



Department of  
Medicaid

Next Generation MyCare

## Molina Complete Care for MyCare Ohio (HMO D-SNP) 2026 List of Covered Drugs (Drug List or Formulary)

**PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION ABOUT THE DRUGS WE  
COVER IN THIS PLAN**

*HPMS Approved Formulary File Submission ID 00026144, Version Number 10.*

This *Drug List* was updated on 04/01/2026.

For more recent information or other questions, contact us at (800) 665-3086, (TTY: 711), October 1 – March 31: 8 a.m. to 8 p.m. local time, 7 days a week. April 1 - September 30: Monday – Friday, 8 a.m. to 8 p.m. local time or visit [MolinaHealthcare.com/Medicare](https://MolinaHealthcare.com/Medicare).



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04/01/2026

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# Introduction

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

## Table of Contents

|                                                                                                                                                                              |    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|
| A. Disclaimers.....                                                                                                                                                          | 4  |
| B. Frequently Asked Questions (FAQ) .....                                                                                                                                    | 6  |
| B1. What drugs are on the <i>List of Covered Drugs</i> ? (We call the <i>List of Covered Drugs</i> the <i>Drug List</i> for short.) .....                                    | 6  |
| B2. Does the <i>Drug List</i> ever change? .....                                                                                                                             | 7  |
| B3. What happens when there's a change to the <i>Drug List</i> ? .....                                                                                                       | 7  |
| B4. Are there any restrictions or limits on drug coverage or any required actions to take to get certain drugs? .....                                                        | 9  |
| B5. How will I know if the drug I want has limits or if there are required actions to take to get the drug? .....                                                            | 9  |
| B6. What happens if our plan changes their rules about how they cover some drugs (for example, prior authorization, quantity limits, and/or step therapy restrictions)?..... | 9  |
| B7. How can I find a drug on the <i>Drug List</i> ?.....                                                                                                                     | 10 |
| B8. What if the drug I want to take isn't on the <i>Drug List</i> ? .....                                                                                                    | 10 |
| B9. What if I'm a new plan member and can't find my drug on the <i>Drug List</i> or have a problem getting my drug? .....                                                    | 10 |
| B10. Can I ask for an exception to cover my drug? .....                                                                                                                      | 12 |
| B11. How can I ask for an exception?.....                                                                                                                                    | 12 |
| B12. How long does it take to get an exception? .....                                                                                                                        | 12 |
| B13. What are generic drugs?.....                                                                                                                                            | 12 |
| B14. What are original biological products and how are they related to biosimilars? .....                                                                                    | 13 |
| B15. What are OTC drugs?.....                                                                                                                                                | 13 |
| B16. Does our plan cover long-term supplies of prescriptions? .....                                                                                                          | 13 |

|                                                                                 |     |
|---------------------------------------------------------------------------------|-----|
| B17. Can I get prescriptions delivered to my home from my local pharmacy? ..... | 13  |
| B18. What's my copay?.....                                                      | 13  |
| C. Overview of the <i>List of Covered Drugs</i> .....                           | 14  |
| C1. List of Drugs by Medical Condition .....                                    | 14  |
| D. Index of Covered Drugs .....                                                 | 101 |



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## A. Disclaimers

This is a list of drugs that members can get in our plan.

- ❖ You can always check our plan's up-to-date *List of Covered Drugs* online at [MolinaHealthcare.com/Medicare](http://MolinaHealthcare.com/Medicare) or by calling Member Services at the number in the footer of this document. This call is free.
- ❖ You can get this document for free in other formats, such as large print, braille, or audio. Call Member Services at the numbers in the footer of this document. This call is free.
- ❖ Molina Healthcare is a C-SNP, D-SNP and HMO plan with a Medicare contract. D-SNP plans have a contract with the state Medicaid program. Enrollment depends on contract renewal.
- ❖ We offer free interpreter and translation services to help you understand your health or drug plan. This includes help from someone who speaks your language.
- ❖ We also provide free aids and services—such as sign language interpreters and written materials in alternative formats—to ensure everyone can access the information they need. To request these services, please call Member Services at (855) 665-4623 (TTY 711) Monday through Friday, 8 a.m. to 8 p.m., local time.

### English

ATTENTION: If you speak English, free language assistance services are available to you. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge. Call 1-855-665-4623 (TTY 711) or speak to your provider.

### Spanish

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos para asistirle en su idioma. También dispone de ayudas y servicios auxiliares gratuitos para proporcionar información en formatos accesibles. Llame al 1-855-665-4623 o hable con su proveedor.

### Russian

ВНИМАНИЕ! Если вы говорите на русском, вам доступны бесплатные услуги языковой поддержки. Соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах также бесплатны. Позвоните по номеру 1-855-665-4623 (TTY: 711) или обратитесь к своему поставщику услуг.

### Haitian Creole

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd aladispozisyon w gratis pou lang ou pale a. Èd ak sèvis siplemantè apwopriye pou bay enfòmasyon nan fòm aksesib yo disponib gratis tou. Rele nimewo 1-855-665-4623 (TTY 711) oswa pale ak pwofesyonèl swen sante ou a.

## Arabic

تنبيه: إذا كنت تتحدث العربية، فسوف تكون خدمات المساعدة اللغوية متاحة لك مجانًا. كما تتوفر أدوات مساعدة وخدمات إضافية مناسبة لتوفير المعلومات بصيغ يمكن الوصول إليها من دون أية تكلفة. اتصل بـ (TTY 711) 1-855-665-4623 أو تحدث إلى مقدم الخدمات.

## French

ATTENTION : Si vous parlez français, des services d'assistance linguistique gratuits sont à votre disposition. Des aides et services auxiliaires appropriés sont également mis à votre disposition gratuitement pour vous fournir les informations dans des formats accessibles. Appelez le 1-855-665-4623 (TTY : 711) ou adressez-vous à votre prestataire.

## Vietnamese

LƯU Ý: Nếu quý vị nói tiếng Việt, chúng tôi có sẵn các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho quý vị. Ngoài ra, chúng tôi còn có các dịch vụ và phương tiện hỗ trợ khác phù hợp, hoàn toàn miễn phí để cung cấp thông tin theo các định dạng dễ sử dụng. Vui lòng gọi đến số 1-855-665-4623 (TTY 711) hoặc trao đổi với nhà cung cấp dịch vụ của quý vị.

## Somali

Haddii aad ku hadasho Soomaali, adeegyada caawimaada luuqada oo bilaash ah ayaad heli kartaa. Agabka kaalmaatiga oo sax ah iyo adeegyada xogta ku bixiya qaab la heli karo ayaa sidoo kale lagu heli karaa lacag la'aan. Wac 1-855-665-4623 (TTY 711) ama la hadal dhakhtarkaaga.

## Ukrainian

УВАГА! Якщо ви розмовляєте українською мовою, вам доступні безкоштовні мовні послуги. Відповідні допоміжні засоби й послуги з надання інформації в доступних форматах також пропонуються безкоштовно. Зателефонуйте на номер 1-855-665-4623 (TTY: 711) або зверніться до свого постачальника послуг.

## Swahili

KUMBUKA: Ikiwa wewe huzungumza Kiswahili, msaada na huduma za lugha bila malipo unapatikana kwako. Vifaa vya usaidizi vinavyofaa na huduma bila malipo ili kutoa taarifa katika mifumo inayofikiwa zinapatikana pia bila malipo. Piga simu ukitumia 1-855-665-4623 (TTY 711) au zungumza na mtoa huduma wako.

## Dari

توجه: اگر شما به زبان دری صحبت می‌کنید، خدمات کمک زبانی رایگان در دسترس شما قرار دارد. کمک ها و خدمات کمکی مناسب برای فراهم ساختن معلومات در فارمت های قابل دسترس همچنان بصورت رایگان موجود است. با 1-855-665-4623 (TTY 711) تماس بگیرید یا با فراهم کننده خود صحبت کنید.

## Pashto

پاملرنه: که تاسو په پښتو ژبه باندې خبرې کوئ، نو د ژبې وړیا مرستې خدمات ستاسو لپاره شتون لري. مناسب مرستندویه مرستې او



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خدمات چي د لاسرسي ور بنو کي معلومات چمتو کوي هم وړيا شتون لري. 1-855-665-4623 (TTY 711) ته زنگ ووهئ يا له خپل چمتو کونکي سره خبرې وکړئ.

### Kinyarwanda

ICYOTONDERWA: Niba uvuga Ikinyarwanda, serivisi z'ubufasha mu ndimi wazihabwa. Serivisi n'inyunganirakumva zitangwa mu buryo bwose zitangwa ku buntu. Hamaraga 1-855-665-4623 (TTY 711) cyangwa uvugane n'uguha serivisi.

### Tigrinya

ኢቋልብ፡ ትግርኛ ትዛረቡ እንተኾይንኩም፡ ናይ ቋንቋ ሓገዝ ኣገልግሎት ብናጻ ይርከብ። ብተበጻሒ ቅርጺ ሓበሬታ ንምቕራብ ዘድሊ ሓገዝቲ ሓገዛትን ኣገልግሎታትን እውን ብናጻ ይርከብ። ናብ 1-855-665-4623 (TTY 711) ደውሉ ወይ ምስ ወሃቢ ኣገልግሎትኩም ተዘራረቡ።

### Uzbek

DIQQAT: Agar o'zbek tilida gaplashsangiz, sizga bepul til yordami xizmatlari taqdim etiladi. Ma'lumotlarni qulay formatlarda taqdim etish uchun kerakli yordamchi vositalar va xizmatlar ham bepul taqdim etiladi. 1-855-665-4623 (TTY 711) raqamiga qo'ng'iroq qiling yoki o'z davolovchi shifokoringizga murojaat eting.

### Nepali

सावधान: तपाईं अङ्ग्रेजी बोल्नुहुन्छ भने, निःशुल्क भाषा सहायता सेवाहरू तपाईंका लागि उपलब्ध छन्। उपयुक्त सहायक उपकरण र सेवाहरू पनि जानकारी प्रदान गर्न पहुँचयोग्य ढाँचामा निःशुल्क उपलब्ध छन्। 1-855-665-4623 (TTY 711) मा कल गर्नुहोस् वा आफ्नो प्रदायकसँग कुरा गर्नुहोस्।

- ❖ You can ask that we always send you information in the language or format you need. This is called a standing request. Call (800) 665-3086, TTY: 711, October 1 – March 31: 8 a.m. to 8 p.m., local time, 7 days a week. April 1 - September 30: Monday – Friday, 8 a.m. to 8 p.m., local time. A Member Services representative can help you make or change a standing request. We will keep track of your standing request, so you do not need to make separate requests each time we send you information.

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## B. Frequently Asked Questions (FAQ)

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

### B1. What 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 in **Section C1** are the drugs covered by our plan. The 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.”

- Our plan will cover all medically necessary drugs on the Drug List if:
  - your doctor or other prescriber says you need them to get better or stay healthy,
  - our plan agrees that the drug is medically necessary for you, **and**

- you fill the prescription at a plan network pharmacy.
- In some cases, you have to do something before you can get a drug. Refer to question B4 for more information.

You can also find an up-to-date list of drugs that we cover on our website at [MolinaHealthcare.com/Medicare](https://MolinaHealthcare.com/Medicare) or call Member Services at the numbers in the footer of this document.

## **B2. Does the *Drug List* ever change?**

Yes, and our plan must follow Medicare and 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 authorization for a drug. (Prior authorization is permission from our plan 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'll cover another drug.)

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

If you're taking a drug that was covered at the **beginning** of the year, we'll 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 isn't 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 our plan's up-to-date *Drug List* online at [MolinaHealthcare.com/Medicare](https://MolinaHealthcare.com/Medicare). Updates to the *Drug List* are posted on the website monthly.
- You can also call Member Services at the numbers in the footer of this document to check the current *Drug List*.

## **B3. What happens when there's a change to the *Drug List*?**

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



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- **Substitutions of certain new versions of drugs.** We may immediately remove the drugs from the *Drug List* if we replace them with certain new versions of that drug, but your cost for the new drug will appear on the same or lower cost-sharing tier with the same or fewer restrictions. When we add a new version of a drug, we may also decide to keep the brand name drug or original biological product on the list but change its coverage rules or limits.
  - We may not tell you before we make this change, but we'll send you information about the specific change we made once it happens.
  - We can make these changes only if the drug we're adding:
    - is a new generic version of a brand name drug, or
    - is a certain new biosimilar version of original biological products on the *Drug List* (for example, adding an interchangeable biosimilar that can be substituted for an original biological product without a new prescription).
    - Some of these drug types may be new to you. For more information, refer to **Section B14**.
  - You or your provider can ask for an exception from these changes. We'll send you a notice with the steps you can take to ask for an exception. Please refer to questions B10-B12 for more information on exceptions.
- **Remove unsafe drugs and other drugs that are taken off the market** Sometimes a drug may be found unsafe or taken off the market for another reason. If this happens, we may immediately take it off the *Drug List*. If you're taking the drug, we'll send you a notice after we make the change. You should be working with your prescriber to switch to a different drug that we cover.

**We may make other changes that affect the drugs you take.** We'll 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 remove a brand name drug from the *Drug List* when adding a generic drug that isn't new to the market, or
- we remove an original biological product when adding a biosimilar, or
- we change the coverage rules or limits for the brand name drug.

When these changes happen, we'll:

- tell you at least 30 days before we make the change to the *Drug List* or
- let you know and give you a 31-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's 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 questions B10-B12.

#### **B4. Are there any restrictions or limits on drug coverage or 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 authorization:** For some drugs, you or your doctor or other prescriber must get authorization from our plan before you fill your prescription. Prior authorization is different from a referral. Our plan may not cover the drug if you don't get prior authorization.
- **Quantity limits:** Sometimes our plan limits the amount of a drug you can get.
- **Step therapy:** Sometimes our plan requires you to do step therapy. This means you'll have to try drugs in a certain order for your medical condition. You might have to try one drug before we'll cover another drug. If your prescriber thinks the first drug doesn't work for you, then we'll cover the second.

You can find out if your drug has any additional requirements or limits by looking in the tables in **Section C1**. You can also get more information by visiting our website at [MolinaHealthcare.com/Medicare](http://MolinaHealthcare.com/Medicare). We have posted online documents that explain our prior authorization and step therapy restrictions. You may also ask us to send you a copy.

**You can 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's a similar drug on the *Drug List* you can take instead or whether to ask for an exception. Refer to questions B10-B12 for more information about exceptions.

#### **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 in the section titled "List of Drugs by Medical Condition" has a column labeled "Necessary actions, restrictions, or limits on use."

#### **B6. What happens if our plan changes their rules about how they cover some drugs (for example, prior authorization, quantity limits, and/or step therapy restrictions)?**

In some cases, we'll tell you in advance if we add or change prior authorization, quantity limits, and/or step therapy restrictions on a drug. Refer to question B3 for more information about this



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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.

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

There are two ways to find a drug:

- you can search alphabetically, **or**
- you can search by medical condition.

To search **alphabetically**, look for your drug in the Index of Covered Drugs section. You can find it in **Section D**. The Index of Covered Drugs is an alphabetical list of all of the drugs included in the *Drug List*. Brand name drugs and generic drugs as well as over-the-counter (OTC) drugs are listed in the index.

To search by medical condition, find **Section C1** labeled “List of Drugs by Medical Condition”. The drugs in this section are grouped into categories depending on the type of medical conditions they’re used to treat. For example, if you have a heart condition, you should look in Cardiovascular category. That’s where you’ll find drugs that treat heart conditions.

### **B8. What if the drug I want to take isn’t on the *Drug List*?**

If you don’t find your drug on the *Drug List*, call Member Services at the numbers in the footer of this document and ask about it. If you learn that our plan won’t 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’s like the one you want to take. **Or**
- Ask our plan to make an exception to cover your drug. Refer to questions B10-B12 for more information about exceptions.

### **B9. What if I’m a new plan 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 31-day supply of your drug during the first 90 days you’re a member of our plan. This will give you time to talk to your doctor or other prescriber. They can help you decide if there’s 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’ll allow multiple refills to provide up to a maximum of 31 days of medication.

We’ll cover a 31-day supply of your drug if:

- you’re taking a drug that isn’t on our *Drug List*, **or**
- our plan rules don’t let you get the amount ordered by your prescriber, **or**

- the drug requires prior authorization by our plan, **or**
- you're taking a drug that's part of a step therapy restriction.

If you're taking a drug that our plan doesn't consider to be a Part D drug, you have the right to get a one-time, 72-hour supply of the drug.

If you're in a nursing home or other long-term care facility and need a drug that isn't on the *Drug List* or if you can't easily get the drug you need, we can help. If you've been in the plan for more than 90 days, live in a long-term care facility, and need a supply right away:

- We'll cover one 31-day supply of the drug you need (unless you have a prescription for fewer days), whether or not you're a new plan member.
- This is in addition to the temporary supply during the first 90 days you're a member of our plan.

### 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. 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 31-day supply (unless the prescription is written for fewer days). After we cover the temporary 31-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.



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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 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.

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

Yes. You can ask our plan to make an exception to cover a drug that isn't on the *Drug List*.

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

- For example, our plan may limit the amount of a drug we'll 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 authorization 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 prescriber to help you ask for an exception. You can also read **Chapter 9 Section 7.2** of the *Member Handbook* to learn more about exceptions.

### **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'll give you a decision within 72 hours. Your doctor or other prescriber can fax or mail us the supporting statement to (866) 290-1309. They can also tell us by phone and then fax or mail the statement.

Send the prescriber statement to:

Molina Healthcare

Attn: Pharmacy Department

7050 S Union Park Center, Suite 600

Midvale, Utah 84107

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'll give you a decision within 24 hours of getting your prescriber's supporting statement.

### **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 generally work just as well. They usually don't have well-known names. Generic drugs are approved by the Food and Drug Administration (FDA). There are generic

drugs available for many brand name drugs. Generic drugs usually can be substituted for brand name drugs at the pharmacy without a new prescription—depending on state laws.

Our plan covers both brand name drugs and generic drugs.

#### **B14. What are original biological products and how are they related to biosimilars?**

When we refer to drugs, this could mean a drug or a biological product. Biological products are drugs that are more complex than typical drugs. Since biological products are more complex than typical drugs, instead of having a generic form, they have forms that are called biosimilars. Generally, biosimilars work just as well as the original biological product and may cost less. There are biosimilar alternatives for some original biological products. Some biosimilars are interchangeable biosimilars and, depending on state laws, may be substituted for the original biological product at the pharmacy without needing a new prescription, just like generic drugs can be substituted for brand name drugs.

For more information on drug types, refer to **Chapter 5** of the *Member Handbook*.

#### **B15. What are OTC drugs?**

OTC stands for “over-the-counter”. Our plan covers some OTC drugs when they’re written as prescriptions by your provider.

You can read the plan *Drug List* to find out what OTC drugs are covered.

#### **B16. Does our plan cover long-term supplies of prescriptions?**

- **Mail-Order Programs.** We offer a mail-order program that allows you to get up to a 100-day supply of your drugs sent directly to your home. A 100-day supply has the same copay as a one-month supply.
- **100-Day Retail Pharmacy Programs.** Some retail pharmacies may also offer up to a 100-day supply of covered drugs. A 100-day supply has the same copay as a one-month supply.

#### **B17. Can I get prescriptions delivered to my home from my local pharmacy?**

Your local pharmacy may be able to deliver your prescription to your home. You can call your pharmacy to find out if they offer home delivery.

#### **B18. What’s my copay?**

Our plan members **have copays for** prescription as long as the member follows the plan’s rules. Refer to questions B15 and B16 for more information about OTC drugs and non-drug products.

Tiers are groups of drugs on our *Drug List*.



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- *Tier 1 Preferred Generic drugs have \$0 copay*
- *Tier 2 Generic name drugs have \$0, \$1.60, or \$5.10 copay for generic drugs (including brand drugs treated as generic) \$0, \$4.90, or \$12.65 copay for all other drugs per prescription*
- *Tier 3 Preferred Brand: \$0, \$1.60, or \$5.10 copay for generic drugs (including brand drugs treated as generic) \$0, \$4.90, or \$12.65 copay for all other drugs per prescription*
- *Tier 4 Non-Preferred Drug: \$0, \$1.60, or \$5.10 copay for generic drugs (including brand drugs treated as generic) \$0, \$4.90, or \$12.65 copay for all other drugs per prescription*
- *Tier 5 Specialty Tier: \$0, \$1.60, or \$5.10 copay for generic drugs (including brand drugs treated as generic) \$0, \$4.90, or \$12.65 copay for all other drugs per prescription*
- *Drug Tier 6 Select Care Drugs: \$0 copay*

If you have questions, call Member Services at the numbers in the footer of this document.

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## C. Overview of the *List of Covered Drugs*

The *List of Covered Drugs* gives you information about the drugs covered by our plan. If you have trouble finding your drug in the list, turn to the Index of Covered Drugs that begins in **Section D**. The index alphabetically lists all drugs covered by our plan.

**Note:** The \_ next to a drug means the drug isn't a "Part D drug." These drugs have different rules for appeals.

- An appeal is a formal way of asking us to review a decision we made about your coverage and to change it if you think we made a mistake.
- For example, we might decide that a drug that you want isn't covered or is no longer covered by Medicare or Medicaid program name.
- If you or your prescriber disagrees with our decision, you can appeal. If you ever have a question, call Member Services at the numbers in the footer of this document.
- You can also read **Chapter 9** of the *Member Handbook* to learn how to appeal a decision.

### C1. List of Drugs by Medical Condition

The drugs in this section are grouped into categories depending on the type of medical conditions they're used to treat. For example, if you have a heart condition, you should look in the category, Cardiovascular. That's where you'll 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.

\_ = 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.

The first column of the table lists the name of the drug. Generic drugs are listed in lower-case italics (for example, *metformin hcl*), brand name drugs are capitalized (for example, JANUVIA TABS), and OTC drugs and non-drug products are listed in lower case (for example, OTC example). The information in the “Necessary actions, restrictions, or limits on use” column tells you if our plan has any rules for covering your drug.



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**MOLINA\_CY26\_6T\_GS\_CORE eff 04/01/2026****Drug Name****Drug Tier Requirements/Limits****ANALGESICS****GOUT**

|                                                |   |                         |
|------------------------------------------------|---|-------------------------|
| <i>allopurinol</i> TABS 100mg, 300mg           | 1 |                         |
| <i>colchicine</i> TABS .6mg                    | 3 | QL (120 tabs / 30 days) |
| <i>colchicine w/ probenecid tab 0.5-500 mg</i> | 3 |                         |
| <i>febuxostat</i> TABS 40mg, 80mg              | 4 | PA                      |
| <i>probenecid</i> TABS 500mg                   | 3 |                         |

**MISCELLANEOUS**

|                                                             |   |     |
|-------------------------------------------------------------|---|-----|
| <i>lidocaine hcl (local anesth.)</i> SOLN .5%, 1%, 1.5%, 2% | 3 | B/D |
|-------------------------------------------------------------|---|-----|

**NSAIDS**

|                                                                                |   |                         |
|--------------------------------------------------------------------------------|---|-------------------------|
| <i>celecoxib</i> CAPS 50mg, 100mg, 200mg                                       | 3 | QL (60 caps / 30 days)  |
| <i>celecoxib</i> CAPS 400mg                                                    | 3 | QL (30 caps / 30 days)  |
| <i>diclofenac potassium</i> TABS 50mg                                          | 2 | QL (120 tabs / 30 days) |
| <i>diclofenac sodium</i> TB24 100mg                                            | 3 |                         |
| <i>diclofenac sodium</i> TBEC 25mg, 50mg, 75mg                                 | 2 |                         |
| <i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg</i>                 | 4 |                         |
| <i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg</i>                 | 4 |                         |
| <i>diflunisal</i> TABS 500mg                                                   | 3 |                         |
| <i>etodolac</i> CAPS 200mg, 300mg; TABS 400mg, 500mg; TB24 400mg, 500mg, 600mg | 3 |                         |
| <i>flurbiprofen</i> TABS 100mg                                                 | 3 |                         |
| <i>ibu</i> TABS 400mg, 600mg, 800mg                                            | 1 |                         |
| <i>ibuprofen</i> SUSP 100mg/5ml                                                | 3 |                         |
| <i>ibuprofen</i> TABS 400mg, 600mg, 800mg                                      | 1 |                         |
| <i>meloxicam</i> TABS 7.5mg, 15mg                                              | 1 |                         |
| <i>nabumetone</i> TABS 500mg, 750mg                                            | 2 |                         |
| <i>naproxen</i> TABS 250mg, 375mg, 500mg                                       | 1 |                         |
| <i>naproxen</i> TBEC 375mg                                                     | 2 | QL (120 tabs / 30 days) |
| <i>naproxen sodium</i> TABS 275mg, 550mg                                       | 3 |                         |
| <i>oxaprozin</i> TABS 600mg                                                    | 4 |                         |
| <i>piroxicam</i> CAPS 10mg, 20mg                                               | 3 |                         |
| <i>sulindac</i> TABS 150mg, 200mg                                              | 2 |                         |

**OPIOID ANALGESICS, LONG-ACTING**

|                                                                                                            |   |                               |
|------------------------------------------------------------------------------------------------------------|---|-------------------------------|
| <i>buprenorphine</i> PTWK 5mcg/hr, 7.5mcg/hr, 10mcg/hr, 15mcg/hr, 20mcg/hr                                 | 2 | QL (4 patches / 28 days), PA  |
| <i>fentanyl</i> PT72 12mcg/hr, 25mcg/hr, 37.5mcg/hr, 50mcg/hr, 62.5mcg/hr, 75mcg/hr, 87.5mcg/hr, 100mcg/hr | 4 | QL (10 patches / 30 days), PA |
| <i>hydrocodone bitartrate</i> T24A 20mg, 30mg, 40mg, 60mg, 80mg                                            | 4 | QL (30 tabs / 30 days), PA    |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                            | <b>Drug Tier</b> | <b>Requirements/Limits</b>      |
|-------------------------------------------------------------|------------------|---------------------------------|
| <i>hydrocodone bitartrate</i> T24A 100mg, 120mg             | 5                | NDS, QL (30 tabs / 30 days), PA |
| <i>methadone hcl</i> SOLN 5mg/5ml, 10mg/5ml                 | 3                | QL (450 mL / 30 days), PA       |
| <i>methadone hcl</i> TABS 5mg, 10mg                         | 3                | QL (90 tabs / 30 days), PA      |
| <i>methadone hydrochloride i</i> CONC 10mg/ml               | 3                | QL (90 mL / 30 days), PA        |
| <i>morphine sulfate</i> TBCR 15mg, 30mg, 60mg, 100mg, 200mg | 3                | QL (90 tabs / 30 days), PA      |
| <i>OXYCONTIN</i> T12A 10mg, 15mg, 20mg, 30mg                | 4                | QL (60 tabs / 30 days), PA      |
| <i>OXYCONTIN</i> T12A 40mg, 60mg, 80mg                      | 5                | NDS, QL (60 tabs / 30 days), PA |

### ***OPIOID ANALGESICS, SHORT-ACTING***

|                                                              |   |                         |
|--------------------------------------------------------------|---|-------------------------|
| <i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>           | 3 | QL (2700 mL / 30 days)  |
| <i>acetaminophen w/ codeine tab 300-15 mg</i>                | 2 | QL (400 tabs / 30 days) |
| <i>acetaminophen w/ codeine tab 300-30 mg</i>                | 2 | QL (360 tabs / 30 days) |
| <i>acetaminophen w/ codeine tab 300-60 mg</i>                | 2 | QL (180 tabs / 30 days) |
| <i>butorphanol tartrate</i> SOLN 1mg/ml, 2mg/ml              | 4 |                         |
| <i>butorphanol tartrate</i> SOLN 10mg/ml                     | 3 | QL (10 mL / 30 days)    |
| <i>endocet tab 2.5-325mg</i>                                 | 3 | QL (360 tabs / 30 days) |
| <i>endocet tab 5-325mg</i>                                   | 3 | QL (360 tabs / 30 days) |
| <i>endocet tab 7.5-325mg</i>                                 | 3 | QL (240 tabs / 30 days) |
| <i>endocet tab 10-325mg</i>                                  | 3 | QL (180 tabs / 30 days) |
| <i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>        | 4 | QL (2700 mL / 30 days)  |
| <i>hydrocodone-acetaminophen tab 5-325 mg</i>                | 3 | QL (240 tabs / 30 days) |
| <i>hydrocodone-acetaminophen tab 7.5-325 mg</i>              | 3 | QL (180 tabs / 30 days) |
| <i>hydrocodone-acetaminophen tab 10-325 mg</i>               | 3 | QL (180 tabs / 30 days) |
| <i>hydrocodone-ibuprofen tab 7.5-200 mg</i>                  | 3 | QL (150 tabs / 30 days) |
| <i>hydromorphone hcl</i> LIQD 1mg/ml                         | 4 | QL (600 mL / 30 days)   |
| <i>hydromorphone hcl</i> TABS 2mg, 4mg, 8mg                  | 3 | QL (180 tabs / 30 days) |
| <i>morphine sulfate</i> SOLN 2mg/ml, 4mg/ml, 8mg/ml, 10mg/ml | 4 | B/D                     |
| <i>morphine sulfate</i> SOLN 10mg/5ml, 20mg/5ml              | 3 | QL (900 mL / 30 days)   |
| <i>morphine sulfate</i> SOLN 100mg/5ml                       | 3 | QL (180 mL / 30 days)   |
| <i>morphine sulfate</i> TABS 15mg, 30mg                      | 3 | QL (180 tabs / 30 days) |
| <i>oxycodone hcl</i> CONC 100mg/5ml                          | 4 | QL (180 mL / 30 days)   |
| <i>oxycodone hcl</i> SOLN 5mg/5ml                            | 4 | QL (900 mL / 30 days)   |
| <i>oxycodone hcl</i> TABS 5mg, 10mg, 15mg, 20mg, 30mg        | 3 | QL (180 tabs / 30 days) |
| <i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>             | 3 | QL (360 tabs / 30 days) |
| <i>oxycodone w/ acetaminophen tab 5-325 mg</i>               | 3 | QL (360 tabs / 30 days) |
| <i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>             | 3 | QL (240 tabs / 30 days) |

**You can find information on what the symbols and abbreviations in this table mean by going to Section C1.**

| <b>Drug Name</b>                                                  | <b>Drug Tier</b> | <b>Requirements/Limits</b> |
|-------------------------------------------------------------------|------------------|----------------------------|
| <i>oxycodone w/ acetaminophen tab 10-325 mg</i>                   | 3                | QL (180 tabs / 30 days)    |
| <i>tramadol hcl TABS 50mg</i>                                     | 2                | QL (240 tabs / 30 days)    |
| <i>tramadol-acetaminophen tab 37.5-325 mg</i>                     | 2                | QL (240 tabs / 30 days)    |
| <b>ANTI-INFECTIVES</b>                                            |                  |                            |
| <b>ANTI-INFECTIVES - MISCELLANEOUS</b>                            |                  |                            |
| <i>albendazole TABS 200mg</i>                                     | 4                | QL (672 tabs / year), PA   |
| <i>amikacin sulfate SOLN 1gm/4ml, 500mg/2ml</i>                   | 4                |                            |
| <i>ARIKAYCE SUSP 590mg/8.4ml</i>                                  | 5                | NDS, NM, PA                |
| <i>atovaquone SUSP 750mg/5ml</i>                                  | 4                | QL (300 mL / 30 days), PA  |
| <i>aztreonam SOLR 1gm, 2gm</i>                                    | 4                |                            |
| <i>BLUJEPA TABS 750mg</i>                                         | 3                |                            |
| <i>CAYSTON SOLR 75mg</i>                                          | 5                | NDS, NM, PA                |
| <i>clindamycin hcl CAPS 75mg, 150mg, 300mg</i>                    | 2                |                            |
| <i>clindamycin palmitate hydrochloride SOLR 75mg/5ml</i>          | 4                |                            |
| <i>clindamycin phosphate SOLN 300mg/2ml, 600mg/4ml, 900mg/6ml</i> | 3                |                            |
| <i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i>           | 4                |                            |
| <i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i>           | 4                |                            |
| <i>clindamycin phosphate in d5w iv soln 900 mg/50ml</i>           | 4                |                            |
| <i>CLINDMYC/NAC INJ 300/50ML</i>                                  | 4                |                            |
| <i>CLINDMYC/NAC INJ 600/50ML</i>                                  | 4                |                            |
| <i>CLINDMYC/NAC INJ 900/50ML</i>                                  | 4                |                            |
| <i>colistimethate sodium SOLR 150mg</i>                           | 4                |                            |
| <i>dapsone TABS 25mg, 100mg</i>                                   | 3                |                            |
| <i>DAPTOMYCIN SOLR 350mg</i>                                      | 5                | NDS                        |
| <i>daptomycin SOLR 350mg, 500mg</i>                               | 5                | NDS                        |
| <i>EMVERM CHEW 100mg</i>                                          | 5                | NDS, QL (12 tabs / year)   |
| <i>ertapenem sodium SOLR 1gm</i>                                  | 3                |                            |
| <i>fosfomycin tromethamine PACK 3gm</i>                           | 4                |                            |
| <i>gentamicin in saline inj 0.8 mg/ml</i>                         | 3                |                            |
| <i>gentamicin in saline inj 1 mg/ml</i>                           | 3                |                            |
| <i>gentamicin in saline inj 1.2 mg/ml</i>                         | 3                |                            |
| <i>gentamicin in saline inj 1.6 mg/ml</i>                         | 3                |                            |
| <i>gentamicin in saline inj 2 mg/ml</i>                           | 3                |                            |
| <i>gentamicin sulfate SOLN 10mg/ml, 40mg/ml</i>                   | 3                |                            |
| <i>imipenem-cilastatin intravenous for soln 250 mg</i>            | 4                |                            |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                             | <b>Drug Tier</b> | <b>Requirements/Limits</b>      |
|--------------------------------------------------------------|------------------|---------------------------------|
| <i>imipenem-cilastatin intravenous for soln 500 mg</i>       | 4                |                                 |
| IMPAVIDO CAPS 50mg                                           | 5                | NDS, PA                         |
| <i>ivermectin TABS 3mg</i>                                   | 3                | QL (20 tabs / 90 days), PA      |
| <i>ivermectin TABS 6mg</i>                                   | 3                | QL (10 tabs / 90 days), PA      |
| <i>linezolid SOLN 600mg/300ml</i>                            | 4                |                                 |
| <i>linezolid SUSR 100mg/5ml</i>                              | 5                | NDS, QL (1800 mL / 30 days)     |
| <i>linezolid TABS 600mg</i>                                  | 4                | QL (60 tabs / 30 days)          |
| LINEZOLID INJ 2MG/ML                                         | 4                |                                 |
| <i>meropenem SOLR 1gm, 2gm, 500mg</i>                        | 4                |                                 |
| <i>methenamine hippurate TABS 1gm</i>                        | 3                |                                 |
| <i>metronidazole SOLN 500mg/100ml</i>                        | 3                |                                 |
| <i>metronidazole TABS 250mg, 500mg</i>                       | 1                |                                 |
| <i>neomycin sulfate TABS 500mg</i>                           | 2                |                                 |
| <i>nitazoxanide TABS 500mg</i>                               | 5                | NDS, QL (6 tabs / 30 days)      |
| <i>nitrofurantoin macrocrystal CAPS 50mg, 100mg</i>          | 3                |                                 |
| <i>nitrofurantoin monohyd macro CAPS 100mg</i>               | 3                |                                 |
| <i>pentamidine isethionate inh SOLR 300mg</i>                | 4                | B/D                             |
| <i>pentamidine isethionate inj SOLR 300mg</i>                | 4                |                                 |
| <i>polymyxin b sulfate SOLR 500000unit</i>                   | 4                |                                 |
| <i>praziquantel TABS 600mg</i>                               | 4                |                                 |
| <i>pyrimethamine TABS 25mg</i>                               | 5                | NDS, QL (90 tabs / 30 days), PA |
| <i>streptomycin sulfate SOLR 1gm</i>                         | 5                | NDS                             |
| <i>sulfadiazine TABS 500mg</i>                               | 5                | NDS                             |
| <i>sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml</i>   | 4                |                                 |
| <i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>      | 3                |                                 |
| <i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>           | 1                |                                 |
| <i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>          | 1                |                                 |
| <i>tinidazole TABS 250mg, 500mg</i>                          | 3                |                                 |
| TOBI PODHALER CAPS 28mg                                      | 5                | NDS, NM, PA                     |
| <i>tobramycin NEBU 300mg/5ml</i>                             | 5                | NDS, NM, PA                     |
| <i>tobramycin sulfate SOLN 1.2gm/30ml, 10mg/ml, 80mg/2ml</i> | 3                |                                 |
| <i>trimethoprim TABS 100mg</i>                               | 3                |                                 |
| <i>vancomycin hcl CAPS 125mg</i>                             | 4                | QL (80 caps / 180 days)         |
| <i>vancomycin hcl CAPS 250mg</i>                             | 4                | QL (160 caps / 180 days)        |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                       | <b>Drug Tier</b> | <b>Requirements/Limits</b>                                                      |
|------------------------------------------------------------------------|------------------|---------------------------------------------------------------------------------|
| <i>vancomycin hcl</i> SOLR 1gm, 1.25gm, 1.5gm, 5gm, 10gm, 500mg, 750mg | 4                |                                                                                 |
| VANCOMYCIN INJ 1 GM                                                    | 4                |                                                                                 |
| VANCOMYCIN INJ 500MG                                                   | 4                |                                                                                 |
| VANCOMYCIN INJ 750MG                                                   | 4                |                                                                                 |
| <b>ANTIFUNGALS</b>                                                     |                  |                                                                                 |
| <i>amphotericin b</i> SOLR 50mg                                        | 4                | B/D                                                                             |
| <i>amphotericin b liposome</i> SUSR 50mg                               | 5                | NDS, B/D                                                                        |
| <i>caspofungin acetate</i> SOLR 50mg, 70mg                             | 4                |                                                                                 |
| CRESEMBA CAPS 74.5mg, 186mg                                            | 5                | NDS, PA                                                                         |
| <i>fluconazole</i> SUSR 10mg/ml, 40mg/ml; TABS 50mg                    | 3                |                                                                                 |
| <i>fluconazole</i> TABS 100mg, 150mg, 200mg                            | 2                |                                                                                 |
| <i>fluconazole in nacl 0.9% inj</i> 200 mg/100ml                       | 3                |                                                                                 |
| <i>fluconazole in nacl 0.9% inj</i> 400 mg/200ml                       | 3                |                                                                                 |
| <i>flucytosine</i> CAPS 250mg, 500mg                                   | 5                | NDS, PA                                                                         |
| <i>griseofulvin microsize</i> SUSP 125mg/5ml; TABS 500mg               | 4                |                                                                                 |
| <i>griseofulvin ultramicrosize</i> TABS 125mg, 250mg                   | 4                |                                                                                 |
| <i>itraconazole</i> CAPS 100mg                                         | 4                | QL (120 caps / 30 days)                                                         |
| <i>ketoconazole</i> TABS 200mg                                         | 3                | PA                                                                              |
| <i>micafungin sodium</i> SOLR 50mg, 100mg                              | 4                |                                                                                 |
| <i>nystatin</i> TABS 500000unit                                        | 3                |                                                                                 |
| <i>posaconazole</i> SUSP 40mg/ml                                       | 5                | NDS, QL (630 mL / 30 days), PA                                                  |
| <i>posaconazole</i> TBEC 100mg                                         | 5                | NDS, QL (93 tabs / 30 days), PA                                                 |
| <i>terbinafine hcl</i> TABS 250mg                                      | 2                | QL (30 tabs / 30 days), PA; PA applies after a 90 day supply in a calendar year |
| <i>voriconazole</i> SOLR 200mg                                         | 4                | PA                                                                              |
| <i>voriconazole</i> SUSR 40mg/ml                                       | 5                | NDS, QL (600 mL / 28 days), PA                                                  |
| <i>voriconazole</i> TABS 50mg                                          | 4                | QL (480 tabs / 30 days)                                                         |
| <i>voriconazole</i> TABS 200mg                                         | 4                | QL (120 tabs / 30 days)                                                         |
| <b>ANTIMALARIALS</b>                                                   |                  |                                                                                 |
| <i>atovaquone-proguanil hcl tab</i> 62.5-25 mg                         | 4                |                                                                                 |
| <i>atovaquone-proguanil hcl tab</i> 250-100 mg                         | 4                |                                                                                 |
| <i>chloroquine phosphate</i> TABS 250mg, 500mg                         | 4                |                                                                                 |
| COARTEM TAB 20-120MG                                                   | 4                |                                                                                 |
| <i>mefloquine hcl</i> TABS 250mg                                       | 3                |                                                                                 |
| <i>primaquine phosphate</i> TABS 26.3mg                                | 3                |                                                                                 |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                   | <b>Drug Tier</b> | <b>Requirements/Limits</b>   |
|----------------------------------------------------|------------------|------------------------------|
| PRIMAQUINE PHOSPHATE TABS 26.3mg                   | 3                |                              |
| <i>quinine sulfate</i> CAPS 324mg                  | 4                | PA                           |
| <b>ANTIRETROVIRAL AGENTS</b>                       |                  |                              |
| <i>abacavir sulfate</i> SOLN 20mg/ml; TABS 300mg   | 4                |                              |
| APTIVUS CAPS 250mg                                 | 5                | NDS                          |
| <i>atazanavir sulfate</i> CAPS 150mg, 200mg, 300mg | 4                |                              |
| <i>darunavir</i> TABS 600mg                        | 4                | QL (60 tabs / 30 days)       |
| <i>darunavir</i> TABS 800mg                        | 4                | QL (30 tabs / 30 days)       |
| EDURANT TABS 25mg                                  | 5                | NDS                          |
| EDURANT PED TBSO 2.5mg                             | 5                | NDS                          |
| <i>efavirenz</i> TABS 600mg                        | 4                |                              |
| <i>emtricitabine</i> CAPS 200mg                    | 4                |                              |
| EMTRIVA SOLN 10mg/ml                               | 4                |                              |
| <i>etravirine</i> TABS 100mg, 200mg                | 5                | NDS                          |
| <i>fosamprenavir calcium</i> TABS 700mg            | 5                | NDS                          |
| INTELENCE TABS 25mg                                | 4                |                              |
| ISENTRESS CHEW 25mg                                | 4                |                              |
| ISENTRESS CHEW 100mg; PACK 100mg; TABS 400mg       | 5                | NDS                          |
| ISENTRESS HD TABS 600mg                            | 5                | NDS                          |
| <i>lamivudine</i> SOLN 10mg/ml; TABS 150mg, 300mg  | 3                |                              |
| <i>maraviroc</i> TABS 150mg, 300mg                 | 5                | NDS                          |
| <i>nevirapine</i> SUSP 50mg/5ml; TB24 400mg        | 4                |                              |
| <i>nevirapine</i> TABS 200mg                       | 2                |                              |
| NORVIR PACK 100mg                                  | 4                |                              |
| PIFELTRO TABS 100mg                                | 5                | NDS                          |
| PREZISTA SUSP 100mg/ml                             | 5                | NDS, QL (400 mL / 30 days)   |
| PREZISTA TABS 75mg                                 | 4                | QL (480 tabs / 30 days)      |
| PREZISTA TABS 150mg                                | 5                | NDS, QL (240 tabs / 30 days) |
| REYATAZ PACK 50mg                                  | 5                | NDS                          |
| <i>ritonavir</i> TABS 100mg                        | 3                |                              |
| RUKOBIA TB12 600mg                                 | 5                | NDS                          |
| SELZENTRY SOLN 20mg/ml                             | 5                | NDS                          |
| SUNLENCA TABS 300mg; TBPk 300mg                    | 5                | NDS                          |
| <i>tenofovir disoproxil fumarate</i> TABS 300mg    | 4                |                              |
| TIVICAY TABS 50mg                                  | 5                | NDS                          |
| TIVICAY PD TBSO 5mg                                | 5                | NDS                          |
| TROGARZO SOLN 200mg/1.33ml                         | 5                | NDS                          |
| TYBOST TABS 150mg                                  | 3                |                              |
| VIRACEPT TABS 250mg, 625mg                         | 5                | NDS                          |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                  | <b>Drug Tier</b> | <b>Requirements/Limits</b> |
|-------------------------------------------------------------------|------------------|----------------------------|
| VIREAD POWD 40mg/gm; TABS 150mg, 200mg, 250mg                     | 5                | NDS                        |
| <i>zidovudine</i> CAPS 100mg                                      | 4                |                            |
| <i>zidovudine</i> SYRP 50mg/5ml; TABS 300mg                       | 3                |                            |
| <b>ANTIRETROVIRAL COMBINATION AGENTS</b>                          |                  |                            |
| <i>abacavir sulfate-lamivudine tab 600-300 mg</i>                 | 4                |                            |
| BIKTARVY TAB 30-120-15 MG                                         | 5                | NDS                        |
| BIKTARVY TAB 50-200-25 MG                                         | 5                | NDS                        |
| CIMDUO TAB 300-300                                                | 5                | NDS                        |
| DELSTRIGO TAB                                                     | 5                | NDS                        |
| DESCOVY TAB 120-15MG                                              | 5                | NDS                        |
| DESCOVY TAB 200/25MG                                              | 5                | NDS                        |
| DOVATO TAB 50-300MG                                               | 5                | NDS                        |
| <i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>    | 4                |                            |
| <i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>       | 5                | NDS                        |
| <i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>       | 5                | NDS                        |
| <i>emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg</i>   | 5                | NDS                        |
| <i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i> | 4                |                            |
| <i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i> | 5                | NDS                        |
| <i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i> | 4                |                            |
| <i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i> | 4                |                            |
| EVOTAZ TAB 300-150                                                | 5                | NDS                        |
| GENVOYA TAB                                                       | 5                | NDS                        |
| JULUCA TAB 50-25MG                                                | 5                | NDS                        |
| KALETRA SOL                                                       | 4                |                            |
| <i>lamivudine-zidovudine tab 150-300 mg</i>                       | 4                |                            |
| <i>lopinavir-ritonavir tab 100-25 mg</i>                          | 4                |                            |
| <i>lopinavir-ritonavir tab 200-50 mg</i>                          | 4                |                            |
| ODEFSEY TAB                                                       | 5                | NDS                        |
| PREZCOBIX TAB 675/150                                             | 5                | NDS                        |
| PREZCOBIX TAB 800-150                                             | 5                | NDS                        |
| STRIBILD TAB                                                      | 5                | NDS                        |
| SYMTUZA TAB                                                       | 5                | NDS                        |
| TRIUMEQ PD TAB                                                    | 4                |                            |
| TRIUMEQ TAB                                                       | 5                | NDS                        |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| Drug Name                                             | Drug Tier | Requirements/Limits                  |
|-------------------------------------------------------|-----------|--------------------------------------|
| <b>ANTITUBERCULAR AGENTS</b>                          |           |                                      |
| <i>cycloserine</i> CAPS 250mg                         | 5         | NDS                                  |
| <i>ethambutol hcl</i> TABS 100mg, 400mg               | 3         |                                      |
| <i>isoniazid</i> SYRP 50mg/5ml                        | 4         |                                      |
| <i>isoniazid</i> TABS 100mg, 300mg                    | 1         |                                      |
| PRIFTIN TABS 150mg                                    | 4         |                                      |
| <i>pyrazinamide</i> TABS 500mg                        | 4         |                                      |
| <i>rifabutin</i> CAPS 150mg                           | 4         |                                      |
| <i>rifampin</i> CAPS 150mg, 300mg                     | 3         |                                      |
| <i>rifampin</i> SOLR 600mg                            | 4         |                                      |
| SIRTURO TABS 20mg, 100mg                              | 5         | NDS, NM, PA                          |
| <b>ANTIVIRALS</b>                                     |           |                                      |
| <i>acyclovir</i> CAPS 200mg; TABS 400mg, 800mg        | 2         |                                      |
| <i>acyclovir</i> SUSP 200mg/5ml                       | 4         |                                      |
| <i>acyclovir sodium</i> SOLN 50mg/ml                  | 4         | B/D                                  |
| <i>adefovir dipivoxil</i> TABS 10mg                   | 4         |                                      |
| BARACLUDE SOLN .05mg/ml                               | 5         | NDS, ST                              |
| <i>entecavir</i> TABS .5mg, 1mg                       | 4         |                                      |
| EPCLUSA PAK 150-37.5                                  | 5         | NDS, NM, PA                          |
| EPCLUSA PAK 200-50MG                                  | 5         | NDS, NM, PA                          |
| EPCLUSA TAB 200-50MG                                  | 5         | NDS, NM, PA                          |
| EPCLUSA TAB 400-100                                   | 5         | NDS, NM, PA                          |
| <i>famciclovir</i> TABS 125mg, 250mg, 500mg           | 3         |                                      |
| <i>ganciclovir sodium</i> SOLR 500mg                  | 4         | B/D                                  |
| <i>lamivudine (hbcv)</i> TABS 100mg                   | 3         |                                      |
| LIVTENCITY TABS 200mg                                 | 5         | NDS, QL (336 tabs / 28 days), NM, PA |
| MAVYRET PAK 50-20MG                                   | 5         | NDS, NM, PA                          |
| MAVYRET TAB 100-40MG                                  | 5         | NDS, NM, PA                          |
| <i>oseltamivir phosphate</i> CAPS 30mg                | 3         | QL (168 caps / year)                 |
| <i>oseltamivir phosphate</i> CAPS 45mg, 75mg          | 3         | QL (84 caps / year)                  |
| <i>oseltamivir phosphate</i> SUSR 6mg/ml              | 3         | QL (1080 mL / year)                  |
| PAXLOVID PAK                                          | 2         | QL (22 tabs / 90 days)               |
| PAXLOVID TAB 150-100                                  | 2         | QL (40 tabs / 90 days)               |
| PAXLOVID TAB 300-100                                  | 2         | QL (60 tabs / 90 days)               |
| PEGASYS SOLN 180mcg/ml; SOSY 180mcg/0.5ml             | 5         | NDS, NM, PA                          |
| PREVYMIS TABS 240mg, 480mg                            | 5         | NDS, QL (28 tabs / 28 days), PA      |
| RELENZA DISKHALER AEPB 5mg/blister                    | 3         | QL (6 inhalers / year)               |
| <i>ribavirin (hepatitis c)</i> CAPS 200mg; TABS 200mg | 3         | NM                                   |
| <i>rimantadine hydrochloride</i> TABS 100mg           | 4         |                                      |
| <i>valacyclovir hcl</i> TABS 1gm, 500mg               | 3         |                                      |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                              | <b>Drug Tier</b> | <b>Requirements/Limits</b> |
|---------------------------------------------------------------|------------------|----------------------------|
| <i>valganciclovir hcl</i> SOLR 50mg/ml                        | 5                | NDS                        |
| <i>valganciclovir hcl</i> TABS 450mg                          | 3                |                            |
| VOSEVI TAB                                                    | 5                | NDS, NM, PA                |
| <b>CEPHALOSPORINS</b>                                         |                  |                            |
| <i>cefaclor</i> CAPS 250mg, 500mg                             | 3                |                            |
| <i>cefadroxil</i> CAPS 500mg                                  | 2                |                            |
| <i>cefadroxil</i> SUSR 250mg/5ml, 500mg/5ml                   | 3                |                            |
| CEFAZOLIN SOLR 2gm, 3gm                                       | 4                |                            |
| CEFAZOLIN INJ 1GM/50ML                                        | 4                |                            |
| <i>cefazolin sodium</i> SOLR 1gm, 2gm, 3gm, 10gm, 500mg       | 3                |                            |
| CEFAZOLIN SOLN 2GM/100ML-4%                                   | 4                |                            |
| CEFAZOLIN/DEX SOL 1GM/50ML-4%                                 | 4                |                            |
| CEFAZOLIN/DEX SOL 2GM/50ML-3%                                 | 4                |                            |
| CEFAZOLIN/DEX SOL 3GM/50ML-2%                                 | 4                |                            |
| CEFAZOLIN/DEX SOL 3GM/150ML-4%                                | 4                |                            |
| <i>cefdinir</i> CAPS 300mg                                    | 2                |                            |
| <i>cefdinir</i> SUSR 125mg/5ml, 250mg/5ml                     | 3                |                            |
| <i>cefepime hcl</i> SOLR 1gm, 2gm                             | 4                |                            |
| <i>cefixime</i> CAPS 400mg; SUSR 100mg/5ml, 200mg/5ml         | 4                |                            |
| <i>cefotetan disodium</i> SOLR 1gm, 2gm                       | 4                |                            |
| <i>cefoxitin sodium</i> SOLR 1gm, 2gm, 10gm                   | 4                |                            |
| <i>cefpodoxime proxetil</i> SUSR 50mg/5ml, 100mg/5ml          | 4                |                            |
| <i>cefpodoxime proxetil</i> TABS 100mg, 200mg                 | 3                |                            |
| <i>cefprozil</i> SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg | 3                |                            |
| <i>ceftaroline fosamil</i> SOLR 400mg, 600mg                  | 5                | NDS                        |
| <i>ceftazidime</i> SOLR 1gm, 2gm, 6gm                         | 4                |                            |
| <i>ceftriaxone sodium</i> SOLR 1gm, 2gm, 10gm, 250mg, 500mg   | 4                |                            |
| <i>cefuroxime axetil</i> TABS 250mg, 500mg                    | 2                |                            |
| <i>cefuroxime sodium</i> SOLR 1.5gm, 750mg                    | 3                |                            |
| <i>cephalexin</i> CAPS 250mg, 500mg                           | 1                |                            |
| <i>cephalexin</i> SUSR 125mg/5ml, 250mg/5ml                   | 3                |                            |
| <i>tazicef</i> SOLR 1gm, 2gm, 6gm                             | 4                |                            |
| TEFLARO SOLR 400mg, 600mg                                     | 5                | NDS                        |
| <b>ERYTHROMYCINS/MACROLIDES</b>                               |                  |                            |
| <i>azithromycin</i> SOLR 500mg; SUSR 100mg/5ml, 200mg/5ml     | 3                |                            |
| <i>azithromycin</i> TABS 250mg, 500mg, 600mg                  | 1                |                            |
| <i>clarithromycin</i> SUSR 125mg/5ml, 250mg/5ml; TB24 500mg   | 4                |                            |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                                                         | <b>Drug Tier</b> | <b>Requirements/Limits</b> |
|----------------------------------------------------------------------------------------------------------|------------------|----------------------------|
| <i>clarithromycin</i> TABS 250mg, 500mg                                                                  | 3                |                            |
| DIFICID SUSR 40mg/ml                                                                                     | 5                | NDS                        |
| <i>e.e.s. 400</i> TABS 400mg                                                                             | 4                |                            |
| ERYTHROCIN LACTOBIONATE SOLR 500mg                                                                       | 4                |                            |
| <i>erythromycin base</i> CPEP 250mg; TABS 250mg, 500mg; TBEC 250mg, 333mg, 500mg                         | 4                |                            |
| <i>erythromycin ethylsuccinate</i> TABS 400mg                                                            | 4                |                            |
| <i>erythromycin lactobionate</i> SOLR 500mg                                                              | 4                |                            |
| <i>fidaxomicin</i> TABS 200mg                                                                            | 5                | NDS                        |
| <b>FLUOROQUINOLONES</b>                                                                                  |                  |                            |
| CIPRO SUSR 500mg/5ml                                                                                     | 4                |                            |
| <i>ciprofloxacin 200 mg/100ml in d5w</i>                                                                 | 3                |                            |
| <i>ciprofloxacin 400 mg/200ml in d5w</i>                                                                 | 3                |                            |
| <i>ciprofloxacin hcl</i> TABS 250mg, 500mg, 750mg                                                        | 1                |                            |
| <i>levofloxacin</i> SOLN 25mg/ml                                                                         | 4                |                            |
| <i>levofloxacin</i> TABS 250mg, 500mg, 750mg                                                             | 1                |                            |
| <i>levofloxacin in d5w iv soln 250 mg/50ml</i>                                                           | 3                |                            |
| <i>levofloxacin in d5w iv soln 500 mg/100ml</i>                                                          | 3                |                            |
| <i>levofloxacin in d5w iv soln 750 mg/150ml</i>                                                          | 3                |                            |
| <i>moxifloxacin hcl</i> TABS 400mg                                                                       | 3                |                            |
| <i>moxifloxacin hcl 400 mg/250ml in sodium chloride 0.8% inj</i>                                         | 4                |                            |
| <b>PENICILLINS</b>                                                                                       |                  |                            |
| <i>amoxicillin</i> CAPS 250mg, 500mg; SUSR 125mg/5ml, 200mg/5ml, 250mg/5ml, 400mg/5ml; TABS 500mg, 875mg | 1                |                            |
| <i>amoxicillin</i> CHEW 125mg, 250mg                                                                     | 2                |                            |
| <i>amoxicillin &amp; k clavulanate for susp 200-28.5 mg/5ml</i>                                          | 3                |                            |
| <i>amoxicillin &amp; k clavulanate for susp 250-62.5 mg/5ml</i>                                          | 4                |                            |
| <i>amoxicillin &amp; k clavulanate for susp 400-57 mg/5ml</i>                                            | 3                |                            |
| <i>amoxicillin &amp; k clavulanate for susp 600-42.9 mg/5ml</i>                                          | 3                |                            |
| <i>amoxicillin &amp; k clavulanate tab 250-125 mg</i>                                                    | 3                |                            |
| <i>amoxicillin &amp; k clavulanate tab 500-125 mg</i>                                                    | 2                |                            |
| <i>amoxicillin &amp; k clavulanate tab 875-125 mg</i>                                                    | 2                |                            |
| <i>ampicillin</i> CAPS 500mg                                                                             | 2                |                            |
| <i>ampicillin &amp; sulbactam sodium for inj 1.5 (1-0.5) gm</i>                                          | 4                |                            |
| <i>ampicillin &amp; sulbactam sodium for inj 3 (2-1) gm</i>                                              | 4                |                            |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                         | <b>Drug Tier</b> | <b>Requirements/Limits</b>      |
|--------------------------------------------------------------------------|------------------|---------------------------------|
| <i>ampicillin &amp; sulbactam sodium for iv soln 1.5 (1-0.5) gm</i>      | 4                |                                 |
| <i>ampicillin &amp; sulbactam sodium for iv soln 3 (2-1) gm</i>          | 4                |                                 |
| <i>ampicillin &amp; sulbactam sodium for iv soln 15 (10-5) gm</i>        | 4                |                                 |
| <i>ampicillin sodium SOLR 1gm, 2gm, 10gm, 250mg, 500mg</i>               | 4                |                                 |
| <i>BICILLIN L-A SUSY 600000unit/ml, 1200000unit/2ml, 2400000unit/4ml</i> | 4                |                                 |
| <i>dicloxacillin sodium CAPS 250mg, 500mg</i>                            | 3                |                                 |
| <i>nafcillin sodium SOLR 1gm, 2gm</i>                                    | 4                |                                 |
| <i>nafcillin sodium SOLR 10gm</i>                                        | 5                | NDS                             |
| <i>oxacillin sodium SOLR 1gm, 2gm, 10gm</i>                              | 4                |                                 |
| <i>penicillin g potassium SOLR 5000000unit, 20000000unit</i>             | 4                |                                 |
| <i>penicillin g sodium SOLR 5000000unit</i>                              | 4                |                                 |
| <i>penicillin v potassium SOLR 125mg/5ml, 250mg/5ml</i>                  | 2                |                                 |
| <i>penicillin v potassium TABS 250mg, 500mg</i>                          | 1                |                                 |
| <i>pfizerpen SOLR 5000000unit, 20000000unit</i>                          | 4                |                                 |
| <i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>      | 4                |                                 |
| <i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>       | 4                |                                 |
| <i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>         | 4                |                                 |
| <i>piperacillin sod-tazobactam sod for inj 13.5 gm (12-1.5 gm)</i>       | 4                |                                 |
| <i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>       | 4                |                                 |
| <b>TETRACYCLINES</b>                                                     |                  |                                 |
| <i>doxy 100 SOLR 100mg</i>                                               | 4                |                                 |
| <i>doxycycline (monohydrate) CAPS 50mg, 100mg</i>                        | 2                |                                 |
| <i>doxycycline (monohydrate) SUSR 25mg/5ml; TABS 50mg, 75mg, 100mg</i>   | 3                |                                 |
| <i>doxycycline hyclate CAPS 50mg, 100mg; TABS 20mg, 100mg</i>            | 3                |                                 |
| <i>doxycycline hyclate SOLR 100mg</i>                                    | 4                |                                 |
| <i>minocycline hcl CAPS 50mg, 75mg, 100mg</i>                            | 3                |                                 |
| <i>NUZYRA SOLR 100mg</i>                                                 | 5                | NDS, NM                         |
| <i>NUZYRA TABS 150mg</i>                                                 | 5                | NDS, QL (30 tabs / 14 days), NM |
| <i>tetracycline hcl CAPS 250mg, 500mg</i>                                | 4                |                                 |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                                       | <b>Drug Tier</b> | <b>Requirements/Limits</b>           |
|----------------------------------------------------------------------------------------|------------------|--------------------------------------|
| <i>tigecycline</i> SOLR 50mg                                                           | 4                |                                      |
| <b>ANTINEOPLASTIC AGENTS</b>                                                           |                  |                                      |
| <b>ALKYLATING AGENTS</b>                                                               |                  |                                      |
| BENDAMUSTINE HYDROCHLORID SOLN 100mg/4ml                                               | 5                | NDS, B/D, NM                         |
| BENDEKA SOLN 100mg/4ml                                                                 | 5                | NDS, B/D, NM                         |
| <i>carboplatin</i> SOLN 50mg/5ml, 150mg/15ml, 450mg/45ml, 600mg/60ml                   | 3                | B/D                                  |
| <i>cisplatin</i> SOLN 50mg/50ml, 100mg/100ml, 200mg/200ml                              | 3                | B/D                                  |
| <i>cyclophosphamide</i> CAPS 25mg, 50mg                                                | 3                | B/D                                  |
| CYCLOPHOSPHAMIDE SOLN 1gm/2ml, 2gm/4ml, 500mg/ml                                       | 5                | NDS, B/D, NM                         |
| CYCLOPHOSPHAMIDE SOLN 1gm/5ml, 500mg/2.5ml, 500mg/5ml, 1000mg/10ml, 2000mg/20ml        | 5                | NDS, B/D                             |
| <i>cyclophosphamide</i> SOLR 1gm, 500mg                                                | 4                | B/D                                  |
| <i>cyclophosphamide</i> SOLR 2gm                                                       | 5                | NDS, B/D                             |
| CYCLOPHOSPHAMIDE TABS 25mg, 50mg                                                       | 4                | B/D                                  |
| CYCLOPHOSPHAMIDE MONOHYDR SOLN 2gm/10ml                                                | 5                | NDS, B/D                             |
| FRINDOVYX SOLN 1gm/2ml, 2gm/4ml, 500mg/ml                                              | 5                | NDS, B/D, NM                         |
| GLEOSTINE CAPS 10mg, 40mg                                                              | 4                | NM                                   |
| GLEOSTINE CAPS 100mg                                                                   | 5                | NDS, NM                              |
| LEUKERAN TABS 2mg                                                                      | 5                | NDS, PA                              |
| <i>lomustine</i> CAPS 10mg, 40mg                                                       | 4                | NM                                   |
| <i>lomustine</i> CAPS 100mg                                                            | 5                | NDS, NM                              |
| <i>oxaliplatin</i> SOLN 50mg/10ml, 100mg/20ml, 200mg/40ml                              | 4                | B/D                                  |
| <i>oxaliplatin</i> SOLR 50mg, 100mg                                                    | 5                | NDS, B/D                             |
| VIVIMUSTA SOLN 100mg/4ml                                                               | 5                | NDS, B/D, NM                         |
| <b>ANTIMETABOLITES</b>                                                                 |                  |                                      |
| <i>azacitidine</i> SUSR 100mg                                                          | 5                | NDS, B/D, NM                         |
| <i>cytarabine</i> SOLN 20mg/ml                                                         | 3                | B/D                                  |
| <i>fluorouracil</i> SOLN 1gm/20ml, 2.5gm/50ml, 5gm/100ml, 500mg/10ml                   | 3                | B/D                                  |
| <i>gemcitabine hcl</i> SOLN 1gm/26.3ml, 2gm/52.6ml, 200mg/5.26ml; SOLR 1gm, 2gm, 200mg | 4                | B/D                                  |
| INQOVI TAB 35-100MG                                                                    | 5                | NDS, QL (5 tabs / 28 days), NM, PA   |
| LONSURF TAB 15-6.14                                                                    | 5                | NDS, QL (100 tabs / 28 days), NM, PA |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                         | <b>Drug Tier</b> | <b>Requirements/Limits</b>           |
|--------------------------------------------------------------------------|------------------|--------------------------------------|
| LONSURF TAB 20-8.19                                                      | 5                | NDS, QL (80 tabs / 28 days), NM, PA  |
| <i>mercaptopurine</i> SUSP 2000mg/100ml                                  | 5                | NDS, NM                              |
| <i>mercaptopurine</i> TABS 50mg                                          | 3                |                                      |
| <i>methotrexate sodium</i> SOLN 1gm/40ml, 50mg/2ml, 250mg/10ml; SOLR 1gm | 2                | B/D                                  |
| ONUREG TABS 200mg, 300mg                                                 | 5                | NDS, QL (14 tabs / 28 days), NM, PA  |
| <i>pemetrexed disodium</i> SOLR 100mg, 500mg, 750mg, 1000mg              | 5                | NDS, B/D                             |
| TABLOID TABS 40mg                                                        | 5                | NDS, PA                              |
| <b>HORMONAL ANTINEOPLASTIC AGENTS</b>                                    |                  |                                      |
| <i>abiraterone acetate</i> TABS 250mg                                    | 5                | NDS, QL (120 tabs / 30 days), NM, PA |
| <i>abiraterone acetate</i> TABS 500mg                                    | 5                | NDS, QL (60 tabs / 30 days), NM, PA  |
| <i>abirtega</i> TABS 250mg                                               | 4                | QL (120 tabs / 30 days), NM, PA      |
| AKEEGA TAB 50/500MG                                                      | 5                | NDS, QL (60 tabs / 30 days), NM, PA  |
| AKEEGA TAB 100/500                                                       | 5                | NDS, QL (60 tabs / 30 days), NM, PA  |
| <i>anastrozole</i> TABS 1mg                                              | 2                |                                      |
| <i>bicalutamide</i> TABS 50mg                                            | 2                |                                      |
| ELIGARD KIT 7.5mg, 22.5mg, 30mg, 45mg                                    | 4                | NM, PA                               |
| ERLEADA TABS 60mg                                                        | 5                | NDS, QL (120 tabs / 30 days), NM, PA |
| ERLEADA TABS 240mg                                                       | 5                | NDS, QL (30 tabs / 30 days), NM, PA  |
| EULEXIN CAPS 125mg                                                       | 5                | NDS                                  |
| <i>exemestane</i> TABS 25mg                                              | 4                |                                      |
| FIRMAGON SOLR 80mg                                                       | 4                | NM, PA                               |
| FIRMAGON SOLR 120mg/vial                                                 | 5                | NDS, NM, PA                          |
| <i>fulvestrant</i> SOSY 250mg/5ml                                        | 5                | NDS, B/D                             |
| INLURIYO TABS 200mg                                                      | 5                | NDS, QL (56 tabs / 28 days), NM, PA  |
| <i>letrozole</i> TABS 2.5mg                                              | 2                |                                      |
| <i>leuprolide acetate</i> KIT 1mg/0.2ml                                  | 4                | NM, PA                               |
| LUPRON DEPOT (1-MONTH) KIT 3.75mg                                        | 5                | NDS, NM, PA                          |
| LUPRON DEPOT (3-MONTH) KIT 11.25mg                                       | 5                | NDS, NM, PA                          |
| LYSODREN TABS 500mg                                                      | 5                | NDS, NM                              |
| <i>megestrol acetate</i> TABS 20mg, 40mg                                 | 3                |                                      |
| <i>nilutamide</i> TABS 150mg                                             | 5                | NDS                                  |
| NUBEQA TABS 300mg                                                        | 5                | NDS, QL (120 tabs / 30 days), NM, PA |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                                 | <b>Drug Tier</b> | <b>Requirements/Limits</b>             |
|----------------------------------------------------------------------------------|------------------|----------------------------------------|
| ORGOVYX TABS 120mg                                                               | 5                | NDS, NM, PA                            |
| ORSERDU TABS 86mg                                                                | 5                | NDS, QL (90 tabs / 30 days), NM, PA    |
| ORSERDU TABS 345mg                                                               | 5                | NDS, QL (30 tabs / 30 days), NM, PA    |
| SOLTAMOX SOLN 10mg/5ml                                                           | 5                | NDS                                    |
| <i>tamoxifen citrate</i> TABS 10mg, 20mg                                         | 2                |                                        |
| <i>toremifene citrate</i> TABS 60mg                                              | 4                | PA                                     |
| XTANDI CAPS 40mg                                                                 | 5                | NDS, QL (120 caps / 30 days), NM, PA   |
| XTANDI TABS 40mg                                                                 | 5                | NDS, QL (120 tabs / 30 days), NM, PA   |
| XTANDI TABS 80mg                                                                 | 5                | NDS, QL (60 tabs / 30 days), NM, PA    |
| YONSA TABS 125mg                                                                 | 5                | NDS, QL (120 tabs / 30 days), NM, PA   |
| <b>IMMUNOMODULATORS</b>                                                          |                  |                                        |
| <i>lenalidomide</i> CAPS 2.5mg, 5mg, 10mg, 15mg                                  | 5                | NDS, QL (28 caps / 28 days), NM, PA    |
| <i>lenalidomide</i> CAPS 20mg, 25mg                                              | 5                | NDS, QL (21 caps / 28 days), NM, PA    |
| POMALYST CAPS 1mg, 2mg, 3mg, 4mg                                                 | 5                | NDS, QL (21 caps / 28 days), NM, PA    |
| THALOMID CAPS 50mg                                                               | 5                | NDS, QL (84 caps / 28 days), NM, PA    |
| THALOMID CAPS 100mg                                                              | 5                | NDS, QL (112 caps / 28 days), NM, PA   |
| <b>MISCELLANEOUS</b>                                                             |                  |                                        |
| BESREMI SOSY 500mcg/ml                                                           | 5                | NDS, QL (2 syringes / 28 days), NM, PA |
| <i>bexarotene</i> CAPS 75mg                                                      | 5                | NDS, QL (300 caps / 30 days), NM, PA   |
| <i>doxorubicin hcl</i> SOLN 2mg/ml                                               | 4                | B/D                                    |
| <i>doxorubicin hcl liposomal</i> SUSP 2mg/ml                                     | 5                | NDS, B/D                               |
| <i>hydroxyurea</i> CAPS 500mg                                                    | 2                |                                        |
| <i>irinotecan hcl</i> SOLN 40mg/2ml, 100mg/5ml, 300mg/15ml, 500mg/25ml           | 4                | B/D                                    |
| IWILFIN TABS 192mg                                                               | 5                | NDS, QL (240 tabs / 30 days), NM, PA   |
| <i>leucovorin calcium</i> SOLN 500mg/50ml; SOLR 50mg, 100mg, 200mg, 350mg, 500mg | 4                | B/D                                    |
| <i>leucovorin calcium</i> TABS 5mg, 10mg, 15mg, 25mg                             | 3                |                                        |
| MATULANE CAPS 50mg                                                               | 5                | NDS, NM                                |
| <i>mesna</i> TABS 400mg                                                          | 5                | NDS                                    |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                               | <b>Drug Tier</b> | <b>Requirements/Limits</b>           |
|--------------------------------------------------------------------------------|------------------|--------------------------------------|
| MODEYSO CAPS 125mg                                                             | 5                | NDS, QL (20 caps / 28 days), NM, PA  |
| <i>tretinoin (chemotherapy)</i> CAPS 10mg                                      | 5                | NDS                                  |
| WELIREG TABS 40mg                                                              | 5                | NDS, QL (90 tabs / 30 days), NM, PA  |
| <b>MITOTIC INHIBITORS</b>                                                      |                  |                                      |
| <i>docetaxel</i> CONC 20mg/ml                                                  | 4                | B/D                                  |
| <i>docetaxel</i> CONC 80mg/4ml, 160mg/8ml; SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml | 5                | NDS, B/D                             |
| DOCETAXEL CONC 80mg/4ml, 160mg/8ml; SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml        | 5                | NDS, B/D                             |
| DOCIVYX SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml                                    | 5                | NDS, B/D, NM                         |
| <i>etoposide</i> SOLN 1gm/50ml, 100mg/5ml, 500mg/25ml                          | 3                | B/D                                  |
| <i>paclitaxel</i> CONC 6mg/ml, 30mg/5ml, 150mg/25ml, 300mg/50ml                | 4                | B/D                                  |
| <i>paclitaxel inj 100mg</i>                                                    | 5                | NDS, B/D, NM                         |
| <i>vincristine sulfate</i> SOLN 1mg/ml                                         | 2                | B/D                                  |
| <i>vinorelbine tartrate</i> SOLN 10mg/ml, 50mg/5ml                             | 4                | B/D                                  |
| <b>MOLECULAR TARGET AGENTS</b>                                                 |                  |                                      |
| ALECENSA CAPS 150mg                                                            | 5                | NDS, QL (240 caps / 30 days), NM, PA |
| ALUNBRIG TABS 30mg                                                             | 5                | NDS, QL (120 tabs / 30 days), NM, PA |
| ALUNBRIG TABS 90mg, 180mg                                                      | 5                | NDS, QL (30 tabs / 30 days), NM, PA  |
| ALUNBRIG PAK                                                                   | 5                | NDS, QL (30 tabs / 30 days), NM, PA  |
| AUGTYRO CAPS 40mg                                                              | 5                | NDS, QL (240 caps / 30 days), NM, PA |
| AUGTYRO CAPS 160mg                                                             | 5                | NDS, QL (60 caps / 30 days), NM, PA  |
| AVMAPKI PAK FAKZYNJA                                                           | 5                | NDS, QL (1 pack / 28 days), NM, PA   |
| AYVAKIT TABS 25mg, 50mg, 100mg, 200mg, 300mg                                   | 5                | NDS, QL (30 tabs / 30 days), NM, PA  |
| BALVERSA TABS 3mg                                                              | 5                | NDS, QL (84 tabs / 28 days), NM, PA  |
| BALVERSA TABS 4mg                                                              | 5                | NDS, QL (56 tabs / 28 days), NM, PA  |
| BALVERSA TABS 5mg                                                              | 5                | NDS, QL (28 tabs / 28 days), NM, PA  |
| BORTEZOMIB SOLR 1mg, 2.5mg                                                     | 4                | NM, PA                               |
| <i>bortezomib</i> SOLR 3.5mg                                                   | 5                | NDS, NM, PA                          |

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| <b>Drug Name</b>                                     | <b>Drug Tier</b> | <b>Requirements/Limits</b>           |
|------------------------------------------------------|------------------|--------------------------------------|
| BOSULIF CAPS 50mg                                    | 5                | NDS, QL (30 caps / 30 days), NM, PA  |
| BOSULIF CAPS 100mg                                   | 5                | NDS, QL (300 caps / 30 days), NM, PA |
| BOSULIF TABS 100mg                                   | 5                | NDS, QL (180 tabs / 30 days), NM, PA |
| BOSULIF TABS 400mg, 500mg                            | 5                | NDS, QL (30 tabs / 30 days), NM, PA  |
| BRAFTOVI CAPS 75mg                                   | 5                | NDS, QL (180 caps / 30 days), NM, PA |
| BRUKINSA CAPS 80mg                                   | 5                | NDS, QL (120 caps / 30 days), NM, PA |
| BRUKINSA TABS 160mg                                  | 5                | NDS, QL (60 tabs / 30 days), NM, PA  |
| CABOMETYX TABS 20mg, 40mg, 60mg                      | 5                | NDS, QL (30 tabs / 30 days), NM, PA  |
| CALQUENCE TABS 100mg                                 | 5                | NDS, QL (60 tabs / 30 days), NM, PA  |
| CAPRELSA TABS 100mg                                  | 5                | NDS, QL (60 tabs / 30 days), NM, PA  |
| CAPRELSA TABS 300mg                                  | 5                | NDS, QL (30 tabs / 30 days), NM, PA  |
| COMETRIQ (60MG DOSE) KIT 20mg                        | 5                | NDS, QL (84 caps / 28 days), NM, PA  |
| COMETRIQ KIT 100MG                                   | 5                | NDS, QL (56 caps / 28 days), NM, PA  |
| COMETRIQ KIT 140MG                                   | 5                | NDS, QL (112 caps / 28 days), NM, PA |
| COPIKTRA CAPS 15mg, 25mg                             | 5                | NDS, QL (56 caps / 28 days), NM, PA  |
| COTELLIC TABS 20mg                                   | 5                | NDS, QL (63 tabs / 28 days), NM, PA  |
| DANZITEN TABS 71mg, 95mg                             | 5                | NDS, QL (112 tabs / 28 days), NM, PA |
| <i>dasatinib</i> TABS 20mg                           | 5                | NDS, QL (90 tabs / 30 days), NM, PA  |
| <i>dasatinib</i> TABS 50mg, 70mg, 80mg, 100mg, 140mg | 5                | NDS, QL (30 tabs / 30 days), NM, PA  |
| DAURISMO TABS 25mg                                   | 5                | NDS, QL (60 tabs / 30 days), NM, PA  |
| DAURISMO TABS 100mg                                  | 5                | NDS, QL (30 tabs / 30 days), NM, PA  |
| ENSACOVE CAPS 25mg                                   | 5                | NDS, QL (270 caps / 30 days), NM, PA |
| ENSACOVE CAPS 100mg                                  | 5                | NDS, QL (60 caps / 30 days), NM, PA  |

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| <b>Drug Name</b>                               | <b>Drug Tier</b> | <b>Requirements/Limits</b>           |
|------------------------------------------------|------------------|--------------------------------------|
| ERIVEDGE CAPS 150mg                            | 5                | NDS, QL (30 caps / 30 days), NM, PA  |
| <i>erlotinib hcl</i> TABS 25mg                 | 5                | NDS, QL (90 tabs / 30 days), NM, PA  |
| <i>erlotinib hcl</i> TABS 100mg, 150mg         | 5                | NDS, QL (30 tabs / 30 days), NM, PA  |
| <i>everolimus</i> TABS 2.5mg, 5mg, 7.5mg, 10mg | 5                | NDS, QL (30 tabs / 30 days), NM, PA  |
| <i>everolimus</i> TBSO 2mg, 5mg                | 5                | NDS, QL (60 tabs / 30 days), NM, PA  |
| <i>everolimus</i> TBSO 3mg                     | 5                | NDS, QL (90 tabs / 30 days), NM, PA  |
| FOTIVDA CAPS .89mg, 1.34mg                     | 5                | NDS, QL (21 caps / 28 days), NM, PA  |
| FRUZAQLA CAPS 1mg                              | 5                | NDS, QL (84 caps / 28 days), NM, PA  |
| FRUZAQLA CAPS 5mg                              | 5                | NDS, QL (21 caps / 28 days), NM, PA  |
| GAVRETO CAPS 100mg                             | 5                | NDS, QL (120 caps / 30 days), NM, PA |
| <i>gefitinib</i> TABS 250mg                    | 5                | NDS, QL (60 tabs / 30 days), NM, PA  |
| GILOTRIF TABS 20mg, 30mg, 40mg                 | 5                | NDS, QL (30 tabs / 30 days), NM, PA  |
| GOMEKLI CAPS 1mg                               | 5                | NDS, QL (168 caps / 28 days), NM, PA |
| GOMEKLI CAPS 2mg                               | 5                | NDS, QL (84 caps / 28 days), NM, PA  |
| GOMEKLI TBSO 1mg                               | 5                | NDS, QL (168 tabs / 28 days), NM, PA |
| HERCEP HYLEC SOL 60-10000                      | 5                | NDS, NM, PA                          |
| HERCEPTIN SOLR 150mg                           | 5                | NDS, NM, PA                          |
| HERCESSI SOLR 150mg, 420mg                     | 5                | NDS, NM, PA                          |
| HERNEXEOS TABS 60mg                            | 5                | NDS, QL (120 tabs / 30 days), NM, PA |
| HERZUMA SOLR 150mg, 420mg                      | 5                | NDS, NM, PA                          |
| HYRNUO TABS 10mg                               | 5                | NDS, QL (120 tabs / 30 days), NM, PA |
| IBRANCE CAPS 75mg, 100mg, 125mg                | 5                | NDS, QL (21 caps / 28 days), NM, PA  |
| IBRANCE TABS 75mg, 100mg, 125mg                | 5                | NDS, QL (21 tabs / 28 days), NM, PA  |
| IBTROZI CAPS 200mg                             | 5                | NDS, QL (90 caps / 30 days), NM, PA  |
| ICLUSIG TABS 10mg, 15mg, 30mg, 45mg            | 5                | NDS, QL (30 tabs / 30 days), NM, PA  |

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| <b>Drug Name</b>                         | <b>Drug Tier</b> | <b>Requirements/Limits</b>           |
|------------------------------------------|------------------|--------------------------------------|
| IDHIFA TABS 50mg, 100mg                  | 5                | NDS, QL (30 tabs / 30 days), NM, PA  |
| <i>imatinib mesylate</i> TABS 100mg      | 4                | QL (90 tabs / 30 days), NM, PA       |
| <i>imatinib mesylate</i> TABS 400mg      | 5                | NDS, QL (60 tabs / 30 days), NM, PA  |
| IMBRUVICA CAPS 70mg                      | 5                | NDS, QL (30 caps / 30 days), NM, PA  |
| IMBRUVICA CAPS 140mg                     | 5                | NDS, QL (120 caps / 30 days), NM, PA |
| IMBRUVICA SUSP 70mg/ml                   | 5                | NDS, QL (216 mL / 27 days), NM, PA   |
| IMBRUVICA TABS 140mg, 280mg, 420mg       | 5                | NDS, QL (30 tabs / 30 days), NM, PA  |
| IMKELDI SOLN 80mg/ml                     | 5                | NDS, QL (280 mL / 28 days), NM, PA   |
| INLYTA TABS 1mg                          | 5                | NDS, QL (180 tabs / 30 days), NM, PA |
| INLYTA TABS 5mg                          | 5                | NDS, QL (120 tabs / 30 days), NM, PA |
| INREBIC CAPS 100mg                       | 5                | NDS, QL (120 caps / 30 days), NM, PA |
| ITOVEBI TABS 3mg                         | 5                | NDS, QL (56 tabs / 28 days), NM, PA  |
| ITOVEBI TABS 9mg                         | 5                | NDS, QL (28 tabs / 28 days), NM, PA  |
| JAKAFI TABS 5mg, 10mg, 15mg, 20mg, 25mg  | 5                | NDS, QL (60 tabs / 30 days), NM, PA  |
| JAYPIRCA TABS 50mg                       | 5                | NDS, QL (30 tabs / 30 days), NM, PA  |
| JAYPIRCA TABS 100mg                      | 5                | NDS, QL (60 tabs / 30 days), NM, PA  |
| KADCYLA SOLR 100mg, 160mg                | 5                | NDS, B/D, NM                         |
| KANJINTI SOLR 150mg, 420mg               | 5                | NDS, NM, PA                          |
| KEYTRUDA SOLN 100mg/4ml                  | 5                | NDS, NM, PA                          |
| KEYTRUDA INJ QLEX 395-4800 MG-UNIT/2.4ML | 5                | NDS, QL (1 vial / 21 days), NM, PA   |
| KEYTRUDA INJ QLEX 790-9600 MG-UNIT/4.8ML | 5                | NDS, QL (1 vial / 42 days), NM, PA   |
| KISQALI 200 DOSE TBPK 200mg              | 5                | NDS, QL (21 tabs / 28 days), NM, PA  |
| KISQALI 400 DOSE TBPK 200mg              | 5                | NDS, QL (42 tabs / 28 days), NM, PA  |
| KISQALI 400 PAK FEMARA                   | 5                | NDS, QL (70 tabs / 28 days), NM, PA  |

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| <b>Drug Name</b>                       | <b>Drug Tier</b> | <b>Requirements/Limits</b>           |
|----------------------------------------|------------------|--------------------------------------|
| KISQALI 600 DOSE TBPK 200mg            | 5                | NDS, QL (63 tabs / 28 days), NM, PA  |
| KISQALI 600 PAK FEMARA                 | 5                | NDS, QL (91 tabs / 28 days), NM, PA  |
| KOMZIFTI CAPS 200mg                    | 5                | NDS, QL (90 caps / 30 days), NM, PA  |
| KOSELUGO CAPS 10mg                     | 5                | NDS, QL (240 caps / 30 days), NM, PA |
| KOSELUGO CAPS 25mg                     | 5                | NDS, QL (120 caps / 30 days), NM, PA |
| KOSELUGO CPSP 5mg                      | 5                | NDS, QL (600 caps / 30 days), NM, PA |
| KOSELUGO CPSP 7.5mg                    | 5                | NDS, QL (360 caps / 30 days), NM, PA |
| KRAZATI TABS 200mg                     | 5                | NDS, QL (180 tabs / 30 days), NM, PA |
| <i>lapatinib ditosylate</i> TABS 250mg | 5                | NDS, QL (180 tabs / 30 days), NM, PA |
| LAZCLUZE TABS 80mg                     | 5                | NDS, QL (60 tabs / 30 days), NM, PA  |
| LAZCLUZE TABS 240mg                    | 5                | NDS, QL (30 tabs / 30 days), NM, PA  |
| LENVIMA 4 MG DAILY DOSE CPPK 4mg       | 5                | NDS, QL (30 caps / 30 days), NM, PA  |
| LENVIMA 8 MG DAILY DOSE CPPK 4mg       | 5                | NDS, QL (60 caps / 30 days), NM, PA  |
| LENVIMA 10 MG DAILY DOSE CPPK 10mg     | 5                | NDS, QL (30 caps / 30 days), NM, PA  |
| LENVIMA 12MG DAILY DOSE CPPK 4mg       | 5                | NDS, QL (90 caps / 30 days), NM, PA  |
| LENVIMA 20 MG DAILY DOSE CPPK 10mg     | 5                | NDS, QL (60 caps / 30 days), NM, PA  |
| LENVIMA CAP 14 MG                      | 5                | NDS, QL (60 caps / 30 days), NM, PA  |
| LENVIMA CAP 18 MG                      | 5                | NDS, QL (90 caps / 30 days), NM, PA  |
| LENVIMA CAP 24 MG                      | 5                | NDS, QL (90 caps / 30 days), NM, PA  |
| LORBRENA TABS 25mg                     | 5                | NDS, QL (90 tabs / 30 days), NM, PA  |
| LORBRENA TABS 100mg                    | 5                | NDS, QL (30 tabs / 30 days), NM, PA  |
| LUMAKRAS TABS 120mg                    | 5                | NDS, QL (240 tabs / 30 days), NM, PA |
| LUMAKRAS TABS 240mg                    | 5                | NDS, QL (120 tabs / 30 days), NM, PA |

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| <b>Drug Name</b>                       | <b>Drug Tier</b> | <b>Requirements/Limits</b>           |
|----------------------------------------|------------------|--------------------------------------|
| LUMAKRAS TABS 320mg                    | 5                | NDS, QL (90 tabs / 30 days), NM, PA  |
| LYNPARZA TABS 100mg, 150mg             | 5                | NDS, QL (120 tabs / 30 days), NM, PA |
| LYTGOBI (12 MG DAILY DOSE) TBPK 4mg    | 5                | NDS, QL (84 tabs / 28 days), NM, PA  |
| LYTGOBI (16 MG DAILY DOSE) TBPK 4mg    | 5                | NDS, QL (112 tabs / 28 days), NM, PA |
| LYTGOBI (20 MG DAILY DOSE) TBPK 4mg    | 5                | NDS, QL (140 tabs / 28 days), NM, PA |
| MEKINIST SOLR .05mg/ml                 | 5                | NDS, QL (1260 mL / 30 days), NM, PA  |
| MEKINIST TABS 2mg                      | 5                | NDS, QL (30 tabs / 30 days), NM, PA  |
| MEKINIST TABS .5mg                     | 5                | NDS, QL (90 tabs / 30 days), NM, PA  |
| MEKTOVI TABS 15mg                      | 5                | NDS, QL (180 tabs / 30 days), NM, PA |
| MONJUVI SOLR 200mg                     | 5                | NDS, NM, PA                          |
| NERLYNX TABS 40mg                      | 5                | NDS, QL (180 tabs / 30 days), NM, PA |
| <i>nilotinib hcl</i> CAPS 50mg         | 5                | NDS, QL (120 caps / 30 days), NM, PA |
| <i>nilotinib hcl</i> CAPS 150mg, 200mg | 5                | NDS, QL (112 caps / 28 days), NM, PA |
| NINLARO CAPS 2.3mg, 3mg, 4mg           | 5                | NDS, QL (3 caps / 28 days), NM, PA   |
| ODOMZO CAPS 200mg                      | 5                | NDS, QL (30 caps / 30 days), NM, PA  |
| OGIVRI SOLR 150mg, 420mg               | 5                | NDS, NM, PA                          |
| OGSIVEO TABS 100mg, 150mg              | 5                | NDS, QL (56 tabs / 28 days), NM, PA  |
| OJEMDA SUSR 25mg/ml                    | 5                | NDS, QL (96 mL / 28 days), NM, PA    |
| OJEMDA TABS 100mg                      | 5                | NDS, QL (24 tabs / 28 days), NM, PA  |
| OJJAARA TABS 100mg, 150mg, 200mg       | 5                | NDS, QL (30 tabs / 30 days), NM, PA  |
| ONTRUZANT SOLR 150mg, 420mg            | 5                | NDS, NM, PA                          |
| <i>pazopanib hcl</i> TABS 200mg        | 5                | NDS, QL (120 tabs / 30 days), NM, PA |
| <i>pazopanib hcl</i> TABS 400mg        | 5                | NDS, QL (60 tabs / 30 days), NM, PA  |
| PEMAZYRE TABS 4.5mg, 9mg, 13.5mg       | 5                | NDS, QL (28 tabs / 28 days), NM, PA  |
| PHESGO SOL                             | 5                | NDS, NM, PA                          |

**You can find information on what the symbols and abbreviations in this table mean by going to Section C1.**

| <b>Drug Name</b>                                        | <b>Drug Tier</b> | <b>Requirements/Limits</b>              |
|---------------------------------------------------------|------------------|-----------------------------------------|
| PIQRAY 200MG DAILY DOSE TBPK 200mg                      | 5                | NDS, QL (28 tabs / 28 days), NM, PA     |
| PIQRAY 250MG TAB DOSE                                   | 5                | NDS, QL (56 tabs / 28 days), NM, PA     |
| PIQRAY 300MG DAILY DOSE TBPK 150mg                      | 5                | NDS, QL (56 tabs / 28 days), NM, PA     |
| QINLOCK TABS 50mg                                       | 5                | NDS, QL (90 tabs / 30 days), NM, PA     |
| RETEVMO TABS 40mg                                       | 5                | NDS, QL (90 tabs / 30 days), NM, PA     |
| RETEVMO TABS 80mg                                       | 5                | NDS, QL (120 tabs / 30 days), NM, PA    |
| RETEVMO TABS 120mg, 160mg                               | 5                | NDS, QL (60 tabs / 30 days), NM, PA     |
| REVUFORJ TABS 25mg                                      | 5                | NDS, QL (240 tabs / 30 days), NM, PA    |
| REVUFORJ TABS 110mg                                     | 5                | NDS, QL (120 tabs / 30 days), NM, PA    |
| REVUFORJ TABS 160mg                                     | 5                | NDS, QL (60 tabs / 30 days), NM, PA     |
| REZLIDHIA CAPS 150mg                                    | 5                | NDS, QL (60 caps / 30 days), NM, PA     |
| ROMVIMZA CAPS 14mg, 20mg, 30mg                          | 5                | NDS, QL (8 caps / 28 days), NM, PA      |
| ROZLYTREK CAPS 100mg                                    | 5                | NDS, QL (180 caps / 30 days), NM, PA    |
| ROZLYTREK CAPS 200mg                                    | 5                | NDS, QL (90 caps / 30 days), NM, PA     |
| ROZLYTREK PACK 50mg                                     | 5                | NDS, QL (336 packets / 28 days), NM, PA |
| RUBRACA TABS 200mg, 250mg, 300mg                        | 5                | NDS, QL (120 tabs / 30 days), NM, PA    |
| RYDAPT CAPS 25mg                                        | 5                | NDS, QL (224 caps / 28 days), NM, PA    |
| SCEMBLIX TABS 20mg                                      | 5                | NDS, QL (60 tabs / 30 days), NM, PA     |
| SCEMBLIX TABS 40mg                                      | 5                | NDS, QL (300 tabs / 30 days), NM, PA    |
| SCEMBLIX TABS 100mg                                     | 5                | NDS, QL (120 tabs / 30 days), NM, PA    |
| <i>sorafenib tosylate</i> TABS 200mg                    | 5                | NDS, QL (120 tabs / 30 days), NM, PA    |
| STIVARGA TABS 40mg                                      | 5                | NDS, QL (84 tabs / 28 days), NM, PA     |
| <i>sunitinib malate</i> CAPS 12.5mg, 25mg, 37.5mg, 50mg | 5                | NDS, QL (30 caps / 30 days), NM, PA     |

**You can find information on what the symbols and abbreviations in this table mean by going to Section C1.**

| <b>Drug Name</b>                            | <b>Drug Tier</b> | <b>Requirements/Limits</b>           |
|---------------------------------------------|------------------|--------------------------------------|
| TABRECTA TABS 150mg, 200mg                  | 5                | NDS, QL (112 tabs / 28 days), NM, PA |
| TAFINLAR CAPS 50mg, 75mg                    | 5                | NDS, QL (120 caps / 30 days), NM, PA |
| TAFINLAR TBSO 10mg                          | 5                | NDS, QL (840 tabs / 28 days), NM, PA |
| TAGRISSE TABS 40mg, 80mg                    | 5                | NDS, QL (30 tabs / 30 days), NM, PA  |
| TALZENNA CAPS .1mg, .35mg, .5mg, .75mg, 1mg | 5                | NDS, QL (30 caps / 30 days), NM, PA  |
| TALZENNA CAPS .25mg                         | 5                | NDS, QL (90 caps / 30 days), NM, PA  |
| TAZVERIK TABS 200mg                         | 5                | NDS, QL (240 tabs / 30 days), NM, PA |
| TECENTRIQ SOLN 840mg/14ml, 1200mg/20ml      | 5                | NDS, NM, PA                          |
| TECENTRIQ INJ HYBREZA                       | 5                | NDS, QL (1 vial / 21 days), NM, PA   |
| TEPMETKO TABS 225mg                         | 5                | NDS, QL (60 tabs / 30 days), NM, PA  |
| TIBSOVO TABS 250mg                          | 5                | NDS, QL (60 tabs / 30 days), NM, PA  |
| torpenz TABS 2.5mg, 5mg, 7.5mg, 10mg        | 5                | NDS, QL (30 tabs / 30 days), NM, PA  |
| TRAZIMERA SOLR 150mg, 420mg                 | 5                | NDS, NM, PA                          |
| TRUQAP TABS 160mg, 200mg                    | 5                | NDS, QL (64 tabs / 28 days), NM, PA  |
| TRUQAP TBPK 160mg, 200mg                    | 5                | NDS, QL (4 packs / 28 days), NM, PA  |
| TRUXIMA SOLN 100mg/10ml, 500mg/50ml         | 5                | NDS, NM, PA                          |
| TUKYSA TABS 50mg, 150mg                     | 5                | NDS, QL (120 tabs / 30 days), NM, PA |
| TURALIO CAPS 125mg                          | 5                | NDS, QL (120 caps / 30 days), NM, PA |
| VANFLYTA TABS 17.7mg, 26.5mg                | 5                | NDS, QL (56 tabs / 28 days), NM, PA  |
| VENCLEXTA TABS 10mg                         | 3                | QL (112 tabs / 28 days), NM, PA      |
| VENCLEXTA TABS 50mg                         | 5                | NDS, QL (112 tabs / 28 days), NM, PA |
| VENCLEXTA TABS 100mg                        | 5                | NDS, QL (180 tabs / 30 days), NM, PA |
| VENCLEXTA TAB START PK                      | 5                | NDS, QL (42 tabs / 28 days), NM, PA  |
| VERZENIO TABS 50mg, 100mg, 150mg, 200mg     | 5                | NDS, QL (56 tabs / 28 days), NM, PA  |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                           | <b>Drug Tier</b> | <b>Requirements/Limits</b>           |
|--------------------------------------------|------------------|--------------------------------------|
| VITRAKVI CAPS 25mg                         | 5                | NDS, QL (180 caps / 30 days), NM, PA |
| VITRAKVI CAPS 100mg                        | 5                | NDS, QL (60 caps / 30 days), NM, PA  |
| VITRAKVI SOLN 20mg/ml                      | 5                | NDS, QL (300 mL / 30 days), NM, PA   |
| VIZIMPRO TABS 15mg, 30mg, 45mg             | 5                | NDS, QL (30 tabs / 30 days), NM, PA  |
| VONJO CAPS 100mg                           | 5                | NDS, QL (120 caps / 30 days), NM, PA |
| VORANIGO TABS 10mg                         | 5                | NDS, QL (60 tabs / 30 days), NM, PA  |
| VORANIGO TABS 40mg                         | 5                | NDS, QL (30 tabs / 30 days), NM, PA  |
| XALKORI CAPS 200mg, 250mg; CPSP 20mg, 50mg | 5                | NDS, QL (120 caps / 30 days), NM, PA |
| XALKORI CPSP 150mg                         | 5                | NDS, QL (180 caps / 30 days), NM, PA |
| XOSPATA TABS 40mg                          | 5                | NDS, QL (90 tabs / 30 days), NM, PA  |
| XPOVIO PAK (40 MG ONCE WEEKLY) TBPk 10mg   | 5                | NDS, QL (16 tabs / 28 days), NM, PA  |
| XPOVIO PAK (40 MG ONCE WEEKLY) TBPk 40mg   | 5                | NDS, QL (4 tabs / 28 days), NM, PA   |
| XPOVIO PAK (40 MG TWICE WEEKLY) TBPk 40mg  | 5                | NDS, QL (8 tabs / 28 days), NM, PA   |
| XPOVIO PAK (60 MG ONCE WEEKLY) TBPk 60mg   | 5                | NDS, QL (4 tabs / 28 days), NM, PA   |
| XPOVIO PAK (60 MG TWICE WEEKLY) TBPk 20mg  | 5                | NDS, QL (24 tabs / 28 days), NM, PA  |
| XPOVIO PAK (80 MG ONCE WEEKLY) TBPk 40mg   | 5                | NDS, QL (8 tabs / 28 days), NM, PA   |
| XPOVIO PAK (80 MG ONCE WEEKLY) TBPk 80mg   | 5                | NDS, QL (4 tabs / 28 days), NM, PA   |
| XPOVIO PAK (80 MG TWICE WEEKLY) TBPk 20mg  | 5                | NDS, QL (32 tabs / 28 days), NM, PA  |
| XPOVIO PAK (100 MG ONCE WEEKLY) TBPk 50mg  | 5                | NDS, QL (8 tabs / 28 days), NM, PA   |
| ZEJULA TABS 100mg, 200mg, 300mg            | 5                | NDS, QL (30 tabs / 30 days), NM, PA  |
| ZELBORAF TABS 240mg                        | 5                | NDS, QL (240 tabs / 30 days), NM, PA |
| ZIRABEV SOLN 100mg/4ml, 400mg/16ml         | 5                | NDS, NM, PA                          |
| ZOLINZA CAPS 100mg                         | 5                | NDS, QL (120 caps / 30 days), NM, PA |

**You can find information on what the symbols and abbreviations in this table mean by going to Section C1.**

| <b>Drug Name</b>          | <b>Drug Tier</b> | <b>Requirements/Limits</b>          |
|---------------------------|------------------|-------------------------------------|
| ZYDELIG TABS 100mg, 150mg | 5                | NDS, QL (60 tabs / 30 days), NM, PA |
| ZYKADIA TABS 150mg        | 5                | NDS, QL (84 tabs / 28 days), NM, PA |

## **CARDIOVASCULAR**

### **ACE INHIBITOR COMBINATIONS**

|                                                                   |   |                        |
|-------------------------------------------------------------------|---|------------------------|
| <i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>           | 6 | QL (30 caps / 30 days) |
| <i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>             | 6 | QL (30 caps / 30 days) |
| <i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>             | 6 | QL (30 caps / 30 days) |
| <i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>             | 6 | QL (30 caps / 30 days) |
| <i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>            | 6 | QL (30 caps / 30 days) |
| <i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>            | 6 | QL (30 caps / 30 days) |
| <i>benazepril &amp; hydrochlorothiazide tab 5-6.25mg</i>          | 6 |                        |
| <i>benazepril &amp; hydrochlorothiazide tab 10-12.5 mg</i>        | 6 |                        |
| <i>benazepril &amp; hydrochlorothiazide tab 20-12.5 mg</i>        | 6 |                        |
| <i>benazepril &amp; hydrochlorothiazide tab 20-25 mg</i>          | 6 |                        |
| <i>captopril &amp; hydrochlorothiazide tab 25-15 mg</i>           | 6 |                        |
| <i>captopril &amp; hydrochlorothiazide tab 25-25 mg</i>           | 6 |                        |
| <i>captopril &amp; hydrochlorothiazide tab 50-15 mg</i>           | 6 |                        |
| <i>captopril &amp; hydrochlorothiazide tab 50-25 mg</i>           | 6 |                        |
| <i>enalapril maleate &amp; hydrochlorothiazide tab 5-12.5 mg</i>  | 6 |                        |
| <i>enalapril maleate &amp; hydrochlorothiazide tab 10-25 mg</i>   | 6 |                        |
| <i>fosinopril sodium &amp; hydrochlorothiazide tab 10-12.5 mg</i> | 6 |                        |
| <i>fosinopril sodium &amp; hydrochlorothiazide tab 20-12.5 mg</i> | 6 |                        |
| <i>lisinopril &amp; hydrochlorothiazide tab 10-12.5 mg</i>        | 6 |                        |
| <i>lisinopril &amp; hydrochlorothiazide tab 20-12.5 mg</i>        | 6 |                        |
| <i>lisinopril &amp; hydrochlorothiazide tab 20-25 mg</i>          | 6 |                        |

### **ACE INHIBITORS**

|                                                           |   |  |
|-----------------------------------------------------------|---|--|
| <i>benazepril hcl TABS 5mg, 10mg, 20mg, 40mg</i>          | 6 |  |
| <i>captopril TABS 12.5mg, 25mg, 50mg, 100mg</i>           | 6 |  |
| <i>enalapril maleate TABS 2.5mg, 5mg, 10mg, 20mg</i>      | 6 |  |
| <i>fosinopril sodium TABS 10mg, 20mg, 40mg</i>            | 6 |  |
| <i>lisinopril TABS 2.5mg, 5mg, 10mg, 20mg, 30mg, 40mg</i> | 6 |  |
| <i>moexipril hcl TABS 7.5mg, 15mg</i>                     | 6 |  |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                    | <b>Drug Tier</b> | <b>Requirements/Limits</b> |
|---------------------------------------------------------------------|------------------|----------------------------|
| <i>perindopril erbumine</i> TABS 2mg, 4mg, 8mg                      | 6                |                            |
| <i>quinapril hcl</i> TABS 5mg, 10mg, 20mg, 40mg                     | 6                |                            |
| <i>ramipril</i> CAPS 1.25mg, 2.5mg, 5mg, 10mg                       | 6                |                            |
| <i>trandolapril</i> TABS 1mg, 2mg, 4mg                              | 6                |                            |
| <b>ALDOSTERONE RECEPTOR ANTAGONISTS</b>                             |                  |                            |
| <i>eplerenone</i> TABS 25mg, 50mg                                   | 3                |                            |
| KERENDIA TABS 10mg, 20mg, 40mg                                      | 3                | QL (30 tabs / 30 days)     |
| <i>spironolactone</i> TABS 25mg, 50mg, 100mg                        | 1                |                            |
| <b>ALPHA BLOCKERS</b>                                               |                  |                            |
| <i>doxazosin mesylate</i> TABS 1mg, 2mg, 4mg, 8mg                   | 2                |                            |
| <i>prazosin hcl</i> CAPS 1mg, 2mg, 5mg                              | 3                |                            |
| <i>terazosin hcl</i> CAPS 1mg, 2mg, 5mg, 10mg                       | 1                |                            |
| <b>ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS</b>              |                  |                            |
| <i>amlodipine besylate-olmesartan medoxomil tab</i> 5-20 mg         | 6                | QL (30 tabs / 30 days)     |
| <i>amlodipine besylate-olmesartan medoxomil tab</i> 5-40 mg         | 6                | QL (30 tabs / 30 days)     |
| <i>amlodipine besylate-olmesartan medoxomil tab</i> 10-20 mg        | 6                | QL (30 tabs / 30 days)     |
| <i>amlodipine besylate-olmesartan medoxomil tab</i> 10-40 mg        | 6                | QL (30 tabs / 30 days)     |
| <i>amlodipine besylate-valsartan tab</i> 5-160 mg                   | 6                | QL (30 tabs / 30 days)     |
| <i>amlodipine besylate-valsartan tab</i> 5-320 mg                   | 6                | QL (30 tabs / 30 days)     |
| <i>amlodipine besylate-valsartan tab</i> 10-160 mg                  | 6                | QL (30 tabs / 30 days)     |
| <i>amlodipine besylate-valsartan tab</i> 10-320 mg                  | 6                | QL (30 tabs / 30 days)     |
| <i>candesartan cilexetil-hydrochlorothiazide tab</i> 16-12.5 mg     | 6                | QL (60 tabs / 30 days)     |
| <i>candesartan cilexetil-hydrochlorothiazide tab</i> 32-12.5 mg     | 6                | QL (30 tabs / 30 days)     |
| <i>candesartan cilexetil-hydrochlorothiazide tab</i> 32-25 mg       | 6                | QL (30 tabs / 30 days)     |
| EDARBYCLOR TAB 40-12.5                                              | 4                | QL (30 tabs / 30 days), ST |
| EDARBYCLOR TAB 40-25MG                                              | 4                | QL (30 tabs / 30 days), ST |
| ENTRESTO CAP 6-6MG                                                  | 3                | QL (240 caps / 30 days)    |
| ENTRESTO CAP 15-16MG                                                | 3                | QL (240 caps / 30 days)    |
| <i>irbesartan-hydrochlorothiazide tab</i> 150-12.5 mg               | 6                | QL (60 tabs / 30 days)     |
| <i>irbesartan-hydrochlorothiazide tab</i> 300-12.5 mg               | 6                | QL (30 tabs / 30 days)     |
| <i>losartan potassium &amp; hydrochlorothiazide tab</i> 50-12.5 mg  | 6                |                            |
| <i>losartan potassium &amp; hydrochlorothiazide tab</i> 100-12.5 mg | 6                |                            |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                   | <b>Drug Tier</b> | <b>Requirements/Limits</b> |
|--------------------------------------------------------------------|------------------|----------------------------|
| <i>losartan potassium &amp; hydrochlorothiazide tab 100-25 mg</i>  | 6                |                            |
| <i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>     | 6                | QL (30 tabs / 30 days)     |
| <i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>     | 6                | QL (30 tabs / 30 days)     |
| <i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>       | 6                | QL (30 tabs / 30 days)     |
| <i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>  | 6                | QL (30 tabs / 30 days)     |
| <i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>  | 6                | QL (30 tabs / 30 days)     |
| <i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>    | 6                | QL (30 tabs / 30 days)     |
| <i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i> | 6                | QL (30 tabs / 30 days)     |
| <i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>   | 6                | QL (30 tabs / 30 days)     |
| <i>sacubitril-valsartan tab 24-26 mg</i>                           | 3                | QL (60 tabs / 30 days)     |
| <i>sacubitril-valsartan tab 49-51 mg</i>                           | 3                | QL (60 tabs / 30 days)     |
| <i>sacubitril-valsartan tab 97-103 mg</i>                          | 3                | QL (60 tabs / 30 days)     |
| <i>telmisartan-amlodipine tab 40-5 mg</i>                          | 6                | QL (30 tabs / 30 days)     |
| <i>telmisartan-amlodipine tab 40-10 mg</i>                         | 6                | QL (30 tabs / 30 days)     |
| <i>telmisartan-amlodipine tab 80-5 mg</i>                          | 6                | QL (30 tabs / 30 days)     |
| <i>telmisartan-amlodipine tab 80-10 mg</i>                         | 6                | QL (30 tabs / 30 days)     |
| <i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>              | 6                | QL (30 tabs / 30 days)     |
| <i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>              | 6                | QL (60 tabs / 30 days)     |
| <i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>                | 6                | QL (30 tabs / 30 days)     |
| <i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>                | 6                | QL (30 tabs / 30 days)     |
| <i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>               | 6                | QL (30 tabs / 30 days)     |
| <i>valsartan-hydrochlorothiazide tab 160-25 mg</i>                 | 6                | QL (30 tabs / 30 days)     |
| <i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>               | 6                | QL (30 tabs / 30 days)     |
| <i>valsartan-hydrochlorothiazide tab 320-25 mg</i>                 | 6                | QL (30 tabs / 30 days)     |

### **ANGIOTENSIN II RECEPTOR ANTAGONISTS**

|                                                  |   |                               |
|--------------------------------------------------|---|-------------------------------|
| <i>candesartan cilexetil TABS 4mg, 8mg, 16mg</i> | 6 | QL (60 tabs / 30 days)        |
| <i>candesartan cilexetil TABS 32mg</i>           | 6 | QL (30 tabs / 30 days)        |
| <i>EDARBI TABS 40mg, 80mg</i>                    | 4 | QL (30 tabs / 30 days),<br>ST |
| <i>irbesartan TABS 75mg, 150mg, 300mg</i>        | 6 | QL (30 tabs / 30 days)        |
| <i>losartan potassium TABS 25mg, 50mg, 100mg</i> | 6 |                               |
| <i>olmesartan medoxomil TABS 5mg</i>             | 6 | QL (60 tabs / 30 days)        |
| <i>olmesartan medoxomil TABS 20mg, 40mg</i>      | 6 | QL (30 tabs / 30 days)        |
| <i>telmisartan TABS 20mg, 40mg, 80mg</i>         | 6 | QL (30 tabs / 30 days)        |
| <i>valsartan TABS 40mg, 80mg, 160mg</i>          | 6 | QL (60 tabs / 30 days)        |
| <i>valsartan TABS 320mg</i>                      | 6 | QL (30 tabs / 30 days)        |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| Drug Name                                                                    | Drug Tier | Requirements/Limits        |
|------------------------------------------------------------------------------|-----------|----------------------------|
| <b>ANTIARRHYTHMICS</b>                                                       |           |                            |
| <i>amiodarone hcl</i> SOLN 50mg/ml, 150mg/3ml, 900mg/18ml; TABS 100mg, 400mg | 4         |                            |
| <i>amiodarone hcl</i> TABS 200mg                                             | 1         |                            |
| <i>disopyramide phosphate</i> CAPS 100mg, 150mg                              | 4         |                            |
| <i>dofetilide</i> CAPS 125mcg, 250mcg, 500mcg                                | 4         |                            |
| <i>flecainide acetate</i> TABS 50mg, 100mg, 150mg                            | 3         |                            |
| MULTAQ TABS 400mg                                                            | 4         | QL (60 tabs / 30 days)     |
| <i>pacerone</i> TABS 100mg, 400mg                                            | 4         |                            |
| <i>pacerone</i> TABS 200mg                                                   | 1         |                            |
| <i>propafenone hcl</i> CP12 225mg, 325mg, 425mg                              | 4         |                            |
| <i>propafenone hcl</i> TABS 150mg, 225mg, 300mg                              | 3         |                            |
| <i>quinidine sulfate</i> TABS 200mg, 300mg                                   | 4         |                            |
| <i>sotalol hcl</i> TABS 80mg, 120mg, 160mg, 240mg                            | 2         |                            |
| <i>sotalol hcl (afib/afl)</i> TABS 80mg, 120mg, 160mg                        | 3         |                            |
| <b>ANTILIPEMICS, FIBRATES</b>                                                |           |                            |
| <i>choline fenofibrate</i> CPDR 45mg, 135mg                                  | 3         |                            |
| <i>fenofibrate</i> TABS 48mg, 54mg, 145mg, 160mg                             | 2         |                            |
| <i>fenofibrate micronized</i> CAPS 67mg, 134mg, 200mg                        | 3         |                            |
| <i>gemfibrozil</i> TABS 600mg                                                | 2         |                            |
| <b>ANTILIPEMICS, HMG-CoA REDUCTASE INHIBITORS</b>                            |           |                            |
| <i>atorvastatin calcium</i> TABS 10mg, 20mg, 40mg, 80mg                      | 6         | QL (30 tabs / 30 days)     |
| EZALLOR SPRINKLE CPSP 5mg, 10mg, 20mg, 40mg                                  | 4         | QL (30 caps / 30 days), ST |
| <i>fluvastatin sodium</i> CAPS 20mg, 40mg                                    | 6         | QL (60 caps / 30 days), ST |
| <i>fluvastatin sodium</i> TB24 80mg                                          | 6         | QL (30 tabs / 30 days), ST |
| <i>lovastatin</i> TABS 10mg, 20mg, 40mg                                      | 6         | QL (60 tabs / 30 days)     |
| <i>pitavastatin calcium</i> TABS 1mg, 2mg, 4mg                               | 6         | QL (30 tabs / 30 days), ST |
| <i>pravastatin sodium</i> TABS 10mg, 20mg, 40mg, 80mg                        | 6         | QL (30 tabs / 30 days)     |
| <i>rosuvastatin calcium</i> TABS 5mg, 10mg, 20mg, 40mg                       | 6         | QL (30 tabs / 30 days)     |
| <i>simvastatin</i> TABS 5mg, 10mg, 20mg, 40mg, 80mg                          | 6         | QL (30 tabs / 30 days)     |
| ZYPITAMAG TABS 2mg, 4mg                                                      | 4         | QL (30 tabs / 30 days), ST |
| <b>ANTILIPEMICS, MISCELLANEOUS</b>                                           |           |                            |
| <i>cholestyramine</i> PACK 4gm; POWD 4gm/dose                                | 3         |                            |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                             | <b>Drug Tier</b> | <b>Requirements/Limits</b>             |
|--------------------------------------------------------------|------------------|----------------------------------------|
| <i>cholestyramine light</i> PACK 4gm; POWD 4gm/dose          | 3                |                                        |
| <i>colesevelam hcl</i> PACK 3.75gm; TABS 625mg               | 4                |                                        |
| <i>colestipol hcl</i> GRAN 5gm; PACK 5gm                     | 4                |                                        |
| <i>colestipol hcl</i> TABS 1gm                               | 3                |                                        |
| <i>ezetimibe</i> TABS 10mg                                   | 2                | QL (30 tabs / 30 days)                 |
| <i>ezetimibe-simvastatin tab 10-10 mg</i>                    | 6                | QL (30 tabs / 30 days)                 |
| <i>ezetimibe-simvastatin tab 10-20 mg</i>                    | 6                | QL (30 tabs / 30 days)                 |
| <i>ezetimibe-simvastatin tab 10-40 mg</i>                    | 6                | QL (30 tabs / 30 days)                 |
| <i>ezetimibe-simvastatin tab 10-80 mg</i>                    | 6                | QL (30 tabs / 30 days)                 |
| NEXLETOL TABS 180mg                                          | 3                | QL (30 tabs / 30 days)                 |
| NEXLIZET TAB 180/10MG                                        | 3                | QL (30 tabs / 30 days)                 |
| <i>niacin (antihyperlipidemic)</i> TBCR 500mg, 750mg, 1000mg | 3                | QL (60 tabs / 30 days)                 |
| <i>omega-3-acid ethyl esters cap 1 gm</i>                    | 3                | PA                                     |
| <i>prevalite</i> PACK 4gm; POWD 4gm/dose                     | 3                |                                        |
| REPATHA SOSY 140mg/ml                                        | 3                | QL (6 syringes / 28 days), NM, PA      |
| REPATHA SURECLICK SOAJ 140mg/ml                              | 3                | QL (6 autoinjectors / 28 days), NM, PA |
| VASCEPA CAPS .5gm, 1gm                                       | 3                |                                        |
| <b>BETA-BLOCKER/DIURETIC COMBINATIONS</b>                    |                  |                                        |
| <i>atenolol &amp; chlorthalidone tab 50-25 mg</i>            | 2                |                                        |
| <i>atenolol &amp; chlorthalidone tab 100-25 mg</i>           | 2                |                                        |
| <i>bisoprolol &amp; hydrochlorothiazide tab 2.5-6.25 mg</i>  | 2                |                                        |
| <i>bisoprolol &amp; hydrochlorothiazide tab 5-6.25 mg</i>    | 2                |                                        |
| <i>bisoprolol &amp; hydrochlorothiazide tab 10-6.25 mg</i>   | 2                |                                        |
| <i>metoprolol &amp; hydrochlorothiazide tab 50-25 mg</i>     | 3                |                                        |
| <i>metoprolol &amp; hydrochlorothiazide tab 100-25 mg</i>    | 3                |                                        |
| <i>metoprolol &amp; hydrochlorothiazide tab 100-50 mg</i>    | 3                |                                        |
| <b>BETA-BLOCKERS</b>                                         |                  |                                        |
| <i>acebutolol hcl</i> CAPS 200mg, 400mg                      | 3                |                                        |
| <i>atenolol</i> TABS 25mg, 50mg, 100mg                       | 1                |                                        |
| <i>bisoprolol fumarate</i> TABS 5mg, 10mg                    | 2                |                                        |
| <i>carvedilol</i> TABS 3.125mg, 6.25mg, 12.5mg, 25mg         | 1                |                                        |
| <i>labetalol hcl</i> TABS 100mg, 200mg, 300mg                | 2                |                                        |
| <i>metoprolol succinate</i> TB24 25mg, 50mg, 100mg, 200mg    | 1                |                                        |
| <i>metoprolol tartrate</i> SOLN 5mg/5ml                      | 4                |                                        |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                                                         | <b>Drug Tier</b> | <b>Requirements/Limits</b> |
|----------------------------------------------------------------------------------------------------------|------------------|----------------------------|
| <i>metoprolol tartrate</i> TABS 25mg, 50mg, 100mg                                                        | 1                |                            |
| <i>nadolol</i> TABS 20mg, 40mg, 80mg                                                                     | 3                |                            |
| <i>nebivolol hcl</i> TABS 2.5mg, 5mg, 10mg                                                               | 3                | QL (30 tabs / 30 days)     |
| <i>nebivolol hcl</i> TABS 20mg                                                                           | 3                | QL (60 tabs / 30 days)     |
| <i>pindolol</i> TABS 5mg, 10mg                                                                           | 3                |                            |
| <i>propranolol hcl</i> CP24 60mg, 80mg, 120mg, 160mg; SOLN 20mg/5ml, 40mg/5ml                            | 3                |                            |
| <i>propranolol hcl</i> TABS 10mg, 20mg, 40mg, 60mg, 80mg                                                 | 2                |                            |
| <i>timolol maleate</i> TABS 5mg, 10mg, 20mg                                                              | 3                |                            |
| <b>CALCIUM CHANNEL BLOCKERS</b>                                                                          |                  |                            |
| <i>amlodipine besylate</i> TABS 2.5mg, 5mg, 10mg                                                         | 1                |                            |
| <i>cartia xt</i> CP24 120mg, 180mg, 240mg, 300mg                                                         | 2                |                            |
| <i>dilt-xr</i> CP24 120mg, 180mg, 240mg                                                                  | 2                |                            |
| <i>diltiazem hcl</i> CP12 60mg, 90mg, 120mg                                                              | 4                |                            |
| <i>diltiazem hcl</i> CP24 120mg, 180mg, 240mg; TABS 30mg, 60mg, 90mg, 120mg                              | 2                |                            |
| <i>diltiazem hcl</i> SOLN 25mg/5ml, 50mg/10ml, 125mg/25ml; TB24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg | 3                |                            |
| <i>diltiazem hcl coated beads</i> CP24 120mg, 180mg, 240mg, 300mg                                        | 2                |                            |
| <i>diltiazem hcl coated beads</i> CP24 360mg                                                             | 4                |                            |
| <i>diltiazem hcl extended release beads</i> CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg                | 2                |                            |
| <i>felodipine</i> TB24 2.5mg, 5mg, 10mg                                                                  | 2                |                            |
| <i>isradipine</i> CAPS 2.5mg, 5mg                                                                        | 4                |                            |
| <i>matzim la</i> TB24 180mg, 240mg, 300mg, 360mg, 420mg                                                  | 3                |                            |
| <i>nicardipine hcl</i> CAPS 20mg, 30mg                                                                   | 4                |                            |
| <i>nifedipine</i> TB24 30mg, 60mg, 90mg                                                                  | 3                |                            |
| <i>nimodipine</i> CAPS 30mg                                                                              | 4                |                            |
| <i>nisoldipine</i> TB24 8.5mg, 17mg, 34mg                                                                | 4                |                            |
| <i>tiadylt er</i> CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg                                          | 2                |                            |
| <i>verapamil hcl</i> CP24 100mg, 200mg, 300mg, 360mg; SOLN 2.5mg/ml                                      | 4                |                            |
| <i>verapamil hcl</i> CP24 120mg, 180mg, 240mg                                                            | 3                |                            |
| <i>verapamil hcl</i> TABS 40mg, 80mg, 120mg                                                              | 1                |                            |
| <i>verapamil hcl</i> TBCR 120mg, 180mg, 240mg                                                            | 2                |                            |
| <b>DIURETICS</b>                                                                                         |                  |                            |
| <i>acetazolamide</i> CP12 500mg; TABS 125mg, 250mg                                                       | 3                |                            |
| <i>amiloride &amp; hydrochlorothiazide tab</i> 5-50 mg                                                   | 2                |                            |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                | <b>Drug Tier</b> | <b>Requirements/Limits</b> |
|-----------------------------------------------------------------|------------------|----------------------------|
| <i>amiloride hcl</i> TABS 5mg                                   | 2                |                            |
| <i>bumetanide</i> SOLN .25mg/ml; TABS .5mg, 1mg, 2mg            | 3                |                            |
| <i>chlorthalidone</i> TABS 25mg, 50mg                           | 2                |                            |
| <i>furosemide</i> SOLN 10mg/ml, 40mg/5ml                        | 2                |                            |
| <i>furosemide</i> TABS 20mg, 40mg, 80mg                         | 1                |                            |
| <i>furosemide inj</i> SOLN 10mg/ml                              | 3                |                            |
| <i>hydrochlorothiazide</i> CAPS 12.5mg; TABS 12.5mg, 25mg, 50mg | 1                |                            |
| <i>indapamide</i> TABS 1.25mg, 2.5mg                            | 1                |                            |
| <i>methazolamide</i> TABS 25mg, 50mg                            | 4                |                            |
| <i>metolazone</i> TABS 2.5mg, 5mg, 10mg                         | 2                |                            |
| <i>spironolactone &amp; hydrochlorothiazide tab</i> 25-25 mg    | 2                |                            |
| <i>torsemide</i> TABS 5mg, 10mg, 20mg, 100mg                    | 2                |                            |
| <i>triamterene &amp; hydrochlorothiazide cap</i> 37.5-25 mg     | 1                |                            |
| <i>triamterene &amp; hydrochlorothiazide tab</i> 37.5-25 mg     | 1                |                            |
| <i>triamterene &amp; hydrochlorothiazide tab</i> 75-50 mg       | 1                |                            |
| <b>MISCELLANEOUS</b>                                            |                  |                            |
| <i>aliskiren fumarate</i> TABS 150mg, 300mg                     | 6                | QL (30 tabs / 30 days)     |
| <i>amlodipine besylate-atorvastatin calcium tab</i> 2.5-10 mg   | 6                |                            |
| <i>amlodipine besylate-atorvastatin calcium tab</i> 2.5-20 mg   | 6                |                            |
| <i>amlodipine besylate-atorvastatin calcium tab</i> 2.5-40 mg   | 6                |                            |
| <i>amlodipine besylate-atorvastatin calcium tab</i> 5-10 mg     | 6                |                            |
| <i>amlodipine besylate-atorvastatin calcium tab</i> 5-20 mg     | 6                |                            |
| <i>amlodipine besylate-atorvastatin calcium tab</i> 5-40 mg     | 6                |                            |
| <i>amlodipine besylate-atorvastatin calcium tab</i> 5-80 mg     | 6                |                            |
| <i>amlodipine besylate-atorvastatin calcium tab</i> 10-10 mg    | 6                |                            |
| <i>amlodipine besylate-atorvastatin calcium tab</i> 10-20 mg    | 6                |                            |
| <i>amlodipine besylate-atorvastatin calcium tab</i> 10-40 mg    | 6                |                            |
| <i>amlodipine besylate-atorvastatin calcium tab</i> 10-80 mg    | 6                |                            |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                             | <b>Drug Tier</b> | <b>Requirements/Limits</b>           |
|--------------------------------------------------------------|------------------|--------------------------------------|
| <i>clonidine</i> PTWK .1mg/24hr, .2mg/24hr, .3mg/24hr        | 3                |                                      |
| <i>clonidine hcl</i> TABS .1mg, .2mg, .3mg                   | 1                |                                      |
| CORLANOR SOLN 5mg/5ml                                        | 4                | QL (450 mL / 30 days)                |
| <i>digoxin</i> SOLN .05mg/ml, .25mg/ml                       | 4                |                                      |
| <i>digoxin</i> TABS 125mcg, 250mcg                           | 2                | QL (30 tabs / 30 days)               |
| <i>droxidopa</i> CAPS 100mg                                  | 4                | QL (90 caps / 30 days), NM, PA       |
| <i>droxidopa</i> CAPS 200mg, 300mg                           | 5                | NDS, QL (180 caps / 30 days), NM, PA |
| <i>epinephrine (anaphylaxis)</i> SOLN 1mg/ml                 | 4                |                                      |
| <i>guanfacine hcl</i> TABS 1mg, 2mg                          | 3                | PA; PA applies if 65 years and older |
| <i>hydralazine hcl</i> SOLN 20mg/ml                          | 4                |                                      |
| <i>hydralazine hcl</i> TABS 10mg, 25mg, 50mg, 100mg          | 1                |                                      |
| <i>ivabradine hcl</i> TABS 5mg, 7.5mg                        | 4                | QL (60 tabs / 30 days)               |
| <i>metirosine</i> CAPS 250mg                                 | 5                | NDS, NM, PA                          |
| <i>midodrine hcl</i> TABS 2.5mg, 5mg                         | 3                |                                      |
| <i>midodrine hcl</i> TABS 10mg                               | 4                |                                      |
| <i>minoxidil</i> TABS 2.5mg, 10mg                            | 2                |                                      |
| <i>ranolazine</i> TB12 500mg, 1000mg                         | 4                |                                      |
| VERQUVO TABS 2.5mg, 5mg, 10mg                                | 3                | QL (30 tabs / 30 days), PA           |
| <b>NITRATES</b>                                              |                  |                                      |
| <i>isosorbide dinitrate</i> TABS 5mg, 10mg, 20mg, 30mg       | 3                |                                      |
| <i>isosorbide mononitrate</i> TB24 30mg, 60mg, 120mg         | 1                |                                      |
| NITRO-BID OINT 2%                                            | 3                |                                      |
| <i>nitroglycerin</i> PT24 .1mg/hr, .2mg/hr, .4mg/hr, .6mg/hr | 3                |                                      |
| <i>nitroglycerin</i> SUBL .3mg, .4mg, .6mg                   | 2                |                                      |
| <b>PULMONARY ARTERIAL HYPERTENSION</b>                       |                  |                                      |
| ADEMPAS TABS .5mg, 1mg, 1.5mg, 2mg, 2.5mg                    | 5                | NDS, QL (90 tabs / 30 days), NM, PA  |
| <i>alyq</i> TABS 20mg                                        | 5                | NDS, QL (60 tabs / 30 days), NM, PA  |
| <i>ambrisentan</i> TABS 5mg, 10mg                            | 5                | NDS, QL (30 tabs / 30 days), NM, PA  |
| <i>bosentan</i> TABS 62.5mg, 125mg                           | 5                | NDS, QL (60 tabs / 30 days), NM, PA  |
| <i>bosentan</i> TBSO 32mg                                    | 5                | NDS, QL (120 tabs / 30 days), NM, PA |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                        | <b>Drug Tier</b> | <b>Requirements/Limits</b>           |
|-------------------------------------------------------------------------|------------------|--------------------------------------|
| OPSUMIT TABS 10mg                                                       | 5                | NDS, QL (30 tabs / 30 days), NM, PA  |
| <i>sildenafil citrate (pulmonary hypertension)</i> TABS 20mg            | 3                | QL (360 tabs / 30 days), NM, PA      |
| <i>tadalafil (pulmonary hypertension)</i> TABS 20mg                     | 4                | QL (60 tabs / 30 days), NM, PA       |
| <i>treprostinil</i> SOLN 20mg/20ml, 50mg/20ml, 100mg/20ml, 200mg/20ml   | 5                | NDS, NM, PA                          |
| UPTRAVI TABS 200mcg                                                     | 5                | NDS, QL (140 tabs / 28 days), NM, PA |
| UPTRAVI TABS 400mcg, 600mcg, 800mcg, 1000mcg, 1200mcg, 1400mcg, 1600mcg | 5                | NDS, QL (60 tabs / 30 days), NM, PA  |
| UPTRAVI PACK TAB 200/800                                                | 5                | NDS, QL (1 pack / 28 days), NM, PA   |
| WINREVAIR KIT 45mg, 60mg                                                | 5                | NDS, QL (2 vials / 21 days), NM, PA  |
| WINREVAIR INJ 45MG                                                      | 5                | NDS, QL (2 vials / 21 days), NM, PA  |
| WINREVAIR INJ 60MG                                                      | 5                | NDS, QL (2 vials / 21 days), NM, PA  |
| YUTREPIA CAPS 26.5mcg, 53mcg, 79.5mcg                                   | 5                | NDS, QL (140 caps / 28 days), NM, PA |
| YUTREPIA CAPS 106mcg                                                    | 5                | NDS, QL (224 caps / 28 days), NM, PA |

## **CENTRAL NERVOUS SYSTEM**

### **ANTI-ANXIETY**

|                                                   |   |                         |
|---------------------------------------------------|---|-------------------------|
| <i>alprazolam</i> TABS .25mg, .5mg, 1mg, 2mg      | 2 | QL (150 tabs / 30 days) |
| <i>buspirone hcl</i> TABS 5mg, 10mg, 15mg         | 1 |                         |
| <i>buspirone hcl</i> TABS 7.5mg, 30mg             | 3 |                         |
| <i>fluvoxamine maleate</i> TABS 25mg, 50mg, 100mg | 3 |                         |
| <i>lorazepam</i> CONC 2mg/ml                      | 3 | QL (150 mL / 30 days)   |
| <i>lorazepam</i> SOLN 4mg/ml, 20mg/10ml           | 2 |                         |
| <i>lorazepam</i> TABS .5mg, 1mg, 2mg              | 2 | QL (150 tabs / 30 days) |
| <i>lorazepam intensol</i> CONC 2mg/ml             | 3 | QL (150 mL / 30 days)   |

### **ANTI-DEMENTIA**

|                                                      |   |                        |
|------------------------------------------------------|---|------------------------|
| <i>donepezil hydrochloride</i> TABS 5mg; TBDP 5mg    | 2 | QL (30 tabs / 30 days) |
| <i>donepezil hydrochloride</i> TABS 10mg; TBDP 10mg  | 2 |                        |
| <i>galantamine hydrobromide</i> CP24 8mg, 16mg, 24mg | 3 | QL (30 caps / 30 days) |
| <i>galantamine hydrobromide</i> SOLN 4mg/ml          | 4 | QL (200 mL / 30 days)  |
| <i>galantamine hydrobromide</i> TABS 4mg, 8mg, 12mg  | 3 | QL (60 tabs / 30 days) |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                           | <b>Drug Tier</b> | <b>Requirements/Limits</b>             |
|----------------------------------------------------------------------------|------------------|----------------------------------------|
| <i>memantine hcl</i> CP24 7mg, 14mg, 21mg, 28mg; SOLN 2mg/ml               | 4                | PA; PA applies if 29 years and younger |
| <i>memantine hcl</i> TABS 5mg, 10mg                                        | 3                | PA; PA applies if 29 years and younger |
| <i>memantine hcl-donepezil hcl cap er</i> 24hr 14-10 mg                    | 4                |                                        |
| <i>memantine hcl-donepezil hcl cap er</i> 24hr 21-10 mg                    | 4                |                                        |
| <i>memantine hcl-donepezil hcl cap er</i> 24hr 28-10 mg                    | 4                |                                        |
| NAMZARIC CAP 7-10MG                                                        | 4                |                                        |
| <i>rivastigmine</i> PT24 4.6mg/24hr, 9.5mg/24hr, 13.3mg/24hr               | 4                | QL (30 patches / 30 days)              |
| <i>rivastigmine tartrate</i> CAPS 1.5mg, 3mg, 4.5mg, 6mg                   | 3                | QL (60 caps / 30 days)                 |
| <b>ANTIDEPRESSANTS</b>                                                     |                  |                                        |
| <i>amitriptyline hcl</i> TABS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg         | 3                | PA; PA applies if 65 years and older   |
| <i>amoxapine</i> TABS 25mg, 50mg, 100mg, 150mg                             | 3                | PA; PA applies if 65 years and older   |
| AUVELITY TAB 45-105MG                                                      | 4                | QL (60 tabs / 30 days), PA             |
| <i>bupropion hcl</i> TABS 75mg, 100mg                                      | 2                |                                        |
| <i>bupropion hcl</i> TB12 100mg, 150mg, 200mg; TB24 150mg                  | 2                | QL (60 tabs / 30 days)                 |
| <i>bupropion hcl</i> TB24 300mg                                            | 2                | QL (30 tabs / 30 days)                 |
| <i>citalopram hydrobromide</i> SOLN 10mg/5ml                               | 3                |                                        |
| <i>citalopram hydrobromide</i> TABS 10mg, 20mg, 40mg                       | 1                |                                        |
| <i>clomipramine hcl</i> CAPS 25mg, 50mg, 75mg                              | 4                | PA                                     |
| <i>desipramine hcl</i> TABS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg           | 4                | PA; PA applies if 65 years and older   |
| <i>desvenlafaxine succinate</i> TB24 25mg, 50mg, 100mg                     | 3                | QL (30 tabs / 30 days)                 |
| <i>doxepin hcl</i> CAPS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg; CONC 10mg/ml | 3                | PA; PA applies if 65 years and older   |
| DRIZALMA SPRINKLE CSDR 20mg, 30mg, 40mg, 60mg                              | 4                | QL (60 caps / 30 days), PA             |
| <i>duloxetine hcl</i> CPEP 20mg, 30mg, 60mg                                | 3                | QL (60 caps / 30 days)                 |
| EMSAM PT24 6mg/24hr, 9mg/24hr, 12mg/24hr                                   | 5                | NDS, QL (30 patches / 30 days), PA     |
| <i>escitalopram oxalate</i> SOLN 5mg/5ml                                   | 4                |                                        |
| <i>escitalopram oxalate</i> TABS 5mg, 10mg, 20mg                           | 1                |                                        |
| EXXUA TB24 18.2mg, 36.3mg, 54.5mg, 72.6mg                                  | 5                | NDS, QL (30 tabs / 30 days), PA        |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                            | <b>Drug Tier</b> | <b>Requirements/Limits</b>                                   |
|-------------------------------------------------------------|------------------|--------------------------------------------------------------|
| EXXUA TITRATION PACK TB24 18.2mg                            | 5                | NDS, QL (2 packs / year), PA                                 |
| FETZIMA CP24 20mg, 40mg                                     | 4                | QL (60 caps / 30 days), PA                                   |
| FETZIMA CP24 80mg, 120mg                                    | 4                | QL (30 caps / 30 days), PA                                   |
| FETZIMA CAP TITRATIO                                        | 4                | QL (2 packs / year), PA                                      |
| <i>fluoxetine hcl</i> CAPS 10mg, 20mg, 40mg                 | 1                |                                                              |
| <i>fluoxetine hcl</i> SOLN 20mg/5ml                         | 3                |                                                              |
| <i>imipramine hcl</i> TABS 10mg, 25mg, 50mg                 | 2                | PA; PA applies if 65 years and older                         |
| MARPLAN TABS 10mg                                           | 4                | QL (180 tabs / 30 days)                                      |
| <i>mirtazapine</i> TABS 7.5mg; TBDP 15mg, 30mg, 45mg        | 3                |                                                              |
| <i>mirtazapine</i> TABS 15mg, 30mg, 45mg                    | 2                |                                                              |
| <i>nefazodone hcl</i> TABS 50mg, 100mg, 150mg, 200mg, 250mg | 4                |                                                              |
| <i>nortriptyline hcl</i> CAPS 10mg, 25mg, 50mg, 75mg        | 2                |                                                              |
| <i>nortriptyline hcl</i> SOLN 10mg/5ml                      | 4                |                                                              |
| <i>paroxetine hcl</i> SUSP 10mg/5ml                         | 4                | QL (900 mL / 30 days), PA; PA applies if 65 years and older  |
| <i>paroxetine hcl</i> TABS 10mg, 20mg, 30mg, 40mg           | 2                | PA; PA applies if 65 years and older                         |
| <i>paroxetine hcl</i> TB24 12.5mg, 25mg, 37.5mg             | 4                | QL (60 tabs / 30 days), PA; PA applies if 65 years and older |
| <i>phenelzine sulfate</i> TABS 15mg                         | 3                |                                                              |
| <i>protriptyline hcl</i> TABS 5mg, 10mg                     | 4                |                                                              |
| RALDESY SOLN 10mg/ml                                        | 4                | QL (1800 mL / 30 days), PA                                   |
| <i>sertraline hcl</i> CONC 20mg/ml                          | 3                |                                                              |
| <i>sertraline hcl</i> TABS 25mg, 50mg, 100mg                | 1                |                                                              |
| <i>tranylcypromine sulfate</i> TABS 10mg                    | 4                |                                                              |
| <i>trazodone hcl</i> TABS 50mg, 100mg, 150mg                | 1                |                                                              |
| <i>trimipramine maleate</i> CAPS 25mg, 50mg                 | 4                | QL (120 caps / 30 days)                                      |
| <i>trimipramine maleate</i> CAPS 100mg                      | 4                | QL (60 caps / 30 days)                                       |
| TRINTELLIX TABS 5mg, 10mg, 20mg                             | 4                | QL (30 tabs / 30 days), PA                                   |
| <i>venlafaxine hcl</i> CP24 37.5mg, 75mg, 150mg             | 2                |                                                              |
| <i>venlafaxine hcl</i> TABS 25mg, 37.5mg, 50mg, 75mg, 100mg | 3                |                                                              |
| <i>vilazodone hcl</i> TABS 10mg, 20mg, 40mg                 | 4                | QL (30 tabs / 30 days)                                       |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                                         | <b>Drug Tier</b> | <b>Requirements/Limits</b>           |
|------------------------------------------------------------------------------------------|------------------|--------------------------------------|
| ZURZUVAE CAPS 20mg, 25mg                                                                 | 5                | NDS, QL (28 caps / 14 days), PA      |
| ZURZUVAE CAPS 30mg                                                                       | 5                | NDS, QL (14 caps / 14 days), PA      |
| <b>ANTIPARKINSONIAN AGENTS</b>                                                           |                  |                                      |
| <i>amantadine hcl</i> CAPS 100mg                                                         | 3                | QL (120 caps / 30 days)              |
| <i>amantadine hcl</i> SOLN 50mg/5ml                                                      | 3                |                                      |
| <i>amantadine hcl</i> TABS 100mg                                                         | 4                |                                      |
| <i>benztropine mesylate</i> SOLN 1mg/ml                                                  | 4                |                                      |
| <i>benztropine mesylate</i> TABS .5mg, 1mg, 2mg                                          | 2                | PA; PA applies if 65 years and older |
| <i>bromocriptine mesylate</i> CAPS 5mg; TABS 2.5mg                                       | 4                |                                      |
| <i>carb/levo orally disintegrating tab</i> 10-100mg                                      | 3                |                                      |
| <i>carb/levo orally disintegrating tab</i> 25-100mg                                      | 3                |                                      |
| <i>carb/levo orally disintegrating tab</i> 25-250mg                                      | 3                |                                      |
| <i>carbidopa</i> TABS 25mg                                                               | 4                |                                      |
| <i>carbidopa &amp; levodopa tab</i> 10-100 mg                                            | 2                |                                      |
| <i>carbidopa &amp; levodopa tab</i> 25-100 mg                                            | 2                |                                      |
| <i>carbidopa &amp; levodopa tab</i> 25-250 mg                                            | 2                |                                      |
| <i>carbidopa &amp; levodopa tab er</i> 25-100 mg                                         | 3                |                                      |
| <i>carbidopa &amp; levodopa tab er</i> 50-200 mg                                         | 3                |                                      |
| <i>carbidopa-levodopa-entacapone tabs</i> 12.5-50-200 mg                                 | 4                |                                      |
| <i>carbidopa-levodopa-entacapone tabs</i> 18.75-75-200 mg                                | 4                |                                      |
| <i>carbidopa-levodopa-entacapone tabs</i> 25-100-200 mg                                  | 4                |                                      |
| <i>carbidopa-levodopa-entacapone tabs</i> 31.25-125-200 mg                               | 4                |                                      |
| <i>carbidopa-levodopa-entacapone tabs</i> 37.5-150-200 mg                                | 4                |                                      |
| <i>carbidopa-levodopa-entacapone tabs</i> 50-200-200 mg                                  | 4                |                                      |
| <i>entacapone</i> TABS 200mg                                                             | 4                |                                      |
| INBRIJA CAPS 42mg                                                                        | 5                | NDS, QL (300 caps / 30 days), NM, PA |
| <i>pramipexole dihydrochloride</i> TABS .125mg, .25mg, .5mg, .75mg, 1mg, 1.5mg           | 2                |                                      |
| <i>pramipexole dihydrochloride</i> TB24 .375mg, .75mg, 1.5mg, 2.25mg, 3mg, 3.75mg, 4.5mg | 4                |                                      |
| <i>rasagiline mesylate</i> TABS .5mg, 1mg                                                | 4                | QL (30 tabs / 30 days)               |
| <i>ropinirole hydrochloride</i> TABS .25mg, .5mg, 1mg, 2mg, 3mg, 4mg, 5mg                | 2                |                                      |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                                                              | <b>Drug Tier</b> | <b>Requirements/Limits</b>      |
|---------------------------------------------------------------------------------------------------------------|------------------|---------------------------------|
| <i>ropinirole hydrochloride</i> TB24 2mg, 4mg, 6mg, 8mg, 12mg                                                 | 4                |                                 |
| <i>selegiline hcl</i> CAPS 5mg; TABS 5mg                                                                      | 3                |                                 |
| <i>trihexyphenidyl hcl</i> SOLN .4mg/ml                                                                       | 3                |                                 |
| <i>trihexyphenidyl hcl</i> TABS 2mg, 5mg                                                                      | 2                |                                 |
| <b>ANTIPSYCHOTICS</b>                                                                                         |                  |                                 |
| ABILIFY ASIMTUFII PRSY 720mg/2.4ml, 960mg/3.2ml                                                               | 5                | NDS, QL (1 syringe / 56 days)   |
| ABILIFY MAINTENA PRSY 300mg, 400mg                                                                            | 5                | NDS, QL (1 syringe / 28 days)   |
| ABILIFY MAINTENA SRER 300mg, 400mg                                                                            | 5                | NDS, QL (1 injection / 28 days) |
| <i>aripiprazole</i> SOLN 1mg/ml                                                                               | 4                | QL (900 mL / 30 days)           |
| <i>aripiprazole</i> TABS 2mg, 5mg, 10mg, 15mg, 20mg, 30mg                                                     | 4                | QL (30 tabs / 30 days)          |
| <i>aripiprazole</i> TBDP 10mg, 15mg                                                                           | 4                | QL (60 tabs / 30 days), ST      |
| ARISTADA PRSY 441mg/1.6ml, 662mg/2.4ml, 882mg/3.2ml                                                           | 5                | NDS, QL (1 syringe / 28 days)   |
| ARISTADA PRSY 1064mg/3.9ml                                                                                    | 5                | NDS, QL (1 syringe / 56 days)   |
| ARISTADA INITIO PRSY 675mg/2.4ml                                                                              | 5                | NDS                             |
| <i>asenapine maleate</i> SUBL 2.5mg, 5mg, 10mg                                                                | 4                | QL (60 tabs / 30 days)          |
| CAPLYTA CAPS 10.5mg, 21mg, 42mg                                                                               | 5                | NDS, QL (30 caps / 30 days)     |
| <i>chlorpromazine hcl</i> CONC 30mg/ml, 100mg/ml; SOLN 25mg/ml, 50mg/2ml; TABS 10mg, 25mg, 50mg, 100mg, 200mg | 4                |                                 |
| <i>clozapine</i> TABS 25mg, 50mg                                                                              | 3                |                                 |
| <i>clozapine</i> TABS 100mg                                                                                   | 3                | QL (270 tabs / 30 days)         |
| <i>clozapine</i> TABS 200mg                                                                                   | 3                | QL (120 tabs / 30 days)         |
| <i>clozapine</i> TBDP 12.5mg, 25mg                                                                            | 4                | PA                              |
| <i>clozapine</i> TBDP 100mg                                                                                   | 4                | QL (270 tabs / 30 days), PA     |
| <i>clozapine</i> TBDP 150mg                                                                                   | 4                | QL (180 tabs / 30 days), PA     |
| <i>clozapine</i> TBDP 200mg                                                                                   | 4                | QL (120 tabs / 30 days), PA     |
| COBENFY CAP 50-20MG                                                                                           | 5                | NDS, QL (60 caps / 30 days)     |
| COBENFY CAP 100-20MG                                                                                          | 5                | NDS, QL (60 caps / 30 days)     |
| COBENFY CAP 125-30MG                                                                                          | 5                | NDS, QL (60 caps / 30 days)     |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                                               | <b>Drug Tier</b> | <b>Requirements/Limits</b>          |
|------------------------------------------------------------------------------------------------|------------------|-------------------------------------|
| COBENFY STRT CAP PACK                                                                          | 5                | NDS, QL (2 packs / year)            |
| ERZOFRI SUSY 39mg/0.25ml                                                                       | 4                | QL (1 syringe / 28 days)            |
| ERZOFRI SUSY 78mg/0.5ml, 117mg/0.75ml, 156mg/ml, 234mg/1.5ml                                   | 5                | NDS, QL (1 syringe / 28 days)       |
| ERZOFRI SUSY 351mg/2.25ml                                                                      | 5                | NDS, QL (2 syringes / year)         |
| FANAPT TABS 1mg, 2mg, 4mg, 6mg, 8mg, 10mg, 12mg                                                | 5                | NDS, QL (60 tabs / 30 days), PA     |
| FANAPT PAK PACK A                                                                              | 4                | QL (2 packs / year), PA             |
| FANAPT PAK PACK B                                                                              | 4                | QL (2 packs / year), PA             |
| FANAPT PAK PACK C                                                                              | 4                | QL (2 packs / year), PA             |
| <i>fluphenazine decanoate</i> SOLN 25mg/ml                                                     | 4                |                                     |
| <i>fluphenazine hcl</i> CONC 5mg/ml; ELIX 2.5mg/5ml; SOLN 2.5mg/ml; TABS 1mg, 2.5mg, 5mg, 10mg | 4                |                                     |
| <i>haloperidol</i> TABS .5mg, 1mg, 2mg, 5mg, 10mg, 20mg                                        | 3                |                                     |
| <i>haloperidol decanoate</i> SOLN 50mg/ml, 100mg/ml                                            | 3                |                                     |
| <i>haloperidol lactate</i> CONC 2mg/ml; SOLN 5mg/ml                                            | 3                |                                     |
| INVEGA HAFYERA SUSY 1092mg/3.5ml, 1560mg/5ml                                                   | 5                | NDS, QL (1 injection / 180 days)    |
| INVEGA SUSTENNA SUSY 39mg/0.25ml                                                               | 4                | QL (1 syringe / 28 days)            |
| INVEGA SUSTENNA SUSY 78mg/0.5ml, 117mg/0.75ml, 156mg/ml, 234mg/1.5ml                           | 5                | NDS, QL (1 syringe / 28 days)       |
| INVEGA TRINZA SUSY 273mg/0.88ml, 410mg/1.32ml, 546mg/1.75ml, 819mg/2.63ml                      | 5                | NDS, QL (1 syringe / 90 days)       |
| <i>loxapine succinate</i> CAPS 5mg, 10mg, 25mg, 50mg                                           | 3                |                                     |
| <i>lurasidone hcl</i> TABS 20mg, 40mg, 60mg, 120mg                                             | 4                | QL (30 tabs / 30 days)              |
| <i>lurasidone hcl</i> TABS 80mg                                                                | 4                | QL (60 tabs / 30 days)              |
| LYBALVI TAB 5-10MG                                                                             | 5                | NDS, QL (30 tabs / 30 days)         |
| LYBALVI TAB 10-10MG                                                                            | 5                | NDS, QL (30 tabs / 30 days)         |
| LYBALVI TAB 15-10MG                                                                            | 5                | NDS, QL (30 tabs / 30 days)         |
| LYBALVI TAB 20-10MG                                                                            | 5                | NDS, QL (30 tabs / 30 days)         |
| <i>molindone hcl</i> TABS 5mg, 10mg, 25mg                                                      | 4                |                                     |
| NUPLAZID CAPS 34mg                                                                             | 5                | NDS, QL (30 caps / 30 days), NM, PA |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                          | <b>Drug Tier</b> | <b>Requirements/Limits</b>          |
|-----------------------------------------------------------|------------------|-------------------------------------|
| NUPLAZID TABS 10mg                                        | 5                | NDS, QL (30 tabs / 30 days), NM, PA |
| <i>olanzapine</i> SOLR 10mg                               | 4                | QL (3 vials / 1 day)                |
| <i>olanzapine</i> TABS 2.5mg, 5mg, 10mg                   | 2                | QL (60 tabs / 30 days)              |
| <i>olanzapine</i> TABS 7.5mg, 15mg, 20mg                  | 2                | QL (30 tabs / 30 days)              |
| <i>olanzapine</i> TBDP 5mg, 15mg, 20mg                    | 4                | QL (30 tabs / 30 days), ST          |
| <i>olanzapine</i> TBDP 10mg                               | 4                | QL (60 tabs / 30 days), ST          |
| OPIPZA FILM 2mg, 5mg                                      | 5                | NDS, QL (30 films / 30 days), PA    |
| OPIPZA FILM 10mg                                          | 5                | NDS, QL (90 films / 30 days), PA    |
| <i>paliperidone</i> TB24 1.5mg, 3mg, 9mg                  | 4                | QL (30 tabs / 30 days)              |
| <i>paliperidone</i> TB24 6mg                              | 4                | QL (60 tabs / 30 days)              |
| <i>perphenazine</i> TABS 2mg, 4mg, 8mg, 16mg              | 3                |                                     |
| <i>pimozide</i> TABS 1mg, 2mg                             | 4                |                                     |
| <i>quetiapine fumarate</i> TABS 25mg                      | 2                | QL (180 tabs / 30 days)             |
| <i>quetiapine fumarate</i> TABS 50mg, 100mg, 150mg, 200mg | 2                | QL (90 tabs / 30 days)              |
| <i>quetiapine fumarate</i> TABS 300mg, 400mg              | 2                | QL (60 tabs / 30 days)              |
| <i>quetiapine fumarate</i> TB24 50mg, 300mg, 400mg        | 4                | QL (60 tabs / 30 days), PA          |
| <i>quetiapine fumarate</i> TB24 150mg, 200mg              | 4                | QL (30 tabs / 30 days), PA          |
| REXULTI TABS 3mg, 4mg                                     | 5                | NDS, QL (30 tabs / 30 days)         |
| REXULTI TABS .25mg, .5mg, 1mg, 2mg                        | 5                | NDS, QL (60 tabs / 30 days)         |
| <i>risperidone</i> SOLN 1mg/ml                            | 3                | QL (240 mL / 30 days)               |
| <i>risperidone</i> TABS .25mg, .5mg, 1mg, 2mg, 3mg, 4mg   | 2                |                                     |
| <i>risperidone</i> TBDP 1mg, 2mg, 3mg                     | 4                | QL (60 tabs / 30 days), ST          |
| <i>risperidone</i> TBDP 4mg                               | 4                | QL (120 tabs / 30 days), ST         |
| <i>risperidone</i> TBDP .25mg, .5mg                       | 4                | QL (90 tabs / 30 days), ST          |
| <i>risperidone microspheres</i> SRER 12.5mg, 25mg         | 4                | QL (2 injections / 28 days)         |
| <i>risperidone microspheres</i> SRER 37.5mg, 50mg         | 5                | NDS, QL (2 injections / 28 days)    |
| SECUADO PT24 3.8mg/24hr, 5.7mg/24hr, 7.6mg/24hr           | 5                | NDS, QL (30 patches / 30 days)      |
| <i>thioridazine hcl</i> TABS 10mg, 25mg, 50mg, 100mg      | 3                |                                     |

**You can find information on what the symbols and abbreviations in this table mean by going to Section C1.**

| <b>Drug Name</b>                                                                                    | <b>Drug Tier</b> | <b>Requirements/Limits</b>                                    |
|-----------------------------------------------------------------------------------------------------|------------------|---------------------------------------------------------------|
| <i>thiothixene</i> CAPS 1mg, 2mg, 5mg, 10mg                                                         | 4                |                                                               |
| <i>trifluoperazine hcl</i> TABS 1mg, 2mg, 5mg, 10mg                                                 | 3                |                                                               |
| VERSACLOZ SUSP 50mg/ml                                                                              | 5                | NDS, QL (600 mL / 30 days), PA                                |
| VRAYLAR CAPS 1.5mg                                                                                  | 5                | NDS, QL (60 caps / 30 days)                                   |
| VRAYLAR CAPS .5mg, .75mg, 3mg, 4.5mg, 6mg                                                           | 5                | NDS, QL (30 caps / 30 days)                                   |
| <i>ziprasidone hcl</i> CAPS 20mg, 40mg, 60mg, 80mg                                                  | 4                | QL (60 caps / 30 days)                                        |
| <i>ziprasidone mesylate</i> SOLR 20mg                                                               | 4                | QL (6 injections / 3 days)                                    |
| ZYPREXA RELPREVV SUSR 210mg                                                                         | 4                | QL (2 vials / 28 days), NM, PA                                |
| ZYPREXA RELPREVV SUSR 300mg                                                                         | 5                | NDS, QL (2 vials / 28 days), NM, PA                           |
| ZYPREXA RELPREVV SUSR 405mg                                                                         | 5                | NDS, QL (1 vial / 28 days), NM, PA                            |
| <b>ANTISEIZURE AGENTS</b>                                                                           |                  |                                                               |
| APTiom TABS 200mg, 400mg                                                                            | 5                | NDS, QL (30 tabs / 30 days)                                   |
| APTiom TABS 600mg, 800mg                                                                            | 5                | NDS, QL (60 tabs / 30 days)                                   |
| BRIVIACT SOLN 10mg/ml                                                                               | 5                | NDS, QL (600 mL / 30 days), PA                                |
| BRIVIACT TABS 10mg, 25mg, 50mg, 75mg, 100mg                                                         | 5                | NDS, QL (60 tabs / 30 days), PA                               |
| <i>carbamazepine</i> CHEW 100mg; TABS 200mg                                                         | 3                |                                                               |
| <i>carbamazepine</i> CHEW 200mg; CP12 100mg, 200mg, 300mg; SUSP 100mg/5ml; TB12 100mg, 200mg, 400mg | 4                |                                                               |
| <i>clobazam</i> SUSP 2.5mg/ml                                                                       | 4                | QL (480 mL / 30 days), PA                                     |
| <i>clobazam</i> TABS 10mg, 20mg                                                                     | 4                | QL (60 tabs / 30 days), PA                                    |
| <i>clonazepam</i> TABS 2mg                                                                          | 2                | QL (300 tabs / 30 days)                                       |
| <i>clonazepam</i> TABS .5mg, 1mg                                                                    | 2                | QL (90 tabs / 30 days)                                        |
| <i>clonazepam</i> TBDP 2mg                                                                          | 3                | QL (300 tabs / 30 days)                                       |
| <i>clonazepam</i> TBDP .125mg, .25mg, .5mg, 1mg                                                     | 3                | QL (90 tabs / 30 days)                                        |
| <i>clorazepate dipotassium</i> TABS 3.75mg, 7.5mg, 15mg                                             | 4                | QL (180 tabs / 30 days), PA; PA applies if 65 years and older |
| DIACOMIT CAPS 250mg                                                                                 | 5                | NDS, QL (360 caps / 30 days), NM, PA                          |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                       | <b>Drug Tier</b> | <b>Requirements/Limits</b>                                                                   |
|--------------------------------------------------------|------------------|----------------------------------------------------------------------------------------------|
| DIACOMIT CAPS 500mg                                    | 5                | NDS, QL (180 caps / 30 days), NM, PA                                                         |
| DIACOMIT PACK 250mg                                    | 5                | NDS, QL (360 packets / 30 days), NM, PA                                                      |
| DIACOMIT PACK 500mg                                    | 5                | NDS, QL (180 packets / 30 days), NM, PA                                                      |
| <i>diazepam</i> SOLN 5mg/5ml                           | 3                | QL (1200 mL / 30 days), PA; PA applies if 65 years and older when greater than 5 day supply  |
| <i>diazepam</i> TABS 2mg, 5mg, 10mg                    | 2                | QL (120 tabs / 30 days), PA; PA applies if 65 years and older when greater than 5 day supply |
| <i>diazepam (anticonvulsant)</i> GEL 2.5mg, 10mg, 20mg | 4                |                                                                                              |
| <i>diazepam inj</i> SOLN 5mg/ml                        | 4                |                                                                                              |
| <i>diazepam intensol</i> CONC 5mg/ml                   | 3                | QL (240 mL / 30 days), PA; PA applies if 65 years and older when greater than 5 day supply   |
| DILANTIN CAPS 30mg                                     | 4                |                                                                                              |
| <i>divalproex sodium</i> CSDR 125mg                    | 4                |                                                                                              |
| <i>divalproex sodium</i> TB24 250mg, 500mg             | 3                |                                                                                              |
| <i>divalproex sodium</i> TBEC 125mg, 250mg, 500mg      | 2                |                                                                                              |
| EPIDIOLEX SOLN 100mg/ml                                | 5                | NDS, QL (600 mL / 30 days), NM, PA                                                           |
| <i>eslicarbazepine acetate</i> TABS 200mg, 400mg       | 4                | QL (30 tabs / 30 days)                                                                       |
| <i>eslicarbazepine acetate</i> TABS 600mg, 800mg       | 4                | QL (60 tabs / 30 days)                                                                       |
| <i>ethosuximide</i> CAPS 250mg; SOLN 250mg/5ml         | 3                |                                                                                              |
| <i>felbamate</i> SUSP 600mg/5ml; TABS 400mg, 600mg     | 4                |                                                                                              |
| FINTEPLA SOLN 2.2mg/ml                                 | 5                | NDS, QL (360 mL / 30 days), NM, PA                                                           |
| FYCOMPA SUSP .5mg/ml                                   | 5                | NDS, QL (680 mL / 28 days), PA                                                               |
| FYCOMPA TABS 2mg                                       | 4                | QL (60 tabs / 30 days), PA                                                                   |
| FYCOMPA TABS 4mg, 6mg, 8mg, 10mg, 12mg                 | 5                | NDS, QL (30 tabs / 30 days), PA                                                              |
| <i>gabapentin</i> CAPS 100mg, 300mg                    | 2                | QL (360 caps / 30 days)                                                                      |
| <i>gabapentin</i> CAPS 400mg                           | 2                | QL (270 caps / 30 days)                                                                      |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                                              | <b>Drug Tier</b> | <b>Requirements/Limits</b>                                    |
|-----------------------------------------------------------------------------------------------|------------------|---------------------------------------------------------------|
| <i>gabapentin</i> SOLN 250mg/5ml, 300mg/6ml                                                   | 3                | QL (2160 mL / 30 days)                                        |
| <i>gabapentin</i> TABS 600mg                                                                  | 2                | QL (180 tabs / 30 days)                                       |
| <i>gabapentin</i> TABS 800mg                                                                  | 2                | QL (120 tabs / 30 days)                                       |
| <i>lacosamide</i> SOLN 200mg/20ml                                                             | 4                |                                                               |
| <i>lacosamide</i> TABS 50mg                                                                   | 4                | QL (120 tabs / 30 days)                                       |
| <i>lacosamide</i> TABS 100mg, 150mg, 200mg                                                    | 4                | QL (60 tabs / 30 days)                                        |
| <i>lacosamide oral</i> SOLN 10mg/ml                                                           | 4                | QL (1200 mL / 30 days)                                        |
| <i>lamotrigine</i> CHEW 5mg, 25mg                                                             | 3                |                                                               |
| <i>lamotrigine</i> TABS 25mg, 100mg, 150mg, 200mg                                             | 1                |                                                               |
| <i>lamotrigine</i> TB24 25mg, 50mg, 100mg, 200mg, 250mg, 300mg; TBDP 25mg, 50mg, 100mg, 200mg | 4                | ST                                                            |
| <i>levetiracetam</i> SOLN 100mg/ml; TB24 500mg, 750mg                                         | 3                |                                                               |
| <i>levetiracetam</i> SOLN 500mg/5ml                                                           | 4                |                                                               |
| <i>levetiracetam</i> TABS 250mg, 500mg, 750mg, 1000mg                                         | 2                |                                                               |
| <i>levetiracetam</i> TB3D 250mg                                                               | 4                | QL (360 tabs / 30 days)                                       |
| <i>levetiracetam</i> TB3D 500mg                                                               | 4                | QL (180 tabs / 30 days)                                       |
| <i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i>                                  | 4                |                                                               |
| <i>levetiracetam in sodium chloride iv soln 1000 mg/100ml</i>                                 | 4                |                                                               |
| <i>levetiracetam in sodium chloride iv soln 1500 mg/100ml</i>                                 | 4                |                                                               |
| <i>methsuximide</i> CAPS 300mg                                                                | 4                |                                                               |
| NAYZILAM SOLN 5mg/0.1ml                                                                       | 4                | QL (10 nasal units / 30 days)                                 |
| <i>oxcarbazepine</i> SUSP 300mg/5ml                                                           | 4                |                                                               |
| <i>oxcarbazepine</i> TABS 150mg, 300mg, 600mg                                                 | 3                |                                                               |
| <i>perampanel</i> SUSP .5mg/ml                                                                | 5                | NDS, QL (680 mL / 28 days), PA                                |
| <i>perampanel</i> TABS 2mg                                                                    | 4                | QL (60 tabs / 30 days), PA                                    |
| <i>perampanel</i> TABS 4mg, 6mg, 8mg, 10mg, 12mg                                              | 4                | QL (30 tabs / 30 days), PA                                    |
| <i>phenobarbital</i> ELIX 20mg/5ml                                                            | 4                | QL (1500 mL / 30 days), PA; PA applies if 65 years and older  |
| <i>phenobarbital</i> TABS 15mg, 16.2mg, 30mg, 32.4mg, 60mg, 64.8mg, 97.2mg, 100mg             | 3                | QL (120 tabs / 30 days), PA; PA applies if 65 years and older |
| <i>phenobarbital sodium</i> SOLN 65mg/ml, 130mg/ml                                            | 4                | PA; PA applies if 65 years and older                          |

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| <b>Drug Name</b>                                          | <b>Drug Tier</b> | <b>Requirements/Limits</b>                                    |
|-----------------------------------------------------------|------------------|---------------------------------------------------------------|
| <i>phenytek</i> CAPS 200mg, 300mg                         | 3                |                                                               |
| <i>phenytoin</i> CHEW 50mg; SUSP 125mg/5ml                | 3                |                                                               |
| <i>phenytoin sodium</i> SOLN 50mg/ml                      | 4                |                                                               |
| <i>phenytoin sodium extended</i> CAPS 100mg, 200mg, 300mg | 3                |                                                               |
| <i>pregabalin</i> CAPS 25mg, 50mg, 75mg, 100mg, 150mg     | 3                | QL (120 caps / 30 days), PA; PA applies if 65 years and older |
| <i>pregabalin</i> CAPS 200mg                              | 3                | QL (90 caps / 30 days), PA; PA applies if 65 years and older  |
| <i>pregabalin</i> CAPS 225mg, 300mg                       | 3                | QL (60 caps / 30 days), PA; PA applies if 65 years and older  |
| <i>pregabalin</i> SOLN 20mg/ml                            | 4                | QL (900 mL / 30 days), PA; PA applies if 65 years and older   |
| <i>primidone</i> TABS 50mg, 125mg, 250mg                  | 2                |                                                               |
| <i>roweepra</i> TABS 500mg                                | 2                |                                                               |
| <i>rufinamide</i> SUSP 40mg/ml                            | 5                | NDS, QL (2400 mL / 30 days), PA                               |
| <i>rufinamide</i> TABS 200mg                              | 4                | QL (480 tabs / 30 days), PA                                   |
| <i>rufinamide</i> TABS 400mg                              | 5                | NDS, QL (240 tabs / 30 days), PA                              |
| SPRITAM TB3D 250mg                                        | 4                | QL (360 tabs / 30 days)                                       |
| SPRITAM TB3D 500mg                                        | 4                | QL (180 tabs / 30 days)                                       |
| SPRITAM TB3D 750mg                                        | 4                | QL (120 tabs / 30 days)                                       |
| SPRITAM TB3D 1000mg                                       | 4                | QL (90 tabs / 30 days)                                        |
| SUBVENITE SUSP 10mg/ml                                    | 5                | NDS, ST                                                       |
| <i>subvenite</i> TABS 25mg, 100mg, 150mg, 200mg           | 1                |                                                               |
| SYMPAZAN FILM 5mg, 10mg, 20mg                             | 5                | NDS, QL (60 films / 30 days), PA                              |
| <i>tiagabine hcl</i> TABS 2mg, 4mg, 12mg, 16mg            | 4                |                                                               |
| <i>topiramate</i> CPSP 15mg, 25mg                         | 3                |                                                               |
| <i>topiramate</i> CPSP 50mg                               | 4                |                                                               |
| <i>topiramate</i> SOLN 25mg/ml                            | 4                | QL (480 mL / 30 days), PA                                     |
| <i>topiramate</i> TABS 25mg, 50mg, 100mg, 200mg           | 2                |                                                               |
| <i>valproate sodium</i> SOLN 100mg/ml                     | 4                |                                                               |
| <i>valproate sodium</i> SOLN 250mg/5ml                    | 3                |                                                               |
| <i>valproic acid</i> CAPS 250mg                           | 2                |                                                               |
| VALTOCO 5 MG DOSE LIQD 5mg/0.1ml                          | 4                | QL (10 blister packs / 30 days)                               |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                         | <b>Drug Tier</b> | <b>Requirements/Limits</b>              |
|------------------------------------------|------------------|-----------------------------------------|
| VALTOCO 10 MG DOSE LIQD 10mg/0.1ml       | 4                | QL (10 blister packs / 30 days)         |
| VALTOCO 15 MG DOSE LQPK 7.5mg/0.1ml      | 4                | QL (10 blister packs / 30 days)         |
| VALTOCO 20 MG DOSE LQPK 10mg/0.1ml       | 4                | QL (10 blister packs / 30 days)         |
| <i>vigabatrin</i> PACK 500mg             | 5                | NDS, QL (180 packets / 30 days), NM, PA |
| <i>vigabatrin</i> TABS 500mg             | 5                | NDS, QL (180 tabs / 30 days), NM, PA    |
| <i>vigadrone</i> PACK 500mg              | 5                | NDS, QL (180 packets / 30 days), NM, PA |
| <i>vigadrone</i> TABS 500mg              | 5                | NDS, QL (180 tabs / 30 days), NM, PA    |
| VIGAFYDE SOLN 100mg/ml                   | 5                | NDS, QL (900 mL / 30 days), NM, PA      |
| XCOPRI TABS 25mg, 50mg, 100mg            | 5                | NDS, QL (30 tabs / 30 days)             |
| XCOPRI TABS 150mg, 200mg                 | 5                | NDS, QL (60 tabs / 30 days)             |
| XCOPRI PAK 12.5-25                       | 4                | QL (28 tabs / 28 days)                  |
| XCOPRI PAK 50-100MG                      | 5                | NDS, QL (28 tabs / 28 days)             |
| XCOPRI PAK 100-150                       | 5                | NDS, QL (56 tabs / 28 days)             |
| XCOPRI PAK 150-200MG (MAINTENANCE)       | 5                | NDS, QL (56 tabs / 28 days)             |
| XCOPRI PAK 150-200MG (TITRATION)         | 5                | NDS, QL (28 tabs / 28 days)             |
| ZONISADE SUSP 100mg/5ml                  | 5                | NDS, QL (900 mL / 30 days), PA          |
| <i>zonisamide</i> CAPS 25mg, 50mg, 100mg | 2                |                                         |
| ZTALMY SUSP 50mg/ml                      | 5                | NDS, QL (1100 mL / 30 days), NM, PA     |

### ***ATTENTION DEFICIT HYPERACTIVITY DISORDER***

|                                                        |   |                            |
|--------------------------------------------------------|---|----------------------------|
| <i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>  | 4 | QL (30 caps / 30 days), PA |
| <i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i> | 4 | QL (30 caps / 30 days), PA |
| <i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i> | 4 | QL (30 caps / 30 days), PA |
| <i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i> | 4 | QL (30 caps / 30 days), PA |
| <i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i> | 4 | QL (30 caps / 30 days), PA |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                               | <b>Drug Tier</b> | <b>Requirements/Limits</b>                                   |
|----------------------------------------------------------------|------------------|--------------------------------------------------------------|
| <i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>         | 4                | QL (30 caps / 30 days), PA                                   |
| <i>amphetamine-dextroamphetamine tab 5 mg</i>                  | 3                | QL (60 tabs / 30 days), PA                                   |
| <i>amphetamine-dextroamphetamine tab 7.5 mg</i>                | 3                | QL (60 tabs / 30 days), PA                                   |
| <i>amphetamine-dextroamphetamine tab 10 mg</i>                 | 3                | QL (60 tabs / 30 days), PA                                   |
| <i>amphetamine-dextroamphetamine tab 12.5 mg</i>               | 3                | QL (60 tabs / 30 days), PA                                   |
| <i>amphetamine-dextroamphetamine tab 15 mg</i>                 | 3                | QL (60 tabs / 30 days), PA                                   |
| <i>amphetamine-dextroamphetamine tab 20 mg</i>                 | 3                | QL (90 tabs / 30 days), PA                                   |
| <i>amphetamine-dextroamphetamine tab 30 mg</i>                 | 3                | QL (60 tabs / 30 days), PA                                   |
| <i>atomoxetine hcl CAPS 10mg, 18mg, 25mg</i>                   | 4                | QL (120 caps / 30 days)                                      |
| <i>atomoxetine hcl CAPS 40mg</i>                               | 4                | QL (60 caps / 30 days)                                       |
| <i>atomoxetine hcl CAPS 60mg, 80mg, 100mg</i>                  | 4                | QL (30 caps / 30 days)                                       |
| <i>dexmethylphenidate hcl TABS 2.5mg, 5mg</i>                  | 3                | QL (120 tabs / 30 days), PA                                  |
| <i>dexmethylphenidate hcl TABS 10mg</i>                        | 3                | QL (60 tabs / 30 days), PA                                   |
| <i>guanfacine hcl (adhd) TB24 1mg, 2mg, 4mg</i>                | 3                | QL (30 tabs / 30 days), PA; PA applies if 65 years and older |
| <i>guanfacine hcl (adhd) TB24 3mg</i>                          | 3                | QL (60 tabs / 30 days), PA; PA applies if 65 years and older |
| <i>lisdexamfetamine dimesylate CAPS 10mg, 20mg, 30mg</i>       | 4                | QL (60 caps / 30 days), PA                                   |
| <i>lisdexamfetamine dimesylate CAPS 40mg, 50mg, 60mg, 70mg</i> | 4                | QL (30 caps / 30 days), PA                                   |
| <i>lisdexamfetamine dimesylate CHEW 10mg, 20mg, 30mg</i>       | 4                | QL (60 tabs / 30 days), PA                                   |
| <i>lisdexamfetamine dimesylate CHEW 40mg, 50mg, 60mg</i>       | 4                | QL (30 tabs / 30 days), PA                                   |
| <i>methylphenidate hcl CHEW 2.5mg, 5mg, 10mg</i>               | 4                | QL (180 tabs / 30 days), PA                                  |
| <i>methylphenidate hcl SOLN 5mg/5ml</i>                        | 4                | QL (1800 mL / 30 days), PA                                   |
| <i>methylphenidate hcl SOLN 10mg/5ml</i>                       | 4                | QL (900 mL / 30 days), PA                                    |
| <i>methylphenidate hcl TABS 5mg, 10mg</i>                      | 3                | QL (180 tabs / 30 days), PA                                  |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                           | <b>Drug Tier</b> | <b>Requirements/Limits</b> |
|--------------------------------------------|------------------|----------------------------|
| <i>methylphenidate hcl</i> TABS 20mg       | 3                | QL (90 tabs / 30 days), PA |
| <i>methylphenidate hcl</i> TBCR 10mg, 20mg | 4                | QL (90 tabs / 30 days), PA |

### **HYPNOTICS**

|                                          |   |                                                                                                       |
|------------------------------------------|---|-------------------------------------------------------------------------------------------------------|
| DAYVIGO TABS 5mg, 10mg                   | 3 | QL (30 tabs / 30 days)                                                                                |
| <i>doxepin hcl (sleep)</i> TABS 3mg, 6mg | 3 | QL (30 tabs / 30 days)                                                                                |
| <i>ramelteon</i> TABS 8mg                | 3 | QL (30 tabs / 30 days)                                                                                |
| <i>tasimelteon</i> CAPS 20mg             | 5 | NDS, QL (30 caps / 30 days), NM, PA                                                                   |
| <i>temazepam</i> CAPS 7.5mg, 30mg        | 4 | QL (30 caps / 30 days), PA; PA applies if 65 years and older                                          |
| <i>temazepam</i> CAPS 15mg               | 4 | QL (60 caps / 30 days), PA; PA applies if 65 years and older                                          |
| <i>zolpidem tartrate</i> TABS 5mg, 10mg  | 2 | QL (30 tabs / 30 days), PA; PA applies if 65 years and older after a 90 day supply in a calendar year |

### **MIGRAINE**

|                                                             |   |                                   |
|-------------------------------------------------------------|---|-----------------------------------|
| AIMOVIG SOAJ 70mg/ml, 140mg/ml                              | 3 | QL (1 pen / 30 days), NM, PA      |
| <i>dihydroergotamine mesylate</i> SOLN 4mg/ml               | 5 | NDS, QL (8 mL / 30 days), PA      |
| EMGALITY SOAJ 120mg/ml                                      | 3 | QL (2 pens / 30 days), NM, PA     |
| EMGALITY SOSY 100mg/ml                                      | 3 | QL (3 syringes / 30 days), NM, PA |
| EMGALITY SOSY 120mg/ml                                      | 3 | QL (2 syringes / 30 days), NM, PA |
| <i>ergotamine w/ caffeine tab 1-100 mg</i>                  | 3 | QL (40 tabs / 28 days), PA        |
| <i>naratriptan hcl</i> TABS 1mg, 2.5mg                      | 3 | QL (12 tabs / 30 days)            |
| NURTEC TBDP 75mg                                            | 3 | QL (16 tabs / 30 days), PA        |
| QULIPTA TABS 10mg, 30mg, 60mg                               | 3 | QL (30 tabs / 30 days), PA        |
| <i>rizatriptan benzoate</i> TABS 5mg, 10mg; TBDP 5mg, 10mg  | 3 | QL (18 tabs / 30 days)            |
| <i>sumatriptan</i> SOLN 5mg/act                             | 4 | QL (24 units / 30 days)           |
| <i>sumatriptan</i> SOLN 20mg/act                            | 4 | QL (12 units / 30 days)           |
| <i>sumatriptan succinate</i> SOAJ 6mg/0.5ml; SOLN 6mg/0.5ml | 4 | QL (12 injections / 30 days)      |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                              | <b>Drug Tier</b> | <b>Requirements/Limits</b>              |
|---------------------------------------------------------------|------------------|-----------------------------------------|
| <i>sumatriptan succinate</i> TABS 25mg, 50mg, 100mg           | 2                | QL (12 tabs / 30 days)                  |
| UBRELVY TABS 50mg, 100mg                                      | 3                | QL (16 tabs / 30 days), PA              |
| <b>MISCELLANEOUS</b>                                          |                  |                                         |
| AUSTEDO TABS 6mg                                              | 5                | NDS, QL (60 tabs / 30 days), NM, PA     |
| AUSTEDO TABS 9mg, 12mg                                        | 5                | NDS, QL (120 tabs / 30 days), NM, PA    |
| AUSTEDO XR TB24 6mg                                           | 5                | NDS, QL (90 tabs / 30 days), NM, PA     |
| AUSTEDO XR TB24 12mg                                          | 5                | NDS, QL (120 tabs / 30 days), NM, PA    |
| AUSTEDO XR TB24 18mg, 30mg, 36mg, 42mg, 48mg                  | 5                | NDS, QL (30 tabs / 30 days), NM, PA     |
| AUSTEDO XR TB24 24mg                                          | 5                | NDS, QL (60 tabs / 30 days), NM, PA     |
| AUSTEDO XR TAB TITR KIT                                       | 5                | NDS, QL (2 packs / year), NM, PA        |
| <i>lithium</i> SOLN 8meq/5ml                                  | 4                |                                         |
| <i>lithium carbonate</i> CAPS 150mg, 300mg, 600mg; TABS 300mg | 1                |                                         |
| <i>lithium carbonate</i> TBCR 300mg, 450mg                    | 2                |                                         |
| NUEDEXTA CAP 20-10MG                                          | 5                | NDS, QL (60 caps / 30 days), PA         |
| <i>pyridostigmine bromide</i> TABS 60mg                       | 3                |                                         |
| <i>riluzole</i> TABS 50mg                                     | 4                |                                         |
| <i>tetrabenazine</i> TABS 12.5mg                              | 4                | QL (90 tabs / 30 days), NM, PA          |
| <i>tetrabenazine</i> TABS 25mg                                | 5                | NDS, QL (120 tabs / 30 days), NM, PA    |
| <b>MULTIPLE SCLEROSIS AGENTS</b>                              |                  |                                         |
| BAFIERTAM CPDR 95mg                                           | 5                | NDS, QL (120 caps / 30 days), NM, PA    |
| BETASERON KIT .3mg                                            | 5                | NDS, QL (14 kits / 28 days), NM, PA     |
| COPAXONE SOSY 20mg/ml                                         | 5                | NDS, QL (30 syringes / 30 days), NM, PA |
| COPAXONE SOSY 40mg/ml                                         | 5                | NDS, QL (12 syringes / 28 days), NM, PA |
| <i>dalfampridine</i> TB12 10mg                                | 3                | QL (60 tabs / 30 days), NM, PA          |
| <i>fingolimod hcl</i> CAPS .5mg                               | 5                | NDS, QL (30 caps / 30 days), NM, PA     |
| <i>glatiramer acetate</i> SOSY 20mg/ml                        | 5                | NDS, QL (30 syringes / 30 days), NM, PA |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                       | <b>Drug Tier</b> | <b>Requirements/Limits</b>              |
|----------------------------------------|------------------|-----------------------------------------|
| <i>glatiramer acetate</i> SOSY 40mg/ml | 5                | NDS, QL (12 syringes / 28 days), NM, PA |
| <i>glatopa</i> SOSY 20mg/ml            | 5                | NDS, QL (30 syringes / 30 days), NM, PA |
| <i>glatopa</i> SOSY 40mg/ml            | 5                | NDS, QL (12 syringes / 28 days), NM, PA |
| KESIMPTA SOAJ 20mg/0.4ml               | 5                | NDS, QL (16 pens / 365 days), NM, PA    |

### **MUSCULOSKELETAL THERAPY AGENTS**

|                                                 |   |                                                                                                        |
|-------------------------------------------------|---|--------------------------------------------------------------------------------------------------------|
| <i>baclofen</i> TABS 5mg                        | 2 | QL (90 tabs / 30 days)                                                                                 |
| <i>baclofen</i> TABS 10mg, 20mg                 | 2 |                                                                                                        |
| <i>carisoprodol</i> TABS 350mg                  | 3 | QL (120 tabs / 30 days), PA; PA applies if 65 years and older after a 90 day supply in a calendar year |
| <i>cyclobenzaprine hcl</i> TABS 5mg, 10mg       | 3 | QL (90 tabs / 30 days), PA; PA applies if 65 years and older after a 90 day supply in a calendar year  |
| <i>dantrolene sodium</i> CAPS 25mg, 50mg, 100mg | 4 |                                                                                                        |
| <i>methocarbamol</i> TABS 500mg                 | 3 | QL (360 tabs / 30 days), PA; PA applies if 65 years and older after a 90 day supply in a calendar year |
| <i>methocarbamol</i> TABS 750mg                 | 3 | QL (240 tabs / 30 days), PA; PA applies if 65 years and older after a 90 day supply in a calendar year |
| <i>tizanidine hcl</i> TABS 2mg, 4mg             | 2 |                                                                                                        |

### **NARCOLEPSY/CATAPLEXY**

|                                             |   |                                    |
|---------------------------------------------|---|------------------------------------|
| <i>armodafinil</i> TABS 50mg                | 4 | QL (60 tabs / 30 days), PA         |
| <i>armodafinil</i> TABS 150mg, 200mg, 250mg | 4 | QL (30 tabs / 30 days), PA         |
| <i>modafinil</i> TABS 100mg                 | 3 | QL (30 tabs / 30 days), PA         |
| <i>modafinil</i> TABS 200mg                 | 3 | QL (60 tabs / 30 days), PA         |
| <i>sodium oxybate</i> SOLN 500mg/ml         | 5 | NDS, QL (540 mL / 30 days), NM, PA |

### **PSYCHOTHERAPEUTIC-MISC**

|                                       |   |  |
|---------------------------------------|---|--|
| <i>acamprosate calcium</i> TBEC 333mg | 4 |  |
|---------------------------------------|---|--|

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                                | <b>Drug Tier</b> | <b>Requirements/Limits</b> |
|---------------------------------------------------------------------------------|------------------|----------------------------|
| <i>buprenorphine hcl</i> SUBL 2mg                                               | 3                | QL (180 tabs / 30 days)    |
| <i>buprenorphine hcl</i> SUBL 8mg                                               | 3                | QL (120 tabs / 30 days)    |
| <i>buprenorphine hcl-naloxone hcl sl film</i> 2-0.5 mg (base equiv)             | 4                | QL (180 films / 30 days)   |
| <i>buprenorphine hcl-naloxone hcl sl film</i> 4-1 mg (base equiv)               | 4                | QL (90 films / 30 days)    |
| <i>buprenorphine hcl-naloxone hcl sl film</i> 8-2 mg (base equiv)               | 4                | QL (120 films / 30 days)   |
| <i>buprenorphine hcl-naloxone hcl sl film</i> 12-3 mg (base equiv)              | 4                | QL (90 films / 30 days)    |
| <i>buprenorphine hcl-naloxone hcl sl tab</i> 2-0.5 mg (base equiv)              | 2                | QL (180 tabs / 30 days)    |
| <i>buprenorphine hcl-naloxone hcl sl tab</i> 8-2 mg (base equiv)                | 2                | QL (120 tabs / 30 days)    |
| <i>bupropion hcl (smoking deterrent)</i> TB12 150mg                             | 2                | QL (60 tabs / 30 days)     |
| <i>disulfiram</i> TABS 250mg, 500mg                                             | 3                |                            |
| KLOXXADO LIQD 8mg/0.1ml                                                         | 3                |                            |
| <i>naloxone hcl</i> LIQD 4mg/0.1ml                                              | 3                |                            |
| <i>naloxone hcl</i> SOCT .4mg/ml; SOLN .4mg/ml, 4mg/10ml; SOSY .4mg/ml, 2mg/2ml | 2                |                            |
| <i>naltrexone hcl</i> TABS 50mg                                                 | 3                |                            |
| NICOTROL NS SOLN 10mg/ml                                                        | 4                |                            |
| <i>varenicline tartrate</i> TABS .5mg, 1mg                                      | 4                | QL (56 tabs / 28 days)     |
| <i>varenicline tartrate tab</i> 11 x 0.5 mg & 42 x 1 mg start pack              | 4                | QL (2 packs / year)        |
| VIVITROL SUSR 380mg                                                             | 5                | NDS, NM                    |

## **ENDOCRINE AND METABOLIC**

### **ANDROGENS**

|                                                       |   |                           |
|-------------------------------------------------------|---|---------------------------|
| <i>danazol</i> CAPS 50mg, 100mg, 200mg                | 4 |                           |
| <i>depo-testosterone</i> SOLN 100mg/ml, 200mg/ml      | 3 | PA                        |
| <i>testosterone</i> GEL 1%, 25mg/2.5gm, 50mg/5gm      | 4 | QL (300 gm / 30 days), PA |
| <i>testosterone cypionate</i> SOLN 100mg/ml, 200mg/ml | 3 | PA                        |
| <i>testosterone enanthate</i> SOLN 200mg/ml           | 3 | PA                        |
| <i>testosterone pump</i> GEL 1.62%                    | 4 | QL (150 gm / 30 days), PA |

### **ANTIDIABETICS**

|                                                 |   |                         |
|-------------------------------------------------|---|-------------------------|
| <i>acarbose</i> TABS 25mg, 50mg, 100mg          | 6 |                         |
| <i>dapagliflozin propanediol</i> TABS 5mg, 10mg | 3 | QL (30 tabs / 30 days)  |
| FARXIGA TABS 5mg, 10mg                          | 3 | QL (30 tabs / 30 days)  |
| <i>glimepiride</i> TABS 1mg, 2mg                | 6 | QL (90 tabs / 30 days)  |
| <i>glimepiride</i> TABS 4mg                     | 6 | QL (60 tabs / 30 days)  |
| <i>glipizide</i> TABS 5mg                       | 6 | QL (240 tabs / 30 days) |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                                              | <b>Drug Tier</b> | <b>Requirements/Limits</b>                                |
|-----------------------------------------------------------------------------------------------|------------------|-----------------------------------------------------------|
| <i>glipizide</i> TABS 10mg                                                                    | 6                | QL (120 tabs / 30 days)                                   |
| <i>glipizide</i> TB24 2.5mg, 5mg                                                              | 6                | QL (90 tabs / 30 days)                                    |
| <i>glipizide</i> TB24 10mg                                                                    | 6                | QL (60 tabs / 30 days)                                    |
| <i>glipizide-metformin hcl tab 2.5-250 mg</i>                                                 | 6                | QL (240 tabs / 30 days)                                   |
| <i>glipizide-metformin hcl tab 2.5-500 mg</i>                                                 | 6                | QL (120 tabs / 30 days)                                   |
| <i>glipizide-metformin hcl tab 5-500 mg</i>                                                   | 6                | QL (120 tabs / 30 days)                                   |
| GLYXAMBI TAB 10-5 MG                                                                          | 3                | QL (30 tabs / 30 days)                                    |
| GLYXAMBI TAB 25-5 MG                                                                          | 3                | QL (30 tabs / 30 days)                                    |
| JANUMET TAB 50-500MG                                                                          | 3                | QL (60 tabs / 30 days)                                    |
| JANUMET TAB 50-1000                                                                           | 3                | QL (60 tabs / 30 days)                                    |
| JANUMET XR TAB 50-500MG                                                                       | 3                | QL (60 tabs / 30 days)                                    |
| JANUMET XR TAB 50-1000                                                                        | 3                | QL (60 tabs / 30 days)                                    |
| JANUMET XR TAB 100-1000                                                                       | 3                | QL (30 tabs / 30 days)                                    |
| JANUVIA TABS 25mg, 50mg, 100mg                                                                | 3                | QL (30 tabs / 30 days)                                    |
| JARDIANCE TABS 10mg, 25mg                                                                     | 3                | QL (30 tabs / 30 days)                                    |
| JENTADUETO TAB 2.5-500                                                                        | 3                | QL (60 tabs / 30 days)                                    |
| JENTADUETO TAB 2.5-850                                                                        | 3                | QL (60 tabs / 30 days)                                    |
| JENTADUETO TAB 2.5-1000                                                                       | 3                | QL (60 tabs / 30 days)                                    |
| JENTADUETO TAB XR 2.5-1000MG                                                                  | 3                | QL (60 tabs / 30 days)                                    |
| JENTADUETO TAB XR 5-1000MG                                                                    | 3                | QL (30 tabs / 30 days)                                    |
| <i>metformin hcl</i> TABS 500mg                                                               | 6                | QL (150 tabs / 30 days)                                   |
| <i>metformin hcl</i> TABS 850mg                                                               | 6                | QL (90 tabs / 30 days)                                    |
| <i>metformin hcl</i> TABS 1000mg                                                              | 6                | QL (75 tabs / 30 days)                                    |
| <i>metformin hcl</i> TB24 500mg                                                               | 6                | QL (120 tabs / 30 days);<br>(generic of<br>GLUCOPHAGE XR) |
| <i>metformin hcl</i> TB24 750mg                                                               | 6                | QL (60 tabs / 30 days);<br>(generic of<br>GLUCOPHAGE XR)  |
| MOUNJARO SOAJ 2.5mg/0.5ml, 5mg/0.5ml,<br>7.5mg/0.5ml, 10mg/0.5ml, 12.5mg/0.5ml,<br>15mg/0.5ml | 3                | QL (4 pens / 28 days),<br>PA                              |
| <i>nateglinide</i> TABS 60mg, 120mg                                                           | 6                | QL (90 tabs / 30 days)                                    |
| OZEMPIC (0.25 OR 0.5MG/DOSE) SOPN<br>2mg/3ml                                                  | 3                | QL (1 pen / 28 days), PA                                  |
| OZEMPIC (1MG/DOSE) SOPN 4mg/3ml                                                               | 3                | QL (1 pen / 28 days), PA                                  |
| OZEMPIC (2MG/DOSE) SOPN 8mg/3ml                                                               | 3                | QL (1 pen / 28 days), PA                                  |
| <i>pioglitazone hcl</i> TABS 15mg, 30mg, 45mg                                                 | 6                | QL (30 tabs / 30 days)                                    |
| <i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>                                           | 6                | QL (90 tabs / 30 days)                                    |
| <i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>                                           | 6                | QL (90 tabs / 30 days)                                    |
| <i>repaglinide</i> TABS 2mg                                                                   | 6                | QL (240 tabs / 30 days)                                   |
| <i>repaglinide</i> TABS .5mg, 1mg                                                             | 6                | QL (120 tabs / 30 days)                                   |
| RYBELSUS TABS 3mg, 7mg, 14mg                                                                  | 3                | QL (30 tabs / 30 days),<br>PA                             |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                | <b>Drug Tier</b> | <b>Requirements/Limits</b>      |
|-----------------------------------------------------------------|------------------|---------------------------------|
| TRADJENTA TABS 5mg                                              | 3                | QL (30 tabs / 30 days)          |
| TRIJARDY XR TAB ER 24HR 5-2.5-1000MG                            | 3                | QL (60 tabs / 30 days)          |
| TRIJARDY XR TAB ER 24HR 10-5-1000MG                             | 3                | QL (30 tabs / 30 days)          |
| TRIJARDY XR TAB ER 24HR 12.5-2.5-1000MG                         | 3                | QL (60 tabs / 30 days)          |
| TRIJARDY XR TAB ER 24HR 25-5-1000MG                             | 3                | QL (30 tabs / 30 days)          |
| TRULICITY SOAJ .75mg/0.5ml, 1.5mg/0.5ml, 3mg/0.5ml, 4.5mg/0.5ml | 3                | QL (4 pens / 28 days), PA       |
| XIGDUO XR TAB 2.5-1000                                          | 3                | QL (60 tabs / 30 days)          |
| XIGDUO XR TAB 5-500MG                                           | 3                | QL (60 tabs / 30 days)          |
| XIGDUO XR TAB 5-1000MG                                          | 3                | QL (60 tabs / 30 days)          |
| XIGDUO XR TAB 10-500MG                                          | 3                | QL (30 tabs / 30 days)          |
| XIGDUO XR TAB 10-1000                                           | 3                | QL (30 tabs / 30 days)          |
| <b>ANTIDIABETICS, INSULINS</b>                                  |                  |                                 |
| ADMELOG SOLN 100unit/ml                                         | 3                | B/D                             |
| ADMELOG SOLOSTAR SOPN 100unit/ml                                | 3                |                                 |
| ALCOHOL SWABS: EMBECTA-BD/MHC/RUGBY                             | 3                | PA                              |
| CEQR SIMPL KIT PATCH 2U (3-DAY)                                 | 4                | QL (10 patches / 30 days), PA   |
| CEQR SIMPL KIT PATCH 2U (4-DAY)                                 | 4                | QL (8 patches / 24 days), PA    |
| CEQR SIMPL MIS INSERTER                                         | 4                | QL (2 inserters / year), PA     |
| FIASP SOLN 100unit/ml                                           | 3                | B/D                             |
| FIASP FLEXTOUCH SOPN 100unit/ml                                 | 3                |                                 |
| FIASP PENFILL SOCT 100unit/ml                                   | 3                |                                 |
| FIASP PUMPCART SOCT 100unit/ml                                  | 3                | B/D                             |
| GAUZE PADS 2" X 2"                                              | 3                | PA                              |
| HUMULIN R U-500 (CONCENTR SOLN 500unit/ml                       | 5                | NDS, B/D                        |
| HUMULIN R U-500 KWIKPEN SOPN 500unit/ml                         | 5                | NDS                             |
| INSULIN PEN NEEDLES: EMBECTA-BD                                 | 3                | PA                              |
| INSULIN SAFETY NEEDLES: EMBECTA-BD                              | 3                | PA                              |
| INSULIN SYRINGES: EMBECTA-BD                                    | 3                | PA                              |
| LANTUS SOLN 100unit/ml                                          | 3                |                                 |
| LANTUS SOLOSTAR SOPN 100unit/ml                                 | 3                |                                 |
| NOVOLIN INJ 70/30                                               | 3                | (brand RELION not covered)      |
| NOVOLIN INJ 70/30 FP                                            | 3                | (brand RELION not covered)      |
| NOVOLIN N SUSP 100unit/ml                                       | 3                | (brand RELION not covered)      |
| NOVOLIN N FLEXPEN SUPN 100unit/ml                               | 3                | (brand RELION not covered)      |
| NOVOLIN R SOLN 100unit/ml                                       | 3                | B/D; (brand RELION not covered) |

**You can find information on what the symbols and abbreviations in this table mean by going to Section C1.**

| <b>Drug Name</b>                                      | <b>Drug Tier</b> | <b>Requirements/Limits</b>        |
|-------------------------------------------------------|------------------|-----------------------------------|
| NOVOLIN R FLEXPEN SOPN 100unit/ml                     | 3                | (brand RELION not covered)        |
| NOVOLOG SOLN 100unit/ml                               | 3                | B/D                               |
| NOVOLOG FLEXPEN SOPN 100unit/ml                       | 3                |                                   |
| NOVOLOG FLEXPEN RELION SOPN 100unit/ml                | 3                |                                   |
| NOVOLOG MIX INJ 70/30                                 | 3                | (brand RELION not covered)        |
| NOVOLOG MIX INJ FLEXPEN                               | 3                | (brand RELION not covered)        |
| NOVOLOG PENFILL SOCT 100unit/ml                       | 3                |                                   |
| NOVOLOG RELION SOLN 100unit/ml                        | 3                | B/D                               |
| OMNIPOD 5 DX KIT INT G7G6                             | 4                | QL (1 kit / year), PA             |
| OMNIPOD 5 DX MIS POD G7G6                             | 4                | QL (15 pods / 30 days), PA        |
| OMNIPOD 5 L2 KIT INTRO G6                             | 4                | QL (1 kit / year), PA             |
| OMNIPOD 5 L2 MIS PODS G6                              | 4                | QL (15 pods / 30 days), PA        |
| OMNIPOD DASH KIT INTRO                                | 4                | QL (1 kit / year), PA             |
| OMNIPOD DASH MIS PODS                                 | 4                | QL (15 pods / 30 days), PA        |
| SOLIQUA INJ 100/33                                    | 3                | QL (5 pens / 25 days)             |
| TOUJEO MAX SOLOSTAR SOPN 300unit/ml                   | 3                |                                   |
| TOUJEO SOLOSTAR SOPN 300unit/ml                       | 3                |                                   |
| XULTOPHY INJ 100/3.6                                  | 3                | QL (5 pens / 30 days)             |
| <b>CALCIUM REGULATORS</b>                             |                  |                                   |
| <i>alendronate sodium</i> SOLN 70mg/75ml              | 4                | ST                                |
| <i>alendronate sodium</i> TABS 10mg, 35mg, 70mg       | 6                |                                   |
| BILDYOS SOSY 60mg/ml                                  | 4                | QL (1 syringe / 180 days), NM     |
| BONSITY SOPN 560mcg/2.24ml                            | 5                | NDS, QL (1 pen / 28 days), NM, PA |
| <i>calcitonin (salmon) spray</i> SOLN 200unit/act     | 3                | B/D                               |
| <i>ibandronate sodium</i> SOLN 3mg/3ml                | 4                | B/D, QL (1 injection / 90 days)   |
| <i>ibandronate sodium</i> TABS 150mg                  | 2                | B/D                               |
| OSPOMYV SOSY 60mg/ml                                  | 4                | QL (1 syringe / 180 days), NM     |
| PAMIDRONATE DISODIUM SOLN 6mg/ml                      | 3                | B/D                               |
| <i>pamidronate disodium</i> SOLN 30mg/10ml, 90mg/10ml | 3                | B/D                               |
| PROLIA SOSY 60mg/ml                                   | 4                | QL (1 syringe / 180 days), NM     |
| <i>risedronate sodium</i> TABS 5mg, 35mg, 150mg       | 3                |                                   |
| <i>risedronate sodium</i> TABS 30mg                   | 4                |                                   |
| <i>risedronate sodium</i> TBEC 35mg                   | 4                | ST                                |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                              | <b>Drug Tier</b> | <b>Requirements/Limits</b>                              |
|---------------------------------------------------------------|------------------|---------------------------------------------------------|
| <i>teriparatide</i> SOPN 560mcg/2.24ml                        | 5                | NDS, QL (1 pen / 28 days), NM, PA                       |
| TERIPARATIDE SOPN 560mcg/2.24ml                               | 5                | NDS, QL (1 pen / 28 days), NM, PA;<br>(ALVOGEN product) |
| WYOST SOLN 120mg/1.7ml                                        | 5                | NDS, NM, PA                                             |
| XTRENBO SOLN 120mg/1.7ml                                      | 4                | NM, PA                                                  |
| <i>zoledronic acid</i> CONC 4mg/5ml; SOLN 5mg/100ml           | 4                | B/D, NM                                                 |
| <b>CHELATING AGENTS</b>                                       |                  |                                                         |
| CHEMET CAPS 100mg                                             | 5                | NDS                                                     |
| <i>deferasirox</i> PACK 90mg, 180mg, 360mg; TBSO 250mg, 500mg | 5                | NDS, NM, PA                                             |
| <i>deferasirox</i> TABS 90mg                                  | 3                | NM, PA                                                  |
| <i>deferasirox</i> TABS 180mg, 360mg; TBSO 125mg              | 4                | NM, PA                                                  |
| <i>kionex</i> SUSP 15gm/60ml                                  | 4                |                                                         |
| LOKELMA PACK 5gm, 10gm                                        | 3                |                                                         |
| <i>penicillamine</i> TABS 250mg                               | 5                | NDS, NM                                                 |
| <i>sodium polystyrene sulfonate</i> SUSP 15gm/60ml            | 4                |                                                         |
| <i>sodium polystyrene sulfonate powder</i>                    | 3                |                                                         |
| <i>sps</i> SUSP 15gm/60ml                                     | 4                |                                                         |
| <i>sps rectal</i> SUSP 15gm/60ml                              | 4                |                                                         |
| <i>trientine hcl</i> CAPS 250mg                               | 5                | NDS, NM, PA                                             |
| <b>CONTRACEPTIVES</b>                                         |                  |                                                         |
| <i>afirmelle</i>                                              | 2                |                                                         |
| <i>altavera</i>                                               | 2                |                                                         |
| <i>alyacen 1/35</i>                                           | 2                |                                                         |
| <i>alyacen 7/7/7</i>                                          | 2                |                                                         |
| <i>amethyst</i>                                               | 2                |                                                         |
| <i>apri</i>                                                   | 2                |                                                         |
| <i>aranelle</i>                                               | 2                |                                                         |
| <i>ashlyna</i>                                                | 2                |                                                         |
| <i>aubra eq</i>                                               | 2                |                                                         |
| <i>aurovela 1/20</i>                                          | 2                |                                                         |
| <i>aurovela 24 fe</i>                                         | 2                |                                                         |
| <i>aurovela fe 1.5/30</i>                                     | 2                |                                                         |
| <i>aurovela fe 1/20</i>                                       | 2                |                                                         |
| <i>aviane</i>                                                 | 2                |                                                         |
| <i>ayuna</i>                                                  | 2                |                                                         |
| <i>azurette</i>                                               | 2                |                                                         |
| <i>balziva</i>                                                | 2                |                                                         |
| <i>blisovi 24 fe</i>                                          | 2                |                                                         |
| <i>blisovi fe 1.5/30</i>                                      | 2                |                                                         |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                             | <b>Drug Tier</b> | <b>Requirements/Limits</b> |
|------------------------------------------------------------------------------|------------------|----------------------------|
| <i>blisovi fe 1/20</i>                                                       | 2                |                            |
| <i>briellyn</i>                                                              | 2                |                            |
| <i>camila TABS .35mg</i>                                                     | 2                |                            |
| <i>camrese</i>                                                               | 2                |                            |
| <i>camrese lo</i>                                                            | 2                |                            |
| <i>chateal eq</i>                                                            | 2                |                            |
| <i>cryselle</i>                                                              | 2                |                            |
| <i>cyred eq</i>                                                              | 2                |                            |
| <i>dasetta 1/35</i>                                                          | 2                |                            |
| <i>dasetta 7/7/7</i>                                                         | 2                |                            |
| <i>daysee</i>                                                                | 2                |                            |
| <i>deblitane TABS .35mg</i>                                                  | 2                |                            |
| DEPO-SUBQ PROVERA 104 SUSY<br>104mg/0.65ml                                   | 3                |                            |
| <i>desogest-eth estrad &amp; eth estrad tab 0.15-<br/>0.02/0.01 mg(21/5)</i> | 2                |                            |
| <i>dolishale</i>                                                             | 2                |                            |
| <i>drospirenone-ethinyl estrad-levomefolate tab 3-<br/>0.02-0.451 mg</i>     | 2                |                            |
| <i>drospirenone-ethinyl estrad-levomefolate tab 3-<br/>0.03-0.451 mg</i>     | 2                |                            |
| <i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>                          | 2                |                            |
| <i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>                          | 2                |                            |
| <i>elinest</i>                                                               | 2                |                            |
| <i>eluryng</i>                                                               | 3                |                            |
| <i>emzahh TABS .35mg</i>                                                     | 2                |                            |
| <i>enilloring</i>                                                            | 3                |                            |
| <i>enskyce</i>                                                               | 2                |                            |
| <i>errin TABS .35mg</i>                                                      | 2                |                            |
| <i>estarylla</i>                                                             | 2                |                            |
| <i>ethynodiol diacetate &amp; ethinyl estradiol tab 1<br/>mg-50 mcg</i>      | 2                |                            |
| <i>etonogestrel-ethinyl estradiol va ring 0.12-<br/>0.015 mg/24hr</i>        | 3                |                            |
| <i>falmina</i>                                                               | 2                |                            |
| <i>feirza 1.5/30</i>                                                         | 2                |                            |
| <i>feirza 1/20</i>                                                           | 2                |                            |
| <i>finzala</i>                                                               | 2                |                            |
| <i>galbriela</i>                                                             | 2                |                            |
| <i>hailey 1.5/30</i>                                                         | 2                |                            |
| <i>hailey 24 fe</i>                                                          | 2                |                            |
| <i>hailey fe 1/20</i>                                                        | 2                |                            |
| <i>heather TABS .35mg</i>                                                    | 2                |                            |
| <i>iclevia</i>                                                               | 2                |                            |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                           | <b>Drug Tier</b> | <b>Requirements/Limits</b> |
|----------------------------------------------------------------------------|------------------|----------------------------|
| <i>incassia</i> TABS .35mg                                                 | 2                |                            |
| <i>introvale</i>                                                           | 2                |                            |
| <i>isibloom</i>                                                            | 2                |                            |
| <i>jaimiess</i>                                                            | 2                |                            |
| <i>jasmiel</i>                                                             | 2                |                            |
| <i>jencycla</i> TABS .35mg                                                 | 2                |                            |
| <i>jolessa</i>                                                             | 2                |                            |
| <i>juleber</i>                                                             | 2                |                            |
| <i>junel</i> 1.5/30                                                        | 2                |                            |
| <i>junel</i> 1/20                                                          | 2                |                            |
| <i>junel fe</i> 1.5/30                                                     | 2                |                            |
| <i>junel fe</i> 1/20                                                       | 2                |                            |
| <i>junel fe</i> 24                                                         | 2                |                            |
| <i>kaitlib fe</i>                                                          | 2                |                            |
| <i>kariva</i>                                                              | 2                |                            |
| <i>kelnor</i> 1/35                                                         | 2                |                            |
| <i>kurvelo</i>                                                             | 2                |                            |
| <i>larin</i> 1.5/30                                                        | 2                |                            |
| <i>larin</i> 1/20                                                          | 2                |                            |
| <i>larin</i> 24 fe                                                         | 2                |                            |
| <i>larin fe</i> 1.5/30                                                     | 2                |                            |
| <i>larin fe</i> 1/20                                                       | 2                |                            |
| <i>lessina</i>                                                             | 2                |                            |
| <i>levonest</i>                                                            | 2                |                            |
| <i>levonor-eth est tab</i> 0.15-0.02/0.025/0.03 mg<br>&eth est 0.01 mg     | 2                |                            |
| <i>levonorg-eth est tab</i> 0.1-0.02mg(84) & eth est<br>tab 0.01mg(7)      | 2                |                            |
| <i>levonorgestrel &amp; ethinyl estradiol (91-day) tab</i><br>0.15-0.03 mg | 2                |                            |
| <i>levonorgestrel &amp; ethinyl estradiol tab</i> 0.1 mg-20<br>mcg         | 2                |                            |
| <i>levonorgestrel-eth estra tab</i> 0.05-30/0.075-<br>40/0.125-30mg-mcg    | 2                |                            |
| <i>levonorgestrel-ethinyl estradiol (continuous) tab</i><br>90-20 mcg      | 2                |                            |
| <i>levora</i> 0.15/30-28                                                   | 2                |                            |
| LILETTA IUD 20.1mcg/day                                                    | 3                | NM                         |
| <i>loestrin</i> 1.5/30-21                                                  | 2                |                            |
| <i>loestrin</i> 1/20-21                                                    | 2                |                            |
| <i>loestrin fe</i> 1.5/30                                                  | 2                |                            |
| <i>loestrin fe</i> 1/20                                                    | 2                |                            |
| <i>lojaimiess</i>                                                          | 2                |                            |
| <i>loryna</i>                                                              | 2                |                            |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                                   | <b>Drug Tier</b> | <b>Requirements/Limits</b> |
|------------------------------------------------------------------------------------|------------------|----------------------------|
| <i>low-ogestrel</i>                                                                | 2                |                            |
| <i>luizza 1.5/30</i>                                                               | 2                |                            |
| <i>luizza 1/20</i>                                                                 | 2                |                            |
| <i>luter</i>                                                                       | 2                |                            |
| <i>lyleq</i> TABS .35mg                                                            | 2                |                            |
| <i>lyza</i> TABS .35mg                                                             | 2                |                            |
| <i>marlissa</i>                                                                    | 2                |                            |
| <i>medroxyprogesterone acetate (contraceptive)</i><br>SUSP 150mg/ml; SUSY 150mg/ml | 3                |                            |
| <i>meleya</i> TABS .35mg                                                           | 2                |                            |
| <i>mibelas 24 fe</i>                                                               | 2                |                            |
| <i>microgestin 1.5/30</i>                                                          | 2                |                            |
| <i>microgestin 1/20</i>                                                            | 2                |                            |
| <i>microgestin fe 1.5/30</i>                                                       | 2                |                            |
| <i>microgestin fe 1/20</i>                                                         | 2                |                            |
| <i>mili</i>                                                                        | 2                |                            |
| <i>mono-lynyah</i>                                                                 | 2                |                            |
| <i>necon 0.5/35-28</i>                                                             | 2                |                            |
| NEXPLANON IMPL 68mg                                                                | 3                | NM                         |
| <i>nikki</i>                                                                       | 2                |                            |
| <i>nora-be</i> TABS .35mg                                                          | 2                |                            |
| <i>norelgestromin-ethinyl estradiol td ptwk 150-35</i><br>mcg/24hr                 | 3                |                            |
| <i>norethindrone (contraceptive)</i> TABS .35mg                                    | 2                |                            |
| <i>norethindrone ac-ethinyl estrad-fe tab 1-20/1-</i><br><i>30/1-35 mg-mcg</i>     | 2                |                            |
| <i>norethindrone ace &amp; ethinyl estradiol tab 1 mg-</i><br><i>20 mcg</i>        | 2                |                            |
| <i>norethindrone ace &amp; ethinyl estradiol tab 1.5</i><br><i>mg-30 mcg</i>       | 2                |                            |
| <i>norethindrone ace &amp; ethinyl estradiol-fe tab 1</i><br><i>mg-20 mcg</i>      | 2                |                            |
| <i>norethindrone ace-eth estradiol-fe chew tab 1</i><br><i>mg-20 mcg (24)</i>      | 2                |                            |
| <i>norgestimate &amp; ethinyl estradiol tab 0.25 mg-35</i><br><i>mcg</i>           | 2                |                            |
| <i>norgestimate-eth estrad tab 0.18-25/0.215-</i><br><i>25/0.25-25 mg-mcg</i>      | 2                |                            |
| <i>norgestimate-eth estrad tab 0.18-35/0.215-</i><br><i>35/0.25-35 mg-mcg</i>      | 2                |                            |
| <i>norlyroc</i> TABS .35mg                                                         | 2                |                            |
| <i>nortrel 0.5/35 (28)</i>                                                         | 2                |                            |
| <i>nortrel 1/35 (21)</i>                                                           | 2                |                            |
| <i>nortrel 1/35 (28)</i>                                                           | 2                |                            |
| <i>nortrel 7/7/7</i>                                                               | 2                |                            |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>           | <b>Drug Tier</b> | <b>Requirements/Limits</b> |
|----------------------------|------------------|----------------------------|
| <i>nylia 1/35</i>          | 2                |                            |
| <i>nylia 7/7/7</i>         | 2                |                            |
| <i>orquidea TABS .35mg</i> | 2                |                            |
| <i>philith</i>             | 2                |                            |
| <i>pimtrea</i>             | 2                |                            |
| <i>portia-28</i>           | 2                |                            |
| <i>reclipsen</i>           | 2                |                            |
| <i>rivelsa</i>             | 2                |                            |
| <i>rosyrah</i>             | 2                |                            |
| <i>setlakin</i>            | 2                |                            |
| <i>sharobel TABS .35mg</i> | 2                |                            |
| <i>simliya</i>             | 2                |                            |
| <i>simpesse</i>            | 2                |                            |
| <i>sprintec 28</i>         | 2                |                            |
| <i>sronyx</i>              | 2                |                            |
| <i>syeda</i>               | 2                |                            |
| <i>tarina 24 fe</i>        | 2                |                            |
| <i>tarina fe 1/20 eq</i>   | 2                |                            |
| <i>tilia fe</i>            | 2                |                            |
| <i>tri-estarylla</i>       | 2                |                            |
| <i>tri-legest fe</i>       | 2                |                            |
| <i>tri-linyah</i>          | 2                |                            |
| <i>tri-lo-estarylla</i>    | 2                |                            |
| <i>tri-lo-marzia</i>       | 2                |                            |
| <i>tri-lo-mili</i>         | 2                |                            |
| <i>tri-lo-sprintec</i>     | 2                |                            |
| <i>tri-mili</i>            | 2                |                            |
| <i>tri-sprintec</i>        | 2                |                            |
| <i>tri-vylibra</i>         | 2                |                            |
| <i>tri-vylibra lo</i>      | 2                |                            |
| <i>turqoz</i>              | 2                |                            |
| <i>tydemy</i>              | 2                |                            |
| <i>valtya 1/35</i>         | 2                |                            |
| <i>valtya 1/50</i>         | 2                |                            |
| <i>velivet</i>             | 2                |                            |
| <i>vestura</i>             | 2                |                            |
| <i>vienva</i>              | 2                |                            |
| <i>viorele</i>             | 2                |                            |
| <i>vyfemla</i>             | 2                |                            |
| <i>vylibra</i>             | 2                |                            |
| <i>wera</i>                | 2                |                            |
| <i>wymzya fe</i>           | 2                |                            |
| <i>xarah fe</i>            | 2                |                            |
| <i>xelria fe</i>           | 2                |                            |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                                                                                                                   | <b>Drug Tier</b> | <b>Requirements/Limits</b> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|----------------------------|
| <i>xulane</i>                                                                                                                                                      | 3                |                            |
| <i>zafemy</i>                                                                                                                                                      | 3                |                            |
| <i>zovia 1/35</i>                                                                                                                                                  | 2                |                            |
| <i>zumandimine</i>                                                                                                                                                 | 2                |                            |
| <b>ESTROGENS</b>                                                                                                                                                   |                  |                            |
| <i>abigale</i>                                                                                                                                                     | 3                |                            |
| <i>abigale lo</i>                                                                                                                                                  | 3                |                            |
| <i>dotti</i> PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr                                                                                     | 3                |                            |
| <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 | 3                |                            |
| <i>estradiol</i> TABS .5mg, 1mg, 2mg                                                                                                                               | 2                |                            |
| <i>estradiol &amp; norethindrone acetate tab 0.5-0.1 mg</i>                                                                                                        | 3                |                            |
| <i>estradiol &amp; norethindrone acetate tab 1-0.5 mg</i>                                                                                                          | 3                |                            |
| <i>estradiol vaginal</i> CREA .1mg/gm                                                                                                                              | 3                |                            |
| <i>estradiol vaginal</i> TABS 10mcg                                                                                                                                | 4                |                            |
| <i>estradiol valerate</i> OIL 10mg/ml, 20mg/ml, 40mg/ml                                                                                                            | 4                |                            |
| <i>fyavolv tab 0.5mg-2.5mcg</i>                                                                                                                                    | 3                |                            |
| <i>fyavolv tab 1mg-5mcg</i>                                                                                                                                        | 3                |                            |
| <i>jinteli</i>                                                                                                                                                     | 3                |                            |
| <i>lyllana</i> PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr                                                                                   | 3                |                            |
| <i>mimvey</i>                                                                                                                                                      | 3                |                            |
| <i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>                                                                                                  | 3                |                            |
| <i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>                                                                                                      | 3                |                            |
| <i>yuvaferm</i> TABS 10mcg                                                                                                                                         | 4                |                            |
| <b>GLUCOCORTICOIDS</b>                                                                                                                                             |                  |                            |
| <i>dexamethasone</i> ELIX .5mg/5ml; SOLN .5mg/5ml; TABS .5mg, .75mg, 1mg, 1.5mg, 2mg, 4mg, 6mg                                                                     | 3                |                            |
| DEXAMETHASONE INTENSOL CONC 1mg/ml                                                                                                                                 | 4                |                            |
| <i>dexamethasone sodium phosphate</i> SOLN 4mg/ml, 10mg/ml, 20mg/5ml, 100mg/10ml, 120mg/30ml; SOSY 4mg/ml, 10mg/ml                                                 | 3                |                            |
| <i>fludrocortisone acetate</i> TABS .1mg                                                                                                                           | 2                |                            |
| <i>hydrocortisone</i> TABS 5mg, 10mg, 20mg                                                                                                                         | 3                |                            |
| <i>hydrocortisone sod succinate</i> SOLR 100mg                                                                                                                     | 4                |                            |
| <i>methylprednisolone</i> TABS 4mg, 8mg, 16mg, 32mg                                                                                                                | 3                | B/D                        |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                                 | <b>Drug Tier</b> | <b>Requirements/Limits</b>       |
|----------------------------------------------------------------------------------|------------------|----------------------------------|
| <i>methylprednisolone</i> TBPK 4mg                                               | 2                |                                  |
| <i>methylprednisolone acetate</i> SUSP 40mg/ml, 80mg/ml                          | 3                | B/D                              |
| <i>methylprednisolone sod succ</i> SOLR 40mg, 125mg, 500mg, 1000mg               | 3                | B/D                              |
| <i>prednisolone</i> SOLN 15mg/5ml                                                | 2                | B/D                              |
| <i>prednisolone sodium phosphate</i> SOLN 5mg/5ml, 25mg/5ml                      | 4                | B/D                              |
| <i>prednisolone sodium phosphate</i> SOLN 15mg/5ml                               | 2                | B/D                              |
| <i>prednisone</i> SOLN 5mg/5ml                                                   | 4                | B/D                              |
| <i>prednisone</i> TABS 1mg, 2.5mg, 5mg, 10mg, 20mg, 50mg                         | 1                | B/D                              |
| <i>prednisone</i> TBPK 5mg, 10mg                                                 | 2                |                                  |
| PREDNISONE INTENSOL CONC 5mg/ml                                                  | 4                | B/D                              |
| SOLU-CORTEF SOLR 250mg, 500mg, 1000mg                                            | 4                |                                  |
| <b>GLUCOSE ELEVATING AGENTS</b>                                                  |                  |                                  |
| <i>diazoxide</i> SUSP 50mg/ml                                                    | 5                | NDS                              |
| ZEGALOGUE SOAJ .6mg/0.6ml; SOSY .6mg/0.6ml                                       | 3                |                                  |
| <b>MISCELLANEOUS</b>                                                             |                  |                                  |
| ALDURAZYME SOLN 2.9mg/5ml                                                        | 5                | NDS, NM, PA                      |
| <i>betaine powder for oral solution</i>                                          | 5                | NDS, NM                          |
| <i>cabergoline</i> TABS .5mg                                                     | 3                |                                  |
| <i>carglumic acid</i> TBSO 200mg                                                 | 5                | NDS, NM, PA                      |
| CERDELGA CAPS 84mg                                                               | 5                | NDS, NM, PA                      |
| CEREZYME SOLR 400unit                                                            | 5                | NDS, NM, PA                      |
| <i>cinacalcet hcl</i> TABS 30mg, 60mg                                            | 4                | B/D, QL (60 tabs / 30 days), NM  |
| <i>cinacalcet hcl</i> TABS 90mg                                                  | 4                | B/D, QL (120 tabs / 30 days), NM |
| CYSTAGON CAPS 50mg, 150mg                                                        | 4                | NM, PA                           |
| <i>desmopressin acetate</i> SOLN 4mcg/ml                                         | 5                | NDS                              |
| <i>desmopressin acetate</i> TABS .1mg, .2mg                                      | 3                |                                  |
| <i>desmopressin acetate spray</i> SOLN .01%                                      | 4                |                                  |
| <i>desmopressin acetate spray refrigerated</i> SOLN .01%                         | 4                |                                  |
| FABRAZYME SOLR 5mg, 35mg                                                         | 5                | NDS, NM, PA                      |
| GENOTROPIN CART 5mg, 12mg                                                        | 5                | NDS, NM, PA                      |
| GENOTROPIN MINIQUICK PRSY .2mg                                                   | 3                | NM, PA                           |
| GENOTROPIN MINIQUICK PRSY .4mg, .6mg, .8mg, 1mg, 1.2mg, 1.4mg, 1.6mg, 1.8mg, 2mg | 5                | NDS, NM, PA                      |
| INCRELEX SOLN 40mg/4ml                                                           | 5                | NDS, NM, PA                      |
| <i>javygtor</i> PACK 100mg, 500mg; TABS 100mg                                    | 5                | NDS, NM, PA                      |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                                        | <b>Drug Tier</b> | <b>Requirements/Limits</b>          |
|-----------------------------------------------------------------------------------------|------------------|-------------------------------------|
| <i>lanreotide acetate</i> SOLN 120mg/0.5ml                                              | 5                | NDS, NM, PA                         |
| <i>levocarnitine (metabolic modifiers)</i> SOLN 1gm/10ml; TABS 330mg                    | 4                | B/D                                 |
| LUMIZYME SOLR 50mg                                                                      | 5                | NDS, NM, PA                         |
| LUPRON DEPOT-PED (1-MONTH KIT 7.5mg, 11.25mg, 15mg)                                     | 5                | NDS, NM, PA                         |
| LUPRON DEPOT-PED (3-MONTH KIT 11.25mg, 30mg)                                            | 5                | NDS, NM, PA                         |
| LUPRON DEPOT-PED (6-MONTH KIT 45mg)                                                     | 5                | NDS, NM, PA                         |
| <i>mifepristone (hyperglycemia)</i> TABS 300mg                                          | 5                | NDS, NM, PA                         |
| NAGLAZYME SOLN 1mg/ml                                                                   | 5                | NDS, NM, PA                         |
| <i>nitisinone</i> CAPS 2mg, 5mg, 10mg, 20mg                                             | 5                | NDS, NM, PA                         |
| <i>octreotide acetate</i> SOLN 50mcg/ml, 100mcg/ml, 200mcg/ml; SOSY 50mcg/ml, 100mcg/ml | 4                | NM, PA                              |
| <i>octreotide acetate</i> SOLN 500mcg/ml, 1000mcg/ml; SOSY 500mcg/ml                    | 5                | NDS, NM, PA                         |
| <i>raloxifene hcl</i> TABS 60mg                                                         | 3                |                                     |
| REVCIVI SOLN 2.4mg/1.5ml                                                                | 5                | NDS, NM, PA                         |
| REZDIFFRA TABS 60mg, 80mg, 100mg                                                        | 5                | NDS, QL (30 tabs / 30 days), NM, PA |
| <i>sapropterin dihydrochloride</i> PACK 100mg, 500mg; TABS 100mg                        | 5                | NDS, NM, PA                         |
| SIGNIFOR SOLN .3mg/ml, .6mg/ml, .9mg/ml                                                 | 5                | NDS, NM, PA                         |
| <i>sodium phenylbutyrate</i> POWD 3gm/tsp; TABS 500mg                                   | 5                | NDS, NM, PA                         |
| SOMATULINE DEPOT SOLN 60mg/0.2ml, 90mg/0.3ml                                            | 5                | NDS, NM, PA                         |
| SOMAVERT SOLR 10mg, 15mg, 20mg, 25mg, 30mg                                              | 5                | NDS, NM, PA                         |
| SYNAREL SOLN 2mg/ml                                                                     | 5                | NDS, PA                             |
| <i>tolvaptan</i> TABS 15mg, 30mg                                                        | 5                | NDS, NM, PA; (generic of JYNARQUE)  |
| <i>tolvaptan</i> TBPK 15mg                                                              | 5                | NDS, NM, PA                         |
| <i>tolvaptan tab therapy pack 30 &amp; 15 mg</i>                                        | 5                | NDS, NM, PA                         |
| <i>tolvaptan tab therapy pack 45 &amp; 15 mg</i>                                        | 5                | NDS, NM, PA                         |
| <i>tolvaptan tab therapy pack 60 &amp; 30 mg</i>                                        | 5                | NDS, NM, PA                         |
| <i>tolvaptan tab therapy pack 90 &amp; 30 mg</i>                                        | 5                | NDS, NM, PA                         |
| <i>zelvysia</i> PACK 100mg, 500mg                                                       | 5                | NDS, NM, PA                         |
| <b>PROGESTINS</b>                                                                       |                  |                                     |
| <i>gallifrey</i> TABS 5mg                                                               | 3                |                                     |
| <i>medroxyprogesterone acetate</i> TABS 2.5mg, 5mg, 10mg                                | 1                |                                     |
| <i>megestrol acetate</i> SUSP 40mg/ml                                                   | 3                |                                     |
| <i>megestrol acetate (appetite)</i> SUSP 625mg/5ml                                      | 4                | PA                                  |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                                                                            | <b>Drug Tier</b> | <b>Requirements/Limits</b>                                                    |
|-----------------------------------------------------------------------------------------------------------------------------|------------------|-------------------------------------------------------------------------------|
| <i>norethindrone acetate</i> TABS 5mg                                                                                       | 3                |                                                                               |
| <i>progesterone</i> CAPS 100mg, 200mg                                                                                       | 3                |                                                                               |
| <b>THYROID AGENTS</b>                                                                                                       |                  |                                                                               |
| <i>levo-t</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg               | 1                |                                                                               |
| <i>levothyroxine sodium</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg | 1                |                                                                               |
| <i>levoxyl</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg                      | 1                |                                                                               |
| <i>liomny</i> TABS 5mcg, 25mcg, 50mcg                                                                                       | 3                |                                                                               |
| <i>liothyronine sodium</i> TABS 5mcg, 25mcg, 50mcg                                                                          | 3                |                                                                               |
| <i>methimazole</i> TABS 5mg, 10mg                                                                                           | 1                |                                                                               |
| <i>propylthiouracil</i> TABS 50mg                                                                                           | 3                |                                                                               |
| SYNTHROID TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg                   | 4                |                                                                               |
| <i>unithroid</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg            | 1                |                                                                               |
| <b>VITAMIN D ANALOGS</b>                                                                                                    |                  |                                                                               |
| <i>calcitriol</i> CAPS .25mcg, .5mcg                                                                                        | 2                | B/D                                                                           |
| <i>calcitriol (oral)</i> SOLN 1mcg/ml                                                                                       | 4                | B/D                                                                           |
| <i>doxercalciferol</i> CAPS .5mcg, 1mcg, 2.5mcg                                                                             | 4                | B/D                                                                           |
| <i>paricalcitol</i> CAPS 1mcg, 2mcg, 4mcg                                                                                   | 4                | B/D                                                                           |
| <b>GASTROINTESTINAL ANTIEMETICS</b>                                                                                         |                  |                                                                               |
| <i>aprepitant</i> CAPS 40mg, 80mg, 125mg                                                                                    | 4                | B/D                                                                           |
| <i>aprepitant capsule therapy pack 80 &amp; 125 mg</i>                                                                      | 4                | B/D                                                                           |
| <i>compro</i> SUPP 25mg                                                                                                     | 4                |                                                                               |
| <i>dronabinol</i> CAPS 2.5mg, 5mg, 10mg                                                                                     | 4                | B/D, QL (60 caps / 30 days)                                                   |
| <i>granisetron hcl</i> SOLN 1mg/ml, 4mg/4ml                                                                                 | 4                |                                                                               |
| <i>granisetron hcl</i> TABS 1mg                                                                                             | 4                | B/D                                                                           |
| <i>meclizine hcl</i> TABS 12.5mg, 25mg                                                                                      | 2                | PA; PA applies if 65 years and older after a 30 day supply in a calendar year |
| <i>metoclopramide hcl</i> SOLN 5mg/5ml, 5mg/ml                                                                              | 3                |                                                                               |
| <i>metoclopramide hcl</i> TABS 5mg, 10mg                                                                                    | 1                |                                                                               |
| <i>ondansetron</i> TBDP 4mg, 8mg                                                                                            | 3                | B/D                                                                           |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                                      | <b>Drug Tier</b> | <b>Requirements/Limits</b>                                                             |
|---------------------------------------------------------------------------------------|------------------|----------------------------------------------------------------------------------------|
| <i>ondansetron hcl</i> SOLN 4mg/2ml, 40mg/20ml;<br><i>SOSY</i> 4mg/2ml                | 3                |                                                                                        |
| <i>ondansetron hcl</i> SOLN 4mg/5ml                                                   | 4                | B/D                                                                                    |
| <i>ondansetron hcl</i> TABS 4mg, 8mg                                                  | 3                | B/D                                                                                    |
| <i>prochlorperazine</i> SUPP 25mg                                                     | 4                |                                                                                        |
| <i>prochlorperazine edisylate</i> SOLN 10mg/2ml                                       | 4                |                                                                                        |
| <i>prochlorperazine maleate</i> TABS 5mg, 10mg                                        | 2                |                                                                                        |
| <i>promethazine hcl</i> SOLN 6.25mg/5ml, 25mg/ml,<br>50mg/ml; TABS 12.5mg, 25mg, 50mg | 3                | PA; PA applies if 65<br>years and older after a<br>30 day supply in a<br>calendar year |
| <i>scopolamine</i> PT72 1mg/3days                                                     | 4                | QL (10 patches / 30<br>days)                                                           |
| <b>ANTISPASMODICS</b>                                                                 |                  |                                                                                        |
| <i>dicyclomine hcl</i> CAPS 10mg; TABS 20mg                                           | 3                | PA; PA applies if 65<br>years and older                                                |
| <i>dicyclomine hcl</i> SOLN 10mg/5ml                                                  | 4                | PA; PA applies if 65<br>years and older                                                |
| <i>glycopyrrolate</i> TABS 1mg                                                        | 3                | QL (90 tabs / 30 days)                                                                 |
| <i>glycopyrrolate</i> TABS 2mg                                                        | 3                | QL (120 tabs / 30 days)                                                                |
| <b>H2-RECEPTOR ANTAGONISTS</b>                                                        |                  |                                                                                        |
| <i>famotidine</i> SOLN 20mg/2ml, 40mg/4ml,<br>200mg/20ml                              | 3                |                                                                                        |
| <i>famotidine</i> SUSR 40mg/5ml                                                       | 4                |                                                                                        |
| <i>famotidine</i> TABS 20mg, 40mg                                                     | 1                |                                                                                        |
| <i>famotidine in nacl 0.9% iv soln 20 mg/50ml</i>                                     | 3                |                                                                                        |
| <i>nizatidine</i> CAPS 150mg, 300mg                                                   | 4                |                                                                                        |
| <b>INFLAMMATORY BOWEL DISEASE</b>                                                     |                  |                                                                                        |
| <i>balsalazide disodium</i> CAPS 750mg                                                | 3                |                                                                                        |
| <i>budesonide</i> CPEP 3mg                                                            | 4                | QL (90 caps / 30 days)                                                                 |
| <i>budesonide</i> TB24 9mg                                                            | 5                | NDS, QL (30 tabs / 30<br>days), PA                                                     |
| <i>hydrocortisone (intrarectal)</i> ENEM 100mg/60ml                                   | 4                |                                                                                        |
| <i>mesalamine</i> CP24 .375gm                                                         | 4                | QL (120 caps / 30 days)                                                                |
| <i>mesalamine</i> CPDR 400mg                                                          | 4                | QL (180 caps / 30 days)                                                                |
| <i>mesalamine</i> ENEM 4gm                                                            | 4                | QL (1680 mL / 28 days)                                                                 |
| <i>mesalamine</i> SUPP 1000mg                                                         | 4                | QL (30 suppositories /<br>30 days)                                                     |
| <i>mesalamine</i> TBEC 1.2gm                                                          | 4                | QL (120 tabs / 30 days)                                                                |
| <i>mesalamine w/ cleanser</i> KIT 4gm                                                 | 4                | QL (28 bottles / 28<br>days)                                                           |
| <i>sulfasalazine</i> TABS 500mg                                                       | 2                |                                                                                        |
| <i>sulfasalazine</i> TBEC 500mg                                                       | 3                |                                                                                        |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| Drug Name                                                           | Drug Tier | Requirements/Limits                 |
|---------------------------------------------------------------------|-----------|-------------------------------------|
| <b>LAXATIVES</b>                                                    |           |                                     |
| <i>constulose</i> SOLN 10gm/15ml                                    | 2         |                                     |
| <i>enulose</i> SOLN 10gm/15ml                                       | 2         |                                     |
| <i>gavilyte-c</i>                                                   | 2         |                                     |
| <i>gavilyte-g</i>                                                   | 2         |                                     |
| <i>gavilyte-n/flavor pack</i>                                       | 2         |                                     |
| <i>generlac</i> SOLN 10gm/15ml                                      | 2         |                                     |
| <i>lactulose</i> SOLN 10gm/15ml                                     | 2         |                                     |
| <i>lactulose (encephalopathy)</i> SOLN 10gm/15ml                    | 2         |                                     |
| <i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>       | 2         |                                     |
| <i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>                 | 2         |                                     |
| PLENVU SOL                                                          | 4         |                                     |
| <i>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml</i> | 3         |                                     |
| <b>MISCELLANEOUS</b>                                                |           |                                     |
| <i>alosetron hcl</i> TABS 1mg                                       | 5         | NDS, QL (60 tabs / 30 days), PA     |
| <i>alosetron hcl</i> TABS .5mg                                      | 4         | QL (60 tabs / 30 days), PA          |
| CREON CAP 3000UNIT                                                  | 3         |                                     |
| CREON CAP 6000UNIT                                                  | 3         |                                     |
| CREON CAP 12000UNIT                                                 | 3         |                                     |
| CREON CAP 24000UNIT                                                 | 3         |                                     |
| CREON CAP 36000UNIT                                                 | 3         |                                     |
| <i>cromolyn sodium (mastocytosis)</i> CONC 100mg/5ml                | 4         |                                     |
| <i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>                   | 4         |                                     |
| GATTEX KIT 5mg                                                      | 5         | NDS, NM, PA                         |
| LINZESS CAPS 72mcg, 145mcg, 290mcg                                  | 3         | QL (30 caps / 30 days)              |
| <i>loperamide hcl</i> CAPS 2mg                                      | 2         |                                     |
| <i>misoprostol</i> TABS 100mcg, 200mcg                              | 3         |                                     |
| MOVANTI <sup>K</sup> TABS 12.5mg, 25mg                              | 3         | QL (30 tabs / 30 days)              |
| RELISTOR SOLN 12mg/0.6ml                                            | 5         | NDS, QL (28 vials / 28 days), PA    |
| RELISTOR SOSY 8mg/0.4ml, 12mg/0.6ml                                 | 5         | NDS, QL (28 syringes / 28 days), PA |
| <i>sucralfate</i> TABS 1gm                                          | 3         |                                     |
| <i>ursodiol</i> CAPS 300mg                                          | 4         |                                     |
| <i>ursodiol</i> TABS 250mg, 500mg                                   | 3         |                                     |
| VOQUEZNA PAK DUAL PAK                                               | 3         | QL (2 kits / year), PA              |
| VOQUEZNA PAK TRIP PK                                                | 3         | QL (2 kits / year), PA              |
| VOWST CAP                                                           | 5         | NDS, QL (12 caps / 30 days), NM, PA |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>     | <b>Drug Tier</b> | <b>Requirements/Limits</b>          |
|----------------------|------------------|-------------------------------------|
| XERMELO TABS 250mg   | 5                | NDS, QL (84 tabs / 28 days), NM, PA |
| XIFAXAN TABS 550mg   | 5                | NDS, PA                             |
| ZENPEP CAP 3000UNIT  | 4                |                                     |
| ZENPEP CAP 5000UNIT  | 4                |                                     |
| ZENPEP CAP 10000UNIT | 4                |                                     |
| ZENPEP CAP 15000UNIT | 4                |                                     |
| ZENPEP CAP 20000UNIT | 4                |                                     |
| ZENPEP CAP 25000UNIT | 4                |                                     |
| ZENPEP CAP 40000UNIT | 4                |                                     |
| ZENPEP CAP 60000UNIT | 4                |                                     |

### **PROTON PUMP INHIBITORS**

|                                               |   |                            |
|-----------------------------------------------|---|----------------------------|
| <i>esomeprazole magnesium</i> CPDR 20mg, 40mg | 3 | QL (30 caps / 30 days), ST |
| <i>lansoprazole</i> CPDR 15mg, 30mg           | 3 | QL (60 caps / 30 days)     |
| <i>lansoprazole</i> TBDD 15mg, 30mg           | 4 | QL (60 tabs / 30 days), ST |
| <i>omeprazole</i> CPDR 10mg, 20mg, 40mg       | 1 |                            |
| <i>pantoprazole sodium</i> SOLR 40mg          | 4 |                            |
| <i>pantoprazole sodium</i> TBEC 20mg, 40mg    | 1 |                            |
| <i>rabeprazole sodium</i> TBEC 20mg           | 3 | QL (30 tabs / 30 days)     |

### **GENITOURINARY**

#### **BENIGN PROSTATIC HYPERPLASIA**

|                                                  |   |                            |
|--------------------------------------------------|---|----------------------------|
| <i>alfuzosin hcl</i> TB24 10mg                   | 2 | QL (30 tabs / 30 days)     |
| <i>dutasteride</i> CAPS .5mg                     | 3 | QL (30 caps / 30 days)     |
| <i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i> | 3 | QL (30 caps / 30 days)     |
| <i>finasteride</i> TABS 5mg                      | 1 | QL (30 tabs / 30 days)     |
| <i>silodosin</i> CAPS 4mg, 8mg                   | 3 | QL (30 caps / 30 days)     |
| <i>tadalafil</i> TABS 5mg                        | 3 | QL (30 tabs / 30 days), PA |
| <i>tamsulosin hcl</i> CAPS .4mg                  | 1 | QL (60 caps / 30 days)     |

#### **MISCELLANEOUS**

|                                                                  |   |  |
|------------------------------------------------------------------|---|--|
| <i>acetic acid</i> SOLN .25%                                     | 2 |  |
| <i>bethanechol chloride</i> TABS 5mg, 10mg, 25mg, 50mg           | 3 |  |
| <i>potassium citrate (alkalinizer)</i> TBCR 15meq, 540mg, 1080mg | 3 |  |

#### **URINARY ANTISPASMODICS**

|                                                  |   |                            |
|--------------------------------------------------|---|----------------------------|
| <i>darifenacin hydrobromide</i> TB24 7.5mg, 15mg | 4 | QL (30 tabs / 30 days), ST |
| <i>fesoterodine fumarate</i> TB24 4mg, 8mg       | 4 | QL (30 tabs / 30 days)     |
| GEMTESA TABS 75mg                                | 3 | QL (30 tabs / 30 days)     |
| MYRBETRIQ SRER 8mg/ml                            | 3 | QL (300 mL / 28 days)      |
| MYRBETRIQ TB24 25mg, 50mg                        | 3 | QL (30 tabs / 30 days)     |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                            | <b>Drug Tier</b> | <b>Requirements/Limits</b> |
|---------------------------------------------|------------------|----------------------------|
| <i>oxybutynin chloride</i> SOLN 5mg/5ml     | 3                | QL (600 mL / 30 days)      |
| <i>oxybutynin chloride</i> TABS 5mg         | 3                | QL (120 tabs / 30 days)    |
| <i>oxybutynin chloride</i> TB24 5mg         | 3                | QL (30 tabs / 30 days)     |
| <i>oxybutynin chloride</i> TB24 10mg, 15mg  | 3                | QL (60 tabs / 30 days)     |
| <i>solifenacin succinate</i> TABS 5mg, 10mg | 4                | QL (30 tabs / 30 days)     |
| <i>tolterodine tartrate</i> CP24 2mg, 4mg   | 4                | QL (30 caps / 30 days)     |
| <i>tolterodine tartrate</i> TABS 1mg, 2mg   | 4                | QL (60 tabs / 30 days)     |
| <i>tropium chloride</i> CP24 60mg           | 4                | QL (30 caps / 30 days)     |
| <i>tropium chloride</i> TABS 20mg           | 3                | QL (60 tabs / 30 days)     |

### **VAGINAL ANTI-INFECTIVES**

|                                                     |   |  |
|-----------------------------------------------------|---|--|
| <i>clindamycin phosphate vaginal</i> CREA 2%        | 3 |  |
| <i>metronidazole vaginal</i> GEL .75%               | 3 |  |
| <i>terconazole vaginal</i> CREA .4%, .8%; SUPP 80mg | 3 |  |

### **HEMATOLOGIC**

#### **ANTICOAGULANTS**

|                                                                                                                               |   |                         |
|-------------------------------------------------------------------------------------------------------------------------------|---|-------------------------|
| <i>dabigatran etexilate mesylate</i> CAPS 75mg, 150mg                                                                         | 3 | QL (60 caps / 30 days)  |
| <i>dabigatran etexilate mesylate</i> CAPS 110mg                                                                               | 3 | QL (120 caps / 30 days) |
| ELIQUIS CPSP .15mg                                                                                                            | 3 | QL (56 caps / 21 days)  |
| ELIQUIS TABS 2.5mg                                                                                                            | 3 | QL (60 tabs / 30 days)  |
| ELIQUIS TABS 5mg                                                                                                              | 3 | QL (74 tabs / 30 days)  |
| ELIQUIS TBSO .5mg                                                                                                             | 3 | QL (588 tabs / 29 days) |
| ELIQUIS (1.5MG PACK) 3 X TBSO .5mg                                                                                            | 3 | QL (591 tabs / 29 days) |
| ELIQUIS (2MG PACK) 4 X TBSO .5mg                                                                                              | 3 | QL (592 tabs / 30 days) |
| ELIQUIS STARTER PACK TBPB 5mg                                                                                                 | 3 | QL (74 tabs / 30 days)  |
| <i>enoxaparin sodium</i> SOLN 300mg/3ml; SOSY 30mg/0.3ml, 40mg/0.4ml, 60mg/0.6ml, 80mg/0.8ml, 100mg/ml, 120mg/0.8ml, 150mg/ml | 4 |                         |
| <i>fondaparinux sodium</i> SOLN 2.5mg/0.5ml                                                                                   | 4 |                         |
| <i>fondaparinux sodium</i> SOLN 5mg/0.4ml, 7.5mg/0.6ml, 10mg/0.8ml                                                            | 5 | NDS                     |
| HEP SOD/NAACL INJ 25000UNT                                                                                                    | 3 |                         |
| <i>heparin sodium (porcine)</i> SOLN 1000unit/ml, 5000unit/ml, 10000unit/ml, 20000unit/ml                                     | 3 | B/D                     |
| <i>jantoven</i> TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg                                                         | 1 |                         |
| <i>rivaroxaban</i> SUSR 1mg/ml                                                                                                | 3 | QL (620 mL / 30 days)   |
| <i>rivaroxaban</i> TABS 2.5mg                                                                                                 | 3 | QL (60 tabs / 30 days)  |
| <i>warfarin sodium</i> TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg                                                  | 1 |                         |
| XARELTO TABS 2.5mg                                                                                                            | 3 | QL (60 tabs / 30 days)  |
| XARELTO TABS 10mg, 15mg, 20mg                                                                                                 | 3 | QL (30 tabs / 30 days)  |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                 | <b>Drug Tier</b> | <b>Requirements/Limits</b>             |
|------------------------------------------------------------------|------------------|----------------------------------------|
| XARELTO STAR TAB 15/20MG                                         | 3                | QL (51 tabs / 30 days)                 |
| <b>HEMATOPOIETIC GROWTH FACTORS</b>                              |                  |                                        |
| FULPHILA SOSY 6mg/0.6ml                                          | 5                | NDS, QL (2 syringes / 28 days), NM, PA |
| PROCRIT SOLN 2000unit/ml, 3000unit/ml, 4000unit/ml, 10000unit/ml | 3                | NM, PA                                 |
| PROCRIT SOLN 20000unit/ml, 40000unit/ml                          | 5                | NDS, NM, PA                            |
| ZARXIO SOSY 300mcg/0.5ml, 480mcg/0.8ml                           | 5                | NDS, NM, PA                            |
| <b>MISCELLANEOUS</b>                                             |                  |                                        |
| ALVAIZ TABS 9mg, 54mg                                            | 5                | NDS, QL (60 tabs / 30 days), NM, PA    |
| ALVAIZ TABS 18mg, 36mg                                           | 5                | NDS, QL (90 tabs / 30 days), NM, PA    |
| <i>anagrelide hcl</i> CAPS .5mg, 1mg                             | 4                |                                        |
| BERINERT KIT 500unit                                             | 5                | NDS, QL (24 boxes / 30 days), NM, PA   |
| <i>cilostazol</i> TABS 50mg, 100mg                               | 2                |                                        |
| DOPTelet TABS 20mg                                               | 5                | NDS, NM, PA                            |
| DOPTelet SPRINKLE CPSP 10mg                                      | 5                | NDS, NM, PA                            |
| DROXIA CAPS 200mg, 300mg, 400mg                                  | 4                |                                        |
| HAEGARDA SOLR 2000unit                                           | 5                | NDS, QL (30 vials / 30 days), NM, PA   |
| HAEGARDA SOLR 3000unit                                           | 5                | NDS, QL (20 vials / 30 days), NM, PA   |
| <i>icatibant acetate</i> SOSY 30mg/3ml                           | 5                | NDS, QL (9 syringes / 30 days), NM, PA |
| <i>l-glutamine (sickle cell)</i> PACK 5gm                        | 5                | NDS, NM, PA                            |
| <i>pentoxifylline</i> TBCR 400mg                                 | 2                |                                        |
| <i>sajazir</i> SOSY 30mg/3ml                                     | 5                | NDS, QL (9 syringes / 30 days), NM, PA |
| SIKLOS TABS 100mg                                                | 4                |                                        |
| SIKLOS TABS 1000mg                                               | 5                | NDS                                    |
| TAVNEOS CAPS 10mg                                                | 5                | NDS, QL (180 caps / 30 days), NM, PA   |
| <i>tranexamic acid</i> SOLN 1000mg/10ml                          | 4                |                                        |
| <i>tranexamic acid</i> TABS 650mg                                | 3                |                                        |
| <b>PLATELET AGGREGATION INHIBITORS</b>                           |                  |                                        |
| <i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>                | 4                |                                        |
| <i>clopidogrel bisulfate</i> TABS 75mg                           | 1                |                                        |
| <i>dipyridamole</i> TABS 25mg, 50mg, 75mg                        | 3                | PA; PA applies if 65 years and older   |
| <i>prasugrel hcl</i> TABS 5mg, 10mg                              | 3                |                                        |
| <i>ticagrelor</i> TABS 60mg, 90mg                                | 3                |                                        |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                              | <b>Drug Tier</b> | <b>Requirements/Limits</b>                  |
|-----------------------------------------------|------------------|---------------------------------------------|
| <b>IMMUNOLOGIC AGENTS</b>                     |                  |                                             |
| <b>AUTOIMMUNE AGENTS</b>                      |                  |                                             |
| ADALIMUMAB-BWWD SOAJ 40mg/0.4ml               | 5                | NDS, QL (6 autoinjectors / 28 days), NM, PA |
| ADALIMUMAB-BWWD SOSY 40mg/0.4ml               | 5                | NDS, QL (6 syringes / 28 days), NM, PA      |
| BIMZELX SOAJ 160mg/ml, 320mg/2ml              | 5                | NDS, QL (2 pens / 28 days), NM, PA          |
| BIMZELX SOSY 160mg/ml, 320mg/2ml              | 5                | NDS, QL (2 syringes / 28 days), NM, PA      |
| DUPIXENT SOAJ 200mg/1.14ml, 300mg/2ml         | 5                | NDS, QL (4 pens / 28 days), NM, PA          |
| DUPIXENT SOSY 200mg/1.14ml, 300mg/2ml         | 5                | NDS, QL (4 syringes / 28 days), NM, PA      |
| ENBREL SOLN 25mg/0.5ml                        | 5                | NDS, QL (16 vials / 28 days), NM, PA        |
| ENBREL SOSY 25mg/0.5ml                        | 5                | NDS, QL (16 syringes / 28 days), NM, PA     |
| ENBREL SOSY 50mg/ml                           | 5                | NDS, QL (8 syringes / 28 days), NM, PA      |
| ENBREL MINI SOCT 50mg/ml                      | 5                | NDS, QL (8 cartridges / 28 days), NM, PA    |
| ENBREL SURECLICK SOAJ 50mg/ml                 | 5                | NDS, QL (8 pens / 28 days), NM, PA          |
| HADLIMA SOSY 40mg/0.4ml, 40mg/0.8ml           | 5                | NDS, QL (6 syringes / 28 days), NM, PA      |
| HADLIMA PUSHTOUCH SOAJ 40mg/0.4ml, 40mg/0.8ml | 5                | NDS, QL (6 autoinjectors / 28 days), NM, PA |
| HUMIRA PSKT 10mg/0.1ml                        | 5                | NDS, QL (2 syringes / 28 days), NM, PA      |
| HUMIRA PSKT 20mg/0.2ml                        | 5                | NDS, QL (4 syringes / 28 days), NM, PA      |
| HUMIRA PSKT 40mg/0.4ml, 40mg/0.8ml            | 5                | NDS, QL (6 syringes / 28 days), NM, PA      |
| HUMIRA PEN AJKT 40mg/0.4ml, 40mg/0.8ml        | 5                | NDS, QL (6 pens / 28 days), NM, PA          |
| HUMIRA PEN AJKT 80mg/0.8ml                    | 5                | NDS, QL (4 pens / 28 days), NM, PA          |
| HUMIRA PEN KIT PS/UV                          | 5                | NDS, QL (3 pens / 28 days), NM, PA          |
| HUMIRA PEN-CD/UC/HS START AJKT 80mg/0.8ml     | 5                | NDS, QL (3 pens / 28 days), NM, PA          |
| INFLIXIMAB SOLR 100mg                         | 5                | NDS, NM, PA                                 |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                         | <b>Drug Tier</b> | <b>Requirements/Limits</b>              |
|------------------------------------------|------------------|-----------------------------------------|
| KINERET SOSY 100mg/0.67ml                | 5                | NDS, QL (28 syringes / 28 days), NM, PA |
| PYZCHIVA SOAJ 45mg/0.5ml                 | 3                | QL (1 pen / 28 days), NM, PA            |
| PYZCHIVA SOAJ 90mg/ml                    | 5                | NDS, QL (1 pen / 28 days), NM, PA       |
| PYZCHIVA SOLN 45mg/0.5ml                 | 3                | QL (1 vial / 28 days), NM, PA           |
| PYZCHIVA SOLN 130mg/26ml                 | 5                | NDS, NM, PA                             |
| PYZCHIVA SOSY 45mg/0.5ml                 | 3                | QL (1 syringe / 28 days), NM, PA        |
| PYZCHIVA SOSY 90mg/ml                    | 5                | NDS, QL (1 syringe / 28 days), NM, PA   |
| REMICADE SOLR 100mg                      | 5                | NDS, NM, PA                             |
| RENFLEXIS SOLR 100mg                     | 5                | NDS, NM, PA                             |
| RINVOQ TB24 15mg, 30mg                   | 5                | NDS, QL (30 tabs / 30 days), NM, PA     |
| RINVOQ TB24 45mg                         | 5                | NDS, QL (168 tabs / year), NM, PA       |
| RINVOQ LQ SOLN 1mg/ml                    | 5                | NDS, QL (360 mL / 30 days), NM, PA      |
| SKYRIZI SOCT 180mg/1.2ml, 360mg/2.4ml    | 5                | NDS, QL (1 cartridge / 56 days), NM, PA |
| SKYRIZI SOLN 600mg/10ml                  | 5                | NDS, NM, PA                             |
| SKYRIZI SOSY 150mg/ml                    | 5                | NDS, QL (6 syringes / 365 days), NM, PA |
| SKYRIZI PEN SOAJ 150mg/ml                | 5                | NDS, QL (6 pens / 365 days), NM, PA     |
| SOTYKTU TABS 6mg                         | 5                | NDS, QL (30 tabs / 30 days), NM, PA     |
| STELARA SOLN 45mg/0.5ml                  | 5                | NDS, QL (1 vial / 28 days), NM, PA      |
| STELARA SOLN 130mg/26ml                  | 5                | NDS, NM, PA                             |
| STELARA SOSY 45mg/0.5ml, 90mg/ml         | 5                | NDS, QL (1 syringe / 28 days), NM, PA   |
| TREMFYA SOAJ 200mg/2ml                   | 5                | NDS, QL (2 pens / 28 days), NM, PA      |
| TREMFYA SOLN 200mg/20ml                  | 5                | NDS, NM, PA                             |
| TREMFYA SOPN 100mg/ml                    | 5                | NDS, QL (1 pen / 28 days), NM, PA       |
| TREMFYA SOSY 100mg/ml                    | 5                | NDS, QL (1 syringe / 28 days), NM, PA   |
| TREMFYA SOSY 200mg/2ml                   | 5                | NDS, QL (2 syringes / 28 days), NM, PA  |
| TREMFYA INDUCTION PACK FO SOAJ 200mg/2ml | 5                | NDS, QL (2 pens / 28 days), NM, PA      |

**You can find information on what the symbols and abbreviations in this table mean by going to Section C1.**

| <b>Drug Name</b>                                                                         | <b>Drug Tier</b> | <b>Requirements/Limits</b>             |
|------------------------------------------------------------------------------------------|------------------|----------------------------------------|
| TREMFYA PEN SOAJ 100mg/ml                                                                | 5                | NDS, QL (1 pen / 28 days), NM, PA      |
| TYENNE SOAJ 162mg/0.9ml                                                                  | 5                | NDS, QL (4 pens / 28 days), NM, PA     |
| TYENNE SOLN 80mg/4ml, 200mg/10ml, 400mg/20ml                                             | 5                | NDS, NM, PA                            |
| TYENNE SOSY 162mg/0.9ml                                                                  | 5                | NDS, QL (4 syringes / 28 days), NM, PA |
| USTEKINUMAB SOLN 45mg/0.5ml                                                              | 5                | NDS, QL (1 vial / 28 days), NM, PA     |
| USTEKINUMAB SOLN 130mg/26ml                                                              | 5                | NDS, NM, PA                            |
| USTEKINUMAB SOSY 45mg/0.5ml, 90mg/ml                                                     | 5                | NDS, QL (1 syringe / 28 days), NM, PA  |
| VELSIPITY TABS 2mg                                                                       | 5                | NDS, QL (30 tabs / 30 days), NM, PA    |
| XELJANZ SOLN 1mg/ml                                                                      | 5                | NDS, QL (480 mL / 24 days), NM, PA     |
| XELJANZ TABS 5mg, 10mg                                                                   | 5                | NDS, QL (60 tabs / 30 days), NM, PA    |
| XELJANZ XR TB24 11mg, 22mg                                                               | 5                | NDS, QL (30 tabs / 30 days), NM, PA    |
| YESINTEK SOLN 45mg/0.5ml                                                                 | 3                | QL (1 vial / 28 days), NM, PA          |
| YESINTEK SOLN 130mg/26ml                                                                 | 3                | NM, PA                                 |
| YESINTEK SOSY 45mg/0.5ml                                                                 | 3                | QL (1 syringe / 28 days), NM, PA       |
| YESINTEK SOSY 90mg/ml                                                                    | 5                | NDS, QL (1 syringe / 28 days), NM, PA  |
| <b><i>DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDS)</i></b>                            |                  |                                        |
| <i>hydroxychloroquine sulfate</i> TABS 200mg                                             | 3                |                                        |
| JYLAMVO SOLN 2mg/ml                                                                      | 4                | B/D                                    |
| <i>leflunomide</i> TABS 10mg, 20mg                                                       | 3                | QL (30 tabs / 30 days)                 |
| <i>methotrexate sodium</i> TABS 2.5mg                                                    | 3                |                                        |
| XATMEP SOLN 2.5mg/ml                                                                     | 4                | B/D                                    |
| <b><i>IMMUNOGLOBULINS</i></b>                                                            |                  |                                        |
| ALYGLO SOLN 5gm/50ml, 10gm/100ml, 20gm/200ml                                             | 5                | NDS, NM, PA                            |
| BIVIGAM SOLN 5gm/50ml, 10%                                                               | 5                | NDS, NM, PA                            |
| FLEBOGAMMA DIF SOLN 5gm/100ml, 10gm/200ml, 20gm/400ml                                    | 5                | NDS, NM, PA                            |
| GAMASTAN INJ                                                                             | 4                | B/D, NM                                |
| GAMMAGARD LIQUID SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 30gm/300ml | 5                | NDS, NM, PA                            |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                                                                 | <b>Drug Tier</b> | <b>Requirements/Limits</b>             |
|------------------------------------------------------------------------------------------------------------------|------------------|----------------------------------------|
| GAMMAGARD LIQUID ERC SOLN 5gm/50ml, 10gm/100ml                                                                   | 5                | NDS, NM, PA                            |
| GAMMAGARD S/D IGA LESS TH SOLR 5gm, 10gm                                                                         | 5                | NDS, NM, PA                            |
| GAMMAKED SOLN 1gm/10ml, 5gm/50ml, 10gm/100ml, 20gm/200ml                                                         | 5                | NDS, NM, PA                            |
| GAMMAPLEX SOLN 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 20gm/400ml                               | 5                | NDS, NM, PA                            |
| GAMUNEX-C SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 40gm/400ml                                | 5                | NDS, NM, PA                            |
| OCTAGAM SOLN 1gm/20ml, 2gm/20ml, 2.5gm/50ml, 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 30gm/300ml | 5                | NDS, NM, PA                            |
| PANZYGA SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 30gm/300ml                                  | 5                | NDS, NM, PA                            |
| PRIVIGEN SOLN 5gm/50ml, 10gm/100ml, 20gm/200ml, 40gm/400ml                                                       | 5                | NDS, NM, PA                            |
| <b>IMMUNOMODULATORS</b>                                                                                          |                  |                                        |
| ACTIMMUNE SOLN 100mcg/0.5ml                                                                                      | 5                | NDS, NM, PA                            |
| ARCALYST SOLR 220mg                                                                                              | 5                | NDS, NM, PA                            |
| <b>IMMUNOSUPPRESSANTS</b>                                                                                        |                  |                                        |
| ASTAGRAF XL CP24 5mg                                                                                             | 5                | NDS, B/D                               |
| ASTAGRAF XL CP24 .5mg, 1mg                                                                                       | 4                | B/D                                    |
| <i>azathioprine</i> TABS 50mg                                                                                    | 3                | B/D                                    |
| BENLYSTA SOAJ 200mg/ml                                                                                           | 5                | NDS, QL (8 pens / 28 days), NM, PA     |
| BENLYSTA SOLR 120mg, 400mg                                                                                       | 5                | NDS, NM, PA                            |
| BENLYSTA SOSY 200mg/ml                                                                                           | 5                | NDS, QL (8 syringes / 28 days), NM, PA |
| <i>cyclosporine</i> CAPS 25mg, 100mg                                                                             | 4                | B/D                                    |
| <i>cyclosporine modified (for microemulsion)</i> CAPS 25mg, 50mg, 100mg; SOLN 100mg/ml                           | 4                | B/D                                    |
| <i>everolimus (immunosuppressant)</i> TABS .5mg, .75mg, 1mg                                                      | 5                | NDS, B/D                               |
| <i>everolimus (immunosuppressant)</i> TABS .25mg                                                                 | 4                | B/D                                    |
| <i>engraf</i> CAPS 25mg, 100mg                                                                                   | 4                | B/D                                    |
| <i>mycophenolate mofetil</i> CAPS 250mg; TABS 500mg                                                              | 3                | B/D                                    |
| <i>mycophenolate mofetil</i> SUSR 200mg/ml                                                                       | 5                | NDS, B/D                               |
| <i>mycophenolate sodium</i> TBEC 180mg, 360mg                                                                    | 4                | B/D                                    |
| NULOJIX SOLR 250mg                                                                                               | 5                | NDS, B/D                               |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                   | <b>Drug Tier</b> | <b>Requirements/Limits</b>          |
|----------------------------------------------------|------------------|-------------------------------------|
| PROGRAF PACK .2mg, 1mg                             | 4                | B/D                                 |
| REZUROCK TABS 200mg                                | 5                | NDS, QL (30 tabs / 30 days), NM, PA |
| <i>sirolimus</i> SOLN 1mg/ml; TABS .5mg, 1mg, 2mg  | 4                | B/D                                 |
| <i>tacrolimus</i> CAPS .5mg, 1mg, 5mg              | 4                | B/D                                 |
| <b>VACCINES</b>                                    |                  |                                     |
| ABRYSCO SOLR 120mcg/0.5ml                          | 1                | PA                                  |
| ACTHIB INJ                                         | 1                |                                     |
| ADACEL INJ                                         | 1                |                                     |
| AREXVY SUSR 120mcg/0.5ml                           | 1                | PA                                  |
| BCG VACCINE SOLR 50mg                              | 1                |                                     |
| BEXSERO SUSY .5ml                                  | 1                |                                     |
| BOOSTRIX INJ                                       | 1                |                                     |
| DAPTACEL INJ                                       | 1                |                                     |
| DENGXVAXIA SUS                                     | 1                |                                     |
| ENGRIX-B SUSP 20mcg/ml; SUSY 10mcg/0.5ml, 20mcg/ml | 1                | B/D                                 |
| GARDASIL 9 SUSP .5ml; SUSY .5ml                    | 1                |                                     |
| HAVRIX SUSY 720elu/0.5ml, 1440unit/ml              | 1                |                                     |
| HEPLISAV-B SOSY 20mcg/0.5ml                        | 1                | B/D                                 |
| HIBERIX SOLR 10mcg                                 | 1                |                                     |
| IMOVAX RABIES (H.D.C.V.) SUSR 2.5unit/ml           | 1                | B/D                                 |
| INFANRIX INJ                                       | 1                |                                     |
| IPOL INJ INACTIVE                                  | 1                |                                     |
| IXIARO INJ                                         | 1                |                                     |
| JYNNEOS SUSP .5ml                                  | 1                | B/D                                 |
| KINRIX INJ                                         | 1                |                                     |
| M-M-R II INJ                                       | 1                |                                     |
| MENQUADFI SOLN .5ml                                | 1                |                                     |
| MENVEO INJ                                         | 1                |                                     |
| MENVEO SOL                                         | 1                |                                     |
| MRESVIA SUSY 50mcg/0.5ml                           | 1                | PA                                  |
| PEDIARIX INJ 0.5ML                                 | 1                |                                     |
| PEDVAX HIB SUSP 7.5mcg/0.5ml                       | 1                |                                     |
| PENBRAYA INJ                                       | 1                |                                     |
| PENMENVY INJ                                       | 1                |                                     |
| PENTACEL INJ                                       | 1                |                                     |
| PRIORIX INJ                                        | 1                |                                     |
| PROQUAD INJ                                        | 1                |                                     |
| QUADRACEL INJ 0.5ML                                | 1                |                                     |
| RABAVERT INJ                                       | 1                | B/D                                 |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                             | <b>Drug Tier</b> | <b>Requirements/Limits</b>   |
|------------------------------------------------------------------------------|------------------|------------------------------|
| RECOMBIVAX HB SUSP 5mcg/0.5ml, 10mcg/ml, 40mcg/ml; SUSY 5mcg/0.5ml, 10mcg/ml | 1                | B/D                          |
| ROTARIX SUS                                                                  | 1                |                              |
| ROTATEQ SOL                                                                  | 1                |                              |
| SHINGRIX SUSR 50mcg/0.5ml                                                    | 1                | QL (2 vials per lifetime)    |
| SHINGRIX SUSY 50mcg/0.5ml                                                    | 1                | QL (2 syringes per lifetime) |
| TENIVAC INJ 5-2LF                                                            | 1                | B/D                          |
| TICOVAC SUSY 1.2mcg/0.25ml, 2.4mcg/0.5ml                                     | 1                |                              |
| TRUMENBA SUSY .5ml                                                           | 1                |                              |
| TWINRIX INJ                                                                  | 1                |                              |
| TYPHIM VI SOLN 25mcg/0.5ml; SOSY 25mcg/0.5ml                                 | 1                |                              |
| VAQTA SUSP 25unit/0.5ml, 50unit/ml; SUSY 25unit/0.5ml, 50unit/ml             | 1                |                              |
| VARIVAX SUSR 1350pfu/0.5ml                                                   | 1                |                              |
| VAXCHORA SUS                                                                 | 1                |                              |
| VIMKUNYA SUSY 40mcg/0.8ml                                                    | 1                |                              |
| VIVOTIF CAP EC                                                               | 1                |                              |
| YF-VAX INJ                                                                   | 1                |                              |

## **NUTRITIONAL/SUPPLEMENTS**

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

|                                                                  |   |  |
|------------------------------------------------------------------|---|--|
| D2.5W/NACL INJ 0.45%                                             | 4 |  |
| D5W/NACL INJ 0.2%                                                | 3 |  |
| D5W/NACL INJ 0.45%                                               | 3 |  |
| D10W/NACL INJ 0.2%                                               | 3 |  |
| D10W/NACL INJ 0.45%                                              | 3 |  |
| <i>dextrose 2.5% w/ sodium chloride 0.45%</i>                    | 3 |  |
| <i>dextrose 5% in lactated ringers</i>                           | 3 |  |
| <i>dextrose 5% w/ sodium chloride 0.3%</i>                       | 3 |  |
| <i>dextrose 5% w/ sodium chloride 0.9%</i>                       | 3 |  |
| <i>dextrose 5% w/ sodium chloride 0.45%</i>                      | 3 |  |
| <i>dextrose 5% w/ sodium chloride 0.225%</i>                     | 3 |  |
| ISOLYTE-P INJ /D5W                                               | 4 |  |
| ISOLYTE-S INJ PH 7.4                                             | 4 |  |
| <i>kcl 10 meq/l (0.075%) in dextrose 5% &amp; nacl 0.45% inj</i> | 3 |  |
| <i>kcl 20 meq/l (0.15%) in dextrose 5% &amp; nacl 0.9% inj</i>   | 3 |  |
| <i>kcl 20 meq/l (0.15%) in dextrose 5% &amp; nacl 0.45% inj</i>  | 3 |  |
| <i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>                     | 3 |  |
| <i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i>                    | 3 |  |

**You can find information on what the symbols and abbreviations in this table mean by going to Section C1.**

| <b>Drug Name</b>                                                                                      | <b>Drug Tier</b> | <b>Requirements/Limits</b> |
|-------------------------------------------------------------------------------------------------------|------------------|----------------------------|
| <i>kcl 20 meq/l (0.149%) in nacl 0.9% inj</i>                                                         | 3                |                            |
| <i>kcl 20 meq/l (0.149%) in nacl 0.45% inj</i>                                                        | 3                |                            |
| <i>kcl 30 meq/l (0.224%) in dextrose 5% &amp; nacl 0.45% inj</i>                                      | 3                |                            |
| <i>kcl 40 meq/l (0.3%) in dextrose 5% &amp; nacl 0.9% inj</i>                                         | 3                |                            |
| <i>kcl 40 meq/l (0.3%) in dextrose 5% &amp; nacl 0.45% inj</i>                                        | 3                |                            |
| <i>kcl 40 meq/l (0.3%) in nacl 0.9% inj</i>                                                           | 3                |                            |
| <i>kcl 40 meq/l (0.298%) in nacl 0.9% inj</i>                                                         | 3                |                            |
| KCL/D5W/NACL INJ 0.3/0.9%                                                                             | 4                |                            |
| KCL/D5W/NACL INJ 0.15/0.2                                                                             | 3                |                            |
| LACTATED RIN INJ                                                                                      | 4                |                            |
| <i>lactated ringer's solution</i>                                                                     | 3                |                            |
| <i>magnesium sulfate SOLN 2gm/50ml, 3gm/100ml, 4gm/100ml, 4gm/50ml, 20gm/500ml, 40gm/1000ml, 50%</i>  | 3                |                            |
| <i>MAGNESIUM SULFATE SOLN 2gm/50ml, 4gm/100ml, 4gm/50ml, 20gm/500ml, 40gm/1000ml</i>                  | 3                |                            |
| <i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i>                                            | 3                |                            |
| <i>multiple electrolytes ph 5.5</i>                                                                   | 4                |                            |
| POT CHL 20MEQ/L IN NACL 0.9% INJ                                                                      | 4                |                            |
| POT CHL 20MEQ/L IN NACL 0.45% INJ                                                                     | 4                |                            |
| POT CHL 40MEQ/L IN NACL 0.9% INJ                                                                      | 4                |                            |
| <i>potassium chloride SOLN 2meq/ml, 10meq/100ml, 10meq/50ml, 20meq/100ml, 20meq/50ml, 40meq/100ml</i> | 3                |                            |
| <i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i>                                         | 3                |                            |
| <i>sodium chloride SOLN .45%, .9%, 2.5meq/ml, 3%, 5%</i>                                              | 3                |                            |
| TPN ELECTROL INJ                                                                                      | 4                | B/D                        |
| <b><i>ELECTROLYTES/MINERALS/VITAMINS, ORAL</i></b>                                                    |                  |                            |
| <i>klor-con PACK 20meq</i>                                                                            | 4                |                            |
| KLOR-CON 8 TBCR 8meq                                                                                  | 2                |                            |
| <i>klor-con 10 TBCR 10meq</i>                                                                         | 2                |                            |
| KLOR-CON 10 TBCR 10meq                                                                                | 2                |                            |
| <i>klor-con m10 TBCR 10meq</i>                                                                        | 2                |                            |
| <i>klor-con m15 TBCR 15meq</i>                                                                        | 2                |                            |
| <i>klor-con m20 TBCR 20meq</i>                                                                        | 2                |                            |
| M-NATAL PLUS TAB                                                                                      | 3                |                            |
| <i>potassium chloride CPCR 8meq, 10meq; TBCR 8meq, 10meq, 20meq</i>                                   | 2                |                            |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                              | <b>Drug Tier</b> | <b>Requirements/Limits</b> |
|-------------------------------------------------------------------------------|------------------|----------------------------|
| <i>potassium chloride</i> PACK 20meq; SOLN 10%, 20%                           | 4                |                            |
| <i>potassium chloride microencapsulated crystals</i> TBCR 10meq, 15meq, 20meq | 2                |                            |
| PRENATAL TAB 27-1MG                                                           | 3                |                            |
| PRENATAL TAB PLUS                                                             | 3                |                            |
| <i>sodium fluoride chew; tab; 1.1 (0.5 f) mg/ml soln</i>                      | 2                |                            |
| WESTAB PLUS TAB 27-1MG                                                        | 3                |                            |
| <b>IV NUTRITION</b>                                                           |                  |                            |
| <i>aminosyn ii soln 15%</i>                                                   | 4                | B/D                        |
| AMINOSYN INJ 10%                                                              | 4                | B/D                        |
| AMINOSYN-PF INJ 10%                                                           | 4                | B/D                        |
| CLINIMIX INJ 4.25/D5W                                                         | 4                | B/D                        |
| CLINIMIX INJ 4.25/D10                                                         | 4                | B/D                        |
| CLINIMIX INJ 5%/D15W                                                          | 4                | B/D                        |
| CLINIMIX INJ 5%/D20W                                                          | 4                | B/D                        |
| CLINIMIX INJ 6/5                                                              | 4                | B/D                        |
| CLINIMIX INJ 8/10                                                             | 4                | B/D                        |
| CLINIMIX INJ 8/14                                                             | 4                | B/D                        |
| <i>clinisol sf 15%</i>                                                        | 4                | B/D                        |
| CLINOLIPID EMU 20%                                                            | 4                | B/D                        |
| <i>dextrose</i> SOLN 5%, 10%                                                  | 3                |                            |
| <i>dextrose</i> SOLN 50%                                                      | 3                | B/D                        |
| DEXTROSE 10% SOLN 10%                                                         | 3                |                            |
| DEXTROSE 70% SOLN 70%                                                         | 3                | B/D                        |
| INTRALIPID EMUL 20gm/100ml, 30gm/100ml                                        | 4                | B/D                        |
| NUTRILIPID EMUL 20gm/100ml                                                    | 4                | B/D                        |
| <i>plenamine</i>                                                              | 4                | B/D                        |
| PREMASOL SOL 10%                                                              | 5                | NDS, B/D                   |
| PROSOL INJ 20%                                                                | 4                | B/D                        |
| TRAVASOL INJ 10%                                                              | 4                | B/D                        |
| TROPHAMINE INJ 10%                                                            | 4                | B/D                        |
| <b>OPHTHALMIC</b>                                                             |                  |                            |
| <b>ANTI-INFECTIVE/ANTI-INFLAMMATORY</b>                                       |                  |                            |
| <i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>                         | 3                |                            |
| <i>loteprednol etabonate-tobramycin ophth susp 0.5-0.3%</i>                   | 3                |                            |
| <i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>                       | 2                |                            |
| <i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>                       | 2                |                            |
| <i>neomycin-polymyxin-hc ophth susp</i>                                       | 4                |                            |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                    | <b>Drug Tier</b> | <b>Requirements/Limits</b> |
|---------------------------------------------------------------------|------------------|----------------------------|
| <i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>  | 2                |                            |
| TOBRADEX OIN 0.3-0.1%                                               | 3                |                            |
| <i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>                 | 3                |                            |
| ZYLET SUS 0.5-0.3%                                                  | 3                |                            |
| <b>ANTI-INFECTIVES</b>                                              |                  |                            |
| <i>bacitracin (ophthalmic) OINT 500unit/gm</i>                      | 3                |                            |
| <i>bacitracin-polymyxin b ophth oint</i>                            | 2                |                            |
| <i>besifloxacin hcl SUSP .6%</i>                                    | 3                |                            |
| BESIVANCE SUSP .6%                                                  | 3                |                            |
| CILOXAN OINT .3%                                                    | 3                |                            |
| <i>ciprofloxacin hcl (ophth) SOLN .3%</i>                           | 2                |                            |
| <i>erythromycin (ophth) OINT 5mg/gm</i>                             | 2                |                            |
| <i>gatifloxacin (ophth) SOLN .5%</i>                                | 3                |                            |
| <i>gentamicin sulfate (ophth) SOLN .3%</i>                          | 2                |                            |
| <i>moxifloxacin hcl (ophth) SOLN .5%</i>                            | 3                | QL (12 mL / 30 days)       |
| NATACYN SUSP 5%                                                     | 4                |                            |
| <i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i> | 3                |                            |
| <i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i> | 3                |                            |
| <i>ofloxacin (ophth) SOLN .3%</i>                                   | 2                |                            |
| <i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>       | 1                |                            |
| <i>sulfacetamide sodium (ophth) SOLN 10%</i>                        | 3                |                            |
| <i>tobramycin (ophth) SOLN .3%</i>                                  | 1                |                            |
| trifluridine SOLN 1%                                                | 4                |                            |
| XDEMY SOLN .25%                                                     | 5                | NDS, NM, PA                |
| ZIRGAN GEL .15%                                                     | 4                |                            |
| <b>ANTI-INFLAMMATORIES</b>                                          |                  |                            |
| <i>dexamethasone sodium phosphate (ophth) SOLN .1%</i>              | 3                |                            |
| <i>diclofenac sodium (ophth) SOLN .1%</i>                           | 2                |                            |
| <i>difluprednate EMUL .05%</i>                                      | 4                |                            |
| <i>fluorometholone (ophth) SUSP .1%</i>                             | 3                |                            |
| <i>flurbiprofen sodium SOLN .03%</i>                                | 3                |                            |
| <i>ketorolac tromethamine (ophth) SOLN .4%</i>                      | 3                |                            |
| <i>ketorolac tromethamine (ophth) SOLN .5%</i>                      | 2                |                            |
| LOTEMAX OINT .5%                                                    | 3                |                            |
| <i>prednisolone acetate (ophth) SUSP 1%</i>                         | 3                |                            |
| PREDNISOLONE SODIUM PHOSP SOLN 1%                                   | 3                |                            |
| <b>ANTIALLERGICS</b>                                                |                  |                            |
| <i>azelastine hcl (ophth) SOLN .05%</i>                             | 2                |                            |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                         | <b>Drug Tier</b> | <b>Requirements/Limits</b> |
|----------------------------------------------------------|------------------|----------------------------|
| <i>cromolyn sodium (ophth)</i> SOLN 4%                   | 2                |                            |
| ZERVIAE SOLN .24%                                        | 4                |                            |
| <b>ANTIGLAUCOMA</b>                                      |                  |                            |
| <i>betaxolol hcl (ophth)</i> SOLN .5%                    | 3                |                            |
| <i>brimonidine tartrate</i> SOLN .2%                     | 1                |                            |
| <i>brinzolamide</i> SUSP 1%                              | 4                | ST                         |
| <i>carteolol hcl (ophth)</i> SOLN 1%                     | 2                |                            |
| COMBIGAN SOL 0.2/0.5%                                    | 3                |                            |
| <i>dorzolamide hcl</i> SOLN 2%                           | 2                |                            |
| <i>dorzolamide hcl-timolol maleate ophth soln</i> 2-0.5% | 2                |                            |
| <i>latanoprost</i> SOLN .005%                            | 1                |                            |
| <i>levobunolol hcl</i> SOLN .5%                          | 2                |                            |
| LUMIGAN SOLN .01%                                        | 3                |                            |
| <i>pilocarpine hcl</i> SOLN 1%, 2%, 4%                   | 3                |                            |
| RHOPRESSA SOLN .02%                                      | 4                |                            |
| ROCKLATAN DRO                                            | 4                |                            |
| SIMBRINZA SUS 1-0.2%                                     | 4                |                            |
| <i>timolol maleate (ophth)</i> SOLG .25%, .5%            | 3                |                            |
| <i>timolol maleate (ophth)</i> SOLN .25%, .5%            | 1                |                            |
| <i>travoprost</i> SOLN .004%                             | 4                |                            |
| VYZULTA SOLN .024%                                       | 4                |                            |
| <b>MISCELLANEOUS</b>                                     |                  |                            |
| ATROPINE SULFATE SOLN 1%                                 | 3                |                            |
| <i>atropine sulfate (ophthalmic)</i> SOLN 1%             | 3                |                            |
| CYSTADROPS SOLN .37%                                     | 5                | NDS, NM, PA                |
| CYSTARAN SOLN .44%                                       | 5                | NDS, NM, PA                |
| EYSUVIS SUSP .25%                                        | 4                |                            |
| MIEBO SOLN 1.338gm/ml                                    | 3                |                            |
| <i>proparacaine hcl</i> SOLN .5%                         | 3                |                            |
| RESTASIS EMUL .05%                                       | 3                |                            |
| RESTASIS MULTIDOSE EMUL .05%                             | 3                |                            |
| XIIDRA SOLN 5%                                           | 3                |                            |
| <b>OTIC</b>                                              |                  |                            |
| <b>OTIC AGENTS</b>                                       |                  |                            |
| <i>acetic acid (otic)</i> SOLN 2%                        | 3                |                            |
| <i>ciprofloxacin-dexamethasone otic susp</i> 0.3-0.1%    | 4                |                            |
| <i>flac</i> OIL .01%                                     | 3                |                            |
| <i>fluocinolone acetonide (otic)</i> OIL .01%            | 3                |                            |
| <i>hydrocortisone w/ acetic acid otic soln</i> 1-2%      | 4                |                            |
| <i>neomycin-polymyxin-hc otic soln</i> 1%                | 3                |                            |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                  | <b>Drug Tier</b> | <b>Requirements/Limits</b>                                                    |
|-------------------------------------------------------------------|------------------|-------------------------------------------------------------------------------|
| <i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i> | 3                |                                                                               |
| <i>ofloxacin (otic) SOLN .3%</i>                                  | 4                |                                                                               |
| <b>RESPIRATORY</b>                                                |                  |                                                                               |
| <b>ANTICHOLINERGIC/BETA AGONIST COMBINATIONS</b>                  |                  |                                                                               |
| ANORO ELLIPT AER 62.5-25                                          | 3                | QL (60 blisters / 30 days)                                                    |
| BEVESPI AER 9-4.8MCG                                              | 3                | QL (1 inhaler / 30 days)                                                      |
| BREZTRI AERO AER SPHERE                                           | 3                | QL (1 inhaler / 30 days)                                                      |
| BREZTRI AERO AER SPHERE (INSTITUTIONAL PACK)                      | 3                | QL (4 inhalers / 28 days)                                                     |
| COMBIVENT AER 20-100                                              | 4                | QL (2 inhalers / 30 days)                                                     |
| <i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>          | 3                | B/D                                                                           |
| TRELEGY AER ELLIPTA 100-62.5-25 MCG                               | 3                | QL (60 blisters / 30 days)                                                    |
| TRELEGY AER ELLIPTA 200-62.5-25 MCG                               | 3                | QL (60 blisters / 30 days)                                                    |
| <b>ANTICHOLINERGICS</b>                                           |                  |                                                                               |
| ATROVENT HFA AERS 17mcg/act                                       | 4                | QL (2 inhalers / 30 days)                                                     |
| INCRUSE ELLIPTA AEPB 62.5mcg/inh                                  | 3                | QL (30 blisters / 30 days)                                                    |
| <i>ipratropium bromide SOLN .02%</i>                              | 2                | B/D                                                                           |
| <i>ipratropium bromide (nasal) SOLN .03%, .06%</i>                | 3                |                                                                               |
| SPIRIVA RESPIMAT AERS 1.25mcg/act                                 | 4                | QL (1 inhaler / 30 days)                                                      |
| <b>ANTI-HISTAMINES</b>                                            |                  |                                                                               |
| <i>azelastine hcl SOLN .1%</i>                                    | 2                |                                                                               |
| <i>cetirizine hcl SOLN 5mg/5ml</i>                                | 2                | QL (300 mL / 30 days)                                                         |
| <i>ciproheptadine hcl SYRP 2mg/5ml; TABS 4mg</i>                  | 3                | PA; PA applies if 65 years and older after a 30 day supply in a calendar year |
| <i>desloratadine TABS 5mg</i>                                     | 3                | QL (30 tabs / 30 days)                                                        |
| <i>diphenhydramine hcl SOLN 50mg/ml</i>                           | 3                |                                                                               |
| <i>hydroxyzine hcl SOLN 25mg/ml, 50mg/ml</i>                      | 4                | PA; PA applies if 65 years and older                                          |
| <i>hydroxyzine hcl SYRP 10mg/5ml; TABS 10mg, 25mg, 50mg</i>       | 3                | PA; PA applies if 65 years and older after a 30 day supply in a calendar year |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                            | <b>Drug Tier</b> | <b>Requirements/Limits</b>                                                    |
|-----------------------------------------------------------------------------|------------------|-------------------------------------------------------------------------------|
| <i>hydroxyzine pamoate</i> CAPS 25mg, 50mg                                  | 3                | PA; PA applies if 65 years and older after a 30 day supply in a calendar year |
| <i>levocetirizine dihydrochloride</i> SOLN 2.5mg/5ml                        | 4                | QL (300 mL / 30 days)                                                         |
| <i>levocetirizine dihydrochloride</i> TABS 5mg                              | 2                | QL (30 tabs / 30 days)                                                        |
| <i>olopatadine hcl (nasal)</i> SOLN .6%                                     | 4                |                                                                               |
| <b>BETA AGONISTS</b>                                                        |                  |                                                                               |
| <i>albuterol sulfate</i> AERS 108mcg/act                                    | 3                | QL (2 inhalers / 30 days); (generic of Proair HFA)                            |
| <i>albuterol sulfate</i> AERS 108mcg/act                                    | 3                | QL (2 inhalers / 30 days); (generic of Proventil HFA)                         |
| <i>albuterol sulfate</i> AERS 108mcg/act                                    | 3                | QL (2 inhalers / 30 days); (generic of Ventolin HFA)                          |
| <i>albuterol sulfate</i> NEBU .63mg/3ml, 1.25mg/3ml, 2.5mg/0.5ml            | 3                | B/D                                                                           |
| <i>albuterol sulfate</i> NEBU .083%                                         | 2                | B/D                                                                           |
| <i>albuterol sulfate</i> SYRP 2mg/5ml                                       | 3                |                                                                               |
| <i>albuterol sulfate</i> TABS 2mg, 4mg                                      | 4                |                                                                               |
| <i>arformoterol tartrate</i> NEBU 15mcg/2ml                                 | 4                | B/D                                                                           |
| <i>formoterol fumarate</i> NEBU 20mcg/2ml                                   | 4                | B/D                                                                           |
| <i>levalbuterol hcl</i> NEBU .31mg/3ml, .63mg/3ml, 1.25mg/0.5ml, 1.25mg/3ml | 4                | B/D                                                                           |
| <i>levalbuterol tartrate</i> AERO 45mcg/act                                 | 3                | QL (2 inhalers / 30 days), ST                                                 |
| SEREVENT DISKUS AEPB 50mcg/dose                                             | 3                | QL (60 inhalations / 30 days)                                                 |
| <i>terbutaline sulfate</i> TABS 2.5mg, 5mg                                  | 4                |                                                                               |
| VENTOLIN HFA AERS 108mcg/act                                                | 3                | QL (2 inhalers / 30 days)                                                     |
| VENTOLIN HFA (INSTITUTIONAL PACK) AERS 108mcg/act                           | 3                | QL (6 inhalers / 30 days)                                                     |
| <b>LEUKOTRIENE MODULATORS</b>                                               |                  |                                                                               |
| <i>montelukast sodium</i> CHEW 4mg, 5mg                                     | 2                |                                                                               |
| <i>montelukast sodium</i> PACK 4mg                                          | 4                |                                                                               |
| <i>montelukast sodium</i> TABS 10mg                                         | 1                |                                                                               |
| <i>zafirlukast</i> TABS 10mg, 20mg                                          | 3                |                                                                               |
| <b>MISCELLANEOUS</b>                                                        |                  |                                                                               |
| <i>acetylcysteine</i> SOLN 10%, 20%                                         | 4                | B/D                                                                           |
| ALYFTREK TAB 4-20-50                                                        | 5                | NDS, QL (84 tabs / 28 days), NM, PA                                           |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                                    | <b>Drug Tier</b> | <b>Requirements/Limits</b>             |
|-------------------------------------------------------------------------------------|------------------|----------------------------------------|
| ALYFTREK TAB 10-50-125                                                              | 5                | NDS, QL (56 tabs / 28 days), NM, PA    |
| ARALAST NP SOLR 500mg, 1000mg                                                       | 5                | NDS, NM, PA                            |
| <i>cromolyn sodium</i> NEBU 20mg/2ml                                                | 3                | B/D                                    |
| <i>epinephrine (anaphylaxis)</i> SOAJ .15mg/0.3ml, .3mg/0.3ml                       | 3                | (generic of EpiPen)                    |
| <i>epinephrine (anaphylaxis)</i> SOAJ .15mg/0.15ml, .3mg/0.3ml                      | 3                | (generic of Adrenaclick)               |
| FASENRA SOSY 10mg/0.5ml, 30mg/ml                                                    | 5                | NDS, QL (1 syringe / 28 days), NM, PA  |
| FASENRA PEN SOAJ 30mg/ml                                                            | 5                | NDS, QL (1 pen / 28 days), NM, PA      |
| KALYDECO PACK 5.8mg, 13.4mg, 25mg, 50mg, 75mg                                       | 5                | NDS, QL (56 packets / 28 days), NM, PA |
| KALYDECO TABS 150mg                                                                 | 5                | NDS, QL (60 tabs / 30 days), NM, PA    |
| OFEV CAPS 100mg, 150mg                                                              | 5                | NDS, QL (60 caps / 30 days), NM, PA    |
| ORKAMBI GRA 75-94MG                                                                 | 5                | NDS, QL (56 packets / 28 days), NM, PA |
| ORKAMBI GRA 100-125                                                                 | 5                | NDS, QL (56 packets / 28 days), NM, PA |
| ORKAMBI GRA 150-188                                                                 | 5                | NDS, QL (56 packets / 28 days), NM, PA |
| ORKAMBI TAB 100-125                                                                 | 5                | NDS, QL (112 tabs / 28 days), NM, PA   |
| ORKAMBI TAB 200-125                                                                 | 5                | NDS, QL (112 tabs / 28 days), NM, PA   |
| <i>pirfenidone</i> CAPS 267mg                                                       | 5                | NDS, QL (270 caps / 30 days), NM, PA   |
| <i>pirfenidone</i> TABS 267mg                                                       | 5                | NDS, QL (270 tabs / 30 days), NM, PA   |
| <i>pirfenidone</i> TABS 534mg, 801mg                                                | 5                | NDS, QL (90 tabs / 30 days), NM, PA    |
| PROLASTIN-C SOLN 1000mg/20ml                                                        | 5                | NDS, NM, PA                            |
| PULMOZYME SOLN 2.5mg/2.5ml                                                          | 5                | NDS, NM, PA                            |
| <i>roflumilast</i> TABS 250mcg                                                      | 4                | QL (56 tabs / year)                    |
| <i>roflumilast</i> TABS 500mcg                                                      | 4                | QL (30 tabs / 30 days)                 |
| SYMDEKO TAB 50-75MG                                                                 | 5                | NDS, QL (56 tabs / 28 days), NM, PA    |
| SYMDEKO TAB 100-150                                                                 | 5                | NDS, QL (56 tabs / 28 days), NM, PA    |
| <i>theophylline</i> ELIX 80mg/15ml; SOLN 80mg/15ml; TB12 100mg, 200mg, 300mg, 450mg | 4                |                                        |
| <i>theophylline</i> TB24 400mg, 600mg                                               | 3                |                                        |

**You can find information on what the symbols and abbreviations in this table mean by going to Section C1.**

| <b>Drug Name</b>                                        | <b>Drug Tier</b> | <b>Requirements/Limits</b>             |
|---------------------------------------------------------|------------------|----------------------------------------|
| TRIKAFTA PAK 59.5MG                                     | 5                | NDS, QL (56 packs / 28 days), NM, PA   |
| TRIKAFTA PAK 75MG                                       | 5                | NDS, QL (56 packs / 28 days), NM, PA   |
| TRIKAFTA TAB 50-25-37.5MG & 75MG                        | 5                | NDS, QL (84 tabs / 28 days), NM, PA    |
| TRIKAFTA TAB 100-50-75MG & 150MG                        | 5                | NDS, QL (84 tabs / 28 days), NM, PA    |
| XOLAIR SOAJ 75mg/0.5ml, 300mg/2ml                       | 5                | NDS, QL (4 pens / 28 days), NM, PA     |
| XOLAIR SOAJ 150mg/ml                                    | 5                | NDS, QL (8 pens / 28 days), NM, PA     |
| XOLAIR SOLR 150mg                                       | 5                | NDS, QL (8 vials / 28 days), NM, PA    |
| XOLAIR SOSY 75mg/0.5ml, 300mg/2ml                       | 5                | NDS, QL (4 syringes / 28 days), NM, PA |
| XOLAIR SOSY 150mg/ml                                    | 5                | NDS, QL (8 syringes / 28 days), NM, PA |
| ZEMAIRA SOLR 1000mg, 4000mg, 5000mg                     | 5                | NDS, NM, PA                            |
| <b>NASAL STEROIDS</b>                                   |                  |                                        |
| <i>flunisolide (nasal)</i> SOLN .025%                   | 3                | QL (3 bottles / 30 days)               |
| <i>fluticasone propionate (nasal)</i> SUSP 50mcg/act    | 2                | QL (1 bottle / 30 days)                |
| <i>mometasone furoate (nasal)</i> SUSP 50mcg/act        | 4                | QL (2 bottles / 30 days)               |
| XHANCE EXHU 93mcg/act                                   | 4                | QL (32 mL / 30 days), PA               |
| <b>STEROID INHALANTS</b>                                |                  |                                        |
| ALVESCO AERS 80mcg/act                                  | 4                | QL (3 inhalers / 30 days)              |
| ALVESCO AERS 160mcg/act                                 | 4                | QL (2 inhalers / 30 days)              |
| ARNUITY ELLIPTA AEPB 50mcg/act, 100mcg/act, 200mcg/act  | 3                | QL (30 inhalations / 30 days)          |
| <i>budesonide (inhalation)</i> SUSP .25mg/2ml, .5mg/2ml | 4                | B/D                                    |
| <b>STEROID/BETA-AGONIST COMBINATIONS</b>                |                  |                                        |
| ADVAIR HFA AER 45/21                                    | 3                | QL (1 inhaler / 30 days)               |
| ADVAIR HFA AER 115/21                                   | 3                | QL (1 inhaler / 30 days)               |
| ADVAIR HFA AER 230/21                                   | 3                | QL (1 inhaler / 30 days)               |
| AIRSUPRA AER 90-80MCG                                   | 3                | QL (3 inhalers / 30 days)              |
| BREO ELLIPTA INH 50-25MCG                               | 3                | QL (60 blisters / 30 days)             |
| BREO ELLIPTA INH 100-25                                 | 3                | QL (60 blisters / 30 days)             |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                    | <b>Drug Tier</b> | <b>Requirements/Limits</b>                                  |
|---------------------------------------------------------------------|------------------|-------------------------------------------------------------|
| BREO ELLIPTA INH 200-25                                             | 3                | QL (60 blisters / 30 days)                                  |
| <i>breyana</i>                                                      | 3                | QL (3 inhalers / 30 days)                                   |
| <i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i>  | 3                | QL (3 inhalers / 30 days)                                   |
| <i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</i> | 3                | QL (3 inhalers / 30 days)                                   |
| DULERA AER 50-5MCG                                                  | 4                | QL (3 inhalers / 30 days)                                   |
| DULERA AER 100-5MCG                                                 | 4                | QL (3 inhalers / 30 days)                                   |
| DULERA AER 200-5MCG                                                 | 4                | QL (3 inhalers / 30 days)                                   |
| <i>fluticasone-salmeterol aer powder ba 100-50 mcg/act</i>          | 3                | QL (60 inhalations / 30 days); (generic PRASCO not covered) |
| <i>fluticasone-salmeterol aer powder ba 250-50 mcg/act</i>          | 3                | QL (60 inhalations / 30 days); (generic PRASCO not covered) |
| <i>fluticasone-salmeterol aer powder ba 500-50 mcg/act</i>          | 3                | QL (60 inhalations / 30 days); (generic PRASCO not covered) |
| <i>wixela inhub</i>                                                 | 3                | QL (60 inhalations / 30 days)                               |

## **TOPICAL**

### **DERMATOLOGY, ACNE**

|                                                                    |   |                            |
|--------------------------------------------------------------------|---|----------------------------|
| <i>accutane</i> CAPS 10mg, 20mg, 30mg, 40mg                        | 4 | PA                         |
| <i>amnestem</i> CAPS 10mg, 20mg, 30mg, 40mg                        | 4 | PA                         |
| <i>benzoyl peroxide-erythromycin gel 5-3%</i>                      | 4 | QL (46.6 gm / 30 days)     |
| <i>claravis</i> CAPS 10mg, 20mg, 30mg, 40mg                        | 4 | PA                         |
| <i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i> | 3 | QL (45 gm / 30 days)       |
| <i>clindamycin phosphate (topical) GEL 1%</i>                      | 3 | QL (75 mL / 30 days), PA   |
| <i>clindamycin phosphate (topical) LOTN 1%; SOLN 1%</i>            | 3 | QL (60 mL / 30 days)       |
| <i>ery</i> PADS 2%                                                 | 3 | QL (60 pledgets / 30 days) |
| <i>erythromycin (acne aid) GEL 2%</i>                              | 3 | QL (60 gm / 30 days)       |
| <i>erythromycin (acne aid) SOLN 2%</i>                             | 3 | QL (60 mL / 30 days)       |
| <i>isotretinoin</i> CAPS 10mg, 20mg, 30mg, 40mg                    | 4 | PA                         |
| <i>neuac</i>                                                       | 3 | QL (45 gm / 30 days)       |
| <i>sulfacetamide sodium (acne) LOTN 10%</i>                        | 4 | QL (118 mL / 30 days)      |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                                 | <b>Drug Tier</b> | <b>Requirements/Limits</b>     |
|------------------------------------------------------------------|------------------|--------------------------------|
| <i>tretinoin</i> CREA .025%, .05%, .1%; GEL .01%, .025%          | 4                | QL (45 gm / 30 days), PA       |
| <i>twice-daily clindamycin phosphate (topical)</i> GEL 1%        | 3                | QL (60 gm / 30 days)           |
| <i>zenatane</i> CAPS 10mg, 20mg, 30mg, 40mg                      | 4                | PA                             |
| <b>DERMATOLOGY, ANTIBIOTICS</b>                                  |                  |                                |
| <i>gentamicin sulfate (topical)</i> CREA .1%; OINT .1%           | 3                | QL (30 gm / 30 days)           |
| <i>mupirocin</i> OINT 2%                                         | 2                | QL (220 gm / 30 days)          |
| <i>silver sulfadiazine</i> CREA 1%                               | 2                |                                |
| <i>ssd</i> CREA 1%                                               | 2                |                                |
| <i>SULFAMYLON</i> CREA 85mg/gm                                   | 4                | QL (453.6 gm / 30 days)        |
| <b>DERMATOLOGY, ANTIFUNGALS</b>                                  |                  |                                |
| <i>ciclopirox</i> GEL .77%                                       | 3                | QL (100 gm / 30 days)          |
| <i>ciclopirox</i> SHAM 1%                                        | 3                | QL (120 mL / 30 days)          |
| <i>ciclopirox olamine</i> CREA .77%                              | 3                | QL (90 gm / 30 days)           |
| <i>ciclopirox olamine</i> SUSP .77%                              | 3                | QL (60 mL / 30 days)           |
| <i>clotrimazole (topical)</i> CREA 1%                            | 2                | QL (45 gm / 30 days)           |
| <i>clotrimazole (topical)</i> SOLN 1%                            | 3                | QL (60 mL / 30 days)           |
| <i>clotrimazole w/ betamethasone cream 1-0.05%</i>               | 3                | QL (45 gm / 30 days)           |
| <i>econazole nitrate</i> CREA 1%                                 | 3                | QL (85 gm / 30 days)           |
| <i>ketoconazole (topical)</i> CREA 2%                            | 3                | QL (60 gm / 30 days)           |
| <i>ketoconazole (topical)</i> SHAM 2%                            | 2                | QL (120 mL / 30 days)          |
| <i>klayesta</i> POWD 100000unit/gm                               | 3                | QL (60 gm / 30 days)           |
| <i>nyamyc</i> POWD 100000unit/gm                                 | 3                | QL (60 gm / 30 days)           |
| <i>nystatin (topical)</i> CREA 100000unit/gm; OINT 100000unit/gm | 2                | QL (30 gm / 30 days)           |
| <i>nystatin (topical)</i> POWD 100000unit/gm                     | 3                | QL (60 gm / 30 days)           |
| <i>nystop</i> POWD 100000unit/gm                                 | 3                | QL (60 gm / 30 days)           |
| <i>selenium sulfide</i> LOTN 2.5%                                | 2                |                                |
| <b>DERMATOLOGY, ANTIPSORIATICS</b>                               |                  |                                |
| <i>acitretin</i> CAPS 10mg, 17.5mg, 25mg                         | 4                | PA                             |
| <i>calcipotriene</i> CREA .005%; OINT .005%                      | 4                | QL (120 gm / 30 days), PA      |
| <i>calcipotriene</i> SOLN .005%                                  | 3                | QL (120 mL / 30 days), PA      |
| <i>calcitrene</i> OINT .005%                                     | 4                | QL (120 gm / 30 days), PA      |
| <i>ENSTILAR AER</i>                                              | 5                | NDS, QL (120 gm / 30 days), PA |
| <i>methoxsalen rapid</i> CAPS 10mg                               | 5                | NDS                            |
| <i>tazarotene</i> CREA .05%, .1%                                 | 3                | QL (60 gm / 30 days), PA       |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| Drug Name                                                       | Drug Tier | Requirements/Limits      |
|-----------------------------------------------------------------|-----------|--------------------------|
| <b>DERMATOLOGY, CORTICOSTEROIDS</b>                             |           |                          |
| <i>ala-cort</i> CREA 1%                                         | 1         |                          |
| <i>alclometasone dipropionate</i> CREA .05%; OINT .05%          | 3         | QL (60 gm / 30 days)     |
| <i>betamethasone dipropionate (topical)</i> CREA .05%           | 3         | QL (120 gm / 30 days)    |
| <i>betamethasone dipropionate (topical)</i> LOTN .05%           | 3         | QL (120 mL / 30 days)    |
| <i>betamethasone dipropionate (topical)</i> OINT .05%           | 4         | QL (120 gm / 30 days)    |
| <i>betamethasone dipropionate augmented</i> CREA .05%           | 2         | QL (120 gm / 30 days)    |
| <i>betamethasone dipropionate augmented</i> GEL .05%; OINT .05% | 4         | QL (120 gm / 30 days)    |
| <i>betamethasone dipropionate augmented</i> LOTN .05%           | 4         | QL (120 mL / 30 days)    |
| <i>betamethasone valerate</i> CREA .1%; OINT .1%                | 3         | QL (120 gm / 30 days)    |
| <i>betamethasone valerate</i> LOTN .1%                          | 3         | QL (120 mL / 30 days)    |
| <i>clobetasol propionate</i> CREA .05%; GEL .05%; OINT .05%     | 4         | QL (120 gm / 30 days)    |
| <i>clobetasol propionate</i> SHAM .05%                          | 4         | QL (236 mL / 30 days)    |
| <i>clobetasol propionate</i> SOLN .05%                          | 4         | QL (100 mL / 30 days)    |
| <i>clobetasol propionate e</i> CREA .05%                        | 4         | QL (120 gm / 30 days)    |
| <i>clodan</i> SHAM .05%                                         | 4         | QL (236 mL / 30 days)    |
| <i>fluocinolone acetonide</i> CREA .01%                         | 4         | QL (60 gm / 30 days)     |
| <i>fluocinolone acetonide</i> CREA .025%                        | 4         | QL (120 gm / 30 days)    |
| <i>fluocinolone acetonide</i> OIL .01%                          | 3         | QL (118.28 mL / 30 days) |
| <i>fluocinolone acetonide</i> OINT .025%                        | 3         | QL (120 gm / 30 days)    |
| <i>fluocinolone acetonide</i> SOLN .01%                         | 4         | QL (60 mL / 30 days)     |
| <i>fluocinonide</i> CREA .05%, .1%                              | 3         | QL (120 gm / 30 days)    |
| <i>fluocinonide</i> GEL .05%; OINT .05%                         | 4         | QL (60 gm / 30 days)     |
| <i>fluocinonide</i> SOLN .05%                                   | 3         | QL (60 mL / 30 days)     |
| <i>fluocinonide emulsified base</i> CREA .05%                   | 4         | QL (120 gm / 30 days)    |
| <i>fluticasone propionate</i> CREA .05%; OINT .005%             | 3         |                          |
| <i>halobetasol propionate</i> CREA .05%; OINT .05%              | 4         | QL (50 gm / 30 days)     |
| <i>hydrocortisone (topical)</i> CREA 1%                         | 1         |                          |
| <i>hydrocortisone (topical)</i> CREA 2.5%; LOTN 2.5%; OINT 2.5% | 2         |                          |
| <i>hydrocortisone (topical)</i> OINT 1%                         | 2         | QL (30 gm / 30 days)     |
| <i>hydrocortisone valerate</i> CREA .2%                         | 3         | QL (60 gm / 30 days)     |
| <i>mometasone furoate</i> CREA .1%; OINT .1%; SOLN .1%          | 3         |                          |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                                              | <b>Drug Tier</b> | <b>Requirements/Limits</b>        |
|---------------------------------------------------------------|------------------|-----------------------------------|
| <i>triamcinolone acetonide (topical)</i> CREA .025%, .1%, .5% | 2                | QL (454 gm / 30 days)             |
| <i>triamcinolone acetonide (topical)</i> LOTN .025%, .1%      | 3                |                                   |
| <i>triamcinolone acetonide (topical)</i> OINT .025%, .1%, .5% | 2                |                                   |
| <i>triderm</i> CREA .5%                                       | 2                | QL (454 gm / 30 days)             |
| <b>DERMATOLOGY, LOCAL ANESTHETICS</b>                         |                  |                                   |
| <i>glydo</i> PRSY 2%                                          | 3                | QL (60 mL / 30 days), PA          |
| <i>lidocaine</i> OINT 5%                                      | 4                | QL (50 gm / 30 days), PA          |
| <i>lidocaine</i> PTCH 5%                                      | 4                | QL (3 patches / 1 day), PA        |
| <i>lidocaine hcl</i> SOLN 4%                                  | 3                | QL (50 mL / 30 days), PA          |
| <i>lidocaine-prilocaine cream</i> 2.5-2.5%                    | 2                | B/D, QL (30 gm / 30 days)         |
| <i>lidocan</i> PTCH 5%                                        | 4                | QL (3 patches / 1 day), PA        |
| <i>tridacaine ii</i> PTCH 5%                                  | 4                | QL (3 patches / 1 day), PA        |
| <b>DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE</b>    |                  |                                   |
| <i>azelaic acid</i> GEL 15%                                   | 4                | QL (50 gm / 30 days)              |
| <i>bexarotene (topical)</i> GEL 1%                            | 5                | NDS, QL (60 gm / 30 days), NM, PA |
| <i>diclofenac sodium (topical)</i> SOLN 1.5%                  | 3                | QL (300 mL / 28 days)             |
| <i>EUCRISA</i> OINT 2%                                        | 4                | QL (120 gm / 30 days), PA         |
| <i>fluorouracil (topical)</i> CREA 5%                         | 4                | QL (40 gm / 30 days)              |
| <i>fluorouracil (topical)</i> SOLN 2%, 5%                     | 3                | QL (10 mL / 30 days)              |
| <i>hydrocortisone (rectal)</i> CREA 1%, 2.5%                  | 3                |                                   |
| <i>imiquimod</i> CREA 5%                                      | 3                | QL (24 packets / 30 days)         |
| <i>lactic acid (ammonium lactate)</i> CREA 12%; LOTN 12%      | 2                |                                   |
| <i>metronidazole (topical)</i> CREA .75%; GEL .75%            | 3                | QL (45 gm / 30 days)              |
| <i>metronidazole (topical)</i> LOTN .75%                      | 4                | QL (59 mL / 30 days)              |
| <i>nitroglycerin (intra-anal)</i> OINT .4%                    | 4                | QL (30 gm / 30 days)              |
| <i>PANRETIN</i> GEL .1%                                       | 5                | NDS, QL (60 gm / 30 days), PA     |
| <i>pimecrolimus</i> CREA 1%                                   | 4                | QL (100 gm / 30 days), PA         |
| <i>podofilox</i> SOLN .5%                                     | 3                | QL (7 mL / 28 days)               |
| <i>procto-med hc</i> CREA 2.5%                                | 3                |                                   |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

| <b>Drug Name</b>                           | <b>Drug Tier</b> | <b>Requirements/Limits</b>        |
|--------------------------------------------|------------------|-----------------------------------|
| <i>proctocort</i> CREA 1%                  | 3                |                                   |
| <i>proctosol hc</i> CREA 2.5%              | 3                |                                   |
| <i>proctozone-hc</i> CREA 2.5%             | 3                |                                   |
| <i>tacrolimus (topical)</i> OINT .03%, .1% | 4                | QL (100 gm / 30 days), PA         |
| VALCHLOR GEL .016%                         | 5                | NDS, QL (60 gm / 30 days), NM, PA |

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

|                           |   |                      |
|---------------------------|---|----------------------|
| <i>malathion</i> LOTN .5% | 4 | QL (59 mL / 30 days) |
| <i>permethrin</i> CREA 5% | 3 | QL (60 gm / 30 days) |

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

|                                                      |   |                           |
|------------------------------------------------------|---|---------------------------|
| SANTYL OINT 250unit/gm                               | 4 | QL (180 gm / 30 days), PA |
| <i>sodium chloride (gu irrigant)</i> SOLN .9%        | 3 |                           |
| <i>water for irrigation, sterile irrigation soln</i> | 2 |                           |

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

|                                                         |   |                             |
|---------------------------------------------------------|---|-----------------------------|
| <i>cevimeline hcl</i> CAPS 30mg                         | 4 |                             |
| <i>chlorhexidine gluconate (mouth-throat)</i> SOLN .12% | 1 |                             |
| <i>clotrimazole</i> TROC 10mg                           | 3 | QL (150 lozenges / 30 days) |
| <i>kourzeq</i> PSTE .1%                                 | 3 |                             |
| <i>lidocaine hcl (mouth-throat)</i> SOLN 2%             | 2 |                             |
| <i>nystatin (mouth-throat)</i> SUSP 100000unit/ml       | 2 |                             |
| <i>periogard</i> SOLN .12%                              | 1 |                             |
| <i>pilocarpine hcl (oral)</i> TABS 5mg, 7.5mg           | 3 |                             |
| <i>triamcinolone acetonide (mouth)</i> PSTE .1%         | 3 |                             |

## **\_PART B**

### **DIABETIC METERS AND TEST STRIPS**

|                           |   |    |
|---------------------------|---|----|
| DEXCOM G6 MIS RECEIVER    | 0 | PA |
| DEXCOM G6 MIS SENSOR      | 0 | PA |
| DEXCOM G6 MIS TRANSMIT    | 0 | PA |
| DEXCOM G7 MIS RECEIVER    | 0 | PA |
| DEXCOM G7 MIS SENSOR      | 0 | PA |
| FREESTYLE LB KIT 2/SENSOR | 0 | PA |
| FREESTYLE LB KIT 3/SENSOR | 0 | PA |
| FREESTYLE LB KIT 14D/SEN  | 0 | PA |
| FREESTYLE LB MIS 2/READER | 0 | PA |
| FREESTYLE LB MIS 3/READER | 0 | PA |
| FREESTYLE MIS READER      | 0 | PA |
| TRUE METRIX KIT AIR       | 0 |    |
| TRUE METRIX KIT METER     | 0 |    |
| TRUE METRIX STRIPS        | 0 |    |

You can find information on what the symbols and abbreviations in this table mean by going to Section C1.

**You can find information on what the symbols and abbreviations in this table mean by going to Section C1.**

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## D. Index of Covered Drugs

In this section, you can find a drug by searching for its name alphabetically. This will tell you the page number where you can find additional coverage information for your drug.

### A

|                                                         |    |                                         |    |                                                                    |    |
|---------------------------------------------------------|----|-----------------------------------------|----|--------------------------------------------------------------------|----|
| <i>abacavir sulfate</i> .....                           | 21 | ADALIMUMAB-BWWD .....                   | 81 | ALVAIZ .....                                                       | 80 |
| <i>abacavir sulfate-lamivudine tab 600-300 mg</i> ..... | 22 | <i>adefovir dipivoxil</i> ....          | 23 | ALVESCO .....                                                      | 94 |
| <i>abigale</i> .....                                    | 72 | ADEMPAS.....                            | 46 | <i>alyacen 1/35</i> .....                                          | 67 |
| <i>abigale lo</i> .....                                 | 72 | ADMELOG .....                           | 65 | <i>alyacen 7/7/7</i> .....                                         | 67 |
| ABILIFY ASIMTUFII                                       | 51 | ADMELOG SOLOSTAR .....                  | 65 | ALYFTREK TAB 10-50-125 .....                                       | 93 |
| ABILIFY MAINTENA.                                       | 51 | ADVAIR HFA AER 115/21 .....             | 94 | ALYFTREK TAB 4-20-50 .....                                         | 92 |
| <i>abiraterone acetate</i>                              | 28 | ADVAIR HFA AER 230/21 .....             | 94 | ALYGLO .....                                                       | 83 |
| <i>abirtega</i> .....                                   | 28 | ADVAIR HFA AER 45/21 .....              | 94 | <i>alyq</i> .....                                                  | 46 |
| ABRYSVO .....                                           | 85 | <i>afirmelle</i> .....                  | 67 | <i>amantadine hcl</i> .....                                        | 50 |
| <i>acamprosate calcium</i> .....                        | 62 | AIMOVIG .....                           | 60 | <i>ambrisentan</i> .....                                           | 46 |
| <i>acarbose</i> .....                                   | 63 | AIRSUPRA AER 90-80MCG .....             | 94 | <i>amethyst</i> .....                                              | 67 |
| <i>accutane</i> .....                                   | 95 | AKEEGA TAB 100/500 .....                | 28 | <i>amikacin sulfate</i> ....                                       | 18 |
| <i>acebutolol hcl</i> .....                             | 43 | AKEEGA TAB 50/500MG .....               | 28 | <i>amiloride &amp; hydrochlorothiazide tab 5-50 mg</i> .....       | 44 |
| <i>acetaminophen w/codeine soln 120-12 mg/5ml</i> ..... | 17 | <i>ala-cort</i> .....                   | 97 | <i>amiloride hcl</i> .....                                         | 45 |
| <i>acetaminophen w/codeine tab 300-15 mg</i> .....      | 17 | <i>albendazole</i> .....                | 18 | <i>aminosyn ii soln 15%</i> .....                                  | 88 |
| <i>acetaminophen w/codeine tab 300-30 mg</i> .....      | 17 | <i>albuterol sulfate</i> ....           | 92 | AMINOSYN INJ 10% 88                                                |    |
| <i>acetaminophen w/codeine tab 300-60 mg</i> .....      | 17 | <i>alclometasone dipropionate</i> ..... | 97 | AMINOSYN-PF INJ 10% .....                                          | 88 |
| <i>acetazolamide</i> .....                              | 44 | ALCOHOL SWABS: EMBECTA-BD/MHC/RUGBY ..  | 65 | <i>amiodarone hcl</i> .....                                        | 42 |
| <i>acetic acid</i> .....                                | 78 | ALDURAZYME .....                        | 73 | <i>amitriptyline hcl</i> ....                                      | 48 |
| <i>acetic acid (otic)</i> ....                          | 90 | ALECENSA .....                          | 30 | <i>amlodipine besylate</i> 44                                      |    |
| <i>acetylcysteine</i> .....                             | 92 | <i>alendronate sodium</i>               | 66 | <i>amlodipine besylate-atorvastatin calcium tab 10-10 mg</i> ..... | 45 |
| <i>acitretin</i> .....                                  | 96 | <i>alfuzosin hcl</i> .....              | 78 | <i>amlodipine besylate-atorvastatin calcium tab 10-20 mg</i> ..... | 45 |
| ACTHIB INJ .....                                        | 85 | <i>aliskiren fumarate</i> ..            | 45 | <i>amlodipine besylate-atorvastatin calcium tab 10-40 mg</i> ..... | 45 |
| ACTIMMUNE .....                                         | 84 | <i>allopurinol</i> .....                | 16 | <i>amlodipine besylate-atorvastatin calcium tab 10-80 mg</i> ..... | 45 |
| <i>acyclovir</i> .....                                  | 23 | <i>alose tron hcl</i> .....             | 77 |                                                                    |    |
| <i>acyclovir sodium</i> ....                            | 23 | <i>alprazolam</i> .....                 | 47 |                                                                    |    |
| ADACEL INJ.....                                         | 85 | <i>altavera</i> .....                   | 67 |                                                                    |    |
|                                                         |    | ALUNBRIG.....                           | 30 |                                                                    |    |
|                                                         |    | ALUNBRIG PAK .....                      | 30 |                                                                    |    |

|                                                                    |           |                                                                   |           |                                                              |           |
|--------------------------------------------------------------------|-----------|-------------------------------------------------------------------|-----------|--------------------------------------------------------------|-----------|
| <i>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg ....</i> | <i>45</i> | <i>medoxomil tab 10-40 mg .....</i>                               | <i>40</i> | <i>amoxicillin &amp; k clavulanate tab 875-125 mg.....</i>   | <i>25</i> |
| <i>amlodipine besylate-atorvastatin calcium tab 2.5-20 mg ....</i> | <i>45</i> | <i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg .....</i> | <i>40</i> | <i>amphetamine-dextroamphetamine cap er 24hr 10 mg .....</i> | <i>58</i> |
| <i>amlodipine besylate-atorvastatin calcium tab 2.5-40 mg ....</i> | <i>45</i> | <i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg .....</i> | <i>40</i> | <i>amphetamine-dextroamphetamine cap er 24hr 15 mg .....</i> | <i>58</i> |
| <i>amlodipine besylate-atorvastatin calcium tab 5-10 mg .....</i>  | <i>45</i> | <i>amlodipine besylate-valsartan tab 10-160 mg .....</i>          | <i>40</i> | <i>amphetamine-dextroamphetamine cap er 24hr 20 mg .....</i> | <i>58</i> |
| <i>amlodipine besylate-atorvastatin calcium tab 5-20 mg .....</i>  | <i>45</i> | <i>amlodipine besylate-valsartan tab 10-320 mg .....</i>          | <i>40</i> | <i>amphetamine-dextroamphetamine cap er 24hr 25 mg .....</i> | <i>58</i> |
| <i>amlodipine besylate-atorvastatin calcium tab 5-40 mg .....</i>  | <i>45</i> | <i>amlodipine besylate-valsartan tab 5-160 mg .....</i>           | <i>40</i> | <i>amphetamine-dextroamphetamine cap er 24hr 30 mg .....</i> | <i>59</i> |
| <i>amlodipine besylate-atorvastatin calcium tab 5-80 mg .....</i>  | <i>45</i> | <i>amlodipine besylate-valsartan tab 5-320 mg .....</i>           | <i>40</i> | <i>amphetamine-dextroamphetamine cap er 24hr 5 mg .....</i>  | <i>58</i> |
| <i>amlodipine besylate-benazepril hcl cap 10-20 mg .....</i>       | <i>39</i> | <i>amnestem .....</i>                                             | <i>95</i> | <i>amphetamine-dextroamphetamine cap er 24hr 5 mg .....</i>  | <i>58</i> |
| <i>amlodipine besylate-benazepril hcl cap 10-40 mg .....</i>       | <i>39</i> | <i>amoxapine .....</i>                                            | <i>48</i> | <i>amphetamine-dextroamphetamine tab 10 mg .....</i>         | <i>59</i> |
| <i>amlodipine besylate-benazepril hcl cap 2.5-10 mg .....</i>      | <i>39</i> | <i>amoxicillin.....</i>                                           | <i>25</i> | <i>amphetamine-dextroamphetamine tab 12.5 mg .....</i>       | <i>59</i> |
| <i>amlodipine besylate-benazepril hcl cap 5-10 mg.....</i>         | <i>39</i> | <i>amoxicillin &amp; k clavulanate for susp 200-28.5 mg/5ml</i>   | <i>25</i> | <i>amphetamine-dextroamphetamine tab 15 mg .....</i>         | <i>59</i> |
| <i>amlodipine besylate-benazepril hcl cap 5-20 mg.....</i>         | <i>39</i> | <i>amoxicillin &amp; k clavulanate for susp 250-62.5 mg/5ml</i>   | <i>25</i> | <i>amphetamine-dextroamphetamine tab 20 mg .....</i>         | <i>59</i> |
| <i>amlodipine besylate-benazepril hcl cap 5-40 mg.....</i>         | <i>39</i> | <i>amoxicillin &amp; k clavulanate for susp 400-57 mg/5ml...</i>  | <i>25</i> | <i>amphetamine-dextroamphetamine tab 30 mg .....</i>         | <i>59</i> |
| <i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg.....</i>  | <i>40</i> | <i>amoxicillin &amp; k clavulanate for susp 600-42.9 mg/5ml</i>   | <i>25</i> | <i>amphetamine-dextroamphetamine tab 5 mg .....</i>          | <i>59</i> |
| <i>amlodipine besylate-olmesartan</i>                              |           | <i>amoxicillin &amp; k clavulanate tab 250-125 mg.....</i>        | <i>25</i> |                                                              |           |
|                                                                    |           | <i>amoxicillin &amp; k clavulanate tab 500-125 mg.....</i>        | <i>25</i> |                                                              |           |

|                                                                                  |    |                                                                  |    |                                                                        |    |
|----------------------------------------------------------------------------------|----|------------------------------------------------------------------|----|------------------------------------------------------------------------|----|
| <i>amphetamine-<br/>dextroamphetamine<br/>tab 7.5 mg</i> .....                   | 59 | <i>asenapine maleate</i> .                                       | 51 | <i>azelaic acid</i> .....                                              | 98 |
| <i>amphotericin b</i> .....                                                      | 20 | <i>ashlyna</i> .....                                             | 67 | <i>azelastine hcl</i> .....                                            | 91 |
| <i>amphotericin b<br/>liposome</i> .....                                         | 20 | <i>aspirin-dipyridamole<br/>cap er 12hr 25-200<br/>mg</i> .....  | 80 | <i>azelastine hcl (ophth)</i><br>.....                                 | 89 |
| <i>ampicillin</i> .....                                                          | 25 | ASTAGRAF XL.....                                                 | 84 | <i>azithromycin</i> .....                                              | 24 |
| <i>ampicillin &amp; sulbactam<br/>sodium for inj 1.5<br/>(1-0.5) gm</i> .....    | 25 | <i>atazanavir sulfate</i> ..                                     | 21 | <i>aztreonam</i> .....                                                 | 18 |
| <i>ampicillin &amp; sulbactam<br/>sodium for inj 3 (2-<br/>1) gm</i> .....       | 25 | <i>atenolol</i> .....                                            | 43 | <i>azurette</i> .....                                                  | 67 |
| <i>ampicillin &amp; sulbactam<br/>sodium for iv soln<br/>1.5 (1-0.5) gm</i> .... | 26 | <i>atenolol &amp;<br/>chlorthalidone tab<br/>100-25 mg</i> ..... | 43 | <b>B</b>                                                               |    |
| <i>ampicillin &amp; sulbactam<br/>sodium for iv soln 15<br/>(10-5) gm</i> .....  | 26 | <i>atenolol &amp;<br/>chlorthalidone tab<br/>50-25 mg</i> .....  | 43 | <i>bacitracin<br/>(ophthalmic)</i> .....                               | 89 |
| <i>ampicillin &amp; sulbactam<br/>sodium for iv soln 3<br/>(2-1) gm</i> .....    | 26 | <i>atomoxetine hcl</i> .....                                     | 59 | <i>bacitracin-polymyxin b<br/>ophth oint</i> .....                     | 89 |
| <i>ampicillin sodium</i> ...                                                     | 26 | <i>atorvastatin calcium</i> ..                                   | 42 | <i>bacitracin-polymyxin-<br/>neomycin-hc ophth<br/>oint 1%</i> .....   | 88 |
| <i>anagrelide hcl</i> .....                                                      | 80 | <i>atovaquone</i> .....                                          | 18 | <i>baclofen</i> .....                                                  | 62 |
| <i>anastrozole</i> .....                                                         | 28 | <i>atovaquone-proguanil<br/>hcl tab 250-100 mg<br/>.....</i>     | 20 | BAFIERTAM .....                                                        | 61 |
| ANORO ELLIPT AER<br>62.5-25 .....                                                | 91 | <i>atovaquone-proguanil<br/>hcl tab 62.5-25 mg<br/>.....</i>     | 20 | <i>balsalazide disodium<br/>.....</i>                                  | 76 |
| <i>aprepitant</i> .....                                                          | 75 | ATROPINE SULFATE ..                                              | 90 | BALVERSA .....                                                         | 30 |
| <i>aprepitant capsule<br/>therapy pack 80 &amp;<br/>125 mg</i> .....             | 75 | <i>atropine sulfate<br/>(ophthalmic)</i> .....                   | 90 | <i>balziva</i> .....                                                   | 67 |
| <i>apri</i> .....                                                                | 67 | ATROVENT HFA.....                                                | 91 | BARACLUDE .....                                                        | 23 |
| APTOM .....                                                                      | 54 | <i>aubra eq</i> .....                                            | 67 | BCG VACCINE.....                                                       | 85 |
| APTIVUS .....                                                                    | 21 | AUGTYRO.....                                                     | 30 | <i>benazepril &amp;<br/>hydrochlorothiazide<br/>tab 10-12.5 mg</i> ... | 39 |
| ARALAST NP.....                                                                  | 93 | <i>aurovela 1/20</i> .....                                       | 67 | <i>benazepril &amp;<br/>hydrochlorothiazide<br/>tab 20-12.5 mg</i> ... | 39 |
| <i>aranelle</i> .....                                                            | 67 | <i>aurovela 24 fe</i> .....                                      | 67 | <i>benazepril &amp;<br/>hydrochlorothiazide<br/>tab 20-25 mg</i> ..... | 39 |
| ARCALYST.....                                                                    | 84 | <i>aurovela fe 1.5/30</i> .                                      | 67 | <i>benazepril &amp;<br/>hydrochlorothiazide<br/>tab 5-6.25mg</i> ..... | 39 |
| AREXVY .....                                                                     | 85 | <i>aurovela fe 1/20</i> ....                                     | 67 | <i>benazepril hcl</i> .....                                            | 39 |
| <i>arformoterol tartrate<br/>.....</i>                                           | 92 | AUSTEDO.....                                                     | 61 | BENDAMUSTINE<br>HYDROCHLORID .                                         | 27 |
| ARIKAYCE .....                                                                   | 18 | AUSTEDO XR.....                                                  | 61 | BENDEKA.....                                                           | 27 |
| <i>aripiprazole</i> .....                                                        | 51 | AUSTEDO XR TAB<br>TITR KIT .....                                 | 61 | BENLYSTA.....                                                          | 84 |
| ARISTADA.....                                                                    | 51 | AUVELITY TAB 45-<br>105MG.....                                   | 48 | <i>benzoyl peroxide-<br/>erythromycin gel 5-<br/>3%</i> .....          | 95 |
| ARISTADA INITIO ..                                                               | 51 | <i>aviane</i> .....                                              | 67 | <i>benztropine mesylate<br/>.....</i>                                  | 50 |
| <i>armodafinil</i> .....                                                         | 62 | AVMAPKI PAK<br>FAKZYNJA .....                                    | 30 | BERINERT .....                                                         | 80 |
| ARNUITY ELLIPTA... ..                                                            | 94 | <i>ayuna</i> .....                                               | 67 |                                                                        |    |
|                                                                                  |    | AYVAKIT .....                                                    | 30 |                                                                        |    |
|                                                                                  |    | <i>azacitidine</i> .....                                         | 27 |                                                                        |    |
|                                                                                  |    | <i>azathioprine</i> .....                                        | 84 |                                                                        |    |

|                                                                   |                                                                              |                                                   |
|-------------------------------------------------------------------|------------------------------------------------------------------------------|---------------------------------------------------|
| <i>besifloxacin hcl</i> ..... 89                                  | BLUJEPa ..... 18                                                             | 12-3 mg (base equiv)..... 63                      |
| BESIVANCE ..... 89                                                | BONSITY..... 66                                                              | <i>buprenorphine hcl-naloxone hcl sl film</i>     |
| BESREMI ..... 29                                                  | BOOSTRIX INJ ..... 85                                                        | 2-0.5 mg (base equiv)..... 63                     |
| <i>betaine powder for oral solution</i> ..... 73                  | <i>bortezomib</i> ..... 30                                                   | <i>buprenorphine hcl-naloxone hcl sl film</i>     |
| <i>betamethasone dipropionate (topical)</i> ..... 97              | BORTEZOMIB ..... 30                                                          | 4-1 mg (base equiv) ..... 63                      |
| <i>betamethasone dipropionate augmented</i> ..... 97              | <i>bosentan</i> ..... 46                                                     | <i>buprenorphine hcl-naloxone hcl sl film</i>     |
| <i>betamethasone valerate</i> ..... 97                            | BOSULIF ..... 31                                                             | 8-2 mg (base equiv) ..... 63                      |
| BETASERON ..... 61                                                | BRAFTOVI ..... 31                                                            | <i>buprenorphine hcl-naloxone hcl sl tab</i>      |
| <i>betaxolol hcl (ophth)</i> ..... 90                             | BREO ELLIPTA INH 100-25 ..... 94                                             | 2-0.5 mg (base equiv)..... 63                     |
| <i>bethanechol chloride</i> ..... 78                              | BREO ELLIPTA INH 200-25 ..... 95                                             | <i>buprenorphine hcl-naloxone hcl sl tab</i>      |
| BEVESPI AER 9-4.8MCG..... 91                                      | BREO ELLIPTA INH 50-25MCG ..... 94                                           | 8-2 mg (base equiv) ..... 63                      |
| <i>bexarotene</i> ..... 29                                        | <i>breyna</i> ..... 95                                                       | <i>bupropion hcl</i> ..... 48                     |
| <i>bexarotene (topical)</i> 98                                    | BREZTRI AERO AER SPHERE ..... 91                                             | <i>bupropion hcl (smoking deterrent)</i> ..... 63 |
| BEXSERO ..... 85                                                  | BREZTRI AERO AER SPHERE (INSTITUTIONAL PACK)..... 91                         | <i>buspirone hcl</i> ..... 47                     |
| <i>bicalutamide</i> ..... 28                                      | <i>briellyn</i> ..... 68                                                     | <i>butorphanol tartrate</i> 17                    |
| BICILLIN L-A ..... 26                                             | <i>brimonidine tartrate</i> 90                                               | <b>C</b>                                          |
| BIKTARVY TAB 30-120-15 MG ..... 22                                | <i>brinzolamide</i> ..... 90                                                 | <i>cabergoline</i> ..... 73                       |
| BIKTARVY TAB 50-200-25 MG ..... 22                                | BRIVIACT..... 54                                                             | CABOMETYX..... 31                                 |
| BILDYOS..... 66                                                   | <i>bromocriptine mesylate</i> ..... 50                                       | <i>calcipotriene</i> ..... 96                     |
| BIMZELX..... 81                                                   | BRUKINSA ..... 31                                                            | <i>calcitonin (salmon) spray</i> ..... 66         |
| <i>bisoprolol &amp; hydrochlorothiazide tab 10-6.25 mg...</i> 43  | <i>budesonide</i> ..... 76                                                   | <i>calcitrene</i> ..... 96                        |
| <i>bisoprolol &amp; hydrochlorothiazide tab 2.5-6.25 mg..</i> 43  | <i>budesonide (inhalation)</i> ..... 94                                      | <i>calcitriol</i> ..... 75                        |
| <i>bisoprolol &amp; hydrochlorothiazide tab 5-6.25 mg ....</i> 43 | <i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</i> ..... 95 | <i>calcitriol (oral)</i> ..... 75                 |
| <i>bisoprolol fumarate</i> 43                                     | <i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i> ..... 95  | CALQUENCE ..... 31                                |
| BIVIGAM..... 83                                                   | <i>bumetanide</i> ..... 45                                                   | <i>camila</i> ..... 68                            |
| <i>blisovi 24 fe</i> ..... 67                                     | <i>buprenorphine</i> ..... 16                                                | <i>camrese</i> ..... 68                           |
| <i>blisovi fe 1.5/30</i> ..... 67                                 | <i>buprenorphine hcl</i> .. 63                                               | <i>camrese lo</i> ..... 68                        |
| <i>blisovi fe 1/20</i> ..... 68                                   | <i>buprenorphine hcl-naloxone hcl sl film</i>                                | <i>candesartan cilexetil</i> 41                   |

|                                                                           |                                                                           |                                                        |
|---------------------------------------------------------------------------|---------------------------------------------------------------------------|--------------------------------------------------------|
| <i>candesartan cilexetil-hydrochlorothiazide</i><br>tab 32-12.5 mg... 40  | <i>carbidopa-levodopa-entacapone tabs</i><br>18.75-75-200 mg 50           | <i>cefepodoxime proxetil</i><br>..... 24               |
| <i>candesartan cilexetil-hydrochlorothiazide</i><br>tab 32-25 mg ..... 40 | <i>carbidopa-levodopa-entacapone tabs</i> 25-100-200 mg ..... 50          | <i>cefprozil</i> ..... 24                              |
| CAPLYTA..... 51                                                           | <i>carbidopa-levodopa-entacapone tabs</i><br>31.25-125-200 mg<br>..... 50 | <i>ceftaroline fosamil..</i> 24                        |
| CAPRELSA..... 31                                                          | <i>carbidopa-levodopa-entacapone tabs</i><br>37.5-150-200 mg 50           | <i>ceftazidime</i> ..... 24                            |
| <i>captopril</i> ..... 39                                                 | <i>carbidopa-levodopa-entacapone tabs</i> 50-200-200 mg ..... 50          | <i>ceftriaxone sodium.</i> 24                          |
| <i>captopril &amp; hydrochlorothiazide</i><br>tab 25-15 mg ..... 39       | <i>carboplatin</i> ..... 27                                               | <i>cefuroxime axetil ...</i> 24                        |
| <i>captopril &amp; hydrochlorothiazide</i><br>tab 25-25 mg ..... 39       | <i>carglumic acid</i> ..... 73                                            | <i>cefuroxime sodium.</i> 24                           |
| <i>captopril &amp; hydrochlorothiazide</i><br>tab 50-15 mg ..... 39       | <i>carisoprodol</i> ..... 62                                              | <i>celecoxib</i> ..... 16                              |
| <i>captopril &amp; hydrochlorothiazide</i><br>tab 50-25 mg ..... 39       | <i>carteolol hcl (ophth)</i> 90                                           | <i>cephalexin</i> ..... 24                             |
| <i>carb/levo orally disintegrating tab</i><br>10-100mg ..... 50           | <i>cartia xt</i> ..... 44                                                 | CEQR SIMPL KIT<br>PATCH 2U (3-DAY)<br>..... 65         |
| <i>carb/levo orally disintegrating tab</i><br>25-100mg ..... 50           | <i>carvedilol</i> ..... 43                                                | CEQR SIMPL KIT<br>PATCH 2U (4-DAY)<br>..... 65         |
| <i>carb/levo orally disintegrating tab</i><br>25-250mg ..... 50           | <i>caspofungin acetate</i> 20                                             | CEQR SIMPL MIS<br>INSERTER ..... 65                    |
| <i>carbamazepine</i> ..... 54                                             | CAYSTON..... 18                                                           | CERDELGA ..... 73                                      |
| <i>carbidopa</i> ..... 50                                                 | <i>cefaclor</i> ..... 24                                                  | CEREZYME ..... 73                                      |
| <i>carbidopa &amp; levodopa</i><br>tab 10-100 mg.... 50                   | <i>cefadroxil</i> ..... 24                                                | <i>cetirizine hcl</i> ..... 91                         |
| <i>carbidopa &amp; levodopa</i><br>tab 25-100 mg.... 50                   | CEFAZOLIN ..... 24                                                        | <i>cevimeline hcl</i> ..... 99                         |
| <i>carbidopa &amp; levodopa</i><br>tab 25-250 mg.... 50                   | CEFAZOLIN INJ<br>1GM/50ML..... 24                                         | <i>chateal eq</i> ..... 68                             |
| <i>carbidopa &amp; levodopa</i><br>tab er 25-100 mg 50                    | <i>cefazolin sodium</i> .... 24                                           | CHEMET..... 67                                         |
| <i>carbidopa &amp; levodopa</i><br>tab er 50-200 mg 50                    | CEFAZOLIN SOLN<br>2GM/100ML-4% .. 24                                      | <i>chlorhexidine gluconate (mouth-throat)</i> ..... 99 |
| <i>carbidopa-levodopa-entacapone tabs</i><br>12.5-50-200 mg.. 50          | CEFAZOLIN/DEX SOL<br>1GM/50ML-4%.... 24                                   | <i>chloroquine phosphate</i><br>..... 20               |
|                                                                           | CEFAZOLIN/DEX SOL<br>2GM/50ML-3%.... 24                                   | <i>chlorpromazine hcl.</i> 51                          |
|                                                                           | CEFAZOLIN/DEX SOL<br>3GM/150ML-4% .. 24                                   | <i>chlorthalidone</i> ..... 45                         |
|                                                                           | CEFAZOLIN/DEX SOL<br>3GM/50ML-2%.... 24                                   | <i>cholestyramine</i> ..... 42                         |
|                                                                           | <i>cefdinir</i> ..... 24                                                  | <i>cholestyramine light</i> 43                         |
|                                                                           | <i>cefepime hcl</i> ..... 24                                              | <i>choline fenofibrate .</i> 42                        |
|                                                                           | <i>cefixime</i> ..... 24                                                  | <i>ciclopirox</i> ..... 96                             |
|                                                                           | <i>cefotetan disodium.</i> 24                                             | <i>ciclopirox olamine ..</i> 96                        |
|                                                                           | <i>cefoxitin sodium</i> .... 24                                           | <i>cilostazol</i> ..... 80                             |
|                                                                           |                                                                           | CILOXAN ..... 89                                       |
|                                                                           |                                                                           | CIMDUO TAB 300-300<br>..... 22                         |
|                                                                           |                                                                           | <i>cinacalcet hcl</i> ..... 73                         |
|                                                                           |                                                                           | CIPRO ..... 25                                         |
|                                                                           |                                                                           | <i>ciprofloxacin 200 mg/100ml in d5w</i> 25            |
|                                                                           |                                                                           | <i>ciprofloxacin 400 mg/200ml in d5w</i> 25            |

|                                   |                                 |                                 |
|-----------------------------------|---------------------------------|---------------------------------|
| <i>ciprofloxacin hcl</i> ..... 25 | CLINIMIX INJ                    | <i>colistimethate sodium</i>    |
| <i>ciprofloxacin hcl</i>          | 5%/D20W ..... 88                | ..... 18                        |
| ( <i>ophth</i> ) ..... 89         | CLINIMIX INJ 6/5... 88          | COMBIGAN SOL                    |
| <i>ciprofloxacin-</i>             | CLINIMIX INJ 8/10 . 88          | 0.2/0.5% ..... 90               |
| <i>dexamethasone otic</i>         | CLINIMIX INJ 8/14 . 88          | COMBIVENT AER 20-               |
| <i>susp 0.3-0.1%</i> .... 90      | <i>clinisol sf 15%</i> ..... 88 | 100 ..... 91                    |
| <i>cisplatin</i> ..... 27         | CLINOLIPID EMU 20%              | COMETRIQ (60MG                  |
| <i>citalopram</i>                 | ..... 88                        | DOSE) ..... 31                  |
| <i>hydrobromide</i> ..... 48      | <i>clobazam</i> ..... 54        | COMETRIQ KIT 100MG              |
| <i>claravis</i> ..... 95          | <i>clobetasol propionate</i>    | ..... 31                        |
| <i>clarithromycin</i> .. 24, 25   | ..... 97                        | COMETRIQ KIT 140MG              |
| <i>clindamycin hcl</i> ..... 18   | <i>clobetasol propionate</i>    | ..... 31                        |
| <i>clindamycin palmitate</i>      | <i>e</i> ..... 97               | <i>compro</i> ..... 75          |
| <i>hydrochloride</i> ..... 18     | <i>clodan</i> ..... 97          | <i>constulose</i> ..... 77      |
| <i>clindamycin phosphate</i>      | <i>clomipramine hcl</i> .... 48 | COPAXONE..... 61                |
| ..... 18                          | <i>clonazepam</i> ..... 54      | COPIKTRA..... 31                |
| <i>clindamycin phosphate</i>      | <i>clonidine</i> ..... 46       | CORLANOR ..... 46               |
| ( <i>topical</i> ) ..... 95       | <i>clonidine hcl</i> ..... 46   | COTELLIC ..... 31               |
| <i>clindamycin phosphate</i>      | <i>clopidogrel bisulfate</i> 80 | CREON CAP 12000UNT              |
| <i>in d5w iv soln 300</i>         | <i>clorazepate</i>              | ..... 77                        |
| <i>mg/50ml</i> ..... 18           | <i>dipotassium</i> ..... 54     | CREON CAP 24000UNT              |
| <i>clindamycin phosphate</i>      | <i>clotrimazole</i> ..... 99    | ..... 77                        |
| <i>in d5w iv soln 600</i>         | <i>clotrimazole (topical)</i>   | CREON CAP 3000UNIT              |
| <i>mg/50ml</i> ..... 18           | ..... 96                        | ..... 77                        |
| <i>clindamycin phosphate</i>      | <i>clotrimazole w/</i>          | CREON CAP 36000UNT              |
| <i>in d5w iv soln 900</i>         | <i>betamethasone</i>            | ..... 77                        |
| <i>mg/50ml</i> ..... 18           | <i>cream 1-0.05%</i> ... 96     | CREON CAP 6000UNIT              |
| <i>clindamycin phosphate</i>      | <i>clozapine</i> ..... 51       | ..... 77                        |
| <i>vaginal</i> ..... 79           | COARTEM TAB 20-                 | CRESEMBA ..... 20               |
| <i>clindamycin phosph-</i>        | 120MG..... 20                   | <i>cromolyn sodium</i> ... 93   |
| <i>benzoyl peroxide</i>           | COBENFY CAP 100-                | <i>cromolyn sodium</i>          |
| ( <i>refrig</i> ) gel 1.2 (1)-    | 20MG ..... 51                   | ( <i>mastocytosis</i> ) .... 77 |
| 5%..... 95                        | COBENFY CAP 125-                | <i>cromolyn sodium</i>          |
| CLINDMYC/NAC INJ                  | 30MG ..... 51                   | ( <i>ophth</i> ) ..... 90       |
| 300/50ML..... 18                  | COBENFY CAP 50-                 | <i>cryselle</i> ..... 68        |
| CLINDMYC/NAC INJ                  | 20MG ..... 51                   | <i>cyclobenzaprine hcl</i> 62   |
| 600/50ML..... 18                  | COBENFY STRT CAP                | <i>cyclophosphamide</i> .. 27   |
| CLINDMYC/NAC INJ                  | PACK ..... 52                   | CYCLOPHOSPHAMIDE                |
| 900/50ML..... 18                  | <i>colchicine</i> ..... 16      | ..... 27                        |
| CLINIMIX INJ                      | <i>colchicine w/</i>            | CYCLOPHOSPHAMIDE                |
| 4.25/D10 ..... 88                 | <i>probenecid tab 0.5-</i>      | MONOHYDR ..... 27               |
| CLINIMIX INJ                      | 500 mg ..... 16                 | <i>cycloserine</i> ..... 23     |
| 4.25/D5W ..... 88                 | <i>colesevelam hcl</i> .... 43  | <i>cyclosporine</i> ..... 84    |
| CLINIMIX INJ                      | <i>colestipol hcl</i> ..... 43  |                                 |
| 5%/D15W ..... 88                  |                                 |                                 |

|                                                      |                                             |                                               |
|------------------------------------------------------|---------------------------------------------|-----------------------------------------------|
| <i>cyclosporine modified<br/>(for microemulsion)</i> | DEPO-SUBQ PROVERA                           | <i>dextrose 5% in<br/>lactated ringers...</i> |
| ..... 84                                             | 104 ..... 68                                | 86                                            |
| <i>cypheptadine hcl</i> . 91                         | <i>depo-testosterone</i> .. 63              | <i>dextrose 5% w/<br/>sodium chloride</i>     |
| <i>cyred eq</i> ..... 68                             | DESCOVY TAB 120-                            | 0.225% ..... 86                               |
| CYSTADROPS ..... 90                                  | 15MG ..... 22                               | <i>dextrose 5% w/<br/>sodium chloride</i>     |
| CYSTAGON..... 73                                     | DESCOVY TAB                                 | 0.3% ..... 86                                 |
| CYSTARAN ..... 90                                    | 200/25MG ..... 22                           | <i>dextrose 5% w/<br/>sodium chloride</i>     |
| <i>cytarabine</i> ..... 27                           | <i>desipramine hcl</i> ..... 48             | 0.45% ..... 86                                |
| <b>D</b>                                             | <i>desloratadine</i> ..... 91               | <i>dextrose 5% w/<br/>sodium chloride</i>     |
| D10W/NACL INJ 0.2%                                   | <i>desmopressin acetate</i>                 | 0.9% ..... 86                                 |
| ..... 86                                             | ..... 73                                    | DEXTROSE 70%..... 88                          |
| D10W/NACL INJ                                        | <i>desmopressin acetate</i>                 | DIACOMIT..... 54, 55                          |
| 0.45% ..... 86                                       | <i>spray</i> ..... 73                       | <i>diazepam</i> ..... 55                      |
| D2.5W/NACL INJ                                       | <i>desmopressin acetate</i>                 | <i>diazepam</i>                               |
| 0.45% ..... 86                                       | <i>spray refrigerated</i> 73                | <i>(anticonvulsant)</i> .. 55                 |
| D5W/NACL INJ 0.2%                                    | <i>desogest-eth estrad &amp;</i>            | <i>diazepam inj</i> ..... 55                  |
| ..... 86                                             | <i>eth estrad tab 0.15-</i>                 | <i>diazepam intensol</i> .. 55                |
| D5W/NACL INJ 0.45%                                   | <i>0.02/0.01 mg(21/5)</i>                   | <i>diazoxide</i> ..... 73                     |
| ..... 86                                             | ..... 68                                    | <i>diclofenac potassium</i>                   |
| <i>dabigatran etexilate</i>                          | <i>desvenlafaxine</i>                       | ..... 16                                      |
| <i>mesylate</i> ..... 79                             | <i>succinate</i> ..... 48                   | <i>diclofenac sodium</i> .. 16                |
| <i>dalfampridine</i> ..... 61                        | <i>dexamethasone</i> ..... 72               | <i>diclofenac sodium</i>                      |
| <i>danazol</i> ..... 63                              | DEXAMETHASONE                               | <i>(ophth)</i> ..... 89                       |
| <i>dantrolene sodium</i> . 62                        | INTENSOL ..... 72                           | <i>diclofenac sodium</i>                      |
| DANZITEN..... 31                                     | <i>dexamethasone</i>                        | <i>(topical)</i> ..... 98                     |
| <i>dapagliflozin</i>                                 | <i>sodium phosphate</i> 72                  | <i>diclofenac w/<br/>misoprostol tab</i>      |
| <i>propanediol</i> ..... 63                          | <i>dexamethasone</i>                        | <i>delayed release 50-</i>                    |
| <i>dapsone</i> ..... 18                              | <i>sodium phosphate</i>                     | 0.2 mg ..... 16                               |
| DAPTACEL INJ ..... 85                                | <i>(ophth)</i> ..... 89                     | <i>diclofenac w/<br/>misoprostol tab</i>      |
| <i>daptomycin</i> ..... 18                           | DEXCOM G6 MIS                               | <i>delayed release 75-</i>                    |
| DAPTOMYCIN ..... 18                                  | RECEIVER ..... 99                           | 0.2 mg ..... 16                               |
| <i>darifenacin</i>                                   | DEXCOM G6 MIS                               | <i>dicloxacin sodium</i> 26                   |
| <i>hydrobromide</i> ..... 78                         | SENSOR..... 99                              | <i>dicyclomine hcl</i> ..... 76               |
| <i>darunavir</i> ..... 21                            | DEXCOM G6 MIS                               | DIFICID ..... 25                              |
| <i>dasatinib</i> ..... 31                            | TRANSMIT ..... 99                           | <i>diflunisal</i> ..... 16                    |
| <i>dasetta 1/35</i> ..... 68                         | DEXCOM G7 MIS                               | <i>difluprednate</i> ..... 89                 |
| <i>dasetta 7/7/7</i> ..... 68                        | RECEIVER ..... 99                           | <i>digoxin</i> ..... 46                       |
| DAURISMO..... 31                                     | DEXCOM G7 MIS                               | <i>dihydroergotamine</i>                      |
| <i>daysee</i> ..... 68                               | SENSOR..... 99                              | <i>mesylate</i> ..... 60                      |
| DAYVIGO ..... 60                                     | <i>dexmethylphenidate</i>                   | DILANTIN ..... 55                             |
| <i>deblitane</i> ..... 68                            | <i>hcl</i> ..... 59                         |                                               |
| <i>deferisirox</i> ..... 67                          | <i>dextrose</i> ..... 88                    |                                               |
| DELSTRIGO TAB .... 22                                | DEXTROSE 10%..... 88                        |                                               |
| DENGVAXIA SUS.... 85                                 | <i>dextrose 2.5% w/<br/>sodium chloride</i> |                                               |
|                                                      | 0.45% ..... 86                              |                                               |

|                                                                   |                                                                              |                                                                          |
|-------------------------------------------------------------------|------------------------------------------------------------------------------|--------------------------------------------------------------------------|
| <i>diltiazem hcl</i> ..... 44                                     | DRIZALMA SPRINKLE .....                                                      | <i>tenofovir df tab 600-200-300 mg</i> ..... 22                          |
| <i>diltiazem hcl coated beads</i> ..... 44                        | <i>dronabinol</i> ..... 75                                                   | <i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i> ..... 22     |
| <i>diltiazem hcl extended release beads</i> ..... 44              | <i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i> ..... 68                 | <i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i> ..... 22     |
| <i>dilt-xr</i> ..... 44                                           | <i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i> ..... 68                 | ELIGARD..... 28                                                          |
| <i>diphenhydramine hcl</i> ..... 91                               | <i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i> ..... 68 | <i>elinest</i> ..... 68                                                  |
| <i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i> ..... 77        | <i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i> ..... 68 | ELIQUIS ..... 79                                                         |
| <i>dipyridamole</i> ..... 80                                      | <i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i> ..... 68 | ELIQUIS (1.5MG PACK) 3 X ..... 79                                        |
| <i>disopyramide phosphate</i> ..... 42                            | <i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i> ..... 68 | ELIQUIS (2MG PACK) 4 X..... 79                                           |
| <i>disulfiram</i> ..... 63                                        | DROXIA ..... 80                                                              | ELIQUIS STARTER PACK..... 79                                             |
| <i>divalproex sodium</i> .. 55                                    | <i>droxidopa</i> ..... 46                                                    | <i>eluryng</i> ..... 68                                                  |
| <i>docetaxel</i> ..... 30                                         | DULERA AER 100-5MCG ..... 95                                                 | EMGALITY ..... 60                                                        |
| DOCETAXEL ..... 30                                                | DULERA AER 200-5MCG ..... 95                                                 | EMSAM..... 48                                                            |
| DOCIVYX ..... 30                                                  | DULERA AER 50-5MCG ..... 95                                                  | <i>emtricitabine</i> ..... 21                                            |
| <i>dofetilide</i> ..... 42                                        | <i>duloxetine hcl</i> ..... 48                                               | <i>emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg</i> ..... 22 |
| <i>dolishale</i> ..... 68                                         | DUPIXENT ..... 81                                                            | <i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i> .. 22  |
| <i>donepezil hydrochloride</i> ..... 47                           | <i>dutasteride</i> ..... 78                                                  | <i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i> .. 22  |
| DOPTelet ..... 80                                                 | <i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i> ..... 78                    | <i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i> .. 22  |
| DOPTelet SPRINKLE ..... 80                                        | <b>E</b>                                                                     | <i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i> .. 22  |
| <i>dorzolamide hcl</i> ..... 90                                   | <i>e.e.s. 400</i> ..... 25                                                   | EMTRIVA ..... 21                                                         |
| <i>dorzolamide hcl-timolol maleate ophth soln 2-0.5%</i> ..... 90 | <i>econazole nitrate</i> ... 96                                              | EMVERM ..... 18                                                          |
| <i>dotti</i> ..... 72                                             | EDARBI ..... 41                                                              | <i>emzahh</i> ..... 68                                                   |
| DOVATO TAB 50-300MG..... 22                                       | EDARBYCLOR TAB 40-12.5 ..... 40                                              | <i>enalapril maleate</i> ... 39                                          |
| <i>doxazosin mesylate</i> 40                                      | EDARBYCLOR TAB 40-25MG ..... 40                                              | <i>enalapril maleate &amp; hydrochlorothiazide tab 10-25 mg</i> ..... 39 |
| <i>doxepin hcl</i> ..... 48                                       | EDURANT..... 21                                                              |                                                                          |
| <i>doxepin hcl (sleep)</i> . 60                                   | EDURANT PED ..... 21                                                         |                                                                          |
| <i>doxercalciferol</i> ..... 75                                   | <i>efavirenz</i> ..... 21                                                    |                                                                          |
| <i>doxorubicin hcl</i> ..... 29                                   | <i>efavirenz-emtricitabine-</i>                                              |                                                                          |
| <i>doxorubicin hcl liposomal</i> ..... 29                         |                                                                              |                                                                          |
| <i>doxy 100</i> ..... 26                                          |                                                                              |                                                                          |
| <i>doxycycline (monohydrate)</i> .... 26                          |                                                                              |                                                                          |
| <i>doxycycline hyclate</i> 26                                     |                                                                              |                                                                          |

|                                                                       |        |                                                                          |    |                                                        |    |
|-----------------------------------------------------------------------|--------|--------------------------------------------------------------------------|----|--------------------------------------------------------|----|
| <i>enalapril maleate &amp; hydrochlorothiazide tab 5-12.5 mg ....</i> | 39     | <i>ertapenem sodium .</i>                                                | 18 | <i>everolimus .....</i>                                | 32 |
| ENBREL .....                                                          | 81     | <i>ery.....</i>                                                          | 95 | <i>everolimus (immunosuppressant) .....</i>            | 84 |
| ENBREL MINI.....                                                      | 81     | ERYTHROCIN LACTOBIONATE...                                               | 25 | EVOTAZ TAB 300-150 .....                               | 22 |
| ENBREL SURECLICK                                                      | 81     | <i>erythromycin (acne aid) .....</i>                                     | 95 | <i>exemestane .....</i>                                | 28 |
| <i>endocet tab 10-325mg .....</i>                                     | 17     | <i>erythromycin (ophth) .....</i>                                        | 89 | EXXUA.....                                             | 48 |
| <i>endocet tab 2.5-325mg .....</i>                                    | 17     | <i>erythromycin base .</i>                                               | 25 | EXXUA TITRATION PACK.....                              | 49 |
| <i>endocet tab 5-325mg .....</i>                                      | 17     | <i>erythromycin ethylsuccinate.....</i>                                  | 25 | EYSUVIS.....                                           | 90 |
| <i>endocet tab 7.5-325mg .....</i>                                    | 17     | <i>erythromycin lactobionate.....</i>                                    | 25 | EZALLOR SPRINKLE                                       | 42 |
| ENGERIX-B .....                                                       | 85     | ERZOFRI.....                                                             | 52 | <i>ezetimibe.....</i>                                  | 43 |
| <i>enilloring .....</i>                                               | 68     | <i>escitalopram oxalate .....</i>                                        | 48 | <i>ezetimibe-simvastatin tab 10-10 mg .....</i>        | 43 |
| <i>enoxaparin sodium .</i>                                            | 79     | <i>eslicarbazepine acetate .....</i>                                     | 55 | <i>ezetimibe-simvastatin tab 10-20 mg .....</i>        | 43 |
| ENSACOVE .....                                                        | 31     | <i>esomeprazole magnesium .....</i>                                      | 78 | <i>ezetimibe-simvastatin tab 10-40 mg .....</i>        | 43 |
| <i>enskyce .....</i>                                                  | 68     | <i>estarylla .....</i>                                                   | 68 | <i>ezetimibe-simvastatin tab 10-80 mg .....</i>        | 43 |
| ENSTILAR AER.....                                                     | 96     | <i>estradiol .....</i>                                                   | 72 | <b>F</b>                                               |    |
| <i>entacapone .....</i>                                               | 50     | <i>estradiol &amp; norethindrone acetate tab 0.5-0.1 mg .....</i>        | 72 | FABRAZYME .....                                        | 73 |
| <i>entecavir .....</i>                                                | 23     | <i>estradiol &amp; norethindrone acetate tab 1-0.5 mg .....</i>          | 72 | <i>falmina .....</i>                                   | 68 |
| ENTRESTO CAP 15-16MG .....                                            | 40     | <i>estradiol vaginal ....</i>                                            | 72 | <i>famciclovir .....</i>                               | 23 |
| ENTRESTO CAP 6-6MG .....                                              | 40     | <i>estradiol valerate ...</i>                                            | 72 | <i>famotidine .....</i>                                | 76 |
| <i>enulose .....</i>                                                  | 77     | <i>ethambutol hcl .....</i>                                              | 23 | <i>famotidine in nacl 0.9% iv soln 20 mg/50ml.....</i> | 76 |
| EPCLUSA PAK 150-37.5 .....                                            | 23     | <i>ethosuximide.....</i>                                                 | 55 | FANAPT .....                                           | 52 |
| EPCLUSA PAK 200-50MG .....                                            | 23     | <i>ethynodiol diacetate &amp; ethinyl estradiol tab 1 mg-50 mcg.....</i> | 68 | FANAPT PAK PACK A52                                    |    |
| EPCLUSA TAB 200-50MG .....                                            | 23     | <i>etodolac .....</i>                                                    | 16 | FANAPT PAK PACK B52                                    |    |
| EPCLUSA TAB 400-100 .....                                             | 23     | <i>etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr .....</i>   | 68 | FANAPT PAK PACK C52                                    |    |
| EPIDIOLEX .....                                                       | 55     | <i>etoposide.....</i>                                                    | 30 | FARXIGA.....                                           | 63 |
| <i>epinephrine (anaphylaxis).</i>                                     | 46, 93 | <i>etravirine.....</i>                                                   | 21 | FASENRA .....                                          | 93 |
| <i>eplerenone.....</i>                                                | 40     | EUCRISA.....                                                             | 98 | FASENRA PEN.....                                       | 93 |
| <i>ergotamine w/ caffeine tab 1-100 mg .....</i>                      | 60     | EULEXIN .....                                                            | 28 | <i>febuxostat .....</i>                                | 16 |
| ERIVEDGE.....                                                         | 32     |                                                                          |    | <i>feirza 1.5/30 .....</i>                             | 68 |
| ERLEADA .....                                                         | 28     |                                                                          |    | <i>feirza 1/20 .....</i>                               | 68 |
| <i>erlotinib hcl .....</i>                                            | 32     |                                                                          |    | <i>felbamate .....</i>                                 | 55 |
| <i>errin.....</i>                                                     | 68     |                                                                          |    | <i>felodipine.....</i>                                 | 44 |
|                                                                       |        |                                                                          |    | <i>fenofibrate .....</i>                               | 42 |
|                                                                       |        |                                                                          |    | <i>fenofibrate micronized .....</i>                    | 42 |
|                                                                       |        |                                                                          |    | <i>fentanyl.....</i>                                   | 16 |

|                                   |                                  |                                |
|-----------------------------------|----------------------------------|--------------------------------|
| <i>fesoterodine fumarate</i>      | <i>flurbiprofen sodium</i>       | FRUZAQLA .....                 |
| ..... 78                          | 89                               | 32                             |
| FETZIMA..... 49                   | <i>fluticasone propionate</i>    | FULPHILA..... 80               |
| FETZIMA CAP                       | ..... 97                         | <i>fulvestrant</i> ..... 28    |
| TITRATIO ..... 49                 | <i>fluticasone propionate</i>    | <i>furosemide</i> ..... 45     |
| FIASP ..... 65                    | (nasal)..... 94                  | <i>furosemide inj</i> ..... 45 |
| FIASP FLEXTOUCH . 65              | <i>fluticasone-salmeterol</i>    | <i>fyavolv tab 0.5mg-</i>      |
| FIASP PENFILL..... 65             | <i>aer powder ba 100-</i>        | <i>2.5mcg</i> ..... 72         |
| FIASP PUMPCART ... 65             | <i>50 mcg/act</i> ..... 95       | <i>fyavolv tab 1mg-5mcg</i>    |
| <i>fidaxomicin</i> ..... 25       | <i>fluticasone-salmeterol</i>    | ..... 72                       |
| <i>finasteride</i> ..... 78       | <i>aer powder ba 250-</i>        | FYCOMPA..... 55                |
| <i>finolimid hcl</i> ..... 61     | <i>50 mcg/act</i> ..... 95       | <b>G</b>                       |
| FINTEPLA..... 55                  | <i>fluticasone-salmeterol</i>    | <i>gabapentin</i> ..... 55, 56 |
| <i>finzala</i> ..... 68           | <i>aer powder ba 500-</i>        | <i>galantamine</i>             |
| FIRMAGON ..... 28                 | <i>50 mcg/act</i> ..... 95       | <i>hydrobromide</i> ..... 47   |
| <i>flac</i> ..... 90              | <i>fluvastatin sodium</i> .. 42  | <i>galbriela</i> ..... 68      |
| FLEBOGAMMA DIF.. 83               | <i>fluvoxamine maleate</i>       | <i>gallifrey</i> ..... 74      |
| <i>flecainide acetate</i> ... 42  | ..... 47                         | GAMASTAN INJ ..... 83          |
| <i>fluconazole</i> ..... 20       | <i>fondaparinux sodium</i>       | GAMMAGARD LIQUID               |
| <i>fluconazole in nacl</i>        | ..... 79                         | ..... 83                       |
| <i>0.9% inj 200</i>               | <i>formoterol fumarate</i> 92    | GAMMAGARD LIQUID               |
| <i>mg/100ml</i> ..... 20          | <i>fosamprenavir calcium</i>     | ERC..... 84                    |
| <i>fluconazole in nacl</i>        | ..... 21                         | GAMMAGARD S/D IGA              |
| <i>0.9% inj 400</i>               | <i>fosfomycin</i>                | LESS TH..... 84                |
| <i>mg/200ml</i> ..... 20          | <i>tromethamine</i> ..... 18     | GAMMAKED..... 84               |
| <i>flucytosine</i> ..... 20       | <i>fosinopril sodium</i> .... 39 | GAMMAPLEX..... 84              |
| <i>fludrocortisone acetate</i>    | <i>fosinopril sodium &amp;</i>   | GAMUNEX-C..... 84              |
| ..... 72                          | <i>hydrochlorothiazide</i>       | <i>ganciclovir sodium</i> . 23 |
| <i>flunisolide (nasal)</i> ... 94 | <i>tab 10-12.5 mg</i> ... 39     | GARDASIL 9..... 85             |
| <i>fluocinolone acetonide</i>     | <i>fosinopril sodium &amp;</i>   | <i>gatifloxacin (ophth)</i> 89 |
| ..... 97                          | <i>hydrochlorothiazide</i>       | GATTEX ..... 77                |
| <i>fluocinolone acetonide</i>     | <i>tab 20-12.5 mg</i> ... 39     | GAUZE PADS 2 ..... 65          |
| (otic) ..... 90                   | FOTIVDA..... 32                  | <i>gavilyte-c</i> ..... 77     |
| <i>fluocinonide</i> ..... 97      | FREESTYLE LB KIT                 | <i>gavilyte-g</i> ..... 77     |
| <i>fluocinonide emulsified</i>    | 14D/SEN..... 99                  | <i>gavilyte-n/ flavor pack</i> |
| <i>base</i> ..... 97              | FREESTYLE LB KIT                 | ..... 77                       |
| <i>fluorometholone</i>            | 2/SENSOR..... 99                 | GAVRETO..... 32                |
| (ophth) ..... 89                  | FREESTYLE LB KIT                 | <i>gefitinib</i> ..... 32      |
| <i>fluorouracil</i> ..... 27      | 3/SENSOR..... 99                 | <i>gemcitabine hcl</i> .... 27 |
| <i>fluorouracil (topical)</i> 98  | FREESTYLE LB MIS                 | <i>gemfibrozil</i> ..... 42    |
| <i>fluoxetine hcl</i> ..... 49    | 2/READER ..... 99                | GEMTESA..... 78                |
| <i>fluphenazine</i>               | FREESTYLE LB MIS                 | <i>generlac</i> ..... 77       |
| <i>decanoate</i> ..... 52         | 3/READER ..... 99                | <i>gengraf</i> ..... 84        |
| <i>fluphenazine hcl</i> ..... 52  | FREESTYLE MIS                    | GENOTROPIN ..... 73            |
| <i>flurbiprofen</i> ..... 16      | READER ..... 99                  | GENOTROPIN                     |
|                                   | FRINDOVYX..... 27                | MINIQUICK ..... 73             |

|                                                                |                                                                               |                                                                                     |
|----------------------------------------------------------------|-------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <i>gentamicin in saline</i><br><i>inj 0.8 mg/ml</i> ..... 18   | HADLIMA PUSHTOUCH<br>..... 81                                                 | <i>hydrocodone-</i><br><i>acetaminophen tab</i><br><i>5-325 mg</i> ..... 17         |
| <i>gentamicin in saline</i><br><i>inj 1 mg/ml</i> ..... 18     | HAEGARDA ..... 80                                                             | <i>hydrocodone-</i><br><i>acetaminophen tab</i><br><i>7.5-325 mg</i> ..... 17       |
| <i>gentamicin in saline</i><br><i>inj 1.2 mg/ml</i> ..... 18   | <i>hailey 1.5/30</i> ..... 68                                                 | <i>hydrocodone-</i><br><i>ibuprofen tab 7.5-</i><br><i>200 mg</i> ..... 17          |
| <i>gentamicin in saline</i><br><i>inj 1.6 mg/ml</i> ..... 18   | <i>hailey 24 fe</i> ..... 68                                                  | <i>hydrocortisone</i> ..... 72                                                      |
| <i>gentamicin in saline</i><br><i>inj 2 mg/ml</i> ..... 18     | <i>hailey fe 1/20</i> ..... 68                                                | <i>hydrocortisone</i><br><i>(intrarectal)</i> ..... 76                              |
| <i>gentamicin sulfate</i> .. 18                                | <i>halobetasol propionate</i><br>..... 97                                     | <i>hydrocortisone (rectal)</i><br>..... 98                                          |
| <i>gentamicin sulfate</i><br><i>(ophth)</i> ..... 89           | <i>haloperidol</i> ..... 52                                                   | <i>hydrocortisone</i><br><i>(topical)</i> ..... 97                                  |
| <i>gentamicin sulfate</i><br><i>(topical)</i> ..... 96         | <i>haloperidol decanoate</i><br>..... 52                                      | <i>hydrocortisone sod</i><br><i>succinate</i> ..... 72                              |
| GENVOYA TAB ..... 22                                           | <i>haloperidol lactate</i> .. 52                                              | <i>hydrocortisone</i><br><i>valerate</i> ..... 97                                   |
| GILOTRIF ..... 32                                              | HAVRIX ..... 85                                                               | <i>hydrocortisone w/</i><br><i>acetic acid otic soln</i><br><i>1-2%</i> ..... 90    |
| <i>glatiramer acetate</i> .. 61,<br>62                         | <i>heather</i> ..... 68                                                       | <i>hydromorphone hcl</i> 17                                                         |
| <i>glatopa</i> ..... 62                                        | HEP SOD/NACL INJ<br>25000UNT ..... 79                                         | <i>hydroxychloroquine</i><br><i>sulfate</i> ..... 83                                |
| GLEOSTINE ..... 27                                             | <i>heparin sodium</i><br><i>(porcine)</i> ..... 79                            | <i>hydroxyurea</i> ..... 29                                                         |
| <i>glimepiride</i> ..... 63                                    | HEPLISAV-B ..... 85                                                           | <i>hydroxyzine hcl</i> ..... 91                                                     |
| <i>glipizide</i> ..... 63, 64                                  | HERCEP HYLEC SOL<br>60-10000 ..... 32                                         | <i>hydroxyzine pamoate</i><br>..... 92                                              |
| <i>glipizide-metformin hcl</i><br><i>tab 2.5-250 mg</i> ... 64 | HERCEPTIN ..... 32                                                            | HYRNUO ..... 32                                                                     |
| <i>glipizide-metformin hcl</i><br><i>tab 2.5-500 mg</i> ... 64 | HERCESSI ..... 32                                                             | <b>I</b>                                                                            |
| <i>glipizide-metformin hcl</i><br><i>tab 5-500 mg</i> ..... 64 | HERNEXEOS ..... 32                                                            | <i>ibandronate sodium</i> 66                                                        |
| <i>glycopyrrolate</i> ..... 76                                 | HERZUMA ..... 32                                                              | IBRANCE ..... 32                                                                    |
| <i>glydo</i> ..... 98                                          | HIBERIX ..... 85                                                              | IBTROZI ..... 32                                                                    |
| GLYXAMBI TAB 10-5<br>MG ..... 64                               | HUMIRA ..... 81                                                               | <i>ibu</i> ..... 16                                                                 |
| GLYXAMBI TAB 25-5<br>MG ..... 64                               | HUMIRA PEN ..... 81                                                           | <i>ibuprofen</i> ..... 16                                                           |
| GOMEKLI ..... 32                                               | HUMIRA PEN KIT<br>PS/UV ..... 81                                              | <i>icatibant acetate</i> .... 80                                                    |
| <i>granisetron hcl</i> ..... 75                                | HUMIRA PEN-<br>CD/UC/HS START 81                                              | <i>iclevia</i> ..... 68                                                             |
| <i>griseofulvin microsize</i><br>..... 20                      | HUMULIN R U-500<br>(CONCENTR..... 65                                          | ICLUSIG ..... 32                                                                    |
| <i>griseofulvin</i><br><i>ultramicrosize</i> ..... 20          | HUMULIN R U-500<br>KWIKPEN ..... 65                                           | IDHIFA ..... 33                                                                     |
| <i>guanfacine hcl</i> ..... 46                                 | <i>hydralazine hcl</i> ..... 46                                               | <i>imatinib mesylate</i> .. 33                                                      |
| <i>guanfacine hcl (adhd)</i><br>..... 59                       | <i>hydrochlorothiazide</i> 45                                                 | IMBRUVICA ..... 33                                                                  |
| <b>H</b>                                                       | <i>hydrocodone bitartrate</i><br>..... 16, 17                                 | <i>imipenem-cilastatin</i><br><i>intravenous for soln</i><br><i>250 mg</i> ..... 18 |
| HADLIMA ..... 81                                               | <i>hydrocodone-</i><br><i>acetaminophen soln</i><br><i>7.5-325 mg/15ml</i> 17 |                                                                                     |
|                                                                | <i>hydrocodone-</i><br><i>acetaminophen tab</i><br><i>10-325 mg</i> ..... 17  |                                                                                     |

|                               |                               |                              |    |
|-------------------------------|-------------------------------|------------------------------|----|
| <i>imipenem-cilastatin</i>    | <i>irbesartan-</i>            | <i>jencycla</i> .....        | 69 |
| <i>intravenous for soln</i>   | <i>hydrochlorothiazide</i>    | JENTADUETO TAB 2.5-          |    |
| <i>500 mg</i> .....           | <i>tab 150-12.5 mg</i> .      | 1000 .....                   | 64 |
| <i>imipramine hcl</i> .....   | <i>irbesartan-</i>            | JENTADUETO TAB 2.5-          |    |
| <i>imiquimod</i> .....        | <i>hydrochlorothiazide</i>    | 500 .....                    | 64 |
| IMKELDI .....                 | <i>tab 300-12.5 mg</i> .      | JENTADUETO TAB 2.5-          |    |
| IMOVAX RABIES                 | <i>irinotecan hcl</i> .....   | 850 .....                    | 64 |
| (H.D.C.V.) .....              | ISENTRESS .....               | JENTADUETO TAB XR            |    |
| IMPAVIDO .....                | ISENTRESS HD .....            | 2.5-1000MG .....             | 64 |
| INBRIJA .....                 | <i>isibloom</i> .....         | JENTADUETO TAB XR            |    |
| <i>incassia</i> .....         | ISOLYTE-P INJ /D5W            | 5-1000MG .....               | 64 |
| INCRELEX .....                | .....                         | <i>jinteli</i> .....         | 72 |
| INCRUSE ELLIPTA ..            | ISOLYTE-S INJ PH 7.4          | <i>jolessa</i> .....         | 69 |
| <i>indapamide</i> .....       | .....                         | <i>juleber</i> .....         | 69 |
| INFANRIX INJ .....            | <i>isoniazid</i> .....        | JULUCA TAB 50-25MG           |    |
| INFLIXIMAB .....              | <i>isosorbide dinitrate</i> . | .....                        | 22 |
| INLURIYO .....                | <i>isosorbide mononitrate</i> | <i>junel 1.5/30</i> .....    | 69 |
| INLYTA .....                  | .....                         | <i>junel 1/20</i> .....      | 69 |
| INQOVI TAB 35-                | <i>isotretinoin</i> .....     | <i>junel fe 1.5/30</i> ..... | 69 |
| 100MG .....                   | <i>isradipine</i> .....       | <i>junel fe 1/20</i> .....   | 69 |
| INREBIC .....                 | ITOVEBI .....                 | <i>junel fe 24</i> .....     | 69 |
| INSULIN PEN                   | <i>itraconazole</i> .....     | JYLAMVO .....                | 83 |
| NEEDLES:                      | <i>ivabradine hcl</i> .....   | JYNNEOS .....                | 85 |
| EMBECTA-BD .....              | <i>ivermectin</i> .....       | <b>K</b>                     |    |
| INSULIN SAFETY                | IWILFIN .....                 | KADCYLA .....                | 33 |
| NEEDLES:                      | IXIARO INJ .....              | <i>kaitlib fe</i> .....      | 69 |
| EMBECTA-BD .....              | <b>J</b>                      | KALETRA SOL .....            | 22 |
| INSULIN SYRINGES:             | <i>jaimiess</i> .....         | KALYDECO .....               | 93 |
| EMBECTA-BD .....              | JAKAFI .....                  | KANJINTI .....               | 33 |
| INTELENCE .....               | <i>jantoven</i> .....         | <i>kariva</i> .....          | 69 |
| INTRALIPID .....              | JANUMET TAB 50-               | <i>kcl 10 meq/l (0.075%)</i> |    |
| <i>introvale</i> .....        | 1000 .....                    | <i>in dextrose 5% &amp;</i>  |    |
| INVEGA HAFYERA... 52          | JANUMET TAB 50-               | <i>nacl 0.45% inj</i> ....   | 86 |
| INVEGA SUSTENNA 52            | 500MG .....                   | <i>kcl 20 meq/l (0.149%)</i> |    |
| INVEGA TRINZA..... 52         | JANUMET XR TAB 100-           | <i>in nacl 0.45% inj</i> .   | 87 |
| IPOL INJ INACTIVE. 85         | 1000 .....                    | <i>kcl 20 meq/l (0.149%)</i> |    |
| <i>ipratropium bromide</i> 91 | JANUMET XR TAB 50-            | <i>in nacl 0.9% inj</i> ..   | 87 |
| <i>ipratropium bromide</i>    | 1000 .....                    | <i>kcl 20 meq/l (0.15%)</i>  |    |
| (nasal) .....                 | JANUMET XR TAB 50-            | <i>in dextrose 5% &amp;</i>  |    |
| <i>ipratropium-albuterol</i>  | 500MG .....                   | <i>nacl 0.45% inj</i> ....   | 86 |
| <i>nebu soln 0.5-2.5(3)</i>   | JANUVIA .....                 | <i>kcl 20 meq/l (0.15%)</i>  |    |
| <i>mg/3ml</i> .....           | JARDIANCE .....               | <i>in dextrose 5% &amp;</i>  |    |
| <i>irbesartan</i> .....       | <i>jasmiel</i> .....          | <i>nacl 0.9% inj</i> .....   | 86 |
|                               | <i>javygtor</i> .....         | <i>kcl 20 meq/l (0.15%)</i>  |    |
|                               | JAYPIRCA .....                | <i>in nacl 0.45% inj</i> .   | 86 |

|                               |                                  |                                 |
|-------------------------------|----------------------------------|---------------------------------|
| <i>kcl 20 meq/l (0.15%)</i>   | <i>klor-con</i> ..... 87         | LENVIMA 12MG DAILY              |
| <i>in nacl 0.9% inj...</i> 86 | <i>klor-con 10</i> ..... 87      | DOSE ..... 34                   |
| <i>kcl 30 meq/l (0.224%)</i>  | KLOR-CON 10..... 87              | LENVIMA 20 MG DAILY             |
| <i>in dextrose 5% &amp;</i>   | KLOR-CON 8 ..... 87              | DOSE ..... 34                   |
| <i>nacl 0.45% inj ....</i> 87 | <i>klor-con m10</i> ..... 87     | LENVIMA 4 MG DAILY              |
| <i>kcl 40 meq/l (0.298%)</i>  | <i>klor-con m15</i> ..... 87     | DOSE ..... 34                   |
| <i>in nacl 0.9% inj...</i> 87 | <i>klor-con m20</i> ..... 87     | LENVIMA 8 MG DAILY              |
| <i>kcl 40 meq/l (0.3%) in</i> | KLOXXADO..... 63                 | DOSE ..... 34                   |
| <i>dextrose 5% &amp; nacl</i> | KOMZIFTI ..... 34                | LENVIMA CAP 14 MG               |
| <i>0.45% inj</i> ..... 87     | KOSELUGO..... 34                 | ..... 34                        |
| <i>kcl 40 meq/l (0.3%) in</i> | <i>kourzeq</i> ..... 99          | LENVIMA CAP 18 MG               |
| <i>dextrose 5% &amp; nacl</i> | KRAZATI..... 34                  | ..... 34                        |
| <i>0.9% inj</i> ..... 87      | <i>kurvelo</i> ..... 69          | LENVIMA CAP 24 MG               |
| <i>kcl 40 meq/l (0.3%) in</i> | <b>L</b>                         | ..... 34                        |
| <i>nacl 0.9% inj ....</i> 87  | <i>labetalol hcl</i> ..... 43    | <i>lessina</i> ..... 69         |
| KCL/D5W/NACL INJ              | <i>lacosamide</i> ..... 56       | <i>letrozole</i> ..... 28       |
| 0.15/0.2 ..... 87             | <i>lacosamide oral</i> ..... 56  | <i>leucovorin calcium</i> . 29  |
| KCL/D5W/NACL INJ              | LACTATED RIN INJ . 87            | LEUKERAN ..... 27               |
| 0.3/0.9% ..... 87             | <i>lactated ringer's</i>         | <i>leuprolide acetate</i> .. 28 |
| <i>kelnor 1/35</i> ..... 69   | <i>solution</i> ..... 87         | <i>levabuterol hcl</i> ..... 92 |
| KERENDIA..... 40              | <i>lactic acid (ammonium</i>     | <i>levabuterol tartrate</i> 92  |
| KESIMPTA ..... 62             | <i>lactate)</i> ..... 98         | <i>levetiracetam</i> ..... 56   |
| <i>ketoconazole</i> ..... 20  | <i>lactulose</i> ..... 77        | <i>levetiracetam in</i>         |
| <i>ketoconazole (topical)</i> | <i>lactulose</i>                 | <i>sodium chloride iv</i>       |
| ..... 96                      | <i>(encephalopathy)</i> 77       | <i>soln 1000 mg/100ml</i>       |
| <i>ketorolac</i>              | <i>lamivudine</i> ..... 21       | ..... 56                        |
| <i>tromethamine</i>           | <i>lamivudine (hbv)</i> .... 23  | <i>levetiracetam in</i>         |
| <i>(ophth)</i> ..... 89       | <i>lamivudine-zidovudine</i>     | <i>sodium chloride iv</i>       |
| KEYTRUDA ..... 33             | <i>tab 150-300 mg</i> .. 22      | <i>soln 1500 mg/100ml</i>       |
| KEYTRUDA INJ QLEX             | <i>lamotrigine</i> ..... 56      | ..... 56                        |
| 395-4800 MG-                  | <i>lanreotide acetate</i> .. 74  | <i>levetiracetam in</i>         |
| UNIT/2.4ML..... 33            | <i>lansoprazole</i> ..... 78     | <i>sodium chloride iv</i>       |
| KEYTRUDA INJ QLEX             | LANTUS ..... 65                  | <i>soln 500 mg/100ml</i>        |
| 790-9600 MG-                  | LANTUS SOLOSTAR 65               | ..... 56                        |
| UNIT/4.8ML..... 33            | <i>lapatinib ditosylate</i> . 34 | <i>levobunolol hcl</i> ..... 90 |
| KINERET ..... 82              | <i>larin 1.5/30</i> ..... 69     | <i>levocarnitine</i>            |
| KINRIX INJ..... 85            | <i>larin 1/20</i> ..... 69       | <i>(metabolic</i>               |
| <i>kionex</i> ..... 67        | <i>larin 24 fe</i> ..... 69      | <i>modifiers)</i> ..... 74      |
| KISQALI 200 DOSE 33           | <i>larin fe 1.5/30</i> ..... 69  | <i>levocetirizine</i>           |
| KISQALI 400 DOSE 33           | <i>larin fe 1/20</i> ..... 69    | <i>dihydrochloride</i> ... 92   |
| KISQALI 400 PAK               | <i>latanoprost</i> ..... 90      | <i>levofloxacin</i> ..... 25    |
| FEMARA ..... 33               | LAZCLUZE..... 34                 | <i>levofloxacin in d5w iv</i>   |
| KISQALI 600 DOSE 34           | <i>leflunomide</i> ..... 83      | <i>soln 250 mg/50ml</i> 25      |
| KISQALI 600 PAK               | <i>lenalidomide</i> ..... 29     | <i>levofloxacin in d5w iv</i>   |
| FEMARA ..... 34               | LENVIMA 10 MG DAILY              | <i>soln 500 mg/100ml</i>        |
| <i>klayesta</i> ..... 96      | DOSE ..... 34                    | ..... 25                        |

|                                                                               |    |                                                                      |    |                                                                       |        |
|-------------------------------------------------------------------------------|----|----------------------------------------------------------------------|----|-----------------------------------------------------------------------|--------|
| <i>levofloxacin in d5w iv soln 750 mg/150ml</i> .....                         | 25 | <i>LINEZOLID INJ 2MG/ML</i> .....                                    | 19 | <i>losartan potassium &amp; hydrochlorothiazide tab 100-25 mg....</i> | 41     |
| <i>levonest.....</i>                                                          | 69 | <i>LINZESS</i> .....                                                 | 77 | <i>losartan potassium &amp; hydrochlorothiazide tab 50-12.5 mg...</i> | 40     |
| <i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg &amp;eth est 0.01 mg</i>       | 69 | <i>liomny</i> .....                                                  | 75 | <i>LOTEMAX.....</i>                                                   | 89     |
| <i>levonorgestrel &amp; ethinyl estradiol (91-day) tab 0.15-0.03 mg</i> ..... | 69 | <i>liothyronine sodium</i>                                           | 75 | <i>loteprednol etabonate-tobramycin ophth susp 0.5-0.3%....</i>       | 88     |
| <i>levonorgestrel &amp; ethinyl estradiol tab 0.1 mg-20 mcg ...</i>           | 69 | <i>lisdexamphetamine dimesylate</i> .....                            | 59 | <i>lovastatin.....</i>                                                | 42     |
| <i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i> .....     | 69 | <i>lisinopril.....</i>                                               | 39 | <i>low-ogestrel</i> .....                                             | 70     |
| <i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i> .....      | 69 | <i>lisinopril &amp; hydrochlorothiazide tab 10-12.5 mg...</i>        | 39 | <i>loxapine succinate..</i>                                           | 52     |
| <i>levonorg-eth est tab 0.1-0.02mg(84) &amp; eth est tab 0.01mg(7).....</i>   | 69 | <i>lisinopril &amp; hydrochlorothiazide tab 20-12.5 mg...</i>        | 39 | <i>luizza 1.5/30</i> .....                                            | 70     |
| <i>levora 0.15/30-28..</i>                                                    | 69 | <i>lisinopril &amp; hydrochlorothiazide tab 20-25 mg</i> .....       | 39 | <i>luizza 1/20</i> .....                                              | 70     |
| <i>levo-t</i> .....                                                           | 75 | <i>lithium.....</i>                                                  | 61 | <i>LUMAKRAS.....</i>                                                  | 34, 35 |
| <i>levothyroxine sodium</i> .....                                             | 75 | <i>lithium carbonate ...</i>                                         | 61 | <i>LUMIGAN</i> .....                                                  | 90     |
| <i>levoxyl</i> .....                                                          | 75 | <i>LIVTENCITY.....</i>                                               | 23 | <i>LUMIZYME</i> .....                                                 | 74     |
| <i>l-glutamine (sickle cell).....</i>                                         | 80 | <i>loestrin 1.5/30-21 ..</i>                                         | 69 | <i>LUPRON DEPOT (1-MONTH).....</i>                                    | 28     |
| <i>lidocaine</i> .....                                                        | 98 | <i>loestrin 1/20-21.....</i>                                         | 69 | <i>LUPRON DEPOT (3-MONTH).....</i>                                    | 28     |
| <i>lidocaine hcl</i> .....                                                    | 98 | <i>loestrin fe 1.5/30 ...</i>                                        | 69 | <i>LUPRON DEPOT-PED (1-MONTH.....</i>                                 | 74     |
| <i>lidocaine hcl (local anesth.)</i> .....                                    | 16 | <i>loestrin fe 1/20.....</i>                                         | 69 | <i>LUPRON DEPOT-PED (3-MONTH.....</i>                                 | 74     |
| <i>lidocaine hcl (mouth-throat).....</i>                                      | 99 | <i>lojaimiess</i> .....                                              | 69 | <i>LUPRON DEPOT-PED (6-MONTH.....</i>                                 | 74     |
| <i>lidocaine-prilocaine cream 2.5-2.5%..</i>                                  | 98 | <i>LOKELMA</i> .....                                                 | 67 | <i>lurasidone hcl.....</i>                                            | 52     |
| <i>lidocan</i> .....                                                          | 98 | <i>lomustine.....</i>                                                | 27 | <i>lutera</i> .....                                                   | 70     |
| <i>LILETTA</i> .....                                                          | 69 | <i>LONSURF TAB 15-6.14</i> .....                                     | 27 | <i>LYBALVI TAB 10-10MG</i> .....                                      | 52     |
| <i>linezolid</i> .....                                                        | 19 | <i>LONSURF TAB 20-8.19</i> .....                                     | 28 | <i>LYBALVI TAB 15-10MG</i> .....                                      | 52     |
|                                                                               |    | <i>loperamide hcl.....</i>                                           | 77 | <i>LYBALVI TAB 20-10MG</i> .....                                      | 52     |
|                                                                               |    | <i>lopinavir-ritonavir tab 100-25 mg</i> .....                       | 22 | <i>LYBALVI TAB 5-10MG</i> .....                                       | 52     |
|                                                                               |    | <i>lopinavir-ritonavir tab 200-50 mg</i> .....                       | 22 | <i>lyleq.....</i>                                                     | 70     |
|                                                                               |    | <i>lorazepam</i> .....                                               | 47 | <i>lyllana</i> .....                                                  | 72     |
|                                                                               |    | <i>lorazepam intensol.</i>                                           | 47 | <i>LYNPARZA.....</i>                                                  | 35     |
|                                                                               |    | <i>LORBRENA</i> .....                                                | 34 | <i>LYSODREN</i> .....                                                 | 28     |
|                                                                               |    | <i>loryna</i> .....                                                  | 69 | <i>LYTGOBI (12 MG DAILY DOSE).....</i>                                | 35     |
|                                                                               |    | <i>losartan potassium.</i>                                           | 41 |                                                                       |        |
|                                                                               |    | <i>losartan potassium &amp; hydrochlorothiazide tab 100-12.5 mg.</i> | 40 |                                                                       |        |

|                                                                          |           |                                                                        |        |                                             |           |
|--------------------------------------------------------------------------|-----------|------------------------------------------------------------------------|--------|---------------------------------------------|-----------|
| LYTGOBI (16 MG<br>DAILY DOSE) .....                                      | 35        | <i>memantine hcl-<br/>donepezil hcl cap er<br/>24hr 28-10 mg ...</i>   | 48     | <i>metoprolol tartrate</i>                  | 43,<br>44 |
| LYTGOBI (20 MG<br>DAILY DOSE) .....                                      | 35        | MENQUADFI .....                                                        | 85     | <i>metronidazole</i> .....                  | 19        |
| <i>lyza</i> .....                                                        | 70        | MENVEO INJ .....                                                       | 85     | <i>metronidazole<br/>(topical)</i> .....    | 98        |
| <b>M</b>                                                                 |           | MENVEO SOL .....                                                       | 85     | <i>metronidazole vaginal</i><br>.....       | 79        |
| <i>magnesium sulfate</i> .                                               | 87        | <i>mercaptapurine</i> ....                                             | 28     | <i>metyrosine</i> .....                     | 46        |
| MAGNESIUM SULFATE<br>.....                                               | 87        | <i>meropenem</i> .....                                                 | 19     | <i>mibelas 24 fe</i> .....                  | 70        |
| <i>magnesium sulfate in<br/>dextrose 5% iv soln<br/>1 gm/100ml</i> ..... | 87        | <i>mesalamine</i> .....                                                | 76     | <i>micafungin sodium</i> .                  | 20        |
| <i>malathion</i> .....                                                   | 99        | <i>mesalamine w/<br/>cleanser</i> .....                                | 76     | <i>microgestin 1.5/30</i> .                 | 70        |
| <i>maraviroc</i> .....                                                   | 21        | <i>mesna</i> .....                                                     | 29     | <i>microgestin 1/20</i> ....                | 70        |
| <i>marlissa</i> .....                                                    | 70        | <i>metformin hcl</i> .....                                             | 64     | <i>microgestin fe 1.5/30</i><br>.....       | 70        |
| MARPLAN .....                                                            | 49        | <i>methadone hcl</i> .....                                             | 17     | <i>microgestin fe 1/20</i>                  | 70        |
| MATULANE .....                                                           | 29        | <i>methadone<br/>hydrochloride i</i> ....                              | 17     | <i>midodrine hcl</i> .....                  | 46        |
| <i>matzim la</i> .....                                                   | 44        | <i>methazolamide</i> .....                                             | 45     | MIEBO .....                                 | 90        |
| MAVYRET PAK 50-<br>20MG .....                                            | 23        | <i>methenamine<br/>hippurate</i> .....                                 | 19     | <i>mifepristone<br/>(hyperglycemia)</i> ..  | 74        |
| MAVYRET TAB 100-<br>40MG .....                                           | 23        | <i>methimazole</i> .....                                               | 75     | <i>mili</i> .....                           | 70        |
| <i>meclizine hcl</i> .....                                               | 75        | <i>methocarbamol</i> .....                                             | 62     | <i>mimvey</i> .....                         | 72        |
| <i>medroxyprogesterone<br/>acetate</i> .....                             | 74        | <i>methotrexate sodium</i><br>.....                                    | 28, 83 | <i>minocycline hcl</i> .....                | 26        |
| <i>medroxyprogesterone<br/>acetate<br/>(contraceptive)</i> ...           | 70        | <i>methoxsalen rapid</i> ..                                            | 96     | <i>minoxidil</i> .....                      | 46        |
| <i>mefloquine hcl</i> .....                                              | 20        | <i>methsuximide</i> .....                                              | 56     | <i>mirtazapine</i> .....                    | 49        |
| <i>megestrol acetate</i> .                                               | 28,<br>74 | <i>methylphenidate hcl</i><br>.....                                    | 59, 60 | <i>misoprostol</i> .....                    | 77        |
| <i>megestrol acetate<br/>(appetite)</i> .....                            | 74        | <i>methylprednisolone</i> 72,<br>73                                    |        | M-M-R II INJ .....                          | 85        |
| MEKINIST .....                                                           | 35        | <i>methylprednisolone<br/>acetate</i> .....                            | 73     | M-NATAL PLUS TAB                            | 87        |
| MEKTOVI .....                                                            | 35        | <i>methylprednisolone<br/>sod succ</i> .....                           | 73     | <i>modafinil</i> .....                      | 62        |
| <i>meleya</i> .....                                                      | 70        | <i>metoclopramide hcl</i>                                              | 75     | MODEYSO .....                               | 30        |
| <i>meloxicam</i> .....                                                   | 16        | <i>metolazone</i> .....                                                | 45     | <i>moexipril hcl</i> .....                  | 39        |
| <i>memantine hcl</i> .....                                               | 48        | <i>metoprolol &amp;<br/>hydrochlorothiazide<br/>tab 100-25 mg</i> .... | 43     | <i>molindone hcl</i> .....                  | 52        |
| <i>memantine hcl-<br/>donepezil hcl cap er<br/>24hr 14-10 mg ...</i>     | 48        | <i>metoprolol &amp;<br/>hydrochlorothiazide<br/>tab 100-50 mg</i> .... | 43     | <i>mometasone furoate</i><br>.....          | 97        |
| <i>memantine hcl-<br/>donepezil hcl cap er<br/>24hr 21-10 mg ...</i>     | 48        | <i>metoprolol &amp;<br/>hydrochlorothiazide<br/>tab 50-25 mg</i> ....  | 43     | <i>mometasone furoate<br/>(nasal)</i> ..... | 94        |
|                                                                          |           | <i>metoprolol succinate</i><br>.....                                   | 43     | MONJUVI .....                               | 35        |
|                                                                          |           |                                                                        |        | <i>mono-lynyah</i> .....                    | 70        |
|                                                                          |           |                                                                        |        | <i>montelukast sodium</i>                   | 92        |
|                                                                          |           |                                                                        |        | <i>morphine sulfate</i> ....                | 17        |
|                                                                          |           |                                                                        |        | MOUNJARO .....                              | 64        |
|                                                                          |           |                                                                        |        | MOVANTIK .....                              | 77        |
|                                                                          |           |                                                                        |        | <i>moxifloxacin hcl</i> .....               | 25        |
|                                                                          |           |                                                                        |        | <i>moxifloxacin hcl<br/>(ophth)</i> .....   | 89        |

|                                                                           |    |                                                                         |    |                                                                           |    |
|---------------------------------------------------------------------------|----|-------------------------------------------------------------------------|----|---------------------------------------------------------------------------|----|
| <i>moxifloxacin hcl 400 mg/250ml in sodium chloride 0.8% inj.</i>         | 25 | <i>neomycin-polymyxin-dexamethasone ophth susp 0.1%.</i>                | 88 | <i>norethindrone (contraceptive) ...</i>                                  | 70 |
| MRESVIA .....                                                             | 85 | <i>neomycin-polymyxin-hc ophth susp .....</i>                           | 88 | <i>norethindrone ace &amp; ethinyl estradiol tab 1 mg-20 mcg .....</i>    | 70 |
| MULTAQ.....                                                               | 42 | <i>neomycin-polymyxin-hc otic soln 1% ...</i>                           | 90 | <i>norethindrone ace &amp; ethinyl estradiol tab 1.5 mg-30 mcg ...</i>    | 70 |
| <i>multiple electrolytes ph 5.5 .....</i>                                 | 87 | <i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1% .....</i> | 91 | <i>norethindrone ace &amp; ethinyl estradiol-fe tab 1 mg-20 mcg</i>       | 70 |
| <i>mupirocin .....</i>                                                    | 96 | NERLYNX .....                                                           | 35 | <i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>       | 70 |
| <i>mycophenolate mofetil .....</i>                                        | 84 | <i>neuac.....</i>                                                       | 95 | <i>norethindrone acetate .....</i>                                        | 75 |
| <i>mycophenolate sodium .....</i>                                         | 84 | <i>nevirapine.....</i>                                                  | 21 | <i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg ..</i>      | 72 |
| MYRBETRIQ.....                                                            | 78 | NEXLETOL.....                                                           | 43 | <i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg .....</i>       | 72 |
| <b>N</b>                                                                  |    | NEXLIZET TAB 180/10MG .....                                             | 43 | <i>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg .....</i> | 70 |
| <i>nabumetone .....</i>                                                   | 16 | NEXPLANON .....                                                         | 70 | <i>norgestimate &amp; ethinyl estradiol tab 0.25 mg-35 mcg .....</i>      | 70 |
| <i>nadolol .....</i>                                                      | 44 | <i>niacin (antihyperlipidemic) .....</i>                                | 43 | <i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg .....</i>  | 70 |
| <i>nafcillin sodium.....</i>                                              | 26 | <i>nicardipine hcl .....</i>                                            | 44 | <i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg .....</i>  | 70 |
| NAGLAZYME .....                                                           | 74 | NICOTROL NS.....                                                        | 63 | <i>norlyroc.....</i>                                                      | 70 |
| <i>naloxone hcl.....</i>                                                  | 63 | <i>nifedipine.....</i>                                                  | 44 | <i>nortrel 0.5/35 (28).</i>                                               | 70 |
| <i>naltrexone hcl.....</i>                                                | 63 | <i>nikki.....</i>                                                       | 70 | <i>nortrel 1/35 (21) ...</i>                                              | 70 |
| NAMZARIC CAP 7-10MG .....                                                 | 48 | <i>nilotinib hcl .....</i>                                              | 35 | <i>nortrel 1/35 (28) ...</i>                                              | 70 |
| <i>naproxen .....</i>                                                     | 16 | <i>nilutamide.....</i>                                                  | 28 | <i>nortrel 7/7/7 .....</i>                                                | 70 |
| <i>naproxen sodium ...</i>                                                | 16 | <i>nimodipine .....</i>                                                 | 44 | <i>nortriptyline hcl .....</i>                                            | 49 |
| <i>naratriptan hcl.....</i>                                               | 60 | NINLARO .....                                                           | 35 | NORVIR.....                                                               | 21 |
| NATACYN .....                                                             | 89 | <i>nisoldipine .....</i>                                                | 44 | NOVOLIN INJ 70/30                                                         | 65 |
| <i>nateglinide .....</i>                                                  | 64 | <i>nitazoxanide.....</i>                                                | 19 |                                                                           |    |
| NAYZILAM.....                                                             | 56 | <i>nitisinone.....</i>                                                  | 74 |                                                                           |    |
| <i>nebivolol hcl .....</i>                                                | 44 | NITRO-BID.....                                                          | 46 |                                                                           |    |
| <i>necon 0.5/35-28 ....</i>                                               | 70 | <i>nitrofurantoin macrocrystal.....</i>                                 | 19 |                                                                           |    |
| <i>nefazodone hcl .....</i>                                               | 49 | <i>nitrofurantoin monohyd macro ..</i>                                  | 19 |                                                                           |    |
| <i>neomycin sulfate....</i>                                               | 19 | <i>nitroglycerin .....</i>                                              | 46 |                                                                           |    |
| <i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin .....</i> | 89 | <i>nitroglycerin (intra-anal) .....</i>                                 | 98 |                                                                           |    |
| <i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml .....</i> | 89 | <i>nizatidine.....</i>                                                  | 76 |                                                                           |    |
| <i>neomycin-polymyxin-dexamethasone ophth oint 0.1%..</i>                 | 88 | <i>nora-be .....</i>                                                    | 70 |                                                                           |    |
|                                                                           |    | <i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</i>         | 70 |                                                                           |    |

|                                              |                                                                                               |                                                                         |
|----------------------------------------------|-----------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|
| NOVOLIN INJ 70/30 FP<br>..... 65             | <i>olanzapine</i> ..... 53                                                                    | OMNIPOD 5 L2 KIT<br>INTRO G6 ..... 66                                   |
| NOVOLIN N ..... 65                           | <i>olmesartan medoxomil</i><br>..... 41                                                       | OMNIPOD 5 L2 MIS<br>PODS G6..... 66                                     |
| NOVOLIN N FLEXPEN<br>..... 65                | <i>olmesartan medoxomil-<br/>hydrochlorothiazide</i><br><i>tab 20-12.5 mg...</i> 41           | OMNIPOD DASH KIT<br>INTRO ..... 66                                      |
| NOVOLIN R ..... 65                           | <i>olmesartan medoxomil-<br/>hydrochlorothiazide</i><br><i>tab 40-12.5 mg...</i> 41           | OMNIPOD DASH MIS<br>PODS ..... 66                                       |
| NOVOLIN R FLEXPEN<br>..... 66                | <i>olmesartan medoxomil-<br/>hydrochlorothiazide</i><br><i>tab 40-25 mg</i> .... 41           | <i>ondansetron</i> ..... 75                                             |
| NOVOLOG ..... 66                             | <i>olmesartan amlodipine-<br/>hydrochlorothiazide</i><br><i>tab 20-5-12.5 mg</i> 41           | <i>ondansetron hcl</i> .... 76                                          |
| NOVOLOG FLEXPEN 66                           | <i>olmesartan amlodipine-<br/>hydrochlorothiazide</i><br>..... 41                             | ONTRUZANT..... 35                                                       |
| NOVOLOG FLEXPEN<br>RELION..... 66            | <i>olmesartan amlodipine-<br/>hydrochlorothiazide</i><br><i>tab 40-10-12.5 mg</i><br>..... 41 | ONUREG ..... 28                                                         |
| NOVOLOG MIX INJ<br>70/30 ..... 66            | <i>olmesartan amlodipine-<br/>hydrochlorothiazide</i><br><i>tab 40-5-12.5 mg</i> .. 41        | OPIPZA..... 53                                                          |
| NOVOLOG MIX INJ<br>FLEXPEN ..... 66          | <i>olmesartan amlodipine-<br/>hydrochlorothiazide</i><br><i>tab 40-10-25 mg.</i> 41           | OPSUMIT ..... 47                                                        |
| NOVOLOG PENFILL. 66                          | <i>olmesartan amlodipine-<br/>hydrochlorothiazide</i><br><i>tab 40-5-25 mg</i> .. 41          | ORGOVYX ..... 29                                                        |
| NOVOLOG RELION.. 66                          | <i>olopatadine hcl (nasal)</i><br>..... 92                                                    | ORKAMBI GRA 100-<br>125 ..... 93                                        |
| NUBEQA ..... 28                              | <i>omega-3-acid ethyl<br/>esters cap 1 gm</i> .. 43                                           | ORKAMBI GRA 150-<br>188 ..... 93                                        |
| NUEDEXTA CAP 20-<br>10MG ..... 61            | <i>omeprazole</i> ..... 78                                                                    | ORKAMBI GRA 75-<br>94MG ..... 93                                        |
| NULOJIX ..... 84                             | OMNIPOD 5 DX KIT<br>INT G7G6..... 66                                                          | ORKAMBI TAB 100-<br>125 ..... 93                                        |
| NUPLAZID..... 52, 53                         | OMNIPOD 5 DX MIS<br>POD G7G6..... 66                                                          | ORKAMBI TAB 200-<br>125 ..... 93                                        |
| NURTEC..... 60                               |                                                                                               | <i>orquidea</i> ..... 71                                                |
| NUTRILIPID..... 88                           |                                                                                               | ORSERDU ..... 29                                                        |
| NUZYRA..... 26                               |                                                                                               | <i>oseltamivir phosphate</i><br>..... 23                                |
| <i>nyamyc</i> ..... 96                       |                                                                                               | OSPOMYV ..... 66                                                        |
| <i>nylia 1/35</i> ..... 71                   |                                                                                               | <i>oxacillin sodium</i> .... 26                                         |
| <i>nylia 7/7/7</i> ..... 71                  |                                                                                               | <i>oxaliplatin</i> ..... 27                                             |
| <i>nystatin</i> ..... 20                     |                                                                                               | <i>oxaprozin</i> ..... 16                                               |
| <i>nystatin (mouth-<br/>throat)</i> ..... 99 |                                                                                               | <i>oxcarbazepine</i> ..... 56                                           |
| <i>nystatin (topical)</i> .... 96            |                                                                                               | <i>oxybutynin chloride</i> 79                                           |
| <i>nystop</i> ..... 96                       |                                                                                               | <i>oxycodone hcl</i> ..... 17                                           |
| <b>O</b>                                     |                                                                                               | <i>oxycodone w/<br/>acetaminophen tab</i><br><i>10-325 mg</i> ..... 18  |
| OCTAGAM ..... 84                             |                                                                                               | <i>oxycodone w/<br/>acetaminophen tab</i><br><i>2.5-325 mg</i> ..... 17 |
| <i>octreotide acetate</i> .. 74              |                                                                                               | <i>oxycodone w/<br/>acetaminophen tab</i><br><i>5-325 mg</i> ..... 17   |
| ODEFSEY TAB..... 22                          |                                                                                               |                                                                         |
| ODOMZO ..... 35                              |                                                                                               |                                                                         |
| OFEV..... 93                                 |                                                                                               |                                                                         |
| <i>ofloxacin (ophth)</i> ... 89              |                                                                                               |                                                                         |
| <i>ofloxacin (otic)</i> ..... 91             |                                                                                               |                                                                         |
| OGIVRI..... 35                               |                                                                                               |                                                                         |
| OGSIVEO ..... 35                             |                                                                                               |                                                                         |
| OJEMDA..... 35                               |                                                                                               |                                                                         |
| OJJAARA..... 35                              |                                                                                               |                                                                         |

|                                                                        |                                           |                                                                       |
|------------------------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|
| <i>oxycodone w/ acetaminophen tab</i>                                  | <i>penicillamine</i>                      | <i>pioglitazone hcl-metformin hcl tab</i>                             |
| 7.5-325 mg ..... 17                                                    | ..... 67                                  | 15-850 mg ..... 64                                                    |
| OXYCONTIN ..... 17                                                     | <i>penicillin g potassium</i>             | <i>piperacillin sod-tazobactam na for</i>                             |
| OZEMPIC (0.25 OR 0.5MG/DOSE) ..... 64                                  | ..... 26                                  | <i>inj 3.375 gm (3-0.375 gm)..... 26</i>                              |
| OZEMPIC (1MG/DOSE) ..... 64                                            | <i>penicillin g sodium</i> . 26           | <i>piperacillin sod-tazobactam sod for</i>                            |
| OZEMPIC (2MG/DOSE) ..... 64                                            | <i>penicillin v potassium</i>             | <i>inj 13.5 gm (12-1.5 gm)..... 26</i>                                |
| <b>P</b>                                                               | ..... 26                                  | <i>piperacillin sod-tazobactam sod for</i>                            |
| <i>pacerone</i> ..... 42                                               | PENMENVY INJ..... 85                      | <i>inj 2.25 gm (2-0.25 gm)..... 26</i>                                |
| <i>paclitaxel</i> ..... 30                                             | PENTACEL INJ ..... 85                     | <i>piperacillin sod-tazobactam sod for</i>                            |
| <i>paclitaxel inj 100mg</i> 30                                         | <i>pentamidine</i>                        | <i>inj 4.5 gm (4-0.5 gm)..... 26</i>                                  |
| <i>paliperidone</i> ..... 53                                           | <i>isethionate inh</i> .... 19            | <i>piperacillin sod-tazobactam sod for</i>                            |
| <i>pamidronate disodium</i>                                            | <i>pentamidine</i>                        | <i>inj 40.5 gm (36-4.5 gm)..... 26</i>                                |
| ..... 66                                                               | <i>isethionate inj</i> ..... 19           | PIQRAY 200MG DAILY DOSE ..... 36                                      |
| PAMIDRONATE DISODIUM ..... 66                                          | <i>pentoxifylline</i> ..... 80            | PIQRAY 250MG TAB DOSE ..... 36                                        |
| PANRETIN ..... 98                                                      | <i>perampanel</i> ..... 56                | PIQRAY 300MG DAILY DOSE ..... 36                                      |
| <i>pantoprazole sodium</i>                                             | <i>perindopril erbumine</i>               | <i>pirfenidone</i> ..... 93                                           |
| ..... 78                                                               | ..... 40                                  | <i>piroxicam</i> ..... 16                                             |
| PANZYGA ..... 84                                                       | <i>perigard</i> ..... 99                  | <i>pitavastatin calcium</i> 42                                        |
| <i>paricalcitol</i> ..... 75                                           | <i>permethrin</i> ..... 99                | <i>plenamine</i> ..... 88                                             |
| <i>paroxetine hcl</i> ..... 49                                         | <i>perphenazine</i> ..... 53              | PLENVU SOL..... 77                                                    |
| PAXLOVID PAK ..... 23                                                  | <i>pfizerpen</i> ..... 26                 | <i>podofilox</i> ..... 98                                             |
| PAXLOVID TAB 150-100 ..... 23                                          | <i>phenelzine sulfate</i> .. 49           | <i>polymyxin b sulfate</i> 19                                         |
| PAXLOVID TAB 300-100 ..... 23                                          | <i>phenobarbital</i> ..... 56             | <i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%..... 89</i> |
| <i>pazopanib hcl</i> ..... 35                                          | <i>phenobarbital sodium</i>               | POMALYST ..... 29                                                     |
| PEDIARIX INJ 0.5ML85                                                   | ..... 56                                  | <i>portia-28</i> ..... 71                                             |
| PEDVAX HIB ..... 85                                                    | <i>phenytek</i> ..... 57                  | <i>posaconazole</i> ..... 20                                          |
| <i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i> ..... 77 | <i>phenytoin</i> ..... 57                 | POT CHL 20MEQ/L IN NACL 0.45% INJ . 87                                |
| <i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i> ..... 77           | <i>phenytoin sodium</i> .. 57             |                                                                       |
| PEGASYS ..... 23                                                       | <i>extended</i> ..... 57                  |                                                                       |
| PEMAZYRE ..... 35                                                      | PHESGO SOL ..... 35                       |                                                                       |
| <i>pemetrexed disodium</i>                                             | <i>philith</i> ..... 71                   |                                                                       |
| ..... 28                                                               | PIFELTRO..... 21                          |                                                                       |
| PENBRAYA INJ ..... 85                                                  | <i>pilocarpine hcl</i> ..... 90           |                                                                       |
|                                                                        | <i>pilocarpine hcl (oral)</i>             |                                                                       |
|                                                                        | ..... 99                                  |                                                                       |
|                                                                        | <i>pimecrolimus</i> ..... 98              |                                                                       |
|                                                                        | <i>pimozide</i> ..... 53                  |                                                                       |
|                                                                        | <i>pimtrea</i> ..... 71                   |                                                                       |
|                                                                        | <i>pindolol</i> ..... 44                  |                                                                       |
|                                                                        | <i>pioglitazone hcl</i> ..... 64          |                                                                       |
|                                                                        | <i>pioglitazone hcl-metformin hcl tab</i> |                                                                       |
|                                                                        | 15-500 mg ..... 64                        |                                                                       |

POT CHL 20MEQ/L IN  
 NACL 0.9% INJ ... 87  
 POT CHL 40MEQ/L IN  
 NACL 0.9% INJ ... 87  
*potassium chloride* 87,  
 88  
*potassium chloride* 20  
*meq/l (0.15%) in*  
*dextrose 5% inj ..* 87  
*potassium chloride*  
*microencapsulated*  
*crystals er* ..... 88  
*potassium citrate*  
*(alkalinizer)* ..... 78  
*pramipexole*  
*dihydrochloride* ... 50  
*prasugrel hcl* ..... 80  
*pravastatin sodium*. 42  
*praziquantel* ..... 19  
*prazosin hcl*..... 40  
*prednisolone* ..... 73  
*prednisolone acetate*  
*(ophth)* ..... 89  
 PREDNISOLONE  
 SODIUM PHOSP .. 89  
*prednisolone sodium*  
*phosphate* ..... 73  
*prednisone* ..... 73  
 PREDNISONE  
 INTENSOL ..... 73  
*pregabalin*..... 57  
 PREMASOL SOL 10%  
 ..... 88  
 PRENATAL TAB 27-  
 1MG ..... 88  
 PRENATAL TAB PLUS  
 ..... 88  
*prevalite* ..... 43  
 PREVYMIS ..... 23  
 PREZCOBIX TAB  
 675/150..... 22  
 PREZCOBIX TAB 800-  
 150 ..... 22  
 PREZISTA ..... 21  
 PRIFTIN ..... 23

*primaquine phosphate*  
 ..... 20  
 PRIMAQUINE  
 PHOSPHATE..... 21  
*primidone* ..... 57  
 PRIORIX INJ ..... 85  
 PRIVIGEN ..... 84  
*probenecid* ..... 16  
*prochlorperazine* .... 76  
*prochlorperazine*  
*edisylate* ..... 76  
*prochlorperazine*  
*maleate* ..... 76  
 PROCIT..... 80  
*proctocort* ..... 99  
*procto-med hc* ..... 98  
*proctosol hc* ..... 99  
*proctozone-hc* ..... 99  
*progesterone* ..... 75  
 PROGRAF ..... 85  
 PROLASTIN-C ..... 93  
 PROLIA..... 66  
*promethazine hcl* ... 76  
*propafenone hcl* .... 42  
*proparacaine hcl* ... 90  
*propranolol hcl*..... 44  
*propylthiouracil*..... 75  
 PROQUAD INJ..... 85  
 PROSOL INJ 20% ... 88  
*protriptyline hcl* .... 49  
 PULMOZYME ..... 93  
*pyrazinamide*..... 23  
*pyridostigmine*  
*bromide* ..... 61  
*pyrimethamine* ..... 19  
 PYZCHIVA ..... 82

## Q

QINLOCK ..... 36  
 QUADRACEL INJ 0.5ML  
 ..... 85  
*quetiapine fumarate* 53  
*quinapril hcl* ..... 40  
*quinidine sulfate* .... 42  
*quinine sulfate*..... 21  
 QULIPTA ..... 60

## R

RABAVERT INJ ..... 85  
*rabeprazole sodium* 78  
 RALDESY ..... 49  
*raloxifene hcl*..... 74  
*ramelteon* ..... 60  
*ramipril* ..... 40  
*ranolazine* ..... 46  
*rasagiline mesylate* 50  
*reclipsen*..... 71  
 RECOMBIVAX HB ... 86  
 RELENZA DISKHALER  
 ..... 23  
 RELISTOR ..... 77  
 REMICADE ..... 82  
 RENFLEXIS..... 82  
*repaglinide* ..... 64  
 REPATHA ..... 43  
 REPATHA SURECLICK  
 ..... 43  
 RESTASIS ..... 90  
 RESTASIS MULTIDOSE  
 ..... 90  
 RETEVMO..... 36  
 REVCOVI ..... 74  
 REVUFORJ..... 36  
 REXULTI ..... 53  
 REYATAZ ..... 21  
 REZDIFFRA ..... 74  
 REZLIDHIA..... 36  
 REZUROCK..... 85  
 RHOPRESSA ..... 90  
*ribavirin (hepatitis c)*  
 ..... 23  
*rifabutin* ..... 23  
*rifampin*..... 23  
*riluzole* ..... 61  
*rimantadine*  
*hydrochloride*..... 23  
 RINVOQ..... 82  
 RINVOQ LQ ..... 82  
*risedronate sodium* 66  
*risperidone*..... 53  
*risperidone*  
*microspheres* ..... 53  
*ritonavir* ..... 21

|                                 |    |                                |    |                              |        |
|---------------------------------|----|--------------------------------|----|------------------------------|--------|
| <i>rivaroxaban</i> .....        | 79 | <i>SIKLOS</i> .....            | 80 | <i>spironolactone</i> .....  | 40     |
| <i>rivastigmine</i> .....       | 48 | <i>sildenafil citrate</i>      |    | <i>spironolactone &amp;</i>  |        |
| <i>rivastigmine tartrate</i>    |    | <i>(pulmonary</i>              |    | <i>hydrochlorothiazide</i>   |        |
| .....                           | 48 | <i>hypertension)</i> .....     | 47 | <i>tab 25-25 mg</i> .....    | 45     |
| <i>rivelsa</i> .....            | 71 | <i>silodosin</i> .....         | 78 | <i>sprintec 28</i> .....     | 71     |
| <i>rizatriptan benzoate</i>     | 60 | <i>silver sulfadiazine</i> ... | 96 | <i>SPRITAM</i> .....         | 57     |
| <i>ROCKLATAN DRO</i> ...        | 90 | <i>SIMBRINZA SUS 1-</i>        |    | <i>sps</i> .....             | 67     |
| <i>roflumilast</i> .....        | 93 | 0.2% .....                     | 90 | <i>sps rectal</i> .....      | 67     |
| <i>ROMVIMZA</i> .....           | 36 | <i>simliya</i> .....           | 71 | <i>sronyx</i> .....          | 71     |
| <i>ropinirole</i>               |    | <i>simpesse</i> .....          | 71 | <i>ssd</i> .....             | 96     |
| <i>hydrochloride</i> . 50, 51   |    | <i>simvastatin</i> .....       | 42 | <i>STELARA</i> .....         | 82     |
| <i>rosuvastatin calcium</i>     | 42 | <i>sirolimus</i> .....         | 85 | <i>STIVARGA</i> .....        | 36     |
| <i>rosyrah</i> .....            | 71 | <i>SIRTURO</i> .....           | 23 | <i>streptomycin sulfate</i>  | 19     |
| <i>ROTARIX SUS</i> .....        | 86 | <i>SKYRIZI</i> .....           | 82 | <i>STRIBILD TAB</i> .....    | 22     |
| <i>ROTATEQ SOL</i> .....        | 86 | <i>SKYRIZI PEN</i> .....       | 82 | <i>subvenite</i> .....       | 57     |
| <i>roweepra</i> .....           | 57 | <i>sod sulfate-pot sulf-</i>   |    | <i>SUBVENITE</i> .....       | 57     |
| <i>ROZLYTREK</i> .....          | 36 | <i>mg sulf oral sol</i>        |    | <i>sucalfate</i> .....       | 77     |
| <i>RUBRACA</i> .....            | 36 | 17.5-3.13-1.6                  |    | <i>sulfacetamide sodium</i>  |        |
| <i>rufinamide</i> .....         | 57 | <i>gm/177ml</i> .....          | 77 | <i>(acne)</i> .....          | 95     |
| <i>RUKOBIA</i> .....            | 21 | <i>sodium chloride</i> ....    | 87 | <i>sulfacetamide sodium</i>  |        |
| <i>RYBELSUS</i> .....           | 64 | <i>sodium chloride (gu</i>     |    | <i>(ophth)</i> .....         | 89     |
| <i>RYDAPT</i> .....             | 36 | <i>irrigant)</i> .....         | 99 | <i>sulfacetamide sodium-</i> |        |
| <b>S</b>                        |    | <i>sodium fluoride chew;</i>   |    | <i>prednisolone ophth</i>    |        |
| <i>sacubitril-valsartan tab</i> |    | <i>tab; 1.1 (0.5 f)</i>        |    | <i>soln 10-</i>              |        |
| 24-26 mg .....                  | 41 | mg/ml soln .....               | 88 | 0.23(0.25)% .....            | 89     |
| <i>sacubitril-valsartan tab</i> |    | <i>sodium oxybate</i> ....     | 62 | <i>sulfadiazine</i> .....    | 19     |
| 49-51 mg .....                  | 41 | <i>sodium phenylbutyrate</i>   |    | <i>sulfamethoxazole-</i>     |        |
| <i>sacubitril-valsartan tab</i> |    | .....                          | 74 | <i>trimethoprim iv soln</i>  |        |
| 97-103 mg .....                 | 41 | <i>sodium polystyrene</i>      |    | 400-80 mg/5ml... 19          |        |
| <i>sajazir</i> .....            | 80 | <i>sulfonate</i> .....         | 67 | <i>sulfamethoxazole-</i>     |        |
| <i>SANTYL</i> .....             | 99 | <i>sodium polystyrene</i>      |    | <i>trimethoprim susp</i>     |        |
| <i>sapropterin</i>              |    | <i>sulfonate powder</i> . 67   |    | 200-40 mg/5ml... 19          |        |
| <i>dihydrochloride</i> ... 74   |    | <i>solifenacin succinate</i>   | 79 | <i>sulfamethoxazole-</i>     |        |
| <i>SCEMBLIX</i> .....           | 36 | <i>SOLQUA INJ 100/33</i>       |    | <i>trimethoprim tab</i>      |        |
| <i>scopolamine</i> .....        | 76 | .....                          | 66 | 400-80 mg .....              | 19     |
| <i>SECUADO</i> .....            | 53 | <i>SOLTAMOX</i> .....          | 29 | <i>sulfamethoxazole-</i>     |        |
| <i>selegiline hcl</i> .....     | 51 | <i>SOLU-CORTEF</i> .....       | 73 | <i>trimethoprim tab</i>      |        |
| <i>selenium sulfide</i> ....    | 96 | <i>SOMATULINE DEPOT</i>        |    | 800-160 mg .....             | 19     |
| <i>SELZENTRY</i> .....          | 21 | .....                          | 74 | <i>SULFAMYLON</i> .....      | 96     |
| <i>SEREVENT DISKUS</i> . 92     |    | <i>SOMAVERT</i> .....          | 74 | <i>sulfasalazine</i> .....   | 76     |
| <i>sertraline hcl</i> .....     | 49 | <i>sorafenib tosylate</i> ..   | 36 | <i>sulindac</i> .....        | 16     |
| <i>setlakin</i> .....           | 71 | <i>sotalol hcl</i> .....       | 42 | <i>sumatriptan</i> .....     | 60     |
| <i>sharobel</i> .....           | 71 | <i>sotalol hcl (afib/afl)</i>  | 42 | <i>sumatriptan succinate</i> |        |
| <i>SHINGRIX</i> .....           | 86 | <i>SOTYKTU</i> .....           | 82 | .....                        | 60, 61 |
| <i>SIGNIFOR</i> .....           | 74 | <i>SPIRIVA RESPIMAT</i>        | 91 | <i>sunitinib malate</i> .... | 36     |

|                       |    |                        |                       |    |
|-----------------------|----|------------------------|-----------------------|----|
| SUNLENCA .....        | 21 | telmisartan-           | TIVICAY.....          | 21 |
| syeda .....           | 71 | amlodipine tab 80-5    | TIVICAY PD .....      | 21 |
| SYMDEKO TAB 100-      |    | mg .....               | tizanidine hcl .....  | 62 |
| 150 .....             | 93 | telmisartan-           | TOBI PODHALER ....    | 19 |
| SYMDEKO TAB 50-       |    | hydrochlorothiazide    | TOBRADEX OIN 0.3-     |    |
| 75MG .....            | 93 | tab 40-12.5 mg...      | 0.1% .....            | 89 |
| SYMPAZAN .....        | 57 | telmisartan-           | tobramycin.....       | 19 |
| SYMTUZA TAB .....     | 22 | hydrochlorothiazide    | tobramycin (ophth)    | 89 |
| SYNAREL .....         | 74 | tab 80-12.5 mg...      | tobramycin sulfate .  | 19 |
| SYNTHROID .....       | 75 | telmisartan-           | tobramycin-           |    |
| <b>T</b>              |    | hydrochlorothiazide    | dexamethasone         |    |
| TABLOID .....         | 28 | tab 80-25 mg .....     | ophth susp 0.3-       |    |
| TABRECTA.....         | 37 | temazepam .....        | 0.1% .....            | 89 |
| tacrolimus.....       | 85 | TENIVAC INJ 5-2LF.     | tolterodine tartrate. | 79 |
| tacrolimus (topical)  | 99 | tenofovir disoproxil   | tolvaptan .....       | 74 |
| tadalafil .....       | 78 | fumarate.....          | tolvaptan tab therapy |    |
| tadalafil (pulmonary  |    | TEPMETKO .....         | pack 30 & 15 mg.      | 74 |
| hypertension) ....    | 47 | terazosin hcl.....     | tolvaptan tab therapy |    |
| TAFINLAR .....        | 37 | terbinafine hcl .....  | pack 45 & 15 mg.      | 74 |
| TAGRISSE .....        | 37 | terbutaline sulfate .. | tolvaptan tab therapy |    |
| TALZENNA .....        | 37 | terconazole vaginal    | pack 60 & 30 mg.      | 74 |
| tamoxifen citrate.... | 29 | teriparatide .....     | tolvaptan tab therapy |    |
| tamsulosin hcl .....  | 78 | TERIPARATIDE.....      | pack 90 & 30 mg.      | 74 |
| tarina 24 fe .....    | 71 | testosterone .....     | topiramate .....      | 57 |
| tarina fe 1/20 eq.... | 71 | testosterone cypionate | toremifene citrate .. | 29 |
| tasimelteon .....     | 60 | .....                  | torpenz.....          | 37 |
| TAVNEOS .....         | 80 | testosterone           | torsemide .....       | 45 |
| tazarotene .....      | 96 | enantate .....         | TOUJEO MAX            |    |
| tazicef .....         | 24 | testosterone pump .    | SOLOSTAR .....        | 66 |
| TAZVERIK .....        | 37 | tetrabenazine .....    | TOUJEO SOLOSTAR       | 66 |
| TECENTRIQ .....       | 37 | tetracycline hcl ..... | TPN ELECTROL INJ .    | 87 |
| TECENTRIQ INJ         |    | THALOMID .....         | TRADJENTA.....        | 65 |
| HYBREZA .....         | 37 | theophylline .....     | tramadol hcl.....     | 18 |
| TEFLARO.....          | 24 | thioridazine hcl ..... | tramadol-             |    |
| telmisartan .....     | 41 | thiothixene.....       | acetaminophen tab     |    |
| telmisartan-          |    | tiadylt er.....        | 37.5-325 mg .....     | 18 |
| amlodipine tab 40-    |    | tiagabine hcl .....    | trandolapril .....    | 40 |
| 10 mg.....            | 41 | TIBSOVO .....          | tranexamic acid ..... | 80 |
| telmisartan-          |    | ticagrelor .....       | tranylcypromine       |    |
| amlodipine tab 40-5   |    | TICOVAC .....          | sulfate .....         | 49 |
| mg .....              | 41 | tigecycline.....       | TRAVASOL INJ 10%      | 88 |
| telmisartan-          |    | tilia fe .....         | travoprost.....       | 90 |
| amlodipine tab 80-    |    | timolol maleate.....   | TRAZIMERA.....        | 37 |
| 10 mg.....            | 41 | timolol maleate        | trazodone hcl .....   | 49 |
|                       |    | (ophth) .....          | TRELEGY AER ELLIPTA   |    |
|                       |    | tinidazole.....        | 100-62.5-25 MCG       | 91 |

|                                                                                        |                                                                                    |                                                                                 |
|----------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| TRELEGY AER ELLIPTA<br>200-62.5-25 MCG 91                                              | TRIKAFTA PAK 75MG<br>..... 94                                                      | TYBOST ..... 21                                                                 |
| TREMFYA ..... 82                                                                       | TRIKAFTA TAB 100-<br>50-75MG & 150MG<br>..... 94                                   | <i>tydemy</i> ..... 71                                                          |
| TREMFYA INDUCTION<br>PACK FO ..... 82                                                  | TRIKAFTA TAB 50-25-<br>37.5MG & 75MG.. 94                                          | TYENNE ..... 83                                                                 |
| TREMFYA PEN ..... 83                                                                   | <i>tri-legest fe</i> ..... 71                                                      | TYPHIM VI ..... 86                                                              |
| <i>treprostinil</i> ..... 47                                                           | <i>tri-linyah</i> ..... 71                                                         | <b>U</b>                                                                        |
| <i>tretinoin</i> ..... 96                                                              | <i>tri-lo-estarylla</i> ..... 71                                                   | UBRELVY ..... 61                                                                |
| <i>tretinoin</i><br>(chemotherapy) .. 30                                               | <i>tri-lo-marzia</i> ..... 71                                                      | <i>unithroid</i> ..... 75                                                       |
| <i>triamcinolone</i><br><i>acetonide (mouth)</i> 99                                    | <i>tri-lo-mili</i> ..... 71                                                        | UPTRAVI..... 47                                                                 |
| <i>triamcinolone</i><br><i>acetonide (topical)</i><br>..... 98                         | <i>tri-lo-sprintec</i> ..... 71                                                    | UPTRAVI PACK TAB<br>200/800..... 47                                             |
| <i>triamterene &amp;</i><br><i>hydrochlorothiazide</i><br><i>cap 37.5-25 mg</i> .. 45  | <i>trimethoprim</i> ..... 19                                                       | <i>ursodiol</i> ..... 77                                                        |
| <i>triamterene &amp;</i><br><i>hydrochlorothiazide</i><br><i>tab 37.5-25 mg</i> ... 45 | <i>tri-mili</i> ..... 71                                                           | USTEKINUMAB..... 83                                                             |
| <i>triamterene &amp;</i><br><i>hydrochlorothiazide</i><br><i>tab 75-50 mg</i> ..... 45 | <i>trimipramine maleate</i><br>..... 49                                            | <b>V</b>                                                                        |
| <i>tridacaine ii</i> ..... 98                                                          | TRINTELLIX..... 49                                                                 | <i>valacyclovir hcl</i> ..... 23                                                |
| <i>triderm</i> ..... 98                                                                | <i>tri-sprintec</i> ..... 71                                                       | VALCHLOR ..... 99                                                               |
| <i>trientine hcl</i> ..... 67                                                          | TRIUMEQ PD TAB... 22                                                               | <i>valganciclovir hcl</i> ... 24                                                |
| <i>tri-estarylla</i> ..... 71                                                          | TRIUMEQ TAB..... 22                                                                | <i>valproate sodium</i> ... 57                                                  |
| <i>trifluoperazine hcl</i> .. 54                                                       | <i>tri-vylibra</i> ..... 71                                                        | <i>valproic acid</i> ..... 57                                                   |
| <i>trifluridine</i> ..... 89                                                           | <i>tri-vylibra lo</i> ..... 71                                                     | <i>valsartan</i> ..... 41                                                       |
| <i>trihexyphenidyl hcl</i> . 51                                                        | TROGARZO ..... 21                                                                  | <i>valsartan-</i><br><i>hydrochlorothiazide</i><br><i>tab 160-12.5 mg</i> . 41  |
| TRIJARDY XR TAB ER<br>24HR 10-5-1000MG<br>..... 65                                     | TROPHAMINE INJ 10%<br>..... 88                                                     | <i>valsartan-</i><br><i>hydrochlorothiazide</i><br><i>tab 160-25 mg</i> .... 41 |
| TRIJARDY XR TAB ER<br>24HR 12.5-2.5-<br>1000MG ..... 65                                | <i>trospium chloride</i> ... 79                                                    | <i>valsartan-</i><br><i>hydrochlorothiazide</i><br><i>tab 320-12.5 mg</i> . 41  |
| TRIJARDY XR TAB ER<br>24HR 25-5-1000MG<br>..... 65                                     | TRUE METRIX KIT AIR<br>..... 99                                                    | <i>valsartan-</i><br><i>hydrochlorothiazide</i><br><i>tab 320-25 mg</i> .... 41 |
| TRIJARDY XR TAB ER<br>24HR 5-2.5-1000MG<br>..... 65                                    | TRUE METRIX KIT<br>METER ..... 99                                                  | <i>valsartan-</i><br><i>hydrochlorothiazide</i><br><i>tab 80-12.5 mg</i> ... 41 |
| TRIKAFTA PAK 59.5MG<br>..... 94                                                        | TRUE METRIX STRIPS<br>..... 99                                                     | VALTOCO 10 MG<br>DOSE ..... 58                                                  |
|                                                                                        | TRULICITY ..... 65                                                                 | VALTOCO 15 MG<br>DOSE ..... 58                                                  |
|                                                                                        | TRUMENBA..... 86                                                                   | VALTOCO 20 MG<br>DOSE ..... 58                                                  |
|                                                                                        | TRUQAP ..... 37                                                                    | VALTOCO 5 MG DOSE<br>..... 57                                                   |
|                                                                                        | TRUXIMA ..... 37                                                                   | <i>valtya 1/35</i> ..... 71                                                     |
|                                                                                        | TUKYSA ..... 37                                                                    | <i>valtya 1/50</i> ..... 71                                                     |
|                                                                                        | TURALIO..... 37                                                                    | <i>vancomycin hcl</i> .19, 20                                                   |
|                                                                                        | <i>turqoz</i> ..... 71                                                             |                                                                                 |
|                                                                                        | <i>twice-daily</i><br><i>clindamycin</i><br><i>phosphate (topical)</i><br>..... 96 |                                                                                 |
|                                                                                        | TWINRIX INJ ..... 86                                                               |                                                                                 |

|                                                                                |                                                                      |                                                  |
|--------------------------------------------------------------------------------|----------------------------------------------------------------------|--------------------------------------------------|
| VANCOMYCIN INJ 1<br>GM..... 20                                                 | VONJO..... 38                                                        | XCOPRI PAK 150-<br>200MG (TITRATION)<br>..... 58 |
| VANCOMYCIN INJ<br>500MG..... 20                                                | VOQUEZNA PAK DUAL<br>PAK..... 77                                     | XCOPRI PAK 50-<br>100MG..... 58                  |
| VANCOMYCIN INJ<br>750MG..... 20                                                | VOQUEZNA PAK TRIP<br>PK..... 77                                      | XDEMVI ..... 89                                  |
| VANFLYTA ..... 37                                                              | VORANIGO ..... 38                                                    | XELJANZ ..... 83                                 |
| VAQTA..... 86                                                                  | <i>voriconazole</i> ..... 20                                         | XELJANZ XR ..... 83                              |
| <i>varenicline tartrate</i> . 63                                               | VOSEVI TAB ..... 24                                                  | <i>xelria fe</i> ..... 71                        |
| <i>varenicline tartrate tab</i><br>11 x 0.5 mg & 42 x<br>1 mg start pack... 63 | VOWST CAP ..... 77                                                   | XERMELO..... 78                                  |
| VARIVAX..... 86                                                                | VRAYLAR ..... 54                                                     | XHANCE ..... 94                                  |
| VASCEPA ..... 43                                                               | <i>vyfemla</i> ..... 71                                              | XIFAXAN..... 78                                  |
| VAXCHORA SUS..... 86                                                           | <i>vylibra</i> ..... 71                                              | XIGDUO XR TAB 10-<br>1000 ..... 65               |
| <i>velivet</i> ..... 71                                                        | VYZULTA..... 90                                                      | XIGDUO XR TAB 10-<br>500MG..... 65               |
| VELSIPITY..... 83                                                              | <b>W</b>                                                             | XIGDUO XR TAB 2.5-<br>1000 ..... 65              |
| VENCLEXTA..... 37                                                              | <i>warfarin sodium</i> ..... 79                                      | XIGDUO XR TAB 5-<br>1000MG..... 65               |
| VENCLEXTA TAB<br>START PK..... 37                                              | <i>water for irrigation,<br/>sterile irrigation soln</i><br>..... 99 | XIGDUO XR TAB 5-<br>500MG..... 65                |
| <i>venlafaxine hcl</i> ..... 49                                                | WELIREG ..... 30                                                     | XIIDRA..... 90                                   |
| VENTOLIN HFA ..... 92                                                          | <i>wera</i> ..... 71                                                 | XOLAIR ..... 94                                  |
| VENTOLIN HFA<br>(INSTITUTIONAL<br>PACK)..... 92                                | WESTAB PLUS TAB<br>27-1MG ..... 88                                   | XOSPATA ..... 38                                 |
| <i>verapamil hcl</i> ..... 44                                                  | WINREVAIR..... 47                                                    | XPOVIO PAK (100 MG<br>ONCE WEEKLY)... 38         |
| VERQUVO ..... 46                                                               | WINREVAIR INJ 45MG<br>..... 47                                       | XPOVIO PAK (40 MG<br>ONCE WEEKLY)... 38          |
| VERSACLOZ ..... 54                                                             | <i>wixela inhub</i> ..... 95                                         | XPOVIO PAK (40 MG<br>TWICE WEEKLY).. 38          |
| VERZENIO..... 37                                                               | <i>wymzya fe</i> ..... 71                                            | XPOVIO PAK (60 MG<br>ONCE WEEKLY)... 38          |
| <i>vestura</i> ..... 71                                                        | WYOST..... 67                                                        | XPOVIO PAK (60 MG<br>TWICE WEEKLY).. 38          |
| <i>vienva</i> ..... 71                                                         | <b>X</b>                                                             | XPOVIO PAK (80 MG<br>ONCE WEEKLY)... 38          |
| <i>vigabatrin</i> ..... 58                                                     | XALKORI..... 38                                                      | XPOVIO PAK (80 MG<br>TWICE WEEKLY).. 38          |
| <i>vigadrone</i> ..... 58                                                      | <i>xarah fe</i> ..... 71                                             | XTANDI ..... 29                                  |
| VIGAFYDE..... 58                                                               | XARELTO ..... 79                                                     | XTRENBO..... 67                                  |
| <i>vilazodone hcl</i> ..... 49                                                 | XARELTO STAR TAB<br>15/20MG..... 80                                  | <i>xulane</i> ..... 72                           |
| VIMKUNYA ..... 86                                                              | XATMEP ..... 83                                                      | XULTOPHY INJ<br>100/3.6 ..... 66                 |
| <i>vincristine sulfate</i> ... 30                                              | XCOPRI ..... 58                                                      | <b>Y</b>                                         |
| <i>vinorelbine tartrate</i> 30                                                 | XCOPRI PAK 100-150<br>..... 58                                       | YESINTEK ..... 83                                |
| <i>violele</i> ..... 71                                                        | XCOPRI PAK 12.5-25<br>..... 58                                       |                                                  |
| VIRACEPT ..... 21                                                              | XCOPRI PAK 150-<br>200MG<br>(MAINTENANCE) . 58                       |                                                  |
| VIREAD ..... 22                                                                |                                                                      |                                                  |
| VITRAKVI..... 38                                                               |                                                                      |                                                  |
| VIVIMUSTA ..... 27                                                             |                                                                      |                                                  |
| VIVITROL..... 63                                                               |                                                                      |                                                  |
| VIVOTIF CAP EC..... 86                                                         |                                                                      |                                                  |
| VIZIMPRO ..... 38                                                              |                                                                      |                                                  |

|                          |    |                              |    |                              |    |
|--------------------------|----|------------------------------|----|------------------------------|----|
| YF-VAX INJ.....          | 86 | ZENPEP CAP                   |    | ZIRGAN .....                 | 89 |
| YONSA .....              | 29 | 20000UNT .....               | 78 | <i>zoledronic acid</i> ..... | 67 |
| YUTREPIA .....           | 47 | ZENPEP CAP                   |    | ZOLINZA .....                | 38 |
| <i>yuvaferm</i> .....    | 72 | 25000UNT .....               | 78 | <i>zolpidem tartrate</i> ... | 60 |
| <b>Z</b>                 |    | ZENPEP CAP                   |    | ZONISADE .....               | 58 |
| <i>zafemy</i> .....      | 72 | 3000UNIT .....               | 78 | <i>zonisamide</i> .....      | 58 |
| <i>zafirlukast</i> ..... | 92 | ZENPEP CAP                   |    | <i>zovia 1/35</i> .....      | 72 |
| ZARXIO .....             | 80 | 40000UNT .....               | 78 | ZTALMY .....                 | 58 |
| ZEGALOGUE .....          | 73 | ZENPEP CAP                   |    | <i>zumandimine</i> .....     | 72 |
| ZEJULA .....             | 38 | 5000UNIT .....               | 78 | ZURZUVAE .....               | 50 |
| ZELBORAF.....            | 38 | ZENPEP CAP                   |    | ZYDELIG.....                 | 39 |
| <i>zelvysia</i> .....    | 74 | 60000UNT .....               | 78 | ZYKADIA.....                 | 39 |
| ZEMAIRA .....            | 94 | ZERViate .....               | 90 | ZYLET SUS 0.5-0.3%           |    |
| <i>zenatane</i> .....    | 96 | <i>zidovudine</i> .....      | 22 | .....                        | 89 |
| ZENPEP CAP               |    | <i>ziprasidone hcl</i> ..... | 54 | ZYPITAMAG.....               | 42 |
| 10000UNT .....           | 78 | <i>ziprasidone mesylate</i>  |    | ZYPREXA RELPREVV             | 54 |
| ZENPEP CAP               |    | .....                        | 54 |                              |    |
| 15000UNT .....           | 78 | ZIRABEV.....                 | 38 |                              |    |

## Molina Complete Care for MyCare Ohio OTC Wrap List

| NDC         | Name                           |
|-------------|--------------------------------|
| 00005250002 | FIBERCON 625 MG CAPLET         |
| 00005417990 | CENTRUM SILVER TABLET          |
| 00005434462 | CENTRUM MULTIVIT-MINERAL LIQ   |
| 00005445174 | CENTRUM COMPLETE MULTIVIT TAB  |
| 00005449860 | CENTRUM SPECIALIST HEART TAB   |
| 00005475557 | CENTRUM WOMEN TABLET           |
| 00005475652 | CENTRUM SILVER WOMEN TABLET    |
| 00005475756 | CENTRUM MEN'S TABLET           |
| 00005475770 | CENTRUM ULTRA MEN'S TABLET     |
| 00005475850 | CENTRUM SILVER ULTRA MEN'S TAB |
| 00005475865 | CENTRUM SILVER MEN TABLET      |
| 00009033303 | KAOPECTATE 262 MG/15 ML SUSP   |
| 00009361002 | KAOPECTATE 240 MG SOFTGEL      |
| 00009361003 | KAOPECTATE 240 MG SOFTGEL      |
| 00009771501 | PEDIACARE INFANT DROPS         |
| 00023024004 | REFRESH P.M. OINTMENT          |
| 00023031204 | REFRESH LACRI-LUBE OINTMENT    |
| 00023040330 | REFRESH PLUS 0.5% EYE DROPS    |
| 00023050601 | REFRESH CLASSIC EYE DROPS      |
| 00023050650 | REFRESH CLASSIC EYE DROPS      |
| 00023079801 | REFRESH TEARS 0.5% EYE DROP    |
| 00023182212 | REFRESH CONTACTS EYE DROPS     |
| 00023429105 | LASTACFT ONCE DAILY 0.25% DRP  |
| 00023430710 | REFRESH OPTIVE ADVANCED DROPS  |
| 00023449130 | REFRESH OPTIVE ADVANCED DROPS  |
| 00023545910 | REFRESH OPTIVE GEL EYE DROPS   |
| 00023577330 | REFRESH OPTIVE MEGA-3 DROPS    |
| 00023695210 | REFRESH DIGITAL EYE DROPS      |
| 00023695430 | REFRESH DIGITAL PF EYE DROPS   |
| 00023963701 | OXYTROL FOR WOMEN 3.9 MG/24HR  |
| 00024101510 | FERGON 27 MG TABLET            |
| 00024135202 | NEO-SYNEPHRINE 1% SPRAY        |
| 00027000001 | SORBOLENE CREAM                |
| 00031862412 | ROBITUSSIN CHEST CONGEST SYRUP |
| 00031865510 | ROBITUSSIN ER 30 MG/5 ML SUSP  |
| 00031867501 | ROBITUSSIN ALLERGY-CGH SYR     |
| 00031868612 | ROBITUSSIN DM S-F COUGH SYRUP  |
| 00031871510 | CHLD ROBITUSSIN COUGH-CHEST DM |
| 00031871920 | ROBITUSSIN COUGH-CHEST-CONG DM |
| 00031873912 | ROBITUSSIN COUGH-CHEST DM LIQ  |
| 00031873942 | ROBITUSSIN COUGH-CHEST DM LIQ  |
| 00031875118 | ROBITUSSIN SEVR COUGH-COLD-FLU |
| 00031875212 | ROBITUSSIN COLD-FLU NIGHT LIQ  |

| NDC         | Name                           |
|-------------|--------------------------------|
| 00031875612 | ROBITUSSIN HONEY MAX DM LIQUID |
| 00031876012 | CHILD ROBITUSSIN COUGH-CHEST   |
| 00043001718 | GAS-X EX-STR 125 MG TAB CHEW   |
| 00043626204 | BUCKLEY'S CHEST CONGEST MIX LQ |
| 00045013712 | IMODIUM A-D 2 MG SOFTGEL       |
| 00045016604 | CHILDREN'S TYLENOL 160 MG/5 ML |
| 00045018404 | CHILDREN'S MOTRIN 100 MG/5 ML  |
| 00045022857 | SUDAFED 30 MG TABLET           |
| 00045029721 | TYLENOL 8 HOUR 650 MG CAPLET   |
| 00045037604 | TYLENOL SIMPLY STUFFY LIQ      |
| 00045040920 | MOTRIN IB 200 MG LIQUID GEL    |
| 00045083821 | TYLENOL ARTHRITIS ER 650 MG TB |
| 00054045160 | CENTRUM ADULTS TABLET          |
| 00065008515 | NAPHCON-A EYE DROPS            |
| 00065041918 | BION TEARS EYE DROP            |
| 00065042636 | GENTEAL TEARS 0.1%-0.2%-0.3%   |
| 00065042915 | SYSTANE 0.4-0.3% EYE DROP      |
| 00065043133 | SYSTANE 0.3-0.4% EYE DROP      |
| 00065045407 | SYSTANE GEL EYE DROPS          |
| 00065047401 | SYSTANE 0.3% EYE GEL           |
| 00065050935 | SYSTANE NIGHTTIME EYE OINTMENT |
| 00065051801 | GENTEAL TEARS SEVERE 3-94% OIN |
| 00065081601 | PATADAY ONCE DAILY 0.7% DROPS  |
| 00065081604 | PATADAY ONCE DAILY 0.7% DROPS  |
| 00065143105 | SYSTANE ULTRA 0.4-0.3% EYE DRP |
| 00065143704 | SYSTANE HYDRATION PF 0.4-0.3%  |
| 00065150782 | SYSTANE ULTRA PF 0.4-0.3% EYE  |
| 00065151006 | SYSTANE HYDRATION PF 0.4-0.3%  |
| 00065401105 | ZADITOR 0.025% (0.035%) DROPS  |
| 00065427401 | PATADAY TWICE DAILY 0.1% DROPS |
| 00065804054 | ICAPS TABLET                   |
| 00065804083 | ICAPS MV TABLET                |
| 00065804603 | ICAPS AREDS SOFTGEL            |
| 00065806401 | GENTEAL TEARS SEVERE 0.3% GEL  |
| 00065806701 | GENTEAL TEARS SEVERE GEL DROPS |
| 00065815001 | PATADAY ONCE DAILY 0.2% DROPS  |
| 00065815003 | PATADAY ONCE DAILY 0.2% DROPS  |
| 00065895001 | I-CAPS WITH LUTEIN-OMEGA 3 SFG |
| 00067003028 | BENEFIBER POWDER PACKET        |
| 00067067430 | LORATADINE 10 MG TABLET        |
| 00067120176 | VOLTAREN ARTHRITIS PAIN 1% GEL |
| 00067200020 | EXCEDRIN EXTRA STRENGTH CAPLET |
| 00067203520 | EXCEDRIN MIGRAINE GELTAB       |
| 00067203524 | EXCEDRIN MIGRAINE GELTAB       |
| 00067203924 | EXCEDRIN MIGRAINE CAPLET       |

| NDC         | Name                           |
|-------------|--------------------------------|
| 00067208601 | 4 WAY 1% NASAL SPRAY           |
| 00067489014 | NICOTINE 14 MG/24HR PATCH      |
| 00067490014 | NICOTINE 21 MG/24HR PATCH      |
| 00067611730 | ALLERGY RELIEF 10 MG TABLET    |
| 00067812808 | THERAFLU EXPRESSMAX COLD NT LQ |
| 00068042008 | CITRUCEL POWDER S/F            |
| 00068042017 | CITRUCEL POWDER S-F            |
| 00071233317 | BENADRYL ALLERGY LIQUID        |
| 00071255517 | BENADRYL-D ALLERGY & SINUS LIQ |
| 00074024001 | PEDIALYTE SOLUTION             |
| 00074024501 | PEDIALYTE FREEZER POPS         |
| 00074428722 | OPTILETS-500 FILMTAB           |
| 00074549820 | PEDIALYTE ELECTROLYTE SINGLES  |
| 00081086282 | CHILDS SUDAFED 15 MG/5 ML LIQ  |
| 00085052201 | CORICIDIN HBP COLD-FLU TABLET  |
| 00085096315 | LOTRIMIN AF 1% CREAM           |
| 00085190002 | DRIXORAL COUGH & CONGESTION    |
| 00085193502 | DRIXORAL COUGH-SORE THROAT     |
| 00087040203 | POLY-VI-SOL 250MCG-50MG/ML DRP |
| 00087040501 | POLY-VI-SOL WITH IRON DROPS    |
| 00087074002 | FER-IN-SOL 15 MG/ML DROPS      |
| 00087086644 | D-VI-SOL 10 MCG/ML DROP        |
| 00087134541 | ENFAMIL WATER NURSETTE LIQUID  |
| 00087511503 | ENFAMIL ENFALYTE SOLUTION      |
| 00088117112 | GAVISCON LIQUID                |
| 00088117312 | GAVISCON EXTRA STRENGTH LIQUID |
| 00088117447 | GAVISCON ES TABLET CHEW        |
| 00088165125 | OS-CAL 500-VIT D3 600 CAPLET   |
| 00088165475 | OS-CAL 500-VIT D3 200 CAPLET   |
| 00096072004 | DML FORTE CREAM W-PANTHENOL    |
| 00096073204 | AQUANIL HC 1% LOTION           |
| 00096073804 | DHS SAL 3% SHAMPOO             |
| 00111070752 | COVID-19 AT-HOME TEST (EUA)    |
| 00113001940 | GS SEVERE COLD-FLU NIGHTTME LQ |
| 00113002026 | GS CHILD PAIN-FEVER 160 MG/5ML |
| 00113002562 | GS PAIN RELIEF 500 MG CAPLET   |
| 00113002801 | GS 24 HOUR ALLERGY 50 MCG SPRY |
| 00113002925 | GS NICOTINE 2 MG CHEWING GUM   |
| 00113003263 | GS DUAL ACTION COMPLETE TB CHW |
| 00113005058 | GS IBUPROFEN PM CAPLET         |
| 00113005253 | GS SLEEP TIME 25 MG SOFTGEL    |
| 00113005267 | GS SLEEP TIME 25 MG SOFTGEL    |
| 00113005306 | GS NICOTINE 4 MG CHEWING GUM   |
| 00113005651 | GS NIGHTTIME COLD-FLU SOFTGEL  |
| 00113005705 | GS INF IBUPROFEN 50 MG/1.25 ML |

| NDC         | Name                           |
|-------------|--------------------------------|
| 00113006126 | GS TUSSIN MUCUS-CONG 200 MG/10 |
| 00113006134 | GS TUSSIN MUCUS-CONG 100 MG/5  |
| 00113006510 | GS NASAL SPRAY 0.05%           |
| 00113007471 | GS IBUPROFEN 200 MG TABLET     |
| 00113008100 | GS MICONAZOLE 3 COMBO PACK     |
| 00113008458 | GS FIRST AID ANTIBIOTIC OINT   |
| 00113008753 | GS ANTI-DIARRHEAL-ANTIGAS CPLT |
| 00113009423 | GS NASAL DECONG PE 10 MG TAB   |
| 00113011701 | GS LANSOPRAZOLE DR 15 MG CAP   |
| 00113014165 | GS ACID REDUCER 10 MG TABLET   |
| 00113014762 | GS ALL DAY ALLERGY-D TABLET    |
| 00113016110 | GS INFANT PAIN-FEVER 160 MG/5  |
| 00113016626 | GS CHILD IBUPROFEN 100 MG/5 ML |
| 00113018630 | GS SLEEP TIME 50 MG/30 ML LIQ  |
| 00113018926 | GS CHILD ALL DAY ALLER 1 MG/ML |
| 00113019402 | GS ACID REDUCER 20 MG TABLET   |
| 00113021429 | GS MICONAZOLE 7 CREAM          |
| 00113022453 | GS ANTI-DIARRHEAL 2 MG CAPLET  |
| 00113022771 | GS PAIN RELIEF 500 MG TABLET   |
| 00113027468 | GS ASPIRIN 81 MG CHEWABLE TAB  |
| 00113027953 | GS HEMORRHOIDAL SUPPOSITORIES  |
| 00113029827 | GS IBUPROFEN 200 MG LIQUID GEL |
| 00113030601 | GS CLEARLAX POWDER             |
| 00113032365 | GS LUBRICAT PLUS 0.5% EYE DRPS |
| 00113033534 | GS NIGHTTIME COLD-FLU LIQUID   |
| 00113034040 | GS ANTACID-SIMETHICONE LIQUID  |
| 00113034405 | GS NICOTINE 2 MG LOZENGE       |
| 00113035740 | GS ANTACID PLUS ANTI-GAS LIQ   |
| 00113035926 | GS TUSSIN DM COUGH SYRUP       |
| 00113037462 | GS MIGRAINE 250-250-65 MG CPLT |
| 00113037926 | GS CHILD ALLERGY 12.5 MG/5 ML  |
| 00113038428 | GS COUGH DM ER 30 MG/5 ML SUSP |
| 00113038810 | GS NO DRIP 0.05% NASAL SPRAY   |
| 00113040378 | GS PAIN RELIEF 325 MG TABLET   |
| 00113041926 | GS CHILD MUCUS RLF COUGH LIQ   |
| 00113042553 | GS ALLER-EASE 60 MG TABLET     |
| 00113043162 | GS NIGHTTIME SLEEP AID 25 MG   |
| 00113043262 | GS NASAL DECONGEST 30 MG TAB   |
| 00113043771 | GS PAIN RLF PM 25-500 MG CPLT  |
| 00113044164 | GS SLEEP AID 25 MG TABLET      |
| 00113044301 | GS NASAL ALLERGY 24HR SPRAY    |
| 00113047953 | GS ALLERGY RELIEF 25 MG TABLET |
| 00113051771 | GS IBUPROFEN 200 MG CAPLET     |
| 00113054164 | GS ANTI-ITCH 1% CREAM          |
| 00113054478 | GS ARTHRITIS PAIN ER 650 MG    |

| NDC         | Name                           |
|-------------|--------------------------------|
| 00113054853 | GS SEVERE DAY COLD-FLU CAPLET  |
| 00113057122 | GS ALLER-EASE 180 MG TABLET    |
| 00113057826 | GS TUSSIN DM LIQUID            |
| 00113058840 | GS ANTACID PLUS ANTI-GAS SUSP  |
| 00113060334 | GS SEVERE DAYTIME COLD-FLU LIQ |
| 00113060826 | GS CHILD FEVER-PAIN 160 MG/5ML |
| 00113061239 | GS ALLERGY RELIEF 10 MG TABLET |
| 00113062264 | GS ITCH RELIEF 2%-0.1% CREAM   |
| 00113064810 | GS NASAL FOUR 1% NASAL SPRAY   |
| 00113065634 | GS DAY TIME COLD-FLU LIQUID    |
| 00113066834 | GS NIGHTTIME COUGH LIQUID      |
| 00113067126 | GS CHILD ALLERGY RLF 5 MG/5 ML |
| 00113070326 | GS TUSSIN CF LIQUID            |
| 00113073402 | GS NICOTINE 2 MG MINI LOZENGE  |
| 00113081266 | GS MUCUS DM MAX ER 1200-60 MG  |
| 00113081710 | GS SINUS NASAL SPRAY 0.05%     |
| 00113083926 | GS CHILD MUCUS RELIEF M-S COLD |
| 00113085140 | GS ADV ANTACID-ANTIGAS LIQUID  |
| 00113086626 | GS LICE KILLING SHAMPOO        |
| 00113087305 | GS NICOTINE 4 MG LOZENGE       |
| 00113088210 | GS SIMETHICONE 20 MG/0.3 ML    |
| 00113089801 | GS ESOMEPRAZOLE MAG DR 20 MG   |
| 00113090162 | GS NAPROXEN SOD 220 MG TABLET  |
| 00113092726 | GS TUSSIN DM MAX LIQUID        |
| 00113094424 | GS HEMORRHOIDAL CREAM          |
| 00113095702 | GS NICOTINE 4 MG MINI LOZENGE  |
| 00113095821 | GS CHLD COUGH DM ER 30 MG/5 ML |
| 00113096223 | GS ANTACID 1,000 MG CHEW TAB   |
| 00113098726 | GS CHILDREN'S COLD-COUGH SOLN  |
| 00113099451 | GS DAYTIME COLD-FLU SOFTGEL    |
| 00113118901 | GS ARTHRITIS PAIN 1% GEL       |
| 00113164526 | GS ANTI-DIARRHEAL 1 MG/7.5 ML  |
| 00113172526 | GS TUSSIN DM 200-20 MG/20 ML   |
| 00113191016 | GS LICE KILLING 1 % CRM RINSE  |
| 00113191978 | GS ASPIRIN 325 MG TABLET       |
| 00113200078 | ALCOHOL 70% SWABS              |
| 00113200268 | MUCUS D ER 600-60 MG TABLET    |
| 00113200312 | OPTION 2 1.5 MG TABLET         |
| 00113200760 | ALLERGY-CONGESTION RLF 12H TAB |
| 00113202360 | GS MUCUS ER 600 MG CAPLET      |
| 00113206126 | TUSSIN MUCUS-CONG 200 MG/10 ML |
| 00113217662 | ALL DAY ALLERGY-D TABLET       |
| 00113221949 | GS MUCUS DM ER 600-30 MG TAB   |
| 00113222462 | ANTI-DIARRHEAL 2 MG CAPLET     |
| 00113246162 | GS IBUPROFEN 100 MG CHEW TAB   |

| NDC         | Name                           |
|-------------|--------------------------------|
| 00113436862 | GS NAPROXEN SOD 220 MG CAPLET  |
| 00113810101 | OPIII 0.075 MG TABLET          |
| 00113945813 | GS ALL DAY ALLERGY 10 MG TAB   |
| 00116106032 | DYNA-HEX 4% LIQUID             |
| 00116299404 | SCRUB CARE EXIDINE 4% SOLUTION |
| 00121043130 | MILK OF MAGNESIA SUSPENSION    |
| 00121059500 | SOD CITRATE-CITRIC ACID CUP    |
| 00121059516 | SOD CITRATE-CITRIC ACID SOLN   |
| 00121063800 | GUAIFENESIN-DM 100-10 MG/5 ML  |
| 00121065700 | ACETAMINOPHEN 160 MG/5 ML CUP  |
| 00121067616 | POTASSIUM CIT-CITRIC ACID SOLN |
| 00121067716 | TRICITRATES ORAL SOLUTION      |
| 00121072208 | SENNA 176 MG/5 ML SYRUP        |
| 00121076616 | CALCIUM CARB 1,250 MG/5 ML SUS |
| 00121086500 | DIPHENHYDRAMINE 12.5MG/5ML CUP |
| 00121091400 | CHILDREN IBUPROF 100MG/5ML CUP |
| 00121093505 | DOCUSATE SODIUM 50 MG/5 ML CUP |
| 00121093516 | DOCUSATE SODIUM 50 MG/5 ML LIQ |
| 00121093900 | CHLD ACETAMINOPHEN 160 MG/5 ML |
| 00121094000 | MILK OF MAGNESIA CONC 10ML CUP |
| 00121097001 | LIDOCAINE PAIN RELIEF 4% PATCH |
| 00121102200 | CHILD IBUPROFEN 100 MG/5ML CUP |
| 00121127600 | GUAIFENESIN-DM 200-20 MG/10 ML |
| 00121131400 | ACETAMINOPHEN 325 MG/10.15 ML  |
| 00121148800 | GUAIFENESIN 200 MG/10 ML CUP   |
| 00121173000 | DIPHENHYDRAMINE 25 MG/10ML CUP |
| 00121174400 | GUAIFENESIN 100MG/5ML SOLN CUP |
| 00121176130 | MAG-AL PLUS SUSPENS 30 ML CUP  |
| 00121176230 | MAG-AL PLUS XS SUSP 30 ML CUP  |
| 00121182800 | CHILD IBUPROFEN 200MG/10ML CUP |
| 00121187000 | DOCUSATE SOD 100 MG/10 ML CUP  |
| 00121197100 | ACETAMINOPHEN 650MG/20.3ML CUP |
| 00121223200 | GUAIFENESIN 300 MG/15 ML CUP   |
| 00121472215 | SENNA 528 MG/15 ML CUP         |
| 00121476605 | CALCIUM CARB 1,250 MG/5 ML CUP |
| 00121496705 | SENNA 8.8 MG/5 ML SYRUP CUP    |
| 00132000046 | FLEET MINERAL OIL 2.5 ML/5 ML  |
| 00132000047 | FLEET BISACODYL EC 5 MG TAB    |
| 00132000048 | FLEET DOCUSATE 100 MG SOFTGEL  |
| 00132000106 | FLEET PEDIA-LAX STOOL SOFTENER |
| 00132000206 | PHAZYME 180 MG SOFTGEL         |
| 00132000214 | PHAZYME 250 MG SOFTGEL         |
| 00132000507 | PHAZYME GAS AND ACID CHEW TAB  |
| 00132000655 | FLEET PEDIA-LAX TABLET CHEW    |
| 00132007900 | FLEET GLYCERIN 2 GM ADULT SUPP |

| NDC         | Name                           |
|-------------|--------------------------------|
| 00132011946 | FLEET ENEMA                    |
| 00132018582 | FLEET GLYCERIN LIQUID SUPP     |
| 00132020220 | FLEET PEDIA-LAX ENEMA          |
| 00132030140 | FLEET MINERAL OIL ENEMA        |
| 00132070336 | FLEET BISACODYL 10 MG ENEMA    |
| 00135007003 | TUMS TABLET CHEWABLE           |
| 00135007401 | TUMS X-STR 750 TABLET CHEWABLE |
| 00135007422 | TUMS E-X TABLET CHEWABLE       |
| 00135011814 | TUMS ULTRA 1,000 MG CHEW TAB   |
| 00135015707 | NICORETTE 2 MG CHEWING GUM     |
| 00135015807 | NICORETTE 4 MG CHEWING GUM     |
| 00135019401 | NICODERM CQ 21 MG/24HR PATCH   |
| 00135019502 | NICODERM CQ 14 MG/24HR PATCH   |
| 00135019602 | NICODERM CQ 7 MG/24HR PATCH    |
| 00135020001 | ABREVA 10% CREAM               |
| 00135024302 | TUMS SMOOTHIES CHEW TABLET     |
| 00135046901 | TUMS KIDS 300 MG (750) CHEWTAB |
| 00135050802 | NICORETTE 2 MG MINI LOZENGE    |
| 00135050902 | NICORETTE 4 MG MINI LOZENGE    |
| 00135051001 | NICORETTE 2 MG LOZENGE         |
| 00135051101 | NICORETTE 4 MG LOZENGE         |
| 00135052202 | TUMS FRESHERS ANTACID CHEW TAB |
| 00135057602 | FLONASE ALLERGY RLF 50 MCG SPR |
| 00135058201 | CHILD FLONASE ALLER RLF 50 MCG |
| 00135060601 | TUMS 750 MG CHEWY BITES        |
| 00135100002 | TUMS 750 MG TABLET CHEWABLE    |
| 00165007760 | DIASENSE MAGNESIUM TABLET      |
| 00168012691 | SWIM EAR DROPS                 |
| 00178031430 | POTASSIUM IODIDE 65 MG/ML SOLN |
| 00178033003 | DR. SMITH'S DIAPER 10% OINTMNT |
| 00178055001 | ONCOVITE TABLET                |
| 00178083230 | CITRANATAL B-CALM COMBO PACK   |
| 00179801230 | BACITRACIN ZN 500 UNIT/GM OINT |
| 00179801630 | HYDROCORTISONE-ALOE 0.5% CREAM |
| 00179802902 | NIACIN 500 MG TABLET           |
| 00179803160 | VISION FORMULA WITH LUTEIN TAB |
| 00179803501 | FOLIC ACID 1,000 MCG TABLET    |
| 00179803612 | MAG-OXIDE MAGNESIUM 200 MG TAB |
| 00179804712 | MEN'S DAILY FORMULA TABLET     |
| 00179804912 | OMEGA-3 FISH OIL 1,200 MG SFGL |
| 00179805002 | FOLIC ACID 800 MCG TABLET      |
| 00179805301 | FERROUS GLUCONATE 324 MG TAB   |
| 00179805401 | FERROUS SULFATE 325 MG TABLET  |
| 00179805602 | CALCIUM CIT 315-VIT D3 250 CPT |
| 00179805802 | VITAMIN B-12 1,000 MCG TABLET  |

| NDC         | Name                           |
|-------------|--------------------------------|
| 00179805912 | ADULTS 50 PLUS DAILY FORMULA   |
| 00179806102 | VITAMIN B-6 100 MG TABLET      |
| 00179806312 | ADULTS' DAILY FORMULA TABLET   |
| 00179806490 | PRENATAL MULTIVITAMIN TABLET   |
| 00179806512 | WOMEN'S DAILY FORMULA TABLET   |
| 00179806612 | WOMEN'S 50 PLUS DAILY FORMULA  |
| 00179806712 | MEN'S 50 PLUS DAILY FORMULA TB |
| 00179815001 | BISACODYL EC 5 MG TABLET       |
| 00179815601 | SENNA 8.6 MG TABLET            |
| 00179831301 | PSEUDOEPHEDRINE 30 MG TABLET   |
| 00179831550 | PSEUDOEPHEDRINE 60 MG TABLET   |
| 00179832530 | FEXOFENADINE HCL 180 MG TABLET |
| 00179840702 | B COMPLEX WITH VITAMIN C TAB   |
| 00179842118 | FISH OIL 1,200 MG FISH OIL     |
| 00179842712 | MELATONIN 3 MG TABLET          |
| 00179870260 | BENZOYL PEROXIDE 5% GEL        |
| 00179870360 | BENZOYL PEROXIDE 10% GEL       |
| 00179870730 | DOUBLE ANTIBIOTIC OINTMENT     |
| 00182432906 | HIGH POTENCY B W-C 300 MG CPLT |
| 00182821600 | VITAMIN E 400 UNIT SOFTGEL     |
| 00223172001 | SODIUM BICARB 325 MG TABLET    |
| 00223172101 | SODIUM BICARB 650 MG TABLET    |
| 00223176001 | SODIUM CHLORIDE 1 GM TABLET    |
| 00224180180 | KONSYL ORIGINAL FIBER POWDER   |
| 00224183807 | KONSYL-ORANGE POWDER           |
| 00224183902 | KONSYL EZ MIX FORMULA POWDR    |
| 00225038080 | AYR SALINE 0.65% NOSE SPRAY    |
| 00225038180 | AYR ALLERGY & SINUS NASAL MIST |
| 00225038280 | AYR SALINE 0.65% NOSE DROPS    |
| 00225055050 | BABY AYR SALINE 0.65% DROPS    |
| 00225080047 | NEO-SYNEPHRINE 0.25% SPRAY     |
| 00234057504 | HIBICLENS 4% LIQUID            |
| 00234057516 | HIBICLENS 4% WITH FOAM PUMP    |
| 00234057532 | HIBICLENS 4% LIQUID            |
| 00245010801 | FERROUS SULF EC 325 MG TABLET  |
| 00280003012 | PHILLIPS' MILK OF MAGNESIA     |
| 00280006501 | ASTEPRO ALLERGY 205.5MCG SPRAY |
| 00280006601 | CHILD ASTEPRO 205.5 MCG SPRAY  |
| 00280007210 | CLARISPRAY 50 MCG NASAL SPRAY  |
| 00280200010 | BAYER ASPIRIN 325 MG TABLET    |
| 00280208036 | BAYER ASPIRIN 81 MG CHEW TAB   |
| 00280210012 | BAYER LOW DOSE EC 81 MG TAB    |
| 00280211010 | BAYER ASPIRIN EC 325 MG TABLET |
| 00283060943 | HURRICaine LUER-LOCK DISP CAP  |
| 00295134796 | HYDROLATUM OINTMENT            |

| NDC         | Name                           |
|-------------|--------------------------------|
| 00299391702 | CETAPHIL MOISTURIZING CREAM    |
| 00299391756 | CETAPHIL MOISTURIZING CREAM    |
| 00299392001 | CETAPHIL CREAM                 |
| 00299392804 | CETAPHIL DAILY FACIAL LOT      |
| 00316022706 | PANOXYL 4% ACNE CREAMY WASH    |
| 00363000220 | STOOL SOFTENER-LAXATIVE TABLET |
| 00363000511 | ENEMA READY-TO-USE             |
| 00363000611 | MINERAL OIL ENEMA              |
| 00363000905 | STOOL SOFTENER 100 MG SOFTGEL  |
| 00363002271 | CIMETIDINE 200 MG TABLET       |
| 00363002401 | 24 HOUR ALLERGY 50 MCG SPRAY   |
| 00363003626 | ACID CONTROLLER 20 MG TABLET   |
| 00363005002 | COMFORT GEL MAX STR SUSP       |
| 00363005460 | WAL-PHED 12 HOUR 120 MG CAPLET |
| 00363006160 | WAL-PHED D ER 120 MG CAPLET    |
| 00363006510 | ANEFIRIN 0.05% NASAL SPRAY     |
| 00363007120 | MUCUS RELIEF ER 600 MG TABLET  |
| 00363007302 | ANTACID LIQUID                 |
| 00363007428 | MUCUS RELIEF ER 1,200 MG TAB   |
| 00363007564 | BACITRACIN 500 UNIT/GM OINTMNT |
| 00363007826 | CASTOR OIL                     |
| 00363008100 | MICONAZOLE 3 COMBO PACK        |
| 00363008501 | CHILD WAL-ITIN 5 MG/5 ML SYRUP |
| 00363008808 | CHILD WAL-ZYR 1 MG/ML SOLUTION |
| 00363008816 | WAL-ITIN 5 MG/5 ML SYRUP       |
| 00363010301 | INFANT PAIN-FEVER 160 MG/5 ML  |
| 00363010412 | PAIN RELIEVER 325 MG TABLET    |
| 00363010526 | NON-ASPIRIN 160 MG/5 ML SUSP   |
| 00363010540 | CHILD PAIN RLF 160 MG/5 ML SUS |
| 00363011018 | GAS RELIEF 125 MG CHEW TABLET  |
| 00363011208 | WAL-PHED 30 MG TABLET          |
| 00363011701 | LANSOPRAZOLE DR 15 MG CAPSULE  |
| 00363012014 | FIBER LAX 625 MG CAPLET        |
| 00363012020 | IBUPROFEN 200 MG SOFTGEL       |
| 00363012405 | NICOTINE 2 MG LOZENGE          |
| 00363013338 | MAGNESIUM CITRATE SOLUTION     |
| 00363014082 | ALL DAY PAIN RLF 220 MG CAPLET |
| 00363014101 | INFANTS PAIN-FEVER 160 MG/5 ML |
| 00363014175 | ACID CONTROLLER 10 MG TABLET   |
| 00363014468 | MUCUS RELIEF D ER 600-60 MG TB |
| 00363015712 | ASPIRIN 325 MG TABLET          |
| 00363015714 | ASPIRIN 325 MG TABLET          |
| 00363015904 | WAL-TUSSIN COUGH 15 MG/5 ML    |
| 00363015912 | HEADACHE RELIEF TABLET         |
| 00363016012 | SENNA-S TABLET                 |

| NDC         | Name                           |
|-------------|--------------------------------|
| 00363016115 | PAIN RELIEVER PM CAPLET        |
| 00363016116 | INFANT PAIN-FEVER 160 MG/5 ML  |
| 00363016406 | ORAL RELIEF SORE THROAT SPRAY  |
| 00363016626 | CHILDREN IBUPROFEN 100 MG/5 ML |
| 00363017001 | STOOL SOFTENER 240 MG SOFTGEL  |
| 00363017508 | PAIN RELIEVER 500 MG CAPLET    |
| 00363017653 | WAL-ZYR D TABLET               |
| 00363017804 | CHILD PAIN-FEVER 160 MG/5 ML   |
| 00363018330 | TRI-BUFFERED ASPIRIN 325 MG TB |
| 00363018422 | ANTACID EX STR 750 MG CHEW TAB |
| 00363018601 | NON-ASPIRIN 80 MG TAB CHEW     |
| 00363019005 | NICOTINE 4 MG LOZENGE          |
| 00363019415 | WAL-FINATE 4 MG TABLET         |
| 00363019602 | NICOTINE 7 MG/24HR PATCH       |
| 00363019900 | MICONAZOLE 1 COMBINATION PACK  |
| 00363020469 | WAL-PHED D ER 120 MG TABLET    |
| 00363021807 | ASPIRIN 81 MG CHEWABLE TABLET  |
| 00363021830 | CALAHIST CLEAR LOTION          |
| 00363022434 | ANTACID 500 MG CHEW TABLET     |
| 00363022714 | ASPIRIN EC 325 MG TABLET       |
| 00363023206 | MUCUS RELIEF DM MAX LIQUID     |
| 00363023508 | WAL-NADOL PM 25-500 MG CAPLET  |
| 00363023512 | ACETAMINOPHEN PM CAPLET        |
| 00363024108 | COLD MULTI-SYMPTOM NIGHT LIQ   |
| 00363025514 | ASPIRIN EC 81 MG TABLET        |
| 00363027808 | PAIN RELIEF ADULT 500 MG/15 ML |
| 00363028404 | CHILD PAIN-FEVER 160 MG/5 ML   |
| 00363028826 | CHILDREN'S CHEST CONGEST LIQ   |
| 00363029108 | WAL-PROFEN 200 MG TABLET       |
| 00363029116 | IBUPROFEN 200 MG TABLET        |
| 00363029214 | IBUPROFEN 200 MG CAPLET        |
| 00363029215 | WAL-PROFEN 200 MG CAPLET       |
| 00363030026 | WAL-TUSSIN MAX STR COUGH SYRUP |
| 00363030602 | SMOOTH LAX POWDER              |
| 00363030702 | LUBRICANT EYE DROPS            |
| 00363031026 | ADULT WAL-TUSSIN LIQUID        |
| 00363031901 | SOOTHE 262 MG CHEWABLE TABLET  |
| 00363032003 | SALINE 0.65% NASAL SPRAY       |
| 00363032601 | WOMANS LAXATIVE TABLET         |
| 00363032706 | GENTLE LAXATIVE 5 MG TABLET    |
| 00363032712 | GENTLE LAXATIVE EC 5 MG TABLET |
| 00363032830 | ORA RELIEF SORE THROAT SPRAY   |
| 00363033082 | TIOCONAZOLE-1 6.5% OINTMENT    |
| 00363033304 | ARTHRITIS PAIN ER 650 MG CAPLT |
| 00363033412 | HEADACHE RELIEF CAPLET         |

| NDC         | Name                           |
|-------------|--------------------------------|
| 00363033550 | ANTACID XTRA STRENGTH CHEW TAB |
| 00363033601 | PAIN RELIEVER ER 650 MG CAPLET |
| 00363034040 | COMFORT GEL EX-STRENGTH LIQUID |
| 00363034080 | ARTHRITIS PAIN ER 650 MG GELTB |
| 00363034356 | HYDROCORTISONE 1% CREAM        |
| 00363035278 | NICOTINE 2 MG CHEWING GUM      |
| 00363035926 | ADULT WAL-TUSSIN DM SYRUP      |
| 00363036010 | ACETAMINOPHEN PM GELTAB        |
| 00363036882 | WAL-PROXEN 220 MG CAPLET       |
| 00363036964 | HYDROCORTISONE 1% CREAM        |
| 00363037478 | MIGRAINE 250-250-65 MG CPLT    |
| 00363037606 | ORAL RLF 1.4% SORE THROAT SPRY |
| 00363038421 | COUGH DM ER 30 MG/5 ML SUSP    |
| 00363040321 | WAL-DRAM-2 25 MG TABLET        |
| 00363040421 | MOTION SICKNESS 25 MG CHEW TAB |
| 00363041006 | MUCUS RELIEF SEVERE COLD LIQ   |
| 00363041105 | NICOTINE 2 MG LOZENGE          |
| 00363041706 | COUGH-CHEST CONGESTION DM LIQ  |
| 00363041926 | CHILDREN'S COUGH LIQUID        |
| 00363042062 | NICOTINE 2 MG CHEWING GUM      |
| 00363042113 | NICOTINE 4 MG CHEWING GUM      |
| 00363042162 | NICOTINE 4 MG CHEWING GUM      |
| 00363043212 | ANTACID-ANTIGAS LIQUID         |
| 00363044101 | WAL-SOM 25 MG TABLET           |
| 00363045307 | WAL-PHED PE 10 MG TABLET       |
| 00363045802 | WAL-ZYR 10 MG TABLET           |
| 00363049062 | WAL-PROXEN 220 MG TABLET       |
| 00363049071 | ALL DAY PAIN RELIEF 220 MG TAB |
| 00363051311 | WAL-MUCIL NTRL FIBER LAX POWD  |
| 00363051908 | PAIN RELIEVER 500 MG GELCAP    |
| 00363052024 | ANTI-DIARRHEAL 2 MG SOFTGEL    |
| 00363052162 | IBUPROFEN JR STR 100 MG TB CHW |
| 00363052243 | WAL-ITIN 10 MG TABLET          |
| 00363052812 | ANTACID PLUS ANTI-GAS LIQUID   |
| 00363053112 | PAIN RELIEVER 500 MG TABLET    |
| 00363053201 | MUCUS RELIEF 400 MG TABLET     |
| 00363053301 | MUCUS RELIEF DM TABLET         |
| 00363055601 | PAIN RELIEVER PM GELCAP        |
| 00363057113 | WAL-FEX ALLERGY 180 MG TABLET  |
| 00363057953 | CHILD PAIN REL-FEVER 120MG SUP |
| 00363061212 | COMFORT GEL EXTRA STR SUSP     |
| 00363061501 | WAL-ZYR 0.025% EYE DROPS       |
| 00363061801 | PINWORM MEDICINE 144 MG/ML     |
| 00363064810 | WAL-FOUR 1% NASAL SPRAY        |
| 00363065301 | AZELASTINE 0.15% NASAL SPRAY   |

| NDC         | Name                           |
|-------------|--------------------------------|
| 00363066026 | IBUPROFEN 100 MG/5 ML SUSP     |
| 00363069112 | ASPIRIN EC 325 MG CAPLET       |
| 00363070530 | CHILD SALINE 0.65% NASAL SPRAY |
| 00363070578 | IBUPROFEN 200 MG CAPLET        |
| 00363070653 | CHILD FEVER REDUCER 120 MG SUP |
| 00363070804 | NAUSEA CONTROL LIQUID          |
| 00363073203 | OMEPRAZOLE-BICARB 20-1,100 CAP |
| 00363073402 | NICOTINE 2 MG MINI LOZENGE     |
| 00363073530 | MUCUS RLF DM MAX ER 1200-60 MG |
| 00363076340 | SEVERE COLD-FLU NIGHTTIME LIQ  |
| 00363077332 | URINARY PAIN RELIEF 95 MG TAB  |
| 00363079926 | ADULT WAL-TUSSIN DM MAX LIQ    |
| 00363080930 | ALCOHOL 70% SWABS              |
| 00363083143 | MINERAL OIL                    |
| 00363088078 | HEARTBURN ANTACID CHEW TABLET  |
| 00363088210 | GAS RELIEF DROPS 20 MG/0.3 ML  |
| 00363089726 | IBUPROFEN 100 MG/5 ML SUSP     |
| 00363092301 | EYE ITCH RELIEF 0.025% DROPS   |
| 00363093426 | ADULT WAL-TUSSIN DM MAX LIQ    |
| 00363093604 | WAL-ZYR SOLUTION               |
| 00363095235 | LUBRICANT EYE OINTMENT         |
| 00363095526 | LICE TREATMENT 1% CREME RINSE  |
| 00363095702 | NICOTINE 4 MG MINI LOZENGE     |
| 00363097426 | WAL-ZYR SOLUTION               |
| 00363106108 | ANTISEPTIC SKIN CLEANSER 4%    |
| 00363110316 | ANTACID ULTRA STR 1,000 MG CHW |
| 00363124101 | NICOTINE 14 MG/24HR PATCH      |
| 00363189802 | ESOMEPRAZOLE MAG DR 20 MG CAP  |
| 00363192112 | MILK OF MAGNESIA SUSPENSION    |
| 00363209208 | CHILD WAL-ITIN 5 MG/5 ML SOLN  |
| 00363210808 | CHILD ALLERGY RELIEF 5 MG/5 ML |
| 00363307312 | ANTACID M LIQUID               |
| 00363336006 | MUCUS RLF COLD-FLU-THROAT LIQ  |
| 00363410040 | STOOL SOFTENER 100 MG SOFTGEL  |
| 00363450108 | CHILD PAIN-FEVER 160 MG TB CHW |
| 00363492353 | ALLERGY RELIEF-D12 5-120 MG TB |
| 00363552980 | LEVOCETIRIZINE 5 MG TABLET     |
| 00363677157 | ZINC OXIDE 40% OINTMENT        |
| 00363713005 | EYE ALLERGY ITCH-RED 0.1% DROP |
| 00363713125 | EYE ALLERGY ITCH RLF 0.2% DROP |
| 00363722025 | LUBRICANT EYE 0.4%-0.3% DROP   |
| 00363816638 | MAGNESIUM CITRATE SOLUTION     |
| 00363899310 | PAIN RELIEVER 325 MG TABLET    |
| 00363965002 | ALLERGY EYE DROPS              |
| 00372000601 | SCOT-TUSSIN 100 MG/5 ML LIQ    |

| NDC         | Name                           |
|-------------|--------------------------------|
| 00372001304 | FEBROL 167 MG/5 ML LIQUID      |
| 00378363501 | CETIRIZINE HCL 5 MG TABLET     |
| 00378363701 | CETIRIZINE HCL 10 MG TABLET    |
| 00394013012 | MERIBIN 5 MG CAPSULE           |
| 00394049902 | ORAZINC 220 MG CAPSULE         |
| 00395012394 | ASCORBIC ACID GRANULES         |
| 00395071392 | DEWEE'S CARMINATIVE LIQUID     |
| 00395103116 | GLYCERIN SKIN PROTECTANT LIQ   |
| 00395103175 | GLYCERIN 99.5% SKIN PROTECT LQ |
| 00395103196 | GLYCERIN 99.5% LIQUID          |
| 00395168528 | MINERAL OIL HEAVY              |
| 00404071413 | ACETAMINOPHEN 325 MG TABLET    |
| 00404071613 | ACETAMINOPHEN 500 MG TABLET    |
| 00440113090 | ASPIRIN EC 325 MG TABLET       |
| 00440113590 | ASPIRIN EC 81 MG TABLET        |
| 00440146530 | DOCUSATE SODIUM 100 MG CAPSULE |
| 00440146630 | DOCUSATE SODIUM 250 MG CAPSULE |
| 00440255730 | PYRIDOXINE 50 MG TABLET        |
| 00440806569 | PHENAZOPYRIDINE 95 MG TABLET   |
| 00450012210 | INFANTS TYLENOL 80 MG/0.8 ML   |
| 00450012230 | INFANTS' TYLENOL 160 MG/5 ML   |
| 00450020424 | ZYRTEC-D ER 5 MG-120 MG TABLET |
| 00450020504 | CHILD ZYRTEC 1 MG/ML SOLUTION  |
| 00450044406 | TYLENOL EX-STR 500 MG CAPLET   |
| 00450048102 | MOTRIN IB 200 MG CAPLET        |
| 00450048830 | TYLENOL EX-STR 500 MG GELCAP   |
| 00450049660 | TYLENOL 325 MG TABLET          |
| 00450051824 | CHILD TYLENOL 160 MG TAB CHEW  |
| 00450058118 | SUDAFED PE 10 MG TABLET        |
| 00480347819 | NALOXONE HCL 4 MG NASAL SPRAY  |
| 00482001608 | APATATE FORTE LIQUID           |
| 00485005708 | ED-APAP 160 MG/5 ML LIQUID     |
| 00485009816 | ED CHLORPED JR SYRUP           |
| 00485015516 | ED A-HIST LIQUID               |
| 00485017116 | ED-A-HIST DM LIQUID            |
| 00485020216 | RYNEX PE LIQUID                |
| 00485020404 | RYNEX DM LIQUID                |
| 00485020616 | RYNEX PSE LIQUID               |
| 00485020816 | ED BRON GP LIQUID              |
| 00485025401 | ED-A-HIST 4 MG-10 MG TABLET    |
| 00486113201 | BEELITH TABLET                 |
| 00487590199 | S2 RACEPINEPHRINE 2.25% SOLN   |
| 00496088205 | LMX 4 4% CREAM                 |
| 00496088330 | LMX 5 5% CREAM                 |
| 00496089215 | RECTICARE 5% CREAM             |

| NDC         | Name                           |
|-------------|--------------------------------|
| 00501520004 | ZANTAC 75 TABLET               |
| 00536001583 | ALMACONE-2 LIQUID              |
| 00536009185 | ALUMINUM HYDROXIDE GEL         |
| 00536100601 | ALLER-CHLOR 4 MG TABLET        |
| 00536100836 | ASPIRIN 81 MG CHEWABLE TABLET  |
| 00536101001 | DIPHENHIST 25 MG CAPSULE       |
| 00536104610 | SODIUM BICARB 325 MG TABLET    |
| 00536104710 | SODIUM BICARB 650 MG TABLET    |
| 00536105224 | POLYETHYLENE GLYCOL 3350 POWD  |
| 00536105284 | POLYETHYLENE GLYCOL 3350 POWD  |
| 00536105525 | ACNE MEDICATION 5% GEL         |
| 00536105625 | ACNE MEDICATION 10% GEL        |
| 00536105775 | ACNE MEDICATION 5% LOTION      |
| 00536105875 | ACNE MEDICATION 10% LOTION     |
| 00536109306 | ALL DAY RELIEF 220 MG CAPLET   |
| 00536109406 | ALL DAY RELIEF 220 MG TABLET   |
| 00536110301 | ALCOHOL 70% PREP PADS          |
| 00536110688 | NICOTINE 7 MG/24HR PATCH       |
| 00536110888 | NICOTINE 21 MG/24HR PATCH      |
| 00536110945 | UREA 20% CREAM                 |
| 00536111248 | BUDESONIDE 32 MCG NASAL SPRAY  |
| 00536111825 | ARTHRITIS PAIN RLF 0.075% CRM  |
| 00536112925 | ACNE MEDICATION 2.5% GEL       |
| 00536113428 | MICONAZOLE 2% TOPICAL CREAM    |
| 00536114263 | LEVONORGESTREL 1.5 MG TABLET   |
| 00536114397 | PETROLATUM 42% OINTMENT        |
| 00536114730 | IBUPROFEN 200 MG SOFTGEL       |
| 00536116134 | MUCUS RLF DM ER 600-30 MG TAB  |
| 00536116361 | GUAIFENESIN ER 600 MG TABLET   |
| 00536118170 | CLOTRIMAZOLE 1% SOLUTION       |
| 00536118297 | MUCUS-CHEST CONG 200 MG/10 ML  |
| 00536118313 | FLUTICASONE PROP 50 MCG SPRAY  |
| 00536118612 | HEMORRHOIDAL SUPPOSITORIES     |
| 00536120610 | CALCIUM CARBONATE 648 MG TAB   |
| 00536121195 | DIBUCAINE 1% OINTMENT          |
| 00536121277 | INF ACETAMINOPHEN 160 MG/5 ML  |
| 00536121429 | DIPHENHYDRAMINE 25 MG TABLET   |
| 00536121794 | EYE DROPS 0.05%                |
| 00536121994 | LUBRICATING EYE DROP           |
| 00536122308 | GAS RELIEF 125 MG CHEW TABLET  |
| 00536122858 | PHENASEPTIC 1.4% SPRAY         |
| 00536123927 | NICOTINE 2 MG MINI LOZENGE     |
| 00536124127 | NICOTINE 4 MG MINI LOZENGE     |
| 00536124701 | SENEXON-S 50-8.6 MG TABLET     |
| 00536124801 | STIMULANT LAXATIVE PLUS TABLET |

| NDC         | Name                           |
|-------------|--------------------------------|
| 00536125240 | EYE ITCH RELIEF 0.025% DROPS   |
| 00536125391 | SODIUM CHLORIDE 5% EYE OINT    |
| 00536125494 | SODIUM CHLORIDE 5% EYE DROP    |
| 00536125919 | BENZOYL PEROXIDE 5% WASH       |
| 00536126163 | BENZOYL PEROXIDE 10% WASH      |
| 00536126456 | CAPSAICIN 0.1% CREAM           |
| 00536126511 | CLOTRIMAZOLE 1% TOPICAL CREAM  |
| 00536126659 | SENNA 8.8 MG/5 ML LIQUID       |
| 00536126720 | LIDOCAINE 4% CREAM             |
| 00536126958 | CALDYPHEN CLEAR LOTION         |
| 00536127211 | ANTIFUNGAL 1% TOPICAL CREAM    |
| 00536127780 | HYDROCORTISONE-ALOE 1% CREAM   |
| 00536127912 | CETIRIZINE-PSE ER 5-120 MG TAB |
| 00536128294 | LUBRICATING TEARS 0.1-0.3% DRP |
| 00536128636 | STOMACH RLF 525 MG/30 ML SUSP  |
| 00536128736 | STOMACH RELIEF 525 MG/15 ML    |
| 00536128806 | HEMORRHOIDAL OINTMENT          |
| 00536128935 | SINUS CONGESTION-PAIN CAPLET   |
| 00536129136 | PHENYLEPHRINE 10 MG TABLET     |
| 00536129229 | ACETAMINOPHEN 500 MG GELCAP    |
| 00536129383 | ANTACID-ANTIGAS LIQUID         |
| 00536129434 | DICLOFENAC SODIUM 1% GEL       |
| 00536129701 | MECLIZINE 12.5 MG CAPLET       |
| 00536129801 | FAMOTIDINE 20 MG TABLET        |
| 00536129901 | MECLIZINE 25 MG TABLET CHEW    |
| 00536130375 | INFANTS' SIMETHICONE DROPS     |
| 00536130723 | OLOPATADINE HCL 0.2% EYE DROP  |
| 00536130840 | OLOPATADINE HCL 0.1% EYE DROPS |
| 00536131108 | CHEST CONGEST RLF 400 MG TAB   |
| 00536131208 | CHEST CONG RLF DM 400-20 MG TB |
| 00536131385 | CHEST CONGESTION RELIEF DM SYR |
| 00536131485 | CHEST CONGESTION RELIEF SOLN   |
| 00536131543 | TOLNAFTATE 1% CREAM            |
| 00536131625 | ZINC OXIDE 20% OINTMENT        |
| 00536132594 | POLYVINYL ALCOHOL 1.4% EYEDROP |
| 00536132601 | PAIN RELIEVER PLS 250-250-65MG |
| 00536132926 | TOLNAFTATE 1% POWDER           |
| 00536133321 | GUAIFENESIN-PSE ER 600-60 MG   |
| 00536133434 | DEXTROMETHORPHAN 15 MG SOFTGEL |
| 00536133632 | CALCIUM ACETATE 667 MG TABLET  |
| 00536133809 | NICOTINE 4 MG LOZENGE          |
| 00536134380 | VITAMIN D3 10 MCG/ML DROP      |
| 00536134480 | INFANT IRON 15 MG/ML DROP      |
| 00536134580 | INFANT-TODDLER MULTIVIT DROP   |
| 00536134680 | INFANT-TODDLER MULTIVIT-IRON   |

| NDC         | Name                           |
|-------------|--------------------------------|
| 00536134897 | COUGH DM 20-200 MG/20 ML SYRUP |
| 00536135201 | VITAMIN E 180MG(400 UNIT) SFGL |
| 00536135301 | VITAMIN D3 50 MCG SOFTGEL      |
| 00536135807 | COENZYME Q-10 30 MG SOFTGEL    |
| 00536136307 | COENZYME Q-10 200 MG SOFTGEL   |
| 00536136601 | VITAMIN B-12 1,000 MCG TABLET  |
| 00536136707 | LORATADINE 10 MG ODT           |
| 00536136813 | LANSOPRAZOLE DR 15 MG CAPSULE  |
| 00536137785 | SODIUM CHLORIDE 23.4% ORAL SOL |
| 00536137801 | VITAMIN B COMPLEX SOFTGEL      |
| 00536137904 | DOCOSANOL 10% CREAM            |
| 00536138635 | CARBOXYMETHYLCELL 0.5% EYE DRP |
| 00536138792 | LUBRICANT 0.5% EYE DROP        |
| 00536139047 | IBUPROFEN 200 MG TABLET        |
| 00536139288 | GUAIFENESIN ER 1,200 MG TABLET |
| 00536139619 | HYDRATING ELECTROLYTE PWDR PKT |
| 00536140085 | FERROUS SULF 220 MG/5 ML ELIX  |
| 00536140317 | ORALYTE SOLUTION               |
| 00536141107 | PHENAZOPYRIDINE HCL 95 MG TAB  |
| 00536141501 | NEPHRO-VITE TABLET             |
| 00536141638 | VITAMIN B-12 250 MCG TABLET    |
| 00536142401 | ACIDOPHILUS-PECTIN CAPTAB      |
| 00536142541 | MICONAZOLE 3 COMBO PACK        |
| 00536196008 | SEA-OMEGA 70 SOFTGEL           |
| 00536199553 | ANTI-DANDRUFF 1% SHAMPOO       |
| 00536250676 | SALINE MIST 0.65% NOSE SPRY    |
| 00536252525 | CAPSAICIN 0.025% CREAM         |
| 00536322301 | CALCIUM CIT 200 MG-D3 6.25 MCG |
| 00536329210 | ASCORBIC ACID 500 MG TABLET    |
| 00536344308 | CEROVITE JR TABLET CHEW        |
| 00536344508 | CEROVITE SENIOR TABLET         |
| 00536354710 | DAILY-VITE TABLET              |
| 00536360735 | NASAL DECONGESTANT 30 MG TAB   |
| 00536406301 | CLASSIC PRENATAL TABLET        |
| 00536407810 | NIACIN 500 MG TABLET           |
| 00536408501 | PRENATAL VITAMINS TABLET       |
| 00536430605 | FIBER-LAX 625 MG TABLET        |
| 00536440601 | VITAMIN B-6 25 MG TABLET       |
| 00536466110 | THEREMS-M TABLET               |
| 00536478701 | VITAMIN B COMPLEX CAPSULE      |
| 00536509008 | I-VITE TABLET                  |
| 00536703301 | NIACIN 750 MG TABLET SA        |
| 00536703801 | NIACIN ER 1,000 MG TABLET      |
| 00536718101 | ACIDOPHILUS X-STR CAPTAB       |
| 00536718701 | FISH OIL 1,000 MG SOFTGEL      |

| NDC         | Name                           |
|-------------|--------------------------------|
| 00536741551 | ENEMA                          |
| 00536781708 | OYSCO 500-VIT D3 200 TABLET    |
| 00573015020 | ADVIL 200 MG TABLET            |
| 00573016020 | ADVIL 200 MG CAPLET            |
| 00573016530 | ADVIL 200 MG GEL CAPLET        |
| 00573016820 | ADVIL MIGRAINE 200 MG CAPSULE  |
| 00573016920 | ADVIL LIQUI-GEL 200 MG CAPSULE |
| 00573017020 | CHILDREN'S ADVIL SUSPENSION    |
| 00573017030 | CHILDREN'S ADVIL 100 MG/5 ML   |
| 00573017920 | ADVIL JR STR 100 MG TAB CHEW   |
| 00573050375 | CENTRUM WOMEN IMMUNE MINIS TAB |
| 00573055211 | PREPARATION H HC 1% CREAM      |
| 00573119120 | DRISTAN LONG LASTING MIST      |
| 00573137801 | PREPARATION H 0.25% SUPPOSITRY |
| 00573176920 | ADVIL LIQUI-GEL 200MG MINI CAP |
| 00573245014 | NEXIUM 24HR 20 MG CAPSULE      |
| 00573287193 | PREPARATION H OINTMENT         |
| 00573295210 | PRIMATENE ASTHMA TABLET        |
| 00573478199 | CENTRUM WOMEN 50 PLUS MINIS TB |
| 00573478299 | CENTRUM MEN 50 PLUS MINIS TAB  |
| 00573478399 | CENTRUM ADULTS 50 PLUS MINIS   |
| 00574006905 | GLUTOSE-5 GEL                  |
| 00574006915 | GLUTOSE-15 GEL                 |
| 00574006945 | GLUTOSE-45 GEL                 |
| 00574050801 | FERROUS GLUCONATE 324 MG TAB   |
| 00574060801 | FERROUS SULF EC 324 MG TABLET  |
| 00574705012 | BISACODYL 10 MG SUPPOSITORY    |
| 00575100408 | X-SEB T PEARL SHAMPOO          |
| 00603020922 | MAGNESIUM OXIDE 400 MG TABLET  |
| 00603021321 | MAGNESIUM OXIDE 420 MG TABLET  |
| 00642007530 | SELECT-OB + DHA PACK           |
| 00642007790 | SELECT-OB CHEWABLE CAPLET      |
| 00642009430 | VITAFOL NANO TABLET            |
| 00642020410 | STROVITE FORTE CAPLET          |
| 00642020790 | STROVITE ONE CAPLET            |
| 00642403030 | STUART ONE CAPSULE             |
| 00677177333 | GUAIFENESIN 100 MG/5 ML SYRUP  |
| 00677183933 | ACETAMINOPHEN 160 MG/5 ML LIQ  |
| 00682300101 | BACMIN CAPLET                  |
| 00713026831 | TRIPLE ANTIBIOTIC OINTMENT     |
| 00713062231 | TRIPLE ANTIBIOTIC PLUS OINTMNT |
| 00731040106 | ZINC-220 CAPSULE               |
| 00761008624 | BIOTIN 5,000 MCG SOFTGEL       |
| 00761009420 | VITAMIN C 500 MG TABLET        |
| 00761015540 | MELATONIN 5 MG TABLET          |

| NDC         | Name                           |
|-------------|--------------------------------|
| 00761022020 | SENNA LAXATIVE 8.6 MG TABLET   |
| 00761030220 | VITAMIN E 180 MG SOFTGEL       |
| 00761036150 | DAILY MULTIVITAMIN WITH D3 TAB |
| 00761037920 | VITAMIN C 1,000 MG TABLET      |
| 00761041420 | LAXA BASIC 100 MG SOFTGEL      |
| 00761055520 | VITAMIN B-1 100 MG TABLET      |
| 00761081212 | CALCIUM 600-VIT D3 200 TABLET  |
| 00761084420 | VITAMIN C 500 MG TABLET CHEW   |
| 00766165675 | OS-CAL 500+D CAPLET            |
| 00810067013 | SUDAFED 12HR 120 MG CAPLET     |
| 00810073087 | NEOSPORIN OINTMENT             |
| 00810074687 | NEOSPORIN PLUS PAIN RLF OINT   |
| 00810079887 | POLYSPORIN OINTMENT            |
| 00847001200 | L-ARGININE POWDER              |
| 00847001400 | L-ISOLEUCINE POWDER            |
| 00851050012 | CERASPORT LIQUID               |
| 00851050013 | CERASPORT EX1 LIQUID           |
| 00851050030 | CERALYTE-70 ELECTROLYTE DRINK  |
| 00856000309 | ROMPE PECHO MAX MULTI SYMPTOMS |
| 00884029301 | FUNGOID 2% TINCTURE            |
| 00884044904 | UREACIN-20 CREAM               |
| 00884324908 | UREACIN-10 LOTION              |
| 00904001224 | ALLERGY 4 MG TABLET            |
| 00904025024 | APRODINE TABLET                |
| 00904026252 | STRESS FORMULA TABLET          |
| 00904027746 | VITAMIN E 450 MG SOFTGEL       |
| 00904052360 | VITAMIN C 500 MG TABLET        |
| 00904053061 | TAB-A-VITE TABLET              |
| 00904053961 | THERA TABLET                   |
| 00904110309 | POVIDONE-IODINE 10% SOLUTION   |
| 00904188260 | CALCIUM 250-VIT D3 125 TABLET  |
| 00904188361 | OYSTER SHELL CALCIUM 500 MG TB |
| 00904198760 | MAPAP 500 MG CAPSULE           |
| 00904205159 | DRIMINATE 50 MG TABLET         |
| 00904205661 | DIPHENHYDRAMINE 50 MG CAPSULE  |
| 00904250091 | FIBER TABLET                   |
| 00904252820 | LICE KILLING SHAMPOO           |
| 00904253321 | CALAMINE LOTION                |
| 00904264172 | CERTAVITE-ANTIOXIDANT TABLET   |
| 00904386575 | DEEP SEA 0.65% NOSE SPRAY      |
| 00904404360 | FISH OIL 1,000 MG CAPSULE      |
| 00904418160 | B-COMPLEX WITH B12 TABLET      |
| 00904423960 | MAGNESIUM OXIDE 500 MG TABLET  |
| 00904427451 | SLEEP TABS 25 MG TABLET        |
| 00904505359 | SUDOGEST 30 MG TABLET          |

| NDC         | Name                           |
|-------------|--------------------------------|
| 00904515460 | GUAIFENESIN 200 MG TABLET      |
| 00904530624 | BANOPHEN 25 MG CAPSULE         |
| 00904530661 | DIPHENHYDRAMINE 25 MG CAPSULE  |
| 00904530760 | BANOPHEN 50 MG CAPSULE         |
| 00904531346 | PRENATAL VITAMIN TABLET        |
| 00904535124 | SUDOGEST COLD AND ALLERGY TAB  |
| 00904535431 | BANOPHEN ANTI-ITCH 2% CREAM    |
| 00904539561 | FERREX 150 CAPSULE             |
| 00904539915 | RANITIDINE HCL 75 MG TAB       |
| 00904546052 | OYSTER SHELL 500-VIT D3 200 TB |
| 00904546335 | INFANT IBUPROFEN 50 MG/1.25 ML |
| 00904548652 | CERTAVITE SENIOR TABLET        |
| 00904549261 | THERA M PLUS TABLET            |
| 00904549280 | THERA-M TABLET                 |
| 00904552952 | HEARTBURN RELIEF 10 MG TABLET  |
| 00904553009 | ROBAFEN CF SYRUP               |
| 00904554120 | DIMAPHEN DM ELIXIR             |
| 00904554209 | DIMAPHEN ELIXIR                |
| 00904555124 | BANOPHEN 25 MG TABLET          |
| 00904555235 | PEDIA RELIEF INFANT DROPS      |
| 00904560413 | FISH OIL 500 MG SOFTGEL        |
| 00904561646 | COENZYME Q10 50 MG SOFTGEL     |
| 00904566656 | ORAL SALINE LAXAT SODA LIQ     |
| 00904572514 | MINTOX MAXIMUM STRENGTH SUSP   |
| 00904573012 | DAYTIME LIQUID CAPS            |
| 00904576052 | PRO-ESTRO D CAPSULE            |
| 00904576189 | RELAFORM CAPSULE               |
| 00904576297 | LEPTOFORM-SD CAPSULE           |
| 00904578017 | HEARTBURN RELIEF 20 MG TABLET  |
| 00904578624 | MAPAP COLD FORMULA CAPLET      |
| 00904579146 | CHILDREN'S MAPAP 80 MG TAB CHW |
| 00904582360 | VITAMIN D3 400 UNIT TABLET     |
| 00904583315 | LORATADINE-D 24HR TABLET       |
| 00904584709 | MAPAP 500 MG/15 ML LIQUID      |
| 00904598426 | AMMONIUM LACTATE 12% LOTION    |
| 00904625549 | SORE THROAT 15-3.6 MG LOZENGE  |
| 00904630521 | SORE THROAT 1.4% SPRAY         |
| 00904632078 | ENEMA READY TO USE             |
| 00904632946 | LUBRICATING PLUS 0.5% EYE DRPS |
| 00904640360 | FERATE 27 MG TABLET            |
| 00904640761 | BISACODYL EC 5 MG TABLET       |
| 00904646509 | ALL-NITE COLD-FLU RELIEF LIQ   |
| 00904648838 | LUBRIFRESH PM EYE OINTMENT     |
| 00904652261 | SENNA-LAX 8.6 MG TABLET        |
| 00904653720 | ROBAFEN CF LIQUID              |

| NDC         | Name                           |
|-------------|--------------------------------|
| 00904662735 | EAR DROPS 6.5%                 |
| 00904663444 | COUGH-COLD TABLET              |
| 00904664524 | CHILD'S MAPAP 160 MG TAB CHEW  |
| 00904671839 | MUCUS RELIEF ER 600 MG TABLET  |
| 00904672024 | ACETAMINOPHEN 500 MG CAPLET    |
| 00904672846 | SUDOGEST 60 MG TABLET          |
| 00904673151 | ACETAMINOPHEN PM CAPLET        |
| 00904675060 | DOK 100 MG TABLET              |
| 00904676130 | NASAL DECONGESTANT 0.05% SPRAY |
| 00904676320 | ROBAFEN 200 MG/10 ML SYRUP     |
| 00904676520 | CHILD CETIRIZINE HCL 1 MG/ML   |
| 00904676720 | CHILD LORATADINE 5 MG/5 ML SOL |
| 00904682960 | MEDI-PADS 50%                  |
| 00904683620 | LOPERAMIDE 1 MG/7.5 ML SOLN    |
| 00904685260 | LORATADINE 10 MG TABLET        |
| 00904690706 | PSEUDOEPHEDRINE 60 MG TABLET   |
| 00904692093 | DOCUSATE SODIUM MINI ENEMA     |
| 00904697712 | HEMORRHOIDAL SUPPOSITORY       |
| 00904698516 | DIPHENHYDRAMINE 12.5 MG/5 ML   |
| 00904699061 | PSEUDOEPHEDRINE 30 MG TABLET   |
| 00904699544 | DAYTIME COLD-FLU RELIEF SFTGL  |
| 00904699644 | NIGHTTIME COLD-FLU RLF SFTGL   |
| 00904699740 | DOCUSATE CAL 240 MG SOFTGEL    |
| 00904699860 | DOCUSATE SODIUM 100 MG SOFTGEL |
| 00904699960 | DOCUSATE SODIUM 250 MG SOFTGEL |
| 00904719240 | FEXOFENADINE HCL 60 MG TABLET  |
| 00904720660 | SIMETHICONE 80 MG TAB CHEW     |
| 00904722118 | EYE MULTIVITAMIN-LUTEIN SFTGEL |
| 00904722218 | EYE MULTIVITAMIN SOFTGEL       |
| 00904722320 | ROBAFEN DM 200-20 MG/20 ML LIQ |
| 00904723006 | SACCH-BOULARDII 250 MG CAPSULE |
| 00904731427 | ACETAMINOPHEN ER 650 MG CAPLET |
| 00904731813 | FISH OIL 500 MG SOFTGEL        |
| 00904732562 | ALUM-MAG HYDROXIDE-SIMETH CUP  |
| 00904732762 | MILK OF MAGNESIA SUSP 30ML CUP |
| 00904733301 | GLYCERIN ADULT SUPPOSITORY     |
| 00904744061 | SENNOSIDES-DOCUSATE SODIUM TAB |
| 00904759060 | FEROSUL 325 MG TABLET          |
| 00904772714 | ACID GONE ANTACID LIQUID       |
| 00904773445 | MICONAZOLE 7 CREAM             |
| 00904773518 | PROSIGHT TABLET                |
| 00904775127 | MINERIN CREME                  |
| 00904791459 | IBU-200 200 MG TABLET          |
| 00904880567 | TRIPLE ANTIBIOTIC OINTMENT PKT |
| 01490000010 | PEPTO-BISMOL TO-GO 262 MG CHEW |

| NDC         | Name                           |
|-------------|--------------------------------|
| 01490003977 | PEPTO-BISMOL TABLET CHEW       |
| 01490032040 | PEPTO-BISMOL TABLET CHEW       |
| 02340009000 | DUREX TROPICAL CONDOM          |
| 02340012900 | DUREX EXTRA SENSITIVE CONDOM   |
| 02340089455 | DUREX AVANTI REAL FEEL CONDOM  |
| 04142000007 | FLORASTOR 250 MG CAPSULE       |
| 04142000037 | FLORASTORKIDS 250 MG PACKET    |
| 04142000060 | FLORASTORBABY 250 MG PWD STICK |
| 04351066510 | EZ TWIST TUBING-AEROECLIPSE XL |
| 05388000251 | EQ RESTORE PM EYE OINTMENT     |
| 05388000924 | SV VITAMIN D3 1,000 UNIT SFTGL |
| 05388000927 | SV VITAMIN D3 5,000 UNIT SFTGL |
| 05388019332 | RELION GLUCOSE GEL 15 GRAM     |
| 05388062780 | SV Q-SORB CO Q-10 100 MG SFTGL |
| 05388062808 | SV MELATONIN 3 MG TABLET       |
| 05388062809 | SV MELATONIN 5 MG TABLET       |
| 05388062842 | SV VITAMIN D3 25MCG(1000 UNIT) |
| 05388066113 | EQ NASAL 0.65% SPRAY           |
| 05388066186 | EQ NASAL 0.05% SPRAY           |
| 05388081765 | SV VITAMIN E 450 MG SOFTGEL    |
| 05388098775 | EQ CHILD IBUPROFEN 100 MG/5 ML |
| 05388098778 | EQ CLEARLAX POWDER             |
| 05388099945 | SV VITAMIN D3 400 UNIT SOFTGEL |
| 05632083005 | TRUSTEX CONDOM                 |
| 05632083010 | TRUSTEX-RIA CONDOM             |
| 05632084010 | TRUSTEX LATEX CONDOM           |
| 05632086805 | FANTASY CONDOM                 |
| 05928011001 | NASADROPS SALINE ON THE GO AMP |
| 06000053743 | CERAVE MOISTURIZING CREAM      |
| 06000053758 | CERAVE SA CREAM                |
| 06000053784 | CERAVE BABY HEALING 46.5% OINT |
| 06121076304 | CELLTRION DIATRUST COV-19 HOME |
| 07249022224 | THIK AND CLEAR NECTAR POWD PKT |
| 07249022225 | THIK AND CLEAR HONEY POWD PKT  |
| 07415024805 | MB IBUPROFEN 200 MG TABLET     |
| 07415082468 | MB NON-ASPIRIN 500 MG TABLET   |
| 07610003220 | VITAMIN B-2 100 MG TABLET      |
| 07610005820 | VITAMIN D3 400 UNIT TABLET     |
| 07610009840 | VITAMIN D3 1,000 UNIT TABLET   |
| 07610010418 | PRENATAL TABLET                |
| 07610012012 | ALPHA LIPOIC ACID 100 MG CAP   |
| 07610015832 | CALCIUM CITRATE - VIT D CAPLET |
| 07610016840 | VITAMIN D3 2,000 UNIT TABLET   |
| 07610017120 | FISH OIL EC 1,000 MG SOFTGEL   |
| 07610017840 | VITAMIN D3 5,000 UNIT TABLET   |

| NDC         | Name                           |
|-------------|--------------------------------|
| 07610022640 | MELATONIN 3 MG TABLET          |
| 07610028320 | MAGNESIUM OXIDE 250 MG CAPLET  |
| 07610030020 | VITAMIN E 45 MG SOFTGEL        |
| 07610032024 | MAGNESIUM OXIDE 400 MG TABLET  |
| 07610051612 | VITAMIN B-12 2,500 MCG TAB SL  |
| 07610081007 | COENZYME Q-10 100 MG CAPSULE   |
| 07610091010 | COENZYME Q-10 200 MG SOFTGEL   |
| 07996009885 | DROPLET MICRON 34G 3.5MM       |
| 08011802055 | DAVOL IRRIG SYRINGE 50 ML      |
| 08011802065 | DAVOL IRRIG SYRINGE 60 ML      |
| 08080100000 | CURITY STERILE WATER,IRRIGATIO |
| 08080100555 | MONOJECT TUBERCULIN SYR 1 ML   |
| 08080102000 | CURITY STERILE SALINE 0.9% IRR |
| 08137001137 | AVEENO INTENSE RELIEF CREAM    |
| 08137003405 | PERSA-GEL 10%                  |
| 08337000158 | INTELISWAB COVID-19 HOME TEST  |
| 08373025531 | SIDESTREAM ADULT FACE MASK     |
| 08373041534 | MICRO ELITE REPLACEMENT FILTER |
| 08373074000 | ASTHMA CHECK PEAK FLOW MTR     |
| 08373075500 | PERSONAL BEST PEAK FLOW MTR    |
| 08373081111 | PEDIATRIC SMALL MASK           |
| 08373081211 | PEDIATRIC MEDIUM MASK          |
| 08373312800 | SAMI THE SEAL REPLACEMT FILTER |
| 08373438200 | SIDESTREAM PEDIATRIC FACE MASK |
| 08373616000 | SIDESTREAM DISPOSABLE MASK     |
| 08373689800 | MINI ELITE FILTER REPLACEMENT  |
| 08439060026 | ADULT DISPOSABLE MOUTHPIECE    |
| 08439060030 | EXPIRATORY MOUTHPIECE          |
| 08439123020 | PEDIATRIC MOUTHPIECE           |
| 08439600112 | POCKET PEAK FLOW METER         |
| 08439640111 | PEDIATRIC PANDA MASK           |
| 08439640112 | PANDA MASK SMALL               |
| 08439640113 | PANDA MASK MEDIUM              |
| 08439640115 | PANDA MASK LARGE               |
| 08462003110 | PILLOW MASK, PEDIATRIC         |
| 08462122064 | ONE WAY VALVED MOUTHPIECE      |
| 08462130045 | AIRZONE PEAK FLOW METER        |
| 09115090462 | OHC COVID-19 ANTIGEN HOME TEST |
| 10006070010 | NIACIN TR 500 MG TABLET        |
| 10006070011 | VITAMIN B-1 100 MG TABLET      |
| 10006070012 | VITAMIN B-6 50 MG TABLET       |
| 10006070013 | MAG DELAY DR 64 MG TABLET      |
| 10006070020 | NIACIN TR 250 MG CAPSULE       |
| 10006070038 | OYSTER SHELL 500MG-VIT D3 5MCG |
| 10006073002 | UREA 10% CREAM                 |

| NDC         | Name                           |
|-------------|--------------------------------|
| 10006073013 | SLOW RELEASE IRON 45 MG TABLET |
| 10006073118 | REGULOID POWDER (SUGAR-FREE)   |
| 10022063031 | FASTEP COVID-19 AG HOME TEST   |
| 10040082001 | CUE COVID-19 CARTRIDGE READER  |
| 10040082002 | CUE COVID-19 HOME TEST (EUA)   |
| 10048061009 | VITAMIN C 125 MG GUMMY         |
| 10048061153 | MELATONIN 2.5 MG GUMMY         |
| 10048061291 | MELATONIN 5 MG GUMMY           |
| 10119002013 | SOOTHE NIGHT TIME LUB EYE OINT |
| 10119002090 | OPCON-A EYE DROPS              |
| 10119060105 | CHILD'S ALAWAY 0.025% EYE DROP |
| 10135010304 | BENZOIN TINCTURE               |
| 10135011004 | MINERAL OIL, HEAVY             |
| 10135011901 | PYRIDOXINE 25 MG TABLET        |
| 10135012108 | DOCUSATE SOD 60 MG/15 ML SYRP  |
| 10135012305 | ACETAMINOPHEN 325 MG TABLET    |
| 10135013201 | THIAMINE 100 MG TABLET         |
| 10135013301 | CHLORPHENIRAMINE 4 MG TABLET   |
| 10135013801 | DOCUSATE CAL 240 MG SOFTGEL    |
| 10135013910 | PYRIDOXINE 50 MG TABLET        |
| 10135014401 | ACETAMINOPHEN 500 MG CAPLET    |
| 10135014702 | DIBUCAINE 1% OINTMENT          |
| 10135015201 | ACETAMINOPHEN 500 MG TABLET    |
| 10135015601 | DIPHENHYDRAMINE 50 MG CAPSULE  |
| 10135018001 | FOLIC ACID 0.4 MG TABLET       |
| 10135018101 | FOLIC ACID 0.8 MG TABLET       |
| 10135020301 | SIMETHICONE 80 MG TAB CHEW     |
| 10135024036 | CHILD ASPIRIN 81 MG TAB CHEW   |
| 10135025416 | CALCIUM CARB 500 MG TAB CHEW   |
| 10135059601 | OMEGA-3 FISH OIL 1,000 MG SFGL |
| 10135065201 | B-12 1,000 MCG TABLET          |
| 10135067296 | LIDOCAINE 4% CREAM             |
| 10135068230 | GUAIFENESIN 400 MG CAPLET      |
| 10135070550 | LACTOBACILLUS 1 MILLION CFU TB |
| 10135072101 | MAGNESIUM OXIDE 420 MG TABLET  |
| 10135074901 | VITAMIN D3 25 MCG TABLET       |
| 10135075001 | VITAMIN D3 50 MCG TABLET       |
| 10172070004 | SPEEDYSWAB COVID-19 AND FLU    |
| 10432006501 | VITAMIN B-2 50 MG TABLET       |
| 10432007101 | VITALETTS TABLET CHEWABLE      |
| 10432017002 | DELTA D3 400 UNIT TABLET       |
| 10432017501 | MAGNESIUM GLUC 500 MG TABLET   |
| 10432018202 | SUPER QUINTS B-50 TABLETS      |
| 10432023701 | VITAMIN D3 1,000 UNIT TABLET   |
| 10481300101 | GORMEL CREME                   |

| NDC         | Name                           |
|-------------|--------------------------------|
| 10481300116 | GORMEL CREAM                   |
| 10542000909 | DIALYVITE SUPREME D TABLET     |
| 10542001010 | DIALYVITE TABLET               |
| 10542001109 | DIALYVITE 5000 TABLET          |
| 10542001210 | DIALYVITE WITH ZINC TABLET     |
| 10542001409 | DIALYVITE 3,000 TABLET         |
| 10542001510 | DIALYVITE 800-ZINC 15 MG TAB   |
| 10542002509 | DIALYVITE 800-ULTRA D TABLET   |
| 10542003009 | DIALYVITE 800 PLUS D WAFER     |
| 10542004550 | CALCIUM ACETATE 668 MG TABLET  |
| 10542005010 | DIALYVITE 800-ZINC 50 MG TAB   |
| 10542007010 | DIALYVITE 800 TABLET           |
| 10542007510 | DIALYVITE 800 WITH IRON TAB    |
| 10542008012 | FERRIMIN 150 TAB               |
| 10542009090 | DIALYVITE VITAMIN D 5,000 UNIT |
| 10542009512 | BIOTIN 5 MG TABLET             |
| 10542010002 | DIALYVITE VIT D3 50,000 UNIT   |
| 10758002000 | SHAKE THAT ACHE 500 MG CAPLET  |
| 10758002001 | MOVE IT ALONG 100 MG TABLET    |
| 10758002002 | EAZZZE THE PAIN 25-500 MG CPLT |
| 10939000544 | SM CHEST CONGEST RLF DM CAPLET |
| 10939000644 | SM CHEST CONGESTION 400MG CPLT |
| 10939004533 | SM CLOTRIMAZOLE 1% VAG CREAM   |
| 10939009144 | SM NICOTINE 4 MG CHEWING GUM   |
| 10939013844 | SM ACID REDUCER 20 MG TABLET   |
| 10939014344 | SM LORATADINE 10 MG TABLET     |
| 10939014844 | SM MUCUS RELIEF COUGH LIQUID   |
| 10939019344 | SM NICOTINE 2 MG LOZENGE       |
| 10939019444 | SM NICOTINE 4 MG LOZENGE       |
| 10939020733 | SM PEDIATRIC ELECTROLYTE SOLN  |
| 10939024933 | SM PAIN RELIEVER 500 MG CAPLET |
| 10939025144 | SM CLEARLAX POWDER             |
| 10939027533 | SM CHILD ASPIRIN 81 MG CHW TAB |
| 10939029833 | SM IBUPROFEN 200 MG TABLET     |
| 10939030833 | SM IBUPROFEN 100 MG/5 ML SUSP  |
| 10939032933 | SM TUSSIN DM LIQUID            |
| 10939033033 | SM TUSSIN DM SYRUP             |
| 10939035433 | SM IBUPROFEN IB 200 MG TABLET  |
| 10939035444 | SM CHILD ALL DAY ALLER 1 MG/ML |
| 10939035633 | SM IBUPROFEN 200 MG CAPLET     |
| 10939036033 | SM IBUPROFEN 200 MG TABLET     |
| 10939037933 | SM MICONAZOLE 7 CREAM          |
| 10939038033 | SM MICONAZOLE 2% VAGINAL CREAM |
| 10939038333 | SM MICONAZOLE 3 COMBO PACK     |
| 10939038944 | SM LUBRICANT EYE DROPS         |

| NDC         | Name                           |
|-------------|--------------------------------|
| 10939039644 | SM STOMACH RLF 262 MG CHEW TAB |
| 10939039933 | SM ANTI-NAUSEA LIQUID          |
| 10939040233 | SM SALINE 0.65% NASAL SPRAY    |
| 10939040333 | SM SALINE 0.65% NASAL SPRAY    |
| 10939040944 | SM MILK OF MAGNESIA SUSPENSION |
| 10939041033 | SM NASAL SPRAY SINUS           |
| 10939041233 | SM NASAL SPRAY 0.05%           |
| 10939041433 | SM NASAL SPRAY 0.05%           |
| 10939043444 | SM PAIN RELIEVER 325 MG TABLET |
| 10939044144 | SM ASPIRIN EC 81 MG TABLET     |
| 10939044444 | SM ASPIRIN EC 81 MG TABLET     |
| 10939045944 | SM SORE THROAT 1.4% SPRAY      |
| 10939047144 | SM PAIN RELIEVER 500 MG TABLET |
| 10939048433 | SM TIOCONAZOLE-1 6.5% OINTMENT |
| 10939049044 | SM LANSOPRAZOLE DR 15 MG CAP   |
| 10939052444 | SM VITAMIN D3 2,000 UNIT SFTGL |
| 10939053244 | SM CAL CIT 315 MG-D3 250 UNIT  |
| 10939054944 | SM IRON 65 MG TABLET           |
| 10939056433 | SM ANTIBIOTIC 500 UNIT/GM OINT |
| 10939056833 | SM DOUBLE ANTIBIOTIC OINT      |
| 10939057144 | SM ADV ANTACID-ANTIGAS SUSP    |
| 10939057733 | SM TRIPLE ANTIBIOTIC PLUS OINT |
| 10939057833 | SM 3-DAY VAGINAL CREAM         |
| 10939057844 | SM ANTACID MAX STRENGTH SUSP   |
| 10939060244 | SM INF GAS RELIEF 20 MG/0.3 ML |
| 10939060444 | SM GAS RELIEF 125 MG CHEW TAB  |
| 10939063444 | SM NAPROXEN SOD 220 MG CAPLET  |
| 10939063744 | SM LUBRICAT PLUS 0.5% EYE DRPS |
| 10939065744 | SM INFANT PAIN-FEVER 160 MG/5  |
| 10939067644 | SM CAL ANTACID 750 MG CHEW TAB |
| 10939067944 | SM URINARY PAIN RLF 95 MG TAB  |
| 10939068244 | SM CHLD PAIN-FEVER 160 MG/5 ML |
| 10939068744 | SM ANTISEPTIC SKIN CLEANSER 4% |
| 10939068844 | SM PAIN RELIEVER 500 MG GELCAP |
| 10939068933 | SM NICOTINE 2 MG CHEWING GUM   |
| 10939070633 | SM NICOTINE 21 MG/24HR PATCH   |
| 10939070733 | SM NICOTINE 14 MG/24HR PATCH   |
| 10939070833 | SM NICOTINE 7 MG/24HR PATCH    |
| 10939071644 | SM ACID REDUCER 10 MG TABLET   |
| 10939071744 | SM ACID REDUCER 10 MG TABLET   |
| 10939072444 | SM NASAL 0.05% SPRAY           |
| 10939072644 | SM TUSSIN MUCUS-CONG 200 MG/10 |
| 10939073844 | SM LUBRICATING TEARS EYE DROPS |
| 10939073944 | SM LICE TREATMENT 1% CRM RINSE |
| 10939074444 | SM MINERAL OIL                 |

| NDC         | Name                           |
|-------------|--------------------------------|
| 10939076444 | SM ALLERGY RELIEF 50 MCG SPRAY |
| 10939076644 | SM READY TO USE MIN OIL ENEMA  |
| 10939076744 | SM ENEMA READY TO USE          |
| 10939076844 | SM ENEMA READY TO USE TWIN PAK |
| 10939077444 | SM GENTLE LAXATIVE EC 5 MG TAB |
| 10939079044 | SM PROBIOTIC 250 MG CAPSULE    |
| 10939079233 | SM LORATADINE 5 MG/5 ML SYRUP  |
| 10939079344 | SM GAS RELIEF(SIMETH) 80MG CHW |
| 10939079544 | SM FIBER 625 MG CAPLET         |
| 10939079744 | SM HEMORRHOIDAL OINTMENT       |
| 10939081444 | SM FIBER POWDER                |
| 10939081644 | SM FIBER CAPSULE               |
| 10939081944 | SM NASAL DECONGEST ER 120 MG   |
| 10939082244 | SM ALLERGY 4 MG TABLET         |
| 10939082344 | SM NASAL DECONGEST 30 MG TAB   |
| 10939083744 | SM TRIPLE ANTIBIOTIC OINTMENT  |
| 10939084044 | SM ESOMEPRAZOLE MAG DR 20 MG   |
| 10939084444 | SM PAIN RELIEVER ER 650 MG     |
| 10939085344 | SM MOTION SICKNESS 25 MG TAB   |
| 10939085844 | SM GLYCERIN 99.5% LIQUID       |
| 10939086044 | SM CHILD ALLERGY 5 MG/5 ML SOL |
| 10939086144 | SM NICOTINE 7 MG/24HR PATCH    |
| 10939086244 | SM NICOTINE 14 MG/24HR PATCH   |
| 10939086344 | SM NICOTINE 21 MG/24HR PATCH   |
| 10939086544 | SM STOOL SOFTENER 100 MG SFTGL |
| 10939087744 | SM SENNA-S TABLET              |
| 10939088144 | SM IBUPROFEN 200 MG SOFTGEL    |
| 10939088244 | SM FISH OIL 1,000 MG SOFTGEL   |
| 10939088444 | SM TUSSIN DM 400-20 MG/20 ML   |
| 10939088544 | SM BIOTIN 5,000 MCG CAPSULE    |
| 10939088644 | SM CALCIUM 600-D3-MINERALS TAB |
| 10939088744 | SM CO Q-10 100 MG SOFTGEL      |
| 10939088844 | SM CO Q-10 200 MG SOFTGEL      |
| 10939089044 | SM FISH OIL 1,200 MG SOFTGEL   |
| 10939089344 | SM FOLIC ACID 400 MCG TABLET   |
| 10939089444 | SM MAGNESIUM 250 MG TABLET     |
| 10939089544 | SM MELATONIN 3 MG TABLET       |
| 10939089844 | SM B COMPLEX WITH VIT C TABLET |
| 10939089944 | SM VITAMIN B-6 100 MG TABLET   |
| 10939090044 | SM VITAMIN C 1,000 MG TABLET   |
| 10939090144 | SM VITAMIN C 500 MG CHEW TAB   |
| 10939090633 | SM NICOTINE 4 MG CHEWING GUM   |
| 10939090644 | SM MUCUS RELIEF ER 600 MG TAB  |
| 10939090744 | SM MUCUS-ER MAX 1,200 MG TAB   |
| 10939090844 | SM MAGNESIUM CITRATE SOLUTION  |

| NDC         | Name                           |
|-------------|--------------------------------|
| 10939091233 | SM NASAL DECONG PE 10 MG TAB   |
| 10939091244 | SM MUCUS RELIEF ER 600 MG TAB  |
| 10939091444 | SM SENNA LAXATIVE 8.6 MG TAB   |
| 10939091744 | SM ANTI-DIARRHEAL 2 MG SOFTGEL |
| 10939095358 | SM CALCIUM 600MG-D3 20MCG TAB  |
| 10939095360 | SM CALCIUM CIT 315-D3 6.5 MCG  |
| 10939095361 | SM CENTURY MEN 50 PLUS TABLET  |
| 10939095362 | SM CENTURY WOMEN 50 PLUS TAB   |
| 10939095368 | SM SLOW RELEASE IRON 45 MG TAB |
| 10939095370 | SM MELATONIN 5 MG TABLET       |
| 10939095371 | SM MEN'S ONE DAILY TABLET      |
| 10939095374 | SM ACIDOPHILUS 175 MG CAPSULE  |
| 10939095375 | SM VITAMIN D3 125 MCG TABLET   |
| 10939095376 | SM VITAMIN D3 50 MCG SOFTGEL   |
| 10939095377 | SM FISH OIL 1,000 MG SOFTGEL   |
| 10939095594 | FT PROBIOTIC 250 MG CAPSULE    |
| 10939095614 | FT FIBER SUPPLEMENT CAPSULE    |
| 10939095617 | FT FIBER POWDER                |
| 10939095674 | FT CALCIUM 600MG-D3 20MCG TAB  |
| 10939095676 | FT CALCIUM CIT 200-D3 6.25 TAB |
| 10939095677 | FT CALCIUM CIT 315-D3 6.25 TAB |
| 10939095681 | FT CALCIUM 600-D3-MINERALS TAB |
| 10939095682 | FT CALCIUM 600 MG TABLET       |
| 10939095683 | FT IRON 65 MG TABLET           |
| 10939095684 | FT IRON 45 MG TABLET           |
| 10939095685 | FT MAGNESIUM 250 MG TABLET     |
| 10939095686 | FT MAGNESIUM OXIDE 400 TABLET  |
| 10939095692 | FT CENTURY MEN 50 PLUS TABLET  |
| 10939095693 | FT CENTURY WOMEN 50 PLUS TAB   |
| 10939095694 | FT CENTURY 50 PLUS TABLET      |
| 10939095696 | FT CENTURY MEN TABLET          |
| 10939095697 | FT CENTURY ADULTS TABLET       |
| 10939095699 | FT CENTURY WOMEN TABLET        |
| 10939095702 | FT EYE HEALTH WITH LUTEIN TAB  |
| 10939095705 | FT ONE DAILY WOMEN'S 50 PLUS   |
| 10939095707 | FT ONE DAILY MEN'S 50 PLUS TAB |
| 10939095709 | FT B COMPLEX PLUS VIT C TABLET |
| 10939095710 | FT VITAMIN B-12 500 MCG TABLET |
| 10939095712 | FT VIT B-12 2,500 MCG TAB SL   |
| 10939095714 | FT VITAMIN B-6 100 MG TABLET   |
| 10939095715 | FT VITAMIN D3 25 MCG TABLET    |
| 10939095716 | FT VITAMIN D3 125 MCG SOFTGEL  |
| 10939095717 | FT VITAMIN B-1 100 MG TABLET   |
| 10939095719 | FT VIT C-ROSE HIP 1,000 MG TAB |
| 10939095720 | FT VIT C-ROSE HIPS 500 MG TAB  |

| NDC         | Name                           |
|-------------|--------------------------------|
| 10939095723 | FT VITAMIN D3 250 MCG TABLET   |
| 10939095724 | FT VITAMIN D3 50 MCG SOFTGEL   |
| 10939095725 | FT VITAMIN D3 50 MCG TABLET    |
| 10939095726 | FT VITAMIN D3 25 MCG SOFTGEL   |
| 10939095727 | FT VITAMIN D3 125 MCG TABLET   |
| 10939095728 | FT VITAMIN E 180 MG SOFTGEL    |
| 10939095729 | FT VITAMIN C 1,000 MG TABLET   |
| 10939095734 | FT BIOTIN 5,000 MCG CAPSULE    |
| 10939095735 | FT CO Q-10 200 MG SOFTGEL      |
| 10939095736 | FT CO Q-10 100 MG SOFTGEL      |
| 10939095738 | FT FISH OIL 1,000 MG SOFTGEL   |
| 10939095739 | FT FISH OIL 1,200 MG SOFTGEL   |
| 10939095744 | FT FOLIC ACID 400 MCG TABLET   |
| 10939095745 | FT FOLIC ACID 800 MCG TABLET   |
| 10939095748 | FT MELATONIN 3 MG TABLET       |
| 10939095749 | FT MELATONIN 5 MG GUMMY        |
| 10939095750 | FT MELATONIN ER 10 MG TABLET   |
| 10939095752 | FT MELATONIN 2.5 MG GUMMY      |
| 10939095753 | FT MELATONIN 5 MG TABLET       |
| 10939095756 | FT ACIDOPHILUS PROBIO 175MG CP |
| 10939095761 | FT VITAMIN D3 250 MCG SOFTGEL  |
| 10939097333 | SM CASTOR OIL                  |
| 10956061801 | REESE'S PINWORM 144 MG/ML SUSP |
| 10956076150 | REFENESEN DM CAPLET            |
| 10956078850 | REFENESEN 400 MG TABLET        |
| 11017025220 | DUOFILM LIQUID                 |
| 11084012803 | BACTOSHIELD CHG 4% SKIN CLNSR  |
| 11110035353 | KRO PRENATAL VITAMINS TABLET   |
| 11169061569 | EVAC-U-GEN 8.6 MG TABLET       |
| 11344021830 | GS CLEAR ANTI-ITCH LOTION      |
| 11383001811 | STOOL SOFTENER 100 MG CAPSULE  |
| 11383016406 | THROAT 1.4% SPRAY              |
| 11383016560 | PAIN & SLEEP 25-500 MG CAPLET  |
| 11383016808 | EXPECTORANT 100 MG/5 ML SYRUP  |
| 11383017001 | LONG ACTING 0.05% NASAL SPRAY  |
| 11383017808 | EXPECTORANT DM COUGH SYRUP     |
| 11383017908 | DIPHENHYDRAMINE 12.5 MG/5 ML   |
| 11383019031 | ULTRA SALINE 0.65% NASAL SPRAY |
| 11383022111 | NAPROXEN SODIUM 220 MG TABLET  |
| 11383023411 | LAX STOOL SOFTENER-SENNAB      |
| 11383023550 | G-FENESIN 400 MG CAPLET        |
| 11383023850 | G-FENESIN DM 20-400 MG CAPLET  |
| 11383024527 | CETIRIZINE HCL 10 MG TABLET    |
| 11383024723 | L-A NASAL DECONGEST 120 MG TAB |
| 11383025236 | CHILD ASPIRIN 81 MG CHEW TAB   |

| NDC         | Name                           |
|-------------|--------------------------------|
| 11383025408 | EXPECTORANT DM COUGH SYRUP     |
| 11511000040 | VITAMIN D3 1,000 UNIT SOFTGEL  |
| 11527005140 | ANTIFUNGAL 1% CREAM            |
| 11527005841 | DIAPER RASH 40% OINTMENT       |
| 11527006904 | ANTI-ITCH 2%-0.1% CREAM        |
| 11527007140 | ATHLETE'S FOOT 1% CREAM        |
| 11527014351 | EAR WAX REMOVAL 6.5% DROP      |
| 11673001240 | NIGHTTIME SEVERE COLD-FLU LIQ  |
| 11673002564 | ANTIBIOTIC-PAIN RELIEF OINT    |
| 11673006102 | FAMOTIDINE 20 MG TABLET        |
| 11673010301 | ALLERGY RELIEF 50 MCG SPRAY    |
| 11673010526 | ACETAMINOPHEN 160 MG/5 ML SUSP |
| 11673011001 | LUBRICANT 0.4-0.3% EYE DROP    |
| 11673011428 | 12-HR COUGH RELIEF 30 MG/5 ML  |
| 11673030602 | POWDERLAX POWDER               |
| 11673030603 | POWDERLAX POWDER               |
| 11673036871 | NAPROXEN SODIUM 220 MG CAPLET  |
| 11673040564 | ANTIBIOTIC OINTMENT            |
| 11673043421 | LIQUID WART REMOVER 17% LIQUID |
| 11673051912 | ACETAMINOPHEN 500 MG GELCAP    |
| 11673057122 | ALLERGY RELIEF 180 MG TABLET   |
| 11673062090 | FIBER THERAPY 625 MG CAPLET    |
| 11673062167 | ANTACID ULTRA STR TAB CHEWABLE |
| 11673063740 | ANTACID ANTI-GAS LIQUID        |
| 11673066890 | FIBER THERAPY POWDER           |
| 11673070526 | CHILD ALLERGY RELIEF 1 MG/ML   |
| 11673082529 | MICONAZOLE 7 CREAM             |
| 11673088210 | INFANTS' GAS RLF 20 MG/0.3 ML  |
| 11673088426 | CHILD ALL DAY ALLERGY 1 MG/ML  |
| 11673090224 | ANTACID EX-STR 750 MG TAB CHEW |
| 11694071901 | ASCO-TABS-1,000 MG TABLET      |
| 11822000178 | RA COL-RITE 100 MG SOFTGEL     |
| 11822000983 | RA CHILD ALLERGY 5 MG/5 ML SOL |
| 11822001100 | RA EXPECTORANT COUGH SYRUP     |
| 11822001290 | RA HEMORRHOIDAL H SUPP         |
| 11822001740 | RA NASAL DECONG PE 10 MG TAB   |
| 11822001780 | RA COL-RITE 100 MG CAPSULE     |
| 11822001820 | RA IBUPROFEN 200 MG TABLET     |
| 11822002601 | RA VITAMIN D3 1,000 UNIT TAB   |
| 11822003355 | RA PRENATAL FORMULA TABLET     |
| 11822003360 | RA VITAMIN B-12 100 MCG TABLET |
| 11822003849 | RA IBUPROFEN 200 MG CAPLET     |
| 11822004174 | RA SINUS PRES-CNG RLF PE 10 MG |
| 11822004370 | RA BALANCED B-100 TABLET       |
| 11822006546 | RA MUCUS RELIEF 400 MG TABLET  |

| NDC         | Name                           |
|-------------|--------------------------------|
| 11822008355 | RA LAXATIVE PEG 3350 POWDER    |
| 11822010035 | RA IBUPROFEN 200 MG LIQUID GEL |
| 11822010233 | RA ACETAMINOPHEN 500 MG CAPLET |
| 11822011391 | RA WART REMOVER 17% LIQUID     |
| 11822011585 | RA EYE ITCH RELIEF 0.025% DROP |
| 11822011737 | RA TUSSIN DM LIQUID            |
| 11822015796 | RA VITAMIN B-1 100 MG TABLET   |
| 11822023770 | RA VITAMIN A AND D OINTMENT    |
| 11822029233 | RA LAXATIVE EC 5 MG TABLET     |
| 11822030059 | RA VITAMIN C 500 MG TAB CHEW   |
| 11822030300 | RA ACETAMINOPHEN 500 MG TABLET |
| 11822031378 | RA BACITRACIN ZN 500 UNIT/GM   |
| 11822031691 | RA ASPIRIN EC 81 MG TABLET     |
| 11822032010 | RA NASAL SPRAY 0.05%           |
| 11822032343 | RA CHILD COMPLETE CHEWABLE VIT |
| 11822033111 | RA TUSSIN CHEST CONGESTION SYR |
| 11822033711 | RA EAR WAX REMOVAL 6.5% KIT    |
| 11822034952 | RA SINUS CONGESTION 12HR 120MG |
| 11822035340 | RA INFANT FEVER-PAIN 160 MG/5  |
| 11822035790 | RA HIGH POTENCY IRON 27 MG TAB |
| 11822036187 | RA NICOTINE 21 MG/24HR PATCH   |
| 11822036803 | RA ASPIRIN 81 MG CHEWABLE TAB  |
| 11822037270 | RA P-COL RITE TABLET           |
| 11822039240 | RA ANTI-ITCH GEL               |
| 11822039940 | RA MILK OF MAGNESIA SUSPENSION |
| 11822039970 | RA BISACODYL EC 5 MG TABLET    |
| 11822039980 | RA SALINE ENEMA                |
| 11822040192 | RA 8 HOUR PAIN RELIEF 650 MG   |
| 11822040230 | RA SUPHEDRINE 30 MG TABLET     |
| 11822041923 | RA ACETAMINOPHEN ER 650 MG TAB |
| 11822042030 | RA SALINE 0.65% NASAL SPRAY    |
| 11822042092 | RA NICOTINE 2 MG CHEWING GUM   |
| 11822042093 | RA NICOTINE 4 MG CHEWING GUM   |
| 11822044958 | RA COENZYME Q-10 100 MG SOFTGL |
| 11822046713 | RA ACETAMINOPHEN 325 MG TABLET |
| 11822048943 | RA SLEEP AID 25 MG TABLET      |
| 11822051133 | RA PAIN RELIEVER TABLET        |
| 11822052214 | RA ALLERGY RELIEF 10 MG TABLET |
| 11822053605 | RA CHILD ALLERGY RELF 1 MG/ML  |
| 11822054292 | RA ONE DAILY MEN'S 50 PLUS D3  |
| 11822054311 | RA MELATONIN 10 MG TABLET      |
| 11822057913 | RA ALLERGY RELIEF 4 MG TABLET  |
| 11822059042 | RA MUCUS RELIEF D ER 600-60 MG |
| 11822059187 | RA PROBIOTIC COMPLEX CAPSULE   |
| 11822061283 | RA ARTHRITIS PAIN ER 650 MG    |

| NDC         | Name                           |
|-------------|--------------------------------|
| 11822062914 | RA ALLERGY RELIEF 180 MG TAB   |
| 11822064230 | RA HYDROCORTISONE 1% CREAM     |
| 11822064240 | RA TRIPLE ANTIBIOTIC OINTMENT  |
| 11822065200 | RA COL-RITE 250 MG SOFTGEL     |
| 11822068618 | RA CHILD ACETAMINOPHEN 160 MG  |
| 11822068621 | RA ESOMEPRAZOLE MAG DR 20 MG   |
| 11822069301 | RA SLOW RELEASE IRON 45 MG TAB |
| 11822072940 | RA CHILD IBUPROFEN 100 MG/5 ML |
| 11822073997 | RA MUCUS RELIEF D ER 1,200-120 |
| 11822077013 | DAYLOGIC ACNE TREATMNT 10% GEL |
| 11822077336 | RA LIDOCAINE ANORECTAL 5% CRM  |
| 11822083090 | RA COENZYME Q10 200 MG SOFTGEL |
| 11822083553 | RA TUSSIN DM MAX LIQUID        |
| 11822084422 | RA CENTRAL-VITE TABLET         |
| 11822088440 | RA B-COMPLEX-VITAMIN B-12 TAB  |
| 11822088556 | RA URINARY PAIN RLF 95 MG TAB  |
| 11822098955 | RA CHILD FEVER-PAIN 160 MG/5ML |
| 11822110100 | RA VITAMIN E 268 MG SOFTGEL    |
| 11822110990 | RA IRON 65 MG TABLET           |
| 11822145760 | RA 12HR NASAL SPRAY 0.05%      |
| 11822165230 | RA SENNA 8.6 MG TABLET         |
| 11822222600 | RA NICOTINE 14 MG/24HR PATCH   |
| 11822228090 | RA MELATONIN 3 MG TABLET       |
| 11822228100 | RA FOLIC ACID 800 MCG TABLET   |
| 11822239990 | RA IBUPROFEN 100 MG/5 ML SUSP  |
| 11822300240 | RA ASPIRIN EC 325 MG TABLET    |
| 11822300760 | RA PEDIATRIC ELECTROLYTE SOLN  |
| 11822300930 | RA SENNA PLUS TABLET           |
| 11822302510 | RA IBUPROFEN JR STR 100 MG CHW |
| 11822304000 | RA TUSSIN DM SYRUP             |
| 11822308910 | RA PRENATAL TABLET             |
| 11822309680 | RA NON-ASPIRIN 160 MG/5 ML     |
| 11822309880 | RA ANTI-NAUSEA LIQUID          |
| 11822310690 | RA ACETAMINOPHEN PM CAPLET     |
| 11822310980 | RA SORE THROAT SPRAY           |
| 11822312760 | RA LORATADINE 10 MG TABLET     |
| 11822313870 | RA ZINC OXIDE OINTMENT         |
| 11822317060 | RA NON-ASPIRIN 500 MG CAPLET   |
| 11822317370 | RA TUSSIN COUGH LIQUID         |
| 11822317450 | RA NASAL SPRAY                 |
| 11822317510 | RA ASPIRIN 325 MG TABLET       |
| 11822317640 | RA ATHENOL 325 MG TABLET       |
| 11822319750 | RA CHLORPHENIRAMINE 4 MG TAB   |
| 11822320300 | RA SALINE 0.65% NOSE SPRAY     |
| 11822321570 | RA INS SYR 0.5 ML 29GX1/2"     |

| NDC         | Name                           |
|-------------|--------------------------------|
| 11822321580 | RA INS SYR 1 ML 29GX1/2"       |
| 11822322860 | RA ONE DAILY MAXIMUM TABLET    |
| 11822323900 | RA NICOTINE 4 MG LOZENGE       |
| 11822323910 | RA NICOTINE 2 MG LOZENGE       |
| 11822323970 | RA PEDIATRIC FREEZER POPS      |
| 11822325350 | RA ANTI-TUSSIVE DM SYRUP       |
| 11822328110 | RA CLOTRIMAZOLE 1% VAG CREAM   |
| 11822330670 | RA MINERAL OIL EXTRA-HEAVY     |
| 11822330810 | RA WOMEN'S LAXATIVE TABLET     |
| 11822331100 | RA SENNA-LAX 8.6 MG TABLET     |
| 11822332150 | RA GLYCERIN ADULT SUPPOSITORY  |
| 11822332180 | RA GLYCERIN PEDIATRIC SUPP     |
| 11822332470 | RA ANTACID-ANTIGAS LIQUID      |
| 11822333000 | RA CITRATE OF MAGNESIA SOLN    |
| 11822333060 | RA ACID REDUCER 10 MG TABLET   |
| 11822333120 | RA NICOTINE 7 MG/24HR PATCH    |
| 11822334220 | RA VITAMIN D3 1,000 UNIT TAB   |
| 11822334910 | RA EAR DROPS 6.5%              |
| 11822335540 | RA CALCIUM CITRATE-VIT D3 TAB  |
| 11822338820 | RA PINK BISMUTH 262 MG TAB CHW |
| 11822349520 | RA SUPHEDRINE 12HR 120 MG CPLT |
| 11822353410 | RA INFANT FEVER-PAIN 160 MG/5  |
| 11822358090 | RA NAPROXEN SOD 220 MG TABLET  |
| 11822358240 | RA MICONAZOLE 3 COMBO PACK     |
| 11822358770 | RA DOUBLE ANTIBIOTIC OINT      |
| 11822360510 | RA TIOCONAZOLE-1 6.5% OINT     |
| 11822361570 | RA MIGRAINE 250-250-65 MG CPLT |
| 11822362140 | RA MEN'S ONE DAILY TABLET      |
| 11822363290 | MELATONIN 1 MG TABLET SL       |
| 11822365230 | RA FISH OIL 500 MG SOFTGEL     |
| 11822370201 | RA 2-IN-1 LAXATIVE 8.6-50MG TB |
| 11822370590 | RA ISOPROPYL ALCOHOL 70% WIPES |
| 11822371310 | RA ONE DAILY ENERGY TABLET     |
| 11822372390 | RA ANTI-ITCH 1% CREAM          |
| 11822372400 | RA ANTIBIOTIC-PAIN RELIEF OINT |
| 11822372760 | RA ANTACID-GAS RELIEF LIQUID   |
| 11822372780 | RA MOTION SICKNESS 25 MG CHWTB |
| 11822372830 | RA PROBIOTIC COLON CARE CAP    |
| 11822379960 | RA ENEMA TWIN PACK             |
| 11822382270 | RA MICONAZOLE 7 CREAM          |
| 11822386560 | RA EYE ALLERGY RELIEF DROPS    |
| 11822422240 | RA NICOTINE 2 MG MINI LOZENGE  |
| 11822439600 | RA B-COMPLEX TABLET            |
| 11822460760 | RA FISH OIL 120-180 SOFTGEL    |
| 11822489200 | RA ANTI-DIARRHEAL 2 MG SOFTGEL |

| NDC         | Name                           |
|-------------|--------------------------------|
| 11822489220 | COL-RITE 250 MG SOFTGEL        |
| 11822489780 | RA CENTRAL-VITE WOMEN'S TABLET |
| 11822489910 | RA HI-CAL PLUS VITAMIN D TAB   |
| 11822489950 | RA BIOTIN 2,500 MCG CAPSULE    |
| 11822489990 | RA VITAMIN D3 2,000 UNIT SFTGL |
| 11822490000 | RA VITAMIN D3 5,000 UNIT SFTGL |
| 11822505370 | RA CETIRIZINE HCL 10 MG TABLET |
| 11822505400 | RA CETIRI-D ER TABLET          |
| 11822505540 | RA GAS RELIEF 125 MG TAB CHEW  |
| 11822505990 | RA ACETAMINOPHEN 500 MG GELCAP |
| 11822510630 | RA IBUPROFEN 200 MG SOFTGEL    |
| 11822511070 | RA ONE DAILY ESSENTIAL TABLET  |
| 11822511120 | RA MELATONIN 5 MG TABLET       |
| 11822511140 | RA VITAMIN C 1,000 MG TAB SA   |
| 11822511160 | RA NIACIN 500 MG TABLET        |
| 11822511210 | RA VITAMIN D3 2,000 UNIT SFGL  |
| 11822511260 | RA FISH OIL 1,000 MG SOFTGEL   |
| 11822512670 | RA STOOL SOFTENER 100 MG CAP   |
| 11822515660 | RA ALCOHOL SWABS               |
| 11822517540 | RA VITAMIN B-6 100 MG TABLET   |
| 11822517550 | RA VITAMIN C 500 MG CHEW TAB   |
| 11822522250 | RA NICOTINE 4 MG MINI LOZENGE  |
| 11822527930 | RA ACID REDUCER 20 MG TABLET   |
| 11822540600 | RA CALCIUM CITRATE - VIT D TAB |
| 11822545870 | RA LUBRICANT EYE DROPS         |
| 11822571760 | RA FEVER REDUCER-PAIN 160 MG/5 |
| 11822573280 | RA NICOTINE 2 MG LOZENGE       |
| 11822573290 | RA NICOTINE 4 MG LOZENGE       |
| 11822574070 | RA LANSOPRAZOLE DR 15 MG CAP   |
| 11822619070 | RA COUGH DM ER 30 MG/5 ML SUSP |
| 11822770050 | RA CALCIUM 600-VIT D3 400 TAB  |
| 11822775350 | RA TUSSIN DM COUGH-CHEST SYRUP |
| 11822880100 | RA VITAMIN B-6 50 MG TABLET    |
| 11822880140 | RA BALANCED B-50 TABLET        |
| 11822880230 | RA VITAMIN C 1,000 MG TABLET   |
| 11822880250 | RA VITAMIN C 250 MG TABLET     |
| 11822880280 | RA VITAMIN C 500 MG TABLET     |
| 11822880320 | RA VITAMIN C 500 MG TABLET     |
| 11822880330 | RA VIT C-ROSE HIPS 500 MG TAB  |
| 11822880400 | RA CALCIUM 600 MG TABLET       |
| 11822880440 | RA OYSTER SHELL 500-VIT D3 200 |
| 11822880780 | RA FOLIC ACID 0.4 MG TABLET    |
| 11822881060 | RA NIACIN 100 MG TABLET        |
| 11822985580 | RA LICE TREATMENT 1% CRM RINSE |
| 11845000001 | DAILY MULTI VITAMIN-IRON TAB   |

| NDC         | Name                           |
|-------------|--------------------------------|
| 11845005061 | VITAMIN E 90 MG SOFTGEL        |
| 11845005351 | B COMPLEX WITH VITAMIN C CAP   |
| 11845005621 | SUPER MULTIPLE-LOW IRON TABLET |
| 11845005701 | VITAMIN B-6 50 MG TABLET       |
| 11845005741 | VITAMIN B-12 100 MCG TABLET    |
| 11845006011 | VITAMIN B COMPLEX SOFTGEL      |
| 11845007141 | VITAMIN B-2 100 MG TABLET      |
| 11845007551 | CALCIUM 500-VIT D3 400 TABLET  |
| 11845007791 | VITAMIN K 100 MCG TABLET       |
| 11845008531 | CALCIUM 600 MG TABLET          |
| 11845008891 | SUPER CALCIUM 600-VIT D3 400   |
| 11845009151 | CALCIUM 500 MG TABLET          |
| 11845009661 | VITAMIN B-12 1,000 MCG TAB SL  |
| 11845009662 | VITAMIN B-12 1,000 MCG TAB SL  |
| 11845011735 | C-1,000 MG WITH ROSE HIPS TAB  |
| 11845011765 | E-400 C-500 & BETA CARO TAB    |
| 11845011831 | VITAMIN D3 400 UNIT SOFTGEL    |
| 11845012049 | WOMEN'S DAILY FORMULA CAPLET   |
| 11845012065 | BODY, HAIR, SKIN AND NAILS CAP |
| 11845012230 | FISH OIL 1,000 MG SOFTGEL      |
| 11845013195 | CO Q-10 100 MG SOFTGEL         |
| 11845013198 | CO Q-10 100 MG SOFTGEL         |
| 11845013751 | FERROUS GLUCONATE 240 MG TAB   |
| 11845014075 | VISION PLUS LUTEIN VITAMIN TAB |
| 11845014135 | VITRUM SENIOR TABLET           |
| 11845014479 | FISH OIL DR 500 MG SOFTGEL     |
| 11845014638 | SUPER OMEGA-3 SOFTGEL          |
| 11845014781 | MEN'S DAILY FORMULA CAPSULE    |
| 11845014922 | FISH OIL 1,200 MG SOFTGEL      |
| 11845014971 | FERROUS SULFATE 325 MG TABLET  |
| 11845015010 | VITAMIN D3 2,000 UNIT SOFTGEL  |
| 11845015265 | SLOW RELEASE IRON TABLET       |
| 11845015331 | VITAMIN D3 5,000 UNIT SOFTGEL  |
| 11845015415 | SOOTHING PUREWAY-C 500 MG TAB  |
| 11845015798 | MULTIVITAMIN-MINERAL LIQUID    |
| 11845016011 | MAGNESIUM OXIDE 500 MG TABLET  |
| 11845016238 | VITAMIN D3 10,000 UNIT SOFTGEL |
| 11845016261 | K2 PLUS D3 TABLET              |
| 11845016275 | MEGAVITE CAPLET                |
| 11845016407 | COCONUT OIL CREAM              |
| 11845017228 | ALPHA LIPOIC ACID 600 MG CAP   |
| 11845018151 | VITRUM 50 PLUS CAPLET          |
| 11845056205 | SUPER MULTIVITAMIN TABLET      |
| 11845057401 | VITAMIN B-12 100 MCG TABLET    |
| 11845057501 | VITAMIN B-12 250 MCG TABLET    |

| NDC         | Name                            |
|-------------|---------------------------------|
| 11845057601 | VITAMIN B12 500 MCG TABLET      |
| 11845057801 | NIACIN 100 MG TABLET            |
| 11845059301 | VITAMIN A 10,000 UNIT CAPSULE   |
| 11845062901 | VITAMIN C 500 MG CHEW TABLET    |
| 11845070405 | STRESS-C WITH IRON TABLET       |
| 11845071301 | RIBOFLAVIN 50 MG TABLET         |
| 11845071401 | RIBOFLAVIN 100 MG TABLET        |
| 11845071601 | VITAMIN C 1,000 MG TABLET       |
| 11845072205 | HAIR VITAMINS                   |
| 11845074505 | STRESS-C WITH ZINC TABLET       |
| 11845077901 | VITAMIN K 100 MCG TABLET        |
| 11845079405 | ACEROLA C 500 MG TABLET CHEW    |
| 11845085301 | SUPER CALCIUM 600 MG TABLET     |
| 11845091501 | CALCIUM 500 MG TABLET           |
| 11845091805 | LITTLE ANIMALS CHILD TB CHW     |
| 11845091905 | LITTLE ANIMALS-IRON TAB CHEW    |
| 11845094105 | NIACIN ER 500 MG TABLET         |
| 11845095505 | DAILY MULTIVIT-MINERALS TAB     |
| 11845096309 | C-1,000 MG TABLET SA            |
| 11845117209 | VIT C-ROSE HIPS 500 MG TABLET   |
| 11877001133 | BINAXNOW COVID AG CARD HOME TST |
| 11877001140 | BINAXNOW COVID-19 AG SELF TEST  |
| 11917000451 | ZINC OXIDE OINTMENT             |
| 11917001006 | GLYCERIN ADULT SUPPOSITORY      |
| 11917001257 | SALINE 0.65% NASAL SPRAY        |
| 11917001440 | GLUCOSE 4 GRAM TABLET CHEW      |
| 11917001526 | VITAMIN A AND D OINTMENT        |
| 11917002613 | PEDIATRIC ELECTROLYTE SOLUTION  |
| 11917003586 | CLOTRIMAZOLE-3 2% CREAM         |
| 11917003688 | ARTIFICIAL TEARS EYE DROPS      |
| 11917003693 | EYE ALLERGY RELIEF DROPS        |
| 11917003910 | MULTIPLE VITAMIN WITH IRON TAB  |
| 11917003912 | MULTIPLE VITAMINS TABLET        |
| 11917003913 | MULTIPLE VITAMINS TABLET        |
| 11917003940 | VITAMIN B-12 500 MCG TABLET     |
| 11917003949 | VITAMIN B COMPLEX-VIT C CAPLET  |
| 11917003960 | FOLIC ACID 400 MCG TABLET       |
| 11917003961 | FISH OIL CONC 1,000 MG SOFTGEL  |
| 11917004335 | WAL-TUSSIN DM CLEAR SYRUP       |
| 11917004416 | VITAMIN B-COMPLEX & C CAPLET    |
| 11917004542 | ANTI-NAUSEA LIQUID              |
| 11917004625 | VITAMIN C 1,000 MG CAPLET       |
| 11917004637 | VITAMIN E 400 UNIT SOFTGEL      |
| 11917004644 | VITAMIN E 1,000 UNIT SOFTGEL    |
| 11917004659 | WAL-TUSSIN SYRUP                |

| NDC         | Name                           |
|-------------|--------------------------------|
| 11917004661 | WAL-TUSSIN DM SYRUP            |
| 11917004929 | ONE DAILY WOMENS 50 PLUS TAB   |
| 11917004955 | HYDROCORTISONE 0.5% OINTMENT   |
| 11917005003 | WAL-PROFEN 200 MG SOFTGEL      |
| 11917005004 | WAL-PROFEN 200 MG CAPSULE      |
| 11917005014 | CALCIUM CITRATE 200 MG TABLET  |
| 11917005015 | CALCIUM CITRATE - VIT D TABLET |
| 11917005020 | CALCIUM 500-VIT D3 200 TABLET  |
| 11917005095 | TRIPLE ANTIBIOTIC OINTMENT     |
| 11917005099 | WAL-SPORIN FIRST AID OINTMENT  |
| 11917005510 | PEDI ELECTROLYTE FREEZER POP   |
| 11917005831 | VITAMIN D3 400 UNIT SOFTGEL    |
| 11917005880 | PRENATAL TABLET                |
| 11917005895 | FISH OIL CONCENTRATE SOFTGEL   |
| 11917006269 | ARTIFICIALS TEARS DROPS        |
| 11917006385 | WART REMOVER 17% LIQUID        |
| 11917006548 | FN VITAMIN B-12 1,000 MCG TAB  |
| 11917006938 | ARTHRITIS PAIN RELIEF 0.1% CRM |
| 11917007445 | MAGNESIUM 250 MG TABLET        |
| 11917007499 | CALCIUM 500-VIT D3 200 CAPLET  |
| 11917007518 | VITAMIN C 1,000 MG CAPLET      |
| 11917007523 | VITAMIN C 500 MG TABLET CHEW   |
| 11917007534 | ONE DAILY FOR WOMEN 50+ ADV TB |
| 11917007538 | CALCIUM CITRATE 200 MG CAPLET  |
| 11917007541 | CALCIUM 600+D PLUS MINERALS TB |
| 11917007548 | CALCIUM 600-VIT D3 400 TABLET  |
| 11917007645 | READY TO USE MINERAL OIL ENEMA |
| 11917007676 | EAR WAX REMOVAL 6.5% DROP      |
| 11917007913 | CO Q-10 200 MG SOFTGEL         |
| 11917008528 | GLUCO SHOT LIQUID GLUCOSE      |
| 11917008530 | GLUCOSE 4 GRAM TABLET CHEW     |
| 11917008609 | GUMMI BEAR MULTIVIT TAB CHEW   |
| 11917008678 | WAL-TUSSIN LONG ACT COUGH SYRP |
| 11917008701 | WAL-FLU NIGHT SEVERE COLD LIQ  |
| 11917008863 | OMEGA 3 FISH OIL SOFTGEL       |
| 11917009153 | A THRU Z SELECT TABLET         |
| 11917009167 | A THRU Z ADVANCED FORMULA TAB  |
| 11917009486 | ONE DAILY FOR WOMEN TABLET     |
| 11917009502 | THERAGRAN-M PREMIER 50+ CAPLET |
| 11917009725 | WART REMOVER 17% LIQUID        |
| 11917010085 | CHILDREN'S MULTI-VIT GUMMIES   |
| 11917010451 | HEADACHE RELIEF GELCAP         |
| 11917010546 | EAR WAX REMOVAL 6.5% DROPS     |
| 11917010556 | LUBRICANT 0.5% EYE DROP        |
| 11917010573 | SUPER PROBIOTIC CAPSULE        |

| NDC         | Name                           |
|-------------|--------------------------------|
| 11917010757 | CO Q-10 50 MG SOFTGEL          |
| 11917010788 | EAR WAX REMOVAL 6.5% KIT       |
| 11917010873 | KETONE TEST STRIP              |
| 11917010927 | GLUCOSE 40% GEL                |
| 11917011225 | CO Q-10 400 MG SOFTGEL         |
| 11917011251 | A THRU Z SELECT MEN 50+ TABLET |
| 11917011334 | CALCIUM 600-VIT D3 400 CAPLET  |
| 11917011335 | CALCIUM CIT-VIT D 315-200 TAB  |
| 11917011514 | GLYCERIN SUPPOSITORY           |
| 11917011548 | CALCIUM 600-VIT D3 500 SOFTGEL |
| 11917011600 | COMPLETE MULTIVIT-MINERAL LIQ  |
| 11917011602 | VITAMIN D3 400 UNIT/5 ML LIQ   |
| 11917011636 | A THRU Z SELECT MULTIVIT TAB   |
| 11917011644 | A THRU Z SELECT 50 PLUS TABLET |
| 11917011811 | VITAMIN D3 1,000 UNIT SOFTGEL  |
| 11917011818 | VITAMIN D3 2,000 UNIT SOFTGEL  |
| 11917011838 | MULTIVITAMIN LIQUID            |
| 11917012691 | A THRU Z MEN'S ULTIMATE TABLET |
| 11917012805 | ALCOHOL SWABS                  |
| 11917013296 | INFANT & CHILD GLYCERIN SUPPOS |
| 11917013327 | NIACIN ER 500 MG CAPLET        |
| 11917013345 | ACIDOPHILUS TABLET             |
| 11917013374 | BALANCED B-COMPLEX CAPLET      |
| 11917013854 | MELATONIN TR 10 MG TABLET      |
| 11917013858 | B-COMPLEX WITH VIT C CAPLET    |
| 11917013868 | FISH OIL DR 1,000 MG SOFTGEL   |
| 11917013874 | FISH OIL EC 1,200 MG SOFTGEL   |
| 11917013894 | FISH OIL 1,200 MG SOFTGEL      |
| 11917013935 | B-COMPLEX WITH VIT C CAPLET    |
| 11917013956 | FOLIC ACID 400 MCG TABLET      |
| 11917013971 | VITAMIN B-12 500 MCG TABLET    |
| 11917013985 | VIT C-ROSE HIPS TR 1,000 MG    |
| 11917013987 | VIT C-ROSE HIPS 1,000 MG CPLT  |
| 11917014057 | MELATONIN 5 MG QUICK DISSOLVE  |
| 11917014472 | LIQUID CORN-CALLUS REMOVER     |
| 11917014587 | CALCIUM CITRATE-VIT D3 CAPLET  |
| 11917014663 | ONE DAILY MULTIVITAMIN TABLET  |
| 11917014665 | ONE DAILY MULTIVITAMIN-IRON TB |
| 11917014674 | VIT C-ROSE HIPS 500 MG TABLET  |
| 11917014767 | VITAMIN D3 5,000 UNIT SOFTGEL  |
| 11917014868 | MELATONIN 3 MG ODT             |
| 11917015116 | COMFORT GEL SUSPENSION         |
| 11917015159 | SINUS RELIEF NASAL SPRAY 0.05% |
| 11917015492 | PROBIOTIC 15 BILLION CELL CAP  |
| 11917015853 | ONE DAILY MEN'S 50 PLUS D3 TAB |

| NDC         | Name                           |
|-------------|--------------------------------|
| 11917016047 | CALCIUM 600-VIT D3 800 TABLET  |
| 11917016332 | TRIPLE ANTIBIOTIC-PAIN OINT    |
| 11917016459 | CHILDREN MULTIVITAMIN GUMMIES  |
| 11917016480 | LUBRICANT 0.5% EYE DROPS       |
| 11917016630 | CALCIUM CITRATE-VIT D3 TABLET  |
| 11917016663 | CHOCOLATED LAXATIVE            |
| 11917017023 | MELATONIN-LEMON BALM TABLET    |
| 11917017055 | WOMEN'S MULTIVITAMIN TABLET    |
| 11917017060 | IRON 65 MG TABLET              |
| 11917017067 | B-COMPLEX WITH VIT C TABLET    |
| 11917017072 | ADULTS MULTIVITAMIN TABLET     |
| 11917017075 | ADULTS 50 PLUS MULTIVITAMIN TB |
| 11917017079 | CALCIUM 600 MG-VIT D3 10MCG TB |
| 11917017082 | CALCIUM 600 MG TABLET          |
| 11917017177 | CALCIUM CIT 200-VIT D3 250 TAB |
| 11917017566 | DAILY PROBIOTIC 250 MG CAPSULE |
| 11917017650 | ADULT MULTIVITAMIN GUMMIES     |
| 11917017654 | PRENATAL GUMMIES               |
| 11917017677 | MAGNESIUM 400 MG TABLET        |
| 11917017735 | BABY VIT D3 400 UNIT/DROP CONC |
| 11917017916 | INFANTS' GAS RLF 20 MG/0.3 ML  |
| 11917017976 | MULTIVITAMIN WOMEN 50 PLUS TAB |
| 11917018251 | FLUTICASONE PROP 50 MCG SPRAY  |
| 11917019061 | CHILD GLYCERIN SUPPOSITORY     |
| 12539001101 | SUPPORT-500 SOFTGEL            |
| 12539013030 | FLORAVANCE CAPSULE             |
| 12539050001 | ACTICAL SOFTGEL                |
| 12539053301 | PREVENT SOFTGELS               |
| 12539077916 | NEOTUSS PLUS LIQUID            |
| 12547003491 | DESITIN MULTI-PURPOSE OINTMENT |
| 12547017157 | BENADRYL ITCH STOPPING 2% GEL  |
| 12547020430 | ZYRTEC 10 MG TABLET            |
| 12547023808 | NEOSPORIN-PAIN ITCH SCAR OINT  |
| 12547023836 | NEOSPORIN PLUS BURN RLF OINT   |
| 12830082401 | EZFE 200 CAPSULE               |
| 12843003520 | PHILLIPS' LAX LIQUI-GELS       |
| 12843010105 | BAYER ASPIRIN 81 MG CHEW TAB   |
| 12843010110 | BAYER ASPIRIN 325 MG TABLET    |
| 12843010238 | BAYER ASPIRIN 325 MG CAPLET    |
| 12843051673 | PHILLIPS 500 MG CAPLET         |
| 12843053430 | PHILLIPS' COLON HLTH 3B CFU CP |
| 12843055104 | PHILLIPS' MILK OF MAGNESIA     |
| 13349001022 | THERA-D 2000 TABLET            |
| 13349001031 | ESSENTIA TABLET                |
| 13349001032 | COMPANION TABLET               |

| NDC         | Name                           |
|-------------|--------------------------------|
| 13349001045 | THERA-D RAPID REPLETION TABLET |
| 13349001078 | THERA-D SPORT 2,000 UNIT TAB   |
| 13709023001 | CLEARCANAL EARWAX SOFTENER DRP |
| 13733027007 | ADV ANTACID-ANTIGAS LIQUID     |
| 13811000710 | TRINATAL RX 1 TABLET           |
| 13811001030 | COMPLETE NATAL DHA             |
| 13811001490 | COMPLETENATE TABLET CHEW       |
| 13811002710 | ELITE-OB CAPLET                |
| 13811002810 | CORVITA TABLET                 |
| 13811004210 | TARON FORTE CAPSULE            |
| 13811006610 | CORVITA 150 TABLET             |
| 13811051810 | TRIGELS-F FORTE SOFTGEL        |
| 13811052501 | TRIPHROCAPS SOFTGEL            |
| 13811053530 | FOLIVANE-OB CAPSULE            |
| 13811053630 | TARON-C DHA CAPSULE            |
| 13811058030 | ZATEAN-PN DHA CAPSULE          |
| 13811058230 | ZATEAN-PN PLUS SOFTGEL         |
| 13874002003 | ALLERGY (LORATADINE) 10 MG TAB |
| 13874002037 | 8HR ARTHRITIS PAIN ER 650 MG   |
| 13925011601 | SE-NATAL-19 TABLET             |
| 13925011701 | SE-NATAL 19 CHEWABLE TABLET    |
| 13925011890 | SE-TAN PLUS CAPSULE            |
| 14428000003 | BACITRAYCIN PLUS 500 UNIT/GM   |
| 14613033967 | QUICKVUE AT-HOME COVID-19 TEST |
| 14654011957 | LIQ-10 SYRUP                   |
| 14654025205 | Q-GEL MEGA 100 MG SOFTGEL      |
| 14654039157 | LIQ-10 100 MG/5 ML SYRUP       |
| 14654045705 | H2Q 100 MG CAPSULE             |
| 14654068805 | Q-GEL 15 MG SOFTSULE           |
| 14654077105 | Q-GEL FORTE SOFTSULE           |
| 14654084868 | QH LIQUID 100 MG/ML DROPS      |
| 14654095414 | Q-GEL ULTRA SOFTSULE           |
| 15066000101 | DIGEST ADV LACTOSE DEFENSE CAP |
| 15066000116 | DIGEST ADV INTENSIVE BOWEL CAP |
| 15066000166 | DIGEST ADV PROBIO 2 B CELL CAP |
| 15127050861 | SB CHILDREN'S PAIN RELIVR SUSP |
| 15187000604 | SCOT-TUSSIN EXPECTORANT LIQUID |
| 15622000001 | ZIKS ARTHRITIS PAIN RELIEF     |
| 15718089305 | RETAIN PM EYE OINTMENT         |
| 16042001144 | SOOTHENEB NBL100 ADULT MASK    |
| 16042001145 | SOOTHENEB NBL100 CHILD MASK    |
| 16042001146 | SOOTHENEB NBL100 MESH CAP      |
| 16042001147 | SOOTHENEB NBL100 MED CUP       |
| 16042001315 | FORA 6 CONNECT KETONE STRIP    |
| 16042001316 | FORA TN'G ADV VOICE KETO STRIP |

| NDC         | Name                           |
|-------------|--------------------------------|
| 16042001340 | FORA GTEL KETONE TEST STRIP    |
| 16103034611 | PHARBECHLOR 4 MG TABLET        |
| 16103034711 | PHARBEDRYL 50 MG CAPSULE       |
| 16103035004 | PHARBETOL 500 MG CAPLET        |
| 16103035307 | PHARBETOL 325 MG TABLET        |
| 16103037606 | PHARBETOL 500 MG TABLET        |
| 16103037608 | PAIN RELIEF 500 MG TABLET      |
| 16103038104 | PHARBINEX-DM 400-20 MG TABLET  |
| 16103038608 | MECLIZINE 12.5 MG CAPLET       |
| 16103038708 | MECLIZINE 25 MG TABLET CHEW    |
| 16169001003 | KIMONO CONDOMS                 |
| 16169001012 | KIMONO THIN LUBRICATED CONDOMS |
| 16169002003 | KIMONO MAXX CONDOM             |
| 16169005003 | KIMONO MICROTHIN CONDOM        |
| 16169006003 | KIMONO MICROTHIN AQUA LUBE     |
| 16169007003 | KIMONO TEXTURED CONDOM         |
| 16169008003 | KIMONO MICROTHIN LARGE CONDOM  |
| 16490002573 | CLINITEST COVID-19 HOME TEST   |
| 16500007303 | ONE-A-DAY ESSENTIAL TABLET     |
| 16500007406 | ONE-A-DAY WOMEN'S TABLET       |
| 16500007511 | ONE-A-DAY MAX FORMULA TAB      |
| 16500007909 | FLINTSTONES WITH IRON TAB CHEW |
| 16500008004 | ONE-A-DAY MEN'S TABLET         |
| 16500008806 | FLINTSTONES COMPLETE TABLET    |
| 16500008826 | FLINTSTONES COMPLETE TABLET    |
| 16500009713 | FLINTSTONES COMPLETE CHEW TAB  |
| 16500050603 | SCOOPY-DOO ONE A DAY TABLET    |
| 16500051328 | ONE-A-DAY WEIGHTSMART TABLET   |
| 16500051627 | FLINTSTONES MULTIVIT CHEW TAB  |
| 16500052128 | ONE-A-DAY CHOLESTEROL PLUS TAB |
| 16500052586 | ONE-A-DAY ENERGY TABLET        |
| 16500052916 | ONE-A-DAY MEN'S 50 PLUS TABLET |
| 16500053505 | CITRACAL-D3 MAXIMUM PLUS CAPLT |
| 16500053506 | CITRACAL-D3 250MG-200 UNIT TAB |
| 16500053539 | ONE-A-DAY TEEN ADVANTAGE TAB   |
| 16500053778 | ALKA-SELTZER PLUS MUCUS-CONGES |
| 16500053879 | FLINTSTONES GUMMIES CHEW TAB   |
| 16500054118 | ONE-A-DAY MEN'S PRO EDGE TABLT |
| 16500054137 | ONE-A-DAY MENOPAUSE FORMULA TB |
| 16500054207 | ONE-A-DAY WOMEN'S HEALTHY SKIN |
| 16500054589 | ONE-A-DAY WOMEN'S PETITES TAB  |
| 16500054852 | ONE-A-DAY TRUBIOTICS 2 BILL CP |
| 16500055281 | ONE A DAY PRENATAL DHA PACK    |
| 16500055817 | ONE-A-DAY PRENATAL-1 SOFTGEL   |
| 16500056164 | ONE-A-DAY PROACTIVE 65 PLUS TB |

| NDC         | Name                           |
|-------------|--------------------------------|
| 16500056531 | ONE-A-DAY WOMEN'S 50 PLUS TAB  |
| 16500056870 | ONE-A-DAY PRENATAL GUMMY       |
| 16500058694 | ONE-A-DAY MEN'S COMPLETE TAB   |
| 16500058695 | ONE-A-DAY MEN'S COMPLETE TAB   |
| 16500058698 | ONE-A-DAY WOMEN'S COMPLETE TAB |
| 16500059283 | ALKA-SELTZER HEARTBURN CHEW    |
| 16500059920 | FLINTSTONES WITH EXTRA IRON    |
| 16514091463 | PEDIAVANCE LIQUID STICK        |
| 16526001000 | ST. JOSEPH ASPIRIN EC 81 MG TB |
| 16533058621 | PHLEXY-VITS POWDER PACKET      |
| 16571011112 | CHLORHEXIDINE 4% LIQUID        |
| 16571072812 | ONE-DAILY MULTI CAPS           |
| 16571073012 | MELATONIN-VIT B6 5-10 MG TAB   |
| 16571073118 | ALGAE BASED CALCIUM TABLET     |
| 16571073209 | COENZYME Q-10 100 MG CAPSULE   |
| 16571073406 | ELDERBERRY ZINC VIT C LOZENGE  |
| 16571088041 | ESOMEPRAZOLE MAG DR 20 MG CAP  |
| 16714080901 | NEW DAY 1.5 MG TABLET          |
| 16784011402 | WHITE PETROLATUM JELLY PACKET  |
| 16784011901 | ZINC OXIDE 25% OINTMENT        |
| 16837085514 | PEPCID AC 20 MG TABLET         |
| 16837087220 | PEPCID AC 10 MG TABLET         |
| 16837091101 | MYLICON 40 MG/0.6 ML DROPS     |
| 16837091103 | MYLICON DROPS                  |
| 16864000018 | AMLACTIN 12% LOTION            |
| 16864000093 | TRIPLE PASTE 40% OINTMENT      |
| 17433000001 | ENEMEEZ PLUS MINI ENEMA        |
| 17433000007 | ENEMEEZ KIDS 100 MG/5 ML ENEMA |
| 17433987600 | ENEMEEZ MINI ENEMA             |
| 17433987605 | ENEMEEZ MINI ENEMA             |
| 17478006012 | ARTIFICIAL TEARS 1.4% DROPS    |
| 17478071710 | KETOTIFEN FUM 0.025% EYE DROPS |
| 17856000201 | FLORASTOR 250 MG CAPSULE       |
| 17856000802 | MUCINEX ER 600 MG TABLET       |
| 17856004201 | FERROUS SULF 220 MG/5 ML CUP   |
| 17856004202 | FERROUS SULF 300 MG/6.82ML CUP |
| 17856004503 | ACETAMINOPHEN 80 MG/2.5 ML SYR |
| 17856006106 | PEDIA IRON 15 MG/ML ENFIT SYR  |
| 17856011701 | SILTUSSIN SA 300 MG/15 ML CUP  |
| 17856011702 | SILTUSSIN SA 200 MG/10 ML CUP  |
| 17856011705 | SILTUSSIN SA 100 MG/5 ML CUP   |
| 17856012920 | FLORANEX TABLET                |
| 17856013401 | SILTUSSIN DM DAS 100-10MG/5 ML |
| 17856013402 | SILTUSSIN DM DAS 200-20MG/10ML |
| 17856016601 | CHILD PAIN RLF 325 MG/10.15ML  |

| NDC         | Name                           |
|-------------|--------------------------------|
| 17856016603 | CHILD PAIN RLF 650 MG/20.31 ML |
| 17856016605 | CHILD PAIN RLF 480 MG/15ML CUP |
| 17856017201 | DELSYM 60 MG/10 ML SUSP CUP    |
| 17856017202 | DELSYM 30 MG/5 ML SUSP CUP     |
| 17856017507 | CHILD PAIN RLF 80MG/2.5ML SYRG |
| 17856017901 | CHILD PAIN RLF 160 MG/5 ML ELX |
| 17856017904 | CHILD PAIN RLF 240MG/7.5ML SYR |
| 17856017907 | CHILD PAIN RLF 40MG/1.25ML SYR |
| 17856018204 | CHILD PAIN RLF 160 MG/5 ML CUP |
| 17856020107 | ACETAMINOPHEN 480 MG/15 ML CUP |
| 17856040201 | POLY-VI-SOL 0.5 ML ORAL SYRING |
| 17856040204 | POLY-VI-SOL 0.5 ML ENFIT SYRNG |
| 17856044301 | STOOL SOFTENER 250 MG SOFTGEL  |
| 17856046201 | SENNA 17.6 MG/10 ML SYRUP CUP  |
| 17856055701 | LORATADINE 5 MG/5 ML SOLN CUP  |
| 17856062704 | FERROUS SULF 15 MG (IRON)/ML   |
| 17856062804 | FERROUS SUL 15MG IRON/ML ENFIT |
| 17856063001 | GERI-LANTA LIQUID 30 ML CUP    |
| 17856077101 | STOOL SOFTENER 250 MG/25 ML LQ |
| 17856077102 | STOOL SOFTENER 100 MG/10 ML LQ |
| 17856083201 | MINERAL OIL 30 ML CUP          |
| 17856086905 | PROBIOTIC 250 MG CAPSULE       |
| 17856091701 | VITAMIN D3 400 UNIT/ML LIQUID  |
| 17856100601 | TUSSIN DM 10-100MG/5ML LIQ CUP |
| 17856111001 | MINERAL OIL                    |
| 17856112704 | SENNA 26.4 MG/15 ML SYRUP CUP  |
| 17856130305 | INF SIMETHICONE 80MG/1.2ML ENF |
| 17856434401 | CENTRUM MULTIVIT-MIN 15 ML CUP |
| 17856572103 | MINTOX SUSPENSION 30 ML CUP    |
| 17856572503 | MINTOX MAXIMUM STR 30 ML CUP   |
| 17856630601 | ROBAFEN DM 200-20 MG/10 ML CUP |
| 17856630605 | ROBAFEN DM 100-10 MG/5 ML CUP  |
| 17856748001 | FE-VITE 15 MG/ML ORAL SYRINGE  |
| 17856748004 | FE-VITE 15 MG/ML ENFIT SYRINGE |
| 19283059230 | IRON 65 MG TABLET              |
| 19283073833 | 12-HR DECONGEST 120 MG CAPLET  |
| 19283080207 | 24HOUR ALLERGY 10 MG TABLET    |
| 19903001020 | INFANTS' MYLICON 20 MG/0.3 ML  |
| 19903001028 | MYLANTA MAXIMUM STRENGTH LIQ   |
| 19903001063 | MYLANTA MAXIMUM STRENGTH LIQ   |
| 20513004001 | SIMPLYTHICK 4 GM PACKET        |
| 20513006005 | SIMPLYTHICK 6 GM GEL PUMP      |
| 20513007001 | SIMPLYTHICK 6 GM PACKET        |
| 20513007004 | SIMPLYTHICK 48 GM PACKET       |
| 20513008001 | SIMPLYTHICK 12 GM PACKET       |

| NDC         | Name                           |
|-------------|--------------------------------|
| 20513008004 | SIMPLYTHICK 96 GM PACKET       |
| 20525010435 | MEGARED ADVANCED 4-IN-1 GUMMY  |
| 20525011256 | CALCIUM 600 MG-D3 10 MCG SFGL  |
| 20525098225 | DIGEST ADV LACTOSE SUPPORT CAP |
| 20555000100 | VITAMIN C 250 MG TABLET        |
| 20555000400 | HIGH POTENCY MULTIVITAMIN TAB  |
| 20555002500 | OYSTER SHELL 250 MG-D3 3.12MCG |
| 20555003300 | VITAMIN D3 25 MCG TABLET       |
| 20555003900 | MELATONIN 5 MG TABLET          |
| 20555004000 | ZINC SULFATE 220 MG (50MG) CAP |
| 21130005452 | SW 12-HR DECONGEST 120 MG TAB  |
| 21130017653 | SW ALLERGY RELIEF-D TABLET     |
| 21130027001 | SW PAIN RELIEF 500 MG GELCAP   |
| 21130030602 | SW CLEARLAX POWDER             |
| 21130034405 | SW NICOTINE 2 MG LOZENGE       |
| 21130035278 | SW NICOTINE 2 MG CHEWING GUM   |
| 21130043262 | SW NASAL DECONGESTANT 30 MG TB |
| 21130045839 | SW ALLERGY RELIEF 10 MG TAB    |
| 21130053278 | SW NICOTINE 4 MG CHEWING GUM   |
| 21130078117 | SW NICOTINE 4 MG LOZENGE       |
| 21130079540 | SW ANTACID PLUS GAS RELIEF LIQ |
| 21292000146 | TRUEPLUS KETONE TEST STRIP     |
| 21292000431 | TRUEPLUS GLUCOSE 3.75 G TB CHW |
| 21292000441 | TRUEPLUS GLUCOSE 15 GRAM GEL   |
| 21888012062 | VITAMIN D3 1,000 UNIT TAB CHEW |
| 22600092661 | TROJAN ULTRA THIN CONDOM       |
| 22600095338 | TROJAN PLEASURE PACK CONDOM    |
| 22600097252 | TROJAN EXTENDED PLEASURE CONDM |
| 22600099965 | TROJAN BARESKIN PACK CONDOM    |
| 23359010010 | CENTRATEX CAPSULE              |
| 23359010530 | C-NATE DHA SOFTGEL             |
| 23513063404 | RECOFEN D LIQUID               |
| 23558510800 | BLACK-DRAUGHT SENNA 8.6 MG TAB |
| 23900001252 | VICKS SINEX 12 HOUR SPRAY      |
| 23900001986 | VICKS QLEARQUIL 0.05% MIST     |
| 23900002325 | VICKS SINEX 12 HOUR MIST       |
| 23900003814 | VICKS NYQUIL SEVERE COLD-FLU   |
| 24208007053 | OCUVITE BLUE LIGHT 25-5 MG SFG |
| 24208027615 | MURO-128 2% EYE DROPS          |
| 24208027715 | MURO-128 5% EYE DROPS          |
| 24208038555 | MURO-128 5% EYE OINTMENT       |
| 24208038760 | OCUVITE WITH LUTEIN TABLET     |
| 24208040319 | OCUVITE LUTEIN-ZEAXANTHIN CAP  |
| 24208043262 | PRESERVISION AREDS TABLET      |
| 24208046530 | OCUVITE ADULT 50 PLUS SOFTGEL  |

| NDC         | Name                           |
|-------------|--------------------------------|
| 24208053210 | PRESERVISION AREDS SOFTGEL     |
| 24208053708 | LUMIFY 0.025% EYE DROP         |
| 24208060110 | ALAWAY 0.025% EYE DROPS        |
| 24208063210 | PRESERVISION LUTEIN SOFTGEL    |
| 24208066158 | OCUVITE LUTEIN 25-5 MG SOFTGEL |
| 24208069760 | PRESERVISION AREDS 2 SOFTGEL   |
| 24208069864 | PRESERVISION AREDS 2 PLUS MV   |
| 24208073510 | OCUVITE EYE PLUS MULTI TABLET  |
| 24357070101 | ANECREAM 4% CREAM              |
| 24357070105 | ANECREAM 4% CREAM              |
| 24357070215 | ANECREAM5 5% CREAM             |
| 24385000605 | ARTIFICIAL TEARS DROPS         |
| 24385001758 | PINK BISMUTH CAPLET            |
| 24385002671 | CHEST CONGST-COUGH RELIEF TAB  |
| 24385003316 | GLYCERIN 99.5% LIQUID          |
| 24385003662 | DAY TIME COLD-FLU SOFTGEL      |
| 24385006710 | NASAL SPRAY 0.05%              |
| 24385007282 | CALDYPHEN LOTION               |
| 24385007505 | EYE DROPS                      |
| 24385011009 | CLOTRIMAZOLE-3 2% CREAM        |
| 24385011603 | LICE TREATMENT SHAMPOO         |
| 24385011878 | GNP GAS RLF(SIMETH) 80 MG CHEW |
| 24385012576 | FIBER TABS                     |
| 24385014303 | TRIPLE ANTIBIOTIC PLUS OINT    |
| 24385014626 | CHILD'S PAIN RELIEVER SUSP     |
| 24385019003 | HYDROCORTISONE 0.5% CREAM      |
| 24385020501 | GNP ATHLETE'S FOOT 1% CREAM    |
| 24385021003 | ANTI-ITCH 2% CREAM             |
| 24385021310 | IODINE 2% MILD TINCTURE        |
| 24385026606 | CALCIUM 500 + VIT D 200 TABLET |
| 24385027372 | CALCIUM 600 + VIT D TABLET     |
| 24385027603 | HYDROCORTISONE 1% OINTMENT     |
| 24385029950 | NATURAL FIBER POWDER           |
| 24385030226 | STOMACH RELIEF 262 MG/15 ML    |
| 24385032521 | NASAL MOISTURIZING 0.65% SPRAY |
| 24385032558 | SALINE 0.65% NOSE SPRAY        |
| 24385034246 | NATURAL VEGETABLE POWDER       |
| 24385035210 | NO DRIP 0.05% NASAL SPRAY      |
| 24385035934 | TUSSIN DM SYRUP                |
| 24385036578 | MIGRAINE FORMULA CAPLET        |
| 24385037846 | ARTHRITIS PAIN RELIEVER        |
| 24385037926 | DIPHEDRYL 12.5 MG/5 ML ELIXIR  |
| 24385038563 | ACID REDUCER 20 MG TABLET      |
| 24385039740 | FOAMING ANTACID LIQUID         |
| 24385041396 | CALAMINE SUSPENSION            |

| NDC         | Name                           |
|-------------|--------------------------------|
| 24385043262 | SUPHEDRIN 30 MG TABLET         |
| 24385044164 | SLEEP AID 25 MG TABLET         |
| 24385046134 | NIGHT TIME COUGH LIQUID        |
| 24385046560 | IBUPROFEN COLD-SINUS CPLT      |
| 24385046678 | FIBER THERAPY 500 MG CAPLET    |
| 24385046843 | STOOL SOFTENER 50 MG/5 ML LIQ  |
| 24385046943 | STOOL SOFTENER 60 MG/15 ML SYR |
| 24385047199 | GNP LORATADINE 10 MG TABLET    |
| 24385047978 | ALLERGY 25 MG TABLET           |
| 24385048447 | GNP PAIN RELIEF 500 MG CAPLET  |
| 24385050726 | SUPHEDRIN LIQUID               |
| 24385051734 | COLD & ALLERGY ELIXIR          |
| 24385051926 | COLD-COUGH ELIXIR              |
| 24385052126 | DI BROMM CLD/ALLERGY ELIXIR    |
| 24385052226 | DI BROMM DM CLD/COUGH ELIXR    |
| 24385052403 | TERBINAFINE 1% CREAM           |
| 24385053126 | ALLERGY RELIEF 5 MG/5 ML SOLN  |
| 24385055408 | ANTI-DIARRHEAL 2 MG CAPLET     |
| 24385057226 | TUSSIN CF SYRUP                |
| 24385060271 | MUCUS RELIEF 400 MG TABLET     |
| 24385060549 | OPTI-VITAMINS TABLET           |
| 24385061165 | JR. STR NON-ASPIRIN 80 MG TAB  |
| 24385061265 | JR. STR NON-ASPIRIN 160 MG TAB |
| 24385090426 | TUSSIN CF COUGH-COLD SYRUP     |
| 24385090440 | TUSSIN CF COUGH & COLD SYRUP   |
| 24385099865 | ALL DAY ALLERGY 10 MG TABLET   |
| 24470090216 | BP WASH 7% LIQUID              |
| 24470090960 | BP 5% GEL                      |
| 24470091060 | BP 10% GEL                     |
| 24470091108 | BP WASH 2.5% LIQUID            |
| 24689012201 | GUAIFENESIN 400 MG TABLET      |
| 24689012301 | GUAIFENESIN-DM 400-20 MG TAB   |
| 24689012401 | LIDOCAINE ANORECTAL 5% CREAM   |
| 24689013801 | MECLIZINE 12.5 MG TABLET       |
| 24689013901 | MECLIZINE 25 MG TABLET         |
| 25294087400 | INJECT-EASE SYR NDL INTRODUCER |
| 25439095779 | HEALTHY ACCENTS UNILET 30G     |
| 25866000003 | ALEVE 220 MG CAPLET            |
| 25866000004 | ALEVE 220 MG TABLET            |
| 25866005420 | ALEVE 220 MG GELCAP            |
| 25866059223 | ALEVE 220 MG TABLET            |
| 25866059234 | ALEVE 220 MG GELCAP            |
| 25866059361 | ALEVE ARTHRITIS PAIN 1% GEL    |
| 26341012350 | PRO-CAL TABLET                 |
| 26341012920 | BIO-35 SOFTGEL                 |

| NDC         | Name                           |
|-------------|--------------------------------|
| 27434000608 | B-12 DOTS 500 MCG TABLET       |
| 27434003162 | D3 PLUS K2 DOTS 1,000 UNIT TAB |
| 27434003217 | OMEGA-3 1,000 MG SOFTGEL       |
| 27434003665 | D3 DOTS 2,000 UNIT TABLET      |
| 27495001201 | PROMOLAXIN 100 MG TABLET       |
| 27854010301 | FLANAX 220 MG TABLET           |
| 27854016024 | FLANAX 220 MG TABLET           |
| 28595080016 | AP-HIST DM LIQUID              |
| 28595080560 | HISTEX 1.25 MG CHEWABLE TABLET |
| 28595080930 | HISTEX PD 1.25 MG/ML DROP      |
| 28595090560 | DURAVENT PE TABLET             |
| 29135000001 | ENDUR-ACIN ER 250 MG TABLET    |
| 29135000002 | ENDUR-ACIN ER 500 MG TABLET    |
| 29135012105 | ENDUR-ACIN ER 250 MG TABLET    |
| 29135014403 | ENDUR-C ROSE HIPS SR 1,000 MG  |
| 29135014415 | ENDUR-C ROSE HIPS SR 1,000 MG  |
| 29135015810 | ENDUR-ACIN ER 500 MG TABLET    |
| 29135016102 | ENDUR-ACIN ER 750 MG TABLET    |
| 29135016801 | PLAIN NIACIN 250 MG TABLET     |
| 29135016807 | PLAIN NIACIN 250 MG TABLET     |
| 29135017001 | PLAIN NIACIN 500 MG TABLET     |
| 29135017006 | PLAIN NIACIN 500 MG TABLET     |
| 29135061012 | CO-ENZYME Q10 100 MG SOFTGEL   |
| 29135061515 | ALPHA LIPOIC ACID 300 MG SFTGL |
| 29978012716 | CAPRON DM LIQUID               |
| 29978012810 | CAPRON DMT TABLET              |
| 29978060190 | CAPMIST DM TABLET              |
| 29978091860 | ALEVAZOL 1% OINTMENT           |
| 30142002026 | KRO DIAPER RASH 40% OINTMENT   |
| 30142002925 | KRO NICOTINE 2 MG CHEWING GUM  |
| 30142005460 | KRO 12-HR DECONGES 120 MG CPLT |
| 30142006149 | KRO ALLERGY RELIEF 180 MG TAB  |
| 30142006764 | KRO TRIPLE ANTIBIOTIC OINTMENT |
| 30142008100 | KRO MICONAZOLE 3 COMBO PACK    |
| 30142009208 | KRO CHILD ALLERGY RELIEF SOLN  |
| 30142009423 | KRO NASAL DECONG PE 10 MG TAB  |
| 30142010528 | KRO CHILD PAIN RLF 160 MG/5 ML |
| 30142011701 | KRO LANSOPRAZOLE DR 15 MG CAP  |
| 30142012405 | KRO NICOTINE 2 MG LOZENGE      |
| 30142013214 | KRO FIBER 625 MG CAPLET        |
| 30142014165 | KRO HEARTBURN PREVENTION TAB   |
| 30142015864 | KRO NIGHTTIME SLEEP 25 MG TAB  |
| 30142016626 | KRO CHLD IBUPROFEN 100 MG/5 ML |
| 30142016705 | KRO IBUPROFEN 200 MG CAPLET    |
| 30142017025 | KRO NICOTINE 4 MG CHEWING GUM  |

| NDC         | Name                           |
|-------------|--------------------------------|
| 30142018926 | KRO CHLD ALL DAY ALLER 1 MG/ML |
| 30142019005 | KRO NICOTINE 4 MG LOZENGE      |
| 30142019471 | KRO HEARTBURN PREVEN 20 MG TAB |
| 30142019900 | KRO MICONAZOLE 1 COMBO PACK    |
| 30142027468 | KRO ASPIRIN 81 MG CHEWABLE TAB |
| 30142030101 | KRO 24HR ALLERGY RLF 50MCG SPR |
| 30142030310 | KRO NO DRIP 0.05% NASAL SPRAY  |
| 30142030410 | KRO NASAL SPRAY ORIGINAL 0.05% |
| 30142030602 | KRO GENTLELAX 17 GRAM POWDER   |
| 30142030603 | GENTLELAX POWDER               |
| 30142030906 | KRO NICOTINE 4 MG CHEWING GUM  |
| 30142033240 | KRO MILK OF MAGNESIA SUSP      |
| 30142035206 | KRO NICOTINE 2 MG CHEWING GUM  |
| 30142035740 | KRO ANTACID-ANTIGAS LIQUID     |
| 30142035934 | KRO TUSSIN DM LIQUID           |
| 30142037478 | KRO MIGRAINE FORMULA CAPLET    |
| 30142038421 | KRO COUGH DM ER 30 MG/5 ML SUS |
| 30142038810 | NASAL SPRAY 0.05%              |
| 30142040378 | KRO ACETAMINOPHEN 325 MG TAB   |
| 30142041116 | KRO HYDROCORTISONE 1% CREAM    |
| 30142041678 | KRO ASPIRIN 325 MG TABLET      |
| 30142041926 | KRO CHILD MUCUS RLF COUGH LIQ  |
| 30142043262 | KRO NASAL DECONGEST 30 MG TAB  |
| 30142045849 | KRO ALL DAY ALLERGY 10 MG TAB  |
| 30142046162 | KRO IBUPROFEN JR STR 100 MG TB |
| 30142046965 | KRO STOMACH RLF 262 MG CHEW TB |
| 30142047792 | KRO FIBER LAXATIVE 625 MG CPLT |
| 30142053910 | KRO NASAL SPRAY 1%             |
| 30142054478 | KRO ARTHRIT PAIN RLF ER 650 MG |
| 30142056176 | KRO ACETAMINOPHEN 500 MG CPLT  |
| 30142056178 | KRO ACETAMINOPHEN 500 MG CPLT  |
| 30142058840 | KRO ADV ANTACID-ANTIGAS LIQUID |
| 30142059016 | KRO INFANT PAIN-FEVER 160 MG/5 |
| 30142060462 | KRO IBUPROFEN 200 MG TABLET    |
| 30142060476 | KRO IBUPROFEN 200 MG TABLET    |
| 30142061203 | KRO ALLERGY RELIEF 10 MG TAB   |
| 30142061265 | ALLERGY RELIEF 10 MG TABLET    |
| 30142061762 | KRO NAPROXEN SOD 220 MG CAPLET |
| 30142069914 | KRO ASPIRIN EC 81 MG TABLET    |
| 30142070071 | KRO ACETAMINOPHEN PM GELTAB    |
| 30142070201 | KRO EYE ITCH RLF 0.025% DROPS  |
| 30142070314 | KRO MUCUS-ER MAX 1,200 MG TAB  |
| 30142070628 | KRO MUCUS RELIEF ER DM-MAX TAB |
| 30142073402 | KRO NICOTINE 2 MG MINI LOZENGE |
| 30142076340 | KRO NITETIME SEVERE COLD-FLU   |

| NDC         | Name                           |
|-------------|--------------------------------|
| 30142077810 | KRO STOOL SOFTENER 100 MG SFGL |
| 30142080071 | KRO ACETAMINOPHEN PM CAPLET    |
| 30142080082 | KRO ACETAMINOPHEN PM CAPLET    |
| 30142080909 | KRO ALCOHOL 70% SWABS          |
| 30142080931 | KRO ALCOHOL 70% PREP PADS      |
| 30142082529 | KRO MICONAZOLE 7 CREAM         |
| 30142082712 | KRO GENTLE LAXATIVE EC 5 MG TB |
| 30142084326 | KRO TUSSIN DM MAX LIQUID       |
| 30142095703 | KRO NICOTINE 4 MG MINI LOZENGE |
| 30142098082 | KRO ALL DAY RLF 220 MG CAPLET  |
| 30768000541 | MELATONIN 300 MCG TABLET       |
| 30768000601 | B-COMPLEX TABLET               |
| 30768000617 | MAGNESIUM OXIDE 250 MG TABLET  |
| 30768000676 | FOLIC ACID 800 MCG TABLET      |
| 30768001473 | Q-SORB CO Q-10 150 MG SOFTGEL  |
| 30768003553 | Q-SORB CO Q-10 100 MG SOFTGEL  |
| 30768003554 | CALCIUM CIT 315 MG-D3 250 UNIT |
| 30768004001 | Q-SORB CO Q-10 200 MG SOFTGEL  |
| 30768007584 | HAIR, SKIN AND NAILS CAPLET    |
| 30768013430 | BIOTIN 5,000 MCG CAPSULE       |
| 30768013798 | SUNVITE TABLET                 |
| 30768016836 | MELATONIN 1 MG/ML LIQUID       |
| 30768018622 | PROBIOTIC ACIDOPHILUS BEADS    |
| 30768019484 | MELATONIN 10 MG CAPSULE        |
| 30768019941 | VITAMIN D3 50 MCG (2,000 UNIT) |
| 30768030405 | VITAMIN D3 5,000 UNIT/ML DROPS |
| 30768052816 | MELATONIN 5 MG MICROLOZENGE    |
| 30768060693 | B-12 1,000 MCG TABLET          |
| 30768090927 | SUPER B MAXI COMPLEX CAPLET    |
| 31248000009 | DRAMAMINE 25 MG TABLET CHEW    |
| 31248000198 | DRAMAMINE LESS DROWSY 25 MG TB |
| 31248000738 | DRAMAMINE 25 MG TABLET         |
| 31604001285 | VITAMIN B-6 100 MG TABLET      |
| 31604001338 | B-COMPLEX W-VITAMIN C CAPLET   |
| 31604001435 | PRENATAL MULTI TABLET          |
| 31604001650 | VIT C-ROSE HIPS TR 1,000 MG    |
| 31604001718 | MAGNESIUM 250 MG TABLET        |
| 31604001791 | MULTI FOR HER TABLET           |
| 31604001796 | ESSENTIAL WOMAN 50+ TABLET     |
| 31604001882 | VITAMIN E 400 UNIT CAPSULE     |
| 31604002508 | CALCIUM 600MG-D3 400 UNIT SFGL |
| 31604002518 | MULTI COMPLETE-IRON TABLET     |
| 31604002657 | FISH OIL EC 1,200 MG SOFTGEL   |
| 31604002665 | FISH OIL DR 1,000 MG SOFTGEL   |
| 31604002673 | VITAMIN D3 2,000 UNIT TABLET   |

| NDC         | Name                           |
|-------------|--------------------------------|
| 31604002680 | CO Q-10 200 MG SOFTGEL         |
| 31604002725 | STRESS B-COMPLEX TABLET        |
| 31604002727 | SUPER B COMPLEX TABLET         |
| 31604002749 | PRENATAL MULTI-DHA SOFTGEL     |
| 31604002761 | ACIDOPHILUS PROBIOTICS TABLET  |
| 31604002778 | VITAMIN D3 125 MCG SOFTGEL     |
| 31604002843 | VITAMIN C 125 MG GUMMIES       |
| 31604002927 | HAIR, SKIN AND NAILS SOFTGEL   |
| 31604004045 | MULTI FOR HER SOFTGEL          |
| 31604004046 | MULTI FOR HER 50 PLUS SOFTGEL  |
| 31604004373 | VITAMIN D3 250 MCG SOFTGEL     |
| 31604042546 | BIOTIN 2,500 MCG SOFTGEL       |
| 31722093947 | GLYCERIN 99.7% LIQUID          |
| 31919000706 | FIFTY50 GLUCOSE 4 GM TABLET    |
| 33261014230 | MAPAP 325 MG TABLET            |
| 33674015836 | VITAMIN D3 MAX 125 MCG SOFTGEL |
| 35046000049 | MILLTRIUM SENIOR MULTIVIT TAB  |
| 35046000120 | VITAMIN B-2 50 MG TABLET       |
| 35046000131 | VITAMIN B COMPLEX TABLET       |
| 35046000154 | CALCIUM CITRATE-VIT D3 TABLET  |
| 35046000155 | CALCIUM CITRATE 200 MG TABLET  |
| 35046000431 | CO Q-10 50 MG CAPSULE          |
| 35046000432 | CO Q-10 100 MG CAPSULE         |
| 35046000433 | CO Q-10 200 MG CAPSULE         |
| 35046000905 | PROBIOTIC & ACIDOPHILUS CAP    |
| 35515090121 | QC ANTACID 500 MG CHEW TABLET  |
| 35515090122 | QC ANTACID-ANTIGAS SUSPENSION  |
| 35515090123 | QC ANTACID SUSPENSION          |
| 35515090125 | QC MAGNESIUM CITRATE SOLUTION  |
| 35515090380 | QC READY TO USE ENEMA          |
| 35515090431 | QC ASPIRIN 325 MG TABLET       |
| 35515090856 | QC PAIN RELIEF 325 MG TABLET   |
| 35515091122 | QC CALCIUM ANTACID 1,000 MG TB |
| 35515094560 | QC GLYCERIN 2 GM ADULT SUPPOS  |
| 35515094613 | QC HEADACHE RELIEF TABLET      |
| 35515095360 | QC ASPIRIN EC 81 MG TABLET     |
| 35515095461 | QC NON-ASPIRIN PM CAPLET       |
| 35515095496 | QC CASTOR OIL                  |
| 35515095517 | QC MUCUS RELIEF 400 MG CAPLET  |
| 35515095563 | QC MILK OF MAGNESIA SUSPENSION |
| 35515095572 | QC MUCUS RELIEF DM TABLET      |
| 35515095609 | QC NON-ASPIRIN 500 MG GELCAP   |
| 35515095735 | QC NON-ASPIRIN 500 MG CAPLET   |
| 35515095766 | QC GAS RELIEF 125 MG TAB CHEW  |
| 35515095771 | QC NON-ASPIRIN PAIN RELIEF TB  |

| NDC         | Name                           |
|-------------|--------------------------------|
| 35515095981 | QC NATURA-LAX 17 GM POWDER     |
| 35515096524 | QC CHILD PAIN RLF 160 MG/5 ML  |
| 35515096943 | QC UNIFINE PENTIPS 4MM 32G     |
| 35515097004 | QC READY TO USE ENEMA          |
| 35515097033 | QC ITCH STOPPING 2% GEL        |
| 35515097457 | QC NAPROXEN SOD 220 MG TABLET  |
| 35515097536 | QC SORE THROAT 1.4% SPRAY      |
| 35515098076 | QC IBUPROFEN 200 MG CAPLET     |
| 35515098077 | QC IBUPROFEN 200 MG TABLET     |
| 35515098112 | QC TUSSIN DM LIQUID            |
| 35515098529 | QC CHILD PAIN RLF 160 MG/5 ML  |
| 35515098642 | QC VITAMIN D3 25 MCG TABLET    |
| 35515098760 | QC IBUPROFEN 200 MG TABLET     |
| 35515099077 | QC CLOTRIMAZOLE 1% VAG CREAM   |
| 35515099198 | QC ANTI-ITCH 1% CREAM          |
| 35515099333 | QC ASPIRIN 81 MG CHEWABLE TAB  |
| 35515099529 | QC ALLERGY RELIEF 50 MCG SPRAY |
| 35515099635 | QC ESOMEPRAZOLE MAG DR 20 MG   |
| 35515099718 | QC ANTI-DIARRHEAL 2 MG SOFTGEL |
| 35515099721 | QC NON-ASPIRIN 500 MG CAPLET   |
| 35515099921 | QC ANTACID-ANTIGAS MAX STR     |
| 35573045308 | BENZOYL PEROXIDE 5% WASH       |
| 36652012619 | STRESSTABS ENERGY TABLET       |
| 36765042001 | MAG-TAB SR 84 MG CAPLET        |
| 36765042019 | MAG-TAB SR 84 MG CAPLET        |
| 36800004662 | PAIN RELIEF 500 MG GELCAP      |
| 36800005452 | 12-HR DECONGEST 120 MG CAPLET  |
| 36800008512 | VEGETABLE LAX-STOOL SOFTNR TAB |
| 36800009423 | NASAL DECONGESTANT PE 10 MG TB |
| 36800014165 | ACID REDUCER 10 MG TABLET      |
| 36800017465 | WOMEN'S LAXATIVE 5 MG TABLET   |
| 36800017662 | ALL DAY ALLERGY-D TABLET       |
| 36800019402 | ACID REDUCER 20 MG TABLET      |
| 36800030026 | TUSSIN COUGH LIQUID            |
| 36800030601 | CLEARLAX POWDER                |
| 36800030602 | CLEARLAX POWDER                |
| 36800035926 | TUSSIN DM LIQUID               |
| 36800037462 | MIGRAINE FORMULA CAPLET        |
| 36800041926 | CHILD MUCUS RELIEF COUGH LIQ   |
| 36800042654 | TIOCONAZOLE 1 6.5% OINTMENT    |
| 36800043262 | NASAL DECONGESTANT 30 MG TAB   |
| 36800043771 | PAIN RELIEF PM 25-500 MG CPLT  |
| 36800044164 | SLEEP AID 25 MG TABLET         |
| 36800047775 | FIBER LAXATIVE 625 MG CAPLET   |
| 36800048462 | PAIN RELIEF 500 MG CAPLET      |

| NDC         | Name                           |
|-------------|--------------------------------|
| 36800048490 | PAIN RELIEF 500 MG CAPLET      |
| 36800055221 | COUGH DM ER 30 MG/5 ML SUSP    |
| 36800064810 | NASAL FOUR 1% NASAL SPRAY      |
| 36800074462 | ALL DAY ALLERGY-D 5-120 MG TAB |
| 36800090002 | PAIN RELIEF 325 MG TABLET      |
| 37000002305 | METAMUCIL POWDER               |
| 37000014343 | ALIGN 4 MG CAPSULE             |
| 37000040511 | METAMUCIL CAPSULE              |
| 37000089373 | METABIOTIC 6 MG CAPSULE        |
| 37000096913 | META APPETITE CONTROL POWDER   |
| 37000096915 | META APPETITE CONTROL POWDER   |
| 37205021226 | TUSSIN-CF SYRUP                |
| 37205097275 | GLUCOSAMINE-CHONDROITIN-MSM TB |
| 37864000021 | DOCUSATE SODIUM 100 MG TABLET  |
| 37864000034 | SENNA PLUS TABLET              |
| 37864000036 | CALCIUM 250-D TABLET           |
| 37864000037 | OYSTER SHELL+D 250 MG TABLET   |
| 37864000040 | CALCIUM 500-VIT D3 400 CHEW TB |
| 37864000043 | CERTA PLUS TABLET              |
| 37864000046 | DAILY VITAMIN + IRON TABLET    |
| 37864000047 | DAILY VITAMIN FORMULA TABLET   |
| 37864000052 | THERA-M CAPLET                 |
| 37864071201 | CHILD'S CHEWABLE MULTIVIT TAB  |
| 37864072001 | VITAMIN B COMPLEX TABLET       |
| 37864073406 | CALCIUM CITRATE - VIT D3 TAB   |
| 37864074301 | MULTI-VITAMIN DAILY TABLET     |
| 37864082699 | OYSTER SHELL-D 250 MG TABLET   |
| 37864087006 | SIMETHICONE 125 MG TAB CHEW    |
| 37864099101 | ZINC SULFATE 220 MG CAPSULE    |
| 37864099210 | CHILD'S CHEW MULTIVIT W/IRON   |
| 37864099310 | DAILY VITAMIN FORMULA-IRON TAB |
| 38396000008 | PREFERRED PLUS GLUCOSE TAB CHW |
| 38396054157 | DRUG MART GLUCOSE 4 GM TAB CHW |
| 38396054601 | PUB GLUCOSE 4 GRAM TABLET CHEW |
| 38396054675 | CVS GLUCOSE 4 GRAM TABLET CHEW |
| 38396055018 | KROGER GLUCOSE 40% GEL         |
| 38396055025 | VALUE PLUS GLUCOSE 40% GEL     |
| 38396055070 | LONGS GLUCOSE 4 GRAM TAB CHEW  |
| 38396055075 | CVS GLUCOSE 40% GEL            |
| 38396056008 | LEADER QUICK DISSOLVE GLUC TAB |
| 38396056012 | MS QUICK DISSOLVE GLUCOSE TAB  |
| 38396056063 | DEX4 QUICK DISSOLVE TAB CHEW   |
| 38396056064 | GNP QUICK DISSOLVE GLUCOSE TAB |
| 38396090218 | KRO GLUCOSE 4 GRAM TABLET CHEW |
| 38396090240 | EQL GLUCOSE 4 GRAM TABLET CHEW |

| NDC         | Name                           |
|-------------|--------------------------------|
| 38396090302 | RELION GLUCOSE 4 GRAM TAB CHEW |
| 38396090591 | UP&UP GLUCOSE 4 GRAM TAB CHEW  |
| 38396090902 | RELION GLUCOSE LIQUID          |
| 38396092392 | GS GLUCOSE LIQUID SHOT         |
| 38396092792 | GS GLUCOSE 15 GRAM GEL PACKET  |
| 38485014001 | ALOPHEN PILLS                  |
| 38485098018 | AQUA CARE 10% LOTION           |
| 38485098035 | AQUA CARE 10% CREAM            |
| 39328001030 | SOLUVITA-E 22.5 MG/ML DROP     |
| 39328002008 | SENNA 8.8 MG/5 ML SYRUP        |
| 39328005750 | CHILDREN'S IRON 15 MG/ML DROPS |
| 39328006250 | HYSEPT 0.50% SOLUTION          |
| 39328006325 | HYSEPT 0.25% SOLUTION          |
| 39328010610 | PRENATAL VITAMIN PLUS LOW IRON |
| 39328010710 | PHOSPHO-TRIN 250 NEUTRAL TAB   |
| 39328035760 | CALCIDOL DROPS                 |
| 39328055750 | FERROUS SULF 15 MG IRON/ML DRP |
| 39423000050 | FLORAJEN DIGEST 15 B CELL CAP  |
| 39423088048 | FLORAJEN KIDS 6 B CELL CAPSULE |
| 39892083001 | MEDICHOICE TRIPLE ANTIBIOTIC   |
| 39977000804 | CLEARASIL DAILY CLEAR 10% CRM  |
| 39977000909 | CLEARASIL ULTRA 10% CREAM      |
| 40093010067 | CALCIUM 600-VIT D3 2,500 SFTGL |
| 40093010083 | ULTIMATE PROBIOTIC-10 25 BILLN |
| 40093010107 | VITAMIN D3 125 MCG SOFTGEL     |
| 40093010164 | MELATONIN 5 MG FAST DISSOLVE   |
| 40093010166 | ADVANCED PROBIOTIC-14 3B CFU   |
| 40093010168 | VIT C-ROSE HIPS 500 MG CHEW TB |
| 40093010175 | B-COMPLEX PLUS VITAMIN C CPLT  |
| 40093010181 | VIT C-ROSE HIP 1,000 MG CAPLET |
| 40093010197 | MELATONIN 3 MG FAST DISSOLVE   |
| 40093010230 | VITAMIN D3 25 MCG (1,000 UNIT) |
| 40093010305 | MELATONIN 5 MG FAST DISSOLVE   |
| 40093010373 | VITAMIN D3 50 MCG SOFTGEL      |
| 40093010532 | VITAMIN D3 125 MCG/0.5 ML DROP |
| 40093010594 | CALCIUM 600 MG-D3 20 MCG CPLT  |
| 40093010606 | VITAMIN E 90 MG SOFTGEL        |
| 40093010609 | MELATONIN 1 MG TABLET          |
| 40093010612 | ABC COMPLETE MEN'S CAPLET      |
| 40093010613 | ABC COMPLETE WOMEN'S CAPLET    |
| 40093010614 | ABC COMPLETE SENIOR MEN'S CPLT |
| 40093010615 | ABC COMPLETE SENIOR WOMEN CPLT |
| 40093010629 | ABC CMPLT SENIOR 50 PLUS CPLT  |
| 40093010630 | ONE DAILY ESSENTIAL TABLET     |
| 40093010659 | ONE DAILY ESSENTIALS TABLET    |

| NDC         | Name                           |
|-------------|--------------------------------|
| 40093011213 | MELATONIN 10 MG/ML LIQUID      |
| 40093011371 | MELATONIN 5 MG GUMMY           |
| 40093011543 | MELATONIN 10 MG SOFTGEL        |
| 40093014004 | ABC COMPLETE ADULT CAPLET      |
| 40565011182 | TINCTURE OF BENZOIN PREP SPRAY |
| 40985021002 | C-500 MG TABLET                |
| 40985021024 | C-500 MG TABLET CHEWABLE       |
| 40985021225 | C-1000 ER CAPLET               |
| 40985021302 | E-200 UNIT SOFTGEL             |
| 40985021339 | ACIDOPHILUS 175 MG CAPSULE     |
| 40985021341 | CO Q-10 30 MG CAPSULE          |
| 40985021434 | HAIR, SKIN AND NAILS TABLET    |
| 40985022294 | VITAMIN C 250 MG TABLET        |
| 40985022309 | B-12 500 MCG TABLET            |
| 40985022331 | STRESS B WITH ZINC TABLET      |
| 40985022368 | THERAPEUTIC-M TABLET           |
| 40985022380 | SENTRY TABLET                  |
| 40985022383 | C-1,000 MG WITH ROSE HIPS CPLT |
| 40985022390 | SENTRY SENIOR TABLET           |
| 40985022433 | C-1,000 MG TABLET              |
| 40985022658 | MEGA MULTI FOR MEN TABLET      |
| 40985022661 | VITAMIN D-400 TABLET           |
| 40985022668 | B-COMPLEX WITH C TABLET        |
| 40985022690 | IRON 27 MG TABLET              |
| 40985022703 | SENTRY SENIOR MULTIVITAMIN TAB |
| 40985022849 | NIACIN ER 250 MG TABLET        |
| 40985022873 | FISH OIL EC 1,000 MG SOFTGEL   |
| 40985025073 | VITAMIN D2 50 MCG (2,000 UNIT) |
| 40985027024 | PSYLLIUM FIBER CAPSULE         |
| 40985027072 | MGO-400 TABLET                 |
| 40985027112 | B-12 2,500 MCG TABLET SL       |
| 40985027116 | BIOTIN 5,000 MCG CAPSULE       |
| 40985027175 | PRENATAL + DHA COMBO PACK      |
| 40985027304 | ONE DAILY MAXIMUM TABLET       |
| 40985027305 | ONE DAILY MEN'S HEALTH TABLET  |
| 40985027308 | ONE DAILY WOMEN'S MULTIVITAMIN |
| 40985027309 | ONE DAILY WOMEN 50 PLUS TAB    |
| 40985027384 | PRENATAL DHA 200 MG SOFTGEL    |
| 40985027434 | CO Q-10 100 MG CAPSULE         |
| 40985027452 | HEALTHY EYES TABLET            |
| 40985027492 | CALCIUM CITRATE-VIT D3 CAPLET  |
| 40985027498 | CALCIUM 600-D3 PLUS CAPLET     |
| 40985027503 | MELATONIN 10 MG TABLET SL      |
| 40985027504 | VITAMIN D3 10,000 UNIT TABLET  |
| 40985027505 | ADVANCED PROBIOTIC CAPSULE     |

| NDC         | Name                           |
|-------------|--------------------------------|
| 40985027516 | CALCIUM 500 MG-VIT D3 5 MCG TB |
| 40985027519 | CALCIUM 500-VIT D3 600 TABLET  |
| 40985027522 | CALCIUM 500 MG-VIT D3 600 UNIT |
| 40985027529 | CALCIUM 600-D3 20MCG(800 UNIT) |
| 40985027770 | VITAJoy MELATONIN 2.5 MG GUMMY |
| 40985027772 | HEALTHY EYES SUPERVISION2 SFGL |
| 40985027791 | VITAJoy DAILY C 125 MG GUMMIES |
| 40985028028 | MELATONIN ER 10 MG TABLET      |
| 41100001509 | AFRIN NO DRIP SINUS PUMP MIST  |
| 41100001511 | AFRIN NO DRIP PUMP MIST        |
| 41100007296 | CORRECTOL 5 MG TABLET          |
| 41100008016 | CLARITIN 10 MG TABLET          |
| 41100008035 | CLARITIN 5 MG/5 ML SYRUP       |
| 41100056800 | MIRALAX POWDER                 |
| 41100057862 | AFRIN NO DRIP 0.05% PUMP MIST  |
| 41100057909 | CHILD CLARITIN 5 MG/5 ML SOLN  |
| 41100059666 | CHILDRENS AFRIN NASAL PMP MIST |
| 41100059667 | CHILD AFRIN NO DRIP 0.05% MIST |
| 41100080673 | ZEGERID OTC 20-1,100 MG CAP    |
| 41100080743 | CORICIDIN HBP CHEST CONG-COUGH |
| 41100080964 | CLARITIN 10 MG TABLET          |
| 41100081100 | CHILD CLARITIN 5 MG/5 ML SOLN  |
| 41100081117 | AFRIN 0.05% NASAL SPRAY        |
| 41100081121 | AFRIN ORIGINAL 0.05% PUMP MIST |
| 41100081122 | A AND D OINTMENT               |
| 41100081123 | AFRIN 0.05% NASAL SPRAY        |
| 41100082071 | MIRALAX POWDER                 |
| 41163000102 | EQL HEARTBURN PREVEN 20 MG TAB |
| 41163002026 | EQL DIAPER RASH 40% OINTMENT   |
| 41163002309 | EQL FLUTICASONE PROP 50 MCG SP |
| 41163003254 | EQL TIOCONAZOLE-1 6.5% OINT    |
| 41163003606 | EQL MUCUS RLF COLD-FLU-THR LIQ |
| 41163004064 | EQL FIRST AID ANTIBIOTIC-PAIN  |
| 41163005460 | EQL 12-HR DECONGES 120 MG CPLT |
| 41163006110 | EQL 12HR NASAL SPRAY 0.05%     |
| 41163006505 | EQL ANTACID MAX STRENGTH LIQ   |
| 41163007826 | EQL CASTOR OIL                 |
| 41163008701 | EQL ARTHRITIS PAIN 1% GEL      |
| 41163009609 | EQL INFT GAS RLF 20 MG/0.3 ML  |
| 41163009930 | EQL CLEAR ANTI-ITCH LOTION     |
| 41163011350 | EQL CHEST CONGEST 400 MG CPLT  |
| 41163011450 | EQL CHEST CONGEST RLF DM CPLT  |
| 41163011603 | EQL IBUPROFEN 200 MG TABLET    |
| 41163011701 | EQL LANSOPRAZOLE DR 15 MG CAP  |
| 41163012249 | EQL STOMACH RLF 262 MG CHEW TB |

| NDC         | Name                           |
|-------------|--------------------------------|
| 41163012422 | EQL ANTACID EX-STR 750 MG CHEW |
| 41163013117 | EQL ANTACID 500 MG CHEW TABLET |
| 41163014794 | EQL FIBER LAXATIVE 625 MG CPLT |
| 41163015908 | EQL HEADACHE RELIEF TABLET     |
| 41163017168 | EQL ANTACID ULTRA 1,000MG CHEW |
| 41163018101 | EQL SENNA LAXATIVE 8.6 MG TAB  |
| 41163018501 | EQL IBUPROFEN 200 MG SOFTGEL   |
| 41163018816 | EQL HEMORRHOIDAL OINTMENT      |
| 41163019201 | EQL ACETAMINOPHEN 500 MG TAB   |
| 41163019408 | EQL ALLERGY 4 MG TABLET        |
| 41163019708 | EQL ALLERGY (CETRZN) 10 MG TAB |
| 41163020302 | EQL ARTHRIT PAIN RLF ER 650 MG |
| 41163020958 | EQL FIRST AID ANTIBIOTIC OINT  |
| 41163022850 | EQL ACETAMINOPHEN PM GELTAB    |
| 41163023106 | EQL VITAMIN C 1,000 MG TABLET  |
| 41163023117 | EQL VITAMIN E 180 MG SOFTGEL   |
| 41163023154 | EQL VITAMIN B-12 500 MCG TAB   |
| 41163023229 | EQL PEDIATRIC ELECTROLYTE SOLN |
| 41163023330 | EQL SALINE 0.65% NASAL SPRAY   |
| 41163023382 | EQL IBUPROFEN 200 MG CAPLET    |
| 41163023801 | EQL STOOL SOFTENER 100 MG SFGL |
| 41163024429 | EQL HEARTBURN PREVENTION TAB   |
| 41163024520 | EQL SORE THROAT 1.4% SPRAY     |
| 41163025145 | EQL FIRST AID ANTIBIOTIC OINT  |
| 41163025590 | EQL SMOOTH TEXTURE FIBER POWDR |
| 41163025601 | EQL CHLD ACETAMINOPHN 160 MG/5 |
| 41163025606 | EQL ASPIRIN 81 MG CHEWABLE TAB |
| 41163025617 | EQL ASPIRIN EC 325 MG TABLET   |
| 41163025635 | EQL SLEEP AID 25 MG TABLET     |
| 41163025650 | EQL MICONAZOLE 7 CREAM         |
| 41163025695 | EQL STOOL SOFTENER-STIM LAX TB |
| 41163026109 | EQL THERAPEUTIC MOISTURIZ CRM  |
| 41163026334 | EQL ALCOHOL 70% SWABS          |
| 41163026605 | EQL B COMPLEX 50 TABLET        |
| 41163026606 | EQL VITAMIN B-6 100 MG TABLET  |
| 41163026627 | EQL OMEGA-3 FISH OIL 1,000 MG  |
| 41163026643 | EQL EYE HEALTH PLUS LUTEIN TAB |
| 41163026673 | EQL CALCIUM 600-VIT D3 800 TAB |
| 41163026678 | EQL CALCIUM CITRATE-VIT D3 CPT |
| 41163029203 | EQL ALLERGY RELIEF 180 MG TAB  |
| 41163030402 | EQL MOTION SICKNESS 25 MG TAB  |
| 41163030601 | EQL CLEARLAX POWDER            |
| 41163030609 | EQL CLEARLAX POWDER            |
| 41163031916 | EQL ANTI-ITCH 1% CREAM         |
| 41163033408 | EQL HEADACHE 250-250-65MG CPLT |

| NDC         | Name                           |
|-------------|--------------------------------|
| 41163034310 | EQL NASAL SPRAY 0.05%          |
| 41163035926 | EQL TUSSIN DM COUGH-CHEST SYR  |
| 41163036385 | EQL ACETAMINOPHEN 500 MG CPLT  |
| 41163037471 | EQL MIGRAINE FORMULA CAPLET    |
| 41163037485 | EQL MIGRAINE FORMULA CAPLET    |
| 41163038421 | EQL COUGH DM ER 30 MG/5 ML SUS |
| 41163040844 | EQL GAS RELIEF 125 MG CHEW TAB |
| 41163042598 | EQL NASAL DECONG PE 10 MG TAB  |
| 41163043267 | EQL NASAL DECONGEST 30 MG TAB  |
| 41163045839 | EQL ALL DAY ALLERGY 10 MG TAB  |
| 41163045876 | EQL ALL DAY ALLERGY 10 MG TAB  |
| 41163046019 | EQL TUSSIN CHEST CONGEST SYRUP |
| 41163046693 | EQL FIBER SUPPLEMENT POWDER    |
| 41163046945 | EQL FISH OIL 1,200 MG SOFTGEL  |
| 41163047133 | EQL SENNA-S TABLET             |
| 41163047251 | EQL LUBRICANT 0.4-0.3% EYE DRP |
| 41163047526 | EQL CHLD ALL DAY ALLER 1 MG/ML |
| 41163047792 | FIBER LAXATIVE 625 MG CAPLET   |
| 41163049000 | EQL VITAMIN B-12 1,000 MCG TAB |
| 41163049017 | EQL OMEGA-3 FISH OIL 1,200 MG  |
| 41163049322 | EQL FISH OIL 1,000 MG SOFTGEL  |
| 41163049408 | EQL CHILD ACETAMINOPHEN 160 MG |
| 41163049521 | EQL DAILY PROBIOTIC CAPSULE    |
| 41163049528 | EQL FIBER THERAPY POWDER       |
| 41163049679 | EQL GENTLE LAXATIVE EC 5 MG TB |
| 41163049699 | EQL ASPIRIN EC 81 MG TABLET    |
| 41163049712 | EQL VITAMIN D3 400 UNIT SFTGL  |
| 41163049713 | EQL VITAMIN D3 2,000 UNIT SFGL |
| 41163049723 | EQL BIOTIN 5,000 MCG SOFTGEL   |
| 41163050001 | EQL ACETAMINOPHEN 500 MG CPLT  |
| 41163050150 | EQL CO Q-10 100 MG SOFTGEL     |
| 41163050151 | EQL CO Q-10 200 MG SOFTGEL     |
| 41163050153 | EQL MAGNESIUM OXIDE 500 MG TAB |
| 41163050266 | EQL MELATONIN 10 MG TABLET     |
| 41163050271 | EQL VITAMIN D3 50 MCG SOFTGEL  |
| 41163050273 | EQL ADULT 50 PLUS MULTIVITAMIN |
| 41163050277 | EQL ONE DAILY MEN'S TABLET     |
| 41163050282 | EQL VITAMIN D3 25 MCG SOFTGEL  |
| 41163050284 | EQL VITAMIN D3 125 MCG SOFTGEL |
| 41163050287 | EQL MELATONIN 2.5 MG GUMMY     |
| 41163050294 | EQL VITAMIN C 500 MG CHEW TAB  |
| 41163050295 | EQL VITAMIN C 500 MG TABLET    |
| 41163051162 | EQL NAPROXEN SOD 220 MG CAPLET |
| 41163051402 | EQL ACETAMINOPHEN 325 MG TAB   |
| 41163051501 | EQL ACETAMINOPHEN PM CAPLET    |

| NDC         | Name                           |
|-------------|--------------------------------|
| 41163051912 | PAIN RELIEF 500 MG GELCAP      |
| 41163052001 | EQL ACETAMINOPHEN 500 MG GELCP |
| 41163052162 | EQL IBUPROFEN JR 100 MG TB CHW |
| 41163053901 | EQL ESOMEPRAZOLE MAG DR 20 MG  |
| 41163056306 | EQL ASPIRIN EC 81 MG TABLET    |
| 41163059901 | EQL MUCUS DM ER 600-30 MG TAB  |
| 41163060462 | EQL IBUPROFEN 200 MG TABLET    |
| 41163061265 | EQL ALLERGY RELIEF 10 MG TAB   |
| 41163062518 | EQL CHOCOLATED LAXATIVE        |
| 41163063326 | EQL CHILD ALLERGY (LORAT) SOLN |
| 41163064771 | EQL IBUPROFEN 200 MG CAPLET    |
| 41163068526 | EQL CHILD IBUPROFEN 100 MG/5ML |
| 41163070126 | EQL TUSSIN MUCUS-CHEST CONGEST |
| 41163070426 | EQL TUSSIN DM 400-20 MG/20 ML  |
| 41163070771 | EQL NAPROXEN SOD 220 MG TABLET |
| 41163072407 | EQL DOCOSANOL 10% CREAM        |
| 41163072801 | EQL NASAL SPRAY 1%             |
| 41163073120 | EQL MUCUS RELIEF ER 600 MG TAB |
| 41163076340 | EQL NIGHT SEVERE COLD-FLU LIQ  |
| 41163078166 | EQL MUCUS DM MAX ER 1200-60 MG |
| 41163081334 | EQL TUSSIN DM 200-20 MG/20 ML  |
| 41163083143 | EQL MINERAL OIL                |
| 41163083534 | EQL EAR WAX REMOVAL 6.5% DROP  |
| 41163088330 | EQL SENNA-S 8.6-50 MG TABLET   |
| 41163088816 | EQL INF ACETAMINOPHEN 160 MG/5 |
| 41167000220 | CORTIZONE-10 1% CREME          |
| 41167000602 | UNISOM 25 MG SLEEPTABS         |
| 41167000607 | UNISOM SLEEP AID 25 MG TABLET  |
| 41167000609 | UNISOM SLEEP AID 25 MG TABLET  |
| 41167001056 | CORTIZONE-10 PLUS 1% CREME     |
| 41167001081 | CORTIZONE-10 1% OVERNIGHT CRM  |
| 41167005050 | GOLD BOND MED PAIN-ITCH 4% CRM |
| 41167005660 | ASPERCREME LIDOCAINE 4% CREAM  |
| 41167005877 | ASPERCREME LIDOCAINE 4% CREAM  |
| 41167016524 | SELSUN BLUE 2-IN-1 1% SHAMPOO  |
| 41167017100 | ICY HOT MAX 4%-1% CREAM        |
| 41167041200 | ALLEGRA ALLERGY 180 MG TABLET  |
| 41167041214 | ALLEGRA ALLERGY 180 MG TABLET  |
| 41167041222 | ALLEGRA ALLERGY 180 MG GELCAP  |
| 41167057302 | ASPERCREME ARTHRITIS 1% GEL    |
| 41167060111 | SELSUN BLUE DEEP CLEAN SHAMPOO |
| 41167060320 | SELSUN BLUE MOIST 1% SHAMPOO   |
| 41167060352 | SELSUN BLUE MOIST 1% SHAMPOO   |
| 41167060611 | SELSUN BLUE 1% SHAMPOO         |
| 41167060616 | SELSUN BLUE 1% SHAMPOO         |

| NDC         | Name                           |
|-------------|--------------------------------|
| 41167061002 | SURFAK 240 MG SOFTGEL          |
| 41167061803 | SELSUN BLUE NATURAL 3% SHAMPOO |
| 41167075142 | CAPZASIN-HP 0.1% CREAM         |
| 41167075146 | CAPZASIN-HP 0.1% CREAM         |
| 41167412604 | ALLEGRA HIVES 180 MG TABLET    |
| 41220003827 | HEB UNIFINE PNTP PLUS 32GX5/32 |
| 41220025474 | HEB INCONTROL ALCOHOL 70% PADS |
| 41220087466 | HEB PEDIATRIC ELECTROLYTE SOLN |
| 41250017653 | MEIJER ALL DAY ALLERGY-D TAB   |
| 41250034040 | ANTACID SUSPENSION             |
| 41250045875 | 24HOUR ALLERGY 10 MG TABLET    |
| 41250047526 | CHILD ALLERGY RELIEF 1 MG/ML   |
| 41250050301 | COUGH SYRUP 100 MG/5 ML        |
| 41250072853 | 12 HOUR ALLERGY-D 5-120 MG TAB |
| 41250079115 | LUBRICANT EYE DROPS            |
| 41260034608 | KRO ACIDOPHILUS 15 MG DR CAP   |
| 41260036977 | KRO PROBIOTIC COLON SUPPT CAP  |
| 41415000373 | PUB ASPIRIN 325 MG TABLET      |
| 41415000976 | PUB ARTIFICIAL TEARS           |
| 41415001573 | PUB CHILD PAIN RLF 160 MG/5 ML |
| 41415001773 | PUB ORIGINAL NASAL SPRAY 0.05% |
| 41415002073 | PUB IBUPROFEN 200 MG TABLET    |
| 41415003578 | PUB ALLERGY RELIEF-D TABLET    |
| 41415003778 | PUB NASAL DECONGEST 30 MG TAB  |
| 41415003873 | PUB PAIN RELIEF PM CAPLET      |
| 41415003878 | PUB NASAL DECONGEST ER 120 MG  |
| 41415003973 | PUB PAIN RELIEF 500 MG CAPLET  |
| 41415004773 | PUB ANTACID 500 MG CHEW TABLET |
| 41415004775 | PUB HYDROCREAM 1%              |
| 41415004975 | PUB TRIPLE ANTIBIOTIC OINTMENT |
| 41415005073 | PUB MILK OF MAGNESIA SUSP      |
| 41415005673 | PUB PAIN RELIEF 500 MG GELTAB  |
| 41415007573 | PUB ALL DAY RLF 220 MG CAPLET  |
| 41415007673 | PUB ALL DAY RELIEF 220 MG TAB  |
| 41415007773 | PUB DOCUSATE SODIUM 100 MG CAP |
| 41415009473 | PUB OXYMETAZOLINE HCL 0.05%    |
| 41415009973 | PUB TUSSIN DM LIQUID           |
| 41415010373 | PUB CHILDREN'S PROFEN IB SUSP  |
| 41415011173 | PUB ASPIRIN 81 MG CHEWABLE TAB |
| 41415011677 | PUB MULTIVITAMIN 50 PLUS TAB   |
| 41415013973 | PUB STOMACH RLF 262 MG CHEW TB |
| 41415014473 | PUB NAPROXEN SOD 220 MG TABLET |
| 41415014977 | PUB FIBER 625 MG CAPLET        |
| 41415015173 | PUB SORE THROAT 1.4% SPRAY     |
| 41415015473 | PUB ACID REDUCER 10 MG TABLET  |

| NDC         | Name                           |
|-------------|--------------------------------|
| 41415017073 | PUB MICONAZOLE3DAY COMBO PACK  |
| 41415017673 | PUB CALCIUM CARB 1,000 MG TAB  |
| 41415018073 | PUB LAXATIVE EC 5 MG TABLET    |
| 41415019773 | PUB NO DRIP 0.05% NASAL SPRAY  |
| 41415019873 | PUB NASAL FOUR 1% NASAL SPRAY  |
| 41415020173 | PUB MIGRAINE 250-250-65 MG CPT |
| 41415021173 | PUB ALLERGY RELIEF 10 MG TAB   |
| 41415021473 | PUB INFANTS' GAS RELIEF DROPS  |
| 41415021873 | PUB TUSSIN 100 MG/5 ML SYRUP   |
| 41415022573 | PUB CHILDREN'S PROFENIB SUSP   |
| 41415023273 | PUB IBUPROFEN JR 100 MG CHEW   |
| 41415023873 | PUB SALINE 0.65% NASAL SPRAY   |
| 41415024273 | PUB NASAL DECONG PE 10 MG TAB  |
| 41415025873 | PUB STOP SMOKING AID 2 MG LOZG |
| 41415025973 | PUB STOP SMOKING AID 4 MG LOZG |
| 41415028473 | PUB FAMOTIDINE 20 MG TABLET    |
| 41415028673 | PUB ANTACID-ANTI GAS SUSP      |
| 41415028873 | PUB ARTHRITIS PAIN ER 650 MG   |
| 41415029173 | PUB PAIN RELIEF 500 MG TABLET  |
| 41415030873 | PUB PAIN RELIEF PM GELTAB      |
| 41415032873 | PUB CHILDREN'S ALLERGY 1 MG/ML |
| 41415038773 | PUB ALLERGY RELIEF 180 MG TAB  |
| 42037000128 | TAGAMET HB 200 MG TABLET       |
| 42037010312 | ECOTRIN EC 325 MG TABLET       |
| 42037010313 | ECOTRIN EC 81 MG TABLET        |
| 42037010478 | DEBROX 6.5% EAR DROPS          |
| 42192032130 | PNV-DHA SOFTGEL                |
| 42192033230 | PNV-OMEGA SOFTGEL              |
| 42195021010 | PHENYLEPHRINE-PYRILAMINE 10-25 |
| 42195028110 | GUAIFENESIN-PSE 375-60 MG TAB  |
| 42213016286 | ULTRA TUSS SAFE SYRUP          |
| 42423027001 | EASY TOUCH ALCOHOL 70% PADS    |
| 42507031026 | HV TUSSIN MUCUS-CONG 200 MG/10 |
| 42507039640 | HV MILK OF MAGNESIA SUSPENSION |
| 42546018030 | BAL-CARE DHA COMBO PACK        |
| 42546051730 | PR NATAL 400 EC COMBO PACK     |
| 42546051830 | PR NATAL 430 EC COMBO PACK     |
| 42546081130 | PR NATAL 400 COMBO PACK        |
| 42546081230 | PR NATAL 430 COMBO PACK        |
| 42582041110 | POLYSACCHARIDE IRON 150 MG CAP |
| 42702016810 | ZENOPTIQ EYELID-EYELASH SPRAY  |
| 42937070510 | PRENATAL PLUS IRON TABLET      |
| 42937070710 | PRENATAL 19 CHEWABLE TABLET    |
| 43063090920 | NAPROXEN SODIUM 220 MG TABLET  |
| 43063095801 | DOCUSATE SODIUM-SENNOSIDES TAB |

| NDC         | Name                           |
|-------------|--------------------------------|
| 43072000518 | CALCIUM 600 WITH VIT D CHEW TB |
| 43292022328 | NIACIN TR 500 MG TABLET        |
| 43292027701 | MUCOSA DM 400-20 MG TABLET     |
| 43292055520 | ONE DAILY WITH MINERALS TABLET |
| 43292055540 | B COMPLEX TABLET               |
| 43292055554 | CENTRAVITES TABLET             |
| 43292055557 | ONE DAILY COMPLETE TABLET      |
| 43292055576 | ONE DAILY WITH IRON-CALCIUM TB |
| 43292055604 | DSS 250 MG SOFTGEL             |
| 43292055606 | CALCIUM CITRATE 250 MG CAPLET  |
| 43292055607 | CALCIUM 500 MG CHEWABLE TABLET |
| 43292055628 | CHLORHIST 4 MG TABLET          |
| 43292055703 | NIACIN TR 250 MG TABLET        |
| 43292055738 | MAGNESIUM OXIDE 250 MG TABLET  |
| 43292055740 | NIACIN 250 MG TABLET           |
| 43292055749 | CENTRAVITES 50 PLUS TABLET     |
| 43292055794 | ZINC LOZENGE-VITAMIN A AND C   |
| 43292055850 | CO Q-10 10 MG CAPSULE          |
| 43292056108 | COENZYME Q10 60 MG CAPSULE     |
| 43292056291 | VITAMIN E 1,000 UNIT SOFTGEL   |
| 43292056336 | VITAMIN D3 50,000 UNIT CAPSULE |
| 43292056340 | EXTRAPRIN 250-250-65 MG CAPLET |
| 43292056342 | COENZYME Q-10 50 MG SOFTGEL    |
| 43292056400 | COENZYME Q-10 30 MG SOFTGEL    |
| 43292056401 | COENZYME Q-10 100 MG SOFTGEL   |
| 43292056428 | VITAMIN D3 5,000 UNIT CAPSULE  |
| 43292056437 | MUCOSA 400 MG TABLET           |
| 43292056442 | FIBER LAXATIVE 625 MG TABLET   |
| 43353038665 | FOLIC ACID 1,000 MCG TABLET    |
| 43353067353 | SLO-NIACIN 500 MG TABLET       |
| 43386031208 | GAVILAX POWDER                 |
| 43538043009 | KERADAN CREAM                  |
| 43598044556 | NICOTINE TRANSDERMAL SYSTEM    |
| 43820050200 | ULTILET ALCOHOL STERL SWAB     |
| 43900019660 | ARGINAID EXTRA LIQUID          |
| 43900097550 | NUTRISOURCE FIBER POWDER       |
| 43900097647 | NUTRISOURCE FIBER POWDER PACK  |
| 44229041086 | FILTERS REPLACEMENT            |
| 44229078906 | PARI SMARTMASK BABY WITH ELBOW |
| 44677010020 | LANOLIN CREAM                  |
| 44946010180 | OMEGA-3 1,050 MG SOFTGEL       |
| 44946010182 | OMEGA-3 2100 SOFTGEL           |
| 44946100903 | LUDENT FLUORIDE 0.5 MG TB CHEW |
| 44946101003 | LUDENT FLUORIDE 1 MG TAB CHEW  |
| 44946103208 | SODIUM FLUORIDE 0.5 MG/ML DROP |

| NDC         | Name                           |
|-------------|--------------------------------|
| 44946103508 | TRI-VIT-FLUOR 0.25 MG/ML DROP  |
| 44946103608 | TRI-VIT-FLUOR 0.5 MG/ML DROP   |
| 44946104105 | PRENATA CHEWABLE TABLET        |
| 44946104501 | PNV PRENATAL PLUS MULTIVIT TAB |
| 44946200106 | PRENATAL PLUS-DHA COMBO PACK   |
| 44946201608 | MULTIVIT-FLUOR-IRON 0.25 MG/ML |
| 44946201708 | MULTIVIT-FLUOR 0.25 MG/ML DROP |
| 44946201808 | MULTIVIT-FLUOR 0.5 MG/ML DROP  |
| 45737020916 | BIOCOTRON LIQUID               |
| 45737040360 | BIOCAL SOFTGEL                 |
| 45802010196 | BENZOYL PEROXIDE 2.5% GEL      |
| 45802010901 | TRIAMCINOLONE 55 MCG NASAL SPR |
| 45802012246 | LORATADINE-D 12 HOUR TABLET    |
| 45802021601 | BENZOYL PEROXIDE 5% GEL        |
| 45802030801 | BENZOYL PEROXIDE 10% GEL       |
| 45802035758 | SALINE MIST 0.65% NOSE SPRY    |
| 45802035803 | ITCH RELIEF 2%-0.1% CREAM      |
| 45802043321 | DEXTROMETHORPHAN ER 30 MG/5 ML |
| 45802052526 | AMMONIUM LACTATE 12% LOTION    |
| 45802073000 | ACETAMINOPHEN 650 MG SUPPOS    |
| 45802073200 | ACETAMINOPHEN 120 MG SUPPOS    |
| 45802097426 | CETIRIZINE HCL 1 MG/ML SOLN    |
| 45861020160 | DOCUPRENE 100 MG TABLET        |
| 46017002608 | CONTAC COLD-FLU NIGHT LIQUID   |
| 46017009530 | FEOSOL BIFERA 28 MG CAPLET     |
| 46036000085 | GS IBUPROFEN 200 MG SOFTGEL    |
| 46036000168 | GS MINERAL OIL                 |
| 46122001452 | CLEARLAX POWDER PACKET         |
| 46122004378 | ALCOHOL SWAB                   |
| 46122005762 | TUSSIN 400 MG TABLET           |
| 46122005862 | TUSSIN DM 400-20 MG TABLET     |
| 46122006271 | 8 HOUR ACETAMINOPHEN ER 650 MG |
| 46122007606 | GNP CALCIUM 500-VIT D3 600 TAB |
| 46122008365 | IRON 45 MG TABLET              |
| 46122008972 | CHILDREN'S CHEWABLES           |
| 46122009372 | HEALTHY EYES SUPERVISION SFTGL |
| 46122009575 | MEGA MULTI FOR WOMEN TAB       |
| 46122009678 | ONE DAILY TABLET               |
| 46122010006 | NATURAL FIBER LAXATIVE CAPSULE |
| 46122010126 | CHILD ALL DAY ALLERGY 1 MG/ML  |
| 46122010846 | LICE TREATMENT 1% CREME RINSE  |
| 46122011846 | ZINC OXIDE 20% OINTMENT        |
| 46122011978 | ONE DAILY PLUS IRON TABLET     |
| 46122012002 | ONE DAILY ESSENTIAL TABLET     |
| 46122012271 | ONE DAILY MEN'S 50+ TABLET     |

| NDC         | Name                           |
|-------------|--------------------------------|
| 46122012378 | ONE DAILY WOMEN'S HEALTH TAB   |
| 46122012471 | ONE DAILY WOMEN'S 50+ TABLET   |
| 46122013248 | BEST FIBER POWDER              |
| 46122013634 | NIGHT TIME COLD-FLU LIQUID     |
| 46122013734 | ANTISEPTIC SKIN CLEANSER 4%    |
| 46122013743 | GNP ANTISEPTIC SKIN CLEANSR 4% |
| 46122014903 | NASAL SPRAY 1%                 |
| 46122016510 | NASAL SPRAY ORIGINAL 0.05%     |
| 46122016752 | ALLERGY-CONGES RELF ER TABLET  |
| 46122024562 | NIGHT TIME COLD-FLU SOFTGEL    |
| 46122024905 | EAR DROPS 6.5%                 |
| 46122028460 | GNP NICOTINE 2 MG CHEWING GUM  |
| 46122029626 | NAUSEA RELIEF LIQUID           |
| 46122029926 | GNP TUSSIN MUCUS-CON 200 MG/10 |
| 46122033443 | HYDROGEN PEROXIDE 3% SOLUTION  |
| 46122033765 | URINARY PAIN RELIEF 95 MG TAB  |
| 46122035626 | ALLERGY 50 MG/20 ML SOLUTION   |
| 46122038576 | 24H NASAL ALLERGY 55 MCG SPRAY |
| 46122039465 | ACID REDUCER 10 MG TABLET      |
| 46122040662 | ALLERGY MULTI-SYMPTOM CAPLET   |
| 46122040962 | GNP COLD HEAD CONGEST NGHT CPT |
| 46122041062 | GNP COLD MAX DAYTIME CAPLET    |
| 46122041262 | GNP SINUS SEVERE CAPLET        |
| 46122041562 | GNP COLD HEAD CONGST SEVR CPLT |
| 46122041660 | MUCUS ER 600 MG TABLET         |
| 46122041862 | GNP COLD-FLU SEVERE CAPLET     |
| 46122042462 | GNP CHILD PAIN RELIEF 160 MG   |
| 46122042963 | WOMEN'S GENTLE LAX EC 5 MG TAB |
| 46122043078 | ACETAMINOPHEN 325 MG GELCAP    |
| 46122043140 | ANTACID ANTI-GAS LIQUID        |
| 46122043340 | ANTACID LIQUID                 |
| 46122043440 | ANTACID-ANTIGAS SUSPENSION     |
| 46122044062 | ALLERGY RELIEF 25 MG CAPSULE   |
| 46122044162 | GNP ALLERGY RELIEF 25 MG TAB   |
| 46122044362 | GNP SINUS PRESSURE-PAIN CAPLET |
| 46122044427 | GNP MICONAZORB AF 2% POWDER    |
| 46122044958 | GNP NICOTINE 4 MG CHEWING GUM  |
| 46122045671 | GNP PAIN RLF PM 250-250-38 MG  |
| 46122046222 | GNP ALLERGY RELIEF 180 MG TAB  |
| 46122052963 | GNP GENTLE LAXATIVE EC 5 MG TB |
| 46122053105 | GNP ALLERGY RELIEF 5 MG TABLET |
| 46122053460 | NAPROXEN SODIUM 220 MG CAPSULE |
| 46122053551 | MOTION SICKNESS RLF 25 MG TAB  |
| 46122053653 | MOTION SICKNESS 50 MG TABLET   |
| 46122053952 | LORATADINE 10 MG ODT           |

| NDC         | Name                           |
|-------------|--------------------------------|
| 46122053965 | GNP LORATADINE 10 MG ODT       |
| 46122054134 | GNP TUSSIN DM MAX LIQUID       |
| 46122054703 | INFANT GAS RLF 20 MG/0.3 ML    |
| 46122054890 | GNP IBUPROFEN 200 MG TABLET    |
| 46122055153 | URINARY PAIN RELIEF 97.5 MG TB |
| 46122055605 | EAR WAX REMOVAL 6.5% KIT       |
| 46122056258 | GNP NAPROXEN SOD 220 MG TABLET |
| 46122056471 | GNP NAPROXEN SOD 220 MG CAPLET |
| 46122056803 | GNP NICOTINE 21 MG/24HR PATCH  |
| 46122057702 | GNP MICONAZOLE 1 COMBO PACK    |
| 46122058055 | GNP IBUPROFEN 200 MG SOFTGEL   |
| 46122058162 | ANTI-DIARRHEAL 2 MG SOFTGEL    |
| 46122059341 | GNP IBUPROFEN 200 MG MINI SFGL |
| 46122059848 | GNP ASPIRIN EC 81 MG TABLET    |
| 46122060851 | GNP GENTLE LAXATIVE 10 MG SUPP |
| 46122061410 | GNP LIDOCAINE HCL 4% CREAM     |
| 46122061762 | GNP IBUPROFEN 100 MG CHEW TAB  |
| 46122061862 | GNP ALLERGY RELIEF 4 MG TABLET |
| 46122062062 | GNP ANTI-DIARRHEAL-GAS CPLT    |
| 46122062572 | GNP SENNA PLUS 8.6-50 MG TAB   |
| 46122062853 | GNP URINARY PAIN RLF 99.5 MG   |
| 46122062962 | GNP 8HR ARTHRIT PAIN ER 650 MG |
| 46122062978 | 8HR ARTHRITIS PAIN ER 650 MG   |
| 46122063078 | GNP 8 HOUR PAIN RELIEF 650 MG  |
| 46122063378 | GNP STOOL SOFTENER 250 MG SFGL |
| 46122063703 | GNP MUCUS DM MAX ER 1200-60 MG |
| 46122064104 | GNP ESOMEPRAZOLE MAG DR 20 MG  |
| 46122064654 | GNP ARTHRITIS PAIN 1% GEL      |
| 46122064705 | GNP NASAL SPRAY 0.05%          |
| 46122065068 | GNP NASAL DECONG PE 10 MG TAB  |
| 46122065162 | GNP SLEEP AID 25 MG CAPLET     |
| 46122065203 | GNP LIDOCAINE ANORECTAL 5% CRM |
| 46122065862 | GNP SINUS-HEADACHE CAPLET      |
| 46122065936 | GNP HAND SOAP 2% CLEANSER      |
| 46122066062 | GNP ALLERGY MULTI-SYMPTOM CPLT |
| 46122066160 | GNP SINUS-HEADACHE DAY-NIGHT   |
| 46122066315 | GNP NICOTINE 2 MG MINI LOZENGE |
| 46122066515 | GNP NICOTINE 4 MG MINI LOZENGE |
| 46122066978 | GNP STOOL SOFTENER-STIM LAX TB |
| 46122067078 | GNP HEADACHE 250-250-65MG CPLT |
| 46122067127 | GNP OLOPATADINE 0.2% EYE DROP  |
| 46122067264 | GNP OLOPATADINE 0.1% EYE DROPS |
| 46122067426 | GNP CHILD ALLERGY 12.5 MG/5 ML |
| 46122067646 | GNP ZINC OXIDE 20% OINTMENT    |
| 46122067746 | GNP HEMORRHOIDAL OINTMENT      |

| NDC         | Name                           |
|-------------|--------------------------------|
| 46122068107 | GNP DOCOSANOL 10% CREAM        |
| 46122068374 | GNP MUCUS-ER MAX 1,200 MG TAB  |
| 46122068429 | GNP FLUTICASONE PROP 50 MCG SP |
| 46122068526 | GNP ALLERGY RELIEF 50 MG/20 ML |
| 46122068603 | GNP OMEPRAZOLE MAG DR 20 MG CP |
| 46122068878 | GNP STOOL SOFTENER 240 MG SFGL |
| 46122068903 | GNP NASAL FOUR 1% NASAL SPRAY  |
| 46122069078 | GNP HEADACHE RELIEF CAPLET     |
| 46122069178 | GNP ASPIRIN 325 MG TABLET      |
| 46122069272 | GNP STOOL SOFTENER 100 MG SFGL |
| 46122069572 | GNP NIGHTTIME SLEEP AID 50 MG  |
| 46122069662 | GNP PAIN RELIEF 500 MG GELCAP  |
| 46122069962 | GNP ALLERGY RELIEF 25 MG SFGL  |
| 46122070278 | GNP SENNA LAX 8.6 MG TABLET    |
| 46122070326 | GNP STOMACH RLF 525 MG/30 ML   |
| 46122070426 | GNP TUSSIN DM 200-20 MG/20 ML  |
| 46122070573 | GNP COUGH-COLD HBP TABLET      |
| 46122070762 | GNP PAIN RLF PM 25-500 MG CPLT |
| 46122070841 | GNP IBUPROFEN PM CAPLET        |
| 46122071260 | GNP MUCUS RLF SINUS CONG PAIN  |
| 46122071321 | GNP ARTHRITIS 10% CREAM        |
| 46122072626 | GNP VITAMIN A AND D OINTMENT   |
| 46122072926 | GNP ANTI-NAUSEA LIQUID         |
| 46122073208 | GNP NICOTINE 4 MG LOZENGE      |
| 46122073408 | GNP NICOTINE 2 MG LOZENGE      |
| 46122073565 | GNP ACID REDUCER 10 MG TABLET  |
| 46122073763 | GNP ACID REDUCER 20 MG TABLET  |
| 46122073853 | GNP ANTI-DIARRHEAL 2 MG TABLET |
| 46122074038 | GNP MAGNESIUM CITRATE SOLUTION |
| 46122074404 | GNP LANSOPRAZOLE DR 15 MG CAP  |
| 46122074706 | GNP PINK BISMUTH 525 MG/15 ML  |
| 46122074876 | GNP SORE THROAT 1.4% SPRAY     |
| 46122075051 | GNP MUCUS ER 600 MG TABLET     |
| 46122075237 | GNP DICLOFENAC SODIUM 1% GEL   |
| 46122075429 | GNP SLEEP AID 50 MG/30 ML LIQ  |
| 46122075656 | GNP LUBRICANT 0.5% EYE DROP    |
| 46122075737 | NIGHTTIME LUBRICANT EYE OINT   |
| 46122075929 | GNP LICE KILLING SHAMPOO       |
| 46122076229 | GNP VAPOR STEAM 6.2% LIQUID    |
| 46122076351 | GNP SLEEP AID 25 MG TABLET     |
| 46122076434 | GNP INFANT PAIN-FEVER 160 MG/5 |
| 46122077334 | GNP HYDROGEN PEROXIDE 3% SOLN  |
| 46122077451 | GNP MOTION SICKNESS 25MG CHWTB |
| 46122077958 | GNP FEXOFENADINE HCL 180 MG TB |
| 46122078064 | GNP NAPROXEN SODIUM 220 MG CAP |

| NDC         | Name                           |
|-------------|--------------------------------|
| 46122078815 | GNP NIGHTTIME SLEEP 25 MG TAB  |
| 46287050704 | ABSORBASE OINTMENT             |
| 46287050816 | PETROLATUM BASE OINTMENT       |
| 46500001828 | OFF FAMILYCARE 5% REPELLNT III |
| 46500001835 | OFF FAMILYCARE 7% RPLNT SPRAY  |
| 46500081881 | OFF FAMILYCARE 5% RPLNT II SPR |
| 47469000312 | ALPHA LIPOIC ACID 300 MG CAP   |
| 47469000458 | MELATONIN-VIT B6 TR 3-10 MG TB |
| 47469000511 | MELATONIN-VIT B6 3-10 MG TAB   |
| 47469004472 | ALPHA LIPOIC ACID 600 MG CAP   |
| 47469006076 | MELATONIN 3 MG FAST DISSOLVE   |
| 47469007402 | MELATONIN 1 MG/4 ML LIQ DROP   |
| 47469007405 | MELATONIN 2.5 MG/10 ML LIQUID  |
| 47469007979 | MELATONINMAX 10 MG GUMMY       |
| 47682010013 | I-PRIN 200 MG TABLET           |
| 47682020312 | LORADAMED 10 MG TABLET         |
| 47682021712 | GUAICON DMS LIQUID S-F         |
| 47682021771 | GUAICON DMS LIQUID PACKET      |
| 47682022013 | DIOTAME 262 MG TABLET CHEW     |
| 47682022312 | MEDI-FIRST TRIPLE ANTIBIOTIC   |
| 47682022813 | PAIN-OFF TABLET                |
| 47682023733 | MEDIPROXEN 220 MG TABLET       |
| 47682025303 | AMINOFEN 325 MG TABLET         |
| 47682025314 | ADDAPRIN 200 MG TABLET         |
| 47682028536 | BAN-ACID MAX STR 750 CHEW TAB  |
| 47682041220 | MEDI-FIRST PEP-T-MED TAB CHEW  |
| 47682047915 | MEDI-MECLIZINE 25 MG TABLET    |
| 47682070833 | I-PRIN 200 MG TABLET           |
| 47682080313 | NON-ASPIRIN 325 MG TABLET      |
| 47682080413 | NON-ASPIRIN 500 MG TABLET      |
| 47682080913 | SINUS DECONGESTANT 10 MG TAB   |
| 47713000026 | MICRODOT GLUCOSE 40% GEL       |
| 47781064726 | ERGOCALCIFEROL 200 MCG/ML DROP |
| 48433010601 | CALCIUM ANTACID 500 MG CHW TAB |
| 48985000157 | NICOTINE TRANSDERMAL SYSTEM    |
| 49022008436 | CLOTRIMAZOLE-7 VAGINAL CREAM   |
| 49022013112 | THERAPEUTIC MOISTURIZING CREAM |
| 49022022411 | THERAPEUTIC T+PLUS SHAMPOO     |
| 49022039938 | DANDRUFF 1% SHAMPOO            |
| 49022042695 | MOISTURIZING CREAM             |
| 49022042696 | DRY SKIN TREATMENT             |
| 49022059840 | ACNE TREATMENT 10% GEL         |
| 49022061339 | STUDIO 35 MOIST SKIN CREAM     |
| 49035000525 | EQ STOOL SOFTENER 100 MG SFTGL |
| 49035001709 | EQ LIQUID WART REMOVER 17% LIQ |

| NDC         | Name                           |
|-------------|--------------------------------|
| 49035002272 | EQ ACID REDUCER 200 MG TABLET  |
| 49035002419 | EQ ALLERGY RELIEF 1 MG/ML SOLN |
| 49035002996 | EQ NICOTINE 2 MG CHEWING GUM   |
| 49035003516 | EQ MINERAL OIL                 |
| 49035004226 | EQ CHLD PAIN-FEVER 160 MG/5 ML |
| 49035004860 | EQ ANTACID EX-STR 750 MG CHEW  |
| 49035006108 | EQ CHILD ALLERGY 5 MG/5 ML SOL |
| 49035006716 | EQ TRIPLE ANTIBIOTIC OINTMENT  |
| 49035007021 | EQ MUCUS ER 600 MG TABLET      |
| 49035008412 | EQ STOOL SOFTENER-STIM LAX TAB |
| 49035010146 | EQ ANTACID 500 MG CHEW TABLET  |
| 49035010224 | EQ ANTACID EXTRA STR CHEW TAB  |
| 49035010608 | EQ CHILD ALLERGY RELF 1 MG/ML  |
| 49035011890 | EQ FAMOTIDINE 10 MG TABLET     |
| 49035012116 | EQ IBUPROFEN 200 MG SOFTGEL    |
| 49035012249 | EQ STOMACH RLF 262 MG CHEW TAB |
| 49035012410 | EQ NICOTINE 2 MG LOZENGE       |
| 49035014794 | EQ FIBER THERAPY 625 MG CAPLET |
| 49035015712 | EQ ASPIRIN 325 MG TABLET       |
| 49035016130 | EQ SENNA-S TABLET              |
| 49035017096 | EQ NICOTINE 4 MG CHEWING GUM   |
| 49035018380 | EQ CHILD ALLERGY RELIEF SOLN   |
| 49035018816 | EQ HEMORRHOIDAL OINTMENT       |
| 49035019010 | EQ NICOTINE 4 MG LOZENGE       |
| 49035019401 | EQ NICOTINE 21 MG/24HR PATCH   |
| 49035019412 | EQ CHLORTABS 4 MG TABLET       |
| 49035019478 | EQ ACID REDUCER 20 MG TABLET   |
| 49035019502 | EQ NICOTINE 14 MG/24HR PATCH   |
| 49035019602 | EQ NICOTINE 7 MG/24HR PATCH    |
| 49035019900 | EQ MICONAZOLE 1 COMBO PACK     |
| 49035020001 | EQ ALLERGY RELIEF 50 MCG SPRAY |
| 49035020696 | EQ NICOTINE 2 MG CHEWING GUM   |
| 49035023512 | EQ ACETAMINOPHEN PM CAPLET     |
| 49035026201 | EQ ARTHRITIS PAIN 1% GEL       |
| 49035027408 | EQ ASPIRIN 81 MG CHEWABLE TAB  |
| 49035027608 | EQ CHILD ALLERGY RELF 1 MG/ML  |
| 49035027609 | EQ CHILD CETIRIZINE 1 MG/ML    |
| 49035027808 | EQ PAIN RELIEF 500 MG/15 ML LQ |
| 49035029112 | EQ IBUPROFEN 200 MG TABLET     |
| 49035030410 | EQ ORIGINAL NASAL SPRAY 0.05%  |
| 49035030603 | EQ CLEARLAX POWDER             |
| 49035030882 | EQ PAIN RELIEVER 500 MG CAPLET |
| 49035032712 | EQ GENTLE LAXATIVE DR 5 MG TAB |
| 49035032910 | EQ MAGNESIUM CITRATE SOLUTION  |
| 49035035590 | EQ ASPIRIN 325 MG TABLET       |

| NDC         | Name                           |
|-------------|--------------------------------|
| 49035035740 | EQ ANTACID LIQUID              |
| 49035035926 | EQ TUSSIN DM COUGH-CHEST SYR   |
| 49035036654 | EQ ALLERGY RELIEF 180 MG TAB   |
| 49035036862 | EQ NAPROXEN SOD 220 MG CAPLET  |
| 49035036878 | EQ NAPROXEN SOD 220 MG CAPLET  |
| 49035036964 | EQ HYDROCORTISONE 1% CREAM     |
| 49035037003 | EQ ASPIRIN EC 325 MG TABLET    |
| 49035037730 | EQ SENNA-S TABLET              |
| 49035038038 | EQ MAGNESIUM CITRATE SOLUTION  |
| 49035038421 | EQ COUGH DM ER 30 MG/5 ML SUSP |
| 49035040319 | EQ MOTION SICKNESS 25 MG TAB   |
| 49035040520 | EQ VEGETABLE LAXATIVE 8.6MG TB |
| 49035041101 | EQ LANSOPRAZOLE DR 15 MG CAP   |
| 49035041412 | EQ ASPIRIN EC 81 MG TABLET     |
| 49035043015 | EQ EYE ALLERGY RELIEF DROPS    |
| 49035043308 | EQ HEADACHE 250-250-65 MG CPLT |
| 49035045866 | EQ ALLERGY RELIEF 10 MG TABLET |
| 49035046768 | EQ ASPIRIN 81 MG CHEWABLE TAB  |
| 49035048462 | EQ ACETAMINOPHEN 500 MG CAPLET |
| 49035049078 | EQ NAPROXEN SOD 220 MG TABLET  |
| 49035049101 | EQ PAIN RELIEVER 325 MG TABLET |
| 49035050535 | EQ FAMOTIDINE 20 MG TABLET     |
| 49035051026 | EQ BACITRACIN ZN 500 UNIT/GM   |
| 49035051314 | EQ DAILY FIBER LAXATIVE POWDER |
| 49035051908 | EQ ACETAMINOPHEN 500 MG GELCAP |
| 49035052012 | EQ ANTI-DIARRHEAL 2 MG SFTGEL  |
| 49035052162 | EQ IBUPROFEN JR STR 100 MG TAB |
| 49035053112 | EQ ACETAMINOPHEN 500 MG TABLET |
| 49035054485 | EQ ARTHRITIS PAIN ER 650 MG    |
| 49035055203 | EQ CHILDREN'S COUGH LIQUID     |
| 49035055631 | EQ ACETAMINOPHEN PM GELCAP     |
| 49035056314 | EQ ASPIRIN EC 81 MG TABLET     |
| 49035057139 | EQ ALLERGY RELIEF 180 MG TAB   |
| 49035059016 | EQ INFANT PAIN-FEVER 160 MG/5  |
| 49035060458 | EQ IBUPROFEN 200 MG TABLET     |
| 49035061246 | EQ ALLERGY (LORAT) 10 MG TAB   |
| 49035061247 | EQ ALLERGY (LORAT) 10 MG TAB   |
| 49035061344 | EQ NICOTINE 4 MG CHEWING GUM   |
| 49035063812 | EQ ANTACID-ANTIGAS MAX STR     |
| 49035064030 | EQ URINARY PAIN RLF 95 MG TAB  |
| 49035064782 | EQ IBUPROFEN 200 MG CAPLET     |
| 49035064810 | EQ NASAL SPRAY 1%              |
| 49035065082 | EQ FAMOTIDINE 20 MG TABLET     |
| 49035065770 | EQ RESTORE PLUS 0.5% EYE DROP  |
| 49035073007 | EQ MICONAZOLE 2% VAGINAL CREAM |

| NDC         | Name                           |
|-------------|--------------------------------|
| 49035073401 | EQ NICOTINE 2 MG MINI LOZENGE  |
| 49035073403 | EQ NICOTINE 2 MG MINI LOZENGE  |
| 49035073927 | EQ LANSOPRAZOLE DR 15 MG CAP   |
| 49035074101 | EQ 8HR ARTHRITIS PAIN ER 650MG |
| 49035079926 | EQ TUSSIN DM MAX LIQUID        |
| 49035080372 | EQ ANTACID ULTRA STR TAB CHEW  |
| 49035082529 | EQ MICONAZOLE 7 CREAM          |
| 49035086201 | EQ EAR WAX REMOVAL AID KIT     |
| 49035086389 | EQ SLEEP AID 25 MG TABLET      |
| 49035089212 | EQ NATURAL LAXATIVE 8.6 MG TAB |
| 49035091048 | EQ GAS RELIEF 125 MG CHEW TAB  |
| 49035091920 | EQ PAIN RELIEVER 500 MG GELCAP |
| 49035093915 | EQ LUBRICANT EYE DROPS         |
| 49035095828 | EQ CHLD COUGH DM ER 30 MG/5 ML |
| 49035096073 | EQ MUCUS DM ER 600-30 MG TAB   |
| 49035096678 | EQ ARTHRITIS PAIN ER 650 MG    |
| 49100040008 | CULTURELLE KIDS PACKET         |
| 49100040024 | CULTURELLE KIDS PURELY 5B PCKT |
| 49100040037 | CULTURELLE KIDS GENTLE-GO PCKT |
| 49100040038 | CULTURELLE PRO-WELL 3-IN-1 CAP |
| 49100040063 | CULTURELLE KIDS PACKET         |
| 49100040093 | CULTURELLE KIDS PRO-FIBER PKT  |
| 49348001134 | SM CALAMINE LOTION             |
| 49348006137 | SM NITE TIME COLD-FLU LIQUID   |
| 49348007644 | SM URINARY PAIN RLF 95 MG TAB  |
| 49348011704 | SM SINUS SEVERE CAPLET         |
| 49348013027 | SM NASAL 0.05% SPRAY           |
| 49348013327 | SM IODINE 2% TINCTURE          |
| 49348014370 | SM CLEARLAX POWDER             |
| 49348015339 | SM ADV ANTACID-ANTIGAS LIQUID  |
| 49348015529 | SM ANTIFUNGAL 1% CREAM         |
| 49348016710 | SM STOOL SOFTENER 100 MG TAB   |
| 49348017937 | SM HYDROGEN PEROXIDE 3% SOLN   |
| 49348018620 | SM ENEMA READY TO USE          |
| 49348019013 | SM FIBER 625 MG CAPLET         |
| 49348019609 | SM IBUPROFEN 200 MG CAPLET     |
| 49348019878 | SM HEMORRHOIDAL OINTMENT       |
| 49348027472 | SM DOUBLE ANTIBIOTIC OINT      |
| 49348027972 | SM ANTIFUNGAL 1% TOPICAL CREAM |
| 49348030339 | SM ANTACID MAX STRENGTH SUSP   |
| 49348030611 | SM NAPROXEN SODIUM 220 MG TAB  |
| 49348033736 | SM CALDYPHEN LOTION            |
| 49348035543 | SM MICONAZOLE 3 COMBO PACK     |
| 49348037469 | SM INF IBUPROFEN 50 MG/1.25 ML |
| 49348037954 | SM 3-DAY VAGINAL CREAM         |

| NDC         | Name                           |
|-------------|--------------------------------|
| 49348044172 | SM HYDROCORTISONE PLUS 1% CRM  |
| 49348044334 | SB LICE KILLING SHAMPOO        |
| 49348052172 | SM HYDROCORTISONE-ALOE 1% CRM  |
| 49348052178 | SM HYDROCORTISONE-ALOE 1% CRM  |
| 49348052272 | SM HYDROCORTISONE 1% OINTMENT  |
| 49348052902 | SM ANTI-DIARRHEAL 2 MG CAPLET  |
| 49348053077 | SM MICONAZOLE 7 CREAM          |
| 49348054110 | SM FIBER LAXATIVE 500 MG CPLT  |
| 49348054301 | SM LORATA-DINE D 24HR TABLET   |
| 49348057308 | SM NICOTINE 2 MG CHEWING GUM   |
| 49348062237 | SM POVIDONE-IODINE 10% SOLN    |
| 49348062238 | SM POVIDONE-IODINE 10% SOLN    |
| 49348063634 | SM LORATADINE 5 MG/5 ML SYRUP  |
| 49348068972 | SM MICONAZOLE 2% TOPICAL CREAM |
| 49348069729 | SM EYE DROPS ADVANCED RELIEF   |
| 49348073734 | SM TUSSIN CF SYRUP             |
| 49348075337 | SM DAY TIME COLD-FLU LIQUID    |
| 49348079072 | SM ATHLETE'S 1% FOOT CREAM     |
| 49348079376 | SM CLOTRIMAZOLE 1% VAG CREAM   |
| 49348081705 | SM ACID REDUCER 20 MG TABLET   |
| 49348083361 | SM MICONAZOLE 7 100 MG VAG SUP |
| 49348085216 | SM NICOTINE 2 MG LOZENGE       |
| 49348085316 | SM NICOTINE 4 MG LOZENGE       |
| 49348085472 | SM ANTI-ITCH 2% CREAM          |
| 49348086348 | SM GAS RELIEF 125 MG CHEW TAB  |
| 49348087359 | SM IBUPROFEN PM CAPLET         |
| 49348088384 | SM ARTHRICREAM RUB 10% CREAM   |
| 49348089610 | SM ALCOHOL 70% PREP PADS       |
| 49348094729 | SM LUBRICANT EYE DROPS         |
| 49348098605 | SM COUGH DROPS 5.8 MG          |
| 49348099136 | SM SORE THROAT 1.4% SPRAY      |
| 49483000301 | LAXATIVE EC 5 MG TABLET        |
| 49483001401 | NIACIN SA 250 MG CAPSULE       |
| 49483001801 | NIACIN 500 MG CAPSULE SA       |
| 49483006101 | ALLER-G-TIME 25 MG CAPLET      |
| 49483006301 | FERRO-TIME 325 MG TABLET       |
| 49483008001 | SENNA-TIME 8.6 MG TABLET       |
| 49483008101 | SENNA-TIME S TABLET            |
| 49483024201 | ALLERGY-TIME 4 MG TABLET       |
| 49483027206 | MUCOSA 400 MG TABLET           |
| 49483028006 | MUCOSA DM 400-20 MG TABLET     |
| 49483033301 | MOTION-TIME 25 MG TABLET CHEW  |
| 49483037000 | EXTRA PAIN RELIEF CAPLET       |
| 49483068201 | ALLERGY RLF (CETRZN) 5 MG TAB  |
| 49483069250 | ALLERGY RLF (CETRZN) 10 MG TAB |

| NDC         | Name                           |
|-------------|--------------------------------|
| 49648008013 | BUFFERIN 325 MG TABLET         |
| 49963052760 | FORTAVIT SOFTGEL               |
| 49973024796 | AZO URINARY PAIN RLF 99.5 MG   |
| 49973076130 | AZO URINARY PAIN RLF 95 MG TAB |
| 50000085520 | GERBER GOOD START WATER        |
| 50001080500 | KINDERLYTE ELECTROLYTE SOLN    |
| 50001080507 | KINDERLYTE ELECTROLYTE PWD PKT |
| 50001080508 | KINDERLYTE ELECTROLYTE SOLN    |
| 50001080569 | KINDERMED INFANT PAIN 160 MG/5 |
| 50001080572 | KINDERMED KIDS PAIN 160 MG/5ML |
| 50001080573 | KINDERMED KID COUGH 100-5 MG/5 |
| 50015072311 | HYDRALYTE ELECTROLYTE PWDR PKT |
| 50024043100 | DRISTAN 0.05% NASAL SPRAY      |
| 50024092400 | PIXEL COVID-19 HOME COLLECT KT |
| 50027049441 | PURE COMFORT SPACER-ADULT MASK |
| 50042003715 | GOTOKNOW COVID-19 AG HOME TEST |
| 50042055907 | CORDX COVID-19 AG HOME TEST    |
| 50042055967 | CORDX TYFAST COVID-19 AG TEST  |
| 50090022400 | DELSYM 30 MG/5 ML SUSPENSION   |
| 50090061400 | CLOTRIMAZOLE 1% VAGINAL CREAM  |
| 50090103700 | ZADITOR 0.025% (0.035%) DROPS  |
| 50090105100 | CALCIUM 600 MG-VIT D3 5 MCG TB |
| 50090107500 | MUCINEX D ER 600-60 MG TABLET  |
| 50090107700 | MUCINEX DM ER 600-30 MG TABLET |
| 50090145400 | LORATADINE 5 MG/5 ML SOLN      |
| 50090146000 | NEXIUM 24HR 20 MG CAPSULE      |
| 50090152200 | CLOTRIMAZOLE 1% VAGINAL CREAM  |
| 50090172000 | ACNE MEDICATION 5% GEL         |
| 50090179200 | ACNE MEDICATION 10% GEL        |
| 50090229300 | CAPSAICIN 0.025% CREAM         |
| 50090230100 | MUCINEX ER 1,200 MG TABLET     |
| 50090407000 | ALLERGY RELIEF 180 MG TABLET   |
| 50090414200 | CALCIUM 500-VIT D3 10 MCG CHEW |
| 50090425900 | GERI-LANTA LIQUID              |
| 50090434300 | ROBAFEN DM CGH-CHEST CONG SYRP |
| 50090509700 | VITAMIN D3 125 MCG CAPSULE     |
| 50090552900 | WEEKLY-D 1,250 MCG SOFTGEL     |
| 50090555400 | PSEUDOEPHEDRINE ER 120 MG TAB  |
| 50090654000 | FEROSUL 325 MG TABLET          |
| 50090654200 | TUSNEL-EX 100 MG/5 ML LIQUID   |
| 50090654900 | MUCINEX DM ER 1,200-60 MG TAB  |
| 50090683700 | CHILD ALLERGY 5 MG/5 ML SOLN   |
| 50090705100 | GS LORATADINE 10 MG TABLET     |
| 50090725000 | GS DICLOFENAC SODIUM 1% GEL    |
| 50090725201 | GS ACETAMINOPHEN 500 MG CAPLET |

| NDC         | Name                           |
|-------------|--------------------------------|
| 50090725500 | GS HYDROCORTISONE 1% CREAM     |
| 50090740900 | OXYMETAZOLINE 0.05% SPRAY      |
| 50102011101 | ECONTRA EZ 1.5 MG TABLET       |
| 50102021101 | ECONTRA ONE-STEP 1.5 MG TABLET |
| 50228027690 | NEO-VITAL RX TABLET            |
| 50268004315 | ARTIFICIAL TEARS 0.1-0.2-0.3%  |
| 50268005211 | ARTHRITIS PAIN ER 650 MG TAB   |
| 50268006530 | CARBOXYMETHYLCELL 1% EYE GEL   |
| 50268014711 | CALCIUM CIT 315-VIT D3 250 TAB |
| 50268019657 | CAPSAICIN 0.075% CREAM         |
| 50268019756 | CAPSAICIN 0.1% CREAM           |
| 50268037511 | GLUCOSAMINE 500 MG CAPSULE     |
| 50268037615 | GLUCOSAMINE-CHONDROITIN CAP    |
| 50268037713 | GLUCOSAMINE-CHONDROITIN TABLET |
| 50268049030 | LIDOCAINE HCL 4% CREAM         |
| 50268050329 | MICONAZOLE NITRATE 2% SOLUTION |
| 50268067701 | PRENATAL PLUS VITAMIN-MINERAL  |
| 50268081011 | ZINC CHELATED 50 MG TABLET     |
| 50268085711 | BALANCE B-50 TABLET            |
| 50268086611 | VITAMIN D3 5,000 UNIT TABLET   |
| 50268086911 | VITAMIN E-200 200 UNIT SOFTGEL |
| 50383006004 | DIABETIC TUSSIN DM SYRUP       |
| 50383006104 | DIABETIC TUSSIN EX SYRUP       |
| 50383013204 | GUAIA TUSSIN 100 MG/5 ML SYRUP |
| 50383020804 | GUAIA SORB COUGH SYRUP         |
| 50383034910 | DOCU LIQUID 100 MG/10 ML CUP   |
| 50383062750 | CHILD FERROUS SULFATE 15 MG/ML |
| 50383077116 | DOCU LIQUID 50 MG/5 ML         |
| 50428000280 | CVS IBUPROFEN 200 MG TABLET    |
| 50428000696 | CVS ASPIRIN 81 MG CHEWABLE TAB |
| 50428002662 | CVS MICONAZOLE 3 COMBO PACK    |
| 50428002824 | CVS IBUPROFEN 200 MG CAPSULE   |
| 50428004232 | CVS EYE ALLERGY RELIEF DROPS   |
| 50428005345 | CVS VITAMIN B-12 500 MCG TAB   |
| 50428006205 | CVS SALINE 0.65% NASAL SPRAY   |
| 50428006551 | CVS DAILY MULTIPLE TABLET      |
| 50428009256 | CVS GENTLE LAXATIVE EC 5 MG TB |
| 50428012019 | CVS ALLERGY RELIEF-D TABLET    |
| 50428013831 | CVS TUSSIN DM LIQUID           |
| 50428014675 | CVS CALCIUM 600-VIT D3 800 TAB |
| 50428014702 | CVS ANTI-DIARRHEAL 2 MG SFTGEL |
| 50428016638 | CVS MICONAZOLE 1 COMBO PACK    |
| 50428017236 | CVS STOOL SOFTENER 100 MG SFGL |
| 50428021962 | CVS ANTIBIOTIC OINTMENT        |
| 50428021963 | CVS BACITRACIN ZN 500 UNIT/GM  |

| NDC         | Name                           |
|-------------|--------------------------------|
| 50428025036 | CVS FOLIC ACID 800 MCG TABLET  |
| 50428025147 | CVS ALLERGY RELIEF 180 MG TAB  |
| 50428025204 | CVS MIGRAINE 250-250-65 MG CPT |
| 50428025293 | CVS IBUPROFEN 200 MG SOFTGEL   |
| 50428025413 | CVS 8HR ARTHRIT PAIN ER 650 MG |
| 50428025547 | CVS ACID CONTROLLER 10 MG TAB  |
| 50428025610 | CVS NICOTINE 2 MG MINI LOZENGE |
| 50428025628 | CVS CHILD CHEW VITAMN COMPLETE |
| 50428025689 | CVS STOMACH RLF 262 MG CHEW TB |
| 50428025901 | CVS CORTISONE 1% CREAM         |
| 50428025910 | CVS IBUPROFEN JR STR 100 MG TB |
| 50428025949 | CVS ACID CONTROLLER 20 MG TAB  |
| 50428026496 | CVS SENNA LAXATIVE 8.6 MG TAB  |
| 50428026511 | CVS MENS 50 PLUS ADVANCED TAB  |
| 50428026540 | CVS HEMORRHOIDAL RELIEF 5% CRM |
| 50428026593 | CVS DIGESTIVE PROBIO 250MG CAP |
| 50428026853 | CVS ANTACID-ANTIGAS LIQUID     |
| 50428026854 | CVS CHILD PAIN-FEVER 160 MG/5  |
| 50428026896 | CVS ACNE SPOT TRTMENT 2.5% CRM |
| 50428026915 | CVS HEADACHE RELIEF CAPLET     |
| 50428026926 | CVS GLYCERIN SUPPOSITORY       |
| 50428026927 | CVS MELATONIN 5 MG TABLET      |
| 50428027114 | CVS ALLERGY (LORAT) 10 MG TAB  |
| 50428027130 | CVS ACIDOPHILUS TABLET         |
| 50428027137 | CVS PRENATAL VITAMINS TABLET   |
| 50428027221 | CVS VITAMIN C 1,000 MG CAPLET  |
| 50428027315 | CVS ARTHRIT PAIN RLF ER 650 MG |
| 50428027600 | CVS PINWORM TREATMENT 50 MG/ML |
| 50428027709 | CVS NICOTINE 2 MG LOZENGE      |
| 50428027781 | CVS PURELAX POWDER             |
| 50428027941 | CVS TUSSIN 100 MG/5 ML LIQUID  |
| 50428028006 | CVS LUBRICANT EYE DROPS        |
| 50428028011 | CVS MELATONIN 2.5 MG GUMMY     |
| 50428028092 | CVS ASPIRIN EC 81 MG TABLET    |
| 50428028110 | CVS VITAMIN D3 50 MCG SOFTGEL  |
| 50428028197 | CVS ALLERGY (LORAT) 10 MG TAB  |
| 50428028220 | CVS EYE HEALTH AND LUTEIN TAB  |
| 50428028236 | CVS ACIDOPHILUS PROBIOTIC TAB  |
| 50428028445 | CVS IBUPROFEN 200 MG CAPLET    |
| 50428028552 | CVS ACETAMINOPHEN 500 MG GELCP |
| 50428028693 | CVS VITAMIN C 500 MG TABLET    |
| 50428028724 | CVS CALCIUM 600 MG TABLET      |
| 50428028756 | CVS ANTACID EX-STR 750 MG CHEW |
| 50428028806 | CVS ONE DAILY MEN'S HEALTH TAB |
| 50428028945 | CVS VITAMIN B-6 100 MG TABLET  |

| NDC         | Name                           |
|-------------|--------------------------------|
| 50428029016 | CVS PROBIOTIC 3 BIL CELL CAP   |
| 50428029088 | CVS ITCH RELIEF CLEAR LOTION   |
| 50428029113 | CVS NICOTINE 14 MG/24HR PATCH  |
| 50428029214 | CVS VITAMIN B-1 100 MG TABLET  |
| 50428029220 | CVS ACNE TREATMENT 10% CREAM   |
| 50428029260 | CVS LICE TREATMENT 1% CRM RINS |
| 50428029449 | CVS IRON 65 MG TABLET          |
| 50428029464 | CVS SENNA PLUS TABLET          |
| 50428029491 | CVS ANTACID ULTRA STR TAB CHEW |
| 50428029608 | CVS SPECTRAVITE WOMEN 50 PLUS  |
| 50428029627 | CVS PEDIATRIC ELECTROLYTE SOLN |
| 50428029673 | CVS ANTACID PLUS ANTI-GAS LIQ  |
| 50428029733 | CVS MAGNESIUM CITRATE SOLUTION |
| 50428029742 | CVS FISH OIL 1,000 MG SOFTGEL  |
| 50428029821 | CVS CHEST CONGESTION RLF TAB   |
| 50428029828 | CVS IRON 27 MG TABLET          |
| 50428029857 | CVS INFANT PAIN-FEVER 160 MG/5 |
| 50428029877 | CVS THERAPEUTIC 3% DANDRF SHMP |
| 50428029914 | CVS PAIN RELIEF PM GELCAP      |
| 50428029936 | CVS B-12 1,000 MCG TABLET      |
| 50428030053 | CVS NO DRIP NASAL MIST 0.05%   |
| 50428030081 | CVS CHEST CONGEST RELIEF DM TB |
| 50428030129 | CVS MELATONIN 10 MG TABLET SL  |
| 50428030142 | CVS PAIN RELIEF 325 MG TABLET  |
| 50428030195 | CVS SPECTRAVITE MEN 50PLUS TAB |
| 50428030208 | CVS HYDROCORTISONE 1% CREAM    |
| 50428030356 | CVS HAIR, SKIN AND NAILS CPLT  |
| 50428030412 | CVS MELATONIN 10 MG CAPSULE    |
| 50428030440 | CVS 8HR MUSCLE ACHES ER 650 MG |
| 50428030441 | CVS ALLERGY (CETRZN) 10 MG TAB |
| 50428030503 | CVS SPECTRAVITE WOMEN TABLET   |
| 50428030704 | CVS INFT GAS RLF 20 MG/0.3 ML  |
| 50428030712 | CVS ONE DAILY WOMEN'S 50 PLUS  |
| 50428030765 | CVS CO Q-10 50 MG SOFTGEL      |
| 50428031029 | CVS PURE GLYCERIN LIQUID       |
| 50428031075 | CVS ITCH RELIEF 2% GEL         |
| 50428031251 | CVS VITAMIN E 180 MG SOFTGEL   |
| 50428031328 | CVS VITAMIN D3 50 MCG TABLET   |
| 50428031380 | CVS EYE ITCH RELIEF 0.025% DRP |
| 50428031441 | CVS VITAMIN D3 25 MCG SOFTGEL  |
| 50428031530 | CVS PROBIOTIC 100 BIL CELL CAP |
| 50428031675 | CVS GAS RELF(SIMETH) 80 MG CHW |
| 50428031690 | CVS ADVANCED HEALING 41% OINT  |
| 50428031718 | CVS ASPIRIN EC 325 MG TABLET   |
| 50428031740 | CVS CHILD COUGH DM ER 30 MG/5  |

| NDC         | Name                           |
|-------------|--------------------------------|
| 50428031818 | CVS MELATONIN 3 MG TABLET      |
| 50428031842 | CVS DIGESTIVE PROBIOTIC CAP    |
| 50428031878 | CVS NIGHTTIME SLEEP 25 MG TAB  |
| 50428031885 | CVS SLOW RELEASE IRON 45 MG TB |
| 50428032084 | CVS ASPIRIN 325 MG TABLET      |
| 50428032164 | CVS ONE DAILY WOMEN'S FORMULA  |
| 50428032287 | CVS PROBIOTIC 20 BIL CELL CAP  |
| 50428032467 | CVS CASTOR OIL                 |
| 50428032507 | CVS SPECTRAVITE WOMEN TABLET   |
| 50428032977 | CVS STOOL SOFTENER-STIM LAX TB |
| 50428033271 | CVS NICOTINE 4 MG LOZENGE      |
| 50428033357 | CVS ANTI-ITCH 1% CREAM         |
| 50428033399 | CVS ADULT DM MAXIMUM LIQUID    |
| 50428033440 | CVS NICOTINE 4 MG CHEWING GUM  |
| 50428033620 | CVS TRIPLE ANTIBIOTIC-PAIN RLF |
| 50428033623 | CVS VIT C-ROSE HIP 500 MG CHEW |
| 50428033768 | CVS COLD-FLU-SORE THROAT LIQ   |
| 50428033796 | CVS NICOTINE 21 MG/24HR PATCH  |
| 50428033799 | CVS SINUS PE DECONGESTANT TAB  |
| 50428033841 | CVS ACNE TREATMENT 10% GEL     |
| 50428033845 | CVS CALCIUM 600-D3 PLUS TABLET |
| 50428033863 | CVS CALCIUM 600MG-D3 20MCG TAB |
| 50428033939 | CVS NASAL SPRAY 0.05%          |
| 50428034114 | CVS SPECTRAVITE ADULT 50 PLUS  |
| 50428034187 | CVS SPECTRAVITE WOMEN 50 PLUS  |
| 50428034374 | CVS SPECTRAVITE ADULT TABLET   |
| 50428034380 | CVS FLUTICASONE PROP 50 MCG SP |
| 50428034400 | CVS MELATONIN 5 MG SOFTGEL     |
| 50428034503 | CVS CHLD IBUPROFEN 100 MG/5 ML |
| 50428034618 | CVS ALCOHOL 70% PREP PADS      |
| 50428034636 | CVS CO Q-10 100 MG SOFTGEL     |
| 50428034819 | CVS CAPSAICIN 0.1% CREAM       |
| 50428034918 | CVS ASPIRIN 325 MG TABLET      |
| 50428034937 | CVS CHILD GUMMY DINOS GUMMIES  |
| 50428035047 | CVS COUGH DM ER 30 MG/5 ML SUS |
| 50428035136 | CVS GLUCOSE 3.75 GRAM CHEW TAB |
| 50428035172 | CVS CAL CIT-D3 325 MG TABLET   |
| 50428035372 | CVS NIGHTTIME DRY-EYE RELIEF   |
| 50428035460 | CVS SUPER B-COMPLEX-VIT C CPLT |
| 50428035572 | CVS CO Q-10 100 MG SOFTGEL     |
| 50428035731 | CVS PAIN RELIEF 500 MG CAPLET  |
| 50428035859 | CVS FISH OIL 1,000 MG SOFTGEL  |
| 50428035866 | CVS SMOOTH ANTACID 750 MG CHEW |
| 50428035980 | CVS IRON 65 MG TABLET          |
| 50428036031 | CVS VIT C-ROSE HIP 500 MG CPLT |

| NDC         | Name                            |
|-------------|---------------------------------|
| 50428036181 | CVS GAS RELIEF 125 MG CHEW TAB  |
| 50428036208 | CVS PRENATAL GUMMIES            |
| 50428036338 | CVS CHILD CHEST CONGEST-COUGH   |
| 50428036441 | CVS MINERAL OIL                 |
| 50428036498 | CVS NICOTINE 7 MG/24HR PATCH    |
| 50428036823 | CVS CHILD GUMMY DINOS GUMMIES   |
| 50428036851 | CVS EAR WAX REMOVAL 6.5% DROP   |
| 50428036877 | CVS URINARY PAIN RLF 95 MG TAB  |
| 50428037108 | CVS PROBIOTIC DR 10 BIL CELL    |
| 50428037201 | CVS DRY SKIN THERAPY CREAM      |
| 50428037298 | CVS STOOL SOFTENER 250 MG SFGL  |
| 50428037438 | CVS MELATONIN 5 MG CHEW TABLET  |
| 50428037569 | CVS DIAPER RASH 40% OINTMENT    |
| 50428037777 | CVS TUSSIN LONG-ACTING LIQUID   |
| 50428038098 | CVS KIDS' MULTIVITAMIN GUMMY    |
| 50428038132 | CVS CO Q-10 200 MG SOFTGEL      |
| 50428038158 | CVS VITAMIN C 500 MG CAPLET     |
| 50428038300 | CVS MICONAZOLE 7 CREAM          |
| 50428038354 | CVS VITAMIN D3 10 MCG SOFTGEL   |
| 50428038612 | CVS ACETAMINOPHEN 500 MG CPLT   |
| 50428038748 | CVS EAR DROPS 6.5%              |
| 50428038823 | CVS NASAL DECONGEST 30 MG TAB   |
| 50428038936 | CVS MOTION SICKNESS 25MG CHWTB  |
| 50428038943 | CVS ALLERGY RELIEF 180 MG TAB   |
| 50428039542 | CVS ALLERGY 0.025% EYE DROPS    |
| 50428039561 | CVS FISH OIL 1,200 MG SOFTGEL   |
| 50428039687 | CVS 12HR DECONGEST 120 MG CPLT  |
| 50428040186 | CVS LUBRICANT 0.5% EYE DROP     |
| 50428040225 | CVS VITAMIN D3 125 MCG SOFTGEL  |
| 50428040297 | CVS PAIN RELIEF 500 MG TABLET   |
| 50428040525 | CVS CHILD ALLERGY RELF 1 MG/ML  |
| 50428040647 | CVS NICOTINE 4 MG MINI LOZENGE  |
| 50428041004 | CVS SPECTRAVITE MEN'S TABLET    |
| 50428041181 | CVS VIT C-ROSE HIP 1,000 MG TB  |
| 50428041228 | CVS ANTISEPTIC SKIN CLEANSR 4%  |
| 50428041539 | CVS VITAMIN A AND D OINTMENT    |
| 50428041611 | CVS EAR WAX REMOVAL 6.5% KIT    |
| 50428041709 | CVS VITAMIN E 90 MG SOFTGEL     |
| 50428041751 | CVS CO Q-10 400 MG SOFTGEL      |
| 50428041769 | CVS MOISTURIZING CREAM          |
| 50428042136 | CVS HEMORRHOIDAL-ANALGESIC OINT |
| 50428042671 | CVS ENEMA READY TO USE          |
| 50428042738 | CVS GLYCERIN 2 GM ADULT SUPPOS  |
| 50428042845 | CVS CAL CIT 200 MG-D3 6.25 MCG  |
| 50428042917 | CVS POLY BACITRACIN OINTMENT    |

| NDC         | Name                           |
|-------------|--------------------------------|
| 50428043004 | CVS VIT C-ROSE HIPS 500 MG TAB |
| 50428043400 | CVS ONE DAILY ESSENTIAL TABLET |
| 50428043405 | CVS ANTACID 750 MG CHEW TABLET |
| 50428043673 | CVS TRIPLE MAGNESIUM COMPLEX   |
| 50428043715 | CVS MAGNESIUM 500 MG CAPLET    |
| 50428043840 | CVS LUBRICANT 0.5% EYE DROPS   |
| 50428043852 | CVS MAGNESIUM 250 MG CAPLET    |
| 50428043890 | CVS VITAMIN E 450 MG SOFTGEL   |
| 50428043984 | CVS FLAVOR CHEW ANTACID 750 MG |
| 50428047056 | CVS CREAMY ACNE 4% FACE WASH   |
| 50428047200 | CVS PROBIOTIC 3 BIL CELL CAPS  |
| 50428047796 | CVS SKIN TREATMENT BODY LOTION |
| 50428048125 | CVS KIDS ANTACID 750 MG CHEW   |
| 50428048229 | CVS VITAMIN B-2 100 MG TABLET  |
| 50428048545 | CVS B-1 100 MG TABLET          |
| 50428048579 | CVS C-LAX LAXATIVE EC 5 MG TAB |
| 50428048977 | CVS PSORIASIS MED 3% SHAMPOO   |
| 50428049435 | CVS VITAMIN C 250 MG TABLET    |
| 50428049649 | CVS LUBRICANT EYE DROPS        |
| 50428051090 | CVS SKIN PROTECTANT A-D OINT   |
| 50428051108 | CVS MELATONIN 5 MG TABLET SL   |
| 50428052130 | CVS COVID19 AT-HOME TEST (EUA) |
| 50428052219 | CVS COUGH-CHEST CONGEST DM LIQ |
| 50428052473 | CVS CHILD COUGH-CHEST CONG DM  |
| 50428053302 | CVS MUCUS D ER 600-60 MG TAB   |
| 50428053655 | CVS LUBRICANT EYE 0.4%-0.3%    |
| 50428053895 | CVS HAND WASH 2% SOLUTION      |
| 50428054031 | CVS HEARTBURN RELIEF LIQUID    |
| 50428054208 | CVS PAIN RELIEF 4% CREAM       |
| 50428054266 | CVS VITAMIN D3 250 MCG SOFTGEL |
| 50428054913 | CVS OMEPRAZOLE-BICARB 20-1,100 |
| 50428056984 | CVS WART REMOVER 17% LIQUID    |
| 50428057523 | VIT D3 125 MCG (5000 UNIT) TAB |
| 50428057730 | CVS ESOMEPRAZOLE MAG 20 MG CAP |
| 50428057953 | CVS ALLERGY RELIEF 5 MG TABLET |
| 50428057988 | CVS CHILD PAIN RELIEF 160 MG   |
| 50428058608 | CVS MUCUS ER 1,200 MG TABLET   |
| 50428058951 | CVS ADVANCED HEALING 41% OINT  |
| 50428059002 | CVS LIDOCAINE HCL 4% CREAM     |
| 50428059017 | CVS MELATONIN 5 MG GUMMY       |
| 50428059136 | CVS ACETAMINOPHEN 500 MG/15 ML |
| 50428059159 | CVS MELATONIN 5 MG QUICK DSSLV |
| 50428060423 | CVS ALLERGY NASAL MIST 0.05%   |
| 50428062162 | CVS MELATONIN 10 MG TABLET     |
| 50428063687 | CVS MILK OF MAGNESIA SUSP      |

| NDC         | Name                           |
|-------------|--------------------------------|
| 50428067584 | CVS HEARTBURN RELIEF CHEW TAB  |
| 50428092378 | CVS PAIN RELIEVER 500 MG CPLT  |
| 50428096918 | CVS FIBER LAXATIVE 625 MG CPLT |
| 50428166363 | CVS BISACODYL EC 5 MG TABLET   |
| 50428186577 | CVS ENEMA DISPOSABLE           |
| 50428200236 | CVS GLYCERIN SUPPOSITORY       |
| 50428207688 | CVS CHILD PAIN RLF 160 MG/5 ML |
| 50428213066 | CVS PEDIATRIC OINTMENT         |
| 50428216549 | CVS ACNE 10% CREAM             |
| 50428231183 | CVS CITRATE OF MAGNESIA SOLN   |
| 50428235637 | CVS NAPROXEN SOD 220 MG CAPLET |
| 50428251660 | CVS SPECTRAVITE ADVANCED TAB   |
| 50428271250 | CVS ASPIRIN 325 MG CAPLET      |
| 50428272877 | CVS PEDIATRIC ELECTROLYTE POPS |
| 50428306422 | CVS KETONE CARE TEST STRIP     |
| 50428375469 | CVS B-COMPLEX-VIT C CAPLET     |
| 50428420928 | CVS GLUCOSE LIQUID SHOT        |
| 50428444797 | CVS ISOPROPYL ALCOHOL 70% WIPE |
| 50428459954 | CVS COENZYME Q-10 100 MG SFTGL |
| 50488090101 | LAXACIN TABLET                 |
| 50488416001 | ACETAMINOPHEN 160 MG GUMMY     |
| 50488626201 | LIDOCAINE HCL 4% CREAM         |
| 50488626301 | LIDOCAINE PLUS 4% CREAM        |
| 50580045810 | TYLENOL 325 MG CAPLET          |
| 50580057401 | MOTRIN ARTHRITIS PAIN 1% GEL   |
| 50580059002 | TYLENOL EX-STR 500 MG TABLET   |
| 50580060801 | TYLENOL PM EXSTR 500-25MG CPLT |
| 50580093201 | CHILD MOTRIN 100 MG CHEW TAB   |
| 50600053992 | TYR COOLER LIQUID              |
| 50632000727 | PRO COMFORT SPACER-ADULT MASK  |
| 50632000728 | PRO COMFORT SPACER-CHILD MASK  |
| 50742035201 | HER STYLE 1.5 MG TABLET        |
| 50804000401 | GS ENEMA READY TO USE          |
| 50804000402 | GS ENEMA READY TO USE TWIN PAK |
| 50804007901 | GS DIAPER RASH 40% PASTE       |
| 50804011001 | GS ARTIFICIAL TEARS EYE DROPS  |
| 50804011317 | ANTACID 500 MG CHEW TABLET     |
| 50804012922 | GS ANTACID EX-STR 750 MG CHEW  |
| 50804016001 | GS ULTRA LUBRICANT EYE DROPS   |
| 50804017168 | GS ANTACID ULTRA 1,000 MG CHEW |
| 50804019940 | GS IBUPROFEN 200 MG SOFTGEL    |
| 50804032756 | GS BISACODYL EC 5 MG TABLET    |
| 50804034161 | GS EAR WAX REMOVAL 6.5% KIT    |
| 50804061912 | GS ANTACID-GAS RELIEF LIQUID   |
| 50804062912 | GS ANTACID PLUS GAS RELIEF LIQ |

| NDC         | Name                           |
|-------------|--------------------------------|
| 50804063110 | GS SENNA LAXATIVE 8.6 MG TAB   |
| 50804064912 | GS MILK OF MAGNESIA SUSPENSION |
| 50804082502 | GS PAIN RLF PM 25-500MG GELCAP |
| 51028000105 | HYDRASYN25 CREAM               |
| 51044000842 | EVERLYWELL COVID19 HOM COLLECT |
| 51228000005 | DDROPS 1,000 UNIT/DROP         |
| 51228000006 | BABY DDROPS 400 UNIT/DROP CONC |
| 51228000009 | DDROPS 2,000 UNIT/DROP         |
| 51316007168 | CVS MUCUS ER 600 MG TABLET     |
| 51316077823 | CVS TUSSIN COUGH 15 MG SOFTGEL |
| 51316086350 | CVS ACETAMINOPHEN PM CAPLET    |
| 51316099318 | CVS MUCUS D ER 600-60 MG TAB   |
| 51645070801 | ANIMAL CHEWS TABLET            |
| 51645072901 | ACIDOPHILUS-PECTIN CAPSULE     |
| 51645075001 | DOCUSATE SODIUM 100 MG TABLET  |
| 51645084001 | PRENATAL VITAMIN TABLET        |
| 51645085001 | SENNA PLUS TABLET              |
| 51645087006 | SIMETHICONE 125 MG TAB CHEW    |
| 51645099501 | RENAL-VITE TABLET              |
| 51645099712 | EYEPROTECT TABLET              |
| 51660006144 | OMEPRAZOLE MAG DR 20 MG CAP    |
| 51660072415 | ALLERGY RELIEF-NASAL DECONG TB |
| 51660094024 | ALLERGY RLF-DECONG ER 5-120 MG |
| 51663000500 | OPTIMAL D3 50,000 UNIT CAPSULE |
| 51663000508 | VITAMIN D3 10,000 UNIT CAPSULE |
| 51663000510 | VITABEX PLUS CAPSULE           |
| 51663000520 | VITAMIN D3 50 MCG CAPSULE      |
| 51672200101 | MICONAZOLE 2% TOPICAL CREAM    |
| 51672203506 | MICONAZOLE 2% VAGINAL CREAM    |
| 51672204402 | DOUBLE ANTIBIOTIC OINTMENT     |
| 51672206200 | 3-DAY VAGINAL CREAM            |
| 51672207308 | LORATADINE 5 MG/5 ML SYRUP     |
| 51672209208 | CHILD LORATADINE 5 MG/5 ML SYR |
| 51672211400 | FEVERALL 80 MG SUPPOSITORY     |
| 51672211500 | FEVERALL 120 MG SUPPOSITORY    |
| 51672211502 | FEVERALL 120 MG SUPPOSITORY    |
| 51672211600 | FEVERALL 325 MG SUPPOSITORY    |
| 51672211602 | FEVERALL 325 MG SUPPOSITORY    |
| 51672211704 | FEVERALL 650 MG SUPPOSITORY    |
| 51709000605 | AIMSCO LATEX CONDOM            |
| 51759000201 | PRORENAL MULTIVITAMIN TABLET   |
| 51759000203 | PRORENAL QD SOFTGEL            |
| 51824003305 | VITAMIN A AND D OINTMENT       |
| 51824004901 | NON-ASPIRIN 500 MG CAPLET      |
| 51824005801 | SENNA LAXATIVE 8.6 MG TABLET   |

| NDC         | Name                           |
|-------------|--------------------------------|
| 51824005950 | NON-ASPIRIN PM CAPLET          |
| 51824006001 | NON-ASPIRIN 500 MG TABLET      |
| 51824006101 | NON-ASPIRIN 325 MG TABLET      |
| 51824007201 | NAPROXEN SODIUM 220 MG CAPLET  |
| 51824007401 | TRIPLE ANTIBIOTIC-PAIN OINT    |
| 51824009415 | ARTHRITIS-MUSCLE 0.025% CREAM  |
| 51862018015 | PRAMOXINE HCL 1% FOAM          |
| 51927830000 | FILTER, MILLEX-OR SYRINGE      |
| 51991018142 | FERROCITE TABLET               |
| 51991018211 | FERROCITE PLUS TABLET          |
| 51991019811 | FERREX 150 FORTE CAPSULE       |
| 51991020301 | FERREX 150 CAPSULE             |
| 51991054390 | MULTIGEN CAPLET                |
| 51991054490 | MULTIGEN PLUS CAPLET           |
| 51991054690 | MULTIGEN FOLIC CAPLET          |
| 51991058828 | FERREX 28 TABLET               |
| 51991063501 | FEROCON CAPSULE                |
| 51991064501 | V-C FORTE CAPSULE              |
| 51991070390 | FERREX 150 PLUS CAPSULE        |
| 52083041060 | ZYNCOF 400-20 MG TABLET        |
| 52083066016 | SORBUGEN NR 150-15 MG/7.5 ML   |
| 52083069130 | GENORAVANCE 15 BILLION CFU CAP |
| 52304071304 | NOVAFERRUM 15 MG/ML DROPS      |
| 52304071406 | NOVAFERRUM 125 MG/5 ML LIQUID  |
| 52304071590 | NOVAFERRUM 50 MG CAPSULE       |
| 52304071650 | NOVAFERRUM PEDI MV-IRON DROPS  |
| 52380127204 | CHLORHEXIDINE 4% SCRUB         |
| 52380185502 | POVIDONE-IODINE 7.5% SCRUB     |
| 52380191904 | CHLORHEXIDINE 2% SOLUTION      |
| 52569013247 | HM INFANT PAIN-FEVER 160 MG/5  |
| 52569013249 | HM ASPIRIN EC 81 MG TABLET     |
| 52569013256 | HM CHILD IBUPROFEN 100 MG/5 ML |
| 52569013260 | HM IBUPROFEN 200 MG TABLET     |
| 52569013262 | HM IBUPROFEN 200 MG CAPLET     |
| 52569013265 | HM NAPROXEN SOD 220 MG CAPLET  |
| 52569013277 | HM ASPIRIN 81 MG CHEWABLE TAB  |
| 52569013281 | HM PAIN RELIEVER 325 MG TABLET |
| 52569013312 | HM ALCOHOL 70% PREP PADS       |
| 52569013316 | HM NICOTINE 2 MG CHEWING GUM   |
| 52569013317 | HM NICOTINE 2 MG LOZENGE       |
| 52569013325 | HM PAIN RELIEVER 500 MG TABLET |
| 52569013355 | HM CHEST CONGEST RLF 400 MG TB |
| 52569013356 | HM CHEST CONGEST RLF DM CAPLET |
| 52569013375 | HM NASAL DECONG PE 10 MG TAB   |
| 52569013378 | HM SINUS NASAL SPRAY 0.05%     |

| NDC         | Name                           |
|-------------|--------------------------------|
| 52569013379 | HM ORIGINAL NASAL SPRAY 0.05%  |
| 52569013385 | HM SALINE 0.65% NASAL SPRAY    |
| 52569013388 | HM ADULT TUSSIN CHEST CONG LIQ |
| 52569013390 | HM ADULT TUSSIN DM SYRUP       |
| 52569013392 | HM ADT TUSSIN COUGH CONG DM LQ |
| 52569013468 | HM TRIPLE ANTIBIOTIC PLUS OINT |
| 52569013515 | HM PAIN RELIEF 500 MG CAPLET   |
| 52569013517 | HM MILK OF MAGNESIA SUSPENSION |
| 52569013535 | HM STOMACH RLF 262 MG CHEW TAB |
| 52569013536 | HM CASTOR OIL                  |
| 52569013537 | HM FAMOTIDINE 10 MG TABLET     |
| 52569013538 | HM FAMOTIDINE 20 MG TABLET     |
| 52569013545 | HM ANTACID ANTI-GAS SUSPENSION |
| 52569013577 | HM LANSOPRAZOLE DR 15 MG CAP   |
| 52569013584 | HM NICOTINE 4 MG CHEWING GUM   |
| 52569013585 | HM NICOTINE 4 MG LOZENGE       |
| 52569013594 | HM PEDIATRIC ELECTROLYTE SOLN  |
| 52569013656 | HM COUGH DM ER 30 MG/5 ML SUSP |
| 52569013673 | HM INF GAS RELIEF 20 MG/0.3 ML |
| 52569013724 | HM NICOTINE 2 MG MINI LOZENGE  |
| 52569013728 | HM LUBRICAT PLUS 0.5% EYE DRPS |
| 52569013759 | HM IBUPROFEN IB 200 MG TABLET  |
| 52569013776 | HM CAL ANTACID 750 MG CHEW TAB |
| 52569013800 | HM ANTISEPTIC SKIN CLEANSER 4% |
| 52569013850 | HM CHLD PAIN-FEVER 160 MG/5 ML |
| 52569013859 | HM LORATADINE 10 MG TABLET     |
| 52569013868 | HM PAIN RELIEVER PM CAPLET     |
| 52569013872 | HM CLEARLAX POWDER             |
| 52569013888 | HM LUBRICATING TEARS EYE DROPS |
| 52569013892 | HM LICE TREATMENT 1% CRM RINSE |
| 52569013899 | HM PAIN RELIEVER PM GELTAB     |
| 52569013933 | HM MINERAL OIL                 |
| 52569013968 | HM ALLERGY RELIEF 50 MCG SPRAY |
| 52569013970 | HM READY TO USE MIN OIL ENEMA  |
| 52569013971 | HM ENEMA READY TO USE          |
| 52569013972 | HM ENEMA READY TO USE TWIN PAK |
| 52569013977 | HM LAXATIVE EC 5 MG TABLET     |
| 52569013988 | HM CHILD ALL DAY ALLER 1 MG/ML |
| 52569013992 | HM PROBIOTIC 250 MG CAPSULE    |
| 52569013995 | HM GAS RELIEF(SIMETH) 80MG CHW |
| 52569013996 | HM ANTACID-ANTIGAS SUSPENSION  |
| 52569014002 | HM HEMORRHOIDAL OINTMENT       |
| 52569014040 | HM NASAL DECONGEST ER 120 MG   |
| 52569014041 | HM ALLERGY RELIEF 10 MG TABLET |
| 52569014046 | HM NASAL DECONGEST 30 MG TAB   |

| NDC         | Name                           |
|-------------|--------------------------------|
| 52569014047 | HM NASAL DECONGEST 30 MG TAB   |
| 52569014081 | HM ESOMEPRAZOLE MAG DR 20 MG   |
| 52569014082 | HM ESOMEPRAZOLE MAG DR 20 MG   |
| 52569014095 | HM CHILD ACETAMINOPHEN 160 MG  |
| 52569014103 | HM MOTION RELIEF 25 MG TABLET  |
| 52569014105 | HM GLYCERIN 99.5% LIQUID       |
| 52569014108 | HM CHILD LORATADINE 5 MG/5 ML  |
| 52569014109 | HM NICOTINE 7 MG/24HR PATCH    |
| 52569014110 | HM NICOTINE 14 MG/24HR PATCH   |
| 52569014111 | HM NICOTINE 21 MG/24HR PATCH   |
| 52569014123 | HM STOOL SOFTENER 100 MG SFTGL |
| 52569014137 | HM VITAMIN C 500 MG TAB CHEW   |
| 52569014139 | HM VITAMIN E 180 MG SOFTGEL    |
| 52569014148 | HM BIOTIN 5,000 MCG CAPSULE    |
| 52569014185 | HM VITAMIN B-12 500 MCG TABLET |
| 52569014190 | HM VITAMIN D3 125 MCG TABLET   |
| 52569014242 | HM LORATADINE 10 MG TABLET     |
| 52641070001 | IV ANTISEPTIC WIPES            |
| 52747020030 | RESTORA CAPSULE                |
| 52747030630 | HEMOCYTE-F TABLET              |
| 52747030670 | HEMOCYTE-F TABLET              |
| 52747030730 | HEMOCYTE TABLET                |
| 52747050430 | PROVIDA OB CAPSULE             |
| 52747062030 | CONCEPT OB CAPSULE             |
| 52747062130 | CONCEPT DHA CAPSULE            |
| 52747080030 | HEMOCYTE PLUS CAPSULE          |
| 52796015290 | MULTIA DAILY MULTIVITAMIN      |
| 52796019090 | TENDERA-OB SOFTGEL             |
| 52870000415 | TRUBIOTICS 2 BILLION CFU CAP   |
| 53062000208 | BETA CARE CREAM                |
| 53062001202 | BETA HC 1% LOTION              |
| 53062001416 | BETASAL SHAMPOO                |
| 53062002604 | BETA XMA CREAM                 |
| 53062002704 | BETATEMP 160 MG/5 ML SUSP      |
| 53076011112 | SAFETUSSIN DM LIQUID           |
| 53076020264 | NIZORAL PSORIASIS 3% SHAMPOO   |
| 53191009401 | LACTO-PECTIN CAPSULE           |
| 53191022701 | MELATONIN 3 MG CAPSULE         |
| 53191036201 | D3-50 50,000 UNIT CAPSULE      |
| 53329001311 | PURE AND GENTLE MIN OIL ENEMA  |
| 53329001411 | PURE AND GENTLE SALINE ENEMA   |
| 53329008787 | CURAD TRIPLE ANTIBIOTIC OINT   |
| 53329009016 | VITAMIN A AND D OINTMENT PKT   |
| 53530000502 | OVEGA-3 SOFTGEL                |
| 53567012634 | DERMAGRAN 0.275% OINTMENT      |

| NDC         | Name                           |
|-------------|--------------------------------|
| 54023812107 | LIQ-10 SYRUP                   |
| 54257008902 | SENNAS 8.6-50 MG TABLET        |
| 54257057303 | ACETAMINOPHEN ER 650 MG TABLET |
| 54257067902 | NATURAL LAXATIVE 8.6 MG TABLET |
| 54257076917 | ADULT LOW DOSE ASA EC 81 MG TB |
| 54323021502 | FLANDERS BUTTOCKS OINTMENT     |
| 54458073950 | OMEGA 3 1,000 MG SOFTGEL       |
| 54458079924 | VITAMIN E OINTMENT             |
| 54629000938 | THERATRUM COMPLETE 50 PLUS TAB |
| 54629001157 | SUPER ANTIOXIDANT CAPSULE      |
| 54629001170 | THERATRUM COMPLETE TABLET      |
| 54629003824 | MULTIVITAMINS TABLET           |
| 54629005101 | NIACIN 50 MG TABLET            |
| 54629005201 | PRENATAL MULTIVITAMIN TABLET   |
| 54629006702 | DAILY VITE TABLET              |
| 54629006802 | DAILY VITE WITH IRON TABLET    |
| 54629006900 | OMEGA-3 FISH OIL EC 1,000 MG   |
| 54629006991 | OMEGA-3 FISH OIL 1,760 MG STGL |
| 54629007001 | VITAMIN C 250 MG TABLET CHEW   |
| 54629007101 | NIACIN 100 MG TABLET           |
| 54629007501 | MULTIVITAMIN-MINERALS TABLET   |
| 54629008001 | SUPER B WITH VIT C CAPSULE     |
| 54629008201 | SUPER THERA VITE M TABLET      |
| 54629009043 | MAG-OXIDE 200 MG TAB           |
| 54629012691 | FULL SPECTRUM B WITH VIT C TAB |
| 54629013001 | BALANCE B-50 TABLET            |
| 54629013105 | BALANCE B-100 TABLET           |
| 54629016501 | LIQUID CALCIUM 600-VIT D3 SFGL |
| 54629037701 | OYSTER SHELL CALCIUM-VIT D TAB |
| 54629040001 | VITAMIN E 180 MG SOFTGEL       |
| 54629040766 | MACUVITE WITH LUTEIN TABLET    |
| 54629050260 | MELATONIN TR 3 MG TABLET       |
| 54629051101 | VIT C-ROSE HIPS 1,000 MG TAB   |
| 54629055100 | B12 2,500 MCG TABLET SL        |
| 54629056001 | B COMPLEX CAPSULE              |
| 54629056301 | B COMPLEX NUMBER 1 TABLET      |
| 54629059506 | STRESS FORMULA TABLET          |
| 54629059606 | STRESS FORMULA WITH IRON TAB   |
| 54629059706 | STRESS FORMULA WITH ZINC TAB   |
| 54629061500 | MELATONIN 5 MG QUICK DISSOLVE  |
| 54629065002 | FOLIC ACID 0.4 MG TABLET       |
| 54629070901 | NIACIN TR 250 MG TABLET        |
| 54629071001 | NIACIN 250 MG TABLET           |
| 54629071101 | NIACIN ER 500 MG TABLET        |
| 54629076006 | MEGA MULTIVIT-CHELATED MIN TAB |

| NDC         | Name                           |
|-------------|--------------------------------|
| 54629077460 | SLOW RELEASE IRON 160 MG TAB   |
| 54629077660 | ANTIOXIDANT SOFTGEL            |
| 54629080098 | TROPICAL LIQUID NUTRITION      |
| 54629084800 | COENZYME Q10 50 MG CAPSULE     |
| 54629089816 | ACIDOPHILUS PROBIOTIC TABLET   |
| 54629092910 | MELATONIN 10 MG TABLET SL      |
| 54629093106 | C COMPLEX 1,000 MG TABLET SA   |
| 54629093606 | SUPER ANTIOXIDANT SOFTGEL      |
| 54629111301 | MULTIPLE VITAMIN W-MINERALS TB |
| 54629124512 | MACUVITE EYE CARE TABLET       |
| 54629168601 | CALCIUM CIT 200 MG-D3 3 MCG TB |
| 54629735401 | PROBIOTIC BLEND CAPSULE        |
| 54629797430 | COENZYME Q10 100 MG CAPSULE    |
| 54629797530 | COENZYME Q10 200 MG CAPSULE    |
| 54629898360 | MELATONIN TR 1 MG TABLET       |
| 54629899460 | HAIR, SKIN AND NAILS TABLET    |
| 54629916260 | CHILDREN MULTIVITAMIN GUMMIES  |
| 54738009230 | CHILD ACETAMINOPHEN 80 MG CHEW |
| 54738010230 | BISMUTH 262 MG TABLET CHEW     |
| 54738010248 | BISMUTH 262 MG TABLET CHEW     |
| 54738010301 | CHLORPHENIRAMINE 4 MG TABLET   |
| 54738098530 | GUAIFENESIN-DM 400-20 MG CPLT  |
| 54838000530 | VITAMIN E 15 UNIT/0.3 ML DROP  |
| 54838000650 | VITAMIN D3 10 MCG/ML LIQUID    |
| 54838011680 | SILACE 50 MG/5 ML LIQUID       |
| 54838011740 | SILTUSSIN SA 100 MG/5 ML SYR   |
| 54838012015 | PEDIATRIC DECONGEST-COUGH DRPS |
| 54838013540 | SILADRYL 12.5 MG/5 ML LIQUID   |
| 54838055840 | LORATADINE ALLERGY 5 MG/5 ML   |
| 54859050504 | TUSNEL DIABETIC LIQUID         |
| 54859051302 | DOLOGESIC PAIN RLF 4% ROLL-ON  |
| 54859051716 | TUSNEL DM LIQUID               |
| 54859056004 | HEMATEX 100 MG/5 ML LIQUID     |
| 54859060416 | TUSNEL DM PEDIATRIC LIQUID     |
| 54859060501 | TUSNEL PEDI 25-1.25 MG/ML DROP |
| 54859060601 | TUSNEL-DM PED 2.5-25-1.25MG/ML |
| 54859071601 | NEPHRONEX-SL TABLET            |
| 54859080204 | CONEX 2 MG-60 MG/5 ML SOLN     |
| 54859080316 | CONEX PED 1 MG-30 MG/5 ML SOLN |
| 54859080908 | REDUTEMP 500 MG/15 ML LIQUID   |
| 54859081016 | FERROUS SULF 44 MG IRON/5ML LQ |
| 54859081116 | ALLERGY RELIEF 12.5 MG/5 ML    |
| 55111011890 | FAMOTIDINE 10 MG TABLET        |
| 55111039727 | OMEPRAZOLE MAG DR 20.6 MG CAP  |
| 55111078330 | FEXOFENADINE HCL 60 MG TABLET  |

| NDC         | Name                           |
|-------------|--------------------------------|
| 55111079924 | GUAIFENESIN-PSE ER 1200-120 MG |
| 55198000100 | DECUBI VITE CAPSULE            |
| 55212004410 | IRONUP 15 MG/0.5 ML DROPS      |
| 55289008720 | MUCINEX ER 600 MG TABLET       |
| 55289053030 | MULTIPLE VITAMIN TABLET        |
| 55289086060 | DOCUSATE CAL 240 MG CAPSULE    |
| 55289086801 | MULTIVIT WITH IRON TAB CHEW    |
| 55289094930 | FIBER-LAX TABLET               |
| 55495001180 | ATABEX DHA 200 CAPSULE         |
| 55636000372 | RAPID SARS-COV-2 AG HOME TEST  |
| 55700033530 | ALL DAY RELIEF 220 MG CAPLET   |
| 55700067830 | BANOPHEN 50 MG CAPSULE         |
| 55966094770 | CAL-600 TABLET                 |
| 56023000714 | GLUCOSE 2 GRAM GUMMY           |
| 56062035926 | PUB TUSSIN DM LIQUID           |
| 56062060726 | TUSSIN DM 200-20 MG/20 ML LIQ  |
| 56069000600 | HYDRALYTE ELECTROLYTE SOLN     |
| 56069000601 | HYDRALYTE ELECTROLYTE SOLN     |
| 56151060101 | KETONE TEST STRIP              |
| 56151161211 | RA TRUEPLUS GLUCOSE 4 G TB CHW |
| 56151161251 | RA TRUEPLUS GLUCOSE 3.75 G CHW |
| 56176000805 | POGO AUTOMATIC TEST CARTRIDGE  |
| 56184000009 | LITTLE REMEDIES SALINE MIST    |
| 56184000013 | LITTLE REMEDIES GAS RELIEF DRP |
| 56184010176 | LITTLE REMEDIES FEVER 160 MG/5 |
| 56184012015 | LITTLE REMEDIES SALINE SPRAY   |
| 56362000589 | IHEALTH COVID-19 AG HOME TEST  |
| 56964000000 | ELLUME COVID19 HOME TEST (EUA) |
| 57237030412 | ACETAMINOPHEN 160 MG/5 ML SOLN |
| 57237031205 | GUAIFENESN-DM 100-10MG/5ML CUP |
| 57237031301 | GUAIFENSN-DM 200-20MG/10ML CUP |
| 57237032521 | GLYCERIN 2 GM SUPPOSITORY      |
| 57237032621 | CHILD GLYCERIN 1.2 GM SUPP     |
| 57237033021 | URO-PAIN 99.5 MG TABLET        |
| 57237033103 | URO-PAIN 95 MG TABLET          |
| 57599074501 | PRECISION XTR B-KETONE STRIP   |
| 57629010121 | FERROUS SULF 220 MG/5 ML ELIX  |
| 57629040010 | FE C PLUS TABLET               |
| 57629060010 | MECLIZINE 25 MG TABLET         |
| 57771000702 | CYTO-Q MAX 100 MG/ML LIQUID    |
| 57782039726 | CROMOLYN SODIUM NASAL SPRAY    |
| 57896011005 | VITAMIN A AND D OINTMENT PKT   |
| 57896011414 | WHITE PETROLATUM OINTMENT PKT  |
| 57896016016 | PAIN RELIEF 160 MG/5 ML LIQUID |
| 57896021601 | PAIN RELIEVR 250-250-65MG CPLT |

| NDC         | Name                           |
|-------------|--------------------------------|
| 57896022401 | NIGHT TIME PAIN 25-500 MG CPLT |
| 57896029116 | GERI-TUSSIN DM 200-20 MG/10 ML |
| 57896029316 | GERI-TUSSIN 200 MG/10 ML LIQ   |
| 57896037801 | TRAVEL-EASE 25 MG TABLET       |
| 57896041501 | GERI-KOT 8.6 MG TABLET         |
| 57896042101 | STOOL SOFTENER 100 MG TABLET   |
| 57896042120 | STOOL SOFTENER 100 MG TABLET   |
| 57896045401 | GERI-KOT 8.6 MG TABLET         |
| 57896045801 | SENNA PLUS 8.6-50 MG TABLET    |
| 57896046208 | SENNA 8.8 MG/5 ML SYRUP        |
| 57896047113 | GERI-MUCIL POWDER              |
| 57896050101 | ONE-DAILY MULTI-VITAMIN TAB    |
| 57896050120 | ONE-DAILY MULTI-VITAMIN TAB    |
| 57896052101 | ONE-DAILY MULTI-VIT-IRON TAB   |
| 57896053101 | ONE DAILY MULTIVIT-MINERAL TAB |
| 57896055101 | SENIOR TABS                    |
| 57896055501 | SENNA PLUS 8.6-50 MG TABLET    |
| 57896056512 | HEARTBURN RELIEF LIQUID        |
| 57896060101 | THERA-TABS CAPLET              |
| 57896060110 | THERA-TABS CAPLET              |
| 57896060501 | NEPHRO VITAMINS TABLET         |
| 57896061512 | GENTLE LAXATIVE 1,200 MG/15 ML |
| 57896061912 | GERI-LANTA LIQUID              |
| 57896062101 | THERA-M CAPLET                 |
| 57896062412 | GERI-LANTA SUPREME SUSPENSION  |
| 57896063106 | OCULAR VITAMINS TABLET         |
| 57896063506 | MAGNESIUM CHLORIDE EC 64 MG TB |
| 57896063812 | GERI-MOX ANTACID-ANTIGAS MAX   |
| 57896063912 | GERI-MOX ANTACID-ANTIGAS SUSP  |
| 57896066412 | ANTACID ANTI-GAS MAX STR LIQ   |
| 57896069304 | GERI-TUSSIN 100 MG/5 ML SOLN   |
| 57896069316 | GERI-TUSSIN 100 MG/5 ML SOLN   |
| 57896070916 | FERROUS SULF 220 MG/5 ML LIQ   |
| 57896071401 | MUCUS RELIEF 400 MG CAPLET     |
| 57896073101 | OYSTER SHELL 250-VIT D3 125 TB |
| 57896073604 | GUAIASORB DM LIQUID            |
| 57896073904 | GUAIASORB DM 200-20 MG/10 ML   |
| 57896076201 | CALCIUM CARB 500 MG TAB CHEW   |
| 57896077701 | FERRIC X-150 CAPSULE           |
| 57896079108 | GAS RELIEF (SIMETH) 80 MG CHEW |
| 57896081512 | VITAMIN D3 1,250 MCG TABLET    |
| 57896084401 | PHOSPHORUS-SODIUM-POTASSIUM    |
| 57896086905 | PROBIOTIC 250 MG CAPSULE       |
| 57896087005 | LACTOBACILLUS TABLET           |
| 57896097401 | ALLERGY RELIEF 4 MG TABLET     |

| NDC         | Name                           |
|-------------|--------------------------------|
| 57896097410 | ALLERGY RELIEF 4 MG TABLET     |
| 58204000400 | MVW COMPLETE FORM MULTIVI SFGL |
| 58204000401 | MVW COMPLETE FORM MULTIVIT CHW |
| 58204000404 | MVW COMPLETE FORMUL PEDIA DRPS |
| 58204000406 | MVW COMPLETE FORMUL D3000 SFGL |
| 58204000409 | MVW COMPLETE FORMUL D5000 SFGL |
| 58204000411 | MVW COMPLETE FORMUL D3000 CHEW |
| 58204000417 | HI-D PEDIATRIC DROP            |
| 58204000430 | MVW COMPLETE FORMUL D5000 CHEW |
| 58407033390 | OMEGA-3 FISH OIL 1,400 MG SFGL |
| 58438000571 | CHILDREN'S SLEEP 1 MG/ML LIQ   |
| 58487000141 | FREEDAVITE TABLET              |
| 58487000231 | INOSITOL 650 MG TABLET         |
| 58487000271 | QUIN B STRONG WITH C & ZINC TB |
| 58487000321 | KOBEE TABLET                   |
| 58487000331 | KPN PRENATAL TABLET            |
| 58487000371 | MONOCAPS TABLET                |
| 58487000471 | PARVLEX TABLET                 |
| 58487000501 | QUINTABS-M TABLET              |
| 58487000631 | YELETS TABLET                  |
| 58487000672 | VITAMIN C 100 MG TABLET        |
| 58487000801 | VITAMIN B-1 50 MG TABLET       |
| 58487001391 | QUINTABS TABLET                |
| 58487001571 | FRUIT C-500 TABLET CHEWABLE    |
| 58487001611 | KALA TABLET                    |
| 58487001741 | VITAMIN C TR 1,000 MG TABLET   |
| 58487001751 | MAGNESIUM GLUCONATE TABLET     |
| 58487001821 | SUPER QUINTS B-50 TABLET       |
| 58487001861 | VITAMIN C POWDER               |
| 58487002321 | CALCIUM LACTATE 100 MG TABLET  |
| 58487002381 | VITAMINS A-D-E TABLET          |
| 58487002461 | L-GLUTAMINE 500 MG TABLET      |
| 58487002571 | ULTRA FREEDA WITH IRON TABLET  |
| 58487002721 | CALCIUM CARB 260 MG TAB CHEW   |
| 58487002811 | ULTRA FREEDA TABLET            |
| 58487002841 | CALCIUM CITRATE 250 MG TABLET  |
| 58487003061 | MAGNESIUM CITRATE 100 MG TAB   |
| 58487003131 | PRENATAL ONE DAILY TABLET      |
| 58487003141 | DAILY VALUE MULTIVITAMIN TAB   |
| 58487003161 | FERROUS FUMARATE 29 MG TAB     |
| 58487003361 | QUINTABS-M IRON FREE TABLET    |
| 58552013204 | GILTUSS HBP 200-20 MG/10 ML LQ |
| 58552013304 | CHILD GILTUSS COUGH-CHEST LIQ  |
| 58552013404 | GILTUSS DIABETIC 200-20MG/10ML |
| 58552014004 | GILTUSS HONEY COUGH-CONGEST LQ |

| NDC         | Name                           |
|-------------|--------------------------------|
| 58552014215 | GILTUSS SEVERE SINUS 0.5% MIST |
| 58552014304 | GILTUSS HONEY DM 30 MG/10 ML   |
| 58552032560 | PROTECT CARDIO AF SOFTGEL      |
| 58552032660 | PROTECT PLUS SO SOFTGEL        |
| 58602000739 | OLOPATADINE HCL 0.2% EYE DROP  |
| 58602042324 | LORATADINE 5 MG/5 ML SOLUTION  |
| 58602070519 | FAMOTIDINE 10 MG TABLET        |
| 58605031116 | MAXI-TUSS G LIQUID             |
| 58605031216 | MAXI-TUSS GMX LIQUID           |
| 58607010565 | MYNATAL-Z CAPTAB               |
| 58607011185 | MYFERON 150 CAPSULE            |
| 58607011200 | MYFERON-150 FORTE CAPSULE      |
| 58607018510 | MYNEPHRON CAPSULE              |
| 58607018603 | MYNEPHROCAPS SOFTGEL           |
| 58607052057 | MYVITALIFE SOFT-GEL CAPSULE    |
| 58607081120 | MYNATAL PLUS CAPTAB            |
| 58657013390 | THRIVITE RX TABLET             |
| 58657016012 | SODIUM FLUORIDE 0.25 (0.55) MG |
| 58657016110 | SODIUM FLUORIDE 0.5 MG(1.1 MG) |
| 58657016212 | SODIUM FLUORIDE 1 MG (2.2 MG)  |
| 58657017001 | M-NATAL PLUS TABLET            |
| 58657031116 | POTASS CIT-SOD CIT-CITRIC SOLN |
| 58657032350 | TRI-VITE-FLUORIDE 0.25 MG/ML   |
| 58657032450 | TRI-VITE-FLUORIDE 0.5 MG/ML    |
| 58657032650 | MULTIVIT-FLUOR 0.5 MG/ML DROP  |
| 58657050816 | GUAIFENESIN 100 MG/5 ML SOLN   |
| 58657050916 | GUAIFENESIN 100 MG/5 ML LIQUID |
| 58657052404 | M-PAP 160 MG/5 ML LIQUID       |
| 58657052504 | M-PAP 160 MG/5 ML LIQUID       |
| 58657052804 | M-DRYL 12.5 MG/5 ML SOLUTION   |
| 58657052816 | M-DRYL 12.5 MG/5 ML SOLUTION   |
| 58659330003 | TUSSIN 100 MG/5 ML SYRUP       |
| 58790000560 | THERA TEARS STERILID CLEANSER  |
| 58809018708 | VANACOF XP 18-396 MG/15 ML LIQ |
| 58809037504 | Z-BUM 22% DIAPER RASH CREAM    |
| 58809045004 | COZIMA 24% DIAPER RASH CREAM   |
| 58809055508 | VANACOF DM 18-200-10 MG/15 ML  |
| 58809065008 | VANALICE GEL                   |
| 58809065150 | PEDIACLEAR PD 0.625 MG/ML DROP |
| 58809077008 | PEDIACLEAR-8 12.5 MG/15 ML LIQ |
| 58980040912 | GLYCERIN PEDIATRIC SUPPOSITORY |
| 58980082330 | LIDOCAINE ANORECTAL 5% CREAM   |
| 59390003022 | ACNECLEAR GEL                  |
| 59390003526 | ALTAMIST 0.65% NOSE SPRAY      |
| 59390003613 | 12 HOUR NASAL RELIEF SPRAY     |

| NDC         | Name                           |
|-------------|--------------------------------|
| 59390018513 | ULTRA FRESH 0.5% EYE DROP      |
| 59390018950 | FOR STY RELIEF EYE OINTMENT    |
| 59427014925 | GUMMIES CHILDREN MULTIVITAMIN  |
| 59450000174 | KRO NICOTINE 7 MG/24HR PATCH   |
| 59450000274 | KRO NICOTINE 14 MG/24HR PATCH  |
| 59450000374 | KRO NICOTINE 21 MG/24HR PATCH  |
| 59528031701 | NEPHPLEX RX TABLET             |
| 59528033102 | CALPHRON 667 MG TABLET         |
| 59528041605 | MAGNEBIND 400 TABLET           |
| 59528050805 | MAGNEBIND 300 TABLET           |
| 59528061601 | RENAPLEX-D TABLET              |
| 59528198801 | VITAL-D RX TABLET              |
| 59528445601 | NEPHRON FA TABLET              |
| 59741010104 | APAP 160 MG/5 ML SOLUTION      |
| 59779002272 | CVS HEARTBURN RELIEF 200 MG TB |
| 59779006200 | CVS CLOTRIMAZOLE-3 2% CREAM    |
| 59779009489 | CVS NASAL DECONG PE 10 MG TAB  |
| 59779011701 | CVS LANSOPRAZOLE DR 15 MG CAP  |
| 59779013401 | CVS STOOL SOFTENER 240 MG SFGL |
| 59779018224 | CVS CHOCOLATED LAXATIVE 15 MG  |
| 59779023508 | CVS PAIN RELIEF PM CAPLET      |
| 59779028826 | CVS CHILD'S CHEST CONGEST LIQ  |
| 59779030826 | CVS CHILD PAIN-FEVER 160 MG/5  |
| 59779042098 | CVS NICOTINE 2 MG CHEWING GUM  |
| 59779042296 | CVS NICOTINE 4 MG CHEWING GUM  |
| 59779046378 | CVS ALLERGY RELIEF 4 MG TABLET |
| 59779050015 | CVS WART REMOVER 17% LIQUID    |
| 59779053664 | CVS BACITRACIN 500 UNIT/G OINT |
| 59779057953 | CVS CHILD FEVER RED 120 MG SUP |
| 59779066916 | CVS HEMORRHOIDAL OINTMENT      |
| 59779069308 | CVS SEVERE COLD-FLU NIGHT LIQ  |
| 59779071826 | CVS TIOCONAZOLE-1 6.5% OINTMNT |
| 59779081710 | CVS NASAL SPRAY 0.05%          |
| 59779083734 | CVS CHILD ALLERGY RLF 1 MG/ML  |
| 59779095911 | CVS ENEMA READY TO USE         |
| 60002060370 | GENADEK STEP 1 MULTIVIT SFGL   |
| 60002060372 | GENADEK STEP 2 MULTIVIT SFGL   |
| 60002060374 | GENADEK LIQUID DROPS           |
| 60004041780 | CVS COVID19 TEST BY PHARMACIST |
| 60006019166 | ON-GO COVID-19 AG AT HOME TEST |
| 60008040780 | INDICAID COVID-19 AG HOME TEST |
| 60008095486 | GENABIO COVID-19 RAPID AT-HOME |
| 60009003160 | BIOLYTE LIQUID                 |
| 60009074320 | SPEEDYSWAB COVID-19 HOME TEST  |
| 60010003310 | ADVIN COVID-19 AG HOME TEST    |

| NDC         | Name                           |
|-------------|--------------------------------|
| 60258000601 | PHOS-NAK PACKET                |
| 60258010101 | IRON 100 PLUS TABLET           |
| 60258010901 | VITAMIN E 200 UNIT SOFTGEL     |
| 60258016001 | RENA-VITE TABLET               |
| 60258016101 | RENA-VITE RX TABLET            |
| 60258016201 | RENAL CAPS SOFTGEL             |
| 60258017201 | MAG-G 500 MG TABLET            |
| 60258017901 | PRENATAL-U CAPSULE             |
| 60258018001 | HEMATINIC-VITAMIN-MINERAL TAB  |
| 60258018101 | HEMATINIC-FOLIC ACID TABLET    |
| 60258018201 | FERROUS FUMARATE 324 MG TABLET |
| 60258018501 | POLY-IRON 150 MG CAPSULE       |
| 60258018601 | POLY-IRON 150 FORTE CAPSULE    |
| 60258019001 | PRENATABS FA TABLET            |
| 60258019201 | TRINATE TABLET                 |
| 60258019309 | PRENATABS RX TABLET            |
| 60258019601 | PRENATAL 19 TABLET             |
| 60258095106 | SENNA-S TABLET                 |
| 60432003304 | DIPHEN AF 12.5 MG/5 ML ELIXIR  |
| 60569000006 | DIABETIC TUSSIN 1.4% SPRAY     |
| 60569006204 | DIABETIC TUSSIN DM LIQUID      |
| 60569006304 | DIABETIC TUSSIN EX LIQUID      |
| 60569006404 | DIABETIC TUSSIN DM MAX-STR LIQ |
| 60569044302 | ZOSTRIX HP 0.1% CREAM          |
| 60569055602 | ZOSTRIX HP 0.1% FOOT CREAM     |
| 60687026742 | DIPHENHYDRAMINE 25 MG/10 ML    |
| 60687043127 | HEALTHYLAX POWDER PACKET       |
| 60760049150 | TACTINAL 325 MG TABLET         |
| 61037042101 | SCRUB CHLORHEXIDINE GLUC 4%    |
| 61269006673 | MINOXIDIL 2% SOLUTION          |
| 61269016350 | MULTIVIT-IRON-FLUOR 0.25 MG/ML |
| 61269016450 | VIT A,C,D-FLUORIDE 0.25 MG/ML  |
| 61269016750 | VIT A,C,D-FLUORIDE 0.5 MG/ML   |
| 61269052794 | CHILD ALLERGY (FEXO) 30 MG/5ML |
| 61269073607 | MICONAZOLE 7 100 MG VAG SUPP   |
| 61269091060 | IRON CHEWS 15 MG TABLET CHEW   |
| 61783000012 | FC2 FEMALE CONDOM              |
| 61787051404 | DIABETIC TUSSIN 200 MG/10 ML   |
| 61924017416 | DERMACERIN CREAM               |
| 61924017804 | DERMACERIN CREAM               |
| 61924018404 | DERMAPHOR OINTMENT             |
| 61924018408 | DERMAPHOR OINTMENT             |
| 61924021404 | DERMAMED OINTMENT              |
| 62011001201 | HM INF IBUPROFEN 50 MG/1.25 ML |
| 62011002801 | HM ASPIRIN 81 MG CHEWABLE TAB  |

| NDC         | Name                           |
|-------------|--------------------------------|
| 62011004501 | HM ALCOHOL 70% PREP PADS       |
| 62011006301 | HM CHILD'S COLD-COUGH ELIXIR   |
| 62011007101 | HM ALLERGY RLF-NASAL DECONG TB |
| 62011008001 | HM ORIGINAL NASAL SPRAY 0.05%  |
| 62011009401 | HM BACITRACIN ZN 500 UNIT/GM   |
| 62011009501 | HM HYDROCORTISONE 1% CREAM     |
| 62011009701 | HM DOUBLE ANTIBIOTIC OINTMENT  |
| 62011011401 | HM CALAMINE LOTION             |
| 62011011701 | HM IODINE 2% MILD TINCTURE     |
| 62011011801 | HM POVIDONE-IODINE 10% SOLN    |
| 62011011902 | HM LICE KILLING SHAMPOO        |
| 62011013401 | HM FIBER 500 MG CAPLET         |
| 62011015304 | HM CLEARLAX POWDER             |
| 62011018901 | HM GAS RELIEF 125 MG CHEW TAB  |
| 62011019901 | HM NICOTINE 2 MG MINI LOZENGE  |
| 62011020001 | HM NICOTINE 4 MG MINI LOZENGE  |
| 62011023802 | HM PAIN RELIEF 500 MG GELCAP   |
| 62011025601 | HM PAIN RELIEVER PM GELTAB     |
| 62011026703 | HM HYDROGEN PEROXIDE 3% SOLN   |
| 62011027001 | HM READY TO USE MIN OIL ENEMA  |
| 62011027101 | HM ENEMA READY TO USE          |
| 62011027601 | HM DUAL ACTION COMPLETE TB CHW |
| 62011027701 | HM LAXATIVE EC 5 MG TABLET     |
| 62011029201 | HM ANTACID-ANTIGAS SUSPENSION  |
| 62011029701 | HM REDNESS RELIEF EYE DROPS    |
| 62011030901 | HM ALLERGY RELIEF 25 MG CAP    |
| 62011031001 | HM ALLERGY RELIEF 25 MG TABLET |
| 62011031101 | HM ALLERGY RELIEF 4 MG TABLET  |
| 62011032001 | HM 24H NASAL ALLERGY 55MCG SPR |
| 62011032501 | HM URINARY PAIN RLF 95 MG TAB  |
| 62011033501 | HM IBUPROFEN PM CAPLET         |
| 62011033901 | HM CHILD ACETAMINOPHEN 160 MG  |
| 62011034101 | HM MOTION SICKNESS 50 MG TAB   |
| 62011034301 | HM NIGHTTIME SLEEP 25 MG CPLT  |
| 62011035001 | HM NICOTINE 14 MG/24HR PATCH   |
| 62011035101 | HM NICOTINE 21 MG/24HR PATCH   |
| 62011036501 | HM ANTI-DIARRHEAL-ANTIGAS CPLT |
| 62011036801 | HM IBUPROFEN 200 MG SOFTGEL    |
| 62011038201 | HM MUCUS RELIEF ER 600 MG TAB  |
| 62011038701 | HM SENNA 8.6 MG TABLET         |
| 62011039001 | HM ANTI-DIARRHEAL 2 MG SOFTGEL |
| 62011040101 | HM SLEEP AID 25 MG TABLET      |
| 62011040301 | HM GENTLE LAXATIVE 10 MG SUPP  |
| 62011040601 | HM DAY SEVERE COLD-FLU CAPLET  |
| 62011040901 | HM ALLERGY RELIEF 180 MG TAB   |

| NDC         | Name                           |
|-------------|--------------------------------|
| 62011041001 | HM NIGHT TIME LIQUID CAP       |
| 62011041201 | HM URINARY PAIN RLF 99.5 MG    |
| 62011041601 | HM NIGHTTIME SLEEP AID 50 MG   |
| 62011042401 | HM MUCUS DM ER 600-30 MG TAB   |
| 62011043201 | HM ASPIRIN 325 MG TABLET       |
| 62011043301 | HM DOCOSANOL 10% CREAM         |
| 62011043601 | HM STOMACH RELIEF 525 MG/15 ML |
| 62011044301 | HM CHILD'S DIBROMM COLD-ALLGY  |
| 62011045001 | HM ARTHRITIS PAIN 1% GEL       |
| 62011045501 | HM ALLERGY-CONGEST ER 60-120MG |
| 62011046801 | HM EYE ALLERGY ITCH RLF 0.2%   |
| 62011046901 | HM EYE ALLERGY ITCH-RED 0.1%   |
| 62011047401 | HM STOOL SOFTENER 250 MG SFTGL |
| 62011047601 | HM ALLERGY RELIEF 60 MG TABLET |
| 62011048301 | HM EAR WAX REMOVAL 6.5% DROP   |
| 62011048401 | HM EAR WAX REMOVAL 6.5% KIT    |
| 62103000194 | BOUDREAUXS BUTT PASTE          |
| 62372050001 | MYLANTA MAXIMUM STRENGTH PKT   |
| 62372080150 | MYLANTA GAS 125 MG CHEW TABLET |
| 62441040010 | FENESIN IR 400 MG TABLET       |
| 62441041510 | FENESIN DM IR TABLET           |
| 62542020030 | MULTIVIT-FLUOR 0.25 MG TAB CHW |
| 62542030030 | MULTIVIT-FLUOR 0.5 MG TAB CHEW |
| 62542040030 | MULTIVIT-FLUORIDE 1 MG TAB CHW |
| 62559021208 | PINK BISMUTH MAX STR SUSP      |
| 62756071860 | OPCICON ONE-STEP 1.5 MG TABLET |
| 62756072060 | MY CHOICE 1.5 MG TABLET        |
| 63029032201 | DEBROX 6.5% EAR DROPS          |
| 63044003060 | ZIKS ARTHRITIS PAIN RELIEF     |
| 63044019801 | IFEREX 150 FORTE CAPSULE       |
| 63044019862 | IFEREX 150 FORTE CAPSULE       |
| 63044020301 | IFEREX 150 CAPSULE             |
| 63044062230 | RENO CAPS SOFTGEL              |
| 63044063217 | HEMATOGEN FA SOFTGEL           |
| 63044063301 | HEMATOGEN FORTE SOFTGEL        |
| 63044063510 | TRICON CAPSULE                 |
| 63044064510 | VIC-FORTE CAPSULE              |
| 63187037312 | ACETAMINOPHEN 120 MG SUPPOS    |
| 63187085304 | TUSSIN DM SYRUP                |
| 63187096018 | GUAIFENESIN-PSE ER 600-60 MG   |
| 63298000027 | SODIUM CHLORIDE 1 GM TABLET    |
| 63323090390 | CHEMO TRANSFER PIN             |
| 63323090590 | MINI TRANSFER PIN              |
| 63323090790 | TRANSFER PIN                   |
| 63323090890 | UNIVERSAL SYRINGE TIP ADPTR    |

| NDC         | Name                           |
|-------------|--------------------------------|
| 63629113301 | SODIUM FLUORIDE 1 MG (2.2 MG)  |
| 63629458901 | ACETADRYL 500-25 MG CAPLET     |
| 63629889701 | LUBRICANT PM EYE OINTMENT      |
| 63629890701 | SENNA-S 8.6-50 MG TABLET       |
| 63736000008 | BACID WITH LACTOSPORE CAPSULE  |
| 63736000045 | STYE 0.5%-0.6% EYE DROPS       |
| 63736010904 | MONISTAT 7 CREAM               |
| 63736011154 | URISTAT ULTRA 99.5 MG TABLET   |
| 63736012002 | NIX 1% CREME RINSE LIQUID      |
| 63736014308 | STYE LUBRICANT EYE OINTMENT    |
| 63736033942 | DERMAREST ECZEMA 1% LOTION     |
| 63736044101 | 1-DAY 6.5% OINTMENT            |
| 63736044180 | MONISTAT 1 COMBINATION PACK    |
| 63736044305 | MONISTAT 3 COMBO PACK          |
| 63736044700 | MONISTAT CARE 1% CREAM         |
| 63736073005 | NOSTRILLA 0.05% NASAL SPRAY    |
| 63736073020 | DERMAREST PSORIASIS 3% SHAMPOO |
| 63739015910 | MAG-AL PLUS SUSPENSION CUP     |
| 63824001566 | MUCINEX COLD-FLU-SORETHROAT LQ |
| 63824001966 | MUCINEX FAST-MAX DM MAX LIQUID |
| 63824002307 | MUCINEX ER 1,200 MG TABLET     |
| 63824004112 | MUCINEX D ER 1,200-120 MG TAB  |
| 63824005718 | MUCINEX D ER 600-60 MG TABLET  |
| 63824012011 | MUCINEX SINUS-MAX NASAL SPRAY  |
| 63824017163 | DELSYM 30 MG/5 ML SUSPENSION   |
| 63824017363 | CHILD DELSYM COUGH 30 MG/5 ML  |
| 63824021264 | CHILD DELSYM CGH-CLD NIGHT LIQ |
| 63824021366 | DELSYM COUGH+CHEST CNGST DM LQ |
| 63824021464 | CHILD DELSYM COUGH-CHEST DM LQ |
| 63824026266 | MUCINEX SINUS-MAX NITE CONGEST |
| 63824050066 | MUCINEX FAST-MAX NITE COLD-FLU |
| 63824052703 | MUCINEX FAST-MAX COLD-FLU LIQ  |
| 63824053766 | MUCINEX FAST-MAX CHEST-CONGEST |
| 63824094603 | CHILDREN'S MUCINEX COUGH LIQ   |
| 63824095021 | CHILD MUCINEX M-S COLD NIGHT   |
| 63824095107 | CHILD MUCINEX STUFFY NOSE-CHST |
| 63824095404 | CHILD MUCINEX COLD-FLU LIQUID  |
| 63824095864 | CHILD MUCINEX FREEFROM DY COLD |
| 63824096122 | CHILD MUCINEX STUFFY NOSE SPRY |
| 63868000214 | QC NATURA-LAX 17 GM POWDER     |
| 63868002936 | QC ASPIRIN 81 MG CHEWABLE TAB  |
| 63868008410 | QC PAIN RELIEF 500 MG CAPLET   |
| 63868011730 | QC URINARY PAIN RLF 95 MG TAB  |
| 63868014920 | QC MUCUS RELIEF ER 600 MG TAB  |
| 63868019845 | QC MICONAZOLE-7 CREAM          |

| NDC         | Name                           |
|-------------|--------------------------------|
| 63868022315 | QC ARTIFICIAL TEARS DROPS      |
| 63868025915 | QC CLOTRIMAZOLE 1% VAG CREAM   |
| 63868026624 | QC CHOCOLATED LAXATIVE         |
| 63868032206 | QC CASTOR OIL                  |
| 63868032501 | QC NON-ASPIRIN PM CAPLET       |
| 63868035203 | QC ASPIRIN 325 MG TABLET       |
| 63868036320 | QC ASPIRIN EC 81 MG TABLET     |
| 63868041401 | QC ALLERGY (LORAT) 10 MG TAB   |
| 63868042514 | QC ESOMEPRAZOLE MAG DR 20 MG   |
| 63868042720 | QC IBUPROFEN 200 MG MINI SFGL  |
| 63868042914 | QC LANSOPRAZOLE DR 15 MG CAP   |
| 63868046501 | QC NAPROXEN SOD 220 MG TABLET  |
| 63868046650 | QC NAPROXEN SOD 220 MG CAPLET  |
| 63868048501 | QC HEADACHE RELIEF TABLET      |
| 63868050701 | QC NON-ASPIRIN PAIN RELIEF TB  |
| 63868057901 | QC VEGETABLE LAXATIVE 8.6MG TB |
| 63868058501 | QC STOOL SOFTENER 100 MG SFTGL |
| 63868059428 | QC ANTI-ITCH 1% CREAM          |
| 63868060501 | QC NO DRIP NASAL MIST 0.05%    |
| 63868066730 | QC ALLERGY RELIEF 180 MG TAB   |
| 63868067760 | QC INFANT PAIN-FEVER 160 MG/5  |
| 63868069457 | QC ANTACID-ANTIGAS SUSPENSION  |
| 63868069730 | QC NASAL SPRAY 1%              |
| 63868070404 | QC ANTI-NAUSEA LIQUID          |
| 63868071257 | QC ANTACID SUSPENSION          |
| 63868071557 | QC ANTACID-ANTIGAS MAX STR     |
| 63868073001 | QC DICLOFENAC SODIUM 1% GEL    |
| 63868073414 | QC NICOTINE 14 MG/24HR PATCH   |
| 63868073514 | QC NICOTINE 21 MG/24HR PATCH   |
| 63868075350 | QC MUCUS RELIEF DM TABLET      |
| 63868079504 | QC CHILD IBUPROFEN 100 MG/5 ML |
| 63868080248 | QC NASAL DECONGEST 30 MG TAB   |
| 63868081155 | QC SORE THROAT 1.4% SPRAY      |
| 63868082125 | QC OLOPATADINE 0.2% EYE DROP   |
| 63868086854 | QC TUSSIN DM LIQUID            |
| 63868089810 | QC ASPIRIN EC 325 MG TABLET    |
| 63868097910 | QC IBUPROFEN 200 MG CAPLET     |
| 63868098710 | QC NON-ASPIRIN 500 MG GELCAP   |
| 63868099850 | QC MUCUS RELIEF 400 MG CAPLET  |
| 63921013004 | AMERICERIN MOIST CREAM         |
| 63921014004 | AMERIPHOR MOIST OINTMENT       |
| 63921016004 | PROTECTIVE OINTMENT            |
| 63948004293 | PROBIOTIC PEARLS ACIDOPHILUS   |
| 63948004363 | PROBIOTIC PEARLS COMPLETE SFGL |
| 63981000101 | ALLER-FLO 50 MCG SPRAY         |

| NDC         | Name                           |
|-------------|--------------------------------|
| 63981000113 | ALLER-FLO 50 MCG SPRAY         |
| 63981002901 | QUIT 2 MG CHEWING GUM          |
| 63981012409 | QUIT 2 MG LOZENGE              |
| 63981014762 | ALLER-TEC D 5-120 MG TABLET    |
| 63981017001 | QUIT 4 MG CHEWING GUM          |
| 63981019009 | QUIT 4 MG LOZENGE              |
| 63981030604 | LAXACLEAR POWDER               |
| 63981045888 | ALLER-TEC 10 MG TABLET         |
| 63981047543 | CHILD'S ALLER-TEC 1 MG/ML SOLN |
| 63981057148 | ALLER-FEX 180 MG TABLET        |
| 63981059903 | ARTHRITIS PAIN RELIEF 1% GEL   |
| 63981061288 | ALLERCLEAR 10 MG TABLET        |
| 63981069901 | MIGRAINE 250-250-65 MG CAPLET  |
| 63981081201 | MUCUS DM MAX ER 1,200-60 MG TB |
| 63981084748 | ALLER-FEX 180 MG TABLET        |
| 64038010330 | OMNICAP TABLET                 |
| 64980010401 | PHOSPHA 250 NEUTRAL TABLET     |
| 64980014703 | RISAQUAD 8 BILLION CFU CAPSULE |
| 64980015001 | RISACAL-D TABLET               |
| 64980015603 | RISAQUAD-2 CAPSULE             |
| 64980016401 | RISA-BID CAPLET                |
| 64980017303 | FOLITAB 500 CAPLET             |
| 65162001436 | ASPIRIN CHILD 81 MG TAB CHEW   |
| 65162019510 | CALCIUM CITRATE WITH D TABLET  |
| 65197020104 | EMETROL ORAL SOLUTION          |
| 65197027508 | BONINE 25 MG CHEWABLE TABLET   |
| 65197040101 | A AND D OINTMENT               |
| 65504090848 | STOMACH RELIEF 262 MG CHEW TAB |
| 65649010430 | ENVIVE 12 BILLION CFU CAPSULE  |
| 66267092315 | ARTIFICIAL TEARS 1.4% DROPS    |
| 66267097615 | EAR WAX DROPS 6.5%             |
| 66594077701 | PRO FE 180 MG CAPSULE          |
| 66689005601 | ACETAMINOPHEN 650 MG/20.3 ML   |
| 66715097472 | TYLENOL EX-STR 500 MG CAPLET   |
| 67112010100 | TRICARE PRENATAL TABLET        |
| 67112010130 | TRICARE PRENATAL TABLET        |
| 67112090250 | DECARA 50,000 UNIT SOFTGEL     |
| 67172050401 | CLEAR EYES ONCE DAILY 0.2% DRP |
| 67234002001 | ENEMA READY TO USE             |
| 67555014112 | MAXFE CAPLET                   |
| 67618000005 | SLOWMAG 71.5 MG TABLET         |
| 67618010760 | SLOW-MAG 71.5 MG TABLET        |
| 67618011010 | COLACE 2-IN-1 TABLET           |
| 67618011220 | SLOW-MAG 71.5 MG TABLET        |
| 67618012012 | SENOKOT EXTRA STR 17.2 MG TAB  |

| NDC         | Name                           |
|-------------|--------------------------------|
| 67618015001 | BETADINE 10% SOLUTION          |
| 67618015101 | BETADINE 7.5% SCRUB            |
| 67618015104 | BETADINE SURGICAL SCRUB        |
| 67618016003 | BETADINE 5% SPRAY              |
| 67618020004 | BETASEPT 4% SURGICAL SCRUB     |
| 67618020008 | BETASEPT 4% SURGICAL SCRUB     |
| 67618030010 | SENOKOT 8.6 MG TABLET          |
| 67618031001 | SENOKOT-S TABLET               |
| 67618032030 | SENOKOT WHEAT BRAN             |
| 67777000510 | WHITE PETROLATUM OINTMENT      |
| 67777001403 | AQUAGARD 41% HYDRATING OINT    |
| 67777014731 | D-CERIN 33% CREAM              |
| 67777021101 | WHITE PETROLATUM SKIN PROTECT  |
| 67981008797 | DUREX AIR CONDOM               |
| 68001044998 | LORATADINE 5 MG/5 ML SOLUTION  |
| 68016023400 | PV UNIFINE PENTIP PLUS 31GX5MM |
| 68016023700 | PV UNIFINE PENTIP PLUS 32GX4MM |
| 68016030728 | PV UNIFINE PENTIP PLUS 31GX8MM |
| 68016031000 | PV UNIFINE PENTIP PLUS 33GX4MM |
| 68016073800 | PV UNILET MICRO THIN 33G LANCT |
| 68025007030 | PROVELLA TABLET                |
| 68047012016 | LOHIST-D LIQUID                |
| 68047014316 | ENDACOF-DM LIQUID              |
| 68047018516 | NOHIST-LQ LIQUID               |
| 68047018616 | NOHIST-DM LIQUID               |
| 68071004991 | SENNA-DOCUSATE SODIUM TABLET   |
| 68084079425 | SODIUM CHLORIDE 1,000 MG TAB   |
| 68094000459 | CETIRIZINE HCL 5 MG/5 ML CUP   |
| 68094002259 | CHILD DIPHENHYDRAMIN 12.5 MG/5 |
| 68094002459 | CHILD DIPHENHYDRAMIN 25MG/10ML |
| 68094002959 | LOPERAMIDE 1 MG/7.5ML SOLN CUP |
| 68094003701 | CHILD IBUPROFEN 100MG/5ML SYRG |
| 68094011459 | VITAMIN D3 10 MCG TABLET       |
| 68094012061 | LIQUID MULTIVITAMIN 15 ML CUP  |
| 68094012959 | LOPERAMIDE 2 MG/15 ML SOLN CUP |
| 68094023158 | ACETAMINOPHEN 160 MG/5 ML SYR  |
| 68094050359 | IBUPROFEN 200 MG/10ML SUSP CUP |
| 68163057172 | NUSYLLIUM POWDER               |
| 68163070902 | EQ INF GAS RELIEF 20 MG/0.3 ML |
| 68163102208 | EQ ANTACID EXTRA STR CHEW TAB  |
| 68163103307 | EQ ANTACID ULTRA STR TAB CHEW  |
| 68176000010 | DEKAS PLUS LIQUID              |
| 68176000011 | DEKAS PLUS SOFTGEL             |
| 68176000014 | DEKAS PLUS OCEANCAPS           |
| 68180085211 | MY WAY 1.5 MG TABLET           |

| NDC         | Name                           |
|-------------|--------------------------------|
| 68196012100 | ACID-PEP 20 MG TABLET          |
| 68229010202 | CLINERE EARWAX REMOVAL 6.5% KT |
| 68585000575 | MAG64 DR 64 MG TABLET          |
| 68585000801 | ZINC SULFATE 220 MG CAPSULE    |
| 68599020703 | THERA ANTIFUNGAL 2% POWDER     |
| 68599050003 | COUGH DROPS 7.6 MG             |
| 68599118507 | SKIN PROTECTANT A-D 93.5% OINT |
| 68599118705 | SKIN PROTECTANT A-D 93.5% PKT  |
| 68599350001 | PVP PREP 10% SOLUTION          |
| 68599540001 | ANTISEPTIC SKIN CLEANSER 4% PK |
| 69230014620 | IBUPROFEN 200 MG CAPSULE       |
| 69230030324 | ALLERGY RLF(CETRZN) 10 MG SFGL |
| 69230031531 | MUCUS RELIEF ER 1,200 MG TAB   |
| 69230032512 | LOPERAMIDE-SIMETH 2-125 MG TAB |
| 69315020906 | NU-MAG 71.5 MG TABLET          |
| 69315030130 | RECTASMOOTH 5% CREAM           |
| 69339015401 | FERROUS SULF 300 MG/6.8ML SOLN |
| 69367018408 | DM-GUAIF-PE 18-200-10 MG/15 ML |
| 69367018804 | ZINC OXIDE 22% CREAM           |
| 69367019890 | DM-GUAIF-PE 17.5-385-10 MG TAB |
| 69367022301 | WESTAB MINI TABLET             |
| 69367025001 | WES-PHOS 250 MG NEUTRAL TABLET |
| 69367025130 | WESNATAL DHA COMPLETE          |
| 69367025330 | TRIPROLIDINE 0.938 MG/ML DROPS |
| 69367026701 | WESTAB PLUS TABLET             |
| 69367031401 | WESCAPS CAPSULE                |
| 69367031530 | WESCAP-C DHA SOFTGEL           |
| 69367031630 | WESCAP-PN DHA CAPSULE          |
| 69367031730 | WESNATE DHA SOFTGEL            |
| 69367039816 | PYRILAMINE DM 7.5MG-7.5MG/5 ML |
| 69367039985 | MICONAZOLE NITRATE 2% POWDER   |
| 69375000454 | SKIN PROTECTANT 44.28% OINT    |
| 69375000660 | CAPSAICIN HP 0.1% CREAM        |
| 69396002002 | HEMORRHOIDAL OINTMENT          |
| 69464090104 | CLINICLEAN 4% LIQUID           |
| 69464090105 | CLINICLEAN 4% WITH FOAM PUMP   |
| 69517010524 | HEADACHE RELIEF TABLET         |
| 69536028110 | ST. JOSEPH ASPIRIN 81 MG CHEW  |
| 69536028136 | ST. JOSEPH ASPIRIN 81 MG CHEW  |
| 69543023460 | ERGOCALCIFEROL 8,000 UNIT/ML   |
| 69543026010 | VIRT-CAPS SOFTGEL              |
| 69547062702 | NARCAN 4 MG NASAL SPRAY        |
| 69618000701 | RENAL VITAMIN TABLET           |
| 69618003410 | SODIUM BICARB 10 GRAIN TABLET  |
| 69618004201 | VITAMIN D3 125 MCG (5000 UNIT) |

| NDC         | Name                           |
|-------------|--------------------------------|
| 69618005051 | 12 HOUR NASAL SPRAY 0.05%      |
| 69618006106 | GUAIFENESIN 400 MG CAPLET      |
| 69618006259 | POLY-VITA DROPS                |
| 69618006359 | POLY-VITA WITH IRON DROPS      |
| 69618007258 | TUSSIN DM MAX 400-20MG/20ML LQ |
| 69842002415 | CVS NICOTINE 2 MG CHEWING GUM  |
| 69842005711 | CVS MUCUS DM ER 600-30 MG TAB  |
| 69842005910 | CVS MUCUS DM MAX ER 1200-60 MG |
| 69842006319 | CVS ACID CONTROLLER 10 MG TAB  |
| 69842008952 | CVS WOMEN'S GENTLE LAX EC 5 MG |
| 69842016847 | CVS ACETAMINOPHEN 500 MG CPLT  |
| 69842021124 | CVS MUCUS D ER 1,200-120 MG TB |
| 69842026805 | CVS OLOPATADINE 0.1% EYE DROPS |
| 69842026925 | CVS OLOPATADINE 0.2% EYE DROP  |
| 69842032967 | CVS IBUPROFEN 100 MG CHEW TAB  |
| 69842033726 | CVS CHILD ALLERGY 5 MG/5 ML    |
| 69842040321 | CVS MOTION SICKNESS 25 MG TAB  |
| 69842051326 | CVS TUSSIN DM 200-20 MG/20 ML  |
| 69842056910 | CVS SINUS RELIEF 1% NASAL SPRY |
| 69842058620 | CVS HEADACHE 250-250-65MG GLTB |
| 69842061422 | CVS SINUS NASAL SPRAY 0.05%    |
| 69842064810 | CVS NASAL SPRAY 1%             |
| 69842072902 | CVS DICLOFENAC SODIUM 1% GEL   |
| 69842073214 | CVS MUCUS ER 1,200 MG TABLET   |
| 69842074502 | CVS IBUPROFEN 200 MG SOFTGEL   |
| 69842078320 | CVS CHEST CONG-COUGH HBP SFGL  |
| 69842080601 | CVS MUCUS ER 600 MG TABLET     |
| 69842081162 | CVS NAPROXEN SOD 220 MG TABLET |
| 69842081926 | CVS TUSSIN DM 400-20 MG/20 ML  |
| 69842087651 | CVS ACETAMINOPHEN 325 MG GELCP |
| 69842093108 | CVS ACETAMINOPHEN 500 MG TAB   |
| 69842096801 | CVS ACETAMINOPHEN 325 MG TAB   |
| 69842097417 | CVS DICLOFENAC SODIUM 1% GEL   |
| 69842099412 | CVS ALLERGY RELIEF-D TABLET    |
| 69848000609 | ALLERGY 10 MG TABLET           |
| 69968063409 | NEOSPORIN OINTMENT PACKET      |
| 70000000901 | MICONAZOLE-7 CREAM             |
| 70000001001 | REDNESS RELIEF EYE DROPS       |
| 70000001002 | REDNESS RELIEF EYE DROPS       |
| 70000001201 | LUBRICANT 0.5% EYE DROPS       |
| 70000001301 | LUBRICANT 0.6% EYE DROP        |
| 70000001701 | LUBRICANT EYE 0.4%-0.3% DROP   |
| 70000002401 | CASTOR OIL                     |
| 70000002601 | ALCOHOL 70% WIPES              |
| 70000004201 | ALLERGY RELIEF-D TABLET        |

| NDC         | Name                           |
|-------------|--------------------------------|
| 70000004501 | STOMACH RELIEF 525 MG/15 ML    |
| 70000005701 | CHILD COLD-ALLERGY LIQUID      |
| 70000006601 | HEADACHE RLF 250-250-65MG CPLT |
| 70000007001 | POLY BACITRACIN OINTMENT       |
| 70000007701 | LAXATIVE 25 MG TABLET          |
| 70000007901 | BABY SKIN PROTECTANT 41% OINT  |
| 70000008001 | SINUS CONGST-PAIN 325-200-5 MG |
| 70000008301 | HEAD CONGESTION-MUCUS CAPLET   |
| 70000009501 | ESOMEPRAZOLE MAG DR 20 MG TAB  |
| 70000011001 | ALLERGY RELIEF 50 MCG SPRAY    |
| 70000012501 | CHILD ALLERGY 5 MG/5 ML SOLN   |
| 70000012901 | MUCUS RELIEF DM MAX LIQUID     |
| 70000013201 | SINUS RELIEF 1% NASAL SPRAY    |
| 70000013601 | ALLERGY RELIEF 25 MG TABLET    |
| 70000014601 | HEADACHE RELIEF CAPLET         |
| 70000014701 | BUFFERED ASPIRIN 325 MG TB     |
| 70000015701 | IBUPROFEN PM CAPLET            |
| 70000016101 | SINUS PRESSURE-PAIN CAPLET     |
| 70000016201 | ALLERGY RELIEF D-24HR TABLET   |
| 70000016901 | PAIN RELIEVING 10% CREAM       |
| 70000017401 | SLEEP AID 50 MG/30 ML LIQUID   |
| 70000017402 | SLEEP AID 50 MG/30 ML LIQUID   |
| 70000019102 | DAYTIME COLD-FLU RELIEF LIQUID |
| 70000019501 | CHILD COUGH DM ER 30 MG/5 ML   |
| 70000020401 | NASAL ALLERGY 24HR SPRAY       |
| 70000020701 | ALLERGY 25 MG CAPSULE          |
| 70000021801 | ADULT ASPIRIN REGIMEN EC 81 MG |
| 70000023201 | ACID REDUCER DR 20 MG CAP      |
| 70000026101 | CHILD MUCUS RELIEF M-S COLD LQ |
| 70000027002 | SINUS WASH SALINE PACKET       |
| 70000027801 | MUCUS RELIEF DM COUGH TABLET   |
| 70000030901 | CHILD ACETAMINOPHEN 160 MG     |
| 70000032201 | ATHLETE'S FOOT 1% POWDER SPRAY |
| 70000032301 | ANTIFUNGAL 2% POWDER           |
| 70000032401 | COUGH-COLD HBP TABLET          |
| 70000035701 | TIOCONAZOLE-1 6.5% OINTMENT    |
| 70000036201 | 24HR ALLERGY(LEVOCETIRZN) 5 MG |
| 70000036301 | HEARTBURN RELIEF LIQUID        |
| 70000036401 | HEMORRHOIDAL MEDICATED 50% PAD |
| 70000039701 | CALAMINE CLEAR LOTION          |
| 70000040001 | CALAMINE PLUS 1%-8% LOTION     |
| 70000041601 | ACID REDUCER COMPLETE TAB CHEW |
| 70000041701 | ANTI-DIARRHEAL 1 MG/7.5 ML SOL |
| 70000042501 | HEMORRHOIDAL CREAM             |
| 70000042901 | CHILD GLYCERIN SUPPOSITORY     |

| NDC         | Name                           |
|-------------|--------------------------------|
| 70000044101 | SENNA 8.6 MG SOFTGEL           |
| 70000044301 | LAXATIVE 15 MG TABLET          |
| 70000045601 | EYE DROPS ADVANCED RELIEF      |
| 70000045701 | ULTRA LUBRICANT EYE DROPS      |
| 70000047401 | CHILD ALLERGY RLF 12.5 MG/5 ML |
| 70000047701 | CHOCOLATED LAXATIVE            |
| 70000047801 | EAR DROPS FOR SWIMMERS         |
| 70000050101 | ULTRA LUBRICANT 0.4-0.3% DROP  |
| 70000050401 | ALLERGY RELIEF D-12 TABLET     |
| 70000051301 | LUBRICANT EYE OINTMENT         |
| 70000052301 | URINARY PAIN RELIEF 99.5 MG TB |
| 70000052501 | SEVERE COLD-FLU CAPLET         |
| 70000052601 | STOOL SOFTENER-STIM LAX TABLET |
| 70000052701 | SLEEP AID 50 MG SOFTGEL        |
| 70000053101 | MEDICATED DANDRUFF 1% SHAMPOO  |
| 70000055001 | THERAPEUTIC 3% DANDRUFF SHMP   |
| 70000055501 | ARTHRITIS PAIN RELIEVER 1% GEL |
| 70000056301 | VAPOR STEAM LIQUID             |
| 70000056801 | SINUS-HEADACHE 5-325 MG CAPLET |
| 70000057301 | GENTLE LAXATIVE 10 MG SUPP     |
| 70000058401 | SLEEP AID 25 MG SOFTGEL        |
| 70000058501 | ALLERGY RELIEF 25 MG SOFTGEL   |
| 70000058601 | ALLERGY RLF (FEXO) 60 MG TAB   |
| 70000060201 | COLD-SINUS 200 MG-30 MG CAPLET |
| 70000060301 | ASPIRIN REGIMEN 81 MG EC TAB   |
| 70000060801 | MUCUS RELIEF D ER 1,200-120 MG |
| 70000061101 | MIGRAINE 250-250-65 MG GELTAB  |
| 70000062301 | TUSSIN CF MAX SEVERE M-S COLD  |
| 70000062802 | TUSSIN DM 400-20 MG/20 ML LIQ  |
| 70000062901 | CHILD'S MULTI-SYMPTOM COLD LIQ |
| 70000063101 | CHILDREN'S COLD-COUGH LIQUID   |
| 70000063601 | DAYTIME SEVERE COLD-FLU CAPLET |
| 70000063801 | COUGH DROPS 5.4 MG             |
| 70000063901 | COUGH DROPS 7.5 MG             |
| 70000064001 | COUGH DROPS 5.8 MG             |
| 70000065001 | HEMORRHOIDAL RELIEF 5% CREAM   |
| 70030012513 | GS ANTI-ITCH 1% CREAM          |
| 70030012715 | GS PEDIATRIC ELECTROLYTE SOLN  |
| 70030012823 | GS GLUCOSE 4 GRAM TABLET CHEW  |
| 70030012829 | GS GLUCOSE 4 GRAM TABLET CHEW  |
| 70030013050 | GS NASAL DECONGEST 30 MG TAB   |
| 70030013165 | GS IBUPROFEN 200 MG CAPLET     |
| 70030013173 | GS NASAL MOIST 0.65% SPRAY     |
| 70030013186 | GS SLEEP AID 25 MG TABLET      |
| 70030013207 | GS IBUPROFEN 200 MG TABLET     |

| NDC         | Name                           |
|-------------|--------------------------------|
| 70030013239 | GS ASPIRIN 81 MG CHEWABLE TAB  |
| 70030013252 | GS MICONAZOLE 7 CREAM          |
| 70030013333 | GS PRENATAL VITAMINS TABLET    |
| 70030013368 | GS NAUSEA RELIEF LIQUID        |
| 70030013408 | GS TUSSIN DM LIQUID            |
| 70030013504 | GS SINUS NASAL SPRAY 0.05%     |
| 70030013907 | GS SUPHEDRINE 12HR 120 MG CPLT |
| 70030013995 | GS NASAL SPRAY 0.05%           |
| 70030014511 | GS NO DRIP 0.05% NASAL SPRAY   |
| 70030014607 | GS NASAL FOUR 1% NASAL SPRAY   |
| 70030014739 | GS NASAL DECONG PE 10 MG TAB   |
| 70030014828 | GS ACID REDUCER 20 MG TABLET   |
| 70030014844 | GS ALL DAY ALLERGY 10 MG TAB   |
| 70030014915 | GS CLEARLAX POWDER             |
| 70030061885 | KIDS MULTIVITAMIN COMPLETE TAB |
| 70030062804 | MEN UNDER 50 MULTIVITAMIN TAB  |
| 70030062805 | MEN 50 PLUS MULTIVITAMIN TAB   |
| 70069001701 | OLOPATADINE HCL 0.1% EYE DROP  |
| 70074058037 | SIMILAC STERILIZED WATER       |
| 70074063057 | PEDIALYTE ADVANCED CARE SOLN   |
| 70074068995 | PEDIALYTE IMMUNE SUPPORT SOLN  |
| 70074080240 | PEDIALYTE SOLUTION             |
| 70134040108 | HERBIOMED SEVERE COLD-FLU M-S  |
| 70309008002 | PINAWAY 50 MG/ML SUSPENSION    |
| 70501001300 | NEUTROGENA NORWEGIAN FORMULA   |
| 70501009650 | NEUTROGENA T-SAL 3% SHAMPOO    |
| 70677000202 | SM ALLERGY (DIPHEN) 25 MG CAP  |
| 70677000301 | SM ALLERGY RELIEF 25 MG TABLET |
| 70677000401 | SM ALLERGY 4 MG TABLET         |
| 70677000501 | SM NASAL DECONGEST 30 MG TAB   |
| 70677001301 | SM TRIPLE ANTIBIOTIC OINTMENT  |
| 70677001601 | SM ESOMEPRAZOLE MAG DR 20 MG   |
| 70677002201 | SM MOTION SICKNESS 50 MG TAB   |
| 70677002401 | SM NIGHTTIME SLEEP 25 MG CPLT  |
| 70677003601 | SM LORATADINE-D 12 HOUR TABLET |
| 70677003701 | SM DAY TIME COLD-FLU RLF SFTGL |
| 70677004601 | SM IBUPROFEN 200 MG SOFTGEL    |
| 70677004801 | SM TUSSIN DM 400-20 MG/20 ML   |
| 70677005401 | SM ANTI-DIARRHEAL 1 MG/7.5 ML  |
| 70677006801 | SM SLEEP AID 25 MG TABLET      |
| 70677007101 | SM ASPIRIN EC 325 MG TABLET    |
| 70677007201 | SM IBUPROFEN IB 100 MG CHEW TB |
| 70677007401 | SM FEXOFENADINE HCL 180 MG TAB |
| 70677007801 | SM URINARY PAIN RLF 99.5 MG TB |
| 70677008301 | SM STOOL SOFTENER-LAXATIVE TAB |

| NDC         | Name                           |
|-------------|--------------------------------|
| 70677009201 | SM ASPIRIN 325 MG TABLET       |
| 70677010101 | SM CHILD COLD-ALLERGY LIQUID   |
| 70677010801 | SM ARTHRITIS PAIN 1% GEL       |
| 70677011501 | SM ANTACID-ANTIGAS LIQUID      |
| 70677011901 | SM MIGRAINE 250-250-65 MG CPLT |
| 70677012201 | SM OLOPATADINE 0.2% EYE DROP   |
| 70677013901 | SM TUSSIN DM 200-20 MG/20 ML   |
| 70677014201 | SM ALL DAY ALLERGY 10 MG TAB   |
| 70677014401 | SM CHILD ALLERGY 12.5 MG/5 ML  |
| 70677014601 | SM ALL DAY ALLERGY-D TABLET    |
| 70677014701 | SM ARTHRITIS PAIN ER 650 MG TB |
| 70677015001 | SM CHILD IBUPROFEN 100 MG/5 ML |
| 70677016101 | SM SEVERE COLD-FLU NIGHTTME LQ |
| 70677100001 | FT ANTIFUNGAL 2% TOPICAL CREAM |
| 70677100101 | FT ANTIFUNGAL 1% CREAM         |
| 70677100201 | FT ATHLETE'S FOOT 1% CREAM     |
| 70677100401 | FT ALLERGY MULTI-SYMPTOM CPLT  |
| 70677100501 | FT SINUS SEVERE 325-200-5 MG   |
| 70677100701 | FT AD ALLERGY (CETRZN) 10MG TB |
| 70677100801 | FT ALLERGY (FEXO) 60 MG TABLET |
| 70677100901 | FT ALLERGY (FEXO) 180 MG TAB   |
| 70677101101 | FT MUCUS RELIEF D ER 600-60 MG |
| 70677101201 | FT CHILD ALLERGY 12.5 MG/5 ML  |
| 70677101301 | FT MUCUS RELIEF ER 600 MG TAB  |
| 70677101401 | FT ALLERGY (DIPHEN) 25 MG TAB  |
| 70677101501 | FT ALLERGY (DIPHEN) 25 MG CAP  |
| 70677101601 | FT ALLERGY (CHLORPHEN) 4 MG TB |
| 70677101701 | FT NASAL DECONGEST 30 MG TAB   |
| 70677101801 | FT ALLERGY RELIEF D-24HR TAB   |
| 70677102001 | FT ALL DY ALLERGY-D 5-120MG TB |
| 70677102101 | FT ALLERGY RELIEF 50 MCG SPRAY |
| 70677102201 | FT ALLERGY (LORAT) 10 MG TAB   |
| 70677102301 | FT 24H NASAL ALLERGY 55MCG SPR |
| 70677102401 | FT ALLERGY D-12HR 5-120 MG TAB |
| 70677102501 | FT 12-HR COUGH RLF 30 MG/5 ML  |
| 70677102701 | FT DAYTIME SEVERE CLD-FLU CPLT |
| 70677102901 | FT DAYTIME SEVERE COLD-FLU LIQ |
| 70677103001 | FT NIGHT SEVERE COLD-FLU LIQ   |
| 70677103101 | FT DAYTIME COLD-FLU RELIEF LIQ |
| 70677103201 | FT NIGHTTIME COLD-FLU RLF LIQ  |
| 70677103501 | FT TUSSIN DM 200-20 MG/20 ML   |
| 70677103601 | FT TUSSIN DM 400-20 MG/20 ML   |
| 70677103701 | FT NASAL SPRAY 0.05%           |
| 70677104201 | FT CHILD ALLERGY RLF 1 MG/ML   |
| 70677104401 | FT CHILD COLD-COUGH RELIEF DM  |

| NDC         | Name                           |
|-------------|--------------------------------|
| 70677104601 | FT DOCOSANOL 10% CREAM         |
| 70677104901 | FT MUCUS DM MAX ER 1200-60 MG  |
| 70677105001 | FT MUCUS DM ER 600-30 MG TAB   |
| 70677105101 | FT MUCUS RELIEF ER 1,200 MG TB |
| 70677105301 | FT AD ALLERGY (LORAT) 10 MG TB |
| 70677105401 | FT CHEST CONGEST 400 MG CAPLET |
| 70677105501 | FT CHEST CONG RLF DM 400-20 MG |
| 70677105701 | FT CHILD ALLERGY 5 MG/5 ML SOL |
| 70677106201 | FT ANTI-DIARRHEAL 2 MG SOFTGEL |
| 70677106301 | FT ANTACID-ANTIGAS LIQUID      |
| 70677106401 | FT ANTACID-ANTIGAS MAX STR     |
| 70677106701 | FT GAS RELIEF(SIMETH) 80MG CHW |
| 70677106801 | FT CLEARLAX POWDER             |
| 70677106901 | FT SENNA-S 8.6-50 MG TABLET    |
| 70677107101 | FT STOOL SOFTENER 100 MG TAB   |
| 70677107201 | FT MILK OF MAGNESIA SUSPENSION |
| 70677107701 | FT GAS RELIEF 125 MG CHEW TAB  |
| 70677107801 | FT INFT GAS RLF 20 MG/0.3 ML   |
| 70677108301 | FT FIBER LAXATIVE 625 MG CPLT  |
| 70677108401 | FT FIBER LAXATIVE 500 MG CPLT  |
| 70677108501 | FT CASTOR OIL                  |
| 70677108601 | FT LAXATIVE EC 5 MG TABLET     |
| 70677108701 | FT MOTION SICKNESS 50 MG TAB   |
| 70677108801 | FT MOTION SICKNESS 25 MG TAB   |
| 70677108901 | FT ENEMA READY TO USE          |
| 70677108902 | FT ENEMA READY TO USE TWIN PAK |
| 70677109001 | FT READY TO USE MIN OIL ENEMA  |
| 70677109101 | FT GENTLE LAXATIVE 10 MG SUPP  |
| 70677109401 | FT STOOL SOFTENER-STIM LAX TAB |
| 70677109501 | FT STOOL SOFTENER 100 MG SFTGL |
| 70677109601 | FT STOOL SOFTENER 250 MG SFTGL |
| 70677109701 | FT SENNA LAXATIVE 8.6 MG TAB   |
| 70677109901 | FT ACID REDUCER DR 20 MG CAP   |
| 70677110001 | FT ACID REDUCER-ANTACID TB CHW |
| 70677110101 | FT ACID REDUCER 20 MG TABLET   |
| 70677110201 | FT ACID REDUCER 10 MG TABLET   |
| 70677110301 | FT ACID REDUCER DR 15 MG CAP   |
| 70677110501 | FT ANTI-DIARRHEAL-ANTIGAS CPLT |
| 70677110601 | FT ANTI-DIARRHEAL 2 MG CAPLET  |
| 70677110701 | FT ANTI-DIARRHEAL 1 MG/7.5 ML  |
| 70677110801 | FT HEMORRHOIDAL OINTMENT       |
| 70677111101 | FT MAGNESIUM CITRATE SOLUTION  |
| 70677111301 | FT IBUPROFEN 200 MG MINI SFGL  |
| 70677111401 | FT IBUPROFEN 200 MG SOFTGEL    |
| 70677111501 | FT CHILD IBUPROFEN 100 MG/5 ML |

| NDC         | Name                           |
|-------------|--------------------------------|
| 70677111901 | FT PAIN RELIEF 325 MG TABLET   |
| 70677112001 | FT PAIN RELIEF 500 MG GELCAP   |
| 70677112101 | FT ASPIRIN EC 81 MG TABLET     |
| 70677112201 | FT ASPIRIN EC 325 MG TABLET    |
| 70677112301 | FT 8 HOUR PAIN RLF ER 650 MG   |
| 70677112401 | FT PAIN RELIEF 500 MG TABLET   |
| 70677112501 | FT ARTHRITIS PAIN 1% GEL       |
| 70677112701 | FT CHILD ACETAMINOPHEN 160 MG  |
| 70677112801 | FT NIGHTTIME SLEEP 25 MG CPLT  |
| 70677112901 | FT SLEEP AID 25 MG TABLET      |
| 70677113001 | FT ARTHRITIS PAIN ER 650 MG TB |
| 70677113101 | FT IBUPROFEN PM 200-38 MG CPLT |
| 70677113201 | FT IBUPROFEN 200 MG TABLET     |
| 70677113301 | FT MIGRAINE 250-250-65 MG CPLT |
| 70677113401 | FT ASPIRIN 81 MG CHEWABLE TAB  |
| 70677113601 | FT IBUPROFEN 200 MG CAPLET     |
| 70677113701 | FT ALL DAY PAIN 220 MG CAPLET  |
| 70677113801 | FT PAIN RELIEVER 500 MG CAPLET |
| 70677114201 | FT CHILD PAIN-FEVER 160 MG/5ML |
| 70677114401 | FT INF IBUPROFEN 50 MG/1.25 ML |
| 70677114501 | FT IBUPROFEN IB 100 MG CHEW TB |
| 70677114801 | FT NAPROXEN SODIUM 220 MG CAP  |
| 70677114901 | FT PAIN PM 500-25 MG GELTAB    |
| 70677115101 | FT SLEEP AID 50 MG SOFTGEL     |
| 70677115201 | FT NASAL DECONG PE 10 MG TAB   |
| 70677115301 | FT EAR WAX REMOVAL 6.5% KIT    |
| 70677115401 | FT EAR WAX REMOVAL 6.5% DROP   |
| 70677115501 | FT EYE ALLERGY ITCH RLF 0.2%   |
| 70677115601 | FT EYE ALLERGY ITCH-RED 0.1%   |
| 70677116001 | FT LUBRICANT 0.4-0.3% EYE DROP |
| 70677116401 | FT NICOTINE 2 MG CHEWING GUM   |
| 70677116501 | FT NICOTINE 4 MG CHEWING GUM   |
| 70677117201 | FT NICOTINE 2 MG MINI LOZENGE  |
| 70677117301 | FT NICOTINE 4 MG MINI LOZENGE  |
| 70677117401 | FT NICOTINE 2 MG LOZENGE       |
| 70677117501 | FT NICOTINE 4 MG LOZENGE       |
| 70677118001 | FT NICOTINE 7 MG/24HR PATCH    |
| 70677118101 | FT NICOTINE 14 MG/24HR PATCH   |
| 70677118201 | FT NICOTINE 21 MG/24HR PATCH   |
| 70677118401 | FT LICE KILLING SHAMPOO        |
| 70677118601 | FT ADULT TUSSIN 200 MG/10 ML   |
| 70677118701 | FT ADULT TUSSIN CF LIQUID      |
| 70677118801 | FT PAIN RELIEF(LIDO) 4% PATCH  |
| 70677118901 | FT ASPIRIN 325 MG TABLET       |
| 70677119001 | FT LUBRICANT 0.5% EYE DROP     |

| NDC         | Name                           |
|-------------|--------------------------------|
| 70677119101 | FT STOMACH RELIEF 525 MG/30 ML |
| 70677119601 | FT CALAMINE LOTION             |
| 70677119801 | FT CALDYPHEN 1%-8% LOTION      |
| 70677119901 | FT CALDYPHEN CLEAR LOTION      |
| 70677120801 | FT POVIDONE-IODINE 10% SOL     |
| 70677121101 | FT ANTIBIOTIC 500 UNIT/GM OINT |
| 70677121201 | FT DOUBLE ANTIBIOTIC OINTMENT  |
| 70677121301 | FT ANTI-ITCH 2%-0.1% CREAM     |
| 70677121401 | FT ITCH RELIEF 1% OINTMENT     |
| 70677121501 | FT ITCH RLF WITH ALOE 1% CREAM |
| 70677121701 | FT TRIPLE ANTIBIOTIC OINTMENT  |
| 70677121901 | FT TRIPLE ANTIBIOTIC-PAIN OINT |
| 70677122101 | FT ANTISEPTIC SKIN CLEANSR 4%  |
| 70677122201 | FT MICONAZOLE 7 CREAM          |
| 70677122301 | FT MICONAZOLE 3 COMBO PACK     |
| 70677122401 | FT TIOCONAZOLE-1 6.5% OINTMENT |
| 70677122801 | FT CLOTRIMAZOLE 1% VAG CREAM   |
| 70677122901 | FT URINARY PAIN RLF 95 MG TAB  |
| 70677123001 | FT URINARY PAIN RLF 99.5 MG TB |
| 70677123101 | FT CLOTRIMAZOLE-3 2% CREAM     |
| 70677123601 | FT CHILD ALL DAY ALLER 1 MG/ML |
| 70677124101 | FT ALLERGY (CETRZN) 10 MG TAB  |
| 70677124201 | FT PAIN RELIEF 500 MG CAPLET   |
| 70677124401 | FT PAIN RELIEF 200 MG TABLET   |
| 70677125301 | FT INFANT PAIN-FEVER 160 MG/5  |
| 71149000068 | OMEGAPURE 600 EC SOFTGEL       |
| 71149000097 | MELATONIN 3 MG QUICK DISSOLVE  |
| 71149000120 | SACCHAROMYCIN DF 250 MG CAP    |
| 71149000134 | NIAVASC SR 500 MG TABLET       |
| 71149000145 | OMEGAPURE 780 EC SOFTGEL       |
| 71149000165 | D3-2000 UNIT SOFTGEL           |
| 71149000166 | D3-5000 UNIT SOFTGEL           |
| 71149000217 | OMEGAPURE-820 SOFTGEL          |
| 71149000293 | DHA FROM ALGAE 200 MG SOFTGEL  |
| 71149000455 | OMEGAPURE 900 EC SOFTGEL       |
| 71205013415 | ARTIFICIAL TEARS DROPS         |
| 71205028260 | DOCUZEN 8.6-50 MG TABLET       |
| 71205042524 | ADVIL JR STR 100 MG TAB CHEW   |
| 71205047820 | PHARBETOL 500 MG TABLET        |
| 71205097000 | SENNA-DOCUSATE SODIUM TABLET   |
| 71269025010 | SLO-NIACIN 250 MG TABLET       |
| 71269075010 | SLO-NIACIN 750 MG TABLET       |
| 71309000802 | MUCUS RELIEF 400 MG MINI CPLT  |
| 71321070150 | TRIPROLIDINE 0.625 MG/ML DROP  |
| 71321080230 | VITAMIN E 15 UNIT/0.3 ML DROP  |

| NDC         | Name                           |
|-------------|--------------------------------|
| 71335126102 | SENNOSIDES 8.6 MG TABLET       |
| 71351001001 | PHOSPHOROUS POWDER PACKET      |
| 71351001101 | PHOSPHOROUS 250 MG TABLET      |
| 71351002030 | QUAD-PROBIOTIC 8 BILLION CAP   |
| 71399002004 | MAXRELIEF JR 160 MG/5 ML LIQ   |
| 71399002404 | MAXTUSSIN 200 MG/10 ML LIQUID  |
| 71399002504 | MAXTUSSIN DM 200-20 MG/10 ML   |
| 71399002708 | ONELAX SENNA 8.8 MG/5 ML SYRUP |
| 71399003804 | MAXRELIEF JR 160 MG/5 ML SUSP  |
| 71399003906 | ONELAX DOCUSATE SOD 50 MG/5 ML |
| 71399004006 | ONEVITE FERROUS SULF 220MG/5ML |
| 71399004101 | TEENY TUMMY INF GAS 20MG/0.3ML |
| 71399004901 | ASPERFLEX LIDOCAINE 4% CREAM   |
| 71399005101 | ONELAX MAGNESIUM CITRATE SOLN  |
| 71399006301 | ONEVITE CALCIUM 600MG-D3 10MCG |
| 71399012001 | HYDROCORTISONE 1% LOTION       |
| 71399012801 | MAXSLEEP JUNIOR 1 MG/ML LIQ    |
| 71399065853 | ONELAX FIBER THERAPY POWDER    |
| 71399100404 | TUSSIN DM 20-200 MG/10 ML LIQ  |
| 71399100604 | TUSSIN DM CLEAR 20-200 MG/10ML |
| 71399510101 | HYDROPHOR 42% OINTMENT         |
| 71399740105 | PEDIATRIC D-VITE 10 MCG/ML LIQ |
| 71399744005 | PEDIATRIC POLY-VITE DROPS      |
| 71399748005 | PEDIATRIC FE-VITE 15 MG/ML DRP |
| 71399750405 | PEDIATRIC TRI-VITE DROPS       |
| 71399783601 | ONEVITE DAILY MULTIVITAMIN TAB |
| 71401089416 | VITAMIN D3 1,000 UNIT/10 ML LQ |
| 71401092316 | LIQUID IRON 18 MG/15 ML        |
| 71410010001 | ULTRA OMEGA-3 SOFTGEL          |
| 71610049953 | GUAIFENESIN ER 600 MG TABLET   |
| 71776000110 | FRESHKOTE EYE DROP             |
| 72140002049 | EUCERIN ADVANCED REPAIR CREAM  |
| 72140002435 | AQUAPHOR 41% HEALING OINTMENT  |
| 72140002661 | AQUAPHOR BABY DIAPER RASH 40%  |
| 72140063378 | EUCERIN SKIN CALMING CREAM     |
| 72789028310 | SENNOSIDES 8.6 MG TABLET       |
| 72847031620 | CAPZIX 0.1% CREAM              |
| 72854015966 | MUCINEX FASTMX KICK CNG-CGH LQ |
| 72865013216 | IBUPROFEN 200 MG CAPSULE       |
| 72959001023 | VERTICALM 25 MG TABLET         |
| 73057053008 | VIS GUARD 1.4% DROPS           |
| 73141013501 | OMEGA-3 FISH OIL 1,000 MG CAP  |
| 73796039150 | AIR TUBE WITH AIR PLUGS        |
| 73796069940 | PEAK-AIR PEAK FLOW METER       |
| 74312000190 | B-COMPLEX WITH B-12 TABLET     |

| <b>NDC</b>  | <b>Name</b>                    |
|-------------|--------------------------------|
| 74312000690 | VITAMIN C-ROSE HIP 1,000 MG TB |
| 74312001200 | IRON 28 MG TABLET              |
| 74312001580 | MULTI-DAY PLUS IRON TABLET     |
| 74312001670 | B-1 100 MG TABLET              |
| 74312002610 | ACIDOPHILUS PROBIOTIC TABLET   |
| 74312002832 | MELATONIN 1 MG TABLET          |
| 74312003860 | B-12 2,500 MCG TABLET SL       |
| 74312004130 | MULTI-DAY PLUS MINERALS TABLET |
| 74312005535 | MAGNESIUM 500 MG TABLET        |
| 74312005800 | NIACIN TR 250 MG CAPSULE       |
| 74312006005 | ALPHA LIPOIC ACID 100 MG CAP   |
| 74312007090 | OYSTERCAL-D 500 MG-400 UNIT TB |
| 74312007510 | CALCIUM CITRATE-VIT D CAPLET   |
| 74312007580 | HAIR, SKIN AND NAILS CAPLET    |
| 74312007901 | MELATONIN 3 MG ODT             |
| 74312013168 | SUPER B COMPLEX TABLET         |
| 74312015745 | MELATONIN 5 MG SOFTGEL         |
| 74312017621 | D3-2000 UNIT SOFTGEL           |
| 74312031644 | PROBIOTIC-10 10 BILL CELL CAP  |
| 74312041783 | ABC PLUS TABLET                |
| 74312051697 | BIOTIN 10,000 MCG SOFTGEL      |
| 74312053098 | MELATONIN 5 MG BI-LAYER TABLET |
| 74970003140 | YL VITAMIN C W/RH 1,000 MG TB  |
| 74970003640 | YL BALANCED B-100 TABLET       |
| 74970003655 | YL BALANCE B-50 COMPLEX TAB    |
| 74970003710 | YL VITAMIN E 400 UNIT SOFTGEL  |
| 74970003770 | YL VITAMIN C W/RH 500 MG TAB   |
| 74970004210 | YL ASCORBIC ACID 500 MG TAB    |
| 74970005185 | YL VITAMIN C 1,000 MG TABLET   |
| 74970005500 | YL FOLIC ACID 0.4 MG TABLET    |
| 74980005160 | YL VITAMIN C 500 MG TABLET     |
| 75137010721 | COMPOUND W LIQUID              |
| 75826016320 | FLUORIDE 0.25 MG TABLET CHEW   |
| 75826016420 | FLUORIDE 0.5 MG TABLET CHEW    |
| 75826016520 | FLUORIDE 1 MG TABLET CHEWABLE  |
| 75834001060 | ERGOCALCIFEROL 8,000 UNIT/ML   |
| 75834005001 | NIVA-PLUS TABLET               |
| 75834016712 | WEEKLY-D 1,250 MCG SOFTGEL     |
| 75854030730 | PRENATE AM TABLET              |
| 75854030830 | PRENATE RESTORE SOFTGEL        |
| 75854031130 | PRENATE STAR TABLET            |
| 75854031330 | PRENATE ESSENTIAL SOFTGEL      |
| 75854031430 | PRENATE ELITE TABLET           |
| 75854032030 | CHROMAGEN SOFTGEL              |
| 76314037210 | EMERGEN-C 1,000 MG PACKET      |

| NDC         | Name                           |
|-------------|--------------------------------|
| 76385010617 | KETOTIFEN FUM 0.035% EYE DROPS |
| 76420011430 | IS-D-10,000 250 MCG SOFTGEL    |
| 76420011630 | VITAMIN D3 250 MCG TABLET      |
| 76420029930 | VITALEE TABLET                 |
| 76420037215 | APHEN 325 MG TABLET            |
| 76518001008 | MULTI-VITE LIQUID              |
| 76518003050 | PEDIA POLY-VITE DROPS          |
| 76518004050 | PEDIA POLY-VITE WITH IRON DROP |
| 76518005050 | PEDIA D-VITE 400 UNIT/ML LIQ   |
| 76518006050 | PEDIA IRON 15 MG/ML DROP       |
| 77333011810 | FIBER LAXATIVE 625 MG TABLET   |
| 77333013810 | CENTRAVITES ADULTS TABLET      |
| 77333013910 | CENTRAVITES 50 PLUS TABLET     |
| 77333014625 | CHILD'S CHEWABLE VITAMIN TAB   |
| 77333086110 | THERA-VITE MAX-M TABLET        |
| 77790000110 | VISTA TEARS 0.4-0.3% EYE DROP  |
| 78112001103 | CHLORASEPTIC SORE THROAT SPRAY |
| 78112073621 | MURINE EAR WAX REMOVAL SYSTEM  |
| 78112073623 | MURINE 6.5% EAR DROPS          |
| 78112073645 | CLEAR EYES NATURAL TEARS DROP  |
| 78742000986 | SV VITAMIN B-12 500 MCG TABLET |
| 78742001190 | EQ EAR WAX REMOVAL AID KIT     |
| 78742002344 | SV FISH OIL EC 1,200 MG SOFTGL |
| 78742006331 | SV Q-SORB CO Q-10 200 MG SFTGL |
| 78742006600 | SV MELATONIN TR 10 MG TABLET   |
| 78742043509 | SV CALCIUM 600MG-D3 20MCG TAB  |
| 78742043518 | SV CALCIUM 600 MG TABLET       |
| 78742043574 | SV VITAMIN B-6 100 MG TABLET   |
| 78742043590 | SV VITAMIN E 180 MG SOFTGEL    |
| 78742043617 | SV VIT C-ROSE HIPS 1,000 MG TB |
| 78742043619 | SV VIT C-ROSE HIPS 500 MG TAB  |
| 78742043656 | SV PRENATAL VITAMINS TABLET    |
| 78742044274 | EQ COMPLETE MULTIVITAMIN TAB   |
| 78742044277 | EQ COMPLETE MV ADLT 50 PLUS TB |
| 78742044281 | EQ CALCIUM 600-D3-MINERALS TAB |
| 78742045610 | SV MELATONIN 1 MG TABLET       |
| 79854007882 | CALCIUM CITRATE-VITAMIN D3 LIQ |
| 79854008982 | VITAMIN D3 400 UNIT TAB CHEW   |
| 79854009275 | MEN'S DAILY PACK               |
| 79854009316 | WOMEN'S 50 PLUS MULTIVIT TAB   |
| 79854009322 | MEN'S 50 PLUS MULTIVITAMIN TAB |
| 79854009363 | VITAMIN D3 50 MCG TAB CHEW     |
| 79854010005 | VITAMIN A 8,000 UNIT CAPSULE   |
| 79854040015 | CHILDREN'S CHEW MULTIVITAMIN   |
| 79854073311 | HONEY BEARS IRON-ZINC TAB CHEW |

| NDC         | Name                           |
|-------------|--------------------------------|
| 79854073851 | ZINC LOZENGES                  |
| 79903012420 | EQ MUCUS RELIEF ER 600 MG TAB  |
| 79903017204 | EQ CHLD ACETAMINOPHEN 160 MG/5 |
| 80053000048 | BIO-D-MULSN 400 UNIT/DROP CONC |
| 80053000049 | BIO-D-MULSION FORTE 2,000 UNIT |
| 80053000093 | CHLOROCAPS CAPSULE             |
| 80196056775 | PURE AND GENTLE SALINE ENEMA   |
| 80681000300 | THEREMS MULTIVITAMIN TABLET    |
| 80681001000 | COENZYME Q-10 100 MG SOFTGEL   |
| 80681002000 | MULTIVITAMIN TABLET            |
| 80681002200 | REGULOID CAPSULE               |
| 80681002300 | ANTIOXIDANT FORMULA TABLET     |
| 80681004500 | CALCIUM CIT 315 MG-VIT D3 5MCG |
| 80681005000 | DAILY-VITE TABLET              |
| 80681005200 | EYE MULTIVITAMIN TABLET        |
| 80681006300 | TAB-A-VITE MULTIVIT WITH IRON  |
| 80681007600 | MULTIVITAMIN WITH MINERALS TAB |
| 80681009700 | VITAMIN B-1 50 MG TABLET       |
| 80681010000 | GLUCOSE 3.75 GRAM TABLET CHEW  |
| 80681011200 | MULTIVITAMIN-ZINC-STRESS TAB   |
| 80681012400 | TAB-A-VITE MULTIVIT WITH IRON  |
| 80681012900 | VITAMIN C 250 MG TABLET CHEW   |
| 80681013100 | VITAMIN D3 125 MCG CAPSULE     |
| 80681013200 | VITAMIN D3 50 MCG TABLET       |
| 80681014101 | CERTAVITE SENIOR TABLET        |
| 80681015400 | VITAMIN B COMPLEX-VITAMIN C TB |
| 80681016000 | HIGH POTENCY MULTIVITAMIN TAB  |
| 80681017200 | SODIUM-POTASSIUM-PHOS POWDER   |
| 80681017400 | VITAMIN D3 1,250 MCG CAPSULE   |
| 80707000570 | NASAL RELIEF 0.05% SPRAY       |
| 81033021305 | DM-GUAIFENESIN 5-100MG/5ML CUP |
| 81033021310 | DM-GUAIFENSN 10-200MG/10ML CUP |
| 81033050150 | MULTIVITAMIN-MULTIMIN 15ML CUP |
| 81131000223 | SV CO Q-10 50 MG SOFTGEL       |
| 81131000720 | SV VITAMIN D3 2,000 UNIT SFTGL |
| 81131003413 | EQ CHILD MULTIVITAMIN GUMMIES  |
| 81131003711 | EQ SLOW RELEASE IRON 45 MG TAB |
| 81131004597 | SV CALCIUM CITRATE-VIT D3 TAB  |
| 81131005584 | EQ ONE DAILY MEN'S 50 PLUS TAB |
| 81131005855 | SV PROBIOTIC ACIDOPHILUS CPLT  |
| 81131006043 | RELION KETONE TEST STRIP       |
| 81131006044 | RELION ALCOHOL 70% SWABS       |
| 81131007162 | SV FISH OIL 1,000 MG SOFTGEL   |
| 81131007164 | SV FOLIC ACID 800 MCG TABLET   |
| 81131007178 | SV SLOW RELEASE IRON 45 MG TAB |

| NDC         | Name                           |
|-------------|--------------------------------|
| 81131007179 | SV MAGNESIUM OXIDE 400 MG TAB  |
| 81131007181 | SV FISH OIL 1,000 MG SOFTGEL   |
| 81131008239 | EQ GLYCERIN 99.5% LIQUID       |
| 81131009371 | SV IRON 65 MG TABLET           |
| 81131011137 | SV ACIDOPHILUS CAPLET          |
| 81131011138 | SV ACIDOPHILUS CAPLET          |
| 81131011147 | SV BIOTIN 5,000 MCG SOFTGEL    |
| 81131014780 | EQ CALCIUM CIT 315-VIT D3 250  |
| 81131031265 | SV ALGAL OMEGA-3 DHA 200 MG    |
| 81131057368 | SV CO Q-10 100 MG SOFTGEL      |
| 81131057371 | SV VITAMIN C 500 MG TAB CHEW   |
| 81131067885 | SV VITAMIN E 670 MG SOFTGEL    |
| 81131067887 | SV PRENATAL TABLET             |
| 81131069697 | SV VITAMIN E 400 UNIT SOFTGEL  |
| 81131069708 | SV FOLIC ACID 800 MCG TABLET   |
| 81131069984 | EQ TIOCONAZOLE-1 6.5% OINTMENT |
| 81131069991 | EQ FIBER THERAPY POWDER        |
| 81131069993 | EQ MILK OF MAGNESIA SUSPENSION |
| 81131069996 | EQ LIQUID ANTACID SUSP         |
| 81131070001 | EQ ANTACID EX-STR CHEW TABLET  |
| 81131074219 | EQ VISION FORMULA TABLET       |
| 81131077648 | EQ WOMEN'S LAXATIVE 5 MG TAB   |
| 81131077943 | EQ ONE DAILY WOMEN'S HEALTH TB |
| 81131077947 | EQ ONE DAILY MEN'S TABLET      |
| 81131081234 | EQ ONE DAILY WOMEN'S TABLET    |
| 81131083747 | EQ CALCIUM 600MG-D3 20MCG TAB  |
| 81131083748 | EQ CALCIUM 500-VIT D3 400 TAB  |
| 81131086586 | EQ CHILD COMPLETE CHEW TABLET  |
| 81131092840 | EQ ONE DAILY MEN'S TABLET      |
| 81131092881 | SV CALC 600 MG-D3 12.5MCG SFGL |
| 81131092882 | SV BIOTIN 1,000 MCG SOFTGEL    |
| 81131092886 | SV VITAMIN C TR 1,000 MG TAB   |
| 81131092889 | SV ACIDOPHILUS TABLET          |
| 81317040350 | IRRIGATION SYRINGE             |
| 81421002001 | DULCOLAX EC 5 MG TABLET        |
| 81421002202 | DULCOLAX SS 100 MG LIQUID GEL  |
| 81421002203 | DULCOLAX SS 100 MG SOFTGEL     |
| 81421002910 | DULCOLAX 1,200 MG/15 ML LIQUID |
| 81421003602 | ZANTAC-360(FAMOTIDINE) 10MG TB |
| 81421003610 | ZANTAC-360(FAMOTIDINE) 20MG TB |
| 81533020015 | CAPSAID ES 0.1% CREAM          |
| 81603062510 | DROPSAFE ALCOHOL 70% PREP PADS |
| 82028008085 | UPCAL D POWDER PACKET          |
| 82607066026 | FLOWFLEX COVID-19 AG HOME TEST |
| 82954010001 | RIVIVE 3 MG NASAL SPRAY        |

| NDC         | Name                           |
|-------------|--------------------------------|
| 83076000001 | DAILY MULTIVITAMIN CAPSULE     |
| 83076000007 | OMEGA-3 EC SOFTGEL             |
| 83076000021 | ULTRA COQ10 75 MG SOFTGEL      |
| 83268010461 | PURE L-ARGININE HCL 500 MG CAP |
| 83291020032 | EYES ALIVE LUB 0.5% EYE DROPS  |
| 83490044061 | VORTEX ADULT MASK              |
| 83490044068 | BUBBLES THE FISH II PEDI MASK  |
| 83490044070 | WING TIP TUBING                |
| 83490044078 | ADULT AEROSOL MASK             |
| 83490085007 | PRONEB ULTRA FILTER SET        |
| 83592000305 | WELL VITAMIN B-12 500 MCG TAB  |
| 83592000505 | WELL FOLIC ACID 1,000 MCG TAB  |
| 83592000605 | WELL VITAMIN B-6 100 MG TABLET |
| 83592001205 | WELL VITAMIN B-12 1,000 MCG TB |
| 83592001305 | WELL VITAMIN D3 25 MCG SOFTGEL |
| 83592001405 | WELL FOLIC ACID 400 MCG TABLET |
| 83592001505 | WELL VITAMIN C 1,000 MG TABLET |
| 83592001605 | WELL VITAMIN D3 50 MCG SOFTGEL |
| 83592001706 | WELL CALCIUM 600MG-D3 10MCG TB |
| 83592001805 | WELL OYSTER CALCIUM 500 MG TAB |
| 83592002105 | WELL VITAMIN E 450 MG CAPSULE  |
| 83592002905 | WELL VITAMIN B2 100 MG TABLET  |
| 83592004405 | WELL NASAL MOIST 0.65% SPRAY   |
| 83592005005 | WELL LYTE ADVANCED HYDRATION   |
| 83592006005 | WELL VITAMIN C 500 MG TABLET   |
| 83592007005 | WELL VITAMIN D3 125 MCG SOFTGL |
| 83592020105 | WELL FERROUS SULF EC 324 MG TB |
| 83592025905 | WELL MAGNESIUM OXIDE 400 MG TB |
| 83592048030 | TOLNAFI-AL 1% LIQUID           |
| 83744025201 | GLUCO BURST 40% GEL            |
| 84389010065 | CARRINGTON MOIST BARRIER CREAM |
| 86790001338 | BENEFIBER POWDER               |
| 86790016280 | BENEFIBER STICK PACKET         |
| 87473000020 | PILOT COVID-19 AT-HOME TEST    |
| 87651012253 | AZO URINARY PAIN RLF 99.5 MG   |
| 87651076019 | AZO HORMONAL HLTH HAPPY CYCLE  |
| 87651076020 | AZO HORMONAL HEALTH CYCLE CARE |
| 87701010406 | GNP ARTIFICIAL TEARS DROPS     |
| 87701012689 | GNP NO DRIP 0.05% NASAL SPRAY  |
| 87701030771 | GNP CHLD IBUPROFEN 100 MG/5 ML |
| 87701030773 | GNP MIGRAINE FORMULA CAPLET    |
| 87701039213 | GNP CALCIUM 500 + VIT D 200 TB |
| 87701039910 | GNP GLUCOSE 4 GRAM TABLET CHEW |
| 87701040021 | GNP MUCUS RELIEF 400 MG TABLET |
| 87701040045 | GNP CALDYPHEN CLEAR LOTION     |

| NDC         | Name                           |
|-------------|--------------------------------|
| 87701040065 | GNP GLYCERIN 99.5% LIQUID      |
| 87701040068 | GNP CASTOR OIL                 |
| 87701040085 | GNP NASAL MOIST 0.65% SPRAY    |
| 87701040102 | GNP CHEST CONGST-COUGH RLF TAB |
| 87701040272 | GNP NATURAL FIBER POWDER       |
| 87701040275 | GNP GAS RELIEF 125 MG CHEW TAB |
| 87701040309 | GNP ASPIRIN EC 81 MG TABLET    |
| 87701040347 | GNP CALCIUM 600 + VIT D TABLET |
| 87701040389 | GNP LORATADINE 5 MG/5 ML SYRUP |
| 87701040399 | GNP ALL DAY ALLERGY 10 MG TAB  |
| 87701040465 | GNP PEDIATRIC ELECTROLYTE SOLN |
| 87701040503 | GNP ALL DAY ALLERGY 10 MG TAB  |
| 87701040585 | GNP CLEARLAX POWDER            |
| 87701040586 | GNP CLEARLAX POWDER            |
| 87701040602 | GNP CHILD MUCUS RLF COUGH LIQ  |
| 87701040608 | GNP ANTACID EX-STR 750 MG CHEW |
| 87701040634 | GNP CENTURY MATURE TABLET      |
| 87701040635 | GNP CENTURY TABLET             |
| 87701040662 | GNP CHILD PAIN-FEVER 160 MG/5  |
| 87701040663 | GNP VITAMIN A AND D OINTMENT   |
| 87701040665 | GNP CHLD ALL DAY ALLER 1 MG/ML |
| 87701040694 | GNP PROBIOTIC 240 MG CAPSULE   |
| 87701040724 | GNP ALCOHOL SWAB               |
| 87701040729 | GNP VITAMIN B-1 100 MG TABLET  |
| 87701040730 | GNP VITAMIN B-6 100 MG TABLET  |
| 87701040731 | GNP VITAMIN B-12 500 MCG TAB   |
| 87701040733 | GNP FOLIC ACID 400 MCG TABLET  |
| 87701040734 | GNP BIOTIN 5,000 MCG CAPSULE   |
| 87701040735 | GNP NIACIN 250 MG TABLET       |
| 87701040737 | GNP B-COMPLEX PLUS VIT C TAB   |
| 87701040738 | GNP VITAMIN C 250 MG TABLET    |
| 87701040739 | GNP VITAMIN C 500 MG TABLET    |
| 87701040743 | GNP VITAMIN C 500 MG TAB CHEW  |
| 87701040744 | GNP VIT C-ROSE HIPS 500 MG TAB |
| 87701040746 | GNP VITAMIN C 1,000 MG TABLET  |
| 87701040748 | GNP VITAMIN D3 10 MCG TABLET   |
| 87701040749 | GNP VITAMIN D3 25 MCG TABLET   |
| 87701040750 | GNP VITAMIN D3 1,000 UNIT TAB  |
| 87701040751 | GNP VITAMIN D3 2,000 UNIT TAB  |
| 87701040752 | GNP VITAMIN D3 5,000 UNIT TAB  |
| 87701040753 | GNP VITAMIN E 90 MG SOFTGEL    |
| 87701040754 | GNP VITAMIN E 400 UNIT SOFTGEL |
| 87701040756 | GNP VITAMIN E 180 MG SOFTGEL   |
| 87701040757 | GNP VITAMIN E 450 MG SOFTGEL   |
| 87701040768 | GNP CALCIUM 600 MG TABLET      |

| NDC         | Name                           |
|-------------|--------------------------------|
| 87701040769 | GNP CALCIUM 600 MG-D3 800 UNIT |
| 87701040771 | GNP CALCIUM 600-D3-MINERALS TB |
| 87701040772 | GNP CALCIUM 600-D3-MIN CHEW TB |
| 87701040773 | GNP CALCIUM CITRATE-VIT D3 TAB |
| 87701040776 | GNP IRON 45 MG TABLET          |
| 87701040777 | GNP IRON 65 MG TABLET          |
| 87701040778 | GNP MAGNESIUM 250 MG TABLET    |
| 87701040786 | GNP HEALTHY EYES TABLET        |
| 87701040787 | GNP HEALTHY EYES SUPERVISION   |
| 87701040788 | GNP MEGA MULTI FOR MEN TABLET  |
| 87701040789 | GNP MEGA MULTI FOR WOMEN TAB   |
| 87701040790 | GNP ONE DAILY ESSENTIAL TABLET |
| 87701040792 | GNP ONE DAILY PLUS IRON TABLET |
| 87701040794 | GNP ONE DAILY TABLET           |
| 87701040795 | GNP ONE DAILY MEN'S 50+ TABLET |
| 87701040796 | GNP ONE DAILY WOMEN'S HLTH TAB |
| 87701040797 | GNP ONE DAILY WOMEN'S 50+ TAB  |
| 87701040799 | GNP PRENATAL VITAMINS TABLET   |
| 87701040808 | GNP ACIDOPHILUS 175 MG CAP     |
| 87701040809 | GNP DIABETIC SUPPORT FORM TAB  |
| 87701040810 | GNP HAIR, SKIN AND NAILS TAB   |
| 87701040813 | GNP MELATONIN 3 MG TABLET      |
| 87701040814 | GNP MELATONIN 5 MG TABLET      |
| 87701040815 | GNP CO Q-10 60 MG CAPSULE      |
| 87701040816 | GNP CO Q-10 100 MG CAPSULE     |
| 87701040817 | GNP CO Q-10 200 MG CAPSULE     |
| 87701040818 | GNP FISH OIL EC 1,000 MG SFTGL |
| 87701040819 | GNP FISH OIL 1,000 MG SOFTGEL  |
| 87701040822 | GNP FISH OIL 1,200 MG SOFTGEL  |
| 87701040823 | GNP FISH OIL SOFTGEL           |
| 87701040837 | GNP PAIN RELIEVER 500 MG TAB   |
| 87701040885 | GNP TUSSIN 400 MG TABLET       |
| 87701040886 | GNP TUSSIN DM 400-20 MG TABLET |
| 87701040898 | GNP PSEUDOEPHEDRINE ER 120 MG  |
| 87701040899 | GNP 8HR ACETAMINOPHEN ER 650MG |
| 87701040932 | GNP ACID REDUCER 10 MG TABLET  |
| 87701041110 | GNP HEMORRHOIDAL OINTMENT      |
| 87701041115 | GNP LICE TREATMENT 1% CRM RINS |
| 87701041153 | GNP B12 2,500 MCG TABLET SL    |
| 87701041164 | GNP BEST FIBER POWDER          |
| 87701041175 | GNP MIGRAINE 250-250-65 MG CPT |
| 87701041235 | GNP COUGH DM ER 30 MG/5 ML SUS |
| 87701041248 | GNP NASAL DECONG PE 10 MG TAB  |
| 87701041252 | GNP NASAL SPRAY 1%             |
| 87701041253 | GNP ANTACID EXT STRGTH CHW TAB |

| NDC         | Name                           |
|-------------|--------------------------------|
| 87701041269 | GNP VITAMIN D3 25MCG(1000 UNT) |
| 87701041270 | GNP CO Q-10 100 MG SOFTGEL     |
| 87701041275 | GNP ELECTROLYTE SOLUTION       |
| 87701041319 | GNP LUBRICAT PLUS 0.5% EYE DRP |
| 87701042510 | GNP GLYCERIN SUPPOSITORY       |
| 87701042534 | GNP MUCUS ER 600 MG TABLET     |
| 87701042560 | GNP EAR DROPS 6.5%             |
| 87701042598 | GNP GLUCOSE 3.75 GRAM TAB CHEW |
| 87701042634 | GNP MELATONIN 10 MG TABLET SL  |
| 87701042657 | GNP NAUSEA RELIEF LIQUID       |
| 87701042683 | GNP PROBIOTIC COLON SUPPT CAP  |
| 87701042721 | GNP URINARY PAIN RLF 95 MG TAB |
| 87701042777 | GNP MELATONIN 2.5 MG GUMMY     |
| 87701042789 | GNP NICOTINE 14 MG/24HR PATCH  |
| 87701042791 | GNP NICOTINE 7 MG/24HR PATCH   |
| 87701042807 | GNP LIQUID WART REMOVER 17% LQ |
| 87701042893 | GNP HEADACHE RELIEF CAPLET     |
| 87701042902 | GNP PAIN RELIEF 325 MG TABLET  |
| 87701042917 | GNP MINERAL OIL                |
| 87701042952 | GNP TRIPLE ANTIBIOTIC OINTMENT |
| 87701042959 | GNP CHLD LORATADINE 5 MG/5 ML  |
| 87701042967 | GNP NASAL DECONGEST 30 MG TAB  |
| 87701042968 | GNP WOMEN'S GENTLE LAX EC 5 MG |
| 87701042971 | GNP ACETAMINOPHEN 325 MG GELCP |
| 87701042972 | GNP ANTACID ANTI-GAS LIQUID    |
| 87701042974 | GNP ANTACID LIQUID             |
| 87701042975 | GNP ANTACID-ANTIGAS SUSPENSION |
| 87701042976 | GNP MILK OF MAGNESIA SUSP      |
| 87701043108 | GNP MOTION SICKNESS 25 MG TAB  |
| 87701043113 | GNP ESOMEPRAZOLE MAG DR 20 MG  |
| 87701043151 | GNP EAR WAX REMOVAL 6.5% KIT   |
| 87701043152 | GNP EAR WAX REMOVAL 6.5% DROP  |
| 87701043233 | GNP THERAPEUTIC-M TABLET       |
| 87701043241 | GNP CENTURY MATURE FORMULA TAB |
| 87701043249 | GNP CENTURY ADULT FORMULA TAB  |
| 87701043259 | GNP GLUCOSE 2 GRAM GUMMY       |
| 87701043387 | GNP ELECTROLYTE POWDER PACKET  |
| 87701043462 | GNP VITAMIN D3 50 MCG SOFTGEL  |
| 87701043463 | GNP VITAMIN D3 125 MCG SOFTGEL |
| 87701043465 | GNP VITAMIN D3 250 MCG SOFTGEL |
| 87701043516 | GNP MELATONIN 5 MG GUMMY       |
| 87701043517 | GNP HAIR, SKIN AND NAILS TAB   |
| 87701043595 | GNP NASAL SPRAY 0.05%          |
| 87701043612 | GNP ANTACID ULTRA TAB CHEW     |
| 87701044416 | GNP ANTACID XTRA STR CHEW TAB  |

| NDC         | Name                           |
|-------------|--------------------------------|
| 87701045401 | GNP CLOTRIMAZOLE-3 2% CREAM    |
| 87701053016 | GNP LAXATIVE EC 5 MG TABLET    |
| 87701055205 | GNP SALINE 0.65% NOSE SPRAY    |
| 87701055389 | GNP BACITRACIN ZN 500 UNIT/GM  |
| 87701056469 | GNP TUSSIN DM SYRUP            |
| 87701060105 | GNP SUPHEDRIN 30 MG TABLET     |
| 87701060152 | GNP MILK OF MAGNESIA SUSP      |
| 87701070558 | GNP FIBER TABS                 |
| 87701072289 | GNP PINK BISMUTH 262 MG TB CHW |
| 87701074702 | GNP ULTR CMFRT 0.5 ML 28GX1/2" |
| 87701074723 | GNP ULTRA COMFRT 1 ML 28GX1/2" |
| 87701074725 | GNP ULT C 0.3ML 29GX1/2" (1/2) |
| 87701074728 | GNP ULT CMFRT 0.5 ML 29GX1/2"  |
| 87701074745 | GNP ULTR COMFORT 1 ML 29GX1/2" |
| 87701074940 | GNP TUSSIN COUGH LIQUID        |
| 87701075605 | GNP IBUPROFEN 200 MG CAPLET    |
| 87701079215 | GNP ASPIRIN 81 MG CHEWABLE TAB |
| 87701079251 | GNP MICONAZOLE 7 CREAM         |
| 87701084200 | GNP CHILD'S IBUPROFEN SUSP     |
| 87701088535 | BL CHILD'S IBUPROFEN SUSP      |
| 87701088827 | GNP FOAMING ANTACID LIQUID     |
| 87701088843 | GNP SUPHEDRIN LIQUID           |
| 87701088848 | GNP STOOL SOFTENER 50 MG/5 ML  |
| 87701088853 | GNP STOOL SOFTENER 60 MG/15 ML |
| 87701089900 | GNP NASAL SPRAY ORIGINAL 0.05% |
| 87701090058 | GNP PAIN RELIEVER 325 MG TAB   |
| 87701090080 | GNP ANTACID 500 MG CHEW TABLET |
| 87701091090 | GNP NASAL DECONGEST 30 MG TAB  |
| 87701091786 | GNP TUSSIN DM CLEAR SYRUP      |
| 87701092131 | GNP MICONAZOLE 3 COMBO PACK    |
| 87701093206 | GNP ALLERGY RELF 5 MG/5 ML SLN |
| 87701094584 | GNP TRIPLE ANTIBIOTIC + OINT   |
| 87701098111 | GNP HYDROCORTISONE 1% CREAM    |
| 87701099096 | GNP 12HR NASAL DECONGEST 120MG |
| 88395001250 | BABY D3 400 UNIT/DROP CONC     |
| 89269000100 | COROMEGA DIETARY SUPPLEMENT    |
| 89411012301 | FERGON 27 MG TABLET            |
| 89411029101 | NU-IRON 150 CAPSULE            |
| 89411035116 | ELDERTONIC LIQUID              |
| 90011001016 | INOSITOL 600 MG POWDER         |
| 90011001024 | INOSITOL 750 MG CAPSULE        |
| 90011006012 | Q-ABSORB 100 MG SOFTGEL        |
| 90011012025 | LUTEIN-ZEAXANTHIN 20-4 MG SFGL |
| 90011030003 | VITAMIN D3 25 MCG SOFTGEL      |
| 96095000203 | TRUNATURE DIGESTIVE PROBIOTIC  |

| NDC         | Name                           |
|-------------|--------------------------------|
| 96295012520 | CALCIUM 500-VIT D3 600 CAPLET  |
| 96295012564 | VITAMIN D3 10,000 UNIT TABLET  |
| 96295012782 | THERAPEUTIC-M CAPLET           |
| 96295012829 | IRON 27 MG TABLET              |
| 96295012831 | PRENATAL CAPLET                |
| 96295012836 | ADULTS MULTIVITAMIN CAPLET     |
| 96295012838 | ADULTS 50 PLUS MULTIVITAMIN    |
| 96295012853 | MAGNESIUM CHLORIDE EC 70 MG TB |
| 96295012961 | BUFFERED ASPIRIN 325 MG TB     |
| 96295013046 | CHILD COUGH DM ER 30 MG/5 ML   |
| 96295013180 | MUCUS RELIEF DM COUGH TABLET   |
| 96295013225 | CHILD ACETAMINOPHEN 160 MG     |
| 96295013237 | TUSSIN CF MAX SEVERE M-S COLD  |
| 96295013478 | ALL DAY ALLERGY 10 MG TABLET   |
| 96295013485 | TUSSIN DM 400-20 MG/20 ML LIQ  |
| 96295013532 | DAILY FIBER CAPSULE            |
| 96295013566 | MAGNESIUM 250 MG CAPLET        |
| 96295013570 | CALCIUM 500MG-VIT D3 10MCG TAB |
| 96295013574 | EYE HEALTH PLUS LUTEIN TABLET  |
| 96295013580 | CALCIUM 600 MG-D3 20 MCG TAB   |
| 96295013656 | FIBER POWDER                   |
| 96295013721 | CALCIUM 500MG-VIT D3 15MCG TAB |
| 96295013817 | MAGNESIUM CHLORIDE 64 MG TAB   |
| 96295013857 | VITAMIN E 450 MG SOFTGEL       |
| 96295013867 | VITAMIN D3 25 MCG SOFTGEL      |
| 96295013884 | SUPER B COMPLEX-VIT C CAPLET   |
| 96295013893 | CO Q-10 50 MG SOFTGEL          |
| 96295013917 | MELATONIN 10 MG TABLET         |
| 96295014036 | VITAMIN D3 125 MCG TABLET      |
| 96295014062 | CO Q-10 100 MG SOFTGEL         |
| 96295014064 | INFANT VITAMIN D 10 MCG/ML DRP |
| 96295014070 | DIGESTIVE PROBIOTIC 250 MG CAP |
| 96295014071 | DAILY DIGESTIVE PROBIOTIC CAP  |
| 96295014090 | MEN 50 PLUS MULTIVITAMIN TAB   |
| 96974000005 | COENZYME Q10 10 MG CAPSULE     |
| 96974000013 | THERAMILL FORTE CAPSULE        |



# **Molina Complete Care for MyCare Ohio (HMO D-SNP)**

This *Drug List* was updated on 04/01/2026.

For more recent information or other questions, contact us at (800) 665-3086, (TTY: 711), October 1 – March 31: 8 a.m. to 8 p.m. local time, 7 days a week. April 1 - September 30: Monday – Friday, 8 a.m. to 8 p.m. local time or visit [MolinaHealthcare.com/Medicare](https://MolinaHealthcare.com/Medicare).