



Open Formulary

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>ANTI-INFECTIVE AGENTS</b>					
<b>PENICILLINS</b>					
AMOXICILLIN- amoxicillin (trihydrate) chew tab 125 mg, 250 mg	P				
amoxicillin (trihydrate) cap 250 mg, 500 mg	p				
amoxicillin (trihydrate) for susp 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml	p				
amoxicillin (trihydrate) tab 500 mg, 875 mg	p				
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml, 250-62.5 mg/5ml, 400-57 mg/5ml	p				
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml (Augmentin es-600)	p				
amoxicillin & k clavulanate tab 250-125 mg, 875-125 mg	p				
amoxicillin & k clavulanate tab 500-125 mg (Augmentin)	p				
AMOXICILLIN/CLAVULANATE P- amoxicillin & k clavulanate chew tab 200-28.5 mg, 400-57 mg	P				
AMOXICILLIN/CLAVULANATE P- amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg	P				
ampicillin cap 500 mg	p				
AUGMENTIN- amoxicillin & k clavulanate for susp 125-31.25 mg/5ml	P				
AUGMENTIN- amoxicillin & k clavulanate tab 500-125 mg	NP				
AUGMENTIN ES-600- amoxicillin & k clavulanate for susp 600-42.9 mg/5ml	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
dicloxacillin sodium cap 250 mg, 500 mg	p				
PENICILLIN V POTASSIUM- penicillin v potassium for soln 125 mg/5ml, 250 mg/5ml	P				
penicillin v potassium tab 250 mg, 500 mg	p				
<b>CEPHALOSPORINS</b>					
CEFACTOR- cefaclor cap 250 mg, 500 mg	P				
CEFACTOR- cefaclor for susp 250 mg/5ml	NP				
CEFACTOR ER- cefaclor monohydrate tab er 12hr 500 mg	NP				
CEFADROXIL- cefadroxil tab 1 gm	P				
cefadroxil cap 500 mg	p				
cefadroxil for susp 250 mg/5ml, 500 mg/5ml	p				
cefdinir cap 300 mg	p				
cefdinir for susp 125 mg/5ml, 250 mg/5ml	p				
cefixime cap 400 mg (Suprax)	p				
cefixime for susp 100 mg/5ml	p				
cefixime for susp 200 mg/5ml (Suprax)	p				
cefpodoxime proxetil for susp 50 mg/5ml, 100 mg/5ml	p				
cefpodoxime proxetil tab 100 mg, 200 mg	p				
cefprozil for susp 125 mg/5ml, 250 mg/5ml	p				
cefprozil tab 250 mg, 500 mg	p				
cefuroxime axetil tab 250 mg, 500 mg	p				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CEPHALEXIN- cephalexin tab 250 mg, 500 mg	NP					ERYTHROMYCIN ETHYLSUCCINA- erythromycin ethylsuccinate tab 400 mg	NP				
<b>cephalexin cap 250 mg, 500 mg</b>	p					<b>erythromycin ethylsuccinate for susp 200 mg/5ml (E.e.s. granules)</b>	np				
<b>cephalexin cap 750 mg</b>	np					<b>erythromycin ethylsuccinate for susp 400 mg/5ml (Eryped 400)</b>	np				
<b>cephalexin for susp 125 mg/5ml, 250 mg/5ml</b>	p					<b>erythromycin tab delayed release 250 mg, 333 mg, 500 mg</b>	np				
<b>MACROLIDES</b>						<b>erythromycin tab 250 mg, 500 mg</b>	np				
AZITHROMYCIN- azithromycin powd pack for susp 1 gm	P					ZITHROMAX- azithromycin for susp 100 mg/5ml, 200 mg/5ml	NP				
<b>azithromycin for susp 100 mg/5ml, 200 mg/5ml (Zithromax)</b>	p					ZITHROMAX- azithromycin powd pack for susp 1 gm	NP				
<b>azithromycin tab 250 mg, 500 mg (Zithromax)</b>	p					ZITHROMAX- azithromycin tab 250 mg, 500 mg	NP				
<b>azithromycin tab 600 mg</b>	p					ZITHROMAX TRI-PAK- azithromycin tab 500 mg	NP				
CLARITHROMYCIN- clarithromycin for susp 125 mg/5ml, 250 mg/5ml	P					ZITHROMAX Z-PAK- azithromycin tab 250 mg	NP				
<b>clarithromycin tab er 24hr 500 mg</b>	p					<b>TETRACYCLINES</b>					
<b>clarithromycin tab 250 mg, 500 mg</b>	p					<b>demeclocycline hcl tab 150 mg, 300 mg</b>	p				
DIFICID- fidaxomicin for susp 40 mg/ ml	P					DORYX- doxycycline hyclate tab delayed release 50 mg	NP		•		
DIFICID- fidaxomicin tab 200 mg	P					DORYX MPC- doxycycline hyclate tab delayed release 60 mg, 120 mg	NP		•		
E.E.S. GRANULES- erythromycin ethylsuccinate for susp 200 mg/5ml	NP					<b>doxycycline hyclate cap 50 mg</b>	p				
E.E.S. 400- erythromycin ethylsuccinate tab 400 mg	NP					<b>doxycycline hyclate cap 100 mg (Vibramycin)</b>	p				
ERYPED 200- erythromycin ethylsuccinate for susp 200 mg/5ml	NP					DOXYCYCLINE HYCLATE DR- doxycycline hyclate tab delayed release 80 mg	NP		•		
ERYPED 400- erythromycin ethylsuccinate for susp 400 mg/5ml	NP					<b>doxycycline hyclate tab delayed release 50 mg, 200 mg (Doryx)</b>	np		•		
ERYTHROCIN STEARATE- erythromycin stearate tab 250 mg	NP										
ERYTHROMYCIN- erythromycin w/ delayed release particles cap 250 mg	NP										

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
doxycycline hyclate tab delayed release 75 mg, 100 mg, 150 mg	np		•			(base equivalent), 150 mg (base equivalent)					
doxycycline hyclate tab 20 mg, 100 mg	p					SOLODYN- minocycline hcl tab er 24hr 55 mg, 65 mg, 80 mg, 105 mg, 115 mg	NP		•		
doxycycline hyclate tab 50 mg	np					tetracycline hcl cap 250 mg, 500 mg	p				
doxycycline hyclate tab 75 mg, 150 mg (Acticlate)	np					VIBRAMYCIN- doxycycline hyclate cap 100 mg	NP		•		
doxycycline monohydrate cap 50 mg, 100 mg	p					VIBRAMYCIN- doxycycline monohydrate for susp 25 mg/5ml	NP		•		
doxycycline monohydrate cap 75 mg, 150 mg	np					XIMINO- minocycline hcl cap er 24hr 45 mg (base equivalent), 90 mg (base equivalent), 135 mg (base equivalent)	NP		•		
doxycycline monohydrate for susp 25 mg/5ml (Vibramycin)	np					<b>FLUOROQUINOLONES</b>					
doxycycline monohydrate tab 50 mg, 75 mg, 100 mg, 150 mg	p					BAXDELA- delafloxacin meglumine tab 450 mg (base equiv)	NP				
minocycline hcl cap 50 mg, 75 mg, 100 mg	p					CIPRO- ciprofloxacin for oral susp 250 mg/5ml (5%) (5 gm/100ml)	NP				
minocycline hcl tab er 24hr 45 mg, 90 mg, 135 mg	np		•			CIPRO- ciprofloxacin for oral susp 500 mg/5ml (10%) (10 gm/100ml)	P				
minocycline hcl tab er 24hr 55 mg, 65 mg, 80 mg, 105 mg, 115 mg (Solodyn)	np		•			CIPRO- ciprofloxacin hcl tab 250 mg (base equiv), 500 mg (base equiv)	NP				
minocycline hcl tab 50 mg, 75 mg, 100 mg	np					ciprofloxacin hcl tab 250 mg (base equiv), 500 mg (base equiv) (Cipro)	p				
MINOCYCLINE HYDROCHLORIDE- minocycline hcl cap er 24hr 45 mg (base equivalent), 90 mg (base equivalent), 135 mg (base equivalent)	NP		•			ciprofloxacin hcl tab 750 mg (base equiv)	p				
MINOLIRA- minocycline hcl tab er 24hr biphasic release 105 mg, 135 mg	NP		•			LEVOFLOXACIN- levofloxacin oral soln 25 mg/ml	P				
NUZYRA- omadacycline tosylate tab 150 mg (base equivalent)	NP					levofloxacin tab 250 mg, 500 mg, 750 mg	p				
SEYSARA- sarecycline hcl tab 60 mg (base equivalent), 100 mg	NP		•			moxifloxacin hcl tab 400 mg (base equiv)	np				
						OFLOXACIN- ofloxacin tab 300 mg	NP				
						ofloxacin tab 400 mg	p				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>AMINOGLYCOSIDES</b>					
ARIKAYCE- amikacin sulfate liposome inhal susp 590 mg/8.4ml (base eq)	NP	•	•		•
BETHKIS- tobramycin nebu soln 300 mg/4ml	NP	•			
HUMATIN- paromomycin sulfate cap 250 mg	P				
KITABIS PAK- tobramycin nebu soln 300 mg/5ml	NP	•			
<b>neomycin sulfate tab 500 mg</b>	p				
TOBI- tobramycin nebu soln 300 mg/5ml	NP	•			
TOBI PODHALER- tobramycin inhal cap 28 mg	NP	•			
TOBRAMYCIN- tobramycin nebu soln 300 mg/5ml	NP	•			
<b>tobramycin nebu soln 300 mg/5ml (Tobi)</b>	p	•			
<b>tobramycin nebu soln 300 mg/4ml (Bethkis)</b>	np	•			
<b>SULFONAMIDES</b>					
SULFADIAZINE- sulfadiazine tab 500 mg	P				
<b>ANTIMYCOBACTERIAL AGENTS</b>					
<b>cycloserine cap 250 mg</b>	np				
<b>ethambutol hcl tab 100 mg</b>	p				
<b>ethambutol hcl tab 400 mg (Myambutol)</b>	p				
ISONIAZID- isoniazid tab 100 mg	P				
<b>isoniazid syrup 50 mg/5ml</b>	p				
<b>isoniazid tab 300 mg</b>	p				
MYAMBUTOL- ethambutol hcl tab 400 mg	NP				
MYCOBUTIN- rifabutin cap 150 mg	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
PRETOMANID- pretomanid tab 200 mg	NP				
PRIFTIN- rifapentine tab 150 mg	P				
<b>pyrazinamide tab 500 mg</b>	p				
<b>rifabutin cap 150 mg (Mycobutin)</b>	p				
<b>rifampin cap 150 mg, 300 mg</b>	p				
SIRTURO- bedaquiline fumarate tab 20 mg (base equiv), 100 mg (base equiv)	NP	•			
TRECTOR- ethionamide tab 250 mg	NP				
<b>ANTIFUNGALS</b>					
ANCOBON- flucytosine cap 250 mg, 500 mg	NP				
BREXAFEMME- ibrexafungerp citrate tab 150 mg	NP				
CRESEMBA- isavuconazonium sulfate cap 74.5 mg (isavuconazole 40 mg), 186 mg (isavuconazole 100 mg)	NP				
DIFLUCAN- fluconazole for susp 10 mg/ml, 40 mg/ml	NP				
DIFLUCAN- fluconazole tab 100 mg, 150 mg, 200 mg	NP				
<b>fluconazole for susp 10 mg/ml, 40 mg/ml (Diflucan)</b>	p				
<b>fluconazole tab 50 mg, 100 mg, 150 mg, 200 mg (Diflucan)</b>	p				
<b>flucytosine cap 250 mg, 500 mg (Ancobon)</b>	p				
<b>griseofulvin microsize susp 125 mg/5ml</b>	p				
<b>griseofulvin microsize tab 500 mg</b>	p				
<b>griseofulvin ultramicrosize tab 125 mg, 250 mg</b>	np				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>itraconazole cap 100 mg (Sporanox)</b>	p					<b>abacavir sulfate tab 300 mg (base equiv) (Ziagen)</b>	p				•
<b>itraconazole oral soln 10 mg/ml (Sporanox)</b>	p					<b>abacavir sulfate-lamivudine tab 600-300 mg (Epzicom)</b>	p				•
<b>ketoconazole tab 200 mg</b>	np					<b>acyclovir cap 200 mg</b>	p				
NOXAFIL- posaconazole for delayed release susp packet 300 mg	P					<b>acyclovir susp 200 mg/5ml (Zovirax)</b>	p				
NOXAFIL- posaconazole susp 40 mg/ml	NP					<b>acyclovir tab 400 mg, 800 mg</b>	p				
NOXAFIL- posaconazole tab delayed release 100 mg	NP					<b>adefovir dipivoxil tab 10 mg (Hepsera)</b>	p				
<b>nystatin tab 500000 unit</b>	p					APTIVUS- tipranavir cap 250 mg	NP				•
<b>posaconazole susp 40 mg/ml (Noxafil)</b>	p					<b>atazanavir sulfate cap 150 mg (base equiv)</b>	p				•
<b>posaconazole tab delayed release 100 mg (Noxafil)</b>	p					<b>atazanavir sulfate cap 200 mg (base equiv), 300 mg (base equiv) (Reyataz)</b>	p				•
SPORANOX- itraconazole cap 100 mg	NP					BARACLUDE- entecavir oral soln 0.05 mg/ml	P				
SPORANOX- itraconazole oral soln 10 mg/ml	NP					BARACLUDE- entecavir tab 0.5 mg, 1 mg	NP				
<b>terbinafine hcl tab 250 mg</b>	p					BIKTARVY- bictegravir-emtricitabine-tenofovir af tab 30-120-15 mg, 50-200-25 mg	P				•
TOLSURA- itraconazole cap 65 mg	NP					CIMDUO- lamivudine-tenofovir disoproxil fumarate tab 300-300 mg	P				•
VFEND- voriconazole for susp 40 mg/ml	NP					COMPLERA- emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg	NP				•
VFEND- voriconazole tab 50 mg, 200 mg	NP					<b>darunavir tab 600 mg, 800 mg (Prezista)</b>	p				•
VIVJOA- oteseconazole cap therapy pack 150 mg (12 weeks)	NP					DELSTRIGO- doravirine-lamivudine-tenofovir df tab 100-300-300 mg	P				•
<b>voriconazole for susp 40 mg/ml (Vfend)</b>	p					DESCOVY- emtricitabine-tenofovir alafenamide fumarate tab 120-15 mg, 200-25 mg	P				•
<b>voriconazole tab 50 mg, 200 mg (Vfend)</b>	p					DOVATO- dolutegravir sodium-lamivudine tab 50-300 mg (base eq)	P				•
<b>ANTIVIRALS</b>											
<b>abacavir sulfate soln 20 mg/ml (base equiv) (Ziagen)</b>	p				•						

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
EDURANT- rilpivirine hcl tab 25 mg (base equivalent)	NP				•
<b>efavirenz tab 600 mg (Sustiva)</b>	p				•
<b>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</b>	p				•
<b>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg (Symfi lo)</b>	p				•
<b>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg (Symfi)</b>	p				•
<b>emtricitabine caps 200 mg (Emtriva)</b>	np				•
<b>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg, 133-200 mg, 167-250 mg, 200-300 mg (Truvada)</b>	p				•
EMTRIVA- emtricitabine caps 200 mg	NP				•
EMTRIVA- emtricitabine soln 10 mg/ml	NP				•
<b>entecavir tab 0.5 mg, 1 mg (Baraclude)</b>	p				•
EPCLUSA- sofosbuvir-velpatasvir pellet pack 150-37.5 mg, 200-50 mg	P	•	•		•
EPCLUSA- sofosbuvir-velpatasvir tab 200-50 mg, 400-100 mg	P	•	•		•
EPIVIR- lamivudine oral soln 10 mg/ml	NP				•
EPIVIR- lamivudine tab 150 mg, 300 mg	NP				•
EPZICOM- abacavir sulfate-lamivudine tab 600-300 mg	NP				•
<b>etravirine tab 100 mg, 200 mg (Intelece)</b>	p				•
EVOTAZ- atazanavir sulfate-cobicistat tab 300-150 mg (base equiv)	P				•
<b>famciclovir tab 125 mg, 250 mg, 500 mg</b>	p				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>fosamprenavir calcium tab 700 mg (base equiv) (Lexiva)</b>	np				•
FUZEON- enfuvirtide for inj 90 mg	NP	•			•
GENVOYA- elvitegrav-cobic-emtricitab-tenofov af tab 150-150-200-10 mg	P				•
HARVONI- ledipasvir-sofosbuvir pellet pack 33.75-150 mg, 45-200 mg	P	•	•		•
HARVONI- ledipasvir-sofosbuvir tab 45-200 mg, 90-400 mg	P	•	•		•
INTELECE- etravirine tab 25 mg	P				•
INTELECE- etravirine tab 100 mg, 200 mg	NP				•
ISENTRESS- raltegravir potassium chew tab 25 mg (base equiv), 100 mg (base equiv)	P				•
ISENTRESS- raltegravir potassium packet for susp 100 mg (base equiv)	P				•
ISENTRESS- raltegravir potassium tab 400 mg (base equiv)	P				•
ISENTRESS HD- raltegravir potassium tab 600 mg (base equiv)	P				•
JULUCA- dolutegravir sodium-rilpivirine hcl tab 50-25 mg (base eq)	P				•
KALETRA- lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)	NP				•
KALETRA- lopinavir-ritonavir tab 100-25 mg, 200-50 mg	NP				•
LAGEVRIO- molnupiravir cap 200 mg	NP				•
<b>lamivudine oral soln 10 mg/ml (Epivir)</b>	p				•
<b>lamivudine tab 100 mg (hbv) (Epivir hbv)</b>	p				•
<b>lamivudine tab 150 mg, 300 mg (Epivir)</b>	p				•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>lamivudine-zidovudine tab 150-300 mg (Combivir)</b>	p				•	PEGASYS- peginterferon alfa-2a inj 180 mcg/ml	P	•	•		
LEDIPASVIR/SOFOSBUVIR- ledipasvir-sofosbuvir tab 90-400 mg	P	•	•		•	PEGASYS- peginterferon alfa-2a soln prefilled syr 180 mcg/0.5ml	P	•	•		
LIVTENCITY- maribavir tab 200 mg	NP	•			•	PIFELTRO- doravirine tab 100 mg	NP				•
<b>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml) (Kaletra)</b>	p				•	PREVMIS- letermovir tab 240 mg, 480 mg	NP				•
<b>lopinavir-ritonavir tab 100-25 mg, 200-50 mg (Kaletra)</b>	p				•	PREZCOBIX- darunavir-cobicistat tab 800-150 mg	P				•
<b>maraviroc tab 150 mg, 300 mg (Selzentry)</b>	np				•	PREZISTA- darunavir oral susp 100 mg/ml	P				•
MAVYRET- glecaprevir-pibrentasvir pellet pack 50-20 mg	P	•	•		•	PREZISTA- darunavir tab 75 mg, 150 mg	P				•
MAVYRET- glecaprevir-pibrentasvir tab 100-40 mg	P	•	•		•	PREZISTA- darunavir tab 600 mg, 800 mg	NP				•
NEVIRAPINE- nevirapine susp 50 mg/5ml	P				•	RELENZA DISKHALER- zanamivir aerosol powder breath activated 5 mg/act	NP				•
<b>nevirapine tab er 24hr 400 mg</b>	p				•	RETROVIR- zidovudine cap 100 mg	NP				•
<b>nevirapine tab 200 mg</b>	p				•	RETROVIR- zidovudine syrup 10 mg/ml	NP				•
NORVIR- ritonavir powder packet 100 mg	P				•	REYATAZ- atazanavir sulfate cap 200 mg (base equiv), 300 mg (base equiv)	NP				•
NORVIR- ritonavir tab 100 mg	NP				•	REYATAZ- atazanavir sulfate oral powder packet 50 mg (base equiv)	NP				•
ODEFSEY- emtricitabine-rilpivirine-tenofovir af tab 200-25-25 mg	P				•	RIBAVIRIN- ribavirin cap 200 mg	P	•			
<b>oseltamivir phosphate cap 30 mg (base equiv), 45 mg (base equiv), 75 mg (base equiv) (Tamiflu)</b>	p				•	RIBAVIRIN- ribavirin tab 200 mg	P	•			
<b>oseltamivir phosphate for susp 6 mg/ml (base equiv) (Tamiflu)</b>	p				•	<b>ritonavir tab 100 mg (Norvir)</b>	p				•
PAXLOVID- nirmatrelvir tab 10 x 150 mg & ritonavir tab 10 x 100 mg pak	P				•	RUKOBIA- fostemsavir tromethamine tab er 12hr 600 mg	NP				•
PAXLOVID- nirmatrelvir tab 20 x 150 mg & ritonavir tab 10 x 100 mg pak	P				•	SELZENTRY- maraviroc oral soln 20 mg/ml	NP				•
						SELZENTRY- maraviroc tab 150 mg, 300 mg	NP				•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
SITAVIG- acyclovir buccal tab 50 mg	NP				
SOFOSBUVIR/VELPATASVIR- sofosbuvir-velpatasvir tab 400-100 mg	P	•	•		•
SOVALDI- sofosbuvir pellet pack 150 mg, 200 mg	P	•	•		•
SOVALDI- sofosbuvir tab 200 mg, 400 mg	P	•	•		•
STRIBILD- elvitegrav-cobic-emtricitab-tenofovd f tab 150-150-200-300 mg	NP				•
SUNLENCA- lenacapavir sodium tab therapy pack 4 x 300 mg, 5 x 300 mg	NP	•			•
SYMFI- efavirenz-lamivudine-tenofovir df tab 600-300-300 mg	NP				•
SYMFI LO- efavirenz-lamivudine-tenofovir df tab 400-300-300 mg	NP				•
SYMTUZA- darunavir-cobic-emtricitab-tenofov af tab 800-150-200-10 mg	P				•
TAMIFLU- oseltamivir phosphate cap 30 mg (base equiv), 45 mg (base equiv), 75 mg (base equiv)	NP				•
TAMIFLU- oseltamivir phosphate for susp 6 mg/ml (base equiv)	NP				•
<b>tenofovir disoproxil fumarate tab 300 mg (Viread)</b>	p				•
TIVICAY- dolutegravir sodium tab 50 mg (base equiv)	P				•
TIVICAY PD- dolutegravir sodium tab for oral susp 5 mg (base equiv)	P				•
TRIUMEQ- abacavir-dolutegravir-lamivudine tab 600-50-300 mg	P				•
TRIUMEQ PD- abacavir-dolutegravir-lamivudine tab for oral sus 60-5-30 mg	P				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
TRUVADA- emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg, 133-200 mg, 167-250 mg, 200-300 mg	NP				•
TYBOST- cobicistat tab 150 mg	NP				•
<b>valacyclovir hcl tab 500 mg, 1 gm (Valtrex)</b>	p				
VALCYTE- valganciclovir hcl for soln 50 mg/ml (base equiv)	NP				
VALCYTE- valganciclovir hcl tab 450 mg (base equivalent)	NP				
<b>valganciclovir hcl for soln 50 mg/ml (base equiv) (Valcyte)</b>	p				
<b>valganciclovir hcl tab 450 mg (base equivalent) (Valcyte)</b>	p				
VALTREX- valacyclovir hcl tab 500 mg, 1 gm	NP				
VEMLIDY- tenofovir alafenamide fumarate tab 25 mg	P				
VIRACEPT- nelfinavir mesylate tab 250 mg, 625 mg	NP				•
VIRAZOLE- ribavirin for inhal soln 6 gm	NP				
VIREAD- tenofovir disoproxil fumarate oral powder 40 mg/gm	P				•
VIREAD- tenofovir disoproxil fumarate tab 150 mg, 200 mg, 250 mg	P				•
VIREAD- tenofovir disoproxil fumarate tab 300 mg	NP				•
VOSEVI- sofosbuvir-velpatasvir-voxilaprevir tab 400-100-100 mg	P	•	•		•
XOFLUZA- baloxavir marboxil tab therapy pack 1 x 40 mg (40 mg dose), 1 x 80 mg (80 mg dose)	NP				•
ZEPATIER- elbasvir-grazoprevir tab 50-100 mg	NP	•	•		•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands



Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ZIAGEN- abacavir sulfate soln 20 mg/ml (base equiv)	NP				•
<b>zidovudine cap 100 mg (Retrovir)</b>	p				•
<b>zidovudine syrup 10 mg/ml (Retrovir)</b>	p				•
<b>zidovudine tab 300 mg</b>	p				•
<b>ANTIMALARIALS</b>					
ARAKODA- tafenoquine succinate tab 100 mg (base equivalent)	NP				
<b>atovaquone-proguanil hcl tab 62.5-25 mg, 250-100 mg (Malarone)</b>	p				
<b>chloroquine phosphate tab 250 mg, 500 mg</b>	p				
COARTEM- artemether-lumefantrine tab 20-120 mg	P				
DARAPRIM- pyrimethamine tab 25 mg	NP				
<b>hydroxychloroquine sulfate tab 100 mg, 300 mg, 400 mg</b>	p				
<b>hydroxychloroquine sulfate tab 200 mg (Plaquenil)</b>	p				
KRINTAFEL- tafenoquine succinate tab 150 mg (base equivalent)	NP				
MALARONE- atovaquone-proguanil hcl tab 62.5-25 mg, 250-100 mg	NP				
<b>mefloquine hcl tab 250 mg</b>	p				
PLAQUENIL- hydroxychloroquine sulfate tab 200 mg	NP				
PRIMAQUINE PHOSPHATE- primaquine phosphate tab 26.3 mg (15 mg base)	NP				
<b>primaquine phosphate tab 26.3 mg (15 mg base) (Primaquine phosphate)</b>	p				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>pyrimethamine tab 25 mg (Daraprim)</b>	p				
QUALAQUIN- quinine sulfate cap 324 mg	NP				
<b>quinine sulfate cap 324 mg (Qualaquin)</b>	np				
<b>AMEBICIDES</b>					
SOLOSEC- secnidazole granules packet 2 gm	P				
<b>ANTHELMINTICS</b>					
<b>albendazole tab 200 mg</b>	p				
BENZNIDAZOLE- benznidazole tab 12.5 mg, 100 mg	P				
BILTRICIDE- praziquantel tab 600 mg	NP				
EMVERM- mebendazole chew tab 100 mg	NP				
<b>ivermectin tab 3 mg (Stromectol)</b>	p				
<b>praziquantel tab 600 mg (Biltricide)</b>	p				
STROMECTIONOL- ivermectin tab 3 mg	NP				
<b>ANTI-INFECTIVE AGENTS - MISC.</b>					
AEMCOLO- rifamycin sodium tab delayed release 194 mg (base equiv)	NP				
ALINIA- nitazoxanide for susp 100 mg/5ml	P				•
ALINIA- nitazoxanide tab 500 mg	NP				•
<b>atovaquone susp 750 mg/5ml (Mepron)</b>	p				
BACTRIM- sulfamethoxazole-trimethoprim tab 400-80 mg	NP				
BACTRIM DS- sulfamethoxazole-trimethoprim tab 800-160 mg	NP				
CAYSTON- aztreonam lysine for inhal soln 75 mg (base equivalent)	NP	•			

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CLEOCIN- clindamycin hcl cap 75 mg, 150 mg, 300 mg	NP					<b>metronidazole cap 375 mg (Flagyl)</b>	np				
CLEOCIN PEDIATRIC GRANULE- clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)	NP					<b>metronidazole tab 250 mg, 500 mg</b>	p				
<b>clindamycin hcl cap 75 mg, 150 mg, 300 mg (Cleocin)</b>	p					NEBUPENT- pentamidine isethionate for nebulization soln 300 mg	NP				
<b>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv) (Cleocin pediatric gr)</b>	p					<b>nitazoxanide tab 500 mg (Alinia)</b>	p				•
<b>dapsone tab 25 mg, 100 mg</b>	p					NITROFURANTOIN- nitrofurantoin susp 50 mg/5ml	NP				
FIRVANQ- vancomycin hcl for oral soln 25 mg/ml (base equivalent), 50 mg/ml (base equivalent)	NP					<b>nitrofurantoin macrocrystalline cap 25 mg, 50 mg, 100 mg (Macrochantin)</b>	p				
FLAGYL- metronidazole cap 375 mg	NP					<b>nitrofurantoin monohydrate macrocrystalline cap 100 mg (Macrobid)</b>	p				
<b>fosfomycin tromethamine powd pack 3 gm (base equivalent) (Monurol)</b>	np					<b>nitrofurantoin susp 25 mg/5ml</b>	p				
HIPREX- methenamine hippurate tab 1 gm	NP					<b>pentamidine isethionate for nebulization soln 300 mg (Nebupent)</b>	p				
IMPAVIDO- miltefosine cap 50 mg	P					SIVEXTRO- tedizolid phosphate tab 200 mg	P				
LAMPIT- nifurtimox tab 30 mg, 120 mg	NP					<b>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</b>	p				
<b>linezolid for susp 100 mg/5ml (Zyvox)</b>	p					<b>sulfamethoxazole-trimethoprim tab 400-80 mg (Bactrim)</b>	p				
<b>linezolid tab 600 mg (Zyvox)</b>	p					<b>sulfamethoxazole-trimethoprim tab 800-160 mg (Bactrim ds)</b>	p				
MACROBID- nitrofurantoin monohydrate macrocrystalline cap 100 mg	NP					<b>tinidazole tab 250 mg, 500 mg</b>	np				
MACRODANTIN- nitrofurantoin macrocrystalline cap 25 mg, 50 mg, 100 mg	NP					TRIMETHOPRIM- trimethoprim tab 100 mg	NP				
MEPRON- atovaquone susp 750 mg/5ml	NP					<b>trimethoprim tab 100 mg</b>	p				
<b>methenamine hippurate tab 1 gm (Hiprex)</b>	np					VANCOGIN- vancomycin hcl cap 125 mg (base equivalent), 250 mg (base equivalent)	NP				
						<b>vancomycin hcl cap 125 mg (base equivalent), 250 mg (base equivalent) (Vancocin)</b>	p				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
vancomycin hcl for oral soln 25 mg/ml (base equivalent) (Firvanq)	np				
vancomycin hcl for oral soln 50 mg/ml (base equivalent) (Vancomycin hydrochlo)	np				
XIFAXAN- rifaximin tab 200 mg	NP				
XIFAXAN- rifaximin tab 550 mg	P				
ZYVOX- linezolid for susp 100 mg/5ml	NP				
ZYVOX- linezolid tab 600 mg	NP				
<b>BIOLOGICALS</b>					
<b>VACCINES</b>					
ABRYSVO- rsv pre-fusion f a&b vac recomb for im soln 120 mcg/0.5ml	P				
ACTHIB- haemophilus b polysaccharide conjugate vaccine for inj	P				
AFLURIA QUADRIVALENT 2023-influenza virus vac split quadrivalent susp pref syr 0.5ml	P				
AFLURIA QUADRIVALENT 2023-influenza virus vaccine split quadrivalent im inj	P				
AREXVY- rsvpref3 vaccine recomb adjuvanted for im susp 120 mcg/0.5ml	P				
BEXSERO- meningococcal vac b (recomb omv adjuv) inj prefilled syringe	P				
COMIRNATY 2023-24- covid-19 mrna vac tris-pfizer im susp pref syr 30 mcg/0.3ml	P				
COMIRNATY 2023-24- covid-19 mrna vac tris-sucrose-pfizer im susp 30 mcg/0.3ml	P				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ENGERIX-B- hepatitis b vaccine (recombinant) susp pref syr 10 mcg/0.5ml, 20 mcg/ml	P				
ENGERIX-B- hepatitis b vaccine (recombinant) susp 20 mcg/ml	P				
FLUAD QUADRIVALENT 2023-2-influenza vac type a&b surface ant adj quad pref syr 0.5 ml	P				
FLUARIX QUADRIVALENT 2023-influenza virus vac split quadrivalent susp pref syr 0.5ml	P				
FLUBLOK QUADRIVALENT 2023-influenza vac recomb ha quad pf soln pref syr 0.5 ml	P				
FLUCELVAX QUADRIVALENT 20-influenza vac tiss-cult subunt quad susp pref syr 0.5 ml	P				
FLUCELVAX QUADRIVALENT 20-influenza vac tissue-cultured subunit quadrivalent im susp	P				
FLULAVAL QUADRIVALENT 202-influenza virus vac split quadrivalent susp pref syr 0.5ml	P				
FLUMIST QUADRIVALENT- influenza virus vaccine live quadrivalent intranasal susp	P				
FLUZONE HIGH-DOSE PF 2023-influenza vac split high-dose quad pf susp pref syr 0.7 ml	P				
FLUZONE QUADRIVALENT 2023-influenza virus vac split quadrivalent susp pref syr 0.5ml	P				
FLUZONE QUADRIVALENT 2023-influenza virus vaccine split quadrivalent im inj	P				
GARDASIL 9- human papillomavirus (hpv) 9-valent recomb vac im susp	P				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
GARDASIL 9- human papillomavirus (hpv) 9-valent recomb vac susp pref syr	P					PEDVAX HIB- haemophilus b polysaccharide conj vac im susp 7.5 mcg/0.5 ml	P				
HAVRIX- hepatitis a vaccine inj susp 720 el unit/0.5ml, 1440 el unit/ml	P					PENBRAYA- meningococcal acyw (tet conj)-mening b (rcmb) vacc for inj	P				
HEPLISAV-B- hepatitis b vaccine recomb adjuvanted pref syr 20 mcg/0.5ml	P					PFIZER-BIONTECH COVID-19- covid-19 mrna vac tris-s 5-11y-pfizer im susp 10 mcg/0.3ml	P				
HIBERIX- haemophilus b polysaccharide conjugate vac for inj 10 mcg	P					PFIZER-BIONTECH COVID-19- covid-19 mrna vac tris-s 6mo-4y-pfizer im susp 3 mcg/0.3ml	P				
IMOVAX RABIES (H.D.C.V.)- rabies virus vaccine, hdc for inj susp	NP					PNEUMOVAX 23- pneumococcal vaccine polyvalent inj 25 mcg/0.5ml	P				
IPOL INACTIVATED IPV- poliovirus vaccine, ipv injection	P					PNEUMOVAX 23/1 DOSE- pneumococcal vaccine polyvalent inj 25 mcg/0.5ml	P				
JYNNEOS- smallpox & monkeypox vac, live, non-replicating inj 0.5 ml	P					PREHEVBRIO- hepatitis b vaccine 3-antigen (recombinant) susp 10 mcg/ml	P				
M-M-R II- measles-mumps-rubella virus vaccines for inj soln	P					PREVNAR 13- pneumococcal 13-valent conjugate vaccine inj	P				
MENACTRA- meningococcal (a, c, y, and w-135) diphth conjugate vaccine	P					PREVNAR 20- pneumococcal 20-valent conjugate vaccine sus pref syr 0.5 ml	P				
MENQUADFI- meningococcal (a, c, y, and w-135) tetanus conjugate vaccine	P					PRIORIX- measles-mumps-rubella virus vaccines for subcutaneous susp	P				
MENVEO- meningococcal (a, c, y, and w-135) oligo conj vac for inj	P					PROQUAD- measles-mumps-rubella-varicella virus vaccines for susp	P				
MENVEO- meningococcal (a, c, y, and w-135) oligo conj vac im soln	P					RABAERT- rabies vaccine, pcec for inj	NP				
MODERNA COVID-19 VACCINE- covid-19 mrna vaccine 6mo-11yr- moderna im susp 25 mcg/0.25ml	P					RECOMBIVAX HB- hepatitis b vaccine (recombinant) susp pref syr 5 mcg/0.5ml, 10 mcg/ml	P				
NOVAVAX COVID-19 VACCINE/- covid-19 subunit prot recom adjuv vac-novavax im 5 mcg/0.5ml	P					RECOMBIVAX HB- hepatitis b vaccine (recombinant) susp 5 mcg/0.5ml, 10 mcg/ml, 40 mcg/ml	P				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ROTARIX- rotavirus vaccine, live oral susp	P				
ROTATEQ- rotavirus vaccine, live oral pentavalent soln	P				
SHINGRIX- zoster vac recombinant adjuvanted for im inj 50 mcg/0.5ml	P				
SPIKEVAX COVID-19 VACCINE- covid-19 mrna vaccine-moderna im susp pref syr 50 mcg/0.5ml	P				
SPIKEVAX COVID-19 VACCINE- covid-19 (sars-cov-2)mrna vacc-moderna im susp 50 mcg/0.5ml	P				
TRUMENBA- meningococcal group b vac (recomb) im susp prefilled syr	P				
TWINRIX- hep a-hep b vaccine susp pref syr 720-20 elu-mcg/ml	P				
VAQTA- hepatitis a vaccine inj susp 25 unit/0.5ml, 50 unit/ml	P				
VARIVAX- varicella virus vac live for subcutaneous inj 1350 pfu/0.5ml	P				
VAXNEUVANCE- pneumococcal 15-valent conjugate vaccine sus pref syr 0.5 ml	P				
VIVOTIF- typhoid vaccine cap delayed release	NP				
<b>TOXOIDS</b>					
ADACEL- tet tox-diph-acell pertuss ad inj 5-2-15.5 lf-lf-mcg/0.5ml	P				
BOOSTRIX- tet tox-diph-acell pertuss ad inj 5-2.5-18.5 lf-lf-mcg/0.5ml	P				
BOOSTRIX- tet-diph-acell pertuss ad pref syr 5-2.5-18.5 lf-mcg/0.5ml	P				
DAPTACEL- diph, acellular pert & tet tox inj 15 lf-23 mcg-5 lf/0.5ml	P				
INFANRIX- diph, acellular pert & tet tox inj 25 lf-58 mcg-10 lf/0.5ml	P				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
KINRIX- diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml	P				
PEDIARIX- diph-tet tox-acell pert-hep b-polio ipv vac susp pref syr	P				
PENTACEL- diph-ac per-tet tox ad-poliov-haemoph b poly vac for im susp	P				
QUADRACEL- diph-tetanus tox ad-acell pert & polio virus, ipv vac inj	P				
QUADRACEL- diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml	P				
TDVAX- tetanus-diphtheria toxoids (td) inj 2-2 lf/0.5ml	P				
TENIVAC- tetanus-diphtheria toxoids (td) inj 5-2 lfu	P				
VAXELIS- diph-tet tox-ac pert ad-polio ipv-hib-hep b rec susp pre syr	P				
VAXELIS- diph-tet tox-ac pert ad-polio ipv-hib-hepatitis b recomb susp	P				
<b>BIOLOGICALS MISC</b>					
GRASTEK- timothy grass pollen allergen ext sl tab 2800 bau	NP		•		•
ODACTRA- dust mite mixed ext sl tab 12 sq-hdm	NP		•		•
ORALAIR- grass mixed pollen ext sl tab 300 ir (index of reactivity)	NP		•		•
PALFORZIA INITIAL DOSE ES- peanut powder-dnfp starter pack 0.5 & 1 & 1.5 & 3 & 6 mg	NP	•	•		•
PALFORZIA LEVEL 1- peanut powder-dnfp cap sprinkle pack 3 x 1 mg (3 mg dose)	NP	•	•		•
PALFORZIA LEVEL 10- peanut powder-dnfp pack 2 x 20 mg & 2 x 100 mg (240 mg dose)	NP	•	•		•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
PALFORZIA LEVEL 11 (MAINT- peanut allergen powder-dnfp maintenance packet 300 mg)	NP	•	•		•	ACTIMMUNE- interferon gamma-1b inj 100 mcg/0.5ml (2000000 unit/0.5ml)	P	•			
PALFORZIA LEVEL 11 (TITRA- peanut allergen powder-dnfp titration packet 300 mg)	NP	•	•		•	AFINITOR- everolimus tab 2.5 mg, 5 mg, 7.5 mg, 10 mg	NP	•	•		•
PALFORZIA LEVEL 2- peanut powder-dnfp cap sprinkle pack 6 x 1 mg (6 mg dose)	NP	•	•		•	AFINITOR DISPERZ- everolimus tab for oral susp 2 mg, 3 mg, 5 mg	NP	•	•		•
PALFORZIA LEVEL 3- peanut powder-dnfp pack 2 x 1 mg & 10 mg (12 mg dose)	NP	•	•		•	ALECENSA- alectinib hcl cap 150 mg (base equivalent)	P	•	•		•
PALFORZIA LEVEL 4- peanut powder-dnfp cap sprinkle pack 20 mg (20 mg dose)	NP	•	•		•	ALUNBRIG- brigatinib tab initiation therapy pack 90 mg & 180 mg	P	•	•		•
PALFORZIA LEVEL 5- peanut powder-dnfp cap sprinkle pack 2 x 20 mg (40 mg dose)	NP	•	•		•	ALUNBRIG- brigatinib tab 30 mg, 90 mg, 180 mg	P	•	•		•
PALFORZIA LEVEL 6- peanut powder-dnfp cap sprinkle pack 4 x 20 mg (80 mg dose)	NP	•	•		•	<b>anastrozole tab 1 mg (Arimidex)</b>	p				
PALFORZIA LEVEL 7- peanut powder-dnfp pack 20 mg & 100 mg (120 mg dose)	NP	•	•		•	ARIMIDEX- anastrozole tab 1 mg	NP				
PALFORZIA LEVEL 8- peanut powder-dnfp pack 3 x 20 mg & 100 mg (160 mg dose)	NP	•	•		•	AROMASIN- exemestane tab 25 mg	NP				
PALFORZIA LEVEL 9- peanut powder-dnfp pack 2 x 100 mg (200 mg dose)	NP	•	•		•	AYVAKIT- avapritinib tab 25 mg, 50 mg, 100 mg, 200 mg, 300 mg	P	•	•		•
RAGWITEK- short ragweed pollen allergen extract sl tab 12 amb a 1-u	NP		•		•	BALVERSA- erdafitinib tab 3 mg, 4 mg, 5 mg	NP	•	•		•
<b>ANTINEOPLASTIC AGENTS</b>						BESREMI- ropeginterferon alfa-2b-njft soln prefilled syr 500 mcg/ml	NP	•	•		•
<b>ANTINEOPLASTICS</b>						<b>bexarotene cap 75 mg (Targretin)</b>	p	•	•		
<b>abiraterone acetate tab 250 mg, 500 mg (Zytiga)</b>	p	•	•		•	<b>bicalutamide tab 50 mg (Casodex)</b>	p	•			
						BOSULIF- bosutinib tab 100 mg, 400 mg, 500 mg	P	•	•		•
						BRAFTOVI- encorafenib cap 75 mg	NP	•	•		•
						BRUKINSA- zanubrutinib cap 80 mg	P	•	•		•
						CABOMETYX- cabozantinib s-malate tab 20 mg (base equivalent), 40 mg (base equivalent), 60 mg (base equivalent)	P	•	•		•
						CALQUENCE- acalabrutinib maleate tab 100 mg	P	•	•		•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CAMCEVI- leuprolide mesylate (6 month) emulsion prefilled syr 42 mg	NP	•			
<b>capecitabine tab 150 mg, 500 mg (Xeloda)</b>	p	•	•		
CAPRELSA- vandetanib tab 100 mg, 300 mg	P	•	•		•
CASODEX- bicalutamide tab 50 mg	NP	•			
COMETRIQ- cabozantinib s-mal cap 1 x 80 mg & 1 x 20 mg (100 dose) kit	P	•	•		•
COMETRIQ- cabozantinib s-mal cap 1 x 80 mg & 3 x 20 mg (140 dose) kit	P	•	•		•
COMETRIQ- cabozantinib s-malate cap 3 x 20 mg (60 mg dose) kit	P	•	•		•
COPIKTRA- duvelisib cap 15 mg, 25 mg	NP	•	•		•
COTELLIC- cobimetinib fumarate tab 20 mg (base equivalent)	P	•	•		•
CYCLOPHOSPHAMIDE- cyclophosphamide cap 25 mg, 50 mg	NP	•			
CYCLOPHOSPHAMIDE- cyclophosphamide tab 25 mg, 50 mg	NP	•			
<b>cyclophosphamide cap 25 mg, 50 mg (Cyclophosphamide)</b>	p	•			
DAURISMO- glasdegib maleate tab 25 mg (base equivalent), 100 mg (base equivalent)	NP	•	•		•
ELIGARD- leuprolide acetate (3 month) for subcutaneous inj kit 22.5mg	P	•			
ELIGARD- leuprolide acetate (4 month) for subcutaneous inj kit 30 mg	P	•			
ELIGARD- leuprolide acetate (6 month) for subcutaneous inj kit 45 mg	P	•			

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ELIGARD- leuprolide acetate for subcutaneous inj kit 7.5 mg	P	•			
EMCYT- estramustine phosphate sodium cap 140 mg	P	•			
ERIVEDGE- vismodegib cap 150 mg	P	•	•		•
ERLEADA- apalutamide tab 60 mg, 240 mg	P	•	•		•
<b>erlotinib hcl tab 25 mg (base equivalent), 100 mg (base equivalent), 150 mg (base equivalent) (Tarceva)</b>	p	•	•		•
ETOPOSIDE- etoposide cap 50 mg	P	•			
EULEXIN- flutamide cap 125 mg	NP	•			
<b>everolimus tab for oral susp 2 mg, 3 mg, 5 mg (Afinitor disperz)</b>	p	•	•		•
<b>everolimus tab 2.5 mg, 5 mg, 7.5 mg, 10 mg (Afinitor)</b>	p	•	•		•
<b>exemestane tab 25 mg (Aromasin)</b>	p				
EXKIVITY- mobocertinib succinate cap 40 mg	NP	•	•		•
FARESTON- toremifene citrate tab 60 mg (base equivalent)	NP	•			
FEMARA- letrozole tab 2.5 mg	NP				
FIRMAGON- degarelix acetate for inj 80 mg (base equiv), 120 mg/vial (240 mg dose)	P	•			
FOTIVDA- tivozanib hcl cap 0.89 mg (base equivalent), 1.34 mg (base equivalent)	NP	•	•		•
GAVRETO- pralsetinib cap 100 mg	NP	•	•		•
<b>gefitinib tab 250 mg (Iressa)</b>	p	•	•		•
GILOTRIF- afatinib dimaleate tab 20 mg (base equivalent), 30 mg (base equivalent), 40 mg (base equivalent)	P	•	•		•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
GLEEVEC- imatinib mesylate tab 100 mg (base equivalent), 400 mg (base equivalent)	NP	•	•		•	JAKAFI- ruxolitinib phosphate tab 5 mg (base equivalent), 10 mg (base equivalent), 15 mg (base equivalent), 20 mg (base equivalent), 25 mg (base equivalent)	P	•	•		•
GLEOSTINE- lomustine cap 10 mg, 40 mg, 100 mg	P	•				JAYPIRCA- pirtobrutinib tab 50 mg, 100 mg	NP	•	•		•
HYCAMTIN- topotecan hcl cap 0.25 mg (base equiv), 1 mg (base equiv)	P	•	•			KISQALI- ribociclib succinate tab pack 200 mg daily dose, 400 mg daily dose (200 mg tab), 600 mg daily dose (200 mg tab)	P	•	•		•
HYDREA- hydroxyurea cap 500 mg	NP	•				KISQALI FEMARA 200 DOSE- ribociclib 200 mg dose (200 mg tab) & letrozole 2.5 mg tbpk	P	•	•		•
<b>hydroxyurea cap 500 mg (Hydrea)</b>	p	•				KISQALI FEMARA 400 DOSE- ribociclib 400 mg dose (200 mg tab) & letrozole 2.5 mg tbpk	P	•	•		•
IBRANCE- palbociclib cap 75 mg, 100 mg, 125 mg	P	•	•		•	KISQALI FEMARA 600 DOSE- ribociclib 600 mg dose (200 mg tab) & letrozole 2.5 mg tbpk	P	•	•		•
IBRANCE- palbociclib tab 75 mg, 100 mg, 125 mg	P	•	•		•	KOSELUGO- selumetinib sulfate cap 10 mg, 25 mg	NP	•	•		•
ICLUSIG- ponatinib hcl tab 10 mg (base equiv), 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv)	P	•	•		•	KRAZATI- adagrasib tab 200 mg	NP	•	•		•
IDHIFA- enasidenib mesylate tab 50 mg (base equivalent), 100 mg (base equivalent)	NP	•	•		•	<b>lapatinib ditosylate tab 250 mg (base equiv) (Tykerb)</b>	p	•	•		•
<b>imatinib mesylate tab 100 mg (base equivalent), 400 mg (base equivalent) (Gleevec)</b>	p	•	•		•	LENVIMA 10 MG DAILY DOSE- lenvatinib cap therapy pack 10 mg (10 mg daily dose)	P	•	•		•
IMBRUVICA- ibrutinib cap 70 mg, 140 mg	P	•	•		•	LENVIMA 12MG DAILY DOSE- lenvatinib cap therapy pack 3 x 4 mg (12 mg daily dose)	P	•	•		•
IMBRUVICA- ibrutinib oral susp 70 mg/ml	P	•	•		•	LENVIMA 14 MG DAILY DOSE- lenvatinib cap therapy pack 10 & 4 mg (14 mg daily dose)	P	•	•		•
IMBRUVICA- ibrutinib tab 140 mg, 280 mg, 420 mg	P	•	•		•	LENVIMA 18 MG DAILY DOSE- lenvatinib cap ther pack 10 mg & 2 x 4 mg (18 mg daily dose)	P	•	•		•
INLYTA- axitinib tab 1 mg, 5 mg	P	•	•		•						
INQOVI- decitabine-cedazuridine tab 35-100 mg	NP	•	•		•						
INREBIC- fedratinib hcl cap 100 mg	NP	•	•		•						
IRESSA- gefitinib tab 250 mg	NP	•	•		•						

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands



Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
LENVIMA 20 MG DAILY DOSE- lenvatinib cap therapy pack 2 x 10 mg (20 mg daily dose)	P	•	•		•
LENVIMA 24 MG DAILY DOSE- lenvatinib cap ther pack 2 x 10 mg & 4 mg (24 mg daily dose)	P	•	•		•
LENVIMA 4 MG DAILY DOSE- lenvatinib cap therapy pack 4 mg (4 mg daily dose)	P	•	•		•
LENVIMA 8 MG DAILY DOSE- lenvatinib cap therapy pack 2 x 4 mg (8 mg daily dose)	P	•	•		•
<b>letrozole tab 2.5 mg (Femara)</b>	p				
<b>leucovorin calcium tab 5 mg, 15 mg, 25 mg</b>	p				
<b>leucovorin calcium tab 10 mg</b>	np				
LEUKERAN- chlorambucil tab 2 mg	P	•			
LEUPROLIDE ACETATE- leuprolide acetate (3 month) for inj 22.5 mg	P	•			
<b>leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)</b>	p	•			
LONSURF- trifluridine-tipiracil tab 15-6.14 mg, 20-8.19 mg	P	•	•		•
LORBRENA- lorlatinib tab 25 mg, 100 mg	NP	•	•		•
LUMAKRAS- sotorasib tab 120 mg, 320 mg	NP	•	•		•
LUPRON DEPOT (1-MONTH)- leuprolide acetate for inj kit 3.75 mg, 7.5 mg	P	•			
LUPRON DEPOT (3-MONTH)- leuprolide acetate (3 month) for inj kit 11.25 mg, 22.5 mg	P	•			
LUPRON DEPOT (4-MONTH)- leuprolide acetate (4 month) for inj kit 30 mg	P	•			

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
LUPRON DEPOT (6-MONTH)- leuprolide acetate (6 month) for inj kit 45 mg	P	•			
LYNPARZA- olaparib tab 100 mg, 150 mg	P	•	•		•
LYSODREN- mitotane tab 500 mg	P	•	•		
LYTGOBI- futibatinib tab therapy pack 4 mg (12 mg daily dose), 4 mg (16 mg daily dose), 4 mg (20 mg daily dose)	NP	•	•		•
MATULANE- procarbazine hcl cap 50 mg	P	•	•		
<b>megestrol acetate susp 40 mg/ml</b>	p				
<b>megestrol acetate tab 20 mg, 40 mg</b>	p				
MEKINIST- trametinib dimethyl sulfoxide for soln 0.05 mg/ml (base eq)	P	•	•		•
MEKINIST- trametinib dimethyl sulfoxide tab 0.5 mg (base equivalent), 2 mg (base equivalent)	P	•	•		•
MEKTOVI- binimetinib tab 15 mg	NP	•	•		•
MELPHALAN- melphalan tab 2 mg	P	•			
<b>mercaptopurine tab 50 mg</b>	p	•			
MESNEX- mesna tab 400 mg	P				
METHOTREXATE SODIUM- methotrexate sodium inj 250 mg/10ml (25 mg/ml)	P				
<b>methotrexate sodium for inj 1 gm</b>	p				
<b>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml), 250 mg/10ml (25 mg/ml), 1000 mg/40ml (25 mg/ml)</b>	p				
<b>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</b>	p				
<b>methotrexate sodium tab 2.5 mg (base equiv)</b>	p				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
MYLERAN- busulfan tab 2 mg	P	•				QINLOCK- ripretinib tab 50 mg	NP	•	•		•
NERLYNX- neratinib maleate tab 40 mg (base equivalent)	NP	•	•		•	RETEVMO- selpercatinib cap 40 mg, 80 mg	P	•	•		•
NEXAVAR- sorafenib tosylate tab 200 mg (base equivalent)	NP	•	•		•	REZLIDHIA- olutasidenib cap 150 mg	NP	•	•		•
NILANDRON- nilutamide tab 150 mg	NP	•				ROZLYTREK- entrectinib cap 100 mg, 200 mg	P	•	•		•
<b>nilutamide tab 150 mg (Nilandron)</b>	p	•				RUBRACA- rucaparib camsylate tab 200 mg (base equivalent), 250 mg (base equivalent), 300 mg (base equivalent)	P	•	•		•
NINLARO- ixazomib citrate cap 2.3 mg (base equivalent), 3 mg (base equivalent), 4 mg (base equivalent)	P	•	•		•	RYDAPT- midostaurin cap 25 mg	P	•	•		•
NUBEQA- darolutamide tab 300 mg	P	•	•		•	SCEMBLIX- asciminib hcl tab 20 mg, 40 mg	NP	•	•		•
ODOMZO- sonidegib phosphate cap 200 mg (base equivalent)	P	•	•		•	SOLTAMOX- tamoxifen citrate oral soln 10 mg/5ml (base equivalent)	P				
ONUREG- azacitidine tab 200 mg, 300 mg	NP	•	•		•	<b>sorafenib tosylate tab 200 mg (base equivalent) (Nexavar)</b>	p	•	•		•
ORGOVYX- relugolix tab 120 mg	NP	•	•		•	SPRYCEL- dasatinib tab 20 mg, 50 mg, 70 mg, 80 mg, 100 mg, 140 mg	P	•	•		•
ORSERDU- elacestrant hydrochloride tab 86 mg, 345 mg	NP	•	•		•	STIVARGA- regorafenib tab 40 mg	P	•	•		•
<b>pazopanib hcl tab 200 mg (base equiv) (Votrient)</b>	p	•	•		•	<b>sunitinib malate cap 12.5 mg (base equivalent), 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent) (Sutent)</b>	p	•	•		•
PEMAZYRE- pemigatinib tab 4.5 mg, 9 mg, 13.5 mg	NP	•	•		•	SUTENT- sunitinib malate cap 12.5 mg (base equivalent), 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent)	NP	•	•		•
PIQRAY 200MG DAILY DOSE- alpelisib tab therapy pack 200 mg daily dose	P	•	•		•	TABLOID- thioguanine tab 40 mg	P	•			•
PIQRAY 250MG DAILY DOSE- alpelisib tab pack 250 mg daily dose (200 mg & 50 mg tabs)	P	•	•		•	TABRECTA- capmatinib hcl tab 150 mg, 200 mg	P	•	•		•
PIQRAY 300MG DAILY DOSE- alpelisib tab pack 300 mg daily dose (2x150 mg tab)	P	•	•		•	TAFINLAR- dabrafenib mesylate cap 50 mg (base equivalent), 75 mg (base equivalent)	P	•	•		•
POMALYST- pomalidomide cap 1 mg, 2 mg, 3 mg, 4 mg	P	•	•		•						
PURIXAN- mercaptopurine susp 2000 mg/100ml (20 mg/ml)	P	•									

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
TAFINLAR- dabrafenib mesylate tab for oral susp 10 mg (base equiv)	P	•	•		•	equiv), 10 mg (base equiv), 15 mg (base equiv)					
TAGRISSO- osimertinib mesylate tab 40 mg (base equivalent), 80 mg (base equivalent)	P	•	•		•	TUKYSA- tucatinib tab 50 mg, 150 mg	NP	•	•		•
TALZENNA- talazoparib tosylate cap 0.1 mg (base equivalent), 0.25 mg (base equivalent), 0.35 mg (base equivalent), 0.5 mg (base equivalent), 0.75 mg (base equivalent), 1 mg (base equivalent)	P	•	•		•	TURALIO- pexidartinib hcl cap 125 mg (base equivalent)	NP	•	•		•
<b>tamoxifen citrate tab 10 mg (base equivalent), 20 mg (base equivalent)</b>	p					TYKERB- lapatinib ditosylate tab 250 mg (base equiv)	NP	•	•		•
TARCEVA- erlotinib hcl tab 25 mg (base equivalent), 100 mg (base equivalent), 150 mg (base equivalent)	NP	•	•		•	VANFLYTA- quizartinib dihydrochloride tab 17.7 mg, 26.5 mg	NP	•	•		•
TARGRETIN- bexarotene cap 75 mg	NP	•	•			VENCLEXTA- venetoclax tab 10 mg, 50 mg, 100 mg	P	•	•		•
TASIGNA- nilotinib hcl cap 50 mg (base equivalent), 150 mg (base equivalent), 200 mg (base equivalent)	P	•	•		•	VENCLEXTA STARTING PACK- venetoclax tab therapy starter pack 10 & 50 & 100 mg	P	•	•		•
TAZVERIK- tazemetostat hbr tab 200 mg	NP	•	•		•	VERZENIO- abemaciclib tab 50 mg, 100 mg, 150 mg, 200 mg	P	•	•		•
<b>temozolomide cap 5 mg, 20 mg, 100 mg, 140 mg, 180 mg</b>	p	•	•			VITRAKVI- larotrectinib sulfate cap 25 mg (base equivalent), 100 mg (base equivalent)	P	•	•		•
<b>temozolomide cap 250 mg (Temodar)</b>	p	•	•			VITRAKVI- larotrectinib sulfate oral soln 20 mg/ml (base equivalent)	P	•	•		•
TEPMETKO- tepotinib hcl tab 225 mg	NP	•	•		•	VIZIMPRO- dacomitinib tab 15 mg, 30 mg, 45 mg	NP	•	•		•
TIBSOVO- ivosidenib tab 250 mg	P	•	•		•	VONJO- pacritinib citrate cap 100 mg	NP	•	•		•
<b>toremifene citrate tab 60 mg (base equivalent) (Fareston)</b>	p	•				VOTRIENT- pazopanib hcl tab 200 mg (base equiv)	NP	•	•		•
<b>tretinoin cap 10 mg</b>	p	•	•			WELIREG- belzutifan tab 40 mg	NP	•	•		•
TREXALL- methotrexate sodium tab 5 mg (base equiv), 7.5 mg (base equiv)	NP					XALKORI- crizotinib cap 200 mg, 250 mg	P	•	•		•
						XATMEP- methotrexate oral soln 2.5 mg/ml	NP				
						XELODA- capecitabine tab 150 mg, 500 mg	NP	•	•		
						XOSPATA- gilteritinib fumarate tablet 40 mg (base equivalent)	NP	•	•		•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
XPOVIO- selinexor tab therapy pack 40 mg (40 mg once weekly), 40 mg (40 mg twice weekly), 40 mg (80 mg once weekly), 50 mg (100 mg once weekly), 60 mg (60 mg once weekly)	NP	•	•		•
XPOVIO 60 MG TWICE WEEKLY- selinexor tab therapy pack 20 mg (60 mg twice weekly)	NP	•	•		•
XPOVIO 80 MG TWICE WEEKLY- selinexor tab therapy pack 20 mg (80 mg twice weekly)	NP	•	•		•
XTANDI- enzalutamide cap 40 mg	P	•	•		•
XTANDI- enzalutamide tab 40 mg, 80 mg	P	•	•		•
YONSA- abiraterone acetate micronized tab 125 mg	P	•	•		•
ZEJULA- niraparib tosylate tab 100 mg (base equivalent), 200 mg (base equivalent), 300 mg (base equivalent)	P	•	•		•
ZELBORAF- vemurafenib tab 240 mg	P	•	•		•
ZOLINZA- vorinostat cap 100 mg	P	•	•		•
ZYDELIG- idelalisib tab 100 mg, 150 mg	P	•	•		•
ZYKADIA- ceritinib tab 150 mg	P	•	•		•
ZYTIGA- abiraterone acetate tab 250 mg, 500 mg	NP	•	•		•
<b>ENDOCRINE AND METABOLIC DRUGS</b>					
<b>CORTICOSTEROIDS</b>					
ALKINDI SPRINKLE- hydrocortisone cap sprinkle 0.5 mg, 1 mg, 2 mg, 5 mg	NP	•			
<b>budesonide delayed release particles cap 3 mg</b>	p				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>budesonide tab er 24hr 9 mg (Uceris)</b>	np				
CORTEF- hydrocortisone tab 5 mg, 10 mg, 20 mg	NP				
CORTISONE ACETATE- cortisone acetate tab 25 mg	NP				
DEXABLISS- dexamethasone tab therapy pack 1.5 mg (39)	NP				
DEXAMETHASONE- dexamethasone soln 0.5 mg/5ml	P				
<b>dexamethasone elixir 0.5 mg/5ml</b>	p				
DEXAMETHASONE INTENSOL- dexamethasone conc 1 mg/ml	P				
<b>dexamethasone tab therapy pack 1.5 mg (21)</b>	np				
<b>dexamethasone tab 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg</b>	p				
DEXAMETHASONE 10-DAY DOSE- dexamethasone tab therapy pack 1.5 mg (35)	NP				
DEXAMETHASONE 13-DAY DOSE- dexamethasone tab therapy pack 1.5 mg (51)	NP				
EMFLAZA- deflazacort susp 22.75 mg/ml	NP	•	•		
EMFLAZA- deflazacort tab 6 mg, 18 mg	NP	•	•		•
EMFLAZA- deflazacort tab 30 mg, 36 mg	NP	•	•		
<b>fludrocortisone acetate tab 0.1 mg</b>	p				
HEMADY- dexamethasone tab 20 mg	NP				
<b>hydrocortisone tab 5 mg, 10 mg, 20 mg (Cortef)</b>	p				
MEDROL- methylprednisolone tab 2 mg, 4 mg, 8 mg, 16 mg	NP				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
MEDROL DOSEPAK- methylprednisolone tab therapy pack 4 mg (21)	NP				
<b>methylprednisolone tab therapy pack 4 mg (21) (Medrol dosepak)</b>	p				
<b>methylprednisolone tab 4 mg, 8 mg, 16 mg, 32 mg (Medrol)</b>	p				
ORAPRED ODT- prednisolone sod phos orally disintegr tab 10 mg (base eq), 15 mg (base eq), 30 mg (base eq)	NP				
PEDIAPRED- prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)	NP				
<b>prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base) (Pediapred)</b>	p				
<b>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</b>	p				
<b>prednisolone sod phosphate oral soln 10 mg/5ml (base equiv), 20 mg/5ml (base equiv)</b>	np				
PREDNISOLONE SODIUM PHOSP- prednisolone sod phos orally disintegr tab 10 mg (base eq), 15 mg (base eq), 30 mg (base eq)	NP				
<b>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</b>	np				
<b>prednisolone soln 15 mg/5ml</b>	p				
<b>prednisolone tab 5 mg</b>	np				
PREDNISON- prednisone oral soln 5 mg/5ml	P				
PREDNISON INTENSOL- prednisone conc 5 mg/ml	NP				
<b>prednisone tab therapy pack 5 mg (21), 5 mg (48), 10 mg (21), 10 mg (48)</b>	p				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>prednisone tab 1 mg, 2.5 mg, 5 mg, 10 mg, 20 mg, 50 mg</b>	p				
RAYOS- prednisone tab delayed release 1 mg, 2 mg, 5 mg	NP		•		
TAPERDEX 12-DAY- dexamethasone tab therapy pack 1.5 mg (49)	NP				
TAPERDEX 7-DAY- dexamethasone tab therapy pack 1.5 mg (27)	NP				
TARPEYO- budesonide delayed release cap 4 mg	NP		•		•
UCERIS- budesonide tab er 24hr 9 mg	NP				
<b>ANDROGEN-ANABOLIC</b>					
ANDRODERM- testosterone td patch 24hr 2 mg/24hr, 4 mg/24hr	NP		•		•
ANDROGEL PUMP- testosterone td gel 20.25 mg/act (1.62%)	NP		•		•
<b>danazol cap 50 mg, 100 mg, 200 mg</b>	p		•		
FORTESTA- testosterone td gel 10mg/act (2%)	NP		•		•
JATENZO- testosterone undecanoate cap 158 mg, 198 mg, 237 mg	NP		•		•
KYZATREX- testosterone undecanoate cap 100 mg, 150 mg, 200 mg	NP		•		•
METHITEST- methyltestosterone oral tab 10 mg	NP		•		•
<b>methyltestosterone cap 10 mg</b>	np		•		•
NATESTO- testosterone nasal gel 5.5 mg/act	NP		•		•
TESTIM- testosterone td gel 50 mg/5gm (1%)	NP		•		•
TESTOSTERONE- testosterone td gel 50 mg/5gm (1%)	NP		•		•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>testosterone cypionate im inj in oil 100 mg/ml, 200 mg/ml (Depo-testosterone)</b>	p		•		•	BIJUVA- estradiol-progesterone cap 0.5-100 mg, 1-100 mg	NP				
TESTOSTERONE ENANTHATE- testosterone enanthate im inj in oil 200 mg/ml	P		•		•	CLIMARA- estradiol td patch weekly 0.025 mg/24hr, 0.0375 mg/24hr (37.5 mcg/24hr), 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr	NP				•
TESTOSTERONE PUMP- testosterone td gel 12.5 mg/act (1%)	NP		•		•	CLIMARA PRO- estradiol-levonorgestrel td patch weekly 0.045-0.015 mg/day	P				•
<b>testosterone td gel 25 mg/2.5gm (1%), 50 mg/5gm (1%) (AndroGel)</b>	p		•		•	COMBIPATCH- estradiol-norethindrone ace td pttw 0.05-0.14 mg/day, 0.05-0.25 mg/day	NP				•
<b>testosterone td gel 12.5 mg/act (1%)</b>	p		•		•	DELESTROGEN- estradiol valerate im in oil 10 mg/ml, 20 mg/ml, 40 mg/ml	NP				
<b>testosterone td gel 20.25 mg/1.25gm (1.62%), 40.5 mg/2.5gm (1.62%) (AndroGel)</b>	np		•		•	DEPO-ESTRADIOL- estradiol cypionate im in oil 5 mg/ml	NP				
<b>testosterone td gel 20.25 mg/act (1.62%) (AndroGel pump)</b>	p		•		•	DIVIGEL- estradiol td gel 0.25 mg/0.25gm (0.1%), 0.5 mg/0.5gm (0.1%), 0.75 mg/0.75gm (0.1%), 1 mg/gm (0.1%), 1.25 mg/1.25gm (0.1%)	NP				•
<b>testosterone td gel 10mg/act (2%) (Fortesta)</b>	np		•		•	DUAVEE- conjugated estrogens-bazedoxifene tab 0.45-20 mg	P				
<b>testosterone td soln 30 mg/act</b>	p		•		•	ELESTRIN- estradiol gel 0.06% (0.52 mg/0.87 gm metered-dose pump)	NP				•
TLANDO- testosterone undecanoate cap 112.5 mg	NP		•		•	ESTRACE- estradiol tab 0.5 mg, 1 mg, 2 mg	NP				
VOGELXO- testosterone td gel 50 mg/5gm (1%)	NP		•		•	<b>estradiol &amp; norethindrone acetate tab 0.5-0.1 mg</b>	p				
VOGELXO PUMP- testosterone td gel 12.5 mg/act (1%)	NP		•		•	<b>estradiol &amp; norethindrone acetate tab 1-0.5 mg (Activella)</b>	p				
XYOSTED- testosterone enanthate solution auto-injector 50 mg/0.5ml, 75 mg/0.5ml, 100 mg/0.5ml	NP		•		•	<b>estradiol tab 0.5 mg, 1 mg, 2 mg (Estrace)</b>	p				
<b>ESTROGENS</b>											
ACTIVELLA- estradiol & norethindrone acetate tab 1-0.5 mg	NP										
ALORA- estradiol td patch twice weekly 0.025 mg/24hr, 0.075 mg/24hr	NP				•						
ANGELIQ- drospirenone-estradiol tab 0.25-0.5 mg, 0.5-1 mg	NP										

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>estradiol td gel 0.25 mg/0.25gm (0.1%), 0.5 mg/0.5gm (0.1%), 0.75 mg/0.75gm (0.1%), 1 mg/gm (0.1%), 1.25 mg/1.25gm (0.1%) (Divigel)</b>	p				•
<b>estradiol td patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr (Vivelle-dot)</b>	p				•
<b>estradiol td patch weekly 0.025 mg/24hr, 0.0375 mg/24hr (37.5 mcg/24hr), 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr (Climara)</b>	p				•
<b>estradiol valerate im in oil 10 mg/ml, 20 mg/ml, 40 mg/ml (Delestrogen)</b>	np				
<b>ESTROGEL- estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose pump)</b>	P				•
<b>EVAMIST- estradiol transdermal spray 1.53 mg/spray</b>	NP				•
<b>MENEST- esterified estrogens tab 0.3 mg, 0.625 mg, 1.25 mg, 2.5 mg</b>	NP				
<b>MENOSTAR- estradiol td patch weekly 14 mcg/24hr</b>	NP				•
<b>MINIVELLE- estradiol td patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr</b>	NP				•
<b>MYFEMBREE- relugolix-estradiol-norethindrone acetate tab 40-1-0.5 mg</b>	P		•		•
<b>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg, 1 mg-5 mcg</b>	p				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>ORIAHNN- elagolix-estradiol-noreth 300-1-0.5mg &amp; elagolix 300mg cap pack</b>	P		•		•
<b>PREMARIN- estrogens, conjugated tab 0.3 mg, 0.45 mg, 0.625 mg, 0.9 mg, 1.25 mg</b>	P				
<b>PREMPHASE- conj est 0.625(14)/ conj est-medroxypro ac tab 0.625-5mg(14)</b>	P				
<b>PREMPRO- conjugated estrogen-medroxyprogesterone acetate tab 0.3-1.5 mg, 0.45-1.5 mg, 0.625-2.5 mg, 0.625-5 mg</b>	P				
<b>VIVELLE-DOT- estradiol td patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr</b>	NP				•
<b>CONTRACEPTIVES</b>					
<b>ANNOVERA- segesterone ace-ethinyl estradiol va ring 0.15-0.013 mg/24hr</b>	NP				
<b>BALCOLTRA- levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21)</b>	NP				
<b>BEYAZ- drospirenone-ethinyl estradiol-levomefolate tab 3-0.02-0.451 mg</b>	NP				
<b>DEPO-PROVERA CONTRACEPTIV-medroxyprogesterone acetate im susp prefilled syr 150 mg/ml</b>	NP				
<b>DEPO-PROVERA CONTRACEPTIV-medroxyprogesterone acetate im susp 150 mg/ml</b>	NP				
<b>DEPO-SUBQ PROVERA 104-medroxyprogesterone acetate susp pref syr 104 mg/0.65ml</b>	NP				
<b>desogest-eth estradiol &amp; eth estradiol tab 0.15-0.02/0.01 mg(21/5) (Mircette)</b>	p				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>desogestrel &amp; ethinyl estradiol tab 0.15 mg-30 mcg</b>	p				
<b>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg (Beyaz)</b>	np				
<b>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg (Safyral)</b>	np				
<b>drospirenone-ethinyl estradiol tab 3-0.02 mg (Yaz)</b>	p				
<b>drospirenone-ethinyl estradiol tab 3-0.03 mg (Yasmin 28)</b>	p				
ELLA- ulipristal acetate tab 30 mg	P				
<b>ethynodiol diacetate &amp; ethinyl estradiol tab 1 mg-35 mcg, 1 mg-50 mcg</b>	p				
<b>levonor-eth est tab 0.15-0.02/0.025/0.03 mg &amp; eth est 0.01 mg (Quartette)</b>	np				
<b>levonorg-eth est tab 0.1-0.02mg(84) &amp; eth est tab 0.01mg(7) (Loseasonique)</b>	p				
<b>levonorg-eth est tab 0.15-0.03mg(84) &amp; eth est tab 0.01mg(7) (Seasonique)</b>	p				
<b>levonorgestrel &amp; ethinyl estradiol (91-day) tab 0.15-0.03 mg</b>	p				
<b>levonorgestrel &amp; ethinyl estradiol tab 0.1 mg-20 mcg, 0.15 mg-30 mcg</b>	p				
<b>levonorgestrel tab 1.5 mg</b>	np				
<b>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</b>	p				
<b>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</b>	np				
<b>levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21) (Balcoltra)</b>	np				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
LO LOESTRIN FE- norethin-eth estradiol-fe tab 1 mg-10 mcg (24)/10 mcg (2)	P				
<b>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml (Depo-provera contrac)</b>	p				
<b>medroxyprogesterone acetate im susp 150 mg/ml (Depo-provera contrac)</b>	p				
MINASTRIN 24 FE- norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)	NP				
MIRENA- levonorgestrel iud 20 mcg/day (initial) (52 mg total)	P				
NATAZIA- estradiol valerate-dienogest tab 3 mg /2-2 mg/2-3 mg/1 mg	NP				
NEXTSTELLIS- drospirenone-estetrol tab 3-14.2 mg	NP				
<b>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</b>	p				
<b>norethindrone &amp; ethinyl estradiol tab 0.4 mg-35 mcg, 0.5 mg-35 mcg, 1 mg-35 mcg</b>	p				
<b>norethindrone &amp; ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</b>	p				
<b>norethindrone &amp; ethinyl estradiol-fe chew tab 0.8 mg-25 mcg (Generess fe)</b>	np				
<b>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg</b>	p				
<b>norethindrone ace &amp; ethinyl estradiol tab 1 mg-20 mcg, 1.5 mg-30 mcg</b>	p				
<b>norethindrone ace &amp; ethinyl estradiol-fe tab 1 mg-20 mcg, 1.5 mg-30 mcg</b>	p				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands



Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24) (Minastrin 24 fe)</b>	np				
<b>norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24) (Taytulla)</b>	np				
<b>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</b>	np				
<b>norethindrone tab 0.35 mg</b>	p				
<b>norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg, 0.5-35/1-35/0.5-35 mg-mcg</b>	p				
<b>norgestimate &amp; ethinyl estradiol tab 0.25 mg-35 mcg</b>	p				
<b>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg, 0.18-35/0.215-35/0.25-35 mg-mcg</b>	p				
<b>norgestrel &amp; ethinyl estradiol tab 0.3 mg-30 mcg</b>	p				
<b>NUVARING- etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr</b>	p				
<b>SAFYRAL- drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</b>	NP				
<b>SKYLA- levonorgestrel releasing iud 14 mcg/day (13.5 mg total)</b>	P				
<b>SLYND- drospirenone tab 4 mg</b>	NP				
<b>TAYTULLA- norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24)</b>	NP				
<b>TWIRLA- levonorgestrel-ethinyl estradiol td ptwk 120-30 mcg/24hr</b>	NP				
<b>TYBLUME- levonorgestrel &amp; ethinyl estradiol chew tab 0.1 mg-20 mcg</b>	P				
<b>VELIVET- desogest-ethin est tab 0.1-0.025/0.125-0.025/0.15-0.025mg-mg</b>	P				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>YASMIN 28- drospirenone-ethinyl estradiol tab 3-0.03 mg</b>	NP				
<b>YAZ- drospirenone-ethinyl estradiol tab 3-0.02 mg</b>	NP				
<b>PROGESTINS</b>					
<b>medroxyprogesterone acetate tab 2.5 mg, 5 mg, 10 mg (Provera)</b>	p				
<b>megestrol acetate susp 625 mg/5ml</b>	np				
<b>norethindrone acetate tab 5 mg (Aygestin)</b>	p				
<b>progesterone cap 100 mg, 200 mg (Prometrium)</b>	p				
<b>progesterone im in oil 50 mg/ml</b>	np				
<b>PROMETRIUM- progesterone cap 100 mg, 200 mg</b>	NP				
<b>PROVERA- medroxyprogesterone acetate tab 2.5 mg, 5 mg, 10 mg</b>	NP				
<b>ANTIDIABETICS</b>					
<b>Antidiabetics</b>					
<b>acarbose tab 25 mg, 50 mg, 100 mg (Precose)</b>	p				
<b>ACTOPLUS MET- pioglitazone hcl-metformin hcl tab 15-850 mg</b>	NP				
<b>ACTOS- pioglitazone hcl tab 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv)</b>	NP				
<b>ALOGLIPTIN- alogliptin benzoate tab 6.25 mg (base equiv), 12.5 mg (base equiv), 25 mg (base equiv)</b>	NP			•	•
<b>ALOGLIPTIN/METFORMIN HCL- alogliptin-metformin hcl tab 12.5-500 mg</b>	NP			•	•
<b>ALOGLIPTIN/METFORMIN HYDR- alogliptin-metformin hcl tab 12.5-1000 mg</b>	NP			•	•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ALOGLIPTIN/PIOGLITAZONE- alogliptin-pioglitazone tab 12.5-30 mg, 25-15 mg, 25-30 mg, 25-45 mg	NP			•	•
BAQSIMI ONE PACK- glucagon nasal powder 3 mg/dose	P				
BAQSIMI TWO PACK- glucagon nasal powder 3 mg/dose	P				
BEXAGLIFLOZIN- bexagliflozin tab 20 mg	NP			•	•
BRENZAVVY- bexagliflozin tab 20 mg	NP			•	•
BYDUREON BCISE- exenatide extended release susp auto-injector 2 mg/0.85ml	NP		•		•
BYETTA- exenatide soln pen-injector 5 mcg/0.02ml, 10 mcg/0.04ml	NP		•		•
CYCLOSET- bromocriptine mesylate tab 0.8 mg (base equivalent)	NP				
<b>diazoxide susp 50 mg/ml (Proglycem)</b>	p				
DUETACT- pioglitazone hcl- glimepiride tab 30-2 mg, 30-4 mg	NP				
FARXIGA- dapagliflozin propanediol tab 5 mg (base equivalent), 10 mg (base equivalent)	P				•
<b>glimepiride tab 1 mg, 2 mg, 4 mg (Amaryl)</b>	p				
GLIPIZIDE- glipizide tab 2.5 mg	NP				
<b>glipizide tab er 24hr 2.5 mg, 5 mg, 10 mg (Glucotrol xl)</b>	p				
<b>glipizide tab 5 mg, 10 mg</b>	p				
<b>glipizide-metformin hcl tab 2.5-250 mg, 2.5-500 mg, 5-500 mg</b>	p				
GLUCAGEN HYPOKIT- glucagon hcl (rdna) for inj 1 mg (base equiv)	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
GLUCAGON EMERGENCY KIT FO- glucagon (rdna) for inj kit 1 mg	P				
GLUCAGON EMERGENCY KIT FO- glucagon hcl for inj 1 mg	P				
GLUCOTROL XL- glipizide tab er 24hr 2.5 mg, 5 mg, 10 mg	NP				
GLUMETZA- metformin hcl tab er 24hr modified release 500 mg, 1000 mg	NP			•	•
GLYBURIDE MICRONIZED- glyburide micronized tab 1.5 mg, 3 mg, 6 mg	P				
<b>glyburide tab 1.25 mg, 2.5 mg, 5 mg</b>	p				
<b>glyburide-metformin tab 1.25-250 mg, 2.5-500 mg, 5-500 mg</b>	p				
GLYXAMBI- empagliflozin-linagliptin tab 10-5 mg, 25-5 mg	P				•
GVOKE HYPOPEN 1- PACK- glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml, 1 mg/0.2ml	P				
GVOKE HYPOPEN 2- PACK- glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml, 1 mg/0.2ml	P				
GVOKE KIT- glucagon subcutaneous soln 1 mg/0.2ml	P				
GVOKE PFS- glucagon subcutaneous soln pref syringe 0.5 mg/0.1ml, 1 mg/0.2ml	P				
INVOKAMET- canagliflozin-metformin hcl tab 50-500 mg, 50-1000 mg, 150-500 mg, 150-1000 mg	NP			•	•
INVOKAMET XR- canagliflozin- metformin hcl tab er 24hr 50-500 mg, 50-1000 mg, 150-500 mg, 150-1000 mg	NP			•	•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
INVOKANA- canagliflozin tab 100 mg, 300 mg	NP			•	•	MOUNJARO- tirzepatide soln pen-injector 2.5 mg/0.5ml, 5 mg/0.5ml, 7.5 mg/0.5ml, 10 mg/0.5ml, 12.5 mg/0.5ml, 15 mg/0.5ml	P		•		•
JANUMET- sitagliptin-metformin hcl tab 50-500 mg, 50-1000 mg	P				•	<b>nateglinide tab 60 mg, 120 mg</b>	p				
JANUMET XR- sitagliptin-metformin hcl tab er 24hr 50-500 mg, 50-1000 mg, 100-1000 mg	P				•	ONGLYZA- saxagliptin hcl tab 2.5 mg (base equiv), 5 mg (base equiv)	NP			•	•
JANUVIA- sitagliptin phosphate tab 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv)	P				•	OZEMPIC- semaglutide soln pen-inj 0.25 or 0.5 mg/dose (2 mg/3ml), 1 mg/dose (4 mg/3ml), 2 mg/dose (8 mg/3ml)	P		•		•
JARDIANCE- empagliflozin tab 10 mg, 25 mg	P				•	<b>pioglitazone hcl tab 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv) (Actos)</b>	p				
JENTADUETO- linagliptin-metformin hcl tab 2.5-500 mg, 2.5-850 mg, 2.5-1000 mg	NP			•	•	<b>pioglitazone hcl-glimepiride tab 30-2 mg, 30-4 mg (Duetact)</b>	np				
JENTADUETO XR- linagliptin-metformin hcl tab er 24hr 2.5-1000 mg, 5-1000 mg	NP			•	•	<b>pioglitazone hcl-metformin hcl tab 15-500 mg, 15-850 mg (Actoplus met)</b>	p				
KOMBIGLYZE XR- saxagliptin-metformin hcl tab er 24hr 2.5-1000 mg, 5-500 mg, 5-1000 mg	NP			•	•	PROGLYCEM- diazoxide susp 50 mg/ml	NP				
KORLYM- mifepristone tab 300 mg	NP	•	•		•	QTERN- dapagliflozin-saxagliptin tab 5-5 mg, 10-5 mg	NP			•	•
<b>metformin hcl oral soln 500 mg/5ml (Riomet)</b>	np					<b>repaglinide tab 0.5 mg, 1 mg, 2 mg</b>	p				
<b>metformin hcl tab er 24hr 500 mg, 750 mg</b>	p				•	RIOMET- metformin hcl oral soln 500 mg/5ml	NP				
<b>metformin hcl tab er 24hr osmotic 500 mg, 1000 mg</b>	np			•	•	RYBELSUS- semaglutide tab 3 mg, 7 mg, 14 mg	P		•		•
<b>metformin hcl tab er 24hr modified release 500 mg, 1000 mg (Glumetza)</b>	np			•	•	<b>saxagliptin hcl tab 2.5 mg (base equiv), 5 mg (base equiv) (Onglyza)</b>	np				•
<b>metformin hcl tab 500 mg, 850 mg, 1000 mg</b>	p					<b>saxagliptin-metformin hcl tab er 24hr 2.5-1000 mg, 5-500 mg, 5-1000 mg (Kombiglyze xr)</b>	np				•
METFORMIN HYDROCHLORIDE- metformin hcl tab 625 mg	NP					SEGLUROMET- ertugliflozin-metformin hcl tab 2.5-500 mg,	NP			•	•
MIGLITOL- miglitol tab 25 mg, 50 mg, 100 mg	NP										

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
2.5-1000 mg, 7.5-500 mg, 7.5-1000 mg					
SOLIQUA 100/33- insulin glargine-lixisenatide sol pen-inj 100-33 unit-mcg/ml	P			•	•
STEGLATRO- ertugliflozin l-pyroglytamic acid tab 5 mg (base equiv), 15 mg (base equiv)	NP			•	•
STEGLUJAN- ertugliflozin-sitagliptin tab 5-100 mg, 15-100 mg	NP			•	•
SYMLINPEN 120- pramlintide acetate pen-inj 2700 mcg/2.7ml (1000 mcg/ml)	NP				
SYMLINPEN 60- pramlintide acetate pen-inj 1500 mcg/1.5ml (1000 mcg/ml)	NP				
SYNJARDY- empagliflozin-metformin hcl tab 5-500 mg, 5-1000 mg, 12.5-500 mg, 12.5-1000 mg	P				•
SYNJARDY XR- empagliflozin-metformin hcl tab er 24hr 5-1000 mg, 10-1000 mg, 12.5-1000 mg, 25-1000 mg	P				•
TRADJENTA- linagliptin tab 5 mg	NP			•	•
TRIJARDY XR- empagliflozin-linaglip-metformin tab er 24hr 12.5-2.5-1000mg	P				•
TRIJARDY XR- empagliflozin-linagliptin-metformin tab er 24hr 5-2.5-1000mg, 10-5-1000 mg, 25-5-1000 mg	P				•
TRULICITY- dulaglutide soln pen-injector 0.75 mg/0.5ml, 1.5 mg/0.5ml, 3 mg/0.5ml, 4.5 mg/0.5ml	P		•		•
VICTOZA- liraglutide soln pen-injector 18 mg/3ml (6 mg/ml)	NP		•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
XIGDUO XR- dapagliflozin prop-metformin hcl tab er 24hr 2.5-1000 mg, 5-500 mg, 5-1000 mg, 10-500 mg, 10-1000 mg	P				•
XULTOPHY 100/3.6- insulin degludec-liraglutide sol pen-inj 100-3.6 unit-mg/ml	P			•	•
ZEGALOGUE- dasiglucagon hcl subcutaneous soln auto-inj 0.6 mg/0.6ml	P				
ZEGALOGUE- dasiglucagon hcl subcutaneous soln pref syringe 0.6 mg/0.6ml	P				
<b>Rapid-Acting Insulins</b>					
ADMELOG- insulin lispro inj soln 100 unit/ml	NP		•		•
ADMELOG SOLOSTAR- insulin lispro soln pen-injector 100 unit/ml (1 unit dial)	NP		•		•
APIDRA- insulin glulisine inj 100 unit/ml	NP		•		•
APIDRA SOLOSTAR- insulin glulisine soln pen-injector inj 100 unit/ml	NP		•		•
FIASP- insulin aspart (with niacinamide) inj 100 unit/ml	P				•
FIASP FLEXTOUCH- insulin aspart (with niacinamide) sol pen-inj 100 unit/ml	P				•
FIASP PENFILL- insulin aspart (with niacinamide) soln cartridge 100 unit/ml	P				•
HUMALOG- insulin lispro inj soln 100 unit/ml	NP		•		•
HUMALOG- insulin lispro soln cartridge 100 unit/ml	NP		•		•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
HUMALOG JUNIOR KWIKPEN- insulin lispro soln pen-injector 100 unit/ml (0.5 unit dial)	NP		•		•
HUMALOG KWIKPEN- insulin lispro soln pen-injector 100 unit/ml (1 unit dial), 200 unit/ml	NP		•		•
HUMALOG TEMPO PEN- insulin lispro soln pen-inj w/transmitter port 100 unit/ml	NP		•		•
INSULIN ASPART- insulin aspart inj soln 100 unit/ml	NP		•		•
INSULIN ASPART FLEXPEN- insulin aspart soln pen-injector 100 unit/ml	NP		•		•
INSULIN ASPART PENFILL- insulin aspart soln cartridge 100 unit/ml	NP		•		•
INSULIN LISPRO- insulin lispro inj soln 100 unit/ml	NP		•		•
INSULIN LISPRO JUNIOR KWI- insulin lispro soln pen-injector 100 unit/ml (0.5 unit dial)	NP		•		•
INSULIN LISPRO KWIKPEN- insulin lispro soln pen-injector 100 unit/ml (1 unit dial)	NP		•		•
LYUMJEV- insulin lispro-aabc inj 100 unit/ml	NP		•		•
LYUMJEV KWIKPEN- insulin lispro-aabc soln pen-injector 200 unit/ml	NP		•		•
LYUMJEV KWIKPEN- insulin lispro-aabc soln pen-inj 100 unit/ml (1 unit dial)	NP		•		•
LYUMJEV TEMPO PEN- insulin lispro-aabc soln pen-inj w/transmit port 100 unit/ml	NP		•		•
NOVOLOG- insulin aspart inj soln 100 unit/ml	P				•
NOVOLOG FLEXPEN- insulin aspart soln pen-injector 100 unit/ml	P				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
NOVOLOG FLEXPEN RELION- insulin aspart soln pen-injector 100 unit/ml	P				•
NOVOLOG PENFILL- insulin aspart soln cartridge 100 unit/ml	P				•
NOVOLOG RELION- insulin aspart inj soln 100 unit/ml	P				•
<b>Short-Acting Insulins</b>					
AFREZZA- insulin regular (human) inh powd 90 x 8 unit & 90 x 12 unit, 60x4 & 60x8 & 60x12 ut/cart	NP		•		•
AFREZZA- insulin regular (human) inhal powd 90 x 4 unit & 90 x 8 unit	NP		•		•
AFREZZA- insulin regular (human) inhalation powder 4 unit/cartridge, 8 unit/cartridge, 12 unit/cartridge	NP		•		•
HUMULIN R- insulin regular (human) inj 100 unit/ml	NP		•		•
HUMULIN R U-500 (CONCENTR- insulin regular (human) inj 500 unit/ml	P				•
HUMULIN R U-500 KWIKPEN- insulin regular (human) soln pen-injector 500 unit/ml	P				•
NOVOLIN R- insulin regular (human) inj 100 unit/ml	P				•
NOVOLIN R FLEXPEN- insulin regular (human) soln pen-injector 100 unit/ml	P				•
NOVOLIN R FLEXPEN RELION- insulin regular (human) soln pen-injector 100 unit/ml	P				•
NOVOLIN R RELION- insulin regular (human) inj 100 unit/ml	P				•
<b>Intermediate-Acting Insulins</b>					

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
HUMALOG MIX 50/50- insulin lispro protamine & lispro inj 100 unit/ml (50-50)	NP		•		•
HUMALOG MIX 50/50 KWIKPEN- insulin lispro prot & lispro sus pen-inj 100 unit/ml (50-50)	NP		•		•
HUMALOG MIX 75/25- insulin lispro prot & lispro inj 100 unit/ml (75-25)	NP		•		•
HUMALOG MIX 75/25 KWIKPEN- insulin lispro prot & lispro sus pen-inj 100 unit/ml (75-25)	NP		•		•
HUMULIN N- insulin nph (human) (isophane) inj 100 unit/ml	NP		•		•
HUMULIN N KWIKPEN- insulin nph (human) (isophane) susp pen-injector 100 unit/ml	NP		•		•
HUMULIN 70/30- insulin nph isophane & regular human inj 100 unit/ml (70-30)	NP		•		•
HUMULIN 70/30 KWIKPEN- insulin nph & regular susp pen-inj 100 unit/ml (70-30)	NP		•		•
INSULIN ASPART PROTAMINE/- insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)	NP		•		•
INSULIN ASPART PROTAMINE/- insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)	NP		•		•
INSULIN LISPRO PROTAMINE/- insulin lispro prot & lispro sus pen-inj 100 unit/ml (75-25)	NP		•		•
NOVOLIN N- insulin nph (human) (isophane) inj 100 unit/ml	P				•
NOVOLIN N FLEXPEN- insulin nph (human) (isophane) susp pen-injector 100 unit/ml	P				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
NOVOLIN N FLEXPEN RELION- insulin nph (human) (isophane) susp pen-injector 100 unit/ml	P				•
NOVOLIN N RELION- insulin nph (human) (isophane) inj 100 unit/ml	P				•
NOVOLIN 70/30- insulin nph isophane & regular human inj 100 unit/ml (70-30)	P				•
NOVOLIN 70/30 FLEXPEN- insulin nph & regular susp pen-inj 100 unit/ml (70-30)	P				•
NOVOLIN 70/30 FLEXPEN REL- insulin nph & regular susp pen-inj 100 unit/ml (70-30)	P				•
NOVOLIN 70/30 RELION- insulin nph isophane & regular human inj 100 unit/ml (70-30)	P				•
NOVOLOG MIX 70/30- insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)	P				•
NOVOLOG MIX 70/30 PREFILL- insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)	P				•
NOVOLOG MIX 70/30 RELION- insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)	P				•
<b>Basal Insulins</b>					
BASAGLAR KWIKPEN- insulin glargine soln pen-injector 100 unit/ml	NP				•
BASAGLAR TEMPO PEN- insulin glargine pen-inj with transmitter port 100 unit/ml	NP				•
INSULIN DEGLUDEC- insulin degludec inj 100 unit/ml	NP		•		•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
INSULIN DEGLUDEC FLEXTOUCC- insulin degludec soln pen-injector 100 unit/ml, 200 unit/ml	NP		•		•
INSULIN GLARGINE-YFGN- insulin glargine-yfgn inj 100 unit/ml	P				•
INSULIN GLARGINE-YFGN- insulin glargine-yfgn soln pen- injector 100 unit/ml	P				•
LANTUS- insulin glargine inj 100 unit/ ml	NP		•		•
LANTUS SOLOSTAR- insulin glargine soln pen-injector 100 unit/ml	NP		•		•
LEVEMIR- insulin detemir inj 100 unit/ ml	P				•
LEVEMIR FLEXPEN- insulin detemir soln pen-injector 100 unit/ml	P				•
REZVOGLAR KWIKPEN- insulin glargine-aglr soln pen- injector 100 unit/ml	NP		•		•
SEMGLEE- insulin glargine-yfgn inj 100 unit/ml	P				•
SEMGLEE- insulin glargine-yfgn soln pen-injector 100 unit/ml	P				•
TOUJEO MAX SOLOSTAR- insulin glargine soln pen-injector 300 unit/ml (2 unit dial)	P				•
TOUJEO SOLOSTAR- insulin glargine soln pen-injector 300 unit/ml (1 unit dial)	P				•
TRESIBA- insulin degludec inj 100 unit/ml	P				•
TRESIBA FLEXTOUCH- insulin degludec soln pen-injector 100 unit/ ml, 200 unit/ml	P				•
<b>THYROID AGENTS</b>					
ADTHYZA- thyroid tab 15 mg (1/4 grain), 16.25 mg, 30 mg	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
(1/2 grain), 32.5 mg, 60 mg (1 grain), 65 mg, 90 mg (1 1/2 grain), 97.5 mg, 120 mg (2 grain), 130 mg					
ARMOUR THYROID- thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 90 mg (1 1/2 grain), 120 mg (2 grain), 180 mg (3 grain), 240 mg (4 grain), 300 mg (5 grain)	NP				
CYTOMEL- liothyronine sodium tab 5 mcg, 25 mcg, 50 mcg	NP				
ERMEZA- levothyroxine sodium oral solution 150 mcg/5ml	NP				
LEVOTHYROXINE SODIUM- levothyroxine sodium cap 13 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg	NP				
<b>levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg (Synthroid)</b>	p				
<b>liothyronine sodium tab 5 mcg, 25 mcg, 50 mcg (Cytomel)</b>	p				
<b>methimazole tab 5 mg, 10 mg</b>	p				
NIVA THYROID- thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 90 mg (1 1/2 grain), 120 mg (2 grain)	NP				
NP THYROID 120- thyroid tab 120 mg (2 grain)	NP				
NP THYROID 15- thyroid tab 15 mg (1/4 grain)	NP				
NP THYROID 30- thyroid tab 30 mg (1/2 grain)	NP				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
NP THYROID 60- thyroid tab 60 mg (1 grain)	NP					ACTONEL- risedronate sodium tab 35 mg, 150 mg	NP				
NP THYROID 90- thyroid tab 90 mg (1 1/2 grain)	NP					ALENDRONATE SODIUM- alendronate sodium tab 5 mg	P				
<b>propylthiouracil tab 50 mg</b>	p					<b>alendronate sodium oral soln 70 mg/75ml</b>	np				
SYNTHROID- levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg	NP					<b>alendronate sodium tab 10 mg, 35 mg</b>	p				
THYQUIDITY- levothyroxine sodium oral solution 100 mcg/5ml	NP					<b>alendronate sodium tab 70 mg (Fosamax)</b>	p				
THYROID- thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 90 mg (1 1/2 grain), 120 mg (2 grain)	NP					ATELVIA- risedronate sodium tab delayed release 35 mg	NP				
TIROSINT- levothyroxine sodium cap 13 mcg, 25 mcg, 37.5 mcg, 44 mcg, 50 mcg, 62.5 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg	NP					<b>betaine powder for oral solution (Cystadane)</b>	p	•			
TIROSINT-SOL- levothyroxine sodium oral solution 13 mcg/ml, 25 mcg/ml, 37.5 mcg/ml, 44 mcg/ml, 50 mcg/ml, 62.5 mcg/ml, 75 mcg/ml, 88 mcg/ml, 100 mcg/ml, 112 mcg/ml, 125 mcg/ml, 137 mcg/ml, 150 mcg/ml, 175 mcg/ml, 200 mcg/ml	NP					BINOSTO- alendronate sodium effervescent tab 70 mg	NP				
<b>OXYTOCICS</b>						BUPHENYL- sodium phenylbutyrate oral powder 3 gm/teaspoonful	NP	•	•		
CERVIDIL- dinoprostone vaginal inserts 10 mg	NP					BUPHENYL- sodium phenylbutyrate tab 500 mg	NP	•	•		
<b>methylergonovine maleate tab 0.2 mg</b>	p					<b>cabergoline tab 0.5 mg</b>	p				
<b>ENDOCRINE and METABOLIC AGENTS - MISC.</b>						<b>calcitonin (salmon) inj 200 unit/ml (Miacalcin)</b>	np				
ACTHAR- corticotropin inj gel 80 unit/ml	NP	•	•			<b>calcitonin (salmon) nasal soln 200 unit/act</b>	p				
						<b>calcitriol cap 0.25 mcg, 0.5 mcg (Rocaltrol)</b>	p				
						<b>calcitriol oral soln 1 mcg/ml (Rocaltrol)</b>	np				
						CARBAGLU- carglumic acid soluble tab 200 mg	NP	•	•		
						<b>carglumic acid soluble tab 200 mg (Carbaglu)</b>	p	•	•		
						CARNITOR- levocarnitine oral soln 1 gm/10ml (10%)	NP				
						CARNITOR- levocarnitine tab 330 mg	NP				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands



Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CARNITOR SF- levocarnitine oral soln 1 gm/10ml (10%)	NP					FOLLISTIM AQ- follitropin beta inj 300 unit/0.36ml, 600 unit/0.72ml, 900 unit/1.08ml	P	•	•		•
<b>cetorelix acetate for inj kit 0.25 mg (Cetrotide)</b>	np	•	•		•	FORTEO- teriparatide (recombinant) soln pen-inj 600 mcg/2.4ml	P	•	•		•
CETROTIDE- cetorelix acetate for inj kit 0.25 mg	NP	•	•		•	FOSAMAX- alendronate sodium tab 70 mg	NP				
CHORIONIC GONADOTROPIN- chorionic gonadotropin for im inj 10000 unit	NP	•	•		•	FOSAMAX PLUS D- alendronate sodium-cholecalciferol tab 70-2800 mg-unit, 70-5600 mg-unit	NP				
<b>cinacalcet hcl tab 30 mg (base equiv), 60 mg (base equiv), 90 mg (base equiv) (Sensipar)</b>	p	•	•			GALAFOLD- migalastat hcl cap 123 mg (base equivalent)	NP	•	•		•
CLOMID- clomiphene citrate tab 50 mg	P					GANIRELIX ACETATE- ganirelix acetate soln prefilled syringe 250 mcg/0.5ml	NP	•	•		•
CORTROPHIN- corticotropin inj gel 80 unit/ml	NP	•	•			<b>ganirelix acetate soln prefilled syringe 250 mcg/0.5ml (Ganirelix acetate)</b>	p	•	•		•
CYSTADANE- betaine powder for oral solution	NP	•				GENOTROPIN- somatropin for subcutaneous inj cartridge 5 mg, 12 mg (36 unit)	P	•	•		
DDAVP- desmopressin acetate inj 4 mcg/ml	NP					GENOTROPIN MINIQUICK- somatropin for subcutaneous inj prefilled syr 0.2 mg, 0.4 mg, 0.6 mg, 0.8 mg, 1 mg, 1.2 mg, 1.4 mg, 1.6 mg, 1.8 mg, 2 mg	P	•	•		
DDAVP- desmopressin acetate preservative free (pf) inj 4 mcg/ml	NP					GONAL-F- follitropin alfa for inj 450 unit, 1050 unit	NP	•	•		•
DDAVP- desmopressin acetate tab 0.1 mg, 0.2 mg	NP					GONAL-F RFF- follitropin alfa for subcutaneous inj 75 unit	NP	•	•		•
<b>desmopressin acetate inj 4 mcg/ml (Ddavp)</b>	p					GONAL-F RFF REDIRECT- follitropin alfa subcutaneous soln pen-inj 300 unit/0.5ml, 450 unit/0.75ml, 900 unit/1.5ml	NP	•	•		•
<b>desmopressin acetate nasal spray soln 0.01% (refrigerated), 0.01%</b>	p					HUMATROPE- somatropin for inj cartridge 6 mg (18 unit), 12 mg (36 unit), 24 mg	NP	•	•		
<b>desmopressin acetate preservative free (pf) inj 4 mcg/ml (Ddavp)</b>	p										
<b>desmopressin acetate tab 0.1 mg, 0.2 mg (Ddavp)</b>	p										
<b>doxercalciferol cap 0.5 mcg, 1 mcg, 2.5 mcg</b>	np										
EVISTA- raloxifene hcl tab 60 mg	NP										

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>ibandronate sodium tab 150 mg (base equivalent)</b>	P					MYCAPSSA- octreotide acetate cap delayed release 20 mg	NP	•	•		•
INCRELEX- mecaseimerin inj 40 mg/4ml (10 mg/ml)	P	•				NGENLA- somatogon-ghla solution pen-injector 24 mg/1.2ml (20 mg/ml), 60 mg/1.2ml (50 mg/ml)	NP	•	•		
ISTURISA- osilodrostat phosphate tab 1 mg, 5 mg	NP	•	•		•	<b>nitisinone cap 2 mg, 5 mg, 10 mg, 20 mg (Orfadin)</b>	P	•			
JYNARQUE- tolvaptan tab therapy pack 15 mg, 30 & 15 mg, 45 & 15 mg, 60 & 30 mg, 90 & 30 mg	NP	•	•		•	NITYR- nitisinone tab 2 mg, 5 mg, 10 mg	P	•			
JYNARQUE- tolvaptan tab 15 mg, 30 mg	NP	•	•		•	NOCDURNA- desmopressin acetate sublingual tab 27.7 mcg, 55.3 mcg	NP				
KERENDIA- finerenone tab 10 mg, 20 mg	NP		•		•	NORDITROPIN FLEXPRO- somatropin solution pen-injector 5 mg/1.5ml, 10 mg/1.5ml, 15 mg/1.5ml, 30 mg/3ml	NP	•	•		
KUVAN- sapropterin dihydrochloride powder packet 100 mg, 500 mg	NP	•	•			NOVAREL- chorionic gonadotropin for im inj 5000 unit, 10000 unit	NP	•	•		•
KUVAN- sapropterin dihydrochloride tab 100 mg	NP	•	•			NULIBRY- fosdenopterin hydrobromide for iv soln 9.5 mg	NP	•			
<b>levocarnitine oral soln 1 gm/10ml (10%) (Carnitor)</b>	P					NUTROPIN AQ NUSPIN 10- somatropin solution pen-injector 10 mg/2ml	NP	•	•		
<b>levocarnitine tab 330 mg (Carnitor)</b>	P					NUTROPIN AQ NUSPIN 20- somatropin solution pen-injector 20 mg/2ml	NP	•	•		
LUPRON DEPOT-PED (1-MONTH-leuprolide acetate for inj pediatric kit 7.5 mg, 11.25 mg, 15 mg)	P	•				NUTROPIN AQ NUSPIN 5- somatropin solution pen-injector 5 mg/2ml	NP	•	•		
LUPRON DEPOT-PED (3-MONTH-leuprolide acetate (3 month) for inj pediatric kit 11.25 mg, 30 mg)	P	•				OCTREOTIDE ACETATE- octreotide acetate subcutaneous soln pref syr 50 mcg/ml, 100 mcg/ml, 500 mcg/ml	P	•			
LUPRON DEPOT-PED (6-MONTH-leuprolide acet (6 month) for im inj pediatric kit 45 mg)	P	•				<b>octreotide acetate inj 50 mcg/ml (0.05 mg/ml), 100 mcg/ml (0.1 mg/ml), 500 mcg/ml (0.5 mg/ml) (Sandostatin)</b>	P	•	•		•
MENOPUR- menopropins for subcutaneous inj 75 unit	NP	•	•		•						
MIACALCIN- calcitonin (salmon) inj 200 unit/ml	NP										
MYALEPT- metreleptin for subcutaneous inj 11.3 mg	NP	•	•								

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>octreotide acetate inj 200 mcg/ml (0.2 mg/ml), 1000 mcg/ml (1 mg/ml)</b>	p	•	•		•
OLPRUVA- sodium phenylbutyrate packet for susp 2 gm therapy pack	NP		•		
OLPRUVA- sodium phenylbutyrate packet for susp 3 gm therapy pack	NP		•		
OLPRUVA- sodium phenylbutyrate packet for susp 4 gm therapy pack	NP		•		
OLPRUVA- sodium phenylbutyrate packet for susp 5 gm therapy pack	NP		•		
OLPRUVA- sodium phenylbutyrate packet for susp 6 gm therapy pack	NP		•		
OLPRUVA- sodium phenylbutyrate packet for susp 6.67 gm therapy pack	NP		•		
OMNITROPE- somatropin for inj 5.8 mg	P	•	•		
OMNITROPE- somatropin solution cartridge 5 mg/1.5ml, 10 mg/1.5ml	P	•	•		
ORFADIN- nitisinone cap 2 mg, 5 mg, 10 mg, 20 mg	NP	•			
ORFADIN- nitisinone susp 4 mg/ml	P	•			
ORILISSA- elagolix sodium tab 150 mg (base equiv), 200 mg (base equiv)	P		•		•
OSPHENA- ospemifene tab 60 mg	NP				
OVIDREL- choriogonadotropin alfa inj 250 mcg/0.5ml	P	•	•		•
PALYNZIQ- pegvaliase-pqpz subcutaneous soln pref syringe 2.5 mg/0.5ml, 10 mg/0.5ml, 20 mg/ml	NP	•	•		
<b>paricalcitol cap 1 mcg, 2 mcg (Zemplar)</b>	np				
<b>paricalcitol cap 4 mcg</b>	np				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
PHEBURANE- sodium phenylbutyrate oral pellets 483 mg/gm	NP	•	•		
PREGNYL- chorionic gonadotropin for im inj 10000 unit	P	•	•		•
PREGNYL W/DILUENT BENZYL- chorionic gonadotropin for im inj 10000 unit	P	•	•		•
<b>raloxifene hcl tab 60 mg (Evista)</b>	p				
RAVICTI- glycerol phenylbutyrate liquid 1.1 gm/ml	NP	•	•		
RAYALDEE- calcifediol cap er 30 mcg	NP				
RECORLEV- levoketoconazole tab 150 mg	NP	•	•		•
REVCOVI- elapegademase-lvlr im soln 2.4 mg/1.5ml (1.6 mg/ml)	P	•			
<b>risedronate sodium tab delayed release 35 mg (Atelvia)</b>	np				
<b>risedronate sodium tab 5 mg, 30 mg</b>	p				
<b>risedronate sodium tab 35 mg, 150 mg (Actonel)</b>	p				
ROCALTROL- calcitriol cap 0.25 mcg, 0.5 mcg	NP				
ROCALTROL- calcitriol oral soln 1 mcg/ml	NP				
SAIZEN- somatropin (non-refrigerated) for inj 5 mg, 8.8 mg	NP	•	•		
SAMSCA- tolvaptan tab 15 mg, 30 mg	NP	•			•
SANDOSTATIN- octreotide acetate inj 50 mcg/ml (0.05 mg/ml), 100 mcg/ml (0.1 mg/ml), 500 mcg/ml (0.5 mg/ml)	NP	•	•		•
<b>sapropterin dihydrochloride powder packet 100 mg, 500 mg (Kuvan)</b>	np	•	•		
<b>sapropterin dihydrochloride tab 100 mg (Kuvan)</b>	np	•	•		

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
SENSIPAR- cinacalcet hcl tab 30 mg (base equiv), 60 mg (base equiv), 90 mg (base equiv)	NP	•	•		
SEROSTIM- somatropin (non-refrigerated) for subcutaneous inj 4 mg, 5 mg, 6 mg	NP	•	•		
SIGNIFOR- pasireotide diaspertate inj 0.3 mg/ml (base equiv), 0.6 mg/ml (base equiv), 0.9 mg/ml (base equiv)	NP	•	•		•
SKYTROFA- lonapegsomatropin-tcgd for subcutaneous inj cartridge 3 mg, 3.6 mg, 4.3 mg, 5.2 mg, 6.3 mg, 7.6 mg, 9.1 mg, 11 mg	NP	•	•		
SKYTROFA- lonapegsomatropin-tcgd for subcutaneous inj cart 13.3 mg	NP	•	•		
<b>sodium phenylbutyrate oral powder 3 gm/teaspoonful (Buphenyl)</b>	np	•	•		
<b>sodium phenylbutyrate tab 500 mg (Buphenyl)</b>	np	•	•		
SOGROYA- somapacitan-beco solution pen-injector 5 mg/1.5ml, 10 mg/1.5ml, 15 mg/1.5ml	NP	•	•		
SOMAVERT- pegvisomant for inj 10 mg (as protein), 15 mg (as protein), 20 mg (as protein), 25 mg (as protein), 30 mg (as protein)	NP	•	•		•
STRENSIQ- asfotase alfa subcutaneous inj 18 mg/0.45ml, 28 mg/0.7ml, 40 mg/ml, 80 mg/0.8ml	P	•	•		
SYNAREL- nafarelin acetate nasal soln 2 mg/ml (200 mcg/act) (base eq)	NP	•			
TERIPARATIDE- teriparatide (recombinant) soln pen-inj 620 mcg/2.48ml	NP	•	•		•
<b>teriparatide (recombinant) soln pen-inj 600 mcg/2.4ml (Forteo)</b>	p	•	•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>tolvaptan tab 15 mg, 30 mg (Samsca)</b>	np	•			•
TYMLOS- abaloparatide subcutaneous soln pen-injector 3120 mcg/1.56ml	P	•	•		•
VEOZAH- fezolinetant tab 45 mg	NP		•		•
VOXZOGO- vosoritide for subcutaneous inj 0.4 mg, 0.56 mg, 1.2 mg	NP	•	•		•
XURIDEN- uridine triacetate oral granules packet 2 gm	NP	•			
ZEMPLAR- paricalcitol cap 1 mcg, 2 mcg	NP				
ZOMACTON- somatropin for inj 10 mg	NP	•	•		
ZOMACTON- somatropin for subcutaneous inj 5 mg	NP	•	•		
<b>CARDIOVASCULAR AGENTS</b>					
<b>CARDIOTONICS</b>					
DIGOXIN- digoxin oral soln 0.05 mg/ml	NP				
<b>digoxin oral soln 0.05 mg/ml (Digoxin)</b>	p				
<b>digoxin tab 62.5 mcg (0.0625 mg) (Lanoxin)</b>	np				
<b>digoxin tab 125 mcg (0.125 mg), 250 mcg (0.25 mg) (Lanoxin)</b>	p				
LANOXIN- digoxin tab 62.5 mcg (0.0625 mg), 125 mcg (0.125 mg), 250 mcg (0.25 mg)	NP				
<b>ANTIANGINAL AGENTS</b>					
ASPRUZYO SPRINKLE- ranolazine er granules packet 500 mg, 1000 mg	NP				
ISORDIL TITRADOSE- isosorbide dinitrate tab 5 mg, 40 mg	NP				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>isosorbide dinitrate tab 5 mg (Isordil titradose)</b>	p					BETAPACE- sotalol hcl tab 80 mg, 120 mg, 160 mg	NP				
<b>isosorbide dinitrate tab 10 mg, 20 mg, 30 mg</b>	p					BETAPACE AF- sotalol hcl (afib/af) tab 80 mg, 120 mg, 160 mg	NP				
<b>isosorbide dinitrate tab 40 mg (Isordil titradose)</b>	np					<b>betaxolol hcl tab 10 mg, 20 mg</b>	np				
ISOSORBIDE MONONITRATE- isosorbide mononitrate tab 10 mg, 20 mg	P					<b>bisoprolol fumarate tab 5 mg, 10 mg</b>	p				
<b>isosorbide mononitrate tab er 24hr 30 mg, 60 mg, 120 mg</b>	p					BYSTOLIC- nebivolol hcl tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent), 20 mg (base equivalent)	NP				
NITRO-BID- nitroglycerin oint 2%	P					<b>carvedilol phosphate cap er 24hr 10 mg, 20 mg, 40 mg, 80 mg (Coreg cr)</b>	np				
NITRO-DUR- nitroglycerin td patch 24hr 0.1 mg/hr, 0.2 mg/hr, 0.3 mg/hr, 0.4 mg/hr, 0.6 mg/hr, 0.8 mg/hr	NP					<b>carvedilol tab 3.125 mg, 6.25 mg, 12.5 mg, 25 mg (Coreg)</b>	p				
NITRO-TIME- nitroglycerin cap er 2.5 mg, 6.5 mg, 9 mg	NP					COREG- carvedilol tab 3.125 mg, 6.25 mg, 12.5 mg, 25 mg	NP				
<b>nitroglycerin sl tab 0.3 mg, 0.4 mg, 0.6 mg (Nitrostat)</b>	p					COREG CR- carvedilol phosphate cap er 24hr 10 mg, 20 mg, 40 mg, 80 mg	NP				
<b>nitroglycerin td patch 24hr 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr (Nitro-dur)</b>	p					CORGARD- nadolol tab 20 mg, 40 mg	NP				
<b>nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray) (Nitrolingual pumpspr)</b>	np					HEMANGEOL- propranolol hcl oral soln 4.28 mg/ml (3.75 mg/ml base equiv)	NP				
NITROLINGUAL- nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)	NP					INDERAL LA- propranolol hcl cap er 24hr 60 mg, 80 mg, 120 mg, 160 mg	NP				
NITROSTAT- nitroglycerin sl tab 0.3 mg, 0.4 mg, 0.6 mg	NP					INDERAL XL- propranolol hcl sustained-release beads cap er 24hr 80 mg, 120 mg	NP				
<b>ranolazine tab er 12hr 500 mg, 1000 mg (Ranexa)</b>	np					INNOPRAN XL- propranolol hcl sustained-release beads cap er 24hr 80 mg, 120 mg	NP				
<b>BETA BLOCKERS</b>						KAPSPARGO SPRINKLE- metoprolol succ cap er 24hr sprinkle 25 mg (tartrate equiv), 50 mg (tartrate)	NP				
<b>acebutolol hcl cap 200 mg, 400 mg</b>	p										
<b>atenolol tab 25 mg, 50 mg, 100 mg (Tenormin)</b>	p										

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
equiv), 100 mg (tartrate equiv), 200 mg (tartrate equiv)						SOTYLIZE- sotalol hcl oral solution 5 mg/ml	NP				
<b>labetalol hcl tab 100 mg, 200 mg, 300 mg</b>	p					TENORMIN- atenolol tab 25 mg, 50 mg, 100 mg	NP				
LOPRESSOR- metoprolol tartrate tab 50 mg, 100 mg	NP					<b>timolol maleate tab 5 mg, 10 mg, 20 mg</b>	np				
<b>metoprolol succinate tab er 24hr 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv), 200 mg (tartrate equiv) (Toprol xl)</b>	p					TOPROL XL- metoprolol succinate tab er 24hr 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv), 200 mg (tartrate equiv)	NP				
<b>metoprolol tartrate tab 25 mg</b>	p					<b>CALCIUM CHANNEL BLOCKERS</b>					
<b>metoprolol tartrate tab 37.5 mg, 75 mg</b>	np					<b>amlodipine besylate tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent) (Norvasc)</b>	p				
<b>metoprolol tartrate tab 50 mg, 100 mg (Lopressor)</b>	p					CARDIZEM- diltiazem hcl tab 30 mg, 60 mg, 120 mg	NP				
<b>nadolol tab 20 mg, 40 mg, 80 mg (Corgard)</b>	p					CARDIZEM CD- diltiazem hcl coated beads cap er 24hr 120 mg, 180 mg, 240 mg, 360 mg	NP				
<b>nebivolol hcl tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent), 20 mg (base equivalent) (Bystolic)</b>	np					CARDIZEM LA- diltiazem hcl tab er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	NP				
<b>pindolol tab 5 mg, 10 mg</b>	p					CONJUPRI- levamlodipine maleate tab 2.5 mg, 5 mg	NP				
PROPRANOLOL HCL- propranolol hcl oral soln 40 mg/5ml	P					<b>diltiazem hcl cap er 12hr 60 mg, 90 mg, 120 mg</b>	np				
<b>propranolol hcl cap er 24hr 60 mg, 80 mg, 120 mg, 160 mg (Inderal la)</b>	p					<b>diltiazem hcl cap er 24hr 120 mg, 180 mg, 240 mg</b>	p				
<b>propranolol hcl oral soln 20 mg/5ml</b>	p					<b>diltiazem hcl coated beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg (Cardizem cd)</b>	p				
<b>propranolol hcl tab 10 mg, 20 mg, 40 mg, 60 mg, 80 mg</b>	p					<b>diltiazem hcl coated beads cap er 24hr 360 mg (Cardizem cd)</b>	np				
<b>sotalol hcl (afib/af) tab 80 mg, 120 mg, 160 mg (Betapace af)</b>	p					<b>diltiazem hcl extended release beads cap er 24hr 120 mg,</b>	p				
<b>sotalol hcl tab 80 mg, 120 mg, 160 mg (Betapace)</b>	p										
<b>sotalol hcl tab 240 mg</b>	p										

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>180 mg, 240 mg, 300 mg, 360 mg, 420 mg (Tiazac)</b>						PROCARDIA XL- nifedipine tab er 24hr osmotic release 30 mg, 60 mg, 90 mg	NP				
<b>diltiazem hcl tab er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg (Cardizem la)</b>	np					SULAR- nisoldipine tab er 24hr 8.5 mg, 17 mg, 34 mg	NP				
<b>diltiazem hcl tab 30 mg, 60 mg, 120 mg (Cardizem)</b>	p					TIAZAC- diltiazem hcl extended release beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	NP				
<b>diltiazem hcl tab 90 mg</b>	p					<b>verapamil hcl cap er 24hr 120 mg, 180 mg, 240 mg (Verelan)</b>	p				
<b>felodipine tab er 24hr 2.5 mg, 5 mg, 10 mg</b>	p					VERAPAMIL HCL ER- verapamil hcl cap er 24hr 100 mg, 300 mg	NP				
<b>isradipine cap 2.5 mg, 5 mg</b>	np					VERAPAMIL HCL SR- verapamil hcl cap er 24hr 360 mg	NP				
KATERZIA- amlodipine benzoate oral susp 1 mg/ml (base equivalent)	NP					<b>verapamil hcl tab er 120 mg, 180 mg, 240 mg (Calan sr)</b>	p				
LEVAMLODIPINE- levamlodipine maleate tab 2.5 mg, 5 mg	NP					<b>verapamil hcl tab 40 mg, 80 mg, 120 mg</b>	p				
<b>nicardipine hcl cap 20 mg, 30 mg</b>	np					VERAPAMIL HYDROCHLORIDE E- verapamil hcl cap er 24hr 100 mg, 200 mg	NP				
<b>nifedipine cap 10 mg, 20 mg</b>	np					VERELAN- verapamil hcl cap er 24hr 120 mg, 180 mg, 240 mg, 360 mg	NP				
<b>nifedipine tab er 24hr 30 mg, 60 mg, 90 mg</b>	p					VERELAN PM- verapamil hcl cap er 24hr 100 mg, 200 mg, 300 mg	NP				
<b>nifedipine tab er 24hr osmotic release 30 mg, 60 mg, 90 mg (Procardia xl)</b>	p					<b>ANTIARRHYTHMICS</b>					
<b>nimodipine cap 30 mg</b>	p					<b>amiodarone hcl tab 100 mg, 200 mg</b>	p				
NISOLDIPINE ER- nisoldipine tab er 24hr 20 mg, 25.5 mg, 30 mg, 40 mg	NP					<b>amiodarone hcl tab 400 mg</b>	np				
<b>nisoldipine tab er 24hr 8.5 mg, 17 mg, 34 mg (Sular)</b>	np					<b>disopyramide phosphate cap 100 mg, 150 mg (Norpace)</b>	p				
NORLIQVA- amlodipine besylate oral soln 1 mg/ml (base equivalent)	NP					<b>dofetilide cap 125 mcg (0.125 mg), 250 mcg (0.25 mg), 500 mcg (0.5 mg) (Tikosyn)</b>	np				
NORVASC- amlodipine besylate tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)	NP					<b>flecainide acetate tab 50 mg, 100 mg, 150 mg</b>	p				
NYMALIZE- nimodipine oral soln 6 mg/ml	NP										

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>mexiletine hcl cap 150 mg, 200 mg, 250 mg</b>	p				
MULTAQ- dronedarone hcl tab 400 mg (base equivalent)	P				
NORPACE- disopyramide phosphate cap 100 mg, 150 mg	NP				
NORPACE CR- disopyramide phosphate cap er 12hr 100 mg, 150 mg	NP				
<b>propafenone hcl cap er 12hr 225 mg, 325 mg, 425 mg (Rythmol sr)</b>	p				
<b>propafenone hcl tab 150 mg, 225 mg, 300 mg</b>	p				
<b>quinidine gluconate tab er 324 mg</b>	p				
QUINIDINE SULFATE- quinidine sulfate tab 200 mg, 300 mg	P				
TIKOSYN- dofetilide cap 125 mcg (0.125 mg), 250 mcg (0.25 mg), 500 mcg (0.5 mg)	NP				
<b>ANTIHYPERTENSIVES</b>					
ACCUPRIL- quinapril hcl tab 5 mg, 10 mg, 20 mg, 40 mg	NP				
ACCURETIC- quinapril-hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg	NP				
<b>aliskiren fumarate tab 150 mg (base equivalent), 300 mg (base equivalent) (Tekturna)</b>	np				
ALTACE- ramipril cap 1.25 mg, 2.5 mg, 5 mg, 10 mg	NP				
<b>amlodipine besylate-benazepril hcl cap 2.5-10 mg, 5-40 mg</b>	p				
<b>amlodipine besylate-benazepril hcl cap 5-10 mg, 5-20 mg, 10-20 mg, 10-40 mg (Lotrel)</b>	p				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>amlodipine besylate-olmesartan medoxomil tab 5-20 mg, 5-40 mg, 10-20 mg, 10-40 mg (Azor)</b>	np				
<b>amlodipine besylate-valsartan tab 5-160 mg, 5-320 mg, 10-160 mg, 10-320 mg (Exforge)</b>	p				
<b>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg, 5-160-25 mg, 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg (Exforge hct)</b>	p				
ATACAND- candesartan cilexetil tab 4 mg, 8 mg, 16 mg, 32 mg	NP				
ATACAND HCT- candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg, 32-12.5 mg, 32-25 mg	NP				
<b>atenolol &amp; chlorthalidone tab 50-25 mg (Tenoretic 50)</b>	p				
<b>atenolol &amp; chlorthalidone tab 100-25 mg (Tenoretic 100)</b>	p				
AVALIDE- irbesartan-hydrochlorothiazide tab 150-12.5 mg, 300-12.5 mg	NP				
AVAPRO- irbesartan tab 75 mg, 150 mg, 300 mg	NP				
AZOR- amlodipine besylate-olmesartan medoxomil tab 5-20 mg, 5-40 mg, 10-20 mg, 10-40 mg	NP				
<b>benazepril &amp; hydrochlorothiazide tab 5-6.25 mg</b>	p				
<b>benazepril &amp; hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg (Lotensin hct)</b>	p				
<b>benazepril hcl tab 5 mg</b>	p				
<b>benazepril hcl tab 10 mg, 20 mg, 40 mg (Lotensin)</b>	p				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands



Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
BENICAR- olmesartan medoxomil tab 5 mg, 20 mg, 40 mg	NP					<b>clonidine td patch weekly 0.3 mg/24hr (Catapres-tts-3)</b>	p				
BENICAR HCT- olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg, 40-12.5 mg, 40-25 mg	NP					COZAAR- losartan potassium tab 25 mg, 50 mg, 100 mg	NP				
<b>bisoprolol &amp; hydrochlorothiazide tab 2.5-6.25 mg, 5-6.25 mg, 10-6.25 mg (Ziac)</b>	p					DEMSEER- metyrosine cap 250 mg	NP				
<b>candesartan cilexetil tab 4 mg, 8 mg, 16 mg, 32 mg (Atacand)</b>	p					DIBENZYLIN- phenoxybenzamine hcl cap 10 mg	NP				
<b>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg, 32-12.5 mg, 32-25 mg (Atacand hct)</b>	p					DIOVAN- valsartan tab 40 mg, 80 mg, 160 mg, 320 mg	NP				
<b>captopril tab 12.5 mg, 25 mg, 50 mg, 100 mg</b>	p					DIOVAN HCT- valsartan-hydrochlorothiazide tab 80-12.5 mg, 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg	NP				
CAPTOPRIL/HYDROCHLOROTHIA-captopril & hydrochlorothiazide tab 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg	P					<b>doxazosin mesylate tab 1 mg, 2 mg, 4 mg, 8 mg (Cardura)</b>	p				•
CARDURA- doxazosin mesylate tab 1 mg, 2 mg, 4 mg, 8 mg	NP				•	EDARBI- azilsartan medoxomil tab 40 mg, 80 mg	NP				
CATAPRES-TTS-1- clonidine td patch weekly 0.1 mg/24hr	NP					EDARBYCLOR- azilsartan medoxomil-chlorthalidone tab 40-12.5 mg, 40-25 mg	NP				
CATAPRES-TTS-2- clonidine td patch weekly 0.2 mg/24hr	NP					<b>enalapril maleate &amp; hydrochlorothiazide tab 5-12.5 mg</b>	p				
CATAPRES-TTS-3- clonidine td patch weekly 0.3 mg/24hr	NP					<b>enalapril maleate &amp; hydrochlorothiazide tab 10-25 mg (Vaseretic)</b>	p				
<b>clonidine hcl tab 0.1 mg, 0.2 mg, 0.3 mg</b>	p					<b>enalapril maleate oral soln 1 mg/ml (Epaned)</b>	np				
CLONIDINE HYDROCHLORIDE E-clonidine hcl tab er 24hr 0.17 mg (base equivalent)	NP					<b>enalapril maleate tab 2.5 mg, 5 mg, 10 mg, 20 mg (Vasotec)</b>	p				
<b>clonidine td patch weekly 0.1 mg/24hr (Catapres-tts-1)</b>	p					EPANED- enalapril maleate oral soln 1 mg/ml	NP				
<b>clonidine td patch weekly 0.2 mg/24hr (Catapres-tts-2)</b>	p					<b>eplerenone tab 25 mg, 50 mg (Inspra)</b>	p				
						EXFORGE- amlodipine besylate-valsartan tab 5-160 mg, 5-320 mg, 10-160 mg, 10-320 mg	NP				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
EXFORGE HCT- amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg, 5-160-25 mg, 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg	NP					LOTENSIN HCT- benazepril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg	NP				
<b>fosinopril sodium &amp; hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg</b>	p					LOTREL- amlodipine besylate-benazepril hcl cap 5-10 mg, 5-20 mg, 10-20 mg, 10-40 mg	NP				
<b>fosinopril sodium tab 10 mg, 20 mg, 40 mg</b>	p					METHYLDOPA- methyl dopa tab 250 mg, 500 mg	P				
<b>guanfacine hcl tab 1 mg, 2 mg</b>	p					<b>metoprolol &amp; hydrochlorothiazide tab 50-25 mg, 100-25 mg, 100-50 mg</b>	p				
<b>hydralazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg</b>	p					<b>metirosine cap 250 mg (Demser)</b>	np				
HYZAAR- losartan potassium & hydrochlorothiazide tab 50-12.5 mg, 100-12.5 mg, 100-25 mg	NP					MICARDIS- telmisartan tab 20 mg, 40 mg, 80 mg	NP				
INSPRA- eplerenone tab 25 mg, 50 mg	NP					MICARDIS HCT- telmisartan-hydrochlorothiazide tab 40-12.5 mg, 80-12.5 mg, 80-25 mg	NP				
<b>irbesartan tab 75 mg, 150 mg, 300 mg (Avapro)</b>	p					MINIPRESS- prazosin hcl cap 1 mg, 2 mg, 5 mg	NP				
<b>irbesartan-hydrochlorothiazide tab 150-12.5 mg, 300-12.5 mg (Avalide)</b>	p					<b>minoxidil tab 2.5 mg, 10 mg</b>	p				
<b>lisinopril &amp; hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg (Zestoretic)</b>	p					<b>moexipril hcl tab 7.5 mg, 15 mg</b>	p				
<b>lisinopril tab 2.5 mg, 5 mg, 10 mg, 20 mg, 30 mg, 40 mg (Zestril)</b>	p					NEXICLON XR- clonidine hcl tab er 24hr 0.17 mg (base equivalent)	NP				
<b>losartan potassium &amp; hydrochlorothiazide tab 50-12.5 mg, 100-12.5 mg, 100-25 mg (Hyzaar)</b>	p					<b>olmesartan medoxomil tab 5 mg, 20 mg, 40 mg (Benicar)</b>	p				
<b>losartan potassium tab 25 mg, 50 mg, 100 mg (Cozaar)</b>	p					<b>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg, 40-12.5 mg, 40-25 mg (Benicar hct)</b>	p				
LOTENSIN- benazepril hcl tab 10 mg, 20 mg, 40 mg	NP					<b>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg, 40-5-12.5 mg, 40-5-25 mg, 40-10-12.5 mg, 40-10-25 mg (Tribenzor)</b>	np				
						PERINDOPRIL ERBUMINE- perindopril erbumine tab 2 mg, 8 mg	P				
						<b>perindopril erbumine tab 4 mg</b>	p				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>phenoxybenzamine hcl cap 10 mg (Dibenzyline)</b>	p					TRANDOLAPRIL/VERAPAMIL HC- trandolapril-verapamil hcl tab er 1-240 mg, 2-180 mg, 2-240 mg, 4-240 mg	NP				
<b>prazosin hcl cap 1 mg, 2 mg, 5 mg (Minipress)</b>	p					TRIBENZOR- olmesartan- amlodipine-hydrochlorothiazide tab 20-5-12.5 mg, 40-5-12.5 mg, 40-5-25 mg, 40-10-12.5 mg, 40-10-25 mg	NP				
PRESTALIA- perindopril arginine- amlodipine besylate tab 3.5-2.5 mg, 7-5 mg, 14-10 mg	NP					VALSARTAN- valsartan oral soln 4 mg/ml	np				
QBRELIS- lisinopril oral soln 1 mg/ml	NP					<b>valsartan tab 40 mg, 80 mg, 160 mg, 320 mg (Diovan)</b>	p				
<b>quinapril hcl tab 5 mg, 10 mg, 20 mg, 40 mg (Accupril)</b>	p					<b>valsartan-hydrochlorothiazide tab 80-12.5 mg, 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg (Diovan hct)</b>	p				
<b>quinapril-hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg (Accuretic)</b>	p					VASERETIC- enalapril maleate & hydrochlorothiazide tab 10-25 mg	NP				
<b>ramipril cap 1.25 mg, 2.5 mg, 5 mg, 10 mg (Altace)</b>	p					VASOTEC- enalapril maleate tab 2.5 mg, 5 mg, 10 mg, 20 mg	NP				
TEKTURNA- aliskiren fumarate tab 150 mg (base equivalent), 300 mg (base equivalent)	NP					VECAMYL- mecamlamine hcl tab 2.5 mg	NP	•			
<b>telmisartan tab 20 mg, 40 mg, 80 mg (Micardis)</b>	p					ZESTORETIC- lisinopril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg	NP				
<b>telmisartan-hydrochlorothiazide tab 40-12.5 mg, 80-12.5 mg, 80-25 mg (Micardis hct)</b>	np					ZESTRIL- lisinopril tab 2.5 mg, 5 mg, 10 mg, 20 mg, 30 mg, 40 mg	NP				
TELMISARTAN/AMLODIPINE- telmisartan-amlodipine tab 40-5 mg, 40-10 mg, 80-5 mg, 80-10 mg	NP					<b>DIURETICS</b>					
TENORETIC 100- atenolol & chlorthalidone tab 100-25 mg	NP					<b>acetazolamide cap er 12hr 500 mg</b>	p				
TENORETIC 50- atenolol & chlorthalidone tab 50-25 mg	NP					<b>acetazolamide tab 125 mg, 250 mg</b>	p				
<b>terazosin hcl cap 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)</b>	p				•	ALDACTONE- spironolactone tab 25 mg, 50 mg, 100 mg	NP				
<b>trandolapril tab 1 mg, 2 mg, 4 mg</b>	p					<b>amiloride hcl tab 5 mg</b>	p				
						AMILORIDE/HYDROCHLOROTHIA- amiloride & hydrochlorothiazide tab 5-50 mg	P				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>bumetanide tab 0.5 mg (Bumex)</b>	p				
<b>bumetanide tab 1 mg, 2 mg</b>	p				
BUMEX- bumetanide tab 0.5 mg	NP				
CAROSPIR- spironolactone susp 25 mg/5ml	NP				
<b>chlorthalidone tab 25 mg, 50 mg</b>	p				
<b>dichlorphenamide tab 50 mg (Keveyis)</b>	np		•		•
DIURIL- chlorothiazide susp 250 mg/5ml	NP				
DYRENIUM- triamterene cap 50 mg, 100 mg	NP				
EDECIN- ethacrynic acid tab 25 mg	NP				
<b>ethacrynic acid tab 25 mg (Edecrin)</b>	np				
FUROSCIX- furosemide subcutaneous cartridge kit 80 mg/10ml	NP	•	•		•
FUROSEMIDE- furosemide oral soln 8 mg/ml	NP				
<b>furosemide oral soln 10 mg/ml</b>	p				
<b>furosemide tab 20 mg, 40 mg, 80 mg (Lasix)</b>	p				
<b>hydrochlorothiazide cap 12.5 mg</b>	p				
<b>hydrochlorothiazide tab 12.5 mg, 25 mg, 50 mg</b>	p				
<b>indapamide tab 1.25 mg, 2.5 mg</b>	p				
KEYEYIS- dichlorphenamide tab 50 mg	NP		•		•
LASIX- furosemide tab 20 mg, 40 mg, 80 mg	NP				
MAXZIDE- triamterene & hydrochlorothiazide tab 75-50 mg	NP				
MAXZIDE-25- triamterene & hydrochlorothiazide tab 37.5-25 mg	NP				
<b>methazolamide tab 25 mg, 50 mg</b>	p				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>metolazone tab 2.5 mg, 5 mg, 10 mg</b>	p				
SOAANZ- torsemide tab 20 mg, 40 mg, 60 mg	NP				
<b>spironolactone &amp; hydrochlorothiazide tab 25-25 mg (Aldactazide)</b>	p				
<b>spironolactone susp 25 mg/5ml (Carospir)</b>	np				
<b>spironolactone tab 25 mg, 50 mg, 100 mg (Aldactone)</b>	p				
THALITONE- chlorthalidone tab 15 mg	NP				
<b>torsemide tab 5 mg, 10 mg, 20 mg, 100 mg</b>	p				
<b>triamterene &amp; hydrochlorothiazide cap 37.5-25 mg</b>	p				
<b>triamterene &amp; hydrochlorothiazide tab 37.5-25 mg (Maxzide-25)</b>	p				
<b>triamterene &amp; hydrochlorothiazide tab 75-50 mg (Maxzide)</b>	p				
<b>triamterene cap 50 mg, 100 mg (Dyrenium)</b>	np				
<b>VASOPRESSORS</b>					
AUVI-Q- epinephrine solution auto-injector 0.1 mg/0.1ml, 0.15 mg/0.15ml (1:1000), 0.3 mg/0.3ml (1:1000)	P				
<b>droxidopa cap 100 mg, 200 mg, 300 mg (Northera)</b>	np	•	•		•
EPINEPHRINE- epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000), 0.3 mg/0.3ml (1:1000)	NP				
<b>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000) (Epipen-jr 2-pak)</b>	p				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000) (Epipen 2-pak)</b>	p				
EPIPEN 2-PAK- epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)	NP				
EPIPEN-JR 2-PAK- epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)	NP				
<b>midodrine hcl tab 2.5 mg, 5 mg, 10 mg</b>	p				
NORTHERA- droxidopa cap 100 mg, 200 mg, 300 mg	NP	•	•		•
<b>ANTIHYPERTENSIVES</b>					
ALTOPREV- lovastatin tab er 24hr 20 mg, 40 mg, 60 mg	NP			•	•
ATORVALIQ- atorvastatin calcium susp 20 mg/5ml (4mg/ml) (base equiv)	NP			•	•
<b>atorvastatin calcium tab 10 mg (base equivalent), 20 mg (base equivalent), 40 mg (base equivalent), 80 mg (base equivalent) (Lipitor)</b>	p				•
<b>cholestyramine light powder packets 4 gm</b>	np				
<b>cholestyramine light powder 4 gm/dose (Questran light)</b>	p				
<b>cholestyramine powder packets 4 gm (Questran)</b>	np				
<b>cholestyramine powder 4 gm/dose (Questran)</b>	p				
<b>choline fenofibrate cap dr 45 mg (fenofibric acid equiv), 135 mg (fenofibric acid equiv) (Trilipix)</b>	np				
<b>colesevelam hcl packet for susp 3.75 gm (Welchol)</b>	np				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>colesevelam hcl tab 625 mg (Welchol)</b>	p				
COLESTID- colestipol hcl granule packets 5 gm	NP				
COLESTID- colestipol hcl granules 5 gm	NP				
COLESTID- colestipol hcl tab 1 gm	NP				
COLESTID FLAVORED- colestipol hcl granule packets 5 gm	NP				
COLESTID FLAVORED- colestipol hcl granules 5 gm	NP				
<b>colestipol hcl granule packets 5 gm (Colestid flavored)</b>	p				
<b>colestipol hcl granules 5 gm (Colestid flavored)</b>	p				
<b>colestipol hcl tab 1 gm (Colestid)</b>	p				
CRESTOR- rosuvastatin calcium tab 5 mg, 10 mg, 20 mg, 40 mg	NP			•	•
EZALLOR SPRINKLE- rosuvastatin calcium sprinkle cap 5 mg (base equivalent), 10 mg (base equivalent), 20 mg (base equivalent), 40 mg (base equivalent)	NP			•	•
<b>ezetimibe tab 10 mg (Zetia)</b>	p				
<b>ezetimibe-simvastatin tab 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg (Vytorin)</b>	p			•	•
EZETIMIBE/ROSUVASTATIN- ezetimibe-rosuvastatin calcium tab 10-5 mg, 10-10 mg, 10-20 mg, 10-40 mg	NP			•	•
FENOFIBRATE- fenofibrate cap 50 mg, 150 mg	NP				
<b>fenofibrate micronized cap 43 mg, 130 mg</b>	np				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>fenofibrate micronized cap 67 mg, 134 mg, 200 mg</b>	p					LOPID- gemfibrozil tab 600 mg	NP				
<b>fenofibrate tab 40 mg, 120 mg (Fenoglide)</b>	np					<b>lovastatin tab 10 mg, 20 mg, 40 mg</b>	p				•
<b>fenofibrate tab 48 mg, 145 mg (Tricor)</b>	p					LOVAZA- omega-3-acid ethyl esters cap 1 gm	NP				
<b>fenofibrate tab 54 mg, 160 mg</b>	p					NEXLETOL- bempedoic acid tab 180 mg	P		•		•
FENOFIBRIC ACID- fenofibric acid tab 35 mg, 105 mg	NP					NEXLIZET- bempedoic acid-ezetimibe tab 180-10 mg	P		•		•
FENOGLIDE- fenofibrate tab 40 mg, 120 mg	NP					NIACIN- niacin (antihyperlipidemic) tab 500 mg	NP				
FIBRICOR- fenofibric acid tab 35 mg, 105 mg	NP					<b>niacin tab er 500 mg (antihyperlipidemic), 750 mg (antihyperlipidemic), 1000 mg (antihyperlipidemic) (Niaspan)</b>	p				
FLOLIPID- simvastatin susp 20 mg/5ml (4 mg/ml), 40 mg/5ml (8 mg/ml)	NP			•	•	NIACOR- niacin (antihyperlipidemic) tab 500 mg	NP				
<b>fluvastatin sodium cap 20 mg (base equivalent), 40 mg (base equivalent)</b>	np				•	<b>omega-3-acid ethyl esters cap 1 gm (Lovaza)</b>	np				
<b>fluvastatin sodium tab er 24 hr 80 mg (base equivalent) (Lescol xl)</b>	np				•	<b>pitavastatin calcium tab 1 mg, 2 mg, 4 mg (Livalo)</b>	np				•
<b>gemfibrozil tab 600 mg (Lopid)</b>	p					PRALUENT- alirocumab subcutaneous solution auto-injector 75 mg/ml, 150 mg/ml	NP		•		•
JUXTAPID- lomitapide mesylate cap 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv), 30 mg (base equiv)	NP	•	•		•	<b>pravastatin sodium tab 10 mg, 20 mg, 40 mg, 80 mg</b>	p				•
LESCOL XL- fluvastatin sodium tab er 24 hr 80 mg (base equivalent)	NP			•	•	QUESTRAN- cholestyramine powder packets 4 gm	NP				
LIPITOR- atorvastatin calcium tab 10 mg (base equivalent), 20 mg (base equivalent), 40 mg (base equivalent), 80 mg (base equivalent)	NP			•	•	QUESTRAN- cholestyramine powder 4 gm/dose	NP				
LIPOFEN- fenofibrate cap 50 mg, 150 mg	NP					QUESTRAN LIGHT- cholestyramine light powder 4 gm/dose	NP				
LIVALO- pitavastatin calcium tab 1 mg, 2 mg, 4 mg	NP			•	•	REPATHA- evolocumab subcutaneous soln prefilled syringe 140 mg/ml	P		•		•
						REPATHA PUSHTRONEX SYSTEM- evolocumab subcutaneous soln cartridge/infusor 420 mg/3.5ml	P		•		•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
REPATHA SURECLICK- evolocumab subcutaneous soln auto-injector 140 mg/ml	P		•		•	<b>ambrisentan tab 5 mg, 10 mg (Letairis)</b>	p	•	•		•
<b>rosuvastatin calcium tab 5 mg, 10 mg, 20 mg, 40 mg (Crestor)</b>	p				•	<b>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg, 2.5-20 mg, 2.5-40 mg</b>	np				
ROSZET- ezetimibe-rosuvastatin calcium tab 10-5 mg, 10-10 mg, 10-20 mg, 10-40 mg	NP			•	•	<b>amlodipine besylate-atorvastatin calcium tab 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg, 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg (Caduet)</b>	np				
<b>simvastatin tab 5 mg, 80 mg</b>	p				•	BIDIL- isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg	NP				
<b>simvastatin tab 10 mg, 20 mg, 40 mg (Zocor)</b>	p				•	<b>bosentan tab 62.5 mg, 125 mg (Tracleer)</b>	p	•	•		•
TRICOR- fenofibrate tab 48 mg, 145 mg	NP					CADUET- amlodipine besylate-atorvastatin calcium tab 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg, 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg	NP				
TRILIPIX- choline fenofibrate cap dr 45 mg (fenofibric acid equiv), 135 mg (fenofibric acid equiv)	NP					CAMZYOS- mavacamten cap 2.5 mg, 5 mg, 10 mg, 15 mg	NP	•	•		•
VASCEPA- icosapent ethyl cap 0.5 gm, 1 gm	p		•		•	CORLANOR- ivabradine hcl oral soln 5 mg/5ml (base equiv)	P		•		•
VYTORIN- ezetimibe-simvastatin tab 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg	NP			•	•	CORLANOR- ivabradine hcl tab 5 mg (base equiv), 7.5 mg (base equiv)	P		•		•
WELCHOL- colesevelam hcl packet for susp 3.75 gm	NP					ENTRESTO- sacubitril-valsartan tab 24-26 mg, 49-51 mg, 97-103 mg	P				
WELCHOL- colesevelam hcl tab 625 mg	NP					INPEFA- sotagliflozin tab 200 mg, 400 mg	NP			•	•
ZETIA- ezetimibe tab 10 mg	NP					<b>isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg (Bidil)</b>	np				
ZOCOR- simvastatin tab 10 mg, 20 mg, 40 mg	NP			•	•	LETAIRIS- ambrisentan tab 5 mg, 10 mg	NP	•	•		•
ZYPITAMAG- pitavastatin magnesium tab 2 mg (base equiv), 4 mg (base equiv)	NP			•	•	LIQREV- sildenafil citrate oral susp 10 mg/ml	NP	•	•		•
<b>CARDIOVASCULAR AGENTS - MISC.</b>						LODOCO- colchicine (cardiovascular) tab 0.5 mg	NP				
ADCIRCA- tadalafil tab 20 mg (pah)	NP	•	•		•						
ADEMPAS- riociguat tab 0.5 mg, 1 mg, 1.5 mg, 2 mg, 2.5 mg	NP	•	•		•						

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
OPSUMIT- macitentan tab 10 mg	P	•	•		•
ORENITRAM- treprostinil diolamine tab er 0.125 mg (base equiv), 0.25 mg (base equiv), 1 mg (base equiv), 2.5 mg (base equiv), 5 mg (base equiv)	NP	•	•		
ORENITRAM TITRATION KIT M- treprostinil tab er titr pk (mo1) 126 x0.125mg & 42 x0.25mg, titr pk (mo2) 126 x0.125mg & 210 x0.25mg, titr pk(mo3)126x0.125mg&42x0.25mg&8	NP	•	•		•
REVATIO- sildenafil citrate for suspension 10 mg/ml	NP	•	•		•
REVATIO- sildenafil citrate tab 20 mg	NP	•	•		•
<b>sildenafil citrate for suspension 10 mg/ml (Revatio)</b>	np	•	•		•
<b>sildenafil citrate tab 20 mg (Revatio)</b>	p	•	•		•
<b>tadalafil tab 20 mg (pah) (Adcirca)</b>	p	•	•		•
TADLIQ- tadalafil oral susp 20 mg/5ml (pah)	NP	•	•		•
TRACLEER- bosentan tab for oral susp 32 mg	P	•	•		•
TRACLEER- bosentan tab 62.5 mg, 125 mg	NP	•	•		•
TYVASO- treprostinil inhalation solution 0.6 mg/ml	NP	•	•		•
TYVASO DPI MAINTENANCE KI- treprostinil inh powder 16 mcg/ cartridge, 32 mcg/cartridge, 48 mcg/ cartridge, 64 mcg/cartridge	NP	•	•		•
TYVASO DPI TITRATION KIT- treprostinil inh powder 112 x 16mcg & 84 x 32mcg	NP	•	•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
TYVASO DPI TITRATION KIT- treprostinil inh powd 112 x 16mcg & 112 x 32mcg & 28 x 48mcg	NP	•	•		•
TYVASO REFILL- treprostinil inhalation solution 0.6 mg/ml	NP	•	•		•
TYVASO STARTER- treprostinil inhalation solution 0.6 mg/ml	NP	•	•		•
UPTRAVI- selexipag tab 200 mcg, 400 mcg, 600 mcg, 800 mcg, 1000 mcg, 1200 mcg, 1400 mcg, 1600 mcg	P	•	•		•
UPTRAVI TITRATION PACK- selexipag tab therapy pack 200 mcg (140) & 800 mcg (60)	P	•	•		•
VENTAVIS- iloprost inhalation solution 10 mcg/ml, 20 mcg/ml	NP	•	•		•
VERQUVO- vericiguat tab 2.5 mg, 5 mg, 10 mg	P		•		•
VYNDAMAX- tafamidis cap 61 mg	P	•	•		•
VYNDAQEL- tafamidis meglumine (cardiac) cap 20 mg	P	•	•		•
<b>ERECTILE DYSFUNCTION</b>					
CAVERJECT- alprostadil for inj 20 mcg, 40 mcg	NP				
CAVERJECT IMPULSE- alprostadil for inj kit 10 mcg, 20 mcg	NP				
CIALIS- tadalafil tab 5 mg, 10 mg, 20 mg	NP				•
EDEX- alprostadil for inj kit 10 mcg, 20 mcg, 40 mcg	NP				
MUSE- alprostadil urethral pellet 250 mcg, 500 mcg, 1000 mcg	NP				
<b>sildenafil citrate tab 25 mg, 50 mg, 100 mg (Viagra)</b>	np				•
STENDRA- avanafil tab 50 mg, 100 mg, 200 mg	NP				•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands



Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
tadalafil tab 2.5 mg, 5 mg, 10 mg, 20 mg (Cialis)	p				•
vardenafil hcl orally disintegrating tab 10 mg	np				•
vardenafil hcl tab 2.5 mg, 5 mg, 10 mg, 20 mg	np				•
VIAGRA- sildenafil citrate tab 25 mg, 50 mg, 100 mg	NP				•
<b>RESPIRATORY AGENTS</b>					
<b>ANTI-HISTAMINES</b>					
CARBINOXAMINE MALEATE- carbinoxamine maleate soln 4 mg/5ml	NP				
CARBINOXAMINE MALEATE- carbinoxamine maleate tab 6 mg	NP				
<b>carbinoxamine maleate tab 4 mg</b>	np				
<b>cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)</b>	p				
CLARINEX- desloratadine tab 5 mg	NP				
CLEMASTINE FUMARATE- clemastine fumarate tab 2.68 mg	NP				
<b>clemastine fumarate syrup 0.67 mg/5ml (0.5 mg/5ml base eq)</b>	np				
<b>cyproheptadine hcl syrup 2 mg/5ml</b>	p				
<b>cyproheptadine hcl tab 4 mg</b>	p				
DESLORATADINE ODT- desloratadine tab orally disintegrating 2.5 mg, 5 mg	P				
<b>desloratadine tab 5 mg (Clarinet)</b>	p				
<b>diphenhydramine hcl elixir 12.5 mg/5ml</b>	np				
KARBINAL ER- carbinoxamine maleate extended release susp 4 mg/5ml	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)</b>	p				
<b>levocetirizine dihydrochloride tab 5 mg</b>	p				
<b>promethazine hcl suppos 12.5 mg, 25 mg</b>	p				
<b>promethazine hcl syrup 6.25 mg/5ml</b>	p				
<b>promethazine hcl tab 12.5 mg, 25 mg, 50 mg</b>	p				
PROMETHEGAN- promethazine hcl suppos 50 mg	P				
RYCLORA- dexchlorpheniramine maleate oral soln 2 mg/5ml	NP				
RYVENT- carbinoxamine maleate tab 6 mg	NP				
<b>NASAL AGENTS - SYSTEMIC and TOPICAL</b>					
<b>azelastine hcl nasal spray 0.1% (137 mcg/spray), 0.15% (205.5 mcg/spray)</b>	p				•
<b>azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act (Dymista)</b>	np				•
DYMISTA- azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act	NP				•
<b>flunisolide nasal soln 25 mcg/act (0.025%)</b>	p				•
<b>fluticasone propionate nasal susp 50 mcg/act</b>	p				•
<b>ipratropium bromide nasal soln 0.03% (21 mcg/spray), 0.06% (42 mcg/spray)</b>	p				•
<b>mometasone furoate nasal susp 50 mcg/act</b>	p				•
<b>olopatadine hcl nasal soln 0.6% (Patanase)</b>	np				•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
OMNARIS- ciclesonide nasal susp 50 mcg/act	NP				•
QNASL- beclomethasone dipropionate nasal aerosol 80 mcg/act	NP				•
QNASL CHILDRENS- beclomethasone dipropionate nasal aerosol 40 mcg/act	NP				•
RYALTRIS- olopatadine hcl-mometasone furoate nasal susp 665-25 mcg/act	NP				•
XHANCE- fluticasone propionate nasal exhaler susp 93 mcg/act	NP		•		•
ZETONNA- ciclesonide nasal aerosol soln 37 mcg/act (50 mcg/valve)	NP				•
<b>COUGH/COLD/ALLERGY</b>					
acetylcysteine inhal soln 10%, 20%	p				
benzonatate cap 100 mg, 150 mg, 200 mg	np				
CLARINEX-D 12 HOUR- desloratadine & pseudoephedrine tab er 12hr 2.5-120 mg	NP				
HYCODAN- hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml	NP				
HYCODAN- hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg	NP				
hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml (Hycodan)	np				
hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg (Hycodan)	np				
HYDROCODONE POLISTIREX/CH- hydrocod polst-chlorphen polst er susp 10-8 mg/5ml	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
HYPERSAL- sodium chloride soln nebu 7%	NP				
PROMETHAZINE VC- promethazine & phenylephrine syrup 6.25-5 mg/5ml	NP				
PROMETHAZINE VC/CODEINE- promethazine-phenylephrine-codeine syrup 6.25-5-10 mg/5ml	NP				
<b>promethazine w/ codeine syrup 6.25-10 mg/5ml</b>	np				
<b>promethazine-dm syrup 6.25-15 mg/5ml</b>	np				
<b>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</b>	np				
<b>sodium chloride soln nebu 3%</b>	p				
<b>sodium chloride soln nebu 7% (Hypersal)</b>	p				
<b>sodium chloride soln nebu 7% (Hypersal)</b>	np				
TUXARIN ER- codeine phos-chlorpheniramine maleate tab er 12hr 54.3-8 mg	NP				
<b>ANTIASTHMATIC and BRONCHODILATOR AGENTS</b>					
ACCOLATE- zafirlukast tab 10 mg, 20 mg	NP				
ADVAIR DISKUS- fluticasone-salmeterol aer powder ba 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	NP			•	•
ADVAIR HFA- fluticasone-salmeterol inhal aerosol 45-21 mcg/act, 115-21 mcg/act, 230-21 mcg/act	P				•
AIRDUO DIGIHALER 113/14- fluticasone-salmeterol aer powder ba 113-14 mcg/act w/sensor	NP				•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
AIRDUO DIGIHALER 232/14- fluticasone-salmeterol aer powder ba 232-14 mcg/act w/sensor	NP				•
AIRDUO DIGIHALER 55/14- fluticasone-salmeterol aer powder ba 55-14 mcg/act w/ sensor	NP				•
AIRDUO RESPICLICK 113/14- fluticasone-salmeterol aer powder ba 113-14 mcg/act	NP		•		•
AIRDUO RESPICLICK 232/14- fluticasone-salmeterol aer powder ba 232-14 mcg/act	NP		•		•
AIRDUO RESPICLICK 55/14- fluticasone-salmeterol aer powder ba 55-14 mcg/act	NP		•		•
AIRSUPRA- albuterol-budesonide inhalation aerosol 90-80 mcg/act	NP				•
ALBUTEROL SULFATE- albuterol sulfate soln nebu 0.5% (5 mg/ml)	P				
ALBUTEROL SULFATE HFA- albuterol sulfate inhal aero 108 mcg/ act (90mcg base equiv)	NP		•		•
<b>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv) (Proventil hfa)</b>	p				•
<b>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv)</b>	p				
<b>albuterol sulfate syrup 2 mg/5ml</b>	p				
<b>albuterol sulfate tab 2 mg, 4 mg</b>	p				
ALVESCO- ciclesonide inhal aerosol 80 mcg/act, 160 mcg/act	NP		•		•
ANORO ELLIPTA- umeclidinium- vilanterol aero powd ba 62.5-25 mcg/act	P				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>arformoterol tartrate soln nebu 15 mcg/2ml (base equiv) (Brovana)</b>	np				
ARMONAIR DIGIHALER- fluticasone propionate aer pow ba 55 mcg/ act with sensor, 113 mcg/act with sensor, 232 mcg/act with sensor	NP				•
ARNUITY ELLIPTA- fluticasone furoate aerosol powder breath activ 50 mcg/act, 100 mcg/act, 200 mcg/ act	P				•
ASMANEX HFA- mometasone furoate inhal aerosol suspension 50 mcg/ act, 100 mcg/act, 200 mcg/act	P				•
ASMANEX TWISTHALER 120 ME- mometasone furoate inhal powd 220 mcg/act (breath activated)	P				•
ASMANEX TWISTHALER 30 MET- mometasone furoate inhal powd 110 mcg/act (breath activated), 220 mcg/act (breath activated)	P				•
ASMANEX TWISTHALER 60 MET- mometasone furoate inhal powd 220 mcg/act (breath activated)	P				•
ATROVENT HFA- ipratropium bromide hfa inhal aerosol 17 mcg/act	P				•
BEVESPI AEROSPHERE- glycopyrrolate- formoterol fumarate aerosol 9-4.8 mcg/act	NP				•
BREO ELLIPTA- fluticasone furoate- vilanterol aero powd ba 50-25 mcg/ act, 100-25 mcg/act, 200-25 mcg/ act	P				•
BREZTRI AEROSPHERE- budesonide-glycopyrrolate- formoterol aers 160-9-4.8 mcg/act	P				•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
BROVANA- arformoterol tartrate soln nebu 15 mcg/2ml (base equiv)	NP				
<b>budesonide inhalation susp 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml (Pulmicort)</b>	p				
COMBIVENT RESPIMAT- ipratropium-albuterol inhal aerosol soln 20-100 mcg/act	P				•
<b>cromolyn sodium soln nebu 20 mg/2ml</b>	p				
DALIRESP- roflumilast tab 250 mcg, 500 mcg	NP				
DUAKLIR PRESSAIR- aclidinium br-formoterol fum aero pow br act 400-12 mcg/act	NP				•
DULERA- mometasone furoate-formoterol fumarate aerosol 50-5 mcg/act, 100-5 mcg/act, 200-5 mcg/act	P				•
FASENRA PEN- benralizumab subcutaneous soln auto-injector 30 mg/ml	P	•	•		•
FLUTICASONE FUROATE/VILAN- fluticasone furoate-vilanterol aero powd ba 100-25 mcg/act, 200-25 mcg/act	NP				•
FLUTICASONE PROPIONATE HF- fluticasone propionate hfa inhal aero 44 mcg/act (50/valve)	NP			•	•
FLUTICASONE PROPIONATE HF- fluticasone propionate hfa inhal aer 110 mcg/act (125/valve), 220 mcg/act (250/valve)	NP			•	•
FLUTICASONE PROPIONATE/SA- fluticasone-salmeterol aer powder ba 55-14 mcg/act, 113-14 mcg/act, 232-14 mcg/act	P				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
FLUTICASONE PROPIONATE/SA- fluticasone-salmeterol inhal aerosol 45-21 mcg/act, 115-21 mcg/act, 230-21 mcg/act	NP				•
<b>fluticasone-salmeterol aer powder ba 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act (Advair diskus)</b>	p				•
<b>formoterol fumarate soln nebu 20 mcg/2ml (Perforomist)</b>	np				
INCRUSE ELLIPTA- umeclidinium br aero powd breath act 62.5 mcg/act (base eq)	P				•
<b>ipratropium bromide inhal soln 0.02%</b>	p				
<b>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</b>	p				
<b>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv) (Xopenex concentrate)</b>	p				
<b>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv) (Xopenex)</b>	p				
LEVALBUTEROL TARTRATE HFA- levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)	NP				•
<b>montelukast sodium chew tab 4 mg (base equiv), 5 mg (base equiv) (Singulair)</b>	p				
<b>montelukast sodium oral granules packet 4 mg (base equiv) (Singulair)</b>	p				
<b>montelukast sodium tab 10 mg (base equiv) (Singulair)</b>	p				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
NUCALA- mepolizumab subcutaneous solution auto-injector 100 mg/ml	P	•	•		•
NUCALA- mepolizumab subcutaneous solution pref syringe 40 mg/0.4ml, 100 mg/ml	P	•	•		•
PERFOROMIST- formoterol fumarate soln nebu 20 mcg/2ml	NP				
PROAIR DIGIHALER- albuterol sulfate aer pow ba 108 mcg/act with sensor	NP			•	•
PROAIR RESPICLICK- albuterol sulfate aer pow ba 108 mcg/act (90 mcg base equiv)	NP			•	•
PROVENTIL HFA- albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)	NP			•	•
PULMICORT- budesonide inhalation susp 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml	NP				
PULMICORT FLEXHALER- budesonide inhal aero powd 90 mcg/act (breath activated), 180 mcg/act (breath activated)	NP				•
QVAR REDIHALER- beclomethasone diprop hfa breath act inh aer 40 mcg/act, 80 mcg/act	P				•
<b>roflumilast tab 250 mcg, 500 mcg (Daliresp)</b>	np				
SEREVENT DISKUS- salmeterol xinafoate aer pow ba 50 mcg/act (base equiv)	P				•
SINGULAIR- montelukast sodium chew tab 4 mg (base equiv), 5 mg (base equiv)	NP				
SINGULAIR- montelukast sodium oral granules packet 4 mg (base equiv)	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
SINGULAIR- montelukast sodium tab 10 mg (base equiv)	NP				
SPIRIVA HANDIHALER- tiotropium bromide monohydrate inhal cap 18 mcg (base equiv)	p				•
SPIRIVA RESPIMAT- tiotropium bromide monohydrate inhal aerosol 1.25 mcg/act, 2.5 mcg/act	P				•
STIOLTO RESPIMAT- tiotropium br-olodaterol inhal aero soln 2.5-2.5 mcg/act	P				•
STRIVERDI RESPIMAT- olodaterol hcl inhal aerosol soln 2.5 mcg/act (base equiv)	NP				•
SYMBICORT- budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act, 160-4.5 mcg/act	p				•
<b>terbutaline sulfate tab 2.5 mg, 5 mg</b>	p				
TEZSPIRE- tezepelumab-ekko subcutaneous soln auto-inj 210 mg/1.91ml	P	•	•		•
THEO-24- theophylline cap er 24hr 100 mg, 200 mg, 300 mg, 400 mg	NP				
<b>theophylline elixir 80 mg/15ml</b>	np				
THEOPHYLLINE ER- theophylline tab er 12hr 100 mg, 200 mg	NP				
<b>theophylline soln 80 mg/15ml</b>	np				
<b>theophylline tab er 12hr 300 mg, 450 mg</b>	p				
<b>theophylline tab er 24hr 400 mg, 600 mg</b>	p				
TRELEGY ELLIPTA- fluticasone-umeclidinium-vilanterol aepb 100-62.5-25 mcg/act, 200-62.5-25 mcg/act	P				•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
TUDORZA PRESSAIR- acclidinium bromide aerosol powd breath activated 400 mcg/act	NP				•	ORKAMBI- lumacaftor-ivacaftor granules packet 75-94 mg, 100-125 mg, 150-188 mg	NP	•	•		•
VENTOLIN HFA- albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)	P				•	ORKAMBI- lumacaftor-ivacaftor tab 100-125 mg, 200-125 mg	NP	•	•		•
XOLAIR- omalizumab subcutaneous soln prefilled syringe 75 mg/0.5ml, 150 mg/ml	P	•	•			PIRFENIDONE- pirfenidone tab 534 mg	NP	•	•		•
XOPENEX HFA- levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)	NP				•	<b>pirfenidone cap 267 mg (Esbriet)</b>	np	•	•		•
YUPELRI- revefenacin inhalation solution 175 mcg/3ml	NP					<b>pirfenidone tab 267 mg, 801 mg (Esbriet)</b>	np	•	•		•
<b>zafirlukast tab 10 mg, 20 mg (Accolate)</b>	p					PULMOZYME- dornase alfa inhal soln 2.5 mg/2.5ml	P	•			
<b>zileuton tab er 12hr 600 mg</b>	np					SYMDEKO- tezacaftor-ivacaftor 50-75 mg & ivacaftor 75 mg tab tbpk	P	•	•		•
ZYFLO- zileuton tab 600 mg	NP					SYMDEKO- tezacaftor-ivacaftor 100-150 mg & ivacaftor 150 mg tab tbpk	P	•	•		•
<b>RESPIRATORY AGENTS - MISC.</b>						TRIKAFTA- elexacaf-tezacaf-ivacaf 80-40-60 mg& ivacaf 59.5mg thpk gran	P	•	•		•
BRONCHITOL- mannitol inhal cap 40 mg	NP	•				TRIKAFTA- elexacaf-tezacaf-ivacaf 100-50-75 mg& ivacaf 75mg thpk gran	P	•	•		•
BRONCHITOL TOLERANCE TEST- mannitol inhal cap 40 mg	NP	•				TRIKAFTA- elexacaf-tezacaf-ivacaf 50-25-37.5 mg & ivacaftor 75 mg tbpk	P	•	•		•
ESBRIET- pirfenidone cap 267 mg	NP	•	•		•	TRIKAFTA- elexacaf-tezacaf-ivacaf 100-50-75 mg & ivacaftor 150 mg tbpk	P	•	•		•
ESBRIET- pirfenidone tab 267 mg, 801 mg	NP	•	•		•	<b>GASTROINTESTINAL AGENTS</b>					
GLASSIA- alpha1-proteinase inhibitor (human) inj 1000 mg/50ml	NP	•				<b>LAXATIVES</b>					
KALYDECO- ivacaftor packet 5.8 mg, 13.4 mg, 25 mg, 50 mg, 75 mg	P	•	•		•	CLENPIQ- sod picosulfate- mg ox-citric ac sol 10 mg-3.5 gm-12 gm/175ml	NP				
KALYDECO- ivacaftor tab 150 mg	P	•	•		•	GAVILYTE-C- peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm	P				
OFEV- nintedanib esylate cap 100 mg (base equivalent), 150 mg (base equivalent)	NP	•	•		•						

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
GOLYTELY- peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm	NP				
KRISTALOSE- lactulose oral crystal packet 10 gm, 20 gm	NP				
LACTULOSE- lactulose oral crystal packet 10 gm	NP				
<b>lactulose solution 10 gm/15ml</b>	p				
MOVIPREP- peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm	NP				
<b>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm (Golytely)</b>	p				
<b>peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm (Moviprep)</b>	np				
<b>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</b>	p				
PEG-PREP- bisacodyl tab & peg 3350-kcl-sod bicarb-nacl for soln kit	NP				
PLENVU- peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 140 gm	NP				
<b>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml (Suprep bowel prep ki)</b>	np				
SUFLAVE- peg 3350-kcl-nacl-na sulfate-mag sulfate for soln 178.7 gm	NP				
SUPREP BOWEL PREP KIT- sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml	NP				
SUTAB- sod sulfate-mg sulfate-pot chloride tab 1479-225-188 mg	NP				
<b>ANTIDIARRHEALS</b>					
<b>diphenoxylate w/ atropine tab 2.5-0.025 mg (Lomotil)</b>	p				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
DIPHENOXYLATE/ATROPINE- diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml	P				
LOMOTIL- diphenoxylate w/ atropine tab 2.5-0.025 mg	NP				
<b>loperamide hcl cap 2 mg</b>	p				
MOTOFEN- difenoxin w/ atropine tab 1-0.025 mg	NP				
MYTESI- crofelemer tab delayed release 125 mg	NP				
<b>ULCER DRUGS</b>					
ACIPHEX- rabeprazole sodium ec tab 20 mg	NP			•	•
<b>bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg (Pylera)</b>	np				
CARAFATE- sucralfate susp 1 gm/10ml	NP				
CARAFATE- sucralfate tab 1 gm	NP				
<b>cimetidine tab 200 mg</b>	np				
<b>cimetidine tab 300 mg, 400 mg, 800 mg</b>	p				
CUVPOSA- glycopyrrolate oral soln 1 mg/5ml	NP				
CYTOTEC- misoprostol tab 100 mcg, 200 mcg	NP				
DEXILANT- dexlansoprazole cap delayed release 30 mg, 60 mg	NP			•	•
<b>dexlansoprazole cap delayed release 30 mg, 60 mg (Dexilant)</b>	np				•
<b>dicyclomine hcl cap 10 mg</b>	p				
<b>dicyclomine hcl oral soln 10 mg/5ml</b>	p				
<b>dicyclomine hcl tab 20 mg</b>	p				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>esomeprazole magnesium cap delayed release 20 mg (base eq), 40 mg (base eq) (Nexium)</b>	p				•
<b>esomeprazole magnesium for delayed release susp packet 10 mg, 20 mg, 40 mg (Nexium)</b>	p				•
<b>famotidine for susp 40 mg/5ml</b>	p				
<b>famotidine tab 20 mg, 40 mg (Pepcid)</b>	p				
GLYCATE- glycopyrrolate tab 1.5 mg	NP				
GLYCOPYRROLATE- glycopyrrolate tab 1.5 mg	NP				
<b>glycopyrrolate oral soln 1 mg/5ml (Cuvposa)</b>	np				
<b>glycopyrrolate tab 1 mg (Robinul)</b>	p				
<b>glycopyrrolate tab 2 mg (Robinul forte)</b>	p				
HELIDAC THERAPY- metronidaz tab-tetracyc cap-bis subsal chew tab therapy pack	NP				
KONVOMEF- omeprazole-sodium bicarbonate for oral susp 2-84 mg/ml	NP			•	•
<b>lansoprazole cap delayed release 15 mg</b>	p				•
<b>lansoprazole cap delayed release 30 mg (Prevacid)</b>	p				•
<b>lansoprazole tab delayed release orally disintegrating 15 mg, 30 mg (Prevacid solutab)</b>	np				•
LANSOPRAZOLE/AMOXICILLIN/-amoxicil cap & clarithro tab & lansopraz cap dr 500 & 500 & 30mg	NP				
<b>methscopolamine bromide tab 2.5 mg, 5 mg</b>	p				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>misoprostol tab 100 mcg, 200 mcg (Cytotec)</b>	p				
NEXIUM- esomeprazole magnesium cap delayed release 20 mg (base eq), 40 mg (base eq)	NP			•	•
NEXIUM- esomeprazole magnesium for delayed release susp packet 5 mg	P			•	•
NEXIUM- esomeprazole magnesium for delayed release susp packet 10 mg, 20 mg, 40 mg	NP			•	•
NEXIUM- esomeprazole magnesium for delayed release susp pack 2.5 mg	P			•	•
NIZATIDINE- nizatidine cap 150 mg, 300 mg	NP				
OMECLAMOX-PAK- amoxicillin cap-clarithro tab w/ omepraz cap dr therapy pack	NP				
<b>omeprazole cap delayed release 10 mg, 20 mg, 40 mg</b>	p				•
<b>omeprazole-sodium bicarbonate cap 20-1100 mg, 40-1100 mg (Zegerid)</b>	np				•
<b>omeprazole-sodium bicarbonate powd pack for susp 20-1680 mg, 40-1680 mg (Zegerid)</b>	np				•
<b>pantoprazole sodium ec tab 20 mg (base equiv), 40 mg (base equiv) (Protonix)</b>	p				•
<b>pantoprazole sodium for delayed release susp packet 40 mg (Protonix)</b>	np				•
PEPCID- famotidine tab 20 mg, 40 mg	NP				
PREVACID- lansoprazole cap delayed release 30 mg	NP			•	•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands



Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
PREVACID SOLUTAB- lansoprazole tab delayed release orally disintegrating 15 mg, 30 mg	NP			•	•	ZEGERID- omeprazole-sodium bicarbonate powd pack for susp 20-1680 mg, 40-1680 mg	NP			•	•
PRILOSEC- omeprazole magnesium for delayed release susp packet 2.5 mg, 10 mg	NP			•	•	<b>ANTIEMETICS</b>					
PROTONIX- pantoprazole sodium ec tab 20 mg (base equiv), 40 mg (base equiv)	NP			•	•	AKYNZEO- netupitant-palonosetron cap 300-0.5 mg	NP				•
PROTONIX- pantoprazole sodium for delayed release susp packet 40 mg	NP			•	•	ANTIVERT- meclizine hcl chew tab 25 mg	NP				
PYLERA- bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg	NP					ANTIVERT- meclizine hcl tab 50 mg	NP				
RABEPRAZOLE SODIUM DR SPR- rabeprazole sodium capsule sprinkle dr 10 mg	NP			•	•	ANZEMET- dolasetron mesylate tab 50 mg	NP				•
<b>rabeprazole sodium ec tab 20 mg</b>	np				•	<b>aprepitant capsule therapy pack 80 &amp; 125 mg (Emend tripack)</b>	p				•
ROBINUL- glycopyrrolate tab 1 mg	NP					<b>aprepitant capsule 40 mg</b>	p				
ROBINUL FORTE- glycopyrrolate tab 2 mg	NP					<b>aprepitant capsule 80 mg (Emend)</b>	p				•
<b>sucralfate susp 1 gm/10ml (Carafate)</b>	np					<b>aprepitant capsule 125 mg</b>	p				•
<b>sucralfate tab 1 gm (Carafate)</b>	p					BONJESTA- doxylamine-pyridoxine tab er 20-20 mg	NP		•		•
TALICIA- amoxicillin-rifabutin-omeprazole cap dr 250-12.5-10 mg	NP					DICLEGIS- doxylamine-pyridoxine tab delayed release 10-10 mg	NP		•		•
VOQUEZNA DUAL PAK- amoxicillin cap 500 mg & vonoprazan tab 20 mg therapy pack	NP					<b>doxylamine-pyridoxine tab delayed release 10-10 mg (Diclegis)</b>	np		•		•
VOQUEZNA TRIPLE PAK- amoxicillin cap & clarithromycin tab & vonoprazan tab pack	NP					<b>dronabinol cap 2.5 mg (Marinol)</b>	np				
ZEGERID- omeprazole-sodium bicarbonate cap 20-1100 mg, 40-1100 mg	NP			•	•	<b>dronabinol cap 5 mg, 10 mg</b>	np				
						EMEND- aprepitant capsule 80 mg	NP				•
						EMEND- aprepitant for oral susp 125 mg (125 mg/5ml)	P				•
						EMEND TRIPACK- aprepitant capsule therapy pack 80 & 125 mg	NP				•
						<b>granisetron hcl tab 1 mg</b>	p				•
						MARINOL- dronabinol cap 2.5 mg	NP				
						<b>meclizine hcl tab 12.5 mg, 25 mg</b>	p				
						MECLIZINE HYDROCHLORIDE- meclizine hcl tab 50 mg	NP				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ONDANSETRON HCL- ondansetron hcl tab 24 mg	P				•
<b>ondansetron hcl oral soln 4 mg/5ml</b>	p				•
<b>ondansetron hcl tab 4 mg, 8 mg</b>	p				•
<b>ondansetron orally disintegrating tab 4 mg, 8 mg</b>	p				•
SANCUSO- granisetron td patch 3.1 mg/24hr (contains 34.3 mg)	NP				•
<b>scopolamine td patch 72hr 1 mg/3days (Transderm-scop)</b>	p				
SYNDROS- dronabinol soln 5 mg/ml	NP				
TRANSDERM-SCOP- scopolamine td patch 72hr 1 mg/3days	NP				
<b>trimethobenzamide hcl cap 300 mg</b>	p				
VARUBI- rolapitant hcl tab therapy pack 2 x 90 mg (base equiv)	NP				•
<b>DIGESTIVE AIDS</b>					
CREON- pancrelipase (lip-prot-amyl) dr cap 3000-9500-15000 unit, 6000-19000-30000 unit, 12000-38000-60000 unit, 24000-76000-120000 unit, 36000-114000-180000 unit	P				
PANCREAZE- pancrelipase (lip-prot-amyl) dr cap 2600-8800-15200 unit, 4200-14200-24600 unit, 10500-35500-61500 unit, 16800-56800-98400 unit, 21000-54700-83900 unit, 37000-97300-149900 unit	NP			•	
PERTZYE- pancrelipase (lip-prot-amyl) dr cap 4000-14375-15125 unit, 8000-28750-30250 unit, 16000-57500-60500 unit, 24000-86250-90750 unit	NP			•	
SUCRAID- sacrosidase soln 8500 unit/ml	NP	•	•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
VIOKACE- pancrelipase (lip-prot-amyl) tab 10440-39150-39150 unit, 20880-78300-78300 unit	NP			•	
ZENPEP- pancrelipase (lip-prot-amyl) dr cap 3000-10000-14000 unit, 5000-17000-24000 unit, 10000-32000-42000 unit, 15000-47000-63000 unit, 20000-63000-84000 unit, 25000-79000-105000 unit, 40000-126000-168000 unit, 60000-189600-252600 unit	P				
<b>GASTROINTESTINAL AGENTS- MISC.</b>					
<b>alosetron hcl tab 0.5 mg (base equiv), 1 mg (base equiv) (Lotronex)</b>	np				
APRISO- mesalamine cap er 24hr 0.375 gm	NP				
AURYXIA- ferric citrate tab 1 gm (210 mg ferric iron)	NP				
AZULFIDINE- sulfasalazine tab 500 mg	NP				
AZULFIDINE EN-TABS- sulfasalazine tab delayed release 500 mg	NP				
<b>balsalazide disodium cap 750 mg (Colazal)</b>	p				
BYLVAY- odeixibat cap 400 mcg, 1200 mcg	NP	•	•		
BYLVAY (PELLETS)- odeixibat pellets cap sprinkle 200 mcg, 600 mcg	NP	•	•		
<b>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</b>	p				
<b>calcium acetate (phosphate binder) tab 667 mg</b>	p				
CANASA- mesalamine suppos 1000 mg	NP				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CHENODAL- chenodiol tab 250 mg	P	•				LIALDA- mesalamine tab delayed release 1.2 gm	NP				
CHOLBAM- cholic acid cap 50 mg, 250 mg	NP	•				LINZESS- linaclotide cap 72 mcg, 145 mcg, 290 mcg	NP		•		•
CIMZIA- certolizumab pegol prefilled syringe kit 2 x 200 mg/ml	NP	•	•		•	LIVMARLI- maralixibat chloride oral soln 9.5 mg/ml	NP	•	•		
CIMZIA STARTER KIT- certolizumab pegol prefilled syringe kit 6 x 200 mg/ml	NP	•	•		•	LOTRONEX- alosetron hcl tab 0.5 mg (base equiv), 1 mg (base equiv)	NP				
COLAZAL- balsalazide disodium cap 750 mg	NP					<b>lubiprostone cap 8 mcg, 24 mcg (Amitiza)</b>	np		•		•
<b>cromolyn sodium oral conc 100 mg/5ml (Gastrocrom)</b>	np					<b>mesalamine cap dr 400 mg (Delzicol)</b>	p				
DELZICOL- mesalamine cap dr 400 mg	NP					<b>mesalamine cap er 24hr 0.375 gm (Apriso)</b>	p				
DIPENTUM- olsalazine sodium cap 250 mg	NP					<b>mesalamine cap er 500 mg (Pentasa)</b>	np				
FOSRENOL- lanthanum carbonate chew tab 500 mg (elemental), 750 mg (elemental), 1000 mg (elemental)	NP					MESALAMINE DR- mesalamine tab delayed release 800 mg	P				
FOSRENOL- lanthanum carbonate oral powder pack 750 mg (elemental), 1000 mg (elemental)	NP					<b>mesalamine enema 4 gm</b>	p				
GASTROCROM- cromolyn sodium oral conc 100 mg/5ml	NP					<b>mesalamine suppos 1000 mg (Canasa)</b>	p				
GATTEX- teduglutide (rdna) for inj kit 5 mg	NP	•	•			<b>mesalamine tab delayed release 1.2 gm (Lialda)</b>	p				
GIMOTI- metoclopramide hcl nasal spray 15 mg/act	NP					<b>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</b>	p				
IBSRELA- tenapanor hcl tab 50 mg	NP		•		•	<b>metoclopramide hcl tab 5 mg (base equivalent), 10 mg (base equivalent) (Reglan)</b>	p				
<b>lactulose (encephalopathy) solution 10 gm/15ml</b>	p					METOCLOPRAMIDE ODT- metoclopramide hcl orally disintegrating tab 5 mg (base eq)	NP				
<b>lanthanum carbonate chew tab 500 mg (elemental), 750 mg (elemental), 1000 mg (elemental) (Fosrenol)</b>	np					MOTEGRITY- prucalopride succinate tab 1 mg (base equivalent), 2 mg (base equivalent)	NP		•		•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
MOVANTIK- naloxegol oxalate tab 12.5 mg (base equivalent), 25 mg (base equivalent)	P		•		•
OCALIVA- obeticholic acid tab 5 mg, 10 mg	NP	•	•		•
PENTASA- mesalamine cap er 250 mg, 500 mg	NP				
REGLAN- metoclopramide hcl tab 5 mg (base equivalent), 10 mg (base equivalent)	NP				
RELISTOR- methylnaltrexone bromide inj 8 mg/0.4ml (20 mg/ml), 12 mg/0.6ml (20 mg/ml)	NP		•		•
RELISTOR- methylnaltrexone bromide tab 150 mg	NP		•		•
RELTONE- ursodiol cap 200 mg, 400 mg	NP				
REVELA- sevelamer carbonate packet 0.8 gm, 2.4 gm	NP				
REVELA- sevelamer carbonate tab 800 mg	NP				
<b>sevelamer carbonate packet 0.8 gm, 2.4 gm (Renvela)</b>	p				
<b>sevelamer carbonate tab 800 mg (Renvela)</b>	p				
<b>sevelamer hcl tab 400 mg</b>	np				
<b>sevelamer hcl tab 800 mg (Renagel)</b>	np				
SFROWASA- mesalamine sulfite-free (sf) enema 4 gm/60ml	NP				
SKYRIZI- risankizumab-rzaa subcutaneous soln cartridge 180 mg/1.2ml, 360 mg/2.4ml	P	•	•		•
<b>sulfasalazine tab delayed release 500 mg (Azulfidine en-tabs)</b>	p				
<b>sulfasalazine tab 500 mg (Azulfidine)</b>	p				

  

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
SYMPROIC- naldemedine tosylate tab 0.2 mg (base equivalent)	P		•		•
TRULANCE- plecanatide tab 3 mg	P		•		•
URSO FORTE- ursodiol tab 500 mg	NP				
URSO 250- ursodiol tab 250 mg	NP				
URSODIOL- ursodiol cap 200 mg, 400 mg	NP				
<b>ursodiol cap 300 mg</b>	p				
<b>ursodiol tab 250 mg (Urso 250)</b>	p				
<b>ursodiol tab 500 mg (Urso forte)</b>	p				
VELPHORO- sucroferic oxyhydroxide chew tab 500 mg	P				
VIBERZI- eluxadoline tab 75 mg, 100 mg	P				
VOWST- fecal microbiota spores, live-brpk caps	NP	•	•		•
XERMELO- telotristat ethyl tab 250 mg (as telotristat etiprate)	NP	•	•		•
<b>GENITOURINARY AGENTS</b>					
<b>URINARY ANTISPASMODICS</b>					
<b>bethanechol chloride tab 5 mg, 10 mg, 25 mg, 50 mg</b>	np				
<b>darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv), 15 mg (base equiv)</b>	np				•
DETROL- tolterodine tartrate tab 1 mg, 2 mg	NP				•
DETROL LA- tolterodine tartrate cap er 24hr 2 mg, 4 mg	NP				•
<b>fesoterodine fumarate tab er 24hr 4 mg, 8 mg (Toviaz)</b>	np				•
GELNIQUE- oxybutynin chloride td gel 10%	NP				•
GEMTESA- vibegron tab 75 mg	NP				•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
MYRBETRIQ- mirabegron granules for oral extended release susp 8 mg/ml	NP			•	•	<b>clindamycin phosphate vaginal cream 2% (Cleocin)</b>	p				
MYRBETRIQ- mirabegron tab er 24 hr 25 mg, 50 mg	NP			•	•	CLINDESSE- clindamycin phosphate (one dose) vaginal cream 2%	NP				
OXYBUTYNIN CHLORIDE- oxybutynin chloride tab 2.5 mg	NP			•	•	CRINONE- progesterone vaginal gel 4%, 8%	NP			•	•
<b>oxybutynin chloride solution 5 mg/5ml</b>	p				•	ENCARE- nonoxynol-9 vaginal suppos 100 mg	NP				
<b>oxybutynin chloride tab er 24hr 5 mg, 10 mg (Ditropan xl)</b>	p				•	ENDOMETRIN- progesterone vaginal insert 100 mg	P				•
<b>oxybutynin chloride tab er 24hr 15 mg</b>	p				•	ESTRACE- estradiol vaginal cream 0.1 mg/gm	NP				•
<b>oxybutynin chloride tab 5 mg</b>	p				•	<b>estradiol vaginal cream 0.1 mg/gm (Estrace)</b>	p				•
OXYTROL- oxybutynin td patch twice weekly 3.9 mg/24hr	NP			•	•	<b>estradiol vaginal tab 10 mcg (Vagifem)</b>	p				
<b>solifenacin succinate tab 5 mg, 10 mg (Vesicare)</b>	p				•	ESTRING- estradiol vaginal ring 2 mg (7.5 mcg/24hrs)	P				•
<b>tolterodine tartrate cap er 24hr 2 mg, 4 mg (Detrol la)</b>	p				•	FEMRING- estradiol acetate vaginal ring 0.05 mg/24hr, 0.1 mg/24hr	NP				•
<b>tolterodine tartrate tab 1 mg, 2 mg (Detrol)</b>	p				•	GYNAZOLE-1- butoconazole nitrate (one dose) vaginal cream 2%	NP				
TOVIAZ- fesoterodine fumarate tab er 24hr 4 mg, 8 mg	NP			•	•	IMVEXXY MAINTENANCE PACK- estradiol vaginal insert 4 mcg, 10 mcg	NP				•
<b>tropium chloride cap er 24hr 60 mg</b>	np				•	IMVEXXY STARTER PACK- estradiol vaginal insert starter pack 4 mcg, 10 mcg	NP				•
<b>tropium chloride tab 20 mg</b>	np				•	INTRAROSA- prasterone vaginal insert 6.5 mg	NP				
VESICARE- solifenacin succinate tab 5 mg, 10 mg	NP			•	•	<b>metronidazole vaginal gel 0.75%</b>	p				
VESICARE LS- solifenacin succinate susp 5 mg/5ml (1 mg/ml)	NP			•	•	MICONAZOLE 3- miconazole nitrate vaginal suppos 200 mg	NP				
<b>VAGINAL PRODUCTS</b>						NUVESSA- metronidazole vaginal gel 1.3%	NP				
CLEOCIN- clindamycin phosphate vaginal cream 2%	NP										
CLEOCIN- clindamycin phosphate vaginal suppos 100 mg	NP										

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
OPTIONS GYNOL II VAGINAL- nonoxynol-9 gel 3%	NP					ELMIRON- pentosan polysulfate sodium caps 100 mg	NP				
PHEXXI- lactic acid-citric acid- potassium bitartrate gel 1.8-1-0.4%	NP					ENTADFI- finasteride-tadalafil cap 5-5 mg	NP				•
PREMARIN- estrogens, conjugated vaginal cream 0.625 mg/gm	NP					FILSPARI- sparsentan tab 200 mg, 400 mg	NP	•	•		•
<b>terconazole vaginal cream 0.4%, 0.8%</b>	p					<b>finasteride tab 5 mg (Proscar)</b>	p				•
<b>terconazole vaginal suppos 80 mg</b>	p					FLOMAX- tamsulosin hcl cap 0.4 mg	NP				•
TODAY SPONGE- nonoxynol-9 vaginal sponge 1000 mg	NP					JALYN- dutasteride-tamsulosin hcl cap 0.5-0.4 mg	NP				•
VAGIFEM- estradiol vaginal tab 10 mcg	NP					K-PHOS NO 2- potassium & sodium acid phosphates tab 305-700 mg	P				
VANDAZOLE- metronidazole vaginal gel 0.75%	P					LITHOSTAT- acetohydroxamic acid tab 250 mg	NP				
VCF VAGINAL CONTRACEPTIVE- nonoxynol-9 gel 4%	NP					<b>potassium citrate tab er 5 meq (540 mg) (Urocit-k 5)</b>	p				
VCF VAGINAL CONTRACEPTIVE- nonoxynol-9 film 28%	NP					<b>potassium citrate tab er 10 meq (1080 mg) (Urocit-k 10)</b>	p				
VCF VAGINAL CONTRACEPTIVE- nonoxynol-9 foam 12.5%	NP					<b>potassium citrate tab er 15 meq (1620 mg) (Urocit-k 15)</b>	p				
XACIATO- clindamycin phosphate vaginal gel 2%	NP					PROCYSBI- cysteamine bitartrate cap delayed release 25 mg (base equiv), 75 mg (base equiv)	NP	•	•		
<b>GENITOURINARY AGENTS - MISC.</b>						PROCYSBI- cysteamine bitartrate delayed release granules packet 75 mg, 300 mg	NP	•	•		
<b>alfuzosin hcl tab er 24hr 10 mg (Uroxatral)</b>	p				•	PROSCAR- finasteride tab 5 mg	NP				•
AVODART- dutasteride cap 0.5 mg	NP				•	RAPAFLO- silodosin cap 4 mg, 8 mg	NP				•
CARDURA XL- doxazosin mesylate tab er 24 hr 4 mg (base equiv), 8 mg (base equiv)	NP				•	<b>silodosin cap 4 mg, 8 mg (Rapaflo)</b>	np				•
CYSTAGON- cysteamine bitartrate cap 50 mg, 150 mg	P	•				<b>sodium citrate &amp; citric acid soln 500-334 mg/5ml</b>	p				
<b>dutasteride cap 0.5 mg (Avodart)</b>	p				•	<b>sodium citrate &amp; citric acid soln 500-334 mg/5ml</b>	np				
<b>dutasteride-tamsulosin hcl cap 0.5-0.4 mg (Jalyn)</b>	np				•	<b>tamsulosin hcl cap 0.4 mg (Flomax)</b>	p				•
						THIOLA- tiopronin tab 100 mg	NP				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
THIOLA EC- tiopronin tab delayed release 100 mg, 300 mg	NP					<b>diazepam tab 2 mg, 5 mg, 10 mg (Valium)</b>	p				
<b>tiopronin tab 100 mg (Thiola)</b>	np					<b>hydroxyzine hcl syrup 10 mg/5ml</b>	p				
UROKIT-K 10- potassium citrate tab er 10 meq (1080 mg)	NP					<b>hydroxyzine hcl tab 10 mg, 25 mg, 50 mg</b>	p				
UROKIT-K 15- potassium citrate tab er 15 meq (1620 mg)	NP					HYDROXYZINE PAMOATE- hydroxyzine pamoate cap 100 mg	P				
UROKIT-K 5- potassium citrate tab er 5 meq (540 mg)	NP					<b>hydroxyzine pamoate cap 25 mg, 50 mg (Vistaril)</b>	p				
UROXATRAL- alfuzosin hcl tab er 24hr 10 mg	NP				•	<b>lorazepam conc 2 mg/ml</b>	p				
<b>CENTRAL NERVOUS SYSTEM DRUGS</b>						<b>lorazepam tab 0.5 mg, 1 mg, 2 mg (Ativan)</b>	p				
<b>ANTIANSIETY AGENTS</b>						LOREEV XR- lorazepam cap er 24hr sprinkle 1 mg, 1.5 mg, 2 mg, 3 mg	NP				
ALPRAZOLAM INTENSOL- alprazolam conc 1 mg/ml	NP					<b>oxazepam cap 10 mg, 15 mg, 30 mg</b>	np				
<b>alprazolam orally disintegrating tab 0.25 mg, 0.5 mg, 1 mg, 2 mg</b>	np					VALIUM- diazepam tab 2 mg, 5 mg, 10 mg	NP				
<b>alprazolam tab er 24hr 0.5 mg, 1 mg, 2 mg, 3 mg (Xanax xr)</b>	p					VISTARIL- hydroxyzine pamoate cap 25 mg	NP				
<b>alprazolam tab 0.25 mg, 0.5 mg, 1 mg, 2 mg (Xanax)</b>	p					XANAX- alprazolam tab 0.25 mg, 0.5 mg, 1 mg, 2 mg	NP				
ATIVAN- lorazepam tab 0.5 mg, 1 mg, 2 mg	NP					XANAX XR- alprazolam tab er 24hr 0.5 mg, 1 mg, 2 mg, 3 mg	NP				
<b>bupirone hcl tab 5 mg, 10 mg, 15 mg, 30 mg</b>	p					<b>ANTIDEPRESSANTS</b>					
<b>bupirone hcl tab 7.5 mg</b>	np					<b>amitriptyline hcl tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg</b>	p				
<b>chlordiazepoxide hcl cap 5 mg, 10 mg, 25 mg</b>	np					ANAFRANIL- clomipramine hcl cap 25 mg, 50 mg, 75 mg	NP				
<b>clorazepate dipotassium tab 3.75 mg, 15 mg</b>	np					APLENZIN- bupropion hbr tab er 24hr 174 mg, 348 mg, 522 mg	NP			•	•
<b>clorazepate dipotassium tab 7.5 mg (Tranxene t)</b>	np					AUVELITY- dextromethorphan hbr-bupropion hcl tab er 45-105 mg	NP			•	•
<b>diazepam conc 5 mg/ml</b>	np					<b>bupropion hcl tab er 12hr 100 mg, 150 mg, 200 mg (Wellbutrin sr)</b>	p				•
<b>diazepam oral soln 1 mg/ml</b>	p										

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>bupropion hcl tab er 24hr 150 mg, 300 mg (Wellbutrin xl)</b>	p				•	<b>duloxetine hcl enteric coated pellets cap 20 mg (base eq), 30 mg (base eq), 60 mg (base eq) (Cymbalta)</b>	p				•
<b>bupropion hcl tab 75 mg, 100 mg</b>	p				•	<b>duloxetine hcl enteric coated pellets cap 40 mg (base eq)</b>	np				•
BUPROPION HYDROCHLORIDE E-bupropion hcl tab er 24hr 450 mg	NP			•	•	EFFEXOR XR- venlafaxine hcl cap er 24hr 37.5 mg (base equivalent), 75 mg (base equivalent), 150 mg (base equivalent)	NP			•	•
CELEXA- citalopram hydrobromide tab 10 mg (base equiv), 20 mg (base equiv), 40 mg (base equiv)	NP			•	•	EMSAM- selegiline td patch 24hr 6 mg/24hr, 9 mg/24hr, 12 mg/24hr	NP				
CITALOPRAM HYDROBROMIDE- citalopram hydrobromide cap 30 mg	NP			•	•	<b>escitalopram oxalate soln 5 mg/5ml (base equiv)</b>	p				•
<b>citalopram hydrobromide oral soln 10 mg/5ml</b>	p				•	<b>escitalopram oxalate tab 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv) (Lexapro)</b>	p				•
<b>citalopram hydrobromide tab 10 mg (base equiv), 20 mg (base equiv), 40 mg (base equiv) (Celexa)</b>	p				•	FETZIMA- levomilnacipran hcl cap er 24hr 20 mg (base equivalent), 40 mg (base equivalent), 80 mg (base equivalent), 120 mg (base equivalent)	NP			•	•
<b>clomipramine hcl cap 25 mg, 50 mg, 75 mg (Anafranil)</b>	p					FETZIMA TITRATION PACK- levomilnacipran hcl cap er 24hr 20 & 40 mg therapy pack	NP			•	•
CYMBALTA- duloxetine hcl enteric coated pellets cap 20 mg (base eq), 30 mg (base eq), 60 mg (base eq)	NP			•	•	FLUOXETINE DR- fluoxetine hcl cap delayed release 90 mg	NP			•	•
<b>desipramine hcl tab 10 mg, 25 mg (Norpramin)</b>	p					<b>fluoxetine hcl cap 10 mg, 20 mg, 40 mg (Prozac)</b>	p				•
<b>desipramine hcl tab 50 mg, 75 mg, 100 mg, 150 mg</b>	p					<b>fluoxetine hcl solution 20 mg/5ml</b>	p				•
DESVENLAFAXINE ER- desvenlafaxine tab er 24hr 50 mg, 100 mg	NP			•	•	<b>fluoxetine hcl tab 10 mg, 20 mg</b>	np				•
<b>desvenlafaxine succinate tab er 24hr 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv) (Pristiq)</b>	p				•	<b>fluoxetine hcl tab 60 mg (Fluoxetine hydrochlo)</b>	np				•
<b>doxepin hcl cap 10 mg, 25 mg, 50 mg, 75 mg, 100 mg</b>	p					FLUOXETINE HYDROCHLORIDE- fluoxetine hcl tab 60 mg	NP			•	•
<b>doxepin hcl cap 150 mg</b>	np					<b>fluvoxamine maleate cap er 24hr 100 mg, 150 mg</b>	np				•
<b>doxepin hcl conc 10 mg/ml</b>	p										

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands



Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>fluvoxamine maleate tab 25 mg, 50 mg, 100 mg</b>	p				•	PAXIL- paroxetine hcl tab 10 mg, 20 mg, 30 mg, 40 mg	NP			•	•
FORFIVO XL- bupropion hcl tab er 24hr 450 mg	NP			•	•	PAXIL CR- paroxetine hcl tab er 24hr 12.5 mg, 25 mg, 37.5 mg	NP			•	•
<b>imipramine hcl tab 10 mg, 25 mg, 50 mg</b>	p					PHENELZINE SULFATE- phenelzine sulfate tab 15 mg	P				
<b>imipramine pamoate cap 75 mg, 100 mg, 125 mg, 150 mg</b>	np					PRISTIQ- desvenlafaxine succinate tab er 24hr 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv)	NP			•	•
LEXAPRO- escitalopram oxalate tab 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv)	NP			•	•	<b>protriptyline hcl tab 5 mg, 10 mg</b>	np				
MARPLAN- isocarboxazid tab 10 mg	NP					PROZAC- fluoxetine hcl cap 10 mg, 20 mg, 40 mg	NP			•	•
<b>mirtazapine orally disintegrating tab 15 mg, 30 mg, 45 mg (Remeron soltab)</b>	np				•	REMERON- mirtazapine tab 15 mg, 30 mg	NP			•	•
<b>mirtazapine tab 7.5 mg, 45 mg</b>	p				•	REMERON SOLTAB- mirtazapine orally disintegrating tab 15 mg, 30 mg, 45 mg	NP			•	•
<b>mirtazapine tab 15 mg, 30 mg (Remeron)</b>	p				•	<b>sertraline hcl oral concentrate for solution 20 mg/ml (Zoloft)</b>	p				•
NARDIL- phenelzine sulfate tab 15 mg	NP					<b>sertraline hcl tab 25 mg, 50 mg, 100 mg (Zoloft)</b>	p				•
NORPRAMIN- desipramine hcl tab 10 mg, 25 mg	NP					SERTRALINE HYDROCHLORIDE- sertraline hcl cap 150 mg, 200 mg	NP			•	•
<b>nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 75 mg (Pamelor)</b>	p					<b>tranylcypromine sulfate tab 10 mg (Parnate)</b>	p				
<b>nortriptyline hcl soln 10 mg/5ml</b>	p					<b>trazodone hcl tab 50 mg, 100 mg, 150 mg</b>	p				
PAMELOR- nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 75 mg	NP					<b>trazodone hcl tab 300 mg</b>	np				
PARNATE- tranylcypromine sulfate tab 10 mg	NP					<b>trimipramine maleate cap 25 mg, 50 mg, 100 mg</b>	np				
<b>paroxetine hcl oral susp 10 mg/5ml (base equiv) (Paxil)</b>	np				•	TRINTELLIX- vortioxetine hbr tab 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv)	NP			•	•
<b>paroxetine hcl tab er 24hr 12.5 mg, 25 mg, 37.5 mg (Paxil cr)</b>	p				•						
<b>paroxetine hcl tab 10 mg, 20 mg, 30 mg, 40 mg (Paxil)</b>	p				•						
PAXIL- paroxetine hcl oral susp 10 mg/5ml (base equiv)	NP			•	•						

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
VENLAFAXINE BESYLATE ER-venlafaxine besylate tab er 24hr 112.5 mg	NP			•	•	ABILIFY MYCITE MAINTENANC-aripiprazole tab 5 mg with sensor&strips (for pod) maint pak	NP			•	•
<b>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent), 75 mg (base equivalent), 150 mg (base equivalent) (Effexor xr)</b>	p				•	ABILIFY MYCITE MAINTENANC-aripiprazole tab 10 mg with sensor&strips(for pod) maint pak	NP			•	•
<b>venlafaxine hcl tab er 24hr 37.5 mg (base equivalent), 75 mg (base equivalent), 150 mg (base equivalent), 225 mg (base equivalent)</b>	np				•	ABILIFY MYCITE MAINTENANC-aripiprazole tab 15 mg with sensor&strips(for pod) maint pak	NP			•	•
<b>venlafaxine hcl tab 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent), 75 mg (base equivalent), 100 mg (base equivalent)</b>	p				•	ABILIFY MYCITE MAINTENANC-aripiprazole tab 20 mg with sensor&strips(for pod) maint pak	NP			•	•
VIIBRYD- vilazodone hcl tab 10 mg, 20 mg, 40 mg	NP			•	•	ABILIFY MYCITE MAINTENANC-aripiprazole tab 30 mg with sensor&strips(for pod) maint pak	NP			•	•
<b>vilazodone hcl tab 10 mg, 20 mg, 40 mg (Viibryd)</b>	np				•	ABILIFY MYCITE MAINTENANC-aripiprazole tab 30 mg with sensor, strips & pod starter pak	NP			•	•
WELLBUTRIN SR- bupropion hcl tab er 12hr 100 mg, 150 mg, 200 mg	NP			•	•	ABILIFY MYCITE STARTER KI-aripiprazole tab 2 mg with sensor, strips & pod starter pak	NP			•	•
WELLBUTRIN XL- bupropion hcl tab er 24hr 150 mg, 300 mg	NP			•	•	ABILIFY MYCITE STARTER KI-aripiprazole tab 5 mg with sensor, strips & pod starter pak	NP			•	•
ZOLOFT- sertraline hcl oral concentrate for solution 20 mg/ml	NP			•	•	ABILIFY MYCITE STARTER KI-aripiprazole tab 10 mg with sensor, strips & pod starter pak	NP			•	•
ZOLOFT- sertraline hcl tab 25 mg, 50 mg, 100 mg	NP			•	•	ABILIFY MYCITE STARTER KI-aripiprazole tab 15 mg with sensor, strips & pod starter pak	NP			•	•
<b>ANTIPSYCHOTICS</b>						ABILIFY MYCITE STARTER KI-aripiprazole tab 20 mg with sensor, strips & pod starter pak	NP			•	•
ABILIFY- aripiprazole tab 2 mg, 5 mg, 10 mg, 15 mg, 20 mg, 30 mg	NP			•	•	ABILIFY MYCITE STARTER KI-aripiprazole tab 30 mg with sensor, strips & pod starter pak	NP			•	•
ABILIFY MYCITE MAINTENANC-aripiprazole tab 2 mg with sensor&strips (for pod) maint pak	NP			•	•	<b>aripiprazole oral solution 1 mg/ml</b>	np				•
						<b>aripiprazole orally disintegrating tab 10 mg, 15 mg</b>	np				•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>aripiprazole tab 2 mg, 5 mg, 10 mg, 15 mg, 20 mg, 30 mg (Abilify)</b>	p				•	<b>haloperidol lactate oral conc 2 mg/ml</b>	p				
<b>asenapine maleate sl tab 2.5 mg (base equiv), 5 mg (base equiv), 10 mg (base equiv) (Saphris)</b>	np				•	<b>haloperidol tab 0.5 mg, 1 mg, 2 mg, 5 mg, 10 mg, 20 mg</b>	p				
CAPLYTA- lumateperone tosylate cap 10.5 mg, 21 mg, 42 mg	NP			•	•	INVEGA- paliperidone tab er 24hr 3 mg, 6 mg, 9 mg	NP			•	•
<b>chlorpromazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg, 200 mg</b>	p					LATUDA- lurasidone hcl tab 20 mg, 40 mg, 60 mg, 80 mg, 120 mg	NP			•	•
CHLORPROMAZINE HYDROCHLOR- chlorpromazine hcl conc 30 mg/ml, 100 mg/ml	NP					LITHIUM- lithium oral solution 8 meq/5ml	P				
CLOZAPINE ODT- clozapine orally disintegrating tab 12.5 mg	NP			•	•	LITHIUM CARBONATE- lithium carbonate cap 150 mg	P				
<b>clozapine orally disintegrating tab 25 mg, 100 mg, 150 mg, 200 mg</b>	np				•	LITHIUM CARBONATE- lithium carbonate cap 300 mg, 600 mg	NP				
<b>clozapine tab 25 mg, 50 mg, 100 mg, 200 mg (Clozaril)</b>	p				•	<b>lithium carbonate cap 150 mg, 300 mg, 600 mg (Lithium carbonate)</b>	p				
CLOZARIL- clozapine tab 25 mg, 50 mg, 100 mg, 200 mg	NP			•	•	<b>lithium carbonate tab er 300 mg (Lithobid)</b>	p				
EQUETRO- carbamazepine (mood) cap er 12hr 100 mg, 200 mg, 300 mg	NP					<b>lithium carbonate tab er 450 mg</b>	p				
FANAPT- iloperidone tab 1 mg, 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg	NP			•	•	<b>lithium carbonate tab 300 mg</b>	p				
FANAPT TITRATION PACK- iloperidone tab 1 mg & 2 mg & 4 mg & 6 mg titration pak	NP			•	•	LITHOBID- lithium carbonate tab er 300 mg	NP				
FLUPHENAZINE HCL- fluphenazine hcl oral conc 5 mg/ml	P					<b>loxapine succinate cap 5 mg, 10 mg, 25 mg, 50 mg</b>	p				
<b>fluphenazine hcl tab 1 mg, 2.5 mg, 5 mg, 10 mg</b>	p					<b>lurasidone hcl tab 20 mg, 40 mg, 60 mg, 80 mg, 120 mg (Latuda)</b>	p				•
FLUPHENAZINE HYDROCHLORID- fluphenazine hcl elixir 2.5 mg/5ml	P					MOLINDONE HYDROCHLORIDE- molindone hcl tab 5 mg, 10 mg, 25 mg	NP				
GEODON- ziprasidone hcl cap 20 mg, 40 mg, 60 mg, 80 mg	NP			•	•	NUPLAZID- pimavanserin tartrate cap 34 mg (base equivalent)	NP	•	•		•
						NUPLAZID- pimavanserin tartrate tab 10 mg (base equivalent)	NP	•	•		•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>olanzapine orally disintegrating tab 5 mg, 10 mg, 15 mg, 20 mg (Zyprexa zydis)</b>	p				•	<b>risperidone tab 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg (Risperdal)</b>	p				•
<b>olanzapine tab 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg (Zyprexa)</b>	p				•	SAPHRIS- asenapine maleate sl tab 2.5 mg (base equiv), 5 mg (base equiv), 10 mg (base equiv)	NP			•	•
<b>paliperidone tab er 24hr 1.5 mg, 3 mg, 6 mg, 9 mg (Invega)</b>	np				•	SECUADO- asenapine td patch 24 hr 3.8 mg/24hr, 5.7 mg/24hr, 7.6 mg/24hr	NP			•	•
<b>perphenazine tab 2 mg, 4 mg, 8 mg, 16 mg</b>	p					SEROQUEL- quetiapine fumarate tab 25 mg, 50 mg, 100 mg, 200 mg, 300 mg, 400 mg	NP			•	•
<b>prochlorperazine maleate tab 5 mg (base equivalent), 10 mg (base equivalent)</b>	p					SEROQUEL XR- quetiapine fumarate tab er 24hr 50 mg, 150 mg, 200 mg, 300 mg, 400 mg	NP			•	•
<b>prochlorperazine suppos 25 mg</b>	p					<b>thiothixene cap 1 mg, 2 mg, 5 mg, 10 mg</b>	p				
QUETIAPINE FUMARATE- quetiapine fumarate tab 150 mg	NP			•	•	<b>trifluoperazine hcl tab 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)</b>	p				
<b>quetiapine fumarate tab er 24hr 50 mg, 150 mg, 200 mg, 300 mg, 400 mg (Seroquel xr)</b>	p				•	VERSACLOZ- clozapine susp 50 mg/ml	NP			•	•
<b>quetiapine fumarate tab 25 mg, 50 mg, 100 mg, 200 mg, 300 mg, 400 mg (Seroquel)</b>	p				•	VRAYLAR- cariprazine hcl cap therapy pack 1.5 mg (1) & 3 mg (6)	NP			•	•
REXULTI- brexpiprazole tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	P			•	•	VRAYLAR- cariprazine hcl cap 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent)	NP			•	•
RISPERDAL- risperidone soln 1 mg/ml	NP			•	•	<b>ziprasidone hcl cap 20 mg, 40 mg, 60 mg, 80 mg (Geodon)</b>	p				•
RISPERDAL- risperidone tab 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	NP			•	•	ZYPREXA- olanzapine tab 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg	NP			•	•
RISPERIDONE ODT- risperidone orally disintegrating tab 0.25 mg	P			•	•	ZYPREXA ZYDIS- olanzapine orally disintegrating tab 5 mg, 10 mg, 15 mg, 20 mg	NP			•	•
<b>risperidone orally disintegrating tab 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</b>	p				•						
<b>risperidone soln 1 mg/ml (Risperdal)</b>	p				•						
<b>risperidone tab 0.25 mg</b>	p				•						
<b>HYPNOTICS</b>											

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
AMBIEN- zolpidem tartrate tab 5 mg, 10 mg	NP			•	•	SILENOR- doxepin hcl (sleep) tab 3 mg (base equiv), 6 mg (base equiv)	NP			•	•
AMBIEN CR- zolpidem tartrate tab er 6.25 mg, 12.5 mg	NP			•	•	<b>tasimelteon capsule 20 mg (Hetlioz)</b>	np	•	•		•
BELSOMRA- suvorexant tab 5 mg, 10 mg, 15 mg, 20 mg	P			•	•	<b>temazepam cap 7.5 mg, 22.5 mg (Restoril)</b>	np				
DAYVIGO- lemborexant tab 5 mg, 10 mg	NP			•	•	<b>temazepam cap 15 mg, 30 mg (Restoril)</b>	p				
DORAL- quazepam tab 15 mg	NP					<b>zaleplon cap 5 mg, 10 mg</b>	p				•
<b>doxepin hcl (sleep) tab 3 mg (base equiv), 6 mg (base equiv) (Silenor)</b>	np				•	ZOLPIDEM TARTRATE- zolpidem tartrate cap 7.5 mg	NP			•	•
EDLUAR- zolpidem tartrate sl tab 5 mg, 10 mg	NP			•	•	ZOLPIDEM TARTRATE- zolpidem tartrate sl tab 1.75 mg, 3.5 mg	NP			•	•
<b>estazolam tab 1 mg, 2 mg</b>	p					<b>zolpidem tartrate tab er 6.25 mg, 12.5 mg (Ambien cr)</b>	p				•
<b>eszopiclone tab 1 mg, 2 mg, 3 mg (Lunesta)</b>	p				•	<b>zolpidem tartrate tab 5 mg, 10 mg (Ambien)</b>	p				•
FLURAZEPAM HYDROCHLORIDE- flurazepam hcl cap 15 mg, 30 mg	NP					<b>ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ ANOREXIANTS</b>					
HETLIOZ- tasimelteon capsule 20 mg	NP	•	•		•	ADDERALL- amphetamine-dextroamphetamine tab 5 mg, 7.5 mg, 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg	NP				•
HETLIOZ LQ- tasimelteon oral susp 4 mg/ml	NP	•	•		•	ADDERALL XR- amphetamine-dextroamphetamine cap er 24hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg	NP				•
LUNESTA- eszopiclone tab 1 mg, 2 mg, 3 mg	NP			•	•	ADIPEX-P- phentermine hcl tab 37.5 mg	NP		•		•
<b>phenobarbital elixir 20 mg/5ml</b>	p					ADZENYS XR-ODT- amphetamine tab extended release disintegrating 3.1 mg, 6.3 mg, 9.4 mg, 12.5 mg, 15.7 mg, 18.8 mg	NP				•
<b>phenobarbital tab 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 100 mg</b>	p					<b>amphetamine sulfate tab 5 mg, 10 mg (Evekeo)</b>	np				•
<b>phenobarbital tab 64.8 mg, 97.2 mg</b>	np										
QUAZEPAM- quazepam tab 15 mg	NP										
QUVIVIQ- daridorexant hcl tab 25 mg, 50 mg	NP			•	•						
<b>ramelteon tab 8 mg (Rozerem)</b>	np				•						
RESTORIL- temazepam cap 7.5 mg, 15 mg, 22.5 mg, 30 mg	NP										
ROZEREM- ramelteon tab 8 mg	NP			•	•						

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>amphetamine-dextroamphetamine cap er 24hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg (Adderall xr)</b>	p				•	DAYTRANA- methylphenidate td patch 10 mg/9hr, 15 mg/9hr, 20 mg/9hr, 30 mg/9hr	NP				•
<b>amphetamine-dextroamphetamine tab 5 mg, 7.5 mg, 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg (Adderall)</b>	p				•	DESOXYN- methamphetamine hcl tab 5 mg	NP				•
<b>amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg, 25 mg, 37.5 mg, 50 mg (Mydayis)</b>	np				•	DEXEDRINE- dextroamphetamine sulfate cap er 24hr 10 mg	NP				•
APTENSIO XR- methylphenidate hcl cap er 24hr 10 mg (xr), 15 mg (xr), 20 mg (xr), 30 mg (xr), 40 mg (xr), 50 mg (xr), 60 mg (xr)	NP				•	<b>dexmethylphenidate hcl cap er 24 hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg (Focalin xr)</b>	p				•
<b>armodafinil tab 50 mg, 150 mg, 200 mg, 250 mg (Nuvigil)</b>	p					<b>dexmethylphenidate hcl tab 2.5 mg, 5 mg, 10 mg (Focalin)</b>	p				•
<b>atomoxetine hcl cap 10 mg (base equiv), 18 mg (base equiv), 25 mg (base equiv), 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv), 100 mg (base equiv) (Strattera)</b>	p				•	<b>dextroamphetamine sulfate cap er 24hr 5 mg</b>	p				•
AZSTARYS- serdexmethylphenidate-dexmethylphenidate cap 26.1-5.2 mg, 39.2-7.8 mg, 52.3-10.4 mg	P				•	<b>dextroamphetamine sulfate cap er 24hr 10 mg, 15 mg (Dexedrine)</b>	p				•
<b>caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)</b>	p					<b>dextroamphetamine sulfate oral solution 5 mg/5ml</b>	np				•
<b>clonidine hcl tab er 12hr 0.1 mg (Kapvay)</b>	np				•	<b>dextroamphetamine sulfate tab 2.5 mg</b>	np				
CONCERTA- methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 36 mg, 54 mg	NP				•	<b>dextroamphetamine sulfate tab 5 mg, 10 mg</b>	p				•
CONTRAVE- naltrexone hcl-bupropion hcl tab er 12hr 8-90 mg	NP		•		•	<b>dextroamphetamine sulfate tab 7.5 mg, 15 mg, 20 mg, 30 mg</b>	np				•
COTEMPLA XR-ODT- methylphenidate tab extended release disintegrating 8.6 mg, 17.3 mg, 25.9 mg	NP				•	DYANAVEL XR- amphetamine chew tab extended release 5 mg, 10 mg, 15 mg, 20 mg	NP				•
						DYANAVEL XR- amphetamine extended release susp 2.5 mg/ml	NP				•
						EVEKEO- amphetamine sulfate tab 5 mg, 10 mg	NP				•
						EVEKEO ODT- amphetamine sulfate orally disintegrating tab 5 mg, 10 mg, 15 mg, 20 mg	NP				•
						FOCALIN- dexmethylphenidate hcl tab 2.5 mg, 5 mg, 10 mg	NP				•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
FOCALIN XR- dexamethylphenidate hcl cap er 24 hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg	NP				•
<b>guanfacine hcl tab er 24hr 1 mg (base equiv), 2 mg (base equiv), 3 mg (base equiv), 4 mg (base equiv) (Intuniv)</b>	p				•
IMCIVREE- setmelanotide acetate subcutaneous soln 10 mg/ml	NP	•	•		•
INTUNIV- guanfacine hcl tab er 24hr 1 mg (base equiv), 2 mg (base equiv), 3 mg (base equiv), 4 mg (base equiv)	NP				•
JORNAY PM- methylphenidate hcl cap delayed er 24hr 20 mg (pm), 40 mg (pm), 60 mg (pm), 80 mg (pm), 100 mg (pm)	NP				•
<b>lisdexamfetamine dimesylate cap 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg (Vyvanse)</b>	p				•
<b>lisdexamfetamine dimesylate chew tab 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg (Vyvanse)</b>	p				•
LOMAIRA- phentermine hcl tab 8 mg	NP		•		•
<b>methamphetamine hcl tab 5 mg (Desoxyn)</b>	np				•
METHYLIN- methylphenidate hcl soln 5 mg/5ml, 10 mg/5ml	NP				•
<b>methylphenidate hcl cap er 10 mg (cd), 20 mg (cd), 30 mg (cd), 40 mg (cd), 50 mg (cd), 60 mg (cd)</b>	np				•
<b>methylphenidate hcl cap er 24hr 10 mg (la), 20 mg (la), 30 mg (la), 40 mg (la) (Ritalin la)</b>	np				•
<b>methylphenidate hcl cap er 24hr 60 mg (la)</b>	np				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>methylphenidate hcl cap er 24hr 10 mg (xr), 15 mg (xr), 20 mg (xr), 30 mg (xr), 40 mg (xr), 50 mg (xr), 60 mg (xr) (Aptensio xr)</b>	np				•
<b>methylphenidate hcl chew tab 2.5 mg, 5 mg, 10 mg</b>	np				•
<b>methylphenidate hcl soln 5 mg/5ml, 10 mg/5ml (Methylin)</b>	np				•
<b>methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 36 mg, 54 mg (Concerta)</b>	p				•
<b>methylphenidate hcl tab er 24hr 27 mg, 36 mg, 54 mg</b>	np				•
<b>methylphenidate hcl tab er 10 mg, 20 mg</b>	p				•
<b>methylphenidate hcl tab 5 mg, 10 mg, 20 mg (Ritalin)</b>	p				•
METHYLPHENIDATE HYDROCHLO-methylphenidate hcl tab er osmotic release (osm) 45 mg, 63 mg, 72 mg	NP				•
METHYLPHENIDATE HYDROCHLO-methylphenidate hcl tab er 24hr 18 mg	NP				•
<b>methylphenidate td patch 10 mg/9hr, 15 mg/9hr, 20 mg/9hr, 30 mg/9hr (Daytrana)</b>	np				•
<b>modafinil tab 100 mg, 200 mg (Provigil)</b>	p				•
MYDAYIS- amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg, 25 mg, 37.5 mg, 50 mg	NP				•
NUVIGIL- armodafinil tab 50 mg, 150 mg, 200 mg, 250 mg	NP				•
ORLISTAT- orlistat cap 120 mg	NP		•		•
<b>phentermine hcl cap 15 mg, 30 mg</b>	np		•		•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>phentermine hcl cap 37.5 mg (Adipex-p)</b>	np		•		•	VYVANSE- lisdexamfetamine dimesylate chew tab 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg	NP				•
<b>phentermine hcl tab 37.5 mg (Adipex-p)</b>	np		•		•	WAKIX- pitolisant hcl tab 4.45 mg (base equivalent), 17.8 mg (base equivalent)	NP	•	•		•
PROVIGIL- modafinil tab 100 mg, 200 mg	NP					WEGOVIY- semaglutide (weight mngmt) soln auto-injector 0.25 mg/0.5ml, 0.5 mg/0.5ml, 1 mg/0.5ml, 1.7 mg/0.75ml, 2.4 mg/0.75ml	NP		•		•
QELBREE- viloxazine hcl cap er 24hr 100 mg, 150 mg, 200 mg	NP				•	XELSTRYM- dextroamphetamine td patch 4.5 mg/9hr, 9 mg/9hr, 13.5 mg/9hr, 18 mg/9hr	NP				•
QSYMIA- phentermine hcl-topiramate cap er 24hr 3.75-23 mg, 7.5-46 mg, 11.25-69 mg, 15-92 mg	NP		•		•	XENICAL- orlistat cap 120 mg	NP		•		•
QUILLICHEW ER- methylphenidate hcl chew tab extended release 20 mg, 30 mg, 40 mg	NP				•	<b>PSYCHOTHERAPEUTIC and NEUROLOGICAL AGENTS - MISC.</b>					
QUILLIVANT XR- methylphenidate hcl for er susp 25 mg/5ml (5 mg/ml)	NP				•	<b>acamprosate calcium tab delayed release 333 mg</b>	p				
RELEXXII- methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 36 mg, 45 mg, 54 mg, 63 mg	NP				•	ADDYI- flibanserin tab 100 mg	NP		•		•
RITALIN- methylphenidate hcl tab 5 mg, 10 mg, 20 mg	NP				•	ADLARITY- donepezil hydrochloride td patch weekly 5 mg/day, 10 mg/day	NP				
RITALIN LA- methylphenidate hcl cap er 24hr 10 mg (la), 20 mg (la), 30 mg (la), 40 mg (la)	NP				•	AMPYRA- dalfampridine tab er 12hr 10 mg	NP	•	•		•
SAXENDA- liraglutide (weight mngmt) soln pen-inj 18 mg/3ml (6 mg/ml)	NP		•		•	ARICEPT- donepezil hydrochloride tab 5 mg, 10 mg, 23 mg	NP				
STRATTERA- atomoxetine hcl cap 10 mg (base equiv), 18 mg (base equiv), 25 mg (base equiv), 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv), 100 mg (base equiv)	NP				•	AUBAGIO- teriflunomide tab 7 mg, 14 mg	NP	•	•		•
SUNOSI- solriamfetol hcl tab 75 mg (base equiv), 150 mg (base equiv)	P		•		•	AUSTEDO- deutetrabenazine tab 6 mg, 9 mg, 12 mg	NP	•	•		•
VYVANSE- lisdexamfetamine dimesylate cap 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg	NP				•	AUSTEDO XR- deutetrabenazine tab er 24hr 6 mg, 12 mg, 24 mg	NP	•	•		•
						AUSTEDO XR PATIENT TITRAT- deutetrabenazine tab er titration pack 6 mg & 12 mg & 24 mg	NP	•	•		•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands



Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
AVONEX- interferon beta-1a im prefilled syringe kit 30 mcg/0.5ml	P	•	•		•
AVONEX PEN- interferon beta-1a im auto-injector kit 30 mcg/0.5ml	P	•	•		•
BAFIERTAM- monomethyl fumarate capsule delayed release 95 mg	NP	•	•		•
BETASERON- interferon beta-1b for inj kit 0.3 mg	P	•	•		•
<b>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</b>	p				
CHLORDIAZEPOXIDE/AMITRIPT- chlordiazepoxide-amitriptyline tab 5-12.5 mg, 10-25 mg	NP				
COPAXONE- glatiramer acetate soln prefilled syringe 20 mg/ml, 40 mg/ml	NP	•	•		•
<b>dalfampridine tab er 12hr 10 mg (Ampyra)</b>	np	•	•		•
<b>dimethyl fumarate capsule delayed release 120 mg, 240 mg (Tecfidera)</b>	p	•			•
<b>dimethyl fumarate capsule dr starter pack 120 mg &amp; 240 mg (Tecfidera starter pa)</b>	p	•			•
<b>disulfiram tab 250 mg, 500 mg</b>	p				
<b>donepezil hydrochloride orally disintegrating tab 5 mg, 10 mg</b>	p				
<b>donepezil hydrochloride tab 5 mg, 10 mg (Aricept)</b>	p				
<b>donepezil hydrochloride tab 23 mg (Aricept)</b>	np				
EXELON- rivastigmine td patch 24hr 4.6 mg/24hr, 9.5 mg/24hr, 13.3 mg/24hr	NP				
EXTAVIA- interferon beta-1b for inj kit 0.3 mg	NP	•	•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b> fingolimod hcl cap 0.5 mg (base equiv) (Gilenya)</b>	p	•			•
FLUOXETINE HYDROCHLORIDE- fluoxetine hcl (pmdd) tab 10 mg, 20 mg	NP				
GALANTAMINE HYDROBROMIDE- galantamine hydrobromide oral soln 4 mg/ml	P				
<b>galantamine hydrobromide cap er 24hr 8 mg, 16 mg, 24 mg (Razadyne er)</b>	p				
<b>galantamine hydrobromide tab 4 mg, 8 mg, 12 mg</b>	p				
GILENYA- fingolimod hcl cap 0.25 mg (base equiv), 0.5 mg (base equiv)	NP	•	•		•
<b>glatiramer acetate soln prefilled syringe 20 mg/ml, 40 mg/ml (Copaxone)</b>	p	•			•
GRALISE- gabapentin (once-daily) tab 300 mg, 450 mg, 600 mg, 750 mg, 900 mg	NP				• •
HORIZANT- gabapentin enacarbil tab er 300 mg, 600 mg	NP				• •
INGREZZA- valbenazine tosylate cap therapy pack 40 mg (7) & 80 mg (21)	NP	•	•		•
INGREZZA- valbenazine tosylate cap 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv)	NP	•	•		•
KESIMPTA- ofatumumab soln auto-injector 20 mg/0.4ml	P	•	•		•
LUCEMYRA- lofexidine hcl tab 0.18 mg (base equivalent)	NP				
LUMRYZ- sodium oxybate pack for oral er susp 4.5 gm, 6 gm, 7.5 gm, 9 gm	NP	•	•		•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
LYBALVI- olanzapine-samidorphan l-malate tab 5-10 mg, 10-10 mg, 15-10 mg, 20-10 mg	NP			•	•	NAMZARIC- memantine hcl-donepezil hcl cap er 24hr 7-10 mg, 14-10 mg, 21-10 mg, 28-10 mg	NP				
LYRICA CR- pregabalin tab er 24hr 82.5 mg, 165 mg, 330 mg	NP			•	•	NAMZARIC- memantine-donepezil cap er 24hr 7 & 14 & 21 & 28-10 mg pack	NP				
MAVENCLAD- cladribine tab therapy pack 10 mg (4 tabs), 10 mg (5 tabs), 10 mg (6 tabs), 10 mg (7 tabs), 10 mg (8 tabs), 10 mg (9 tabs), 10 mg (10 tabs)	P	•	•		•	<b>nicotine polacrilex gum 2 mg, 4 mg</b>	np				
MAYZENT- sponimod fumarate tab 0.25 mg (base equiv), 1 mg (base equiv), 2 mg (base equiv)	P	•	•		•	<b>nicotine polacrilex lozenge 2 mg, 4 mg</b>	np				
MAYZENT STARTER PACK- sponimod fumarate tab 0.25 mg (7) starter pack	P	•	•		•	<b>nicotine td patch 24hr 7 mg/24hr, 14 mg/24hr, 21 mg/24hr</b>	np				
MAYZENT STARTER PACK- sponimod fumarate tab 0.25 mg (12) starter pack	P	•	•		•	NICOTINE TRANSDERMAL SYST- nicotine td patch 24 hr kit 21-14-7 mg/24hr	NP				
<b>memantine hcl cap er 24hr 7 mg, 14 mg, 21 mg, 28 mg (Namenda xr)</b>	np					NICOTROL INHALER- nicotine inhaler system 10 mg (4 mg delivered)	P				
<b>memantine hcl oral solution 2 mg/ml</b>	p					NICOTROL NS- nicotine nasal spray 10 mg/ml (0.5 mg/spray)	P				
<b>memantine hcl tab 5 mg, 10 mg (Namenda)</b>	p					NUEDEXTA- dextromethorphan hbr-quinidine sulfate cap 20-10 mg	NP		•		•
<b>memantine hcl tab 28 x 5 mg &amp; 21 x 10 mg titration pack (Namenda titration pa)</b>	p					<b>olanzapine-fluoxetine hcl cap 3-25 mg, 6-25 mg (Symbyax)</b>	np				
NAMENDA- memantine hcl tab 5 mg, 10 mg	NP					<b>olanzapine-fluoxetine hcl cap 6-50 mg, 12-25 mg, 12-50 mg</b>	np				
NAMENDA TITRATION PAK- memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack	NP					<b>paroxetine mesylate cap 7.5 mg (base equiv)</b>	np				
NAMENDA XR- memantine hcl cap er 24hr 14 mg, 21 mg, 28 mg	NP					PERPHENAZINE/AMITRIPTYLIN- perphenazine-amitriptyline tab 2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg	NP				
						PIMOZIDE- pimozone tab 1 mg, 2 mg	P				
						PLEGRIDY- peginterferon beta-1a soln pen-injector 125 mcg/0.5ml	P	•	•		•
						PLEGRIDY- peginterferon beta-1a soln pre-filled syringe 125 mcg/0.5ml	P	•	•		•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
PLEGRIDY- peginterferon beta-1a im soln prefilled syr 125 mcg/0.5ml	P	•	•		•
PLEGRIDY STARTER PACK- peginterferon beta-1a soln pen-inj 63 & 94 mcg/0.5ml pack	P	•	•		•
PLEGRIDY STARTER PACK- peginterferon beta-1a soln pref syr 63 & 94 mcg/0.5ml pack	P	•	•		•
PONVORY- ponesimod tab 20 mg	NP	•	•		•
PONVORY 14-DAY STARTER PA- ponesimod tab starter pack 2,3,4,5,6,7,8,9 &10 mg	NP	•	•		•
<b>pregabalin tab er 24hr 82.5 mg, 165 mg, 330 mg (Lyrica cr)</b>	np			•	•
REBIF- interferon beta-1a soln pref syr 22 mcg/0.5ml, 44 mcg/0.5ml	P	•	•		•
REBIF REBIDOSE- interferon beta-1a soln auto-inj 22 mcg/0.5ml, 44 mcg/0.5ml	P	•	•		•
REBIF REBIDOSE TITRATION- interferon beta-1a auto-inj 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	P	•	•		•
REBIF TITRATION PACK- interferon beta-1a pref syr 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	P	•	•		•
<b>rivastigmine tartrate cap 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent)</b>	p				
<b>rivastigmine td patch 24hr 4.6 mg/24hr, 9.5 mg/24hr, 13.3 mg/24hr (Exelon)</b>	np				
SAVELLA- milnacipran hcl tab 12.5 mg, 25 mg, 50 mg, 100 mg	P			•	•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
SAVELLA TITRATION PACK- milnacipran hcl tab 12.5 mg (5) & 25 mg (8) & 50 mg (42) pak	P			•	•
SODIUM OXYBATE- sodium oxybate oral solution 500 mg/ml	NP	•	•		•
SYMBYAX- olanzapine-fluoxetine hcl cap 3-25 mg, 6-25 mg	NP				
TASCENSO ODT- fingolimod lauryl sulfate tablet disintegrating 0.25 mg, 0.5 mg	NP	•	•		•
TECFIDERA- dimethyl fumarate capsule delayed release 120 mg, 240 mg	NP	•	•		•
TECFIDERA STARTER PACK- dimethyl fumarate capsule dr starter pack 120 mg & 240 mg	NP	•	•		•
TEGSEDI- inotersen sod subcutaneous pref syr 284 mg/1.5ml (base eq)	NP	•	•		•
<b>teriflunomide tab 7 mg, 14 mg (Aubagio)</b>	p	•			•
<b>tetrabenazine tab 12.5 mg, 25 mg (Xenazine)</b>	p	•	•		•
<b>varenicline tartrate tab 0.5 mg (base equiv), 1 mg (base equiv)</b>	p				
<b>varenicline tartrate tab 11 x 0.5 mg &amp; 42 x 1 mg start pack</b>	p				
VUMERITY- diroximel fumarate capsule delayed release 231 mg	P	•	•		•
VYLEESI- bremelanotide acet subcutaneous soln auto-inj 1.75 mg/0.3ml	NP	•	•		•
XENAZINE- tetrabenazine tab 12.5 mg, 25 mg	NP	•	•		•
XYREM- sodium oxybate oral solution 500 mg/ml	NP	•	•		•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
XYWAV- calcium, mag, potassium, & sod oxybates oral soln 500 mg/ml	NP	•	•		•
ZEPOSIA- ozanimod hcl cap 0.92 mg	P	•	•		•
ZEPOSIA STARTER KIT- ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg & 21 x 0.92 mg	P	•	•		•
ZEPOSIA 7-DAY STARTER PAC- ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg	P	•	•		•
<b>ANALGESICS AND ANESTHETICS</b>					
<b>ANALGESICS - NON-NARCOTIC</b>					
ALLZITAL- butalbital-acetaminophen tab 25-325 mg	NP				•
aspirin chew tab 81 mg	np				
aspirin tab delayed release 81 mg	np				
butalbital-acetaminophen cap 50-300 mg (Butalbital/acetamino)	np				•
butalbital-acetaminophen tab 50-300 mg	np				•
butalbital-acetaminophen tab 50-325 mg	p				•
butalbital-acetaminophen-caffeine cap 50-300-40 mg (Fioricet)	np				•
butalbital-acetaminophen-caffeine cap 50-325-40 mg	np				•
butalbital-acetaminophen-caffeine tab 50-325-40 mg (Esgic)	p				•
butalbital-aspirin-caffeine cap 50-325-40 mg	p				•
diflunisal tab 500 mg	np				
ESGIC- butalbital-acetaminophen-caffeine tab 50-325-40 mg	NP				•
FIORICET- butalbital-acetaminophen-caffeine cap 50-300-40 mg	NP				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
TENCON- butalbital-acetaminophen tab 50-325 mg	P				•
<b>ANALGESICS - NARCOTIC</b>					
acetaminophen w/ codeine soln 120-12 mg/5ml	p				•
acetaminophen w/ codeine tab 300-15 mg (Tylenol/codeine)	p				•
acetaminophen w/ codeine tab 300-30 mg, 300-60 mg	p				•
ACETAMINOPHEN/CAFFEINE/DI- acetaminophen-caffeine-dihydrocodeine cap 320.5-30-16 mg	NP				•
APADAZ- benzhydrocodone hcl-acetaminophen tab 4.08-325 mg, 6.12-325 mg, 8.16-325 mg	NP				•
BELBUCA- buprenorphine hcl buccal film 75 mcg (base equivalent), 150 mcg (base equivalent), 300 mcg (base equivalent), 450 mcg (base equivalent), 600 mcg (base equivalent), 750 mcg (base equivalent), 900 mcg (base equivalent)	NP		•		•
BENZHYDROCODONE/ACETAMINO- benzhydrocodone hcl-acetaminophen tab 4.08-325 mg, 6.12-325 mg, 8.16-325 mg	NP				•
buprenorphine hcl sl tab 2 mg (base equiv), 8 mg (base equiv)	p				•
buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv), 4-1 mg (base equiv), 8-2 mg (base equiv), 12-3 mg (base equiv) (Suboxone)	p				•
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv), 8-2 mg (base equiv)	p				•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>buprenorphine td patch weekly 5 mcg/hr, 7.5 mcg/hr, 10 mcg/hr, 15 mcg/hr, 20 mcg/hr (Butrans)</b>	np		•		•
<b>butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg (Fioricet/codeine)</b>	np				•
<b>butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg</b>	np				•
<b>butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg</b>	p				•
<b>butorphanol tartrate nasal soln 10 mg/ml</b>	np				•
<b>BUTRANS- buprenorphine td patch weekly 5 mcg/hr, 7.5 mcg/hr, 10 mcg/hr, 15 mcg/hr, 20 mcg/hr</b>	NP		•		•
<b>CODEINE SULFATE- codeine sulfate tab 15 mg, 30 mg, 60 mg</b>	NP				•
<b>codeine sulfate tab 30 mg (Codeine sulfate)</b>	p				•
<b>CONZIP- tramadol hcl cap er 24hr biphasic release 100 mg, 200 mg, 300 mg</b>	NP		•		•
<b>DILAUDID- hydromorphone hcl liqd 1 mg/ml</b>	NP				•
<b>DILAUDID- hydromorphone hcl tab 2 mg, 4 mg, 8 mg</b>	NP				•
<b>FENTANYL CITRATE- fentanyl citrate buccal tab 100 mcg (base equiv), 200 mcg (base equiv), 400 mcg (base equiv), 600 mcg (base equiv), 800 mcg (base equiv)</b>	NP		•		•
<b>fentanyl citrate lozenge on a handle 200 mcg, 400 mcg, 600 mcg, 800 mcg, 1200 mcg, 1600 mcg (Actiq)</b>	p		•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>fentanyl td patch 72hr 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr, 100 mcg/hr</b>	p		•		•
<b>fentanyl td patch 72hr 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr</b>	np		•		•
<b>FENTORA- fentanyl citrate buccal tab 100 mcg (base equiv), 200 mcg (base equiv), 400 mcg (base equiv), 600 mcg (base equiv), 800 mcg (base equiv)</b>	NP		•		•
<b>FIORICET/CODEINE- butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg</b>	NP				•
<b>HYDROCODONE BITARTRATE ER- hydrocodone bitartrate cap er 12hr 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 50 mg</b>	NP		•		•
<b>hydrocodone bitartrate tab er 24hr deter 20 mg, 30 mg, 40 mg, 60 mg, 80 mg, 100 mg, 120 mg (Hysingla er)</b>	np		•		•
<b>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</b>	p				•
<b>hydrocodone-acetaminophen tab 10-325 mg, 5-325 mg, 7.5-325 mg</b>	p				•
<b>hydrocodone-acetaminophen tab 5-300 mg, 7.5-300 mg, 10-300 mg</b>	np				•
<b>hydrocodone-ibuprofen tab 7.5-200 mg</b>	p				•
<b>HYDROCODONE/IBUPROFEN- hydrocodone-ibuprofen tab 5-200 mg, 10-200 mg</b>	P				•
<b>hydromorphone hcl liqd 1 mg/ml (Dilaudid)</b>	p				•
<b>hydromorphone hcl tab er 24hr 8 mg, 12 mg, 16 mg, 32 mg</b>	np		•		•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>hydromorphone hcl tab 2 mg, 4 mg, 8 mg (Dilaudid)</b>	p				•
HYSINGLA ER- hydrocodone bitartrate tab er 24hr deter 20 mg, 30 mg, 40 mg, 60 mg, 80 mg, 100 mg, 120 mg	NP		•		•
LEVORPHANOL TARTRATE- levorphanol tartrate tab 3 mg	NP				•
<b>levorphanol tartrate tab 2 mg</b>	np				•
METHADONE HCL- methadone hcl soln 5 mg/5ml, 10 mg/5ml	NP				•
<b>methadone hcl conc 10 mg/ml (Methadose)</b>	p				•
<b>methadone hcl soln 5 mg/5ml, 10 mg/5ml (Methadone hcl)</b>	p				•
<b>methadone hcl tab for oral susp 40 mg</b>	p				•
<b>methadone hcl tab 5 mg, 10 mg</b>	p				•
METHADOSE- methadone hcl conc 10 mg/ml	NP				•
METHADOSE SUGAR-FREE- methadone hcl conc 10 mg/ml	NP				•
MORPHINE SULFATE- morphine sulfate oral soln 10 mg/5ml	P				
MORPHINE SULFATE- morphine sulfate tab 15 mg, 30 mg	NP				•
MORPHINE SULFATE ER- morphine sulfate beads cap er 24hr 30 mg, 45 mg, 60 mg, 75 mg, 90 mg, 120 mg	P		•		•
MORPHINE SULFATE ER- morphine sulfate cap er 24hr 10 mg, 20 mg, 30 mg, 50 mg, 60 mg, 80 mg, 100 mg	NP		•		•
<b>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</b>	p				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>morphine sulfate tab er 15 mg, 30 mg, 60 mg, 100 mg, 200 mg (Ms contin)</b>	p		•		•
<b>morphine sulfate tab 15 mg, 30 mg (Morphine sulfate)</b>	p				•
MS CONTIN- morphine sulfate tab er 15 mg, 30 mg, 60 mg, 100 mg, 200 mg	NP		•		•
NALOCET- oxycodone w/ acetaminophen tab 2.5-300 mg	NP				•
NUCYNTA- tapentadol hcl tab 50 mg, 75 mg, 100 mg	NP				•
NUCYNTA ER- tapentadol hcl tab er 12hr 50 mg, 100 mg, 150 mg, 200 mg, 250 mg	P		•		•
OXAYDO- oxycodone hcl tab 5 mg, 7.5 mg	NP				•
OXYCODONE AND ACETAMINOPH- oxycodone w/ acetaminophen tab 7.5-300 mg	NP				•
<b>oxycodone hcl cap 5 mg</b>	np				•
<b>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</b>	p				•
<b>oxycodone hcl soln 5 mg/5ml</b>	p				•
<b>oxycodone hcl tab 5 mg, 15 mg, 30 mg (Roxicodone)</b>	p				•
<b>oxycodone hcl tab 10 mg, 20 mg</b>	p				•
OXYCODONE HYDROCHLORIDE E- oxycodone hcl tab er 12hr deter 10 mg, 20 mg, 40 mg, 80 mg	NP		•		•
OXYCODONE HYDROCHLORIDE/A- oxycodone w/ acetaminophen soln 5-325 mg/5ml, 10-300 mg/5ml	NP				•
<b>oxycodone w/ acetaminophen tab 2.5-325 mg (Percocet)</b>	np				•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>oxycodone w/ acetaminophen tab 5-325 mg, 7.5-325 mg, 10-325 mg (Percocet)</b>	p				•	TRAMADOL HCL ER- tramadol hcl tab er 24hr biphasic release 100 mg, 200 mg, 300 mg	NP		•		•
OXYCODONE/ACETAMINOPHEN-oxycodone w/ acetaminophen tab 2.5-300 mg, 5-300 mg, 10-300 mg	NP				•	<b>tramadol hcl tab er 24hr 100 mg, 200 mg, 300 mg</b>	p		•		•
OXYCONTIN- oxycodone hcl tab er 12hr deter 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 60 mg, 80 mg	NP		•		•	<b>tramadol hcl tab 50 mg (Ultram)</b>	p				•
<b>oxymorphone hcl tab 5 mg, 10 mg</b>	np				•	<b>tramadol hcl tab 100 mg</b>	np				•
OXYMORPHONE HYDROCHLORIDE- oxymorphone hcl tab er 12hr 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg, 30 mg, 40 mg	NP		•		•	TRAMADOL HYDROCHLORIDE- tramadol hcl oral soln 5 mg/ml	NP				•
PERCOCET- oxycodone w/ acetaminophen tab 2.5-325 mg, 5-325 mg, 7.5-325 mg, 10-325 mg	NP				•	TRAMADOL HYDROCHLORIDE- tramadol hcl tab 25 mg	NP				•
PROLATE- oxycodone w/ acetaminophen soln 10-300 mg/5ml	NP				•	<b>tramadol-acetaminophen tab 37.5-325 mg (Ultracet)</b>	p				•
PROLATE- oxycodone w/ acetaminophen tab 5-300 mg, 7.5-300 mg, 10-300 mg	NP				•	TREZIX- acetaminophen-caffeine-dihydrocodeine cap 320.5-30-16 mg	NP				•
QDOLO- tramadol hcl oral soln 5 mg/ml	NP				•	XTAMPZA ER- oxycodone cap er 12hr abuse-deterrent 9 mg, 13.5 mg, 18 mg, 27 mg, 36 mg	P		•		•
ROXICODONE- oxycodone hcl tab 15 mg, 30 mg	NP				•	ZUBSOLV- buprenorphine hcl-naloxone hcl sl tab 0.7-0.18 mg (base eq), 1.4-0.36 mg (base eq), 2.9-0.71 mg (base eq), 5.7-1.4 mg (base eq), 8.6-2.1 mg (base eq), 11.4-2.9 mg (base eq)	NP				•
ROXYBOND- oxycodone hcl tab abuse deter 5 mg, 15 mg, 30 mg	NP				•	<b>ANALGESICS - ANTI-INFLAMMATORY</b>					
SEGLENTIS- celecoxib-tramadol hcl tab 56-44 mg	NP				•	ABRILADA- adalimumab-afzb prefilled syringe kit 20 mg/0.4ml, 40 mg/0.8ml	NP	•	•		•
SUBOXONE- buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv), 4-1 mg (base equiv), 8-2 mg (base equiv), 12-3 mg (base equiv)	NP				•	ABRILADA 1-PEN KIT- adalimumab-afzb auto-injector kit 40 mg/0.8ml	NP	•	•		•
TRAMADOL HCL ER- tramadol hcl cap er 24hr biphasic release 100 mg, 200 mg, 300 mg	NP		•		•	ABRILADA 2-PEN KIT- adalimumab-afzb auto-injector kit 40 mg/0.8ml	NP	•	•		•
						ACTEMRA- tocilizumab subcutaneous soln prefilled syringe 162 mg/0.9ml	P	•	•		•
						ACTEMRA ACTPEN- tocilizumab subcutaneous soln auto-injector 162 mg/0.9ml	P	•	•		•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ADALIMUMAB-ADAZ- adalimumab-adaz soln auto-injector 40 mg/0.4ml	NP	•	•		•
ADALIMUMAB-ADAZ- adalimumab-adaz soln prefilled syringe 40 mg/0.4ml	NP	•	•		•
ADALIMUMAB-ADBM- adalimumab-adbm auto-injector kit 40 mg/0.8ml	NP	•	•		•
ADALIMUMAB-ADBM- adalimumab-adbm prefilled syringe kit 10 mg/0.2ml, 20 mg/0.4ml, 40 mg/0.8ml	NP	•	•		•
ADALIMUMAB-ADBM CROHNS/UC- adalimumab-adbm auto-injector kit 40 mg/0.8ml	NP	•	•		•
ADALIMUMAB-ADBM PSORIASIS- adalimumab-adbm auto-injector kit 40 mg/0.8ml	NP	•	•		•
ADALIMUMAB-FKJP- adalimumab-fkjp auto-injector kit 40 mg/0.8ml	NP	•	•		•
ADALIMUMAB-FKJP- adalimumab-fkjp prefilled syringe kit 20 mg/0.4ml, 40 mg/0.8ml	NP	•	•		•
AMJEVITA (NDC's starting with 55513 only)- adalimumab-atto soln auto-injector 40 mg/0.8ml	P	•	•		•
AMJEVITA (NDC's starting with 72511 only)- adalimumab-atto soln auto-injector 40 mg/0.8ml	NP	•	•		•
AMJEVITA (NDC's starting with 55513 only)- adalimumab-atto soln prefilled syringe 10 mg/0.2ml	P	•	•		•
AMJEVITA (NDC's starting with 55513 only)- adalimumab-atto soln prefilled syringe 20 mg/0.4ml	P	•	•		•
AMJEVITA (NDC's starting with 55513 only)- adalimumab-atto soln prefilled syringe 40 mg/0.8ml	P	•	•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ARAVA- leflunomide tab 10 mg, 20 mg	NP				
ARCALYST- riloncept for inj 220 mg	NP	•	•		•
ARTHROTEC 50- diclofenac w/ misoprostol tab delayed release 50-0.2 mg	NP			•	
ARTHROTEC 75- diclofenac w/ misoprostol tab delayed release 75-0.2 mg	NP			•	
CELEBREX- celecoxib cap 50 mg, 100 mg, 200 mg, 400 mg	NP			•	
<b>celecoxib cap 50 mg, 100 mg, 200 mg, 400 mg (Celebrex)</b>	p				
CYLTEZO- adalimumab-adbm auto-injector kit 40 mg/0.8ml	P	•	•		•
CYLTEZO- adalimumab-adbm prefilled syringe kit 10 mg/0.2ml, 20 mg/0.4ml, 40 mg/0.8ml	P	•	•		•
CYLTEZO STARTER PACKAGE F- adalimumab-adbm auto-injector kit 40 mg/0.8ml	P	•	•		•
DAYPRO- oxaprozin tab 600 mg	NP			•	
<b>diclofenac potassium cap 25 mg (Zipsor)</b>	np				
<b>diclofenac potassium tab 25 mg</b>	np				
<b>diclofenac potassium tab 50 mg</b>	p				
<b>diclofenac sodium tab delayed release 25 mg, 50 mg, 75 mg</b>	p				
<b>diclofenac sodium tab er 24hr 100 mg</b>	np				
<b>diclofenac w/ misoprostol tab delayed release 50-0.2 mg (Arthrotec 50)</b>	np				
<b>diclofenac w/ misoprostol tab delayed release 75-0.2 mg (Arthrotec 75)</b>	np				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands



Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
DUEXIS- ibuprofen-famotidine tab 800-26.6 mg	NP		•		•
EC-NAPROSYN- naproxen tab ec 375 mg, 500 mg	NP			•	
ENBREL- etanercept subcutaneous inj 25 mg/0.5ml	P	•	•		•
ENBREL- etanercept subcutaneous soln prefilled syringe 25 mg/0.5ml, 50 mg/ml	P	•	•		•
ENBREL MINI- etanercept subcutaneous solution cartridge 50 mg/ml	P	•	•		•
ENBREL SURECLICK- etanercept subcutaneous solution auto-injector 50 mg/ml	P	•	•		•
<b>etodolac cap 200 mg, 300 mg</b>	p				
<b>etodolac tab er 24hr 400 mg, 500 mg, 600 mg</b>	p				
<b>etodolac tab 400 mg (Lodine)</b>	p				
<b>etodolac tab 500 mg</b>	p				
FELDENE- piroxicam cap 10 mg, 20 mg	NP			•	
FENOPROFEN CALCIUM- fenoprofen calcium cap 200 mg	NP			•	
<b>fenoprofen calcium cap 400 mg (Nalfon)</b>	np				
<b>fenoprofen calcium tab 600 mg (Nalfon)</b>	np				
FLURBIPROFEN- flurbiprofen tab 50 mg	P			•	
<b>flurbiprofen tab 100 mg</b>	p				
HADLIMA- adalimumab-bwwd soln prefilled syringe 40 mg/0.4ml, 40 mg/0.8ml	NP	•	•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
HADLIMA PUSHTOUCH- adalimumab-bwwd soln auto-injector 40 mg/0.4ml, 40 mg/0.8ml	NP	•	•		•
HULIO- adalimumab-fkjp auto-injector kit 40 mg/0.8ml	NP	•	•		•
HULIO- adalimumab-fkjp prefilled syringe kit 20 mg/0.4ml, 40 mg/0.8ml	NP	•	•		•
HUMIRA- adalimumab prefilled syringe kit 10 mg/0.1ml, 20 mg/0.2ml, 40 mg/0.8ml, 40 mg/0.4ml	P	•	•		•
HUMIRA PEDIATRIC CROHNS D- adalimumab prefilled syringe kit 80 mg/0.8ml, 80 mg/0.8ml & 40 mg/0.4ml	P	•	•		•
HUMIRA PEN- adalimumab pen-injector kit 40 mg/0.8ml, 40 mg/0.4ml, 80 mg/0.8ml	P	•	•		•
HUMIRA PEN-CD/UC/HS START- adalimumab pen-injector kit 40 mg/0.8ml, 80 mg/0.8ml	P	•	•		•
HUMIRA PEN-PEDIATRIC UC S- adalimumab pen-injector kit 80 mg/0.8ml	P	•	•		•
HUMIRA PEN-PS/UV STARTER- adalimumab pen-injector kit 40 mg/0.8ml, 80 mg/0.8ml & 40 mg/0.4ml	P	•	•		•
HYRIMOZ- adalimumab-adaz soln auto-injector 40 mg/0.4ml, 40 mg/0.8ml, 80 mg/0.8ml	NP	•	•		•
HYRIMOZ- adalimumab-adaz soln prefilled syringe 10 mg/0.1ml, 20 mg/0.2ml, 40 mg/0.4ml, 40 mg/0.8ml	NP	•	•		•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
HYRIMOZ CROHN'S DISEASE A-adalimumab-adaz soln auto-injector 80 mg/0.8ml	NP	•	•		•	<b>ketorolac tromethamine tab 10 mg</b>	np				•
HYRIMOZ PEDIATRIC CROHN'S-adalimumab-adaz soln prefilled syr 80 mg/0.8ml & 40 mg/0.4ml	NP	•	•		•	KEVZARA- sarilumab subcutaneous soln prefilled syringe 150 mg/1.14ml, 200 mg/1.14ml	NP	•	•		•
HYRIMOZ PEDIATRIC CROHN'S-adalimumab-adaz soln prefilled syringe 80 mg/0.8ml	NP	•	•		•	KEVZARA- sarilumab subcutaneous solution auto-injector 150 mg/1.14ml, 200 mg/1.14ml	NP	•	•		•
HYRIMOZ PLAQUE PSORIASIS-adalimumab-adaz soln auto-injector 80 mg/0.8ml & 40 mg/0.4ml	NP	•	•		•	KINERET- anakinra subcutaneous soln prefilled syringe 100 mg/0.67ml	NP	•	•		•
HYRIMOZ SENSOREADY PENS-adalimumab-adaz soln auto-injector 80 mg/0.8ml	NP	•	•		•	<b>leflunomide tab 10 mg, 20 mg (Arava)</b>	p				
<b>ibuprofen susp 100 mg/5ml</b>	p					LODINE- etodolac tab 400 mg	NP			•	
<b>ibuprofen tab 400 mg, 600 mg, 800 mg</b>	p					MECLOFENAMATE SODIUM-meclofenamate sodium cap 50 mg, 100 mg	NP			•	
<b>ibuprofen-famotidine tab 800-26.6 mg (Duexis)</b>	np		•		•	<b>mefenamic acid cap 250 mg</b>	np				
IDACIO- adalimumab-aacf auto-injector kit 40 mg/0.8ml	NP	•	•		•	MELOXICAM- meloxicam susp 7.5 mg/5ml	NP			•	
IDACIO- adalimumab-aacf prefilled syringe kit 40 mg/0.8ml	NP	•	•		•	<b>meloxicam cap 5 mg, 10 mg</b>	np				
IDACIO STARTER PACKAGE FO-adalimumab-aacf auto-injector kit 40 mg/0.8ml	NP	•	•		•	<b>meloxicam tab 7.5 mg, 15 mg</b>	p				
INDOCIN- indomethacin susp 25 mg/5ml	NP			•		<b>nabumetone tab 500 mg, 750 mg</b>	p				
<b>indomethacin cap er 75 mg</b>	np					NALFON- fenoprofen calcium cap 400 mg	NP			•	
<b>indomethacin cap 25 mg, 50 mg</b>	p					NALFON- fenoprofen calcium tab 600 mg	NP			•	
<b>indomethacin suppos 50 mg</b>	np					NAPRELAN- naproxen sodium tab er 24hr 375 mg (base equiv), 500 mg (base equiv), 750 mg (base equiv)	NP			•	
KETOPROFEN- ketoprofen cap 25 mg, 50 mg	NP			•		NAPROSYN- naproxen susp 125 mg/5ml	NP			•	
KETOPROFEN ER- ketoprofen cap er 24hr 200 mg	NP			•		<b>naproxen sodium tab er 24hr 375 mg (base equiv), 500 mg (base equiv), 750 mg (base equiv) (Naprelan)</b>	np				
						<b>naproxen sodium tab 275 mg</b>	p				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>naproxen sodium tab 550 mg (Anaprox ds)</b>	p				
<b>naproxen susp 125 mg/5ml (Naprosyn)</b>	np				
<b>naproxen tab ec 375 mg, 500 mg (Ec-naprosyn)</b>	np				
<b>naproxen tab 250 mg, 375 mg</b>	p				
<b>naproxen tab 500 mg (Naprosyn)</b>	p				
<b>naproxen-esomeprazole magnesium tab dr 375-20 mg, 500-20 mg (Vimovo)</b>	np		•		•
<b>OLUMIANT- baricitinib tab 1 mg, 2 mg, 4 mg</b>	NP	•	•		•
<b>ORENCIA- abatacept subcutaneous soln prefilled syringe 50 mg/0.4ml, 87.5 mg/0.7ml, 125 mg/ml</b>	NP	•	•		•
<b>ORENCIA CLICKJECT- abatacept subcutaneous soln auto-injector 125 mg/ml</b>	NP	•	•		•
<b>OTEZLA- apremilast tab starter therapy pack 10 mg &amp; 20 mg &amp; 30 mg</b>	P	•	•		•
<b>OTEZLA- apremilast tab 30 mg</b>	P	•	•		•
<b>OTREXUP- methotrexate soln pf auto-injector 10 mg/0.4ml, 12.5 mg/0.4ml, 15 mg/0.4ml, 17.5 mg/0.4ml, 20 mg/0.4ml, 22.5 mg/0.4ml, 25 mg/0.4ml</b>	P			•	
<b>oxaprozin tab 600 mg (Daypro)</b>	p				
<b>piroxicam cap 10 mg, 20 mg (Feldene)</b>	p				
<b>RASUVO- methotrexate soln pf auto-injector 7.5 mg/0.15ml, 10 mg/0.2ml, 12.5 mg/0.25ml, 15 mg/0.3ml, 17.5 mg/0.35ml, 20 mg/0.4ml, 22.5 mg/0.45ml, 25 mg/0.5ml, 30 mg/0.6ml</b>	NP			•	

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>RELAFEN DS- nabumetone tab 1000 mg</b>	NP			•	
<b>RIDAURA- auranofin cap 3 mg</b>	NP				
<b>RINVOQ- upadacitinib tab er 24hr 15 mg, 30 mg, 45 mg</b>	P	•	•		•
<b>SIMPONI- golimumab subcutaneous soln auto-injector 50 mg/0.5ml</b>	NP	•	•		•
<b>SIMPONI- golimumab subcutaneous soln auto-injector 100 mg/ml</b>	P	•	•		•
<b>SIMPONI- golimumab subcutaneous soln prefilled syringe 50 mg/0.5ml</b>	NP	•	•		•
<b>SIMPONI- golimumab subcutaneous soln prefilled syringe 100 mg/ml</b>	P	•	•		•
<b>SPRIX- ketorolac tromethamine nasal spray 15.75 mg/spray</b>	NP				•
<b>sulindac tab 150 mg, 200 mg</b>	p				
<b>TOLMETIN SODIUM- tolmetin sodium cap 400 mg</b>	NP			•	
<b>TOLMETIN SODIUM- tolmetin sodium tab 600 mg</b>	NP			•	
<b>VIMOVO- naproxen-esomeprazole magnesium tab dr 375-20 mg, 500-20 mg</b>	NP		•		•
<b>XELJANZ- tofacitinib citrate oral soln 1 mg/ml (base equivalent)</b>	P	•	•		•
<b>XELJANZ- tofacitinib citrate tab 5 mg (base equivalent), 10 mg (base equivalent)</b>	P	•	•		•
<b>XELJANZ XR- tofacitinib citrate tab er 24hr 11 mg (base equivalent), 22 mg (base equivalent)</b>	P	•	•		•
<b>YUFLYMA- adalimumab-aaty auto-injector kit 80 mg/0.8ml</b>	NP	•	•		•
<b>YUFLYMA CD/UC/HS STARTER- adalimumab-aaty auto-injector kit 80 mg/0.8ml</b>	NP	•	•		•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
YUFLYMA 1-PEN KIT- adalimumab-aaty auto-injector kit 40 mg/0.4ml	NP	•	•		•
YUFLYMA 2-PEN KIT- adalimumab-aaty auto-injector kit 40 mg/0.4ml	NP	•	•		•
YUFLYMA 2-SYRINGE KIT- adalimumab-aaty prefilled syringe kit 40 mg/0.4ml	NP	•	•		•
YUSIMRY- adalimumab-aqyh soln pen-injector 40 mg/0.8ml	NP	•	•		•
ZIPSOR- diclofenac potassium cap 25 mg	NP			•	
<b>MIGRAINE PRODUCTS</b>					
AIMOVIG- erenumab-aooe subcutaneous soln auto-injector 70 mg/ml, 140 mg/ml	P		•		•
AJOVY- fremanezumab-vfrm subcutaneous soln auto-inj 225 mg/1.5ml	P		•		•
AJOVY- fremanezumab-vfrm subcutaneous soln pref syr 225 mg/1.5ml	P		•		•
<b>almotriptan malate tab 6.25 mg, 12.5 mg</b>	np			•	•
CAMBIA- diclofenac potassium (migraine) packet 50 mg	NP			•	
<b>diclofenac potassium (migraine) packet 50 mg (Cambia)</b>	np				
<b>dihydroergotamine mesylate inj 1 mg/ml</b>	p			•	•
<b>dihydroergotamine mesylate nasal spray 4 mg/ml (Migranal)</b>	p		•		•
<b>eletriptan hydrobromide tab 20 mg (base equivalent), 40 mg (base equivalent) (Relpax)</b>	p				•
ELYXYB- celecoxib oral soln 120 mg/4.8ml (25 mg/ml)	NP		•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
EMGALITY- galcanezumab-gnlm subcutaneous soln auto-injector 120 mg/ml	P		•		•
EMGALITY- galcanezumab-gnlm subcutaneous soln prefilled syr 100 mg/ml, 120 mg/ml	P		•		•
ERGOMAR- ergotamine tartrate sl tab 2 mg	NP			•	•
<b>ergotamine w/ caffeine tab 1-100 mg (Cafergot)</b>	np			•	•
FROVA- frovatriptan succinate tab 2.5 mg (base equivalent)	NP			•	•
<b>frovatriptan succinate tab 2.5 mg (base equivalent) (Frova)</b>	np			•	•
IMITREX- sumatriptan succinate tab 25 mg, 50 mg, 100 mg	NP			•	•
IMITREX STATDOSE REFILL- sumatriptan succinate solution cartridge 4 mg/0.5ml, 6 mg/0.5ml	NP			•	•
IMITREX STATDOSE SYSTEM- sumatriptan succinate solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml	NP			•	•
MAXALT- rizatriptan benzoate tab 10 mg (base equivalent)	NP			•	•
MAXALT-MLT- rizatriptan benzoate oral disintegrating tab 10 mg (base eq)	NP			•	•
MIGERGOT- ergotamine w/ caffeine suppos 2-100 mg	NP			•	•
MIGRANAL- dihydroergotamine mesylate nasal spray 4 mg/ml	NP		•		•
<b>naratriptan hcl tab 1 mg (base equiv), 2.5 mg (base equiv)</b>	p				•
NURTEC- rimegepant sulfate tab disint 75 mg	P		•		•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ONZETRA XSAIL- sumatriptan succinate exhaler powder 11 mg/nosepiece	NP			•	•
QULIPTA- atogepant tab 10 mg, 30 mg, 60 mg	P		•		•
RELPAK- eletriptan hydrobromide tab 20 mg (base equivalent), 40 mg (base equivalent)	NP			•	•
REYVOW- lasmiditan succinate tab 50 mg, 100 mg	P		•		•
<b>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</b>	p				•
<b>rizatriptan benzoate oral disintegrating tab 10 mg (base eq) (Maxalt-mlt)</b>	p				•
<b>rizatriptan benzoate tab 5 mg (base equivalent)</b>	p				•
<b>rizatriptan benzoate tab 10 mg (base equivalent) (Maxalt)</b>	p				•
<b>sumatriptan nasal spray 5 mg/act, 20 mg/act (Imitrex)</b>	p				•
<b>sumatriptan succinate inj 6 mg/0.5ml</b>	p				•
SUMATRIPTAN SUCCINATE REF- sumatriptan succinate solution cartridge 4 mg/0.5ml, 6 mg/0.5ml	P			•	•
<b>sumatriptan succinate solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml (Imitrex statdose sys)</b>	p				•
<b>sumatriptan succinate tab 25 mg, 50 mg, 100 mg (Imitrex)</b>	p				•
<b>sumatriptan-naproxen sodium tab 85-500 mg (Treximet)</b>	np				•
TOSYMRA- sumatriptan nasal spray 10 mg/act	NP			•	•
TREXIMET- sumatriptan-naproxen sodium tab 85-500 mg	NP			•	•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
TRUDHESA- dihydroergotamine mesylate hfa nasal aerosol 0.725 mg/act	NP		•		•
UBRELVY- ubrogepant tab 50 mg, 100 mg	P		•		•
ZAVZPRET- zavegepant hcl nasal spray 10 mg/act	NP		•		•
ZEMBRACE SYMTOUCH- sumatriptan succinate solution auto-injector 3 mg/0.5ml	NP			•	•
<b>zolmitriptan nasal spray 5 mg/spray unit (Zomig)</b>	np			•	•
<b>zolmitriptan orally disintegrating tab 2.5 mg, 5 mg</b>	np				•
<b>zolmitriptan tab 2.5 mg, 5 mg (Zomig)</b>	np				•
ZOMIG- zolmitriptan nasal spray 2.5 mg/spray unit, 5 mg/spray unit	NP			•	•
ZOMIG- zolmitriptan tab 2.5 mg, 5 mg	NP			•	•
<b>GOUT AGENTS</b>					
ALLOPURINOL- allopurinol tab 200 mg	NP				
<b>allopurinol tab 100 mg, 300 mg (Zyloprim)</b>	p				
<b>colchicine cap 0.6 mg (Mitigare)</b>	np				
<b>colchicine tab 0.6 mg (Colcris)</b>	p				
<b>colchicine w/ probenecid tab 0.5-500 mg</b>	p				
<b>febuxostat tab 40 mg, 80 mg (Uloric)</b>	np				
MITIGARE- colchicine cap 0.6 mg	NP				
<b>probenecid tab 500 mg</b>	p				
ULORIC- febuxostat tab 40 mg, 80 mg	NP				
<b>NEUROMUSCULAR DRUGS</b>					
<b>ANTICONVULSANTS</b>					

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
APTIOM- eslicarbazepine acetate tab 200 mg, 400 mg, 600 mg, 800 mg	P					DEPAKOTE SPRINKLES- divalproex sodium cap delayed release sprinkle 125 mg	NP				
BANZEL- rufinamide susp 40 mg/ml	NP					DIACOMIT- stiripentol cap 250 mg, 500 mg	NP	•			
BANZEL- rufinamide tab 200 mg, 400 mg	NP					DIACOMIT- stiripentol packet 250 mg, 500 mg	NP	•			
BRIVIACT- brivaracetam oral soln 10 mg/ml	NP					DIASTAT ACUDIAL- diazepam rectal gel delivery system 10 mg	NP				
BRIVIACT- brivaracetam tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg	NP					DIAZEPAM RECTAL GEL- diazepam rectal gel delivery system 2.5 mg	NP				
<b>carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg (Carbatrol)</b>	p					<b>diazepam rectal gel delivery system 10 mg (Diastat acudial)</b>	p				
<b>carbamazepine chew tab 100 mg</b>	p					<b>diazepam rectal gel delivery system 20 mg</b>	p				
<b>carbamazepine susp 100 mg/5ml (Tegretol)</b>	p					DILANTIN- phenytoin sodium extended cap 30 mg, 100 mg	P				
<b>carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg (Tegretol-xr)</b>	p					DILANTIN INFATABS- phenytoin chew tab 50 mg	NP				
<b>carbamazepine tab 200 mg (Tegretol)</b>	p					DILANTIN-125- phenytoin susp 125 mg/5ml	P				
CARBATROL- carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg	NP					<b>divalproex sodium cap delayed release sprinkle 125 mg (Depakote sprinkles)</b>	p				
CELONTIN- methsuximide cap 300 mg	NP					<b>divalproex sodium tab delayed release 125 mg, 250 mg, 500 mg (Depakote)</b>	p				
<b>clobazam suspension 2.5 mg/ml (Onfi)</b>	np					<b>divalproex sodium tab er 24 hr 250 mg, 500 mg (Depakote er)</b>	p				
<b>clobazam tab 10 mg, 20 mg (Onfi)</b>	np					ELEPSIA XR- levetiracetam tab er 24hr 1000 mg, 1500 mg	NP				
<b>clonazepam orally disintegrating tab 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg</b>	np					EPIDIOLEX- cannabidiol soln 100 mg/ml	P	•	•		
<b>clonazepam tab 0.5 mg, 1 mg, 2 mg (Klonopin)</b>	p					EPRONTIA- topiramate oral soln 25 mg/ml	NP				
DEPAKOTE- divalproex sodium tab delayed release 125 mg, 250 mg, 500 mg	NP										
DEPAKOTE ER- divalproex sodium tab er 24 hr 250 mg, 500 mg	NP										

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>ethosuximide cap 250 mg (Zarontin)</b>	p				
<b>ethosuximide soln 250 mg/5ml (Zarontin)</b>	p				
<b>felbamate susp 600 mg/5ml (Felbatol)</b>	np				
<b>felbamate tab 400 mg, 600 mg (Felbatol)</b>	np				
FELBATOL- felbamate tab 400 mg, 600 mg	NP				
FINTEPLA- fenfluramine hcl oral soln 2.2 mg/ml	NP	•	•		•
<b>gabapentin cap 100 mg, 300 mg, 400 mg (Neurontin)</b>	p				
<b>gabapentin oral soln 250 mg/5ml (Neurontin)</b>	p				
<b>gabapentin tab 600 mg, 800 mg (Neurontin)</b>	p				
KEPPRA- levetiracetam oral soln 100 mg/ml	NP				
KEPPRA- levetiracetam tab 250 mg, 500 mg, 750 mg, 1000 mg	NP				
KEPPRA XR- levetiracetam tab er 24hr 500 mg, 750 mg	NP				
KLONOPIN- clonazepam tab 0.5 mg, 1 mg, 2 mg	NP				
<b>lacosamide oral solution 10 mg/ml (Vimpat)</b>	p				
<b>lacosamide tab 50 mg, 100 mg, 150 mg, 200 mg (Vimpat)</b>	p				
LAMICTAL- lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg	NP				
LAMICTAL CHEWABLE DISPERS- lamotrigine tab chewable dispersible 5 mg, 25 mg	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
LAMICTAL ODT- lamotrigine orally disintegrating tab 25 mg, 50 mg, 100 mg, 200 mg	NP				
LAMICTAL ODT- lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit	NP				
LAMICTAL ODT- lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit	NP				
LAMICTAL ODT- lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit	NP				
LAMICTAL STARTER/NOT TAKI- lamotrigine tab 25 mg (42) & 100 mg (7) starter kit	NP				
LAMICTAL STARTER/TAKING C- lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit	NP				
LAMICTAL STARTER/TAKING V- lamotrigine tab 35 x 25 mg starter kit	NP				
LAMICTAL XR- lamotrigine tab er 24hr 25 mg, 50 mg, 100 mg, 200 mg, 250 mg, 300 mg	NP				
LAMICTAL XR- lamotrigine tab er 24hr 21 x 25 mg & 7 x 50 mg titration kit	NP				
LAMICTAL XR- lamotrigine tab er 24hr 25 (14) & 50 mg (14) & 100 mg(7) kit	NP				
LAMICTAL XR- lamotrigine tab er 24hr 50 (14) & 100 mg(14) & 200 mg(7) kit	NP				
<b>lamotrigine orally disintegrating tab 25 mg, 50 mg, 100 mg, 200 mg (Lamictal odt)</b>	np				
<b>lamotrigine tab chewable dispersible 5 mg, 25 mg (Lamictal chewable di)</b>	p				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit (Lamictal odt)	np					NAYZILAM- midazolam nasal spray soln 5 mg/0.1 ml	NP				•
lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit (Lamictal odt)	np					NEURONTIN- gabapentin cap 100 mg, 300 mg, 400 mg	NP				
lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit (Lamictal odt)	np					NEURONTIN- gabapentin oral soln 250 mg/5ml	NP				
lamotrigine tab er 24hr 25 mg, 50 mg, 100 mg, 200 mg, 250 mg, 300 mg (Lamictal xr)	np					NEURONTIN- gabapentin tab 600 mg, 800 mg	NP				
lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg (Lamictal)	p					ONFI- clobazam suspension 2.5 mg/ml	NP				
lamotrigine tab 35 x 25 mg starter kit (Lamictal starter/tak)	np					ONFI- clobazam tab 10 mg, 20 mg	NP				
lamotrigine tab 25 mg (42) & 100 mg (7) starter kit (Lamictal starter/not)	np					oxcarbazepine susp 300 mg/5ml (60 mg/ml) (Trileptal)	p				
lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit (Lamictal starter/tak)	np					oxcarbazepine tab 150 mg, 300 mg, 600 mg (Trileptal)	p				
levetiracetam oral soln 100 mg/ml (Keppra)	p					OXTELLAR XR- oxcarbazepine tab er 24hr 150 mg, 300 mg, 600 mg	NP				
levetiracetam tab er 24hr 500 mg, 750 mg (Keppra xr)	p					phenytoin chew tab 50 mg (Dilantin infatabs)	p				
levetiracetam tab 250 mg, 500 mg, 750 mg, 1000 mg (Keppra)	p					phenytoin sodium extended cap 100 mg (Dilantin)	p				
LYRICA- pregabalin cap 25 mg, 50 mg, 75 mg, 100 mg, 150 mg, 200 mg, 225 mg, 300 mg	NP			•	•	phenytoin sodium extended cap 200 mg, 300 mg (Phenytek)	p				
LYRICA- pregabalin soln 20 mg/ml	NP			•	•	phenytoin susp 125 mg/5ml (Dilantin-125)	p				
methsuximide cap 300 mg (Celontin)	p					pregabalin cap 25 mg, 50 mg, 75 mg, 100 mg, 150 mg, 200 mg, 225 mg, 300 mg (Lyrica)	p				•
MYSOLINE- primidone tab 50 mg, 250 mg	NP					pregabalin soln 20 mg/ml (Lyrica)	p				•
						PRIMIDONE- primidone tab 125 mg	NP				
						primidone tab 50 mg, 250 mg (Mysoline)	p				
						QUDEXY XR- topiramate cap er 24hr sprinkle 25 mg, 50 mg, 100 mg, 150 mg, 200 mg	NP		•		•
						rufinamide susp 40 mg/ml (Banzel)	np				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands



Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>rufinamide tab 200 mg, 400 mg (Banzel)</b>	p				
SABRIL- vigabatrin powd pack 500 mg	NP	•			
SABRIL- vigabatrin tab 500 mg	NP	•			
SPRITAM- levetiracetam tab disintegrating soluble 250 mg, 500 mg, 750 mg, 1000 mg	NP				
SYMPAZAN- clobazam oral film 5 mg, 10 mg, 20 mg	NP				
TEGRETOL- carbamazepine susp 100 mg/5ml	NP				
TEGRETOL- carbamazepine tab 200 mg	NP				
TEGRETOL-XR- carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg	NP				
<b>tiagabine hcl tab 2 mg, 4 mg, 12 mg, 16 mg (Gabitril)</b>	np				
TOPAMAX- topiramate tab 25 mg, 50 mg, 100 mg, 200 mg	NP				
TOPAMAX SPRINKLE- topiramate sprinkle cap 15 mg, 25 mg	NP				
<b>topiramate cap er 24hr sprinkle 25 mg, 50 mg, 100 mg, 150 mg, 200 mg (Qudexy xr)</b>	np		•		•
<b>topiramate cap er 24hr 25 mg, 50 mg, 100 mg, 200 mg (Trokendi xr)</b>	np		•		•
<b>topiramate sprinkle cap 15 mg, 25 mg (Topamax sprinkle)</b>	p				
<b>topiramate tab 25 mg, 50 mg, 100 mg, 200 mg (Topamax)</b>	p				
TRILEPTAL- oxcarbazepine susp 300 mg/5ml (60 mg/ml)	NP				
TRILEPTAL- oxcarbazepine tab 150 mg, 300 mg, 600 mg	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
TROKENDI XR- topiramate cap er 24hr 25 mg, 50 mg, 100 mg, 200 mg	NP		•		•
<b>valproate sodium oral soln 250 mg/5ml (base equiv)</b>	p				
<b>valproic acid cap 250 mg</b>	p				
VALTOCO 10 MG DOSE- diazepam nasal spray 10 mg/0.1 ml	NP				•
VALTOCO 15 MG DOSE- diazepam nasal spray ther pack 2 x 7.5 mg/0.1ml (15 mg dose)	NP				•
VALTOCO 20 MG DOSE- diazepam nasal spray ther pack 2 x 10 mg/0.1ml (20 mg dose)	NP				•
VALTOCO 5 MG DOSE- diazepam nasal spray 5 mg/0.1 ml	NP				•
<b>vigabatrin powd pack 500 mg (Sabril)</b>	p	•			
<b>vigabatrin tab 500 mg (Sabril)</b>	p	•			
VIMPAT- lacosamide oral solution 10 mg/ml	NP				
VIMPAT- lacosamide tab 50 mg, 100 mg, 150 mg, 200 mg	NP				
XCOPRI- cenobamate tab pack 100 mg & 150 mg tabs (250 mg daily dose)	NP				
XCOPRI- cenobamate tab pack 150 mg & 200 mg tabs (350 mg daily dose)	NP				
XCOPRI- cenobamate tab titration pack 14 x 12.5 mg & 14 x 25 mg, 14 x 50 mg & 14 x 100 mg, 14 x 150 mg & 14 x 200 mg	NP				
XCOPRI- cenobamate tab 50 mg, 100 mg, 150 mg, 200 mg	NP				
ZARONTIN- ethosuximide cap 250 mg	NP				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ZARONTIN- ethosuximide soln 250 mg/5ml	NP				
ZONEGRAN- zonisamide cap 25 mg, 100 mg	NP				
ZONISADE- zonisamide oral susp 100 mg/5ml (20 mg/ml)	NP				
<b>zonisamide cap 25 mg, 100 mg (Zonegran)</b>	p				
<b>zonisamide cap 50 mg</b>	p				
ZTALMY- ganaxolone susp 50 mg/ml	NP	•			
<b>ANTIPARKINSON AGENTS</b>					
<b>amantadine hcl cap 100 mg</b>	p				
<b>amantadine hcl soln 50 mg/5ml</b>	p				
<b>amantadine hcl tab 100 mg</b>	np				
APOKYN- apomorphine hcl soln cartridge 30 mg/3ml	NP	•			
<b>apomorphine hcl soln cartridge 30 mg/3ml (Apokyn)</b>	np	•			
AZILECT- rasagiline mesylate tab 0.5 mg (base equiv), 1 mg (base equiv)	NP				
<b>benztropine mesylate tab 0.5 mg, 1 mg, 2 mg</b>	p				
<b>bromocriptine mesylate cap 5 mg (base equivalent) (Parlodel)</b>	np				
<b>bromocriptine mesylate tab 2.5 mg (base equivalent) (Parlodel)</b>	np				
<b>carbidopa &amp; levodopa tab er 25-100 mg, 50-200 mg</b>	p				
<b>carbidopa &amp; levodopa tab 10-100 mg, 25-100 mg (Sinemet)</b>	p				
<b>carbidopa &amp; levodopa tab 25-250 mg</b>	p				
<b>carbidopa tab 25 mg (Lodosyn)</b>	np				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg (Stalevo 50)</b>	p				
<b>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg (Stalevo 75)</b>	p				
<b>carbidopa-levodopa-entacapone tabs 25-100-200 mg (Stalevo 100)</b>	p				
<b>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg (Stalevo 125)</b>	p				
<b>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg (Stalevo 150)</b>	p				
<b>carbidopa-levodopa-entacapone tabs 50-200-200 mg (Stalevo 200)</b>	p				
CARBIDOPA/LEVODOPA ODT- carbidopa & levodopa orally disintegrating tab 10-100 mg, 25-100 mg, 25-250 mg	P				
COMTAN- entacapone tab 200 mg	NP				
DHIVY- carbidopa & levodopa tab 25-100 mg	NP				
DUOPA- carbidopa-levodopa enteral susp 4.63-20 mg/ml	NP				
<b>entacapone tab 200 mg (Comtan)</b>	p				
GOCOVRI- amantadine hcl cap er 24hr 68.5 mg (base equivalent), 137 mg (base equivalent)	NP	•	•	•	
INBRIJA- levodopa inhal powder cap 42 mg	P	•			
LODOSYN- carbidopa tab 25 mg	NP				
MIRAPEX ER- pramipexole dihydrochloride tab er 24hr 0.375 mg, 0.75 mg, 2.25 mg, 3 mg, 3.75 mg, 4.5 mg	NP				
NEUPRO- rotigotine td patch 24hr 1 mg/24hr, 2 mg/24hr, 3 mg/24hr, 4 mg/24hr, 6 mg/24hr, 8 mg/24hr	NP				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
NOURIANZ- istradefylline tab 20 mg, 40 mg	NP	•			
ONGENTYS- opicapone cap 25 mg, 50 mg	NP				
OSMOLEX ER- amantadine hcl tab er 24hr 129 mg (base equivalent), 193 mg (base equivalent)	NP		•		•
PARLODEL- bromocriptine mesylate cap 5 mg (base equivalent)	NP				
PARLODEL- bromocriptine mesylate tab 2.5 mg (base equivalent)	NP				
<b>pramipexole dihydrochloride tab er 24hr 0.375 mg, 0.75 mg, 1.5 mg, 2.25 mg, 3 mg, 3.75 mg, 4.5 mg (Mirapex er)</b>	np				
<b>pramipexole dihydrochloride tab 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg</b>	p				
<b>rasagiline mesylate tab 0.5 mg (base equiv), 1 mg (base equiv) (Azilect)</b>	p				
<b>ropinirole hydrochloride tab er 24hr 2 mg (base equivalent), 4 mg (base equivalent), 6 mg (base equivalent), 8 mg (base equivalent), 12 mg (base equivalent)</b>	np				
<b>ropinirole hydrochloride tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg</b>	p				
RYTARY- carbidopa & levodopa cap er 23.75-95 mg, 36.25-145 mg, 48.75-195 mg, 61.25-245 mg	NP				
<b>selegiline hcl cap 5 mg</b>	p				
<b>selegiline hcl tab 5 mg</b>	p				
SINEMET- carbidopa & levodopa tab 10-100 mg, 25-100 mg	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
STALEVO 100- carbidopa-levodopa-entacapone tabs 25-100-200 mg	NP				
STALEVO 125- carbidopa-levodopa-entacapone tabs 31.25-125-200 mg	NP				
STALEVO 150- carbidopa-levodopa-entacapone tabs 37.5-150-200 mg	NP				
STALEVO 200- carbidopa-levodopa-entacapone tabs 50-200-200 mg	NP				
STALEVO 50- carbidopa-levodopa-entacapone tabs 12.5-50-200 mg	NP				
STALEVO 75- carbidopa-levodopa-entacapone tabs 18.75-75-200 mg	NP				
TASMAR- tolcapone tab 100 mg	NP				
<b>tolcapone tab 100 mg (Tasmar)</b>	np				
TRIHENYPHENIDYL HCL- trihexyphenidyl hcl oral soln 0.4 mg/ml	P				
<b>trihexyphenidyl hcl tab 2 mg, 5 mg</b>	p				
XADAGO- safinamide mesylate tab 50 mg (base equiv), 100 mg (base equiv)	NP				
ZELAPAR- selegiline hcl orally disintegrating tab 1.25 mg	NP				
<b>NEUROMUSCULAR AGENTS</b>					
DAYBUE- trofinetide oral soln 200 mg/ml	NP	•	•		•
EVRYSDI- risdiplam for soln 0.75 mg/ml	NP	•	•		•
EXSERVAN- riluzole oral film 50 mg	NP	•			
RADICAVA ORS- edaravone oral susp 105 mg/5ml	NP	•	•		•
RADICAVA ORS STARTER KIT- edaravone oral susp 105 mg/5ml	NP	•	•		•
RELYVRIO- sodium phenylbutyrate- taurursodiol powd pack 3-1 gm	NP	•	•		•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
RILUTEK- riluzole tab 50 mg	NP	•			
<b>riluzole tab 50 mg (Rilutek)</b>	p	•			
SKYCLARYS- omaveloxolone cap 50 mg	NP	•	•		•
<b>MUSCULOSKELETAL THERAPY AGENTS</b>					
AMRIX- cyclobenzaprine hcl cap er 24hr 15 mg, 30 mg	NP				
BACLOFEN- baclofen oral soln 5 mg/5ml	NP		•		•
<b>baclofen susp 25 mg/5ml (Fleqsuvy)</b>	np		•		•
<b>baclofen tab 5 mg</b>	np				
<b>baclofen tab 10 mg, 20 mg</b>	p				
<b>chlorzoxazone tab 250 mg, 375 mg, 750 mg</b>	np				
<b>chlorzoxazone tab 500 mg</b>	p				
<b>cyclobenzaprine hcl cap er 24hr 15 mg, 30 mg (Amrix)</b>	np				
<b>cyclobenzaprine hcl tab 5 mg, 10 mg</b>	p				
<b>cyclobenzaprine hcl tab 7.5 mg</b>	np				
DANTRIUM- dantrolene sodium cap 25 mg	NP				
<b>dantrolene sodium cap 25 mg (Dantrium)</b>	np				
<b>dantrolene sodium cap 50 mg, 100 mg</b>	np				
EUFLEXXA- sodium hyaluronate intra-articular soln pref syr 20 mg/2ml	P				
FLEQSUVY- baclofen susp 25 mg/5ml	NP		•		•
LYVISPAH- baclofen granules packet 5 mg, 10 mg, 20 mg	NP		•		•
<b>metaxalone tab 400 mg, 800 mg</b>	np				
<b>methocarbamol tab 500 mg, 750 mg</b>	p				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
NORGESIC FORTE- orphenadrine w/ aspirin & caffeine tab 50-770-60 mg	NP				
<b>orphenadrine citrate tab er 12hr 100 mg</b>	p				
<b>orphenadrine w/ aspirin &amp; caffeine tab 25-385-30 mg</b>	np				
<b>orphenadrine w/ aspirin &amp; caffeine tab 50-770-60 mg (Norgesic forte)</b>	np				
SOHONOS- palovarotene cap 1 mg, 1.5 mg, 2.5 mg, 5 mg, 10 mg	NP				
SYNVISC- hylan g-f 20 intra-articular soln prefilled syr 16 mg/2ml	P				
SYNVISC ONE- hylan g-f 20 intra-articular soln prefilled syr 48 mg/6ml	P				
<b>tizanidine hcl cap 2 mg (base equivalent), 4 mg (base equivalent), 6 mg (base equivalent) (Zanaflex)</b>	np				
<b>tizanidine hcl tab 2 mg (base equivalent)</b>	p				
<b>tizanidine hcl tab 4 mg (base equivalent) (Zanaflex)</b>	p				
ZANAFLEX- tizanidine hcl cap 2 mg (base equivalent), 4 mg (base equivalent), 6 mg (base equivalent)	NP				
ZANAFLEX- tizanidine hcl tab 4 mg (base equivalent)	NP				
<b>ANTIMYASTHENIC AGENTS</b>					
FIRDAPSE- amifampridine phosphate tab 10 mg (base equivalent)	NP	•	•		•
MESTINON- pyridostigmine bromide oral soln 60 mg/5ml	NP				
MESTINON- pyridostigmine bromide tab 60 mg	NP				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
MESTINON TIMESPAN- pyridostigmine bromide tab er 180 mg	NP				
PYRIDOSTIGMINE BROMIDE- pyridostigmine bromide tab 30 mg	NP				
<b>pyridostigmine bromide oral soln 60 mg/5ml (Mestinon)</b>	np				
<b>pyridostigmine bromide tab er 180 mg (Mestinon timespan)</b>	np				
<b>pyridostigmine bromide tab 60 mg (Mestinon)</b>	p				
<b>NUTRITIONAL PRODUCTS</b>					
<b>VITAMINS</b>					
DRISDOL- ergocalciferol cap 1.25 mg (50000 unit)	NP				
<b>ergocalciferol cap 1.25 mg (50000 unit) (Drisdol)</b>	p				
<b>phytonadione tab 5 mg (Mephyton)</b>	p				
<b>MULTIVITAMINS</b>					
ATABEX EC- prenatal vit w/ dss-iron carbonyl-fa tab dr 29-1 mg	NP				
ATABEX OB- prenatal vit w/ fe bisglycinate chelate-fa tab 29-1 mg	NP				
AZESCO- prenatal vit w/ fe gluconate-fa tab 13-1 mg	NP				
C-NATE DHA- prenatal vit w/ fe fum-fa-omega 3 cap 28-1-200 mg	NP				
CITRANATAL ASSURE- prenat w/o a w/fecbn-fegl-dss-fa tab & dha cap 300 mg pak	NP				
CITRANATAL B-CALM- prenat w/o a w/fecbn-feglu-fa tab 20-1 mg & vit b6 tab pak	NP				
CITRANATAL HARMONY- prenat w/ o a w/fe fum-fe cbn-dss-fa-dha cap 27-1-260 mg	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CITRANATAL MEDLEY- prenat w/ o a w/fe fum-fe cbn-fa-dha cap 27-1-200 mg	NP				
CITRANATAL 90 DHA- prenat w/o a w/fecbn-fegl-dss-fa tab 90 & dha cap 300mg pak	NP				
CO-NATAL FA- prenatal vit w/ fe fumarate-fa tab 29-1 mg	NP				
COMPLETE NATAL DHA- prenat-fe bis-fe prot succ-fa-ca tab & omega 3 cap 200 pk	NP				
COMPLETENATE- prenatal vit w/ fe fumarate-fa chew tab 29-1 mg	NP				
CONCEPT DHA- prenatal w/fe fum-fe poly -fa-omega 3 cap 53.5-38-1 mg	NP				
CONCEPT OB- prenatal w/o a w/fe fum-fe poly-fa cap 130-92.4-1 mg	NP				
DERMACINRX PRETRATE- prenatal multivitamins & minerals w/ iron & fa tab 1 mg	NP				
DUET DHA 400- prenat w/fe poly-na fered-fa tab 25-1 & omega cap 400 mg	NP				
ELITE-OB- prenatal vit w/ iron carbonyl-fa tab 50-1.25 mg	NP				
ENBRACE HR- prenatal vit w/ fe gly cys-fa-omega 3 fatty acids cap	NP				
FOLIVANE-OB- prenatal w/o a w/fe fum-fe poly-fa cap 85-1 mg	NP				
INATAL GT- prenatal vit w/ dss-iron carbonyl-fa tab 90-1 mg	NP				
JENLIVA PRENATAL/POSTNATA- prenatal multivitamins & minerals w/ iron & fa cap 1 mg	NP				
KOSHER PRENATAL PLUS IRON- prenatal vit w/ iron carbonyl-fa tab 30-1 mg	P				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
M-NATAL PLUS- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP				
NATACHEW- prenatal vit w/ fe fum-fe bisglycin-fa chew tab 28-1 mg	NP				
NATAL PNV- prenatal vit w/ fe gluconate-fa tab 6-0.5 mg	NP				
NATALVIT- prenatal vit w/ fe fumarate-fa tab 75-1 mg	NP				
NEEVO DHA- prenatal w/o a w/feum-methylfol-omegas cap 27-1.13 mg	NP				
NEONATAL COMPLETE- prenatal vit w/ fe fumarate-fa tab 27-1 mg, 29-1 mg	NP				
NEONATAL FE- prenatal vitamin w/ iron-folic acid tab 90-1 mg	NP				
NEONATAL PLUS- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP				
NEONATAL 19- prenatal vitamin-folic acid tab 1 mg	NP				
NEONATAL/DHA- prenatal mv w/ fe fum-fa tab 29-1 mg & dha cap 200 mg pack	NP				
NESTABS- prenatal vit w/o vit a w/ fe bisglycinate-fa tab 32-1 mg	NP				
NESTABS DHA- prenatal w/o a w/ fe bisglyc-fa tab 32-1 mg & omega cap pack	NP				
NESTABS ONE- prenatal w/o a w/febn-bisg-methylf-dha cap 38-1-225 mg	NP				
NIVA-PLUS- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP				
OB COMPLETE- prenatal vit w/ iron carbonyl-fa tab 50-1.25 mg	NP				
OB COMPLETE ONE- prenatal w/o a w/febn-fe asp glyc-fa-fish cap 50-1-476 mg	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
OB COMPLETE PETITE- prenatal w/o a w/febn-feaspglyc-fa-omega cap 35-5-1-200 mg	NP				
OB COMPLETE PREMIER- prenatal vit w/ fe cbn-fe asp glyc-fa tab 30-20-1 mg	NP				
OB COMPLETE/DHA- prenatal w/ iron cbn-fe asp glyc-fa-omega cap 30-10-1-200 mg	NP				
ONE VITE WOMENS PRENATAL- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP				
PNV TABS 20-1- prenatal vit w/fe bisglyc chelate-fa tab 20-1mg (1.7mg dfe)	NP				
PNV-DHA- prenatal w/o a w/ fefum-methfol-fa-dha cap 27-0.6-0.4-300 mg	NP				
PNV-DHA+DOCUSATE- prenatal w/ o vit a w/ fe fum-dss-fa-dha cap 27-1.25-300 mg	NP				
PNV-OMEGA- prenatal w/o a w/ fe fumarate-methylfolate-fa-omega 3 cap	NP				
PNV-SELECT- prenatal vit w/ fe fum-methylfolate-fa tab 27-0.6-0.4 mg	NP				
PREGEN DHA- prenatal mv & min w/ fe carbonyl-fa-dha cap 28-1-35 mg	NP				
PREGENNA- prenatal vit w/fe bisglyc chelate-fa tab 20-1mg (1.7mg dfe)	NP				
PREMESISRX- prenatal w/ calcium-vit b6-vit b12-fa-ginger tab 1 mg	NP				
PRENA 1 TRUE- prenatal w/o a w/fe chel-fa tab 30-1.4 mg & dha cap 300mg pk	NP				

p = Preferred Generics  
 np = Non-preferred Generics

P = Preferred Brands  
 NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
PRENAISSANCE- prenatal w/o vit a w/ fe fum-dss-fa-dha cap 29-1.25-325 mg	NP				
PRENAISSANCE PLUS- prenatal w/o a w/fe cbn-dss-fa-dha cap 28-1-250 mg	NP				
PRENATAL- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP				
PRENATAL PLUS- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP				
PRENATAL PLUS VITAMIN AND- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP				
PRENATAL 19- prenatal vit w/ dss-fe fumarate-fa tab 29-1 mg	P				
PRENATAL 19- prenatal vit w/ fe fumarate-fa chew tab 29-1 mg	P				
PRENATAL-U- prenatal w/o a vit w/ fe fumarate-fa cap 106.5-1 mg	P				
PRENATE- prenatal mv & min w/ l-methylfolate-fa chew tab 0.6-0.4 mg	NP				
PRENATE AM- prenatal w/ calcium-vit b6-vit b12-fa-ginger tab 1 mg	NP				
PRENATE DHA- prenatal w/o a w/feasp-methfol-fa-dha cap 18-0.6-0.4-300 mg	NP				
PRENATE ELITE- prenatal w/ fe asp gly-l methylfol-fa tab 20-0.6-0.4 mg	NP				
PRENATE ENHANCE- prenatal w/ o a w/fefum-methfol-fa-dha cap 28-0.6-0.4-400 mg	NP				
PRENATE ESSENTIAL- prenatal w/ o a w/feasp-methfol-fa-dha cap 18-0.6-0.4-300 mg	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
PRENATE MINI- prenatal w/oa w/ fecb-feasp-meth-fa-dha cap 18-0.6-0.4-350 mg	NP				
PRENATE PIXIE- prenatal w/o a w/feasp-methfol-fa-dha cap 10-0.6-0.4-200 mg	NP				
PRENATE RESTORE- prenatal w/ o a w/fefum-methfol-fa-dha cap 27-0.6-0.4-400 mg	NP				
PRENATRIX- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP				
PRENATRYL- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP				
PRENATVITE COMPLETE- prenatal multivitamins & minerals w/ iron & fa tab 1 mg	NP				
PRENATVITE PLUS- prenatal multivitamins & minerals w/ iron & fa tab 1 mg	NP				
PRENATVITE RX- prenatal multivitamins & minerals w/iron & fa tab 0.8 mg	NP				
PRENA1 CHEW- prenatal w/ b2-b6-b12-d3-folic acid chew tab 1.4 mg	NP				
PRENA1 PEARL- prenatal w/oa w/ fefum-na fered-fa-dha cap er 30-1.4-200 mg	NP				
PRIMACARE- prenatal w/o a w/ feasp-methlf-fa-omeg cap 30-0.75-0.25-470mg	NP				
PROVIDA OB- prenatal w/o a w/fe fum-fe poly-fa cap 20-20-1.25 mg	NP				
RELNATE DHA- prenatal vit w/ fe fum-fa-omega 3 cap 28-1-200 mg	NP				
SE-NATAL 19- prenatal vit w/ dss-fe fumarate-fa tab 29-1 mg	P				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
SE-NATAL 19- prenatal vit w/ fe fumarate-fa chew tab 29-1 mg	P				
SELECT-OB- prenatal w/ fepolycmplx-methylfol-fa chew tab 29-0.6-0.4 mg	NP				
SELECT-OB- prenatal vit w/ fe polysac cmplx-fa chew tab 29-1 mg	NP				
SELECT-OB+DHA- prenatal mv w/ fe poly-fa chw 29-1 mg & dha cap 250 mg pak	NP				
TARON-C DHA- prenatal w/fe fum-fe poly -fa-omega 3 cap 35-1 mg	NP				
THRIVITE RX- prenatal vit w/ iron carbonyl-fa tab 29-1 mg	NP				
TRINATAL RX 1- prenatal vit w/ fe fumarate-fa tab 60-1 mg	NP				
TRINATE- prenatal vit w/ fe fumarate-fa tab 28-1 mg	P				
TRISTART DHA- prenatal w/o a w/fecbn-methylf-fa-dha cap 31-0.6-0.4-200 mg	NP				
VINATE DHA RF- prenatal w/o a w/fefum-methylfol-omegas cap 27-1.13 mg	NP				
VINATE II- prenatal vit w/ fe bisglycinate chelate-fa tab 29-1 mg	P				
VINATE ONE- prenatal vit w/ fe fumarate-fa tab 60-1 mg	P				
VITAFOL FE+- prenatal w/fe poly-methylfol-fa-dha cap 90-0.6-0.4-200 mg	NP				
VITAFOL GUMMIES- prenatal vit w/ fe phos-fa-omega chew tab 3.33-0.333-34.8 mg	NP				
VITAFOL STRIPS- prenatal w/ b6-b12-cholecalciferol-folic acid film 1 mg	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
VITAFOL ULTRA- prenatal w/ fe poly-methylfol-fa-dha cap 29-0.6-0.4-200 mg	NP				
VITAFOL-NANO- prenatal w/o a w/ fefum-l methylfol-fa tab 18-0.6-0.4 mg	NP				
VITAFOL-OB- prenatal vit w/ fe fumarate-fa tab 65-1 mg	NP				
VITAFOL-OB+DHA- prenatal mv w/ fe fum-fa tab 65-1 mg & dha cap 250 mg pack	NP				
VITAFOL-ONE- prenatal mv w/ fe polysac cmplx-fa-dha cap 29-1-200 mg	NP				
VITAMEDMD ONE RX/QUATREFO- prenatal w/o a w/fefum-methfol-fa-dha cap 30-0.6-0.4-200 mg	NP				
VITAMEDMD REDICHEW RX- prenatal w/ b2-b6-b12-d3-folic acid chew tab 1.4 mg	NP				
VITAPEARL- prenatal w/oa w/fefum-na fered-fa-dha cap er 30-1.4-200 mg	NP				
VITATHELY/GINGER- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP				
VITATRUE- prenatal w/o a w/fe chel-fa tab 30-1.4 mg & dha cap 300mg pk	NP				
VIVA DHA- prenatal vit w/ fe fum-fa-omega 3 cap 28-1-200 mg	NP				
WESCAP-C DHA- prenatal w/fe fum-fe poly -fa-omega 3 cap 53.5-38-1 mg	NP				
WESCAP-PN DHA- prenatal w/o a w/fefum-methfol-fa-dha cap 27-0.6-0.4-300 mg	NP				
WESNATAL DHA COMPLETE- prenatal-fe bis-fe prot succ-fa-ca tab & omega 3 cap 200 pk	NP				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands



Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
WESNATE DHA- prenatal vit w/ fe fum-fa-omega 3 cap 28-1-200 mg	NP				
WESTAB PLUS- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP				
WESTGEL DHA- prenat w/o a w/fecbn-methylf-fa-dha cap 31-0.6-0.4-200 mg	NP				
ZALVIT- prenatal vit w/ fe gluconate-fa tab 13-1 mg	NP				
ZIPHEX- prenatal vit w/ fe gluconate-fa tab 13-1 mg	NP				
<b>MINERALS and ELECTROLYTES</b>					
FLORIVA- sodium fluoride-vitamin d liqd drops 0.25 mg/ml-400 unit/ml	NP				
GALZIN- zinc acetate cap 25 mg (elemental zinc), 50 mg (elemental zinc)	NP				
K-PHOS- potassium phosphate monobasic tab 500 mg	NP				
K-PHOS NEUTRAL- pot phos monobasic w/sod phos di & monobas tab 155-852-130mg	NP				
K-TAB- potassium chloride tab er 20 meq (1500 mg)	NP				
POKONZA- potassium chloride powder packet 10 meq	NP				
<b>pot phos monobasic w/sod phos di &amp; monobas tab 155-852-130mg (K-phos neutral)</b>	p				
<b>potassium chloride cap er 8 meq, 10 meq</b>	p				
POTASSIUM CHLORIDE ER- potassium chloride tab er 8 meq (600 mg)	P				
<b>potassium chloride microencapsulated crys er tab 10 meq, 20 meq</b>	p				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>potassium chloride microencapsulated crys er tab 15 meq</b>	np				
<b>potassium chloride oral soln 10% (20 meq/15ml), 20% (40 meq/15ml)</b>	p				
<b>potassium chloride powder packet 20 meq</b>	p				
<b>potassium chloride tab er 8 meq (600 mg)</b>	p				
<b>potassium chloride tab er 10 meq (K-tab)</b>	p				
<b>potassium chloride tab er 20 meq (1500 mg) (K-tab)</b>	np				
<b>potassium phosphate monobasic tab 500 mg (K-phos)</b>	p				
SODIUM FLUORIDE- sodium fluoride tab 0.5 mg f (from 1.1 mg naf), 1 mg f (from 2.2 mg naf)	P				
<b>sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf), 0.5 mg f (from 1.1 mg naf), 1 mg f (from 2.2 mg naf)</b>	p				
<b>sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)</b>	p				
<b>NUTRIENTS</b>					
DOJOLVI- triheptanoin oral liquid 100%	NP	•	•		
<b>HEMATOLOGICAL AGENTS</b>					
<b>HEMATOPOIETIC AGENTS</b>					
ACCRUFER- ferric maltol cap 30 mg (fe equiv)	NP		•		•
ARANESP ALBUMIN FREE- darbepoetin alfa soln inj 25 mcg/ml, 40 mcg/ml, 60 mcg/ml, 100 mcg/ml, 200 mcg/ml	P	•	•		

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ARANESP ALBUMIN FREE- darbepoetin alfa soln prefilled syringe 10 mcg/0.4ml, 25 mcg/0.42ml, 40 mcg/0.4ml, 60 mcg/0.3ml, 100 mcg/0.5ml, 150 mcg/0.3ml, 200 mcg/0.4ml, 300 mcg/0.6ml, 500 mcg/ml	P	•	•			GRANIX- tbo-filgrastim soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	NP	•	•		
<b>carbonyl iron susp 15 mg/1.25ml (elemental iron)</b>	np					GRANIX- tbo-filgrastim subcutaneous inj 300 mcg/ml, 480 mcg/1.6ml (300 mcg/ml)	NP	•	•		
CERDELGA- eliglustat tartrate cap 84 mg (base equivalent)	P	•	•		•	HYDROXOCOBALAMIN- hydroxocobalamin acetate inj 1000 mcg/ml (base equivalent)	NP				
<b>cyanocobalamin inj 1000 mcg/ml</b>	p					IRON UP- polysaccharide iron complex liquid 15 mg/0.5ml (fe equiv)	NP				
<b>cyanocobalamin nasal spray 500 mcg/0.1ml (Nascobal)</b>	np					LEUKINE- sargramostim lyophilized for inj 250 mcg	NP	•	•		
DOPTELET- avatrombopag maleate tab 20 mg (base equiv)	NP	•	•		•	<b>miglustat cap 100 mg (Zavesca)</b>	np	•	•		•
DROXIA- hydroxyurea cap 200 mg, 300 mg, 400 mg	NP	•				MIRCERA- methoxy peg-epoetin beta soln prefilled syr 30 mcg/0.3ml, 50 mcg/0.3ml, 75 mcg/0.3ml, 100 mcg/0.3ml, 120 mcg/0.3ml, 150 mcg/0.3ml, 200 mcg/0.3ml	NP		•		
ENDARI- glutamine (sickle cell) powd pack 5 gm	NP	•	•			MULPLETA- lusutrombopag tab 3 mg	NP	•	•		•
EPOGEN- epoetin alfa inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml	NP	•	•			NASCOBAL- cyanocobalamin nasal spray 500 mcg/0.1ml	NP				
<b>ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe), 220 mg/5ml (44 mg/5ml elemental fe), 300 mg/5ml (60 mg/5ml elemental fe)</b>	np					NEULASTA- pegfilgrastim soln prefilled syringe 6 mg/0.6ml	NP	•	•		
<b>folic acid cap 0.8 mg</b>	np					NEULASTA ONPRO KIT- pegfilgrastim soln prefilled syringe kit 6 mg/0.6ml	NP	•	•		
<b>folic acid tab 400 mcg, 800 mcg</b>	np					NEUPOGEN- filgrastim inj 300 mcg/ml, 480 mcg/1.6ml (300 mcg/ml)	NP	•	•		
<b>folic acid tab 1 mg</b>	p					NEUPOGEN- filgrastim soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml (600 mcg/ml)	NP	•	•		
FULPHILA- pegfilgrastim-jmdb soln prefilled syringe 6 mg/0.6ml	P	•	•			NIVESTYM- filgrastim-aafi inj 300 mcg/ml, 480 mcg/1.6ml (300 mcg/ml)	P	•	•		
FYLNETRA- pegfilgrastim-pbbk soln prefilled syringe 6 mg/0.6ml	NP	•	•								

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
NIVESTYM- filgrastim-aafi soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	P	•	•		
NOVAFERRUM PEDIATRIC DROP- polysaccharide iron complex liquid 15 mg/ml (fe equiv)	NP				
NYVEPRIA- pegfilgrastim-apgf soln prefilled syringe 6 mg/0.6ml	P	•	•		
OXBRYTA- voxelotor tab for oral susp 300 mg	NP	•	•		•
OXBRYTA- voxelotor tab 300 mg, 500 mg	NP	•	•		•
PROCRIIT- epoetin alfa inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml, 40000 unit/ml	NP	•	•		
PROMACTA- eltrombopag olamine powder pack for susp 25 mg (base equiv), 12.5 mg (base eq)	NP	•	•		•
PROMACTA- eltrombopag olamine tab 12.5 mg (base equiv), 25 mg (base equiv), 50 mg (base equiv), 75 mg (base equiv)	NP	•	•		•
RELEUKO- filgrastim-ayow soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	NP	•	•		
RETACRIIT- epoetin alfa-epbx inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml, 40000 unit/ml	P	•	•		
SIKLOS- hydroxyurea tab 100 mg, 1000 mg	NP	•			
STIMUFEND- pegfilgrastim-fpgk soln prefilled syringe 6 mg/0.6ml	NP	•	•		
UDENYCA- pegfilgrastim-cbqv soln auto-injector 6 mg/0.6ml	NP	•	•		

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
UDENYCA- pegfilgrastim-cbqv soln prefilled syringe 6 mg/0.6ml	NP	•	•		
ZARXIO- filgrastim-sndz soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	P	•	•		
ZAVESCA- miglustat cap 100 mg	NP	•	•		•
ZIEXTENZO- pegfilgrastim-bmez soln prefilled syringe 6 mg/0.6ml	NP	•	•		
<b>ANTICOAGULANTS</b>					
ARIXTRA- fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml, 10 mg/0.8ml	NP				•
<b>dabigatran etexilate mesylate cap 75 mg (etexilate base eq), 150 mg (etexilate base eq) (Pradaxa)</b>	np				•
ELIQUIS- apixaban tab 2.5 mg, 5 mg	P				•
ELIQUIS STARTER PACK- apixaban tab starter pack 5 mg	P				•
<b>enoxaparin sodium inj soln pref syr 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml, 100 mg/ml, 120 mg/0.8ml, 150 mg/ml (Lovenox)</b>	p				•
<b>enoxaparin sodium inj 300 mg/3ml (Lovenox)</b>	p				•
<b>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml, 10 mg/0.8ml (Arixtra)</b>	np				•
FRAGMIN- dalteparin sodium soln prefilled syr 2500 unit/0.2ml, 5000 unit/0.2ml, 7500 unit/0.3ml, 10000 unit/ml, 12500 unit/0.5ml, 15000 unit/0.6ml, 18000 unit/0.72ml	NP				•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
FRAGMIN- dalteparin sodium subcutaneous soln 10000 unit/4ml, 95000 unit/3.8ml	NP				•
HEPARIN SODIUM- heparin sodium (porcine) pf inj 5000 unit/ml	NP				
<b>heparin sodium (porcine) inj 1000 unit/ml, 5000 unit/ml, 10000 unit/ml, 20000 unit/ml</b>	np				
<b>heparin sodium (porcine) pf inj 5000 unit/0.5ml</b>	np				
LOVENOX- enoxaparin sodium inj soln pref syr 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml, 100 mg/ml, 120 mg/0.8ml, 150 mg/ml	NP				•
LOVENOX- enoxaparin sodium inj 300 mg/3ml	NP				•
PRADAXA- dabigatran etexilate mesylate cap 75 mg (etexilate base eq), 110 mg (etexilate base eq), 150 mg (etexilate base eq)	NP				•
PRADAXA- dabigatran etexilate mesylate pellet pack 20 mg, 30 mg, 40 mg, 50 mg, 110 mg, 150 mg	NP				•
SAVAYSA- edoxaban tosylate tab 15 mg (base equivalent), 30 mg (base equivalent), 60 mg (base equivalent)	NP				•
<b>warfarin sodium tab 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg, 10 mg</b>	p				
XARELTO- rivaroxaban for susp 1 mg/ml	P				•
XARELTO- rivaroxaban tab 2.5 mg, 10 mg, 15 mg, 20 mg	P				•
XARELTO STARTER PACK- rivaroxaban tab starter therapy pack 15 mg & 20 mg	P				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>HEMOSTATICS</b>					
<b>aminocaproic acid oral soln 0.25 gm/ml (Amicar)</b>	np				
<b>aminocaproic acid tab 500 mg, 1000 mg (Amicar)</b>	np				
<b>tranexamic acid tab 650 mg (Lysteda)</b>	np				
<b>HEMATOLOGICAL AGENTS - MISC.</b>					
ADVATE- antihemophilic factor recomb (rahf-pfm) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit, 4000 unit	P	•	•		
ADYNOVATE- antihemophilic factor recomb pegylated for inj 250 unit, 500 unit, 750 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit	NP	•	•		
AFSTYLA- antihemophilic fact rcmb single chain for inj kit 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 2500 unit, 3000 unit	P	•	•		
AGRYLIN- anagrelide hcl cap 0.5 mg	NP				
ALPHANATE- antihemophilic factor/vwf (human) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit	NP	•	•		
ALPHANINE SD- coagulation factor ix for inj 500 unit, 1000 unit, 1500 unit	NP	•	•		
ALPROLIX- coagulation factor ix (recomb) (rfixfc) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit, 4000 unit	NP	•	•		
ALTUVIIIO- antihemophilic fact rcmb fc-vwf-xten-ehtl for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit, 4000 unit	P	•	•		
<b>anagrelide hcl cap 0.5 mg (Agrylin)</b>	p				
<b>anagrelide hcl cap 1 mg</b>	p				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>aspirin-dipyridamole cap er 12hr 25-200 mg</b>	np				
BENEFIX- coagulation factor ix (recombinant) for inj kit 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit	P	•	•		
BERINERT- c1 esterase inhibitor (human) for iv inj kit 500 unit	NP	•	•		•
BRILINTA- ticagrelor tab 60 mg, 90 mg	P				
CABLIVI- caplacizumab-yhdp for inj kit 11 mg	NP	•			•
<b>cilostazol tab 50 mg, 100 mg</b>	p				
<b>clopidogrel bisulfate tab 75 mg (base equiv) (Plavix)</b>	p				
COAGADEX- coagulation factor x (human) for inj 250 unit, 500 unit	P	•	•		
CORIFACT- factor xiii concentrate (human) for inj kit 1000-1600 unit	P	•			
<b>dipyridamole tab 25 mg, 50 mg, 75 mg</b>	p				
EFFIENT- prasugrel hcl tab 5 mg (base equiv), 10 mg (base equiv)	NP				
ELOCTATE- antihemophilic factor rcmb (bdd-rfviiiifc) for inj 250 unit, 500 unit, 750 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit, 4000 unit, 5000 unit, 6000 unit	P	•	•		
EMPAVELI- pegcetacoplan subcutaneous soln 1080 mg/20ml (54 mg/ml)	P	•	•		•
ESPEROCT- antihemophilic factor recomb glycopeg-exei for inj 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit	P	•	•		

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
FEIBA- antiinhibitor coagulant complex for iv soln 500 unit, 1000 unit, 2500 unit	P	•			
FIBRYGA- fibrinogen conc (human) inj approximately 1 gm (900-1300 mg)	NP	•	•		
FIRAZYR- icatibant acetate subcutaneous soln pref syr 30 mg/3ml	NP	•	•		•
HAEGARDA- c1 esterase inhibitor (human) for subcutaneous inj 2000 unit, 3000 unit	P	•	•		•
HEMLIBRA- emicizumab-kxwh subcutaneous soln 30 mg/ml, 60 mg/0.4ml (150 mg/ml), 105 mg/0.7ml (150 mg/ml), 150 mg/ml, 300 mg/2ml (150 mg/ml)	NP	•	•		•
HEMOFIL M- antihemophilic factor (human) for inj 250 unit, 500 unit, 1000 unit, 1700 unit	NP	•	•		
HUMATE-P- antihemophilic factor/vwf (human) for inj 250-600 unit, 500-1200 unit, 1000-2400 unit	P	•	•		
<b>icatibant acetate subcutaneous soln pref syr 30 mg/3ml (Firazyr)</b>	p	•	•		•
IDELVION- coagulation factor ix (recomb) (rix-fp) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3500 unit	NP	•	•		
IXINITY- coagulation factor ix (recombinant) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit	NP	•	•		
JIVI- antihemophil fact rcmb(bdd-rfviii peg-aucl) for inj 500 unit	P	•	•		
JIVI- antihemophil fact rcmb(bdd-rfviii peg-aucl)for inj 1000 unit, 2000 unit, 3000 unit	P	•	•		
KOATE- antihemophilic factor (human) for inj 250 unit, 500 unit, 1000 unit	NP	•	•		

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
KOATE-DVI- antihemophilic factor (human) for inj 500 unit, 1000 unit	NP	•	•			<b>prasugrel hcl tab 5 mg (base equiv), 10 mg (base equiv) (Effient)</b>	p				
KOGENATE FS- antihemophilic factor recomb (rfviii) for inj kit 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit	P	•	•			PROFILNINE- factor ix complex for inj 500 unit, 1000 unit, 1500 unit	NP	•	•		
KOVALTRY- antihemophilic factor recomb (rahf-pfm) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit	P	•	•			PYRUKYND- mitapivat sulfate tab 5 mg, 20 mg, 50 mg	NP	•	•		•
NOVOEIGHT- antihemophilic fact rcmb (bd trunc-rfviii) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit	P	•	•			PYRUKYND TAPER PACK- mitapivat sulfate tab therapy pack 5 mg, 7 x 20 mg & 7 x 5 mg, 7 x 50 mg & 7 x 20 mg	NP	•	•		•
NOVOSEVEN RT- coagulation factor viia (recomb) for inj 1 mg (1000 mcg), 2 mg (2000 mcg), 5 mg (5000 mcg), 8 mg (8000 mcg)	P	•	•			REBINYN- coagulation factor ix recomb glycopegylated for inj 500 unit, 1000 unit, 2000 unit, 3000 unit	NP	•	•		
NUWIQ- antihemophil fact rcmb (bdd-rfviii,sim) for inj kit 250 unit, 500 unit	NP	•	•			RECOMBINATE- antihemophilic factor recomb (rfviii) for inj 220-400 unit, 401-800 unit, 801-1240 unit, 1241-1800 unit, 1801-2400 unit	NP	•	•		
NUWIQ- antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 1000 unit, 1500 unit, 2000 unit, 2500 unit, 3000 unit, 4000 unit	NP	•	•			RIASTAP- fibrinogen conc (human) inj approximately 1 gm (900-1300 mg)	NP	•	•		
NUWIQ- antihemophilic fact rcmb (bdd-rfviii,sim) for inj 1000 unit, 1500 unit, 2000 unit, 2500 unit, 3000 unit, 4000 unit	NP	•	•			RIXUBIS- coagulation factor ix (recombinant) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit	NP	•	•		
NUWIQ- antihemophilic factor rcmb (bdd-rfviii,sim) for inj 250 unit, 500 unit	NP	•	•			RUCONEST- c1 esterase inhibitor (recombinant) for iv inj 2100 unit	NP	•	•		•
OBIZUR- antihemophilic factor (recomb porc) rpfviii for inj 500 unit	P	•				SEVENFACT- coagulation factor viia (recom)-jncw for inj 1 mg (1000 mcg), 5 mg (5000 mcg)	NP	•	•		
ORLADEYO- berotralstat hcl cap 110 mg, 150 mg	NP	•	•		•	TAKHZYRO- lanadelumab-flyo inj 300 mg/2ml (150 mg/ml)	P	•	•		•
<b>pentoxifylline tab er 400 mg</b>	p					TAKHZYRO- lanadelumab-flyo soln pref syringe 150 mg/ml, 300 mg/2ml (150 mg/ml)	P	•	•		•
PLAVIX- clopidogrel bisulfate tab 75 mg (base equiv)	NP					TAVALISSE- fostamatinib disodium tab 100 mg (base equivalent), 150 mg (base equivalent)	NP	•	•		•
						TAVNEOS- avacopan cap 10 mg	NP	•	•		•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
TRETEN- coagulation factor xiii a-subunit for inj 2500 unit	P	•			
VONVENDI- von willebrand factor (recombinant) for inj 650 unit, 1300 unit	P	•	•		
WILATE- antihemophilic factor/vwf (human) for inj 500-500 unit kit	NP	•	•		
WILATE- antihemophilic factor/vwf (human) for inj 1000-1000 unit kit	NP	•	•		
XYNTHA- antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 250 unit, 500 unit	NP	•	•		
XYNTHA- antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 1000 unit, 2000 unit	NP	•	•		
XYNTHA SOLOFUSE- antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 250 unit, 500 unit	NP	•	•		
XYNTHA SOLOFUSE- antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 1000 unit, 2000 unit, 3000 unit	NP	•	•		
YOSPRALA- aspirin-omeprazole tab delayed release 81-40 mg, 325-40 mg	NP		•		•
ZONTIVITY- vorapaxar sulfate tab 2.08 mg (base equivalent)	NP				
<b>TOPICAL PRODUCTS</b>					
<b>OPHTHALMIC AGENTS</b>					
ACULAR- ketorolac tromethamine ophth soln 0.5%	NP				
ACULAR LS- ketorolac tromethamine ophth soln 0.4%	NP				
ACUVAIL- ketorolac tromethamine (pf) ophth soln 0.45%	NP				
ALOCRIIL- nedocromil sodium ophth soln 2%	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ALOMIDE- lodoxamide tromethamine ophth soln 0.1%	NP				
ALPHAGAN P- brimonidine tartrate ophth soln 0.1%, 0.15%	NP				
ALREX- loteprednol etabonate ophth susp 0.2%	NP				
APRACLONIDINE- apraclonidine hcl ophth soln 0.5% (base equivalent)	NP				
ATROPINE SULFATE- atropine sulfate ophth soln 1%	NP				
<b>atropine sulfate ophth soln 1% (Atropine sulfate)</b>	p				
AZASITE- azithromycin ophth soln 1%	NP				
<b>azelastine hcl ophth soln 0.05%</b>	p				
AZOPT- brinzolamide ophth susp 1%	NP				
BACITRACIN- bacitracin ophth oint 500 unit/gm	P				
<b>bacitracin-polymyxin b ophth oint</b>	p				
<b>bacitracin-polymyxin-neomycin-hc ophth oint 1%</b>	p				
<b>bepotastine besilate ophth soln 1.5% (Bepreve)</b>	np				
BEPREVE- bepotastine besilate ophth soln 1.5%	NP				
BESIVANCE- besifloxacin hcl ophth susp 0.6% (base equiv)	NP				
BETAXOLOL HCL- betaxolol hcl ophth soln 0.5%	NP				
BETIMOL- timolol ophth soln 0.25%, 0.5%	NP				
BETOPTIC-S- betaxolol hcl ophth susp 0.25%	NP				
<b>bimatoprost ophth soln 0.03%</b>	np				•
<b>brimonidine tartrate ophth soln 0.1%, 0.15% (Alphagan p)</b>	p				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>brimonidine tartrate ophth soln 0.2%</b>	p					CYSTADROPS- cysteamine hcl ophth soln 0.37% (base equivalent)	NP	•			
<b>brimonidine tartrate-timolol maleate ophth soln 0.2-0.5% (Combigan)</b>	np					CYSTARAN- cysteamine hcl ophth soln 0.44% (base equivalent)	NP	•			
<b>brinzolamide ophth susp 1% (Azopt)</b>	np					DEXAMETHASONE SODIUM PHOS- dexamethasone sodium phosphate ophth soln 0.1%	P				
<b>bromfenac sodium ophth soln 0.07% (base equivalent) (Prolensa)</b>	np					<b>diclofenac sodium ophth soln 0.1%</b>	p				
<b>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</b>	np					<b>difluprednate ophth emulsion 0.05% (Durezol)</b>	np				
BROMSITE- bromfenac sodium ophth soln 0.075% (base equivalent)	NP					<b>dorzolamide hcl ophth soln 2% (Trusopt)</b>	p				
CARTEOLOL HCL- carteolol hcl ophth soln 1%	P					<b>dorzolamide hcl-timolol maleate ophth soln 2-0.5% (Cosopt)</b>	p				
CEQUA- cyclosporine (ophth) soln 0.09% (pf)	NP		•		•	<b>dorzolamide hcl-timolol maleate pf ophth soln 2-0.5% (Cosopt pf)</b>	np				
CILOXAN- ciprofloxacin hcl ophth oint 0.3%	P					DUREZOL- difluprednate ophth emulsion 0.05%	NP				
<b>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</b>	p					<b>epinastine hcl ophth soln 0.05%</b>	np				
COMBIGAN- brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%	NP					ERYTHROMYCIN- erythromycin ophth oint 5 mg/gm	NP				
COSOPT- dorzolamide hcl-timolol maleate ophth soln 2-0.5%	NP					<b>erythromycin ophth oint 5 mg/gm</b>	p				
COSOPT PF- dorzolamide hcl-timolol maleate pf ophth soln 2-0.5%	NP					EYSUVIS- loteprednol etabonate ophth susp 0.25%	NP		•		•
CROMOLYN SODIUM- cromolyn sodium ophth soln 4%	P					FLAREX- fluorometholone acetate ophth susp 0.1%	NP				
CYCLOGYL- cyclopentolate hcl ophth soln 0.5%, 1%, 2%	NP					<b>fluorometholone ophth susp 0.1% (Fml liquifilm)</b>	p				
CYCLOMYDRIL- cyclopentolate w/ phenylephrine ophth soln 0.2-1%	NP					FLURBIPROFEN SODIUM- flurbiprofen sodium ophth soln 0.03%	P				
<b>cyclopentolate hcl ophth soln 1% (Cyclogyl)</b>	p					FML FORTE- fluorometholone ophth susp 0.25%	NP				
						FML LIQUIFILM- fluorometholone ophth susp 0.1%	NP				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands



Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>gatifloxacin ophth soln 0.5% (Zymaxid)</b>	np				
<b>gentamicin sulfate ophth soln 0.3%</b>	p				
ILEVRO- nepafenac ophth susp 0.3%	NP				
INVELTYS- loteprednol etabonate ophth susp 1%	NP				
IOPIDINE- apraclonidine hcl ophth soln 1% (base equivalent)	NP				
ISTALOL- timolol maleate ophth soln 0.5% (once-daily)	NP				
IYUZEH- latanoprost (pf) ophth soln 0.005%	NP				•
<b>ketorolac tromethamine ophth soln 0.4% (Acular Is)</b>	p				
<b>ketorolac tromethamine ophth soln 0.5% (Acular)</b>	p				
LACRISERT- artificial tear ophth insert	NP				
<b>latanoprost ophth soln 0.005% (Xalatan)</b>	p				•
LEVOBUNOLOL HCL- levobunolol hcl ophth soln 0.5%	P				
LEVOFLOXACIN- levofloxacin ophth soln 1.5%	NP				
LOTEMAX- loteprednol etabonate ophth gel 0.5%	NP				
LOTEMAX- loteprednol etabonate ophth oint 0.5%	P				
LOTEMAX- loteprednol etabonate ophth susp 0.5%	NP				
LOTEMAX SM- loteprednol etabonate ophth gel 0.38%	P				
LOTEPREDNOL ETABONATE- loteprednol etabonate ophth gel 0.5%	P				
<b>loteprednol etabonate ophth susp 0.5% (Lotemax)</b>	p				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
LUMIGAN- bimatoprost ophth soln 0.01%	P				•
MAXIDEX- dexamethasone ophth susp 0.1%	NP				
MAXITROL- neomycin-polymyxin-dexamethasone ophth oint 0.1%	NP				
MAXITROL- neomycin-polymyxin-dexamethasone ophth susp 0.1%	NP				
MIEBO- perfluorohexyloctane ophth soln 1.338 gm/ml	NP		•		•
MITOSOL- mitomycin for ophth soln kit 0.2 mg	NP				
<b>moxifloxacin hcl ophth soln 0.5% (base equiv) (Vigamox)</b>	p				
MOXIFLOXACIN HYDROCHLORID- moxifloxacin hcl ophth soln 0.5% (base eq) (2 times daily)	NP				
NATACYN- natamycin ophth susp 5%	P				
<b>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</b>	p				
<b>neomycin-polymyxin-dexamethasone ophth oint 0.1% (Maxitrol)</b>	p				
<b>neomycin-polymyxin-dexamethasone ophth susp 0.1% (Maxitrol)</b>	p				
NEOMYCIN/POLYMYXIN/GRAMIC- neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml	P				
NEOMYCIN/POLYMYXIN/HYDROC- neomycin-polymyxin-hc ophth susp	NP				
NEVANAC- nepafenac ophth susp 0.1%	NP				
OCUFLOX- ofloxacin ophth soln 0.3%	NP				
<b>ofloxacin ophth soln 0.3% (Ocuflox)</b>	p				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>olopatadine hcl ophth soln 0.1% (base equivalent), 0.2% (base equivalent)</b>	np				
OXERVATE- cenegermin-bkbj ophth soln 0.002% (20 mcg/ml)	NP	•	•		•
<b>phenylephrine hcl ophth soln 2.5%, 10%</b>	np				
<b>pilocarpine hcl ophth soln 1%, 2%, 4%</b>	p				
<b>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1% (Polytrim)</b>	p				
PRED FORTE- prednisolone acetate ophth susp 1%	NP				
PRED MILD- prednisolone acetate ophth susp 0.12%	NP				
PREDNISOLONE ACETATE- prednisolone acetate ophth susp 1%	P				
PREDNISOLONE SODIUM PHOSP- prednisolone sodium phosphate ophth soln 1%	NP				
PROLENSA- bromfenac sodium ophth soln 0.07% (base equivalent)	NP				
RESTASIS- cyclosporine (ophth) emulsion 0.05%	p		•		•
RESTASIS MULTIDOSE- cyclosporine (ophth) emulsion 0.05%	NP		•		•
RHOPRESSA- netarsudil dimesylate ophth soln 0.02%	NP				•
ROCKLATAN- netarsudil dimesylate-latanoprost ophth soln 0.02-0.005%	NP				•
SIMBRINZA- brinzolamide-brimonidine tartrate ophth susp 1-0.2%	P				
SULFACETAMIDE SODIUM- sulfacetamide sodium ophth oint 10%	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>sulfacetamide sodium ophth soln 10%</b>	p				
SULFACETAMIDE SODIUM/PRED-sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%	P				
<b>tafluprost preservative free (pf) ophth soln 0.0015% (Zioptan)</b>	np				•
<b>tetracaine hcl ophth soln 0.5%</b>	np				
<b>timolol maleate ophth gel forming soln 0.25%, 0.5% (Timoptic-xe)</b>	np				
<b>timolol maleate ophth soln 0.25%, 0.5% (Timoptic)</b>	p				
<b>timolol maleate ophth soln 0.5% (once-daily) (Istalol)</b>	np				
<b>timolol maleate preservative free ophth soln 0.25%, 0.5% (Timoptic ocudose)</b>	np				
TIMOPTIC OCUDOSE- timolol maleate preservative free ophth soln 0.25%, 0.5%	NP				
TOBRADEX- tobramycin-dexamethasone ophth oint 0.3-0.1%	NP				
TOBRADEX ST- tobramycin-dexamethasone ophth susp 0.3-0.05%	NP				
<b>tobramycin ophth soln 0.3%</b>	p				
<b>tobramycin-dexamethasone ophth susp 0.3-0.1% (Tobradex)</b>	p				
TOBEX- tobramycin ophth oint 0.3%	NP				
TRAVATAN Z- travoprost ophth soln 0.004% (benzalkonium free) (bak free)	NP				•
<b>travoprost ophth soln 0.004% (benzalkonium free) (bak free) (Travatan z)</b>	np				•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
TRIFLURIDINE- trifluridine ophth soln 1%	P				
<b>tropicamide ophth soln 0.5%</b>	p				
<b>tropicamide ophth soln 1% (Mydracyl)</b>	p				
TYRVAYA- varenicline tartrate nasal soln 0.03 mg/act	NP		•		•
UPNEEQ- oxymetazoline hcl ophth soln 0.1%	NP				
VERKAZIA- cyclosporine (ophth) emulsion 0.1%	NP		•		•
VIGAMOX- moxifloxacin hcl ophth soln 0.5% (base equiv)	NP				
VUITY- pilocarpine hcl ophth soln 1.25%	NP				•
VYZULTA- latanoprostene bunod ophth soln 0.024%	NP				•
XALATAN- latanoprost ophth soln 0.005%	NP				•
XDEMVY- lotilaner ophth soln 0.25%	NP		•		•
XELPROS- latanoprost ophth emulsion 0.005%	NP				•
XIIDRA- lifitegrast ophth soln 5%	NP		•		•
ZERVIAE- cetirizine hcl ophth soln 0.24% (base equiv)	NP				
ZIOPTAN- tafluprost preservative free (pf) ophth soln 0.0015%	NP				•
ZIRGAN- ganciclovir ophth gel 0.15%	NP				
ZYLET- loteprednol etabonate-tobramycin ophth susp 0.5-0.3%	P				
ZYMAXID- gatifloxacin ophth soln 0.5%	NP				
<b>OTIC AGENTS</b>					
<b>acetic acid otic soln 2%</b>	p				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CETRAXAL- ciprofloxacin hcl otic soln 0.2% (base equivalent)	NP				
CIPRO HC- ciprofloxacin-hydrocortisone otic susp 0.2-1%	P				
CIPROFLOXACIN- ciprofloxacin hcl otic soln 0.2% (base equivalent)	NP				
<b>ciprofloxacin-dexamethasone otic susp 0.3-0.1% (Ciprodex)</b>	p				
CIPROFLOXACIN/FLUOCINOLON- ciprofloxacin-fluocinolone acetone (pf) otic soln 0.3-0.025%	NP				
CORTISPORIN-TC- neomycin-colistin-hc-thonzonium otic susp 3.3-3-10-0.5 mg/ml	NP				
DERMOTIC- fluocinolone acetonide (otic) oil 0.01%	NP				
<b>fluocinolone acetonide (otic) oil 0.01% (Dermotic)</b>	np				
HYDROCORTISONE/ACETIC ACI- hydrocortisone w/ acetic acid otic soln 1-2%	P				
<b>neomycin-polymyxin-hc otic soln 1%</b>	p				
<b>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</b>	p				
<b>ofloxacin otic soln 0.3%</b>	p				
OTOVEL- ciprofloxacin-fluocinolone acetone (pf) otic soln 0.3-0.025%	NP				
<b>MOUTH/THROAT/DENTAL AGENTS</b>					
<b>cevimeline hcl cap 30 mg (Evoxac)</b>	p				
<b>chlorhexidine gluconate soln 0.12% (Peridex)</b>	p				
<b>clotrimazole troche 10 mg</b>	p				
EVOXAC- cevimeline hcl cap 30 mg	NP				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
FLUORIDEX SENSITIVITY REL- sodium fluoride-potassium nitrate paste 1.1-5%	NP					<b>sodium fluoride gel 1.1% (0.5% f) (Prevident fluoride)</b>	p				
FLUORIMAX 5000 SENSITIVE- sodium fluoride-potassium nitrate paste 1.1-5%	NP					<b>sodium fluoride paste 1.1% (Prevident 5000 boost)</b>	np				
<b>lidocaine hcl viscous soln 2%</b>	p					<b>stannous fluoride conc 0.63%</b>	np				
<b>nystatin susp 100000 unit/ml</b>	p					<b>stannous fluoride gel 0.4%</b>	np				
ORAVIG- miconazole buccal tab 50 mg (mouth-throat)	NP					<b>triamcinolone acetonide dental paste 0.1%</b>	p				
PERIDEX- chlorhexidine gluconate soln 0.12%	NP					<b>ANORECTAL AGENTS</b>					
<b>pilocarpine hcl tab 5 mg, 7.5 mg (Salagen)</b>	p					ANALPRAM-HC- hydrocortisone acetate w/ pramoxine perianal cream 1-1%	NP				
PREVIDENT FLUORIDE- sodium fluoride gel 1.1% (0.5% f)	NP					ANALPRAM-HC- hydrocortisone acetate w/ pramoxine perianal lotn 2.5-1%	NP				
PREVIDENT RINSE- sodium fluoride rinse 0.2%	NP					ANUSOL-HC- hydrocortisone perianal cream 2.5%	NP				
PREVIDENT 5000 BOOSTER PL- sodium fluoride paste 1.1%	NP					<b>budesonide rectal foam 2 mg/act (Uceris)</b>	np				
PREVIDENT 5000 DRY MOUTH- sodium fluoride gel 1.1% (0.5% f)	NP					CORTENEMA- hydrocortisone enema 100 mg/60ml	NP				
PREVIDENT 5000 ENAMEL PRO- sodium fluoride-potassium nitrate gel 1.1-5%	NP					CORTIFOAM- hydrocortisone acetate perianal foam 10% (90 mg/dose)	P				
PREVIDENT 5000 ORTHO DEFE- sodium fluoride paste 1.1%	NP					<b>hydrocortisone acetate suppos 25 mg</b>	p				
PREVIDENT 5000 PLUS- sodium fluoride cream 1.1%	NP					HYDROCORTISONE ACETATE/ PR- hydrocortisone acetate w/ pramoxine perianal cream 1-1%	np				
PREVIDENT 5000 SENSITIVE- sodium fluoride-potassium nitrate gel 1.1-5%	NP					<b>hydrocortisone enema 100 mg/60ml (Cortenema)</b>	p				
SALAGEN- pilocarpine hcl tab 5 mg, 7.5 mg	NP					<b>hydrocortisone perianal cream 1% (Proctocort)</b>	np				
<b>sodium fluoride cream 1.1% (Prevident 5000 plus)</b>	p					<b>hydrocortisone perianal cream 2.5% (Anusol-hc)</b>	p				
						PROCTOCORT- hydrocortisone perianal cream 1%	NP				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
PROCTOFOAM HC- hydrocortisone acetate w/ pramoxine perianal foam 1-1%	NP				
RECTIV- nitroglycerin oint 0.4%	NP				
UCERIS- budesonide rectal foam 2 mg/act	NP				
<b>DERMATOLOGICALS</b>					
ABSORICA- isotretinoin cap 10 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg	NP				
ABSORICA LD- isotretinoin micronized cap 8 mg, 16 mg, 24 mg, 32 mg	NP				
ACANYA- clindamycin phosphate-benzoyl peroxide gel 1.2-2.5%	NP			•	
<b>acitretin cap 10 mg, 17.5 mg, 25 mg</b>	p				
<b>acyclovir cream 5% (Zovirax)</b>	np				
<b>acyclovir oint 5% (Zovirax)</b>	np				
ACZONE- dapsone gel 5%, 7.5%	NP			•	
ADAPALENE- adapalene pads 0.1%	NP			•	
ADAPALENE- adapalene soln 0.1%	NP			•	
<b>adapalene cream 0.1% (Differin)</b>	p				
<b>adapalene gel 0.1%</b>	p				
<b>adapalene gel 0.3% (Differin)</b>	p				
<b>adapalene-benzoyl peroxide gel 0.1-2.5% (Epiduo)</b>	p				
<b>adapalene-benzoyl peroxide gel 0.3-2.5% (Epiduo forte)</b>	np				
ADBRY- tralokinumab-ldrm subcutaneous soln prefilled syr 150 mg/ml	P	•	•		•
AKLIEF- trifarotene cream 0.005%	NP			•	
ALA-SCALP- hydrocortisone lotion 2%	NP				•
<b>alclometasone dipropionate cream 0.05%</b>	p				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>alclometasone dipropionate oint 0.05%</b>	p				
ALTABAX- retapamulin oint 1%	NP				
ALTRENO- tretinoin lotion 0.05%	NP			•	
AMCINONIDE- amcinonide oint 0.1%	NP				
AMZEEQ- minocycline hcl micronized foam 4%	NP			•	
APEXICON E- diflorasone diacetate emollient base cream 0.05%	NP				
ARAZLO- tazarotene (acne) lotion 0.045%	NP			•	
ATRALIN- tretinoin gel 0.05%	NP			•	
<b>azelaic acid gel 15% (Finacea)</b>	p				
AZELEX- azelaic acid cream 20%	NP			•	
BENZAMYCIN- benzoyl peroxide-erythromycin gel 5-3%	NP			•	
<b>benzoyl peroxide-erythromycin gel 5-3% (Benzamycin)</b>	np				
BETAMETHASONE DIPROPIONAT- betamethasone dipropionate augmented gel 0.05%	P				
<b>betamethasone dipropionate augmented cream 0.05%</b>	p				
<b>betamethasone dipropionate augmented lotion 0.05%</b>	p				
<b>betamethasone dipropionate augmented oint 0.05% (Diprolene)</b>	p				
<b>betamethasone dipropionate cream 0.05%</b>	p				
<b>betamethasone dipropionate lotion 0.05%</b>	p				
<b>betamethasone dipropionate oint 0.05%</b>	p				
<b>betamethasone valerate aerosol foam 0.12% (Luxiq)</b>	np				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>betamethasone valerate cream 0.1% (base equivalent)</b>	p				
<b>betamethasone valerate lotion 0.1% (base equivalent)</b>	p				
<b>betamethasone valerate oint 0.1% (base equivalent)</b>	p				
<b>bexarotene gel 1% (Targretin)</b>	np	•			
<b>brimonidine tartrate gel 0.33% (base equivalent) (Mirvaso)</b>	np				
BRYHALI- halobetasol propionate lotion 0.01%	NP				
<b>calcipotriene cream 0.005% (Dovonex)</b>	p				
<b>calcipotriene oint 0.005%</b>	np				
<b>calcipotriene soln 0.005% (50 mcg/ml)</b>	p				
<b>calcipotriene-betamethasone dipropionate oint 0.005-0.064% (Taclonex)</b>	np				
<b>calcipotriene-betamethasone dipropionate susp 0.005-0.064% (Taclonex)</b>	np				
CALCITRIOL- calcitriol oint 3 mcg/gm	NP				
CAPEX- fluocinolone acetonide shampoo 0.01%	NP				
CARAC- fluorouracil cream 0.5%	P		•		
CIBINQO- abrocitinib tab 50 mg, 100 mg, 200 mg	P	•	•		•
<b>ciclopirox gel 0.77%</b>	p				
<b>ciclopirox olamine cream 0.77% (base equiv) (Loprox)</b>	p				
<b>ciclopirox olamine susp 0.77% (base equiv) (Loprox)</b>	np				
<b>ciclopirox shampoo 1% (Loprox shampoo)</b>	p				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>ciclopirox solution 8% (Penlac Nail Lacquer)</b>	p				
CLEOCIN-T- clindamycin phosphate lotion 1%	NP			•	
CLINDAGEL- clindamycin phosphate gel 1%	NP			•	
<b>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</b>	p				
<b>clindamycin phosphate foam 1% (Evoclin)</b>	np				
<b>clindamycin phosphate gel 1% (Clindagel)</b>	p				
<b>clindamycin phosphate gel 1% (Clindagel)</b>	np				
<b>clindamycin phosphate lotion 1% (Cleocin-t)</b>	p				
<b>clindamycin phosphate soln 1%</b>	p				
<b>clindamycin phosphate swab 1%</b>	p				
<b>clindamycin phosphate-benzoyl peroxide gel 1-5%</b>	np				
<b>clindamycin phosphate-benzoyl peroxide gel 1.2-2.5% (Acanya)</b>	np				
<b>clindamycin phosphate-benzoyl peroxide gel 1.2-3.75% (Onexton)</b>	np				
<b>clindamycin phosphate-tretinoin gel 1.2-0.025% (Ziana)</b>	np				
<b>clobetasol propionate cream 0.05%</b>	p				
<b>clobetasol propionate emollient base cream 0.05%</b>	p				
<b>clobetasol propionate emulsion foam 0.05% (Olux-e)</b>	np				
<b>clobetasol propionate foam 0.05% (Olux)</b>	p				
<b>clobetasol propionate gel 0.05%</b>	p				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>clobetasol propionate lotion 0.05% (Clobex)</b>	np				
<b>clobetasol propionate oint 0.05%</b>	p				
<b>clobetasol propionate shampoo 0.05% (Clobex)</b>	np				
<b>clobetasol propionate soln 0.05%</b>	p				
<b>clobetasol propionate spray 0.05% (Clobex)</b>	np				
CLOBEX- clobetasol propionate lotion 0.05%	NP				
CLOBEX- clobetasol propionate shampoo 0.05%	NP				
CLOBEX- clobetasol propionate spray 0.05%	NP				
<b>clocortolone pivalate cream 0.1% (Cloderm)</b>	np				
CLODERM- clocortolone pivalate cream 0.1%	NP				
<b>clotrimazole cream 1%</b>	np				
<b>clotrimazole soln 1%</b>	np				
<b>clotrimazole w/ betamethasone cream 1-0.05%</b>	np				
<b>clotrimazole w/ betamethasone lotion 1-0.05%</b>	np				
CONDYLOX- podofilox gel 0.5%	NP				
CORDRAN- flurandrenolide cream 0.05%	NP				
CORDRAN- flurandrenolide lotion 0.05%	NP				
CORDRAN- flurandrenolide tape 4 mcg/sqcm	NP				
COSENTYX- secukinumab subcutaneous pref syr 150 mg/ml (300 mg dose)	P	•	•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
COSENTYX- secukinumab subcutaneous soln prefilled syringe 75 mg/0.5ml, 150 mg/ml	P	•	•		•
COSENTYX SENSOREADY PEN-secukinumab subcutaneous auto-inj 150 mg/ml (300 mg dose)	P	•	•		•
COSENTYX SENSOREADY PEN-secukinumab subcutaneous soln auto-injector 150 mg/ml	P	•	•		•
COSENTYX UNOREADY-secukinumab subcutaneous soln auto-injector 300 mg/2ml	P	•	•		•
CROTAN- crotamiton lotion 10%	NP				
<b>dapsone gel 5%, 7.5% (Aczone)</b>	np				
DENAVIR- penciclovir cream 1%	NP				
DERMA-SMOOTH/FS BODY-fluocinolone acetonide oil 0.01% (body oil)	NP				
DERMA-SMOOTH/FS SCALP-fluocinolone acetonide oil 0.01% (scalp oil)	NP				
<b>desonide cream 0.05% (Desowen)</b>	p				
<b>desonide gel 0.05%</b>	np				
<b>desonide lotion 0.05%</b>	np				
<b>desonide oint 0.05%</b>	p				
DESOWEN- desonide cream 0.05%	NP				
<b>desoximetasone cream 0.05% (Topicort)</b>	np				
<b>desoximetasone cream 0.25% (Topicort)</b>	p				
<b>desoximetasone gel 0.05% (Topicort)</b>	np				
<b>desoximetasone oint 0.05% (Topicort)</b>	np				
<b>desoximetasone oint 0.25% (Topicort)</b>	p				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>desoximetasone spray 0.25% (Topicort)</b>	np					ENSTILAR- calcipotriene- betamethasone dipropionate foam 0.005-0.064%	P				
DICLOFENAC EPOLAMINE- diclofenac epolamine patch 1.3%	NP					EPIDUO- adapalene-benzoyl peroxide gel 0.1-2.5%	NP			•	
<b>diclofenac sodium (actinic keratoses) gel 3%</b>	p		•			EPIDUO FORTE- adapalene-benzoyl peroxide gel 0.3-2.5%	NP			•	
<b>diclofenac sodium gel 1% (1.16% diethylamine equiv)</b>	np					EPSOLAY- benzoyl peroxide cream 5%	NP			•	
<b>diclofenac sodium soln 1.5%</b>	np					ERTACZO- sertaconazole nitrate cream 2%	NP				
<b>diclofenac sodium soln 2% (Pennsaid)</b>	np					ERY- erythromycin pads 2%	P			•	
DIFFERIN- adapalene cream 0.1%	NP			•		ERYGEL- erythromycin gel 2%	NP			•	
DIFFERIN- adapalene gel 0.3%	NP			•		<b>erythromycin gel 2% (Erygel)</b>	p				
DIFFERIN- adapalene lotion 0.1%	P			•		<b>erythromycin soln 2%</b>	p				
DIFLORASONE DIACETATE- diflorasone diacetate cream 0.05%	NP					EUCRISA- crisaborole oint 2%	NP			•	
<b>diflorasone diacetate oint 0.05%</b>	np					EXELDERM- sulconazole nitrate cream 1%	NP				
DIPROLENE- betamethasone dipropionate augmented oint 0.05%	NP					EXELDERM- sulconazole nitrate solution 1%	NP				
<b>doxepin hcl cream 5% (Prudoxin)</b>	np		•		•	FABIOR- tazarotene (acne) foam 0.1%	NP			•	
DOXYCYCLINE- doxycycline (rosacea) cap delayed release 40 mg	NP		•			FINACEA- azelaic acid foam 15%	NP			•	
DUOBRII- halobetasol propionate- tazarotene lotion 0.01-0.045%	NP					FLECTOR- diclofenac epolamine patch 1.3%	NP				
DUPIXENT- dupilumab subcutaneous soln pen-injector 200 mg/1.14ml, 300 mg/2ml	P	•	•		•	FLUOCINOLONE ACETONIDE- fluocinolone acetonide cream 0.01%	P				
DUPIXENT- dupilumab subcutaneous soln prefilled syringe 200 mg/1.14ml, 300 mg/2ml	P	•	•		•	<b>fluocinolone acetonide cream 0.025% (Synalar)</b>	p				
<b>econazole nitrate cream 1%</b>	p					<b>fluocinolone acetonide oil 0.01% (body oil) (Derma-smoothe/fs bod)</b>	p				•
ECOZA- econazole nitrate foam 1%	NP					<b>fluocinolone acetonide oil 0.01% (scalp oil) (Derma-smoothe/fs sca)</b>	p				•
EFUDEX- fluorouracil cream 5%	NP		•		•						
ELIDEL- pimecrolimus cream 1%	NP			•							

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands



Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>fluocinolone acetonide oint 0.025% (Synalar)</b>	p				
<b>fluocinolone acetonide soln 0.01% (Synalar)</b>	p				
<b>fluocinonide cream 0.05%</b>	p				
<b>fluocinonide cream 0.1% (Vanos)</b>	p				
<b>fluocinonide emulsified base cream 0.05%</b>	np				
<b>fluocinonide gel 0.05%</b>	p				
<b>fluocinonide oint 0.05%</b>	p				
<b>fluocinonide soln 0.05%</b>	p				
FLUOROURACIL- fluorouracil cream 0.5%	NP		•		
FLUOROURACIL- fluorouracil soln 2%, 5%	P				
<b>fluorouracil cream 5% (Efudex)</b>	p		•		•
<b>flurandrenolide cream 0.05% (Cordran)</b>	np				
<b>flurandrenolide lotion 0.05% (Cordran)</b>	np				
FLUTICASONE PROPIONATE- fluticasone propionate lotion 0.05%	np				
<b>fluticasone propionate cream 0.05%</b>	p				
<b>fluticasone propionate oint 0.005%</b>	p				
<b>gentamicin sulfate cream 0.1%</b>	p				
<b>gentamicin sulfate oint 0.1%</b>	p				
<b>halcinonide cream 0.1% (Halog)</b>	np				
<b>halobetasol propionate cream 0.05%</b>	p				
<b>halobetasol propionate foam 0.05% (Lexette)</b>	np				
<b>halobetasol propionate oint 0.05%</b>	np				
HALOG- halcinonide cream 0.1%	NP				
HALOG- halcinonide oint 0.1%	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
HALOG- halcinonide soln 0.1%	NP				
HYDROCORTISONE BUTYRATE- hydrocortisone butyrate cream 0.1%	NP				
HYDROCORTISONE BUTYRATE- hydrocortisone butyrate soln 0.1%	NP				
HYDROCORTISONE BUTYRATE (- hydrocortisone butyrate hydrophilic lipo base cream 0.1%	np				
<b>hydrocortisone butyrate lotion 0.1% (Locoid)</b>	np				
<b>hydrocortisone butyrate oint 0.1%</b>	np				
<b>hydrocortisone cream 1%</b>	np				
<b>hydrocortisone cream 2.5%</b>	p				
<b>hydrocortisone lotion 2.5%</b>	p				
<b>hydrocortisone oint 1%</b>	np				•
<b>hydrocortisone oint 2.5%</b>	p				
<b>hydrocortisone valerate cream 0.2%</b>	np				
<b>hydrocortisone valerate oint 0.2%</b>	np				
HYFTOR- sirolimus gel 0.2%	NP		•		•
<b>imiquimod cream 3.75% (Zyclara)</b>	np		•		
<b>imiquimod cream 5%</b>	p				•
IMPOYZ- clobetasol propionate cream 0.025%	NP				•
<b>isotretinoin cap 10 mg, 20 mg, 30 mg, 40 mg (Absorica)</b>	p				
<b>isotretinoin cap 10 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg (Absorica)</b>	np				
JUBLIA- efinaconazole soln 10%	NP				
KENALOG- triamcinolone acetonide aerosol soln 0.147 mg/gm	NP				
KERYDIN- tavaborole soln 5%	NP				
<b>ketoconazole cream 2%</b>	p				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>ketoconazole foam 2% (Extina)</b>	np					METROCREAM- metronidazole cream 0.75%	NP			•	
<b>ketoconazole shampoo 2%</b>	p					METROGEL- metronidazole gel 1%	NP			•	
KLARON- sulfacetamide sodium lotion 10% (acne)	NP			•		METROLOTION- metronidazole lotion 0.75%	NP			•	
KLISYRI- tirbanibulin ointment 1%	NP		•		•	<b>metronidazole cream 0.75% (Metrocream)</b>	p				
<b>lactic acid (ammonium lactate) cream 12%</b>	np					<b>metronidazole gel 0.75%</b>	p				
<b>lactic acid (ammonium lactate) lotion 12%</b>	np					<b>metronidazole gel 1% (Metrogel)</b>	p				
LEXETTE- halobetasol propionate foam 0.05%	NP					<b>metronidazole lotion 0.75% (Metro lotion)</b>	np				
LICART- diclofenac epolamine patch 24hr 1.3%	NP					MICONAZOLE NITRATE/ZINC O- miconazole-zinc oxide-white petrolatum oint 0.25-15-81.35%	NP				
<b>lidocaine hcl gel 2%</b>	p		•		•	MIRVASO- brimonidine tartrate gel 0.33% (base equivalent)	NP				
<b>lidocaine hcl soln 4%</b>	p		•		•	<b>mometasone furoate cream 0.1%</b>	p				
<b>lidocaine oint 5%</b>	p		•		•	<b>mometasone furoate oint 0.1%</b>	p				
<b>lidocaine patch 5% (Lidoderm)</b>	p		•		•	<b>mometasone furoate solution 0.1% (lotion)</b>	p				
<b>lidocaine-prilocaine cream 2.5-2.5%</b>	p				•	<b>mupirocin calcium cream 2%</b>	np				
LIDODERM- lidocaine patch 5%	NP		•		•	<b>mupirocin oint 2%</b>	p				
LITFULO- ritlecitinib tosylate cap 50 mg (base equiv)	NP	•	•		•	NAFTIFINE HCL- naftifine hcl cream 1%	NP				
LOCOID- hydrocortisone butyrate lotion 0.1%	NP					<b>naftifine hcl cream 2%</b>	np				
LOCOID LIPOCREAM- hydrocortisone butyrate hydrophilic lipo base cream 0.1%	NP					<b>naftifine hcl gel 2% (Naftin)</b>	np				
LULICONAZOLE- luliconazole cream 1%	NP					NAFTIN- naftifine hcl gel 1%, 2%	NP				
LUZU- luliconazole cream 1%	NP					NATROBA- spinosad susp 0.9%	NP				
<b>mafenide acetate packet for topical soln 5% (50 gm) (Sulfamylon)</b>	np					NEO-SYNALAR- neomycin sulfate-fluocinolone acetonide cream 0.5-0.025%	NP				
<b>malathion lotion 0.5% (Ovide)</b>	p					NORITATE- metronidazole cream 1%	NP			•	
METHOXSALEN- methoxsalen rapid cap 10 mg	NP					<b>nystatin cream 100000 unit/gm</b>	p				
						<b>nystatin oint 100000 unit/gm</b>	p				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>nystatin topical powder 100000 unit/gm</b>	p				
<b>nystatin-triamcinolone cream 100000-0.1 unit/gm-%</b>	p				
<b>nystatin-triamcinolone oint 100000-0.1 unit/gm-%</b>	p				
ONEXTON- clindamycin phosphate-benzoyl peroxide gel 1.2-3.75%	NP			•	
OPZELURA- ruxolitinib phosphate cream 1.5%	NP		•		•
ORACEA- doxycycline (rosacea) cap delayed release 40 mg	P		•		
OVIDE- malathion lotion 0.5%	NP				
<b>oxiconazole nitrate cream 1% (Oxistat)</b>	np				
OXISTAT- oxiconazole nitrate cream 1%	NP				
OXISTAT- oxiconazole nitrate lotion 1%	NP				
PANDEL- hydrocortisone probutate cream 0.1%	NP				
PANRETIN- alitretinoin gel 0.1%	NP				
<b>penciclovir cream 1% (Denavir)</b>	np				
PENNSAID- diclofenac sodium soln 2%	NP				
<b>permethrin cream 5%</b>	p				
<b>pimecrolimus cream 1% (Elidel)</b>	np			•	
PLIAGLIS- lidocaine-tetracaine cream 7-7%	NP		•		•
PODOFILOX- podofilox soln 0.5%	P				
<b>podofilox gel 0.5% (Condylox)</b>	np				
PRUDOXIN- doxepin hcl cream 5%	NP		•		•
QBREXZA- glycopyrronium tosylate pad 2.4% (base equivalent)	NP		•		•
REGGRANEX- becaplermin gel 0.01%	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
RETIN-A- tretinoin cream 0.025%, 0.05%, 0.1%	NP			•	
RETIN-A- tretinoin gel 0.01%, 0.025%	NP			•	
RETIN-A MICRO- tretinoin microsphere gel 0.04%, 0.06%, 0.1%	NP			•	
RETIN-A MICRO PUMP- tretinoin microsphere gel 0.04%, 0.08%, 0.1%	NP			•	
RHOFADE- oxymetazoline hcl cream 1%	NP				
SANTYL- collagenase oint 250 unit/gm	NP				
<b>selenium sulfide lotion 2.5%</b>	p				
SERNIVO- betamethasone dipropionate spray emulsion 0.05% (base equiv)	NP				
SILIQ- brodalumab subcutaneous soln prefilled syringe 210 mg/1.5ml	NP	•	•		•
SILVADENE- silver sulfadiazine cream 1%	NP				
<b>silver sulfadiazine cream 1% (Silvadene)</b>	p				
SKYRIZI- risankizumab-rzaa soln prefilled syringe 150 mg/ml	P	•	•		•
SKYRIZI PEN- risankizumab-rzaa soln auto-injector 150 mg/ml	P	•	•		•
SOOLANTRA- ivermectin cream 1%	p				
SORILUX- calcipotriene foam 0.005%	NP				
SOTYKTU- deucravacitinib tab 6 mg	NP	•	•		•
SPINOSAD- spinosad susp 0.9%	NP				
STELARA- ustekinumab inj 45 mg/0.5ml	P	•	•		•
STELARA- ustekinumab soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	P	•	•		•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
SULCONAZOLE NITRATE- sulconazole nitrate cream 1%	NP				
SULCONAZOLE NITRATE- sulconazole nitrate solution 1%	NP				
<b>sulfacetamide sodium lotion 10% (acne) (Klaron)</b>	p				
SULFAMYLON- mafenide acetate cream 85 mg/gm	NP				
SULFAMYLON- mafenide acetate packet for topical soln 5% (50 gm)	NP				
SYNALAR- fluocinolone acetonide cream 0.025%	NP				
SYNALAR- fluocinolone acetonide oint 0.025%	NP				
TACLONEX- calcipotriene- betamethasone dipropionate susp 0.005-0.064%	NP				
<b>tacrolimus oint 0.03%, 0.1% (Protopic)</b>	p			•	
TALTZ- ixekizumab subcutaneous soln auto-injector 80 mg/ml	NP	•	•		•
TALTZ- ixekizumab subcutaneous soln prefilled syringe 80 mg/ml	NP	•	•		•
TARGRETIN- bexarotene gel 1%	NP	•	•		
<b>tavorole soln 5% (Kerydin)</b>	np				
TAZAROTENE- tazarotene (acne) foam 0.1%	NP			•	
<b>tazarotene cream 0.1% (Tazorac)</b>	p				
<b>tazarotene gel 0.05%, 0.1% (Tazorac)</b>	p				
TAZORAC- tazarotene cream 0.05%	P				
TAZORAC- tazarotene cream 0.1%	NP			•	
TAZORAC- tazarotene gel 0.05%, 0.1%	NP			•	

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
TEXACORT- hydrocortisone soln 2.5%	NP				
TOLAK- fluorouracil cream 4%	NP		•		
TOPICORT- desoximetasone cream 0.05%, 0.25%	NP				
TOPICORT- desoximetasone gel 0.05%	NP				
TOPICORT- desoximetasone oint 0.05%, 0.25%	NP				
TOPICORT- desoximetasone spray 0.25%	NP				
TREMFYA- guselkumab soln pen- injector 100 mg/ml	P	•	•		•
TREMFYA- guselkumab soln prefilled syringe 100 mg/ml	P	•	•		•
<b>tretinoin cream 0.025%, 0.05%, 0.1% (Retin-a)</b>	p				
<b>tretinoin gel 0.01% (Retin-a)</b>	p				
<b>tretinoin gel 0.025% (Retin-a)</b>	np				
<b>tretinoin gel 0.05% (Atralin)</b>	np				
<b>tretinoin microsphere gel 0.04%, 0.1% (Retin-a micro)</b>	np				
<b>tretinoin microsphere gel 0.08% (Retin-a micro pump)</b>	np				
<b>triamcinolone acetonide aerosol soln 0.147 mg/gm (Kenalog)</b>	np				
<b>triamcinolone acetonide cream 0.025%, 0.1%, 0.5%</b>	p				
<b>triamcinolone acetonide lotion 0.025%, 0.1%</b>	p				
<b>triamcinolone acetonide oint 0.025%, 0.1%, 0.5%</b>	p				
<b>triamcinolone acetonide oint 0.05%</b>	np				
TWYNEO- tretinoin-benzoyl peroxide cream 0.1-3%	NP			•	

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ULTRAVATE- halobetasol propionate lotion 0.05%	NP				
VALCHLOR- mechlorethamine hcl gel 0.016% (base equivalent)	P	•			
VANOS- fluocinonide cream 0.1%	NP				
VECTICAL- calcitriol oint 3 mcg/gm	NP				
VELTIN- clindamycin phosphate-tretinoin gel 1.2-0.025%	NP			•	
VERDESO- desonide foam 0.05%	NP				
VEREGEN- sinecatechins oint 15%	NP				
VTAMA- tapinarof cream 1%	NP		•		
VUSION- miconazole-zinc oxide-white petrolatum oint 0.25-15-81.35%	NP				
WINLEVI- clascoterone cream 1%	NP				
WYNZORA- calcipotriene-betamethasone dipropionate cream 0.005-0.064%	NP				
XEPI- ozenoxacin cream 1%	NP				
XERESE- acyclovir-hydrocortisone cream 5-1%	NP				
ZIANA- clindamycin phosphate-tretinoin gel 1.2-0.025%	NP			•	
ZILXI- minocycline hcl micronized foam 1.5%	NP			•	
ZONALON- doxepin hcl cream 5%	NP		•		•
ZORYVE- roflumilast cream 0.3%	NP		•		
ZOVIRAX- acyclovir cream 5%	NP				
ZOVIRAX- acyclovir oint 5%	NP				
ZTLIDO- lidocaine patch 1.8% (36 mg)	NP		•		•
ZYCLARA- imiquimod cream 3.75%	NP		•		
ZYCLARA PUMP- imiquimod cream 2.5%, 3.75%	NP		•		
<b>MISCELLANEOUS PRODUCTS</b>					

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>ANTIDOTES</b>					
CHEMET- succimer cap 100 mg	P				
<b>deferasirox granules packet 90 mg, 180 mg, 360 mg (Jadenu sprinkle)</b>	np	•			
<b>deferasirox tab for oral susp 125 mg, 250 mg, 500 mg (Exjade)</b>	np	•			
<b>deferasirox tab 90 mg, 180 mg, 360 mg (Jadenu)</b>	np	•			
<b>deferiprone tab 500 mg, 1000 mg (Ferriprox)</b>	np	•			
EXJADE- deferasirox tab for oral susp 125 mg, 250 mg, 500 mg	NP	•			
FERRIPROX- deferiprone oral soln 100 mg/ml	NP	•			
FERRIPROX- deferiprone tab 500 mg, 1000 mg	NP	•			
FERRIPROX TWICE-A-DAY- deferiprone (twice daily) tab 1000 mg	NP	•			
JADENU- deferasirox tab 90 mg, 180 mg, 360 mg	NP	•			
JADENU SPRINKLE- deferasirox granules packet 90 mg, 180 mg, 360 mg	NP	•			
KLOXXADO- naloxone hcl nasal spray 8 mg/0.1ml	P				
<b>naloxone hcl inj 0.4 mg/ml, 4 mg/10ml</b>	p				
<b>naloxone hcl nasal spray 4 mg/0.1ml (Narcan)</b>	p				
<b>naloxone hcl soln prefilled syringe 2 mg/2ml</b>	np				
NALOXONE HYDROCHLORIDE- naloxone hcl soln cartridge 0.4 mg/ml	P				
<b>naltrexone hcl tab 50 mg</b>	p				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
NARCAN- naloxone hcl nasal spray 4 mg/0.1ml	NP					AGAMATRIX JAZZ TEST STRIP- glucose blood test strip	NP			•	•
OPVEE- nalmefene hcl nasal spray 2.7 mg/0.1ml (base equiv)	P					AGAMATRIX KEYNOTE TEST ST- glucose blood test strip	NP			•	•
VISTOGARD- uridine triacetate oral granules packet 10 gm	NP	•				AGAMATRIX PRESTO TEST STR- glucose blood test strip	NP			•	•
ZIMHI- naloxone hcl soln prefilled syringe 5 mg/0.5ml	NP					ASSURE II- glucose blood test strip	NP			•	•
<b>DIAGNOSTIC PRODUCTS</b>						ASSURE II CHECK STRIP- glucose blood test strip	NP			•	•
ACCU-CHEK AVIVA PLUS- glucose blood test strip	NP			•	•	ASSURE II TEST STRIPS- glucose blood test strip	NP			•	•
ACCU-CHEK COMPACT STRIPS- glucose blood test strip	NP			•	•	ASSURE PLATINUM TEST STRI- glucose blood test strip	NP			•	•
ACCU-CHEK COMPACT TEST DR- glucose blood test strip	NP			•	•	ASSURE PRISM MULTI TEST S- glucose blood test strip	NP			•	•
ACCU-CHEK GUIDE- glucose blood test strip	NP			•	•	ASSURE PRO TEST STRIPS- glucose blood test strip	NP			•	•
ACCU-CHEK GUIDE TEST STRI- glucose blood test strip	NP			•	•	ASSURE 3 TEST STRIPS- glucose blood test strip	NP			•	•
ACCU-CHEK SMARTVIEW STRIP- glucose blood test strip	NP			•	•	ASSURE 4 TEST STRIPS- glucose blood test strip	NP			•	•
ACCUTREND GLUCOSE- glucose blood test strip	NP			•	•	AT LAST TEST STRIPS- glucose blood test strip	NP			•	•
ADVANCE INTUITION TEST ST- glucose blood test strip	NP			•	•	BINAXNOW COVID-19 AG CARD- covid-19 at home antigen test kit	NP				
ADVANCE MICRO-DRAW TEST S- glucose blood test strip	NP			•	•	BIOTEL CARE BLOOD GLUCOSE- glucose blood test strip	NP			•	•
ADVOCATE REDI-CODE- glucose blood test strip	NP			•	•	BLOOD GLUCOSE TEST STRIPS- glucose blood test strip	NP			•	•
ADVOCATE REDI-CODE+ TEST- glucose blood test strip	NP			•	•	BLULINK GLUCOSE TEST STRI- glucose blood test strip	NP			•	•
ADVOCATE TEST STRIPS- glucose blood test strip	NP			•	•	CAREONE BLOOD GLUCOSE TES- glucose blood test strip	NP			•	•
AGAMATRIX AMP NO CODE TES- glucose blood test strip	NP			•	•	CARESENS N BLOOD GLUCOSE- glucose blood test strip	NP			•	•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CARESTART COVID-19 ANTIGE-covid-19 at home antigen test kit	NP				
CARETOUCH BLOOD GLUCOSE T- glucose blood test strip	NP			•	•
CELLTRION DIATRUST COVID-- covid-19 at home antigen test kit	NP				
CLEARDETECT COVID-19 ANTI-covid-19 at home antigen test kit	NP				
CLEVER CHEK AUTO-CODE TES- glucose blood test strip	NP			•	•
CLEVER CHEK AUTO-CODE VOI- glucose blood test strip	NP			•	•
CLEVER CHEK TEST STRIPS- glucose blood test strip	NP			•	•
CLEVER CHOICE AUTO-CODE P- glucose blood test strip	NP			•	•
CLEVER CHOICE MICRO TEST- glucose blood test strip	NP			•	•
CLEVER CHOICE NO CODING T- glucose blood test strip	NP			•	•
CLEVER CHOICE TALK NO COD- glucose blood test strip	NP			•	•
CLINITEST RAPID COVID-19-covid-19 at home antigen test kit	NP				
CONTOUR BLOOD GLUCOSE TES- glucose blood test strip	P				•
CONTOUR NEXT BLOOD GLUCOS- glucose blood test strip	P				•
COOL BLOOD GLUCOSE TEST S- glucose blood test strip	NP			•	•
COVID-19 AG TEST- covid-19 at home antigen test kit	NP				
COVID-19 AT-HOME TEST KIT- covid-19 at home antigen test kit	NP				
COVID-19 OTC ANTIGEN TEST- covid-19 at home antigen test kit	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CVS ADVANCED GLUCOSE METE- glucose blood test strip	NP			•	•
CVS COVID-19 AT HOME TEST-covid-19 at home antigen test kit	NP				
CVS GLUCOSE METER TEST ST- glucose blood test strip	NP			•	•
DIASTIX- glucose urine test-(glucose oxidase) strip	P				
DIATHRIVE BLOOD GLUCOSE T- glucose blood test strip	NP			•	•
DIATHRIVE+ BLOOD GLUCOSE- glucose blood test strip	NP			•	•
DIATRUE PLUS BLOOD GLUCOS- glucose blood test strip	NP			•	•
DUO-CARE TEST STRIPS- glucose blood test strip	NP			•	•
EASY PLUS II BLOOD GLUCOS- glucose blood test strip	NP			•	•
EASY STEP TEST STRIPS- glucose blood test strip	NP			•	•
EASY TALK BLOOD GLUCOSE T- glucose blood test strip	NP			•	•
EASY TALK PLUS II BLOOD G- glucose blood test strip	NP			•	•
EASY TOUCH GLUCOSE TEST S- glucose blood test strip	NP			•	•
EASY TOUCH HEALTHPRO GLUC- glucose blood test strip	NP			•	•
EASY TRAK BLOOD GLUCOSE T- glucose blood test strip	NP			•	•
EASY TRAK II BLOOD GLUCOS- glucose blood test strip	NP			•	•
EASYGLUCO- glucose blood test strip	NP			•	•
EASYMAX TEST STRIPS- glucose blood test strip	NP			•	•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
EASYMAX 15 TEST STRIPS- glucose blood test strip	NP			•	•	FORA D15G BLOOD GLUCOSE T- glucose blood test strip	NP			•	•
EASYPRO BLOOD GLUCOSE TES- glucose blood test strip	NP			•	•	FORA D20 BLOOD GLUCOSE TE- glucose blood test strip	NP			•	•
EASYPRO PLUS- glucose blood test strip	NP			•	•	FORA D40/G31 BLOOD GLUCOS- glucose blood test strip	NP			•	•
ELEMENT COMPACT TEST STRI- glucose blood test strip	NP			•	•	FORA GD20 TEST STRIPS- glucose blood test strip	NP			•	•
ELEMENT TEST STRIPS- glucose blood test strip	NP			•	•	FORA GD50 BLOOD GLUCOSE T- glucose blood test strip	NP			•	•
ELLUME COVID-19 HOME TEST- covid-19 at home antigen test kit	NP					FORA GTEL BLOOD GLUCOSE T- glucose blood test strip	NP			•	•
EMBRACE BLOOD GLUCOSE TES- glucose blood test strip	NP			•	•	FORA G20 BLOOD GLUCOSE TE- glucose blood test strip	NP			•	•
EMBRACE EVO BLOOD GLUCOSE- glucose blood test strip	NP			•	•	FORA G30/PREMIUM V10 BLOO- glucose blood test strip	NP			•	•
EMBRACE PRO BLOOD GLUCOSE- glucose blood test strip	NP			•	•	FORA TN'G ADVANCE PRO BLO- glucose blood test strip	NP			•	•
EMBRACE TALK BLOOD GLUCOS- glucose blood test strip	NP			•	•	FORA TN'G/TN'G VOICE BLOO- glucose blood test strip	NP			•	•
EMBRACE WAVE BLOOD GLUCOS- glucose blood test strip	NP			•	•	FORA V10 BLOOD GLUCOSE TE- glucose blood test strip	NP			•	•
EQ BLOOD GLUCOSE TEST STR- glucose blood test strip	NP			•	•	FORA V12 BLOOD GLUCOSE TE- glucose blood test strip	NP			•	•
EVENCARE BLOOD GLUCOSE TE- glucose blood test strip	NP			•	•	FORA V20 BLOOD GLUCOSE TE- glucose blood test strip	NP			•	•
EVOLUTION AUTOCODE- glucose blood test strip	NP			•	•	FORA V30A BLOOD GLUCOSE T- glucose blood test strip	NP			•	•
FASTEP COVID-19 ANTIGEN H- covid-19 at home antigen test kit	NP					FORA 6 CONNECT- glucose blood test strip	NP			•	•
FIFTY50 GLUCOSE TEST STRI- glucose blood test strip	NP			•	•	FORA 6 CONNECT/GTEL BLOOD- glucose blood test strip	NP			•	•
FLOWFLEX COVID-19 ANTIGEN- covid-19 at home antigen test kit	NP					FORACARE GD40- glucose blood test strip	NP			•	•
FORA BLOOD GLUCOSE TEST S- glucose blood test strip	NP			•	•	FORACARE PREMIUM V10 TEST- glucose blood test strip	NP			•	•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands



Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
FORACARE TEST N GO TEST S- glucose blood test strip	NP			•	•	GLUCONAVII BLOOD GLUCOSE- glucose blood test strip	NP			•	•
FORTISCARE BLOOD GLUCOSE- glucose blood test strip	NP			•	•	GLUCOSE METER TEST STRIPS- glucose blood test strip	NP			•	•
FORTISCARE G1 BLOOD GLUCO- glucose blood test strip	NP			•	•	GNP EASY TOUCH GLUCOSE TE- glucose blood test strip	NP			•	•
FREESTYLE INSULINX BLOOD- glucose blood test strip	NP			•	•	GNP TRUE METRIX SELF MONI- glucose blood test strip	NP			•	•
FREESTYLE LITE TEST STRIP- glucose blood test strip	NP			•	•	GNP TRUETRACK BLOOD GLUCO- glucose blood test strip	NP			•	•
FREESTYLE PRECISION NEO B- glucose blood test strip	NP			•	•	GNP TRUETRACK SMART SYSTE- glucose blood test strip	NP			•	•
FREESTYLE TEST STRIPS- glucose blood test strip	NP			•	•	GOJJI BLOOD GLUCOSE TEST- glucose blood test strip	NP			•	•
GENABIO COVID-19 RAPID SE- covid-19 at home antigen test kit	NP					GOODSENSE PREMIUM BLOOD G- glucose blood test strip	NP			•	•
GENULTIMATE TEST STRIPS- glucose blood test strip	NP			•	•	GOTOKNOW COVID-19 ANTIGEN- covid-19 at home antigen test kit	NP				
GE100 BLOOD GLUCOSE TEST- glucose blood test strip	NP			•	•	HW EMBRACE PRO BLOOD GLUC- glucose blood test strip	NP			•	•
GHT TEST STRIPS- glucose blood test strip	NP			•	•	HW EMBRACE TALK BLOOD GLU- glucose blood test strip	NP			•	•
GLUCO PERFECT 3 TEST STRI- glucose blood test strip	NP			•	•	IGLUCOSE BLOOD GLUCOSE TE- glucose blood test strip	NP			•	•
GLUCOCARD EXPRESSION BLOO- glucose blood test strip	NP			•	•	IHEALTH COVID-19 ANTIGEN- covid-19 at home antigen test kit	NP				
GLUCOCARD SHINE TEST STRI- glucose blood test strip	NP			•	•	IN TOUCH BLOOD GLUCOSE TE- glucose blood test strip	NP			•	•
GLUCOCARD VITAL TEST STRI- glucose blood test strip	NP			•	•	INDICAID COVID-19 RAPID A- covid-19 at home antigen test kit	NP				
GLUCOCARD X-SENSOR- glucose blood test strip	NP			•	•	INFINITY BLOOD GLUCOSE TE- glucose blood test strip	NP			•	•
GLUCOCARD 01 SENSOR PLUS- glucose blood test strip	NP			•	•	INFINITY VOICE- glucose blood test strip	NP			•	•
GLUCOCOM TEST STRIPS- glucose blood test strip	NP			•	•	INTELISWAB COVID-19 RAPID- covid-19 at home antigen test kit	NP				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
KETO-DIASTIX- urine glucose- ketones test strips	P					ON/GO COVID-19 ANTIGEN SE- covid-19 at home antigen test kit	NP				
KETOSTIX- acetone (urine) test strip	P					ON/GO ONE COVID-19 ANTIGE- covid-19 at home antigen test kit	NP				
KROGER BLOOD GLUCOSE TEST- glucose blood test strip	NP			•	•	ONE DROP BLOOD GLUCOSE TE- glucose blood test strip	NP			•	•
KROGER HEALTHPRO GLUCOSE- glucose blood test strip	NP			•	•	ONETOUCH ULTRA- glucose blood test strip	P			•	•
KROGER PREMIUM BLOOD GLUC- glucose blood test strip	NP			•	•	ONETOUCH VERIO TEST STRIP- glucose blood test strip	P			•	•
LIBERTY NEXT GENERATION B- glucose blood test strip	NP			•	•	OPTIUMEZ TEST STRIPS- glucose blood test strip	NP			•	•
LIBERTY TEST STRIPS- glucose blood test strip	NP			•	•	PHARMACIST CHOICE AUTOCOD- glucose blood test strip	NP			•	•
MEIJER BLOOD GLUCOSE TEST- glucose blood test strip	NP			•	•	PHARMACIST CHOICE NO CODI- glucose blood test strip	NP			•	•
MEIJER ESSENTIAL BLOOD GL- glucose blood test strip	NP			•	•	PILOT COVID-19 AT-HOME TE- covid-19 at home antigen test kit	NP				
MEIJER TRUETEST BLOOD GLU- glucose blood test strip	NP			•	•	PIP BLOOD GLUCOSE TEST ST- glucose blood test strip	NP			•	•
MEIJER TRUETRACK BLOOD GL- glucose blood test strip	NP			•	•	POCKETCHEM EZ BLOOD GLUCO- glucose blood test strip	NP			•	•
MICRODOT TEST STRIPS- glucose blood test strip	NP			•	•	POGO AUTOMATIC TEST CARTR- glucose blood test automatic cartridge	NP			•	•
MICRODOT XTRA TEST STRIPS- glucose blood test strip	NP			•	•	PRECISION SOF-TACT TEST S- glucose blood test strip	NP			•	•
MM EASY TOUCH GLUCOSE TES- glucose blood test strip	NP			•	•	PRECISION XTRA BLOOD GLUC- glucose blood test strip	NP			•	•
MYGLUCOHEALTH BLOOD GLUCO- glucose blood test strip	NP			•	•	PREMIUM BLOOD GLUCOSE TES- glucose blood test strip	NP			•	•
NEUTEK 2TEK TEST STRIPS- glucose blood test strip	NP			•	•	PRO VOICE V8/V9 BLOOD GLU- glucose blood test strip	NP			•	•
NOVA MAX GLUCOSE TEST STR- glucose blood test strip	NP			•	•	PRODIGY NO CODING BLOOD G- glucose blood test strip	NP			•	•
ON CALL EXPRESS BLOOD GLU- glucose blood test strip	NP			•	•						

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
PTS PANELS EGLU- glucose blood test strip	NP			•	•
QUICKTEK TEST STRIPS- glucose blood test strip	NP			•	•
QUICKVUE AT-HOME COVID-19- covid-19 at home antigen test kit	NP				
QUINTET AC BLOOD GLUCOSE- glucose blood test strip	NP			•	•
QUINTET BLOOD GLUCOSE TES- glucose blood test strip	NP			•	•
RAPID SARS-COV-2 ANTIGEN- covid-19 at home antigen test kit	NP				
REFUAH PLUS BLOOD GLUCOSE- glucose blood test strip	NP			•	•
RELION CONFIRM/MICRO TEST- glucose blood test strip	NP			•	•
RELION PREMIER BLOOD GLUC- glucose blood test strip	NP			•	•
RELION PRIME BLOOD GLUCOS- glucose blood test strip	NP			•	•
RELION TRUE METRIX BLOOD- glucose blood test strip	NP			•	•
RELION ULTIMA BLOOD GLUCO- glucose blood test strip	NP			•	•
REXALL BLOOD GLUCOSE TEST- glucose blood test strip	NP			•	•
RIGHTEST GS100 BLOOD GLUC- glucose blood test strip	NP			•	•
RIGHTEST GS300 BLOOD GLUC- glucose blood test strip	NP			•	•
RIGHTEST GS333 BLOOD GLUC- glucose blood test strip	NP			•	•
RIGHTEST GS550 BLOOD GLUC- glucose blood test strip	NP			•	•
RIGHTEST GT333 BLOOD GLUC- glucose blood test strip	NP			•	•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
SMART SENSE PREMIUM BLOOD- glucose blood test strip	NP			•	•
SMART SENSE VALUE BLOOD G- glucose blood test strip	NP			•	•
SMARTEST BLOOD GLUCOSE TE- glucose blood test strip	NP			•	•
SOLUS V2 AUDIBLE TEST- glucose blood test strip	NP			•	•
SPEEDY SWAB RAPID COVID-1- covid-19 at home antigen test kit	NP				
SUPREME TEST STRIPS- glucose blood test strip	NP			•	•
TGT BLOOD GLUCOSE TEST ST- glucose blood test strip	NP			•	•
TRUE FOCUS SELF MONITORIN- glucose blood test strip	NP			•	•
TRUE METRIX BLOOD GLUCOSE- glucose blood test strip	NP			•	•
TRUE METRIX SELF MONITORI- glucose blood test strip	NP			•	•
TRUETEST STRIPS- glucose blood test strip	NP			•	•
TRUETRACK BLOOD GLUCOSE T- glucose blood test strip	NP			•	•
TRUETRACK TEST- glucose blood test strip	NP			•	•
UNISTRIP1 GENERIC- glucose blood test strip	NP			•	•
VERASENS BLOOD GLUCOSE TE- glucose blood test strip	NP			•	•
VIVAGUARD INO BLOOD GLUCO- glucose blood test strip	NP			•	•
<b>MEDICAL DEVICES</b>					
ACE AEROSOL CLOUD ENHANCE- respiratory therapy supplies - misc	P				

p = Preferred Generics  
 np = Non-preferred Generics

P = Preferred Brands  
 NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
AEROCHAMBER HOLDING CHAMBER-spacer/aerosol-holding chambers - device	P				
AEROCHAMBER MINI AEROSOL-spacer/aerosol-holding chambers - device	P				
AEROCHAMBER MV- spacer/aerosol-holding chambers - device	P				
AEROCHAMBER PLUS FLOW VU-spacer/aerosol-holding chambers - device	P				
AEROCHAMBER PLUS FLOW-VU-spacer/aerosol-holding chambers - device	P				
AEROCHAMBER Z-STAT PLUS V-spacer/aerosol-holding chambers - device	P				
AEROCHAMBER Z-STAT PLUS/F-spacer/aerosol-holding chambers - device	P				
AEROCHAMBER Z-STAT PLUS/L-spacer/aerosol-holding chambers - device	P				
AEROCHAMBER Z-STAT PLUS/M-spacer/aerosol-holding chambers - device	P				
AEROCHAMBER Z-STAT PLUS/S-spacer/aerosol-holding chambers - device	P				
AEROCHAMBER/FLOWSIGNAL-spacer/aerosol-holding chambers - device	P				
AEROVENT PLUS HOLDING CHAMBER-spacer/aerosol-holding chambers - device	NP				
BREATHE COMFORT ANTI-STAT-spacer/aerosol-holding chambers - device	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
BREATHE EASE/LARGE MASK-spacer/aerosol-holding chambers - device	NP				
BREATHE EASE/MEDIUM MASK-spacer/aerosol-holding chambers - device	NP				
BREATHE EASE/SMALL MASK-spacer/aerosol-holding chambers - device	NP				
BREATHERITE VALVED MDI CH-spacer/aerosol-holding chambers - device	P				
CAYA- diaphragm arc-spring	NP				
CLEVER CHOICE ANTI-STATIC-spacer/aerosol-holding chambers - device	NP				
COMPACT SPACE CHAMBER/ANT-spacer/aerosol-holding chambers - device	NP				
CONDOMS- condoms - male	NP				
CONTOUR BLOOD GLUCOSE MON- blood glucose monitoring devices	P				
CONTOUR HIGH CONTROL- blood glucose calibration - liquid - high	P				
CONTOUR LOW CONTROL- blood glucose calibration - liquid - low	P				
CONTOUR NEXT BLOOD GLUCOS- blood glucose monitoring kit w/ device	P				
CONTOUR NEXT CONTROL LEVE- blood glucose calibration - liquid - normal, - low	P				
CONTOUR NEXT EZ BLOOD GLU- blood glucose monitoring kit w/ device	P				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CONTOUR NEXT GEN BLOOD GL- blood glucose monitoring devices	P				
CONTOUR NEXT GEN BLOOD GL- blood glucose monitoring kit w/ device	P				
CONTOUR NEXT LINK BLOOD G- blood glucose monitoring kit w/ device	P				
CONTOUR NEXT LINK WIRELES- blood glucose monitoring kit w/ device	P				
CONTOUR NEXT ONE BLOOD GL- blood glucose monitoring devices	P				
CONTOUR NEXT ONE BLOOD GL- blood glucose monitoring kit	P				
CONTOUR NORMAL CONTROL- blood glucose calibration - liquid - normal	P				
DEXCOM G6 RECEIVER- continuous blood glucose system receiver	P			•	•
DEXCOM G6 SENSOR- continuous blood glucose system sensor	P			•	•
DEXCOM G6 TRANSMITTER- continuous blood glucose system transmitter	P			•	•
DEXCOM G7 RECEIVER- continuous blood glucose system receiver	P			•	•
DEXCOM G7 SENSOR- continuous blood glucose system sensor	P			•	•
EASIVENT- spacer/aerosol-holding chambers - device	P				
EASIVENT/MASK-LARGE- spacer/ aerosol-holding chambers - device	P				
EASIVENT/MASK-MEDIUM- spacer/ aerosol-holding chambers - device	P				
EASIVENT/MASK-SMALL- spacer/ aerosol-holding chambers - device	P				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
EQ SPACE CHAMBER ANTI-STA- spacer/aerosol-holding chambers - device	NP				
FC2 FEMALE CONDOM- condoms - female	NP				
FEMCAP- cervical cap 22 mm, 26 mm, 30 mm	NP				
FLEXICHAMBER- spacer/aerosol- holding chambers - device	NP				
FLEXICHAMBER ADULT MASK/S- spacer/aerosol-holding chamber supplies - masks	NP				
FLEXICHAMBER CHILD MASK/L- spacer/aerosol-holding chamber supplies - masks	NP				
FLEXICHAMBER CHILD MASK/S- spacer/aerosol-holding chamber supplies - masks	NP				
FREESTYLE LIBRE 14 DAY/RE- continuous blood glucose system receiver	P			•	•
FREESTYLE LIBRE 14 DAY/SE- continuous blood glucose system sensor	P			•	•
FREESTYLE LIBRE 2/READER/- continuous blood glucose system receiver	P			•	•
FREESTYLE LIBRE 2/SENSOR/- continuous blood glucose system sensor	P			•	•
FREESTYLE LIBRE 3/READER/- continuous blood glucose system receiver	P			•	•
FREESTYLE LIBRE 3/SENSOR/- continuous blood glucose system sensor	P			•	•

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
FREESTYLE LIBRE/READER/FL-continuous blood glucose system receiver	P			•	•
INSPIREASE DRUG DELIVERY-spacer/aerosol-holding chambers - device	P				
INSPIREASE RESERVOIR BAGS-spacer/aerosol-holding chamber supplies - bags	P				
INSULIN PEN NEEDLES – VARIOUS	P				
INSULIN PEN NEEDLES – VARIOUS	NP				
INSULIN SYRINGES – VARIOUS	P				
INSULIN SYRINGES – VARIOUS	NP				
LANCETS – VARIOUS	P				
LANCETS – VARIOUS	NP				
MASK VORTEX/CHILD/FROG-spacer/aerosol-holding chamber supplies - masks	NP				
MASK VORTEX/TODDLER/LADY-spacer/aerosol-holding chamber supplies - masks	NP				
MICROCHAMBER- spacer/aerosol-holding chambers - device	P				
MICROSPACER- spacer/aerosol-holding chambers - device	P				
MISC NEEDLES AND SYRINGES – VARIOUS	NP				
OMNIFLEX DIAPHRAGM-diaphragms	NP				
OMNIPOD DASH INTRO KIT (G-insulin infusion disposable pump kit	NP		•		•
OMNIPOD DASH PODS (GEN 4)-insulin infusion disposable pump reservoir	NP		•		•
OMNIPOD 5 G6 INTRO KIT (G-insulin infusion disposable pump kit	NP		•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
OMNIPOD 5 G6 PODS (GEN 5)-insulin infusion disposable pump reservoir	NP		•		•
ONETOUCH ULTRA CONTROL-blood glucose calibration - liquid	P				
ONETOUCH ULTRA CONTROL SO-blood glucose calibration - liquid	P				
ONETOUCH ULTRA 2- blood glucose monitoring kit w/ device	P				
ONETOUCH VERIO FLEX BLOOD-blood glucose monitoring kit w/ device	P				
ONETOUCH VERIO LEVEL 3 CO-blood glucose calibration - liquid	P				
ONETOUCH VERIO LEVEL 4 CO-blood glucose calibration - liquid - high	P				
ONETOUCH VERIO REFLECT-blood glucose monitoring kit w/ device	P				
OPTICHAMBER- spacer/aerosol-holding chambers - device	P				
OPTICHAMBER- spacer/aerosol-holding chambers - device	NP				
OPTICHAMBER DIAMOND- spacer/aerosol-holding chambers - device	P				
OPTICHAMBER DIAMOND/LARGE-spacer/aerosol-holding chambers - device	P				
OPTICHAMBER DIAMOND/MEDIU-spacer/aerosol-holding chambers - device	P				
OPTICHAMBER DIAMOND/SMALL-spacer/aerosol-holding chambers - device	P				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
PANDA MASK LARGE- spacer/aerosol-holding chamber supplies - masks	NP					VORTEX VALVED HOLDING CHA-spacer/aerosol-holding chambers - device	P				
PANDA MASK MEDIUM- spacer/aerosol-holding chamber supplies - masks	NP					WIDE-SEAL SILICONE DIAPHR-diaphragm wide seal 60 mm, 65 mm, 70 mm, 75 mm, 80 mm, 85 mm, 90 mm, 95 mm	NP				
PANDA MASK SMALL- spacer/aerosol-holding chamber supplies - masks	NP					<b>ASSORTED CLASSES</b>					
PEDIATRIC PANDA MASK- spacer/aerosol-holding chamber supplies - masks	NP					ASTAGRAF XL- tacrolimus cap er 24hr 0.5 mg, 1 mg, 5 mg	NP				
POCKET CHAMBER- spacer/aerosol-holding chambers - device	P					<b>azathioprine tab 50 mg (Imuran)</b>	p				
POCKET SPACER- spacer/aerosol-holding chambers - device	P					<b>azathioprine tab 75 mg, 100 mg</b>	np				
PRO COMFORT INHALER SPACE-spacer/aerosol-holding chambers - device	NP					BENLYSTA- belimumab subcutaneous solution auto-injector 200 mg/ml	NP	•	•		•
PROCARE SPACER CHAMBER W/-spacer/aerosol-holding chambers - device	NP					BENLYSTA- belimumab subcutaneous solution prefilled syringe 200 mg/ml	NP	•	•		•
PROCHAMBER VALVED HOLDING-spacer/aerosol-holding chambers - device	NP					CELLCEPT- mycophenolate mofetil cap 250 mg	NP				
PURE COMFORT INHALER SPAC-spacer/aerosol-holding chambers - device	NP					CELLCEPT- mycophenolate mofetil for oral susp 200 mg/ml	NP				
RITEFLO- spacer/aerosol-holding chambers - device	P					CELLCEPT- mycophenolate mofetil tab 500 mg	NP				
SILICONE MASK FOR BREATHE-respiratory therapy supplies - misc	P					CUPRIMINE- penicillamine cap 250 mg	NP	•		•	
SILICONE MASK FOR BREATHR-respiratory therapy supplies - misc	P					CUVRIOR- trientine tetrahydrochloride tab 300 mg	NP	•			
VORTEX HOLDING CHAMBER/MA-spacer/aerosol-holding chambers - device	P					<b>cyclosporine cap 25 mg, 100 mg (Sandimmune)</b>	p				
						<b>cyclosporine modified cap 25 mg, 100 mg (Neoral)</b>	p				
						<b>cyclosporine modified cap 50 mg</b>	p				
						<b>cyclosporine modified oral soln 100 mg/ml (Neoral)</b>	p				
						DEPEN TITRATABS- penicillamine tab 250 mg	NP	•		•	

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ENSPRYNG- satralizumab-mwge subcutaneous soln pref syringe 120 mg/ml	NP	•	•		•	<b>penicillamine cap 250 mg (Cuprimine)</b>	np	•		•	
ENVARUSUS XR- tacrolimus tab er 24hr 0.75 mg, 1 mg, 4 mg	NP					<b>penicillamine tab 250 mg (Depen titratabs)</b>	p	•			
<b>everolimus tab 0.25 mg, 0.5 mg, 0.75 mg, 1 mg (Zortress)</b>	p					PROGRAF- tacrolimus cap 0.5 mg, 1 mg, 5 mg	NP				
IMURAN- azathioprine tab 50 mg	NP					PROGRAF- tacrolimus packet for susp 0.2 mg, 1 mg	NP				
JOENJA- leniolisib phosphate tab 70 mg	NP	•	•		•	RAPAMUNE- sirolimus oral soln 1 mg/ml	NP				
<b>lenalidomide caps 2.5 mg (Revlimid)</b>	p	•	•		•	RAPAMUNE- sirolimus tab 0.5 mg, 1 mg, 2 mg	NP				
<b>lenalidomide cap 5 mg, 10 mg, 15 mg, 20 mg, 25 mg (Revlimid)</b>	p	•	•		•	RESET- digital therapy application - substance use disorder	NP				•
LOKELMA- sodium zirconium cyclosilicate for susp packet 5 gm, 10 gm	P					RESET NON-MONETARY CM- digital therapy application - substance use disorder	NP				•
LUPKYNIS- voclosporin cap 7.9 mg	NP	•	•		•	RESET-O- digital therapy application - substance use disorder	NP				•
<b>mycophenolate mofetil cap 250 mg (Cellcept)</b>	p					RESET-O NON-MONETARY CM- digital therapy application - substance use disorder	NP				•
<b>mycophenolate mofetil for oral susp 200 mg/ml (Cellcept)</b>	p					REVLIMID- lenalidomide caps 2.5 mg	P	•	•		•
<b>mycophenolate mofetil tab 500 mg (Cellcept)</b>	p					REVLIMID- lenalidomide cap 5 mg, 10 mg, 15 mg, 20 mg, 25 mg	P	•	•		•
<b>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv), 360 mg (mycophenolic acid equiv) (Myfortic)</b>	p					REZUROCK- belumosudil mesylate tab 200 mg	NP	•	•		•
MYFORTIC- mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv), 360 mg (mycophenolic acid equiv)	NP					SANDIMMUNE- cyclosporine cap 25 mg, 100 mg	NP				
NEORAL- cyclosporine modified cap 25 mg, 100 mg	NP					SANDIMMUNE- cyclosporine oral soln 100 mg/ml	NP				
NEORAL- cyclosporine modified oral soln 100 mg/ml	NP					<b>sirolimus oral soln 1 mg/ml (Rapamune)</b>	p				
						<b>sirolimus tab 0.5 mg, 1 mg, 2 mg (Rapamune)</b>	p				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands



Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
<b>sodium polystyrene sulfonate powder</b>	p				
SPS- sodium polystyrene sulfonate oral susp 15 gm/60ml	P				
SYPRINE- trientine hcl cap 250 mg	NP	•			
<b>tacrolimus cap 0.5 mg, 1 mg, 5 mg (Prograf)</b>	p				
THALOMID- thalidomide cap 50 mg, 100 mg, 150 mg, 200 mg	P	•	•		•
<b>trientine hcl cap 250 mg (Syprine)</b>	np	•			
TRIENTINE HYDROCHLORIDE- trientine hcl cap 500 mg	NP	•			
VELTASSA- patiromer sorbitex calcium for susp packet 8.4 gm (base eq), 16.8 gm (base eq), 25.2 gm (base eq)	P				
VIJOICE- apelisib (pros) pak 250 mg daily dose (200 mg & 50 mg tabs)	NP	•	•		•
VIJOICE- apelisib (pros) tab therapy pack 50 mg daily dose, 125 mg daily dose	NP	•	•		•
ZOKINVY- lonafarnib cap 50 mg, 75 mg	P	•	•		•
ZORTRESS- everolimus tab 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	NP				

p = Preferred Generics  
np = Non-preferred Generics

P = Preferred Brands  
NP = Non-preferred Brands

## INDEX

## A

abacavir sulfate-lamivudine tab 600-300 mg (Epzicom).....	5	ACULAR.....	103
abacavir sulfate soln 20 mg/ml (base equiv) (Ziagen).....	5	ACULAR LS.....	103
abacavir sulfate tab 300 mg (base equiv) (Ziagen).....	5	ACUVAIL.....	103
ABILIFY.....	66	acyclovir cap 200 mg.....	5
ABILIFY MYCITE MAINTENANC.....	66	acyclovir cream 5% (Zovirax).....	109
ABILIFY MYCITE STARTER KI.....	66	acyclovir oint 5% (Zovirax).....	109
abiraterone acetate tab 250 mg, 500 mg (Zytiga).....	14	acyclovir susp 200 mg/5ml (Zovirax).....	5
ABRILADA.....	79	acyclovir tab 400 mg, 800 mg.....	5
ABRILADA 1-PEN KIT.....	79	ACZONE.....	109
ABRILADA 2-PEN KIT.....	79	ADACEL.....	13
ABRYSVO.....	11	ADALIMUMAB-ADAZ.....	80
ABSORICA.....	109	ADALIMUMAB-ADBM.....	80
ABSORICA LD.....	109	ADALIMUMAB-ADBM CROHNS/UC.....	80
acamprosate calcium tab delayed release 333 mg.....	72	ADALIMUMAB-ADBM PSORIASIS.....	80
ACANYA.....	109	ADALIMUMAB-FKJP.....	80
acarbose tab 25 mg, 50 mg, 100 mg (Precose).....	25	ADAPALENE.....	109
ACCOLATE.....	50	adapalene-benzoyl peroxide gel 0.1-2.5% (Epiduo).....	109
ACCRUFER.....	97	adapalene-benzoyl peroxide gel 0.3-2.5% (Epiduo forte).....	109
ACCU-CHEK AVIVA PLUS.....	118	adapalene cream 0.1% (Differin).....	109
ACCU-CHEK COMPACT STRIPS.....	118	adapalene gel 0.1%.....	109
ACCU-CHEK COMPACT TEST DR.....	118	adapalene gel 0.3% (Differin).....	109
ACCU-CHEK GUIDE.....	118	ADBRY.....	109
ACCU-CHEK GUIDE TEST STRI.....	118	ADCIRCA.....	47
ACCU-CHEK SMARTVIEW STRIP.....	118	ADDERALL.....	69
ACCUPRIL.....	40	ADDERALL XR.....	69
ACCURETIC.....	40	ADDYI.....	72
ACCUTREND GLUCOSE.....	118	adefovir dipivoxil tab 10 mg (Hepsera).....	5
ACE AEROSOL CLOUD ENHANCE.....	123	ADEMPAS.....	47
acebutolol hcl cap 200 mg, 400 mg.....	37	ADIPEX-P.....	69
ACETAMINOPHEN/CAFFEINE/DI.....	76	ADLARITY.....	72
acetaminophen w/ codeine soln 120-12 mg/5ml.....	76	ADMELOG.....	28
acetaminophen w/ codeine tab 300-30 mg, 300-60 mg.....	76	ADMELOG SOLOSTAR.....	28
acetaminophen w/ codeine tab 300-15 mg (Tylenol/ codeine).....	76	ADTHYZA.....	31
acetazolamide cap er 12hr 500 mg.....	43	ADVAIR DISKUS.....	50
acetazolamide tab 125 mg, 250 mg.....	43	ADVAIR HFA.....	50
acetic acid otic soln 2%.....	107	ADVANCE INTUITION TEST ST.....	118
acetylcysteine inhal soln 10%, 20%.....	50	ADVANCE MICRO-DRAW TEST S.....	118
ACIPHEX.....	55	ADVATE.....	100
acitretin cap 10 mg, 17.5 mg, 25 mg.....	109	ADVOCATE REDI-CODE.....	118
ACTEMRA.....	79	ADVOCATE REDI-CODE+ TEST.....	118
ACTEMRA ACTPEN.....	79	ADVOCATE TEST STRIPS.....	118
ACTHAR.....	32	ADYNOVATE.....	100
ACTHIB.....	11	ADZENYS XR-ODT.....	69
ACTIMMUNE.....	14	AEMCOLO.....	9
ACTIVELLA.....	22	AEROCHAMBER/FLOWSIGNAL.....	124
ACTONEL.....	32	AEROCHAMBER HOLDING CHAMB.....	124
ACTOPLUS MET.....	25	AEROCHAMBER MINI AEROSOL.....	124
ACTOS.....	25	AEROCHAMBER MV.....	124
		AEROCHAMBER PLUS FLOW VU.....	124
		AEROCHAMBER PLUS FLOW-VU/.....	124
		AEROCHAMBER Z-STAT PLUS/F.....	124
		AEROCHAMBER Z-STAT PLUS/L.....	124
		AEROCHAMBER Z-STAT PLUS/M.....	124
		AEROCHAMBER Z-STAT PLUS/S.....	124
		AEROCHAMBER Z-STAT PLUS V.....	124

AEROVENT PLUS HOLDING CHA.....	124	alosetron hcl tab 0.5 mg (base equiv), 1 mg (base equiv) (Lotronex).....	58
AFINITOR.....	14	ALPHAGAN P.....	103
AFINITOR DISPERZ.....	14	ALPHANATE.....	100
AFLURIA QUADRIVALENT 2023.....	11	ALPHANINE SD.....	100
AFREZZA.....	29	ALPRAZOLAM INTENSOL.....	63
AFSTYLA.....	100	<b>alprazolam orally disintegrating tab 0.25 mg, 0.5 mg, 1 mg, 2 mg.....</b>	<b>63</b>
AGAMATRIX AMP NO CODE TES.....	118	<b>alprazolam tab er 24hr 0.5 mg, 1 mg, 2 mg, 3 mg (Xanax xr).....</b>	<b>63</b>
AGAMATRIX JAZZ TEST STRIP.....	118	<b>alprazolam tab 0.25 mg, 0.5 mg, 1 mg, 2 mg (Xanax).....</b>	<b>63</b>
AGAMATRIX KEYNOTE TEST ST.....	118	ALPROLIX.....	100
AGAMATRIX PRESTO TEST STR.....	118	ALREX.....	103
AGRYLIN.....	100	ALTABAX.....	109
AIMOVIG.....	84	ALTACE.....	40
AIRDUO DIGIHALER 113/14.....	50	ALTOPREV.....	45
AIRDUO DIGIHALER 232/14.....	51	ALTRENO.....	109
AIRDUO DIGIHALER 55/14.....	51	ALTUVIIIO.....	100
AIRDUO RESPICLICK 113/14.....	51	ALUNBRIG.....	14
AIRDUO RESPICLICK 232/14.....	51	ALVESCO.....	51
AIRDUO RESPICLICK 55/14.....	51	<b>amantadine hcl cap 100 mg.....</b>	<b>90</b>
AIRSUPRA.....	51	<b>amantadine hcl soln 50 mg/5ml.....</b>	<b>90</b>
AJOVY.....	84	<b>amantadine hcl tab 100 mg.....</b>	<b>90</b>
AKLIEF.....	109	AMBIEN.....	69
AKYNZEO.....	57	AMBIEN CR.....	69
ALA-SCALP.....	109	<b>ambrisentan tab 5 mg, 10 mg (Letairis).....</b>	<b>47</b>
<b>albendazole tab 200 mg.....</b>	<b>9</b>	AMCINONIDE.....	109
ALBUTEROL SULFATE.....	51	AMILORIDE/HYDROCHLOROTHIA.....	43
ALBUTEROL SULFATE HFA.....	51	<b>amiloride hcl tab 5 mg.....</b>	<b>43</b>
<b>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv) (Proventil hfa).....</b>	<b>51</b>	<b>aminocaproic acid oral soln 0.25 gm/ml (Amicar).....</b>	<b>100</b>
<b>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv).....</b>	<b>51</b>	<b>aminocaproic acid tab 500 mg, 1000 mg (Amicar).....</b>	<b>100</b>
<b>albuterol sulfate syrup 2 mg/5ml.....</b>	<b>51</b>	<b>amiodarone hcl tab 400 mg.....</b>	<b>39</b>
<b>albuterol sulfate tab 2 mg, 4 mg.....</b>	<b>51</b>	<b>amiodarone hcl tab 100 mg, 200 mg.....</b>	<b>39</b>
<b>alclometasone dipropionate cream 0.05%.....</b>	<b>109</b>	<b>amitriptyline hcl tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg.....</b>	<b>63</b>
<b>alclometasone dipropionate oint 0.05%.....</b>	<b>109</b>	AMJEVITA (NDC's starting with 55513 only).....	80
ALDACTONE.....	43	<b>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg, 2.5-20 mg, 2.5-40 mg.....</b>	<b>47</b>
ALECENSA.....	14	<b>amlodipine besylate-atorvastatin calcium tab 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg, 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg (Caduet).....</b>	<b>47</b>
ALENDRONATE SODIUM.....	32	<b>amlodipine besylate-benazepril hcl cap 2.5-10 mg, 5-40 mg.....</b>	<b>40</b>
<b>alendronate sodium oral soln 70 mg/75ml.....</b>	<b>32</b>	<b>amlodipine besylate-benazepril hcl cap 5-10 mg, 5-20 mg, 10-20 mg, 10-40 mg (Lotrel).....</b>	<b>40</b>
<b>alendronate sodium tab 10 mg, 35 mg.....</b>	<b>32</b>	<b>amlodipine besylate-olmesartan medoxomil tab 5-20 mg, 5-40 mg, 10-20 mg, 10-40 mg (Azor).....</b>	<b>40</b>
<b>alendronate sodium tab 70 mg (Fosamax).....</b>	<b>32</b>	<b>amlodipine besylate tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent) (Norvasc).....</b>	<b>38</b>
<b>alfuzosin hcl tab er 24hr 10 mg (Uroxatral).....</b>	<b>62</b>	<b>amlodipine besylate-valsartan tab 5-160 mg, 5-320 mg, 10-160 mg, 10-320 mg (Exforge).....</b>	<b>40</b>
ALINIA.....	9	<b>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg, 5-160-25 mg, 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg (Exforge hct).....</b>	<b>40</b>
<b>aliskiren fumarate tab 150 mg (base equivalent), 300 mg (base equivalent) (Tekturna).....</b>	<b>40</b>		
ALKINDI SPRINKLE.....	20		
ALLOPURINOL.....	85		
<b>allopurinol tab 100 mg, 300 mg (Zyloprim).....</b>	<b>85</b>		
ALLZITAL.....	76		
<b>almotriptan malate tab 6.25 mg, 12.5 mg.....</b>	<b>84</b>		
ALOCRI.....	103		
ALOGLIPTIN.....	25		
ALOGLIPTIN/METFORMIN HCL.....	25		
ALOGLIPTIN/METFORMIN HYDR.....	25		
ALOGLIPTIN/PIOGLITAZONE.....	26		
ALOMIDE.....	103		
ALORA.....	22		

AMOXICILLIN.....	1	APTIVUS.....	5
AMOXICILLIN/CLAVULANATE P.....	1	ARAKODA.....	9
<b>amoxicillin &amp; k clavulanate for susp 200-28.5 mg/5ml, 250-62.5 mg/5ml, 400-57 mg/5ml.....</b>	<b>1</b>	ARANESP ALBUMIN FREE.....	97
<b>amoxicillin &amp; k clavulanate for susp 600-42.9 mg/5ml (Augmentin es-600).....</b>	<b>1</b>	ARAVA.....	80
<b>amoxicillin &amp; k clavulanate tab 250-125 mg, 875-125 mg.....</b>	<b>1</b>	ARAZLO.....	109
<b>amoxicillin &amp; k clavulanate tab 500-125 mg (Augmentin).....</b>	<b>1</b>	ARCALYST.....	80
<b>amoxicillin (trihydrate) cap 250 mg, 500 mg.....</b>	<b>1</b>	AREXVY.....	11
<b>amoxicillin (trihydrate) for susp 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml.....</b>	<b>1</b>	<b>arformoterol tartrate soln nebu 15 mcg/2ml (base equiv) (Brovana).....</b>	<b>51</b>
<b>amoxicillin (trihydrate) tab 500 mg, 875 mg.....</b>	<b>1</b>	ARICEPT.....	72
<b>amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg, 25 mg, 37.5 mg, 50 mg (Mydayis).....</b>	<b>70</b>	ARIKAYCE.....	4
<b>amphetamine-dextroamphetamine cap er 24hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg (Adderall xr).....</b>	<b>70</b>	ARIMIDEX.....	14
<b>amphetamine-dextroamphetamine tab 5 mg, 7.5 mg, 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg (Adderall).....</b>	<b>70</b>	<b>aripiprazole orally disintegrating tab 10 mg, 15 mg.....</b>	<b>66</b>
<b>amphetamine sulfate tab 5 mg, 10 mg (Evekeo).....</b>	<b>69</b>	<b>aripiprazole oral solution 1 mg/ml.....</b>	<b>66</b>
<b>ampicillin cap 500 mg.....</b>	<b>1</b>	<b>aripiprazole tab 2 mg, 5 mg, 10 mg, 15 mg, 20 mg, 30 mg (Abilify).....</b>	<b>67</b>
AMPYRA.....	72	ARIXTRA.....	99
AMRIX.....	92	<b>armodafinil tab 50 mg, 150 mg, 200 mg, 250 mg (Nuvigil).....</b>	<b>70</b>
AMZEEQ.....	109	ARMONAIR DIGIHALER.....	51
ANAFRANIL.....	63	ARMOUR THYROID.....	31
<b>anagrelide hcl cap 1 mg.....</b>	<b>100</b>	ARNUITY ELLIPTA.....	51
<b>anagrelide hcl cap 0.5 mg (Agrylin).....</b>	<b>100</b>	AROMASIN.....	14
ANALPRAM-HC.....	108	ARTHROTEC 50.....	80
<b>anastrozole tab 1 mg (Arimidex).....</b>	<b>14</b>	ARTHROTEC 75.....	80
ANCOBON.....	4	<b>asenapine maleate sl tab 2.5 mg (base equiv), 5 mg (base equiv), 10 mg (base equiv) (Saphris).....</b>	<b>67</b>
ANDRODERM.....	21	ASMANEX HFA.....	51
ANDROGEL PUMP.....	21	ASMANEX TWISTHALER 120 ME.....	51
ANGELIQ.....	22	ASMANEX TWISTHALER 30 MET.....	51
ANNOVERA.....	23	ASMANEX TWISTHALER 60 MET.....	51
ANORO ELLIPTA.....	51	<b>aspirin chew tab 81 mg.....</b>	<b>76</b>
ANTIVERT.....	57	<b>aspirin-dipyridamole cap er 12hr 25-200 mg.....</b>	<b>101</b>
ANUSOL-HC.....	108	<b>aspirin tab delayed release 81 mg.....</b>	<b>76</b>
ANZEMET.....	57	ASPRUZYO SPRINKLE.....	36
APADAZ.....	76	ASSURE II.....	118
APEXICON E.....	109	ASSURE II CHECK STRIP.....	118
APIDRA.....	28	ASSURE II TEST STRIPS.....	118
APIDRA SOLOSTAR.....	28	ASSURE PLATINUM TEST STRI.....	118
APLENZIN.....	63	ASSURE PRISM MULTI TEST S.....	118
APOKYN.....	90	ASSURE PRO TEST STRIPS.....	118
<b>apomorphine hcl soln cartridge 30 mg/3ml (Apokyn).....</b>	<b>90</b>	ASSURE 3 TEST STRIPS.....	118
APRACLONIDINE.....	103	ASSURE 4 TEST STRIPS.....	118
<b>aprepitant capsule 40 mg.....</b>	<b>57</b>	ASTAGRAF XL.....	127
<b>aprepitant capsule 125 mg.....</b>	<b>57</b>	ATABEX EC.....	93
<b>aprepitant capsule 80 mg (Emend).....</b>	<b>57</b>	ATABEX OB.....	93
<b>aprepitant capsule therapy pack 80 &amp; 125 mg (Emend tripack).....</b>	<b>57</b>	ATACAND.....	40
APRISO.....	58	ATACAND HCT.....	40
APTENSIO XR.....	70	<b>atazanavir sulfate cap 150 mg (base equiv).....</b>	<b>5</b>
APTIOM.....	86	<b>atazanavir sulfate cap 200 mg (base equiv), 300 mg (base equiv) (Reyataz).....</b>	<b>5</b>
		ATELVIA.....	32
		<b>atenolol &amp; chlorthalidone tab 50-25 mg (Tenoretic 50).....</b>	<b>40</b>
		<b>atenolol &amp; chlorthalidone tab 100-25 mg (Tenoretic 100).....</b>	<b>40</b>

atenolol tab 25 mg, 50 mg, 100 mg (Tenormin).....	37
ATIVAN.....	63
AT LAST TEST STRIPS.....	118
atomoxetine hcl cap 10 mg (base equiv), 18 mg (base equiv), 25 mg (base equiv), 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv), 100 mg (base equiv) (Strattera).....	70
ATORVALIQ.....	45
atorvastatin calcium tab 10 mg (base equivalent), 20 mg (base equivalent), 40 mg (base equivalent), 80 mg (base equivalent) (Lipitor).....	45
atovaquone-proguanil hcl tab 62.5-25 mg, 250-100 mg (Malarone).....	9
atovaquone susp 750 mg/5ml (Mepron).....	9
ATRALIN.....	109
ATROPINE SULFATE.....	103
atropine sulfate ophth soln 1% (Atropine sulfate)....	103
ATROVENT HFA.....	51
AUBAGIO.....	72
AUGMENTIN.....	1
AUGMENTIN ES-600.....	1
AURYXIA.....	58
AUSTEDO.....	72
AUSTEDO XR.....	72
AUSTEDO XR PATIENT TITRAT.....	72
AUVELITY.....	63
AUVI-Q.....	44
AVALIDE.....	40
AVAPRO.....	40
AVODART.....	62
AVONEX.....	73
AVONEX PEN.....	73
AYVAKIT.....	14
AZASITE.....	103
azathioprine tab 75 mg, 100 mg.....	127
azathioprine tab 50 mg (Imuran).....	127
azelaic acid gel 15% (Finacea).....	109
azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act (Dymista).....	49
azelastine hcl nasal spray 0.1% (137 mcg/spray), 0.15% (205.5 mcg/spray).....	49
azelastine hcl ophth soln 0.05%.....	103
AZELEX.....	109
AZESCO.....	93
AZILECT.....	90
AZITHROMYCIN.....	2
azithromycin for susp 100 mg/5ml, 200 mg/5ml (Zithromax).....	2
azithromycin tab 600 mg.....	2
azithromycin tab 250 mg, 500 mg (Zithromax).....	2
AZOPT.....	103
AZOR.....	40
AZSTARYS.....	70
AZULFIDINE.....	58
AZULFIDINE EN-TABS.....	58

**B**

BACITRACIN.....	103
bacitracin-polymyxin b ophth oint.....	103
bacitracin-polymyxin-neomycin-hc ophth oint 1%.....	103
BACLOFEN.....	92
baclofen susp 25 mg/5ml (Fleqsuvy).....	92
baclofen tab 5 mg.....	92
baclofen tab 10 mg, 20 mg.....	92
BACTRIM.....	9
BACTRIM DS.....	9
BAFIERTAM.....	73
BALCOLTRA.....	23
balsalazide disodium cap 750 mg (Colazal).....	58
BALVERSA.....	14
BANZEL.....	86
BAQSIMI ONE PACK.....	26
BAQSIMI TWO PACK.....	26
BARACLUDGE.....	5
BASAGLAR KWIKPEN.....	30
BASAGLAR TEMPO PEN.....	30
BAXDELA.....	3
BELBUCA.....	76
BELSOMRA.....	69
benazepril & hydrochlorothiazide tab 5-6.25 mg.....	40
benazepril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg (Lotensin hct).....	40
benazepril hcl tab 5 mg.....	40
benazepril hcl tab 10 mg, 20 mg, 40 mg (Lotensin)....	40
BENEFIX.....	101
BENICAR.....	41
BENICAR HCT.....	41
BENLYSTA.....	127
BENZAMYCIN.....	109
BENZHYDROCODONE/ACETAMINO.....	76
BENZNIDAZOLE.....	9
benzonatate cap 100 mg, 150 mg, 200 mg.....	50
benzoyl peroxide-erythromycin gel 5-3% (Benzamycin).....	109
benztropine mesylate tab 0.5 mg, 1 mg, 2 mg.....	90
bepotastine besilate ophth soln 1.5% (Bepreve).....	103
BEPREVE.....	103
BERINERT.....	101
BESIVANCE.....	103
BESREMI.....	14
betaine powder for oral solution (Cystadane).....	32
BETAMETHASONE DIPROPIONAT.....	109
betamethasone dipropionate augmented cream 0.05%.....	109
betamethasone dipropionate augmented lotion 0.05%.....	109
betamethasone dipropionate augmented oint 0.05% (Diprolene).....	109
betamethasone dipropionate cream 0.05%.....	109
betamethasone dipropionate lotion 0.05%.....	109
betamethasone dipropionate oint 0.05%.....	109

betamethasone valerate aerosol foam 0.12% (Luxiq).....	109	brimonidine tartrate ophth soln 0.2%.....	104
betamethasone valerate cream 0.1% (base equivalent).....	110	brimonidine tartrate ophth soln 0.1%, 0.15% (Alphagan p).....	103
betamethasone valerate lotion 0.1% (base equivalent).....	110	brimonidine tartrate-timolol maleate ophth soln 0.2-0.5% (Combigan).....	104
betamethasone valerate oint 0.1% (base equivalent).....	110	brinzolamide ophth susp 1% (Azopt).....	104
BETAPACE.....	37	BRIVIACT.....	86
BETAPACE AF.....	37	bromfenac sodium ophth soln 0.07% (base equivalent) (Prolensa).....	104
BETASERON.....	73	bromfenac sodium ophth soln 0.09% (base equiv) (once-daily).....	104
BETAXOLOL HCL.....	103	bromocriptine mesylate cap 5 mg (base equivalent) (Parlodel).....	90
betaxolol hcl tab 10 mg, 20 mg.....	37	bromocriptine mesylate tab 2.5 mg (base equivalent) (Parlodel).....	90
bethanechol chloride tab 5 mg, 10 mg, 25 mg, 50 mg.....	60	BROMSITE.....	104
BETHKIS.....	4	BRONCHITOL.....	54
BETIMOL.....	103	BRONCHITOL TOLERANCE TEST.....	54
BETOPTIC-S.....	103	BROVANA.....	52
BEVESPI AEROSPHERE.....	51	BRUKINSA.....	14
BEXAGLIFLOZIN.....	26	BRYHALI.....	110
bexarotene cap 75 mg (Targretin).....	14	budesonide delayed release particles cap 3 mg.....	20
bexarotene gel 1% (Targretin).....	110	budesonide inhalation susp 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml (Pulmicort).....	52
BEXSERO.....	11	budesonide rectal foam 2 mg/act (Uceris).....	108
BEYAZ.....	23	budesonide tab er 24hr 9 mg (Uceris).....	20
bicalutamide tab 50 mg (Casodex).....	14	bumetanide tab 1 mg, 2 mg.....	44
BIDIL.....	47	bumetanide tab 0.5 mg (Bumex).....	44
BIJUVA.....	22	BUMEX.....	44
BIKTARVY.....	5	BUPHENYL.....	32
BILTRICIDE.....	9	buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv), 4-1 mg (base equiv), 8-2 mg (base equiv), 12-3 mg (base equiv) (Suboxone).....	76
bimatoprost ophth soln 0.03%.....	103	buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv), 8-2 mg (base equiv).....	76
BINAXNOW COVID-19 AG CARD.....	118	buprenorphine hcl sl tab 2 mg (base equiv), 8 mg (base equiv).....	76
BINOSTO.....	32	buprenorphine td patch weekly 5 mcg/hr, 7.5 mcg/hr, 10 mcg/hr, 15 mcg/hr, 20 mcg/hr (Butrans).....	77
BIOTEL CARE BLOOD GLUCOSE.....	118	bupropion hcl (smoking deterrent) tab er 12hr 150 mg.....	73
bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg (Pylera).....	55	bupropion hcl tab er 12hr 100 mg, 150 mg, 200 mg (Wellbutrin sr).....	63
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg, 5-6.25 mg, 10-6.25 mg (Ziac).....	41	bupropion hcl tab er 24hr 150 mg, 300 mg (Wellbutrin xl).....	64
bisoprolol fumarate tab 5 mg, 10 mg.....	37	bupropion hcl tab 75 mg, 100 mg.....	64
BLOOD GLUCOSE TEST STRIPS.....	118	BUPROPION HYDROCHLORIDE E.....	64
BLULINK GLUCOSE TEST STRI.....	118	buspirone hcl tab 7.5 mg.....	63
BONJESTA.....	57	buspirone hcl tab 5 mg, 10 mg, 15 mg, 30 mg.....	63
BOOSTRIX.....	13	butalbital-acetaminophen-caffeine cap 50-325-40 mg.....	76
bosentan tab 62.5 mg, 125 mg (Tracleer).....	47	butalbital-acetaminophen-caffeine cap 50-300-40 mg (Fioricet).....	76
BOSULIF.....	14	butalbital-acetaminophen-caffeine tab 50-325-40 mg (Esgic).....	76
BRAFTOVI.....	14	butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg.....	77
BREATHE COMFORT ANTI-STAT.....	124		
BREATHE EASE/LARGE MASK.....	124		
BREATHE EASE/MEDIUM MASK.....	124		
BREATHE EASE/SMALL MASK.....	124		
BREATHERITE VALVED MDI CH.....	124		
BRENZAVVY.....	26		
BREO ELLIPTA.....	51		
BREXAFEMME.....	4		
BREZTRI AEROSPHERE.....	51		
BRILINTA.....	101		
brimonidine tartrate gel 0.33% (base equivalent) (Mirvaso).....	110		

butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg (Fioricet/codeine).....	77	carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg (Carbatrol).....	86
butalbital-acetaminophen cap 50-300 mg (Butalbital/ acetamino).....	76	carbamazepine chew tab 100 mg.....	86
butalbital-acetaminophen tab 50-300 mg.....	76	carbamazepine susp 100 mg/5ml (Tegretol).....	86
butalbital-acetaminophen tab 50-325 mg.....	76	carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg (Tegretol-xr).....	86
butalbital-aspirin-caffeine cap 50-325-40 mg.....	76	carbamazepine tab 200 mg (Tegretol).....	86
butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg.....	77	CARBATROL.....	86
butorphanol tartrate nasal soln 10 mg/ml.....	77	CARBIDOPA/LEVODOPA ODT.....	90
BUTRANS.....	77	carbidopa & levodopa tab er 25-100 mg, 50-200 mg.....	90
BYDUREON BCISE.....	26	carbidopa & levodopa tab 25-250 mg.....	90
BYETTA.....	26	carbidopa & levodopa tab 10-100 mg, 25-100 mg (Sinemet).....	90
BYLVAY.....	58	carbidopa-levodopa-entacapone tabs 12.5-50-200 mg (Stalevo 50).....	90
BYLVAY (PELLETS).....	58	carbidopa-levodopa-entacapone tabs 18.75-75-200 mg (Stalevo 75).....	90
BYSTOLIC.....	37	carbidopa-levodopa-entacapone tabs 25-100-200 mg (Stalevo 100).....	90
<b>C</b>		carbidopa-levodopa-entacapone tabs 31.25-125-200 mg (Stalevo 125).....	90
cabergoline tab 0.5 mg.....	32	carbidopa-levodopa-entacapone tabs 37.5-150-200 mg (Stalevo 150).....	90
CABLIVI.....	101	carbidopa-levodopa-entacapone tabs 50-200-200 mg (Stalevo 200).....	90
CABOMETYX.....	14	carbidopa tab 25 mg (Lodosyn).....	90
CADUET.....	47	CARBINOXAMINE MALEATE.....	49
caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv).....	70	carbinoxamine maleate tab 4 mg.....	49
calcipotriene-betamethasone dipropionate oint 0.005-0.064% (Taclonex).....	110	carbonyl iron susp 15 mg/1.25ml (elemental iron).....	98
calcipotriene-betamethasone dipropionate susp 0.005-0.064% (Taclonex).....	110	CARDIZEM.....	38
calcipotriene cream 0.005% (Dovonex).....	110	CARDIZEM CD.....	38
calcipotriene oint 0.005%.....	110	CARDIZEM LA.....	38
calcipotriene soln 0.005% (50 mcg/ml).....	110	CARDURA.....	41
calcitonin (salmon) inj 200 unit/ml (Miacalcin).....	32	CARDURA XL.....	62
calcitonin (salmon) nasal soln 200 unit/act.....	32	CAREONE BLOOD GLUCOSE TES.....	118
CALCITRIOL.....	110	CARESENS N BLOOD GLUCOSE.....	118
calcitriol cap 0.25 mcg, 0.5 mcg (Rocaltrol).....	32	CARESTART COVID-19 ANTIGE.....	119
calcitriol oral soln 1 mcg/ml (Rocaltrol).....	32	CARETOUCH BLOOD GLUCOSE T.....	119
calcium acetate (phosphate binder) cap 667 mg (169 mg ca).....	58	carglumic acid soluble tab 200 mg (Carbaglu).....	32
calcium acetate (phosphate binder) tab 667 mg.....	58	CARNITOR.....	32
CALQUENCE.....	14	CARNITOR SF.....	33
CAMBIA.....	84	CAROSPIR.....	44
CAMCEVI.....	15	CARTEOLOL HCL.....	104
CAMZYOS.....	47	carvedilol phosphate cap er 24hr 10 mg, 20 mg, 40 mg, 80 mg (Coreg cr).....	37
CANASA.....	58	carvedilol tab 3.125 mg, 6.25 mg, 12.5 mg, 25 mg (Coreg).....	37
candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg, 32-12.5 mg, 32-25 mg (Atacand hct).....	41	CASODEX.....	15
candesartan cilexetil tab 4 mg, 8 mg, 16 mg, 32 mg (Atacand).....	41	CATAPRES-TTS-1.....	41
capecitabine tab 150 mg, 500 mg (Xeloda).....	15	CATAPRES-TTS-2.....	41
CAPEX.....	110	CATAPRES-TTS-3.....	41
CAPLYTA.....	67	CAVERJECT.....	48
CAPRELSA.....	15	CAVERJECT IMPULSE.....	48
CAPTOPRIL/HYDROCHLOROTHIA.....	41	CAYA.....	124
captopril tab 12.5 mg, 25 mg, 50 mg, 100 mg.....	41	CAYSTON.....	9
CARAC.....	110	CEFACTOR.....	1
CARAFATE.....	55		
CARBAGLU.....	32		

CEFACLOR ER.....	1	ciclopirox gel 0.77%.....	110
CEFADROXIL.....	1	ciclopirox olamine cream 0.77% (base equiv)	
cefadroxil cap 500 mg.....	1	(Loprox).....	110
cefadroxil for susp 250 mg/5ml, 500 mg/5ml.....	1	ciclopirox olamine susp 0.77% (base equiv)	
cefdinir cap 300 mg.....	1	(Loprox).....	110
cefdinir for susp 125 mg/5ml, 250 mg/5ml.....	1	ciclopirox shampoo 1% (Loprox shampoo).....	110
cefixime cap 400 mg (Suprax).....	1	ciclopirox solution 8% (Penlac Nail Lacquer).....	110
cefixime for susp 100 mg/5ml.....	1	cilostazol tab 50 mg, 100 mg.....	101
cefixime for susp 200 mg/5ml (Suprax).....	1	CILOXAN.....	104
cefpodoxime proxetil for susp 50 mg/5ml, 100		CIMDUO.....	5
mg/5ml.....	1	cimetidine tab 200 mg.....	55
cefpodoxime proxetil tab 100 mg, 200 mg.....	1	cimetidine tab 300 mg, 400 mg, 800 mg.....	55
cefprozil for susp 125 mg/5ml, 250 mg/5ml.....	1	CIMZIA.....	59
cefprozil tab 250 mg, 500 mg.....	1	CIMZIA STARTER KIT.....	59
cefuroxime axetil tab 250 mg, 500 mg.....	1	cinacalcet hcl tab 30 mg (base equiv), 60 mg (base	
CELEBREX.....	80	equiv), 90 mg (base equiv) (Sensipar).....	33
celecoxib cap 50 mg, 100 mg, 200 mg, 400 mg		CIPRO.....	3
(Celebrex).....	80	CIPROFLOXACIN.....	107
CELEXA.....	64	CIPROFLOXACIN/FLUOCINOLON.....	107
CELLCEPT.....	127	ciprofloxacin-dexamethasone otic susp 0.3-0.1%	
CELLTRION DIATRUST COVID-.....	119	(Ciprodex).....	107
CELONTIN.....	86	ciprofloxacin hcl ophth soln 0.3% (base	
CEPHALEXIN.....	2	equivalent).....	104
cephalexin cap 750 mg.....	2	ciprofloxacin hcl tab 750 mg (base equiv).....	3
cephalexin cap 250 mg, 500 mg.....	2	ciprofloxacin hcl tab 250 mg (base equiv), 500 mg	
cephalexin for susp 125 mg/5ml, 250 mg/5ml.....	2	(base equiv) (Cipro).....	3
CEQUA.....	104	CIPRO HC.....	107
CERDELGA.....	98	CITALOPRAM HYDROBROMIDE.....	64
CERVIDIL.....	32	citalopram hydrobromide oral soln 10 mg/5ml.....	64
cetirizine hcl oral soln 1 mg/ml (5 mg/5ml).....	49	citalopram hydrobromide tab 10 mg (base equiv), 20	
CETRAXAL.....	107	mg (base equiv), 40 mg (base equiv) (Celexa).....	64
cetrorelix acetate for inj kit 0.25 mg (Cetrotide).....	33	CITRANATAL ASSURE.....	93
CETROTIDE.....	33	CITRANATAL B-CALM.....	93
cevimeline hcl cap 30 mg (Evoxac).....	107	CITRANATAL 90 DHA.....	93
CHEMET.....	117	CITRANATAL HARMONY.....	93
CHENODAL.....	59	CITRANATAL MEDLEY.....	93
CHLORDIAZEPOXIDE/AMITRIPT.....	73	CLARINEX.....	49
chlordiazepoxide hcl cap 5 mg, 10 mg, 25 mg.....	63	CLARINEX-D 12 HOUR.....	50
chlorhexidine gluconate soln 0.12% (Peridex).....	107	CLARITHROMYCIN.....	2
chloroquine phosphate tab 250 mg, 500 mg.....	9	clarithromycin tab er 24hr 500 mg.....	2
chlorpromazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg,		clarithromycin tab 250 mg, 500 mg.....	2
200 mg.....	67	CLEARDETECT COVID-19 ANTI.....	119
CHLORPROMAZINE HYDROCHLOR.....	67	CLEMASTINE FUMARATE.....	49
chlorthalidone tab 25 mg, 50 mg.....	44	clemastine fumarate syrup 0.67 mg/5ml (0.5 mg/5ml	
chlorzoxazone tab 500 mg.....	92	base eq).....	49
chlorzoxazone tab 250 mg, 375 mg, 750 mg.....	92	CLENPIQ.....	54
CHOLBAM.....	59	CLEOCIN.....	10
cholestyramine light powder 4 gm/dose (Questran		CLEOCIN PEDIATRIC GRANULE.....	10
light).....	45	CLEOCIN-T.....	110
cholestyramine light powder packets 4 gm.....	45	CLEVER CHEK AUTO-CODE TES.....	119
cholestyramine powder 4 gm/dose (Questran).....	45	CLEVER CHEK AUTO-CODE VOI.....	119
cholestyramine powder packets 4 gm (Questran).....	45	CLEVER CHEK TEST STRIPS.....	119
choline fenofibrate cap dr 45 mg (fenofibric acid		CLEVER CHOICE ANTI-STATIC.....	124
equiv), 135 mg (fenofibric acid equiv) (Trilipix).....	45	CLEVER CHOICE AUTO-CODE P.....	119
CHORIONIC GONADOTROPIN.....	33	CLEVER CHOICE MICRO TEST.....	119
CIALIS.....	48	CLEVER CHOICE NO CODING T.....	119
CIBINQO.....	110	CLEVER CHOICE TALK NO COD.....	119



CLIMARA.....	22	clonidine td patch weekly 0.3 mg/24hr (Catapres-	
CLIMARA PRO.....	22	tts-3).....	41
CLINDAGEL.....	110	clodogrel bisulfate tab 75 mg (base equiv)	
clindamycin hcl cap 75 mg, 150 mg, 300 mg		(Plavix).....	101
(Cleocin).....	10	clorazepate dipotassium tab 3.75 mg, 15 mg.....	63
clindamycin palmitate hcl for soln 75 mg/5ml (base		clorazepate dipotassium tab 7.5 mg (Tranxene t).....	63
equiv) (Cleocin pediatric gr).....	10	clotrimazole cream 1%.....	111
clindamycin phosphate-benzoyl peroxide gel		clotrimazole soln 1%.....	111
1-5%.....	110	clotrimazole troche 10 mg.....	107
clindamycin phosphate-benzoyl peroxide gel 1.2-2.5%		clotrimazole w/ betamethasone cream 1-0.05%.....	111
(Acanya).....	110	clotrimazole w/ betamethasone lotion 1-0.05%.....	111
clindamycin phosphate-benzoyl peroxide gel		CLOZAPINE ODT.....	67
1.2-3.75% (Onexton).....	110	clozapine orally disintegrating tab 25 mg, 100 mg, 150	
clindamycin phosphate foam 1% (Evoclin).....	110	mg, 200 mg.....	67
clindamycin phosphate gel 1% (Clindagel).....	110	clozapine tab 25 mg, 50 mg, 100 mg, 200 mg	
clindamycin phosphate lotion 1% (Cleocin-t).....	110	(Clozaril).....	67
clindamycin phosphate soln 1%.....	110	CLOZARIL.....	67
clindamycin phosphate swab 1%.....	110	C-NATE DHA.....	93
clindamycin phosphate-tretinoin gel 1.2-0.025%		COAGADEx.....	101
(Ziana).....	110	COARTEM.....	9
clindamycin phosphate vaginal cream 2%		CODEINE SULFATE.....	77
(Cleocin).....	61	codeine sulfate tab 30 mg (Codeine sulfate).....	77
clindamycin phosph-benzoyl peroxide (refrig) gel 1.2		COLAZAL.....	59
(1)-5%.....	110	colchicine cap 0.6 mg (Mitigare).....	85
CLINDESSE.....	61	colchicine tab 0.6 mg (Colcrys).....	85
CLINITEST RAPID COVID-19.....	119	colchicine w/ probenecid tab 0.5-500 mg.....	85
clobazam suspension 2.5 mg/ml (Onfi).....	86	colesevelam hcl packet for susp 3.75 gm	
clobazam tab 10 mg, 20 mg (Onfi).....	86	(Welchol).....	45
clobetasol propionate cream 0.05%.....	110	colesevelam hcl tab 625 mg (Welchol).....	45
clobetasol propionate emollient base cream		COLESTID.....	45
0.05%.....	110	COLESTID FLAVORED.....	45
clobetasol propionate emulsion foam 0.05% (Olux-		colestipol hcl granule packets 5 gm (Colestid	
e).....	110	flavored).....	45
clobetasol propionate foam 0.05% (Olux).....	110	colestipol hcl granules 5 gm (Colestid flavored).....	45
clobetasol propionate gel 0.05%.....	110	colestipol hcl tab 1 gm (Colestid).....	45
clobetasol propionate lotion 0.05% (Clobex).....	111	COMBIGAN.....	104
clobetasol propionate oint 0.05%.....	111	COMBIPATCH.....	22
clobetasol propionate shampoo 0.05% (Clobex).....	111	COMBIVENT RESPIMAT.....	52
clobetasol propionate soln 0.05%.....	111	COMETRIQ.....	15
clobetasol propionate spray 0.05% (Clobex).....	111	COMIRNATY 2023-24.....	11
CLOBEX.....	111	COMPACT SPACE CHAMBER/ANT.....	124
clocortolone pivalate cream 0.1% (Cloderm).....	111	COMPLERA.....	5
CLODERM.....	111	COMPLETE NATAL DHA.....	93
CLOMID.....	33	COMPLETENATE.....	93
clomipramine hcl cap 25 mg, 50 mg, 75 mg		COMTAN.....	90
(Anafranil).....	64	CO-NATAL FA.....	93
clonazepam orally disintegrating tab 0.125 mg, 0.25		CONCEPT DHA.....	93
mg, 0.5 mg, 1 mg, 2 mg.....	86	CONCEPT OB.....	93
clonazepam tab 0.5 mg, 1 mg, 2 mg (Klonopin).....	86	CONCERTA.....	70
clonidine hcl tab er 12hr 0.1 mg (Kapvay).....	70	CONDOMS.....	124
clonidine hcl tab 0.1 mg, 0.2 mg, 0.3 mg.....	41	CONDYLOX.....	111
CLONIDINE HYDROCHLORIDE E.....	41	CONJUPRI.....	38
clonidine td patch weekly 0.1 mg/24hr (Catapres-		CONTOUR BLOOD GLUCOSE MON.....	124
tts-1).....	41	CONTOUR BLOOD GLUCOSE TES.....	119
clonidine td patch weekly 0.2 mg/24hr (Catapres-		CONTOUR HIGH CONTROL.....	124
tts-2).....	41	CONTOUR LOW CONTROL.....	124
		CONTOUR NEXT BLOOD GLUCOS.....	119

CONTOUR NEXT CONTROL LEVE.....	124	CYCLOGYL.....	104
CONTOUR NEXT EZ BLOOD GLU.....	124	CYCLOMYDRIL.....	104
CONTOUR NEXT GEN BLOOD GL.....	125	<b>cyclopentolate hcl ophth soln 1% (Cyclogyl).....</b>	<b>104</b>
CONTOUR NEXT LINK BLOOD G.....	125	CYCLOPHOSPHAMIDE.....	15
CONTOUR NEXT LINK WIRELES.....	125	<b>cyclophosphamide cap 25 mg, 50 mg</b>	
CONTOUR NEXT ONE BLOOD GL.....	125	<b>(Cyclophosphamide).....</b>	<b>15</b>
CONTOUR NORMAL CONTROL.....	125	<b>cycloserine cap 250 mg.....</b>	<b>4</b>
CONTRAVE.....	70	CYCLOSET.....	26
CONZIP.....	77	<b>cyclosporine cap 25 mg, 100 mg (Sandimmune).....</b>	<b>127</b>
COOL BLOOD GLUCOSE TEST S.....	119	<b>cyclosporine modified cap 50 mg.....</b>	<b>127</b>
COPAXONE.....	73	<b>cyclosporine modified cap 25 mg, 100 mg</b>	
COPIKTRA.....	15	<b>(Neoral).....</b>	<b>127</b>
CORDRAN.....	111	<b>cyclosporine modified oral soln 100 mg/ml</b>	
COREG.....	37	<b>(Neoral).....</b>	<b>127</b>
COREG CR.....	37	CYLTEZO.....	80
CORGARD.....	37	CYLTEZO STARTER PACKAGE F.....	80
CORIFACT.....	101	CYMBALTA.....	64
CORLANOR.....	47	<b>cyproheptadine hcl syrup 2 mg/5ml.....</b>	<b>49</b>
CORTEF.....	20	<b>cyproheptadine hcl tab 4 mg.....</b>	<b>49</b>
CORTENEMA.....	108	CYSTADANE.....	33
CORTIFOAM.....	108	CYSTADROPS.....	104
CORTISONE ACETATE.....	20	CYSTAGON.....	62
CORTISPORIN-TC.....	107	CYSTARAN.....	104
CORTROPHIN.....	33	CYTOMEL.....	31
COSENTYX.....	111	CYTOTEC.....	55
COSENTYX SENSOREADY PEN.....	111		
COSENTYX UNOREADY.....	111	<b>D</b>	
COSOPT.....	104	<b>dasabigatran etexilate mesylate cap 75 mg (etexilate</b>	
COSOPT PF.....	104	<b>base eq), 150 mg (etexilate base eq) (Pradaxa).....</b>	<b>99</b>
COTELLIC.....	15	<b>dalfampridine tab er 12hr 10 mg (Ampyra).....</b>	<b>73</b>
COTEMPLA XR-ODT.....	70	DALIRESP.....	52
COVID-19 AG TEST.....	119	<b>danazol cap 50 mg, 100 mg, 200 mg.....</b>	<b>21</b>
COVID-19 AT-HOME TEST KIT.....	119	DANTRIUM.....	92
COVID-19 OTC ANTIGEN TEST.....	119	<b>dantrolene sodium cap 50 mg, 100 mg.....</b>	<b>92</b>
COZAAR.....	41	<b>dantrolene sodium cap 25 mg (Dantrium).....</b>	<b>92</b>
CREON.....	58	<b>dapsone gel 5%, 7.5% (Aczone).....</b>	<b>111</b>
CRESEMBA.....	4	<b>dapsone tab 25 mg, 100 mg.....</b>	<b>10</b>
CRESTOR.....	45	DAPTACEL.....	13
CRINONE.....	61	DARAPRIM.....	9
CROMOLYN SODIUM.....	104	<b>darifenacin hydrobromide tab er 24hr 7.5 mg (base</b>	
<b>cromolyn sodium oral conc 100 mg/5ml</b>		<b>equiv), 15 mg (base equiv).....</b>	<b>60</b>
<b>(Gastrocrom).....</b>	<b>59</b>	<b>darunavir tab 600 mg, 800 mg (Prezista).....</b>	<b>5</b>
<b>cromolyn sodium soln nebu 20 mg/2ml.....</b>	<b>52</b>	DAURISMO.....	15
CROTAN.....	111	DAYBUE.....	91
CUPRIMINE.....	127	DAYPRO.....	80
CUVPOSA.....	55	DAYTRANA.....	70
CUVRIOR.....	127	DAYVIGO.....	69
CVS ADVANCED GLUCOSE METE.....	119	DDAVP.....	33
CVS COVID-19 AT HOME TEST.....	119	<b>deferasirox granules packet 90 mg, 180 mg, 360 mg</b>	
CVS GLUCOSE METER TEST ST.....	119	<b>(Jadenu sprinkle).....</b>	<b>117</b>
<b>cyanocobalamin inj 1000 mcg/ml.....</b>	<b>98</b>	<b>deferasirox tab for oral susp 125 mg, 250 mg, 500 mg</b>	
<b>cyanocobalamin nasal spray 500 mcg/0.1ml</b>		<b>(Exjade).....</b>	<b>117</b>
<b>(Nascobal).....</b>	<b>98</b>	<b>deferasirox tab 90 mg, 180 mg, 360 mg (Jadenu).....</b>	<b>117</b>
<b>cyclobenzaprine hcl cap er 24hr 15 mg, 30 mg</b>		<b>deferiprone tab 500 mg, 1000 mg (Ferriprox).....</b>	<b>117</b>
<b>(Amrix).....</b>	<b>92</b>	DELESTROGEN.....	22
<b>cyclobenzaprine hcl tab 7.5 mg.....</b>	<b>92</b>	DELSTRIGO.....	5
<b>cyclobenzaprine hcl tab 5 mg, 10 mg.....</b>	<b>92</b>	DELZICOL.....	59

demeclocycline hcl tab 150 mg, 300 mg.....	2	dexamethasone tab therapy pack 1.5 mg (21).....	20
DEMSEER.....	41	DEXCOM G6 RECEIVER.....	125
DENAVIR.....	111	DEXCOM G7 RECEIVER.....	125
DEPAKOTE.....	86	DEXCOM G6 SENSOR.....	125
DEPAKOTE ER.....	86	DEXCOM G7 SENSOR.....	125
DEPAKOTE SPRINKLES.....	86	DEXCOM G6 TRANSMITTER.....	125
DEPEN TITRATABS.....	127	DEXEDRINE.....	70
DEPO-ESTRADIOL.....	22	DEXILANT.....	55
DEPO-PROVERA CONTRACEPTIV.....	23	<b>dexlansoprazole cap delayed release 30 mg, 60 mg</b>	
DEPO-SUBQ PROVERA 104.....	23	(Dexilant).....	55
DERMACINRX PRETRATE.....	93	<b>dexmethylphenidate hcl cap er 24 hr 5 mg, 10 mg, 15</b>	
DERMA-SMOOTH/FS BODY.....	111	<b>mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg (Focalin</b>	
DERMA-SMOOTH/FS SCALP.....	111	<b>xr).....</b>	70
DERMOTIC.....	107	<b>dexmethylphenidate hcl tab 2.5 mg, 5 mg, 10 mg</b>	
DESCOVY.....	5	(Focalin).....	70
<b>desipramine hcl tab 50 mg, 75 mg, 100 mg, 150</b>		<b>dextroamphetamine sulfate cap er 24hr 5 mg.....</b>	70
<b>mg.....</b>	64	<b>dextroamphetamine sulfate cap er 24hr 10 mg, 15 mg</b>	
<b>desipramine hcl tab 10 mg, 25 mg (Norpramin).....</b>	64	(Dexedrine).....	70
DESLORATADINE ODT.....	49	<b>dextroamphetamine sulfate oral solution 5</b>	
<b>desloratadine tab 5 mg (Clarinet).....</b>	49	<b>mg/5ml.....</b>	70
<b>desmopressin acetate inj 4 mcg/ml (Ddvp).....</b>	33	<b>dextroamphetamine sulfate tab 2.5 mg.....</b>	70
<b>desmopressin acetate nasal spray soln 0.01%</b>		<b>dextroamphetamine sulfate tab 5 mg, 10 mg.....</b>	70
<b>(refrigerated), 0.01%.....</b>	33	<b>dextroamphetamine sulfate tab 7.5 mg, 15 mg, 20 mg,</b>	
<b>desmopressin acetate preservative free (pf) inj 4 mcg/</b>		<b>30 mg.....</b>	70
<b>ml (Ddvp).....</b>	33	DHIVY.....	90
<b>desmopressin acetate tab 0.1 mg, 0.2 mg (Ddvp).....</b>	33	DIACOMIT.....	86
<b>desogest-eth estrad &amp; eth estrad tab 0.15-0.02/0.01</b>		DIASTAT ACUDIAL.....	86
<b>mg(21/5) (Mircette).....</b>	23	DIASTIX.....	119
<b>desogestrel &amp; ethinyl estradiol tab 0.15 mg-30</b>		DIATHRIVE+ BLOOD GLUCOSE.....	119
<b>mcg.....</b>	24	DIATHRIVE BLOOD GLUCOSE T.....	119
<b>desonide cream 0.05% (Desowen).....</b>	111	DIATRUE PLUS BLOOD GLUCOS.....	119
<b>desonide gel 0.05%.....</b>	111	<b>diazepam conc 5 mg/ml.....</b>	63
<b>desonide lotion 0.05%.....</b>	111	<b>diazepam oral soln 1 mg/ml.....</b>	63
<b>desonide oint 0.05%.....</b>	111	DIAZEPAM RECTAL GEL.....	86
DESOWEN.....	111	<b>diazepam rectal gel delivery system 20 mg.....</b>	86
<b>desoximetasone cream 0.05% (Topicort).....</b>	111	<b>diazepam rectal gel delivery system 10 mg (Diasat</b>	
<b>desoximetasone cream 0.25% (Topicort).....</b>	111	<b>acudial).....</b>	86
<b>desoximetasone gel 0.05% (Topicort).....</b>	111	<b>diazepam tab 2 mg, 5 mg, 10 mg (Valium).....</b>	63
<b>desoximetasone oint 0.05% (Topicort).....</b>	111	<b>diazoxide susp 50 mg/ml (Proglycem).....</b>	26
<b>desoximetasone oint 0.25% (Topicort).....</b>	111	DIBENZYLIN.....	41
<b>desoximetasone spray 0.25% (Topicort).....</b>	112	<b>dichlorphenamide tab 50 mg (Keveyis).....</b>	44
DESOXYN.....	70	DICLEGIS.....	57
DESVENLAFAXINE ER.....	64	DICLOFENAC EPOLAMINE.....	112
<b>desvenlafaxine succinate tab er 24hr 25 mg (base</b>		<b>diclofenac potassium cap 25 mg (Zipsor).....</b>	80
<b>equiv), 50 mg (base equiv), 100 mg (base equiv)</b>		<b>diclofenac potassium (migraine) packet 50 mg</b>	
<b>(Pristiq).....</b>	64	(Cambia).....	84
DETROL.....	60	<b>diclofenac potassium tab 25 mg.....</b>	80
DETROL LA.....	60	<b>diclofenac potassium tab 50 mg.....</b>	80
DEXABLISS.....	20	<b>diclofenac sodium (actinic keratoses) gel 3%.....</b>	112
DEXAMETHASONE.....	20	<b>diclofenac sodium gel 1% (1.16% diethylamine</b>	
DEXAMETHASONE 10-DAY DOSE.....	20	<b>equiv).....</b>	112
DEXAMETHASONE 13-DAY DOSE.....	20	<b>diclofenac sodium ophth soln 0.1%.....</b>	104
<b>dexamethasone elixir 0.5 mg/5ml.....</b>	20	<b>diclofenac sodium soln 1.5%.....</b>	112
DEXAMETHASONE INTENSOL.....	20	<b>diclofenac sodium soln 2% (Pennsaid).....</b>	112
DEXAMETHASONE SODIUM PHOS.....	104	<b>diclofenac sodium tab delayed release 25 mg, 50 mg,</b>	
<b>dexamethasone tab 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2</b>		<b>75 mg.....</b>	80
<b>mg, 4 mg, 6 mg.....</b>	20	<b>diclofenac sodium tab er 24hr 100 mg.....</b>	80

diclofenac w/ misoprostol tab delayed release 50-0.2 mg (Arthrotec 50).....	80	DIURIL.....	44
diclofenac w/ misoprostol tab delayed release 75-0.2 mg (Arthrotec 75).....	80	divalproex sodium cap delayed release sprinkle 125 mg (Depakote sprinkles).....	86
dicloxacillin sodium cap 250 mg, 500 mg.....	1	divalproex sodium tab delayed release 125 mg, 250 mg, 500 mg (Depakote).....	86
dicyclomine hcl cap 10 mg.....	55	divalproex sodium tab er 24 hr 250 mg, 500 mg (Depakote er).....	86
dicyclomine hcl oral soln 10 mg/5ml.....	55	DIVIGEL.....	22
dicyclomine hcl tab 20 mg.....	55	dofetilide cap 125 mcg (0.125 mg), 250 mcg (0.25 mg), 500 mcg (0.5 mg) (Tikosyn).....	39
DIFFERIN.....	112	DOJOLVI.....	97
DIFICID.....	2	donepezil hydrochloride orally disintegrating tab 5 mg, 10 mg.....	73
DIFLORASONE DIACETATE.....	112	donepezil hydrochloride tab 5 mg, 10 mg (Aricept).....	73
diflorasone diacetate oint 0.05%.....	112	donepezil hydrochloride tab 23 mg (Aricept).....	73
DIFLUCAN.....	4	DOPTELET.....	98
diflunisal tab 500 mg.....	76	DORAL.....	69
difluprednate ophth emulsion 0.05% (Durezol).....	104	DORYX.....	2
DIGOXIN.....	36	DORYX MPC.....	2
digoxin oral soln 0.05 mg/ml (Digoxin).....	36	dorzolamide hcl ophth soln 2% (Trusopt).....	104
digoxin tab 125 mcg (0.125 mg), 250 mcg (0.25 mg) (Lanoxin).....	36	dorzolamide hcl-timolol maleate ophth soln 2-0.5% (Cosopt).....	104
digoxin tab 62.5 mcg (0.0625 mg) (Lanoxin).....	36	dorzolamide hcl-timolol maleate pf ophth soln 2-0.5% (Cosopt pf).....	104
dihydroergotamine mesylate inj 1 mg/ml.....	84	DOVATO.....	5
dihydroergotamine mesylate nasal spray 4 mg/ml (Migranal).....	84	doxazosin mesylate tab 1 mg, 2 mg, 4 mg, 8 mg (Cardura).....	41
DILANTIN.....	86	doxepin hcl cap 150 mg.....	64
DILANTIN-125.....	86	doxepin hcl cap 10 mg, 25 mg, 50 mg, 75 mg, 100 mg.....	64
DILANTIN INFATABS.....	86	doxepin hcl conc 10 mg/ml.....	64
DILAUDID.....	77	doxepin hcl cream 5% (Prudoxin).....	112
diltiazem hcl cap er 12hr 60 mg, 90 mg, 120 mg.....	38	doxepin hcl (sleep) tab 3 mg (base equiv), 6 mg (base equiv) (Silenor).....	69
diltiazem hcl cap er 24hr 120 mg, 180 mg, 240 mg.....	38	doxercalciferol cap 0.5 mcg, 1 mcg, 2.5 mcg.....	33
diltiazem hcl coated beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg (Cardizem cd).....	38	DOXYCYCLINE.....	112
diltiazem hcl coated beads cap er 24hr 360 mg (Cardizem cd).....	38	doxycycline hyclate cap 50 mg.....	2
diltiazem hcl extended release beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg (Tiazac).....	38	doxycycline hyclate cap 100 mg (Vibramycin).....	2
diltiazem hcl tab er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg (Cardizem la).....	39	DOXYCYCLINE HYCLATE DR.....	2
diltiazem hcl tab 90 mg.....	39	doxycycline hyclate tab delayed release 75 mg, 100 mg, 150 mg.....	3
diltiazem hcl tab 30 mg, 60 mg, 120 mg (Cardizem).....	39	doxycycline hyclate tab delayed release 50 mg, 200 mg (Doryx).....	2
dimethyl fumarate capsule delayed release 120 mg, 240 mg (Tecfidera).....	73	doxycycline hyclate tab 50 mg.....	3
dimethyl fumarate capsule dr starter pack 120 mg & 240 mg (Tecfidera starter pa).....	73	doxycycline hyclate tab 20 mg, 100 mg.....	3
DIOVAN.....	41	doxycycline hyclate tab 75 mg, 150 mg (Acticlate).....	3
DIOVAN HCT.....	41	doxycycline monohydrate cap 50 mg, 100 mg.....	3
DIPENTUM.....	59	doxycycline monohydrate cap 75 mg, 150 mg.....	3
diphenhydramine hcl elixir 12.5 mg/5ml.....	49	doxycycline monohydrate for susp 25 mg/5ml (Vibramycin).....	3
DIPHENOXYLATE/ATROPINE.....	55	doxycycline monohydrate tab 50 mg, 75 mg, 100 mg, 150 mg.....	3
diphenoxylate w/ atropine tab 2.5-0.025 mg (Lomotil).....	55	doxylamine-pyridoxine tab delayed release 10-10 mg (Diclegis).....	57
DIPROLENE.....	112	DRISDOL.....	93
dipyridamole tab 25 mg, 50 mg, 75 mg.....	101	dronabinol cap 5 mg, 10 mg.....	57
disopyramide phosphate cap 100 mg, 150 mg (Norpace).....	39		
disulfiram tab 250 mg, 500 mg.....	73		

dronabinol cap 2.5 mg (Marinol).....	57	EDLUAR.....	69
drospirenone-ethinyl estradiol tab 3-0.03 mg (Yasmin 28).....	24	EDURANT.....	6
drospirenone-ethinyl estradiol tab 3-0.02 mg (Yaz).....	24	E.E.S. 400.....	2
drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg (Beyaz).....	24	E.E.S. GRANULES.....	2
drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg (Safyral).....	24	efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg.....	6
DROXIA.....	98	efavirenz-lamivudine-tenofovir df tab 600-300-300 mg (Symfi).....	6
droxidopa cap 100 mg, 200 mg, 300 mg (Northera).....	44	efavirenz-lamivudine-tenofovir df tab 400-300-300 mg (Symfi lo).....	6
DUAKLIR PRESSAIR.....	52	efavirenz tab 600 mg (Sustiva).....	6
DUAVEE.....	22	EFFEXOR XR.....	64
DUETACT.....	26	EFFIENT.....	101
DUET DHA 400.....	93	EFUDEX.....	112
DUEXIS.....	81	ELEMENT COMPACT TEST STRI.....	120
DULERA.....	52	ELEMENT TEST STRIPS.....	120
duloxetine hcl enteric coated pellets cap 40 mg (base eq).....	64	ELEPSIA XR.....	86
duloxetine hcl enteric coated pellets cap 20 mg (base eq), 30 mg (base eq), 60 mg (base eq) (Cymbalta).....	64	ELESTRIN.....	22
DUOBRII.....	112	eletriptan hydrobromide tab 20 mg (base equivalent), 40 mg (base equivalent) (Relpax).....	84
DUO-CARE TEST STRIPS.....	119	ELIDEL.....	112
DUOPA.....	90	ELIGARD.....	15
DUPIXENT.....	112	ELIQUIS.....	99
DUREZOL.....	104	ELIQUIS STARTER PACK.....	99
dutasteride cap 0.5 mg (Avodart).....	62	ELITE-OB.....	93
dutasteride-tamsulosin hcl cap 0.5-0.4 mg (Jalyn).....	62	ELLA.....	24
DYANAVAL XR.....	70	ELLUME COVID-19 HOME TEST.....	120
DYMISTA.....	49	ELMIRON.....	62
DYRENIUM.....	44	ELOCTATE.....	101
<b>E</b>		ELYXYB.....	84
EASIVENT.....	125	EMBRACE BLOOD GLUCOSE TES.....	120
EASIVENT/MASK-LARGE.....	125	EMBRACE EVO BLOOD GLUCOSE.....	120
EASIVENT/MASK-MEDIUM.....	125	EMBRACE PRO BLOOD GLUCOSE.....	120
EASIVENT/MASK-SMALL.....	125	EMBRACE TALK BLOOD GLUCOS.....	120
EASYGLUCO.....	119	EMBRACE WAVE BLOOD GLUCOS.....	120
EASYMAX TEST STRIPS.....	119	EMCYT.....	15
EASYMAX 15 TEST STRIPS.....	120	EMEND.....	57
EASY PLUS II BLOOD GLUCOS.....	119	EMEND TRIPACK.....	57
EASYPRO BLOOD GLUCOSE TES.....	120	EMFLAZA.....	20
EASYPRO PLUS.....	120	EMGALITY.....	84
EASY STEP TEST STRIPS.....	119	EMPAVELI.....	101
EASY TALK BLOOD GLUCOSE T.....	119	EMSAM.....	64
EASY TALK PLUS II BLOOD G.....	119	emtricitabine caps 200 mg (Emtriva).....	6
EASY TOUCH GLUCOSE TEST S.....	119	emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg, 133-200 mg, 167-250 mg, 200-300 mg (Truvada).....	6
EASY TOUCH HEALTHPRO GLUC.....	119	EMTRIVA.....	6
EASY TRAK BLOOD GLUCOSE T.....	119	EMVERM.....	9
EASY TRAK II BLOOD GLUCOS.....	119	enalapril maleate & hydrochlorothiazide tab 5-12.5 mg.....	41
EC-NAPROSYN.....	81	enalapril maleate & hydrochlorothiazide tab 10-25 mg (Vaseretic).....	41
econazole nitrate cream 1%.....	112	enalapril maleate oral soln 1 mg/ml (Epaned).....	41
ECOZA.....	112	enalapril maleate tab 2.5 mg, 5 mg, 10 mg, 20 mg (Vasotec).....	41
EDARBI.....	41	ENBRACE HR.....	93
EDARBYCLOR.....	41	ENBREL.....	81
EDECRIN.....	44		
EDEX.....	48		

ENBREL MINI.....	81	erythromycin ethylsuccinate for susp 200 mg/5ml (E.e.s. granules).....	2
ENBREL SURECLICK.....	81	erythromycin ethylsuccinate for susp 400 mg/5ml (Eryped 400).....	2
ENCARE.....	61	erythromycin gel 2% (Erygel).....	112
ENDARI.....	98	erythromycin ophth oint 5 mg/gm.....	104
ENDOMETRIN.....	61	erythromycin soln 2%.....	112
ENGERIX-B.....	11	erythromycin tab delayed release 250 mg, 333 mg, 500 mg.....	2
enoxaparin sodium inj 300 mg/3ml (Lovenox).....	99	erythromycin tab 250 mg, 500 mg.....	2
enoxaparin sodium inj soln pref syr 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml, 100 mg/ml, 120 mg/0.8ml, 150 mg/ml (Lovenox).....	99	ESBRIET.....	54
ENSPRYNG.....	128	escitalopram oxalate soln 5 mg/5ml (base equiv).....	64
ENSTILAR.....	112	escitalopram oxalate tab 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv) (Lexapro).....	64
entacapone tab 200 mg (Comtan).....	90	ESGIC.....	76
ENTADFI.....	62	esomeprazole magnesium cap delayed release 20 mg (base eq), 40 mg (base eq) (Nexium).....	56
entecavir tab 0.5 mg, 1 mg (Baraclude).....	6	esomeprazole magnesium for delayed release susp packet 10 mg, 20 mg, 40 mg (Nexium).....	56
ENTRESTO.....	47	ESPEROCT.....	101
ENVARUS XR.....	128	estazolam tab 1 mg, 2 mg.....	69
EPANED.....	41	ESTRACE.....	22
EPCLUSA.....	6	estradiol & norethindrone acetate tab 0.5-0.1 mg.....	22
EPIDIOLEX.....	86	estradiol & norethindrone acetate tab 1-0.5 mg (Activella).....	22
EPIDUO.....	112	estradiol tab 0.5 mg, 1 mg, 2 mg (Estrace).....	22
EPIDUO FORTE.....	112	estradiol td gel 0.25 mg/0.25gm (0.1%), 0.5 mg/0.5gm (0.1%), 0.75 mg/0.75gm (0.1%), 1 mg/gm (0.1%), 1.25 mg/1.25gm (0.1%) (Divigel).....	23
epinastine hcl ophth soln 0.05%.....	104	estradiol td patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr (Vivelle-dot).....	23
EPINEPHRINE.....	44	estradiol td patch weekly 0.025 mg/24hr, 0.0375 mg/24hr (37.5 mcg/24hr), 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr (Climara).....	23
epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000) (Epipen-jr 2-pak).....	44	estradiol vaginal cream 0.1 mg/gm (Estrace).....	61
epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000) (Epipen 2-pak).....	45	estradiol vaginal tab 10 mcg (Vagifem).....	61
EPIPEN-JR 2-PAK.....	45	estradiol valerate im in oil 10 mg/ml, 20 mg/ml, 40 mg/ ml (Delestrogen).....	23
EPIPEN 2-PAK.....	45	ESTRING.....	61
EPIVIR.....	6	ESTROGEL.....	23
eplerenone tab 25 mg, 50 mg (Inspra).....	41	eszopiclone tab 1 mg, 2 mg, 3 mg (Lunesta).....	69
EPOGEN.....	98	ethacrynic acid tab 25 mg (Edecrin).....	44
EPRONTIA.....	86	ethambutol hcl tab 100 mg.....	4
EPSOLAY.....	112	ethambutol hcl tab 400 mg (Myambutol).....	4
EPZICOM.....	6	ethosuximide cap 250 mg (Zarontin).....	87
EQ BLOOD GLUCOSE TEST STR.....	120	ethosuximide soln 250 mg/5ml (Zarontin).....	87
EQ SPACE CHAMBER ANTI-STA.....	125	ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg, 1 mg-50 mcg.....	24
EQUETRO.....	67	etodolac cap 200 mg, 300 mg.....	81
ergocalciferol cap 1.25 mg (50000 unit) (Drisdol).....	93	etodolac tab er 24hr 400 mg, 500 mg, 600 mg.....	81
ERGOMAR.....	84	etodolac tab 500 mg.....	81
ergotamine w/ caffeine tab 1-100 mg (Cafergot).....	84	etodolac tab 400 mg (Lodine).....	81
ERIVEDGE.....	15	ETOPOSIDE.....	15
ERLEADA.....	15	etravirine tab 100 mg, 200 mg (Intelligence).....	6
erlotinib hcl tab 25 mg (base equivalent), 100 mg (base equivalent), 150 mg (base equivalent) (Tarceva).....	15	EUCRISA.....	112
ERMEZA.....	31	EUFLEXXA.....	92
ERTACZO.....	112		
ERY.....	112		
ERYGEL.....	112		
ERYPED 200.....	2		
ERYPED 400.....	2		
ERYTHROCIN STEARATE.....	2		
ERYTHROMYCIN.....	2		
ERYTHROMYCIN ETHYLSUCCINA.....	2		

EULEXIN.....	15	<b>fenofibrate micronized cap 67 mg, 134 mg, 200 mg.....</b>	<b>46</b>
EVAMIST.....	23	<b>fenofibrate tab 54 mg, 160 mg.....</b>	<b>46</b>
EVEKEO.....	70	<b>fenofibrate tab 40 mg, 120 mg (Fenoglide).....</b>	<b>46</b>
EVEKEO ODT.....	70	<b>fenofibrate tab 48 mg, 145 mg (Tricor).....</b>	<b>46</b>
EVENCARE BLOOD GLUCOSE TE.....	120	FENOFIBRIC ACID.....	46
<b>everolimus tab for oral susp 2 mg, 3 mg, 5 mg (Afinitor disperz).....</b>	<b>15</b>	FENOGLIDE.....	46
<b>everolimus tab 2.5 mg, 5 mg, 7.5 mg, 10 mg (Afinitor).....</b>	<b>15</b>	FENOPROFEN CALCIUM.....	81
<b>everolimus tab 0.25 mg, 0.5 mg, 0.75 mg, 1 mg (Zortress).....</b>	<b>128</b>	<b>fenopropfen calcium cap 400 mg (Nalfon).....</b>	<b>81</b>
EVISTA.....	33	<b>fenopropfen calcium tab 600 mg (Nalfon).....</b>	<b>81</b>
EVOLUTION AUTOCODE.....	120	FENTANYL CITRATE.....	77
EVOTAZ.....	6	<b>fantanyl citrate lozenge on a handle 200 mcg, 400 mcg, 600 mcg, 800 mcg, 1200 mcg, 1600 mcg (Actiq).....</b>	<b>77</b>
EVOXAC.....	107	<b>fantanyl td patch 72hr 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr.....</b>	<b>77</b>
EVRYSDI.....	91	<b>fantanyl td patch 72hr 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr, 100 mcg/hr.....</b>	<b>77</b>
EXELDERM.....	112	FENTORA.....	77
EXELON.....	73	FERRIPROX.....	117
<b>exemestane tab 25 mg (Aromasin).....</b>	<b>15</b>	FERRIPROX TWICE-A-DAY.....	117
EXFORGE.....	41	<b>ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe), 220 mg/5ml (44 mg/5ml elemental fe), 300 mg/5ml (60 mg/5ml elemental fe).....</b>	<b>98</b>
EXFORGE HCT.....	42	<b>fesoterodine fumarate tab er 24hr 4 mg, 8 mg (Toviaz).....</b>	<b>60</b>
EXJADE.....	117	FETZIMA.....	64
EXKIVITY.....	15	FETZIMA TITRATION PACK.....	64
EXSERVAN.....	91	FIASP.....	28
EXTAVIA.....	73	FIASP FLEXTOUCH.....	28
EYSUVIS.....	104	FIASP PENFILL.....	28
EZALLOR SPRINKLE.....	45	FIBRICOR.....	46
EZETIMIBE/ROSUVASTATIN.....	45	FIBRYGA.....	101
<b>ezetimibe-simvastatin tab 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg (Vytorin).....</b>	<b>45</b>	FIFTY50 GLUCOSE TEST STRI.....	120
<b>ezetimibe tab 10 mg (Zetia).....</b>	<b>45</b>	FILSPARI.....	62
<b>F</b>		FINACEA.....	112
FABIOR.....	112	<b>finasteride tab 5 mg (Proscar).....</b>	<b>62</b>
<b>famciclovir tab 125 mg, 250 mg, 500 mg.....</b>	<b>6</b>	<b>ingolimod hcl cap 0.5 mg (base equiv) (Gilenya).....</b>	<b>73</b>
<b>famotidine for susp 40 mg/5ml.....</b>	<b>56</b>	FINTEPLA.....	87
<b>famotidine tab 20 mg, 40 mg (Pepcid).....</b>	<b>56</b>	FIORICET.....	76
FANAPT.....	67	FIORICET/CODEINE.....	77
FANAPT TITRATION PACK.....	67	FIRAZYR.....	101
FARESTON.....	15	FIRDAPSE.....	92
FARXIGA.....	26	FIRMAGON.....	15
FASENRA PEN.....	52	FIRVANQ.....	10
FASTEP COVID-19 ANTIGEN H.....	120	FLAGYL.....	10
FC2 FEMALE CONDOM.....	125	FLAREX.....	104
<b>febuxostat tab 40 mg, 80 mg (Uloric).....</b>	<b>85</b>	<b>flecainide acetate tab 50 mg, 100 mg, 150 mg.....</b>	<b>39</b>
FEIBA.....	101	FLECTOR.....	112
<b>felbamate susp 600 mg/5ml (Felbatol).....</b>	<b>87</b>	FLEQSUVY.....	92
<b>felbamate tab 400 mg, 600 mg (Felbatol).....</b>	<b>87</b>	FLEXICHAMBER.....	125
FELBATOL.....	87	FLEXICHAMBER ADULT MASK/S.....	125
FELDENE.....	81	FLEXICHAMBER CHILD MASK/L.....	125
<b>felodipine tab er 24hr 2.5 mg, 5 mg, 10 mg.....</b>	<b>39</b>	FLEXICHAMBER CHILD MASK/S.....	125
FEMARA.....	15	FLOLIPID.....	46
FEMCAP.....	125	FLOMAX.....	62
FEMRING.....	61	FLORIVA.....	97
FENOFIBRATE.....	45		
<b>fenofibrate micronized cap 43 mg, 130 mg.....</b>	<b>45</b>		

FLOWFLEX COVID-19 ANTIGEN.....	120	fluticasone-salmeterol aer powder ba 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act (Advair diskus).....	52
FLUAD QUADRIVALENT 2023-2.....	11	fluvastatin sodium cap 20 mg (base equivalent), 40 mg (base equivalent).....	46
FLUARIX QUADRIVALENT 2023.....	11	fluvastatin sodium tab er 24 hr 80 mg (base equivalent) (Lescol xl).....	46
FLUBLOK QUADRIVALENT 2023.....	11	fluvoxamine maleate cap er 24hr 100 mg, 150 mg.....	64
FLUCELVAX QUADRIVALENT 20.....	11	fluvoxamine maleate tab 25 mg, 50 mg, 100 mg.....	65
fluconazole for susp 10 mg/ml, 40 mg/ml (Diflucan).....	4	FLUZONE HIGH-DOSE PF 2023.....	11
fluconazole tab 50 mg, 100 mg, 150 mg, 200 mg (Diflucan).....	4	FLUZONE QUADRIVALENT 2023.....	11
flucytosine cap 250 mg, 500 mg (Ancobon).....	4	FML FORTE.....	104
fludrocortisone acetate tab 0.1 mg.....	20	FML LIQUIFILM.....	104
FLULAVAL QUADRIVALENT 202.....	11	FOCALIN.....	70
FLUMIST QUADRIVALENT.....	11	FOCALIN XR.....	71
flunisolide nasal soln 25 mcg/act (0.025%).....	49	folic acid cap 0.8 mg.....	98
FLUOCINOLONE ACETONIDE.....	112	folic acid tab 400 mcg, 800 mcg.....	98
fluocinolone acetate cream 0.025% (Synalar).....	112	folic acid tab 1 mg.....	98
fluocinolone acetate oil 0.01% (body oil) (Derma- smoothe/fs bod).....	112	FOLIVANE-OB.....	93
fluocinolone acetate oil 0.01% (scalp oil) (Derma- smoothe/fs sca).....	112	FOLLISTIM AQ.....	33
fluocinolone acetate oint 0.025% (Synalar).....	113	fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml, 10 mg/0.8ml (Arixtra).....	99
fluocinolone acetate (otic) oil 0.01% (Dermotic).....	107	FORA BLOOD GLUCOSE TEST S.....	120
fluocinolone acetate soln 0.01% (Synalar).....	113	FORACARE GD40.....	120
fluocinonide cream 0.05%.....	113	FORACARE PREMIUM V10 TEST.....	120
fluocinonide cream 0.1% (Vanos).....	113	FORACARE TEST N GO TEST S.....	121
fluocinonide emulsified base cream 0.05%.....	113	FORA 6 CONNECT.....	120
fluocinonide gel 0.05%.....	113	FORA 6 CONNECT/GTEL BLOOD.....	120
fluocinonide oint 0.05%.....	113	FORA D40/G31 BLOOD GLUCOS.....	120
fluocinonide soln 0.05%.....	113	FORA D20 BLOOD GLUCOSE TE.....	120
FLUORIDEX SENSITIVITY REL.....	108	FORA D15G BLOOD GLUCOSE T.....	120
FLUORIMAX 5000 SENSITIVE.....	108	FORA G30/PREMIUM V10 BLOO.....	120
fluorometholone ophth susp 0.1% (Fml liquifilm).....	104	FORA G20 BLOOD GLUCOSE TE.....	120
FLUOROURACIL.....	113	FORA GD50 BLOOD GLUCOSE T.....	120
fluorouracil cream 5% (Efudex).....	113	FORA GD20 TEST STRIPS.....	120
FLUOXETINE DR.....	64	FORA GTEL BLOOD GLUCOSE T.....	120
fluoxetine hcl cap 10 mg, 20 mg, 40 mg (Prozac).....	64	FORA TN'G/TN'G VOICE BLOO.....	120
fluoxetine hcl solution 20 mg/5ml.....	64	FORA TN'G ADVANCE PRO BLO.....	120
fluoxetine hcl tab 10 mg, 20 mg.....	64	FORA V30A BLOOD GLUCOSE T.....	120
fluoxetine hcl tab 60 mg (Fluoxetine hydrochlo).....	64	FORA V10 BLOOD GLUCOSE TE.....	120
FLUOXETINE HYDROCHLORIDE.....	64	FORA V12 BLOOD GLUCOSE TE.....	120
FLUPHENAZINE HCL.....	67	FORA V20 BLOOD GLUCOSE TE.....	120
fluphenazine hcl tab 1 mg, 2.5 mg, 5 mg, 10 mg.....	67	FORFIVO XL.....	65
FLUPHENAZINE HYDROCHLORID.....	67	formoterol fumarate soln nebu 20 mcg/2ml (Perforomist).....	52
flurandrenolide cream 0.05% (Cordran).....	113	FORTEO.....	33
flurandrenolide lotion 0.05% (Cordran).....	113	FORTESTA.....	21
FLURAZEPAM HYDROCHLORIDE.....	69	FORTISCARE BLOOD GLUCOSE.....	121
FLURBIPROFEN.....	81	FORTISCARE G1 BLOOD GLUCO.....	121
FLURBIPROFEN SODIUM.....	104	FOSAMAX.....	33
flurbiprofen tab 100 mg.....	81	FOSAMAX PLUS D.....	33
FLUTICASONE FUROATE/VILAN.....	52	fosamprenavir calcium tab 700 mg (base equiv) (Lexiva).....	6
FLUTICASONE PROPIONATE.....	113	fosfomycin tromethamine powd pack 3 gm (base equivalent) (Monurol).....	10
fluticasone propionate cream 0.05%.....	113	fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg.....	42
FLUTICASONE PROPIONATE HF.....	52	fosinopril sodium tab 10 mg, 20 mg, 40 mg.....	42
fluticasone propionate nasal susp 50 mcg/act.....	49		
fluticasone propionate oint 0.005%.....	113		



FOSRENOL.....	59	GENVOYA.....	6
FOTIVDA.....	15	GEODON.....	67
FRAGMIN.....	99	GHT TEST STRIPS.....	121
FREESTYLE INSULINX BLOOD.....	121	GILENYA.....	73
FREESTYLE LIBRE 2/READER/.....	125	GILOTRIF.....	15
FREESTYLE LIBRE 3/READER/.....	125	GIMOTI.....	59
FREESTYLE LIBRE/READER/FL.....	126	GLASSIA.....	54
FREESTYLE LIBRE 2/SENSOR/.....	125	<b>glatiramer acetate soln prefilled syringe 20 mg/ml, 40</b>	
FREESTYLE LIBRE 3/SENSOR/.....	125	<b>mg/ml (Copaxone).....</b>	<b>73</b>
FREESTYLE LIBRE 14 DAY/RE.....	125	GLEEVEC.....	16
FREESTYLE LIBRE 14 DAY/SE.....	125	GLEOSTINE.....	16
FREESTYLE LITE TEST STRIP.....	121	<b>glimepiride tab 1 mg, 2 mg, 4 mg (Amaryl).....</b>	<b>26</b>
FREESTYLE PRECISION NEO B.....	121	GLIPIZIDE.....	26
FREESTYLE TEST STRIPS.....	121	<b>glipizide-metformin hcl tab 2.5-250 mg, 2.5-500 mg,</b>	
FROVA.....	84	<b>5-500 mg.....</b>	<b>26</b>
<b>frovatriptan succinate tab 2.5 mg (base equivalent)</b>		<b>glipizide tab er 24hr 2.5 mg, 5 mg, 10 mg (Glucotrol</b>	
<b>(Frova).....</b>	<b>84</b>	<b>xl).....</b>	<b>26</b>
FULPHILA.....	98	<b>glipizide tab 5 mg, 10 mg.....</b>	<b>26</b>
FUROSCIX.....	44	GLUCAGEN HYPOKIT.....	26
FUROSEMIDE.....	44	GLUCAGON EMERGENCY KIT FO.....	26
<b>furosemide oral soln 10 mg/ml.....</b>	<b>44</b>	GLUCOCARD EXPRESSION BLOO.....	121
<b>furosemide tab 20 mg, 40 mg, 80 mg (Lasix).....</b>	<b>44</b>	GLUCOCARD 01 SENSOR PLUS.....	121
FUZEON.....	6	GLUCOCARD SHINE TEST STRI.....	121
FYLNETRA.....	98	GLUCOCARD VITAL TEST STRI.....	121
<b>G</b>			
<b>gabapentin cap 100 mg, 300 mg, 400 mg</b>		GLUCOCARD X-SENSOR.....	121
<b>(Neurontin).....</b>	<b>87</b>	GLUCOCOM TEST STRIPS.....	121
<b>gabapentin oral soln 250 mg/5ml (Neurontin).....</b>	<b>87</b>	GLUCONAVII BLOOD GLUCOSE.....	121
<b>gabapentin tab 600 mg, 800 mg (Neurontin).....</b>	<b>87</b>	GLUCO PERFECT 3 TEST STRI.....	121
GALAFOLD.....	33	GLUCOSE METER TEST STRIPS.....	121
GALANTAMINE HYDROBROMIDE.....	73	GLUCOTROL XL.....	26
<b>galantamine hydrobromide cap er 24hr 8 mg, 16 mg,</b>		GLUMETZA.....	26
<b>24 mg (Razadyne er).....</b>	<b>73</b>	<b>glyburide-metformin tab 1.25-250 mg, 2.5-500 mg,</b>	
<b>galantamine hydrobromide tab 4 mg, 8 mg, 12 mg.....</b>	<b>73</b>	<b>5-500 mg.....</b>	<b>26</b>
GALZIN.....	97	GLYBURIDE MICRONIZED.....	26
GANIRELIX ACETATE.....	33	<b>glyburide tab 1.25 mg, 2.5 mg, 5 mg.....</b>	<b>26</b>
<b>ganirelix acetate soln prefilled syringe 250 mcg/0.5ml</b>		GLYCAT.....	56
<b>(Ganirelix acetate).....</b>	<b>33</b>	GLYCOPYRROLATE.....	56
GARDASIL 9.....	11	<b>glycopyrrolate oral soln 1 mg/5ml (Cuvposa).....</b>	<b>56</b>
GASTROCROM.....	59	<b>glycopyrrolate tab 1 mg (Robinul).....</b>	<b>56</b>
<b>gatifloxacin ophth soln 0.5% (Zymaxid).....</b>	<b>105</b>	<b>glycopyrrolate tab 2 mg (Robinul forte).....</b>	<b>56</b>
GATTEX.....	59	GLYXAMBI.....	26
GAVILYTE-C.....	54	GNP EASY TOUCH GLUCOSE TE.....	121
GAVRETO.....	15	GNP TRUE METRIX SELF MONI.....	121
GE100 BLOOD GLUCOSE TEST.....	121	GNP TRUETRACK BLOOD GLUCO.....	121
<b>gefitinib tab 250 mg (Iressa).....</b>	<b>15</b>	GNP TRUETRACK SMART SYSTE.....	121
GELNIQUE.....	60	GOCOVRI.....	90
<b>gemfibrozil tab 600 mg (Lopid).....</b>	<b>46</b>	GOJJI BLOOD GLUCOSE TEST.....	121
GEMTESA.....	60	GOLYTELY.....	55
GENABIO COVID-19 RAPID SE.....	121	GONAL-F.....	33
GENOTROPIN.....	33	GONAL-F RFF.....	33
GENOTROPIN MINIQUICK.....	33	GONAL-F RFF REDIJECT.....	33
<b>gentamicin sulfate cream 0.1%.....</b>	<b>113</b>	GOODSENSE PREMIUM BLOOD G.....	121
<b>gentamicin sulfate oint 0.1%.....</b>	<b>113</b>	GOTOKNOW COVID-19 ANTIGEN.....	121
<b>gentamicin sulfate ophth soln 0.3%.....</b>	<b>105</b>	GRALISE.....	73
GENULTIMATE TEST STRIPS.....	121	<b>granisetron hcl tab 1 mg.....</b>	<b>57</b>
		GRANIX.....	98
		GRASTEK.....	13

griseofulvin microsize susp 125 mg/5ml.....	4	HUMIRA PEN-CD/UC/HS START.....	81
griseofulvin microsize tab 500 mg.....	4	HUMIRA PEN-PEDIATRIC UC S.....	81
griseofulvin ultramicrosize tab 125 mg, 250 mg.....	4	HUMIRA PEN-PS/UV STARTER.....	81
guanfacine hcl tab er 24hr 1 mg (base equiv), 2 mg (base equiv), 3 mg (base equiv), 4 mg (base equiv) (Intuniv).....	71	HUMULIN 70/30.....	30
guanfacine hcl tab 1 mg, 2 mg.....	42	HUMULIN 70/30 KWIKPEN.....	30
GVOKE HYOPEN 1-PACK.....	26	HUMULIN N.....	30
GVOKE HYOPEN 2-PACK.....	26	HUMULIN N KWIKPEN.....	30
GVOKE KIT.....	26	HUMULIN R.....	29
GVOKE PFS.....	26	HUMULIN R U-500 (CONCENTR.....	29
GYNAZOLE-1.....	61	HUMULIN R U-500 KWIKPEN.....	29
<b>H</b>		HW EMBRACE PRO BLOOD GLUC.....	121
HADLIMA.....	81	HW EMBRACE TALK BLOOD GLU.....	121
HADLIMA PUSH TOUCH.....	81	HYCANTIN.....	16
HAEGARDA.....	101	HYCODAN.....	50
halcinonide cream 0.1% (Halog).....	113	<b>hydralazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg.....</b>	<b>42</b>
halobetasol propionate cream 0.05%.....	113	HYDREA.....	16
halobetasol propionate foam 0.05% (Lexette).....	113	<b>hydrochlorothiazide cap 12.5 mg.....</b>	<b>44</b>
halobetasol propionate oint 0.05%.....	113	<b>hydrochlorothiazide tab 12.5 mg, 25 mg, 50 mg.....</b>	<b>44</b>
HALOG.....	113	HYDROCODONE/IBUPROFEN.....	77
haloperidol lactate oral conc 2 mg/ml.....	67	<b>hydrocodone-acetaminophen soln 7.5-325 mg/15ml.....</b>	<b>77</b>
haloperidol tab 0.5 mg, 1 mg, 2 mg, 5 mg, 10 mg, 20 mg.....	67	<b>hydrocodone-acetaminophen tab 10-325 mg, 5-325 mg, 7.5-325 mg.....</b>	<b>77</b>
HARVONI.....	6	<b>hydrocodone-acetaminophen tab 5-300 mg, 7.5-300 mg, 10-300 mg.....</b>	<b>77</b>
HAVRIX.....	12	<b>hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg (Hycodan).....</b>	<b>50</b>
HELIDAC THERAPY.....	56	<b>hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml (Hycodan).....</b>	<b>50</b>
HEMADY.....	20	HYDROCODONE BITARTRATE ER.....	77
HEMANGEOL.....	37	<b>hydrocodone bitartrate tab er 24hr deter 20 mg, 30 mg, 40 mg, 60 mg, 80 mg, 100 mg, 120 mg (Hysingla er).....</b>	<b>77</b>
HEMLIBRA.....	101	<b>hydrocodone-ibuprofen tab 7.5-200 mg.....</b>	<b>77</b>
HEMOFIL M.....	101	HYDROCODONE POLISTIREX/CH.....	50
HEPARIN SODIUM.....	100	HYDROCORTISONE/ACETIC ACI.....	107
<b>heparin sodium (porcine) inj 1000 unit/ml, 5000 unit/ ml, 10000 unit/ml, 20000 unit/ml.....</b>	<b>100</b>	HYDROCORTISONE ACETATE/PR.....	108
<b>heparin sodium (porcine) pf inj 5000 unit/0.5ml.....</b>	<b>100</b>	<b>hydrocortisone acetate suppos 25 mg.....</b>	<b>108</b>
HEPLISAV-B.....	12	HYDROCORTISONE BUTYRATE.....	113
HETLIOZ.....	69	HYDROCORTISONE BUTYRATE (.....	113
HETLIOZ LQ.....	69	<b>hydrocortisone butyrate lotion 0.1% (Locoid).....</b>	<b>113</b>
HIBERIX.....	12	<b>hydrocortisone butyrate oint 0.1%.....</b>	<b>113</b>
HIPREX.....	10	<b>hydrocortisone cream 1%.....</b>	<b>113</b>
HORIZANT.....	73	<b>hydrocortisone cream 2.5%.....</b>	<b>113</b>
HULIO.....	81	<b>hydrocortisone enema 100 mg/60ml (Cortenema).....</b>	<b>108</b>
HUMALOG.....	28	<b>hydrocortisone lotion 2.5%.....</b>	<b>113</b>
HUMALOG JUNIOR KWIKPEN.....	29	<b>hydrocortisone oint 1%.....</b>	<b>113</b>
HUMALOG KWIKPEN.....	29	<b>hydrocortisone oint 2.5%.....</b>	<b>113</b>
HUMALOG MIX 50/50.....	30	<b>hydrocortisone perianal cream 2.5% (Anusol-hc)....</b>	<b>108</b>
HUMALOG MIX 75/25.....	30	<b>hydrocortisone perianal cream 1% (Proctocort).....</b>	<b>108</b>
HUMALOG MIX 50/50 KWIKPEN.....	30	<b>hydrocortisone tab 5 mg, 10 mg, 20 mg (Cortef).....</b>	<b>20</b>
HUMALOG MIX 75/25 KWIKPEN.....	30	<b>hydrocortisone valerate cream 0.2%.....</b>	<b>113</b>
HUMALOG TEMPO PEN.....	29	<b>hydrocortisone valerate oint 0.2%.....</b>	<b>113</b>
HUMATE-P.....	101	<b>hydromorphone hcl liqd 1 mg/ml (Dilaudid).....</b>	<b>77</b>
HUMATIN.....	4	<b>hydromorphone hcl tab er 24hr 8 mg, 12 mg, 16 mg, 32 mg.....</b>	<b>77</b>
HUMATROPE.....	33		
HUMIRA.....	81		
HUMIRA PEDIATRIC CROHNS D.....	81		
HUMIRA PEN.....	81		

hydromorphone hcl tab 2 mg, 4 mg, 8 mg (Dilaudid).....	78	INATAL GT.....	93
HYDROXOCOBALAMIN.....	98	INBRIJA.....	90
hydroxychloroquine sulfate tab 100 mg, 300 mg, 400 mg.....	9	INCRELEX.....	34
hydroxychloroquine sulfate tab 200 mg (Plaquenil).....	9	INCRUSE ELLIPTA.....	52
hydroxyurea cap 500 mg (Hydrea).....	16	indapamide tab 1.25 mg, 2.5 mg.....	44
hydroxyzine hcl syrup 10 mg/5ml.....	63	INDERAL LA.....	37
hydroxyzine hcl tab 10 mg, 25 mg, 50 mg.....	63	INDERAL XL.....	37
HYDROXYZINE PAMOATE.....	63	INDICAID COVID-19 RAPID A.....	121
hydroxyzine pamoate cap 25 mg, 50 mg (Vistaril).....	63	INDOCIN.....	82
HYFTOR.....	113	indomethacin cap er 75 mg.....	82
HYPERSAL.....	50	indomethacin cap 25 mg, 50 mg.....	82
HYRIMOZ.....	81	indomethacin suppos 50 mg.....	82
HYRIMOZ CROHN'S DISEASE A.....	82	INFANRIX.....	13
HYRIMOZ PEDIATRIC CROHN'S.....	82	INFINITY BLOOD GLUCOSE TE.....	121
HYRIMOZ PEDIATRIC CROHN'S.....	82	INFINITY VOICE.....	121
HYRIMOZ PLAQUE PSORIASIS.....	82	INGREZZA.....	73
HYRIMOZ SENSOREADY PENS.....	82	INLYTA.....	16
HYSINGLA ER.....	78	INNOPRAN XL.....	37
HYZAAR.....	42	INPEFA.....	47
<b>I</b>		INQOVI.....	16
ibandronate sodium tab 150 mg (base equivalent).....	34	INREBIC.....	16
IBRANCE.....	16	INSPIREASE DRUG DELIVERY.....	126
IBSRELA.....	59	INSPIREASE RESERVOIR BAGS.....	126
ibuprofen-famotidine tab 800-26.6 mg (Duexis).....	82	INSPRA.....	42
ibuprofen susp 100 mg/5ml.....	82	INSULIN ASPART.....	29
ibuprofen tab 400 mg, 600 mg, 800 mg.....	82	INSULIN ASPART FLEXPEN.....	29
icatibant acetate subcutaneous soln pref syr 30 mg/3ml (Firazyr).....	101	INSULIN ASPART PENFILL.....	29
ICLUSIG.....	16	INSULIN ASPART PROTAMINE/.....	30
IDACIO.....	82	INSULIN DEGLUDEC.....	30
IDACIO STARTER PACKAGE FO.....	82	INSULIN DEGLUDEC FLEXTOUC.....	31
IDELVION.....	101	INSULIN GLARGINE-YFGN.....	31
IDHIFA.....	16	INSULIN LISPRO.....	29
IGLUCOSE BLOOD GLUCOSE TE.....	121	INSULIN LISPRO JUNIOR KWI.....	29
IHEALTH COVID-19 ANTIGEN.....	121	INSULIN LISPRO KWIKPEN.....	29
ILEVRO.....	105	INSULIN LISPRO PROTAMINE/.....	30
imatinib mesylate tab 100 mg (base equivalent), 400 mg (base equivalent) (Gleevec).....	16	INSULIN PEN NEEDLES – VARIOUS.....	126
IMBRUVICA.....	16	INSULIN SYRINGES – VARIOUS.....	126
IMCIVREE.....	71	INTELENCE.....	6
imipramine hcl tab 10 mg, 25 mg, 50 mg.....	65	INTELISWAB COVID-19 RAPID.....	121
imipramine pamoate cap 75 mg, 100 mg, 125 mg, 150 mg.....	65	IN TOUCH BLOOD GLUCOSE TE.....	121
imiquimod cream 5%.....	113	INTRAROSA.....	61
imiquimod cream 3.75% (Zyclara).....	113	INTUNIV.....	71
IMITREX.....	84	INVEGA.....	67
IMITREX STATDOSE REFILL.....	84	INVELTYS.....	105
IMITREX STATDOSE SYSTEM.....	84	INVOKAMET.....	26
IMOVAX RABIES (H.D.C.V.).....	12	INVOKAMET XR.....	26
IMPAVIDO.....	10	INVOKANA.....	27
IMPOYZ.....	113	IOPIDINE.....	105
IMURAN.....	128	IPOL INACTIVATED IPV.....	12
IMVEXXY MAINTENANCE PACK.....	61	ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml.....	52
IMVEXXY STARTER PACK.....	61	ipratropium bromide inhal soln 0.02%.....	52
		ipratropium bromide nasal soln 0.03% (21 mcg/spray), 0.06% (42 mcg/spray).....	49
		irbesartan-hydrochlorothiazide tab 150-12.5 mg, 300-12.5 mg (Avalide).....	42
		irbesartan tab 75 mg, 150 mg, 300 mg (Avapro).....	42
		IRESSA.....	16

IRON UP.....	98	KENALOG.....	113
ISENTRESS.....	6	KEPPRA.....	87
ISENTRESS HD.....	6	KEPPRA XR.....	87
ISONIAZID.....	4	KERENDIA.....	34
<b>isoniazid syrup 50 mg/5ml.....</b>	<b>4</b>	KERYDIN.....	113
<b>isoniazid tab 300 mg.....</b>	<b>4</b>	KESIMPTA.....	73
ISORDIL TITRADOSE.....	36	<b>ketoconazole cream 2%.....</b>	<b>113</b>
<b>isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg</b>		<b>ketoconazole foam 2% (Extina).....</b>	<b>114</b>
<b>(Bidil).....</b>	<b>47</b>	<b>ketoconazole shampoo 2%.....</b>	<b>114</b>
<b>isosorbide dinitrate tab 10 mg, 20 mg, 30 mg.....</b>	<b>37</b>	<b>ketoconazole tab 200 mg.....</b>	<b>5</b>
<b>isosorbide dinitrate tab 5 mg (Isordil titradose).....</b>	<b>37</b>	KETO-DIASTIX.....	122
<b>isosorbide dinitrate tab 40 mg (Isordil titradose).....</b>	<b>37</b>	KETOPROFEN.....	82
ISOSORBIDE MONONITRATE.....	37	KETOPROFEN ER.....	82
<b>isosorbide mononitrate tab er 24hr 30 mg, 60 mg, 120</b>		<b>ketorolac tromethamine ophth soln 0.5%</b>	
<b>mg.....</b>	<b>37</b>	<b>(Acular).....</b>	<b>105</b>
<b>isotretinoin cap 10 mg, 20 mg, 25 mg, 30 mg, 35 mg,</b>		<b>ketorolac tromethamine ophth soln 0.4% (Acular</b>	
<b>40 mg (Absorica).....</b>	<b>113</b>	<b>Is).....</b>	<b>105</b>
<b>isotretinoin cap 10 mg, 20 mg, 30 mg, 40 mg</b>		<b>ketorolac tromethamine tab 10 mg.....</b>	<b>82</b>
<b>(Absorica).....</b>	<b>113</b>	KETOSTIX.....	122
<b>isradipine cap 2.5 mg, 5 mg.....</b>	<b>39</b>	KEVEYIS.....	44
ISTALOL.....	105	KEVZARA.....	82
ISTURISA.....	34	KINERET.....	82
<b>itraconazole cap 100 mg (Sporanox).....</b>	<b>5</b>	KINRIX.....	13
<b>itraconazole oral soln 10 mg/ml (Sporanox).....</b>	<b>5</b>	KISQALI.....	16
<b>ivermectin tab 3 mg (Stromectol).....</b>	<b>9</b>	KISQALI FEMARA 200 DOSE.....	16
IXINITY.....	101	KISQALI FEMARA 400 DOSE.....	16
IYUZEH.....	105	KISQALI FEMARA 600 DOSE.....	16
<b>J</b>		KITABIS PAK.....	4
JADENU.....	117	KLARON.....	114
JADENU SPRINKLE.....	117	KLISYRI.....	114
JAKAFI.....	16	KLONOPIN.....	87
JALYN.....	62	KLOXXADO.....	117
JANUMET.....	27	KOATE.....	101
JANUMET XR.....	27	KOATE-DVI.....	102
JANUVIA.....	27	KOGENATE FS.....	102
JARDIANCE.....	27	KOMBIGLYZE XR.....	27
JATENZO.....	21	KONVOMEF.....	56
JAYPIRCA.....	16	KORLYM.....	27
JENLIVA PRENATAL/POSTNATA.....	93	KOSELUGO.....	16
JENTADUETO.....	27	KOSHER PRENATAL PLUS IRON.....	93
JENTADUETO XR.....	27	KOVALTRY.....	102
JIVI.....	101	K-PHOS.....	97
JOENJA.....	128	K-PHOS NEUTRAL.....	97
JORNAY PM.....	71	K-PHOS NO 2.....	62
JUBLIA.....	113	KRAZATI.....	16
JULUCA.....	6	KRINTAFEL.....	9
JUXTAPID.....	46	KRISTALOSE.....	55
JYNARQUE.....	34	KROGER BLOOD GLUCOSE TEST.....	122
JYNNEOS.....	12	KROGER HEALTHPRO GLUCOSE.....	122
<b>K</b>		KROGER PREMIUM BLOOD GLUC.....	122
KALETRA.....	6	K-TAB.....	97
KALYDECO.....	54	KUVAN.....	34
KAPSPARGO SPRINKLE.....	37	KYZATREX.....	21
KARBINAL ER.....	49	<b>L</b>	
KATERZIA.....	39	<b>labetalol hcl tab 100 mg, 200 mg, 300 mg.....</b>	<b>38</b>
		<b>lacosamide oral solution 10 mg/ml (Vimpat).....</b>	<b>87</b>

lacosamide tab 50 mg, 100 mg, 150 mg, 200 mg (Vimpat).....	87	latanoprost ophth soln 0.005% (Xalatan).....	105
LACRISERT.....	105	LATUDA.....	67
lactic acid (ammonium lactate) cream 12%.....	114	LEDIPASVIR/SOFOSBUVIR.....	7
lactic acid (ammonium lactate) lotion 12%.....	114	leflunomide tab 10 mg, 20 mg (Arava).....	82
LACTULOSE.....	55	lenalidomide cap 5 mg, 10 mg, 15 mg, 20 mg, 25 mg (Revlimid).....	128
lactulose (encephalopathy) solution 10 gm/15ml.....	59	lenalidomide caps 2.5 mg (Revlimid).....	128
lactulose solution 10 gm/15ml.....	55	LENVIMA 4 MG DAILY DOSE.....	17
LAGEVRIO.....	6	LENVIMA 8 MG DAILY DOSE.....	17
LAMICTAL.....	87	LENVIMA 10 MG DAILY DOSE.....	16
LAMICTAL CHEWABLE DISPERS.....	87	LENVIMA 12MG DAILY DOSE.....	16
LAMICTAL ODT.....	87	LENVIMA 14 MG DAILY DOSE.....	16
LAMICTAL STARTER/NOT TAKI.....	87	LENVIMA 18 MG DAILY DOSE.....	16
LAMICTAL STARTER/TAKING C.....	87	LENVIMA 20 MG DAILY DOSE.....	17
LAMICTAL STARTER/TAKING V.....	87	LENVIMA 24 MG DAILY DOSE.....	17
LAMICTAL XR.....	87	LESCOL XL.....	46
lamivudine oral soln 10 mg/ml (Epivir).....	6	LETAIRIS.....	47
lamivudine tab 150 mg, 300 mg (Epivir).....	6	letrozole tab 2.5 mg (Femara).....	17
lamivudine tab 100 mg (hbv) (Epivir hbv).....	6	leucovorin calcium tab 10 mg.....	17
lamivudine-zidovudine tab 150-300 mg (Combivir).....	7	leucovorin calcium tab 5 mg, 15 mg, 25 mg.....	17
lamotrigine orally disintegrating tab 25 mg, 50 mg, 100 mg, 200 mg (Lamictal odt).....	87	LEUKERAN.....	17
lamotrigine tab chewable dispersible 5 mg, 25 mg (Lamictal chewable di).....	87	LEUKINE.....	98
lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit (Lamictal odt).....	88	LEUPROLIDE ACETATE.....	17
lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit (Lamictal odt).....	88	leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml).....	17
lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit (Lamictal odt).....	88	levabuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv) (Xopenex concentrate).....	52
lamotrigine tab er 24hr 25 mg, 50 mg, 100 mg, 200 mg, 250 mg, 300 mg (Lamictal xr).....	88	levabuterol hcl soln nebu 0.31 mg/3ml (base equiv), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv) (Xopenex).....	52
lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg (Lamictal).....	88	LEVALBUTEROL TARTRATE HFA.....	52
lamotrigine tab 25 mg (42) & 100 mg (7) starter kit (Lamictal starter/not).....	88	LEVAMLODIPINE.....	39
lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit (Lamictal starter/tak).....	88	LEVEMIR.....	31
lamotrigine tab 35 x 25 mg starter kit (Lamictal starter/tak).....	88	LEVEMIR FLEXPEN.....	31
LAMPIT.....	10	levetiracetam oral soln 100 mg/ml (Keppra).....	88
LANCETS – VARIOUS.....	126	levetiracetam tab er 24hr 500 mg, 750 mg (Keppra xr).....	88
LANOXIN.....	36	levetiracetam tab 250 mg, 500 mg, 750 mg, 1000 mg (Keppra).....	88
LANSOPRAZOLE/AMOXICILLIN/.....	56	LEVOBUNOLOL HCL.....	105
lansoprazole cap delayed release 15 mg.....	56	levocarnitine oral soln 1 gm/10ml (10%) (Carnitor).....	34
lansoprazole cap delayed release 30 mg (Prevacid).....	56	levocarnitine tab 330 mg (Carnitor).....	34
lansoprazole tab delayed release orally disintegrating 15 mg, 30 mg (Prevacid solutab).....	56	levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml).....	49
lanthanum carbonate chew tab 500 mg (elemental), 750 mg (elemental), 1000 mg (elemental) (Fosrenol).....	59	levocetirizine dihydrochloride tab 5 mg.....	49
LANTUS.....	31	LEVOFLOXACIN.....	3
LANTUS SOLOSTAR.....	31	levofloxacin tab 250 mg, 500 mg, 750 mg.....	3
lapatinib ditosylate tab 250 mg (base equiv) (Tykerb).....	16	levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg (Quartette).....	24
LASIX.....	44	levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg.....	24
		levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg, 0.15 mg-30 mcg.....	24
		levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg.....	24
		levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg.....	24

levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21) (Balcoltra).....	24	LODINE.....	82
levonorgestrel tab 1.5 mg.....	24	LODOCO.....	47
levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7) (Loseasonique).....	24	LODOSYN.....	90
levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7) (Seasonique).....	24	LOKELMA.....	128
LEVORPHANOL TARTRATE.....	78	LO LOESTRIN FE.....	24
levorphanol tartrate tab 2 mg.....	78	LOMAIRA.....	71
LEVOTHYROXINE SODIUM.....	31	LOMOTIL.....	55
levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg (Synthroid).....	31	LONSURF.....	17
LEXAPRO.....	65	<b>loperamide hcl cap 2 mg.....</b>	<b>55</b>
LEXETTE.....	114	LOPID.....	46
LIALDA.....	59	<b>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml) (Kaletra).....</b>	<b>7</b>
LIBERTY NEXT GENERATION B.....	122	<b>lopinavir-ritonavir tab 100-25 mg, 200-50 mg (Kaletra).....</b>	<b>7</b>
LIBERTY TEST STRIPS.....	122	LOPRESSOR.....	38
LICART.....	114	<b>lorazepam conc 2 mg/ml.....</b>	<b>63</b>
lidocaine hcl gel 2%.....	114	<b>lorazepam tab 0.5 mg, 1 mg, 2 mg (Ativan).....</b>	<b>63</b>
lidocaine hcl soln 4%.....	114	LORBRENA.....	17
lidocaine hcl viscous soln 2%.....	108	LOREEV XR.....	63
lidocaine oint 5%.....	114	<b>losartan potassium &amp; hydrochlorothiazide tab 50-12.5 mg, 100-12.5 mg, 100-25 mg (Hyzaar).....</b>	<b>42</b>
lidocaine patch 5% (Lidoderm).....	114	<b>losartan potassium tab 25 mg, 50 mg, 100 mg (Cozaar).....</b>	<b>42</b>
lidocaine-prilocaine cream 2.5-2.5%.....	114	LOTEMAX.....	105
LIDODERM.....	114	LOTEMAX SM.....	105
linezolid for susp 100 mg/5ml (Zyvox).....	10	LOTENSIN.....	42
linezolid tab 600 mg (Zyvox).....	10	LOTENSIN HCT.....	42
LINZESS.....	59	LOTEPREDNOL ETABONATE.....	105
liothyronine sodium tab 5 mcg, 25 mcg, 50 mcg (Cytomel).....	31	<b>loteprednol etabonate ophth susp 0.5% (Lotemax).....</b>	<b>105</b>
LIPITOR.....	46	LOTREL.....	42
LIPOFEN.....	46	LOTRONEX.....	59
LIQREV.....	47	<b>lovastatin tab 10 mg, 20 mg, 40 mg.....</b>	<b>46</b>
lisdexamfetamine dimesylate cap 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg (Vyvanse).....	71	LOVAZA.....	46
lisdexamfetamine dimesylate chew tab 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg (Vyvanse).....	71	LOVENOX.....	100
lisinopril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg (Zestoretic).....	42	<b>loxapine succinate cap 5 mg, 10 mg, 25 mg, 50 mg.....</b>	<b>67</b>
lisinopril tab 2.5 mg, 5 mg, 10 mg, 20 mg, 30 mg, 40 mg (Zestril).....	42	<b>lubiprostone cap 8 mcg, 24 mcg (Amitiza).....</b>	<b>59</b>
LITFULO.....	114	LUCEMYRA.....	73
LITHIUM.....	67	LULICONAZOLE.....	114
LITHIUM CARBONATE.....	67	LUMAKRAS.....	17
<b>lithium carbonate cap 150 mg, 300 mg, 600 mg (Lithium carbonate).....</b>	<b>67</b>	LUMIGAN.....	105
<b>lithium carbonate tab er 450 mg.....</b>	<b>67</b>	LUMRYZ.....	73
<b>lithium carbonate tab er 300 mg (Lithobid).....</b>	<b>67</b>	LUNESTA.....	69
<b>lithium carbonate tab 300 mg.....</b>	<b>67</b>	LUPKYNIS.....	128
LITHOBID.....	67	LUPRON DEPOT (1-MONTH).....	17
LITHOSTAT.....	62	LUPRON DEPOT (3-MONTH).....	17
LIVALO.....	46	LUPRON DEPOT (4-MONTH).....	17
LIVMARLI.....	59	LUPRON DEPOT (6-MONTH).....	17
LIVTENCITY.....	7	LUPRON DEPOT-PED (1-MONTH).....	34
LOCOID.....	114	LUPRON DEPOT-PED (3-MONTH).....	34
LOCOID LIPOCREAM.....	114	LUPRON DEPOT-PED (6-MONTH).....	34
		<b>lurasidone hcl tab 20 mg, 40 mg, 60 mg, 80 mg, 120 mg (Latuda).....</b>	<b>67</b>
		LUZU.....	114
		LYBALVI.....	74
		LYNPARZA.....	17

LYRICA.....	88	MELPHALAN.....	17
LYRICA CR.....	74	memantine hcl cap er 24hr 7 mg, 14 mg, 21 mg, 28 mg (Namenda xr).....	74
LYSODREN.....	17	memantine hcl oral solution 2 mg/ml.....	74
LYTGOBI.....	17	memantine hcl tab 5 mg, 10 mg (Namenda).....	74
LYUMJEV.....	29	memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack (Namenda titration pa).....	74
LYUMJEV KWIKPEN.....	29	MENACTRA.....	12
LYUMJEV TEMPO PEN.....	29	MENEST.....	23
LYVISPAH.....	92	MENOPUR.....	34
<b>M</b>		MENOSTAR.....	23
MACROBID.....	10	MENQUADFI.....	12
MACRODANTIN.....	10	MENVEO.....	12
mafenide acetate packet for topical soln 5% (50 gm) (Sulfamylon).....	114	MEPRON.....	10
MALARONE.....	9	mercaptapurine tab 50 mg.....	17
malathion lotion 0.5% (Ovide).....	114	mesalamine cap dr 400 mg (Delzicol).....	59
maraviroc tab 150 mg, 300 mg (Selzentry).....	7	mesalamine cap er 24hr 0.375 gm (Apriso).....	59
MARINOL.....	57	mesalamine cap er 500 mg (Pentasa).....	59
MARPLAN.....	65	MESALAMINE DR.....	59
MASK VORTEX/CHILD/FROG.....	126	mesalamine enema 4 gm.....	59
MASK VORTEX/TODDLER/LADY.....	126	mesalamine suppos 1000 mg (Canasa).....	59
MATULANE.....	17	mesalamine tab delayed release 1.2 gm (Lialda).....	59
MAVENCLAD.....	74	MESNEX.....	17
MAVYRET.....	7	MESTINON.....	92
MAXALT.....	84	MESTINON TIMESPAN.....	93
MAXALT-MLT.....	84	metaxalone tab 400 mg, 800 mg.....	92
MAXIDEX.....	105	metformin hcl oral soln 500 mg/5ml (Riomet).....	27
MAXITROL.....	105	metformin hcl tab er 24hr 500 mg, 750 mg.....	27
MAXZIDE.....	44	metformin hcl tab er 24hr modified release 500 mg, 1000 mg (Glumetza).....	27
MAXZIDE-25.....	44	metformin hcl tab er 24hr osmotic 500 mg, 1000 mg.....	27
MAYZENT.....	74	metformin hcl tab 500 mg, 850 mg, 1000 mg.....	27
MAYZENT STARTER PACK.....	74	METFORMIN HYDROCHLORIDE.....	27
meclizine hcl tab 12.5 mg, 25 mg.....	57	METHADONE HCL.....	78
MECLIZINE HYDROCHLORIDE.....	57	methadone hcl conc 10 mg/ml (Methadose).....	78
MECLOFENAMATE SODIUM.....	82	methadone hcl soln 5 mg/5ml, 10 mg/5ml (Methadone hcl).....	78
MEDROL.....	20	methadone hcl tab for oral susp 40 mg.....	78
MEDROL DOSEPAK.....	21	methadone hcl tab 5 mg, 10 mg.....	78
medroxyprogesterone acetate im susp 150 mg/ml (Depo-provera contrac).....	24	METHADOSE.....	78
medroxyprogesterone acetate im susp prefilled syr 150 mg/ml (Depo-provera contrac).....	24	METHADOSE SUGAR-FREE.....	78
medroxyprogesterone acetate tab 2.5 mg, 5 mg, 10 mg (Provera).....	25	methamphetamine hcl tab 5 mg (Desoxyn).....	71
mefenamic acid cap 250 mg.....	82	methazolamide tab 25 mg, 50 mg.....	44
mefloquine hcl tab 250 mg.....	9	methenamine hippurate tab 1 gm (Hiprex).....	10
megestrol acetate susp 40 mg/ml.....	17	methimazole tab 5 mg, 10 mg.....	31
megestrol acetate susp 625 mg/5ml.....	25	METHITEST.....	21
megestrol acetate tab 20 mg, 40 mg.....	17	methocarbamol tab 500 mg, 750 mg.....	92
MEIJER BLOOD GLUCOSE TEST.....	122	METHOTREXATE SODIUM.....	17
MEIJER ESSENTIAL BLOOD GL.....	122	methotrexate sodium for inj 1 gm.....	17
MEIJER TRUETEST BLOOD GLU.....	122	methotrexate sodium inj 50 mg/2ml (25 mg/ml).....	17
MEIJER TRUETRACK BLOOD GL.....	122	methotrexate sodium inj pf 50 mg/2ml (25 mg/ml), 250 mg/10ml (25 mg/ml), 1000 mg/40ml (25 mg/ml).....	17
MEKINIST.....	17	methotrexate sodium tab 2.5 mg (base equiv).....	17
MEKTOVI.....	17	METHOXSALEN.....	114
MELOXICAM.....	82	methscopolamine bromide tab 2.5 mg, 5 mg.....	56
meloxicam cap 5 mg, 10 mg.....	82	methsuximide cap 300 mg (Celontin).....	88
meloxicam tab 7.5 mg, 15 mg.....	82		

METHYLDOPA.....	42	MICARDIS.....	42
methylergonovine maleate tab 0.2 mg.....	32	MICARDIS HCT.....	42
METHYLIN.....	71	MICONAZOLE 3.....	61
methylphenidate hcl cap er 24hr 60 mg (la).....	71	MICONAZOLE NITRATE/ZINC O.....	114
methylphenidate hcl cap er 24hr 10 mg (la), 20 mg (la), 30 mg (la), 40 mg (la) (Ritalin la).....	71	MICROCHAMBER.....	126
methylphenidate hcl cap er 24hr 10 mg (xr), 15 mg (xr), 20 mg (xr), 30 mg (xr), 40 mg (xr), 50 mg (xr), 60 mg (xr) (Aptensio xr).....	71	MICRODOT TEST STRIPS.....	122
methylphenidate hcl cap er 10 mg (cd), 20 mg (cd), 30 mg (cd), 40 mg (cd), 50 mg (cd), 60 mg (cd).....	71	MICRODOT XTRA TEST STRIPS.....	122
methylphenidate hcl chew tab 2.5 mg, 5 mg, 10 mg.....	71	MICROSPACER.....	126
methylphenidate hcl soln 5 mg/5ml, 10 mg/5ml (Methylin).....	71	midodrine hcl tab 2.5 mg, 5 mg, 10 mg.....	45
methylphenidate hcl tab er 24hr 27 mg, 36 mg, 54 mg.....	71	MIEBO.....	105
methylphenidate hcl tab er 10 mg, 20 mg.....	71	MIGERGOT.....	84
methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 36 mg, 54 mg (Concerta).....	71	MIGLITOL.....	27
methylphenidate hcl tab 5 mg, 10 mg, 20 mg (Ritalin).....	71	miglustat cap 100 mg (Zavesca).....	98
METHYLPHENIDATE HYDROCHLO.....	71	MIGRANAL.....	84
methylphenidate td patch 10 mg/9hr, 15 mg/9hr, 20 mg/9hr, 30 mg/9hr (Daytrana).....	71	MINASTRIN 24 FE.....	24
methylprednisolone tab 4 mg, 8 mg, 16 mg, 32 mg (Medrol).....	21	MINIPRESS.....	42
methylprednisolone tab therapy pack 4 mg (21) (Medrol dosepak).....	21	MINIVELLE.....	23
methyltestosterone cap 10 mg.....	21	minocycline hcl cap 50 mg, 75 mg, 100 mg.....	3
metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv).....	59	minocycline hcl tab er 24hr 45 mg, 90 mg, 135 mg.....	3
metoclopramide hcl tab 5 mg (base equivalent), 10 mg (base equivalent) (Reglan).....	59	minocycline hcl tab er 24hr 55 mg, 65 mg, 80 mg, 105 mg, 115 mg (Solodyn).....	3
METOCLOPRAMIDE ODT.....	59	minocycline hcl tab 50 mg, 75 mg, 100 mg.....	3
metolazone tab 2.5 mg, 5 mg, 10 mg.....	44	MINOCYCLINE HYDROCHLORIDE.....	3
metoprolol & hydrochlorothiazide tab 50-25 mg, 100-25 mg, 100-50 mg.....	42	MINOLIRA.....	3
metoprolol succinate tab er 24hr 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv), 200 mg (tartrate equiv) (Toprol xl).....	38	minoxidil tab 2.5 mg, 10 mg.....	42
metoprolol tartrate tab 25 mg.....	38	MIRAPEX ER.....	90
metoprolol tartrate tab 37.5 mg, 75 mg.....	38	MIRCERA.....	98
metoprolol tartrate tab 50 mg, 100 mg (Lopressor).....	38	MIRENA.....	24
METROCREAM.....	114	mirtazapine orally disintegrating tab 15 mg, 30 mg, 45 mg (Remeron soltab).....	65
METROGEL.....	114	mirtazapine tab 7.5 mg, 45 mg.....	65
METROLOTION.....	114	mirtazapine tab 15 mg, 30 mg (Remeron).....	65
metronidazole cap 375 mg (Flagyl).....	10	MIRVASO.....	114
metronidazole cream 0.75% (Metrocream).....	114	MISC NEEDLES AND SYRINGES – VARIOUS.....	126
metronidazole gel 0.75%.....	114	misoprostol tab 100 mcg, 200 mcg (Cytotec).....	56
metronidazole gel 1% (Metrogel).....	114	MITIGARE.....	85
metronidazole lotion 0.75% (Metro lotion).....	114	MITOSOL.....	105
metronidazole tab 250 mg, 500 mg.....	10	MM EASY TOUCH GLUCOSE TES.....	122
metronidazole vaginal gel 0.75%.....	61	M-M-R II.....	12
metyrosine cap 250 mg (Demser).....	42	M-NATAL PLUS.....	94
mexiletine hcl cap 150 mg, 200 mg, 250 mg.....	40	modafinil tab 100 mg, 200 mg (Provigil).....	71
MIACALCIN.....	34	MODERNA COVID-19 VACCINE.....	12
		moexipril hcl tab 7.5 mg, 15 mg.....	42
		MOLINDONE HYDROCHLORIDE.....	67
		mometasone furoate cream 0.1%.....	114
		mometasone furoate nasal susp 50 mcg/act.....	49
		mometasone furoate oint 0.1%.....	114
		mometasone furoate solution 0.1% (lotion).....	114
		montelukast sodium chew tab 4 mg (base equiv), 5 mg (base equiv) (Singulair).....	52
		montelukast sodium oral granules packet 4 mg (base equiv) (Singulair).....	52
		montelukast sodium tab 10 mg (base equiv) (Singulair).....	52
		MORPHINE SULFATE.....	78
		MORPHINE SULFATE ER.....	78
		morphine sulfate oral soln 100 mg/5ml (20 mg/ml).....	78



morphine sulfate tab er 15 mg, 30 mg, 60 mg, 100 mg, 200 mg (Ms contin).....	78	NAPRELAN.....	82
morphine sulfate tab 15 mg, 30 mg (Morphine sulfate).....	78	NAPROSYN.....	82
MOTEGRITY.....	59	naproxen-esomeprazole magnesium tab dr 375-20 mg, 500-20 mg (Vimovo).....	83
MOTOFEN.....	55	naproxen sodium tab er 24hr 375 mg (base equiv), 500 mg (base equiv), 750 mg (base equiv) (Naprelan).....	82
MOUNJARO.....	27	naproxen sodium tab 275 mg.....	82
MOVANTIK.....	60	naproxen sodium tab 550 mg (Anaprox ds).....	83
MOVIPREP.....	55	naproxen susp 125 mg/5ml (Naprosyn).....	83
moxifloxacin hcl ophth soln 0.5% (base equiv) (Vigamox).....	105	naproxen tab ec 375 mg, 500 mg (Ec-naprosyn).....	83
moxifloxacin hcl tab 400 mg (base equiv).....	3	naproxen tab 250 mg, 375 mg.....	83
MOXIFLOXACIN HYDROCHLORID.....	105	naproxen tab 500 mg (Naprosyn).....	83
MS CONTIN.....	78	naratriptan hcl tab 1 mg (base equiv), 2.5 mg (base equiv).....	84
MULPLETA.....	98	NARCAN.....	118
MULTAQ.....	40	NARDIL.....	65
mupirocin calcium cream 2%.....	114	NASCOBAL.....	98
mupirocin oint 2%.....	114	NATACHEW.....	94
MUSE.....	48	NATACYN.....	105
MYALEPT.....	34	NATAL PNV.....	94
MYAMBUTOL.....	4	NATALVIT.....	94
MYCAPSSA.....	34	NATAZIA.....	24
MYCOBUTIN.....	4	nateglinide tab 60 mg, 120 mg.....	27
mycophenolate mofetil cap 250 mg (Cellcept).....	128	NATESTO.....	21
mycophenolate mofetil for oral susp 200 mg/ml (Cellcept).....	128	NATROBA.....	114
mycophenolate mofetil tab 500 mg (Cellcept).....	128	NAYZILAM.....	88
mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv), 360 mg (mycophenolic acid equiv) (Myfortic).....	128	(NDC's starting with 72511 only).....	80
MYDAYIS.....	71	(NDC's starting with 55513 only).....	80
MYFEMBREE.....	23	nebivolol hcl tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent), 20 mg (base equivalent) (Bystolic).....	38
MYFORTIC.....	128	NEBUPENT.....	10
MYGLUCOHEALTH BLOOD GLUCO.....	122	NEEVO DHA.....	94
MYLERAN.....	18	NEOMYCIN/POLYMYXIN/GRAMIC.....	105
MYRBETRIQ.....	61	NEOMYCIN/POLYMYXIN/HYDROC.....	105
MYSOLINE.....	88	neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin.....	105
MYTESI.....	55	neomycin-polymyxin-dexamethasone ophth oint 0.1% (Maxitrol).....	105
<b>N</b>		neomycin-polymyxin-dexamethasone ophth susp 0.1% (Maxitrol).....	105
nabumetone tab 500 mg, 750 mg.....	82	neomycin-polymyxin-hc otic soln 1%.....	107
nadolol tab 20 mg, 40 mg, 80 mg (Corgard).....	38	neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%.....	107
NAFTIFINE HCL.....	114	neomycin sulfate tab 500 mg.....	4
naftifine hcl cream 2%.....	114	NEONATAL 19.....	94
naftifine hcl gel 2% (Naftin).....	114	NEONATAL/DHA.....	94
NAFTIN.....	114	NEONATAL COMPLETE.....	94
NALFON.....	82	NEONATAL FE.....	94
NALOCET.....	78	NEONATAL PLUS.....	94
naloxone hcl inj 0.4 mg/ml, 4 mg/10ml.....	117	NEORAL.....	128
naloxone hcl nasal spray 4 mg/0.1ml (Narcan).....	117	NEO-SYNALAR.....	114
naloxone hcl soln prefilled syringe 2 mg/2ml.....	117	NERLYNX.....	18
NALOXONE HYDROCHLORIDE.....	117	NESTABS.....	94
naltrexone hcl tab 50 mg.....	117	NESTABS DHA.....	94
NAMENDA.....	74	NESTABS ONE.....	94
NAMENDA TITRATION PAK.....	74		
NAMENDA XR.....	74		
NAMZARIC.....	74		

NEULASTA.....	98	NITROLINGUAL.....	37
NEULASTA ONPRO KIT.....	98	NITROSTAT.....	37
NEUPOGEN.....	98	NITRO-TIME.....	37
NEUPRO.....	90	NITYR.....	34
NEURONTIN.....	88	NIVA-PLUS.....	94
NEUTEK 2TEK TEST STRIPS.....	122	NIVA THYROID.....	31
NEVANAC.....	105	NIVESTYM.....	98
NEVIRAPINE.....	7	NIZATIDINE.....	56
<b>nevirapine tab er 24hr 400 mg.....</b>	<b>7</b>	NOC DURNA.....	34
<b>nevirapine tab 200 mg.....</b>	<b>7</b>	NORDITROPIN FLEXPRO.....	34
NEXAVAR.....	18	<b>norelgestromin-ethinyl estradiol td ptwk 150-35</b>	
NEXICLON XR.....	42	<b>mcg/24hr.....</b>	<b>24</b>
NEXIUM.....	56	<b>norethindrone &amp; ethinyl estradiol-fe chew tab 0.4</b>	
NEXLETOL.....	46	<b>mg-35 mcg.....</b>	<b>24</b>
NEXLIZET.....	46	<b>norethindrone &amp; ethinyl estradiol-fe chew tab 0.8</b>	
NEXTSTELLIS.....	24	<b>mg-25 mcg (Generess fe).....</b>	<b>24</b>
NGENLA.....	34	<b>norethindrone &amp; ethinyl estradiol tab 0.4 mg-35 mcg,</b>	
NIACIN.....	46	<b>0.5 mg-35 mcg, 1 mg-35 mcg.....</b>	<b>24</b>
<b>niacin tab er 500 mg (antihyperlipidemic), 750 mg</b>		<b>norethindrone ace &amp; ethinyl estradiol-fe tab 1 mg-20</b>	
<b>(antihyperlipidemic), 1000 mg (antihyperlipidemic)</b>		<b>mcg, 1.5 mg-30 mcg.....</b>	<b>24</b>
<b>(Niaspan).....</b>	<b>46</b>	<b>norethindrone ace &amp; ethinyl estradiol tab 1 mg-20</b>	
NIACOR.....	46	<b>mcg, 1.5 mg-30 mcg.....</b>	<b>24</b>
<b>nicardipine hcl cap 20 mg, 30 mg.....</b>	<b>39</b>	<b>norethindrone ace-eth estradiol-fe chew tab 1 mg-20</b>	
<b>nicotine polacrilex gum 2 mg, 4 mg.....</b>	<b>74</b>	<b>mcg (24) (Minastrin 24 fe).....</b>	<b>25</b>
<b>nicotine polacrilex lozenge 2 mg, 4 mg.....</b>	<b>74</b>	<b>norethindrone ace-ethinyl estradiol-fe cap 1 mg-20</b>	
<b>nicotine td patch 24hr 7 mg/24hr, 14 mg/24hr, 21</b>		<b>mcg (24) (Taytulla).....</b>	<b>25</b>
<b>mg/24hr.....</b>	<b>74</b>	<b>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20</b>	
NICOTINE TRANSDERMAL SYST.....	74	<b>mcg (24).....</b>	<b>25</b>
NICOTROL INHALER.....	74	<b>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5</b>	
NICOTROL NS.....	74	<b>mcg, 1 mg-5 mcg.....</b>	<b>23</b>
<b>nifedipine cap 10 mg, 20 mg.....</b>	<b>39</b>	<b>norethindrone acetate tab 5 mg (Aygestin).....</b>	<b>25</b>
<b>nifedipine tab er 24hr 30 mg, 60 mg, 90 mg.....</b>	<b>39</b>	<b>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35</b>	
<b>nifedipine tab er 24hr osmotic release 30 mg, 60 mg,</b>		<b>mg-mcg.....</b>	<b>24</b>
<b>90 mg (Procardia xl).....</b>	<b>39</b>	<b>norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35</b>	
NILANDRON.....	18	<b>mg-mcg, 0.5-35/1-35/0.5-35 mg-mcg.....</b>	<b>25</b>
<b>nilutamide tab 150 mg (Nilandron).....</b>	<b>18</b>	<b>norethindrone tab 0.35 mg.....</b>	<b>25</b>
<b>nimodipine cap 30 mg.....</b>	<b>39</b>	NORGESIC FORTE.....	92
NINLARO.....	18	<b>norgestimate &amp; ethinyl estradiol tab 0.25 mg-35</b>	
NISOLDIPINE ER.....	39	<b>mcg.....</b>	<b>25</b>
<b>nisoldipine tab er 24hr 8.5 mg, 17 mg, 34 mg</b>		<b>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25</b>	
<b>(Sular).....</b>	<b>39</b>	<b>mg-mcg, 0.18-35/0.215-35/0.25-35 mg-mcg.....</b>	<b>25</b>
<b>nitazoxanide tab 500 mg (Alinia).....</b>	<b>10</b>	<b>norgestrel &amp; ethinyl estradiol tab 0.3 mg-30 mcg.....</b>	<b>25</b>
<b>nitisinone cap 2 mg, 5 mg, 10 mg, 20 mg (Orfadin).....</b>	<b>34</b>	NORITATE.....	114
NITRO-BID.....	37	NORLIQVA.....	39
NITRO-DUR.....	37	NORPACE.....	40
NITROFURANTOIN.....	10	NORPACE CR.....	40
<b>nitrofurantoin macrocrystalline cap 25 mg, 50 mg, 100</b>		NORPRAMIN.....	65
<b>mg (Macrodantin).....</b>	<b>10</b>	NORTHERA.....	45
<b>nitrofurantoin monohydrate macrocrystalline cap 100</b>		<b>nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 75 mg</b>	
<b>mg (Macrobid).....</b>	<b>10</b>	<b>(Pamelor).....</b>	<b>65</b>
<b>nitrofurantoin susp 25 mg/5ml.....</b>	<b>10</b>	<b>nortriptyline hcl soln 10 mg/5ml.....</b>	<b>65</b>
<b>nitroglycerin sl tab 0.3 mg, 0.4 mg, 0.6 mg</b>		NORVASC.....	39
<b>(Nitrostat).....</b>	<b>37</b>	NORVIR.....	7
<b>nitroglycerin td patch 24hr 0.1 mg/hr, 0.2 mg/hr, 0.4</b>		NOURIANZ.....	91
<b>mg/hr, 0.6 mg/hr (Nitro-dur).....</b>	<b>37</b>	NOVAFERRUM PEDIATRIC DROP.....	99
<b>nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)</b>		NOVA MAX GLUCOSE TEST STR.....	122
<b>(Nitrolingual pumpspr).....</b>	<b>37</b>	NOVAREL.....	34

NOVAVAX COVID-19 VACCINE/.....	12
NOVOEIGHT.....	102
NOVOLIN 70/30.....	30
NOVOLIN 70/30 FLEXPEN.....	30
NOVOLIN 70/30 FLEXPEN REL.....	30
NOVOLIN 70/30 RELION.....	30
NOVOLIN N.....	30
NOVOLIN N FLEXPEN.....	30
NOVOLIN N FLEXPEN RELION.....	30
NOVOLIN N RELION.....	30
NOVOLIN R.....	29
NOVOLIN R FLEXPEN.....	29
NOVOLIN R FLEXPEN RELION.....	29
NOVOLIN R RELION.....	29
NOVOLOG.....	29
NOVOLOG FLEXPEN.....	29
NOVOLOG FLEXPEN RELION.....	29
NOVOLOG MIX 70/30.....	30
NOVOLOG MIX 70/30 PREFILL.....	30
NOVOLOG MIX 70/30 RELION.....	30
NOVOLOG PENFILL.....	29
NOVOLOG RELION.....	29
NOVOSEVEN RT.....	102
NOXAFIL.....	5
NP THYROID 15.....	31
NP THYROID 30.....	31
NP THYROID 60.....	32
NP THYROID 90.....	32
NP THYROID 120.....	31
NUBEQA.....	18
NUCALA.....	53
NUCYNTA.....	78
NUCYNTA ER.....	78
NUDEXTA.....	74
NULIBRY.....	34
NUPLAZID.....	67
NURTEC.....	84
NUTROPIN AQ NUSPIN 5.....	34
NUTROPIN AQ NUSPIN 10.....	34
NUTROPIN AQ NUSPIN 20.....	34
NUVARING.....	25
NUVESSA.....	61
NUVIGIL.....	71
NUWIQ.....	102
NUZYRA.....	3
NYMALIZE.....	39
<b>nystatin cream 100000 unit/gm.....</b>	<b>114</b>
<b>nystatin oint 100000 unit/gm.....</b>	<b>114</b>
<b>nystatin susp 100000 unit/ml.....</b>	<b>108</b>
<b>nystatin tab 500000 unit.....</b>	<b>5</b>
<b>nystatin topical powder 100000 unit/gm.....</b>	<b>115</b>
<b>nystatin-triamcinolone cream 100000-0.1 unit/gm- %.....</b>	<b>115</b>
<b>nystatin-triamcinolone oint 100000-0.1 unit/gm- %.....</b>	<b>115</b>
NYVEPRIA.....	99
<b>O</b>	
OB COMPLETE.....	94
OB COMPLETE/DHA.....	94
OB COMPLETE ONE.....	94
OB COMPLETE PETITE.....	94
OB COMPLETE PREMIER.....	94
OBIZUR.....	102
OCALIVA.....	60
OCTREOTIDE ACETATE.....	34
<b>octreotide acetate inj 200 mcg/ml (0.2 mg/ml), 1000 mcg/ml (1 mg/ml).....</b>	<b>35</b>
<b>octreotide acetate inj 50 mcg/ml (0.05 mg/ml), 100 mcg/ml (0.1 mg/ml), 500 mcg/ml (0.5 mg/ml) (Sandostatin).....</b>	<b>34</b>
OCUFLOX.....	105
ODACTRA.....	13
ODEFSEY.....	7
ODOMZO.....	18
OFEV.....	54
OFLOXACIN.....	3
<b>ofloxacin ophth soln 0.3% (Ocuflox).....</b>	<b>105</b>
<b>ofloxacin otic soln 0.3%.....</b>	<b>107</b>
<b>ofloxacin tab 400 mg.....</b>	<b>3</b>
<b>olanzapine-fluoxetine hcl cap 6-50 mg, 12-25 mg, 12-50 mg.....</b>	<b>74</b>
<b>olanzapine-fluoxetine hcl cap 3-25 mg, 6-25 mg (Symbyax).....</b>	<b>74</b>
<b>olanzapine orally disintegrating tab 5 mg, 10 mg, 15 mg, 20 mg (Zyprexa zydis).....</b>	<b>68</b>
<b>olanzapine tab 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg (Zyprexa).....</b>	<b>68</b>
<b>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg, 40-5-12.5 mg, 40-5-25 mg, 40-10-12.5 mg, 40-10-25 mg (Tribenzor).....</b>	<b>42</b>
<b>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg, 40-12.5 mg, 40-25 mg (Benicar hct).....</b>	<b>42</b>
<b>olmesartan medoxomil tab 5 mg, 20 mg, 40 mg (Benicar).....</b>	<b>42</b>
<b>olopatadine hcl nasal soln 0.6% (Patanase).....</b>	<b>49</b>
<b>olopatadine hcl ophth soln 0.1% (base equivalent), 0.2% (base equivalent).....</b>	<b>106</b>
OLPRUVA.....	35
OLUMIANT.....	83
OMECLAMOX-PAK.....	56
<b>omega-3-acid ethyl esters cap 1 gm (Lovaza).....</b>	<b>46</b>
<b>omeprazole cap delayed release 10 mg, 20 mg, 40 mg.....</b>	<b>56</b>
<b>omeprazole-sodium bicarbonate cap 20-1100 mg, 40-1100 mg (Zegerid).....</b>	<b>56</b>
<b>omeprazole-sodium bicarbonate powd pack for susp 20-1680 mg, 40-1680 mg (Zegerid).....</b>	<b>56</b>
OMNARIS.....	50
OMNIFLEX DIAPHRAGM.....	126
OMNIPOD DASH INTRO KIT (G.....	126
OMNIPOD DASH PODS (GEN 4).....	126
OMNIPOD 5 G6 INTRO KIT (G.....	126

OMNIPOD 5 G6 PODS (GEN 5).....	126	<b>oseltamivir phosphate cap 30 mg (base equiv), 45 mg (base equiv), 75 mg (base equiv) (Tamiflu).....</b>	<b>7</b>
OMNITROPE.....	35	<b>oseltamivir phosphate for susp 6 mg/ml (base equiv) (Tamiflu).....</b>	<b>7</b>
ON/GO COVID-19 ANTIGEN SE.....	122	OSMOLEX ER.....	91
ON/GO ONE COVID-19 ANTIGE.....	122	OSPHENA.....	35
ON CALL EXPRESS BLOOD GLU.....	122	OTEZLA.....	83
ONDANSETRON HCL.....	58	OTOVEL.....	107
<b>ondansetron hcl oral soln 4 mg/5ml.....</b>	<b>58</b>	OTREXUP.....	83
<b>ondansetron hcl tab 4 mg, 8 mg.....</b>	<b>58</b>	OVIDE.....	115
<b>ondansetron orally disintegrating tab 4 mg, 8 mg.....</b>	<b>58</b>	OVIDREL.....	35
ONE DROP BLOOD GLUCOSE TE.....	122	<b>oxaprozin tab 600 mg (Daypro).....</b>	<b>83</b>
ONETOUCH ULTRA.....	122	OXAYDO.....	78
ONETOUCH ULTRA 2.....	126	<b>oxazepam cap 10 mg, 15 mg, 30 mg.....</b>	<b>63</b>
ONETOUCH ULTRA CONTROL.....	126	OXBRYTA.....	99
ONETOUCH ULTRA CONTROL SO.....	126	<b>oxcarbazepine susp 300 mg/5ml (60 mg/ml) (Trileptal).....</b>	<b>88</b>
ONETOUCH VERIO FLEX BLOOD.....	126	<b>oxcarbazepine tab 150 mg, 300 mg, 600 mg (Trileptal).....</b>	<b>88</b>
ONETOUCH VERIO LEVEL 3 CO.....	126	OXERVATE.....	106
ONETOUCH VERIO LEVEL 4 CO.....	126	<b>oxiconazole nitrate cream 1% (Oxistat).....</b>	<b>115</b>
ONETOUCH VERIO REFLECT.....	126	OXISTAT.....	115
ONETOUCH VERIO TEST STRIP.....	122	OXTELLAR XR.....	88
ONE VITE WOMENS PRENATAL.....	94	OXYBUTYNYN CHLORIDE.....	61
ONEXTON.....	115	<b>oxybutynin chloride solution 5 mg/5ml.....</b>	<b>61</b>
ONFI.....	88	<b>oxybutynin chloride tab er 24hr 15 mg.....</b>	<b>61</b>
ONGENTYS.....	91	<b>oxybutynin chloride tab er 24hr 5 mg, 10 mg (Ditropan xl).....</b>	<b>61</b>
ONGLYZA.....	27	<b>oxybutynin chloride tab 5 mg.....</b>	<b>61</b>
ONUREG.....	18	OXYCODONE/ACETAMINOPHEN.....	79
ONZETRA XSAIL.....	85	OXYCODONE AND ACETAMINOPH.....	78
OPSUMIT.....	48	<b>oxycodone hcl cap 5 mg.....</b>	<b>78</b>
OPTICHAMBER.....	126	<b>oxycodone hcl conc 100 mg/5ml (20 mg/ml).....</b>	<b>78</b>
OPTICHAMBER DIAMOND.....	126	<b>oxycodone hcl soln 5 mg/5ml.....</b>	<b>78</b>
OPTICHAMBER DIAMOND/LARGE.....	126	<b>oxycodone hcl tab 10 mg, 20 mg.....</b>	<b>78</b>
OPTICHAMBER DIAMOND/MEDIU.....	126	<b>oxycodone hcl tab 5 mg, 15 mg, 30 mg (Roxicodone).....</b>	<b>78</b>
OPTICHAMBER DIAMOND/SMALL.....	126	OXYCODONE HYDROCHLORIDE/A.....	78
OPTIONS GYNOL II VAGINAL.....	62	OXYCODONE HYDROCHLORIDE E.....	78
OPTIUMEZ TEST STRIPS.....	122	<b>oxycodone w/ acetaminophen tab 5-325 mg, 7.5-325 mg, 10-325 mg (Percocet).....</b>	<b>79</b>
OPVEE.....	118	<b>oxycodone w/ acetaminophen tab 2.5-325 mg (Percocet).....</b>	<b>78</b>
OPZELURA.....	115	OXYCONTIN.....	79
ORACEA.....	115	<b>oxymorphone hcl tab 5 mg, 10 mg.....</b>	<b>79</b>
ORALAIR.....	13	OXYMORPHONE HYDROCHLORIDE.....	79
ORAPRED ODT.....	21	OXYTROL.....	61
ORAVIG.....	108	OZEMPIC.....	27
ORENCIA.....	83	<b>P</b>	
ORENCIA CLICKJECT.....	83	PALFORZIA INITIAL DOSE ES.....	13
ORENITRAM.....	48	PALFORZIA LEVEL 1.....	13
ORENITRAM TITRATION KIT M.....	48	PALFORZIA LEVEL 2.....	14
ORFADIN.....	35	PALFORZIA LEVEL 3.....	14
ORGOVYX.....	18	PALFORZIA LEVEL 4.....	14
ORIAHNN.....	23	PALFORZIA LEVEL 5.....	14
ORILISSA.....	35	PALFORZIA LEVEL 6.....	14
ORKAMBI.....	54		
ORLADEYO.....	102		
ORLISTAT.....	71		
<b>orphenadrine citrate tab er 12hr 100 mg.....</b>	<b>92</b>		
<b>orphenadrine w/ aspirin &amp; caffeine tab 25-385-30 mg.....</b>	<b>92</b>		
<b>orphenadrine w/ aspirin &amp; caffeine tab 50-770-60 mg (Norgesic forte).....</b>	<b>92</b>		
ORSERDU.....	18		

PALFORZIA LEVEL 7.....	14	PENTASA.....	60
PALFORZIA LEVEL 8.....	14	<b>pentoxifylline tab er 400 mg.....</b>	<b>102</b>
PALFORZIA LEVEL 9.....	14	PEPCID.....	56
PALFORZIA LEVEL 10.....	13	PERCOCET.....	79
PALFORZIA LEVEL 11 (MAINT.....	14	PERFOROMIST.....	53
PALFORZIA LEVEL 11 (TITRA.....	14	PERIDEX.....	108
<b>paliperidone tab er 24hr 1.5 mg, 3 mg, 6 mg, 9 mg</b>		PERINDOPRIL ERBUMINE.....	42
<b>(Invega).....</b>	<b>68</b>	<b>perindopril erbumine tab 4 mg.....</b>	<b>42</b>
PALYNZIQ.....	35	<b>permethrin cream 5%.....</b>	<b>115</b>
PAMELOR.....	65	PERPHENAZINE/AMITRIPTYLIN.....	74
PANCREAZE.....	58	<b>perphenazine tab 2 mg, 4 mg, 8 mg, 16 mg.....</b>	<b>68</b>
PANDA MASK LARGE.....	127	PERTZYE.....	58
PANDA MASK MEDIUM.....	127	PFIZER-BIONTECH COVID-19.....	12
PANDA MASK SMALL.....	127	PHARMACIST CHOICE AUTOCOD.....	122
PANDEL.....	115	PHARMACIST CHOICE NO CODI.....	122
PANRETIN.....	115	PHEBURANE.....	35
<b>pantoprazole sodium ec tab 20 mg (base equiv), 40</b>		PHENELZINE SULFATE.....	65
<b>mg (base equiv) (Protonix).....</b>	<b>56</b>	<b>phenobarbital elixir 20 mg/5ml.....</b>	<b>69</b>
<b>pantoprazole sodium for delayed release susp packet</b>		<b>phenobarbital tab 64.8 mg, 97.2 mg.....</b>	<b>69</b>
<b>40 mg (Protonix).....</b>	<b>56</b>	<b>phenobarbital tab 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60</b>	
<b>paricalcitol cap 4 mcg.....</b>	<b>35</b>	<b>mg, 100 mg.....</b>	<b>69</b>
<b>paricalcitol cap 1 mcg, 2 mcg (Zemplar).....</b>	<b>35</b>	<b>phenoxybenzamine hcl cap 10 mg (Dibenzylina).....</b>	<b>43</b>
PARLODEL.....	91	<b>phentermine hcl cap 15 mg, 30 mg.....</b>	<b>71</b>
PARNATE.....	65	<b>phentermine hcl cap 37.5 mg (Adipex-p).....</b>	<b>72</b>
<b>paroxetine hcl oral susp 10 mg/5ml (base equiv)</b>		<b>phentermine hcl tab 37.5 mg (Adipex-p).....</b>	<b>72</b>
<b>(Paxil).....</b>	<b>65</b>	<b>phenylephrine hcl ophth soln 2.5%, 10%.....</b>	<b>106</b>
<b>paroxetine hcl tab er 24hr 12.5 mg, 25 mg, 37.5 mg</b>		<b>phenytoin chew tab 50 mg (Dilantin infatabs).....</b>	<b>88</b>
<b>(Paxil cr).....</b>	<b>65</b>	<b>phenytoin sodium extended cap 200 mg, 300 mg</b>	
<b>paroxetine hcl tab 10 mg, 20 mg, 30 mg, 40 mg</b>		<b>(Phenytek).....</b>	<b>88</b>
<b>(Paxil).....</b>	<b>65</b>	<b>phenytoin sodium extended cap 100 mg (Dilantin).....</b>	<b>88</b>
<b>paroxetine mesylate cap 7.5 mg (base equiv).....</b>	<b>74</b>	<b>phenytoin susp 125 mg/5ml (Dilantin-125).....</b>	<b>88</b>
PAXIL.....	65	PHEXXI.....	62
PAXIL CR.....	65	<b>phytonadione tab 5 mg (Mephyton).....</b>	<b>93</b>
PAXLOVID.....	7	PIFELTRO.....	7
<b>pazopanib hcl tab 200 mg (base equiv) (Votrient).....</b>	<b>18</b>	<b>pilocarpine hcl ophth soln 1%, 2%, 4%.....</b>	<b>106</b>
PEDIAPRED.....	21	<b>pilocarpine hcl tab 5 mg, 7.5 mg (Salagen).....</b>	<b>108</b>
PEDIARIX.....	13	PILOT COVID-19 AT-HOME TE.....	122
PEDIATRIC PANDA MASK.....	127	<b>pimecrolimus cream 1% (Elidel).....</b>	<b>115</b>
PEDVAX HIB.....	12	PIMOZIDE.....	74
PEGASYS.....	7	<b>pindolol tab 5 mg, 10 mg.....</b>	<b>38</b>
<b>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236</b>		<b>pioglitazone hcl-glimepiride tab 30-2 mg, 30-4 mg</b>	
<b>gm (Golytely).....</b>	<b>55</b>	<b>(Duetact).....</b>	<b>27</b>
<b>peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln</b>		<b>pioglitazone hcl-metformin hcl tab 15-500 mg, 15-850</b>	
<b>100 gm (Moviprep).....</b>	<b>55</b>	<b>mg (Actoplus met).....</b>	<b>27</b>
<b>peg 3350-kcl-sod bicarb-nacl for soln 420 gm.....</b>	<b>55</b>	<b>pioglitazone hcl tab 15 mg (base equiv), 30 mg (base</b>	
PEG-PREP.....	55	<b>equiv), 45 mg (base equiv) (Actos).....</b>	<b>27</b>
PEMAZYRE.....	18	PIP BLOOD GLUCOSE TEST ST.....	122
PENBRAYA.....	12	PIQRAY 200MG DAILY DOSE.....	18
<b>penciclovir cream 1% (Denavir).....</b>	<b>115</b>	PIQRAY 250MG DAILY DOSE.....	18
<b>penicillamine cap 250 mg (Cuprimine).....</b>	<b>128</b>	PIQRAY 300MG DAILY DOSE.....	18
<b>penicillamine tab 250 mg (Depen titratabs).....</b>	<b>128</b>	PIRFENIDONE.....	54
PENICILLIN V POTASSIUM.....	1	<b>pirfenidone cap 267 mg (Esbriet).....</b>	<b>54</b>
<b>penicillin v potassium tab 250 mg, 500 mg.....</b>	<b>1</b>	<b>pirfenidone tab 267 mg, 801 mg (Esbriet).....</b>	<b>54</b>
PENNSAID.....	115	<b>piroxicam cap 10 mg, 20 mg (Feldene).....</b>	<b>83</b>
PENTACEL.....	13	<b>pitavastatin calcium tab 1 mg, 2 mg, 4 mg (Livalo).....</b>	<b>46</b>
<b>pentamidine isethionate for nebulization soln 300 mg</b>		PLAQUENIL.....	9
<b>(Nebupent).....</b>	<b>10</b>	PLAVIX.....	102

PLEGRIDY.....	74	pravastatin sodium tab 10 mg, 20 mg, 40 mg, 80 mg.....	46
PLEGRIDY STARTER PACK.....	75	praziquantel tab 600 mg (Biltricide).....	9
PLENVU.....	55	prazosin hcl cap 1 mg, 2 mg, 5 mg (Minipress).....	43
PLIAGLIS.....	115	PRECISION SOF-TACT TEST S.....	122
PNEUMOVAX 23.....	12	PRECISION XTRA BLOOD GLUC.....	122
PNEUMOVAX 23/1 DOSE.....	12	PRED FORTE.....	106
PNV-DHA.....	94	PRED MILD.....	106
PNV-DHA+DOCUSATE.....	94	PREDNISOLONE ACETATE.....	106
PNV-OMEGA.....	94	PREDNISOLONE SODIUM PHOSP.....	21
PNV-SELECT.....	94	<b>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq).....</b>	<b>21</b>
PNV TABS 20-1.....	94	<b>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv).....</b>	<b>21</b>
POCKET CHAMBER.....	127	<b>prednisolone sod phosphate oral soln 10 mg/5ml (base equiv), 20 mg/5ml (base equiv).....</b>	<b>21</b>
POCKETCHEM EZ BLOOD GLUCO.....	122	<b>prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base) (Pediapred).....</b>	<b>21</b>
POCKET SPACER.....	127	<b>prednisolone soln 15 mg/5ml.....</b>	<b>21</b>
PODOFILOX.....	115	<b>prednisolone tab 5 mg.....</b>	<b>21</b>
<b>podofilox gel 0.5% (Condylox).....</b>	<b>115</b>	PREDNISON.....	21
POGO AUTOMATIC TEST CARTR.....	122	PREDNISON INTENSOL.....	21
POKONZA.....	97	<b>prednisone tab 1 mg, 2.5 mg, 5 mg, 10 mg, 20 mg, 50 mg.....</b>	<b>21</b>
<b>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1% (Polytrim).....</b>	<b>106</b>	<b>prednisone tab therapy pack 5 mg (21), 5 mg (48), 10 mg (21), 10 mg (48).....</b>	<b>21</b>
POMALYST.....	18	pregabalin cap 25 mg, 50 mg, 75 mg, 100 mg, 150 mg, 200 mg, 225 mg, 300 mg (Lyrica).....	88
PONVORY.....	75	pregabalin soln 20 mg/ml (Lyrica).....	88
PONVORY 14-DAY STARTER PA.....	75	pregabalin tab er 24hr 82.5 mg, 165 mg, 330 mg (Lyrica cr).....	75
<b>posaconazole susp 40 mg/ml (Noxafil).....</b>	<b>5</b>	PREGEN DHA.....	94
<b>posaconazole tab delayed release 100 mg (Noxafil).....</b>	<b>5</b>	PREGENNA.....	94
<b>potassium chloride cap er 8 meq, 10 meq.....</b>	<b>97</b>	PREGNYL.....	35
POTASSIUM CHLORIDE ER.....	97	PREGNYL W/DILUENT BENZYL.....	35
<b>potassium chloride microencapsulated crys er tab 15 meq.....</b>	<b>97</b>	PREHEVBRIO.....	12
<b>potassium chloride microencapsulated crys er tab 10 meq, 20 meq.....</b>	<b>97</b>	PREMARIN.....	23
<b>potassium chloride oral soln 10% (20 meq/15ml), 20% (40 meq/15ml).....</b>	<b>97</b>	PREMESISRX.....	94
<b>potassium chloride powder packet 20 meq.....</b>	<b>97</b>	PREMIUM BLOOD GLUCOSE TES.....	122
<b>potassium chloride tab er 10 meq (K-tab).....</b>	<b>97</b>	PREMPHASE.....	23
<b>potassium chloride tab er 8 meq (600 mg).....</b>	<b>97</b>	PREMPRO.....	23
<b>potassium chloride tab er 20 meq (1500 mg) (K-tab).....</b>	<b>97</b>	PRENA1 CHEW.....	95
<b>potassium citrate tab er 5 meq (540 mg) (Urocit-k 5).....</b>	<b>62</b>	PRENAISSANCE.....	95
<b>potassium citrate tab er 10 meq (1080 mg) (Urocit-k 10).....</b>	<b>62</b>	PRENAISSANCE PLUS.....	95
<b>potassium citrate tab er 15 meq (1620 mg) (Urocit-k 15).....</b>	<b>62</b>	PRENA1 PEARL.....	95
<b>potassium phosphate monobasic tab 500 mg (K-phos).....</b>	<b>97</b>	PRENATAL.....	95
<b>pot phos monobasic w/sod phos di &amp; monobas tab 155-852-130mg (K-phos neutral).....</b>	<b>97</b>	PRENATAL 19.....	95
PRADAXA.....	100	PRENATAL PLUS.....	95
PRALUENT.....	46	PRENATAL PLUS VITAMIN AND.....	95
<b>pramipexole dihydrochloride tab er 24hr 0.375 mg, 0.75 mg, 1.5 mg, 2.25 mg, 3 mg, 3.75 mg, 4.5 mg (Mirapex er).....</b>	<b>91</b>	PRENATAL-U.....	95
<b>pramipexole dihydrochloride tab 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg.....</b>	<b>91</b>	PRENATE.....	95
<b>prasugrel hcl tab 5 mg (base equiv), 10 mg (base equiv) (Effient).....</b>	<b>102</b>	PRENATE AM.....	95
		PRENATE DHA.....	95
		PRENATE ELITE.....	95
		PRENATE ENHANCE.....	95
		PRENATE ESSENTIAL.....	95
		PRENATE MINI.....	95

PRENATE PIXIE.....	95	PROMACTA.....	99
PRENATE RESTORE.....	95	<b>promethazine-dm syrup 6.25-15 mg/5ml.....</b>	<b>50</b>
PRENATRIX.....	95	<b>promethazine hcl suppos 12.5 mg, 25 mg.....</b>	<b>49</b>
PRENA 1 TRUE.....	94	<b>promethazine hcl syrup 6.25 mg/5ml.....</b>	<b>49</b>
PRENATRYL.....	95	<b>promethazine hcl tab 12.5 mg, 25 mg, 50 mg.....</b>	<b>49</b>
PRENATVITE COMPLETE.....	95	PROMETHAZINE VC.....	50
PRENATVITE PLUS.....	95	PROMETHAZINE VC/CODEINE.....	50
PRENATVITE RX.....	95	<b>promethazine w/ codeine syrup 6.25-10 mg/5ml.....</b>	<b>50</b>
PRESTALIA.....	43	PROMETHEGAN.....	49
PRETOMANID.....	4	PROMETRIUM.....	25
PREVACID.....	56	<b>propafenone hcl cap er 12hr 225 mg, 325 mg, 425 mg</b>	
PREVACID SOLUTAB.....	57	<b>(Rythmol sr).....</b>	<b>40</b>
PREVIDENT 5000 BOOSTER PL.....	108	<b>propafenone hcl tab 150 mg, 225 mg, 300 mg.....</b>	<b>40</b>
PREVIDENT 5000 DRY MOUTH.....	108	PROPRANOLOL HCL.....	38
PREVIDENT 5000 ENAMEL PRO.....	108	<b>propranolol hcl cap er 24hr 60 mg, 80 mg, 120 mg,</b>	
PREVIDENT FLUORIDE.....	108	<b>160 mg (Inderal la).....</b>	<b>38</b>
PREVIDENT 5000 ORTHO DEFE.....	108	<b>propranolol hcl oral soln 20 mg/5ml.....</b>	<b>38</b>
PREVIDENT 5000 PLUS.....	108	<b>propranolol hcl tab 10 mg, 20 mg, 40 mg, 60 mg, 80</b>	
PREVIDENT RINSE.....	108	<b>mg.....</b>	<b>38</b>
PREVIDENT 5000 SENSITIVE.....	108	<b>propylthiouracil tab 50 mg.....</b>	<b>32</b>
PREVNAR 13.....	12	PROQUAD.....	12
PREVNAR 20.....	12	PROSCAR.....	62
PREVYMIS.....	7	PROTONIX.....	57
PREZCOBIX.....	7	<b>protriptyline hcl tab 5 mg, 10 mg.....</b>	<b>65</b>
PREZISTA.....	7	PROVENTIL HFA.....	53
PRIFTIN.....	4	PROVERA.....	25
PRILOSEC.....	57	PROVIDA OB.....	95
PRIMACARE.....	95	PROVIGIL.....	72
PRIMAQUINE PHOSPHATE.....	9	PRO VOICE V8/V9 BLOOD GLU.....	122
<b>primaquine phosphate tab 26.3 mg (15 mg base)</b>		PROZAC.....	65
<b>(Primaquine phosphate).....</b>	<b>9</b>	PRUDOXIN.....	115
PRIMIDONE.....	88	<b>pseudoephed-bromphen-dm syrup 30-2-10</b>	
<b>primidone tab 50 mg, 250 mg (Mysoline).....</b>	<b>88</b>	<b>mg/5ml.....</b>	<b>50</b>
PRIORIX.....	12	PTS PANELS EGLU.....	123
PRISTIQ.....	65	PULMICORT.....	53
PROAIR DIGIHALER.....	53	PULMICORT FLEXHALER.....	53
PROAIR RESPICLICK.....	53	PULMOZYME.....	54
<b>probenecid tab 500 mg.....</b>	<b>85</b>	PURE COMFORT INHALER SPAC.....	127
PROCARDIA XL.....	39	PURIXAN.....	18
PROCARE SPACER CHAMBER W/.....	127	PYLERA.....	57
PROCHAMBER VALVED HOLDING.....	127	<b>pyrazinamide tab 500 mg.....</b>	<b>4</b>
<b>prochlorperazine maleate tab 5 mg (base equivalent),</b>		PYRIDOSTIGMINE BROMIDE.....	93
<b>10 mg (base equivalent).....</b>	<b>68</b>	<b>pyridostigmine bromide oral soln 60 mg/5ml</b>	
<b>prochlorperazine suppos 25 mg.....</b>	<b>68</b>	<b>(Mestinon).....</b>	<b>93</b>
PRO COMFORT INHALER SPACE.....	127	<b>pyridostigmine bromide tab er 180 mg (Mestinon</b>	
PROCRIT.....	99	<b>timespan).....</b>	<b>93</b>
PROCTOCORT.....	108	<b>pyridostigmine bromide tab 60 mg (Mestinon).....</b>	<b>93</b>
PROCTOFOAM HC.....	109	<b>pyrimethamine tab 25 mg (Daraprim).....</b>	<b>9</b>
PROCYSBI.....	62	PYRUKYND.....	102
PRODIGY NO CODING BLOOD G.....	122	PYRUKYND TAPER PACK.....	102
PROFILNINE.....	102		
<b>progesterone cap 100 mg, 200 mg (Prometrium).....</b>	<b>25</b>	<b>Q</b>	
<b>progesterone im in oil 50 mg/ml.....</b>	<b>25</b>	QBRELIS.....	43
PROGLYCEM.....	27	QBREXZA.....	115
PROGRAF.....	128	QDOLO.....	79
PROLATE.....	79	QELBREE.....	72
PROLENSA.....	106	QINLOCK.....	18

QNASL.....	50	RECOMBINATE.....	102
QNASL CHILDRENS.....	50	RECOMBIVAX HB.....	12
QSYMIA.....	72	RECORLEV.....	35
QTERN.....	27	RECTIV.....	109
QUADRACEL.....	13	REFUAH PLUS BLOOD GLUCOSE.....	123
QUALAQUIN.....	9	REGLAN.....	60
QUAZEPAM.....	69	REGRANEX.....	115
QUDEXY XR.....	88	RELAFEN DS.....	83
QUESTRAN.....	46	RELENZA DISKHALER.....	7
QUESTRAN LIGHT.....	46	RELEUKO.....	99
QUETIAPINE FUMARATE.....	68	RELEXXII.....	72
<b>quetiapine fumarate tab er 24hr 50 mg, 150 mg, 200</b>		RELION CONFIRM/MICRO TEST.....	123
<b>mg, 300 mg, 400 mg (Seroquel xr).....</b>	<b>68</b>	RELION PREMIER BLOOD GLUC.....	123
<b>quetiapine fumarate tab 25 mg, 50 mg, 100 mg, 200</b>		RELION PRIME BLOOD GLUCOS.....	123
<b>mg, 300 mg, 400 mg (Seroquel).....</b>	<b>68</b>	RELION TRUE METRIX BLOOD.....	123
QUICKTEK TEST STRIPS.....	123	RELION ULTIMA BLOOD GLUCO.....	123
QUICKVUE AT-HOME COVID-19.....	123	RELISTOR.....	60
QUILLICHEW ER.....	72	RELNATE DHA.....	95
QUILLIVANT XR.....	72	RELPAK.....	85
<b>quinapril hcl tab 5 mg, 10 mg, 20 mg, 40 mg</b>		RELTONE.....	60
<b>(Accupril).....</b>	<b>43</b>	RELYVRIO.....	91
<b>quinapril-hydrochlorothiazide tab 10-12.5 mg, 20-12.5</b>		REMERON.....	65
<b>mg, 20-25 mg (Accuretic).....</b>	<b>43</b>	REMERON SOLTAB.....	65
<b>quinidine gluconate tab er 324 mg.....</b>	<b>40</b>	REVELA.....	60
QUINIDINE SULFATE.....	40	<b>repaglinide tab 0.5 mg, 1 mg, 2 mg.....</b>	<b>27</b>
<b>quinine sulfate cap 324 mg (Qualaquin).....</b>	<b>9</b>	REPATHA.....	46
QUINTET AC BLOOD GLUCOSE.....	123	REPATHA PUSHTRONEX SYSTEM.....	46
QUINTET BLOOD GLUCOSE TES.....	123	REPATHA SURECLICK.....	47
QULIPTA.....	85	RESET.....	128
QUVIVIQ.....	69	RESET NON-MONETARY CM.....	128
QVAR REDIHALER.....	53	RESET-O.....	128
<b>R</b>		RESET-O NON-MONETARY CM.....	128
RABAVERT.....	12	RESTASIS.....	106
RABEPRAZOLE SODIUM DR SPR.....	57	RESTASIS MULTIDOSE.....	106
<b>rabeprazole sodium ec tab 20 mg.....</b>	<b>57</b>	RESTORIL.....	69
RADICAVA ORS.....	91	RETACRIT.....	99
RADICAVA ORS STARTER KIT.....	91	RETEVMO.....	18
RAGWITEK.....	14	RETIN-A.....	115
<b>raloxifene hcl tab 60 mg (Evista).....</b>	<b>35</b>	RETIN-A MICRO.....	115
<b>ramelteon tab 8 mg (Rozerem).....</b>	<b>69</b>	RETIN-A MICRO PUMP.....	115
<b>ramipril cap 1.25 mg, 2.5 mg, 5 mg, 10 mg (Altace)....</b>	<b>43</b>	RETROVIR.....	7
<b>ranolazine tab er 12hr 500 mg, 1000 mg (Ranexa).....</b>	<b>37</b>	REVATIO.....	48
RAPAFLO.....	62	REVCIVI.....	35
RAPAMUNE.....	128	REVLIMID.....	128
RAPID SARS-COV-2 ANTIGEN.....	123	REXALL BLOOD GLUCOSE TEST.....	123
<b>rasagiline mesylate tab 0.5 mg (base equiv), 1 mg</b>		REXULTI.....	68
<b>(base equiv) (Azilect).....</b>	<b>91</b>	REYATAZ.....	7
RASUVO.....	83	REYVOW.....	85
RAVICTI.....	35	REZLIDHIA.....	18
RAYALDEE.....	35	REZUROCK.....	128
RAYOS.....	21	REZVOGLAR KWIKPEN.....	31
REBIF.....	75	RHOFADE.....	115
REBIF REBIDOSE.....	75	RHOPRESSA.....	106
REBIF REBIDOSE TITRATION.....	75	RIASTAP.....	102
REBIF TITRATION PACK.....	75	RIBAVIRIN.....	7
REBINYN.....	102	RIDAURA.....	83
		<b>rifabutin cap 150 mg (Mycobutin).....</b>	<b>4</b>



rifampin cap 150 mg, 300 mg.....	4	ROZEREM.....	69
RIGHTEST GS100 BLOOD GLUC.....	123	ROZLYTREK.....	18
RIGHTEST GS300 BLOOD GLUC.....	123	RUBRACA.....	18
RIGHTEST GS333 BLOOD GLUC.....	123	RUCONEST.....	102
RIGHTEST GS550 BLOOD GLUC.....	123	<b>rufinamide susp 40 mg/ml (Banzel).....</b>	<b>88</b>
RIGHTEST GT333 BLOOD GLUC.....	123	<b>rufinamide tab 200 mg, 400 mg (Banzel).....</b>	<b>89</b>
RILUTEK.....	92	RUKOBIA.....	7
<b>riluzole tab 50 mg (Rilutek).....</b>	<b>92</b>	RYALTRIS.....	50
RINVOQ.....	83	RYBELSUS.....	27
RIOMET.....	27	RYCLORA.....	49
<b>risedronate sodium tab delayed release 35 mg</b>		RYDAPT.....	18
<b>(Atelvia).....</b>	<b>35</b>	RYTARY.....	91
<b>risedronate sodium tab 5 mg, 30 mg.....</b>	<b>35</b>	RYVENT.....	49
<b>risedronate sodium tab 35 mg, 150 mg (Actonel).....</b>	<b>35</b>	<b>S</b>	
RISPERDAL.....	68	SABRIL.....	89
RISPERIDONE ODT.....	68	SAFYRAL.....	25
<b>risperidone orally disintegrating tab 0.5 mg, 1 mg, 2</b>		SAIZEN.....	35
<b>mg, 3 mg, 4 mg.....</b>	<b>68</b>	SALAGEN.....	108
<b>risperidone soln 1 mg/ml (Risperdal).....</b>	<b>68</b>	SAMSCA.....	35
<b>risperidone tab 0.25 mg.....</b>	<b>68</b>	SANCUSO.....	58
<b>risperidone tab 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</b>		SANDIMMUNE.....	128
<b>(Risperdal).....</b>	<b>68</b>	SANDOSTATIN.....	35
RITALIN.....	72	SANTYL.....	115
RITALIN LA.....	72	SAPHRIS.....	68
RITEFLO.....	127	<b>sapropterin dihydrochloride powder packet 100 mg,</b>	
<b>ritonavir tab 100 mg (Norvir).....</b>	<b>7</b>	<b>500 mg (Kuvan).....</b>	<b>35</b>
<b>rivastigmine tartrate cap 1.5 mg (base equivalent), 3</b>		<b>sapropterin dihydrochloride tab 100 mg (Kuvan).....</b>	<b>35</b>
<b>mg (base equivalent), 4.5 mg (base equivalent), 6</b>		SAVAYSA.....	100
<b>mg (base equivalent).....</b>	<b>75</b>	SAVELLA.....	75
<b>rivastigmine td patch 24hr 4.6 mg/24hr, 9.5 mg/24hr,</b>		SAVELLA TITRATION PACK.....	75
<b>13.3 mg/24hr (Exelon).....</b>	<b>75</b>	<b>saxagliptin hcl tab 2.5 mg (base equiv), 5 mg (base</b>	
RIXUBIS.....	102	<b>equiv) (Onglyza).....</b>	<b>27</b>
<b>rizatriptan benzoate oral disintegrating tab 5 mg (base</b>		<b>saxagliptin-metformin hcl tab er 24hr 2.5-1000 mg,</b>	
<b>eq).....</b>	<b>85</b>	<b>5-500 mg, 5-1000 mg (Kombiglyze xr).....</b>	<b>27</b>
<b>rizatriptan benzoate oral disintegrating tab 10 mg</b>		SAXENDA.....	72
<b>(base eq) (Maxalt-mlt).....</b>	<b>85</b>	SCEMBLIX.....	18
<b>rizatriptan benzoate tab 5 mg (base equivalent).....</b>	<b>85</b>	<b>scopolamine td patch 72hr 1 mg/3days (Transderm-</b>	
<b>rizatriptan benzoate tab 10 mg (base equivalent)</b>		<b>scop).....</b>	<b>58</b>
<b>(Maxalt).....</b>	<b>85</b>	SECUADO.....	68
ROBINUL.....	57	SEGLENTIS.....	79
ROBINUL FORTE.....	57	SEGLUROMET.....	27
ROCALTROL.....	35	SELECT-OB.....	96
ROCKLATAN.....	106	SELECT-OB+DHA.....	96
<b>roflumilast tab 250 mcg, 500 mcg (Daliresp).....</b>	<b>53</b>	<b>selegiline hcl cap 5 mg.....</b>	<b>91</b>
<b>ropinirole hydrochloride tab er 24hr 2 mg (base</b>		<b>selegiline hcl tab 5 mg.....</b>	<b>91</b>
<b>equivalent), 4 mg (base equivalent), 6 mg (base</b>		<b>selenium sulfide lotion 2.5%.....</b>	<b>115</b>
<b>equivalent), 8 mg (base equivalent), 12 mg (base</b>		SELZENTRY.....	7
<b>equivalent).....</b>	<b>91</b>	SEMGLEE.....	31
<b>ropinirole hydrochloride tab 0.25 mg, 0.5 mg, 1 mg, 2</b>		SE-NATAL 19.....	95
<b>mg, 3 mg, 4 mg, 5 mg.....</b>	<b>91</b>	SENSIPAR.....	36
<b>rosuvastatin calcium tab 5 mg, 10 mg, 20 mg, 40 mg</b>		SEREVENT DISKUS.....	53
<b>(Crestor).....</b>	<b>47</b>	SERNIVO.....	115
ROSZET.....	47	SEROQUEL.....	68
ROTARIX.....	13	SEROQUEL XR.....	68
ROTATEQ.....	13	SEROSTIM.....	36
ROXICODONE.....	79		
ROXYBOND.....	79		

<b>sertraline hcl oral concentrate for solution 20 mg/ml (Zoloft).....</b>	<b>65</b>	<b>sodium fluoride gel 1.1% (0.5% f) (Prevident fluoride).....</b>	<b>108</b>
<b>sertraline hcl tab 25 mg, 50 mg, 100 mg (Zoloft).....</b>	<b>65</b>	<b>sodium fluoride paste 1.1% (Prevident 5000 boost).....</b>	<b>108</b>
SERTRALINE HYDROCHLORIDE.....	65	<b>sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf).....</b>	<b>97</b>
<b>sevelamer carbonate packet 0.8 gm, 2.4 gm (Renvela).....</b>	<b>60</b>	SODIUM OXYBATE.....	75
<b>sevelamer carbonate tab 800 mg (Renvela).....</b>	<b>60</b>	<b>sodium phenylbutyrate oral powder 3 gm/teaspoonful (Buphenyl).....</b>	<b>36</b>
<b>sevelamer hcl tab 400 mg.....</b>	<b>60</b>	<b>sodium phenylbutyrate tab 500 mg (Buphenyl).....</b>	<b>36</b>
<b>sevelamer hcl tab 800 mg (Renagel).....</b>	<b>60</b>	<b>sodium polystyrene sulfonate powder.....</b>	<b>129</b>
SEVENFACT.....	102	<b>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml (Suprep bowel prep ki).....</b>	<b>55</b>
SEYSARA.....	3	SOFOSBUVIR/VELPATASVIR.....	8
SFROWASA.....	60	SOGROYA.....	36
SHINGRIX.....	13	SOHONOS.....	92
SIGNIFOR.....	36	<b>solifenacin succinate tab 5 mg, 10 mg (Vesicare).....</b>	<b>61</b>
SIKLOS.....	99	SOLIQUA 100/33.....	28
<b>sildenafil citrate for suspension 10 mg/ml (Revatio).....</b>	<b>48</b>	SOLODYN.....	3
<b>sildenafil citrate tab 25 mg, 50 mg, 100 mg (Viagra).....</b>	<b>48</b>	SOLOSEC.....	9
<b>sildenafil citrate tab 20 mg (Revatio).....</b>	<b>48</b>	SOLTAMOX.....	18
SILENOR.....	69	SOLUS V2 AUDIBLE TEST.....	123
SILICONE MASK FOR BREATHE.....	127	SOMAVERT.....	36
SILICONE MASK FOR BREATHR.....	127	SOOLANTRA.....	115
SILIQ.....	115	<b>sorafenib tosylate tab 200 mg (base equivalent) (Nexavar).....</b>	<b>18</b>
<b>silodosin cap 4 mg, 8 mg (Rapaflo).....</b>	<b>62</b>	SORILUX.....	115
SILVADENE.....	115	<b>sotalol hcl (afib/af) tab 80 mg, 120 mg, 160 mg (Betapace af).....</b>	<b>38</b>
<b>silver sulfadiazine cream 1% (Silvadene).....</b>	<b>115</b>	<b>sotalol hcl tab 240 mg.....</b>	<b>38</b>
SIMBRINZA.....	106	<b>sotalol hcl tab 80 mg, 120 mg, 160 mg (Betapace).....</b>	<b>38</b>
SIMPONI.....	83	SOTYKTU.....	115
<b>simvastatin tab 5 mg, 80 mg.....</b>	<b>47</b>	SOTYLIZE.....	38
<b>simvastatin tab 10 mg, 20 mg, 40 mg (Zocor).....</b>	<b>47</b>	SOVALDI.....	8
SINEMET.....	91	SPEEDY SWAB RAPID COVID-1.....	123
SINGULAIR.....	53	SPIKEVAX COVID-19 VACCINE.....	13
<b>sirolimus oral soln 1 mg/ml (Rapamune).....</b>	<b>128</b>	SPINOSAD.....	115
<b>sirolimus tab 0.5 mg, 1 mg, 2 mg (Rapamune).....</b>	<b>128</b>	SPIRIVA HANDIHALER.....	53
SIRTURO.....	4	SPIRIVA RESPIMAT.....	53
SITAVIG.....	8	<b>spironolactone &amp; hydrochlorothiazide tab 25-25 mg (Aldactazide).....</b>	<b>44</b>
SIVEXTRO.....	10	<b>spironolactone susp 25 mg/5ml (Carospir).....</b>	<b>44</b>
SKYCLARYS.....	92	<b>spironolactone tab 25 mg, 50 mg, 100 mg (Aldactone).....</b>	<b>44</b>
SKYLA.....	25	SPORANOX.....	5
SKYRIZI.....	60	SPRITAM.....	89
SKYRIZI PEN.....	115	SPRIX.....	83
SKYTROFA.....	36	SPRYCEL.....	18
SLYND.....	25	SPS.....	129
SMARTEST BLOOD GLUCOSE TE.....	123	STALEVO 50.....	91
SMART SENSE PREMIUM BLOOD.....	123	STALEVO 75.....	91
SMART SENSE VALUE BLOOD G.....	123	STALEVO 100.....	91
SOAAZ.....	44	STALEVO 125.....	91
<b>sodium chloride soln nebu 3%.....</b>	<b>50</b>	STALEVO 150.....	91
<b>sodium chloride soln nebu 7% (Hypersal).....</b>	<b>50</b>	STALEVO 200.....	91
<b>sodium citrate &amp; citric acid soln 500-334 mg/5ml.....</b>	<b>62</b>	<b>stannous fluoride conc 0.63%.....</b>	<b>108</b>
SODIUM FLUORIDE.....	97	<b>stannous fluoride gel 0.4%.....</b>	<b>108</b>
<b>sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf), 0.5 mg f (from 1.1 mg naf), 1 mg f (from 2.2 mg naf).....</b>	<b>97</b>		
<b>sodium fluoride cream 1.1% (Prevident 5000 plus).....</b>	<b>108</b>		

STEGLATRO.....	28	SYMFI.....	8
STEGLUJAN.....	28	SYMFI LO.....	8
STELARA.....	115	SYMLINPEN 60.....	28
STENDRA.....	48	SYMLINPEN 120.....	28
STIMUFEND.....	99	SYMPAZAN.....	89
STIOLTO RESPIMAT.....	53	SYMPROIC.....	60
STIVARGA.....	18	SYMTUZA.....	8
STRATTERA.....	72	SYNALAR.....	116
STRENSIQ.....	36	SYNAREL.....	36
STRIBILD.....	8	SYNDROS.....	58
STRIVERDI RESPIMAT.....	53	SYNJARDY.....	28
STROMECTOL.....	9	SYNJARDY XR.....	28
SUBOXONE.....	79	SYNTHROID.....	32
SUCRAID.....	58	SYNVISC.....	92
<b>sucralfate susp 1 gm/10ml (Carafate).....</b>	<b>57</b>	SYNVISC ONE.....	92
<b>sucralfate tab 1 gm (Carafate).....</b>	<b>57</b>	SYPRINE.....	129
SUFLAVE.....	55	<b>T</b>	
SULAR.....	39	TABLOID.....	18
SULCONAZOLE NITRATE.....	116	TABRECTA.....	18
SULFACETAMIDE SODIUM.....	106	TACLONEX.....	116
SULFACETAMIDE SODIUM/PRED.....	106	<b>tacrolimus cap 0.5 mg, 1 mg, 5 mg (Prograf).....</b>	<b>129</b>
<b>sulfacetamide sodium lotion 10% (acne) (Klaron)....</b>	<b>116</b>	<b>tacrolimus oint 0.03%, 0.1% (Protopic).....</b>	<b>116</b>
<b>sulfacetamide sodium ophth soln 10%.....</b>	<b>106</b>	<b>tadalafil tab 2.5 mg, 5 mg, 10 mg, 20 mg (Cialis).....</b>	<b>49</b>
SULFADIAZINE.....	4	<b>tadalafil tab 20 mg (pah) (Adcirca).....</b>	<b>48</b>
<b>sulfamethoxazole-trimethoprim susp 200-40</b>		TADLIQ.....	48
<b>mg/5ml.....</b>	<b>10</b>	TAFINLAR.....	18
<b>sulfamethoxazole-trimethoprim tab 400-80 mg</b>		<b>tafluprost preservative free (pf) ophth soln 0.0015%</b>	
<b>(Bactrim).....</b>	<b>10</b>	<b>(Zioptan).....</b>	<b>106</b>
<b>sulfamethoxazole-trimethoprim tab 800-160 mg</b>		TAGRISSE.....	19
<b>(Bactrim ds).....</b>	<b>10</b>	TAKHZYRO.....	102
SULFAMYLON.....	116	TALICIA.....	57
<b>sulfasalazine tab delayed release 500 mg (Azulfidine</b>		TALTZ.....	116
<b>en-tabs).....</b>	<b>60</b>	TALZENNA.....	19
<b>sulfasalazine tab 500 mg (Azulfidine).....</b>	<b>60</b>	TAMIFLU.....	8
<b>sulindac tab 150 mg, 200 mg.....</b>	<b>83</b>	<b>tamoxifen citrate tab 10 mg (base equivalent), 20 mg</b>	
<b>sumatriptan-naproxen sodium tab 85-500 mg</b>		<b>(base equivalent).....</b>	<b>19</b>
<b>(Treximet).....</b>	<b>85</b>	<b>tamsulosin hcl cap 0.4 mg (Flomax).....</b>	<b>62</b>
<b>sumatriptan nasal spray 5 mg/act, 20 mg/act</b>		TAPERDEX 7-DAY.....	21
<b>(Imitrex).....</b>	<b>85</b>	TAPERDEX 12-DAY.....	21
<b>sumatriptan succinate inj 6 mg/0.5ml.....</b>	<b>85</b>	TARCEVA.....	19
SUMATRIPTAN SUCCINATE REF.....	85	TARGRETIN.....	19
<b>sumatriptan succinate solution auto-injector 4</b>		TARON-C DHA.....	96
<b>mg/0.5ml, 6 mg/0.5ml (Imitrex statdose sys).....</b>	<b>85</b>	TARPEYO.....	21
<b>sumatriptan succinate tab 25 mg, 50 mg, 100 mg</b>		TASCENSO ODT.....	75
<b>(Imitrex).....</b>	<b>85</b>	TASIGNA.....	19
<b>sunitinib malate cap 12.5 mg (base equivalent), 25 mg</b>		<b>tasimelteon capsule 20 mg (Hetlioz).....</b>	<b>69</b>
<b>(base equivalent), 37.5 mg (base equivalent), 50 mg</b>		TASMAR.....	91
<b>(base equivalent) (Sutent).....</b>	<b>18</b>	<b>tavaborole soln 5% (Kerydin).....</b>	<b>116</b>
SUNLENCA.....	8	TAVALISSE.....	102
SUNOSI.....	72	TAVNEOS.....	102
SUPREME TEST STRIPS.....	123	TAYTULLA.....	25
SUPREP BOWEL PREP KIT.....	55	TAZAROTENE.....	116
SUTAB.....	55	<b>tazarotene cream 0.1% (Tazorac).....</b>	<b>116</b>
SUTENT.....	18	<b>tazarotene gel 0.05%, 0.1% (Tazorac).....</b>	<b>116</b>
SYMBICORT.....	53	TAZORAC.....	116
SYMBYAX.....	75	TAZVERIK.....	19
SYMDEKO.....	54		

TDVAX.....	13	THEO-24.....	53
TECFIDERA.....	75	<b>theophylline elixir 80 mg/15ml.....</b>	<b>53</b>
TECFIDERA STARTER PACK.....	75	THEOPHYLLINE ER.....	53
TEGRETOL.....	89	<b>theophylline soln 80 mg/15ml.....</b>	<b>53</b>
TEGRETOL-XR.....	89	<b>theophylline tab er 12hr 300 mg, 450 mg.....</b>	<b>53</b>
TEGSEDI.....	75	<b>theophylline tab er 24hr 400 mg, 600 mg.....</b>	<b>53</b>
TEKURNA.....	43	THIOLA.....	62
TELMISARTAN/AMLODIPINE.....	43	THIOLA EC.....	63
<b>telmisartan-hydrochlorothiazide tab 40-12.5 mg,</b>		<b>thiothixene cap 1 mg, 2 mg, 5 mg, 10 mg.....</b>	<b>68</b>
<b>80-12.5 mg, 80-25 mg (Micardis hct).....</b>	<b>43</b>	THRIVITE RX.....	96
<b>telmisartan tab 20 mg, 40 mg, 80 mg (Micardis).....</b>	<b>43</b>	THYQUIDITY.....	32
<b>temazepam cap 7.5 mg, 22.5 mg (Restoril).....</b>	<b>69</b>	THYROID.....	32
<b>temazepam cap 15 mg, 30 mg (Restoril).....</b>	<b>69</b>	<b>tiagabine hcl tab 2 mg, 4 mg, 12 mg, 16 mg</b>	
<b>temozolomide cap 5 mg, 20 mg, 100 mg, 140 mg, 180</b>		<b>(Gabitril).....</b>	<b>89</b>
<b>mg.....</b>	<b>19</b>	TIAZAC.....	39
<b>temozolomide cap 250 mg (Temodar).....</b>	<b>19</b>	TIBSOVO.....	19
TENCON.....	76	TIKOSYN.....	40
TENIVAC.....	13	<b>timolol maleate ophth gel forming soln 0.25%, 0.5%</b>	
<b>tenofovir disoproxil fumarate tab 300 mg (Viread).....</b>	<b>8</b>	<b>(Timoptic-xe).....</b>	<b>106</b>
TENORETIC 50.....	43	<b>timolol maleate ophth soln 0.25%, 0.5%</b>	
TENORETIC 100.....	43	<b>(Timoptic).....</b>	<b>106</b>
TENORMIN.....	38	<b>timolol maleate ophth soln 0.5% (once-daily)</b>	
TEPMETKO.....	19	<b>(Istalol).....</b>	<b>106</b>
<b>terazosin hcl cap 1 mg (base equivalent), 2 mg (base</b>		<b>timolol maleate preservative free ophth soln 0.25%,</b>	
<b>equivalent), 5 mg (base equivalent), 10 mg (base</b>		<b>0.5% (Timoptic ocudose).....</b>	<b>106</b>
<b>equivalent).....</b>	<b>43</b>	<b>timolol maleate tab 5 mg, 10 mg, 20 mg.....</b>	<b>38</b>
<b>terbinafine hcl tab 250 mg.....</b>	<b>5</b>	TIMOPTIC OCUDOSE.....	106
<b>terbutaline sulfate tab 2.5 mg, 5 mg.....</b>	<b>53</b>	<b>tinidazole tab 250 mg, 500 mg.....</b>	<b>10</b>
<b>terconazole vaginal cream 0.4%, 0.8%.....</b>	<b>62</b>	<b>tiopronin tab 100 mg (Thiola).....</b>	<b>63</b>
<b>terconazole vaginal suppos 80 mg.....</b>	<b>62</b>	TIROSINT.....	32
<b>teriflunomide tab 7 mg, 14 mg (Aubagio).....</b>	<b>75</b>	TIROSINT-SOL.....	32
TERIPARATIDE.....	36	TIVICAY.....	8
<b>teriparatide (recombinant) soln pen-inj 600 mcg/2.4ml</b>		TIVICAY PD.....	8
<b>(Forteo).....</b>	<b>36</b>	<b>tizanidine hcl cap 2 mg (base equivalent), 4 mg (base</b>	
TESTIM.....	21	<b>equivalent), 6 mg (base equivalent) (Zanaflex).....</b>	<b>92</b>
TESTOSTERONE.....	21	<b>tizanidine hcl tab 2 mg (base equivalent).....</b>	<b>92</b>
<b>testosterone cypionate im inj in oil 100 mg/ml, 200</b>		<b>tizanidine hcl tab 4 mg (base equivalent)</b>	
<b>mg/ml (Depo-testosterone).....</b>	<b>22</b>	<b>(Zanaflex).....</b>	<b>92</b>
TESTOSTERONE ENANTHATE.....	22	TLANDO.....	22
TESTOSTERONE PUMP.....	22	TOBI.....	4
<b>testosterone td gel 12.5 mg/act (1%).....</b>	<b>22</b>	TOBI PODHALER.....	4
<b>testosterone td gel 20.25 mg/act (1.62%) (AndroGel</b>		TOBRADEX.....	106
<b>pump).....</b>	<b>22</b>	TOBRADEX ST.....	106
<b>testosterone td gel 10mg/act (2%) (Fortesta).....</b>	<b>22</b>	TOBRAMYCIN.....	4
<b>testosterone td gel 25 mg/2.5gm (1%), 50 mg/5gm</b>		<b>tobramycin-dexamethasone ophth susp 0.3-0.1%</b>	
<b>(1%) (AndroGel).....</b>	<b>22</b>	<b>(Tobradex).....</b>	<b>106</b>
<b>testosterone td gel 20.25 mg/1.25gm (1.62%), 40.5</b>		<b>tobramycin nebu soln 300 mg/4ml (Bethkis).....</b>	<b>4</b>
<b>mg/2.5gm (1.62%) (AndroGel).....</b>	<b>22</b>	<b>tobramycin nebu soln 300 mg/5ml (Tobi).....</b>	<b>4</b>
<b>testosterone td soln 30 mg/act.....</b>	<b>22</b>	<b>tobramycin ophth soln 0.3%.....</b>	<b>106</b>
<b>tetrabenazine tab 12.5 mg, 25 mg (Xenazine).....</b>	<b>75</b>	TOBEX.....	106
<b>tetracaine hcl ophth soln 0.5%.....</b>	<b>106</b>	TODAY SPONGE.....	62
<b>tetracycline hcl cap 250 mg, 500 mg.....</b>	<b>3</b>	TOLAK.....	116
TEXACORT.....	116	<b>tolcapone tab 100 mg (Tasmar).....</b>	<b>91</b>
TEZSPIRE.....	53	TOLMETIN SODIUM.....	83
TGT BLOOD GLUCOSE TEST ST.....	123	TOLSURA.....	5
THALITONE.....	44	<b>tolterodine tartrate cap er 24hr 2 mg, 4 mg (Detrol</b>	
THALOMID.....	129	<b>la).....</b>	<b>61</b>

tolterodine tartrate tab 1 mg, 2 mg (Detrol).....	61	TREXIMET.....	85
tolvaptan tab 15 mg, 30 mg (Samsca).....	36	TREXIN.....	79
TOPAMAX.....	89	triamcinolone acetonide aerosol soln 0.147 mg/gm (Kenalog).....	116
TOPAMAX SPRINKLE.....	89	triamcinolone acetonide cream 0.025%, 0.1%, 0.5%.....	116
TOPICORT.....	116	triamcinolone acetonide dental paste 0.1%.....	108
topiramate cap er 24hr 25 mg, 50 mg, 100 mg, 200 mg (Trokendi xr).....	89	triamcinolone acetonide lotion 0.025%, 0.1%.....	116
topiramate cap er 24hr sprinkle 25 mg, 50 mg, 100 mg, 150 mg, 200 mg (Qudexy xr).....	89	triamcinolone acetonide oint 0.05%.....	116
topiramate sprinkle cap 15 mg, 25 mg (Topamax sprinkle).....	89	triamcinolone acetonide oint 0.025%, 0.1%, 0.5%.....	116
topiramate tab 25 mg, 50 mg, 100 mg, 200 mg (Topamax).....	89	triamterene & hydrochlorothiazide cap 37.5-25 mg.....	44
TOPROL XL.....	38	triamterene & hydrochlorothiazide tab 37.5-25 mg (Maxzide-25).....	44
toremifene citrate tab 60 mg (base equivalent) (Fareston).....	19	triamterene & hydrochlorothiazide tab 75-50 mg (Maxzide).....	44
torsemide tab 5 mg, 10 mg, 20 mg, 100 mg.....	44	triamterene cap 50 mg, 100 mg (Dyrenium).....	44
TOSYMRA.....	85	TRIBENZOR.....	43
TOUJEO MAX SOLOSTAR.....	31	TRICOR.....	47
TOUJEO SOLOSTAR.....	31	trientine hcl cap 250 mg (Syprine).....	129
TOVIAZ.....	61	TRIENTINE HYDROCHLORIDE.....	129
TRACLEER.....	48	trifluoperazine hcl tab 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent).....	68
TRADJENTA.....	28	TRIFLURIDINE.....	107
tramadol-acetaminophen tab 37.5-325 mg (Ultracet).....	79	TRIHENXYPHENIDYL HCL.....	91
TRAMADOL HCL ER.....	79	trihexyphenidyl hcl tab 2 mg, 5 mg.....	91
tramadol hcl tab er 24hr 100 mg, 200 mg, 300 mg.....	79	TRIJARDY XR.....	28
tramadol hcl tab 100 mg.....	79	TRIKAFTA.....	54
tramadol hcl tab 50 mg (Ultram).....	79	TRILEPTAL.....	89
TRAMADOL HYDROCHLORIDE.....	79	TRILIPIX.....	47
TRANDOLAPRIL/VERAPAMIL HC.....	43	trimethobenzamide hcl cap 300 mg.....	58
trandolapril tab 1 mg, 2 mg, 4 mg.....	43	TRIMETHOPRIM.....	10
tranexamic acid tab 650 mg (Lysteda).....	100	trimethoprim tab 100 mg.....	10
TRANSDERM-SCOP.....	58	trimipramine maleate cap 25 mg, 50 mg, 100 mg.....	65
tranylcypromine sulfate tab 10 mg (Parnate).....	65	TRINATAL RX 1.....	96
TRAVATAN Z.....	106	TRINATE.....	96
travoprost ophth soln 0.004% (benzalkonium free) (bak free) (Travatan z).....	106	TRINTELLIX.....	65
trazodone hcl tab 300 mg.....	65	TRISTART DHA.....	96
trazodone hcl tab 50 mg, 100 mg, 150 mg.....	65	TRIUMEQ.....	8
TRECTOR.....	4	TRIUMEQ PD.....	8
TRELEGY ELLIPTA.....	53	TROKENDI XR.....	89
TREMFYA.....	116	tropicamide ophth soln 0.5%.....	107
TRESIBA.....	31	tropicamide ophth soln 1% (Mydracyl).....	107
TRESIBA FLEXTOUCH.....	31	tropium chloride cap er 24hr 60 mg.....	61
tretinoin cap 10 mg.....	19	tropium chloride tab 20 mg.....	61
tretinoin cream 0.025%, 0.05%, 0.1% (Retin-a).....	116	TRUDHESA.....	85
tretinoin gel 0.05% (Atralin).....	116	TRUE FOCUS SELF MONITORIN.....	123
tretinoin gel 0.01% (Retin-a).....	116	TRUE METRIX BLOOD GLUCOSE.....	123
tretinoin gel 0.025% (Retin-a).....	116	TRUE METRIX SELF MONITORI.....	123
tretinoin microsphere gel 0.04%, 0.1% (Retin-a micro).....	116	TRUETEST STRIPS.....	123
tretinoin microsphere gel 0.08% (Retin-a micro pump).....	116	TRUETRACK BLOOD GLUCOSE T.....	123
TRETEN.....	103	TRUETRACK TEST.....	123
TREXALL.....	19	TRULANCE.....	60
TREXIMET.....	85	TRULICITY.....	28
		TRUMENBA.....	13
		TRUVADA.....	8
		TUDORZA PRESSAIR.....	54

TUKYSA.....	19	VALTOCO 5 MG DOSE.....	89
TURALIO.....	19	VALTOCO 10 MG DOSE.....	89
TUXARIN ER.....	50	VALTOCO 15 MG DOSE.....	89
TWINRIX.....	13	VALTOCO 20 MG DOSE.....	89
TWIRLA.....	25	VALTREX.....	8
TWYNEO.....	116	VANCOCIN.....	10
TYBLUME.....	25	<b>vancomycin hcl cap 125 mg (base equivalent), 250 mg</b>	
TYBOST.....	8	<b>(base equivalent) (Vancocin).....</b>	<b>10</b>
TYKERB.....	19	<b>vancomycin hcl for oral soln 25 mg/ml (base</b>	
TYMLOS.....	36	<b>equivalent) (Firvanq).....</b>	<b>11</b>
TYRVAYA.....	107	<b>vancomycin hcl for oral soln 50 mg/ml (base</b>	
TYVASO.....	48	<b>equivalent) (Vancomycin hydrochlo).....</b>	<b>11</b>
TYVASO DPI MAINTENANCE KI.....	48	VANDAZOLE.....	62
TYVASO DPI TITRATION KIT.....	48	VANFLYTA.....	19
TYVASO REFILL.....	48	VANOS.....	117
TYVASO STARTER.....	48	VAQTA.....	13
<b>U</b>		<b>ardenafil hcl orally disintegrating tab 10 mg.....</b>	<b>49</b>
UBRELVY.....	85	<b>ardenafil hcl tab 2.5 mg, 5 mg, 10 mg, 20 mg.....</b>	<b>49</b>
UCERIS.....	21	<b>varenicline tartrate tab 0.5 mg (base equiv), 1 mg</b>	
UDENYCA.....	99	<b>(base equiv).....</b>	<b>75</b>
ULORIC.....	85	<b>varenicline tartrate tab 11 x 0.5 mg &amp; 42 x 1 mg start</b>	
ULTRAVATE.....	117	<b>pack.....</b>	<b>75</b>
UNISTRIP1 GENERIC.....	123	VARIVAX.....	13
UPNEEQ.....	107	VARUBI.....	58
UPTRAVI.....	48	VASCEPA.....	47
UPTRAVI TITRATION PACK.....	48	VASERETIC.....	43
UROCIT-K 5.....	63	VASOTEC.....	43
UROCIT-K 10.....	63	VAXELIS.....	13
UROCIT-K 15.....	63	VAXNEUVANCE.....	13
UROXATRAL.....	63	VCF VAGINAL CONTRACEPTIVE.....	62
URSO 250.....	60	VECAMYL.....	43
URSODIOL.....	60	VECTICAL.....	117
<b>ursodiol cap 300 mg.....</b>	<b>60</b>	VELIVET.....	25
<b>ursodiol tab 250 mg (Urso 250).....</b>	<b>60</b>	VELPHORO.....	60
<b>ursodiol tab 500 mg (Urso forte).....</b>	<b>60</b>	VELTASSA.....	129
URSO FORTE.....	60	VELTIN.....	117
<b>V</b>		VEMLIDY.....	8
VAGIFEM.....	62	VENCLEXTA.....	19
<b>valacyclovir hcl tab 500 mg, 1 gm (Valtrex).....</b>	<b>8</b>	VENCLEXTA STARTING PACK.....	19
VALCHLOR.....	117	VENLAFAXINE BESYLATE ER.....	66
VALCYTE.....	8	<b>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent),</b>	
<b>valganciclovir hcl for soln 50 mg/ml (base equiv)</b>		<b>75 mg (base equivalent), 150 mg (base equivalent)</b>	
<b>(Valcyte).....</b>	<b>8</b>	<b>(Effexor xr).....</b>	<b>66</b>
<b>valganciclovir hcl tab 450 mg (base equivalent)</b>		<b>venlafaxine hcl tab er 24hr 37.5 mg (base equivalent),</b>	
<b>(Valcyte).....</b>	<b>8</b>	<b>75 mg (base equivalent), 150 mg (base equivalent),</b>	
VALIUM.....	63	<b>225 mg (base equivalent).....</b>	<b>66</b>
<b>valproate sodium oral soln 250 mg/5ml (base</b>		<b>venlafaxine hcl tab 25 mg (base equivalent), 37.5 mg</b>	
<b>equiv).....</b>	<b>89</b>	<b>(base equivalent), 50 mg (base equivalent), 75 mg</b>	
<b>valproic acid cap 250 mg.....</b>	<b>89</b>	<b>(base equivalent), 100 mg (base equivalent).....</b>	<b>66</b>
VALSARTAN.....	43	VENTAVIS.....	48
<b>valsartan-hydrochlorothiazide tab 80-12.5 mg,</b>		VENTOLIN HFA.....	54
<b>160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg</b>		VEOZAH.....	36
<b>(Diovan hct).....</b>	<b>43</b>	<b>verapamil hcl cap er 24hr 120 mg, 180 mg, 240 mg</b>	
<b>valsartan tab 40 mg, 80 mg, 160 mg, 320 mg</b>		<b>(Verelan).....</b>	<b>39</b>
<b>(Diovan).....</b>	<b>43</b>	VERAPAMIL HCL ER.....	39
		VERAPAMIL HCL SR.....	39

verapamil hcl tab er 120 mg, 180 mg, 240 mg (Calan sr).....	39	VOGELXO.....	22
verapamil hcl tab 40 mg, 80 mg, 120 mg.....	39	VOGELXO PUMP.....	22
VERAPAMIL HYDROCHLORIDE E.....	39	VONJO.....	19
VERASENS BLOOD GLUCOSE TE.....	123	VONVENDI.....	103
VERDESO.....	117	VOQUEZNA DUAL PAK.....	57
VEREGEN.....	117	VOQUEZNA TRIPLE PAK.....	57
VERELAN.....	39	<b>voriconazole for susp 40 mg/ml (Vfend).....</b>	<b>5</b>
VERELAN PM.....	39	<b>voriconazole tab 50 mg, 200 mg (Vfend).....</b>	<b>5</b>
VERKAZIA.....	107	VORTEX HOLDING CHAMBER/MA.....	127
VERQUVO.....	48	VORTEX VALVED HOLDING CHA.....	127
VERSACLOZ.....	68	VOSEVI.....	8
VERZENIO.....	19	VOTRIENT.....	19
VESICARE.....	61	VOWST.....	60
VESICARE LS.....	61	VOXZOGO.....	36
VFEND.....	5	VRAYLAR.....	68
VIAGRA.....	49	VTAMA.....	117
VIBERZI.....	60	VUITY.....	107
VIBRAMYCIN.....	3	VUMERITY.....	75
VICTOZA.....	28	VUSION.....	117
<b>vigabatrin powd pack 500 mg (Sabril).....</b>	<b>89</b>	VYLEESI.....	75
<b>vigabatrin tab 500 mg (Sabril).....</b>	<b>89</b>	VYNDAMAX.....	48
VIGAMOX.....	107	VYENDAQUEL.....	48
VIIBRYD.....	66	VYTORIN.....	47
VIJOICE.....	129	VYVANSE.....	72
<b>vilazodone hcl tab 10 mg, 20 mg, 40 mg (Viibryd).....</b>	<b>66</b>	VYZULTA.....	107
VIMOVO.....	83	<b>W</b>	
VIMPAT.....	89	WAKIX.....	72
VINATE DHA RF.....	96	<b>warfarin sodium tab 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg, 10 mg.....</b>	<b>100</b>
VINATE II.....	96	WEGOVI.....	72
VINATE ONE.....	96	WELCHOL.....	47
VIOKACE.....	58	WELIREG.....	19
VIRACEPT.....	8	WELLBUTRIN SR.....	66
VIRAZOLE.....	8	WELLBUTRIN XL.....	66
VIREAD.....	8	WESCAP-C DHA.....	96
VISTARIL.....	63	WESCAP-PN DHA.....	96
VISTOGARD.....	118	WESNATAL DHA COMPLETE.....	96
VITAFOL FE+.....	96	WESNATE DHA.....	97
VITAFOL GUMMIES.....	96	WESTAB PLUS.....	97
VITAFOL-NANO.....	96	WESTGEL DHA.....	97
VITAFOL-OB.....	96	WIDE-SEAL SILICONE DIAPHR.....	127
VITAFOL-OB+DHA.....	96	WILATE.....	103
VITAFOL-ONE.....	96	WINLEVI.....	117
VITAFOL STRIPS.....	96	WYNZORA.....	117
VITAFOL ULTRA.....	96	<b>X</b>	
VITAMEDMD ONE RX/QUATREFO.....	96	XACIATO.....	62
VITAMEDMD REDICHEW RX.....	96	XADAGO.....	91
VITAPEARL.....	96	XALATAN.....	107
VITATHELY/GINGER.....	96	XALKORI.....	19
VITATRUE.....	96	XANAX.....	63
VITRAKVI.....	19	XANAX XR.....	63
VIVA DHA.....	96	XARELTO.....	100
VIVAGUARD INO BLOOD GLUCO.....	123	XARELTO STARTER PACK.....	100
VIVELLE-DOT.....	23	XATMEP.....	19
VIVJOA.....	5	XCOPRI.....	89
VIVOTIF.....	13		
VIZIMPRO.....	19		

XDEMVY.....	107	ZEJULA.....	20
XELJANZ.....	83	ZELAPAR.....	91
XELJANZ XR.....	83	ZELBORAF.....	20
XELODA.....	19	ZEMBRACE SYMTOUCH.....	85
XELPROS.....	107	ZEMPLAR.....	36
XELSTRYM.....	72	ZENPEP.....	58
XENAZINE.....	75	ZEPATIER.....	8
XENICAL.....	72	ZEPOSIA.....	76
XEPI.....	117	ZEPOSIA 7-DAY STARTER PAC.....	76
XERESE.....	117	ZEPOSIA STARTER KIT.....	76
XERMELO.....	60	ZERVIATE.....	107
XHANCE.....	50	ZESTORETIC.....	43
XIFAXAN.....	11	ZESTRIL.....	43
XIGDUO XR.....	28	ZETIA.....	47
XIIDRA.....	107	ZETONNA.....	50
XIMINO.....	3	ZIAGEN.....	9
XOFLUZA.....	8	ZIANA.....	117
XOLAIR.....	54	<b>zidovudine cap 100 mg (Retrovir).....</b>	<b>9</b>
XOPENEX HFA.....	54	<b>zidovudine syrup 10 mg/ml (Retrovir).....</b>	<b>9</b>
XOSPATA.....	19	<b>zidovudine tab 300 mg.....</b>	<b>9</b>
XPOVIO.....	20	ZIEXTENZO.....	99
XPOVIO 60 MG TWICE WEEKLY.....	20	<b>zileuton tab er 12hr 600 mg.....</b>	<b>54</b>
XPOVIO 80 MG TWICE WEEKLY.....	20	ZILXI.....	117
XTAMPZA ER.....	79	ZIMHI.....	118
XTANDI.....	20	ZIOPTAN.....	107
XULTOPHY 100/3.6.....	28	ZIPHEX.....	97
XURIDEN.....	36	<b>ziprasidone hcl cap 20 mg, 40 mg, 60 mg, 80 mg</b>	
XYNTHA.....	103	<b>(Geodon).....</b>	<b>68</b>
XYNTHA SOLOFUSE.....	103	ZIPSOR.....	84
XYOSTED.....	22	ZIRGAN.....	107
XYREM.....	75	ZITHROMAX.....	2
XYWAV.....	76	ZITHROMAX TRI-PAK.....	2
<b>Y</b>		ZITHROMAX Z-PAK.....	2
YASMIN 28.....	25	ZOCOR.....	47
YAZ.....	25	ZOKINVY.....	129
YONSA.....	20	ZOLINZA.....	20
YOSPRALA.....	103	<b>zolmitriptan nasal spray 5 mg/spray unit (Zomig).....</b>	<b>85</b>
YUFLYMA.....	83	<b>zolmitriptan orally disintegrating tab 2.5 mg, 5 mg.....</b>	<b>85</b>
YUFLYMA CD/UC/HS STARTER.....	83	<b>zolmitriptan tab 2.5 mg, 5 mg (Zomig).....</b>	<b>85</b>
YUFLYMA 1-PEN KIT.....	84	ZOLOFT.....	66
YUFLYMA 2-PEN KIT.....	84	ZOLPIDEM TARTRATE.....	69
YUFLYMA 2-SYRINGE KIT.....	84	<b>zolpidem tartrate tab er 6.25 mg, 12.5 mg (Ambien</b>	
YUPELRI.....	54	<b>cr).....</b>	<b>69</b>
YUSIMRY.....	84	<b>zolpidem tartrate tab 5 mg, 10 mg (Ambien).....</b>	<b>69</b>
<b>Z</b>		ZOMACTON.....	36
<b>zafirlukast tab 10 mg, 20 mg (Accolate).....</b>	<b>54</b>	ZOMIG.....	85
<b>zaleplon cap 5 mg, 10 mg.....</b>	<b>69</b>	ZONALON.....	117
ZALVIT.....	97	ZONEGRAN.....	90
ZANAFLEX.....	92	ZONISADE.....	90
ZARONTIN.....	89	<b>zonisamide cap 50 mg.....</b>	<b>90</b>
ZARXIO.....	99	<b>zonisamide cap 25 mg, 100 mg (Zonegran).....</b>	<b>90</b>
ZAVESCA.....	99	ZONTIVITY.....	103
ZAVZPRET.....	85	ZORTRESS.....	129
ZEGALOGUE.....	28	ZORYVE.....	117
ZEGERID.....	57	ZOVIRAX.....	117
		ZTALMY.....	90
		ZTLIDO.....	117



---

ZUBSOLV.....	79
ZYCLARA.....	117
ZYCLARA PUMP.....	117
ZYDELIG.....	20
ZYFLO.....	54
ZYKADIA.....	20
ZYLET.....	107
ZYMAXID.....	107
ZYPITAMAG.....	47
ZYPREXA.....	68
ZYPREXA ZYDIS.....	68
ZYTIGA.....	20
ZYVOX.....	11