

CCA Senior Care Options (HMO D-SNP)

2025 Lista de Medicamentos Abrangidos (Lista de Medicamentos ou Formulário)



**PARA CONSULTA: ESTE DOCUMENTO CONTÉM INFORMAÇÕES
SOBRE OS MEDICAMENTOS ABRANGIDOS POR ESTE PLANO**

Este formulário foi atualizado em 12/01/2025.

Para informações mais recentes ou outras questões, contacte-nos através do número 866-610-2273 (TTY 711), das 8 AM às 8 PM, 7 dias por semana, ou visite ccama.org.

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Se tiver dúvidas, contacte o CCA Senior Care Options através do número 866-610-2273 (TTY 711), das 8 AM às 8 PM, 7 dias por semana. A chamada é gratuita. **Para obter mais informações**, visite ccama.org.



Introdução

Este documento designa-se *Lista de Medicamentos Abrangidos* (também conhecida como Lista de Medicamentos). Informa-o sobre os produtos sujeitos a receita médica e *produtos não medicamentosos* que são abrangidos pelo CCA Senior Care Options. A Lista de Medicamentos indica também se existem disposições ou restrições especiais relativas a quaisquer medicamentos abrangidos pelo CCA Senior Care Options. Os principais termos e as suas definições aparecem no último capítulo da *Prova de Cobertura*.

Índice

A. Advertências	4
B. Perguntas mais frequentes (FAQ)	8
B1. Que medicamentos sujeitos a receita médica estão na <i>Lista de Medicamentos Abrangidos</i> ? (Para abreviar, a <i>Lista de Medicamentos Abrangidos</i> é designada como “Lista de Medicamentos”).	8
B2. A Lista de Medicamentos pode sofrer alterações?	9
B3. O que acontece quando há uma alteração na Lista de Medicamentos?	10
B4. Existem restrições ou limites na cobertura de medicamentos ou quaisquer medidas necessárias a adotar para obter certos medicamentos?	11
B5. Como saberei se o medicamento que pretendo tem limites ou se há medidas necessárias a adotar para obter o medicamento?	12
B6. O que acontece se o CCA Senior Care Options alterar as suas disposições sobre como são abrangidos alguns medicamentos (por exemplo, restrições de autorização prévia, limites de quantidade e/ou de terapia por etapas)?	12
B7. Como posso encontrar um medicamento na Lista de Medicamentos?	12
B8. E se o medicamento que pretendo tomar não constar na Lista de Medicamentos?	13
B9. E se eu for um novo membro do CCA Senior Care Options e não conseguir encontrar o meu medicamento na Lista de Medicamentos ou tiver dificuldades para obter o meu medicamento?	13
B10. Posso pedir uma exceção para abranger o meu medicamento?	14
B11. Como posso pedir para abrir uma exceção?	15
B12. Quanto tempo demora para obter uma exceção?	15

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B13. O que são medicamentos genéricos?	15
B14. O que são produtos biológicos originais e qual a relação destes com produtos biossimilares?.....	16
B15. O que são medicamentos OTC?	16
B16. O CCA Senior Care Options abrange produtos OTC não medicamentosos? ...	16
B17. O CCA Senior Care Options abrange abastecimentos de longa duração de receitas?.....	16
B18. Posso receber entregas de receitas em minha casa a partir da farmácia local?	17
B19. Qual é o meu copagamento?	17
C. Visão geral da <i>Lista de Medicamentos Abrangidos</i>	18
C1. Lista de Medicamentos por Patologia	18
D.Índice de Medicamentos Abrangidos.....	161

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A. Advertências

Esta é uma lista de medicamentos que os membros podem obter no CCA Senior Care Options.

- ❖ O CCA Senior Care Options (HMO D-SNP) é um plano de saúde que tem contratos com o Medicare e com o programa Commonwealth of Massachusetts Medicaid para fornecer benefícios de ambos os programas aos inscritos. A subscrição do plano depende da renovação do contrato.
- ❖ Quando este documento indica “nós” ou “nosso”, significa a Commonwealth Care Alliance, Inc. Quando indica “plano” ou “nosso plano”, significa o CCA Senior Care Options.
- ❖ Na Commonwealth of Massachusetts, a Commonwealth Care Alliance, Inc. opera como Commonwealth Care Alliance Massachusetts (CCA).
- ❖ **Informação sobre Recuperação de Bens:** a lei federal exige que o MassHealth recupere montantes do património de certos membros do MassHealth que tenham 55 anos ou mais, e de membros que tenham qualquer idade e estejam a receber cuidados continuados em lares ou outras instituições médicas. Para obter mais informações sobre a recuperação de bens do MassHealth, visite www.mass.gov/estaterecovery.
- ❖ A Lista de Medicamentos Abrangidos pode ser alterada a qualquer momento. Irá receber um aviso quando for necessário.
- ❖ Pode sempre consultar a *Lista de Medicamentos Abrangidos* atualizada do CCA Senior Care Options online em ccama.org ou contactar os Serviços para Membros através do número 866-610-2273 (TTY 711), das 8 AM às 8 PM, 7 dias por semana. Esta chamada é gratuita.
- ❖ **Pode obter este documento gratuitamente noutros formatos, tais como letras grandes, braille ou áudio. Ligue para os Serviços para Membros através do número 866-610-2273 (TTY 711), das 8 AM às 8 PM, 7 dias por semana. Esta chamada é gratuita.**
- ❖ O seu pedido de formatos alternativos e idioma especial ficará registado para correspondências futuras. Contacte os Serviços para Membros para alterar o seu pedido de preferência de idioma e/ou formato.
- ❖ Este documento está disponível gratuitamente em espanhol.
- ❖ **ATENCIÓN:** Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 866-610-2273 (TTY 711), de 8 am a 8 pm, los 7 días de la semana. La llamada es gratuita.

Se tiver dúvidas, contacte o CCA Senior Care Options através do número 866-610-2273 (TTY 711), das 8 AM às 8 PM, 7 dias por semana. A chamada é gratuita. **Para obter mais informações,** visite ccama.org.



Aviso de não discriminação

A Commonwealth Care Alliance, Inc. cumpre as leis federais de direitos civis aplicáveis e não discrimina com base em, nem exclui pessoas nem as trata de forma diferente devido a, patologias, estado de saúde, receção de serviços de saúde, existência de reclamações, historial médico, incapacidade (incluindo deficiência mental), estado civil, idade, sexo (incluindo estereótipos sexuais e identidade de género), orientação sexual, nacionalidade, etnia, cor, religião, credo, auxílio público ou local de residência. A Commonwealth Care Alliance, Inc.:

- Disponibiliza meios auxiliares e serviços gratuitos a pessoas com deficiência para comunicarem eficazmente connosco, tais como:
 - Intérpretes qualificados de língua gestual
 - Informações escritas noutros formatos (letras grandes, áudio, formatos eletrónicos acessíveis, outros formatos)
- Disponibiliza serviços linguísticos gratuitos para pessoas cuja língua materna não é o inglês, tais como:
 - Intérpretes qualificados
 - Informações escritas noutros idiomas

Caso precise destes serviços, contacte os Serviços para Membros.

Se considerar que a Commonwealth Care Alliance, Inc. falhou na prestação destes serviços ou que de outra forma exerceu discriminação com base em patologias, estado de saúde, receção de serviços de saúde, existência de reclamações, historial médico, incapacidade (incluindo deficiência mental), estado civil, idade, sexo (incluindo estereótipos sexuais e identidade de género), orientação sexual, nacionalidade, etnia, cor, religião, credo, auxílio público ou local de residência, pode apresentar uma reclamação junto de:

Commonwealth Care Alliance, Inc.
Civil Rights Coordinator
30 Winter Street, 11th Floor
Boston, MA 02108
Telefone: 617-960-0474, ext. 3932 (TTY 711) Fax: 857-453-4517
E-mail: civilrightscordinator@commonwealthcare.org

Pode apresentar uma reclamação pessoalmente, por correio postal, fax ou e-mail. Caso precise de ajuda para apresentar uma reclamação, o Civil Rights Coordinator (Coordenador de Direitos Civis) está disponível para o ajudar.

Também pode apresentar uma reclamação de direitos civis junto do U.S. Department of Health and Human Services, no Office for Civil Rights, eletronicamente através do Office for Civil Rights Complaint Portal, disponível em ocrportal.hhs.gov/ocr/portal/lobby.jsf, ou via correio postal ou telefone através de:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
Telefone: 800-368-1019, 800-537-7697 (TDD)

Os formulários de reclamação estão disponíveis em www.hhs.gov/ocr/office/file/index.html.

Se tiver dúvidas, contacte o CCA Senior Care Options através do número 866-610-2273 (TTY 711), das 8 AM às 8 PM, 7 dias por semana. A chamada é gratuita. **Para obter mais informações**, visite ccama.org.



Multi-language Interpreter Services

English: We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at 1-866-610-2273 (TTY 711). Someone who speaks English can help you. This is a free service.

Spanish: Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al 1-866-610-2273 (TTY 711). Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

Chinese Mandarin: 我们提供免费的翻译服务，帮助您解答关于健康或药物保险的任何疑问。如果您需要此翻译服务，请致电 1-866-610-2273 (TTY 711)。我们的中文工作人员很乐意帮助您。这是一项免费服务。

Chinese Cantonese: 您對我們的健康或藥物保險可能存有疑問，為此我們提供免費的翻譯服務。如需翻譯服務，請致電 1-866-610-2273 (TTY 711)。我們講中文的人員將樂意為您提供幫助。這是一項免費服務。

Tagalog: Mayroon kaming libreng serbisyo sa pagsasaling-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o panggamot. Upang makakuha ng tagasaling-wika, tawagan lamang kami sa 1-866-610-2273 (TTY 711). Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay libreng serbisyo.

French: Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d'assurance-médicaments. Pour accéder au service d'interprétation, il vous suffit de nous appeler au 1-866-610-2273 (TTY 711). Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

Vietnamese: Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Nếu quý vị cần thông dịch viên xin gọi 1-866-610-2273 (TTY 711) sẽ có nhân viên nói tiếng Việt giúp đỡ quý vị. Đây là dịch vụ miễn phí.

German: Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelplan. Unsere Dolmetscher erreichen Sie unter 1-866-610-2273 (TTY 711). Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.

Korean: 당사는 의료 보험 또는 약품 보험에 관한 질문에 대해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 1-866-610-2273 (TTY 711) 번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.

Russian: Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону 1-866-610-2273 (телетайп 711). Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

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Arabic: إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. للحصول على مترجم فوري، ليس عليك سوى الاتصال بنا على 1-866-610-2273 (رقم هاتف الصم والبكم 711). سيقوم شخص ما يتحدث العربية بمساعدتك. هذه خدمة مجانية.

Hindi: हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न के जवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं। एक दुभाषिया प्राप्त करने के लिए, बस हमें 1-866-610-2273 (TTY 711) पर फोन करें। कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है। यह एक मुफ्त सेवा है।

Italian: È disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il numero 1-866-610-2273 (TTY 711). Un nostro incaricato che parla Italiano vi fornirà l'assistenza necessaria. È un servizio gratuito.

Portuguese: Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saúde ou de medicação. Para obter um intérprete, contacte-nos através do número 1-866-610-2273 (TTY 711). Irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.

French Creole: Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwòg nou an. Pou jwenn yon entèprèt, jis rele nou nan 1-866-610-2273 (TTY 711). Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

Polish: Umożliwiamy bezpłatne skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub dawkowania leków. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer 1-866-610-2273 (TTY 711). Ta usługa jest bezpłatna.

Japanese: 当社の健康 健康保険と薬品 処方薬プランに関するご質問にお答えするために、無料の通訳サービスがあります。通訳をご用命になるには、1-866-610-2273 (TTY 711) にお電話ください。日本語を話す人 者が支援いたします。これは無料のサービスです。

Gujarati: અમારી આરોગ્ય અથવા દવાની યોજના વિશે તમને હોય તેવા કોઈપણ પ્રશ્નોના જવાબ આપવા માટે અમારી પાસે મફત દુભાષિયા સેવાઓ છે. દુભાષિયા મેળવવા માટે, અમને ફક્ત 1-866-610-2273 (TTY 711) પર કોલ કરો. અંગ્રેજી/ગુજરાતી બોલતી વ્યક્તિ તમને મદદ કરી શકે છે. આ એક મફત સેવા છે.

Lao/Laotian:

ພວກເຮົາມີບໍລິການລ່າມແປພາສາໂດຍບໍ່ເສຍຄ່າເພື່ອຕອບທຸກຄໍາຖາມທີ່ທ່ານອາດມີກ່ຽວກັບແຜນສຸຂະພາບ ຫຼື ແຜນຢາຂອງພວກເຮົາ. ເພື່ອຂໍລ່າມແປພາສາ, ພາຍໃຫຫາພວກເຮົາທີ່ເບີ 1-866-610-2273 (TTY 711). ຈະມີຜູ້ທີ່ເວົ້າພາສາອັງກິດ/ລາວຊ່ວຍທ່ານໄດ້. ນີ້ແມ່ນການບໍລິການບໍ່ເສຍຄ່າ.

Cambodian: យើងមានសេវាកម្មប្រែប្រួលមាត់ដោយឥតគិតថ្លៃដើម្បីឆ្លើយសំណួរណាមួយដែលអ្នកអាចមានអំពីគម្រោងសុខភាព ឬថ្នាំរបស់យើង។ ដើម្បីទទួលបានអ្នកបកប្រែផ្ទាល់មាត់ សូមហៅទូរសព្ទមកយើងតាមរយៈលេខ 1-866-610-2273 (TTY 711) ។ នរណាម្នាក់ដែលនិយាយភាសាអង់គ្លេស/ភាសាខ្មែរអាចជួយអ្នកបាន។ នេះគឺជាសេវាកម្មដែលឥតគិតថ្លៃ។

Se tiver dúvidas, contacte o CCA Senior Care Options através do número 866-610-2273 (TTY 711), das 8 AM às 8 PM, 7 dias por semana. A chamada é gratuita. **Para obter mais informações,** visite ccama.org.

B. Perguntas mais frequentes (FAQ)

Encontre aqui respostas para as perguntas que tenha sobre a *Lista de Medicamentos Abrangidos*. Pode consultar todas as FAQ para obter mais informações ou procurar uma pergunta e a resposta.

B1. Que medicamentos sujeitos a receita médica estão na *Lista de Medicamentos Abrangidos*? (Para abreviar, a *Lista de Medicamentos Abrangidos* é designada como “Lista de Medicamentos”.)

Os medicamentos da *Lista de Medicamentos Abrangidos* que começa na secção C1 são os medicamentos abrangidos pelo CCA Senior Care Options. Os medicamentos estão disponíveis nas farmácias pertencentes à nossa rede. Uma farmácia pertence à nossa rede se tivermos um acordo com a mesma para trabalhar connosco e prestar-lhe serviços. Referimo-nos a estas farmácias como “farmácias da rede”.

Outros medicamentos, como determinados medicamentos de venda livre (OTC) e vitaminas, podem ser abrangidos pelo MassHealth. *Visite o website do MassHealth www.mass.gov/druglist para obter mais informações. Também pode contactar o Centro de Apoio para Membros do MassHealth através do número 800-841-2900 e TTY 711, de segunda a sexta-feira, entre as 8 AM e as 5 PM. Apresente a sua identificação de membro para aviar as receitas médicas através do MassHealth.*

O CCA Senior Care Options abrange todos os medicamentos clinicamente necessários da Lista de Medicamentos se:

- o seu médico ou outro profissional de saúde indicar que precisa deles para melhorar ou manter-se saudável;
- o CCA Senior Care Options concordar que o medicamento é clinicamente necessário para o seu caso; e
- aviar a receita médica numa farmácia da rede do CCA Senior Care Options.
- Em alguns casos, tem de fazer algo antes de obter um medicamento (consulte a pergunta B4 para obter mais informações).

Também pode encontrar uma lista atualizada de medicamentos que abrangemos no nosso website em ccama.org ou contactar os Serviços para Membros através do número 866-610-2273 (TTY 711), das 8 AM às 8 PM, 7 dias por semana.

Se tiver dúvidas, contacte o CCA Senior Care Options através do número 866-610-2273 (TTY 711), das 8 AM às 8 PM, 7 dias por semana. A chamada é gratuita. **Para obter mais informações**, visite ccama.org.



B2. A Lista de Medicamentos pode sofrer alterações?

Sim, e o CCA Senior Care Options tem de seguir as disposições do Medicare e do MassHealth (Medicaid) ao fazer alterações. Podemos adicionar ou remover medicamentos da Lista de Medicamentos ao longo do ano.

Também podemos alterar as nossas disposições sobre os medicamentos. Por exemplo, podemos:

- Decidir exigir ou não exigir autorização prévia para um medicamento. (Autorização prévia é a permissão do CCA Senior Care Options antes de poder obter um medicamento.)
- Aumentar ou alterar a quantidade de um medicamento que pode obter (os chamados limites de quantidade).
- Adicionar ou alterar restrições da terapia por etapas para um medicamento. (Terapia por etapas significa que tem de experimentar um medicamento antes de abrangermos outro medicamento.)

Para obter mais informações sobre estas disposições de medicamentos, consulte a pergunta B4.

Se estiver a tomar um medicamento que se encontrava abrangido no **início** do ano, geralmente não removemos nem alteramos a cobertura desse medicamento **durante o resto do ano**, exceto se:

- surgir no mercado um medicamento novo e mais barato que produza o mesmo resultado de um medicamento que se encontra na Lista de Medicamentos; **ou**
- constatarmos que um medicamento não é seguro; **ou**
- um medicamento for retirado do mercado.

As perguntas B3 e B6 abaixo têm mais informações sobre o que acontece quando a Lista de Medicamentos é alterada.

- Pode sempre consultar a Lista de Medicamentos do CCA Senior Care Options atualizada online em ccama.org. As atualizações da Lista de Medicamentos são publicadas mensalmente no website.
- Também pode contactar os Serviços para Membros através do número 866-610-2273 (TTY 711), das 8 AM às 8 PM, 7 dias por semana, para verificar a Lista de Medicamentos atualizada.

Se tiver dúvidas, contacte o CCA Senior Care Options através do número 866-610-2273 (TTY 711), das 8 AM às 8 PM, 7 dias por semana. A chamada é gratuita. **Para obter mais informações**, visite ccama.org.



B3. O que acontece quando há uma alteração na Lista de Medicamentos?

Algumas alterações da Lista de Medicamentos são efetuadas **imediatamente**. Por exemplo:

- Substituições de novas versões específicas de medicamentos. Podemos remover imediatamente os medicamentos da Lista de Medicamentos se os substituirmos por novas versões específicas desses medicamentos, mas o custo dos novos medicamentos permanecerá de \$0. Quando adicionamos uma nova versão de um medicamento, também podemos decidir manter o medicamento de marca ou o produto biológico original na lista, mas alterar as suas disposições ou limites de cobertura.
 - Poderá não ser informado antes de fazermos esta alteração, mas iremos enviar-lhe informações sobre a alteração específica que fizemos assim que ela for efetuada.
 - Só podemos fazer estas alterações se o medicamento que estamos a adicionar:
 - for uma nova versão genérica de um medicamento de marca; ou
 - for uma nova versão biossimilar específica de produtos biológicos originais da Lista de Medicamentos (por exemplo, adicionar um produto biossimilar compatível que pode ser substituído por um produto biológico original sem uma nova receita médica).
 - Alguns destes tipos de medicamentos podem ser novidade para si. Para obter mais informações, consulte a Secção B14.
- O membro ou o seu prestador podem pedir uma exceção a estas alterações. Enviar-lhe-emos um aviso com os passos que pode seguir para pedir uma exceção. Consulte as perguntas B10-B12 para obter mais informações sobre exceções.
- Um medicamento é retirado do mercado. Se a Food and Drug Administration (FDA) indicar que um medicamento que está a tomar não é seguro ou eficaz ou se o fabricante do medicamento retirar um medicamento do mercado, podemos retirá-lo imediatamente da Lista de Medicamentos. Se estiver a tomar o medicamento, enviar-lhe-emos um aviso para substituir o medicamento retirado do mercado; contacte o seu prestador de serviços de saúde. O seu prestador irá emitir uma receita para um novo medicamento, para substituir o medicamento retirado do mercado.

Podemos fazer outras alterações que afetam os medicamentos que toma. Iremos informá-lo com antecedência sobre outras alterações à Lista de Medicamentos. Estas alterações podem acontecer se:

- a FDA fornecer uma nova orientação ou houver novas diretrizes clínicas sobre um medicamento;

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- removermos um medicamento de marca da *Lista de Medicamentos* quando adicionamos um medicamento genérico que não é novo no mercado; ou
- removermos um produto biológico original ao adicionar um biossimilar; ou
- alterarmos as disposições ou limites de cobertura para o medicamento de marca.

Quando estas alterações acontecerem, iremos:

- informá-lo pelo menos 30 dias antes de fazermos a alteração da Lista de Medicamentos; **ou**
- informá-lo e atribuir-lhe um abastecimento de 31 dias do medicamento depois de solicitar um reabastecimento.

Desta forma terá tempo para falar com o seu médico ou outro profissional de saúde. Estes podem ajudá-lo a decidir:

- se há um medicamento semelhante na Lista de Medicamentos que pode tomar em substituição; **ou**
- se deve pedir uma exceção a estas alterações. Para saber mais sobre exceções, consulte as perguntas B10-B12.

B4. Existem restrições ou limites na cobertura de medicamentos ou quaisquer medidas necessárias a adotar para obter certos medicamentos?

Sim, alguns medicamentos têm disposições de cobertura ou limites em termos da quantidade que pode obter. Em alguns casos, o membro ou o seu médico ou outro profissional de saúde devem fazer algo antes de poder obter o medicamento. Por exemplo:

- **Autorização prévia (PA):** para alguns medicamentos, o membro ou o seu médico ou outro profissional de saúde devem obter autorização do CCA Senior Care Options antes de aviar a receita. A autorização prévia é diferente de uma indicação. O CCA Senior Care Options pode não abranger o medicamento se não obtiver autorização prévia.
- **Limites de quantidade:** por vezes, o CCA Senior Care Options limita a quantidade que pode obter de um medicamento.
- **Terapia por etapas:** por vezes, o CCA Senior Care Options exige que se submeta a terapia por etapas. Isto significa que terá de tomar medicamentos numa determinada ordem para a sua patologia. Poderá ter de experimentar um medicamento antes de abrangermos outro medicamento. Se o seu profissional de saúde considerar que o primeiro medicamento não funciona para o seu caso, então vamos abranger o segundo.

Se tiver dúvidas, contacte o CCA Senior Care Options através do número 866-610-2273 (TTY 711), das 8 AM às 8 PM, 7 dias por semana. A chamada é gratuita. **Para obter mais informações,** visite ccama.org.



- **Cobertura baseada em indicações:** se o CCA Senior Care Options abranger um medicamento apenas para algumas patologias, identificamo-lo claramente na Lista de Medicamentos, juntamente com as patologias específicas que estão abrangidas. É necessária autorização prévia para consumíveis para teste da diabetes não preferenciais (monitorização da glicose e tiras-teste).

Pode verificar se o seu medicamento tem algum requisito adicional ou limite consultando os quadros da secção C1. Também pode obter mais informações visitando o nosso website em ccama.org. Publicamos documentos online que explicam as nossas restrições em termos de autorização prévia e terapia por etapas. Também pode pedir para lhe enviarmos uma cópia.

Pode pedir uma exceção para estes limites. Desta forma terá tempo para falar com o seu médico ou outro profissional de saúde. Estes podem ajudá-lo a decidir se existe um medicamento semelhante na Lista de Medicamentos que pode tomar ou se deve pedir uma exceção. Consulte as perguntas B10-B12 para obter mais informações sobre exceções.

B5. Como saberei se o medicamento que pretendo tem limites ou se há medidas necessárias a adotar para obter o medicamento?

O quadro da Lista de Medicamentos por Patologia tem uma coluna com a designação “Ações necessárias, restrições ou limites de utilização”.

B6. O que acontece se o CCA Senior Care Options alterar as suas disposições sobre como são abrangidos alguns medicamentos (por exemplo, restrições de autorização prévia, limites de quantidade e/ou de terapia por etapas)?

Em alguns casos, será informado com antecedência se adicionarmos ou alterarmos as restrições de autorização prévia, os limites de quantidade e/ou as restrições de terapia por etapas de um medicamento. Consulte a pergunta B3 para obter mais informações sobre este aviso prévio e situações em que podemos não ser capazes de o informar com antecedência sobre quando há alteração das nossas disposições sobre os medicamentos da Lista de Medicamentos.

B7. Como posso encontrar um medicamento na Lista de Medicamentos?

Há duas formas de encontrar um medicamento:

- pode pesquisar alfabeticamente; **ou**
- pode pesquisar por patologia ou tipo de medicamento.

Para pesquisar **alfabeticamente**, procure o medicamento na secção do Índice de Medicamentos Abrangidos. Encontra-se na secção D. O Índice de Medicamentos Abrangidos é uma lista alfabética de todos os medicamentos incluídos na Lista de Medicamentos. No índice estão listados medicamentos de marca, medicamentos genéricos e também medicamentos de venda livre (OTC).

Se tiver dúvidas, contacte o CCA Senior Care Options através do número 866-610-2273 (TTY 711), das 8 AM às 8 PM, 7 dias por semana. A chamada é gratuita. **Para obter mais informações**, visite ccama.org.



Para pesquisar **por patologia**, localize a secção C1 com a designação “Lista de Medicamentos por Patologia”. Os medicamentos nesta secção estão agrupados por categorias, em função dos tipos de patologias para os quais são utilizados. Por exemplo, se tiver um problema cardíaco, deve procurar em Agentes cardiovasculares. É aqui que se encontram os medicamentos para tratamento de problemas cardíacos.

B8. E se o medicamento que pretendo tomar não constar na Lista de Medicamentos?

Se não encontrar o seu medicamento na Lista de Medicamentos, contacte os Serviços para Membros através do número 866-610-2273 (TTY 711), das 8 AM às 8 PM, 7 dias por semana, e pergunte sobre o medicamento. Se verificar que o CCA Senior Care Options não irá abranger o medicamento, pode optar por uma destas opções:

- Pedir aos Serviços para Membros uma lista de medicamentos semelhantes ao medicamento que pretende tomar. Em seguida, apresenta a lista ao seu médico ou outro profissional de saúde. Estes podem prescrever um medicamento da Lista de Medicamentos semelhante ao medicamento que pretende tomar. **Ou**
- Pode pedir ao CCA Senior Care Options para abrir uma exceção para abranger o seu medicamento. Consulte as perguntas B10-B12 para obter mais informações sobre exceções.

B9. E se eu for um novo membro do CCA Senior Care Options e não conseguir encontrar o meu medicamento na Lista de Medicamentos ou tiver dificuldades para obter o meu medicamento?

Podemos ajudar. Poderemos abranger um abastecimento temporário de 31 dias do seu medicamento durante os primeiros 90 dias de membro do CCA Senior Care Options. Desta forma terá tempo para falar com o seu médico ou outro profissional de saúde. Estes podem ajudá-lo a decidir se existe um medicamento semelhante na Lista de Medicamentos que pode tomar ou se deve pedir uma exceção.

Se a sua receita médica indicar um número de dias inferior, permitiremos que a mesma seja aviada várias vezes até um máximo de 31 dias de medicação.

Iremos abranger um abastecimento de 31 dias do seu medicamento se:

- estiver a tomar um medicamento que não está na nossa Lista de Medicamentos; **ou**
- as disposições do nosso plano não permitirem que obtenha a quantidade prescrita pelo seu profissional de saúde; **ou**
- o medicamento requerer autorização prévia do CCA Senior Care Options; **ou**
- estiver a tomar um medicamento que integra uma restrição de terapia por etapas.

Se tiver dúvidas, contacte o CCA Senior Care Options através do número 866-610-2273 (TTY 711), das 8 AM às 8 PM, 7 dias por semana. A chamada é gratuita. **Para obter mais informações**, visite ccama.org.



Se estiver a tomar um medicamento que o CCA Senior Care Options não considera ser um medicamento da Parte D, tem o direito de obter um abastecimento único de 72 horas do medicamento.

Caso se encontre num lar ou outra unidade de cuidados continuados e precisar de um medicamento que não se encontra na Lista de Medicamentos ou se não conseguir obter facilmente o medicamento de que precisa, nós podemos ajudar. Se estiver inscrito no plano há mais de 90 dias, residir num centro de cuidados continuados e necessitar de um abastecimento imediato:

- iremos abranger um abastecimento de 31 dias do medicamento de que necessita (a não ser que a sua receita indique um número de dias inferior), independentemente de ser ou não um novo membro do CCA Senior Care Options;
- este é complementar ao abastecimento temporário durante os primeiros 90 dias de membro do CCA Senior Care Options.

Iremos fornecer um abastecimento de emergência de pelo menos 31 dias (a menos que a receita médica indique um número de dias inferior) para todos os medicamentos não abrangidos, incluindo os que possam ter requisitos de terapia por etapas ou de autorização prévia para uma alteração não planeada de nível de cuidados. Um nível não planeado de cuidados de transição pode ser qualquer um dos seguintes:

- internamento ou alta num centro de cuidados continuados;
- internamento ou alta hospitalar, ou
- uma alteração do nível do centro de enfermagem especializado.

B10. Posso pedir uma exceção para abranger o meu medicamento?

Sim. Pode pedir ao CCA Senior Care Options para abrir uma exceção para abranger um medicamento que não está na Lista de Medicamentos.

Também pode pedir-nos para alterarmos as disposições para o seu medicamento.

- Por exemplo, o CCA Senior Care Options pode limitar a quantidade de um medicamento que iremos abranger. Se o seu medicamento tiver um limite, pode pedir-nos para alterar o limite e abranger mais.
- Outros exemplos: Pode pedir-nos a redução das restrições de terapia por etapas ou dos requisitos de autorização prévia.

Se tiver dúvidas, contacte o CCA Senior Care Options através do número 866-610-2273 (TTY 711), das 8 AM às 8 PM, 7 dias por semana. A chamada é gratuita. **Para obter mais informações**, visite ccama.org.



B11. Como posso pedir para abrir uma exceção?

Para pedir uma exceção, contacte os Serviços para Membros. Um representante dos Serviços para Membros irá trabalhar consigo e o seu prestador para ajudar a solicitar uma exceção. Também pode consultar o Capítulo 8, Secção 7, da **Prova de Cobertura** para obter mais informações sobre as exceções.

B12. Quanto tempo demora para obter uma exceção?

Depois de recebermos uma declaração do seu profissional de saúde a apoiar o seu pedido de exceção, vamos apresentar-lhe uma decisão no prazo de 72 horas.

O pedido de exceção pode ser apresentado pelo membro, pelo profissional de saúde do membro e/ou representante nomeado (com autorização por escrito) preenchendo o formulário Prescription Drug Coverage Determination Request (Pedido de Determinação de Cobertura de Medicamentos Sujeitos a Receita Médica) disponível no nosso website em ccama.org. O formulário pode ser enviado por correio ou fax:

CVS Caremark Part D Appeals and Exceptions
PO Box 52000, MC109
Phoenix, AZ 85072-2000
Fax: 855-633-7673

Se o membro ou o seu profissional de saúde considerar que a sua saúde pode ser prejudicada se tiver de esperar 72 horas por uma decisão, pode solicitar uma exceção rápida. Esta é uma decisão mais rápida. Se o seu profissional de saúde apoiar o seu pedido, receberá uma decisão no prazo de 24 horas após recebermos a declaração do seu profissional de saúde a apoiar o pedido.

B13. O que são medicamentos genéricos?

Os medicamentos genéricos são constituídos pelos mesmos ingredientes ativos dos medicamentos de marca. Normalmente custam menos do que o medicamento de marca e geralmente funcionam igualmente bem. Geralmente não têm nomes muito conhecidos. Os medicamentos genéricos são aprovados pela Food and Drug Administration (FDA). Estão disponíveis medicamentos genéricos para vários medicamentos de marca. Os medicamentos genéricos geralmente podem ser substituídos por medicamentos de marca na farmácia sem uma nova receita—dependendo das leis do estado.

O CCA Senior Care Options abrange medicamentos de marca e medicamentos genéricos.

Se tiver dúvidas, contacte o CCA Senior Care Options através do número 866-610-2273 (TTY 711), das 8 AM às 8 PM, 7 dias por semana. A chamada é gratuita. **Para obter mais informações**, visite ccama.org.



B14. O que são produtos biológicos originais e qual a relação destes com produtos biossimilares?

Quando nos referimos a medicamentos, isto pode significar um medicamento ou um produto biológico. Os produtos biológicos são medicamentos mais complexos do que os medicamentos típicos. Como os produtos biológicos são mais complexos do que os medicamentos típicos, em vez de terem uma forma genérica, têm alternativas que se designam biossimilares. Geralmente, os biossimilares funcionam tão bem como o produto biológico original e podem ter um custo inferior. Existem alternativas biossimilares para alguns produtos biológicos originais. Alguns biossimilares são biossimilares compatíveis e, dependendo das leis do estado, podem ser substituídos pelo produto biológico original na farmácia sem ser necessária uma nova receita, assim como os medicamentos genéricos podem ser substituídos por medicamentos de marca.

Para obter mais informações sobre os tipos de medicamentos, consulte o Capítulo 5 da Prova de Cobertura.

B15. O que são medicamentos OTC?

OTC significa “de venda livre”. O CCA Senior Care Options abrange alguns medicamentos OTC quando estes são receitados pelo seu prestador.

Pode consultar a Lista de Medicamentos do MassHealth (Medicaid) para saber que medicamentos OTC são abrangidos.

B16. O CCA Senior Care Options abrange produtos OTC não medicamentosos?

O CCA Senior Care Options abrange alguns produtos OTC não medicamentosos quando estes são receitados pelo seu prestador.

Exemplos de produtos OTC não medicamentosos incluem gazes e pensos, compressas com álcool e determinadas agulhas/seringas.

Pode consultar a Lista de Medicamentos do CCA Senior Care Options para saber que produtos OTC não medicamentosos são abrangidos.

B17. O CCA Senior Care Options abrange abastecimentos de longa duração de receitas?

- **Programas de encomenda postal.** Oferecemos um programa de encomenda postal que permite obter um abastecimento de até *100 dias* dos seus medicamentos sujeitos a receita médica enviado diretamente para a sua casa. Os medicamentos por encomenda postal estão isentos de copagamento.
- **Programas para 100 Dias em Farmácias de Retalho.** Algumas farmácias de retalho também podem oferecer um abastecimento de até *100 dias* de medicamentos sujeitos a receita médica abrangidos. As receitas de farmácias de retalho estão isentas de copagamento.

Se tiver dúvidas, contacte o CCA Senior Care Options através do número 866-610-2273 (TTY 711), das 8 AM às 8 PM, 7 dias por semana. A chamada é gratuita. **Para obter mais informações,** visite ccama.org.



B18. Posso receber entregas de receitas em minha casa a partir da farmácia local?

A sua farmácia local pode ser capaz de entregar a sua receita em sua casa. Pode contactar a farmácia local para saber se oferecem entregas ao domicílio.

B19. Qual é o meu copagamento?

Os membros do CCA Senior Care Options estão isentos de copagamento para medicamentos sujeitos a receita médica, medicamentos OTC e produtos não medicamentosos desde que respeitem as regras do plano. Consulte as perguntas B14 e B15 para obter mais informações sobre medicamentos OTC e produtos não medicamentosos.

Os níveis são grupos de medicamentos na nossa Lista de Medicamentos.

- Os Medicamentos Genéricos Preferenciais de Nível 1 têm um copagamento de \$0.
- Os Medicamentos Genéricos de Nível 2 têm um copagamento de \$0.
- Os Medicamentos de Marca Preferenciais de Nível 3 têm um copagamento de \$0.
- Os Medicamentos de Marca Não Preferenciais de Nível 4 têm um copagamento de \$0.
- Os Medicamentos Especiais de Nível 5 têm um copagamento de \$0.
- Os Medicamentos OTC têm um copagamento de \$0.

Se tiver dúvidas, contacte os Serviços para Membros através do número 866-610-2273 (TTY 711), das 8 AM às 8 PM, 7 dias por semana.

Se tiver dúvidas, contacte o CCA Senior Care Options através do número 866-610-2273 (TTY 711), das 8 AM às 8 PM, 7 dias por semana. A chamada é gratuita. **Para obter mais informações**, visite ccama.org.



C. Visão geral da *Lista de Medicamentos Abrangidos*

A Lista de Medicamentos Abrangidos contém informações sobre os medicamentos abrangidos pelo CCA Senior Care Options. Se tiver problemas em encontrar o seu medicamento na lista, consulte o Índice de Medicamentos Abrangidos que começa na secção D. O índice lista alfabeticamente todos os medicamentos abrangidos pelo CCA Senior Care Options.

C1. Lista de Medicamentos por Patologia

Os medicamentos nesta secção estão agrupados por categorias, em função dos tipos de patologias para os quais são utilizados. Por exemplo, se tiver um problema cardíaco, deve procurar na categoria Agentes cardiovasculares. É aqui que se encontram os medicamentos para tratamento de problemas cardíacos.

Significados dos códigos usados na coluna “Ações necessárias, restrições ou limites de utilização”:

(g) = Apenas está abrangida a versão genérica deste medicamento. A versão de marca não está abrangida.

M = A versão de marca deste medicamento está no Nível 3. A versão genérica está no Nível 1.

EA = Cada

GM = Gramas

ML = Mililitros

NDS = Abastecimento Diário Não Prolongado. Poderá receber mais de 1 mês de abastecimento da maioria dos medicamentos no seu Formulário através de encomenda de retalho ou postal. Os medicamentos com a indicação “NDS” estão limitados a 1 mês de abastecimento para encomenda de retalho e postal.

PA = Aprovação prévia (ou autorização prévia). Para alguns medicamentos, o membro ou o seu médico ou outro profissional de saúde devem obter aprovação do CCA Senior Care Options antes de aviar a receita. Se não receber aprovação, o CCA Senior Care Options poderá não abranger o medicamento.

B/D = Restrição de Autorização Prévia para Determinação de Parte B ou Parte D: este medicamento pode ser elegível para pagamento ao abrigo da Parte B do Medicare ou da Parte D do Medicare. O membro ou o seu prestador de serviços de saúde têm de obter uma autorização prévia do CCA Senior Care Options para determinar que este medicamento está abrangido pela Parte D do Medicare antes de aviar a receita. Sem aprovação prévia, o CCA poderá não abranger este medicamento. PA_BVD não se aplica a membros exclusivamente do Medicaid.

Se tiver dúvidas, contacte o CCA Senior Care Options através do número 866-610-2273 (TTY 711), das 8 AM às 8 PM, 7 dias por semana. A chamada é gratuita. **Para obter mais informações,** visite ccama.org.



PA_NSO = Restrição de Autorização Prévia Apenas para Novos Medicamentos. Se este é um medicamento novo para si, tem de obter (ou o seu prestador de serviços de saúde) autorização prévia do CCA Senior Care Options antes de aviar a receita para este medicamento. Sem aprovação prévia, o CCA Senior Care Options poderá não abranger este medicamento. PA_NSO não se aplica a membros exclusivamente do Medicaid.

QL = limite de quantidade. por vezes, o CCA Senior Care Options limita a quantidade que pode obter de um medicamento.

ST = Terapia por etapas. Por vezes, o CCA Senior Care Options exige que se submeta a terapia por etapas. Isto significa que terá de tomar medicamentos numa determinada ordem para as suas patologias. Poderá ter de experimentar um medicamento antes de abrangermos outro medicamento. Se o seu prestador de serviços de saúde considerar que o primeiro medicamento não funciona para o seu caso, então vamos abranger o segundo.

ST_NSO = Terapia por Etapas Apenas para Novos Medicamentos. Se este medicamento for novo para o membro, este tem de experimentar primeiro certos medicamentos para tratar a sua patologia antes de abrangermos outro medicamento para essa patologia. ST_NSO não se aplica a membros exclusivamente do Medicaid.

VAC = Vacina. Vacinas Medicare Parte D (Paga \$0).

A primeira coluna do quadro lista o nome do medicamento. Os medicamentos genéricos estão listados em minúsculas e itálico (por exemplo, *valsartan*), os medicamentos de marca estão em maiúsculas (por exemplo, MYRBETRIQ) e os medicamentos OTC e produtos não medicamentosos estão listados em maiúsculas (por exemplo, AGULHAS DE SEGURANÇA PARA INSULINA).

As informações na coluna “Ações necessárias, restrições ou limites de utilização” indicam se o CCA Senior Care Options tem alguma disposição para abranger o seu medicamento.

Se tiver dúvidas, contacte o CCA Senior Care Options através do número 866-610-2273 (TTY 711), das 8 AM às 8 PM, 7 dias por semana. A chamada é gratuita. **Para obter mais informações,** visite ccama.org.



CCA_CY25_5T_GS_CORE eff 12/01/2025

NAME OF DRUG

WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)

ANALGESICS - DRUGS TO TREAT PAIN AND INFLAMMATION

GOUT - DRUGS TO TREAT GOUT

<i>allopurinol tab 100 mg</i>	\$0 (Tier 1)
<i>allopurinol tab 300 mg</i>	\$0 (Tier 1)
<i>colchicine cap 0.6 mg</i>	\$0 (Tier 3) QL (60 caps / 30 days)
<i>colchicine tab 0.6 mg</i>	\$0 (Tier 2) QL (120 tabs / 30 days)
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	\$0 (Tier 3)
<i>febuxostat tab 40 mg</i>	\$0 (Tier 4) PA
<i>febuxostat tab 80 mg</i>	\$0 (Tier 4) PA
MITIGARE CAP 0.6MG	\$0 (Tier 3) QL (60 caps / 30 days)
<i>probenecid tab 500 mg</i>	\$0 (Tier 3)

MISCELLANEOUS

<i>lidocaine hcl local inj 0.5%</i>	\$0 (Tier 3) B/D
<i>lidocaine hcl local inj 1%</i>	\$0 (Tier 3) B/D
<i>lidocaine hcl local inj 2%</i>	\$0 (Tier 3) B/D
<i>lidocaine hcl local preservative free (pf) inj 0.5%</i>	\$0 (Tier 3) B/D
<i>lidocaine hcl local preservative free (pf) inj 1%</i>	\$0 (Tier 3) B/D
<i>lidocaine hcl local preservative free (pf) inj 1.5%</i>	\$0 (Tier 3) B/D

NSAIDS - DRUGS TO TREAT PAIN AND INFLAMMATION

<i>celecoxib cap 50 mg</i>	\$0 (Tier 3) QL (60 caps / 30 days)
<i>celecoxib cap 100 mg</i>	\$0 (Tier 3) QL (60 caps / 30 days)
<i>celecoxib cap 200 mg</i>	\$0 (Tier 3) QL (60 caps / 30 days)
<i>celecoxib cap 400 mg</i>	\$0 (Tier 3) QL (30 caps / 30 days)
<i>diclofenac potassium tab 50 mg</i>	\$0 (Tier 2) QL (120 tabs / 30 days)
<i>diclofenac sodium tab delayed release 25 mg</i>	\$0 (Tier 2)
<i>diclofenac sodium tab delayed release 50 mg</i>	\$0 (Tier 2)
<i>diclofenac sodium tab delayed release 75 mg</i>	\$0 (Tier 2)
<i>diclofenac sodium tab er 24hr 100 mg</i>	\$0 (Tier 3)
<i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg</i>	\$0 (Tier 4)
<i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg</i>	\$0 (Tier 4)
<i>diflunisal tab 500 mg</i>	\$0 (Tier 3)
<i>ec-naproxen</i>	\$0 (Tier 4) QL (90 tabs / 30 days)

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

NAME OF DRUG**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)**

<i>etodolac cap 200 mg</i>	\$0 (Tier 3)
<i>etodolac cap 300 mg</i>	\$0 (Tier 3)
<i>etodolac tab 400 mg</i>	\$0 (Tier 3)
<i>etodolac tab 500 mg</i>	\$0 (Tier 3)
<i>etodolac tab er 24hr 400 mg</i>	\$0 (Tier 3)
<i>etodolac tab er 24hr 500 mg</i>	\$0 (Tier 3)
<i>etodolac tab er 24hr 600 mg</i>	\$0 (Tier 3)
<i>flurbiprofen tab 100 mg</i>	\$0 (Tier 3)
<i>ibu</i>	\$0 (Tier 1)
<i>ibuprofen susp 100 mg/5ml</i>	\$0 (Tier 3)
<i>ibuprofen tab 400 mg</i>	\$0 (Tier 1)
<i>ibuprofen tab 600 mg</i>	\$0 (Tier 1)
<i>ibuprofen tab 800 mg</i>	\$0 (Tier 1)
<i>ketorolac tromethamine tab 10 mg</i>	\$0 (Tier 2) QL (20 tabs / 30 days), PA; PA applies if 70 years and older
<i>meloxicam tab 7.5 mg</i>	\$0 (Tier 1)
<i>meloxicam tab 15 mg</i>	\$0 (Tier 1)
<i>nabumetone tab 500 mg</i>	\$0 (Tier 2)
<i>nabumetone tab 750 mg</i>	\$0 (Tier 2)
<i>naproxen sodium tab 275 mg</i>	\$0 (Tier 3)
<i>naproxen sodium tab 550 mg</i>	\$0 (Tier 3)
<i>naproxen tab 250 mg</i>	\$0 (Tier 1)
<i>naproxen tab 375 mg</i>	\$0 (Tier 1)
<i>naproxen tab 500 mg</i>	\$0 (Tier 1)
<i>naproxen tab ec 375 mg</i>	\$0 (Tier 2) QL (120 tabs / 30 days)
<i>oxaprozin tab 600 mg</i>	\$0 (Tier 4)
<i>piroxicam cap 10 mg</i>	\$0 (Tier 3)
<i>piroxicam cap 20 mg</i>	\$0 (Tier 3)
<i>sulindac tab 150 mg</i>	\$0 (Tier 2)
<i>sulindac tab 200 mg</i>	\$0 (Tier 2)

OPIOID ANALGESICS, LONG-ACTING

<i>buprenorphine td patch weekly 5 mcg/hr</i>	\$0 (Tier 2) QL (4 patches / 28 days)
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	\$0 (Tier 2) QL (4 patches / 28 days)
<i>buprenorphine td patch weekly 10 mcg/hr</i>	\$0 (Tier 2) QL (4 patches / 28 days)
<i>buprenorphine td patch weekly 15 mcg/hr</i>	\$0 (Tier 2) QL (4 patches / 28 days)

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>buprenorphine td patch weekly 20 mcg/hr</i>	\$0 (Tier 2)	QL (4 patches / 28 days)
<i>fentanyl td patch 72hr 12 mcg/hr</i>	\$0 (Tier 4)	QL (10 patches / 30 days), PA
<i>fentanyl td patch 72hr 25 mcg/hr</i>	\$0 (Tier 4)	QL (10 patches / 30 days), PA
<i>fentanyl td patch 72hr 37.5 mcg/hr</i>	\$0 (Tier 4)	QL (10 patches / 30 days), PA
<i>fentanyl td patch 72hr 50 mcg/hr</i>	\$0 (Tier 4)	QL (10 patches / 30 days), PA
<i>fentanyl td patch 72hr 62.5 mcg/hr</i>	\$0 (Tier 4)	QL (10 patches / 30 days), PA
<i>fentanyl td patch 72hr 75 mcg/hr</i>	\$0 (Tier 4)	QL (10 patches / 30 days), PA
<i>fentanyl td patch 72hr 87.5 mcg/hr</i>	\$0 (Tier 4)	QL (10 patches / 30 days), PA
<i>fentanyl td patch 72hr 100 mcg/hr</i>	\$0 (Tier 4)	QL (10 patches / 30 days), PA
<i>hydrocodone bitartrate tab er 24hr deter 20 mg</i>	\$0 (Tier 4)	QL (30 tabs / 30 days), PA
<i>hydrocodone bitartrate tab er 24hr deter 30 mg</i>	\$0 (Tier 4)	QL (30 tabs / 30 days), PA
<i>hydrocodone bitartrate tab er 24hr deter 40 mg</i>	\$0 (Tier 4)	QL (30 tabs / 30 days), PA
<i>hydrocodone bitartrate tab er 24hr deter 60 mg</i>	\$0 (Tier 4)	QL (30 tabs / 30 days), PA
<i>hydrocodone bitartrate tab er 24hr deter 80 mg</i>	\$0 (Tier 4)	QL (30 tabs / 30 days), PA
<i>hydrocodone bitartrate tab er 24hr deter 100 mg</i>	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
<i>hydrocodone bitartrate tab er 24hr deter 120 mg</i>	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
<i>methadone hcl soln 5 mg/5ml</i>	\$0 (Tier 3)	QL (450 mL / 30 days), PA
<i>methadone hcl soln 10 mg/5ml</i>	\$0 (Tier 3)	QL (450 mL / 30 days), PA
<i>methadone hcl tab 5 mg</i>	\$0 (Tier 3)	QL (90 tabs / 30 days), PA
<i>methadone hcl tab 10 mg</i>	\$0 (Tier 3)	QL (90 tabs / 30 days), PA
<i>methadone hydrochloride i</i>	\$0 (Tier 3)	QL (90 mL / 30 days), PA

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>morphine sulfate tab er 15 mg</i>	\$0 (Tier 3)	QL (90 tabs / 30 days), PA
<i>morphine sulfate tab er 30 mg</i>	\$0 (Tier 3)	QL (90 tabs / 30 days), PA
<i>morphine sulfate tab er 60 mg</i>	\$0 (Tier 3)	QL (90 tabs / 30 days), PA
<i>morphine sulfate tab er 100 mg</i>	\$0 (Tier 3)	QL (90 tabs / 30 days), PA
<i>morphine sulfate tab er 200 mg</i>	\$0 (Tier 3)	QL (90 tabs / 30 days), PA
OXYCONTIN TAB 10MG ER	\$0 (Tier 4)	QL (60 tabs / 30 days), PA
OXYCONTIN TAB 15MG ER	\$0 (Tier 4)	QL (60 tabs / 30 days), PA
OXYCONTIN TAB 20MG ER	\$0 (Tier 4)	QL (60 tabs / 30 days), PA
OXYCONTIN TAB 30MG ER	\$0 (Tier 4)	QL (60 tabs / 30 days), PA
OXYCONTIN TAB 40MG ER	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
OXYCONTIN TAB 60MG ER	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
OXYCONTIN TAB 80MG ER	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA

OPIOID ANALGESICS, SHORT-ACTING

<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	\$0 (Tier 2)	QL (2700 mL / 30 days)
<i>acetaminophen w/ codeine tab 300-15 mg</i>	\$0 (Tier 2)	QL (400 tabs / 30 days)
<i>acetaminophen w/ codeine tab 300-30 mg</i>	\$0 (Tier 2)	QL (360 tabs / 30 days)
<i>acetaminophen w/ codeine tab 300-60 mg</i>	\$0 (Tier 2)	QL (180 tabs / 30 days)
<i>butorphanol tartrate inj 1 mg/ml</i>	\$0 (Tier 4)	
<i>butorphanol tartrate inj 2 mg/ml</i>	\$0 (Tier 4)	
<i>butorphanol tartrate nasal soln 10 mg/ml</i>	\$0 (Tier 3)	QL (10 mL / 30 days)
<i>endocet tab 2.5-325mg</i>	\$0 (Tier 3)	QL (360 tabs / 30 days)
<i>endocet tab 5-325mg</i>	\$0 (Tier 3)	QL (360 tabs / 30 days)
<i>endocet tab 7.5-325mg</i>	\$0 (Tier 3)	QL (240 tabs / 30 days)
<i>endocet tab 10-325mg</i>	\$0 (Tier 3)	QL (180 tabs / 30 days)
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	\$0 (Tier 4)	QL (2700 mL / 30 days)
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	\$0 (Tier 3)	QL (240 tabs / 30 days)
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	\$0 (Tier 3)	QL (180 tabs / 30 days)

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>hydrocodone-acetaminophen tab 10-325 mg</i>	\$0 (Tier 3)	QL (180 tabs / 30 days)
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>	\$0 (Tier 3)	QL (150 tabs / 30 days)
<i>hydromorphone hcl liqd 1 mg/ml</i>	\$0 (Tier 4)	QL (600 mL / 30 days)
<i>hydromorphone hcl tab 2 mg</i>	\$0 (Tier 3)	QL (180 tabs / 30 days)
<i>hydromorphone hcl tab 4 mg</i>	\$0 (Tier 3)	QL (180 tabs / 30 days)
<i>hydromorphone hcl tab 8 mg</i>	\$0 (Tier 3)	QL (180 tabs / 30 days)
<i>morphine sulfate iv soln 2 mg/ml</i>	\$0 (Tier 4)	B/D
<i>morphine sulfate iv soln 4 mg/ml</i>	\$0 (Tier 4)	B/D
<i>morphine sulfate iv soln 8 mg/ml</i>	\$0 (Tier 4)	B/D
<i>morphine sulfate iv soln 10 mg/ml</i>	\$0 (Tier 4)	B/D
<i>morphine sulfate oral soln 10 mg/5ml</i>	\$0 (Tier 3)	QL (900 mL / 30 days)
<i>morphine sulfate oral soln 20 mg/5ml</i>	\$0 (Tier 3)	QL (900 mL / 30 days)
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	\$0 (Tier 3)	QL (180 mL / 30 days)
<i>morphine sulfate tab 15 mg</i>	\$0 (Tier 3)	QL (180 tabs / 30 days)
<i>morphine sulfate tab 30 mg</i>	\$0 (Tier 3)	QL (180 tabs / 30 days)
<i>nalbuphine hcl inj 10 mg/ml</i>	\$0 (Tier 4)	
<i>nalbuphine hcl inj 20 mg/ml</i>	\$0 (Tier 4)	
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	\$0 (Tier 4)	QL (180 mL / 30 days)
<i>oxycodone hcl soln 5 mg/5ml</i>	\$0 (Tier 4)	QL (900 mL / 30 days)
<i>oxycodone hcl tab 5 mg</i>	\$0 (Tier 3)	QL (180 tabs / 30 days)
<i>oxycodone hcl tab 10 mg</i>	\$0 (Tier 3)	QL (180 tabs / 30 days)
<i>oxycodone hcl tab 15 mg</i>	\$0 (Tier 3)	QL (180 tabs / 30 days)
<i>oxycodone hcl tab 20 mg</i>	\$0 (Tier 3)	QL (180 tabs / 30 days)
<i>oxycodone hcl tab 30 mg</i>	\$0 (Tier 3)	QL (180 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	\$0 (Tier 3)	QL (360 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	\$0 (Tier 3)	QL (360 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	\$0 (Tier 3)	QL (240 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	\$0 (Tier 3)	QL (180 tabs / 30 days)
<i>tramadol hcl tab 50 mg</i>	\$0 (Tier 2)	QL (240 tabs / 30 days)
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	\$0 (Tier 2)	QL (240 tabs / 30 days)

ANTI-INFECTIVES - DRUGS TO TREAT INFECTIONS

ANTI-INFECTIVES - MISCELLANEOUS

<i>albendazole tab 200 mg</i>	\$0 (Tier 5)	NDS, QL (672 tabs / year), PA
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You can find information on what the symbols and abbreviations in this table mean by going to the beginning of this table.

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>amikacin sulfate inj 1 gm/4ml (250 mg/ml)</i>	\$0 (Tier 4)	
<i>amikacin sulfate inj 500 mg/2ml (250 mg/ml)</i>	\$0 (Tier 4)	
ARIKAYCE SUS	\$0 (Tier 5)	NDS, PA
<i>atovaquone susp 750 mg/5ml</i>	\$0 (Tier 4)	QL (300 mL / 30 days), PA
<i>aztreonam for inj 1 gm</i>	\$0 (Tier 4)	
<i>aztreonam for inj 2 gm</i>	\$0 (Tier 4)	
CAYSTON INH 75MG	\$0 (Tier 5)	NDS, PA
<i>clindamycin hcl cap 75 mg</i>	\$0 (Tier 2)	
<i>clindamycin hcl cap 150 mg</i>	\$0 (Tier 2)	
<i>clindamycin hcl cap 300 mg</i>	\$0 (Tier 2)	
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	\$0 (Tier 4)	
<i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i>	\$0 (Tier 4)	
<i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i>	\$0 (Tier 4)	
<i>clindamycin phosphate in d5w iv soln 900 mg/50ml</i>	\$0 (Tier 4)	
<i>clindamycin phosphate inj 300 mg/2ml</i>	\$0 (Tier 3)	
<i>clindamycin phosphate inj 600 mg/4ml</i>	\$0 (Tier 3)	
<i>clindamycin phosphate inj 900 mg/6ml</i>	\$0 (Tier 3)	
CLINDMYC/NAC INJ 300/50ML	\$0 (Tier 4)	
CLINDMYC/NAC INJ 600/50ML	\$0 (Tier 4)	
CLINDMYC/NAC INJ 900/50ML	\$0 (Tier 4)	
<i>colistimethate sod for inj 150 mg (colistin base activity)</i>	\$0 (Tier 4)	
<i>dapsone tab 25 mg</i>	\$0 (Tier 3)	
<i>dapsone tab 100 mg</i>	\$0 (Tier 3)	
<i>daptomycin for iv soln 350 mg</i>	\$0 (Tier 5)	NDS
<i>daptomycin for iv soln 500 mg</i>	\$0 (Tier 5)	NDS
DAPTOMYCIN INJ 350MG	\$0 (Tier 5)	NDS
EMVERM CHW 100MG	\$0 (Tier 5)	NDS, QL (12 tabs / year)
<i>ertapenem sodium for inj 1 gm (base equivalent)</i>	\$0 (Tier 3)	
<i>gentamicin in saline inj 0.8 mg/ml</i>	\$0 (Tier 3)	
<i>gentamicin in saline inj 1 mg/ml</i>	\$0 (Tier 3)	
<i>gentamicin in saline inj 1.2 mg/ml</i>	\$0 (Tier 3)	
<i>gentamicin in saline inj 1.6 mg/ml</i>	\$0 (Tier 3)	

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>gentamicin in saline inj 2 mg/ml</i>	\$0 (Tier 3)	
<i>gentamicin sulfate inj 10 mg/ml</i>	\$0 (Tier 3)	
<i>gentamicin sulfate inj 40 mg/ml</i>	\$0 (Tier 3)	
<i>imipenem-cilastatin intravenous for soln 250 mg</i>	\$0 (Tier 3)	
<i>imipenem-cilastatin intravenous for soln 500 mg</i>	\$0 (Tier 3)	
IMPAVIDO CAP 50MG	\$0 (Tier 5)	NDS, PA
<i>ivermectin tab 3 mg</i>	\$0 (Tier 3)	QL (12 tabs / 90 days), PA
<i>ivermectin tab 6 mg</i>	\$0 (Tier 3)	QL (10 tabs / 90 days), PA
<i>linezolid for susp 100 mg/5ml</i>	\$0 (Tier 5)	NDS, QL (1800 mL / 30 days)
LINEZOLID INJ 2MG/ML	\$0 (Tier 4)	
<i>linezolid iv soln 600 mg/300ml (2 mg/ml)</i>	\$0 (Tier 4)	
<i>linezolid tab 600 mg</i>	\$0 (Tier 4)	QL (60 tabs / 30 days)
<i>meropenem iv for soln 1 gm</i>	\$0 (Tier 4)	
<i>meropenem iv for soln 2 gm</i>	\$0 (Tier 4)	
<i>meropenem iv for soln 500 mg</i>	\$0 (Tier 4)	
<i>methenamine hippurate tab 1 gm</i>	\$0 (Tier 3)	
<i>metronidazole iv soln 500 mg/100ml</i>	\$0 (Tier 3)	
<i>metronidazole tab 250 mg</i>	\$0 (Tier 1)	
<i>metronidazole tab 500 mg</i>	\$0 (Tier 1)	
<i>neomycin sulfate tab 500 mg</i>	\$0 (Tier 2)	
<i>nitazoxanide tab 500 mg</i>	\$0 (Tier 5)	NDS, QL (6 tabs / 30 days)
<i>nitrofurantoin macrocrystalline cap 50 mg</i>	\$0 (Tier 3)	
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	\$0 (Tier 3)	
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	\$0 (Tier 3)	
<i>pentamidine isethionate inh</i>	\$0 (Tier 4)	B/D
<i>pentamidine isethionate inj</i>	\$0 (Tier 4)	
<i>polymyxin b sulfate for inj 500000 unit</i>	\$0 (Tier 4)	
<i>praziquantel tab 600 mg</i>	\$0 (Tier 4)	
<i>pyrimethamine tab 25 mg</i>	\$0 (Tier 5)	NDS, QL (90 tabs / 30 days), PA
<i>streptomycin sulfate for inj 1 gm</i>	\$0 (Tier 5)	NDS
<i>sulfadiazine tab 500 mg</i>	\$0 (Tier 5)	NDS
<i>sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml</i>	\$0 (Tier 4)	

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	\$0 (Tier 3)	
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	\$0 (Tier 1)	
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	\$0 (Tier 1)	
<i>tinidazole tab 250 mg</i>	\$0 (Tier 3)	
<i>tinidazole tab 500 mg</i>	\$0 (Tier 3)	
TOBI PODHALR CAP 28MG	\$0 (Tier 5)	NDS, PA
<i>tobramycin nebu soln 300 mg/5ml</i>	\$0 (Tier 5)	NDS, PA
<i>tobramycin sulfate inj 1.2 gm/30ml (40 mg/ml) (base equiv)</i>	\$0 (Tier 3)	
<i>tobramycin sulfate inj 2 gm/50ml (40 mg/ml) (base equiv)</i>	\$0 (Tier 3)	
<i>tobramycin sulfate inj 10 mg/ml (base equivalent)</i>	\$0 (Tier 3)	
<i>tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv)</i>	\$0 (Tier 3)	
<i>trimethoprim tab 100 mg</i>	\$0 (Tier 3)	
<i>vancomycin hcl cap 125 mg (base equivalent)</i>	\$0 (Tier 4)	QL (80 caps / 180 days)
<i>vancomycin hcl cap 250 mg (base equivalent)</i>	\$0 (Tier 4)	QL (160 caps / 180 days)
<i>vancomycin hcl for iv soln 1 gm (base equivalent)</i>	\$0 (Tier 4)	
<i>vancomycin hcl for iv soln 1.5 gm (base equivalent)</i>	\$0 (Tier 4)	
<i>vancomycin hcl for iv soln 1.25 gm (base equivalent)</i>	\$0 (Tier 4)	
<i>vancomycin hcl for iv soln 5 gm (base equivalent)</i>	\$0 (Tier 4)	
<i>vancomycin hcl for iv soln 10 gm (base equivalent)</i>	\$0 (Tier 4)	
<i>vancomycin hcl for iv soln 500 mg (base equivalent)</i>	\$0 (Tier 4)	
<i>vancomycin hcl for iv soln 750 mg (base equivalent)</i>	\$0 (Tier 4)	
VANCOMYCIN INJ 1 GM	\$0 (Tier 4)	
VANCOMYCIN INJ 500MG	\$0 (Tier 4)	
VANCOMYCIN INJ 750MG	\$0 (Tier 4)	
ANTIFUNGALS - DRUGS TO TREAT FUNGAL INFECTIONS		
<i>amphotericin b for iv soln 50 mg</i>	\$0 (Tier 4)	B/D

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

NAME OF DRUG**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)**

<i>amphotericin b liposome iv for susp 50 mg</i>	\$0 (Tier 5) NDS, B/D
<i>caspofungin acetate for iv soln 50 mg</i>	\$0 (Tier 4)
<i>caspofungin acetate for iv soln 70 mg</i>	\$0 (Tier 4)
<i>fluconazole for susp 10 mg/ml</i>	\$0 (Tier 3)
<i>fluconazole for susp 40 mg/ml</i>	\$0 (Tier 3)
<i>fluconazole in nacl 0.9% inj 200 mg/100ml</i>	\$0 (Tier 3)
<i>fluconazole in nacl 0.9% inj 400 mg/200ml</i>	\$0 (Tier 3)
<i>fluconazole tab 50 mg</i>	\$0 (Tier 3)
<i>fluconazole tab 100 mg</i>	\$0 (Tier 2)
<i>fluconazole tab 150 mg</i>	\$0 (Tier 2)
<i>fluconazole tab 200 mg</i>	\$0 (Tier 2)
<i>flucytosine cap 250 mg</i>	\$0 (Tier 5) NDS, PA
<i>flucytosine cap 500 mg</i>	\$0 (Tier 5) NDS, PA
<i>griseofulvin microsize susp 125 mg/5ml</i>	\$0 (Tier 4)
<i>griseofulvin microsize tab 500 mg</i>	\$0 (Tier 4)
<i>griseofulvin ultramicrosize tab 125 mg</i>	\$0 (Tier 4)
<i>griseofulvin ultramicrosize tab 250 mg</i>	\$0 (Tier 4)
<i>itraconazole cap 100 mg</i>	\$0 (Tier 4) PA
<i>ketoconazole tab 200 mg</i>	\$0 (Tier 3) PA
<i>miconazole sodium for iv soln 50 mg</i>	\$0 (Tier 4)
<i>miconazole sodium for iv soln 100 mg</i>	\$0 (Tier 4)
<i>nystatin tab 500000 unit</i>	\$0 (Tier 3)
<i>posaconazole susp 40 mg/ml</i>	\$0 (Tier 5) NDS, QL (630 mL / 30 days), PA
<i>posaconazole tab delayed release 100 mg</i>	\$0 (Tier 5) NDS, QL (93 tabs / 30 days), PA
<i>terbinafine hcl tab 250 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>voriconazole for inj 200 mg</i>	\$0 (Tier 4) PA
<i>voriconazole for susp 40 mg/ml</i>	\$0 (Tier 5) NDS, QL (600 mL / 28 days), PA
<i>voriconazole tab 50 mg</i>	\$0 (Tier 4) QL (480 tabs / 30 days)
<i>voriconazole tab 200 mg</i>	\$0 (Tier 4) QL (120 tabs / 30 days)

ANTIMALARIALS - DRUGS TO TREAT MALARIA

<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	\$0 (Tier 4)
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	\$0 (Tier 4)
<i>chloroquine phosphate tab 250 mg</i>	\$0 (Tier 4)
<i>chloroquine phosphate tab 500 mg</i>	\$0 (Tier 4)
<i>COARTEM TAB 20-120MG</i>	\$0 (Tier 4)
<i>mefloquine hcl tab 250 mg</i>	\$0 (Tier 3)
<i>primaquine phosphate tab 26.3 mg (15 mg base)</i>	\$0 (Tier 3)

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
PRIMAQUINE TAB 26.3MG	\$0 (Tier 3)
<i>quinine sulfate cap 324 mg</i>	\$0 (Tier 4) PA
ANTIRETROVIRAL AGENTS - DRUGS TO SUPPRESS HIV/AIDS INFECTION	
<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	\$0 (Tier 4)
<i>abacavir sulfate tab 300 mg (base equiv)</i>	\$0 (Tier 3)
APTIVUS CAP 250MG	\$0 (Tier 5) NDS
<i>atazanavir sulfate cap 150 mg (base equiv)</i>	\$0 (Tier 4)
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	\$0 (Tier 4)
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	\$0 (Tier 4)
<i>darunavir tab 600 mg</i>	\$0 (Tier 5) NDS, QL (60 tabs / 30 days)
<i>darunavir tab 800 mg</i>	\$0 (Tier 5) NDS, QL (30 tabs / 30 days)
EDURANT PED TAB 2.5MG	\$0 (Tier 5) NDS
EDURANT TAB 25MG	\$0 (Tier 5) NDS
<i>efavirenz tab 600 mg</i>	\$0 (Tier 4)
<i>emtricitabine caps 200 mg</i>	\$0 (Tier 3)
EMTRIVA SOL 10MG/ML	\$0 (Tier 4)
<i>etravirine tab 100 mg</i>	\$0 (Tier 5) NDS
<i>etravirine tab 200 mg</i>	\$0 (Tier 5) NDS
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	\$0 (Tier 5) NDS
FUZEON INJ 90MG	\$0 (Tier 5) NDS
INTELENCE TAB 25MG	\$0 (Tier 4)
ISENTRESS CHW 25MG	\$0 (Tier 4)
ISENTRESS CHW 100MG	\$0 (Tier 5) NDS
ISENTRESS HD TAB 600MG	\$0 (Tier 5) NDS
ISENTRESS POW 100MG	\$0 (Tier 5) NDS
ISENTRESS TAB 400MG	\$0 (Tier 5) NDS
<i>lamivudine oral soln 10 mg/ml</i>	\$0 (Tier 3)
<i>lamivudine tab 150 mg</i>	\$0 (Tier 3)
<i>lamivudine tab 300 mg</i>	\$0 (Tier 3)
<i>maraviroc tab 150 mg</i>	\$0 (Tier 5) NDS
<i>maraviroc tab 300 mg</i>	\$0 (Tier 5) NDS
<i>nevirapine susp 50 mg/5ml</i>	\$0 (Tier 4)
<i>nevirapine tab 200 mg</i>	\$0 (Tier 2)
<i>nevirapine tab er 24hr 400 mg</i>	\$0 (Tier 4)
NORVIR POW 100MG	\$0 (Tier 4)

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
PIFELTRO TAB 100MG	\$0 (Tier 5) NDS
PREZISTA SUS 100MG/ML	\$0 (Tier 5) NDS, QL (400 mL / 30 days)
PREZISTA TAB 75MG	\$0 (Tier 4) QL (480 tabs / 30 days)
PREZISTA TAB 150MG	\$0 (Tier 5) NDS, QL (240 tabs / 30 days)
REYATAZ POW 50MG	\$0 (Tier 5) NDS
<i>ritonavir tab 100 mg</i>	\$0 (Tier 3)
RUKOBIA TAB 600MG ER	\$0 (Tier 5) NDS
SELZENTRY SOL 20MG/ML	\$0 (Tier 5) NDS
SUNLENCA TAB 300MG	\$0 (Tier 5) NDS
<i>tenofovir disoproxil fumarate tab 300 mg</i>	\$0 (Tier 3)
TIVICAY PD TAB 5MG	\$0 (Tier 5) NDS
TIVICAY TAB 10MG	\$0 (Tier 3)
TIVICAY TAB 25MG	\$0 (Tier 5) NDS
TIVICAY TAB 50MG	\$0 (Tier 5) NDS
TROGARZO INJ 150MG/ML	\$0 (Tier 5) NDS
TYBOST TAB 150MG	\$0 (Tier 3)
VIRACEPT TAB 250MG	\$0 (Tier 5) NDS
VIRACEPT TAB 625MG	\$0 (Tier 5) NDS
VIREAD POW 40MG/GM	\$0 (Tier 5) NDS
VIREAD TAB 150MG	\$0 (Tier 5) NDS
VIREAD TAB 200MG	\$0 (Tier 5) NDS
VIREAD TAB 250MG	\$0 (Tier 5) NDS
<i>zidovudine cap 100 mg</i>	\$0 (Tier 4)
<i>zidovudine syrup 10 mg/ml</i>	\$0 (Tier 4)
<i>zidovudine tab 300 mg</i>	\$0 (Tier 3)

ANTIRETROVIRAL COMBINATION AGENTS - DRUGS TO SUPPRESS HIV/AIDS INFECTION

<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	\$0 (Tier 3)
BIKTARVY TAB 30-120-15 MG	\$0 (Tier 5) NDS
BIKTARVY TAB 50-200-25 MG	\$0 (Tier 5) NDS
CIMDUO TAB 300-300	\$0 (Tier 5) NDS
COMPLERA TAB	\$0 (Tier 5) NDS
DELSTRIGO TAB	\$0 (Tier 5) NDS
DESCOVY TAB 120-15MG	\$0 (Tier 5) NDS
DESCOVY TAB 200/25MG	\$0 (Tier 5) NDS
DOVATO TAB 50-300MG	\$0 (Tier 5) NDS

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	\$0 (Tier 5)	NDS
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	\$0 (Tier 5)	NDS
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	\$0 (Tier 5)	NDS
<i>emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg</i>	\$0 (Tier 5)	NDS
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	\$0 (Tier 5)	NDS
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	\$0 (Tier 5)	NDS
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	\$0 (Tier 5)	NDS
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	\$0 (Tier 4)	
EVOTAZ TAB 300-150	\$0 (Tier 5)	NDS
GENVOYA TAB	\$0 (Tier 5)	NDS
JULUCA TAB 50-25MG	\$0 (Tier 5)	NDS
KALETRA SOL	\$0 (Tier 4)	
<i>lamivudine-zidovudine tab 150-300 mg</i>	\$0 (Tier 4)	
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	\$0 (Tier 4)	
<i>lopinavir-ritonavir tab 100-25 mg</i>	\$0 (Tier 4)	
<i>lopinavir-ritonavir tab 200-50 mg</i>	\$0 (Tier 4)	
ODEFSEY TAB	\$0 (Tier 5)	NDS
PREZCOBIX TAB 675/150	\$0 (Tier 5)	NDS
PREZCOBIX TAB 800-150	\$0 (Tier 5)	NDS
STRIBILD TAB	\$0 (Tier 5)	NDS
SYMTUZA TAB	\$0 (Tier 5)	NDS
TRIUMEQ PD TAB	\$0 (Tier 3)	
TRIUMEQ TAB	\$0 (Tier 5)	NDS
ANTITUBERCULAR AGENTS - DRUGS TO TREAT TUBERCULOSIS		
<i>cycloserine cap 250 mg</i>	\$0 (Tier 5)	NDS
<i>ethambutol hcl tab 100 mg</i>	\$0 (Tier 3)	
<i>ethambutol hcl tab 400 mg</i>	\$0 (Tier 3)	
<i>isoniazid syrup 50 mg/5ml</i>	\$0 (Tier 4)	
<i>isoniazid tab 100 mg</i>	\$0 (Tier 1)	
<i>isoniazid tab 300 mg</i>	\$0 (Tier 1)	
PRIFTIN TAB 150MG	\$0 (Tier 4)	
<i>pyrazinamide tab 500 mg</i>	\$0 (Tier 4)	

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>rifabutin cap 150 mg</i>	\$0 (Tier 4)
<i>rifampin cap 150 mg</i>	\$0 (Tier 3)
<i>rifampin cap 300 mg</i>	\$0 (Tier 3)
<i>rifampin for inj 600 mg</i>	\$0 (Tier 4)
SIRTURO TAB 20MG	\$0 (Tier 5) NDS, PA
SIRTURO TAB 100MG	\$0 (Tier 5) NDS, PA

ANTIVIRALS - DRUGS TO TREAT VIRAL INFECTIONS

<i>acyclovir cap 200 mg</i>	\$0 (Tier 2)
<i>acyclovir sodium iv soln 50 mg/ml</i>	\$0 (Tier 4) B/D
<i>acyclovir susp 200 mg/5ml</i>	\$0 (Tier 4)
<i>acyclovir tab 400 mg</i>	\$0 (Tier 2)
<i>acyclovir tab 800 mg</i>	\$0 (Tier 2)
<i>adefovir dipivoxil tab 10 mg</i>	\$0 (Tier 4)
BARACLUDE SOL	\$0 (Tier 5) NDS, ST
<i>entecavir tab 0.5 mg</i>	\$0 (Tier 4)
<i>entecavir tab 1 mg</i>	\$0 (Tier 4)
EPCLUSA PAK 150-37.5	\$0 (Tier 5) NDS, PA
EPCLUSA PAK 200-50MG	\$0 (Tier 5) NDS, PA
EPCLUSA TAB 200-50MG	\$0 (Tier 5) NDS, PA
EPCLUSA TAB 400-100	\$0 (Tier 5) NDS, PA
<i>famciclovir tab 125 mg</i>	\$0 (Tier 3)
<i>famciclovir tab 250 mg</i>	\$0 (Tier 3)
<i>famciclovir tab 500 mg</i>	\$0 (Tier 3)
<i>ganciclovir sodium for inj 500 mg</i>	\$0 (Tier 4) B/D
HARVONI PAK 33.75-150MG	\$0 (Tier 5) NDS, PA
HARVONI PAK 45-200MG	\$0 (Tier 5) NDS, PA
HARVONI TAB 45-200MG	\$0 (Tier 5) NDS, PA
HARVONI TAB 90-400MG	\$0 (Tier 5) NDS, PA
<i>lamivudine tab 100 mg (hbv)</i>	\$0 (Tier 4)
LIVTENCITY TAB 200MG	\$0 (Tier 5) NDS, QL (336 tabs / 28 days), PA
MAVYRET PAK 50-20MG	\$0 (Tier 5) NDS, PA
MAVYRET TAB 100-40MG	\$0 (Tier 5) NDS, PA
<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	\$0 (Tier 3) QL (168 caps / year)
<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	\$0 (Tier 3) QL (84 caps / year)
<i>oseltamivir phosphate cap 75 mg (base equiv)</i>	\$0 (Tier 3) QL (84 caps / year)
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	\$0 (Tier 3) QL (1080 mL / year)

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NAME OF DRUG**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)**

PAXLOVID PAK	\$0 (Tier 2) QL (22 tabs / 90 days)
PAXLOVID TAB 150-100	\$0 (Tier 2) QL (40 tabs / 90 days)
PAXLOVID TAB 300-100	\$0 (Tier 2) QL (60 tabs / 90 days)
PEGASYS INJ	\$0 (Tier 5) NDS, PA
PEGASYS INJ 180MCG/M	\$0 (Tier 5) NDS, PA
PREVYMIS TAB 240MG	\$0 (Tier 5) NDS, QL (28 tabs / 28 days), PA
PREVYMIS TAB 480MG	\$0 (Tier 5) NDS, QL (28 tabs / 28 days), PA
RELENZA MIS DISKHALE	\$0 (Tier 3) QL (6 inhalers / year)
<i>ribavirin cap 200 mg</i>	\$0 (Tier 3)
<i>ribavirin tab 200 mg</i>	\$0 (Tier 3)
<i>rimantadine hydrochloride tab 100 mg</i>	\$0 (Tier 4)
<i>valacyclovir hcl tab 1 gm</i>	\$0 (Tier 3)
<i>valacyclovir hcl tab 500 mg</i>	\$0 (Tier 3)
<i>valganciclovir hcl for soln 50 mg/ml (base equiv)</i>	\$0 (Tier 5) NDS
<i>valganciclovir hcl tab 450 mg (base equivalent)</i>	\$0 (Tier 3)
VOSEVI TAB	\$0 (Tier 5) NDS, PA

CEPHALOSPORINS - DRUGS TO TREAT INFECTIONS

<i>cefaclor cap 250 mg</i>	\$0 (Tier 3)
<i>cefaclor cap 500 mg</i>	\$0 (Tier 3)
<i>cefadroxil cap 500 mg</i>	\$0 (Tier 2)
<i>cefadroxil for susp 250 mg/5ml</i>	\$0 (Tier 3)
<i>cefadroxil for susp 500 mg/5ml</i>	\$0 (Tier 3)
CEFAZOLIN INJ 1GM/50ML	\$0 (Tier 4)
CEFAZOLIN INJ 2GM	\$0 (Tier 4)
CEFAZOLIN INJ 3GM	\$0 (Tier 4)
<i>cefazolin sodium for inj 1 gm</i>	\$0 (Tier 3)
<i>cefazolin sodium for inj 2 gm</i>	\$0 (Tier 3)
<i>cefazolin sodium for inj 3 gm</i>	\$0 (Tier 3)
<i>cefazolin sodium for inj 10 gm</i>	\$0 (Tier 3)
<i>cefazolin sodium for inj 500 mg</i>	\$0 (Tier 3)
<i>cefazolin sodium for iv soln 1 gm</i>	\$0 (Tier 3)
CEFAZOLIN SOLN 2GM/100ML-4%	\$0 (Tier 4)
CEFAZOLIN/DEX SOL 1GM/50ML-4%	\$0 (Tier 4)
CEFAZOLIN/DEX SOL 2GM/50ML-3%	\$0 (Tier 4)
CEFAZOLIN/DEX SOL 3GM/50ML-2%	\$0 (Tier 4)
CEFAZOLIN/DEX SOL 3GM/150ML-4%	\$0 (Tier 4)
<i>cefdinir cap 300 mg</i>	\$0 (Tier 2)

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>cefdinir for susp 125 mg/5ml</i>	\$0 (Tier 3)	
<i>cefdinir for susp 250 mg/5ml</i>	\$0 (Tier 3)	
<i>cefepime hcl for inj 1 gm</i>	\$0 (Tier 4)	
<i>cefepime hcl for iv soln 2 gm</i>	\$0 (Tier 4)	
<i>cefixime cap 400 mg</i>	\$0 (Tier 4)	
<i>cefixime for susp 100 mg/5ml</i>	\$0 (Tier 4)	
<i>cefixime for susp 200 mg/5ml</i>	\$0 (Tier 4)	
<i>cefotetan disodium for inj 1 gm</i>	\$0 (Tier 4)	
<i>cefotetan disodium for inj 2 gm</i>	\$0 (Tier 4)	
<i>cefoxitin sodium for iv soln 1 gm</i>	\$0 (Tier 4)	
<i>cefoxitin sodium for iv soln 2 gm</i>	\$0 (Tier 4)	
<i>cefoxitin sodium for iv soln 10 gm</i>	\$0 (Tier 4)	
<i>cefpodoxime proxetil for susp 50 mg/5ml</i>	\$0 (Tier 4)	
<i>cefpodoxime proxetil for susp 100 mg/5ml</i>	\$0 (Tier 4)	
<i>cefpodoxime proxetil tab 100 mg</i>	\$0 (Tier 3)	
<i>cefpodoxime proxetil tab 200 mg</i>	\$0 (Tier 3)	
<i>cefprozil for susp 125 mg/5ml</i>	\$0 (Tier 3)	
<i>cefprozil for susp 250 mg/5ml</i>	\$0 (Tier 3)	
<i>cefprozil tab 250 mg</i>	\$0 (Tier 3)	
<i>cefprozil tab 500 mg</i>	\$0 (Tier 3)	
<i>ceftazidime for inj 1 gm</i>	\$0 (Tier 4)	
<i>ceftazidime for inj 6 gm</i>	\$0 (Tier 4)	
<i>ceftazidime for iv soln 2 gm</i>	\$0 (Tier 4)	
<i>ceftriaxone sodium for inj 1 gm</i>	\$0 (Tier 4)	
<i>ceftriaxone sodium for inj 2 gm</i>	\$0 (Tier 4)	
<i>ceftriaxone sodium for inj 10 gm</i>	\$0 (Tier 4)	
<i>ceftriaxone sodium for inj 250 mg</i>	\$0 (Tier 4)	
<i>ceftriaxone sodium for inj 500 mg</i>	\$0 (Tier 4)	
<i>ceftriaxone sodium for iv soln 1 gm</i>	\$0 (Tier 4)	
<i>ceftriaxone sodium for iv soln 2 gm</i>	\$0 (Tier 4)	
<i>cefuroxime axetil tab 250 mg</i>	\$0 (Tier 2)	
<i>cefuroxime axetil tab 500 mg</i>	\$0 (Tier 2)	
<i>cefuroxime sodium for inj 750 mg</i>	\$0 (Tier 3)	
<i>cefuroxime sodium for iv soln 1.5 gm</i>	\$0 (Tier 3)	
<i>cephalexin cap 250 mg</i>	\$0 (Tier 1)	
<i>cephalexin cap 500 mg</i>	\$0 (Tier 1)	
<i>cephalexin for susp 125 mg/5ml</i>	\$0 (Tier 3)	
<i>cephalexin for susp 250 mg/5ml</i>	\$0 (Tier 3)	
<i>tazicef</i>	\$0 (Tier 4)	
TEFLARO INJ 400MG	\$0 (Tier 5) NDS	

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
TEFLARO INJ 600MG	\$0 (Tier 5) NDS
ERYTHROMYCINS/MACROLIDES - DRUGS TO TREAT INFECTIONS	
<i>azithromycin for susp 100 mg/5ml</i>	\$0 (Tier 3)
<i>azithromycin for susp 200 mg/5ml</i>	\$0 (Tier 3)
<i>azithromycin iv for soln 500 mg</i>	\$0 (Tier 3)
<i>azithromycin powd pack for susp 1 gm</i>	\$0 (Tier 3)
<i>azithromycin tab 250 mg</i>	\$0 (Tier 1)
<i>azithromycin tab 500 mg</i>	\$0 (Tier 1)
<i>azithromycin tab 600 mg</i>	\$0 (Tier 1)
<i>clarithromycin for susp 125 mg/5ml</i>	\$0 (Tier 4)
<i>clarithromycin for susp 250 mg/5ml</i>	\$0 (Tier 4)
<i>clarithromycin tab 250 mg</i>	\$0 (Tier 3)
<i>clarithromycin tab 500 mg</i>	\$0 (Tier 3)
<i>clarithromycin tab er 24hr 500 mg</i>	\$0 (Tier 4)
DIFICID SUS	\$0 (Tier 5) NDS
DIFICID TAB 200MG	\$0 (Tier 5) NDS
<i>e.e.s. 400</i>	\$0 (Tier 4)
<i>ery-tab tab 250mg ec</i>	\$0 (Tier 4)
<i>ery-tab tab 333mg ec</i>	\$0 (Tier 4)
<i>ery-tab tab 500mg ec</i>	\$0 (Tier 4)
ERYTHROCIN INJ 500MG	\$0 (Tier 4)
<i>erythromycin ethylsuccinate tab 400 mg</i>	\$0 (Tier 4)
<i>erythromycin lactobionate for inj 500 mg</i>	\$0 (Tier 4)
<i>erythromycin tab 250 mg</i>	\$0 (Tier 4)
<i>erythromycin tab 500 mg</i>	\$0 (Tier 4)
<i>erythromycin tab delayed release 250 mg</i>	\$0 (Tier 4)
<i>erythromycin tab delayed release 333 mg</i>	\$0 (Tier 4)
<i>erythromycin tab delayed release 500 mg</i>	\$0 (Tier 4)
<i>erythromycin w/ delayed release particles cap 250 mg</i>	\$0 (Tier 4)
<i>fidaxomicin tab 200 mg</i>	\$0 (Tier 5) NDS
FLUOROQUINOLONES - DRUGS TO TREAT INFECTIONS	
CIPRO (10%) SUS 500MG/5	\$0 (Tier 4)
<i>ciprofloxacin 200 mg/100ml in d5w</i>	\$0 (Tier 3)
<i>ciprofloxacin 400 mg/200ml in d5w</i>	\$0 (Tier 3)
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	\$0 (Tier 1)
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	\$0 (Tier 1)
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	\$0 (Tier 1)
<i>levofloxacin in d5w iv soln 250 mg/50ml</i>	\$0 (Tier 3)
<i>levofloxacin in d5w iv soln 500 mg/100ml</i>	\$0 (Tier 3)

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
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<i>levofloxacin in d5w iv soln 750 mg/150ml</i>	\$0 (Tier 3)	
<i>levofloxacin iv soln 25 mg/ml</i>	\$0 (Tier 4)	
<i>levofloxacin oral soln 25 mg/ml</i>	\$0 (Tier 4)	
<i>levofloxacin tab 250 mg</i>	\$0 (Tier 1)	
<i>levofloxacin tab 500 mg</i>	\$0 (Tier 1)	
<i>levofloxacin tab 750 mg</i>	\$0 (Tier 1)	
<i>moxifloxacin hcl 400 mg/250ml in sodium chloride 0.8% inj</i>	\$0 (Tier 4)	
<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	\$0 (Tier 3)	

PENICILLINS - DRUGS TO TREAT INFECTIONS

<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	\$0 (Tier 3)	
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	\$0 (Tier 4)	
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	\$0 (Tier 3)	
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	\$0 (Tier 3)	
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	\$0 (Tier 3)	
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	\$0 (Tier 2)	
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	\$0 (Tier 2)	
<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	\$0 (Tier 4)	
<i>amoxicillin (trihydrate) cap 250 mg</i>	\$0 (Tier 1)	
<i>amoxicillin (trihydrate) cap 500 mg</i>	\$0 (Tier 1)	
<i>amoxicillin (trihydrate) chew tab 125 mg</i>	\$0 (Tier 2)	
<i>amoxicillin (trihydrate) chew tab 250 mg</i>	\$0 (Tier 2)	
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	\$0 (Tier 1)	
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	\$0 (Tier 1)	
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	\$0 (Tier 1)	
<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	\$0 (Tier 1)	
<i>amoxicillin (trihydrate) tab 500 mg</i>	\$0 (Tier 1)	
<i>amoxicillin (trihydrate) tab 875 mg</i>	\$0 (Tier 1)	
<i>ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm</i>	\$0 (Tier 4)	
<i>ampicillin & sulbactam sodium for inj 3 (2-1) gm</i>	\$0 (Tier 4)	

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>ampicillin & sulbactam sodium for iv soln 1.5 (1-0.5) gm</i>	\$0 (Tier 4)	
<i>ampicillin & sulbactam sodium for iv soln 3 (2-1) gm</i>	\$0 (Tier 4)	
<i>ampicillin & sulbactam sodium for iv soln 15 (10-5) gm</i>	\$0 (Tier 4)	
<i>ampicillin cap 500 mg</i>	\$0 (Tier 2)	
<i>ampicillin sodium for inj 1 gm</i>	\$0 (Tier 4)	
<i>ampicillin sodium for inj 2 gm</i>	\$0 (Tier 4)	
<i>ampicillin sodium for inj 125 mg</i>	\$0 (Tier 4)	
<i>ampicillin sodium for inj 250 mg</i>	\$0 (Tier 4)	
<i>ampicillin sodium for inj 500 mg</i>	\$0 (Tier 4)	
<i>ampicillin sodium for iv soln 1 gm</i>	\$0 (Tier 4)	
<i>ampicillin sodium for iv soln 2 gm</i>	\$0 (Tier 4)	
<i>ampicillin sodium for iv soln 10 gm</i>	\$0 (Tier 4)	
BICILLIN L-A INJ 600000	\$0 (Tier 4)	
BICILLIN L-A INJ 1200000	\$0 (Tier 4)	
BICILLIN L-A INJ 2400000	\$0 (Tier 4)	
<i>dicloxacillin sodium cap 250 mg</i>	\$0 (Tier 3)	
<i>dicloxacillin sodium cap 500 mg</i>	\$0 (Tier 3)	
<i>nafcillin sodium for inj 1 gm</i>	\$0 (Tier 4)	
<i>nafcillin sodium for inj 2 gm</i>	\$0 (Tier 4)	
<i>nafcillin sodium for iv soln 10 gm</i>	\$0 (Tier 5)	NDS
<i>oxacillin sodium for inj 1 gm (base equivalent)</i>	\$0 (Tier 4)	
<i>oxacillin sodium for inj 2 gm (base equivalent)</i>	\$0 (Tier 4)	
<i>oxacillin sodium for iv soln 10 gm (base equivalent)</i>	\$0 (Tier 4)	
<i>penicillin g potassium for inj 5000000 unit</i>	\$0 (Tier 4)	
<i>penicillin g potassium for inj 20000000 unit</i>	\$0 (Tier 4)	
<i>penicillin g sodium for inj 5000000 unit</i>	\$0 (Tier 4)	
<i>penicillin v potassium for soln 125 mg/5ml</i>	\$0 (Tier 2)	
<i>penicillin v potassium for soln 250 mg/5ml</i>	\$0 (Tier 2)	
<i>penicillin v potassium tab 250 mg</i>	\$0 (Tier 1)	
<i>penicillin v potassium tab 500 mg</i>	\$0 (Tier 1)	
<i>pfizerpen</i>	\$0 (Tier 4)	
<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	\$0 (Tier 4)	
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	\$0 (Tier 4)	

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

NAME OF DRUG**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)**

<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	\$0 (Tier 4)
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<i>piperacillin sod-tazobactam sod for inj 13.5 gm (12-1.5 gm)</i>	\$0 (Tier 4)
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<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	\$0 (Tier 4)
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TETRACYCLINES - DRUGS TO TREAT INFECTIONS

<i>doxy 100</i>	\$0 (Tier 4)
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<i>doxycycline hyclate cap 50 mg</i>	\$0 (Tier 3)
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<i>doxycycline hyclate cap 100 mg</i>	\$0 (Tier 3)
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<i>doxycycline hyclate for inj 100 mg</i>	\$0 (Tier 4)
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<i>doxycycline hyclate tab 20 mg</i>	\$0 (Tier 3)
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<i>doxycycline hyclate tab 100 mg</i>	\$0 (Tier 3)
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<i>doxycycline monohydrate cap 50 mg</i>	\$0 (Tier 2)
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<i>doxycycline monohydrate cap 100 mg</i>	\$0 (Tier 2)
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<i>doxycycline monohydrate for susp 25 mg/5ml</i>	\$0 (Tier 3)
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<i>doxycycline monohydrate tab 50 mg</i>	\$0 (Tier 3)
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<i>doxycycline monohydrate tab 75 mg</i>	\$0 (Tier 3)
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<i>doxycycline monohydrate tab 100 mg</i>	\$0 (Tier 3)
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<i>minocycline hcl cap 50 mg</i>	\$0 (Tier 3)
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<i>minocycline hcl cap 75 mg</i>	\$0 (Tier 3)
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<i>minocycline hcl cap 100 mg</i>	\$0 (Tier 3)
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NUZYRA INJ 100MG	\$0 (Tier 5) NDS
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NUZYRA TAB 150MG	\$0 (Tier 5) NDS, QL (30 tabs / 14 days)
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<i>tetracycline hcl cap 250 mg</i>	\$0 (Tier 4)
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<i>tetracycline hcl cap 500 mg</i>	\$0 (Tier 4)
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<i>tigecycline for iv soln 50 mg</i>	\$0 (Tier 5) NDS
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ANTINEOPLASTIC AGENTS - DRUGS TO TREAT CANCER**ALKYLATING AGENTS**

BENDAMUSTINE SOL 100/4ML	\$0 (Tier 5) NDS, B/D
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BENDEKA INJ 100/4ML	\$0 (Tier 5) NDS, B/D
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<i>carboplatin iv soln 50 mg/5ml</i>	\$0 (Tier 3) B/D
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<i>carboplatin iv soln 150 mg/15ml</i>	\$0 (Tier 3) B/D
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<i>carboplatin iv soln 450 mg/45ml</i>	\$0 (Tier 3) B/D
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<i>carboplatin iv soln 600 mg/60ml</i>	\$0 (Tier 3) B/D
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<i>cisplatin inj 50 mg/50ml (1 mg/ml)</i>	\$0 (Tier 3) B/D
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<i>cisplatin inj 100 mg/100ml (1 mg/ml)</i>	\$0 (Tier 3) B/D
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<i>cisplatin inj 200 mg/200ml (1 mg/ml)</i>	\$0 (Tier 3) B/D
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NAME OF DRUG**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)**

CYCLOPHOSPH INJ 1GM/2ML	\$0 (Tier 5) NDS, B/D
CYCLOPHOSPH INJ 1GM/5ML	\$0 (Tier 5) NDS, B/D
CYCLOPHOSPH INJ 2GM/4ML	\$0 (Tier 5) NDS, B/D
CYCLOPHOSPH INJ 500/5ML	\$0 (Tier 5) NDS, B/D
CYCLOPHOSPH INJ 500MG/ML	\$0 (Tier 5) NDS, B/D
CYCLOPHOSPH INJ 1000MG	\$0 (Tier 5) NDS, B/D
CYCLOPHOSPH INJ 2000MG	\$0 (Tier 5) NDS, B/D
CYCLOPHOSPH TAB 25MG	\$0 (Tier 4) B/D
CYCLOPHOSPH TAB 50MG	\$0 (Tier 4) B/D
CYCLOPHOSPHA INJ 2GM/10ML	\$0 (Tier 5) NDS, B/D
CYCLOPHOSPHA INJ 500/2.5	\$0 (Tier 5) NDS, B/D
<i>cyclophosphamide cap 25 mg</i>	\$0 (Tier 3) B/D
<i>cyclophosphamide cap 50 mg</i>	\$0 (Tier 3) B/D
<i>cyclophosphamide for inj 1 gm</i>	\$0 (Tier 4) B/D
<i>cyclophosphamide for inj 2 gm</i>	\$0 (Tier 5) NDS, B/D
<i>cyclophosphamide for inj 500 mg</i>	\$0 (Tier 4) B/D
FRINDOVYX INJ 1GM/2ML	\$0 (Tier 5) NDS, B/D
FRINDOVYX INJ 2GM/4ML	\$0 (Tier 5) NDS, B/D
FRINDOVYX INJ 500MG/ML	\$0 (Tier 5) NDS, B/D
GLEOSTINE CAP 10MG	\$0 (Tier 4)
GLEOSTINE CAP 40MG	\$0 (Tier 4)
GLEOSTINE CAP 100MG	\$0 (Tier 5) NDS
LEUKERAN TAB 2MG	\$0 (Tier 5) NDS
<i>oxaliplatin for iv inj 50 mg</i>	\$0 (Tier 4) B/D
<i>oxaliplatin for iv inj 100 mg</i>	\$0 (Tier 5) NDS, B/D
<i>oxaliplatin iv soln 50 mg/10ml</i>	\$0 (Tier 4) B/D
<i>oxaliplatin iv soln 100 mg/20ml</i>	\$0 (Tier 4) B/D
<i>oxaliplatin iv soln 200 mg/40ml</i>	\$0 (Tier 4) B/D
VIVIMUSTA INJ 100/4ML	\$0 (Tier 5) NDS, B/D

ANTIMETABOLITES

<i>azacitidine for inj 100 mg</i>	\$0 (Tier 5) NDS, B/D
<i>cytarabine inj 20 mg/ml</i>	\$0 (Tier 3) B/D
<i>fluorouracil iv soln 1 gm/20ml (50 mg/ml)</i>	\$0 (Tier 3) B/D
<i>fluorouracil iv soln 2.5 gm/50ml (50 mg/ml)</i>	\$0 (Tier 3) B/D
<i>fluorouracil iv soln 5 gm/100ml (50 mg/ml)</i>	\$0 (Tier 3) B/D
<i>fluorouracil iv soln 500 mg/10ml (50 mg/ml)</i>	\$0 (Tier 3) B/D
<i>gemcitabine hcl for inj 1 gm</i>	\$0 (Tier 4) B/D
<i>gemcitabine hcl for inj 2 gm</i>	\$0 (Tier 4) B/D

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>gemcitabine hcl for inj 200 mg</i>	\$0 (Tier 4) B/D
<i>gemcitabine hcl inj 1 gm/26.3ml (38 mg/ml) (base equiv)</i>	\$0 (Tier 4) B/D
<i>gemcitabine hcl inj 2 gm/52.6ml (38 mg/ml) (base equiv)</i>	\$0 (Tier 4) B/D
<i>gemcitabine hcl inj 200 mg/5.26ml (38 mg/ml) (base equiv)</i>	\$0 (Tier 4) B/D
INQOVI TAB 35-100MG	\$0 (Tier 5) NDS, QL (5 tabs / 28 days), PA
LONSURF TAB 15-6.14	\$0 (Tier 5) NDS, QL (100 tabs / 28 days), PA
LONSURF TAB 20-8.19	\$0 (Tier 5) NDS, QL (80 tabs / 28 days), PA
<i>mercaptopurine susp 2000 mg/100ml (20 mg/ml)</i>	\$0 (Tier 5) NDS
<i>mercaptopurine tab 50 mg</i>	\$0 (Tier 3)
<i>methotrexate sodium for inj 1 gm</i>	\$0 (Tier 2) B/D
<i>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</i>	\$0 (Tier 2) B/D
<i>methotrexate sodium inj 250 mg/10ml (25 mg/ml)</i>	\$0 (Tier 2) B/D
<i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i>	\$0 (Tier 2) B/D
<i>methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)</i>	\$0 (Tier 2) B/D
<i>methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)</i>	\$0 (Tier 2) B/D
ONUREG TAB 200MG	\$0 (Tier 5) NDS, QL (14 tabs / 28 days), PA
ONUREG TAB 300MG	\$0 (Tier 5) NDS, QL (14 tabs / 28 days), PA
<i>pemetrexed disodium for iv soln 100 mg (base equiv)</i>	\$0 (Tier 5) NDS, B/D
<i>pemetrexed disodium for iv soln 500 mg (base equiv)</i>	\$0 (Tier 5) NDS, B/D
<i>pemetrexed disodium for iv soln 750 mg (base equiv)</i>	\$0 (Tier 5) NDS, B/D
<i>pemetrexed disodium for iv soln 1000 mg (base equiv)</i>	\$0 (Tier 5) NDS, B/D
PURIXAN SUS 20MG/ML	\$0 (Tier 5) NDS
TABLOID TAB 40MG	\$0 (Tier 5) NDS

NAME OF DRUG**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)*****HORMONAL ANTINEOPLASTIC AGENTS***

<i>abiraterone acetate tab 250 mg</i>	\$0 (Tier 5) NDS, QL (120 tabs / 30 days), PA
<i>abiraterone acetate tab 500 mg</i>	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
<i>abirtega tab 250mg</i>	\$0 (Tier 4) QL (120 tabs / 30 days), PA
AKEEGA TAB 50/500MG	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
AKEEGA TAB 100/500	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
<i>anastrozole tab 1 mg</i>	\$0 (Tier 2)
<i>bicalutamide tab 50 mg</i>	\$0 (Tier 2)
ELIGARD INJ 7.5MG	\$0 (Tier 4) PA
ELIGARD INJ 22.5MG	\$0 (Tier 4) PA
ELIGARD INJ 30MG	\$0 (Tier 4) PA
ELIGARD INJ 45MG	\$0 (Tier 4) PA
ERLEADA TAB 60MG	\$0 (Tier 5) NDS, QL (120 tabs / 30 days), PA
ERLEADA TAB 240MG	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
EULEXIN CAP 125MG	\$0 (Tier 5) NDS
<i>exemestane tab 25 mg</i>	\$0 (Tier 4)
FIRMAGON INJ 80MG	\$0 (Tier 4) PA
FIRMAGON INJ 120MG	\$0 (Tier 5) NDS, PA
<i>fulvestrant inj soln pref syr 250 mg/5ml</i>	\$0 (Tier 5) NDS, B/D
<i>letrozole tab 2.5 mg</i>	\$0 (Tier 2)
<i>leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)</i>	\$0 (Tier 4) PA
LUPRON DEPOT INJ 3.75MG	\$0 (Tier 5) NDS, PA
LUPRON DEPOT INJ 11.25MG	\$0 (Tier 5) NDS, PA
LYSODREN TAB 500MG	\$0 (Tier 5) NDS
<i>megestrol acetate tab 20 mg</i>	\$0 (Tier 3)
<i>megestrol acetate tab 40 mg</i>	\$0 (Tier 3)
<i>nilutamide tab 150 mg</i>	\$0 (Tier 5) NDS
NUBEQA TAB 300MG	\$0 (Tier 5) NDS, QL (120 tabs / 30 days), PA
ORGOVYX TAB 120MG	\$0 (Tier 5) NDS, PA
ORSERDU TAB 86MG	\$0 (Tier 5) NDS, QL (90 tabs / 30 days), PA

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
ORSERDU TAB 345MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
SOLTAMOX SOL 10MG/5ML	\$0 (Tier 5)	NDS
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	\$0 (Tier 2)	
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	\$0 (Tier 2)	
<i>toremifene citrate tab 60 mg (base equivalent)</i>	\$0 (Tier 4)	PA
XTANDI CAP 40MG	\$0 (Tier 5)	NDS, QL (120 caps / 30 days), PA
XTANDI TAB 40MG	\$0 (Tier 5)	NDS, QL (120 tabs / 30 days), PA
XTANDI TAB 80MG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
YONSA TAB 125MG	\$0 (Tier 5)	NDS, QL (120 tabs / 30 days), PA
IMMUNOMODULATORS		
<i>lenalidomide cap 5 mg</i>	\$0 (Tier 5)	NDS, QL (28 caps / 28 days), PA
<i>lenalidomide cap 10 mg</i>	\$0 (Tier 5)	NDS, QL (28 caps / 28 days), PA
<i>lenalidomide cap 15 mg</i>	\$0 (Tier 5)	NDS, QL (28 caps / 28 days), PA
<i>lenalidomide cap 20 mg</i>	\$0 (Tier 5)	NDS, QL (21 caps / 28 days), PA
<i>lenalidomide cap 25 mg</i>	\$0 (Tier 5)	NDS, QL (21 caps / 28 days), PA
<i>lenalidomide caps 2.5 mg</i>	\$0 (Tier 5)	NDS, QL (28 caps / 28 days), PA
POMALYST CAP 1MG	\$0 (Tier 5)	NDS, QL (21 caps / 28 days), PA
POMALYST CAP 2MG	\$0 (Tier 5)	NDS, QL (21 caps / 28 days), PA
POMALYST CAP 3MG	\$0 (Tier 5)	NDS, QL (21 caps / 28 days), PA
POMALYST CAP 4MG	\$0 (Tier 5)	NDS, QL (21 caps / 28 days), PA
THALOMID CAP 50MG	\$0 (Tier 5)	NDS, QL (84 caps / 28 days), PA
THALOMID CAP 100MG	\$0 (Tier 5)	NDS, QL (112 caps / 28 days), PA

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
THALOMID CAP 150MG	\$0 (Tier 5)	NDS, QL (56 caps / 28 days), PA
THALOMID CAP 200MG	\$0 (Tier 5)	NDS, QL (56 caps / 28 days), PA
MISCELLANEOUS		
BESREMI SOL 500MCG	\$0 (Tier 5)	NDS, QL (2 syringes / 28 days), PA
<i>bexarotene cap 75 mg</i>	\$0 (Tier 5)	NDS, QL (300 caps / 30 days), PA
<i>doxorubicin hcl inj 2 mg/ml</i>	\$0 (Tier 4)	B/D
<i>doxorubicin hcl liposomal susp (for iv infusion) 2 mg/ml</i>	\$0 (Tier 5)	NDS, B/D
<i>hydroxyurea cap 500 mg</i>	\$0 (Tier 2)	
<i>irinotecan hcl inj 40 mg/2ml (20 mg/ml)</i>	\$0 (Tier 4)	B/D
<i>irinotecan hcl inj 100 mg/5ml (20 mg/ml)</i>	\$0 (Tier 4)	B/D
<i>irinotecan hcl inj 300 mg/15ml (20 mg/ml)</i>	\$0 (Tier 4)	B/D
<i>irinotecan hcl inj 500 mg/25ml (20 mg/ml)</i>	\$0 (Tier 4)	B/D
IWILFIN TAB 192MG	\$0 (Tier 5)	NDS, QL (240 tabs / 30 days), PA
MATULANE CAP 50MG	\$0 (Tier 5)	NDS
MODEYSO CAP 125MG	\$0 (Tier 5)	NDS, QL (20 caps / 28 days), PA
<i>tretinoin cap 10 mg</i>	\$0 (Tier 5)	NDS
WELIREG TAB 40MG	\$0 (Tier 5)	NDS, QL (90 tabs / 30 days), PA
MITOTIC INHIBITORS		
<i>docetaxel for inj conc 20 mg/ml</i>	\$0 (Tier 4)	B/D
<i>docetaxel for inj conc 80 mg/4ml (20 mg/ml)</i>	\$0 (Tier 5)	NDS, B/D
<i>docetaxel for inj conc 160 mg/8ml (20 mg/ml)</i>	\$0 (Tier 5)	NDS, B/D
DOCETAXEL INJ 20MG/2ML	\$0 (Tier 5)	NDS, B/D
DOCETAXEL INJ 80MG/4ML	\$0 (Tier 5)	NDS, B/D
DOCETAXEL INJ 80MG/8ML	\$0 (Tier 5)	NDS, B/D
DOCETAXEL INJ 160/8ML	\$0 (Tier 5)	NDS, B/D
DOCETAXEL INJ 160/16ML	\$0 (Tier 5)	NDS, B/D
<i>docetaxel soln for iv infusion 20 mg/2ml</i>	\$0 (Tier 5)	NDS, B/D
<i>docetaxel soln for iv infusion 80 mg/8ml</i>	\$0 (Tier 5)	NDS, B/D
<i>docetaxel soln for iv infusion 160 mg/16ml</i>	\$0 (Tier 5)	NDS, B/D
DOCIVYX INJ 20MG/2ML	\$0 (Tier 5)	NDS, B/D
DOCIVYX INJ 80MG/8ML	\$0 (Tier 5)	NDS, B/D

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

NAME OF DRUG**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)**

DOCIVYX INJ 160/16ML	\$0 (Tier 5) NDS, B/D
<i>etoposide inj 1 gm/50ml (20 mg/ml)</i>	\$0 (Tier 3) B/D
<i>etoposide inj 100 mg/5ml (20 mg/ml)</i>	\$0 (Tier 3) B/D
<i>etoposide inj 500 mg/25ml (20 mg/ml)</i>	\$0 (Tier 3) B/D
<i>paclitaxel inj 100mg</i>	\$0 (Tier 5) NDS, B/D
<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml)</i>	\$0 (Tier 4) B/D
<i>paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)</i>	\$0 (Tier 4) B/D
<i>paclitaxel iv conc 150 mg/25ml (6 mg/ml)</i>	\$0 (Tier 4) B/D
<i>paclitaxel iv conc 300 mg/50ml (6 mg/ml)</i>	\$0 (Tier 4) B/D
<i>vincristine sulfate iv soln 1 mg/ml</i>	\$0 (Tier 2) B/D
<i>vinorelbine tartrate inj 10 mg/ml (base equiv)</i>	\$0 (Tier 4) B/D
<i>vinorelbine tartrate inj 50 mg/5ml (10 mg/ml) (base equiv)</i>	\$0 (Tier 4) B/D

MOLECULAR TARGET AGENTS

ALECENSA CAP 150MG	\$0 (Tier 5) NDS, QL (240 caps / 30 days), PA
ALUNBRIG PAK	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
ALUNBRIG TAB 30MG	\$0 (Tier 5) NDS, QL (120 tabs / 30 days), PA
ALUNBRIG TAB 90MG	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
ALUNBRIG TAB 180MG	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
AUGTYRO CAP 40MG	\$0 (Tier 5) NDS, QL (240 caps / 30 days), PA
AUGTYRO CAP 160MG	\$0 (Tier 5) NDS, QL (60 caps / 30 days), PA
AVMAPKI PAK FAKZYNJA	\$0 (Tier 5) NDS, QL (1 pack / 28 days), PA
AYVAKIT TAB 25MG	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
AYVAKIT TAB 50MG	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
AYVAKIT TAB 100MG	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
AYVAKIT TAB 200MG	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
AYVAKIT TAB 300MG	\$0 (Tier 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 the beginning of this table.

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
BALVERSA TAB 3MG	\$0 (Tier 5)	NDS, QL (84 tabs / 28 days), PA
BALVERSA TAB 4MG	\$0 (Tier 5)	NDS, QL (56 tabs / 28 days), PA
BALVERSA TAB 5MG	\$0 (Tier 5)	NDS, QL (28 tabs / 28 days), PA
<i>bortezomib for inj 3.5 mg</i>	\$0 (Tier 5)	NDS, PA
BORTEZOMIB INJ 1MG	\$0 (Tier 4)	PA
BORTEZOMIB INJ 2.5MG	\$0 (Tier 4)	PA
BOSULIF CAP 50MG	\$0 (Tier 5)	NDS, QL (360 caps / 30 days), PA
BOSULIF CAP 100MG	\$0 (Tier 5)	NDS, QL (150 caps / 25 days), PA
BOSULIF TAB 100MG	\$0 (Tier 5)	NDS, QL (180 tabs / 30 days), PA
BOSULIF TAB 400MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
BOSULIF TAB 500MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
BRAFTOVI CAP 75MG	\$0 (Tier 5)	NDS, QL (180 caps / 30 days), PA
BRUKINSA CAP 80MG	\$0 (Tier 5)	NDS, QL (120 caps / 30 days), PA
BRUKINSA TAB 160MG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
CABOMETYX TAB 20MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
CABOMETYX TAB 40MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
CABOMETYX TAB 60MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
CALQUENCE TAB 100MG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
CAPRELSA TAB 100MG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
CAPRELSA TAB 300MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
COMETRIQ (60MG DOSE)	\$0 (Tier 5)	NDS, QL (84 caps / 28 days), PA
COMETRIQ KIT 100MG	\$0 (Tier 5)	NDS, QL (56 caps / 28 days), PA
COMETRIQ KIT 140MG	\$0 (Tier 5)	NDS, QL (112 caps / 28 days), PA

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
COPIKTRA CAP 15MG	\$0 (Tier 5) NDS, QL (56 caps / 28 days), PA
COPIKTRA CAP 25MG	\$0 (Tier 5) NDS, QL (56 caps / 28 days), PA
COTELLIC TAB 20MG	\$0 (Tier 5) NDS, QL (63 tabs / 28 days), PA
DANZITEN TAB 71MG	\$0 (Tier 5) NDS, QL (112 tabs / 28 days), PA
DANZITEN TAB 95MG	\$0 (Tier 5) NDS, QL (112 tabs / 28 days), PA
<i>dasatinib tab 20 mg</i>	\$0 (Tier 5) NDS, QL (90 tabs / 30 days), PA
<i>dasatinib tab 50 mg</i>	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
<i>dasatinib tab 70 mg</i>	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
<i>dasatinib tab 80 mg</i>	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
<i>dasatinib tab 100 mg</i>	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
<i>dasatinib tab 140 mg</i>	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
DAURISMO TAB 25MG	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
DAURISMO TAB 100MG	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
ERIVEDGE CAP 150MG	\$0 (Tier 5) NDS, QL (30 caps / 30 days), PA
<i>erlotinib hcl tab 25 mg (base equivalent)</i>	\$0 (Tier 5) NDS, QL (90 tabs / 30 days), PA
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
<i>everolimus tab 2.5 mg</i>	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
<i>everolimus tab 5 mg</i>	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
<i>everolimus tab 7.5 mg</i>	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
<i>everolimus tab 10 mg</i>	\$0 (Tier 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 the beginning of this table.

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL RESTRICTIONS OR COST YOU LIMITS ON USE (TIER LEVEL)
<i>everolimus tab for oral susp 2 mg</i>	\$0 (Tier 5) NDS, QL (150 tabs / 30 days), PA
<i>everolimus tab for oral susp 3 mg</i>	\$0 (Tier 5) NDS, QL (90 tabs / 30 days), PA
<i>everolimus tab for oral susp 5 mg</i>	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
FOTIVDA CAP 0.89MG	\$0 (Tier 5) NDS, QL (21 caps / 28 days), PA
FOTIVDA CAP 1.34MG	\$0 (Tier 5) NDS, QL (21 caps / 28 days), PA
FRUZAQLA CAP 1MG	\$0 (Tier 5) NDS, QL (84 caps / 28 days), PA
FRUZAQLA CAP 5MG	\$0 (Tier 5) NDS, QL (21 caps / 28 days), PA
GAVRETO CAP 100MG	\$0 (Tier 5) NDS, QL (120 caps / 30 days), PA
<i>gefitinib tab 250 mg</i>	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
GILOTRIF TAB 20MG	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
GILOTRIF TAB 30MG	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
GILOTRIF TAB 40MG	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
GOMEKLI CAP 1MG	\$0 (Tier 5) NDS, QL (168 caps / 28 days), PA
GOMEKLI CAP 2MG	\$0 (Tier 5) NDS, QL (84 caps / 28 days), PA
GOMEKLI TAB 1MG	\$0 (Tier 5) NDS, QL (168 tabs / 28 days), PA
HERCEP HYLEC SOL 60-10000	\$0 (Tier 5) NDS, PA
HERCEPTIN INJ 150MG	\$0 (Tier 5) NDS, PA
HERNEXEOS TAB 60MG	\$0 (Tier 5) NDS, QL (120 tabs / 30 days), PA
HERZUMA INJ 150MG	\$0 (Tier 5) NDS, PA
HERZUMA INJ 420MG	\$0 (Tier 5) NDS, PA
IBRANCE CAP 75MG	\$0 (Tier 5) NDS, QL (21 caps / 28 days), PA
IBRANCE CAP 100MG	\$0 (Tier 5) NDS, QL (21 caps / 28 days), PA
IBRANCE CAP 125MG	\$0 (Tier 5) NDS, QL (21 caps / 28 days), PA

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
IBRANCE TAB 75MG	\$0 (Tier 5) NDS, QL (21 tabs / 28 days), PA
IBRANCE TAB 100MG	\$0 (Tier 5) NDS, QL (21 tabs / 28 days), PA
IBRANCE TAB 125MG	\$0 (Tier 5) NDS, QL (21 tabs / 28 days), PA
IBTROZI CAP 200MG	\$0 (Tier 5) NDS, QL (90 caps / 30 days), PA
ICLUSIG TAB 10MG	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
ICLUSIG TAB 15MG	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
ICLUSIG TAB 30MG	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
ICLUSIG TAB 45MG	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
IDHIFA TAB 50MG	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
IDHIFA TAB 100MG	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	\$0 (Tier 5) NDS, QL (90 tabs / 30 days), PA
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
IMBRUVICA CAP 70MG	\$0 (Tier 5) NDS, QL (30 caps / 30 days), PA
IMBRUVICA CAP 140MG	\$0 (Tier 5) NDS, QL (120 caps / 30 days), PA
IMBRUVICA SUS 70MG/ML	\$0 (Tier 5) NDS, QL (216 mL / 27 days), PA
IMBRUVICA TAB 140MG	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
IMBRUVICA TAB 280MG	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
IMBRUVICA TAB 420MG	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
IMKELDI SOL 80MG/ML	\$0 (Tier 5) NDS, QL (280 mL / 28 days), PA
INLYTA TAB 1MG	\$0 (Tier 5) NDS, QL (180 tabs / 30 days), PA
INLYTA TAB 5MG	\$0 (Tier 5) NDS, QL (120 tabs / 30 days), PA

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
INREBIC CAP 100MG	\$0 (Tier 5) NDS, QL (120 caps / 30 days), PA
ITOVEBI TAB 3MG	\$0 (Tier 5) NDS, QL (56 tabs / 28 days), PA
ITOVEBI TAB 9MG	\$0 (Tier 5) NDS, QL (28 tabs / 28 days), PA
JAKAFI TAB 5MG	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
JAKAFI TAB 10MG	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
JAKAFI TAB 15MG	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
JAKAFI TAB 20MG	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
JAKAFI TAB 25MG	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
JAYPIRCA TAB 50MG	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
JAYPIRCA TAB 100MG	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
KADCYLA INJ 100MG	\$0 (Tier 5) NDS, B/D
KADCYLA INJ 160MG	\$0 (Tier 5) NDS, B/D
KANJINTI INJ 420MG	\$0 (Tier 5) NDS, PA
KANJINTI SOL 150MG	\$0 (Tier 5) NDS, PA
KEYTRUDA INJ 100MG/4M	\$0 (Tier 5) NDS, PA
KISQALI 200 DOSE	\$0 (Tier 5) NDS, QL (21 tabs / 28 days), PA
KISQALI 200 PAK FEMARA	\$0 (Tier 5) NDS, QL (49 tabs / 28 days), PA
KISQALI 400 DOSE	\$0 (Tier 5) NDS, QL (42 tabs / 28 days), PA
KISQALI 400 PAK FEMARA	\$0 (Tier 5) NDS, QL (70 tabs / 28 days), PA
KISQALI 600 DOSE	\$0 (Tier 5) NDS, QL (63 tabs / 28 days), PA
KISQALI 600 PAK FEMARA	\$0 (Tier 5) NDS, QL (91 tabs / 28 days), PA
KOSELUGO CAP 10MG	\$0 (Tier 5) NDS, QL (240 caps / 30 days), PA
KOSELUGO CAP 25MG	\$0 (Tier 5) NDS, QL (120 caps / 30 days), PA

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
KRAZATI TAB 200MG	\$0 (Tier 5)	NDS, QL (180 tabs / 30 days), PA
<i>lapatinib ditosylate tab 250 mg (base equiv)</i>	\$0 (Tier 5)	NDS, QL (180 tabs / 30 days), PA
LAZCLUZE TAB 80MG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
LAZCLUZE TAB 240MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
LENVIMA CAP 4MG	\$0 (Tier 5)	NDS, QL (30 caps / 30 days), PA
LENVIMA CAP 8 MG	\$0 (Tier 5)	NDS, QL (60 caps / 30 days), PA
LENVIMA CAP 10 MG	\$0 (Tier 5)	NDS, QL (30 caps / 30 days), PA
LENVIMA CAP 12MG	\$0 (Tier 5)	NDS, QL (90 caps / 30 days), PA
LENVIMA CAP 14 MG	\$0 (Tier 5)	NDS, QL (60 caps / 30 days), PA
LENVIMA CAP 18 MG	\$0 (Tier 5)	NDS, QL (90 caps / 30 days), PA
LENVIMA CAP 20 MG	\$0 (Tier 5)	NDS, QL (60 caps / 30 days), PA
LENVIMA CAP 24 MG	\$0 (Tier 5)	NDS, QL (90 caps / 30 days), PA
LORBRENA TAB 25MG	\$0 (Tier 5)	NDS, QL (90 tabs / 30 days), PA
LORBRENA TAB 100MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
LUMAKRAS TAB 120MG	\$0 (Tier 5)	NDS, QL (240 tabs / 30 days), PA
LUMAKRAS TAB 240MG	\$0 (Tier 5)	NDS, QL (120 tabs / 30 days), PA
LUMAKRAS TAB 320MG	\$0 (Tier 5)	NDS, QL (90 tabs / 30 days), PA
LYNPARZA TAB 100MG	\$0 (Tier 5)	NDS, QL (120 tabs / 30 days), PA
LYNPARZA TAB 150MG	\$0 (Tier 5)	NDS, QL (120 tabs / 30 days), PA
LYTGOBI (12 MG DAILY DOSE)	\$0 (Tier 5)	NDS, QL (84 tabs / 28 days), PA
LYTGOBI (16 MG DAILY DOSE)	\$0 (Tier 5)	NDS, QL (112 tabs / 28 days), PA

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
LYTGOBI (20 MG DAILY DOSE)	\$0 (Tier 5)	NDS, QL (140 tabs / 28 days), PA
MEKINIST SOL 0.05/ML	\$0 (Tier 5)	NDS, QL (1260 mL / 30 days), PA
MEKINIST TAB 0.5MG	\$0 (Tier 5)	NDS, QL (90 tabs / 30 days), PA
MEKINIST TAB 2MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
MEKTOVI TAB 15MG	\$0 (Tier 5)	NDS, QL (180 tabs / 30 days), PA
MONJUVI INJ 200MG	\$0 (Tier 5)	NDS, PA
NERLYNX TAB 40MG	\$0 (Tier 5)	NDS, QL (180 tabs / 30 days), PA
<i>nilotinib hcl cap 50 mg (base equivalent)</i>	\$0 (Tier 5)	NDS, QL (120 caps / 30 days), PA
<i>nilotinib hcl cap 150 mg (base equivalent)</i>	\$0 (Tier 5)	NDS, QL (112 caps / 28 days), PA
<i>nilotinib hcl cap 200 mg (base equivalent)</i>	\$0 (Tier 5)	NDS, QL (112 caps / 28 days), PA
NINLARO CAP 2.3MG	\$0 (Tier 5)	NDS, QL (3 caps / 28 days), PA
NINLARO CAP 3MG	\$0 (Tier 5)	NDS, QL (3 caps / 28 days), PA
NINLARO CAP 4MG	\$0 (Tier 5)	NDS, QL (3 caps / 28 days), PA
ODOMZO CAP 200MG	\$0 (Tier 5)	NDS, QL (30 caps / 30 days), PA
OGIVRI INJ 150MG	\$0 (Tier 5)	NDS, PA
OGIVRI INJ 420MG	\$0 (Tier 5)	NDS, PA
OGSIVEO TAB 50MG	\$0 (Tier 5)	NDS, QL (180 tabs / 30 days), PA
OGSIVEO TAB 100MG	\$0 (Tier 5)	NDS, QL (56 tabs / 28 days), PA
OGSIVEO TAB 150MG	\$0 (Tier 5)	NDS, QL (56 tabs / 28 days), PA
OJEMDA SUS 25MG/ML	\$0 (Tier 5)	NDS, QL (96 mL / 28 days), PA
OJEMDA TAB 100MG	\$0 (Tier 5)	NDS, QL (24 tabs / 28 days), PA
OJJAARA TAB 100MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
OJJAARA TAB 150MG	\$0 (Tier 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 the beginning of this table.

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
OJJAARA TAB 200MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
ONTRUZANT INJ 150MG	\$0 (Tier 5)	NDS, PA
ONTRUZANT INJ 420MG	\$0 (Tier 5)	NDS, PA
<i>pazopanib hcl tab 200 mg (base equiv)</i>	\$0 (Tier 5)	NDS, QL (120 tabs / 30 days), PA
PEMAZYRE TAB 4.5MG	\$0 (Tier 5)	NDS, QL (28 tabs / 28 days), PA
PEMAZYRE TAB 9MG	\$0 (Tier 5)	NDS, QL (28 tabs / 28 days), PA
PEMAZYRE TAB 13.5MG	\$0 (Tier 5)	NDS, QL (28 tabs / 28 days), PA
PHESGO SOL	\$0 (Tier 5)	NDS, PA
PIQRAY 200MG TAB DOSE	\$0 (Tier 5)	NDS, QL (28 tabs / 28 days), PA
PIQRAY 250MG TAB DOSE	\$0 (Tier 5)	NDS, QL (56 tabs / 28 days), PA
PIQRAY 300MG TAB DOSE	\$0 (Tier 5)	NDS, QL (56 tabs / 28 days), PA
QINLOCK TAB 50MG	\$0 (Tier 5)	NDS, QL (90 tabs / 30 days), PA
RETEVMO CAP 40MG	\$0 (Tier 5)	NDS, QL (240 caps / 30 days), PA
RETEVMO CAP 80MG	\$0 (Tier 5)	NDS, QL (120 caps / 30 days), PA
RETEVMO TAB 40MG	\$0 (Tier 5)	NDS, QL (90 tabs / 30 days), PA
RETEVMO TAB 80MG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
RETEVMO TAB 120MG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
RETEVMO TAB 160MG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
REVUFORJ TAB 25MG	\$0 (Tier 5)	NDS, QL (240 tabs / 30 days), PA
REVUFORJ TAB 110MG	\$0 (Tier 5)	NDS, QL (120 tabs / 30 days), PA
REVUFORJ TAB 160MG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
REZLIDHIA CAP 150MG	\$0 (Tier 5)	NDS, QL (60 caps / 30 days), PA
ROMVIMZA CAP 14MG	\$0 (Tier 5)	NDS, QL (8 caps / 28 days), PA

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
ROMVIMZA CAP 20MG	\$0 (Tier 5) NDS, QL (8 caps / 28 days), PA
ROMVIMZA CAP 30MG	\$0 (Tier 5) NDS, QL (8 caps / 28 days), PA
ROZLYTREK CAP 100MG	\$0 (Tier 5) NDS, QL (180 caps / 30 days), PA
ROZLYTREK CAP 200MG	\$0 (Tier 5) NDS, QL (90 caps / 30 days), PA
ROZLYTREK PAK 50MG	\$0 (Tier 5) NDS, QL (336 packets / 28 days), PA
RUBRACA TAB 200MG	\$0 (Tier 5) NDS, QL (120 tabs / 30 days), PA
RUBRACA TAB 250MG	\$0 (Tier 5) NDS, QL (120 tabs / 30 days), PA
RUBRACA TAB 300MG	\$0 (Tier 5) NDS, QL (120 tabs / 30 days), PA
RYDAPT CAP 25MG	\$0 (Tier 5) NDS, QL (224 caps / 28 days), PA
SCSEMBLIX TAB 20MG	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
SCSEMBLIX TAB 40MG	\$0 (Tier 5) NDS, QL (300 tabs / 30 days), PA
SCSEMBLIX TAB 100MG	\$0 (Tier 5) NDS, QL (120 tabs / 30 days), PA
<i>sorafenib tosylate tab 200 mg (base equivalent)</i>	\$0 (Tier 5) NDS, QL (120 tabs / 30 days), PA
STIVARGA TAB 40MG	\$0 (Tier 5) NDS, QL (84 tabs / 28 days), PA
<i>sunitinib malate cap 12.5 mg (base equivalent)</i>	\$0 (Tier 5) NDS, QL (30 caps / 30 days), PA
<i>sunitinib malate cap 25 mg (base equivalent)</i>	\$0 (Tier 5) NDS, QL (30 caps / 30 days), PA
<i>sunitinib malate cap 37.5 mg (base equivalent)</i>	\$0 (Tier 5) NDS, QL (30 caps / 30 days), PA
<i>sunitinib malate cap 50 mg (base equivalent)</i>	\$0 (Tier 5) NDS, QL (30 caps / 30 days), PA
TABRECTA TAB 150MG	\$0 (Tier 5) NDS, QL (112 tabs / 28 days), PA
TABRECTA TAB 200MG	\$0 (Tier 5) NDS, QL (112 tabs / 28 days), PA
TAFINLAR CAP 50MG	\$0 (Tier 5) NDS, QL (120 caps / 30 days), PA

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
TAFINLAR CAP 75MG	\$0 (Tier 5) NDS, QL (120 caps / 30 days), PA
TAFINLAR TAB 10MG	\$0 (Tier 5) NDS, QL (900 tabs / 30 days), PA
TAGRISSO TAB 40MG	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
TAGRISSO TAB 80MG	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
TALZENNA CAP 0.1MG	\$0 (Tier 5) NDS, QL (30 caps / 30 days), PA
TALZENNA CAP 0.5MG	\$0 (Tier 5) NDS, QL (30 caps / 30 days), PA
TALZENNA CAP 0.25MG	\$0 (Tier 5) NDS, QL (90 caps / 30 days), PA
TALZENNA CAP 0.35MG	\$0 (Tier 5) NDS, QL (30 caps / 30 days), PA
TALZENNA CAP 0.75MG	\$0 (Tier 5) NDS, QL (30 caps / 30 days), PA
TALZENNA CAP 1MG	\$0 (Tier 5) NDS, QL (30 caps / 30 days), PA
TASIGNA CAP 50MG	\$0 (Tier 5) NDS, QL (120 caps / 30 days), PA
TASIGNA CAP 150MG	\$0 (Tier 5) NDS, QL (112 caps / 28 days), PA
TASIGNA CAP 200MG	\$0 (Tier 5) NDS, QL (112 caps / 28 days), PA
TAZVERIK TAB 200MG	\$0 (Tier 5) NDS, QL (240 tabs / 30 days), PA
TECENTRIQ INJ 840/14	\$0 (Tier 5) NDS, PA
TECENTRIQ INJ 1200/20	\$0 (Tier 5) NDS, PA
TECENTRIQ INJ HYBREZA	\$0 (Tier 5) NDS, QL (1 vial / 21 days), PA
TEPMETKO TAB 225MG	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
TIBSOVO TAB 250MG	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
<i>torpenz tab 2.5mg</i>	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
<i>torpenz tab 5mg</i>	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
<i>torpenz tab 7.5mg</i>	\$0 (Tier 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 the beginning of this table.

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>torpenz tab 10mg</i>	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
TRAZIMERA INJ 150MG	\$0 (Tier 5) NDS, PA
TRAZIMERA INJ 420MG	\$0 (Tier 5) NDS, PA
TRUQAP PAK 160MG	\$0 (Tier 5) NDS, QL (4 packs / 28 days), PA
TRUQAP PAK 200MG	\$0 (Tier 5) NDS, QL (4 packs / 28 days), PA
TRUQAP TAB 160MG	\$0 (Tier 5) NDS, QL (64 tabs / 28 days), PA
TRUQAP TAB 200MG	\$0 (Tier 5) NDS, QL (64 tabs / 28 days), PA
TRUXIMA INJ 100/10ML	\$0 (Tier 5) NDS, PA
TRUXIMA INJ 500/50ML	\$0 (Tier 5) NDS, PA
TUKYSA TAB 50MG	\$0 (Tier 5) NDS, QL (120 tabs / 30 days), PA
TUKYSA TAB 150MG	\$0 (Tier 5) NDS, QL (120 tabs / 30 days), PA
TURALIO CAP 125MG	\$0 (Tier 5) NDS, QL (120 caps / 30 days), PA
VANFLYTA TAB 17.7MG	\$0 (Tier 5) NDS, QL (56 tabs / 28 days), PA
VANFLYTA TAB 26.5MG	\$0 (Tier 5) NDS, QL (56 tabs / 28 days), PA
VENCLEXTA TAB 10MG	\$0 (Tier 3) QL (112 tabs / 28 days), PA
VENCLEXTA TAB 50MG	\$0 (Tier 5) NDS, QL (112 tabs / 28 days), PA
VENCLEXTA TAB 100MG	\$0 (Tier 5) NDS, QL (180 tabs / 30 days), PA
VENCLEXTA TAB START PK	\$0 (Tier 5) NDS, QL (42 tabs / 28 days), PA
VERZENIO TAB 50MG	\$0 (Tier 5) NDS, QL (56 tabs / 28 days), PA
VERZENIO TAB 100MG	\$0 (Tier 5) NDS, QL (56 tabs / 28 days), PA
VERZENIO TAB 150MG	\$0 (Tier 5) NDS, QL (56 tabs / 28 days), PA
VERZENIO TAB 200MG	\$0 (Tier 5) NDS, QL (56 tabs / 28 days), PA
VITRAKVI CAP 25MG	\$0 (Tier 5) NDS, QL (180 caps / 30 days), PA

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
VITRAKVI CAP 100MG	\$0 (Tier 5)	NDS, QL (60 caps / 30 days), PA
VITRAKVI SOL 20MG/ML	\$0 (Tier 5)	NDS, QL (300 mL / 30 days), PA
VIZIMPRO TAB 15MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
VIZIMPRO TAB 30MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
VIZIMPRO TAB 45MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
VONJO CAP 100MG	\$0 (Tier 5)	NDS, QL (120 caps / 30 days), PA
VORANIGO TAB 10MG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
VORANIGO TAB 40MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
XALKORI CAP 20MG	\$0 (Tier 5)	NDS, QL (240 caps / 30 days), PA
XALKORI CAP 50MG	\$0 (Tier 5)	NDS, QL (120 caps / 30 days), PA
XALKORI CAP 150MG	\$0 (Tier 5)	NDS, QL (180 caps / 30 days), PA
XALKORI CAP 200MG	\$0 (Tier 5)	NDS, QL (120 caps / 30 days), PA
XALKORI CAP 250MG	\$0 (Tier 5)	NDS, QL (120 caps / 30 days), PA
XOSPATA TAB 40MG	\$0 (Tier 5)	NDS, QL (90 tabs / 30 days), PA
XPOVIO PAK (40 MG ONCE WEEKLY)	\$0 (Tier 5)	NDS, QL (16 tabs / 28 days), PA
XPOVIO PAK (40 MG ONCE WEEKLY)	\$0 (Tier 5)	NDS, QL (4 tabs / 28 days), PA
XPOVIO PAK (40 MG TWICE WEEKLY)	\$0 (Tier 5)	NDS, QL (8 tabs / 28 days), PA
XPOVIO PAK (60 MG ONCE WEEKLY)	\$0 (Tier 5)	NDS, QL (4 tabs / 28 days), PA
XPOVIO PAK (60 MG TWICE WEEKLY)	\$0 (Tier 5)	NDS, QL (24 tabs / 28 days), PA
XPOVIO PAK (80 MG ONCE WEEKLY)	\$0 (Tier 5)	NDS, QL (8 tabs / 28 days), PA
XPOVIO PAK (80 MG TWICE WEEKLY)	\$0 (Tier 5)	NDS, QL (32 tabs / 28 days), PA

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
XPOVIO PAK (100 MG ONCE WEEKLY)	\$0 (Tier 5)	NDS, QL (8 tabs / 28 days), PA
ZEJULA TAB 100MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
ZEJULA TAB 200MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
ZEJULA TAB 300MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
ZELBORAF TAB 240MG	\$0 (Tier 5)	NDS, QL (240 tabs / 30 days), PA
ZIRABEV INJ 100/4ML	\$0 (Tier 5)	NDS, PA
ZIRABEV INJ 400/16ML	\$0 (Tier 5)	NDS, PA
ZOLINZA CAP 100MG	\$0 (Tier 5)	NDS, QL (120 caps / 30 days), PA
ZYDELIG TAB 100MG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
ZYDELIG TAB 150MG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
ZYKADIA TAB 150MG	\$0 (Tier 5)	NDS, QL (84 tabs / 28 days), PA

PROTECTIVE AGENTS

<i>leucovorin calcium for inj 50 mg</i>	\$0 (Tier 4)	B/D
<i>leucovorin calcium for inj 100 mg</i>	\$0 (Tier 4)	B/D
<i>leucovorin calcium for inj 200 mg</i>	\$0 (Tier 4)	B/D
<i>leucovorin calcium for inj 350 mg</i>	\$0 (Tier 4)	B/D
<i>leucovorin calcium for inj 500 mg</i>	\$0 (Tier 4)	B/D
<i>leucovorin calcium inj 500 mg/50ml (10 mg/ml)</i>	\$0 (Tier 4)	B/D
<i>leucovorin calcium tab 5 mg</i>	\$0 (Tier 3)	
<i>leucovorin calcium tab 10 mg</i>	\$0 (Tier 3)	
<i>leucovorin calcium tab 15 mg</i>	\$0 (Tier 3)	
<i>leucovorin calcium tab 25 mg</i>	\$0 (Tier 3)	
<i>mesna tab 400 mg</i>	\$0 (Tier 5)	NDS
MESNEX TAB 400MG	\$0 (Tier 5)	NDS

CARDIOVASCULAR - DRUGS TO TREAT HEART AND CIRCULATION CONDITIONS

ACE INHIBITOR COMBINATIONS - DRUGS TO TREAT HIGH BLOOD PRESSURE

<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	\$0 (Tier 1)	QL (30 caps / 30 days)
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NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	\$0 (Tier 1)	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	\$0 (Tier 1)	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	\$0 (Tier 1)	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	\$0 (Tier 1)	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	\$0 (Tier 1)	QL (30 caps / 30 days)
<i>benazepril & hydrochlorothiazide tab 5-6.25mg</i>	\$0 (Tier 1)	
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	\$0 (Tier 1)	
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	\$0 (Tier 1)	
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	\$0 (Tier 1)	
<i>captopril & hydrochlorothiazide tab 25-15 mg</i>	\$0 (Tier 1)	
<i>captopril & hydrochlorothiazide tab 25-25 mg</i>	\$0 (Tier 1)	
<i>captopril & hydrochlorothiazide tab 50-15 mg</i>	\$0 (Tier 1)	
<i>captopril & hydrochlorothiazide tab 50-25 mg</i>	\$0 (Tier 1)	
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	\$0 (Tier 1)	
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	\$0 (Tier 1)	
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	\$0 (Tier 1)	
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	\$0 (Tier 1)	
<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i>	\$0 (Tier 1)	
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	\$0 (Tier 1)	
<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	\$0 (Tier 1)	
ACE INHIBITORS - DRUGS TO TREAT HIGH BLOOD PRESSURE		
<i>benazepril hcl tab 5 mg</i>	\$0 (Tier 1)	

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

NAME OF DRUG**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)**

<i>benazepril hcl tab 10 mg</i>	\$0 (Tier 1)
<i>benazepril hcl tab 20 mg</i>	\$0 (Tier 1)
<i>benazepril hcl tab 40 mg</i>	\$0 (Tier 1)
<i>captopril tab 12.5 mg</i>	\$0 (Tier 1)
<i>captopril tab 25 mg</i>	\$0 (Tier 1)
<i>captopril tab 50 mg</i>	\$0 (Tier 1)
<i>captopril tab 100 mg</i>	\$0 (Tier 1)
<i>enalapril maleate tab 2.5 mg</i>	\$0 (Tier 1)
<i>enalapril maleate tab 5 mg</i>	\$0 (Tier 1)
<i>enalapril maleate tab 10 mg</i>	\$0 (Tier 1)
<i>enalapril maleate tab 20 mg</i>	\$0 (Tier 1)
<i>fosinopril sodium tab 10 mg</i>	\$0 (Tier 1)
<i>fosinopril sodium tab 20 mg</i>	\$0 (Tier 1)
<i>fosinopril sodium tab 40 mg</i>	\$0 (Tier 1)
<i>lisinopril tab 2.5 mg</i>	\$0 (Tier 1)
<i>lisinopril tab 5 mg</i>	\$0 (Tier 1)
<i>lisinopril tab 10 mg</i>	\$0 (Tier 1)
<i>lisinopril tab 20 mg</i>	\$0 (Tier 1)
<i>lisinopril tab 30 mg</i>	\$0 (Tier 1)
<i>lisinopril tab 40 mg</i>	\$0 (Tier 1)
<i>moexipril hcl tab 7.5 mg</i>	\$0 (Tier 1)
<i>moexipril hcl tab 15 mg</i>	\$0 (Tier 1)
<i>perindopril erbumine tab 2 mg</i>	\$0 (Tier 1)
<i>perindopril erbumine tab 4 mg</i>	\$0 (Tier 1)
<i>perindopril erbumine tab 8 mg</i>	\$0 (Tier 1)
<i>quinapril hcl tab 5 mg</i>	\$0 (Tier 1)
<i>quinapril hcl tab 10 mg</i>	\$0 (Tier 1)
<i>quinapril hcl tab 20 mg</i>	\$0 (Tier 1)
<i>quinapril hcl tab 40 mg</i>	\$0 (Tier 1)
<i>ramipril cap 1.25 mg</i>	\$0 (Tier 1)
<i>ramipril cap 2.5 mg</i>	\$0 (Tier 1)
<i>ramipril cap 5 mg</i>	\$0 (Tier 1)
<i>ramipril cap 10 mg</i>	\$0 (Tier 1)
<i>trandolapril tab 1 mg</i>	\$0 (Tier 1)
<i>trandolapril tab 2 mg</i>	\$0 (Tier 1)
<i>trandolapril tab 4 mg</i>	\$0 (Tier 1)

**ALDOSTERONE RECEPTOR ANTAGONISTS - DRUGS TO TREAT HIGH
BLOOD PRESSURE**

<i>eplerenone tab 25 mg</i>	\$0 (Tier 3)
<i>eplerenone tab 50 mg</i>	\$0 (Tier 3)

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
KERENDIA TAB 10MG	\$0 (Tier 3)	QL (30 tabs / 30 days)
KERENDIA TAB 20MG	\$0 (Tier 3)	QL (30 tabs / 30 days)
KERENDIA TAB 40MG	\$0 (Tier 3)	QL (30 tabs / 30 days)
<i>spironolactone tab 25 mg</i>	\$0 (Tier 1)	
<i>spironolactone tab 50 mg</i>	\$0 (Tier 1)	
<i>spironolactone tab 100 mg</i>	\$0 (Tier 1)	
ALPHA BLOCKERS - DRUGS TO TREAT HIGH BLOOD PRESSURE		
<i>doxazosin mesylate tab 1 mg</i>	\$0 (Tier 2)	
<i>doxazosin mesylate tab 2 mg</i>	\$0 (Tier 2)	
<i>doxazosin mesylate tab 4 mg</i>	\$0 (Tier 2)	
<i>doxazosin mesylate tab 8 mg</i>	\$0 (Tier 2)	
<i>prazosin hcl cap 1 mg</i>	\$0 (Tier 3)	
<i>prazosin hcl cap 2 mg</i>	\$0 (Tier 3)	
<i>prazosin hcl cap 5 mg</i>	\$0 (Tier 3)	
<i>terazosin hcl cap 1 mg (base equivalent)</i>	\$0 (Tier 1)	
<i>terazosin hcl cap 2 mg (base equivalent)</i>	\$0 (Tier 1)	
<i>terazosin hcl cap 5 mg (base equivalent)</i>	\$0 (Tier 1)	
<i>terazosin hcl cap 10 mg (base equivalent)</i>	\$0 (Tier 1)	
ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS - DRUGS TO TREAT HIGH BLOOD PRESSURE		
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 5-160 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days)
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
EDARBYCLOR TAB 40-12.5	\$0 (Tier 4)	QL (30 tabs / 30 days), ST
EDARBYCLOR TAB 40-25MG	\$0 (Tier 4)	QL (30 tabs / 30 days), ST
ENTRESTO CAP 6-6MG	\$0 (Tier 3)	QL (240 caps / 30 days)
ENTRESTO CAP 15-16MG	\$0 (Tier 3)	QL (240 caps / 30 days)
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days)
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	\$0 (Tier 1)	
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	\$0 (Tier 1)	
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	\$0 (Tier 1)	
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>sacubitril-valsartan tab 24-26 mg</i>	\$0 (Tier 3)	QL (60 tabs / 30 days)
<i>sacubitril-valsartan tab 49-51 mg</i>	\$0 (Tier 3)	QL (60 tabs / 30 days)
<i>sacubitril-valsartan tab 97-103 mg</i>	\$0 (Tier 3)	QL (60 tabs / 30 days)
<i>telmisartan-amlodipine tab 40-5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>telmisartan-amlodipine tab 40-10 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>telmisartan-amlodipine tab 80-5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>telmisartan-amlodipine tab 80-10 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days)
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)

ANGIOTENSIN II RECEPTOR ANTAGONISTS - DRUGS TO TREAT HIGH BLOOD PRESSURE

<i>candesartan cilexetil tab 4 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days)
<i>candesartan cilexetil tab 8 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days)
<i>candesartan cilexetil tab 16 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days)
<i>candesartan cilexetil tab 32 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
EDARBI TAB 40MG	\$0 (Tier 4)	QL (30 tabs / 30 days), ST
EDARBI TAB 80MG	\$0 (Tier 4)	QL (30 tabs / 30 days), ST
<i>irbesartan tab 75 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>irbesartan tab 150 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>irbesartan tab 300 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>losartan potassium tab 25 mg</i>	\$0 (Tier 1)	
<i>losartan potassium tab 50 mg</i>	\$0 (Tier 1)	
<i>losartan potassium tab 100 mg</i>	\$0 (Tier 1)	
<i>olmesartan medoxomil tab 5 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days)
<i>olmesartan medoxomil tab 20 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>olmesartan medoxomil tab 40 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>telmisartan tab 20 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>telmisartan tab 40 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>telmisartan tab 80 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>valsartan tab 40 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days)
<i>valsartan tab 80 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days)
<i>valsartan tab 160 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days)

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>valsartan tab 320 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
ANTIARRHYTHMICS - DRUGS TO CONTROL HEART RHYTHM	
<i>amiodarone hcl inj 150 mg/3ml (50 mg/ml)</i>	\$0 (Tier 4)
<i>amiodarone hcl inj 450 mg/9ml (50 mg/ml)</i>	\$0 (Tier 4)
<i>amiodarone hcl inj 900 mg/18ml (50 mg/ml)</i>	\$0 (Tier 4)
<i>amiodarone hcl tab 100 mg</i>	\$0 (Tier 4)
<i>amiodarone hcl tab 200 mg</i>	\$0 (Tier 1)
<i>amiodarone hcl tab 400 mg</i>	\$0 (Tier 4)
<i>disopyramide phosphate cap 100 mg</i>	\$0 (Tier 4)
<i>disopyramide phosphate cap 150 mg</i>	\$0 (Tier 4)
<i>dofetilide cap 125 mcg (0.125 mg)</i>	\$0 (Tier 4)
<i>dofetilide cap 250 mcg (0.25 mg)</i>	\$0 (Tier 4)
<i>dofetilide cap 500 mcg (0.5 mg)</i>	\$0 (Tier 4)
<i>flecainide acetate tab 50 mg</i>	\$0 (Tier 3)
<i>flecainide acetate tab 100 mg</i>	\$0 (Tier 3)
<i>flecainide acetate tab 150 mg</i>	\$0 (Tier 3)
MULTAQ TAB 400MG	\$0 (Tier 4) QL (60 tabs / 30 days)
<i>pacerone</i>	\$0 (Tier 1)
<i>pacerone</i>	\$0 (Tier 4)
<i>propafenone hcl cap er 12hr 225 mg</i>	\$0 (Tier 4)
<i>propafenone hcl cap er 12hr 325 mg</i>	\$0 (Tier 4)
<i>propafenone hcl cap er 12hr 425 mg</i>	\$0 (Tier 4)
<i>propafenone hcl tab 150 mg</i>	\$0 (Tier 3)
<i>propafenone hcl tab 225 mg</i>	\$0 (Tier 3)
<i>propafenone hcl tab 300 mg</i>	\$0 (Tier 3)
<i>quinidine sulfate tab 200 mg</i>	\$0 (Tier 4)
<i>quinidine sulfate tab 300 mg</i>	\$0 (Tier 4)
<i>sotalol hcl (afib/afl) tab 80 mg</i>	\$0 (Tier 3)
<i>sotalol hcl (afib/afl) tab 120 mg</i>	\$0 (Tier 3)
<i>sotalol hcl (afib/afl) tab 160 mg</i>	\$0 (Tier 3)
<i>sotalol hcl tab 80 mg</i>	\$0 (Tier 2)
<i>sotalol hcl tab 120 mg</i>	\$0 (Tier 2)
<i>sotalol hcl tab 160 mg</i>	\$0 (Tier 2)
<i>sotalol hcl tab 240 mg</i>	\$0 (Tier 2)
ANTILIPEMICS, FIBRATES	
<i>choline fenofibrate cap dr 45 mg (fenofibric acid equiv)</i>	\$0 (Tier 3)

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>choline fenofibrate cap dr 135 mg (fenofibric acid equiv)</i>	\$0 (Tier 3)	
<i>fenofibrate micronized cap 67 mg</i>	\$0 (Tier 3)	
<i>fenofibrate micronized cap 134 mg</i>	\$0 (Tier 3)	
<i>fenofibrate micronized cap 200 mg</i>	\$0 (Tier 3)	
<i>fenofibrate tab 48 mg</i>	\$0 (Tier 2)	
<i>fenofibrate tab 54 mg</i>	\$0 (Tier 2)	
<i>fenofibrate tab 145 mg</i>	\$0 (Tier 2)	
<i>fenofibrate tab 160 mg</i>	\$0 (Tier 2)	
<i>gemfibrozil tab 600 mg</i>	\$0 (Tier 1)	
ANTILIPEMICS, HMG-CoA REDUCTASE INHIBITORS - DRUGS TO TREAT HIGH CHOLESTEROL		
<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
EZALLOR SPR CAP 5MG	\$0 (Tier 4)	QL (30 caps / 30 days), ST
EZALLOR SPR CAP 10MG	\$0 (Tier 4)	QL (30 caps / 30 days), ST
EZALLOR SPR CAP 20MG	\$0 (Tier 4)	QL (30 caps / 30 days), ST
EZALLOR SPR CAP 40MG	\$0 (Tier 4)	QL (30 caps / 30 days), ST
<i>fluvastatin sodium cap 20 mg (base equivalent)</i>	\$0 (Tier 1)	QL (60 caps / 30 days), ST
<i>fluvastatin sodium cap 40 mg (base equivalent)</i>	\$0 (Tier 1)	QL (60 caps / 30 days), ST
<i>fluvastatin sodium tab er 24 hr 80 mg (base equivalent)</i>	\$0 (Tier 1)	QL (30 tabs / 30 days), ST
<i>lovastatin tab 10 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days)
<i>lovastatin tab 20 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days)
<i>lovastatin tab 40 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days)
<i>pitavastatin calcium tab 1 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days), ST
<i>pitavastatin calcium tab 2 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days), ST

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>pitavastatin calcium tab 4 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days), ST
<i>pravastatin sodium tab 10 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>pravastatin sodium tab 20 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>pravastatin sodium tab 40 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>pravastatin sodium tab 80 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>rosuvastatin calcium tab 5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>rosuvastatin calcium tab 10 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>rosuvastatin calcium tab 20 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>rosuvastatin calcium tab 40 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>simvastatin tab 5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>simvastatin tab 10 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>simvastatin tab 20 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>simvastatin tab 40 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>simvastatin tab 80 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
ZYPITAMAG TAB 2MG	\$0 (Tier 4)	QL (30 tabs / 30 days), ST
ZYPITAMAG TAB 4MG	\$0 (Tier 4)	QL (30 tabs / 30 days), ST

ANTILIPEMICS, MISCELLANEOUS - DRUGS TO TREAT HIGH CHOLESTEROL

<i>cholestyramine light powder 4 gm/dose</i>	\$0 (Tier 3)
<i>cholestyramine light powder packets 4 gm</i>	\$0 (Tier 3)
<i>cholestyramine powder 4 gm/dose</i>	\$0 (Tier 3)
<i>cholestyramine powder packets 4 gm</i>	\$0 (Tier 3)
<i>colesevelam hcl packet for susp 3.75 gm</i>	\$0 (Tier 4)
<i>colesevelam hcl tab 625 mg</i>	\$0 (Tier 4)
<i>colestipol hcl granule packets 5 gm</i>	\$0 (Tier 4)
<i>colestipol hcl granules 5 gm</i>	\$0 (Tier 4)
<i>colestipol hcl tab 1 gm</i>	\$0 (Tier 3)
<i>ezetimibe tab 10 mg</i>	\$0 (Tier 3)
<i>ezetimibe-simvastatin tab 10-10 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>ezetimibe-simvastatin tab 10-20 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>ezetimibe-simvastatin tab 10-40 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>ezetimibe-simvastatin tab 10-80 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
NEXLETOL TAB 180MG	\$0 (Tier 3) QL (30 tabs / 30 days)
NEXLIZET TAB 180/10MG	\$0 (Tier 3) QL (30 tabs / 30 days)
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	\$0 (Tier 3) QL (60 tabs / 30 days)
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	\$0 (Tier 3) QL (60 tabs / 30 days)
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	\$0 (Tier 3) QL (60 tabs / 30 days)

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>omega-3-acid ethyl esters cap 1 gm</i>	\$0 (Tier 3) PA
<i>prevalite</i>	\$0 (Tier 3)
REPATHA INJ 140MG/ML	\$0 (Tier 3) PA
REPATHA SURE INJ 140MG/ML	\$0 (Tier 3) PA
VASCEPA CAP 0.5GM	\$0 (Tier 3)
VASCEPA CAP 1GM	\$0 (Tier 3)

**BETA-BLOCKER/DIURETIC COMBINATIONS - DRUGS TO TREAT
HIGH BLOOD PRESSURE AND HEART CONDITIONS**

<i>atenolol & chlorthalidone tab 50-25 mg</i>	\$0 (Tier 2)
<i>atenolol & chlorthalidone tab 100-25 mg</i>	\$0 (Tier 2)
<i>bisoprolol & hydrochlorothiazide tab 2.5- 6.25 mg</i>	\$0 (Tier 2)
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	\$0 (Tier 2)
<i>bisoprolol & hydrochlorothiazide tab 10- 6.25 mg</i>	\$0 (Tier 2)
<i>metoprolol & hydrochlorothiazide tab 50- 25 mg</i>	\$0 (Tier 3)
<i>metoprolol & hydrochlorothiazide tab 100- 25 mg</i>	\$0 (Tier 3)
<i>metoprolol & hydrochlorothiazide tab 100- 50 mg</i>	\$0 (Tier 3)

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

<i>acebutolol hcl cap 200 mg</i>	\$0 (Tier 3)
<i>acebutolol hcl cap 400 mg</i>	\$0 (Tier 3)
<i>atenolol tab 25 mg</i>	\$0 (Tier 1)
<i>atenolol tab 50 mg</i>	\$0 (Tier 1)
<i>atenolol tab 100 mg</i>	\$0 (Tier 1)
<i>bisoprolol fumarate tab 5 mg</i>	\$0 (Tier 2)
<i>bisoprolol fumarate tab 10 mg</i>	\$0 (Tier 2)
<i>carvedilol tab 3.125 mg</i>	\$0 (Tier 1)
<i>carvedilol tab 6.25 mg</i>	\$0 (Tier 1)
<i>carvedilol tab 12.5 mg</i>	\$0 (Tier 1)
<i>carvedilol tab 25 mg</i>	\$0 (Tier 1)
<i>labetalol hcl tab 100 mg</i>	\$0 (Tier 3)
<i>labetalol hcl tab 200 mg</i>	\$0 (Tier 3)
<i>labetalol hcl tab 300 mg</i>	\$0 (Tier 3)
<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</i>	\$0 (Tier 1)

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i>	\$0 (Tier 1)	
<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i>	\$0 (Tier 1)	
<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i>	\$0 (Tier 1)	
<i>metoprolol tartrate iv soln 5 mg/5ml</i>	\$0 (Tier 4)	
<i>metoprolol tartrate tab 25 mg</i>	\$0 (Tier 1)	
<i>metoprolol tartrate tab 50 mg</i>	\$0 (Tier 1)	
<i>metoprolol tartrate tab 100 mg</i>	\$0 (Tier 1)	
<i>nadolol tab 20 mg</i>	\$0 (Tier 3)	
<i>nadolol tab 40 mg</i>	\$0 (Tier 3)	
<i>nadolol tab 80 mg</i>	\$0 (Tier 3)	
<i>nebivolol hcl tab 2.5 mg (base equivalent)</i>	\$0 (Tier 3)	QL (30 tabs / 30 days)
<i>nebivolol hcl tab 5 mg (base equivalent)</i>	\$0 (Tier 3)	QL (30 tabs / 30 days)
<i>nebivolol hcl tab 10 mg (base equivalent)</i>	\$0 (Tier 3)	QL (30 tabs / 30 days)
<i>nebivolol hcl tab 20 mg (base equivalent)</i>	\$0 (Tier 3)	QL (60 tabs / 30 days)
<i>pindolol tab 5 mg</i>	\$0 (Tier 3)	
<i>pindolol tab 10 mg</i>	\$0 (Tier 3)	
<i>propranolol hcl cap er 24hr 60 mg</i>	\$0 (Tier 3)	
<i>propranolol hcl cap er 24hr 80 mg</i>	\$0 (Tier 3)	
<i>propranolol hcl cap er 24hr 120 mg</i>	\$0 (Tier 3)	
<i>propranolol hcl cap er 24hr 160 mg</i>	\$0 (Tier 3)	
<i>propranolol hcl oral soln 20 mg/5ml</i>	\$0 (Tier 3)	
<i>propranolol hcl oral soln 40 mg/5ml</i>	\$0 (Tier 3)	
<i>propranolol hcl tab 10 mg</i>	\$0 (Tier 2)	
<i>propranolol hcl tab 20 mg</i>	\$0 (Tier 2)	
<i>propranolol hcl tab 40 mg</i>	\$0 (Tier 2)	
<i>propranolol hcl tab 60 mg</i>	\$0 (Tier 2)	
<i>propranolol hcl tab 80 mg</i>	\$0 (Tier 2)	
<i>timolol maleate tab 5 mg</i>	\$0 (Tier 3)	
<i>timolol maleate tab 10 mg</i>	\$0 (Tier 3)	
<i>timolol maleate tab 20 mg</i>	\$0 (Tier 3)	

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

<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	\$0 (Tier 1)	
<i>amlodipine besylate tab 5 mg (base equivalent)</i>	\$0 (Tier 1)	
<i>amlodipine besylate tab 10 mg (base equivalent)</i>	\$0 (Tier 1)	

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>cartia xt</i>	\$0 (Tier 2)	
<i>dilt-xr</i>	\$0 (Tier 2)	
<i>diltiazem hcl cap er 12hr 60 mg</i>	\$0 (Tier 4)	
<i>diltiazem hcl cap er 12hr 90 mg</i>	\$0 (Tier 4)	
<i>diltiazem hcl cap er 12hr 120 mg</i>	\$0 (Tier 4)	
<i>diltiazem hcl coated beads cap er 24hr 120 mg</i>	\$0 (Tier 2)	
<i>diltiazem hcl coated beads cap er 24hr 180 mg</i>	\$0 (Tier 2)	
<i>diltiazem hcl coated beads cap er 24hr 240 mg</i>	\$0 (Tier 2)	
<i>diltiazem hcl coated beads cap er 24hr 300 mg</i>	\$0 (Tier 2)	
<i>diltiazem hcl coated beads cap er 24hr 360 mg</i>	\$0 (Tier 4)	
<i>diltiazem hcl extended release beads cap er 24hr 120 mg</i>	\$0 (Tier 2)	
<i>diltiazem hcl extended release beads cap er 24hr 180 mg</i>	\$0 (Tier 2)	
<i>diltiazem hcl extended release beads cap er 24hr 240 mg</i>	\$0 (Tier 2)	
<i>diltiazem hcl extended release beads cap er 24hr 300 mg</i>	\$0 (Tier 2)	
<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i>	\$0 (Tier 2)	
<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i>	\$0 (Tier 2)	
<i>diltiazem hcl iv soln 25 mg/5ml (5 mg/ml)</i>	\$0 (Tier 3)	
<i>diltiazem hcl iv soln 50 mg/10ml (5 mg/ml)</i>	\$0 (Tier 3)	
<i>diltiazem hcl iv soln 125 mg/25ml (5 mg/ml)</i>	\$0 (Tier 3)	
<i>diltiazem hcl tab 30 mg</i>	\$0 (Tier 2)	
<i>diltiazem hcl tab 60 mg</i>	\$0 (Tier 2)	
<i>diltiazem hcl tab 90 mg</i>	\$0 (Tier 2)	
<i>diltiazem hcl tab 120 mg</i>	\$0 (Tier 2)	
<i>diltiazem hcl tab er 24hr 120 mg</i>	\$0 (Tier 3)	
<i>diltiazem hcl tab er 24hr 180 mg</i>	\$0 (Tier 3)	
<i>diltiazem hcl tab er 24hr 240 mg</i>	\$0 (Tier 3)	
<i>diltiazem hcl tab er 24hr 300 mg</i>	\$0 (Tier 3)	
<i>diltiazem hcl tab er 24hr 360 mg</i>	\$0 (Tier 3)	
<i>diltiazem hcl tab er 24hr 420 mg</i>	\$0 (Tier 3)	

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>felodipine tab er 24hr 2.5 mg</i>	\$0 (Tier 2)	
<i>felodipine tab er 24hr 5 mg</i>	\$0 (Tier 2)	
<i>felodipine tab er 24hr 10 mg</i>	\$0 (Tier 2)	
<i>isradipine cap 2.5 mg</i>	\$0 (Tier 4)	
<i>isradipine cap 5 mg</i>	\$0 (Tier 4)	
<i>matzim la</i>	\$0 (Tier 3)	
<i>nicardipine hcl cap 20 mg</i>	\$0 (Tier 4)	
<i>nicardipine hcl cap 30 mg</i>	\$0 (Tier 4)	
<i>nifedipine tab er 24hr 30 mg</i>	\$0 (Tier 3)	
<i>nifedipine tab er 24hr 60 mg</i>	\$0 (Tier 3)	
<i>nifedipine tab er 24hr 90 mg</i>	\$0 (Tier 3)	
<i>nifedipine tab er 24hr osmotic release 30 mg</i>	\$0 (Tier 3)	
<i>nifedipine tab er 24hr osmotic release 60 mg</i>	\$0 (Tier 3)	
<i>nifedipine tab er 24hr osmotic release 90 mg</i>	\$0 (Tier 3)	
<i>nimodipine cap 30 mg</i>	\$0 (Tier 4)	
<i>nisoldipine tab er 24hr 8.5 mg</i>	\$0 (Tier 4)	
<i>nisoldipine tab er 24hr 17 mg</i>	\$0 (Tier 4)	
<i>nisoldipine tab er 24hr 20 mg</i>	\$0 (Tier 4)	
<i>nisoldipine tab er 24hr 25.5 mg</i>	\$0 (Tier 4)	
<i>nisoldipine tab er 24hr 30 mg</i>	\$0 (Tier 4)	
<i>nisoldipine tab er 24hr 34 mg</i>	\$0 (Tier 4)	
<i>nisoldipine tab er 24hr 40 mg</i>	\$0 (Tier 4)	
<i>tiadylt er</i>	\$0 (Tier 2)	
<i>verapamil hcl cap er 24hr 100 mg</i>	\$0 (Tier 4)	
<i>verapamil hcl cap er 24hr 120 mg</i>	\$0 (Tier 3)	
<i>verapamil hcl cap er 24hr 180 mg</i>	\$0 (Tier 3)	
<i>verapamil hcl cap er 24hr 200 mg</i>	\$0 (Tier 4)	
<i>verapamil hcl cap er 24hr 240 mg</i>	\$0 (Tier 3)	
<i>verapamil hcl cap er 24hr 300 mg</i>	\$0 (Tier 4)	
<i>verapamil hcl cap er 24hr 360 mg</i>	\$0 (Tier 4)	
<i>verapamil hcl iv soln 2.5 mg/ml</i>	\$0 (Tier 4)	
<i>verapamil hcl tab 40 mg</i>	\$0 (Tier 1)	
<i>verapamil hcl tab 80 mg</i>	\$0 (Tier 1)	
<i>verapamil hcl tab 120 mg</i>	\$0 (Tier 1)	
<i>verapamil hcl tab er 120 mg</i>	\$0 (Tier 2)	
<i>verapamil hcl tab er 180 mg</i>	\$0 (Tier 2)	
<i>verapamil hcl tab er 240 mg</i>	\$0 (Tier 2)	

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

NAME OF DRUG**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)****DIURETICS - DRUGS TO TREAT HEART CONDITIONS**

<i>acetazolamide cap er 12hr 500 mg</i>	\$0 (Tier 3)
<i>acetazolamide tab 125 mg</i>	\$0 (Tier 3)
<i>acetazolamide tab 250 mg</i>	\$0 (Tier 3)
<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	\$0 (Tier 2)
<i>amiloride hcl tab 5 mg</i>	\$0 (Tier 2)
<i>bumetanide inj 0.25 mg/ml</i>	\$0 (Tier 3)
<i>bumetanide tab 0.5 mg</i>	\$0 (Tier 3)
<i>bumetanide tab 1 mg</i>	\$0 (Tier 3)
<i>bumetanide tab 2 mg</i>	\$0 (Tier 3)
<i>chlorthalidone tab 25 mg</i>	\$0 (Tier 2)
<i>chlorthalidone tab 50 mg</i>	\$0 (Tier 2)
<i>furosemide inj</i>	\$0 (Tier 3)
<i>furosemide oral soln 8 mg/ml</i>	\$0 (Tier 2)
<i>furosemide oral soln 10 mg/ml</i>	\$0 (Tier 2)
<i>furosemide tab 20 mg</i>	\$0 (Tier 1)
<i>furosemide tab 40 mg</i>	\$0 (Tier 1)
<i>furosemide tab 80 mg</i>	\$0 (Tier 1)
<i>hydrochlorothiazide cap 12.5 mg</i>	\$0 (Tier 1)
<i>hydrochlorothiazide tab 12.5 mg</i>	\$0 (Tier 1)
<i>hydrochlorothiazide tab 25 mg</i>	\$0 (Tier 1)
<i>hydrochlorothiazide tab 50 mg</i>	\$0 (Tier 1)
<i>indapamide tab 1.25 mg</i>	\$0 (Tier 1)
<i>indapamide tab 2.5 mg</i>	\$0 (Tier 1)
<i>methazolamide tab 25 mg</i>	\$0 (Tier 4)
<i>methazolamide tab 50 mg</i>	\$0 (Tier 4)
<i>metolazone tab 2.5 mg</i>	\$0 (Tier 2)
<i>metolazone tab 5 mg</i>	\$0 (Tier 2)
<i>metolazone tab 10 mg</i>	\$0 (Tier 2)
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	\$0 (Tier 2)
<i>torsemide tab 5 mg</i>	\$0 (Tier 2)
<i>torsemide tab 10 mg</i>	\$0 (Tier 2)
<i>torsemide tab 20 mg</i>	\$0 (Tier 2)
<i>torsemide tab 100 mg</i>	\$0 (Tier 2)
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	\$0 (Tier 1)
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	\$0 (Tier 1)

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	\$0 (Tier 1)	
MISCELLANEOUS		
<i>aliskiren fumarate tab 150 mg (base equivalent)</i>	\$0 (Tier 1)	
<i>aliskiren fumarate tab 300 mg (base equivalent)</i>	\$0 (Tier 1)	
<i>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg</i>	\$0 (Tier 1)	
<i>amlodipine besylate-atorvastatin calcium tab 2.5-20 mg</i>	\$0 (Tier 1)	
<i>amlodipine besylate-atorvastatin calcium tab 2.5-40 mg</i>	\$0 (Tier 1)	
<i>amlodipine besylate-atorvastatin calcium tab 5-10 mg</i>	\$0 (Tier 1)	
<i>amlodipine besylate-atorvastatin calcium tab 5-20 mg</i>	\$0 (Tier 1)	
<i>amlodipine besylate-atorvastatin calcium tab 5-40 mg</i>	\$0 (Tier 1)	
<i>amlodipine besylate-atorvastatin calcium tab 5-80 mg</i>	\$0 (Tier 1)	
<i>amlodipine besylate-atorvastatin calcium tab 10-10 mg</i>	\$0 (Tier 1)	
<i>amlodipine besylate-atorvastatin calcium tab 10-20 mg</i>	\$0 (Tier 1)	
<i>amlodipine besylate-atorvastatin calcium tab 10-40 mg</i>	\$0 (Tier 1)	
<i>amlodipine besylate-atorvastatin calcium tab 10-80 mg</i>	\$0 (Tier 1)	
<i>clonidine hcl tab 0.1 mg</i>	\$0 (Tier 1)	
<i>clonidine hcl tab 0.2 mg</i>	\$0 (Tier 1)	
<i>clonidine hcl tab 0.3 mg</i>	\$0 (Tier 1)	
<i>clonidine td patch weekly 0.1 mg/24hr</i>	\$0 (Tier 3)	
<i>clonidine td patch weekly 0.2 mg/24hr</i>	\$0 (Tier 3)	
<i>clonidine td patch weekly 0.3 mg/24hr</i>	\$0 (Tier 3)	
<i>CORLANOR SOL 5MG/5ML</i>	\$0 (Tier 4)	QL (450 mL / 30 days)
<i>digoxin inj 0.25 mg/ml</i>	\$0 (Tier 4)	
<i>digoxin oral soln 0.05 mg/ml</i>	\$0 (Tier 4)	
<i>digoxin tab 125 mcg (0.125 mg)</i>	\$0 (Tier 2)	QL (30 tabs / 30 days)
<i>digoxin tab 250 mcg (0.25 mg)</i>	\$0 (Tier 2)	QL (30 tabs / 30 days)
<i>droxidopa cap 100 mg</i>	\$0 (Tier 5)	NDS, QL (90 caps / 30 days), PA

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>droxidopa cap 200 mg</i>	\$0 (Tier 5)	NDS, QL (180 caps / 30 days), PA
<i>droxidopa cap 300 mg</i>	\$0 (Tier 5)	NDS, QL (180 caps / 30 days), PA
<i>epinephrine inj 1 mg/ml (1:1000)</i>	\$0 (Tier 4)	
<i>guanfacine hcl tab 1 mg</i>	\$0 (Tier 3)	PA; PA applies if 70 years and older
<i>guanfacine hcl tab 2 mg</i>	\$0 (Tier 3)	PA; PA applies if 70 years and older
<i>hydralazine hcl inj 20 mg/ml</i>	\$0 (Tier 4)	
<i>hydralazine hcl tab 10 mg</i>	\$0 (Tier 1)	
<i>hydralazine hcl tab 25 mg</i>	\$0 (Tier 1)	
<i>hydralazine hcl tab 50 mg</i>	\$0 (Tier 1)	
<i>hydralazine hcl tab 100 mg</i>	\$0 (Tier 1)	
<i>ivabradine hcl tab 5 mg (base equiv)</i>	\$0 (Tier 4)	QL (60 tabs / 30 days)
<i>ivabradine hcl tab 7.5 mg (base equiv)</i>	\$0 (Tier 4)	QL (60 tabs / 30 days)
<i>metyrosine cap 250 mg</i>	\$0 (Tier 5)	NDS, PA
<i>midodrine hcl tab 2.5 mg</i>	\$0 (Tier 3)	
<i>midodrine hcl tab 5 mg</i>	\$0 (Tier 3)	
<i>midodrine hcl tab 10 mg</i>	\$0 (Tier 4)	
<i>minoxidil tab 2.5 mg</i>	\$0 (Tier 2)	
<i>minoxidil tab 10 mg</i>	\$0 (Tier 2)	
<i>ranolazine tab er 12hr 500 mg</i>	\$0 (Tier 4)	
<i>ranolazine tab er 12hr 1000 mg</i>	\$0 (Tier 4)	
VERQUVO TAB 2.5MG	\$0 (Tier 3)	QL (30 tabs / 30 days), PA
VERQUVO TAB 5MG	\$0 (Tier 3)	QL (30 tabs / 30 days), PA
VERQUVO TAB 10MG	\$0 (Tier 3)	QL (30 tabs / 30 days), PA

NITRATES - DRUGS TO TREAT HEART CONDITIONS

<i>isosorbide dinitrate tab 5 mg</i>	\$0 (Tier 3)
<i>isosorbide dinitrate tab 10 mg</i>	\$0 (Tier 3)
<i>isosorbide dinitrate tab 20 mg</i>	\$0 (Tier 3)
<i>isosorbide dinitrate tab 30 mg</i>	\$0 (Tier 3)
<i>isosorbide mononitrate tab er 24hr 30 mg</i>	\$0 (Tier 1)
<i>isosorbide mononitrate tab er 24hr 60 mg</i>	\$0 (Tier 1)
<i>isosorbide mononitrate tab er 24hr 120 mg</i>	\$0 (Tier 1)
NITRO-BID OIN 2%	\$0 (Tier 3)
<i>nitroglycerin sl tab 0.3 mg</i>	\$0 (Tier 2)
<i>nitroglycerin sl tab 0.4 mg</i>	\$0 (Tier 2)

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>nitroglycerin sl tab 0.6 mg</i>	\$0 (Tier 2)	
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>	\$0 (Tier 3)	
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	\$0 (Tier 3)	
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	\$0 (Tier 3)	
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	\$0 (Tier 3)	
PULMONARY ARTERIAL HYPERTENSION - DRUGS TO TREAT PULMONARY HYPERTENSION		
ADEMPAS TAB 0.5MG	\$0 (Tier 5)	NDS, QL (90 tabs / 30 days), PA
ADEMPAS TAB 1.5MG	\$0 (Tier 5)	NDS, QL (90 tabs / 30 days), PA
ADEMPAS TAB 1MG	\$0 (Tier 5)	NDS, QL (90 tabs / 30 days), PA
ADEMPAS TAB 2.5MG	\$0 (Tier 5)	NDS, QL (90 tabs / 30 days), PA
ADEMPAS TAB 2MG	\$0 (Tier 5)	NDS, QL (90 tabs / 30 days), PA
<i>alyq</i>	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
<i>ambrisentan tab 5 mg</i>	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
<i>ambrisentan tab 10 mg</i>	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
<i>bosentan tab 62.5 mg</i>	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
<i>bosentan tab 125 mg</i>	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
<i>bosentan tab for oral susp 32 mg</i>	\$0 (Tier 5)	NDS, QL (120 tabs / 30 days), PA
OPSUMIT TAB 10MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
<i>sildenafil citrate tab 20 mg</i>	\$0 (Tier 3)	QL (360 tabs / 30 days), PA
<i>tadalafil tab 20 mg (pah)</i>	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
<i>treprostinil inj soln 20 mg/20ml (1 mg/ml)</i>	\$0 (Tier 5)	NDS, PA
<i>treprostinil inj soln 50 mg/20ml (2.5 mg/ml)</i>	\$0 (Tier 5)	NDS, PA
<i>treprostinil inj soln 100 mg/20ml (5 mg/ml)</i>	\$0 (Tier 5)	NDS, PA
<i>treprostinil inj soln 200 mg/20ml (10 mg/ml)</i>	\$0 (Tier 5)	NDS, PA

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
UPTRAVI PACK TAB 200/800	\$0 (Tier 5)	NDS, QL (1 pack / 28 days), PA
UPTRAVI TAB 200MCG	\$0 (Tier 5)	NDS, QL (140 tabs / 28 days), PA
UPTRAVI TAB 400MCG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
UPTRAVI TAB 600MCG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
UPTRAVI TAB 800MCG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
UPTRAVI TAB 1000MCG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
UPTRAVI TAB 1200MCG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
UPTRAVI TAB 1400MCG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
UPTRAVI TAB 1600MCG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
YUTREPIA CAP 26.5MCG	\$0 (Tier 5)	NDS, QL (140 caps / 28 days), PA
YUTREPIA CAP 53MCG	\$0 (Tier 5)	NDS, QL (140 caps / 28 days), PA
YUTREPIA CAP 79.5MCG	\$0 (Tier 5)	NDS, QL (140 caps / 28 days), PA
YUTREPIA CAP 106MCG	\$0 (Tier 5)	NDS, QL (224 caps / 28 days), PA

CENTRAL NERVOUS SYSTEM - DRUGS TO TREAT NERVOUS SYSTEM DISORDERS

ANTIANXIETY - DRUGS TO TREAT ANXIETY

<i>alprazolam tab 0.5 mg</i>	\$0 (Tier 2)	QL (150 tabs / 30 days)
<i>alprazolam tab 0.25 mg</i>	\$0 (Tier 2)	QL (150 tabs / 30 days)
<i>alprazolam tab 1 mg</i>	\$0 (Tier 2)	QL (150 tabs / 30 days)
<i>alprazolam tab 2 mg</i>	\$0 (Tier 2)	QL (150 tabs / 30 days)
<i>buspirone hcl tab 5 mg</i>	\$0 (Tier 1)	
<i>buspirone hcl tab 7.5 mg</i>	\$0 (Tier 3)	
<i>buspirone hcl tab 10 mg</i>	\$0 (Tier 1)	
<i>buspirone hcl tab 15 mg</i>	\$0 (Tier 1)	
<i>buspirone hcl tab 30 mg</i>	\$0 (Tier 3)	
<i>fluvoxamine maleate tab 25 mg</i>	\$0 (Tier 3)	
<i>fluvoxamine maleate tab 50 mg</i>	\$0 (Tier 3)	
<i>fluvoxamine maleate tab 100 mg</i>	\$0 (Tier 3)	

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>lorazepam conc 2 mg/ml</i>	\$0 (Tier 3)	QL (150 mL / 30 days)
<i>lorazepam inj 2 mg/ml</i>	\$0 (Tier 2)	
<i>lorazepam inj 4 mg/ml</i>	\$0 (Tier 2)	
<i>lorazepam intensol</i>	\$0 (Tier 3)	QL (150 mL / 30 days)
<i>lorazepam tab 0.5 mg</i>	\$0 (Tier 2)	QL (150 tabs / 30 days)
<i>lorazepam tab 1 mg</i>	\$0 (Tier 2)	QL (150 tabs / 30 days)
<i>lorazepam tab 2 mg</i>	\$0 (Tier 2)	QL (150 tabs / 30 days)
ANTIDEMENTIA - DRUGS TO TREAT DEMENTIA AND MEMORY LOSS		
<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	\$0 (Tier 2)	QL (30 tabs / 30 days)
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	\$0 (Tier 2)	
<i>donepezil hydrochloride tab 5 mg</i>	\$0 (Tier 2)	QL (30 tabs / 30 days)
<i>donepezil hydrochloride tab 10 mg</i>	\$0 (Tier 2)	
<i>galantamine hydrobromide cap er 24hr 8 mg</i>	\$0 (Tier 3)	QL (30 caps / 30 days)
<i>galantamine hydrobromide cap er 24hr 16 mg</i>	\$0 (Tier 3)	QL (30 caps / 30 days)
<i>galantamine hydrobromide cap er 24hr 24 mg</i>	\$0 (Tier 3)	QL (30 caps / 30 days)
<i>galantamine hydrobromide oral soln 4 mg/ml</i>	\$0 (Tier 4)	QL (200 mL / 30 days)
<i>galantamine hydrobromide tab 4 mg</i>	\$0 (Tier 3)	QL (60 tabs / 30 days)
<i>galantamine hydrobromide tab 8 mg</i>	\$0 (Tier 3)	QL (60 tabs / 30 days)
<i>galantamine hydrobromide tab 12 mg</i>	\$0 (Tier 3)	QL (60 tabs / 30 days)
<i>memantine hcl cap er 24hr 7 mg</i>	\$0 (Tier 4)	PA; PA applies if 29 years and younger
<i>memantine hcl cap er 24hr 14 mg</i>	\$0 (Tier 4)	PA; PA applies if 29 years and younger
<i>memantine hcl cap er 24hr 21 mg</i>	\$0 (Tier 4)	PA; PA applies if 29 years and younger
<i>memantine hcl cap er 24hr 28 mg</i>	\$0 (Tier 4)	PA; PA applies if 29 years and younger
<i>memantine hcl oral solution 2 mg/ml</i>	\$0 (Tier 4)	PA; PA applies if 29 years and younger
<i>memantine hcl tab 5 mg</i>	\$0 (Tier 3)	PA; PA applies if 29 years and younger
<i>memantine hcl tab 10 mg</i>	\$0 (Tier 3)	PA; PA applies if 29 years and younger
<i>memantine hcl-donepezil hcl cap er 24hr 14-10 mg</i>	\$0 (Tier 4)	

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>memantine hcl-donepezil hcl cap er 24hr 21-10 mg</i>	\$0 (Tier 4)	
<i>memantine hcl-donepezil hcl cap er 24hr 28-10 mg</i>	\$0 (Tier 4)	
NAMZARIC CAP 7-10MG	\$0 (Tier 4)	
NAMZARIC CAP 14-10MG	\$0 (Tier 4)	
NAMZARIC CAP 21-10MG	\$0 (Tier 4)	
NAMZARIC CAP 28-10MG	\$0 (Tier 4)	
NAMZARIC CAP PACK	\$0 (Tier 4)	
<i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i>	\$0 (Tier 3)	QL (60 caps / 30 days)
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	\$0 (Tier 3)	QL (60 caps / 30 days)
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i>	\$0 (Tier 3)	QL (60 caps / 30 days)
<i>rivastigmine tartrate cap 6 mg (base equivalent)</i>	\$0 (Tier 3)	QL (60 caps / 30 days)
<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	\$0 (Tier 4)	QL (30 patches / 30 days)
<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	\$0 (Tier 4)	QL (30 patches / 30 days)
<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	\$0 (Tier 4)	QL (30 patches / 30 days)

ANTIDEPRESSANTS - DRUGS TO TREAT DEPRESSION

<i>amitriptyline hcl tab 10 mg</i>	\$0 (Tier 3)	
<i>amitriptyline hcl tab 25 mg</i>	\$0 (Tier 3)	
<i>amitriptyline hcl tab 50 mg</i>	\$0 (Tier 3)	
<i>amitriptyline hcl tab 75 mg</i>	\$0 (Tier 3)	
<i>amitriptyline hcl tab 100 mg</i>	\$0 (Tier 3)	
<i>amitriptyline hcl tab 150 mg</i>	\$0 (Tier 3)	
<i>amoxapine tab 25 mg</i>	\$0 (Tier 3)	
<i>amoxapine tab 50 mg</i>	\$0 (Tier 3)	
<i>amoxapine tab 100 mg</i>	\$0 (Tier 3)	
<i>amoxapine tab 150 mg</i>	\$0 (Tier 3)	
AUVELITY TAB 45-105MG	\$0 (Tier 4)	QL (60 tabs / 30 days), PA
<i>bupropion hcl tab 75 mg</i>	\$0 (Tier 2)	
<i>bupropion hcl tab 100 mg</i>	\$0 (Tier 2)	
<i>bupropion hcl tab er 12hr 100 mg</i>	\$0 (Tier 2)	QL (60 tabs / 30 days)
<i>bupropion hcl tab er 12hr 150 mg</i>	\$0 (Tier 2)	QL (60 tabs / 30 days)
<i>bupropion hcl tab er 12hr 200 mg</i>	\$0 (Tier 2)	QL (60 tabs / 30 days)

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>bupropion hcl tab er 24hr 150 mg</i>	\$0 (Tier 2)	QL (60 tabs / 30 days)
<i>bupropion hcl tab er 24hr 300 mg</i>	\$0 (Tier 2)	QL (30 tabs / 30 days)
<i>citalopram hydrobromide oral soln 10 mg/5ml</i>	\$0 (Tier 3)	
<i>citalopram hydrobromide tab 10 mg (base equiv)</i>	\$0 (Tier 1)	
<i>citalopram hydrobromide tab 20 mg (base equiv)</i>	\$0 (Tier 1)	
<i>citalopram hydrobromide tab 40 mg (base equiv)</i>	\$0 (Tier 1)	
<i>clomipramine hcl cap 25 mg</i>	\$0 (Tier 4)	PA
<i>clomipramine hcl cap 50 mg</i>	\$0 (Tier 4)	PA
<i>clomipramine hcl cap 75 mg</i>	\$0 (Tier 4)	PA
<i>desipramine hcl tab 10 mg</i>	\$0 (Tier 4)	
<i>desipramine hcl tab 25 mg</i>	\$0 (Tier 4)	
<i>desipramine hcl tab 50 mg</i>	\$0 (Tier 4)	
<i>desipramine hcl tab 75 mg</i>	\$0 (Tier 4)	
<i>desipramine hcl tab 100 mg</i>	\$0 (Tier 4)	
<i>desipramine hcl tab 150 mg</i>	\$0 (Tier 4)	
<i>desvenlafaxine succinate tab er 24hr 25 mg (base equiv)</i>	\$0 (Tier 3)	QL (30 tabs / 30 days)
<i>desvenlafaxine succinate tab er 24hr 50 mg (base equiv)</i>	\$0 (Tier 3)	QL (30 tabs / 30 days)
<i>desvenlafaxine succinate tab er 24hr 100 mg (base equiv)</i>	\$0 (Tier 3)	QL (30 tabs / 30 days)
<i>doxepin hcl cap 10 mg</i>	\$0 (Tier 3)	
<i>doxepin hcl cap 25 mg</i>	\$0 (Tier 3)	
<i>doxepin hcl cap 50 mg</i>	\$0 (Tier 3)	
<i>doxepin hcl cap 75 mg</i>	\$0 (Tier 3)	
<i>doxepin hcl cap 100 mg</i>	\$0 (Tier 3)	
<i>doxepin hcl cap 150 mg</i>	\$0 (Tier 3)	
<i>doxepin hcl conc 10 mg/ml</i>	\$0 (Tier 3)	
DRIZALMA CAP 20MG DR	\$0 (Tier 4)	QL (60 caps / 30 days), PA
DRIZALMA CAP 30MG DR	\$0 (Tier 4)	QL (60 caps / 30 days), PA
DRIZALMA CAP 40MG DR	\$0 (Tier 4)	QL (60 caps / 30 days), PA
DRIZALMA CAP 60MG DR	\$0 (Tier 4)	QL (60 caps / 30 days), PA
<i>duloxetine hcl enteric coated pellets cap 20 mg (base eq)</i>	\$0 (Tier 3)	QL (60 caps / 30 days)

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>duloxetine hcl enteric coated pellets cap 30 mg (base eq)</i>	\$0 (Tier 3)	QL (60 caps / 30 days)
<i>duloxetine hcl enteric coated pellets cap 60 mg (base eq)</i>	\$0 (Tier 3)	QL (60 caps / 30 days)
EMSAM DIS 6MG/24HR	\$0 (Tier 5)	NDS, QL (30 patches / 30 days), PA
EMSAM DIS 9MG/24HR	\$0 (Tier 5)	NDS, QL (30 patches / 30 days), PA
EMSAM DIS 12MG/24H	\$0 (Tier 5)	NDS, QL (30 patches / 30 days), PA
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	\$0 (Tier 4)	
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	\$0 (Tier 1)	
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	\$0 (Tier 1)	
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	\$0 (Tier 1)	
FETZIMA CAP 20MG	\$0 (Tier 4)	QL (60 caps / 30 days), PA
FETZIMA CAP 40MG	\$0 (Tier 4)	QL (60 caps / 30 days), PA
FETZIMA CAP 80MG	\$0 (Tier 4)	QL (30 caps / 30 days), PA
FETZIMA CAP 120MG	\$0 (Tier 4)	QL (30 caps / 30 days), PA
FETZIMA CAP TITRATIO	\$0 (Tier 4)	QL (2 packs / year), PA
<i>fluoxetine hcl cap 10 mg</i>	\$0 (Tier 1)	
<i>fluoxetine hcl cap 20 mg</i>	\$0 (Tier 1)	
<i>fluoxetine hcl cap 40 mg</i>	\$0 (Tier 1)	
<i>fluoxetine hcl solution 20 mg/5ml</i>	\$0 (Tier 3)	
<i>imipramine hcl tab 10 mg</i>	\$0 (Tier 2)	
<i>imipramine hcl tab 25 mg</i>	\$0 (Tier 2)	
<i>imipramine hcl tab 50 mg</i>	\$0 (Tier 2)	
MARPLAN TAB 10MG	\$0 (Tier 4)	QL (180 tabs / 30 days)
<i>mirtazapine orally disintegrating tab 15 mg</i>	\$0 (Tier 3)	
<i>mirtazapine orally disintegrating tab 30 mg</i>	\$0 (Tier 3)	
<i>mirtazapine orally disintegrating tab 45 mg</i>	\$0 (Tier 3)	
<i>mirtazapine tab 7.5 mg</i>	\$0 (Tier 3)	
<i>mirtazapine tab 15 mg</i>	\$0 (Tier 2)	
<i>mirtazapine tab 30 mg</i>	\$0 (Tier 2)	
<i>mirtazapine tab 45 mg</i>	\$0 (Tier 2)	

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

NAME OF DRUG**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)**

<i>nefazodone hcl tab 50 mg</i>	\$0 (Tier 4)	
<i>nefazodone hcl tab 100 mg</i>	\$0 (Tier 4)	
<i>nefazodone hcl tab 150 mg</i>	\$0 (Tier 4)	
<i>nefazodone hcl tab 200 mg</i>	\$0 (Tier 4)	
<i>nefazodone hcl tab 250 mg</i>	\$0 (Tier 4)	
<i>nortriptyline hcl cap 10 mg</i>	\$0 (Tier 2)	
<i>nortriptyline hcl cap 25 mg</i>	\$0 (Tier 2)	
<i>nortriptyline hcl cap 50 mg</i>	\$0 (Tier 2)	
<i>nortriptyline hcl cap 75 mg</i>	\$0 (Tier 2)	
<i>nortriptyline hcl soln 10 mg/5ml</i>	\$0 (Tier 4)	
<i>paroxetine hcl oral susp 10 mg/5ml (base equiv)</i>	\$0 (Tier 4)	QL (900 mL / 30 days), PA
<i>paroxetine hcl tab 10 mg</i>	\$0 (Tier 2)	
<i>paroxetine hcl tab 20 mg</i>	\$0 (Tier 2)	
<i>paroxetine hcl tab 30 mg</i>	\$0 (Tier 2)	
<i>paroxetine hcl tab 40 mg</i>	\$0 (Tier 2)	
<i>paroxetine hcl tab er 24hr 12.5 mg</i>	\$0 (Tier 4)	QL (60 tabs / 30 days)
<i>paroxetine hcl tab er 24hr 25 mg</i>	\$0 (Tier 4)	QL (60 tabs / 30 days)
<i>paroxetine hcl tab er 24hr 37.5 mg</i>	\$0 (Tier 4)	QL (60 tabs / 30 days)
<i>phenelzine sulfate tab 15 mg</i>	\$0 (Tier 3)	
<i>protriptyline hcl tab 5 mg</i>	\$0 (Tier 4)	
<i>protriptyline hcl tab 10 mg</i>	\$0 (Tier 4)	
RALDESY SOL 10MG/ML	\$0 (Tier 4)	QL (1800 mL / 30 days), PA
<i>sertraline hcl oral concentrate for solution 20 mg/ml</i>	\$0 (Tier 3)	
<i>sertraline hcl tab 25 mg</i>	\$0 (Tier 1)	
<i>sertraline hcl tab 50 mg</i>	\$0 (Tier 1)	
<i>sertraline hcl tab 100 mg</i>	\$0 (Tier 1)	
<i>tranylcypromine sulfate tab 10 mg</i>	\$0 (Tier 4)	
<i>trazodone hcl tab 50 mg</i>	\$0 (Tier 1)	
<i>trazodone hcl tab 100 mg</i>	\$0 (Tier 1)	
<i>trazodone hcl tab 150 mg</i>	\$0 (Tier 1)	
<i>trimipramine maleate cap 25 mg</i>	\$0 (Tier 4)	QL (120 caps / 30 days)
<i>trimipramine maleate cap 50 mg</i>	\$0 (Tier 4)	QL (120 caps / 30 days)
<i>trimipramine maleate cap 100 mg</i>	\$0 (Tier 4)	QL (60 caps / 30 days)
TRINTELLIX TAB 5MG	\$0 (Tier 4)	QL (30 tabs / 30 days), PA
TRINTELLIX TAB 10MG	\$0 (Tier 4)	QL (30 tabs / 30 days), PA

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
TRINTELLIX TAB 20MG	\$0 (Tier 4) QL (30 tabs / 30 days), PA
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	\$0 (Tier 2)
<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	\$0 (Tier 2)
<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i>	\$0 (Tier 2)
<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	\$0 (Tier 3)
<i>venlafaxine hcl tab 37.5 mg (base equivalent)</i>	\$0 (Tier 3)
<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	\$0 (Tier 3)
<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	\$0 (Tier 3)
<i>venlafaxine hcl tab 100 mg (base equivalent)</i>	\$0 (Tier 3)
<i>vilazodone hcl tab 10 mg</i>	\$0 (Tier 4) QL (30 tabs / 30 days)
<i>vilazodone hcl tab 20 mg</i>	\$0 (Tier 4) QL (30 tabs / 30 days)
<i>vilazodone hcl tab 40 mg</i>	\$0 (Tier 4) QL (30 tabs / 30 days)
ZURZUVAE CAP 20MG	\$0 (Tier 5) NDS, QL (28 caps / 14 days), PA
ZURZUVAE CAP 25MG	\$0 (Tier 5) NDS, QL (28 caps / 14 days), PA
ZURZUVAE CAP 30MG	\$0 (Tier 5) NDS, QL (14 caps / 14 days), PA

ANTIPARKINSONIAN AGENTS - DRUGS TO TREAT PARKINSONS DISEASE

<i>amantadine hcl cap 100 mg</i>	\$0 (Tier 3) QL (120 caps / 30 days)
<i>amantadine hcl soln 50 mg/5ml</i>	\$0 (Tier 3)
<i>amantadine hcl tab 100 mg</i>	\$0 (Tier 4)
<i>benztropine mesylate inj 1 mg/ml</i>	\$0 (Tier 4)
<i>benztropine mesylate tab 0.5 mg</i>	\$0 (Tier 2) PA; PA applies if 70 years and older
<i>benztropine mesylate tab 1 mg</i>	\$0 (Tier 2) PA; PA applies if 70 years and older
<i>benztropine mesylate tab 2 mg</i>	\$0 (Tier 2) PA; PA applies if 70 years and older
<i>bromocriptine mesylate cap 5 mg (base equivalent)</i>	\$0 (Tier 4)

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	\$0 (Tier 4)	
<i>carb/levo orally disintegrating tab 10-100mg</i>	\$0 (Tier 3)	
<i>carb/levo orally disintegrating tab 25-100mg</i>	\$0 (Tier 3)	
<i>carb/levo orally disintegrating tab 25-250mg</i>	\$0 (Tier 3)	
<i>carbidopa & levodopa tab 10-100 mg</i>	\$0 (Tier 2)	
<i>carbidopa & levodopa tab 25-100 mg</i>	\$0 (Tier 2)	
<i>carbidopa & levodopa tab 25-250 mg</i>	\$0 (Tier 2)	
<i>carbidopa & levodopa tab er 25-100 mg</i>	\$0 (Tier 3)	
<i>carbidopa & levodopa tab er 50-200 mg</i>	\$0 (Tier 3)	
<i>carbidopa tab 25 mg</i>	\$0 (Tier 4)	
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	\$0 (Tier 4)	
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	\$0 (Tier 4)	
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	\$0 (Tier 4)	
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	\$0 (Tier 4)	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	\$0 (Tier 4)	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	\$0 (Tier 4)	
<i>entacapone tab 200 mg</i>	\$0 (Tier 4)	
INBRIJA CAP 42MG	\$0 (Tier 5)	NDS, QL (300 caps / 30 days), PA
NEUPRO DIS 1MG/24HR	\$0 (Tier 4)	
NEUPRO DIS 2MG/24HR	\$0 (Tier 4)	
NEUPRO DIS 3MG/24HR	\$0 (Tier 4)	
NEUPRO DIS 4MG/24HR	\$0 (Tier 4)	
NEUPRO DIS 6MG/24HR	\$0 (Tier 4)	
NEUPRO DIS 8MG/24HR	\$0 (Tier 4)	
<i>pramipexole dihydrochloride tab 0.5 mg</i>	\$0 (Tier 2)	
<i>pramipexole dihydrochloride tab 0.25 mg</i>	\$0 (Tier 2)	
<i>pramipexole dihydrochloride tab 0.75 mg</i>	\$0 (Tier 2)	
<i>pramipexole dihydrochloride tab 0.125 mg</i>	\$0 (Tier 2)	
<i>pramipexole dihydrochloride tab 1 mg</i>	\$0 (Tier 2)	
<i>pramipexole dihydrochloride tab 1.5 mg</i>	\$0 (Tier 2)	

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>pramipexole dihydrochloride tab er 24hr 0.75 mg</i>	\$0 (Tier 4)	
<i>pramipexole dihydrochloride tab er 24hr 0.375 mg</i>	\$0 (Tier 4)	
<i>pramipexole dihydrochloride tab er 24hr 1.5 mg</i>	\$0 (Tier 4)	
<i>pramipexole dihydrochloride tab er 24hr 2.25 mg</i>	\$0 (Tier 4)	
<i>pramipexole dihydrochloride tab er 24hr 3 mg</i>	\$0 (Tier 4)	
<i>pramipexole dihydrochloride tab er 24hr 3.75 mg</i>	\$0 (Tier 4)	
<i>pramipexole dihydrochloride tab er 24hr 4.5 mg</i>	\$0 (Tier 4)	
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	\$0 (Tier 4)	QL (30 tabs / 30 days)
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	\$0 (Tier 4)	QL (30 tabs / 30 days)
<i>ropinirole hydrochloride tab 0.5 mg</i>	\$0 (Tier 2)	
<i>ropinirole hydrochloride tab 0.25 mg</i>	\$0 (Tier 2)	
<i>ropinirole hydrochloride tab 1 mg</i>	\$0 (Tier 2)	
<i>ropinirole hydrochloride tab 2 mg</i>	\$0 (Tier 2)	
<i>ropinirole hydrochloride tab 3 mg</i>	\$0 (Tier 2)	
<i>ropinirole hydrochloride tab 4 mg</i>	\$0 (Tier 2)	
<i>ropinirole hydrochloride tab 5 mg</i>	\$0 (Tier 2)	
<i>ropinirole hydrochloride tab er 24hr 2 mg (base equivalent)</i>	\$0 (Tier 4)	
<i>ropinirole hydrochloride tab er 24hr 4 mg (base equivalent)</i>	\$0 (Tier 4)	
<i>ropinirole hydrochloride tab er 24hr 6 mg (base equivalent)</i>	\$0 (Tier 4)	
<i>ropinirole hydrochloride tab er 24hr 8 mg (base equivalent)</i>	\$0 (Tier 4)	
<i>ropinirole hydrochloride tab er 24hr 12 mg (base equivalent)</i>	\$0 (Tier 4)	
<i>selegiline hcl cap 5 mg</i>	\$0 (Tier 3)	
<i>selegiline hcl tab 5 mg</i>	\$0 (Tier 3)	
<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i>	\$0 (Tier 3)	PA; PA applies if 70 years and older
<i>trihexyphenidyl hcl tab 2 mg</i>	\$0 (Tier 2)	PA; PA applies if 70 years and older
<i>trihexyphenidyl hcl tab 5 mg</i>	\$0 (Tier 2)	PA; PA applies if 70 years and older

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
ANTIPSYCHOTICS - DRUGS TO TREAT PSYCHOSES	
ABILIFY ASIM INJ 720MG	\$0 (Tier 5) NDS, QL (1 syringe / 56 days)
ABILIFY ASIM INJ 960MG	\$0 (Tier 5) NDS, QL (1 syringe / 56 days)
ABILIFY MAIN INJ 300MG	\$0 (Tier 5) NDS, QL (1 injection / 28 days)
ABILIFY MAIN INJ 300MG	\$0 (Tier 5) NDS, QL (1 syringe / 28 days)
ABILIFY MAIN INJ 400MG	\$0 (Tier 5) NDS, QL (1 injection / 28 days)
ABILIFY MAIN INJ 400MG	\$0 (Tier 5) NDS, QL (1 syringe / 28 days)
<i>aripiprazole oral solution 1 mg/ml</i>	\$0 (Tier 4) QL (900 mL / 30 days)
<i>aripiprazole orally disintegrating tab 10 mg</i>	\$0 (Tier 4) QL (60 tabs / 30 days), ST
<i>aripiprazole orally disintegrating tab 15 mg</i>	\$0 (Tier 4) QL (60 tabs / 30 days), ST
<i>aripiprazole tab 2 mg</i>	\$0 (Tier 4) QL (30 tabs / 30 days)
<i>aripiprazole tab 5 mg</i>	\$0 (Tier 4) QL (30 tabs / 30 days)
<i>aripiprazole tab 10 mg</i>	\$0 (Tier 4) QL (30 tabs / 30 days)
<i>aripiprazole tab 15 mg</i>	\$0 (Tier 4) QL (30 tabs / 30 days)
<i>aripiprazole tab 20 mg</i>	\$0 (Tier 4) QL (30 tabs / 30 days)
<i>aripiprazole tab 30 mg</i>	\$0 (Tier 4) QL (30 tabs / 30 days)
ARISTADA INJ 441MG/1.	\$0 (Tier 5) NDS, QL (1 syringe / 28 days)
ARISTADA INJ 662MG/2	\$0 (Tier 5) NDS, QL (1 syringe / 28 days)
ARISTADA INJ 882MG/3	\$0 (Tier 5) NDS, QL (1 syringe / 28 days)
ARISTADA INJ 1064MG	\$0 (Tier 5) NDS, QL (1 syringe / 56 days)
ARISTADA INJ INITIO	\$0 (Tier 5) NDS
<i>asenapine maleate sl tab 2.5 mg (base equiv)</i>	\$0 (Tier 4) QL (60 tabs / 30 days)
<i>asenapine maleate sl tab 5 mg (base equiv)</i>	\$0 (Tier 4) QL (60 tabs / 30 days)
<i>asenapine maleate sl tab 10 mg (base equiv)</i>	\$0 (Tier 4) QL (60 tabs / 30 days)
CAPLYTA CAP 10.5MG	\$0 (Tier 5) NDS, QL (30 caps / 30 days)

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
CAPLYTA CAP 21MG	\$0 (Tier 5)	NDS, QL (30 caps / 30 days)
CAPLYTA CAP 42MG	\$0 (Tier 5)	NDS, QL (30 caps / 30 days)
<i>chlorpromazine hcl conc 30 mg/ml</i>	\$0 (Tier 4)	
<i>chlorpromazine hcl conc 100 mg/ml</i>	\$0 (Tier 4)	
<i>chlorpromazine hcl inj 25 mg/ml</i>	\$0 (Tier 4)	
<i>chlorpromazine hcl inj 50 mg/2ml</i>	\$0 (Tier 4)	
<i>chlorpromazine hcl tab 10 mg</i>	\$0 (Tier 4)	
<i>chlorpromazine hcl tab 25 mg</i>	\$0 (Tier 4)	
<i>chlorpromazine hcl tab 50 mg</i>	\$0 (Tier 4)	
<i>chlorpromazine hcl tab 100 mg</i>	\$0 (Tier 4)	
<i>chlorpromazine hcl tab 200 mg</i>	\$0 (Tier 4)	
<i>clozapine orally disintegrating tab 12.5 mg</i>	\$0 (Tier 4)	PA
<i>clozapine orally disintegrating tab 25 mg</i>	\$0 (Tier 4)	PA
<i>clozapine orally disintegrating tab 100 mg</i>	\$0 (Tier 4)	QL (270 tabs / 30 days), PA
<i>clozapine orally disintegrating tab 150 mg</i>	\$0 (Tier 4)	QL (180 tabs / 30 days), PA
<i>clozapine orally disintegrating tab 200 mg</i>	\$0 (Tier 4)	QL (120 tabs / 30 days), PA
<i>clozapine tab 25 mg</i>	\$0 (Tier 3)	
<i>clozapine tab 50 mg</i>	\$0 (Tier 3)	
<i>clozapine tab 100 mg</i>	\$0 (Tier 3)	QL (270 tabs / 30 days)
<i>clozapine tab 200 mg</i>	\$0 (Tier 3)	QL (120 tabs / 30 days)
COBENFY CAP 50-20MG	\$0 (Tier 5)	NDS, QL (60 caps / 30 days), PA
COBENFY CAP 100-20MG	\$0 (Tier 5)	NDS, QL (60 caps / 30 days), PA
COBENFY CAP 125-30MG	\$0 (Tier 5)	NDS, QL (60 caps / 30 days), PA
COBENFY STRT CAP PACK	\$0 (Tier 5)	NDS, QL (2 packs / year), PA
ERZOFRI INJ 39/0.25	\$0 (Tier 4)	QL (1 syringe / 28 days)
ERZOFRI INJ 78/0.5ML	\$0 (Tier 5)	NDS, QL (1 syringe / 28 days)
ERZOFRI INJ 117/0.75	\$0 (Tier 5)	NDS, QL (1 syringe / 28 days)
ERZOFRI INJ 156MG/ML	\$0 (Tier 5)	NDS, QL (1 syringe / 28 days)
ERZOFRI INJ 234/1.5	\$0 (Tier 5)	NDS, QL (1 syringe / 28 days)

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
ERZOFRI INJ 351/2.25	\$0 (Tier 5) NDS, QL (2 syringes / year)
FANAPT PAK PACK A	\$0 (Tier 4) QL (2 packs / year), PA
FANAPT PAK PACK B	\$0 (Tier 4) QL (2 packs / year), PA
FANAPT PAK PACK C	\$0 (Tier 4) QL (2 packs / year), PA
FANAPT TAB 1MG	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
FANAPT TAB 2MG	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
FANAPT TAB 4MG	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
FANAPT TAB 6MG	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
FANAPT TAB 8MG	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
FANAPT TAB 10MG	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
FANAPT TAB 12MG	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
<i>fluphenazine decanoate inj 25 mg/ml</i>	\$0 (Tier 4)
<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	\$0 (Tier 4)
<i>fluphenazine hcl inj 2.5 mg/ml</i>	\$0 (Tier 4)
<i>fluphenazine hcl oral conc 5 mg/ml</i>	\$0 (Tier 4)
<i>fluphenazine hcl tab 1 mg</i>	\$0 (Tier 4)
<i>fluphenazine hcl tab 2.5 mg</i>	\$0 (Tier 4)
<i>fluphenazine hcl tab 5 mg</i>	\$0 (Tier 4)
<i>fluphenazine hcl tab 10 mg</i>	\$0 (Tier 4)
<i>haloperidol decanoate im soln 50 mg/ml</i>	\$0 (Tier 3)
<i>haloperidol decanoate im soln 100 mg/ml</i>	\$0 (Tier 3)
<i>haloperidol lactate inj 5 mg/ml</i>	\$0 (Tier 3)
<i>haloperidol lactate oral conc 2 mg/ml</i>	\$0 (Tier 3)
<i>haloperidol tab 0.5 mg</i>	\$0 (Tier 3)
<i>haloperidol tab 1 mg</i>	\$0 (Tier 3)
<i>haloperidol tab 2 mg</i>	\$0 (Tier 3)
<i>haloperidol tab 5 mg</i>	\$0 (Tier 3)
<i>haloperidol tab 10 mg</i>	\$0 (Tier 3)
<i>haloperidol tab 20 mg</i>	\$0 (Tier 3)
INVEGA HAFYE INJ 1092MG	\$0 (Tier 5) NDS, QL (1 injection / 180 days)
INVEGA HAFYE INJ 1560MG	\$0 (Tier 5) NDS, QL (1 injection / 180 days)

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
INVEGA SUST INJ 39/0.25	\$0 (Tier 4)	QL (1 syringe / 28 days)
INVEGA SUST INJ 78/0.5ML	\$0 (Tier 5)	NDS, QL (1 syringe / 28 days)
INVEGA SUST INJ 117/0.75	\$0 (Tier 5)	NDS, QL (1 syringe / 28 days)
INVEGA SUST INJ 156MG/ML	\$0 (Tier 5)	NDS, QL (1 syringe / 28 days)
INVEGA SUST INJ 234/1.5	\$0 (Tier 5)	NDS, QL (1 syringe / 28 days)
INVEGA TRINZ INJ 273MG	\$0 (Tier 5)	NDS, QL (1 syringe / 90 days)
INVEGA TRINZ INJ 410MG	\$0 (Tier 5)	NDS, QL (1 syringe / 90 days)
INVEGA TRINZ INJ 546MG	\$0 (Tier 5)	NDS, QL (1 syringe / 90 days)
INVEGA TRINZ INJ 819MG	\$0 (Tier 5)	NDS, QL (1 syringe / 90 days)
<i>loxapine succinate cap 5 mg</i>	\$0 (Tier 3)	
<i>loxapine succinate cap 10 mg</i>	\$0 (Tier 3)	
<i>loxapine succinate cap 25 mg</i>	\$0 (Tier 3)	
<i>loxapine succinate cap 50 mg</i>	\$0 (Tier 3)	
<i>lurasidone hcl tab 20 mg</i>	\$0 (Tier 4)	QL (30 tabs / 30 days)
<i>lurasidone hcl tab 40 mg</i>	\$0 (Tier 4)	QL (30 tabs / 30 days)
<i>lurasidone hcl tab 60 mg</i>	\$0 (Tier 4)	QL (30 tabs / 30 days)
<i>lurasidone hcl tab 80 mg</i>	\$0 (Tier 4)	QL (60 tabs / 30 days)
<i>lurasidone hcl tab 120 mg</i>	\$0 (Tier 4)	QL (30 tabs / 30 days)
LYBALVI TAB 5-10MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days)
LYBALVI TAB 10-10MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days)
LYBALVI TAB 15-10MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days)
LYBALVI TAB 20-10MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days)
<i>molindone hcl tab 5 mg</i>	\$0 (Tier 4)	
<i>molindone hcl tab 10 mg</i>	\$0 (Tier 4)	
<i>molindone hcl tab 25 mg</i>	\$0 (Tier 4)	
NUPLAZID CAP 34MG	\$0 (Tier 5)	NDS, QL (30 caps / 30 days), PA
NUPLAZID TAB 10MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
<i>olanzapine for im inj 10 mg</i>	\$0 (Tier 4)	QL (3 vials / 1 day)

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>olanzapine orally disintegrating tab 5 mg</i>	\$0 (Tier 4)	QL (30 tabs / 30 days), ST
<i>olanzapine orally disintegrating tab 10 mg</i>	\$0 (Tier 4)	QL (60 tabs / 30 days), ST
<i>olanzapine orally disintegrating tab 15 mg</i>	\$0 (Tier 4)	QL (30 tabs / 30 days), ST
<i>olanzapine orally disintegrating tab 20 mg</i>	\$0 (Tier 4)	QL (30 tabs / 30 days), ST
<i>olanzapine tab 2.5 mg</i>	\$0 (Tier 2)	QL (60 tabs / 30 days)
<i>olanzapine tab 5 mg</i>	\$0 (Tier 2)	QL (60 tabs / 30 days)
<i>olanzapine tab 7.5 mg</i>	\$0 (Tier 2)	QL (30 tabs / 30 days)
<i>olanzapine tab 10 mg</i>	\$0 (Tier 2)	QL (60 tabs / 30 days)
<i>olanzapine tab 15 mg</i>	\$0 (Tier 2)	QL (30 tabs / 30 days)
<i>olanzapine tab 20 mg</i>	\$0 (Tier 2)	QL (30 tabs / 30 days)
OPIPZA MIS 2MG	\$0 (Tier 5)	NDS, QL (30 films / 30 days), PA
OPIPZA MIS 5MG	\$0 (Tier 5)	NDS, QL (30 films / 30 days), PA
OPIPZA MIS 10MG	\$0 (Tier 5)	NDS, QL (90 films / 30 days), PA
<i>paliperidone tab er 24hr 1.5 mg</i>	\$0 (Tier 4)	QL (30 tabs / 30 days)
<i>paliperidone tab er 24hr 3 mg</i>	\$0 (Tier 4)	QL (30 tabs / 30 days)
<i>paliperidone tab er 24hr 6 mg</i>	\$0 (Tier 4)	QL (60 tabs / 30 days)
<i>paliperidone tab er 24hr 9 mg</i>	\$0 (Tier 4)	QL (30 tabs / 30 days)
<i>perphenazine tab 2 mg</i>	\$0 (Tier 3)	
<i>perphenazine tab 4 mg</i>	\$0 (Tier 3)	
<i>perphenazine tab 8 mg</i>	\$0 (Tier 3)	
<i>perphenazine tab 16 mg</i>	\$0 (Tier 3)	
<i>pimozide tab 1 mg</i>	\$0 (Tier 4)	
<i>pimozide tab 2 mg</i>	\$0 (Tier 4)	
<i>quetiapine fumarate tab 25 mg</i>	\$0 (Tier 2)	QL (180 tabs / 30 days)
<i>quetiapine fumarate tab 50 mg</i>	\$0 (Tier 2)	QL (90 tabs / 30 days)
<i>quetiapine fumarate tab 100 mg</i>	\$0 (Tier 2)	QL (90 tabs / 30 days)
<i>quetiapine fumarate tab 150 mg</i>	\$0 (Tier 2)	QL (90 tabs / 30 days)
<i>quetiapine fumarate tab 200 mg</i>	\$0 (Tier 2)	QL (90 tabs / 30 days)
<i>quetiapine fumarate tab 300 mg</i>	\$0 (Tier 2)	QL (60 tabs / 30 days)
<i>quetiapine fumarate tab 400 mg</i>	\$0 (Tier 2)	QL (60 tabs / 30 days)
<i>quetiapine fumarate tab er 24hr 50 mg</i>	\$0 (Tier 4)	QL (60 tabs / 30 days), PA
<i>quetiapine fumarate tab er 24hr 150 mg</i>	\$0 (Tier 4)	QL (30 tabs / 30 days), PA

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>quetiapine fumarate tab er 24hr 200 mg</i>	\$0 (Tier 4)	QL (30 tabs / 30 days), PA
<i>quetiapine fumarate tab er 24hr 300 mg</i>	\$0 (Tier 4)	QL (60 tabs / 30 days), PA
<i>quetiapine fumarate tab er 24hr 400 mg</i>	\$0 (Tier 4)	QL (60 tabs / 30 days), PA
REXULTI TAB 0.5MG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days)
REXULTI TAB 0.25MG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days)
REXULTI TAB 1MG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days)
REXULTI TAB 2MG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days)
REXULTI TAB 3MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days)
REXULTI TAB 4MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days)
<i>risperidone microspheres for im extended rel susp 12.5 mg</i>	\$0 (Tier 4)	QL (2 injections / 28 days)
<i>risperidone microspheres for im extended rel susp 25 mg</i>	\$0 (Tier 4)	QL (2 injections / 28 days)
<i>risperidone microspheres for im extended rel susp 37.5 mg</i>	\$0 (Tier 5)	NDS, QL (2 injections / 28 days)
<i>risperidone microspheres for im extended rel susp 50 mg</i>	\$0 (Tier 5)	NDS, QL (2 injections / 28 days)
<i>risperidone orally disintegrating tab 0.5 mg</i>	\$0 (Tier 4)	QL (90 tabs / 30 days), ST
<i>risperidone orally disintegrating tab 0.25 mg</i>	\$0 (Tier 4)	QL (90 tabs / 30 days), ST
<i>risperidone orally disintegrating tab 1 mg</i>	\$0 (Tier 4)	QL (60 tabs / 30 days), ST
<i>risperidone orally disintegrating tab 2 mg</i>	\$0 (Tier 4)	QL (60 tabs / 30 days), ST
<i>risperidone orally disintegrating tab 3 mg</i>	\$0 (Tier 4)	QL (60 tabs / 30 days), ST
<i>risperidone orally disintegrating tab 4 mg</i>	\$0 (Tier 4)	QL (120 tabs / 30 days), ST
<i>risperidone soln 1 mg/ml</i>	\$0 (Tier 3)	QL (240 mL / 30 days)
<i>risperidone tab 0.5 mg</i>	\$0 (Tier 2)	
<i>risperidone tab 0.25 mg</i>	\$0 (Tier 2)	
<i>risperidone tab 1 mg</i>	\$0 (Tier 2)	

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>risperidone tab 2 mg</i>	\$0 (Tier 2)
<i>risperidone tab 3 mg</i>	\$0 (Tier 2)
<i>risperidone tab 4 mg</i>	\$0 (Tier 2)
SECUADO DIS 3.8MG	\$0 (Tier 5) NDS, QL (30 patches / 30 days)
SECUADO DIS 5.7MG	\$0 (Tier 5) NDS, QL (30 patches / 30 days)
SECUADO DIS 7.6MG	\$0 (Tier 5) NDS, QL (30 patches / 30 days)
<i>thioridazine hcl tab 10 mg</i>	\$0 (Tier 3)
<i>thioridazine hcl tab 25 mg</i>	\$0 (Tier 3)
<i>thioridazine hcl tab 50 mg</i>	\$0 (Tier 3)
<i>thioridazine hcl tab 100 mg</i>	\$0 (Tier 3)
<i>thiothixene cap 1 mg</i>	\$0 (Tier 4)
<i>thiothixene cap 2 mg</i>	\$0 (Tier 4)
<i>thiothixene cap 5 mg</i>	\$0 (Tier 4)
<i>thiothixene cap 10 mg</i>	\$0 (Tier 4)
<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	\$0 (Tier 3)
<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	\$0 (Tier 3)
<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	\$0 (Tier 3)
<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	\$0 (Tier 3)
VERSACLOZ SUS 50MG/ML	\$0 (Tier 5) NDS, QL (600 mL / 30 days), PA
VRAYLAR CAP 1.5MG	\$0 (Tier 5) NDS, QL (60 caps / 30 days)
VRAYLAR CAP 3MG	\$0 (Tier 5) NDS, QL (30 caps / 30 days)
VRAYLAR CAP 4.5MG	\$0 (Tier 5) NDS, QL (30 caps / 30 days)
VRAYLAR CAP 6MG	\$0 (Tier 5) NDS, QL (30 caps / 30 days)
<i>ziprasidone hcl cap 20 mg</i>	\$0 (Tier 4) QL (60 caps / 30 days)
<i>ziprasidone hcl cap 40 mg</i>	\$0 (Tier 4) QL (60 caps / 30 days)
<i>ziprasidone hcl cap 60 mg</i>	\$0 (Tier 4) QL (60 caps / 30 days)
<i>ziprasidone hcl cap 80 mg</i>	\$0 (Tier 4) QL (60 caps / 30 days)
<i>ziprasidone mesylate for inj 20 mg (base equivalent)</i>	\$0 (Tier 4) QL (6 injections / 3 days)

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

NAME OF DRUG**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)**

ZYPREXA RELP INJ 210MG	\$0 (Tier 4) QL (2 vials / 28 days), PA
ZYPREXA RELP INJ 300MG	\$0 (Tier 5) NDS, QL (2 vials / 28 days), PA
ZYPREXA RELP INJ 405MG	\$0 (Tier 5) NDS, QL (1 vial / 28 days), PA

ANTISEIZURE AGENTS

APTiom TAB 200MG	\$0 (Tier 5) NDS, QL (30 tabs / 30 days)
APTiom TAB 400MG	\$0 (Tier 5) NDS, QL (30 tabs / 30 days)
APTiom TAB 600MG	\$0 (Tier 5) NDS, QL (60 tabs / 30 days)
APTiom TAB 800MG	\$0 (Tier 5) NDS, QL (60 tabs / 30 days)
BRIVIACT SOL 10MG/ML	\$0 (Tier 5) NDS, QL (600 mL / 30 days), PA
BRIVIACT TAB 10MG	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
BRIVIACT TAB 25MG	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
BRIVIACT TAB 50MG	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
BRIVIACT TAB 75MG	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
BRIVIACT TAB 100MG	\$0 (Tier 5) NDS, QL (60 tabs / 30 days), PA
<i>carbamazepine cap er 12hr 100 mg</i>	\$0 (Tier 4)
<i>carbamazepine cap er 12hr 200 mg</i>	\$0 (Tier 4)
<i>carbamazepine cap er 12hr 300 mg</i>	\$0 (Tier 4)
<i>carbamazepine chew tab 100 mg</i>	\$0 (Tier 3)
<i>carbamazepine chew tab 200 mg</i>	\$0 (Tier 4)
<i>carbamazepine susp 100 mg/5ml</i>	\$0 (Tier 4)
<i>carbamazepine tab 200 mg</i>	\$0 (Tier 3)
<i>carbamazepine tab er 12hr 100 mg</i>	\$0 (Tier 4)
<i>carbamazepine tab er 12hr 200 mg</i>	\$0 (Tier 4)
<i>carbamazepine tab er 12hr 400 mg</i>	\$0 (Tier 4)
<i>clobazam suspension 2.5 mg/ml</i>	\$0 (Tier 4) QL (480 mL / 30 days), PA
<i>clobazam tab 10 mg</i>	\$0 (Tier 4) QL (60 tabs / 30 days), PA

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>clobazam tab 20 mg</i>	\$0 (Tier 4)	QL (60 tabs / 30 days), PA
<i>clonazepam orally disintegrating tab 0.5 mg</i>	\$0 (Tier 3)	QL (90 tabs / 30 days)
<i>clonazepam orally disintegrating tab 0.25 mg</i>	\$0 (Tier 3)	QL (90 tabs / 30 days)
<i>clonazepam orally disintegrating tab 0.125 mg</i>	\$0 (Tier 3)	QL (90 tabs / 30 days)
<i>clonazepam orally disintegrating tab 1 mg</i>	\$0 (Tier 3)	QL (90 tabs / 30 days)
<i>clonazepam orally disintegrating tab 2 mg</i>	\$0 (Tier 3)	QL (300 tabs / 30 days)
<i>clonazepam tab 0.5 mg</i>	\$0 (Tier 2)	QL (90 tabs / 30 days)
<i>clonazepam tab 1 mg</i>	\$0 (Tier 2)	QL (90 tabs / 30 days)
<i>clonazepam tab 2 mg</i>	\$0 (Tier 2)	QL (300 tabs / 30 days)
<i>clorazepate dipotassium tab 3.75 mg</i>	\$0 (Tier 4)	QL (180 tabs / 30 days), PA; PA applies if 65 years and older
<i>clorazepate dipotassium tab 7.5 mg</i>	\$0 (Tier 4)	QL (180 tabs / 30 days), PA; PA applies if 65 years and older
<i>clorazepate dipotassium tab 15 mg</i>	\$0 (Tier 4)	QL (180 tabs / 30 days), PA; PA applies if 65 years and older
DIACOMIT CAP 250MG	\$0 (Tier 5)	NDS, QL (360 caps / 30 days), PA
DIACOMIT CAP 500MG	\$0 (Tier 5)	NDS, QL (180 caps / 30 days), PA
DIACOMIT PAK 250MG	\$0 (Tier 5)	NDS, QL (360 packets / 30 days), PA
DIACOMIT PAK 500MG	\$0 (Tier 5)	NDS, QL (180 packets / 30 days), PA
<i>diazepam inj</i>	\$0 (Tier 4)	
<i>diazepam intensol</i>	\$0 (Tier 3)	QL (240 mL / 30 days), PA; PA applies if 65 years and older when greater than 5 day supply
<i>diazepam oral soln 1 mg/ml</i>	\$0 (Tier 3)	QL (1200 mL / 30 days), PA; PA applies if 65 years and older when greater than 5 day supply
<i>diazepam rectal gel delivery system 2.5 mg</i>	\$0 (Tier 4)	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>diazepam rectal gel delivery system 10 mg</i>	\$0 (Tier 4)	
<i>diazepam rectal gel delivery system 20 mg</i>	\$0 (Tier 4)	
<i>diazepam tab 2 mg</i>	\$0 (Tier 2)	QL (120 tabs / 30 days), PA; PA applies if 65 years and older when greater than 5 day supply
<i>diazepam tab 5 mg</i>	\$0 (Tier 2)	QL (120 tabs / 30 days), PA; PA applies if 65 years and older when greater than 5 day supply
<i>diazepam tab 10 mg</i>	\$0 (Tier 2)	QL (120 tabs / 30 days), PA; PA applies if 65 years and older when greater than 5 day supply
DILANTIN CAP 30MG	\$0 (Tier 4)	
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	\$0 (Tier 4)	
<i>divalproex sodium tab delayed release 125 mg</i>	\$0 (Tier 2)	
<i>divalproex sodium tab delayed release 250 mg</i>	\$0 (Tier 2)	
<i>divalproex sodium tab delayed release 500 mg</i>	\$0 (Tier 2)	
<i>divalproex sodium tab er 24 hr 250 mg</i>	\$0 (Tier 3)	
<i>divalproex sodium tab er 24 hr 500 mg</i>	\$0 (Tier 3)	
EPIDIOLEX SOL 100MG/ML	\$0 (Tier 5)	NDS, QL (600 mL / 30 days), PA
<i>epitol tab 200mg</i>	\$0 (Tier 3)	
EPRONTIA SOL 25MG/ML	\$0 (Tier 4)	QL (480 mL / 30 days), PA
<i>eslicarbazepine acetate tab 200 mg</i>	\$0 (Tier 4)	QL (30 tabs / 30 days)
<i>eslicarbazepine acetate tab 400 mg</i>	\$0 (Tier 4)	QL (30 tabs / 30 days)
<i>eslicarbazepine acetate tab 600 mg</i>	\$0 (Tier 4)	QL (60 tabs / 30 days)
<i>eslicarbazepine acetate tab 800 mg</i>	\$0 (Tier 4)	QL (60 tabs / 30 days)
<i>ethosuximide cap 250 mg</i>	\$0 (Tier 3)	
<i>ethosuximide soln 250 mg/5ml</i>	\$0 (Tier 3)	
<i>felbamate susp 600 mg/5ml</i>	\$0 (Tier 4)	
<i>felbamate tab 400 mg</i>	\$0 (Tier 4)	
<i>felbamate tab 600 mg</i>	\$0 (Tier 4)	

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
FINTEPLA SOL 2.2MG/ML	\$0 (Tier 5)	NDS, QL (360 mL / 30 days), PA
FYCOMPA SUS 0.5MG/ML	\$0 (Tier 5)	NDS, QL (720 mL / 30 days), PA
FYCOMPA TAB 2MG	\$0 (Tier 4)	QL (60 tabs / 30 days), PA
FYCOMPA TAB 4MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
FYCOMPA TAB 6MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
FYCOMPA TAB 8MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
FYCOMPA TAB 10MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
FYCOMPA TAB 12MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
<i>gabapentin cap 100 mg</i>	\$0 (Tier 2)	QL (360 caps / 30 days)
<i>gabapentin cap 300 mg</i>	\$0 (Tier 2)	QL (360 caps / 30 days)
<i>gabapentin cap 400 mg</i>	\$0 (Tier 2)	QL (270 caps / 30 days)
<i>gabapentin oral soln 250 mg/5ml</i>	\$0 (Tier 3)	QL (2160 mL / 30 days)
<i>gabapentin tab 600 mg</i>	\$0 (Tier 2)	QL (180 tabs / 30 days)
<i>gabapentin tab 800 mg</i>	\$0 (Tier 2)	QL (120 tabs / 30 days)
<i>lacosamide iv inj 200 mg/20ml (10 mg/ml)</i>	\$0 (Tier 4)	
<i>lacosamide oral</i>	\$0 (Tier 4)	QL (1200 mL / 30 days)
<i>lacosamide tab 50 mg</i>	\$0 (Tier 4)	QL (120 tabs / 30 days)
<i>lacosamide tab 100 mg</i>	\$0 (Tier 4)	QL (60 tabs / 30 days)
<i>lacosamide tab 150 mg</i>	\$0 (Tier 4)	QL (60 tabs / 30 days)
<i>lacosamide tab 200 mg</i>	\$0 (Tier 4)	QL (60 tabs / 30 days)
<i>lamotrigine orally disintegrating tab 25 mg</i>	\$0 (Tier 4)	ST
<i>lamotrigine orally disintegrating tab 50 mg</i>	\$0 (Tier 4)	ST
<i>lamotrigine orally disintegrating tab 100 mg</i>	\$0 (Tier 4)	ST
<i>lamotrigine orally disintegrating tab 200 mg</i>	\$0 (Tier 4)	ST
<i>lamotrigine tab 25 mg</i>	\$0 (Tier 1)	
<i>lamotrigine tab 100 mg</i>	\$0 (Tier 1)	
<i>lamotrigine tab 150 mg</i>	\$0 (Tier 1)	
<i>lamotrigine tab 200 mg</i>	\$0 (Tier 1)	
<i>lamotrigine tab chewable dispersible 5 mg</i>	\$0 (Tier 3)	
<i>lamotrigine tab chewable dispersible 25 mg</i>	\$0 (Tier 3)	
<i>lamotrigine tab er 24hr 25 mg</i>	\$0 (Tier 4)	ST

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>lamotrigine tab er 24hr 50 mg</i>	\$0 (Tier 4) ST
<i>lamotrigine tab er 24hr 100 mg</i>	\$0 (Tier 4) ST
<i>lamotrigine tab er 24hr 200 mg</i>	\$0 (Tier 4) ST
<i>lamotrigine tab er 24hr 250 mg</i>	\$0 (Tier 4) ST
<i>lamotrigine tab er 24hr 300 mg</i>	\$0 (Tier 4) ST
LEVETIRACETA TAB 250MG	\$0 (Tier 4) QL (360 tabs / 30 days)
<i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i>	\$0 (Tier 4)
<i>levetiracetam in sodium chloride iv soln 1000 mg/100ml</i>	\$0 (Tier 4)
<i>levetiracetam in sodium chloride iv soln 1500 mg/100ml</i>	\$0 (Tier 4)
<i>levetiracetam inj 500 mg/5ml (100 mg/ml)</i>	\$0 (Tier 4)
<i>levetiracetam oral soln 100 mg/ml</i>	\$0 (Tier 3)
<i>levetiracetam tab 250 mg</i>	\$0 (Tier 2)
<i>levetiracetam tab 500 mg</i>	\$0 (Tier 2)
<i>levetiracetam tab 750 mg</i>	\$0 (Tier 2)
<i>levetiracetam tab 1000 mg</i>	\$0 (Tier 2)
<i>levetiracetam tab er 24hr 500 mg</i>	\$0 (Tier 3)
<i>levetiracetam tab er 24hr 750 mg</i>	\$0 (Tier 3)
<i>methsuximide cap 300 mg</i>	\$0 (Tier 4)
NAYZILAM SPR 5MG	\$0 (Tier 4) QL (10 nasal units / 30 days)
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i>	\$0 (Tier 4)
<i>oxcarbazepine tab 150 mg</i>	\$0 (Tier 3)
<i>oxcarbazepine tab 300 mg</i>	\$0 (Tier 3)
<i>oxcarbazepine tab 600 mg</i>	\$0 (Tier 3)
<i>perampanel tab 2 mg</i>	\$0 (Tier 4) QL (60 tabs / 30 days), PA
<i>perampanel tab 4 mg</i>	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
<i>perampanel tab 6 mg</i>	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
<i>perampanel tab 8 mg</i>	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
<i>perampanel tab 10 mg</i>	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
<i>perampanel tab 12 mg</i>	\$0 (Tier 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 the beginning of this table.

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>phenobarbital elixir 20 mg/5ml</i>	\$0 (Tier 4)	QL (1500 mL / 30 days), PA; PA applies if 70 years and older
<i>phenobarbital sodium inj 65 mg/ml</i>	\$0 (Tier 4)	PA; PA applies if 70 years and older
<i>phenobarbital sodium inj 130 mg/ml</i>	\$0 (Tier 4)	PA; PA applies if 70 years and older
<i>phenobarbital tab 15 mg</i>	\$0 (Tier 3)	QL (120 tabs / 30 days), PA; PA applies if 70 years and older
<i>phenobarbital tab 16.2 mg</i>	\$0 (Tier 3)	QL (120 tabs / 30 days), PA; PA applies if 70 years and older
<i>phenobarbital tab 30 mg</i>	\$0 (Tier 3)	QL (120 tabs / 30 days), PA; PA applies if 70 years and older
<i>phenobarbital tab 32.4 mg</i>	\$0 (Tier 3)	QL (120 tabs / 30 days), PA; PA applies if 70 years and older
<i>phenobarbital tab 60 mg</i>	\$0 (Tier 3)	QL (120 tabs / 30 days), PA; PA applies if 70 years and older
<i>phenobarbital tab 64.8 mg</i>	\$0 (Tier 3)	QL (120 tabs / 30 days), PA; PA applies if 70 years and older
<i>phenobarbital tab 97.2 mg</i>	\$0 (Tier 3)	QL (120 tabs / 30 days), PA; PA applies if 70 years and older
<i>phenobarbital tab 100 mg</i>	\$0 (Tier 3)	QL (120 tabs / 30 days), PA; PA applies if 70 years and older
<i>phenytek</i>	\$0 (Tier 3)	
<i>phenytoin chew tab 50 mg</i>	\$0 (Tier 3)	
<i>phenytoin sodium extended cap 100 mg</i>	\$0 (Tier 3)	
<i>phenytoin sodium extended cap 200 mg</i>	\$0 (Tier 3)	
<i>phenytoin sodium extended cap 300 mg</i>	\$0 (Tier 3)	
<i>phenytoin sodium inj 50 mg/ml</i>	\$0 (Tier 3)	
<i>phenytoin susp 125 mg/5ml</i>	\$0 (Tier 3)	
<i>pregabalin cap 25 mg</i>	\$0 (Tier 3)	QL (120 caps / 30 days), PA
<i>pregabalin cap 50 mg</i>	\$0 (Tier 3)	QL (120 caps / 30 days), PA

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NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>pregabalin cap 75 mg</i>	\$0 (Tier 3)	QL (120 caps / 30 days), PA
<i>pregabalin cap 100 mg</i>	\$0 (Tier 3)	QL (120 caps / 30 days), PA
<i>pregabalin cap 150 mg</i>	\$0 (Tier 3)	QL (120 caps / 30 days), PA
<i>pregabalin cap 200 mg</i>	\$0 (Tier 3)	QL (90 caps / 30 days), PA
<i>pregabalin cap 225 mg</i>	\$0 (Tier 3)	QL (60 caps / 30 days), PA
<i>pregabalin cap 300 mg</i>	\$0 (Tier 3)	QL (60 caps / 30 days), PA
<i>pregabalin soln 20 mg/ml</i>	\$0 (Tier 4)	QL (900 mL / 30 days), PA
<i>primidone tab 50 mg</i>	\$0 (Tier 2)	
<i>primidone tab 125 mg</i>	\$0 (Tier 2)	
<i>primidone tab 250 mg</i>	\$0 (Tier 2)	
<i>roweepra</i>	\$0 (Tier 2)	
<i>rufinamide susp 40 mg/ml</i>	\$0 (Tier 5)	NDS, QL (2400 mL / 30 days), PA
<i>rufinamide tab 200 mg</i>	\$0 (Tier 4)	QL (480 tabs / 30 days), PA
<i>rufinamide tab 400 mg</i>	\$0 (Tier 5)	NDS, QL (240 tabs / 30 days), PA
SPRITAM TAB 250MG	\$0 (Tier 4)	QL (360 tabs / 30 days)
SPRITAM TAB 500MG	\$0 (Tier 4)	QL (180 tabs / 30 days)
SPRITAM TAB 750MG	\$0 (Tier 4)	QL (120 tabs / 30 days)
SPRITAM TAB 1000MG	\$0 (Tier 4)	QL (90 tabs / 30 days)
<i>subvenite</i>	\$0 (Tier 1)	
SYMPAZAN MIS 5MG	\$0 (Tier 5)	NDS, QL (60 films / 30 days), PA
SYMPAZAN MIS 10MG	\$0 (Tier 5)	NDS, QL (60 films / 30 days), PA
SYMPAZAN MIS 20MG	\$0 (Tier 5)	NDS, QL (60 films / 30 days), PA
<i>tiagabine hcl tab 2 mg</i>	\$0 (Tier 4)	
<i>tiagabine hcl tab 4 mg</i>	\$0 (Tier 4)	
<i>tiagabine hcl tab 12 mg</i>	\$0 (Tier 4)	
<i>tiagabine hcl tab 16 mg</i>	\$0 (Tier 4)	
<i>topiramate oral soln 25 mg/ml</i>	\$0 (Tier 4)	QL (480 mL / 30 days), PA
<i>topiramate sprinkle cap 15 mg</i>	\$0 (Tier 3)	

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NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>topiramate sprinkle cap 25 mg</i>	\$0 (Tier 3)	
<i>topiramate sprinkle cap 50 mg</i>	\$0 (Tier 4)	
<i>topiramate tab 25 mg</i>	\$0 (Tier 2)	
<i>topiramate tab 50 mg</i>	\$0 (Tier 2)	
<i>topiramate tab 100 mg</i>	\$0 (Tier 2)	
<i>topiramate tab 200 mg</i>	\$0 (Tier 2)	
<i>valproate sodium inj 100 mg/ml</i>	\$0 (Tier 4)	
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	\$0 (Tier 3)	
<i>valproic acid cap 250 mg</i>	\$0 (Tier 3)	
VALTOCO SPR 5MG	\$0 (Tier 4)	QL (10 blister packs / 30 days)
VALTOCO SPR 10MG	\$0 (Tier 4)	QL (10 blister packs / 30 days)
VALTOCO SPR 15MG	\$0 (Tier 4)	QL (10 blister packs / 30 days)
VALTOCO SPR 20MG	\$0 (Tier 4)	QL (10 blister packs / 30 days)
<i>vigabatrin powd pack 500 mg</i>	\$0 (Tier 5)	NDS, QL (180 packets / 30 days), PA
<i>vigabatrin tab 500 mg</i>	\$0 (Tier 5)	NDS, QL (180 tabs / 30 days), PA
<i>vigadrone</i>	\$0 (Tier 5)	NDS, QL (180 packets / 30 days), PA
<i>vigadrone</i>	\$0 (Tier 5)	NDS, QL (180 tabs / 30 days), PA
VIGAFYDE SOL 100MG/ML	\$0 (Tier 5)	NDS, QL (900 mL / 30 days), PA
<i>vigpoder</i>	\$0 (Tier 5)	NDS, QL (180 packets / 30 days), PA
XCOPRI PAK 12.5-25	\$0 (Tier 4)	QL (28 tabs / 28 days)
XCOPRI PAK 50-100MG	\$0 (Tier 5)	NDS, QL (28 tabs / 28 days)
XCOPRI PAK 100-150	\$0 (Tier 5)	NDS, QL (56 tabs / 28 days)
XCOPRI PAK 150-200MG (MAINTENANCE)	\$0 (Tier 5)	NDS, QL (56 tabs / 28 days)
XCOPRI PAK 150-200MG (TITRATION)	\$0 (Tier 5)	NDS, QL (28 tabs / 28 days)
XCOPRI TAB 25MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days)

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
XCOPRI TAB 50MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days)
XCOPRI TAB 100MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days)
XCOPRI TAB 150MG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days)
XCOPRI TAB 200MG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days)
ZONISADE SUS 100MG/5	\$0 (Tier 5)	NDS, QL (900 mL / 30 days), PA
<i>zonisamide cap 25 mg</i>	\$0 (Tier 2)	
<i>zonisamide cap 50 mg</i>	\$0 (Tier 2)	
<i>zonisamide cap 100 mg</i>	\$0 (Tier 2)	
ZTALMY SUS 50MG/ML	\$0 (Tier 5)	NDS, QL (1100 mL / 30 days), PA

ATTENTION DEFICIT HYPERACTIVITY DISORDER - DRUGS TO TREAT ADHD

<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	\$0 (Tier 4)	QL (30 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	\$0 (Tier 4)	QL (30 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	\$0 (Tier 4)	QL (30 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	\$0 (Tier 4)	QL (30 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	\$0 (Tier 4)	QL (30 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	\$0 (Tier 4)	QL (30 caps / 30 days)
<i>amphetamine-dextroamphetamine tab 5 mg</i>	\$0 (Tier 3)	QL (60 tabs / 30 days)
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	\$0 (Tier 3)	QL (60 tabs / 30 days)
<i>amphetamine-dextroamphetamine tab 10 mg</i>	\$0 (Tier 3)	QL (60 tabs / 30 days)
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	\$0 (Tier 3)	QL (60 tabs / 30 days)
<i>amphetamine-dextroamphetamine tab 15 mg</i>	\$0 (Tier 3)	QL (60 tabs / 30 days)
<i>amphetamine-dextroamphetamine tab 20 mg</i>	\$0 (Tier 3)	QL (90 tabs / 30 days)

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>amphetamine-dextroamphetamine tab 30 mg</i>	\$0 (Tier 3)	QL (60 tabs / 30 days)
<i>atomoxetine hcl cap 10 mg (base equiv)</i>	\$0 (Tier 4)	QL (120 caps / 30 days)
<i>atomoxetine hcl cap 18 mg (base equiv)</i>	\$0 (Tier 4)	QL (120 caps / 30 days)
<i>atomoxetine hcl cap 25 mg (base equiv)</i>	\$0 (Tier 4)	QL (120 caps / 30 days)
<i>atomoxetine hcl cap 40 mg (base equiv)</i>	\$0 (Tier 4)	QL (60 caps / 30 days)
<i>atomoxetine hcl cap 60 mg (base equiv)</i>	\$0 (Tier 4)	QL (30 caps / 30 days)
<i>atomoxetine hcl cap 80 mg (base equiv)</i>	\$0 (Tier 4)	QL (30 caps / 30 days)
<i>atomoxetine hcl cap 100 mg (base equiv)</i>	\$0 (Tier 4)	QL (30 caps / 30 days)
<i>dexmethylphenidate hcl tab 2.5 mg</i>	\$0 (Tier 3)	QL (120 tabs / 30 days), PA
<i>dexmethylphenidate hcl tab 5 mg</i>	\$0 (Tier 3)	QL (120 tabs / 30 days), PA
<i>dexmethylphenidate hcl tab 10 mg</i>	\$0 (Tier 3)	QL (60 tabs / 30 days), PA
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i>	\$0 (Tier 3)	QL (30 tabs / 30 days), PA; PA applies if 70 years and older
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i>	\$0 (Tier 3)	QL (30 tabs / 30 days), PA; PA applies if 70 years and older
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	\$0 (Tier 3)	QL (60 tabs / 30 days), PA; PA applies if 70 years and older
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	\$0 (Tier 3)	QL (30 tabs / 30 days), PA; PA applies if 70 years and older
<i>lisdexamfetamine dimesylate cap 10 mg</i>	\$0 (Tier 4)	QL (60 caps / 30 days), PA
<i>lisdexamfetamine dimesylate cap 20 mg</i>	\$0 (Tier 4)	QL (60 caps / 30 days), PA
<i>lisdexamfetamine dimesylate cap 30 mg</i>	\$0 (Tier 4)	QL (60 caps / 30 days), PA
<i>lisdexamfetamine dimesylate cap 40 mg</i>	\$0 (Tier 4)	QL (30 caps / 30 days), PA
<i>lisdexamfetamine dimesylate cap 50 mg</i>	\$0 (Tier 4)	QL (30 caps / 30 days), PA
<i>lisdexamfetamine dimesylate cap 60 mg</i>	\$0 (Tier 4)	QL (30 caps / 30 days), PA
<i>lisdexamfetamine dimesylate cap 70 mg</i>	\$0 (Tier 4)	QL (30 caps / 30 days), PA

NAME OF DRUG**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)**

<i>lisdexamfetamine dimesylate chew tab 10 mg</i>	\$0 (Tier 4) QL (60 tabs / 30 days), PA
<i>lisdexamfetamine dimesylate chew tab 20 mg</i>	\$0 (Tier 4) QL (60 tabs / 30 days), PA
<i>lisdexamfetamine dimesylate chew tab 30 mg</i>	\$0 (Tier 4) QL (60 tabs / 30 days), PA
<i>lisdexamfetamine dimesylate chew tab 40 mg</i>	\$0 (Tier 4) QL (30 tabs / 30 days), PA
<i>lisdexamfetamine dimesylate chew tab 50 mg</i>	\$0 (Tier 4) QL (30 tabs / 30 days), PA
<i>lisdexamfetamine dimesylate chew tab 60 mg</i>	\$0 (Tier 4) QL (30 tabs / 30 days), PA
<i>methylphenidate hcl chew tab 2.5 mg</i>	\$0 (Tier 4) QL (180 tabs / 30 days), PA
<i>methylphenidate hcl chew tab 5 mg</i>	\$0 (Tier 4) QL (180 tabs / 30 days), PA
<i>methylphenidate hcl chew tab 10 mg</i>	\$0 (Tier 4) QL (180 tabs / 30 days), PA
<i>methylphenidate hcl soln 5 mg/5ml</i>	\$0 (Tier 4) QL (1800 mL / 30 days), PA
<i>methylphenidate hcl soln 10 mg/5ml</i>	\$0 (Tier 4) QL (900 mL / 30 days), PA
<i>methylphenidate hcl tab 5 mg</i>	\$0 (Tier 3) QL (180 tabs / 30 days), PA
<i>methylphenidate hcl tab 10 mg</i>	\$0 (Tier 3) QL (180 tabs / 30 days), PA
<i>methylphenidate hcl tab 20 mg</i>	\$0 (Tier 3) QL (90 tabs / 30 days), PA
<i>methylphenidate hcl tab er 10 mg</i>	\$0 (Tier 4) QL (90 tabs / 30 days), PA
<i>methylphenidate hcl tab er 20 mg</i>	\$0 (Tier 4) QL (90 tabs / 30 days), PA

HYPNOTICS - DRUGS TO TREAT INSOMNIA

DAYVIGO TAB 5MG	\$0 (Tier 3) QL (30 tabs / 30 days)
DAYVIGO TAB 10MG	\$0 (Tier 3) QL (30 tabs / 30 days)
<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i>	\$0 (Tier 3) QL (30 tabs / 30 days)
<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i>	\$0 (Tier 3) QL (30 tabs / 30 days)
<i>tasimelteon capsule 20 mg</i>	\$0 (Tier 5) NDS, QL (30 caps / 30 days), PA
<i>temazepam cap 7.5 mg</i>	\$0 (Tier 4) QL (30 caps / 30 days), PA; PA applies if 65 years and older

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>temazepam cap 15 mg</i>	\$0 (Tier 4)	QL (60 caps / 30 days), PA; PA applies if 65 years and older
<i>temazepam cap 30 mg</i>	\$0 (Tier 4)	QL (30 caps / 30 days), PA; PA applies if 65 years and older
<i>zolpidem tartrate tab 5 mg</i>	\$0 (Tier 2)	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>zolpidem tartrate tab 10 mg</i>	\$0 (Tier 2)	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>zolpidem tartrate tab er 6.25 mg</i>	\$0 (Tier 3)	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>zolpidem tartrate tab er 12.5 mg</i>	\$0 (Tier 3)	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year

MIGRAINE - DRUGS TO TREAT SEVERE HEADACHES

AIMOVIG INJ 70MG/ML	\$0 (Tier 3)	QL (1 pen / 30 days), PA
AIMOVIG INJ 140MG/ML	\$0 (Tier 3)	QL (1 pen / 30 days), PA
<i>dihydroergotamine mesylate inj 1 mg/ml</i>	\$0 (Tier 5)	NDS
<i>dihydroergotamine mesylate nasal spray 4 mg/ml</i>	\$0 (Tier 5)	NDS, QL (8 mL / 30 days), PA
EMGALITY INJ 100MG/ML	\$0 (Tier 3)	QL (3 syringes / 30 days), PA
EMGALITY INJ 120MG/ML	\$0 (Tier 3)	QL (2 pens / 30 days), PA
EMGALITY INJ 120MG/ML	\$0 (Tier 3)	QL (2 syringes / 30 days), PA
<i>ergotamine w/ caffeine tab 1-100 mg</i>	\$0 (Tier 3)	QL (40 tabs / 28 days), PA
<i>naratriptan hcl tab 1 mg (base equiv)</i>	\$0 (Tier 3)	QL (12 tabs / 30 days)
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	\$0 (Tier 3)	QL (12 tabs / 30 days)

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
NURTEC TAB 75MG ODT	\$0 (Tier 3)	QL (16 tabs / 30 days), PA
QULIPTA TAB 10MG	\$0 (Tier 3)	QL (30 tabs / 30 days), PA
QULIPTA TAB 30MG	\$0 (Tier 3)	QL (30 tabs / 30 days), PA
QULIPTA TAB 60MG	\$0 (Tier 3)	QL (30 tabs / 30 days), PA
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	\$0 (Tier 3)	QL (18 tabs / 30 days)
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	\$0 (Tier 3)	QL (18 tabs / 30 days)
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	\$0 (Tier 3)	QL (18 tabs / 30 days)
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	\$0 (Tier 3)	QL (18 tabs / 30 days)
<i>sumatriptan nasal spray 5 mg/act</i>	\$0 (Tier 4)	QL (24 units / 30 days)
<i>sumatriptan nasal spray 20 mg/act</i>	\$0 (Tier 4)	QL (12 units / 30 days)
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	\$0 (Tier 4)	QL (12 injections / 30 days)
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i>	\$0 (Tier 4)	QL (18 injections / 30 days)
<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i>	\$0 (Tier 4)	QL (12 injections / 30 days)
<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i>	\$0 (Tier 4)	QL (18 injections / 30 days)
<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i>	\$0 (Tier 4)	QL (12 injections / 30 days)
<i>sumatriptan succinate tab 25 mg</i>	\$0 (Tier 2)	QL (12 tabs / 30 days)
<i>sumatriptan succinate tab 50 mg</i>	\$0 (Tier 2)	QL (12 tabs / 30 days)
<i>sumatriptan succinate tab 100 mg</i>	\$0 (Tier 2)	QL (12 tabs / 30 days)
UBRELVY TAB 50MG	\$0 (Tier 3)	QL (16 tabs / 30 days), PA
UBRELVY TAB 100MG	\$0 (Tier 3)	QL (16 tabs / 30 days), PA
MISCELLANEOUS		
AUSTEDO TAB 6MG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
AUSTEDO TAB 9MG	\$0 (Tier 5)	NDS, QL (120 tabs / 30 days), PA
AUSTEDO TAB 12MG	\$0 (Tier 5)	NDS, QL (120 tabs / 30 days), PA

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
AUSTEDO XR TAB 6MG	\$0 (Tier 5)	NDS, QL (90 tabs / 30 days), PA
AUSTEDO XR TAB 12MG	\$0 (Tier 5)	NDS, QL (120 tabs / 30 days), PA
AUSTEDO XR TAB 18MG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
AUSTEDO XR TAB 24MG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
AUSTEDO XR TAB 30MG ER	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
AUSTEDO XR TAB 36MG ER	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
AUSTEDO XR TAB 42MG ER	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
AUSTEDO XR TAB 48MG ER	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
AUSTEDO XR TAB TITR KIT	\$0 (Tier 5)	NDS, QL (2 packs / year), PA
<i>gabapentin (once-daily) tab 300 mg</i>	\$0 (Tier 4)	QL (180 tabs / 30 days), PA
<i>gabapentin (once-daily) tab 600 mg</i>	\$0 (Tier 4)	QL (90 tabs / 30 days), PA
<i>lithium carbonate cap 150 mg</i>	\$0 (Tier 1)	
<i>lithium carbonate cap 300 mg</i>	\$0 (Tier 1)	
<i>lithium carbonate cap 600 mg</i>	\$0 (Tier 1)	
<i>lithium carbonate tab 300 mg</i>	\$0 (Tier 1)	
<i>lithium carbonate tab er 300 mg</i>	\$0 (Tier 2)	
<i>lithium carbonate tab er 450 mg</i>	\$0 (Tier 2)	
<i>lithium oral solution 8 meq/5ml</i>	\$0 (Tier 4)	
NUDEXTA CAP 20-10MG	\$0 (Tier 5)	NDS, QL (60 caps / 30 days), PA
<i>pyridostigmine bromide tab 60 mg</i>	\$0 (Tier 3)	
<i>riluzole tab 50 mg</i>	\$0 (Tier 4)	
<i>tetrabenazine tab 12.5 mg</i>	\$0 (Tier 5)	NDS, QL (90 tabs / 30 days), PA
<i>tetrabenazine tab 25 mg</i>	\$0 (Tier 5)	NDS, QL (120 tabs / 30 days), PA
MULTIPLE SCLEROSIS AGENTS - DRUGS TO TREAT MULTIPLE SCLEROSIS		
BAFIERTAM CAP 95MG	\$0 (Tier 5)	NDS, QL (120 caps / 30 days), PA

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
BETASERON INJ 0.3MG	\$0 (Tier 5)	NDS, QL (14 syringes / 28 days), PA
COPAXONE INJ 20MG/ML	\$0 (Tier 5)	NDS, QL (30 syringes / 30 days), PA
COPAXONE INJ 40MG/ML	\$0 (Tier 5)	NDS, QL (12 syringes / 28 days), PA
<i>dalfampridine tab er 12hr 10 mg</i>	\$0 (Tier 3)	QL (60 tabs / 30 days), PA
<i> fingolimod hcl cap 0.5 mg (base equiv)</i>	\$0 (Tier 5)	NDS, QL (30 caps / 30 days), PA
<i>glatiramer acetate soln prefilled syringe 20 mg/ml</i>	\$0 (Tier 5)	NDS, QL (30 syringes / 30 days), PA
<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	\$0 (Tier 5)	NDS, QL (12 syringes / 28 days), PA
<i>glatopa</i>	\$0 (Tier 5)	NDS, QL (12 syringes / 28 days), PA
<i>glatopa</i>	\$0 (Tier 5)	NDS, QL (30 syringes / 30 days), PA
KESIMPTA INJ 20/.4ML	\$0 (Tier 5)	NDS, QL (16 pens / 365 days), PA

MUSCULOSKELETAL THERAPY AGENTS - DRUGS TO TREAT MUSCLE SPASMS

<i>baclofen tab 5 mg</i>	\$0 (Tier 2)	QL (90 tabs / 30 days)
<i>baclofen tab 10 mg</i>	\$0 (Tier 2)	
<i>baclofen tab 20 mg</i>	\$0 (Tier 2)	
<i>cyclobenzaprine hcl tab 5 mg</i>	\$0 (Tier 3)	QL (90 tabs / 30 days), PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>cyclobenzaprine hcl tab 10 mg</i>	\$0 (Tier 3)	QL (90 tabs / 30 days), PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>dantrolene sodium cap 25 mg</i>	\$0 (Tier 4)	
<i>dantrolene sodium cap 50 mg</i>	\$0 (Tier 4)	
<i>dantrolene sodium cap 100 mg</i>	\$0 (Tier 4)	
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	\$0 (Tier 2)	
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	\$0 (Tier 2)	

NAME OF DRUG**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)****NARCOLEPSY/CATAPLEXY - DRUGS FOR SLEEP DISORDERS**

<i>armodafinil tab 50 mg</i>	\$0 (Tier 4) QL (60 tabs / 30 days), PA
<i>armodafinil tab 150 mg</i>	\$0 (Tier 4) QL (30 tabs / 30 days), PA
<i>armodafinil tab 200 mg</i>	\$0 (Tier 4) QL (30 tabs / 30 days), PA
<i>armodafinil tab 250 mg</i>	\$0 (Tier 4) QL (30 tabs / 30 days), PA
<i>modafinil tab 100 mg</i>	\$0 (Tier 3) QL (30 tabs / 30 days), PA
<i>modafinil tab 200 mg</i>	\$0 (Tier 3) QL (60 tabs / 30 days), PA
SOD OXYBATE SOL 500MG/ML	\$0 (Tier 5) NDS, QL (540 mL / 30 days), PA

PSYCHOTHERAPEUTIC-MISC

<i>acamprosate calcium tab delayed release 333 mg</i>	\$0 (Tier 4)
<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	\$0 (Tier 3) QL (90 tabs / 30 days)
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	\$0 (Tier 3) QL (90 tabs / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	\$0 (Tier 4) QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	\$0 (Tier 4) QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	\$0 (Tier 4) QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	\$0 (Tier 4) QL (60 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	\$0 (Tier 2) QL (90 tabs / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	\$0 (Tier 2) QL (90 tabs / 30 days)
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	\$0 (Tier 2) QL (60 tabs / 30 days)
<i>disulfiram tab 250 mg</i>	\$0 (Tier 3)
<i>disulfiram tab 500 mg</i>	\$0 (Tier 3)
KLOXXADO SPR 8MG	\$0 (Tier 3)
<i>naloxone hcl inj 0.4 mg/ml</i>	\$0 (Tier 2)
<i>naloxone hcl inj 4 mg/10ml</i>	\$0 (Tier 2)
<i>naloxone hcl nasal spray 4 mg/0.1ml</i>	\$0 (Tier 3)
<i>naloxone hcl soln cartridge 0.4 mg/ml</i>	\$0 (Tier 2)

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>naloxone hcl soln prefilled syringe 0.4 mg/ml</i>	\$0 (Tier 2)	
<i>naloxone hcl soln prefilled syringe 2 mg/2ml</i>	\$0 (Tier 2)	
<i>naltrexone hcl tab 50 mg</i>	\$0 (Tier 3)	
NICOTROL INH	\$0 (Tier 4)	
NICOTROL NS SPR 10MG/ML	\$0 (Tier 4)	
<i>varenicline tartrate tab 0.5 mg (base equiv)</i>	\$0 (Tier 4)	QL (56 tabs / 28 days)
<i>varenicline tartrate tab 1 mg (base equiv)</i>	\$0 (Tier 4)	QL (56 tabs / 28 days)
<i>varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack</i>	\$0 (Tier 4)	QL (2 packs / year)
VIVITROL INJ 380MG	\$0 (Tier 5)	NDS

ENDOCRINE AND METABOLIC - DRUGS TO TREAT DIABETES AND REGULATE HORMONES

ANDROGENS - DRUGS TO REGULATE MALE HORMONES

<i>danazol cap 50 mg</i>	\$0 (Tier 4)	
<i>danazol cap 100 mg</i>	\$0 (Tier 4)	
<i>danazol cap 200 mg</i>	\$0 (Tier 4)	
<i>depo-testosterone</i>	\$0 (Tier 3)	PA
<i>methyltestosterone cap 10 mg</i>	\$0 (Tier 5)	NDS, QL (600 caps / 30 days), PA
<i>testosterone cypionate im inj in oil 100 mg/ml</i>	\$0 (Tier 3)	PA
<i>testosterone cypionate im inj in oil 200 mg/ml</i>	\$0 (Tier 3)	PA
<i>testosterone enanthate im inj in oil 200 mg/ml</i>	\$0 (Tier 3)	PA
<i>testosterone pump</i>	\$0 (Tier 4)	QL (150 gm / 30 days), PA
<i>testosterone td gel 12.5 mg/act (1%)</i>	\$0 (Tier 4)	QL (300 gm / 30 days), PA
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	\$0 (Tier 4)	QL (300 gm / 30 days), PA
<i>testosterone td gel 50 mg/5gm (1%)</i>	\$0 (Tier 4)	QL (300 gm / 30 days), PA

ANTIDIABETICS

<i>acarbose tab 25 mg</i>	\$0 (Tier 3)	
<i>acarbose tab 50 mg</i>	\$0 (Tier 3)	
<i>acarbose tab 100 mg</i>	\$0 (Tier 3)	
FARXIGA TAB 5MG	\$0 (Tier 3)	QL (30 tabs / 30 days)

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
FARXIGA TAB 10MG	\$0 (Tier 3)	QL (30 tabs / 30 days)
<i>glimepiride tab 1 mg</i>	\$0 (Tier 1)	QL (90 tabs / 30 days)
<i>glimepiride tab 2 mg</i>	\$0 (Tier 1)	QL (90 tabs / 30 days)
<i>glimepiride tab 4 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days)
<i>glipizide tab 5 mg</i>	\$0 (Tier 1)	QL (240 tabs / 30 days)
<i>glipizide tab 10 mg</i>	\$0 (Tier 1)	QL (120 tabs / 30 days)
<i>glipizide tab er 24hr 2.5 mg</i>	\$0 (Tier 1)	QL (90 tabs / 30 days)
<i>glipizide tab er 24hr 5 mg</i>	\$0 (Tier 1)	QL (90 tabs / 30 days)
<i>glipizide tab er 24hr 10 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days)
<i>glipizide xl</i>	\$0 (Tier 1)	QL (60 tabs / 30 days)
<i>glipizide xl</i>	\$0 (Tier 1)	QL (90 tabs / 30 days)
<i>glipizide-metformin hcl tab 2.5-250 mg</i>	\$0 (Tier 1)	QL (240 tabs / 30 days)
<i>glipizide-metformin hcl tab 2.5-500 mg</i>	\$0 (Tier 1)	QL (120 tabs / 30 days)
<i>glipizide-metformin hcl tab 5-500 mg</i>	\$0 (Tier 1)	QL (120 tabs / 30 days)
GLYXAMBI TAB 10-5 MG	\$0 (Tier 3)	QL (30 tabs / 30 days)
GLYXAMBI TAB 25-5 MG	\$0 (Tier 3)	QL (30 tabs / 30 days)
JANUMET TAB 50-500MG	\$0 (Tier 3)	QL (60 tabs / 30 days)
JANUMET TAB 50-1000	\$0 (Tier 3)	QL (60 tabs / 30 days)
JANUMET XR TAB 50-500MG	\$0 (Tier 3)	QL (60 tabs / 30 days)
JANUMET XR TAB 50-1000	\$0 (Tier 3)	QL (60 tabs / 30 days)
JANUMET XR TAB 100-1000	\$0 (Tier 3)	QL (30 tabs / 30 days)
JANUVIA TAB 25MG	\$0 (Tier 3)	QL (30 tabs / 30 days)
JANUVIA TAB 50MG	\$0 (Tier 3)	QL (30 tabs / 30 days)
JANUVIA TAB 100MG	\$0 (Tier 3)	QL (30 tabs / 30 days)
JARDIANCE TAB 10MG	\$0 (Tier 3)	QL (30 tabs / 30 days)
JARDIANCE TAB 25MG	\$0 (Tier 3)	QL (30 tabs / 30 days)
JENTADUETO TAB 2.5-500	\$0 (Tier 3)	QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-850	\$0 (Tier 3)	QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-1000	\$0 (Tier 3)	QL (60 tabs / 30 days)
JENTADUETO TAB XR 2.5-1000MG	\$0 (Tier 3)	QL (60 tabs / 30 days)
JENTADUETO TAB XR 5-1000MG	\$0 (Tier 3)	QL (30 tabs / 30 days)
<i>liraglutide soln pen-injector 18 mg/3ml (6 mg/ml)</i>	\$0 (Tier 2)	QL (3 pens / 30 days), PA
<i>metformin hcl oral soln 500 mg/5ml</i>	\$0 (Tier 2)	QL (765 mL / 30 days)
<i>metformin hcl tab 500 mg</i>	\$0 (Tier 1)	QL (150 tabs / 30 days)
<i>metformin hcl tab 850 mg</i>	\$0 (Tier 1)	QL (90 tabs / 30 days)
<i>metformin hcl tab 1000 mg</i>	\$0 (Tier 1)	QL (75 tabs / 30 days)
<i>metformin hcl tab er 24hr 500 mg</i>	\$0 (Tier 1)	QL (120 tabs / 30 days); (generic of GLUCOPHAGE XR)

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>metformin hcl tab er 24hr 750 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days); (generic of GLUCOPHAGE XR)
MOUNJARO INJ 2.5/0.5	\$0 (Tier 3)	QL (4 pens / 28 days), PA
MOUNJARO INJ 5MG/0.5	\$0 (Tier 3)	QL (4 pens / 28 days), PA
MOUNJARO INJ 7.5/0.5	\$0 (Tier 3)	QL (4 pens / 28 days), PA
MOUNJARO INJ 10MG/0.5	\$0 (Tier 3)	QL (4 pens / 28 days), PA
MOUNJARO INJ 12.5/0.5	\$0 (Tier 3)	QL (4 pens / 28 days), PA
MOUNJARO INJ 15MG/0.5	\$0 (Tier 3)	QL (4 pens / 28 days), PA
<i>nateglinide tab 60 mg</i>	\$0 (Tier 1)	QL (90 tabs / 30 days)
<i>nateglinide tab 120 mg</i>	\$0 (Tier 1)	QL (90 tabs / 30 days)
OZEMPIC (0.25 OR 0.5MG/DOSE)	\$0 (Tier 3)	QL (1 pen / 28 days), PA
OZEMPIC (1MG/DOSE)	\$0 (Tier 3)	QL (1 pen / 28 days), PA
OZEMPIC (2MG/DOSE)	\$0 (Tier 3)	QL (1 pen / 28 days), PA
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>pioglitazone hcl tab 30 mg (base equiv)</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>pioglitazone hcl tab 45 mg (base equiv)</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	\$0 (Tier 1)	QL (90 tabs / 30 days)
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	\$0 (Tier 1)	QL (90 tabs / 30 days)
<i>repaglinide tab 0.5 mg</i>	\$0 (Tier 1)	QL (120 tabs / 30 days)
<i>repaglinide tab 1 mg</i>	\$0 (Tier 1)	QL (120 tabs / 30 days)
<i>repaglinide tab 2 mg</i>	\$0 (Tier 1)	QL (240 tabs / 30 days)
RYBELSUS TAB 3MG	\$0 (Tier 3)	QL (30 tabs / 30 days), PA
RYBELSUS TAB 7MG	\$0 (Tier 3)	QL (30 tabs / 30 days), PA
RYBELSUS TAB 14MG	\$0 (Tier 3)	QL (30 tabs / 30 days), PA
SYNJARDY TAB 5-500MG	\$0 (Tier 3)	QL (120 tabs / 30 days)
SYNJARDY TAB 5-1000MG	\$0 (Tier 3)	QL (60 tabs / 30 days)
SYNJARDY TAB 12.5-500	\$0 (Tier 3)	QL (60 tabs / 30 days)
SYNJARDY TAB 12.5-1000MG	\$0 (Tier 3)	QL (60 tabs / 30 days)
SYNJARDY XR TAB 5-1000MG	\$0 (Tier 3)	QL (60 tabs / 30 days)
SYNJARDY XR TAB 10-1000	\$0 (Tier 3)	QL (60 tabs / 30 days)

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
SYNJARDY XR TAB 12.5-1000	\$0 (Tier 3)	QL (60 tabs / 30 days)
SYNJARDY XR TAB 25-1000	\$0 (Tier 3)	QL (30 tabs / 30 days)
TRADJENTA TAB 5MG	\$0 (Tier 3)	QL (30 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 5-2.5-1000MG	\$0 (Tier 3)	QL (60 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 10-5-1000MG	\$0 (Tier 3)	QL (30 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 12.5-2.5-1000MG	\$0 (Tier 3)	QL (60 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 25-5-1000MG	\$0 (Tier 3)	QL (30 tabs / 30 days)
TRULICITY INJ 0.75/0.5	\$0 (Tier 3)	QL (4 pens / 28 days), PA
TRULICITY INJ 1.5/0.5	\$0 (Tier 3)	QL (4 pens / 28 days), PA
TRULICITY INJ 3/0.5	\$0 (Tier 3)	QL (4 pens / 28 days), PA
TRULICITY INJ 4.5/0.5	\$0 (Tier 3)	QL (4 pens / 28 days), PA
XIGDUO XR TAB 2.5-1000	\$0 (Tier 3)	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-500MG	\$0 (Tier 3)	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-1000MG	\$0 (Tier 3)	QL (60 tabs / 30 days)
XIGDUO XR TAB 10-500MG	\$0 (Tier 3)	QL (30 tabs / 30 days)
XIGDUO XR TAB 10-1000	\$0 (Tier 3)	QL (30 tabs / 30 days)
ANTIDIABETICS, INSULINS		
ADMELOG INJ 100U/ML	\$0 (Tier 3)	
ADMELOG SOLO INJ 100U/ML	\$0 (Tier 3)	
AFREZZA POW 4-8 UNIT	\$0 (Tier 5)	NDS
AFREZZA POW 4-8-12	\$0 (Tier 5)	NDS
AFREZZA POW 4UNIT	\$0 (Tier 3)	
AFREZZA POW 8 UNIT	\$0 (Tier 3)	
AFREZZA POW 8-12UNIT	\$0 (Tier 5)	NDS
AFREZZA POW 12 UNIT	\$0 (Tier 5)	NDS
ALCOHOL SWABS: BD-EMBECTA/MHC/RUGBY	\$0 (Tier 3)	PA
APIDRA INJ SOLOSTAR	\$0 (Tier 3)	
APIDRA INJ U-100	\$0 (Tier 3)	
BASAGLAR INJ 100UNIT	\$0 (Tier 3)	
BASAGLAR INJ TEMPO PN	\$0 (Tier 3)	
CEQUR SIMPL KIT PATCH 2U (3-DAY)	\$0 (Tier 4)	QL (10 patches / 30 days), PA
CEQUR SIMPL KIT PATCH 2U (4-DAY)	\$0 (Tier 4)	QL (8 patches / 24 days), PA

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
CEQUR SIMPL MIS INSERTER	\$0 (Tier 4) QL (2 inserters / year), PA
FIASP FLEX INJ TOUCH	\$0 (Tier 3)
FIASP INJ 100/ML	\$0 (Tier 3)
FIASP PENFIL INJ U-100	\$0 (Tier 3)
FIASP PMPCRT INJ U-100	\$0 (Tier 3) B/D
GAUZE PADS 2" X 2"	\$0 (Tier 3) PA
GLARGIN YFGN INJ 100U/ML	\$0 (Tier 3)
GLARGIN YFGN SOL 100U/ML	\$0 (Tier 4)
HUMALOG INJ 100/ML	\$0 (Tier 3)
HUMALOG JR INJ 100/ML	\$0 (Tier 3)
HUMALOG KWIK INJ 100/ML	\$0 (Tier 3)
HUMALOG KWIK INJ 200/ML	\$0 (Tier 3)
HUMALOG MIX INJ 50/50KWP	\$0 (Tier 3)
HUMALOG MIX INJ 75/25KWP	\$0 (Tier 3)
HUMALOG MIX SUS 75/25	\$0 (Tier 3)
HUMALOG TMPO INJ 100/ML	\$0 (Tier 3)
HUMULIN INJ 70/30	\$0 (Tier 3)
HUMULIN INJ 70/30KWP	\$0 (Tier 3)
HUMULIN N INJ U-100	\$0 (Tier 3)
HUMULIN N INJ U-100KWP	\$0 (Tier 3)
HUMULIN R INJ U-100	\$0 (Tier 3)
HUMULIN R INJ U-500	\$0 (Tier 5) NDS; KWIKPEN
HUMULIN R INJ U-500	\$0 (Tier 5) NDS, B/D
INS ASP PROT INJ FLEXPEN	\$0 (Tier 4)
INS DEGL FLX INJ 100UNIT	\$0 (Tier 4)
INS DEGL FLX INJ 200UNIT	\$0 (Tier 4)
INSULIN ASPA INJ 70/30	\$0 (Tier 4)
INSULIN ASPA INJ 100/ML	\$0 (Tier 4)
INSULIN ASPA INJ FLEXPEN	\$0 (Tier 4)
INSULIN ASPA INJ PENFILL	\$0 (Tier 4)
INSULIN DEGL INJ 100UNIT	\$0 (Tier 4)
INSULIN GLAR INJ 300/ML	\$0 (Tier 4)
INSULIN LISP INJ 100/ML	\$0 (Tier 3)
INSULIN LISP INJ JUNIOR	\$0 (Tier 3)
INSULIN LISP INJ PROTAMIN	\$0 (Tier 3)
INSULIN PEN NEEDLES: BD-EMBECTA	\$0 (Tier 3) PA
INSULIN SAFETY NEEDLES: BD-EMBECTA	\$0 (Tier 3) PA
INSULIN SYRINGES: BD-EMBECTA	\$0 (Tier 3) PA
LANTUS INJ 100/ML	\$0 (Tier 3)

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
LANTUS SOLOS INJ 100/ML	\$0 (Tier 3)	
LYUMJEV INJ 100UT/ML	\$0 (Tier 3)	
LYUMJEV KWPN INJ 100UT/ML	\$0 (Tier 3)	
LYUMJEV KWPN INJ 200UT/ML	\$0 (Tier 3)	
LYUMJEV TMPO INJ 100UT/ML	\$0 (Tier 3)	
NOVOLIN70/30 INJ RELION	\$0 (Tier 3)	
NOVOLIN INJ 70/30	\$0 (Tier 3)	
NOVOLIN INJ 70/30 FP	\$0 (Tier 3)	
NOVOLIN N INJ 100 UNIT	\$0 (Tier 3)	
NOVOLIN N INJ RELION	\$0 (Tier 3)	
NOVOLIN N INJ U-100	\$0 (Tier 3)	
NOVOLIN R INJ 100 UNIT	\$0 (Tier 3)	
NOVOLIN R INJ RELION	\$0 (Tier 3)	
NOVOLIN R INJ U-100	\$0 (Tier 3)	
NOVOLOG INJ 100/ML	\$0 (Tier 3)	
NOVOLOG INJ FLEX REL	\$0 (Tier 3)	
NOVOLOG INJ FLEXPEN	\$0 (Tier 3)	
NOVOLOG INJ PENFILL	\$0 (Tier 3)	
NOVOLOG INJ RELION	\$0 (Tier 3)	
NOVOLOG MIX INJ 70/30	\$0 (Tier 3)	
NOVOLOG MIX INJ FLEX REL	\$0 (Tier 3)	
NOVOLOG MIX INJ FLEXPEN	\$0 (Tier 3)	
NOVOLOG RELI INJ 70/30	\$0 (Tier 3)	
OMNIPOD 5 DX KIT INT G7G6	\$0 (Tier 4)	QL (1 kit / year), PA
OMNIPOD 5 DX MIS POD G7G6	\$0 (Tier 4)	QL (15 pods / 30 days), PA
OMNIPOD 5 G7 KIT INTRO	\$0 (Tier 4)	QL (1 kit / year), PA
OMNIPOD 5 G7 MIS PODS	\$0 (Tier 4)	QL (15 pods / 30 days), PA
OMNIPOD 5 L2 KIT INTRO G6	\$0 (Tier 4)	QL (1 kit / year), PA
OMNIPOD 5 L2 MIS PODS G6	\$0 (Tier 4)	QL (15 pods / 30 days), PA
OMNIPOD DASH KIT INTRO	\$0 (Tier 4)	QL (1 kit / year), PA
OMNIPOD DASH MIS PODS	\$0 (Tier 4)	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 10UNT/DY	\$0 (Tier 4)	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 15UNT/DY	\$0 (Tier 4)	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 20UNT/DY	\$0 (Tier 4)	QL (15 pods / 30 days), PA

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NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
OMNIPOD GO KIT 25UNT/DY	\$0 (Tier 4)	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 30UNT/DY	\$0 (Tier 4)	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 35UNT/DY	\$0 (Tier 4)	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 40UNT/DY	\$0 (Tier 4)	QL (15 pods / 30 days), PA
OMNIPOD MIS CLASSIC	\$0 (Tier 4)	QL (15 pods / 30 days), PA
REZVOGLAR INJ 100UT/ML	\$0 (Tier 4)	
SEMGLEE INJ 100U/ML	\$0 (Tier 3)	
SOLQUA INJ 100/33	\$0 (Tier 3)	QL (5 pens / 25 days)
TOUJEO MAX INJ 300/ML	\$0 (Tier 3)	
TOUJEO SOLO INJ 300/ML	\$0 (Tier 3)	
TRESIBA FLEX INJ 100UNIT	\$0 (Tier 3)	
TRESIBA FLEX INJ 200UNIT	\$0 (Tier 3)	
TRESIBA INJ 100UNIT	\$0 (Tier 3)	
XULTOPHY INJ 100/3.6	\$0 (Tier 3)	QL (5 pens / 30 days)

CALCIUM REGULATORS

<i>alendronate sodium oral soln 70 mg/75ml</i>	\$0 (Tier 4)	ST
<i>alendronate sodium tab 10 mg</i>	\$0 (Tier 1)	
<i>alendronate sodium tab 35 mg</i>	\$0 (Tier 1)	
<i>alendronate sodium tab 70 mg</i>	\$0 (Tier 1)	
BONSITY INJ 560/2.24	\$0 (Tier 5)	NDS, PA
<i>calcitonin (salmon) spray</i>	\$0 (Tier 3)	B/D
<i>ibandronate sodium iv soln 3 mg/3ml (base equivalent)</i>	\$0 (Tier 4)	B/D, QL (1 injection / 90 days)
<i>ibandronate sodium tab 150 mg (base equivalent)</i>	\$0 (Tier 2)	B/D
<i>pamidronate disodium iv soln 3 mg/ml</i>	\$0 (Tier 3)	B/D
<i>pamidronate disodium iv soln 9 mg/ml</i>	\$0 (Tier 3)	B/D
PAMIDRONATE INJ 6MG/ML	\$0 (Tier 3)	B/D
PROLIA INJ 60MG/ML	\$0 (Tier 4)	QL (1 syringe / 180 days)
<i>risedronate sodium tab 5 mg</i>	\$0 (Tier 3)	
<i>risedronate sodium tab 30 mg</i>	\$0 (Tier 4)	
<i>risedronate sodium tab 35 mg</i>	\$0 (Tier 3)	
<i>risedronate sodium tab 150 mg</i>	\$0 (Tier 3)	
<i>risedronate sodium tab delayed release 35 mg</i>	\$0 (Tier 4)	ST

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
TERIPARATIDE INJ 560/2.24	\$0 (Tier 5)	NDS, PA; (ALVOGEN product)
WYOST INJ 120/1.7	\$0 (Tier 5)	NDS, PA
XGEVA INJ	\$0 (Tier 5)	NDS, PA
<i>zoledronic acid inj conc for iv infusion 4 mg/5ml</i>	\$0 (Tier 4)	B/D
<i>zoledronic acid iv soln 5 mg/100ml</i>	\$0 (Tier 4)	B/D
CHELATING AGENTS		
CHEMET CAP 100MG	\$0 (Tier 5)	NDS
<i>deferasirox granules packet 90 mg</i>	\$0 (Tier 5)	NDS, PA
<i>deferasirox granules packet 180 mg</i>	\$0 (Tier 5)	NDS, PA
<i>deferasirox granules packet 360 mg</i>	\$0 (Tier 5)	NDS, PA
<i>deferasirox tab 90 mg</i>	\$0 (Tier 3)	PA
<i>deferasirox tab 180 mg</i>	\$0 (Tier 4)	PA
<i>deferasirox tab 360 mg</i>	\$0 (Tier 4)	PA
<i>deferasirox tab for oral susp 125 mg</i>	\$0 (Tier 4)	PA
<i>deferasirox tab for oral susp 250 mg</i>	\$0 (Tier 5)	NDS, PA
<i>deferasirox tab for oral susp 500 mg</i>	\$0 (Tier 5)	NDS, PA
<i>kionex sus 15gm/60</i>	\$0 (Tier 3)	
LOKELMA PAK 5GM	\$0 (Tier 3)	
LOKELMA PAK 10GM	\$0 (Tier 3)	
<i>penicillamine tab 250 mg</i>	\$0 (Tier 5)	NDS
<i>sodium polystyrene sulfonate powder</i>	\$0 (Tier 3)	
<i>sps</i>	\$0 (Tier 3)	
<i>sps rectal</i>	\$0 (Tier 3)	
<i>trientine hcl cap 250 mg</i>	\$0 (Tier 5)	NDS, PA
CONTRACEPTIVES - DRUGS FOR BIRTH CONTROL		
<i>afirmelle</i>	\$0 (Tier 2)	
<i>altavera</i>	\$0 (Tier 3)	
<i>alyacen 1/35</i>	\$0 (Tier 3)	
<i>alyacen 7/7/7</i>	\$0 (Tier 3)	
<i>amethia tab</i>	\$0 (Tier 3)	
<i>amethyst</i>	\$0 (Tier 3)	
<i>apri</i>	\$0 (Tier 2)	
<i>aranelle</i>	\$0 (Tier 3)	
<i>ashlyna</i>	\$0 (Tier 3)	
<i>aubra eq</i>	\$0 (Tier 2)	
<i>aurovela 1/20</i>	\$0 (Tier 3)	
<i>aurovela 24 fe</i>	\$0 (Tier 3)	
<i>aurovela fe 1.5/30</i>	\$0 (Tier 2)	

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>aurovela fe 1/20</i>	\$0 (Tier 2)	
<i>aviane</i>	\$0 (Tier 2)	
<i>ayuna</i>	\$0 (Tier 3)	
<i>azurette</i>	\$0 (Tier 3)	
<i>balziva</i>	\$0 (Tier 3)	
<i>blisovi 24 fe</i>	\$0 (Tier 3)	
<i>blisovi fe 1.5/30</i>	\$0 (Tier 2)	
<i>briellyn</i>	\$0 (Tier 3)	
<i>camila</i>	\$0 (Tier 2)	
<i>camrese</i>	\$0 (Tier 3)	
<i>camrese lo</i>	\$0 (Tier 3)	
<i>chateal eq</i>	\$0 (Tier 3)	
<i>cryselle-28</i>	\$0 (Tier 3)	
<i>cyred eq</i>	\$0 (Tier 2)	
<i>dasetta 1/35</i>	\$0 (Tier 3)	
<i>dasetta 7/7/7</i>	\$0 (Tier 3)	
<i>daysee</i>	\$0 (Tier 3)	
<i>deblitane</i>	\$0 (Tier 2)	
DEPO-SQ PROV INJ 104	\$0 (Tier 3)	
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	\$0 (Tier 3)	
<i>dolishale</i>	\$0 (Tier 3)	
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i>	\$0 (Tier 3)	
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	\$0 (Tier 3)	
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	\$0 (Tier 3)	
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	\$0 (Tier 3)	
<i>elinest</i>	\$0 (Tier 3)	
<i>eluryng</i>	\$0 (Tier 3)	
<i>emzahh tab 0.35mg</i>	\$0 (Tier 2)	
<i>enilloring</i>	\$0 (Tier 3)	
<i>enpresse-28</i>	\$0 (Tier 2)	
<i>enskyce</i>	\$0 (Tier 2)	
<i>errin</i>	\$0 (Tier 2)	
<i>estarylla</i>	\$0 (Tier 2)	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	\$0 (Tier 2)	

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NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr</i>	\$0 (Tier 3)	
<i>falmina</i>	\$0 (Tier 2)	
<i>feirza tab 1.5/30</i>	\$0 (Tier 2)	
<i>feirza tab 1/20</i>	\$0 (Tier 2)	
<i>finzala</i>	\$0 (Tier 3)	
<i>galbriela chw</i>	\$0 (Tier 3)	
<i>hailey 1.5/30</i>	\$0 (Tier 3)	
<i>hailey 24 fe</i>	\$0 (Tier 3)	
<i>haloette</i>	\$0 (Tier 3)	
<i>heather</i>	\$0 (Tier 2)	
<i>iclevia</i>	\$0 (Tier 3)	
<i>incassia</i>	\$0 (Tier 2)	
<i>introvale</i>	\$0 (Tier 3)	
<i>isibloom</i>	\$0 (Tier 2)	
<i>jaimiess tab</i>	\$0 (Tier 3)	
<i>jasmiel</i>	\$0 (Tier 3)	
<i>jolessa</i>	\$0 (Tier 3)	
<i>juleber</i>	\$0 (Tier 2)	
<i>junel 1.5/30</i>	\$0 (Tier 3)	
<i>junel 1/20</i>	\$0 (Tier 3)	
<i>junel fe 1.5/30</i>	\$0 (Tier 2)	
<i>junel fe 1/20</i>	\$0 (Tier 2)	
<i>junel fe 24</i>	\$0 (Tier 3)	
<i>kaitlib fe</i>	\$0 (Tier 3)	
<i>kariva</i>	\$0 (Tier 3)	
<i>kelnor 1/35</i>	\$0 (Tier 2)	
<i>kelnor 1/50 tab</i>	\$0 (Tier 3)	
<i>kurvelo</i>	\$0 (Tier 3)	
<i>larin 1.5/30</i>	\$0 (Tier 3)	
<i>larin 1/20</i>	\$0 (Tier 3)	
<i>larin 24 fe</i>	\$0 (Tier 3)	
<i>larin fe 1.5/30</i>	\$0 (Tier 2)	
<i>larin fe 1/20</i>	\$0 (Tier 2)	
<i>layolis fe chw</i>	\$0 (Tier 3)	
<i>lessina</i>	\$0 (Tier 2)	
<i>levonest</i>	\$0 (Tier 2)	
<i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg</i>	\$0 (Tier 3)	
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	\$0 (Tier 3)	

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NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	\$0 (Tier 3)	
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	\$0 (Tier 3)	
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	\$0 (Tier 2)	
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	\$0 (Tier 3)	
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	\$0 (Tier 2)	
<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i>	\$0 (Tier 3)	
<i>levora 0.15/30-28</i>	\$0 (Tier 3)	
<i>LILETTA IUD 52MG</i>	\$0 (Tier 3)	
<i>loestrin 1.5/30-21</i>	\$0 (Tier 3)	
<i>loestrin 1/20-21</i>	\$0 (Tier 3)	
<i>loestrin fe 1.5/30</i>	\$0 (Tier 2)	
<i>loestrin fe 1/20</i>	\$0 (Tier 2)	
<i>lojaimiess tab</i>	\$0 (Tier 3)	
<i>loryna</i>	\$0 (Tier 3)	
<i>low-ogestrel</i>	\$0 (Tier 3)	
<i>luizza 1/20 tab</i>	\$0 (Tier 3)	
<i>luizza tab 1.5/30</i>	\$0 (Tier 3)	
<i>lutra</i>	\$0 (Tier 2)	
<i>lyleq</i>	\$0 (Tier 2)	
<i>lyza</i>	\$0 (Tier 2)	
<i>marlissa</i>	\$0 (Tier 3)	
<i>medroxyprogesterone acetate im susp 150 mg/ml</i>	\$0 (Tier 3)	
<i>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml</i>	\$0 (Tier 3)	
<i>meleya tab 0.35mg</i>	\$0 (Tier 2)	
<i>mibelas 24 fe</i>	\$0 (Tier 3)	
<i>microgestin 1.5/30</i>	\$0 (Tier 3)	
<i>microgestin 1/20</i>	\$0 (Tier 3)	
<i>microgestin fe 1.5/30</i>	\$0 (Tier 2)	
<i>microgestin fe 1/20</i>	\$0 (Tier 2)	
<i>mili</i>	\$0 (Tier 2)	
<i>mono-lynyah</i>	\$0 (Tier 2)	
<i>necon 0.5/35-28</i>	\$0 (Tier 3)	
<i>NEXPLANON IMP 68MG</i>	\$0 (Tier 3)	

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NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>nikki</i>	\$0 (Tier 3)	
<i>nora-be</i>	\$0 (Tier 2)	
<i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</i>	\$0 (Tier 3)	
<i>norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i>	\$0 (Tier 3)	
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	\$0 (Tier 3)	
<i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	\$0 (Tier 3)	
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>	\$0 (Tier 3)	
<i>norethindrone tab 0.35 mg</i>	\$0 (Tier 2)	
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	\$0 (Tier 2)	
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	\$0 (Tier 3)	
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	\$0 (Tier 3)	
<i>norlyroc</i>	\$0 (Tier 2)	
<i>nortrel 0.5/35 (28)</i>	\$0 (Tier 3)	
<i>nortrel 1/35 (21)</i>	\$0 (Tier 3)	
<i>nortrel 1/35 (28)</i>	\$0 (Tier 3)	
<i>nortrel 7/7/7</i>	\$0 (Tier 3)	
<i>nylia 1/35</i>	\$0 (Tier 3)	
<i>nylia 7/7/7</i>	\$0 (Tier 3)	
<i>ocella</i>	\$0 (Tier 3)	
<i>orquidea tab 0.35mg</i>	\$0 (Tier 2)	
<i>philith</i>	\$0 (Tier 3)	
<i>pimtrea</i>	\$0 (Tier 3)	
<i>portia-28</i>	\$0 (Tier 3)	
<i>reclipsen</i>	\$0 (Tier 2)	
<i>rivelsa</i>	\$0 (Tier 3)	
<i>rosyrah tab</i>	\$0 (Tier 3)	
<i>setlakin</i>	\$0 (Tier 3)	
<i>sharobel</i>	\$0 (Tier 2)	
<i>simliya</i>	\$0 (Tier 3)	
<i>simpesse</i>	\$0 (Tier 3)	
<i>sprintec 28</i>	\$0 (Tier 2)	
<i>sronyx</i>	\$0 (Tier 2)	
<i>syeda</i>	\$0 (Tier 3)	

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NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>tarina 24 fe</i>	\$0 (Tier 3)	
<i>tarina fe 1/20 eq</i>	\$0 (Tier 2)	
<i>tilia fe</i>	\$0 (Tier 3)	
<i>tri-estarylla</i>	\$0 (Tier 3)	
<i>tri-legest fe</i>	\$0 (Tier 3)	
<i>tri-linyah</i>	\$0 (Tier 3)	
<i>tri-lo-estarylla</i>	\$0 (Tier 3)	
<i>tri-lo-marzia</i>	\$0 (Tier 3)	
<i>tri-lo-mili</i>	\$0 (Tier 3)	
<i>tri-lo-sprintec</i>	\$0 (Tier 3)	
<i>tri-mili</i>	\$0 (Tier 3)	
<i>tri-nymyo tab</i>	\$0 (Tier 3)	
<i>tri-sprintec</i>	\$0 (Tier 3)	
<i>tri-vylibra</i>	\$0 (Tier 3)	
<i>tri-vylibra lo</i>	\$0 (Tier 3)	
<i>turqoz</i>	\$0 (Tier 3)	
<i>tydemy tab</i>	\$0 (Tier 3)	
<i>valtya 1/35 tab</i>	\$0 (Tier 2)	
<i>valtya 1/50 tab</i>	\$0 (Tier 3)	
<i>velivet</i>	\$0 (Tier 3)	
<i>vestura</i>	\$0 (Tier 3)	
<i>vienva</i>	\$0 (Tier 2)	
<i>viorele</i>	\$0 (Tier 3)	
<i>vyfemla</i>	\$0 (Tier 3)	
<i>vylibra</i>	\$0 (Tier 2)	
<i>wera</i>	\$0 (Tier 3)	
<i>wymzya fe</i>	\$0 (Tier 3)	
<i>xarah fe tab</i>	\$0 (Tier 3)	
<i>xelria fe chw 0.4mg-35</i>	\$0 (Tier 3)	
<i>xulane</i>	\$0 (Tier 3)	
<i>zafemy</i>	\$0 (Tier 3)	
<i>zovia 1/35</i>	\$0 (Tier 2)	
<i>zumandimine</i>	\$0 (Tier 3)	
ESTROGENS - DRUGS TO REGULATE FEMALE HORMONES		
<i>abigale lo tab 0.5-0.1</i>	\$0 (Tier 3)	
<i>abigale tab 1-0.5mg</i>	\$0 (Tier 3)	
<i>dotti</i>	\$0 (Tier 3)	
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	\$0 (Tier 3)	

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	\$0 (Tier 3)	
<i>estradiol tab 0.5 mg</i>	\$0 (Tier 2)	
<i>estradiol tab 1 mg</i>	\$0 (Tier 2)	
<i>estradiol tab 2 mg</i>	\$0 (Tier 2)	
<i>estradiol td patch twice weekly 0.1 mg/24hr</i>	\$0 (Tier 3)	
<i>estradiol td patch twice weekly 0.05 mg/24hr</i>	\$0 (Tier 3)	
<i>estradiol td patch twice weekly 0.025 mg/24hr</i>	\$0 (Tier 3)	
<i>estradiol td patch twice weekly 0.075 mg/24hr</i>	\$0 (Tier 3)	
<i>estradiol td patch twice weekly 0.0375 mg/24hr</i>	\$0 (Tier 3)	
<i>estradiol td patch weekly 0.1 mg/24hr</i>	\$0 (Tier 3)	
<i>estradiol td patch weekly 0.05 mg/24hr</i>	\$0 (Tier 3)	
<i>estradiol td patch weekly 0.06 mg/24hr</i>	\$0 (Tier 3)	
<i>estradiol td patch weekly 0.025 mg/24hr</i>	\$0 (Tier 3)	
<i>estradiol td patch weekly 0.075 mg/24hr</i>	\$0 (Tier 3)	
<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	\$0 (Tier 3)	
<i>estradiol vaginal cream 0.01%</i>	\$0 (Tier 3)	
<i>estradiol vaginal tab 10 mcg</i>	\$0 (Tier 4)	
<i>estradiol valerate im in oil 10 mg/ml</i>	\$0 (Tier 4)	
<i>estradiol valerate im in oil 20 mg/ml</i>	\$0 (Tier 4)	
<i>estradiol valerate im in oil 40 mg/ml</i>	\$0 (Tier 4)	
<i>fyavolv tab 0.5mg-2.5mcg</i>	\$0 (Tier 3)	
<i>fyavolv tab 1mg-5mcg</i>	\$0 (Tier 3)	
<i>jinteli</i>	\$0 (Tier 3)	
<i>lyllana</i>	\$0 (Tier 3)	
<i>mimvey</i>	\$0 (Tier 3)	
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	\$0 (Tier 3)	
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	\$0 (Tier 3)	
<i>yuvaferm</i>	\$0 (Tier 4)	
GLUCOCORTICOIDS - DRUGS TO TREAT INFLAMMATORY RESPONSE		
<i>DEXAMETHASON CON 1MG/ML</i>	\$0 (Tier 4)	
<i>dexamethasone elixir 0.5 mg/5ml</i>	\$0 (Tier 3)	

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>dexamethasone sod phos inj sol pref syr 10 mg/ml (pf)</i>	\$0 (Tier 3)	
<i>dexamethasone sod phosphate preservative free inj 10 mg/ml</i>	\$0 (Tier 3)	
<i>dexamethasone sodium phosphate inj 4 mg/ml</i>	\$0 (Tier 3)	
<i>dexamethasone sodium phosphate inj 10 mg/ml</i>	\$0 (Tier 3)	
<i>dexamethasone sodium phosphate inj 20 mg/5ml</i>	\$0 (Tier 3)	
<i>dexamethasone sodium phosphate inj 100 mg/10ml</i>	\$0 (Tier 3)	
<i>dexamethasone sodium phosphate inj 120 mg/30ml</i>	\$0 (Tier 3)	
<i>dexamethasone sodium phosphate inj soln pref syr 4 mg/ml</i>	\$0 (Tier 3)	
<i>dexamethasone soln 0.5 mg/5ml</i>	\$0 (Tier 3)	
<i>dexamethasone tab 0.5 mg</i>	\$0 (Tier 3)	
<i>dexamethasone tab 0.75 mg</i>	\$0 (Tier 3)	
<i>dexamethasone tab 1 mg</i>	\$0 (Tier 3)	
<i>dexamethasone tab 1.5 mg</i>	\$0 (Tier 3)	
<i>dexamethasone tab 2 mg</i>	\$0 (Tier 3)	
<i>dexamethasone tab 4 mg</i>	\$0 (Tier 3)	
<i>dexamethasone tab 6 mg</i>	\$0 (Tier 3)	
<i>fludrocortisone acetate tab 0.1 mg</i>	\$0 (Tier 2)	
<i>hydrocortisone sodium succinate pf for inj 100 mg</i>	\$0 (Tier 4)	
<i>hydrocortisone tab 5 mg</i>	\$0 (Tier 3)	
<i>hydrocortisone tab 10 mg</i>	\$0 (Tier 3)	
<i>hydrocortisone tab 20 mg</i>	\$0 (Tier 3)	
<i>methylprednisolone acetate inj susp 40 mg/ml</i>	\$0 (Tier 3) B/D	
<i>methylprednisolone acetate inj susp 80 mg/ml</i>	\$0 (Tier 3) B/D	
<i>methylprednisolone sod succ for inj 40 mg (base equiv)</i>	\$0 (Tier 3) B/D	
<i>methylprednisolone sod succ for inj 125 mg (base equiv)</i>	\$0 (Tier 3) B/D	
<i>methylprednisolone sod succ for inj 1000 mg (base equiv)</i>	\$0 (Tier 3) B/D	
<i>methylprednisolone tab 4 mg</i>	\$0 (Tier 3) B/D	
<i>methylprednisolone tab 8 mg</i>	\$0 (Tier 3) B/D	

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>methylprednisolone tab 16 mg</i>	\$0 (Tier 3) B/D
<i>methylprednisolone tab 32 mg</i>	\$0 (Tier 3) B/D
<i>methylprednisolone tab therapy pack 4 mg (21)</i>	\$0 (Tier 2)
<i>prednisolone sod phosphate oral soln 5 mg/5ml (base equiv)</i>	\$0 (Tier 4) B/D
<i>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</i>	\$0 (Tier 2) B/D
<i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</i>	\$0 (Tier 4) B/D
<i>prednisolone soln 15 mg/5ml</i>	\$0 (Tier 2) B/D
PREDNISON CON 5MG/ML	\$0 (Tier 4) B/D
<i>prednisone oral soln 5 mg/5ml</i>	\$0 (Tier 4) B/D
<i>prednisone tab 1 mg</i>	\$0 (Tier 1) B/D
<i>prednisone tab 2.5 mg</i>	\$0 (Tier 1) B/D
<i>prednisone tab 5 mg</i>	\$0 (Tier 1) B/D
<i>prednisone tab 10 mg</i>	\$0 (Tier 1) B/D
<i>prednisone tab 20 mg</i>	\$0 (Tier 1) B/D
<i>prednisone tab 50 mg</i>	\$0 (Tier 1) B/D
<i>prednisone tab therapy pack 5 mg (21)</i>	\$0 (Tier 3)
<i>prednisone tab therapy pack 5 mg (48)</i>	\$0 (Tier 3)
<i>prednisone tab therapy pack 10 mg (21)</i>	\$0 (Tier 3)
<i>prednisone tab therapy pack 10 mg (48)</i>	\$0 (Tier 3)
SOLU-CORTEF INJ 100MG	\$0 (Tier 4)
SOLU-CORTEF INJ 250MG	\$0 (Tier 4)
SOLU-CORTEF INJ 500MG	\$0 (Tier 4)
SOLU-CORTEF INJ 1000MG	\$0 (Tier 4)

GLUCOSE ELEVATING AGENTS - DRUGS TO TREAT LOW BLOOD SUGAR

BAQSIMI ONE POW 3MG/DOSE	\$0 (Tier 4)
<i>diazoxide susp 50 mg/ml</i>	\$0 (Tier 5) NDS
ZEGALOGUE INJ 0.6/0.6	\$0 (Tier 3)

MISCELLANEOUS

ALDURAZYME INJ 2.9MG/5M	\$0 (Tier 5) NDS, PA
<i>betaine powder for oral solution</i>	\$0 (Tier 5) NDS
<i>cabergoline tab 0.5 mg</i>	\$0 (Tier 3)
<i>carglumic acid soluble tab 200 mg</i>	\$0 (Tier 5) NDS, PA
CERDELGA CAP 84MG	\$0 (Tier 5) NDS, PA
CEREZYME INJ 400UNIT	\$0 (Tier 5) NDS, PA

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>cinacalcet hcl tab 30 mg (base equiv)</i>	\$0 (Tier 4) B/D, QL (60 tabs / 30 days)
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	\$0 (Tier 4) B/D, QL (60 tabs / 30 days)
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	\$0 (Tier 5) NDS, B/D, QL (120 tabs / 30 days)
CYSTAGON CAP 50MG	\$0 (Tier 4) PA
CYSTAGON CAP 150MG	\$0 (Tier 4) PA
<i>desmopressin acetate inj 4 mcg/ml</i>	\$0 (Tier 5) NDS
<i>desmopressin acetate nasal spray soln 0.01%</i>	\$0 (Tier 4)
<i>desmopressin acetate nasal spray soln 0.01% (refrigerated)</i>	\$0 (Tier 4)
<i>desmopressin acetate preservative free (pf) inj 4 mcg/ml</i>	\$0 (Tier 5) NDS
<i>desmopressin acetate tab 0.1 mg</i>	\$0 (Tier 3)
<i>desmopressin acetate tab 0.2 mg</i>	\$0 (Tier 3)
FABRAZYME INJ 5MG	\$0 (Tier 5) NDS, PA
FABRAZYME INJ 35MG	\$0 (Tier 5) NDS, PA
GENOTROPIN INJ 0.2MG	\$0 (Tier 3) PA
GENOTROPIN INJ 0.4MG	\$0 (Tier 5) NDS, PA
GENOTROPIN INJ 0.6MG	\$0 (Tier 5) NDS, PA
GENOTROPIN INJ 0.8MG	\$0 (Tier 5) NDS, PA
GENOTROPIN INJ 1.2MG	\$0 (Tier 5) NDS, PA
GENOTROPIN INJ 1.4MG	\$0 (Tier 5) NDS, PA
GENOTROPIN INJ 1.6MG	\$0 (Tier 5) NDS, PA
GENOTROPIN INJ 1.8MG	\$0 (Tier 5) NDS, PA
GENOTROPIN INJ 1MG	\$0 (Tier 5) NDS, PA
GENOTROPIN INJ 2MG	\$0 (Tier 5) NDS, PA
GENOTROPIN INJ 5MG	\$0 (Tier 5) NDS, PA
GENOTROPIN INJ 12MG	\$0 (Tier 5) NDS, PA
INCRELEX INJ 40MG/4ML	\$0 (Tier 5) NDS, PA
<i>javygtor</i>	\$0 (Tier 5) NDS, PA
<i>lanreotide acetate extended release inj 120 mg/0.5ml</i>	\$0 (Tier 5) NDS, PA
<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	\$0 (Tier 4) B/D
<i>levocarnitine tab 330 mg</i>	\$0 (Tier 4) B/D
LUMIZYME INJ 50MG	\$0 (Tier 5) NDS, PA
LUPR DEP-PED INJ 3M 30MG	\$0 (Tier 5) NDS, PA
LUPR DEP-PED INJ 7.5MG	\$0 (Tier 5) NDS, PA
LUPR DEP-PED INJ 11.25MG	\$0 (Tier 5) NDS, PA

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
LUPR DEP-PED INJ 15MG	\$0 (Tier 5) NDS, PA
LUPRON DEPOT INJ 45MG	\$0 (Tier 5) NDS, PA
<i>mifepristone tab 300 mg</i>	\$0 (Tier 5) NDS, PA
NAGLAZYME INJ 1MG/ML	\$0 (Tier 5) NDS, PA
<i>nitisinone cap 2 mg</i>	\$0 (Tier 5) NDS, PA
<i>nitisinone cap 5 mg</i>	\$0 (Tier 5) NDS, PA
<i>nitisinone cap 10 mg</i>	\$0 (Tier 5) NDS, PA
<i>nitisinone cap 20 mg</i>	\$0 (Tier 5) NDS, PA
<i>octreotide acetate inj 50 mcg/ml (0.05 mg/ml)</i>	\$0 (Tier 4) PA
<i>octreotide acetate inj 100 mcg/ml (0.1 mg/ml)</i>	\$0 (Tier 4) PA
<i>octreotide acetate inj 200 mcg/ml (0.2 mg/ml)</i>	\$0 (Tier 4) PA
<i>octreotide acetate inj 500 mcg/ml (0.5 mg/ml)</i>	\$0 (Tier 5) NDS, PA
<i>octreotide acetate inj 1000 mcg/ml (1 mg/ml)</i>	\$0 (Tier 5) NDS, PA
<i>octreotide acetate subcutaneous soln pref syr 50 mcg/ml</i>	\$0 (Tier 4) PA
<i>octreotide acetate subcutaneous soln pref syr 100 mcg/ml</i>	\$0 (Tier 4) PA
<i>octreotide acetate subcutaneous soln pref syr 500 mcg/ml</i>	\$0 (Tier 5) NDS, PA
<i>raloxifene hcl tab 60 mg</i>	\$0 (Tier 3)
<i>sapropterin dihydrochloride powder packet 100 mg</i>	\$0 (Tier 5) NDS, PA
<i>sapropterin dihydrochloride powder packet 500 mg</i>	\$0 (Tier 5) NDS, PA
<i>sapropterin dihydrochloride tab 100 mg</i>	\$0 (Tier 5) NDS, PA
SIGNIFOR INJ 0.3MG/ML	\$0 (Tier 5) NDS, PA
SIGNIFOR INJ 0.6MG/ML	\$0 (Tier 5) NDS, PA
SIGNIFOR INJ 0.9MG/ML	\$0 (Tier 5) NDS, PA
<i>sodium phenylbutyrate oral powder 3 gm/teaspoonful</i>	\$0 (Tier 5) NDS, PA
<i>sodium phenylbutyrate tab 500 mg</i>	\$0 (Tier 5) NDS, PA
SOMATULINE INJ 60/0.2ML	\$0 (Tier 5) NDS, PA
SOMATULINE INJ 90/0.3ML	\$0 (Tier 5) NDS, PA
SOMATULINE INJ 120/.5ML	\$0 (Tier 5) NDS, PA
SOMAVERT INJ 10MG	\$0 (Tier 5) NDS, PA
SOMAVERT INJ 15MG	\$0 (Tier 5) NDS, PA
SOMAVERT INJ 20MG	\$0 (Tier 5) NDS, PA

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
SOMAVERT INJ 25MG	\$0 (Tier 5) NDS, PA
SOMAVERT INJ 30MG	\$0 (Tier 5) NDS, PA
SYNAREL SOL 2MG/ML	\$0 (Tier 5) NDS, PA
VEOZAH TAB 45MG	\$0 (Tier 4) PA
<i>zelvysia pow 100mg</i>	\$0 (Tier 5) NDS, PA
<i>zelvysia pow 500mg</i>	\$0 (Tier 5) NDS, PA
PROGESTINS - DRUGS TO REGULATE FEMALE HORMONES	
<i>gallifrey tab 5mg</i>	\$0 (Tier 3)
<i>medroxyprogesterone acetate tab 2.5 mg</i>	\$0 (Tier 1)
<i>medroxyprogesterone acetate tab 5 mg</i>	\$0 (Tier 1)
<i>medroxyprogesterone acetate tab 10 mg</i>	\$0 (Tier 1)
<i>megestrol acetate susp 40 mg/ml</i>	\$0 (Tier 3)
<i>megestrol acetate susp 625 mg/5ml</i>	\$0 (Tier 4) PA
<i>norethindrone acetate tab 5 mg</i>	\$0 (Tier 3)
<i>progesterone cap 100 mg</i>	\$0 (Tier 3)
<i>progesterone cap 200 mg</i>	\$0 (Tier 3)
THYROID AGENTS - DRUGS TO REGULATE THYROID LEVELS	
<i>levo-t</i>	\$0 (Tier 1)
<i>levothyroxine sodium tab 25 mcg</i>	\$0 (Tier 1)
<i>levothyroxine sodium tab 50 mcg</i>	\$0 (Tier 1)
<i>levothyroxine sodium tab 75 mcg</i>	\$0 (Tier 1)
<i>levothyroxine sodium tab 88 mcg</i>	\$0 (Tier 1)
<i>levothyroxine sodium tab 100 mcg</i>	\$0 (Tier 1)
<i>levothyroxine sodium tab 112 mcg</i>	\$0 (Tier 1)
<i>levothyroxine sodium tab 125 mcg</i>	\$0 (Tier 1)
<i>levothyroxine sodium tab 137 mcg</i>	\$0 (Tier 1)
<i>levothyroxine sodium tab 150 mcg</i>	\$0 (Tier 1)
<i>levothyroxine sodium tab 175 mcg</i>	\$0 (Tier 1)
<i>levothyroxine sodium tab 200 mcg</i>	\$0 (Tier 1)
<i>levothyroxine sodium tab 300 mcg</i>	\$0 (Tier 1)
<i>levoxyl</i>	\$0 (Tier 1)
<i>liothyronine sodium tab 5 mcg</i>	\$0 (Tier 3)
<i>liothyronine sodium tab 25 mcg</i>	\$0 (Tier 3)
<i>liothyronine sodium tab 50 mcg</i>	\$0 (Tier 3)
<i>methimazole tab 5 mg</i>	\$0 (Tier 1)
<i>methimazole tab 10 mg</i>	\$0 (Tier 1)
<i>propylthiouracil tab 50 mg</i>	\$0 (Tier 3)
SYNTHROID TAB 25MCG	\$0 (Tier 4)
SYNTHROID TAB 50MCG	\$0 (Tier 4)
SYNTHROID TAB 75MCG	\$0 (Tier 4)

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

NAME OF DRUG**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)**

SYNTHROID TAB 88MCG	\$0 (Tier 4)
SYNTHROID TAB 100MCG	\$0 (Tier 4)
SYNTHROID TAB 112MCG	\$0 (Tier 4)
SYNTHROID TAB 125MCG	\$0 (Tier 4)
SYNTHROID TAB 137MCG	\$0 (Tier 4)
SYNTHROID TAB 150MCG	\$0 (Tier 4)
SYNTHROID TAB 175MCG	\$0 (Tier 4)
SYNTHROID TAB 200MCG	\$0 (Tier 4)
SYNTHROID TAB 300MCG	\$0 (Tier 4)
<i>unithroid</i>	\$0 (Tier 1)

VITAMIN D ANALOGS

<i>calcitriol (oral)</i>	\$0 (Tier 4) B/D
<i>calcitriol cap 0.5 mcg</i>	\$0 (Tier 2) B/D
<i>calcitriol cap 0.25 mcg</i>	\$0 (Tier 2) B/D
<i>doxercalciferol cap 0.5 mcg</i>	\$0 (Tier 4) B/D
<i>doxercalciferol cap 1 mcg</i>	\$0 (Tier 4) B/D
<i>doxercalciferol cap 2.5 mcg</i>	\$0 (Tier 4) B/D
<i>paricalcitol cap 1 mcg</i>	\$0 (Tier 4) B/D
<i>paricalcitol cap 2 mcg</i>	\$0 (Tier 4) B/D
<i>paricalcitol cap 4 mcg</i>	\$0 (Tier 4) B/D

GASTROINTESTINAL - DRUGS TO TREAT STOMACH AND INTESTINAL DISORDERS**ANTIEMETICS - DRUGS FOR NAUSEA AND VOMITING**

<i>aprepitant capsule 40 mg</i>	\$0 (Tier 4) B/D
<i>aprepitant capsule 80 mg</i>	\$0 (Tier 4) B/D
<i>aprepitant capsule 125 mg</i>	\$0 (Tier 4) B/D
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	\$0 (Tier 4) B/D
<i>compro</i>	\$0 (Tier 4)
<i>dronabinol cap 2.5 mg</i>	\$0 (Tier 4) B/D, QL (60 caps / 30 days)
<i>dronabinol cap 5 mg</i>	\$0 (Tier 4) B/D, QL (60 caps / 30 days)
<i>dronabinol cap 10 mg</i>	\$0 (Tier 4) B/D, QL (60 caps / 30 days)
<i>granisetron hcl inj 1 mg/ml</i>	\$0 (Tier 4)
<i>granisetron hcl inj 4 mg/4ml (1 mg/ml)</i>	\$0 (Tier 4)
<i>granisetron hcl tab 1 mg</i>	\$0 (Tier 4) B/D
<i>meclizine hcl tab 12.5 mg</i>	\$0 (Tier 2)
<i>meclizine hcl tab 25 mg</i>	\$0 (Tier 2)

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>metoclopramide hcl inj 5 mg/ml (base equivalent)</i>	\$0 (Tier 3)	
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	\$0 (Tier 3)	
<i>metoclopramide hcl tab 5 mg (base equivalent)</i>	\$0 (Tier 1)	
<i>metoclopramide hcl tab 10 mg (base equivalent)</i>	\$0 (Tier 1)	
<i>ondansetron hcl inj 4 mg/2ml (2 mg/ml)</i>	\$0 (Tier 3)	
<i>ondansetron hcl inj 40 mg/20ml (2 mg/ml)</i>	\$0 (Tier 3)	
<i>ondansetron hcl inj soln pref syr 4 mg/2ml</i>	\$0 (Tier 3)	
<i>ondansetron hcl oral soln 4 mg/5ml</i>	\$0 (Tier 4) B/D	
<i>ondansetron hcl tab 4 mg</i>	\$0 (Tier 3) B/D	
<i>ondansetron hcl tab 8 mg</i>	\$0 (Tier 3) B/D	
<i>ondansetron orally disintegrating tab 4 mg</i>	\$0 (Tier 3) B/D	
<i>ondansetron orally disintegrating tab 8 mg</i>	\$0 (Tier 3) B/D	
<i>prochlorperazine edisylate inj 10 mg/2ml</i>	\$0 (Tier 4)	
<i>prochlorperazine maleate tab 5 mg (base equivalent)</i>	\$0 (Tier 2)	
<i>prochlorperazine maleate tab 10 mg (base equivalent)</i>	\$0 (Tier 2)	
<i>prochlorperazine suppos 25 mg</i>	\$0 (Tier 4)	
<i>promethazine hcl inj 25 mg/ml</i>	\$0 (Tier 3)	PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>promethazine hcl inj 50 mg/ml</i>	\$0 (Tier 3)	PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>promethazine hcl oral soln 6.25 mg/5ml</i>	\$0 (Tier 3)	PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>promethazine hcl tab 12.5 mg</i>	\$0 (Tier 3)	PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>promethazine hcl tab 25 mg</i>	\$0 (Tier 3)	PA; PA applies if 70 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 the beginning of this table.

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>promethazine hcl tab 50 mg</i>	\$0 (Tier 3)	PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>scopolamine td patch 72hr 1 mg/3days</i>	\$0 (Tier 4)	QL (10 patches / 30 days), PA; PA applies if 70 years and older after a 30 day supply in a calendar year

ANTISPASMODICS - DRUGS FOR STOMACH SPASMS

<i>dicyclomine hcl cap 10 mg</i>	\$0 (Tier 3)	
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	\$0 (Tier 4)	
<i>dicyclomine hcl tab 20 mg</i>	\$0 (Tier 3)	
<i>glycopyrrolate tab 1 mg</i>	\$0 (Tier 3)	QL (90 tabs / 30 days)
<i>glycopyrrolate tab 2 mg</i>	\$0 (Tier 3)	QL (120 tabs / 30 days)

H2-RECEPTOR ANTAGONISTS - DRUGS FOR ULCERS AND STOMACH ACID

<i>famotidine for susp 40 mg/5ml</i>	\$0 (Tier 4)	
<i>famotidine in nacl 0.9% iv soln 20 mg/50ml</i>	\$0 (Tier 3)	
<i>famotidine inj 40 mg/4ml</i>	\$0 (Tier 3)	
<i>famotidine inj 200 mg/20ml</i>	\$0 (Tier 3)	
<i>famotidine preservative free inj 20 mg/2ml</i>	\$0 (Tier 3)	
<i>famotidine tab 20 mg</i>	\$0 (Tier 1)	
<i>famotidine tab 40 mg</i>	\$0 (Tier 1)	
<i>nizatidine cap 150 mg</i>	\$0 (Tier 4)	
<i>nizatidine cap 300 mg</i>	\$0 (Tier 4)	

INFLAMMATORY BOWEL DISEASE

<i>balsalazide disodium cap 750 mg</i>	\$0 (Tier 3)	
<i>budesonide delayed release particles cap 3 mg</i>	\$0 (Tier 4)	QL (90 caps / 30 days), PA
<i>budesonide tab er 24hr 9 mg</i>	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
<i>hydrocortisone enema 100 mg/60ml</i>	\$0 (Tier 4)	
<i>mesalamine cap dr 400 mg</i>	\$0 (Tier 4)	QL (180 caps / 30 days)
<i>mesalamine cap er 24hr 0.375 gm</i>	\$0 (Tier 4)	QL (120 caps / 30 days)
<i>mesalamine enema 4 gm</i>	\$0 (Tier 4)	QL (1680 mL / 28 days)
<i>mesalamine rectal enema 4 gm & cleanser wipe kit</i>	\$0 (Tier 4)	QL (28 bottles / 28 days)
<i>mesalamine suppos 1000 mg</i>	\$0 (Tier 4)	QL (30 suppositories / 30 days)

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>mesalamine tab delayed release 1.2 gm</i>	\$0 (Tier 4)	QL (120 tabs / 30 days)
<i>sulfasalazine tab 500 mg</i>	\$0 (Tier 2)	
<i>sulfasalazine tab delayed release 500 mg</i>	\$0 (Tier 3)	
LAXATIVES		
<i>constulose</i>	\$0 (Tier 3)	
<i>enulose</i>	\$0 (Tier 3)	
<i>gavilyte-c</i>	\$0 (Tier 2)	
<i>gavilyte-g</i>	\$0 (Tier 2)	
<i>gavilyte-n sol flav pk</i>	\$0 (Tier 2)	
<i>generlac</i>	\$0 (Tier 3)	
<i>lactulose (encephalopathy) solution 10 gm/15ml</i>	\$0 (Tier 3)	
<i>lactulose solution 10 gm/15ml</i>	\$0 (Tier 3)	
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	\$0 (Tier 2)	
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	\$0 (Tier 2)	
PLENVU SOL	\$0 (Tier 4)	
<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml</i>	\$0 (Tier 3)	
MISCELLANEOUS		
<i>alosetron hcl tab 0.5 mg (base equiv)</i>	\$0 (Tier 4)	QL (60 tabs / 30 days), PA
<i>alosetron hcl tab 1 mg (base equiv)</i>	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
CREON CAP 3000UNIT	\$0 (Tier 3)	
CREON CAP 6000UNIT	\$0 (Tier 3)	
CREON CAP 12000UNT	\$0 (Tier 3)	
CREON CAP 24000UNT	\$0 (Tier 3)	
CREON CAP 36000UNT	\$0 (Tier 3)	
<i>cromolyn sodium oral conc 100 mg/5ml</i>	\$0 (Tier 4)	
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	\$0 (Tier 4)	
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	\$0 (Tier 3)	
GATTEX KIT 5MG	\$0 (Tier 5)	NDS, PA
LINZESS CAP 72MCG	\$0 (Tier 3)	QL (30 caps / 30 days)
LINZESS CAP 145MCG	\$0 (Tier 3)	QL (30 caps / 30 days)
LINZESS CAP 290MCG	\$0 (Tier 3)	QL (30 caps / 30 days)
<i>loperamide hcl cap 2 mg</i>	\$0 (Tier 3)	
<i>misoprostol tab 100 mcg</i>	\$0 (Tier 3)	

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>misoprostol tab 200 mcg</i>	\$0 (Tier 3)	
MOVANTIK TAB 12.5MG	\$0 (Tier 3)	QL (30 tabs / 30 days)
MOVANTIK TAB 25MG	\$0 (Tier 3)	QL (30 tabs / 30 days)
RELISTOR INJ 8/0.4ML	\$0 (Tier 5)	NDS, QL (28 syringes / 28 days), PA
RELISTOR INJ 12/0.6ML	\$0 (Tier 5)	NDS, QL (28 syringes / 28 days), PA
<i>sucralfate susp 1 gm/10ml</i>	\$0 (Tier 2)	QL (1200 mL / 30 days)
<i>sucralfate tab 1 gm</i>	\$0 (Tier 3)	
TRULANCE TAB 3MG	\$0 (Tier 4)	QL (30 tabs / 30 days)
<i>ursodiol cap 300 mg</i>	\$0 (Tier 3)	
<i>ursodiol tab 250 mg</i>	\$0 (Tier 4)	
<i>ursodiol tab 500 mg</i>	\$0 (Tier 4)	
VOWST CAP	\$0 (Tier 5)	NDS, QL (12 caps / 30 days), PA
XERMELO TAB 250MG	\$0 (Tier 5)	NDS, QL (84 tabs / 28 days), PA
XIFAXAN TAB 550MG	\$0 (Tier 5)	NDS, PA
ZENPEP CAP 3000UNIT	\$0 (Tier 4)	
ZENPEP CAP 5000UNIT	\$0 (Tier 4)	
ZENPEP CAP 10000UNIT	\$0 (Tier 4)	
ZENPEP CAP 15000UNIT	\$0 (Tier 4)	
ZENPEP CAP 20000UNIT	\$0 (Tier 4)	
ZENPEP CAP 25000UNIT	\$0 (Tier 4)	
ZENPEP CAP 40000UNIT	\$0 (Tier 4)	
ZENPEP CAP 60000UNIT	\$0 (Tier 4)	

PROTON PUMP INHIBITORS - DRUGS FOR ULCERS AND STOMACH ACID

<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>	\$0 (Tier 3)	QL (30 caps / 30 days), ST
<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>	\$0 (Tier 3)	QL (30 caps / 30 days), ST
<i>esomeprazole magnesium for delayed release susp packet 10 mg</i>	\$0 (Tier 2)	QL (30 packets / 30 days)
<i>esomeprazole magnesium for delayed release susp packet 20 mg</i>	\$0 (Tier 2)	QL (30 packets / 30 days)
<i>esomeprazole magnesium for delayed release susp packet 40 mg</i>	\$0 (Tier 2)	QL (30 packets / 30 days)
<i>lansoprazole cap delayed release 15 mg</i>	\$0 (Tier 3)	QL (60 caps / 30 days)
<i>lansoprazole cap delayed release 30 mg</i>	\$0 (Tier 3)	QL (60 caps / 30 days)

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>lansoprazole tab delayed release orally disintegrating 15 mg</i>	\$0 (Tier 4)	QL (60 tabs / 30 days), ST
<i>lansoprazole tab delayed release orally disintegrating 30 mg</i>	\$0 (Tier 4)	QL (60 tabs / 30 days), ST
<i>omeprazole cap delayed release 10 mg</i>	\$0 (Tier 1)	
<i>omeprazole cap delayed release 20 mg</i>	\$0 (Tier 1)	
<i>omeprazole cap delayed release 40 mg</i>	\$0 (Tier 1)	
<i>pantoprazole sodium ec tab 20 mg (base equiv)</i>	\$0 (Tier 1)	
<i>pantoprazole sodium ec tab 40 mg (base equiv)</i>	\$0 (Tier 1)	
<i>pantoprazole sodium for iv soln 40 mg (base equiv)</i>	\$0 (Tier 4)	
<i>rabeprazole sodium ec tab 20 mg</i>	\$0 (Tier 3)	QL (30 tabs / 30 days)

GENITOURINARY - DRUGS TO TREAT GENITAL AND URINARY TRACT CONDITIONS

BENIGN PROSTATIC HYPERPLASIA - DRUGS TO TREAT ENLARGED PROSTATE

<i>alfuzosin hcl tab er 24hr 10 mg</i>	\$0 (Tier 2)	QL (30 tabs / 30 days)
<i>dutasteride cap 0.5 mg</i>	\$0 (Tier 3)	QL (30 caps / 30 days)
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	\$0 (Tier 3)	QL (30 caps / 30 days)
<i>finasteride tab 5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>silodosin cap 4 mg</i>	\$0 (Tier 3)	QL (30 caps / 30 days)
<i>silodosin cap 8 mg</i>	\$0 (Tier 3)	QL (30 caps / 30 days)
<i>tadalafil tab 5 mg</i>	\$0 (Tier 3)	QL (30 tabs / 30 days), PA
<i>tamsulosin hcl cap 0.4 mg</i>	\$0 (Tier 1)	QL (60 caps / 30 days)

MISCELLANEOUS

<i>acetic acid irrigation soln 0.25%</i>	\$0 (Tier 2)	
<i>bethanechol chloride tab 5 mg</i>	\$0 (Tier 3)	
<i>bethanechol chloride tab 10 mg</i>	\$0 (Tier 3)	
<i>bethanechol chloride tab 25 mg</i>	\$0 (Tier 3)	
<i>bethanechol chloride tab 50 mg</i>	\$0 (Tier 3)	
<i>potassium citrate tab er 5 meq (540 mg)</i>	\$0 (Tier 3)	
<i>potassium citrate tab er 10 meq (1080 mg)</i>	\$0 (Tier 3)	
<i>potassium citrate tab er 15 meq (1620 mg)</i>	\$0 (Tier 3)	

URINARY ANTISPASMODICS - DRUGS TO TREAT URINARY INCONTINENCE

<i>darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)</i>	\$0 (Tier 4)	QL (30 tabs / 30 days), ST
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NAME OF DRUG**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)**

<i>darifenacin hydrobromide tab er 24hr 15 mg (base equiv)</i>	\$0 (Tier 4) QL (30 tabs / 30 days), ST
<i>fesoterodine fumarate tab er 24hr 4 mg</i>	\$0 (Tier 4) QL (30 tabs / 30 days)
<i>fesoterodine fumarate tab er 24hr 8 mg</i>	\$0 (Tier 4) QL (30 tabs / 30 days)
GEMTESA TAB 75MG	\$0 (Tier 4) QL (30 tabs / 30 days)
MYRBETRIQ SUS 8MG/ML	\$0 (Tier 4) QL (300 mL / 28 days)
MYRBETRIQ TAB 25MG	\$0 (Tier 4) QL (30 tabs / 30 days)
MYRBETRIQ TAB 50MG	\$0 (Tier 4) QL (30 tabs / 30 days)
<i>oxybutynin chloride solution 5 mg/5ml</i>	\$0 (Tier 3) QL (600 mL / 30 days)
<i>oxybutynin chloride tab 5 mg</i>	\$0 (Tier 3) QL (120 tabs / 30 days)
<i>oxybutynin chloride tab er 24hr 5 mg</i>	\$0 (Tier 3) QL (30 tabs / 30 days)
<i>oxybutynin chloride tab er 24hr 10 mg</i>	\$0 (Tier 3) QL (60 tabs / 30 days)
<i>oxybutynin chloride tab er 24hr 15 mg</i>	\$0 (Tier 3) QL (60 tabs / 30 days)
<i>solifenacin succinate tab 5 mg</i>	\$0 (Tier 4) QL (30 tabs / 30 days)
<i>solifenacin succinate tab 10 mg</i>	\$0 (Tier 4) QL (30 tabs / 30 days)
<i>tolterodine tartrate cap er 24hr 2 mg</i>	\$0 (Tier 4) QL (30 caps / 30 days), ST
<i>tolterodine tartrate cap er 24hr 4 mg</i>	\$0 (Tier 4) QL (30 caps / 30 days), ST
<i>tolterodine tartrate tab 1 mg</i>	\$0 (Tier 4) QL (60 tabs / 30 days)
<i>tolterodine tartrate tab 2 mg</i>	\$0 (Tier 4) QL (60 tabs / 30 days)
<i>tropium chloride cap er 24hr 60 mg</i>	\$0 (Tier 4) QL (30 caps / 30 days)
<i>tropium chloride tab 20 mg</i>	\$0 (Tier 3) QL (60 tabs / 30 days)

VAGINAL ANTI-INFECTIVES

<i>clindamycin phosphate vaginal cream 2%</i>	\$0 (Tier 3)
<i>metronidazole vaginal gel 0.75%</i>	\$0 (Tier 3)
<i>terconazole vaginal cream 0.4%</i>	\$0 (Tier 3)
<i>terconazole vaginal cream 0.8%</i>	\$0 (Tier 3)
<i>terconazole vaginal suppos 80 mg</i>	\$0 (Tier 3)

HEMATOLOGIC - DRUGS TO TREAT BLOOD DISORDERS**ANTICOAGULANTS - BLOOD THINNERS**

<i>dabigatran etexilate mesylate cap 75 mg (etexilate base eq)</i>	\$0 (Tier 4) QL (60 caps / 30 days)
<i>dabigatran etexilate mesylate cap 110 mg (etexilate base eq)</i>	\$0 (Tier 4) QL (120 caps / 30 days)
<i>dabigatran etexilate mesylate cap 150 mg (etexilate base eq)</i>	\$0 (Tier 4) QL (60 caps / 30 days)
ELIQUIS ST P TAB 5MG	\$0 (Tier 3) QL (74 tabs / 30 days)
ELIQUIS TAB 2.5MG	\$0 (Tier 3) QL (60 tabs / 30 days)
ELIQUIS TAB 5MG	\$0 (Tier 3) QL (74 tabs / 30 days)
<i>enoxaparin sodium inj 300 mg/3ml</i>	\$0 (Tier 4)

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NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>enoxaparin sodium inj soln pref syr 30 mg/0.3ml</i>	\$0 (Tier 4)	
<i>enoxaparin sodium inj soln pref syr 40 mg/0.4ml</i>	\$0 (Tier 4)	
<i>enoxaparin sodium inj soln pref syr 60 mg/0.6ml</i>	\$0 (Tier 4)	
<i>enoxaparin sodium inj soln pref syr 80 mg/0.8ml</i>	\$0 (Tier 4)	
<i>enoxaparin sodium inj soln pref syr 100 mg/ml</i>	\$0 (Tier 4)	
<i>enoxaparin sodium inj soln pref syr 120 mg/0.8ml</i>	\$0 (Tier 4)	
<i>enoxaparin sodium inj soln pref syr 150 mg/ml</i>	\$0 (Tier 4)	
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	\$0 (Tier 4)	
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	\$0 (Tier 5) NDS	
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	\$0 (Tier 5) NDS	
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	\$0 (Tier 5) NDS	
HEP SOD/NAACL INJ 25000UNT	\$0 (Tier 3)	
<i>heparin sodium (porcine) inj 1000 unit/ml</i>	\$0 (Tier 3) B/D	
<i>heparin sodium (porcine) inj 5000 unit/ml</i>	\$0 (Tier 3) B/D	
<i>heparin sodium (porcine) inj 10000 unit/ml</i>	\$0 (Tier 3) B/D	
<i>heparin sodium (porcine) inj 20000 unit/ml</i>	\$0 (Tier 3) B/D	
<i>heparin sodium (porcine) pf inj 1000 unit/ml</i>	\$0 (Tier 3) B/D	
<i>jantoven</i>	\$0 (Tier 1)	
<i>rivaroxaban for susp 1 mg/ml</i>	\$0 (Tier 3) QL (620 mL / 30 days)	
<i>rivaroxaban tab 2.5 mg</i>	\$0 (Tier 3) QL (60 tabs / 30 days)	
<i>warfarin sodium tab 1 mg</i>	\$0 (Tier 1)	
<i>warfarin sodium tab 2 mg</i>	\$0 (Tier 1)	
<i>warfarin sodium tab 2.5 mg</i>	\$0 (Tier 1)	
<i>warfarin sodium tab 3 mg</i>	\$0 (Tier 1)	
<i>warfarin sodium tab 4 mg</i>	\$0 (Tier 1)	
<i>warfarin sodium tab 5 mg</i>	\$0 (Tier 1)	
<i>warfarin sodium tab 6 mg</i>	\$0 (Tier 1)	
<i>warfarin sodium tab 7.5 mg</i>	\$0 (Tier 1)	
<i>warfarin sodium tab 10 mg</i>	\$0 (Tier 1)	
XARELTO STAR TAB 15/20MG	\$0 (Tier 3) QL (51 tabs / 30 days)	

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
XARELTO SUS 1MG/ML	\$0 (Tier 3)	QL (620 mL / 30 days)
XARELTO TAB 2.5MG	\$0 (Tier 3)	QL (60 tabs / 30 days)
XARELTO TAB 10MG	\$0 (Tier 3)	QL (30 tabs / 30 days)
XARELTO TAB 15MG	\$0 (Tier 3)	QL (30 tabs / 30 days)
XARELTO TAB 20MG	\$0 (Tier 3)	QL (30 tabs / 30 days)
HEMATOPOIETIC GROWTH FACTORS		
FULPHILA INJ 6/0.6ML	\$0 (Tier 5)	NDS, QL (2 syringes / 28 days), PA
PROCRIT INJ 2000/ML	\$0 (Tier 3)	PA
PROCRIT INJ 3000/ML	\$0 (Tier 3)	PA
PROCRIT INJ 4000/ML	\$0 (Tier 3)	PA
PROCRIT INJ 10000/ML	\$0 (Tier 3)	PA
PROCRIT INJ 20000/ML	\$0 (Tier 5)	NDS, PA
PROCRIT INJ 40000/ML	\$0 (Tier 5)	NDS, PA
ZARXIO INJ 300/0.5	\$0 (Tier 5)	NDS, PA
ZARXIO INJ 480/0.8	\$0 (Tier 5)	NDS, PA
MISCELLANEOUS		
ALVAIZ TAB 9MG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
ALVAIZ TAB 18MG	\$0 (Tier 5)	NDS, QL (90 tabs / 30 days), PA
ALVAIZ TAB 36MG	\$0 (Tier 5)	NDS, QL (90 tabs / 30 days), PA
ALVAIZ TAB 54MG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
<i>anagrelide hcl cap 0.5 mg</i>	\$0 (Tier 4)	
<i>anagrelide hcl cap 1 mg</i>	\$0 (Tier 4)	
BERINERT INJ 500UNIT	\$0 (Tier 5)	NDS, QL (24 boxes / 30 days), PA
<i>cilostazol tab 50 mg</i>	\$0 (Tier 2)	
<i>cilostazol tab 100 mg</i>	\$0 (Tier 2)	
DOPTELET TAB 20MG	\$0 (Tier 5)	NDS, PA
DROXIA CAP 200MG	\$0 (Tier 4)	
DROXIA CAP 300MG	\$0 (Tier 4)	
DROXIA CAP 400MG	\$0 (Tier 4)	
HAEGARDA INJ 2000UNIT	\$0 (Tier 5)	NDS, QL (30 vials / 30 days), PA
HAEGARDA INJ 3000UNIT	\$0 (Tier 5)	NDS, QL (20 vials / 30 days), PA
<i>icatibant acetate subcutaneous soln pref syr 30 mg/3ml</i>	\$0 (Tier 5)	NDS, QL (9 syringes / 30 days), PA

NAME OF DRUG**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
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(TIER
LEVEL)**

<i>l-glutamine (sickle cell)</i>	\$0 (Tier 5) NDS, PA
<i>pentoxifylline tab er 400 mg</i>	\$0 (Tier 2)
<i>sajazir</i>	\$0 (Tier 5) NDS, QL (9 syringes / 30 days), PA
SIKLOS TAB 100MG	\$0 (Tier 4)
SIKLOS TAB 1000MG	\$0 (Tier 5) NDS
TAVNEOS CAP 10MG	\$0 (Tier 5) NDS, QL (180 caps / 30 days), PA
<i>tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)</i>	\$0 (Tier 4)
<i>tranexamic acid tab 650 mg</i>	\$0 (Tier 3)

PLATELET AGGREGATION INHIBITORS

<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	\$0 (Tier 4)
BRILINTA TAB 60MG	\$0 (Tier 3)
BRILINTA TAB 90MG	\$0 (Tier 3)
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	\$0 (Tier 1)
<i>dipyridamole tab 25 mg</i>	\$0 (Tier 3) PA; PA applies if 70 years and older
<i>dipyridamole tab 50 mg</i>	\$0 (Tier 3) PA; PA applies if 70 years and older
<i>dipyridamole tab 75 mg</i>	\$0 (Tier 3) PA; PA applies if 70 years and older
<i>prasugrel hcl tab 5 mg (base equiv)</i>	\$0 (Tier 3)
<i>prasugrel hcl tab 10 mg (base equiv)</i>	\$0 (Tier 3)
<i>ticagrelor tab 60 mg</i>	\$0 (Tier 3)
<i>ticagrelor tab 90 mg</i>	\$0 (Tier 3)

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

ADALIMU-AACF INJ 40/0.8ML	\$0 (Tier 5) NDS, QL (2 packs / year), PA
ADALIMU-AACF INJ 40/0.8ML	\$0 (Tier 5) NDS, QL (56 pens / 365 days), PA
ADALIMU-AACF KIT 40/0.8ML	\$0 (Tier 5) NDS, QL (56 syringes / 365 days), PA
COSENTYX INJ 75MG/0.5	\$0 (Tier 5) NDS, QL (16 syringes / 365 days), PA
COSENTYX INJ 125/5ML	\$0 (Tier 5) NDS, PA

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
COSENTYX INJ 150MG/ML	\$0 (Tier 5) NDS, QL (32 syringes / 365 days), PA
COSENTYX INJ 300DOSE	\$0 (Tier 5) NDS, QL (32 syringes / 365 days), PA
COSENTYX PEN INJ 150MG/ML	\$0 (Tier 5) NDS, QL (32 pens / 365 days), PA
COSENTYX PEN INJ 300DOSE	\$0 (Tier 5) NDS, QL (32 pens / 365 days), PA
COSENTYX UNO INJ 300/2ML	\$0 (Tier 5) NDS, QL (16 pens / 365 days), PA
DUPIXENT INJ 200/1.14	\$0 (Tier 5) NDS, QL (4 syringes / 28 days), PA
DUPIXENT INJ 200MG	\$0 (Tier 5) NDS, QL (4 pens / 28 days), PA
DUPIXENT INJ 300/2ML	\$0 (Tier 5) NDS, QL (4 pens / 28 days), PA
DUPIXENT INJ 300/2ML	\$0 (Tier 5) NDS, QL (4 syringes / 28 days), PA
ENBREL INJ 25/0.5ML	\$0 (Tier 5) NDS, QL (16 syringes / 28 days), PA
ENBREL INJ 25MG	\$0 (Tier 5) NDS, QL (16 vials / 28 days), PA
ENBREL INJ 50MG/ML	\$0 (Tier 5) NDS, QL (8 syringes / 28 days), PA
ENBREL MINI INJ 50MG/ML	\$0 (Tier 5) NDS, QL (8 cartridges / 28 days), PA
ENBREL SRCLK INJ 50MG/ML	\$0 (Tier 5) NDS, QL (8 pens / 28 days), PA
HUMIRA INJ 10/0.1ML	\$0 (Tier 5) NDS, QL (2 syringes / 28 days), PA
HUMIRA INJ 20/0.2ML	\$0 (Tier 5) NDS, QL (4 syringes / 28 days), PA
HUMIRA INJ 40/0.4ML	\$0 (Tier 5) NDS, QL (6 syringes / 28 days), PA
HUMIRA KIT 40MG/0.8	\$0 (Tier 5) NDS, QL (6 syringes / 28 days), PA
HUMIRA PEN INJ 40/0.4ML	\$0 (Tier 5) NDS, QL (6 pens / 28 days), PA
HUMIRA PEN INJ 40MG/0.8	\$0 (Tier 5) NDS, QL (6 pens / 28 days), PA
HUMIRA PEN INJ 80/0.8ML	\$0 (Tier 5) NDS, QL (4 pens / 28 days), PA

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
HUMIRA PEN KIT CD/UC/HS	\$0 (Tier 5)	NDS, QL (3 pens / 28 days), PA
HUMIRA PEN KIT PED UC	\$0 (Tier 5)	NDS, QL (4 pens / 28 days), PA
HUMIRA PEN KIT PS/UV	\$0 (Tier 5)	NDS, QL (3 pens / 28 days), PA
IDACIO 2-PEN INJ 40/0.8ML	\$0 (Tier 5)	NDS, QL (56 pens / 365 days), PA
IDACIO CROHN INJ DISEASE	\$0 (Tier 5)	NDS, QL (2 packs / year), PA
IDACIO PLAQU INJ PSORIASIS	\$0 (Tier 5)	NDS, QL (2 packs / year), PA
INFLIXIMAB INJ 100MG	\$0 (Tier 5)	NDS, PA
PYZCHIVA INJ 45/0.5ML	\$0 (Tier 3)	QL (1 pen / 28 days), PA
PYZCHIVA INJ 45/0.5ML	\$0 (Tier 3)	QL (1 syringe / 28 days), PA
PYZCHIVA INJ 45/0.5ML	\$0 (Tier 3)	QL (1 vial / 28 days), PA
PYZCHIVA INJ 90MG/ML	\$0 (Tier 5)	NDS, QL (1 pen / 28 days), PA
PYZCHIVA INJ 90MG/ML	\$0 (Tier 5)	NDS, QL (1 syringe / 28 days), PA
PYZCHIVA INJ 130/26ML	\$0 (Tier 5)	NDS, PA
REMICADE INJ 100MG	\$0 (Tier 5)	NDS, PA
RENFLEXIS INJ 100MG	\$0 (Tier 5)	NDS, PA
RINVOQ LQ SOL 1MG/ML	\$0 (Tier 5)	NDS, QL (360 mL / 30 days), PA
RINVOQ TAB 15MG ER	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
RINVOQ TAB 30MG ER	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
RINVOQ TAB 45MG ER	\$0 (Tier 5)	NDS, QL (168 tabs / year), PA
SKYRIZI INJ 150MG/ML	\$0 (Tier 5)	NDS, QL (6 syringes / 365 days), PA
SKYRIZI INJ 180/1.2	\$0 (Tier 5)	NDS, QL (1 cartridge / 56 days), PA
SKYRIZI INJ 360/2.4	\$0 (Tier 5)	NDS, QL (1 cartridge / 56 days), PA
SKYRIZI PEN INJ 150MG/ML	\$0 (Tier 5)	NDS, QL (6 pens / 365 days), PA
SKYRIZI SOL 60MG/ML	\$0 (Tier 5)	NDS, PA

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NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
SOTYKTU TAB 6MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
STELARA INJ 5MG/ML	\$0 (Tier 5)	NDS, PA
STELARA INJ 45/0.5ML	\$0 (Tier 5)	NDS, QL (1 syringe / 28 days), PA
STELARA INJ 45/0.5ML	\$0 (Tier 5)	NDS, QL (1 vial / 28 days), PA
STELARA INJ 90MG/ML	\$0 (Tier 5)	NDS, QL (1 syringe / 28 days), PA
TREMFYA INJ 100MG/ML	\$0 (Tier 5)	NDS, QL (1 pen / 28 days), PA
TREMFYA INJ 100MG/ML	\$0 (Tier 5)	NDS, QL (1 syringe / 28 days), PA
TREMFYA INJ 200/2ML	\$0 (Tier 5)	NDS, QL (2 pens / 28 days), PA
TREMFYA INJ 200/2ML	\$0 (Tier 5)	NDS, QL (2 syringes / 28 days), PA
TREMFYA INJ 200/20ML	\$0 (Tier 5)	NDS, PA
TYENNE INJ 80MG/4ML	\$0 (Tier 5)	NDS, PA
TYENNE INJ 162/0.9	\$0 (Tier 5)	NDS, QL (4 pens / 28 days), PA
TYENNE INJ 162MG	\$0 (Tier 5)	NDS, QL (4 syringes / 28 days), PA
TYENNE INJ 200/10ML	\$0 (Tier 5)	NDS, PA
TYENNE INJ 400/20ML	\$0 (Tier 5)	NDS, PA
VELSIPITY TAB 2MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
XELJANZ SOL 1MG/ML	\$0 (Tier 5)	NDS, QL (480 mL / 24 days), PA
XELJANZ TAB 5MG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
XELJANZ TAB 10MG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA
XELJANZ XR TAB 11MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
XELJANZ XR TAB 22MG	\$0 (Tier 5)	NDS, QL (30 tabs / 30 days), PA
YESINTEK INJ 45/0.5ML	\$0 (Tier 3)	QL (1 syringe / 28 days), PA
YESINTEK INJ 45/0.5ML	\$0 (Tier 3)	QL (1 vial / 28 days), PA
YESINTEK INJ 90MG/ML	\$0 (Tier 5)	NDS, QL (1 syringe / 28 days), PA

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
YESINTEK INJ 130/26ML	\$0 (Tier 3) PA
DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDS) - DRUGS TO TREAT RHEUMATOID ARTHRITIS	
<i>hydroxychloroquine sulfate tab 200 mg</i>	\$0 (Tier 3)
JYLAMVO SOL 2MG/ML	\$0 (Tier 4) B/D
<i>leflunomide tab 10 mg</i>	\$0 (Tier 3) QL (30 tabs / 30 days)
<i>leflunomide tab 20 mg</i>	\$0 (Tier 3) QL (30 tabs / 30 days)
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	\$0 (Tier 3)
XATMEP SOL 2.5MG/ML	\$0 (Tier 4) B/D
IMMUNOGLOBULINS	
ALYGLO INJ 5GM/50ML	\$0 (Tier 5) NDS, PA
ALYGLO INJ 10/100ML	\$0 (Tier 5) NDS, PA
ALYGLO INJ 20/200ML	\$0 (Tier 5) NDS, PA
BIVIGAM INJ 10%	\$0 (Tier 5) NDS, PA
FLEBOGAMMA INJ 10/200ML	\$0 (Tier 5) NDS, PA
FLEBOGAMMA INJ 20/400ML	\$0 (Tier 5) NDS, PA
FLEBOGAMMA INJ DIF 5%	\$0 (Tier 5) NDS, PA
GAMASTAN INJ	\$0 (Tier 4) B/D
GAMMAGARD INJ 1GM/10ML	\$0 (Tier 5) NDS, PA
GAMMAGARD INJ 2.5GM/25	\$0 (Tier 5) NDS, PA
GAMMAGARD INJ 5GM/50ML	\$0 (Tier 5) NDS, PA
GAMMAGARD INJ 10GM/100	\$0 (Tier 5) NDS, PA
GAMMAGARD INJ 20GM/200	\$0 (Tier 5) NDS, PA
GAMMAGARD INJ 30GM/300	\$0 (Tier 5) NDS, PA
GAMMAGARD SD INJ 5GM HU	\$0 (Tier 5) NDS, PA
GAMMAGARD SD INJ 10GM HU	\$0 (Tier 5) NDS, PA
GAMMAKED INJ 1GM/10ML	\$0 (Tier 5) NDS, PA
GAMMAKED INJ 5GM/50ML	\$0 (Tier 5) NDS, PA
GAMMAKED INJ 10GM/100	\$0 (Tier 5) NDS, PA
GAMMAKED INJ 20GM/200	\$0 (Tier 5) NDS, PA
GAMMAPLEX INJ 5%	\$0 (Tier 5) NDS, PA
GAMMAPLEX INJ 10%	\$0 (Tier 5) NDS, PA
GAMUNEX-C INJ 1GM/10ML	\$0 (Tier 5) NDS, PA
GAMUNEX-C INJ 2.5GM/25	\$0 (Tier 5) NDS, PA
GAMUNEX-C INJ 5GM/50ML	\$0 (Tier 5) NDS, PA
GAMUNEX-C INJ 10GM/100	\$0 (Tier 5) NDS, PA
GAMUNEX-C INJ 20GM/200	\$0 (Tier 5) NDS, PA
GAMUNEX-C INJ 40/400ML	\$0 (Tier 5) NDS, PA
OCTAGAM INJ 1GM	\$0 (Tier 5) NDS, PA

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
OCTAGAM INJ 2.5GM	\$0 (Tier 5)	NDS, PA
OCTAGAM INJ 2GM/20ML	\$0 (Tier 5)	NDS, PA
OCTAGAM INJ 5GM	\$0 (Tier 5)	NDS, PA
OCTAGAM INJ 5GM/50ML	\$0 (Tier 5)	NDS, PA
OCTAGAM INJ 10/100ML	\$0 (Tier 5)	NDS, PA
OCTAGAM INJ 10GM	\$0 (Tier 5)	NDS, PA
OCTAGAM INJ 20/200ML	\$0 (Tier 5)	NDS, PA
OCTAGAM INJ 30/300ML	\$0 (Tier 5)	NDS, PA
PANZYGA SOL 1GM/10ML	\$0 (Tier 5)	NDS, PA
PANZYGA SOL 2.5/25ML	\$0 (Tier 5)	NDS, PA
PANZYGA SOL 5GM/50ML	\$0 (Tier 5)	NDS, PA
PANZYGA SOL 10/100ML	\$0 (Tier 5)	NDS, PA
PANZYGA SOL 20/200ML	\$0 (Tier 5)	NDS, PA
PANZYGA SOL 30/300ML	\$0 (Tier 5)	NDS, PA
PRIVIGEN INJ 5 GRAMS	\$0 (Tier 5)	NDS, PA
PRIVIGEN INJ 10GRAMS	\$0 (Tier 5)	NDS, PA
PRIVIGEN INJ 20GRAMS	\$0 (Tier 5)	NDS, PA
PRIVIGEN INJ 40GRAMS	\$0 (Tier 5)	NDS, PA
IMMUNOMODULATORS		
ACTIMMUNE INJ 2MU/0.5	\$0 (Tier 5)	NDS, PA
ARCALYST INJ 220MG	\$0 (Tier 5)	NDS, PA
IMMUNOSUPPRESSANTS		
ASTAGRAF XL CAP 0.5MG	\$0 (Tier 4)	B/D
ASTAGRAF XL CAP 1MG	\$0 (Tier 4)	B/D
ASTAGRAF XL CAP 5MG	\$0 (Tier 5)	NDS, B/D
<i>azathioprine tab 50 mg</i>	\$0 (Tier 3)	B/D
BENLYSTA INJ 120MG	\$0 (Tier 5)	NDS, PA
BENLYSTA INJ 200MG/ML	\$0 (Tier 5)	NDS, QL (8 syringes / 28 days), PA
BENLYSTA INJ 400MG	\$0 (Tier 5)	NDS, PA
<i>cyclosporine cap 25 mg</i>	\$0 (Tier 4)	B/D
<i>cyclosporine cap 100 mg</i>	\$0 (Tier 4)	B/D
<i>cyclosporine modified cap 25 mg</i>	\$0 (Tier 4)	B/D
<i>cyclosporine modified cap 50 mg</i>	\$0 (Tier 4)	B/D
<i>cyclosporine modified cap 100 mg</i>	\$0 (Tier 4)	B/D
<i>cyclosporine modified oral soln 100 mg/ml</i>	\$0 (Tier 4)	B/D
ENVARUSUS XR TAB 0.75MG	\$0 (Tier 4)	B/D
ENVARUSUS XR TAB 1MG	\$0 (Tier 4)	B/D
ENVARUSUS XR TAB 4MG	\$0 (Tier 5)	NDS, B/D
<i>everolimus tab 0.5 mg</i>	\$0 (Tier 5)	NDS, B/D

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NAME OF DRUG**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)**

<i>everolimus tab 0.25 mg</i>	\$0 (Tier 5) NDS, B/D
<i>everolimus tab 0.75 mg</i>	\$0 (Tier 5) NDS, B/D
<i>everolimus tab 1 mg</i>	\$0 (Tier 5) NDS, B/D
<i>gengraf</i>	\$0 (Tier 4) B/D
<i>gengraf sol 100mg/ml</i>	\$0 (Tier 4) B/D
<i>mycophenolate mofetil cap 250 mg</i>	\$0 (Tier 3) B/D
<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	\$0 (Tier 5) NDS, B/D
<i>mycophenolate mofetil tab 500 mg</i>	\$0 (Tier 3) B/D
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	\$0 (Tier 4) B/D
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	\$0 (Tier 4) B/D
NULOJIX INJ 250MG	\$0 (Tier 5) NDS, B/D
PROGRAF GRA 0.2MG	\$0 (Tier 4) B/D
PROGRAF GRA 1MG	\$0 (Tier 4) B/D
REZUROCK TAB 200MG	\$0 (Tier 5) NDS, QL (30 tabs / 30 days), PA
<i>sirolimus oral soln 1 mg/ml</i>	\$0 (Tier 5) NDS, B/D
<i>sirolimus tab 0.5 mg</i>	\$0 (Tier 4) B/D
<i>sirolimus tab 1 mg</i>	\$0 (Tier 4) B/D
<i>sirolimus tab 2 mg</i>	\$0 (Tier 4) B/D
<i>tacrolimus cap 0.5 mg</i>	\$0 (Tier 4) B/D
<i>tacrolimus cap 1 mg</i>	\$0 (Tier 4) B/D
<i>tacrolimus cap 5 mg</i>	\$0 (Tier 4) B/D

VACCINES

ABRYSVO INJ	\$0 (Tier 1)
ACTHIB INJ	\$0 (Tier 1)
ADACEL INJ	\$0 (Tier 1)
AREXVY INJ 120MCG	\$0 (Tier 1)
BCG VACCINE INJ 50MG	\$0 (Tier 1)
BEXSERO INJ	\$0 (Tier 1)
BOOSTRIX INJ	\$0 (Tier 1)
DAPTACEL INJ	\$0 (Tier 1)
DENGVAXIA SUS	\$0 (Tier 1)
DIP/TET PED INJ 25-5LFU	\$0 (Tier 1) B/D
ENGRIX-B INJ 10/0.5ML	\$0 (Tier 1) B/D
ENGRIX-B INJ 20MCG/ML	\$0 (Tier 1) B/D
GARDASIL 9 INJ	\$0 (Tier 1)
HAVRIX INJ 720UNIT	\$0 (Tier 1)
HAVRIX INJ 1440UNIT	\$0 (Tier 1)

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NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
HEPLISAV-B INJ 20/0.5ML	\$0 (Tier 1) B/D
HIBERIX SOL 10MCG	\$0 (Tier 1)
IMOVAX RABIE INJ 2.5/ML	\$0 (Tier 1) B/D
INFANRIX INJ	\$0 (Tier 1)
IPOL INJ INACTIVE	\$0 (Tier 1)
IXIARO INJ	\$0 (Tier 1)
JYNNEOS INJ	\$0 (Tier 1) B/D
KINRIX INJ	\$0 (Tier 1)
M-M-R II INJ	\$0 (Tier 1)
MENACTRA INJ	\$0 (Tier 1)
MENQUADFI INJ	\$0 (Tier 1)
MENVEO INJ	\$0 (Tier 1)
MENVEO SOL	\$0 (Tier 1)
MRESVIA INJ 50MCG	\$0 (Tier 1)
PEDIARIX INJ 0.5ML	\$0 (Tier 1)
PEDVAX HIB INJ	\$0 (Tier 1)
PENBRAYA INJ	\$0 (Tier 1)
PENMENVY INJ	\$0 (Tier 1)
PENTACEL INJ	\$0 (Tier 1)
PRIORIX INJ	\$0 (Tier 1)
PROQUAD INJ	\$0 (Tier 1)
QUADRACEL INJ 0.5ML	\$0 (Tier 1)
RABAVERT INJ	\$0 (Tier 1) B/D
RECOMBIVA HB INJ 5MCG/0.5	\$0 (Tier 1) B/D
RECOMBIVA HB INJ 10MCG/ML	\$0 (Tier 1) B/D
RECOMBIVA-HB INJ 40MCG/ML	\$0 (Tier 1) B/D
ROTARIX SUS	\$0 (Tier 1)
ROTATEQ SOL	\$0 (Tier 1)
SHINGRIX INJ 50/0.5ML	\$0 (Tier 1) QL (2 vials per lifetime)
TENIVAC INJ 5-2LF	\$0 (Tier 1) B/D
TICOVAC INJ	\$0 (Tier 1)
TRUMENBA INJ	\$0 (Tier 1)
TWINRIX INJ	\$0 (Tier 1)
TYPHIM VI INJ	\$0 (Tier 1)
VAQTA INJ 25/0.5ML	\$0 (Tier 1)
VAQTA INJ 50UNT/ML	\$0 (Tier 1)
VARIVAX INJ	\$0 (Tier 1)
VAXCHORA SUS	\$0 (Tier 1)
VIMKUNYA INJ 40/0.8ML	\$0 (Tier 1)
VIVOTIF CAP EC	\$0 (Tier 1)

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NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
YF-VAX INJ	\$0 (Tier 1)	
NUTRITIONAL/SUPPLEMENTS - VITAMINS AND SUPPLEMENTS		
<i>ELECTROLYTES/MINERALS, INJECTABLE</i>		
D2.5W/NACL INJ 0.45%	\$0 (Tier 4)	
D10W/NACL INJ 0.2%	\$0 (Tier 3)	
<i>dextrose 2.5% w/ sodium chloride 0.45%</i>	\$0 (Tier 3)	
<i>dextrose 5% in lactated ringers</i>	\$0 (Tier 3)	
<i>dextrose 5% w/ sodium chloride 0.2%</i>	\$0 (Tier 3)	
<i>dextrose 5% w/ sodium chloride 0.3%</i>	\$0 (Tier 3)	
<i>dextrose 5% w/ sodium chloride 0.9%</i>	\$0 (Tier 3)	
<i>dextrose 5% w/ sodium chloride 0.45%</i>	\$0 (Tier 3)	
<i>dextrose 5% w/ sodium chloride 0.225%</i>	\$0 (Tier 3)	
<i>dextrose 10% w/ sodium chloride 0.45%</i>	\$0 (Tier 3)	
ISOLYTE-P INJ /D5W	\$0 (Tier 4)	
ISOLYTE-S INJ PH 7.4	\$0 (Tier 4)	
<i>kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj</i>	\$0 (Tier 3)	
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.2% inj</i>	\$0 (Tier 3)	
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj</i>	\$0 (Tier 3)	
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj</i>	\$0 (Tier 3)	
<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>	\$0 (Tier 3)	
<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i>	\$0 (Tier 3)	
<i>kcl 20 meq/l (0.149%) in nacl 0.45% inj</i>	\$0 (Tier 3)	
<i>kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj</i>	\$0 (Tier 3)	
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.9% inj</i>	\$0 (Tier 3)	
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj</i>	\$0 (Tier 3)	
<i>kcl 40 meq/l (0.3%) in nacl 0.9% inj</i>	\$0 (Tier 3)	
KCL/D5W/NACL INJ 0.3/0.9%	\$0 (Tier 4)	
<i>lactated ringer's solution</i>	\$0 (Tier 3)	
MAGNESIUM SU INJ 2GM/50ML	\$0 (Tier 3)	
MAGNESIUM SU INJ 4G/100ML	\$0 (Tier 3)	
MAGNESIUM SU INJ 20/500ML	\$0 (Tier 3)	
MAGNESIUM SU INJ 40G/1000	\$0 (Tier 3)	
MAGNESIUM SU INJ 50%	\$0 (Tier 3)	
MAGNESIUM SU INJ 80MG/ML	\$0 (Tier 3)	

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NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i>	\$0 (Tier 3)	
<i>magnesium sulfate inj 50%</i>	\$0 (Tier 3)	
<i>magnesium sulfate iv soln 2 gm/50ml (40 mg/ml)</i>	\$0 (Tier 3)	
<i>magnesium sulfate iv soln 4 gm/50ml (80 mg/ml)</i>	\$0 (Tier 3)	
<i>magnesium sulfate iv soln 4 gm/100ml (40 mg/ml)</i>	\$0 (Tier 3)	
<i>magnesium sulfate iv soln 20 gm/500ml (40 mg/ml)</i>	\$0 (Tier 3)	
<i>magnesium sulfate iv soln 40 gm/1000ml (40 mg/ml)</i>	\$0 (Tier 3)	
<i>multiple electrolytes ph 5.5</i>	\$0 (Tier 4)	
<i>multiple electrolytes ph 7.4</i>	\$0 (Tier 4)	
POT CHL 20MEQ/L IN NACL 0.9% INJ	\$0 (Tier 4)	
POT CHL 20MEQ/L IN NACL 0.45% INJ	\$0 (Tier 4)	
POT CHL 40MEQ/L IN NACL 0.9% INJ	\$0 (Tier 4)	
<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i>	\$0 (Tier 3)	
<i>potassium chloride inj 2 meq/ml</i>	\$0 (Tier 3)	
<i>potassium chloride inj 10 meq/50ml</i>	\$0 (Tier 3)	
<i>potassium chloride inj 10 meq/100ml</i>	\$0 (Tier 3)	
<i>potassium chloride inj 20 meq/50ml</i>	\$0 (Tier 3)	
<i>potassium chloride inj 20 meq/100ml</i>	\$0 (Tier 3)	
<i>potassium chloride inj 40 meq/100ml</i>	\$0 (Tier 3)	
<i>sodium chloride inj 2.5 meq/ml (14.6%)</i>	\$0 (Tier 3)	
<i>sodium chloride iv soln 0.9%</i>	\$0 (Tier 3)	
<i>sodium chloride iv soln 0.45%</i>	\$0 (Tier 3)	
<i>sodium chloride iv soln 3%</i>	\$0 (Tier 3)	
<i>sodium chloride iv soln 5%</i>	\$0 (Tier 3)	
TPN ELECTROL INJ	\$0 (Tier 4) B/D	
ELECTROLYTES/MINERALS/VITAMINS, ORAL		
<i>klor-con</i>	\$0 (Tier 4)	
<i>klor-con 8</i>	\$0 (Tier 2)	
<i>klor-con 10</i>	\$0 (Tier 2)	
<i>klor-con m10</i>	\$0 (Tier 2)	
<i>klor-con m15</i>	\$0 (Tier 2)	
<i>klor-con m20</i>	\$0 (Tier 2)	
M-NATAL PLUS TAB	\$0 (Tier 3)	
<i>potassium chloride cap er 8 meq</i>	\$0 (Tier 2)	

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>potassium chloride cap er 10 meq</i>	\$0 (Tier 2)	
<i>potassium chloride microencapsulated crys er tab 10 meq</i>	\$0 (Tier 2)	
<i>potassium chloride microencapsulated crys er tab 15 meq</i>	\$0 (Tier 2)	
<i>potassium chloride microencapsulated crys er tab 20 meq</i>	\$0 (Tier 2)	
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	\$0 (Tier 4)	
<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	\$0 (Tier 4)	
<i>potassium chloride powder packet 20 meq</i>	\$0 (Tier 4)	
<i>potassium chloride tab er 8 meq (600 mg)</i>	\$0 (Tier 2)	
<i>potassium chloride tab er 10 meq</i>	\$0 (Tier 2)	
<i>potassium chloride tab er 20 meq (1500 mg)</i>	\$0 (Tier 2)	
PRENATAL TAB 27-1MG	\$0 (Tier 3)	
PRENATAL TAB PLUS	\$0 (Tier 3)	
<i>sodium fluoride chew; tab; 1.1 (0.5 f) mg/ml soln</i>	\$0 (Tier 2)	
WESTAB PLUS TAB 27-1MG	\$0 (Tier 3)	
IV NUTRITION		
CLINIMIX INJ 4.25/D5W	\$0 (Tier 4) B/D	
CLINIMIX INJ 4.25/D10	\$0 (Tier 4) B/D	
CLINIMIX INJ 5%/D15W	\$0 (Tier 4) B/D	
CLINIMIX INJ 5%/D20W	\$0 (Tier 4) B/D	
CLINIMIX INJ 6/5	\$0 (Tier 4) B/D	
CLINIMIX INJ 8/10	\$0 (Tier 4) B/D	
CLINIMIX INJ 8/14	\$0 (Tier 4) B/D	
<i>clinsol sf 15%</i>	\$0 (Tier 4) B/D	
CLINOLIPID EMU 20%	\$0 (Tier 4) B/D	
<i>dextrose inj 5%</i>	\$0 (Tier 3)	
<i>dextrose inj 10%</i>	\$0 (Tier 3)	
<i>dextrose inj 50%</i>	\$0 (Tier 3) B/D	
<i>dextrose inj 70%</i>	\$0 (Tier 3) B/D	
INTRALIPID INJ 20%	\$0 (Tier 4) B/D	
INTRALIPID INJ 30%	\$0 (Tier 4) B/D	
NUTRILIPID EMU 20%	\$0 (Tier 4) B/D	
<i>plenamine</i>	\$0 (Tier 4) B/D	
PREMASOL SOL 10%	\$0 (Tier 5) NDS, B/D	
PROSOL INJ 20%	\$0 (Tier 4) B/D	

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
TRAVASOL INJ 10%	\$0 (Tier 4) B/D
TROPHAMINE INJ 10%	\$0 (Tier 4) B/D
OPHTHALMIC - DRUGS TO TREAT EYE CONDITIONS	
ANTI-INFECTIVE/ANTI-INFLAMMATORY - DRUGS TO TREAT INFECTIONS AND INFLAMMATION	
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	\$0 (Tier 3)
<i>neo-polycin hc ophth oint 1%</i>	\$0 (Tier 3)
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	\$0 (Tier 2)
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	\$0 (Tier 2)
<i>neomycin-polymyxin-hc ophth susp</i>	\$0 (Tier 4)
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	\$0 (Tier 2)
TOBRADEX OIN 0.3-0.1%	\$0 (Tier 3)
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	\$0 (Tier 3)
ZYLET SUS 0.5-0.3%	\$0 (Tier 3)
ANTI-INFECTIVES - DRUGS TO TREAT INFECTIONS	
<i>bacitracin ophth oint 500 unit/gm</i>	\$0 (Tier 3)
<i>bacitracin-polymyxin b ophth oint</i>	\$0 (Tier 2)
BESIVANCE SUS 0.6%	\$0 (Tier 3)
CILOXAN OIN 0.3% OP	\$0 (Tier 3)
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	\$0 (Tier 2)
<i>erythromycin ophth oint 5 mg/gm</i>	\$0 (Tier 2)
<i>gatifloxacin ophth soln 0.5%</i>	\$0 (Tier 3)
<i>gentamicin sulfate ophth soln 0.3%</i>	\$0 (Tier 2)
<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i>	\$0 (Tier 3) QL (12 mL / 30 days)
NATACYN SUS 5% OP	\$0 (Tier 4)
<i>neo-polycin 5(3.5)mg-400unt-10000unt op oin</i>	\$0 (Tier 3)
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	\$0 (Tier 3)
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	\$0 (Tier 3)
<i>ofloxacin ophth soln 0.3%</i>	\$0 (Tier 2)
<i>polycin ophth oint</i>	\$0 (Tier 2)

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	\$0 (Tier 1)
<i>sulfacetamide sodium ophth oint 10%</i>	\$0 (Tier 3)
<i>sulfacetamide sodium ophth soln 10%</i>	\$0 (Tier 3)
<i>tobramycin ophth soln 0.3%</i>	\$0 (Tier 1)
<i>trifluridine ophth soln 1%</i>	\$0 (Tier 4)
XDEMVY DRO 0.25%	\$0 (Tier 5) NDS, PA
ZIRGAN GEL 0.15%	\$0 (Tier 4)
ANTI-INFLAMMATORIES - DRUGS TO TREAT INFLAMMATION	
<i>bromfenac sodium ophth soln 0.07% (base equivalent)</i>	\$0 (Tier 3)
<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i>	\$0 (Tier 4)
<i>bromfenac sodium ophth soln 0.075% (base equivalent)</i>	\$0 (Tier 4)
<i>dexamethasone sodium phosphate ophth soln 0.1%</i>	\$0 (Tier 3)
<i>diclofenac sodium ophth soln 0.1%</i>	\$0 (Tier 2)
<i>difluprednate ophth emulsion 0.05%</i>	\$0 (Tier 4)
FLAREX SUS 0.1% OP	\$0 (Tier 4)
<i>fluorometholone ophth susp 0.1%</i>	\$0 (Tier 3)
<i>flurbiprofen sodium ophth soln 0.03%</i>	\$0 (Tier 3)
<i>ketorolac tromethamine ophth soln 0.4%</i>	\$0 (Tier 3)
<i>ketorolac tromethamine ophth soln 0.5%</i>	\$0 (Tier 2)
LOTEMAX OIN 0.5%	\$0 (Tier 3)
<i>loteprednol etabonate ophth susp 0.2%</i>	\$0 (Tier 3)
PRED SOD PHO SOL 1% OP	\$0 (Tier 3)
<i>prednisolone acetate ophth susp 1%</i>	\$0 (Tier 3)
ANTIALLERGICS - DRUGS TO TREAT ALLERGIES	
<i>azelastine hcl ophth soln 0.05%</i>	\$0 (Tier 2)
<i>cromolyn sodium ophth soln 4%</i>	\$0 (Tier 2)
ZERVIAE DRO 0.24%	\$0 (Tier 4)
ANTIGLAUCOMA - DRUGS TO TREAT GLAUCOMA	
<i>betaxolol hcl ophth soln 0.5%</i>	\$0 (Tier 3)
BETOPTIC-S SUS 0.25% OP	\$0 (Tier 4)
<i>brimonidine tartrate ophth soln 0.2%</i>	\$0 (Tier 1)
<i>brimonidine tartrate ophth soln 0.15%</i>	\$0 (Tier 4)
<i>brinzolamide ophth susp 1%</i>	\$0 (Tier 4)
<i>carteolol hcl ophth soln 1%</i>	\$0 (Tier 2)
COMBIGAN SOL 0.2/0.5%	\$0 (Tier 3)

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

NAME OF DRUG**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)**

<i>dorzolamide hcl ophth soln 2%</i>	\$0 (Tier 2)
<i>dorzolamide hcl-timolol maleate ophth soln 2-0.5%</i>	\$0 (Tier 2)
<i>latanoprost ophth soln 0.005%</i>	\$0 (Tier 1)
<i>levobunolol hcl ophth soln 0.5%</i>	\$0 (Tier 2)
LUMIGAN SOL 0.01% OP	\$0 (Tier 3)
<i>pilocarpine hcl ophth soln 1%</i>	\$0 (Tier 3)
<i>pilocarpine hcl ophth soln 2%</i>	\$0 (Tier 3)
<i>pilocarpine hcl ophth soln 4%</i>	\$0 (Tier 3)
RHOPRESSA SOL 0.02%	\$0 (Tier 4)
ROCKLATAN DRO	\$0 (Tier 4)
SIMBRINZA SUS 1-0.2%	\$0 (Tier 4)
<i>timolol maleate ophth gel forming soln 0.5%</i>	\$0 (Tier 3)
<i>timolol maleate ophth gel forming soln 0.25%</i>	\$0 (Tier 3)
<i>timolol maleate ophth soln 0.5%</i>	\$0 (Tier 1)
<i>timolol maleate ophth soln 0.25%</i>	\$0 (Tier 1)
<i>travoprost ophth soln 0.004% (benzalkonium free) (bak free)</i>	\$0 (Tier 4)
VYZULTA SOL 0.024%	\$0 (Tier 4)

MISCELLANEOUS

ATROPINE SUL SOL 1% OP	\$0 (Tier 3)
<i>atropine sulfate ophth soln 1%</i>	\$0 (Tier 3)
CYSTADROPS SOL 0.37%	\$0 (Tier 5) NDS, PA
CYSTARAN SOL 0.44%	\$0 (Tier 5) NDS, PA
EYSUVIS DRO 0.25%	\$0 (Tier 4)
MIEBO DRO 1.3GM/ML	\$0 (Tier 3)
<i>proparacaine hcl ophth soln 0.5%</i>	\$0 (Tier 3)
RESTASIS EMU 0.05% OP	\$0 (Tier 3)
RESTASIS MUL EMU 0.05% OP	\$0 (Tier 3)
XIIDRA DRO 5%	\$0 (Tier 3)

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

<i>acetic acid otic soln 2%</i>	\$0 (Tier 3)
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	\$0 (Tier 4)
<i>flac</i>	\$0 (Tier 3)
<i>fluocinolone acetonide (otic) oil 0.01%</i>	\$0 (Tier 3)
<i>hydrocortisone w/ acetic acid otic soln 1-2%</i>	\$0 (Tier 4)

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>neomycin-polymyxin-hc otic soln 1%</i>	\$0 (Tier 3)	
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	\$0 (Tier 3)	
<i>ofloxacin otic soln 0.3%</i>	\$0 (Tier 4)	

RESPIRATORY - DRUGS TO TREAT BREATHING DISORDERS
ANTICHOLINERGIC/BETA AGONIST COMBINATIONS - DRUGS TO TREAT COPD

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

ANTICHOLINERGICS - DRUGS TO TREAT COPD

ATROVENT HFA AER 17MCG	\$0 (Tier 4)	QL (2 inhalers / 30 days)
INCRUSE ELPT INH 62.5MCG	\$0 (Tier 3)	QL (30 blisters / 30 days)
<i>ipratropium bromide inhal soln 0.02%</i>	\$0 (Tier 2)	B/D
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	\$0 (Tier 3)	
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	\$0 (Tier 3)	

ANTI-HISTAMINES - DRUGS TO TREAT ALLERGIES

<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	\$0 (Tier 3)	
<i>cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)</i>	\$0 (Tier 2)	QL (300 mL / 30 days)
<i>cycloheptadine hcl syrup 2 mg/5ml</i>	\$0 (Tier 3)	PA; PA applies if 70 years and older after a 30 day supply in a calendar year

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>cypheptadine hcl tab 4 mg</i>	\$0 (Tier 3)	PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>desloratadine tab 5 mg</i>	\$0 (Tier 3)	QL (30 tabs / 30 days)
<i>diphenhydramine hcl inj 50 mg/ml</i>	\$0 (Tier 3)	
<i>hydroxyzine hcl im soln 25 mg/ml</i>	\$0 (Tier 4)	PA; PA applies if 70 years and older
<i>hydroxyzine hcl im soln 50 mg/ml</i>	\$0 (Tier 4)	PA; PA applies if 70 years and older
<i>hydroxyzine hcl syrup 10 mg/5ml</i>	\$0 (Tier 3)	PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>hydroxyzine hcl tab 10 mg</i>	\$0 (Tier 3)	PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>hydroxyzine hcl tab 25 mg</i>	\$0 (Tier 3)	PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>hydroxyzine hcl tab 50 mg</i>	\$0 (Tier 3)	PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>hydroxyzine pamoate cap 25 mg</i>	\$0 (Tier 3)	PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>hydroxyzine pamoate cap 50 mg</i>	\$0 (Tier 3)	PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)</i>	\$0 (Tier 4)	QL (300 mL / 30 days)
<i>levocetirizine dihydrochloride tab 5 mg</i>	\$0 (Tier 2)	QL (30 tabs / 30 days)
<i>olopatadine hcl nasal soln 0.6%</i>	\$0 (Tier 4)	
BETA AGONISTS - DRUGS TO TREAT ASTHMA AND COPD		
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	\$0 (Tier 3)	QL (2 inhalers / 30 days); (generic of Proair HFA)

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NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	\$0 (Tier 3)	QL (2 inhalers / 30 days); (generic of Proventil HFA)
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	\$0 (Tier 3)	QL (2 inhalers / 30 days); (generic of Ventolin HFA)
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	\$0 (Tier 3)	B/D
<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	\$0 (Tier 3)	B/D
<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i>	\$0 (Tier 2)	B/D
<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	\$0 (Tier 3)	B/D
<i>albuterol sulfate syrup 2 mg/5ml</i>	\$0 (Tier 3)	
<i>albuterol sulfate tab 2 mg</i>	\$0 (Tier 4)	
<i>albuterol sulfate tab 4 mg</i>	\$0 (Tier 4)	
<i>arformoterol tartrate soln nebu 15 mcg/2ml (base equiv)</i>	\$0 (Tier 4)	B/D
<i>formoterol fumarate soln nebu 20 mcg/2ml</i>	\$0 (Tier 4)	B/D
<i>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)</i>	\$0 (Tier 4)	B/D
<i>levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)</i>	\$0 (Tier 4)	B/D
<i>levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)</i>	\$0 (Tier 4)	B/D
<i>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)</i>	\$0 (Tier 4)	B/D
<i>levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)</i>	\$0 (Tier 3)	QL (2 inhalers / 30 days), ST
SEREVENT DIS AER 50MCG	\$0 (Tier 3)	QL (60 inhalations / 30 days)
<i>terbutaline sulfate tab 2.5 mg</i>	\$0 (Tier 4)	
<i>terbutaline sulfate tab 5 mg</i>	\$0 (Tier 4)	
VENTOLIN HFA (INSTITUTIONAL PACK)	\$0 (Tier 3)	QL (6 inhalers / 30 days)
VENTOLIN HFA AER	\$0 (Tier 3)	QL (2 inhalers / 30 days)
LEUKOTRIENE MODULATORS		
<i>montelukast sodium chew tab 4 mg (base equiv)</i>	\$0 (Tier 2)	
<i>montelukast sodium chew tab 5 mg (base equiv)</i>	\$0 (Tier 2)	

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>montelukast sodium oral granules packet 4 mg (base equiv)</i>	\$0 (Tier 4)	
<i>montelukast sodium tab 10 mg (base equiv)</i>	\$0 (Tier 1)	
<i>zafirlukast tab 10 mg</i>	\$0 (Tier 3)	
<i>zafirlukast tab 20 mg</i>	\$0 (Tier 3)	
MISCELLANEOUS		
<i>acetylcysteine inhal soln 10%</i>	\$0 (Tier 4)	B/D
<i>acetylcysteine inhal soln 20%</i>	\$0 (Tier 4)	B/D
ALYFTREK TAB 4-20-50	\$0 (Tier 5)	NDS, QL (84 tabs / 28 days), PA
ALYFTREK TAB 10-50-125	\$0 (Tier 5)	NDS, QL (56 tabs / 28 days), PA
ARALAST NP INJ 500MG	\$0 (Tier 5)	NDS, PA
ARALAST NP INJ 1000MG	\$0 (Tier 5)	NDS, PA
<i>cromolyn sodium soln nebu 20 mg/2ml</i>	\$0 (Tier 3)	B/D
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	\$0 (Tier 3)	(generic of Adrenaclick)
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	\$0 (Tier 3)	(generic of EpiPen)
<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i>	\$0 (Tier 3)	(generic of EpiPen)
<i>epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)</i>	\$0 (Tier 3)	(generic of Adrenaclick)
FASENRA INJ 10MG/0.5	\$0 (Tier 5)	NDS, QL (1 syringe / 28 days), PA
FASENRA INJ 30MG/ML	\$0 (Tier 5)	NDS, QL (1 syringe / 28 days), PA
FASENRA PEN INJ 30MG/ML	\$0 (Tier 5)	NDS, QL (1 pen / 28 days), PA
KALYDECO GRA 5.8MG	\$0 (Tier 5)	NDS, QL (56 packets / 28 days), PA
KALYDECO GRA 13.4MG	\$0 (Tier 5)	NDS, QL (56 packets / 28 days), PA
KALYDECO PAK 25MG	\$0 (Tier 5)	NDS, QL (56 packets / 28 days), PA
KALYDECO PAK 50MG	\$0 (Tier 5)	NDS, QL (56 packets / 28 days), PA
KALYDECO PAK 75MG	\$0 (Tier 5)	NDS, QL (56 packets / 28 days), PA
KALYDECO TAB 150MG	\$0 (Tier 5)	NDS, QL (60 tabs / 30 days), PA

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
OFEV CAP 100MG	\$0 (Tier 5) NDS, QL (60 caps / 30 days), PA
OFEV CAP 150MG	\$0 (Tier 5) NDS, QL (60 caps / 30 days), PA
ORKAMBI GRA 75-94MG	\$0 (Tier 5) NDS, QL (56 packets / 28 days), PA
ORKAMBI GRA 100-125	\$0 (Tier 5) NDS, QL (56 packets / 28 days), PA
ORKAMBI GRA 150-188	\$0 (Tier 5) NDS, QL (56 packets / 28 days), PA
ORKAMBI TAB 100-125	\$0 (Tier 5) NDS, QL (112 tabs / 28 days), PA
ORKAMBI TAB 200-125	\$0 (Tier 5) NDS, QL (112 tabs / 28 days), PA
<i>pirfenidone cap 267 mg</i>	\$0 (Tier 5) NDS, QL (270 caps / 30 days), PA
<i>pirfenidone tab 267 mg</i>	\$0 (Tier 5) NDS, QL (270 tabs / 30 days), PA
<i>pirfenidone tab 534 mg</i>	\$0 (Tier 5) NDS, QL (90 tabs / 30 days), PA
<i>pirfenidone tab 801 mg</i>	\$0 (Tier 5) NDS, QL (90 tabs / 30 days), PA
PROLASTIN-C INJ 1000MG	\$0 (Tier 5) NDS, PA
PULMOZYME SOL 1MG/ML	\$0 (Tier 5) NDS, PA
<i>roflumilast tab 250 mcg</i>	\$0 (Tier 4) QL (56 tabs / year)
<i>roflumilast tab 500 mcg</i>	\$0 (Tier 4) QL (30 tabs / 30 days)
SYMDEKO TAB 50-75MG	\$0 (Tier 5) NDS, QL (56 tabs / 28 days), PA
SYMDEKO TAB 100-150	\$0 (Tier 5) NDS, QL (56 tabs / 28 days), PA
THEO-24 CAP 100MG CR	\$0 (Tier 4)
THEO-24 CAP 200MG CR	\$0 (Tier 4)
THEO-24 CAP 300MG CR	\$0 (Tier 4)
THEO-24 CAP 400MG ER	\$0 (Tier 4)
<i>theophylline elixir 80 mg/15ml</i>	\$0 (Tier 4)
<i>theophylline soln 80 mg/15ml</i>	\$0 (Tier 4)
<i>theophylline tab er 12hr 100 mg</i>	\$0 (Tier 4)
<i>theophylline tab er 12hr 200 mg</i>	\$0 (Tier 4)
<i>theophylline tab er 12hr 300 mg</i>	\$0 (Tier 4)
<i>theophylline tab er 12hr 450 mg</i>	\$0 (Tier 4)
<i>theophylline tab er 24hr 400 mg</i>	\$0 (Tier 3)
<i>theophylline tab er 24hr 600 mg</i>	\$0 (Tier 3)

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NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
TRIKAFTA PAK 59.5MG	\$0 (Tier 5)	NDS, QL (56 packs / 28 days), PA
TRIKAFTA PAK 75MG	\$0 (Tier 5)	NDS, QL (56 packs / 28 days), PA
TRIKAFTA TAB 50-25-37.5MG & 75MG	\$0 (Tier 5)	NDS, QL (84 tabs / 28 days), PA
TRIKAFTA TAB 100-50-75MG & 150MG	\$0 (Tier 5)	NDS, QL (84 tabs / 28 days), PA
XOLAIR INJ 75/0.5	\$0 (Tier 5)	NDS, QL (4 pens / 28 days), PA
XOLAIR INJ 75/0.5	\$0 (Tier 5)	NDS, QL (4 syringes / 28 days), PA
XOLAIR INJ 150MG/ML	\$0 (Tier 5)	NDS, QL (8 pens / 28 days), PA
XOLAIR INJ 150MG/ML	\$0 (Tier 5)	NDS, QL (8 syringes / 28 days), PA
XOLAIR INJ 300/2ML	\$0 (Tier 5)	NDS, QL (4 pens / 28 days), PA
XOLAIR INJ 300/2ML	\$0 (Tier 5)	NDS, QL (4 syringes / 28 days), PA
XOLAIR SOL 150MG	\$0 (Tier 5)	NDS, QL (8 vials / 28 days), PA
ZEMAIRA INJ 1000MG	\$0 (Tier 5)	NDS, PA
ZEMAIRA INJ 4000MG	\$0 (Tier 5)	NDS, PA
ZEMAIRA INJ 5000MG	\$0 (Tier 5)	NDS, PA
NASAL STEROIDS - DRUGS TO TREAT ALLERGIES		
<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	\$0 (Tier 3)	QL (3 bottles / 30 days)
<i>fluticasone propionate nasal susp 50 mcg/act</i>	\$0 (Tier 2)	QL (1 bottle / 30 days)
<i>mometasone furoate nasal susp 50 mcg/act</i>	\$0 (Tier 4)	QL (2 inhalers / 30 days)
XHANCE MIS 93MCG	\$0 (Tier 4)	QL (32 mL / 30 days), PA
STEROID INHALANTS - DRUGS TO TREAT ASTHMA		
ALVESCO AER 80MCG	\$0 (Tier 4)	QL (3 inhalers / 30 days)
ALVESCO AER 160MCG	\$0 (Tier 4)	QL (2 inhalers / 30 days)
ARNUITY ELPT INH 50MCG	\$0 (Tier 3)	QL (30 inhalations / 30 days)
ARNUITY ELPT INH 100MCG	\$0 (Tier 3)	QL (30 inhalations / 30 days)

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NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
ARNUITY ELPT INH 200MCG	\$0 (Tier 3) QL (30 inhalations / 30 days)
<i>budesonide inhalation susp 0.5 mg/2ml</i>	\$0 (Tier 4) B/D
<i>budesonide inhalation susp 0.25 mg/2ml</i>	\$0 (Tier 4) B/D
<i>fluticasone propionate aer pow ba 50 mcg/act</i>	\$0 (Tier 3) QL (180 inhalations / 30 days)
<i>fluticasone propionate aer pow ba 100 mcg/act</i>	\$0 (Tier 3) QL (240 inhalations / 30 days)
<i>fluticasone propionate aer pow ba 250 mcg/act</i>	\$0 (Tier 3) QL (240 inhalations / 30 days)
<i>fluticasone propionate hfa inhal aer 110 mcg/act</i>	\$0 (Tier 3) QL (2 inhalers / 30 days)
<i>fluticasone propionate hfa inhal aer 220 mcg/act</i>	\$0 (Tier 3) QL (2 inhalers / 30 days)
<i>fluticasone propionate hfa inhal aero 44 mcg/act</i>	\$0 (Tier 3) QL (2 inhalers / 30 days)

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

ADVAIR HFA AER 45/21	\$0 (Tier 3) QL (1 inhaler / 30 days)
ADVAIR HFA AER 115/21	\$0 (Tier 3) QL (1 inhaler / 30 days)
ADVAIR HFA AER 230/21	\$0 (Tier 3) QL (1 inhaler / 30 days)
AIRSUPRA AER 90-80MCG	\$0 (Tier 3) QL (3 inhalers / 30 days)
BREO ELLIPTA INH 50-25MCG	\$0 (Tier 3) QL (60 blisters / 30 days)
BREO ELLIPTA INH 100-25	\$0 (Tier 3) QL (60 blisters / 30 days)
BREO ELLIPTA INH 200-25	\$0 (Tier 3) QL (60 blisters / 30 days)
<i>breyna aer 80/4.5</i>	\$0 (Tier 3) QL (3 inhalers / 30 days)
<i>breyna aer 160/4.5</i>	\$0 (Tier 3) QL (3 inhalers / 30 days)
<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i>	\$0 (Tier 3) QL (3 inhalers / 30 days)
<i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</i>	\$0 (Tier 3) QL (3 inhalers / 30 days)
DULERA AER 50-5MCG	\$0 (Tier 4) QL (3 inhalers / 30 days)
DULERA AER 100-5MCG	\$0 (Tier 4) QL (3 inhalers / 30 days)

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
DULERA AER 200-5MCG	\$0 (Tier 4)	QL (3 inhalers / 30 days)
<i>fluticasone-salmeterol aer powder ba 55-14 mcg/act</i>	\$0 (Tier 1)	QL (1 inhaler / 30 days)
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act</i>	\$0 (Tier 3)	QL (60 inhalations / 30 days); (generic PRASCO not covered)
<i>fluticasone-salmeterol aer powder ba 113-14 mcg/act</i>	\$0 (Tier 1)	QL (1 inhaler / 30 days)
<i>fluticasone-salmeterol aer powder ba 232-14 mcg/act</i>	\$0 (Tier 1)	QL (1 inhaler / 30 days)
<i>fluticasone-salmeterol aer powder ba 250-50 mcg/act</i>	\$0 (Tier 3)	QL (60 inhalations / 30 days); (generic PRASCO not covered)
<i>fluticasone-salmeterol aer powder ba 500-50 mcg/act</i>	\$0 (Tier 3)	QL (60 inhalations / 30 days); (generic PRASCO not covered)
SYMBICORT AER 80-4.5	\$0 (Tier 4)	QL (3 inhalers / 30 days)
SYMBICORT AER 160-4.5	\$0 (Tier 4)	QL (3 inhalers / 30 days)
<i>wixela inhub</i>	\$0 (Tier 3)	QL (60 inhalations / 30 days)

TOPICAL - DRUGS TO TREAT EAR AND SKIN CONDITIONS DERMATOLOGY, ACNE

<i>accutane</i>	\$0 (Tier 4)	PA
<i>amneesteem</i>	\$0 (Tier 4)	PA
<i>amneesteem cap 30mg</i>	\$0 (Tier 4)	PA
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	\$0 (Tier 4)	QL (46.6 gm / 30 days)
<i>claravis</i>	\$0 (Tier 4)	PA
<i>clindamycin phosphate gel 1% (once-daily)</i>	\$0 (Tier 3)	QL (75 mL / 30 days)
<i>clindamycin phosphate lotion 1%</i>	\$0 (Tier 3)	QL (60 mL / 30 days)
<i>clindamycin phosphate soln 1%</i>	\$0 (Tier 3)	QL (60 mL / 30 days)
<i>ery</i>	\$0 (Tier 3)	QL (60 pledgets / 30 days)
<i>erythromycin gel 2%</i>	\$0 (Tier 3)	QL (60 gm / 30 days)
<i>erythromycin soln 2%</i>	\$0 (Tier 3)	QL (60 mL / 30 days)
<i>isotretinoin cap 10 mg</i>	\$0 (Tier 4)	PA
<i>isotretinoin cap 20 mg</i>	\$0 (Tier 4)	PA
<i>isotretinoin cap 30 mg</i>	\$0 (Tier 4)	PA
<i>isotretinoin cap 40 mg</i>	\$0 (Tier 4)	PA

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>sulfacetamide sodium lotion 10% (acne)</i>	\$0 (Tier 4)	QL (118 mL / 30 days)
<i>tretinoin cream 0.1%</i>	\$0 (Tier 4)	QL (45 gm / 30 days), PA
<i>tretinoin cream 0.05%</i>	\$0 (Tier 4)	QL (45 gm / 30 days), PA
<i>tretinoin cream 0.025%</i>	\$0 (Tier 4)	QL (45 gm / 30 days), PA
<i>tretinoin gel 0.01%</i>	\$0 (Tier 4)	QL (45 gm / 30 days), PA
<i>tretinoin gel 0.025%</i>	\$0 (Tier 4)	QL (45 gm / 30 days), PA
<i>twice-daily clindamycin phosphate (topical)</i>	\$0 (Tier 3)	QL (75 gm / 30 days)
<i>zenatane</i>	\$0 (Tier 4)	PA
DERMATOLOGY, ANTIBIOTICS		
<i>gentamicin sulfate cream 0.1%</i>	\$0 (Tier 3)	QL (30 gm / 30 days)
<i>gentamicin sulfate oint 0.1%</i>	\$0 (Tier 3)	QL (30 gm / 30 days)
<i>mupirocin oint 2%</i>	\$0 (Tier 2)	QL (220 gm / 30 days)
<i>silver sulfadiazine cream 1%</i>	\$0 (Tier 2)	
<i>ssd</i>	\$0 (Tier 2)	
<i>SULFAMYLLON CRE 85MG/GM</i>	\$0 (Tier 4)	QL (453.6 gm / 30 days)
DERMATOLOGY, ANTIFUNGALS		
<i>ciclopirox gel 0.77%</i>	\$0 (Tier 3)	QL (100 gm / 30 days)
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	\$0 (Tier 3)	QL (90 gm / 30 days)
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	\$0 (Tier 3)	QL (60 mL / 30 days)
<i>ciclopirox shampoo 1%</i>	\$0 (Tier 3)	QL (120 mL / 30 days)
<i>clotrimazole cream 1%</i>	\$0 (Tier 2)	QL (45 gm / 30 days)
<i>clotrimazole soln 1%</i>	\$0 (Tier 3)	QL (60 mL / 30 days)
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	\$0 (Tier 3)	QL (45 gm / 30 days)
<i>econazole nitrate cream 1%</i>	\$0 (Tier 3)	QL (85 gm / 30 days)
<i>ketoconazole cream 2%</i>	\$0 (Tier 3)	QL (60 gm / 30 days)
<i>ketoconazole shampoo 2%</i>	\$0 (Tier 2)	QL (120 mL / 30 days)
<i>klayesta</i>	\$0 (Tier 3)	QL (60 gm / 30 days)
<i>nyamyc</i>	\$0 (Tier 3)	QL (60 gm / 30 days)
<i>nystatin cream 100000 unit/gm</i>	\$0 (Tier 2)	QL (30 gm / 30 days)
<i>nystatin oint 100000 unit/gm</i>	\$0 (Tier 2)	QL (30 gm / 30 days)
<i>nystatin topical powder 100000 unit/gm</i>	\$0 (Tier 3)	QL (60 gm / 30 days)
<i>nystop</i>	\$0 (Tier 3)	QL (60 gm / 30 days)
<i>selenium sulfide lotion 2.5%</i>	\$0 (Tier 2)	

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
DERMATOLOGY, ANTIPSORIATICS		
<i>acitretin cap 10 mg</i>	\$0 (Tier 4)	PA
<i>acitretin cap 17.5 mg</i>	\$0 (Tier 4)	PA
<i>acitretin cap 25 mg</i>	\$0 (Tier 4)	PA
<i>calcipotriene cream 0.005%</i>	\$0 (Tier 4)	QL (120 gm / 30 days), PA
<i>calcipotriene oint 0.005%</i>	\$0 (Tier 4)	QL (120 gm / 30 days), PA
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	\$0 (Tier 3)	QL (120 mL / 30 days), PA
<i>calcitrene</i>	\$0 (Tier 4)	QL (120 gm / 30 days), PA
ENSTILAR AER	\$0 (Tier 5)	NDS, QL (120 gm / 30 days), PA
<i>methoxsalen rapid cap 10 mg</i>	\$0 (Tier 5)	NDS
<i>tazarotene cream 0.1%</i>	\$0 (Tier 3)	QL (60 gm / 30 days), PA
<i>tazarotene cream 0.05%</i>	\$0 (Tier 3)	QL (60 gm / 30 days), PA
TAZORAC CRE 0.05%	\$0 (Tier 4)	QL (60 gm / 30 days), PA
DERMATOLOGY, CORTICOSTEROIDS		
<i>ala-cort</i>	\$0 (Tier 1)	
<i>alclometasone dipropionate cream 0.05%</i>	\$0 (Tier 3)	QL (60 gm / 30 days)
<i>alclometasone dipropionate oint 0.05%</i>	\$0 (Tier 3)	QL (60 gm / 30 days)
<i>betamethasone dipropionate augmented cream 0.05%</i>	\$0 (Tier 2)	QL (120 gm / 30 days)
<i>betamethasone dipropionate augmented gel 0.05%</i>	\$0 (Tier 4)	QL (120 gm / 30 days)
<i>betamethasone dipropionate augmented lotion 0.05%</i>	\$0 (Tier 4)	QL (120 mL / 30 days)
<i>betamethasone dipropionate augmented oint 0.05%</i>	\$0 (Tier 4)	QL (120 gm / 30 days)
<i>betamethasone dipropionate cream 0.05%</i>	\$0 (Tier 3)	QL (120 gm / 30 days)
<i>betamethasone dipropionate lotion 0.05%</i>	\$0 (Tier 3)	QL (120 mL / 30 days)
<i>betamethasone dipropionate oint 0.05%</i>	\$0 (Tier 4)	QL (120 gm / 30 days)
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	\$0 (Tier 3)	QL (120 gm / 30 days)
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	\$0 (Tier 3)	QL (120 mL / 30 days)
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	\$0 (Tier 3)	QL (120 gm / 30 days)

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>clobetasol propionate cream 0.05%</i>	\$0 (Tier 4)	QL (60 gm / 30 days)
<i>clobetasol propionate e</i>	\$0 (Tier 4)	QL (60 gm / 30 days)
<i>clobetasol propionate gel 0.05%</i>	\$0 (Tier 4)	QL (60 gm / 30 days)
<i>clobetasol propionate oint 0.05%</i>	\$0 (Tier 4)	QL (60 gm / 30 days)
<i>clobetasol propionate soln 0.05%</i>	\$0 (Tier 4)	QL (50 mL / 30 days)
<i>fluocinolone acetonide cream 0.01%</i>	\$0 (Tier 4)	QL (60 gm / 30 days)
<i>fluocinolone acetonide cream 0.025%</i>	\$0 (Tier 4)	QL (120 gm / 30 days)
<i>fluocinolone acetonide oil 0.01% (body oil)</i>	\$0 (Tier 3)	QL (118.28 mL / 30 days)
<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>	\$0 (Tier 3)	QL (118.28 mL / 30 days)
<i>fluocinolone acetonide oint 0.025%</i>	\$0 (Tier 3)	QL (120 gm / 30 days)
<i>fluocinolone acetonide soln 0.01%</i>	\$0 (Tier 4)	QL (60 mL / 30 days)
<i>fluocinonide cream 0.05%</i>	\$0 (Tier 3)	QL (120 gm / 30 days)
<i>fluocinonide emulsified base cream 0.05%</i>	\$0 (Tier 3)	QL (120 gm / 30 days)
<i>fluocinonide gel 0.05%</i>	\$0 (Tier 4)	QL (60 gm / 30 days)
<i>fluocinonide oint 0.05%</i>	\$0 (Tier 4)	QL (60 gm / 30 days)
<i>fluocinonide soln 0.05%</i>	\$0 (Tier 3)	QL (60 mL / 30 days)
<i>fluticasone propionate cream 0.05%</i>	\$0 (Tier 3)	
<i>fluticasone propionate oint 0.005%</i>	\$0 (Tier 3)	
<i>halobetasol propionate cream 0.05%</i>	\$0 (Tier 4)	QL (50 gm / 30 days)
<i>halobetasol propionate oint 0.05%</i>	\$0 (Tier 4)	QL (50 gm / 30 days)
<i>hydrocortisone cream 1%</i>	\$0 (Tier 1)	
<i>hydrocortisone cream 2.5%</i>	\$0 (Tier 2)	
<i>hydrocortisone lotion 2.5%</i>	\$0 (Tier 2)	
<i>hydrocortisone oint 1%</i>	\$0 (Tier 2)	QL (30 gm / 30 days)
<i>hydrocortisone oint 2.5%</i>	\$0 (Tier 2)	
<i>hydrocortisone valerate cream 0.2%</i>	\$0 (Tier 3)	QL (60 gm / 30 days)
<i>mometasone furoate cream 0.1%</i>	\$0 (Tier 3)	
<i>mometasone furoate oint 0.1%</i>	\$0 (Tier 3)	
<i>mometasone furoate solution 0.1% (lotion)</i>	\$0 (Tier 3)	
<i>triamcinolone acetonide cream 0.1%</i>	\$0 (Tier 2)	QL (454 gm / 30 days)
<i>triamcinolone acetonide cream 0.5%</i>	\$0 (Tier 2)	QL (454 gm / 30 days)
<i>triamcinolone acetonide cream 0.025%</i>	\$0 (Tier 2)	QL (454 gm / 30 days)
<i>triamcinolone acetonide lotion 0.1%</i>	\$0 (Tier 3)	
<i>triamcinolone acetonide lotion 0.025%</i>	\$0 (Tier 3)	
<i>triamcinolone acetonide oint 0.1%</i>	\$0 (Tier 2)	
<i>triamcinolone acetonide oint 0.5%</i>	\$0 (Tier 2)	
<i>triamcinolone acetonide oint 0.025%</i>	\$0 (Tier 2)	
<i>triderm</i>	\$0 (Tier 2)	QL (454 gm / 30 days)

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
DERMATOLOGY, LOCAL ANESTHETICS		
<i>glydo</i>	\$0 (Tier 3)	QL (60 mL / 30 days), PA
<i>lidocaine hcl soln 4%</i>	\$0 (Tier 3)	QL (50 mL / 30 days), PA
<i>lidocaine oint 5%</i>	\$0 (Tier 4)	QL (50 gm / 30 days), PA
<i>lidocaine patch 5%</i>	\$0 (Tier 4)	QL (3 patches / 1 day), PA
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	\$0 (Tier 2)	B/D, QL (30 gm / 30 days)
<i>lidocan</i>	\$0 (Tier 4)	QL (3 patches / 1 day), PA
<i>tridacaine dis 5% patch</i>	\$0 (Tier 4)	QL (3 patches / 1 day), PA
DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE		
<i>azelaic acid gel 15%</i>	\$0 (Tier 4)	QL (50 gm / 30 days)
<i>bexarotene gel 1%</i>	\$0 (Tier 5)	NDS, QL (60 gm / 30 days), PA
<i>diclofenac sodium soln 1.5%</i>	\$0 (Tier 3)	QL (300 mL / 28 days)
<i>fluorouracil cream 5%</i>	\$0 (Tier 4)	QL (40 gm / 30 days)
<i>fluorouracil soln 2%</i>	\$0 (Tier 3)	QL (10 mL / 30 days)
<i>fluorouracil soln 5%</i>	\$0 (Tier 3)	QL (10 mL / 30 days)
<i>hydrocortisone perianal cream 1%</i>	\$0 (Tier 3)	
<i>hydrocortisone perianal cream 2.5%</i>	\$0 (Tier 3)	
<i>imiquimod cream 5%</i>	\$0 (Tier 3)	QL (24 packets / 30 days)
<i>lactic acid (ammonium lactate) cream 12%</i>	\$0 (Tier 2)	
<i>lactic acid (ammonium lactate) lotion 12%</i>	\$0 (Tier 2)	
<i>metronidazole cream 0.75%</i>	\$0 (Tier 3)	QL (45 gm / 30 days)
<i>metronidazole gel 0.75%</i>	\$0 (Tier 3)	QL (45 gm / 30 days)
<i>metronidazole lotion 0.75%</i>	\$0 (Tier 4)	QL (59 mL / 30 days)
<i>nitroglycerin oint 0.4%</i>	\$0 (Tier 4)	QL (30 gm / 30 days)
PANRETIN GEL 0.1%	\$0 (Tier 5)	NDS, QL (60 gm / 30 days), PA
<i>pimecrolimus cream 1%</i>	\$0 (Tier 4)	QL (100 gm / 30 days), PA
<i>podofilox soln 0.5%</i>	\$0 (Tier 3)	QL (7 mL / 28 days)
<i>procto-med hc</i>	\$0 (Tier 3)	
<i>proctocort cre 1%</i>	\$0 (Tier 3)	
<i>proctosol hc</i>	\$0 (Tier 3)	

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

NAME OF DRUG	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>proctozone-hc</i>	\$0 (Tier 3)
<i>tacrolimus oint 0.1%</i>	\$0 (Tier 4) QL (100 gm / 30 days), PA
<i>tacrolimus oint 0.03%</i>	\$0 (Tier 4) QL (100 gm / 30 days), PA
VALCHLOR GEL 0.016%	\$0 (Tier 5) NDS, QL (60 gm / 30 days), PA
DERMATOLOGY, SCABICIDES AND PEDICULIDES	
<i>malathion lotion 0.5%</i>	\$0 (Tier 4) QL (59 mL / 30 days)
<i>permethrin cream 5%</i>	\$0 (Tier 3) QL (60 gm / 30 days)
DERMATOLOGY, WOUND CARE AGENTS	
SANTYL OIN 250/GM	\$0 (Tier 4) QL (180 gm / 30 days)
<i>sodium chloride irrigation soln 0.9%</i>	\$0 (Tier 3)
<i>water for irrigation, sterile irrigation soln</i>	\$0 (Tier 2)
MOUTH/THROAT/DENTAL AGENTS	
<i>cevimeline hcl cap 30 mg</i>	\$0 (Tier 4)
<i>chlorhexidine gluconate soln 0.12%</i>	\$0 (Tier 1)
<i>clotrimazole troche 10 mg</i>	\$0 (Tier 3) QL (150 lozenges / 30 days)
<i>kourzeq</i>	\$0 (Tier 3)
<i>lidocaine hcl viscous soln 2%</i>	\$0 (Tier 2)
<i>nystatin susp 100000 unit/ml</i>	\$0 (Tier 2)
<i>periogard</i>	\$0 (Tier 1)
<i>pilocarpine hcl tab 5 mg</i>	\$0 (Tier 3)
<i>pilocarpine hcl tab 7.5 mg</i>	\$0 (Tier 3)
<i>triamcinolone acetonide dental paste 0.1%</i>	\$0 (Tier 3)

D. Índice de Medicamentos Abrangidos

Nesta secção, pode encontrar um medicamento procurando o seu nome alfabeticamente. Isto indica-lhe o número da página onde pode encontrar informação adicional de cobertura para o seu medicamento.

Se tiver dúvidas, contacte o CCA Senior Care Options através do número 866-610-2273 (TTY 711), das 8 AM às 8 PM, 7 dias por semana. A chamada é gratuita. **Para obter mais informações**, visite ccama.org.



Index

A	
<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	29
<i>abacavir sulfate tab 300 mg (base equiv)</i>	29
<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	30
<i>abigale lo tab 0.5-0.1</i>	118
<i>abigale tab 1-0.5mg</i>	118
ABILIFY ASIM INJ 720MG	83
ABILIFY ASIM INJ 960MG	83
ABILIFY MAIN INJ 300MG	83
ABILIFY MAIN INJ 400MG	83
<i>abiraterone acetate tab 250 mg</i>	41
<i>abiraterone acetate tab 500 mg</i>	41
<i>abirtega tab 250mg</i>	41
ABRYSVO INJ	140
<i>acamprosate calcium tab delayed release 333 mg</i>	105
<i>acarbose tab 100 mg</i>	106
<i>acarbose tab 25 mg</i>	106
<i>acarbose tab 50 mg</i>	106
accutane	155
<i>acebutolol hcl cap 200 mg</i>	66
<i>acebutolol hcl cap 400 mg</i>	66
<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	23
<i>acetaminophen w/ codeine tab 300-15 mg</i>	23
<i>acetaminophen w/ codeine tab 300-30 mg</i>	23
<i>acetaminophen w/ codeine tab 300-60 mg</i>	23
<i>acetazolamide cap er 12hr 500 mg</i> ...	70
<i>acetazolamide tab 125 mg</i>	70
<i>acetazolamide tab 250 mg</i>	70
<i>acetic acid irrigation soln 0.25%</i> ...	130
<i>acetic acid otic soln 2%</i>	147
<i>acetylcysteine inhal soln 10%</i>	151
<i>acetylcysteine inhal soln 20%</i>	151
<i>acitretin cap 10 mg</i>	157
<i>acitretin cap 17.5 mg</i>	157
<i>acitretin cap 25 mg</i>	157
ACTHIB INJ	140
ACTIMMUNE INJ 2MU/0.5	139
<i>acyclovir cap 200 mg</i>	32
<i>acyclovir sodium iv soln 50 mg/ml</i> ...	32
<i>acyclovir susp 200 mg/5ml</i>	32
<i>acyclovir tab 400 mg</i>	32
<i>acyclovir tab 800 mg</i>	32
ADACEL INJ	140
ADALIMU-AACF INJ 40/0.8ML	134
ADALIMU-AACF KIT 40/0.8ML	134
<i>adefovir dipivoxil tab 10 mg</i>	32
ADEMPAS TAB 0.5MG	73
ADEMPAS TAB 1.5MG	73
ADEMPAS TAB 1MG	73
ADEMPAS TAB 2.5MG	73
ADEMPAS TAB 2MG	73
ADMELOG INJ 100U/ML	109
ADMELOG SOLO INJ 100U/ML	109
ADVAIR HFA AER 115/21	154
ADVAIR HFA AER 230/21	154
ADVAIR HFA AER 45/21	154
<i>afirmelle</i>	113
AFREZZA POW 12 UNIT	109
AFREZZA POW 4-8 UNIT	109
AFREZZA POW 4-8-12	109
AFREZZA POW 4UNIT	109
AFREZZA POW 8 UNIT	109
AFREZZA POW 8-12UNIT	109
AIMOVIG INJ 140MG/ML	101
AIMOVIG INJ 70MG/ML	101
AIRSUPRA AER 90-80MCG	154
AKEEGA TAB 100/500	41
AKEEGA TAB 50/500MG	41
<i>ala-cort</i>	157
<i>albendazole tab 200 mg</i>	24
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	149, 150
<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i>	150
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	150
<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	150
<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	150
<i>albuterol sulfate syrup 2 mg/5ml</i> ...	150
<i>albuterol sulfate tab 2 mg</i>	150

<i>albuterol sulfate tab 4 mg</i>	150	<i>amantadine hcl cap 100 mg</i>	80
<i>alclometasone dipropionate cream</i>		<i>amantadine hcl soln 50 mg/5ml</i>	80
<i>0.05%</i>	157	<i>amantadine hcl tab 100 mg</i>	80
<i>alclometasone dipropionate oint 0.05%</i>		<i>ambrisentan tab 10 mg</i>	73
.....	157	<i>ambrisentan tab 5 mg</i>	73
ALCOHOL SWABS: BD-		<i>amethia tab</i>	113
EMBECTA/MHC/RUGBY.....	109	<i>amethyst</i>	113
ALDURAZYME INJ 2.9MG/5M	121	<i>amikacin sulfate inj 1 gm/4ml (250</i>	
ALECENSA CAP 150MG	44	<i>mg/ml)</i>	25
<i>alendronate sodium oral soln 70</i>		<i>amikacin sulfate inj 500 mg/2ml (250</i>	
<i>mg/75ml</i>	112	<i>mg/ml)</i>	25
<i>alendronate sodium tab 10 mg</i>	112	<i>amiloride & hydrochlorothiazide tab 5-</i>	
<i>alendronate sodium tab 35 mg</i>	112	<i>50 mg</i>	70
<i>alendronate sodium tab 70 mg</i>	112	<i>amiloride hcl tab 5 mg</i>	70
<i>alfuzosin hcl tab er 24hr 10 mg</i>	130	<i>amiodarone hcl inj 150 mg/3ml (50</i>	
<i>aliskiren fumarate tab 150 mg (base</i>		<i>mg/ml)</i>	63
<i>equivalent)</i>	71	<i>amiodarone hcl inj 450 mg/9ml (50</i>	
<i>aliskiren fumarate tab 300 mg (base</i>		<i>mg/ml)</i>	63
<i>equivalent)</i>	71	<i>amiodarone hcl inj 900 mg/18ml (50</i>	
<i>allopurinol tab 100 mg</i>	20	<i>mg/ml)</i>	63
<i>allopurinol tab 300 mg</i>	20	<i>amiodarone hcl tab 100 mg</i>	63
<i>alosetron hcl tab 0.5 mg (base equiv)</i>		<i>amiodarone hcl tab 200 mg</i>	63
.....	128	<i>amiodarone hcl tab 400 mg</i>	63
<i>alosetron hcl tab 1 mg (base equiv)</i>	128	<i>amitriptyline hcl tab 10 mg</i>	76
<i>alprazolam tab 0.25 mg</i>	74	<i>amitriptyline hcl tab 100 mg</i>	76
<i>alprazolam tab 0.5 mg</i>	74	<i>amitriptyline hcl tab 150 mg</i>	76
<i>alprazolam tab 1 mg</i>	74	<i>amitriptyline hcl tab 25 mg</i>	76
<i>alprazolam tab 2 mg</i>	74	<i>amitriptyline hcl tab 50 mg</i>	76
<i>altavera</i>	113	<i>amitriptyline hcl tab 75 mg</i>	76
ALUNBRIG PAK	44	<i>amlodipine besylate tab 10 mg (base</i>	
ALUNBRIG TAB 180MG	44	<i>equivalent)</i>	67
ALUNBRIG TAB 30MG	44	<i>amlodipine besylate tab 2.5 mg (base</i>	
ALUNBRIG TAB 90MG	44	<i>equivalent)</i>	67
ALVAIZ TAB 18MG	133	<i>amlodipine besylate tab 5 mg (base</i>	
ALVAIZ TAB 36MG	133	<i>equivalent)</i>	67
ALVAIZ TAB 54MG	133	<i>amlodipine besylate-atorvastatin</i>	
ALVAIZ TAB 9MG	133	<i>calcium tab 10-10 mg</i>	71
ALVESCO AER 160MCG	153	<i>amlodipine besylate-atorvastatin</i>	
ALVESCO AER 80MCG.....	153	<i>calcium tab 10-20 mg</i>	71
<i>alyacen 1/35</i>	113	<i>amlodipine besylate-atorvastatin</i>	
<i>alyacen 7/7/7</i>	113	<i>calcium tab 10-40 mg</i>	71
ALYFTREK TAB 10-50-125	151	<i>amlodipine besylate-atorvastatin</i>	
ALYFTREK TAB 4-20-50	151	<i>calcium tab 10-80 mg</i>	71
ALYGLO INJ 10/100ML.....	138	<i>amlodipine besylate-atorvastatin</i>	
ALYGLO INJ 20/200ML.....	138	<i>calcium tab 2.5-10 mg</i>	71
ALYGLO INJ 5GM/50ML.....	138	<i>amlodipine besylate-atorvastatin</i>	
<i>alyq</i>	73	<i>calcium tab 2.5-20 mg</i>	71

<i>amlodipine besylate-atorvastatin</i>		
<i>calcium tab 2.5-40 mg</i>	71	
<i>amlodipine besylate-atorvastatin</i>		
<i>calcium tab 5-10 mg</i>	71	
<i>amlodipine besylate-atorvastatin</i>		
<i>calcium tab 5-20 mg</i>	71	
<i>amlodipine besylate-atorvastatin</i>		
<i>calcium tab 5-40 mg</i>	71	
<i>amlodipine besylate-atorvastatin</i>		
<i>calcium tab 5-80 mg</i>	71	
<i>amlodipine besylate-benazepril hcl cap</i>		
<i>10-20 mg</i>	58	
<i>amlodipine besylate-benazepril hcl cap</i>		
<i>10-40 mg</i>	58	
<i>amlodipine besylate-benazepril hcl cap</i>		
<i>2.5-10 mg</i>	57	
<i>amlodipine besylate-benazepril hcl cap</i>		
<i>5-10 mg</i>	58	
<i>amlodipine besylate-benazepril hcl cap</i>		
<i>5-20 mg</i>	58	
<i>amlodipine besylate-benazepril hcl cap</i>		
<i>5-40 mg</i>	58	
<i>amlodipine besylate-olmesartan</i>		
<i>medoxomil tab 10-20 mg</i>	60	
<i>amlodipine besylate-olmesartan</i>		
<i>medoxomil tab 10-40 mg</i>	60	
<i>amlodipine besylate-olmesartan</i>		
<i>medoxomil tab 5-20 mg</i>	60	
<i>amlodipine besylate-olmesartan</i>		
<i>medoxomil tab 5-40 mg</i>	60	
<i>amlodipine besylate-valsartan tab 10-</i>		
<i>160 mg</i>	60	
<i>amlodipine besylate-valsartan tab 10-</i>		
<i>320 mg</i>	60	
<i>amlodipine besylate-valsartan tab 5-</i>		
<i>160 mg</i>	60	
<i>amlodipine besylate-valsartan tab 5-</i>		
<i>320 mg</i>	60	
<i>amnestem</i>	155	
<i>amnestem cap 30mg</i>	155	
<i>amoxapine tab 100 mg</i>	76	
<i>amoxapine tab 150 mg</i>	76	
<i>amoxapine tab 25 mg</i>	76	
<i>amoxapine tab 50 mg</i>	76	
<i>amoxicillin & k clavulanate for susp</i>		
<i>200-28.5 mg/5ml</i>	36	
<i>amoxicillin & k clavulanate for susp</i>		
<i>250-62.5 mg/5ml</i>	36	
<i>amoxicillin & k clavulanate for susp</i>		
<i>400-57 mg/5ml</i>	36	
<i>amoxicillin & k clavulanate for susp</i>		
<i>600-42.9 mg/5ml</i>	36	
<i>amoxicillin & k clavulanate tab 250-125</i>		
<i>mg</i>	36	
<i>amoxicillin & k clavulanate tab 500-125</i>		
<i>mg</i>	36	
<i>amoxicillin & k clavulanate tab 875-125</i>		
<i>mg</i>	36	
<i>amoxicillin & k clavulanate tab er 12hr</i>		
<i>1000-62.5 mg</i>	36	
<i>amoxicillin (trihydrate) cap 250 mg</i> ..	36	
<i>amoxicillin (trihydrate) cap 500 mg</i> ..	36	
<i>amoxicillin (trihydrate) chew tab 125</i>		
<i>mg</i>	36	
<i>amoxicillin (trihydrate) chew tab 250</i>		
<i>mg</i>	36	
<i>amoxicillin (trihydrate) for susp 125</i>		
<i>mg/5ml</i>	36	
<i>amoxicillin (trihydrate) for susp 200</i>		
<i>mg/5ml</i>	36	
<i>amoxicillin (trihydrate) for susp 250</i>		
<i>mg/5ml</i>	36	
<i>amoxicillin (trihydrate) for susp 400</i>		
<i>mg/5ml</i>	36	
<i>amoxicillin (trihydrate) tab 500 mg</i> ..	36	
<i>amoxicillin (trihydrate) tab 875 mg</i> ..	36	
<i>amphetamine-dextroamphetamine cap</i>		
<i>er 24hr 10 mg</i>	98	
<i>amphetamine-dextroamphetamine cap</i>		
<i>er 24hr 15 mg</i>	98	
<i>amphetamine-dextroamphetamine cap</i>		
<i>er 24hr 20 mg</i>	98	
<i>amphetamine-dextroamphetamine cap</i>		
<i>er 24hr 25 mg</i>	98	
<i>amphetamine-dextroamphetamine cap</i>		
<i>er 24hr 30 mg</i>	98	
<i>amphetamine-dextroamphetamine cap</i>		
<i>er 24hr 5 mg</i>	98	
<i>amphetamine-dextroamphetamine tab</i>		
<i>10 mg</i>	98	
<i>amphetamine-dextroamphetamine tab</i>		
<i>12.5 mg</i>	98	

<i>amphetamine-dextroamphetamine tab</i> <i>15 mg</i>	98	APTIOM TAB 800MG.....	90
<i>amphetamine-dextroamphetamine tab</i> <i>20 mg</i>	98	APTIVUS CAP 250MG	29
<i>amphetamine-dextroamphetamine tab</i> <i>30 mg</i>	99	ARALAST NP INJ 1000MG	151
<i>amphetamine-dextroamphetamine tab</i> <i>5 mg</i>	98	ARALAST NP INJ 500MG	151
<i>amphetamine-dextroamphetamine tab</i> <i>7.5 mg</i>	98	<i>aranelle</i>	113
<i>amphotericin b for iv soln 50 mg</i>	27	ARCALYST INJ 220MG	139
<i>amphotericin b liposome iv for susp 50</i> <i>mg</i>	28	AREXVY INJ 120MCG.....	140
<i>ampicillin & sulbactam sodium for inj</i> <i>1.5 (1-0.5) gm</i>	36	<i>arformoterol tartrate soln nebu 15</i> <i>mcg/2ml (base equiv)</i>	150
<i>ampicillin & sulbactam sodium for inj 3</i> <i>(2-1) gm</i>	36	ARIKAYCE SUS.....	25
<i>ampicillin & sulbactam sodium for iv</i> <i>soln 1.5 (1-0.5) gm</i>	37	<i>aripiprazole oral solution 1 mg/ml</i>	83
<i>ampicillin & sulbactam sodium for iv</i> <i>soln 15 (10-5) gm</i>	37	<i>aripiprazole orally disintegrating tab 10</i> <i>mg</i>	83
<i>ampicillin & sulbactam sodium for iv</i> <i>soln 3 (2-1) gm</i>	37	<i>aripiprazole orally disintegrating tab 15</i> <i>mg</i>	83
<i>ampicillin cap 500 mg</i>	37	<i>aripiprazole tab 10 mg</i>	83
<i>ampicillin sodium for inj 1 gm</i>	37	<i>aripiprazole tab 15 mg</i>	83
<i>ampicillin sodium for inj 125 mg</i>	37	<i>aripiprazole tab 2 mg</i>	83
<i>ampicillin sodium for inj 2 gm</i>	37	<i>aripiprazole tab 20 mg</i>	83
<i>ampicillin sodium for inj 250 mg</i>	37	<i>aripiprazole tab 30 mg</i>	83
<i>ampicillin sodium for inj 500 mg</i>	37	<i>aripiprazole tab 5 mg</i>	83
<i>ampicillin sodium for iv soln 1 gm</i>	37	ARISTADA INJ 1064MG	83
<i>ampicillin sodium for iv soln 10 gm</i>	37	ARISTADA INJ 441MG/1.	83
<i>ampicillin sodium for iv soln 2 gm</i>	37	ARISTADA INJ 662MG/2	83
<i>anagrelide hcl cap 0.5 mg</i>	133	ARISTADA INJ 882MG/3	83
<i>anagrelide hcl cap 1 mg</i>	133	ARISTADA INJ INITIO	83
<i>anastrozole tab 1 mg</i>	41	<i>armodafinil tab 150 mg</i>	105
ANORO ELLIPT AER 62.5-25	148	<i>armodafinil tab 200 mg</i>	105
APIDRA INJ SOLOSTAR.....	109	<i>armodafinil tab 250 mg</i>	105
APIDRA INJ U-100	109	<i>armodafinil tab 50 mg</i>	105
<i>aprepitant capsule 125 mg</i>	125	ARNUITY ELPT INH 100MCG.....	153
<i>aprepitant capsule 40 mg</i>	125	ARNUITY ELPT INH 200MCG.....	154
<i>aprepitant capsule 80 mg</i>	125	ARNUITY ELPT INH 50MCG.....	153
<i>aprepitant capsule therapy pack 80 &</i> <i>125 mg</i>	125	<i>asenapine maleate sl tab 10 mg (base</i> <i>equiv)</i>	83
<i>apri</i>	113	<i>asenapine maleate sl tab 2.5 mg (base</i> <i>equiv)</i>	83
APTIOM TAB 200MG	90	<i>asenapine maleate sl tab 5 mg (base</i> <i>equiv)</i>	83
APTIOM TAB 400MG	90	<i>ashlyna</i>	113
APTIOM TAB 600MG	90	<i>aspirin-dipyridamole cap er 12hr 25-</i> <i>200 mg</i>	134
		ASTAGRAF XL CAP 0.5MG	139
		ASTAGRAF XL CAP 1MG.....	139
		ASTAGRAF XL CAP 5MG.....	139
		<i>atazanavir sulfate cap 150 mg (base</i> <i>equiv)</i>	29

<i>atazanavir sulfate cap 200 mg (base equiv)</i>	29	<i>aurovela fe 1/20</i>	114
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	29	AUSTEDO TAB 12MG	102
<i>atenolol & chlorthalidone tab 100-25 mg</i>	66	AUSTEDO TAB 6MG	102
<i>atenolol & chlorthalidone tab 50-25 mg</i>	66	AUSTEDO TAB 9MG	102
<i>atenolol tab 100 mg</i>	66	AUSTEDO XR TAB 12MG	103
<i>atenolol tab 25 mg</i>	66	AUSTEDO XR TAB 18MG	103
<i>atenolol tab 50 mg</i>	66	AUSTEDO XR TAB 24MG	103
<i>atomoxetine hcl cap 10 mg (base equiv)</i>	99	AUSTEDO XR TAB 30MG ER	103
<i>atomoxetine hcl cap 100 mg (base equiv)</i>	99	AUSTEDO XR TAB 36MG ER	103
<i>atomoxetine hcl cap 18 mg (base equiv)</i>	99	AUSTEDO XR TAB 42MG ER	103
<i>atomoxetine hcl cap 25 mg (base equiv)</i>	99	AUSTEDO XR TAB 48MG ER	103
<i>atomoxetine hcl cap 40 mg (base equiv)</i>	99	AUSTEDO XR TAB 6MG	103
<i>atomoxetine hcl cap 60 mg (base equiv)</i>	99	AUSTEDO XR TAB TITR KIT	103
<i>atomoxetine hcl cap 80 mg (base equiv)</i>	99	AUVELITY TAB 45-105MG	76
<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	64	<i>aviane</i>	114
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	64	AVMAPKI PAK FAKZYNJA	44
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	64	<i>ayuna</i>	114
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	64	AYVAKIT TAB 100MG	44
<i>atovaquone susp 750 mg/5ml</i>	25	AYVAKIT TAB 200MG	44
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	28	AYVAKIT TAB 25MG	44
<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	28	AYVAKIT TAB 300MG	44
ATROPINE SUL SOL 1% OP	147	AYVAKIT TAB 50MG	44
<i>atropine sulfate ophth soln 1%</i>	147	<i>azacitidine for inj 100 mg</i>	39
ATROVENT HFA AER 17MCG	148	<i>azathioprine tab 50 mg</i>	139
<i>aubra eq</i>	113	<i>azelaic acid gel 15%</i>	159
AUGTYRO CAP 160MG	44	<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	148
AUGTYRO CAP 40MG	44	<i>azelastine hcl ophth soln 0.05%</i>	146
<i>aurovela 1/20</i>	113	<i>azithromycin for susp 100 mg/5ml</i> ...	35
<i>aurovela 24 fe</i>	113	<i>azithromycin for susp 200 mg/5ml</i> ...	35
<i>aurovela fe 1.5/30</i>	113	<i>azithromycin iv for soln 500 mg</i>	35
		<i>azithromycin powd pack for susp 1 gm</i>	35
		<i>azithromycin tab 250 mg</i>	35
		<i>azithromycin tab 500 mg</i>	35
		<i>azithromycin tab 600 mg</i>	35
		<i>aztreonam for inj 1 gm</i>	25
		<i>aztreonam for inj 2 gm</i>	25
		<i>azurette</i>	114
		B	
		<i>bacitracin ophth oint 500 unit/gm</i> ..	145
		<i>bacitracin-polymyxin b ophth oint</i> ..	145
		<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	145
		<i>baclofen tab 10 mg</i>	104
		<i>baclofen tab 20 mg</i>	104
		<i>baclofen tab 5 mg</i>	104

BAFIERTAM CAP 95MG.....	103	<i>betamethasone dipropionate cream</i>	
<i>balsalazide disodium cap 750 mg ...</i>	127	0.05%.....	157
BALVERSA TAB 3MG.....	45	<i>betamethasone dipropionate lotion</i>	
BALVERSA TAB 4MG.....	45	0.05%.....	157
BALVERSA TAB 5MG.....	45	<i>betamethasone dipropionate oint</i>	
<i>balziva</i>	114	0.05%.....	157
BAQSIMI ONE POW 3MG/DOSE.....	121	<i>betamethasone valerate cream 0.1%</i>	
BARACLUDE SOL	32	(base equivalent).....	157
BASAGLAR INJ 100UNIT	109	<i>betamethasone valerate lotion 0.1%</i>	
BASAGLAR INJ TEMPO PN	109	(base equivalent).....	157
BCG VACCINE INJ 50MG	140	<i>betamethasone valerate oint 0.1%</i>	
<i>benazepril & hydrochlorothiazide tab</i>		(base equivalent).....	157
10-12.5 mg.....	58	BETASERON INJ 0.3MG	104
<i>benazepril & hydrochlorothiazide tab</i>		<i>betaxolol hcl ophth soln 0.5%</i>	146
20-12.5 mg.....	58	<i>bethanechol chloride tab 10 mg.....</i>	130
<i>benazepril & hydrochlorothiazide tab</i>		<i>bethanechol chloride tab 25 mg.....</i>	130
20-25 mg	58	<i>bethanechol chloride tab 5 mg.....</i>	130
<i>benazepril & hydrochlorothiazide tab 5-</i>		<i>bethanechol chloride tab 50 mg.....</i>	130
6.25mg	58	BETOPTIC-S SUS 0.25% OP	146
<i>benazepril hcl tab 10 mg.....</i>	59	BEVESPI AER 9-4.8MCG	148
<i>benazepril hcl tab 20 mg.....</i>	59	<i>bexarotene cap 75 mg</i>	43
<i>benazepril hcl tab 40 mg.....</i>	59	<i>bexarotene gel 1%</i>	159
<i>benazepril hcl tab 5 mg</i>	58	BEXSERO INJ	140
BENDAMUSTINE SOL 100/4ML.....	38	<i>bicalutamide tab 50 mg.....</i>	41
BENDEKA INJ 100/4ML	38	BICILLIN L-A INJ 1200000	37
BENLYSTA INJ 120MG	139	BICILLIN L-A INJ 2400000	37
BENLYSTA INJ 200MG/ML	139	BICILLIN L-A INJ 600000.....	37
BENLYSTA INJ 400MG	139	BIKTARVY TAB 30-120-15 MG	30
<i>benzoyl peroxide-erythromycin gel 5-</i>		BIKTARVY TAB 50-200-25 MG	30
3%	155	<i>bisoprolol & hydrochlorothiazide tab</i>	
<i>benztropine mesylate inj 1 mg/ml</i>	80	10-6.25 mg	66
<i>benztropine mesylate tab 0.5 mg.....</i>	80	<i>bisoprolol & hydrochlorothiazide tab</i>	
<i>benztropine mesylate tab 1 mg.....</i>	80	2.5-6.25 mg.....	66
<i>benztropine mesylate tab 2 mg.....</i>	80	<i>bisoprolol & hydrochlorothiazide tab 5-</i>	
BERINERT INJ 500UNIT	133	6.25 mg	66
BESIVANCE SUS 0.6%.....	145	<i>bisoprolol fumarate tab 10 mg.....</i>	66
BESREMI SOL 500MCG	43	<i>bisoprolol fumarate tab 5 mg</i>	66
<i>betaine powder for oral solution.....</i>	121	BIVIGAM INJ 10%	138
<i>betamethasone dipropionate</i>		<i>blisovi 24 fe.....</i>	114
<i>augmented cream 0.05%</i>	157	<i>blisovi fe 1.5/30</i>	114
<i>betamethasone dipropionate</i>		BONSITY INJ 560/2.24	112
<i>augmented gel 0.05%</i>	157	BOOSTRIX INJ	140
<i>betamethasone dipropionate</i>		<i>bortezomib for inj 3.5 mg</i>	45
<i>augmented lotion 0.05%.....</i>	157	BOORTEZOMIB INJ 1MG	45
<i>betamethasone dipropionate</i>		BOORTEZOMIB INJ 2.5MG	45
<i>augmented oint 0.05%</i>	157	<i>bosentan tab 125 mg</i>	73
		<i>bosentan tab 62.5 mg</i>	73

<i>bosentan tab for oral susp 32 mg</i>	73
BOSULIF CAP 100MG.....	45
BOSULIF CAP 50MG	45
BOSULIF TAB 100MG.....	45
BOSULIF TAB 400MG.....	45
BOSULIF TAB 500MG.....	45
BRAFTOVI CAP 75MG	45
BREO ELLIPTA INH 100-25	154
BREO ELLIPTA INH 200-25.....	154
BREO ELLIPTA INH 50-25MCG	154
<i>breyana aer 160/4.5</i>	154
<i>breyana aer 80/4.5</i>	154
BREZTRI AERO AER SPHERE.....	148
BREZTRI AERO AER SPHERE (INSTITUTIONAL PACK)	148
<i>briellyn</i>	114
BRILINTA TAB 60MG	134
BRILINTA TAB 90MG	134
<i>brimonidine tartrate ophth soln 0.15%</i>	146
<i>brimonidine tartrate ophth soln 0.2%</i>	146
<i>brinzolamide ophth susp 1%</i>	146
BRIVIACT SOL 10MG/ML.....	90
BRIVIACT TAB 100MG	90
BRIVIACT TAB 10MG	90
BRIVIACT TAB 25MG	90
BRIVIACT TAB 50MG	90
BRIVIACT TAB 75MG	90
<i>bromfenac sodium ophth soln 0.07%</i> (base equivalent)	146
<i>bromfenac sodium ophth soln 0.075%</i> (base equivalent)	146
<i>bromfenac sodium ophth soln 0.09%</i> (base equiv) (once-daily)	146
<i>bromocriptine mesylate cap 5 mg (base equivalent)</i>	80
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	81
BRUKINSA CAP 80MG.....	45
BRUKINSA TAB 160MG	45
<i>budesonide delayed release particles cap 3 mg</i>	127
<i>budesonide inhalation susp 0.25 mg/2ml</i>	154
<i>budesonide inhalation susp 0.5 mg/2ml</i>	154
<i>budesonide tab er 24hr 9 mg</i>	127
<i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</i>	154
<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i>	154
<i>bumetanide inj 0.25 mg/ml</i>	70
<i>bumetanide tab 0.5 mg</i>	70
<i>bumetanide tab 1 mg</i>	70
<i>bumetanide tab 2 mg</i>	70
<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	105
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	105
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	105
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	105
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	105
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	105
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	105
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	105
<i>buprenorphine td patch weekly 10 mcg/hr</i>	21
<i>buprenorphine td patch weekly 15 mcg/hr</i>	21
<i>buprenorphine td patch weekly 20 mcg/hr</i>	22
<i>buprenorphine td patch weekly 5 mcg/hr</i>	21
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	21
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	105
<i>bupropion hcl tab 100 mg</i>	76
<i>bupropion hcl tab 75 mg</i>	76
<i>bupropion hcl tab er 12hr 100 mg</i>	76
<i>bupropion hcl tab er 12hr 150 mg</i>	76
<i>bupropion hcl tab er 12hr 200 mg</i>	76
<i>bupropion hcl tab er 24hr 150 mg</i>	77
<i>bupropion hcl tab er 24hr 300 mg</i>	77
<i>buspirone hcl tab 10 mg</i>	74
<i>buspirone hcl tab 15 mg</i>	74
<i>buspirone hcl tab 30 mg</i>	74

<i>buspirone hcl tab 5 mg</i>	74
<i>buspirone hcl tab 7.5 mg</i>	74
<i>butorphanol tartrate inj 1 mg/ml</i>	23
<i>butorphanol tartrate inj 2 mg/ml</i>	23
<i>butorphanol tartrate nasal soln 10 mg/ml</i>	23

C	
<i>cabergoline tab 0.5 mg</i>	121
<i>CABOMETYX TAB 20MG</i>	45
<i>CABOMETYX TAB 40MG</i>	45
<i>CABOMETYX TAB 60MG</i>	45
<i>calcipotriene cream 0.005%</i>	157
<i>calcipotriene oint 0.005%</i>	157
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	157
<i>calcitonin (salmon) spray</i>	112
<i>calcitrene</i>	157
<i>calcitriol (oral)</i>	125
<i>calcitriol cap 0.25 mcg</i>	125
<i>calcitriol cap 0.5 mcg</i>	125
<i>CALQUENCE TAB 100MG</i>	45
<i>camila</i>	114
<i>camrese</i>	114
<i>camrese lo</i>	114
<i>candesartan cilexetil tab 16 mg</i>	62
<i>candesartan cilexetil tab 32 mg</i>	62
<i>candesartan cilexetil tab 4 mg</i>	62
<i>candesartan cilexetil tab 8 mg</i>	62
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i>	60
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i>	60
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i>	61
<i>CAPLYTA CAP 10.5MG</i>	83
<i>CAPLYTA CAP 21MG</i>	84
<i>CAPLYTA CAP 42MG</i>	84
<i>CAPRELSA TAB 100MG</i>	45
<i>CAPRELSA TAB 300MG</i>	45
<i>captopril & hydrochlorothiazide tab 25-15 mg</i>	58
<i>captopril & hydrochlorothiazide tab 25-25 mg</i>	58
<i>captopril & hydrochlorothiazide tab 50-15 mg</i>	58
<i>captopril & hydrochlorothiazide tab 50-25 mg</i>	58
<i>captopril tab 100 mg</i>	59
<i>captopril tab 12.5 mg</i>	59
<i>captopril tab 25 mg</i>	59
<i>captopril tab 50 mg</i>	59
<i>carb/levo orally disintegrating tab 10-100mg</i>	81
<i>carb/levo orally disintegrating tab 25-100mg</i>	81
<i>carb/levo orally disintegrating tab 25-250mg</i>	81
<i>carbamazepine cap er 12hr 100 mg</i>	90
<i>carbamazepine cap er 12hr 200 mg</i>	90
<i>carbamazepine cap er 12hr 300 mg</i>	90
<i>carbamazepine chew tab 100 mg</i>	90
<i>carbamazepine chew tab 200 mg</i>	90
<i>carbamazepine susp 100 mg/5ml</i>	90
<i>carbamazepine tab 200 mg</i>	90
<i>carbamazepine tab er 12hr 100 mg</i>	90
<i>carbamazepine tab er 12hr 200 mg</i>	90
<i>carbamazepine tab er 12hr 400 mg</i>	90
<i>carbidopa & levodopa tab 10-100 mg</i>	81
<i>carbidopa & levodopa tab 25-100 mg</i>	81
<i>carbidopa & levodopa tab 25-250 mg</i>	81
<i>carbidopa & levodopa tab er 25-100 mg</i>	81
<i>carbidopa & levodopa tab er 50-200 mg</i>	81
<i>carbidopa tab 25 mg</i>	81
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	81
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	81
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	81
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	81
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	81
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	81
<i>carboplatin iv soln 150 mg/15ml</i>	38
<i>carboplatin iv soln 450 mg/45ml</i>	38
<i>carboplatin iv soln 50 mg/5ml</i>	38
<i>carboplatin iv soln 600 mg/60ml</i>	38
<i>carglumic acid soluble tab 200 mg</i>	121

<i>carteolol hcl ophth soln 1%</i>	146	<i>cefpodoxime proxetil for susp 50</i>	
<i>cartia xt</i>	68	<i>mg/5ml</i>	34
<i>carvedilol tab 12.5 mg</i>	66	<i>cefpodoxime proxetil tab 100 mg</i>	34
<i>carvedilol tab 25 mg</i>	66	<i>cefpodoxime proxetil tab 200 mg</i>	34
<i>carvedilol tab 3.125 mg</i>	66	<i>cefprozil for susp 125 mg/5ml</i>	34
<i>carvedilol tab 6.25 mg</i>	66	<i>cefprozil for susp 250 mg/5ml</i>	34
<i>casprofungin acetate for iv soln 50 mg</i>		<i>cefprozil tab 250 mg</i>	34
.....	28	<i>cefprozil tab 500 mg</i>	34
<i>casprofungin acetate for iv soln 70 mg</i>		<i>ceftazidime for inj 1 gm</i>	34
.....	28	<i>ceftazidime for inj 6 gm</i>	34
CAYSTON INH 75MG	25	<i>ceftazidime for iv soln 2 gm</i>	34
<i>cefaclor cap 250 mg</i>	33	<i>ceftriaxone sodium for inj 1 gm</i>	34
<i>cefaclor cap 500 mg</i>	33	<i>ceftriaxone sodium for inj 10 gm</i>	34
<i>cefadroxil cap 500 mg</i>	33	<i>ceftriaxone sodium for inj 2 gm</i>	34
<i>cefadroxil for susp 250 mg/5ml</i>	33	<i>ceftriaxone sodium for inj 250 mg</i>	34
<i>cefadroxil for susp 500 mg/5ml</i>	33	<i>ceftriaxone sodium for inj 500 mg</i>	34
CEFAZOLIN INJ 1GM/50ML	33	<i>ceftriaxone sodium for iv soln 1 gm</i> ..	34
CEFAZOLIN INJ 2GM	33	<i>ceftriaxone sodium for iv soln 2 gm</i> ..	34
CEFAZOLIN INJ 3GM	33	<i>cefuroxime axetil tab 250 mg</i>	34
<i>cefazolin sodium for inj 1 gm</i>	33	<i>cefuroxime axetil tab 500 mg</i>	34
<i>cefazolin sodium for inj 10 gm</i>	33	<i>cefuroxime sodium for inj 750 mg</i>	34
<i>cefazolin sodium for inj 2 gm</i>	33	<i>cefuroxime sodium for iv soln 1.5 gm</i>	
<i>cefazolin sodium for inj 3 gm</i>	33	.....	34
<i>cefazolin sodium for inj 500 mg</i>	33	<i>celecoxib cap 100 mg</i>	20
<i>cefazolin sodium for iv soln 1 gm</i>	33	<i>celecoxib cap 200 mg</i>	20
CEFAZOLIN SOLN 2GM/100ML-4% ...	33	<i>celecoxib cap 400 mg</i>	20
CEFAZOLIN/DEX SOL 1GM/50ML-4% ..	33	<i>celecoxib cap 50 mg</i>	20
CEFAZOLIN/DEX SOL 2GM/50ML-3% ..	33	<i>cephalexin cap 250 mg</i>	34
CEFAZOLIN/DEX SOL 3GM/150ML-4%		<i>cephalexin cap 500 mg</i>	34
.....	33	<i>cephalexin for susp 125 mg/5ml</i>	34
CEFAZOLIN/DEX SOL 3GM/50ML-2% ..	33	<i>cephalexin for susp 250 mg/5ml</i>	34
<i>cefdinir cap 300 mg</i>	33	CEQUR SIMPL KIT PATCH 2U (3-DAY)	
<i>cefdinir for susp 125 mg/5ml</i>	34	.....	109
<i>cefdinir for susp 250 mg/5ml</i>	34	CEQUR SIMPL KIT PATCH 2U (4-DAY)	
<i>cefepime hcl for inj 1 gm</i>	34	.....	109
<i>cefepime hcl for iv soln 2 gm</i>	34	CEQUR SIMPL MIS INSERTER	110
<i>cefixime cap 400 mg</i>	34	CERDELGA CAP 84MG	121
<i>cefixime for susp 100 mg/5ml</i>	34	CEREZYME INJ 400UNIT	121
<i>cefixime for susp 200 mg/5ml</i>	34	<i>cetirizine hcl oral soln 1 mg/ml (5</i>	
<i>cefotetan disodium for inj 1 gm</i>	34	<i>mg/5ml)</i>	148
<i>cefotetan disodium for inj 2 gm</i>	34	<i>cevimeline hcl cap 30 mg</i>	160
<i>cefoxitin sodium for iv soln 1 gm</i>	34	<i>chateal eq</i>	114
<i>cefoxitin sodium for iv soln 10 gm</i>	34	CHEMET CAP 100MG	113
<i>cefoxitin sodium for iv soln 2 gm</i>	34	<i>chlorhexidine gluconate soln 0.12%</i> ..	160
<i>cefpodoxime proxetil for susp 100</i>		<i>chloroquine phosphate tab 250 mg</i> ..	28
<i>mg/5ml</i>	34	<i>chloroquine phosphate tab 500 mg</i> ..	28
		<i>chlorpromazine hcl conc 100 mg/ml</i> ..	84

<i>chlorpromazine hcl conc 30 mg/ml ...</i>	84	<i>ciprofloxacin-dexamethasone otic susp</i>	
<i>chlorpromazine hcl inj 25 mg/ml</i>	84	<i>0.3-0.1%.....</i>	147
<i>chlorpromazine hcl inj 50 mg/2ml</i>	84	<i>cisplatin inj 100 mg/100ml (1 mg/ml)</i>	
<i>chlorpromazine hcl tab 10 mg.....</i>	84	<i>.....</i>	38
<i>chlorpromazine hcl tab 100 mg</i>	84	<i>cisplatin inj 200 mg/200ml (1 mg/ml)</i>	
<i>chlorpromazine hcl tab 200 mg</i>	84	<i>.....</i>	38
<i>chlorpromazine hcl tab 25 mg.....</i>	84	<i>cisplatin inj 50 mg/50ml (1 mg/ml) ..</i>	38
<i>chlorpromazine hcl tab 50 mg.....</i>	84	<i>citalopram hydrobromide oral soln 10</i>	
<i>chlorthalidone tab 25 mg</i>	70	<i>mg/5ml</i>	77
<i>chlorthalidone tab 50 mg</i>	70	<i>citalopram hydrobromide tab 10 mg</i>	
<i>cholestyramine light powder 4 gm/dose</i>		<i>(base equiv)</i>	77
<i>.....</i>	65	<i>citalopram hydrobromide tab 20 mg</i>	
<i>cholestyramine light powder packets 4</i>		<i>(base equiv)</i>	77
<i>gm.....</i>	65	<i>citalopram hydrobromide tab 40 mg</i>	
<i>cholestyramine powder 4 gm/dose ...</i>	65	<i>(base equiv)</i>	77
<i>cholestyramine powder packets 4 gm</i>	65	<i>claravis</i>	155
<i>choline fenofibrate cap dr 135 mg</i>		<i>clarithromycin for susp 125 mg/5ml .</i>	35
<i>(fenofibric acid equiv)</i>	64	<i>clarithromycin for susp 250 mg/5ml .</i>	35
<i>choline fenofibrate cap dr 45 mg</i>		<i>clarithromycin tab 250 mg</i>	35
<i>(fenofibric acid equiv)</i>	63	<i>clarithromycin tab 500 mg</i>	35
<i>ciclopirox gel 0.77%.....</i>	156	<i>clarithromycin tab er 24hr 500 mg ...</i>	35
<i>ciclopirox olamine cream 0.77% (base</i>		<i>clindamycin hcl cap 150 mg</i>	25
<i>equiv)</i>	156	<i>clindamycin hcl cap 300 mg</i>	25
<i>ciclopirox olamine susp 0.77% (base</i>		<i>clindamycin hcl cap 75 mg</i>	25
<i>equiv)</i>	156	<i>clindamycin palmitate hcl for soln 75</i>	
<i>ciclopirox shampoo 1%.....</i>	156	<i>mg/5ml (base equiv).....</i>	25
<i>cilostazol tab 100 mg</i>	133	<i>clindamycin phosphate gel 1% (once-</i>	
<i>cilostazol tab 50 mg</i>	133	<i>daily)</i>	155
<i>CILOXAN OIN 0.3% OP.....</i>	145	<i>clindamycin phosphate in d5w iv soln</i>	
<i>CIMDUO TAB 300-300</i>	30	<i>300 mg/50ml</i>	25
<i>cinacalcet hcl tab 30 mg (base equiv)</i>		<i>clindamycin phosphate in d5w iv soln</i>	
<i>.....</i>	122	<i>600 mg/50ml</i>	25
<i>cinacalcet hcl tab 60 mg (base equiv)</i>		<i>clindamycin phosphate in d5w iv soln</i>	
<i>.....</i>	122	<i>900 mg/50ml</i>	25
<i>cinacalcet hcl tab 90 mg (base equiv)</i>		<i>clindamycin phosphate inj 300 mg/2ml</i>	
<i>.....</i>	122	<i>.....</i>	25
<i>CIPRO (10%) SUS 500MG/5.....</i>	35	<i>clindamycin phosphate inj 600 mg/4ml</i>	
<i>ciprofloxacin 200 mg/100ml in d5w ..</i>	35	<i>.....</i>	25
<i>ciprofloxacin 400 mg/200ml in d5w ..</i>	35	<i>clindamycin phosphate inj 900 mg/6ml</i>	
<i>ciprofloxacin hcl ophth soln 0.3% (base</i>		<i>.....</i>	25
<i>equivalent).....</i>	145	<i>clindamycin phosphate lotion 1%... </i>	155
<i>ciprofloxacin hcl tab 250 mg (base</i>		<i>clindamycin phosphate soln 1%..... </i>	155
<i>equiv)</i>	35	<i>clindamycin phosphate vaginal cream</i>	
<i>ciprofloxacin hcl tab 500 mg (base</i>		<i>2%</i>	131
<i>equiv)</i>	35	<i>CLINDMYC/NAC INJ 300/50ML.....</i>	25
<i>ciprofloxacin hcl tab 750 mg (base</i>		<i>CLINDMYC/NAC INJ 600/50ML.....</i>	25
<i>equiv)</i>	35	<i>CLINDMYC/NAC INJ 900/50ML.....</i>	25

CLINIMIX INJ 4.25/D10	144	<i>clotrimazole cream 1%</i>	156
CLINIMIX INJ 4.25/D5W	144	<i>clotrimazole soln 1%</i>	156
CLINIMIX INJ 5%/D15W	144	<i>clotrimazole troche 10 mg</i>	160
CLINIMIX INJ 5%/D20W	144	<i>clotrimazole w/ betamethasone cream</i>	
CLINIMIX INJ 6/5.....	144	1-0.05%.....	156
CLINIMIX INJ 8/10.....	144	<i>clozapine orally disintegrating tab 100</i>	
CLINIMIX INJ 8/14.....	144	mg	84
<i>clinisol sf 15%</i>	144	<i>clozapine orally disintegrating tab 12.5</i>	
CLINOLIPID EMU 20%	144	mg	84
<i>clobazam suspension 2.5 mg/ml</i>	90	<i>clozapine orally disintegrating tab 150</i>	
<i>clobazam tab 10 mg</i>	90	mg	84
<i>clobazam tab 20 mg</i>	91	<i>clozapine orally disintegrating tab 200</i>	
<i>clobetasol propionate cream 0.05%</i> 158		mg	84
<i>clobetasol propionate e</i>	158	<i>clozapine orally disintegrating tab 25</i>	
<i>clobetasol propionate gel 0.05%</i>	158	mg	84
<i>clobetasol propionate oint 0.05%</i> ...	158	<i>clozapine tab 100 mg</i>	84
<i>clobetasol propionate soln 0.05%</i> ... 158		<i>clozapine tab 200 mg</i>	84
<i>clomipramine hcl cap 25 mg</i>	77	<i>clozapine tab 25 mg</i>	84
<i>clomipramine hcl cap 50 mg</i>	77	<i>clozapine tab 50 mg</i>	84
<i>clomipramine hcl cap 75 mg</i>	77	COARTEM TAB 20-120MG	28
<i>clonazepam orally disintegrating tab</i>		COBENFY CAP 100-20MG.....	84
0.125 mg	91	COBENFY CAP 125-30MG.....	84
<i>clonazepam orally disintegrating tab</i>		COBENFY CAP 50-20MG.....	84
0.25 mg	91	COBENFY STRT CAP PACK.....	84
<i>clonazepam orally disintegrating tab</i>		<i>colchicine cap 0.6 mg</i>	20
0.5 mg	91	<i>colchicine tab 0.6 mg</i>	20
<i>clonazepam orally disintegrating tab 1</i>		<i>colchicine w/ probenecid tab 0.5-500</i>	
mg.....	91	mg	20
<i>clonazepam orally disintegrating tab 2</i>		<i>colesevelam hcl packet for susp 3.75</i>	
mg.....	91	gm	65
<i>clonazepam tab 0.5 mg</i>	91	<i>colesevelam hcl tab 625 mg</i>	65
<i>clonazepam tab 1 mg</i>	91	<i>colestipol hcl granule packets 5 gm</i> ..	65
<i>clonazepam tab 2 mg</i>	91	<i>colestipol hcl granules 5 gm</i>	65
<i>clonidine hcl tab 0.1 mg</i>	71	<i>colestipol hcl tab 1 gm</i>	65
<i>clonidine hcl tab 0.2 mg</i>	71	<i>colistimethate sod for inj 150 mg</i>	
<i>clonidine hcl tab 0.3 mg</i>	71	(colistin base activity)	25
<i>clonidine td patch weekly 0.1 mg/24hr</i>		COMBIGAN SOL 0.2/0.5%	146
.....	71	COMBIVENT AER 20-100	148
<i>clonidine td patch weekly 0.2 mg/24hr</i>		COMETRIQ (60MG DOSE)	45
.....	71	COMETRIQ KIT 100MG	45
<i>clonidine td patch weekly 0.3 mg/24hr</i>		COMETRIQ KIT 140MG	45
.....	71	COMPLERA TAB	30
<i>clopidogrel bisulfate tab 75 mg (base</i>		<i>compro</i>	125
equiv)	134	<i>constulose</i>	128
<i>clorazepate dipotassium tab 15 mg</i> ..	91	COPAXONE INJ 20MG/ML.....	104
<i>clorazepate dipotassium tab 3.75 mg</i> 91		COPAXONE INJ 40MG/ML.....	104
<i>clorazepate dipotassium tab 7.5 mg</i> .91		COPIKTRA CAP 15MG	46

COPIKTRA CAP 25MG	46
CORLANOR SOL 5MG/5ML.....	71
COSENTYX INJ 125/5ML	134
COSENTYX INJ 150MG/ML.....	135
COSENTYX INJ 300DOSE	135
COSENTYX INJ 75MG/0.5.....	134
COSENTYX PEN INJ 150MG/ML	135
COSENTYX PEN INJ 300DOSE	135
COSENTYX UNO INJ 300/2ML	135
COTELLIC TAB 20MG	46
CREON CAP 12000UNT	128
CREON CAP 24000UNT	128
CREON CAP 3000UNIT.....	128
CREON CAP 36000UNT	128
CREON CAP 6000UNIT.....	128
<i>cromolyn sodium ophth soln 4%</i>	<i>146</i>
<i>cromolyn sodium oral conc 100 mg/5ml</i>	<i>..... 128</i>
<i>cromolyn sodium soln nebu 20 mg/2ml</i>	<i>..... 151</i>
<i>cryselle-28.....</i>	<i>114</i>
<i>cyclobenzaprine hcl tab 10 mg</i>	<i>104</i>
<i>cyclobenzaprine hcl tab 5 mg</i>	<i>104</i>
CYCLOPHOSPH INJ 1000MG	39
CYCLOPHOSPH INJ 1GM/2ML.....	39
CYCLOPHOSPH INJ 1GM/5ML.....	39
CYCLOPHOSPH INJ 2000MG	39
CYCLOPHOSPH INJ 2GM/4ML.....	39
CYCLOPHOSPH INJ 500/5ML.....	39
CYCLOPHOSPH INJ 500MG/ML	39
CYCLOPHOSPH TAB 25MG	39
CYCLOPHOSPH TAB 50MG	39
CYCLOPHOSPHA INJ 2GM/10ML	39
CYCLOPHOSPHA INJ 500/2.5	39
<i>cyclophosphamide cap 25 mg</i>	<i>39</i>
<i>cyclophosphamide cap 50 mg</i>	<i>39</i>
<i>cyclophosphamide for inj 1 gm</i>	<i>39</i>
<i>cyclophosphamide for inj 2 gm</i>	<i>39</i>
<i>cyclophosphamide for inj 500 mg</i>	<i>39</i>
<i>cycloserine cap 250 mg</i>	<i>31</i>
<i>cyclosporine cap 100 mg.....</i>	<i>139</i>
<i>cyclosporine cap 25 mg</i>	<i>139</i>
<i>cyclosporine modified cap 100 mg..</i>	<i>139</i>
<i>cyclosporine modified cap 25 mg ...</i>	<i>139</i>
<i>cyclosporine modified cap 50 mg ...</i>	<i>139</i>
<i>cyclosporine modified oral soln 100</i>	<i>mg/ml</i>
<i>mg/ml</i>	<i>139</i>

<i>cyproheptadine hcl syrup 2 mg/5ml</i>	<i>148</i>
<i>cyproheptadine hcl tab 4 mg</i>	<i>149</i>
<i>cyred eq.....</i>	<i>114</i>
CYSTADROPS SOL 0.37%	147
CYSTAGON CAP 150MG	122
CYSTAGON CAP 50MG	122
CYSTARAN SOL 0.44%	147
<i>cytarabine inj 20 mg/ml</i>	<i>39</i>
D	
D10W/NACL INJ 0.2%	142
D2.5W/NACL INJ 0.45%	142
<i>dabigatran etexilate mesylate cap 110</i>	<i>mg (etexilate base eq)</i>
<i>dabigatran etexilate mesylate cap 150</i>	<i>mg (etexilate base eq)</i>
<i>dabigatran etexilate mesylate cap 75</i>	<i>mg (etexilate base eq)</i>
<i>dalfampridine tab er 12hr 10 mg ...</i>	<i>104</i>
<i>danazol cap 100 mg.....</i>	<i>106</i>
<i>danazol cap 200 mg.....</i>	<i>106</i>
<i>danazol cap 50 mg</i>	<i>106</i>
<i>dantrolene sodium cap 100 mg.....</i>	<i>104</i>
<i>dantrolene sodium cap 25 mg</i>	<i>104</i>
<i>dantrolene sodium cap 50 mg</i>	<i>104</i>
DANZITEN TAB 71MG.....	46
DANZITEN TAB 95MG.....	46
<i>dapsone tab 100 mg</i>	<i>25</i>
<i>dapsone tab 25 mg</i>	<i>25</i>
DAPTACEL INJ.....	140
<i>daptomycin for iv soln 350 mg</i>	<i>25</i>
<i>daptomycin for iv soln 500 mg</i>	<i>25</i>
DAPTOMYCIN INJ 350MG.....	25
<i>darifenacin hydrobromide tab er 24hr</i>	<i>15 mg (base equiv).....</i>
<i>darifenacin hydrobromide tab er 24hr</i>	<i>7.5 mg (base equiv).....</i>
<i>darunavir tab 600 mg</i>	<i>29</i>
<i>darunavir tab 800 mg</i>	<i>29</i>
<i>dasatinib tab 100 mg</i>	<i>46</i>
<i>dasatinib tab 140 mg</i>	<i>46</i>
<i>dasatinib tab 20 mg</i>	<i>46</i>
<i>dasatinib tab 50 mg</i>	<i>46</i>
<i>dasatinib tab 70 mg</i>	<i>46</i>
<i>dasatinib tab 80 mg</i>	<i>46</i>
<i>dasetta 1/35.....</i>	<i>114</i>
<i>dasetta 7/7/7.....</i>	<i>114</i>
DAURISMO TAB 100MG	46

DAURISMO TAB 25MG	46	DEXAMETHASON CON 1MG/ML.....	119
<i>daysee</i>	114	<i>dexamethasone elixir 0.5 mg/5ml ..</i>	119
DAYVIGO TAB 10MG.....	100	<i>dexamethasone sod phos inj sol pref</i>	
DAYVIGO TAB 5MG	100	<i>syr 10 mg/ml (pf)</i>	120
<i>deblitane</i>	114	<i>dexamethasone sod phosphate</i>	
<i>deferasirox granules packet 180 mg</i>	113	<i>preservative free inj 10 mg/ml....</i>	120
<i>deferasirox granules packet 360 mg</i>	113	<i>dexamethasone sodium phosphate inj</i>	
<i>deferasirox granules packet 90 mg.</i>	113	<i>10 mg/ml</i>	120
<i>deferasirox tab 180 mg</i>	113	<i>dexamethasone sodium phosphate inj</i>	
<i>deferasirox tab 360 mg</i>	113	<i>100 mg/10ml</i>	120
<i>deferasirox tab 90 mg</i>	113	<i>dexamethasone sodium phosphate inj</i>	
<i>deferasirox tab for oral susp 125 mg</i>		<i>120 mg/30ml</i>	120
.....	113	<i>dexamethasone sodium phosphate inj</i>	
<i>deferasirox tab for oral susp 250 mg</i>		<i>20 mg/5ml.....</i>	120
.....	113	<i>dexamethasone sodium phosphate inj</i>	
<i>deferasirox tab for oral susp 500 mg</i>		<i>4 mg/ml</i>	120
.....	113	<i>dexamethasone sodium phosphate inj</i>	
DELSTRIGO TAB	30	<i>soln pref syr 4 mg/ml</i>	120
DENG VAXIA SUS	140	<i>dexamethasone sodium phosphate</i>	
DEPO-SQ PROV INJ 104.....	114	<i>ophth soln 0.1%</i>	146
<i>depo-testosterone.....</i>	106	<i>dexamethasone soln 0.5 mg/5ml ..</i>	120
DESCOVY TAB 120-15MG.....	30	<i>dexamethasone tab 0.5 mg.....</i>	120
DESCOVY TAB 200/25MG.....	30	<i>dexamethasone tab 0.75 mg</i>	120
<i>desipramine hcl tab 10 mg</i>	77	<i>dexamethasone tab 1 mg</i>	120
<i>desipramine hcl tab 100 mg</i>	77	<i>dexamethasone tab 1.5 mg.....</i>	120
<i>desipramine hcl tab 150 mg</i>	77	<i>dexamethasone tab 2 mg</i>	120
<i>desipramine hcl tab 25 mg</i>	77	<i>dexamethasone tab 4 mg</i>	120
<i>desipramine hcl tab 50 mg</i>	77	<i>dexamethasone tab 6 mg</i>	120
<i>desipramine hcl tab 75 mg</i>	77	<i>dexmethylphenidate hcl tab 10 mg ..</i>	99
<i>desloratadine tab 5 mg</i>	149	<i>dexmethylphenidate hcl tab 2.5 mg .</i>	99
<i>desmopressin acetate inj 4 mcg/ml</i>	122	<i>dexmethylphenidate hcl tab 5 mg</i>	99
<i>desmopressin acetate nasal spray soln</i>		<i>dextrose 10% w/ sodium chloride</i>	
<i>0.01%</i>	122	<i>0.45%.....</i>	142
<i>desmopressin acetate nasal spray soln</i>		<i>dextrose 2.5% w/ sodium chloride</i>	
<i>0.01% (refrigerated)</i>	122	<i>0.45%.....</i>	142
<i>desmopressin acetate preservative free</i>		<i>dextrose 5% in lactated ringers</i>	142
<i>(pf) inj 4 mcg/ml</i>	122	<i>dextrose 5% w/ sodium chloride 0.2%</i>	
<i>desmopressin acetate tab 0.1 mg...</i>	122	.....	142
<i>desmopressin acetate tab 0.2 mg...</i>	122	<i>dextrose 5% w/ sodium chloride</i>	
<i>desogest-eth estrad & eth estrad tab</i>		<i>0.225%.....</i>	142
<i>0.15-0.02/0.01 mg(21/5).....</i>	114	<i>dextrose 5% w/ sodium chloride 0.3%</i>	
<i>desvenlafaxine succinate tab er 24hr</i>		.....	142
<i>100 mg (base equiv)</i>	77	<i>dextrose 5% w/ sodium chloride 0.45%</i>	
<i>desvenlafaxine succinate tab er 24hr</i>		.....	142
<i>25 mg (base equiv)</i>	77	<i>dextrose 5% w/ sodium chloride 0.9%</i>	
<i>desvenlafaxine succinate tab er 24hr</i>		.....	142
<i>50 mg (base equiv)</i>	77	<i>dextrose inj 10%.....</i>	144

<i>dextrose inj 5%</i>	144	<i>digoxin oral soln 0.05 mg/ml</i>	71
<i>dextrose inj 50%</i>	144	<i>digoxin tab 125 mcg (0.125 mg)</i>	71
<i>dextrose inj 70%</i>	144	<i>digoxin tab 250 mcg (0.25 mg)</i>	71
DIACOMIT CAP 250MG	91	<i>dihydroergotamine mesylate inj 1</i>	
DIACOMIT CAP 500MG	91	<i>mg/ml</i>	101
DIACOMIT PAK 250MG	91	<i>dihydroergotamine mesylate nasal</i>	
DIACOMIT PAK 500MG	91	<i>spray 4 mg/ml</i>	101
<i>diazepam inj</i>	91	DILANTIN CAP 30MG.....	92
<i>diazepam intensol</i>	91	<i>diltiazem hcl cap er 12hr 120 mg</i>	68
<i>diazepam oral soln 1 mg/ml</i>	91	<i>diltiazem hcl cap er 12hr 60 mg</i>	68
<i>diazepam rectal gel delivery system 10</i>		<i>diltiazem hcl cap er 12hr 90 mg</i>	68
<i>mg</i>	92	<i>diltiazem hcl coated beads cap er 24hr</i>	
<i>diazepam rectal gel delivery system 2.5</i>		<i>120 mg</i>	68
<i>mg</i>	91	<i>diltiazem hcl coated beads cap er 24hr</i>	
<i>diazepam rectal gel delivery system 20</i>		<i>180 mg</i>	68
<i>mg</i>	92	<i>diltiazem hcl coated beads cap er 24hr</i>	
<i>diazepam tab 10 mg</i>	92	<i>240 mg</i>	68
<i>diazepam tab 2 mg</i>	92	<i>diltiazem hcl coated beads cap er 24hr</i>	
<i>diazepam tab 5 mg</i>	92	<i>300 mg</i>	68
<i>diazoxide susp 50 mg/ml</i>	121	<i>diltiazem hcl coated beads cap er 24hr</i>	
<i>diclofenac potassium tab 50 mg</i>	20	<i>360 mg</i>	68
<i>diclofenac sodium ophth soln 0.1%</i>	146	<i>diltiazem hcl extended release beads</i>	
<i>diclofenac sodium soln 1.5%</i>	159	<i>cap er 24hr 120 mg</i>	68
<i>diclofenac sodium tab delayed release</i>		<i>diltiazem hcl extended release beads</i>	
<i>25 mg</i>	20	<i>cap er 24hr 180 mg</i>	68
<i>diclofenac sodium tab delayed release</i>		<i>diltiazem hcl extended release beads</i>	
<i>50 mg</i>	20	<i>cap er 24hr 240 mg</i>	68
<i>diclofenac sodium tab delayed release</i>		<i>diltiazem hcl extended release beads</i>	
<i>75 mg</i>	20	<i>cap er 24hr 300 mg</i>	68
<i>diclofenac sodium tab er 24hr 100 mg</i>		<i>diltiazem hcl extended release beads</i>	
.....	20	<i>cap er 24hr 360 mg</i>	68
<i>diclofenac w/ misoprostol tab delayed</i>		<i>diltiazem hcl extended release beads</i>	
<i>release 50-0.2 mg</i>	20	<i>cap er 24hr 420 mg</i>	68
<i>diclofenac w/ misoprostol tab delayed</i>		<i>diltiazem hcl iv soln 125 mg/25ml (5</i>	
<i>release 75-0.2 mg</i>	20	<i>mg/ml)</i>	68
<i>dicloxacillin sodium cap 250 mg</i>	37	<i>diltiazem hcl iv soln 25 mg/5ml (5</i>	
<i>dicloxacillin sodium cap 500 mg</i>	37	<i>mg/ml)</i>	68
<i>dicyclomine hcl cap 10 mg</i>	127	<i>diltiazem hcl iv soln 50 mg/10ml (5</i>	
<i>dicyclomine hcl oral soln 10 mg/5ml</i>		<i>mg/ml)</i>	68
.....	127	<i>diltiazem hcl tab 120 mg</i>	68
<i>dicyclomine hcl tab 20 mg</i>	127	<i>diltiazem hcl tab 30 mg</i>	68
DIFICID SUS	35	<i>diltiazem hcl tab 60 mg</i>	68
DIFICID TAB 200MG.....	35	<i>diltiazem hcl tab 90 mg</i>	68
<i>diflunisal tab 500 mg</i>	20	<i>diltiazem hcl tab er 24hr 120 mg</i>	68
<i>difluprednate ophth emulsion 0.05%</i>		<i>diltiazem hcl tab er 24hr 180 mg</i>	68
.....	146	<i>diltiazem hcl tab er 24hr 240 mg</i>	68
<i>digoxin inj 0.25 mg/ml</i>	71	<i>diltiazem hcl tab er 24hr 300 mg</i>	68

<i>diltiazem hcl tab er 24hr 360 mg</i>	68
<i>diltiazem hcl tab er 24hr 420 mg</i>	68
<i>dilt-xr</i>	68
<i>DIP/TET PED INJ 25-5LFU</i>	140
<i>diphenhydramine hcl inj 50 mg/ml</i> ..	149
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	128
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	128
<i>dipyridamole tab 25 mg</i>	134
<i>dipyridamole tab 50 mg</i>	134
<i>dipyridamole tab 75 mg</i>	134
<i>disopyramide phosphate cap 100 mg</i>	63
<i>disopyramide phosphate cap 150 mg</i>	63
<i>disulfiram tab 250 mg</i>	105
<i>disulfiram tab 500 mg</i>	105
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	92
<i>divalproex sodium tab delayed release 125 mg</i>	92
<i>divalproex sodium tab delayed release 250 mg</i>	92
<i>divalproex sodium tab delayed release 500 mg</i>	92
<i>divalproex sodium tab er 24 hr 250 mg</i>	92
<i>divalproex sodium tab er 24 hr 500 mg</i>	92
<i>docetaxel for inj conc 160 mg/8ml (20 mg/ml)</i>	43
<i>docetaxel for inj conc 20 mg/ml</i>	43
<i>docetaxel for inj conc 80 mg/4ml (20 mg/ml)</i>	43
<i>DOCETAXEL INJ 160/16ML</i>	43
<i>DOCETAXEL INJ 160/8ML</i>	43
<i>DOCETAXEL INJ 20MG/2ML</i>	43
<i>DOCETAXEL INJ 80MG/4ML</i>	43
<i>DOCETAXEL INJ 80MG/8ML</i>	43
<i>docetaxel soln for iv infusion 160 mg/16ml</i>	43
<i>docetaxel soln for iv infusion 20 mg/2ml</i>	43
<i>docetaxel soln for iv infusion 80 mg/8ml</i>	43
<i>DOCIVYX INJ 160/16ML</i>	44
<i>DOCIVYX INJ 20MG/2ML</i>	43
<i>DOCIVYX INJ 80MG/8ML</i>	43
<i>dofetilide cap 125 mcg (0.125 mg)</i> ..	63
<i>dofetilide cap 250 mcg (0.25 mg)</i>	63
<i>dofetilide cap 500 mcg (0.5 mg)</i>	63
<i>dolishale</i>	114
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	75
<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	75
<i>donepezil hydrochloride tab 10 mg</i> ...	75
<i>donepezil hydrochloride tab 5 mg</i>	75
<i>DOPTelet TAB 20MG</i>	133
<i>dorzolamide hcl ophth soln 2%</i>	147
<i>dorzolamide hcl-timolol maleate ophth soln 2-0.5%</i>	147
<i>dotti</i>	118
<i>DOVATO TAB 50-300MG</i>	30
<i>doxazosin mesylate tab 1 mg</i>	60
<i>doxazosin mesylate tab 2 mg</i>	60
<i>doxazosin mesylate tab 4 mg</i>	60
<i>doxazosin mesylate tab 8 mg</i>	60
<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i>	100
<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i>	100
<i>doxepin hcl cap 10 mg</i>	77
<i>doxepin hcl cap 100 mg</i>	77
<i>doxepin hcl cap 150 mg</i>	77
<i>doxepin hcl cap 25 mg</i>	77
<i>doxepin hcl cap 50 mg</i>	77
<i>doxepin hcl cap 75 mg</i>	77
<i>doxepin hcl conc 10 mg/ml</i>	77
<i>doxercalciferol cap 0.5 mcg</i>	125
<i>doxercalciferol cap 1 mcg</i>	125
<i>doxercalciferol cap 2.5 mcg</i>	125
<i>doxorubicin hcl inj 2 mg/ml</i>	43
<i>doxorubicin hcl liposomal susp (for iv infusion) 2 mg/ml</i>	43
<i>doxy 100</i>	38
<i>doxycycline hyclate cap 100 mg</i>	38
<i>doxycycline hyclate cap 50 mg</i>	38
<i>doxycycline hyclate for inj 100 mg</i> ...	38
<i>doxycycline hyclate tab 100 mg</i>	38
<i>doxycycline hyclate tab 20 mg</i>	38
<i>doxycycline monohydrate cap 100 mg</i>	38
<i>doxycycline monohydrate cap 50 mg</i>	38

<i>doxycycline monohydrate for susp 25 mg/5ml</i>	38
<i>doxycycline monohydrate tab 100 mg</i>	38
<i>doxycycline monohydrate tab 50 mg</i>	38
<i>doxycycline monohydrate tab 75 mg</i>	38
DRIZALMA CAP 20MG DR.....	77
DRIZALMA CAP 30MG DR.....	77
DRIZALMA CAP 40MG DR.....	77
DRIZALMA CAP 60MG DR.....	77
<i>dronabinol cap 10 mg</i>	125
<i>dronabinol cap 2.5 mg</i>	125
<i>dronabinol cap 5 mg</i>	125
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	114
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	114
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i>	114
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	114
DROXIA CAP 200MG.....	133
DROXIA CAP 300MG.....	133
DROXIA CAP 400MG.....	133
<i>droxidopa cap 100 mg</i>	71
<i>droxidopa cap 200 mg</i>	72
<i>droxidopa cap 300 mg</i>	72
DULERA AER 100-5MCG.....	154
DULERA AER 200-5MCG.....	155
DULERA AER 50-5MCG	154
<i>duloxetine hcl enteric coated pellets cap 20 mg (base eq)</i>	77
<i>duloxetine hcl enteric coated pellets cap 30 mg (base eq)</i>	78
<i>duloxetine hcl enteric coated pellets cap 60 mg (base eq)</i>	78
DUPIXENT INJ 200/1.14	135
DUPIXENT INJ 200MG	135
DUPIXENT INJ 300/2ML	135
<i>dutasteride cap 0.5 mg</i>	130
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	130
E	
<i>e.e.s. 400</i>	35
<i>ec-naproxen</i>	20

<i>econazole nitrate cream 1%</i>	156
EDARBI TAB 40MG.....	62
EDARBI TAB 80MG.....	62
EDARBYCLOR TAB 40-12.5.....	61
EDARBYCLOR TAB 40-25MG.....	61
EDURANT PED TAB 2.5MG	29
EDURANT TAB 25MG	29
<i>efavirenz tab 600 mg</i>	29
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	31
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	31
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	31
ELIGARD INJ 22.5MG	41
ELIGARD INJ 30MG.....	41
ELIGARD INJ 45MG.....	41
ELIGARD INJ 7.5MG.....	41
<i>elinest</i>	114
ELIQUIS ST P TAB 5MG	131
ELIQUIS TAB 2.5MG.....	131
ELIQUIS TAB 5MG	131
<i>eluryng</i>	114
EMGALITY INJ 100MG/ML	101
EMGALITY INJ 120MG/ML	101
EMSAM DIS 12MG/24H.....	78
EMSAM DIS 6MG/24HR.....	78
EMSAM DIS 9MG/24HR.....	78
<i>emtricitabine caps 200 mg</i>	29
<i>emtricitabine- rilpivirine-tenofovir df tab 200-25-300 mg</i>	31
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	31
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	31
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	31
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	31
EMTRIVA SOL 10MG/ML.....	29
EMVERM CHW 100MG	25
<i>emzahh tab 0.35mg</i>	114
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	58
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	58
<i>enalapril maleate tab 10 mg</i>	59

<i>enalapril maleate tab 2.5 mg</i>	59	<i>epinephrine inj 1 mg/ml (1:1000)</i>	72
<i>enalapril maleate tab 20 mg</i>	59	<i>epinephrine solution auto-injector 0.15</i>	
<i>enalapril maleate tab 5 mg</i>	59	<i>mg/0.15ml (1:1000)</i>	151
ENBREL INJ 25/0.5ML.....	135	<i>epinephrine solution auto-injector 0.15</i>	
ENBREL INJ 25MG.....	135	<i>mg/0.3ml (1:2000)</i>	151
ENBREL INJ 50MG/ML.....	135	<i>epinephrine solution auto-injector 0.3</i>	
ENBREL MINI INJ 50MG/ML.....	135	<i>mg/0.3ml (1:1000)</i>	151
ENBREL SRCLK INJ 50MG/ML.....	135	<i>epitol tab 200mg</i>	92
<i>endocet tab 10-325mg</i>	23	<i>eplerenone tab 25 mg</i>	59
<i>endocet tab 2.5-325mg</i>	23	<i>eplerenone tab 50 mg</i>	59
<i>endocet tab 5-325mg</i>	23	EPRONTIA SOL 25MG/ML.....	92
<i>endocet tab 7.5-325mg</i>	23	<i>ergotamine w/ caffeine tab 1-100 mg</i>	
ENERGIX-B INJ 10/0.5ML.....	140	.....	101
ENERGIX-B INJ 20MCG/ML.....	140	ERIVEDGE CAP 150MG	46
<i>enilloring</i>	114	ERLEADA TAB 240MG.....	41
<i>enoxaparin sodium inj 300 mg/3ml</i>	131	ERLEADA TAB 60MG	41
<i>enoxaparin sodium inj soln pref syr 100</i>		<i>erlotinib hcl tab 100 mg (base</i>	
<i>mg/ml</i>	132	<i>equivalent)</i>	46
<i>enoxaparin sodium inj soln pref syr 120</i>		<i>erlotinib hcl tab 150 mg (base</i>	
<i>mg/0.8ml</i>	132	<i>equivalent)</i>	46
<i>enoxaparin sodium inj soln pref syr 150</i>		<i>erlotinib hcl tab 25 mg (base</i>	
<i>mg/ml</i>	132	<i>equivalent)</i>	46
<i>enoxaparin sodium inj soln pref syr 30</i>		<i>errin</i>	114
<i>mg/0.3ml</i>	132	<i>ertapenem sodium for inj 1 gm (base</i>	
<i>enoxaparin sodium inj soln pref syr 40</i>		<i>equivalent)</i>	25
<i>mg/0.4ml</i>	132	<i>ery</i>	155
<i>enoxaparin sodium inj soln pref syr 60</i>		<i>ery-tab tab 250mg ec</i>	35
<i>mg/0.6ml</i>	132	<i>ery-tab tab 333mg ec</i>	35
<i>enoxaparin sodium inj soln pref syr 80</i>		<i>ery-tab tab 500mg ec</i>	35
<i>mg/0.8ml</i>	132	ERYTHROCIN INJ 500MG	35
<i>enpresse-28</i>	114	<i>erythromycin ethylsuccinate tab 400</i>	
<i>enskyce</i>	114	<i>mg</i>	35
ENSTILAR AER.....	157	<i>erythromycin gel 2%</i>	155
<i>entacapone tab 200 mg</i>	81	<i>erythromycin lactobionate for inj 500</i>	
<i>entecavir tab 0.5 mg</i>	32	<i>mg</i>	35
<i>entecavir tab 1 mg</i>	32	<i>erythromycin ophth oint 5 mg/gm.</i>	145
ENTRESTO CAP 15-16MG.....	61	<i>erythromycin soln 2%</i>	155
ENTRESTO CAP 6-6MG	61	<i>erythromycin tab 250 mg</i>	35
<i>enulose</i>	128	<i>erythromycin tab 500 mg</i>	35
ENVARUSUS XR TAB 0.75MG	139	<i>erythromycin tab delayed release 250</i>	
ENVARUSUS XR TAB 1MG	139	<i>mg</i>	35
ENVARUSUS XR TAB 4MG	139	<i>erythromycin tab delayed release 333</i>	
EPCLUSA PAK 150-37.5	32	<i>mg</i>	35
EPCLUSA PAK 200-50MG	32	<i>erythromycin tab delayed release 500</i>	
EPCLUSA TAB 200-50MG	32	<i>mg</i>	35
EPCLUSA TAB 400-100	32	<i>erythromycin w/ delayed release</i>	
EPIDIOLEX SOL 100MG/ML	92	<i>particles cap 250 mg</i>	35

ERZOFRI INJ 117/0.75	84	estradiol td patch weekly 0.025 mg/24hr.....	119
ERZOFRI INJ 156MG/ML	84	estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr).....	119
ERZOFRI INJ 234/1.5	84	estradiol td patch weekly 0.05 mg/24hr	119
ERZOFRI INJ 351/2.25	85	estradiol td patch weekly 0.06 mg/24hr	119
ERZOFRI INJ 39/0.25	84	estradiol td patch weekly 0.075 mg/24hr.....	119
ERZOFRI INJ 78/0.5ML	84	estradiol td patch weekly 0.1 mg/24hr	119
escitalopram oxalate soln 5 mg/5ml (base equiv).....	78	estradiol vaginal cream 0.01%	119
escitalopram oxalate tab 10 mg (base equiv)	78	estradiol vaginal tab 10 mcg	119
escitalopram oxalate tab 20 mg (base equiv)	78	estradiol valerate im in oil 10 mg/ml	119
escitalopram oxalate tab 5 mg (base equiv)	78	estradiol valerate im in oil 20 mg/ml	119
eslicarbazepine acetate tab 200 mg ..	92	estradiol valerate im in oil 40 mg/ml	119
eslicarbazepine acetate tab 400 mg ..	92	ethambutol hcl tab 100 mg	31
eslicarbazepine acetate tab 600 mg ..	92	ethambutol hcl tab 400 mg	31
eslicarbazepine acetate tab 800 mg ..	92	ethosuximide cap 250 mg	92
esomeprazole magnesium cap delayed release 20 mg (base eq)	129	ethosuximide soln 250 mg/5ml.....	92
esomeprazole magnesium cap delayed release 40 mg (base eq)	129	ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg	114
esomeprazole magnesium for delayed release susp packet 10 mg	129	etodolac cap 200 mg	21
esomeprazole magnesium for delayed release susp packet 20 mg	129	etodolac cap 300 mg	21
esomeprazole magnesium for delayed release susp packet 40 mg	129	etodolac tab 400 mg	21
estarylla	114	etodolac tab 500 mg	21
estradiol & norethindrone acetate tab 0.5-0.1 mg.....	118	etodolac tab er 24hr 400 mg	21
estradiol & norethindrone acetate tab 1-0.5 mg	119	etodolac tab er 24hr 500 mg	21
estradiol tab 0.5 mg	119	etodolac tab er 24hr 600 mg	21
estradiol tab 1 mg.....	119	etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	115
estradiol tab 2 mg.....	119	etoposide inj 1 gm/50ml (20 mg/ml) 44	
estradiol td patch twice weekly 0.025 mg/24hr	119	etoposide inj 100 mg/5ml (20 mg/ml)	44
estradiol td patch twice weekly 0.0375 mg/24hr	119	etoposide inj 500 mg/25ml (20 mg/ml)	44
estradiol td patch twice weekly 0.05 mg/24hr	119	etravirine tab 100 mg	29
estradiol td patch twice weekly 0.075 mg/24hr	119	etravirine tab 200 mg	29
estradiol td patch twice weekly 0.1 mg/24hr	119	EULEXIN CAP 125MG	41
		everolimus tab 0.25 mg.....	140
		everolimus tab 0.5 mg	139
		everolimus tab 0.75 mg.....	140
		everolimus tab 1 mg	140

<i>everolimus tab 10 mg</i>	46	<i>FASENRA INJ 10MG/0.5</i>	151
<i>everolimus tab 2.5 mg</i>	46	<i>FASENRA INJ 30MG/ML</i>	151
<i>everolimus tab 5 mg</i>	46	<i>FASENRA PEN INJ 30MG/ML</i>	151
<i>everolimus tab 7.5 mg</i>	46	<i>febuxostat tab 40 mg</i>	20
<i>everolimus tab for oral susp 2 mg</i>	47	<i>febuxostat tab 80 mg</i>	20
<i>everolimus tab for oral susp 3 mg</i>	47	<i>feirza tab 1.5/30</i>	115
<i>everolimus tab for oral susp 5 mg</i>	47	<i>feirza tab 1/20</i>	115
<i>EVOTAZ TAB 300-150</i>	31	<i>felbamate susp 600 mg/5ml</i>	92
<i>exemestane tab 25 mg</i>	41	<i>felbamate tab 400 mg</i>	92
<i>EYSUVIS DRO 0.25%</i>	147	<i>felbamate tab 600 mg</i>	92
<i>EZALLOR SPR CAP 10MG</i>	64	<i>felodipine tab er 24hr 10 mg</i>	69
<i>EZALLOR SPR CAP 20MG</i>	64	<i>felodipine tab er 24hr 2.5 mg</i>	69
<i>EZALLOR SPR CAP 40MG</i>	64	<i>felodipine tab er 24hr 5 mg</i>	69
<i>EZALLOR SPR CAP 5MG</i>	64	<i>fenofibrate micronized cap 134 mg</i> ..	64
<i>ezetimibe tab 10 mg</i>	65	<i>fenofibrate micronized cap 200 mg</i> ..	64
<i>ezetimibe-simvastatin tab 10-10 mg</i>	65	<i>fenofibrate micronized cap 67 mg</i>	64
<i>ezetimibe-simvastatin tab 10-20 mg</i>	65	<i>fenofibrate tab 145 mg</i>	64
<i>ezetimibe-simvastatin tab 10-40 mg</i>	65	<i>fenofibrate tab 160 mg</i>	64
<i>ezetimibe-simvastatin tab 10-80 mg</i>	65	<i>fenofibrate tab 48 mg</i>	64
F		<i>fenofibrate tab 54 mg</i>	64
<i>FABRAZYME INJ 35MG</i>	122	<i>fentanyl td patch 72hr 100 mcg/hr</i>	22
<i>FABRAZYME INJ 5MG</i>	122	<i>fentanyl td patch 72hr 12 mcg/hr</i>	22
<i>falmina</i>	115	<i>fentanyl td patch 72hr 25 mcg/hr</i>	22
<i>famciclovir tab 125 mg</i>	32	<i>fentanyl td patch 72hr 37.5 mcg/hr</i> ..	22
<i>famciclovir tab 250 mg</i>	32	<i>fentanyl td patch 72hr 50 mcg/hr</i>	22
<i>famciclovir tab 500 mg</i>	32	<i>fentanyl td patch 72hr 62.5 mcg/hr</i> ..	22
<i>famotidine for susp 40 mg/5ml</i>	127	<i>fentanyl td patch 72hr 75 mcg/hr</i>	22
<i>famotidine in nacl 0.9% iv soln 20</i>		<i>fentanyl td patch 72hr 87.5 mcg/hr</i> ..	22
<i>mg/50ml</i>	127	<i>fesoterodine fumarate tab er 24hr 4</i>	
<i>famotidine inj 200 mg/20ml</i>	127	<i>mg</i>	131
<i>famotidine inj 40 mg/4ml</i>	127	<i>fesoterodine fumarate tab er 24hr 8</i>	
<i>famotidine preservative free inj 20</i>		<i>mg</i>	131
<i>mg/2ml</i>	127	<i>FETZIMA CAP 120MG</i>	78
<i>famotidine tab 20 mg</i>	127	<i>FETZIMA CAP 20MG</i>	78
<i>famotidine tab 40 mg</i>	127	<i>FETZIMA CAP 40MG</i>	78
<i>FANAPT PAK PACK A</i>	85	<i>FETZIMA CAP 80MG</i>	78
<i>FANAPT PAK PACK B</i>	85	<i>FETZIMA CAP TITRATIO</i>	78
<i>FANAPT PAK PACK C</i>	85	<i>FIASP FLEX INJ TOUCH</i>	110
<i>FANAPT TAB 10MG</i>	85	<i>FIASP INJ 100/ML</i>	110
<i>FANAPT TAB 12MG</i>	85	<i>FIASP PENFIL INJ U-100</i>	110
<i>FANAPT TAB 1MG</i>	85	<i>FIASP PMPCRT INJ U-100</i>	110
<i>FANAPT TAB 2MG</i>	85	<i>fidaxomicin tab 200 mg</i>	35
<i>FANAPT TAB 4MG</i>	85	<i>finasteride tab 5 mg</i>	130
<i>FANAPT TAB 6MG</i>	85	<i>ingolimod hcl cap 0.5 mg (base equiv)</i>	
<i>FANAPT TAB 8MG</i>	85	.....	104
<i>FARXIGA TAB 10MG</i>	107	<i>FINTEPLA SOL 2.2MG/ML</i>	93
<i>FARXIGA TAB 5MG</i>	106	<i>finzala</i>	115

FIRMAGON INJ 120MG.....	41	fluorouracil iv soln 2.5 gm/50ml (50 mg/ml).....	39
FIRMAGON INJ 80MG	41	fluorouracil iv soln 5 gm/100ml (50 mg/ml).....	39
flac	147	fluorouracil iv soln 500 mg/10ml (50 mg/ml).....	39
FLAREX SUS 0.1% OP	146	fluorouracil soln 2%	159
FLEBOGAMMA INJ 10/200ML	138	fluorouracil soln 5%	159
FLEBOGAMMA INJ 20/400ML	138	fluoxetine hcl cap 10 mg.....	78
FLEBOGAMMA INJ DIF 5%.....	138	fluoxetine hcl cap 20 mg.....	78
flecainide acetate tab 100 mg.....	63	fluoxetine hcl cap 40 mg.....	78
flecainide acetate tab 150 mg.....	63	fluoxetine hcl solution 20 mg/5ml	78
flecainide acetate tab 50 mg.....	63	fluphenazine decanoate inj 25 mg/ml	85
fluconazole for susp 10 mg/ml	28	fluphenazine hcl elixir 2.5 mg/5ml ...	85
fluconazole for susp 40 mg/ml	28	fluphenazine hcl inj 2.5 mg/ml	85
fluconazole in nacl 0.9% inj 200 mg/100ml.....	28	fluphenazine hcl oral conc 5 mg/ml ..	85
fluconazole in nacl 0.9% inj 400 mg/200ml.....	28	fluphenazine hcl tab 1 mg.....	85
fluconazole tab 100 mg	28	fluphenazine hcl tab 10 mg	85
fluconazole tab 150 mg	28	fluphenazine hcl tab 2.5 mg	85
fluconazole tab 200 mg	28	fluphenazine hcl tab 5 mg.....	85
fluconazole tab 50 mg	28	flurbiprofen sodium ophth soln 0.03%	146
flucytosine cap 250 mg.....	28	flurbiprofen tab 100 mg.....	21
flucytosine cap 500 mg.....	28	fluticasone propionate aer pow ba 100 mcg/act.....	154
fludrocortisone acetate tab 0.1 mg .	120	fluticasone propionate aer pow ba 250 mcg/act.....	154
flunisolide nasal soln 25 mcg/act (0.025%).....	153	fluticasone propionate aer pow ba 50 mcg/act.....	154
fluocinolone acetonide (otic) oil 0.01%	147	fluticasone propionate cream 0.05%	158
fluocinolone acetonide cream 0.01%	158	fluticasone propionate hfa inhal aer 110 mcg/act.....	154
fluocinolone acetonide cream 0.025%	158	fluticasone propionate hfa inhal aer 220 mcg/act.....	154
fluocinolone acetonide oil 0.01% (body oil).....	158	fluticasone propionate hfa inhal aero 44 mcg/act.....	154
fluocinolone acetonide oil 0.01% (scalp oil).....	158	fluticasone propionate nasal susp 50 mcg/act.....	153
fluocinolone acetonide oint 0.025%	158	fluticasone propionate oint 0.005%	158
fluocinolone acetonide soln 0.01% .	158	fluticasone-salmeterol aer powder ba 100-50 mcg/act.....	155
fluocinonide cream 0.05%.....	158	fluticasone-salmeterol aer powder ba 113-14 mcg/act.....	155
fluocinonide emulsified base cream 0.05%	158	fluticasone-salmeterol aer powder ba 232-14 mcg/act.....	155
fluocinonide gel 0.05%	158		
fluocinonide oint 0.05%	158		
fluocinonide soln 0.05%.....	158		
fluorometholone ophth susp 0.1%..	146		
fluorouracil cream 5%	159		
fluorouracil iv soln 1 gm/20ml (50 mg/ml)	39		

<i>fluticasone-salmeterol aer powder ba</i> <i>250-50 mcg/act</i>	155	<i>furosemide tab 20 mg</i>	70
<i>fluticasone-salmeterol aer powder ba</i> <i>500-50 mcg/act</i>	155	<i>furosemide tab 40 mg</i>	70
<i>fluticasone-salmeterol aer powder ba</i> <i>55-14 mcg/act</i>	155	<i>furosemide tab 80 mg</i>	70
<i>fluvastatin sodium cap 20 mg (base</i> <i>equivalent)</i>	64	FUZEON INJ 90MG.....	29
<i>fluvastatin sodium cap 40 mg (base</i> <i>equivalent)</i>	64	<i>fyavolv tab 0.5mg-2.5mcg</i>	119
<i>fluvastatin sodium tab er 24 hr 80 mg</i> <i>(base equivalent)</i>	64	<i>fyavolv tab 1mg-5mcg</i>	119
<i>fluvoxamine maleate tab 100 mg</i>	74	FYCOMPA SUS 0.5MG/ML.....	93
<i>fluvoxamine maleate tab 25 mg</i>	74	FYCOMPA TAB 10MG	93
<i>fluvoxamine maleate tab 50 mg</i>	74	FYCOMPA TAB 12MG	93
<i>fondaparinux sodium subcutaneous inj</i> <i>10 mg/0.8ml</i>	132	FYCOMPA TAB 2MG	93
<i>fondaparinux sodium subcutaneous inj</i> <i>2.5 mg/0.5ml</i>	132	FYCOMPA TAB 4MG	93
<i>fondaparinux sodium subcutaneous inj</i> <i>5 mg/0.4ml</i>	132	FYCOMPA TAB 6MG	93
<i>fondaparinux sodium subcutaneous inj</i> <i>7.5 mg/0.6ml</i>	132	FYCOMPA TAB 8MG	93
<i>formoterol fumarate soln nebu 20</i> <i>mcg/2ml</i>	150	G	
<i>fosamprenavir calcium tab 700 mg</i> <i>(base equiv)</i>	29	<i>gabapentin (once-daily) tab 300 mg</i>	103
<i>fosinopril sodium & hydrochlorothiazide</i> <i>tab 10-12.5 mg</i>	58	<i>gabapentin (once-daily) tab 600 mg</i>	103
<i>fosinopril sodium & hydrochlorothiazide</i> <i>tab 20-12.5 mg</i>	58	<i>gabapentin cap 100 mg</i>	93
<i>fosinopril sodium tab 10 mg</i>	59	<i>gabapentin cap 300 mg</i>	93
<i>fosinopril sodium tab 20 mg</i>	59	<i>gabapentin cap 400 mg</i>	93
<i>fosinopril sodium tab 40 mg</i>	59	<i>gabapentin oral soln 250 mg/5ml</i>	93
FOTIVDA CAP 0.89MG	47	<i>gabapentin tab 600 mg</i>	93
FOTIVDA CAP 1.34MG	47	<i>gabapentin tab 800 mg</i>	93
FRINDOVYX INJ 1GM/2ML	39	<i>galantamine hydrobromide cap er 24hr</i> <i>16 mg</i>	75
FRINDOVYX INJ 2GM/4ML	39	<i>galantamine hydrobromide cap er 24hr</i> <i>24 mg</i>	75
FRINDOVYX INJ 500MG/ML	39	<i>galantamine hydrobromide cap er 24hr</i> <i>8 mg</i>	75
FRUZAQLA CAP 1MG	47	<i>galantamine hydrobromide oral soln 4</i> <i>mg/ml</i>	75
FRUZAQLA CAP 5MG	47	<i>galantamine hydrobromide tab 12 mg</i>	75
FULPHILA INJ 6/0.6ML.....	133	<i>galantamine hydrobromide tab 4 mg</i> 75	
<i>fulvestrant inj soln pref syr 250</i> <i>mg/5ml</i>	41	<i>galantamine hydrobromide tab 8 mg</i> 75	
<i>furosemide inj</i>	70	<i>galbriela chw</i>	115
<i>furosemide oral soln 10 mg/ml</i>	70	<i>gallifrey tab 5mg</i>	124
<i>furosemide oral soln 8 mg/ml</i>	70	GAMASTAN INJ	138
		GAMMAGARD INJ 10GM/100	138
		GAMMAGARD INJ 1GM/10ML.....	138
		GAMMAGARD INJ 2.5GM/25	138
		GAMMAGARD INJ 20GM/200	138
		GAMMAGARD INJ 30GM/300	138
		GAMMAGARD INJ 5GM/50ML.....	138
		GAMMAGARD SD INJ 10GM HU.....	138
		GAMMAGARD SD INJ 5GM HU.....	138

GAMMAKED INJ 10GM/100.....	138	GENOTROPIN INJ 5MG	122
GAMMAKED INJ 1GM/10ML	138	<i>gentamicin in saline inj 0.8 mg/ml ...</i>	25
GAMMAKED INJ 20GM/200.....	138	<i>gentamicin in saline inj 1 mg/ml</i>	25
GAMMAKED INJ 5GM/50ML	138	<i>gentamicin in saline inj 1.2 mg/ml ...</i>	25
GAMMAPLEX INJ 10%.....	138	<i>gentamicin in saline inj 1.6 mg/ml ...</i>	25
GAMMAPLEX INJ 5%	138	<i>gentamicin in saline inj 2 mg/ml</i>	26
GAMUNEX-C INJ 10GM/100.....	138	<i>gentamicin sulfate cream 0.1%</i>	156
GAMUNEX-C INJ 1GM/10ML.....	138	<i>gentamicin sulfate inj 10 mg/ml</i>	26
GAMUNEX-C INJ 2.5GM/25.....	138	<i>gentamicin sulfate inj 40 mg/ml</i>	26
GAMUNEX-C INJ 20GM/200	138	<i>gentamicin sulfate oint 0.1%.....</i>	156
GAMUNEX-C INJ 40/400ML	138	<i>gentamicin sulfate ophth soln 0.3%</i>	145
GAMUNEX-C INJ 5GM/50ML.....	138	GENVOYA TAB.....	31
<i>ganciclovir sodium for inj 500 mg.....</i>	32	GILOTRIF TAB 20MG	47
GARDASIL 9 INJ	140	GILOTRIF TAB 30MG	47
<i>gatifloxacin ophth soln 0.5%</i>	145	GILOTRIF TAB 40MG	47
GATTEX KIT 5MG	128	GLARGIN YFGN INJ 100U/ML.....	110
GAUZE PADS 2	110	GLARGIN YFGN SOL 100U/ML.....	110
<i>gavilyte-c</i>	128	<i>glatiramer acetate soln prefilled syringe</i>	
<i>gavilyte-g</i>	128	<i>20 mg/ml</i>	104
<i>gavilyte-n sol flav pk</i>	128	<i>glatiramer acetate soln prefilled syringe</i>	
GAVRETO CAP 100MG	47	<i>40 mg/ml</i>	104
<i>gefitinib tab 250 mg</i>	47	<i>glatopa</i>	104
<i>gemcitabine hcl for inj 1 gm</i>	39	GLEOSTINE CAP 100MG	39
<i>gemcitabine hcl for inj 2 gm</i>	39	GLEOSTINE CAP 10MG	39
<i>gemcitabine hcl for inj 200 mg.....</i>	40	GLEOSTINE CAP 40MG	39
<i>gemcitabine hcl inj 1 gm/26.3ml (38</i>		<i>glimepiride tab 1 mg</i>	107
<i>mg/ml) (base equiv)</i>	40	<i>glimepiride tab 2 mg</i>	107
<i>gemcitabine hcl inj 2 gm/52.6ml (38</i>		<i>glimepiride tab 4 mg</i>	107
<i>mg/ml) (base equiv)</i>	40	<i>glipizide tab 10 mg</i>	107
<i>gemcitabine hcl inj 200 mg/5.26ml (38</i>		<i>glipizide tab 5 mg</i>	107
<i>mg/ml) (base equiv)</i>	40	<i>glipizide tab er 24hr 10 mg</i>	107
<i>gemfibrozil tab 600 mg.....</i>	64	<i>glipizide tab er 24hr 2.5 mg</i>	107
GEMTESA TAB 75MG	131	<i>glipizide tab er 24hr 5 mg</i>	107
<i>generlac</i>	128	<i>glipizide xl</i>	107
<i>gengraf</i>	140	<i>glipizide-metformin hcl tab 2.5-250 mg</i>	
<i>gengraf sol 100mg/ml</i>	140	.....	107
GENOTROPIN INJ 0.2MG.....	122	<i>glipizide-metformin hcl tab 2.5-500 mg</i>	
GENOTROPIN INJ 0.4MG.....	122	.....	107
GENOTROPIN INJ 0.6MG.....	122	<i>glipizide-metformin hcl tab 5-500 mg</i>	
GENOTROPIN INJ 0.8MG.....	122	.....	107
GENOTROPIN INJ 1.2MG.....	122	<i>glycopyrrolate tab 1 mg.....</i>	127
GENOTROPIN INJ 1.4MG.....	122	<i>glycopyrrolate tab 2 mg.....</i>	127
GENOTROPIN INJ 1.6MG.....	122	<i>glydo</i>	159
GENOTROPIN INJ 1.8MG.....	122	GLYXAMBI TAB 10-5 MG.....	107
GENOTROPIN INJ 12MG.....	122	GLYXAMBI TAB 25-5 MG.....	107
GENOTROPIN INJ 1MG.....	122	GOMEKLI CAP 1MG	47
GENOTROPIN INJ 2MG.....	122	GOMEKLI CAP 2MG	47

GOMEKLI TAB 1MG	47	HAVRIX INJ 1440UNIT.....	140
<i>granisetron hcl inj 1 mg/ml</i>	125	HAVRIX INJ 720UNIT	140
<i>granisetron hcl inj 4 mg/4ml (1 mg/ml)</i>	125	<i>heather</i>	115
<i>granisetron hcl tab 1 mg</i>	125	HEP SOD/NACL INJ 25000UNT.....	132
<i>griseofulvin microsize susp 125 mg/5ml</i>	28	<i>heparin sodium (porcine) inj 1000</i> <i>unit/ml</i>	132
<i>griseofulvin microsize tab 500 mg</i>	28	<i>heparin sodium (porcine) inj 10000</i> <i>unit/ml</i>	132
<i>griseofulvin ultramicrosize tab 125 mg</i>	28	<i>heparin sodium (porcine) inj 20000</i> <i>unit/ml</i>	132
<i>griseofulvin ultramicrosize tab 250 mg</i>	28	<i>heparin sodium (porcine) inj 5000</i> <i>unit/ml</i>	132
<i>guanfacine hcl tab 1 mg</i>	72	<i>heparin sodium (porcine) pf inj 1000</i> <i>unit/ml</i>	132
<i>guanfacine hcl tab 2 mg</i>	72	HEPLISAV-B INJ 20/0.5ML	141
<i>guanfacine hcl tab er 24hr 1 mg (base</i> <i>equiv)</i>	99	HERCEP HYLEC SOL 60-10000.....	47
<i>guanfacine hcl tab er 24hr 2 mg (base</i> <i>equiv)</i>	99	HERCEPTIN INJ 150MG.....	47
<i>guanfacine hcl tab er 24hr 3 mg (base</i> <i>equiv)</i>	99	HERNEXEOS TAB 60MG	47
<i>guanfacine hcl tab er 24hr 4 mg (base</i> <i>equiv)</i>	99	HERZUMA INJ 150MG.....	47
H		HERZUMA INJ 420MG.....	47
HAEGARDA INJ 2000UNIT	133	HIBERIX SOL 10MCG	141
HAEGARDA INJ 3000UNIT	133	HUMALOG INJ 100/ML.....	110
<i>hailey 1.5/30</i>	115	HUMALOG JR INJ 100/ML.....	110
<i>hailey 24 fe</i>	115	HUMALOG KWIK INJ 100/ML	110
<i>halobetasol propionate cream 0.05%</i>	158	HUMALOG KWIK INJ 200/ML	110
<i>halobetasol propionate oint 0.05%</i> .	158	HUMALOG MIX INJ 50/50KWP	110
<i>haloette</i>	115	HUMALOG MIX INJ 75/25KWP	110
<i>haloperidol decanoate im soln 100</i> <i>mg/ml</i>	85	HUMALOG MIX SUS 75/25	110
<i>haloperidol decanoate im soln 50</i> <i>mg/ml</i>	85	HUMALOG TMPO INJ 100/ML	110
<i>haloperidol lactate inj 5 mg/ml</i>	85	HUMIRA INJ 10/0.1ML.....	135
<i>haloperidol lactate oral conc 2 mg/ml</i>	85	HUMIRA INJ 20/0.2ML.....	135
<i>haloperidol tab 0.5 mg</i>	85	HUMIRA INJ 40/0.4ML.....	135
<i>haloperidol tab 1 mg</i>	85	HUMIRA KIT 40MG/0.8	135
<i>haloperidol tab 10 mg</i>	85	HUMIRA PEN INJ 40/0.4ML	135
<i>haloperidol tab 2 mg</i>	85	HUMIRA PEN INJ 40MG/0.8	135
<i>haloperidol tab 20 mg</i>	85	HUMIRA PEN INJ 80/0.8ML	135
<i>haloperidol tab 5 mg</i>	85	HUMIRA PEN KIT CD/UC/HS.....	136
HARVONI PAK 33.75-150MG	32	HUMIRA PEN KIT PED UC.....	136
HARVONI PAK 45-200MG	32	HUMIRA PEN KIT PS/UV.....	136
HARVONI TAB 45-200MG	32	HUMULIN INJ 70/30	110
HARVONI TAB 90-400MG	32	HUMULIN INJ 70/30KWP.....	110
		HUMULIN N INJ U-100.....	110
		HUMULIN N INJ U-100KWP	110
		HUMULIN R INJ U-100.....	110
		HUMULIN R INJ U-500.....	110
		<i>hydralazine hcl inj 20 mg/ml</i>	72
		<i>hydralazine hcl tab 10 mg</i>	72

<i>hydralazine hcl tab 100 mg</i>	72	<i>hydrocortisone valerate cream 0.2%</i>	158
<i>hydralazine hcl tab 25 mg</i>	72	<i>hydrocortisone w/ acetic acid otic soln</i> 1-2%	147
<i>hydralazine hcl tab 50 mg</i>	72	<i>hydromorphone hcl liqd 1 mg/ml</i>	24
<i>hydrochlorothiazide cap 12.5 mg</i>	70	<i>hydromorphone hcl tab 2 mg</i>	24
<i>hydrochlorothiazide tab 12.5 mg</i>	70	<i>hydromorphone hcl tab 4 mg</i>	24
<i>hydrochlorothiazide tab 25 mg</i>	70	<i>hydromorphone hcl tab 8 mg</i>	24
<i>hydrochlorothiazide tab 50 mg</i>	70	<i>hydroxychloroquine sulfate tab 200 mg</i>	138
<i>hydrocodone bitartrate tab er 24hr</i> deter 100 mg	22	<i>hydroxyurea cap 500 mg</i>	43
<i>hydrocodone bitartrate tab er 24hr</i> deter 120 mg	22	<i>hydroxyzine hcl im soln 25 mg/ml..</i>	149
<i>hydrocodone bitartrate tab er 24hr</i> deter 20 mg	22	<i>hydroxyzine hcl im soln 50 mg/ml..</i>	149
<i>hydrocodone bitartrate tab er 24hr</i> deter 30 mg	22	<i>hydroxyzine hcl syrup 10 mg/5ml ..</i>	149
<i>hydrocodone bitartrate tab er 24hr</i> deter 40 mg	22	<i>hydroxyzine hcl tab 10 mg</i>	149
<i>hydrocodone bitartrate tab er 24hr</i> deter 60 mg	22	<i>hydroxyzine hcl tab 25 mg</i>	149
<i>hydrocodone bitartrate tab er 24hr</i> deter 80 mg	22	<i>hydroxyzine hcl tab 50 mg</i>	149
<i>hydrocodone-acetaminophen soln 7.5-</i> <i>325 mg/15ml</i>	23	<i>hydroxyzine pamoate cap 25 mg ...</i>	149
<i>hydrocodone-acetaminophen tab 10-</i> <i>325 mg</i>	24	<i>hydroxyzine pamoate cap 50 mg ...</i>	149
<i>hydrocodone-acetaminophen tab 5-325</i> <i>mg</i>	23	I	
<i>hydrocodone-acetaminophen tab 7.5-</i> <i>325 mg</i>	23	<i>ibandronate sodium iv soln 3 mg/3ml</i> (base equivalent)	112
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>	24	<i>ibandronate sodium tab 150 mg (base</i> <i>equivalent)</i>	112
<i>hydrocortisone cream 1%</i>	158	<i>IBRANCE CAP 100MG</i>	47
<i>hydrocortisone cream 2.5%</i>	158	<i>IBRANCE CAP 125MG</i>	47
<i>hydrocortisone enema 100 mg/60ml</i>	127	<i>IBRANCE CAP 75MG</i>	47
<i>hydrocortisone lotion 2.5%</i>	158	<i>IBRANCE TAB 100MG</i>	48
<i>hydrocortisone oint 1%</i>	158	<i>IBRANCE TAB 125MG</i>	48
<i>hydrocortisone oint 2.5%</i>	158	<i>IBRANCE TAB 75MG</i>	48
<i>hydrocortisone perianal cream 1%</i> ..	159	<i>IBTROZI CAP 200MG</i>	48
<i>hydrocortisone perianal cream 2.5%</i>	159	<i>ibu</i>	21
<i>hydrocortisone sodium succinate pf for</i> <i>inj 100 mg</i>	120	<i>ibuprofen susp 100 mg/5ml</i>	21
<i>hydrocortisone tab 10 mg</i>	120	<i>ibuprofen tab 400 mg</i>	21
<i>hydrocortisone tab 20 mg</i>	120	<i>ibuprofen tab 600 mg</i>	21
<i>hydrocortisone tab 5 mg</i>	120	<i>ibuprofen tab 800 mg</i>	21
		<i>icatibant acetate subcutaneous soln</i> pref syr 30 mg/3ml	133
		<i>iclevia</i>	115
		<i>ICLUSIG TAB 10MG</i>	48
		<i>ICLUSIG TAB 15MG</i>	48
		<i>ICLUSIG TAB 30MG</i>	48
		<i>ICLUSIG TAB 45MG</i>	48
		<i>IDACIO 2-PEN INJ 40/0.8ML</i>	136
		<i>IDACIO CROHN INJ DISEASE</i>	136
		<i>IDACIO PLAQU INJ PSORIASIS</i>	136
		<i>IDHIFA TAB 100MG</i>	48

IDHIFA TAB 50MG.....	48	INSULIN PEN NEEDLES: BD-EMBECTA	110
<i>imatinib mesylate tab 100 mg (base</i>		.....	
<i>equivalent)</i>	48	INSULIN SAFETY NEEDLES: BD-	
<i>imatinib mesylate tab 400 mg (base</i>		EMBECTA.....	110
<i>equivalent)</i>	48	INSULIN SYRINGES: BD-EMBECTA.	110
IMBRUVICA CAP 140MG.....	48	INTELENCE TAB 25MG.....	29
IMBRUVICA CAP 70MG	48	INTRALIPID INJ 20%	144
IMBRUVICA SUS 70MG/ML	48	INTRALIPID INJ 30%	144
IMBRUVICA TAB 140MG.....	48	<i>introvale</i>	115
IMBRUVICA TAB 280MG.....	48	INVEGA HAFYE INJ 1092MG	85
IMBRUVICA TAB 420MG.....	48	INVEGA HAFYE INJ 1560MG	85
<i>imipenem-cilastatin intravenous for</i>		INVEGA SUST INJ 117/0.75	86
<i>soln 250 mg</i>	26	INVEGA SUST INJ 156MG/ML	86
<i>imipenem-cilastatin intravenous for</i>		INVEGA SUST INJ 234/1.5	86
<i>soln 500 mg</i>	26	INVEGA SUST INJ 39/0.25	86
<i>imipramine hcl tab 10 mg</i>	78	INVEGA SUST INJ 78/0.5ML.....	86
<i>imipramine hcl tab 25 mg</i>	78	INVEGA TRINZ INJ 273MG	86
<i>imipramine hcl tab 50 mg</i>	78	INVEGA TRINZ INJ 410MG	86
<i>imiquimod cream 5%</i>	159	INVEGA TRINZ INJ 546MG	86
IMKELDI SOL 80MG/ML	48	INVEGA TRINZ INJ 819MG	86
IMOVAX RABIE INJ 2.5/ML	141	IPOL INJ INACTIVE	141
IMPAVIDO CAP 50MG	26	<i>ipratropium bromide inhal soln 0.02%</i>	
INBRIJA CAP 42MG	81	.....	148
<i>incassia</i>	115	<i>ipratropium bromide nasal soln 0.03%</i>	
INCRELEX INJ 40MG/4ML.....	122	(21 mcg/spray)	148
INCRUSE ELPT INH 62.5MCG.....	148	<i>ipratropium bromide nasal soln 0.06%</i>	
<i>indapamide tab 1.25 mg</i>	70	(42 mcg/spray)	148
<i>indapamide tab 2.5 mg</i>	70	<i>ipratropium-albuterol nebu soln 0.5-</i>	
INFANRIX INJ.....	141	<i>2.5(3) mg/3ml</i>	148
INFLIXIMAB INJ 100MG	136	<i>irbesartan tab 150 mg</i>	62
INLYTA TAB 1MG	48	<i>irbesartan tab 300 mg</i>	62
INLYTA TAB 5MG	48	<i>irbesartan tab 75 mg</i>	62
INQOVI TAB 35-100MG	40	<i>irbesartan-hydrochlorothiazide tab</i>	
INREBIC CAP 100MG	49	<i>150-12.5 mg</i>	61
INS ASP PROT INJ FLEXPEN	110	<i>irbesartan-hydrochlorothiazide tab</i>	
INS DEGL FLX INJ 100UNIT	110	<i>300-12.5 mg</i>	61
INS DEGL FLX INJ 200UNIT.....	110	<i>irinotecan hcl inj 100 mg/5ml (20</i>	
INSULIN ASPA INJ 100/ML	110	<i>mg/ml)</i>	43
INSULIN ASPA INJ 70/30	110	<i>irinotecan hcl inj 300 mg/15ml (20</i>	
INSULIN ASPA INJ FLEXPEN	110	<i>mg/ml)</i>	43
INSULIN ASPA INJ PENFILL	110	<i>irinotecan hcl inj 40 mg/2ml (20</i>	
INSULIN DEGL INJ 100UNIT	110	<i>mg/ml)</i>	43
INSULIN GLAR INJ 300/ML.....	110	<i>irinotecan hcl inj 500 mg/25ml (20</i>	
INSULIN LISP INJ 100/ML	110	<i>mg/ml)</i>	43
INSULIN LISP INJ JUNIOR.....	110	ISENTRESS CHW 100MG	29
INSULIN LISP INJ PROTAMIN.....	110	ISENTRESS CHW 25MG	29
		ISENTRESS HD TAB 600MG	29

ISENTRESS POW 100MG	29	JANUVIA TAB 100MG	107
ISENTRESS TAB 400MG	29	JANUVIA TAB 25MG	107
<i>isibloom</i>	115	JANUVIA TAB 50MG	107
ISOLYTE-P INJ /D5W	142	JARDIANCE TAB 10MG	107
ISOLYTE-S INJ PH 7.4	142	JARDIANCE TAB 25MG	107
<i>isoniazid syrup 50 mg/5ml</i>	31	<i>jasmiel</i>	115
<i>isoniazid tab 100 mg</i>	31	<i>javygtor</i>	122
<i>isoniazid tab 300 mg</i>	31	JAYPIRCA TAB 100MG	49
<i>isosorbide dinitrate tab 10 mg</i>	72	JAYPIRCA TAB 50MG	49
<i>isosorbide dinitrate tab 20 mg</i>	72	JENTADUETO TAB 2.5-1000	107
<i>isosorbide dinitrate tab 30 mg</i>	72	JENTADUETO TAB 2.5-500	107
<i>isosorbide dinitrate tab 5 mg</i>	72	JENTADUETO TAB 2.5-850	107
<i>isosorbide mononitrate tab er 24hr 120</i> <i>mg</i>	72	JENTADUETO TAB XR 2.5-1000MG .	107
<i>isosorbide mononitrate tab er 24hr 30</i> <i>mg</i>	72	JENTADUETO TAB XR 5-1000MG....	107
<i>isosorbide mononitrate tab er 24hr 60</i> <i>mg</i>	72	<i>jinteli</i>	119
<i>isotretinoin cap 10 mg</i>	155	<i>jolessa</i>	115
<i>isotretinoin cap 20 mg</i>	155	<i>juleber</i>	115
<i>isotretinoin cap 30 mg</i>	155	JULUCA TAB 50-25MG	31
<i>isotretinoin cap 40 mg</i>	155	<i>junel 1.5/30</i>	115
<i>isradipine cap 2.5 mg</i>	69	<i>junel 1/20</i>	115
<i>isradipine cap 5 mg</i>	69	<i>junel fe 1.5/30</i>	115
ITOVEBI TAB 3MG	49	<i>junel fe 1/20</i>	115
ITOVEBI TAB 9MG	49	<i>junel fe 24</i>	115
<i>itraconazole cap 100 mg</i>	28	JYLAMVO SOL 2MG/ML	138
<i>ivabradine hcl tab 5 mg (base equiv)</i> 72		JYNNEOS INJ	141
<i>ivabradine hcl tab 7.5 mg (base equiv)</i>	72	K	
<i>ivermectin tab 3 mg</i>	26	KADCYLA INJ 100MG	49
<i>ivermectin tab 6 mg</i>	26	KADCYLA INJ 160MG	49
IWILFIN TAB 192MG	43	<i>kaitlib fe</i>	115
IXIARO INJ	141	KALETRA SOL	31
J		KALYDECO GRA 13.4MG	151
<i>jaimiess tab</i>	115	KALYDECO GRA 5.8MG	151
JAKAFI TAB 10MG	49	KALYDECO PAK 25MG	151
JAKAFI TAB 15MG	49	KALYDECO PAK 50MG	151
JAKAFI TAB 20MG	49	KALYDECO PAK 75MG	151
JAKAFI TAB 25MG	49	KALYDECO TAB 150MG	151
JAKAFI TAB 5MG	49	KANJINTI INJ 420MG	49
<i>jantoven</i>	132	KANJINTI SOL 150MG	49
JANUMET TAB 50-1000	107	<i>kariva</i>	115
JANUMET TAB 50-500MG	107	<i>kcl 10 meq/l (0.075%) in dextrose 5%</i> <i>& nacl 0.45% inj</i>	142
JANUMET XR TAB 100-1000	107	<i>kcl 20 meq/l (0.149%) in nacl 0.45%</i> <i>inj</i>	142
JANUMET XR TAB 50-1000	107	<i>kcl 20 meq/l (0.15%) in dextrose 5% &</i> <i>nacl 0.2% inj</i>	142
JANUMET XR TAB 50-500MG	107	<i>kcl 20 meq/l (0.15%) in dextrose 5% &</i> <i>nacl 0.45% inj</i>	142

<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj</i>	142
<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i>	142
<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>	142
<i>kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj</i>	142
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj</i>	142
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.9% inj</i>	142
<i>kcl 40 meq/l (0.3%) in nacl 0.9% inj</i>	142
KCL/D5W/NACL INJ 0.3/0.9%.....	142
<i>kelnor 1/35</i>	115
<i>kelnor 1/50 tab</i>	115
KERENDIA TAB 10MG	60
KERENDIA TAB 20MG	60
KERENDIA TAB 40MG	60
KESIMPTA INJ 20/.4ML	104
<i>ketoconazole cream 2%</i>	156
<i>ketoconazole shampoo 2%</i>	156
<i>ketoconazole tab 200 mg</i>	28
<i>ketorolac tromethamine ophth soln 0.4%</i>	146
<i>ketorolac tromethamine ophth soln 0.5%</i>	146
<i>ketorolac tromethamine tab 10 mg</i> ...21	
KEYTRUDA INJ 100MG/4M.....	49
KINRIX INJ	141
<i>kionex sus 15gm/60</i>	113
KISQALI 200 DOSE	49
KISQALI 200 PAK FEMARA	49
KISQALI 400 DOSE	49
KISQALI 400 PAK FEMARA	49
KISQALI 600 DOSE	49
KISQALI 600 PAK FEMARA	49
<i>klayesta</i>	156
<i>klor-con</i>	143
<i>klor-con 10</i>	143
<i>klor-con 8</i>	143
<i>klor-con m10</i>	143
<i>klor-con m15</i>	143
<i>klor-con m20</i>	143
KLOXXADO SPR 8MG.....	105
KOSELUGO CAP 10MG	49

KOSELUGO CAP 25MG	49
<i>kourzeq</i>	160
KRAZATI TAB 200MG	50
<i>kurvelo</i>	115
L	
<i>labetalol hcl tab 100 mg</i>	66
<i>labetalol hcl tab 200 mg</i>	66
<i>labetalol hcl tab 300 mg</i>	66
<i>lacosamide iv inj 200 mg/20ml (10 mg/ml)</i>	93
<i>lacosamide oral</i>	93
<i>lacosamide tab 100 mg</i>	93
<i>lacosamide tab 150 mg</i>	93
<i>lacosamide tab 200 mg</i>	93
<i>lacosamide tab 50 mg</i>	93
<i>lactated ringer's solution</i>	142
<i>lactic acid (ammonium lactate) cream 12%</i>	159
<i>lactic acid (ammonium lactate) lotion 12%</i>	159
<i>lactulose (encephalopathy) solution 10 gm/15ml</i>	128
<i>lactulose solution 10 gm/15ml</i>	128
<i>lamivudine oral soln 10 mg/ml</i>	29
<i>lamivudine tab 100 mg (hbv)</i>	32
<i>lamivudine tab 150 mg</i>	29
<i>lamivudine tab 300 mg</i>	29
<i>lamivudine-zidovudine tab 150-300 mg</i>	31
<i>lamotrigine orally disintegrating tab 100 mg</i>	93
<i>lamotrigine orally disintegrating tab 200 mg</i>	93
<i>lamotrigine orally disintegrating tab 25 mg</i>	93
<i>lamotrigine orally disintegrating tab 50 mg</i>	93
<i>lamotrigine tab 100 mg</i>	93
<i>lamotrigine tab 150 mg</i>	93
<i>lamotrigine tab 200 mg</i>	93
<i>lamotrigine tab 25 mg</i>	93
<i>lamotrigine tab chewable dispersible 25 mg</i>	93
<i>lamotrigine tab chewable dispersible 5 mg</i>	93
<i>lamotrigine tab er 24hr 100 mg</i>	94
<i>lamotrigine tab er 24hr 200 mg</i>	94

<i>lamotrigine tab er 24hr 25 mg</i>	93	<i>leucovorin calcium for inj 350 mg</i>	57
<i>lamotrigine tab er 24hr 250 mg</i>	94	<i>leucovorin calcium for inj 50 mg</i>	57
<i>lamotrigine tab er 24hr 300 mg</i>	94	<i>leucovorin calcium for inj 500 mg</i>	57
<i>lamotrigine tab er 24hr 50 mg</i>	94	<i>leucovorin calcium inj 500 mg/50ml</i>	
<i>lanreotide acetate extended release inj</i>		<i>(10 mg/ml)</i>	57
<i>120 mg/0.5ml</i>	122	<i>leucovorin calcium tab 10 mg</i>	57
<i>lansoprazole cap delayed release 15</i>		<i>leucovorin calcium tab 15 mg</i>	57
<i>mg</i>	129	<i>leucovorin calcium tab 25 mg</i>	57
<i>lansoprazole cap delayed release 30</i>		<i>leucovorin calcium tab 5 mg</i>	57
<i>mg</i>	129	LEUKERAN TAB 2MG	39
<i>lansoprazole tab delayed release orally</i>		<i>leuprolide acetate inj kit 1 mg/0.2ml (5</i>	
<i>disintegrating 15 mg</i>	130	<i>mg/ml)</i>	41
<i>lansoprazole tab delayed release orally</i>		<i>levalbuterol hcl soln nebu 0.31 mg/3ml</i>	
<i>disintegrating 30 mg</i>	130	<i>(base equiv)</i>	150
LANTUS INJ 100/ML	110	<i>levalbuterol hcl soln nebu 0.63 mg/3ml</i>	
LANTUS SOLOS INJ 100/ML	111	<i>(base equiv)</i>	150
<i>lapatinib ditosylate tab 250 mg (base</i>		<i>levalbuterol hcl soln nebu 1.25 mg/3ml</i>	
<i>equiv)</i>	50	<i>(base equiv)</i>	150
<i>larin 1.5/30</i>	115	<i>levalbuterol hcl soln nebu conc 1.25</i>	
<i>larin 1/20</i>	115	<i>mg/0.5ml (base equiv)</i>	150
<i>larin 24 fe</i>	115	<i>levalbuterol tartrate inhal aerosol 45</i>	
<i>larin fe 1.5/30</i>	115	<i>mcg/act (base equiv)</i>	150
<i>larin fe 1/20</i>	115	LEVETIRACETA TAB 250MG	94
<i>latanoprost ophth soln 0.005%</i>	147	<i>levetiracetam in sodium chloride iv soln</i>	
<i>layolis fe chw</i>	115	<i>1000 mg/100ml</i>	94
LAZCLUZE TAB 240MG	50	<i>levetiracetam in sodium chloride iv soln</i>	
LAZCLUZE TAB 80MG	50	<i>1500 mg/100ml</i>	94
<i>leflunomide tab 10 mg</i>	138	<i>levetiracetam in sodium chloride iv soln</i>	
<i>leflunomide tab 20 mg</i>	138	<i>500 mg/100ml</i>	94
<i>lenalidomide cap 10 mg</i>	42	<i>levetiracetam inj 500 mg/5ml (100</i>	
<i>lenalidomide cap 15 mg</i>	42	<i>mg/ml)</i>	94
<i>lenalidomide cap 20 mg</i>	42	<i>levetiracetam oral soln 100 mg/ml</i> ...	94
<i>lenalidomide cap 25 mg</i>	42	<i>levetiracetam tab 1000 mg</i>	94
<i>lenalidomide cap 5 mg</i>	42	<i>levetiracetam tab 250 mg</i>	94
<i>lenalidomide caps 2.5 mg</i>	42	<i>levetiracetam tab 500 mg</i>	94
LENVIMA CAP 10 MG	50	<i>levetiracetam tab 750 mg</i>	94
LENVIMA CAP 12MG	50	<i>levetiracetam tab er 24hr 500 mg</i>	94
LENVIMA CAP 14 MG	50	<i>levetiracetam tab er 24hr 750 mg</i>	94
LENVIMA CAP 18 MG	50	<i>levobunolol hcl ophth soln 0.5%</i>	147
LENVIMA CAP 20 MG	50	<i>levocarnitine oral soln 1 gm/10ml</i>	
LENVIMA CAP 24 MG	50	<i>(10%)</i>	122
LENVIMA CAP 4MG	50	<i>levocarnitine tab 330 mg</i>	122
LENVIMA CAP 8 MG	50	<i>levocetirizine dihydrochloride soln 2.5</i>	
<i>lessina</i>	115	<i>mg/5ml (0.5 mg/ml)</i>	149
<i>letrozole tab 2.5 mg</i>	41	<i>levocetirizine dihydrochloride tab 5 mg</i>	
<i>leucovorin calcium for inj 100 mg</i>	57	.....	149
<i>leucovorin calcium for inj 200 mg</i>	57		

<i>levofloxacin in d5w iv soln 250 mg/50ml</i>	35	<i>lidocaine hcl local inj 2%</i>	20
<i>levofloxacin in d5w iv soln 500 mg/100ml</i>	35	<i>lidocaine hcl local preservative free (pf) inj 0.5%</i>	20
<i>levofloxacin in d5w iv soln 750 mg/150ml</i>	36	<i>lidocaine hcl local preservative free (pf) inj 1%</i>	20
<i>levofloxacin iv soln 25 mg/ml</i>	36	<i>lidocaine hcl local preservative free (pf) inj 1.5%</i>	20
<i>levofloxacin oral soln 25 mg/ml</i>	36	<i>lidocaine hcl soln 4%</i>	159
<i>levofloxacin tab 250 mg</i>	36	<i>lidocaine hcl viscous soln 2%</i>	160
<i>levofloxacin tab 500 mg</i>	36	<i>lidocaine oint 5%</i>	159
<i>levofloxacin tab 750 mg</i>	36	<i>lidocaine patch 5%</i>	159
<i>levonest</i>	115	<i>lidocaine-prilocaine cream 2.5-2.5%</i>	159
<i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg</i>	115	<i>lidocan</i>	159
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	116	<i>LILETTA IUD 52MG</i>	116
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	116	<i>linezolid for susp 100 mg/5ml</i>	26
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	116	<i>LINEZOLID INJ 2MG/ML</i>	26
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i> ...	116	<i>linezolid iv soln 600 mg/300ml (2 mg/ml)</i>	26
<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i>	116	<i>linezolid tab 600 mg</i>	26
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	115	<i>LINZESS CAP 145MCG</i>	128
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	116	<i>LINZESS CAP 290MCG</i>	128
<i>levora 0.15/30-28</i>	116	<i>LINZESS CAP 72MCG</i>	128
<i>levo-t</i>	124	<i>liothyronine sodium tab 25 mcg</i>	124
<i>levothyroxine sodium tab 100 mcg</i> .	124	<i>liothyronine sodium tab 5 mcg</i>	124
<i>levothyroxine sodium tab 112 mcg</i> .	124	<i>liothyronine sodium tab 50 mcg</i>	124
<i>levothyroxine sodium tab 125 mcg</i> .	124	<i>liraglutide soln pen-injector 18 mg/3ml (6 mg/ml)</i>	107
<i>levothyroxine sodium tab 137 mcg</i> .	124	<i>lisdexamfetamine dimesylate cap 10 mg</i>	99
<i>levothyroxine sodium tab 150 mcg</i> .	124	<i>lisdexamfetamine dimesylate cap 20 mg</i>	99
<i>levothyroxine sodium tab 175 mcg</i> .	124	<i>lisdexamfetamine dimesylate cap 30 mg</i>	99
<i>levothyroxine sodium tab 200 mcg</i> .	124	<i>lisdexamfetamine dimesylate cap 40 mg</i>	99
<i>levothyroxine sodium tab 25 mcg</i> ...	124	<i>lisdexamfetamine dimesylate cap 50 mg</i>	99
<i>levothyroxine sodium tab 300 mcg</i> .	124	<i>lisdexamfetamine dimesylate cap 60 mg</i>	99
<i>levothyroxine sodium tab 50 mcg</i> ...	124	<i>lisdexamfetamine dimesylate cap 70 mg</i>	99
<i>levothyroxine sodium tab 75 mcg</i> ...	124	<i>lisdexamfetamine dimesylate chew tab 10 mg</i>	100
<i>levoxyl</i>	124	<i>lisdexamfetamine dimesylate chew tab 20 mg</i>	100
<i>l-glutamine (sickle cell)</i>	134		
<i>lidocaine hcl local inj 0.5%</i>	20		
<i>lidocaine hcl local inj 1%</i>	20		

<i>lisdexamfetamine dimesylate chew tab</i>		<i>lorazepam tab 1 mg</i>	75
30 mg	100	<i>lorazepam tab 2 mg</i>	75
<i>lisdexamfetamine dimesylate chew tab</i>		LORBRENA TAB 100MG	50
40 mg	100	LORBRENA TAB 25MG	50
<i>lisdexamfetamine dimesylate chew tab</i>		<i>loryna</i>	116
50 mg	100	<i>losartan potassium &</i>	
<i>lisdexamfetamine dimesylate chew tab</i>		<i>hydrochlorothiazide tab 100-12.5 mg</i>	
60 mg	100	.....	61
<i>lisinopril & hydrochlorothiazide tab 10-</i>		<i>losartan potassium &</i>	
12.5 mg	58	<i>hydrochlorothiazide tab 100-25 mg</i>	61
<i>lisinopril & hydrochlorothiazide tab 20-</i>		<i>losartan potassium &</i>	
12.5 mg	58	<i>hydrochlorothiazide tab 50-12.5 mg</i>	
<i>lisinopril & hydrochlorothiazide tab 20-</i>		.....	61
25 mg	58	<i>losartan potassium tab 100 mg</i>	62
<i>lisinopril tab 10 mg</i>	59	<i>losartan potassium tab 25 mg</i>	62
<i>lisinopril tab 2.5 mg</i>	59	<i>losartan potassium tab 50 mg</i>	62
<i>lisinopril tab 20 mg</i>	59	LOTEMAX OIN 0.5%.....	146
<i>lisinopril tab 30 mg</i>	59	<i>loteprednol etabonate ophth susp 0.2%</i>	
<i>lisinopril tab 40 mg</i>	59	.....	146
<i>lisinopril tab 5 mg</i>	59	<i>lovastatin tab 10 mg</i>	64
<i>lithium carbonate cap 150 mg</i>	103	<i>lovastatin tab 20 mg</i>	64
<i>lithium carbonate cap 300 mg</i>	103	<i>lovastatin tab 40 mg</i>	64
<i>lithium carbonate cap 600 mg</i>	103	<i>low-ogestrel</i>	116
<i>lithium carbonate tab 300 mg</i>	103	<i>loxapine succinate cap 10 mg</i>	86
<i>lithium carbonate tab er 300 mg</i>	103	<i>loxapine succinate cap 25 mg</i>	86
<i>lithium carbonate tab er 450 mg</i>	103	<i>loxapine succinate cap 5 mg</i>	86
<i>lithium oral solution 8 meq/5ml</i>	103	<i>loxapine succinate cap 50 mg</i>	86
LIVTENCITY TAB 200MG	32	<i>luizza 1/20 tab</i>	116
<i>loestrin 1.5/30-21</i>	116	<i>luizza tab 1.5/30</i>	116
<i>loestrin 1/20-21</i>	116	LUMAKRAS TAB 120MG	50
<i>loestrin fe 1.5/30</i>	116	LUMAKRAS TAB 240MG	50
<i>loestrin fe 1/20</i>	116	LUMAKRAS TAB 320MG	50
<i>lojaimiess tab</i>	116	LUMIGAN SOL 0.01% OP	147
LOKELMA PAK 10GM	113	LUMIZYME INJ 50MG.....	122
LOKELMA PAK 5GM	113	LUPR DEP-PED INJ 11.25MG	122
LONSURF TAB 15-6.14	40	LUPR DEP-PED INJ 15MG	123
LONSURF TAB 20-8.19	40	LUPR DEP-PED INJ 3M 30MG	122
<i>loperamide hcl cap 2 mg</i>	128	LUPR DEP-PED INJ 7.5MG	122
<i>lopinavir-ritonavir soln 400-100</i>		LUPRON DEPOT INJ 11.25MG	41
<i>mg/5ml (80-20 mg/ml)</i>	31	LUPRON DEPOT INJ 3.75MG.....	41
<i>lopinavir-ritonavir tab 100-25 mg</i>	31	LUPRON DEPOT INJ 45MG.....	123
<i>lopinavir-ritonavir tab 200-50 mg</i>	31	<i>lurasidone hcl tab 120 mg</i>	86
<i>lorazepam conc 2 mg/ml</i>	75	<i>lurasidone hcl tab 20 mg</i>	86
<i>lorazepam inj 2 mg/ml</i>	75	<i>lurasidone hcl tab 40 mg</i>	86
<i>lorazepam inj 4 mg/ml</i>	75	<i>lurasidone hcl tab 60 mg</i>	86
<i>lorazepam intensol</i>	75	<i>lurasidone hcl tab 80 mg</i>	86
<i>lorazepam tab 0.5 mg</i>	75	<i>lutra</i>	116

LYBALVI TAB 10-10MG	86
LYBALVI TAB 15-10MG	86
LYBALVI TAB 20-10MG	86
LYBALVI TAB 5-10MG	86
<i>lyleq</i>	116
<i>lyllana</i>	119
LYNPARZA TAB 100MG	50
LYNPARZA TAB 150MG	50
LYSODREN TAB 500MG.....	41
LYTGOBI (12 MG DAILY DOSE)	50
LYTGOBI (16 MG DAILY DOSE)	50
LYTGOBI (20 MG DAILY DOSE)	51
LYUMJEV INJ 100UT/ML	111
LYUMJEV KWPN INJ 100UT/ML.....	111
LYUMJEV KWPN INJ 200UT/ML.....	111
LYUMJEV TMPO INJ 100UT/ML	111
<i>lyza</i>	116
M	
MAGNESIUM SU INJ 20/500ML	142
MAGNESIUM SU INJ 2GM/50ML	142
MAGNESIUM SU INJ 40G/1000	142
MAGNESIUM SU INJ 4G/100ML.....	142
MAGNESIUM SU INJ 50%.....	142
MAGNESIUM SU INJ 80MG/ML	142
<i>magnesium sulfate in dextrose 5% iv</i> <i>soln 1 gm/100ml</i>	143
<i>magnesium sulfate inj 50%</i>	143
<i>magnesium sulfate iv soln 2 gm/50ml</i> <i>(40 mg/ml)</i>	143
<i>magnesium sulfate iv soln 20</i> <i>gm/500ml (40 mg/ml)</i>	143
<i>magnesium sulfate iv soln 4 gm/100ml</i> <i>(40 mg/ml)</i>	143
<i>magnesium sulfate iv soln 4 gm/50ml</i> <i>(80 mg/ml)</i>	143
<i>magnesium sulfate iv soln 40</i> <i>gm/1000ml (40 mg/ml)</i>	143
<i>malathion lotion 0.5%</i>	160
<i>maraviroc tab 150 mg</i>	29
<i>maraviroc tab 300 mg</i>	29
<i>marlissa</i>	116
MARPLAN TAB 10MG	78
MATULANE CAP 50MG	43
<i>matzim la</i>	69
MAVYRET PAK 50-20MG.....	32
MAVYRET TAB 100-40MG.....	32
<i>meclizine hcl tab 12.5 mg</i>	125

<i>meclizine hcl tab 25 mg</i>	125
<i>medroxyprogesterone acetate im susp</i> <i>150 mg/ml</i>	116
<i>medroxyprogesterone acetate im susp</i> <i>prefilled syr 150 mg/ml</i>	116
<i>medroxyprogesterone acetate tab 10</i> <i>mg</i>	124
<i>medroxyprogesterone acetate tab 2.5</i> <i>mg</i>	124
<i>medroxyprogesterone acetate tab 5 mg</i>	124
<i>mefloquine hcl tab 250 mg</i>	28
<i>megestrol acetate susp 40 mg/ml ..</i>	124
<i>megestrol acetate susp 625 mg/5ml</i>	124
<i>megestrol acetate tab 20 mg</i>	41
<i>megestrol acetate tab 40 mg</i>	41
MEKINIST SOL 0.05/ML.....	51
MEKINIST TAB 0.5MG	51
MEKINIST TAB 2MG	51
MEKTOVI TAB 15MG	51
<i>meleya tab 0.35mg</i>	116
<i>meloxicam tab 15 mg</i>	21
<i>meloxicam tab 7.5 mg</i>	21
<i>memantine hcl cap er 24hr 14 mg</i> ...	75
<i>memantine hcl cap er 24hr 21 mg</i> ...	75
<i>memantine hcl cap er 24hr 28 mg</i> ...	75
<i>memantine hcl cap er 24hr 7 mg</i>	75
<i>memantine hcl oral solution 2 mg/ml</i>	75
<i>memantine hcl tab 10 mg</i>	75
<i>memantine hcl tab 5 mg</i>	75
<i>memantine hcl-donepezil hcl cap er</i> <i>24hr 14-10 mg</i>	75
<i>memantine hcl-donepezil hcl cap er</i> <i>24hr 21-10 mg</i>	76
<i>memantine hcl-donepezil hcl cap er</i> <i>24hr 28-10 mg</i>	76
MENACTRA INJ	141
MENQUADFI INJ	141
MENVEO INJ	141
MENVEO SOL	141
<i>mercaptopurine susp 2000 mg/100ml</i> <i>(20 mg/ml)</i>	40
<i>mercaptopurine tab 50 mg</i>	40
<i>meropenem iv for soln 1 gm</i>	26
<i>meropenem iv for soln 2 gm</i>	26
<i>meropenem iv for soln 500 mg</i>	26

<i>mesalamine cap dr 400 mg</i>	127
<i>mesalamine cap er 24hr 0.375 gm</i> .	127
<i>mesalamine enema 4 gm</i>	127
<i>mesalamine rectal enema 4 gm & cleanser wipe kit</i>	127
<i>mesalamine suppos 1000 mg</i>	127
<i>mesalamine tab delayed release 1.2 gm</i>	128
<i>mesna tab 400 mg</i>	57
<i>MESNEX TAB 400MG</i>	57
<i>metformin hcl oral soln 500 mg/5ml</i>	107
<i>metformin hcl tab 1000 mg</i>	107
<i>metformin hcl tab 500 mg</i>	107
<i>metformin hcl tab 850 mg</i>	107
<i>metformin hcl tab er 24hr 500 mg.</i>	107
<i>metformin hcl tab er 24hr 750 mg.</i>	108
<i>methadone hcl soln 10 mg/5ml</i>	22
<i>methadone hcl soln 5 mg/5ml</i>	22
<i>methadone hcl tab 10 mg</i>	22
<i>methadone hcl tab 5 mg</i>	22
<i>methadone hydrochloride i</i>	22
<i>methazolamide tab 25 mg</i>	70
<i>methazolamide tab 50 mg</i>	70
<i>methenamine hippurate tab 1 gm</i>	26
<i>methimazole tab 10 mg</i>	124
<i>methimazole tab 5 mg</i>	124
<i>methotrexate sodium for inj 1 gm</i>	40
<i>methotrexate sodium inj 250 mg/10ml (25 mg/ml)</i>	40
<i>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</i>	40
<i>methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)</i>	40
<i>methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)</i>	40
<i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i>	40
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	138
<i>methoxsalen rapid cap 10 mg</i>	157
<i>methsuximide cap 300 mg</i>	94
<i>methylphenidate hcl chew tab 10 mg</i>	100
<i>methylphenidate hcl chew tab 2.5 mg</i>	100
<i>methylphenidate hcl chew tab 5 mg</i>	100
<i>methylphenidate hcl soln 10 mg/5ml</i>	100
<i>methylphenidate hcl soln 5 mg/5ml</i>	100
<i>methylphenidate hcl tab 10 mg</i>	100
<i>methylphenidate hcl tab 20 mg</i>	100
<i>methylphenidate hcl tab 5 mg</i>	100
<i>methylphenidate hcl tab er 10 mg.</i>	100
<i>methylphenidate hcl tab er 20 mg.</i>	100
<i>methylprednisolone acetate inj susp 40 mg/ml</i>	120
<i>methylprednisolone acetate inj susp 80 mg/ml</i>	120
<i>methylprednisolone sod succ for inj 1000 mg (base equiv)</i>	120
<i>methylprednisolone sod succ for inj 125 mg (base equiv)</i>	120
<i>methylprednisolone sod succ for inj 40 mg (base equiv)</i>	120
<i>methylprednisolone tab 16 mg</i>	121
<i>methylprednisolone tab 32 mg</i>	121
<i>methylprednisolone tab 4 mg</i>	120
<i>methylprednisolone tab 8 mg</i>	120
<i>methylprednisolone tab therapy pack 4 mg (21)</i>	121
<i>methyltestosterone cap 10 mg</i>	106
<i>metoclopramide hcl inj 5 mg/ml (base equivalent)</i>	126
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	126
<i>metoclopramide hcl tab 10 mg (base equivalent)</i>	126
<i>metoclopramide hcl tab 5 mg (base equivalent)</i>	126
<i>metolazone tab 10 mg</i>	70
<i>metolazone tab 2.5 mg</i>	70
<i>metolazone tab 5 mg</i>	70
<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	66
<i>metoprolol & hydrochlorothiazide tab 100-50 mg</i>	66
<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	66
<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i>	67
<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i>	67

<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</i>	66	<i>misoprostol tab 200 mcg</i>	129
<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i>	67	MITIGARE CAP 0.6MG	20
<i>metoprolol tartrate iv soln 5 mg/5ml</i>	67	M-M-R II INJ.....	141
<i>metoprolol tartrate tab 100 mg</i>	67	M-NATAL PLUS TAB.....	143
<i>metoprolol tartrate tab 25 mg</i>	67	<i>modafinil tab 100 mg</i>	105
<i>metoprolol tartrate tab 50 mg</i>	67	<i>modafinil tab 200 mg</i>	105
<i>metronidazole cream 0.75%</i>	159	MODEYSO CAP 125MG	43
<i>metronidazole gel 0.75%</i>	159	<i>moexipril hcl tab 15 mg</i>	59
<i>metronidazole iv soln 500 mg/100ml</i>	26	<i>moexipril hcl tab 7.5 mg</i>	59
<i>metronidazole lotion 0.75%</i>	159	<i>molindone hcl tab 10 mg</i>	86
<i>metronidazole tab 250 mg</i>	26	<i>molindone hcl tab 25 mg</i>	86
<i>metronidazole tab 500 mg</i>	26	<i>molindone hcl tab 5 mg</i>	86
<i>metronidazole vaginal gel 0.75%</i> ...	131	<i>mometasone furoate cream 0.1%</i> ..	158
<i>metyrosine cap 250 mg</i>	72	<i>mometasone furoate nasal susp 50 mcg/act</i>	153
<i>mibelas 24 fe</i>	116	<i>mometasone furoate oint 0.1%</i>	158
<i>micafungin sodium for iv soln 100 mg</i>	28	<i>mometasone furoate solution 0.1% (lotion)</i>	158
<i>micafungin sodium for iv soln 50 mg</i>	28	MONJUVI INJ 200MG.....	51
<i>microgestin 1.5/30</i>	116	<i>mono-lynyah</i>	116
<i>microgestin 1/20</i>	116	<i>montelukast sodium chew tab 4 mg (base equiv)</i>	150
<i>microgestin fe 1.5/30</i>	116	<i>montelukast sodium chew tab 5 mg (base equiv)</i>	150
<i>microgestin fe 1/20</i>	116	<i>montelukast sodium oral granules packet 4 mg (base equiv)</i>	151
<i>midodrine hcl tab 10 mg</i>	72	<i>montelukast sodium tab 10 mg (base equiv)</i>	151
<i>midodrine hcl tab 2.5 mg</i>	72	<i>morphine sulfate iv soln 10 mg/ml</i> ...	24
<i>midodrine hcl tab 5 mg</i>	72	<i>morphine sulfate iv soln 2 mg/ml</i>	24
MIEBO DRO 1.3GM/ML	147	<i>morphine sulfate iv soln 4 mg/ml</i>	24
<i>mifepristone tab 300 mg</i>	123	<i>morphine sulfate iv soln 8 mg/ml</i>	24
<i>mili</i>	116	<i>morphine sulfate oral soln 10 mg/5ml</i>	24
<i>mimvey</i>	119	<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	24
<i>minocycline hcl cap 100 mg</i>	38	<i>morphine sulfate oral soln 20 mg/5ml</i>	24
<i>minocycline hcl cap 50 mg</i>	38	<i>morphine sulfate tab 15 mg</i>	24
<i>minocycline hcl cap 75 mg</i>	38	<i>morphine sulfate tab 30 mg</i>	24
<i>minoxidil tab 10 mg</i>	72	<i>morphine sulfate tab er 100 mg</i>	23
<i>minoxidil tab 2.5 mg</i>	72	<i>morphine sulfate tab er 15 mg</i>	23
<i>mirtazapine orally disintegrating tab 15 mg</i>	78	<i>morphine sulfate tab er 200 mg</i>	23
<i>mirtazapine orally disintegrating tab 30 mg</i>	78	<i>morphine sulfate tab er 30 mg</i>	23
<i>mirtazapine orally disintegrating tab 45 mg</i>	78	<i>morphine sulfate tab er 60 mg</i>	23
<i>mirtazapine tab 15 mg</i>	78	MOUNJARO INJ 10MG/0.5.....	108
<i>mirtazapine tab 30 mg</i>	78	MOUNJARO INJ 12.5/0.5	108
<i>mirtazapine tab 45 mg</i>	78		
<i>mirtazapine tab 7.5 mg</i>	78		
<i>misoprostol tab 100 mcg</i>	128		

MOUNJARO INJ 15MG/0.5	108
MOUNJARO INJ 2.5/0.5	108
MOUNJARO INJ 5MG/0.5	108
MOUNJARO INJ 7.5/0.5	108
MOVANTIK TAB 12.5MG	129
MOVANTIK TAB 25MG	129
<i>moxifloxacin hcl 400 mg/250ml in</i>	
<i>sodium chloride 0.8% inj.....</i>	<i>36</i>
<i>moxifloxacin hcl ophth soln 0.5% (base</i>	
<i>equiv)</i>	<i>145</i>
<i>moxifloxacin hcl tab 400 mg (base</i>	
<i>equiv)</i>	<i>36</i>
MRESVIA INJ 50MCG	141
MULTAQ TAB 400MG	63
<i>multiple electrolytes ph 5.5</i>	<i>143</i>
<i>multiple electrolytes ph 7.4</i>	<i>143</i>
<i>mupirocin oint 2%</i>	<i>156</i>
<i>mycophenolate mofetil cap 250 mg</i>	<i>140</i>
<i>mycophenolate mofetil for oral susp</i>	
<i>200 mg/ml</i>	<i>140</i>
<i>mycophenolate mofetil tab 500 mg</i>	<i>140</i>
<i>mycophenolate sodium tab dr 180 mg</i>	
<i>(mycophenolic acid equiv)</i>	<i>140</i>
<i>mycophenolate sodium tab dr 360 mg</i>	
<i>(mycophenolic acid equiv)</i>	<i>140</i>
MYRBETRIQ SUS 8MG/ML	131
MYRBETRIQ TAB 25MG	131
MYRBETRIQ TAB 50MG	131

N

<i>nabumetone tab 500 mg.....</i>	<i>21</i>
<i>nabumetone tab 750 mg.....</i>	<i>21</i>
<i>nadolol tab 20 mg.....</i>	<i>67</i>
<i>nadolol tab 40 mg.....</i>	<i>67</i>
<i>nadolol tab 80 mg.....</i>	<i>67</i>
<i>nafcillin sodium for inj 1 gm</i>	<i>37</i>
<i>nafcillin sodium for inj 2 gm</i>	<i>37</i>
<i>nafcillin sodium for iv soln 10 gm</i>	<i>37</i>
NAGLAZYME INJ 1MG/ML	123
<i>nalbuphine hcl inj 10 mg/ml</i>	<i>24</i>
<i>nalbuphine hcl inj 20 mg/ml</i>	<i>24</i>
<i>naloxone hcl inj 0.4 mg/ml.....</i>	<i>105</i>
<i>naloxone hcl inj 4 mg/10ml</i>	<i>105</i>
<i>naloxone hcl nasal spray 4 mg/0.1ml</i>	
<i>.....</i>	<i>105</i>
<i>naloxone hcl soln cartridge 0.4 mg/ml</i>	
<i>.....</i>	<i>105</i>

<i>naloxone hcl soln prefilled syringe 0.4</i>	
<i>mg/ml.....</i>	<i>106</i>
<i>naloxone hcl soln prefilled syringe 2</i>	
<i>mg/2ml</i>	<i>106</i>
<i>naltrexone hcl tab 50 mg.....</i>	<i>106</i>
NAMZARIC CAP 14-10MG.....	76
NAMZARIC CAP 21-10MG.....	76
NAMZARIC CAP 28-10MG.....	76
NAMZARIC CAP 7-10MG	76
NAMZARIC CAP PACK.....	76
<i>naproxen sodium tab 275 mg.....</i>	<i>21</i>
<i>naproxen sodium tab 550 mg.....</i>	<i>21</i>
<i>naproxen tab 250 mg.....</i>	<i>21</i>
<i>naproxen tab 375 mg.....</i>	<i>21</i>
<i>naproxen tab 500 mg.....</i>	<i>21</i>
<i>naproxen tab ec 375 mg.....</i>	<i>21</i>
<i>naratriptan hcl tab 1 mg (base equiv)</i>	
<i>.....</i>	<i>101</i>
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	
<i>.....</i>	<i>101</i>
NATACYN SUS 5% OP	145
<i>nateglinide tab 120 mg</i>	<i>108</i>
<i>nateglinide tab 60 mg</i>	<i>108</i>
NAYZILAM SPR 5MG.....	94
<i>nebivolol hcl tab 10 mg (base</i>	
<i>equivalent)</i>	<i>67</i>
<i>nebivolol hcl tab 2.5 mg (base</i>	
<i>equivalent)</i>	<i>67</i>
<i>nebivolol hcl tab 20 mg (base</i>	
<i>equivalent)</i>	<i>67</i>
<i>nebivolol hcl tab 5 mg (base</i>	
<i>equivalent)</i>	<i>67</i>
<i>necon 0.5/35-28</i>	<i>116</i>
<i>nefazodone hcl tab 100 mg</i>	<i>79</i>
<i>nefazodone hcl tab 150 mg</i>	<i>79</i>
<i>nefazodone hcl tab 200 mg</i>	<i>79</i>
<i>nefazodone hcl tab 250 mg</i>	<i>79</i>
<i>nefazodone hcl tab 50 mg.....</i>	<i>79</i>
<i>neomycin sulfate tab 500 mg</i>	<i>26</i>
<i>neomycin-bacitrac zn-polymyx</i>	
<i>5(3.5)mg-400unt-10000unt op oin</i>	
<i>.....</i>	<i>145</i>
<i>neomycin-polymyx-gramicid op sol</i>	
<i>1.75-10000-0.025mg-unt-mg/ml</i>	<i>145</i>
<i>neomycin-polymyxin-dexamethasone</i>	
<i>ophth oint 0.1%</i>	<i>145</i>

<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	145	<i>nilotinib hcl cap 50 mg (base equivalent)</i>	51
<i>neomycin-polymyxin-hc ophth susp</i>	145	<i>nilutamide tab 150 mg</i>	41
<i>neomycin-polymyxin-hc otic soln 1%</i>	148	<i>nimodipine cap 30 mg</i>	69
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	148	<i>NINLARO CAP 2.3MG.....</i>	51
<i>neo-polycin 5(3.5)mg-400unt- 10000unt op oin</i>	145	<i>NINLARO CAP 3MG</i>	51
<i>neo-polycin hc ophth oint 1%</i>	145	<i>NINLARO CAP 4MG</i>	51
<i>NERLYNX TAB 40MG.....</i>	51	<i>nisoldipine tab er 24hr 17 mg.....</i>	69
<i>NEUPRO DIS 1MG/24HR</i>	81	<i>nisoldipine tab er 24hr 20 mg.....</i>	69
<i>NEUPRO DIS 2MG/24HR</i>	81	<i>nisoldipine tab er 24hr 25.5 mg.....</i>	69
<i>NEUPRO DIS 3MG/24HR</i>	81	<i>nisoldipine tab er 24hr 30 mg.....</i>	69
<i>NEUPRO DIS 4MG/24HR</i>	81	<i>nisoldipine tab er 24hr 34 mg.....</i>	69
<i>NEUPRO DIS 6MG/24HR</i>	81	<i>nisoldipine tab er 24hr 40 mg.....</i>	69
<i>NEUPRO DIS 8MG/24HR</i>	81	<i>nisoldipine tab er 24hr 8.5 mg.....</i>	69
<i>nevirapine susp 50 mg/5ml</i>	29	<i>nitazoxanide tab 500 mg</i>	26
<i>nevirapine tab 200 mg</i>	29	<i>nitisinone cap 10 mg</i>	123
<i>nevirapine tab er 24hr 400 mg</i>	29	<i>nitisinone cap 2 mg</i>	123
<i>NEXLETOL TAB 180MG</i>	65	<i>nitisinone cap 20 mg.....</i>	123
<i>NEXLIZET TAB 180/10MG</i>	65	<i>nitisinone cap 5 mg</i>	123
<i>NEXPLANON IMP 68MG.....</i>	116	<i>NITRO-BID OIN 2%</i>	72
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	65	<i>nitrofurantoin macrocrystalline cap 100 mg</i>	26
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	65	<i>nitrofurantoin macrocrystalline cap 50 mg</i>	26
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	65	<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	26
<i>nicardipine hcl cap 20 mg</i>	69	<i>nitroglycerin oint 0.4%.....</i>	159
<i>nicardipine hcl cap 30 mg</i>	69	<i>nitroglycerin sl tab 0.3 mg</i>	72
<i>NICOTROL INH</i>	106	<i>nitroglycerin sl tab 0.4 mg</i>	72
<i>NICOTROL NS SPR 10MG/ML.....</i>	106	<i>nitroglycerin sl tab 0.6 mg</i>	73
<i>nifedipine tab er 24hr 30 mg</i>	69	<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>	73
<i>nifedipine tab er 24hr 60 mg</i>	69	<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	73
<i>nifedipine tab er 24hr 90 mg</i>	69	<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	73
<i>nifedipine tab er 24hr osmotic release 30 mg</i>	69	<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	73
<i>nifedipine tab er 24hr osmotic release 60 mg</i>	69	<i>nizatidine cap 150 mg</i>	127
<i>nifedipine tab er 24hr osmotic release 90 mg</i>	69	<i>nizatidine cap 300 mg</i>	127
<i>nikki</i>	117	<i>nora-be.....</i>	117
<i>nilotinib hcl cap 150 mg (base equivalent).....</i>	51	<i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr.....</i>	117
<i>nilotinib hcl cap 200 mg (base equivalent).....</i>	51	<i>norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i>	117
		<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	117

<i>norethindrone ace & ethinyl estradiol</i>	
<i>tab 1.5 mg-30 mcg</i>	117
<i>norethindrone ace-eth estradiol-fe</i>	
<i>chew tab 1 mg-20 mcg (24)</i>	117
<i>norethindrone acetate tab 5 mg</i>	124
<i>norethindrone acetate-ethinyl estradiol</i>	
<i>tab 0.5 mg-2.5 mcg</i>	119
<i>norethindrone acetate-ethinyl estradiol</i>	
<i>tab 1 mg-5 mcg</i>	119
<i>norethindrone tab 0.35 mg</i>	117
<i>norgestimate & ethinyl estradiol tab</i>	
<i>0.25 mg-35 mcg</i>	117
<i>norgestimate-eth estrad tab 0.18-</i>	
<i>25/0.215-25/0.25-25 mg-mcg</i>	117
<i>norgestimate-eth estrad tab 0.18-</i>	
<i>35/0.215-35/0.25-35 mg-mcg</i>	117
<i>norlyroc</i>	117
<i>nortrel 0.5/35 (28)</i>	117
<i>nortrel 1/35 (21)</i>	117
<i>nortrel 1/35 (28)</i>	117
<i>nortrel 7/7/7</i>	117
<i>nortriptyline hcl cap 10 mg</i>	79
<i>nortriptyline hcl cap 25 mg</i>	79
<i>nortriptyline hcl cap 50 mg</i>	79
<i>nortriptyline hcl cap 75 mg</i>	79
<i>nortriptyline hcl soln 10 mg/5ml</i>	79
<i>NORVIR POW 100MG</i>	29
<i>NOVOLIN INJ 70/30</i>	111
<i>NOVOLIN INJ 70/30 FP</i>	111
<i>NOVOLIN N INJ 100 UNIT</i>	111
<i>NOVOLIN N INJ RELION</i>	111
<i>NOVOLIN N INJ U-100</i>	111
<i>NOVOLIN R INJ 100 UNIT</i>	111
<i>NOVOLIN R INJ RELION</i>	111
<i>NOVOLIN R INJ U-100</i>	111
<i>NOVOLIN70/30 INJ RELION</i>	111
<i>NOVOLOG INJ 100/ML</i>	111
<i>NOVOLOG INJ FLEX REL</i>	111
<i>NOVOLOG INJ FLEXPEN</i>	111
<i>NOVOLOG INJ PENFILL</i>	111
<i>NOVOLOG INJ RELION</i>	111
<i>NOVOLOG MIX INJ 70/30</i>	111
<i>NOVOLOG MIX INJ FLEX REL</i>	111
<i>NOVOLOG MIX INJ FLEXPEN</i>	111
<i>NOVOLOG RELI INJ 70/30</i>	111
<i>NUBEQA TAB 300MG</i>	41
<i>NUDEXTA CAP 20-10MG</i>	103

<i>NULOJIX INJ 250MG</i>	140
<i>NUPLAZID CAP 34MG</i>	86
<i>NUPLAZID TAB 10MG</i>	86
<i>NURTEC TAB 75MG ODT</i>	102
<i>NUTRILIPID EMU 20%</i>	144
<i>NUZYRA INJ 100MG</i>	38
<i>NUZYRA TAB 150MG</i>	38
<i>nyamyc</i>	156
<i>nylia 1/35</i>	117
<i>nylia 7/7/7</i>	117
<i>nystatin cream 100000 unit/gm</i>	156
<i>nystatin oint 100000 unit/gm</i>	156
<i>nystatin susp 100000 unit/ml</i>	160
<i>nystatin tab 500000 unit</i>	28
<i>nystatin topical powder 100000</i>	
<i>unit/gm</i>	156
<i>nystop</i>	156
O	
<i>ocella</i>	117
<i>OCTAGAM INJ 10/100ML</i>	139
<i>OCTAGAM INJ 10GM</i>	139
<i>OCTAGAM INJ 1GM</i>	138
<i>OCTAGAM INJ 2.5GM</i>	139
<i>OCTAGAM INJ 20/200ML</i>	139
<i>OCTAGAM INJ 2GM/20ML</i>	139
<i>OCTAGAM INJ 30/300ML</i>	139
<i>OCTAGAM INJ 5GM</i>	139
<i>OCTAGAM INJ 5GM/50ML</i>	139
<i>octreotide acetate inj 100 mcg/ml (0.1</i>	
<i>mg/ml)</i>	123
<i>octreotide acetate inj 1000 mcg/ml (1</i>	
<i>mg/ml)</i>	123
<i>octreotide acetate inj 200 mcg/ml (0.2</i>	
<i>mg/ml)</i>	123
<i>octreotide acetate inj 50 mcg/ml (0.05</i>	
<i>mg/ml)</i>	123
<i>octreotide acetate inj 500 mcg/ml (0.5</i>	
<i>mg/ml)</i>	123
<i>octreotide acetate subcutaneous soln</i>	
<i>pref syr 100 mcg/ml</i>	123
<i>octreotide acetate subcutaneous soln</i>	
<i>pref syr 50 mcg/ml</i>	123
<i>octreotide acetate subcutaneous soln</i>	
<i>pref syr 500 mcg/ml</i>	123
<i>ODEFSEY TAB</i>	31
<i>ODOMZO CAP 200MG</i>	51
<i>OFEV CAP 100MG</i>	152

OFEV CAP 150MG	152	olmesartan-amlodipine-	
ofloxacin ophth soln 0.3%.....	145	hydrochlorothiazide tab 40-10-25 mg	
ofloxacin otic soln 0.3%.....	148	.....	61
OGIVRI INJ 150MG	51	olmesartan-amlodipine-	
OGIVRI INJ 420MG	51	hydrochlorothiazide tab 40-5-12.5	
OGSIVEO TAB 100MG.....	51	mg	61
OGSIVEO TAB 150MG.....	51	olmesartan-amlodipine-	
OGSIVEO TAB 50MG	51	hydrochlorothiazide tab 40-5-25 mg	
OJEMDA SUS 25MG/ML.....	51	.....	61
OJEMDA TAB 100MG	51	olopatadine hcl nasal soln 0.6%.....	149
OJJAARA TAB 100MG.....	51	omega-3-acid ethyl esters cap 1 gm.	66
OJJAARA TAB 150MG.....	51	omeprazole cap delayed release 10 mg	
OJJAARA TAB 200MG.....	52	.....	130
olanzapine for im inj 10 mg.....	86	omeprazole cap delayed release 20 mg	
olanzapine orally disintegrating tab 10		.....	130
mg.....	87	omeprazole cap delayed release 40 mg	
olanzapine orally disintegrating tab 15		.....	130
mg.....	87	OMNIPOD 5 DX KIT INT G7G6	111
olanzapine orally disintegrating tab 20		OMNIPOD 5 DX MIS POD G7G6	111
mg.....	87	OMNIPOD 5 G7 KIT INTRO.....	111
olanzapine orally disintegrating tab 5		OMNIPOD 5 G7 MIS PODS	111
mg.....	87	OMNIPOD 5 L2 KIT INTRO G6.....	111
olanzapine tab 10 mg	87	OMNIPOD 5 L2 MIS PODS G6	111
olanzapine tab 15 mg	87	OMNIPOD DASH KIT INTRO	111
olanzapine tab 2.5 mg	87	OMNIPOD DASH MIS PODS	111
olanzapine tab 20 mg	87	OMNIPOD GO KIT 10UNT/DY.....	111
olanzapine tab 5 mg.....	87	OMNIPOD GO KIT 15UNT/DY.....	111
olanzapine tab 7.5 mg	87	OMNIPOD GO KIT 20UNT/DY.....	111
olmesartan medoxomil tab 20 mg	62	OMNIPOD GO KIT 25UNT/DY.....	112
olmesartan medoxomil tab 40 mg	62	OMNIPOD GO KIT 30UNT/DY.....	112
olmesartan medoxomil tab 5 mg	62	OMNIPOD GO KIT 35UNT/DY.....	112
olmesartan medoxomil-		OMNIPOD GO KIT 40UNT/DY.....	112
hydrochlorothiazide tab 20-12.5 mg		OMNIPOD MIS CLASSIC.....	112
.....	61	ondansetron hcl inj 4 mg/2ml (2	
olmesartan medoxomil-		mg/ml).....	126
hydrochlorothiazide tab 40-12.5 mg		ondansetron hcl inj 40 mg/20ml (2	
.....	61	mg/ml).....	126
olmesartan medoxomil-		ondansetron hcl inj soln pref syr 4	
hydrochlorothiazide tab 40-25 mg .	61	mg/2ml	126
olmesartan-amlodipine-		ondansetron hcl oral soln 4 mg/5ml	126
hydrochlorothiazide tab 20-5-12.5		ondansetron hcl tab 4 mg	126
mg.....	61	ondansetron hcl tab 8 mg	126
olmesartan-amlodipine-		ondansetron orally disintegrating tab 4	
hydrochlorothiazide tab 40-10-12.5		mg	126
mg.....	61	ondansetron orally disintegrating tab 8	
		mg	126
		ONTRUZANT INJ 150MG	52

ONTRUZANT INJ 420MG	52
ONUREG TAB 200MG	40
ONUREG TAB 300MG	40
OPIPZA MIS 10MG	87
OPIPZA MIS 2MG	87
OPIPZA MIS 5MG	87
OPSUMIT TAB 10MG	73
ORGOVYX TAB 120MG	41
ORKAMBI GRA 100-125	152
ORKAMBI GRA 150-188	152
ORKAMBI GRA 75-94MG	152
ORKAMBI TAB 100-125	152
ORKAMBI TAB 200-125	152
orquidea tab 0.35mg	117
ORSERDU TAB 345MG	42
ORSERDU TAB 86MG	41
oseltamivir phosphate cap 30 mg (base equiv)	32
oseltamivir phosphate cap 45 mg (base equiv)	32
oseltamivir phosphate cap 75 mg (base equiv)	32
oseltamivir phosphate for susp 6 mg/ml (base equiv)	32
oxacillin sodium for inj 1 gm (base equivalent)	37
oxacillin sodium for inj 2 gm (base equivalent)	37
oxacillin sodium for iv soln 10 gm (base equivalent)	37
oxaliplatin for iv inj 100 mg	39
oxaliplatin for iv inj 50 mg	39
oxaliplatin iv soln 100 mg/20ml	39
oxaliplatin iv soln 200 mg/40ml	39
oxaliplatin iv soln 50 mg/10ml	39
oxaprozin tab 600 mg	21
oxcarbazepine susp 300 mg/5ml (60 mg/ml)	94
oxcarbazepine tab 150 mg	94
oxcarbazepine tab 300 mg	94
oxcarbazepine tab 600 mg	94
oxybutynin chloride solution 5 mg/5ml	131
oxybutynin chloride tab 5 mg	131
oxybutynin chloride tab er 24hr 10 mg	131

oxybutynin chloride tab er 24hr 15 mg	131
oxybutynin chloride tab er 24hr 5 mg	131
oxycodone hcl conc 100 mg/5ml (20 mg/ml)	24
oxycodone hcl soln 5 mg/5ml	24
oxycodone hcl tab 10 mg	24
oxycodone hcl tab 15 mg	24
oxycodone hcl tab 20 mg	24
oxycodone hcl tab 30 mg	24
oxycodone hcl tab 5 mg	24
oxycodone w/ acetaminophen tab 10-325 mg	24
oxycodone w/ acetaminophen tab 2.5-325 mg	24
oxycodone w/ acetaminophen tab 5-325 mg	24
oxycodone w/ acetaminophen tab 7.5-325 mg	24
OXYCONTIN TAB 10MG ER	23
OXYCONTIN TAB 15MG ER	23
OXYCONTIN TAB 20MG ER	23
OXYCONTIN TAB 30MG ER	23
OXYCONTIN TAB 40MG ER	23
OXYCONTIN TAB 60MG ER	23
OXYCONTIN TAB 80MG ER	23
OZEMPIC (0.25 OR 0.5MG/DOSE) ..	108
OZEMPIC (1MG/DOSE)	108
OZEMPIC (2MG/DOSE)	108
P	
pacerone	63
paclitaxel inj 100mg	44
paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)	44
paclitaxel iv conc 150 mg/25ml (6 mg/ml)	44
paclitaxel iv conc 30 mg/5ml (6 mg/ml)	44
paclitaxel iv conc 300 mg/50ml (6 mg/ml)	44
paliperidone tab er 24hr 1.5 mg	87
paliperidone tab er 24hr 3 mg	87
paliperidone tab er 24hr 6 mg	87
paliperidone tab er 24hr 9 mg	87
pamidronate disodium iv soln 3 mg/ml	112

pamidronate disodium iv soln 9 mg/ml
 112
 PAMIDRONATE INJ 6MG/ML..... 112
 PANRETIN GEL 0.1% 159
pantoprazole sodium ec tab 20 mg
(base equiv)..... 130
pantoprazole sodium ec tab 40 mg
(base equiv)..... 130
pantoprazole sodium for iv soln 40 mg
(base equiv)..... 130
 PANZYGA SOL 10/100ML 139
 PANZYGA SOL 1GM/10ML 139
 PANZYGA SOL 2.5/25ML 139
 PANZYGA SOL 20/200ML 139
 PANZYGA SOL 30/300ML 139
 PANZYGA SOL 5GM/50ML 139
paricalcitol cap 1 mcg 125
paricalcitol cap 2 mcg 125
paricalcitol cap 4 mcg 125
paroxetine hcl oral susp 10 mg/5ml
(base equiv)..... 79
paroxetine hcl tab 10 mg 79
paroxetine hcl tab 20 mg 79
paroxetine hcl tab 30 mg 79
paroxetine hcl tab 40 mg 79
paroxetine hcl tab er 24hr 12.5 mg .. 79
paroxetine hcl tab er 24hr 25 mg 79
paroxetine hcl tab er 24hr 37.5 mg .. 79
 PAXLOVID PAK 33
 PAXLOVID TAB 150-100..... 33
 PAXLOVID TAB 300-100..... 33
pazopanib hcl tab 200 mg (base equiv)
 52
 PEDIARIX INJ 0.5ML..... 141
 PEDVAX HIB INJ 141
peg 3350-kcl-na bicarb-nacl-na sulfate
for soln 236 gm 128
peg 3350-kcl-sod bicarb-nacl for soln
420 gm 128
 PEGASYS INJ..... 33
 PEGASYS INJ 180MCG/M 33
 PEMAZYRE TAB 13.5MG 52
 PEMAZYRE TAB 4.5MG 52
 PEMAZYRE TAB 9MG 52
pemetrexed disodium for iv soln 100
mg (base equiv) 40

pemetrexed disodium for iv soln 1000
mg (base equiv) 40
pemetrexed disodium for iv soln 500
mg (base equiv) 40
pemetrexed disodium for iv soln 750
mg (base equiv) 40
 PENBRAYA INJ 141
penicillamine tab 250 mg..... 113
penicillin g potassium for inj 20000000
unit 37
penicillin g potassium for inj 5000000
unit 37
penicillin g sodium for inj 5000000 unit
 37
penicillin v potassium for soln 125
mg/5ml 37
penicillin v potassium for soln 250
mg/5ml 37
penicillin v potassium tab 250 mg 37
penicillin v potassium tab 500 mg 37
 PENMENVY INJ 141
 PENTACEL INJ 141
pentamidine isethionate inh 26
pentamidine isethionate inj 26
pentoxifylline tab er 400 mg 134
perampanel tab 10 mg 94
perampanel tab 12 mg 94
perampanel tab 2 mg 94
perampanel tab 4 mg 94
perampanel tab 6 mg 94
perampanel tab 8 mg 94
perindopril erbumine tab 2 mg 59
perindopril erbumine tab 4 mg 59
perindopril erbumine tab 8 mg 59
periogard 160
permethrin cream 5% 160
perphenazine tab 16 mg 87
perphenazine tab 2 mg..... 87
perphenazine tab 4 mg..... 87
perphenazine tab 8 mg..... 87
pfizerpen 37
phenelzine sulfate tab 15 mg 79
phenobarbital elixir 20 mg/5ml..... 95
phenobarbital sodium inj 130 mg/ml 95
phenobarbital sodium inj 65 mg/ml .. 95
phenobarbital tab 100 mg..... 95
phenobarbital tab 15 mg 95

<i>phenobarbital tab 16.2 mg</i>	95	<i>piperacillin sod-tazobactam sod for inj</i>	
<i>phenobarbital tab 30 mg</i>	95	4.5 gm (4-0.5 gm)	38
<i>phenobarbital tab 32.4 mg</i>	95	<i>piperacillin sod-tazobactam sod for inj</i>	
<i>phenobarbital tab 60 mg</i>	95	40.5 gm (36-4.5 gm)	38
<i>phenobarbital tab 64.8 mg</i>	95	PIQRAY 200MG TAB DOSE	52
<i>phenobarbital tab 97.2 mg</i>	95	PIQRAY 250MG TAB DOSE	52
<i>phenytek</i>	95	PIQRAY 300MG TAB DOSE	52
<i>phenytoin chew tab 50 mg</i>	95	<i>pirfenidone cap 267 mg</i>	152
<i>phenytoin sodium extended cap 100</i>		<i>pirfenidone tab 267 mg</i>	152
<i>mg</i>	95	<i>pirfenidone tab 534 mg</i>	152
<i>phenytoin sodium extended cap 200</i>		<i>pirfenidone tab 801 mg</i>	152
<i>mg</i>	95	<i>piroxicam cap 10 mg</i>	21
<i>phenytoin sodium extended cap 300</i>		<i>piroxicam cap 20 mg</i>	21
<i>mg</i>	95	<i>pitavastatin calcium tab 1 mg</i>	64
<i>phenytoin sodium inj 50 mg/ml</i>	95	<i>pitavastatin calcium tab 2 mg</i>	64
<i>phenytoin susp 125 mg/5ml</i>	95	<i>pitavastatin calcium tab 4 mg</i>	65
PHESGO SOL	52	<i>plenamine</i>	144
<i>philith</i>	117	PLENVU SOL	128
PIFELTRO TAB 100MG	30	<i>podofilox soln 0.5%</i>	159
<i>pilocarpine hcl ophth soln 1%</i>	147	<i>polycin ophth oint</i>	145
<i>pilocarpine hcl ophth soln 2%</i>	147	<i>polymyxin b sulfate for inj 500000 unit</i>	
<i>pilocarpine hcl ophth soln 4%</i>	147	.....	26
<i>pilocarpine hcl tab 5 mg</i>	160	<i>polymyxin b-trimethoprim ophth soln</i>	
<i>pilocarpine hcl tab 7.5 mg</i>	160	10000 unit/ml-0.1%	146
<i>pimecrolimus cream 1%</i>	159	POMALYST CAP 1MG	42
<i>pimozide tab 1 mg</i>	87	POMALYST CAP 2MG	42
<i>pimozide tab 2 mg</i>	87	POMALYST CAP 3MG	42
<i>pimtrea</i>	117	POMALYST CAP 4MG	42
<i>pindolol tab 10 mg</i>	67	<i>portia-28</i>	117
<i>pindolol tab 5 mg</i>	67	<i>posaconazole susp 40 mg/ml</i>	28
<i>pioglitazone hcl tab 15 mg (base equiv)</i>		<i>posaconazole tab delayed release 100</i>	
.....	108	<i>mg</i>	28
<i>pioglitazone hcl tab 30 mg (base equiv)</i>		POT CHL 20MEQ/L IN NAACL 0.45% INJ	
.....	108	.....	143
<i>pioglitazone hcl tab 45 mg (base equiv)</i>		POT CHL 20MEQ/L IN NAACL 0.9% INJ	
.....	108	.....	143
<i>pioglitazone hcl-metformin hcl tab 15-</i>		POT CHL 40MEQ/L IN NAACL 0.9% INJ	
500 mg	108	.....	143
<i>pioglitazone hcl-metformin hcl tab 15-</i>		<i>potassium chloride 20 meq/l (0.15%)</i>	
850 mg	108	<i>in dextrose 5% inj</i>	143
<i>piperacillin sod-tazobactam na for inj</i>		<i>potassium chloride cap er 10 meq..</i>	144
3.375 gm (3-0.375 gm)	37	<i>potassium chloride cap er 8 meq ...</i>	143
<i>piperacillin sod-tazobactam sod for inj</i>		<i>potassium chloride inj 10 meq/100ml</i>	
13.5 gm (12-1.5 gm)	38	.....	143
<i>piperacillin sod-tazobactam sod for inj</i>		<i>potassium chloride inj 10 meq/50ml</i>	
2.25 gm (2-0.25 gm)	37	.....	143
		<i>potassium chloride inj 2 meq/ml</i>	143

<i>potassium chloride inj 20 meq/100ml</i>	143	<i>pramipexole dihydrochloride tab er</i> 24hr 2.25 mg	82
<i>potassium chloride inj 20 meq/50ml</i>	143	<i>pramipexole dihydrochloride tab er</i> 24hr 3 mg	82
<i>potassium chloride inj 40 meq/100ml</i>	143	<i>pramipexole dihydrochloride tab er</i> 24hr 3.75 mg	82
<i>potassium chloride microencapsulated</i> crys er tab 10 meq	144	<i>pramipexole dihydrochloride tab er</i> 24hr 4.5 mg	82
<i>potassium chloride microencapsulated</i> crys er tab 15 meq	144	<i>prasugrel hcl tab 10 mg (base equiv)</i>	134
<i>potassium chloride microencapsulated</i> crys er tab 20 meq	144	<i>prasugrel hcl tab 5 mg (base equiv)</i>	134
<i>potassium chloride oral soln 10% (20</i> <i>meq/15ml)</i>	144	<i>pravastatin sodium tab 10 mg</i>	65
<i>potassium chloride oral soln 20% (40</i> <i>meq/15ml)</i>	144	<i>pravastatin sodium tab 20 mg</i>	65
<i>potassium chloride powder packet 20</i> <i>meq</i>	144	<i>pravastatin sodium tab 40 mg</i>	65
<i>potassium chloride tab er 10 meq ..</i>	144	<i>pravastatin sodium tab 80 mg</i>	65
<i>potassium chloride tab er 20 meq</i> <i>(1500 mg)</i>	144	<i>praziquantel tab 600 mg</i>	26
<i>potassium chloride tab er 8 meq (600</i> <i>mg)</i>	144	<i>prazosin hcl cap 1 mg</i>	60
<i>potassium citrate tab er 10 meq (1080</i> <i>mg)</i>	130	<i>prazosin hcl cap 2 mg</i>	60
<i>potassium citrate tab er 15 meq (1620</i> <i>mg)</i>	130	<i>prazosin hcl cap 5 mg</i>	60
<i>potassium citrate tab er 5 meq (540</i> <i>mg)</i>	130	<i>PRED SOD PHO SOL 1% OP</i>	146
<i>pramipexole dihydrochloride tab 0.125</i> <i>mg</i>	81	<i>prednisolone acetate ophth susp 1%</i>	146
<i>pramipexole dihydrochloride tab 0.25</i> <i>mg</i>	81	<i>prednisolone sod phosphate oral soln</i> 15 mg/5ml (base equiv)	121
<i>pramipexole dihydrochloride tab 0.5</i> <i>mg</i>	81	<i>prednisolone sod phosphate oral soln 5</i> <i>mg/5ml (base equiv)</i>	121
<i>pramipexole dihydrochloride tab 0.75</i> <i>mg</i>	81	<i>prednisolone sodium phosphate oral</i> <i>soln 25 mg/5ml (base eq)</i>	121
<i>pramipexole dihydrochloride tab 1 mg</i>	81	<i>prednisolone soln 15 mg/5ml</i>	121
<i>pramipexole dihydrochloride tab 1.5</i> <i>mg</i>	81	<i>PREDNISON CON 5MG/ML</i>	121
<i>pramipexole dihydrochloride tab er</i> 24hr 0.375 mg	82	<i>prednisone oral soln 5 mg/5ml</i>	121
<i>pramipexole dihydrochloride tab er</i> 24hr 0.75 mg	82	<i>prednisone tab 1 mg</i>	121
<i>pramipexole dihydrochloride tab er</i> 24hr 1.5 mg	82	<i>prednisone tab 10 mg</i>	121
		<i>prednisone tab 2.5 mg</i>	121
		<i>prednisone tab 20 mg</i>	121
		<i>prednisone tab 5 mg</i>	121
		<i>prednisone tab 50 mg</i>	121
		<i>prednisone tab therapy pack 10 mg</i> <i>(21)</i>	121
		<i>prednisone tab therapy pack 10 mg</i> <i>(48)</i>	121
		<i>prednisone tab therapy pack 5 mg (21)</i>	121
		<i>prednisone tab therapy pack 5 mg (48)</i>	121
		<i>pregabalin cap 100 mg</i>	96
		<i>pregabalin cap 150 mg</i>	96

<i>pregabalin cap 200 mg</i>	96	<i>proctozone-hc</i>	160
<i>pregabalin cap 225 mg</i>	96	<i>progesterone cap 100 mg</i>	124
<i>pregabalin cap 25 mg</i>	95	<i>progesterone cap 200 mg</i>	124
<i>pregabalin cap 300 mg</i>	96	PROGRAF GRA 0.2MG.....	140
<i>pregabalin cap 50 mg</i>	95	PROGRAF GRA 1MG	140
<i>pregabalin cap 75 mg</i>	96	PROLASTIN-C INJ 1000MG.....	152
<i>pregabalin soln 20 mg/ml</i>	96	PROLIA INJ 60MG/ML.....	112
PREMASOL SOL 10%	144	<i>promethazine hcl inj 25 mg/ml</i>	126
PRENATAL TAB 27-1MG	144	<i>promethazine hcl inj 50 mg/ml</i>	126
PRENATAL TAB PLUS	144	<i>promethazine hcl oral soln 6.25</i>	
<i>prevalite</i>	66	<i>mg/5ml</i>	126
PREVYMIS TAB 240MG.....	33	<i>promethazine hcl tab 12.5 mg</i>	126
PREVYMIS TAB 480MG.....	33	<i>promethazine hcl tab 25 mg</i>	126
PREZCOBIX TAB 675/150.....	31	<i>promethazine hcl tab 50 mg</i>	127
PREZCOBIX TAB 800-150.....	31	<i>propafenone hcl cap er 12hr 225 mg</i> 63	
PREZISTA SUS 100MG/ML.....	30	<i>propafenone hcl cap er 12hr 325 mg</i> 63	
PREZISTA TAB 150MG	30	<i>propafenone hcl cap er 12hr 425 mg</i> 63	
PREZISTA TAB 75MG.....	30	<i>propafenone hcl tab 150 mg</i>	63
PRIFTIN TAB 150MG.....	31	<i>propafenone hcl tab 225 mg</i>	63
<i>primaquine phosphate tab 26.3 mg (15</i>		<i>propafenone hcl tab 300 mg</i>	63
<i>mg base)</i>	28	<i>proparacaine hcl ophth soln 0.5% ..</i>	147
PRIMAQUINE TAB 26.3MG.....	29	<i>propranolol hcl cap er 24hr 120 mg ..</i>	67
<i>primidone tab 125 mg</i>	96	<i>propranolol hcl cap er 24hr 160 mg ..</i>	67
<i>primidone tab 250 mg</i>	96	<i>propranolol hcl cap er 24hr 60 mg ...</i>	67
<i>primidone tab 50 mg</i>	96	<i>propranolol hcl cap er 24hr 80 mg ...</i>	67
PRIORIX INJ.....	141	<i>propranolol hcl oral soln 20 mg/5ml .</i>	67
PRIVIGEN INJ 10GRAMS	139	<i>propranolol hcl oral soln 40 mg/5ml .</i>	67
PRIVIGEN INJ 20GRAMS	139	<i>propranolol hcl tab 10 mg</i>	67
PRIVIGEN INJ 40GRAMS	139	<i>propranolol hcl tab 20 mg</i>	67
PRIVIGEN INJ 5 GRAMS	139	<i>propranolol hcl tab 40 mg</i>	67
<i>probenecid tab 500 mg</i>	20	<i>propranolol hcl tab 60 mg</i>	67
<i>prochlorperazine edisylate inj 10</i>		<i>propranolol hcl tab 80 mg</i>	67
<i>mg/2ml</i>	126	<i>propylthiouracil tab 50 mg</i>	124
<i>prochlorperazine maleate tab 10 mg</i>		PROQUAD INJ	141
<i>(base equivalent)</i>	126	PROSOL INJ 20%	144
<i>prochlorperazine maleate tab 5 mg</i>		<i>protriptyline hcl tab 10 mg</i>	79
<i>(base equivalent)</i>	126	<i>protriptyline hcl tab 5 mg</i>	79
<i>prochlorperazine suppos 25 mg</i>	126	PULMOZYME SOL 1MG/ML.....	152
PROCRIT INJ 10000/ML	133	PURIXAN SUS 20MG/ML	40
PROCRIT INJ 2000/ML	133	<i>pyrazinamide tab 500 mg</i>	31
PROCRIT INJ 20000/ML	133	<i>pyridostigmine bromide tab 60 mg .</i>	103
PROCRIT INJ 3000/ML	133	<i>pyrimethamine tab 25 mg</i>	26
PROCRIT INJ 4000/ML	133	PYZCHIVA INJ 130/26ML	136
PROCRIT INJ 40000/ML	133	PYZCHIVA INJ 45/0.5ML	136
<i>proctocort cre 1%</i>	159	PYZCHIVA INJ 90MG/ML	136
<i>procto-med hc</i>	159	Q	
<i>proctosol hc</i>	159	QINLOCK TAB 50MG	52

QUADRACEL INJ 0.5ML	141
<i>quetiapine fumarate tab 100 mg</i>	<i>87</i>
<i>quetiapine fumarate tab 150 mg</i>	<i>87</i>
<i>quetiapine fumarate tab 200 mg</i>	<i>87</i>
<i>quetiapine fumarate tab 25 mg</i>	<i>87</i>
<i>quetiapine fumarate tab 300 mg</i>	<i>87</i>
<i>quetiapine fumarate tab 400 mg</i>	<i>87</i>
<i>quetiapine fumarate tab 50 mg</i>	<i>87</i>
<i>quetiapine fumarate tab er 24hr 150 mg</i>	<i>87</i>
<i>quetiapine fumarate tab er 24hr 200 mg</i>	<i>88</i>
<i>quetiapine fumarate tab er 24hr 300 mg</i>	<i>88</i>
<i>quetiapine fumarate tab er 24hr 400 mg</i>	<i>88</i>
<i>quetiapine fumarate tab er 24hr 50 mg</i>	<i>87</i>
<i>quinapril hcl tab 10 mg</i>	<i>59</i>
<i>quinapril hcl tab 20 mg</i>	<i>59</i>
<i>quinapril hcl tab 40 mg</i>	<i>59</i>
<i>quinapril hcl tab 5 mg</i>	<i>59</i>
<i>quinidine sulfate tab 200 mg</i>	<i>63</i>
<i>quinidine sulfate tab 300 mg</i>	<i>63</i>
<i>quinine sulfate cap 324 mg</i>	<i>29</i>
QULIPTA TAB 10MG	102
QULIPTA TAB 30MG	102
QULIPTA TAB 60MG	102

R

RABAVERT INJ.....	141
<i>rabeprazole sodium ec tab 20 mg...</i>	<i>130</i>
RALDESY SOL 10MG/ML.....	79
<i>raloxifene hcl tab 60 mg</i>	<i>123</i>
<i>ramipril cap 1.25 mg</i>	<i>59</i>
<i>ramipril cap 10 mg</i>	<i>59</i>
<i>ramipril cap 2.5 mg</i>	<i>59</i>
<i>ramipril cap 5 mg</i>	<i>59</i>
<i>ranolazine tab er 12hr 1000 mg</i>	<i>72</i>
<i>ranolazine tab er 12hr 500 mg</i>	<i>72</i>
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	<i>82</i>
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	<i>82</i>
<i>reclipsen.....</i>	<i>117</i>
RECOMBIVA HB INJ 10MCG/ML.....	141
RECOMBIVA HB INJ 5MCG/0.5.....	141
RECOMBIVA-HB INJ 40MCG/ML.....	141

RELENZA MIS DISKHALE	33
RELISTOR INJ 12/0.6ML	129
RELISTOR INJ 8/0.4ML.....	129
REMICADE INJ 100MG.....	136
RENFLEXIS INJ 100MG	136
<i>repaglinide tab 0.5 mg</i>	<i>108</i>
<i>repaglinide tab 1 mg</i>	<i>108</i>
<i>repaglinide tab 2 mg</i>	<i>108</i>
REPATHA INJ 140MG/ML.....	66
REPATHA SURE INJ 140MG/ML	66
RESTASIS EMU 0.05% OP.....	147
RESTASIS MUL EMU 0.05% OP	147
RETEVMO CAP 40MG.....	52
RETEVMO CAP 80MG.....	52
RETEVMO TAB 120MG	52
RETEVMO TAB 160MG	52
RETEVMO TAB 40MG.....	52
RETEVMO TAB 80MG.....	52
REVUFORJ TAB 110MG	52
REVUFORJ TAB 160MG	52
REVUFORJ TAB 25MG.....	52
REXULTI TAB 0.25MG.....	88
REXULTI TAB 0.5MG	88
REXULTI TAB 1MG	88
REXULTI TAB 2MG	88
REXULTI TAB 3MG	88
REXULTI TAB 4MG	88
REYATAZ POW 50MG.....	30
REZLIDHIA CAP 150MG	52
REZUROCK TAB 200MG	140
REZVOGLAR INJ 100UT/ML	112
RHOPRESSA SOL 0.02%.....	147
<i>ribavirin cap 200 mg</i>	<i>33</i>
<i>ribavirin tab 200 mg</i>	<i>33</i>
<i>rifabutin cap 150 mg</i>	<i>32</i>
<i>rifampin cap 150 mg</i>	<i>32</i>
<i>rifampin cap 300 mg</i>	<i>32</i>
<i>rifampin for inj 600 mg</i>	<i>32</i>
<i>riluzole tab 50 mg</i>	<i>103</i>
<i>rimantadine hydrochloride tab 100 mg</i>	<i>33</i>
RINVOQ LQ SOL 1MG/ML.....	136
RINVOQ TAB 15MG ER	136
RINVOQ TAB 30MG ER	136
RINVOQ TAB 45MG ER	136
<i>risedronate sodium tab 150 mg</i>	<i>112</i>
<i>risedronate sodium tab 30 mg</i>	<i>112</i>

<i>risedronate sodium tab 35 mg</i>	112
<i>risedronate sodium tab 5 mg</i>	112
<i>risedronate sodium tab delayed release</i> <i>35 mg</i>	112
<i>risperidone microspheres for im</i> <i>extended rel susp 12.5 mg</i>	88
<i>risperidone microspheres for im</i> <i>extended rel susp 25 mg</i>	88
<i>risperidone microspheres for im</i> <i>extended rel susp 37.5 mg</i>	88
<i>risperidone microspheres for im</i> <i>extended rel susp 50 mg</i>	88
<i>risperidone orally disintegrating tab</i> <i>0.25 mg</i>	88
<i>risperidone orally disintegrating tab 0.5</i> <i>mg</i>	88
<i>risperidone orally disintegrating tab 1</i> <i>mg</i>	88
<i>risperidone orally disintegrating tab 2</i> <i>mg</i>	88
<i>risperidone orally disintegrating tab 3</i> <i>mg</i>	88
<i>risperidone orally disintegrating tab 4</i> <i>mg</i>	88
<i>risperidone soln 1 mg/ml</i>	88
<i>risperidone tab 0.25 mg</i>	88
<i>risperidone tab 0.5 mg</i>	88
<i>risperidone tab 1 mg</i>	88
<i>risperidone tab 2 mg</i>	89
<i>risperidone tab 3 mg</i>	89
<i>risperidone tab 4 mg</i>	89
<i>ritonavir tab 100 mg</i>	30
<i>rivaroxaban for susp 1 mg/ml</i>	132
<i>rivaroxaban tab 2.5 mg</i>	132
<i>rivastigmine tartrate cap 1.5 mg (base</i> <i>equivalent)</i>	76
<i>rivastigmine tartrate cap 3 mg (base</i> <i>equivalent)</i>	76
<i>rivastigmine tartrate cap 4.5 mg (base</i> <i>equivalent)</i>	76
<i>rivastigmine tartrate cap 6 mg (base</i> <i>equivalent)</i>	76
<i>rivastigmine td patch 24hr 13.3</i> <i>mg/24hr</i>	76
<i>rivastigmine td patch 24hr 4.6 mg/24hr</i> <i>.....</i>	76
<i>rivastigmine td patch 24hr 9.5 mg/24hr</i> <i>.....</i>	76
<i>rivelsa</i>	117
<i>rizatriptan benzoate oral disintegrating</i> <i>tab 10 mg (base eq)</i>	102
<i>rizatriptan benzoate oral disintegrating</i> <i>tab 5 mg (base eq)</i>	102
<i>rizatriptan benzoate tab 10 mg (base</i> <i>equivalent)</i>	102
<i>rizatriptan benzoate tab 5 mg (base</i> <i>equivalent)</i>	102
<i>ROCKLATAN DRO</i>	147
<i>roflumilast tab 250 mcg</i>	152
<i>roflumilast tab 500 mcg</i>	152
<i>ROMVIMZA CAP 14MG</i>	52
<i>ROMVIMZA CAP 20MG</i>	53
<i>ROMVIMZA CAP 30MG</i>	53
<i>ropinirole hydrochloride tab 0.25 mg</i>	82
<i>ropinirole hydrochloride tab 0.5 mg</i> ..	82
<i>ropinirole hydrochloride tab 1 mg</i>	82
<i>ropinirole hydrochloride tab 2 mg</i>	82
<i>ropinirole hydrochloride tab 3 mg</i>	82
<i>ropinirole hydrochloride tab 4 mg</i>	82
<i>ropinirole hydrochloride tab 5 mg</i>	82
<i>ropinirole hydrochloride tab er 24hr 12</i> <i>mg (base equivalent)</i>	82
<i>ropinirole hydrochloride tab er 24hr 2</i> <i>mg (base equivalent)</i>	82
<i>ropinirole hydrochloride tab er 24hr 4</i> <i>mg (base equivalent)</i>	82
<i>ropinirole hydrochloride tab er 24hr 6</i> <i>mg (base equivalent)</i>	82
<i>ropinirole hydrochloride tab er 24hr 8</i> <i>mg (base equivalent)</i>	82
<i>rosuvastatin calcium tab 10 mg</i>	65
<i>rosuvastatin calcium tab 20 mg</i>	65
<i>rosuvastatin calcium tab 40 mg</i>	65
<i>rosuvastatin calcium tab 5 mg</i>	65
<i>rosyrah tab</i>	117
<i>ROTARIX SUS</i>	141
<i>ROTATEQ SOL</i>	141
<i>roweepra</i>	96
<i>ROZLYTREK CAP 100MG</i>	53
<i>ROZLYTREK CAP 200MG</i>	53
<i>ROZLYTREK PAK 50MG</i>	53
<i>RUBRACA TAB 200MG</i>	53
<i>RUBRACA TAB 250MG</i>	53

RUBRACA TAB 300MG	53	SIKLOS TAB 100MG	134
<i>rufinamide susp 40 mg/ml</i>	96	<i>sildenafil citrate tab 20 mg</i>	73
<i>rufinamide tab 200 mg</i>	96	<i>silodosin cap 4 mg</i>	130
<i>rufinamide tab 400 mg</i>	96	<i>silodosin cap 8 mg</i>	130
RUKOBIA TAB 600MG ER	30	<i>silver sulfadiazine cream 1%</i>	156
RYBELSUS TAB 14MG	108	SIMBRINZA SUS 1-0.2%	147
RYBELSUS TAB 3MG.....	108	<i>simliya</i>	117
RYBELSUS TAB 7MG.....	108	<i>simpesse</i>	117
RYDAPT CAP 25MG.....	53	<i>simvastatin tab 10 mg</i>	65
S		<i>simvastatin tab 20 mg</i>	65
<i>sacubitril-valsartan tab 24-26 mg</i>	61	<i>simvastatin tab 40 mg</i>	65
<i>sacubitril-valsartan tab 49-51 mg</i>	61	<i>simvastatin tab 5 mg</i>	65
<i>sacubitril-valsartan tab 97-103 mg</i> ...	61	<i>simvastatin tab 80 mg</i>	65
<i>sajazir</i>	134	<i>sirolimus oral soln 1 mg/ml</i>	140
SANTYL OIN 250/GM.....	160	<i>sirolimus tab 0.5 mg</i>	140
<i>sapropterin dihydrochloride powder</i>		<i>sirolimus tab 1 mg</i>	140
<i>packet 100 mg</i>	123	<i>sirolimus tab 2 mg</i>	140
<i>sapropterin dihydrochloride powder</i>		SIRTURO TAB 100MG.....	32
<i>packet 500 mg</i>	123	SIRTURO TAB 20MG.....	32
<i>sapropterin dihydrochloride tab 100 mg</i>		SKYRIZI INJ 150MG/ML.....	136
.....	123	SKYRIZI INJ 180/1.2.....	136
SCEMBLIX TAB 100MG	53	SKYRIZI INJ 360/2.4.....	136
SCEMBLIX TAB 20MG	53	SKYRIZI PEN INJ 150MG/ML	136
SCEMBLIX TAB 40MG	53	SKYRIZI SOL 60MG/ML	136
<i>scopolamine td patch 72hr 1 mg/3days</i>		SOD OXYBATE SOL 500MG/ML	105
.....	127	<i>sod sulfate-pot sulf-mg sulf oral sol</i>	
SECUADO DIS 3.8MG	89	<i>17.5-3.13-1.6 gm/177ml</i>	128
SECUADO DIS 5.7MG	89	<i>sodium chloride inj 2.5 meq/ml</i>	
SECUADO DIS 7.6MG	89	<i>(14.6%)</i>	143
<i>selegiline hcl cap 5 mg</i>	82	<i>sodium chloride irrigation soln 0.9%</i>	
<i>selegiline hcl tab 5 mg</i>	82	.....	160
<i>selenium sulfide lotion 2.5%</i>	156	<i>sodium chloride iv soln 0.45%</i>	143
SELZENTRY SOL 20MG/ML	30	<i>sodium chloride iv soln 0.9%</i>	143
SEMGLEE INJ 100U/ML	112	<i>sodium chloride iv soln 3%</i>	143
SEREVENT DIS AER 50MCG	150	<i>sodium chloride iv soln 5%</i>	143
<i>sertraline hcl oral concentrate for</i>		<i>sodium fluoride chew; tab; 1.1 (0.5 f)</i>	
<i>solution 20 mg/ml</i>	79	<i>mg/ml soln</i>	144
<i>sertraline hcl tab 100 mg</i>	79	<i>sodium phenylbutyrate oral powder 3</i>	
<i>sertraline hcl tab 25 mg</i>	79	<i>gm/teaspoonful</i>	123
<i>sertraline hcl tab 50 mg</i>	79	<i>sodium phenylbutyrate tab 500 mg</i> 123	
<i>setlakin</i>	117	<i>sodium polystyrene sulfonate powder</i>	
<i>sharobel</i>	117	.....	113
SHINGRIX INJ 50/0.5ML	141	<i>solifenacin succinate tab 10 mg</i>	131
SIGNIFOR INJ 0.3MG/ML	123	<i>solifenacin succinate tab 5 mg</i>	131
SIGNIFOR INJ 0.6MG/ML	123	SOLQUA INJ 100/33	112
SIGNIFOR INJ 0.9MG/ML	123	SOLTAMOX SOL 10MG/5ML.....	42
SIKLOS TAB 1000MG.....	134	SOLU-CORTEF INJ 1000MG	121

SOLU-CORTEF INJ 100MG	121	<i>sulfacetamide sodium ophth oint 10%</i>	146
SOLU-CORTEF INJ 250MG	121	<i>sulfacetamide sodium ophth soln 10%</i>	146
SOLU-CORTEF INJ 500MG	121	<i>sulfacetamide sodium-prednisolone</i>	
SOMATULINE INJ 120/.5ML	123	<i>ophth soln 10-0.23(0.25)%</i>	145
SOMATULINE INJ 60/0.2ML	123	<i>sulfadiazine tab 500 mg</i>	26
SOMATULINE INJ 90/0.3ML	123	<i>sulfamethoxazole-trimethoprim iv soln</i>	
SOMAVERT INJ 10MG	123	<i>400-80 mg/5ml</i>	26
SOMAVERT INJ 15MG	123	<i>sulfamethoxazole-trimethoprim susp</i>	
SOMAVERT INJ 20MG	123	<i>200-40 mg/5ml</i>	27
SOMAVERT INJ 25MG	124	<i>sulfamethoxazole-trimethoprim tab</i>	
SOMAVERT INJ 30MG	124	<i>400-80 mg.....</i>	27
<i>sorafenib tosylate tab 200 mg (base</i>		<i>sulfamethoxazole-trimethoprim tab</i>	
<i>equivalent).....</i>	53	<i>800-160 mg.....</i>	27
<i>sotalol hcl (afib/af) tab 120 mg</i>	63	SULFAMYLON CRE 85MG/GM	156
<i>sotalol hcl (afib/af) tab 160 mg</i>	63	<i>sulfasalazine tab 500 mg</i>	128
<i>sotalol hcl (afib/af) tab 80 mg.....</i>	63	<i>sulfasalazine tab delayed release 500</i>	
<i>sotalol hcl tab 120 mg</i>	63	<i>mg</i>	128
<i>sotalol hcl tab 160 mg</i>	63	<i>sulindac tab 150 mg</i>	21
<i>sotalol hcl tab 240 mg</i>	63	<i>sulindac tab 200 mg</i>	21
<i>sotalol hcl tab 80 mg.....</i>	63	<i>sumatriptan nasal spray 20 mg/act</i>	102
SOTYKTU TAB 6MG	137	<i>sumatriptan nasal spray 5 mg/act..</i>	102
<i>spironolactone & hydrochlorothiazide</i>		<i>sumatriptan succinate inj 6 mg/0.5ml</i>	
<i>tab 25-25 mg</i>	70	<i>.....</i>	102
<i>spironolactone tab 100 mg</i>	60	<i>sumatriptan succinate solution auto-</i>	
<i>spironolactone tab 25 mg.....</i>	60	<i>injector 4 mg/0.5ml</i>	102
<i>spironolactone tab 50 mg.....</i>	60	<i>sumatriptan succinate solution auto-</i>	
<i>sprintec 28</i>	117	<i>injector 6 mg/0.5ml</i>	102
SPRITAM TAB 1000MG.....	96	<i>sumatriptan succinate solution</i>	
SPRITAM TAB 250MG	96	<i>cartridge 4 mg/0.5ml</i>	102
SPRITAM TAB 500MG	96	<i>sumatriptan succinate solution</i>	
SPRITAM TAB 750MG	96	<i>cartridge 6 mg/0.5ml</i>	102
<i>sps</i>	113	<i>sumatriptan succinate tab 100 mg .</i>	102
<i>sps rectal.....</i>	113	<i>sumatriptan succinate tab 25 mg...</i>	102
<i>sronyx.....</i>	117	<i>sumatriptan succinate tab 50 mg...</i>	102
<i>ssd</i>	156	<i>sunitinib malate cap 12.5 mg (base</i>	
STELARA INJ 45/0.5ML.....	137	<i>equivalent)</i>	53
STELARA INJ 5MG/ML.....	137	<i>sunitinib malate cap 25 mg (base</i>	
STELARA INJ 90MG/ML.....	137	<i>equivalent)</i>	53
STIVARGA TAB 40MG	53	<i>sunitinib malate cap 37.5 mg (base</i>	
<i>streptomycin sulfate for inj 1 gm</i>	26	<i>equivalent)</i>	53
STRIBILD TAB	31	<i>sunitinib malate cap 50 mg (base</i>	
<i>subvenite</i>	96	<i>equivalent)</i>	53
<i>sucralfate susp 1 gm/10ml.....</i>	129	SUNLENCA TAB 300MG	30
<i>sucralfate tab 1 gm.....</i>	129	<i>syeda</i>	117
<i>sulfacetamide sodium lotion 10%</i>		SYMBICORT AER 160-4.5.....	155
<i>(acne)</i>	156		

SYMBICORT AER 80-4.5.....	155
SYMDEKO TAB 100-150.....	152
SYMDEKO TAB 50-75MG.....	152
SYMPAZAN MIS 10MG.....	96
SYMPAZAN MIS 20MG.....	96
SYMPAZAN MIS 5MG.....	96
SYMTUZA TAB.....	31
SYNAREL SOL 2MG/ML.....	124
SYNJARDY TAB 12.5-1000MG.....	108
SYNJARDY TAB 12.5-500.....	108
SYNJARDY TAB 5-1000MG.....	108
SYNJARDY TAB 5-500MG.....	108
SYNJARDY XR TAB 10-1000.....	108
SYNJARDY XR TAB 12.5-1000.....	109
SYNJARDY XR TAB 25-1000.....	109
SYNJARDY XR TAB 5-1000MG.....	108
SYNTHROID TAB 100MCG.....	125
SYNTHROID TAB 112MCG.....	125
SYNTHROID TAB 125MCG.....	125
SYNTHROID TAB 137MCG.....	125
SYNTHROID TAB 150MCG.....	125
SYNTHROID TAB 175MCG.....	125
SYNTHROID TAB 200MCG.....	125
SYNTHROID TAB 25MCG.....	124
SYNTHROID TAB 300MCG.....	125
SYNTHROID TAB 50MCG.....	124
SYNTHROID TAB 75MCG.....	124
SYNTHROID TAB 88MCG.....	125

T

TABLOID TAB 40MG.....	40
TABRECTA TAB 150MG.....	53
TABRECTA TAB 200MG.....	53
<i>tacrolimus cap 0.5 mg</i>	140
<i>tacrolimus cap 1 mg</i>	140
<i>tacrolimus cap 5 mg</i>	140
<i>tacrolimus oint 0.03%</i>	160
<i>tacrolimus oint 0.1%</i>	160
<i>tadalafil tab 20 mg (pah)</i>	73
<i>tadalafil tab 5 mg</i>	130
TAFINLAR CAP 50MG.....	53
TAFINLAR CAP 75MG.....	54
TAFINLAR TAB 10MG.....	54
TAGRISSO TAB 40MG.....	54
TAGRISSO TAB 80MG.....	54
TALZENNA CAP 0.1MG.....	54
TALZENNA CAP 0.25MG.....	54
TALZENNA CAP 0.35MG.....	54

TALZENNA CAP 0.5MG.....	54
TALZENNA CAP 0.75MG.....	54
TALZENNA CAP 1MG.....	54
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	42
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	42
<i>tamsulosin hcl cap 0.4 mg</i>	130
<i>tarina 24 fe</i>	118
<i>tarina fe 1/20 eq</i>	118
TASIGNA CAP 150MG.....	54
TASIGNA CAP 200MG.....	54
TASIGNA CAP 50MG.....	54
<i>tasimelteon capsule 20 mg</i>	100
TAVNEOS CAP 10MG.....	134
<i>tazarotene cream 0.05%</i>	157
<i>tazarotene cream 0.1%</i>	157
<i>tazicef</i>	34
TAZORAC CRE 0.05%.....	157
TAZVERIK TAB 200MG.....	54
TECENTRIQ INJ 1200/20.....	54
TECENTRIQ INJ 840/14.....	54
TECENTRIQ INJ HYBREZA.....	54
TEFLARO INJ 400MG.....	34
TEFLARO INJ 600MG.....	35
<i>telmisartan tab 20 mg</i>	62
<i>telmisartan tab 40 mg</i>	62
<i>telmisartan tab 80 mg</i>	62
<i>telmisartan-amlodipine tab 40-10 mg</i>	61
<i>telmisartan-amlodipine tab 40-5 mg</i>	61
<i>telmisartan-amlodipine tab 80-10 mg</i>	61
<i>telmisartan-amlodipine tab 80-5 mg</i>	61
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	62
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	62
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	62
<i>temazepam cap 15 mg</i>	101
<i>temazepam cap 30 mg</i>	101
<i>temazepam cap 7.5 mg</i>	100
TENIVAC INJ 5-2LF.....	141
<i>tenofovir disoproxil fumarate tab 300 mg</i>	30
TEPMETKO TAB 225MG.....	54

<i>terazosin hcl cap 1 mg (base equivalent)</i>	60	<i>theophylline tab er 24hr 600 mg</i>	152
<i>terazosin hcl cap 10 mg (base equivalent)</i>	60	<i>thioridazine hcl tab 10 mg</i>	89
<i>terazosin hcl cap 2 mg (base equivalent)</i>	60	<i>thioridazine hcl tab 100 mg</i>	89
<i>terazosin hcl cap 5 mg (base equivalent)</i>	60	<i>thioridazine hcl tab 25 mg</i>	89
<i>terbinafine hcl tab 250 mg</i>	28	<i>thioridazine hcl tab 50 mg</i>	89
<i>terbutaline sulfate tab 2.5 mg</i>	150	<i>thiothixene cap 1 mg</i>	89
<i>terbutaline sulfate tab 5 mg</i>	150	<i>thiothixene cap 10 mg</i>	89
<i>terconazole vaginal cream 0.4%</i>	131	<i>thiothixene cap 2 mg</i>	89
<i>terconazole vaginal cream 0.8%</i>	131	<i>thiothixene cap 5 mg</i>	89
<i>terconazole vaginal suppos 80 mg</i> ..	131	<i>tiadylt er</i>	69
<i>TERIPARATIDE INJ 560/2.24</i>	113	<i>tiagabine hcl tab 12 mg</i>	96
<i>testosterone cypionate im inj in oil 100 mg/ml</i>	106	<i>tiagabine hcl tab 16 mg</i>	96
<i>testosterone cypionate im inj in oil 200 mg/ml</i>	106	<i>tiagabine hcl tab 2 mg</i>	96
<i>testosterone enanthate im inj in oil 200 mg/ml</i>	106	<i>tiagabine hcl tab 4 mg</i>	96
<i>testosterone pump</i>	106	<i>TIBSOVO TAB 250MG</i>	54
<i>testosterone td gel 12.5 mg/act (1%)</i>	106	<i>ticagrelor tab 60 mg</i>	134
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	106	<i>ticagrelor tab 90 mg</i>	134
<i>testosterone td gel 50 mg/5gm (1%)</i>	106	<i>TICOVAC INJ</i>	141
<i>tetrabenazine tab 12.5 mg</i>	103	<i>tigecycline for iv soln 50 mg</i>	38
<i>tetrabenazine tab 25 mg</i>	103	<i>tilia fe</i>	118
<i>tetracycline hcl cap 250 mg</i>	38	<i>timolol maleate ophth gel forming soln 0.25%</i>	147
<i>tetracycline hcl cap 500 mg</i>	38	<i>timolol maleate ophth gel forming soln 0.5%</i>	147
<i>THALOMID CAP 100MG</i>	42	<i>timolol maleate ophth soln 0.25%</i> ..	147
<i>THALOMID CAP 150MG</i>	43	<i>timolol maleate ophth soln 0.5%</i> ...	147
<i>THALOMID CAP 200MG</i>	43	<i>timolol maleate tab 10 mg</i>	67
<i>THALOMID CAP 50MG</i>	42	<i>timolol maleate tab 20 mg</i>	67
<i>THEO-24 CAP 100MG CR</i>	152	<i>timolol maleate tab 5 mg</i>	67
<i>THEO-24 CAP 200MG CR</i>	152	<i>tinidazole tab 250 mg</i>	27
<i>THEO-24 CAP 300MG CR</i>	152	<i>tinidazole tab 500 mg</i>	27
<i>THEO-24 CAP 400MG ER</i>	152	<i>TIVICAY PD TAB 5MG</i>	30
<i>theophylline elixir 80 mg/15ml</i>	152	<i>TIVICAY TAB 10MG</i>	30
<i>theophylline soln 80 mg/15ml</i>	152	<i>TIVICAY TAB 25MG</i>	30
<i>theophylline tab er 12hr 100 mg</i>	152	<i>TIVICAY TAB 50MG</i>	30
<i>theophylline tab er 12hr 200 mg</i>	152	<i>tizanidine hcl tab 2 mg (base equivalent)</i>	104
<i>theophylline tab er 12hr 300 mg</i>	152	<i>tizanidine hcl tab 4 mg (base equivalent)</i>	104
<i>theophylline tab er 12hr 450 mg</i>	152	<i>TOBI PODHALR CAP 28MG</i>	27
<i>theophylline tab er 24hr 400 mg</i>	152	<i>TOBRADEX OIN 0.3-0.1%</i>	145
		<i>tobramycin nebu soln 300 mg/5ml</i> ...	27
		<i>tobramycin ophth soln 0.3%</i>	146
		<i>tobramycin sulfate inj 1.2 gm/30ml (40 mg/ml) (base equiv)</i>	27
		<i>tobramycin sulfate inj 10 mg/ml (base equivalent)</i>	27

<i>tobramycin sulfate inj 2 gm/50ml (40 mg/ml) (base equiv)</i>	27	TRAZIMERA INJ 150MG	55
<i>tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv)</i>	27	TRAZIMERA INJ 420MG	55
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	145	<i>trazodone hcl tab 100 mg</i>	79
<i>tolterodine tartrate cap er 24hr 2 mg</i>	131	<i>trazodone hcl tab 150 mg</i>	79
<i>tolterodine tartrate cap er 24hr 4 mg</i>	131	<i>trazodone hcl tab 50 mg</i>	79
<i>tolterodine tartrate tab 1 mg</i>	131	TRELEGY AER ELLIPTA 100-62.5-25 MCG	148
<i>tolterodine tartrate tab 2 mg</i>	131	TRELEGY AER ELLIPTA 200-62.5-25 MCG	148
<i>topiramate oral soln 25 mg/ml</i>	96	TREMFYA INJ 100MG/ML	137
<i>topiramate sprinkle cap 15 mg</i>	96	TREMFYA INJ 200/20ML	137
<i>topiramate sprinkle cap 25 mg</i>	97	TREMFYA INJ 200/2ML	137
<i>topiramate sprinkle cap 50 mg</i>	97	<i>treprostinil inj soln 100 mg/20ml (5 mg/ml)</i>	73
<i>topiramate tab 100 mg</i>	97	<i>treprostinil inj soln 20 mg/20ml (1 mg/ml)</i>	73
<i>topiramate tab 200 mg</i>	97	<i>treprostinil inj soln 200 mg/20ml (10 mg/ml)</i>	73
<i>topiramate tab 25 mg</i>	97	<i>treprostinil inj soln 50 mg/20ml (2.5 mg/ml)</i>	73
<i>topiramate tab 50 mg</i>	97	TRESIBA FLEX INJ 100UNIT	112
<i>toremifene citrate tab 60 mg (base equivalent)</i>	42	TRESIBA FLEX INJ 200UNIT	112
<i>torpenz tab 10mg</i>	55	TRESIBA INJ 100UNIT	112
<i>torpenz tab 2.5mg</i>	54	<i>tretinoin cap 10 mg</i>	43
<i>torpenz tab 5mg</i>	54	<i>tretinoin cream 0.025%</i>	156
<i>torpenz tab 7.5mg</i>	54	<i>tretinoin cream 0.05%</i>	156
<i>torsemide tab 10 mg</i>	70	<i>tretinoin cream 0.1%</i>	156
<i>torsemide tab 100 mg</i>	70	<i>tretinoin gel 0.01%</i>	156
<i>torsemide tab 20 mg</i>	70	<i>tretinoin gel 0.025%</i>	156
<i>torsemide tab 5 mg</i>	70	<i>triamcinolone acetonide cream 0.025%</i>	158
TOUJEO MAX INJ 300/ML	112	<i>triamcinolone acetonide cream 0.1%</i>	158
TOUJEO SOLO INJ 300/ML	112	<i>triamcinolone acetonide cream 0.5%</i>	158
TPN ELECTROL INJ	143	<i>triamcinolone acetonide dental paste 0.1%</i>	160
TRADJENTA TAB 5MG	109	<i>triamcinolone acetonide lotion 0.025%</i>	158
<i>tramadol hcl tab 50 mg</i>	24	<i>triamcinolone acetonide lotion 0.1%</i>	158
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	24	<i>triamcinolone acetonide oint 0.025%</i>	158
<i>trandolapril tab 1 mg</i>	59	<i>triamcinolone acetonide oint 0.1%</i>	158
<i>trandolapril tab 2 mg</i>	59	<i>triamcinolone acetonide oint 0.5%</i>	158
<i>trandolapril tab 4 mg</i>	59	<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	70
<i>tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)</i>	134		
<i>tranexamic acid tab 650 mg</i>	134		
<i>tranylcypromine sulfate tab 10 mg</i>	79		
TRAVASOL INJ 10%	145		
<i>travoprost ophth soln 0.004% (benzalkonium free) (bak free)</i> ...	147		

<i>triamterene & hydrochlorothiazide tab</i> 37.5-25 mg.....	70	TRINTELLIX TAB 20MG	80
<i>triamterene & hydrochlorothiazide tab</i> 75-50 mg	71	TRINTELLIX TAB 5MG.....	79
<i>tridacaine dis 5% patch</i>	159	<i>tri-nymyo tab</i>	118
<i>triderm</i>	158	<i>tri-sprintec</i>	118
<i>trientine hcl cap 250 mg</i>	113	TRIUMEQ PD TAB	31
<i>tri-estarylla</i>	118	TRIUMEQ TAB	31
<i>trifluoperazine hcl tab 1 mg (base</i> <i>equivalent)</i>	89	<i>tri-vylibra</i>	118
<i>trifluoperazine hcl tab 10 mg (base</i> <i>equivalent)</i>	89	<i>tri-vylibra lo</i>	118
<i>trifluoperazine hcl tab 2 mg (base</i> <i>equivalent)</i>	89	TROGARZO INJ 150MG/ML.....	30
<i>trifluoperazine hcl tab 5 mg (base</i> <i>equivalent)</i>	89	TROPHAMINE INJ 10%	145
<i>trifluridine ophth soln 1%</i>	146	<i>trospium chloride cap er 24hr 60 mg</i>	131
<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i>	82	<i>trospium chloride tab 20 mg</i>	131
<i>trihexyphenidyl hcl tab 2 mg</i>	82	TRULANCE TAB 3MG	129
<i>trihexyphenidyl hcl tab 5 mg</i>	82	TRULICITY INJ 0.75/0.5	109
TRIJARDY XR TAB ER 24HR 10-5- 1000MG.....	109	TRULICITY INJ 1.5/0.5	109
TRIJARDY XR TAB ER 24HR 12.5-2.5- 1000MG.....	109	TRULICITY INJ 3/0.5	109
TRIJARDY XR TAB ER 24HR 25-5- 1000MG.....	109	TRULICITY INJ 4.5/0.5	109
TRIJARDY XR TAB ER 24HR 5-2.5- 1000MG.....	109	TRUMENBA INJ.....	141
TRIKAFTA PAK 59.5MG	153	TRUQAP PAK 160MG	55
TRIKAFTA PAK 75MG	153	TRUQAP PAK 200MG	55
TRIKAFTA TAB 100-50-75MG & 150MG	153	TRUQAP TAB 160MG	55
TRIKAFTA TAB 50-25-37.5MG & 75MG	153	TRUQAP TAB 200MG	55
<i>tri-legest fe</i>	118	TRUXIMA INJ 100/10ML.....	55
<i>tri-lynyah</i>	118	TRUXIMA INJ 500/50ML.....	55
<i>tri-lo-estarylla</i>	118	TUKYSA TAB 150MG	55
<i>tri-lo-marzia</i>	118	TUKYSA TAB 50MG	55
<i>tri-lo-mili</i>	118	TURALIO CAP 125MG	55
<i>tri-lo-sprintec</i>	118	<i>turqoz</i>	118
<i>trimethoprim tab 100 mg</i>	27	<i>twice-daily clindamycin phosphate</i> (<i>topical</i>)	156
<i>tri-mili</i>	118	TWINRIX INJ.....	141
<i>trimipramine maleate cap 100 mg</i>	79	TYBOST TAB 150MG.....	30
<i>trimipramine maleate cap 25 mg</i>	79	<i>tydemy tab</i>	118
<i>trimipramine maleate cap 50 mg</i>	79	TYENNE INJ 162/0.9	137
TRINTELLIX TAB 10MG	79	TYENNE INJ 162MG.....	137
		TYENNE INJ 200/10ML	137
		TYENNE INJ 400/20ML	137
		TYENNE INJ 80MG/4ML	137
		TYPHIM VI INJ.....	141
		U	
		UBRELVY TAB 100MG	102
		UBRELVY TAB 50MG.....	102
		<i>unithroid</i>	125
		UPTRAVI PACK TAB 200/800	74
		UPTRAVI TAB 1000MCG.....	74
		UPTRAVI TAB 1200MCG.....	74

UPTRAVI TAB 1400MCG	74
UPTRAVI TAB 1600MCG	74
UPTRAVI TAB 200MCG	74
UPTRAVI TAB 400MCG	74
UPTRAVI TAB 600MCG	74
UPTRAVI TAB 800MCG	74
ursodiol cap 300 mg	129
ursodiol tab 250 mg	129
ursodiol tab 500 mg	129
V	
valacyclovir hcl tab 1 gm	33
valacyclovir hcl tab 500 mg	33
VALCHLOR GEL 0.016%	160
valganciclovir hcl for soln 50 mg/ml (base equiv)	33
valganciclovir hcl tab 450 mg (base equivalent)	33
valproate sodium inj 100 mg/ml	97
valproate sodium oral soln 250 mg/5ml (base equiv)	97
valproic acid cap 250 mg	97
valsartan tab 160 mg	62
valsartan tab 320 mg	63
valsartan tab 40 mg	62
valsartan tab 80 mg	62
valsartan-hydrochlorothiazide tab 160- 12.5 mg	62
valsartan-hydrochlorothiazide tab 160- 25 mg	62
valsartan-hydrochlorothiazide tab 320- 12.5 mg	62
valsartan-hydrochlorothiazide tab 320- 25 mg	62
valsartan-hydrochlorothiazide tab 80- 12.5 mg	62
VALTOCO SPR 10MG	97
VALTOCO SPR 15MG	97
VALTOCO SPR 20MG	97
VALTOCO SPR 5MG	97
valtya 1/35 tab	118
valtya 1/50 tab	118
vancomycin hcl cap 125 mg (base equivalent)	27
vancomycin hcl cap 250 mg (base equivalent)	27
vancomycin hcl for iv soln 1 gm (base equivalent)	27

vancomycin hcl for iv soln 1.25 gm (base equivalent)	27
vancomycin hcl for iv soln 1.5 gm (base equivalent)	27
vancomycin hcl for iv soln 10 gm (base equivalent)	27
vancomycin hcl for iv soln 5 gm (base equivalent)	27
vancomycin hcl for iv soln 500 mg (base equivalent)	27
vancomycin hcl for iv soln 750 mg (base equivalent)	27
VANCOMYCIN INJ 1 GM	27
VANCOMYCIN INJ 500MG	27
VANCOMYCIN INJ 750MG	27
VANFLYTA TAB 17.7MG	55
VANFLYTA TAB 26.5MG	55
VAQTA INJ 25/0.5ML	141
VAQTA INJ 50UNT/ML	141
varenicline tartrate tab 0.5 mg (base equiv)	106
varenicline tartrate tab 1 mg (base equiv)	106
varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack	106
VARIVAX INJ	141
VASCEPA CAP 0.5GM	66
VASCEPA CAP 1GM	66
VAXCHORA SUS	141
velivet	118
VELSIPITY TAB 2MG	137
VENCLEXTA TAB 100MG	55
VENCLEXTA TAB 10MG	55
VENCLEXTA TAB 50MG	55
VENCLEXTA TAB START PK	55
venlafaxine hcl cap er 24hr 150 mg (base equivalent)	80
venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)	80
venlafaxine hcl cap er 24hr 75 mg (base equivalent)	80
venlafaxine hcl tab 100 mg (base equivalent)	80
venlafaxine hcl tab 25 mg (base equivalent)	80
venlafaxine hcl tab 37.5 mg (base equivalent)	80

<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	80
<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	80
VENTOLIN HFA (INSTITUTIONAL PACK)	150
VENTOLIN HFA AER.....	150
VEOZAH TAB 45MG	124
<i>verapamil hcl cap er 24hr 100 mg</i>	69
<i>verapamil hcl cap er 24hr 120 mg</i>	69
<i>verapamil hcl cap er 24hr 180 mg</i>	69
<i>verapamil hcl cap er 24hr 200 mg</i>	69
<i>verapamil hcl cap er 24hr 240 mg</i>	69
<i>verapamil hcl cap er 24hr 300 mg</i>	69
<i>verapamil hcl cap er 24hr 360 mg</i>	69
<i>verapamil hcl iv soln 2.5 mg/ml</i>	69
<i>verapamil hcl tab 120 mg</i>	69
<i>verapamil hcl tab 40 mg</i>	69
<i>verapamil hcl tab 80 mg</i>	69
<i>verapamil hcl tab er 120 mg</i>	69
<i>verapamil hcl tab er 180 mg</i>	69
<i>verapamil hcl tab er 240 mg</i>	69
VERQUVO TAB 10MG.....	72
VERQUVO TAB 2.5MG.....	72
VERQUVO TAB 5MG.....	72
VERSACLOZ SUS 50MG/ML	89
VERZENIO TAB 100MG	55
VERZENIO TAB 150MG	55
VERZENIO TAB 200MG	55
VERZENIO TAB 50MG	55
<i>vestura</i>	118
<i>vienna</i>	118
<i>vigabatrin powd pack 500 mg</i>	97
<i>vigabatrin tab 500 mg</i>	97
<i>vigadrone</i>	97
VIGAFYDE SOL 100MG/ML	97
<i>vigpoder</i>	97
<i>vilazodone hcl tab 10 mg</i>	80
<i>vilazodone hcl tab 20 mg</i>	80
<i>vilazodone hcl tab 40 mg</i>	80
VIMKUNYA INJ 40/0.8ML.....	141
<i>vincristine sulfate iv soln 1 mg/ml</i>	44
<i>vinorelbine tartrate inj 10 mg/ml (base equiv)</i>	44
<i>vinorelbine tartrate inj 50 mg/5ml (10 mg/ml) (base equiv)</i>	44
<i>viorele</i>	118

VIRACEPT TAB 250MG.....	30
VIRACEPT TAB 625MG.....	30
VIREAD POW 40MG/GM.....	30
VIREAD TAB 150MG.....	30
VIREAD TAB 200MG.....	30
VIREAD TAB 250MG.....	30
VITRAKVI CAP 100MG	56
VITRAKVI CAP 25MG.....	55
VITRAKVI SOL 20MG/ML.....	56
VIVIMUSTA INJ 100/4ML	39
VIVITROL INJ 380MG	106
VIVOTIF CAP EC	141
VIZIMPRO TAB 15MG	56
VIZIMPRO TAB 30MG	56
VIZIMPRO TAB 45MG	56
VONJO CAP 100MG	56
VORANIGO TAB 10MG	56
VORANIGO TAB 40MG	56
<i>voriconazole for inj 200 mg</i>	28
<i>voriconazole for susp 40 mg/ml</i>	28
<i>voriconazole tab 200 mg</i>	28
<i>voriconazole tab 50 mg</i>	28
VOSEVI TAB	33
VOWST CAP	129
VRAYLAR CAP 1.5MG.....	89
VRAYLAR CAP 3MG	89
VRAYLAR CAP 4.5MG.....	89
VRAYLAR CAP 6MG	89
<i>vyfemla</i>	118
<i>vylibra</i>	118
VYZULTA SOL 0.024%.....	147

W

<i>warfarin sodium tab 1 mg</i>	132
<i>warfarin sodium tab 10 mg</i>	132
<i>warfarin sodium tab 2 mg</i>	132
<i>warfarin sodium tab 2.5 mg</i>	132
<i>warfarin sodium tab 3 mg</i>	132
<i>warfarin sodium tab 4 mg</i>	132
<i>warfarin sodium tab 5 mg</i>	132
<i>warfarin sodium tab 6 mg</i>	132
<i>warfarin sodium tab 7.5 mg</i>	132
<i>water for irrigation, sterile irrigation soln</i>	160
WELIREG TAB 40MG	43
<i>wera</i>	118
WESTAB PLUS TAB 27-1MG	144
<i>wixela inhub</i>	155

<i>wymzya fe</i>	118
WYOST INJ 120/1.7	113
X	
XALKORI CAP 150MG	56
XALKORI CAP 200MG	56
XALKORI CAP 20MG	56
XALKORI CAP 250MG	56
XALKORI CAP 50MG	56
<i>xarah fe tab</i>	118
XARELTO STAR TAB 15/20MG.....	132
XARELTO SUS 1MG/ML	133
XARELTO TAB 10MG.....	133
XARELTO TAB 15MG.....	133
XARELTO TAB 2.5MG.....	133
XARELTO TAB 20MG.....	133
XATMEP SOL 2.5MG/ML	138
XCOPRI PAK 100-150	97
XCOPRI PAK 12.5-25.....	97
XCOPRI PAK 150-200MG (MAINTENANCE)	97
XCOPRI PAK 150-200MG (TITRATION)	97
XCOPRI PAK 50-100MG	97
XCOPRI TAB 100MG	98
XCOPRI TAB 150MG	98
XCOPRI TAB 200MG	98
XCOPRI TAB 25MG.....	97
XCOPRI TAB 50MG.....	98
XDEMVY DRO 0.25%	146
XELJANZ SOL 1MG/ML.....	137
XELJANZ TAB 10MG	137
XELJANZ TAB 5MG	137
XELJANZ XR TAB 11MG.....	137
XELJANZ XR TAB 22MG.....	137
<i>xelria fe chw 0.4mg-35</i>	118
XERMELO TAB 250MG.....	129
XGEVA INJ	113
XHANCE MIS 93MCG	153
XIFAXAN TAB 550MG	129
XIGDUO XR TAB 10-1000.....	109
XIGDUO XR TAB 10-500MG.....	109
XIGDUO XR TAB 2.5-1000.....	109
XIGDUO XR TAB 5-1000MG	109
XIGDUO XR TAB 5-500MG.....	109
XIIDRA DRO 5%	147
XOLAIR INJ 150MG/ML	153
XOLAIR INJ 300/2ML.....	153

XOLAIR INJ 75/0.5	153
XOLAIR SOL 150MG.....	153
XOSPATA TAB 40MG	56
XPOVIO PAK (100 MG ONCE WEEKLY)	57
XPOVIO PAK (40 MG ONCE WEEKLY)	56
XPOVIO PAK (40 MG TWICE WEEKLY)	56
XPOVIO PAK (60 MG ONCE WEEKLY)	56
XPOVIO PAK (60 MG TWICE WEEKLY)	56
XPOVIO PAK (80 MG ONCE WEEKLY)	56
XPOVIO PAK (80 MG TWICE WEEKLY)	56
XTANDI CAP 40MG	42
XTANDI TAB 40MG	42
XTANDI TAB 80MG	42
<i>xulane</i>	118
XULTOPHY INJ 100/3.6.....	112
Y	
YESINTEK INJ 130/26ML.....	138
YESINTEK INJ 45/0.5ML	137
YESINTEK INJ 90MG/ML	137
YF-VAX INJ	142
YONSA TAB 125MG.....	42
YUTREPIA CAP 106MCG.....	74
YUTREPIA CAP 26.5MCG.....	74
YUTREPIA CAP 53MCG.....	74
YUTREPIA CAP 79.5MCG	74
<i>yuvaferm</i>	119
Z	
<i>zafemy</i>	118
<i>zafirlukast tab 10 mg</i>	151
<i>zafirlukast tab 20 mg</i>	151
ZARXIO INJ 300/0.5	133
ZARXIO INJ 480/0.8	133
ZEGALOGUE INJ 0.6/0.6.....	121
ZEJULA TAB 100MG	57
ZEJULA TAB 200MG	57
ZEJULA TAB 300MG	57
ZELBORAF TAB 240MG	57
<i>zelvysia pow 100mg</i>	124
<i>zelvysia pow 500mg</i>	124
ZEMAIRA INJ 1000MG	153
ZEMAIRA INJ 4000MG	153
ZEMAIRA INJ 5000MG	153
<i>zenatane</i>	156

ZENPEP CAP 10000UNT	129	ZOLINZA CAP 100MG	57
ZENPEP CAP 15000UNT	129	<i>zolpidem tartrate tab 10 mg</i>	101
ZENPEP CAP 20000UNT	129	<i>zolpidem tartrate tab 5 mg</i>	101
ZENPEP CAP 25000UNT	129	<i>zolpidem tartrate tab er 12.5 mg</i> ...	101
ZENPEP CAP 3000UNIT	129	<i>zolpidem tartrate tab er 6.25 mg</i> ...	101
ZENPEP CAP 40000UNT	129	ZONISADE SUS 100MG/5	98
ZENPEP CAP 5000UNIT	129	<i>zonisamide cap 100 mg</i>	98
ZENPEP CAP 60000UNT	129	<i>zonisamide cap 25 mg</i>	98
ZERVIAE DRO 0.24%.....	146	<i>zonisamide cap 50 mg</i>	98
<i>zidovudine cap 100 mg</i>	30	<i>zovia 1/35</i>	118
<i>zidovudine syrup 10 mg/ml</i>	30	ZTALMY SUS 50MG/ML.....	98
<i>zidovudine tab 300 mg</i>	30	<i>zumandimine</i>	118
<i>ziprasidone hcl cap 20 mg</i>	89	ZURZUVAE CAP 20MG	80
<i>ziprasidone hcl cap 40 mg</i>	89	ZURZUVAE CAP 25MG	80
<i>ziprasidone hcl cap 60 mg</i>	89	ZURZUVAE CAP 30MG	80
<i>ziprasidone hcl cap 80 mg</i>	89	ZYDELIG TAB 100MG	57
<i>ziprasidone mesylate for inj 20 mg</i> <i>(base equivalent)</i>	89	ZYDELIG TAB 150MG	57
ZIRABEV INJ 100/4ML	57	ZYKADIA TAB 150MG	57
ZIRABEV INJ 400/16ML	57	ZYLET SUS 0.5-0.3%	145
ZIRGAN GEL 0.15%	146	ZYPITAMAG TAB 2MG.....	65
<i>zoledronic acid inj conc for iv infusion 4</i> <i>mg/5ml</i>	113	ZYPITAMAG TAB 4MG.....	65
<i>zoledronic acid iv soln 5 mg/100ml.</i>	113	ZYPREXA RELP INJ 210MG	90
		ZYPREXA RELP INJ 300MG	90
		ZYPREXA RELP INJ 405MG	90

Este formulário foi atualizado em 12/01/2025. Para informações mais recentes ou outras questões, contacte os Serviços para Membros do CCA Senior Care Options através do número 866-610-2273 (TTY 711), das 8 AM às 8 PM, 7 dias por semana. Em alternativa, visite ccama.org.