tab 10-6.25 mg</i>	\$0(1)	
<i>metoprolol &amp; hydrochlorothiazide tab 50-25 mg</i>	\$0(1)	
<i>metoprolol &amp; hydrochlorothiazide tab 100-25 mg</i>	\$0(1)	
<i>metoprolol &amp; hydrochlorothiazide tab 100-50 mg</i>	\$0(1)	
<b>BETA-BLOCKERS - DRUGS TO TREAT HIGH BLOOD PRESSURE AND HEART CONDITIONS</b>		
<i>acebutolol hcl CAPS 200mg, 400mg</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<i>atenolol</i> TABS 25mg, 50mg, 100mg	\$0(1)	
<i>betaxolol hcl</i> TABS 10mg, 20mg	\$0(1)	
<i>bisoprolol fumarate</i> TABS 5mg, 10mg	\$0(1)	
<i>BYSTOLIC</i> TABS 2.5mg, 5mg, 10mg	\$0(2)	QL (30 tabs / 30 days)
<i>BYSTOLIC</i> TABS 20mg	\$0(2)	QL (60 tabs / 30 days)
<i>carvedilol</i> TABS 3.125mg, 6.25mg, 12.5mg, 25mg	\$0(1)	
<i>labetalol hcl</i> TABS 100mg, 200mg, 300mg	\$0(1)	
<i>metoprolol succinate</i> TB24 25mg, 50mg, 100mg, 200mg	\$0(1)	
<i>metoprolol tartrate</i> SOLN 5mg/5ml; TABS 25mg, 50mg, 100mg	\$0(1)	
<i>nadolol</i> TABS 20mg, 40mg, 80mg	\$0(1)	
<i>pindolol</i> TABS 5mg, 10mg	\$0(1)	
<i>propranolol hcl</i> CP24 60mg, 80mg, 120mg, 160mg; SOLN 20mg/5ml, 40mg/5ml; TABS 10mg, 20mg, 40mg, 60mg, 80mg	\$0(1)	
<i>timolol maleate</i> TABS 5mg, 10mg, 20mg	\$0(1)	

**CALCIUM CHANNEL BLOCKERS - DRUGS TO TREAT HIGH BLOOD  
PRESSURE AND HEART CONDITIONS**

<i>amlodipine besylate</i> TABS 2.5mg, 5mg, 10mg	\$0(1)	
<i>cartia xt</i> CP24 120mg, 180mg, 240mg, 300mg	\$0(1)	
<i>dilt-xr</i> CP24 120mg, 180mg, 240mg	\$0(1)	
<i>diltiazem hcl</i> CP12 60mg, 90mg, 120mg; SOLN 25mg/5ml, 50mg/10ml, 125mg/25ml; TABS 30mg, 60mg, 90mg, 120mg	\$0(1)	
<i>diltiazem hcl coated beads</i> CP24 120mg, 180mg, 240mg, 300mg, 360mg	\$0(1)	
<i>diltiazem hcl extended release beads</i> CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	\$0(1)	
<i>felodipine</i> TB24 2.5mg, 5mg, 10mg	\$0(1)	
<i>isradipine</i> CAPS 2.5mg, 5mg	\$0(1)	
<i>nicardipine hcl</i> CAPS 20mg, 30mg	\$0(1)	
<i>nifedipine</i> TB24 30mg, 60mg, 90mg	\$0(1)	
<i>nimodipine</i> CAPS 30mg	\$0(1)	
<i>NYMALIZE</i> SOLN 6mg/ml	\$0(2)	NDS

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<u>taztia xt</u> CP24 120mg, 180mg, 240mg, 300mg, 360mg	\$0(1)	
<u>tiadylt er</u> CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	\$0(1)	

### ***DIURETICS - DRUGS TO TREAT HEART CONDITIONS***

<u>acetazolamide</u> CP12 500mg; TABS 125mg, 250mg	\$0(1)
<u>amiloride &amp; hydrochlorothiazide tab</u> 5- 50 mg	\$0(1)
<u>amiloride hcl</u> TABS 5mg	\$0(1)
<u>bumetanide</u> SOLN .25mg/ml; TABS .5mg, 1mg, 2mg	\$0(1)
<u>chlorthalidone</u> TABS 25mg, 50mg	\$0(1)
<u>furosemide</u> SOLN 8mg/ml, 10mg/ml; TABS 20mg, 40mg, 80mg	\$0(1)
<u>furosemide inj</u> SOLN 10mg/ml	\$0(1)
<u>hydrochlorothiazide</u> CAPS 12.5mg; TABS 12.5mg, 25mg, 50mg	\$0(1)
<u>indapamide</u> TABS 1.25mg, 2.5mg	\$0(1)
<u>methazolamide</u> TABS 25mg, 50mg	\$0(1)
<u>metolazone</u> TABS 2.5mg, 5mg, 10mg	\$0(1)
<u>spironolactone &amp; hydrochlorothiazide</u> <u>tab</u> 25-25 mg	\$0(1)
<u>torsemide</u> TABS 5mg, 10mg, 20mg, 100mg	\$0(1)
<u>triamterene &amp; hydrochlorothiazide cap</u> 37.5-25 mg	\$0(1)
<u>triamterene &amp; hydrochlorothiazide tab</u> 37.5-25 mg	\$0(1)
<u>triamterene &amp; hydrochlorothiazide tab</u> 75-50 mg	\$0(1)

### ***MISCELLANEOUS***

<u>ADRENALIN</u> SOLN 1mg/ml	\$0(2)
<u>aliskiren fumarate</u> TABS 150mg, 300mg	\$0(1)
<u>clonidine</u> PTWK .1mg/24hr, .2mg/24hr, .3mg/24hr	\$0(1)
<u>clonidine hcl</u> TABS .1mg, .2mg, .3mg	\$0(1)
<u>CORLANOR</u> SOLN 5mg/5ml; TABS 5mg, 7.5mg	\$0(2)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
<i>digitek</i> TABS .125mg, .25mg	\$0(1)	QL (30 tabs / 30 days)
<i>digox</i> TABS 125mcg, 250mcg	\$0(1)	QL (30 tabs / 30 days)
<i>digoxin</i> SOLN .05mg/ml, .25mg/ml	\$0(1)	
<i>digoxin</i> TABS 125mcg, 250mcg	\$0(1)	QL (30 tabs / 30 days)
<i>droxidopa</i> CAPS 100mg	\$0(2)	NDS, QL (90 caps / 30 days), NM, PA
<i>droxidopa</i> CAPS 200mg, 300mg	\$0(2)	NDS, QL (180 caps / 30 days), NM, PA
<i>guanfacine hcl</i> TABS 1mg, 2mg	\$0(2)	PA; PA if 70 years and older
<i>hydralazine hcl</i> SOLN 20mg/ml; TABS 10mg, 25mg, 50mg, 100mg	\$0(1)	
METHYLDOPA TABS 250mg, 500mg	\$0(2)	PA; PA if 70 years and older
<i>metyrosine</i> CAPS 250mg	\$0(2)	NDS, PA
<i>midodrine hcl</i> TABS 2.5mg, 5mg, 10mg	\$0(1)	
<i>minoxidil</i> TABS 2.5mg, 10mg	\$0(1)	
<i>ranolazine</i> TB12 500mg, 1000mg	\$0(1)	

#### ***NITRATES - DRUGS TO TREAT HEART CONDITIONS***

<i>isosorbide dinitrate</i> TABS 5mg, 10mg, 20mg, 30mg	\$0(1)	
<i>isosorbide mononitrate</i> TABS 10mg, 20mg; TB24 30mg, 60mg, 120mg	\$0(1)	
<i>minitran</i> PT24 .1mg/hr, .2mg/hr, .4mg/hr, .6mg/hr	\$0(1)	
NITRO-BID OINT 2%	\$0(2)	
<i>nitroglycerin</i> PT24 .1mg/hr, .2mg/hr, .4mg/hr, .6mg/hr; SOLN .4mg/spray; SUBL .3mg, .4mg, .6mg	\$0(1)	

#### ***PULMONARY ARTERIAL HYPERTENSION - DRUGS TO TREAT PULMONARY HYPERTENSION***

ADEMPAS TABS .5mg, 1mg, 1.5mg, 2mg, 2.5mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, LA, PA
ambrisentan TABS 5mg, 10mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, LA, PA
<i>bosentan</i> TABS 62.5mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, LA, PA
<i>bosentan</i> TABS 125mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, LA, PA
OPSUMIT TABS 10mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, LA, PA
<i>sildenafil citrate (pulmonary hypertension)</i> TABS 20mg	\$0(1)	QL (90 tabs / 30 days), NM, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<i>treprostinil</i> SOLN 20mg/20ml, 50mg/20ml, 100mg/20ml, 200mg/20ml	\$0(2)	NDS, NM, LA, PA
VENTAVIS SOLN 10mcg/ml, 20mcg/ml	\$0(2)	NDS, NM, PA

## **CENTRAL NERVOUS SYSTEM - DRUGS TO TREAT NERVOUS SYSTEM DISORDERS**

### **ANTIANXIETY - DRUGS TO TREAT ANXIETY**

<i>alprazolam</i> TABS .25mg, .5mg, 1mg, 2mg	\$0(1)	QL (150 tabs / 30 days)
<i>buspirone hcl</i> TABS 5mg, 7.5mg, 10mg, 15mg, 30mg	\$0(1)	
<i>fluvoxamine maleate</i> TABS 25mg, 50mg, 100mg	\$0(1)	
<i>lorazepam</i> CONC 2mg/ml	\$0(1)	QL (150 mL / 30 days)
<i>lorazepam</i> SOLN 2mg/ml, 4mg/ml	\$0(1)	
<i>lorazepam</i> TABS .5mg, 1mg, 2mg	\$0(1)	QL (150 tabs / 30 days)
<i>lorazepam intensol</i> CONC 2mg/ml	\$0(1)	QL (150 mL / 30 days)

### **ANTICONVULSANTS - DRUGS TO TREAT SEIZURES**

<i>APTIOM</i> TABS 200mg, 400mg, 600mg, 800mg	\$0(2)	NDS, QL (60 tabs / 30 days)
<i>BRIVIACT</i> SOLN 10mg/ml	\$0(2)	NDS, QL (600 mL / 30 days), PA
<i>BRIVIACT</i> SOLN 50mg/5ml	\$0(2)	PA
<i>BRIVIACT</i> TABS 10mg, 25mg, 50mg, 75mg, 100mg	\$0(2)	NDS, QL (60 tabs / 30 days), PA
<i>carbamazepine</i> CHEW 100mg; CP12 100mg, 200mg, 300mg; SUSP 100mg/5ml; TABS 200mg; TB12 100mg, 200mg, 400mg	\$0(1)	
<i>CELONTIN</i> CAPS 300mg	\$0(2)	
<i>clobazam</i> SUSP 2.5mg/ml	\$0(1)	QL (480 mL / 30 days), PA
<i>clobazam</i> TABS 10mg, 20mg	\$0(1)	QL (60 tabs / 30 days), PA
<i>clonazepam</i> TABS 2mg; TBDP 2mg	\$0(1)	QL (300 tabs / 30 days)
<i>clonazepam</i> TABS .5mg, 1mg; TBDP .125mg, .25mg, .5mg, 1mg	\$0(1)	QL (90 tabs / 30 days)
<i>clorazepate dipotassium</i> TABS 3.75mg, 7.5mg, 15mg	\$0(1)	QL (180 tabs / 30 days), PA; PA if 65 years and older
<i>DIACOMIT</i> CAPS 250mg	\$0(2)	NDS, QL (360 caps / 30 days), NM, LA, PA
<i>DIACOMIT</i> CAPS 500mg	\$0(2)	NDS, QL (180 caps / 30 days), NM, LA, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
DIACOMIT PACK 250mg	\$0(2)	NDS, QL (360 packets / 30 days), NM, LA, PA
DIACOMIT PACK 500mg	\$0(2)	NDS, QL (180 packets / 30 days), NM, LA, PA
<i>diazepam</i> CONC 5mg/ml	\$0(1)	QL (240 mL / 30 days), PA; PA if 65 years and older
<i>diazepam</i> SOLN 5mg/5ml	\$0(1)	QL (1200 mL / 30 days), PA; PA if 65 years and older
<i>diazepam</i> TABS 2mg, 5mg, 10mg	\$0(1)	QL (120 tabs / 30 days), PA; PA if 65 years and older
<i>diazepam (anticonvulsant)</i> GEL 2.5mg, 10mg, 20mg	\$0(1)	
<i>diazepam inj</i> SOLN 5mg/ml	\$0(1)	
DILANTIN CAPS 30mg, 100mg	\$0(2)	
DILANTIN INFATABS CHEW 50mg	\$0(2)	
DILANTIN-125 SUSP 125mg/5ml	\$0(2)	
<i>divalproex sodium</i> CSDR 125mg; TB24 250mg, 500mg; TBEC 125mg, 250mg, 500mg	\$0(1)	
EPIDIOLEX SOLN 100mg/ml	\$0(2)	NDS, QL (600 mL / 30 days), NM, LA, PA
<i>epitol</i> TABS 200mg	\$0(1)	
<i>ethosuximide</i> CAPS 250mg; SOLN 250mg/5ml	\$0(1)	
<i>felbamate</i> SUSP 600mg/5ml	\$0(2)	NDS
<i>felbamate</i> TABS 400mg, 600mg	\$0(1)	
FINTEPLA SOLN 2.2mg/ml	\$0(2)	NDS, QL (360 mL / 30 days), LA, PA
FYCOMPA SUSP .5mg/ml	\$0(2)	NDS, QL (720 mL / 30 days), PA
FYCOMPA TABS 2mg	\$0(2)	QL (60 tabs / 30 days), PA
FYCOMPA TABS 4mg, 6mg	\$0(2)	NDS, QL (60 tabs / 30 days), PA
FYCOMPA TABS 8mg, 10mg, 12mg	\$0(2)	NDS, QL (30 tabs / 30 days), PA
<i>gabapentin</i> CAPS 100mg	\$0(1)	QL (1080 caps / 30 days)
<i>gabapentin</i> CAPS 300mg	\$0(1)	QL (360 caps / 30 days)
<i>gabapentin</i> CAPS 400mg	\$0(1)	QL (270 caps / 30 days)
<i>gabapentin</i> SOLN 250mg/5ml	\$0(1)	QL (2160 mL / 30 days)
<i>gabapentin</i> TABS 600mg	\$0(1)	QL (180 tabs / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<i>gabapentin</i> TABS 800mg	\$0(1)	QL (120 tabs / 30 days)
<i>lamotrigine</i> CHEW 5mg, 25mg; TABS 25mg, 100mg, 150mg, 200mg; TB24 25mg, 50mg, 100mg, 200mg, 250mg, 300mg	\$0(1)	
<i>levetiracetam</i> SOLN 100mg/ml, 500mg/5ml; TABS 250mg, 500mg, 750mg, 1000mg; TB24 500mg, 750mg	\$0(1)	
<i>levetiracetam</i> in sodium chloride iv soln 500 mg/100ml	\$0(1)	
<i>levetiracetam</i> in sodium chloride iv soln 1000 mg/100ml	\$0(1)	
<i>levetiracetam</i> in sodium chloride iv soln 1500 mg/100ml	\$0(1)	
<i>NAYZILAM</i> SOLN 5mg/0.1ml	\$0(2)	
<i>oxcarbazepine</i> SUSP 300mg/5ml; TABS 150mg, 300mg, 600mg	\$0(1)	
<i>phenobarbital</i> ELIX 20mg/5ml; TABS 15mg, 16.2mg, 30mg, 32.4mg, 60mg, 64.8mg, 97.2mg, 100mg	\$0(2)	PA; PA if 70 years and older
<i>phenobarbital sodium</i> SOLN 65mg/ml, 130mg/ml	\$0(2)	PA; PA if 70 years and older
<i>PHENYTEK</i> CAPS 200mg, 300mg	\$0(2)	
<i>phenytoin</i> CHEW 50mg; SUSP 125mg/5ml	\$0(1)	
<i>phenytoin sodium</i> SOLN 50mg/ml	\$0(1)	
<i>phenytoin sodium extended</i> CAPS 100mg, 200mg, 300mg	\$0(1)	
<i>pregabalin</i> CAPS 25mg, 50mg, 75mg, 100mg, 150mg	\$0(1)	QL (120 caps / 30 days), PA
<i>pregabalin</i> CAPS 200mg	\$0(1)	QL (90 caps / 30 days), PA
<i>pregabalin</i> CAPS 225mg, 300mg	\$0(1)	QL (60 caps / 30 days), PA
<i>pregabalin</i> SOLN 20mg/ml	\$0(1)	QL (900 mL / 30 days), PA
<i>primidone</i> TABS 50mg, 250mg	\$0(1)	
<i>roweepra</i> TABS 500mg	\$0(1)	
<i>rufinamide</i> SUSP 40mg/ml	\$0(2)	NDS, QL (2300 mL / 28 days), PA
<i>rufinamide</i> TABS 200mg	\$0(2)	NDS, QL (480 tabs / 30 days), PA
<i>rufinamide</i> TABS 400mg	\$0(2)	NDS, QL (240 tabs / 30 days), PA
<i>SPRITAM</i> TB3D 250mg	\$0(2)	QL (360 tabs / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
SPRITAM TB3D 500mg	\$0(2)	QL (180 tabs / 30 days)
SPRITAM TB3D 750mg	\$0(2)	QL (120 tabs / 30 days)
SPRITAM TB3D 1000mg	\$0(2)	QL (90 tabs / 30 days)
<i>subvenite</i> TABS 25mg, 100mg, 150mg, 200mg	\$0(1)	
SYMPAZAN FILM 5mg	\$0(2)	QL (60 films / 30 days), PA
SYMPAZAN FILM 10mg, 20mg	\$0(2)	NDS, QL (60 films / 30 days), PA
<i>tiagabine hcl</i> TABS 2mg, 4mg, 12mg, 16mg	\$0(1)	
<i>topiramate</i> CPSP 15mg, 25mg; TABS 25mg, 50mg, 100mg, 200mg	\$0(1)	
<i>valproate sodium</i> SOLN 100mg/ml, 250mg/5ml	\$0(1)	
<i>valproic acid</i> CAPS 250mg	\$0(1)	
VALTOCO LIQD 5mg/0.1ml, 10mg/0.1ml; LQPK 7.5mg/0.1ml, 10mg/0.1ml	\$0(2)	
<i>vigabatrin</i> PACK 500mg	\$0(2)	NDS, QL (180 packets / 30 days), LA, PA
<i>vigabatrin</i> TABS 500mg	\$0(2)	NDS, QL (180 tabs / 30 days), LA, PA
<i>vigadron</i> PACK 500mg	\$0(2)	NDS, QL (180 packets / 30 days), LA, PA
VIMPAT SOLN 10mg/ml	\$0(2)	NDS, QL (1200 mL / 30 days)
VIMPAT SOLN 200mg/20ml	\$0(2)	NDS
VIMPAT TABS 50mg	\$0(2)	QL (120 tabs / 30 days)
VIMPAT TABS 100mg, 150mg, 200mg	\$0(2)	NDS, QL (60 tabs / 30 days)
XCOPRI TABS 50mg	\$0(2)	NDS, QL (90 tabs / 30 days)
XCOPRI TABS 100mg, 150mg, 200mg	\$0(2)	NDS, QL (60 tabs / 30 days)
XCOPRI PAK 12.5-25	\$0(2)	QL (28 tabs / 28 days)
XCOPRI PAK 50-100MG	\$0(2)	NDS, QL (28 tabs / 28 days)
XCOPRI PAK 100-150	\$0(2)	NDS, QL (56 tabs / 28 days)
XCOPRI PAK 150-200MG (MAINTENANCE)	\$0(2)	NDS, QL (56 tabs / 28 days)
XCOPRI PAK 150-200MG (TITRATION)	\$0(2)	NDS, QL (28 tabs / 28 days)
<i>zonisamide</i> CAPS 25mg, 50mg, 100mg	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
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#### ***ANTIDEMENTIA - DRUGS TO TREAT DEMENTIA AND MEMORY LOSS***

<i>donepezil hydrochloride TABS 5mg; TBDP 5mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>donepezil hydrochloride TABS 10mg; TBDP 10mg</i>	\$0(1)	
<i>galantamine hydrobromide CP24 8mg, 16mg, 24mg</i>	\$0(1)	QL (30 caps / 30 days)
<i>galantamine hydrobromide SOLN 4mg/ml</i>	\$0(1)	
<i>galantamine hydrobromide TABS 4mg, 8mg, 12mg</i>	\$0(1)	QL (60 tabs / 30 days)
<i>memantine hcl CP24 7mg, 14mg, 21mg, 28mg; SOLN 2mg/ml; TABS 5mg, 10mg</i>	\$0(1)	PA; PA if < 30 yrs
<i>memantine hcl tab 28 x 5 mg &amp; 21 x 10 mg titration pack</i>	\$0(2)	PA; PA if < 30 yrs
<i>NAMZARIC CAP 7-10MG</i>	\$0(2)	
<i>NAMZARIC CAP 14-10MG</i>	\$0(2)	
<i>NAMZARIC CAP 21-10MG</i>	\$0(2)	
<i>NAMZARIC CAP 28-10MG</i>	\$0(2)	
<i>NAMZARIC CAP PACK</i>	\$0(2)	
<i>rivastigmine PT24 4.6mg/24hr, 9.5mg/24hr, 13.3mg/24hr</i>	\$0(1)	QL (30 patches / 30 days)
<i>rivastigmine tartrate CAPS 1.5mg, 3mg</i>	\$0(1)	QL (90 caps / 30 days)
<i>rivastigmine tartrate CAPS 4.5mg, 6mg</i>	\$0(1)	QL (60 caps / 30 days)

#### ***ANTIDEPRESSANTS - DRUGS TO TREAT DEPRESSION***

<i>amitriptyline hcl TABS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg</i>	\$0(2)	
<i>amoxapine TABS 25mg, 50mg, 100mg, 150mg</i>	\$0(2)	
<i>bupropion hcl TABS 75mg, 100mg; TB12 100mg, 150mg, 200mg; TB24 150mg, 300mg</i>	\$0(1)	
<i>citalopram hydrobromide SOLN 10mg/5ml; TABS 10mg, 20mg, 40mg</i>	\$0(1)	
<i>clomipramine hcl CAPS 25mg, 50mg, 75mg</i>	\$0(2)	PA
<i>desipramine hcl TABS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg</i>	\$0(2)	
<i>desvenlafaxine succinate TB24 25mg, 50mg, 100mg</i>	\$0(1)	QL (30 tabs / 30 days), PA
<i>doxepin hcl CAPS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg; CONC 10mg/ml</i>	\$0(2)	
<i>DRIZALMA SPRINKLE CSDR 20mg, 30mg, 40mg, 60mg</i>	\$0(2)	QL (60 caps / 30 days), PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
<i>duloxetine hcl</i> CPEP 20mg, 30mg, 60mg	\$0(1)	QL (60 caps / 30 days)
<i>EMSAM</i> PT24 6mg/24hr, 9mg/24hr, 12mg/24hr	\$0(2)	NDS, QL (30 patches / 30 days), PA
<i>escitalopram oxalate</i> SOLN 5mg/5ml; TABS 5mg, 10mg, 20mg	\$0(1)	
<i>FETZIMA</i> CP24 20mg, 40mg	\$0(2)	QL (60 caps / 30 days), PA
<i>FETZIMA</i> CP24 80mg, 120mg	\$0(2)	QL (30 caps / 30 days), PA
<i>FETZIMA CAP TITRATIO</i>	\$0(2)	PA
<i>fluoxetine hcl</i> CAPS 10mg, 20mg, 40mg; SOLN 20mg/5ml	\$0(1)	
<i>imipramine hcl</i> TABS 10mg, 25mg, 50mg	\$0(2)	
<i>MARPLAN</i> TABS 10mg	\$0(2)	QL (180 tabs / 30 days)
<i>mirtazapine</i> TABS 7.5mg, 15mg, 30mg, 45mg; TBDP 15mg, 30mg, 45mg	\$0(1)	
<i>nefazodone hcl</i> TABS 50mg, 100mg, 150mg, 200mg, 250mg	\$0(1)	
<i>nortriptyline hcl</i> CAPS 10mg, 25mg, 50mg, 75mg; SOLN 10mg/5ml	\$0(2)	
<i>paroxetine hcl</i> TABS 10mg, 20mg, 30mg, 40mg	\$0(2)	
<i>PAXIL</i> SUSP 10mg/5ml	\$0(2)	QL (900 mL / 30 days), PA
<i>phenelzine sulfate</i> TABS 15mg	\$0(1)	
<i>protriptyline hcl</i> TABS 5mg, 10mg	\$0(2)	
<i>sertraline hcl</i> CONC 20mg/ml; TABS 25mg, 50mg, 100mg	\$0(1)	
<i>tranylcypromine sulfate</i> TABS 10mg	\$0(1)	
<i>trazodone hcl</i> TABS 50mg, 100mg, 150mg	\$0(1)	
<i>trimipramine maleate</i> CAPS 25mg	\$0(2)	QL (240 caps / 30 days)
<i>trimipramine maleate</i> CAPS 50mg	\$0(2)	QL (120 caps / 30 days)
<i>trimipramine maleate</i> CAPS 100mg	\$0(2)	QL (60 caps / 30 days)
<i>TRINTELLIX</i> TABS 5mg	\$0(2)	QL (120 tabs / 30 days)
<i>TRINTELLIX</i> TABS 10mg	\$0(2)	QL (60 tabs / 30 days)
<i>TRINTELLIX</i> TABS 20mg	\$0(2)	QL (30 tabs / 30 days)
<i>venlafaxine hcl</i> CP24 37.5mg, 75mg, 150mg; TABS 25mg, 37.5mg, 50mg, 75mg, 100mg	\$0(1)	
<i>VIIBRYD</i> TABS 10mg, 20mg, 40mg	\$0(2)	QL (30 tabs / 30 days)
<i>VIIBRYD KIT STARTER</i>	\$0(2)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<b>ANTIPARKINSONIAN AGENTS - DRUGS TO TREAT PARKINSONS DISEASE</b>		
<b>amantadine hcl CAPS 100mg</b>		
<i>amantadine hcl SOLN 50mg/5ml; TABS 100mg</i>	\$0(1)	QL (120 caps / 30 days)
<i>benztropine mesylate SOLN 1mg/ml</i>	\$0(1)	
<i>benztropine mesylate TABS .5mg, 1mg, 2mg</i>	\$0(2)	PA; PA if 70 years and older
<i>bromocriptine mesylate CAPS 5mg; TABS 2.5mg</i>	\$0(1)	
<i>CARB/LEVO ORALLY DISINTEGRATING TAB 10-100MG</i>	\$0(1)	
<i>CARB/LEVO ORALLY DISINTEGRATING TAB 25-100MG</i>	\$0(1)	
<i>CARB/LEVO ORALLY DISINTEGRATING TAB 25-250MG</i>	\$0(1)	
<i>carbidopa &amp; levodopa tab 10-100 mg</i>	\$0(1)	
<i>carbidopa &amp; levodopa tab 25-100 mg</i>	\$0(1)	
<i>carbidopa &amp; levodopa tab 25-250 mg</i>	\$0(1)	
<i>carbidopa &amp; levodopa tab er 25-100 mg</i>	\$0(1)	
<i>carbidopa &amp; levodopa tab er 50-200 mg</i>	\$0(1)	
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	\$0(1)	
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	\$0(1)	
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	\$0(1)	
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	\$0(1)	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	\$0(1)	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	\$0(1)	
<i>entacapone TABS 200mg</i>	\$0(1)	
<i>KYNMOBI FILM 10mg, 15mg, 20mg, 25mg, 30mg</i>	\$0(2)	NDS, QL (150 films / 30 days), NM, PA
<i>NEUPRO PT24 1mg/24hr, 2mg/24hr, 3mg/24hr, 4mg/24hr, 6mg/24hr, 8mg/24hr</i>	\$0(2)	
<i>pramipexole dihydrochloride TABS .125mg, .25mg, .5mg, .75mg, 1mg, 1.5mg</i>	\$0(1)	
<i>rasagiline mesylate TABS 1mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>rasagiline mesylate TABS .5mg</i>	\$0(1)	QL (60 tabs / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<i>ropinirole hydrochloride</i> TABS .25mg,.5mg, 1mg, 2mg, 3mg, 4mg, 5mg	\$0(1)	
<i>selegiline hcl</i> CAPS 5mg; TABS 5mg	\$0(1)	
<i>trihexyphenidyl hcl</i> SOLN .4mg/ml; TABS 2mg, 5mg	\$0(2)	PA; PA if 70 years and older
<b>ANTIPSYCHOTICS - DRUGS TO TREAT PSYCHOSES</b>		
ABILIFY MAINTENA PRSY 300mg, 400mg	\$0(2)	NDS, QL (1 syringe / 28 days)
ABILIFY MAINTENA SRER 300mg, 400mg	\$0(2)	NDS, QL (1 injection / 28 days)
<i>ariPIPRAZOLE</i> SOLN 1mg/ml	\$0(1)	QL (900 mL / 30 days)
<i>ariPIPRAZOLE</i> TABS 2mg, 5mg, 10mg, 15mg, 20mg, 30mg	\$0(1)	QL (30 tabs / 30 days)
<i>ariPIPRAZOLE</i> TBDP 10mg, 15mg	\$0(1)	QL (60 tabs / 30 days)
ARISTADA PRSY 441mg/1.6ml, 662mg/2.4ml, 882mg/3.2ml	\$0(2)	NDS, QL (1 syringe / 28 days)
ARISTADA PRSY 1064mg/3.9ml	\$0(2)	NDS, QL (1 syringe / 56 days)
ARISTADA INITIO PRSY 675mg/2.4ml	\$0(2)	NDS
<i>asenapine maleate</i> SUBL 2.5mg, 5mg, 10mg	\$0(1)	QL (60 tabs / 30 days)
CAPLYTA CAPS 42mg	\$0(2)	QL (30 caps / 30 days), PA
<i>chlorpromazine hcl</i> SOLN 25mg/ml, 50mg/2ml; TABS 10mg, 25mg, 50mg, 100mg, 200mg	\$0(1)	
CHLORPROMAZINE HYDROCHLOR CONC 30mg/ml, 100mg/ml	\$0(2)	
<i>clozapine</i> TABS 25mg, 50mg	\$0(1)	
<i>clozapine</i> TABS 100mg	\$0(1)	QL (270 tabs / 30 days)
<i>clozapine</i> TABS 200mg	\$0(1)	QL (135 tabs / 30 days)
<i>clozapine</i> TBDP 12.5mg, 25mg	\$0(1)	PA
<i>clozapine</i> TBDP 100mg	\$0(1)	QL (270 tabs / 30 days), PA
<i>clozapine</i> TBDP 150mg	\$0(1)	QL (180 tabs / 30 days), PA
<i>clozapine</i> TBDP 200mg	\$0(2)	NDS, QL (135 tabs / 30 days), PA
FANAPT TABS 1mg, 2mg, 4mg, 6mg, 8mg, 10mg, 12mg	\$0(2)	NDS, QL (60 tabs / 30 days), PA
FANAPT PAK	\$0(2)	PA
<i>fluphenazine decanoate</i> SOLN 25mg/ml	\$0(1)	
<i>fluphenazine hcl</i> CONC 5mg/ml; ELIX 2.5mg/5ml; SOLN 2.5mg/ml; TABS 1mg, 2.5mg, 5mg, 10mg	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<i>haloperidol</i> TABS .5mg, 1mg, 2mg, 5mg, 10mg, 20mg	\$0(1)	
<i>haloperidol decanoate</i> SOLN 50mg/ml, 100mg/ml	\$0(1)	
<i>haloperidol lactate</i> CONC 2mg/ml; SOLN 5mg/ml	\$0(1)	
INVEGA SUSTENNA SUSY 39mg/0.25ml	\$0(2)	QL (1 syringe / 28 days)
INVEGA SUSTENNA SUSY 78mg/0.5ml, 117mg/0.75ml, 156mg/ml, 234mg/1.5ml	\$0(2)	NDS, QL (1 syringe / 28 days)
INVEGA TRINZA SUSY 273mg/0.875ml, 410mg/1.315ml, 546mg/1.75ml, 819mg/2.625ml	\$0(2)	NDS, QL (1 syringe / 90 days)
LATUDA TABS 20mg, 40mg, 60mg, 120mg	\$0(2)	QL (30 tabs / 30 days)
LATUDA TABS 80mg	\$0(2)	QL (60 tabs / 30 days)
<i>loxpipamine succinate</i> CAPS 5mg, 10mg, 25mg, 50mg	\$0(1)	
<i>molindone hcl</i> TABS 5mg, 10mg, 25mg	\$0(1)	
NUPLAZID CAPS 34mg	\$0(2)	NDS, QL (30 caps / 30 days), NM, LA, PA
NUPLAZID TABS 10mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, LA, PA
<i>olanzapine</i> SOLR 10mg	\$0(1)	QL (3 vials / 1 day)
<i>olanzapine</i> TABS 2.5mg, 5mg, 10mg; TBDP 10mg	\$0(1)	QL (60 tabs / 30 days)
<i>olanzapine</i> TABS 7.5mg, 15mg, 20mg; TBDP 5mg, 15mg, 20mg	\$0(1)	QL (30 tabs / 30 days)
<i>paliperidone</i> TB24 1.5mg, 3mg, 9mg	\$0(1)	QL (30 tabs / 30 days)
<i>paliperidone</i> TB24 6mg	\$0(1)	QL (60 tabs / 30 days)
<i>perphenazine</i> TABS 2mg, 4mg, 8mg, 16mg	\$0(1)	
PERSERIS PRSY 90mg, 120mg	\$0(2)	NDS, QL (1 syringe / 30 days)
<i>pimozide</i> TABS 1mg, 2mg	\$0(1)	
<i>quetiapine fumarate</i> TABS 25mg, 50mg, 100mg, 200mg, 300mg, 400mg	\$0(1)	
<i>quetiapine fumarate</i> TB24 50mg, 300mg, 400mg	\$0(1)	QL (60 tabs / 30 days), PA
<i>quetiapine fumarate</i> TB24 150mg, 200mg	\$0(1)	QL (30 tabs / 30 days), PA
REXULTI TABS 3mg, 4mg	\$0(2)	QL (30 tabs / 30 days)
REXULTI TABS .25mg, .5mg, 1mg, 2mg	\$0(2)	QL (60 tabs / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
RISPERDAL CONSTA SRER 12.5mg, 25mg	\$0(2)	QL (2 injections / 28 days)
RISPERDAL CONSTA SRER 37.5mg, 50mg	\$0(2)	NDS, QL (2 injections / 28 days)
<i>risperidone</i> SOLN 1mg/ml	\$0(1)	QL (240 mL / 30 days)
<i>risperidone</i> TABS .25mg, .5mg, 1mg, 2mg, 3mg, 4mg	\$0(1)	
<i>risperidone</i> TBDP 1mg, 2mg, 3mg, 4mg	\$0(1)	QL (60 tabs / 30 days)
<i>risperidone</i> TBDP .25mg, .5mg	\$0(1)	QL (90 tabs / 30 days)
SECUADO PT24 3.8mg/24hr, 5.7mg/24hr, 7.6mg/24hr	\$0(2)	QL (30 patches / 30 days)
<i>thioridazine hcl</i> TABS 10mg, 25mg, 50mg, 100mg	\$0(1)	
<i>thiothixene</i> CAPS 1mg, 2mg, 5mg, 10mg	\$0(1)	
<i>trifluoperazine hcl</i> TABS 1mg, 2mg, 5mg, 10mg	\$0(1)	
VERSACLOZ SUSP 50mg/ml	\$0(2)	NDS, QL (600 mL / 30 days), PA
VRAYLAR CAPS 1.5mg	\$0(2)	NDS, QL (60 caps / 30 days), PA
VRAYLAR CAPS 3mg, 4.5mg, 6mg	\$0(2)	NDS, QL (30 caps / 30 days), PA
VRAYLAR CAP 1.5-3MG	\$0(2)	PA
<i>ziprasidone hcl</i> CAPS 20mg, 40mg, 60mg, 80mg	\$0(1)	QL (60 caps / 30 days)
<i>ziprasidone mesylate</i> SOLR 20mg	\$0(1)	QL (6 injections / 3 days)
ZYPREXA RELPREVV SUSR 210mg	\$0(2)	QL (2 vials / 28 days), PA
ZYPREXA RELPREVV SUSR 300mg	\$0(2)	NDS, QL (2 vials / 28 days), PA
ZYPREXA RELPREVV SUSR 405mg	\$0(2)	NDS, QL (1 vial / 28 days), PA

**ATTENTION DEFICIT HYPERACTIVITY DISORDER - DRUGS TO TREAT ADHD**

<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	\$0(1)	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	\$0(1)	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	\$0(1)	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	\$0(1)	QL (30 caps / 30 days), PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
amphetamine-dextroamphetamine cap er 24hr 25 mg	\$0(1)	QL (30 caps / 30 days), PA
amphetamine-dextroamphetamine cap er 24hr 30 mg	\$0(1)	QL (30 caps / 30 days), PA
amphetamine-dextroamphetamine tab 5 mg	\$0(1)	QL (60 tabs / 30 days), PA
amphetamine-dextroamphetamine tab 7.5 mg	\$0(1)	QL (60 tabs / 30 days), PA
amphetamine-dextroamphetamine tab 10 mg	\$0(1)	QL (60 tabs / 30 days), PA
amphetamine-dextroamphetamine tab 12.5 mg	\$0(1)	QL (60 tabs / 30 days), PA
amphetamine-dextroamphetamine tab 15 mg	\$0(1)	QL (60 tabs / 30 days), PA
amphetamine-dextroamphetamine tab 20 mg	\$0(1)	QL (90 tabs / 30 days), PA
amphetamine-dextroamphetamine tab 30 mg	\$0(1)	QL (60 tabs / 30 days), PA
atomoxetine hcl CAPS 10mg, 18mg, 25mg	\$0(1)	QL (120 caps / 30 days)
atomoxetine hcl CAPS 40mg	\$0(1)	QL (60 caps / 30 days)
atomoxetine hcl CAPS 60mg, 80mg, 100mg	\$0(1)	QL (30 caps / 30 days)
dexmethylphenidate hcl TABS 2.5mg, 5mg	\$0(1)	QL (120 tabs / 30 days), PA
dexmethylphenidate hcl TABS 10mg	\$0(1)	QL (60 tabs / 30 days), PA
guanfacine hcl (adhd) TB24 1mg, 2mg, 3mg, 4mg	\$0(2)	QL (30 tabs / 30 days), PA; PA if 70 years and older
metadate er TBCR 20mg	\$0(1)	QL (90 tabs / 30 days), PA
methylphenidate hcl SOLN 5mg/5ml	\$0(1)	QL (1800 mL / 30 days), PA
methylphenidate hcl SOLN 10mg/5ml	\$0(1)	QL (900 mL / 30 days), PA
methylphenidate hcl TABS 5mg, 10mg	\$0(1)	QL (180 tabs / 30 days), PA
methylphenidate hcl TABS 20mg; TBCR 10mg, 20mg	\$0(1)	QL (90 tabs / 30 days), PA
<b>HYPNOTICS - DRUGS TO TREAT INSOMNIA</b>		
BELSOMRA TABS 5mg, 10mg, 15mg, 20mg	\$0(2)	QL (30 tabs / 30 days)
doxepin hcl (sleep) TABS 3mg, 6mg	\$0(1)	QL (30 tabs / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
<i>eszopiclone</i> TABS 1mg, 2mg, 3mg	\$0(2)	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>HETLIOZ</i> CAPS 20mg	\$0(2)	NDS, QL (30 caps / 30 days), NM, LA, PA
<i>temazepam</i> CAPS 7.5mg	\$0(1)	QL (30 caps / 30 days), PA; PA applies if 65 years and older after a 90 day supply in a calendar year
<i>temazepam</i> CAPS 15mg	\$0(1)	QL (60 caps / 30 days), PA; PA applies if 65 years and older after a 90 day supply in a calendar year
<i>temazepam</i> CAPS 30mg	\$0(1)	QL (30 caps / 30 days), PA; PA if 65 years and older
<i>zaleplon</i> CAPS 5mg, 10mg	\$0(2)	QL (60 caps / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>zolpidem tartrate</i> TABS 5mg, 10mg	\$0(2)	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year

#### ***MIGRAINE - DRUGS TO TREAT SEVERE HEADACHES***

<i>AIMOVIG</i> SOAJ 70mg/ml, 140mg/ml	\$0(2)	QL (1 pen / 30 days), PA
<i>dihydroergotamine mesylate</i> SOLN 1mg/ml	\$0(2)	NDS
<i>dihydroergotamine mesylate</i> SOLN 4mg/ml	\$0(2)	NDS, QL (8 mL / 30 days), PA
<i>ergotamine w/ caffeine tab 1-100 mg</i>	\$0(1)	QL (40 tabs / 28 days), PA
<i>naratriptan hcl</i> TABS 1mg, 2.5mg	\$0(1)	QL (12 tabs / 30 days)
<i>rizatriptan benzoate</i> TABS 5mg, 10mg; TBDP 5mg, 10mg	\$0(1)	QL (18 tabs / 30 days)
<i>sumatriptan</i> SOLN 5mg/act	\$0(1)	QL (24 units / 30 days)
<i>sumatriptan</i> SOLN 20mg/act	\$0(1)	QL (12 units / 30 days)
<i>sumatriptan succinate</i> SOAJ 4mg/0.5ml; SOCT 4mg/0.5ml	\$0(1)	QL (18 injections / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
<i>sumatriptan succinate</i> SOAJ 6mg/0.5ml; SOCT 6mg/0.5ml; SOLN 6mg/0.5ml	\$0(1)	QL (12 injections / 30 days)
<i>sumatriptan succinate</i> TABS 25mg, 50mg, 100mg	\$0(1)	QL (12 tabs / 30 days)
UBRELVY TABS 50mg, 100mg	\$0(2)	NDS, QL (16 tabs / 30 days), PA
<i>zolmitriptan</i> TABS 2.5mg, 5mg; TBDP 2.5mg, 5mg	\$0(1)	QL (12 tabs / 30 days)
<b>MISCELLANEOUS</b>		
AUSTEDO TABS 6mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
AUSTEDO TABS 9mg, 12mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, PA
INGREZZA CAPS 40mg, 80mg	\$0(2)	NDS, QL (30 caps / 30 days), NM, LA, PA
INGREZZA CAPS 60mg	\$0(2)	NDS, QL (30 caps / 30 days), LA, PA
INGREZZA CAP 40-80MG	\$0(2)	NDS, QL (28 caps / 28 days), NM, LA, PA
LITHIUM SOLN 8meq/5ml	\$0(2)	
<i>lithium carbonate</i> CAPS 150mg, 300mg, 600mg; TABS 300mg; TBCR 300mg, 450mg	\$0(1)	
NUEDEXTA CAP 20-10MG	\$0(2)	QL (60 caps / 30 days), PA
<i>pregabalin (once-daily)</i> TB24 82.5mg, 165mg, 330mg	\$0(1)	QL (60 tabs / 30 days), PA
<i>pyridostigmine bromide</i> TABS 60mg	\$0(1)	
<i>riluzole</i> TABS 50mg	\$0(1)	
<i>tetrabenazine</i> TABS 12.5mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, PA
<i>tetrabenazine</i> TABS 25mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, PA
<b>MULTIPLE SCLEROSIS AGENTS - DRUGS TO TREAT MULTIPLE SCLEROSIS</b>		
BETASERON KIT .3mg	\$0(2)	NDS, QL (14 syringes / 28 days), NM, PA
<i>dalfampridine</i> TB12 10mg	\$0(1)	NM, PA
GILENYA CAPS .5mg	\$0(2)	NDS, QL (28 caps / 28 days), NM, PA
<i>glatiramer acetate</i> SOSY 20mg/ml	\$0(2)	NDS, QL (30 syringes / 30 days), NM, PA
<i>glatiramer acetate</i> SOSY 40mg/ml	\$0(2)	NDS, QL (12 syringes / 28 days), NM, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
<i>glatopa</i> SOSY 20mg/ml	\$0(2)	NDS, QL (30 syringes / 30 days), NM, PA
<i>glatopa</i> SOSY 40mg/ml	\$0(2)	NDS, QL (12 syringes / 28 days), NM, PA

### **MUSCULOSKELETAL THERAPY AGENTS - DRUGS TO TREAT MUSCLE SPASMS**

<i>baclofen</i> TABS 10mg, 20mg	\$0(1)	
<i>carisoprodol</i> TABS 350mg	\$0(2)	QL (120 tabs / 30 days), PA; PA if 70 years and older
<i>cyclobenzaprine hcl</i> TABS 5mg, 10mg	\$0(2)	PA; PA if 70 years and older
<i>dantrolene sodium</i> CAPS 25mg, 50mg, 100mg	\$0(1)	
<i>methocarbamol</i> TABS 500mg, 750mg	\$0(2)	PA; PA if 70 years and older
<i>tizanidine hcl</i> TABS 2mg, 4mg	\$0(1)	
<i>vanadom</i> TABS 350mg	\$0(2)	QL (120 tabs / 30 days), PA; PA if 70 years and older

### **NARCOLEPSY/CATAPLEXY - DRUGS FOR SLEEP DISORDERS**

<i>armodafinil</i> TABS 50mg	\$0(1)	QL (90 tabs / 30 days), PA
<i>armodafinil</i> TABS 150mg, 200mg, 250mg	\$0(1)	QL (30 tabs / 30 days), PA
<i>XYREM</i> SOLN 500mg/ml	\$0(2)	NDS, QL (540 mL / 30 days), NM, LA, PA

### **PSYCHOTHERAPEUTIC-MISC**

<i>acamprosate calcium</i> TBEC 333mg	\$0(1)	
<i>buprenorphine hcl</i> SUBL 2mg, 8mg	\$0(1)	QL (90 tabs / 30 days), PA
<i>buprenorphine hcl-naloxone hcl sl film</i> <i>2-0.5 mg (base equiv)</i>	\$0(1)	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film</i> <i>4-1 mg (base equiv)</i>	\$0(1)	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film</i> <i>8-2 mg (base equiv)</i>	\$0(1)	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film</i> <i>12-3 mg (base equiv)</i>	\$0(1)	QL (60 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab</i> <i>2-0.5 mg (base equiv)</i>	\$0(1)	QL (90 tabs / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab</i> <i>8-2 mg (base equiv)</i>	\$0(1)	QL (90 tabs / 30 days)
<i>bupropion hcl (smoking deterrent)</i>	\$0(1)	
TB12 150mg		

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
CHANTIX TABS .5mg, 1mg	\$0(2)	QL (56 tabs / 28 days), PA
CHANTIX CONTINUING MONTH TABS 1mg	\$0(2)	QL (56 tabs / 28 days), PA
CHANTIX PAK 0.5& 1MG	\$0(2)	QL (106 tabs / year), PA
<i>disulfiram</i> TABS 250mg, 500mg	\$0(1)	
<i>gnp nicotine gum</i> GUM 2mg, 4mg	\$0(3)	NM; *
<i>gnp nicotine mini lozenge</i> LOZG 2mg, 4mg	\$0(3)	NM; *
<i>gnp nicotine polacrilex</i> GUM 2mg, 4mg; LOZG 2mg, 4mg	\$0(3)	NM; *
<i>gnp nicotine polacrilex m</i> LOZG 4mg	\$0(3)	NM; *
<i>gnp nicotine transdermal</i> PT24 7mg/24hr, 14mg/24hr, 21mg/24hr	\$0(3)	NM; *
<i>goodsense nicotine</i> LOZG 2mg, 4mg	\$0(3)	NM; *
<i>goodsense nicotine gum</i> GUM 4mg	\$0(3)	NM; *
<i>goodsense nicotine polacr</i> GUM 2mg, 4mg; LOZG 4mg	\$0(3)	NM; *
<i>hm nicotine polacrilex</i> GUM 2mg, 4mg; LOZG 2mg, 4mg	\$0(3)	NM; *
<i>hm nicotine transdermal s</i> PT24 7mg/24hr, 14mg/24hr, 21mg/24hr	\$0(3)	NM; *
<i>naloxone hcl</i> SOCT .4mg/ml; SOLN .4mg/ml, 4mg/10ml; SOSY 2mg/2ml	\$0(1)	
<i>naltrexone hcl</i> TABS 50mg	\$0(1)	
NARCAN LIQD 4mg/0.1ml	\$0(2)	
NICODERM CQ PT24 7mg/24hr, 14mg/24hr, 21mg/24hr	\$0(3)	NM; *
NICORETTE GUM 2mg, 4mg; LOZG 2mg, 4mg	\$0(3)	NM; *
NICORETTE MINI LOZG 2mg, 4mg	\$0(3)	NM; *
NICORETTE STARTER KIT GUM 2mg, 4mg	\$0(3)	NM; *
<i>nicotine</i> PT24 7mg/24hr, 14mg/24hr, 21mg/24hr	\$0(3)	NM; *
<i>nicotine mini lozenge</i> LOZG 2mg, 4mg	\$0(3)	NM; *
<i>nicotine polacrilex</i> GUM 2mg, 4mg; LOZG 2mg, 4mg	\$0(3)	NM; *
NICOTINE SYS KIT TRANSDER	\$0(3)	NM; *
<i>nicotine transdermal syst</i> PT24 7mg/24hr, 14mg/24hr, 21mg/24hr	\$0(3)	NM; *
NICOTROL INHALER INHA 10mg	\$0(2)	
NICOTROL NS SOLN 10mg/ml	\$0(2)	
<i>sm nicotine</i> GUM 4mg; LOZG 2mg	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
<i>sm nicotine polacrilex</i> GUM 2mg, 4mg; <i>LOZG</i> 4mg	\$0(3)	NM; *
<i>sm nicotine transdermal s</i> PT24 7mg/24hr, 14mg/24hr, 21mg/24hr	\$0(3)	NM; *
VIVITROL SUSR 380mg	\$0(2)	NDS

## **ENDOCRINE AND METABOLIC - DRUGS TO TREAT DIABETES AND REGULATE HORMONES**

### **ANDROGENS - DRUGS TO REGULATE MALE HORMONES**

ANDRODERM PT24 2mg/24hr, 4mg/24hr	\$0(2)	QL (30 patches / 30 days), PA
<i>oxandrolone</i> TABS 2.5mg	\$0(1)	QL (120 tabs / 30 days), PA
<i>oxandrolone</i> TABS 10mg	\$0(1)	QL (60 tabs / 30 days), PA
<i>testosterone</i> GEL 1%, 25mg/2.5gm, 50mg/5gm	\$0(1)	QL (300 gm / 30 days), PA
<i>testosterone cypionate</i> SOLN 100mg/ml, 200mg/ml	\$0(1)	PA
<i>testosterone enanthate</i> SOLN 200mg/ml	\$0(1)	PA

### **ANTIDIABETICS**

<i>acarbose</i> TABS 25mg, 50mg, 100mg	\$0(1)	
BYDUREON BCISE AUIJ 2mg/0.85ml	\$0(2)	QL (4 pens / 28 days)
BYETTA SOPN 5mcg/0.02ml, 10mcg/0.04ml	\$0(2)	QL (1 pen / 30 days)
FARXIGA TABS 5mg, 10mg	\$0(2)	QL (30 tabs / 30 days)
<i>glimepiride</i> TABS 1mg, 2mg	\$0(1)	QL (90 tabs / 30 days)
<i>glimepiride</i> TABS 4mg	\$0(1)	QL (60 tabs / 30 days)
<i>glipizide</i> TABS 5mg	\$0(1)	QL (240 tabs / 30 days)
<i>glipizide</i> TABS 10mg	\$0(1)	QL (120 tabs / 30 days)
<i>glipizide</i> TB24 2.5mg, 5mg	\$0(1)	QL (90 tabs / 30 days)
<i>glipizide</i> TB24 10mg	\$0(1)	QL (60 tabs / 30 days)
<i>glipizide xl</i> TB24 2.5mg, 5mg	\$0(1)	QL (90 tabs / 30 days)
<i>glipizide xl</i> TB24 10mg	\$0(1)	QL (60 tabs / 30 days)
<i>glipizide-metformin hcl tab</i> 2.5-250 mg	\$0(1)	QL (240 tabs / 30 days)
<i>glipizide-metformin hcl tab</i> 2.5-500 mg	\$0(1)	QL (120 tabs / 30 days)
<i>glipizide-metformin hcl tab</i> 5-500 mg	\$0(1)	QL (120 tabs / 30 days)
GLYXAMBI TAB 10-5 MG	\$0(2)	QL (30 tabs / 30 days)
GLYXAMBI TAB 25-5 MG	\$0(2)	QL (30 tabs / 30 days)
JANUMET TAB 50-500MG	\$0(2)	QL (60 tabs / 30 days)
JANUMET TAB 50-1000	\$0(2)	QL (60 tabs / 30 days)
JANUMET XR TAB 50-500MG	\$0(2)	QL (60 tabs / 30 days)
JANUMET XR TAB 50-1000	\$0(2)	QL (60 tabs / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
JANUMET XR TAB 100-1000	\$0(2)	QL (30 tabs / 30 days)
JANUVIA TABS 25mg, 50mg, 100mg	\$0(2)	QL (30 tabs / 30 days)
JARDIANCE TABS 10mg	\$0(2)	QL (60 tabs / 30 days)
JARDIANCE TABS 25mg	\$0(2)	QL (30 tabs / 30 days)
JENTADUETO TAB 2.5-500	\$0(2)	QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-850	\$0(2)	QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-1000	\$0(2)	QL (60 tabs / 30 days)
JENTADUETO TAB XR 2.5-1000MG	\$0(2)	QL (60 tabs / 30 days)
JENTADUETO TAB XR 5-1000MG	\$0(2)	QL (30 tabs / 30 days)
<i>metformin hcl</i> TABS 500mg	\$0(1)	QL (150 tabs / 30 days)
<i>metformin hcl</i> TABS 850mg	\$0(1)	QL (90 tabs / 30 days)
<i>metformin hcl</i> TABS 1000mg	\$0(1)	QL (75 tabs / 30 days)
<i>metformin hcl</i> TB24 500mg	\$0(1)	QL (120 tabs / 30 days); (generic of GLUCOPHAGE XR)
<i>metformin hcl</i> TB24 750mg	\$0(1)	QL (60 tabs / 30 days); (generic of GLUCOPHAGE XR)
<i>nateglinide</i> TABS 60mg, 120mg	\$0(1)	QL (90 tabs / 30 days)
OZEMPIC (0.25 OR 0.5MG/DOSE) SOPN 2mg/1.5ml	\$0(2)	QL (1 pen / 28 days)
OZEMPIC (1MG/DOSE) SOPN 2mg/1.5ml	\$0(2)	QL (2 pens / 28 days)
OZEMPIC (1MG/DOSE) SOPN 4mg/3ml	\$0(2)	QL (1 pen / 28 days)
<i>pioglitazone hcl</i> TABS 15mg, 30mg, 45mg	\$0(1)	QL (30 tabs / 30 days)
<i>repaglinide</i> TABS 2mg	\$0(1)	QL (240 tabs / 30 days)
<i>repaglinide</i> TABS .5mg, 1mg	\$0(1)	QL (120 tabs / 30 days)
RYBELSUS TABS 3mg, 7mg, 14mg	\$0(2)	QL (30 tabs / 30 days)
SYNJARDY TAB 5-500MG	\$0(2)	QL (120 tabs / 30 days)
SYNJARDY TAB 5-1000MG	\$0(2)	QL (60 tabs / 30 days)
SYNJARDY TAB 12.5-500	\$0(2)	QL (60 tabs / 30 days)
SYNJARDY TAB 12.5-1000MG	\$0(2)	QL (60 tabs / 30 days)
SYNJARDY XR TAB 5-1000MG	\$0(2)	QL (60 tabs / 30 days)
SYNJARDY XR TAB 10-1000	\$0(2)	QL (60 tabs / 30 days)
SYNJARDY XR TAB 12.5-1000MG	\$0(2)	QL (60 tabs / 30 days)
SYNJARDY XR TAB 25-1000	\$0(2)	QL (30 tabs / 30 days)
TRADJENTA TABS 5mg	\$0(2)	QL (30 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 5-2.5- 1000MG	\$0(2)	QL (60 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 10-5- 1000MG	\$0(2)	QL (30 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 12.5-2.5- 1000MG	\$0(2)	QL (60 tabs / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
TRIJARDY XR TAB ER 24HR 25-5-1000MG	\$0(2)	QL (30 tabs / 30 days)
TRULICITY SOPN .75mg/0.5ml, 1.5mg/0.5ml, 3mg/0.5ml, 4.5mg/0.5ml	\$0(2)	QL (4 pens / 28 days)
VICTOZA SOPN 18mg/3ml	\$0(2)	QL (3 pens / 30 days)
XIGDUO XR TAB 2.5-1000	\$0(2)	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-500MG	\$0(2)	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-1000MG	\$0(2)	QL (60 tabs / 30 days)
XIGDUO XR TAB 10-500MG	\$0(2)	QL (30 tabs / 30 days)
XIGDUO XR TAB 10-1000	\$0(2)	QL (30 tabs / 30 days)
<b>ANTIDIABETICS, INSULINS</b>		
BASAGLAR KWIKPEN SOPN 100unit/ml	\$0(2)	
BD ALCOHOL SWABS	\$0(2)	
FIASP FLEX INJ TOUCH	\$0(2)	
FIASP INJ 100/ML	\$0(2)	
FIASP PENFIL INJ U-100	\$0(2)	
GAUZE PADS 2" X 2"	\$0(2)	
HUMULIN R U-500 (CONCENTR SOLN 500unit/ml	\$0(2)	NDS, B/D
HUMULIN R U-500 KWIKPEN SOPN 500unit/ml	\$0(2)	NDS
INSULIN SAFETY NEEDLES	\$0(2)	
INSULIN SYRINGES:	\$0(2)	
BD/ULTIMED/ALLISON/TRIVIDIA/MHC		
LEVEMIR SOLN 100unit/ml	\$0(2)	
LEVEMIR FLEXTOUCH SOPN 100unit/ml	\$0(2)	
NOVOLIN INJ 70/30	\$0(2)	(brand RELION not covered)
NOVOLIN INJ 70/30 FP	\$0(2)	(brand RELION not covered)
NOVOLIN N SUSP 100unit/ml	\$0(2)	(brand RELION not covered)
NOVOLIN N FLEXPEN SUPN 100unit/ml	\$0(2)	(brand RELION not covered)
NOVOLIN R SOLN 100unit/ml	\$0(2)	(brand RELION not covered)
NOVOLIN R FLEXPEN SOPN 100unit/ml	\$0(2)	(brand RELION not covered)
NOVOLOG SOLN 100unit/ml	\$0(2)	(brand RELION not covered)
NOVOLOG FLEXPEN SOPN 100unit/ml	\$0(2)	(brand RELION not covered)
NOVOLOG MIX INJ 70/30	\$0(2)	(brand RELION not covered)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
NOVOLOG MIX INJ FLEXPEN	\$0(2)	(brand RELION not covered)
NOVOLOG PENFILL SOCT 100unit/ml	\$0(2)	(brand RELION not covered)
OMNIPOD KIT STARTER	\$0(2)	QL (1 kit / year), PA
OMNIPOD MIS 5 PACK	\$0(2)	QL (10 pods / 30 days), PA
PEN NEEDLES: NOVO/BD/ULTIMED/OWEN/TRIVIDIA	\$0(2)	
SOLIQUA INJ 100/33	\$0(2)	QL (10 pens / 30 days)
TRESIBA SOLN 100unit/ml	\$0(2)	
TRESIBA FLEXTOUCH SOPN 100unit/ml, 200unit/ml	\$0(2)	
V-GO 20 KIT	\$0(2)	QL (1 kit / 30 days), PA
V-GO 30 KIT	\$0(2)	QL (1 kit / 30 days), PA
V-GO 40 KIT	\$0(2)	QL (1 kit / 30 days), PA
XULTOPHY INJ 100/3.6	\$0(2)	QL (5 pens / 30 days)
<b>CALCIUM REGULATORS</b>		
alendronate sodium SOLN 70mg/75ml; TABS 10mg, 35mg, 70mg	\$0(1)	
calcitonin (salmon) spray SOLN 200unit/act	\$0(1)	B/D
FORTEO SOPN 620mcg/2.48ml	\$0(2)	NDS, NM, PA
ibandronate sodium TABS 150mg	\$0(1)	B/D
NATPARA CART 25mcg, 50mcg, 75mcg, 100mcg	\$0(2)	NDS, NM, PA
PAMIDRONATE DISODIUM SOLN 6mg/ml	\$0(2)	B/D
pamidronate disodium SOLN 30mg/10ml, 90mg/10ml; SOLR 30mg, 90mg	\$0(1)	B/D
PROLIA SOSY 60mg/ml	\$0(2)	QL (1 syringe / 180 days), NM
risedronate sodium TABS 5mg, 35mg, 150mg; TBEC 35mg	\$0(1)	
XGEVA SOLN 120mg/1.7ml	\$0(2)	NDS, NM, PA
zoledronic acid CONC 4mg/5ml; SOLN 4mg/100ml, 5mg/100ml	\$0(1)	B/D
<b>CHELATING AGENTS</b>		
CHEMET CAPS 100mg	\$0(2)	
deferasirox PACK 90mg, 180mg, 360mg; TABS 90mg, 180mg, 360mg	\$0(2)	NDS, PA
LOKELMA PACK 5gm, 10gm	\$0(2)	
penicillamine TABS 250mg	\$0(2)	NDS

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
sodium polystyrene sulfonate powder	\$0(1)	
sps SUSP 15gm/60ml	\$0(1)	
trientine hcl CAPS 250mg	\$0(2)	NDS, PA
VELTASSA PACK 8.4gm, 16.8gm, 25.2gm	\$0(2)	PA
<b>CONTRACEPTIVES - DRUGS FOR BIRTH CONTROL</b>		
afirmelle	\$0(1)	
aftera TABS 1.5mg	\$0(3)	NM; *
altavera	\$0(1)	
alyacen 1/35	\$0(1)	
alyacen 7/7/7	\$0(1)	
amethia	\$0(1)	
apri	\$0(1)	
aranelle	\$0(1)	
ashlyna	\$0(1)	
aubra eq	\$0(1)	
aurovela 1/20	\$0(1)	
aurovela 24 fe	\$0(1)	
aurovela fe 1.5/30	\$0(1)	
aurovela fe 1/20	\$0(1)	
aviane	\$0(1)	
ayuna	\$0(1)	
azurette	\$0(1)	
balziva	\$0(1)	
bekyree	\$0(1)	
blisovi 24 fe	\$0(1)	
blisovi fe 1.5/30	\$0(1)	
briellyn	\$0(1)	
camila TABS .35mg	\$0(1)	
camrese	\$0(1)	
camrese lo	\$0(1)	
caziant	\$0(1)	
chateal	\$0(1)	
cryselle-28	\$0(1)	
cyclafem 1/35	\$0(1)	
cyclafem 7/7/7	\$0(1)	
cyred eq	\$0(1)	
dasetta 1/35	\$0(1)	
dasetta 7/7/7	\$0(1)	
daysee	\$0(1)	
deblitane TABS .35mg	\$0(1)	
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<i>desogestrel &amp; ethynodiol tab 0.15 mg-30 mcg</i>	\$0(1)	
<i>drospirenone-ethynodiol estradiol levomefolate tab 3-0.03-0.451 mg</i>	\$0(1)	
<i>drospirenone-ethynodiol estradiol tab 3-0.02 mg</i>	\$0(1)	
<i>drospirenone-ethynodiol estradiol tab 3-0.03 mg</i>	\$0(1)	
<i>econtra ez TABS 1.5mg</i>	\$0(3)	NM; *
<i>econtra one-step TABS 1.5mg</i>	\$0(3)	NM; *
<i>elonest</i>	\$0(1)	
<i>ELLA TABS 30mg</i>	\$0(2)	
<i>eluryng</i>	\$0(1)	
<i>emoquette</i>	\$0(1)	
<i>empresse-28</i>	\$0(1)	
<i>enskyce</i>	\$0(1)	
<i>errin TABS .35mg</i>	\$0(1)	
<i>estarrylla</i>	\$0(1)	
<i>ethynodiol diacetate &amp; ethynodiol estradiol tab 1 mg-35 mcg</i>	\$0(1)	
<i>ethynodiol diacetate &amp; ethynodiol estradiol tab 1 mg-50 mcg</i>	\$0(1)	
<i>etonogestrel-ethynodiol va ring 0.120-0.015 mg/24hr</i>	\$0(1)	
<i>falmina</i>	\$0(1)	
<i>fayosim</i>	\$0(1)	
<i>femynor</i>	\$0(1)	
<i>hailey 1.5/30</i>	\$0(1)	
<i>hailey 24 fe</i>	\$0(1)	
<i>heather TABS .35mg</i>	\$0(1)	
<i>iclevia</i>	\$0(1)	
<i>incassia TABS .35mg</i>	\$0(1)	
<i>introvale</i>	\$0(1)	
<i>isibloom</i>	\$0(1)	
<i>jasmiel</i>	\$0(1)	
<i>jolessa</i>	\$0(1)	
<i>juleber</i>	\$0(1)	
<i>junel 1.5/30</i>	\$0(1)	
<i>junel 1/20</i>	\$0(1)	
<i>junel fe 1.5/30</i>	\$0(1)	
<i>junel fe 1/20</i>	\$0(1)	
<i>junel fe 24</i>	\$0(1)	
<i>kaitlib fe</i>	\$0(1)	
<i>kariva</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<i>kelnor 1/35</i>	\$0(1)	
<i>kelnor 1/50</i>	\$0(1)	
<i>kurvelo</i>	\$0(1)	
<i>larin 1.5/30</i>	\$0(1)	
<i>larin 1/20</i>	\$0(1)	
<i>larin 24 fe</i>	\$0(1)	
<i>larin fe 1.5/30</i>	\$0(1)	
<i>larin fe 1/20</i>	\$0(1)	
<i>larissia</i>	\$0(1)	
<i>layolis fe</i>	\$0(1)	
<i>leena</i>	\$0(1)	
<i>lessina</i>	\$0(1)	
<i>levonest</i>	\$0(1)	
<i>levonor-eth est tab 0.15-0.025/0.03 mg &amp; eth est 0.01 mg</i>	\$0(1)	
<i>levonorg-eth est tab 0.1-0.02mg(84) &amp; eth est tab 0.01mg(7)</i>	\$0(1)	
<i>levonorg-eth est tab 0.15-0.03mg(84) &amp; eth est tab 0.01mg(7)</i>	\$0(1)	
<i>levonorgestrel &amp; ethynodiol dihydrogen phosphate (91-day) tab 0.15-0.03 mg</i>	\$0(1)	
<i>levonorgestrel &amp; ethynodiol dihydrogen phosphate tab 0.1 mg-20 mcg</i>	\$0(1)	
<i>levonorgestrel &amp; ethynodiol dihydrogen phosphate tab 0.15 mg-30 mcg</i>	\$0(1)	
<i>levonorgestrel (emergency oc) TABS 1.5mg</i>	\$0(3)	NM; *
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	\$0(1)	
<i>levora 0.15/30-28</i>	\$0(1)	
<i>lillow</i>	\$0(1)	
<i>loestrin 1.5/30-21</i>	\$0(1)	
<i>loestrin 1/20-21</i>	\$0(1)	
<i>loestrin fe 1.5/30</i>	\$0(1)	
<i>loestrin fe 1/20</i>	\$0(1)	
<i>loryna</i>	\$0(1)	
<i>low-ogestrel</i>	\$0(1)	
<i>lutera</i>	\$0(1)	
<i>lyeq TABS .35mg</i>	\$0(1)	
<i>lyza TABS .35mg</i>	\$0(1)	
<i>marlissa</i>	\$0(1)	
<i>medroxyprogesterone acetate (contraceptive) SUSP 150mg/ml; SUSY 150mg/ml</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<i>mibelas 24 fe</i>	\$0(1)	
<i>microgestin 1.5/30</i>	\$0(1)	
<i>microgestin 1/20</i>	\$0(1)	
<i>microgestin fe 1.5/30</i>	\$0(1)	
<i>microgestin fe 1/20</i>	\$0(1)	
<i>mil</i>	\$0(1)	
<i>mono-linyah</i>	\$0(1)	
<i>my choice TABS 1.5mg</i>	\$0(3)	NM; *
<i>my way TABS 1.5mg</i>	\$0(3)	NM; *
<i>necon 0.5/35-28</i>	\$0(1)	
<i>new day TABS 1.5mg</i>	\$0(3)	NM; *
<i>nikki</i>	\$0(1)	
<i>nora-be TABS .35mg</i>	\$0(1)	
<i>norethindrone &amp; ethynodiol-Fe</i>	\$0(1)	
<i>chew tab 0.4 mg-35 mcg</i>		
<i>norethindrone &amp; ethynodiol-Fe</i>	\$0(1)	
<i>chew tab 0.8 mg-25 mcg</i>		
<i>norethindrone (contraceptive) TABS .35mg</i>	\$0(1)	
<i>norethindrone ace &amp; ethynodiol tab 1 mg-20 mcg</i>	\$0(1)	
<i>norethindrone ace &amp; ethynodiol tab 1.5 mg-30 mcg</i>	\$0(1)	
<i>norethindrone ace &amp; ethynodiol-Fe</i>	\$0(1)	
<i>tab 1 mg-20 mcg</i>		
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>	\$0(1)	
<i>norgestimate &amp; ethynodiol tab 0.25 mg-35 mcg</i>	\$0(1)	
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	\$0(1)	
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	\$0(1)	
<i>norlyroc TABS .35mg</i>	\$0(1)	
<i>nortrel 0.5/35 (28)</i>	\$0(1)	
<i>nortrel 1/35 (21)</i>	\$0(1)	
<i>nortrel 1/35 (28)</i>	\$0(1)	
<i>nortrel 7/7/7</i>	\$0(1)	
<i>nylia 7/7/7</i>	\$0(1)	
<i>nymyo</i>	\$0(1)	
<i>ocella</i>	\$0(1)	
<i>opcicon one-step TABS 1.5mg</i>	\$0(3)	NM; *
<i>option 2 TABS 1.5mg</i>	\$0(3)	NM; *
<i>orsythia</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<i>philith</i>	\$0(1)	
<i>pimtrea</i>	\$0(1)	
<i>pirmella 1/35</i>	\$0(1)	
PLAN B ONE-STEP TABS 1.5mg	\$0(3)	NM; *
<i>portia-28</i>	\$0(1)	
<i>previfem</i>	\$0(1)	
<i>reclipsen</i>	\$0(1)	
<i>rivelsa</i>	\$0(1)	
<i>setlakin</i>	\$0(1)	
<i>sharobel</i> TABS .35mg	\$0(1)	
<i>simliya</i>	\$0(1)	
<i>simpesse</i>	\$0(1)	
<i>sprintec 28</i>	\$0(1)	
<i>sronyx</i>	\$0(1)	
<i>syeda</i>	\$0(1)	
<i>take action</i> TABS 1.5mg	\$0(3)	NM; *
<i>tarina 24 fe</i>	\$0(1)	
<i>tarina fe 1/20 eq</i>	\$0(1)	
<i>tilia fe</i>	\$0(1)	
<i>tri-estarylla</i>	\$0(1)	
<i>tri-legest fe</i>	\$0(1)	
<i>tri-linyah</i>	\$0(1)	
<i>tri-lo-estarylla</i>	\$0(1)	
<i>tri-lo-marzia</i>	\$0(1)	
<i>tri-lo-mili</i>	\$0(1)	
<i>tri-lo-sprintec</i>	\$0(1)	
<i>tri-mili</i>	\$0(1)	
<i>tri-nymyo</i>	\$0(1)	
<i>tri-previfem</i>	\$0(1)	
<i>tri-sprintec</i>	\$0(1)	
<i>tri-vylibra</i>	\$0(1)	
<i>tri-vylibra lo</i>	\$0(1)	
<i>trivora-28</i>	\$0(1)	
<i>tydemy</i>	\$0(1)	
<i>velivet</i>	\$0(1)	
<i>vestura</i>	\$0(1)	
<i>vienna</i>	\$0(1)	
<i>viorele</i>	\$0(1)	
<i>vyfemla</i>	\$0(1)	
<i>vylibra</i>	\$0(1)	
<i>wera</i>	\$0(1)	
<i>wymzya fe</i>	\$0(1)	
<i>xulane</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<i>zafemy</i>	\$0(1)	
<i>zarah</i>	\$0(1)	
<i>zovia 1/35</i>	\$0(1)	
<i>zumandimine</i>	\$0(1)	
<b><i>ENDOMETRIOSIS</i></b>		
<i>danazol</i> CAPS 50mg, 100mg, 200mg	\$0(1)	
<i>SYNAREL</i> SOLN 2mg/ml	\$0(2)	NDS, NM
<b><i>ESTROGENS - DRUGS TO REGULATE FEMALE HORMONES</i></b>		
<i>amabelz</i>	\$0(2)	
<i>DELESTROGEN</i> OIL 10mg/ml	\$0(2)	
<i>dotti</i> PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr	\$0(2)	
<i>estradiol</i> PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr; PTWK .025mg/24hr, .05mg/24hr, .06mg/24hr, .075mg/24hr, .1mg/24hr, 37.5mcg/24hr; TABS .5mg, 1mg, 2mg	\$0(2)	
<i>estradiol &amp; norethindrone acetate tab</i> <i>0.5-0.1 mg</i>	\$0(2)	
<i>estradiol &amp; norethindrone acetate tab 1-</i> <i>0.5 mg</i>	\$0(2)	
<i>estradiol vaginal</i> CREA .1mg/gm; TABS 10mcg	\$0(1)	
<i>estradiol valerate</i> OIL 20mg/ml, 40mg/ml	\$0(1)	
<i>fyavolv tab 0.5mg-2.5mcg</i>	\$0(2)	
<i>fyavolv tab 1mg-5mcg</i>	\$0(2)	
<i>jinteli</i>	\$0(2)	
<i>lyllana</i> PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr	\$0(2)	
<i>mimvey</i>	\$0(2)	
<i>norethindrone acetate-ethynodiol estradiol</i> <i>tab 0.5 mg-2.5 mcg</i>	\$0(2)	
<i>norethindrone acetate-ethynodiol estradiol</i> <i>tab 1 mg-5 mcg</i>	\$0(2)	
<i>yuvafem</i> TABS 10mcg	\$0(1)	
<b><i>GLUCOCORTICOIDS - DRUGS TO TREAT INFLAMMATORY RESPONSE</i></b>		
<i>dexamethasone</i> ELIX .5mg/5ml; SOLN .5mg/5ml; TABS .5mg, .75mg, 1mg, 1.5mg, 2mg, 4mg, 6mg	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<u>DEXAMETHASONE INTENSOL CONC 1mg/ml</u>	\$0(2)	
<u>dexamethasone sodium phosphate SOLN 4mg/ml, 10mg/ml, 20mg/5ml, 100mg/10ml, 120mg/30ml</u>	\$0(1)	
<u>fludrocortisone acetate TABS .1mg</u>	\$0(1)	
<u>hydrocortisone TABS 5mg, 10mg, 20mg</u>	\$0(1)	
<u>methylprednisolone TABS 4mg, 8mg, 16mg, 32mg</u>	\$0(1)	B/D
<u>methylprednisolone TBPK 4mg</u>	\$0(1)	
<u>methylprednisolone acetate SUSP 40mg/ml, 80mg/ml</u>	\$0(1)	B/D
<u>methylprednisolone sod succ SOLR 40mg, 125mg, 1000mg</u>	\$0(1)	B/D
<u>prednisolone SOLN 15mg/5ml</u>	\$0(1)	B/D
<u>prednisolone sodium phosphate SOLN 5mg/5ml, 15mg/5ml, 25mg/5ml</u>	\$0(1)	B/D
<u>prednisone SOLN 5mg/5ml; TABS 1mg, 2.5mg, 5mg, 10mg, 20mg, 50mg</u>	\$0(1)	B/D
<u>prednisone TBPK 5mg, 10mg</u>	\$0(1)	
<u>PREDNISONE INTENSOL CONC 5mg/ml</u>	\$0(2)	B/D
<u>SOLU-CORTEF SOLR 100mg, 250mg, 500mg, 1000mg</u>	\$0(2)	

<b>GLUCOSE ELEVATING AGENTS - DRUGS TO TREAT LOW BLOOD SUGAR</b>		
<u>diazoxide SUSP 50mg/ml</u>	\$0(2)	NDS
<u>GVOKE HYPOOPEN 2-PACK SOAJ .5mg/0.1ml, 1mg/0.2ml</u>	\$0(2)	
<u>GVOKE PFS SOSY .5mg/0.1ml, 1mg/0.2ml</u>	\$0(2)	

<b>MISCELLANEOUS</b>		
<u>ALDURAZYME SOLN 2.9mg/5ml</u>	\$0(2)	NDS, NM, LA, PA
<u>cabergoline TABS .5mg</u>	\$0(1)	
<u>CARBAGLU TABS 200mg</u>	\$0(2)	NDS, NM, LA, PA
<u>CERDELGA CAPS 84mg</u>	\$0(2)	NDS, NM, PA
<u>CEREZYME SOLR 400unit</u>	\$0(2)	NDS, NM, LA, PA
<u>cinacalcet hcl TABS 30mg</u>	\$0(1)	B/D, QL (120 tabs / 30 days)
<u>cinacalcet hcl TABS 60mg</u>	\$0(2)	NDS, B/D, QL (60 tabs / 30 days)
<u>cinacalcet hcl TABS 90mg</u>	\$0(2)	NDS, B/D, QL (120 tabs / 30 days)
<u>CYSTADANE POW</u>	\$0(2)	NDS, NM, LA
<u>CYSTAGON CAPS 50mg, 150mg</u>	\$0(2)	NM, LA, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)</b>
<i>desmopressin acetate</i> SOLN 4mcg/ml	\$0(2)	NDS
<i>desmopressin acetate</i> TABS .1mg, .2mg	\$0(1)	
<i>desmopressin acetate spray</i> SOLN .01%	\$0(1)	
<i>desmopressin acetate spray</i> <i>refrigerated</i> SOLN .01%	\$0(1)	
FABRAZYME SOLR 5mg, 35mg	\$0(2)	NDS, NM, LA, PA
GENOTROPIN SOLR 5mg, 12mg	\$0(2)	NDS, NM, PA
GENOTROPIN MINIQUICK SOLR .2mg, .4mg, .6mg, .8mg, 1mg, 1.2mg, 1.4mg, 1.6mg, 1.8mg, 2mg	\$0(2)	NDS, NM, PA
INCRELEX SOLN 40mg/4ml	\$0(2)	NDS, NM, LA, PA
KORLYM TABS 300mg	\$0(2)	NDS, NM, LA, PA
<i>levocarnitine (metabolic modifiers)</i> SOLN 1gm/10ml; TABS 330mg	\$0(1)	B/D
LUMIZYME SOLR 50mg	\$0(2)	NDS, NM, LA, PA
LUPRON DEPOT-PED (1-MONTH KIT 7.5mg, 11.25mg, 15mg	\$0(2)	NDS, PA
LUPRON DEPOT-PED (3-MONTH KIT 11.25mg, 30mg	\$0(2)	NDS, PA
<i>miglustat</i> CAPS 100mg	\$0(2)	NDS, QL (90 caps / 30 days), NM, PA
NAGLAZYME SOLN 1mg/ml	\$0(2)	NDS, NM, LA, PA
<i>nitisinone</i> CAPS 2mg, 5mg, 10mg	\$0(2)	NDS, NM, PA
<i>octreotide acetate</i> SOLN 50mcg/ml, 100mcg/ml, 200mcg/ml	\$0(1)	NM, PA
<i>octreotide acetate</i> SOLN 500mcg/ml, 1000mcg/ml	\$0(2)	NDS, NM, PA
<i>raloxifene hcl</i> TABS 60mg	\$0(1)	
<i>sapropterin dihydrochloride</i> PACK 100mg, 500mg; TABS 100mg	\$0(2)	NDS, NM, PA
SIGNIFOR SOLN .3mg/ml, .6mg/ml, .9mg/ml	\$0(2)	NDS, NM, LA, PA
<i>sodium phenylbutyrate</i> POWD 3gm/tsp; TABS 500mg	\$0(2)	NDS, NM, PA
SOMATULINE DEPOT SOLN 60mg/0.2ml, 90mg/0.3ml, 120mg/0.5ml	\$0(2)	NDS, NM, PA
SOMAVERT SOLR 10mg, 15mg, 20mg, 25mg, 30mg	\$0(2)	NDS, NM, LA, PA
XENICAL CAPS 120mg	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
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***PHOSPHATE BINDER AGENTS - DRUGS TO REGULATE CALCIUM AND PHOSPHORUS LEVELS***

<i>calcium acetate (phosphate binder) CAPS 667mg</i>	\$0(1)	QL (360 caps / 30 days)
<i>calcium acetate (phosphate binder) TABS 667mg</i>	\$0(1)	QL (360 tabs / 30 days)
<i>sevelamer carbonate PACK 2.4gm</i>	\$0(1)	QL (180 packets / 30 days)
<i>sevelamer carbonate PACK .8gm</i>	\$0(2)	NDS, QL (540 packets / 30 days)
<i>sevelamer carbonate TABS 800mg</i>	\$0(1)	QL (540 tabs / 30 days)

***PROGESTINS - DRUGS TO REGULATE FEMALE HORMONES***

<i>medroxyprogesterone acetate TABS 2.5mg, 5mg, 10mg</i>	\$0(1)	
<i>megestrol acetate SUSP 40mg/ml</i>	\$0(2)	
<i>megestrol acetate (appetite) SUSP 625mg/5ml</i>	\$0(2)	PA
<i>norethindrone acetate TABS 5mg</i>	\$0(1)	

***THYROID AGENTS - DRUGS TO REGULATE THYROID LEVELS***

<i>euthyrox TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg</i>	\$0(1)
<i>levo-t TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg</i>	\$0(1)
<i>levothyroxine sodium TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg</i>	\$0(1)
<i>levoxyl TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg</i>	\$0(1)
<i>liothyronine sodium TABS 5mcg, 25mcg, 50mcg</i>	\$0(1)
<i>methimazole TABS 5mg, 10mg</i>	\$0(1)
<i>propylthiouracil TABS 50mg</i>	\$0(1)
<i>SYNTHROID TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg</i>	\$0(2)
<i>unithroid TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg</i>	\$0(1)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
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### **VITAMIN D ANALOGS**

<i>calcitriol</i> CAPS .25mcg, .5mcg; SOLN 1mcg/ml	\$0(1)	B/D
<i>paricalcitol</i> CAPS 1mcg, 2mcg, 4mcg	\$0(1)	B/D
RAYALDEE CPCR 30mcg	\$0(2)	NDS

### **GASTROINTESTINAL - DRUGS TO TREAT STOMACH AND INTESTINAL DISORDERS**

#### **ANTACIDS**

<i>acid gone</i>	\$0(3)	NM; *
<i>almacone double strength</i>	\$0(3)	NM; *
<i>alum &amp; mag hydroxide-simethicone susp 200-200-20 mg/5ml</i>	\$0(3)	NM; *
<i>alum &amp; mag hydroxide-simethicone susp 400-400-40 mg/5ml</i>	\$0(3)	NM; *
<i>alumina/magnesia/simethic</i>	\$0(3)	NM; *
<i>ALUMINUM HYDROXIDE SUSP 320mg/5ml</i>	\$0(3)	NM; *
<i>antacid CHEW 500mg</i>	\$0(3)	NM; *
<i>antacid anti-gas maximum</i>	\$0(3)	NM; *
<i>antacid calcium regular s CHEW 500mg</i>	\$0(3)	NM; *
<i>antacid extra strength CHEW 750mg</i>	\$0(3)	NM; *
<i>antacid fast relief</i>	\$0(3)	NM; *
<i>antacid maximum strength</i>	\$0(3)	NM; *
<i>antacid plus anti-gas fas</i>	\$0(3)	NM; *
<i>antacid plus anti-gas rel</i>	\$0(3)	NM; *
<i>antacid regular strength</i>	\$0(3)	NM; *
<i>antacid ultra strength CHEW 1000mg</i>	\$0(3)	NM; *
<i>cal-gest antacid CHEW 500mg</i>	\$0(3)	NM; *
<i>calcium antacid CHEW 500mg</i>	\$0(3)	NM; *
<i>calcium antacid extra str CHEW 750mg</i>	\$0(3)	NM; *
<i>GAVISCON SUS</i>	\$0(3)	NM; *
<i>GAVISCON SUS CHERRY</i>	\$0(3)	NM; *
<i>grp antacid &amp; anti-gas/re</i>	\$0(3)	NM; *
<i>grp antacid and anti-gas/</i>	\$0(3)	NM; *
<i>grp antacid anti-gas/maxi</i>	\$0(3)	NM; *
<i>grp antacid extra strengt CHEW 750mg</i>	\$0(3)	NM; *
<i>grp antacid/regular stren</i>	\$0(3)	NM; *
<i>grp foaming antacid</i>	\$0(3)	NM; *
<i>heartburn relief extra st</i>	\$0(3)	NM; *
<i>hm advanced antacid maxim</i>	\$0(3)	NM; *
<i>hm antacid</i>	\$0(3)	NM; *
<i>hm antacid anti-gas extra</i>	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<i>hm antacid extra strength CHEW 750mg</i>	\$0(3)	NM; *
<i>hm antacid regular streng 500mg</i>	\$0(3)	NM; *
<i>hm antacid/antigas</i>	\$0(3)	NM; *
<i>hm calcium antacid extra CHEW 750mg</i>	\$0(3)	NM; *
<i>MAG-AL LIQ</i>	\$0(3)	NM; *
<i>mag-al plus</i>	\$0(3)	NM; *
<i>mag-al plus xs</i>	\$0(3)	NM; *
<i>magnesium oxide TABS 400mg, 420mg</i>	\$0(3)	NM; *
<i>mi-acid</i>	\$0(3)	NM; *
<i>mintox maximum strength</i>	\$0(3)	NM; *
<i>qc antacid CHEW 500mg</i>	\$0(3)	NM; *
<i>qc antacid/anti-gas</i>	\$0(3)	NM; *
<i>qc antacid/anti-gas maxim</i>	\$0(3)	NM; *
<i>sm antacid CHEW 500mg</i>	\$0(3)	NM; *
<i>sm antacid advanced</i>	\$0(3)	NM; *
<i>sm antacid advanced maxi</i>	\$0(3)	NM; *
<i>sm antacid maximum streng</i>	\$0(3)	NM; *
<i>sm antacid/antigas</i>	\$0(3)	NM; *
<i>sm calcium antacid CHEW 500mg</i>	\$0(3)	NM; *
<i>sm calcium antacid extra CHEW 750mg</i>	\$0(3)	NM; *
<i>sodium bicarbonate (antacid) TABS 325mg, 650mg</i>	\$0(3)	NM; *
<i>TUMS CHEW 500mg</i>	\$0(3)	NM; *
<i>TUMS CHEWY BITES CHEW 750mg</i>	\$0(3)	NM; *
<i>TUMS CHEWY DELIGHTS CHEW 1177mg</i>	\$0(3)	NM; *
<i>TUMS E-X 750 CHEW 750mg</i>	\$0(3)	NM; *
<i>TUMS EXTRA STRENGTH 750 CHEW 750mg</i>	\$0(3)	NM; *
<i>tums smoothies CHEW 750mg</i>	\$0(3)	NM; *
<i>TUMS SMOOTHIES CHEW 750mg</i>	\$0(3)	NM; *
<i>TUMS ULTRA 1000 CHEW 1000mg</i>	\$0(3)	NM; *
<b>ANTI-DIARRHEAL</b>		
<i>anti-diarrheal CAPS 2mg; LIQD 1mg/7.5ml; TABS 2mg</i>	\$0(3)	NM; *
<i>bismatrol CHEW 262mg</i>	\$0(3)	NM; *
<i>bismuth subsalicylate CHEW 262mg</i>	\$0(3)	NM; *
<i>gnp anti-diarrheal CAPS 2mg; TABS 2mg</i>	\$0(3)	NM; *
<i>gnp k-pec SUSP 262mg/15ml</i>	\$0(3)	NM; *
<i>gnp loperamide hydrochlor LIQD 1mg/7.5ml</i>	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)</b>
<i>gnp pink bismuth</i> CHEW 262mg; TABS 262mg	\$0(3)	NM; *
<i>gnp stomach relief</i> SUSP 262mg/15ml	\$0(3)	NM; *
<i>goodsense anti-diarrheal</i> LIQD 1mg/7.5ml	\$0(3)	NM; *
<i>goodsense stomach relief</i> CHEW 262mg	\$0(3)	NM; *
<i>hm anti-diarrheal</i> CAPS 2mg; TABS 2mg	\$0(3)	NM; *
<i>hm stomach relief</i> CHEW 262mg; SUSP 262mg/15ml, 525mg/30ml	\$0(3)	NM; *
<i>hm stomach relief ultra</i> SUSP 525mg/15ml	\$0(3)	NM; *
<i>loperamide hcl</i> LIQD 1mg/7.5ml; SUSP 1mg/7.5ml	\$0(3)	NM; *
<b>LOPERAMIDE HYDROCHLORIDE</b> SOLN 1mg/7.5ml, 2mg/15ml	\$0(3)	NM; *
<i>peptic relief</i> CHEW 262mg	\$0(3)	NM; *
<b>PEPTO BISMOL</b> TABS 262mg	\$0(3)	NM; *
<b>PEPTO-BISMOL</b> CHEW 262mg	\$0(3)	NM; *
<i>qc anti-diarrheal</i> CAPS 2mg; TABS 2mg	\$0(3)	NM; *
<i>qc diarrhea relief</i> SUSP 262mg/15ml	\$0(3)	NM; *
<i>qc pink bismuth</i> CHEW 262mg	\$0(3)	NM; *
<i>sm anti-diarrheal</i> CAPS 2mg; LIQD 1mg/7.5ml; TABS 2mg	\$0(3)	NM; *
<i>sm stomach relief</i> CHEW 262mg; TABS 262mg	\$0(3)	NM; *
<i>stomach relief</i> CHEW 262mg; SUSP 525mg/15ml, 525mg/30ml	\$0(3)	NM; *
<i>stomach relief extra stre</i> SUSP 525mg/15ml	\$0(3)	NM; *
<i>stomach relief ultra</i> SUSP 525mg/15ml	\$0(3)	NM; *
<b>ANTIEMETICS - DRUGS FOR NAUSEA AND VOMITING</b>		
<i>aprepitant</i> CAPS 40mg, 80mg, 125mg	\$0(1)	B/D
<i>aprepitant capsule therapy pack 80 &amp; 125 mg</i>	\$0(1)	B/D
<i>compro</i> SUPP 25mg	\$0(1)	
<i>dronabinol</i> CAPS 2.5mg, 5mg, 10mg	\$0(1)	B/D, QL (60 caps / 30 days)
<i>gransetron hcl</i> SOLN 1mg/ml, 4mg/4ml	\$0(1)	
<i>gransetron hcl</i> TABS 1mg	\$0(1)	B/D
<i>meclizine hcl</i> TABS 12.5mg, 25mg	\$0(2)	
<i>metoclopramide hcl</i> SOLN 5mg/5ml, 5mg/ml; TABS 5mg, 10mg	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<u>ondansetron</u> TBDP 4mg, 8mg	\$0(1)	B/D
<u>ondansetron hcl</u> SOLN 4mg/2ml, 40mg/20ml	\$0(1)	
<u>ondansetron hcl</u> SOLN 4mg/5ml; TABS 4mg, 8mg, 24mg	\$0(1)	B/D
<u>prochlorperazine</u> SUPP 25mg	\$0(1)	
<u>prochlorperazine edisylate</u> SOLN 10mg/2ml	\$0(1)	
<u>prochlorperazine maleate</u> TABS 5mg, 10mg	\$0(1)	
<u>promethazine hcl</u> SOLN 25mg/ml, 50mg/ml; SYRP 6.25mg/5ml; TABS 12.5mg, 25mg, 50mg	\$0(2)	PA; PA if 70 years and older
<u>scopolamine</u> PT72 1mg/3days	\$0(2)	QL (10 patches / 30 days), PA; PA if 70 years and older

### **ANTISPASMODICS - DRUGS FOR STOMACH SPASMS**

<u>dicyclomine hcl</u> CAPS 10mg; SOLN 10mg/5ml; TABS 20mg	\$0(2)	
<u>glycopyrrolate</u> TABS 1mg, 2mg	\$0(1)	

### **H2-RECEPTOR ANTAGONISTS - DRUGS FOR ULCERS AND STOMACH ACID**

<u>acid reducer</u> TABS 10mg	\$0(3)	NM; *
<u>acid reducer maximum stre</u> TABS 20mg	\$0(3)	NM; *
<u>acid reducer original str</u> TABS 10mg	\$0(3)	NM; *
<u>famotidine</u> SOLN 20mg/2ml, 40mg/4ml, 200mg/20ml	\$0(1)	
<u>famotidine</u> SUSR 40mg/5ml	\$0(1)	QL (300 mL / 30 days)
<u>famotidine</u> TABS 10mg	\$0(3)	NM; *
<u>famotidine</u> TABS 20mg	\$0(1)	QL (120 tabs / 30 days)
<u>famotidine</u> TABS 40mg	\$0(1)	QL (60 tabs / 30 days)
<u>famotidine in nacl 0.9% iv soln</u> 20 mg/50ml	\$0(1)	
<u>famotidine maximum streng</u> TABS 20mg	\$0(3)	NM; *
<u>gnp acid reducer</u> TABS 10mg	\$0(3)	NM; *
<u>gnp acid reducer maximum</u> TABS 20mg	\$0(3)	NM; *
<u>gnp heartburn relief</u> TABS 200mg	\$0(3)	NM; *
<u>heartburn relief</u> TABS 10mg, 200mg	\$0(3)	NM; *
<u>heartburn relief maximum</u> TABS 20mg	\$0(3)	NM; *
<u>hm famotidine</u> TABS 10mg, 20mg	\$0(3)	NM; *
<u>nizatidine</u> CAPS 150mg, 300mg	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)</b>
<i>qc acid controller</i> TABS 10mg	\$0(3)	NM; *
<i>qc acid controller maximu</i> TABS 20mg	\$0(3)	NM; *
<i>sm acid reducer</i> TABS 10mg, 200mg	\$0(3)	NM; *
<i>sm acid reducer maximum s</i> TABS 20mg	\$0(3)	NM; *

### ***INFLAMMATORY BOWEL DISEASE***

<i>balsalazide disodium</i> CAPS 750mg	\$0(1)	
<i>budesonide</i> CPEP 3mg	\$0(1)	PA
<i>budesonide</i> TB24 9mg	\$0(2)	NDS, PA
<i>hydrocortisone (intrarectal)</i> ENEM 100mg/60ml	\$0(1)	
<i>mesalamine</i> CP24 .375gm	\$0(1)	QL (120 caps / 30 days)
<i>mesalamine</i> CPDR 400mg	\$0(1)	QL (180 caps / 30 days)
<i>mesalamine</i> ENEM 4gm; SUPP 1000mg	\$0(1)	
<i>mesalamine</i> TBEC 1.2gm	\$0(1)	QL (120 tabs / 30 days)
<i>mesalamine w/ cleanser</i> KIT 4gm	\$0(1)	
<i>sulfasalazine</i> TABS 500mg; TBEC 500mg	\$0(1)	

### ***LAXATIVES***

<i>bisacodyl</i> SUPP 10mg	\$0(3)	NM; *
<i>bisacodyl</i> ec TBEC 5mg	\$0(3)	NM; *
<i>COLACE</i> CAPS 100mg	\$0(3)	NM; *
<i>constulose</i> SOLN 10gm/15ml	\$0(1)	
<i>docu</i> LIQD 50mg/5ml	\$0(3)	NM; *
<i>docusate calcium</i> CAPS 240mg	\$0(3)	NM; *
<i>docusate sodium</i> CAPS 100mg, 250mg; LIQD 50mg/5ml	\$0(3)	NM; *
<i>dok</i> CAPS 100mg	\$0(3)	NM; *
<i>enema ready-to-use</i>	\$0(3)	NM; *
<i>enulose</i> SOLN 10gm/15ml	\$0(1)	
<i>FLEET ENE</i>	\$0(3)	NM; *
<i>FLEET ENE ENEMA</i>	\$0(3)	NM; *
<i>FLEET ENE PED</i>	\$0(3)	NM; *
<i>gavilyte-c</i>	\$0(1)	
<i>gavilyte-g</i>	\$0(1)	
<i>gavilyte-n/flavor pack</i>	\$0(1)	
<i>generlac</i> SOLN 10gm/15ml	\$0(1)	
<i>gentle laxative</i> SUPP 10mg; TBEC 5mg	\$0(3)	NM; *
<i>gnp clearlax</i> PACK 17gm	\$0(3)	NM; *
<i>gnp enema</i>	\$0(3)	NM; *
<i>gnp gentle laxative</i> TBEC 5mg	\$0(3)	NM; *
<i>gnp laxative</i> TBEC 5mg	\$0(3)	NM; *
<i>gnp natural fiber</i> POWD 48.57%	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)</b>
<i>gnp stool softener CAPS 100mg, 250mg; LIQD 50mg/5ml; SYRP 60mg/15ml</i>	\$0(3)	NM; *
<i>gnp womens gentle laxativ TBEC 5mg GOLYTELY SOL</i>	\$0(3) \$0(2)	NM; *
<i>hm enema saline laxative</i>	\$0(3)	NM; *
<i>hm fiber POWD 48.57%</i>	\$0(3)	NM; *
<i>hm laxative TBEC 5mg</i>	\$0(3)	NM; *
<i>hm stool softener CAPS 100mg</i>	\$0(3)	NM; *
<i>konsyl daily fiber POWD 28.3%</i>	\$0(3)	NM; *
<i>lactulose SOLN 10gm/15ml</i>	\$0(1)	
<i>lactulose (encephalopathy) SOLN 10gm/15ml</i>	\$0(1)	
<i>metamucil POWD 28.3%</i>	\$0(3)	NM; *
<i>NULYTELY SOL LMN/LIME</i>	\$0(2)	
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	\$0(1)	
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	\$0(1)	
<i>PLENUV SOL</i>	\$0(2)	
<i>polyethylene glycol 3350 PACK 17gm</i>	\$0(3)	NM; *
<i>qc enema</i>	\$0(3)	NM; *
<i>qc gentle laxative SUPP 10mg</i>	\$0(3)	NM; *
<i>qc natural vegetable POWD 95%</i>	\$0(3)	NM; *
<i>qc stool softener CAPS 100mg</i>	\$0(3)	NM; *
<i>silace LIQD 150mg/15ml; SYRP 60mg/15ml</i>	\$0(3)	NM; *
<i>sm enema</i>	\$0(3)	NM; *
<i>sm fiber POWD 58.6%</i>	\$0(3)	NM; *
<i>sm gentle laxative TBEC 5mg</i>	\$0(3)	NM; *
<i>sm laxative SUPP 10mg</i>	\$0(3)	NM; *
<i>sm stool softener CAPS 100mg</i>	\$0(3)	NM; *
<i>*sodium phosphates - enema***</i>	\$0(3)	NM; *
<i>stool softener CAPS 100mg</i>	\$0(3)	NM; *
<i>stool softener laxative CAPS 100mg</i>	\$0(3)	NM; *
<i>stool softener laxative e CAPS 250mg</i>	\$0(3)	NM; *
<i>SUPREP BOWEL SOL PREP KIT</i>	\$0(2)	
<i>womens laxative TBEC 5mg</i>	\$0(3)	NM; *
<b>MISCELLANEOUS</b>		
<i>acid reducer complete</i>	\$0(3)	NM; *
<i>alosetron hcl TABS 1mg</i>	\$0(2)	NDS, QL (60 tabs / 30 days), PA
<i>alosetron hcl TABS .5mg</i>	\$0(1)	QL (60 tabs / 30 days), PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
cromolyn sodium ( <i>mastocytosis</i> ) CONC 100mg/5ml	\$0(1)	
diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml	\$0(2)	
diphenoxylate w/ atropine tab 2.5- 0.025 mg	\$0(2)	
GATTEX KIT 5mg	\$0(2)	NDS, NM, LA, PA
LINZESS CAPS 72mcg, 145mcg, 290mcg	\$0(2)	QL (30 caps / 30 days)
loperamide hcl CAPS 2mg	\$0(1)	
misoprostol TABS 100mcg, 200mcg	\$0(1)	
MOVANTIK TABS 12.5mg	\$0(2)	QL (60 tabs / 30 days)
MOVANTIK TABS 25mg	\$0(2)	QL (30 tabs / 30 days)
RELISTOR SOLN 8mg/0.4ml, 12mg/0.6ml	\$0(2)	NDS, PA
sucralfate TABS 1gm	\$0(1)	
ursodiol CAPS 300mg; TABS 250mg, 500mg	\$0(1)	
XERMELO TABS 250mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, LA, PA
XIFAXAN TABS 550mg	\$0(2)	NDS, PA
<b>PANCREATIC ENZYMES</b>		
CREON CAP 3000UNIT	\$0(2)	
CREON CAP 6000UNIT	\$0(2)	
CREON CAP 12000UNT	\$0(2)	
CREON CAP 24000UNT	\$0(2)	
CREON CAP 36000UNT	\$0(2)	
ZENPEP CAP 3000UNIT	\$0(2)	
ZENPEP CAP 5000UNIT	\$0(2)	
ZENPEP CAP 10000UNT	\$0(2)	
ZENPEP CAP 15000UNT	\$0(2)	
ZENPEP CAP 20000UNT	\$0(2)	
ZENPEP CAP 25000	\$0(2)	
ZENPEP CAP 40000	\$0(2)	
<b>PROTON PUMP INHIBITORS - DRUGS FOR ULCERS AND STOMACH ACID</b>		
DEXILANT CPDR 30mg, 60mg	\$0(2)	QL (30 caps / 30 days)
esomeprazole magnesium CPDR 20mg, 40mg	\$0(1)	QL (30 caps / 30 days), ST
gnp lansoprazole CPDR 15mg	\$0(3)	NM; *
gnp omeprazole TBEC 20mg	\$0(3)	NM, PA; *
goodsense lansoprazole CPDR 15mg	\$0(3)	NM; *
hm lansoprazole CPDR 15mg	\$0(3)	NM; *

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<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)</b>
<i>hm omeprazole</i> TBEC 20mg	\$0(3)	NM, PA; *
<i>lansoprazole</i> CPDR 15mg	\$0(3)	NM; *
<i>lansoprazole</i> CPDR 15mg, 30mg	\$0(1)	QL (60 caps / 30 days)
<i>omeprazole</i> CPDR 10mg, 20mg, 40mg	\$0(1)	
<i>omeprazole</i> TBEC 20mg	\$0(3)	NM, PA; *
<i>pantoprazole sodium</i> SOLR 40mg; TBEC 20mg, 40mg	\$0(1)	
<i>PREVACID</i> 24HR CPDR 15mg	\$0(3)	NM; *
<i>qc lansoprazole</i> CPDR 15mg	\$0(3)	NM; *
<i>rabeprazole sodium</i> TBEC 20mg	\$0(1)	QL (30 tabs / 30 days)
<i>sm lansoprazole</i> CPDR 15mg	\$0(3)	NM; *
<i>sm omeprazole</i> TBEC 20mg	\$0(3)	NM, PA; *

## **GENITOURINARY - DRUGS TO TREAT GENITAL AND URINARY TRACT CONDITIONS**

### **BENIGN PROSTATIC HYPERPLASIA - DRUGS TO TREAT ENLARGED PROSTATE**

<i>alfuzosin hcl</i> TB24 10mg	\$0(1)	QL (30 tabs / 30 days)
<i>dutasteride</i> CAPS .5mg	\$0(1)	QL (30 caps / 30 days)
<i>dutasteride-tamsulosin hcl cap</i> 0.5-0.4 mg	\$0(1)	QL (30 caps / 30 days)
<i>finasteride</i> TABS 5mg	\$0(1)	
<i>tamsulosin hcl</i> CAPS .4mg	\$0(1)	

### **MISCELLANEOUS**

<i>acetic acid</i> SOLN .25%	\$0(1)	
<i>bethanechol chloride</i> TABS 5mg, 10mg, 25mg, 50mg	\$0(1)	
<i>potassium citrate (alkalinizer)</i> TBCR 15meq, 540mg, 1080mg	\$0(1)	

### **URINARY ANTISPASMODICS - DRUGS TO TREAT URINARY INCONTINENCE**

<i>MYRBETRIQ</i> TB24 25mg, 50mg	\$0(2)	QL (30 tabs / 30 days)
<i>oxybutynin chloride</i> SYRP 5mg/5ml; TABS 5mg	\$0(1)	
<i>oxybutynin chloride</i> TB24 5mg	\$0(1)	QL (30 tabs / 30 days)
<i>oxybutynin chloride</i> TB24 10mg, 15mg	\$0(1)	QL (60 tabs / 30 days)
<i>solifenacina succinate</i> TABS 5mg, 10mg	\$0(1)	QL (30 tabs / 30 days)
<i>tolterodine tartrate</i> CP24 2mg, 4mg	\$0(1)	QL (30 caps / 30 days), ST
<i>tolterodine tartrate</i> TABS 1mg, 2mg	\$0(1)	QL (60 tabs / 30 days), ST
<i>TOVIAZ</i> TB24 4mg, 8mg	\$0(2)	QL (30 tabs / 30 days)
<i>trospium chloride</i> TABS 20mg	\$0(1)	QL (60 tabs / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
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### **VAGINAL ANTI-INFECTIVES**

<i>clindamycin phosphate vaginal CREA 2%</i>	\$0(1)	
<i>clotrimazole 3 CREA 2%</i>	\$0(3)	NM; *
<i>clotrimazole vaginal CREA 1%</i>	\$0(3)	NM; *
<i>3 day vaginal CREA 2%</i>	\$0(3)	NM; *
<i>gnp clotrimazole 3 CREA 2%</i>	\$0(3)	NM; *
<i>gnp miconazole 1 combinat</i>	\$0(3)	NM; *
<i>gnp miconazole 3</i>	\$0(3)	NM; *
<i>gnp miconazole 7 CREA 2%</i>	\$0(3)	NM; *
<i>metronidazole vaginal GEL .75%</i>	\$0(1)	
<i>miconazole 1</i>	\$0(3)	NM; *
<i>miconazole 3 CREA 4%</i>	\$0(3)	NM; *
<i>miconazole 3 combination</i>	\$0(3)	NM; *
<i>miconazole 3 combo pack</i>	\$0(3)	NM; *
<i>miconazole 7 CREA 2%; SUPP 100mg</i>	\$0(3)	NM; *
<i>miconazole nitrate vaginal CREA 2%</i>	\$0(3)	NM; *
<i>miconazole nitrate vaginal supp 1200 mg &amp; 2% cream kit</i>	\$0(3)	NM; *
<i>qc 3 day vaginal cream CREA 4%</i>	\$0(3)	NM; *
<i>qc miconazole 7 CREA 2%</i>	\$0(3)	NM; *
<i>sm 3-day vaginal CREA 2%</i>	\$0(3)	NM; *
<i>sm clotrimazole vaginal CREA 1%</i>	\$0(3)	NM; *
<i>sm miconazole 3</i>	\$0(3)	NM; *
<i>sm miconazole 7 CREA 2%; SUPP 100mg</i>	\$0(3)	NM; *
<i>sm tioconazole-1 OINT 6.5%</i>	\$0(3)	NM; *
<i>terconazole vaginal CREA .4%, .8%; SUPP 80mg</i>	\$0(1)	
<i>tioconazole 1 OINT 6.5%</i>	\$0(3)	NM; *
<i>vandazole GEL .75%</i>	\$0(1)	

### **HEMATOLOGIC - DRUGS TO TREAT BLOOD DISORDERS**

#### **ANTICOAGULANTS - BLOOD THINNERS**

<i>ELIQUIS TABS 2.5mg</i>	\$0(2)	QL (60 tabs / 30 days)
<i>ELIQUIS TABS 5mg</i>	\$0(2)	QL (74 tabs / 30 days)
<i>ELIQUIS STARTER PACK TBPK 5mg</i>	\$0(2)	QL (74 tabs / 30 days)
<i>enoxaparin sodium SOLN 30mg/0.3ml, 40mg/0.4ml, 60mg/0.6ml, 80mg/0.8ml, 100mg/ml, 120mg/0.8ml, 150mg/ml, 300mg/3ml</i>	\$0(1)	
<i>fondaparinux sodium SOLN 2.5mg/0.5ml</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)</b>
<i>fondaparinux sodium</i> SOLN 5mg/0.4ml, 7.5mg/0.6ml, 10mg/0.8ml	\$0(2)	NDS
<i>HEP SOD/NACL INJ</i> 25000UNT	\$0(2)	
<i>heparin sodium (porcine)</i> SOLN 1000unit/ml, 5000unit/ml, 10000unit/ml, 20000unit/ml	\$0(1)	B/D
<i>heparin sodium (porcine) 100 unit/ml in d5w</i>	\$0(1)	
<i>heparin sodium (porcine)-dextrose iv sol 20000 unit/500ml-5%</i>	\$0(1)	
<i>heparin sodium (porcine)-dextrose iv sol 25000 unit/500ml-5%</i>	\$0(1)	
<i>HEPARIN/NACL INJ</i> 25000UNT	\$0(2)	
<i>jantoven</i> TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	\$0(1)	
<i>warfarin sodium</i> TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	\$0(1)	
<i>XARELTO</i> TABS 2.5mg	\$0(2)	QL (60 tabs / 30 days)
<i>XARELTO</i> TABS 10mg, 15mg, 20mg	\$0(2)	QL (30 tabs / 30 days)
<i>XARELTO</i> STAR TAB 15/20MG	\$0(2)	QL (51 tabs / 30 days)

#### ***HEMATOPOIETIC GROWTH FACTORS***

<i>PROCRIT</i> SOLN 2000unit/ml, 3000unit/ml, 4000unit/ml, 10000unit/ml	\$0(2)	PA
<i>PROCRIT</i> SOLN 20000unit/ml, 40000unit/ml	\$0(2)	NDS, PA
<i>ZARXIO</i> SOSY 300mcg/0.5ml, 480mcg/0.8ml	\$0(2)	NDS, PA

#### ***IRON***

<i>wee care</i> SUSP 15mg/1.25ml	\$0(3)	NM; *
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#### ***MISCELLANEOUS***

<i>anagrelide hcl</i> CAPS .5mg, 1mg	\$0(1)	
<i>BERINERT</i> KIT 500unit	\$0(2)	NDS, QL (24 boxes / 30 days), NM, LA, PA
<i>cilostazol</i> TABS 50mg, 100mg	\$0(1)	
<i>DOPTELET</i> TABS 20mg	\$0(2)	NDS, NM, LA, PA
<i>DROXIA</i> CAPS 200mg, 300mg, 400mg	\$0(2)	
<i>ENDARI</i> PACK 5gm	\$0(2)	NDS, NM, LA, PA
<i>HAEGARDA</i> SOLR 2000unit	\$0(2)	NDS, QL (30 vials / 30 days), NM, LA, PA
<i>HAEGARDA</i> SOLR 3000unit	\$0(2)	NDS, QL (20 vials / 30 days), NM, LA, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
<i>icatibant acetate</i> SOLN 30mg/3ml	\$0(2)	NDS, QL (9 syringes / 30 days), NM, PA
<i>pentoxifylline</i> TBCR 400mg	\$0(1)	
PROMACTA PACK 12.5mg	\$0(2)	NDS, QL (360 packets / 30 days), NM, LA, PA
PROMACTA PACK 25mg	\$0(2)	NDS, QL (180 packets / 30 days), NM, LA, PA
PROMACTA TABS 12.5mg, 25mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, LA, PA
PROMACTA TABS 50mg, 75mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, LA, PA
<i>sajazir</i> SOLN 30mg/3ml	\$0(2)	NDS, QL (9 syringes / 30 days), NM, PA
<i>tranexamic acid</i> SOLN 1000mg/10ml; TABS 650mg	\$0(1)	

### ***PLATELET AGGREGATION INHIBITORS***

<i>aspirin-dipyridamole cap er 12hr 25- 200 mg</i>	\$0(1)	
<i>BRILINTA TABS 60mg, 90mg</i>	\$0(2)	
<i>clopidogrel bisulfate TABS 75mg</i>	\$0(1)	
<i>dipyridamole TABS 25mg, 50mg, 75mg</i>	\$0(2)	PA; PA if 70 years and older
<i>prasugrel hcl TABS 5mg, 10mg</i>	\$0(1)	

### ***IMMUNOLOGIC AGENTS - DRUGS TO TREAT DISORDERS OF THE IMMUNE SYSTEM***

#### ***AUTOIMMUNE AGENTS***

<i>ENBREL</i> SOLN 25mg/0.5ml; SOLR 25mg	\$0(2)	NDS, QL (16 vials / 28 days), NM, PA
<i>ENBREL</i> SOSY 25mg/0.5ml	\$0(2)	NDS, QL (16 syringes / 28 days), NM, PA
<i>ENBREL</i> SOSY 50mg/ml	\$0(2)	NDS, QL (8 syringes / 28 days), NM, PA
<i>ENBREL MINI</i> SOCT 50mg/ml	\$0(2)	NDS, QL (8 cartridges / 28 days), NM, PA
<i>ENBREL SURECLICK</i> SOAJ 50mg/ml	\$0(2)	NDS, QL (8 pens / 28 days), NM, PA
<i>HUMIRA</i> PSKT 10mg/0.1ml, 20mg/0.2ml	\$0(2)	NDS, QL (2 syringes / 28 days), NM, PA
<i>HUMIRA</i> PSKT 40mg/0.4ml, 40mg/0.8ml	\$0(2)	NDS, QL (6 syringes / 28 days), NM, PA
<i>HUMIRA PEDIA INJ CROHNS</i>	\$0(2)	NDS, NM, PA
<i>HUMIRA PEDIATRIC CROHNS D</i> PSKT 80mg/0.8ml	\$0(2)	NDS, NM, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
HUMIRA PEN PNKT 40mg/0.4ml, 40mg/0.8ml	\$0(2)	NDS, QL (6 pens / 28 days), NM, PA
HUMIRA PEN PNKT 80mg/0.8ml	\$0(2)	NDS, QL (4 pens / 28 days), NM, PA
HUMIRA PEN KIT PS/UV	\$0(2)	NDS, NM, PA
HUMIRA PEN-CD/UC/HS START PNKT 40mg/0.8ml, 80mg/0.8ml	\$0(2)	NDS, NM, PA
HUMIRA PEN-PEDIATRIC UC S PNKT 80mg/0.8ml	\$0(2)	NDS, NM, PA
HUMIRA PEN-PS/UV STARTER PNKT 40mg/0.8ml	\$0(2)	NDS, NM, PA
REMICADE SOLR 100mg	\$0(2)	NDS, NM, PA
RENFLEXIS SOLR 100mg	\$0(2)	NDS, NM, LA, PA
RINVOQ TB24 15mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
SKYRIZI PSKT 75mg/0.83ml	\$0(2)	NDS, QL (7 kits / 365 days), NM, PA
SKYRIZI SOSY 150mg/ml	\$0(2)	NDS, QL (7 syringes / year), PA
SKYRIZI PEN SOAJ 150mg/ml	\$0(2)	NDS, QL (7 pens / year), PA
STELARA SOLN 45mg/0.5ml	\$0(2)	NDS, QL (2 vials / 28 days), NM, LA, PA
STELARA SOSY 45mg/0.5ml, 90mg/ml	\$0(2)	NDS, QL (1 syringe / 28 days), NM, PA
TALTZ SOAJ 80mg/ml; SOSY 80mg/ml	\$0(2)	NDS, QL (3 syringes / 28 days), NM, LA, PA
XELJANZ SOLN 1mg/ml	\$0(2)	NDS, QL (240 mL / 24 days), NM, PA
XELJANZ TABS 5mg, 10mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
XELJANZ XR TB24 11mg, 22mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA

**DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDs) - DRUGS TO TREAT RHEUMATOID ARTHRITIS**

hydroxychloroquine sulfate TABS 200mg	\$0(1)	
leflunomide TABS 10mg, 20mg	\$0(1)	QL (30 tabs / 30 days)
methotrexate sodium TABS 2.5mg	\$0(1)	
XATMEP SOLN 2.5mg/ml	\$0(2)	B/D

**IMMUNOGLOBULINS**

BIVIGAM SOLN 5gm/50ml	\$0(2)	NDS, NM, PA
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You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
FLEBOGAMMA DIF SOLN 2.5gm/50ml, 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 20gm/400ml	\$0(2)	NDS, NM, PA
GAMASTAN INJ	\$0(2)	B/D, NM
GAMMAGARD LIQUID SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 30gm/300ml	\$0(2)	NDS, NM, PA
GAMMAGARD S/D IGA LESS TH SOLR 5gm, 10gm	\$0(2)	NDS, NM, PA
GAMMAKED SOLN 1gm/10ml, 5gm/50ml, 10gm/100ml, 20gm/200ml	\$0(2)	NDS, NM, PA
GAMMAPLEX SOLN 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 20gm/400ml	\$0(2)	NDS, NM, PA
GAMUNEX-C SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 40gm/400ml	\$0(2)	NDS, NM, PA
OCTAGAM SOLN 1gm/20ml, 2gm/20ml, 2.5gm/50ml, 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 25gm/500ml, 30gm/300ml	\$0(2)	NDS, NM, PA
PANZYGA SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 30gm/300ml	\$0(2)	NDS, NM, PA
PRIVIGEN SOLN 5gm/50ml, 10gm/100ml, 20gm/200ml, 40gm/400ml	\$0(2)	NDS, NM, PA
<b>IMMUNOMODULATORS</b>		
ACTIMMUNE SOLN 2000000unit/0.5ml	\$0(2)	NDS, NM, LA, PA
ARCALYST SOLR 220mg	\$0(2)	NDS, NM, PA
INTRON A SOLN 10mu/ml, 6000000unit/ml; SOLR 50mu	\$0(2)	NDS, B/D, NM
INTRON A SOLR 10mu, 18mu	\$0(2)	B/D, NM
<b>IMMUNOSUPPRESSANTS</b>		
azathioprine TABS 50mg	\$0(1)	B/D
BENLYSTA SOAJ 200mg/ml; SOSY 200mg/ml	\$0(2)	NDS, QL (8 syringes / 28 days), NM, PA
BENLYSTA SOLR 120mg, 400mg	\$0(2)	NDS, NM, PA
cyclosporine CAPS 25mg, 100mg; SOLN 50mg/ml	\$0(1)	B/D
cyclosporine modified (for microemulsion) CAPS 25mg, 50mg, 100mg; SOLN 100mg/ml	\$0(1)	B/D

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
<i>everolimus (immunosuppressant) TABS .25mg, .5mg, .75mg</i>	\$0(2)	NDS, B/D
<i>gengraf CAPS 25mg, 100mg; SOLN 100mg/ml</i>	\$0(1)	B/D
<i>mycophenolate mofetil CAPS 250mg; TABS 500mg</i>	\$0(1)	B/D
<i>mycophenolate mofetil SUSR 200mg/ml</i>	\$0(2)	NDS, B/D
<i>mycophenolate sodium TBEC 180mg, 360mg</i>	\$0(1)	B/D
<i>NULOJIX SOLR 250mg</i>	\$0(2)	NDS, B/D
<i>PROGRAF PACK .2mg, 1mg</i>	\$0(2)	B/D
<i>REZUROCK TABS 200mg</i>	\$0(2)	NDS, LA, PA
<i>SANDIMMUNE SOLN 100mg/ml</i>	\$0(2)	B/D
<i>sirolimus SOLN 1mg/ml</i>	\$0(2)	NDS, B/D
<i>sirolimus TABS .5mg, 1mg, 2mg</i>	\$0(1)	B/D
<i>tacrolimus CAPS .5mg, 1mg, 5mg</i>	\$0(1)	B/D
<i>ZORTRESS TABS 1mg</i>	\$0(2)	NDS, B/D
<b>VACCINES</b>		
<i>ACTHIB INJ</i>	\$0(2)	
<i>ADACEL INJ</i>	\$0(2)	
<i>BCG VACCINE INJ</i>	\$0(2)	
<i>BEXSERO INJ</i>	\$0(2)	
<i>BOOSTRIX INJ</i>	\$0(2)	
<i>DAPTACEL INJ</i>	\$0(2)	
<i>DIP/TET PED INJ 25-5LFU</i>	\$0(2)	B/D
<i>ENGERIX-B SUSP 10mcg/0.5ml, 20mcg/ml</i>	\$0(2)	B/D
<i>GARDASIL 9 INJ</i>	\$0(2)	
<i>HAVRIX SUSP 720elu/0.5ml, 1440elu/ml</i>	\$0(2)	
<i>HIBERIX SOLR 10mcg</i>	\$0(2)	
<i>IMOVAX RABIES (H.D.C.V.) INJ 2.5unit/ml</i>	\$0(2)	B/D
<i>INFANRIX INJ</i>	\$0(2)	
<i>IPOP INJ INACTIVE</i>	\$0(2)	
<i>IXIARO INJ</i>	\$0(2)	
<i>KINRIX INJ</i>	\$0(2)	
<i>M-M-R II INJ</i>	\$0(2)	
<i>MENACTRA INJ</i>	\$0(2)	
<i>MENQUADFI INJ</i>	\$0(2)	
<i>MENVEO INJ</i>	\$0(2)	
<i>PEDIARIX INJ 0.5ML</i>	\$0(2)	
<i>PEDVAX HIB SUSP 7.5mcg/0.5ml</i>	\$0(2)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
PENTACEL INJ	\$0(2)	
PROQUAD INJ	\$0(2)	
QUADRACEL INJ	\$0(2)	
RABAVERT INJ	\$0(2)	B/D
RECOMBIVAX HB SUSP 5mcg/0.5ml, 10mcg/ml, 40mcg/ml	\$0(2)	B/D
ROTARIX SUS	\$0(2)	
ROTAQUE SOL	\$0(2)	
SHINGRIX SUSR 50mcg/0.5ml	\$0(2)	QL (2 vials per lifetime)
TDVAX INJ 2-2 LF	\$0(2)	B/D
TENIVAC INJ 5-2LF	\$0(2)	B/D
TRUMENBA INJ	\$0(2)	
TWINRIX INJ	\$0(2)	
TYPHIM VI SOLN 25mcg/0.5ml	\$0(2)	
VAQTA SUSP 25unit/0.5ml, 50unit/ml	\$0(2)	
VARIVAX INJ 1350pfu/0.5ml	\$0(2)	
YF-VAX INJ	\$0(2)	

### **NUTRITIONAL/SUPPLEMENTS - VITAMINS AND SUPPLEMENTS**

#### **ELECTROLYTES/MINERALS, INJECTABLE**

D2.5W/NACL INJ 0.45%	\$0(1)
D5W/LYTES INJ #48	\$0(2)
D10W/NACL INJ 0.2%	\$0(2)
dextrose 2.5% w/ sodium chloride 0.45%	\$0(1)
dextrose 5% in lactated ringers	\$0(1)
dextrose 5% w/ sodium chloride 0.2%	\$0(1)
dextrose 5% w/ sodium chloride 0.3%	\$0(1)
dextrose 5% w/ sodium chloride 0.9%	\$0(1)
dextrose 5% w/ sodium chloride 0.45%	\$0(1)
dextrose 5% w/ sodium chloride 0.225%	\$0(1)
dextrose 10% w/ sodium chloride 0.45%	\$0(1)
ISOLYTE-P INJ /D5W	\$0(2)
ISOLYTE-S INJ	\$0(2)
ISOLYTE-S INJ PH 7.4	\$0(2)
kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj	\$0(1)
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.2% inj	\$0(1)
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj	\$0(1)
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj	\$0(1)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>	\$0(1)	
<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i>	\$0(1)	
KCL 20 MEQ/L (0.15%) IN NACL 0.45% INJ	\$0(2)	
<i>kcl 30 meq/l (0.224%) in dextrose 5% &amp; nacl 0.45% inj</i>	\$0(1)	
<i>kcl 40 meq/l (0.3%) in dextrose 5% &amp; nacl 0.45% inj</i>	\$0(1)	
KCL 40 MEQ/L (0.3%) IN NACL 0.9% INJ	\$0(2)	
KCL/D5W/NACL INJ 0.3/0.9%	\$0(2)	
<i>lactated ringer's solution</i>	\$0(1)	
MAGNESIUM SULFATE SOLN 2gm/50ml, 4gm/100ml, 4gm/50ml, 20gm/500ml, 40gm/1000ml	\$0(2)	
<i>magnesium sulfate SOLN 2gm/50ml, 4gm/100ml, 4gm/50ml, 20gm/500ml, 40gm/1000ml, 50%</i>	\$0(2)	
<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i>	\$0(2)	
MG SO4/D5W INJ 10MG/ML	\$0(2)	
PLASMA-LYTE INJ -148	\$0(2)	
PLASMA-LYTE INJ -A	\$0(2)	
<i>potassium chloride SOLN 2meq/ml, 10meq/100ml, 20meq/100ml, 40meq/100ml</i>	\$0(1)	
POTASSIUM CHLORIDE SOLN 10meq/50ml, 20meq/50ml	\$0(2)	
<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i>	\$0(1)	
<i>sodium chloride SOLN .45%, .9%, 2.5meq/ml, 3%, 5%</i>	\$0(1)	
TPN ELECTROL INJ	\$0(2)	B/D
<b><i>ELECTROLYTES/MINERALS/VITAMINS, ORAL</i></b>		
<i>klor-con PACK 20meq</i>	\$0(1)	
<i>klor-con 8 TBCR 8meq</i>	\$0(1)	
<i>klor-con 10 TBCR 10meq</i>	\$0(1)	
<i>klor-con m10 TBCR 10meq</i>	\$0(1)	
<i>klor-con m15 TBCR 15meq</i>	\$0(1)	
<i>klor-con m20 TBCR 20meq</i>	\$0(1)	
<i>M-NATAL PLUS TAB</i>	\$0(2)	
<i>potassium chloride CPCR 8meq, 10meq; PACK 20meq; SOLN 10%, 20%; TBCR 8meq, 10meq, 20meq</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<i>potassium chloride microencapsulated crystals er TBCR 10meq, 15meq, 20meq</i>	\$0(1)	
PRENATAL TAB 27-1MG	\$0(2)	
PRENATAL TAB PLUS	\$0(2)	
PRENATAL VIT TAB LOW IRON	\$0(2)	
<i>sodium fluoride chew; tab; 1.1 (0.5 f) mg/ml soln</i>	\$0(1)	
TRICARE TAB PRENATAL	\$0(2)	
<b>IV NUTRITION</b>		
AMINOSYN-PF INJ 7%	\$0(2)	B/D
<i>chromic chloride SOLN 40mcg/10ml</i>	\$0(3)	NM; *
CLINIMIX INJ 4.25/D5W	\$0(2)	B/D
CLINIMIX INJ 4.25/D10	\$0(2)	B/D
CLINIMIX INJ 5%/D15W	\$0(2)	B/D
CLINIMIX INJ 5%/D20W	\$0(2)	B/D
CLINIMIX INJ 6/5	\$0(2)	B/D
CLINIMIX INJ 8/10	\$0(2)	B/D
CLINIMIX INJ 8/14	\$0(2)	B/D
<i>clinisol sf 15%</i>	\$0(1)	B/D
CLINOLIPID EMU 20%	\$0(2)	B/D
<i>cupric chloride SOLN .4mg/ml</i>	\$0(3)	NM; *
<i>dextrose SOLN 5%, 10%</i>	\$0(1)	
<i>dextrose SOLN 50%, 70%</i>	\$0(1)	B/D
FREAMINE HBC INJ 6.9%	\$0(2)	B/D
FREAMINE III INJ 10%	\$0(2)	B/D
<i>hepatamine</i>	\$0(2)	B/D
INTRALIPID EMUL 20gm/100ml, 30gm/100ml	\$0(2)	B/D
NUTRILIPID EMUL 20gm/100ml	\$0(2)	B/D
<i>plenamine</i>	\$0(1)	B/D
PREMASOL SOL 10%	\$0(2)	B/D
PROCALAMINE INJ 3%	\$0(2)	B/D
PROSOL INJ 20%	\$0(2)	B/D
TRAVASOL INJ 10%	\$0(2)	B/D
TROPHAMINE INJ 10%	\$0(2)	B/D
<b>MINERALS</b>		
<i>calcium 600+d</i>	\$0(3)	NM; *
<i>calcium carbonate TABS 600mg</i>	\$0(3)	NM; *
<i>calcium carbonate (antacid) SUSP 1250mg/5ml</i>	\$0(3)	NM; *
<i>calcium carbonate-vitamin d tab 600 mg-200 unit</i>	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
<i>calcium high potency</i> TABS 1500mg	\$0(3)	NM; *
<i>calcium high potency + vi</i>	\$0(3)	NM; *
K-PHOS TABS 500mg	\$0(3)	NM; *
<i>manganese chloride</i> SOLN .1mg/ml	\$0(3)	NM; *
SLOW-MAG TAB	\$0(3)	NM; *
<b>VITAMINS</b>		
BACMIN TAB	\$0(3)	NM; *
BP VIT 3 CAP	\$0(3)	NM; *
<i>cholecalciferol</i> CAPS 10000unit	\$0(3)	NM; *
<i>corvita</i>	\$0(3)	NM; *
<i>cyanocobalamin</i> SOLN 1000mcg/ml	\$0(3)	NM; *
<i>dialyvite</i>	\$0(3)	NM; *
DIALYVITE TAB 3000	\$0(3)	NM; *
DIALYVITE TAB 5000	\$0(3)	NM; *
DIALYVITE TAB SUPREM D	\$0(3)	NM; *
DIALYVITE/ TAB ZINC	\$0(3)	NM; *
DRISDOL CAPS 50000unit	\$0(3)	NM; *
ENLYTE CAP	\$0(3)	NM; *
<i>ergocalciferol</i> CAPS 1.25mg, 50000unit	\$0(3)	NM; *
<i>fabb</i>	\$0(3)	NM; *
FOLBIC TAB	\$0(3)	NM; *
<i>folic acid</i> SOLN 5mg/ml; TABS 1mg	\$0(3)	NM; *
FOLTRATE TAB	\$0(3)	NM; *
<i>hydroxocobalamin acetate</i> SOLN 1000mcg/ml	\$0(3)	NM; *
INFUVITE INJ	\$0(3)	NM; *
INFUVITE INJ ADULT	\$0(3)	NM; *
INFUVITE INJ PEDIATRI	\$0(3)	NM; *
M.V.I PEDIAT INJ	\$0(3)	NM; *
MEPHYTON TABS 5mg	\$0(3)	NM; *
<i>multi-vit/iron/fluoride</i>	\$0(3)	NM; *
<i>multivitamin with fluorid</i>	\$0(3)	NM; *
<i>multivitamin/fluoride</i>	\$0(3)	NM; *
<i>multivitamin/fluoride/iro</i>	\$0(3)	NM; *
<i>mvc-fluoride</i>	\$0(3)	NM; *
NASCOBAL SOLN 500mcg/0.1ml	\$0(3)	NM; *
NEPHPLEX RX TAB	\$0(3)	NM; *
<i>niacin</i> CPCR 500mg	\$0(3)	NM; *
<i>phytonadione</i> SOLN 1mg/0.5ml, 10mg/ml; TABS 5mg	\$0(3)	NM; *
<i>pyridoxine hcl</i> SOLN 100mg/ml	\$0(3)	NM; *
<i>renal caps</i>	\$0(3)	NM; *
<i>reno caps</i>	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)</b>
STROVITE FOR TAB	\$0(3)	NM; *
STROVITE ONE TAB	\$0(3)	NM; *
<i>thiamine hcl</i> SOLN 100mg/ml	\$0(3)	NM; *
<i>tri-vitamin/fluoride</i>	\$0(3)	NM; *
<i>triphrocaps</i>	\$0(3)	NM; *
<i>virt-caps</i>	\$0(3)	NM; *
<i>virt-gard</i>	\$0(3)	NM; *
VITAL-D RX TAB	\$0(3)	NM; *
<i>vitamins a/c/d/fluoride</i>	\$0(3)	NM; *
<i>westab mini</i>	\$0(3)	NM; *

### **OPHTHALMIC - DRUGS TO TREAT EYE CONDITIONS**

#### **ANTI-INFECTIVE/ANTI-INFLAMMATORY - DRUGS TO TREAT**

#### **INFECTIONS AND INFLAMMATION**

<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	\$0(1)
<i>BLEPHAMIDE OIN S.O.P.</i>	\$0(2)
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	\$0(1)
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	\$0(1)
<i>neomycin-polymyxin-hc ophth susp</i>	\$0(1)
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	\$0(1)
<i>TOBRADEX OIN 0.3-0.1%</i>	\$0(2)
<i>TOBRADEX ST SUS 0.3-0.05</i>	\$0(2)
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	\$0(1)
<i>ZYLET SUS 0.5-0.3%</i>	\$0(2)

#### **ANTI-INFECTIVES - DRUGS TO TREAT INFECTIONS**

<i>bacitracin (ophthalmic) OINT 500unit/gm</i>	\$0(1)
<i>bacitracin-polymyxin b ophth oint</i>	\$0(1)
<i>BESIVANCE SUSP .6%</i>	\$0(2)
<i>CILOXAN OINT .3%</i>	\$0(2)
<i>ciprofloxacin hcl (ophth) SOLN .3%</i>	\$0(1)
<i>erythromycin (ophth) OINT 5mg/gm</i>	\$0(1)
<i>gatifloxacin (ophth) SOLN .5%</i>	\$0(1)
<i>gentak OINT .3%</i>	\$0(1)
<i>gentamicin sulfate (ophth) SOLN .3%</i>	\$0(1)
<i>moxifloxacin hcl (ophth) SOLN .5%</i>	\$0(1)
<i>NATACYN SUSP 5%</i>	\$0(2)
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	\$0(1)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	\$0(1)	
<i>ofloxacin (ophth) SOLN .3%</i>	\$0(1)	
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	\$0(1)	
<i>sulfacetamide sodium (ophth) OINT 10%; SOLN 10%</i>	\$0(1)	
<i>tobramycin (ophth) SOLN .3%</i>	\$0(1)	
<i>trifluridine SOLN 1%</i>	\$0(1)	
<i>ZIRGAN GEL .15%</i>	\$0(2)	
<b>ANTI-INFLAMMATORIES - DRUGS TO TREAT INFLAMMATION</b>		
<i>ALREX SUSP .2%</i>	\$0(2)	
<i>bromfenac sodium (ophth) SOLN .09%</i>	\$0(1)	
<i>BROMSITE SOLN .075%</i>	\$0(2)	
<i>dexamethasone sodium phosphate (ophth) SOLN .1%</i>	\$0(1)	
<i>diclofenac sodium (ophth) SOLN .1%</i>	\$0(1)	
<i>DUREZOL EMUL .05%</i>	\$0(2)	
<i>FLAREX SUSP .1%</i>	\$0(2)	
<i>fluorometholone (ophth) SUSP .1%</i>	\$0(1)	
<i>flurbiprofen sodium SOLN .03%</i>	\$0(1)	
<i>ILEVRO SUSP .3%</i>	\$0(2)	
<i>ketorolac tromethamine (ophth) SOLN .4%, .5%</i>	\$0(1)	
<i>LOTEMAX OINT .5%</i>	\$0(2)	
<i>prednisolone acetate (ophth) SUSP 1%</i>	\$0(1)	
<i>PREDNISOLONE SODIUM PHOSP SOLN 1%</i>	\$0(2)	
<i>PROLENSA SOLN .07%</i>	\$0(2)	
<b>ANTIALLERGICS - DRUGS TO TREAT ALLERGIES</b>		
<i>alaway SOLN .025%</i>	\$0(3)	NM; *
<i>alaway childrens allergy SOLN .025%</i>	\$0(3)	NM; *
<i>azelastine hcl (ophth) SOLN .05%</i>	\$0(1)	
<i>bepotastine besilate SOLN 1.5%</i>	\$0(1)	
<i>BEPREVE SOLN 1.5%</i>	\$0(2)	
<i>cromolyn sodium (ophth) SOLN 4%</i>	\$0(1)	
<i>eye itch relief SOLN .025%</i>	\$0(3)	NM; *
<i>ketotifen fumarate (ophth) SOLN .025%</i>	\$0(3)	NM; *
<i>LASTACRAFT SOLN .25%</i>	\$0(2)	
<i>olopatadine hcl SOLN .1%</i>	\$0(1)	
<i>sm eye itch relief SOLN .025%</i>	\$0(3)	NM; *
<i>ZADITOR SOLN .025%</i>	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
ZERVIATE SOLN .24%	\$0(2)	
<b>ANTIGLAUCOMA - DRUGS TO TREAT GLAUCOMA</b>		
ALPHAGAN P SOLN .1%	\$0(2)	
<i>betaxolol hcl (ophth)</i> SOLN .5%	\$0(1)	
BETOPTIC-S SUSP .25%	\$0(2)	
<i>brimonidine tartrate</i> SOLN .15%, .2%	\$0(1)	
<i>brinzolamide</i> SUSP 1%	\$0(1)	
<i>carteolol hcl (ophth)</i> SOLN 1%	\$0(1)	
COMBIGAN SOLN 0.2/0.5%	\$0(2)	
<i>dorzolamide hcl</i> SOLN 2%	\$0(1)	
<i>dorzolamide hcl-timolol maleate ophth</i> <i>soln 22.3-6.8 mg/ml</i>	\$0(1)	
<i>latanoprost</i> SOLN .005%	\$0(1)	
<i>levobunolol hcl</i> SOLN .5%	\$0(1)	
LUMIGAN SOLN .01%	\$0(2)	
<i>pilocarpine hcl</i> SOLN 1%, 2%, 4%	\$0(1)	
RHOPRESSA SOLN .02%	\$0(2)	
SIMBRINZA SUS 1-0.2%	\$0(2)	
<i>timolol maleate (ophth)</i> SOLG .25%, .5%; SOLN .25%, .5%	\$0(1)	
<i>timolol maleate (ophth) once-daily</i> SOLN .5%	\$0(1)	
VYZULTA SOLN .024%	\$0(2)	
<b>MISCELLANEOUS</b>		
<i>artificial tears</i> SOLN 1.4%	\$0(3)	NM; *
ATROPINE SULFATE SOLN 1%	\$0(2)	
<i>carboxymethylcellulose sodium (ophth)</i> SOLN .5%	\$0(3)	NM; *
CYSTADROPS SOLN .37%	\$0(2)	NDS, NM, LA, PA
CYSTARAN SOLN .44%	\$0(2)	NDS, NM, LA, PA
GENTEAL SEVERE TEARS GEL .3%	\$0(3)	NM; *
<i>genteal tears mild</i>	\$0(3)	NM; *
<i>genteal tears night-time</i>	\$0(3)	NM; *
<i>gnp artificial tears</i>	\$0(3)	NM; *
<i>gnp lubricating plus eye</i> SOLN .5%	\$0(3)	NM; *
<i>goodsense lubricating plu</i> SOLN .5%	\$0(3)	NM; *
<i>hm lubricating plus</i> SOLN .5%	\$0(3)	NM; *
ISOPTO ATROPINE SOLN 1%	\$0(2)	
ISOPTO TEARS SOLN .5%	\$0(3)	NM; *
<i>lubricant eye drops</i> SOLN .5%	\$0(3)	NM; *
<i>lubricant eye nighttime</i>	\$0(3)	NM; *
<i>lubricating plus eye drop</i> SOLN .5%	\$0(3)	NM; *
<i>proparacaine hcl</i> SOLN .5%	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)</b>
refresh celluvisc GEL 1%	\$0(3)	NM; *
refresh laci-lube	\$0(3)	NM; *
REFRESH LIQUIGEL GEL 1%	\$0(3)	NM; *
refresh p.m.	\$0(3)	NM; *
REFRESH PLUS SOLN .5%	\$0(3)	NM; *
REFRESH TEARS SOLN .5%	\$0(3)	NM; *
RESTASIS EMUL .05%	\$0(2)	
RESTASIS MULTIDOSE EMUL .05%	\$0(2)	
sm lubricating plus SOLN .5%	\$0(3)	NM; *
systane nighttime	\$0(3)	NM; *
SYSTANE OVERNIGHT THERAPY GEL .3%	\$0(3)	NM; *

## **OTIC - DRUGS TO TREAT CONDITIONS OF THE EAR**

### **OTIC AGENTS**

acetic acid (otic) SOLN 2%	\$0(1)
ciprofloxacin-dexamethasone otic susp 0.3-0.1%	\$0(1)
flac OIL .01%	\$0(1)
fluocinolone acetonide (otic) OIL .01%	\$0(1)
neomycin-polymyxin-hc otic soln 1%	\$0(1)
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%	\$0(1)
ofloxacin (otic) SOLN .3%	\$0(1)

## **RESPIRATORY - DRUGS TO TREAT BREATHING DISORDERS**

### **ANTICHOLINERGIC/BETA AGONIST COMBINATIONS - DRUGS TO TREAT COPD**

ANORO ELLIPT AER 62.5-25	\$0(2)	QL (60 blisters / 30 days)
BEVESPI AER 9-4.8MCG	\$0(2)	QL (1 inhaler / 30 days)
BREZTRI AERO AER SPHERE	\$0(2)	QL (1 inhaler / 30 days)
BREZTRI AERO AER SPHERE (INSTITUTIONAL PACK)	\$0(2)	QL (4 inhalers / 28 days)
COMBIVENT AER 20-100	\$0(2)	QL (2 inhalers / 30 days)
ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml	\$0(1)	B/D
TRELEGY AER ELLIPTA 100-62.5-25 MCG	\$0(2)	QL (60 blisters / 30 days)
TRELEGY AER ELLIPTA 200-62.5-25 MCG	\$0(2)	QL (60 blisters / 30 days)

### **ANTICHOLINERGICS - DRUGS TO TREAT COPD**

ATROVENT HFA AERS 17mcg/act	\$0(2)	QL (2 inhalers / 30 days)
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You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
INCRUSE ELLIPTA AEPB 62.5mcg/inh	\$0(2)	QL (30 blisters / 30 days)
<i>ipratropium bromide</i> SOLN .02%	\$0(1)	B/D
<i>ipratropium bromide (nasal)</i> SOLN .03%, .06%	\$0(1)	
<b>ANTIHISTAMINES - DRUGS TO TREAT ALLERGIES</b>		
AHIST TABS 25mg	\$0(3)	NM; *
ALA-HIST IR TABS 2mg	\$0(3)	NM; *
<i>alavert</i> TBDP 10mg	\$0(3)	NM; *
<i>all day allergy</i> TABS 10mg	\$0(3)	NM; *
<i>all day allergy childrens</i> SOLN 5mg/5ml	\$0(3)	NM; *
<i>all-day allergy childrens</i> SOLN 5mg/5ml	\$0(3)	NM; *
<i>aller-chlor</i> TABS 4mg	\$0(3)	NM; *
<i>aller-ease</i> TABS 60mg	\$0(3)	NM; *
<i>allergy</i> TABS 4mg	\$0(3)	NM; *
<i>allergy childrens</i> LIQD 12.5mg/5ml; SYRP 5mg/5ml	\$0(3)	NM; *
<i>allergy relief</i> CAPS 25mg; TABS 4mg, 10mg, 25mg, 180mg	\$0(3)	NM; *
<i>allergy relief 24hr</i> TABS 180mg	\$0(3)	NM; *
<i>allergy relief childrens</i> LIQD 12.5mg/5ml; SOLN 1mg/ml, 5mg/5ml	\$0(3)	NM; *
<i>allergy relief/indoor/out</i> TABS 10mg	\$0(3)	NM; *
<i>allergy-time</i> TABS 4mg	\$0(3)	NM; *
<i>azelastine hcl</i> SOLN .1%, .15%	\$0(1)	
<i>banophen</i> CAPS 25mg, 50mg; TABS 25mg	\$0(3)	NM; *
<i>cetirizine hcl</i> CHEW 5mg, 10mg; TABS 5mg, 10mg	\$0(3)	NM; *
<i>cetirizine hcl</i> SOLN 1mg/ml	\$0(1)	
<i>cetirizine hcl allergy ch</i> SOLN 5mg/5ml	\$0(3)	NM; *
<i>cetirizine hcl childrens</i> CHEW 5mg, 10mg; SOLN 1mg/ml, 5mg/5ml	\$0(3)	NM; *
<i>cetirizine hydrochloride</i> SOLN 5mg/5ml	\$0(3)	NM; *
<i>childrens loratadine</i> SOLN 5mg/5ml; SYRP 5mg/5ml	\$0(3)	NM; *
<i>chlorpheniramine maleate</i> TABS 4mg	\$0(3)	NM; *
<i>complete allergy medicine</i> CAPS 25mg	\$0(3)	NM; *
<i>cyproheptadine hcl</i> SYRP 2mg/5ml; TABS 4mg	\$0(2)	PA; PA if 70 years and older
<i>diphenhist</i> CAPS 25mg	\$0(3)	NM; *
<i>diphenhydramine hcl</i> CAPS 25mg, 50mg; LIQD 12.5mg/5ml; TABS 25mg	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
diphenhydramine hcl SOLN 50mg/ml	\$0(1)	
ed chlorped jr SYRP 2mg/5ml	\$0(3)	NM; *
fexofenadine hcl TABS 60mg, 180mg	\$0(3)	NM; *
grp all day allergy TABS 10mg	\$0(3)	NM; *
grp all day allergy child SOLN 1mg/ml, 5mg/5ml	\$0(3)	NM; *
grp allergy CAPS 25mg; TABS 25mg	\$0(3)	NM; *
grp allergy antihistamine LIQD 50mg/20ml	\$0(3)	NM; *
grp allergy relief CAPS 25mg; TABS 4mg	\$0(3)	NM; *
grp childrens allergy LIQD 12.5mg/5ml	\$0(3)	NM; *
grp loratadine SYRP 5mg/5ml; TABS 10mg	\$0(3)	NM; *
grp loratadine childrens SOLN 5mg/5ml	\$0(3)	NM; *
goodsense all day allergy SOLN 5mg/5ml; TABS 10mg	\$0(3)	NM; *
goodsense aller-ease TABS 180mg	\$0(3)	NM; *
goodsense allergy relief TABS 4mg, 10mg	\$0(3)	NM; *
HISTEX SYRP 2.5mg/5ml	\$0(3)	NM; *
HISTEX PD LIQD .938mg/ml	\$0(3)	NM; *
hm all day allergy childr SOLN 5mg/5ml	\$0(3)	NM; *
hm allergy relief CAPS 25mg; TABS 4mg, 25mg	\$0(3)	NM; *
hm allergy relief childre LIQD 12.5mg/5ml	\$0(3)	NM; *
hm cetirizine hcl childre SOLN 5mg/5ml	\$0(3)	NM; *
hm cetirizine hydrochlori TABS 10mg	\$0(3)	NM; *
hm fexofenadine hydrochlo TABS 60mg, 180mg	\$0(3)	NM; *
hm loratadine TABS 10mg	\$0(3)	NM; *
hm loratadine childrens SYRP 5mg/5ml	\$0(3)	NM; *
24hr allergy relief TABS 180mg	\$0(3)	NM; *
hydroxyzine hcl SOLN 25mg/ml, 50mg/ml; SYRP 10mg/5ml; TABS 10mg, 25mg, 50mg	\$0(2)	PA; PA if 70 years and older
hydroxyzine pamoate CAPS 25mg, 50mg	\$0(2)	PA; PA if 70 years and older
levocetirizine dihydrochloride SOLN 2.5mg/5ml; TABS 5mg	\$0(1)	
loratadine TABS 10mg	\$0(3)	NM; *
loratadine childrens SYRP 5mg/5ml	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)</b>
<i>m-dryl</i> LIQD 12.5mg/5ml	\$0(3)	NM; *
<i>pediaclear pd childrens</i> LIQD .625mg/ml	\$0(3)	NM; *
PEDIAVENT SYRP 2mg/5ml	\$0(3)	NM; *
<i>pharbedryl</i> CAPS 25mg, 50mg	\$0(3)	NM; *
<i>qc all day allergy</i> TABS 10mg	\$0(3)	NM; *
<i>qc childrens allergy</i> SOLN 5mg/5ml	\$0(3)	NM; *
<i>qc chlor-pheniramine</i> TABS 4mg	\$0(3)	NM; *
<i>qc complete allergy medic</i> TABS 25mg	\$0(3)	NM; *
<i>qc fexofenadine hydrochlo</i> TABS 180mg	\$0(3)	NM; *
<i>qc loratadine allergy rel</i> TABS 10mg	\$0(3)	NM; *
<i>siladryl</i> allergy LIQD 12.5mg/5ml	\$0(3)	NM; *
<i>sm all day allergy</i> TABS 10mg	\$0(3)	NM; *
<i>sm all day allergy childr</i> SOLN 5mg/5ml	\$0(3)	NM; *
<i>sm allergy 4 hour</i> TABS 4mg	\$0(3)	NM; *
<i>sm allergy childrens</i> SYRP 5mg/5ml	\$0(3)	NM; *
<i>sm allergy relief</i> LIQD 12.5mg/5ml; TABS 25mg	\$0(3)	NM; *
<i>sm fexofenadine hydrochlo</i> TABS 180mg	\$0(3)	NM; *
<i>sm loratadine</i> SYRP 5mg/5ml; TABS 10mg	\$0(3)	NM; *
<i>triprolidine hcl</i> LIQD .938mg/ml	\$0(3)	NM; *
TRIPROLIDINE HYDROCHLORID LIQD 2.5mg/5ml	\$0(3)	NM; *

#### **BETA AGONISTS - DRUGS TO TREAT ASTHMA AND COPD**

<i>albuterol sulfate</i> AERS 108mcg/act	\$0(1)	QL (2 inhalers / 30 days); (generic of Proair HFA)
<i>albuterol sulfate</i> AERS 108mcg/act	\$0(1)	QL (2 inhalers / 30 days); (generic of Proventil HFA)
<i>albuterol sulfate</i> AERS 108mcg/act	\$0(1)	QL (2 inhalers / 30 days); (generic of Ventolin HFA)
<i>albuterol sulfate</i> NEBU .083%, .63mg/3ml, 1.25mg/3ml, 2.5mg/0.5ml	\$0(1)	B/D
<i>albuterol sulfate</i> SYRP 2mg/5ml; TABS 2mg, 4mg	\$0(1)	
<i>levalbuterol hcl</i> NEBU .31mg/3ml, .63mg/3ml, 1.25mg/0.5ml, 1.25mg/3ml	\$0(1)	B/D

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
levalbuterol tartrate AERO 45mcg/act	\$0(1)	QL (2 inhalers / 30 days)
SEREVENT DISKUS AEPB 50mcg/dose	\$0(2)	QL (60 inhalations / 30 days)
terbutaline sulfate TABS 2.5mg, 5mg	\$0(1)	
VENTOLIN HFA AERS 108mcg/act	\$0(2)	QL (2 inhalers / 30 days)
VENTOLIN HFA (INSTITUTIONAL PACK) AERS 108mcg/act	\$0(2)	QL (6 inhalers / 30 days)
<b>LEUKOTRIENE MODULATORS</b>		
montelukast sodium CHEW 4mg, 5mg; PACK 4mg; TABS 10mg	\$0(1)	
zafirlukast TABS 10mg, 20mg	\$0(1)	
<b>MISCELLANEOUS</b>		
acetylcysteine SOLN 10%, 20%	\$0(1)	B/D
ARALAST NP SOLR 500mg, 1000mg	\$0(2)	NDS, NM, LA, PA
cromolyn sodium NEBU 20mg/2ml	\$0(1)	B/D
cromolyn sodium (nasal) AERS 5.2mg/act	\$0(3)	NM; *
DALIRESP TABS 250mcg, 500mcg	\$0(2)	
epinephrine (anaphylaxis) SOAJ .15mg/.3ml, .3mg/.3ml	\$0(1)	(generic of EpiPen)
epinephrine (anaphylaxis) SOAJ .15mg/.15ml, .3mg/.3ml	\$0(1)	(generic of Adrenaclick)
ESBRIET CAPS 267mg	\$0(2)	NDS, QL (270 caps / 30 days), NM, PA
ESBRIET TABS 267mg	\$0(2)	NDS, QL (270 tabs / 30 days), NM, PA
ESBRIET TABS 801mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, PA
FASENRA SOSY 30mg/ml	\$0(2)	NDS, NM, LA, PA
FASENRA PEN SOAJ 30mg/ml	\$0(2)	NDS, NM, LA, PA
KALYDECO PACK 25mg, 50mg, 75mg	\$0(2)	NDS, QL (56 packs / 28 days), NM, PA
KALYDECO TABS 150mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
OFEV CAPS 100mg, 150mg	\$0(2)	NDS, QL (60 caps / 30 days), NM, PA
ORKAMBI GRA 100-125	\$0(2)	NDS, QL (56 packs / 28 days), NM, PA
ORKAMBI GRA 150-188	\$0(2)	NDS, QL (56 packs / 28 days), NM, PA
ORKAMBI TAB 100-125	\$0(2)	NDS, QL (112 tabs / 28 days), NM, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
ORKAMBI TAB 200-125	\$0(2)	NDS, QL (112 tabs / 28 days), NM, PA
PROLASTIN-C SOLN 1000mg/20ml; SOLR 1000mg	\$0(2)	NDS, NM, LA, PA
PULMOZYME SOLN 2.5mg/2.5ml	\$0(2)	NDS, NM, PA
SYMDEKO TAB 50-75MG	\$0(2)	NDS, QL (56 tabs / 28 days), NM, LA, PA
SYMDEKO TAB 100-150	\$0(2)	NDS, QL (56 tabs / 28 days), NM, LA, PA
SYMJEPI SOSY .15mg/0.3ml, .3mg/0.3ml	\$0(2)	
THEO-24 CP24 100mg, 200mg, 300mg, 400mg	\$0(2)	
<i>theophylline</i> SOLN 80mg/15ml; TB12 300mg, 450mg; TB24 400mg, 600mg	\$0(1)	
TRIKAFTA TAB 50-25-37.5MG & 75MG	\$0(2)	NDS, QL (84 tabs / 28 days), LA, PA
TRIKAFTA TAB 100-50-75MG & 150MG	\$0(2)	NDS, QL (84 tabs / 28 days), NM, LA, PA
XOLAIR SOLR 150mg; SOSY 75mg/0.5ml, 150mg/ml	\$0(2)	NDS, NM, LA, PA
ZEMAIRA SOLR 1000mg	\$0(2)	NDS, NM, LA, PA

#### ***NASAL STEROIDS - DRUGS TO TREAT ALLERGIES***

<i>allergy relief</i> SUSP 50mcg/act	\$0(3)	NM; *
<i>budesonide (nasal)</i> SUSP 32mcg/act	\$0(3)	NM; *
FLONASE ALLERGY RELIEF SUSP 50mcg/act	\$0(3)	NM; *
FLONASE ALLERGY RELIEF CH SUSP 50mcg/act	\$0(3)	NM; *
FLONASE SENSI MIST SUSP 27.5mcg/spray	\$0(3)	NM; *
<i>flunisolide (nasal)</i> SOLN .025%	\$0(1)	QL (3 bottles / 30 days)
<i>fluticasone propionate (nasal)</i> SUSP 50mcg/act	\$0(1)	QL (1 bottle / 30 days)
<i>fluticasone propionate (nasal)</i> SUSP 50mcg/act	\$0(3)	NM; *
<i>gnp budesonide nasal spra</i> SUSP 32mcg/act	\$0(3)	NM; *
<i>gnp fluticasone propionat</i> SUSP 50mcg/act	\$0(3)	NM; *
<i>hm allergy relief nasal s</i> SUSP 50mcg/act	\$0(3)	NM; *
<i>qc allergy relief</i> SUSP 50mcg/act	\$0(3)	NM; *
<i>sm allergy relief nasal s</i> SUSP 50mcg/act	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
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### **STEROID INHALANTS - DRUGS TO TREAT ASTHMA**

ARNUITY ELLIPTA AEPB 50mcg/act, 100mcg/act, 200mcg/act	\$0(2)	QL (30 inhalations / 30 days)
budesonide (inhalation) SUSP .25mg/2ml, .5mg/2ml	\$0(1)	B/D
FLOVENT DISKUS AEPB 50mcg/blist	\$0(2)	QL (180 inhalations / 30 days)
FLOVENT DISKUS AEPB 100mcg/blist, 250mcg/blist	\$0(2)	QL (240 inhalations / 30 days)
FLOVENT HFA AERO 44mcg/act, 110mcg/act, 220mcg/act	\$0(2)	QL (2 inhalers / 30 days)
PULMICORT FLEXHALER AEPB 90mcg/act	\$0(2)	QL (3 inhalers / 30 days)
PULMICORT FLEXHALER AEPB 180mcg/act	\$0(2)	QL (2 inhalers / 30 days)

### **STEROID/BETA-AGONIST COMBINATIONS - DRUGS TO TREAT ASTHMA AND COPD**

ADVAIR DISKU AER 100/50	\$0(2)	QL (60 inhalations / 30 days)
ADVAIR DISKU AER 250/50	\$0(2)	QL (60 inhalations / 30 days)
ADVAIR DISKU AER 500/50	\$0(2)	QL (60 inhalations / 30 days)
ADVAIR HFA AER 45/21	\$0(2)	QL (1 inhaler / 30 days)
ADVAIR HFA AER 115/21	\$0(2)	QL (1 inhaler / 30 days)
ADVAIR HFA AER 230/21	\$0(2)	QL (1 inhaler / 30 days)
BREO ELLIPTA INH 100-25	\$0(2)	QL (60 blisters / 30 days)
BREO ELLIPTA INH 200-25	\$0(2)	QL (60 blisters / 30 days)
SYMBICORT AER 80-4.5	\$0(2)	QL (1 inhaler / 30 days)
SYMBICORT AER 160-4.5	\$0(2)	QL (1 inhaler / 30 days)

### **TOPICAL - DRUGS TO TREAT EAR AND SKIN CONDITIONS**

#### **DERMATOLOGY, ACNE**

accutane CAPS 20mg, 30mg, 40mg	\$0(1)	PA
acne medication 2.5 GEL 2.5%	\$0(3)	NM; *
acne medication 5 GEL 5%	\$0(3)	NM; *
acne medication 10 GEL 10%	\$0(3)	NM; *
ACNE MEDICATION 10 LOTN 10%	\$0(3)	NM; *
adapalene GEL .1%	\$0(3)	NM; *
amnesteem CAPS 10mg, 20mg, 40mg	\$0(1)	PA
avita CREA .025%; GEL .025%	\$0(1)	QL (45 gm / 30 days), PA
benzoyl peroxide GEL 2.5%, 5%, 10%	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)</b>
<i>benzoyl peroxide wash LIQD 5%</i>	\$0(3)	NM; *
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	\$0(1)	QL (46.6 gm / 30 days)
<i>claravis CAPS 10mg, 20mg, 30mg, 40mg</i>	\$0(1)	PA
<i>clindamycin phosphate (topical) GEL 1%</i>	\$0(1)	QL (75 gm / 30 days)
<i>clindamycin phosphate (topical) LOTN 1%; SOLN 1%</i>	\$0(1)	QL (60 mL / 30 days)
<i>DIFFERIN GEL .1%</i>	\$0(3)	NM; *
<i>ery PADS 2%</i>	\$0(1)	QL (60 pledges / 30 days)
<i>erythromycin (acne aid) SOLN 2%</i>	\$0(1)	QL (60 mL / 30 days)
<i>isotretinoin CAPS 10mg, 20mg, 30mg, 40mg</i>	\$0(1)	PA
<i>myorisan CAPS 10mg, 20mg, 30mg, 40mg</i>	\$0(1)	PA
<i>sulfacetamide sodium (acne) LOTN 10%</i>	\$0(1)	QL (118 mL / 30 days)
<i>tretinoiin CREA .025%, .05%, .1%; GEL .01%, .025%</i>	\$0(1)	QL (45 gm / 30 days), PA
<i>zenatane CAPS 10mg, 20mg, 30mg, 40mg</i>	\$0(1)	PA
<b>DERMATOLOGY, ANTIBIOTICS</b>		
<i>first aid antibiotic</i>	\$0(3)	NM; *
<i>gentamicin sulfate (topical) CREA .1%; OINT .1%</i>	\$0(1)	QL (30 gm / 30 days)
<i>gnp triple antibiotic</i>	\$0(3)	NM; *
<i>hm triple antibiotic</i>	\$0(3)	NM; *
<i>mupirocin OINT 2%</i>	\$0(1)	QL (220 gm / 30 days)
<i>silver sulfadiazine CREA 1%</i>	\$0(1)	
<i>sm triple antibiotic orig</i>	\$0(3)	NM; *
<i>ssd CREA 1%</i>	\$0(1)	
<i>SULFAMYLYON CREA 85mg/gm</i>	\$0(2)	QL (453.6 gm / 30 days)
<i>triple antibiotic</i>	\$0(3)	NM; *
<b>DERMATOLOGY, ANTIFUNGALS</b>		
<i>anti-fungal powder POWD 1%</i>	\$0(3)	NM; *
<i>antifungal CREA 1%, 2%</i>	\$0(3)	NM; *
<i>baza antifungal CREA 2%</i>	\$0(3)	NM; *
<i>carrington antifungal CREA 2%</i>	\$0(3)	NM; *
<i>ciclopirox olamine CREA .77%</i>	\$0(1)	QL (90 gm / 30 days)
<i>ciclopirox olamine SUSP .77%</i>	\$0(1)	QL (60 mL / 30 days)
<i>clotrimazole (topical) CREA 1%</i>	\$0(1)	QL (45 gm / 30 days)
<i>clotrimazole (topical) CREA 1%</i>	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)</b>
<i>clotrimazole (topical)</i> SOLN 1%	\$0(1)	QL (30 mL / 30 days)
<i>clotrimazole antifungal</i> CREA 1%	\$0(3)	NM; *
<i>clotrimazole athletes foo</i> CREA 1%	\$0(3)	NM; *
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	\$0(1)	QL (45 gm / 30 days)
FUNGOID TINCTURE SOLN 2%	\$0(3)	NM; *
<i>grp athletes foot</i> CREA 1%	\$0(3)	NM; *
<i>grp tolnaftate</i> CREA 1%	\$0(3)	NM; *
<i>ketoconazole (topical)</i> CREA 2%	\$0(1)	QL (60 gm / 30 days)
<i>miconazole nitrate (topical)</i> CREA 2%	\$0(3)	NM; *
<i>nyamyc</i> POWD 100000unit/gm	\$0(1)	QL (60 gm / 30 days)
<i>nystatin (topical)</i> CREA 100000unit/gm; OINT 100000unit/gm	\$0(1)	QL (30 gm / 30 days)
<i>nystatin (topical)</i> POWD 100000unit/gm	\$0(1)	QL (60 gm / 30 days)
<i>nystop</i> POWD 100000unit/gm	\$0(1)	QL (60 gm / 30 days)
<i>qc tolnaftate</i> CREA 1%	\$0(3)	NM; *
<i>sm antifungal clotrimazol</i> CREA 1%	\$0(3)	NM; *
<i>sm antifungal miconazole</i> CREA 2%	\$0(3)	NM; *
<i>sm antifungal tolnaftate</i> CREA 1%	\$0(3)	NM; *
<i>soothe &amp; cool inzo antifu</i> CREA 2%	\$0(3)	NM; *
<i>tolnaftate</i> CREA 1%; POWD 1%	\$0(3)	NM; *
<i>tolnaftate antifungal</i> CREA 1%	\$0(3)	NM; *
<b>DERMATOLOGY, ANTIPSORIATICS</b>		
<i>acitretin</i> CAPS 10mg, 17.5mg, 25mg	\$0(1)	PA
<i>calcipotriene</i> OINT .005%	\$0(1)	QL (120 gm / 30 days), PA
<i>calcipotriene</i> SOLN .005%	\$0(1)	QL (120 mL / 30 days), PA
<i>calcitrene</i> OINT .005%	\$0(1)	QL (120 gm / 30 days), PA
<i>tazarotene</i> CREA .1%	\$0(1)	QL (60 gm / 30 days), PA
TAZORAC CREA .05%	\$0(2)	QL (60 gm / 30 days), PA
<b>DERMATOLOGY, ANTISEBORRHEICS</b>		
<i>ketoconazole (topical)</i> SHAM 2%	\$0(1)	QL (120 mL / 30 days)
<i>selenium sulfide</i> LOTN 2.5%	\$0(1)	
<b>DERMATOLOGY, CORTICOSTEROIDS</b>		
<i>ala-cort</i> CREA 1%, 2.5%	\$0(1)	
<i>alclometasone dipropionate</i> CREA .05%; OINT .05%	\$0(1)	QL (60 gm / 30 days)
<i>anti-itch maximum strengt</i> CREA 1%	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
<i>betamethasone dipropionate (topical) CREA .05%; OINT .05%</i>	\$0(1)	QL (120 gm / 30 days)
<i>betamethasone dipropionate (topical) LOTN .05%</i>	\$0(1)	QL (120 mL / 30 days)
<i>betamethasone dipropionate augmented CREA .05%; GEL .05%; OINT .05%</i>	\$0(1)	QL (120 gm / 30 days)
<i>betamethasone dipropionate augmented LOTN .05%</i>	\$0(1)	QL (120 mL / 30 days)
<i>betamethasone valerate CREA .1%; OINT .1%</i>	\$0(1)	QL (120 gm / 30 days)
<i>betamethasone valerate LOTN .1%</i>	\$0(1)	QL (120 mL / 30 days)
<i>clobetasol propionate CREA .05%; GEL .05%; OINT .05%</i>	\$0(1)	QL (60 gm / 30 days)
<i>clobetasol propionate SOLN .05%</i>	\$0(1)	QL (50 mL / 30 days)
<i>clobetasol propionate e CREA .05%</i>	\$0(1)	QL (60 gm / 30 days)
<i>ENSTILAR AER</i>	\$0(2)	QL (120 gm / 30 days), PA
<i>fluocinolone acetonide CREA .01%</i>	\$0(1)	QL (60 gm / 30 days)
<i>fluocinolone acetonide CREA .025%; OINT .025%</i>	\$0(1)	QL (120 gm / 30 days)
<i>fluocinolone acetonide OIL .01%</i>	\$0(1)	QL (118.28 mL / 30 days)
<i>fluocinolone acetonide SOLN .01%</i>	\$0(1)	QL (90 mL / 30 days)
<i>fluocinonide CREA .05%</i>	\$0(1)	QL (120 gm / 30 days)
<i>fluocinonide GEL .05%; OINT .05%</i>	\$0(1)	QL (60 gm / 30 days)
<i>fluocinonide SOLN .05%</i>	\$0(1)	QL (60 mL / 30 days)
<i>fluocinonide emulsified base CREA .05%</i>	\$0(1)	QL (120 gm / 30 days)
<i>fluticasone propionate CREA .05%; OINT .005%</i>	\$0(1)	
<i>gnp hydrocortisone CREA .5%</i>	\$0(3)	NM; *
<i>gnp hydrocortisone maximu OINT 1%</i>	\$0(3)	NM; *
<i>gnp hydrocortisone plus CREA 1%</i>	\$0(3)	NM; *
<i>gnp hydrocortisone/aloe</i>	\$0(3)	NM; *
<i>halobetasol propionate CREA .05%; OINT .05%</i>	\$0(1)	QL (50 gm / 30 days)
<i>hm hydrocortisone plus</i>	\$0(3)	NM; *
<i>hm hydrocortisone/aloe ma</i>	\$0(3)	NM; *
<i>hydrocortisone (topical) CREA 1%, 2.5%; LOTN 2.5%; OINT 2.5%</i>	\$0(1)	
<i>hydrocortisone (topical) CREA 1%; OINT 1%</i>	\$0(3)	NM; *
<i>hydrocortisone maximum st CREA 1%</i>	\$0(3)	NM; *
<i>hydrocortisone-aloe vera cream 0.5%</i>	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)</b>
<i>hydrocortisone-aloe vera cream 1%</i>	\$0(3)	NM; *
<i>mometasone furoate CREA .1%; OINT .1%; SOLN .1%</i>	\$0(1)	
<i>scalpicin maximum strengt SOLN 1%</i>	\$0(3)	NM; *
<i>sm hydrocortisone CREA 1%</i>	\$0(3)	NM; *
<i>sm hydrocortisone maximum OINT 1%</i>	\$0(3)	NM; *
<i>sm hydrocortisone plus</i>	\$0(3)	NM; *
<i>sm hydrocortisone/aloe ma</i>	\$0(3)	NM; *
<i>triamcinolone acetonide (topical) CREA .1%</i>	\$0(1)	QL (454 gm / 30 days)
<i>triamcinolone acetonide (topical) CREA .025%, .5%; LOTN .025%, .1%; OINT .025%, .1%, .5%</i>	\$0(1)	
<i>triderm CREA .5%</i>	\$0(1)	
<b>DERMATOLOGY, LOCAL ANESTHETICS</b>		
<i>glydo PRSY 2%</i>	\$0(1)	QL (60 mL / 30 days), PA
<i>lidocaine OINT 5%</i>	\$0(1)	QL (50 gm / 30 days), PA
<i>lidocaine PTCH 5%</i>	\$0(1)	QL (3 patches / 1 day), PA
<i>lidocaine hcl GEL 2%</i>	\$0(1)	QL (30 mL / 30 days), PA
<i>lidocaine hcl SOLN 4%</i>	\$0(1)	QL (50 mL / 30 days), PA
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	\$0(1)	QL (30 gm / 30 days), PA
<b>DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE</b>		
<i>BETADINE SOLN 10%</i>	\$0(3)	NM; *
<i>diclofenac sodium (topical) GEL 1%</i>	\$0(1)	QL (1000 gm / 30 days), PA
<i>fluorouracil (topical) CREA 5%</i>	\$0(1)	QL (40 gm / 30 days)
<i>fluorouracil (topical) SOLN 2%, 5%</i>	\$0(1)	QL (10 mL / 30 days)
<i>hm povidone-iodine SOLN 10%</i>	\$0(3)	NM; *
<i>hydrocortisone (rectal) CREA 2.5%</i>	\$0(1)	
<i>imiquimod CREA 5%</i>	\$0(1)	QL (24 packets / 30 days)
<i>lactic acid (ammonium lactate) CREA 12%; LOTN 12%</i>	\$0(1)	
<i>lactic acid (ammonium lactate) CREA 12%; LOTN 12%</i>	\$0(3)	NM; *
<i>metronidazole (topical) CREA .75%; GEL .75%</i>	\$0(1)	QL (45 gm / 30 days)
<i>metronidazole (topical) LOTN .75%</i>	\$0(1)	QL (59 mL / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU (TIER LEVEL)</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE</b>
PANRETIN GEL .1%	\$0(2)	NDS, QL (60 gm / 30 days), PA
<i>podofilox</i> SOLN .5%	\$0(1)	QL (7 mL / 28 days)
<i>povidone-iodine</i> OINT 10%; SOLN 10%	\$0(3)	NM; *
<i>procto-med hc</i> CREA 2.5%	\$0(1)	
<i>procto-pak</i> CREA 1%	\$0(1)	
<i>protozone-hc</i> CREA 2.5%	\$0(1)	
<i>qc povidone iodine</i> SOLN 10%	\$0(3)	NM; *
RECTIV OINT .4%	\$0(2)	QL (30 gm / 30 days)
RENOVA CREA .02%	\$0(3)	NM; *
RENOVA PUMP CREA .02%	\$0(3)	NM; *
<i>rosadan</i> CREA .75%	\$0(1)	QL (45 gm / 30 days)
<i>sm povidone-iodine</i> SOLN 10%	\$0(3)	NM; *
<i>tacrolimus (topical)</i> OINT .03%, .1%	\$0(1)	QL (100 gm / 30 days)
TARGRETIN GEL 1%	\$0(2)	NDS, QL (60 gm / 30 days), NM, PA
VALCHLOR GEL .016%	\$0(2)	NDS, QL (60 gm / 30 days), LA, PA

#### ***DERMATOLOGY, SCABICIDES AND PEDICULIDES***

<i>gnp lice treatment</i> LIQD 1%	\$0(3)	NM; *
<i>hm lice killing maximum s</i>	\$0(3)	NM; *
<i>hm lice treatment</i> LIQD 1%	\$0(3)	NM; *
<i>lice killing maximum stre</i>	\$0(3)	NM; *
<i>lice killing shampoo</i>	\$0(3)	NM; *
<i>lice treatment</i> LOTN 1%	\$0(3)	NM; *
<i>malathion</i> LOTN .5%	\$0(1)	QL (59 mL / 30 days)
<i>permethrin</i> CREA 5%	\$0(1)	QL (60 gm / 30 days)
<i>sm lice killing maximum s</i>	\$0(3)	NM; *
<i>sm lice treatment</i> LOTN 1%	\$0(3)	NM; *

#### ***DERMATOLOGY, WOUND CARE AGENTS***

REGRANEX GEL .01%	\$0(2)	NDS, QL (30 gm / 30 days), PA
SANTYL OINT 250unit/gm	\$0(2)	QL (180 gm / 30 days)
<i>sodium chloride (gu irrigant)</i> SOLN .9%	\$0(1)	
<i>water for irrigation, sterile irrigation soln</i>	\$0(1)	

#### ***MOUTH/THROAT/DENTAL AGENTS***

<i>cevimeline hcl</i> CAPS 30mg	\$0(1)	
<i>chlorhexidine gluconate (mouth-throat)</i> SOLN .12%	\$0(1)	
<i>clotrimazole</i> TROC 10mg	\$0(1)	QL (150 lozenges / 30 days)
<i>lidocaine hcl (mouth-throat)</i> SOLN 2%	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

<b>Drug Name (By Medical Condition)</b>	<b>WHAT THE DRUG WILL COST YOU</b>	<b>NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE</b>
<i>nystatin (mouth-throat) SUSP 100000unit/ml</i>	\$0(1)	
<i>periogard SOLN .12%</i>	\$0(1)	
<i>pilocarpine hcl (oral) TABS 5mg, 7.5mg</i>	\$0(1)	
<i>triamcinolone acetonide (mouth) PSTE .1%</i>	\$0(1)	

**PART B**

***DIABETIC METERS AND TEST STRIPS***

TRUE METRIX KIT AIR	\$0
TRUE METRIX KIT METER	\$0
TRUE METRIX STRIPS	\$0

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You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

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## D. Index of Covered Drugs

<b>*</b>	
*sodium phosphates - enema***	78
<b>2</b>	
24hr allergy relief	96
<b>3</b>	
3 day vaginal	81
<b>8</b>	
8 hour arthritis pain rel	13
8hr muscle aches & pain	13
<b>A</b>	
abacavir sulfate	21
abacavir sulfate-lamivudine tab 600-300 mg	22
abacavir sulfate-lamivudine- zidovudine tab 300-150-300 mg	22
ABELCET	20
ABILIFY MAINTENA	52
abiraterone acetate	29
ABRAXANE INJ 100MG	30
acamprosate calcium	58
acarbose	60
accutane	100
acebutolol hcl	41
acetaminophen	12
acetaminophen extra stren	12
acetaminophen w/ codeine soln 120-12 mg/5ml	17
acetaminophen w/ codeine tab 300- 15 mg	17
acetaminophen w/ codeine tab 300- 30 mg	17
acetaminophen w/ codeine tab 300- 60 mg	17
acetazolamide	43
acetic acid	80
acetic acid (otic)	94
acetylcysteine	98
acid gone	73
acid reducer	76
acid reducer complete	78
acid reducer maximum stre	76
acid reducer original str	76
acitretin	102
acne medication 10	100
ACNE MEDICATION 10	100
acne medication 2.5	100
acne medication 5	100
ACTHIB INJ	86
ACTIMMUNE	85
acyclovir	24
acyclovir sodium	24
ADACEL INJ	86
adapalene	100
adefovir dipivoxil	24
ADEMPAS	44
ADRENALIN	43
adriamycin	28
adult aspirin regimen	12
ADVAIR DISKU AER 100/50	100
ADVAIR DISKU AER 250/50	100
ADVAIR DISKU AER 500/50	100
ADVAIR HFA AER 115/21	100
ADVAIR HFA AER 230/21	100
ADVAIR HFA AER 45/21	100
ADVIL	14
advil junior strength	14
ADVIL MIGRAINE	14
AFINITOR	31
AFINITOR DISPERZ	31
afirmelle	64
aftera	64
AHIST	95
AIMOVIG	56
ala-cort	102
ALA-HIST IR	95
alavert	95
alaway	92
alaway childrens allergy	92
albendazole	18
albuterol sulfate	97
alclometasone dipropionate	102
ALDURAZYME	70
ALECENSA	31
alendronate sodium	63
alfuzosin hcl	80
ALIMTA	28
aliskiren fumarate	43

<i>all day allergy</i>	95
<i>all day allergy childrens</i>	95
<i>all day pain relief</i>	14
<i>all day relief</i>	14
<i>all-day allergy childrens</i>	95
<i>aller-chlor</i>	95
<i>aller-ease</i>	95
<i>allergy</i>	95
<i>allergy childrens</i>	95
<i>allergy relief</i>	95, 99
<i>allergy relief 24hr</i>	95
<i>allergy relief childrens</i>	95
<i>allergy relief/indoor/out</i>	95
<i>allergy-time</i>	95
<i>allopurinol</i>	12
<i>almacone double strength</i>	73
<i>alosetron hcl</i>	78
<i>ALPHAGAN P</i>	93
<i>alprazolam</i>	45
<i>ALREX</i>	92
<i>altavera</i>	64
<i>alum &amp; mag hydroxide-simethicone susp 200-200-20 mg/5ml</i>	73
<i>alum &amp; mag hydroxide-simethicone susp 400-400-40 mg/5ml</i>	73
<i>alumina/magnesia/simethic</i>	73
<i>ALUMINUM HYDROXIDE</i>	73
<i>ALUNBRIG</i>	31
<i>ALUNBRIG PAK</i>	31
<i>alyacen 1/35</i>	64
<i>alyacen 7/7/7</i>	64
<i>amabelz</i>	69
<i>amantadine hcl</i>	51
<i>AMBISOME</i>	20
<i>ambrisentan</i>	44
<i>amethia</i>	64
<i>amikacin sulfate</i>	18
<i>amiloride &amp; hydrochlorothiazide tab 5-50 mg</i>	43
<i>amiloride hcl</i>	43
<i>AMINOSYN-PF INJ 7%</i>	89
<i>amiodarone hcl</i>	40
<i>amitriptyline hcl</i>	49
<i>amlodipine besylate</i>	42
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	36

<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	36
<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	36
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	36
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	36
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	36
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	38
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	38
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	38
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	38
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	38
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	38
<i>amlodipine besylate-valsartan tab 5-160 mg</i>	38
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	38
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i>	38
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i>	38
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg</i>	38
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i>	38
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg</i>	38
<i>amnesteem</i>	100
<i>amoxapine</i>	49
<i>amoxicillin</i>	26
<i>amoxicillin &amp; k clavulanate chew tab 200-28.5 mg</i>	26

<i>amoxicillin &amp; k clavulanate chew tab</i>	
400-57 mg.....	26
<i>amoxicillin &amp; k clavulanate for susp</i>	
200-28.5 mg/5ml .....	26
<i>amoxicillin &amp; k clavulanate for susp</i>	
250-62.5 mg/5ml .....	26
<i>amoxicillin &amp; k clavulanate for susp</i>	
400-57 mg/5ml .....	26
<i>amoxicillin &amp; k clavulanate for susp</i>	
600-42.9 mg/5ml .....	26
<i>amoxicillin &amp; k clavulanate tab 250-</i>	
125 mg .....	26
<i>amoxicillin &amp; k clavulanate tab 500-</i>	
125 mg .....	26
<i>amoxicillin &amp; k clavulanate tab 875-</i>	
125 mg .....	26
<i>amoxicillin &amp; k clavulanate tab er</i>	
12hr 1000-62.5 mg.....	27
<i>amphetamine-dextroamphetamine</i>	
cap er 24hr 10 mg .....	54
<i>amphetamine-dextroamphetamine</i>	
cap er 24hr 15 mg .....	54
<i>amphetamine-dextroamphetamine</i>	
cap er 24hr 20 mg .....	54
<i>amphetamine-dextroamphetamine</i>	
cap er 24hr 25 mg .....	55
<i>amphetamine-dextroamphetamine</i>	
cap er 24hr 30 mg .....	55
<i>amphetamine-dextroamphetamine</i>	
cap er 24hr 5 mg .....	54
<i>amphetamine-dextroamphetamine</i>	
tab 10 mg.....	55
<i>amphetamine-dextroamphetamine</i>	
tab 12.5 mg .....	55
<i>amphetamine-dextroamphetamine</i>	
tab 15 mg.....	55
<i>amphetamine-dextroamphetamine</i>	
tab 20 mg.....	55
<i>amphetamine-dextroamphetamine</i>	
tab 30 mg.....	55
<i>amphetamine-dextroamphetamine</i>	
tab 5 mg .....	55
<i>amphetamine-dextroamphetamine</i>	
tab 7.5 mg.....	55
<i>amphotericin b .....</i>	20
<i>ampicillin .....</i>	27

<i>ampicillin &amp; sulbactam sodium for</i>	
<i>inj 1.5 (1-0.5) gm .....</i>	27
<i>ampicillin &amp; sulbactam sodium for</i>	
<i>inj 3 (2-1) gm .....</i>	27
<i>ampicillin &amp; sulbactam sodium for iv</i>	
<i>soln 1.5 (1-0.5) gm .....</i>	27
<i>ampicillin &amp; sulbactam sodium for iv</i>	
<i>soln 15 (10-5) gm .....</i>	27
<i>ampicillin &amp; sulbactam sodium for iv</i>	
<i>soln 3 (2-1) gm .....</i>	27
<i>ampicillin sodium .....</i>	27
<i>anagrelide hcl .....</i>	82
<i>anastrozole .....</i>	29
<i>ANDRODERM .....</i>	60
<i>ANORO ELLIPT AER 62.5-25 .....</i>	94
<i>antacid .....</i>	73
<i>antacid anti-gas maximum .....</i>	73
<i>antacid calcium regular s.....</i>	73
<i>antacid extra strength .....</i>	73
<i>antacid fast relief .....</i>	73
<i>antacid maximum strength .....</i>	73
<i>antacid plus anti-gas fas .....</i>	73
<i>antacid plus anti-gas rel.....</i>	73
<i>antacid regular strength .....</i>	73
<i>antacid ultra strength .....</i>	73
<i>anti-diarrheal.....</i>	74
<i>antifungal.....</i>	101
<i>anti-fungal powder .....</i>	101
<i>anti-gas/</i>	
<i>and gnp antacid .....</i>	73
<i>anti-itch maximum strengt .....</i>	102
<i>aprepitant .....</i>	75
<i>aprepitant capsule therapy pack</i>	
<i>80 &amp; 125 mg .....</i>	75
<i>apri .....</i>	64
<i>APTIOM.....</i>	45
<i>APTIVUS .....</i>	21
<i>ARALAST NP .....</i>	98
<i>aranelle .....</i>	64
<i>ARCALYST .....</i>	85
<i>ariPIPRAZOLE .....</i>	52
<i>ARISTADA .....</i>	52
<i>ARISTADA INITIO.....</i>	52
<i>armodafinil .....</i>	58
<i>ARNUITY ELLIPTA.....</i>	100
<i>arthritis pain relief.....</i>	12
<i>artificial tears .....</i>	93

<i>asenapine maleate</i>	52
<i>ashlyna</i>	64
<i>aspirin</i>	12
ASPIRIN	12
<i>aspirin adult low dose</i>	12
<i>aspirin adult low strengt</i>	12
<i>aspirin low dose</i>	12
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	83
<i>atazanavir sulfate</i>	21
<i>atenolol</i>	42
<i>atenolol &amp; chlorthalidone tab 100-25 mg</i>	41
<i>atenolol &amp; chlorthalidone tab 50-25 mg</i>	41
<i>atomoxetine hcl</i>	55
<i>atorvastatin calcium</i>	40
<i>atovaquone</i>	18
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	21
<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	21
ATROPINE SULFATE	93
ATROVENT HFA	94
<i>aubra eq</i>	64
<i>aurovela 1/20</i>	64
<i>aurovela 24 fe</i>	64
<i>aurovela fe 1.5/30</i>	64
<i>aurovela fe 1/20</i>	64
AUSTEDO	57
AVASTIN	31
<i>aviane</i>	64
<i>avita</i>	100
<i>ayuna</i>	64
AYVAKIT	31
<i>azacitidine</i>	28
<i>azathioprine</i>	85
<i>azelastine hcl</i>	95
<i>azelastine hcl (ophth)</i>	92
<i>azithromycin</i>	25
<i>aztreonam</i>	18
<i>azurette</i>	64
<b>B</b>	
<i>bacitracin (ophthalmic)</i>	91
<i>bacitracin-polymyxin b ophth oint</i>	91
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	91
<i>baclofen</i>	58
BACMIN TAB	90
<i>balsalazide disodium</i>	77
BALVERSA	31
<i>balziva</i>	64
<i>banophen</i>	95
BARACLUDE	24
BASAGLAR KWIKPEN	62
<i>baza antifungal</i>	101
BCG VACCINE INJ	86
BD ALCOHOL SWABS	62
<i>bekyree</i>	64
BELSOMRA	55
<i>benazepril &amp; hydrochlorothiazide tab 10-12.5 mg</i>	36
<i>benazepril &amp; hydrochlorothiazide tab 20-12.5 mg</i>	36
<i>benazepril &amp; hydrochlorothiazide tab 20-25 mg</i>	36
BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 5-6.25MG	36
<i>benazepril hcl</i>	37
BENDEKA	28
BENLYSTA	85
<i>benzoyl peroxide</i>	100
<i>benzoyl peroxide wash</i>	101
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	101
<i>benztropine mesylate</i>	51
<i>bepotastine besilate</i>	92
BEPREVE	92
BERINERT	82
BESIVANCE	91
BETADINE	104
<i>betamethasone dipropionate (topical)</i>	103
<i>betamethasone dipropionate augmented</i>	103
<i>betamethasone valerate</i>	103
BETASERON	57
<i>betaxolol hcl</i>	42
<i>betaxolol hcl (ophth)</i>	93
<i>bethanechol chloride</i>	80
BETOPTIC-S	93
BEVESPI AER 9-4.8MCG	94
<i>bexarotene</i>	30

BEXSERO INJ .....	86
bicalutamide .....	29
BICILLIN L-A.....	27
BIKTARVY TAB .....	22
bisacodyl .....	77
bisacodyl ec .....	77
bismatrol .....	74
bismuth subsalicylate .....	74
bisoprolol & hydrochlorothiazide tab 10-6.25 mg.....	41
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg.....	41
bisoprolol & hydrochlorothiazide tab 5-6.25 mg .....	41
bisoprolol fumarate .....	42
BIVIGAM .....	84
BLEPHAMIDE OIN S.O.P. .....	91
blisovi 24 fe .....	64
blisovi fe 1.5/30 .....	64
BOOSTRIX INJ .....	86
BORTEZOMIB .....	31
bosentan .....	44
BOSULIF.....	31
BP VIT 3 CAP .....	90
BRAFTOVI.....	31
BREO ELLIPTA INH 100-25 .....	100
BREO ELLIPTA INH 200-25 .....	100
BREZTRI AERO AER SPHERE .....	94
BREZTRI AERO AER SPHERE (INSTITUTIONAL PACK) .....	94
briellyn.....	64
BRILINTA .....	83
brimonidine tartrate .....	93
brinzolamide .....	93
BRIVIACT .....	45
bromfenac sodium (ophth) .....	92
bromocriptine mesylate .....	51
BROMSITE .....	92
BRUKINSA .....	31
budesonide .....	77
budesonide (inhalation).....	100
budesonide (nasal) .....	99
bumetanide .....	43
buprenorphine .....	16
buprenorphine hcl.....	58
buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv) .....	58
buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv) .....	58
buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv) .....	58
buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv) .....	58
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv) .....	58
buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv) .....	58
buspirone hcl .....	45
butorphanol tartrate .....	17
BYDUREON BCISE .....	60
BYETTA.....	60
BYSTOLIC .....	42
<b>C</b>	
cabergoline .....	70
CABOMETYX .....	31
calcipotriene .....	102
calcitonin (salmon) spray .....	63
calcitrene .....	102
calcitriol .....	73
calcium 600+d.....	89
calcium acetate (phosphate binder) .....	72
calcium antacid .....	73
calcium antacid extra str.....	73
calcium carbonate .....	89
calcium carbonate (antacid) .....	89
calcium carbonate-vitamin d tab 600 mg-200 unit .....	89
calcium high potency .....	90
calcium high potency + vi .....	90
cal-gest antacid .....	73
CALQUENCE .....	31
camila.....	64
camrese .....	64
camrese lo .....	64
candesartan cilexetil .....	39
candesartan cilexetil- hydrochlorothiazide tab 16-12.5 mg .....	38

<i>candesartan cilexetil-</i>	
<i>hydrochlorothiazide tab 32-12.5</i>	
<i>mg.....</i>	38
<i>candesartan cilexetil-</i>	
<i>hydrochlorothiazide tab 32-25 mg</i>	
.....	38
CAPLYTA .....	52
CAPRELSA .....	31
<i>captopril</i> .....	37
CARB/LEVO ORALLY	
DISINTEGRATING TAB 10-100MG	
.....	51
CARB/LEVO ORALLY	
DISINTEGRATING TAB 25-100MG	
.....	51
CARB/LEVO ORALLY	
DISINTEGRATING TAB 25-250MG	
.....	51
CARBAGLU.....	70
<i>carbamazepine</i> .....	45
<i>carbidopa &amp; levodopa tab 10-100</i>	
<i>mg.....</i>	51
<i>carbidopa &amp; levodopa tab 25-100</i>	
<i>mg.....</i>	51
<i>carbidopa &amp; levodopa tab 25-250</i>	
<i>mg.....</i>	51
<i>carbidopa &amp; levodopa tab er 25-100</i>	
<i>mg.....</i>	51
<i>carbidopa &amp; levodopa tab er 50-200</i>	
<i>mg.....</i>	51
<i>carbidopa-levodopa-entacapone</i>	
<i>tabs 12.5-50-200 mg .....</i>	51
<i>carbidopa-levodopa-entacapone</i>	
<i>tabs 18.75-75-200 mg .....</i>	51
<i>carbidopa-levodopa-entacapone</i>	
<i>tabs 25-100-200 mg .....</i>	51
<i>carbidopa-levodopa-entacapone</i>	
<i>tabs 31.25-125-200 mg.....</i>	51
<i>carbidopa-levodopa-entacapone</i>	
<i>tabs 37.5-150-200 mg .....</i>	51
<i>carbidopa-levodopa-entacapone</i>	
<i>tabs 50-200-200 mg .....</i>	51
<i>carboplatin</i> .....	28
<i>carboxymethylcellulose sodium</i>	
<i>(ophth).....</i>	93
<i>carisoprodol</i> .....	58
<i>carrington antifungal</i> .....	101

<i>carteolol hcl (ophth) .....</i>	93
<i>cartia xt .....</i>	42
<i>carvedilol .....</i>	42
<i>caspofungin acetate.....</i>	20
CAYSTON .....	18
<i>caziant.....</i>	64
<i>cefaclor.....</i>	25
CEFACLOR ER .....	25
<i>cefadroxil .....</i>	25
CEFAZOLIN INJ 1GM/50ML .....	25
<i>cefazolin sodium .....</i>	25
CEFAZOLIN SOLN 2GM/100ML-4%	
.....	25
<i>cefdinir .....</i>	25
<i>cefepime hcl .....</i>	25
<i>cefixime .....</i>	25
<i>cefoxitin sodium.....</i>	25
<i>cefpodoxime proxetil .....</i>	25
<i>cefprozil.....</i>	25
<i>ceftazidime.....</i>	25
CEFTAZIDIME/ SOL D5W 1GM ...	25
CEFTAZIDIME/ SOL D5W 2GM ...	25
<i>ceftriaxone sodium .....</i>	25
<i>cefuroxime axetil .....</i>	25
<i>cefuroxime sodium .....</i>	25
<i>celecoxib.....</i>	14
CELONTIN .....	45
<i>cephalexin.....</i>	25
CERDELGA .....	70
CEREZYME .....	70
<i>cetirizine hcl .....</i>	95
<i>cetirizine hcl allergy ch .....</i>	95
<i>cetirizine hcl childrens.....</i>	95
<i>cetirizine hydrochloride .....</i>	95
<i>cevimeline hcl.....</i>	105
CHANTIX.....	59
CHANTIX CONTINUING MONTH...	59
CHANTIX PAK 0.5& 1MG .....	59
<i>chateal .....</i>	64
CHEMET .....	63
<i>childrens acetaminophen.....</i>	12
CHILDRENS ADVIL .....	14
<i>childrens ibuprofen .....</i>	14
<i>childrens loratadine .....</i>	95
<i>childrens silapap .....</i>	12
<i>chlorhexidine gluconate (mouth-throat) .....</i>	105

<i>chloroquine phosphate</i>	21
<i>chlorpheniramine maleate</i>	95
<i>chlorpromazine hcl</i>	52
CHLORPROMAZINE HYDROCHLOR	52
<i>chlorthalidone</i>	43
<i>cholecalciferol</i>	90
<i>cholestyramine</i>	41
<i>cholestyramine light</i>	41
<i>chromic chloride</i>	89
<i>cyclopirox olamine</i>	101
<i>cilstazol</i>	82
CILOXAN	91
CIMDUO TAB 300-300	23
<i>cinacalcet hcl</i>	70
CIPRO	26
<i>ciprofloxacin 200 mg/100ml in d5w</i>	26
<i>ciprofloxacin 400 mg/200ml in d5w</i>	26
<i>ciprofloxacin hcl</i>	26
<i>ciprofloxacin hcl (ophth)</i>	91
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	94
<i>cisplatin</i>	28
<i>citalopram hydrobromide</i>	49
<i>claravis</i>	101
<i>clarithromycin</i>	25
<i>clindamycin hcl</i>	18
<i>clindamycin palmitate hydrochloride</i>	18
<i>clindamycin phosphate</i>	18
<i>clindamycin phosphate (topical)</i>	101
<i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i>	18
<i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i>	18
<i>clindamycin phosphate in d5w iv soln 900 mg/50ml</i>	18
<i>clindamycin phosphate vaginal</i>	81
CLINDMYC/NAC INJ 300/50ML	18
CLINDMYC/NAC INJ 600/50ML	19
CLINDMYC/NAC INJ 900/50ML	19
CLINIMIX INJ 4.25/D10	89
CLINIMIX INJ 4.25/D5W	89
CLINIMIX INJ 5%/D15W	89
CLINIMIX INJ 5%/D20W	89
CLINIMIX INJ 6/5	89
CLINIMIX INJ 8/10	89
CLINIMIX INJ 8/14	89
<i>clinisol sf 15%</i>	89
CLINOLIPID EMU 20%	89
<i>clobazam</i>	45
<i>clobetasol propionate</i>	103
<i>clobetasol propionate e</i>	103
<i>clomipramine hcl</i>	49
<i>clonazepam</i>	45
<i>clonidine</i>	43
<i>clonidine hcl</i>	43
<i>clopidogrel bisulfate</i>	83
<i>clorazepate dipotassium</i>	45
<i>clotrimazole</i>	105
<i>clotrimazole (topical)</i>	101, 102
<i>clotrimazole 3</i>	81
<i>clotrimazole antifungal</i>	102
<i>clotrimazole athletes foo</i>	102
<i>clotrimazole vaginal</i>	81
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	102
<i>clozapine</i>	52
COARTEM TAB 20-120MG	21
COLACE	77
<i>colchicine</i>	12
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	12
<i>colesevelam hcl</i>	41
<i>colestipol hcl</i>	41
<i>colistimethate sodium</i>	19
COMBIGAN SOL 0.2/0.5%	93
COMBIVENT AER 20-100	94
COMETRIQ (60MG DOSE)	31
COMETRIQ KIT 100MG	31
COMETRIQ KIT 140MG	31
COMPLERA TAB	23
<i>complete allergy medicine</i>	95
<i>compro</i>	75
<i>constulose</i>	77
COPIKTRA	31
CORLANOR	43
<i>corvita</i>	90
COTELLIC	31
CREON CAP 12000UNT	79
CREON CAP 24000UNT	79
CREON CAP 3000UNIT	79
CREON CAP 36000UNT	79

CREON CAP 6000UNIT .....	79
<i>cromolyn sodium</i> .....	98
<i>cromolyn sodium (mastocytosis)</i> .....	79
<i>cromolyn sodium (nasal)</i> .....	98
<i>cromolyn sodium (ophth)</i> .....	92
<i>cryselle-28</i> .....	64
<i>cupric chloride</i> .....	89
<i>cyanocobalamin</i> .....	90
<i>cyclafem 1/35</i> .....	64
<i>cyclafem 7/7/7</i> .....	64
<i>cyclobenzaprine hcl</i> .....	58
<i>cyclophosphamide</i> .....	28
<b>CYCLOPHOSPHAMIDE</b> .....	28
<i>cycloserine</i> .....	23
<i>cyclosporine</i> .....	85
<i>cyclosporine modified (for microemulsion)</i> .....	85
<i>cyproheptadine hcl</i> .....	95
<i>cyred eq</i> .....	64
<b>CYSTADANE POW</b> .....	70
<b>CYSTADROPS</b> .....	93
<b>CYSTAGON</b> .....	70
<b>CYSTARAN</b> .....	93
<i>cytarabine</i> .....	28
<b>D</b>	
<b>D10W/NACL INJ 0.2%</b> .....	87
<b>D2.5W/NACL INJ 0.45%</b> .....	87
<b>D5W/LYTES INJ #48</b> .....	87
<i>dalfampridine</i> .....	57
<b>DALIRESP</b> .....	98
<i>danazol</i> .....	69
<i>dantrolene sodium</i> .....	58
<i>dapsone</i> .....	19
<b>DAPTACEL INJ</b> .....	86
<i>daptomycin</i> .....	19
<b>DAPTO MYCIN</b> .....	19
<i>dasetta 1/35</i> .....	64
<i>dasetta 7/7/7</i> .....	64
<b>DAURISMO</b> .....	31
<i>daysee</i> .....	64
<i>deblitane</i> .....	64
<i>deferasirox</i> .....	63
<b>DELESTROGEN</b> .....	69
<b>DELSTRIGO TAB</b> .....	23
<b>DESCOVY TAB 200/25MG</b> .....	23
<i>desipramine hcl</i> .....	49
<i>desmopressin acetate</i> .....	71

<i>desmopressin acetate spray</i> .....	71
<i>desmopressin acetate spray refrigerated</i> .....	71
<i>desogest-eth estrad &amp; eth estrad tab 0.15-0.02/0.01 mg(21/5)</i> .....	64
<i>desogestrel &amp; ethinyl estradiol tab 0.15 mg-30 mcg</i> .....	65
<i>desvenlafaxine succinate</i> .....	49
<i>dexamethasone</i> .....	69
<b>DEXAMETHASONE INTENSOL</b> .....	70
<i>dexamethasone sodium phosphate</i> .....	70
<i>dexamethasone sodium phosphate (ophth)</i> .....	92
<b>DEXILANT</b> .....	79
<i>dexamethylphenidate hcl</i> .....	55
<i>dextrose</i> .....	89
<i>dextrose 10% w/ sodium chloride 0.45%</i> .....	87
<i>dextrose 2.5% w/ sodium chloride 0.45%</i> .....	87
<i>dextrose 5% in lactated ringers</i> .....	87
<i>dextrose 5% w/ sodium chloride 0.2%</i> .....	87
<i>dextrose 5% w/ sodium chloride 0.225%</i> .....	87
<i>dextrose 5% w/ sodium chloride 0.3%</i> .....	87
<i>dextrose 5% w/ sodium chloride 0.45%</i> .....	87
<i>dextrose 5% w/ sodium chloride 0.9%</i> .....	87
<b>DIACOMIT</b> .....	45, 46
<i>dialyvite</i> .....	90
<b>DIALYVITE TAB 3000</b> .....	90
<b>DIALYVITE TAB 5000</b> .....	90
<b>DIALYVITE TAB SUPREM D</b> .....	90
<b>DIALYVITE/ TAB ZINC</b> .....	90
<i>diazepam</i> .....	46
<i>diazepam (anticonvulsant)</i> .....	46
<i>diazepam inj</i> .....	46
<i>diazoxide</i> .....	70
<i>diclofenac potassium</i> .....	14
<i>diclofenac sodium</i> .....	15
<i>diclofenac sodium (ophth)</i> .....	92
<i>diclofenac sodium (topical)</i> .....	104
<i>dicloxacillin sodium</i> .....	27

<i>dicyclomine hcl</i>	76
DIFFERIN	101
DIFICID	25
<i>diflunisal</i>	15
<i>digitek</i>	44
<i>digox</i>	44
<i>digoxin</i>	44
<i>dihydroergotamine mesylate</i>	56
DILANTIN	46
DILANTIN INFATABS	46
DILANTIN-125	46
<i>diltiazem hcl</i>	42
<i>diltiazem hcl coated beads</i>	42
<i>diltiazem hcl extended release beads</i>	42
<i>dilt-xr</i>	42
DIP/TET PED INJ 25-5LFU	86
<i>diphenhist</i>	95
<i>diphenhydramine hcl</i>	95, 96
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	79
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	79
<i>dipyridamole</i>	83
<i>disopyramide phosphate</i>	40
<i>disulfiram</i>	59
<i>divalproex sodium</i>	46
<i>docetaxel</i>	30
DOCETAXEL	30
<i>docu</i>	77
<i>docusate calcium</i>	77
<i>docusate sodium</i>	77
<i>dofetilide</i>	40
<i>dok</i>	77
<i>donepezil hydrochloride</i>	49
DOPTELET	82
<i>dorzolamide hcl</i>	93
<i>dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml</i>	93
<i>dotti</i>	69
DOVATO TAB 50-300MG	23
<i>doxazosin mesylate</i>	37
<i>doxepin hcl</i>	49
<i>doxepin hcl (sleep)</i>	55
<i>doxorubicin hcl</i>	28
<i>doxorubicin hcl liposomal</i>	28
<i>doxy 100</i>	28

<i>doxycycline (monohydrate)</i>	28
<i>doxycycline hyclate</i>	28
DRISDOL	90
DRIZALMA SPRINKLE	49
<i>dronabinol</i>	75
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	65
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	65
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	65
DROXIA	82
<i>droxidopa</i>	44
<i>duloxetine hcl</i>	50
DUREZOL	92
<i>dutasteride</i>	80
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	80
<b>E</b>	
<i>ec-naproxen</i>	15
<i>econtra ez</i>	65
<i>econtra one-step</i>	65
<i>ed chlorped jr</i>	96
<i>ed-apap</i>	12
EDURANT	21
<i>efavirenz</i>	21
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	23
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	23
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	23
<i>elinest</i>	65
ELIQUIS	81
ELIQUIS STARTER PACK	81
<i>ELLA</i>	65
<i>eluryng</i>	65
EMCYT	29
<i>emoquette</i>	65
EMSAM	50
<i>emtricitabine</i>	21
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	23
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	23

<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	23
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	23
EMTRIVA	21
EMVERM	19
<i>enalapril maleate</i>	37
<i>enalapril maleate &amp; hydrochlorothiazide tab 10-25 mg</i>	36
<i>enalapril maleate &amp; hydrochlorothiazide tab 5-12.5 mg</i>	36
ENBREL	83
ENBREL MINI	83
ENBREL SURECLICK	83
ENDARI	82
<i>endocet tab 10-325mg</i>	17
<i>endocet tab 2.5-325mg</i>	17
<i>endocet tab 5-325mg</i>	17
<i>endocet tab 7.5-325mg</i>	17
<i>enema ready-to-use</i>	77
ENGERIX-B	86
ENLYTE CAP	90
<i>enoxaparin sodium</i>	81
empresse-28	65
enskyce	65
ENSTILAR AER	103
<i>entacapone</i>	51
entecavir	24
ENTRESTO TAB 24-26MG	38
ENTRESTO TAB 49-51MG	38
ENTRESTO TAB 97-103MG	38
<i>enulose</i>	77
EPCLUSA TAB 200-50MG	24
EPCLUSA TAB 400-100	24
EPIDIOLEX	46
<i>epinephrine (anaphylaxis)</i>	98
<i>epirubicin hcl</i>	28
epitol	46
EPIVIR HBV	24
<i>eplerenone</i>	37
<i>ergocalciferol</i>	90
<i>ergotamine w/ caffeine tab 1-100 mg</i>	56
ERIVEDGE	31
ERLEADA	29
<i>erlotinib hcl</i>	31
errin	65
<i>ertapenem sodium</i>	19
ery	101
ery-tab	25
ERYTHROCIN LACTOBIONATE	25
<i>erythrocin stearate</i>	26
<i>erythromycin (acne aid)</i>	101
<i>erythromycin (ophth)</i>	91
<i>erythromycin base</i>	26
<i>erythromycin ethylsuccinate</i>	26
ESBRIET	98
<i>escitalopram oxalate</i>	50
<i>esomeprazole magnesium</i>	79
estarrylla	65
<i>estradiol</i>	69
<i>estradiol &amp; norethindrone acetate tab 0.5-0.1 mg</i>	69
<i>estradiol &amp; norethindrone acetate tab 1-0.5 mg</i>	69
<i>estradiol vaginal</i>	69
<i>estradiol valerate</i>	69
<i>eszopiclone</i>	56
<i>ethambutol hcl</i>	23
<i>ethosuximide</i>	46
<i>ethynodiol diacetate &amp; ethinylestradiol tab 1 mg-35 mcg</i>	65
<i>ethynodiol diacetate &amp; ethinylestradiol tab 1 mg-50 mcg</i>	65
etodolac	15
<i>etonogestrel-ethinylestradiol vaginal ring 0.120-0.015 mg/24hr</i>	65
<i>etoposide</i>	30
<i>etravirine</i>	21
<i>euthyrox</i>	72
<i>everolimus</i>	31
<i>everolimus (immunosuppressant)</i>	86
EVOTAZ TAB 300-150	23
<i>exemestane</i>	29
<i>eye itch relief</i>	92
<i>ezetimibe</i>	41
<i>ezetimibe-simvastatin tab 10-10 mg</i>	41
<i>ezetimibe-simvastatin tab 10-20 mg</i>	41
<i>ezetimibe-simvastatin tab 10-40 mg</i>	41

<i>ezetimibe-simvastatin tab 10-80 mg</i>	41
<b>F</b>	
<i>fabb</i>	90
<b>FABRAZYME</b>	71
<i>falmina</i>	65
<i>famciclovir</i>	24
<i>famotidine</i>	76
<i>famotidine in nacl 0.9% iv soln 20 mg/50ml</i>	76
<i>famotidine maximum streng</i>	76
<b>FANAPT</b>	52
<b>FANAPT PAK</b>	52
<b>FARXIGA</b>	60
<b>FARYDAK</b>	31
<b>FASENRA</b>	98
<b>FASENRA PEN</b>	98
<i>fayosim</i>	65
<i>felbamate</i>	46
<i>felodipine</i>	42
<i>femynor</i>	65
<i>fenofibrate</i>	40
<i>fenofibrate micronized</i>	40
<i>fentanyl</i>	16
<i>fentanyl citrate</i>	17
<b>FETZIMA</b>	50
<b>FETZIMA CAP TITRATIO</b>	50
<i>feverall adults</i>	12
<i>feverall childrens</i>	12
<b>FEVERALL INFANTS</b>	12
<b>FEVERALL JUNIOR STRENGTH</b>	12
<i>fexofenadine hcl</i>	96
<b>FIASP FLEX INJ TOUCH</b>	62
<b>FIASP INJ 100/ML</b>	62
<b>FIASP PENFIL INJ U-100</b>	62
<i>finasteride</i>	80
<b>FINTEPLA</b>	46
<i>first aid antibiotic</i>	101
<i>flac</i>	94
<b>FLAREX</b>	92
<b>FLEBOGAMMA DIF</b>	85
<i>flecainide acetate</i>	40
<b>FLEET ENE</b>	77
<b>FLEET ENE ENEMA</b>	77
<b>FLEET ENE PED</b>	77
<b>FLONASE ALLERGY RELIEF</b>	99
<b>FLONASE ALLERGY RELIEF CH</b>	99

<b>FLONASE SENSIMIST</b>	99
<b>FLOVENT DISKUS</b>	100
<b>FLOVENT HFA</b>	100
<i>fluconazole</i>	20
<i>fluconazole in nacl 0.9% inj 200 mg/100ml</i>	20
<i>fluconazole in nacl 0.9% inj 400 mg/200ml</i>	20
<i>flucytosine</i>	20
<i>fludrocortisone acetate</i>	70
<i>flunisolide (nasal)</i>	99
<i>fluocinolone acetonide</i>	103
<i>fluocinolone acetonide (otic)</i>	94
<i>fluocinonide</i>	103
<i>fluocinonide emulsified base</i>	103
<i>fluorometholone (ophth)</i>	92
<i>fluorouracil</i>	29
<i>fluorouracil (topical)</i>	104
<i>fluoxetine hcl</i>	50
<i>fluphenazine decanoate</i>	52
<i>fluphenazine hcl</i>	52
<i>flurbiprofen</i>	15
<i>flurbiprofen sodium</i>	92
<i>flutamide</i>	29
<i>fluticasone propionate</i>	103
<i>fluticasone propionate (nasal)</i>	99
<i>fluvoxamine maleate</i>	45
<b>FOLBIC TAB</b>	90
<i>folic acid</i>	90
<b>FOLTRATE TAB</b>	90
<i>fondaparinux sodium</i>	81, 82
<b>FORTEO</b>	63
<i>fosamprenavir calcium</i>	21
<i>fosinopril sodium</i>	37
<i>fosinopril sodium &amp; hydrochlorothiazide tab 10-12.5 mg</i>	36
<i>fosinopril sodium &amp; hydrochlorothiazide tab 20-12.5 mg</i>	37
<b>FOTIVDA</b>	32
<b>FREAMINE HBC INJ 6.9%</b>	89
<b>FREAMINE III INJ 10%</b>	89
<i>fulvestrant</i>	29
<b>FUNGOID TINCTURE</b>	102
<i>furosemide</i>	43
<i>furosemide inj</i>	43

FUZEON .....	21
fyavolv tab 0.5mg-2.5mcg .....	69
fyavolv tab 1mg-5mcg .....	69
FYCOMPA .....	46
<b>G</b>	
<i>gabapentin</i> .....	46, 47
<i>galantamine hydrobromide</i> .....	49
<i>GAMASTAN INJ</i> .....	85
<i>GAMMAGARD LIQUID</i> .....	85
<i>GAMMAGARD S/D IGA LESS TH</i> ... <td>85</td>	85
<i>GAMMAKED</i> .....	85
<i>GAMMAPLEX</i> .....	85
<i>GAMUNEX-C</i> .....	85
<i>ganciclovir sodium</i> .....	24
<i>GARDASIL 9 INJ</i> .....	86
<i>gatifloxacin (ophth)</i> .....	91
<i>GATTEX</i> .....	79
<i>GAUZE PADS 2</i> .....	62
<i>gavilyte-c</i> .....	77
<i>gavilyte-g</i> .....	77
<i>gavilyte-n/flavor pack</i> .....	77
<i>GAVISCON SUS</i> .....	73
<i>GAVISCON SUS CHERRY</i> .....	73
<i>GAVRETO</i> .....	32
<i>gemcitabine hcl</i> .....	29
<i>gemfibrozil</i> .....	40
<i>generlac</i> .....	77
<i>gengraf</i> .....	86
<i>GENOTROPIN</i> .....	71
<i>GENOTROPIN MINIQUICK</i> .....	71
<i>gentak</i> .....	91
<i>gentamicin in saline inj 0.8 mg/ml</i> .....	19
<i>gentamicin in saline inj 1 mg/ml..</i> 19	
<i>gentamicin in saline inj 1.2 mg/ml</i> .....	19
<i>gentamicin in saline inj 1.6 mg/ml</i> .....	19
<i>gentamicin in saline inj 2 mg/ml..</i> 19	
<i>gentamicin sulfate</i> .....	19
<i>gentamicin sulfate (ophth)</i> .....	91
<i>gentamicin sulfate (topical)</i> .....	101
<i>GENTEAL SEVERE TEARS</i> .....	93
<i>genteal tears mild</i> .....	93
<i>genteal tears night-time</i> .....	93
<i>gentle laxative</i> .....	77
<i>GENVOYA TAB</i> .....	23
<i>GILENYA</i> .....	57
<i>GILOTrif</i> .....	32
<i>glatiramer acetate</i> .....	57
<i>glatopa</i> .....	58
<i>glimepiride</i> .....	60
<i>glipizide</i> .....	60
<i>glipizide xl</i> .....	60
<i>glipizide-metformin hcl tab 2.5-250</i> <i>mg</i> .....	60
<i>glipizide-metformin hcl tab 2.5-500</i> <i>mg</i> .....	60
<i>glipizide-metformin hcl tab 5-500</i> <i>mg</i> .....	60
<i>glycopyrrolate</i> .....	76
<i>glydo</i> .....	104
<i>GLYXAMBI TAB 10-5 MG</i> .....	60
<i>GLYXAMBI TAB 25-5 MG</i> .....	60
<i>gnp 8 hour arthritis reli</i> .....	12
<i>gnp 8 hour pain relief</i> .....	12
<i>gnp 8 hour pain reliever</i> .....	12
<i>gnp acetaminophen</i> .....	12
<i>gnp acetaminophen extra s</i> .....	12
<i>gnp acid reducer</i> .....	76
<i>gnp acid reducer maximum</i> .....	76
<i>gnp adult aspirin low str</i> .....	12
<i>gnp all day allergy</i> .....	96
<i>gnp all day allergy child</i> .....	96
<i>gnp allergy</i> .....	96
<i>gnp allergy antihistamine</i> .....	96
<i>gnp allergy relief</i> .....	96
<i>gnp antacid</i> <i>and anti-gas/</i> .....	73
<i>gnp antacid &amp; anti-gas/re</i> .....	73
<i>gnp antacid anti-gas/maxi</i> .....	73
<i>gnp antacid extra strengt</i> .....	73
<i>gnp antacid/regular stren</i> .....	73
<i>gnp anti-diarrheal</i> .....	74
<i>gnp arthritis pain relief</i> .....	12
<i>gnp artificial tears</i> .....	93
<i>gnp aspirin</i> .....	13
<i>gnp aspirin low dose</i> .....	13
<i>gnp athletes foot</i> .....	102
<i>gnp budesonide nasal spra</i> .....	99
<i>gnp childrens allergy</i> .....	96
<i>gnp childrens ibuprofen</i> .....	15
<i>gnp clearlax</i> .....	77
<i>gnp clotrimazole 3</i> .....	81

*gnp enema* ..... 77  
*gnp fluticasone propionat* ..... 99  
*gnp foaming antacid* ..... 73  
*gnp gentle laxative* ..... 77  
*gnp heartburn relief* ..... 76  
*gnp hydrocortisone* ..... 103  
*gnp hydrocortisone maximu* ..... 103  
*gnp hydrocortisone plus* ..... 103  
*gnp hydrocortisone/aloe* ..... 103  
*gnp ibuprofen* ..... 15  
*gnp ibuprofen infants* ..... 15  
*gnp ibuprofen junior stre* ..... 15  
*gnp infants pain/fever* ..... 13  
*gnp k-pec* ..... 74  
*gnp lansoprazole* ..... 79  
*gnp laxative* ..... 77  
*gnp lice treatment* ..... 105  
*gnp loperamide hydrochlor* ..... 74  
*gnp loratadine* ..... 96  
*gnp loratadine childrens* ..... 96  
*gnp lubricating plus eye* ..... 93  
*gnp miconazole 1 combinat* ..... 81  
*gnp miconazole 3* ..... 81  
*gnp miconazole 7* ..... 81  
*gnp naproxen* ..... 15  
*gnp naproxen sodium* ..... 15  
*gnp natural fiber* ..... 77  
*gnp nicotine gum* ..... 59  
*gnp nicotine mini lozenge* ..... 59  
*gnp nicotine polacrilex* ..... 59  
*gnp nicotine polacrilex m* ..... 59  
*gnp nicotine transdermal* ..... 59  
*gnp omeprazole* ..... 79  
*gnp pain & fever children* ..... 13  
*gnp pain relief* ..... 13  
*gnp pain relief extra str* ..... 13  
*gnp pink bismuth* ..... 75  
*gnp stomach relief* ..... 75  
*gnp stool softener* ..... 78  
*gnp tolnaftate* ..... 102  
*gnp triple antibiotic* ..... 101  
*gnp womens gentle laxativ* ..... 78  
*GOLYTELY SOL* ..... 78  
*goodsense all day allergy* ..... 96  
*goodsense aller-ease* ..... 96  
*goodsense allergy relief* ..... 96  
*goodsense anti-diarrheal* ..... 75

*goodsense arthritis pain* ..... 13  
*goodsense aspirin* ..... 13  
*goodsense aspirin adult l* ..... 13  
*goodsense ibuprofen* ..... 15  
*goodsense ibuprofen child* ..... 15  
*goodsense ibuprofen infan* ..... 15  
*goodsense lansoprazole* ..... 79  
*goodsense lubricating plu* ..... 93  
*goodsense naproxen sodium* ..... 15  
*goodsense nicotine* ..... 59  
*goodsense nicotine gum* ..... 59  
*goodsense nicotine polacr* ..... 59  
*goodsense pain & fever ch* ..... 13  
*goodsense pain & fever in* ..... 13  
*goodsense pain relief* ..... 13  
*goodsense pain relief ext* ..... 13  
*goodsense stomach relief* ..... 75  
*granisetron hcl* ..... 75  
*griseofulvin microsize* ..... 20  
*griseofulvin ultramicrosize* ..... 20  
*guanfacine hcl* ..... 44  
*guanfacine hcl (adhd)* ..... 55  
*GVOKE HYOPEN 2-PACK* ..... 70  
*GVOKE PFS* ..... 70  
**H**  
*HAEGARDA* ..... 82  
*hailey 1.5/30* ..... 65  
*hailey 24 fe* ..... 65  
*halobetasol propionate* ..... 103  
*haloperidol* ..... 53  
*haloperidol decanoate* ..... 53  
*haloperidol lactate* ..... 53  
*HARVONI PAK 33.75-150MG* ..... 24  
*HARVONI PAK 45-200MG* ..... 24  
*HARVONI TAB 45-200MG* ..... 24  
*HARVONI TAB 90-400MG* ..... 24  
*HAVRIX* ..... 86  
*heartburn relief* ..... 76  
*heartburn relief extra st* ..... 73  
*heartburn relief maximum* ..... 76  
*heather* ..... 65  
*HEP SOD/NACL INJ 25000UNT* ..... 82  
*heparin sodium (porcine)* ..... 82  
*heparin sodium (porcine) 100 unit/ml in d5w* ..... 82  
*heparin sodium (porcine)-dextrose iv sol 20000 unit/500ml-5%* ..... 82

<i>heparin sodium (porcine)-dextrose</i>	
<i>iv sol 25000 unit/500ml-5%</i>	82
HEPARIN/NACL INJ 25000UNT	82
<i>hepatamine</i>	89
HERCEP HYLEC SOL 60-10000	32
HERCEPTIN	32
HERZUMA	32
HETLIOZ	56
HIBERIX	86
HISTEX	96
HISTEX PD	96
<i>hm advanced antacid maxim</i>	73
<i>hm all day allergy childr</i>	96
<i>hm allergy relief</i>	96
<i>hm allergy relief childre</i>	96
<i>hm allergy relief nasal s</i>	99
<i>hm antacid</i>	73
<i>hm antacid anti-gas extra</i>	73
<i>hm antacid extra strength</i>	74
<i>hm antacid regular streng</i>	74
<i>hm antacid/antigas</i>	74
<i>hm anti-diarrheal</i>	75
<i>hm arthritis pain relief</i>	13
<i>hm aspirin</i>	13
<i>hm aspirin ec low dose</i>	13
<i>hm calcium antacid extra</i>	74
<i>hm cetirizine hcl childre</i>	96
<i>hm cetirizine hydrochlori</i>	96
<i>hm enema saline laxative</i>	78
<i>hm famotidine</i>	76
<i>hm fexofenadine hydrochlo</i>	96
<i>hm fiber</i>	78
<i>hm hydrocortisone plus</i>	103
<i>hm hydrocortisone/aloe ma</i>	103
<i>hm ibuprofen</i>	15
<i>hm ibuprofen childrens</i>	15
<i>hm ibuprofen ib</i>	15
<i>hm ibuprofen ib/junior st</i>	15
<i>hm ibuprofen infants</i>	15
<i>hm lansoprazole</i>	79
<i>hm laxative</i>	78
<i>hm lice killing maximum s</i>	105
<i>hm lice treatment</i>	105
<i>hm loratadine</i>	96
<i>hm loratadine childrens</i>	96
<i>hm lubricating plus</i>	93
<i>hm naproxen sodium</i>	15
<i>hm nicotine polacrilex</i>	59
<i>hm nicotine transdermal s</i>	59
<i>hm omeprazole</i>	80
<i>hm pain &amp; fever childrens</i>	13
<i>hm pain &amp; fever infants</i>	13
<i>hm pain relief</i>	13
<i>hm pain relief extra stre</i>	13
<i>hm pain reliever</i>	13
<i>hm povidone-iodine</i>	104
<i>hm stomach relief</i>	75
<i>hm stomach relief ultra</i>	75
<i>hm stool softener</i>	78
<i>hm triple antibiotic</i>	101
<i>HUMIRA</i>	83
<i>HUMIRA PEDIA INJ CROHNS</i>	83
<i>HUMIRA PEDIATRIC CROHNS D</i>	83
<i>HUMIRA PEN</i>	84
<i>HUMIRA PEN KIT PS/UV</i>	84
<i>HUMIRA PEN-CD/UC/HS START</i>	84
<i>HUMIRA PEN-PEDIATRIC UC S</i>	84
<i>HUMIRA PEN-PS/UV STARTER</i>	84
<i>HUMULIN R U-500 (CONCENTR</i>	62
<i>HUMULIN R U-500 KWIKPEN</i>	62
<i>hydralazine hcl</i>	44
<i>hydrochlorothiazide</i>	43
<i>hydrocodone bitartrate</i>	16
<i>hydrocodone-acetaminophen soln</i>	
<i>7.5-325 mg/15ml</i>	17
<i>hydrocodone-acetaminophen tab</i>	
<i>10-325 mg</i>	17
<i>hydrocodone-acetaminophen tab 5-</i>	
<i>325 mg</i>	17
<i>hydrocodone-acetaminophen tab</i>	
<i>7.5-325 mg</i>	17
<i>hydrocodone-ibuprofen tab 7.5-200</i>	
<i>mg</i>	17
<i>hydrocortisone</i>	70
<i>hydrocortisone (intrarectal)</i>	77
<i>hydrocortisone (rectal)</i>	104
<i>hydrocortisone (topical)</i>	103
<i>hydrocortisone maximum st</i>	103
<i>hydrocortisone-aloe vera cream</i>	
<i>0.5%</i>	103
<i>hydrocortisone-aloe vera cream 1%</i>	
<i>.....</i>	104
<i>hydromorphone hcl</i>	17
<i>hydroxocobalamin acetate</i>	90

<i>hydroxychloroquine sulfate</i>	84
<i>hydroxyurea</i>	30
<i>hydroxyzine hcl</i>	96
<i>hydroxyzine pamoate</i>	96
HYSINGLA ER.....	16
<b>I</b>	
<i>ibandronate sodium</i>	63
IBRANCE .....	32
<i>ibu</i>	15
<i>ibu-200</i>	15
<i>ibuprofen</i>	15
<i>ibuprofen childrens</i>	15
<i>ibuprofen infants</i>	15
<i>ibuprofen infants drops</i>	15
<i>ibuprofen junior strength</i>	16
<i>icatibant acetate</i>	83
<i>iclevia</i>	65
ICLUSIG .....	32
IDHIFA.....	32
ILEVRO .....	92
<i>imatinib mesylate</i>	32
IMBRUVICA.....	32
<i>imipenem-cilastatin intravenous for soln 250 mg</i>	19
<i>imipenem-cilastatin intravenous for soln 500 mg</i>	19
<i>imipramine hcl</i>	50
<i>imiquimod</i>	104
IMOVAZ RABIES (H.D.C.V.)	86
<i>incassia</i>	65
INCRELEX.....	71
INCRUSE ELLIPTA.....	95
<i>indapamide</i>	43
INFANRIX INJ.....	86
INFANTS ADVIL.....	16
<i>infants ibuprofen</i>	16
INFUVITE INJ.....	90
INFUVITE INJ ADULT.....	90
INFUVITE INJ PEDIATRI.....	90
INGREZZA .....	57
INGREZZA CAP 40-80MG.....	57
INLYTA.....	32
INQOVI TAB 35-100MG .....	29
INREBIC .....	32
INSULIN SAFETY NEEDLES .....	62

<b>INSULIN SYRINGES:</b>	
BD/ULTIMED/ALLISON/TRIVIDIA/ MHC .....	62
INTELENCE.....	21
INTRALIPID .....	89
INTRON A .....	85
<i>introvale</i> .....	65
INVEGA SUSTENNA .....	53
INVEGA TRINZA.....	53
INVIRASE.....	21
IPOL INJ INACTIVE .....	86
<i>ipratropium bromide</i> .....	95
<i>ipratropium bromide (nasal)</i> .....	95
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i> .....	94
<i>irbesartan</i> .....	40
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i> .....	38
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i> .....	38
IRESSA .....	32
<i>irinotecan hcl</i> .....	30
ISENTRESS .....	21, 22
ISENTRESS HD .....	22
<i>isibloom</i> .....	65
ISOLYTE-P INJ /D5W .....	87
ISOLYTE-S INJ .....	87
ISOLYTE-S INJ PH 7.4.....	87
<i>isoniazid</i> .....	23
ISOPTO ATROPINE .....	93
ISOPTO TEARS.....	93
<i>isosorbide dinitrate</i> .....	44
<i>isosorbide mononitrate</i> .....	44
<i>isotretinoin</i> .....	101
<i>isradipine</i> .....	42
<i>itraconazole</i> .....	20
<i>ivermectin</i> .....	19
IXIARO INJ.....	86
<b>J</b>	
JAKAFI .....	32
<i>jantoven</i> .....	82
JANUMET TAB 50-1000 .....	60
JANUMET TAB 50-500MG .....	60
JANUMET XR TAB 100-1000.....	61
JANUMET XR TAB 50-1000 .....	60
JANUMET XR TAB 50-500MG.....	60
JANUVIA .....	61

JARDIANCE.....	61
<i>jasmiel</i> .....	65
JENTADUETO TAB 2.5-1000.....	61
JENTADUETO TAB 2.5-500.....	61
JENTADUETO TAB 2.5-850.....	61
JENTADUETO TAB XR 2.5-1000MG .....	61
JENTADUETO TAB XR 5-1000MG .	61
<i>jinteli</i> .....	69
<i>jolessa</i> .....	65
<i>juleber</i> .....	65
JULUCA TAB 50-25MG .....	23
<i>junel 1.5/30</i> .....	65
<i>junel 1/20</i> .....	65
<i>junel fe 1.5/30</i> .....	65
<i>junel fe 1/20</i> .....	65
<i>junel fe 24</i> .....	65
<b>K</b>	
KADCYLA.....	32
<i>kaitlib fe</i> .....	65
KALYDECO.....	98
KANJINTI.....	32
<i>kariva</i> .....	65
<i>kcl 10 meq/l (0.075%) in dextrose 5% &amp; nacl 0.45% inj</i> .....	87
<i>kcl 20 meq/l (0.15%) in dextrose 5% &amp; nacl 0.2% inj</i> .....	87
<i>kcl 20 meq/l (0.15%) in dextrose 5% &amp; nacl 0.45% inj</i> .....	87
<i>kcl 20 meq/l (0.15%) in dextrose 5% &amp; nacl 0.9% inj</i> .....	87
<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i> .....	88
KCL 20 MEQ/L (0.15%) IN NACL 0.45% INJ .....	88
<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i> .....	88
<i>kcl 30 meq/l (0.224%) in dextrose 5% &amp; nacl 0.45% inj</i> .....	88
<i>kcl 40 meq/l (0.3%) in dextrose 5% &amp; nacl 0.45% inj</i> .....	88
KCL 40 MEQ/L (0.3%) IN NACL 0.9% INJ .....	88
KCL/D5W/NACL INJ 0.3/0.9% .....	88
<i>kelnor 1/35</i> .....	66
<i>kelnor 1/50</i> .....	66
<i>ketoconazole</i> .....	20
<i>ketoconazole (topical)</i> .....	102
<i>ketorolac tromethamine (ophth)</i> .	92
<i>ketotifen fumarate (ophth)</i> .....	92
KEYTRUDA .....	32
KINRIX INJ .....	86
KISQALI 200 DOSE .....	32
KISQALI 200 PAK FEMARA.....	30
KISQALI 400 DOSE .....	32
KISQALI 400 PAK FEMARA.....	30
KISQALI 600 DOSE .....	33
KISQALI 600 PAK FEMARA.....	30
<i>klor-con</i> .....	88
<i>klor-con 10</i> .....	88
<i>klor-con 8</i> .....	88
<i>klor-con m10</i> .....	88
<i>klor-con m15</i> .....	88
<i>klor-con m20</i> .....	88
<i>konsyl daily fiber</i> .....	78
KORLYM .....	71
K-PHOS .....	90
<i>kurvelo</i> .....	66
KYNMOBI .....	51
<b>L</b>	
<i>labetalol hcl</i> .....	42
<i>lactated ringer's solution</i> .....	88
<i>lactic acid (ammonium lactate)</i> .	104
<i>lactulose</i> .....	78
<i>lactulose (encephalopathy)</i> .....	78
<i>lamivudine</i> .....	22
<i>lamivudine (hbv)</i> .....	24
<i>lamivudine-zidovudine tab 150-300 mg</i> .....	23
<i>lamotrigine</i> .....	47
<i>lansoprazole</i> .....	80
<i>lapatinib ditosylate</i> .....	33
<i>larin 1.5/30</i> .....	66
<i>larin 1/20</i> .....	66
<i>larin 24 fe</i> .....	66
<i>larin fe 1.5/30</i> .....	66
<i>larin fe 1/20</i> .....	66
<i>larissia</i> .....	66
LASTACRAFT .....	92
<i>latanoprost</i> .....	93
LATUDA .....	53
<i>layolis fe</i> .....	66
<i>leena</i> .....	66
<i>leflunomide</i> .....	84

LENVIMA 10 MG DAILY DOSE.....	33
LENVIMA 12MG DAILY DOSE.....	33
LENVIMA 20 MG DAILY DOSE.....	33
LENVIMA 4 MG DAILY DOSE.....	33
LENVIMA 8 MG DAILY DOSE.....	33
LENVIMA CAP 14 MG.....	33
LENVIMA CAP 18 MG.....	33
LENVIMA CAP 24 MG.....	33
<i>lessina</i> .....	66
<i>letrozole</i> .....	29
<i>leucovorin calcium</i> .....	36
LEUKERAN .....	28
<i>leuprolide acetate</i> .....	29
<i>levalbuterol hcl</i> .....	97
<i>levalbuterol tartrate</i> .....	98
LEVEMIR .....	62
LEVEMIR FLEXTOUCH.....	62
<i>levetiracetam</i> .....	47
<i>levetiracetam in sodium chloride iv soln 1000 mg/100ml</i> .....	47
<i>levetiracetam in sodium chloride iv soln 1500 mg/100ml</i> .....	47
<i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i> .....	47
<i>levobunolol hcl</i> .....	93
<i>levocarnitine (metabolic modifiers)</i> .....	71
<i>levocetirizine dihydrochloride</i> .....	96
<i>levofloxacin</i> .....	26
<i>levofloxacin in d5w iv soln 250 mg/50ml</i> .....	26
<i>levofloxacin in d5w iv soln 500 mg/100ml</i> .....	26
<i>levofloxacin in d5w iv soln 750 mg/150ml</i> .....	26
<i>levonest</i> .....	66
<i>levonor-eth est tab 0.15-0.025/0.03 mg &amp;eth est 0.01 mg</i> .....	66
<i>levonorgestrel &amp; ethinyl estradiol (91-day) tab 0.15-0.03 mg</i> .....	66
<i>levonorgestrel &amp; ethinyl estradiol tab 0.1 mg-20 mcg</i> .....	66
<i>levonorgestrel &amp; ethinyl estradiol tab 0.15 mg-30 mcg</i> .....	66
<i>levonorgestrel (emergency oc)</i> .....	66
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i> .....	66
<i>levonorg-eth est tab 0.1-0.02mg(84) &amp; eth est tab 0.01mg(7)</i> .....	66
<i>levonorg-eth est tab 0.15-0.03mg(84) &amp; eth est tab 0.01mg(7)</i> .....	66
<i>levora 0.15/30-28</i> .....	66
<i>levo-t</i> .....	72
<i>levothyroxine sodium</i> .....	72
<i>levoxyl</i> .....	72
LEXIVA .....	22
<i>lice killing maximum stre</i> .....	105
<i>lice killing shampoo</i> .....	105
<i>lice treatment</i> .....	105
<i>lidocaine</i> .....	104
<i>lidocaine hcl</i> .....	104
<i>lidocaine hcl (local anesth.)</i> .....	18
<i>lidocaine hcl (mouth-throat)</i> .....	105
<i>lidocaine-prilocaine cream 2.5-2.5%</i> .....	104
<i>lillow</i> .....	66
<i>linezolid</i> .....	19
<i>linezolid in sodium chloride iv soln 600 mg/300ml-0.9%</i> .....	19
LINZESS .....	79
<i>liothyronine sodium</i> .....	72
<i>lisinopril</i> .....	37
<i>lisinopril &amp; hydrochlorothiazide tab 10-12.5 mg</i> .....	37
<i>lisinopril &amp; hydrochlorothiazide tab 20-12.5 mg</i> .....	37
<i>lisinopril &amp; hydrochlorothiazide tab 20-25 mg</i> .....	37
LITHIUM .....	57
<i>lithium carbonate</i> .....	57
<i>loestrin 1.5/30-21</i> .....	66
<i>loestrin 1/20-21</i> .....	66
<i>loestrin fe 1.5/30</i> .....	66
<i>loestrin fe 1/20</i> .....	66
LOKELMA .....	63
LONSURF TAB 15-6.14.....	29
LONSURF TAB 20-8.19.....	29
<i>loperamide hcl</i> .....	75, 79
LOPERAMIDE HYDROCHLORIDE ..	75

<i>lopinavir-ritonavir soln 400-100</i>	
<i>mg/5ml (80-20 mg/ml)</i>	23
<i>lopinavir-ritonavir tab 100-25 mg</i>	23
<i>lopinavir-ritonavir tab 200-50 mg</i>	23
<i>loratadine</i>	96
<i>loratadine childrens</i>	96
<i>lorazepam</i>	45
<i>lorazepam intensol</i>	45
<i>LORBRENA</i>	33
<i>loryna</i>	66
<i>losartan potassium</i>	40
<i>losartan potassium &amp;</i>	
<i>hydrochlorothiazide tab 100-12.5</i>	
<i>mg</i>	39
<i>losartan potassium &amp;</i>	
<i>hydrochlorothiazide tab 100-25</i>	
<i>mg</i>	39
<i>losartan potassium &amp;</i>	
<i>hydrochlorothiazide tab 50-12.5</i>	
<i>mg</i>	38
<i>LOTEMAX</i>	92
<i>lovastatin</i>	40
<i>low-ogestrel</i>	66
<i>loxapine succinate</i>	53
<i>lubricant eye drops</i>	93
<i>lubricant eye nighttime</i>	93
<i>lubricating plus eye drop</i>	93
<i>LUMAKRAS</i>	33
<i>LUMIGAN</i>	93
<i>LUMIZYME</i>	71
<i>LUPRON DEPOT (1-MONTH)</i>	29
<i>LUPRON DEPOT (3-MONTH)</i>	29
<i>LUPRON DEPOT-PED (1-MONTH</i>	71
<i>LUPRON DEPOT-PED (3-MONTH</i>	71
<i>lulera</i>	66
<i>lyleq</i>	66
<i>lyllana</i>	69
<i>LYNPARZA</i>	33
<i>LYSODREN</i>	29
<i>lyza</i>	66
<b>M</b>	
<i>M.V.I PEDIAT INJ.</i>	90
<i>MAG-AL LIQ</i>	74
<i>mag-al plus</i>	74
<i>mag-al plus xs</i>	74
<i>magnesium oxide</i>	74
<i>magnesium sulfate</i>	88

<b>MAGNESIUM SULFATE</b>	88
<i>magnesium sulfate in dextrose 5%</i>	
<i>iv soln 1 gm/100ml</i>	88
<i>malathion</i>	105
<i>manganese chloride</i>	90
<i>mapap</i>	13
<i>mapap acetaminophen extra</i>	13
<i>mapap arthritis pain</i>	13
<i>mapap childrens</i>	13
<i>marlissa</i>	66
<i>MARPLAN</i>	50
<i>MATULANE</i>	30
<i>MAVYRET TAB 100-40MG</i>	24
<i>m-dryl</i>	97
<i>meclizine hcl</i>	75
<i>medroxyprogesterone acetate</i>	72
<i>medroxyprogesterone acetate</i>	
<i>(contraceptive)</i>	66
<i>mefloquine hcl</i>	21
<i>megestrol acetate</i>	29, 72
<i>megestrol acetate (appetite)</i>	72
<i>MEKINIST</i>	33
<i>MEKTOVI</i>	33
<i>meloxicam</i>	16
<i>memantine hcl</i>	49
<i>memantine hcl tab 28 x 5 mg &amp; 21</i>	
<i>x 10 mg titration pack</i>	49
<i>MENACTRA INJ</i>	86
<i>MENQUADFI INJ</i>	86
<i>MENVEO INJ</i>	86
<i>MEPHYTON</i>	90
<i>mercaptopurine</i>	29
<i>meropenem</i>	19
<i>mesalamine</i>	77
<i>mesalamine w/ cleanser</i>	77
<i>MESNEX</i>	36
<i>metadate er</i>	55
<i>metamucil</i>	78
<i>metformin hcl</i>	61
<i>methadone hcl</i>	16
<i>methadone hydrochloride i</i>	17
<i>methazolamide</i>	43
<i>methenamine hippurate</i>	19
<i>methimazole</i>	72
<i>methocarbamol</i>	58
<i>methotrexate sodium</i>	29, 84
<b>METHYLDOPA</b>	44

<i>methylphenidate hcl</i> .....	55
<i>methylprednisolone</i> .....	70
<i>methylprednisolone acetate</i> .....	70
<i>methylprednisolone sod succ</i> .....	70
<i>metoclopramide hcl</i> .....	75
<i>metolazone</i> .....	43
<i>metoprolol &amp; hydrochlorothiazide</i> <i>tab 100-25 mg</i> .....	41
<i>metoprolol &amp; hydrochlorothiazide</i> <i>tab 100-50 mg</i> .....	41
<i>metoprolol &amp; hydrochlorothiazide</i> <i>tab 50-25 mg</i> .....	41
<i>metoprolol succinate</i> .....	42
<i>metoprolol tartrate</i> .....	42
<i>metronidazole</i> .....	19
<i>metronidazole (topical)</i> .....	104
<i>metronidazole in nacl 0.79% iv soln</i> <i>500 mg/100ml</i> .....	19
<i>metronidazole vaginal</i> .....	81
<i>metyrosine</i> .....	44
<i>MG SO4/D5W INJ 10MG/ML</i> .....	88
<i>mi-acid</i> .....	74
<i>mibelas 24 fe</i> .....	67
<i>micafungin sodium</i> .....	20
<i>miconazole 1</i> .....	81
<i>miconazole 3</i> .....	81
<i>miconazole 3 combination</i> .....	81
<i>miconazole 3 combo pack</i> .....	81
<i>miconazole 7</i> .....	81
<i>miconazole nitrate (topical)</i> .....	102
<i>miconazole nitrate vaginal</i> .....	81
<i>miconazole nitrate vaginal supp</i> <i>1200 mg &amp; 2% cream kit</i> .....	81
<i>microgestin 1.5/30</i> .....	67
<i>microgestin 1/20</i> .....	67
<i>microgestin fe 1.5/30</i> .....	67
<i>microgestin fe 1/20</i> .....	67
<i>midodrine hcl</i> .....	44
<i> miglustat</i> .....	71
<i> mili</i> .....	67
<i> mimvey</i> .....	69
<i> minitran</i> .....	44
<i> minocycline hcl</i> .....	28
<i> minoxidil</i> .....	44
<i> mintox maximum strength</i> .....	74
<i> mirtazapine</i> .....	50
<i> misoprostol</i> .....	79
<b>MITIGARE</b> .....	12
<b>M-M-R II INJ</b> .....	86
<b>M-NATAL PLUS TAB</b> .....	88
<i> moexipril hcl</i> .....	37
<i> molindone hcl</i> .....	53
<i> mometasone furoate</i> .....	104
<i> monodoxyne nl</i> .....	28
<b>MONJUVI</b> .....	33
<i> mono-linyah</i> .....	67
<i> montelukast sodium</i> .....	98
<i> morphine sulfate</i> .....	17
<b>MORPHINE SULFATE</b> .....	17
<b>MOVANTIK</b> .....	79
<i> moxifloxacin hcl</i> .....	26
<i> moxifloxacin hcl (ophth)</i> .....	91
<i> m-pap</i> .....	13
<b>MULTAQ</b> .....	40
<i> multi-vit/iron/fluoride</i> .....	90
<i> multivitamin with fluorid</i> .....	90
<i> multivitamin/fluoride</i> .....	90
<i> multivitamin/fluoride/iro</i> .....	90
<i> mupirocin</i> .....	101
<b>MVASI</b> .....	33
<i> mvc-fluoride</i> .....	90
<i> my choice</i> .....	67
<i> my way</i> .....	67
<i> mycophenolate mofetil</i> .....	86
<i> mycophenolate sodium</i> .....	86
<i> myorisan</i> .....	101
<b>MYRBETRIQ</b> .....	80
<b>N</b>	
<i> nabumetone</i> .....	16
<i> nadolol</i> .....	42
<i> nafcillin sodium</i> .....	27
<b>NAGLAZYME</b> .....	71
<i> nalbuphine hcl</i> .....	18
<i> naloxone hcl</i> .....	59
<i> naltrexone hcl</i> .....	59
<b>NAMZARIC CAP 14-10MG</b> .....	49
<b>NAMZARIC CAP 21-10MG</b> .....	49
<b>NAMZARIC CAP 28-10MG</b> .....	49
<b>NAMZARIC CAP 7-10MG</b> .....	49
<b>NAMZARIC CAP PACK</b> .....	49
<i> naproxen</i> .....	16
<i> naproxen sodium</i> .....	16
<i> naratriptan hcl</i> .....	56
<b>NARCAN</b> .....	59

NASCOBAL .....	90
NATACYN.....	91
<i>nateglinide</i> .....	61
NATPARA.....	63
NAYZILAM .....	47
<i>necon 0.5/35-28</i> .....	67
<i>nefazodone hcl</i> .....	50
<i>neomycin sulfate</i> .....	19
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i> .....	91
<i>neomycin-polomy-gramcid op sol 1.75-10000-0.025mg-unt-mg/ml</i> .....	92
<i>neomycin-polymyxin- dexamethasone ophth oint 0.1%</i> .....	91
<i>neomycin-polymyxin- dexamethasone ophth susp 0.1%</i> .....	91
<i>neomycin-polymyxin-hc ophth susp</i> .....	91
<i>neomycin-polymyxin-hc otic soln 1%</i> .....	94
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i> ..94	
NEPHPLEX RX TAB .....	90
NERLYNX.....	33
NEUPRO .....	51
<i>nevirapine</i> .....	22
<i>new day</i> .....	67
NEXAVAR .....	33
<i>niacin</i> .....	90
<i>niacin (antihyperlipidemic)</i> .....	41
<i>nicardipine hcl</i> .....	42
NICODERM CQ .....	59
NICORETTE.....	59
NICORETTE MINI.....	59
NICORETTE STARTER KIT .....	59
<i>nicotine</i> .....	59
<i>nicotine mini lozenge</i> .....	59
<i>nicotine polacrilex</i> .....	59
NICOTINE SYS KIT TRANSDER .....	59
<i>nicotine transdermal syst</i> .....	59
NICOTROL INHALER.....	59
NICOTROL NS .....	59
<i>nifedipine</i> .....	42

<i>nikki</i> .....	67
<i>nilutamide</i> .....	29
<i>nimodipine</i> .....	42
NINLARO.....	33
<i>nitazoxanide</i> .....	19
<i>nitisinone</i> .....	71
NITRO-BID .....	44
<i>nitrofurantoin macrocrystal</i> .....	19
<i>nitrofurantoin monohyd macro</i> ...	19
<i>nitroglycerin</i> .....	44
<i>nizatidine</i> .....	76
<i>non-aspirin pain relief e</i> .....	13
<i>nora-be</i> .....	67
<i>norethindrone &amp; ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i> .....	67
<i>norethindrone &amp; ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i> .....	67
<i>norethindrone (contraceptive)</i> ....	67
<i>norethindrone ace &amp; ethinyl estradiol tab 1 mg-20 mcg</i> .....	67
<i>norethindrone ace &amp; ethinyl estradiol tab 1.5 mg-30 mcg</i> ....	67
<i>norethindrone ace &amp; ethinyl estradiol-fe tab 1 mg-20 mcg</i> ...67	
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i> ....67	
<i>norethindrone acetate</i> .....	72
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i> ...69	
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i> .....	69
<i>norgestimate &amp; ethinyl estradiol tab 0.25 mg-35 mcg</i> .....	67
<i>norgestimate-eth estrad tab 0.18- 25/0.215-25/0.25-25 mg-mcg</i> .67	
<i>norgestimate-eth estrad tab 0.18- 35/0.215-35/0.25-35 mg-mcg</i> .67	
<i>norlyroc</i> .....	67
NORPACE CR .....	40
<i>nortrel 0.5/35 (28)</i> .....	67
<i>nortrel 1/35 (21)</i> .....	67
<i>nortrel 1/35 (28)</i> .....	67
<i>nortrel 7/7/7</i> .....	67
<i>nortriptyline hcl</i> .....	50
NORVIR .....	22
NOVOLIN INJ 70/30.....	62
NOVOLIN INJ 70/30 FP .....	62

NOVOLIN N.....	62
NOVOLIN N FLEXPEN .....	62
NOVOLIN R.....	62
NOVOLIN R FLEXPEN.....	62
NOVOLOG.....	62
NOVOLOG FLEXPEN .....	62
NOVOLOG MIX INJ 70/30 .....	62
NOVOLOG MIX INJ FLEXPEN .....	63
NOVOLOG PENFILL .....	63
NOXAFILE.....	21
NUBEQA.....	29
NUEDEXTA CAP 20-10MG .....	57
NULOJIX.....	86
NULYTELY SOL LMN/LIME .....	78
NUPLAZID .....	53
NUTRILIPID .....	89
<i>nyamyc</i> .....	102
<i>nylia 7/7/7</i> .....	67
NYMALIZE .....	42
<i>nymyo</i> .....	67
<i>nystatin</i> .....	21
<i>nystatin (mouth-throat)</i> .....	106
<i>nystatin (topical)</i> .....	102
<i>nystop</i> .....	102
<b>O</b>	
<i>ocella</i> .....	67
OCTAGAM.....	85
<i>octreotide acetate</i> .....	71
ODEFSEY TAB .....	23
ODOMZO .....	33
OFEV .....	98
<i>ofloxacin (ophth)</i> .....	92
<i>ofloxacin (otic)</i> .....	94
OGIVRI .....	33
OGIVRI INJ 420MG .....	33
olanzapine .....	53
<i>olmesartan medoxomil</i> .....	40
<i>olmesartan medoxomil-</i> <i>hydrochlorothiazide tab 20-12.5</i> <i>mg</i> .....	39
<i>olmesartan medoxomil-</i> <i>hydrochlorothiazide tab 40-12.5</i> <i>mg</i> .....	39
<i>olmesartan medoxomil-</i> <i>hydrochlorothiazide tab 40-25 mg</i> .....	39

<i>olmesartan-amlodipine-</i> <i>hydrochlorothiazide tab 20-5-12.5</i> <i>mg</i> .....	39
<i>olmesartan-amlodipine-</i> <i>hydrochlorothiazide tab 40-10-</i> <i>12.5 mg</i> .....	39
<i>olmesartan-amlodipine-</i> <i>hydrochlorothiazide tab 40-10-25</i> <i>mg</i> .....	39
<i>olmesartan-amlodipine-</i> <i>hydrochlorothiazide tab 40-5-12.5</i> <i>mg</i> .....	39
<i>olmesartan-amlodipine-</i> <i>hydrochlorothiazide tab 40-5-25</i> <i>mg</i> .....	39
<i>olopatadine hcl</i> .....	92
<i>omeprazole</i> .....	80
OMNIPOD KIT STARTER .....	63
OMNIPOD MIS 5 PACK .....	63
<i>ondansetron</i> .....	76
<i>ondansetron hcl</i> .....	76
ONTRUZANT .....	33
ONUREG .....	29
<i>opcicon one-step</i> .....	67
OPSUMIT .....	44
<i>option 2</i> .....	67
ORGOVYX.....	29
ORKAMBI GRA 100-125 .....	98
ORKAMBI GRA 150-188 .....	98
ORKAMBI TAB 100-125 .....	98
ORKAMBI TAB 200-125 .....	99
<i>orsythia</i> .....	67
<i>oseltamivir phosphate</i> .....	24
<i>oxacillin sodium</i> .....	27
<i>oxaliplatin</i> .....	28
<i>oxandrolone</i> .....	60
<i>oxcarbazepine</i> .....	47
<i>oxybutynin chloride</i> .....	80
<i>oxycodone hcl</i> .....	18
<i>oxycodone w/ acetaminophen tab</i> <i>10-325 mg</i> .....	18
<i>oxycodone w/ acetaminophen tab</i> <i>2.5-325 mg</i> .....	18
<i>oxycodone w/ acetaminophen tab</i> <i>5-325 mg</i> .....	18
<i>oxycodone w/ acetaminophen tab</i> <i>7.5-325 mg</i> .....	18

OXYCONTIN .....	17
OZEMPIC (0.25 OR 0.5MG/DOSE)	61
OZEMPIC (1MG/DOSE) .....	61
<b>P</b>	
pacerone .....	40
paclitaxel.....	30
<i>pain &amp; fever childrens</i> .....	13
<i>pain &amp; fever infants</i> .....	13
<i>pain relief extra strengt</i> .....	13
paliperidone.....	53
pamidronate disodium.....	63
PAMIDRONATE DISODIUM .....	63
PANRETIN.....	105
pantoprazole sodium.....	80
PANZYGA.....	85
paraplatin .....	28
paricalcitol .....	73
<i>paromomycin sulfate</i> .....	19
paroxetine hcl .....	50
PASER.....	23
PAXIL.....	50
<i>pediaclear pd childrens</i> .....	97
PEDIARIX INJ 0.5ML .....	86
PEDIAVENT .....	97
PEDVAX HIB .....	86
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm.....	78
peg 3350-kcl-sod bicarb-nacl for soln 420 gm.....	78
PEGASYS .....	24
PEMAZYRE .....	33
PEN GK/DEXTR INJ 40000/ML .....	27
PEN GK/DEXTR INJ 60000/ML .....	27
PEN NEEDLES:	
NOVO/BD/ULTIMED/OWEN/TRIVI DIA .....	63
penicillamine.....	63
penicillin g potassium.....	27
PENICILLIN G PROCAINE .....	27
penicillin g sodium .....	27
penicillin v potassium .....	27
PENTACEL INJ .....	87
pentamidine isethionate inh .....	19
pentamidine isethionate inj .....	19
pentoxifylline .....	83
peptic relief .....	75
PEPTO BISMOL.....	75
PEPTO-BISMOL .....	75
perindopril erbumine .....	37
periogard .....	106
permethrin .....	105
perphenazine.....	53
PERSERIS .....	53
pfizerpen.....	27
pharbedryl .....	97
pharbetol .....	13
pharbetol extra strength .....	13
phenelzine sulfate .....	50
phenobarbital .....	47
phenobarbital sodium .....	47
PHENYTEK.....	47
phenytoin .....	47
phenytoin sodium .....	47
phenytoin sodium extended.....	47
PHESGO SOL .....	33
philith .....	68
phytonadione.....	90
PIFELTRO .....	22
pilocarpine hcl .....	93
pilocarpine hcl (oral).....	106
pimozide .....	53
pimtrea .....	68
pindolol.....	42
pioglitazone hcl .....	61
piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm).....	27
piperacillin sod-tazobactam sod for inj 13.5 gm (12-1.5 gm) .....	27
piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm) .....	27
piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm) .....	27
piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm) .....	27
PIQRAY 200MG DAILY DOSE.....	33
PIQRAY 250MG TAB DOSE.....	33
PIQRAY 300MG DAILY DOSE.....	33
pirmella 1/35.....	68
piroxicam .....	16
PLAN B ONE-STEP .....	68
PLASMA-LYTE INJ -148 .....	88
PLASMA-LYTE INJ -A.....	88
plenamine .....	89
PLENVU SOL.....	78

<i>podofilox</i>	105
<i>polyethylene glycol 3350</i>	78
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	92
POMALYST	30
<i>portia-28</i>	68
<i>posaconazole</i>	21
<i>potassium chloride</i>	88
POTASSIUM CHLORIDE	88
<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i>	88
<i>potassium chloride</i>	
<i>microencapsulated crystals er</i>	89
<i>potassium citrate (alkalinizer)</i>	80
<i>povidone-iodine</i>	105
PRALUENT	41
<i>pramipexole dihydrochloride</i>	51
<i>prasugrel hcl</i>	83
<i>pravastatin sodium</i>	40
<i>praziquantel</i>	20
<i>prazosin hcl</i>	37
<i>prednisolone</i>	70
<i>prednisolone acetate (ophth)</i>	92
PREDNISOLONE SODIUM PHOSP	92
<i>prednisolone sodium phosphate</i>	70
<i>prednisone</i>	70
PREDNISONE INTENSOL	70
<i>pregabalin</i>	47
<i>pregabalin (once-daily)</i>	57
PREMASOL SOL 10%	89
PRENATAL TAB 27-1MG	89
PRENATAL TAB PLUS	89
PRENATAL VIT TAB LOW IRON	89
PREVACID 24HR	80
<i>prevalite</i>	41
<i>previfem</i>	68
PREVYMIS	24
PREZCOBIX TAB 800-150	23
PREZISTA	22
PRIFTIN	23
<i>primaquine phosphate</i>	21
PRIMAQUINE PHOSPHATE	21
<i>primidone</i>	47
PRIVIGEN	85
<i>probencid</i>	12
PROCALAMINE INJ 3%	89
<i>prochlorperazine</i>	76

<i>prochlorperazine edisylate</i>	76
<i>prochlorperazine maleate</i>	76
PROCERIT	82
<i>procto-med hc</i>	105
<i>procto-pak</i>	105
<i>proctozone-hc</i>	105
PROGRAF	86
PROLASTIN-C	99
PROLENSA	92
PROLIA	63
PROMACTA	83
<i>promethazine hcl</i>	76
<i>propafenone hcl</i>	40
<i>proparacaine hcl</i>	93
<i>propranolol hcl</i>	42
<i>propylthiouracil</i>	72
PROQUAD INJ	87
PROSOL INJ 20%	89
<i>protriptyline hcl</i>	50
PULMICORT FLEXHALER	100
PULMOZYME	99
PURIXAN	29
<i>pyrazinamide</i>	23
<i>pyridostigmine bromide</i>	57
<i>pyridoxine hcl</i>	90
<b>Q</b>	
<i>qc 3 day vaginal cream</i>	81
<i>qc acid controller</i>	77
<i>qc acid controller maximu</i>	77
<i>qc all day allergy</i>	97
<i>qc allergy relief</i>	99
<i>qc antacid</i>	74
<i>qc antacid/anti-gas</i>	74
<i>qc antacid/anti-gas maxim</i>	74
<i>qc anti-diarrheal</i>	75
<i>qc arthritis pain relief</i>	13
<i>qc aspirin</i>	14
<i>qc aspirin low dose</i>	14
<i>qc chewable aspirin low d</i>	14
<i>qc childrens allergy</i>	97
<i>qc childrens ibuprofen</i>	16
<i>qc chlor-pheniramine</i>	97
<i>qc complete allergy medic</i>	97
<i>qc diarrhea relief</i>	75
<i>qc enema</i>	78
<i>qc enteric aspirin</i>	14
<i>qc fexofenadine hydrochlo</i>	97

<i>qc gentle laxative</i>	78
<i>qc ibuprofen</i>	16
<i>qc ibuprofen ib</i>	16
<i>qc lansoprazole</i>	80
<i>qc loratadine allergy rel</i>	97
<i>qc miconazole 7</i>	81
<i>qc naproxen sodium</i>	16
<i>qc natural vegetable</i>	78
<i>qc non-aspirin childrens</i>	14
<i>qc non-aspirin extra stre</i>	14
<i>qc pain relief</i>	14
<i>qc pain relief childrens</i>	14
<i>qc pain relief extra stre</i>	14
<i>qc pink bismuth</i>	75
<i>qc povidone iodine</i>	105
<i>qc stool softener</i>	78
<i>qc tolnaftate</i>	102
QINLOCK	33
QUADRACEL INJ	87
<i>quetiapine fumarate</i>	53
<i>quinapril hcl</i>	37
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	37
<i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i>	37
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	37
<i>quinidine sulfate</i>	40
<i>quinine sulfate</i>	21
<b>R</b>	
RABAVERT INJ	87
<i>rabeprazole sodium</i>	80
<i>raloxifene hcl</i>	71
<i>ramipril</i>	37
<i>ranolazine</i>	44
<i>rasagiline mesylate</i>	51
RAYALDEE	73
<i>reclipsen</i>	68
RECOMBIVAX HB	87
RECTIV	105
<i>refresh celluvisc</i>	94
<i>refresh lacri-lube</i>	94
REFRESH LIQUIGEL	94
<i>refresh p.m.</i>	94
REFRESH PLUS	94
REFRESH TEARS	94
REGRANEX	105

RELENZA DISKHALER	24
RELISTOR	79
REMICADE	84
<i>renal caps</i>	90
RENFLEXIS	84
<i>reno caps</i>	90
RENOVA	105
RENOVA PUMP	105
<i>repaglinide</i>	61
RESTASIS	94
RESTASIS MULTIDOSE	94
RETEVMO	34
REVLIMID	30
REXULTI	53
REYATAZ	22
REZUROCK	86
RHOPRESSA	93
RIABNI	34
<i>ribavirin (hepatitis c)</i>	24
<i>rifabutin</i>	23
<i>rifampin</i>	23
<i>riluzole</i>	57
<i>rimantadine hydrochloride</i>	24
RINVOQ	84
<i>risedronate sodium</i>	63
RISPERDAL CONSTA	54
<i>risperidone</i>	54
<i>ritonavir</i>	22
RITUXAN	34
RITUXAN INJ HYCELA	34
<i>rivastigmine</i>	49
<i>rivastigmine tartrate</i>	49
<i>rivelsa</i>	68
<i>rizatriptan benzoate</i>	56
<i>ropinirole hydrochloride</i>	52
<i>rosadan</i>	105
<i>rosuvastatin calcium</i>	41
ROTARIX SUS	87
ROTATEQ SOL	87
<i>roweepra</i>	47
ROZLYTREK	34
RUBRACA	34
<i>rufinamide</i>	47
RUKOBIA	22
RUXIENCE	34
RYBELSUS	61
RYDAPT	34

**S**

<i>sajazir</i> .....	83
SANDIMMUNE .....	86
SANTYL .....	105
<i>sapropterin dihydrochloride</i> .....	71
<i>scalpicin maximum strengt</i> .....	104
<i>scopolamine</i> .....	76
SECUADO .....	54
<i>selegiline hcl</i> .....	52
<i>selenium sulfide</i> .....	102
SELZENTRY.....	22
SEREVENT DISKUS .....	98
<i>sertraline hcl</i> .....	50
<i>setlakin</i> .....	68
<i>sevelamer carbonate</i> .....	72
<i>sharobel</i> .....	68
SHINGRIX .....	87
SIGNIFOR.....	71
<i>silace</i> .....	78
<i>siladryl allergy</i> .....	97
<i>sildenafil citrate (pulmonary hypertension)</i> .....	44
<i>silver sulfadiazine</i> .....	101
SIMBRINZA SUS 1-0.2% .....	93
<i>simliya</i> .....	68
<i>simpesse</i> .....	68
<i>simvastatin</i> .....	41
<i>sirolimus</i> .....	86
SIRTURO .....	24
SIVEXTRO .....	20
SKYRIZI .....	84
SKYRIZI PEN.....	84
SLOW-MAG TAB .....	90
<i>sm 3-day vaginal</i> .....	81
<i>sm acid reducer</i> .....	77
<i>sm acid reducer maximum s</i> .....	77
<i>sm all day allergy</i> .....	97
<i>sm all day allergy childr</i> .....	97
<i>sm allergy 4 hour</i> .....	97
<i>sm allergy childrens</i> .....	97
<i>sm allergy relief</i> .....	97
<i>sm allergy relief nasal s</i> .....	99
<i>sm antacid</i> .....	74
<i>sm antacid advanced</i> .....	74
<i>sm antacid advanced maxi</i> .....	74
<i>sm antacid maximum streng</i> .....	74
<i>sm antacid/antigas</i> .....	74
<i>sm anti-diarrheal</i> .....	75
<i>sm antifungal clotrimazol</i> .....	102
<i>sm antifungal miconazole</i> .....	102
<i>sm antifungal tolnaftate</i> .....	102
<i>sm arthritis pain relieve</i> .....	14
<i>sm aspirin</i> .....	14
<i>sm aspirin adult low stre</i> .....	14
<i>sm aspirin enteric coated</i> .....	14
<i>sm aspirin low dose</i> .....	14
<i>sm calcium antacid</i> .....	74
<i>sm calcium antacid extra</i> .....	74
<i>sm childrens aspirin</i> .....	14
<i>sm childrens ibuprofen</i> .....	16
<i>sm clotrimazole vaginal</i> .....	81
<i>sm enema</i> .....	78
<i>sm eye itch relief</i> .....	92
<i>sm fexofenadine hydrochlo</i> .....	97
<i>sm fiber</i> .....	78
<i>sm gentle laxative</i> .....	78
<i>sm hydrocortisone</i> .....	104
<i>sm hydrocortisone maximum</i> .....	104
<i>sm hydrocortisone plus</i> .....	104
<i>sm hydrocortisone/aloe ma</i> .....	104
<i>sm ibuprofen</i> .....	16
<i>sm ibuprofen ib</i> .....	16
<i>sm infants ibuprofen</i> .....	16
<i>sm lansoprazole</i> .....	80
<i>sm laxative</i> .....	78
<i>sm lice killing maximum s</i> .....	105
<i>sm lice treatment</i> .....	105
<i>sm loratadine</i> .....	97
<i>sm lubricating plus</i> .....	94
<i>sm miconazole 3</i> .....	81
<i>sm miconazole 7</i> .....	81
<i>sm naproxen sodium</i> .....	16
<i>sm nicotine</i> .....	59
<i>sm nicotine polacrilex</i> .....	60
<i>sm nicotine transdermal s</i> .....	60
<i>sm omeprazole</i> .....	80
<i>sm pain &amp; fever childrens</i> .....	14
<i>sm pain &amp; fever infants</i> .....	14
<i>sm pain relief extra stre</i> .....	14
<i>sm pain reliever</i> .....	14
<i>sm pain reliever extra st</i> .....	14
<i>sm povidone-iodine</i> .....	105
<i>sm stomach relief</i> .....	75
<i>sm stool softener</i> .....	78

<i>sm tioconazole-1</i>	81
<i>sm triple antibiotic orig</i>	101
<i>sodium bicarbonate (antacid)</i>	74
<i>sodium chloride</i>	88
<i>sodium chloride (gu irrigant)</i>	105
<i>sodium fluoride chew; tab; 1.1 (0.5 f) mg/ml soln</i>	89
<i>sodium phenylbutyrate</i>	71
<i>sodium polystyrene sulfonate powder</i>	64
<i>solifenacin succinate</i>	80
SOLIQUA INJ 100/33	63
SOLTAMOX	29
SOLU-CORTEF	70
SOMATULINE DEPOT	71
SOMAVERT	71
<i>soothe &amp; cool inzo antifu</i>	102
<i>sorine</i>	40
<i>sotalol hcl</i>	40
<i>sotalol hcl (afib/afl)</i>	40
<i>spironolactone</i>	37
<i>spironolactone &amp; hydrochlorothiazide tab 25-25 mg</i>	43
<i>sprintec 28</i>	68
SPRITAM	47, 48
SPRYCEL	34
<i>sps</i>	64
<i>sronyx</i>	68
<i>ssd</i>	101
<i>st joseph aspirin</i>	14
<i>st joseph low dose aspiri</i>	14
STELARA	84
STIVARGA	34
<i>stomach relief</i>	75
<i>stomach relief extra stre</i>	75
<i>stomach relief ultra</i>	75
<i>stool softener</i>	78
<i>stool softener laxative</i>	78
<i>stool softener laxative e</i>	78
<i>streptomycin sulfate</i>	20
STRIBILD TAB	23
STROVITE FOR TAB	91
STROVITE ONE TAB	91
<i>subvenite</i>	48
<i>sucralfate</i>	79
<i>sulfacetamide sodium (acne)</i>	101
<i>sulfacetamide sodium (ophth)</i>	92
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	91
SULFADIAZINE	20
<i>sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml</i>	20
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	20
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	20
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	20
SULFAMYLYON	101
<i>sulfasalazine</i>	77
<i>sulindac</i>	16
<i>sumatriptan</i>	56
<i>sumatriptan succinate</i>	56, 57
<i>sunitinib malate</i>	34
SUPREP BOWEL SOL PREP KIT	78
<i>syeda</i>	68
SYMBICORT AER 160-4.5	100
SYMBICORT AER 80-4.5	100
SYMDEKO TAB 100-150	99
SYMDEKO TAB 50-75MG	99
SYMJEPI	99
SYMPAZAN	48
SYMTUZA TAB	23
SYNAREL	69
SYNERCID INJ 500MG	20
SYNJARDY TAB 12.5-1000MG	61
SYNJARDY TAB 12.5-500	61
SYNJARDY TAB 5-1000MG	61
SYNJARDY TAB 5-500MG	61
SYNJARDY XR TAB 10-1000	61
SYNJARDY XR TAB 12.5-1000MG	61
SYNJARDY XR TAB 25-1000	61
SYNJARDY XR TAB 5-1000MG	61
SYNRIBO	30
SYNTHROID	72
<i>systane nighttime</i>	94
SYSTANE OVERNIGHT THERAPY	94
<b>T</b>	
TABLOID	29
TABRECTA	34
<i>tacrolimus</i>	86
<i>tacrolimus (topical)</i>	105
TAFINLAR	34

TAGRISSO .....	34
<i>take action</i> .....	68
TALTZ .....	84
TALZENNA .....	34
<i>tamoxifen citrate</i> .....	29
<i>tamsulosin hcl</i> .....	80
TARGRETIN.....	105
<i>tarina 24 fe</i> .....	68
<i>tarina fe 1/20 eq</i> .....	68
TASIGNA.....	34
<i>tazarotene</i> .....	102
<i>tazicef</i> .....	25
TAZORAC .....	102
<i>taztia xt</i> .....	43
TAZVERIK.....	34
TDVAX INJ 2-2 LF .....	87
TECENTRIQ.....	34
TEFLARO .....	25
<i>telmisartan</i> .....	40
<i>telmisartan-amlodipine tab 40-10 mg</i> .....	39
<i>telmisartan-amlodipine tab 40-5 mg</i> .....	39
<i>telmisartan-amlodipine tab 80-10 mg</i> .....	39
<i>telmisartan-amlodipine tab 80-5 mg</i> .....	39
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i> .....	39
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i> .....	39
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i> .....	39
temazepam.....	56
TEMIXYS TAB 300-300 .....	23
TENIVAC INJ 5-2LF .....	87
<i>tenofovir disoproxil fumarate</i> .....	22
<i>tension headache</i> .....	14
TEPMETKO .....	34
<i>terazosin hcl</i> .....	37
<i>terbinafine hcl</i> .....	21
<i>terbutaline sulfate</i> .....	98
<i>terconazole vaginal</i> .....	81
<i>testosterone</i> .....	60
<i>testosterone cypionate</i> .....	60
<i>testosterone enanthate</i> .....	60
<i>tetrabenazine</i> .....	57
<i>tetracycline hcl</i> .....	28
THALOMID .....	30
THEO-24 .....	99
<i>theophylline</i> .....	99
<i>thiamine hcl</i> .....	91
<i>thioridazine hcl</i> .....	54
<i>thiothixene</i> .....	54
<i>tiadylt er</i> .....	43
<i>tiagabine hcl</i> .....	48
TIBSOVO.....	34
<i>tigecycline</i> .....	28
TIGECYCLINE.....	28
<i>tilia fe</i> .....	68
<i>timolol maleate</i> .....	42
<i>timolol maleate (ophth)</i> .....	93
<i>timolol maleate (ophth) once-daily</i> .....	93
<i>tioconazole 1</i> .....	81
TIVICAY .....	22
TIVICAY PD .....	22
<i>tizanidine hcl</i> .....	58
TOBRADEX OIN 0.3-0.1% .....	91
TOBRADEX ST SUS 0.3-0.05.....	91
<i>tobramycin</i> .....	20
<i>tobramycin (ophth)</i> .....	92
<i>tobramycin sulfate</i> .....	20
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i> .....	91
<i>tolnaftate</i> .....	102
<i>tolnaftate antifungal</i> .....	102
<i>tolterodine tartrate</i> .....	80
<i>topiramate</i> .....	48
<i>toposar</i> .....	30
<i>toremifene citrate</i> .....	29
<i>torsemide</i> .....	43
TOVIAZ .....	80
TPN ELECTROL INJ .....	88
TRADJENTA .....	61
<i>tramadol hcl</i> .....	18
<i>tramadol-acetaminophen tab 37.5-325 mg</i> .....	18
<i>trandolapril</i> .....	37
<i>tranexamic acid</i> .....	83
<i>tranylcypromine sulfate</i> .....	50
TRAVASOL INJ 10%.....	89
TRAZIMERA .....	34
<i>trazodone hcl</i> .....	50

TRECATOR .....	24
TRELEGY AER ELLIPTA 100-62.5-25	
MCG.....	94
TRELEGY AER ELLIPTA 200-62.5-25	
MCG.....	94
TRELSTAR MIXJECT .....	29
<i>treprostinil</i> .....	45
TRESIBA.....	63
TRESIBA FLEXTOUCH .....	63
<i>tretinoin</i> .....	101
<i>tretinoin (chemotherapy)</i> .....	30
<i>triamcinolone acetonide (mouth)</i>	
.....	106
<i>triamcinolone acetonide (topical)</i>	
.....	104
<i>triamterene &amp; hydrochlorothiazide</i>	
cap 37.5-25 mg .....	43
<i>triamterene &amp; hydrochlorothiazide</i>	
tab 37.5-25 mg .....	43
<i>triamterene &amp; hydrochlorothiazide</i>	
tab 75-50 mg .....	43
<i>tri-buffered aspirin</i> .....	14
TRICARE TAB PRENATAL.....	89
<i>triderm</i> .....	104
<i>trientine hcl</i> .....	64
<i>tri-estarrylla</i> .....	68
<i>trifluoperazine hcl</i> .....	54
<i>trifluridine</i> .....	92
<i>trihexyphenidyl hcl</i> .....	52
TRIJARDY XR TAB ER 24HR 10-5-	
1000MG.....	61
TRIJARDY XR TAB ER 24HR 12.5-	
2.5-1000MG.....	61
TRIJARDY XR TAB ER 24HR 25-5-	
1000MG.....	62
TRIJARDY XR TAB ER 24HR 5-2.5-	
1000MG.....	61
TRIKAFTA TAB 100-50-75MG &	
150MG .....	99
TRIKAFTA TAB 50-25-37.5MG &	
75MG .....	99
<i>tri-legest fe</i> .....	68
<i>tri-linyah</i> .....	68
<i>tri-lo-estarrylla</i> .....	68
<i>tri-lo-marzia</i> .....	68
<i>tri-lo-mili</i> .....	68
<i>tri-lo-sprintec</i> .....	68
<i>trimethoprim</i> .....	20
<i>tri-mili</i> .....	68
<i>trimipramine maleate</i> .....	50
TRINTELLIX .....	50
<i>tri-nymyo</i> .....	68
<i>triphocaps</i> .....	91
<i>triple antibiotic</i> .....	101
<i>tri-previfem</i> .....	68
<i>triprolidine hcl</i> .....	97
TRIPROLIDINE HYDROCHLORID ..	97
<i>tri-sprintec</i> .....	68
TRIUMEQ TAB .....	23
<i>tri-vitamin/fluoride</i> .....	91
<i>trivora-28</i> .....	68
<i>tri-vylibra</i> .....	68
<i>tri-vylibra lo</i> .....	68
TROGARZO.....	22
TROPHAMINE INJ 10%.....	89
<i>trospium chloride</i> .....	80
TRUE METRIX KIT AIR.....	106
TRUE METRIX KIT METER .....	106
TRUE METRIX STRIPS .....	106
TRULICITY.....	62
TRUMENBA INJ .....	87
TRUSELTIQ 100 MG DAILY DOSE	34
TRUSELTIQ 125 MG DAILY DOSE	34
TRUSELTIQ 50 MG DAILY DOSE ..	34
TRUSELTIQ 75 MG DAILY DOSE ..	34
TRUXIMA.....	34
TUKYSA .....	34
TUMS.....	74
TUMS CHEWY BITES .....	74
TUMS CHEWY DELIGHTS .....	74
TUMS E-X 750 .....	74
TUMS EXTRA STRENGTH 750.....	74
<i>tums smoothies</i> .....	74
TUMS SMOOTHIES .....	74
TUMS ULTRA 1000 .....	74
TURALIO .....	34
TWINRIX INJ .....	87
TYBOST .....	22
<i>tydemy</i> .....	68
TYPHIM VI.....	87
<b>U</b>	
UBRELVY .....	57
UKONIQ .....	34
<i>unithroid</i> .....	72

<i>ursodiol</i>	79
<b>V</b>	
<i>valacyclovir hcl</i>	24
<i>VALCHLOR</i>	105
<i>valganciclovir hcl</i>	24
<i>valproate sodium</i>	48
<i>valproic acid</i>	48
<i>valsartan</i>	40
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	39
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	39
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	39
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	39
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	39
<i>VALTOCO</i>	48
<i>vanadom</i>	58
<i>vancomycin hcl</i>	20
<i>VANCOMYCIN INJ 1 GM</i>	20
<i>VANCOMYCIN INJ 500MG</i>	20
<i>VANCOMYCIN INJ 750MG</i>	20
<i>vandazole</i>	81
<i>VAQTA</i>	87
<i>VARIVAX</i>	87
<i>VASCEPA</i>	41
<i>VELCADE</i>	35
<i>velvet</i>	68
<i>VELTASSA</i>	64
<i>VEMLIDY</i>	24
<i>VENCLEXTA</i>	35
<i>VENCLEXTA TAB START PK</i>	35
<i>venlafaxine hcl</i>	50
<i>VENTAVIS</i>	45
<i>VENTOLIN HFA</i>	98
<i>VENTOLIN HFA (INSTITUTIONAL PACK)</i>	98
<i>verapamil hcl</i>	43
<i>VERSACLOZ</i>	54
<i>VERZENIO</i>	35
<i>vestura</i>	68
<i>V-GO 20 KIT</i>	63
<i>V-GO 30 KIT</i>	63
<i>V-GO 40 KIT</i>	63
<i>VICTOZA</i>	62
<i>vienna</i>	68
<i>vigabatrin</i>	48
<i>vigadrone</i>	48
<i>VIIBRYD</i>	50
<i>VIIBRYD KIT STARTER</i>	50
<i>VIMPAT</i>	48
<i>vincristine sulfate</i>	30
<i>vinorelbine tartrate</i>	31
<i>viorele</i>	68
<i>VIRACEPT</i>	22
<i>VIREAD</i>	22
<i>virt-caps</i>	91
<i>virt-gard</i>	91
<i>VITAL-D RX TAB</i>	91
<i>vitamins a/c/d/fluoride</i>	91
<i>VITRAKVI</i>	35
<i>VIVITROL</i>	60
<i>VIZIMPRO</i>	35
<i>voriconazole</i>	21
<i>VOSEVI TAB</i>	24
<i>VOTRIENT</i>	35
<i>VRAYLAR</i>	54
<i>VRAYLAR CAP 1.5-3MG</i>	54
<i>vyfemla</i>	68
<i>vylibra</i>	68
<i>VYZULTA</i>	93
<b>W</b>	
<i>warfarin sodium</i>	82
<i>water for irrigation, sterile irrigation soln</i>	105
<i>wee care</i>	82
<i>wera</i>	68
<i>westab mini</i>	91
<i>womens laxative</i>	78
<i>wymzya fe</i>	68
<b>X</b>	
<i>XALKORI</i>	35
<i>XARELTO</i>	82
<i>XARELTO STAR TAB 15/20MG</i>	82
<i>XATMEP</i>	84
<i>XCOPRI</i>	48
<i>XCOPRI PAK 100-150</i>	48
<i>XCOPRI PAK 12.5-25</i>	48
<i>XCOPRI PAK 150-200MG (MAINTENANCE)</i>	48
<i>XCOPRI PAK 150-200MG (TITRATION)</i>	48

XCOPRI PAK 50-100MG .....	48
XELJANZ .....	84
XELJANZ XR.....	84
XENICAL.....	71
XERMELO .....	79
XGEVA .....	63
XIFAXAN .....	79
XIGDUO XR TAB 10-1000 .....	62
XIGDUO XR TAB 10-500MG .....	62
XIGDUO XR TAB 2.5-1000 .....	62
XIGDUO XR TAB 5-1000MG .....	62
XIGDUO XR TAB 5-500MG .....	62
XOFLUZA.....	24
XOLAIR .....	99
XOSPATA.....	35
XPOVIO 100 MG ONCE WEEKLY ...	35
XPOVIO 40 MG ONCE WEEKLY ...	35
XPOVIO 40 MG TWICE WEEKLY ...	35
XPOVIO 60 MG ONCE WEEKLY ...	35
XPOVIO 60 MG TWICE WEEKLY ...	35
XPOVIO 80 MG ONCE WEEKLY ...	35
XPOVIO 80 MG TWICE WEEKLY ...	35
XTANDI.....	29
xulane.....	68
XULTOPHY INJ 100/3.6 .....	63
XYREM .....	58
<b>Y</b>	
YF-VAX INJ .....	87
<i>yuvafem</i> .....	69
<b>Z</b>	
ZADITOR .....	92
<i>zafemy</i> .....	69
<i>zafirlukast</i> .....	98
<i>zaleplon</i> .....	56
<i>zarah</i> .....	69
ZARXIO.....	82
ZEJULA .....	35
ZELBORAF.....	35
ZEMAIRA.....	99
<i>zenatane</i> .....	101
ZENPEP CAP 10000UNT.....	79
ZENPEP CAP 15000UNT.....	79
ZENPEP CAP 20000UNT.....	79
ZENPEP CAP 25000 .....	79
ZENPEP CAP 3000UNIT .....	79
ZENPEP CAP 40000 .....	79
ZENPEP CAP 5000UNIT .....	79
ZERVIADE .....	93
<i>zidovudine</i> .....	22
<i>ziprasidone hcl</i> .....	54
<i>ziprasidone mesylate</i> .....	54
ZIRABEV .....	36
ZIRGAN .....	92
<i>zoledronic acid</i> .....	63
ZOLINZA.....	36
<i>zolmitriptan</i> .....	57
<i>zolpidem tartrate</i> .....	56
<i>zonisamide</i> .....	48
ZORTRESS .....	86
<i>zovia 1/35</i> .....	69
<i>zumandimine</i> .....	69
ZYDELIG .....	36
ZYKADIA.....	36
ZYLET SUS 0.5-0.3%.....	91
ZYPREXA RELPREVV .....	54



## Molina Dual Options

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