

Preferred Drug List

The Oklahoma Complete Health Preferred Drug List (PDL) includes a list of medications covered by your prescription benefit. This list is updated often and may change.

To get the most up-to-date information, you may view the latest PDL on our website: <https://www.oklahomacompletehealth.com/providers/pharmacy.html> or call 1-833-750-3660 (TTY/TDD 711).

Preferred Drug Locator Instructions:

1. Within the PDF, click on the Edit menu, then click Find.
2. In the Find box, type the name of the medication you want to locate.
3. Click the Next button until you find the drug(s).



What is the Oklahoma Complete Health Preferred Drug List (PDL)?

The preferred drug list (which is also called a “formulary”) is a list showing the drugs that can be covered by your Oklahoma Complete Health Plan. The drug listed will be covered as long as you:

- Have a medical need for the drug
- Fill your drugs at an in network pharmacy
- Follow any other rules that may apply to you as a member

For more information on how to fill your drugs, please review your Member Handbook or call Oklahoma Complete Health Plan Member Services at **1-833-752-1664** (TTY/TDD **711**).

Will the Preferred Drug List change?

Yes, it will change weekly, especially if there is a new drug or there is a less expensive generic that becomes available. You will be notified if any changes are made to the drug list that may impact you.

Does the plan cover over-the-counter (OTC) drugs?

Yes, Oklahoma Complete Health covers certain OTC drugs. <https://oklahoma.gov/ohca/providers/types/pharmacy/covered-otc.html> All covered OTC drugs appear in the PDL. All OTC drugs must be written on a valid prescription by a licensed provider in order to be covered. If the OTC drug you need is not on the PDL; please refer to our OTC value add benefit on our website

<https://www.oklahomacompletehealth.com/providers/pharmacy.html>

How will I know what I will pay?

Children will not have a copay but most adults will have a \$4 copay. There are a few exceptions to the \$4 copay for adults.

How do I use the Preferred Drug List?

The best way to find your drug is by going to the back of this book to the index and looking it up by name. If the drug is in all CAPITAL LETTERS (EX: CIPRO TABS) the drug is a BRAND name drug and if the drug is in all lower case letters (ex: ciprofloxacin) the drug is a generic name drug. Next to your drug, you will see the page number where you can find coverage information.

What are brand & generic drugs?

A generic drug is approved by the Food and Drug Administration (FDA) as having the same active ingredient as the BRAND name drug, but often costs less. BRAND named drugs are typically newer and a generic is not available yet. However, there are some BRAND name drugs which are preferred over generic and that list is maintained here:

<https://oklahoma.gov/content/dam/ok/en/okhca/docs/providers/types/pharmacy/drug-lists/2024-lists/02.26.2024%20-%20Brand%20Required%20List.pdf>

Are there any limits on my drug coverage?

AGE LIMIT (AL):

Some medications are limited to patients of a certain age.

PRIOR AUTHORIZATION (PA):

Your provider may need to get approval from us before you fill some of your drug orders. Drugs that require prior authorization are found in the PDL by a PA in the **Additional Information** column. To find out more about this process, please call Member Services at **1-833-752-1664** (TTY/ TDD 711) and a representative will explain the process to you.

STEP THERAPY (ST):

Certain drugs are noted as being in different tiers. This usually means you must try similar medications in the same class in lower tiers before a higher tiered medication is approved. If you would like to request a step therapy exception, please speak to your provider and have your provider's office submit the step therapy exception form found on our website:

<https://www.oklahomacompletehealth.com/providers/pharmacy.html>

QUANTITY LIMITS (QL):

For certain drugs there are limits to the amount of a drug that will be covered for a period of time. You can tell if your drug needs a QL in

Additional Information column.

- You can also contact your provider to decide if you should first try a different drug on our list or different dose of the drug before you request an exception.
- Contact Member Services at **1-833-752-1664** (TTY/TDD 711) and ask how you or your provider can submit a quantity limit exception request.

- There are also quantity limits for controlled substances. These are outlined here:

<https://oklahoma.gov/ohca/providers/types/pharmacy/maintenance-drug-list/analgesics-narcotic.html>

SPECIALTY PHARMACY (SP)

DRUGS: Specialty drugs are certain prescription drugs used to treat special health conditions and often require special attention. These drugs often need a prior authorization before a prescription may be filled. Some pharmacies can not access specialty medications. If you are having difficulty finding a pharmacy to fill your specialty medication or have other questions regarding specialty medications, please contact Member Services at **1-833-752-1664** (TTY/TDD 711).

MAINTENANCE DRUGS (MP):

Certain medications are eligible for 90 day supplies. If you are an adult, please ensure your pharmacy is running these medications for 90 day supplies so your monthly six fill limit is extended. The full list of MP's are kept here:

<https://oklahoma.gov/ohca/providers/types/pharmacy/maintenance-drug-list.html>

What if my drug(s) is not on the Preferred Drug List?

Talk to your provider to decide if you should first try a different drug on the list before you request an exception. Member Services will tell you how you or your provider can ask for an exception if your drug(s) are not covered. Contact OKCH Member Services at **1-833-752-1664** (TTY/TDD 711) for further assistance.

Which drug categories are not covered by the Preferred Drug List?

The following drug categories are not part of the benefit:

- Fertility drugs
- Weight loss or weight gain
- Drug Efficacy Study Implementation (DESI). These are drugs that are not shown to be safe and effective.
- Bulk chemicals/powders
- Experimental and investigational drugs
- Drugs and devices not approved by the FDA

Contacts for Pharmacy Appeals/Grievances

Members: In the event that a member disagrees with the decision regarding coverage of a drug, the member may request an appeal by

calling Member Services at **1-833-752-1664** (TTY/TDD **711**) or emailing OKCompleteHealth_Appeals@Centene.com.

Providers: In the event that a provider disagrees with the decision regarding coverage of a drug, the provider may request an appeal by calling:

Medical Appeals: 833-522-2803
Behavioral Health Appeals: 866-714-7991
Pharmacy Appeals: 888-865-6531

After a decision is made, the provider will receive a response by mail. An expedited appeal may be requested at any time the provider believes the adverse determination might seriously endanger the life or health of a member by calling:

Medical Appeals: 833-522-2803
Behavioral Health Appeals: 866-714-7991
Pharmacy Appeals: 888-865-6531

Abbreviations:

- **PDL:** Preferred Drug List
- **AL:** Age Limit
- **PA:** Prior Authorization
- **ST:** Step Therapy
- **QL:** Quantity Limit
- **SP:** Specialty Medication
- **MP:** Maintenance drug eligible for 90 day supply

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders					
Amphetamines					
ADDERALL XR CP24 (amphetamine-dextroamphetamine)	1	QL(1 ea daily); AL(At least 5 yrs old)	amphetamine-dextroamphetamine CP24 1.25 MG-1.25 MG-1.25 MG-1.25 MG, 2.5 MG-2.5 MG-2.5 MG, 3.75 MG-3.75 MG-3.75 MG-3.75 MG, 5 MG-5 MG-5 MG-5 MG, 6.25 MG-6.25 MG-6.25 MG, 7.5 MG-7.5 MG-7.5 MG-7.5 MG	1	QL(1 ea daily); AL(At least 5 yrs old)
ADDERALL TABS 1.25 MG-1.25 MG-1.25 MG-1.25 MG, 1.875 MG-1.875 MG-1.875 MG-1.875 MG, 2.5 MG-2.5 MG-2.5 MG-2.5 MG, 3.125 MG-3.125 MG-3.125 MG-3.125 MG, 3.75 MG-3.75 MG-3.75 MG-3.75 MG, 5 MG-5 MG-5 MG-5 MG (amphetamine-dextroamphetamine)	1	QL(3 ea daily); AL(At least 5 yrs old)	amphetamine-dextroamphetamine TABS 7.5 MG-7.5 MG-7.5 MG-7.5 MG	1	QL(2 ea daily); AL(At least 5 yrs old)
ADDERALL TABS 7.5 MG-7.5 MG-7.5 MG-7.5 MG (amphetamine-dextroamphetamine)	1	QL(2 ea daily); AL(At least 5 yrs old)	amphetamine-dextroamphetamine TABS 1.25 MG-1.25 MG-1.25 MG-1.25 MG, 1.875 MG-1.875 MG-1.875 MG-1.875 MG, 2.5 MG-2.5 MG-2.5 MG-2.5 MG, 3.125 MG-3.125 MG-3.125 MG-3.125 MG, 3.75 MG-3.75 MG-3.75 MG-3.75 MG, 5 MG-5 MG-5 MG-5 MG	1	QL(3 ea daily); AL(At least 5 yrs old)
ADZENYS XR-ODT TBED	1	QL(1 ea daily); AL(At least 5 yrs old - Up to 10 yrs old); PA	DESOXYN (methamphetamine hcl)	9	QL(1 ea daily)
amphetamine sulfate TABS	1	QL(3 ea daily); AL(At least 5 yrs old)	DESOXYN (methamphetamine hcl)	9	QL(1 ea daily); AL(At least 5 yrs old)
amphetamine-dextroamphetamine CP24 9.375 MG-9.375 MG-9.375 MG-9.375 MG	1	QL(1 ea daily)	DEXEDRINE CP24 15 MG (dextroamphetamine sulfate)	2	QL(4 ea daily); AL(At least 5 yrs old)
amphetamine-dextroamphetamine CP24 12.5 MG-12.5 MG-12.5 MG-12.5 MG, 3.125 MG-3.125 MG-3.125 MG-3.125 MG, 6.25 MG-6.25 MG-6.25 MG-6.25 MG, 9.375 MG-9.375 MG-9.375 MG-9.375 MG	1	QL(1 ea daily); AL(At least 13 yrs old)	DEXEDRINE CP24 10 MG (dextroamphetamine sulfate)	2	QL(1 ea daily); AL(At least 5 yrs old)
			dextroamphetamine sulfate CP24 5 MG, 10 MG	2	QL(1 ea daily); AL(At least 5 yrs old)
			dextroamphetamine sulfate CP24 15 MG	2	QL(4 ea daily); AL(At least 5 yrs old)
			dextroamphetamine sulfate SOLN	1	AL(At least 5 yrs old - Up to 9 yrs old)

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<i>dextroamphetamine sulfate TABS 30 MG</i>	1	QL(2 ea daily); AL(At least 5 yrs old)	VYVANSE CHEW	1	Brand Required; QL(1 ea daily); AL(At least 5 yrs old - Up to 10 yrs old)
<i>dextroamphetamine sulfate TABS 2.5 MG, 5 MG, 7.5 MG, 10 MG, 15 MG, 20 MG</i>	1	QL(3 ea daily); AL(At least 5 yrs old)	XELSTRYM	1	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); AL(At least 5 yrs old - Up to 10 yrs old); PA
<i>dextroamphetamine sulfate TABS 5 MG, 10 MG</i>	1	QL(3 ea daily); AL(At least 5 yrs old); PA	Analeptics		
DYANAVEL XR SUER	3	QL(240 ml per 30 day(s) retail; 240 ml per 30 days mail); AL(At least 5 yrs old - Up to 10 yrs old); PA	CAFCIT SOLN IV 60 MG/3ML (<i>caffeine citrate</i>)	1	
DYANAVEL XR TBCR OR 5 MG, 10 MG, 15 MG, 20 MG	2	QL(1 ea daily); AL(At least 5 yrs old - Up to 10 yrs old); PA	CAFCIT SOLN IV 60 MG/3ML (<i>caffeine citrate</i>)	9	
EVEKEO ODT TBDP	1	QL(3 ea daily); AL(At least 5 yrs old - Up to 10 yrs old)	<i>caffeine & sodium benzoate</i>	1	
EVEKEO TABS (<i>amphetamine sulfate</i>)	1	QL(3 ea daily); AL(At least 5 yrs old)	<i>caffeine citrate SOLN OR</i>	1	
<i>lisdexamfetamine dimesylate CAPS</i>	1	QL(1 ea daily); AL(At least 5 yrs old); PA	CAFFEINE CITRATE SOLN IV (<i>caffeine citrate</i>)	9	
<i>lisdexamfetamine dimesylate CAPS</i>	1	Brand Required; QL(1 ea daily); AL(At least 5 yrs old); PA	CAFFEINE CITRATE SOLN IV (<i>caffeine citrate</i>)	1	
<i>lisdexamfetamine dimesylate CHEW</i>	1	QL(1 ea daily); AL(At least 5 yrs old); PA	Anti-Obesity Agents		
<i>methamphetamine hcl</i>	1	QL(1 ea daily); AL(At least 5 yrs old); PA	IMCIVREE	1	QL(9 ml per 30 day(s) retail; 9 ml per 30 days mail); AL(At least 6 yrs old); PA
MYDAYIS CP24 (<i>amphetamine-dextroamphetamine</i>)	1	QL(1 ea daily); AL(At least 13 yrs old)	WEGOVI	1	
VYVANSE CAPS	1	Brand Required; QL(1 ea daily); AL(At least 5 yrs old)	Attention-Deficit/Hyperactivity Disorder (ADHD) Agents		
			<i>atomoxetine hcl 10 MG, 18 MG, 25 MG, 40 MG, 60 MG</i>	1	QL(2 ea daily); AL(At least 5 yrs old)
			<i>atomoxetine hcl 80 MG, 100 MG</i>	1	QL(1 ea daily); AL(At least 5 yrs old); MP
			<i>clonidine hcl (adhd) TB12</i>	2	QL(4 ea daily); AL(At least 5 yrs old); PA

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>guanfacine hcl (adhd)</i>	1	QL(1 ea daily); AL(At least 5 yrs old); MP	AZSTARYS	3	QL(1 ea daily); AL(At least 5 yrs old); PA
INTUNIV (<i>guanfacine hcl (adhd)</i>)	1	QL(1 ea daily); AL(At least 5 yrs old); MP	CONCERTA TBCR 36 MG (<i>methylphenidate hcl</i>)	1	QL(2 ea daily); AL(At least 5 yrs old)
KAPVAY TB12 (<i>clonidine hcl (adhd)</i>)	9	QL(4 ea daily)	CONCERTA TBCR 18 MG, 27 MG, 54 MG (<i>methylphenidate hcl</i>)	1	QL(1 ea daily); AL(At least 5 yrs old)
ONYDA XR SUER	1	AL(At least 5 yrs old); PA	COTEMPLA XR-ODT TBED	1	QL(1 ea daily); AL(At least 5 yrs old - Up to 10 yrs old); PA
QELBREE 150 MG	1	QL(2 ea daily); AL(At least 6 yrs old); PA	DAYTRANA PTCH (<i>methylphenidate</i>)	1	Brand Required; QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); AL(At least 5 yrs old - Up to 10 yrs old)
QELBREE 200 MG	1	QL(3 ea daily); AL(At least 6 yrs old); PA	DAYTRANA PTCH 10 MG/9HR, 15 MG/9HR, 20 MG/9HR (<i>methylphenidate</i>)	9	Brand Required; QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); AL(At least 5 yrs old - Up to 10 yrs old)
QELBREE 100 MG	1	QL(1 ea daily); AL(At least 6 yrs old); PA			
STRATTERA 10 MG, 18 MG, 25 MG, 40 MG, 60 MG (<i>atomoxetine hcl</i>)	1	QL(2 ea daily); AL(At least 5 yrs old)			
STRATTERA 80 MG, 100 MG (<i>atomoxetine hcl</i>)	1	QL(1 ea daily); AL(At least 5 yrs old); MP			
Dopamine and Norepinephrine Reuptake Inhibitors (DNRIs)					
SUNOSI	1	QL(1 ea daily); PA			
Histamine H3-Receptor Antagonist/Inverse Agonists					
WAKIX	1	QL(2 ea daily); PA	<i>dexmethylphenidate hcl CP24</i>	1	Brand Required; QL(1 ea daily); AL(At least 5 yrs old); PA
Stimulants - Misc.			<i>dexmethylphenidate hcl TABS</i>	1	QL(2 ea daily); AL(At least 5 yrs old)
APTENSIO XR CP24 (<i>methylphenidate hcl</i>)	2	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); AL(At least 5 yrs old); PA	FOCALIN XR CP24 (<i>dexmethylphenidate hcl</i>)	1	Brand Required; QL(1 ea daily); AL(At least 5 yrs old)
<i>armodafinil</i>	1	QL(1 ea daily); AL(At least 18 yrs old); PA	FOCALIN XR CP24 15 MG (<i>dexmethylphenidate hcl</i>)	9	
			FOCALIN TABS 2.5 MG (<i>dexmethylphenidate hcl</i>)	9	

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FOCALIN TABS 10 MG (<i>dexmethylphenidate hcl</i>)	1	QL(2 ea daily); AL(At least 5 yrs old); PA	<i>methylphenidate hcl TB24 36 MG</i>	1	QL(2 ea daily); AL(At least 5 yrs old)
FOCALIN TABS (<i>dexmethylphenidate hcl</i>)	1	QL(2 ea daily); AL(At least 5 yrs old)	<i>methylphenidate hcl TB24 18 MG, 27 MG, 54 MG</i>	1	QL(1 ea daily); AL(At least 5 yrs old)
JORNAY PM CP24	3	QL(1 ea daily); AL(At least 5 yrs old); PA	<i>methylphenidate hcl TBCR 18 MG, 27 MG, 45 MG, 54 MG, 63 MG, 72 MG</i>	1	QL(1 ea daily); AL(At least 5 yrs old)
METADATE CD CPCR (<i>methylphenidate hcl</i>)	9	QL(1 ea daily)	<i>methylphenidate hcl TBCR 10 MG, 20 MG</i>	1	QL(3 ea daily); AL(At least 5 yrs old)
METHYLIN SOLN (<i>methylphenidate hcl</i>)	1	QL(600 ml per 30 day(s) retail; 600 ml per 30 days mail); AL(At least 5 yrs old - Up to 10 yrs old)	<i>methylphenidate hcl TBCR 36 MG</i>	1	QL(2 ea daily); AL(At least 5 yrs old)
<i>methylphenidate hcl CHEW</i>	1	QL(3 ea daily); AL(At least 5 yrs old - Up to 10 yrs old)	<i>methylphenidate PTCH</i>	1	Brand Required; QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); AL(At least 5 yrs old - Up to 10 yrs old)
<i>methylphenidate hcl CP24 10 MG, 20 MG, 40 MG, 60 MG</i>	2	QL(1 ea daily); AL(At least 5 yrs old); PA	<i>modafinil</i>	1	QL(1 ea daily); AL(At least 5 yrs old); PA
<i>methylphenidate hcl CP24 30 MG</i>	2	QL(2 ea daily); AL(At least 5 yrs old); PA	NUVIGIL (<i>armodafinil</i>)	1	QL(1 ea daily); AL(At least 18 yrs old); PA
<i>methylphenidate hcl CP24</i>	2	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); AL(At least 5 yrs old); PA	PROVIGIL (<i>modafinil</i>)	1	QL(1 ea daily); AL(At least 5 yrs old); PA
<i>methylphenidate hcl CPCR</i>	1	QL(1 ea daily); AL(At least 5 yrs old)	QUILLICHEW ER CHER	1	QL(1 ea daily); AL(At least 5 yrs old - Up to 10 yrs old)
<i>methylphenidate hcl SOLN</i>	1	QL(600 ml per 30 day(s) retail; 600 ml per 30 days mail); AL(At least 5 yrs old - Up to 10 yrs old)	QUILLIVANT XR SRER	2	60 mL bottle; QL(60 ml per 30 day(s) retail; 60 ml per 30 days mail); AL(At least 5 yrs old - Up to 10 yrs old); PA
<i>methylphenidate hcl TABS</i>	1	QL(3 ea daily); AL(At least 5 yrs old)			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
QUILLIVANT XR SRER	2	180 mL bottle; QL(540 ml per 30 day(s) retail; 540 ml per 30 days mail); AL(At least 5 yrs old - Up to 10 yrs old); PA	ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
QUILLIVANT XR SRER	2	120 mL bottle; QL(240 ml per 30 day(s) retail; 240 ml per 30 days mail); AL(At least 5 yrs old - Up to 10 yrs old); PA	Allergenic Extracts		
QUILLIVANT XR SRER	2	150 mL bottle; QL(300 ml per 30 day(s) retail; 300 ml per 30 days mail); AL(At least 5 yrs old - Up to 10 yrs old); PA	GRASTEK SUBL	1	QL(1 ea daily); AL(At least 5 yrs old - Up to 65 yrs old); PA
RELEXXII TBCR 36 MG	1	QL(2 ea daily); AL(At least 5 yrs old)	ODACTRA SUBL	1	QL(1 ea daily); AL(At least 12 yrs old - Up to 65 yrs old); PA
RELEXXII TBCR 36 MG	1	QL(2 ea daily); AL(At least 5 yrs old); PA	ORALAIR SUBL	1	QL(1 ea daily); AL(At least 5 yrs old - Up to 65 yrs old); PA
RELEXXII TBCR	1	QL(1 ea daily); AL(At least 5 yrs old)	PALFORZIA INITIAL DOSE ESCALATION CSPK	1	PA
RELEXXII TBCR 18 MG, 27 MG, 45 MG, 54 MG, 63 MG, 72 MG (methylphenidate hcl)	1	QL(1 ea daily); AL(At least 5 yrs old)	PALFORZIA LEVEL 10 CSPK	1	PA
RELEXXII TBCR 18 MG, 27 MG, 54 MG	1	QL(1 ea daily); AL(At least 5 yrs old); PA	PALFORZIA LEVEL 11 (MAINTENANCE) PACK	1	PA
RITALIN LA CP24 30 MG (methylphenidate hcl)	2	QL(2 ea daily); AL(At least 5 yrs old); PA	PALFORZIA LEVEL 11 (TITRATION) PACK	1	PA
RITALIN LA CP24 10 MG, 20 MG, 40 MG (methylphenidate hcl)	2	QL(1 ea daily); AL(At least 5 yrs old); PA	PALFORZIA LEVEL 1 CSPK	1	PA
RITALIN TABS (methylphenidate hcl)	1	QL(3 ea daily); AL(At least 5 yrs old)	PALFORZIA LEVEL 2 CSPK	1	PA
			PALFORZIA LEVEL 3 CSPK	1	PA
			PALFORZIA LEVEL 4 CSPK	1	PA
			PALFORZIA LEVEL 5 CSPK	1	PA
			PALFORZIA LEVEL 6 CSPK	1	PA
			PALFORZIA LEVEL 7 CSPK	1	PA
			PALFORZIA LEVEL 8 CSPK	1	PA
			PALFORZIA LEVEL 9 CSPK	1	PA

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RAGWITEK SUBL	1	QL(1 ea daily); AL(At least 5 yrs old - Up to 65 yrs old); PA
AMEBICIDES		
Amebicides		
SOLOSEC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); PA
AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections		
Aminoglycosides		
<i>amikacin sulfate SOLN 1 GM/4ML, 500 MG/2ML</i>	1	
ARIKAYCE	1	QL(235.2 ml per 28 day(s) retail; 235 ml per 28 days mail); PA
BETHKIS NEBU (<i>tobramycin</i>)	9	QL(224 ml per 55 day(s) retail; 224 ml per 55 days mail)
BETHKIS NEBU (<i>tobramycin</i>)	1	QL(224 ml per 55 day(s) retail; 224 ml per 55 days mail); PA
<i>gentamicin in saline 0.8 MG/ML-0.9 %, 1 MG/ML-0.9 %, 1.2 MG/ML-0.9 %, 1.6 MG/ML-0.9 %, 2 MG/ML-0.9 %</i>	1	
<i>gentamicin sulfate IJ</i>	1	
KITABIS PAK NEBU (<i>tobramycin</i>)	1	QL(280 ml per 55 day(s) retail; 280 ml per 55 days mail); PA
<i>neomycin sulfate TABS</i>	1	
<i>streptomycin sulfate SOLR</i>	1	
TOBI PODHALER CAPS	1	QL(224 ea per 55 day(s) retail; 224 ea per 55 days mail); PA

Drug Name	Drug Tier	Requirements/Limits
TOBI NEBU (<i>tobramycin</i>)	9	QL(280 ml per 55 day(s) retail; 280 ml per 55 days mail)
TOBI NEBU (<i>tobramycin</i>)	1	QL(280 ml per 55 day(s) retail; 280 ml per 55 days mail); PA
TOBRAMYCIN SULFATE POWD	1	
<i>tobramycin sulfate SOLN IJ</i>	1	
<i>tobramycin sulfate SOLR</i>	1	
<i>tobramycin NEBU</i>	1	QL(280 ml per 55 day(s) retail; 280 ml per 55 days mail); PA
<i>tobramycin NEBU</i>	1	QL(224 ml per 55 day(s) retail; 224 ml per 55 days mail); PA
ZEMDRI	1	PA
ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions		
Antirheumatic - Enzyme Inhibitors		
OLUMIANT 1 MG, 2 MG	1	QL(1 ea daily); PA
RINVOQ LQ SOLN	1	AL(At least 2 yrs old - Up to 10 yrs old); PA
RINVOQ TB24 15 MG, 30 MG	1	QL(1 ea daily); PA
RINVOQ TB24 45 MG	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); PA
XELJANZ XR TB24	1	QL(1 ea daily); PA
XELJANZ SOLN	1	QL(480 ml per 48 day(s) retail; 480 ml per 48 days mail); AL(At least 2 yrs old - Up to 10 yrs old); PA

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
XELJANZ TABS	1	QL(2 ea daily); PA	ABRILADA 1-PEN KIT AJKT	4	PA
Antirheumatic Antimetabolites			ABRILADA 2-PEN KIT AJKT	4	PA
METHOTREXATE	1		ABRILADA PSKT	4	PA
OTREXUP SOAJ 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	1	QL(1.6 ml per 28 day(s) retail; 2 ml per 28 days mail); PA	ADALIMUMAB-AACF (2 PEN) AJKT	4	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); PA
RASUVO SOAJ 25 MG/0.5ML	1	QL(2 ml per 28 day(s) retail; 2 ml per 28 days mail); PA	ADALIMUMAB-AACF (2 SYRINGE) PSKT	1	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); PA
RASUVO SOAJ 10 MG/0.2ML	1	QL(0.8 ml per 28 day(s) retail; 1 ml per 28 days mail); PA	ADALIMUMAB-AACF STARTER PACK/CD/UC/HS (6 PEN) AJKT	1	PA
RASUVO SOAJ 30 MG/0.6ML	1	QL(2.4 ml per 28 day(s) retail; 2 ml per 28 days mail); PA	ADALIMUMAB-AACF STARTER PACK/PSORIASIS/UEVEITIS (4 PEN) AJKT	1	PA
RASUVO SOAJ 17.5 MG/0.35ML	1	QL(1.4 ml per 28 day(s) retail; 1 ml per 28 days mail); PA	ADALIMUMAB-AATY 1-PEN KIT AJKT 80 MG/0.8ML	4	PA
RASUVO SOAJ 12.5 MG/0.25ML	1	QL(1 ml per 28 day(s) retail; 1 ml per 28 days mail); PA	ADALIMUMAB-AATY 1-PEN KIT AJKT 40 MG/0.4ML	4	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); PA
RASUVO SOAJ 15 MG/0.3ML	1	QL(1.2 ml per 28 day(s) retail; 1 ml per 28 days mail); PA	ADALIMUMAB-AATY 2-PEN KIT AJKT	4	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); PA
RASUVO SOAJ 20 MG/0.4ML	1	QL(1.6 ml per 28 day(s) retail; 2 ml per 28 days mail); PA	ADALIMUMAB-AATY 2-SYRINGE KIT PSKT 20 MG/0.2ML	4	PA
RASUVO SOAJ 7.5 MG/0.15ML	1	QL(0.6 ml per 28 day(s) retail; 1 ml per 28 days mail); PA	ADALIMUMAB-AATY 2-SYRINGE KIT PSKT 40 MG/0.4ML	4	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); PA
RASUVO SOAJ 22.5 MG/0.45ML	1	QL(1.8 ml per 28 day(s) retail; 2 ml per 28 days mail); PA	ADALIMUMAB-ADAZ SOAJ	4	QL(1.6 ml per 28 day(s) retail; 2 ml per 28 days mail); PA
Anti-TNF-alpha - Monoclonal Antibodies			ADALIMUMAB-ADAZ SOSY	4	QL(1.6 ml per 28 day(s) retail; 2 ml per 28 days mail); PA

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ADALIMUMAB-ADB M CROHNS/UC/HS STARTER AJKT	4	QL(6 ea per 28 day(s) retail; 6 ea per 28 days mail); PA	AMJEVITA SOAJ 80 MG/0.8ML	4	PA
ADALIMUMAB-ADB M PSORIASIS/UVEITIS STARTER AJKT	4	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); PA	AMJEVITA SOAJ 40 MG/0.8ML	4	QL(3.2 ml per 28 day(s) retail; 3 ml per 28 days mail); PA
ADALIMUMAB-ADB M STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT	4	PA	AMJEVITA SOAJ 40 MG/0.4ML	4	QL(1.6 ml per 28 day(s) retail; 2 ml per 28 days mail); PA
ADALIMUMAB-ADB M STARTER PACKAGE FOR PSORIASIS/UVEITIS AJKT	4	PA	AMJEVITA SOSY 10 MG/0.2ML	4	QL(0.4 ml per 28 day(s) retail); PA
ADALIMUMAB-ADB M AJKT	4	PA	AMJEVITA SOSY 40 MG/0.8ML	4	QL(3.2 ml per 28 day(s) retail; 3 ml per 28 days mail); PA
ADALIMUMAB-ADB M AJKT	4	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); PA	AMJEVITA SOSY 20 MG/0.2ML	4	PA
ADALIMUMAB-ADB M PSKT 40 MG/0.4ML	4	PA	AMJEVITA SOSY 20 MG/0.4ML	4	QL(0.8 ml per 28 day(s) retail; 1 ml per 28 days mail); PA
ADALIMUMAB-ADB M PSKT 10 MG/0.2ML, 20 MG/0.4ML	4	QL(2 ea per 28 day(s) retail; 2 ea per 28 days mail); PA	AMJEVITA SOSY 40 MG/0.4ML	4	QL(1.6 ml per 28 day(s) retail; 2 ml per 28 days mail); PA
ADALIMUMAB-ADB M PSKT 40 MG/0.8ML	4	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); PA	CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT	4	QL(6 ea per 28 day(s) retail; 6 ea per 28 days mail); PA
ADALIMUMAB-FKJP AJKT	4	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); PA	CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT	4	PA
ADALIMUMAB-FKJP PSKT 40 MG/0.8ML	4	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); PA	CYLTEZO STARTER PACKAGE FOR PSORIASIS/UVEITIS AJKT	4	PA
ADALIMUMAB-FKJP PSKT 20 MG/0.4ML	4	QL(2 ea per 28 day(s) retail; 2 ea per 28 days mail); PA	CYLTEZO STARTER PACKAGE FOR PSORIASIS AJKT	4	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); PA
ADALIMUMAB-RYVK (2 PEN) AJKT	4	PA	CYLTEZO AJKT	4	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); PA
ADALIMUMAB-RYVK PSKT	4	PA	CYLTEZO AJKT	4	PA

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CYLTEZO PSKT 40 MG/0.4ML	4	PA	HUMIRA PEN AJKT SC 40 MG/0.8ML	2	QL(6 ea per 28 day(s) retail; 6 ea per 28 days mail)
CYLTEZO PSKT 10 MG/0.2ML, 20 MG/0.4ML	4	QL(2 ea per 28 day(s) retail; 2 ea per 28 days mail); PA	HUMIRA PEN AJKT SC 40 MG/0.4ML	2	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail)
CYLTEZO PSKT 40 MG/0.8ML	4	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); PA	HUMIRA PEN AJKT SC 80 MG/0.8ML	2	QL(3 ea per 28 day(s) retail; 3 ea per 28 days mail)
HADLIMA PUSHTOUCH SOAJ	4	QL(3.2 ml per 28 day(s) retail; 3 ml per 28 days mail); PA	HUMIRA PEN-CD/UC/HS STARTER AJKT SC 80 MG/0.8ML	2	QL(3 ea per 28 day(s) retail; 3 ea per 28 days mail)
HADLIMA PUSHTOUCH SOAJ	4	QL(1.6 ml per 28 day(s) retail; 2 ml per 28 days mail); PA	HUMIRA PEN-PEDIATRIC UC STARTER PACK AJKT SC 80 MG/0.8ML	2	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail)
HADLIMA SOSY	4	QL(1.6 ml per 28 day(s) retail; 2 ml per 28 days mail); PA	HUMIRA PEN-PS/UV STARTER AJKT SC	2	QL(3 ea per 28 day(s) retail; 3 ea per 28 days mail)
HADLIMA SOSY	4	QL(3.2 ml per 28 day(s) retail; 3 ml per 28 days mail); PA	HUMIRA PSKT 40 MG/0.4ML, 40 MG/0.8ML	2	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail)
HULIO AJKT	4	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); PA	HUMIRA PSKT 10 MG/0.1ML, 20 MG/0.2ML	2	QL(2 ea per 28 day(s) retail; 2 ea per 28 days mail)
HULIO PSKT 20 MG/0.4ML	4	QL(2 ea per 28 day(s) retail; 2 ea per 28 days mail); PA	HYRIMOZ CROHN'S DISEASE AND ULCERATIVE COLITIS STARTER PACK SOAJ	4	QL(3.2 ml per 28 day(s) retail; 3 ml per 28 days mail); PA
HULIO PSKT 40 MG/0.8ML	4	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); PA	HYRIMOZ PEDIATRIC CROHNSDISEASE STARTER PACK SOSY	4	QL(3.2 ml per 28 day(s) retail; 3 ml per 28 days mail); PA
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT 80 MG/0.8ML	2	QL(3 ea per 28 day(s) retail; 3 ea per 28 days mail)	HYRIMOZ PEDIATRIC CROHN'SDISEASE STARTER PACK SOSY	4	PA
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT	2	QL(2 ea per 28 day(s) retail; 2 ea per 28 days mail)	HYRIMOZ PLAQUE PSORIASIS/UEVITIS STARTER PACK SOAJ	4	QL(1.6 ml per 28 day(s) retail; 2 ml per 28 days mail); PA

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HYRIMOZ SOAJ 40 MG/0.4ML	4	QL(1.6 ml per 28 day(s) retail; 2 ml per 28 days mail); PA	SIMPONI SOSY 50 MG/0.5ML	1	QL(0.5 ml per 28 day(s) retail); PA
HYRIMOZ SOAJ 80 MG/0.8ML	4	QL(3.2 ml per 28 day(s) retail; 3 ml per 28 days mail); PA	SIMPONI SOSY 100 MG/ML	1	QL(1 ml per 28 day(s) retail; 1 ml per 28 days mail); PA
HYRIMOZ SOSY 10 MG/0.1 ML	4	QL(0.2 ml per 28 day(s) retail); PA	YUFLYMA 1-PEN KIT AJKT 80 MG/0.8ML	4	PA
HYRIMOZ SOSY 20 MG/0.2ML	4	QL(0.4 ml per 28 day(s) retail); PA	YUFLYMA 1-PEN KIT AJKT 40 MG/0.4ML	4	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); PA
HYRIMOZ SOSY 40 MG/0.4ML	4	QL(1.6 ml per 28 day(s) retail; 2 ml per 28 days mail); PA	YUFLYMA 2-PEN KIT AJKT	4	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); PA
IDACIO (2 PEN) AJKT	4	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); PA	YUFLYMA 2-SYRINGE KIT PSKT 40 MG/0.4ML	4	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); PA
IDACIO (2 SYRINGE) PSKT	4	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); PA	YUFLYMA 2-SYRINGE KIT PSKT 20 MG/0.2ML	4	PA
IDACIO STARTER PACKAGE FOR CROHNS DISEASE AJKT	4	QL(3 ea per 28 day(s) retail; 3 ea per 28 days mail); PA	YUFLYMA CD/UC/HS STARTER AJKT	4	PA
IDACIO STARTER PACKAGE FOR PLAQUE PSORIASIS AJKT	4	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); PA	YUSIMRY SC 40 MG/0.8ML	4	QL(3.2 ml per 28 day(s) retail; 3 ml per 28 days mail); PA
SIMLANDI 1-PEN KIT AJKT	4	PA	Gold Compounds		
SIMLANDI 2-PEN KIT AJKT	4	PA	RIDAURA	1	
SIMPONI ARIA SOLN	1	QL(4 ml per 28 day(s) retail; 4 ml per 28 days mail); PA	Interleukin-1 Blockers		
SIMPONI SOAJ 100 MG/ML	1	QL(1 ml per 28 day(s) retail; 1 ml per 28 days mail); PA	ARCALYST	1	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); PA
SIMPONI SOAJ 50 MG/0.5ML	1	QL(0.5 ml per 28 day(s) retail); PA	Interleukin-1 Receptor Antagonist (IL-1Ra)		
			KINERET SOSY	2	QL(18.76 ml per 28 day(s) retail; 19 ml per 28 days mail)
			Interleukin-1beta Blockers		

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ILARIS SOLN	1	QL(2 ml per 28 day(s) retail; 2 ml per 28 days mail); PA	CHILDRENS ADVIL SUSP 100 MG/5ML (<i>ibuprofen</i>)	9	QL(120 ml per fill retail); RX/OTC
Interleukin-6 Receptor Inhibitors			CHILDRENS MOTRIN SUSP 100 MG/5ML (<i>ibuprofen</i>)	9	QL(120 ml per fill retail); RX/OTC
ACTEMRA ACTPEN SOAJ	1	PA	COMBOGESIC SOLN	1	PA
ACTEMRA SOLN	1	PA	DAYPRO TABS (<i>oxaprozin</i>)	2	ST
ACTEMRA SOSY	1	QL(3.6 ml per 28 day(s) retail; 4 ml per 28 days mail); PA	<i>diclofenac potassium</i> CAPS	1	PA
KEVZARA SOAJ	1	QL(2.28 ml per 28 day(s) retail; 2 ml per 28 days mail); PA	<i>diclofenac potassium</i> TABS 50 MG	2	ST
KEVZARA SOSY	1	QL(2.28 ml per 28 day(s) retail; 2 ml per 28 days mail); PA	<i>diclofenac potassium</i> TABS 25 MG	1	PA
TOFIDENCE	1	PA	<i>diclofenac sodium</i> TB24	2	
TYENNE SOAJ	1	PA	<i>diclofenac sodium</i> TBEC 50 MG, 75 MG	1	
TYENNE SOLN	1	PA	<i>diclofenac sodium</i> TBEC 25 MG	2	QL(2 ea daily); ST
TYENNE SOSY	1	PA	<i>diclofenac w/ misoprostol</i> TBEC	2	ST
Nonsteroidal Anti-inflammatory Agents (NSAIDs)			DUEXIS (<i>ibuprofen-famotidine</i>)	1	PA
ANAPROX DS TABS (<i>naproxen sodium</i>)	9	ST	EC-NAPROSYN TBEC (<i>naproxen</i>)	9	
ARTHROTEC 50 TBEC (<i>diclofenac w/ misoprostol</i>)	2	ST	<i>etodolac</i> CAPS	2	ST
ARTHROTEC 75 TBEC (<i>diclofenac w/ misoprostol</i>)	2	ST	<i>etodolac</i> TABS	1	
CALDOLOR SOLN	1	PA	<i>etodolac</i> TB24	2	ST
CELEBREX 50 MG, 100 MG, 200 MG (<i>celecoxib</i>)	1		FELDENE CAPS 10 MG (<i>piroxicam</i>)	2	ST
CELEBREX (<i>celecoxib</i>)	9		FELDENE CAPS 20 MG (<i>piroxicam</i>)	9	ST
CELEBREX 400 MG (<i>celecoxib</i>)	1	PA	<i>fenoprofen calcium</i> CAPS 400 MG	1	PA
<i>celecoxib</i> 400 MG	1	PA	<i>fenoprofen calcium</i> TABS	1	PA
<i>celecoxib</i> 50 MG, 100 MG, 200 MG	1		<i>flurbiprofen</i> TABS 100 MG	1	
			<i>ibuprofen lysine</i>	1	
			<i>ibuprofen-famotidine</i>	1	PA
			IBUPROFEN POWD	1	

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<i>ibuprofen SUSP 100 MG/5ML</i>	1	QL(120 ml per fill retail); AL(Up to 20 yrs old); PA; RX/OTC	NAPRELAN TB24 500 MG (<i>naproxen sodium</i>)	9	
<i>ibuprofen TABS 400 MG, 600 MG, 800 MG</i>	1		NAPROSYN SUSP (<i>naproxen</i>)	1	
INDOCIN SUSP (<i>indomethacin</i>)	9		NAPROSYN TABS 500 MG (<i>naproxen</i>)	9	
INDOMETHACIN	1	PA	<i>naproxen sodium</i> TABS 275 MG, 550 MG	2	ST
<i>indomethacin CAPS 25 MG, 50 MG</i>	1	QL(8 ea daily)	<i>naproxen sodium</i> TB24	1	PA
<i>indomethacin CPR</i>	1	PA	<i>naproxen-esomeprazole magnesium</i>	1	PA
<i>indomethacin SUPP</i>	1	PA	<i>naproxen SUSP</i>	1	
<i>indomethacin SUSP</i>	1	AL(Up to 10 yrs old); PA	<i>naproxen TABS</i>	1	
<i>ketoprofen CAPS 25 MG</i>	1	PA	<i>naproxen TBEC</i>	1	
<i>ketoprofen CP24</i>	1	PA	NEOPROFEN (<i>ibuprofen lysine</i>)	1	
<i>ketorolac tromethamine SOLN IM 30 MG/ML, 60 MG/2ML</i>	1		<i>oxaprozin</i> TABS	2	ST
KETOROLAC TROMETHAMINE SOLN NA 15.75 MG/SPRAY	1	QL(5 ea per 5 day(s) retail; 5 ea per 5 days mail); PA	<i>piroxicam</i> CAPS	2	ST
<i>ketorolac tromethamine TABS</i>	1	QL(20 ea per 5 day(s) retail; 20 ea per 5 days mail)	RELAFEN DS	1	QL(1 ea daily); PA
LODINE TABS (<i>etodolac</i>)	9		<i>sulindac</i> TABS	1	
<i>meclofenamate sodium CAPS</i>	1	PA	TIVORBEX CAPS (<i>indomethacin</i>)	9	
<i>mefenamic acid CAPS</i>	1	PA	TOLECTIN 600 TABS	2	ST
<i>meloxicam CAPS</i>	1	QL(1 ea daily); PA	<i>tolmetin sodium</i> CAPS	2	ST
<i>meloxicam TABS</i>	1		<i>tolmetin sodium</i> TABS 600 MG	2	ST
<i>nabumetone</i>	1		VIMOVO (<i>naproxen-esomeprazole magnesium</i>)	1	PA
NALFON CAPS (<i>fenoprofen calcium</i>)	1	PA	ZIPSOR CAPS (<i>diclofenac potassium</i>)	9	
NALFON TABS (<i>fenoprofen calcium</i>)	1	PA	ZYNRELEF	1	
NAPRELAN TB24 (<i>naproxen sodium</i>)	1	PA	Phosphodiesterase 4 (PDE4) Inhibitors		
			OTEZLA TABS 30 MG	2	QL(2 ea daily)
			OTEZLA TABS 20 MG	2	
			OTEZLA TBPK	2	QL(55 ea per 28 day(s) retail; 55 ea per 28 days mail)
			OTEZLA TBPK	2	

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Pyrimidine Synthesis Inhibitors			<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG, 40 MG-50 MG-325 MG</i>		
ARAVA (<i>leflunomide</i>)	1	QL(1 ea daily)	1 QL(4 ea daily); AL(At least 10 yrs old); PA		
<i>leflunomide</i>	1	QL(1 ea daily)	<i>butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG</i>		
Selective Costimulation Modulators			1 QL(4 ea daily); AL(At least 10 yrs old)		
ORENCIA CLICKJECT SOAJ	1	QL(4 ml per 28 day(s) retail; 4 ml per 28 days mail); PA	<i>butalbital-acetaminophen CAPS 50 MG-300 MG</i>		
ORENCIA SOLR	1	PA	1 QL(4 ea daily); AL(At least 10 yrs old); PA		
ORENCIA SOSY 125 MG/ML	1	QL(4 ml per 28 day(s) retail; 4 ml per 28 days mail); PA	<i>butalbital-acetaminophen TABS 50 MG-300 MG</i>		
ORENCIA SOSY 87.5 MG/0.7ML	1	QL(2.8 ml per 28 day(s) retail; 3 ml per 28 days mail); PA	1 QL(4 ea daily); AL(At least 10 yrs old)		
ORENCIA SOSY 50 MG/0.4ML	1	QL(1.6 ml per 28 day(s) retail; 2 ml per 28 days mail); PA	<i>butalbital-acetaminophen TABS 50 MG-325 MG</i>		
Soluble Tumor Necrosis Factor Receptor Agents			1 QL(4 ea daily); AL(At least 10 yrs old)		
ENBREL MINI SOCT	2	QL(8 ml per 28 day(s) retail; 8 ml per 28 days mail)	<i>butalbital-aspirin-caffeine CAPS</i>		
ENBREL SURECLICK SOAJ	2	QL(8 ml per 28 day(s) retail; 8 ml per 28 days mail)	1 QL(4 ea daily); AL(At least 10 yrs old)		
ENBREL SOLN	2	QL(4 ml per 28 day(s) retail; 4 ml per 28 days mail)	ESGIC TABS (<i>butalbital-acetaminophen-caffeine</i>)		
ENBREL SOSY 50 MG/ML	2	QL(8 ml per 28 day(s) retail; 8 ml per 28 days mail)	1 QL(4 ea daily); AL(At least 10 yrs old); PA		
ENBREL SOSY 25 MG/0.5ML	2	QL(4 ml per 28 day(s) retail; 4 ml per 28 days mail)	FIORICET CAPS (<i>butalbital-acetaminophen-caffeine</i>)		
ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions			Analgesics Other		
Analgesic Combinations			<i>acetaminophen SOLN OR 160 MG/5ML</i>		
			1		
			<i>acetaminophen SOLN IV 10 MG/ML, 1000 MG/100ML</i>		
			1		
			<i>acetaminophen SUSP 80 MG/2.5ML</i>		
			1		
			<i>clonidine hcl (analgesia) EP</i>		
			1		
			DURACLON EP 100 MCG/ML (<i>clonidine hcl (analgesia)</i>)		
			1		
			TYLENOL CHILDRENS PAIN +FEVER SUSP (<i>acetaminophen</i>)		
			9		
			TYLENOL CHILDRENS SUSP (<i>acetaminophen</i>)		
			9		

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TYLENOL FOR CHILDREN/ADULTS SUSP (<i>acetaminophen</i>)	9	
TYLENOL INFANTS PAIN+FEVER SUSP (<i>acetaminophen</i>)	9	
Salicylates		
<i>aspirin CHEW</i>	1	QL(1 ea daily); AL(At least 10 yrs old - Up to 50 yrs old); MP
<i>aspirin TBEC 81 MG</i>	1	QL(1 ea daily); AL(At least 10 yrs old - Up to 50 yrs old); MP
<i>diflunisal TABS</i>	1	
DOLOBID TABS 250 MG	1	PA
<i>salsalate</i>	1	
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions		
Opioid Agonists		
ACTIQ LPOP (<i>fentanyl citrate</i>)	9	QL(120 ea per 30 day(s) retail; 120 ea per 30 days mail); AL(At least 10 yrs old)
ACTIQ LPOP 400 MCG (<i>fentanyl citrate</i>)	1	QL(120 ea per 30 day(s) retail; 120 ea per 30 days mail); AL(At least 10 yrs old); PA
CODEINE PHOSPHATE POWD	1	
<i>codeine sulfate TABS 30 MG</i>	1	QL(4 ea daily); AL(At least 12 yrs old)
CODEINE SULFATE TABS	1	QL(4 ea daily); AL(At least 12 yrs old)
CONZIP CP24 (<i>tramadol hcl</i>)	1	QL(1 ea daily); AL(At least 12 yrs old); PA
DEMEROL SOLN IJ	1	

Drug Name	Drug Tier	Requirements/Limits
DEMEROL SOLN IJ (<i>meperidine hcl</i>)	1	
DEMEROL SOLN IJ (<i>meperidine hcl</i>)	9	
DILAUDID LIQD (<i>hydromorphone hcl</i>)	1	AL(Up to 12 yrs old)
DILAUDID SOLN IJ (<i>hydromorphone hcl</i>)	9	
DILAUDID SOLN IJ (<i>hydromorphone hcl</i>)	1	
DILAUDID SOLN IJ	1	
DILAUDID TABS (<i>hydromorphone hcl</i>)	1	QL(4 ea daily); AL(At least 10 yrs old)
DSUVIA SUBL	1	
<i>fentanyl citrate LPOP</i>	1	QL(120 ea per 30 day(s) retail; 120 ea per 30 days mail); AL(At least 10 yrs old); PA
FENTANYL CITRATE POWD	1	
<i>fentanyl citrate SOLN IJ 50 MCG/ML, 100 MCG/2ML, 250 MCG/5ML, 500 MCG/10ML, 1000 MCG/20ML, 2500 MCG/50ML</i>	1	
FENTANYL CITRATE SOLN IJ 50 MCG/ML (<i>fentanyl citrate</i>)	1	
FENTANYL CITRATE SOLN IJ (<i>fentanyl citrate</i>)	9	
<i>fentanyl citrate SOSY IJ</i>	1	
FENTANYL CITRATE SOSY IJ 25 MCG/0.5ML, 50 MCG/ML	1	
FENTANYL CITRATE SOSY IJ (<i>fentanyl citrate</i>)	9	
FENTANYL CITRATE SOSY IJ (<i>fentanyl citrate</i>)	1	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>fentanyl citrate TABS 200 MCG, 400 MCG, 600 MCG, 800 MCG</i>	1	QL(112 ea per 30 day(s) retail; 112 ea per 30 days mail); AL(At least 10 yrs old); PA	<i>hydromorphone hcl TB24 8 MG, 16 MG, 32 MG</i>	1	QL(1 ea daily); AL(At least 10 yrs old); PA
<i>fentanyl PT72 12 MCG/HR, 25 MCG/HR, 37.5 MCG/HR, 50 MCG/HR, 62.5 MCG/HR, 75 MCG/HR, 87.5 MCG/HR</i>	1	QL(10 ea per 30 day(s) retail; 10 ea per 30 days mail); AL(At least 10 yrs old); PA	<i>hydromorphone hcl TB24 12 MG</i>	1	QL(3 ea daily); AL(At least 10 yrs old); PA
<i>fentanyl PT72 100 MCG/HR</i>	1	QL(20 ea per 30 day(s) retail; 20 ea per 30 days mail); AL(At least 10 yrs old); PA	HYDROMORPHONE HYDROCHLORIDE SOLN IJ 1 MG/ML, 2 MG/ML, 4 MG/ML, 10 MG/ML	1	
FENTORA TABS (<i>fentanyl citrate</i>)	1	QL(112 ea per 30 day(s) retail; 112 ea per 30 days mail); AL(At least 10 yrs old); PA	HYDROMORPHONE HYDROCHLORIDE SOLN IJ (<i>hydromorphone hcl</i>)	1	
FENTORA TABS (<i>fentanyl citrate</i>)	9	QL(112 ea per 30 day(s) retail; 112 ea per 30 days mail); AL(At least 10 yrs old)	HYDROMORPHONE HYDROCHLORIDE SOLN IJ (<i>hydromorphone hcl</i>)	9	
<i>hydrocodone bitartrate CP12</i>	1	QL(2 ea daily); AL(At least 10 yrs old); PA	HYSINGLA ER T24A	1	QL(1 ea daily); AL(At least 10 yrs old); PA
<i>hydrocodone bitartrate T24A</i>	1	QL(1 ea daily); AL(At least 10 yrs old); PA	INFUMORPH 200 (<i>morphine sulfate for continuous microinfusion</i>)	1	
<i>hydromorphone hcl LIQD</i>	1	AL(Up to 12 yrs old)	INFUMORPH 500 (<i>morphine sulfate for continuous microinfusion</i>)	1	
HYDROMORPHONE HCL POWD	1		<i>levorphanol tartrate TABS</i>	1	QL(4 ea daily); AL(At least 10 yrs old); PA
<i>hydromorphone hcl SOLN IJ</i>	1		<i>meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML</i>	1	
HYDROMORPHONE HCL SUPP	1		<i>meperidine hcl SOLN OR 50 MG/5ML</i>	1	AL(Up to 12 yrs old)
<i>hydromorphone hcl TABS</i>	1	QL(4 ea daily); AL(At least 10 yrs old)	<i>meperidine hcl TABS 50 MG</i>	1	QL(64 ea per 8 day(s) retail; 64 ea per 8 days mail); AL(At least 10 yrs old)
			<i>methadone hcl CONC</i>	1	QL(4 ml daily); PA
			<i>methadone hcl SOLN OR 5 MG/5ML</i>	1	QL(60 ml per 30 day(s) retail; 60 ml per 30 days mail); AL(Up to 1 yrs old)

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<i>methadone hcl SOLN OR 10 MG/5ML</i>	1	QL(30 ml per 30 day(s) retail; 30 ml per 30 days mail); AL(Up to 1 yrs old)	<i>morphine sulfate TABS</i>	1	QL(4 ea daily); AL(At least 10 yrs old)
METHADONE HCL SOLN IJ	1		<i>morphine sulfate TBCR 15 MG, 30 MG, 60 MG, 100 MG</i>	1	QL(3 ea daily); AL(At least 10 yrs old); PA
<i>methadone hcl TABS</i>	1	QL(4 ea daily); AL(At least 10 yrs old); PA	<i>morphine sulfate TBCR 200 MG</i>	1	AL(At least 10 yrs old); PA
<i>methadone hcl TBSO</i>	1	AL(At least 10 yrs old)	MS CONTIN TBCR 200 MG (<i>morphine sulfate</i>)	1	AL(At least 10 yrs old); PA
METHADOSE SUGAR-FREE CONC (<i>methadone hcl</i>)	1	QL(4 ml daily); PA	MS CONTIN TBCR 15 MG, 30 MG, 60 MG, 100 MG (<i>morphine sulfate</i>)	1	QL(3 ea daily); AL(At least 10 yrs old); PA
METHADOSE CONC (<i>methadone hcl</i>)	1	QL(4 ml daily); PA	NUCYNTA ER TB12 100 MG, 150 MG, 200 MG, 250 MG	1	QL(2 ea daily); AL(At least 10 yrs old); PA
<i>morphine sulfate beads</i>	1	QL(1 ea daily); AL(At least 10 yrs old); PA	NUCYNTA ER TB12 50 MG	1	QL(2 ea daily); AL(At least 10 yrs old)
<i>morphine sulfate for continuous microinfusion</i>	1		NUCYNTA TABS	1	QL(4 ea daily); AL(At least 10 yrs old)
MORPHINE SULFATE/SODIUM CHLORIDE SOLN IV	1		OLINVYK	1	
<i>morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG</i>	1	QL(2 ea daily); AL(At least 10 yrs old); PA	<i>oxycodone hcl CAPS</i>	1	QL(4 ea daily); AL(At least 10 yrs old)
MORPHINE SULFATE POWD	1		<i>oxycodone hcl CONC 100 MG/5ML</i>	1	QL(4 ml daily); AL(Up to 12 yrs old)
<i>morphine sulfate SOLN IV 4 MG/ML, 8 MG/ML, 10 MG/ML, 50 MG/ML</i>	1		OXYCODONE HCL POWD	1	
<i>morphine sulfate SOLN OR 10 MG/5ML, 20 MG/5ML, 20 MG/ML, 100 MG/5ML</i>	1	AL(Up to 12 yrs old)	<i>oxycodone hcl SOLN</i>	1	AL(Up to 12 yrs old)
MORPHINE SULFATE SOLN IV 2 MG/ML, 4 MG/ML, 8 MG/ML, 10 MG/ML, 50 MG/ML	1		<i>oxycodone hcl T12A 80 MG</i>	1	Brand Required; AL(At least 10 yrs old); PA
<i>morphine sulfate SUPP</i>	1		<i>oxycodone hcl T12A 10 MG, 20 MG, 40 MG</i>	1	Brand Required; QL(100 ea per 50 day(s) retail; 100 ea per 50 days mail); AL(At least 10 yrs old); PA

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<i>oxycodone hcl TABS</i>	1	QL(4 ea daily); AL(At least 10 yrs old)	<i>tramadol hcl CP24 100 MG, 200 MG, 300 MG</i>	1	QL(1 ea daily); AL(At least 12 yrs old); PA
OXYCONTIN T12A 10 MG, 15 MG, 20 MG	1	Brand Required; QL(100 ea per 50 day(s) retail; 100 ea per 50 days mail); AL(At least 10 yrs old)	<i>tramadol hcl SOLN</i>	1	AL(At least 12 yrs old); PA
OXYCONTIN T12A 30 MG, 40 MG, 60 MG	1	Brand Required; QL(100 ea per 50 day(s) retail; 100 ea per 50 days mail); AL(At least 10 yrs old); PA	<i>tramadol hcl TABS 50 MG</i>	1	QL(8 ea daily); AL(At least 12 yrs old)
OXYCONTIN T12A 80 MG	1	Brand Required; AL(At least 10 yrs old); PA	<i>tramadol hcl TABS 25 MG, 100 MG</i>	1	QL(4 ea daily); AL(At least 12 yrs old); PA
<i>oxymorphone hcl TABS</i>	1	QL(4 ea daily); AL(At least 10 yrs old); PA	<i>tramadol hcl TB24</i>	1	QL(1 ea daily); AL(At least 12 yrs old); PA
<i>oxymorphone hcl TB12 5 MG, 7.5 MG, 10 MG, 15 MG, 20 MG, 30 MG</i>	1	QL(2 ea daily); AL(At least 10 yrs old); PA	TRAMADOL HYDROCHLORIDE SOLN (<i>tramadol hcl</i>)	1	AL(At least 12 yrs old); PA
<i>oxymorphone hcl TB12 40 MG</i>	1	QL(4 ea daily); AL(At least 10 yrs old); PA	TRAMADOL HYDROCHLORIDE SOLN (<i>tramadol hcl</i>)	9	
QDOLO SOLN (<i>tramadol hcl</i>)	1	AL(At least 12 yrs old); PA	ULTIVA (<i>remifentanil hcl</i>)	1	
<i>remifentanil hcl</i>	1		ULTIVA (<i>remifentanil hcl</i>)	9	
ROXICODONE TABS 15 MG, 30 MG (<i>oxycodone hcl</i>)	1	QL(4 ea daily); AL(At least 10 yrs old)	XTAMPZA ER	1	QL(2 ea daily); AL(At least 10 yrs old); PA
ROXYBOND TABA	1	QL(4 ea daily); AL(At least 10 yrs old); PA	Opioid Combinations		
<i>sufentanil citrate SOLN IV 50 MCG/ML</i>	1		<i>acetaminophen w/ codeine SOLN</i>	1	QL(4050 ml per 30 day(s) retail; 4050 ml per 30 days mail); PA
SUFENTANIL CITRATE SOLN IV (<i>sufentanil citrate</i>)	9		<i>acetaminophen w/ codeine TABS 15 MG-300 MG, 30 MG-300 MG, 60 MG-300 MG</i>	1	QL(4 ea daily); AL(At least 12 yrs old)
			<i>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	1	QL(4 ea daily); AL(At least 12 yrs old); PA
			<i>butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-300 MG</i>	1	QL(4 ea daily); AL(At least 12 yrs old); PA
			<i>butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG</i>	1	QL(4 ea daily); AL(At least 12 yrs old)

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<i>butalbital-aspirin-caffeine w/cod</i>	1	QL(4 ea daily); AL(At least 12 yrs old)	PERCOCET TABS 325 MG-10 MG, 325 MG-2.5 MG, 325 MG-5 MG, 325 MG-7.5 MG (<i>oxycodone w/ acetaminophen</i>)	1	QL(4 ea daily); AL(At least 10 yrs old)
FIORICET/CODEINE 30 MG-40 MG-50 MG-300 MG (<i>butalbital-acetaminophen-caffeine w/ codeine</i>)	1	QL(4 ea daily); AL(At least 12 yrs old); PA	PROLATE SOLN	1	QL(1500 ml per 30 day(s) retail; 1500 ml per 30 days mail); AL(Up to 12 yrs old); PA
<i>hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML</i>	1	QL(4560 ml per 30 day(s) retail; 4560 ml per 30 days mail); PA	PROLATE TABS	1	QL(4 ea daily); AL(At least 10 yrs old); PA
<i>hydrocodone-acetaminophen SOLN</i>	1	PA	SEGLENTIS	1	QL(28 ea per fill retail); AL(At least 12 yrs old); PA
<i>hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG</i>	1	QL(4 ea daily); AL(At least 10 yrs old); PA	<i>tramadol-acetaminophen</i>	1	QL(6 ea daily); AL(At least 12 yrs old)
<i>hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	1	QL(4 ea daily); AL(At least 10 yrs old)	ULTRACET (<i>tramadol-acetaminophen</i>)	9	QL(6 ea daily)
<i>hydrocodone-ibuprofen 10 MG-200 MG</i>	1	QL(4 ea daily); AL(At least 10 yrs old); PA	Opioid Partial Agonists		
<i>hydrocodone-ibuprofen 5 MG-200 MG, 7.5 MG-200 MG</i>	1	QL(4 ea daily); AL(At least 10 yrs old)	BELBUCA FILM	1	QL(60 ea per 30 day(s) retail; 60 ea per 30 days mail); PA
NALOCET TABS	1	QL(4 ea daily); AL(At least 10 yrs old); PA	BRIXADI SOSY 16 MG/0.32ML	1	QL(1.28 ml per 28 day(s) retail; 1 ml per 28 days mail); PA
<i>oxycodone w/ acetaminophen SOLN</i>	1	QL(1500 ml per 30 day(s) retail; 1500 ml per 30 days mail); AL(Up to 12 yrs old)	BRIXADI SOSY 128 MG/0.36ML	1	QL(0.36 ml per 28 day(s) retail); PA
<i>oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-2.5 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	1	QL(4 ea daily); AL(At least 10 yrs old)	BRIXADI SOSY 96 MG/0.27ML	1	QL(0.27 ml per 28 day(s) retail); PA
			BRIXADI SOSY 24 MG/0.48ML	1	QL(1.92 ml per 30 day(s) retail; 2 ml per 30 days mail); PA
			BRIXADI SOSY 8 MG/0.16ML	1	QL(0.64 ml per 28 day(s) retail; 1 ml per 28 days mail); PA

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BRIXADI SOSY 64 MG/0.18ML	1	QL(0.18 ml per 28 day(s) retail); PA	<i>butorphanol tartrate IJ 1 MG/ML, 2 MG/ML</i>	1	
BRIXADI SOSY 32 MG/0.64ML	1	QL(2.56 ml per 28 day(s) retail; 3 ml per 28 days mail); PA	BUTRANS PTWK (<i>buprenorphine</i>)	1	Brand Required; QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail)
BRIXADI SOSY 24 MG/0.48ML	1	QL(1.92 ml per 28 day(s) retail; 2 ml per 28 days mail); PA	<i>nalbuphine hcl</i>	1	
BUPRENEX SOLN (<i>buprenorphine hcl</i>)	9		<i>pentazocine w/ naloxone hcl</i>	1	QL(8 ea daily); AL(At least 10 yrs old)
<i>buprenorphine hcl FILM 150 MCG, 300 MCG, 450 MCG, 600 MCG, 750 MCG, 900 MCG</i>	1	QL(60 ea per 30 day(s) retail; 60 ea per 30 days mail); PA	SUBLOCADE SOSY 100 MG/0.5ML	1	QL(0.5 ml per 28 day(s) retail); PA
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 2 MG-8 MG</i>	1	QL(3 ea daily); AL(At least 16 yrs old); PA	SUBLOCADE SOSY 300 MG/1.5ML	1	QL(1.5 ml per 28 day(s) retail; 2 ml per 28 days mail); PA
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG</i>	1	QL(2 ea daily); AL(At least 16 yrs old); PA	SUBOXONE FILM SL 3 MG-12 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	1	QL(2 ea daily); AL(At least 16 yrs old); PA
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG</i>	1	QL(90 ea per 30 day(s) retail; 90 ea per 30 days mail); AL(At least 16 yrs old); PA	SUBOXONE FILM SL 0.5 MG-2 MG, 1 MG-4 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	9	QL(90 ea per 30 day(s) retail; 90 ea per 30 days mail); AL(At least 16 yrs old)
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL</i>	1	QL(3 ea daily); AL(At least 16 yrs old)	SUBOXONE FILM SL 2 MG-8 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	9	QL(3 ea daily); AL(At least 16 yrs old)
<i>buprenorphine hcl SOLN</i>	1		SUBOXONE FILM SL 3 MG-12 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	9	QL(2 ea daily); AL(At least 16 yrs old)
<i>buprenorphine hcl SUBL</i>	1	QL(3 ea daily); AL(At least 16 yrs old - Up to 50 yrs old)	SUBOXONE FILM SL 0.5 MG-2 MG, 1 MG-4 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	1	QL(90 ea per 30 day(s) retail; 90 ea per 30 days mail); AL(At least 16 yrs old); PA
<i>buprenorphine PTWK</i>	1	Brand Required; QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); PA	SUBOXONE FILM SL 2 MG-8 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	1	QL(3 ea daily); AL(At least 16 yrs old); PA
<i>butorphanol tartrate NA 10 MG/ML</i>	1	QL(10 ml per 30 day(s) retail; 10 ml per 30 days mail)			

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ZUBSOLV SUBL 2.1 MG-8.6 MG	1	QL(2 ea daily); AL(At least 16 yrs old); PA	TESTIM GEL TD (<i>testosterone</i>)	1	QL(150 gm per 30 day(s) retail; 150 gm per 30 days mail); PA
ZUBSOLV SUBL 0.18 MG-0.7 MG, 0.36 MG-1.4 MG, 0.71 MG-2.9 MG, 1.4 MG-5.7 MG	1	QL(3 ea daily); AL(At least 16 yrs old); PA	TESTOPEL PLLT	1	
ZUBSOLV SUBL 2.9 MG-11.4 MG	1	QL(1 ea daily); AL(At least 16 yrs old); PA	<i>testosterone cypionate SOLN IM</i>	1	PA
ANDROGENS-ANABOLIC - Drugs to Regulate Hormones			<i>testosterone enanthate SOLN IM</i>	1	PA
Anabolic Steroids			<i>testosterone GEL TD 10 MG/ACT</i>	1	QL(60 gm per 30 day(s) retail; 60 gm per 30 days mail); PA
<i>oxandrolone 2.5 MG</i>	1	PA	<i>testosterone GEL TD 1 %, 50 MG/5GM</i>	1	QL(150 gm per 30 day(s) retail; 150 gm per 30 days mail); PA
Androgens			<i>testosterone GEL TD 1.62 %, 25 MG/2.5GM, 40.5 MG/2.5GM</i>	1	QL(75 gm per 30 day(s) retail; 75 gm per 30 days mail); PA
ANDROGEL PUMP GEL TD 1.62 % (<i>testosterone</i>)	1	QL(75 gm per 30 day(s) retail; 75 gm per 30 days mail); PA	<i>testosterone GEL TD 20.25 MG/1.25GM</i>	1	QL(37.5 gm per 30 day(s) retail; 38 gm per 30 days mail); PA
ANDROGEL PUMP GEL TD 1.62 % (<i>testosterone</i>)	9	QL(75 gm per 30 day(s) retail; 75 gm per 30 days mail)	<i>testosterone SOLN</i>	1	QL(180 ml per 30 day(s) retail; 180 ml per 30 days mail); AL(At least 18 yrs old); PA
ANDROGEL GEL TD 25 MG/2.5GM (<i>testosterone</i>)	9	QL(75 gm per 30 day(s) retail; 75 gm per 30 days mail)	TLANDO CAPS	1	QL(4 ea daily); AL(At least 18 yrs old); PA
AVEED SOLN	1	PA	VOGELXO PUMP GEL TD (<i>testosterone</i>)	9	QL(150 gm per 30 day(s) retail; 150 gm per 30 days mail)
<i>danazol CAPS</i>	1		VOGELXO PUMP GEL TD (<i>testosterone</i>)	1	QL(150 gm per 30 day(s) retail; 150 gm per 30 days mail); PA
FORTESTA GEL TD (<i>testosterone</i>)	9	QL(60 gm per 30 day(s) retail; 60 gm per 30 days mail)	VOGELXO GEL TD (<i>testosterone</i>)	9	QL(150 gm per 30 day(s) retail; 150 gm per 30 days mail)
JATENZO CAPS 237 MG	1	QL(2 ea daily); AL(At least 18 yrs old); PA			
JATENZO CAPS 158 MG, 198 MG	1	QL(4 ea daily); AL(At least 18 yrs old); PA			
METHITEST TABS	1	PA			
<i>methyltestosterone CAPS</i>	1	PA			
METHYLTESTOSTERONE POWD	1	PA			
NATESTO GEL NA	1	AL(At least 18 yrs old); PA			

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VOGELXO GEL TD (<i>testosterone</i>)	1	QL(150 gm per 30 day(s) retail; 150 gm per 30 days mail); PA
XYOSTED SOAJ	1	QL(2 ml per 28 day(s) retail; 2 ml per 28 days mail); PA
ANORECTAL AND RELATED PRODUCTS -		
Rectal Drugs to Treat Pain, Swelling and Itching		
Intrarectal Steroids		
<i>budesonide (intrarectal)</i>	1	QL(133.6 gm per 42 day(s) retail; 134 gm per 42 days mail); PA
CORTENEMA (<i>hydrocortisone (intrarectal)</i>)	1	
CORTIFOAM EX 10 %	1	QL(30 gm per 30 day(s) retail; 30 gm per 30 days mail); PA
<i>hydrocortisone (intrarectal)</i>	1	
UCERIS (<i>budesonide (intrarectal)</i>)	1	QL(133.6 gm per 42 day(s) retail; 134 gm per 42 days mail); PA
UCERIS (<i>budesonide (intrarectal)</i>)	9	QL(133.6 gm per 42 day(s) retail; 134 gm per 42 days mail)
Rectal Combinations		
<i>lidocaine-hydrocortisone acetate (rectal) CREA EX</i>	1	
PROCTOFOAM HC FOAM EX	1	
Rectal Steroids		

Drug Name	Drug Tier	Requirements/Limits
ANUSOL-HC EX (<i>hydrocortisone (rectal)</i>)	1	4 package(s) per 28 day(s) retail; 4 package(s) per 28 day(s) mail
<i>hydrocortisone (rectal) EX 1 %</i>	1	RX/OTC
<i>hydrocortisone (rectal) EX 2.5 %</i>	1	4 package(s) per 28 day(s) retail; 4 package(s) per 28 day(s) mail
Vasodilating Agents		
<i>nitroglycerin (intra-anal)</i>	1	
RECTIV (<i>nitroglycerin (intra-anal)</i>)	1	
ANTACIDS		
Antacids - Calcium Salts		
CALCIUM CARBONATE SUSP	1	AL(Up to 20 yrs old); PA
ANTHELMINTICS - Drugs to Treat Worm Infections		
Anthelmintics		
<i>albendazole</i>	1	QL(2 ea daily)
BENZNIDAZOLE	1	AL(At least 2 yrs old - Up to 12 yrs old); PA
BILTRICIDE (<i>praziquantel</i>)	1	QL(6 ea per 30 day(s) retail; 6 ea per 30 days mail)
EMVERM CHEW	1	QL(6 ea per 30 day(s) retail; 6 ea per 30 days mail); PA
<i>ivermectin</i>	1	PA
<i>praziquantel</i>	1	QL(6 ea per 30 day(s) retail; 6 ea per 30 days mail)
STROMEKTOL (<i>ivermectin</i>)	1	PA
ANTIANGINAL AGENTS - Drugs to Treat Chest		

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Pain			NITRO-DUR PT24 0.1 MG/HR, 0.2 MG/HR, 0.4 MG/HR (<i>nitroglycerin</i>)	1	QL(1 ea daily); MP
Antianginals-Other			NITRO-DUR PT24 0.3 MG/HR, 0.6 MG/HR, 0.8 MG/HR (<i>nitroglycerin</i>)	9	
ASPRUZYO SPRINKLE PACK	1	QL(60 ea per 30 day(s) retail; 60 ea per 30 days mail); PA	NITRO-DUR PT24	1	
RANEXA TB12 500 MG (<i>ranolazine</i>)	9	QL(3 ea daily); MP	NITRO-DUR PT24 0.1 MG/HR, 0.2 MG/HR, 0.4 MG/HR (<i>nitroglycerin</i>)	9	QL(1 ea daily); MP
RANEXA TB12 1000 MG (<i>ranolazine</i>)	9	QL(2 ea daily); MP	<i>nitroglycerin in d5w</i>	1	
<i>ranolazine TB12 500 MG</i>	1	QL(3 ea daily); MP	<i>nitroglycerin PT24 0.6 MG/HR</i>	1	
<i>ranolazine TB12 1000 MG</i>	1	QL(2 ea daily); MP	<i>nitroglycerin PT24 0.1 MG/HR, 0.2 MG/HR, 0.4 MG/HR</i>	1	QL(1 ea daily); MP
Nitrates			<i>nitroglycerin SOLN TL 0.4 MG/SPRAY</i>	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail
ISORDIL TITRADOSE TABS 40 MG (<i>isosorbide dinitrate</i>)	1		NITROGLYCERIN SOLN IV	1	
ISORDIL TITRADOSE TABS 5 MG (<i>isosorbide dinitrate</i>)	1	QL(3 ea daily); MP	<i>nitroglycerin SUBL 0.6 MG</i>	1	
<i>isosorbide dinitrate TABS 20 MG</i>	1	QL(6 ea daily); MP	<i>nitroglycerin SUBL 0.3 MG, 0.4 MG</i>	1	QL(4.45 ea daily); MP
<i>isosorbide dinitrate TABS 5 MG, 30 MG</i>	1	QL(3 ea daily); MP	NITROLINGUAL SOLN TL (<i>nitroglycerin</i>)	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail
<i>isosorbide dinitrate TABS 10 MG</i>	1	QL(5 ea daily); MP	NITROSTAT SUBL 0.4 MG (<i>nitroglycerin</i>)	9	QL(4.45 ea daily); MP
<i>isosorbide dinitrate TABS 40 MG</i>	1		NITROSTAT SUBL 0.3 MG, 0.4 MG (<i>nitroglycerin</i>)	1	QL(4.45 ea daily); MP
<i>isosorbide mononitrate TABS</i>	1		NITROSTAT SUBL 0.6 MG (<i>nitroglycerin</i>)	1	
<i>isosorbide mononitrate TB24 120 MG</i>	1	QL(2 ea daily); MP	ANTI-ANXIETY AGENTS - Drugs to Treat Anxiety		
<i>isosorbide mononitrate TB24 60 MG</i>	1	QL(3 ea daily); MP	Antianxiety Agents - Misc.		
<i>isosorbide mononitrate TB24 30 MG</i>	1	QL(6 ea daily); MP	<i>bupirone hcl 5 MG, 10 MG, 15 MG</i>	1	QL(3 ea daily); MP
NITRO-BID OINT	1				
NITRO-DUR PT24 0.3 MG/HR, 0.6 MG/HR, 0.8 MG/HR (<i>nitroglycerin</i>)	1				

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<i>bupirone hcl 7.5 MG, 30 MG</i>	1	QL(2 ea daily); MP	ATIVAN SOLN (<i>lorazepam</i>)	1	QL(60 ml per 30 day(s) retail; 60 ml per 30 days mail); AL(At least 19 yrs old)
<i>droperidol SOLN 2.5 MG/ML</i>	1				
<i>hydroxyzine hcl SOLN 25 MG/ML, 50 MG/ML</i>	1		ATIVAN TABS (<i>lorazepam</i>)	1	QL(3 ea daily); AL(At least 19 yrs old)
<i>hydroxyzine hcl SYRP</i>	1		<i>chlordiazepoxide hcl CAPS</i>	1	QL(3 ea daily); AL(At least 19 yrs old)
<i>hydroxyzine hcl TABS</i>	1		<i>clorazepate dipotassium TABS</i>	1	QL(3 ea daily); AL(At least 19 yrs old)
<i>hydroxyzine pamoate CAPS 100 MG</i>	1		<i>diazepam CONC</i>	1	QL(1 ml daily); AL(At least 19 yrs old)
<i>hydroxyzine pamoate CAPS 25 MG, 50 MG</i>	1	QL(4 ea daily); MP	<i>diazepam SOLN OR 5 MG/5ML</i>	1	AL(At least 19 yrs old)
<i>meprobamate</i>	1		<i>diazepam SOLN IJ 5 MG/ML, 10 MG/2ML, 50 MG/10ML</i>	1	QL(30 ml per 30 day(s) retail; 30 ml per 30 days mail); AL(At least 19 yrs old)
VISTARIL CAPS 50 MG (<i>hydroxyzine pamoate</i>)	9	QL(4 ea daily); MP	<i>diazepam SOLN OR 5 MG/5ML</i>	1	
VISTARIL CAPS 25 MG (<i>hydroxyzine pamoate</i>)	1	QL(4 ea daily); MP	<i>diazepam TABS</i>	1	QL(3 ea daily); AL(At least 19 yrs old)
Benzodiazepines			<i>lorazepam CONC</i>	1	QL(1 ml daily); AL(At least 19 yrs old)
ALPRAZOLAM INTENSOL CONC	1	QL(1 ml daily); AL(At least 19 yrs old)	<i>lorazepam SOLN</i>	1	QL(60 ml per 30 day(s) retail; 60 ml per 30 days mail); AL(At least 19 yrs old)
<i>alprazolam TABS 2 MG</i>	1	QL(2 ea daily); AL(At least 19 yrs old)	<i>lorazepam TABS</i>	1	QL(3 ea daily); AL(At least 19 yrs old)
<i>alprazolam TABS 0.25 MG, 0.5 MG, 1 MG</i>	1	QL(3 ea daily); AL(At least 19 yrs old)	LOREEV XR CS24	1	QL(1 ea daily); AL(At least 19 yrs old); PA
<i>alprazolam TB24 0.5 MG, 1 MG, 3 MG</i>	1	QL(1 ea daily); AL(At least 19 yrs old)	<i>oxazepam CAPS</i>	1	QL(3 ea daily); AL(At least 19 yrs old)
<i>alprazolam TB24 2 MG</i>	1	QL(2 ea daily); AL(At least 19 yrs old)			
<i>alprazolam TBDP 0.25 MG, 0.5 MG, 1 MG</i>	1	QL(3 ea daily); AL(At least 19 yrs old); PA			
<i>alprazolam TBDP 2 MG</i>	1	QL(2 ea daily); AL(At least 19 yrs old); PA			
ATIVAN SOLN (<i>lorazepam</i>)	9	QL(60 ml per 30 day(s) retail; 60 ml per 30 days mail); AL(At least 19 yrs old)			

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Drug Name	Drug Tier	Requirements/Limits
TRANXENE T TABS 7.5 MG (<i>clorazepate dipotassium</i>)	9	QL(3 ea daily); AL(At least 19 yrs old)
VALIUM TABS (<i>diazepam</i>)	9	QL(3 ea daily)
XANAX XR TB24 2 MG (<i>alprazolam</i>)	1	QL(2 ea daily); AL(At least 19 yrs old)
XANAX XR TB24 0.5 MG, 1 MG, 3 MG (<i>alprazolam</i>)	1	QL(1 ea daily); AL(At least 19 yrs old)
XANAX TABS 2 MG (<i>alprazolam</i>)	1	QL(2 ea daily); AL(At least 19 yrs old)
XANAX TABS 0.25 MG, 0.5 MG, 1 MG (<i>alprazolam</i>)	1	QL(3 ea daily); AL(At least 19 yrs old)
ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
Antiarrhythmics - Misc.		
<i>adenosine SOLN 6 MG/2ML, 12 MG/4ML</i>	1	
Antiarrhythmics Type I-A		
<i>disopyramide phosphate CAPS</i>	1	
NORPACE CR CP12	1	
NORPACE CAPS (<i>disopyramide phosphate</i>)	1	
<i>procainamide hcl SOLN 100 MG/ML</i>	1	
<i>quinidine gluconate TBCR</i>	1	
<i>quinidine sulfate TABS</i>	1	
Antiarrhythmics Type I-B		
<i>lidocaine hcl (cardiac) SOSY</i>	1	
LIDOCAINE HCL SOLN	1	
<i>lidocaine in d5w 5 %-4 MG/ML, 5 %-8 MG/ML</i>	1	
<i>mexiletine hcl</i>	1	
Antiarrhythmics Type I-C		

Drug Name	Drug Tier	Requirements/Limits
<i>flecainide acetate</i>	1	
<i>propafenone hcl CP12</i>	1	
<i>propafenone hcl TABS</i>	1	
RYTHMOL SR CP12 (<i>propafenone hcl</i>)	1	
Antiarrhythmics Type III		
<i>amiodarone hcl SOLN 50 MG/ML, 450 MG/9ML, 900 MG/18ML</i>	1	
<i>amiodarone hcl TABS</i>	1	
CORVERT (<i>ibutilide fumarate</i>)	1	
<i>dofetilide</i>	1	
<i>ibutilide fumarate</i>	1	
MULTAQ	1	
NEXTERONE	1	
TIKOSYN (<i>dofetilide</i>)	1	
TIKOSYN 500 MCG (<i>dofetilide</i>)	9	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions		
Antiasthmatic - Monoclonal Antibodies		
CINQAIR	1	
FASENRA PEN SOAJ	1	QL(1 ml per 28 day(s) retail; 1 ml per 28 days mail); AL(At least 6 yrs old); PA
FASENRA SOSY 30 MG/ML	1	QL(1 ml per 28 day(s) retail; 1 ml per 28 days mail); AL(At least 6 yrs old); PA
FASENRA SOSY 10 MG/0.5ML	1	AL(At least 6 yrs old); PA

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NUCALA SOAJ	1	QL(3 ml per 28 day(s) retail; 3 ml per 28 days mail); AL(At least 6 yrs old); PA	<i>cromolyn sodium NEBU</i>	1	QL(360 ml per 30 day(s) retail; 360 ml per 30 days mail)
NUCALA SOLR	1	QL(1 ea per 28 day(s) retail; 1 ea per 28 days mail); AL(At least 6 yrs old); PA	Bronchodilators - Anticholinergics		
NUCALA SOSY 100 MG/ML	1	QL(3 ml per 28 day(s) retail; 3 ml per 28 days mail); AL(At least 6 yrs old); PA	ATROVENT HFA	1	QL(25.8 gm per 30 day(s) retail; 26 gm per 30 days mail)
NUCALA SOSY 40 MG/0.4ML	1	QL(0.4 ml per 28 day(s) retail); AL(At least 6 yrs old - Up to 11 yrs old); PA	INCRUSE ELLIPTA	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail
TEZSPIRE SOAJ	1	QL(1.91 ml per 28 day(s) retail; 2 ml per 28 days mail); AL(At least 12 yrs old); PA	<i>ipratropium bromide SOLN 0.02 %</i>	1	QL(450 ml per 30 day(s) retail; 450 ml per 30 days mail)
TEZSPIRE SOSY	1	QL(1.91 ml per 28 day(s) retail; 2 ml per 28 days mail); AL(At least 12 yrs old); PA	SPIRIVA HANDIHALER CAPS (<i>tiotropium bromide monohydrate</i>)	1	Brand Required; MP
XOLAIR SOAJ	1	AL(At least 6 yrs old); PA	SPIRIVA RESPIMAT AERS 1.25 MCG/ACT	1	Brand Required; QL(4 gm per 30 day(s) retail; 4 gm per 30 days mail); AL(At least 6 yrs old)
XOLAIR SOLR	1	AL(At least 6 yrs old - Up to 75 yrs old); PA	SPIRIVA RESPIMAT AERS 2.5 MCG/ACT	1	Brand Required; QL(4 gm per 30 day(s) retail; 4 gm per 30 days mail); AL(At least 12 yrs old)
XOLAIR SOSY 75 MG/0.5ML, 150 MG/ML	1	AL(At least 6 yrs old - Up to 75 yrs old); PA	<i>tiotropium bromide monohydrate CAPS</i>	1	Brand Required; MP; PA
XOLAIR SOSY 300 MG/2ML	1	AL(At least 6 yrs old); PA	TUDORZA PRESSAIR	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); AL(At least 19 yrs old)
Anti-Inflammatory Agents					

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YUPELRI	1	QL(90 ml per 30 day(s) retail; 90 ml per 30 days mail); AL(At least 18 yrs old); PA	ALVESCO	2	QL(6.1 gm per 30 day(s) retail; 6 gm per 30 days mail)
Leukotriene Modulators			ARMONAIR DIGIHALER 113 MCG/ACT, 232 MCG/ACT	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); AL(At least 12 yrs old); PA
ACCOLATE (<i>zafirlukast</i>)	9	QL(2 ea daily)	ARNUITY ELLIPTA 100 MCG/ACT, 200 MCG/ACT	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail; AL(At least 5 yrs old)
ACCOLATE (<i>zafirlukast</i>)	1	QL(2 ea daily)	ARNUITY ELLIPTA 50 MCG/ACT	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail; AL(At least 5 yrs old - Up to 11 yrs old)
<i>montelukast sodium CHEW</i>	1	QL(1 ea daily)	ASMANEX HFA AERO 100 MCG/ACT, 200 MCG/ACT	1	3 package(s) per 90 day(s) retail; 3 package(s) per 90 day(s) mail; MP
<i>montelukast sodium PACK</i>	1	QL(1 ea daily); AL(Up to 2 yrs old); PA	ASMANEX HFA AERO 50 MCG/ACT	1	QL(13 gm per 30 day(s) retail; 13 gm per 30 days mail); AL(Up to 11 yrs old)
<i>montelukast sodium TABS</i>	1	QL(1 ea daily)	ASMANEX TWISTHALER 120 METERED DOSES AEPB	1	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail; MP
SINGULAIR CHEW (<i>montelukast sodium</i>)	1	QL(1 ea daily)	ASMANEX TWISTHALER 14 METERED DOSES AEPB	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail; MP
SINGULAIR PACK (<i>montelukast sodium</i>)	1	QL(1 ea daily); AL(Up to 2 yrs old); PA			
SINGULAIR TABS (<i>montelukast sodium</i>)	1	QL(1 ea daily)			
<i>zafirlukast</i>	1	QL(2 ea daily)			
<i>zileuton TB12</i>	1	AL(At least 12 yrs old); PA			
ZYFLO TABS	1	AL(At least 12 yrs old); PA			
Phosphodiesterase 3 & 4 (PDE3 & PDE4) Inhibitors					
OHTUVAYRE	1	AL(At least 18 yrs old); PA			
Selective Phosphodiesterase 4 (PDE4) Inhibitors					
DALIRESP 250 MCG (<i>roflumilast</i>)	1	QL(2 ea daily); PA			
DALIRESP 500 MCG (<i>roflumilast</i>)	1	QL(1 ea daily); PA			
<i>roflumilast 500 MCG</i>	1	QL(1 ea daily); PA			
<i>roflumilast 250 MCG</i>	1	QL(2 ea daily); PA			
Steroid Inhalants					

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ASMANEX TWISTHALER 30 METERED DOSES AEPB 110 MCG/INH	1	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail; AL(At least 4 yrs old - Up to 11 yrs old); MP	<i>fluticasone propionate hfa</i>	1	6 package(s) per 90 day(s) retail; 6 package(s) per 90 day(s) mail; MP
ASMANEX TWISTHALER 30 METERED DOSES AEPB 220 MCG/INH	1	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail; MP	PULMICORT FLEXHALER AEPB	1	6 package(s) per 90 day(s) retail; 6 package(s) per 90 day(s) mail; MP
ASMANEX TWISTHALER 60 METERED DOSES AEPB	1	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail; MP	PULMICORT SUSP 1 MG/2ML (<i>budesonide (inhalation)</i>)	1	QL(240 ml per 30 day(s) retail; 240 ml per 30 days mail); AL(Up to 8 yrs old)
<i>budesonide (inhalation) SUSP 1 MG/2ML</i>	1	QL(240 ml per 30 day(s) retail; 240 ml per 30 days mail); AL(Up to 8 yrs old)	PULMICORT SUSP 0.25 MG/2ML, 0.5 MG/2ML (<i>budesonide (inhalation)</i>)	1	QL(8 ml daily); AL(Up to 8 yrs old)
<i>budesonide (inhalation) SUSP 0.25 MG/2ML, 0.5 MG/2ML</i>	1	QL(8 ml daily); AL(Up to 8 yrs old)	QVAR REDHALER 80 MCG/ACT	1	QL(21.2 gm per 30 day(s) retail; 21 gm per 30 days mail); PA
FLOVENT DISKUS AEPB (<i>fluticasone propionate (inhalation)</i>)	1	12 package(s) per 90 day(s) retail; 12 package(s) per 90 day(s) mail; MP	QVAR REDHALER 40 MCG/ACT	1	QL(21.2 gm per 30 day(s) retail; 21 gm per 30 days mail); AL(At least 4 yrs old); PA
FLOVENT HFA (<i>fluticasone propionate hfa</i>)	1	6 package(s) per 90 day(s) retail; 6 package(s) per 90 day(s) mail; MP	Sympathomimetics		
<i>fluticasone propionate (inhalation) AEPB</i>	1	12 package(s) per 90 day(s) retail; 12 package(s) per 90 day(s) mail; MP	ADVAIR DISKUS AEPB (<i>fluticasone-salmeterol</i>)	9	3 package(s) per 90 day(s) retail; 3 package(s) per 90 day(s) mail; MP
			ADVAIR DISKUS AEPB (<i>fluticasone-salmeterol</i>)	1	3 package(s) per 90 day(s) retail; 3 package(s) per 90 day(s) mail; MP

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ADVAIR HFA AERO (fluticasone-salmeterol)	1	3 package(s) per 90 day(s) retail; 3 package(s) per 90 day(s) mail; MP	albuterol sulfate NEBU 0.083 %, 0.63 MG/3ML, 1.25 MG/3ML	1	QL(600 ml per 30 day(s) retail; 600 ml per 30 days mail)
AIRDUO DIGIHALER 113/14	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); AL(At least 12 yrs old); PA	albuterol sulfate NEBU 2.5 MG/0.5ML	1	
AIRDUO DIGIHALER 232/14	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); AL(At least 12 yrs old); PA	albuterol sulfate SYRP	1	
AIRDUO RESPICLICK 113/14 AEPB (fluticasone-salmeterol)	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); PA	albuterol sulfate TABS	1	
AIRDUO RESPICLICK 232/14 AEPB (fluticasone-salmeterol)	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); PA	ANORO ELLIPTA	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail; PA
AIRDUO RESPICLICK 55/14 AEPB (fluticasone-salmeterol)	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); PA	arformoterol tartrate	1	QL(120 ml per 30 day(s) retail; 120 ml per 30 days mail); AL(At least 19 yrs old); PA
AIRSUPRA	1	QL(32.1 gm per 30 day(s) retail; 32 gm per 30 days mail); AL(At least 18 yrs old); PA	BEVESPI AEROSPHERE	1	QL(10.7 gm per 30 day(s) retail; 11 gm per 30 days mail); AL(At least 18 yrs old); PA
albuterol sulfate AERS	1	2 package(s) per 30 day(s) retail; 2 package(s) per 30 day(s) mail	BREO ELLIPTA 100 MCG/ACT-25 MCG/ACT (fluticasone furoate-vilanterol)	9	Brand Required; 1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail
albuterol sulfate AERS	1	Brand Required; 2 package(s) per 30 day(s) retail; 2 package(s) per 30 day(s) mail	BREO ELLIPTA 50 MCG/INH-25 MCG/INH	1	Brand Required; QL(2 ea daily); PA
			BREO ELLIPTA (fluticasone furoate-vilanterol)	1	Brand Required; 1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail; PA

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BREZTRI AEROSPHERE	1	3 package(s) per 90 day(s) retail; 3 package(s) per 90 day(s) mail; AL(At least 18 yrs old); PA	DULERA 100 MCG/ACT-5 MCG/ACT, 200 MCG/ACT-5 MCG/ACT	1	6 package(s) per 90 day(s) retail; 6 package(s) per 90 day(s) mail; MP
BROVANA (<i>arformoterol tartrate</i>)	1	QL(120 ml per 30 day(s) retail; 120 ml per 30 days mail); AL(At least 19 yrs old); PA	DULERA 50 MCG/ACT-5 MCG/ACT	1	QL(26 gm per 30 day(s) retail; 26 gm per 30 days mail); AL(At least 5 yrs old - Up to 11 yrs old); PA
BROVANA (<i>arformoterol tartrate</i>)	9	QL(120 ml per 30 day(s) retail; 120 ml per 30 days mail); AL(At least 19 yrs old)	<i>fluticasone furoate-vilanterol</i>	1	Brand Required; 1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail; PA
<i>budesonide-formoterol fumarate dihydrate</i>	2	Brand Required; 6 package(s) per 90 day(s) retail; 6 package(s) per 90 day(s) mail; MP	<i>fluticasone-salmeterol AEPB 113 MCG/ACT-14 MCG/ACT, 232 MCG/ACT-14 MCG/ACT, 55 MCG/ACT-14 MCG/ACT</i>	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail)
<i>budesonide-formoterol fumarate dihydrate 80 MCG/ACT-4.5 MCG/ACT</i>	1	6 package(s) per 90 day(s) retail; 6 package(s) per 90 day(s) mail; AL(At least 6 yrs old); MP; PA	<i>fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT</i>	1	3 package(s) per 90 day(s) retail; 3 package(s) per 90 day(s) mail; AL(At least 4 yrs old); MP; PA
<i>budesonide-formoterol fumarate dihydrate 160 MCG/ACT-4.5 MCG/ACT</i>	1	6 package(s) per 90 day(s) retail; 6 package(s) per 90 day(s) mail; AL(At least 12 yrs old); MP; PA	<i>fluticasone-salmeterol AERO</i>	1	3 package(s) per 90 day(s) retail; 3 package(s) per 90 day(s) mail; MP
COMBIVENT RESPIMAT AERS	1	QL(12 gm per 30 day(s) retail; 12 gm per 30 days mail)	<i>formoterol fumarate NEBU</i>	1	QL(120 ml per 30 day(s) retail; 120 ml per 30 days mail); AL(At least 19 yrs old); PA
DUAKLIR PRESSAIR	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); PA	<i>ipratropium-albuterol SOLN</i>	1	QL(1620 ml per 90 day(s) retail; 1620 ml per 90 days mail); MP

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<i>isoproterenol hcl</i>	1		STIOLTO RESPIMAT	1	QL(4 gm per 30 day(s) retail; 4 gm per 30 days mail); PA
<i>levalbuterol hcl</i>	1	QL(288 ml per 30 day(s) retail; 288 ml per 30 days mail)	STRIVERDI RESPIMAT	1	QL(4 gm per 30 day(s) retail; 4 gm per 30 days mail); PA
<i>levalbuterol tartrate</i>	1	Brand Required; QL(30 gm per 30 day(s) retail; 30 gm per 30 days mail); PA	SYMBICORT (<i>budesonide-formoterol fumarate dihydrate</i>)	9	Brand Required; 6 package(s) per 90 day(s) retail; 6 package(s) per 90 day(s) mail; MP
PERFOROMIST NEBU (<i>formoterol fumarate</i>)	1	QL(120 ml per 30 day(s) retail; 120 ml per 30 days mail); AL(At least 19 yrs old); PA	SYMBICORT (<i>budesonide-formoterol fumarate dihydrate</i>)	1	Brand Required; 6 package(s) per 90 day(s) retail; 6 package(s) per 90 day(s) mail; MP
PROAIR DIGIHALER	1	2 package(s) per 30 day(s) retail; 2 package(s) per 30 day(s) mail; AL(At least 4 yrs old); PA	<i>terbutaline sulfate SOLN</i>	1	
PROAIR RESPICLICK AEPB	1	2 package(s) per 30 day(s) retail; 2 package(s) per 30 day(s) mail; AL(At least 4 yrs old)	<i>terbutaline sulfate TABS</i>	1	QL(6 ea daily)
PROVENTIL HFA AERS (<i>albuterol sulfate</i>)	9	Brand Required; 2 package(s) per 30 day(s) retail; 2 package(s) per 30 day(s) mail	TRELEGY ELLIPTA 100 MCG/ACT-25 MCG/ACT-62.5 MCG/ACT	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail
S2 (<i>racepinephrine hcl</i>)	1	AL(Up to 20 yrs old); PA	TRELEGY ELLIPTA	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail; PA
SEREVENT DISKUS	1	6 package(s) per 90 day(s) retail; 6 package(s) per 90 day(s) mail; AL(At least 12 yrs old); MP	VENTOLIN HFA AERS (<i>albuterol sulfate</i>)	1	Brand Required; 2 package(s) per 30 day(s) retail; 2 package(s) per 30 day(s) mail
			XOPENEX 0.63 MG/3ML, 1.25 MG/3ML (<i>levalbuterol hcl</i>)	9	QL(288 ml per 30 day(s) retail; 288 ml per 30 days mail)
			XOPENEX 0.31 MG/3ML (<i>levalbuterol hcl</i>)	9	

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XOPENEX CONCENTRATE (<i>levalbuterol hcl</i>)	9	QL(288 ea per 30 day(s) retail; 288 ea per 30 days mail)	XARELTO SUSR	1	QL(465 ml per 30 day(s) retail; 465 ml per 30 days mail); AL(Up to 10 yrs old)
XOPENEX HFA (<i>levalbuterol tartrate</i>)	1	Brand Required; QL(30 gm per 30 day(s) retail; 30 gm per 30 days mail)	XARELTO TABS 10 MG	1	QL(39 ea per 39 day(s) retail; 39 ea per 39 days mail)
Xanthines			XARELTO TABS 20 MG	1	QL(1 ea daily)
<i>aminophylline SOLN</i>	1		XARELTO TABS 15 MG	1	QL(42 ea per 20 day(s) retail; 42 ea per 20 days mail)
THEO-24 CP24	1		XARELTO TABS 2.5 MG	1	QL(2 ea daily)
<i>theophylline ELIX</i>	1		Heparins And Heparinoid-Like Agents		
<i>theophylline SOLN</i>	1		ARIXTRA 7.5 MG/0.6ML (<i>fondaparinux sodium</i>)	9	QL(18 ml per 30 day(s) retail; 18 ml per 30 days mail)
<i>theophylline TB12</i>	1		ARIXTRA 10 MG/0.8ML (<i>fondaparinux sodium</i>)	9	QL(24 ml per 30 day(s) retail; 24 ml per 30 days mail)
<i>theophylline TB24</i>	1		ARIXTRA 2.5 MG/0.5ML (<i>fondaparinux sodium</i>)	1	QL(15 ml per 30 day(s) retail; 15 ml per 30 days mail)
ANTICOAGULANTS - Blood Thinners			ARIXTRA 7.5 MG/0.6ML (<i>fondaparinux sodium</i>)	1	QL(18 ml per 30 day(s) retail; 18 ml per 30 days mail)
Coumarin Anticoagulants			ARIXTRA 5 MG/0.4ML (<i>fondaparinux sodium</i>)	9	QL(12 ml per 30 day(s) retail; 12 ml per 30 days mail)
<i>warfarin sodium TABS</i>	1		ARIXTRA 2.5 MG/0.5ML (<i>fondaparinux sodium</i>)	9	QL(15 ml per 30 day(s) retail; 15 ml per 30 days mail)
Direct Factor Xa Inhibitors			ARIXTRA 5 MG/0.4ML (<i>fondaparinux sodium</i>)	1	QL(12 ml per 30 day(s) retail; 12 ml per 30 days mail)
ELIQUIS STARTER PACK TBPK	1	QL(74 ea per 30 day(s) retail; 74 ea per 30 days mail)			
ELIQUIS TABS 5 MG	1	QL(60 ea per 30 day(s) retail; 60 ea per 30 days mail)			
ELIQUIS TABS 5 MG	1	QL(74 ea per 30 day(s) retail; 74 ea per 30 days mail)			
ELIQUIS TABS 2.5 MG	1	QL(2 ea daily)			
SAVAYSA	1	QL(1 ea daily); PA			
XARELTO STARTER PACK TBPK	1	QL(51 ea per 30 day(s) retail; 51 ea per 30 days mail)			

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ARIXTRA 10 MG/0.8ML (fondaparinux sodium)	1	QL(24 ml per 30 day(s) retail; 24 ml per 30 days mail)	FRAGMIN SOSY 15000 UNIT/0.6ML	1	QL(18 ml per 30 day(s) retail; 18 ml per 30 days mail)
enoxaparin sodium SOLN IJ 300 MG/3ML	1		FRAGMIN SOSY 10000 UNIT/ML	1	QL(30 ml per 30 day(s) retail; 30 ml per 30 days mail)
enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML	1	QL(48 ml per 30 day(s) retail; 48 ml per 30 days mail)	FRAGMIN SOSY 7500 UNIT/0.3ML	1	QL(9 ml per 30 day(s) retail; 9 ml per 30 days mail)
enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML	1	QL(60 ml per 30 day(s) retail; 60 ml per 30 days mail)	FRAGMIN SOSY 18000 UNT/0.72ML	1	QL(21.6 ml per 30 day(s) retail; 22 ml per 30 days mail)
enoxaparin sodium SOSY 30 MG/0.3ML	1	QL(18 ml per 30 day(s) retail; 18 ml per 30 days mail)	FRAGMIN SOSY 12500 UNIT/0.5ML	1	QL(15 ml per 30 day(s) retail; 15 ml per 30 days mail)
enoxaparin sodium SOSY 60 MG/0.6ML	1	QL(36 ml per 30 day(s) retail; 36 ml per 30 days mail)	FRAGMIN SOSY 2500 UNIT/0.2ML, 5000 UNIT/0.2ML	1	QL(6 ml per 30 day(s) retail; 6 ml per 30 days mail)
enoxaparin sodium SOSY 40 MG/0.4ML	1	QL(24 ml per 30 day(s) retail; 24 ml per 30 days mail)	heparin (porcine) in sodium chloride SOLN IV 0.9 %-1000 UNIT/500ML, 0.9 %-2000 UNIT/L	1	
fondaparinux sodium 10 MG/0.8ML	1	QL(24 ml per 30 day(s) retail; 24 ml per 30 days mail)	heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/0.5ML, 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	1	
fondaparinux sodium 7.5 MG/0.6ML	1	QL(18 ml per 30 day(s) retail; 18 ml per 30 days mail)	HEPARIN SODIUM/D5W	1	
fondaparinux sodium 2.5 MG/0.5ML	1	QL(15 ml per 30 day(s) retail; 15 ml per 30 days mail)	HEPARIN SODIUM/DEXTROSE 25000 UNIT/500ML-5 %, 5 %-25000 UNIT/250ML	1	
fondaparinux sodium 5 MG/0.4ML	1	QL(12 ml per 30 day(s) retail; 12 ml per 30 days mail)	HEPARIN SODIUM/NACL 0.45% SOLN IV 0.45 %-12500 UNIT/250ML, 0.45 %-25000 UNIT/250ML	1	
FRAGMIN SOLN 10000 UNIT/4ML	1	QL(240 ml per 30 day(s) retail; 240 ml per 30 days mail)	HEPARIN SODIUM/SODIUM CHLORIDE 0.9% SOLN IJ (heparin (porcine) in sodium chloride)	1	
FRAGMIN SOLN 95000 UNIT/3.8ML	1	QL(22.8 ml per 30 day(s) retail; 23 ml per 30 days mail)			

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HEPARIN SODIUM/SODIUM CHLORIDE SOLN IV 0.45 %-25000 UNIT/250ML, 0.45 %-25000 UNIT/500ML	1		LOVENOX SOSY 100 MG/ML, 150 MG/ML (<i>enoxaparin sodium</i>)	1	QL(60 ml per 30 day(s) retail; 60 ml per 30 days mail)
HEPARIN SODIUM SOLN IJ 5000 UNIT/ML	1		In Vitro/Lock Anticoagulants		
HEPARIN SODIUM SOSY IJ 5000 UNIT/0.5ML	1		DEFENCATH	1	AL(At least 18 yrs old); PA
LOVENOX SOLN IJ 300 MG/3ML (<i>enoxaparin sodium</i>)	1		Thrombin Inhibitors		
LOVENOX SOSY 30 MG/0.3ML (<i>enoxaparin sodium</i>)	9	QL(18 ml per 30 day(s) retail; 18 ml per 30 days mail)	ANGIOMAX SOLR (<i>bivalirudin trifluoroacetate</i>)	9	
LOVENOX SOSY 40 MG/0.4ML (<i>enoxaparin sodium</i>)	1	QL(24 ml per 30 day(s) retail; 24 ml per 30 days mail)	<i>argatroban</i>	1	
LOVENOX SOSY 100 MG/ML, 150 MG/ML (<i>enoxaparin sodium</i>)	9	QL(60 ml per 30 day(s) retail; 60 ml per 30 days mail)	ARGATROBAN (<i>argatroban</i>)	1	
LOVENOX SOSY 40 MG/0.4ML (<i>enoxaparin sodium</i>)	9	QL(24 ml per 30 day(s) retail; 24 ml per 30 days mail)	ARGATROBAN	1	
LOVENOX SOSY 30 MG/0.3ML (<i>enoxaparin sodium</i>)	1	QL(18 ml per 30 day(s) retail; 18 ml per 30 days mail)	ARGATROBAN/SODIUM CHLORIDE	1	
LOVENOX SOSY 60 MG/0.6ML (<i>enoxaparin sodium</i>)	1	QL(36 ml per 30 day(s) retail; 36 ml per 30 days mail)	BIVALIRUDIN RTU SOLN (<i>bivalirudin trifluoroacetate</i>)	9	
LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (<i>enoxaparin sodium</i>)	1	QL(48 ml per 30 day(s) retail; 48 ml per 30 days mail)	BIVALIRUDIN RTU SOLN (<i>bivalirudin trifluoroacetate</i>)	1	
LOVENOX SOSY 60 MG/0.6ML (<i>enoxaparin sodium</i>)	9	QL(36 ml per 30 day(s) retail; 36 ml per 30 days mail)	<i>bivalirudin trifluoroacetate SOLN</i>	1	
LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (<i>enoxaparin sodium</i>)	9	QL(48 ml per 30 day(s) retail; 48 ml per 30 days mail)	<i>bivalirudin trifluoroacetate SOLR</i>	1	
			<i>dabigatran etexilate mesylate CAPS 110 MG</i>	1	QL(2 ea daily); PA
			<i>dabigatran etexilate mesylate CAPS</i>	1	Brand Required; QL(2 ea daily); PA
			PRADAXA CAPS 75 MG (<i>dabigatran etexilate mesylate</i>)	9	Brand Required; QL(2 ea daily)
			PRADAXA CAPS (<i>dabigatran etexilate mesylate</i>)	1	Brand Required; QL(2 ea daily); PA

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PRADAXA PACK 30 MG, 40 MG, 50 MG, 110 MG	1	Brand Required; QL(120 ea per 30 day(s) retail; 120 ea per 30 days mail); AL(Up to 7 yrs old); PA	KLONOPIN TABS 1 MG (<i>clonazepam</i>)	9	QL(3 ea daily)
			KLONOPIN TABS 2 MG (<i>clonazepam</i>)	1	QL(2 ea daily)
			KLONOPIN TABS 0.5 MG, 1 MG (<i>clonazepam</i>)	1	QL(3 ea daily)
PRADAXA PACK 20 MG, 150 MG	1	Brand Required; QL(60 ea per 30 day(s) retail; 60 ea per 30 days mail); AL(Up to 7 yrs old); PA	LIBERVANT FILM	1	AL(At least 2 yrs old - Up to 5 yrs old)
			NAYZILAM	1	QL(10 ea per 30 day(s) retail; 10 ea per 30 days mail)
			ONFI SUSP (<i>clobazam</i>)	1	QL(480 ml per 30 day(s) retail; 480 ml per 30 days mail)
ANTICONVULSANTS - Drugs to Treat Seizures			ONFI TABS (<i>clobazam</i>)	1	QL(2 ea daily)
AMPA Glutamate Receptor Antagonists			SYMPAZAN FILM	1	QL(60 ea per 30 day(s) retail; 60 ea per 30 days mail); AL(At least 2 yrs old - Up to 6 yrs old); PA
FYCOMPA SUSP	1	QL(720 ml per 30 day(s) retail; 720 ml per 30 days mail)			
FYCOMPA TABS	1	QL(1 ea daily)			
Anticonvulsants - Benzodiazepines			VALTOCO 10 MG DOSE LIQD	1	QL(10 ea per 30 day(s) retail; 10 ea per 30 days mail)
<i>clobazam SUSP</i>	1	QL(480 ml per 30 day(s) retail; 480 ml per 30 days mail)	VALTOCO 15 MG DOSE LQPK	1	QL(10 ea per 30 day(s) retail; 10 ea per 30 days mail)
<i>clobazam TABS</i>	1	QL(2 ea daily)	VALTOCO 20 MG DOSE LQPK	1	QL(10 ea per 30 day(s) retail; 10 ea per 30 days mail)
<i>clonazepam TABS 2 MG</i>	1	QL(2 ea daily)	VALTOCO 5 MG DOSE LIQD	1	QL(10 ea per 30 day(s) retail; 10 ea per 30 days mail)
<i>clonazepam TABS 0.5 MG, 1 MG</i>	1	QL(3 ea daily)			
<i>clonazepam TBDP 2 MG</i>	1	QL(2 ea daily)	Anticonvulsants - Misc.		
<i>clonazepam TBDP 0.125 MG, 0.25 MG, 0.5 MG, 1 MG</i>	1	QL(3 ea daily)	APTIOM 600 MG, 800 MG	1	QL(2 ea daily); PA
DIASTAT ACUDIAL GEL (<i>diazepam (anticonvulsant)</i>)	9		APTIOM 200 MG, 400 MG	1	QL(1 ea daily); PA
DIASTAT PEDIATRIC GEL (<i>diazepam (anticonvulsant)</i>)	9				
<i>diazepam (anticonvulsant) GEL</i>	1				

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BANZEL SUSP (rufinamide)	1	Brand Required; QL(2400 ml per 30 day(s) retail; 2400 ml per 30 days mail); PA	<i>gabapentin CAPS 300 MG</i>	1	QL(10 ea daily); MP
			<i>gabapentin CAPS 400 MG</i>	1	QL(3 ea daily); MP
			<i>gabapentin CAPS 100 MG</i>	1	QL(5 ea daily); MP
BANZEL TABS (rufinamide)	1	Brand Required; QL(8 ea daily); PA	<i>gabapentin SOLN</i>	1	QL(75 ml daily); MP
BRIVIACT SOLN IV 50 MG/5ML	1	PA	<i>gabapentin TABS 600 MG, 800 MG</i>	1	QL(6 ea daily); MP
BRIVIACT SOLN OR 10 MG/ML	1	AL(Up to 12 yrs old); PA	KEPPRA XR TB24 500 MG (<i>levetiracetam</i>)	1	QL(2 ea daily); MP
BRIVIACT TABS	1	QL(2 ea daily); PA	KEPPRA XR TB24 750 MG (<i>levetiracetam</i>)	1	QL(150 ea per 30 day(s) retail; 150 ea per 30 days mail); MP
<i>carbamazepine CHEW</i>	1	QL(8 ea daily); MP			
<i>carbamazepine CP12</i>	1	QL(5 ea daily); MP	KEPPRA SOLN OR 100 MG/ML (<i>levetiracetam</i>)	1	MP
<i>carbamazepine SUSP</i>	1	MP	KEPPRA TABS 500 MG, 750 MG (<i>levetiracetam</i>)	1	QL(4 ea daily); MP
<i>carbamazepine TABS</i>	1	QL(8 ea daily); MP	KEPPRA TABS 250 MG (<i>levetiracetam</i>)	1	QL(2 ea daily); MP
<i>carbamazepine TB12 400 MG</i>	1	QL(4 ea daily); MP	KEPPRA TABS 1000 MG (<i>levetiracetam</i>)	1	QL(3 ea daily); MP
<i>carbamazepine TB12 100 MG, 200 MG</i>	1	QL(3 ea daily); MP	<i>lacosamide SOLN OR 10 MG/ML, 50 MG/5ML, 100 MG/10ML</i>	1	QL(1200 ml per 30 day(s) retail; 1200 ml per 30 days mail)
CARBATROL CP12 (<i>carbamazepine</i>)	1	QL(5 ea daily); MP	<i>lacosamide SOLN IV 200 MG/20ML</i>	1	
DIACOMIT CAPS	1	PA	<i>lacosamide TABS</i>	1	QL(2 ea daily)
DIACOMIT PACK	1	PA	LAMICTAL CHEWABLE DISPERSIBLE CHEW 25 MG (<i>lamotrigine</i>)	1	QL(4 ea daily); AL(Up to 11 yrs old); MP
ELEPSIA XR TB24	1	QL(2 ea daily); AL(At least 12 yrs old); PA	LAMICTAL CHEWABLE DISPERSIBLE CHEW 5 MG (<i>lamotrigine</i>)	1	QL(8 ea daily); AL(Up to 11 yrs old); MP
EPIDIOLEX	1	AL(At least 2 yrs old); PA	LAMICTAL ODT KIT (<i>lamotrigine</i>)	1	PA
EPRONTIA SOLN	1	QL(473 ml per 29 day(s) retail; 473 ml per 29 days mail); AL(Up to 11 yrs old); PA	LAMICTAL ODT TBDP 25 MG, 100 MG, 200 MG (<i>lamotrigine</i>)	1	QL(3 ea daily); AL(Up to 11 yrs old); MP
FINTEPLA	1	QL(360 ml per 30 day(s) retail; 360 ml per 30 days mail); AL(At least 2 yrs old); PA	LAMICTAL ODT TBDP 50 MG (<i>lamotrigine</i>)	1	QL(2 ea daily); AL(Up to 11 yrs old); MP

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LAMICTAL STARTER/NOT TAKING CARBAMAZEPINE KIT (<i>lamotrigine</i>)	1	PA	<i>lamotrigine TB24 25 MG, 50 MG, 100 MG</i>	1	QL(1 ea daily); MP; PA
LAMICTAL STARTER/TAKING CARBAMAZEPINE/NOT TAKING VALPROATE KIT (<i>lamotrigine</i>)	1	PA	<i>lamotrigine TB24 200 MG, 250 MG</i>	1	QL(2 ea daily); MP; PA
LAMICTAL STARTER/TAKING VALPROATE KIT (<i>lamotrigine</i>)	1	PA	<i>lamotrigine TB24 300 MG</i>	1	QL(3 ea daily); MP; PA
LAMICTAL XR KIT	1	PA	<i>lamotrigine TBDP 50 MG</i>	1	QL(2 ea daily); AL(Up to 11 yrs old); MP
LAMICTAL XR TB24 200 MG, 250 MG (<i>lamotrigine</i>)	1	QL(2 ea daily); MP; PA	<i>lamotrigine TBDP 25 MG, 100 MG, 200 MG</i>	1	QL(3 ea daily); AL(Up to 11 yrs old); MP
LAMICTAL XR TB24 300 MG (<i>lamotrigine</i>)	1	QL(3 ea daily); MP; PA	LEVETIRACETAM (<i>levetiracetam in sodium chloride</i>)	1	
LAMICTAL XR TB24 25 MG, 50 MG, 100 MG (<i>lamotrigine</i>)	1	QL(1 ea daily); MP; PA	LEVETIRACETAM (<i>levetiracetam in sodium chloride</i>)	9	
LAMICTAL TABS 150 MG (<i>lamotrigine</i>)	1	QL(4 ea daily); MP	<i>levetiracetam in sodium chloride</i>	1	
LAMICTAL TABS 200 MG (<i>lamotrigine</i>)	1	QL(9 ea daily); MP	LEVETIRACETAM/SODIUM CHLORIDE	1	
LAMICTAL TABS 100 MG (<i>lamotrigine</i>)	1	QL(2 ea daily); MP	<i>levetiracetam SOLN OR 100 MG/ML, 500 MG/5ML</i>	1	MP
LAMICTAL TABS 25 MG (<i>lamotrigine</i>)	1	QL(6 ea daily); MP	<i>levetiracetam TABS 500 MG, 750 MG</i>	1	QL(4 ea daily); MP
<i>lamotrigine CHEW 5 MG</i>	1	QL(8 ea daily); AL(Up to 11 yrs old); MP	<i>levetiracetam TABS 250 MG</i>	1	QL(2 ea daily); MP
<i>lamotrigine CHEW 25 MG</i>	1	QL(4 ea daily); AL(Up to 11 yrs old); MP	<i>levetiracetam TABS 1000 MG</i>	1	QL(3 ea daily); MP
<i>lamotrigine KIT 25 MG</i>	1	PA	<i>levetiracetam TB24 750 MG</i>	1	QL(150 ea per 30 day(s) retail; 450 ea per 90 days mail); MP
<i>lamotrigine TABS 150 MG</i>	1	QL(4 ea daily); MP	<i>levetiracetam TB24 500 MG</i>	1	QL(2 ea daily); MP
<i>lamotrigine TABS 100 MG</i>	1	QL(2 ea daily); MP	LYRICA CAPS 225 MG (<i>pregabalin</i>)	1	QL(2 ea daily); MP
<i>lamotrigine TABS 25 MG</i>	1	QL(6 ea daily); MP	LYRICA CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG, 300 MG (<i>pregabalin</i>)	1	QL(3 ea daily); MP
<i>lamotrigine TABS 200 MG</i>	1	QL(9 ea daily); MP	LYRICA CAPS 50 MG, 75 MG, 100 MG, 150 MG (<i>pregabalin</i>)	9	QL(3 ea daily); MP

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LYRICA SOLN (pregabalin)	1	QL(240 ml per 30 day(s) retail; 240 ml per 30 days mail); MP	pregabalin CAPS 225 MG	1	QL(2 ea daily); MP
MOTPOLY XR CP24 150 MG, 200 MG	1	QL(2 ea daily); PA	pregabalin SOLN	1	QL(240 ml per 30 day(s) retail; 720 ml per 90 days mail); MP
MOTPOLY XR CP24 100 MG	1	QL(1 ea daily); PA	primidone 250 MG	1	
MYSOLINE 250 MG (primidone)	1		primidone 125 MG	1	QL(100 ea per 33 day(s) retail; 100 ea per 33 days mail); PA
MYSOLINE 50 MG (primidone)	1	QL(4 ea daily)	primidone 50 MG	1	QL(4 ea daily)
NEURONTIN CAPS 300 MG (gabapentin)	1	QL(10 ea daily); MP	QUDEXY XR CS24 25 MG, 50 MG, 100 MG (topiramate)	1	QL(1 ea daily); PA
NEURONTIN CAPS 400 MG (gabapentin)	1	QL(3 ea daily); MP	QUDEXY XR CS24 150 MG, 200 MG (topiramate)	1	QL(2 ea daily); PA
NEURONTIN CAPS 100 MG (gabapentin)	1	QL(5 ea daily); MP	rufinamide SUSP	1	QL(2400 ml per 30 day(s) retail; 2400 ml per 30 days mail); PA
NEURONTIN SOLN (gabapentin)	1	QL(75 ml daily); MP	rufinamide TABS	1	Brand Required; QL(8 ea daily); PA
NEURONTIN SOLN (gabapentin)	9	QL(75 ml daily); MP	SPRITAM TB3D	1	QL(2 ea daily); PA
NEURONTIN TABS (gabapentin)	1	QL(6 ea daily); MP	TEGRETOL SUSP (carbamazepine)	1	MP
oxcarbazepine SUSP	1	QL(40 ml daily); MP	TEGRETOL TABS (carbamazepine)	1	QL(8 ea daily); MP
oxcarbazepine TABS 150 MG, 300 MG	1	QL(3 ea daily); MP	TEGRETOL-XR TB12 400 MG (carbamazepine)	1	QL(4 ea daily); MP
oxcarbazepine TABS 600 MG	1	QL(6 ea daily); MP	TEGRETOL-XR TB12 100 MG, 200 MG (carbamazepine)	1	QL(3 ea daily); MP
oxcarbazepine TB24 150 MG, 300 MG	1	QL(1 ea daily); PA	TOPAMAX SPRINKLE CPSP (topiramate)	1	QL(4 ea daily); AL(Up to 11 yrs old); MP
oxcarbazepine TB24 600 MG	1	QL(4 ea daily); PA	TOPAMAX TABS 25 MG, 50 MG, 100 MG (topiramate)	1	QL(3 ea daily); MP
OXTELLAR XR TB24 150 MG, 300 MG (oxcarbazepine)	1	QL(1 ea daily); PA	TOPAMAX TABS 200 MG (topiramate)	1	QL(9 ea daily); MP
OXTELLAR XR TB24 600 MG (oxcarbazepine)	1	QL(4 ea daily); PA	topiramate CP24 25 MG, 50 MG, 100 MG	1	QL(1 ea daily); PA
pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG, 300 MG	1	QL(3 ea daily); MP			

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<i>topiramate CP24 200 MG</i>	1	QL(2 ea daily); PA	ZONISADE SUSP	1	QL(900 ml per 30 day(s) retail; 900 ml per 30 days mail); PA
<i>topiramate CPSP</i>	1	QL(4 ea daily); AL(Up to 11 yrs old); MP	<i>zonisamide CAPS 25 MG, 50 MG</i>	1	QL(3 ea daily); MP
<i>topiramate CS24 25 MG, 50 MG, 100 MG</i>	1	QL(1 ea daily); PA	<i>zonisamide CAPS 100 MG</i>	1	QL(8 ea daily); MP
<i>topiramate CS24 150 MG, 200 MG</i>	1	QL(2 ea daily); PA	ZTALMY	1	QL(1100 ml per 30 day(s) retail; 1100 ml per 30 days mail); AL(At least 2 yrs old); PA
<i>topiramate TABS 25 MG, 50 MG, 100 MG</i>	1	QL(3 ea daily); MP	Carbamates		
<i>topiramate TABS 200 MG</i>	1	QL(9 ea daily); MP	<i>felbamate SUSP</i>	1	PA
TRILEPTAL SUSP (<i>oxcarbazepine</i>)	1	QL(40 ml daily); MP	<i>felbamate TABS 400 MG</i>	1	QL(8 ea daily); PA
TRILEPTAL TABS 150 MG, 300 MG (<i>oxcarbazepine</i>)	1	QL(3 ea daily); MP	<i>felbamate TABS 600 MG</i>	1	PA
TRILEPTAL TABS 150 MG, 300 MG (<i>oxcarbazepine</i>)	9	QL(3 ea daily); MP	FELBATOL SUSP (<i>felbamate</i>)	1	PA
TRILEPTAL TABS 600 MG (<i>oxcarbazepine</i>)	9	QL(6 ea daily); MP	FELBATOL TABS 400 MG (<i>felbamate</i>)	1	QL(8 ea daily); PA
TRILEPTAL TABS 600 MG (<i>oxcarbazepine</i>)	1	QL(6 ea daily); MP	FELBATOL TABS 600 MG (<i>felbamate</i>)	1	PA
TROKENDI XR CP24 25 MG, 50 MG, 100 MG (<i>topiramate</i>)	1	QL(1 ea daily); PA	XCOPRI TABS 150 MG, 200 MG	1	QL(2 ea daily); PA
TROKENDI XR CP24 200 MG (<i>topiramate</i>)	1	QL(2 ea daily); PA	XCOPRI TABS 25 MG	1	PA
VIMPAT SOLN IV 200 MG/20ML (<i>lacosamide</i>)	1		XCOPRI TABS 50 MG, 100 MG	1	QL(1 ea daily); PA
VIMPAT SOLN OR 10 MG/ML (<i>lacosamide</i>)	1	QL(1200 ml per 30 day(s) retail; 1200 ml per 30 days mail)	XCOPRI TBPK	1	QL(56 ea per 28 day(s) retail; 56 ea per 28 days mail); PA
VIMPAT TABS (<i>lacosamide</i>)	1	QL(2 ea daily)	XCOPRI TBPK	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); PA
ZONEGRAN CAPS 100 MG (<i>zonisamide</i>)	1	QL(8 ea daily); AL(Up to 20 yrs old); MP; PA	GABA Modulators		
ZONEGRAN CAPS 25 MG (<i>zonisamide</i>)	9	QL(3 ea daily); MP	GABITRIL (<i>tiagabine hcl</i>)	9	
			SABRIL PACK (<i>vigabatrin</i>)	1	Brand Required; PA
			SABRIL TABS (<i>vigabatrin</i>)	1	Brand Required; PA

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<i>tiagabine hcl</i>	1	
<i>vigabatrin PACK</i>	1	Brand Required; PA
<i>vigabatrin TABS</i>	1	Brand Required; PA
VIGAFYDE SOLN	1	AL(Up to 2 yrs old); PA
Hydantoins		
CEREBYX (<i>fosphenytoin sodium</i>)	9	
CEREBYX (<i>fosphenytoin sodium</i>)	1	
DILANTIN 30 MG	1	
DILANTIN (<i>phenytoin sodium extended</i>)	1	QL(6 ea daily); MP
DILANTIN INFATABS CHEW (<i>phenytoin</i>)	1	QL(6 ea daily); MP
DILANTIN-125 SUSP (<i>phenytoin</i>)	1	QL(12 ml daily); MP
<i>fosphenytoin sodium</i>	1	
<i>phenytoin sodium extended 300 MG</i>	1	QL(2 ea daily); MP
<i>phenytoin sodium extended 200 MG</i>	1	QL(3 ea daily); MP
<i>phenytoin sodium extended 100 MG</i>	1	QL(6 ea daily); MP
<i>phenytoin sodium SOLN</i>	1	
<i>phenytoin CHEW</i>	1	QL(6 ea daily); MP
<i>phenytoin SUSP</i>	1	QL(12 ml daily); MP
Succinimides		
CELONTIN (<i>methsuximide</i>)	1	
<i>ethosuximide CAPS</i>	1	QL(6 ea daily)
<i>ethosuximide SOLN</i>	1	
<i>methsuximide</i>	1	
ZARONTIN CAPS (<i>ethosuximide</i>)	1	QL(6 ea daily)
ZARONTIN SOLN (<i>ethosuximide</i>)	1	

Drug Name	Drug Tier	Requirements/Limits
Valproic Acid		
DEPAKOTE ER TB24 500 MG (<i>divalproex sodium</i>)	1	QL(5 ea daily); MP
DEPAKOTE ER TB24 250 MG (<i>divalproex sodium</i>)	1	QL(3 ea daily); MP
DEPAKOTE SPRINKLES CSDR (<i>divalproex sodium</i>)	1	QL(12 ea daily); AL(Up to 11 yrs old); MP
DEPAKOTE TBEC 125 MG, 250 MG (<i>divalproex sodium</i>)	1	QL(3 ea daily); MP
DEPAKOTE TBEC 500 MG (<i>divalproex sodium</i>)	1	QL(9 ea daily); MP
<i>divalproex sodium CSDR</i>	1	QL(12 ea daily); AL(Up to 11 yrs old); MP
<i>divalproex sodium TB24 500 MG</i>	1	QL(5 ea daily); MP
<i>divalproex sodium TB24 250 MG</i>	1	QL(3 ea daily); MP
<i>divalproex sodium TBEC 125 MG, 250 MG</i>	1	QL(3 ea daily); MP
<i>divalproex sodium TBEC 500 MG</i>	1	QL(9 ea daily); MP
<i>valproate sodium SOLN IV 100 MG/ML, 500 MG/5ML</i>	1	QL(1350 ml per 30 day(s) retail; 1350 ml per 30 days mail)
<i>valproate sodium SOLN OR 250 MG/5ML, 500 MG/10ML</i>	1	QL(34 ml daily); MP
<i>valproic acid CAPS</i>	1	QL(7 ea daily); MP
ANTIDEPRESSANTS - Drugs to Treat Depression		
Alpha-2 Receptor Antagonists (Tetracyclics)		
<i>mirtazapine TABS</i>	1	QL(1 ea daily); MP
<i>mirtazapine TBDP</i>	1	QL(1 ea daily); MP
REMERON SOLTAB TBDP (<i>mirtazapine</i>)	9	QL(1 ea daily); MP
REMERON SOLTAB TBDP (<i>mirtazapine</i>)	1	QL(1 ea daily); MP

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Drug Name	Drug Tier	Requirements/Limits
REMERON TABS 15 MG, 30 MG (<i>mirtazapine</i>)	1	QL(1 ea daily); MP
Antidepressant Combinations		
AUVELITY	1	QL(2 ea daily); PA
Antidepressants - Misc.		
APLENZIN	1	QL(1 ea daily); PA
<i>bupropion hcl</i> TABS	1	QL(3 ea daily)
<i>bupropion hcl</i> TB12	1	QL(2 ea daily); MP
<i>bupropion hcl</i> TB24 450 MG	1	QL(1 ea daily); PA
<i>bupropion hcl</i> TB24 150 MG, 300 MG	1	QL(1 ea daily); MP
FORFIVO XL TB24 (<i>bupropion hcl</i>)	1	QL(1 ea daily); PA
WELLBUTRIN SR TB12 (<i>bupropion hcl</i>)	1	QL(2 ea daily); MP
WELLBUTRIN XL TB24 (<i>bupropion hcl</i>)	1	QL(1 ea daily); MP
WELLBUTRIN XL TB24 (<i>bupropion hcl</i>)	9	QL(1 ea daily); MP
GABA Receptor Modulator - Neuroactive Steroid		
ZULRESSO	1	
ZURZUVAE 30 MG	1	QL(1 ea daily); AL(At least 18 yrs old); PA
ZURZUVAE 25 MG	1	QL(2 ea daily); AL(At least 18 yrs old); PA
Monoamine Oxidase Inhibitors (MAOIs)		
EMSAM	3	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); ST
MARPLAN	1	PA
NARDIL (<i>phenelzine sulfate</i>)	3	ST
PARNATE (<i>tranylcypromine sulfate</i>)	9	ST
<i>phenelzine sulfate</i>	3	ST

Drug Name	Drug Tier	Requirements/Limits
<i>tranylcypromine sulfate</i>	3	ST
N-Methyl-D-aspartic acid (NMDA) Receptor Antagonists		
SPRAVATO 56MG DOSE	1	QL(8 ea per 28 day(s) retail; 8 ea per 28 days mail); AL(At least 18 yrs old); PA
SPRAVATO 84MG DOSE	1	QL(24 ea per 28 day(s) retail; 24 ea per 28 days mail); AL(At least 18 yrs old); PA
Selective Serotonin Reuptake Inhibitors (SSRIs)		
CELEXA TABS 40 MG (<i>citalopram hydrobromide</i>)	1	QL(1 ea daily); AL(Up to 59 yrs old); MP
CELEXA TABS 10 MG, 20 MG (<i>citalopram hydrobromide</i>)	1	QL(1.5 ea daily); MP
CITALOPRAM HYDROBROMIDE CAPS	1	QL(1 ea daily); AL(Up to 59 yrs old); PA
<i>citalopram hydrobromide SOLN</i>	1	
<i>citalopram hydrobromide</i> TABS 10 MG, 20 MG	1	QL(1.5 ea daily); MP
<i>citalopram hydrobromide</i> TABS 40 MG	1	QL(1 ea daily); AL(Up to 59 yrs old); MP
<i>escitalopram oxalate SOLN</i>	1	
<i>escitalopram oxalate</i> TABS 10 MG	1	QL(1.5 ea daily); MP
<i>escitalopram oxalate</i> TABS 5 MG, 20 MG	1	QL(2 ea daily); MP
<i>fluoxetine hcl</i> CAPS 20 MG	1	QL(4 ea daily); MP
<i>fluoxetine hcl</i> CAPS 10 MG	1	QL(3 ea daily); MP
<i>fluoxetine hcl</i> CAPS 40 MG	1	QL(2 ea daily); MP

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<i>fluoxetine hcl CPDR</i>	1	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); PA	PAXIL SUSP (<i>paroxetine hcl</i>)	1	
<i>fluoxetine hcl SOLN</i>	1		PAXIL TABS 20 MG (<i>paroxetine hcl</i>)	1	QL(1 ea daily); MP
<i>fluoxetine hcl TABS 10 MG, 20 MG</i>	1	QL(45 ea per 30 day(s) retail; 45 ea per 30 days mail); PA	PAXIL TABS 30 MG (<i>paroxetine hcl</i>)	1	QL(2 ea daily); MP
<i>fluoxetine hcl TABS 60 MG</i>	1	QL(1 ea daily); PA	PAXIL TABS 10 MG, 40 MG (<i>paroxetine hcl</i>)	1	QL(1.5 ea daily); MP
FLUOXETINE HYDROCHLORIDE TABS (<i>fluoxetine hcl</i>)	1	QL(1 ea daily); PA	PROZAC CAPS 10 MG (<i>fluoxetine hcl</i>)	1	QL(3 ea daily); MP
<i>fluvoxamine maleate CP24</i>	1	QL(2 ea daily); PA	PROZAC CAPS 40 MG (<i>fluoxetine hcl</i>)	1	QL(2 ea daily); MP
<i>fluvoxamine maleate TABS 50 MG</i>	1	QL(100 ea per 50 day(s) retail; 100 ea per 50 days mail)	PROZAC CAPS 20 MG (<i>fluoxetine hcl</i>)	1	QL(4 ea daily); MP
<i>fluvoxamine maleate TABS 100 MG</i>	1	QL(3 ea daily)	<i>sertraline hcl CONC</i>	1	QL(10 ml daily)
<i>fluvoxamine maleate TABS 25 MG</i>	1	QL(1 ea daily); MP	<i>sertraline hcl TABS</i>	1	QL(3 ea daily); MP
LEXAPRO TABS 10 MG (<i>escitalopram oxalate</i>)	1	QL(1.5 ea daily); MP	SERTRALINE HYDROCHLORIDE CAPS	1	QL(1 ea daily); PA
LEXAPRO TABS 5 MG, 20 MG (<i>escitalopram oxalate</i>)	1	QL(2 ea daily); MP	ZOLOFT CONC (<i>sertraline hcl</i>)	1	QL(10 ml daily)
<i>paroxetine hcl SUSP</i>	1		ZOLOFT TABS (<i>sertraline hcl</i>)	1	QL(3 ea daily); MP
<i>paroxetine hcl TABS 20 MG</i>	1	QL(1 ea daily); MP	Serotonin Modulators		
<i>paroxetine hcl TABS 30 MG</i>	1	QL(2 ea daily); MP	<i>nefazodone hcl</i>	3	ST
<i>paroxetine hcl TABS 10 MG, 40 MG</i>	1	QL(1.5 ea daily); MP	<i>trazodone hcl TABS 300 MG</i>	1	PA
<i>paroxetine hcl TB24 12.5 MG, 37.5 MG</i>	1	QL(1 ea daily); PA	<i>trazodone hcl TABS 50 MG, 100 MG, 150 MG</i>	1	
<i>paroxetine hcl TB24 25 MG</i>	1	QL(2 ea daily); PA	TRINTELLIX	3	QL(1 ea daily); ST
PAXIL CR TB24 25 MG (<i>paroxetine hcl</i>)	1	QL(2 ea daily); PA	VIIBRYD TABS (<i>vilazodone hcl</i>)	3	QL(1 ea daily); ST
PAXIL CR TB24 12.5 MG, 37.5 MG (<i>paroxetine hcl</i>)	1	QL(1 ea daily); PA	<i>vilazodone hcl TABS</i>	3	QL(1 ea daily); ST
			Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)		
			CYMBALTA CPEP (<i>duloxetine hcl</i>)	1	QL(2 ea daily); MP
			DESVENLAFAXINE ER	3	QL(1 ea daily)
			<i>desvenlafaxine succinate</i>	2	QL(1 ea daily); ST; MP

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DRIZALMA SPRINKLE CSDR	1	QL(1 ea daily); AL(Up to 10 yrs old); PA	<i>doxepin hcl CAPS</i>	1	
<i>duloxetine hcl CPEP 40 MG</i>	1	QL(1 ea daily); PA	<i>doxepin hcl CONC</i>	1	
<i>duloxetine hcl CPEP 20 MG, 30 MG, 60 MG</i>	1	QL(2 ea daily); MP	<i>imipramine hcl TABS</i>	1	
EFFEXOR XR CP24 150 MG (<i>venlafaxine hcl</i>)	1	QL(2 ea daily); MP	<i>imipramine pamoate</i>	1	
EFFEXOR XR CP24 37.5 MG, 75 MG (<i>venlafaxine hcl</i>)	1	QL(1 ea daily)	NORPRAMIN TABS 10 MG, 25 MG (<i>desipramine hcl</i>)	9	
FETZIMA TITRATION PACK C4PK	3	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); ST	<i>nortriptyline hcl CAPS</i>	1	
FETZIMA CP24	3	QL(1 ea daily); ST	<i>nortriptyline hcl SOLN</i>	1	AL(Up to 20 yrs old); PA
PRISTIQ (<i>desvenlafaxine succinate</i>)	2	QL(1 ea daily); ST; MP	PAMELOR CAPS (<i>nortriptyline hcl</i>)	1	
PRISTIQ 50 MG (<i>desvenlafaxine succinate</i>)	9	QL(1 ea daily); ST; MP	<i>protriptyline hcl</i>	1	
VENLAFAXINE BESYLATE ER	1	QL(1 ea daily); PA	<i>trimipramine maleate CAPS</i>	1	
<i>venlafaxine hcl CP24 37.5 MG, 75 MG</i>	1	QL(1 ea daily)	ANTIDIABETICS - Drugs to Regulate Blood Sugar		
<i>venlafaxine hcl CP24 150 MG</i>	1	QL(2 ea daily); MP	Alpha-Glucosidase Inhibitors		
<i>venlafaxine hcl TABS</i>	1	QL(3 ea daily)	<i>acarbose 50 MG</i>	1	QL(3 ea daily); MP
<i>venlafaxine hcl TB24 225 MG</i>	1	QL(1 ea daily); PA	<i>acarbose 25 MG, 100 MG</i>	1	QL(6 ea daily); MP
<i>venlafaxine hcl TB24 37.5 MG, 75 MG</i>	1	QL(1 ea daily)	<i>miglitol</i>	3	ST
<i>venlafaxine hcl TB24 150 MG</i>	1	QL(2 ea daily)	Antidiabetic - Amylin Analogs		
Tricyclic Agents			SYMLINPEN 120 SOPN	1	QL(10.8 ml per 30 day(s) retail; 11 ml per 30 days mail); AL(At least 15 yrs old); PA
<i>amitriptyline hcl TABS</i>	1		SYMLINPEN 60 SOPN	1	QL(6 ml per 30 day(s) retail; 6 ml per 30 days mail); AL(At least 15 yrs old); PA
<i>amoxapine</i>	1		Antidiabetic Combinations		
ANAFRANIL (<i>clomipramine hcl</i>)	1		ACTOPLUS MET TABS 850 MG-15 MG (<i>pioglitazone hcl-metformin hcl</i>)	3	ST
<i>clomipramine hcl</i>	1		<i>alogliptin-metformin hcl</i>	3	ST
<i>desipramine hcl TABS</i>	1				

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<i>alogliptin-pioglitazone 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG</i>	3	ST	JENTADUETO XR TB24	2	QL(1 ea daily); ST; MP
<i>dapagliflozin propanediol-metformin hcl 1000 MG-5 MG</i>	2	Brand Required; QL(2 ea daily); ST; MP; PA	JENTADUETO TABS	2	QL(2 ea daily); ST; MP
<i>dapagliflozin propanediol-metformin hcl 1000 MG-10 MG</i>	2	Brand Required; QL(1 ea daily); ST; MP; PA	KAZANO (<i>alogliptin-metformin hcl</i>)	3	ST
DUETACT (<i>pioglitazone hcl-glimepiride</i>)	3	ST	KOMBIGLYZE XR 1000 MG-2.5 MG (<i>saxagliptin-metformin hcl</i>)	1	QL(2 ea daily); ST; MP; PA
<i>glipizide-metformin hcl 500 MG-2.5 MG, 500 MG-5 MG</i>	1	QL(4 ea daily); MP	KOMBIGLYZE XR 1000 MG-5 MG, 500 MG-5 MG (<i>saxagliptin-metformin hcl</i>)	1	QL(1 ea daily); ST; MP; PA
<i>glipizide-metformin hcl 250 MG-2.5 MG</i>	1	QL(8 ea daily); MP	OSENI 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG (<i>alogliptin-pioglitazone</i>)	3	ST
<i>glyburide-metformin 250 MG-1.25 MG</i>	1	QL(8 ea daily); MP	<i>pioglitazone hcl-glimepiride</i>	3	ST
<i>glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG</i>	1	QL(4 ea daily); MP	<i>pioglitazone hcl-metformin hcl TABS</i>	3	ST
GLYXAMBI	1	QL(1 ea daily)	QTERN	1	QL(1 ea daily); PA
INVOKAMET XR TB24 1000 MG-150 MG, 1000 MG-50 MG	2	QL(2 ea daily)	<i>saxagliptin-metformin hcl 1000 MG-2.5 MG</i>	1	QL(2 ea daily); ST; MP; PA
INVOKAMET XR TB24 500 MG-150 MG, 500 MG-50 MG	2	QL(1 ea daily)	<i>saxagliptin-metformin hcl 1000 MG-5 MG, 500 MG-5 MG</i>	1	QL(1 ea daily); ST; MP; PA
INVOKAMET TABS 1000 MG-150 MG, 500 MG-50 MG	2	QL(2 ea daily); ST; MP	SEGLUROMET	1	QL(2 ea daily); PA
INVOKAMET TABS 1000 MG-50 MG, 500 MG-150 MG	2	QL(1 ea daily); ST; MP	SITAGLIPTIN/METFORMIN HYDROCHLORIDE	1	PA
JANUMET XR TB24 1000 MG-100 MG, 500 MG-50 MG	2	QL(1 ea daily); ST; MP	SOLIQUA 100/33	3	QL(15 ml per 30 day(s) retail; 15 ml per 30 days mail)
JANUMET XR TB24 1000 MG-50 MG	2	QL(2 ea daily); ST; MP	STEGLUJAN	1	QL(1 ea daily); PA
JANUMET TABS	2	QL(2 ea daily); ST; MP	SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG	2	QL(2 ea daily); ST; MP
			SYNJARDY XR TB24 1000 MG-25 MG	2	QL(1 ea daily); ST; MP
			SYNJARDY TABS	2	QL(2 ea daily); ST; MP

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TRIJARDY XR 1000 MG-5 MG-10 MG, 1000 MG-5 MG-25 MG	1	QL(1 ea daily)	RIOMET SOLN (<i>metformin hcl</i>)	9	
TRIJARDY XR 1000 MG-2.5 MG-12.5 MG, 1000 MG-2.5 MG-5 MG	1	QL(2 ea daily)	Diabetic Other		
XIGDUO XR 1000 MG-2.5 MG, 1000 MG-5 MG	2	Brand Required; QL(2 ea daily); ST; MP	BAQSIMI ONE PACK POWD	1	
XIGDUO XR (<i>dapagliflozin propanediol-metformin hcl</i>)	2	Brand Required; QL(2 ea daily); ST; MP	BAQSIMI TWO PACK POWD	1	
XIGDUO XR 1000 MG-10 MG, 500 MG-10 MG, 500 MG-5 MG	2	Brand Required; QL(1 ea daily); ST; MP	<i>diazoxide</i>	1	
XIGDUO XR (<i>dapagliflozin propanediol-metformin hcl</i>)	2	Brand Required; QL(1 ea daily); ST; MP	GLUCAGEN HYPOKIT	1	
XULTOPHY 100/3.6	3	QL(15 ml per 30 day(s) retail; 15 ml per 30 days mail)	<i>glucagon (rdna)</i>	1	
Antidiabetic-Antibodies			GLUCAGON EMERGENCY KIT (<i>glucagon (rdna)</i>)	9	
TZIELD	1	AL(At least 8 yrs old); PA	GLUCAGON EMERGENCY KIT FOR LOW BLOOD SUGAR	1	
Biguanides			GVOKE HYPOPEN 2-PACK SOAJ	1	
GLUMETZA TB24 (<i>metformin hcl</i>)	1	QL(4 ea daily); PA	GVOKE KIT SOLN	1	
<i>metformin hcl SOLN</i>	1	PA	GVOKE PFS SOSY 1 MG/0.2ML	1	
<i>metformin hcl TABS 850 MG, 1000 MG</i>	1	QL(3 ea daily); MP	KORLYM (<i>mifepristone (hyperglycemia)</i>)	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); PA
<i>metformin hcl TABS 625 MG</i>	1	QL(4 ea daily); PA	<i>mifepristone (hyperglycemia)</i>	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); PA
<i>metformin hcl TABS 500 MG</i>	1	QL(5 ea daily); MP	PROGLYCEM (<i>diazoxide</i>)	1	
<i>metformin hcl TB24 500 MG, 1000 MG</i>	1	QL(4 ea daily); PA	ZEGALOGUE SOAJ	1	
<i>metformin hcl TB24 500 MG</i>	1	QL(4 ea daily); MP	ZEGALOGUE SOSY	1	
<i>metformin hcl TB24 750 MG</i>	1	QL(3 ea daily); MP	Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
			<i>alogliptin benzoate</i>	3	ST
			JANUVIA 50 MG, 100 MG	2	QL(2 ea daily); ST; MP
			JANUVIA 25 MG	2	QL(4 ea daily); ST; MP
			NESINA (<i>alogliptin benzoate</i>)	3	ST

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ONGLYZA 5 MG (saxagliptin hcl)	1	QL(1 ea daily); ST; MP; PA	OZEMPIC SOPN	3	QL(3 ml per 28 day(s) retail; 3 ml per 28 days mail); ST
ONGLYZA 2.5 MG (saxagliptin hcl)	1	QL(2 ea daily); ST; MP; PA	RYBELSUS TABS	3	QL(1 ea daily); ST; PA
saxagliptin hcl 5 MG	1	QL(1 ea daily); ST; MP; PA	TRULICITY SC 1.5 MG/0.5ML	2	ST; MP
saxagliptin hcl 2.5 MG	1	QL(2 ea daily); ST; MP; PA	TRULICITY SC 0.75 MG/0.5ML, 3 MG/0.5ML, 4.5 MG/0.5ML	2	QL(6 ml per 84 day(s) retail; 6 ml per 84 days mail); ST; MP
SITAGLIPTIN	1	QL(1 ea daily); PA	VICTOZA (liraglutide)	2	Brand Required; QL(0.2 ml daily); ST; MP
TRADJENTA	2	QL(1 ea daily); ST; MP	VICTOZA (liraglutide)	2	Brand Required; QL(0.3 ml daily); ST; MP
ZITUVIO	1	QL(1 ea daily); PA	Insulin		
Dopamine Receptor Agonists - Antidiabetic			ADMELOG SOLOSTAR SOPN	1	Brand Required; QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP; PA
CYCLOSET	3	QL(6 ea daily); ST	ADMELOG SOLN IJ	1	Brand Required; QL(120 ml per 90 day(s) retail; 120 ml per 90 days mail); MP; PA
Incretin Mimetic Agents			AFREZZA POWD 4 UNIT, 8 UNIT, 12 UNIT	1	AL(At least 18 yrs old); PA
BYDUREON BCISE AUJ	3	QL(3.4 ml per 28 day(s) retail; 10 ml per 84 days mail); ST; MP; PA	APIDRA SOLOSTAR SOPN	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP
BYETTA SOPN 5 MCG/0.02ML	2	QL(3.6 ml per 90 day(s) retail; 4 ml per 90 days mail); ST; MP	APIDRA SOLN	1	QL(120 ml per 90 day(s) retail; 120 ml per 90 days mail); MP
BYETTA SOPN 10 MCG/0.04ML	2	QL(7.2 ml per 90 day(s) retail; 7 ml per 90 days mail); ST; MP			
<i>liraglutide</i>	2	Brand Required; ST; MP; PA			
MOUNJARO SC 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	4	QL(2 ml per 28 day(s) retail; 2 ml per 28 days mail); PA			
OZEMPIC SOPN 2 MG/1.5ML	1	QL(1.5 ml per 28 day(s) retail; 2 ml per 28 days mail); ST; PA			

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BASAGLAR KWIKPEN SOPN	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP; PA	HUMALOG MIX 75/25 SUSP	1	QL(120 ml per 90 day(s) retail; 120 ml per 90 days mail); MP
BASAGLAR TEMPO PEN SOPN	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); PA	HUMALOG TEMPO PEN SOPN	1	QL(45 ml per 30 day(s) retail; 45 ml per 30 days mail)
FIASP FLEXTOUCH SOPN	1	QL(45 ml per 30 day(s) retail; 45 ml per 30 days mail); PA	HUMALOG SOCT	1	Brand Required; QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP
FIASP PENFILL SOCT	1	QL(45 ml per 30 day(s) retail; 45 ml per 30 days mail); PA	HUMALOG SOLN IJ	1	Brand Required; QL(120 ml per 90 day(s) retail; 120 ml per 90 days mail); MP
FIASP PUMPCART SOCT	1	QL(40 ml per 30 day(s) retail; 40 ml per 30 days mail); PA	HUMULIN 70/30 KWIKPEN SUPN	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP
FIASP SOLN	1	QL(40 ml per 30 day(s) retail; 40 ml per 30 days mail); PA	HUMULIN 70/30 SUSP	1	QL(120 ml per 90 day(s) retail; 120 ml per 90 days mail); MP
HUMALOG JUNIOR KWIKPEN SOPN	1	Brand Required; QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP	HUMULIN N KWIKPEN SUPN	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP
HUMALOG KWIKPEN SOPN 100 UNIT/ML	1	Brand Required; QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP	HUMULIN N SUSP	1	QL(120 ml per 90 day(s) retail; 120 ml per 90 days mail); MP
HUMALOG KWIKPEN SOPN 200 UNIT/ML	1	QL(24 ml per 30 day(s) retail; 24 ml per 30 days mail); PA	HUMULIN R U-500 (CONCENTRATED) SOLN SC	1	QL(40 ml per 30 day(s) retail; 40 ml per 30 days mail); PA
HUMALOG MIX 50/50 KWIKPEN SUPN	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP	HUMULIN R U-500 KWIKPEN SOPN SC	1	QL(12 ml per 30 day(s) retail; 12 ml per 30 days mail)
HUMALOG MIX 75/25 KWIKPEN SUPN	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP	HUMULIN R SOLN IJ	1	QL(120 ml per 90 day(s) retail; 120 ml per 90 days mail); MP

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INSULIN ASPART FLEXPEN SOPN	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP	INSULIN GLARGINE SOLOSTAR SOPN 100 UNIT/ML	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP
INSULIN ASPART PENFILL SOCT	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP	INSULIN GLARGINE SOLN	1	QL(120 ml per 90 day(s) retail; 120 ml per 90 days mail); MP; PA
INSULIN ASPART PROTAMINE/INSULIN ASPART FLEXPEN SUPN	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP	INSULIN GLARGINE-YFGN SOLN	1	QL(120 ml per 90 day(s) retail; 120 ml per 90 days mail); MP
INSULIN ASPART PROTAMINE/INSULIN ASPART SUSP	1	QL(120 ml per 90 day(s) retail; 120 ml per 90 days mail); MP	INSULIN GLARGINE-YFGN SOPN	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail)
INSULIN ASPART SOLN IJ	1	QL(120 ml per 90 day(s) retail; 120 ml per 90 days mail); MP	INSULIN LISPRO JUNIOR KWIKPEN SOPN	1	Brand Required; QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP
INSULIN DEGLUDEC FLEXTOUCH SOPN 100 UNIT/ML	1	Brand Required; QL(45 ml per 30 day(s) retail; 45 ml per 30 days mail); PA	INSULIN LISPRO KWIKPEN SOPN	1	Brand Required; QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP; PA
INSULIN DEGLUDEC FLEXTOUCH SOPN 200 UNIT/ML	1	Brand Required; QL(27 ml per 30 day(s) retail; 27 ml per 30 days mail); PA	INSULIN LISPRO PROTAMINE/INSULIN LISPRO KWIKPEN SUPN	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP
INSULIN DEGLUDEC SOLN	1	Brand Required; QL(40 ml per 30 day(s) retail; 40 ml per 30 days mail); PA	INSULIN LISPRO SOLN IJ	1	Brand Required; QL(120 ml per 90 day(s) retail; 120 ml per 90 days mail); MP; PA
INSULIN GLARGINE MAX SOLOSTAR SOPN	1	Brand Required; QL(13.5 ml per 30 day(s) retail; 14 ml per 30 days mail); PA	LANTUS SOLOSTAR SOPN	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP
INSULIN GLARGINE SOLOSTAR SOPN 300 UNIT/ML	1	Brand Required; QL(13.5 ml per 30 day(s) retail; 14 ml per 30 days mail); PA	LANTUS SOLN	1	QL(120 ml per 90 day(s) retail; 120 ml per 90 days mail); MP

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LEVEMIR FLEXPEN SOPN	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP	NOVOLIN N FLEXPEN SUPN	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP
LEVEMIR FLEXTOUCH SOPN	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP	NOVOLIN N RELION SUSP	1	QL(120 ml per 90 day(s) retail; 120 ml per 90 days mail); MP
LEVEMIR SOLN	1	QL(120 ml per 90 day(s) retail; 120 ml per 90 days mail); MP	NOVOLIN N SUSP	1	QL(120 ml per 90 day(s) retail; 120 ml per 90 days mail); MP
LYUMJEV KWIKPEN SOPN 100 UNIT/ML	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); PA	NOVOLIN R FLEXPEN RELION SOPN IJ	1	QL(45 ml per 30 day(s) retail; 45 ml per 30 days mail)
LYUMJEV KWIKPEN SOPN 200 UNIT/ML	1	QL(24 ml per 30 day(s) retail; 24 ml per 30 days mail); PA	NOVOLIN R FLEXPEN SOPN IJ	1	QL(45 ml per 30 day(s) retail; 45 ml per 30 days mail)
LYUMJEV TEMPO PEN SOPN	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); PA	NOVOLIN R RELION SOLN IJ	1	QL(120 ml per 90 day(s) retail; 120 ml per 90 days mail); MP
LYUMJEV SOLN	1	QL(120 ml per 90 day(s) retail; 120 ml per 90 days mail); PA	NOVOLIN R SOLN IJ	1	QL(120 ml per 90 day(s) retail; 120 ml per 90 days mail); MP
MYXREDLIN	1		NOVOLOG FLEXPEN RELION SOPN	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP
NOVOLIN 70/30 FLEXPEN RELION SUPN	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP	NOVOLOG FLEXPEN SOPN	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP
NOVOLIN 70/30 FLEXPEN SUPN	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP	NOVOLOG MIX 70/30 PREFILLED FLEXPEN RELION SUPN	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP
NOVOLIN 70/30 RELION SUSP	1	QL(120 ml per 90 day(s) retail; 120 ml per 90 days mail); MP	NOVOLOG MIX 70/30 PREFILLED FLEXPEN SUPN	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP
NOVOLIN 70/30 SUSP	1	QL(120 ml per 90 day(s) retail; 120 ml per 90 days mail); MP	NOVOLOG MIX 70/30 RELION SUSP	1	QL(120 ml per 90 day(s) retail; 120 ml per 90 days mail); MP
NOVOLIN N FLEXPEN RELION SUPN	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP			

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NOVOLOG MIX 70/30 SUSP	1	QL(120 ml per 90 day(s) retail; 120 ml per 90 days mail); MP	TRESIBA FLEXTOUCH SOPN 100 UNIT/ML	1	Brand Required; QL(45 ml per 30 day(s) retail; 45 ml per 30 days mail); PA
NOVOLOG PENFILL SOCT	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); MP	TRESIBA SOLN	1	Brand Required; QL(40 ml per 30 day(s) retail; 40 ml per 30 days mail); PA
NOVOLOG RELION SOLN IJ	1	QL(120 ml per 90 day(s) retail; 120 ml per 90 days mail); MP	Insulin Sensitizing Agents		
NOVOLOG SOLN IJ	1	QL(120 ml per 90 day(s) retail; 120 ml per 90 days mail); MP	ACTOS 15 MG (<i>pioglitazone hcl</i>)	1	QL(3 ea daily); MP
REZVOGLAR KWIKPEN	1	QL(45 ml per 30 day(s) retail; 45 ml per 30 days mail); PA	ACTOS 30 MG, 45 MG (<i>pioglitazone hcl</i>)	1	QL(1 ea daily); MP
SEMGLEE SOLN	1	QL(120 ml per 90 day(s) retail; 120 ml per 90 days mail); MP; PA	<i>pioglitazone hcl</i> 30 MG, 45 MG	1	QL(1 ea daily); MP
SEMGLEE SOPN	1	QL(135 ml per 90 day(s) retail; 135 ml per 90 days mail); PA	<i>pioglitazone hcl</i> 15 MG	1	QL(3 ea daily); MP
TOUJEO MAX SOLOSTAR SOPN	1	Brand Required; QL(13.5 ml per 30 day(s) retail; 14 ml per 30 days mail); PA	Meglitinide Analogues		
TOUJEO SOLOSTAR SOPN	1	Brand Required; QL(13.5 ml per 30 day(s) retail; 14 ml per 30 days mail); PA	<i>nateglinide</i>	2	QL(3 ea daily); ST; MP
TRESIBA FLEXTOUCH SOPN 200 UNIT/ML	1	Brand Required; QL(27 ml per 30 day(s) retail; 27 ml per 30 days mail); PA	<i>repaglinide</i>	1	QL(8 ea daily); MP
			Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors		
			<i>dapagliflozin propanediol</i>	1	Brand Required; QL(1 ea daily); MP; PA
			FARXIGA (<i>dapagliflozin propanediol</i>)	1	Brand Required; QL(1 ea daily); MP
			INVOKANA 100 MG	2	QL(1 ea daily); ST; MP
			INVOKANA 300 MG	2	QL(2 ea daily); ST; MP
			JARDIANCE 25 MG	1	QL(1 ea daily); MP
			JARDIANCE 10 MG	1	QL(2 ea daily); MP
			STEGLATRO	1	QL(1 ea daily); PA

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Sulfonylureas			GLYNASE 6 MG (glyburide micronized)	9	QL(2 ea daily); MP
AMARYL 2 MG (glimepiride)	9	QL(4 ea daily); MP	GLYNASE 1.5 MG (glyburide micronized)	9	QL(8 ea daily); MP
AMARYL 1 MG (glimepiride)	9	QL(8 ea daily); MP	ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea		
AMARYL 4 MG (glimepiride)	9	QL(2 ea daily); MP	Antidiarrheal - Chloride Channel Antagonists		
glimepiride 1 MG	1	QL(8 ea daily); MP	MYTESI	1	PA
glimepiride 2 MG	1	QL(4 ea daily); MP	Antiperistaltic Agents		
glimepiride 4 MG	1	QL(2 ea daily); MP	diphenoxylate w/ atropine LIQD	1	QL(400 ml per 12 day(s) retail; 400 ml per 12 days mail)
glimepiride 3 MG	1	PA	diphenoxylate w/ atropine TABS	1	QL(80 ea per 12 day(s) retail; 80 ea per 12 days mail)
glipizide TABS 5 MG	1	QL(8 ea daily); MP	IMODIUM A-D CAPS (loperamide hcl)	9	QL(8 ea daily); RX/OTC
glipizide TABS 2.5 MG	1	QL(1 ea daily); PA	LOMOTIL TABS (diphenoxylate w/ atropine)	1	QL(80 ea per 12 day(s) retail; 80 ea per 12 days mail)
glipizide TABS 10 MG	1	QL(4 ea daily); MP	loperamide hcl CAPS	1	QL(8 ea daily); RX/OTC
glipizide TB24 5 MG	1	QL(4 ea daily); MP	MOTOFEN	1	QL(16 ea per fill retail); AL(At least 3 yrs old); PA
glipizide TB24 2.5 MG	1	QL(8 ea daily); MP	opium tincture	1	
glipizide TB24 10 MG	1	QL(2 ea daily); MP	ANTIDOTES AND SPECIFIC ANTAGONISTS		
GLUCOTROL XL TB24 10 MG (glipizide)	1	QL(2 ea daily); MP	Antidote Combinations		
GLUCOTROL XL TB24 5 MG (glipizide)	1	QL(4 ea daily); MP	PREVDUO	1	
GLUCOTROL XL TB24 2.5 MG (glipizide)	1	QL(8 ea daily); MP	Antidotes - Chelating Agents		
glyburide micronized 1.5 MG	1	QL(8 ea daily); MP	CHEMET	1	
glyburide micronized 6 MG	1	QL(2 ea daily); MP	deferasirox PACK	1	PA
glyburide micronized 3 MG	1	QL(4 ea daily); MP	deferasirox TABS	1	AL(At least 3 yrs old); PA
glyburide TABS 5 MG	1	QL(4 ea daily); MP	deferasirox TBSO	1	AL(At least 3 yrs old)
glyburide TABS 1.25 MG, 2.5 MG	1	QL(8 ea daily); MP	deferiprone TABS	1	PA
GLYNASE 3 MG (glyburide micronized)	9	QL(4 ea daily); MP			

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EXJADE TBSO (<i>deferiasirox</i>)	1	AL(At least 3 yrs old)
FERRIPROX TWICE-A-DAY TABS	1	PA
FERRIPROX SOLN	1	PA
FERRIPROX TABS (<i>deferiprone</i>)	1	PA
JADENU SPRINKLE PACK (<i>deferiasirox</i>)	9	
JADENU SPRINKLE PACK (<i>deferiasirox</i>)	1	PA
JADENU TABS (<i>deferiasirox</i>)	1	AL(At least 3 yrs old); PA
Antidotes and Specific Antagonists		
ACETADOTE SOLN (<i>acetylcysteine (antidote)</i>)	1	
<i>acetylcysteine (antidote) SOLN</i>	1	
ANDEXXA 200 MG	1	
BRIDION SOLN	1	
<i>deferoxamine mesylate</i>	1	
DESFERAL 500 MG (<i>deferoxamine mesylate</i>)	1	
DESFERAL 500 MG (<i>deferoxamine mesylate</i>)	9	
EDETATE CALCIUM DISODIUM SOLN	1	
<i>fomepizole 1.5 GM/1.5ML</i>	1	
<i>methylene blue (antidote) SOLN IV 50 MG/10ML</i>	1	
PRAXBIND	1	
PROVAYBLUE SOLN IV (<i>methylene blue (antidote)</i>)	1	
PROVAYBLUE SOLN IV (<i>methylene blue (antidote)</i>)	9	
Benzodiazepine Antagonists		
<i>flumazenil</i>	1	
Opioid Antagonists		

Drug Name	Drug Tier	Requirements/Limits
KLOXXADO LIQD	1	QL(2 ea per 30 day(s) retail; 2 ea per 30 days mail)
NALMEFENE HYDROCHLORIDE IJ	1	
<i>naloxone hcl LIQD</i>	1	QL(2 ea per 30 day(s) retail; 2 ea per 30 days mail); RX/OTC
<i>naloxone hcl SOCT</i>	1	
<i>naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML</i>	1	
<i>naloxone hcl SOSY 0.4 MG/ML</i>	1	
<i>naloxone hcl SOSY 2 MG/2ML</i>	1	QL(4 ml per 30 day(s) retail; 4 ml per 30 days mail)
<i>naltrexone hcl</i>	1	
NARCAN LIQD (<i>naloxone hcl</i>)	1	QL(2 ea per 30 day(s) retail; 2 ea per 30 days mail); RX/OTC
OPVEE NA	1	QL(2 ea per 30 day(s) retail; 2 ea per 30 days mail); AL(At least 12 yrs old)
REXTOVY LIQD	1	
VIVITROL	1	
ZIMHI SOSY	1	QL(1 ml per 30 day(s) retail; 1 ml per 30 days mail)
ANTIEMETICS - Drugs to Treat Nausea and Vomiting		
5-HT3 Receptor Antagonists		
ANZEMET TABS 50 MG	1	QL(10 ea per fill retail); PA
<i>granisetron hcl SOLN IV 1 MG/ML, 4 MG/4ML</i>	1	PA

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<i>granisetron hcl TABS</i>	1	QL(20 ea per 10 day(s) retail; 20 ea per 10 days mail); PA	TRANSDERM-SCOP (<i>scopolamine</i>)	9	QL(10 ea per 30 day(s) retail; 10 ea per 30 days mail)
<i>ondansetron hcl SOLN OR 4 MG/5ML</i>	1	QL(50 ml per 10 day(s) retail; 50 ml per 10 days mail)	<i>trimethobenzamide hcl CAPS</i>	1	
<i>ondansetron hcl SOLN IJ</i>	1		Antiemetics - Antidopaminergic		
<i>ondansetron hcl SOSY</i>	1		BARHEMSYS	1	
<i>ondansetron hcl TABS 4 MG, 8 MG</i>	1	QL(30 ea per 10 day(s) retail; 30 ea per 10 days mail)	Antiemetics - Miscellaneous		
<i>ondansetron TBDP 4 MG, 8 MG</i>	1	QL(30 ea per 10 day(s) retail; 30 ea per 10 days mail)	AKYNZEO	1	QL(1 ea per 7 day(s) retail; 1 ea per 7 days mail); PA
<i>ondansetron TBDP 16 MG</i>	1	PA	AKYNZEO SOLN	1	PA
<i>palonosetron hcl SOLN</i>	1		AKYNZEO SOLR	1	QL(1 ea per 7 day(s) retail; 1 ea per 7 days mail); PA
<i>palonosetron hcl SOSY</i>	1	PA	BONJESTA TBCR	1	QL(2 ea daily); AL(At least 10 yrs old - Up to 50 yrs old); PA
PALONOSETRON HYDROCHLORIDE SOLN	1		DICLEGIS TBEC (<i>doxylamine-pyridoxine</i>)	1	Brand Required; QL(4 ea daily); AL(At least 10 yrs old - Up to 50 yrs old)
POSFREA SOLN	1		<i>doxylamine-pyridoxine TBEC</i>	1	Brand Required; QL(4 ea daily); AL(At least 10 yrs old - Up to 50 yrs old); PA
SANCUSO PTCH	1	QL(1 ea per 20 day(s) retail; 1 ea per 20 days mail); PA	<i>dronabinol CAPS</i>	1	QL(2 ea daily); PA
SUSTOL PRSY	1	PA	MARINOL CAPS 2.5 MG (<i>dronabinol</i>)	1	QL(2 ea daily); PA
Antiemetics - Anticholinergic			MARINOL CAPS 5 MG, 10 MG (<i>dronabinol</i>)	9	QL(2 ea daily)
DIMENHYDRINATE SOLN	1		SYNDROS SOLN	1	AL(Up to 20 yrs old); PA
<i>meclizine hcl TABS 12.5 MG, 25 MG</i>	1	RX/OTC	Substance P/Neurokinin 1 (NK1) Receptor Antagonists		
<i>scopolamine</i>	1	QL(10 ea per 30 day(s) retail; 10 ea per 30 days mail)			
TIGAN SOLN	1				
TRANSDERM-SCOP (<i>scopolamine</i>)	1	QL(10 ea per 30 day(s) retail; 10 ea per 30 days mail)			

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APONVIE EMUL	1	QL(4.4 ml per fill retail); PA	MYCAMINE (<i>miconazole sodium</i>)	1	
<i>aprepitant CAPS</i>	1	QL(1 ea daily); PA	REZZAYO	1	AL(At least 18 yrs old); PA
<i>aprepitant MISC</i>	1	QL(1 ea daily); PA	Antifungals		
CINVANTI EMUL	1	QL(18 ml per fill retail); PA	ABELCET	1	
EMEND TRIPACK CAPS (<i>aprepitant</i>)	1	QL(1 ea daily); PA	AMBISOME (<i>amphotericin b liposome</i>)	1	
EMEND CAPS 80 MG (<i>aprepitant</i>)	1	QL(1 ea daily); PA	<i>amphotericin b IV</i>	1	
EMEND SOLR (<i>fosaprepitant dimeglumine</i>)	9	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail)	<i>amphotericin b liposome</i>	1	
EMEND SOLR (<i>fosaprepitant dimeglumine</i>)	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); PA	ANCOBON (<i>flucytosine</i>)	1	PA
EMEND SUSR	1	QL(1 ea daily); AL(Up to 6 yrs old); PA	<i>flucytosine</i>	1	PA
FOCINVEZ SOLN	1	PA	<i>griseofulvin microsize SUSP</i>	1	
<i>fosaprepitant dimeglumine SOLR</i>	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); PA	<i>griseofulvin microsize TABS</i>	1	
ANTIFUNGALS - Drugs to Treat Fungal Infections			<i>griseofulvin ultramicrosize</i>	1	
Antifungal - Glucan Synthesis Inhibitors			<i>nystatin TABS</i>	1	
BREXAFEMME	1	QL(4 ea per fill retail); AL(At least 10 yrs old); PA	<i>terbinafine hcl TABS</i>	1	
CANCIDAS (<i>caspofungin acetate</i>)	1		Imidazole-Related Antifungals		
<i>caspofungin acetate</i>	1		CRESEMBA CAPS OR 186 MG	1	QL(68 ea per 30 day(s) retail; 68 ea per 30 days mail); AL(At least 18 yrs old); PA
CASPOFUNGIN ACETATE	1		CRESEMBA CAPS OR 74.5 MG	1	QL(140 ea per 28 day(s) retail; 140 ea per 28 days mail); AL(At least 18 yrs old); PA
ERAXIS	1		CRESEMBA SOLR IV	1	AL(At least 18 yrs old)
MICAFUNGIN	1		DIFLUCAN SUSR 40 MG/ML (<i>fluconazole</i>)	1	
<i>miconazole sodium</i>	1		DIFLUCAN SUSR 10 MG/ML (<i>fluconazole</i>)	9	
MICAFUNGIN/SODIUM CHLORIDE	1		DIFLUCAN TABS 150 MG (<i>fluconazole</i>)	9	QL(7 ea per fill retail)
			DIFLUCAN TABS 100 MG, 200 MG (<i>fluconazole</i>)	1	

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<i>fluconazole in nacl 0.9 %-200 MG/100ML, 0.9 %-400 MG/200ML</i>	1		VIVJOA	1	QL(18 ea per 84 day(s) retail; 18 ea per 84 days mail); AL(At least 18 yrs old); PA
FLUCONAZOLE/SODIUM CHLORIDE	1		<i>voriconazole SOLR</i>	1	
<i>fluconazole SUSR</i>	1		VORICONAZOLE SOLR (<i>voriconazole</i>)	1	
<i>fluconazole TABS 50 MG, 100 MG, 200 MG</i>	1		<i>voriconazole SUSR</i>	1	
<i>fluconazole TABS 150 MG</i>	1	QL(7 ea per fill retail)	<i>voriconazole TABS</i>	1	
<i>itraconazole CAPS</i>	1		ANTIHISTAMINES - Drugs to Treat Allergies		
<i>itraconazole SOLN</i>	1		Antihistamines - Ethanolamines		
<i>ketoconazole</i>	1	AL(At least 3 yrs old); PA	<i>carbinoxamine maleate SOLN</i>	1	
MICONAZOLE	1		<i>carbinoxamine maleate TABS 4 MG</i>	1	AL(Up to 20 yrs old); PA
NOXAFIL PACK	1	PA	<i>clemastine fumarate SYRP</i>	1	PA
NOXAFIL SOLN (<i>posaconazole</i>)	1		<i>clemastine fumarate TABS 2.68 MG</i>	1	PA
NOXAFIL SUSP (<i>posaconazole</i>)	1	PA	<i>diphenhydramine hcl SOLN 50 MG/ML</i>	1	
NOXAFIL TBEC (<i>posaconazole</i>)	1		Antihistamines - Non-Sedating		
<i>posaconazole SOLN</i>	1		<i>cetirizine hcl SOLN OR</i>	1	AL(Up to 20 yrs old); RX/OTC
<i>posaconazole SUSP</i>	1	PA	<i>cetirizine hcl TABS</i>	1	QL(1 ea daily); AL(Up to 20 yrs old); MP
<i>posaconazole TBEC</i>	1		CLARINEX TABS (<i>desloratadine</i>)	9	QL(1 ea daily)
SPORANOX CAPS (<i>itraconazole</i>)	1		CLARINEX TABS (<i>desloratadine</i>)	1	QL(1 ea daily); PA
SPORANOX SOLN (<i>itraconazole</i>)	1		CLARITIN ALLERGY CHILDRENS SOLN (<i>loratadine</i>)	9	
TOLSURA CAPS	1	QL(4 ea daily); PA	CLARITIN REDITABS JUNIORS TBDP (<i>loratadine</i>)	9	QL(1 ea daily); MP
VFEND IV SOLR (<i>voriconazole</i>)	1		CLARITIN REDITABS TBDP 10 MG (<i>loratadine</i>)	9	QL(1 ea daily); MP
VFEND IV SOLR (<i>voriconazole</i>)	9				
VFEND SUSR (<i>voriconazole</i>)	1				
VFEND TABS (<i>voriconazole</i>)	1				

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CLARITIN REDITABS TBDP 10 MG (<i>loratadine</i>)	9	QL(1 ea daily); AL(Up to 20 yrs old); MP	Antihistamines - Phenothiazines		
CLARITIN SOLN (<i>loratadine</i>)	9		PHENERGAN SOLN IJ (<i>promethazine hcl</i>)	9	
CLARITIN TABS (<i>loratadine</i>)	9	QL(1 ea daily); AL(Up to 20 yrs old); MP	PHENERGAN SOLN IJ (<i>promethazine hcl</i>)	1	
CLARITIN TABS (<i>loratadine</i>)	9	QL(1 ea daily); MP	<i>promethazine hcl</i> SOLN OR 6.25 MG/5ML	1	
<i>desloratadine</i> TABS	1	QL(1 ea daily); PA	<i>promethazine hcl</i> SUPP	1	QL(4 ea daily)
<i>desloratadine</i> TBDP	1	QL(1 ea daily); AL(At least 6 yrs old - Up to 11 yrs old); PA	<i>promethazine hcl</i> TABS	1	
<i>levocetirizine dihydrochloride</i> SOLN	2	QL(150 ml per 30 day(s) retail; 150 ml per 30 days mail); AL(Up to 6 yrs old); ST; RX/OTC	Antihistamines - Piperidines		
<i>levocetirizine dihydrochloride</i> TABS	2	QL(1 ea daily); AL(Up to 20 yrs old); ST; RX/OTC	<i>cyproheptadine hcl</i> SYRP	1	
<i>loratadine</i> SOLN	1	AL(Up to 20 yrs old)	<i>cyproheptadine hcl</i> TABS	1	
<i>loratadine</i> TABS	1	QL(1 ea daily); AL(Up to 20 yrs old); MP	ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol		
<i>loratadine</i> TBDP 10 MG	1	QL(1 ea daily); AL(Up to 20 yrs old); MP	Adenosine Triphosphate-Citrate Lyase (ACL) Inhibitors		
XYZAL ALLERGY 24HR CHILDRENS SOLN (<i>levocetirizine dihydrochloride</i>)	9	QL(150 ml per 30 day(s) retail; 150 ml per 30 days mail); ST; RX/OTC	NEXLETOL	1	QL(1 ea daily); PA
XYZAL ALLERGY 24HR TABS (<i>levocetirizine dihydrochloride</i>)	9	QL(1 ea daily); ST; RX/OTC	Angiotensin-like Protein Inhibitors		
ZYRTEC ALLERGY TABS (<i>cetirizine hcl</i>)	9	QL(1 ea daily); MP	EVKEEZA	1	AL(At least 5 yrs old); PA
ZYRTEC CHILDRENS ALLERGY SOLN OR (<i>cetirizine hcl</i>)	9	RX/OTC	Antihyperlipidemics - Combinations		
			<i>ezetimibe-simvastatin</i>	1	QL(1 ea daily); MP; PA
			NEXLIZET	1	QL(1 ea daily); PA
			VYTORIN (<i>ezetimibe-simvastatin</i>)	1	QL(1 ea daily); MP; PA
			Antihyperlipidemics - Misc.		
			<i>icosapent ethyl</i> 0.5 GM	1	QL(8 ea daily); PA
			<i>icosapent ethyl</i> 1 GM	1	QL(4 ea daily); PA
			LOVAZA (<i>omega-3-acid ethyl esters</i>)	1	QL(4 ea daily); MP
			<i>omega-3-acid ethyl esters</i>	1	QL(4 ea daily); MP
			VASCEPA 0.5 GM (<i>icosapent ethyl</i>)	9	QL(8 ea daily)

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VASCEPA 1 GM (icosapent ethyl)	9	QL(4 ea daily)	choline fenofibrate 135 MG	2	ST
Bile Acid Sequestrants			choline fenofibrate 45 MG	1	QL(2 ea daily)
cholestyramine light PACK	1	QL(2 ea daily)	fenofibrate micronized 67 MG, 134 MG	1	
cholestyramine light POWD	1		fenofibrate micronized 43 MG, 130 MG, 200 MG	2	ST
cholestyramine PACK	1	QL(2 ea daily)	fenofibrate CAPS	2	ST
cholestyramine POWD	1		fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG	1	
colesevelam hcl PACK	1	PA	fenofibrate TABS 40 MG, 120 MG	2	ST
colesevelam hcl TABS	1		FENOGLIDE TABS (fenofibrate)	2	ST
COLESTID FLAVORED GRAN (colestipol hcl)	9		gemfibrozil TABS	1	QL(2 ea daily); MP
COLESTID FLAVORED PACK (colestipol hcl)	9		LIPOFEN CAPS 50 MG (fenofibrate)	9	ST
COLESTID GRAN (colestipol hcl)	1		LIPOFEN CAPS (fenofibrate)	2	ST
COLESTID PACK (colestipol hcl)	9		LOPID TABS (gemfibrozil)	1	QL(2 ea daily); MP
COLESTID PACK (colestipol hcl)	1		TRICOR TABS (fenofibrate)	1	
COLESTID TABS (colestipol hcl)	1		TRILIPIX 45 MG (choline fenofibrate)	1	QL(2 ea daily)
colestipol hcl GRAN	1		TRILIPIX 135 MG (choline fenofibrate)	2	ST
colestipol hcl PACK	1		HMG CoA Reductase Inhibitors		
colestipol hcl TABS	1		ALTOPREV TB24 20 MG, 40 MG, 60 MG	1	PA
QUESTRAN LIGHT POWD (cholestyramine light)	1		ATORVALIQ SUSP	1	QL(300 ml per 30 day(s) retail; 300 ml per 30 days mail); PA
QUESTRAN PACK (cholestyramine)	9	QL(2 ea daily)	atorvastatin calcium TABS 10 MG, 20 MG, 40 MG	1	QL(2 ea daily); MP
QUESTRAN PACK (cholestyramine)	1	QL(2 ea daily)	atorvastatin calcium TABS 80 MG	1	QL(1 ea daily); MP
QUESTRAN POWD (cholestyramine)	1		CRESTOR TABS (rosuvastatin calcium)	9	QL(1 ea daily); MP
WELCHOL PACK (colesevelam hcl)	1	PA	EZALLOR SPRINKLE CPSP	1	QL(1 ea daily); PA
WELCHOL TABS (colesevelam hcl)	1				
Fibric Acid Derivatives					

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FLOLIPID SUSP	1	PA	Microsomal Triglyceride Transfer Protein (MTP) Inhibitors		
<i>fluvastatin sodium CAPS</i>	1	PA	JUXTAPID 5 MG, 10 MG, 20 MG, 30 MG	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); PA
<i>fluvastatin sodium TB24</i>	1	PA	JUXTAPID 20 MG	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail)
LESCOL XL TB24 (<i>fluvastatin sodium</i>)	1	PA	Nicotinic Acid Derivatives		
LIPITOR TABS 80 MG (<i>atorvastatin calcium</i>)	9	QL(1 ea daily); MP	<i>niacin (antihyperlipidemic) TBCR 500 MG</i>	1	QL(3 ea daily); MP
LIPITOR TABS 20 MG, 40 MG (<i>atorvastatin calcium</i>)	9	QL(2 ea daily); MP	<i>niacin (antihyperlipidemic) TBCR 750 MG, 1000 MG</i>	1	QL(2 ea daily); MP
LIPITOR TABS 10 MG, 20 MG, 40 MG (<i>atorvastatin calcium</i>)	1	QL(2 ea daily); MP	NIASPAN TBCR 1000 MG (<i>niacin (antihyperlipidemic)</i>)	9	QL(2 ea daily); MP
LIPITOR TABS 80 MG (<i>atorvastatin calcium</i>)	1	QL(1 ea daily); MP	Proprotein Convertase Subtilisin/Kexin Type 9 Inhibitors		
LIVALO (<i>pitavastatin calcium</i>)	1	PA	LEQVIO	1	QL(1.5 ml per 180 day(s) retail; 2 ml per 180 days mail); AL(At least 18 yrs old); PA
<i>lovastatin TABS</i>	1	QL(2 ea daily); MP	PRALUENT SOAJ	1	QL(2 ml per 28 day(s) retail; 2 ml per 28 days mail); PA
<i>pitavastatin calcium</i>	1	PA	REPATHA PUSHTRONEX SYSTEM SOCT	1	QL(3.5 ml per 28 day(s) retail; 4 ml per 28 days mail); PA
<i>pravastatin sodium 10 MG</i>	1	QL(3 ea daily); MP	REPATHA SURECLICK SOAJ	1	QL(2 ml per 28 day(s) retail; 2 ml per 28 days mail); PA
<i>pravastatin sodium 80 MG</i>	1	QL(1 ea daily); MP	REPATHA SOSY	1	QL(2 ml per 28 day(s) retail; 2 ml per 28 days mail); PA
<i>pravastatin sodium 20 MG, 40 MG</i>	1	QL(2 ea daily); MP	ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure		
<i>rosuvastatin calcium TABS</i>	1	QL(1 ea daily); MP			
<i>simvastatin TABS 40 MG</i>	1	QL(1 ea daily); MP			
<i>simvastatin TABS 10 MG, 20 MG</i>	1	QL(2 ea daily); MP			
<i>simvastatin TABS 5 MG, 80 MG</i>	1				
ZOCOR TABS 10 MG, 20 MG (<i>simvastatin</i>)	1	QL(2 ea daily); MP			
ZOCOR TABS 40 MG (<i>simvastatin</i>)	1	QL(1 ea daily); MP			
ZYPITAMAG 2 MG, 4 MG	1	QL(1 ea daily); PA			
Intestinal Cholesterol Absorption Inhibitors					
<i>ezetimibe</i>	1	QL(1 ea daily)			
ZETIA (<i>ezetimibe</i>)	1	QL(1 ea daily)			

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ACE Inhibitors			<i>quinapril hcl</i>	1	QL(2 ea daily); MP
ACCUPRIL (<i>quinapril hcl</i>)	1	QL(2 ea daily); MP	<i>ramipril CAPS 1.25 MG, 2.5 MG</i>	1	QL(3 ea daily); MP
ALTACE CAPS 1.25 MG, 2.5 MG (<i>ramipril</i>)	1	QL(3 ea daily); MP	<i>ramipril CAPS 5 MG, 10 MG</i>	1	QL(2 ea daily); MP
ALTACE CAPS 5 MG, 10 MG (<i>ramipril</i>)	1	QL(2 ea daily); MP	<i>trandolapril</i>	1	MP
<i>benazepril hcl 20 MG, 40 MG</i>	1	QL(2 ea daily); MP	VASOTEC TABS 10 MG, 20 MG (<i>enalapril maleate</i>)	1	QL(2 ea daily); MP
<i>benazepril hcl 10 MG</i>	1	QL(3 ea daily); MP	VASOTEC TABS 2.5 MG, 5 MG (<i>enalapril maleate</i>)	1	QL(3 ea daily); MP
<i>benazepril hcl 5 MG</i>	1	QL(6 ea daily); MP	ZESTRIL TABS 20 MG (<i>lisinopril</i>)	1	QL(4 ea daily); MP
<i>captopril</i>	2	ST	ZESTRIL TABS 10 MG (<i>lisinopril</i>)	1	QL(8 ea daily); MP
<i>enalapril maleate SOLN</i>	1	QL(5 ml daily); AL(Up to 6 yrs old)	ZESTRIL TABS 30 MG, 40 MG (<i>lisinopril</i>)	1	QL(2 ea daily); MP
<i>enalapril maleate TABS 2.5 MG, 5 MG</i>	1	QL(3 ea daily); MP	ZESTRIL TABS 2.5 MG, 5 MG (<i>lisinopril</i>)	1	QL(6 ea daily); MP
<i>enalapril maleate TABS 10 MG, 20 MG</i>	1	QL(2 ea daily); MP	Agents for Pheochromocytoma		
<i>enalaprilat IV 1.25 MG/ML</i>	1		DEMSEER (<i>metyrosine</i>)	1	
EPANED SOLN (<i>enalapril maleate</i>)	1	QL(5 ml daily); AL(Up to 6 yrs old)	DIBENZYLINE (<i>phenoxybenzamine hcl</i>)	9	
<i>fosinopril sodium</i>	1	MP	<i>metyrosine</i>	1	
<i>lisinopril TABS 2.5 MG, 5 MG</i>	1	QL(6 ea daily); MP	<i>phenoxybenzamine hcl</i>	1	
<i>lisinopril TABS 30 MG, 40 MG</i>	1	QL(2 ea daily); MP	<i>phentolamine mesylate SOLR</i>	1	
<i>lisinopril TABS 10 MG</i>	1	QL(8 ea daily); MP	Angiotensin II Receptor Antagonists		
<i>lisinopril TABS 20 MG</i>	1	QL(4 ea daily); MP	ATACAND 4 MG, 8 MG, 16 MG (<i>candesartan cilexetil</i>)	1	
LOTENSIN 10 MG (<i>benazepril hcl</i>)	1	QL(3 ea daily); MP	ATACAND 32 MG (<i>candesartan cilexetil</i>)	2	ST
LOTENSIN 20 MG, 40 MG (<i>benazepril hcl</i>)	1	QL(2 ea daily); MP	AVAPRO (<i>irbesartan</i>)	1	MP
<i>moexipril hcl</i>	1	QL(4 ea daily); MP	BENICAR 5 MG (<i>olmesartan medoxomil</i>)	1	QL(6 ea daily); MP
<i>perindopril erbumine</i>	1	MP	BENICAR 20 MG (<i>olmesartan medoxomil</i>)	1	QL(3 ea daily); MP
QBRELIS SOLN	1	QL(5 ml daily); AL(Up to 6 yrs old)	BENICAR 40 MG (<i>olmesartan medoxomil</i>)	1	QL(2 ea daily); MP

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<i>candesartan cilexetil 4 MG, 8 MG, 16 MG</i>	1		CARDURA 4 MG (<i>doxazosin mesylate</i>)	1	QL(4 ea daily); MP
<i>candesartan cilexetil 32 MG</i>	2	ST	CARDURA 8 MG (<i>doxazosin mesylate</i>)	1	QL(2 ea daily); MP
COZAAR 25 MG (<i>losartan potassium</i>)	1	QL(4 ea daily); MP	CATAPRES-TTS-1 (<i>clonidine</i>)	9	QL(4 ea per 28 day(s) retail; 12 ea per 84 days mail); MP
COZAAR 50 MG, 100 MG (<i>losartan potassium</i>)	1	QL(3 ea daily); MP	CATAPRES-TTS-2 (<i>clonidine</i>)	9	QL(8 ea per 28 day(s) retail; 24 ea per 84 days mail); MP
DIOVAN TABS (<i>valsartan</i>)	1	MP	CATAPRES-TTS-3 (<i>clonidine</i>)	9	QL(8 ea per 28 day(s) retail; 24 ea per 84 days mail); MP
EDARBI	3	ST	<i>clonidine 0.2 MG/24HR, 0.3 MG/24HR</i>	1	QL(8 ea per 28 day(s) retail; 24 ea per 84 days mail); MP
<i>irbesartan</i>	1	MP	<i>clonidine 0.1 MG/24HR</i>	1	QL(4 ea per 28 day(s) retail; 12 ea per 84 days mail); MP
<i>losartan potassium 50 MG, 100 MG</i>	1	QL(3 ea daily); MP	<i>clonidine OR 0.17 MG</i>	1	PA
<i>losartan potassium 25 MG</i>	1	QL(4 ea daily); MP	CLONIDINE HCL POWD	1	
MICARDIS 80 MG (<i>telmisartan</i>)	1	QL(2 ea daily); MP	<i>clonidine hcl TABS</i>	1	QL(8 ea daily); MP
MICARDIS 20 MG (<i>telmisartan</i>)	1	QL(5 ea daily); MP	<i>doxazosin mesylate 1 MG, 2 MG</i>	1	QL(7 ea daily); MP
MICARDIS 40 MG (<i>telmisartan</i>)	1	QL(3 ea daily); MP	<i>doxazosin mesylate 4 MG</i>	1	QL(4 ea daily); MP
<i>olmesartan medoxomil 40 MG</i>	1	QL(2 ea daily); MP	<i>doxazosin mesylate 8 MG</i>	1	QL(2 ea daily); MP
<i>olmesartan medoxomil 20 MG</i>	1	QL(3 ea daily); MP	<i>guanfacine hcl</i>	1	QL(4 ea daily)
<i>olmesartan medoxomil 5 MG</i>	1	QL(6 ea daily); MP	<i>methyldopa TABS</i>	1	
<i>telmisartan 20 MG</i>	1	QL(5 ea daily); MP	MINIPRESS CAPS 2 MG (<i>prazosin hcl</i>)	1	QL(5 ea daily); MP
<i>telmisartan 80 MG</i>	1	QL(2 ea daily); MP	MINIPRESS CAPS 1 MG (<i>prazosin hcl</i>)	9	QL(6 ea daily); MP
<i>telmisartan 40 MG</i>	1	QL(3 ea daily); MP	MINIPRESS CAPS 5 MG (<i>prazosin hcl</i>)	1	QL(8 ea daily); MP
<i>valsartan SOLN</i>	1	AL(At least 6 yrs old - Up to 10 yrs old); PA	NEXICLON XR OR (<i>clonidine</i>)	1	PA
<i>valsartan TABS</i>	1	MP	<i>prazosin hcl CAPS 5 MG</i>	1	QL(8 ea daily); MP
Antiadrenergic Antihypertensives					
CARDURA 1 MG, 2 MG (<i>doxazosin mesylate</i>)	1	QL(7 ea daily); MP			
CARDURA 8 MG (<i>doxazosin mesylate</i>)	9	QL(2 ea daily); MP			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>prazosin hcl CAPS 2 MG</i>	1	QL(5 ea daily); MP	BENICAR HCT (<i>olmesartan medoxomil-hydrochlorothiazide</i>)	1	QL(2 ea daily); MP
<i>prazosin hcl CAPS 1 MG</i>	1	QL(6 ea daily); MP	<i>bisoprolol & hydrochlorothiazide</i>	1	QL(2 ea daily); MP
<i>terazosin hcl 2 MG</i>	1	QL(4 ea daily); MP	<i>candesartan cilexetil-hydrochlorothiazide</i>	3	ST
<i>terazosin hcl 5 MG</i>	1	QL(3 ea daily); MP	<i>captopril & hydrochlorothiazide</i>	2	
<i>terazosin hcl 1 MG</i>	1	QL(19 ea daily); MP	DIOVAN HCT (<i>valsartan-hydrochlorothiazide</i>)	1	MP
<i>terazosin hcl 10 MG</i>	1	QL(18 ea daily); MP	EDARBYCLOR	3	ST
Antihypertensive Combinations			<i>enalapril maleate & hydrochlorothiazide</i>	1	QL(2 ea daily); MP
ACCURETIC (<i>quinapril-hydrochlorothiazide</i>)	1	QL(2 ea daily); MP	EXFORGE (<i>amlodipine besylate-valsartan</i>)	1	QL(1 ea daily); MP
<i>amlodipine besylate-benazepril hcl 40 MG-10 MG, 40 MG-5 MG</i>	1	QL(1 ea daily); MP	EXFORGE HCT 12.5 MG-10 MG-160 MG, 12.5 MG-5 MG-160 MG, 25 MG-10 MG-160 MG, 25 MG-10 MG-320 MG (<i>amlodipine-valsartan-hydrochlorothiazide</i>)	1	QL(1 ea daily); MP
<i>amlodipine besylate-benazepril hcl 10 MG-2.5 MG</i>	1	QL(4 ea daily); MP	EXFORGE HCT 25 MG-5 MG-160 MG (<i>amlodipine-valsartan-hydrochlorothiazide</i>)	9	QL(1 ea daily); MP
<i>amlodipine besylate-benazepril hcl 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG</i>	1	QL(2 ea daily); MP	<i>fosinopril sodium & hydrochlorothiazide</i>	1	MP; PA
<i>amlodipine besylate-olmesartan medoxomil</i>	1		HYZAAR (<i>losartan potassium & hydrochlorothiazide</i>)	1	QL(2 ea daily); MP
<i>amlodipine besylate-valsartan</i>	1	QL(1 ea daily); MP	<i>irbesartan-hydrochlorothiazide</i>	1	MP
<i>amlodipine-valsartan-hydrochlorothiazide</i>	1	QL(1 ea daily); MP	<i>lisinopril & hydrochlorothiazide</i>	1	QL(4 ea daily); MP
ATACAND HCT (<i>candesartan cilexetil-hydrochlorothiazide</i>)	3	ST	<i>losartan potassium & hydrochlorothiazide</i>	1	QL(2 ea daily); MP
<i>atenolol & chlorthalidone</i>	1	QL(1 ea daily); MP	LOTENSIN HCT 12.5 MG-10 MG, 12.5 MG-20 MG, 25 MG-20 MG (<i>benazepril & hydrochlorothiazide</i>)	1	QL(2 ea daily); MP
AVALIDE (<i>irbesartan-hydrochlorothiazide</i>)	1	MP			
AZOR (<i>amlodipine besylate-olmesartan medoxomil</i>)	1				
<i>benazepril & hydrochlorothiazide</i>	1	QL(2 ea daily); MP			

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LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG (amlodipine besylate-benazepril hcl)	1	QL(2 ea daily); MP	ZESTORETIC (lisinopril & hydrochlorothiazide)	1	QL(4 ea daily); MP
LOTREL 40 MG-10 MG (amlodipine besylate-benazepril hcl)	1	QL(1 ea daily); MP	ZIAC (bisoprolol & hydrochlorothiazide)	1	QL(2 ea daily); MP
metoprolol & hydrochlorothiazide TABS 25 MG-100 MG	1	QL(1 ea daily); MP	Direct Renin Inhibitors		
metoprolol & hydrochlorothiazide TABS 25 MG-50 MG, 50 MG-100 MG	1	QL(2 ea daily); MP	aliskiren fumarate	3	
MICARDIS HCT (telmisartan-hydrochlorothiazide)	2	ST	TEKTURNA (aliskiren fumarate)	3	
olmesartan medoxomil-amlodipine-hydrochlorothiazide	2	ST	Endothelin Receptor Antagonists		
olmesartan medoxomil-hydrochlorothiazide	1	QL(2 ea daily); MP	TRYVIO	1	PA
quinapril-hydrochlorothiazide	1	QL(2 ea daily); MP	Selective Aldosterone Receptor Antagonists (SARAs)		
TEKTURNA HCT 12.5 MG-300 MG, 25 MG-300 MG	3		eplerenone	1	
telmisartan-amlodipine	3	ST	INSPRA (eplerenone)	9	
telmisartan-hydrochlorothiazide	2	ST	INSPRA (eplerenone)	1	
TENORETIC 100 (atenolol & chlorthalidone)	1	QL(1 ea daily); MP	Vasodilators		
TENORETIC 50 (atenolol & chlorthalidone)	1	QL(1 ea daily); MP	CORLOPAM	1	
trandolapril-verapamil hcl	2	ST	hydralazine hcl SOLN	1	
TRIBENZOR (olmesartan medoxomil-amlodipine-hydrochlorothiazide)	2	ST	hydralazine hcl TABS 25 MG	1	QL(11 ea daily); MP
valsartan-hydrochlorothiazide	1	MP	hydralazine hcl TABS 50 MG	1	QL(5 ea daily); MP
VASERETIC 25 MG-10 MG (enalapril maleate & hydrochlorothiazide)	1	QL(2 ea daily); MP	hydralazine hcl TABS 10 MG	1	QL(30 ea daily); MP
			hydralazine hcl TABS 100 MG	1	QL(3 ea daily); MP
			minoxidil 10 MG	1	QL(10 ea daily); MP
			minoxidil 2.5 MG	1	QL(4 ea daily); MP
			NIPRIDE RTU (nitroprusside sodium-sodium chloride)	1	
			nitroprusside sodium	1	
			nitroprusside sodium-sodium chloride	1	
			ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Anti-infective Agents - Misc.			ALINIA SUSR	1	AL(Up to 20 yrs old); PA
AEMCOLO	1	QL(4 ea daily); PA	ALINIA TABS (nitazoxanide)	9	QL(2 ea daily)
<i>bacitracin</i>	1		<i>atovaquone</i>	1	
FLAGYL CAPS (metronidazole)	1		LAMPIT 120 MG	1	QL(225 ea per 30 day(s) retail; 225 ea per 30 days mail); AL(Up to 17 yrs old); PA
LIKMEZ SUSP	1	QL(20 ml daily); AL(Up to 10 yrs old)	LAMPIT 30 MG	1	QL(9 ea daily); AL(Up to 17 yrs old); PA
<i>metronidazole CAPS</i>	1		MEPRON (<i>atovaquone</i>)	1	
<i>metronidazole SOLN</i>	1		<i>nitazoxanide TABS</i>	1	QL(2 ea daily); PA
METRONIDAZOLE SOLN (metronidazole)	1		Carbapenems		
<i>metronidazole TABS</i>	1		<i>ertapenem sodium IJ</i>	1	
NEBUPENT IN (pentamidine isethionate)	1		<i>imipenem-cilastatin IV</i>	1	
PENTAM 300 IJ (pentamidine isethionate)	1		INVANZ IJ (<i>ertapenem sodium</i>)	9	
<i>pentamidine isethionate IJ</i>	1		<i>meropenem</i>	1	
<i>tinidazole</i>	1		MEROPENEM	1	PA
<i>trimethoprim TABS</i>	1		MEROPENEM/SODIUM CHLORIDE	1	
XIFAXAN 550 MG	1	QL(2 ea daily); AL(At least 18 yrs old); PA	PRIMAXIN IV IV 500 MG-500 MG (<i>imipenem-cilastatin</i>)	9	
XIFAXAN 200 MG	1	QL(3 ea daily); AL(At least 12 yrs old); PA	RECARBRIO	1	QL(56 ea per 14 day(s) retail; 56 ea per 14 days mail); PA
Anti-infective Misc. - Combinations			VABOMERE	1	QL(84 ea per 14 day(s) retail; 84 ea per 14 days mail); AL(At least 18 yrs old); PA
BACTRIM DS TABS (<i>sulfamethoxazole-trimethoprim</i>)	1		Chloramphenicols		
BACTRIM TABS (<i>sulfamethoxazole-trimethoprim</i>)	1		<i>chloramphenicol sodium succinate</i>	1	
<i>sulfamethoxazole-trimethoprim SOLN</i>	1		Cyclic Lipopeptides		
<i>sulfamethoxazole-trimethoprim SUSP</i>	1				
<i>sulfamethoxazole-trimethoprim TABS</i>	1				
Antiprotozoal Agents					

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CUBICIN RF (<i>daptomycin</i>)	9		VANCOMYCIN HYDROCHLORIDE SOLN IV 500 MG/100ML, 750 MG/150ML, 1000 MG/200ML, 1250 MG/250ML, 1500 MG/300ML, 1750 MG/350ML	1	
<i>daptomycin</i>	1		VANCOMYCIN HYDROCHLORIDE SOLR IV	1	
DAPTOMYCIN (<i>daptomycin</i>)	9		VANCOMYCIN HYDROCHLORIDE SOLR IV (<i>vancomycin hcl</i>)	1	
DAPTOMYCIN	1		VANCOMYCIN HYDROCHLORIDE SOLR IV (<i>vancomycin hcl</i>)	9	
DAPTOMYCIN (<i>daptomycin</i>)	1		VANCOMYCIN SOLN IV	1	
DAPTOMYCIN/SODIUM CHLORIDE	1		VIBATIV 750 MG	1	
Glycopeptides			Leprostatics		
DALVANCE	1	QL(3 ea per 7 day(s) retail; 3 ea per 7 days mail); PA	<i>dapsone</i>	1	
FIRVANQ SOLR OR (<i>vancomycin hcl</i>)	1		Lincosamides		
KIMYRSA	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); PA	CLEOCIN (<i>clindamycin hcl</i>)	1	
ORBACTIV	1	QL(3 ea per 30 day(s) retail; 3 ea per 30 days mail)	CLEOCIN PEDIATRIC GRANULES (<i>clindamycin palmitate hydrochloride</i>)	1	
VANCOGIN CAPS (<i>vancomycin hcl</i>)	1		CLEOCIN PHOSPHATE SOLN IJ	1	
<i>vancomycin hcl</i> CAPS	1		CLEOCIN PHOSPHATE SOLN IJ 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML (<i>clindamycin phosphate</i>)	9	
VANCOMYCIN HCL SOLN	1		CLEOCIN PHOSPHATE SOLN IJ 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML (<i>clindamycin phosphate</i>)	1	
<i>vancomycin hcl SOLR IV 1 GM, 1.25 GM, 1.5 GM, 5 GM, 10 GM, 500 MG, 750 MG, 1000 MG</i>	1		<i>clindamycin hcl</i>	1	
VANCOMYCIN HYDROCHLORIDE/DEXT ROSE 1 GM/200ML-5 %, 1.25 GM/250ML-5 %, 1.5 GM/300ML-5 %, 500 MG/100ML-5 %, 750 MG/150ML-5 %	1		<i>clindamycin palmitate hydrochloride</i>	1	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>clindamycin phosphate in d5w</i>	1		ZYVOX SOLN	1	QL(2800 ml per 14 day(s) retail; 2800 ml per 14 days mail)
<i>clindamycin phosphate SOLN IJ 300 MG/2ML, 600 MG/4ML, 900 MG/6ML, 9000 MG/60ML</i>	1		ZYVOX SOLN (<i>linezolid</i>)	9	QL(8400 ml per 14 day(s) retail; 8400 ml per 14 days mail)
CLINDAMYCIN/SODIUM CHLORIDE	1		ZYVOX SUSR (<i>linezolid</i>)	1	QL(150 ml per 10 day(s) retail; 150 ml per 10 days mail)
LINCOCIN (<i>lincomycin hcl</i>)	1		ZYVOX TABS (<i>linezolid</i>)	1	QL(28 ea per 14 day(s) retail; 28 ea per 14 days mail)
LINCOCIN (<i>lincomycin hcl</i>)	9		Polymyxins		
<i>lincomycin hcl</i>	1		<i>colistimethate sodium</i>	1	
Monobactams			COLY-MYCIN M (<i>colistimethate sodium</i>)	1	
AZACTAM (<i>aztreonam</i>)	1		<i>polymyxin b sulfate SOLR</i>	1	
<i>aztreonam</i>	1		Urinary Anti-infectives		
CAYSTON	1	QL(84 ml per 55 day(s) retail; 84 ml per 55 days mail); PA	<i>fosfomycin tromethamine</i>	1	
Oxazolidinones			HIPREX (<i>methenamine hippurate</i>)	9	
LINEZOLID	1		MACROBID (<i>nitrofurantoin monohyd macro</i>)	1	
<i>linezolid SOLN</i>	1	QL(8400 ml per 14 day(s) retail; 8400 ml per 14 days mail)	MACRODANTIN 25 MG (<i>nitrofurantoin macrocrystal</i>)	9	
<i>linezolid SUSR</i>	1	QL(150 ml per 10 day(s) retail; 150 ml per 10 days mail)	MACRODANTIN 50 MG, 100 MG (<i>nitrofurantoin macrocrystal</i>)	1	
<i>linezolid TABS</i>	1	QL(28 ea per 14 day(s) retail; 28 ea per 14 days mail)	<i>methenamine hippurate</i>	1	
SIVEXTRO SOLR	1	QL(6 ea per fill retail); PA	<i>methenamine mandelate 0.5 GM, 1 GM</i>	1	
SIVEXTRO TABS	1	QL(6 ea per fill retail); PA	MONUROL (<i>fosfomycin tromethamine</i>)	9	
ZYVOX SOLN (<i>linezolid</i>)	1	QL(8400 ml per 14 day(s) retail; 8400 ml per 14 days mail)	<i>nitrofurantoin</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
NITROFURANTOIN	1	QL(300 ml per 7 day(s) retail; 300 ml per 7 days mail); AL(Up to 10 yrs old); PA
<i>nitrofurantoin macrocrystal</i>	1	
<i>nitrofurantoin monohyd macro</i>	1	
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)		
Antimalarial Combinations		
<i>atovaquone-proguanil hcl</i>	1	
COARTEM	1	
MALARONE (<i>atovaquone-proguanil hcl</i>)	1	
Antimalarials		
ARTESUNATE	1	
<i>chloroquine phosphate TABS</i>	1	
DARAPRIM (<i>pyrimethamine</i>)	9	QL(63 ea per 20 day(s) retail; 63 ea per 20 days mail)
<i>hydroxychloroquine sulfate</i>	1	
KRINTAFEL	1	QL(2 ea per fill retail); AL(At least 16 yrs old)
<i>mefloquine hcl</i>	1	
PLAQUENIL (<i>hydroxychloroquine sulfate</i>)	9	
<i>primaquine phosphate TABS</i>	1	
PRIMAQUINE PHOSPHATE TABS (<i>primaquine phosphate</i>)	1	

Drug Name	Drug Tier	Requirements/Limits
<i>pyrimethamine</i>	1	QL(63 ea per 20 day(s) retail; 63 ea per 20 days mail); PA
QUALAQUIN CAPS (<i>quinine sulfate</i>)	1	PA
QUALAQUIN CAPS (<i>quinine sulfate</i>)	9	
<i>quinine sulfate CAPS 324 MG</i>	1	PA
SOVUNA	1	
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
Antimyasthenic/Cholinergic Agents		
BLOXIVERZ SOLN IV 10 MG/10ML (<i>neostigmine methylsulfate</i>)	1	
BLOXIVERZ SOLN IV (<i>neostigmine methylsulfate</i>)	9	
FIRDAPSE	1	QL(8 ea daily); PA
MESTINON TIMESPAN TBCR (<i>pyridostigmine bromide</i>)	1	
MESTINON SOLN OR (<i>pyridostigmine bromide</i>)	1	
MESTINON TABS (<i>pyridostigmine bromide</i>)	1	
<i>neostigmine methylsulfate SOLN IV 5 MG/10ML, 10 MG/10ML</i>	1	
NEOSTIGMINE METHYLSULFATE SOLN IV 5 MG/10ML, 10 MG/10ML	1	
<i>neostigmine methylsulfate SOSY</i>	1	
NEOSTIGMINE METHYLSULFATE SOSY (<i>neostigmine methylsulfate</i>)	1	

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Drug Name	Drug Tier	Requirements/Limits
NEOSTIGMINE METHYLSULFATE SOSY (<i>neostigmine methylsulfate</i>)	9	
<i>pyridostigmine bromide SOLN OR</i>	1	
<i>pyridostigmine bromide TABS 60 MG</i>	1	
<i>pyridostigmine bromide TABS 30 MG</i>	1	PA
<i>pyridostigmine bromide TBCR</i>	1	
REGONOL SOLN IV	1	
ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)		
Antimycobacterial Agents		
<i>cycloserine</i>	1	
<i>ethambutol hcl TABS</i>	1	
<i>isoniazid SOLN</i>	1	
<i>isoniazid SYRP</i>	1	
<i>isoniazid TABS</i>	1	
MYAMBUTOL TABS 400 MG (<i>ethambutol hcl</i>)	9	
MYCOBUTIN (<i>rifabutin</i>)	1	
PRIFTIN	1	
<i>pyrazinamide</i>	1	
<i>rifabutin</i>	1	
RIFADIN SOLR (<i>rifampin</i>)	1	
<i>rifampin CAPS</i>	1	
<i>rifampin SOLR</i>	1	
SIRTURO 20 MG	1	AL(At least 5 yrs old)
SIRTURO 100 MG	1	QL(188 ea per 168 day(s) retail; 188 ea per 168 days mail); AL(At least 5 yrs old)
TRECTOR	1	
ANTINEOPLASTICS AND ADJUNCTIVE		

Drug Name	Drug Tier	Requirements/Limits
THERAPIES - Drugs to Treat Cancer		
Alkylating Agents		
ALKERAN IV (<i>melphalan hcl</i>)	9	
BELRAPZO SOLN	1	
<i>bendamustine hcl SOLR</i>	1	
BENDAMUSTINE HYDROCHLORIDE SOLN	1	
BENDEKA SOLN	1	
BICNU (<i>carmustine</i>)	9	
BICNU (<i>carmustine</i>)	1	
<i>busulfan SOLN</i>	1	
BUSULFEX SOLN (<i>busulfan</i>)	1	
BUSULFEX SOLN (<i>busulfan</i>)	9	
<i>carboplatin SOLN 50 MG/5ML, 150 MG/15ML, 450 MG/45ML, 600 MG/60ML, 1000 MG/100ML</i>	1	
<i>carmustine</i>	1	
CARMUSTINE 300 MG	1	
<i>cisplatin SOLN 50 MG/50ML, 100 MG/100ML, 200 MG/200ML</i>	1	
CISPLATIN SOLR	1	
CYCLOPHOSPHAMIDE MONOHYDRATE SOLN (<i>cyclophosphamide</i>)	1	
<i>cyclophosphamide CAPS</i>	1	
CYCLOPHOSPHAMIDE SOLN	1	
CYCLOPHOSPHAMIDE SOLN (<i>cyclophosphamide</i>)	1	
<i>cyclophosphamide SOLR IJ</i>	1	
CYCLOPHOSPHAMIDE TABS	1	

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EVOMELA IV	1		<i>fludarabine phosphate SOLN</i>	1	
GLEOSTINE 10 MG, 40 MG, 100 MG	1	AL(Up to 20 yrs old); PA	<i>fludarabine phosphate SOLR</i>	1	
GLIADEL WAFER	1		<i>fluorouracil</i>	1	
IFEX SOLR (<i>ifosfamide</i>)	1		FOLOTYN	1	PA
IFEX SOLR	1		<i>gemcitabine hcl SOLN</i>	1	
<i>ifosfamide SOLN</i>	1		<i>gemcitabine hcl SOLR</i>	1	
<i>ifosfamide SOLR</i>	1		GEMCITABINE HYDROCHLORIDE SOLN	1	
IFOSFAMIDE SOLR	1		GEMCITABINE HYDROCHLORIDE SOLN	1	
KEMOPLAT SOLN	1		GEMCITABINE HYDROCHLORIDE SOLN (<i>gemcitabine hcl</i>)	1	
LEUKERAN	1		JYLAMVO SOLN	1	AL(At least 18 yrs old); PA
<i>melphalan hcl IV</i>	1		<i>mercaptopurine TABS</i>	1	
MYLERAN TABS	1		<i>methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML</i>	1	
<i>oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML</i>	1		<i>methotrexate sodium SOLR</i>	1	
TEMODAR CAPS 250 MG (<i>temozolomide</i>)	9		<i>methotrexate sodium TABS 2.5 MG</i>	1	
TEMODAR SOLR	1		<i>nelarabine</i>	1	
<i>temozolomide CAPS</i>	1		ONUREG TABS	1	QL(14 ea per 28 day(s) retail; 14 ea per 28 days mail); AL(At least 18 yrs old); PA
TEPADINA (<i>thiotepa</i>)	1				
<i>thiotepa</i>	1		PEMETREXED	1	
TREANDA SOLR (<i>bendamustine hcl</i>)	1		<i>pemetrexed disodium SOLR</i>	1	
VIVIMUSTA SOLN	1		PEMETREXED SOLN	1	
YONDELIS	1		PEMETREXED SOLN	1	
ZANOSAR	1		PEMETREXED SOLN 100 MG/4ML, 500 MG/20ML	1	PA
ZEPZELCA	1	PA	PEMFEXY	1	PA
Antimetabolites			PEMRYDI RTU SOLN	1	PA
ALIMTA SOLR (<i>pemetrexed disodium</i>)	1				
ARRANON (<i>nelarabine</i>)	1				
<i>azacitidine SUSR</i>	1				
<i>capecitabine</i>	1				
<i>cladribine 10 MG/10ML</i>	1				
<i>clofarabine</i>	1				
CLOLAR (<i>clofarabine</i>)	9				
<i>cytarabine SOLN</i>	1				
<i>decitabine</i>	1				

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<i>pralatrexate</i>	1	PA	ARZERRA	1	
PURIXAN SUSP	1	AL(Up to 10 yrs old)	BAVENCIO	1	
TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	1		BESPONSA	1	
VIDAZA SUSR (<i>azacitidine</i>)	1		BLINCYTO	1	PA
XATMEP SOLN	1	AL(Up to 10 yrs old)	COLUMVI	1	
XELODA (<i>capecitabine</i>)	1		DANYELZA	1	
Antineoplastic - Angiogenesis Inhibitors			DARZALEX	1	
ALYMSYS	1		ELAHERE	1	PA
AVASTIN	1		ELREXFIO	1	
CYRAMZA	1	PA	EMPLICITI	1	
FRUZAQLA 1 MG	1	QL(3 ea daily); PA	ENHERTU	1	PA
FRUZAQLA 5 MG	1	PA	EPKINLY	1	
INLYTA	1		GAZYVA	1	
LENVIMA 10 MG DAILY DOSE	1	QL(1 ea daily); PA	IMDELLTRA	1	
LENVIMA 12MG DAILY DOSE	1	QL(3 ea daily); PA	IMFINZI	1	
LENVIMA 14 MG DAILY DOSE	1	QL(2 ea daily); PA	IMJUDO	1	
LENVIMA 18 MG DAILY DOSE	1	QL(3 ea daily); PA	JEMPERLI	1	PA
LENVIMA 20 MG DAILY DOSE	1	QL(2 ea daily); PA	KADCYLA	1	
LENVIMA 24 MG DAILY DOSE	1	QL(3 ea daily); PA	KEYTRUDA	1	
LENVIMA 4 MG DAILY DOSE	1	QL(1 ea daily); PA	KIMMTRAK	1	
LENVIMA 8 MG DAILY DOSE	1	QL(3 ea daily); PA	LIBTAYO	1	PA
MVASI	1		LOQTORZI	1	PA
VEGZELMA	1		LUNSUMIO	1	
ZALTRAP	1		MONJUVI	1	
ZIRABEV	1		MYLOTARG	1	
Antineoplastic - Antibodies			OPDIVO	1	
ADCETRIS	1		PADCEV	1	PA
			POLIVY	1	
			POTELIGEO	1	
			RIABNI	1	
			RITUXAN	1	
			RUXIENCE	1	
			RYBREVANT	1	
			SARCLISA	1	PA
			TALVEY	1	
			TECENTRIQ	1	
			TECVAYLI	1	

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TEVIMBRA	1	PA	PROVENGE	1	
TIVDAK	1	PA	TECARTUS	1	
TRUXIMA	1		TECELRA	1	
UNITUXIN	1	QL(5 ml daily)	YESCARTA	1	
YERVOY	1		Antineoplastic - EGFR Inhibitors		
ZEVALIN Y-90	1		ERBITUX	1	
ZYNLONTA	1	PA	<i>erlotinib hcl</i>	1	QL(1 ea daily); PA
ZYNYZ	1		EXKIVITY	1	QL(4 ea daily); PA
Antineoplastic - Anti-HER2 Agents			<i>gefitinib</i>	1	QL(1 ea daily)
HERCEPTIN 150 MG	1	PA	GILOTRIF	1	QL(1 ea daily); PA
HERZUMA	1	PA	IRESSA (<i>gefitinib</i>)	1	QL(1 ea daily)
KANJINTI	1	PA	LAZCLUZE	1	PA
MARGENZA	1	PA	PORTRAZZA	1	
OGIVRI	1	PA	TAGRISSO	1	QL(1 ea daily); PA
ONTRUZANT	1	PA	TARCEVA 100 MG, 150 MG (<i>erlotinib hcl</i>)	1	QL(1 ea daily); PA
PERJETA	1		VECTIBIX 100 MG/5ML, 400 MG/20ML	1	
TRAZIMERA	1	PA	VIZIMPRO	1	QL(1 ea daily); PA
TUKYSA 50 MG	1	QL(2 ea daily); PA	Antineoplastic - Gene Therapy Agents		
TUKYSA 150 MG	1	QL(4 ea daily); PA	ADSTILADRIN	1	AL(At least 18 yrs old); PA
Antineoplastic - BCL-2 Inhibitors			Antineoplastic - Hedgehog Pathway Inhibitors		
VENCLEXTA STARTING PACK TBPK	1	QL(42 ea per 28 day(s) retail; 42 ea per 28 days mail); PA	DAURISMO	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); PA
VENCLEXTA TABS 100 MG	1	QL(4 ea daily); PA	ERIVEDGE	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); PA
VENCLEXTA TABS 50 MG	1	QL(7 ea per fill retail); PA	ODOMZO	1	QL(1 ea daily); PA
VENCLEXTA TABS 10 MG	1	QL(14 ea per fill retail); PA	Antineoplastic - Hormonal and Related Agents		
Antineoplastic - Cellular Immunotherapy			<i>abiraterone acetate 250 MG</i>	1	QL(4 ea daily); PA
ABECMA	1				
BREYANZI	1				
CARVYKTI	1				
KYMRIAH	1				
OMISIRGE	1				

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<i>abiraterone acetate 500 MG</i>	1	QL(2 ea daily); PA	LUPRON DEPOT (3-MONTH) KIT IM	1	QL(1 ea per 84 day(s) retail; 1 ea per 84 days mail); PA
AKEEGA	1	QL(2 ea daily); PA	LUPRON DEPOT (4-MONTH) IM	1	QL(1 ea per 112 day(s) retail; 1 ea per 112 days mail); PA
<i>anastrozole</i>	1		LUPRON DEPOT (6-MONTH) IM	1	QL(1 ea per 168 day(s) retail; 1 ea per 168 days mail); PA
ARIMIDEX (<i>anastrozole</i>)	1		LYSODREN	1	
AROMASIN (<i>exemestane</i>)	1		<i>megestrol acetate SUSP</i>	1	
<i>bicalutamide</i>	1		<i>megestrol acetate TABS</i>	1	
CAMCEVI	1	QL(1 ea per 180 day(s) retail; 1 ea per 180 days mail); PA	NILANDRON (<i>nilutamide</i>)	9	
CASODEX (<i>bicalutamide</i>)	1		<i>nilutamide</i>	1	
ELIGARD SC	1	PA	NUBEQA	1	QL(4 ea daily); PA
ERLEADA 60 MG	1	QL(4 ea daily); PA	ORGOVYX	1	QL(1 ea daily); PA
ERLEADA 240 MG	1	QL(1 ea daily); PA	ORSERDU 86 MG	1	QL(3 ea daily); PA
<i>exemestane</i>	1		ORSERDU 345 MG	1	QL(1 ea daily); PA
FARESTON (<i>toremifene citrate</i>)	1		SOLTAMOX SOLN	1	QL(300 ml per 30 day(s) retail; 300 ml per 30 days mail)
FASLODEX SOSY (<i>fulvestrant</i>)	1		<i>tamoxifen citrate TABS</i>	1	
FEMARA (<i>letrozole</i>)	1		<i>toremifene citrate</i>	1	
FIRMAGON	1		TRELSTAR MIXJECT	1	
<i>flutamide</i>	1		XTANDI CAPS	1	QL(4 ea daily); PA
<i>fulvestrant SOSY</i>	1		XTANDI TABS 80 MG	1	QL(2 ea daily); PA
<i>letrozole</i>	1		XTANDI TABS 40 MG	1	QL(4 ea daily); PA
LEUPROLIDE ACETATE INJ	1		YONSA	1	QL(4 ea daily); PA
<i>leuprolide acetate KIT IJ 1 MG/0.2ML</i>	1		ZYTIGA 500 MG (<i>abiraterone acetate</i>)	1	QL(2 ea daily); PA
LUPRON DEPOT (1-MONTH) KIT IM 3.75 MG	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); PA	ZYTIGA 250 MG (<i>abiraterone acetate</i>)	1	QL(4 ea daily); PA
LUPRON DEPOT (1-MONTH) KIT IM 7.5 MG	1	QL(1 ea per 28 day(s) retail; 1 ea per 28 days mail)			

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Antineoplastic - Hypoxia-Inducible Factor Inhibitors			DOXIL IV 2 MG/ML (doxorubicin hcl liposomal)	1	
WELIREG	1	QL(3 ea daily); PA	doxorubicin hcl liposomal IV 2 MG/ML	1	
Antineoplastic - Immunomodulators			doxorubicin hcl SOLN	1	
POMALYST	1	QL(21 ea per 28 day(s) retail; 21 ea per 28 days mail)	DOXORUBICIN HCL SOLN (doxorubicin hcl)	1	
Antineoplastic - PDGFR-alpha Inhibitors			doxorubicin hcl SOLR 10 MG, 50 MG	1	
AYVAKIT	1	QL(1 ea daily); PA	DOXORUBICIN HYDROCHLORIDE SOLN (doxorubicin hcl)	9	
Antineoplastic - XPO1 Inhibitors			DOXORUBICIN HYDROCHLORIDE SOLN (doxorubicin hcl)	1	
XPOVIO 40 MG, 50 MG	1	QL(8 ea per 28 day(s) retail; 8 ea per 28 days mail); PA	ELLENCE SOLN	1	
XPOVIO 40 MG, 60 MG	1	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); PA	IDAMYCIN PFS (idarubicin hcl)	1	
XPOVIO 60 MG TWICE WEEKLY	1	QL(24 ea per 28 day(s) retail; 24 ea per 28 days mail); PA	idarubicin hcl	1	
XPOVIO 80 MG TWICE WEEKLY	1	QL(32 ea per 28 day(s) retail; 32 ea per 28 days mail); PA	JELMYTO SOLR UL	1	
Antineoplastic Antibiotics			mitomycin SOLR IV	1	
<i>bleomycin sulfate</i>	1		mitoxantrone hcl 2 MG/ML	1	
COSMEGEN (<i>dactinomycin</i>)	1		<i>valrubicin</i>	1	
<i>dactinomycin</i>	1		VALSTAR (<i>valrubicin</i>)	1	
<i>daunorubicin hcl SOLN</i>	1		Antineoplastic Combinations		
DAUNORUBICIN HYDROCHLORIDE SOLN	1		DARZALEX FASPRO	1	
DAUNORUBICIN HYDROCHLORIDE SOLN (<i>daunorubicin hcl</i>)	9		HERCEPTIN HYLECTA	1	PA
DAUNORUBICIN HYDROCHLORIDE SOLN (<i>daunorubicin hcl</i>)	1		INQOVI	1	QL(5 ea per 28 day(s) retail; 5 ea per 28 days mail); AL(At least 18 yrs old); PA
			KISQALI FEMARA 200 DOSE	1	QL(49 ea per 28 day(s) retail; 49 ea per 28 days mail); PA
			KISQALI FEMARA 400 DOSE	1	QL(70 ea per 28 day(s) retail; 70 ea per 28 days mail); PA

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KISQALI FEMARA 600 DOSE	1	QL(91 ea per 28 day(s) retail; 91 ea per 28 days mail); PA	BALVERSA 3 MG	1	QL(84 ea per 28 day(s) retail; 84 ea per 28 days mail); PA
LONSURF	1	PA	BALVERSA 5 MG	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); PA
OPDUALAG	1		BALVERSA 4 MG	1	QL(56 ea per 28 day(s) retail; 56 ea per 28 days mail); PA
PHESGO 60 MG/ML-60 MG/ML-2000 UNIT/ML	1	QL(10 ml per 21 day(s) retail; 10 ml per 21 days mail); PA	BELEODAQ	1	PA
PHESGO 40 MG/ML-80 MG/ML-2000 UNIT/ML	1	QL(15 ml per 42 day(s) retail; 15 ml per 42 days mail); PA	BORTEZOMIB SOLN	1	
RITUXAN HYCELA	1		<i>bortezomib SOLR IJ</i>	1	
TECENTRIQ HYBREZA	1		BORTEZOMIB SOLR IJ 1 MG, 2.5 MG	1	
VYXEOS	1		BOSULIF CAPS 100 MG	1	QL(5 ea daily); PA
Antineoplastic Enzyme Inhibitors			BOSULIF CAPS 50 MG	1	QL(1 ea daily); PA
AFINITOR DISPERZ TBSO (<i>everolimus</i>)	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); PA	BOSULIF TABS	1	QL(1 ea daily); PA
AFINITOR DISPERZ TBSO (<i>everolimus</i>)	9	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail)	BRAFTOVI 75 MG	1	QL(6 ea daily); PA
AFINITOR TABS (<i>everolimus</i>)	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); PA	BRUKINSA	1	QL(4 ea daily); PA
AFINITOR TABS (<i>everolimus</i>)	9	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail)	CABOMETYX TABS	1	QL(1 ea daily); PA
ALECENSA	1	QL(8 ea daily); PA	CALQUENCE	1	QL(2 ea daily); PA
ALIQOPA	1	PA	CALQUENCE	1	QL(2 ea daily); PA
ALUNBRIG TABS 180 MG	1	QL(1 ea daily); PA	CAPRELSA	1	
ALUNBRIG TABS 30 MG, 90 MG	1	QL(2 ea daily); PA	COMETRIQ KIT	1	QL(84 ea per 28 day(s) retail; 84 ea per 28 days mail)
ALUNBRIG TBPK	1	QL(1 ea daily); PA	COMETRIQ KIT	1	QL(112 ea per 28 day(s) retail; 112 ea per 28 days mail)
AUGTYRO	1	QL(8 ea daily); PA	COMETRIQ KIT	1	QL(56 ea per 28 day(s) retail; 56 ea per 28 days mail)

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COPIKTRA	1	QL(56 ea per 28 day(s) retail; 56 ea per 28 days mail); PA	IDHIFA	1	QL(1 ea daily); PA
COTELLIC	1	QL(63 ea per 20 day(s) retail; 63 ea per 20 days mail); PA	<i>imatinib mesylate</i> 100 MG	1	QL(3 ea daily)
<i>dasatinib</i> 20 MG, 50 MG	1	QL(2 ea daily); PA	<i>imatinib mesylate</i> 400 MG	1	QL(2 ea daily)
<i>dasatinib</i> 70 MG, 80 MG, 100 MG, 140 MG	1	QL(1 ea daily); PA	IMBRUVICA CAPS 70 MG	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); PA
<i>everolimus</i> TABS	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); PA	IMBRUVICA CAPS 140 MG	1	QL(4 ea daily); PA
<i>everolimus</i> TBSO	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); PA	IMBRUVICA SUSP	1	QL(216 ml per 35 day(s) retail; 216 ml per 35 days mail); AL(Up to 10 yrs old); PA
FOTIVDA	1	QL(21 ea per 28 day(s) retail; 21 ea per 28 days mail); PA	IMBRUVICA TABS	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); PA
FYARRO	1	AL(At least 18 yrs old); PA	INREBIC	1	QL(4 ea daily); PA
GAVRETO	1	QL(4 ea daily); AL(At least 18 yrs old); PA	ISTODAX SOLR (<i>romidepsin</i>)	1	PA
GAVRETO	1	QL(4 ea daily); AL(At least 18 yrs old); PA	JAKAFI 10 MG, 15 MG, 20 MG, 25 MG	1	QL(2 ea daily); PA
GLEEVEC 100 MG (<i>imatinib mesylate</i>)	1	QL(3 ea daily)	JAKAFI 5 MG	1	QL(2 ea daily)
GLEEVEC 400 MG (<i>imatinib mesylate</i>)	1	QL(2 ea daily)	JAYPIRCA 50 MG	1	QL(1 ea daily); PA
IBRANCE CAPS	1	QL(21 ea per 20 day(s) retail; 21 ea per 20 days mail); PA	JAYPIRCA 100 MG	1	QL(2 ea daily); PA
IBRANCE TABS	1	QL(21 ea per 20 day(s) retail; 21 ea per 20 days mail); PA	KISQALI	1	QL(21 ea per 20 day(s) retail; 21 ea per 20 days mail); PA
ICLUSIG 10 MG, 30 MG, 45 MG	1	QL(1 ea daily); PA	KISQALI	1	QL(42 ea per 20 day(s) retail; 42 ea per 20 days mail); PA
ICLUSIG 15 MG	1	QL(2 ea daily); PA	KISQALI	1	QL(63 ea per 20 day(s) retail; 63 ea per 20 days mail); PA
			KOSELUGO 25 MG	1	QL(4 ea daily); AL(At least 2 yrs old); PA

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KOSELUGO 10 MG	1	QL(10 ea daily); AL(At least 2 yrs old); PA	MEKTOVI	1	QL(6 ea daily); PA
KRAZATI	1	QL(6 ea daily); PA	NERLYNX	1	QL(6 ea daily); PA
KYPROLIS	1		NEXAVAR (<i>sorafenib tosylate</i>)	1	QL(4 ea daily)
<i>lapatinib ditosylate</i>	1	QL(150 ea per 30 day(s) retail; 150 ea per 30 days mail); PA	NINLARO	1	QL(3 ea per 28 day(s) retail; 3 ea per 28 days mail); PA
LORBRENA 25 MG	1	QL(3 ea daily); PA	OGSIVEO 100 MG, 150 MG	1	PA
LORBRENA 100 MG	1	QL(1 ea daily); PA	OGSIVEO 50 MG	1	QL(6 ea daily); PA
LUMAKRAS 120 MG	1	QL(8 ea daily); PA	OJEMDA SUSR	1	AL(Up to 10 yrs old); PA
LUMAKRAS 320 MG	1	QL(3 ea daily); PA	OJEMDA TABS	1	AL(Up to 25 yrs old); PA
LYNPARZA TABS	1	QL(4 ea daily); PA	OJJAARA	1	QL(1 ea daily); PA
LYTGOBI	1	QL(84 ea per 28 day(s) retail; 84 ea per 28 days mail); AL(At least 18 yrs old); PA	<i>pazopanib hcl</i>	1	
LYTGOBI	1	QL(140 ea per 28 day(s) retail; 140 ea per 28 days mail); AL(At least 18 yrs old); PA	PEMAZYRE	1	QL(14 ea per 20 day(s) retail; 14 ea per 20 days mail); PA
LYTGOBI	1	QL(112 ea per 28 day(s) retail; 112 ea per 28 days mail); AL(At least 18 yrs old); PA	PIQRAY 200MG DAILY DOSE	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); PA
MEKINIST SOLR	1	QL(1170 ml per 29 day(s) retail; 1170 ml per 29 days mail); AL(At least 1 yrs old - Up to 10 yrs old); PA	PIQRAY 250MG DAILY DOSE	1	QL(56 ea per 28 day(s) retail; 56 ea per 28 days mail); PA
MEKINIST TABS	1	QL(1 ea daily); PA	PIQRAY 300MG DAILY DOSE	1	QL(56 ea per 28 day(s) retail; 56 ea per 28 days mail); PA
			QINLOCK	1	QL(3 ea daily); PA
			RETEVMO CAPS 80 MG	1	QL(4 ea daily); AL(At least 12 yrs old); PA
			RETEVMO CAPS 40 MG	1	QL(2 ea daily); AL(At least 12 yrs old); PA
			RETEVMO TABS	1	PA
			REZLIDHIA	1	QL(2 ea daily); PA

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<i>romidepsin SOLR</i>	1	PA	TALZENNA 0.1 MG, 0.35 MG, 0.5 MG, 0.75 MG, 1 MG	1	QL(1 ea daily); PA
ROZLYTREK CAPS 200 MG	1	QL(3 ea daily); PA	TALZENNA 0.25 MG	1	QL(3 ea daily); PA
ROZLYTREK CAPS 100 MG	1	QL(1 ea daily); PA	TASIGNA	1	QL(4 ea daily); PA
ROZLYTREK PACK	1	QL(12 ea daily); AL(Up to 10 yrs old); PA	TAZVERIK	1	QL(8 ea daily); PA
RUBRACA	1	QL(4 ea daily); PA	<i>temsirolimus</i>	1	
RYDAPT	1	QL(112 ea per 14 day(s) retail; 112 ea per 14 days mail)	TEPMETKO	1	QL(2 ea daily); AL(At least 18 yrs old); PA
RYTELO	1		TIBSOVO	1	QL(2 ea daily); PA
SCEMBLIX 100 MG	1	PA	TORISEL (<i>temsirolimus</i>)	1	
SCEMBLIX 40 MG	1	QL(10 ea daily); PA	TRUQAP	1	PA
SCEMBLIX 20 MG	1	QL(2 ea daily); PA	TRUQAP OR 160 MG, 200 MG	1	PA
<i>sorafenib tosylate</i>	1	QL(4 ea daily)	TURALIO 125 MG	1	QL(4 ea daily); PA
SPRYCEL 70 MG, 80 MG, 100 MG, 140 MG (<i>dasatinib</i>)	1	QL(1 ea daily); PA	TYKERB (<i>lapatinib ditosylate</i>)	1	QL(150 ea per 30 day(s) retail; 150 ea per 30 days mail); PA
SPRYCEL 20 MG, 50 MG (<i>dasatinib</i>)	1	QL(2 ea daily); PA	VANFLYTA	1	QL(56 ea per 28 day(s) retail; 56 ea per 28 days mail); PA
STIVARGA	1	QL(112 ea per 28 day(s) retail; 112 ea per 28 days mail); PA	VELCADE SOLR IJ (<i>bortezomib</i>)	1	
<i>sunitinib malate</i>	1		VERZENIO 50 MG, 150 MG, 200 MG	1	QL(2 ea daily); PA
SUTENT (<i>sunitinib malate</i>)	1		VERZENIO 100 MG	1	QL(4 ea daily); PA
TABRECTA	1	QL(112 ea per 28 day(s) retail; 112 ea per 28 days mail); PA	VITRAKVI CAPS	1	PA
TAFINLAR CAPS	1	QL(4 ea daily); PA	VITRAKVI SOLN	1	PA
TAFINLAR TBSO	1	QL(840 ea per 28 day(s) retail; 840 ea per 28 days mail); AL(At least 1 yrs old - Up to 10 yrs old); PA	VONJO	1	QL(4 ea daily); PA
			VORANIGO	1	PA
			VOTRIENT (<i>pazopanib hcl</i>)	1	
			XALKORI CAPS	1	QL(2 ea daily); PA

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Drug Name	Drug Tier	Requirements/Limits
XALKORI CPSP 20 MG, 50 MG	1	QL(4 ea daily); PA
XALKORI CPSP 150 MG	1	QL(6 ea daily); PA
XOSPATA	1	QL(3 ea daily); PA
ZEJULA TABS	1	QL(1 ea daily); PA
ZELBORAF	1	QL(8 ea daily); PA
ZOLINZA	1	QL(4 ea daily); PA
ZYDELIG	1	QL(2 ea daily); PA
ZYKADIA TABS	1	QL(84 ea per 28 day(s) retail; 84 ea per 28 days mail); PA
Antineoplastic Enzymes		
ASPARLAS	1	AL(Up to 21 yrs old); PA
ONCASPAR	1	PA
RYLAZE	1	PA
Antineoplastic Radiopharmaceuticals		
PLUVICTO	1	
STRONTIUM CHLORIDE SR-89	1	
XOFIGO	1	
Antineoplastics Misc.		
ACTIMMUNE 100 MCG/0.5ML	1	
ANKTIVA	1	
<i>arsenic trioxide</i>	1	
BESREMI	1	QL(2 ml per 28 day(s) retail; 2 ml per 28 days mail); AL(At least 18 yrs old); PA
<i>bexarotene</i>	1	
<i>dacarbazine SOLR 200 MG</i>	1	
ELZONRIS	1	

Drug Name	Drug Tier	Requirements/Limits
HYDREA (<i>hydroxyurea</i>)	1	
<i>hydroxyurea</i>	1	
MATULANE	1	
NIPENT	1	
TARGRETIN (<i>bexarotene</i>)	1	
TICE BCG	1	
<i>tretinoin (chemotherapy)</i>	1	QL(3 ea daily)
TRISENOX (<i>arsenic trioxide</i>)	9	
TRISENOX (<i>arsenic trioxide</i>)	1	
Chemotherapy Adjuncts		
ELITEK	1	
KEPIVANCE 5.16 MG	1	PA
Chemotherapy Rescue/Antidote/Protective Agents		
COSELA	1	
<i>dexrazoxane hcl</i>	1	
IWILFIN	1	QL(8 ea daily); PA
KHAPZORY 175 MG	1	PA
<i>leucovorin calcium SOLN IJ 100 MG/10ML, 500 MG/50ML</i>	1	
<i>leucovorin calcium SOLR</i>	1	
<i>leucovorin calcium TABS</i>	1	
<i>levoleucovorin calcium SOLN</i>	1	
<i>levoleucovorin calcium SOLR</i>	1	
<i>mesna SOLN</i>	1	
MESNEX SOLN (<i>mesna</i>)	1	
MESNEX TABS	1	
PEDMARK	1	AL(Up to 18 yrs old); PA
Mitotic Inhibitors		
ABRAXANE	1	

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<i>docetaxel CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML</i>	1		HYCAMTIN CAPS	1	
DOCETAXEL CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML	1		HYCAMTIN SOLR (<i>topotecan hcl</i>)	9	
DOCETAXEL CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML (<i>docetaxel</i>)	1		<i>irinotecan hcl</i>	1	
<i>docetaxel SOLN</i>	1		ONIVYDE	1	
DOCETAXEL SOLN (<i>docetaxel</i>)	1		<i>topotecan hcl SOLN</i>	1	
DOCETAXEL SOLN 20 MG/2ML, 80 MG/8ML, 160 MG/16ML	1		TOPOTECAN HCL SOLN (<i>topotecan hcl</i>)	1	
DOCIVYX SOLN 20 MG/2ML, 160 MG/16ML	1		<i>topotecan hcl SOLR</i>	1	
<i>eribulin mesylate</i>	1		TRODELVY	1	PA
ETOPOPHOS	1		ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease		
<i>etoposide CAPS</i>	1		Antiparkinson Adjunctive Therapy		
<i>etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML</i>	1		<i>carbidopa</i>	1	
HALAVEN (<i>eribulin mesylate</i>)	1		LODOSYN (<i>carbidopa</i>)	1	
IXEMPRA KIT	1		NOURIANZ	1	QL(1 ea daily); PA
JEVTANA	1		Antiparkinson Anticholinergics		
<i>paclitaxel</i>	1		<i>benztropine mesylate SOLN</i>	1	
<i>paclitaxel protein-bound particles</i>	1		<i>benztropine mesylate TABS</i>	1	
PACLITAXEL PROTEIN-BOUND PARTICLES	1		<i>trihexyphenidyl hcl SOLN</i>	1	
<i>vinblastine sulfate SOLN</i>	1		<i>trihexyphenidyl hcl TABS</i>	1	
<i>vincristine sulfate</i>	1		Antiparkinson COMT Inhibitors		
<i>vinorelbine tartrate</i>	1		COMTAN (<i>entacapone</i>)	1	
Oncolytic Viral Agents			<i>entacapone</i>	1	
IMLYGIC	1		ONGENTYS	1	QL(1 ea daily); AL(At least 18 yrs old); PA
Topoisomerase I Inhibitors			TASMAR (<i>tolcapone</i>)	1	
CAMPTOSAR (<i>irinotecan hcl</i>)	1		<i>tolcapone</i>	1	
			Antiparkinson Dopaminergics		
			<i>amantadine hcl CAPS</i>	1	QL(4 ea daily)
			<i>amantadine hcl SOLN</i>	1	QL(33.34 ml daily); MP
			<i>amantadine hcl TABS</i>	1	QL(4 ea daily)
			APOKYN SOCT	1	

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<i>apomorphine hydrochloride SOCT</i>	1		NEUPRO	1	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); AL(At least 18 yrs old); PA
<i>bromocriptine mesylate CAPS</i>	1		OSMOLEX ER TB24 129 MG	1	QL(1 ea daily); PA
<i>bromocriptine mesylate TABS 2.5 MG</i>	1		PARLODEL CAPS (<i>bromocriptine mesylate</i>)	9	
<i>carbidopa-levodopa-entacapone 100 MG-25 MG-200 MG</i>	1	QL(4 ea daily)	PARLODEL TABS (<i>bromocriptine mesylate</i>)	9	
<i>carbidopa-levodopa-entacapone 200 MG-50 MG-200 MG</i>	1	QL(2 ea daily); MP	<i>pramipexole dihydrochloride TABS 1 MG</i>	1	QL(4.67 ea daily); MP
<i>carbidopa-levodopa-entacapone 125 MG-31.25 MG-200 MG, 150 MG-37.5 MG-200 MG, 50 MG-12.5 MG-200 MG, 75 MG-18.75 MG-200 MG</i>	1		<i>pramipexole dihydrochloride TABS 1.5 MG</i>	1	
<i>carbidopa-levodopa TABS</i>	1	QL(11 ea daily); MP	<i>pramipexole dihydrochloride TABS 0.5 MG</i>	1	QL(9 ea daily); MP
<i>carbidopa-levodopa TBCR</i>	1	QL(4 ea daily); MP	<i>pramipexole dihydrochloride TABS 0.125 MG</i>	1	QL(20 ea daily); MP
<i>carbidopa-levodopa TBDP</i>	1		<i>pramipexole dihydrochloride TABS 0.25 MG</i>	1	QL(10 ea daily); MP
CREXONT CPR	1	PA	<i>pramipexole dihydrochloride TABS 0.75 MG</i>	1	QL(8 ea daily); MP
DHIVY TABS	1	QL(11 ea daily); MP	<i>pramipexole dihydrochloride TB24</i>	1	QL(1 ea daily); PA
DUOPA SUSP	1	QL(2800 ml per 28 day(s) retail; 2800 ml per 28 days mail); PA	<i>ropinirole hydrochloride TABS 4 MG, 5 MG</i>	1	QL(3 ea daily); MP
GOCOVRI CP24	1	QL(2 ea daily); PA	<i>ropinirole hydrochloride TABS 0.5 MG</i>	1	QL(7 ea daily); MP
INBRIJA CAPS	1	5 package(s) per 30 day(s) retail; 5 package(s) per 30 day(s) mail; PA	<i>ropinirole hydrochloride TABS 3 MG</i>	1	QL(6 ea daily); MP
MIRAPEX ER TB24 (<i>pramipexole dihydrochloride</i>)	9	QL(1 ea daily)	<i>ropinirole hydrochloride TABS 0.25 MG, 1 MG, 2 MG</i>	1	
			<i>ropinirole hydrochloride TB24</i>	1	PA
			RYTARY CPR	1	QL(3 ea daily); PA

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SINEMET TABS 100 MG-10 MG, 100 MG-25 MG (<i>carbidopa-levodopa</i>)	1	QL(11 ea daily); MP	CAPLYTA	3	QL(1 ea daily); ST
STALEVO 100 (<i>carbidopa-levodopa-entacapone</i>)	1	QL(4 ea daily)	EQUETRO 100 MG	1	QL(3 ea daily)
STALEVO 125 (<i>carbidopa-levodopa-entacapone</i>)	1		EQUETRO 200 MG, 300 MG	1	QL(4 ea daily)
STALEVO 150 (<i>carbidopa-levodopa-entacapone</i>)	1		GEODON 40 MG, 60 MG (<i>ziprasidone hcl</i>)	9	QL(2 ea daily); AL(At least 5 yrs old); MP
STALEVO 200 (<i>carbidopa-levodopa-entacapone</i>)	1	QL(2 ea daily); MP	GEODON (<i>ziprasidone hcl</i>)	1	QL(2 ea daily); AL(At least 5 yrs old); MP
STALEVO 50 (<i>carbidopa-levodopa-entacapone</i>)	1		GEODON (<i>ziprasidone mesylate</i>)	9	
STALEVO 75 (<i>carbidopa-levodopa-entacapone</i>)	1		GEODON (<i>ziprasidone mesylate</i>)	1	
Antiparkinson Monoamine Oxidase Inhibitors			LATUDA 80 MG (<i>lurasidone hcl</i>)	2	QL(2 ea daily); AL(At least 5 yrs old); ST; MP
AZILECT (<i>rasagiline mesylate</i>)	1	QL(1 ea daily)	LATUDA 20 MG, 40 MG, 60 MG, 120 MG (<i>lurasidone hcl</i>)	2	QL(1 ea daily); AL(At least 5 yrs old); ST; MP
<i>rasagiline mesylate</i>	1	QL(1 ea daily)	<i>lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG</i>	2	QL(1 ea daily); AL(At least 5 yrs old); ST; MP
<i>selegiline hcl CAPS</i>	1		<i>lurasidone hcl 80 MG</i>	2	QL(2 ea daily); AL(At least 5 yrs old); ST; MP
<i>selegiline hcl TABS</i>	1		NUPLAZID CAPS	1	QL(1 ea daily); PA
XADAGO	1	QL(1 ea daily); PA	NUPLAZID TABS 10 MG	1	QL(1 ea daily); PA
ZELAPAR TBDP	1	QL(100 ea per 50 day(s) retail; 100 ea per 50 days mail)	VRAYLAR CAPS	3	QL(1 ea daily); AL(At least 5 yrs old); ST
ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders			<i>ziprasidone hcl</i>	1	QL(2 ea daily); AL(At least 5 yrs old); MP
Antimanic Agents			<i>ziprasidone mesylate</i>	1	
<i>lithium</i>	1		Benzisoxazoles		
<i>lithium carbonate CAPS</i>	1		FANAPT	2	QL(2 ea daily); AL(At least 5 yrs old); ST
<i>lithium carbonate TABS</i>	1				
<i>lithium carbonate TBCR</i>	1				
LITHOBID TBCR (<i>lithium carbonate</i>)	1				
Antipsychotics - Misc.					

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FANAPT TITRATION PACK	2	QL(2 ea daily); AL(At least 5 yrs old)	INVEGA TRINZA 546 MG/1.75ML	1	QL(1.75 ml per 84 day(s) retail; 2 ml per 84 days mail)
INVEGA 1.5 MG (<i>paliperidone</i>)	9	QL(1 ea daily); ST; MP	<i>paliperidone</i> 6 MG	2	QL(100 ea per 50 day(s) retail; 100 ea per 50 days mail); AL(At least 5 yrs old); ST
INVEGA 3 MG, 9 MG (<i>paliperidone</i>)	2	QL(1 ea daily); AL(At least 5 yrs old); ST; MP	<i>paliperidone</i> 1.5 MG, 3 MG, 9 MG	2	QL(1 ea daily); AL(At least 5 yrs old); ST; MP
INVEGA 6 MG (<i>paliperidone</i>)	2	QL(100 ea per 50 day(s) retail; 100 ea per 50 days mail); AL(At least 5 yrs old); ST	PERSERIS PRSY	1	QL(1 ea per 28 day(s) retail; 1 ea per 28 days mail); AL(At least 5 yrs old)
INVEGA HAFYERA 1560 MG/5ML	1	QL(5 ml per 180 day(s) retail; 5 ml per 180 days mail)	RISPERDAL CONSTA (<i>risperidone microspheres</i>)	3	QL(2 ea per 28 day(s) retail; 2 ea per 28 days mail); AL(At least 5 yrs old)
INVEGA HAFYERA 1092 MG/3.5ML	1	QL(3.5 ml per 180 day(s) retail; 4 ml per 180 days mail)	RISPERDAL CONSTA (<i>risperidone microspheres</i>)	9	QL(2 ea per 28 day(s) retail; 2 ea per 28 days mail); AL(At least 5 yrs old)
INVEGA SUSTENNA 39 MG/0.25ML	1	QL(0.25 ml per 28 day(s) retail)	RISPERDAL SOLN (<i>risperidone</i>)	1	QL(8 ml daily); AL(At least 5 yrs old); MP
INVEGA SUSTENNA 78 MG/0.5ML	1	QL(0.5 ml per 28 day(s) retail)	RISPERDAL TABS 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG (<i>risperidone</i>)	1	QL(2 ea daily); AL(At least 5 yrs old); MP
INVEGA SUSTENNA 156 MG/ML	1	QL(1 ml per 28 day(s) retail; 1 ml per 28 days mail)	<i>risperidone microspheres</i>	3	QL(2 ea per 28 day(s) retail; 2 ea per 28 days mail); AL(At least 5 yrs old)
INVEGA SUSTENNA 234 MG/1.5ML	1	QL(1.5 ml per 28 day(s) retail; 2 ml per 28 days mail)	<i>risperidone SOLN</i>	1	QL(8 ml daily); AL(At least 5 yrs old); MP
INVEGA SUSTENNA 117 MG/0.75ML	1	QL(0.75 ml per 28 day(s) retail; 1 ml per 28 days mail)	<i>risperidone TABS</i>	1	QL(2 ea daily); AL(At least 5 yrs old); MP
INVEGA TRINZA 819 MG/2.63ML	1	QL(2.63 ml per 84 day(s) retail; 3 ml per 84 days mail)	<i>risperidone TBDP</i> 0.25 MG, 0.5 MG, 1 MG, 2 MG, 4 MG	1	QL(2 ea daily); AL(At least 5 yrs old); MP
INVEGA TRINZA 273 MG/0.88ML, 410 MG/1.32ML	1				

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<i>risperidone TBDP 3 MG</i>	1	QL(100 ea per 50 day(s) retail; 100 ea per 50 days mail); AL(At least 5 yrs old)	HALDOL DECANOATE 50 (<i>haloperidol decanoate</i>)	1	
			<i>haloperidol decanoate</i>	1	
			<i>haloperidol lactate CONC</i>	1	
			<i>haloperidol lactate SOLN</i>	1	
			<i>haloperidol TABS</i>	1	
RYKINDO SRER	3	QL(2 ea per 28 day(s) retail; 2 ea per 28 days mail); AL(At least 5 yrs old)	Dibenzapines		
UZEDY SUSY 200 MG/0.56ML	1	QL(0.56 ml per 55 day(s) retail; 1 ml per 55 days mail); AL(At least 5 yrs old)	ADASUVE	1	
UZEDY SUSY 50 MG/0.14ML	1	QL(0.14 ml per 28 day(s) retail); AL(At least 5 yrs old)	<i>asenapine maleate</i>	2	QL(2 ea daily); AL(At least 5 yrs old); ST
UZEDY SUSY 150 MG/0.42ML	1	QL(0.42 ml per 55 day(s) retail); AL(At least 5 yrs old)	<i>clozapine TABS</i>	1	AL(At least 5 yrs old)
UZEDY SUSY 125 MG/0.35ML	1	QL(0.35 ml per 28 day(s) retail); AL(At least 5 yrs old)	<i>clozapine TBDP</i>	1	AL(At least 5 yrs old); PA
UZEDY SUSY 250 MG/0.7ML	1	QL(0.7 ml per 55 day(s) retail; 1 ml per 55 days mail); AL(At least 5 yrs old)	CLOZARIL TABS 50 MG, 200 MG (<i>clozapine</i>)	9	AL(At least 5 yrs old)
UZEDY SUSY 100 MG/0.28ML	1	QL(0.28 ml per 28 day(s) retail); AL(At least 5 yrs old)	CLOZARIL TABS 25 MG, 100 MG (<i>clozapine</i>)	1	AL(At least 5 yrs old)
UZEDY SUSY 75 MG/0.21ML	1	QL(0.21 ml per 28 day(s) retail); AL(At least 5 yrs old)	<i>loxapine succinate</i>	1	
Butyrophenones			<i>olanzapine SOLR</i>	1	
HALDOL DECANOATE 100 (<i>haloperidol decanoate</i>)	1		<i>olanzapine TABS</i>	1	QL(1 ea daily); AL(At least 5 yrs old); MP
			<i>olanzapine TBDP</i>	1	QL(1 ea daily); AL(At least 5 yrs old); MP
			<i>quetiapine fumarate TABS 150 MG</i>	3	QL(2 ea daily); AL(At least 5 yrs old)
			<i>quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG, 300 MG, 400 MG</i>	1	QL(3 ea daily); AL(At least 5 yrs old); MP
			<i>quetiapine fumarate TB24 150 MG, 200 MG</i>	1	QL(1 ea daily); AL(At least 5 yrs old); MP
			<i>quetiapine fumarate TB24 50 MG, 300 MG, 400 MG</i>	1	QL(2 ea daily); AL(At least 5 yrs old); MP
			SAPHRIS (<i>asenapine maleate</i>)	9	QL(2 ea daily); ST
			SAPHRIS (<i>asenapine maleate</i>)	2	QL(2 ea daily); AL(At least 5 yrs old); ST

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SECUADO	1	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); PA	<i>perphenazine TABS</i>	1	
SEROQUEL XR TB24 150 MG, 200 MG (<i>quetiapine fumarate</i>)	1	QL(1 ea daily); AL(At least 5 yrs old); MP	<i>prochlorperazine</i>	1	
SEROQUEL XR TB24 50 MG, 300 MG, 400 MG (<i>quetiapine fumarate</i>)	1	QL(2 ea daily); AL(At least 5 yrs old); MP	<i>prochlorperazine edisylate 10 MG/2ML</i>	1	
SEROQUEL TABS (<i>quetiapine fumarate</i>)	1	QL(3 ea daily); AL(At least 5 yrs old); MP	PROCHLORPERAZINE MALEATE POWD	1	
VERSACLOZ SUSP	1	QL(600 ml per 30 day(s) retail; 600 ml per 30 days mail); AL(At least 5 yrs old); PA	<i>prochlorperazine maleate TABS</i>	1	
ZYPREXA RELPREVV	1		<i>thioridazine hcl</i>	1	
ZYPREXA ZYDIS TBDP (<i>olanzapine</i>)	1	QL(1 ea daily); AL(At least 5 yrs old); MP	<i>trifluoperazine hcl TABS</i>	1	
ZYPREXA ZYDIS TBDP (<i>olanzapine</i>)	9	QL(1 ea daily); MP	Quinolinone Derivatives		
ZYPREXA SOLR (<i>olanzapine</i>)	1		ABILIFY ASIMTUFII PRSY 720 MG/2.4ML	1	QL(2.4 ml per 55 day(s) retail; 2 ml per 55 days mail); AL(At least 5 yrs old)
ZYPREXA TABS (<i>olanzapine</i>)	1	QL(1 ea daily); AL(At least 5 yrs old); MP	ABILIFY ASIMTUFII PRSY 960 MG/3.2ML	1	QL(3.2 ml per 55 day(s) retail; 3 ml per 55 days mail); AL(At least 5 yrs old)
Dihydroindolones			ABILIFY MAINTENA PRSY	1	QL(1 ea per 28 day(s) retail; 1 ea per 28 days mail); AL(At least 5 yrs old)
<i>molindone hcl 5 MG, 25 MG</i>	1		ABILIFY MAINTENA SRER	1	QL(1 ea per 28 day(s) retail; 1 ea per 28 days mail); AL(At least 5 yrs old)
Phenothiazines			ABILIFY MYCITE MAINTENANCE KIT	1	QL(1 ea daily); AL(At least 5 yrs old); PA
<i>chlorpromazine hcl CONC</i>	1	AL(Up to 10 yrs old)	ABILIFY MYCITE STARTER KIT	1	QL(1 ea daily); AL(At least 5 yrs old); PA
<i>chlorpromazine hcl SOLN</i>	1		ABILIFY TABS (<i>aripiprazole</i>)	1	QL(1 ea daily); AL(At least 5 yrs old); MP
<i>chlorpromazine hcl TABS</i>	1				
<i>fluphenazine decanoate</i>	1				
<i>fluphenazine hcl CONC</i>	1				
<i>fluphenazine hcl ELIX</i>	1				
<i>fluphenazine hcl SOLN</i>	1				
<i>fluphenazine hcl TABS</i>	1				

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<i>aripiprazole SOLN OR</i>	1	QL(900 ml per 30 day(s) retail; 900 ml per 30 days mail); AL(At least 5 yrs old - Up to 10 yrs old)	<i>abacavir sulfate-lamivudine</i>	1	
<i>aripiprazole TABS</i>	1	QL(1 ea daily); AL(At least 5 yrs old); MP	<i>abacavir sulfate SOLN</i>	1	
<i>aripiprazole TBDP</i>	1	QL(1 ea daily); AL(At least 5 yrs old); PA	<i>abacavir sulfate TABS</i>	1	
ARISTADA 441 MG/1.6ML	1	QL(1.6 ml per 28 day(s) retail; 2 ml per 28 days mail); AL(At least 5 yrs old)	APRETUDE	1	QL(3 ml per 28 day(s) retail; 3 ml per 28 days mail); AL(At least 12 yrs old)
ARISTADA 662 MG/2.4ML	1	QL(2.4 ml per 28 day(s) retail; 2 ml per 28 days mail); AL(At least 5 yrs old)	APTIVUS CAPS	1	
ARISTADA 1064 MG/3.9ML	1	QL(3.9 ml per 55 day(s) retail; 4 ml per 55 days mail); AL(At least 5 yrs old)	<i>atazanavir sulfate CAPS</i>	1	
ARISTADA 882 MG/3.2ML	1	QL(3.2 ml per 28 day(s) retail; 3 ml per 28 days mail); AL(At least 5 yrs old)	BIKTARVY	1	QL(1 ea daily)
ARISTADA INITIO	1	QL(2.4 ml per fill retail)	CABENUVA 600 MG/2ML-400 MG/2ML	1	QL(4 ml per 30 day(s) retail; 4 ml per 30 days mail); AL(At least 12 yrs old)
REXULTI	3	QL(1 ea daily); AL(At least 5 yrs old); ST	CABENUVA 900 MG/3ML-600 MG/3ML	1	QL(6 ml per 30 day(s) retail; 6 ml per 30 days mail); AL(At least 12 yrs old)
Thioxanthenes			CIMDUO	1	QL(1 ea daily)
<i>thiothixene</i>	1		COMBIVIR (<i>lamivudine-zidovudine</i>)	1	
ANTIVIRALS - Drugs to Treat Viral Infections			COMPLERA	1	
Antiretrovirals			<i>darunavir TABS 600 MG</i>	1	QL(2 ea daily)
			<i>darunavir TABS 800 MG</i>	1	QL(1 ea daily)
			DELSTRIGO	1	QL(1 ea daily)
			DESCOVY	1	QL(1 ea daily)
			DOVATO	1	QL(1 ea daily)
			EDURANT	1	
			<i>efavirenz CAPS</i>	1	
			<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	1	
			<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	1	QL(1 ea daily)
			<i>efavirenz TABS</i>	1	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>emtricitabine CAPS</i>	1		LEXIVA TABS (<i>fosamprenavir calcium</i>)	1	QL(2.95 ea daily)
<i>emtricitabine-tenofovir disoproxil fumarate</i>	1	QL(1 ea daily)	<i>lopinavir-ritonavir SOLN</i>	1	
EMTRIVA CAPS (<i>emtricitabine</i>)	1		<i>lopinavir-ritonavir TABS</i>	1	
EMTRIVA SOLN	1		<i>maraviroc TABS 150 MG</i>	1	QL(2 ea daily)
EPIVIR SOLN (<i>lamivudine</i>)	1		<i>maraviroc TABS 300 MG</i>	1	QL(4 ea daily)
EPIVIR TABS (<i>lamivudine</i>)	1		<i>nevirapine SUSP</i>	1	
EPZICOM (<i>abacavir sulfate-lamivudine</i>)	1		<i>nevirapine TABS</i>	1	
<i>etravirine</i>	1		<i>nevirapine TB24 400 MG</i>	1	
EVOTAZ	1	QL(1 ea daily)	NORVIR PACK	1	QL(12 ea daily); AL(Up to 6 yrs old)
<i>fosamprenavir calcium TABS</i>	1	QL(2.95 ea daily)	NORVIR TABS (<i>ritonavir</i>)	9	
FUZEON SOLR	1	QL(300 ea per 102 day(s) retail; 300 ea per 102 days mail)	NORVIR TABS (<i>ritonavir</i>)	1	
GENVOYA	1	QL(1 ea daily)	ODEFSEY	1	QL(1 ea daily)
INTELENCE 25 MG	1	QL(2.95 ea daily)	PIFELTRO	1	QL(1 ea daily)
INTELENCE (<i>etravirine</i>)	1		PREZCOBIX	1	QL(1 ea daily)
ISENTRESS HD TABS	1	QL(2 ea daily)	PREZISTA SUSP	1	
ISENTRESS CHEW	1	AL(At least 2 yrs old - Up to 11 yrs old)	PREZISTA TABS 800 MG (<i>darunavir</i>)	1	QL(1 ea daily)
ISENTRESS PACK	1	AL(At least 2 yrs old - Up to 11 yrs old)	PREZISTA TABS 75 MG, 150 MG	1	QL(2.95 ea daily)
ISENTRESS TABS	1		PREZISTA TABS 600 MG (<i>darunavir</i>)	1	QL(2 ea daily)
JULUCA	1	QL(1 ea daily)	RETROVIR IV INFUSION SOLN	1	
KALETRA SOLN (<i>lopinavir-ritonavir</i>)	1		RETROVIR CAPS (<i>zidovudine</i>)	1	
KALETRA TABS (<i>lopinavir-ritonavir</i>)	1		RETROVIR SYRP (<i>zidovudine</i>)	1	
<i>lamivudine SOLN</i>	1		REYATAZ CAPS 200 MG, 300 MG (<i>atazanavir sulfate</i>)	1	
<i>lamivudine TABS</i>	1		REYATAZ PACK	1	AL(Up to 10 yrs old)
<i>lamivudine-zidovudine</i>	1		<i>ritonavir TABS</i>	1	
			RUKOBIA	1	QL(2 ea daily)
			SELZENTRY SOLN	1	QL(60 ml daily)
			SELZENTRY TABS 150 MG (<i>maraviroc</i>)	1	QL(2 ea daily)

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SELZENTRY TABS 25 MG, 75 MG, 300 MG	1	QL(4 ea daily)	ZIAGEN SOLN (<i>abacavir sulfate</i>)	1	
SELZENTRY TABS (<i>maraviroc</i>)	1	QL(4 ea daily)	ZIAGEN TABS (<i>abacavir sulfate</i>)	9	
STRIBILD	1	QL(1 ea daily)	<i>zidovudine CAPS</i>	1	
SUNLENCA SOLN	1	QL(3 ml per 180 day(s) retail; 3 ml per 180 days mail)	<i>zidovudine SYRP</i>	1	
SUNLENCA TBPK	1	QL(4 ea per fill retail)	<i>zidovudine TABS</i>	1	
SUNLENCA TBPK	1	QL(5 ea per 8 day(s) retail; 5 ea per 8 days mail)	Antiviral Combinations		
SUSTIVA CAPS (<i>efavirenz</i>)	9		PAXLOVID 100 MG-150 MG	1	QL(20 ea per fill retail); AL(At least 12 yrs old)
SYMFI (<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	1	QL(1 ea daily)	PAXLOVID 100 MG-150 MG	1	QL(30 ea per fill retail); AL(At least 12 yrs old)
SYMFI LO (<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	1	QL(1 ea daily)	CMV Agents		
SYMTUZA	1	QL(1 ea daily)	<i>cidofovir</i>	1	
<i>tenofovir disoproxil fumarate TABS</i>	1	QL(1 ea daily)	<i>foscarnet sodium 6000 MG/250ML</i>	1	
TIVICAY PD TBSO	1	QL(6 ea daily)	FOSCAVIR 6000 MG/250ML (<i>foscarnet sodium</i>)	9	
TIVICAY TABS	1		<i>ganciclovir sodium SOLR</i>	1	
TRIUMEQ PD TBSO	1	QL(6 ea daily)	GANCICLOVIR SOLN	1	
TRIUMEQ TABS	1	QL(1 ea daily)	LIVTENCITY	1	QL(112 ea per 28 day(s) retail; 112 ea per 28 days mail); AL(At least 12 yrs old); PA
TRIZIVIR	1		PREVYMIS SOLN 480 MG/24ML	1	QL(672 ml per 28 day(s) retail; 672 ml per 28 days mail); PA
TROGARZO	1		PREVYMIS SOLN 240 MG/12ML	1	QL(336 ml per 28 day(s) retail; 336 ml per 28 days mail); PA
TRUVADA (<i>emtricitabine-tenofovir disoproxil fumarate</i>)	1	QL(1 ea daily)	PREVYMIS TABS	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); PA
TYBOST	1	QL(1 ea daily)			
VIRACEPT TABS	1				
VIREAD POWD	1				
VIREAD TABS (<i>tenofovir disoproxil fumarate</i>)	1	QL(1 ea daily)			
VIREAD TABS	1	QL(1 ea daily)			

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VALCYTE SOLR (<i>valganciclovir hcl</i>)	1		HARVONI PACK 45 MG-200 MG	1	QL(56 ea per 28 day(s) retail; 56 ea per 28 days mail); AL(At least 3 yrs old - Up to 6 yrs old); PA
VALCYTE TABS (<i>valganciclovir hcl</i>)	1				
<i>valganciclovir hcl</i> SOLR	1		HARVONI TABS	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); AL(At least 7 yrs old); PA
<i>valganciclovir hcl</i> TABS	1				
Hepatitis Agents			HARVONI TABS	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); AL(At least 7 yrs old); PA
<i>adefovir dipivoxil</i>	1				
BARACLUDE SOLN	1		HARVONI TABS	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); AL(At least 7 yrs old); PA
BARACLUDE TABS (<i>entecavir</i>)	1				
<i>entecavir</i> TABS	1		<i>lamivudine (hbv)</i> TABS	1	
EPCLUSA PACK 37.5 MG-150 MG	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); AL(At least 3 yrs old - Up to 10 yrs old); PA	LEDIPASVIR/SOFOSBUV IR TABS	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); AL(At least 7 yrs old); PA
EPCLUSA PACK 50 MG-200 MG	1	QL(56 ea per 28 day(s) retail; 56 ea per 28 days mail); AL(At least 3 yrs old - Up to 10 yrs old); PA			
EPCLUSA TABS 50 MG-200 MG	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); PA	MAVYRET PACK	1	QL(168 ea per 28 day(s) retail; 168 ea per 28 days mail)
EPCLUSA TABS 100 MG-400 MG	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); AL(At least 18 yrs old); PA	MAVYRET TABS	1	QL(84 ea per 28 day(s) retail; 84 ea per 28 days mail); PA
EPIVIR HBV TABS (<i>lamivudine (hbv)</i>)	1		MAVYRET TABS	1	QL(84 ea per 28 day(s) retail; 84 ea per 28 days mail)
HARVONI PACK 33.75 MG-150 MG	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); AL(At least 3 yrs old - Up to 6 yrs old); PA	PEGASYS SOLN	1	QL(12 ml per 84 day(s) retail; 12 ml per 84 days mail)
			PEGASYS SOSY	1	QL(12 ml per 84 day(s) retail; 12 ml per 84 days mail)
			<i>ribavirin (hepatitis c)</i> CAPS	1	

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<i>ribavirin (hepatitis c)</i> TABS 200 MG	1		<i>famciclovir</i>	1	
SOFOSBUVIR/VELPATA SVIR TABS	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); AL(At least 18 yrs old); PA	<i>valacyclovir hcl</i>	1	
SOVALDI PACK 150 MG	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); AL(At least 3 yrs old - Up to 6 yrs old); PA	VALTREX (<i>valacyclovir hcl</i>)	1	
SOVALDI PACK 200 MG	1	QL(56 ea per 28 day(s) retail; 56 ea per 28 days mail); AL(At least 3 yrs old - Up to 6 yrs old); PA	ZOVIRAX SUSP (<i>acyclovir</i>)	9	QL(473 ml per fill retail); AL(Up to 7 yrs old)
SOVALDI TABS	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); AL(At least 7 yrs old); PA	Influenza Agents		
VEMLIDY	1	QL(1 ea daily)	<i>oseltamivir phosphate</i> CAPS 30 MG, 45 MG	1	
VOSEVI	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); PA	<i>oseltamivir phosphate</i> CAPS 75 MG	1	QL(20 ea per 10 day(s) retail; 20 ea per 10 days mail)
ZEPATIER	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); AL(At least 18 yrs old); PA	<i>oseltamivir phosphate</i> SUSR	1	
Herpes Agents			RAPIVAB	1	
<i>acyclovir sodium SOLN</i>	1		RELENZA DISKHALER	1	QL(20 ea per fill retail)
<i>acyclovir CAPS</i>	1		<i>rimantadine hydrochloride</i> TABS	1	
<i>acyclovir SUSP</i>	1	QL(473 ml per fill retail); AL(Up to 7 yrs old)	TAMIFLU CAPS 75 MG (<i>oseltamivir phosphate</i>)	1	QL(20 ea per 10 day(s) retail; 20 ea per 10 days mail)
<i>acyclovir TABS OR</i>	1		TAMIFLU CAPS 30 MG, 45 MG (<i>oseltamivir phosphate</i>)	1	
			TAMIFLU SUSR (<i>oseltamivir phosphate</i>)	1	
			XOFLUZA 80 MG	1	QL(1 ea per fill retail); AL(At least 5 yrs old)
			XOFLUZA 40 MG	1	QL(2 ea per fill retail); AL(At least 5 yrs old)
			Misc. Antivirals		
			VEKLURY SOLR	1	
			Respiratory Syncytial Virus (RSV) Agents		
			<i>ribavirin</i>	1	
			VIRAZOLE (<i>ribavirin</i>)	1	
BETA BLOCKERS - Drugs to Treat High Blood					

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Pressure			<i>bisoprolol fumarate 10 MG</i>	1	QL(2 ea daily); MP
Alpha-Beta Blockers			<i>bisoprolol fumarate 5 MG</i>	1	QL(4 ea daily); MP
<i>carvedilol 12.5 MG, 25 MG</i>	1	QL(4 ea daily); MP	BREVIBLOC (<i>esmolol hcl-sodium chloride</i>)	1	
<i>carvedilol 3.125 MG, 6.25 MG</i>	1	QL(8 ea daily); MP	BREVIBLOC PREMIXED (<i>esmolol hcl-sodium chloride</i>)	1	
<i>carvedilol phosphate</i>	1		BREVIBLOC PREMIXED DOUBLESTRENGTH (<i>esmolol hcl-sodium chloride</i>)	1	
COREG 3.125 MG, 6.25 MG (<i>carvedilol</i>)	1	QL(8 ea daily); MP	BREVIBLOC SOLN 100 MG/10ML (<i>esmolol hcl</i>)	9	
COREG 12.5 MG, 25 MG (<i>carvedilol</i>)	1	QL(4 ea daily); MP	BYSTOLIC (<i>nebivolol hcl</i>)	1	
COREG 3.125 MG, 6.25 MG (<i>carvedilol</i>)	9	QL(8 ea daily); MP	BYSTOLIC 2.5 MG, 5 MG (<i>nebivolol hcl</i>)	9	
COREG 12.5 MG, 25 MG (<i>carvedilol</i>)	9	QL(4 ea daily); MP	<i>esmolol hcl-sodium chloride</i>	1	
COREG CR (<i>carvedilol phosphate</i>)	1		<i>esmolol hcl SOLN 100 MG/10ML</i>	1	
COREG CR (<i>carvedilol phosphate</i>)	9		ESMOLOL HYDROCHLORIDE INWATER DOUBLE STRENGTH SOLN	1	
<i>labetalol hcl SOLN</i>	1		ESMOLOL HYDROCHLORIDE INWATER SOLN	1	
<i>labetalol hcl TABS 300 MG</i>	1	QL(8 ea daily); MP	KAPSPARGO SPRINKLE CS24	1	QL(1 ea daily); PA
<i>labetalol hcl TABS 100 MG</i>	1	QL(24 ea daily); MP	LOPRESSOR TABS 50 MG (<i>metoprolol tartrate</i>)	1	QL(6 ea daily); MP
<i>labetalol hcl TABS 200 MG</i>	1	QL(12 ea daily); MP	LOPRESSOR TABS 100 MG (<i>metoprolol tartrate</i>)	1	QL(5 ea daily); MP
LABETALOL HYDROCHLORIDE SOSY 10 MG/2ML	1		<i>metoprolol succinate TB24 100 MG, 200 MG</i>	1	QL(2 ea daily); MP
Beta Blockers Cardio-Selective			<i>metoprolol succinate TB24 25 MG, 50 MG</i>	1	QL(3 ea daily); MP
<i>acebutolol hcl CAPS 400 MG</i>	1	QL(4 ea daily); MP	<i>metoprolol tartrate SOLN IV 5 MG/5ML</i>	1	
<i>acebutolol hcl CAPS 200 MG</i>	1	QL(6 ea daily); MP	<i>metoprolol tartrate TABS 37.5 MG, 75 MG, 100 MG</i>	1	QL(5 ea daily); MP
<i>atenolol TABS 25 MG</i>	1	QL(8 ea daily); MP			
<i>atenolol TABS 100 MG</i>	1	QL(2 ea daily); MP			
<i>atenolol TABS 50 MG</i>	1	QL(4 ea daily); MP			
<i>betaxolol hcl</i>	1				

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<i>metoprolol tartrate TABS 25 MG, 50 MG</i>	1	QL(6 ea daily); MP	INDERAL XL	1	
<i>nebivolol hcl</i>	1		INNOPRAN XL	1	
TENORMIN TABS 100 MG (<i>atenolol</i>)	1	QL(2 ea daily); MP	<i>nadolol TABS 20 MG</i>	1	
TENORMIN TABS 50 MG (<i>atenolol</i>)	1	QL(4 ea daily); MP	<i>nadolol TABS 40 MG, 80 MG</i>	1	QL(4 ea daily); MP
TENORMIN TABS 25 MG (<i>atenolol</i>)	1	QL(8 ea daily); MP	<i>pindolol TABS</i>	1	
TOPROL XL TB24 25 MG, 50 MG (<i>metoprolol succinate</i>)	1	QL(3 ea daily); MP	<i>propranolol hcl CP24 60 MG, 80 MG, 160 MG</i>	1	QL(2 ea daily); MP
TOPROL XL TB24 100 MG, 200 MG (<i>metoprolol succinate</i>)	1	QL(2 ea daily); MP	<i>propranolol hcl CP24 120 MG</i>	1	QL(3 ea daily); MP
Beta Blockers Non-Selective			<i>propranolol hcl SOLN OR 20 MG/5ML, 40 MG/5ML</i>	1	
BETAPACE AF 160 MG (<i>sotalol hcl (afib/afll)</i>)	1	QL(4 ea daily); MP	<i>propranolol hcl TABS 40 MG</i>	1	QL(6 ea daily); MP
BETAPACE AF 80 MG (<i>sotalol hcl (afib/afll)</i>)	1	QL(8 ea daily); MP	<i>propranolol hcl TABS 60 MG, 80 MG</i>	1	QL(4 ea daily); MP
BETAPACE AF 120 MG (<i>sotalol hcl (afib/afll)</i>)	1	QL(6.67 ea daily); MP	<i>propranolol hcl TABS 10 MG, 20 MG</i>	1	QL(8 ea daily); MP
BETAPACE TABS 120 MG (<i>sotalol hcl</i>)	1	QL(6.67 ea daily); MP	<i>sotalol hcl (afib/afll) 80 MG</i>	1	QL(8 ea daily); MP
BETAPACE TABS 160 MG (<i>sotalol hcl</i>)	1	QL(4 ea daily); MP	<i>sotalol hcl (afib/afll) 160 MG</i>	1	QL(4 ea daily); MP
BETAPACE TABS 80 MG (<i>sotalol hcl</i>)	1	QL(8 ea daily); MP	<i>sotalol hcl (afib/afll) 120 MG</i>	1	QL(6.67 ea daily); MP
CORGARD TABS 80 MG (<i>nadolol</i>)	9	QL(4 ea daily); MP	<i>sotalol hcl TABS 80 MG</i>	1	QL(8 ea daily); MP
CORGARD TABS 20 MG (<i>nadolol</i>)	9		<i>sotalol hcl TABS 240 MG</i>	1	QL(2 ea daily); MP
CORGARD TABS 40 MG (<i>nadolol</i>)	1	QL(4 ea daily); MP	<i>sotalol hcl TABS 160 MG</i>	1	QL(4 ea daily); MP
HEMANGEOL SOLN OR	1	QL(120 ml per 30 day(s) retail; 120 ml per 30 days mail); PA	<i>sotalol hcl TABS 120 MG</i>	1	QL(6.67 ea daily); MP
INDERAL LA CP24 120 MG (<i>propranolol hcl</i>)	1	QL(3 ea daily); MP	SOTYLIZE SOLN OR	1	QL(1920 ml per 30 day(s) retail; 1920 ml per 30 days mail); PA
INDERAL LA CP24 60 MG, 80 MG, 160 MG (<i>propranolol hcl</i>)	1	QL(2 ea daily); MP	<i>timolol maleate TABS</i>	1	
CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure					
Calcium Channel Blockers					
			<i>amlodipine besylate TABS 2.5 MG</i>	1	QL(6 ea daily); MP

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<i>amlodipine besylate TABS 5 MG</i>	1	QL(4 ea daily); MP	<i>diltiazem hcl coated beads CP24 300 MG</i>	1	QL(1 ea daily); MP
<i>amlodipine besylate TABS 10 MG</i>	1	QL(2 ea daily); MP	<i>diltiazem hcl extended release beads 300 MG, 360 MG, 420 MG</i>	1	QL(1 ea daily); MP
CALAN SR TBCR 120 MG, 180 MG (<i>verapamil hcl</i>)	9	QL(2 ea daily); MP	<i>diltiazem hcl extended release beads 120 MG</i>	1	QL(4 ea daily); MP
CARDENE IV SOLN 0.83 %-40 MG/200ML, 0.86 %-20 MG/200ML	1		<i>diltiazem hcl extended release beads 240 MG</i>	1	QL(2 ea daily); MP
CARDIZEM CD CP24 120 MG (<i>diltiazem hcl coated beads</i>)	1	QL(4 ea daily); MP	<i>diltiazem hcl extended release beads 180 MG</i>	1	QL(3 ea daily); MP
CARDIZEM CD CP24 360 MG (<i>diltiazem hcl coated beads</i>)	1	PA	<i>diltiazem hcl CP12</i>	2	ST
CARDIZEM CD CP24 300 MG (<i>diltiazem hcl coated beads</i>)	1	QL(1 ea daily); MP	<i>diltiazem hcl CP24 120 MG</i>	1	QL(4 ea daily); MP
CARDIZEM CD CP24 240 MG (<i>diltiazem hcl coated beads</i>)	1	QL(2 ea daily); MP	<i>diltiazem hcl CP24 240 MG</i>	1	QL(2 ea daily); MP
CARDIZEM CD CP24 180 MG (<i>diltiazem hcl coated beads</i>)	1	QL(3 ea daily); MP	<i>diltiazem hcl CP24 180 MG</i>	1	QL(3 ea daily); MP
CARDIZEM LA TB24 (<i>diltiazem hcl</i>)	2	ST	<i>diltiazem hcl SOLN</i>	1	
CARDIZEM TABS 30 MG, 60 MG (<i>diltiazem hcl</i>)	1	QL(6 ea daily); MP	DILTIAZEM HCL SOLR	1	
CARDIZEM TABS 120 MG (<i>diltiazem hcl</i>)	1	QL(8 ea daily); MP	<i>diltiazem hcl TABS 120 MG</i>	1	QL(8 ea daily); MP
CLEVIPREX 25 MG/50ML, 50 MG/100ML	1		<i>diltiazem hcl TABS 90 MG</i>	1	QL(3 ea daily); MP
CONJUPRI (<i>levamlodipine maleate</i>)	9	QL(1 ea daily)	<i>diltiazem hcl TABS 30 MG, 60 MG</i>	1	QL(6 ea daily); MP
<i>diltiazem hcl coated beads CP24 180 MG</i>	1	QL(3 ea daily); MP	<i>diltiazem hcl TB24</i>	2	ST
<i>diltiazem hcl coated beads CP24 240 MG</i>	1	QL(2 ea daily); MP	<i>felodipine</i>	1	QL(1 ea daily); MP
<i>diltiazem hcl coated beads CP24 360 MG</i>	1	PA	<i>isradipine CAPS</i>	2	ST
<i>diltiazem hcl coated beads CP24 120 MG</i>	1	QL(4 ea daily); MP	KATERZIA	1	QL(300 ml per 30 day(s) retail; 300 ml per 30 days mail); AL(At least 6 yrs old - Up to 10 yrs old); PA
			<i>levamlodipine maleate</i>	1	QL(1 ea daily); PA
			<i>nicardipine hcl CAPS</i>	2	ST; MP
			<i>nicardipine hcl SOLN</i>	1	
			NICARDIPINE HYDROCHLORIDE SOLN	1	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>nifedipine CAPS</i>	1	MP	<i>verapamil hcl SOLN 2.5 MG/ML</i>	1	
<i>nifedipine TB24</i>	1	MP	<i>verapamil hcl TABS 40 MG</i>	1	QL(3 ea daily); MP
<i>nimodipine CAPS</i>	1	QL(252 ea per 20 day(s) retail; 252 ea per 20 days mail)	<i>verapamil hcl TABS 80 MG, 120 MG</i>	1	QL(4 ea daily); MP
<i>nisoldipine</i>	2	ST	<i>verapamil hcl TBCR 120 MG, 180 MG</i>	1	QL(2 ea daily); MP
NORLIQVA SOLN	1	QL(300 ml per 30 day(s) retail; 300 ml per 30 days mail); AL(At least 6 yrs old - Up to 10 yrs old); PA	<i>verapamil hcl TBCR 240 MG</i>	1	
NORVASC TABS 5 MG (<i>amlodipine besylate</i>)	9	QL(4 ea daily); MP	VERAPAMIL HYDROCHLORIDE ER CP24 (<i>verapamil hcl</i>)	2	ST
NORVASC TABS 5 MG (<i>amlodipine besylate</i>)	1	QL(4 ea daily); MP	VERELAN PM CP24 (<i>verapamil hcl</i>)	2	ST
NORVASC TABS 10 MG (<i>amlodipine besylate</i>)	1	QL(2 ea daily); MP	VERELAN CP24 (<i>verapamil hcl</i>)	2	ST
NORVASC TABS 10 MG (<i>amlodipine besylate</i>)	9	QL(2 ea daily); MP	CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm		
NORVASC TABS 2.5 MG (<i>amlodipine besylate</i>)	1	QL(6 ea daily); MP	Cardiac Glycosides		
NYMALIZE SOLN 6 MG/ML	1		<i>digoxin SOLN OR 0.05 MG/ML</i>	1	QL(900 ml per 90 day(s) retail; 900 ml per 90 days mail); MP
PROCARDIA XL TB24 (<i>nifedipine</i>)	1	MP	<i>digoxin SOLN IJ 0.25 MG/ML</i>	1	
SULAR 8.5 MG, 17 MG, 34 MG (<i>nisoldipine</i>)	2	ST	<i>digoxin TABS 250 MCG</i>	1	QL(2.22 ea daily); MP
TIAZAC 120 MG (<i>diltiazem hcl extended release beads</i>)	1	QL(4 ea daily); MP	<i>digoxin TABS 0.0625 MG, 62.5 MCG</i>	1	
TIAZAC 240 MG (<i>diltiazem hcl extended release beads</i>)	1	QL(2 ea daily); MP	<i>digoxin TABS 0.125 MG, 125 MCG</i>	1	QL(3.34 ea daily); MP
TIAZAC 300 MG, 360 MG, 420 MG (<i>diltiazem hcl extended release beads</i>)	1	QL(1 ea daily); MP	LANOXIN PEDIATRIC SOLN IJ	1	
TIAZAC 180 MG (<i>diltiazem hcl extended release beads</i>)	1	QL(3 ea daily); MP	LANOXIN SOLN IJ (<i>digoxin</i>)	1	
<i>verapamil hcl CP24</i>	2	ST	LANOXIN TABS 62.5 MCG (<i>digoxin</i>)	9	
			LANOXIN TABS 250 MCG (<i>digoxin</i>)	9	QL(2.22 ea daily); MP
			LANOXIN TABS 125 MCG (<i>digoxin</i>)	9	QL(3.34 ea daily); MP

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Drug Name	Drug Tier	Requirements/Limits
Inotropes		
<i>dobutamine hcl 12.5 MG/ML, 250 MG/20ML</i>	1	
DOBUTAMINE HCL/D5W	1	
DOBUTAMINE HYDROCHLORIDE/DEXT ROSE 5%	1	
<i>dopamine hcl 40 MG/ML</i>	1	
DOPAMINE HYDROCHLORIDE (<i>dopamine hcl</i>)	1	
DOPAMINE HYDROCHLORIDE (<i>dopamine hcl</i>)	9	
DOPAMINE HYDROCHLORIDE/DEXT ROSE	1	
DOPAMINE/D5W	1	
<i>milrinone lactate</i>	1	
<i>milrinone lactate in dextrose</i>	1	
CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions		
Cardiac Myosin Inhibitors		
CAMZYOS	1	QL(1 ea daily); AL(At least 18 yrs old); PA
Cardioplegic Solutions		
<i>cardioplegic soln</i>	1	
PLEGISOL (<i>cardioplegic soln</i>)	1	
Cardiovascular Agents Misc. - Combinations		
<i>amlodipine besylate-atorvastatin calcium</i>	2	ST
BIDIL (<i>isosorbide dinitrate-hydralazine hcl</i>)	1	

Drug Name	Drug Tier	Requirements/Limits
CADUET 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG (<i>amlodipine besylate-atorvastatin calcium</i>)	9	ST
CADUET 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG (<i>amlodipine besylate-atorvastatin calcium</i>)	2	ST
ENTRESTO CPSP	1	AL(At least 1 yrs old - Up to 10 yrs old); PA
ENTRESTO TABS	1	QL(2 ea daily); PA
<i>isosorbide dinitrate-hydralazine hcl</i>	1	
OPSYNVI	1	PA
Cardiovascular Sodium-Glucose Co-Transporter 2 Inhibitors		
INPEFA	1	QL(1 ea daily); AL(At least 18 yrs old); PA
Impotence Agents		
CIALIS 5 MG (<i>tadalafil</i>)	1	QL(1 ea daily); PA
CIALIS 2.5 MG, 10 MG, 20 MG (<i>tadalafil</i>)	9	
<i>tadalafil 5 MG</i>	1	QL(1 ea daily); PA
Peripheral Vasodilators		
<i>papaverine hcl SOLN</i>	1	
Prostaglandin Vasodilators		
<i>epoprostenol sodium</i>	1	
FLOLAN (<i>epoprostenol sodium</i>)	1	

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ORENITRAM TITRATION KIT MONTH 1 TEPK	1	QL(168 ea per 28 day(s) retail; 168 ea per 28 days mail); PA	TYVASO SOLN IN	1	QL(11.6 ml per 7 day(s) retail; 12 ml per 7 days mail)
ORENITRAM TITRATION KIT MONTH 2 TEPK	1	QL(336 ea per 28 day(s) retail; 336 ea per 28 days mail); PA	VELETRI (<i>epoprostenol sodium</i>)	1	
ORENITRAM TITRATION KIT MONTH 3 TEPK	1	QL(252 ea per 28 day(s) retail; 252 ea per 28 days mail); PA	VENTAVIS	1	
ORENITRAM TBCR	1	QL(6 ea daily); PA	Pulmonary Hypertension - Activin Signaling Inhibitor		
REMODULIN SOLN IJ	1		WINREVAIR	1	PA
<i>treprostinil SOLN IJ</i>	1		Pulmonary Hypertension - Endothelin Receptor Antagonists		
TYVASO DPI INSTITUTIONALKIT POWD	1	QL(112 ea per 28 day(s) retail; 112 ea per 28 days mail); PA	<i>ambrisentan</i>	1	
TYVASO DPI MAINTENANCE KIT POWD	1	QL(224 ea per 35 day(s) retail; 224 ea per 35 days mail); PA	<i>bosentan TABS</i>	1	
TYVASO DPI MAINTENANCE KIT POWD	1	QL(112 ea per 28 day(s) retail; 112 ea per 28 days mail); PA	LETAIRIS (<i>ambrisentan</i>)	1	
TYVASO DPI TITRATION KIT POWD	1	QL(196 ea per 35 day(s) retail; 196 ea per 35 days mail); PA	OPSUMIT	1	QL(1 ea daily); PA
TYVASO DPI TITRATION KIT POWD	1	QL(252 ea per 35 day(s) retail; 252 ea per 35 days mail); PA	TRACLEER TABS (<i>bosentan</i>)	1	
TYVASO REFILL KIT SOLN IN	1	QL(324.8 ml per 28 day(s) retail; 325 ml per 28 days mail)	TRACLEER TBSO	1	
TYVASO STARTER KIT SOLN IN	1	QL(324.8 ml per 28 day(s) retail; 325 ml per 28 days mail)	Pulmonary Hypertension - Phosphodiesterase Inhibitors		
			ADCIRCA TABS (<i>tadalafil (pulmonary hypertension)</i>)	1	QL(2 ea daily); PA
			LIQREV SUSP	1	AL(At least 18 yrs old); PA
			REVATIO SOLN (<i>sildenafil citrate (pulmonary hypertension)</i>)	1	
			REVATIO SUSR (<i>sildenafil citrate (pulmonary hypertension)</i>)	1	QL(224 ml per 30 day(s) retail; 224 ml per 30 days mail); AL(Up to 6 yrs old); PA
			REVATIO TABS (<i>sildenafil citrate (pulmonary hypertension)</i>)	1	QL(3 ea daily); PA
			<i>sildenafil citrate (pulmonary hypertension) SOLN</i>	1	

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<i>sildenafil citrate (pulmonary hypertension) SUSR</i>	1	QL(224 ml per 30 day(s) retail; 224 ml per 30 days mail); AL(Up to 6 yrs old); PA	CORLANOR SOLN	1	QL(560 ml per 28 day(s) retail; 560 ml per 28 days mail); PA
<i>sildenafil citrate (pulmonary hypertension) TABS</i>	1	QL(3 ea daily); PA	CORLANOR TABS (<i>ivabradine hcl</i>)	1	QL(2 ea daily); PA
<i>tadalafil (pulmonary hypertension) TABS</i>	1	QL(2 ea daily); PA	<i>ivabradine hcl TABS</i>	1	QL(2 ea daily); PA
TADLIQ SUSP	1	QL(300 ml per 30 day(s) retail; 300 ml per 30 days mail); AL(Up to 10 yrs old); PA	Transthyretin Stabilizers		
Pulmonary Hypertension - Prostacyclin Receptor Agonist			VYNDAMAX	1	QL(1 ea daily); PA
UPTRAVI TITRATION PACK TBPK	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); AL(At least 18 yrs old); PA	VYNDAQEL	1	QL(4 ea daily); PA
UPTRAVI SOLR	1	QL(60 ea per 30 day(s) retail; 60 ea per 30 days mail); AL(At least 18 yrs old); PA	Vasoactive Soluble Guanylate Cyclase Stimulator (sGC)		
UPTRAVI TABS	1	QL(2 ea daily); AL(At least 18 yrs old); PA	VERQUVO	1	QL(1 ea daily); AL(At least 18 yrs old); PA
Pulmonary Hypertension - Sol Guanylate Cyclase Stimulator			CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
ADEMPAS	1	QL(3 ea daily); PA	Cephalosporin Combinations		
Septal Agents			AVYCAZ	1	QL(42 ea per 14 day(s) retail; 42 ea per 14 days mail); AL(At least 18 yrs old); PA
ABLYSINOL	1	AL(Up to 20 yrs old); PA	ZERBAXA	1	QL(84 ea per 14 day(s) retail; 84 ea per 14 days mail); AL(At least 18 yrs old); PA
Sinus Node Inhibitors			Cephalosporins - 1st Generation		
			<i>cefadroxil CAPS</i>	1	
			<i>cefadroxil SUSR</i>	1	
			<i>cefadroxil TABS</i>	1	
			CEFAZOLIN SODIUM/DEXTROSE SOLR	1	
			CEFAZOLIN SODIUM SOLN 4 %-1 GM/50ML	1	

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<i>cefazolin sodium SOLR IJ 1 GM, 2 GM, 3 GM, 10 GM, 500 MG</i>	1		<i>cefixime SUSR</i>	1	QL(100 ml per 10 day(s) retail; 100 ml per 10 days mail); AL(Up to 12 yrs old); PA
CEFAZOLIN SODIUM SOLR IV 2 GM, 3 GM	1		<i>cefpodoxime proxetil SUSR</i>	1	
CEFAZOLIN/DEXTROSE SOLN 4 %-3 GM/150ML	1		<i>cefpodoxime proxetil TABS</i>	1	
CEFAZOLIN SOLN	1		<i>ceftazidime IJ 1 GM, 6 GM</i>	1	
CEFAZOLIN SOLR IV	1		<i>ceftriaxone sodium IJ 1 GM, 2 GM, 250 MG, 500 MG</i>	1	
<i>cephalexin CAPS 750 MG</i>	1	PA	<i>ceftriaxone sodium in dextrose</i>	1	
<i>cephalexin CAPS 250 MG, 500 MG</i>	1		CEFTRIAXONE/DEXTRO SE	1	
<i>cephalexin SUSR</i>	1		Cephalosporins - 4th Generation		
<i>cephalexin TABS</i>	1	PA	<i>cefepime hcl SOLR IJ 1 GM</i>	1	
<i>cephalexin TABS</i>	1		CEFEPIME/DEXTROSE	1	
Cephalosporins - 2nd Generation			CEFEPIME SOLN	1	
CEFACTOR ER TB12	1		Cephalosporins - 5th Generation		
<i>cefaclor CAPS</i>	1		TEFLARO	1	
<i>cefaclor SUSR 125 MG/5ML, 375 MG/5ML</i>	1		Cephalosporins - Siderophores		
CEFOTAN IJ (<i>cefotetan disodium</i>)	1		FETROJA	1	AL(At least 18 yrs old); PA
CEFOTAN IJ (<i>cefotetan disodium</i>)	9		CHEMICALS		
<i>cefotetan disodium IJ 1 GM, 2 GM</i>	1		Bulk Chemicals - A's		
<i>cefoxitin sodium IV</i>	1		ACYCLOVIR	1	
CEFOXITIN SODIUM	1		ALBENDAZOLE	1	
<i>cefprozil SUSR</i>	1		AMLODIPINE BESYLATE	1	
<i>cefprozil TABS</i>	1		Bulk Chemicals - B's		
<i>cefuroxime axetil TABS</i>	1		BENZOCAINE	1	RX/OTC
<i>cefuroxime sodium IJ 750 MG</i>	1		BETHANECHOL CHLORIDE	1	
Cephalosporins - 3rd Generation			Bulk Chemicals - C's		
<i>cefdinir CAPS</i>	1				
<i>cefdinir SUSR</i>	1				
<i>cefixime CAPS</i>	1	QL(10 ea per 10 day(s) retail; 10 ea per 10 days mail); PA			

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Drug Name	Drug Tier	Requirements/Limits
CHLORPROMAZINE HCL	1	
CHOLESTYRAMINE	1	
CHOLESTYRAMINE RESIN	1	
CLINDAMYCIN PHOSPHATE POWD	1	
Bulk Chemicals - D's		
DEXAMETHASONE	1	
DEXAMETHASONE SODIUM PHOSPHATE	1	
DIAZEPAM	1	
Bulk Chemicals - E's		
ENALAPRIL MALEATE	1	
ESTRADIOL	1	
ESTRADIOL MICRONIZED	1	
ESTRIOL	1	
ESTRIOL MICRONIZED	1	
Bulk Chemicals - G's		
GLYCOPYRROLATE	1	
Bulk Chemicals - H's		
HYDROCODONE BITARTRATE CRYSTALS	1	
HYDROCODONE BITARTRATE POWD	1	
HYDROCORTISONE ACETATE MICRONIZED POWD XX	1	
HYDROCORTISONE ACETATE POWD XX	1	
HYDROCORTISONE MICRONIZED POWD XX	1	
HYDROCORTISONE POWD XX	1	
HYDROXYUREA	1	
HYDROXYZINE HCL	1	
Bulk Chemicals - K's		
KETAMINE HCL	1	

Drug Name	Drug Tier	Requirements/Limits
Bulk Chemicals - L's		
LANSOPRAZOLE	1	RX/OTC
LIDOCAINE BASE POWD	1	
LIDOCAINE HCL	1	
LIDOCAINE HCL MONOHYDRATE	1	
LIDOCAINE CRYSTALS	1	
LIDOCAINE POWD	1	
LORAZEPAM	1	
Bulk Chemicals - M's		
METFORMIN HCL	1	
METRONIDAZOLE	1	
METRONIDAZOLE BENZOATE	1	
MUPIROCIN	1	
Bulk Chemicals - N's		
NALTREXONE HCL	1	
NALTREXONE HYDROCHLORIDE	1	
NALTREXONE HYDROCHLORIDE ANHYDROUS	1	
NIFEDIPINE	1	
Bulk Chemicals - O's		
OMEPRAZOLE	1	
Bulk Chemicals - P's		
PHYTONADIONE LIQUID	1	RX/OTC
PROGESTERONE MICRONIZED	1	
PROGESTERONE MICRONIZED (SOY)	1	
PROGESTERONE MICRONIZED (YAM)	1	
PROGESTERONE MILLED POWD	1	
PROGESTERONE ULTRA MICRONIZED	1	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PROGESTERONE WETTABLE (SOY) POWD	1		Combination Contraceptives - Oral		
PROGESTERONE WETTABLE (YAM) POWD	1		BALCOLTRA (levonorgestrel-ethinyl estradiol-iron)	1	QL(1 ea daily)
PROGESTERONE WETTABLE POWD	1		BALCOLTRA (levonorgestrel-ethinyl estradiol-iron)	9	QL(1 ea daily)
PROGESTERONE POWD	1		BEYAZ (drospirenone-ethinyl estradiol-levomefolate calcium)	9	
PROMETHAZINE HCL POWD	1		BEYAZ (drospirenone-ethinyl estradiol-levomefolate calcium)	1	
Bulk Chemicals - T's			desogestrel & ethinyl estradiol	1	
TESTOSTERONE MICRONIZED (SOY) POWD	1	PA	desogestrel-ethinyl estradiol (biphasic)	1	
TESTOSTERONE MICRONIZED SOY POWD	1	PA	desogestrel-ethinyl estradiol (triphasic)	1	
TESTOSTERONE MICRONIZED YAM CRYSTALS	1	PA	drospirenone-ethinyl estradiol	1	
TESTOSTERONE MICRONIZED POWD	1	PA	drospirenone-ethinyl estradiol-levomefolate calcium	1	
TESTOSTERONE PROPIONATE	1	PA	ethynodiol diacet & eth estrad	1	
TESTOSTERONE POWD	1	PA	FEMLYV TBDP	1	PA
TOPIRAMATE	1		GENERESS FE (norethindrone & ethinyl estradiol-fe)	9	
TRIAMCINOLONE	1		levonorgestrel & eth estradiol TABS	1	
TRIAMCINOLONE USP, MICRONIZED	1		levonorgestrel-eth estradiol (triphasic)	1	
TRICHLOROACETIC ACID CRYSTALS	1	RX/OTC	levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG	1	
Bulk Chemicals - U's			levonorgestrel-ethinyl estradiol (continuous)	1	
URSODIOL	1		levonorgestrel-ethinyl estradiol-iron	1	QL(1 ea daily)
Solids			LO LOESTRIN FE TABS	1	
KETOCONAZOLE	1		CONTRACEPTIVES - Drugs to Prevent Pregnancy		
PILOCARPINE HCL POWD	1				
PREGNENOLONE	1				
PREGNENOLONE MICRONIZED	1				

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
LOSEASONIQUE (levonorgestrel-ethinyl estradiol (91-day))	9		SAFYRAL (drospirenone-ethinyl estradiol-levomefolate calcium)	9	
MINASTRIN 24 FE CHEW (norethin acet & estrad-fe)	9		SEASONIQUE (levonorgestrel-ethinyl estradiol (91-day))	9	
MIRCETTE (desogestrel-ethinyl estradiol (biphasic))	9		TAYTULLA CAPS (norethin acet & estrad-fe)	9	QL(1 ea daily)
NATAZIA	1		TAYTULLA CAPS (norethin acet & estrad-fe)	1	QL(1 ea daily); PA
NEXTSTELLIS	1	QL(1 ea daily); PA	TYBLUME CHEW	1	
norethin acet & estrad-fe CAPS	1	QL(1 ea daily); PA	YASMIN 28 (drospirenone-ethinyl estradiol)	9	
norethin acet & estrad-fe CHEW	1		YASMIN 28 (drospirenone-ethinyl estradiol)	1	
norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG	1		YAZ (drospirenone-ethinyl estradiol)	1	
norethindrone & eth estradiol	1		YAZ (drospirenone-ethinyl estradiol)	9	
norethindrone & ethinyl estradiol-fe	1		Combination Contraceptives - Transdermal		
norethindrone acet & eth estra TABS	1		norelgestromin-ethinyl estradiol	1	QL(9 ea per 84 day(s) retail; 9 ea per 84 days mail)
norethindrone acetate-ethinyl estradiol-fe	1		TWIRLA	1	
norethindrone-eth estradiol (triphasic)	1		Combination Contraceptives - Vaginal		
norgestimate-ethinyl estradiol	1		ANNOVERA	1	1 package(s) per 365 day(s) retail; 1 package(s) per 365 day(s) mail
norgestimate-ethinyl estradiol (triphasic)	1		etonogestrel-ethinyl estradiol	1	
norgestrel & ethinyl estradiol 30 MCG-0.3 MG	1		NUVARING (etonogestrel-ethinyl estradiol)	9	
QUARTETTE (levonorgestrel-ethinyl estradiol (91-day))	1	QL(1 ea daily)	NUVARING (etonogestrel-ethinyl estradiol)	1	
QUARTETTE (levonorgestrel-ethinyl estradiol (91-day))	9	QL(1 ea daily)	Copper Contraceptives - IUD		
SAFYRAL (drospirenone-ethinyl estradiol-levomefolate calcium)	1				

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PARAGARD INTRAUTERINE COPPER CONTRACEPTIVE T380A	1	PA
Emergency Contraceptives		
ELLA	1	
<i>levonorgestrel (emergency oc) 1.5 MG</i>	1	
PLAN B ONE-STEP (<i>levonorgestrel (emergency oc)</i>)	9	
Progestin Contraceptives - Implants		
NEXPLANON	1	AL(At least 10 yrs old - Up to 50 yrs old); PA
Progestin Contraceptives - Injectable		
DEPO-PROVERA CONTRACEPTIVE SUSP IM (<i>medroxyprogesterone acetate (contraceptive)</i>)	1	QL(1 ml per 84 day(s) retail; 1 ml per 84 days mail)
DEPO-PROVERA CONTRACEPTIVE SUSY IM (<i>medroxyprogesterone acetate (contraceptive)</i>)	1	
DEPO-SUBQ PROVERA 104 SUSY SC	1	
<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	1	QL(1 ml per 84 day(s) retail; 1 ml per 84 days mail)
<i>medroxyprogesterone acetate (contraceptive) SUSY IM</i>	1	
Progestin Contraceptives - IUD		
KYLEENA	1	PA
LILETTA 20.1 MCG/DAY	1	PA
MIRENA	1	PA
SKYLA	1	PA
Progestin Contraceptives - Oral		
<i>norethindrone (contraceptive)</i>	1	
OPILL	1	

Drug Name	Drug Tier	Requirements/Limits
SLYND	1	QL(1 ea daily); PA
CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions		
Glucocorticosteroids		
AGAMREE	1	AL(At least 2 yrs old); PA
ALKINDI SPRINKLE CPSP	1	AL(Up to 6 yrs old); PA
<i>betamethasone sod phosphate & acetate SUSP</i>	1	
<i>budesonide CPEP</i>	1	
<i>budesonide TB24</i>	1	QL(1 ea daily); PA
CELESTONE SOLUSPAN SUSP (<i>betamethasone sod phosphate & acetate</i>)	1	
CORTEF TABS (<i>hydrocortisone</i>)	1	
CORTISONE ACETATE TABS	1	
<i>deflazacort SUSP</i>	1	Brand Required; QL(30 ml per 30 day(s) retail; 30 ml per 30 days mail); AL(At least 5 yrs old); PA
<i>deflazacort TABS</i>	1	Brand Required; QL(1 ea daily); AL(At least 5 yrs old); PA
DEPO-MEDROL SUSP	1	
DEPO-MEDROL SUSP (<i>methylprednisolone acetate</i>)	1	
DEPO-MEDROL SUSP 80 MG/ML (<i>methylprednisolone acetate</i>)	9	
DEXAMETHASONE INTENSOL CONC	1	

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<i>dexamethasone sodium phosphate SOLN IJ</i>	1		KENALOG-80 SUSP	1	
<i>dexamethasone sodium phosphate SOSY IJ</i>	1		MEDROL DOSEPAK TBPK (<i>methylprednisolone</i>)	1	
<i>dexamethasone ELIX</i>	1		MEDROL TABS	1	
<i>dexamethasone SOLN</i>	1		MEDROL TABS (<i>methylprednisolone</i>)	1	
<i>dexamethasone TABS</i>	1		<i>methylprednisolone acetate SUSP</i>	1	
<i>dexamethasone TBPK</i>	1	PA	<i>methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG</i>	1	
<i>dexamethasone TBPK</i>	1	1 package(s) per 7 day(s) retail; 1 package(s) per 7 day(s) mail; PA	<i>methylprednisolone TABS</i>	1	
<i>dexamethasone TBPK</i>	1		<i>methylprednisolone TBPK</i>	1	
EMFLAZA SUSP (<i>deflazacort</i>)	1	Brand Required; QL(30 ml per 30 day(s) retail; 30 ml per 30 days mail); AL(At least 5 yrs old); PA	ORAPRED ODT TBDP (<i>prednisolone sodium phosphate</i>)	9	QL(10 ea per fill retail)
EMFLAZA TABS (<i>deflazacort</i>)	1	Brand Required; QL(1 ea daily); AL(At least 5 yrs old); PA	PEDIAPRED SOLN (<i>prednisolone sodium phosphate</i>)	1	
EOHILIA SUSP	1	AL(At least 11 yrs old); PA	PREDNISOLONE SODIUM PHOSPHATE POWD	1	
HEMADY TABS	1	QL(24 ea per 28 day(s) retail; 24 ea per 28 days mail); AL(At least 18 yrs old); PA	<i>prednisolone sodium phosphate SOLN 10 MG/5ML, 20 MG/5ML</i>	1	PA
<i>hydrocortisone sod succinate 100 MG</i>	1		<i>prednisolone sodium phosphate SOLN 5 MG/5ML, 6.7 MG/5ML, 15 MG/5ML, 25 MG/5ML</i>	1	
<i>hydrocortisone TABS</i>	1		<i>prednisolone sodium phosphate TBDP</i>	1	QL(10 ea per fill retail); AL(Up to 10 yrs old)
KENALOG-10 SUSP	1	QL(10 ml per 7 day(s) retail; 10 ml per 7 days mail)	<i>prednisolone SOLN</i>	1	
KENALOG-40 SUSP (<i>triamcinolone acetonide</i>)	1	QL(10 ml per 7 day(s) retail; 10 ml per 7 days mail)	<i>prednisolone TABS</i>	1	PA
			PREDNISONONE INTENSOL CONC	1	
			PREDNISONONE POWD	1	
			<i>prednisone SOLN</i>	1	
			<i>prednisone TABS</i>	1	
			<i>prednisone TBPK</i>	1	
			RAYOS TBEC	1	

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SOLU-CORTEF	1		Acne Products		
SOLU-MEDROL (methylprednisolone sod succ)	1		ABSORICA (isotretinoin)	1	QL(2 ea daily); AL(Up to 20 yrs old)
SOLU-MEDROL	1		ABSORICA (isotretinoin)	9	QL(2 ea daily); AL(Up to 20 yrs old)
TARPEYO CPDR	1	QL(4 ea daily); AL(At least 18 yrs old); PA	ABSORICA LD	1	AL(At least 12 yrs old - Up to 20 yrs old); PA
triamcinolone acetonide SUSP 40 MG/ML, 400 MG/10ML	1	QL(10 ml per 7 day(s) retail; 10 ml per 7 days mail)	ACZONE (dapsona topical)	9	
UCERIS TB24 (budesonide)	9	QL(1 ea daily)	adapalene GEL 0.3 %	1	
UCERIS TB24 (budesonide)	1	QL(1 ea daily); PA	AVAR LS CLEANSER LIQD (sulfacetamide sodium w/ sulfur)	9	
ZILRETTA SRER	1		AVAR-E LS CREA (sulfacetamide sodium w/ sulfur)	9	
Mineralocorticoids			CLEOCIN-T LOTN (clindamycin phosphate topical)	1	AL(Up to 20 yrs old)
fludrocortisone acetate TABS	1		CLINDACIN ETZ	1	AL(Up to 20 yrs old); PA
COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms			CLINDAGEL GEL (clindamycin phosphate topical)	1	AL(Up to 20 yrs old); PA
Expectorants			clindamycin phosphate (topical) FOAM	1	AL(Up to 20 yrs old); PA
SSKI SOLN (potassium iodide (expectorant))	1	AL(Up to 20 yrs old); PA	clindamycin phosphate (topical) GEL	1	AL(Up to 20 yrs old)
Misc. Respiratory Inhalants			clindamycin phosphate (topical) GEL	1	AL(Up to 20 yrs old); PA
HYPERSAL NEBU (sodium chloride (inhalant))	9		clindamycin phosphate (topical) LOTN	1	AL(Up to 20 yrs old)
sodium chloride (inhalant) NEBU 7 %	1	AL(Up to 21 yrs old)	clindamycin phosphate (topical) SOLN	1	AL(Up to 20 yrs old)
sodium chloride (inhalant) NEBU 0.9 %, 3 %, 10 %	1		clindamycin phosphate (topical) SWAB	1	AL(Up to 20 yrs old)
Mucolytics			dapsona (topical) 7.5 %	1	AL(At least 9 yrs old - Up to 20 yrs old); PA
ACETYLCYSTEINE POWD	1		dapsona (topical) 5 %	1	AL(Up to 20 yrs old); PA
acetylcysteine SOLN	1		DERMATOLOGICALS - Drugs to Treat Skin Conditions		

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ERYGEL GEL (erythromycin (acne aid))	1	AL(Up to 20 yrs old); PA	gentamicin sulfate (topical) CREA	1	
erythromycin (acne aid) GEL	1	AL(Up to 20 yrs old); PA	gentamicin sulfate (topical) OINT	1	
erythromycin (acne aid) PADS	1	AL(Up to 20 yrs old); PA	mupirocin calcium (topical)	2	
erythromycin (acne aid) SOLN	1	AL(Up to 20 yrs old)	mupirocin OINT	1	
EVOCLIN FOAM (clindamycin phosphate (topical))	9		NEO-SYNALAR	1	QL(60 gm per 30 day(s) retail; 60 gm per 30 days mail); PA
isotretinoin	1	QL(2 ea daily); AL(Up to 20 yrs old)	TETRACYCLINE HCL	1	
KLARON (sulfacetamide sodium (acne))	1	AL(Up to 20 yrs old)	XEPI	2	
sulfacetamide sodium (acne)	1	AL(Up to 20 yrs old)	Antifungals - Topical		
sulfacetamide sodium w/ sulfur CREA 10 %-5 %	1	AL(Up to 20 yrs old)	ciclopirox olamine CREA	1	
sulfacetamide sodium w/ sulfur LIQD 10 %-2 %, 9 %-4 %, 9 %-4.5 %	1	AL(Up to 20 yrs old)	ciclopirox olamine SUSP	1	
sulfacetamide sodium w/ sulfur SUSP 8 %-4 %	1	AL(Up to 20 yrs old)	ciclopirox GEL	2	
SUMADAN KIT	1	AL(Up to 20 yrs old); PA	ciclopirox SHAM	2	
SUMADAN WASH LIQD (sulfacetamide sodium w/ sulfur)	1	AL(Up to 20 yrs old)	ciclopirox SOLN	1	QL(6.6 ml per 30 day(s) retail; 7 ml per 30 days mail); PA
tretinoin CREA 0.025 %, 0.05 %	1	AL(Up to 20 yrs old); PA	clotrimazole (topical) CREA	1	AL(Up to 20 yrs old); RX/OTC
WINLEVI	1	AL(At least 12 yrs old - Up to 20 yrs old); PA	clotrimazole (topical) SOLN	2	RX/OTC
Agents for External Genital and Perianal Warts			clotrimazole w/ betamethasone CREA	1	
VEREGEN	1	QL(30 gm per 30 day(s) retail; 30 gm per 30 days mail)	clotrimazole w/ betamethasone LOTN	2	
Antibiotics - Topical			econazole nitrate CREA	1	
CENTANY AT KIT	2		ERTACZO	2	
CENTANY OINT	1		EXTINA FOAM (ketoconazole (topical))	9	
			JUBLIA	1	QL(4 ml per 30 day(s) retail; 4 ml per 30 days mail); PA
			KERYDIN (tavaborole)	9	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail

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<i>ketoconazole (topical) CREA</i>	1		<i>nystatin (topical) POWD EX</i>	1	4 package(s) per 28 day(s) retail; 4 package(s) per 28 day(s) mail
<i>ketoconazole (topical) FOAM</i>	2		<i>nystatin-triamcinolone CREA</i>	2	
<i>ketoconazole (topical) SHAM 2 %</i>	1	QL(120 ml per 30 day(s) retail; 120 ml per 30 days mail)	<i>nystatin-triamcinolone OINT</i>	2	
LAMISIL AT JOCK ITCH CREA (<i>terbinafine hcl (topical)</i>)	9	AL(Up to 20 yrs old)	<i>oxiconazole nitrate CREA</i>	2	
LAMISIL AT CREA (<i>terbinafine hcl (topical)</i>)	9	AL(Up to 20 yrs old)	OXISTAT CREA (<i>oxiconazole nitrate</i>)	9	
LOPROX SHAMPOO SHAM (<i>ciclopirox</i>)	9		OXISTAT LOTN	2	
LOPROX CREA (<i>ciclopirox olamine</i>)	1		<i>tavaborole</i>	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail; PA
LOPROX SUSP (<i>ciclopirox olamine</i>)	1		<i>terbinafine hcl (topical) CREA</i>	1	AL(Up to 20 yrs old)
LOTRIMIN AF JOCK ITCH CREA (<i>clotrimazole (topical)</i>)	9	RX/OTC	TINACTIN CREA (<i>tolnaftate</i>)	9	
LOTRIMIN AF CREA (<i>clotrimazole (topical)</i>)	9	RX/OTC	<i>tolnaftate CREA</i>	1	AL(Up to 20 yrs old)
<i>luliconazole</i>	2	QL(60 gm per 30 day(s) retail; 60 gm per 30 days mail)	VUSION (<i>miconazole-zinc oxide-white petrolatum</i>)	2	
LUZU (<i>luliconazole</i>)	2	QL(60 gm per 30 day(s) retail; 60 gm per 30 days mail)	Anti-inflammatory Agents - Topical		
<i>miconazole-zinc oxide-white petrolatum</i>	2		<i>diclofenac epolamine PTCH EX</i>	1	Brand Required; QL(30 ea per 15 day(s) retail; 30 ea per 15 days mail); PA
<i>naftifine hcl CREA</i>	2		<i>diclofenac sodium (topical) GEL EX</i>	1	RX/OTC
<i>naftifine hcl GEL 2 %</i>	2		<i>diclofenac sodium (topical) SOLN EX 1.5 %</i>	1	QL(150 ml per 30 day(s) retail; 150 ml per 30 days mail); PA
NAFTIN GEL (<i>naftifine hcl</i>)	2		<i>diclofenac sodium (topical) SOLN EX 2 %</i>	1	QL(112 gm per 28 day(s) retail; 112 gm per 28 days mail); PA
<i>nystatin (topical) CREA</i>	1				
<i>nystatin (topical) OINT</i>	1				

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FLECTOR PTCH EX (diclofenac epolamine)	9	QL(30 ea per 15 day(s) retail; 30 ea per 15 days mail)	PRUDOXIN (doxepin hcl (antipruritic))	1	1 package(s) per 8 day(s) retail; 1 package(s) per 8 day(s) mail; PA
PENNSAID SOLN EX 2 % (diclofenac sodium (topical))	1	QL(112 gm per 30 day(s) retail; 112 gm per 30 days mail); PA	ZONALON (doxepin hcl (antipruritic))	1	1 package(s) per 8 day(s) retail; 1 package(s) per 8 day(s) mail; PA
VOLTAREN ARTHRITIS PAIN GEL EX (diclofenac sodium (topical))	9	RX/OTC	Antipsoriatics		
Antineoplastic or Premalignant Lesion Agents - Topical			<i>acitretin</i>	1	QL(2 ea daily)
AMELUZ GEL	1		BIMZELX SOAJ	1	PA
<i>bexarotene (topical)</i>	1		BIMZELX SOSY	1	PA
CARAC CREA	1	PA	<i>calcipotriene CREA</i>	1	
<i>diclofenac sodium (actinic keratoses) EX</i>	1	PA	CALCIPOTRIENE FOAM	1	QL(120 gm per 30 day(s) retail; 120 gm per 30 days mail); AL(At least 12 yrs old); PA
EFUDEX CREA (fluorouracil (topical))	1		<i>calcipotriene OINT</i>	1	
<i>fluorouracil (topical) CREA 0.5 %</i>	1	PA	<i>calcipotriene SOLN</i>	1	QL(300 ml per 30 day(s) retail; 300 ml per 30 days mail)
<i>fluorouracil (topical) CREA 5 %</i>	1		<i>calcitriol (topical)</i>	1	
<i>fluorouracil (topical) SOLN</i>	1		COSENTYX SENSOREADY PEN SOAJ	1	QL(10 ml per 28 day(s) retail; 10 ml per 28 days mail); PA
LEVULAN KERASTICK SOLR	1		COSENTYX UNOREADY SOAJ	1	QL(2 ml per 28 day(s) retail; 2 ml per 28 days mail); PA
TARGRETIN (<i>bexarotene (topical)</i>)	1		COSENTYX SOLN	1	PA
VALCHLOR	1	QL(60 gm per 30 day(s) retail; 60 gm per 30 days mail)	COSENTYX SOSY 75 MG/0.5ML	1	QL(1 ml per 28 day(s) retail; 1 ml per 28 days mail); AL(At least 6 yrs old - Up to 18 yrs old); PA
Antipruritics - Topical					
<i>doxepin hcl (antipruritic)</i>	1	1 package(s) per 8 day(s) retail; 1 package(s) per 8 day(s) mail; PA			

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COSENTYX SOSY 150 MG/ML	1	QL(10 ml per 28 day(s) retail; 10 ml per 28 days mail); PA	TALTZ SOAJ	1	QL(4 ml per 28 day(s) retail; 4 ml per 28 days mail); PA
ILUMYA	1	QL(1 ml per 84 day(s) retail; 1 ml per 84 days mail); PA	TALTZ SOSY 20 MG/0.25ML, 40 MG/0.5ML	1	AL(At least 6 yrs old - Up to 17 yrs old); PA
<i>methoxsalen rapid</i>	1		TALTZ SOSY 80 MG/ML	1	QL(4 ml per 28 day(s) retail; 4 ml per 28 days mail); PA
SILIQ	1	QL(4.5 ml per 28 day(s) retail; 4 ml per 28 days mail); AL(At least 18 yrs old); PA	<i>tazarotene CREA 0.1 %</i>	1	QL(60 gm per 30 day(s) retail; 60 gm per 30 days mail)
SKYRIZI PEN SOAJ	1	QL(1 ml per 84 day(s) retail; 1 ml per 84 days mail); PA	<i>tazarotene CREA 0.05 %</i>	1	AL(Up to 20 yrs old)
SKYRIZI SOSY	1	QL(1 ml per 84 day(s) retail; 1 ml per 84 days mail); PA	<i>tazarotene GEL</i>	1	QL(100 gm per 30 day(s) retail; 100 gm per 30 days mail); AL(Up to 20 yrs old); PA
SORILUX FOAM	1	QL(120 gm per 30 day(s) retail; 120 gm per 30 days mail); AL(At least 12 yrs old); PA	<i>tazarotene GEL</i>	1	QL(60 gm per 30 day(s) retail; 60 gm per 30 days mail); AL(Up to 20 yrs old); PA
SOTYKTU	1	QL(1 ea daily); AL(At least 18 yrs old); PA	TAZORAC CREA 0.1 % (<i>tazarotene</i>)	9	QL(60 gm per 30 day(s) retail; 60 gm per 30 days mail)
SPEVIGO SOLN	1	AL(At least 12 yrs old); PA	TAZORAC CREA 0.05 % (<i>tazarotene</i>)	9	
SPEVIGO SOSY	1	AL(At least 12 yrs old); PA	TAZORAC GEL (<i>tazarotene</i>)	9	
STELARA SOLN 45 MG/0.5ML	1	QL(0.5 ml per 84 day(s) retail); PA	TREMFYA SOAJ	1	QL(1 ml per 55 day(s) retail; 1 ml per 55 days mail); AL(At least 18 yrs old); PA
STELARA SOSY 90 MG/ML	1	QL(1 ml per 55 day(s) retail; 1 ml per 55 days mail); PA	TREMFYA SOAJ	1	AL(At least 18 yrs old); PA
STELARA SOSY 45 MG/0.5ML	1	QL(0.5 ml per 84 day(s) retail); PA	TREMFYA SOLN	1	AL(At least 18 yrs old); PA

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TREMFYA SOSY 100 MG/ML	1	QL(1 ml per 55 day(s) retail; 1 ml per 55 days mail); AL(At least 18 yrs old); PA	XERESE	1	QL(5 gm per 30 day(s) retail; 5 gm per 30 days mail); PA
TREMFYA SOSY 200 MG/2ML	1	AL(At least 18 yrs old); PA	ZOVIRAX CREA (<i>acyclovir topical</i>)	1	Brand Required; QL(5 gm per 30 day(s) retail; 5 gm per 30 days mail)
VECTICAL (<i>calcitriol topical</i>)	9		ZOVIRAX OINT (<i>acyclovir topical</i>)	1	QL(30 gm per 30 day(s) retail; 30 gm per 30 days mail); PA
VTAMA	1	QL(60 gm per 30 day(s) retail; 60 gm per 30 days mail); AL(At least 18 yrs old); PA	Burn Products		
ZORYVE 0.3 %	1	QL(60 gm per 30 day(s) retail; 60 gm per 30 days mail); AL(At least 6 yrs old); PA	<i>mafenide acetate PACK</i>	1	
Antiseborrheic Products			<i>SILVADENE (silver sulfadiazine)</i>	1	
<i>selenium sulfide LOTN 2.5 %</i>	1		<i>silver sulfadiazine</i>	1	
ZORYVE	1	QL(2 gm daily); AL(At least 6 yrs old); PA	SULFAMYLON CREA	1	QL(113.4 gm per 14 day(s) retail; 113 gm per 14 days mail)
Antivirals - Topical			Cauterizing Agents		
<i>acyclovir topical CREA</i>	1	Brand Required; QL(5 gm per 30 day(s) retail; 5 gm per 30 days mail); PA	SILVER NITRATE SOLN 0.5 %	1	
<i>acyclovir topical OINT</i>	1	QL(30 gm per 30 day(s) retail; 30 gm per 30 days mail); PA	Corticosteroids - Topical		
DENAVIR (<i>penciclovir</i>)	1	QL(5 gm per 30 day(s) retail; 5 gm per 30 days mail); PA	<i>alclometasone dipropionate CREA</i>	1	PA
<i>penciclovir</i>	1	QL(5 gm per 30 day(s) retail; 5 gm per 30 days mail); PA	<i>alclometasone dipropionate OINT</i>	1	PA
			<i>amcinonide CREA</i>	1	PA
			APEXICON E CREA	1	PA
			<i>betamethasone dipropionate (topical) CREA</i>	1	
			<i>betamethasone dipropionate (topical) LOTN</i>	1	
			<i>betamethasone dipropionate (topical) OINT</i>	1	

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<i>betamethasone dipropionate augmented CREA</i>	1		<i>clobetasol propionate GEL 0.05 %</i>	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail; PA
<i>betamethasone dipropionate augmented GEL 0.05 %</i>	1	PA	<i>clobetasol propionate LIQD</i>	1	PA
<i>betamethasone dipropionate augmented LOTN</i>	1	PA	<i>clobetasol propionate LOTN</i>	1	PA
<i>betamethasone dipropionate augmented OINT</i>	1		<i>clobetasol propionate OINT 0.05 %</i>	1	
<i>betamethasone valerate CREA</i>	1		<i>clobetasol propionate SHAM</i>	1	PA
<i>betamethasone valerate FOAM</i>	1	PA	<i>clobetasol propionate SOLN 0.05 %</i>	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail
<i>betamethasone valerate LOTN</i>	1	PA	CLOBEX LIQD (<i>clobetasol propionate</i>)	9	
<i>betamethasone valerate OINT</i>	1		CLOBEX LOTN 0.05 % (<i>clobetasol propionate</i>)	9	
BRYHALI LOTN	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail; PA	CLOBEX SHAM (<i>clobetasol propionate</i>)	9	
<i>calcipotriene-betamethasone dipropionate OINT</i>	1	PA	<i>clocortolone pivalate</i>	1	PA
<i>calcipotriene-betamethasone dipropionate SUSP</i>	1	PA	CLODAN KIT	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); PA
<i>clobetasol propionate emollient base 0.05 %</i>	1		CLODERM (<i>clocortolone pivalate</i>)	1	PA
<i>clobetasol propionate emulsion</i>	1	PA	DERMA-SMOOTHIE/FS BODY OIL (<i>fluocinolone acetoneide</i>)	1	QL(118.28 ml per 15 day(s) retail; 118 ml per 15 days mail); PA
<i>clobetasol propionate CREA 0.05 %</i>	1		DERMA-SMOOTHIE/FS SCALP OIL (<i>fluocinolone acetoneide</i>)	9	Brand Required; QL(118.28 ml per 15 day(s) retail; 118 ml per 15 days mail)
<i>clobetasol propionate FOAM</i>	1				

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DERMA-SMOOTH/FS SCALP OIL (<i>fluocinolone acetonide</i>)	1	Brand Required; QL(118.28 ml per 15 day(s) retail; 118 ml per 15 days mail); PA	<i>fluocinolone acetonide OIL</i>	1	Brand Required; QL(118.28 ml per 15 day(s) retail; 118 ml per 15 days mail); PA
<i>desonide CREA</i>	1		<i>fluocinolone acetonide OINT</i>	1	PA
<i>desonide LOTN</i>	1	PA	<i>fluocinolone acetonide SOLN</i>	1	
<i>desonide OINT</i>	1		<i>fluocinonide emulsified base</i>	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail; PA
DESOWEN CREA (<i>desonide</i>)	9		<i>fluocinonide CREA</i>	1	
<i>desoximetasone CREA 0.05 %</i>	1	PA	<i>fluocinonide GEL</i>	1	PA
<i>desoximetasone CREA 0.25 %</i>	1		<i>fluocinonide OINT</i>	1	
<i>desoximetasone GEL</i>	1	PA	<i>fluocinonide SOLN</i>	1	
<i>desoximetasone LIQD</i>	1	QL(100 ml per 30 day(s) retail; 100 ml per 30 days mail); PA	<i>flurandrenolide LOTN</i>	1	QL(120 ml per 30 day(s) retail; 120 ml per 30 days mail); PA
<i>desoximetasone OINT 0.25 %</i>	1		<i>fluticasone propionate CREA 0.05 %</i>	1	
<i>desoximetasone OINT 0.05 %</i>	1	PA	<i>fluticasone propionate LOTN</i>	1	QL(120 ml per 30 day(s) retail; 120 ml per 30 days mail); PA
<i>diflorasone diacetate CREA</i>	1	PA	<i>fluticasone propionate OINT</i>	1	
<i>diflorasone diacetate OINT</i>	1	PA	<i>halcinonide CREA</i>	1	PA
DIPROLENE OINT (<i>betamethasone dipropionate augmented</i>)	1		<i>halobetasol propionate CREA</i>	1	
DUOBRII	1	QL(100 gm per 30 day(s) retail; 100 gm per 30 days mail); PA	<i>halobetasol propionate FOAM</i>	1	QL(50 gm per 30 day(s) retail; 50 gm per 30 days mail); AL(At least 18 yrs old); PA
ENSTILAR FOAM	1	QL(60 gm per 30 day(s) retail; 60 gm per 30 days mail); AL(At least 18 yrs old); PA	<i>halobetasol propionate OINT</i>	1	
EPIFOAM FOAM	1		HALOG CREA (<i>halcinonide</i>)	1	PA
<i>fluocinolone acetonide CREA</i>	1	PA			

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HALOG SOLN	1	PA	<i>mometasone furoate SOLN</i>	1	
<i>hydrocortisone (topical) CREA 1 %, 2.5 %</i>	1	RX/OTC	<i>OLUX-E (clobetasol propionate emulsion)</i>	9	
<i>hydrocortisone (topical) LOTN 2.5 %</i>	1		<i>OLUX FOAM (clobetasol propionate)</i>	9	
<i>hydrocortisone (topical) OINT 1 %, 2.5 %</i>	1	RX/OTC	PANDEL	1	PA
<i>hydrocortisone butyrate hydrophilic lipo base</i>	1	PA	<i>prednicarbate OINT</i>	1	PA
<i>hydrocortisone butyrate CREA</i>	1	PA	SYNALAR CREAM KIT	1	PA
<i>hydrocortisone butyrate LOTN</i>	1	PA	SYNALAR OINTMENT KIT	1	PA
<i>hydrocortisone butyrate OINT</i>	1	PA	SYNALAR TS	1	PA
<i>hydrocortisone butyrate SOLN</i>	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail; PA	SYNALAR CREA (<i>fluocinolone acetonide</i>)	1	PA
<i>hydrocortisone valerate CREA</i>	1		SYNALAR OINT (<i>fluocinolone acetonide</i>)	1	PA
<i>hydrocortisone valerate OINT</i>	1	PA	SYNALAR SOLN (<i>fluocinolone acetonide</i>)	1	
KENALOG AERS (<i>triamcinolone acetonide (topical)</i>)	9		TACLONEX OINT (<i>calcipotriene-betamethasone dipropionate</i>)	1	PA
LEXETTE FOAM (<i>halobetasol propionate</i>)	9	QL(50 gm per 30 day(s) retail; 50 gm per 30 days mail); AL(At least 18 yrs old)	TACLONEX SUSP (<i>calcipotriene-betamethasone dipropionate</i>)	1	PA
LOCOID LIPOCREAM	1	PA	TEXACORT SOLN 2.5 %	1	QL(30 ml per 30 day(s) retail; 30 ml per 30 days mail); PA
LOCOID LOTN (<i>hydrocortisone butyrate</i>)	1	PA	TOPICORT CREA 0.25 % (<i>desoximetasone</i>)	1	
LUXIQ FOAM (<i>betamethasone valerate</i>)	9		TOPICORT CREA 0.05 % (<i>desoximetasone</i>)	9	
<i>mometasone furoate CREA</i>	1		TOPICORT GEL (<i>desoximetasone</i>)	1	PA
<i>mometasone furoate OINT</i>	1		TOPICORT LIQD (<i>desoximetasone</i>)	9	QL(100 ml per 30 day(s) retail; 100 ml per 30 days mail)
			TOPICORT OINT (<i>desoximetasone</i>)	9	
			<i>triamcinolone acetonide (topical) AERS</i>	1	PA

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<i>triamcinolone acetonide (topical) CREA</i>	1	
<i>triamcinolone acetonide (topical) LOTN</i>	1	
<i>triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %, 0.5 %</i>	1	
<i>triamcinolone acetonide (topical) OINT 0.05 %</i>	1	PA
TRIAMCINOLONE ACETONIDE POWD	1	
TRIAMCINOLONE ACETONIDEUSP, MICRONIZED POWD	1	
TRIDESILON CREA 0.05 % (<i>desonide</i>)	9	
ULTRAVATE LOTN	1	QL(60 ml per 30 day(s) retail; 60 ml per 30 days mail); AL(At least 18 yrs old); PA
VANOS CREA (<i>fluocinonide</i>)	1	
Eczema Agents		
ADBRY SOAJ	1	AL(At least 18 yrs old); PA
ADBRY SOSY	1	QL(4 ml per 28 day(s) retail; 4 ml per 28 days mail); AL(At least 12 yrs old); PA
CIBINQO	1	QL(1 ea daily); AL(At least 12 yrs old); PA
DUPIXENT SOAJ SC 300 MG/2ML	1	QL(4 ml per 28 day(s) retail; 4 ml per 28 days mail); PA
DUPIXENT SOAJ SC 200 MG/1.14ML	1	QL(2.28 ml per 28 day(s) retail; 2 ml per 28 days mail); PA

Drug Name	Drug Tier	Requirements/Limits
DUPIXENT SOSY 100 MG/0.67ML	1	QL(1.34 ml per 28 day(s) retail; 1 ml per 28 days mail); PA
DUPIXENT SOSY 300 MG/2ML	1	QL(4 ml per 28 day(s) retail; 4 ml per 28 days mail); PA
DUPIXENT SOSY 200 MG/1.14ML	1	QL(2.28 ml per 28 day(s) retail; 2 ml per 28 days mail); PA
EBGLYSS	1	AL(At least 12 yrs old); PA
OPZELURA	1	1 package(s) per 7 day(s) retail; 1 package(s) per 7 day(s) mail; AL(At least 12 yrs old); PA
Emollient/Keratolytic Agents		
<i>urea CREA 39 %, 40 %</i>	1	RX/OTC
Emollients		
<i>lactic acid (ammonium lactate) CREA</i>	1	RX/OTC
<i>lactic acid (ammonium lactate) LOTN 12 %</i>	1	RX/OTC
Enzymes - Topical		
SANTYL OINT	1	AL(Up to 20 yrs old); PA
Hair Growth Agents		
LITFULO	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); AL(At least 12 yrs old - Up to 20 yrs old); PA
Immunomodulating Agents - Topical		
<i>imiquimod 5 %</i>	1	QL(0.4 ea daily)
<i>imiquimod 3.75 %</i>	1	AL(At least 13 yrs old); PA

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ZYCLARA (<i>imiquimod</i>)	1	AL(At least 13 yrs old); PA	CONDYLOX GEL (<i>podofilox</i>)	1	QL(3.5 gm per fill retail)
ZYCLARA PUMP (<i>imiquimod</i>)	1	AL(At least 13 yrs old); PA	PODOCON-25 SOLN	1	
ZYCLARA PUMP	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail; AL(At least 13 yrs old); PA	<i>podofilox GEL</i>	1	QL(3.5 gm per fill retail)
Immunosuppressive Agents - Topical			<i>podofilox SOLN</i>	1	QL(3.5 ml per fill retail)
ELIDEL (<i>pimecrolimus</i>)	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail; AL(At least 2 yrs old)	SALICYLIC ACID OINT	1	PA; RX/OTC
HYFTOR	1	QL(30 gm per 35 day(s) retail; 30 gm per 35 days mail); AL(At least 6 yrs old - Up to 20 yrs old); PA	SALYCIM CREA	1	AL(Up to 20 yrs old)
<i>pimecrolimus</i>	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail; AL(At least 2 yrs old)	YCANTH SOLN	1	
<i>tacrolimus (topical) OINT 0.03 %</i>	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail; AL(At least 2 yrs old)	Local Anesthetics - Topical		
<i>tacrolimus (topical) OINT 0.1 %</i>	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail; AL(At least 15 yrs old)	GEN7T PTCH (<i>lidocaine</i>)	9	RX/OTC
Keratolytic/Antimitotic/Vesicant Agents			<i>lidocaine hcl CREA 3 %</i>	1	
			<i>lidocaine hcl PRSY</i>	1	
			<i>lidocaine hcl SOLN</i>	1	
			<i>lidocaine OINT</i>	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail
			<i>lidocaine-prilocaine CREA</i>	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail
			<i>lidocaine PTCH 5 %</i>	1	QL(90 ea per 30 day(s) retail; 90 ea per 30 days mail)
			LIDODERM PTCH (<i>lidocaine</i>)	9	QL(90 ea per 30 day(s) retail; 90 ea per 30 days mail)
			LIDODERM PTCH (<i>lidocaine</i>)	1	QL(90 ea per 30 day(s) retail; 90 ea per 30 days mail)
			QUTENZA	1	QL(4 ea per 90 day(s) retail; 4 ea per 90 days mail)
			ZTLIDO PTCH	1	QL(90 ea per 30 day(s) retail; 90 ea per 30 days mail); PA

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Misc. Topical		
DRYSOL SOLN	1	AL(Up to 20 yrs old); PA
XERAC AC	1	AL(Up to 20 yrs old)
Phosphodiesterase 4 (PDE4) Inhibitors - Topical		
EUCRISA	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail; PA
ZORYVE 0.15 %	1	AL(At least 6 yrs old); PA
Protectives Against UV Radiation		
SCENESSE	1	
Rosacea Agents		
<i>brimonidine tartrate (topical)</i>	1	QL(30 gm per 30 day(s) retail; 30 gm per 30 days mail); AL(At least 18 yrs old - Up to 20 yrs old); PA
<i>doxycycline (rosacea)</i>	1	PA
METROCREAM CREA (<i>metronidazole (topical)</i>)	9	AL(Up to 20 yrs old)
METROGEL GEL 1 % (<i>metronidazole (topical)</i>)	9	
METROLOTION LOTN (<i>metronidazole (topical)</i>)	9	AL(Up to 20 yrs old)
<i>metronidazole (topical) CREA</i>	1	AL(Up to 20 yrs old)
<i>metronidazole (topical) GEL 0.75 %</i>	1	AL(Up to 20 yrs old)
<i>metronidazole (topical) GEL 1 %</i>	1	AL(Up to 20 yrs old); PA
<i>metronidazole (topical) LOTN</i>	1	AL(Up to 20 yrs old)
MIRVASO (<i>brimonidine tartrate (topical)</i>)	9	QL(30 gm per 30 day(s) retail; 30 gm per 30 days mail)

Drug Name	Drug Tier	Requirements/Limits
NORITATE CREA	1	AL(Up to 20 yrs old); PA
ORACEA (<i>doxycycline (rosacea)</i>)	9	
Scabicides & Pediculicides		
<i>crotamiton LOTN</i>	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail; AL(At least 18 yrs old); PA
<i>ivermectin (pediculicide)</i>	1	QL(117 gm per fill retail); PA
<i>malathion</i>	1	1 package(s) per 7 day(s) retail; 1 package(s) per 7 day(s) mail; AL(At least 6 yrs old); PA
NATROBA (<i>spinosad</i>)	1	Brand Required; 1 package(s) per 7 day(s) retail; 1 package(s) per 7 day(s) mail; AL(At least 1 yrs old)
NIX CREME RINSE LIQD EX (<i>permethrin</i>)	9	2 package(s) per 7 day(s) retail; 2 package(s) per 7 day(s) mail
OVIDE (<i>malathion</i>)	9	1 package(s) per 7 day(s) retail; 1 package(s) per 7 day(s) mail
<i>permethrin CREA</i>	1	1 package(s) per 7 day(s) retail; 1 package(s) per 7 day(s) mail

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<i>permethrin LIQD EX</i>	1	2 package(s) per 7 day(s) retail; 2 package(s) per 7 day(s) mail; AL(Up to 20 yrs old)	<i>dipyridamole (diagnostic)</i>	1	
SKLICE (<i>ivermectin (pediculicide)</i>)	1	QL(117 gm per fill retail); PA	GLEOLAN	1	
<i>spinosad</i>	1	1 package(s) per 7 day(s) retail; 1 package(s) per 7 day(s) mail; PA	GLUCAGON	1	
<i>spinosad</i>	1	Brand Required; 1 package(s) per 7 day(s) retail; 1 package(s) per 7 day(s) mail; AL(At least 1 yrs old); PA	GLUCAGON HCL DIAGNOSTIC	1	
VANALICE GEL	1	AL(Up to 18 yrs old)	LEXISCAN (<i>regadenoson</i>)	1	
Wound Care Products			MACRILEN	1	
FILSUVEZ	1	PA	METOPIRONE	1	
VASHE WOUND THERAPY SOLN	1	AL(Up to 20 yrs old); PA; RX/OTC	<i>regadenoson</i>	1	
VYJUVEK	1	QL(10 ml per 28 day(s) retail; 10 ml per 28 days mail); PA	R-GENE 10	1	
DIAGNOSTIC PRODUCTS			SINCALIDE	1	
Diagnostic Biologicals			SINCALIDE	1	
APLISOL	1	QL(0.1 ml per fill retail)	THYROGEN 0.9 MG	1	
Diagnostic Drugs			Diagnostic Radiopharmaceuticals		
<i>adenosine (diagnostic)</i>	1		AMYVID	1	
BLUDIGO IV	1		AXUMIN	1	
CORTROSYN SOLR (<i>cosyntropin</i>)	1		ILLUCCIX CONFIGURATION A KIT	1	
<i>cosyntropin SOLR</i>	1		ILLUCCIX CONFIGURATION B KIT	1	
			LOCAMETZ KIT	1	
			NEUROLITE	1	
			POSLUMA	1	
			PYLARIFY	1	
			TAUVID	1	
			XENON XE 133	1	
			Diagnostic Tests		
			ACCU-CHEK GUIDE TEST STRIPS STRP	1	PA; RX/OTC
			ACCU-CHEK GUIDE STRP	1	PA; RX/OTC
			CONTOUR NEXT BLOOD GLUCOSE TEST STRP	1	PA; RX/OTC
			EASYMAX TEST STRIPS STRP	1	PA; RX/OTC

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KETONE TEST STRIPS STRP	1	QL(100 ea per 30 day(s) retail; 100 ea per 30 days mail)	GADAVIST SOLN (<i>gadobutrol</i>)	1	
KETONE STRP	1	QL(100 ea per 30 day(s) retail; 100 ea per 30 days mail)	GADAVIST SOLN (<i>gadobutrol</i>)	9	
KETOSTIX STRP	1	QL(100 ea per 30 day(s) retail; 100 ea per 30 days mail)	GADAVIST SOSY 10 MMOL/10ML, 15 MMOL/15ML	1	
ONETOUCH ULTRA BLUE TESTSTRIP STRP	1	RX/OTC	<i>gadobutrol</i> SOLN	1	
ONETOUCH ULTRA STRP	1	RX/OTC	<i>gadoterate meglumine</i> SOLN	1	
ONETOUCH VERIO TEST STRIPS STRP	1	RX/OTC	<i>gadoterate meglumine</i> SOSY	1	
PRECISION XTRA	1	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); AL(Up to 4 yrs old)	OMNISCAN SOLN IV	1	
PRODIGY NO CODING BLOOD GLUCOSE TEST STRIPS STRP	1	PA; RX/OTC	Radiographic Contrast Media		
RELION KETONE TEST STRIPS STRP	1	QL(100 ea per 30 day(s) retail; 100 ea per 30 days mail)	<i>diatrizoate meglumine & sodium</i> OR	1	
RELION TRUE METRIX BLOODGLUCOSE TEST STRIPS STRP	1	RX/OTC	GASTROGRAFIN OR (<i>diatrizoate meglumine & sodium</i>)	9	
TRUE METRIX BLOOD GLUCOSE TEST STRIPS STRP	1	RX/OTC	<i>iopamidol</i> IV	1	
Miscellaneous Contrast Media			ISOVUE-200 IV (<i>iopamidol</i>)	9	
DEFINITY RT	1		ISOVUE-250 IV (<i>iopamidol</i>)	9	
DOTAREM SOLN (<i>gadoterate meglumine</i>)	9		ISOVUE-300 IV (<i>iopamidol</i>)	9	
DOTAREM SOSY (<i>gadoterate meglumine</i>)	9		ISOVUE-370 IV (<i>iopamidol</i>)	9	
EOVIST	1		ISOVUE-M 200 IJ (<i>iopamidol</i>)	9	
			ISOVUE-M 300 IJ (<i>iopamidol</i>)	9	
			OMNIPAQUE SOLN CO 350 MG/ML	1	
DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS					
Dietary Management Products					
			DEPLIN 7.5	1	QL(1 ea daily); AL(Up to 20 yrs old); PA
			NEOPHE POWD	1	RX/OTC

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NEOPHE TABS	1	RX/OTC	GLYTACTIN RTD 15 LIQD OR	1	RX/OTC
URE-NA	1	AL(Up to 20 yrs old); PA	GLYTACTIN RTD LITE 15 LIQD OR	1	RX/OTC
Infant Foods			GLYTACTIN SWIRL 15 PACK	1	RX/OTC
PERIFLEX INFANT POWD	1		GLYTACTIN SWIRL 15PE PACK	1	RX/OTC
PHENYL-FREE 1 POWD	1		LANAFLEX PACK	1	RX/OTC
Nutritional Supplements			LOPHLEX LQ 20 LIQD OR	1	RX/OTC
CAMINO PRO COMPLETE/GLYTACTIN BAR	1	RX/OTC	LOPHLEX PACK	1	RX/OTC
EAA SUPPLEMENT PACK	1	RX/OTC	PERIFLEX ADVANCE POWD	1	RX/OTC
FLAVOR PACKETS PACK	1	AL(Up to 20 yrs old)	PERIFLEX JUNIOR POWD	1	RX/OTC
GLYTACTIN BETTERMILK 15 PACK	1	RX/OTC	PHENEX-1 POWD	1	RX/OTC
GLYTACTIN BETTERMILK DE-LITE PACK	1	RX/OTC	PHENEX-2 POWD	1	RX/OTC
GLYTACTIN BETTERMILK POWD	1	RX/OTC	PHENYLADE DRINK MIX POWD	1	RX/OTC
GLYTACTIN BUILD 10PE PACK	1	RX/OTC	PHENYLADE ESSENTIAL DRINK MIX/FLAX/FIBER PACK	1	RX/OTC
GLYTACTIN BUILD 20/20 PKU PACK	1	RX/OTC	PHENYLADE ESSENTIAL DRINK MIX/FLAX/FIBER POWD	1	RX/OTC
GLYTACTIN BUILD 20/20 PACK	1	RX/OTC	PHENYLADE ESSENTIAL DRINK MIX PACK	1	RX/OTC
GLYTACTIN BURST PACK	1	RX/OTC	PHENYLADE ESSENTIAL DRINK MIX POWD	1	RX/OTC
GLYTACTIN COMPLETE 10PE BAR	1	RX/OTC	PHENYLADE GMP DRINK MIX/DHA/FIBER POWD	1	RX/OTC
GLYTACTIN RESTORE 10 LIQD OR	1	RX/OTC	PHENYLADE GMP MIX-IN PACK	1	RX/OTC
GLYTACTIN RESTORE 5 PACK	1	RX/OTC	PHENYLADE GMP MIX-IN POWD	1	RX/OTC
GLYTACTIN RESTORE LITE 10 LIQD OR	1	RX/OTC	PHENYLADE GMP READY LIQD OR	1	RX/OTC
GLYTACTIN RESTORE LITE 10PE PACK	1	RX/OTC	PHENYLADE GMP ULTRA PACK	1	RX/OTC
GLYTACTIN RTD 10 LIQD OR	1	RX/OTC	PHENYLADE GMP PACK	1	RX/OTC

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PHENYLADE GMP POWD	1	RX/OTC	PKU LOPHLEX LQ 20 LIQD OR	1	RX/OTC
PHENYLADE RTD PKU 10 LIQD OR	1	RX/OTC	PKU PERIFLEX JUNIOR PLUS POWD	1	RX/OTC
PHENYLADE60 DRINK MIX PACK	1	RX/OTC	PKU SPHERE 15 PACK	1	RX/OTC
PHENYLADE60 DRINK MIX POWD	1	RX/OTC	PKU SPHERE 20 LIQD OR	1	RX/OTC
PHENYL-FREE 2HP POWD	1	RX/OTC	PKU SPHERE 20 PACK	1	RX/OTC
PHENYL-FREE 2 POWD	1	RX/OTC	PKU START POWD	1	RX/OTC
PHLEXY-10 PACK	1	RX/OTC	PKU TRIO POWD	1	RX/OTC
PKU 2 POWD	1	RX/OTC	TYR EASY TABS	1	RX/OTC
PKU 3 POWD	1	RX/OTC	XPHE MAXAMAID POWD	1	RX/OTC
PKU AIR20 GOLD LIQD OR	1	RX/OTC	XPHE-XTYR MAXAMAID POWD	1	RX/OTC
PKU AIR20 GREEN LIQD OR	1	RX/OTC	DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes		
PKU AIR20 YELLOW LIQD OR	1	RX/OTC	Digestive Enzymes		
PKU COOLER 10 LIQD OR	1	RX/OTC	CREON CPEP	1	
PKU COOLER 15 LIQD OR	1	RX/OTC	PANCREAZE CPEP 83900 UNIT-54700 UNIT-21000 UNIT	1	AL(Up to 20 yrs old); PA
PKU COOLER 20 LIQD OR	1	RX/OTC	PERTZYE CPEP	1	PA
PKU EASY MICROTABS PLUS TBEC	1	RX/OTC	SUCRAID	1	AL(Up to 20 yrs old); PA
PKU EASY MICROTABS TBEC	1	RX/OTC	VIOKACE TABS	1	PA
PKU EASY SHAKE & GO POWD	1	RX/OTC	ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 252600 UNIT-189600 UNIT-60000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	1	
PKU EASY TABS	1	RX/OTC	DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure		
PKU EXPLORE10 PACK	1	RX/OTC	Carbonic Anhydrase Inhibitors		
PKU EXPLORE5 PACK	1	RX/OTC			
PKU EXPRESS 15 PLUS+ PACK	1	RX/OTC			
PKU EXPRESS 20 PLUS+ PACK	1	RX/OTC			
PKU GEL PACK	1	RX/OTC			
PKU GO PACK	1	RX/OTC			

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Drug Name	Drug Tier	Requirements/Limits
<i>acetazolamide sodium</i>	1	
<i>acetazolamide CP12</i>	1	
<i>acetazolamide TABS</i>	1	
<i>dichlorphenamide</i>	1	QL(4 ea daily); PA
KEVEYIS (<i>dichlorphenamide</i>)	1	QL(4 ea daily); PA
<i>methazolamide TABS 50 MG</i>	1	QL(6 ea daily); PA
<i>methazolamide TABS 25 MG</i>	1	QL(12 ea daily); PA
Diuretic Combinations		
ALDACTAZIDE (<i>spironolactone & hydrochlorothiazide</i>)	9	MP
<i>amiloride & hydrochlorothiazide</i>	1	
MAXZIDE-25 TABS (<i>triamterene & hydrochlorothiazide</i>)	9	
MAXZIDE TABS (<i>triamterene & hydrochlorothiazide</i>)	9	
<i>spironolactone & hydrochlorothiazide</i>	1	MP
<i>triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG</i>	1	
<i>triamterene & hydrochlorothiazide TABS</i>	1	
Loop Diuretics		
<i>bumetanide SOLN 0.25 MG/ML</i>	1	
<i>bumetanide TABS</i>	1	
BUMEX TABS 0.5 MG (<i>bumetanide</i>)	9	
EDECIN (<i>ethacrynic acid</i>)	1	
<i>ethacrynate sodium</i>	1	
<i>ethacrynic acid</i>	1	

Drug Name	Drug Tier	Requirements/Limits
FUROSCIX CTKT	1	AL(At least 18 yrs old); PA
<i>furosemide SOLN IJ 10 MG/ML</i>	1	
<i>furosemide TABS 20 MG</i>	1	QL(30 ea daily); MP
<i>furosemide TABS 40 MG</i>	1	QL(15 ea daily); MP
<i>furosemide TABS 80 MG</i>	1	QL(8 ea daily); MP
LASIX TABS 20 MG (<i>furosemide</i>)	1	QL(30 ea daily); MP
LASIX TABS 40 MG (<i>furosemide</i>)	1	QL(15 ea daily); MP
LASIX TABS 80 MG (<i>furosemide</i>)	1	QL(8 ea daily); MP
SODIUM EDECIN (<i>ethacrynate sodium</i>)	9	
<i>torseamide TABS 100 MG</i>	1	QL(2 ea daily); MP
<i>torseamide TABS 5 MG, 10 MG, 20 MG</i>	1	QL(10 ea daily); MP
Osmotic Diuretics		
<i>mannitol 10 %, 20 %, 25 %</i>	1	
Potassium Sparing Diuretics		
ALDACTONE TABS (<i>spironolactone</i>)	1	MP
<i>amiloride hcl TABS</i>	1	
CAROSPIR SUSP (<i>spironolactone</i>)	1	QL(473 ml per 30 day(s) retail; 473 ml per 30 days mail); PA
DYRENIUM CAPS (<i>triamterene</i>)	9	
SPIRONOLACTONE POWD	1	
<i>spironolactone SUSP</i>	1	QL(473 ml per 30 day(s) retail; 473 ml per 30 days mail)
<i>spironolactone TABS</i>	1	MP
<i>triamterene CAPS</i>	1	

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Thiazides and Thiazide-Like Diuretics			<i>alendronate sodium SOLN</i>	1	QL(300 ml per 28 day(s) retail; 300 ml per 28 days mail); PA
<i>chlorothiazide sodium</i>	1		<i>alendronate sodium TABS 10 MG</i>	1	QL(1 ea daily); MP
<i>chlorthalidone 25 MG, 50 MG</i>	1		<i>alendronate sodium TABS 35 MG</i>	1	QL(12 ea per 84 day(s) retail; 12 ea per 84 days mail)
DIURIL SUSP	1		<i>alendronate sodium TABS 70 MG</i>	1	QL(13 ea per 90 day(s) retail; 13 ea per 90 days mail); MP
<i>hydrochlorothiazide CAPS</i>	1	QL(3 ea daily); MP	ATELVIA TBEC (<i>risedronate sodium</i>)	1	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); PA
<i>hydrochlorothiazide TABS 25 MG, 50 MG</i>	1	QL(3 ea daily); MP	BINOSTO TBEF	1	PA
<i>hydrochlorothiazide TABS 12.5 MG</i>	1		<i>calcitonin (salmon) NA</i>	1	QL(3.7 ml per 30 day(s) retail; 4 ml per 30 days mail)
<i>indapamide TABS 1.25 MG, 2.5 MG</i>	1	QL(2 ea daily); MP	<i>calcitonin (salmon) IJ</i>	1	
<i>metolazone</i>	1		EVENITY	1	QL(2.34 ml per 30 day(s) retail; 2 ml per 30 days mail); PA
SODIUM DIURIL (<i>chlorothiazide sodium</i>)	9		FORTEO SOPN (<i>teriparatide</i>)	1	QL(2.4 ml per 28 day(s) retail; 2 ml per 28 days mail); PA
THALITONE	1		FOSAMAX PLUS D	1	PA
ENDOCRINE AND METABOLIC AGENTS - MISC.			FOSAMAX TABS 70 MG (<i>alendronate sodium</i>)	1	QL(13 ea per 90 day(s) retail; 13 ea per 90 days mail); MP
- Drugs to Treat Bone Disease and Regulate Hormones			<i>ibandronate sodium SOLN</i>	1	QL(3 ml per 90 day(s) retail; 3 ml per 90 days mail); PA
Adrenal Steroid Inhibitors			<i>ibandronate sodium TABS</i>	1	1 package(s) per 84 day(s) retail; 1 package(s) per 84 day(s) mail
ISTURISA 10 MG	1	QL(6 ea daily); PA	MIACALCIN IJ (<i>calcitonin (salmon)</i>)	1	
ISTURISA 5 MG	1	QL(2 ea daily); PA			
ISTURISA 1 MG	1	QL(8 ea daily); PA			
RECORLEV	1	QL(250 ea per 30 day(s) retail; 250 ea per 30 days mail); AL(At least 18 yrs old); PA			
Bone Density Regulators					
ACTONEL TABS 35 MG (<i>risedronate sodium</i>)	2	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail)			
ACTONEL TABS 150 MG (<i>risedronate sodium</i>)	2	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail)			

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<i>pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML</i>	1		<i>zoledronic acid SOLN 5 MG/100ML</i>	1	QL(100 ml per 365 day(s) retail; 100 ml per 365 days mail)
PAMIDRONATE DISODIUM SOLN	1		ZOLEDRONIC ACID SOLN	1	
PROLIA SOSY	1	QL(1 ml per 180 day(s) retail; 1 ml per 180 days mail); PA	Corticotropin		
RECLAST SOLN (<i>zoledronic acid</i>)	1	QL(100 ml per 365 day(s) retail; 100 ml per 365 days mail)	ACTHAR GEL AUIJ	1	PA
<i>risedronate sodium TABS 5 MG</i>	2	QL(1 ea daily)	ACTHAR GEL	1	PA
<i>risedronate sodium TABS 150 MG</i>	2	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail)	CORTROPHIN GEL	1	PA
<i>risedronate sodium TABS 35 MG</i>	2	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail)	Fertility Regulators		
<i>risedronate sodium TABS 30 MG</i>	1	QL(1 ea daily); PA	CHORIONIC GONADOTROPIN IM	1	AL(At least 4 yrs old - Up to 10 yrs old); PA
<i>risedronate sodium TBEC</i>	1	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); PA	NOVAREL IM 5000 UNIT	1	AL(At least 4 yrs old - Up to 10 yrs old); PA
<i>teriparatide SOPN</i>	1	QL(2.4 ml per 28 day(s) retail; 2 ml per 28 days mail); PA	PREGNYL IM	1	AL(At least 4 yrs old - Up to 10 yrs old); PA
TERIPARATIDE SOPN	1	QL(2.48 ml per 28 day(s) retail; 2 ml per 28 days mail); PA	PREGNYL W/DILUENT BENZYLALCOHOL/NACL IM	1	AL(At least 4 yrs old - Up to 10 yrs old); PA
TYMLOS	1	QL(1.56 ml per 30 day(s) retail; 2 ml per 30 days mail); PA	GnRH/LHRH Antagonists		
XGEVA SOLN	1		ORILISSA 200 MG	1	QL(2 ea daily); AL(At least 18 yrs old); PA
<i>zoledronic acid CONC</i>	1		ORILISSA 150 MG	1	QL(1 ea daily); AL(At least 18 yrs old); PA
<i>zoledronic acid SOLN 4 MG/100ML</i>	1		Growth Hormone Receptor Antagonists		
			SOMAVERT	1	
			Growth Hormones		
			GENOTROPIN MINIQUICK PRSY	1	PA
			GENOTROPIN CART SC	1	PA
			HUMATROPE CART IJ	1	PA
			NGENLA	1	PA
			NORDITROPIN FLEXPRO SOPN	1	PA

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NUTROPIN AQ NUSPIN 10 SOPN	1	PA	SYNAREL	1	QL(40 ml per 28 day(s) retail; 40 ml per 28 days mail); AL(Up to 16 yrs old); PA
NUTROPIN AQ NUSPIN 20 SOPN	1	PA			
NUTROPIN AQ NUSPIN 5 SOPN	1	PA			
OMNITROPE SOCT	1	PA	TRIPTODUR	1	QL(1 ea per 168 day(s) retail; 1 ea per 168 days mail); AL(At least 2 yrs old - Up to 14 yrs old); PA
OMNITROPE SOLR SC	1	PA			
SAIZEN IJ 5 MG	1	PA	Menopausal Symptoms Suppressants		
SEROSTIM SC 4 MG, 5 MG, 6 MG	1	PA	VEOZAH	1	QL(1 ea daily); AL(At least 18 yrs old); PA
SKYTROFA	1	PA	Metabolic Modifiers		
SOGROYA	1	PA	ALDURAZYME	1	PA
ZOMACTON SOLR SC	1	PA	AMMONUL (sod benzoate & sod phenylacetate)	1	
Hormone Receptor Modulators			betaine	1	
EVISTA (raloxifene hcl)	1		BRINEURA	1	PA
EVISTA (raloxifene hcl)	9		BUPHENYL POWD (sodium phenylbutyrate)	1	
raloxifene hcl	1		BUPHENYL TABS (sodium phenylbutyrate)	1	
Insulin-Like Growth Factor Receptor Inhibitors			calcitriol CAPS	1	
TEPEZZA	1	PA	calcitriol SOLN IV	1	
Insulin-Like Growth Factors (Somatomedins)			CARBAGLU (carglumic acid)	1	Brand Required; PA
INCRELEX	1	PA	carglumic acid	1	Brand Required; PA
LHRH/GnRH Agonist Analog Pituitary Suppressants			CARNITOR SF SOLN OR (levocarnitine (metabolic modifiers))	1	
FENSOLVI SC	1	QL(1 ea per 180 day(s) retail; 1 ea per 180 days mail); AL(At least 2 yrs old); PA	CARNITOR SOLN OR 1 GM/10ML (levocarnitine (metabolic modifiers))	1	
LUPRON DEPOT-PED (1-MONTH)	1	PA	CARNITOR TABS (levocarnitine (metabolic modifiers))	1	
LUPRON DEPOT-PED (3-MONTH)	1	PA	cinacalcet hcl	1	
LUPRON DEPOT-PED (6-MONTH) IM	1	QL(1 ea per 180 day(s) retail; 1 ea per 180 days mail); PA			
SUPPRELIN LA	1				

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CRYSVITA	1	AL(At least 1 yrs old); PA	NULIBRY	1	PA
CYSTADANE (<i>betaine</i>)	1		OLPRUVA THPK 3 GM, 4 GM, 5 GM, 6 GM, 6.67 GM	1	QL(90 ea per 30 day(s) retail; 90 ea per 30 days mail); PA
<i>doxercalciferol CAPS</i>	1	PA	OPFOLDA	1	AL(At least 18 yrs old); PA
<i>doxercalciferol SOLN</i>	1		ORFADIN CAPS (<i>nitisinone</i>)	1	
ELAPRASE	1	PA	ORFADIN SUSP	1	
ELFABRIO	1	AL(At least 18 yrs old); PA	PALYNZIQ 20 MG/ML	1	QL(60 ml per 30 day(s) retail; 60 ml per 30 days mail); PA
FABRAZYME	1	PA	PALYNZIQ 10 MG/0.5ML	1	QL(7 ml per 28 day(s) retail; 7 ml per 28 days mail); PA
GALAFOLD	1	QL(14 ea per 28 day(s) retail; 14 ea per 28 days mail); PA	PALYNZIQ 2.5 MG/0.5ML	1	QL(2 ml per 28 day(s) retail; 2 ml per 28 days mail); PA
HECTOROL SOLN (<i>doxercalciferol</i>)	9		<i>paricalcitol CAPS</i>	1	QL(1 ea daily); AL(At least 10 yrs old); PA
HECTOROL SOLN (<i>doxercalciferol</i>)	1		<i>paricalcitol SOLN</i>	1	AL(At least 10 yrs old); PA
KANUMA	1		PARSABIV 2.5 MG/0.5ML, 10 MG/2ML	1	PA
KUVAN PACK (<i>sapropterin dihydrochloride</i>)	9		PARSABIV 5 MG/ML	1	QL(12 ml per 30 day(s) retail; 12 ml per 30 days mail); PA
KUVAN PACK (<i>sapropterin dihydrochloride</i>)	1	PA	PHEBURANE PLLT	1	QL(1218 gm per 30 day(s) retail; 1218 gm per 30 days mail); PA
KUVAN TABS (<i>sapropterin dihydrochloride</i>)	1	PA	POMBILITI	1	AL(At least 18 yrs old); PA
LAMZEDE	1	PA	RAVICTI	1	QL(525 ml per 30 day(s) retail; 525 ml per 30 days mail); PA
<i>levocarnitine (metabolic modifiers) SOLN OR 1 GM/10ML</i>	1		RAYALDEE	1	QL(1 ea daily); PA
<i>levocarnitine (metabolic modifiers) TABS</i>	1		REVCOVI	1	PA
LUMIZYME	1	PA			
MEPSEVII	1	PA			
MYALEPT	1	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); PA			
NAGLAZYME	1	PA			
NEXVIAZYME	1	PA			
<i>nitisinone CAPS</i>	1				
NITYR TABS	1				

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Drug Name	Drug Tier	Requirements/Limits
ROCALTROL CAPS (<i>calcitriol</i>)	9	
ROCALTROL SOLN OR (<i>calcitriol</i>)	1	
<i>sapropterin dihydrochloride</i> PACK	1	PA
<i>sapropterin dihydrochloride</i> TABS	1	PA
SENSIPAR 60 MG (<i>cinacalcet hcl</i>)	9	
SENSIPAR 30 MG, 90 MG (<i>cinacalcet hcl</i>)	1	
<i>sod benzoate & sod phenylacetate</i>	1	
<i>sodium phenylbutyrate</i> POWD	1	
<i>sodium phenylbutyrate</i> TABS	1	
STRENSIQ	1	PA
VIMIZIM	1	
XENPOZYME	1	PA
XPHOZAH	1	QL(2 ea daily); AL(At least 18 yrs old); PA
YORVIPATH	1	AL(At least 18 yrs old); PA
ZEMPLAR CAPS 1 MCG, 2 MCG (<i>paricalcitol</i>)	1	QL(1 ea daily); AL(At least 10 yrs old); PA
ZEMPLAR SOLN 2 MCG/ML (<i>paricalcitol</i>)	9	
ZEMPLAR SOLN 5 MCG/ML (<i>paricalcitol</i>)	1	AL(At least 10 yrs old); PA
Mineralocorticoid Receptor Antagonists		
KERENDIA	1	QL(1 ea daily); AL(At least 18 yrs old); PA
Natriuretic Peptides		

Drug Name	Drug Tier	Requirements/Limits
VOXZOGO	1	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); AL(At least 5 yrs old); PA
Posterior Pituitary Hormones		
DDAVP SOLN IJ 4 MCG/ML (<i>desmopressin acetate</i>)	1	
DDAVP TABS 0.1 MG (<i>desmopressin acetate</i>)	1	
DDAVP TABS 0.2 MG (<i>desmopressin acetate</i>)	1	QL(6 ea daily)
<i>desmopressin acetate</i> spray	1	QL(5 ml per 25 day(s) retail; 5 ml per 25 days mail)
<i>desmopressin acetate</i> spray refrigerated	1	QL(5 ml per 25 day(s) retail; 5 ml per 25 days mail)
<i>desmopressin acetate</i> SOLN IJ	1	
<i>desmopressin acetate</i> TABS 0.2 MG	1	QL(6 ea daily)
<i>desmopressin acetate</i> TABS 0.1 MG	1	
NOCDURNA SUBL	1	QL(1 ea daily); PA
VASOPRESSIN/SODIUM CHLORIDE SOLN 0.9 %-20 UNIT/100ML, 0.9 %-40 UNIT/100ML	1	
<i>vasopressin</i> SOLN IV	1	
VASOSTRICT SOLN IV (<i>vasopressin</i>)	9	
VASOSTRICT SOLN IV (<i>vasopressin</i>)	1	
VASOSTRICT SOLN	1	
Progesterone Receptor Antagonists		
MIFEPREX (<i>mifepristone</i>)	1	
<i>mifepristone</i>	1	

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Prolactin Inhibitors			SANDOSTATIN SOLN 50 MCG/ML, 100 MCG/ML, 500 MCG/ML (<i>octreotide acetate</i>)	1	
<i>cabergoline</i>	1		SIGNIFOR	1	QL(60 ml per 30 day(s) retail; 60 ml per 30 days mail)
Somatostatic Agents			SIGNIFOR LAR	1	QL(1 ea per 28 day(s) retail; 1 ea per 28 days mail); PA
<i>lanreotide acetate</i>	1	QL(0.5 ml per 28 day(s) retail)	SOMATULINE DEPOT 60 MG/0.2ML	1	QL(0.2 ml per 28 day(s) retail)
LANREOTIDE ACETATE	1	QL(0.5 ml per 28 day(s) retail)	SOMATULINE DEPOT 90 MG/0.3ML	1	QL(0.3 ml per 28 day(s) retail)
MYCAPSSA CPDR	1	QL(112 ea per 28 day(s) retail; 112 ea per 28 days mail); PA	SOMATULINE DEPOT 120 MG/0.5ML	1	QL(0.5 ml per 28 day(s) retail)
<i>octreotide acetate KIT 30 MG</i>	1	QL(1 ea per 28 day(s) retail; 1 ea per 28 days mail)	Vasopressin Receptor Antagonists		
<i>octreotide acetate KIT 20 MG</i>	1	QL(2 ea per 28 day(s) retail; 2 ea per 28 days mail)	JYNARQUE TABS	1	QL(2 ea daily)
<i>octreotide acetate SOLN</i>	1		JYNARQUE TBPB	1	QL(56 ea per 28 day(s) retail; 56 ea per 28 days mail); PA
<i>octreotide acetate SOSY</i>	1		SAMSCA TABS (<i>tolvaptan</i>)	1	QL(2 ea daily)
SANDOSTATIN LAR DEPOT KIT 10 MG, 30 MG	1	QL(1 ea per 28 day(s) retail; 1 ea per 28 days mail)	<i>tolvaptan</i> TABS	1	QL(2 ea daily)
SANDOSTATIN LAR DEPOT KIT 20 MG (<i>octreotide acetate</i>)	9	QL(2 ea per 28 day(s) retail; 2 ea per 28 days mail)	VAPRISOL	1	
SANDOSTATIN LAR DEPOT KIT 10 MG, 30 MG (<i>octreotide acetate</i>)	1	QL(1 ea per 28 day(s) retail; 1 ea per 28 days mail)	ESTROGENS - Hormone Replacement/Modifying Drugs		
SANDOSTATIN LAR DEPOT KIT 10 MG, 30 MG (<i>octreotide acetate</i>)	9	QL(1 ea per 28 day(s) retail; 1 ea per 28 days mail)	Estrogen Combinations		
SANDOSTATIN LAR DEPOT KIT 20 MG (<i>octreotide acetate</i>)	1	QL(2 ea per 28 day(s) retail; 2 ea per 28 days mail)	ACTIVEVELLA TABS 1 MG-0.5 MG (<i>estradiol & norethindrone acetate</i>)	1	
SANDOSTATIN SOLN 50 MCG/ML, 100 MCG/ML, 500 MCG/ML (<i>octreotide acetate</i>)	9		ANGELIQ	1	
			BIJUVA	1	QL(1 ea daily); PA
			CLIMARA PRO	1	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail)

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COMBIPATCH PTTW	1	QL(8 ea per 28 day(s) retail; 8 ea per 28 days mail)	ELESTRIN GEL	1	QL(52 gm per 30 day(s) retail; 52 gm per 30 days mail); AL(Up to 65 yrs old)
DUAVEE	1	QL(1 ea daily); PA	ESTRACE TABS (estradiol)	1	
estradiol & norethindrone acetate TABS	1		estradiol valerate	1	
MYFEMBREE	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); PA	estradiol GEL 0.25 MG/0.25GM, 0.5 MG/0.5GM, 0.75 MG/0.75GM, 1 MG/GM	1	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail)
norethindrone acetate-ethinyl estradiol	1		estradiol GEL 0.06 %	1	
ORIAHNN	1	QL(56 ea per 28 day(s) retail; 56 ea per 28 days mail); PA	estradiol GEL 1.25 MG/1.25GM	1	QL(37.5 gm per 30 day(s) retail; 38 gm per 30 days mail)
PREMPHASE	1		estradiol PTTW	1	QL(8 ea per 28 day(s) retail; 8 ea per 28 days mail)
PREMPRO	1		estradiol PTWK	1	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail)
Estrogens			estradiol TABS	1	
CLIMARA PTWK (estradiol)	1	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail)	ESTROGEL GEL (estradiol)	9	
CLIMARA PTWK (estradiol)	9	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail)	EVAMIST SOLN	1	QL(8.1 ml per 55 day(s) retail; 8 ml per 55 days mail)
DELESTROGEN (estradiol valerate)	1		MENEST	1	
DEPO-ESTRADIOL	1		MENOSTAR PTWK	1	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail)
DIVIGEL GEL 1.25 MG/1.25GM (estradiol)	1	QL(37.5 gm per 30 day(s) retail; 38 gm per 30 days mail)	MINIVELLE PTTW (estradiol)	1	QL(8 ea per 28 day(s) retail; 8 ea per 28 days mail)
DIVIGEL GEL 0.25 MG/0.25GM, 0.75 MG/0.75GM, 1 MG/GM (estradiol)	1	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail)	MINIVELLE PTTW (estradiol)	9	QL(8 ea per 28 day(s) retail; 8 ea per 28 days mail)
DIVIGEL GEL 0.5 MG/0.5GM (estradiol)	1	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); AL(At least 1 yrs old)	PREMARIN SOLR	1	

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Drug Name	Drug Tier	Requirements/Limits
PREMARIN TABS	1	
VIVELLE-DOT PTTW 0.025 MG/24HR, 0.0375 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (estradiol)	1	QL(8 ea per 28 day(s) retail; 8 ea per 28 days mail)
VIVELLE-DOT PTTW (estradiol)	9	QL(8 ea per 28 day(s) retail; 8 ea per 28 days mail)
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections		
Fluoroquinolones		
BAXDELA SOLR	1	QL(2 ea daily); PA
BAXDELA TABS	1	QL(28 ea per 14 day(s) retail; 28 ea per 14 days mail); PA
<i>ciprofloxacin hcl TABS 250 MG, 500 MG, 750 MG</i>	1	
<i>ciprofloxacin in d5w</i>	1	
<i>ciprofloxacin SUSR 5 GM/100ML, 500 MG/5ML</i>	1	AL(Up to 6 yrs old)
CIPRO SUSR	1	AL(Up to 6 yrs old)
CIPRO TABS 250 MG, 500 MG (<i>ciprofloxacin hcl</i>)	1	
<i>levofloxacin in d5w</i>	1	
<i>levofloxacin SOLN OR</i>	1	AL(Up to 6 yrs old)
<i>levofloxacin TABS 250 MG, 500 MG</i>	1	
<i>levofloxacin TABS 750 MG</i>	1	QL(1 ea daily)
<i>moxifloxacin hcl in sodium chloride</i>	1	
<i>moxifloxacin hcl TABS</i>	1	QL(21 ea per 20 day(s) retail; 21 ea per 20 days mail)

Drug Name	Drug Tier	Requirements/Limits
MOXIFLOXACIN HYDROCHLORIDE SOLN 400 MG/250ML	1	
<i>ofloxacin 300 MG, 400 MG</i>	1	QL(2 ea daily); PA
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs		
5-HT4 Receptor Agonists		
MOTEGRITY	1	QL(1 ea daily); PA
Agents for Chronic Idiopathic Constipation (CIC)		
TRULANCE	1	QL(1 ea daily); AL(At least 18 yrs old); PA
Bile Acid Synthesis Disorder Agents		
CHOLBAM	1	QL(4 ea daily); PA
Farnesoid X Receptor (FXR) Agonists		
OCALIVA	1	QL(1 ea daily); PA
Gallstone Solubilizing Agents		
CHENODAL	1	
RELTONE CAPS	1	PA
URSO 250 TABS (<i>ursodiol</i>)	1	
URSO FORTE TABS (<i>ursodiol</i>)	1	
<i>ursodiol CAPS</i>	1	
<i>ursodiol TABS</i>	1	
Gastrointestinal Antiallergy Agents		
<i>cromolyn sodium (mastocytosis)</i>	1	
GASTROCROM (<i>cromolyn sodium (mastocytosis)</i>)	1	
GASTROCROM (<i>cromolyn sodium (mastocytosis)</i>)	9	
Gastrointestinal Chloride Channel Activators		

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AMITIZA (<i>lubiprostone</i>)	1	QL(100 ea per 50 day(s) retail; 100 ea per 50 days mail); PA	ASACOL HD TBEC (<i>mesalamine</i>)	9	QL(6 ea daily)
<i>lubiprostone</i>	1	QL(100 ea per 50 day(s) retail; 100 ea per 50 days mail); PA	AVSOLA	1	PA
Gastrointestinal Stimulants			AZULFIDINE EN-TABS TBEC (<i>sulfasalazine</i>)	1	
GIMOTI SOLN NA	1	QL(9.8 ml per 28 day(s) retail; 10 ml per 28 days mail); AL(At least 18 yrs old - Up to 65 yrs old); PA	AZULFIDINE TABS (<i>sulfasalazine</i>)	1	
METOCLOPRAMIDE HCL MONOHYDRATE	1		AZULFIDINE TABS (<i>sulfasalazine</i>)	9	
METOCLOPRAMIDE HCL POWD	1		<i>balsalazide disodium</i> CAPS	1	QL(9 ea daily); AL(At least 5 yrs old)
<i>metoclopramide hcl</i> SOLN IJ 5 MG/ML	1		CANASA SUPP (<i>mesalamine</i>)	1	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail)
<i>metoclopramide hcl</i> TABS	1		CIMZIA STARTER KIT PSKT	1	QL(3 ea per 42 day(s) retail; 3 ea per 42 days mail); PA
METOCLOPRAMIDE HYDROCHLORIDE POWD	1		CIMZIA KIT	1	QL(1 ea per 28 day(s) retail; 1 ea per 28 days mail); PA
REGLAN TABS (<i>metoclopramide hcl</i>)	1		CIMZIA PSKT	1	QL(3 ea per 42 day(s) retail; 3 ea per 42 days mail); PA
Hepatotropics			COLAZAL CAPS (<i>balsalazide disodium</i>)	1	QL(9 ea daily); AL(At least 5 yrs old)
REZDIFFRA	1	AL(At least 18 yrs old); PA	DELZICOL CPDR (<i>mesalamine</i>)	1	QL(6 ea daily)
Ileal Bile Acid Transporter (IBAT) Inhibitors			DIPENTUM	1	QL(4 ea daily)
BYLVAY (PELLETS) CPSP	1	PA	ENTYVIO PEN SOAJ SC 108 MG/0.68ML	1	QL(1.36 ml per 28 day(s) retail; 1 ml per 28 days mail); PA
BYLVAY CAPS	1	PA	ENTYVIO SOLR	1	PA
LIVMARLI 9.5 MG/ML	1	QL(90 ml per 30 day(s) retail; 90 ml per 30 days mail); PA	INFLECTRA SOLR	2	
LIVMARLI 19 MG/ML	1	PA	INFLIXIMAB	1	QL(16 ea per 56 day(s) retail; 16 ea per 56 days mail); PA
Inflammatory Bowel Agents			LIALDA TBEC (<i>mesalamine</i>)	9	QL(4 ea daily)
APRISO CP24 (<i>mesalamine</i>)	1	QL(4 ea daily)			

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LIALDA TBEC (<i>mesalamine</i>)	1	QL(4 ea daily)	SKYRIZI SOCT 180 MG/1.2ML	1	QL(1.2 ml per 55 day(s) retail; 1 ml per 55 days mail); PA
<i>mesalamine w/ cleanser</i>	1	PA			
<i>mesalamine CP24</i>	1	QL(4 ea daily)	SKYRIZI SOLN	1	QL(10 ml per 28 day(s) retail; 10 ml per 28 days mail); PA
<i>mesalamine CPCR</i>	1	Brand Required; QL(8 ea daily); PA			
<i>mesalamine CPDR</i>	1	QL(6 ea daily)	STELARA 130 MG/26ML	1	QL(104 ml per 365 day(s) retail; 104 ml per 365 days mail); PA
<i>mesalamine ENEM</i>	1	QL(1800 ml per 30 day(s) retail; 1800 ml per 30 days mail)			
<i>mesalamine SUPP</i>	1	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail)	SULFASALAZINE POWD	1	
			<i>sulfasalazine TABS</i>	1	
			<i>sulfasalazine TBEC</i>	1	
<i>mesalamine TBEC 1.2 GM</i>	1	QL(4 ea daily)	VELSIPITY	1	QL(1 ea daily); PA
<i>mesalamine TBEC 800 MG</i>	1	QL(6 ea daily); PA	ZYMFENTRA 1-PEN AJKT	1	PA
OMVOH SOAJ	1	PA	ZYMFENTRA 2-PEN AJKT	1	PA
OMVOH SOLN	1	QL(15 ml per 28 day(s) retail; 15 ml per 28 days mail); PA	ZYMFENTRA 2-SYRINGE PSKT	1	PA
OMVOH SOSY	1	PA	Intestinal Acidifiers		
PENTASA CPCR 250 MG	1	QL(16 ea daily)	<i>lactulose</i> (<i>encephalopathy</i>)	1	
PENTASA CPCR (<i>mesalamine</i>)	1	Brand Required; QL(8 ea daily)	Irritable Bowel Syndrome (IBS) Agents		
REMICADE	1	QL(16 ea per 56 day(s) retail; 16 ea per 56 days mail); PA	<i>alosetron hcl</i>	1	QL(2 ea daily)
RENFLEXIS	1	PA	IBSRELA	1	QL(2 ea daily); AL(At least 18 yrs old); PA
ROWASA (<i>mesalamine w/ cleanser</i>)	1	PA	LINZESS	1	QL(1 ea daily); AL(At least 6 yrs old); PA
SFROWASA ENEM	1	QL(1800 ml per 30 day(s) retail; 1800 ml per 30 days mail)	LOTRONEX (<i>alosetron hcl</i>)	1	QL(2 ea daily)
SKYRIZI SOCT 360 MG/2.4ML	1	QL(2.4 ml per 55 day(s) retail; 2 ml per 55 days mail); PA	VIBERZI	1	QL(2 ea daily); AL(At least 18 yrs old); PA
			Live Fecal Microbiota		
			REBYOTA	1	

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VOWST	1	QL(4 ea daily); AL(At least 18 yrs old); PA	FOSRENOL CHEW (lanthanum carbonate)	9	Brand Required
Peripheral Opioid Receptor Antagonists			FOSRENOL PACK	1	Brand Required
<i>alvimopan</i>	1		<i>lanthanum carbonate CHEW</i>	1	Brand Required; PA
ENTEREG (<i>alvimopan</i>)	1		RENAGEL (<i>sevelamer hcl</i>)	9	
MOVANTIK	1	QL(1 ea daily); PA	RENVELA PACK (<i>sevelamer carbonate</i>)	1	
RELISTOR SOLN 12 MG/0.6ML	1	QL(18 ml per 30 day(s) retail; 18 ml per 30 days mail); AL(At least 18 yrs old); PA	RENVELA PACK (<i>sevelamer carbonate</i>)	9	
RELISTOR SOLN 8 MG/0.4ML	1	QL(12 ml per 30 day(s) retail; 12 ml per 30 days mail); AL(At least 18 yrs old); PA	RENVELA TABS (<i>sevelamer carbonate</i>)	1	
RELISTOR TABS	1	QL(3 ea daily); AL(At least 18 yrs old); PA	<i>sevelamer carbonate PACK</i>	1	
SYMPROIC	1	QL(1 ea daily); AL(At least 18 yrs old); PA	<i>sevelamer carbonate TABS</i>	1	
Peroxisome Proliferator-Activated Receptor(PPAR) Agonists			<i>sevelamer hcl</i>	1	PA
IQIRVO	1	AL(At least 18 yrs old); PA	VELPHORO	2	
LIVDELZI	1	AL(At least 18 yrs old); PA	Short Bowel Syndrome (SBS) Agents		
Phosphate Binder Agents			GATTEX	1	QL(1 ea per fill retail); PA
AURYXIA	1	QL(360 ea per 30 day(s) retail; 360 ea per 30 days mail); AL(At least 19 yrs old); PA	GENERAL ANESTHETICS		
<i>calcium acetate (phosphate binder) CAPS</i>	1		Anesthetics - Misc.		
<i>calcium acetate (phosphate binder) TABS</i>	1	RX/OTC	AMIDATE (<i>etomidate</i>)	9	
FOSRENOL CHEW (lanthanum carbonate)	1	Brand Required	AMIDATE (<i>etomidate</i>)	1	
			DIPRIVAN EMUL	1	
			DIPRIVAN EMUL (<i>propofol</i>)	1	
			DIPRIVAN EMUL (<i>propofol</i>)	9	
			<i>etomidate</i>	1	
			KETALAR SOLN IJ (<i>ketamine hcl</i>)	1	
			<i>ketamine hcl SOLN IJ</i>	1	
			<i>propofol EMUL 200 MG/20ML, 500 MG/50ML, 1000 MG/100ML</i>	1	
			Barbiturate Anesthetics		

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Drug Name	Drug Tier	Requirements/Limits
BREVITAL SODIUM SOLR 500 MG	1	
Volatile Anesthetics		
<i>desflurane</i>	1	
FORANE (<i>isoflurane</i>)	1	
<i>isoflurane</i>	1	
<i>sevoflurane</i>	1	
SUPRANE (<i>desflurane</i>)	1	
SUPRANE (<i>desflurane</i>)	9	
ULTANE (<i>sevoflurane</i>)	1	
GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System		
Acidifiers		
K-PHOS NO 2	1	
Alkalinizers		
ORACIT	1	
ORAL CITRATE	1	
<i>potassium citrate (alkalinizer) TBCR 15 MEQ, 540 MG, 1080 MG, 1620 MG</i>	1	
<i>potassium citrate-citric acid SOLN</i>	1	PA; RX/OTC
<i>sodium citrate & citric acid</i>	1	RX/OTC
UROCIT-K 10 TBCR (<i>potassium citrate (alkalinizer)</i>)	1	
UROCIT-K 15 TBCR (<i>potassium citrate (alkalinizer)</i>)	1	
UROCIT-K 5 TBCR (<i>potassium citrate (alkalinizer)</i>)	1	
Cystinosis Agents		
CYSTAGON CAPS	1	
PROCYSBI CPDR	1	PA
PROCYSBI PACK	1	PA

Drug Name	Drug Tier	Requirements/Limits
Genitourinary Irrigants		
<i>acetic acid 0.25 %</i>	1	
<i>glycine (gu irrigant) SOLN 1.5 %</i>	1	
<i>neomycin/polymyxin b gu</i>	1	
<i>sodium chloride (gu irrigant) 0.9 %</i>	1	
SORBITOL 3 %	1	
SORBITOL/MANNITOL IRRIGATION	1	
Hyperoxaluria Agents		
OXLUMO	1	PA
RIVFLOZA SOLN	1	QL(1 ml per 30 day(s) retail; 1 ml per 30 days mail); AL(At least 9 yrs old - Up to 11 yrs old); PA
RIVFLOZA SOSY 160 MG/ML	1	QL(1 ml per 30 day(s) retail; 1 ml per 30 days mail); AL(At least 9 yrs old); PA
RIVFLOZA SOSY 128 MG/0.8ML	1	AL(At least 9 yrs old); PA
IgA Nephropathy (IgAN) Agents		
FILSPARI	1	QL(1 ea daily); AL(At least 18 yrs old); PA
Interstitial Cystitis Agents		
ELMIRON CAPS	1	
RIMSO-50	1	
Prostatic Hypertrophy Agents		
<i>alfuzosin hcl</i>	1	QL(1 ea daily); MP
AVODART (<i>dutasteride</i>)	1	QL(1 ea daily); MP
AVODART (<i>dutasteride</i>)	9	QL(1 ea daily); MP
CARDURA XL	2	ST

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Drug Name	Drug Tier	Requirements/Limits
<i>dutasteride</i>	1	QL(1 ea daily); MP
<i>dutasteride-tamsulosin hcl</i>	2	ST
<i>finasteride</i>	1	QL(1 ea daily); MP
FLOMAX (<i>tamsulosin hcl</i>)	1	QL(2 ea daily); MP
JALYN (<i>dutasteride-tamsulosin hcl</i>)	9	ST
PROSCAR (<i>finasteride</i>)	1	QL(1 ea daily); MP
RAPAFLO (<i>silodosin</i>)	2	ST
RAPAFLO 8 MG (<i>silodosin</i>)	9	ST
<i>silodosin</i>	2	ST
<i>tamsulosin hcl</i>	1	QL(2 ea daily); MP
UROXATRAL (<i>alfuzosin hcl</i>)	9	QL(1 ea daily); MP
Urinary Stone Agents		
LITHOSTAT	1	
THIOLA EC TBEC (<i>tiopronin</i>)	1	
THIOLA TABS (<i>tiopronin</i>)	1	QL(3 ea daily)
<i>tiopronin TABS</i>	1	QL(3 ea daily); PA
<i>tiopronin TBEC</i>	1	PA
GOUT AGENTS - Drugs to Treat Gout		
Gout Agent Combinations		
<i>colchicine w/ probenecid</i>	1	
Gout Agents		
<i>allopurinol 200 MG</i>	1	PA
<i>allopurinol 100 MG, 300 MG</i>	1	
<i>allopurinol sodium</i>	1	
ALOPRIM (<i>allopurinol sodium</i>)	1	
<i>colchicine CAPS</i>	1	QL(2 ea daily)
<i>colchicine TABS</i>	1	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
COLCRYS TABS (<i>colchicine</i>)	1	QL(2 ea daily)
<i>febuxostat</i>	1	QL(1 ea daily); PA
GLOPERBA SOLN OR	1	QL(300 ml per 30 day(s) retail; 300 ml per 30 days mail); PA
KRYSTEXXA	1	
MITIGARE CAPS (<i>colchicine</i>)	1	QL(2 ea daily)
ULORIC (<i>febuxostat</i>)	1	QL(1 ea daily); PA
ZYLOPRIM (<i>allopurinol</i>)	9	
Uricosurics		
<i>probenecid</i>	1	
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders		
Aminolevulinate Synthase 1-Directed siRNA		
GIVLAARI	1	PA
Antihemophilic Products		
ADVATE	1	
ADYNOVATE	1	PA
AFSTYLA	1	PA
ALPHANATE SOLR	1	
ALPHANINE SD 500 UNIT, 1000 UNIT, 1500 UNIT	1	
ALPROLIX	1	PA
ALTUVIIIIO	1	PA
BALFAXAR	1	
BENEFIX KIT	1	
BEQVEZ	1	AL(At least 18 yrs old); PA
COAGADEX	1	PA
CORIFACT	1	PA
ELOCTATE	1	PA
ESPEROCT	1	PA
FEIBA	1	PA

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FIBRYGA	1		<i>icatibant acetate SOLN</i>	1	PA
HEMGENIX	1	QL(1 ea per fill retail); AL(At least 19 yrs old); PA	<i>icatibant acetate SOSY</i>	1	PA
HEMLIBRA	1	PA	Complement Inhibitors		
HEMOFIL M SOLR 250 UNIT, 500 UNIT, 1000 UNIT, 1700 UNIT	1		BERINERT KIT	1	PA
HUMATE-P SOLR	1		CINRYZE SOLR IV	1	QL(16 ea per 28 day(s) retail; 16 ea per 28 days mail); PA
IDELVION	1	PA	EMPAVELI	1	QL(160 ml per 28 day(s) retail; 160 ml per 28 days mail); AL(At least 18 yrs old); PA
IXINITY SOLR	1		ENJAYMO	1	AL(At least 18 yrs old); PA
JIVI	1	PA	FABHALTA	1	QL(2 ea daily); AL(At least 18 yrs old); PA
KCENTRA	1		HAEGARDA SOLR SC	1	PA
KOATE SOLR	1		PIASKY	1	
KOGENATE FS KIT	1		RUCONEST	1	QL(1 ea per 28 day(s) retail; 1 ea per 28 days mail); PA
KOVALTRY	1		SOLIRIS	1	PA
NOVOEIGHT	1		TAVNEOS	1	QL(6 ea daily); AL(At least 18 yrs old); PA
NOVOSEVEN RT	1	PA	ULTOMIRIS	1	PA
NUWIQ KIT	1		VEOPOZ	1	QL(16 ml per 28 day(s) retail; 16 ml per 28 days mail); AL(At least 1 yrs old); PA
OBIZUR	1	PA	VOYDEYA TABS	1	PA
PROFILNINE	1		VOYDEYA TBPK	1	PA
REBINYN	1	PA	ZILBRYSQ 16.6 MG/0.416ML	1	QL(11.648 ml per 28 day(s) retail; 12 ml per 28 days mail); AL(At least 18 yrs old); PA
RECOMBINATE SOLR	1				
RIASTAP	1				
RIXUBIS SOLR	1				
ROCTAVIAN	1	QL(1 ea per fill retail); AL(At least 18 yrs old); PA			
SEVENFACT	1	PA			
TRETTEN	1	PA			
VONVENDI	1				
WILATE KIT	1				
XYNTHA	1				
XYNTHA SOLOFUSE	1				
Bradykinin B2 Receptor Antagonists					
FIRAZYR SOSY (<i>icatibant acetate</i>)	1	PA			

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ZILBRYSQ 23 MG/0.574ML, 32.4 MG/0.81ML	1	AL(At least 18 yrs old); PA	TAKHZYRO SOSY 150 MG/ML	1	QL(2 ml per 28 day(s) retail; 2 ml per 28 days mail); AL(At least 2 yrs old - Up to 11 yrs old); PA
Hemataologic - Tyrosine Kinase Inhibitors			TAKHZYRO SOSY 300 MG/2ML		
TAVALISSE	1	QL(2 ea daily); PA	Plasma Proteins		
Hematological Enzymes - Misc			ALBUKED 25	1	
ADZYNMA	1	PA	ALBUKED 5	1	
Hematorheologic Agents			ALBUMIN HUMAN	1	
<i>pentoxifylline</i>	1		ALBUMINEX	1	
Hemin			ALBURX	1	
PANHEMATIN 350 MG	1		ALBUTEIN	1	
Human Protein C			FLEXBUMIN	1	
CEPROTIN	1		KEDBUMIN	1	
Plasma Expanders			OCTAPLAS BLOOD GROUP A	1	
<i>dextran 40 in d5w</i>	1		OCTAPLAS BLOOD GROUP AB	1	
<i>dextran 40 in saline</i>	1		OCTAPLAS BLOOD GROUP B	1	
HESPAN (<i>hetastarch (hes /0.7 or /0.75) in sodium chloride</i>)	9		OCTAPLAS BLOOD GROUP O	1	
<i>hetastarch (hes /0.7 or /0.75) in sodium chloride</i>	1		RYPLAZIM	1	PA
HEXTEND	1		THROMBATE III	1	
Plasma Kallikrein Inhibitors			Platelet Aggregation Inhibitors		
KALBITOR	1	PA	AGGRASTAT 3.75 MG/15ML	1	
ORLADEYO	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); AL(At least 12 yrs old); PA	AGGRASTAT (<i>tirofiban hcl in sodium chloride</i>)	1	
TAKHZYRO SOLN	1	QL(4 ml per 28 day(s) retail; 4 ml per 28 days mail); AL(At least 12 yrs old); PA	AGRYLIN 0.5 MG (<i>anagrelide hcl</i>)	1	
			<i>anagrelide hcl</i>	1	

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<i>aspirin-dipyridamole</i>	1	QL(2 ea daily); AL(At least 18 yrs old); PA
BRILINTA 60 MG	1	QL(2 ea daily)
BRILINTA 90 MG	1	QL(61 ea per 30 day(s) retail; 61 ea per 30 days mail)
CABLIVI	1	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); PA
<i>cilostazol</i>	1	
<i>clopidogrel bisulfate</i>	1	QL(1 ea daily); MP
<i>dipyridamole</i>	1	QL(4 ea daily); MP
EFFIENT (<i>prasugrel hcl</i>)	1	QL(35 ea per 30 day(s) retail; 35 ea per 30 days mail)
<i>eptifibatide</i>	1	
KENGREAL	1	
PLAVIX 75 MG (<i>clopidogrel bisulfate</i>)	1	QL(1 ea daily); MP
<i>prasugrel hcl</i>	1	QL(35 ea per 30 day(s) retail; 35 ea per 30 days mail)
<i>tirofiban hcl in sodium chloride</i>	1	
Protamine		
<i>protamine sulfate</i>	1	
Pyruvate Kinase Activators		
PYRUKYND TAPER PACK TBPK	1	QL(14 ea per 14 day(s) retail; 14 ea per 14 days mail); AL(At least 18 yrs old); PA
PYRUKYND TAPER PACK TBPK	1	QL(7 ea per fill retail); AL(At least 18 yrs old); PA

Drug Name	Drug Tier	Requirements/Limits
PYRUKYND TABS	1	QL(56 ea per 28 day(s) retail; 56 ea per 28 days mail); AL(At least 18 yrs old); PA
Thrombolytic Agent - Misc		
DEFITELIO	1	
Thrombolytic Enzymes		
ACTIVASE IV	1	
CATHFLO ACTIVASE IJ	1	
RETAVASE 10 UNIT	1	
TNKASE	1	
HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders		
Agents for Gaucher Disease		
CERDELGA	1	QL(56 ea per 28 day(s) retail; 56 ea per 28 days mail); PA
CEREZYME 400 UNIT	1	PA
ELELYSO	1	PA
<i>miglustat</i>	1	Brand Required; QL(3 ea daily); PA
VPRIV	1	PA
ZAVESCA (<i>miglustat</i>)	1	Brand Required; QL(3 ea daily); PA
ZAVESCA (<i>miglustat</i>)	9	Brand Required; QL(3 ea daily)
Agents for Sickle Cell Disease		
ADAKVEO	1	PA
CASGEVY	1	
DROXIA CAPS	1	
ENDARI (<i>glutamine sickle cell</i>)	1	AL(At least 5 yrs old); PA
ENDARI (<i>glutamine sickle cell</i>)	9	AL(At least 5 yrs old)

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<i>glutamine (sickle cell)</i>	1	AL(At least 5 yrs old); PA	ARANESP ALBUMIN FREE SOSY 10 MCG/0.4ML, 40 MCG/0.4ML, 200 MCG/0.4ML	1	QL(1.6 ml per 28 day(s) retail; 2 ml per 28 days mail); PA
LYFGENIA	1		ARANESP ALBUMIN FREE SOSY 500 MCG/ML	1	QL(4 ml per 28 day(s) retail; 4 ml per 28 days mail); PA
SIKLOS TABS	1	AL(At least 2 yrs old); PA	DOPTELET	1	PA
Cobalamins			EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	1	PA
<i>cyanocobalamin SOLN IJ 1000 MCG/ML</i>	1	AL(Up to 20 yrs old)	FULPHILA	1	QL(0.6 ml per 20 day(s) retail; 1 ml per 20 days mail)
<i>hydroxocobalamin acetate SOLN</i>	1	AL(Up to 20 yrs old)	FYLNETRA	1	QL(0.6 ml per 20 day(s) retail; 1 ml per 20 days mail)
Folic Acid/Folates			GRANIX SOLN 300 MCG/ML	1	QL(30 ml per 30 day(s) retail; 30 ml per 30 days mail)
<i>folic acid SOLN</i>	1		GRANIX SOLN 480 MCG/1.6ML	1	QL(48 ml per 30 day(s) retail; 48 ml per 30 days mail)
<i>folic acid TABS 1 MG</i>	1	RX/OTC	GRANIX SOSY 480 MCG/0.8ML	1	QL(24 ml per 30 day(s) retail; 24 ml per 30 days mail)
Hematopoietic Gene Therapy			GRANIX SOSY 300 MCG/0.5ML	1	QL(15 ml per 30 day(s) retail; 15 ml per 30 days mail)
ZYNTEGLO	1	QL(1 ea per fill retail); AL(At least 4 yrs old)	JESDUVROQ 6 MG	1	QL(2 ea daily); AL(At least 18 yrs old); PA
Hematopoietic Growth Factors			JESDUVROQ 8 MG	1	QL(3 ea daily); AL(At least 18 yrs old); PA
ALVAIZ	1	AL(At least 6 yrs old); PA	JESDUVROQ 1 MG, 2 MG, 4 MG	1	QL(1 ea daily); AL(At least 18 yrs old); PA
ARANESP ALBUMIN FREE SOLN 25 MCG/ML, 40 MCG/ML, 60 MCG/ML, 100 MCG/ML, 200 MCG/ML	1	QL(4 ml per 28 day(s) retail; 4 ml per 28 days mail); PA	LEUKINE SOLR IJ	1	
ARANESP ALBUMIN FREE SOSY 100 MCG/0.5ML	1	QL(2 ml per 28 day(s) retail; 2 ml per 28 days mail); PA			
ARANESP ALBUMIN FREE SOSY 60 MCG/0.3ML, 150 MCG/0.3ML	1	QL(1.2 ml per 28 day(s) retail; 1 ml per 28 days mail); PA			
ARANESP ALBUMIN FREE SOSY 25 MCG/0.42ML	1	QL(1.68 ml per 28 day(s) retail; 2 ml per 28 days mail); PA			
ARANESP ALBUMIN FREE SOSY 300 MCG/0.6ML	1	QL(2.4 ml per 28 day(s) retail; 2 ml per 28 days mail); PA			

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MULPLETA	1	QL(7 ea per fill retail); PA	PROMACTA PACK	1	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail)
NEULASTA ONPRO KIT PSKT	1		PROMACTA TABS	1	QL(1 ea daily)
NEULASTA SOSY	1	QL(0.6 ml per 20 day(s) retail; 1 ml per 20 days mail); PA	REBLOZYL	1	PA
NEUPOGEN SOLN 300 MCG/ML	1	QL(30 ml per 30 day(s) retail; 30 ml per 30 days mail)	RELEUKO SOLN 300 MCG/ML	1	QL(30 ml per 30 day(s) retail; 30 ml per 30 days mail); PA
NEUPOGEN SOLN 480 MCG/1.6ML	1	QL(48 ml per 30 day(s) retail; 48 ml per 30 days mail)	RELEUKO SOLN 480 MCG/1.6ML	1	QL(48 ml per 30 day(s) retail; 48 ml per 30 days mail); PA
NEUPOGEN SOSY 480 MCG/0.8ML	1	QL(24 ml per 30 day(s) retail; 24 ml per 30 days mail)	RELEUKO SOSY 300 MCG/0.5ML	1	QL(15 ml per 30 day(s) retail; 15 ml per 30 days mail); PA
NEUPOGEN SOSY 300 MCG/0.5ML	1	QL(15 ml per 30 day(s) retail; 15 ml per 30 days mail)	RELEUKO SOSY 480 MCG/0.8ML	1	QL(24 ml per 30 day(s) retail; 24 ml per 30 days mail); PA
NIVESTYM SOLN 300 MCG/ML	1	QL(30 ml per 30 day(s) retail; 30 ml per 30 days mail); PA	RETACRIT	1	PA
NIVESTYM SOLN 480 MCG/1.6ML	1	QL(48 ml per 30 day(s) retail; 48 ml per 30 days mail); PA	ROLVEDON	1	QL(0.6 ml per 20 day(s) retail; 1 ml per 20 days mail); PA
NIVESTYM SOSY 300 MCG/0.5ML	1	QL(15 ml per 30 day(s) retail; 15 ml per 30 days mail); PA	STIMUFEND	1	QL(0.6 ml per 20 day(s) retail; 1 ml per 20 days mail); PA
NIVESTYM SOSY 480 MCG/0.8ML	1	QL(24 ml per 30 day(s) retail; 24 ml per 30 days mail); PA	UDENYCA ONBODY SOSY	1	
NPLATE	1		UDENYCA SOAJ	1	QL(0.6 ml per 20 day(s) retail; 1 ml per 20 days mail); PA
NYVEPRIA	1	QL(0.6 ml per 20 day(s) retail; 1 ml per 20 days mail); PA	UDENYCA SOSY	1	QL(0.6 ml per 20 day(s) retail; 1 ml per 20 days mail); PA
PROCRIT	1	PA	VAFSEO	1	AL(At least 18 yrs old); PA
PROCRIT	1	PA	ZARXIO 480 MCG/0.8ML	1	QL(24 ml per 30 day(s) retail; 24 ml per 30 days mail)

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ZARXIO 300 MCG/0.5ML	1	QL(15 ml per 30 day(s) retail; 15 ml per 30 days mail)	Hemostatics - Systemic		
ZIEXTENZO	1	QL(0.6 ml per 20 day(s) retail; 1 ml per 20 days mail)	AMICAR SOLN OR (aminocaproic acid)	9	
Iron			AMICAR TABS (aminocaproic acid)	9	
ACCRUFER	1	AL(At least 18 yrs old); PA	aminocaproic acid SOLN OR 0.25 GM/ML	1	
FERAHEME (ferumoxytol)	1		aminocaproic acid TABS	1	
FERAHEME (ferumoxytol)	9		CYKLOKAPRON SOLN (tranexamic acid)	1	
FER-IN-SOL SOLN (ferrous sulfate)	9		CYKLOKAPRON SOLN (tranexamic acid)	9	
FERRLECIT (sodium ferric gluconate complex in sucrose)	9		LYSTEDA TABS (tranexamic acid)	9	
FERRLECIT (sodium ferric gluconate complex in sucrose)	1		TRANEXAMIC ACID/SODIUM CHLORIDE (tranexamic acid-sodium chloride)	1	
ferrous sulfate SOLN 15 MG/ML	1	AL(Up to 2 yrs old); PA	tranexamic acid-sodium chloride	1	
ferumoxytol	1		tranexamic acid SOLN 1000 MG/10ML	1	
INFED	1		tranexamic acid TABS	1	
INJECTAFER	1		Hemostatics - Topical		
MONOFERRIC	1		ARTISS KIT	1	
sodium ferric gluconate complex in sucrose	1		RECOTHROM	1	
VENOFER	1		RECOTHROM/SPRAY APPLICATOR KIT	1	
Stem Cell Mobilizers			TACHOSIL	1	
APHEXDA	1	PA	THROMBIN-JMI DILUENT SOLR	1	
MOZOBIL (plerixafor)	1	QL(1.2 ml daily); PA	THROMBIN-JMI EPISTAXIS KIT	1	
plerixafor	1	QL(1.2 ml daily); PA	THROMBIN-JMI SYRINGE SPRAY KIT KIT	1	
XOLREMDI	1	AL(At least 12 yrs old); PA	THROMBIN-JMI W/DIL SPRAYPUMP ACTUATOR KIT	1	
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders			TISSEEL KIT	1	
			TISSEEL SOLN	1	
			HYPNOTICS/SEDATIVES/SLEEP DISORDER		

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AGENTS					
Barbiturate Hypnotics					
AMYTAL SODIUM	1	AL(At least 19 yrs old)	DORAL (<i>quazepam</i>)	1	QL(1 ea daily); AL(At least 19 yrs old); PA
NEMBUTAL SODIUM SOLN (<i>pentobarbital sodium</i>)	9		DORAL (<i>quazepam</i>)	9	QL(1 ea daily)
<i>pentobarbital sodium SOLN</i>	1	AL(At least 19 yrs old)	EDLUAR SUBL	1	QL(1 ea daily); AL(At least 19 yrs old); PA
<i>phenobarbital sodium SOLN</i>	1		<i>estazolam</i>	1	QL(1 ea daily); AL(At least 19 yrs old)
<i>phenobarbital ELIX</i>	1		<i>eszopiclone</i>	1	QL(1 ea daily); AL(At least 19 yrs old)
<i>phenobarbital TABS</i>	1		<i>flurazepam hcl</i>	1	QL(1 ea daily); AL(At least 19 yrs old)
SEZABY SOLR	1		HALCION 0.25 MG (<i>triazolam</i>)	1	QL(1 ea daily); AL(At least 19 yrs old)
Hypnotics - Tricyclic Agents			HALCION 0.25 MG (<i>triazolam</i>)	9	QL(1 ea daily)
<i>doxepin hcl (sleep)</i>	1	QL(1 ea daily); AL(At least 19 yrs old); PA	IGALMI FILM	1	
SILENOR (<i>doxepin hcl (sleep)</i>)	9	QL(1 ea daily)	LUNESTA (<i>eszopiclone</i>)	1	QL(1 ea daily); AL(At least 19 yrs old)
Non-Barbiturate Hypnotics			LUNESTA (<i>eszopiclone</i>)	9	QL(1 ea daily)
AMBIEN CR TBCR (<i>zolpidem tartrate</i>)	2	QL(1 ea daily); AL(At least 19 yrs old)	<i>midazolam hcl SOLN IJ</i>	1	
AMBIEN TABS (<i>zolpidem tartrate</i>)	1	QL(1 ea daily); AL(At least 19 yrs old)	<i>midazolam hcl SYRP</i>	1	
BYFAVO	1		MIDAZOLAM/SODIUM CHLORIDE (<i>midazolam-sodium chloride</i>)	9	
<i>dexmedetomidine hcl in sodium chloride SOLN</i>	1		MIDAZOLAM/SODIUM CHLORIDE	1	
<i>dexmedetomidine hcl SOLN</i>	1		MIDAZOLAM/SODIUM CHLORIDE (<i>midazolam-sodium chloride</i>)	1	
DEXMEDETOMIDINE HCL SOLN 400 MCG/4ML, 1000 MCG/10ML (<i>dexmedetomidine hcl</i>)	1		<i>midazolam-sodium chloride</i>	1	
DEXMEDETOMIDINE HYDROCHLORIDE/DEXTROSE MONOHYDRATE	1		PRECEDEX SOLN	1	
			PRECEDEX SOLN (<i>dexmedetomidine hcl in sodium chloride</i>)	1	
			PRECEDEX SOLN (<i>dexmedetomidine hcl in sodium chloride</i>)	9	

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<i>quazepam</i>	1	QL(1 ea daily); AL(At least 19 yrs old); PA	HETLIOZ CAPS (<i>tasimelteon</i>)	1	QL(1 ea daily); AL(At least 19 yrs old); PA
RESTORIL 7.5 MG, 22.5 MG (<i>temazepam</i>)	1	QL(1 ea daily); AL(At least 19 yrs old); PA	<i>ramelteon</i>	1	Brand Required; QL(1 ea daily); AL(At least 19 yrs old); PA
RESTORIL 15 MG, 30 MG (<i>temazepam</i>)	1	QL(1 ea daily); AL(At least 19 yrs old)	ROZEREM (<i>ramelteon</i>)	1	Brand Required; QL(1 ea daily); AL(At least 19 yrs old)
<i>temazepam 7.5 MG, 22.5 MG</i>	1	QL(1 ea daily); AL(At least 19 yrs old); PA	<i>tasimelteon CAPS</i>	1	QL(1 ea daily); AL(At least 19 yrs old); PA
<i>temazepam 15 MG, 30 MG</i>	1	QL(1 ea daily); AL(At least 19 yrs old)	LAXATIVES - Bowel Treatment Drugs		
<i>triazolam</i>	1	QL(1 ea daily); AL(At least 19 yrs old)	Laxative Combinations		
<i>zaleplon</i>	1	QL(2 ea daily); AL(At least 19 yrs old)	CLENPIQ SOLN 12 GM/175ML-3.5 GM/175ML-10 MG/175ML	1	QL(350 ml per fill retail); PA
ZOLPIDEM TARTRATE CAPS	1	QL(1 ea daily); AL(At least 19 yrs old); PA	GOLYTELY SOLR (<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate</i>)	1	QL(4000 ml per fill retail)
<i>zolpidem tartrate SUBL</i>	1	QL(1 ea daily); AL(At least 19 yrs old); PA	MOVIPREP (<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>)	9	QL(1 ea per fill retail)
<i>zolpidem tartrate TABS</i>	1	QL(1 ea daily); AL(At least 19 yrs old)	MOVIPREP (<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>)	1	QL(1 ea per fill retail)
<i>zolpidem tartrate TBCR</i>	2	QL(1 ea daily); AL(At least 19 yrs old)	<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>	1	QL(1 ea per fill retail)
Orexin Receptor Antagonists			<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>	1	QL(1 ea per fill retail)
BELSOMRA	3	QL(1 ea daily); AL(At least 19 yrs old)	<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR 6.72 GM-2.98 GM-5.84 GM-22.72 GM-240 GM</i>	1	
DAYVIGO	3	QL(1 ea daily); AL(At least 19 yrs old)	<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR 6.74 GM-2.97 GM-5.86 GM-22.74 GM-236 GM</i>	1	QL(4000 ml per fill retail)
QUVIVIQ	1	QL(1 ea daily); AL(At least 19 yrs old); PA	<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride</i>	1	QL(4000 ml per fill retail)
Selective Melatonin Receptor Agonists					
HETLIOZ LQ SUSP	1	AL(At least 3 yrs old - Up to 15 yrs old); PA			

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PLENVU	1	QL(3 ea per fill retail); PA
<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>	1	QL(354 ml per fill retail); PA
SUFLAVE	1	QL(2 ea per fill retail); PA
SUPREP BOWEL PREP KIT (<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>)	9	QL(354 ml per fill retail)
SUPREP BOWEL PREP KIT (<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>)	1	QL(354 ml per fill retail); PA
SUTAB	1	QL(24 ea per fill retail); PA
Laxatives - Miscellaneous		
KRISTALOSE PACK	1	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); PA
KRISTALOSE PACK	1	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); PA
<i>lactulose SOLN</i>	1	
MIRALAX MIX-IN PAX PACK (<i>polyethylene glycol 3350</i>)	9	
MIRALAX PACK (<i>polyethylene glycol 3350</i>)	9	
MIRALAX POWD (<i>polyethylene glycol 3350</i>)	9	QL(1581 gm per 30 day(s) retail; 1581 gm per 30 days mail)
<i>polyethylene glycol 3350 PACK</i>	1	AL(Up to 20 yrs old)
<i>polyethylene glycol 3350 POWD</i>	1	QL(1581 gm per 30 day(s) retail; 1581 gm per 30 days mail); AL(Up to 20 yrs old)
Stimulant Laxatives		

Drug Name	Drug Tier	Requirements/Limits
FLEET BISACODYL ENEM	1	QL(1110 ml per 30 day(s) retail; 1110 ml per 30 days mail); AL(Up to 20 yrs old); PA
Surfactant Laxatives		
<i>benzocaine-docusate sodium ENEM</i>	1	QL(150 ml per 30 day(s) retail; 150 ml per 30 days mail); AL(Up to 20 yrs old); PA
<i>docusate sodium ENEM 283 MG/5ML</i>	1	QL(150 ml per 30 day(s) retail); AL(Up to 20 yrs old); PA
LOCAL ANESTHETICS-Parenteral - Drugs for Numbing		
Local Anesthetic Combinations		
<i>bupivacaine w/ epinephrine SOLN 1 :200000-0.25 %, 1 :200000-0.5 %</i>	1	
<i>lidocaine w/ epinephrine SOLN 1 :100000-1 %, 1 :100000-2 %, 1 :200000-0.5 %, 1 :200000-1.5 %, 1 :200000-2 %</i>	1	
MARCAINE/EPINEPHRINE SOLN 1 :200000-0.25 %, 1 :200000-0.5 % (<i>bupivacaine w/ epinephrine</i>)	1	
MARCAINE/EPINEPHRINE SOLN 1 :200000-0.25 %, 1 :200000-0.5 % (<i>bupivacaine w/ epinephrine</i>)	9	
SENSORCAINE-MPF/EPINEPHRINE SOLN	1	
XYLOCAINE/EPINEPHRINE SOLN (<i>lidocaine w/ epinephrine</i>)	1	

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XYLOCAINE/EPINEPHRINE SOLN (<i>lidocaine w/ epinephrine</i>)	9		XYLOCAINE-MPF SOLN 0.5 %, 1 %, 1.5 %, 2 % (<i>lidocaine hcl (local anesth.)</i>)	1	
XYLOCAINE-MPF/EPINEPHRINE SOLN	1		XYLOCAINE-MPF SOLN 0.5 %, 1 %, 1.5 %, 2 % (<i>lidocaine hcl (local anesth.)</i>)	9	
XYLOCAINE-MPF/EPINEPHRINE SOLN (<i>lidocaine w/ epinephrine</i>)	9		XYLOCAINE SOLN 1 %, 2 % (<i>lidocaine hcl (local anesth.)</i>)	1	
XYLOCAINE-MPF/EPINEPHRINE SOLN (<i>lidocaine w/ epinephrine</i>)	1		Local Anesthetics - Esters		
Local Anesthetics - Amides			<i>chloroprocaine hcl IJ</i>	1	
BUPIVACAINE FISIOPHARMA SOLN IJ	1		CLOROTEKAL IT	1	
<i>bupivacaine hcl SOLN IJ</i>	1		NESACAINE IJ	1	
<i>bupivacaine in dextrose SOLN</i>	1		NESACAINE-MPF IJ (<i>chloroprocaine hcl</i>)	1	
EXPAREL	1		NESACAINE-MPF IJ (<i>chloroprocaine hcl</i>)	9	
<i>lidocaine hcl (local anesth.) SOLN</i>	1		MACROLIDES - Drugs to Treat Bacterial Infections		
MARCAINE SPINAL SOLN (<i>bupivacaine in dextrose</i>)	9		Azithromycin		
MARCAINE SPINAL SOLN (<i>bupivacaine in dextrose</i>)	1		<i>azithromycin PACK</i>	1	
MARCAINE SOLN IJ (<i>bupivacaine hcl</i>)	1		<i>azithromycin SOLR</i>	1	
MARCAINE SOLN IJ (<i>bupivacaine hcl</i>)	9		<i>azithromycin SUSR 100 MG/5ML</i>	1	QL(45 ml per fill retail)
<i>mepivacaine hcl SOLN 1 %, 1.5 %, 2 %</i>	1		<i>azithromycin SUSR 200 MG/5ML</i>	1	QL(12 ml daily)
NAROPIN SOLN IJ (<i>ropivacaine hcl</i>)	1		<i>azithromycin TABS</i>	1	
NAROPIN SOLN IJ (<i>ropivacaine hcl</i>)	9		ZITHROMAX TRI-PAK TABS (<i>azithromycin</i>)	1	
<i>ropivacaine hcl SOLN IJ</i>	1		ZITHROMAX Z-PAK TABS (<i>azithromycin</i>)	1	
			ZITHROMAX PACK (<i>azithromycin</i>)	1	
			ZITHROMAX SOLR (<i>azithromycin</i>)	9	
			ZITHROMAX SOLR (<i>azithromycin</i>)	1	
			ZITHROMAX SUSR 200 MG/5ML (<i>azithromycin</i>)	1	QL(12 ml daily)

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ZITHROMAX SUSR 100 MG/5ML (<i>azithromycin</i>)	1	QL(45 ml per fill retail)	<i>erythromycin stearate</i> TABS 250 MG	1	
ZITHROMAX TABS 500 MG (<i>azithromycin</i>)	9		Fidaxomicin		
ZITHROMAX TABS 250 MG, 500 MG (<i>azithromycin</i>)	1		DIFICID SUSR	1	QL(136 ml per 12 day(s) retail; 136 ml per 12 days mail)
Clarithromycin			DIFICID TABS	1	QL(20 ea per 10 day(s) retail; 20 ea per 10 days mail)
<i>clarithromycin SUSR</i>	1		MEDICAL DEVICES AND SUPPLIES		
<i>clarithromycin TABS</i>	1		Contraceptives		
<i>clarithromycin TB24</i>	1	QL(28 ea per 14 day(s) retail; 28 ea per 14 days mail)	CAYA DPRH	1	
Erythromycins			DUREX EXTRA SENSITIVE THIN DEVI	1	
E.E.S. GRANULES SUSR (<i>erythromycin ethylsuccinate</i>)	1		DUREX EXTRA SENSITIVE THIN MISC	1	
ERYPED 200 SUSR (<i>erythromycin ethylsuccinate</i>)	1		DUREX TROPICAL MISC	1	
ERYPED 400 SUSR (<i>erythromycin ethylsuccinate</i>)	1		FANTASY LUBRICATED/SPERMICI DE MISC	1	
ERYTHROCIN LACTOBIONATE (<i>erythromycin lactobionate</i>)	9		FANTASY LUBRICATED MISC	1	
ERYTHROCIN LACTOBIONATE (<i>erythromycin lactobionate</i>)	1		FC2 FEMALE CONDOM	1	QL(12 ea per 30 day(s) retail; 12 ea per 30 days mail)
<i>erythromycin base CPEP</i>	1		KIMONO COLORS DEVI	1	
<i>erythromycin base TABS</i>	1		KIMONO LUBRICATED MISC	1	
<i>erythromycin base TBEC</i>	1		KIMONO MAXX/LARGE FLARE MISC	1	
<i>erythromycin ethylsuccinate SUSR</i>	1		KIMONO MICRO THIN PLUS SPERMICIDE LUBRICATED MISC	1	
<i>erythromycin ethylsuccinate TABS</i>	1		KIMONO MICRO THIN MISC	1	
<i>erythromycin lactobionate 500 MG</i>	1		KIMONO PLUS SPERMICIDE LUBRICATED MISC	1	
			KIMONO SENSATION LUBRICATED MISC	1	

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KIMONO SENSATION PLUS SPERMICIDE LUBRICATED MISC	1		TRUSTEX/RIA LUBRICATED/SPERMICIDE MISC	1	
KIMONO SPECIAL DEVI	1		TRUSTEX/RIA LUBRICATED MISC	1	
MAXX LUBRICATED MISC	1		TRUSTEX/RIA NON-LUBRICATED MISC	1	
TROJAN MAGNUM MISC	1		Diabetic Supplies		
TROJAN ULTRA THIN/SPERMICIDAL LUBRICANT MISC	1		1ST TIER UNILET COMFORTOUCH LANCETS 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
TROJAN-ENZ LUBRICATED MISC	1		1ST TIER UNILET COMFORTOUCH LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
TROJAN-ENZ W/SPERMICIDAL MISC	1		ACCU-CHEK FASTCLIX LANCETDEVICE KIT KIT	1	
TRUE COVER DEVI	1		ACCU-CHEK FASTCLIX LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
TRUSTEX LUBRICATED EXTRALARGE MISC	1		ACCU-CHEK MULTICLIX LANCET DEVICE KIT KIT	1	
TRUSTEX LUBRICATED EXTRASTRENGTH MISC	1		ACCU-CHEK SAFE-T-PRO LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
TRUSTEX LUBRICATED/RIBBED/STUDDDED MISC	1		ACCU-CHEK SAFE-T-PRO PLUSLANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
TRUSTEX LUBRICATED/SPERMICIDE EXTRA LARGE MISC	1		ACCU-CHEK SOFTCLIX LANCETDEVICE KIT KIT	1	
TRUSTEX LUBRICATED/SPERMICIDE EXTRA STRENGTH MISC	1		ACCU-CHEK SOFTCLIX LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
TRUSTEX LUBRICATED/SPERMICIDE MISC	1				
TRUSTEX LUBRICATED MISC	1				
TRUSTEX NON-LUBRICATED MISC	1				
TRUSTEX WITH NONOXYNOL-9/RIBBED/STUDDDED MISC	1				
TRUSTEX/RIA LUBRICATED SPERMICIDE MISC	1				

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ACTI-LANCE LANCETS 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	ADVOCATE SAFETY LANCETS 26G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
ACTI-LANCE LITE SAFETY LANCETS 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	AGAMATRIX ULTRA-THIN LANCETS 33G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
ACTI-LANCE SPECIAL SAFETY LANCETS 17G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	AQUALANCE LANCETS ULTRA THIN 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
ACTI-LANCE SPECIAL SAFETYLANCETS 17G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	ASSURE COMFORT LANCETS ULTRA THIN 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
ACTI-LANCE UNIVERSAL SAFETY LANCETS 23G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	ASSURE LANCE LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
ADVANCED MOBILE LANCET 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	ASSURE LANCE SAFETY LANCET 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
ADVOCATE LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	AUTO-LANCET MINI MISC	1	
ADVOCATE LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	AUTOLET IMPRESSION LANCING DEVICE MISC	1	
ADVOCATE LANCING DEVICE MISC	1		AUTOLET LANCING DEVICE MISC	1	
ADVOCATE RAPID-SAFE LANCING DEVICE MISC	1		AUTOLET PLUS MISC	1	
ADVOCATE SAFETY LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	BD MICROTAINER LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
			CAREONE ADVANCED LANCINGDEVICE MISC	1	

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CAREONE LANCET SUPER THIN/30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	CHOSEN LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); PA; RX/OTC
CAREONE LANCET THIN	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	CHOSEN LANCING DEVICE MISC	1	
CARESENS LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); PA; RX/OTC	CHOSEN SAFETY LANCETS 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); PA; RX/OTC
CARETOUCH CONTROL SOLUTION LEVEL 2 LIQD	1	QL(1 ea per 365 day(s) retail; 1 ea per 365 days mail)	CLEVER CHEK LANCETS ULTRATHIN	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
CARETOUCH SAFETY LANCETS/26G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	CLEVER CHEK LANCETS ULTRATHIN 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
CARETOUCH SAFETY LANCETS/28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	CLEVER CHOICE COMFORT EZLANCETS 23G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
CARETOUCH TWIST LANCETS 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	CLEVER CHOICE COMFORT EZLANCETS 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
CARETOUCH TWIST LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	COAGUCHEK LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
CARETOUCH TWIST LANCETS 33G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	COMFORT ASSURED LANCETS MICRO THIN 33G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
CARETOUCH TWIST LANCETS MULTI COLOR/30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	COMFORT ASSURED LANCETS SUPER THIN 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC

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COMFORT LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	DEXCOM G6 TRANSMITTER	1	QL(1 ea per 90 day(s) retail; 1 ea per 90 days mail); PA
COMFORT TOUCH LANCETS ULTRA THIN 31G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	DEXCOM G7 RECEIVER	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); PA
COMFORT TOUCH PLUS SAFETY LANCETS PRESSURE ACTIVATED 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	DEXCOM G7 SENSOR	1	QL(3 ea per 30 day(s) retail); PA
CVS LANCETS 21G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	DIASCREEN 1K STRP	1	
CVS LANCETS MICRO THIN 33G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	DROPLET GENTEEL LANCING DEVICE MISC	1	PA
CVS LANCETS THIN 26G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	DROPLET LANCETS ULTRA THIN 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
CVS LANCETS ULTRA THIN 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	DROPLET LANCING DEVICE MISC	1	
CVS LANCING DEVICE MISC	1		DROPLET PERSONAL LANCETS30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
CVS ULTRA THIN LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	DRUG MART ADJUSTABLE LANCING DEVICE MISC	1	
DEXCOM G6 RECEIVER	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); PA	DRUG MART LANCETS THIN	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
DEXCOM G6 SENSOR	1	QL(3 ea per 30 day(s) retail); PA	DRUG MART ON-THE-GO LANCETS GENTLE 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
			DRUG MART UNILET LANCETSSUPER THIN 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
			DRUG MART UNILET LANCETSULTRA THIN 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC

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DRUG MART UNILET MICRO THIN LANCETS 33G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	EASY TOUCH LANCETS 26G/PULL-TOP	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
EASY COMFORT LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	EASY TOUCH LANCETS 28G/PRESSURE ACTIVATED	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
EASY COMFORT LANCETS 30G/PULL TOP	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	EASY TOUCH LANCETS 28G/PULL-TOP	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
EASY COMFORT LANCETS 30G/THIN TOP	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	EASY TOUCH LANCETS 28G/TWIST	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
EASY COMFORT LANCETS TWIST TOP	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	EASY TOUCH LANCETS 30G/PRESSURE ACTIVATED	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
EASY MINI EJECT LANCING DEVICE MISC	1		EASY TOUCH LANCETS 30G/PULL-TOP	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
EASY MINI LANCING DEVICE MISC	1				
EASY TOUCH INSULIN SYRINGE BARRELS LUER LOCK/1ML MISC	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EASY TOUCH LANCETS 30G/TWIST	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
EASY TOUCH LANCETS 21G/PRESSURE ACTIVATED	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	EASY TOUCH LANCETS 32G/PRESSURE ACTIVATED	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
EASY TOUCH LANCETS 23G/PRESSURE ACTIVATED	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	EASY TOUCH LANCETS 32G/PULL-TOP	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
EASY TOUCH LANCETS 26G/PRESSURE ACTIVATED	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	EASY TOUCH LANCETS 32G/TWIST	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC

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EASY TOUCH LANCETS 33G/TWIST	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	EMBRACE PRESSURE ACTIVATED SAFETY LANCET/21G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
EASY TOUCH LANCING DEVICE/EJECTOR MISC	1		EMBRACE PRESSURE ACTIVATED SAFETY LANCET/28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
EASY TOUCH SAFETY LANCETS21G/PRESSURE ACTIVATED	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	EQL COLOR LANCETS 21G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
EASY TOUCH SAFETY LANCETS23G/PRESSURE ACTIVATED	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	EQL SUPER THIN LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
EASY TOUCH SAFETY LANCETS26G/BUTTON ACTIVATED	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	EQL THIN LANCETS 26G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
EASY TOUCH SAFETY LANCETS26G/PRESSURE ACTIVATED	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	E-Z JECT LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
EASY TOUCH SAFETY LANCETS28G/BUTTON ACTIVATED	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	E-Z JECT LANCETS 21G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
EASY TOUCH SAFETY LANCETS28G/PRESSURE ACTIVATED	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	E-Z JECT LANCETS COLOR	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
EMBRACE LANCETS ULTRA THIN 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	E-Z JECT LANCETS SUPER THIN 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
EMBRACE LANCING DEVICE WITH EJECTOR MISC	1		E-Z JECT LANCETS THIN 26G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC

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E-ZJECT LANCETS MICRO-THIN 33G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	FREDS PHARMACY UNILET LANCETS SUPER THIN 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
EZ-LETS LANCETS 26G SUPER-SOFT	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	FREDS PHARMACY UNILET LANCETS ULTRA THIN 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
FIFTY50 SAFETY SEAL LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	FREESTYLE CONTROL SOLUTION HIGH/LOW LIQD	1	QL(1 ea per 365 day(s) retail; 1 ea per 365 days mail)
FIFTY50 SAFETY SEAL LANCETS 32G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	FREESTYLE LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
FIFTY50 UNILET LANCETS 33G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); PA
FINE 30	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	FREESTYLE LIBRE 14 DAY/SENSOR/FLASH MONITORING SYSTEM	1	QL(2 ea per 28 day(s) retail); PA
FINGERSTIX LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	FREESTYLE LIBRE 2/READER/FLASH GLUCOSE MONITORING SYSTEM	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); PA
FORA LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	FREESTYLE LIBRE 2/SENSOR/FLASH GLUCOSE MONITORING SYSTEM	1	QL(2 ea per 28 day(s) retail); PA
FORA LANCING DEVICE/CLEARCAP MISC	1		FREESTYLE LIBRE 3/READER/GLUCOSE MONITORING SYSTEM	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); PA
FORA LANCING DEVICE MISC	1		FREESTYLE LIBRE 3/SENSOR/GLUCOSE MONITORING SYSTEM	1	QL(2 ea per 28 day(s) retail); PA
FREDS PHARMACY AUTOLET LANCING DEVICE MISC	1		FREESTYLE LIBRE/READER/FLASH MONITORING SYSTEM	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); PA

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FREESTYLE UNISTICK II LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	GNP STERILE LANCETS 33G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
GENTEEL BUTTERFLY TOUCH LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	GOJJI LANCING DEVICE/CLEAR CAP MISC	1	
GLOBAL INJECT EASE LANCETS 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	GOJJI STERILE LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
GLOBAL INJECT EASE LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	GOODSENSE COLOR LANCETS MICRO-THIN 33G UNIVERSAL	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
GLOBAL LANCING DEVICE MISC	1		GOODSENSE LANCETS MICRO-THIN 33G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
GLUCOCOM LANCETS 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	GOODSENSE LANCETS MICRO-THIN 33G UNIVERSAL	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
GLUCOCOM LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	GOODSENSE LANCETS ULTRA-THIN 26G UNIVERSAL	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
GLUCOCOM LANCETS 33G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	GOODSENSE LANCETS ULTRA-THIN 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
GNP LANCETS 21G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	GOODSENSE LANCETS ULTRA-THIN 30G UNIVERSAL	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
GNP LANCETS THIN 26G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	GOODSENSE LANCING DEVICE MISC	1	
GNP LANCING SYSTEM DEVICE MISC	1		HEALTH CARE LANCING DEVICE MISC	1	

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HEALTHY ACCENTS AUTOLET IMPRESSION LANCING DEVICE MISC	1		KROGER LANCETS 21G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
HEALTHY ACCENTS UNILET LANCETS SUPER THIN 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	KROGER LANCETS MICRO THIN33G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
H-E-B INCONTROL ADVANCEDLANCING DEVICE MISC	1		KROGER LANCETS THIN 26G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
H-E-B INCONTROL LANCETS MICRO THIN 33G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	KROGER LANCETS ULTRATHIN30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
H-E-B INCONTROL LANCETS SUPER THIN 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	KROGER LANCING DEVICE MISC	1	
H-E-B INCONTROL LANCETS ULTRA THIN 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	LANCET DEVICE WITH EJECTOR MISC	1	
HYPOLANCE AST LANCING KIT KIT	1		LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
KINNEY LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
KINNEY THIN LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	LANCETS 30G TWIST TOP	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
KROGER AUTOLET LANCING DEVICE MISC	1		LANCETS 30G/TWIST TOP	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
KROGER HEALTHPRO TWIST LANCETS/26G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	LANCETS 33G EXTRA FINE	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
LANCETS 33G UNIVERSAL DESIGN	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	LIVE BETTER ADVANCED LANCING DEVICE MISC	1	
LANCETS MICRO THIN 33G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	LIVE BETTER LANCET SUPERTHIN 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
LANCETS SUPER THIN 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	LIVE BETTER LANCET ULTRATHIN 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
LANCETS THIN	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	LONGS LANCETS STANDARD	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
LANCETS ULTRA THIN	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	LONGS LANCETS THIN	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
LANCETS ULTRA THIN 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	LONGS LANCETS ULTRA THIN	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
LANCING DEVICE MISC	1		MEDLANCE PLUS EXTRA LANCETS 21G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
LANZO MISC	1		MEDLANCE PLUS LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
LEADER ADVANCED LANCING DEVICE MISC	1		MEDLANCE PLUS LANCETS LITE 25G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
LITE TOUCH LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	MEDLANCE PLUS LITE LANCETS 25G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
LITE TOUCH LANCING PEN MISC	1				
LITETOUCH LANCETS MICRO THIN 33G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC			

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MEDLANCE PLUS SPECIAL LANCETS 0.8MM	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	MEIJER SUPER THIN LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
MEDLANCE PLUS SUPERLITE 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	MICROLET LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
MEDLANCE PLUS SUPERLITE 30G/COMFORT MAX	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	MICROLET NEXT MISC	1	
MEDLANCE PLUS UNIVERSAL LANCETS 21G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	MINI LANCING DEVICE MISC	1	
MEDLANCE PLUS/LITE 25G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	MM LANCING DEVICE MISC	1	
MEDLANCE/LITE	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	MM TWIST LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
MEDLANCE/UNIVERSAL	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	MONOLET LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
MEIJER LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	MULTI-LANCET DEVICE 2 KIT	1	
MEIJER LANCETS THIN	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	MULTI-LANCET DEVICE MISC	1	
MEIJER LANCETS UNIVERSAL33G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	MYGLUCOHEALTH MGH SOFTLANCE LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
			NOVA SAFETY LANCETS 23G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
			NOVA SAFETY LANCETS 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC

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NOVA SUREFLEX LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	ONETOUCH ULTRASOFT LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
NOVA SUREFLEX LANCING DEVICE MISC	1		ONETOUCH VERIO FLEX BLOOD GLUCOSE MONITORING SYSTEM DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail)
ONETOUCH DELICA PLUS LANCETS EXTRA FINE 33G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	ONETOUCH VERIO FLEX BLOOD GLUCOSE MONITORING SYSTEM KIT	1	QL(1 ea per 365 day(s) retail; 1 ea per 365 days mail); RX/OTC
ONETOUCH DELICA PLUS LANCETS FINE 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	ONETOUCH VERIO LEVEL 3 CONTROL SOLUTION LIQD	1	QL(1 ea per 365 day(s) retail; 1 ea per 365 days mail)
ONETOUCH DELICA PLUS LANCING DEVICE MISC	1		ONETOUCH VERIO LEVEL 4 CONTROL SOLUTION LIQD	1	QL(1 ea per 365 day(s) retail; 1 ea per 365 days mail)
ONETOUCH DELICA SAFETY LANCING DEVICE	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	PC LANCETS SUPER THIN 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
ONETOUCH DELICA SAFETY LANCING DEVICE 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	PERFECT POINT SAFETY LANCETS/28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); PA; RX/OTC
ONETOUCH ULTRA 2 KIT	1	QL(1 ea per 365 day(s) retail; 1 ea per 365 days mail); RX/OTC	PERFECT POINT SAFETY LANCETS/30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); PA; RX/OTC
ONETOUCH ULTRA CONTROL SOLUTION LIQD	1	QL(1 ea per 365 day(s) retail; 1 ea per 365 days mail)	PHARMACIST CHOICE SELECTLANCETS/ULTRA THIN	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
ONETOUCH ULTRA CONTROL LIQD	1	QL(1 ea per 365 day(s) retail; 1 ea per 365 days mail)	PHARMACIST CHOICE ULTRA THIN LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
ONETOUCH ULTRASOFT 2 LANCETS FINE 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC			

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PHARMACIST CHOICE ULTRA THIN LANCETS 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	PRO COMFORT SAFETY LANCETS 30G PRESSURE ACTIVATED	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
PHARMACIST CHOICE ULTRA THIN LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	PRODIGY AUTOCODE BLOOD GLUCOSE MONITORING SYSTEM KIT	1	QL(1 ea per 365 day(s) retail; 1 ea per 365 days mail); PA; RX/OTC
PHARMACIST CHOICE ULTRA THIN LANCETS 31G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	PRODIGY LANCING DEVICE MISC	1	
PHARMACIST CHOICE ULTRA THIN LANCETS 33G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	PRODIGY PRESSURE ACTIVATED SAFETY LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
PIP LANCETS/30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	PRODIGY TWIST TOP LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
PREFERRED PLUS LANCETS COLORED 21G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	PURE COMFORT LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
PREFERRED PLUS LANCETS SUPER THIN 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	PX ADVANCED LANCING DEVICE MISC	1	
PREFERRED PLUS LANCETS THIN 26G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	PX LANCETS MICROTHIN 33G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
PRO COMFORT LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	PX LANCETS ULTRA THIN	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
PRO COMFORT LANCETS 31G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	PX LANCETS ULTRA THIN 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
			QC ADVANCED LANCING DEVICE MISC	1	

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QC LANCETS SUPER THIN	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	READYLANCE SAFETY LANCETS/30G/1.6MM	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
QC UNILET LANCETS 28G/ULTRA THIN	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	RELION 2-IN-1 LANCET DEVICES 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
QC UNILET LANCETS 33G/MICRO THIN	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	RELION LANCETS MICRO-THIN33G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
RA E-ZJECT LANCETS 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	RELION LANCETS THIN 26G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
RA E-ZJECT LANCETS THIN 26G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	RELION LANCETS ULTRA-THIN30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
RA E-ZJECT LANCETS THIN 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	RELION LANCING DEVICE KIT	1	
RA E-ZJECT LANCETS THIN 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	RELION LANCING DEVICE MISC	1	
RA E-ZJECT LANCETS ULTRATHIN 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	RELION TRUE METRIX AIR BLOOD GLUCOSE METER/BLUETOOTH KIT	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
READYLANCE SAFETY LANCETS/23G/1.8MM	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	RELION ULTRA THIN LANCETS/30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
READYLANCE SAFETY LANCETS/26G/1.8MM	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	RELION ULTRA THIN LANCETS30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
READYLANCE SAFETY LANCETS/28G/1.8MM	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	RELION ULTRA THIN PLUS LANCETS 32G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC

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RELION ULTRA THIN PLUS LANCETS 33G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	SAFETY LANCETS 21G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
RIGHTEST GD500 LANCING DEVICE MISC	1		SAFETY LANCETS 23G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
RIGHTEST GL300 LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	SAFETY LANCETS 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
SAFE-T-LANCE LOW FLOW 25G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	SAPS HEALTH CARE TWIST TOP LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
SAFE-T-LANCE NORMAL FLOW21G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	SAPS HEALTH PLUS TWIST TOP LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
SAFE-T-LANCE PLUS SAFETYLANCET HIGH FLOW	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	SAPS HEALTH TWIST TOP LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
SAFE-T-LANCE PLUS SAFETYLANCET LOW FLOW	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	SAPSCARE TWIST TOP LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
SAFE-T-LANCE PLUS SAFETYLANCET NORMAL FLOW	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	SELECT-LITE LANCING DEVICE MISC	1	
SAFETY LANCET 30G/PRESSURE ACTIVATED	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	SHOPKO AUTOLET LANCING DEVICE MISC	1	
SAFETY LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	SHOPKO ON-THE-GO COMFORTLANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
			SHOPKO UNILET LANCETS SUPER THIN 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC

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SHOPKO UNILET LANCETS ULTRA THIN 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	SURE COMFORT LANCETS 23G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
SIMPLE DIAGNOSTICS LANCING DEVICE MISC	1		SURE COMFORT LANCETS 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
SM MICRO THIN LANCETS 33G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	SURE COMFORT LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
SMART DIABETES VANTAGE LANCING DEVICE MISC	1		SURE COMFORT LANCING PEN MISC	1	
SMARTEST LANCETS 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	TECHLITE LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
SOLUS V2 LANCING DEVICE MISC	1		TODAYS HEALTH ADVANCED LANCING DEVICE MISC	1	
SOLUS V2 PRESSURE ACTIVATED SAFETY LANCETS 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	TODAYS HEALTH SUPER THINLANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
SOLUS V2 TWIST LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	TODAYS HEALTH ULTRA THINLANCETS 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
STERILANCE TL	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	TOPCARE LANCETS MICRO-THIN 33G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
SURE COMFORT LANCETS 18G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	TRAVEL LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
SURE COMFORT LANCETS 21G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC			

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TRUE COMFORT SAFETY LANCETS/30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	TRUEPLUS LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
TRUE COMFORT TWIST TOP LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	TRUEPLUS LANCETS 30G ULTRA THIN	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
TRUE METRIX AIR BLOOD GLUCOSE METER/BLUETOOTH SMART KIT	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	TRUEPLUS LANCETS 33G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
TRUE METRIX BLOOD GLUCOSEMETER KIT	1	QL(1 ea per 365 day(s) retail; 1 ea per 365 days mail); RX/OTC	TRUEPLUS LANCETS 33G MICRO THIN	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
TRUE METRIX CONTROL SOLUTION LEVEL 1 SOLN	1	QL(1 ea per 365 day(s) retail; 1 ea per 365 days mail)	TRUEPLUS SAFETY LANCETS 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
TRUE METRIX CONTROL SOLUTION LEVEL 2 SOLN	1	QL(1 ea per 365 day(s) retail; 1 ea per 365 days mail)	TWIST TOP LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
TRUE METRIX CONTROL SOLUTION LEVEL 3 SOLN	1	QL(1 ea per 365 day(s) retail; 1 ea per 365 days mail)	ULTI-LANCE AUTOMATIC/ CLEAR TIP MISC	1	
TRUEPLUS LANCETS 26G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	ULTILET CLASSIC LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
TRUEPLUS LANCETS 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	ULTILET LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
TRUEPLUS LANCETS 28G SUPER THIN	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	ULTILET LANCETS 33G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC

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ULILET SAFETY LANCETS 23G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	UNILET LANCETS MICRO-THIN33G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
ULTRA THIN LANCETS 31G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	UNILET LANCETS SUPER-THIN30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
ULTRA-CARE LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	UNILET LANCETS ULTRA-THIN 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
ULTRA-THIN II LANCETS 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	UNISTIK 2 NORMAL	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); PA; RX/OTC
ULTRA-THIN II LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	UNISTIK 3 COMFORT	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); PA; RX/OTC
UNILET COMFORTOUCH LANCET	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	UNISTIK 3 EXTRA	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); PA; RX/OTC
UNILET EXCELITE	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	UNISTIK 3 EXTRA	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); PA; RX/OTC
UNILET EXCELITE II	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	UNISTIK 3 GENTLE	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
UNILET G.P. SUPERLITE LANCET	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	UNISTIK 3 NORMAL	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); PA; RX/OTC
UNILET GP 28 ULTRA THIN	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	UNISTIK 3 NORMAL	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); PA; RX/OTC

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UNISTIK CZT COMFORT	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); PA; RX/OTC	UNISTIK TOUCH SAFETY LANCETS 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
UNISTIK CZT NORMAL	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); PA; RX/OTC	UNISTIK TOUCH SAFETY LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
UNISTIK NORMAL	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); PA; RX/OTC	UNIVERSAL 1 LANCETS THIN26G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
UNISTIK PRO SAFETY LANCET 21G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	UNIVERSAL 1 LANCETS ULTRA THIN 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
UNISTIK PRO SAFETY LANCET 25G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	VALUE PLUS LANCETS STANDARD 21G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
UNISTIK PRO SAFETY LANCET 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	VALUE PLUS LANCING DEVICE MISC	1	
UNISTIK SAFETY LANCETS 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	VALUMARK LANCET SUPER THIN 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
UNISTIK SAFETY LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	VALUMARK LANCET ULTRA THIN 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
UNISTIK TOUCH SAFETY LANCETS 21G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	VERIFINE SAFETY LANCET MINI 21G X 2.4MM	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
UNISTIK TOUCH SAFETY LANCETS 23G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	VERIFINE SAFETY LANCET MINI 23G X 1.8MM	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC

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VERIFINE SAFETY LANCET MINI 28G X 1.8MM	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	VIVAGUARD SAFETY LANCETS28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); PA; RX/OTC
VERIFINE SAFETY LANCET MINI 30G X 1.8MM	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	WALGREENS ADVANCED TRAVELLANCETS 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
VERIFINE UNIVERSAL LANCETS 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	WALGREENS COMFORT ASSURED LANCETS MICRO THIN/33G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
VERIFINE UNIVERSAL LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	WALGREENS COMFORT ASSURED LANCETS SUPER THIN/28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
VERIFINE UNIVERSAL LANCETS 33G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	WALGREENS LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
VIDA MIA AUTOLET LANCING DEVICE MISC	1		WALGREENS THIN LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
VIDA MIA UNILET LANCETS SUPER THIN 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	WALGREENS ULTRA THIN LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
VIDA MIA UNILET LANCETS ULTRA THIN 28G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	ZEVRX TWIST TOP LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC
VIVAGUARD LANCETS	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); RX/OTC	Parenteral Therapy Supplies		
VIVAGUARD LANCETS 30G	1	QL(600 ea per 90 day(s) retail; 600 ea per 90 days mail); PA; RX/OTC	1ST TIER UNIFINE PENTIPS/MINI/31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
VIVAGUARD LANCING DEVICE MISC	1				

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
1ST TIER UNIFINE PENTIPS29GX12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	1ST TIER UNIFINE PENTIPSPLUS/ORIGINAL /29GX12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
1ST TIER UNIFINE PENTIPS31GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	1ST TIER UNIFINE PENTIPSPLUS/ULTRA SHORT/31GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
1ST TIER UNIFINE PENTIPS31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ABOUTTIME PEN NEEDLE 32GX 5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
1ST TIER UNIFINE PENTIPS32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ABOUTTIME PEN NEEDLES 30GX 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
1ST TIER UNIFINE PENTIPS32GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	ABOUTTIME PEN NEEDLES 31G X 3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
1ST TIER UNIFINE PENTIPS33GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	ABOUTTIME PEN NEEDLES 31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
1ST TIER UNIFINE PENTIPSPLUS 31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ADVOCATE INSULIN PEN NEEDLE/32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC
1ST TIER UNIFINE PENTIPSPLUS 32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ADVOCATE INSULIN PEN NEEDLES	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
1ST TIER UNIFINE PENTIPSPLUS 33GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	ADVOCATE INSULIN PEN NEEDLES 29GX12.7MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
1ST TIER UNIFINE PENTIPSPLUS/MINI/31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ADVOCATE INSULIN PEN NEEDLES 31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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ADVOCATE INSULIN PEN NEEDLES 31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	AQ INSULIN SYRINGE/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ADVOCATE INSULIN SYRINGE/U-100/0.3ML/29GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	AQ INSULIN SYRINGE/1ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ADVOCATE INSULIN SYRINGE/U-100/0.3ML/30GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	AQ INSULIN SYRINGE/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ADVOCATE INSULIN SYRINGE/U-100/0.3ML/31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	AQINJECT PEN NEEDLE/31G X 3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ADVOCATE INSULIN SYRINGE/U-100/0.5ML/29GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	AQINJECT PEN NEEDLE/32G X 5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ADVOCATE INSULIN SYRINGE/U-100/0.5ML/30GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ASSURE ID SAFETY PEN NEEDLES 30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
ADVOCATE INSULIN SYRINGE/U-100/0.5ML/31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	AUM MINI INSULIN PEN NEEDLE/32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ADVOCATE INSULIN SYRINGE/U-100/1ML/29GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	AUM MINI INSULIN PEN NEEDLE/32GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ADVOCATE INSULIN SYRINGE/U-100/1ML/30GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	AUM MINI INSULIN PEN NEEDLE/32GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
ADVOCATE INSULIN SYRINGE/U-100/1ML/31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	AUM MINI INSULIN PEN NEEDLE/32GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)

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AUM MINI INSULIN PEN NEEDLE/33GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	BD LO-DOSE INSULIN SYRINGE MICROFINE IV/0.5ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
AUM MINI INSULIN PEN NEEDLE/33GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	BD 1/2ML TUBERCULIN SYRINGE/PERM NEEDLE/REG BEV/27G X 1/2" MISC	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); AL(Up to 20 yrs old)
AUM MINI INSULIN PEN NEEDLE/33GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	BD AUTOSHIELD DUO 30G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
AUM SAFETY PEN NEEDLE/31G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	BD ECLIPSE SYRINGE/1ML/30GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
AUM SAFETY PEN NEEDLE/31G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	BD INSULIN SYRINGE LUER-LOK/U-100/1ML	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
AURORA PEN NEEDLES 29GX12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	BD INSULIN SYRINGE MICROFINE IV/U-100/0.5ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
AURORA PEN NEEDLES 31G X6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	BD INSULIN SYRINGE MICROFINE IV/U-100/1ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
AURORA PEN NEEDLES 31G X8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	BD INSULIN SYRINGE MICROFINE/U-100/1ML/27G X 5/8"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
AURORA UNIFINE PENTIPS/32GX5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	BD INSULIN SYRINGE SAFETYGLIDE/1ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
AURORA UNIFINE PENTIPS/MINI/31GX3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	BD INSULIN SYRINGE ULTRAFINE HALF-UNIT/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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BD INSULIN SYRINGE ULTRAFINE/0.3ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	BD INSULIN SYRINGE ULTRA-FINE/1ML/30G X 12.7MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
BD INSULIN SYRINGE ULTRA-FINE/0.3ML/30G X 12.7MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	BD INSULIN SYRINGE ULTRA-FINE/1ML/31G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
BD INSULIN SYRINGE ULTRAFINE/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	BD INSULIN SYRINGE ULTRAFINE/U-100/0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
BD INSULIN SYRINGE ULTRA-FINE/0.3ML/31G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	BD INSULIN SYRINGE ULTRAFINE/U-100/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
BD INSULIN SYRINGE ULTRAFINE/0.5ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	BD INSULIN SYRINGE/U-100/0.5ML/29G X 12.7MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
BD INSULIN SYRINGE ULTRA-FINE/0.5ML/30G X 12.7MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	BD INSULIN SYRINGE/U-100/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
BD INSULIN SYRINGE ULTRAFINE/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	BD INSULIN SYRINGE/0.5ML/29G X 12.7MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
BD INSULIN SYRINGE ULTRA-FINE/0.5ML/31G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	BD INSULIN SYRINGE/1ML/27G X 12.7MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
BD INSULIN SYRINGE ULTRA-FINE/1/2 UNIT/0.3ML/31G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	BD INSULIN SYRINGE/1ML/29G X 12.7MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
BD INSULIN SYRINGE ULTRAFINE/1ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	BD INSULIN SYRINGE/U-100/1ML/27G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
			BD INSULIN SYRINGE/U-500/0.5ML/31G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)

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BD PEN NEEDLE/MICRO/ULTRA-FINE/32G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	BD SAFETYGLIDE INSULIN SYRINGE/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
BD PEN NEEDLE/MINI/ULTRA-FINE/31G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	BD SAFETYGLIDE INSULIN SYRINGE/0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
BD PEN NEEDLE/NANO 2ND GEN/32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	BD SAFETY-GLIDE INSULIN SYRINGE/0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
BD PEN NEEDLE/NANO 2ND GEN/32G X 5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	BD SAFETYGLIDE INSULIN SYRINGE/0.5ML/31G X 15/64"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
BD PEN NEEDLE/NANO/ULTRA-FINE/32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	BD SAFETYGLIDE INSULIN SYRINGE/1ML/31G X 15/64"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
BD PEN NEEDLE/ORIGINAL/ULTRA-FINE/29G X 12.7MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	BD SAFETYGLIDE INSULIN SYRINGE/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
BD PEN NEEDLE/SHORT/ULTRA-FINE/31G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	BD VEO INSULIN SYRINGE ULTRA-FINE/0.3ML/31G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
BD SAFETYGLIDE 1ML 27GX5/8"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	BD VEO INSULIN SYRINGE ULTRA-FINE/0.5ML/31G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
BD SAFETYGLIDE INSULIN SYRINGE/0.3ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	BD VEO INSULIN SYRINGE ULTRA-FINE/1/2 UNIT/0.3ML/31G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
BD SAFETYGLIDE INSULIN SYRINGE/0.3ML/31G X 15/64"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	BD VEO INSULIN SYRINGE ULTRA-FINE/1ML/31G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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PDL formulary drugs requiring prior authorization review without documented clinical drug criteria must be used for an FDA approved indication.

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BD VEO INSULIN SYRINGE ULTR-FINE/U-100/0.5ML/31G X 15/64"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	CAREONE UNIFINE PENTIPS 31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
CAREONE INSULIN SYRINGES/0.3ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	CAREONE UNIFINE PENTIPS PEN NEEDLES 32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
CAREONE INSULIN SYRINGES/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES 29GX12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
CAREONE INSULIN SYRINGES/0.5ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES 31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
CAREONE INSULIN SYRINGES/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES 31GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
CAREONE INSULIN SYRINGES/1ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES 31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
CAREONE INSULIN SYRINGES/1ML/31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES 32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
CAREONE UNIFINE PENTIPS 29GX12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES/33G X 5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
CAREONE UNIFINE PENTIPS 31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	CARETOUCH HYPODERMIC NEEDLES/27G X 1 1/2	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
CAREONE UNIFINE PENTIPS 31GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	CARETOUCH INSULIN SYRINGE/0.3ML/31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CARETOUCH INSULIN SYRINGE/0.5ML/31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	CARETOUCH PEN NEEDLES 32GX 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
CARETOUCH INSULIN SYRINGE/1ML/30GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	CARETOUCH PEN NEEDLES 32GX 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
CARETOUCH INSULIN SYRINGE/1ML/31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	CLEVER CHOICE COMFORT EZINSULIN PEN NEEDLES 31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
CARETOUCH INSULIN SYRINGE/U-100/1ML/28G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	CLEVER CHOICE COMFORT EZINSULIN PEN NEEDLES 33GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
CARETOUCH INSULIN SYRINGE/U-100/1ML/29G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	CLEVER CHOICE COMFORT EZINSULIN SYINGE/0.3ML/31G X 15/64"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC
CARETOUCH INSULIN SYRINGE0.5ML/30GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	CLEVER CHOICE COMFORT EZINSULIN SYINGE/0.5ML/31G X 15/64"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC
CARETOUCH PEN NEEDLE 29GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.3ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
CARETOUCH PEN NEEDLES 31G X 6 MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.3ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
CARETOUCH PEN NEEDLES 31GX 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.3ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
CARETOUCH PEN NEEDLES 31GX 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/U-100/1ML/31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	CLEVER CHOICE COMFORT EZPEN NEEDLES 29GX12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	CLEVER CHOICE COMFORT EZPEN NEEDLES 31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	CLEVER CHOICE COMFORT EZPEN NEEDLES 31GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	CLEVER CHOICE COMFORT EZPEN NEEDLES 31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/1.0ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	CLEVER CHOICE COMFORT EZPEN NEEDLES 32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/1ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	CLEVER CHOICE COMFORT EZPEN NEEDLES 32GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/1ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	CLEVER CHOICE COMFORT EZPEN NEEDLES 32GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	CLEVER CHOICE COMFORT EZPEN NEEDLES 32GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/1ML/31G X 15/64"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC	CLEVER CHOICE COMFORT EZPEN NEEDLES 33GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)

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CLEVER CHOICE COMFORT EZPEN NEEDLES 33GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	CLICKFINE PEN NEEDLES/31GX1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
CLEVER CHOICE COMFORT EZPEN NEEDLES 33GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	CLICKFINE UNIVERSAL PEN NEEDLES 31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
CLEVER CHOICE COMFORT EZPEN NEEDLES 33GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	COMFORT EZ INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
CLICKFINE PEN NEEDLE UNIVERSAL/31GX1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	COMFORT EZ INSULIN SYRINGE/U-100/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
CLICKFINE PEN NEEDLE UNIVERSAL/31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	COMFORT EZ MICRO/32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
CLICKFINE PEN NEEDLES 31G X 1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	COMFORT EZ PRO SAFETY PEN NEEDLES 30G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
CLICKFINE PEN NEEDLES 31G X 3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	COMFORT EZ PRO SAFETY PEN NEEDLES 31G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
CLICKFINE PEN NEEDLES 31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	COMFORT EZ PRO SAFETY PEN NEEDLES 31G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
CLICKFINE PEN NEEDLES 31G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	COMFORT EZ SHORT/31G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
CLICKFINE PEN NEEDLES 32G X 5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	COMFORT EZ/31G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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COMFORT EZ/31G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	COMFORT TOUCH PEN NEEDLES/33GX1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
COMFORT TOUCH PEN NEEDLES/31G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	DROPLET INSULIN SYRINGE 0.3ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
COMFORT TOUCH PEN NEEDLES/31G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	DROPLET INSULIN SYRINGE 0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
COMFORT TOUCH PEN NEEDLES/31G X 6 MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	DROPLET INSULIN SYRINGE 1ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
COMFORT TOUCH PEN NEEDLES/31G X 8 MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	DROPLET INSULIN SYRINGE U-100/0.3/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
COMFORT TOUCH PEN NEEDLES/32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	DROPLET INSULIN SYRINGE U-100/0.3ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
COMFORT TOUCH PEN NEEDLES/32G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	DROPLET INSULIN SYRINGE U-100/0.3ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
COMFORT TOUCH PEN NEEDLES/32G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	DROPLET INSULIN SYRINGE U-100/0.3ML/30G X 15/64"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
COMFORT TOUCH PEN NEEDLES/32G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	DROPLET INSULIN SYRINGE U-100/0.3ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
COMFORT TOUCH PEN NEEDLES/33G X 5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	DROPLET INSULIN SYRINGE U-100/0.3ML/31G X 15/64"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
COMFORT TOUCH PEN NEEDLES/33GX 3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	DROPLET INSULIN SYRINGE U-100/0.5ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DROPLET INSULIN SYRINGE U-100/0.5ML/30G X 15/64"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	DROPLET INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
DROPLET INSULIN SYRINGE U-100/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	DROPLET INSULIN SYRINGE/U-100/0.5ML/31G X 15/64"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
DROPLET INSULIN SYRINGE U-100/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	DROPLET INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
DROPLET INSULIN SYRINGE U-100/1ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	DROPLET INSULIN SYRINGE/U-100/1ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
DROPLET INSULIN SYRINGE U-100/1ML/30G X 15/64"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	DROPLET INSULIN SYRINGE/U-100/1ML/31G X 15/64"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
DROPLET INSULIN SYRINGE U-100/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	DROPLET INSULIN SYRINGE/U-100/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
DROPLET INSULIN SYRINGE U-100/1ML/31G X 15/64"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	DROPLET MICRON 34G X 9/64"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
DROPLET INSULIN SYRINGE U-100/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	DROPLET PEN NEEDLE/MICRON/34G X 9/64"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA
DROPLET INSULIN SYRINGE/U-100/0.3ML/31G X 15/64"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	DROPLET PEN NEEDLES 29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
DROPLET INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	DROPLET PEN NEEDLES 29GX10MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DROPLET PEN NEEDLES 29GX12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	DROPLET PEN NEEDLES 32GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
DROPLET PEN NEEDLES 30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	DROPLET PEN NEEDLES 32GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
DROPLET PEN NEEDLES 31G X3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 29GX12.5MM 1ML	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
DROPLET PEN NEEDLES 31G X5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX6MM 0.3ML	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
DROPLET PEN NEEDLES 31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX6MM 0.5ML	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
DROPLET PEN NEEDLES 31GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX6MM 1ML	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
DROPLET PEN NEEDLES 31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX8MM 0.3ML	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
DROPLET PEN NEEDLES 32G X 5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX8MM 0.5ML	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
DROPLET PEN NEEDLES 32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX8MM 1ML	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
DROPLET PEN NEEDLES 32GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	DROPSAFE SAFETY PEN NEEDLE/31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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PDL formulary drugs requiring prior authorization review without documented clinical drug criteria must be used for an FDA approved indication.

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DROPSAFE SAFETY PEN NEEDLES/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EASY COMFORT INSULIN SYRINGE/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
DROPSAFE SAFETY PEN NEEDLES/31G X 1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EASY COMFORT INSULIN SYRINGE/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
DRUG MART UNIFINE PENTIPS 31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EASY COMFORT INSULIN SYRINGE/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
DRUG MART UNIFINE PENTIPS29G X 12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EASY COMFORT INSULIN SYRINGE/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
DRUG MART UNIFINE PENTIPS31GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EASY COMFORT INSULIN SYRINGE/1ML/32GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
DRUG MART UNIFINE PENTIPS31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EASY COMFORT INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
DRUG MART UNIFINE PENTIPS32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EASY COMFORT INSULIN SYRINGE/U-100/1ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
DRUG MART UNIFINE PENTIPSPLUS 32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EASY COMFORT PEN NEEDLES31GX1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EASY COMFORT INSULIN SYRINGE/0.3ML/31G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	EASY COMFORT PEN NEEDLES31GX3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EASY COMFORT INSULIN SYRINGE/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EASY COMFORT PEN NEEDLES31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EASY COMFORT PEN NEEDLES32GX5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EASY TOUCH FLIPLOCK SAFETY INSULIN SYRINGE 1ML/30GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EASY COMFORT PEN NEEDLES33G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	EASY TOUCH FLIPLOCK SAFETY INSULIN SYRINGE 1ML/30GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EASY COMFORT PEN NEEDLES33G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	EASY TOUCH INSULIN SYRINGE/0.3ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EASY COMFORT PEN NEEDLES33G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	EASY TOUCH INSULIN SYRINGE/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EASY COMFORT SAFETY PEN NEEDLES 31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC	EASY TOUCH INSULIN SYRINGE/0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EASY COMFORT SAFETY PEN NEEDLES 31GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC	EASY TOUCH INSULIN SYRINGE/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EASY COMFORT SAFETY PEN NEEDLES 32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC	EASY TOUCH INSULIN SYRINGE/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EASY GLIDE PEN NEEDLES 33G X 5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	EASY TOUCH INSULIN SYRINGE/SAFETY/U-100/0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EASY TOUCH 32GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EASY TOUCH INSULIN SYRINGE/SAFETY/U-100/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EASY TOUCH 32GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	EASY TOUCH INSULIN SYRINGE/SAFETY/U-100/1ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EASY TOUCH FLIPLOCK SAFETY INSULIN SYRINGE 1ML/29GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC			

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EASY TOUCH INSULIN SYRINGE/SAFETY/U-100/1ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EASY TOUCH INSULIN SYRINGE/U-100/1ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EASY TOUCH INSULIN SYRINGE/U-100/0.3ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	EASY TOUCH INSULIN SYRINGE/U-100/1ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/27G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EASY TOUCH INSULIN SYRINGE/U-100/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EASY TOUCH PEN NEEDLE 30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EASY TOUCH PEN NEEDLE/30G X 3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	EASY TOUCH PEN NEEDLES 29GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EASY TOUCH PEN NEEDLES 31GX1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EASY TOUCH INSULIN SYRINGE/U-100/1ML/27G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EASY TOUCH PEN NEEDLES 31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EASY TOUCH INSULIN SYRINGE/U-100/1ML/27G X 5/8"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	EASY TOUCH PEN NEEDLES 32GX1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
EASY TOUCH INSULIN SYRINGE/U-100/1ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EASY TOUCH PEN NEEDLES 32GX3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
EASY TOUCH PEN NEEDLES 32GX5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EMBRACE PEN NEEDLES/30G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
EASY TOUCH PEN NEEDLES/31G X 3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EMBRACE PEN NEEDLES/31G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EASY TOUCH SAFETY PEN NEEDLES/29G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	EMBRACE PEN NEEDLES/31G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EASY TOUCH SAFETY PEN NEEDLES/29G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	EMBRACE PEN NEEDLES/32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EASY TOUCH SAFETY PEN NEEDLES/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	EQL INSULIN SYRINGE/0.3ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EASY TOUCH SHEATHLOCK SAFETY INSULIN SYRINGE 1ML/29GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EQL INSULIN SYRINGE/0.3ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EASY TOUCH SHEATHLOCK SAFETY INSULIN SYRINGE 1ML/30GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EQL INSULIN SYRINGE/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EASY TOUCH SHEATHLOCK SAFETY SYRINGE 1ML/30GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EQL INSULIN SYRINGE/0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EMBRACE PEN NEEDLES/29G X 12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EQL INSULIN SYRINGE/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EMBRACE PEN NEEDLES/30G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EQL INSULIN SYRINGE/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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EQL INSULIN SYRINGE/1ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EXEL COMFORT POINT INSULIN SYRINGE/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EQL INSULIN SYRINGE/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EXEL COMFORT POINT INSULIN SYRINGE/1ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EQL INSULIN SYRINGE/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EXEL COMFORT POINT INSULIN SYRINGE/1ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EXEL COMFORT POINT INSULIN PEN NEEDLES 29G X 12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	EXEL COMFORT POINT INSULIN SYRINGE/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EXEL COMFORT POINT INSULIN PEN NEEDLES 31G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	FIFTY50 PEN NEEDLES 31G X3/16" (5MM)	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EXEL COMFORT POINT INSULIN PEN NEEDLES 31G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	FIFTY50 PEN NEEDLES 31G X5/16" (8MM)	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EXEL COMFORT POINT INSULIN SYRINGE/0.3ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	FIFTY50 PEN NEEDLES 31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EXEL COMFORT POINT INSULIN SYRINGE/0.3ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	FIFTY50 PEN NEEDLES/31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EXEL COMFORT POINT INSULIN SYRINGE/0.5ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	FIFTY50 PEN NEEDLES/32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
EXEL COMFORT POINT INSULIN SYRINGE/0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	FIFTY50 PEN NEEDLES/32GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)

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FIFTY50 SUPERIOR COMFORTINSULIN SYRINGE/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	GLOBAL EASY GLIDE INSULIN SYRINGE/0.3ML/31G X 15/64"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
FIFTY50 SUPERIOR COMFORTINSULIN SYRINGE/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	GLOBAL EASY GLIDE INSULIN SYRINGE/0.5ML/31G X 15/64"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
FIFTY50 SUPERIOR COMFORTINSULIN SYRINGE/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	GLOBAL EASY GLIDE INSULIN SYRINGE/1ML/31G X 15/64"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
FREDS PHARMACY UNIFINE PENTIPS PEN NEEDLES 32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	GLOBAL EASY GLIDE INSULINSYRINGE/U-100/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
FREDS PHARMACY UNIFINE PENTIPS PLUS 31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	GLOBAL EASY GLIDE PEN NEEDLES 32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
FREDS PHARMACY UNIFINE PENTIPS PLUS 31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.3ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
GLOBAL EASE INJECT PEN NEEDLES 29GX12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.3ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
GLOBAL EASE INJECT PEN NEEDLES 31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.3ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
GLOBAL EASE INJECT PEN NEEDLES 32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
GLOBAL EASE INJECT PEN NEEDLES 31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	GLOBAL INSULIN SYRINGES/U-100/0.3ML/30GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	GNP CLICKFINE UNIVERSAL PEN NEEDLES 31GX1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	GNP CLICKFINE UNIVERSAL PEN NEEDLES 31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	GNP INSULIN SYRINGE/0.3ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	GNP INSULIN SYRINGE/0.3ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	GNP INSULIN SYRINGE/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	GNP INSULIN SYRINGE/0.5ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	GNP INSULIN SYRINGE/0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	GNP INSULIN SYRINGE/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
GLOBAL INSULIN SYRINGE/U-100/0.3ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	GNP INSULIN SYRINGE/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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PDL formulary drugs requiring prior authorization review without documented clinical drug criteria must be used for an FDA approved indication.

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
GNP INSULIN SYRINGE/1ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	GNP ULTIGUARD SAFEPACK/MINI PEN NEEDLE/32GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
GNP INSULIN SYRINGE/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	GNP ULTIGUARD SAFEPACK/SHORT PEN NEEDLE/31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
GNP INSULIN SYRINGE/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	GNP ULTRA COMFORT INSULIN SYRINGE/1ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
GNP INSULIN SYRINGES/1ML/28GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	GOODSENSE CLICKFINE SAFETY PEN NEEDLE/31G X 3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
GNP ULTICARE PEN NEEDLES/31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	GOODSENSE PEN NEEDLE/PENFINE CLASSIC/31G X 3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
GNP ULTICARE PEN NEEDLES/32GX 5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	GOODSENSE PEN NEEDLE/PENFINE CLASSIC/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
GNP ULTICARE PEN NEEDLES/32GX1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	GOODSENSE PEN NEEDLE/PENFINE CLASSIC/32G X 1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
GNP ULTICARE PEN NEEDLES31G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	GOODSENSE PEN NEEDLE/PENFINE CLASSIC/32G X 5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
GNP ULTIGUARD SAFEPACK/MICRO PEN NEEDLE/32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	HEALTHWISE INSULIN SYRINGE/U-100/0.3ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
GNP ULTIGUARD SAFEPACK/MINI PEN NEEDLE/31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	HEALTHWISE INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
HEALTHWISE INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	HEALTHWISE UNIFINE PENTIPS PEN NEEDLES 32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
HEALTHWISE INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	HEALTHY ACCENTS UNIFINE PENTIPS PEN NEEDLES 29GX12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
HEALTHWISE INSULIN SYRINGE/U-100/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	HEALTHY ACCENTS UNIFINE PENTIPS PEN NEEDLES 31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
HEALTHWISE INSULIN SYRINGE/U-100/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	HEALTHY ACCENTS UNIFINE PENTIPS PEN NEEDLES 31GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
HEALTHWISE MICRON PEN NEEDLES/32G X 5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	HEALTHY ACCENTS UNIFINE PENTIPS PEN NEEDLES 31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
HEALTHWISE MINI PEN NEEDLES 31GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	HEALTHY ACCENTS UNIFINE PENTIPS PEN NEEDLES 32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
HEALTHWISE PEN NEEDLES 29GX12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	H-E-B IN CONTROL PEN NEEDLE 31GX3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
HEALTHWISE SHORT PEN NEEDLES 31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	H-E-B IN CONTROL PEN NEEDLES 31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
HEALTHWISE SHORT PEN NEEDLES/31G X 3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	H-E-B IN CONTROL PEN NEEDLES 31GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
HEALTHWISE SHORT PEN NEEDLES/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	H-E-B IN CONTROL PEN NEEDLES 31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
H-E-B IN CONTROL PEN NEEDLES/NANO/32GX4 MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	INCONTROL ULTICARE MINI PEN NEEDLES/31G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
H-E-B IN CONTROL UNIFINEPENTIPS PLUS 31GX1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	INCONTROL ULTICARE MINI PEN NEEDLES/31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
H-E-B IN CONTROL UNIFINEPENTIPS PLUS 31GX3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	INCONTROL ULTICARE MINI PEN NEEDLES/32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
H-E-B IN CONTROL UNIFINEPENTIPS PLUS 31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	INSULIN SYRINGE 1ML/31G X1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
H-E-B IN CONTROL UNIFINEPENTIPS PLUS 31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	INSULIN SYRINGE/0.3ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
H-E-B IN CONTROL UNIFINEPENTIPS PLUS 32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	INSULIN SYRINGE/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
H-E-B IN CONTROL UNIFINEPENTIPS PLUS 32GX5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	INSULIN SYRINGE/0.5ML/27G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
H-E-B IN CONTROL UNIFINEPENTIPS PLUS 33GX5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	INSULIN SYRINGE/0.5ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
H-E-B INCONTROL PEN NEEDLES 29GX12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	INSULIN SYRINGE/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
HM ULTICARE MINI PEN NEEDLES/31G X 5MM (3/16")	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	INSULIN SYRINGE/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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INSULIN SYRINGE/1ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	INSULIN SYRINGE/U-100/0.3ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
INSULIN SYRINGE/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
INSULIN SYRINGE/NEEDLE 0.3ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	INSULIN SYRINGE/U-100/1ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
INSULIN SYRINGE/NEEDLE 0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	INSULIN SYRINGE/U-100/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
INSULIN SYRINGE/NEEDLE 0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	INSULIN SYRINGES 0.3ML/31G X 1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
INSULIN SYRINGE/NEEDLE 0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	INSULIN SYRINGES 0.5ML/31G X 1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
INSULIN SYRINGE/NEEDLE 0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	INSULIN SYRINGES/U-100/0.5ML/27GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
INSULIN SYRINGE/NEEDLE 1ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	INSULIN SYRINGES/U-100/0.5ML/28GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC
INSULIN SYRINGE/NEEDLE 1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	INSULIN SYRINGES/U-100/0.5ML/28GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
INSULIN SYRINGE/NEEDLE 1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	INSULIN SYRINGES/U-100/0.5ML/29GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
INSULIN SYRINGES/U-100/0.5ML/29GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC	INSULIN SYRINGES/U-100/1ML/29GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC
INSULIN SYRINGES/U-100/0.5ML/30GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC	INSULIN SYRINGES/U-100/1ML/30GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC
INSULIN SYRINGES/U-100/0.5ML/30GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	INSULIN SYRINGES/U-100/1ML/30GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
INSULIN SYRINGES/U-100/0.5ML/31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC	INSULIN SYRINGES/U-100/1ML/31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC
INSULIN SYRINGES/U-100/0.5ML/31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	INSULIN SYRINGES/U-100/1ML/31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
INSULIN SYRINGES/U-100/1ML/27GX/1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	INSUPEN 29G X 12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
INSULIN SYRINGES/U-100/1ML/27GX/1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC	INSUPEN 31G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
INSULIN SYRINGES/U-100/1ML/28GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC	INSUPEN 31G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
INSULIN SYRINGES/U-100/1ML/28GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	INSUPEN 32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
INSULIN SYRINGES/U-100/1ML/29GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	INSUPEN 33GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
INSUPEN PEN NEEDLES 32G X4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	KMART VALU PLUS INSULIN SYRINGE/1ML/30G	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
INSUPEN SENSITIVE 32GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	KROGER INSULIN SYRINGE/0.3ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
INSUPEN SENSITIVE 32GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	KROGER INSULIN SYRINGE/0.3ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
INSUPEN ULTRAFIN 30GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	KROGER INSULIN SYRINGE/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
INSUPEN ULTRAFIN 31GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	KROGER INSULIN SYRINGE/0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
INSUPEN ULTRAFIN 31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	KROGER INSULIN SYRINGE/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
KINRAY INSULIN SYRINGE PREFERRED PLUS/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	KROGER INSULIN SYRINGE/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
KINRAY INSULIN SYRINGE PREFERRED PLUS/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	KROGER INSULIN SYRINGE/1ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
KINRAY INSULIN SYRINGE PREFERRED PLUS/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	KROGER INSULIN SYRINGE/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
KMART VALU PLUS INSULIN SYRINGE/0.5ML/29G	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	KROGER INSULIN SYRINGE/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
KMART VALU PLUS INSULIN SYRINGE/0.5ML/30G	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
KROGER PEN NEEDLES 29G X12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	LEADER INSULIN SYRINGE/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
KROGER PEN NEEDLES 31G X8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	LEADER INSULIN SYRINGE/0.5ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
KROGER PEN NEEDLES 31GX1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	LEADER INSULIN SYRINGE/0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
KROGER PEN NEEDLES/31G X1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	LEADER INSULIN SYRINGE/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
KROGER PEN NEEDLES/31G X3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	LEADER INSULIN SYRINGE/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
KROGER PEN NEEDLES/31G X5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	LEADER INSULIN SYRINGE/1ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
KROGER PEN NEEDLES/32G X5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	LEADER INSULIN SYRINGE/1ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
KROGER PEN NEEDLES/33G X5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	LEADER INSULIN SYRINGE/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
LEADER INSULIN SYRINGE/0.3ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	LEADER INSULIN SYRINGE/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
LEADER INSULIN SYRINGE/0.3ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	LEADER UNIFINE PENTIPS PLUS/MINI/31GX3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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LEADER UNIFINE PENTIPS PLUS/SHORT/31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	LITETOUGH INSULIN SYRINGE/U-100/0.5ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
LEADER UNIFINE PENTIPS/MINI/31GX3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	LITETOUGH INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
LEADER UNIFINE PENTIPS/NANO/32GX5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	LITETOUGH INSULIN SYRINGE/U-100/1ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
LEADER UNIFINE PENTIPS/PLUS/32GX5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	LITETOUGH INSULIN SYRINGE/U-100/1ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
LITETOUGH INSULIN SYRINGE/0.3ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	LITETOUGH INSULIN SYRINGE/U-100/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
LITETOUGH INSULIN SYRINGE/0.3ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	LITETOUGH PEN NEEDLES 29GX12.7MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
LITETOUGH INSULIN SYRINGE/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	LITETOUGH PEN NEEDLES 31G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
LITETOUGH INSULIN SYRINGE/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	LITETOUGH PEN NEEDLES 31GX8MM SHORT	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
LITETOUGH INSULIN SYRINGE/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	LITETOUGH PEN NEEDLES/31G X 3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
LITETOUGH INSULIN SYRINGE/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	LONGS INSULIN SYRINGE/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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MAGELLAN INSULIN SAFETY SYRINGE/U-100/0.3ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MAXICOMFORT II PEN NEEDLES/31G X 1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
MAGELLAN INSULIN SAFETY SYRINGE/U-100/0.3ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MAXI-COMFORT INSULIN SYRINGE/U-100/0.5ML/28GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
MAGELLAN INSULIN SAFETY SYRINGE/U-100/0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MAXI-COMFORT INSULIN SYRINGE/U-100/1ML/28GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
MAGELLAN INSULIN SAFETY SYRINGE/U-100/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MAXICOMFORT INSULIN SYRINGES 27G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
MAGELLAN INSULIN SAFETY SYRINGE/U-100/1ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MAXI-COMFORT SAFETY PEN NEEDLE/29G X 3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
MAGELLAN INSULIN SAFETY SYRINGE/U-100/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MAXI-COMFORT SAFETY PEN NEEDLE/29G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
MARATHON MEDICAL PENTIPS29GX12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MEDICINE SHOPPE PEN NEEDLES 29G X 12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
MARATHON MEDICAL PENTIPS31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MEDICINE SHOPPE PEN NEEDLES 31G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
MARATHON MEDICAL PENTIPS31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MEDICINE SHOPPE PEN NEEDLES 31G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
MARATHON MEDICAL PENTIPS32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MEIJER PEN NEEDLES 29G X12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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MEIJER PEN NEEDLES 31G X6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MM INSULIN SYRINGE/U-100/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
MEIJER PEN NEEDLES 31G X8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MM PEN NEEDLES 31G X 1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
MICRODOT PEN NEEDLE/31G X 6 MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MM PEN NEEDLES 31G X 3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
MICRODOT PEN NEEDLE/32G X 4 MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MM PEN NEEDLES 31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
MICRODOT PEN NEEDLE/33G X 4 MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	MM PEN NEEDLES 32G X 5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
MM INSULIN SYRINGE/U-100/0.3ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MONOJECT INSULIN SYRINGE/1ML	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
MM INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MONOJECT INSULIN SYRINGE/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
MM INSULIN SYRINGE/U-100/1/2ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MONOJECT INSULIN SYRINGE/DETACH NEEDLE/1ML/25G X 5/8"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
MM INSULIN SYRINGE/U-100/1/2ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MONOJECT INSULIN SYRINGE/DETACH NEEDLE/1ML/27G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
MM INSULIN SYRINGE/U-100/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MONOJECT INSULIN SYRINGE/PERM NEEDLE/1ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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MONOJECT INSULIN SYRINGE/PERM NEEDLE/U-100/0.5ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MONOJECT INSULIN SYRINGE/U-100/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
MONOJECT INSULIN SYRINGE/SAFETY/PERM NEEDLE/0.3ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MONOJECT INSULIN SYRINGE/REGULAR LUER TIP/SOFTPACK/1ML	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
MONOJECT INSULIN SYRINGE/SAFETY/PERM NEEDLE/0.3ML/29GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.3ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
MONOJECT INSULIN SYRINGE/SAFETY/PERM NEEDLE/0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.3ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
MONOJECT INSULIN SYRINGE/SAFETY/PERM NEEDLE/1ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
MONOJECT INSULIN SYRINGE/SOFTPACK/1ML/27G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.5ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
MONOJECT INSULIN SYRINGE/SOFTPACK/U-100/0.5ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
MONOJECT INSULIN SYRINGE/U-100/0.3ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
MONOJECT INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
MONOJECT INSULIN SYRINGE/U-100/1ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	MONOJECT ULTRA COMFORT INSULIN SYRINGE/1ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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MONOJECT ULTRA COMFORT INSULIN SYRINGE/1ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PC UNIFINE PENTIPS 31G X8MM SHORT	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
MS INSULIN SYRINGE/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PEN NEEDLES	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
MS INSULIN SYRINGE/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PEN NEEDLES 29GX12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
MS INSULIN SYRINGE/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PEN NEEDLES 30GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
NOVOFINE AUTOCOVER PEN NEEDLE 30G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	PEN NEEDLES 30GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
NOVOFINE PEN NEEDLE 32G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	PEN NEEDLES 31G X 3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
NOVOFINE PLUS PEN NEEDLE32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PEN NEEDLES 31G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PC UNIFINE PENTIPS 29G X1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PEN NEEDLES 31G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PC UNIFINE PENTIPS 31G X5MM MINI	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PEN NEEDLES 31G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC
PC UNIFINE PENTIPS 31G X6MM ULTRA SHORT	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PEN NEEDLES 31G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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PEN NEEDLES 31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PEN NEEDLES/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PEN NEEDLES 31GX6MM (1/4")	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PEN NEEDLES/31G X 1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PEN NEEDLES 31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PEN NEEDLES/31G X 3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PEN NEEDLES 31GX8MM (5/16")	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PEN NEEDLES/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PEN NEEDLES 32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC	PEN NEEDLES/31G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PEN NEEDLES 32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PEN NEEDLES/32G X 5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PEN NEEDLES 32G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PENTIPS 29G X 12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PEN NEEDLES 32G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	PENTIPS 29GX12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PEN NEEDLES 32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PENTIPS 31G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PEN NEEDLES 33G X 5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	PENTIPS 31G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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PENTIPS 31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PREFERRED PLUS INSULIN SYRINGE/U-100/0.5ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PENTIPS 31GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PREFERRED PLUS INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PENTIPS 31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PREFERRED PLUS INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PENTIPS 32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PREFERRED PLUS INSULIN SYRINGE/U-100/1ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PENTIPS 32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PREFERRED PLUS INSULIN SYRINGE/U-100/1ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PENTIPS 32GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	PREFERRED PLUS INSULIN SYRINGE/U-100/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PIP PEN NEEDLES 31G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PREFERRED PLUS UNIFINE PENTIPS 29G X 12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PIP PEN NEEDLES 32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PREFERRED PLUS UNIFINE PENTIPS 31G X 6MM ULTRA SHORT	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PREFERRED PLUS INSULIN SYRINGE/U-100/0.3ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PREFERRED PLUS UNIFINE PENTIPS 31G X 8MM SHORT	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PREFERRED PLUS INSULIN SYRINGE/U-100/0.3ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PREFERRED PLUS UNIFINE PENTIPS 32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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PREFERRED PLUS UNIFINE PENTIPS/MINI/31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PRO COMFORT INSULIN SYRINGES/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PREVENT DROPSAFE SAFETY PEN NEEDLES 31GX1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PRO COMFORT INSULIN SYRINGES/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC
PREVENT DROPSAFE SAFETY PEN NEEDLES 31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PRO COMFORT PEN NEEDLES/31G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PRO COMFORT INSULIN SYRINGES/0.5ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	PRO COMFORT PEN NEEDLES/32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PRO COMFORT INSULIN SYRINGES/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PRO COMFORT PEN NEEDLES/32G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PRO COMFORT INSULIN SYRINGES/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PRO COMFORT PEN NEEDLES/32G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
PRO COMFORT INSULIN SYRINGES/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC	PRODIGY INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PRO COMFORT INSULIN SYRINGES/1ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PRODIGY INSULIN SYRINGE/1/2ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PRO COMFORT INSULIN SYRINGES/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC	PRODIGY INSULIN SYRINGE/1ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PRO COMFORT INSULIN SYRINGES/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	PURE COMFORT PEN NEEDLE 32G X6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)

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PURE COMFORT PEN NEEDLE 32G X8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	PX PEN NEEDLE 31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PURE COMFORT PEN NEEDLE/32G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	QC UNIFINE PENTIPS 32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PURE COMFORT PEN NEEDLE/32G X4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	RA INSULIN SYRINGE/0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PURE COMFORT SAFETY PEN NEEDLE 31G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	RA INSULIN SYRINGE/1ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PURE COMFORT SAFETY PEN NEEDLE 31G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	RA INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PURE COMFORT SAFETY PEN NEEDLE 32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	RA INSULIN SYRINGE/U-100/1 ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PX EXTRA SHORT PEN NEEDLES 31GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	RA PEN NEEDLES 31G X 5MM3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PX INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	RA PEN NEEDLES 31G X 8MM5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PX MINI PEN NEEDLES 31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	RAYA SURE PEN NEEDLE 29GX 12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
PX PEN NEEDLE 29GX12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	RAYA SURE PEN NEEDLE 31GX 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)

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RAYA SURE PEN NEEDLE 31GX 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	RELION INSULIN SYRINGE/U-100/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
RAYA SURE PEN NEEDLE 31GX 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	RELION MINI PEN NEEDLES 31GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
RAYA SURE PEN NEEDLE 31GX 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	RELION PEN NEEDLES 29GX12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
RELION INSULIN SYRINGE 0.5ML/31G X 15/64"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	RELION PEN NEEDLES 31G X6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
RELION INSULIN SYRINGE 1ML/31GX15/64"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	RELION PEN NEEDLES 31G X8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
RELION INSULIN SYRINGE/U-100/0.3ML/31G X 15/64"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	RELION PEN NEEDLES 31GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
RELION INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	RELION PEN NEEDLES 31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
RELION INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	RELION PEN NEEDLES 32G X4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
RELION INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	RELION PEN NEEDLES 32G X5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
RELION INSULIN SYRINGE/U-100/1ML/31G X 15/64"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	RELION PEN NEEDLES 32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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RELION PEN NEEDLES/31G X1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	SHOPKO UNIFINE PENTIPS PEN NEEDLES/SHORT/31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
RELION SHORT PEN NEEDLES31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	SHOPKO UNIFINE PENTIPS PLUS PEN NEEDLES/MICRO/REMOVR/32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
SAFETY PEN NEEDLES/30G X3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	SHOPKO UNIFINE PENTIPS PLUS PEN NEEDLES/MINI/REMOVER/31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
SAFETY PEN NEEDLES/30G X5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	SHOPKO UNIFINE PENTIPS PLUS PEN NEEDLES/REMOVER/29GX12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
SECURES SAFE SAFETY INSULIN SYRINGES/U-100/0.5ML/29GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	SHOPKO UNIFINE PENTIPS PLUS PEN NEEDLES/SHORT/REMOVR/31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
SECURES SAFE SAFETY INSULIN SYRINGES/U-100/1ML/29GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	SURE COMFORT AUTOKEEPER SAFETY PEN NEEDLES 31GX1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
SECURES SAFE SAFETY PEN NEEDLES/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	SURE COMFORT AUTOKEEPER SAFETY PEN NEEDLES 32GX5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
SHOPKO UNIFINE PENTIPS PEN NEEDLES/MICRO/32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	SURE COMFORT INSULIN SYRINGE/U-100/0.3ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
SHOPKO UNIFINE PENTIPS PEN NEEDLES/MINI/31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	SURE COMFORT INSULIN SYRINGE/U-100/0.3ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
SHOPKO UNIFINE PENTIPS PEN NEEDLES/ORIGINAL/29GX12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	SURE COMFORT INSULIN SYRINGE/U-100/0.3ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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SURE COMFORT INSULIN SYRINGE/U-100/0.3ML/31G X 5/16	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	SURE COMFORT INSULIN SYRINGE/U-100/1ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
SURE COMFORT INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	SURE COMFORT INSULIN SYRINGE/U-100/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
SURE COMFORT INSULIN SYRINGE/U-100/0.3ML/31GX1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	SURE COMFORT INSULIN SYRINGE/U-100/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	SURE COMFORT INSULIN SYRINGES/0.5ML/31G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	SURE COMFORT INSULIN SYRINGES/U-100/1ML/31GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	SURE COMFORT PEN NEEDLES29GX1/2" 12.7MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	SURE COMFORT PEN NEEDLES30GX5/16" SHORT	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/31G X 5/16	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	SURE COMFORT PEN NEEDLES31GX3/16" (5MM)	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
SURE COMFORT INSULIN SYRINGE/U-100/1ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	SURE COMFORT PEN NEEDLES31GX5/16" (8MM)	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
SURE COMFORT INSULIN SYRINGE/U-100/1ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	SURE COMFORT PEN NEEDLES32GX5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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SURE COMFORT PEN NEEDLES32GX5/32" (4MM)	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TECHLITE INSULIN SYRINGEU-100/1ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
SURE COMFORT PEN NEEDLES32GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	TECHLITE INSULIN SYRINGEU-100/1ML/31G X 15/64"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TECHLITE INSULIN SYRINGEU-100/0.3ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TECHLITE INSULIN SYRINGEU-100/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TECHLITE INSULIN SYRINGEU-100/0.3ML/31G X 15/64"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TECHLITE PEN NEEDLES 29GX 12 MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TECHLITE INSULIN SYRINGEU-100/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TECHLITE PEN NEEDLES 31GX 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TECHLITE INSULIN SYRINGEU-100/0.5ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	TECHLITE PEN NEEDLES/31GX 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TECHLITE INSULIN SYRINGEU-100/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TECHLITE PEN NEEDLES/32GX 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
TECHLITE INSULIN SYRINGEU-100/0.5ML/31G X 15/64"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TECHLITE PLUS PEN NEEDLES32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TECHLITE INSULIN SYRINGEU-100/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TODAYS HEALTH MINI PEN NEEDLES 31G X 1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TECHLITE INSULIN SYRINGEU-100/1ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TODAYS HEALTH ORIGINAL PEN NEEDLES 29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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TODAYS HEALTH SHORT PEN NEEDLES 31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TOPCARE ULTRA COMFORT INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TOPCARE CLICKFINE UNIVERSAL PEN NEEDLES 31GX1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TOPCARE ULTRA COMFORT INSULIN SYRINGE/U-100/1ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TOPCARE CLICKFINE UNIVERSAL PEN NEEDLES 31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TRUE COMFORT INSULIN SYRINGE/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TOPCARE ULTRA COMFORT INSULIN SYRINGE/0.3ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TRUE COMFORT INSULIN SYRINGE/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TOPCARE ULTRA COMFORT INSULIN SYRINGE/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TRUE COMFORT PEN NEEDLES31G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TOPCARE ULTRA COMFORT INSULIN SYRINGE/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TRUE COMFORT PEN NEEDLES31G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TOPCARE ULTRA COMFORT INSULIN SYRINGE/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TRUE COMFORT PEN NEEDLES32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TOPCARE ULTRA COMFORT INSULIN SYRINGE/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TRUE COMFORT PRO INSULIN SYRINGE/1ML/32GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
TOPCARE ULTRA COMFORT INSULIN SYRINGE/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TRUE COMFORT PRO INSULINSYRINGE/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TOPCARE ULTRA COMFORT INSULIN SYRINGE/U-100/0.3ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TRUE COMFORT PRO INSULINSYRINGE/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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TRUE COMFORT PRO INSULINSYRINGE/0.5ML/32G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	TRUE COMFORT PRO PEN NEEDLES 32G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TRUE COMFORT PRO INSULINSYRINGE/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TRUE COMFORT PRO PEN NEEDLES 32G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
TRUE COMFORT PRO INSULINSYRINGE/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TRUE COMFORT PRO PEN NEEDLES 33G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
TRUE COMFORT PRO INSULINSYRINGE/U-100/0.5ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	TRUE COMFORT PRO PEN NEEDLES 33G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
TRUE COMFORT PRO INSULINSYRINGE/U-100/1ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TRUE COMFORT PRO PEN NEEDLES 33G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
TRUE COMFORT PRO PEN NEEDLES 31G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TRUE COMFORT SAFETY INSULIN SYRINGE/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC
TRUE COMFORT PRO PEN NEEDLES 31G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TRUE COMFORT SAFETY INSULIN SYRINGE/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC
TRUE COMFORT PRO PEN NEEDLES 31G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TRUE COMFORT SAFETY INSULIN SYRINGE/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC
TRUE COMFORT PRO PEN NEEDLES 32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC	TRUE COMFORT SAFETY INSULIN SYRINGE/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC
TRUE COMFORT PRO PEN NEEDLES 32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TRUE COMFORT SAFETY INSULIN SYRINGE/1ML/32GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA
			TRUE COMFORT SAFETY INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TRUE COMFORT SAFETY INSULIN SYRINGE/U-100/1ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC	TRUEPLUS 5-BEVEL PEN NEEDLES 31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TRUE COMFORT SAFETY PEN NEEDLES 31G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC	TRUEPLUS 5-BEVEL PEN NEEDLES 32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TRUE COMFORT SAFETY PEN NEEDLES 31G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TRUEPLUS INSULIN SYRINGE/U-100/0.3ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TRUE COMFORT SAFETY PEN NEEDLES 31G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TRUEPLUS INSULIN SYRINGE/U-100/0.3ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TRUE COMFORT SAFETY PEN NEEDLES 31G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC	TRUEPLUS INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TRUE COMFORT SAFETY PEN NEEDLES 32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC	TRUEPLUS INSULIN SYRINGE/U-100/0.5ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TRUE COMFORT SAFETY PEN NEEDLES 32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TRUEPLUS INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TRUEPLUS 5-BEVEL PEN NEEDLES 29GX12.7MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	TRUEPLUS INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TRUEPLUS 5-BEVEL PEN NEEDLES 31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TRUEPLUS INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TRUEPLUS 5-BEVEL PEN NEEDLES 31GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	TRUEPLUS INSULIN SYRINGE/U-100/1ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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TRUEPLUS INSULIN SYRINGE/U-100/1ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTICARE INSULIN SYRINGE/0.3ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TRUEPLUS INSULIN SYRINGE/U-100/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTICARE INSULIN SYRINGE/0.3ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
TRUEPLUS INSULIN SYRINGE/U-100/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTICARE INSULIN SYRINGE/0.3ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TRUEPLUS PEN NEEDLES 29GX12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTICARE INSULIN SYRINGE/0.5ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TRUEPLUS PEN NEEDLES 31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTICARE INSULIN SYRINGE/0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TRUEPLUS PEN NEEDLES 31GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTICARE INSULIN SYRINGE/0.5ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
TRUEPLUS PEN NEEDLES 31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTICARE INSULIN SYRINGE/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
TRUEPLUS PEN NEEDLES 32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTICARE INSULIN SYRINGE/1ML/28G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTICARE INSULIN SAFETY SYRINGE/0.5ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTICARE INSULIN SYRINGE/1ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTICARE INSULIN SAFETY SYRINGE/1ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTICARE INSULIN SYRINGE/1ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ULTICARE INSULIN SYRINGE/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTICARE INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTICARE INSULIN SYRINGE/SHORT/0.3ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTICARE INSULIN SYRINGE/U-100/1ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTICARE INSULIN SYRINGE/SHORT/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTICARE INSULIN SYRINGE/U-100/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTICARE INSULIN SYRINGE/SHORT/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTICARE INSULIN SYRINGEULTRAFINE U-100/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTICARE INSULIN SYRINGE/SHORT/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTICARE INSULIN SYRINGEULTRAFINE U-100/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTICARE INSULIN SYRINGE/SHORT/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTICARE INSULIN SYRINGEULTRAFINE U-100/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTICARE INSULIN SYRINGE/SHORT/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTICARE MICRO PEN NEEDLES 31G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTICARE INSULIN SYRINGE/U-100/0.3ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	ULTICARE MICRO PEN NEEDLES 32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTICARE INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTICARE MICRO PEN NEEDLES/31G X 1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTICARE INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	ULTICARE MICRO PEN NEEDLES/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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ULTICARE MICRO PEN NEEDLES/32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTICARE PEN NEEDLES/29GX 12.7MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
ULTICARE MICRO PEN NEEDLES/32G X 5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTICARE SHORT PEN NEEDLES 31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTICARE MINI PEN NEEDLES 31GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTICARE SHORT PEN NEEDLES ULTI-FINE IV	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTICARE MINI PEN NEEDLES ULTI-FINE IV	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTICARE SHORT PEN NEEDLES/31G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTICARE MINI PEN NEEDLES/31G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTICARE SHORT SAFETY PEN NEEDLES 30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
ULTICARE MINI PEN NEEDLES/32G X 1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	ULTICARE TUBERCULIN SAFETY SYRINGE/1ML/25G X 1" MISC	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
ULTICARE MINI PEN NEEDLES31GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTICARE U-100 INSULIN SYRINGES/0.3ML/31G X 1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
ULTICARE MINI SAFETY PENNEEDLES 30G X 3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTICARE U-100 INSULIN SYRINGES/0.3ML/31G X 1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
ULTICARE ORIGINAL PEN NEEDLES ULTI-FINE	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	ULTICARE U-100 INSULIN SYRINGES/0.5ML/31G X 1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
ULTICARE PEN NEEDLES 31GX 5MM/MINI	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTICARE U-100 INSULIN SYRINGES/1ML/31G X 1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
			ULTIGUARD SAFEPACK INSULIN SYRINGE 0.3ML/30G X 1/2"/SHARPS C	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)

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ULTIGUARD SAFEPACK INSULIN SYRINGE 1/2ML 30G X 1/2"/SHARPS C	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	ULTIGUARD SAFEPACK/MINI PEN NEEDLE/32G X 1/4"/SHARPS CONTAIN	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
ULTIGUARD SAFEPACK INSULIN SYRINGE 1ML 30G X 1/2"/SHARPS CON	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTIGUARD SAFEPACK/SHORTPEN NEEDLE/31G X 5/16"/SHARPS CONTA	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTIGUARD SAFEPACK INSULIN SYRINGE 1ML 31G X 5/16"/SHARPS CO	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTIGUARD SAFEPACK/SHORTPEN NEEDLE/31G X 8MM/SHARPS CONTAIN	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTIGUARD SAFEPACK INSULIN SYRINGE/0.3ML/31G X 5/16"/SHARPS	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTIGUARD SAFEPACK/TINY PEN NEEDLE/32G X 4MM/SHARPS CONTAIN	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC
ULTIGUARD SAFEPACK MINI PEN NEEDLE/31G X 3/16"/SHARPS CONTAI	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTIGUARD SAFEPACK/TINY PEN NEEDLE/32G X 6MM/SHARPS CONTAIN	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA
ULTIGUARD SAFEPACK PEN NEEDLE/29G X 1/2"/SHARPS CONTAINER	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	ULTILET PEN NEEDLE 32GX4MM/SHORT	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTIGUARD SAFEPACK/MICROPEN NEEDLE/32G X 4 MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTRA COMFORT INSULIN SYRINGE/U-100/0.3ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTIGUARD SAFEPACK/MICROPEN NEEDLE/32G X 4MM/SHARPS CONTAIN	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTRA FLO INSULIN PEN NEEDLE 31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTIGUARD SAFEPACK/MICROPEN NEEDLE/32G X 5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTRA FLO INSULIN PEN NEEDLE 32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTIGUARD SAFEPACK/MINI PEN NEEDLE/31G X 6MM/SHARPS CONTAIN	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTRA FLO INSULIN PEN NEEDLE 33GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)

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ULTRA FLO INSULIN PEN NEEDLES	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTRACARE INSULIN SYRINGE/U-100/0.3ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTRA FLO INSULIN PEN NEELE 31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTRACARE INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTRA FLO INSULIN SYRINGE 0.3ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTRACARE INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
ULTRA FLO INSULIN SYRINGE 0.3ML/30GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTRACARE INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTRA FLO INSULIN SYRINGE 0.3ML/31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTRACARE INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTRA FLO INSULIN SYRINGE 0.5ML/29GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTRACARE INSULIN SYRINGE/U-100/1ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTRA FLO INSULIN SYRINGE 1/2 UNIT/0.3ML/30GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	ULTRACARE INSULIN SYRINGE/U-100/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTRA FLO INSULIN SYRINGE 1/2 UNIT/0.3ML/30GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTRACARE INSULIN SYRINGE/U-100/1ML/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTRA FLO INSULIN SYRINGE 1/2 UNIT/0.3ML/31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTRACARE PEN NEEDLES/31G X 1/4"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTRA THIN PEN NEEDLES 32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTRACARE PEN NEEDLES/31G X 3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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ULTRACARE PEN NEEDLES/31G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTRA-THIN II INSULIN SYRINGE SHORT/U-100/1ML/31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTRACARE PEN NEEDLES/32G X 1/14"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	ULTRA-THIN II INSULIN SYRINGE/U-100/0.5ML/29GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTRACARE PEN NEEDLES/32G X 3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTRA-THIN II INSULIN SYRINGE/U-100/1ML/29GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTRACARE PEN NEEDLES/32G X 5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTRA-THIN II MINI PEN NEEDLES/31GX3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTRACARE PEN NEEDLES/33G X 5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	ULTRA-THIN II PEN NEEDLES 29GX1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
ULTRA-THIN II INSULIN SYRINGE SHORT/U-100/0.3ML/30GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ULTRA-THIN II PEN NEEDLES/SHORT/31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTRA-THIN II INSULIN SYRINGE SHORT/U-100/0.3ML/31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	UNIFINE PEN NEEDLE/32G X4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTRA-THIN II INSULIN SYRINGE SHORT/U-100/0.5ML/30GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	UNIFINE PENTIPS 29GX12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTRA-THIN II INSULIN SYRINGE SHORT/U-100/0.5ML/31GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	UNIFINE PENTIPS 31G X 3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
ULTRA-THIN II INSULIN SYRINGE SHORT/U-100/1ML/30GX5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	UNIFINE PENTIPS 31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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UNIFINE PENTIPS 31GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	UNIFINE PENTIPS PLUS 33GX 5/32"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
UNIFINE PENTIPS 31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	UNIFINE PENTIPS PLUS 33GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
UNIFINE PENTIPS 32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	UNIFINE PENTIPS PLUS/30GX 3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
UNIFINE PENTIPS 32GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	UNIFINE PENTIPS/30G X 3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
UNIFINE PENTIPS 33GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	UNIFINE PROTECT SAFETY PEN NEEDLE 30G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC
UNIFINE PENTIPS PLUS 29GX12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	UNIFINE PROTECT SAFETY PEN NEEDLE 30G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA
UNIFINE PENTIPS PLUS 31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	UNIFINE PROTECT SAFETY PEN NEEDLE 32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC
UNIFINE PENTIPS PLUS 31GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	UNIFINE SAFECONTROL PEN NEEDLE 31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC
UNIFINE PENTIPS PLUS 31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	UNIFINE SAFECONTROL PEN NEEDLE 31GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC
UNIFINE PENTIPS PLUS 32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	UNIFINE SAFECONTROL PEN NEEDLE 31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC

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UNIFINE SAFECONTROL PEN NEEDLE 32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	VANISHPOINT INSULIN SYRINGE/1ML/29G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
UNIFINE SAFECONTROL PEN NEEDLE/30G X 3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	VANISHPOINT INSULIN SYRINGE/1ML/30G X 3/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
UNIFINE SAFECONTROL PEN NEEDLE/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)	VERIFINE INSULIN PEN NEEDLE 29G X 12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
UNIFINE ULTRA PEN NEEDLE/31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	VERIFINE INSULIN PEN NEEDLE 31G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
UNIFINE ULTRA PEN NEEDLE/31GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	VERIFINE INSULIN PEN NEEDLE 31G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
UNIFINE ULTRA PEN NEEDLE/31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	VERIFINE INSULIN PEN NEEDLE 32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
UNIFINE ULTRA PEN NEEDLE/32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	VERIFINE INSULIN PEN NEEDLE 32G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)
VALUMARK PEN NEEDLES 29GX12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	VERIFINE INSULIN SYRINGE/0.3ML/31G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
VALUMARK PEN NEEDLES 31GX 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	VERIFINE INSULIN SYRINGE/0.5ML/29G X 12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
VALUMARK PEN NEEDLES 31GX 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	VERIFINE INSULIN SYRINGE/0.5ML/31G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC

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VERIFINE INSULIN SYRINGE/1ML/29G X 12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	VERIFINE PLUS PEN NEEDLE/32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); PA; RX/OTC
VERIFINE INSULIN SYRINGE/1ML/31G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	VIDA MIA UNIFINE PENTIPS32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
VERIFINE INSULIN SYRINGE0.3ML/31G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	VIDA MIA UNIFINE PENTIPSMINI 31GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
VERIFINE INSULIN SYRINGE0.5ML/29G X 12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	VIDA MIA UNIFINE PENTIPSORIGINAL 29GX12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
VERIFINE INSULIN SYRINGE0.5ML/31G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	VIDA MIA UNIFINE PENTIPSSHORT 31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
VERIFINE INSULIN SYRINGE1ML/29G X 12MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	WEGMANS UNIFINE PENTIPS PLUS 32GX4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
VERIFINE INSULIN SYRINGE1ML/31G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	WEGMANS UNIFINE PENTIPS PLUS/MINI/31GX5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
VERIFINE PLUS INSULIN PEN NEEDLE 31G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	WEGMANS UNIFINE PENTIPS PLUS/SHORT/31GX8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
VERIFINE PLUS INSULIN PEN NEEDLE 31G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	WEGMANS UNIFINE PENTIPS PLUS/ULTRA SHORT/31GX6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC
VERIFINE PLUS INSULIN PEN NEEDLES 32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	ZEVRX INSULIN SYRINGE/0.5ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail)

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ZEV RX INSULIN SYRINGE/0.5ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	AEROCHAMBER MV MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
ZEV RX INSULIN SYRINGE/1ML/30G X 1/2"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	AEROCHAMBER PLUS FLOW VU MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
ZEV RX INSULIN SYRINGE/1ML/30G X 5/16"	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	AEROCHAMBER PLUS FLOW VUMOUTHPIECE DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
ZEV RX PEN NEEDLES 31G X 5MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	AEROCHAMBER PLUS FLOW-VU/INTERMEDIATE MASK DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
ZEV RX PEN NEEDLES 31G X 6MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	AEROCHAMBER PLUS FLOW-VU/LARGE MASK DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
ZEV RX PEN NEEDLES 31G X 8MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	AEROCHAMBER PLUS FLOW-VU/LARGE MASK MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
ZEV RX PEN NEEDLES 32G X 4MM	1	QL(200 ea per 30 day(s) retail; 200 ea per 30 days mail); RX/OTC	AEROCHAMBER PLUS FLOW-VU/MASK MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
Respiratory Therapy Supplies			AEROCHAMBER PLUS FLOW-VU/MEDIUM MASK DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
ACE AEROSOL CLOUD ENHANCER MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	AEROCHAMBER PLUS FLOW-VU/MEDIUM MASK MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
AEROCHAMBER HOLDING CHAMBER DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	AEROCHAMBER PLUS FLOW-VU/SMALL MASK DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
AEROCHAMBER MINI AEROSOLCHAMBER DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	AEROCHAMBER PLUS FLOW-VU/SMALL MASK MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
			AEROCHAMBER PLUS FLOW-VU MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC

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AEROCHAMBER Z-STAT PLUS VALVED HOLDING CHAMBER W/FLOW VU MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/SMALL INFANT DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
AEROCHAMBER Z-STAT PLUS/FLOWSIGNAL MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	COMPACT SPACE CHAMBER/ANTI-STATIC/LARGE MASK DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
AEROCHAMBER Z-STAT PLUS/LARGE MASK MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	COMPACT SPACE CHAMBER/ANTI-STATIC/MEDIUM MASK DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
AEROCHAMBER Z-STAT PLUS/MEDIUM MASK MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	COMPACT SPACE CHAMBER/ANTI-STATIC/SMALL MASK DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
AEROCHAMBER Z-STAT PLUS/SMALL MASK MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	COMPACT SPACE CHAMBER/ANTI-STATIC DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
AEROCHAMBER/FLOWSIGNAL MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	EASIVENT/MASK-LARGE MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
AEROTRACH PLUS MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	EASIVENT/MASK-MEDIUM MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
BREATHERITE VALVED MDI CHAMBER/COLLAPSIBLE DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	EASIVENT/MASK-SMALL MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
BREATHERITE VALVED MDI CHAMBER/RIGID DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	EASIVENT MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/ADULT LARGE DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	EQ SPACE CHAMBER ANTI-STATIC/LARGE MASK DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/MEDIUM/3 YEA DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	EQ SPACE CHAMBER ANTI-STATIC/MEDIUM MASK DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
			EQ SPACE CHAMBER ANTI-STATIC/SMALL MASK DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC

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EQ SPACE CHAMBER ANTI-STATIC DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	POCKET CHAMBER DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
FLEXICHAMBER ADULT MASK/SMALL	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	PRO COMFORT INHALER SPACER CHAMBER ADULT MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
FLEXICHAMBER CHILD MASK/LARGE	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	PRO COMFORT INHALER SPACER CHAMBER CHILD MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
FLEXICHAMBER CHILD MASK/SMALL	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	PRO COMFORT INHALER SPACER CHAMBER INFANT DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
FLEXICHAMBER DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	PROCARE SPACER CHAMBER W/ADULT MASK DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
MICROCHAMBER DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	PROCARE SPACER CHAMBER W/CHILD MASK DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
MICROCHAMBER MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	PROCHAMBER VALVED HOLDINGCHAMBER DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
MICROSPACER MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	PURE COMFORT INHALER SPACER CHAMBER ADULT DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
OPTICHAMBER DIAMOND/LARGEFACE MASK DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	REUSABLE COMFORTSEAL MASK/LARGE/AEROECLIPSE MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
OPTICHAMBER DIAMOND/MEDIUM FACE MASK MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	REUSABLE COMFORTSEAL MASK/MEDIUM/AEROECLIPSE MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
OPTICHAMBER DIAMOND/SMALLFACE MASK MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	REUSABLE COMFORTSEAL MASK/SMALL/AEROECLIPSE MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC
OPTICHAMBER DIAMOND MISC	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	RITFLO DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC

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VORTEX HOLDING CHAMBER/MASK/CHILD S/FROG DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	EMGALITY SOSY 100 MG/ML	1	QL(3 ml per 30 day(s) retail; 3 ml per 30 days mail); AL(At least 18 yrs old); PA
VORTEX HOLDING CHAMBER/MASK/TODDLER/LADY BUG DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	NURTEC	1	QL(8 ea per 30 day(s) retail; 8 ea per 30 days mail); AL(At least 18 yrs old); PA
VORTEX VALVED HOLDING CHAMBER DEVI	1	QL(1 ea per 30 day(s) retail; 1 ea per 30 days mail); RX/OTC	QULIPTA	1	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); AL(At least 18 yrs old); PA
MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches					
Calcitonin Gene-Related Peptide (CGRP) Receptor Antag					
AIMOVIG 70 MG/ML	1	QL(1 ml per 30 day(s) retail; 1 ml per 30 days mail); AL(At least 18 yrs old); PA	UBRELVY	1	QL(16 ea per 30 day(s) retail; 16 ea per 30 days mail); AL(At least 18 yrs old); PA
AIMOVIG 140 MG/ML	1	AL(At least 18 yrs old); PA	VYEPTI	1	AL(At least 18 yrs old); PA
AJOVY SOAJ	1	QL(1.5 ml per 30 day(s) retail; 2 ml per 30 days mail); AL(At least 18 yrs old); PA	ZAVZPRET	1	QL(8 ea per 30 day(s) retail; 8 ea per 30 days mail); AL(At least 18 yrs old); PA
AJOVY SOSY	1	QL(1.5 ml per 30 day(s) retail; 2 ml per 30 days mail); AL(At least 18 yrs old); PA	Migraine Combinations		
EMGALITY SOAJ	1	QL(1 ml per 30 day(s) retail; 1 ml per 30 days mail); AL(At least 18 yrs old); PA	<i>ergotamine w/ caffeine SUPP</i>	1	QL(25 ea per 30 day(s) retail; 25 ea per 30 days mail)
EMGALITY SOSY 120 MG/ML	1	QL(1 ml per 30 day(s) retail; 1 ml per 30 days mail); AL(At least 18 yrs old); PA	<i>sumatriptan-naproxen sodium</i>	3	QL(9 ea per 30 day(s) retail; 9 ea per 30 days mail)
			TREXIMET (<i>sumatriptan-naproxen sodium</i>)	9	QL(9 ea per 30 day(s) retail; 9 ea per 30 days mail)
			Migraine Products		

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>dihydroergotamine mesylate SOLN IJ 1 MG/ML</i>	1	QL(24 ml per 28 day(s) retail; 24 ml per 28 days mail); PA	IMITREX STATDOSE SYSTEM SOAJ (<i>sumatriptan succinate</i>)	1	QL(2 ml daily); PA
<i>dihydroergotamine mesylate SOLN NA 4 MG/ML</i>	1	QL(8 ml per 30 day(s) retail; 8 ml per 30 days mail); PA	IMITREX TABS (<i>sumatriptan succinate</i>)	1	QL(2 ea daily)
MIGRANAL SOLN NA (<i>dihydroergotamine mesylate</i>)	1	QL(8 ml per 30 day(s) retail; 8 ml per 30 days mail); PA	MAXALT-MLT TBDP 10 MG (<i>rizatriptan benzoate</i>)	1	QL(18 ea per 30 day(s) retail; 18 ea per 30 days mail)
Migraine Products - NSAIDs			MAXALT-MLT TBDP 10 MG (<i>rizatriptan benzoate</i>)	9	QL(18 ea per 30 day(s) retail; 18 ea per 30 days mail)
CAMBIA (<i>diclofenac potassium (migraine)</i>)	9		MAXALT TABS 10 MG (<i>rizatriptan benzoate</i>)	1	QL(18 ea per 30 day(s) retail; 18 ea per 30 days mail)
<i>diclofenac potassium (migraine)</i>	1	PA	MAXALT TABS 10 MG (<i>rizatriptan benzoate</i>)	9	QL(18 ea per 30 day(s) retail; 18 ea per 30 days mail)
ELYXYB	1	AL(At least 18 yrs old); PA	<i>naratriptan hcl 2.5 MG</i>	1	ST
Serotonin Agonists			<i>naratriptan hcl 1 MG</i>	1	QL(54 ea per 30 day(s) retail; 54 ea per 30 days mail); ST
<i>almotriptan malate 6.25 MG</i>	3	QL(2 ea daily)	RELPAX (<i>eletriptan hydrobromide</i>)	1	QL(2 ea daily)
<i>almotriptan malate 12.5 MG</i>	3	QL(2 ea daily); ST	RELPAX (<i>eletriptan hydrobromide</i>)	9	QL(2 ea daily)
<i>eletriptan hydrobromide</i>	1	QL(2 ea daily)	REYVOW	1	QL(8 ea per 30 day(s) retail; 8 ea per 30 days mail); AL(At least 18 yrs old); PA
FROVA (<i>frovatriptan succinate</i>)	2	QL(3 ea daily); ST	<i>rizatriptan benzoate TABS</i>	1	QL(18 ea per 30 day(s) retail; 18 ea per 30 days mail)
<i>frovatriptan succinate</i>	2	QL(3 ea daily); ST	<i>rizatriptan benzoate TBDP</i>	1	QL(18 ea per 30 day(s) retail; 18 ea per 30 days mail)
IMITREX 20 MG/ACT (<i>sumatriptan</i>)	9	2 package(s) per 12 day(s) retail; 2 package(s) per 12 day(s) mail			
IMITREX 5 MG/ACT (<i>sumatriptan</i>)	1	2 package(s) per 12 day(s) retail; 2 package(s) per 12 day(s) mail; PA			
IMITREX STATDOSE REFILL SOCT (<i>sumatriptan succinate</i>)	1	QL(2 ml daily); PA			

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<i>sumatriptan</i>	1	2 package(s) per 12 day(s) retail; 2 package(s) per 12 day(s) mail; PA	<i>sodium acetate SOLN</i>	1	
<i>sumatriptan succinate SOAJ</i>	1	QL(2 ml daily); PA	SODIUM ACETATE SOLN (<i>sodium acetate</i>)	9	
<i>sumatriptan succinate SOCT</i>	1	QL(2 ml daily); PA	SODIUM ACETATE SOLN (<i>sodium acetate</i>)	1	
<i>sumatriptan succinate SOLN 6 MG/0.5ML</i>	1	QL(4 ml per 30 day(s) retail; 4 ml per 30 days mail); PA	<i>sodium bicarbonate IV 4.2 %, 7.5 %, 8.4 %</i>	1	
<i>sumatriptan succinate TABS</i>	1	QL(2 ea daily)	THAM	1	
TOSYMRA	1	QL(3 ea daily); PA	Calcium		
ZEMBRACE SYMTOUCH SOAJ	1	QL(4 ml per 30 day(s) retail; 4 ml per 30 days mail); PA	<i>calcium carbonate-cholecalciferol TABS</i>	2	
<i>zolmitriptan SOLN</i>	1	QL(6 ea per 30 day(s) retail; 6 ea per 30 days mail); PA	<i>calcium carbonate-vitamin d TABS 250 MG-125 UNIT</i>	2	
<i>zolmitriptan TABS</i>	1	QL(6 ea per 30 day(s) retail; 6 ea per 30 days mail); ST	<i>calcium chloride (dihydrate) SOLN</i>	1	
<i>zolmitriptan TBDP</i>	1	QL(6 ea per 30 day(s) retail; 6 ea per 30 days mail); ST	<i>calcium citrate-vitamin d TABS 200 UNIT-315 MG, 250 UNIT-200 MG, 250 UNIT-315 MG</i>	2	
ZOMIG SOLN (<i>zolmitriptan</i>)	1	QL(6 ea per 30 day(s) retail; 6 ea per 30 days mail); PA	CALCIUM GLUCONATE/SODIUMCHLORIDE SOLN (<i>calcium gluconate-sodium chloride</i>)	1	
ZOMIG SOLN	1	QL(6 ea per 30 day(s) retail; 6 ea per 30 days mail); PA	CALCIUM GLUCONATE/SODIUMCHLORIDE SOLN (<i>calcium gluconate-sodium chloride</i>)	9	
ZOMIG TABS 2.5 MG, 5 MG (<i>zolmitriptan</i>)	9	QL(6 ea per 30 day(s) retail; 6 ea per 30 days mail); ST	CALCIUM GLUCONATE/SODIUMCHLORIDE SOLN 1 GM/100ML-0.8 %, 1 GM/50ML-0.675 %, 2 GM/100ML-0.675 %	1	
MINERALS & ELECTROLYTES			<i>calcium gluconate-sodium chloride SOLN</i>	1	
Bicarbonates			<i>calcium gluconate SOLN</i>	1	
			CALCIUM GLUCONATE SOLN (<i>calcium gluconate</i>)	1	
			CALCIUM GLUCONATE SOLN (<i>calcium gluconate</i>)	9	

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CITRACAL + D3 MAXIMUM TABS (<i>calcium citrate-vitamin d</i>)	9		KCL 0.15%/D5W/NACL 0.225% (<i>potassium chloride in dextrose & sodium chloride</i>)	1	
CITRACAL PETITES/VITAMIND TABs (<i>calcium citrate-vitamin d</i>)	9		KCL 0.3%/D5W/NACL 0.9% (<i>potassium chloride in dextrose & sodium chloride</i>)	1	
OYSTER SHELL CALCIUM/D TABS	2		KCL 0.3%/D5W/NACL 0.9%	1	
Electrolyte Mixtures			<i>lactated ringer's</i>	1	
DEXTROSE 5%/ELECTROLYTE #48 VIAFLEX	1		NORMOSOL -R	1	
DEXTROSE 10%/SODIUM CHLORIDE 0.2%	1		NORMOSOL-M/D5W	1	
DEXTROSE 2.5%/SODIUM CHLORIDE 0.45% (<i>dextrose w/ sodium chloride</i>)	1		NORMOSOL-R	1	
DEXTROSE 5%/SODIUM CHLORIDE 0.3% (<i>dextrose w/ sodium chloride</i>)	1		PLASMA-LYTE A (<i>electrolyte-a</i>)	1	
<i>dextrose in lactated ringers</i>	1		PLASMA-LYTE-148 (<i>electrolyte-148</i>)	9	
<i>dextrose w/ sodium chloride 0.45 %-2.5 %, 0.9 %-5 %, 10 %-0.45 %, 5 %-0.2 %, 5 %-0.225 %, 5 %-0.3 %, 5 %-0.33 %, 5 %-0.45 %, 5 %-0.9 %</i>	1		<i>potassium chloride in dextrose 5 %-10 MEQ/L, 5 %-20 MEQ/L</i>	1	
DEXTROSE/SODIUM CHLORIDE (<i>dextrose w/ sodium chloride</i>)	1		<i>potassium chloride in dextrose & sodium chloride 5 %-0.075 %- 0.45 %, 5 %-0.15 %-0.225 %, 5 %-0.15 %-0.9 %, 5 %-10 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.2 %, 5 %- 20 MEQ/L-0.225 %, 5 %- 20 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.9 %, 5 %-30 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.9 %</i>	1	
<i>electrolyte-148</i>	1		<i>potassium chloride in nacl 20 MEQ/L-0.45 %, 20 MEQ/L-0.9 %, 40 MEQ/L- 0.9 %</i>	1	
<i>electrolyte-a</i>	1		POTASSIUM CHLORIDE/DEXTROSE/L ACTATED RINGERS	1	
IONOSOL- MB/DEXTROSE 5%	1		POTASSIUM CHLORIDE/SODIUM CHLORIDE (<i>potassium chloride in nacl</i>)	1	
ISOLYTE-P/DEXTROSE 5%	1				
ISOLYTE-S	1				
ISOLYTE-S PH 7.4	1				

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<i>ringer's</i>	1		<i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic</i>	1	
TPN ELECTROLYTES CONC	1		POTASSIUM PHOSPHATE/SODIUM CHLORIDE 0.9 %-1180 MG/250ML-1120 MG/250ML	1	
Fluoride			<i>potassium phosphates 236 MG/ML-224 MG/ML</i>	1	
<i>sodium fluoride CHEW 0.25 MG, 0.5 MG, 1 MG</i>	1	QL(1 ea daily)	POTASSIUM PHOSPHATES 236 MG/ML-224 MG/ML, 71 MEQ/15ML-45 MMOLE/15ML (<i>potassium phosphates</i>)	9	
<i>sodium fluoride SOLN 0.5 MG/ML</i>	1	AL(Up to 6 yrs old); RX/OTC	<i>sodium phosphates (sodium phosphate dibasic & monobasic) 142 MG/ML-276 MG/ML</i>	1	AL(Up to 20 yrs old); PA
SOLUVITA SOLN	1	AL(Up to 6 yrs old); RX/OTC	Potassium		
Magnesium			K-TAB TBCR 10 MEQ (<i>potassium chloride</i>)	9	
MAG-G TABS	1	AL(Up to 20 yrs old); PA	K-TAB TBCR 20 MEQ (<i>potassium chloride</i>)	1	
<i>magnesium chloride SOLN</i>	1		POKONZA PACK OR	1	AL(Up to 10 yrs old); PA
<i>magnesium sulfate IV</i>	1		<i>potassium acetate SOLN 2 MEQ/ML</i>	1	
MAGNESIUM SULFATE IV (<i>magnesium sulfate</i>)	1		POTASSIUM ACETATE SOLN 2 MEQ/ML	1	
MAGNESIUM SULFATE IV (<i>magnesium sulfate</i>)	9		<i>potassium bicarbonate TBEF</i>	1	
MAGNESIUM SULFATE IN D5W (<i>magnesium sulfate in dextrose</i>)	9		<i>potassium chloride microencapsulated crystals er</i>	1	
MAGNESIUM SULFATE IN D5W (<i>magnesium sulfate in dextrose</i>)	1		<i>potassium chloride CPCR</i>	1	
<i>magnesium sulfate in dextrose</i>	1		<i>potassium chloride PACK OR 20 MEQ</i>	1	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); PA
MAGONATE LIQD	1	AL(Up to 20 yrs old); PA	<i>potassium chloride SOLN OR 10 %, 20 %</i>	1	
Phosphate					
K-PHOS NEUTRAL (<i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic</i>)	1				
K-PHOS TABS (<i>potassium phosphate monobasic</i>)	1				
PHOS-NAK POWDER CONCENTRATE PACK (<i>potassium & sodium phosphates</i>)	1	AL(Up to 20 yrs old); PA			

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POTASSIUM CHLORIDE SOLN IV (<i>potassium chloride</i>)	1		REZUROCK	1	QL(1 ea daily); AL(At least 12 yrs old); PA
<i>potassium chloride TBCR</i>	1		RYSTIGGO	1	AL(At least 18 yrs old); PA
Sodium			THALOMID 50 MG, 100 MG, 200 MG	1	
SODIUM CHLORIDE GRAN	1	RX/OTC	VYVGART	1	AL(At least 18 yrs old); PA
<i>sodium chloride SOLN IJ 0.9 %, 2.5 MEQ/ML</i>	1		VYVGART HYTRULO	1	AL(At least 18 yrs old); PA
Zinc			Immunosuppressive Agents		
GALZIN	1		ASTAGRAF XL CP24 1 MG, 5 MG	1	
WILZIN	1		ASTAGRAF XL CP24 0.5 MG	1	QL(2.95 ea daily)
MISCELLANEOUS THERAPEUTIC CLASSES			ATGAM IV 50 MG/ML	1	
Chelating Agents			AZATHIOPRINE	1	
CUPRIMINE CAPS (<i>penicillamine</i>)	1		AZATHIOPRINE POWD	1	
CUVRIOR	1	AL(At least 18 yrs old); PA	<i>azathioprine TABS 100 MG</i>	1	QL(3 ea daily)
DEPEN TITRATABS TABS (<i>penicillamine</i>)	1		<i>azathioprine TABS 50 MG</i>	1	QL(8.4 ea daily)
<i>penicillamine CAPS</i>	1		<i>azathioprine TABS 75 MG</i>	1	QL(1 ea daily)
<i>penicillamine TABS</i>	1		CELLCEPT INTRAVENOUS (<i>mycophenolate mofetil hcl</i>)	1	
SYPRINE (<i>trientine hcl</i>)	1		CELLCEPT CAPS (<i>mycophenolate mofetil</i>)	1	QL(10 ea daily)
<i>trientine hcl 500 MG</i>	1	QL(4 ea daily); PA	CELLCEPT SUSR (<i>mycophenolate mofetil</i>)	1	QL(16 ml daily); 3 package(s) per 30 day(s) retail; 3 package(s) per 30 day(s) mail
<i>trientine hcl 250 MG</i>	1		CELLCEPT TABS (<i>mycophenolate mofetil</i>)	1	QL(6 ea daily)
Enzymes			<i>cyclosporine modified (for microemulsion) CAPS 25 MG</i>	1	QL(6 ea daily)
HYLENEX	1				
VITRASE SOLN	1	QL(1.2 ml per fill retail)			
XIAFLEX	1				
Immunomodulators					
JOENJA	1	QL(2 ea daily); AL(At least 12 yrs old); PA			
<i>lenalidomide</i>	1				
REVLIMID	1				

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<i>cyclosporine modified (for microemulsion) CAPS 100 MG</i>	1	QL(5 ea daily)	<i>mycophenolate mofetil TABS</i>	1	QL(6 ea daily)
<i>cyclosporine modified (for microemulsion) CAPS 50 MG</i>	1	QL(8 ea daily)	<i>mycophenolate sodium</i>	1	
<i>cyclosporine modified (for microemulsion) SOLN</i>	1	QL(6 ml daily)	MYFORTIC (<i>mycophenolate sodium</i>)	1	
<i>cyclosporine CAPS 25 MG</i>	1	QL(5 ea daily)	MYHIBBIN SUSP	1	PA
<i>cyclosporine CAPS 100 MG</i>	1	QL(3 ea daily)	NEORAL CAPS 25 MG (<i>cyclosporine modified (for microemulsion)</i>)	9	QL(6 ea daily)
ENSPRYNG	1	QL(1 ml per 28 day(s) retail; 1 ml per 28 days mail); AL(At least 18 yrs old); PA	NEORAL CAPS 100 MG (<i>cyclosporine modified (for microemulsion)</i>)	9	QL(5 ea daily)
ENVARUSUS XR TB24 4 MG	1	QL(2 ea daily)	NEORAL CAPS 25 MG (<i>cyclosporine modified (for microemulsion)</i>)	1	QL(6 ea daily)
ENVARUSUS XR TB24 1 MG	1	QL(6 ea daily)	NEORAL CAPS 100 MG (<i>cyclosporine modified (for microemulsion)</i>)	1	QL(5 ea daily)
ENVARUSUS XR TB24 0.75 MG	1	QL(3 ea daily)	NEORAL SOLN (<i>cyclosporine modified (for microemulsion)</i>)	1	QL(6 ml daily)
<i>everolimus (immunosuppressant)</i>	1	QL(2 ea daily)	NULOJIX	1	
GAMIFANT	1	PA	PROGRAF CAPS 5 MG (<i>tacrolimus</i>)	1	QL(12 ea daily)
IMURAN TABS (<i>azathioprine</i>)	1	QL(8.4 ea daily)	PROGRAF CAPS 1 MG (<i>tacrolimus</i>)	1	QL(24 ea daily)
LUPKYNIS	1	QL(6 ea daily); AL(At least 18 yrs old); PA	PROGRAF CAPS 0.5 MG (<i>tacrolimus</i>)	1	QL(38 ea daily)
<i>mycophenolate mofetil hcl</i>	1		PROGRAF PACK 1 MG	1	QL(6 ea daily); AL(Up to 6 yrs old)
<i>mycophenolate mofetil CAPS</i>	1	QL(10 ea daily)	PROGRAF PACK 0.2 MG	1	AL(Up to 6 yrs old)
<i>mycophenolate mofetil SUSR</i>	1	QL(16 ml daily); 9 package(s) per 90 day(s) retail; 9 package(s) per 90 day(s) mail	PROGRAF SOLN	1	
<i>mycophenolate mofetil SUSR</i>	1	QL(16 ml daily)	RAPAMUNE SOLN (<i>sirolimus</i>)	9	QL(6 ml daily)
			RAPAMUNE SOLN (<i>sirolimus</i>)	1	QL(6 ml daily)
			RAPAMUNE TABS 0.5 MG (<i>sirolimus</i>)	1	QL(1 ea daily)
			RAPAMUNE TABS 1 MG (<i>sirolimus</i>)	1	QL(3 ea daily)

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RAPAMUNE TABS 2 MG <i>(sirolimus)</i>	1	QL(2 ea daily)	VIJOICE PACK	1	PA
SANDIMMUNE CAPS 25 MG <i>(cyclosporine)</i>	1	QL(5 ea daily)	VIJOICE TBPK	1	QL(56 ea per 28 day(s) retail; 56 ea per 28 days mail); PA
SANDIMMUNE CAPS 100 MG <i>(cyclosporine)</i>	9	QL(3 ea daily)	VIJOICE TBPK	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); PA
SANDIMMUNE CAPS 100 MG <i>(cyclosporine)</i>	1	QL(3 ea daily)	Potassium Removing Agents		
SANDIMMUNE CAPS 25 MG <i>(cyclosporine)</i>	9	QL(5 ea daily)	LOKELMA	1	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); PA
SANDIMMUNE SOLN OR 100 MG/ML	1	QL(2 ml daily)	<i>sodium polystyrene sulfonate POWD</i>	1	
SANDIMMUNE SOLN IV 50 MG/ML	1		<i>sodium polystyrene sulfonate SUSP CO 15 GM/60ML</i>	1	
SIMULECT	1		VELTASSA 16.8 GM, 25.2 GM	1	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); PA
<i>sirolimus SOLN</i>	1	QL(6 ml daily)	VELTASSA 8.4 GM	1	QL(1 ea daily); PA
<i>sirolimus TABS 0.5 MG</i>	1	QL(1 ea daily)	Progeria Treatment Agents		
<i>sirolimus TABS 1 MG</i>	1	QL(3 ea daily)	ZOKINVY	1	QL(4 ea daily); AL(At least 1 yrs old); PA
<i>sirolimus TABS 2 MG</i>	1	QL(2 ea daily)	Prostaglandins		
<i>tacrolimus CAPS 5 MG</i>	1	QL(12 ea daily)	PROSTIN VR PEDIATRIC	1	
<i>tacrolimus CAPS 0.5 MG</i>	1	QL(38 ea daily)	Systemic Lupus Erythematosus Agents		
<i>tacrolimus CAPS 1 MG</i>	1	QL(24 ea daily)	BENLYSTA SOAJ	1	QL(4 ml per 28 day(s) retail; 4 ml per 28 days mail); PA
THYMOGLOBULIN	1		BENLYSTA SOLR	1	
UPLIZNA	1	PA	BENLYSTA SOSY	1	QL(4 ml per 28 day(s) retail; 4 ml per 28 days mail); PA
ZORTRESS (<i>everolimus immunosuppressant</i>)	9	QL(2 ea daily)	SAPHNELO	1	AL(At least 18 yrs old); PA
ZORTRESS (<i>everolimus immunosuppressant</i>)	1	QL(2 ea daily)	Uremic Pruritus Agents		
Irrigation Solutions					
<i>irrigation solutions, physiological</i>	1				
<i>lactated ringer's (irrigation)</i>	1				
<i>ringer's irrigation</i>	1				
<i>water for irrigation, sterile</i>	1				
Lymphatic Agents					
SYLVANT	1				
PIK3CA-Related Overgrowth Spectrum (PROS) Agents					

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KORSUVA	1	
MOUTH/THROAT/DENTAL AGENTS		
Anesthetics Topical Oral		
<i>lidocaine hcl (mouth-throat)</i>	1	
Anti-infectives - Throat		
AMPHOTERICIN B	1	
<i>clotrimazole</i>	1	
NYSTATIN (<i>nystatin (mouth-throat)</i>)	1	
<i>nystatin (mouth-throat)</i>	1	
Antiseptics - Mouth/Throat		
<i>chlorhexidine gluconate (mouth-throat)</i>	1	QL(500 ml per 14 day(s) retail; 500 ml per 14 days mail)
PERIDEX (<i>chlorhexidine gluconate (mouth-throat)</i>)	9	QL(500 ml per 14 day(s) retail; 500 ml per 14 days mail)
Dental Products		
DENTA 5000 PLUS SENSITIVE GEL 1.1 %-5 %	1	AL(At least 6 yrs old); MP
PREVIDENT 5000 BOOSTER PLUS PSTE DT (<i>sodium fluoride (dental)</i>)	9	MP
PREVIDENT 5000 DRY MOUTH GEL (<i>sodium fluoride (dental)</i>)	9	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail
PREVIDENT 5000 KIDS PSTE DT (<i>sodium fluoride (dental)</i>)	9	MP
PREVIDENT 5000 ORTHO DEFENSE PSTE DT (<i>sodium fluoride (dental)</i>)	9	MP

Drug Name	Drug Tier	Requirements/Limits
PREVIDENT 5000 PLUS CREA (<i>sodium fluoride (dental)</i>)	9	QL(51 gm per 30 day(s) retail; 51 gm per 30 days mail)
PREVIDENT FLUORIDE GEL (<i>sodium fluoride (dental)</i>)	9	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail
PREVIDENT RINSE SOLN (<i>sodium fluoride (dental)</i>)	9	
<i>sodium fluoride (dental) CREA</i>	1	QL(51 gm per 30 day(s) retail; 51 gm per 30 days mail)
<i>sodium fluoride (dental) GEL</i>	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail
<i>sodium fluoride (dental) GEL</i>	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail; AL(At least 6 yrs old)
<i>sodium fluoride (dental) PSTE DT</i>	1	AL(At least 6 yrs old); MP
<i>sodium fluoride (dental) SOLN 0.2 %</i>	1	
<i>sodium fluoride-potassium nitrate GEL</i>	1	AL(At least 6 yrs old); MP
Steroids - Mouth/Throat/Dental		
<i>triamcinolone acetonide (mouth)</i>	1	QL(5 gm per 30 day(s) retail; 5 gm per 30 days mail)
Throat Products - Misc.		
<i>cevimeline hcl</i>	1	QL(4 ea daily)
EVOXAC (<i>cevimeline hcl</i>)	1	QL(4 ea daily)
<i>pilocarpine hcl (oral)</i>	1	
SALAGEN (<i>pilocarpine hcl (oral)</i>)	9	

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MULTIVITAMINS			MVW COMPLETE FORMULATION CHEW	1	QL(2 ea daily); AL(Up to 20 yrs old); PA
Iron w/ Vitamins			MVW COMPLETE FORMULATIOND3000 CHEW	1	QL(2 ea daily); AL(Up to 20 yrs old); PA
<i>iron w/ vitamins TABS</i>	2	AL(At least 10 yrs old - Up to 50 yrs old); RX/OTC	MVW COMPLETE FORMULATIOND5000 CHEW	1	QL(2 ea daily); AL(Up to 20 yrs old); PA
Multiple Vitamins w/ Minerals			Prenatal Vitamins		
DEKAS PLUS CAPS	1	QL(2 ea daily); AL(Up to 20 yrs old); PA; RX/OTC	CITRANATAL 90 DHA 120 MG-20 MG-1 MG-3 MG-400 UNIT-3.4 MG-20 MG-50 MG-25 MG-2 MG-159 MG-90 MG-150 MCG-30 UNIT-0.75 MG-300 MG	2	AL(At least 10 yrs old - Up to 50 yrs old)
DEKAS PLUS CHEW	1	AL(Up to 20 yrs old); PA	CITRANATAL ASSURE	2	AL(At least 10 yrs old - Up to 50 yrs old)
MVW COMPLETE FORMULATION CAPS	1	QL(2 ea daily); AL(Up to 20 yrs old); PA; RX/OTC	CITRANATAL B-CALM 120 MG-25 MG-1 MG-400 UNIT-120 MG-20 MG	2	AL(At least 10 yrs old - Up to 50 yrs old)
MVW COMPLETE FORMULATIOND3000 CAPS	1	QL(2 ea daily); AL(Up to 20 yrs old); PA; RX/OTC	CITRANATAL HARMONY 25 MG-1 MG-400 UNIT-50 MG-104 MG-27 MG-30 UNIT-260 MG	2	AL(At least 10 yrs old - Up to 50 yrs old)
MVW COMPLETE FORMULATIOND500 CAPS	1	QL(2 ea daily); AL(Up to 20 yrs old); PA; RX/OTC	C-NATE DHA CAPS	2	AL(At least 10 yrs old - Up to 50 yrs old)
MVW COMPLETE FORMULATIONMINIS CAPS	1	QL(2 ea daily); AL(Up to 20 yrs old); PA; RX/OTC	COMPLETE NATAL DHA	1	AL(At least 10 yrs old - Up to 50 yrs old)
PHLEXY-VITS POWD	1		COMPLETE NATE CHEW	1	AL(At least 10 yrs old - Up to 50 yrs old)
Multivitamins			ENBRACE HR	2	AL(At least 10 yrs old - Up to 50 yrs old)
DEKAS ESSENTIAL CAPS	1	QL(2 ea daily); AL(Up to 20 yrs old); PA; RX/OTC	FOLIVANE-OB	1	AL(At least 10 yrs old - Up to 50 yrs old)
DEKAS ESSENTIAL LIQD	1	AL(Up to 20 yrs old); PA	M-NATAL PLUS TABS	1	AL(At least 10 yrs old - Up to 50 yrs old); RX/OTC
ZE-PLUS CAPS (<i>multiple vitamin</i>)	9	QL(2 ea daily); RX/OTC			
Ped Multiple Vitamins w/ Minerals					
DEKAS PLUS LIQD	1	AL(Up to 20 yrs old); PA; RX/OTC			

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NESTABS	2	AL(At least 10 yrs old - Up to 50 yrs old)	<i>prenatal vit w/ iron carbonyl-folic acid TABS 120 MG-10 MG-1.25 MG-315 UNIT-15 MCG-3.4 MG-10 MG-1 MG-2 MG-15 MG-10 MG-20 UNIT-2100 UNIT-50 MG</i>	1	AL(At least 10 yrs old - Up to 50 yrs old)
NESTABS DHA	2	AL(At least 10 yrs old - Up to 50 yrs old)	<i>prenatal without a w/ fe fumarate-l methylfolate-fa-dha</i>	2	AL(At least 10 yrs old - Up to 50 yrs old)
NESTABS ONE	2	AL(At least 10 yrs old - Up to 50 yrs old)	PRENATAL TABS 120 MG-10 MG-1 MG-10 MCG-12 MCG-3 MG-20 MG-1200 MCG-27 MG-200 MG-1.84 MG-25 MG-2 MG-10 MG	1	AL(At least 10 yrs old - Up to 50 yrs old); RX/OTC
NIVA-PLUS TABS	1	AL(At least 10 yrs old - Up to 50 yrs old); RX/OTC	PRENATE	2	AL(At least 10 yrs old - Up to 50 yrs old)
OB COMPLETE ONE	2	AL(At least 10 yrs old - Up to 50 yrs old)	PRENATE AM	2	AL(At least 10 yrs old - Up to 50 yrs old)
OB COMPLETE PETITE	2	AL(At least 10 yrs old - Up to 50 yrs old)	PRENATE DHA 90 MG-26 MG-400 MCG-400 UNIT-25 MCG-155 MG-50 MG-300 MG-40 UNIT-600 MCG-18 MG	2	AL(At least 10 yrs old - Up to 50 yrs old)
OB COMPLETE PREMIER	2	AL(At least 10 yrs old - Up to 50 yrs old)	PRENATE ELITE 75 MG-21 MG-330 MCG-400 MCG-600 UNIT-13 MCG-3.5 MG-21 MG-3 MG-155 MG-25 MG-15 MG-1.5 MG-2600 UNIT-150 MCG-40 UNIT-600 MCG-20 MG	2	AL(At least 10 yrs old - Up to 50 yrs old)
OB COMPLETE/DHA	2	AL(At least 10 yrs old - Up to 50 yrs old)	PRENATE ENHANCE	2	AL(At least 10 yrs old - Up to 50 yrs old)
OB COMPLETE TABS	1	AL(At least 10 yrs old - Up to 50 yrs old)	PRENATE ESSENTIAL 90 MG-26 MG-280 MCG-400 MCG-220 UNIT-13 MCG-155 MG-50 MG-300 MG-150 MCG-10 UNIT-40 MG-600 MCG-18 MG	2	AL(At least 10 yrs old - Up to 50 yrs old)
PNV-DHA+DOCUSATE	2	AL(At least 10 yrs old - Up to 50 yrs old)			
PNV-OMEGA	2	AL(At least 10 yrs old - Up to 50 yrs old)			
PRENAISSANCE PLUS CAPS	2	AL(At least 10 yrs old - Up to 50 yrs old)			
PRENATAL PLUS VITAMIN ANDMINERAL TABS	1	AL(At least 10 yrs old - Up to 50 yrs old); RX/OTC			
<i>prenatal vit w/ ferrous fumarate-l methylfolate-folic acid</i>	2	AL(At least 10 yrs old - Up to 50 yrs old)			

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PRENATE MINI 60 MG-26 MG-280 MCG-400 MCG-1000 UNIT-13 MCG-80 MG-25 MG-350 MG-18 MG-150 MCG-10 UNIT-600 MCG-25 MG	2	AL(At least 10 yrs old - Up to 50 yrs old)	VITAFOL ULTRA	1	AL(At least 10 yrs old - Up to 50 yrs old)
PRENATE PIXIE	2	AL(At least 10 yrs old - Up to 50 yrs old)	VITAFOL-OB+DHA MISC	1	AL(At least 10 yrs old - Up to 50 yrs old)
PRENATE RESTORE	2	AL(At least 10 yrs old - Up to 50 yrs old)	VITAFOL-OB TABS	1	AL(At least 10 yrs old - Up to 50 yrs old)
PRIMACARE	2	AL(At least 10 yrs old - Up to 50 yrs old)	VITAFOL-ONE CAPS	1	AL(At least 10 yrs old - Up to 50 yrs old)
SELECT-OB+DHA MISC	1	AL(At least 10 yrs old - Up to 50 yrs old)	WESCAP-C DHA	1	AL(At least 10 yrs old - Up to 50 yrs old)
SELECT-OB CHEW	2	AL(At least 10 yrs old - Up to 50 yrs old)	WESCAP-PN DHA	2	AL(At least 10 yrs old - Up to 50 yrs old)
SE-NATAL 19 CHEW	1	AL(At least 10 yrs old - Up to 50 yrs old)	WESNATAL DHA COMPLETE	1	AL(At least 10 yrs old - Up to 50 yrs old)
SE-NATAL 19 TABS	1	AL(At least 10 yrs old - Up to 50 yrs old); RX/OTC	WESNATE DHA CAPS	2	AL(At least 10 yrs old - Up to 50 yrs old)
TARON-C DHA	1	AL(At least 10 yrs old - Up to 50 yrs old)	WESTAB PLUS TABS	1	AL(At least 10 yrs old - Up to 50 yrs old); RX/OTC
TRICARE TABS	1	AL(At least 10 yrs old - Up to 50 yrs old); RX/OTC	WESTGEL DHA	2	AL(At least 10 yrs old - Up to 50 yrs old)
TRINATAL RX 1 TABS	1	AL(At least 10 yrs old - Up to 50 yrs old)	ZATEAN-PN DHA	2	AL(At least 10 yrs old - Up to 50 yrs old)
TRISTART DHA	2	AL(At least 10 yrs old - Up to 50 yrs old)	MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms		
VITAFOL FE+	1	AL(At least 10 yrs old - Up to 50 yrs old)	Central Muscle Relaxants		
VITAFOL GUMMIES	1	AL(At least 10 yrs old - Up to 50 yrs old)	AMRIX CP24 (cyclobenzaprine hcl)	1	QL(1 ea daily); PA
			BACLOFEN POWD	1	
			<i>baclofen SOLN OR 5 MG/5ML, 10 MG/5ML</i>	1	AL(Up to 10 yrs old); PA
			<i>baclofen SOLN IT 40 MG/20ML, 500 MCG/ML, 20000 MCG/20ML, 40000 MCG/20ML</i>	1	

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BACLOFEN SOSY	1		LYVISP AH PACK 5 MG, 10 MG	1	QL(90 ea per 30 day(s) retail; 90 ea per 30 days mail); AL(Up to 10 yrs old); PA
<i>baclofen SUSP</i>	1	AL(Up to 10 yrs old); PA			
<i>baclofen TABS 10 MG, 20 MG</i>	1		LYVISP AH PACK 20 MG	1	QL(120 ea per 30 day(s) retail; 120 ea per 30 days mail); AL(Up to 10 yrs old); PA
<i>baclofen TABS 5 MG, 15 MG</i>	1	PA			
<i>carisoprodol TABS 350 MG</i>	1	QL(4 ea daily); 90 day(s) max supply per 365 day(s) retail	<i>metaxalone</i>	2	ST
<i>carisoprodol TABS 250 MG</i>	1	QL(4 ea daily); PA	<i>methocarbamol SOLN</i>	1	
<i>chlorzoxazone TABS 250 MG</i>	1	PA	<i>methocarbamol TABS 500 MG, 750 MG</i>	1	
<i>chlorzoxazone TABS 500 MG</i>	1		<i>orphenadrine citrate SOLN 30 MG/ML</i>	1	
<i>chlorzoxazone TABS 375 MG, 750 MG</i>	1	QL(4 ea daily); PA	<i>orphenadrine citrate TB12</i>	1	
<i>cyclobenzaprine hcl CP24</i>	1	QL(1 ea daily); PA	OZOBAX DS SOLN OR (<i>baclofen</i>)	9	
<i>cyclobenzaprine hcl TABS 7.5 MG</i>	1	QL(3 ea daily); PA	OZOBAX SOLN OR (<i>baclofen</i>)	9	AL(Up to 10 yrs old)
<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	1		ROBAXIN SOLN (<i>methocarbamol</i>)	1	
FLEQSUVY SUSP (<i>baclofen</i>)	1	AL(Up to 10 yrs old); PA	ROBAXIN SOLN (<i>methocarbamol</i>)	9	
GABLOFEN SOLN IT	1		SOMA TABS 250 MG (<i>carisoprodol</i>)	1	QL(4 ea daily); PA
GABLOFEN SOLN IT (<i>baclofen</i>)	1		SOMA TABS 350 MG (<i>carisoprodol</i>)	1	QL(4 ea daily); 90 day(s) max supply per 365 day(s) retail
GABLOFEN SOSY	1		<i>tizanidine hcl CAPS</i>	1	PA
LIORESAL INTRATHECAL SOLN IT (<i>baclofen</i>)	9		<i>tizanidine hcl TABS</i>	1	
LIORESAL INTRATHECAL SOLN IT (<i>baclofen</i>)	1		ZANAFLEX CAPS (<i>tizanidine hcl</i>)	1	PA
LIORESAL INTRATHECAL SOLN IT	1		ZANAFLEX TABS 4 MG (<i>tizanidine hcl</i>)	1	
			Direct Muscle Relaxants		
			DANTRIUM IV SOLR (<i>dantrolene sodium</i>)	9	

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DANTRIUM CAPS 25 MG (<i>dantrolene sodium</i>)	1	
<i>dantrolene sodium CAPS</i>	1	
<i>dantrolene sodium SOLR</i>	1	
RYANODEX SUSR	1	
Fibrodysplasia Ossificans Progressiva (FOP) Agents		
SOHONOS 1 MG, 1.5 MG, 5 MG	1	QL(112 ea per 28 day(s) retail; 112 ea per 28 days mail); AL(At least 8 yrs old); PA
SOHONOS 10 MG	1	QL(56 ea per 28 day(s) retail; 56 ea per 28 days mail); AL(At least 8 yrs old); PA
SOHONOS 2.5 MG	1	QL(140 ea per 28 day(s) retail; 140 ea per 28 days mail); AL(At least 8 yrs old); PA
Muscle Relaxant Combinations		
NORGESIC FORTE (<i>orphenadrine w/ aspirin & caff</i>)	1	AL(At least 12 yrs old); PA
<i>orphenadrine w/ aspirin & caff</i>	1	AL(At least 12 yrs old); PA
NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus		
Nasal Agent Combinations		
<i>azelastine hcl-fluticasone propionate SUSP</i>	3	QL(23 gm per 30 day(s) retail; 23 gm per 30 days mail)
DYMISTA SUSP (<i>azelastine hcl-fluticasone propionate</i>)	3	QL(23 gm per 30 day(s) retail; 23 gm per 30 days mail)

Drug Name	Drug Tier	Requirements/Limits
RYALTRIS	3	QL(29 gm per 30 day(s) retail; 29 gm per 30 days mail); AL(At least 12 yrs old)
Nasal Anesthetics		
COCAINE HYDROCHLORIDE	1	
GOPRELTO	1	
NUMBRINO	1	
NUMBRINO	1	
Nasal Antiallergy		
<i>azelastine hcl 0.15 %</i>	2	QL(30 ml per 30 day(s) retail; 30 ml per 30 days mail); RX/OTC
<i>azelastine hcl 0.1 %, 137 MCG/SPRAY</i>	1	QL(30 ml per 30 day(s) retail; 30 ml per 30 days mail)
<i>olopatadine hcl (nasal)</i>	2	QL(30.5 gm per 30 day(s) retail; 30 gm per 30 days mail)
PATANASE (<i>olopatadine hcl (nasal)</i>)	9	QL(30.5 gm per 30 day(s) retail; 30 gm per 30 days mail)
Nasal Anticholinergics		
<i>ipratropium bromide (nasal)</i>	1	QL(30 ml per 30 day(s) retail; 30 ml per 30 days mail)
Nasal Steroids		
BECONASE AQ	1	QL(50 gm per 30 day(s) retail; 50 gm per 30 days mail)
FLONASE ALLERGY RELIEF CHILDRENS SUSP (<i>fluticasone propionate (nasal)</i>)	9	QL(16 ml per 30 day(s) retail; 16 ml per 30 days mail); RX/OTC

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FLONASE ALLERGY RELIEF SUSP (<i>fluticasone propionate (nasal)</i>)	9	QL(16 ml per 30 day(s) retail; 16 ml per 30 days mail); RX/OTC
<i>flunisolide (nasal) 0.025 %</i>	3	QL(75 ml per 30 day(s) retail; 75 ml per 30 days mail)
<i>fluticasone propionate (nasal) SUSP</i>	1	QL(16 gm per 30 day(s) retail; 16 gm per 30 days mail); RX/OTC
<i>mometasone furoate (nasal) SUSP</i>	2	QL(17 gm per 30 day(s) retail; 17 gm per 30 days mail); RX/OTC
NASONEX 24HR SUSP (<i>mometasone furoate (nasal)</i>)	9	QL(17 ml per 30 day(s) retail; 17 ml per 30 days mail); RX/OTC
OMNARIS SUSP	1	QL(12.5 gm per 30 day(s) retail; 12 gm per 30 days mail)
QNASL	3	QL(10.6 gm per 30 day(s) retail; 11 gm per 30 days mail)
QNASL CHILDRENS	3	QL(6.8 gm per 30 day(s) retail; 7 gm per 30 days mail); AL(At least 4 yrs old - Up to 11 yrs old)
SINUVA IMPL	1	
XHANCE EXHU	1	PA
ZETONNA AERS	1	QL(6.1 gm per 30 day(s) retail; 6 gm per 30 days mail)
Sympathomimetic Decongestants		
<i>pseudoephedrine hcl TB12</i>	1	AL(Up to 20 yrs old); PA

Drug Name	Drug Tier	Requirements/Limits
NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles		
ALS Agents		
<i>edaravone SOLN</i>	1	PA
EXSERVAN FILM	1	QL(60 ea per 30 day(s) retail; 60 ea per 30 days mail); PA
QALSODY	1	AL(At least 18 yrs old); PA
RADICAVA ORS STARTER KIT SUSP	1	PA
RADICAVA ORS SUSP	1	PA
RADICAVA SOLN (<i>edaravone</i>)	1	PA
RADICAVA SOLN (<i>edaravone</i>)	9	
RILUTEK TABS (<i>riluzole</i>)	1	PA
<i>riluzole TABS</i>	1	PA
TIGLUTIK SUSP	1	QL(600 ml per 30 day(s) retail; 600 ml per 30 days mail); PA
Depolarizing Muscle Relaxants		
ANECTINE SOLN	1	
QUELICIN SOLN (<i>succinylcholine chloride</i>)	1	
QUELICIN SOLN (<i>succinylcholine chloride</i>)	9	
<i>succinylcholine chloride SOLN</i>	1	
SUCCINYLCHOLINE CHLORIDE SOSY IJ 100 MG/5ML	1	
Friedrich's Ataxia Agents		
SKYCLARYS	1	QL(3 ea daily); AL(At least 18 yrs old); PA
Muscular Dystrophy Agents		
AMONDYS 45	1	PA

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DUVYZAT	1	AL(At least 6 yrs old); PA	ELEVIDYS 18.5-19.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA
ELEVIDYS 10.0-10.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 19.5-20.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA
ELEVIDYS 10.5-11.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 20.5-21.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA
ELEVIDYS 11.5-12.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 21.5-22.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA
ELEVIDYS 12.5-13.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 22.5-23.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA
ELEVIDYS 13.5-14.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 23.5-24.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA
ELEVIDYS 14.5-15.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 24.5-25.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA
ELEVIDYS 15.5-16.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 25.5-26.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA
ELEVIDYS 16.5-17.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 26.5-27.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA
ELEVIDYS 17.5-18.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 27.5-28.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA

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ELEVIDYS 28.5-29.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 38.5-39.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA
ELEVIDYS 29.5-30.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 39.5-40.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA
ELEVIDYS 30.5-31.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 40.5-41.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA
ELEVIDYS 31.5-32.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 41.5-42.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA
ELEVIDYS 32.5-33.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 42.5-43.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA
ELEVIDYS 33.5-34.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 43.5-44.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA
ELEVIDYS 34.5-35.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 44.5-45.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA
ELEVIDYS 35.5-36.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 45.5-46.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA
ELEVIDYS 36.5-37.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 46.5-47.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA
ELEVIDYS 37.5-38.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 47.5-48.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA

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ELEVIDYS 48.5-49.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 58.5-59.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA
ELEVIDYS 49.5-50.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 59.5-60.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA
ELEVIDYS 50.5-51.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 60.5-61.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA
ELEVIDYS 51.5-52.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 61.5-62.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA
ELEVIDYS 52.5-53.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 62.5-63.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA
ELEVIDYS 53.5-54.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 63.5-64.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA
ELEVIDYS 54.5-55.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 64.5-65.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA
ELEVIDYS 55.5-56.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 65.5-66.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA
ELEVIDYS 56.5-57.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 66.5-67.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA
ELEVIDYS 57.5-58.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ELEVIDYS 67.5-68.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA

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ELEVIDYS 68.5-69.4 KG	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ZOLGENSMA 10.1-10.5 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA
ELEVIDYS 69.5 KG PLUS	1	QL(1 ea per fill retail); AL(At least 4 yrs old - Up to 5 yrs old); PA	ZOLGENSMA 10.6-11.0 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA
EXONDYS 51	1	PA	ZOLGENSMA 11.1-11.5 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA
VILTEPSO	1	PA	ZOLGENSMA 11.6-12.0 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA
VYONDYS 53	1	PA	ZOLGENSMA 12.1-12.5 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA
Neuromuscular Blocking Agent - Neurotoxins			ZOLGENSMA 12.6-13.0 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA
BOTOX IJ	1		ZOLGENSMA 13.1-13.5 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA
DYSPOORT	1		ZOLGENSMA 13.6-14.0 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA
MYOBLOC	1		ZOLGENSMA 14.1-14.5 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA
XEOMIN	1		ZOLGENSMA 14.6-15.0 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA
Nondepolarizing Muscle Relaxants			ZOLGENSMA 15.1-15.5 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA
<i>atracurium besylate 50 MG/5ML, 100 MG/10ML</i>	1		ZOLGENSMA 15.6-16.0 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA
<i>cisatracurium besylate SOLN</i>	1		ZOLGENSMA 16.1-16.5 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA
NIMBEX SOLN (<i>cisatracurium besylate</i>)	9		ZOLGENSMA 16.6-17.0 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA
<i>rocuronium bromide SOLN</i>	1		ZOLGENSMA 17.1-17.5 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA
<i>vecuronium bromide SOLR</i>	1		ZOLGENSMA 17.6-18.0 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA
Rett Syndrome Agents					
DAYBUE	1	QL(3600 ml per 30 day(s) retail; 3600 ml per 30 days mail); AL(At least 2 yrs old); PA			
Spinal Muscular Atrophy Agents (SMA)					
EVRYSDI	1	QL(240 ml per 35 day(s) retail; 240 ml per 35 days mail); PA			
SPINRAZA	1	PA			

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ZOLGENSMA 18.1-18.5 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA	ZOLGENSMA 7.6-8.0 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA
ZOLGENSMA 18.6-19.0 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA	ZOLGENSMA 8.1-8.5 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA
ZOLGENSMA 19.1-19.5 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA	ZOLGENSMA 8.6-9.0 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA
ZOLGENSMA 19.6-20.0 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA	ZOLGENSMA 9.1-9.5 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA
ZOLGENSMA 2.6-3.0 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA	ZOLGENSMA 9.6-10.0 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA
ZOLGENSMA 20.1-20.5 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA	NUTRIENTS		
ZOLGENSMA 20.6-21.0 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA	Carbohydrates		
ZOLGENSMA 3.1-3.5 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA	DEXTROSE 30% SOLN	1	
ZOLGENSMA 3.6-4.0 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA	<i>dextrose SOLN 5 %, 10 %, 50 %, 70 %, 250 MG/ML</i>	1	
ZOLGENSMA 4.1-4.5 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA	DEXTROSE SOLN	1	
ZOLGENSMA 4.6-5.0 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA	Lipids		
ZOLGENSMA 5.1-5.5 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA	DOJOLVI	1	AL(Up to 21 yrs old); PA
ZOLGENSMA 5.6-6.0 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA	MCT OIL OIL	1	AL(Up to 20 yrs old); PA
ZOLGENSMA 6.1-6.5 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA	OMEGAVEN	1	
ZOLGENSMA 6.6-7.0 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA	Proteins		
ZOLGENSMA 7.1-7.5 KG	1	QL(1 ea per fill retail); AL(Up to 1 yrs old); PA			

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<i>amino acid infusion SOLN</i> 1.04 GM/100ML-2.17 GM/100ML-592 MG/100ML-434 MG/100ML-39 MG/100ML-1.04 GM/100ML-749 MG/100ML-1.04 GM/100ML-894 MG/100ML-147.4 MEQ/L- 960 MG/100ML-749 MG/100ML-250 MG/100ML-749 MG/100ML-1.47 GM/100ML-894 MG/100ML-749 MG/100ML-1.18 GM/100ML, 1040 MG/100ML-2170 MG/100ML-592 MG/100ML-434 MG/100ML-1180 MG/100ML-39 MG/100ML-1040 MG/100ML-749 MG/100ML-1040 MG/100ML-894 MG/100ML-151 MEQ/L- 960 MG/100ML-749 MG/100ML-250 MG/100ML-749 MG/100ML-1470 MG/100ML-894 MG/100ML-749 MG/100ML	1		PHENYLADE PHEBLOC POWD OR	1	
			PHENYLADE PHEBLOC TABS	1	
			PHENYLADE40 DRINK MIX PACK	1	
			PHENYLADE POWD OR	1	
			PKU GOLIKE 10G P.E. BAR	1	
			PKU GOLIKE 10G PE BAR	1	
			PKU GOLIKE PLUS 16+ PACK	1	
			PKU GOLIKE PLUS 4-16 PACK	1	
			PKU MAXAMUM POWD OR	1	
			PROSOL SOLN	1	
			XPHE MAXAMUM PACK	1	
			OPHTHALMIC AGENTS - Drugs to Treat the Eye		
			Artificial Tears and Lubricants		
			LACRISERT	1	
			<i>white petrolatum-mineral oil</i>	1	AL(Up to 20 yrs old); PA
			Beta-blockers - Ophthalmic		
			<i>betaxolol hcl (ophth) SOLN</i>	2	QL(15 ml per 30 day(s) retail; 15 ml per 30 days mail)
			BETIMOL	1	MP; PA
			BETOPTIC-S SUSP	1	
			<i>brimonidine tartrate- timolol maleate</i>	1	Brand Required; QL(30 ml per 90 day(s) retail; 30 ml per 90 days mail); AL(At least 3 yrs old); MP; PA
<i>amino acids TABS</i>	1				
ELCYS	1				
PERIFLEX LQ PKU LIQD	1				
PHENYLADE AMINO ACID BLEND PACK	1				
PHENYLADE AMINO ACID BAR	1				
PHENYLADE MTE AMINO ACIDBLEND PACK	1				
PHENYLADE MTE POWD OR	1				

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<i>carteolol hcl (ophth)</i>	1	QL(30 ml per 90 day(s) retail; 30 ml per 90 days mail); MP	<i>timolol maleate (ophth) SOLN</i>	1	QL(30 ml per 90 day(s) retail; 30 ml per 90 days mail); MP
COMBIGAN (<i>brimonidine tartrate-timolol maleate</i>)	1	Brand Required; QL(30 ml per 90 day(s) retail; 30 ml per 90 days mail); AL(At least 3 yrs old); MP	TIMOPTIC OCUDOSE SOLN (<i>timolol maleate (ophth)</i>)	1	QL(60 ea per 30 day(s) retail; 60 ea per 30 days mail); PA
COSOPT (<i>dorzolamide hcl-timolol maleate</i>)	1	MP	TIMOPTIC SOLN (<i>timolol maleate (ophth)</i>)	1	QL(30 ml per 90 day(s) retail; 30 ml per 90 days mail); MP
COSOPT (<i>dorzolamide hcl-timolol maleate</i>)	9	MP	TIMOPTIC-XE SOLG (<i>timolol maleate (ophth)</i>)	2	QL(10 ml per 30 day(s) retail; 10 ml per 30 days mail)
COSOPT PF (<i>dorzolamide hcl-timolol maleate</i>)	9	QL(60 ea per 30 day(s) retail; 60 ea per 30 days mail)	Cholinergic Agonists		
COSOPT PF (<i>dorzolamide hcl-timolol maleate</i>)	2	QL(60 ea per 30 day(s) retail; 60 ea per 30 days mail)	TYRVAYA	1	QL(8.4 ml per 30 day(s) retail; 8 ml per 30 days mail); PA
<i>dorzolamide hcl-timolol maleate</i>	2	QL(60 ea per 30 day(s) retail; 60 ea per 30 days mail)	Cycloplegic Mydriatics		
<i>dorzolamide hcl-timolol maleate</i>	1	MP	<i>atropine sulfate (ophthalmic) OINT</i>	1	QL(3.5 gm per fill retail)
ISTALOL SOLN (<i>timolol maleate (ophth)</i>)	1	MP; PA	<i>atropine sulfate (ophthalmic) SOLN</i>	1	
<i>levobunolol hcl 0.5 %</i>	1	QL(30 ml per 90 day(s) retail; 30 ml per 90 days mail); MP	ATROPINE SULFATE SOLN 1 %	1	
<i>timolol maleate (ophth) SOLG</i>	2	QL(10 ml per 30 day(s) retail; 10 ml per 30 days mail)	CYCLOGYL (<i>cyclopentolate hcl</i>)	1	
<i>timolol maleate (ophth) SOLN 0.5 %</i>	1	MP; PA	CYCLOGYL	1	
<i>timolol maleate (ophth) SOLN</i>	1	QL(60 ea per 30 day(s) retail; 60 ea per 30 days mail); PA	CYCLOMYDRIL	1	
			<i>cyclopentolate hcl 1 %</i>	1	
			MYDRIACYL SOLN (<i>tropicamide</i>)	1	
			<i>phenylephrine hcl (mydriatic) SOLN</i>	1	
			<i>tropicamide SOLN</i>	1	
			Miotics		
			MIOCHOL-E SOLR	1	
			MIOSTAT IO	1	QL(1.5 ml per fill retail)

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PHOSPHOLINE IODIDE	1	QL(15 ml per 90 day(s) retail; 15 ml per 90 days mail); MP	<i>brimonidine tartrate 0.1 %</i>	1	QL(30 ml per 90 day(s) retail; 30 ml per 90 days mail); AL(At least 3 yrs old); MP; PA
<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	1	QL(30 ml per 90 day(s) retail; 30 ml per 90 days mail)	<i>brimonidine tartrate 0.2 %</i>	1	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail; AL(At least 3 yrs old); MP
VUITY SOLN	1	PA	<i>brimonidine tartrate 0.15 %</i>	1	Brand Required; QL(15 ml per 30 day(s) retail; 15 ml per 30 days mail); AL(At least 3 yrs old); PA
Ophthalmic - Angiogenesis Inhibitors			IOPIDINE	2	
BEOVU SOSY	1		SIMBRINZA	1	QL(24 ml per 90 day(s) retail; 24 ml per 90 days mail); MP
BYOOVIZ	1		Ophthalmic Anti-infectives		
CIMERLI	1		AZASITE	1	QL(2.5 ml per fill retail); PA
EYLEA HD SOLN	1		BACIGUENT	1	QL(3.5 gm per fill retail); PA
EYLEA SOLN	1		<i>bacitracin (ophthalmic)</i>	1	QL(3.5 gm per fill retail); PA
EYLEA SOSY	1		<i>bacitracin-polymyxin b (ophth)</i>	1	QL(3.5 gm per fill retail)
LUCENTIS SOSY 0.3 MG/0.05ML	1		BESIVANCE	1	
LUCENTIS SOSY 0.5 MG/0.05ML	1	QL(0.5 ml per fill retail)	CILOXAN OINT	1	QL(3.5 gm per fill retail); PA
SUSVIMO SOLN	1		<i>ciprofloxacin hcl (ophth) SOLN</i>	1	QL(10 ml per fill retail)
VABYSMO SOLN	1		<i>ciprofloxacin hcl (ophth) SOLN</i>	1	QL(2.5 ml per fill retail)
VABYSMO SOSY	1		<i>ciprofloxacin hcl (ophth) SOLN</i>	1	QL(5 ml per fill retail)
Ophthalmic Adrenergic Agents					
ALPHAGAN P 0.1 % (<i>brimonidine tartrate</i>)	1	Brand Required; QL(30 ml per 90 day(s) retail; 30 ml per 90 days mail); AL(At least 3 yrs old); MP			
ALPHAGAN P 0.15 % (<i>brimonidine tartrate</i>)	1	Brand Required; QL(15 ml per 30 day(s) retail; 15 ml per 30 days mail); AL(At least 3 yrs old); PA			
<i>apraclonidine hcl</i>	2	QL(30 ml per 90 day(s) retail; 30 ml per 90 days mail)			

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ERYTHROMYCIN	1	1 package(s) per 5 day(s) retail; 1 package(s) per 5 day(s) mail	XDEMVY	1	QL(10 ml per 42 day(s) retail; 10 ml per 42 days mail); AL(At least 18 yrs old); PA
<i>erythromycin (ophth)</i>	1	1 package(s) per 5 day(s) retail; 1 package(s) per 5 day(s) mail	ZIRGAN GEL	1	
<i>gatifloxacin (ophth)</i>	1	QL(2.5 ml per fill retail); PA	ZYMAXID (<i>gatifloxacin (ophth)</i>)	9	QL(2.5 ml per fill retail)
<i>gentamicin sulfate (ophth) SOLN</i>	1		Ophthalmic Complement Inhibitors		
<i>moxifloxacin hcl (ophth) SOLN OP</i>	1		IZERVAY	1	
NATACYN	1		SYFOVRE	1	
<i>neomycin-bacitracin zn-polymyxin</i>	1	QL(3.5 gm per fill retail)	Ophthalmic Gene Therapy		
<i>neomycin-polymyxin-gramicidin</i>	1		LUXTURNA	1	QL(0.5 ml per fill retail); AL(At least 4 yrs old); PA
OCUFLOX (<i>ofloxacin (ophth)</i>)	1		Ophthalmic Immunomodulators		
<i>ofloxacin (ophth)</i>	1		CEQUA SOLN	1	QL(60 ea per 30 day(s) retail; 60 ea per 30 days mail); PA
<i>polymyxin b-trimethoprim</i>	1	1 package(s) per 10 day(s) retail; 1 package(s) per 10 day(s) mail	<i>cyclosporine (ophth) EMUL</i>	1	QL(60 ea per 30 day(s) retail; 60 ea per 30 days mail)
<i>sulfacetamide sodium (ophth) OINT</i>	1	QL(3.5 gm per fill retail); PA	RESTASIS MULTIDOSE EMUL	1	QL(5.5 ml per 30 day(s) retail; 6 ml per 30 days mail); PA
<i>sulfacetamide sodium (ophth) SOLN</i>	1		RESTASIS EMUL (<i>cyclosporine (ophth)</i>)	1	QL(60 ea per 30 day(s) retail; 60 ea per 30 days mail)
<i>tobramycin (ophth) SOLN</i>	1		VERKAZIA EMUL	1	QL(120 ea per 30 day(s) retail; 120 ea per 30 days mail); PA
TOBREX OINT	1	QL(3.5 gm per fill retail)	VEVYE SOLN	1	AL(At least 18 yrs old); PA
<i>trifluridine</i>	1	QL(7.5 ml per fill retail)	Ophthalmic Integrin Antagonists		
VIGAMOX SOLN OP (<i>moxifloxacin hcl (ophth)</i>)	1	PA			
VIGAMOX SOLN OP (<i>moxifloxacin hcl (ophth)</i>)	1				

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XIIDRA	1	QL(60 ea per 30 day(s) retail; 60 ea per 30 days mail); AL(At least 17 yrs old); PA	DEXTENZA INST	1	
			<i>difluprednate</i>	1	Brand Required; PA
			DUREZOL (<i>difluprednate</i>)	9	Brand Required
Ophthalmic Kinase Inhibitors			DUREZOL (<i>difluprednate</i>)	1	Brand Required
RHOPRESSA	1	QL(7.5 ml per 90 day(s) retail; 8 ml per 90 days mail); MP	EYSUVIS SUSP	1	QL(8.3 ml per 15 day(s) retail; 8 ml per 15 days mail); PA
ROCKLATAN	1	QL(10 ml per 90 day(s) retail; 10 ml per 90 days mail); MP	FLAREX	1	
Ophthalmic Local Anesthetics			<i>fluorometholone (ophth) SUSP</i>	1	
AKTEN	1		FML FORTE SUSP	1	QL(15 ml per 30 day(s) retail; 15 ml per 30 days mail); PA
ALCAINE (<i>proparacaine hcl</i>)	1		FML LIQUIFILM SUSP (<i>fluorometholone (ophth)</i>)	1	
IHEEZO	1		ILUVIEN	1	
<i>proparacaine hcl</i>	1		INVELTYS SUSP	1	QL(2.8 ml per 12 day(s) retail; 3 ml per 12 days mail); PA
<i>tetracaine hcl (ophth)</i>	1		LOTEMAX SM GEL	1	QL(5 gm per 12 day(s) retail; 5 gm per 12 days mail); PA
Ophthalmic Nerve Growth Factors			LOTEMAX GEL (<i>loteprednol etabonate</i>)	1	Brand Required; QL(5 gm per 15 day(s) retail; 5 gm per 15 days mail)
OXERVATE	1	QL(14 ml per 12 day(s) retail; 14 ml per 12 days mail); PA	LOTEMAX OINT	1	Brand Required; QL(3.5 gm per 15 day(s) retail; 4 gm per 15 days mail)
Ophthalmic Photodynamic Therapy Agents					
VISUDYNE	1				
Ophthalmic Photoenhancers					
PHOTREXA/PHOTREXA VISCOUS KIT	1				
Ophthalmic Steroids					
ALREX SUSP (<i>loteprednol etabonate</i>)	3	QL(10 ml per 30 day(s) retail; 10 ml per 30 days mail)			
<i>bacitracin-poly-neomycin-hc</i>	1	QL(3.5 gm per fill retail); PA			
<i>dexamethasone sodium phosphate (ophth)</i>	1				

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LOTEMAX SUSP (<i>loteprednol etabonate</i>)	1	Brand Required; 2 package(s) per 30 day(s) retail; 2 package(s) per 30 day(s) mail	PRED MILD	1	
<i>loteprednol etabonate GEL</i>	1	Brand Required; QL(5 gm per 15 day(s) retail; 5 gm per 15 days mail); PA	<i>prednisolone acetate (ophth)</i>	1	QL(15 ml per 30 day(s) retail; 15 ml per 30 days mail)
<i>loteprednol etabonate SUSP 0.5 %</i>	1	2 package(s) per 30 day(s) retail; 2 package(s) per 30 day(s) mail	PREDNISOLONE SODIUM PHOSPHATE	1	
<i>loteprednol etabonate SUSP 0.5 %</i>	1	Brand Required; 2 package(s) per 30 day(s) retail; 2 package(s) per 30 day(s) mail; PA	RETISERT	1	
<i>loteprednol etabonate SUSP 0.2 %</i>	3	QL(10 ml per 30 day(s) retail; 10 ml per 30 days mail)	<i>sulfacetamide sod-prednisolone SOLN</i>	1	
MAXIDEX SUSP OP	1		TOBRADEX ST SUSP	1	QL(20 ml per 30 day(s) retail; 20 ml per 30 days mail)
MAXITROL OINT (<i>neomycin-polymyxin-dexameth</i>)	1	QL(3.5 gm per fill retail)	TOBRADEX OINT	1	QL(3.5 gm per fill retail); PA
MAXITROL SUSP (<i>neomycin-polymyxin-dexameth</i>)	1	QL(5 ml per fill retail)	TOBRADEX SUSP (<i>tobramycin-dexamethasone</i>)	9	1 package(s) per 15 day(s) retail; 1 package(s) per 15 day(s) mail
<i>neomycin-polymyxin-dexameth OINT</i>	1	QL(3.5 gm per fill retail)	TOBRADEX SUSP (<i>tobramycin-dexamethasone</i>)	9	
<i>neomycin-polymyxin-dexameth SUSP</i>	1	QL(5 ml per fill retail)	TOBRADEX SUSP (<i>tobramycin-dexamethasone</i>)	1	1 package(s) per 10 day(s) retail; 1 package(s) per 10 day(s) mail
<i>neomycin-polymyxin-hc (ophth)</i>	1	QL(7.5 ml per fill retail)	<i>tobramycin-dexamethasone SUSP</i>	1	1 package(s) per 15 day(s) retail; 1 package(s) per 15 day(s) mail
OZURDEX IMPL	1		<i>tobramycin-dexamethasone SUSP</i>	1	1 package(s) per 5 day(s) retail; 1 package(s) per 5 day(s) mail
PRED FORTE (<i>prednisolone acetate (ophth)</i>)	1	QL(15 ml per 30 day(s) retail; 15 ml per 30 days mail); PA	<i>tobramycin-dexamethasone SUSP</i>	1	1 package(s) per 10 day(s) retail; 1 package(s) per 10 day(s) mail
			TRIESENCE	1	QL(10 ml per 7 day(s) retail; 10 ml per 7 days mail)

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XIPERE	1	QL(10 ml per 7 day(s) retail; 10 ml per 7 days mail)	<i>bromfenac sodium (ophth) 0.09 %</i>	1	QL(1.7 ml per 5 day(s) retail; 2 ml per 5 days mail); ST; PA
YUTIQ	1		<i>bromfenac sodium (ophth) 0.075 %</i>	1	QL(5 ml per fill retail); ST; PA
ZYLET	1	PA	<i>bromfenac sodium (ophth) 0.07 %</i>	1	QL(3 ml per fill retail); ST; PA
Ophthalmic Surgical Aids			BROMSITE (<i>bromfenac sodium (ophth)</i>)	1	QL(5 ml per fill retail); ST; PA
OMIDRIA	1		BSS PLUS SOLN	1	
Ophthalmics - Misc.			BSS SOLN	1	
ACULAR (<i>ketorolac tromethamine (ophth)</i>)	1		<i>cromolyn sodium (ophth)</i>	1	QL(10 ml per 30 day(s) retail; 10 ml per 30 days mail)
ACULAR LS (<i>ketorolac tromethamine (ophth)</i>)	1	QL(5 ml per 30 day(s) retail; 5 ml per 30 days mail); ST; PA	CYSTADROPS	1	QL(20 ml per 28 day(s) retail; 20 ml per 28 days mail); PA
ACUVAIL	1	QL(30 ea per 12 day(s) retail; 30 ea per 12 days mail); ST; PA	CYSTARAN	1	QL(60 ml per 30 day(s) retail; 60 ml per 30 days mail); PA
ALOMIDE	3	QL(10 ml per 30 day(s) retail; 10 ml per 30 days mail)	<i>diclofenac sodium (ophth)</i>	1	1 package(s) per 10 day(s) retail; 1 package(s) per 10 day(s) mail
<i>azelastine hcl (ophth)</i>	2	QL(6 ml per 30 day(s) retail; 6 ml per 30 days mail)	<i>diclofenac sodium (ophth)</i>	1	1 package(s) per 5 day(s) retail; 1 package(s) per 5 day(s) mail
AZOPT (<i>brinzolamide</i>)	1	Brand Required; QL(30 ml per fill retail); MP	<i>dorzolamide hcl</i>	1	QL(30 ml per 90 day(s) retail; 30 ml per 90 days mail); MP
<i>bepotastine besilate</i>	3	QL(10 ml per 30 day(s) retail; 10 ml per 30 days mail)	<i>epinastine hcl (ophth)</i>	2	QL(5 ml per 30 day(s) retail; 5 ml per 30 days mail)
BEPREVE (<i>bepotastine besilate</i>)	3	QL(10 ml per 30 day(s) retail; 10 ml per 30 days mail)	<i>fluorescein sodium injection IV 10 %</i>	1	
<i>brinzolamide</i>	1	Brand Required; QL(30 ml per fill retail); MP; PA	FLUORESCEIN SODIUM/BENOXINATE HYDROCHLORIDE	1	

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FLUORESCITE IV 10 % (fluorescein sodium injection)	1		olopatadine hcl 0.1 %	2	1 package(s) per 25 day(s) retail; 1 package(s) per 25 day(s) mail; RX/OTC
FLUOR-I-STRIPS A.T. STRP	1		PATADAY 0.1 % (olopatadine hcl)	2	1 package(s) per 25 day(s) retail; 1 package(s) per 25 day(s) mail; RX/OTC
flurbiprofen sodium	1	QL(2.5 ml per fill retail)	PATADAY 0.2 % (olopatadine hcl)	3	QL(2.5 ml per 25 day(s) retail; 2 ml per 25 days mail); RX/OTC
GLOSTRIPS STRP 1 MG	1		PATADAY EXTRA STRENGTH	2	2 package(s) per 30 day(s) retail; 2 package(s) per 30 day(s) mail
ILEVRO	1	QL(3 ml per 12 day(s) retail; 3 ml per 12 days mail); ST; PA	PROLENSA (bromfenac sodium (ophth))	1	QL(3 ml per fill retail); ST; PA
ketorolac tromethamine (ophth) 0.4 %	1	QL(5 ml per 30 day(s) retail; 5 ml per 30 days mail); ST; PA	TRUSOPT (dorzolamide hcl)	9	QL(30 ml per 90 day(s) retail; 30 ml per 90 days mail); MP
ketorolac tromethamine (ophth) 0.5 %	1		ZADITOR 0.035 % (ketotifen fumarate (ophth))	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail; AL(Up to 20 yrs old)
ketotifen fumarate (ophth) 0.035 %	1	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail; AL(Up to 20 yrs old)	ZADITOR 0.035 % (ketotifen fumarate (ophth))	9	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail
MIEBO	1	QL(12 ml per 30 day(s) retail; 12 ml per 30 days mail); AL(At least 18 yrs old); PA	ZERVIAE	3	QL(60 ea per 30 day(s) retail; 60 ea per 30 days mail)
MURO 128 SOLN (sodium chloride hypertonic)	1	AL(Up to 20 yrs old); PA	Prostaglandins - Ophthalmic		
NEVANAC	1	QL(3 ml per 12 day(s) retail; 3 ml per 12 days mail); ST; PA			
olopatadine hcl 0.2 %	3	QL(2.5 ml per 25 day(s) retail; 2 ml per 25 days mail); RX/OTC			

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<i>bimatoprost SOLN</i>	2	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail	ZIOPTAN (<i>tafluprost</i>)	1	Brand Required; QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail)
DURYSTA IMPL	1		ZIOPTAN (<i>tafluprost</i>)	9	Brand Required; QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail)
IDOSE TR IMPL	1		OTIC AGENTS - Drugs to Treat the Ear		
IYUZEH SOLN	1	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); PA	Otic Agents - Miscellaneous		
<i>latanoprost SOLN</i>	1	QL(30 ml per 90 day(s) retail; 30 ml per 90 days mail); MP	<i>acetic acid (otic)</i>	1	QL(15 ml per 30 day(s) retail; 15 ml per 30 days mail)
LUMIGAN SOLN 0.01 %	1	MP	Otic Anti-infectives		
<i>tafluprost</i>	1	Brand Required; QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); PA	CETRAXAL (<i>ciprofloxacin hcl (otic)</i>)	9	QL(14 ea per 14 day(s) retail; 14 ea per 14 days mail)
TRAVATAN Z SOLN (<i>travoprost</i>)	1	6 package(s) per 90 day(s) retail; 6 package(s) per 90 day(s) mail; MP	<i>ciprofloxacin hcl (otic)</i>	2	QL(14 ea per 14 day(s) retail; 14 ea per 14 days mail)
<i>travoprost SOLN</i>	1	6 package(s) per 90 day(s) retail; 6 package(s) per 90 day(s) mail; MP; PA	<i>ofloxacin (otic)</i>	1	ST
VYZULTA	1	QL(5 ml per 30 day(s) retail; 5 ml per 30 days mail); PA	Otic Combinations		
XALATAN SOLN (<i>latanoprost</i>)	1	QL(30 ml per 90 day(s) retail; 30 ml per 90 days mail); MP	CIPRO HC	1	
XELPROS EMUL	2	QL(10 ml per 30 day(s) retail; 10 ml per 30 days mail)	CIPRODEX (<i>ciprofloxacin-dexamethasone</i>)	2	QL(7.5 ml per fill retail)
			<i>ciprofloxacin-dexamethasone</i>	2	QL(7.5 ml per fill retail)
			<i>ciprofloxacin-fluocinolone acetone</i>	2	QL(14 ea per 7 day(s) retail; 14 ea per 7 days mail)
			CORTISPORIN-TC	1	QL(10 ml per fill retail)
			<i>neomycin-polymyxin-hc (otic) SOLN</i>	2	QL(10 ml per fill retail); ST
			<i>neomycin-polymyxin-hc (otic) SUSP</i>	2	ST

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OTOVEL (<i>ciprofloxacin-fluocinolone acetonide</i>)	9	QL(14 ea per 7 day(s) retail; 14 ea per 7 days mail)	ANTIVENIN LATRODECTUS MACTANS	1	
Otic Steroids			ANTIVENIN NORTH AMERICANCORAL SNAKE	1	
DERMOTIC (<i>fluocinolone acetonide (otic)</i>)	1	QL(20 ml per fill retail)	Immune Serums		
<i>fluocinolone acetonide (otic)</i>	1	QL(20 ml per fill retail)	ALYGLO	1	AL(At least 18 yrs old)
<i>hydrocortisone w/acetic acid</i>	1	PA	ASCENIV	1	
OXYTOCICS - Drugs to Prevent/Control Uterine Bleeding			BIVIGAM SOLN	1	
Abortifacients/Agents for Cervical Ripening			CUTAQUIG	1	
<i>carboprost tromethamine SOLN</i>	1		CUVITRU SOLN	1	
CARBOPROST TROMETHAMINE SOSY	1		CYTOGAM IV 50 MG/ML	1	
CERVIDIL INST	1		GAMASTAN	1	
HEMABATE SOLN (<i>carboprost tromethamine</i>)	1		GAMMAGARD LIQUID	1	
HEMABATE SOLN (<i>carboprost tromethamine</i>)	9		GAMMAGARD S/D IGA LESS THAN 1MCG/ML SOLR	1	
PREPIDIL GEL	1		GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	1	
Oxytocics			GAMMAPLEX SOLN	1	
<i>methylergonovine maleate SOLN</i>	1		GAMUNEX-C	1	
<i>methylergonovine maleate TABS</i>	1	QL(28 ea per fill retail)	HEPAGAM B SOLN IJ	1	AL(At least 19 yrs old)
<i>oxytocin</i>	1		HIZENTRA SOLN	1	
PITOCIN (<i>oxytocin</i>)	1		HIZENTRA SOSY	1	
PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System			HYPERHEP B SOLN IM	1	AL(At least 19 yrs old)
Antitoxins-Antivenins			HYPERHEP B SOSY 110 UNIT/0.5ML	1	QL(0.5 ml per fill retail); AL(At least 19 yrs old)
			HYPERRAB SOLN	1	
			HYPERRHO S/D MINI-DOSE SOSY IM	1	
			HYPERRHO S/D SOSY IM 1500 UNIT	1	
			HYPERTET SOSY	1	AL(At least 19 yrs old)
			KEDRAB SOLN	1	

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NABI-HB SOLN IM	1	AL(At least 19 yrs old)	<i>amoxicillin CHEW 125 MG, 250 MG</i>	1	
OCTAGAM SOLN	1		<i>amoxicillin SUSR</i>	1	
PANZYGA	1		AMOXICILLIN SUSR (<i>amoxicillin</i>)	1	
PRIVIGEN SOLN	1		<i>amoxicillin TABS</i>	1	
RHOGAM ULTRA-FILTERED PLUS SOSY IM	1		<i>ampicillin sodium IJ 1 GM, 2 GM, 250 MG, 500 MG</i>	1	
RHOPHYLAC SOSY IJ	1		<i>ampicillin CAPS 500 MG</i>	1	
VARIZIG SOLN	1		Natural Penicillins		
WINRHO SDF SOLN 1500 UNIT/1.3ML	1	QL(1.3 ml per fill retail)	BICILLIN L-A SUSY	1	
WINRHO SDF SOLN 5000 UNIT/4.4ML	1	QL(4.4 ml per fill retail)	<i>penicillin g potassium</i>	1	
WINRHO SDF SOLN 15000 UNIT/13ML	1		PENICILLIN G POTASSIUM IN ISO-OSMOTIC DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML	1	
WINRHO SDF SOLN 2500 UNIT/2.2ML	1	QL(2.2 ml per fill retail)	<i>penicillin g sodium</i>	1	
XEMBIFY	1		<i>penicillin v potassium SOLR</i>	1	
Monoclonal Antibodies			<i>penicillin v potassium TABS</i>	1	
BEYFORTUS 50 MG/0.5ML	1	QL(0.5 ml per fill retail); AL(Up to 1 yrs old)	Penicillin Combinations		
BEYFORTUS 100 MG/ML	1	QL(2 ml per fill retail); AL(Up to 1 yrs old)	<i>amoxicillin & pot clavulanate CHEW</i>	1	
SYNAGIS SOLN 50 MG/0.5ML	1	QL(0.5 ml per 30 day(s) retail); AL(Up to 2 yrs old); PA	<i>amoxicillin & pot clavulanate SUSR</i>	1	
SYNAGIS SOLN 100 MG/ML	1	QL(1 ml per 30 day(s) retail; 1 ml per 30 days mail); AL(Up to 2 yrs old); PA	<i>amoxicillin & pot clavulanate TABS</i>	1	
ZINPLAVA	1		<i>amoxicillin & pot clavulanate TB12</i>	1	QL(40 ea per 10 day(s) retail; 40 ea per 10 days mail); PA
Passive Immunizing Agents - Combinations			<i>ampicillin & sulbactam sodium IJ 1 GM-0.5 GM, 2 GM-1 GM</i>	1	
HYQVIA	1		AUGMENTIN ES-600 SUSR (<i>amoxicillin & pot clavulanate</i>)	1	
PENICILLINS - Drugs to Treat Bacterial Infections			AUGMENTIN SUSR 31.25 MG/5ML-125 MG/5ML	1	
Aminopenicillins					
<i>amoxicillin CAPS</i>	1				

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AUGMENTIN TABS 125 MG-500 MG (<i>amoxicillin & pot clavulanate</i>)	9		BACTERIOSTATIC WATER FORINJECTION/BENZYL ALCOHOL	1	
BICILLIN C-R 300000 UNIT/2ML-900000 UNIT/2ML, 300000 UNIT/ML-300000 UNIT/ML	1		CHERRY SYRUP	1	AL(Up to 20 yrs old); RX/OTC
<i>piperacillin sodium-tazobactam sodium</i>	1		<i>glycine diluent</i>	1	
UNASYN IJ 1 GM-0.5 GM, 2 GM-1 GM (<i>ampicillin & sulbactam sodium</i>)	9		IV STABILIZER FOR LUMOXITI	1	
UNASYN IJ 1 GM-0.5 GM, 2 GM-1 GM (<i>ampicillin & sulbactam sodium</i>)	1		ORA-BLEND SF SUSP	1	AL(Up to 20 yrs old); RX/OTC
UNASYN BULK PACK IV (<i>ampicillin & sulbactam sodium</i>)	1		ORA-BLEND SUSP	1	AL(Up to 20 yrs old); RX/OTC
ZOSYN	1		ORAL SUSPEND LIQD	1	AL(Up to 20 yrs old); RX/OTC
Penicillinase-Resistant Penicillins			ORAL SYRUP SF SYRP	1	AL(Up to 20 yrs old); RX/OTC
<i>dicloxacillin sodium</i>	1		ORA-PLUS LIQD	1	AL(Up to 20 yrs old); RX/OTC
NAFCILLIN	1		ORA-SWEET SF SYRP 10 %-9 %	1	AL(Up to 20 yrs old); RX/OTC
<i>nafcillin sodium IJ 1 GM, 2 GM</i>	1		ORA-SWEET SYRP	1	AL(Up to 20 yrs old); RX/OTC
<i>oxacillin sodium IJ 1 GM, 2 GM</i>	1		SIMPLE SYRUP	1	AL(Up to 20 yrs old); RX/OTC
OXACILLIN SODIUM 2 GM/50ML-300 MG/50ML	1		STERILE DILUENT FOR REMODULIN (<i>glycine diluent</i>)	1	
PHARMACEUTICAL ADJUVANTS			SYRPALTA SYRP	1	AL(Up to 20 yrs old); RX/OTC
Flavoring Agents			SYRUP VEHICLE SYRP	1	AL(Up to 20 yrs old); RX/OTC
CHERRY FLAVOR LIQD	1	AL(Up to 20 yrs old); RX/OTC	<i>water for injection, sterile IJ</i>	1	
Internal Vehicle Ingredients/Agents			Pharmaceutical Excipients		
THICK-IT #2 POWD	1	AL(Up to 20 yrs old); PA	SODIUM BENZOATE	1	RX/OTC
Liquid Vehicles			PROGESTINS - Hormone Replacement/Modifying Drugs		
<i>bacteriostatic sodium chloride</i>	1		Progestins		
			AYGESTIN TABS (<i>norethindrone acetate</i>)	9	
			<i>medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG</i>	1	

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<i>megestrol acetate (appetite)</i>	1		ADLARITY PTWK	1	QL(4 ea per 28 day(s) retail; 4 ea per 28 days mail); AL(At least 51 yrs old); PA
<i>norethindrone acetate TABS</i>	1		ADUHELM	1	PA
<i>progesterone CAPS</i>	1		ARICEPT TABS 10 MG (<i>donepezil hydrochloride</i>)	1	QL(3 ea daily); AL(At least 51 yrs old); MP
<i>progesterone OIL</i>	1		ARICEPT TABS 23 MG (<i>donepezil hydrochloride</i>)	1	AL(At least 51 yrs old); PA
PROMETRIUM CAPS (<i>progesterone</i>)	9		ARICEPT TABS 5 MG (<i>donepezil hydrochloride</i>)	1	QL(2 ea daily); AL(At least 51 yrs old); MP
PROMETRIUM CAPS (<i>progesterone</i>)	1		<i>donepezil hydrochloride TABS 5 MG</i>	1	QL(2 ea daily); AL(At least 51 yrs old); MP
PROVERA (<i>medroxyprogesterone acetate</i>)	1		<i>donepezil hydrochloride TABS 23 MG</i>	1	AL(At least 51 yrs old); PA
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions			<i>donepezil hydrochloride TABS 10 MG</i>	1	QL(3 ea daily); AL(At least 51 yrs old); MP
Agents for Chemical Dependency			<i>donepezil hydrochloride TABS 10 MG</i>	1	AL(At least 51 yrs old); PA
<i>acamprosate calcium</i>	1		<i>donepezil hydrochloride TBDP</i>	1	AL(At least 51 yrs old); PA
<i>disulfiram</i>	1		EXELON (<i>rivastigmine</i>)	1	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); AL(At least 51 yrs old); PA
<i>lofexidine hcl</i>	1	QL(168 ea per 14 day(s) retail; 168 ea per 14 days mail); PA	EXELON 13.3 MG/24HR (<i>rivastigmine</i>)	9	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail)
LUCEMYRA (<i>lofexidine hcl</i>)	1	QL(168 ea per 14 day(s) retail; 168 ea per 14 days mail); PA	EXELON 4.6 MG/24HR, 9.5 MG/24HR (<i>rivastigmine</i>)	9	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); AL(At least 51 yrs old)
Anti-Cataplectic Agents			<i>galantamine hydrobromide CP24</i>	1	AL(At least 51 yrs old); PA
SODIUM OXYBATE SOLN	1	Brand Required; PA	<i>galantamine hydrobromide SOLN</i>	1	AL(At least 51 yrs old); PA
XYREM SOLN	1	Brand Required; PA	<i>galantamine hydrobromide TABS 4 MG</i>	1	QL(2 ea daily); AL(At least 51 yrs old); MP
XYWAV	1	QL(540 ml per 30 day(s) retail; 540 ml per 30 days mail); AL(At least 7 yrs old); PA			
Antidementia Agents					

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<i>galantamine hydrobromide TABS 8 MG, 12 MG</i>	1	AL(At least 51 yrs old)	<i>rivastigmine</i>	1	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); AL(At least 51 yrs old); PA
KISUNLA	1	PA	<i>rivastigmine tartrate CAPS 1.5 MG, 4.5 MG, 6 MG</i>	1	AL(At least 51 yrs old)
LEQEMBI	1	PA	<i>rivastigmine tartrate CAPS 3 MG</i>	1	QL(2 ea daily); AL(At least 51 yrs old); MP
<i>memantine hcl CP24</i>	1	QL(1 ea daily); AL(At least 51 yrs old); PA	Cerebral Adrenoleukodystrophy (CALD) Agents		
<i>memantine hcl SOLN 2 MG/ML</i>	1	AL(At least 51 yrs old); PA	SKYSONA	1	QL(1 ea per fill retail); AL(At least 4 yrs old)
<i>memantine hcl TABS</i>	1	AL(At least 51 yrs old); PA	Combination Psychotherapeutics		
<i>memantine hcl TABS 5 MG</i>	1	QL(4 ea daily); AL(At least 51 yrs old); MP	<i>chlordiazepoxide-amitriptyline</i>	1	
<i>memantine hcl TABS 10 MG</i>	1	QL(3 ea daily); AL(At least 51 yrs old); MP	LYBALVI	1	QL(1 ea daily); AL(At least 18 yrs old); PA
NAMENDA TITRATION PAK TABS (<i>memantine hcl</i>)	1	AL(At least 51 yrs old); PA	<i>olanzapine-fluoxetine hcl</i>	1	QL(1 ea daily); AL(At least 5 yrs old); PA
NAMENDA XR CP24 14 MG, 21 MG, 28 MG (<i>memantine hcl</i>)	1	QL(1 ea daily); AL(At least 51 yrs old); PA	<i>perphenazine-amitriptyline</i>	1	
NAMENDA XR CP24 7 MG, 14 MG, 28 MG (<i>memantine hcl</i>)	9	QL(1 ea daily)	SYMBYAX 25 MG-3 MG (<i>olanzapine-fluoxetine hcl</i>)	9	QL(1 ea daily); AL(At least 5 yrs old)
NAMENDA TABS 5 MG (<i>memantine hcl</i>)	9	QL(4 ea daily); MP	SYMBYAX 25 MG-6 MG (<i>olanzapine-fluoxetine hcl</i>)	1	QL(1 ea daily); AL(At least 5 yrs old); PA
NAMENDA TABS 10 MG (<i>memantine hcl</i>)	9	QL(3 ea daily); MP	Fibromyalgia Agents		
NAMZARIC C4PK	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); AL(At least 51 yrs old); PA	SAVELLA TITRATION PACK MISC	1	QL(55 ea per 28 day(s) retail; 55 ea per 28 days mail); ST; PA
NAMZARIC CP24	1	QL(1 ea daily); AL(At least 51 yrs old); PA	SAVELLA TABS	1	QL(2 ea daily); ST; PA
RAZADYNE ER CP24 (<i>galantamine hydrobromide</i>)	9	AL(At least 51 yrs old)	Metachromatic Leukodystrophy (MLD) Agents		
			LENMELDY	1	
			Movement Disorder Drug Therapy		

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AUSTEDO XR PATIENT TITRATION KIT TEPK	1	QL(42 ea per 28 day(s) retail; 42 ea per 28 days mail); PA	COPAXONE SOSY 20 MG/ML (<i>glatiramer acetate</i>)	1	Brand Required; QL(30 ml per 30 day(s) retail; 30 ml per 30 days mail); PA
AUSTEDO XR PATIENT TITRATION KIT TEPK	1	PA	COPAXONE SOSY 40 MG/ML (<i>glatiramer acetate</i>)	1	QL(12 ml per 28 day(s) retail; 12 ml per 28 days mail); PA
AUSTEDO XR TB24 18 MG, 30 MG, 36 MG, 42 MG, 48 MG	1	PA	COPAXONE SOSY 40 MG/ML (<i>glatiramer acetate</i>)	9	QL(12 ml per 28 day(s) retail; 12 ml per 28 days mail)
AUSTEDO XR TB24 6 MG, 12 MG	1	QL(1 ea daily); PA	<i>dalfampridine</i>	1	QL(2 ea daily); PA
AUSTEDO XR TB24 24 MG	1	QL(2 ea daily); PA	<i>dimethyl fumarate CDPK</i>	1	QL(2 ea daily); PA
AUSTEDO TABS	1	QL(4 ea daily); PA	<i>dimethyl fumarate CPDR 120 MG</i>	1	QL(14 ea per fill retail); PA
INGREZZA CAPS	1	QL(1 ea daily); PA	<i>dimethyl fumarate CPDR 240 MG</i>	1	QL(2 ea daily); PA
INGREZZA CPPK	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); PA	<i> fingolimod hcl</i>	1	QL(1 ea daily); PA
INGREZZA CPSP	1	PA	GILENYA (<i> fingolimod hcl</i>)	1	QL(1 ea daily); PA
<i>tetrabenazine</i>	1	PA	<i>glatiramer acetate SOSY 20 MG/ML</i>	1	Brand Required; QL(30 ml per 30 day(s) retail; 30 ml per 30 days mail); PA
XENAZINE (<i>tetrabenazine</i>)	1	PA	<i>glatiramer acetate SOSY 40 MG/ML</i>	1	QL(12 ml per 28 day(s) retail; 12 ml per 28 days mail); PA
Multiple Sclerosis Agents			KESIMPTA	1	QL(0.4 ml per 28 day(s) retail); AL(At least 18 yrs old); PA
AMPYRA (<i>dalfampridine</i>)	1	QL(2 ea daily); PA	LEMTRADA	1	
AUBAGIO (<i>teriflunomide</i>)	9	QL(1 ea daily)	MAVENCLAD	1	PA
AUBAGIO (<i>teriflunomide</i>)	1	QL(1 ea daily); PA	MAYZENT STARTER PACK TBPK	1	QL(49 ea per 28 day(s) retail; 49 ea per 28 days mail); PA
AVONEX PEN AJKT	1	QL(1 ea per 28 day(s) retail; 1 ea per 28 days mail); PA			
AVONEX PSKT	1	QL(3 ea per 84 day(s) retail; 3 ea per 84 days mail); PA			
BAFIERTAM	1	QL(4 ea daily); AL(At least 18 yrs old); PA			
BETASERON KIT	1	QL(0.5 ea daily); PA			
BRIUMVI	1	PA			

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MAYZENT STARTER PACK TBPK	1	QL(12 ea per fill retail); PA	REBIF SOSY	1	QL(6 ml per 28 day(s) retail; 6 ml per 28 days mail); PA
MAYZENT TABS 1 MG, 2 MG	1	QL(1 ea daily); PA	TASCENSO ODT	1	QL(1 ea daily); AL(At least 10 yrs old); PA
MAYZENT TABS 0.25 MG	1	QL(112 ea per 28 day(s) retail; 112 ea per 28 days mail); PA	TECFIDERA STARTER PACK CDPK (<i>dimethyl fumarate</i>)	1	QL(2 ea daily); PA
OCREVUS	1	PA	TECFIDERA CPDR 120 MG (<i>dimethyl fumarate</i>)	1	QL(14 ea per fill retail); PA
OCREVUS ZUNOVO SOLN SC	1	PA	TECFIDERA CPDR 240 MG (<i>dimethyl fumarate</i>)	1	QL(2 ea daily); PA
PLEGRIDY STARTER PACK SOAJ SC	1	QL(1 ml per 28 day(s) retail; 1 ml per 28 days mail); PA	<i>teriflunomide</i>	1	QL(1 ea daily); PA
PLEGRIDY STARTER PACK SOSY SC	1	QL(1 ml per 28 day(s) retail; 1 ml per 28 days mail); PA	TYSABRI	1	PA
PLEGRIDY SOAJ SC 125 MCG/0.5ML	1	QL(1 ml per 28 day(s) retail; 1 ml per 28 days mail); PA	VUMERITY	1	QL(4 ea daily); PA
PLEGRIDY SOSY IM	1	QL(1 ml per 28 day(s) retail; 1 ml per 28 days mail); PA	ZEPOSIA 7-DAY STARTER PACK CPPK	1	QL(7 ea per fill retail); PA
PONVORY 14-DAY STARTER PACK TBPK	1	QL(14 ea per 14 day(s) retail; 14 ea per 14 days mail); AL(At least 18 yrs old); PA	ZEPOSIA STARTER KIT CPPK	1	QL(37 ea per 37 day(s) retail; 37 ea per 37 days mail); PA
PONVORY TABS	1	QL(1 ea daily); AL(At least 18 yrs old); PA	ZEPOSIA STARTER KIT CPPK	1	QL(28 ea per 28 day(s) retail; 28 ea per 28 days mail); PA
REBIF REBIDOSE TITRATIONPACK SOAJ	1	QL(4.2 ml per 30 day(s) retail; 4 ml per 30 days mail); PA	ZEPOSIA CAPS	1	QL(1 ea daily); PA
REBIF REBIDOSE SOAJ	1	QL(6 ml per 28 day(s) retail; 6 ml per 28 days mail); PA	Postherpetic Neuralgia (PHN)/Neuropathic Pain Agents		
REBIF TITRATION PACK SOSY	1	QL(4.2 ml per 30 day(s) retail; 4 ml per 30 days mail); PA	<i>gabapentin (once-daily) TABS 300 MG</i>	1	QL(1 ea daily); PA
			<i>gabapentin (once-daily) TABS 600 MG</i>	1	QL(2 ea daily); PA
			GRALISE TABS 300 MG, 450 MG	1	QL(1 ea daily); PA
			GRALISE TABS (<i>gabapentin (once-daily)</i>)	1	QL(1 ea daily); PA
			GRALISE TABS 600 MG, 750 MG, 900 MG	1	QL(2 ea daily); PA
			GRALISE TABS (<i>gabapentin (once-daily)</i>)	1	QL(2 ea daily); PA

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LYRICA CR (<i>pregabalin (once-daily)</i>)	1	QL(1 ea daily); PA	NICOTINE TRANSDERMAL SYSTEM KIT	1	QL(1 ea daily); MP
<i>pregabalin (once-daily)</i>	1	QL(1 ea daily); PA	<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	1	QL(1 ea daily); MP
Premenstrual Dysphoric Disorder (PMDD) Agents			NICOTROL INHALER INHA	1	
<i>fluoxetine hcl (pmdd) TABS</i>	1	QL(45 ea per 30 day(s) retail; 45 ea per 30 days mail); PA	NICOTROL NS SOLN	1	
Pseudobulbar Affect (PBA) Agents			<i>varenicline tartrate TABS</i>	1	QL(2 ea daily); AL(At least 17 yrs old)
NUDEXTA	1	QL(2 ea daily); AL(At least 18 yrs old); PA	<i>varenicline tartrate TBPK</i>	1	QL(53 ea per 28 day(s) retail; 53 ea per 28 days mail); AL(At least 17 yrs old)
Psychotherapeutic and Neurological Agents - Misc.			Transthyretin Amyloidosis Agents		
<i>ergoloid mesylates TABS</i>	1		AMVUTTRA	1	QL(0.5 ml per 90 day(s) retail); PA
MIPLYFFA CAPS OR 47 MG, 62 MG, 93 MG, 124 MG	1	AL(At least 2 yrs old); PA	ONPATTRO	1	
<i>pimozide</i>	1		TEGSEDI	1	QL(6 ml per 28 day(s) retail; 6 ml per 28 days mail); PA
Restless Leg Syndrome (RLS) Agents			WAINUA	1	PA
HORIZANT	1	QL(1 ea daily); PA	Vasomotor Symptom Agents		
Smoking Deterrents			<i>paroxetine mesylate (vasomotor)</i>	1	QL(1 ea daily); PA
<i>bupropion hcl (smoking deterrent)</i>	1	QL(100 ea per 50 day(s) retail; 200 ea per 100 days mail)	RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions		
NICODERM CQ PT24 TD (<i>nicotine</i>)	9	QL(1 ea daily); MP	Alpha-Proteinase Inhibitor (Human)		
NICORETTE MINI LOZG (<i>nicotine polacrilex</i>)	9		ARALAST NP SOLR 500 MG, 1000 MG	1	AL(At least 18 yrs old); PA
NICORETTE STARTER KIT GUM (<i>nicotine polacrilex</i>)	9		GLASSIA SOLN	1	AL(At least 18 yrs old); PA
NICORETTE GUM (<i>nicotine polacrilex</i>)	9		PROLASTIN-C SOLN	1	PA
NICORETTE LOZG (<i>nicotine polacrilex</i>)	9		ZEMAIRA SOLR	1	AL(At least 18 yrs old); PA
<i>nicotine polacrilex GUM</i>	1		Cystic Fibrosis Agents		
<i>nicotine polacrilex LOZG</i>	1				

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BRONCHITOL	1	AL(At least 18 yrs old); PA	SYMDEKO 150 MG-100 MG	1	QL(56 ea per 28 day(s) retail; 56 ea per 28 days mail); AL(At least 6 yrs old); PA
BRONCHITOL TOLERANCE TEST	1	AL(At least 18 yrs old); PA	SYMDEKO 75 MG-50 MG	1	QL(56 ea per 28 day(s) retail; 56 ea per 28 days mail); AL(At least 6 yrs old - Up to 11 yrs old); PA
KALYDECO PACK 5.8 MG, 13.4 MG	1	QL(56 ea per 28 day(s) retail; 56 ea per 28 days mail); AL(Up to 1 yrs old); PA	TRIKAFTA TBPK 100 MG-50 MG	1	QL(84 ea per 28 day(s) retail; 84 ea per 28 days mail); AL(At least 6 yrs old); PA
KALYDECO PACK 25 MG, 50 MG, 75 MG	1	QL(56 ea per 28 day(s) retail; 56 ea per 28 days mail); AL(Up to 5 yrs old); PA	TRIKAFTA TBPK 50 MG-25 MG	1	QL(84 ea per 28 day(s) retail; 84 ea per 28 days mail); AL(At least 2 yrs old - Up to 11 yrs old); PA
KALYDECO TABS	1	QL(56 ea per 28 day(s) retail; 56 ea per 28 days mail); AL(At least 2 yrs old); PA	TRIKAFTA THPK	1	QL(56 ea per 28 day(s) retail; 56 ea per 28 days mail); AL(At least 2 yrs old - Up to 5 yrs old); PA
ORKAMBI PACK 125 MG-100 MG, 188 MG-150 MG	1	QL(56 ea per 28 day(s) retail; 56 ea per 28 days mail); AL(At least 1 yrs old - Up to 6 yrs old); PA	Pulmonary Fibrosis Agents		
ORKAMBI PACK 94 MG-75 MG	1	QL(56 ea per 28 day(s) retail; 56 ea per 28 days mail); AL(At least 1 yrs old - Up to 2 yrs old); PA	ESBRIET CAPS (<i>pirfenidone</i>)	1	QL(270 ea per 30 day(s) retail; 270 ea per 30 days mail); AL(At least 18 yrs old); PA
ORKAMBI TABS	1	QL(112 ea per 28 day(s) retail; 112 ea per 28 days mail); AL(At least 6 yrs old); PA	ESBRIET TABS 267 MG (<i>pirfenidone</i>)	1	QL(9 ea daily); AL(At least 18 yrs old); PA
PULMOZYME	1	QL(150 ml per 30 day(s) retail; 150 ml per 30 days mail); PA	ESBRIET TABS 801 MG (<i>pirfenidone</i>)	1	QL(3 ea daily); AL(At least 18 yrs old); PA
			OFEV	1	QL(2 ea daily); AL(At least 18 yrs old); PA

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<i>pirfenidone CAPS</i>	1	QL(270 ea per 30 day(s) retail; 270 ea per 30 days mail); AL(At least 18 yrs old); PA	DORYX TBEC 80 MG (<i>doxycycline hyclate</i>)	1	PA
<i>pirfenidone TABS 267 MG</i>	1	QL(9 ea daily); AL(At least 18 yrs old); PA	DORYX TBEC 50 MG, 200 MG (<i>doxycycline hyclate</i>)	9	
<i>pirfenidone TABS 534 MG, 801 MG</i>	1	QL(3 ea daily); AL(At least 18 yrs old); PA	<i>doxycycline (monohydrate) CAPS 50 MG, 100 MG</i>	1	
Respiratory Agents - Misc.			<i>doxycycline (monohydrate) CAPS 75 MG, 150 MG</i>	1	PA
CUROSURF TR 120 MG/1.5ML, 240 MG/3ML	1		<i>doxycycline (monohydrate) SUSR</i>	1	
SULFONAMIDES - Drugs to Treat Bacterial Infections			<i>doxycycline (monohydrate) TABS 50 MG, 75 MG, 100 MG</i>	1	
Sulfonamides			<i>doxycycline (monohydrate) TABS 150 MG</i>	1	PA
<i>sulfadiazine TABS</i>	1		<i>doxycycline hyclate CAPS</i>	1	
TETRACYCLINES - Drugs to Treat Bacterial Infections			<i>doxycycline hyclate SOLR</i>	1	
Aminomethylcyclines			<i>doxycycline hyclate TABS 20 MG, 100 MG</i>	1	
NUZYRA SOLR	1	AL(At least 18 yrs old); PA	<i>doxycycline hyclate TABS 50 MG, 75 MG, 150 MG</i>	1	PA
NUZYRA TABS	1	AL(At least 18 yrs old); PA	<i>doxycycline hyclate TBEC</i>	1	PA
Fluorocyclines			MINOCIN SOLR	1	
XERAVA	1		<i>minocycline hcl CAPS</i>	1	
Glycylcyclines			<i>minocycline hcl TABS</i>	1	QL(2 ea daily); PA
<i>tigecycline</i>	1		<i>minocycline hcl TB24</i>	1	PA
TIGECYCLINE	1		MINOLIRA TB24	1	AL(At least 12 yrs old); PA
TYGACIL (<i>tigecycline</i>)	1		SOLODYN TB24 115 MG (<i>minocycline hcl</i>)	9	
TYGACIL (<i>tigecycline</i>)	9		SOLODYN TB24 55 MG, 65 MG, 80 MG, 105 MG (<i>minocycline hcl</i>)	1	PA
Tetracyclines			<i>tetracycline hcl CAPS</i>	1	PA
ACTICLATE TABS (<i>doxycycline hyclate</i>)	9		TETRACYCLINE HYDROCHLORIDE TABS	1	PA
<i>demeclocycline hcl TABS</i>	1		TETRACYCLINE HYDROCHLORID TABS	1	PA
DORYX MPC TBEC 60 MG	1	PA			

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VIBRAMYCIN CAPS (doxycycline hyclate)	1	
VIBRAMYCIN SUSR (doxycycline monohydrate)	9	
THYROID AGENTS - Drugs to Regulate Thyroid Hormones		
Antithyroid Agents		
METHIMAZOLE POWD	1	
<i>methimazole TABS</i>	1	
<i>propylthiouracil</i>	1	
Thyroid Hormones		
ADTHYZA TABS	1	MP
ARMOUR THYROID TABS	1	MP
CYTOMEL TABS (liothyronine sodium)	1	MP
ERMEZA SOLN OR	1	PA
<i>levothyroxine sodium CAPS</i>	1	Brand Required; PA
LEVOTHYROXINE SODIUM SOLN IV	1	
LEVOTHYROXINE SODIUM SOLN IV	1	
<i>levothyroxine sodium SOLR IV</i>	1	
LEVOTHYROXINE SODIUM SOLR IV (levothyroxine sodium)	1	
<i>levothyroxine sodium TABS</i>	1	MP
<i>liothyronine sodium SOLN</i>	1	
<i>liothyronine sodium TABS</i>	1	MP
NIVA THYROID TABS	1	MP
SYNTHROID TABS (levothyroxine sodium)	1	MP
THYQUIDITY SOLN OR	1	QL(300 ml per 30 day(s) retail; 300 ml per 30 days mail); PA

Drug Name	Drug Tier	Requirements/Limits
TIROSINT CAPS (levothyroxine sodium)	9	
TRIOSTAT SOLN (liothyronine sodium)	9	
TOXOIDS		
Toxoid Combinations		
ADACEL SUSP	1	AL(At least 19 yrs old)
BOOSTRIX SUSP	1	AL(At least 19 yrs old)
BOOSTRIX SUSY	1	AL(At least 19 yrs old)
DAPTACEL	1	AL(At least 19 yrs old)
INFANRIX	1	AL(At least 19 yrs old)
KINRIX SUSY	1	AL(At least 19 yrs old)
PEDIARIX SUSY	1	AL(At least 19 yrs old)
QUADRACEL SUSP	1	AL(At least 19 yrs old)
QUADRACEL SUSY	1	AL(At least 19 yrs old)
TDVAX SUSP	1	AL(At least 19 yrs old)
TENIVAC INJ	1	AL(At least 19 yrs old)
TETANUS/DIPHTHERIA TOXOIDS-ADSORBED ADULT SUSP	1	AL(At least 19 yrs old)
VAXELIS SUSP	1	AL(Up to 4 yrs old)
VAXELIS SUSY	1	AL(Up to 4 yrs old)
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions		
Antispasmodics		
ANASPAZ TBDP (hyoscyamine sulfate)	9	
<i>atropine sulfate SOLN IV 0.4 MG/ML, 1 MG/ML</i>	1	

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ATROPINE SULFATE SOLN IV 0.4 MG/ML, 1 MG/ML (<i>atropine sulfate</i>)	1		<i>hyoscyamine sulfate TB12 0.375 MG</i>	1	
ATROPINE SULFATE SOLN IV 0.4 MG/ML, 1 MG/ML (<i>atropine sulfate</i>)	9		<i>hyoscyamine sulfate TBDP 0.125 MG</i>	1	
<i>atropine sulfate SOSY IJ 0.5 MG/5ML, 1 MG/10ML</i>	1		LEVBID TB12 (<i>hyoscyamine sulfate</i>)	9	
ATROPINE SULFATE SOSY IJ 0.25 MG/5ML, 0.5 MG/5ML, 1 MG/10ML	1		LEVSIN/SL SUBL (<i>hyoscyamine sulfate</i>)	1	
ATROPINE SULFATE SOSY IJ (<i>atropine sulfate</i>)	9		LEVSIN TABS (<i>hyoscyamine sulfate</i>)	1	
ATROPINE SULFATE SOSY IJ (<i>atropine sulfate</i>)	1		<i>methscopolamine bromide</i>	1	
BELLADONNA/OPIUM	1		ROBINUL FORTE TABS (<i>glycopyrrolate</i>)	1	
BENTYL SOLN IM (<i>dicyclomine hcl</i>)	1		ROBINUL TABS (<i>glycopyrrolate</i>)	1	
CUVPOSA SOLN OR (<i>glycopyrrolate</i>)	1		H-2 Antagonists		
DARTISLA ODT TBDP	1	QL(3 ea daily); AL(At least 18 yrs old); PA	<i>cimetidine hcl OR 300 MG/5ML</i>	1	QL(15 ml daily); MP
<i>dicyclomine hcl CAPS</i>	1		<i>cimetidine TABS 200 MG, 300 MG, 400 MG</i>	1	QL(2 ea daily); PA; RX/OTC
<i>dicyclomine hcl SOLN IM</i>	1		<i>cimetidine TABS 800 MG</i>	1	QL(1 ea daily); MP; PA
<i>dicyclomine hcl TABS</i>	1		<i>famotidine in nacl SOLN</i>	1	
GLYCATE TABS	1	AL(At least 12 yrs old); PA	<i>famotidine SOLN 20 MG/2ML, 40 MG/4ML, 200 MG/20ML</i>	1	
<i>glycopyrrolate SOLN IJ</i>	1		<i>famotidine SUSR</i>	1	AL(Up to 6 yrs old); MP
<i>glycopyrrolate SOSY IJ</i>	1		<i>famotidine TABS 20 MG</i>	1	QL(4 ea daily); MP; RX/OTC
GLYCOPYRROLATE SOSY IJ 0.6 MG/3ML	1		<i>famotidine TABS 40 MG</i>	1	QL(2 ea daily); MP
<i>glycopyrrolate TABS 1 MG, 2 MG</i>	1		<i>nizatidine CAPS 300 MG</i>	1	QL(1 ea daily); PA
GLYRX-PF SOLN IJ	1		<i>nizatidine CAPS 150 MG</i>	1	QL(3 ea daily); MP; PA
GLYRX-PF SOSY IJ 1 MG/5ML	1		PEPCID AC MAXIMUM STRENGTH TABS (<i>famotidine</i>)	9	QL(4 ea daily); MP; RX/OTC
<i>hyoscyamine sulfate ELIX</i>	1	AL(Up to 20 yrs old); PA	PEPCID AC TABS 20 MG (<i>famotidine</i>)	9	QL(4 ea daily); MP; RX/OTC
<i>hyoscyamine sulfate SUBL 0.125 MG</i>	1		PEPCID TABS 40 MG (<i>famotidine</i>)	1	QL(2 ea daily); MP
<i>hyoscyamine sulfate TABS 0.125 MG</i>	1				

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PEPCID TABS 20 MG (<i>famotidine</i>)	1	QL(4 ea daily); MP; RX/OTC	NEXIUM 24HR CPDR (<i>esomeprazole magnesium</i>)	9	QL(2 ea daily); MP; RX/OTC
TAGAMET HB 200 TABS (<i>cimetidine</i>)	9	QL(2 ea daily); RX/OTC	NEXIUM I.V. 40 MG (<i>esomeprazole sodium</i>)	1	ST; PA
TAGAMET HB TABS (<i>cimetidine</i>)	9	QL(2 ea daily); RX/OTC	NEXIUM CPDR (<i>esomeprazole magnesium</i>)	1	QL(2 ea daily); MP; RX/OTC
Misc. Anti-Ulcer			NEXIUM PACK (<i>esomeprazole magnesium</i>)	1	Brand Required; QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail)
CARAFATE SUSP (<i>sucralfate</i>)	1		NEXIUM PACK	1	Brand Required; QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail)
CARAFATE TABS (<i>sucralfate</i>)	1		NEXIUM PACK	1	Brand Required; QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail)
SUCRALFATE POWD	1		<i>omeprazole CPDR 20 MG</i>	1	QL(4 ea daily); MP
<i>sucralfate SUSP</i>	1		<i>omeprazole CPDR 40 MG</i>	1	QL(2 ea daily); MP
<i>sucralfate TABS</i>	1		<i>omeprazole CPDR 10 MG</i>	1	QL(3 ea daily); MP
Proton Pump Inhibitors			PANTOPRAZOLE SODIUM/SODIUM CHLORIDE	3	
ACIPHEX TBEC (<i>rabeprazole sodium</i>)	1	QL(2 ea daily); MP	<i>pantoprazole sodium PACK</i>	3	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); ST
ACIPHEX TBEC (<i>rabeprazole sodium</i>)	9	QL(2 ea daily); MP	<i>pantoprazole sodium SOLR</i>	2	QL(10 ea per 10 day(s) retail; 10 ea per 10 days mail); ST
DEXILANT (<i>dexlansoprazole</i>)	1	QL(1 ea daily)	<i>pantoprazole sodium TBEC</i>	1	QL(4 ea daily); MP
<i>dexlansoprazole</i>	1	QL(1 ea daily)	PREVACID 24HR CPDR (<i>lansoprazole</i>)	9	QL(2 ea daily); MP; RX/OTC
<i>esomeprazole magnesium CPDR</i>	1	QL(2 ea daily); MP; RX/OTC	PREVACID SOLUTAB TBDD 15 MG (<i>lansoprazole</i>)	9	Brand Required; QL(1 ea daily); RX/OTC
<i>esomeprazole magnesium PACK</i>	1	Brand Required; QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); PA			
<i>esomeprazole sodium 40 MG</i>	1	ST; PA			
<i>lansoprazole CPDR</i>	1	QL(2 ea daily); MP			
<i>lansoprazole TBDD</i>	1	Brand Required; QL(1 ea daily); PA; RX/OTC			
NEXIUM 24HR CLEAR MINIS CPDR (<i>esomeprazole magnesium</i>)	9	QL(2 ea daily); MP; RX/OTC			

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PREVACID SOLUTAB TBDD (<i>lansoprazole</i>)	1	Brand Required; QL(1 ea daily); RX/OTC	<i>omeprazole-sodium bicarbonate CAPS</i>	1	QL(1 ea daily); PA; RX/OTC
PREVACID CPDR 30 MG (<i>lansoprazole</i>)	1	QL(2 ea daily); MP	<i>omeprazole-sodium bicarbonate PACK</i>	1	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); PA
PRILOSEC PACK	3	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); ST; PA	PYLERA (<i>bismuth subcitrate potassium-metronidazole-tetracycline</i>)	1	PA
PROTONIX PACK (<i>pantoprazole sodium</i>)	3	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); ST	TALICIA	1	QL(168 ea per 14 day(s) retail; 168 ea per 14 days mail); PA
PROTONIX PACK (<i>pantoprazole sodium</i>)	9	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); ST	VOQUEZNA DUAL PAK	1	QL(112 ea per 14 day(s) retail; 112 ea per 14 days mail); AL(At least 18 yrs old); PA
PROTONIX SOLR (<i>pantoprazole sodium</i>)	9	QL(10 ea per 10 day(s) retail; 10 ea per 10 days mail); ST	VOQUEZNA TRIPLE PAK	1	QL(112 ea per 14 day(s) retail; 112 ea per 14 days mail); AL(At least 18 yrs old); PA
PROTONIX SOLR (<i>pantoprazole sodium</i>)	2	QL(10 ea per 10 day(s) retail; 10 ea per 10 days mail); ST	ZEGERID CAPS (<i>omeprazole-sodium bicarbonate</i>)	1	QL(1 ea daily); PA
PROTONIX TBEC (<i>pantoprazole sodium</i>)	1	QL(4 ea daily); MP	ZEGERID PACK 1680 MG-40 MG (<i>omeprazole-sodium bicarbonate</i>)	9	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail)
<i>rabeprazole sodium TBEC</i>	1	QL(2 ea daily); MP	ZEGERID PACK (<i>omeprazole-sodium bicarbonate</i>)	1	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail); PA
VOQUEZNA	1	AL(At least 18 yrs old); PA	URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms		
Ulcer Drugs - Prostaglandins			Urinary Antispasmodic - Antimuscarinics (Anticholinergic)		
CYTOTEC (<i>misoprostol</i>)	1		<i>darifenacin hydrobromide</i>	1	QL(1 ea daily); ST; PA
<i>misoprostol</i>	1		DETROL LA CP24 (<i>tolterodine tartrate</i>)	9	QL(1 ea daily); ST
Ulcer Therapy Combinations					
<i>amoxicillin-clarithromycin w/ lansoprazole THPK</i>	1	QL(112 ea per 14 day(s) retail; 112 ea per 14 days mail); PA			
<i>bismuth subcitrate potassium-metronidazole-tetracycline</i>	1	PA			
KONVOMEPEP SUSR	1	AL(At least 18 yrs old); PA			

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DETROL LA CP24 (tolterodine tartrate)	1	QL(1 ea daily); ST; PA	TOVIAZ 4 MG (fesoterodine fumarate)	1	Brand Required; QL(2 ea daily); MP
DETROL TABS (tolterodine tartrate)	1	ST; PA	trospium chloride CP24	1	ST; PA
DITROPAN XL TB24 10 MG (oxybutynin chloride)	9	QL(3 ea daily); MP	trospium chloride TABS	1	QL(2 ea daily); MP
DITROPAN XL TB24 5 MG (oxybutynin chloride)	9	QL(6 ea daily); MP	VESICARE LS SUSP	1	QL(300 ml per 30 day(s) retail; 300 ml per 30 days mail); AL(At least 2 yrs old - Up to 10 yrs old)
fesoterodine fumarate 4 MG	1	Brand Required; QL(2 ea daily); MP; PA	VESICARE TABS 10 MG (solifenacin succinate)	1	QL(1 ea daily); MP
fesoterodine fumarate 8 MG	1	Brand Required; QL(1 ea daily); MP; PA	VESICARE TABS 5 MG (solifenacin succinate)	1	QL(2 ea daily); MP
GELNIQUE GEL 10 % oxybutynin chloride SOLN	1	ST	Urinary Antispasmodics - Beta-3 Adrenergic Agonists		
oxybutynin chloride TABS 5 MG	1	QL(4 ea daily); MP	GEMTESA	1	QL(1 ea daily); PA
oxybutynin chloride TABS 2.5 MG	1	QL(4 ea daily); PA	mirabegron TB24	1	QL(1 ea daily); ST; PA
oxybutynin chloride TB24 5 MG	1	QL(6 ea daily); MP	MYRBETRIQ SRER	1	QL(300 ml per 30 day(s) retail; 300 ml per 30 days mail); AL(At least 3 yrs old - Up to 10 yrs old); ST; PA
oxybutynin chloride TB24 10 MG	1	QL(3 ea daily); MP	MYRBETRIQ TB24 (mirabegron)	1	QL(1 ea daily); ST; PA
oxybutynin chloride TB24 15 MG	1	QL(2 ea daily); MP	Urinary Antispasmodics - Cholinergic Agonists		
OXYTROL PTTW	1	QL(8 ea per 30 day(s) retail; 8 ea per 30 days mail); PA; RX/OTC	bethanechol chloride 10 MG, 50 MG	1	QL(4 ea daily)
solifenacin succinate TABS 10 MG	1	QL(1 ea daily); MP	bethanechol chloride 5 MG	1	
solifenacin succinate TABS 5 MG	1	QL(2 ea daily); MP	bethanechol chloride 25 MG	1	QL(8 ea daily)
tolterodine tartrate CP24	1	QL(1 ea daily); ST; PA	Urinary Antispasmodics - Direct Muscle Relaxants		
tolterodine tartrate TABS	1	ST; PA	flavoxate hcl	1	
TOVIAZ 8 MG (fesoterodine fumarate)	1	Brand Required; QL(1 ea daily); MP	VACCINES		

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Bacterial Vaccines			VAXCHORA	1	AL(At least 19 yrs old)
ACTHIB SOLR IM	1	AL(At least 19 yrs old)	VAXNEUVANCE	1	AL(At least 19 yrs old)
BCG VACCINE	1	AL(At least 19 yrs old)	VIVOTIF	1	AL(At least 19 yrs old)
BEXSERO	1	AL(At least 19 yrs old)	Viral Vaccines		
BIOTHRAX	1	AL(At least 19 yrs old)	ABRYSVO	1	AL(At least 19 yrs old)
CAPVAXIVE	1	AL(At least 19 yrs old)	ABRYSVO	1	AL(At least 19 yrs old)
HIBERIX SOLR IJ	1	AL(At least 19 yrs old)	ABRYSVO	1	AL(At least 10 yrs old - Up to 18 yrs old)
MENACTRA	1	AL(At least 19 yrs old)	AFLURIA 2024-2025 SUSP	1	AL(At least 19 yrs old)
MENQUADFI	1	AL(At least 19 yrs old)	AFLURIA 2024-2025 SUSP	1	AL(Up to 18 yrs old)
MENQUADFI	1	AL(At least 19 yrs old)	AFLURIA 2024-2025 SUSY	1	AL(At least 3 yrs old - Up to 18 yrs old)
MENVEO SOLN	1	AL(At least 19 yrs old)	AFLURIA 2024-2025 SUSY	1	AL(At least 19 yrs old)
MENVEO SOLR	1	AL(At least 19 yrs old)	AFLURIA QUADRIVALENT 2022-2023 SUSP	1	AL(At least 19 yrs old)
PEDVAX HIB SUSP	1	AL(At least 19 yrs old)	AFLURIA QUADRIVALENT 2022-2023 SUSY	1	AL(At least 19 yrs old)
PENBRAYA	1	AL(At least 19 yrs old)	AFLURIA QUADRIVALENT 2023-2024 SUSP	1	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
PNEUMOVAX 23 IJ 25 MCG/0.5ML	1	AL(At least 2 yrs old - Up to 18 yrs old)	AFLURIA QUADRIVALENT 2023-2024 SUSY	1	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
PNEUMOVAX 23 IJ 25 MCG/0.5ML	1	AL(At least 19 yrs old)	AREXVY	1	AL(At least 19 yrs old)
PNEUMOVAX 23/1 DOSE IJ 25 MCG/0.5ML	1	AL(At least 2 yrs old - Up to 18 yrs old)	COMIRNATY 2023-24 SUSP	1	AL(At least 19 yrs old)
PNEUMOVAX 23/1 DOSE IJ 25 MCG/0.5ML	1	AL(At least 19 yrs old)	COMIRNATY 2023-24 SUSY	1	AL(At least 19 yrs old)
PREVNAR 13	1	AL(At least 19 yrs old)			
PREVNAR 20	1	AL(At least 19 yrs old)			
TRUMENBA	1	AL(At least 19 yrs old)			
TYPHIM VI SOLN	1	AL(At least 19 yrs old)			
TYPHIM VI SOSY	1	AL(At least 19 yrs old)			

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COMIRNATY 2024-25 SUSY	1	AL(At least 12 yrs old - Up to 18 yrs old)	FLUBLOK QUADRIVALENT 2023-2024	1	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
COMIRNATY 2024-25 SUSY	1	AL(At least 12 yrs old)	FLUCELVAX 2024-2025 SUSP	1	AL(At least 19 yrs old)
COMIRNATY SUSP	1	AL(At least 19 yrs old)	FLUCELVAX 2024-2025 SUSP	1	AL(Up to 18 yrs old)
DENGVAXIA	1	AL(At least 19 yrs old)	FLUCELVAX 2024-2025 SUSY	1	AL(Up to 18 yrs old)
ENGERIX-B SUSP 20 MCG/ML	1	AL(At least 19 yrs old)	FLUCELVAX 2024-2025 SUSY	1	AL(At least 19 yrs old)
ENGERIX-B SUSY	1	AL(At least 19 yrs old)	FLUCELVAX QUADRIVALENT 2022-2023 SUSP	1	AL(At least 19 yrs old)
FLUAD 2024-2025	1	AL(At least 65 yrs old)	FLUCELVAX QUADRIVALENT 2022-2023 SUSY	1	AL(At least 19 yrs old)
FLUAD QUADRIVALENT 2022-2023	1	AL(At least 19 yrs old)	FLUCELVAX QUADRIVALENT 2023-2024 SUSP	1	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
FLUAD QUADRIVALENT 2023-2024	1	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)	FLUCELVAX QUADRIVALENT 2023-2024 SUSY	1	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
FLUAD QUADRIVALENT 2023-2024	1	AL(At least 19 yrs old)	FLUCELVAX QUADRIVALENT 2023-2024 SUSY	1	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
FLUARIX 2024-2025 SUSY	1	AL(At least 19 yrs old)	FLULAVAL 2024-2025 SUSY	1	AL(Up to 18 yrs old)
FLUARIX 2024-2025 SUSY	1	AL(Up to 18 yrs old)	FLULAVAL 2024-2025 SUSY	1	AL(At least 19 yrs old)
FLUARIX QUADRIVALENT 2022-2023 SUSY	1	AL(At least 19 yrs old)	FLULAVAL QUADRIVALENT 2022-2023 SUSY	1	AL(At least 19 yrs old)
FLUARIX QUADRIVALENT 2023-2024 SUSY	1	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)	FLULAVAL QUADRIVALENT 2023-2024 SUSY	1	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)
FLUBLOK 2024-2025 SOSY	1	AL(At least 18 yrs old - Up to 18 yrs old)	FLUMIST NASAL VACCINE 2024-2025	1	AL(At least 19 yrs old - Up to 49 yrs old)
FLUBLOK 2024-2025 SOSY	1	AL(At least 19 yrs old)	FLUMIST NASAL VACCINE 2024-2025	1	AL(At least 2 yrs old - Up to 18 yrs old)
FLUBLOK QUADRIVALENT 2022-2023	1	AL(At least 19 yrs old)			

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FLUMIST QUADRIVALENT	1	AL(At least 19 yrs old)	GARDASIL 9 SUSP	1	3 max fill(s) per 999 day(s) retail; AL(At least 19 yrs old - Up to 45 yrs old)
FLUMIST QUADRIVALENT	1	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)	GARDASIL 9 SUSY	1	3 max fill(s) per 999 day(s) retail; AL(At least 19 yrs old - Up to 45 yrs old)
FLUZONE 2024-2025 SUSP	1	AL(Up to 18 yrs old)	HAVRIX	1	AL(At least 19 yrs old)
FLUZONE 2024-2025 SUSP	1	AL(At least 19 yrs old)	HEPLISAV-B SOSY	1	AL(At least 19 yrs old)
FLUZONE 2024-2025 SUSY	1	AL(At least 19 yrs old)	IMOVAX RABIES (H.D.C.V.) SUSR	1	AL(At least 19 yrs old)
FLUZONE 2024-2025 SUSY	1	AL(Up to 18 yrs old)	IPOL INACTIVATED IPV	1	AL(At least 19 yrs old)
FLUZONE HIGH-DOSE 2024-2025 SUSY	1	AL(At least 65 yrs old)	IXCHIQ	1	AL(At least 19 yrs old)
FLUZONE HIGH-DOSE PF 2022-2023	1	AL(At least 19 yrs old)	IXIARO	1	AL(At least 19 yrs old)
FLUZONE HIGH-DOSE PF 2023-2024	1	AL(At least 19 yrs old)	JANSSEN COVID-19 VACCINE	1	AL(At least 19 yrs old)
FLUZONE HIGH-DOSE PF 2023-2024	1	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)	JYNNEOS	1	AL(At least 19 yrs old)
FLUZONE QUADRIVALENT 2022-2023 SUSP	1	AL(At least 19 yrs old)	M-M-R II SOLR	1	AL(At least 19 yrs old)
FLUZONE QUADRIVALENT 2022-2023 SUSY	1	AL(At least 19 yrs old)	MODERNA COVID-19 VACCINE/6MO-11Y/2023-24 SUSP	1	AL(At least 19 yrs old)
FLUZONE QUADRIVALENT 2023-2024 SUSP	1	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)	MODERNA COVID-19 VACCINE/6MO-11Y/2024-25 SUSY	1	AL(Up to 11 yrs old)
FLUZONE QUADRIVALENT 2023-2024 SUSY	1	1 max fill(s) per 180 day(s) retail; AL(At least 19 yrs old)	MODERNA COVID-19 VACCINE/BIVALENT/6M O-5Y	1	AL(At least 19 yrs old)
			MODERNA COVID-19 VACCINE/BIVALENT/BA. 4/BA.5	1	AL(At least 19 yrs old)
			MODERNA COVID-19 VACCINE6MO-5Y SUSP	1	AL(At least 19 yrs old)
			MODERNA COVID-19 VACCINE SUSP	1	AL(At least 19 yrs old)

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MRESVIA	1	AL(At least 60 yrs old)	PREHEVBRIO	1	AL(At least 19 yrs old)
NOVAVAX COVID-19 VACCINE/2023-24 SUSP	1	AL(At least 19 yrs old)	PRIORIX SUSR	1	AL(At least 19 yrs old)
NOVAVAX COVID-19 VACCINE/2024-25 SUSY	1		PROQUAD SUSR	1	AL(At least 19 yrs old)
NOVAVAX COVID-19 VACCINE SUSP	1	AL(At least 19 yrs old)	RABAVERT	1	AL(At least 19 yrs old)
PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2023-24 SUSP	1	AL(At least 19 yrs old)	RECOMBIVAX HB SUSP	1	AL(At least 19 yrs old)
PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2024-25 SUSP	1	AL(At least 5 yrs old - Up to 11 yrs old)	RECOMBIVAX HB SUSY	1	AL(At least 19 yrs old)
PFIZER-BIONTECH COVID-19VACCINE/5-11Y SUSP	1	AL(At least 19 yrs old)	ROTARIX SUSP	1	AL(At least 19 yrs old)
PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2023-24 SUSP	1	AL(At least 19 yrs old)	ROTARIX SUSR	1	AL(At least 19 yrs old)
PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2024-25 SUSP	1	AL(Up to 4 yrs old)	ROTATEQ SOLN	1	AL(At least 19 yrs old)
PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y SUSP	1	AL(At least 19 yrs old)	SANOFI COVID-19 VACCINE/ANTIGEN COMPONENT	1	AL(At least 19 yrs old)
PFIZER-BIONTECH COVID-19VACCINE/ADULT RTU SUSP	1	AL(At least 19 yrs old)	SHINGRIX	1	2 max fill(s) per 999 day(s) retail; AL(At least 50 yrs old)
PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/5-11Y	1	AL(At least 19 yrs old)	SPIKEVAX COVID-19 VACCINE/2023-24 SUSP	1	AL(At least 19 yrs old)
PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/6 M-4Y	1	AL(At least 19 yrs old)	SPIKEVAX COVID-19 VACCINE/2023-24 SUSY	1	AL(At least 19 yrs old)
PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/B A.4/BA.5	1	AL(At least 19 yrs old)	SPIKEVAX COVID-19 VACCINE/2024-25 SUSY	1	AL(At least 12 yrs old)
PFIZER-BIONTECH COVID-19VACCINE SUSP	1	AL(At least 19 yrs old)	SPIKEVAX COVID-19 VACCINE SUSP	1	AL(At least 19 yrs old)
			STAMARIL SUSR	1	AL(At least 19 yrs old)
			TICOVAC	1	AL(At least 19 yrs old)
			TWINRIX SUSY	1	AL(At least 19 yrs old)
			VAQTA	1	AL(At least 19 yrs old)
			VARIVAX SUSR IJ 1350 PFU/0.5ML	1	AL(At least 1 yrs old - Up to 18 yrs old)
			VARIVAX SUSR IJ 1350 PFU/0.5ML	1	AL(At least 19 yrs old)

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YF-VAX INJ	1	AL(At least 19 yrs old)
VAGINAL AND RELATED PRODUCTS		
Spermicides		
VCF VAGINAL CONTRACEPTIVE FILM FILM	1	
Vaginal Anti-infectives		
CLEOCIN CREA (<i>clindamycin phosphate vaginal</i>)	1	
CLEOCIN SUPP <i>clindamycin phosphate vaginal CREA</i>	1	
CLINDESSE	1	
GYNAZOLE-1 <i>metronidazole vaginal</i>	1	QL(70 gm per fill retail)
<i>miconazole nitrate vaginal SUPP 200 MG</i>	1	
NUVESSA <i>terconazole vaginal CREA</i>	1	QL(5 gm per fill retail); PA
<i>terconazole vaginal SUPP</i>	1	
VANDAZOLE	1	QL(70 gm per fill retail)
XACIATO GEL	1	QL(8 gm per fill retail); PA
Vaginal Contraceptive - pH Modulators		
PHEXXI	1	PA
Vaginal Estrogens		
ESTRACE CREA (<i>estradiol vaginal</i>)	1	QL(42.5 gm per 28 day(s) retail; 42 gm per 28 days mail)
<i>estradiol vaginal CREA</i>	1	QL(42.5 gm per 28 day(s) retail; 42 gm per 28 days mail)
<i>estradiol vaginal TABS</i>	1	
ESTRING RING	1	

Drug Name	Drug Tier	Requirements/Limits
FEMRING	1	
PREMARIN	1	QL(30 gm per 28 day(s) retail; 30 gm per 28 days mail)
VAGIFEM TABS (<i>estradiol vaginal</i>)	1	
Vaginal Progestins		
CRINONE GEL 8 %	1	AL(At least 12 yrs old - Up to 55 yrs old); PA
ENDOMETRIN INST	1	AL(At least 12 yrs old - Up to 55 yrs old); PA
VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions		
Anaphylaxis Therapy Agents		
ADRENALIN SOLN IJ 1 MG/ML, 30 MG/30ML (<i>epinephrine (anaphylaxis)</i>)	1	
AUVI-Q SOAJ <i>epinephrine (anaphylaxis) SOAJ</i>	1	
<i>epinephrine (anaphylaxis) SOLN IJ 30 MG/30ML</i>	1	
EPIPEN 2-PAK SOAJ (<i>epinephrine (anaphylaxis)</i>)	1	
EPIPEN 2-PAK SOAJ (<i>epinephrine (anaphylaxis)</i>)	9	
EPIPEN-JR 2-PAK SOAJ (<i>epinephrine (anaphylaxis)</i>)	1	
Neurogenic Orthostatic Hypotension (NOH) - Agents		
<i>droxidopa 100 MG, 200 MG</i>	1	QL(3 ea daily); AL(At least 18 yrs old); PA
<i>droxidopa 300 MG</i>	1	QL(6 ea daily); AL(At least 18 yrs old); PA

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
NORTHERA 300 MG (<i>droxidopa</i>)	1	QL(6 ea daily); AL(At least 18 yrs old); PA	NOREPINEPHRINE BITARTRATE/SODIUM CHLORIDE SOLN 0.9 %- 16 MG/250ML, 0.9 %-4 MG/250ML, 0.9 %-8 MG/250ML	1	
NORTHERA 100 MG, 200 MG (<i>droxidopa</i>)	1	QL(3 ea daily); AL(At least 18 yrs old); PA	NOREPINEPHRINE/SODI UM CHLORIDE SOLN 0.9 %-16 MG/250ML, 0.9 %-4 MG/250ML, 0.9 %-8 MG/250ML	1	
Vasopressors			<i>phenylephrine hcl</i> (<i>pressors</i>) SOLN IV	1	AL(Up to 20 yrs old)
AKOVAZ SOLN IV (<i>ephedrine sulfate</i> (<i>pressors</i>))	9		PHENYLEPHRINE HYDROCHLORIDE SOLN IV (<i>phenylephrine hcl</i> (<i>pressors</i>))	9	
AKOVAZ SOLN IV (<i>ephedrine sulfate</i> (<i>pressors</i>))	1		VAZCULEP SOLN IV (<i>phenylephrine hcl</i> (<i>pressors</i>))	9	
AKOVAZ SOSY IV	1		VITAMINS		
BIORPHEN SOLN IV	1		Oil Soluble Vitamins		
EMERPHED SOLN IV	1		<i>cholecalciferol CHEW</i> 1000 UNIT	1	AL(Up to 20 yrs old); PA
EMERPHED SOSY IV	1		<i>cholecalciferol LIQD OR</i> 10 MCG/ML, 400 UNIT/ML	1	AL(Up to 20 yrs old); PA
<i>ephedrine sulfate</i> (<i>pressors</i>) SOLN IV	1		DRISDOL CAPS (<i>ergocalciferol</i>)	9	
EPHEDRINE SULFATE SOLN IV	1		D-VI-SOL LIQD OR (<i>cholecalciferol</i>)	9	
EPINEPHRINE SOLN IJ 1 MG/ML	1		<i>ergocalciferol CAPS</i>	1	
EPINEPHRINE SOSY IV 1 MG/10ML	1		<i>ergocalciferol SOLN OR</i> 8000 UNIT/ML	1	AL(Up to 20 yrs old); PA
IMMPHENTIV SOLN IV	1		MEPHYTON TABS (<i>phytonadione</i>)	9	
LEVOPHED IV (<i>norepinephrine bitartrate</i>)	1		<i>phytonadione SOLN 10</i> MG/ML	1	
LEVOPHED IV (<i>norepinephrine bitartrate</i>)	9		<i>phytonadione SOLN 1</i> MG/0.5ML	1	QL(0.5 ml per fill retail)
<i>midodrine hcl</i>	1		<i>phytonadione TABS 5 MG</i>	1	
<i>norepinephrine bitartrate</i> IV	1		VITAMIN D3 LIQD OR 5000 UNIT/ML	1	AL(Up to 20 yrs old); PA
NOREPINEPHRINE BITARTRATE/DEXTROS E SOLN 5 %-16 MG/250ML, 5 %-4 MG/250ML, 5 %-8 MG/250ML	1				

1 = Preferred, 2 = Nonpreferred, must step through Tier 1 or PA override, 3 = Nonpreferred, must step through Tier 2 or PA override, 4 = Special PA Criteria, 9 = Non-Formulary, X= Excluded
PDL formulary drugs requiring prior authorization review without documented clinical drug criteria must be used for an FDA approved indication.

Drug Name	Drug Tier	Requirements/ Limits
<i>vitamin e SOLN 15 MG/0.67ML</i>	1	AL(Up to 20 yrs old); PA
Water Soluble Vitamins		
THIAMINE HCL POWD	1	AL(Up to 2 yrs old); PA; RX/OTC

1 = Preferred, 2 = Nonpreferred, must step through Tier 1 or PA override, 3 = Nonpreferred, must step through Tier 2 or PA override, 4 = Special PA Criteria, 9 = Non-Formulary, X= Excluded
PDL formulary drugs requiring prior authorization review without documented clinical drug criteria must be used for an FDA approved indication.

INDEX

1ST TIER UNIFINE PENTIPS/MINI/31GX5MM	161	ABELCET	53	ACCOLATE (zafirlukast)	26
1ST TIER UNIFINE PENTIPS29GX12MM	162	ABILIFY ASIMTUFII PRSY 720 MG/2.4ML	82	ACCRUFER	136
1ST TIER UNIFINE PENTIPS31GX6MM	162	ABILIFY ASIMTUFII PRSY 960 MG/3.2ML	82	ACCU-CHEK FASTCLIX LANCETDEVICE KIT KIT	142
1ST TIER UNIFINE PENTIPS31GX8MM	162	ABILIFY MAINTENA PRSY	82	ACCU-CHEK FASTCLIX LANCETS	142
1ST TIER UNIFINE PENTIPS31GX8MM	162	ABILIFY MAINTENA SRER	82	ACCU-CHEK GUIDE STRP	113
1ST TIER UNIFINE PENTIPS32GX4MM	162	ABILIFY MYCITE MAINTENANCE KIT	82	ACCU-CHEK GUIDE TEST STRIPS STRP	113
1ST TIER UNIFINE PENTIPS32GX6MM	162	ABILIFY MYCITE STARTER KIT	82	ACCU-CHEK MULTICLIX LANCET DEVICE KIT KIT	142
1ST TIER UNIFINE PENTIPS33GX4MM	162	ABILIFY TABS (aripiprazole)	82	ACCU-CHEK SAFE-T-PRO LANCETS	142
1ST TIER UNIFINE PENTIPSPLUS 31GX8MM	162	abiraterone acetate 250 MG	69	ACCU-CHEK SAFE-T-PRO PLUSLANCETS	142
1ST TIER UNIFINE PENTIPSPLUS 32GX4MM	162	abiraterone acetate 500 MG	70	ACCU-CHEK SOFTCLIX LANCETDEVICE KIT KIT	142
1ST TIER UNIFINE PENTIPSPLUS 33GX4MM	162	ABLYSINOL	94	ACCU-CHEK SOFTCLIX LANCETS	142
1ST TIER UNIFINE PENTIPSPLUS/MINI/31GX5MM	162	ABOUTTIME PEN NEEDLE 32GX 5/32"	162	ACCU-CHEK SOFTCLIX LANCETS	142
1ST TIER UNIFINE PENTIPSPLUS/ORIGINAL/29GX12 MM	162	ABOUTTIME PEN NEEDLES 30GX 5/16"	162	ACCUPRIL (quinapril hcl)	58
1ST TIER UNIFINE PENTIPSPLUS/ULTRA SHORT/31GX6MM	162	ABOUTTIME PEN NEEDLES 31G X 3/16"	162	ACCURETIC (quinapril- hydrochlorothiazide)	60
1ST TIER UNILET COMFORTOUCH LANCETS 28G	142	ABOUTTIME PEN NEEDLES 31G X 5/16"	162	ACE AEROSOL CLOUD ENHANCER MISC	213
1ST TIER UNILET COMFORTOUCH LANCETS 30G	142	ABRAXANE	76	acebutolol hcl CAPS 200 MG	88
abacavir sulfate SOLN	83	ABRILADA 1-PEN KIT AJKT	7	acebutolol hcl CAPS 400 MG	88
abacavir sulfate TABS	83	ABRILADA 2-PEN KIT AJKT	7	ACETADOTE SOLN (acetylcysteine (antidote))	51
abacavir sulfate-lamivudine	83	ABRILADA PSKT	7	acetaminophen SOLN IV 10 MG/ML, 1000 MG/100ML	13
ABECMA	69	ABRYSVO	260	acetaminophen SOLN OR 160 MG/5ML	13
		ABSORICA (isotretinoin)	101	acetaminophen SUSP 80 MG/2.5ML	13
		ABSORICA LD	101	acetaminophen w/ codeine SOLN	17
		acamprosate calcium	248		
		acarbose 25 MG, 100 MG	42		
		acarbose 50 MG	42		

acetaminophen w/ codeine TABS 15 MG-300 MG, 30 MG-300 MG, 60 MG-300 MG	17	ACTIMMUNE 100 MCG/0.5ML	76	ADALIMUMAB-AACF (2 PEN) AJKT .	7
acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG ...	17	ACTIQ LPOP (fentanyl citrate)	14	ADALIMUMAB-AACF (2 SYRINGE) PSKT	7
acetazolamide CP12	117	ACTIQ LPOP 400 MCG (fentanyl citrate)	14	ADALIMUMAB-AACF STARTER PACK/CD/UC/HS (6 PEN) AJKT ...	7
acetazolamide sodium	117	ACTIVASE IV	133	ADALIMUMAB-AACF STARTER PACK/PSORIASIS/UEVITIS (4 PEN) AJKT	7
acetazolamide TABS	117	ACTIVELLA TABS 1 MG-0.5 MG (estradiol & norethindrone acetate) 123		ADALIMUMAB-AATY 1-PEN KIT AJKT 40 MG/0.4ML	7
acetic acid (otic)	244	ACTONEL TABS 150 MG (risedronate sodium)	118	ADALIMUMAB-AATY 1-PEN KIT AJKT 80 MG/0.8ML	7
acetic acid 0.25 %	129	ACTONEL TABS 35 MG (risedronate sodium)	118	ADALIMUMAB-AATY 2-PEN KIT AJKT	7
acetylcysteine (antidote) SOLN ...	51	ACTOPLUS MET TABS 850 MG-15 MG (pioglitazone hcl-metformin hcl) 42		ADALIMUMAB-AATY 2-SYRINGE KIT PSKT 20 MG/0.2ML	7
ACETYLCYSTEINE POWD	101	ACTOS 15 MG (pioglitazone hcl) ..	49	ADALIMUMAB-AATY 2-SYRINGE KIT PSKT 40 MG/0.4ML	7
acetylcysteine SOLN	101	ACTOS 30 MG, 45 MG (pioglitazone hcl)	49	ADALIMUMAB-ADAZ SOAJ	7
ACIPHEX TBEC (rabeprazole sodium)	257	ACULAR (ketorolac tromethamine (ophth))	242	ADALIMUMAB-ADAZ SOSY	7
acitretin	104	ACULAR LS (ketorolac tromethamine (ophth))	242	ADALIMUMAB-ADBM AJKT	8
ACTEMRA ACTPEN SOAJ	11	ACUVAIL	242	ADALIMUMAB-ADBM CROHNS/UC/HS STARTER AJKT .	8
ACTEMRA SOLN	11	ACYCLOVIR	95	ADALIMUMAB-ADBM PSKT 10 MG/0.2ML, 20 MG/0.4ML	8
ACTEMRA SOSY	11	acyclovir CAPS	87	ADALIMUMAB-ADBM PSKT 40 MG/0.4ML	8
ACTHAR GEL AUIJ	119	acyclovir sodium SOLN	87	ADALIMUMAB-ADBM PSKT 40 MG/0.8ML	8
ACTHAR GEL	119	acyclovir SUSP	87	ADALIMUMAB-ADBM PSKT 40 MG/0.8ML	8
ACTHIB SOLR IM	260	acyclovir TABS OR	87	ADALIMUMAB-ADBM PSORIASIS/UEVITIS STARTER AJKT	8
ACTICLATE TABS (doxycycline hyclate)	254	acyclovir topical CREA	106	ADALIMUMAB-ADBM STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT	8
ACTI-LANCE LANCETS 28G ...	143	acyclovir topical OINT	106		
ACTI-LANCE LITE SAFETY LANCETS 28G	143	ACZONE (dapsonsone (topical)) ...	101		
ACTI-LANCE SPECIAL SAFETY LANCETS 17G	143	ADACEL SUSP	255		
ACTI-LANCE SPECIAL SAFETYLANCETS 17G	143	ADAKVEO	133		
ACTI-LANCE UNIVERSAL SAFETY LANCETS 23G	143				

ADALIMUMAB-ADBM STARTER PACKAGE FOR PSORIASIS/UVEITIS AJKT .....8	adenosine SOLN 6 MG/2ML, 12 MG/4ML .....24	100/0.5ML/29GX1/2" .....163
ADALIMUMAB-FKJP AJKT .....8	ADLARITY PTWK .....248	ADVOCATE INSULIN SYRINGE/U-100/0.5ML/30GX5/16" .....163
ADALIMUMAB-FKJP PSKT 20 MG/0.4ML .....8	ADMELOG SOLN IJ .....45	ADVOCATE INSULIN SYRINGE/U-100/0.5ML/31GX5/16" .....163
ADALIMUMAB-FKJP PSKT 40 MG/0.8ML .....8	ADMELOG SOLOSTAR SOPN ...45	ADVOCATE INSULIN SYRINGE/U-100/1ML/29GX1/2" .....163
ADALIMUMAB-RYVK (2 PEN) AJKT .8	ADRENALIN SOLN IJ 1 MG/ML, 30 MG/30ML (epinephrine (anaphylaxis)) .....264	ADVOCATE INSULIN SYRINGE/U-100/1ML/30GX5/16" .....163
ADALIMUMAB-RYVK PSKT .....8	ADSTILADRIN .....69	ADVOCATE INSULIN SYRINGE/U-100/1ML/31GX5/16" .....163
adapalene GEL 0.3 %101	ADTHYZA TABS .....255	ADVOCATE LANCETS .....143
ADASUVE .....81	ADUHELM .....248	ADVOCATE LANCETS 30G .....143
ADBRY SOAJ .....110	ADVAIR DISKUS AEPB (fluticasone-salmeterol) .....27	ADVOCATE LANCING DEVICE MISC .....143
ADBRY SOSY .....110	ADVAIR HFA AERO (fluticasone-salmeterol) .....28	ADVOCATE RAPID-SAFE LANCING DEVICE MISC .....143
ADCETRIS .....68	ADVANCED MOBILE LANCET 30G 143	ADVOCATE SAFETY LANCETS 143
ADCIRCA TABS (tadalafil (pulmonary hypertension)) .....93	ADVATE .....130	ADVOCATE SAFETY LANCETS 26G .....143
ADDERALL TABS 1.25 MG-1.25 MG-1.25 MG-1.875 MG-1.875 MG-1.875 MG-1.875 MG, 2.5 MG-2.5 MG-2.5 MG-2.5 MG, 3.125 MG-3.125 MG-3.125 MG, 3.75 MG-3.75 MG-3.75 MG-3.75 MG, 5 MG-5 MG-5 MG-5 MG (amphetamine-dextroamphetamine) .1	ADVOCATE INSULIN PEN NEEDLE/32GX4MM .....162	ADYNOVATE .....130
ADDERALL TABS 7.5 MG-7.5 MG-7.5 MG-7.5 MG (amphetamine-dextroamphetamine) .....1	ADVOCATE INSULIN PEN NEEDLES .....162	ADZENYS XR-ODT TBED .....1
ADDERALL XR CP24 (amphetamine-dextroamphetamine) .1	ADVOCATE INSULIN PEN NEEDLES 29GX12.7MM .....162	ADZYNMA .....132
adefovir dipivoxil .....86	ADVOCATE INSULIN PEN NEEDLES 31GX5MM .....162	AEMCOLO .....62
ADEMPAS .....94	ADVOCATE INSULIN PEN NEEDLES 31GX8MM .....163	AEROCHAMBER HOLDING CHAMBER DEVI .....213
adenosine (diagnostic) .....113	ADVOCATE INSULIN SYRINGE/U-100/0.3ML/29GX1/2" .....163	AEROCHAMBER MINI AEROSOLCHAMBER DEVI .....213
	ADVOCATE INSULIN SYRINGE/U-100/0.3ML/30GX5/16" .....163	AEROCHAMBER MV MISC .....213
	ADVOCATE INSULIN SYRINGE/U-100/0.3ML/31GX5/16" .....163	AEROCHAMBER PLUS FLOW VU MISC .....213
	ADVOCATE INSULIN SYRINGE/U-	AEROCHAMBER PLUS FLOW VUMOUTHPIECE DEVI .....213

AEROCHAMBER PLUS FLOW-VU MISC	213	AFLURIA 2024-2025 SUSP	260	AKEEGA	70
AEROCHAMBER PLUS FLOW- VU/INTERMEDIATE MASK DEVI 213		AFLURIA 2024-2025 SUSY	260	AKOVAZ SOLN IV (ephedrine sulfate (pressors))	265
AEROCHAMBER PLUS FLOW- VU/LARGE MASK DEVI	213	AFLURIA QUADRIVALENT 2022- 2023 SUSP	260	AKOVAZ SOSY IV	265
AEROCHAMBER PLUS FLOW- VU/LARGE MASK MISC	213	AFLURIA QUADRIVALENT 2022- 2023 SUSY	260	AKTEN	240
AEROCHAMBER PLUS FLOW- VU/MASK MISC	213	AFLURIA QUADRIVALENT 2023- 2024 SUSP	260	AKYNZEO	52
AEROCHAMBER PLUS FLOW- VU/MEDIUM MASK DEVI	213	AFLURIA QUADRIVALENT 2023- 2024 SUSY	260	AKYNZEO SOLN	52
AEROCHAMBER PLUS FLOW- VU/MEDIUM MASK MISC	213	AFREZZA POWD 4 UNIT, 8 UNIT, 12 UNIT	45	AKYNZEO SOLR	52
AEROCHAMBER PLUS FLOW- VU/SMALL MASK DEVI	213	AFSTYLA	130	albendazole	21
AEROCHAMBER PLUS FLOW- VU/SMALL MASK MISC	213	AGAMATRIX ULTRA-THIN LANCETS 33G	143	ALBENDAZOLE	95
AEROCHAMBER Z-STAT PLUS VALVED HOLDING CHAMBER W/FLOW VU MISC	214	AGAMREE	99	ALBUKED 25	132
AEROCHAMBER Z-STAT PLUS/FLOWSIGNAL MISC	214	AGGRASTAT (tirofiban hcl in sodium chloride)	132	ALBUKED 5	132
AEROCHAMBER Z-STAT PLUS/LARGE MASK MISC	214	AGGRASTAT 3.75 MG/15ML	132	ALBUMIN HUMAN	132
AEROCHAMBER Z-STAT PLUS/MEDIUM MASK MISC	214	AGRYLIN 0.5 MG (anagrelide hcl) 132		ALBUMINEX	132
AEROCHAMBER Z-STAT PLUS/SMALL MASK MISC	214	AIMOVIG 140 MG/ML	216	ALBURX	132
AEROCHAMBER/FLOWSIGNAL MISC	214	AIMOVIG 70 MG/ML	216	ALBUTEIN	132
AEROTRACH PLUS MISC	214	AIRDUO DIGIHALER 113/14	28	albuterol sulfate AERS	28
AFINITOR DISPERZ TBSO (everolimus)	72	AIRDUO DIGIHALER 232/14	28	albuterol sulfate NEBU 0.083 %, 0.63 MG/3ML, 1.25 MG/3ML	28
AFINITOR TABS (everolimus)	72	AIRDUO RESPICLICK 113/14 AEPB (fluticasone-salmeterol)	28	albuterol sulfate NEBU 2.5 MG/0.5ML	28
		AIRDUO RESPICLICK 232/14 AEPB (fluticasone-salmeterol)	28	albuterol sulfate SYRP	28
		AIRDUO RESPICLICK 55/14 AEPB (fluticasone-salmeterol)	28	albuterol sulfate TABS	28
		AIRSUPRA	28	ALCAINE (propracaine hcl)	240
		AJOVY SOAJ	216	alclometasone dipropionate CREA 106	
		AJOVY SOSY	216	alclometasone dipropionate OINT 106	
				ALDACTAZIDE (spironolactone & hydrochlorothiazide)	117
				ALDACTONE TABS (spironolactone)	117

ALDURAZYME	120	tartrate)	238	ALYMSYS	68
ALECENSA	72	ALPHAGAN P 0.15 % (brimonidine tartrate)	238	amantadine hcl CAPS	77
alendronate sodium SOLN	118	ALPHANATE SOLR	130	amantadine hcl SOLN	77
alendronate sodium TABS 10 MG 118		ALPHANINE SD 500 UNIT, 1000 UNIT, 1500 UNIT	130	amantadine hcl TABS	77
alendronate sodium TABS 35 MG 118		ALPRAZOLAM INTENSOL CONC	23	AMARYL 1 MG (glimepiride)	50
alendronate sodium TABS 70 MG 118		alprazolam TABS 0.25 MG, 0.5 MG, 1 MG	23	AMARYL 2 MG (glimepiride)	50
alfuzosin hcl	129	alprazolam TABS 2 MG	23	AMARYL 4 MG (glimepiride)	50
ALIMTA SOLR (pemetrexed disodium)	67	alprazolam TB24 0.5 MG, 1 MG, 3 MG	23	AMBIEN CR TBCR (zolpidem tartrate)	137
ALINIA SUSR	62	alprazolam TB24 2 MG	23	AMBIEN TABS (zolpidem tartrate) 137	
ALINIA TABS (nitazoxanide)	62	alprazolam TB24 2 MG	23	AMBISOME (amphotericin b liposome)	53
ALIQOPA	72	alprazolam TBDP 0.25 MG, 0.5 MG, 1 MG	23	ambrisentan	93
aliskiren fumarate	61	alprazolam TBDP 2 MG	23	amcinonide CREA	106
ALKERAN IV (melphalan hcl)	66	ALPROLIX	130	AMELUZ GEL	104
ALKINDI SPRINKLE CPSP	99	ALREX SUSP (loteprednol etabonate)	240	AMICAR SOLN OR (aminocaproic acid)	136
allopurinol 100 MG, 300 MG	130	ALTACE CAPS 1.25 MG, 2.5 MG (ramipril)	58	AMICAR TABS (aminocaproic acid) 136	
allopurinol 200 MG	130	ALTACE CAPS 5 MG, 10 MG (ramipril)	58	AMIDATE (etomidate)	128
allopurinol sodium	130	ALTOPREV TB24 20 MG, 40 MG, 60 MG	56	amikacin sulfate SOLN 1 GM/4ML, 500 MG/2ML	6
almotriptan malate 12.5 MG	217	ALTUVIIIIO	130	amiloride & hydrochlorothiazide .	117
almotriptan malate 6.25 MG	217	ALUNBRIG TABS 180 MG	72	amiloride hcl TABS	117
alogliptin benzoate	44	ALUNBRIG TABS 30 MG, 90 MG .	72	amino acid infusion SOLN 1.04 GM/100ML-2.17 GM/100ML-592 MG/100ML-434 MG/100ML-39 MG/100ML-1.04 GM/100ML-749 MG/100ML-1.04 GM/100ML-894 MG/100ML-147.4 MEQ/L-960 MG/100ML-749 MG/100ML-250 MG/100ML-749 MG/100ML-1.47 GM/100ML-894 MG/100ML-749 MG/100ML-1.18 GM/100ML, 1040	
alogliptin-metformin hcl	42	ALUNBRIG TBPK	72		
alogliptin-pioglitazone 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG	43	ALVAIZ	134		
ALOMIDE	242	ALVESCO	26		
ALOPRIM (allopurinol sodium) ..	130	alvimopan	128		
alosetron hcl	127	ALYGLO	245		
ALPHAGAN P 0.1 % (brimonidine					

MG/100ML-2170 MG/100ML-592	10 MG-2.5 MG	60	1.25 MG, 2.5 MG-2.5 MG-2.5 MG-2.5
MG/100ML-434 MG/100ML-1180	amlodipine besylate-benazepril hcl		MG, 3.75 MG-3.75 MG-3.75 MG-3.75
MG/100ML-39 MG/100ML-1040	10 MG-5 MG, 20 MG-10 MG, 20 MG-		MG, 5 MG-5 MG-5 MG-5 MG, 6.25
MG/100ML-749 MG/100ML-1040	5 MG	60	MG-6.25 MG-6.25 MG-6.25 MG, 7.5
MG/100ML-894 MG/100ML-151			MG-7.5 MG-7.5 MG-7.5 MG
MEQ/L-960 MG/100ML-749	amlodipine besylate-benazepril hcl		amphetamine-dextroamphetamine
MG/100ML-250 MG/100ML-749	40 MG-10 MG, 40 MG-5 MG	60	CP24 12.5 MG-12.5 MG-12.5 MG-
MG/100ML-1470 MG/100ML-894			12.5 MG, 3.125 MG-3.125 MG-3.125
MG/100ML-749 MG/100ML	amlodipine besylate-olmesartan		MG-3.125 MG, 6.25 MG-6.25 MG-
	medoxomil	60	6.25 MG-6.25 MG, 9.375 MG-9.375
amino acids TABS	amlodipine besylate-valsartan	60	MG-9.375 MG-9.375 MG
			1
aminocaproic acid SOLN OR 0.25	amlodipine-valsartan-		amphetamine-dextroamphetamine
GM/ML	hydrochlorothiazide	60	CP24 9.375 MG-9.375 MG-9.375
aminocaproic acid TABS			MG-9.375 MG
	AMMONUL (sod benzoate & sod		1
aminophylline SOLN	phenylacetate)	120	amphetamine-dextroamphetamine
			TABS 1.25 MG-1.25 MG-1.25 MG-
amiodarone hcl SOLN 50 MG/ML,	AMONDYS 45	230	1.25 MG, 1.875 MG-1.875 MG-1.875
450 MG/9ML, 900 MG/18ML			MG-1.875 MG, 2.5 MG-2.5 MG-2.5
amiodarone hcl TABS	amoxapine	42	MG-2.5 MG, 3.125 MG-3.125 MG-
			3.125 MG-3.125 MG, 3.75 MG-3.75
AMITIZA (lubiprostone)	amoxicillin & pot clavulanate CHEW .		MG-3.75 MG-3.75 MG, 5 MG-5 MG-5
	246		MG-5 MG
amitriptyline hcl TABS	amoxicillin & pot clavulanate SUSR		1
	246		
AMJEVITA SOAJ 40 MG/0.4ML	amoxicillin & pot clavulanate TABS		amphetamine-dextroamphetamine
8	246		TABS 7.5 MG-7.5 MG-7.5 MG-7.5
AMJEVITA SOAJ 40 MG/0.8ML			MG
8			1
AMJEVITA SOAJ 80 MG/0.8ML	amoxicillin & pot clavulanate TB12		AMPHOTERICIN B
8	246		224
AMJEVITA SOSY 10 MG/0.2ML			
8			amphotericin b IV
AMJEVITA SOSY 20 MG/0.2ML	amoxicillin CAPS	246	53
8			
AMJEVITA SOSY 20 MG/0.4ML	amoxicillin CHEW 125 MG, 250 MG .		amphotericin b liposome
8	246		53
AMJEVITA SOSY 40 MG/0.4ML			
8			ampicillin & sulbactam sodium IJ 1
AMJEVITA SOSY 40 MG/0.8ML	AMOXICILLIN SUSR (amoxicillin)		GM-0.5 GM, 2 GM-1 GM
8	246		246
AMLODIPINE BESYLATE	amoxicillin SUSR	246	ampicillin CAPS 500 MG
95			246
amlodipine besylate TABS 10 MG .	amoxicillin TABS	246	ampicillin sodium IJ 1 GM, 2 GM, 250
90			MG, 500 MG
amlodipine besylate TABS 2.5 MG	amoxicillin-clarithromycin w/		246
89	lansoprazole THPK	258	AMPYRA (dalfampridine)
amlodipine besylate TABS 5 MG ..			250
90			AMRIX CP24 (cyclobenzaprine hcl)
amlodipine besylate-atorvastatin	amphetamine sulfate TABS	1	227
calcium			
92			AMVUTTRA
amlodipine besylate-benazepril hcl	amphetamine-dextroamphetamine		252
	CP24 1.25 MG-1.25 MG-1.25 MG-		
			AMYTAL SODIUM
			137

AMYVID	113	APLISOL	113	MCG/0.4ML	134
ANAFRANIL (clomipramine hcl) ..	42	APOKYN SOCT	77	ARANESP ALBUMIN FREE SOSY	
anagrelide hcl	132	apomorphine hydrochloride SOCT	78	100 MCG/0.5ML	134
ANAPROX DS TABS (naproxen		APONVIE EMUL	53	ARANESP ALBUMIN FREE SOSY	
sodium)	11	apraclonidine hcl	238	25 MCG/0.42ML	134
ANASPAZ TBDP (hyoscyamine		aprepitant CAPS	53	ARANESP ALBUMIN FREE SOSY	
sulfate)	255	aprepitant MISC	53	300 MCG/0.6ML	134
anastrozole	70	APRETUDE	83	ARANESP ALBUMIN FREE SOSY	
ANCOBON (flucytosine)	53	APRISO CP24 (mesalamine)	126	500 MCG/ML	134
ANDEXXA 200 MG	51	APTENSIO XR CP24		ARANESP ALBUMIN FREE SOSY	
ANDROGEL GEL TD 25 MG/2.5GM		(methylphenidate hcl)	3	60 MCG/0.3ML, 150 MCG/0.3ML	134
(testosterone)	20	APTIOM 200 MG, 400 MG	34	ARAVA (leflunomide)	13
ANDROGEL PUMP GEL TD 1.62 %		APTIOM 600 MG, 800 MG	34	ARCALYST	10
(testosterone)	20	APTIVUS CAPS	83	AREXVY	260
ANECTINE SOLN	230	AQ INSULIN SYRINGE/0.5ML/30G X		arformoterol tartrate	28
ANGELIQ	123	5/16"	163	ARGATROBAN (argatroban)	33
ANGIOMAX SOLR (bivalirudin		AQ INSULIN SYRINGE/1ML/29G X		argatroban	33
trifluoroacetate)	33	1/2"	163	ARGATROBAN	33
ANKTIVA	76	AQ INSULIN SYRINGE/1ML/31G X		ARGATROBAN/SODIUM	
ANNOVERA	98	5/16"	163	CHLORIDE	33
ANORO ELLIPTA	28	AQINJECT PEN NEEDLE/31G X		ARICEPT TABS 10 MG (donepezil	
ANTIVENIN LATRODECTUS		3/16"	163	hydrochloride)	248
MACTANS	245	AQINJECT PEN NEEDLE/32G X		ARICEPT TABS 23 MG (donepezil	
ANTIVENIN NORTH		5/32"	163	hydrochloride)	248
AMERICANCORAL SNAKE	245	AQUALANCE LANCETS ULTRA		ARICEPT TABS 5 MG (donepezil	
ANUSOL-HC EX (hydrocortisone		THIN 30G	143	hydrochloride)	248
(rectal))	21	ARALAST NP SOLR 500 MG, 1000		ARIKAYCE	6
ANZEMET TABS 50 MG	51	MG	252	ARIMIDEX (anastrozole)	70
APEXICON E CREA	106	ARANESP ALBUMIN FREE SOLN		aripiprazole SOLN OR	83
APHEXDA	136	25 MCG/ML, 40 MCG/ML, 60		aripiprazole TABS	83
APIDRA SOLN	45	MCG/ML, 100 MCG/ML, 200		aripiprazole TBDP	83
APIDRA SOLOSTAR SOPN	45	MCG/ML	134	ARISTADA 1064 MG/3.9ML	83
APLENZIN	40	ARANESP ALBUMIN FREE SOSY		ARISTADA 441 MG/1.6ML	83
		10 MCG/0.4ML, 40 MCG/0.4ML, 200			

ARISTADA 662 MG/2.4ML	83	asenapine maleate	81	(candesartan cilexetil)	58
ARISTADA 882 MG/3.2ML	83	ASMANEX HFA AERO 100 MCG/ACT, 200 MCG/ACT	26	ATACAND HCT (candesartan cilexetil-hydrochlorothiazide)	60
ARISTADA INITIO	83	ASMANEX HFA AERO 50 MCG/ACT	26	atazanavir sulfate CAPS	83
ARIXTRA 10 MG/0.8ML (fondaparinux sodium)	31	ASMANEX TWISTHALER 120 METERED DOSES AEPB	26	ATELVIA TBEC (risedronate sodium)	118
ARIXTRA 10 MG/0.8ML (fondaparinux sodium)	32	ASMANEX TWISTHALER 14 METERED DOSES AEPB	26	atenolol & chlorthalidone	60
ARIXTRA 2.5 MG/0.5ML (fondaparinux sodium)	31	ASMANEX TWISTHALER 30 METERED DOSES AEPB 110 MCG/INH	27	atenolol TABS 100 MG	88
ARIXTRA 5 MG/0.4ML (fondaparinux sodium)	31	ASMANEX TWISTHALER 30 METERED DOSES AEPB 220 MCG/INH	27	atenolol TABS 25 MG	88
ARIXTRA 7.5 MG/0.6ML (fondaparinux sodium)	31	ARMODAFINIL	3	atenolol TABS 50 MG	88
ARMONAIR DIGIHALER 113 MCG/ACT, 232 MCG/ACT	26	ATGAM IV 50 MG/ML	221	ATIVAN SOLN (lorazepam)	23
ARMOUR THYROID TABS	255	ATIVAN TABS (lorazepam)	23	atomoxetine hcl 10 MG, 18 MG, 25 MG, 40 MG, 60 MG	2
ARNUITY ELLIPTA 100 MCG/ACT, 200 MCG/ACT	26	ASPARLAS	76	atomoxetine hcl 80 MG, 100 MG ...	2
ARNUITY ELLIPTA 50 MCG/ACT	26	aspirin CHEW	14	ATORVALIQ SUSP	56
AROMASIN (exemestane)	70	aspirin TBEC 81 MG	14	atorvastatin calcium TABS 10 MG, 20 MG, 40 MG	56
ARRANON (nelarabine)	67	aspirin-dipyridamole	133	atorvastatin calcium TABS 80 MG	56
arsenic trioxide	76	ASPRUZYO SPRINKLE PACK ...	22	atovaquone	62
ARTESUNATE	65	ASSURE COMFORT LANCETS ULTRA THIN 28G	143	atovaquone-proguanil hcl	65
ARTHROTEC 50 TBEC (diclofenac w/ misoprostol)	11	ASSURE ID SAFETY PEN NEEDLES 30G X 5/16"	163	atracurium besylate 50 MG/5ML, 100 MG/10ML	234
ARTHROTEC 75 TBEC (diclofenac w/ misoprostol)	11	ASSURE LANCE LANCETS	143	atropine sulfate (ophthalmic) OINT 237	
ARTISS KIT	136	ASSURE LANCE SAFETY LANCET 28G	143	atropine sulfate (ophthalmic) SOLN 237	
ARZERRA	68	ASTAGRAF XL CP24 0.5 MG ...	221	ATROPINE SULFATE SOLN 1 % 237	
ASACOL HD TBEC (mesalamine) 126		ASTAGRAF XL CP24 1 MG, 5 MG 221		ATROPINE SULFATE SOLN IV 0.4 MG/ML, 1 MG/ML (atropine sulfate) 256	
ASCENIV	245	ATACAND 32 MG (candesartan cilexetil)	58		
		ATACAND 4 MG, 8 MG, 16 MG			

atropine sulfate SOLN IV 0.4 MG/ML, 1 MG/ML .....255	AURORA PEN NEEDLES 29GX12MM 164	AVASTIN 68
ATROPINE SULFATE SOSY IJ (atropine sulfate) .....256	AURORA PEN NEEDLES 31G X6MM 164	AVEED SOLN 20
ATROPINE SULFATE SOSY IJ 0.25 MG/5ML, 0.5 MG/5ML, 1 MG/10ML 256	AURORA PEN NEEDLES 31G X8MM 164	AVODART (dutasteride) 129
atropine sulfate SOSY IJ 0.5 MG/5ML, 1 MG/10ML .....256	AURORA UNIFINE PENTIPS/32GX5/32" 164	AVONEX PEN AJKT 250
ATROVENT HFA .....25	AURORA UNIFINE PENTIPS/MINI/31GX3/16" .....164	AVONEX PSKT .....250
AUBAGIO (teriflunomide) .....250	AURYXIA .....128	AVSOLA .....126
AUGMENTIN ES-600 SUSR (amoxicillin & pot clavulanate) ...246	AUSTEDO TABS 250	AVYCAZ .....94
AUGMENTIN SUSR 31.25 MG/5ML- 125 MG/5ML .....246	AUSTEDO XR PATIENT TITRATION KIT TEPK 250	AXUMIN .....113
AUGMENTIN TABS 125 MG-500 MG (amoxicillin & pot clavulanate) ...247	AUSTEDO XR TB24 18 MG, 30 MG, 36 MG, 42 MG, 48 MG 250	AYGESTIN TABS (norethindrone acetate) .....247
AUGTYRO .....72	AUSTEDO XR TB24 24 MG .....250	AYVAKIT 71
AUM MINI INSULIN PEN NEEDLE/32GX4MM 163	AUSTEDO XR TB24 6 MG, 12 MG 250	azacitidine SUSR 67
AUM MINI INSULIN PEN NEEDLE/32GX5MM 163	AUTO-LANCET MINI MISC 143	AZACTAM (aztreonam) 64
AUM MINI INSULIN PEN NEEDLE/32GX6MM 163	AUTOLET IMPRESSION LANCING DEVICE MISC 143	AZASITE .....238
AUM MINI INSULIN PEN NEEDLE/32GX8MM 163	AUTOLET LANCING DEVICE MISC . 143	AZATHIOPRINE 221
AUM MINI INSULIN PEN NEEDLE/33GX4MM 164	AUTOLET PLUS MISC .....143	AZATHIOPRINE POWD 221
AUM MINI INSULIN PEN NEEDLE/33GX5MM 164	AUVELITY .....40	azathioprine TABS 100 MG 221
AUM MINI INSULIN PEN NEEDLE/33GX6MM 164	AUVI-Q SOAJ .....264	azathioprine TABS 50 MG 221
AUM SAFETY PEN NEEDLE/31G X 4MM .....164	AVALIDE (irbesartan- hydrochlorothiazide) 60	azathioprine TABS 75 MG 221
AUM SAFETY PEN NEEDLE/31G X 5MM .....164	AVAPRO (irbesartan) 58	azelastine hcl (ophth) .....242
	AVAR LS CLEANSER LIQD (sulfacetamide sodium w/ sulfur) .101	azelastine hcl 0.1 %, 137 MCG/SPRAY 229
	AVAR-E LS CREA (sulfacetamide sodium w/ sulfur) .....101	azelastine hcl 0.15 %229
		azelastine hcl-fluticasone propionate SUSP 229
		AZILECT (rasagiline mesylate) ... 79
		azithromycin PACK .....140
		azithromycin SOLR .....140
		azithromycin SUSR 100 MG/5ML 140
		azithromycin SUSR 200 MG/5ML 140
		azithromycin TABS 140

AZOPT (brinzolamide)	242	BALCOLTRA (levonorgestrel-ethinyl estradiol-iron)	97	IV/U-100/0.5ML/28G X 1/2"	164
AZOR (amlodipine besylate-olmesartan medoxomil)	60	BALFAXAR	130	BD INSULIN SYRINGE MICROFINE IV/U-100/1ML/28G X 1/2"	164
AZSTARYS	3	balsalazide disodium CAPS	126	BD INSULIN SYRINGE MICROFINE/U-100/1ML/27G X 5/8"	164
aztreonam	64	BALVERSA 3 MG	72	BD INSULIN SYRINGE SAFETYGLIDE/1ML/29G X 1/2"	164
AZULFIDINE EN-TABS TBEC (sulfasalazine)	126	BALVERSA 4 MG	72	BD INSULIN SYRINGE ULTRAFINE HALF-UNIT/0.3ML/31G X 5/16"	164
AZULFIDINE TABS (sulfasalazine) 126		BALVERSA 5 MG	72	BD INSULIN SYRINGE ULTRAFINE/0.3ML/30G X 1/2"	165
BACIGUENT	238	BANZEL SUSP (rufinamide)	35	BD INSULIN SYRINGE ULTRAFINE/0.3ML/30G X 12.7MM	165
bacitracin (ophthalmic)	238	BANZEL TABS (rufinamide)	35	BD INSULIN SYRINGE ULTRAFINE/0.3ML/31G X 5/16"	165
bacitracin	62	BAQSIMI ONE PACK POWD	44	BD INSULIN SYRINGE ULTRAFINE/0.3ML/31G X 5/16"	165
bacitracin-polymyxin b (ophth)	238	BAQSIMI TWO PACK POWD	44	BD INSULIN SYRINGE ULTRAFINE/0.3ML/31G X 8MM	165
bacitracin-poly-neomycin-hc	240	BARACLUDE SOLN	86	BD INSULIN SYRINGE ULTRAFINE/0.5ML/30G X 1/2"	165
BACLOFEN POWD	227	BARACLUDE TABS (entecavir)	86	BD INSULIN SYRINGE ULTRAFINE/0.5ML/31G X 5/16"	165
baclofen SOLN IT 40 MG/20ML, 500 MCG/ML, 20000 MCG/20ML, 40000 MCG/20ML	227	BARHEMSYS	52	BD INSULIN SYRINGE ULTRAFINE/0.5ML/31G X 8MM	165
baclofen SOLN OR 5 MG/5ML, 10 MG/5ML	227	BASAGLAR KWIKPEN SOPN	46	BD INSULIN SYRINGE ULTRAFINE/0.5ML/30G X 12.7MM	165
BACLOFEN SOSY	228	BASAGLAR TEMPO PEN SOPN	46	BD INSULIN SYRINGE ULTRAFINE/0.5ML/31G X 5/16"	165
baclofen SUSP	228	BAVENCIO	68	BD INSULIN SYRINGE ULTRAFINE/0.5ML/31G X 5/16"	165
baclofen TABS 10 MG, 20 MG	228	BAXDELA SOLR	125	BD INSULIN SYRINGE ULTRAFINE/0.5ML/31G X 8MM	165
baclofen TABS 5 MG, 15 MG	228	BAXDELA TABS	125	BD INSULIN SYRINGE ULTRAFINE/1/2 UNIT/0.3ML/31G X 8MM	165
bacteriostatic sodium chloride	247	BCG VACCINE	260	BD INSULIN SYRINGE ULTRAFINE/1ML/30G X 1/2"	165
BACTERIOSTATIC WATER FORINJECTION/BENZYL ALCOHOL	247	BD LO-DOSE INSULIN SYRINGE MICROFINE IV/0.5ML/28G X 1/2"	164	BD INSULIN SYRINGE ULTRAFINE/1ML/30G X 12.7MM	165
BACTRIM DS TABS (sulfamethoxazole-trimethoprim) ..	62	BD 1/2ML TUBERCULIN SYRINGE/PERM NEEDLE/REG BEV/27G X 1/2" MISC	164	BD INSULIN SYRINGE ULTRAFINE/1ML/30G X 12.7MM	165
BACTRIM TABS (sulfamethoxazole-trimethoprim)	62	BD AUTOSHIELD DUO 30G X 5MM	164	BD INSULIN SYRINGE ULTRAFINE/1ML/30G X 12.7MM	165
BAFIERTAM	250	BD ECLIPSE SYRINGE/1ML/30GX1/2"	164	BD INSULIN SYRINGE ULTRAFINE/1ML/31G X 8MM	165
		BD INSULIN SYRINGE LUER-LOK/U-100/1ML	164	BD INSULIN SYRINGE ULTRAFINE/U-100/0.5ML/29G X	
		BD INSULIN SYRINGE MICROFINE			

1/2"	165	BD SAFETYGLIDE INSULIN SYRINGE/0.3ML/31G X 15/64" ..	166	benazepril hcl 20 MG, 40 MG	58
BD INSULIN SYRINGE ULTRAFINE/U-100/1ML/31G X 5/16"	165	BD SAFETYGLIDE INSULIN SYRINGE/0.3ML/31G X 5/16" ..	166	benazepril hcl 5 MG	58
BD INSULIN SYRINGE/0.3ML/29G X 12.7MM	165	BD SAFETYGLIDE INSULIN SYRINGE/0.5ML/29G X 1/2"	166	bendamustine hcl SOLR	66
BD INSULIN SYRINGE/0.5ML/29G X 12.7MM	165	BD SAFETY-GLIDE INSULIN SYRINGE/0.5ML/29G X 1/2"	166	BENDAMUSTINE HYDROCHLORIDE SOLN	66
BD INSULIN SYRINGE/1ML/27G X 12.7MM	165	BD SAFETYGLIDE INSULIN SYRINGE/0.5ML/31G X 15/64" ..	166	BENDEKA SOLN	66
BD INSULIN SYRINGE/1ML/29G X 12.7MM	165	BD SAFETYGLIDE INSULIN SYRINGE/1ML/31G X 15/64"	166	BENEFIX KIT	130
BD INSULIN SYRINGE/U-100/1ML/27G X 1/2"	165	BD SAFETYGLIDE INSULIN SYRINGE/0.5ML/30G X 5/16" ..	166	BENICAR 20 MG (olmesartan medoxomil)	58
BD INSULIN SYRINGE/U-500/0.5ML/31G X 6MM	165	BD SAFETYGLIDE INSULIN SYRINGE/0.5ML/30G X 5/16" ..	166	BENICAR 40 MG (olmesartan medoxomil)	58
BD MICROTAINER LANCETS ..	143	BD VEO INSULIN SYRINGE ULTRAFINE/0.3ML/31G X 6MM	166	BENICAR 5 MG (olmesartan medoxomil)	58
BD PEN NEEDLE/MICRO/ULTRAFINE/32G X 6MM	166	BD VEO INSULIN SYRINGE ULTRAFINE/0.5ML/31G X 6MM	166	BENICAR HCT (olmesartan medoxomil-hydrochlorothiazide) ..	60
BD PEN NEEDLE/MINI/ULTRAFINE/31G X 5MM	166	BD VEO INSULIN SYRINGE ULTRAFINE/1/2 UNIT/0.3ML/31G X 6MM ..	166	BENLYSTA SOAJ	223
BD PEN NEEDLE/NANO 2ND GEN/32G X 4MM	166	BD VEO INSULIN SYRINGE ULTRAFINE/1ML/31G X 6MM	166	BENLYSTA SOLR	223
BD PEN NEEDLE/NANO 2ND GEN/32G X 5/32"	166	BD VEO INSULIN SYRINGE ULTRAFINE/U-100/0.5ML/31G X 15/64" ..	167	BENLYSTA SOSY	223
BD PEN NEEDLE/NANO/ULTRAFINE/32G X 4MM	166	BECONASE AQ	229	BENTYL SOLN IM (dicyclomine hcl) .	256
BD PEN NEEDLE/ORIGINAL/ULTRAFINE/29G X 12.7MM	166	BELBUCA FILM	18	BENZNIDAZOLE	21
BD PEN NEEDLE/SHORT/ULTRAFINE/31G X 8MM	166	BELEODAQ	72	BENZOCAINE	95
BD SAFETYGLIDE 1ML 27GX5/8" ..	166	BELLADONNA/OPIUM	256	benzocaine-docusate sodium ENEM .	139
BD SAFETYGLIDE INSULIN SYRINGE/0.3ML/29G X 1/2"	166	BELRAPZO SOLN	66	benztropine mesylate SOLN	77
		BELSOMRA	138	benztropine mesylate TABS	77
		benazepril & hydrochlorothiazide .	60	BEOVU SOSY	238
		benazepril hcl 10 MG	58	bepotastine besilate	242
				BEPREVE (bepotastine besilate)	242
				BEQVEZ	130
				BERINERT KIT	131
				BESIVANCE	238

BESPONSA	68	BETASERON KIT	250	BIMZELX SOSY	104
BESREMI	76	betaxolol hcl (ophth) SOLN	236	BINOSTO TBEF	118
betaine	120	betaxolol hcl	88	BIORPHEN SOLN IV	265
betamethasone dipropionate (topical) CREA	106	BETHANECHOL CHLORIDE	95	BIOTHRAX	260
betamethasone dipropionate (topical) LOTN	106	bethanechol chloride 10 MG, 50 MG . 259	bismuth subcitrate potassium- metronidazole-tetracycline	258	
betamethasone dipropionate (topical) OINT	106	bethanechol chloride 25 MG	259	bisoprolol & hydrochlorothiazide ..	60
betamethasone dipropionate augmented CREA	107	bethanechol chloride 5 MG	259	bisoprolol fumarate 10 MG	88
betamethasone dipropionate augmented GEL 0.05 %	107	BETHKIS NEBU (tobramycin)	6	bisoprolol fumarate 5 MG	88
betamethasone dipropionate augmented LOTN	107	BETIMOL	236	BIVALIRUDIN RTU SOLN (bivalirudin trifluoroacetate)	33
betamethasone dipropionate augmented OINT	107	BETOPTIC-S SUSP	236	bivalirudin trifluoroacetate SOLN ..	33
betamethasone sod phosphate & acetate SUSP	99	BEVESPI AEROSPHERE	28	bivalirudin trifluoroacetate SOLR ..	33
betamethasone valerate CREA ..	107	bexarotene (topical)	104	BIVIGAM SOLN	245
betamethasone valerate FOAM ..	107	bexarotene	76	bleomycin sulfate	71
betamethasone valerate LOTN ...	107	BEXSERO	260	BLINCYTO	68
betamethasone valerate OINT ...	107	BEYAZ (drospirenone-ethinyl estradiol-levomefolate calcium) ...	97	BLOXIVERZ SOLN IV (neostigmine methylsulfate)	65
BETAPACE AF 120 MG (sotalol hcl (afib/afl))	89	BEYFORTUS 100 MG/ML	246	BLOXIVERZ SOLN IV 10 MG/10ML (neostigmine methylsulfate)	65
BETAPACE AF 160 MG (sotalol hcl (afib/afl))	89	BEYFORTUS 50 MG/0.5ML	246	BLUDIGO IV	113
BETAPACE AF 80 MG (sotalol hcl (afib/afl))	89	bicalutamide	70	BONJESTA TBCR	52
BETAPACE TABS 120 MG (sotalol hcl)	89	BICILLIN C-R 300000 UNIT/2ML- 900000 UNIT/2ML, 300000 UNIT/ML- 300000 UNIT/ML	247	BOOSTRIX SUSP	255
BETAPACE TABS 160 MG (sotalol hcl)	89	BICILLIN L-A SUSY	246	BOOSTRIX SUSY	255
BETAPACE TABS 80 MG (sotalol hcl)	89	BICNU (carmustine)	66	BORTEZOMIB SOLN	72
		BIDIL (isosorbide dinitrate- hydralazine hcl)	92	BORTEZOMIB SOLR IJ 1 MG, 2.5 MG	72
		BIJUVA	123	bortezomib SOLR IJ	72
		BIKTARVY	83	bosentan TABS	93
		BILTRICIDE (praziquantel)	21	BOSULIF CAPS 100 MG	72
		bimatoprost SOLN	244	BOSULIF CAPS 50 MG	72
		BIMZELX SOAJ	104	BOSULIF TABS	72

BOTOX IJ	234	brimonidine tartrate-timolol maleate .	236	BRYHALI LOTN	107
BRAFTOVI 75 MG	72	BRINEURA	120	BSS PLUS SOLN	242
BREATHERITE VALVED MDI CHAMBER/COLLAPSIBLE DEVI	214	brinzolamide	242	BSS SOLN	242
BREATHERITE VALVED MDI CHAMBER/RIGID DEVI	214	BRIUMVI	250	budesonide (inhalation) SUSP 0.25 MG/2ML, 0.5 MG/2ML	27
BREO ELLIPTA (fluticasone furoate- vilanterol)	28	BRIVIACT SOLN IV 50 MG/5ML ..	35	budesonide (inhalation) SUSP 1 MG/2ML	27
BREO ELLIPTA 100 MCG/ACT-25 MCG/ACT (fluticasone furoate- vilanterol)	28	BRIVIACT SOLN OR 10 MG/ML ..	35	budesonide (intrarectal)	21
BREO ELLIPTA 50 MCG/INH-25 MCG/INH	28	BRIVIACT TABS	35	budesonide CPEP	99
BREVIBLOC (esmolol hcl-sodium chloride)	88	BRIXADI SOSY 128 MG/0.36ML ..	18	budesonide TB24	99
BREVIBLOC PREMIXED (esmolol hcl-sodium chloride)	88	BRIXADI SOSY 16 MG/0.32ML ...	18	budesonide-formoterol fumarate dihydrate	29
BREVIBLOC PREMIXED DOUBLESTRENGTH (esmolol hcl- sodium chloride)	88	BRIXADI SOSY 24 MG/0.48ML ...	18	budesonide-formoterol fumarate dihydrate 160 MCG/ACT-4.5 MCG/ACT	29
BREVIBLOC SOLN 100 MG/10ML (esmolol hcl)	88	BRIXADI SOSY 24 MG/0.48ML ...	19	budesonide-formoterol fumarate dihydrate 80 MCG/ACT-4.5 MCG/ACT	29
BREVITAL SODIUM SOLR 500 MG . 129		BRIXADI SOSY 32 MG/0.64ML ...	19	budesonide-formoterol fumarate dihydrate 80 MCG/ACT-4.5 MCG/ACT	29
BREXAFEMME	53	BRIXADI SOSY 64 MG/0.18ML ...	19	bumetanide SOLN 0.25 MG/ML ..	117
BREYANZI	69	BRIXADI SOSY 8 MG/0.16ML	18	bumetanide TABS	117
BREZTRI AEROSPHERE	29	BRIXADI SOSY 96 MG/0.27ML ...	18	BUMEX TABS 0.5 MG (bumetanide) . 117	
BRIDION SOLN	51	bromfenac sodium (ophth) 0.07 % 242		BUPHENYL POWD (sodium phenylbutyrate)	120
BRILINTA 60 MG	133	bromfenac sodium (ophth) 0.075 % 242		BUPHENYL TABS (sodium phenylbutyrate)	120
BRILINTA 90 MG	133	bromfenac sodium (ophth) 0.09 % 242		BUPIVACAINE FISIOPHARMA SOLN IJ	140
brimonidine tartrate (topical)	112	bromocriptine mesylate CAPS	78	bupivacaine hcl SOLN IJ	140
brimonidine tartrate 0.1 %	238	bromocriptine mesylate TABS 2.5 MG	78	bupivacaine in dextrose SOLN ...	140
brimonidine tartrate 0.15 %	238	BROMSITE (bromfenac sodium (ophth))	242	bupivacaine w/ epinephrine SOLN 1 :200000-0.25 %, 1 :200000-0.5 % 139	
brimonidine tartrate 0.2 %	238	BRONCHITOL	253	BUPRENEX SOLN (buprenorphine hcl)	19
		BRONCHITOL TOLERANCE TEST . 253			
		BROVANA (arformoterol tartrate) .	29		
		BRUKINSA	72		

buprenorphine hcl FILM 150 MCG, 300 MCG, 450 MCG, 600 MCG, 750 MCG, 900 MCG	19	MG-50 MG-325 MG	13	CADUET 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG (amlodipine besylate-atorvastatin calcium)	92
buprenorphine hcl SOLN	19	butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-300 MG	17	CADUET 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG (amlodipine besylate-atorvastatin calcium)	92
buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG	19	butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG	17	CAFCIT SOLN IV 60 MG/3ML (caffeine citrate)	2
buprenorphine hcl-naloxone hcl dihydrate FILM SL 2 MG-8 MG	19	butalbital-aspirin-caffeine CAPS	13	caffeine & sodium benzoate	2
buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG	19	butorphanol tartrate IJ 1 MG/ML, 2 MG/ML	19	CAFFEINE CITRATE SOLN IV (caffeine citrate)	2
buprenorphine hcl-naloxone hcl dihydrate SUBL	19	butorphanol tartrate NA 10 MG/ML	19	caffeine citrate SOLN OR	2
buprenorphine PTWK	19	BUTRANS PTWK (buprenorphine)	19	CALAN SR TBCR 120 MG, 180 MG (verapamil hcl)	90
bupropion hcl (smoking deterrent) 252		BYDUREON BCISE AUIJ	45	calcipotriene CREA	104
bupropion hcl TABS	40	BYETTA SOPN 10 MCG/0.04ML	45	CALCIPOTRIENE FOAM	104
bupropion hcl TB12	40	BYETTA SOPN 5 MCG/0.02ML	45	calcipotriene OINT	104
bupropion hcl TB24 150 MG, 300 MG	40	BYFAVO	137	calcipotriene SOLN	104
bupropion hcl TB24 450 MG	40	BYLVAY (PELLETS) CPSP	126	calcipotriene-betamethasone dipropionate OINT	107
bupropion hcl TB24 450 MG	40	BYLVAY CAPS	126	calcipotriene-betamethasone dipropionate SUSP	107
bupropion hcl TB24 450 MG	40	BYOOVIZ	238	calcitonin (salmon) IJ	118
bupropion hcl TB24 450 MG	40	BYSTOLIC (neбиволол hcl)	88	calcitonin (salmon) NA	118
bupropion hcl TB24 450 MG	40	BYSTOLIC 2.5 MG, 5 MG (neбиволол hcl)	88	calcitriol (topical)	104
bupropion hcl TB24 450 MG	40	CABENUVA 600 MG/2ML-400 MG/2ML	83	calcitriol CAPS	120
bupropion hcl TB24 450 MG	40	CABENUVA 900 MG/3ML-600 MG/3ML	83	calcitriol SOLN IV	120
bupropion hcl TB24 450 MG	40	cabergoline	123	calcium acetate (phosphate binder) CAPS	128
bupropion hcl TB24 450 MG	40	CABLIVI	133	calcium acetate (phosphate binder) TABS	128
bupropion hcl TB24 450 MG	40	CABOMETYX TABS	72		

CALCIUM CARBONATE SUSP ... 21	candesartan cilexetil 32 MG 59	MG-200 MG, 50 MG-12.5 MG-200 MG, 75 MG-18.75 MG-200 MG 78
calcium carbonate-cholecalciferol TABS 218	candesartan cilexetil 4 MG, 8 MG, 16 MG 59	carbidopa-levodopa-entacapone 200 MG-50 MG-200 MG 78
calcium carbonate-vitamin d TABS 250 MG-125 UNIT 218	candesartan cilexetil- hydrochlorothiazide 60	carbinoxamine maleate SOLN 54
calcium chloride (dihydrate) SOLN 218	capecitabine 67	carbinoxamine maleate TABS 4 MG . 54
calcium citrate-vitamin d TABS 200 UNIT-315 MG, 250 UNIT-200 MG, 250 UNIT-315 MG 218	CAPLYTA 79	carboplatin SOLN 50 MG/5ML, 150 MG/15ML, 450 MG/45ML, 600 MG/60ML, 1000 MG/100ML 66
CALCIUM GLUCONATE SOLN (calcium gluconate) 218	CAPRELSA 72	carboprost tromethamine SOLN . 245
calcium gluconate SOLN 218	captopril & hydrochlorothiazide ... 60	CARBOPROST TROMETHAMINE SOSY 245
CALCIUM GLUCONATE/SODIUMCHLORIDE SOLN (calcium gluconate-sodium chloride) 218	captopril 58	CARDENE IV SOLN 0.83 %-40 MG/200ML, 0.86 %-20 MG/200ML 90
CALCIUM GLUCONATE/SODIUMCHLORIDE SOLN 1 GM/100ML-0.8 %, 1 GM/50ML-0.675 %, 2 GM/100ML- 0.675 % 218	CAPVAXIVE 260	cardioplegic soln 92
calcium gluconate-sodium chloride SOLN 218	CARAC CREA 104	CARDIZEM CD CP24 120 MG (diltiazem hcl coated beads) 90
CALDOLOR SOLN 11	CARAFATE SUSP (sucralfate) ... 257	CARDIZEM CD CP24 180 MG (diltiazem hcl coated beads) 90
CALQUENCE 72	CARAFATE TABS (sucralfate) ... 257	CARDIZEM CD CP24 240 MG (diltiazem hcl coated beads) 90
CAMBIA (diclofenac potassium (migraine)) 217	CARBAGLU (carglumic acid) 120	CARDIZEM CD CP24 300 MG (diltiazem hcl coated beads) 90
CAMCEVI 70	carbamazepine CHEW 35	CARDIZEM CD CP24 360 MG (diltiazem hcl coated beads) 90
CAMINO PRO COMPLETE/GLYTACTIN BAR ... 115	carbamazepine CP12 35	CARDIZEM LA TB24 (diltiazem hcl) 90
CAMPTOSAR (irinotecan hcl) 77	carbamazepine SUSP 35	CARDIZEM TABS 120 MG (diltiazem hcl) 90
CAMZYOS 92	carbamazepine TABS 35	CARDIZEM TABS 30 MG, 60 MG (diltiazem hcl) 90
CANASA SUPP (mesalamine) ... 126	carbamazepine TB12 100 MG, 200 MG 35	CARDURA 1 MG, 2 MG (doxazosin mesylate) 59
CANCIDAS (caspofungin acetate) 53	carbamazepine TB12 400 MG 35	CARDURA 4 MG (doxazosin mesylate) 59
	CARBATROL CP12 (carbamazepine) 35	
	carbidopa 77	
	carbidopa-levodopa TABS 78	
	carbidopa-levodopa TBCR 78	
	carbidopa-levodopa TBDP 78	
	carbidopa-levodopa-entacapone 100 MG-25 MG-200 MG 78	
	carbidopa-levodopa-entacapone 125 MG-31.25 MG-200 MG, 150 MG-37.5	

CARDURA 8 MG (doxazosin mesylate)	59	CAREONE UNIFINE PENTIPS PLUS 5MM	168
CARDURA XL	129	CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES 31GX8MM	167
CAREONE ADVANCED LANCINGDEVICE MISC	143	CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES 32GX4MM	167
CAREONE INSULIN SYRINGES/0.3ML/30G X 1/2"	167	CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES/33G X 5/32"	167
CAREONE INSULIN SYRINGES/0.3ML/31G X 5/16"	167	CARESENS LANCETS	144
CAREONE INSULIN SYRINGES/0.5ML/30G X 1/2"	167	CARETOUCH CONTROL SOLUTION LEVEL 2 LIQD	144
CAREONE INSULIN SYRINGES/0.5ML/31G X 5/16"	167	CARETOUCH HYPODERMIC NEEDLES/27G X 1 1/2	167
CAREONE INSULIN SYRINGES/0.5ML/31G X 5/16"	167	CARETOUCH INSULIN SYRINGE/0.3ML/31GX5/16"	167
CAREONE INSULIN SYRINGES/1ML/30G X 1/2"	167	CARETOUCH INSULIN SYRINGE/0.5ML/31GX5/16"	168
CAREONE INSULIN SYRINGES/1ML/31GX5/16"	167	CARETOUCH INSULIN SYRINGE/1ML/30GX5/16"	168
CAREONE LANCET SUPER THIN/30G	144	CARETOUCH INSULIN SYRINGE/1ML/31GX5/16"	168
CAREONE LANCET THIN	144	CARETOUCH INSULIN SYRINGE/U-100/1ML/28G X 5/16"	168
CAREONE UNIFINE PENTIPS 29GX12MM	167	CARETOUCH INSULIN SYRINGE/U-100/1ML/29G X 5/16"	168
CAREONE UNIFINE PENTIPS 31GX5MM	167	CARETOUCH INSULIN SYRINGE0.5ML/30GX5/16"	168
CAREONE UNIFINE PENTIPS 31GX6MM	167	CARETOUCH PEN NEEDLE 29GX1/2"	168
CAREONE UNIFINE PENTIPS 31GX8MM	167	CARETOUCH PEN NEEDLES 31G X 6 MM	168
CAREONE UNIFINE PENTIPS PEN NEEDLES 32GX4MM	167	CARETOUCH PEN NEEDLES 31GX 5MM	168
CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES 29GX12MM	167	CARETOUCH PEN NEEDLES 31GX 8MM	168
CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES 31GX5MM	167	CARETOUCH PEN NEEDLES 32GX 4MM	168
CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES 31GX6MM	167	CARETOUCH PEN NEEDLES 32GX	
		CARETOUCH SAFETY LANCETS/26G	144
		CARETOUCH SAFETY LANCETS/28G	144
		CARETOUCH TWIST LANCETS 28G	144
		CARETOUCH TWIST LANCETS 30G	144
		CARETOUCH TWIST LANCETS 33G	144
		CARETOUCH TWIST LANCETS MULTI COLOR/30G	144
		carglumic acid	120
		carisoprodol TABS 250 MG	228
		carisoprodol TABS 350 MG	228
		carmustine	66
		CARMUSTINE 300 MG	66
		CARNITOR SF SOLN OR (levocarnitine (metabolic modifiers))	120
		CARNITOR SOLN OR 1 GM/10ML (levocarnitine (metabolic modifiers))	120
		CARNITOR TABS (levocarnitine (metabolic modifiers))	120
		CAROSPIR SUSP (spironolactone)	117
		carteolol hcl (ophth)	237
		carvedilol 12.5 MG, 25 MG	88
		carvedilol 3.125 MG, 6.25 MG	88
		carvedilol phosphate	88
		CARVYKTI	69
		CASGEVY	133

CASODEX (bicalutamide)	70	CEFEPIME/DEXTROSE	95	CELLCEPT CAPS (mycophenolate mofetil)	221
casopfungin acetate	53	cefixime CAPS	95	CELLCEPT INTRAVENOUS (mycophenolate mofetil hcl)	221
CASPOFUNGIN ACETATE	53	cefixime SUSR	95	CELLCEPT SUSR (mycophenolate mofetil)	221
CATAPRES-TTS-1 (clonidine)	59	CEFOTAN IJ (cefotetan disodium) ..	95	CELLCEPT TABS (mycophenolate mofetil)	221
CATAPRES-TTS-2 (clonidine)	59	cefotetan disodium IJ 1 GM, 2 GM ..	95	CELONTIN (methsuximide)	39
CATAPRES-TTS-3 (clonidine)	59	CEFOXITIN SODIUM	95	CENTANY AT KIT	102
CATHFLO ACTIVASE IJ	133	cefoxitin sodium IV	95	CENTANY OINT	102
CAYA DPRH	141	cefopodoxime proxetil SUSR	95	cephalexin CAPS 250 MG, 500 MG ..	95
CAYSTON	64	cefopodoxime proxetil TABS	95	cephalexin CAPS 750 MG	95
cefaclor CAPS	95	cefprozil SUSR	95	cephalexin SUSR	95
CEFACLOR ER TB12	95	cefprozil TABS	95	cephalexin TABS	95
cefaclor SUSR 125 MG/5ML, 375 MG/5ML	95	ceftazidime IJ 1 GM, 6 GM	95	CEPROTIN	132
cefadroxil CAPS	94	ceftriaxone sodium IJ 1 GM, 2 GM, 250 MG, 500 MG	95	CEQUA SOLN	239
cefadroxil SUSR	94	ceftriaxone sodium in dextrose ...	95	CERDELGA	133
cefadroxil TABS	94	CEFTRIAZONE/DEXTROSE	95	CEREDELGA	133
CEFAZOLIN SODIUM SOLN 4 %-1 GM/50ML	94	cefuroxime axetil TABS	95	CEREBYX (fosphenytoin sodium) ..	39
cefazolin sodium SOLR IJ 1 GM, 2 GM, 3 GM, 10 GM, 500 MG	95	cefuroxime sodium IJ 750 MG	95	CEREZYME 400 UNIT	133
CEFAZOLIN SODIUM SOLR IV 2 GM, 3 GM	95	CELEBREX (celecoxib)	11	CERVIDIL INST	245
CEFAZOLIN SODIUM/DEXTROSE SOLR	94	CELEBREX 400 MG (celecoxib) ...	11	cetirizine hcl SOLN OR	54
CEFAZOLIN SOLN	95	CELEBREX 50 MG, 100 MG, 200 MG (celecoxib)	11	cetirizine hcl TABS	54
CEFAZOLIN SOLR IV	95	celecoxib 400 MG	11	CETRAXAL (ciprofloxacin hcl (otic)) .	244
CEFAZOLIN/DEXTROSE SOLN 4 %-3 GM/150ML	95	celecoxib 50 MG, 100 MG, 200 MG ..	11	cevimeline hcl	224
cefdinir CAPS	95	CELESTONE SOLUSPAN SUSP (betamethasone sod phosphate & acetate)	99	CHEMET	50
cefdinir SUSR	95	CELEXA TABS 10 MG, 20 MG (citalopram hydrobromide)	40	CHENODAL	125
cefepime hcl SOLR IJ 1 GM	95	CELEXA TABS 40 MG (citalopram hydrobromide)	40	CHERRY FLAVOR LIQD	247
CEFEPIME SOLN	95			CHERRY SYRUP	247
				CHILDRENS ADVIL SUSP 100	

MG/5ML (ibuprofen) .....11	choline fenofibrate 135 MG 56	CINRYZE SOLR IV 131
CHILDRENS MOTRIN SUSP 100 MG/5ML (ibuprofen) .....11	choline fenofibrate 45 MG 56	CINVANTI EMUL 53
chloramphenicol sodium succinate 62	CHORIONIC GONADOTROPIN IM 119	CIPRO HC 244
chlordiazepoxide hcl CAPS .....23	CHOSEN LANCETS 30G .....144	CIPRO SUSR .....125
chlordiazepoxide-amitriptyline ... 249	CHOSEN LANCING DEVICE MISC 144	CIPRO TABS 250 MG, 500 MG (ciprofloxacin hcl) 125
chlorhexidine gluconate (mouth- throat) 224	CHOSEN SAFETY LANCETS 28G 144	CIPRODEX (ciprofloxacin- dexamethasone) 244
chlorprocaine hcl IJ .....140	CIALIS 2.5 MG, 10 MG, 20 MG (tadalafil) 92	ciprofloxacin hcl (ophth) SOLN ...238
chloroquine phosphate TABS 65	CIALIS 5 MG (tadalafil) 92	ciprofloxacin hcl (otic) 244
chlorothiazide sodium .....118	CIBINQO .....110	ciprofloxacin hcl TABS 250 MG, 500 MG, 750 MG 125
CHLORPROMAZINE HCL .....96	ciclopirox GEL 102	ciprofloxacin in d5w 125
chlorpromazine hcl CONC .....82	ciclopirox olamine CREA 102	ciprofloxacin SUSR 5 GM/100ML, 500 MG/5ML .....125
chlorpromazine hcl SOLN .....82	ciclopirox olamine SUSP 102	ciprofloxacin-dexamethasone ... 244
chlorpromazine hcl TABS .....82	ciclopirox SHAM 102	ciprofloxacin-fluocinolone acetonide . 244
chlorthalidone 25 MG, 50 MG 118	ciclopirox SOLN 102	cisatracurium besylate SOLN 234
chlorzoxazone TABS 250 MG ...228	cidofovir .....85	cisplatin SOLN 50 MG/50ML, 100 MG/100ML, 200 MG/200ML 66
chlorzoxazone TABS 375 MG, 750 MG 228	cilostazol 133	CISPLATIN SOLR 66
chlorzoxazone TABS 500 MG ...228	CILOXAN OINT .....238	CITALOPRAM HYDROBROMIDE CAPS 40
CHOLBAM 125	CIMDUO .....83	citalopram hydrobromide SOLN ... 40
cholecalciferol CHEW 1000 UNIT 265	CIMERLI 238	citalopram hydrobromide TABS 10 MG, 20 MG 40
cholecalciferol LIQD OR 10 MCG/ML, 400 UNIT/ML 265	cimetidine hcl OR 300 MG/5ML ..256	citalopram hydrobromide TABS 40 MG 40
CHOLESTYRAMINE .....96	cimetidine TABS 200 MG, 300 MG, 400 MG 256	CITRACAL + D3 MAXIMUM TABS (calcium citrate-vitamin d) .....219
cholestyramine light PACK 56	cimetidine TABS 800 MG .....256	CITRACAL PETITES/VITAMIND TABS (calcium citrate-vitamin d) .219
cholestyramine light POWD .....56	CIMZIA KIT 126	CITRANATAL 90 DHA 120 MG-20
cholestyramine PACK .....56	CIMZIA PSKT .....126	
cholestyramine POWD .....56	CIMZIA STARTER KIT PSKT ....126	
CHOLESTYRAMINE RESIN .....96	cinacalcet hcl .....120	
	CINQAIR 24	

MG-1 MG-3 MG-400 UNIT-3.4 MG-20 MG-50 MG-25 MG-2 MG-159 MG-90 MG-150 MCG-30 UNIT-0.75 MG-300 MG	(clindamycin palmitate hydrochloride)	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.3ML/29G X 1/2"
225	63	168
CITRANATAL ASSURE	CLEOCIN PHOSPHATE SOLN IJ 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML (clindamycin phosphate)	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.3ML/30G X 1/2"
225	63	168
CITRANATAL B-CALM 120 MG-25 MG-1 MG-400 UNIT-120 MG-20 MG 225	CLEOCIN PHOSPHATE SOLN IJ	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.3ML/30G X 5/16"
	63	168
CITRANATAL HARMONY 25 MG-1 MG-400 UNIT-50 MG-104 MG-27 MG-30 UNIT-260 MG	CLEOCIN SUPP	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.3ML/31G X 5/16"
225	264	168
cladribine 10 MG/10ML	CLEOCIN-T LOTN (clindamycin phosphate (topical))	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/28G X 1/2"
67	101	169
CLARINEX TABS (desloratadine) .54	CLEVER CHEK LANCETS ULTRATHIN	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/29G X 1/2"
	144	169
clarithromycin SUSR	CLEVER CHEK LANCETS ULTRATHIN 30G	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/30G X 1/2"
141	144	169
clarithromycin TABS	CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/ADULT LARGE DEVI 214	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/1.0ML/30G X 1/2"
141	214	169
clarithromycin TB24	CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/MEDIUM/3 YEA DEVI 214	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/1ML/28G X 1/2"
141	214	169
CLARITIN ALLERGY CHILDRENS SOLN (loratadine)	CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/SMALL INFANT DEVI 214	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/1ML/30G X 5/16"
54	214	169
CLARITIN REDITABS JUNIORS TBDP (loratadine)	CLEVER CHOICE COMFORT EZINSULIN PEN NEEDLES 31GX8MM	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/1ML/29G X 1/2"
54	168	169
CLARITIN REDITABS TBDP 10 MG (loratadine)	CLEVER CHOICE COMFORT EZINSULIN PEN NEEDLES 33GX4MM	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/1ML/29G X 1/2"
54	168	169
CLARITIN REDITABS TBDP 10 MG (loratadine)	CLEVER CHOICE COMFORT EZINSULIN SYINGE/0.3ML/31G X 15/64"	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/1ML/29G X 1/2"
55	168	169
CLARITIN SOLN (loratadine)	CLEVER CHOICE COMFORT EZINSULIN SYINGE/0.5ML/31G X 15/64"	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/1ML/30G X 5/16"
55	168	169
CLARITIN TABS (loratadine)		
55		
clemastine fumarate SYRP		
54		
clemastine fumarate TABS 2.68 MG .54		
CLENPIQ SOLN 12 GM/175ML-3.5 GM/175ML-10 MG/175ML		
138		
CLEOCIN (clindamycin hcl)		
63		
CLEOCIN CREA (clindamycin phosphate vaginal)		
264		
CLEOCIN PEDIATRIC GRANULES		

CLEVER CHOICE COMFORT EZINSULIN SYRINGE/1ML/31G X 15/64"	169	UNIVERSAL/31GX1/4"	170	clindamycin phosphate in d5w	64
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/U- 100/1ML/31GX5/16"	169	CLICKFINE PEN NEEDLE UNIVERSAL/31GX5/16"	170	CLINDAMYCIN PHOSPHATE POWD	96
CLEVER CHOICE COMFORT EZLANCETS 23G	144	CLICKFINE PEN NEEDLES 31G X 1/4"	170	clindamycin phosphate SOLN IJ 300 MG/2ML, 600 MG/4ML, 900 MG/6ML, 9000 MG/60ML	64
CLEVER CHOICE COMFORT EZLANCETS 28G	144	CLICKFINE PEN NEEDLES 31G X 3/16"	170	clindamycin phosphate vaginal CREA	264
CLEVER CHOICE COMFORT EZPEN NEEDLES 29GX12MM ..	169	CLICKFINE PEN NEEDLES 31G X 5/16"	170	CLINDAMYCIN/SODIUM CHLORIDE	64
CLEVER CHOICE COMFORT EZPEN NEEDLES 31GX5MM ...	169	CLICKFINE PEN NEEDLES 31G X 8MM	170	CLINDESSE	264
CLEVER CHOICE COMFORT EZPEN NEEDLES 31GX6MM ...	169	CLICKFINE PEN NEEDLES 32G X 5/32"	170	clobazam SUSP	34
CLEVER CHOICE COMFORT EZPEN NEEDLES 31GX8MM ...	169	CLICKFINE PEN NEEDLES/31GX1/4"	170	clobazam TABS	34
CLEVER CHOICE COMFORT EZPEN NEEDLES 32GX4MM ...	169	CLICKFINE UNIVERSAL PEN NEEDLES 31GX5/16"	170	clobetasol propionate CREA 0.05 % 107	
CLEVER CHOICE COMFORT EZPEN NEEDLES 32GX5MM ...	169	CLIMARA PRO	123	clobetasol propionate emollient base 0.05 %	107
CLEVER CHOICE COMFORT EZPEN NEEDLES 32GX6MM ...	169	CLIMARA PTWK (estradiol)	124	clobetasol propionate emulsion ..	107
CLEVER CHOICE COMFORT EZPEN NEEDLES 32GX8MM ...	169	CLINDACIN ETZ	101	clobetasol propionate FOAM	107
CLEVER CHOICE COMFORT EZPEN NEEDLES 33GX4MM ...	169	CLINDAGEL GEL (clindamycin phosphate (topical))	101	clobetasol propionate GEL 0.05 % 107	
CLEVER CHOICE COMFORT EZPEN NEEDLES 33GX5MM ...	170	clindamycin hcl	63	clobetasol propionate LIQD	107
CLEVER CHOICE COMFORT EZPEN NEEDLES 33GX6MM ...	170	clindamycin palmitate hydrochloride 63		clobetasol propionate LOTN	107
CLEVER CHOICE COMFORT EZPEN NEEDLES 33GX8MM ...	170	clindamycin phosphate (topical) FOAM	101	clobetasol propionate OINT 0.05 % 107	
CLEVER CHOICE COMFORT EZPEN NEEDLES 33GX8MM ...	170	clindamycin phosphate (topical) GEL 101		clobetasol propionate SHAM	107
CLEVER CHOICE COMFORT EZPEN NEEDLES 33GX8MM ...	170	clindamycin phosphate (topical) LOTN	101	clobetasol propionate SOLN 0.05 % 107	
CLEVER CHOICE COMFORT EZPEN NEEDLES 33GX8MM ...	170	clindamycin phosphate (topical) SOLN	101	CLOBEX LIQD (clobetasol propionate)	107
CLEVIPREX 25 MG/50ML, 50 MG/100ML	90	clindamycin phosphate (topical) SWAB	101	CLOBEX LOTN 0.05 % (clobetasol propionate)	107
CLICKFINE PEN NEEDLE				CLOBEX SHAM (clobetasol propionate)	107

clocortolone pivalate	107	CLOZARIL TABS 25 MG, 100 MG (clozapine)	81	COLY-MYCIN M (colistimethate sodium)	64
CLODAN KIT	107	CLOZARIL TABS 50 MG, 200 MG (clozapine)	81	COMBIGAN (brimonidine tartrate- timolol maleate)	237
CLODERM (clocortolone pivalate) 107		C-NATE DHA CAPS	225	COMBIPATCH PTTW	124
clofarabine	67	COAGADDEX	130	COMBIVENT RESPIMAT AERS ..	29
CLOLAR (clofarabine)	67	COAGUCHEK LANCETS	144	COMBIVIR (lamivudine-zidovudine) .	83
clomipramine hcl	42	COARTEM	65	COMBOGESIC SOLN	11
clonazepam TABS 0.5 MG, 1 MG .	34	COCAINE HYDROCHLORIDE ..	229	COMETRIQ KIT	72
clonazepam TABS 2 MG	34	CODEINE PHOSPHATE POWD ..	14	COMFORT ASSURED LANCETS MICRO THIN 33G	144
clonazepam TBDP 0.125 MG, 0.25 MG, 0.5 MG, 1 MG	34	codeine sulfate TABS 30 MG	14	COMFORT ASSURED LANCETS SUPER THIN 28G	144
clonazepam TBDP 2 MG	34	CODEINE SULFATE TABS	14	COMFORT EZ INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	170
clonidine 0.1 MG/24HR	59	COLAZAL CAPS (balsalazide disodium)	126	COMFORT EZ INSULIN SYRINGE/U-100/1ML/31G X 5/16"	170
clonidine 0.2 MG/24HR, 0.3 MG/24HR	59	colchicine CAPS	130	COMFORT EZ PRO SAFETY PEN NEEDLES 30G X 8MM	170
clonidine hcl (adhd) TB12	2	colchicine TABS	130	COMFORT EZ PRO SAFETY PEN NEEDLES 31G X 4MM	170
clonidine hcl (analgesia) EP	13	colchicine w/ probenecid	130	COMFORT EZ PRO SAFETY PEN NEEDLES 31G X 5MM	170
CLONIDINE HCL POWD	59	COLCRYS TABS (colchicine)	130	COMFORT EZ SHORT/31G X 8MM	170
clonidine hcl TABS	59	colesevelam hcl PACK	56	COMFORT EZ/31G X 5MM	170
clonidine OR 0.17 MG	59	colesevelam hcl TABS	56	COMFORT EZ/31G X 6MM	171
clopidogrel bisulfate	133	COLESTID FLAVORED GRAN (colestipol hcl)	56	COMFORT LANCETS	145
clorazepate dipotassium TABS	23	COLESTID FLAVORED PACK (colestipol hcl)	56	COMFORT TOUCH LANCETS ULTRA THIN 31G	145
CLOTOTEKAL IT	140	COLESTID GRAN (colestipol hcl) .	56		
clotrimazole (topical) CREA	102	COLESTID PACK (colestipol hcl) .	56		
clotrimazole (topical) SOLN	102	COLESTID TABS (colestipol hcl) .	56		
clotrimazole	224	colestipol hcl GRAN	56		
clotrimazole w/ betamethasone CREA	102	colestipol hcl PACK	56		
clotrimazole w/ betamethasone LOTN	102	colestipol hcl TABS	56		
clozapine TABS	81	colistimethate sodium	64		
clozapine TBDP	81	COLUMVI	68		

COMFORT TOUCH PEN NEEDLES/31G X 4MM	171	MASK DEVI	214	CORIFACT	130
COMFORT TOUCH PEN NEEDLES/31G X 5MM	171	COMPACT SPACE CHAMBER/ANTI-STATIC/SMALL MASK DEVI	214	CORLANOR SOLN	94
COMFORT TOUCH PEN NEEDLES/31G X 6 MM	171	COMPLERA	83	CORLANOR TABS (ivabradine hcl)	94
COMFORT TOUCH PEN NEEDLES/31G X 8 MM	171	COMPLETE NATAL DHA	225	CORLOPAM	61
COMFORT TOUCH PEN NEEDLES/32G X 4MM	171	COMPLETENATE CHEW	225	CORTEF TABS (hydrocortisone)	99
COMFORT TOUCH PEN NEEDLES/32G X 5MM	171	COMTAN (entacapone)	77	CORTENEMA (hydrocortisone (intrarectal))	21
COMFORT TOUCH PEN NEEDLES/32G X 6MM	171	CONCERTA TBCR 18 MG, 27 MG, 54 MG (methylphenidate hcl)	3	CORTIFOAM EX 10 %	21
COMFORT TOUCH PEN NEEDLES/32G X 8MM	171	CONCERTA TBCR 36 MG (methylphenidate hcl)	3	CORTISONE ACETATE TABS	99
COMFORT TOUCH PEN NEEDLES/33G X 5/32"	171	CONDYLOX GEL (podofilox)	111	CORTISPORIN-TC	244
COMFORT TOUCH PEN NEEDLES/33GX 3/16"	171	CONJUPRI (levamlodipine maleate)	90	CORTROPHIN GEL	119
COMFORT TOUCH PLUS SAFETY LANCETS PRESSURE ACTIVATED 30G	145	CONTOUR NEXT BLOOD GLUCOSE TEST STRP	113	CORTROSYN SOLR (cosyntropin)	113
COMIRNATY 2023-24 SUSP	260	CONZIP CP24 (tramadol hcl)	14	CORVERT (ibutilide fumarate)	24
COMIRNATY 2023-24 SUSY	260	COPAXONE SOSY 20 MG/ML (glatiramer acetate)	250	COSELA	76
COMIRNATY 2024-25 SUSY	261	COPAXONE SOSY 40 MG/ML (glatiramer acetate)	250	COSENTYX SENSOREADY PEN SOAJ	104
COMIRNATY SUSP	261	COPIKTRA	73	COSENTYX SOLN	104
COMPACT SPACE CHAMBER/ANTI-STATIC DEVI	214	COREG 12.5 MG, 25 MG (carvedilol)	88	COSENTYX SOSY 150 MG/ML	105
COMPACT SPACE CHAMBER/ANTI-STATIC/LARGE MASK DEVI	214	COREG 3.125 MG, 6.25 MG (carvedilol)	88	COSENTYX SOSY 75 MG/0.5ML	104
COMPACT SPACE CHAMBER/ANTI-STATIC/MEDIUM	89	COREG CR (carvedilol phosphate)	88	COSENTYX UNOREADY SOAJ	104
		CORGARD TABS 20 MG (nadolol)	89	COSMEGEN (dactinomycin)	71
		CORGARD TABS 40 MG (nadolol)	89	COSOPT (dorzolamide hcl-timolol maleate)	237
		CORGARD TABS 80 MG (nadolol)	89	COSOPT PF (dorzolamide hcl- timolol maleate)	237
				cosyntropin SOLR	113
				COTELLIC	73
				COTEMPLA XR-ODT TBED	3
				COZAAR 25 MG (losartan potassium)	59

COZAAR 50 MG, 100 MG (losartan potassium)	59	CVS ULTRA THIN LANCETS ...	145	microemulsion) SOLN	222
CREON CPEP	116	cyanocobalamin SOLN IJ 1000 MCG/ML	134	CYKLOKAPRON SOLN (tranexamic acid)	136
CRESEMBA CAPS OR 186 MG ...	53	cyclobenzaprine hcl CP24	228	CYLTEZO AJKT	8
CRESEMBA CAPS OR 74.5 MG ..	53	cyclobenzaprine hcl TABS 5 MG, 10 MG	228	CYLTEZO PSKT 10 MG/0.2ML, 20 MG/0.4ML	9
CRESEMBA SOLR IV	53	cyclobenzaprine hcl TABS 7.5 MG 228		CYLTEZO PSKT 40 MG/0.4ML	9
CRESTOR TABS (rosuvastatin calcium)	56	CYCLOGYL (cyclopentolate hcl) 237		CYLTEZO PSKT 40 MG/0.8ML	9
CREXONT CPCR	78	CYCLOGYL	237	CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT	8
CRINONE GEL 8 %	264	CYCLOMYDRIL	237	CYLTEZO STARTER PACKAGE FOR PSORIASIS AJKT	8
cromolyn sodium (mastocytosis) ..	125	cyclopentolate hcl 1 %	237	CYLTEZO STARTER PACKAGE FOR PSORIASIS/UEVITIS AJKT ...	8
cromolyn sodium (ophth)	242	cyclophosphamide CAPS	66	CYMBALTA CPEP (duloxetine hcl) 41	
cromolyn sodium NEBU	25	CYCLOPHOSPHAMIDE MONOHYDRATE SOLN (cyclophosphamide)	66	cyproheptadine hcl SYRP	55
crotamiton LOTN	112	CYCLOPHOSPHAMIDE SOLN (cyclophosphamide)	66	cyproheptadine hcl TABS	55
CRYSVITA	121	CYCLOPHOSPHAMIDE SOLN (cyclophosphamide)	66	CYRAMZA	68
CUBICIN RF (daptomycin)	63	cyclophosphamide SOLR IJ	66	CYSTADANE (betaine)	121
CUPRIMINE CAPS (penicillamine) 221		CYCLOPHOSPHAMIDE TABS ...	66	CYSTADROPS	242
CUROSURF TR 120 MG/1.5ML, 240 MG/3ML	254	cycloserine	66	CYSTAGON CAPS	129
CUTAQUIG	245	CYCLOSET	45	CYSTARAN	242
CUVITRU SOLN	245	cyclosporine (ophth) EMUL	239	cytarabine SOLN	67
CUVPOSA SOLN OR (glycopyrrolate)	256	cyclosporine CAPS 100 MG	222	CYTOGAM IV 50 MG/ML	245
CUVRIOR	221	cyclosporine CAPS 25 MG	222	CYTOMEL TABS (lithyronine sodium)	255
CVS LANCETS 21G	145	cyclosporine modified (for microemulsion) CAPS 100 MG ...	222	CYTOTEC (misoprostol)	258
CVS LANCETS MICRO THIN 33G 145		cyclosporine modified (for microemulsion) CAPS 25 MG ...	221	dabigatran etexilate mesylate CAPS 110 MG	33
CVS LANCETS THIN 26G	145	cyclosporine modified (for microemulsion) CAPS 50 MG ...	222	dabigatran etexilate mesylate CAPS .	33
CVS LANCETS ULTRA THIN 30G 145		cyclosporine modified (for			
CVS LANCING DEVICE MISC ...	145				

dacarbazine SOLR 200 MG	76	darunavir TABS 800 MG	83	deferoxamine mesylate	51
dactinomycin	71	DARZALEX	68	DEFINITY RT	114
dalfampridine	250	DARZALEX FASPRO	71	DEFITELIO	133
DALIRESP 250 MCG (roflumilast)	26	dasatinib 20 MG, 50 MG	73	deflazacort SUSP	99
DALIRESP 500 MCG (roflumilast)	26	dasatinib 70 MG, 80 MG, 100 MG, 140 MG	73	deflazacort TABS	99
DALVANCE	63	daunorubicin hcl SOLN	71	DEKAS ESSENTIAL CAPS	225
danazol CAPS	20	DAUNORUBICIN HYDROCHLORIDE SOLN (daunorubicin hcl)	71	DEKAS ESSENTIAL LIQD	225
DANTRIUM CAPS 25 MG (dantrolene sodium)	229	DAUNORUBICIN HYDROCHLORIDE SOLN	71	DEKAS PLUS CAPS	225
DANTRIUM IV SOLR (dantrolene sodium)	228	DAURISMO	69	DEKAS PLUS CHEW	225
dantrolene sodium CAPS	229	DAYBUE	234	DEKAS PLUS LIQD	225
dantrolene sodium SOLR	229	DAYPRO TABS (oxaprozin)	11	DELESTROGEN (estradiol valerate) 124	
DANYELZA	68	DAYTRANA PTCH (methylphenidate)	3	DELSTRIGO	83
dapagliflozin propanediol	49	DAYTRANA PTCH 10 MG/9HR, 15 MG/9HR, 20 MG/9HR (methylphenidate)	3	DELZICOL CPDR (mesalamine)	126
dapagliflozin propanediol-metformin hcl 1000 MG-10 MG	43	DAYVIGO	138	demeclocycline hcl TABS	254
dapagliflozin propanediol-metformin hcl 1000 MG-5 MG	43	DDAVP SOLN IJ 4 MCG/ML (desmopressin acetate)	122	DEMEROL SOLN IJ (meperidine hcl)	14
dapsone (topical) 5 %	101	DDAVP TABS 0.1 MG (desmopressin acetate)	122	DEMEROL SOLN IJ	14
dapsone (topical) 7.5 %	101	DDAVP TABS 0.2 MG (desmopressin acetate)	122	DEMSEER (metyrosine)	58
dapsone	63	decitabine	67	DENAVIR (penciclovir)	106
DAPTACEL	255	DEFENCATH	33	DENG VAXIA	261
DAPTOMYCIN (daptomycin)	63	deferasirox PACK	50	DENTA 5000 PLUS SENSITIVE GEL 1.1 %-5 %	224
daptomycin	63	deferasirox TABS	50	DEPAKOTE ER TB24 250 MG (divalproex sodium)	39
DAPTOMYCIN	63	deferasirox TBSO	50	DEPAKOTE ER TB24 500 MG (divalproex sodium)	39
DAPTOMYCIN/SODIUM CHLORIDE	63	deferiprone TABS	50	DEPAKOTE SPRINKLES CSDR (divalproex sodium)	39
DARAPRIM (pyrimethamine)	65			DEPAKOTE TBEC 125 MG, 250 MG (divalproex sodium)	39
darifenacin hydrobromide	258			DEPAKOTE TBEC 500 MG (divalproex sodium)	39
DARTISLA ODT TBDP	256				
darunavir TABS 600 MG	83				

DEPEN TITRATABS TABS (penicillamine)	221	desmopressin acetate spray	122	dexamethasone ELIX	100
DEPLIN 7.5	114	desmopressin acetate spray refrigerated	122	DEXAMETHASONE INTENSOL CONC	99
DEPO-ESTRADIOL	124	desmopressin acetate TABS 0.1 MG 122		dexamethasone sodium phosphate (ophth)	240
DEPO-MEDROL SUSP (methylprednisolone acetate)	99	desmopressin acetate TABS 0.2 MG 122		DEXAMETHASONE SODIUM PHOSPHATE	96
DEPO-MEDROL SUSP 80 MG/ML (methylprednisolone acetate)	99	desogestrel & ethinyl estradiol	97	dexamethasone sodium phosphate SOLN IJ	100
DEPO-MEDROL SUSP	99	desogestrel-ethinyl estradiol (biphasic)	97	dexamethasone sodium phosphate SOSY IJ	100
DEPO-PROVERA CONTRACEPTIVE SUSP IM (medroxyprogesterone acetate (contraceptive))	99	desogestrel-ethinyl estradiol (triphasic)	97	dexamethasone SOLN	100
DEPO-PROVERA CONTRACEPTIVE SUSY IM (medroxyprogesterone acetate (contraceptive))	99	desonide CREA	108	dexamethasone TABS	100
DEPO-SUBQ PROVERA 104 SUSY SC	99	desonide LOTN	108	dexamethasone TBPK	100
DERMA-SMOOTH/FS BODY OIL (fluocinolone acetonide)	107	desonide OINT	108	DEXCOM G6 RECEIVER	145
DERMA-SMOOTH/FS SCALP OIL (fluocinolone acetonide)	107	DESOWEN CREA (desonide)	108	DEXCOM G6 SENSOR	145
DERMA-SMOOTH/FS SCALP OIL (fluocinolone acetonide)	108	desoximetasone CREA 0.05 % ...	108	DEXCOM G6 TRANSMITTER ...	145
DERMOTIC (fluocinolone acetonide (otic))	245	desoximetasone CREA 0.25 % ...	108	DEXCOM G7 RECEIVER	145
DESCOVY	83	desoximetasone GEL	108	DEXCOM G7 SENSOR	145
DEFERAL 500 MG (deferoxamine mesylate)	51	desoximetasone LIQD	108	DEXEDRINE CP24 10 MG (dextroamphetamine sulfate)	1
desflurane	129	desoximetasone OINT 0.05 % ...	108	DEXEDRINE CP24 15 MG (dextroamphetamine sulfate)	1
desipramine hcl TABS	42	desoximetasone OINT 0.25 % ...	108	DEXILANT (dexlansoprazole) ...	257
desloratadine TABS	55	DESOXYN (methamphetamine hcl) . 1		dexlansoprazole	257
desloratadine TBDP	55	DESVENLAFAXINE ER	41	dexmedetomidine hcl in sodium chloride SOLN	137
desmopressin acetate SOLN IJ ..	122	desvenlafaxine succinate	41	DEXMEDETOMIDINE HCL SOLN 400 MCG/4ML, 1000 MCG/10ML (dexmedetomidine hcl)	137
		DETROL LA CP24 (tolterodine tartrate)	258	dexmedetomidine hcl SOLN	137
		DETROL LA CP24 (tolterodine tartrate)	259	DEXMEDETOMIDINE HYDROCHLORIDE/DEXTROSE MONOHYDRATE	137
		DETROL TABS (tolterodine tartrate) . 259			
		DEXAMETHASONE	96		

dexmethylphenidate hcl CP24	..... 3	0.2 %, 5 %-0.225 %, 5 %-0.3 %, 5 %-	11
dexmethylphenidate hcl TABS	..... 3	0.33 %, 5 %-0.45 %, 5 %-0.9 %	..219
dextrazoxane hcl	.....76	DEXTROSE/SODIUM CHLORIDE	
DEXTENZA INST	.....240	(dextrose w/ sodium chloride)	....219
dextran 40 in d5w	.....132	DHIVY TABS	.....78
dextran 40 in saline	.....132	DIACOMIT CAPS	.....35
dextroamphetamine sulfate CP24 15	.....1	DIACOMIT PACK	.....35
MG	.....1	DIASCREEN 1K STRP	.....145
dextroamphetamine sulfate CP24 5	.....1	DIASTAT ACUDIAL GEL (diazepam	
MG, 10 MG	.....1	(anticonvulsant))	.....34
dextroamphetamine sulfate SOLN	..1	DIASTAT PEDIATRIC GEL	
dextroamphetamine sulfate TABS 2.5	.....2	(diazepam (anticonvulsant))	.....34
MG, 5 MG, 7.5 MG, 10 MG, 15 MG,		diatrizoate meglumine & sodium OR	
20 MG	.....2	114	
dextroamphetamine sulfate TABS 30	.....2	diazepam (anticonvulsant) GEL	...34
MG	.....2	DIAZEPAM	.....96
dextroamphetamine sulfate TABS 5	.....2	diazepam CONC	.....23
MG, 10 MG	.....2	diazepam SOLN IJ 5 MG/ML, 10	
DEXTROSE 5%/ELECTROLYTE		MG/2ML, 50 MG/10ML	.....23
#48 VIAFLEX	.....219	diazepam SOLN OR 5 MG/5ML	...23
DEXTROSE 10%/SODIUM		diazepam TABS	.....23
CHLORIDE 0.2%	.....219	diazoxide	.....44
DEXTROSE 2.5%/SODIUM		DIBENZYLIN (phenoxybenzamine	
CHLORIDE 0.45% (dextrose w/		hcl)	.....58
sodium chloride)	.....219	dichlorphenamide	.....117
DEXTROSE 30% SOLN	.....235	DICLEGIS TBEC (doxylamine-	
DEXTROSE 5%/SODIUM		pyridoxine)	.....52
CHLORIDE 0.3% (dextrose w/		diclofenac epolamine PTCH EX	..103
sodium chloride)	.....219	diclofenac potassium (migraine)	.217
dextrose in lactated ringers	.....219	diclofenac potassium CAPS	.....11
dextrose SOLN 5 %, 10 %, 50 %, 70		diclofenac potassium TABS 25 MG	11
%, 250 MG/ML	.....235	diclofenac potassium TABS 50 MG	
DEXTROSE SOLN	.....235		
dextrose w/ sodium chloride 0.45 %-			
2.5 %, 0.9 %-5 %, 10 %-0.45 %, 5 %-			
		diclofenac sodium (actinic keratoses)	
		EX	.....104
		diclofenac sodium (ophth)	.....242
		diclofenac sodium (topical) GEL EX	
		103	
		diclofenac sodium (topical) SOLN EX	
		1.5 %	.....103
		diclofenac sodium (topical) SOLN EX	
		2 %	.....103
		diclofenac sodium TB24	.....11
		diclofenac sodium TBEC 25 MG	...11
		diclofenac sodium TBEC 50 MG, 75	
		MG	.....11
		diclofenac w/ misoprostol TBEC	...11
		dicloxacillin sodium	.....247
		dicyclomine hcl CAPS	.....256
		dicyclomine hcl SOLN IM	.....256
		dicyclomine hcl TABS	.....256
		DIFICID SUSR	.....141
		DIFICID TABS	.....141
		diflorasone diacetate CREA	.....108
		diflorasone diacetate OINT	.....108
		DIFLUCAN SUSR 10 MG/ML	
		(fluconazole)	.....53
		DIFLUCAN SUSR 40 MG/ML	
		(fluconazole)	.....53
		DIFLUCAN TABS 100 MG, 200 MG	
		(fluconazole)	.....53
		DIFLUCAN TABS 150 MG	
		(fluconazole)	.....53
		diflunisal TABS	.....14
		difluprednate	.....240

digoxin SOLN IJ 0.25 MG/ML 91	diltiazem hcl CP24 120 MG .....90	DIPROLENE OINT (betamethasone dipropionate augmented) .....108
digoxin SOLN OR 0.05 MG/ML 91	diltiazem hcl CP24 180 MG .....90	dipyridamole (diagnostic) 113
digoxin TABS 0.0625 MG, 62.5 MCG 91	diltiazem hcl CP24 240 MG .....90	dipyridamole 133
digoxin TABS 0.125 MG, 125 MCG 91	diltiazem hcl extended release beads 120 MG .....90	disopyramide phosphate CAPS ... 24
digoxin TABS 250 MCG 91	diltiazem hcl extended release beads 180 MG .....90	disulfiram .....248
dihydroergotamine mesylate SOLN IJ 1 MG/ML .....217	diltiazem hcl extended release beads 240 MG .....90	DITROPAN XL TB24 10 MG (oxybutynin chloride) 259
dihydroergotamine mesylate SOLN NA 4 MG/ML .....217	diltiazem hcl extended release beads 300 MG, 360 MG, 420 MG .....90	DITROPAN XL TB24 5 MG (oxybutynin chloride) 259
DILANTIN (phenytoin sodium extended) 39	diltiazem hcl SOLN .....90	DIURIL SUSP .....118
DILANTIN 30 MG 39	DILTIAZEM HCL SOLR .....90	divalproex sodium CSDR .....39
DILANTIN INFATABS CHEW (phenytoin) .....39	diltiazem hcl TABS 120 MG .....90	divalproex sodium TB24 250 MG ..39
DILANTIN-125 SUSP (phenytoin) .39	diltiazem hcl TABS 30 MG, 60 MG 90	divalproex sodium TB24 500 MG ..39
DILAUDID LIQD (hydromorphone hcl) 14	diltiazem hcl TABS 90 MG .....90	divalproex sodium TBEC 125 MG, 250 MG .....39
DILAUDID SOLN IJ (hydromorphone hcl) 14	diltiazem hcl TB24 90	divalproex sodium TBEC 500 MG .39
DILAUDID SOLN IJ 14	DIMENHYDRINATE SOLN 52	DIVIGEL GEL 0.25 MG/0.25GM, 0.75 MG/0.75GM, 1 MG/GM (estradiol) 124
DILAUDID TABS (hydromorphone hcl) 14	dimethyl fumarate CPDR 120 MG 250	DIVIGEL GEL 0.5 MG/0.5GM (estradiol) 124
diltiazem hcl coated beads CP24 120 MG 90	dimethyl fumarate CPDR 240 MG 250	DIVIGEL GEL 1.25 MG/1.25GM (estradiol) 124
diltiazem hcl coated beads CP24 180 MG 90	DIOVAN HCT (valsartan-hydrochlorothiazide) 60	dobutamine hcl 12.5 MG/ML, 250 MG/20ML .....92
diltiazem hcl coated beads CP24 240 MG 90	DIOVAN TABS (valsartan) .....59	DOBUTAMINE HCL/D5W .....92
diltiazem hcl coated beads CP24 300 MG 90	DIPENTUM .....126	DOBUTAMINE HYDROCHLORIDE/DEXTROSE 5% .....92
diltiazem hcl coated beads CP24 360 MG 90	diphenhydramine hcl SOLN 50 MG/ML 54	DOCETAXEL CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML (docetaxel) 77
diltiazem hcl CP12 .....90	diphenoxylate w/ atropine LIQD ... 50	docetaxel CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML .....77
	diphenoxylate w/ atropine TABS ..50	
	DIPRIVAN EMUL (propofol) .....128	
	DIPRIVAN EMUL .....128	

DOCETAXEL CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML	77	dorzolamide hcl-timolol maleate .	237	doxycycline (monohydrate) TABS 50 MG, 75 MG, 100 MG	254
DOCETAXEL SOLN (docetaxel) ..	77	DOTAREM SOLN (gadoterate meglumine)	114	doxycycline (rosacea)	112
DOCETAXEL SOLN 20 MG/2ML, 80 MG/8ML, 160 MG/16ML	77	DOTAREM SOSY (gadoterate meglumine)	114	doxycycline hyclate CAPS	254
docetaxel SOLN	77	DOVATO	83	doxycycline hyclate SOLR	254
DOCIVYX SOLN 20 MG/2ML, 160 MG/16ML	77	doxazosin mesylate 1 MG, 2 MG ..	59	doxycycline hyclate TABS 20 MG, 100 MG	254
docusate sodium ENEM 283 MG/5ML	139	doxazosin mesylate 4 MG	59	doxycycline hyclate TABS 50 MG, 75 MG, 150 MG	254
dofetilide	24	doxazosin mesylate 8 MG	59	doxycycline hyclate TBEC	254
DOJOLVI	235	doxepin hcl (antipruritic)	104	doxylamine-pyridoxine TBEC	52
DOLOBID TABS 250 MG	14	doxepin hcl (sleep)	137	DRISDOL CAPS (ergocalciferol) .	265
donepezil hydrochloride TABS 10 MG	248	doxepin hcl CAPS	42	DRIZALMA SPRINKLE CSDR	42
donepezil hydrochloride TABS 23 MG	248	doxepin hcl CONC	42	dronabinol CAPS	52
donepezil hydrochloride TABS 5 MG .	248	doxercalciferol CAPS	121	droperidol SOLN 2.5 MG/ML	23
donepezil hydrochloride TBDP ...	248	doxercalciferol SOLN	121	DROPLET GENTEEL LANCING DEVICE MISC	145
dopamine hcl 40 MG/ML	92	DOXIL IV 2 MG/ML (doxorubicin hcl liposomal)	71	DROPLET INSULIN SYRINGE 0.3ML/29G X 1/2"	171
DOPAMINE HYDROCHLORIDE (dopamine hcl)	92	doxorubicin hcl liposomal IV 2 MG/ML	71	DROPLET INSULIN SYRINGE 0.5ML/29G X 1/2"	171
DOPAMINE HYDROCHLORIDE/DEXTROSE .	92	DOXORUBICIN HCL SOLN (doxorubicin hcl)	71	DROPLET INSULIN SYRINGE 1ML/29G X 1/2"	171
DOPAMINE/D5W	92	doxorubicin hcl SOLN	71	DROPLET INSULIN SYRINGE U-100/0.3/31G X 5/16"	171
DOPTELET	134	doxorubicin hcl SOLR 10 MG, 50 MG	71	DROPLET INSULIN SYRINGE U-100/0.3ML/30G X 1/2"	171
DORAL (quazepam)	137	DOXORUBICIN HYDROCHLORIDE SOLN (doxorubicin hcl)	71	DROPLET INSULIN SYRINGE U-100/0.3ML/30G X 15/64"	171
DORYX MPC TBEC 60 MG	254	doxycycline (monohydrate) CAPS 50 MG, 100 MG	254	DROPLET INSULIN SYRINGE U-100/0.3ML/30G X 5/16"	171
DORYX TBEC 50 MG, 200 MG (doxycycline hyclate)	254	doxycycline (monohydrate) CAPS 75 MG, 150 MG	254	DROPLET INSULIN SYRINGE U-100/0.3ML/31G X 15/64"	171
DORYX TBEC 80 MG (doxycycline hyclate)	254	doxycycline (monohydrate) SUSR	254	DROPLET INSULIN SYRINGE U-100/0.3ML/31G X 15/64"	171
dorzolamide hcl	242	doxycycline (monohydrate) TABS 150 MG	254	DROPLET INSULIN SYRINGE U-	

100/0.5ML/30G X 1/2"	171	145	SYRINGE/FIXED NEEDLE 29GX12.5MM 1ML	173	
DROPLET INSULIN SYRINGE U- 100/0.5ML/30G X 15/64"	172	172	DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX6MM 0.3ML	173	
DROPLET INSULIN SYRINGE U- 100/0.5ML/30G X 5/16"	172	NEEDLE/MICRON/34G X 9/64" ..	172	DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX6MM 0.5ML	173
DROPLET INSULIN SYRINGE U- 100/0.5ML/31G X 5/16"	172	DROPLET PEN NEEDLES 29G X1/2"	172	DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX6MM 0.5ML	173
DROPLET INSULIN SYRINGE U- 100/1ML/30G X 1/2"	172	DROPLET PEN NEEDLES 29GX10MM	172	DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX6MM 1ML	173
DROPLET INSULIN SYRINGE U- 100/1ML/30G X 15/64"	172	DROPLET PEN NEEDLES 29GX12MM	173	DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX8MM 0.3ML	173
DROPLET INSULIN SYRINGE U- 100/1ML/30G X 5/16"	172	DROPLET PEN NEEDLES 30G X 5/16"	173	DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX8MM 0.3ML	173
DROPLET INSULIN SYRINGE U- 100/1ML/31G X 15/64"	172	DROPLET PEN NEEDLES 31G X3/16"	173	DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX8MM 0.5ML	173
DROPLET INSULIN SYRINGE U- 100/1ML/31G X 5/16"	172	DROPLET PEN NEEDLES 31G X5/16"	173	DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX8MM 1ML	173
DROPLET INSULIN SYRINGE/U- 100/0.3ML/31G X 15/64"	172	DROPLET PEN NEEDLES 31GX5MM	173	DROPSAFE SAFETY PEN NEEDLE/31GX5MM	173
DROPLET INSULIN SYRINGE/U- 100/0.3ML/31G X 5/16"	172	DROPLET PEN NEEDLES 31GX6MM	173	DROPSAFE SAFETY PEN NEEDLES/31G X 5/16"	174
DROPLET INSULIN SYRINGE/U- 100/0.5ML/30G X 1/2"	172	DROPLET PEN NEEDLES 31GX8MM	173	DROPSAFE SAFETY PEN NEEDLES/31G X 1/4"	174
DROPLET INSULIN SYRINGE/U- 100/0.5ML/31G X 15/64"	172	DROPLET PEN NEEDLES 32G X 5/32"	173	drospirenone-ethinyl estradiol	97
DROPLET INSULIN SYRINGE/U- 100/0.5ML/31G X 5/16"	172	DROPLET PEN NEEDLES 32GX4MM	173	drospirenone-ethinyl estradiol- levomefolate calcium	97
DROPLET INSULIN SYRINGE/U- 100/1ML/30G X 1/2"	172	DROPLET PEN NEEDLES 32GX5MM	173	DROXIA CAPS	133
DROPLET INSULIN SYRINGE/U- 100/1ML/31G X 15/64"	172	DROPLET PEN NEEDLES 32GX6MM	173	droxidopa 100 MG, 200 MG	264
DROPLET INSULIN SYRINGE/U- 100/1ML/31G X 5/16"	172	DROPLET PEN NEEDLES 32GX8MM	173	droxidopa 300 MG	264
DROPLET LANCETS ULTRA THIN 30G	145	DROPLET PERSONAL LANCETS30G	145	DRUG MART ADJUSTABLE LANCING DEVICE MISC	145
DROPLET LANCING DEVICE MISC .		DROPSAFE INSULIN SAFETY		DRUG MART ON-THE-GO LANCETS GENTLE 30G	145

DRUG MART UNIFINE PENTIPS 31GX5MM .....174	DUPIXENT SOAJ SC 200 MG/1.14ML 110	EASIVENT/MASK-LARGE MISC 214
DRUG MART UNIFINE PENTIPS29G X 12MM .....174	DUPIXENT SOAJ SC 300 MG/2ML 110	EASIVENT/MASK-MEDIUM MISC 214
DRUG MART UNIFINE PENTIPS31GX6MM 174	DUPIXENT SOSY 100 MG/0.67ML 110	EASIVENT/MASK-SMALL MISC .214
DRUG MART UNIFINE PENTIPS31GX8MM 174	DUPIXENT SOSY 200 MG/1.14ML 110	EASY COMFORT INSULIN SYRINGE/0.3ML/31G X 1/2" 174
DRUG MART UNIFINE PENTIPS32GX4MM 174	DUPIXENT SOSY 300 MG/2ML . 110	EASY COMFORT INSULIN SYRINGE/0.3ML/31G X 5/16" ...174
DRUG MART UNIFINE PENTIPSPPLUS 32GX4MM 174	DURACLON EP 100 MCG/ML (clonidine hcl (analgesia)) .....13	EASY COMFORT INSULIN SYRINGE/0.5ML/30G X 5/16" ...174
DRUG MART UNILET LANCETSSUPER THIN 30G ....145	DUREX EXTRA SENSITIVE THIN DEVI 141	EASY COMFORT INSULIN SYRINGE/0.5ML/31G X 5/16" ...174
DRUG MART UNILET LANCETSULTRA THIN 28G 145	DUREX EXTRA SENSITIVE THIN MISC .....141	EASY COMFORT INSULIN SYRINGE/1ML/30G X 5/16" .....174
DRUG MART UNILET MICRO THIN LANCETS 33G .....146	DUREX TROPICAL MISC .....141	EASY COMFORT INSULIN SYRINGE/1ML/31G X 5/16" .....174
DRYSOL SOLN .....112	DUREZOL (difluprednate) 240	EASY COMFORT INSULIN SYRINGE/1ML/32GX5/16" 174
DSUVIA SUBL 14	DURYSTA IMPL .....244	EASY COMFORT INSULIN SYRINGE/U-100/0.5ML/30G X 1/2" . 174
DUAKLIR PRESSAIR .....29	dutasteride 130	EASY COMFORT INSULIN SYRINGE/U-100/1ML/30G X 1/2" 174
DUAVEE 124	dutasteride-tamsulosin hcl .....130	EASY COMFORT INSULIN SYRINGE/U-100/0.5ML/30G X 1/2" 174
DUETACT (pioglitazone hcl- glimepiride) .....43	DUVYZAT .....231	EASY COMFORT LANCETS ....146
DUEXIS (ibuprofen-famotidine) ...11	D-VI-SOL LIQD OR (cholecalciferol) . 265	EASY COMFORT LANCETS 30G/PULL TOP 146
DULERA 100 MCG/ACT-5 MCG/ACT, 200 MCG/ACT-5 MCG/ACT .....29	DYANAVEL XR SUER .....2	EASY COMFORT LANCETS 30G/THIN TOP .....146
DULERA 50 MCG/ACT-5 MCG/ACT . 29	DYANAVEL XR TBCR OR 5 MG, 10 MG, 15 MG, 20 MG 2	EASY COMFORT LANCETS TWIST TOP 146
duloxetine hcl CPEP 20 MG, 30 MG, 60 MG .....42	DYMISTA SUSP (azelastine hcl- fluticasone propionate) 229	EASY COMFORT PEN NEEDLES31GX1/4" 174
duloxetine hcl CPEP 40 MG .....42	DYRENIUM CAPS (triamterene) .117	EASY COMFORT PEN NEEDLES31GX3/16" 174
DUOBRII .....108	DYSPORT 234	EASY COMFORT PEN
DUOPA SUSP 78	E.E.S. GRANULES SUSR (erythromycin ethylsuccinate) 141	EASY COMFORT PEN
	EAA SUPPLEMENT PACK .....115	EASY COMFORT PEN
	EASIVENT MISC .....214	EASY COMFORT PEN

NEEDLES31GX5/16"	174	EASY TOUCH INSULIN SYRINGE/0.3ML/31G X 5/16" ...	175	EASY TOUCH INSULIN SYRINGE/U-100/1ML/27G X 1/2"	176
EASY COMFORT PEN NEEDLES32GX5/32"	175	EASY TOUCH INSULIN SYRINGE/0.5ML/29G X 1/2"	175	EASY TOUCH INSULIN SYRINGE/U-100/1ML/27G X 5/8"	176
EASY COMFORT PEN NEEDLES33G X 4MM	175	EASY TOUCH INSULIN SYRINGE/0.5ML/30G X 5/16" ...	175	EASY TOUCH INSULIN SYRINGE/U-100/1ML/28G X 1/2"	176
EASY COMFORT PEN NEEDLES33G X 5MM	175	EASY TOUCH INSULIN SYRINGE/1ML/30G X 5/16"	175	EASY TOUCH INSULIN SYRINGE/U-100/1ML/29G X 1/2"	176
EASY COMFORT PEN NEEDLES33G X 6MM	175	EASY TOUCH INSULIN SYRINGE/SAFETY/U-100/0.5ML/29G X 1/2"	175	EASY TOUCH INSULIN SYRINGE/U-100/1ML/30G X 1/2"	176
EASY COMFORT SAFETY PEN NEEDLES 31GX5MM	175	EASY TOUCH INSULIN SYRINGE/SAFETY/U-100/0.5ML/30G X 5/16"	175	EASY TOUCH INSULIN SYRINGE/U-100/1ML/31G X 5/16"	176
EASY COMFORT SAFETY PEN NEEDLES 31GX6MM	175	EASY TOUCH INSULIN SYRINGE/SAFETY/U-100/1ML/29G X 1/2"	175	EASY TOUCH LANCETS 21G/PRESSURE ACTIVATED ..	146
EASY COMFORT SAFETY PEN NEEDLES 32GX4MM	175	EASY TOUCH INSULIN SYRINGE/SAFETY/U-100/0.3ML/30G X 1/2" ..	176	EASY TOUCH LANCETS 23G/PRESSURE ACTIVATED ..	146
EASY GLIDE PEN NEEDLES 33G X 5/32"	175	EASY TOUCH INSULIN SYRINGE/SAFETY/U-100/1ML/30G X 1/2" ..	176	EASY TOUCH LANCETS 26G/PRESSURE ACTIVATED ..	146
EASY MINI EJECT LANCING DEVICE MISC	146	EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/27G X 1/2" ..	176	EASY TOUCH LANCETS 26G/PULL-TOP	146
EASY MINI LANCING DEVICE MISC	146	EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/28G X 1/2" ..	176	EASY TOUCH LANCETS 28G/PRESSURE ACTIVATED ..	146
EASY TOUCH 32GX5MM	175	EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/29G X 1/2" ..	176	EASY TOUCH LANCETS 28G/PULL-TOP	146
EASY TOUCH 32GX6MM	175	EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/30G X 1/2" ..	176	EASY TOUCH LANCETS 28G/TWIST	146
EASY TOUCH FLIPLOCK SAFETY INSULIN SYRINGE 1ML/29GX1/2" 175		EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	176	EASY TOUCH LANCETS 30G/PRESSURE ACTIVATED ..	146
EASY TOUCH FLIPLOCK SAFETY INSULIN SYRINGE 1ML/30GX1/2" 175		EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/30G X 1/2" ..	176	EASY TOUCH LANCETS 30G/PULL-TOP	146
EASY TOUCH FLIPLOCK SAFETY INSULIN SYRINGE 1ML/30GX5/16" 175		EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	176	EASY TOUCH LANCETS 30G/TWIST	146
EASY TOUCH INSULIN SYRINGE BARRELS LUER LOCK/1ML MISC 146					
EASY TOUCH INSULIN SYRINGE/0.3ML/30G X 5/16" ...	175				

EASY TOUCH LANCETS 32G/PRESSURE ACTIVATED ..	146	EASY TOUCH SAFETY LANCETS26G/PRESSURE ACTIVATED	147	EDURANT	83
EASY TOUCH LANCETS 32G/PULL- TOP	146	EASY TOUCH SAFETY LANCETS28G/BUTTON ACTIVATED	147	efavirenz CAPS	83
EASY TOUCH LANCETS 32G/TWIST	146	EASY TOUCH SAFETY LANCETS28G/PRESSURE ACTIVATED	147	efavirenz TABS	83
EASY TOUCH LANCETS 33G/TWIST	147	EASY TOUCH SAFETY PEN NEEDLES/29G X 5MM	177	efavirenz-emtricitabine-tenofovir disoproxil fumarate	83
EASY TOUCH LANCING DEVICE/EJECTOR MISC	147	EASY TOUCH SAFETY PEN NEEDLES/29G X 8MM	177	efavirenz-lamivudine-tenofovir disoproxil fumarate	83
EASY TOUCH PEN NEEDLE 30G X 5/16"	176	EASY TOUCH SAFETY PEN NEEDLES/30G X 5/16"	177	EFFEXOR XR CP24 150 MG (venlafaxine hcl)	42
EASY TOUCH PEN NEEDLE/30G X 3/16"	176	EASY TOUCH SHEATHLOCK SAFETY INSULIN SYRINGE 1ML/29GX1/2"	177	EFFEXOR XR CP24 37.5 MG, 75 MG (venlafaxine hcl)	42
EASY TOUCH PEN NEEDLES 29GX1/2"	176	EASY TOUCH SHEATHLOCK SAFETY INSULIN SYRINGE 1ML/30GX5/16"	177	EFFIENT (prasugrel hcl)	133
EASY TOUCH PEN NEEDLES 31GX1/4"	176	EASY TOUCH SAFETY SYRINGE 1ML/30GX1/2"	177	EFUDEX CREA (fluorouracil (topical))	104
EASY TOUCH PEN NEEDLES 31GX5/16"	176	EASY TOUCH SAFETY SYRINGE 1ML/30GX1/2"	177	ELAHERE	68
EASY TOUCH PEN NEEDLES 32GX1/4"	176	EASMAX TEST STRIPS STRP	113	ELAPRASE	121
EASY TOUCH PEN NEEDLES 32GX3/16"	176	EBGLYSS	110	ELCYS	236
EASY TOUCH PEN NEEDLES 32GX5/32"	177	EC-NAPROSYN TBEC (naproxen) 11	110	electrolyte-148	219
EASY TOUCH PEN NEEDLES/31G X 3/16"	177	econazole nitrate CREA	102	electrolyte-a	219
EASY TOUCH SAFETY LANCETS21G/PRESSURE ACTIVATED	147	edaravone SOLN	230	ELELYSO	133
EASY TOUCH SAFETY LANCETS23G/PRESSURE ACTIVATED	147	EDARBI	59	ELEPSIA XR TB24	35
EASY TOUCH SAFETY LANCETS26G/BUTTON ACTIVATED	147	EDARBYCLOR	60	ELESTRIN GEL	124
EASY TOUCH SAFETY LANCETS28G/BUTTON ACTIVATED	147	EDECIN (ethacrynic acid)	117	eletriptan hydrobromide	217
EASY TOUCH SAFETY LANCETS28G/PRESSURE ACTIVATED	147	EDETATE CALCIUM DISODIUM SOLN	51	ELEVIDYS 10.0-10.4 KG	231
EASY TOUCH SAFETY LANCETS28G/PRESSURE ACTIVATED	147	EDLUAR SUBL	137	ELEVIDYS 10.5-11.4 KG	231
				ELEVIDYS 11.5-12.4 KG	231
				ELEVIDYS 12.5-13.4 KG	231
				ELEVIDYS 13.5-14.4 KG	231
				ELEVIDYS 14.5-15.4 KG	231
				ELEVIDYS 15.5-16.4 KG	231
				ELEVIDYS 16.5-17.4 KG	231
				ELEVIDYS 17.5-18.4 KG	231

ELEVIDYS 18.5-19.4 KG	231	ELEVIDYS 48.5-49.4 KG	233	ELLEENCE SOLN	71
ELEVIDYS 19.5-20.4 KG	231	ELEVIDYS 49.5-50.4 KG	233	ELMIRON CAPS	129
ELEVIDYS 20.5-21.4 KG	231	ELEVIDYS 50.5-51.4 KG	233	ELOCTATE	130
ELEVIDYS 21.5-22.4 KG	231	ELEVIDYS 51.5-52.4 KG	233	ELREXFIO	68
ELEVIDYS 22.5-23.4 KG	231	ELEVIDYS 52.5-53.4 KG	233	ELYXYB	217
ELEVIDYS 23.5-24.4 KG	231	ELEVIDYS 53.5-54.4 KG	233	ELZONRIS	76
ELEVIDYS 24.5-25.4 KG	231	ELEVIDYS 54.5-55.4 KG	233	EMBRACE LANCETS ULTRA THIN 30G	147
ELEVIDYS 25.5-26.4 KG	231	ELEVIDYS 55.5-56.4 KG	233	EMBRACE LANCING DEVICE WITH EJECTOR MISC	147
ELEVIDYS 26.5-27.4 KG	231	ELEVIDYS 56.5-57.4 KG	233	EMBRACE PEN NEEDLES/29G X 12MM	177
ELEVIDYS 27.5-28.4 KG	231	ELEVIDYS 57.5-58.4 KG	233	EMBRACE PEN NEEDLES/30G X 5MM	177
ELEVIDYS 28.5-29.4 KG	232	ELEVIDYS 58.5-59.4 KG	233	EMBRACE PEN NEEDLES/30G X 8MM	177
ELEVIDYS 29.5-30.4 KG	232	ELEVIDYS 59.5-60.4 KG	233	EMBRACE PEN NEEDLES/31G X 5MM	177
ELEVIDYS 30.5-31.4 KG	232	ELEVIDYS 60.5-61.4 KG	233	EMBRACE PEN NEEDLES/31G X 6MM	177
ELEVIDYS 31.5-32.4 KG	232	ELEVIDYS 61.5-62.4 KG	233	EMBRACE PEN NEEDLES/32G X 4MM	177
ELEVIDYS 32.5-33.4 KG	232	ELEVIDYS 62.5-63.4 KG	233	EMBRACE PRESSURE ACTIVATED SAFETY LANCET/21G	147
ELEVIDYS 33.5-34.4 KG	232	ELEVIDYS 63.5-64.4 KG	233	EMBRACE PRESSURE ACTIVATED SAFETY LANCET/28G	147
ELEVIDYS 34.5-35.4 KG	232	ELEVIDYS 64.5-65.4 KG	233	EMEND CAPS 80 MG (aprepitant)	53
ELEVIDYS 35.5-36.4 KG	232	ELEVIDYS 65.5-66.4 KG	233	EMEND SOLR (fosaprepitant dimeglumine)	53
ELEVIDYS 36.5-37.4 KG	232	ELEVIDYS 66.5-67.4 KG	233	EMEND SUSR	53
ELEVIDYS 37.5-38.4 KG	232	ELEVIDYS 67.5-68.4 KG	233	EMEND TRIPACK CAPS (aprepitant)	53
ELEVIDYS 38.5-39.4 KG	232	ELEVIDYS 68.5-69.4 KG	234	EMERPHED SOLN IV	265
ELEVIDYS 39.5-40.4 KG	232	ELEVIDYS 69.5 KG PLUS	234	EMERPHED SOSY IV	265
ELEVIDYS 40.5-41.4 KG	232	ELFABRIO	121		
ELEVIDYS 41.5-42.4 KG	232	ELIDEL (pimecrolimus)	111		
ELEVIDYS 42.5-43.4 KG	232	ELIGARD SC	70		
ELEVIDYS 43.5-44.4 KG	232	ELIQUIS STARTER PACK TBPK	31		
ELEVIDYS 44.5-45.4 KG	232	ELIQUIS TABS 2.5 MG	31		
ELEVIDYS 45.5-46.4 KG	232	ELIQUIS TABS 5 MG	31		
ELEVIDYS 46.5-47.4 KG	232	ELITEK	76		
ELEVIDYS 47.5-48.4 KG	232	ELLA	99		

EMFLAZA SUSP (deflazacort) ... 100	ENGERIX-B SUSP 20 MCG/ML . 261	EPCLUSA PACK 37.5 MG-150 MG 86
EMFLAZA TABS (deflazacort) ... 100	ENGERIX-B SUSY 261	EPCLUSA PACK 50 MG-200 MG . 86
EMGALITY SOAJ 216	ENHERTU 68	EPCLUSA TABS 100 MG-400 MG 86
EMGALITY SOSY 100 MG/ML .. 216	ENJAYMO 131	EPCLUSA TABS 50 MG-200 MG . 86
EMGALITY SOSY 120 MG/ML .. 216	enoxaparin sodium SOLN IJ 300 MG/3ML 32	ephedrine sulfate (pressors) SOLN IV 265
EMPAVELI 131	enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML 32	EPHEDRINE SULFATE SOLN IV 265
EMPLICITI 68	enoxaparin sodium SOSY 30 MG/0.3ML 32	EPIDIOLEX 35
EMSAM 40	enoxaparin sodium SOSY 40 MG/0.4ML 32	EPIFOAM FOAM 108
emtricitabine CAPS 84	enoxaparin sodium SOSY 60 MG/0.6ML 32	epinastine hcl (ophth) 242
emtricitabine-tenofovir disoproxil fumarate 84	enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML 32	epinephrine (anaphylaxis) SOAJ . 264
EMTRIVA CAPS (emtricitabine) ... 84	ENSPRYNG 222	epinephrine (anaphylaxis) SOLN IJ 30 MG/30ML 264
EMTRIVA SOLN 84	ENSTILAR FOAM 108	EPINEPHRINE SOLN IJ 1 MG/ML 265
EMVERM CHEW 21	entacapone 77	EPINEPHRINE SOSY IV 1 MG/10ML 265
enalapril maleate & hydrochlorothiazide 60	entecavir TABS 86	EPIPEN 2-PAK SOAJ (epinephrine (anaphylaxis)) 264
ENALAPRIL MALEATE 96	ENTEREG (alvimopan) 128	EPIPEN-JR 2-PAK SOAJ (epinephrine (anaphylaxis)) 264
enalapril maleate SOLN 58	ENTRESTO CPSP 92	EPIVIR HBV TABS (lamivudine (hbv)) 86
enalapril maleate TABS 10 MG, 20 MG 58	ENTRESTO TABS 92	EPIVIR SOLN (lamivudine) 84
enalapril maleate TABS 2.5 MG, 5 MG 58	ENTYVIO PEN SOAJ SC 108 MG/0.68ML 126	EPIVIR TABS (lamivudine) 84
enalaprilat IV 1.25 MG/ML 58	ENTYVIO SOLR 126	EPKINLY 68
ENBRACE HR 225	ENVARUSUS XR TB24 0.75 MG . 222	eplerenone 61
ENBREL MINI SOCT 13	ENVARUSUS XR TB24 1 MG 222	EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML 134
ENBREL SOLN 13	ENVARUSUS XR TB24 4 MG 222	epoprostenol sodium 92
ENBREL SOSY 25 MG/0.5ML 13	EOHILIA SUSP 100	EPRONTIA SOLN 35
ENBREL SOSY 50 MG/ML 13	EOVIST 114	
ENBREL SURECLICK SOAJ 13	EPANED SOLN (enalapril maleate) 58	
ENDARI (glutamine (sickle cell)) 133		
ENDOMETRIN INST 264		

eptifibatide	133	ERAXIS	53	141
EPZICOM (abacavir sulfate-lamivudine)	84	ERBITUX	69	erythromycin ethylsuccinate TABS 141
EQ SPACE CHAMBER ANTI-STATIC DEVI	215	ergocalciferol CAPS	265	erythromycin lactobionate 500 MG 141
EQ SPACE CHAMBER ANTI-STATIC/LARGE MASK DEVI	214	ergocalciferol SOLN OR 8000 UNIT/ML	265	erythromycin stearate TABS 250 MG 141
EQ SPACE CHAMBER ANTI-STATIC/MEDIUM MASK DEVI	214	ergoloid mesylates TABS	252	ESBRIET CAPS (pirfenidone)
EQ SPACE CHAMBER ANTI-STATIC/SMALL MASK DEVI	214	ergotamine w/ caffeine SUPP	216	253
EQL COLOR LANCETS 21G	147	eribulin mesylate	77	ESBRIET TABS 267 MG (pirfenidone)
EQL INSULIN SYRINGE/0.3ML/29G X 1/2"	177	ERIVEDGE	69	253
EQL INSULIN SYRINGE/0.3ML/30G X 5/16"	177	ERLEADA 240 MG	70	ESBRIET TABS 801 MG (pirfenidone)
EQL INSULIN SYRINGE/0.3ML/31G X 5/16"	177	ERLEADA 60 MG	70	253
EQL INSULIN SYRINGE/0.5ML/29G X 1/2"	177	erlotinib hcl	69	escitalopram oxalate SOLN
EQL INSULIN SYRINGE/0.5ML/30G X 5/16"	177	ERMEZA SOLN OR	255	40
EQL INSULIN SYRINGE/0.5ML/31G X 5/16"	177	ERTACZO	102	escitalopram oxalate TABS 10 MG 40
EQL INSULIN SYRINGE/1ML/29G X 1/2"	178	ertapenem sodium IJ	62	escitalopram oxalate TABS 5 MG, 20 MG
EQL INSULIN SYRINGE/1ML/30G X 5/16"	178	ERYGEL GEL (erythromycin (acne aid))	102	40
EQL INSULIN SYRINGE/1ML/31G X 5/16"	178	ERYPED 200 SUSR (erythromycin ethylsuccinate)	141	ESGIC TABS (butalbital-acetaminophen-caffeine)
EQL SUPER THIN LANCETS 30G 147		ERYPED 400 SUSR (erythromycin ethylsuccinate)	141	13
EQL THIN LANCETS 26G	147	ERYTHROCIN LACTOBIONATE (erythromycin lactobionate)	141	esmolol hcl SOLN 100 MG/10ML ..
EQUETRO 100 MG	79	erythromycin (acne aid) GEL	102	.88
EQUETRO 200 MG, 300 MG	79	erythromycin (acne aid) PADS	102	esmolol hcl-sodium chloride
		erythromycin (acne aid) SOLN	102	.88
		erythromycin (ophth)	239	ESMOLOL HYDROCHLORIDE INWATER DOUBLE STRENGTH SOLN
		ERYTHROMYCIN	239	.88
		erythromycin base CPEP	141	ESMOLOL HYDROCHLORIDE INWATER SOLN
		erythromycin base TABS	141	.88
		erythromycin base TBEC	141	esomeprazole magnesium CPDR 257
		erythromycin ethylsuccinate SUSR		esomeprazole magnesium PACK 257

ESTRACE TABS (estradiol)	124	etonogestrel-ethinyl estradiol	98	SYRINGE/0.3ML/30G X 5/16"	178
estradiol & norethindrone acetate TABS	124	ETOPOPHOS	77	EXEL COMFORT POINT INSULIN SYRINGE/0.5ML/28G X 1/2"	178
ESTRADIOL	96	etoposide CAPS	77	EXEL COMFORT POINT INSULIN SYRINGE/0.5ML/29G X 1/2"	178
estradiol GEL 0.06 %	124	etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML	77	EXEL COMFORT POINT INSULIN SYRINGE/0.5ML/30G X 5/16"	178
estradiol GEL 0.25 MG/0.25GM, 0.5 MG/0.5GM, 0.75 MG/0.75GM, 1 MG/GM	124	etravirine	84	EXEL COMFORT POINT INSULIN SYRINGE/1ML/28G X 1/2"	178
estradiol GEL 1.25 MG/1.25GM	124	EUCRISA	112	EXEL COMFORT POINT INSULIN SYRINGE/1ML/29G X 1/2"	178
ESTRADIOL MICRONIZED	96	EVAMIST SOLN	124	EXEL COMFORT POINT INSULIN SYRINGE/1ML/30G X 5/16"	178
estradiol PTTW	124	EVEKEO ODT TBDP	2	EXELON (rivastigmine)	248
estradiol PTWK	124	EVEKEO TABS (amphetamine sulfate)	2	EXELON 13.3 MG/24HR (rivastigmine)	248
estradiol TABS	124	EVENITY	118	EXELON 4.6 MG/24HR, 9.5 MG/24HR (rivastigmine)	248
estradiol vaginal CREA	264	everolimus (immunosuppressant) 222	73	exemestane	70
estradiol vaginal TABS	264	everolimus TABS	73	EXFORGE (amlodipine besylate- valsartan)	60
estradiol valerate	124	everolimus TBSO	73	EXFORGE HCT 12.5 MG-10 MG-160 MG, 12.5 MG-5 MG-160 MG, 25 MG- 10 MG-160 MG, 25 MG-10 MG-320 MG (amlodipine-valsartan- hydrochlorothiazide)	60
ESTRING RING	264	EVISTA (raloxifene hcl)	120	EXFORGE HCT 25 MG-5 MG-160 MG (amlodipine-valsartan- hydrochlorothiazide)	60
ESTRIOL	96	EVKEEZA	55	EXJADE TBSO (deferasirox)	51
ESTRIOL MICRONIZED	96	EVOCLIN FOAM (clindamycin phosphate (topical))	102	EXKIVITY	69
ESTROGEL GEL (estradiol)	124	EVOMELA IV	67	EXONDYS 51	234
eszopiclone	137	EVOTAZ	84	EXPAREL	140
ethacrynate sodium	117	EVOXAC (cevimeline hcl)	224	EXSERVAN FILM	230
ethacrynic acid	117	EVRYSDI	234	EXTINA FOAM (ketoconazole	
ethambutol hcl TABS	66	EXEL COMFORT POINT INSULIN PEN NEEDLES 29G X 12MM	178		
ethosuximide CAPS	39	EXEL COMFORT POINT INSULIN PEN NEEDLES 31G X 6MM	178		
ethosuximide SOLN	39	EXEL COMFORT POINT INSULIN PEN NEEDLES 31G X 8MM	178		
ethynodiol diacet & eth estrad	97	EXEL COMFORT POINT INSULIN SYRINGE/0.3ML/29G X 1/2"	178		
etodolac CAPS	11	EXEL COMFORT POINT INSULIN			
etodolac TABS	11				
etodolac TB24	11				
etomidate	128				

(topical))	102	141	fenofibrate TABS 40 MG, 120 MG	.56
EYLEA HD SOLN	238	FARESTON (toremifene citrate)	fenofibrate TABS 48 MG, 54 MG, 145	MG, 160 MG
EYLEA SOLN	238	FARXIGA (dapagliflozin propanediol)		56
EYLEA SOSY	238		FENOGLIDE TABS (fenofibrate)	.. 56
EYSUVIS SUSP	240	FASENRA PEN SOAJ	fenoprofen calcium CAPS 400 MG	11
E-Z JECT LANCETS	147	FASENRA SOSY 10 MG/0.5ML	fenoprofen calcium TABS	.....11
E-Z JECT LANCETS 21G	147	FASENRA SOSY 30 MG/ML	FENSOLVI SC	.....120
E-Z JECT LANCETS COLOR	147	FASLODEX SOSY (fulvestrant)	fenentanyl citrate LPOP	..... 14
E-Z JECT LANCETS SUPER THIN		FC2 FEMALE CONDOM	FENTANYL CITRATE POWD	..... 14
30G	147	febuxostat	FENTANYL CITRATE SOLN IJ	
E-Z JECT LANCETS THIN 26G	147	FEIBA	(fenentanyl citrate)	.....14
EZALLOR SPRINKLE CPSP	56	felbamate SUSP	FENTANYL CITRATE SOLN IJ 50	
ezetimibe	57	felbamate TABS 400 MG	MCG/ML (fenentanyl citrate)	..... 14
ezetimibe-simvastatin	55	felbamate TABS 600 MG	fenentanyl citrate SOLN IJ 50 MCG/ML,	
E-ZJECT LANCETS MICRO-THIN		FELBATOL SUSP (felbamate)	100 MCG/2ML, 250 MCG/5ML, 500	
33G	148	FELBATOL TABS 400 MG	MCG/10ML, 1000 MCG/20ML, 2500	
EZ-LETS LANCETS 26G SUPER-		(felbamate)	MCG/50ML	.....14
SOFT	148	FELBATOL TABS 600 MG	FENTANYL CITRATE SOSY IJ	
FABHALTA	131	(felbamate)	(fenentanyl citrate)	.....14
FABRAZYME	121	FELDENE CAPS 10 MG (piroxicam)	FENTANYL CITRATE SOSY IJ 25	
famciclovir	87	11	MCG/0.5ML, 50 MCG/ML	.....14
famotidine in nacl SOLN	256	FELDENE CAPS 20 MG (piroxicam)	fenentanyl citrate SOSY IJ	..... 14
famotidine SOLN 20 MG/2ML, 40		11	fenentanyl citrate TABS 200 MCG, 400	
MG/4ML, 200 MG/20ML	256	felodipine	MCG, 600 MCG, 800 MCG	..... 15
famotidine SUSR	256	FEMARA (letrozole)	fenentanyl PT72 100 MCG/HR	..... 15
famotidine TABS 20 MG	256	FEMLYV TBDP	fenentanyl PT72 12 MCG/HR, 25	
famotidine TABS 40 MG	256	FEMRING	MCG/HR, 37.5 MCG/HR, 50	
FANAPT	79	fenofibrate CAPS	MCG/HR, 62.5 MCG/HR, 75	
FANAPT TITRATION PACK	80	fenofibrate micronized 43 MG, 130	MCG/HR, 87.5 MCG/HR	.....15
FANTASY LUBRICATED MISC	141	MG, 200 MG	FENTORA TABS (fenentanyl citrate)	.15
FANTASY		fenofibrate micronized 67 MG, 134	FERAHEME (ferumoxytol)	.....136
LUBRICATED/SPERMICIDE MISC		MG	FER-IN-SOL SOLN (ferrous sulfate)	
			136	
			FERRIPROX SOLN	.....51

FERRIPROX TABS (deferiprone) . 51	FIFTY50 SUPERIOR COMFORTINSULIN SYRINGE/0.3ML/31G X 5/16" ... 179	flecainide acetate 24
FERRIPROX TWICE-A-DAY TABS 51	FIFTY50 SUPERIOR COMFORTINSULIN SYRINGE/0.5ML/31G X 5/16" ... 179	FLECTOR PTCH EX (diclofenac epolamine) 104
FERRLECIT (sodium ferric gluconate complex in sucrose) ... 136	FIFTY50 SUPERIOR COMFORTINSULIN SYRINGE/1ML/31G X 5/16" 179	FLEET BISACODYL ENEM 139
ferrous sulfate SOLN 15 MG/ML . 136	FIFTY50 UNILET LANCETS 33G 148	FLEQSUVY SUSP (baclofen) 228
ferumoxytol 136	FILSPARI 129	FLEXBUMIN 132
fesoterodine fumarate 4 MG 259	FILSUVEZ 113	FLEXICHAMBER ADULT MASK/SMALL 215
fesoterodine fumarate 8 MG 259	finasteride 130	FLEXICHAMBER CHILD MASK/LARGE 215
FETROJA 95	FINE 30 148	FLEXICHAMBER CHILD MASK/SMALL 215
FETZIMA CP24 42	FINGERSTIX LANCETS 148	FLEXICHAMBER DEVI 215
FETZIMA TITRATION PACK C4PK 42	fingolimod hcl 250	FLOLAN (epoprostenol sodium) .. 92
FIASP FLEXTOUCH SOPN 46	FINTEPLA 35	FLOLIPID SUSP 57
FIASP PENFILL SOCT 46	FIORICET CAPS (butalbital-acetaminophen-caffeine) 13	FLOMAX (tamsulosin hcl) 130
FIASP PUMPCART SOCT 46	FIORICET/CODEINE 30 MG-40 MG-50 MG-300 MG (butalbital-acetaminophen-caffeine w/ codeine) . 18	FLONASE ALLERGY RELIEF CHILDRENS SUSP (fluticasone propionate (nasal)) 229
FIASP SOLN 46	FIRAZYR SOSY (icatibant acetate) 131	FLONASE ALLERGY RELIEF SUSP (fluticasone propionate (nasal)) .. 230
FIBRYGA 131	FIRDAPSE 65	FLOVENT DISKUS AEPB (fluticasone propionate (inhalation)) 27
FIFTY50 PEN NEEDLES 31G X3/16" (5MM) 178	FIRMAGON 70	FLOVENT HFA (fluticasone propionate hfa) 27
FIFTY50 PEN NEEDLES 31G X5/16" (8MM) 178	FIRVANQ SOLR OR (vancomycin hcl) 63	FLUAD 2024-2025 261
FIFTY50 PEN NEEDLES 31GX5MM 178	FLAGYL CAPS (metronidazole) ... 62	FLUAD QUADRIVALENT 2022-2023 261
FIFTY50 PEN NEEDLES/31GX8MM 178	FLAREX 240	FLUAD QUADRIVALENT 2023-2024 261
FIFTY50 PEN NEEDLES/32GX4MM 178	FLAVOR PACKETS PACK 115	FLUARIX 2024-2025 SUSY 261
FIFTY50 PEN NEEDLES/32GX6MM 178	flavoxate hcl 259	FLUARIX QUADRIVALENT 2022-2023 SUSY 261
FIFTY50 SAFETY SEAL LANCETS 30G 148		
FIFTY50 SAFETY SEAL LANCETS 32G 148		

FLUARIX QUADRIVALENT 2023-2024 SUSY	261	flumazenil	51	fluoxetine hcl CPDR	41
FLUBLOK 2024-2025 SOSY	261	FLUMIST NASAL VACCINE 2024-2025	261	fluoxetine hcl SOLN	41
FLUBLOK QUADRIVALENT 2022-2023	261	FLUMIST QUADRIVALENT	262	fluoxetine hcl TABS 10 MG, 20 MG	41
FLUBLOK QUADRIVALENT 2023-2024	261	flunisolide (nasal) 0.025 %	230	fluoxetine hcl TABS 60 MG	41
FLUCELVAX 2024-2025 SUSP ..	261	fluocinolone acetonide (otic)	245	FLUOXETINE HYDROCHLORIDE	
FLUCELVAX 2024-2025 SUSY ..	261	fluocinolone acetonide CREA	108	TABS (fluoxetine hcl)	41
FLUCELVAX QUADRIVALENT		fluocinolone acetonide OIL	108	fluphenazine decanoate	82
2022-2023 SUSP	261	fluocinolone acetonide OINT	108	fluphenazine hcl CONC	82
FLUCELVAX QUADRIVALENT		fluocinolone acetonide SOLN	108	fluphenazine hcl ELIX	82
2022-2023 SUSY	261	fluocinonide CREA	108	fluphenazine hcl SOLN	82
FLUCELVAX QUADRIVALENT		fluocinonide emulsified base	108	fluphenazine hcl TABS	82
2023-2024 SUSP	261	fluocinonide GEL	108	flurandrenolide LOTN	108
FLUCELVAX QUADRIVALENT		fluocinonide OINT	108	flurazepam hcl	137
2023-2024 SUSY	261	fluocinonide SOLN	108	flurbiprofen sodium	243
fluconazole in nacl 0.9 %-200		fluorescein sodium injection IV 10 % .	242	flurbiprofen TABS 100 MG	11
MG/100ML, 0.9 %-400 MG/200ML	54	FLUORESCIN		flutamide	70
fluconazole SUSR	54	SODIUM/BENOXINATE		fluticasone furoate-vilanterol	29
fluconazole TABS 150 MG	54	HYDROCHLORIDE	242	fluticasone propionate (inhalation)	
fluconazole TABS 50 MG, 100 MG,		FLUORESCITE IV 10 % (fluorescein		AEPB	27
200 MG	54	sodium injection)	243	fluticasone propionate (nasal) SUSP .	230
FLUCONAZOLE/SODIUM		FLUOR-I-STRIPS A.T. STRP	243	fluticasone propionate CREA 0.05 %	
CHLORIDE	54	fluorometholone (ophth) SUSP ...	240	108	
flucytosine	53	fluorouracil (topical) CREA 0.5 %	104	fluticasone propionate hfa	27
fludarabine phosphate SOLN	67	fluorouracil (topical) CREA 5 % ..	104	fluticasone propionate LOTN	108
fludarabine phosphate SOLR	67	fluorouracil (topical) SOLN	104	fluticasone propionate OINT	108
fludrocortisone acetate TABS	101	fluorouracil	67	fluticasone-salmeterol AEPB 100	
FLULAVAL 2024-2025 SUSY	261	fluoxetine hcl (pmdd) TABS	252	MCG/ACT-50 MCG/ACT, 250	
FLULAVAL QUADRIVALENT 2022-2023		fluoxetine hcl CAPS 10 MG	40	MCG/ACT-50 MCG/ACT, 500	
SUSY	261	fluoxetine hcl CAPS 20 MG	40	MCG/ACT-50 MCG/ACT	29
FLULAVAL QUADRIVALENT 2023-2024		fluoxetine hcl CAPS 40 MG	40	fluticasone-salmeterol AEPB 113	
SUSY	261			MCG/ACT-14 MCG/ACT, 232	

MCG/ACT-14 MCG/ACT, 55	FOCALIN TABS 2.5 MG	fosamprenavir calcium TABS .....84
MCG/ACT-14 MCG/ACT 29	(dexmethylphenidate hcl) 3	fosaprepitant dimeglumine SOLR . 53
fluticasone-salmeterol AERO 29	FOCALIN XR CP24	foscarnet sodium 6000 MG/250ML
fluvastatin sodium CAPS 57	(dexmethylphenidate hcl) 3	85
fluvastatin sodium TB24 57	FOCALIN XR CP24 15 MG	FOSCAVIR 6000 MG/250ML
fluvoxamine maleate CP24 41	(dexmethylphenidate hcl) 3	(foscarnet sodium) 85
fluvoxamine maleate TABS 100 MG .	FOCINVEZ SOLN 53	fosfomycin tromethamine 64
41	folic acid SOLN 134	fosinopril sodium &
fluvoxamine maleate TABS 25 MG	folic acid TABS 1 MG 134	hydrochlorothiazide 60
41	FOLIVANE-OB 225	fosinopril sodium 58
fluvoxamine maleate TABS 50 MG	FOLOTYN 67	fosphenytoin sodium 39
41	fomepizole 1.5 GM/1.5ML 51	FOSRENOL CHEW (lanthanum
FLUZONE 2024-2025 SUSP 262	fondaparinux sodium 10 MG/0.8ML	carbonate) 128
FLUZONE 2024-2025 SUSY 262	32	FOSRENOL PACK 128
FLUZONE HIGH-DOSE 2024-2025	fondaparinux sodium 2.5 MG/0.5ML .	FOTIVDA 73
SUSY 262	32	FRAGMIN SOLN 10000 UNIT/4ML
FLUZONE HIGH-DOSE PF 2022-	fondaparinux sodium 5 MG/0.4ML . 32	32
2023 262	fondaparinux sodium 7.5 MG/0.6ML .	FRAGMIN SOLN 95000 UNIT/3.8ML
FLUZONE HIGH-DOSE PF 2023-	32	32
2024 262	FORA LANCETS 148	FRAGMIN SOSY 10000 UNIT/ML . 32
FLUZONE QUADRIVALENT 2022-	FORA LANCING DEVICE MISC . 148	FRAGMIN SOSY 12500 UNIT/0.5ML
2023 SUSP 262	FORA LANCING	32
FLUZONE QUADRIVALENT 2022-	DEVICE/CLEARCAP MISC 148	FRAGMIN SOSY 15000 UNIT/0.6ML
2023 SUSY 262	FORANE (isoflurane) 129	32
FLUZONE QUADRIVALENT 2023-	FORFIVO XL TB24 (bupropion hcl)	FRAGMIN SOSY 18000 UNT/0.72ML
2024 SUSP 262	40	..... 32
FLUZONE QUADRIVALENT 2023-	formoterol fumarate NEBU 29	FRAGMIN SOSY 2500 UNIT/0.2ML,
2024 SUSY 262	FORTEO SOPN (teriparatide) 118	5000 UNIT/0.2ML 32
FML FORTE SUSP 240	FORTESTA GEL TD (testosterone)	FRAGMIN SOSY 7500 UNIT/0.3ML
FML LIQUIFILM SUSP	20	32
(fluorometholone (ophth)) 240	FOSAMAX PLUS D 118	FREDS PHARMACY AUTOLET
FOCALIN TABS	FOSAMAX TABS 70 MG	LANCING DEVICE MISC 148
(dexmethylphenidate hcl) 4	(alendronate sodium) 118	FREDS PHARMACY UNIFINE
FOCALIN TABS 10 MG		PENTIPS PEN NEEDLES 32GX4MM
(dexmethylphenidate hcl) 4		..... 179

FREDS PHARMACY UNIFINE PENTIPS PLUS 31GX5MM .....179	FRUZAQLA 5 MG .....68 FULPHILA .....134	gadoterate meglumine SOLN 114 gadoterate meglumine SOSY 114
FREDS PHARMACY UNIFINE PENTIPS PLUS 31GX8MM .....179	fulvestrant SOSY .....70	GALAFOLD 121
FREDS PHARMACY UNILET LANCETS SUPER THIN 30G ... 148	FUROSCIX CTKT 117 furosemide SOLN IJ 10 MG/ML ..117	galantamine hydrobromide CP24 248 galantamine hydrobromide SOLN 248
FREDS PHARMACY UNILET LANCETS ULTRA THIN 28G ....148	furosemide TABS 20 MG .....117 furosemide TABS 40 MG .....117	galantamine hydrobromide TABS 4 MG .....248
FREESTYLE CONTROL SOLUTION HIGH/LOW LIQD 148	furosemide TABS 80 MG .....117	galantamine hydrobromide TABS 8 MG, 12 MG 249
FREESTYLE LANCETS 148	FUZEON SOLR .....84	GALZIN 221
FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM .....148	FYARRO .....73 FYCOMPA SUSP .....34	GAMASTAN 245 GAMIFANT .....222
FREESTYLE LIBRE 14 DAY/SENSOR/FLASH MONITORING SYSTEM .....148	FYCOMPA TABS 34 FYLNETRA .....134	GAMMAGARD LIQUID .....245 GAMMAGARD S/D IGA LESS THAN 1MCG/ML SOLR 245
FREESTYLE LIBRE 2/READER/FLASH GLUCOSE MONITORING SYSTEM .....148	gabapentin (once-daily) TABS 300 MG .....251	GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML .....245
FREESTYLE LIBRE 2/SENSOR/FLASH GLUCOSE MONITORING SYSTEM .....148	gabapentin (once-daily) TABS 600 MG .....251	GAMMAPLEX SOLN .....245 GAMUNEX-C 245
FREESTYLE LIBRE 3/READER/GLUCOSE MONITORING SYSTEM .....148	gabapentin CAPS 100 MG .....35 gabapentin CAPS 300 MG .....35	ganciclovir sodium SOLR .....85 GANCICLOVIR SOLN .....85
FREESTYLE LIBRE 3/SENSOR/GLUCOSE MONITORING SYSTEM .....148	gabapentin CAPS 400 MG .....35 gabapentin SOLN .....35	GARDASIL 9 SUSP .....262 GARDASIL 9 SUSY .....262
FREESTYLE LIBRE/READER/FLASH MONITORING SYSTEM .....148	gabapentin TABS 600 MG, 800 MG 35 GABITRIL (tiagabine hcl) .....38	GASTROCROM (cromolyn sodium (mastocytosis)) 125 GASTROGRAFIN OR (diatrizoate meglumine & sodium) 114
FREESTYLE UNISTICK II LANCETS.....149	GABLOFEN SOLN IT (baclofen) .228 GABLOFEN SOLN IT 228	gatifloxacin (ophth) .....239 GATTEX .....128
FROVA (frovatriptan succinate) . 217 frovatriptan succinate .....217	GABLOFEN SOSY .....228 GADAVIST SOLN (gadobutrol) ..114	GAVRETO .....73 GAZYVA .....68
FRUZAQLA 1 MG .....68	GADAVIST SOSY 10 MMOL/10ML, 15 MMOL/15ML 114 gadobutrol SOLN .....114	

gefitinib	69	GILOTRIF	69	NEEDLES 31GX8MM	179
GELNIQUE GEL 10 %	259	GIMOTI SOLN NA	126	GLOBAL EASE INJECT PEN NEEDLES 32GX4MM	179
gemcitabine hcl SOLN	67	GIVLAARI	130	GLOBAL EASE INJECT PEN NEEDLES 31GX5MM	179
gemcitabine hcl SOLR	67	GLASSIA SOLN	252	GLOBAL EASY GLIDE INSULIN SYRINGE/0.3ML/31G X 15/64" ..	179
GEMCITABINE HYDROCHLORIDE SOLN (gemcitabine hcl)	67	glatiramer acetate SOSY 20 MG/ML . 250		GLOBAL EASY GLIDE INSULIN SYRINGE/0.5ML/31G X 15/64" ..	179
GEMCITABINE HYDROCHLORIDE SOLN	67	glatiramer acetate SOSY 40 MG/ML . 250		GLOBAL EASY GLIDE INSULIN SYRINGE/1ML/31G X 15/64"	179
gemfibrozil TABS	56	GLEEVEC 100 MG (imatinib mesylate)	73	GLOBAL EASY GLIDE INSULINSYRINGE/U-100/0.3ML/31G X 5/16"	179
GEMTESA	259	GLEEVEC 400 MG (imatinib mesylate)	73	GLOBAL EASY GLIDE PEN NEEDLES 32GX4MM	179
GEN7T PTCH (lidocaine)	111	GLEOLAN	113	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.3ML/29G X 1/2" .	179
GENERESS FE (norethindrone & ethinyl estradiol-fe)	97	GLEOSTINE 10 MG, 40 MG, 100 MG	67	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.3ML/30G X 1/2" .	179
GENOTROPIN CART SC	119	GLIADEL WAFER	67	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.3ML/30G X 5/16"	179
GENOTROPIN MINIQUICK PRSY 119		glimepiride 1 MG	50	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/28G X 1/2" .	179
gentamicin in saline 0.8 MG/ML-0.9 %, 1 MG/ML-0.9 %, 1.2 MG/ML-0.9 %, 1.6 MG/ML-0.9 %, 2 MG/ML-0.9 %	6	glimepiride 2 MG	50	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	179
gentamicin sulfate (ophth) SOLN	239	glimepiride 3 MG	50	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/29G X 1/2" .	179
gentamicin sulfate (topical) CREA 102		glimepiride 4 MG	50	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/28G X 1/2" .	179
gentamicin sulfate (topical) OINT	102	glipizide TABS 10 MG	50	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/29G X 1/2" .	179
gentamicin sulfate IJ	6	glipizide TABS 2.5 MG	50	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/29G X 1/2" .	179
GENTEEL BUTTERFLY TOUCH LANCETS	149	glipizide TABS 5 MG	50	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/30G X 1/2" .	179
GENVOYA	84	glipizide TB24 10 MG	50	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/29G X 1/2" .	179
GEODON (ziprasidone hcl)	79	glipizide TB24 2.5 MG	50	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/29G X 1/2" .	179
GEODON (ziprasidone mesylate) .	79	glipizide TB24 5 MG	50	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/30G X 1/2" .	179
GEODON 40 MG, 60 MG (ziprasidone hcl)	79	glipizide-metformin hcl 250 MG-2.5 MG	43	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/30G X 1/2" .	179
GILENYA (fingolimod hcl)	250	glipizide-metformin hcl 500 MG-2.5 MG, 500 MG-5 MG	43	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/30G X 1/2" .	179
		GLOBAL EASE INJECT PEN NEEDLES 29GX12MM	179	GLOBAL INJECT EASE INSULIN	
		GLOBAL EASE INJECT PEN		GLOBAL INJECT EASE INSULIN	

SYRINGE/U-100/0.5ML/30G X 5/16" .....180	GLUCAGON EMERGENCY KIT FOR LOW BLOOD SUGAR .....44	256
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/31G X 5/16" .....180	GLUCAGON HCL DIAGNOSTIC 113	GLYNASE 1.5 MG (glyburide micronized) .....50
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/28G X 1/2" 180	GLUCOCOM LANCETS 28G ....149	GLYNASE 3 MG (glyburide micronized) .....50
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/29G X 1/2" 180	GLUCOCOM LANCETS 30G ....149	GLYNASE 6 MG (glyburide micronized) .....50
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/30G X 1/2" 180	GLUCOCOM LANCETS 33G ....149	GLYRX-PF SOLN IJ .....256
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/30G X 5/16" 180	GLUCOTROL XL TB24 10 MG (glipizide) .....50	GLYRX-PF SOSY IJ 1 MG/5ML .256
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/31G X 5/16" 180	GLUCOTROL XL TB24 2.5 MG (glipizide) .....50	GLYTACTIN BETTERMILK 15 PACK.....115
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/30G X 5/16" 180	GLUCOTROL XL TB24 5 MG (glipizide) .....50	GLYTACTIN BETTERMILK DE-LITE PACK .....115
GLOBAL INJECT EASE LANCETS 28G .....149	GLUMETZA TB24 (metformin hcl) .44	GLYTACTIN BETTERMILK POWD 115
GLOBAL INJECT EASE LANCETS 30G .....149	glutamine (sickle cell) .....134	GLYTACTIN BUILD 10PE PACK .115
GLOBAL INSULIN SYRINGE/U- 100/0.3ML/30G X 1/2" .....180	glyburide micronized 1.5 MG .....50	GLYTACTIN BUILD 20/20 PACK 115
GLOBAL INSULIN SYRINGES/U- 100/0.3ML/30GX5/16" .....180	glyburide micronized 3 MG .....50	GLYTACTIN BUILD 20/20 PKU PACK .....115
GLOBAL LANCING DEVICE MISC 149	glyburide micronized 6 MG .....50	GLYTACTIN BURST PACK .....115
GLOPERBA SOLN OR .....130	glyburide TABS 1.25 MG, 2.5 MG .50	GLYTACTIN COMPLETE 10PE BAR.....115
GLOSTRIPS STRP 1 MG .....243	glyburide TABS 5 MG .....50	GLYTACTIN RESTORE 10 LIQD OR.....115
GLUCAGEN HYPOKIT .....44	glyburide-metformin 250 MG-1.25 MG .....43	GLYTACTIN RESTORE 5 PACK .115
glucagon (rdna) .....44	glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG .....43	GLYTACTIN RESTORE LITE 10 LIQD OR .....115
GLUCAGON .....113	GLYCATE TABS .....256	GLYTACTIN RESTORE LITE 10PE PACK .....115
GLUCAGON EMERGENCY KIT (glucagon (rdna)) .....44	glycine (gu irrigant) SOLN 1.5 % .129	GLYTACTIN RTD 10 LIQD OR ...115
Index 43	glycine diluent .....247	GLYTACTIN RTD 15 LIQD OR ...115
	GLYCOPYRROLATE .....96	GLYTACTIN RTD LITE 15 LIQD OR . 115
	glycopyrrolate SOLN IJ .....256	GLYTACTIN SWIRL 15 PACK ...115
	GLYCOPYRROLATE SOSY IJ 0.6 MG/3ML .....256	
	glycopyrrolate SOSY IJ .....256	
	glycopyrrolate TABS 1 MG, 2 MG	

GLYTACTIN SWIRL 15PE PACK 115	NEEDLES/31GX5/16" 181	THIN 30G 149
GLYXAMBI 43	GNP ULTICARE PEN NEEDLES/32GX 5/32" .....181	GOODSENSE LANCETS ULTRA- THIN 30G UNIVERSAL .....149
GNP CLICKFINE UNIVERSAL PEN NEEDLES 31GX1/4" .....180	GNP ULTICARE PEN NEEDLES/32GX1/4" .....181	GOODSENSE LANCING DEVICE MISC .....149
GNP CLICKFINE UNIVERSAL PEN NEEDLES 31GX5/16" 180	GNP ULTICARE PEN NEEDLES31G X 5MM .....181	GOODSENSE PEN NEEDLE/PENFINE CLASSIC/31G X 3/16" .....181
GNP INSULIN SYRINGE/0.3ML/29G X 1/2" .....180	GNP ULTIGUARD SAFEPACK/MICRO PEN NEEDLE/32GX4MM 181	GOODSENSE PEN NEEDLE/PENFINE CLASSIC/31G X 5/16" .....181
GNP INSULIN SYRINGE/0.3ML/30G X 5/16" 180	GNP ULTIGUARD SAFEPACK/MINI PEN NEEDLE/31GX5MM .....181	GOODSENSE PEN NEEDLE/PENFINE CLASSIC/32G X 1/4" .....181
GNP INSULIN SYRINGE/0.3ML/31G X 5/16" 180	GNP ULTIGUARD SAFEPACK/MINI PEN NEEDLE/32GX6MM .....181	GOODSENSE PEN NEEDLE/PENFINE CLASSIC/32G X 5/32" .....181
GNP INSULIN SYRINGE/0.5ML/28G X 1/2" .....180	GNP ULTIGUARD SAFEPACK/SHORT PEN NEEDLE/31GX8MM 181	GOODSENSE PEN NEEDLE/PENFINE CLASSIC/32G X 5/32" .....181
GNP INSULIN SYRINGE/0.5ML/29G X 1/2" .....180	GNP ULTRA COMFORT INSULIN SYRINGE/1ML/28G X 1/2" 181	GOPRELTO .....229
GNP INSULIN SYRINGE/0.5ML/30G X 5/16" 180	GOCOVRI CP24 .....78	GRALISE TABS (gabapentin (once- daily)) 251
GNP INSULIN SYRINGE/0.5ML/31G X 5/16" 180	GOJJI LANCING DEVICE/CLEAR CAP MISC 149	GRALISE TABS 300 MG, 450 MG 251
GNP INSULIN SYRINGE/1ML/29G X 1/2" .....181	GOJJI STERILE LANCETS 30G 149	GRALISE TABS 600 MG, 750 MG, 900 MG .....251
GNP INSULIN SYRINGE/1ML/30G X 5/16" .....181	GOLYTELY SOLR (peg 3350-kcl-sod bicarb-sod chloride-sod sulfate) ..138	granisetron hcl SOLN IV 1 MG/ML, 4 MG/4ML .....51
GNP INSULIN SYRINGE/1ML/31G X 5/16" .....181	GOODSENSE CLICKFINE SAFETY PEN NEEDLE/31G X 3/16" .....181	granisetron hcl TABS 52
GNP INSULIN SYRINGES/1ML/28GX1/2" 181	GOODSENSE COLOR LANCETS MICRO-THIN 33G UNIVERSAL .149	GRANIX SOLN 300 MCG/ML 134
GNP LANCETS 21G .....149	GOODSENSE LANCETS MICRO- THIN 33G 149	GRANIX SOLN 480 MCG/1.6ML .134
GNP LANCETS THIN 26G 149	GOODSENSE LANCETS MICRO- THIN 33G UNIVERSAL .....149	GRANIX SOSY 300 MCG/0.5ML .134
GNP LANCING SYSTEM DEVICE MISC .....149	GOODSENSE LANCETS ULTRA- THIN 26G UNIVERSAL .....149	GRANIX SOSY 480 MCG/0.8ML .134
GNP STERILE LANCETS 33G ..149	GOODSENSE LANCETS ULTRA- THIN 26G UNIVERSAL .....149	GRASTEK SUBL .....5
GNP ULTICARE PEN	GOODSENSE LANCETS ULTRA-	griseofulvin microsize SUSP .....53
		griseofulvin microsize TABS .....53
		griseofulvin ultramicrosize .....53

guanfacine hcl (adhd)	3	HEALTH CARE LANCING DEVICE	PENTIPS PEN NEEDLES
guanfacine hcl	59	MISC	29GX12MM
GVOKE HYPOPEN 2-PACK SOAJ		HEALTHWISE INSULIN	HEALTHY ACCENTS UNIFINE
44		SYRINGE/U-100/0.3ML/30G X 5/16"	PENTIPS PEN NEEDLES 31GX5MM
		.....	.....182
GVOKE KIT SOLN	44	HEALTHWISE INSULIN	HEALTHY ACCENTS UNIFINE
GVOKE PFS SOSY 1 MG/0.2ML ..	44	SYRINGE/U-100/0.3ML/31G X 5/16"	PENTIPS PEN NEEDLES 31GX6MM
		.....	.....182
GYNAZOLE-1	264	HEALTHWISE INSULIN	HEALTHY ACCENTS UNIFINE
HADLIMA PUSH TOUCH SOAJ	9	SYRINGE/U-100/0.5ML/30G X 5/16"	PENTIPS PEN NEEDLES 31GX8MM
		.....	.....182
HADLIMA SOSY	9	HEALTHWISE INSULIN	HEALTHY ACCENTS UNIFINE
HAEGARDA SOLR SC	131	SYRINGE/U-100/0.5ML/31G X 5/16"	PENTIPS PEN NEEDLES 32GX4MM
HALAVEN (eribulin mesylate)	77	.....	.....182
halcinonide CREA	108	HEALTHWISE INSULIN	HEALTHY ACCENTS UNILET
HALCION 0.25 MG (triazolam) ...	137	SYRINGE/U-100/1ML/30G X 5/16"	LANCETS SUPER THIN 30G ...
		182	150
HALDOL DECANOATE 100		HEALTHWISE INSULIN	H-E-B IN CONTROL PEN NEEDLE
(haloperidol decanoate)	81	SYRINGE/U-100/1ML/31G X 5/16"	31GX3/16"
		182	182
HALDOL DECANOATE 50		HEALTHWISE MICRON PEN	H-E-B IN CONTROL PEN NEEDLES
(haloperidol decanoate)	81	NEEDLES/32G X 5/32"	31GX5MM
		182	182
halobetasol propionate CREA	108	HEALTHWISE MINI PEN NEEDLES	H-E-B IN CONTROL PEN NEEDLES
halobetasol propionate FOAM	108	31GX6MM	31GX6MM
		182	182
halobetasol propionate OINT	108	HEALTHWISE PEN NEEDLES	H-E-B IN CONTROL PEN NEEDLES
HALOG CREA (halcinonide)	108	29GX12MM	31GX8MM
		182	182
HALOG SOLN	109	HEALTHWISE SHORT PEN	H-E-B IN CONTROL PEN
haloperidol decanoate	81	NEEDLES 31GX8MM	NEEDLES/NANO/32GX4MM
		182	183
haloperidol lactate CONC	81	HEALTHWISE SHORT PEN	H-E-B IN CONTROL
haloperidol lactate SOLN	81	NEEDLES/31G X 3/16"	UNIFINEPENTIPS PLUS 31GX1/4" .
		182	183
haloperidol TABS	81	HEALTHWISE SHORT PEN	H-E-B IN CONTROL
HARVONI PACK 33.75 MG-150 MG .		NEEDLES/31G X 5/16"	UNIFINEPENTIPS PLUS 31GX3/16"
86		.....	.....183
HARVONI PACK 45 MG-200 MG .		HEALTHWISE UNIFINE PENTIPS	H-E-B IN CONTROL
HARVONI TABS	86	PEN NEEDLES 32GX4MM	UNIFINEPENTIPS PLUS 31GX5/16"
		182	.....183
HAVRIX	262	HEALTHY ACCENTS AUTOLET	H-E-B IN CONTROL
		IMPRESSION LANCING DEVICE	UNIFINEPENTIPS PLUS 31GX5MM
		MISC .....	.....183
		150	
		HEALTHY ACCENTS UNIFINE	

H-E-B IN CONTROL UNIFINEPENTIPS PLUS 32GX4MM.....183	20000 UNIT/ML 32 HEPARIN SODIUM SOLN IJ 5000 UNIT/ML 33	HM ULTICARE MINI PEN NEEDLES/31G X 5MM (3/16") .. 183 HORIZANT .....252
H-E-B IN CONTROL UNIFINEPENTIPS PLUS 32GX5/32" .....183	HEPARIN SODIUM SOSY IJ 5000 UNIT/0.5ML 33 HEPARIN SODIUM/D5W 32	HULIO AJKT .....9 HULIO PSKT 20 MG/0.4ML .....9 HULIO PSKT 40 MG/0.8ML .....9
H-E-B IN CONTROL UNIFINEPENTIPS PLUS 33GX5/32" .....183	HEPARIN SODIUM/DEXTROSE 25000 UNIT/500ML-5 %, 5 %-25000 UNIT/250ML 32	HUMALOG JUNIOR KWIKPEN SOPN 46 HUMALOG KWIKPEN SOPN 100 UNIT/ML 46
H-E-B INCONTROL ADVANCEDLANCING DEVICE MISC 150	HEPARIN SODIUM/NACL 0.45% SOLN IV 0.45 %-12500 UNIT/250ML, 0.45 %-25000 UNIT/250ML 32	HUMALOG KWIKPEN SOPN 200 UNIT/ML 46 HUMALOG MIX 50/50 KWIKPEN SUPN 46
H-E-B INCONTROL LANCETS MICRO THIN 33G .....150	HEPARIN SODIUM/SODIUM CHLORIDE 0.9% SOLN IJ (heparin (porcine) in sodium chloride) 32	HUMALOG MIX 75/25 KWIKPEN SUPN 46 HUMALOG MIX 75/25 SUSP .....46
H-E-B INCONTROL LANCETS SUPER THIN 30G 150	HEPARIN SODIUM/SODIUM CHLORIDE SOLN IV 0.45 %-25000 UNIT/250ML, 0.45 %-25000 UNIT/500ML 33	HUMALOG SOCT 46 HUMALOG SOLN IJ 46 HUMALOG TEMPO PEN SOPN .. 46
H-E-B INCONTROL LANCETS ULTRA THIN 28G .....150	HEPLISAV-B SOSY 262 HERCEPTIN 150 MG 69 HERCEPTIN HYLECTA 71	HUMATE-P SOLR 131 HUMATROPE CART IJ .....119 HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT 80 MG/0.8ML 9
H-E-B INCONTROL PEN NEEDLES 29GX12MM 183	HERZUMA 69 HESPAN (hetastarch (hes /0.7 or /0.75) in sodium chloride) 132	HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT ..9 HUMIRA PEN AJKT SC 40 MG/0.4ML 9 HUMIRA PEN AJKT SC 40 MG/0.8ML 9
HECTOROL SOLN (doxercalciferol) . 121	hetastarch (hes /0.7 or /0.75) in sodium chloride 132 HETLIOZ CAPS (tasimelteon) ...138 HETLIOZ LQ SUSP 138	HUMIRA PEN AJKT SC 80 MG/0.8ML 9 HUMIRA PEN-CD/UC/HS STARTER
HEMABATE SOLN (carboprost tromethamine) 245	HEXTEND .....132 HIBERIX SOLR IJ 260 HIPREX (methenamine hippurate) 64	
HEMADY TABS .....100	HIZENTRA SOLN 245 HIZENTRA SOSY 245	
HEMANGEOL SOLN OR 89		
HEMGENIX 131		
HEMLIBRA .....131		
HEMOFIL M SOLR 250 UNIT, 500 UNIT, 1000 UNIT, 1700 UNIT 131		
HEPAGAM B SOLN IJ 245		
heparin (porcine) in sodium chloride SOLN IV 0.9 %-1000 UNIT/500ML, 0.9 %-2000 UNIT/L 32		
heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/0.5ML, 5000 UNIT/ML, 10000 UNIT/ML,		

AJKT SC 80 MG/0.8ML	9	HYDROCODONE BITARTRATE CRYS	96	lipo base	109
HUMIRA PEN-PEDIATRIC UC STARTER PACK AJKT SC 80 MG/0.8ML	9	HYDROCODONE BITARTRATE POWD	96	hydrocortisone butyrate LOTN ...	109
HUMIRA PEN-PS/UV STARTER AJKT SC	9	hydrocodone bitartrate T24A	15	hydrocortisone butyrate OINT	109
HUMIRA PSKT 10 MG/0.1ML, 20 MG/0.2ML	9	hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML	18	hydrocortisone butyrate SOLN ...	109
HUMIRA PSKT 40 MG/0.4ML, 40 MG/0.8ML	9	hydrocodone-acetaminophen SOLN . 18		HYDROCORTISONE MICRONIZED POWD XX	96
HUMULIN 70/30 KWIKPEN SUPN 46		hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG	18	HYDROCORTISONE POWD XX ..	96
HUMULIN 70/30 SUSP	46	hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	18	hydrocortisone sod succinate 100 MG	100
HUMULIN N KWIKPEN SUPN	46	hydrocodone-ibuprofen 10 MG-200 MG	18	hydrocortisone TABS	100
HUMULIN N SUSP	46	hydrocodone-ibuprofen 5 MG-200 MG, 7.5 MG-200 MG	18	hydrocortisone valerate CREA ...	109
HUMULIN R SOLN IJ	46	hydrocortisone (intrarectal)	21	hydrocortisone valerate OINT	109
HUMULIN R U-500 (CONCENTRATED) SOLN SC	46	hydrocortisone (rectal) EX 1 %	21	hydrocortisone w/acetic acid	245
HUMULIN R U-500 KWIKPEN SOPN SC	46	hydrocortisone (rectal) EX 2.5 % ..	21	hydromorphone hcl LIQD	15
HYCAMTIN CAPS	77	hydrocortisone (topical) CREA 1 %, 2.5 %	109	HYDROMORPHONE HCL POWD	15
HYCAMTIN SOLR (topotecan hcl) 77		hydrocortisone (topical) LOTN 2.5 % .	109	hydromorphone hcl SOLN IJ	15
hydralazine hcl SOLN	61	hydrocortisone (topical) OINT 1 %, 2.5 %	109	HYDROMORPHONE HCL SUPP .	15
hydralazine hcl TABS 10 MG	61	HYDROCORTISONE ACETATE MICRONIZED POWD XX	96	hydromorphone hcl TABS	15
hydralazine hcl TABS 100 MG	61	HYDROCORTISONE ACETATE POWD XX	96	hydromorphone hcl TB24 12 MG ..	15
hydralazine hcl TABS 25 MG	61	hydrocortisone butyrate CREA ...	109	hydromorphone hcl TB24 8 MG, 16 MG, 32 MG	15
hydralazine hcl TABS 50 MG	61	hydrocortisone butyrate hydrophilic		HYDROMORPHONE HYDROCHLORIDE SOLN IJ (hydromorphone hcl)	15
HYDREA (hydroxyurea)	76			HYDROMORPHONE HYDROCHLORIDE SOLN IJ 1 MG/ML, 2 MG/ML, 4 MG/ML, 10 MG/ML	15
hydrochlorothiazide CAPS	118			hydroxocobalamin acetate SOLN	134
hydrochlorothiazide TABS 12.5 MG 118				hydroxychloroquine sulfate	65
hydrochlorothiazide TABS 25 MG, 50 MG	118			hydroxyurea	76
hydrocodone bitartrate CP12	15			HYDROXYUREA	96
				HYDROXYZINE HCL	96

hydroxyzine hcl SOLN 25 MG/ML, 50 MG/ML	23	ULCERATIVE COLITIS STARTER PACK SOAJ	9	ICLUSIG 10 MG, 30 MG, 45 MG ..	73
hydroxyzine hcl SYRP	23	HYRIMOZ PEDIATRIC CROHNSDISEASE STARTER PACK SOSY	9	ICLUSIG 15 MG	73
hydroxyzine hcl TABS	23	HYRIMOZ PEDIATRIC CROHN'SDISEASE STARTER PACK SOSY	9	icosapent ethyl 0.5 GM	55
hydroxyzine pamoate CAPS 100 MG 23		HYRIMOZ PLAQUE PSORIASIS/UEVITIS STARTER PACK SOAJ	9	icosapent ethyl 1 GM	55
hydroxyzine pamoate CAPS 25 MG, 50 MG	23	HYRIMOZ SOAJ 40 MG/0.4ML	10	IDACIO (2 PEN) AJKT	10
HYFTOR	111	HYRIMOZ SOAJ 80 MG/0.8ML	10	IDACIO (2 SYRINGE) PSKT	10
HYLENEX	221	HYRIMOZ SOSY 10 MG/0.1 ML	10	IDACIO STARTER PACKAGE FOR CROHNS DISEASE AJKT	10
hyoscyamine sulfate ELIX	256	HYRIMOZ SOSY 20 MG/0.2ML	10	IDACIO STARTER PACKAGE FOR PLAQUE PSORIASIS AJKT	10
hyoscyamine sulfate SUBL 0.125 MG	256	HYRIMOZ SOSY 40 MG/0.4ML	10	IDAMYCIN PFS (idarubicin hcl) ...	71
hyoscyamine sulfate TABS 0.125 MG	256	HYSINGLA ER T24A	15	idarubicin hcl	71
hyoscyamine sulfate TB12 0.375 MG 256		HYZAAR (losartan potassium & hydrochlorothiazide)	60	IDELVION	131
hyoscyamine sulfate TBDP 0.125 MG	256	ibandronate sodium SOLN	118	IDHIFA	73
HYPERHEP B SOLN IM	245	ibandronate sodium TABS	118	IDOSE TR IMPL	244
HYPERHEP B SOSY 110 UNIT/0.5ML	245	IBRANCE CAPS	73	IFEX SOLR (ifosfamide)	67
HYPERRAB SOLN	245	IBRANCE TABS	73	IFEX SOLR	67
HYPERRHO S/D MINI-DOSE SOSY IM	245	IBSRELA	127	ifosfamide SOLN	67
HYPERRHO S/D SOSY IM 1500 UNIT	245	ibuprofen lysine	11	ifosfamide SOLR	67
HYPERSAL NEBU (sodium chloride (inhalant))	101	IBUPROFEN POWD	11	IFOSFAMIDE SOLR	67
HYPERTET SOSY	245	ibuprofen SUSP 100 MG/5ML	12	IGALMI FILM	137
HYPOLANCE AST LANCING KIT KIT	150	ibuprofen TABS 400 MG, 600 MG, 800 MG	12	IHEEZO	240
HYQVIA	246	ibuprofen-famotidine	11	ILARIS SOLN	11
HYRIMOZ CROHN'S DISEASE AND		ibutilide fumarate	24	ILEVRO	243
		icatibant acetate SOLN	131	ILLUCCIX CONFIGURATION A KIT .	113
		icatibant acetate SOSY	131	ILLUCCIX CONFIGURATION B KIT .	113
				ILUMYA	105
				ILUVIEN	240
				imatinib mesylate 100 MG	73

imatinib mesylate 400 MG 73	INCONTROL ULTICARE MINI PEN NEEDLES/31G X 6MM 183	INJECTAFER 136
IMBRUVICA CAPS 140 MG 73	INCONTROL ULTICARE MINI PEN NEEDLES/31GX8MM .....183	INLYTA 68
IMBRUVICA CAPS 70 MG 73	INCONTROL ULTICARE MINI PEN NEEDLES/32G X 4MM 183	INNOPRAN XL 89
IMBRUVICA SUSP 73	INCRELEX 120	INPEFA 92
IMBRUVICA TABS 73	INCRUSE ELLIPTA 25	INQOVI 71
IMCIVREE 2	indapamide TABS 1.25 MG, 2.5 MG . 118	INREBIC 73
IMDELLTRA 68	INDERAL LA CP24 120 MG (propranolol hcl) 89	INSPRA (eplerenone) 61
IMFINZI 68	INDERAL LA CP24 60 MG, 80 MG, 160 MG (propranolol hcl) 89	INSULIN ASPART FLEXPEN SOPN . 47
imipenem-cilastatin IV 62	INDERAL XL 89	INSULIN ASPART PENFILL SOCT 47
imipramine hcl TABS 42	INDOCIN SUSP (indomethacin) ... 12	INSULIN ASPART PROTAMINE/INSULIN ASPART FLEXPEN SUPN 47
imipramine pamoate 42	INDOMETHACIN 12	INSULIN ASPART PROTAMINE/INSULIN ASPART SUSP 47
imiquimod 3.75 % 110	indomethacin CAPS 25 MG, 50 MG 12	INSULIN ASPART SOLN IJ 47
imiquimod 5 % 110	indomethacin CPCR 12	INSULIN DEGLUDEC FLEXTOUCH SOPN 100 UNIT/ML 47
IMITREX 20 MG/ACT (sumatriptan) 217	indomethacin SUPP 12	INSULIN DEGLUDEC FLEXTOUCH SOPN 200 UNIT/ML 47
IMITREX 5 MG/ACT (sumatriptan) 217	indomethacin SUSP 12	INSULIN DEGLUDEC SOLN 47
IMITREX STATDOSE REFILL SOCT (sumatriptan succinate) 217	INFANRIX 255	INSULIN GLARGINE MAX SOLOSTAR SOPN 47
IMITREX STATDOSE SYSTEM SOAJ (sumatriptan succinate) ... 217	INFED 136	INSULIN GLARGINE SOLN 47
IMITREX TABS (sumatriptan succinate) 217	INFLECTRA SOLR 126	INSULIN GLARGINE SOLOSTAR SOPN 100 UNIT/ML 47
IMJUDO 68	INFLIXIMAB 126	INSULIN GLARGINE SOLOSTAR SOPN 300 UNIT/ML 47
IMLYGIC 77	INFUMORPH 200 (morphine sulfate for continuous microinfusion) 15	INSULIN GLARGINE-YFGN SOLN 47
IMMPHENTIV SOLN IV 265	INFUMORPH 500 (morphine sulfate for continuous microinfusion) 15	INSULIN GLARGINE-YFGN SOPN 47
IMODIUM A-D CAPS (loperamide hcl) 50	INGREZZA CAPS 250	
IMOVAX RABIES (H.D.C.V.) SUSR 262	INGREZZA CPPK 250	
IMURAN TABS (azathioprine) ... 222	INGREZZA CPSP 250	
INBRIJA CAPS 78		

INSULIN LISPRO JUNIOR KWIKPEN SOPN .....47	INSULIN SYRINGE/NEEDLE 1ML/29G X 1/2" .....184	INSULIN SYRINGES/U- 100/1ML/30GX1/2" .....185
INSULIN LISPRO KWIKPEN SOPN . 47	INSULIN SYRINGE/NEEDLE 1ML/30G X 5/16" .....184	INSULIN SYRINGES/U- 100/1ML/31GX5/16" 185
INSULIN LISPRO PROTAMINE/INSULIN LISPRO KWIKPEN SUPN .....47	INSULIN SYRINGE/NEEDLE 1ML/31G X 5/16" .....184	INSUPEN 29G X 12MM 185 INSUPEN 31G X 5MM .....185
INSULIN LISPRO SOLN IJ .....47	INSULIN SYRINGE/U- 100/0.3ML/29G X 1/2" 184	INSUPEN 31G X 8MM .....185 INSUPEN 32G X 4MM .....185
INSULIN SYRINGE 1ML/31G X1/4" . 183	INSULIN SYRINGE/U- 100/0.5ML/29G X 1/2" 184	INSUPEN 33GX4MM 185
INSULIN SYRINGE/0.3ML/30G X 5/16" .....183	INSULIN SYRINGE/U-100/1ML/29G X 1/2" .....184	INSUPEN PEN NEEDLES 32G X4MM 186
INSULIN SYRINGE/0.3ML/31G X 5/16" .....183	INSULIN SYRINGE/U-100/1ML/31G X 5/16" 184	INSUPEN SENSITIVE 32GX6MM 186
INSULIN SYRINGE/0.5ML/27G X 1/2" .....183	INSULIN SYRINGES 0.3ML/31G X 1/4" .....184	INSUPEN SENSITIVE 32GX8MM 186
INSULIN SYRINGE/0.5ML/28G X 1/2" .....183	INSULIN SYRINGES 0.5ML/31G X 1/4" .....184	INSUPEN ULTRAFIN 30GX8MM 186
INSULIN SYRINGE/0.5ML/30G X 5/16" .....183	INSULIN SYRINGES/U- 100/0.5ML/27GX1/2" .....184	INSUPEN ULTRAFIN 31GX6MM 186
INSULIN SYRINGE/0.5ML/31G X 5/16" .....183	INSULIN SYRINGES/U- 100/0.5ML/28GX1/2" .....184	INSUPEN ULTRAFIN 31GX8MM 186
INSULIN SYRINGE/1ML/28G X 1/2" 184	INSULIN SYRINGES/U- 100/0.5ML/29GX1/2" .....184	INTELENCE (etravirine) .....84 INTELENCE 25 MG .....84
INSULIN SYRINGE/1ML/30G X 5/16" .....184	INSULIN SYRINGES/U- 100/0.5ML/29GX1/2" .....185	INTUNIV (guanfacine hcl (adhd)) ..3
INSULIN SYRINGE/NEEDLE 0.3ML/30G X 5/16" .....184	INSULIN SYRINGES/U- 100/0.5ML/30GX5/16" 185	INVANZ IJ (ertapenem sodium) ... 62
INSULIN SYRINGE/NEEDLE 0.3ML/31G X 5/16" .....184	INSULIN SYRINGES/U- 100/0.5ML/31GX5/16" 185	INVEGA 1.5 MG (paliperidone) ....80
INSULIN SYRINGE/NEEDLE 0.5ML/29G X 1/2" 184	INSULIN SYRINGES/U- 100/1ML/27GX1/2" .....185	INVEGA 3 MG, 9 MG (paliperidone) . 80
INSULIN SYRINGE/NEEDLE 0.5ML/30G X 5/16" .....184	INSULIN SYRINGES/U- 100/1ML/28GX1/2" .....185	INVEGA 6 MG (paliperidone) .....80
INSULIN SYRINGE/NEEDLE 0.5ML/31G X 5/16" .....184	INSULIN SYRINGES/U- 100/1ML/29GX1/2" .....185	INVEGA HAFYERA 1092 MG/3.5ML . 80
		INVEGA HAFYERA 1560 MG/5ML 80
		INVEGA SUSTENNA 117

MG/0.75ML	80	IRESSA (gefitinib)	69	isosorbide mononitrate TB24 60 MG .	22
INVEGA SUSTENNA 156 MG/ML .80		irinotecan hcl	77	isotretinoin	102
INVEGA SUSTENNA 234 MG/1.5ML	80	iron w/ vitamins TABS	225	ISOVUE-200 IV (iopamidol)	114
INVEGA SUSTENNA 39 MG/0.25ML	80	irrigation solutions, physiological	223	ISOVUE-250 IV (iopamidol)	114
INVEGA SUSTENNA 78 MG/0.5ML	80	ISENTRESS CHEW	84	ISOVUE-300 IV (iopamidol)	114
INVEGA TRINZA 273 MG/0.88ML,		ISENTRESS HD TABS	84	ISOVUE-370 IV (iopamidol)	114
410 MG/1.32ML	80	ISENTRESS PACK	84	ISOVUE-M 200 IJ (iopamidol)	114
INVEGA TRINZA 546 MG/1.75ML	80	ISENTRESS TABS	84	ISOVUE-M 300 IJ (iopamidol)	114
INVEGA TRINZA 819 MG/2.63ML	80	isoflurane	129	isradipine CAPS	90
INVELTYS SUSP	240	ISOLYTE-P/DEXTROSE 5%	219	ISTALOL SOLN (timolol maleate	
INVOKAMET TABS 1000 MG-150		ISOLYTE-S	219	(ophth))	237
MG, 500 MG-50 MG	43	ISOLYTE-S PH 7.4	219	ISTODAX SOLR (romidepsin)	73
INVOKAMET TABS 1000 MG-50		isoniazid SOLN	66	ISTURISA 1 MG	118
MG, 500 MG-150 MG	43	isoniazid SYRP	66	ISTURISA 10 MG	118
INVOKAMET XR TB24 1000 MG-150		isoniazid TABS	66	ISTURISA 5 MG	118
MG, 1000 MG-50 MG	43	isoproterenol hcl	30	itraconazole CAPS	54
INVOKAMET XR TB24 500 MG-150		ISORDIL TITRADOSE TABS 40 MG		itraconazole SOLN	54
MG, 500 MG-50 MG	43	(isosorbide dinitrate)	22	IV STABILIZER FOR LUMOXITI	247
INVOKANA 100 MG	49	ISORDIL TITRADOSE TABS 5 MG		ivabradine hcl TABS	94
INVOKANA 300 MG	49	(isosorbide dinitrate)	22	ivermectin (pediculicide)	112
IONOSOL-MB/DEXTROSE 5% .	219	isosorbide dinitrate TABS 10 MG .	22	ivermectin	21
iopamidol IV	114	isosorbide dinitrate TABS 20 MG .	22	IWILFIN	76
IOPIDINE	238	isosorbide dinitrate TABS 40 MG .	22	IXCHIQ	262
IPOL INACTIVATED IPV	262	isosorbide dinitrate TABS 5 MG, 30		IXEMPRA KIT	77
ipratropium bromide (nasal)	229	MG	22	IXIARO	262
ipratropium bromide SOLN 0.02 %	25	isosorbide dinitrate-hydralazine hcl		IXINITY SOLR	131
ipratropium-albuterol SOLN	29	92		IYUZEH SOLN	244
IQIRVO	128	isosorbide mononitrate TABS	22	IZERVAY	239
irbesartan	59	isosorbide mononitrate TB24 120 MG		JADENU SPRINKLE PACK	
irbesartan-hydrochlorothiazide	60	.....	22	(deferasirox)	51
Index 51		isosorbide mononitrate TB24 30 MG .	22		

JADENU TABS (deferasirox)	51	JORNAY PM CP24	4	KCL 0.3%/D5W/NACL 0.9% (potassium chloride in dextrose & sodium chloride)	219
JAKAFI 10 MG, 15 MG, 20 MG, 25 MG	73	JUBLIA	102	KCL 0.3%/D5W/NACL 0.9%	219
JAKAFI 5 MG	73	JULUCA	84	KEDBUMIN	132
JALYN (dutasteride-tamsulosin hcl) . 130		JUXTAPID 20 MG	57	KEDRAB SOLN	245
JANSSEN COVID-19 VACCINE	262	JUXTAPID 5 MG, 10 MG, 20 MG, 30 MG	57	KEMOPLAT SOLN	67
JANUMET TABS	43	JYLAMVO SOLN	67	KENALOG AERS (triamcinolone acetonide (topical))	109
JANUMET XR TB24 1000 MG-100 MG, 500 MG-50 MG	43	JYNARQUE TABS	123	KENALOG-10 SUSP	100
JANUMET XR TB24 1000 MG-50 MG	43	JYNARQUE TBPk	123	KENALOG-40 SUSP (triamcinolone acetonide)	100
JANUVIA 25 MG	44	JYNNEOS	262	KENALOG-80 SUSP	100
JANUVIA 50 MG, 100 MG	44	KADCYLA	68	KENGREAL	133
JARDIANCE 10 MG	49	KALBITOR	132	KEPIVANCE 5.16 MG	76
JARDIANCE 25 MG	49	KALETRA SOLN (lopinavir-ritonavir) . 84		KEPPRA SOLN OR 100 MG/ML (levetiracetam)	35
JATENZO CAPS 158 MG, 198 MG 20		KALETRA TABS (lopinavir-ritonavir) . 84		KEPPRA TABS 1000 MG (levetiracetam)	35
JATENZO CAPS 237 MG	20	KALYDECO PACK 25 MG, 50 MG, 75 MG	253	KEPPRA TABS 250 MG (levetiracetam)	35
JAYPIRCA 100 MG	73	KALYDECO PACK 5.8 MG, 13.4 MG 253		KEPPRA TABS 500 MG, 750 MG (levetiracetam)	35
JAYPIRCA 50 MG	73	KALYDECO TABS	253	KEPPRA XR TB24 500 MG (levetiracetam)	35
JELMYTO SOLR UL	71	KANJINTI	69	KEPPRA XR TB24 750 MG (levetiracetam)	35
JEMPERLI	68	KANUMA	121	KERENDIA	122
JENTADUETO TABS	43	KAPSPARGO SPRINKLE CS24 ..	88	KERYDIN (tavaborole)	102
JENTADUETO XR TB24	43	KAPVAY TB12 (clonidine hcl (adhd)) 3		KESIMPTA	250
JESDUVROQ 1 MG, 2 MG, 4 MG 134		KATERZIA	90	KETALAR SOLN IJ (ketamine hcl) 128	
JESDUVROQ 6 MG	134	KAZANO (alogliptin-metformin hcl) 43		KETAMINE HCL	96
JESDUVROQ 8 MG	134	KCENTRA	131	ketamine hcl SOLN IJ	128
JEVTANA	77	KCL 0.15%/D5W/NACL 0.225% (potassium chloride in dextrose & sodium chloride)	219		
JIVI	131				
JOENJA	221				

ketoconazole (topical) CREA .....103	KIMONO MICRO THIN MISC 141	KLONOPIN TABS 0.5 MG, 1 MG (clonazepam) 34
ketoconazole (topical) FOAM .....103	KIMONO MICRO THIN PLUS SPERMICIDE LUBRICATED MISC 141	KLONOPIN TABS 1 MG (clonazepam) 34
ketoconazole (topical) SHAM 2 % 103	KIMONO PLUS SPERMICIDE LUBRICATED MISC .....141	KLONOPIN TABS 2 MG (clonazepam) 34
ketoconazole .....54	KIMONO SENSATION LUBRICATED MISC .....141	KLOXXADO LIQD 51
KETOCONAZOLE .....97	KIMONO SENSATION PLUS SPERMICIDE LUBRICATED MISC 142	KMART VALU PLUS INSULIN SYRINGE/0.5ML/29G .....186
KETONE STRP .....114	KIMONO SPECIAL DEVI .....142	KMART VALU PLUS INSULIN SYRINGE/0.5ML/30G .....186
KETONE TEST STRIPS STRP .. 114	KIMYRSA .....63	KMART VALU PLUS INSULIN SYRINGE/1ML/30G .....186
ketoprofen CAPS 25 MG .....12	KINERET SOSY 10	KOATE SOLR 131
ketoprofen CP24 12	KINNEY LANCETS 150	KOGENATE FS KIT 131
ketorolac tromethamine (ophth) 0.4 %243	KINNEY THIN LANCETS .....150	KOMBIGLYZE XR 1000 MG-2.5 MG (saxagliptin-metformin hcl) 43
ketorolac tromethamine (ophth) 0.5 %243	KINRAY INSULIN SYRINGE PREFERRED PLUS/0.3ML/31G X 5/16" .....186	KOMBIGLYZE XR 1000 MG-5 MG, 500 MG-5 MG (saxagliptin-metformin hcl) 43
ketorolac tromethamine SOLN IM 30 MG/ML, 60 MG/2ML 12	KINRAY INSULIN SYRINGE PREFERRED PLUS/0.5ML/31G X 5/16" .....186	KONVOMEK SUSR 258
KETOROLAC TROMETHAMINE SOLN NA 15.75 MG/SPRAY 12	KINRAY INSULIN SYRINGE PREFERRED PLUS/1ML/31G X 5/16" .....186	KORLYM (mifepristone (hyperglycemia)) 44
ketorolac tromethamine TABS .....12	KISQALI .....73	KORSUVA 224
KETOSTIX STRP .....114	KISQALI FEMARA 200 DOSE ....71	KOSELUGO 10 MG .....74
ketotifen fumarate (ophth) 0.035 % 243	KISQALI FEMARA 400 DOSE ....71	KOSELUGO 25 MG .....73
KEVEYIS (dichlorphenamide) ... 117	KISQALI FEMARA 600 DOSE ....72	KOVALTRY 131
KEVZARA SOAJ .....11	KISUNLA .....249	K-PHOS NEUTRAL (pot phosphate monobasic w/ sod phosphate dibasic & monobasic) .....220
KEVZARA SOSY .....11	KITABIS PAK NEBU (tobramycin) ..6	K-PHOS NO 2 .....129
KEYTRUDA 68	KLARON (sulfacetamide sodium (acne)) 102	K-PHOS TABS (potassium phosphate monobasic) 220
KHAPZORY 175 MG .....76		KRAZATI 74
KIMMTRAK .....68		
KIMONO COLORS DEVI .....141		
KIMONO LUBRICATED MISC ... 141		
KIMONO MAXX/LARGE FLARE MISC .....141		

KRINTAFEL	65	X8MM	187	MG/5ML, 100 MG/10ML	35
KRISTALOSE PACK	139	KROGER PEN NEEDLES 31GX1/4"	187	lacosamide TABS	35
KROGER AUTOLET LANCING DEVICE MISC	150	KROGER PEN NEEDLES/31G X1/4"	187	LACRISERT	236
KROGER HEALTHPRO TWIST LANCETS/26G	150	KROGER PEN NEEDLES/31G X3/16"	187	lactated ringer's (irrigation)	223
KROGER INSULIN SYRINGE/0.3ML/29G X 1/2"	186	KROGER PEN NEEDLES/31G X5/16"	187	lactated ringer's	219
KROGER INSULIN SYRINGE/0.3ML/30G X 5/16"	186	KROGER PEN NEEDLES/32G X5/32"	187	lactic acid (ammonium lactate) CREA	110
KROGER INSULIN SYRINGE/0.3ML/31G X 5/16"	186	KROGER PEN NEEDLES/33G X5/32"	187	lactic acid (ammonium lactate) LOTN 12 %	110
KROGER INSULIN SYRINGE/0.5ML/29G X 1/2"	186	KRYSTEXXA	130	lactulose (encephalopathy)	127
KROGER INSULIN SYRINGE/0.5ML/30G X 5/16"	186	K-TAB TBCR 10 MEQ (potassium chloride)	220	lactulose SOLN	139
KROGER INSULIN SYRINGE/0.5ML/31G X 5/16"	186	K-TAB TBCR 20 MEQ (potassium chloride)	220	LAMICTAL CHEWABLE DISPERSIBLE CHEW 25 MG (lamotrigine)	35
KROGER INSULIN SYRINGE/1ML/29G X 1/2"	186	KUVAN PACK (sapropterin dihydrochloride)	121	LAMICTAL CHEWABLE DISPERSIBLE CHEW 5 MG (lamotrigine)	35
KROGER INSULIN SYRINGE/1ML/30G X 5/16"	186	KUVAN TABS (sapropterin dihydrochloride)	121	LAMICTAL ODT KIT (lamotrigine)	35
KROGER INSULIN SYRINGE/1ML/31G X 5/16"	186	KYLEENA	99	LAMICTAL ODT TBDP 25 MG, 100 MG, 200 MG (lamotrigine)	35
KROGER LANCETS 21G	150	KYMRIAH	69	LAMICTAL ODT TBDP 50 MG (lamotrigine)	35
KROGER LANCETS MICRO THIN33G	150	KYPROLIS	74	LAMICTAL STARTER/NOT TAKING CARBAMAZEPINE KIT (lamotrigine)	36
KROGER LANCETS THIN 26G	150	labetalol hcl SOLN	88	LAMICTAL STARTER/TAKING CARBAMAZEPINE/NOT TAKING VALPROATE KIT (lamotrigine)	36
KROGER LANCETS ULTRATHIN30G	150	labetalol hcl TABS 100 MG	88	LAMICTAL STARTER/TAKING VALPROATE KIT (lamotrigine)	36
KROGER LANCING DEVICE MISC 150		labetalol hcl TABS 200 MG	88	LAMICTAL TABS 100 MG (lamotrigine)	36
KROGER PEN NEEDLES 29G X12MM	187	labetalol hcl TABS 300 MG	88	LAMICTAL TABS 150 MG (lamotrigine)	36
KROGER PEN NEEDLES 31G		LABETALOL HYDROCHLORIDE SOSY 10 MG/2ML	88	LAMICTAL TABS 200 MG	
		lacosamide SOLN IV 200 MG/20ML	35		
		lacosamide SOLN OR 10 MG/ML, 50			

(lamotrigine)	36	LAMPIT 120 MG	62	lanthanum carbonate CHEW	128
LAMICTAL TABS 25 MG (lamotrigine)	36	LAMPIT 30 MG	62	LANTUS SOLN	47
LAMICTAL XR KIT	36	LAMZEDE	121	LANTUS SOLOSTAR SOPN	47
LAMICTAL XR TB24 200 MG, 250 MG (lamotrigine)	36	LANAFLEX PACK	115	LANZO MISC	151
LAMICTAL XR TB24 25 MG, 50 MG, 100 MG (lamotrigine)	36	LANCET DEVICE WITH EJECTOR MISC	150	lapatinib ditosylate	74
LAMICTAL XR TB24 300 MG (lamotrigine)	36	LANCETS	150	LASIX TABS 20 MG (furosemide) 117	
LAMISIL AT CREA (terbinafine hcl (topical))	103	LANCETS 30G	150	LASIX TABS 40 MG (furosemide) 117	
LAMISIL AT JOCK ITCH CREA (terbinafine hcl (topical))	103	LANCETS 30G TWIST TOP	150	LASIX TABS 80 MG (furosemide) 117	
lamivudine (hbv) TABS	86	LANCETS 30G/TWIST TOP	150	latanoprost SOLN	244
lamivudine SOLN	84	LANCETS 33G EXTRA FINE	150	LATUDA 20 MG, 40 MG, 60 MG, 120 MG (lurasidone hcl)	79
lamivudine TABS	84	LANCETS 33G UNIVERSAL DESIGN	151	LATUDA 80 MG (lurasidone hcl) ..	79
lamivudine-zidovudine	84	LANCETS MICRO THIN 33G	151	LAZCLUZE	69
lamotrigine CHEW 25 MG	36	LANCETS SUPER THIN 28G	151	LEADER ADVANCED LANCING DEVICE MISC	151
lamotrigine CHEW 5 MG	36	LANCETS THIN	151	LEADER INSULIN SYRINGE/0.3ML/29G X 1/2"	187
lamotrigine KIT 25 MG	36	LANCETS ULTRA THIN	151	LEADER INSULIN SYRINGE/0.3ML/30G X 5/16"	187
lamotrigine TABS 100 MG	36	LANCETS ULTRA THIN 30G	151	LEADER INSULIN SYRINGE/0.3ML/31G X 5/16"	187
lamotrigine TABS 150 MG	36	LANCING DEVICE MISC	151	LEADER INSULIN SYRINGE/0.5ML/28G X 1/2"	187
lamotrigine TABS 200 MG	36	LANOXIN PEDIATRIC SOLN IJ	91	LEADER INSULIN SYRINGE/0.5ML/29G X 1/2"	187
lamotrigine TABS 25 MG	36	LANOXIN SOLN IJ (digoxin)	91	LEADER INSULIN SYRINGE/0.5ML/30G X 5/16"	187
lamotrigine TB24 200 MG, 250 MG 36		LANOXIN TABS 125 MCG (digoxin) . 91		LEADER INSULIN SYRINGE/0.5ML/31G X 5/16"	187
lamotrigine TB24 25 MG, 50 MG, 100 MG	36	LANOXIN TABS 250 MCG (digoxin) . 91		LEADER INSULIN SYRINGE/0.5ML/29G X 1/2"	187
lamotrigine TB24 300 MG	36	LANOXIN TABS 62.5 MCG (digoxin) . 91		LEADER INSULIN SYRINGE/0.5ML/30G X 5/16"	187
lamotrigine TBDP 25 MG, 100 MG, 200 MG	36	lanreotide acetate	123	LEADER INSULIN SYRINGE/0.5ML/31G X 5/16"	187
lamotrigine TBDP 50 MG	36	LANREOTIDE ACETATE	123	LEADER INSULIN SYRINGE/1ML/28G X 1/2"	187
		LANSOPRAZOLE	96		
		lansoprazole CPDR	257		
		lansoprazole TBDD	257		

LEADER INSULIN SYRINGE/1ML/29G X 1/2"	187	sodium)	57	CHLORIDE	36
LEADER INSULIN SYRINGE/1ML/30G X 5/16"	187	LETAIRIS (ambrisentan)	93	levobunolol hcl 0.5 %	237
LEADER INSULIN SYRINGE/1ML/31G X 5/16"	187	letrozole	70	levocarnitine (metabolic modifiers) SOLN OR 1 GM/10ML	121
LEADER UNIFINE PENTIPS PLUS/MINI/31GX3/16"	187	leucovorin calcium SOLN IJ 100 MG/10ML, 500 MG/50ML	76	levocarnitine (metabolic modifiers) TABS	121
LEADER UNIFINE PENTIPS PLUS/SHORT/31GX5/16"	188	leucovorin calcium SOLR	76	levocetirizine dihydrochloride SOLN 55	
LEADER UNIFINE PENTIPS/MINI/31GX3/16"	188	leucovorin calcium TABS	76	levocetirizine dihydrochloride TABS 55	
LEADER UNIFINE PENTIPS/NANO/32GX5/32"	188	LEUKERAN	67	levofloxacin in d5w	125
LEADER UNIFINE PENTIPS/PLUS/32GX5/32"	188	LEUKINE SOLR IJ	134	levofloxacin SOLN OR	125
LEADER UNIFINE PENTIPS/NANO/32GX5/32"	188	LEUPROLIDE ACETATE INJ	70	levofloxacin TABS 250 MG, 500 MG .	125
LEADER UNIFINE PENTIPS/PLUS/32GX5/32"	188	leuprolide acetate KIT IJ 1 MG/0.2ML	70	levofloxacin TABS 750 MG	125
LEDIPASVIR/SOFOSBUVIR TABS 86		levamisole	30	levoleucovorin calcium SOLN	76
leflunomide	13	levamlodipine maleate	90	levoleucovorin calcium SOLR	76
LEMTRADA	250	LEVBID TB12 (hyoscyamine sulfate) 256		levonorgestrel & eth estradiol TABS 97	
lenalidomide	221	LEVEMIR FLEXPEN SOPN	48	levonorgestrel (emergency oc) 1.5 MG	99
LENMELDY	249	LEVEMIR FLEXTOUCH SOPN ...	48	levonorgestrel-eth estradiol (triphasic)	97
LENVIMA 10 MG DAILY DOSE ..	68	LEVEMIR SOLN	48	levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG	97
LENVIMA 12MG DAILY DOSE ...	68	LEVETIRACETAM (levetiracetam in sodium chloride)	36	levonorgestrel-ethinyl estradiol (continuous)	97
LENVIMA 14 MG DAILY DOSE ..	68	levetiracetam in sodium chloride ..	36	levonorgestrel-ethinyl estradiol-iron 97	
LENVIMA 18 MG DAILY DOSE ..	68	levetiracetam SOLN OR 100 MG/ML, 500 MG/5ML	36	LEVOPHED IV (norepinephrine bitartrate)	265
LENVIMA 20 MG DAILY DOSE ..	68	levetiracetam TABS 1000 MG	36	levorphanol tartrate TABS	15
LENVIMA 24 MG DAILY DOSE ...	68	levetiracetam TABS 250 MG	36	levothyroxine sodium CAPS	255
LENVIMA 4 MG DAILY DOSE	68	levetiracetam TABS 500 MG, 750 MG	36	LEVOTHYROXINE SODIUM SOLN	
LENVIMA 8 MG DAILY DOSE	68	levetiracetam TB24 500 MG	36		
LEQEMBI	249	levetiracetam TB24 750 MG	36		
LEQVIO	57	LEVETIRACETAM/SODIUM			
LESCOL XL TB24 (fluvastatin					

IV	255	lidocaine hcl PRSY	111	LIPITOR TABS 20 MG, 40 MG (atorvastatin calcium)	57
LEVOTHYROXINE SODIUM SOLR IV (levothyroxine sodium)	255	lidocaine hcl SOLN	111	LIPITOR TABS 80 MG (atorvastatin calcium)	57
levothyroxine sodium SOLR IV ...	255	LIDOCAINE HCL SOLN	24	LIPOFEN CAPS (fenofibrate)	56
levothyroxine sodium TABS	255	lidocaine in d5w 5 %-4 MG/ML, 5 %- 8 MG/ML	24	LIPOFEN CAPS 50 MG (fenofibrate) .	56
LEVSIN TABS (hyoscyamine sulfate)	256	lidocaine OINT	111	LIQREV SUSP	93
LEVSIN/SL SUBL (hyoscyamine sulfate)	256	LIDOCAINE POWD	96	liraglutide	45
LEVULAN KERASTICK SOLR ...	104	lidocaine PTCH 5 %	111	lisdexamphetamine dimesylate CAPS 2	
LEXAPRO TABS 10 MG (escitalopram oxalate)	41	lidocaine w/ epinephrine SOLN 1 :100000-1 %, 1 :100000-2 %, 1 :200000-0.5 %, 1 :200000-1.5 %, 1 :200000-2 %	139	lisdexamphetamine dimesylate CHEW .	2
LEXAPRO TABS 5 MG, 20 MG (escitalopram oxalate)	41	lidocaine-hydrocortisone acetate (rectal) CREA EX	21	lisinopril & hydrochlorothiazide ...	60
LXETTE FOAM (halobetasol propionate)	109	lidocaine-prilocaine CREA	111	lisinopril TABS 10 MG	58
LXISCAN (regadenoson)	113	LIDODERM PTCH (lidocaine)	111	lisinopril TABS 2.5 MG, 5 MG	58
LXIVA TABS (fosamprenavir calcium)	84	LIKMEZ SUSP	62	lisinopril TABS 20 MG	58
LIALDA TBEC (mesalamine)	126	LILETTA 20.1 MCG/DAY	99	lisinopril TABS 30 MG, 40 MG	58
LIALDA TBEC (mesalamine)	127	LINCOCIN (lincomycin hcl)	64	LITE TOUCH LANCETS	151
LIBERVANT FILM	34	lincomycin hcl	64	LITE TOUCH LANCING PEN MISC	151
LIBTAYO	68	LINEZOLID	64	LITETOUCH INSULIN SYRINGE/0.3ML/29G X 1/2"	188
LIDOCAINE BASE POWD	96	linezolid SOLN	64	LITETOUCH INSULIN SYRINGE/0.3ML/30G X 5/16" ...	188
LIDOCAINE CRYSTALS	96	linezolid SUSP	64	LITETOUCH INSULIN SYRINGE/0.3ML/31G X 5/16" ...	188
lidocaine hcl (cardiac) SOSY	24	linezolid TABS	64	LITETOUCH INSULIN SYRINGE/0.5ML/30G X 5/16" ...	188
lidocaine hcl (local anesth.) SOLN 140		LINZESS	127	LITETOUCH INSULIN SYRINGE/0.5ML/31G X 5/16" ...	188
lidocaine hcl (mouth-throat)	224	LIORESAL INTRATHECAL SOLN IT (baclofen)	228	LITETOUCH INSULIN SYRINGE/1ML/30G X 5/16"	188
LIDOCAINE HCL	96	LIORESAL INTRATHECAL SOLN IT 228		LITETOUCH INSULIN SYRINGE/1ML/30G X 5/16"	188
lidocaine hcl CREA 3 %	111	liothyronine sodium SOLN	255	LITETOUCH INSULIN SYRINGE/U- 100/0.5ML/28G X 1/2"	188
LIDOCAINE HCL MONOHYDRATE .	96	liothyronine sodium TABS	255		
		LIPITOR TABS 10 MG, 20 MG, 40 MG (atorvastatin calcium)	57		

LITETOUCH INSULIN SYRINGE/U- 100/0.5ML/29G X 1/2"	188	LIVMARLI 19 MG/ML	126	103
LITETOUCH INSULIN SYRINGE/U- 100/1ML/28G X 1/2"	188	LIVMARLI 9.5 MG/ML	126	LOPROX SHAMPOO SHAM (ciclopirox)
LITETOUCH INSULIN SYRINGE/U- 100/1ML/29G X 1/2"	188	LIVTENCITY	85	103
LITETOUCH INSULIN SYRINGE/U- 100/1ML/31G X 5/16"	188	LO LOESTRIN FE TABS	97	LOPROX SUSP (ciclopirox olamine) . 103
LITETOUCH LANCETS MICRO THIN 33G	151	LOCAMETZ KIT	113	LOQTORZI
LITETOUCH PEN NEEDLES 29GX12.7MM	188	LOCOID LIPOCREAM	109	loratadine SOLN
LITETOUCH PEN NEEDLES 31G X 6MM	188	LOCOID LOTN (hydrocortisone butyrate)	109	loratadine TABS
LITETOUCH PEN NEEDLES 31GX8MM SHORT	188	LODINE TABS (etodolac)	12	loratadine TBDP 10 MG
LITETOUCH PEN NEEDLES/31G X 3/16"	188	LODOSYN (carbidopa)	77	LORAZEPAM
LITFULO	110	lofedidine hcl	248	lorazepam CONC
lithium	79	LOKELMA	223	lorazepam SOLN
lithium carbonate CAPS	79	LOMOTIL TABS (diphenoxylate w/ atropine)	50	lorazepam TABS
lithium carbonate TABS	79	LONGS INSULIN SYRINGE/0.5ML/31G X 5/16" ...	188	LORBRENA 100 MG
lithium carbonate TBCR	79	LONGS LANCETS STANDARD .	151	LORBRENA 25 MG
LITHOBID TBCR (lithium carbonate) . 79		LONGS LANCETS THIN	151	LOREEV XR CS24
LITHOSTAT	130	LONGS LANCETS ULTRA THIN 151		losartan potassium & hydrochlorothiazide
LIVALO (pitavastatin calcium)	57	LONSURF	72	losartan potassium 25 MG
LIVDELZI	128	loperamide hcl CAPS	50	losartan potassium 50 MG, 100 MG 59
LIVE BETTER ADVANCED LANCING DEVICE MISC	151	LOPHLEX LQ 20 LIQD OR	115	LOSEASONIQUE (levonorgestrel- ethinyl estradiol (91-day))
LIVE BETTER LANCET SUPERTHIN 30G	151	LOPHLEX PACK	115	98
LIVE BETTER LANCET ULTRATHIN 28G	151	LOPID TABS (gemfibrozil)	56	LOTEMAX GEL (loteprednol etabonate)
		lopinavir-ritonavir SOLN	84	240
		lopinavir-ritonavir TABS	84	LOTEMAX OINT
		LOPRESSOR TABS 100 MG (metoprolol tartrate)	88	240
		LOPRESSOR TABS 50 MG (metoprolol tartrate)	88	LOTEMAX SM GEL
		LOPROX CREA (ciclopirox olamine) .		240
				LOTEMAX SUSP (loteprednol etabonate)
				241
				LOTENSIN 10 MG (benazepril hcl) 58
				LOTENSIN 20 MG, 40 MG (benazepril hcl)
				58

LOTENSIN HCT 12.5 MG-10 MG, 12.5 MG-20 MG, 25 MG-20 MG (benazepril & hydrochlorothiazide) 60	LUCEMYRA (lofexidine hcl) 248	LUZU (luliconazole) 103
loteprednol etabonate GEL 241	LUCENTIS SOSY 0.3 MG/0.05ML 238	LYBALVI 249
loteprednol etabonate SUSP 0.2 % 241	LUCENTIS SOSY 0.5 MG/0.05ML 238	LYFGENIA 134
loteprednol etabonate SUSP 0.5 % 241	luliconazole 103	LYNPARZA TABS 74
LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG (amlodipine besylate-benazepril hcl) 61	LUMAKRAS 120 MG 74	LYRICA CAPS 225 MG (pregabalin) . 36
LOTREL 40 MG-10 MG (amlodipine besylate-benazepril hcl) 61	LUMAKRAS 320 MG 74	LYRICA CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG, 300 MG (pregabalin) 36
LOTRIMIN AF CREA (clotrimazole (topical)) 103	LUMIGAN SOLN 0.01 % 244	LYRICA CAPS 50 MG, 75 MG, 100 MG, 150 MG (pregabalin) 36
LOTRIMIN AF JOCK ITCH CREA (clotrimazole (topical)) 103	LUMIZYME 121	LYRICA CR (pregabalin (once- daily)) 252
LOTRONEX (alosetron hcl) 127	LUNESTA (eszopiclone) 137	LYRICA SOLN (pregabalin) 37
lovastatin TABS 57	LUNSUMIO 68	LYSODREN 70
LOVAZA (omega-3-acid ethyl esters) 55	LUPKYNIS 222	LYSTEDA TABS (tranexamic acid) 136
LOVENOX SOLN IJ 300 MG/3ML (enoxaparin sodium) 33	LUPRON DEPOT (1-MONTH) KIT IM 3.75 MG 70	LYTGOBI 74
LOVENOX SOSY 100 MG/ML, 150 MG/ML (enoxaparin sodium) 33	LUPRON DEPOT (1-MONTH) KIT IM 7.5 MG 70	LYUMJEV KWIKPEN SOPN 100 UNIT/ML 48
LOVENOX SOSY 30 MG/0.3ML (enoxaparin sodium) 33	LUPRON DEPOT (3-MONTH) KIT IM 70	LYUMJEV KWIKPEN SOPN 200 UNIT/ML 48
LOVENOX SOSY 40 MG/0.4ML (enoxaparin sodium) 33	LUPRON DEPOT (4-MONTH) IM . 70	LYUMJEV SOLN 48
LOVENOX SOSY 60 MG/0.6ML (enoxaparin sodium) 33	LUPRON DEPOT (6-MONTH) IM . 70	LYUMJEV TEMPO PEN SOPN ... 48
LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (enoxaparin sodium) ... 33	LUPRON DEPOT-PED (1-MONTH) . 120	LYVISPAH PACK 20 MG 228
loxapine succinate 81	LUPRON DEPOT-PED (3-MONTH) . 120	LYVISPAH PACK 5 MG, 10 MG . 228
lubiprostone 126	LUPRON DEPOT-PED (6-MONTH) IM 120	MACRILEN 113
	lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG 79	MACROBID (nitrofurantoin monohyd macro) 64
	lurasidone hcl 80 MG 79	MACRODANTIN 25 MG (nitrofurantoin macrocrystal) 64
	LUXIQ FOAM (betamethasone valerate) 109	MACRODANTIN 50 MG, 100 MG (nitrofurantoin macrocrystal) 64
	LUXTURNA 239	mafenide acetate PACK 106

MAGELLAN INSULIN SAFETY SYRINGE/U-100/0.3ML/29G X 1/2"	PENTIPS31GX8MM	189	MAXI-COMFORT SAFETY PEN NEEDLE/29G X 3/16"	189
MAGELLAN INSULIN SAFETY SYRINGE/U-100/0.3ML/30G X 5/16"	MARATHON MEDICAL PENTIPS32GX4MM	189	MAXI-COMFORT SAFETY PEN NEEDLE/29G X 5/16"	189
MAGELLAN INSULIN SAFETY SYRINGE/U-100/0.5ML/29G X 1/2"	maraviroc TABS 150 MG	84	MAXIDEX SUSP OP	241
MAGELLAN INSULIN SAFETY SYRINGE/U-100/0.5ML/30G X 5/16"	maraviroc TABS 300 MG	84	MAXITROL OINT (neomycin-polymy-dexameth)	241
MAGELLAN INSULIN SAFETY SYRINGE/U-100/1ML/29G X 1/2"	MARCAINE SOLN IJ (bupivacaine hcl)	140	MAXITROL SUSP (neomycin-polymy-dexameth)	241
MAGELLAN INSULIN SAFETY SYRINGE/U-100/1ML/30G X 5/16"	MARCAINE SPINAL SOLN (bupivacaine in dextrose)	140	MAXX LUBRICATED MISC	142
MAG-G TABS	MARCAINE/EPINEPHRINE SOLN 1 :200000-0.25 %, 1 :200000-0.5 % (bupivacaine w/ epinephrine)	139	MAXZIDE TABS (triamterene & hydrochlorothiazide)	117
magnesium chloride SOLN	MARGENZA	69	MAXZIDE-25 TABS (triamterene & hydrochlorothiazide)	117
MAGNESIUM SULFATE IN D5W (magnesium sulfate in dextrose)	MARINOL CAPS 2.5 MG (dronabinol)	52	MAYZENT STARTER PACK TBPK 250	
magnesium sulfate in dextrose	MARINOL CAPS 5 MG, 10 MG (dronabinol)	52	MAYZENT STARTER PACK TBPK 251	
MAGNESIUM SULFATE IV (magnesium sulfate)	MARPLAN	40	MAYZENT TABS 0.25 MG	251
magnesium sulfate IV	MATULANE	76	MAYZENT TABS 1 MG, 2 MG	251
MAGONATE LIQD	MAVENCLAD	250	MCT OIL OIL	235
MALARONE (atovaquone-proguanil hcl)	MAVYRET PACK	86	meclizine hcl TABS 12.5 MG, 25 MG	52
malathion	MAVYRET TABS	86	meclofenamate sodium CAPS	12
mannitol 10 %, 20 %, 25 %	MAXALT TABS 10 MG (rizatriptan benzoate)	217	MEDICINE SHOPPE PEN NEEDLES 29G X 12MM	189
MARATHON MEDICAL PENTIPS29GX12MM	MAXALT-MLT TBDP 10 MG (rizatriptan benzoate)	217	MEDICINE SHOPPE PEN NEEDLES 31G X 6MM	189
MARATHON MEDICAL PENTIPS31GX5MM	MAXI-COMFORT II PEN NEEDLES/31G X 1/4"	189	MEDICINE SHOPPE PEN NEEDLES 31G X 8MM	189
MARATHON MEDICAL PENTIPS31GX8MM	MAXI-COMFORT INSULIN SYRINGE/U-100/0.5ML/28GX1/2"	189	MEDLANCE PLUS EXTRA LANCETS 21G	151
MARATHON MEDICAL PENTIPS31GX12MM	MAXI-COMFORT INSULIN SYRINGE/U-100/1ML/28GX1/2"	189	MEDLANCE PLUS LANCETS	151
MARATHON MEDICAL PENTIPS31GX15MM	MAXICOMFORT INSULIN SYRINGES 27G X 1/2"	189	MEDLANCE PLUS LANCETS LITE 25G	151

MEDLANCE PLUS LITE LANCETS 25G	151	X12MM	189	%	140
MEDLANCE PLUS SPECIAL LANCETS 0.8MM	152	MEIJER PEN NEEDLES 31G X6MM	190	meprobamate	23
MEDLANCE PLUS SUPERLITE 30G	152	MEIJER PEN NEEDLES 31G X8MM	190	MEPRON (atovaquone)	62
MEDLANCE PLUS SUPERLITE 30G/COMFORT MAX	152	MEIJER SUPER THIN LANCETS 152	152	MEPSEVII	121
MEDLANCE PLUS UNIVERSAL LANCETS 21G	152	MEKINIST SOLR	74	mercaptopurine TABS	67
MEDLANCE PLUS/LITE 25G	152	MEKINIST TABS	74	meropenem	62
MEDLANCE/LITE	152	MEKTOVI	74	MEROPENEM	62
MEDLANCE/UNIVERSAL	152	meloxicam CAPS	12	MEROPENEM/SODIUM CHLORIDE	62
MEDROL DOSEPAK TBPK (methylprednisolone)	100	meloxicam TABS	12	mesalamine CP24	127
MEDROL TABS (methylprednisolone)	100	melphalan hcl IV	67	mesalamine CPCR	127
MEDROL TABS	100	memantine hcl CP24	249	mesalamine CPDR	127
medroxyprogesterone acetate (contraceptive) SUSP IM	99	memantine hcl SOLN 2 MG/ML	249	mesalamine ENEM	127
medroxyprogesterone acetate (contraceptive) SUSY IM	99	memantine hcl TABS 10 MG	249	mesalamine SUPP	127
medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG	247	memantine hcl TABS 5 MG	249	mesalamine TBEC 1.2 GM	127
mefenamic acid CAPS	12	memantine hcl TABS	249	mesalamine TBEC 800 MG	127
mefloquine hcl	65	MENACTRA	260	mesalamine w/ cleanser	127
megestrol acetate (appetite)	248	MENEST	124	mesna SOLN	76
megestrol acetate SUSP	70	MENOSTAR PTWK	124	MESNEX SOLN (mesna)	76
megestrol acetate TABS	70	MENQUADFI	260	MESNEX TABS	76
MEIJER LANCETS	152	MENVEO SOLN	260	MESTINON SOLN OR (pyridostigmine bromide)	65
MEIJER LANCETS THIN	152	MENVEO SOLR	260	MESTINON TABS (pyridostigmine bromide)	65
MEIJER LANCETS UNIVERSAL33G	152	mepерidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML	15	MESTINON TIMESPAN TBCR (pyridostigmine bromide)	65
MEIJER PEN NEEDLES 29G	152	mepерidine hcl SOLN OR 50 MG/5ML	15	METADATE CD CPCR (methylphenidate hcl)	4
		mepерidine hcl TABS 50 MG	15	metaxalone	228
		MEPHYTON TABS (phytonadione) 265	265	METFORMIN HCL	96
		mepivacaine hcl SOLN 1 %, 1.5 %, 2	265	metformin hcl SOLN	44
				metformin hcl TABS 500 MG	44

metformin hcl TABS 625 MG 44	GM/40ML, 50 MG/2ML, 250	methylprednisolone acetate SUSP
metformin hcl TABS 850 MG, 1000	MG/10ML, 1000 MG/40ML 67	100
MG 44	methotrexate sodium SOLR 67	methylprednisolone sod succ 40 MG,
metformin hcl TB24 500 MG, 1000	methotrexate sodium TABS 2.5 MG	125 MG, 500 MG, 1000 MG 100
MG 44	67	methylprednisolone TABS 100
metformin hcl TB24 500 MG 44	methoxsalen rapid 105	methylprednisolone TBPK 100
metformin hcl TB24 750 MG 44	methscopolamine bromide 256	methyltestosterone CAPS 20
methadone hcl CONC 15	methsuximide 39	METHYLTESTOSTERONE POWD
METHADONE HCL SOLN IJ 16	methyldopa TABS 59	20
methadone hcl SOLN OR 10	methylene blue (antidote) SOLN IV	METOCLOPRAMIDE HCL
MG/5ML 16	50 MG/10ML 51	MONOHYDRATE 126
methadone hcl SOLN OR 5 MG/5ML	methylergonovine maleate SOLN 245	METOCLOPRAMIDE HCL POWD
15	methylergonovine maleate TABS 245	126
methadone hcl TABS 16	METHYLIN SOLN (methylphenidate	metoclopramide hcl SOLN IJ 5
methadone hcl TBSO 16	hcl) 4	MG/ML 126
METHADOSE CONC (methadone	methylphenidate hcl CHEW 4	metoclopramide hcl TABS 126
hcl) 16	methylphenidate hcl CP24 10 MG, 20	METOCLOPRAMIDE
METHADOSE SUGAR-FREE CONC	MG, 40 MG, 60 MG 4	HYDROCHLORIDE POWD 126
(methadone hcl) 16	methylphenidate hcl CP24 30 MG .. 4	metolazone 118
methamphetamine hcl 2	methylphenidate hcl CP24 4	METOPIRONE 113
methazolamide TABS 25 MG 117	methylphenidate hcl CPCR 4	metoprolol & hydrochlorothiazide
methazolamide TABS 50 MG 117	methylphenidate hcl SOLN 4	TABS 25 MG-100 MG 61
methenamine hippurate 64	methylphenidate hcl TABS 4	metoprolol & hydrochlorothiazide
methenamine mandelate 0.5 GM, 1	methylphenidate hcl TB24 18 MG, 27	TABS 25 MG-50 MG, 50 MG-100 MG
GM 64	MG, 54 MG 4	..... 61
METHIMAZOLE POWD 255	methylphenidate hcl TB24 36 MG .. 4	metoprolol succinate TB24 100 MG,
methimazole TABS 255	methylphenidate hcl TBCR 10 MG,	200 MG 88
METHITEST TABS 20	20 MG 4	metoprolol succinate TB24 25 MG,
methocarbamol SOLN 228	methylphenidate hcl TBCR 18 MG,	50 MG 88
methocarbamol TABS 500 MG, 750	27 MG, 45 MG, 54 MG, 63 MG, 72	metoprolol tartrate SOLN IV 5
MG 228	MG 4	MG/5ML 88
METHOTREXATE 7	methylphenidate hcl TBCR 36 MG . 4	metoprolol tartrate TABS 25 MG, 50
methotrexate sodium SOLN 1	methylphenidate PTCH 4	MG 89
		metoprolol tartrate TABS 37.5 MG,
		75 MG, 100 MG 88

METROCREAM CREA (metronidazole (topical))	112	miconazole nitrate vaginal SUPP MG	200 264	MINASTRIN 24 FE CHEW (norethin acet & estrad-fe)	98
METROGEL GEL 1 % (metronidazole (topical))	112	miconazole-zinc oxide-white petrolatum	103	MINI LANCING DEVICE MISC	152
METROLOTION LOTN (metronidazole (topical))	112	MICROCHAMBER DEVI	215	MINIPRESS CAPS 1 MG (prazosin hcl)	59
metronidazole (topical) CREA	112	MICROCHAMBER MISC	215	MINIPRESS CAPS 2 MG (prazosin hcl)	59
metronidazole (topical) GEL 0.75 % 112		MICRODOT PEN NEEDLE/31G X 6 MM	190	MINIPRESS CAPS 5 MG (prazosin hcl)	59
metronidazole (topical) GEL 1 %	112	MICRODOT PEN NEEDLE/32G X 4 MM	190	MINIVELLE PTTW (estradiol)	124
metronidazole (topical) LOTN	112	MICRODOT PEN NEEDLE/33G X 4 MM	190	MINOCIN SOLR	254
METRONIDAZOLE	96	MICROLET LANCETS	152	minocycline hcl CAPS	254
METRONIDAZOLE BENZOATE	96	MICROLET NEXT MISC	152	minocycline hcl TABS	254
metronidazole CAPS	62	MICROSPACER MISC	215	minocycline hcl TB24	254
METRONIDAZOLE SOLN (metronidazole)	62	midazolam hcl SOLN IJ	137	MINOLIRA TB24	254
metronidazole SOLN	62	midazolam hcl SYRP	137	minoxidil 10 MG	61
metronidazole TABS	62	MIDAZOLAM/SODIUM CHLORIDE (midazolam-sodium chloride)	137	minoxidil 2.5 MG	61
metronidazole vaginal	264	MIDAZOLAM/SODIUM CHLORIDE 137		MIOCHOL-E SOLR	237
metyrosine	58	midazolam-sodium chloride	137	MIOSTAT IO	237
mexiletine hcl	24	midodrine hcl	265	MIPLYFFA CAPS OR 47 MG, 62 MG, 93 MG, 124 MG	252
MIACALCIN IJ (calcitonin (salmon)) 118		MIEBO	243	mirabegron TB24	259
MICAFUNGIN	53	MIFEPREX (mifepristone)	122	MIRALAX MIX-IN PAX PACK (polyethylene glycol 3350)	139
micafungin sodium	53	mifepristone (hyperglycemia)	44	MIRALAX PACK (polyethylene glycol 3350)	139
MICAFUNGIN/SODIUM CHLORIDE 53		mifepristone	122	MIRALAX POWD (polyethylene glycol 3350)	139
MICARDIS 20 MG (telmisartan)	59	miglitol	42	MIRAPEX ER TB24 (pramipexole dihydrochloride)	78
MICARDIS 40 MG (telmisartan)	59	miglustat	133	MIRCETTE (desogestrel-ethinyl estradiol (biphasic))	98
MICARDIS 80 MG (telmisartan)	59	MIGRANAL SOLN NA (dihydroergotamine mesylate)	217	MIRENA	99
MICARDIS HCT (telmisartan- hydrochlorothiazide)	61	milrinone lactate	92		
MICONAZOLE	54	milrinone lactate in dextrose	92		

mirtazapine TABS	39	MODERNA COVID-19 VACCINE/6MO-11Y/2023-24 SUSP . 262	100/0.5ML/28G X 1/2"	191
mirtazapine TBDP	39		MONOJECT INSULIN SYRINGE/SAFETY/PERM NEEDLE/0.3ML/29G X 1/2"	191
MIRVASO (brimonidine tartrate (topical))	112	MODERNA COVID-19 VACCINE/6MO-11Y/2024-25 SUSY . 262	MONOJECT INSULIN SYRINGE/SAFETY/PERM NEEDLE/0.3ML/29GX1/2"	191
misoprostol	258		MONOJECT INSULIN SYRINGE/SAFETY/PERM NEEDLE/0.3ML/29GX1/2"	191
MITIGARE CAPS (colchicine)	130	MODERNA COVID-19 VACCINE/BIVALENT/6MO-5Y ..	262	MONOJECT INSULIN SYRINGE/SAFETY/PERM NEEDLE/0.5ML/29G X 1/2"
mitomycin SOLR IV	71	MODERNA COVID-19 VACCINE/BIVALENT/BA.4/BA.5	262	MONOJECT INSULIN SYRINGE/SAFETY/PERM NEEDLE/0.5ML/29G X 1/2"
mitoxantrone hcl 2 MG/ML	71			
MM INSULIN SYRINGE/U- 100/0.3ML/30G X 5/16"	190	MODERNA COVID-19 VACCINE6MO-5Y SUSP	262	MONOJECT INSULIN SYRINGE/SAFETY/PERM NEEDLE/1ML/29G X 1/2"
MM INSULIN SYRINGE/U- 100/0.3ML/31G X 5/16"	190	moexipril hcl	58	MONOJECT INSULIN SYRINGE/SAFETY/PERM NEEDLE/1ML/29G X 1/2"
MM INSULIN SYRINGE/U- 100/1/2ML/30G X 5/16"	190	molindone hcl 5 MG, 25 MG	82	MONOJECT INSULIN SYRINGE/SOFTPACK/1ML/27G X 1/2"
MM INSULIN SYRINGE/U- 100/1/2ML/31G X 5/16"	190	mometasone furoate (nasal) SUSP 230		MONOJECT INSULIN SYRINGE/SOFTPACK/U- 100/0.5ML/28G X 1/2"
MM INSULIN SYRINGE/U- 100/1ML/30G X 5/16"	190	mometasone furoate CREA	109	191
MM INSULIN SYRINGE/U- 100/1ML/31G X 5/16"	190	mometasone furoate OINT	109	MONOJECT INSULIN SYRINGE/U- 100/0.3ML/30G X 5/16"
MM INSULIN SYRINGE/U- 100/1ML/31G X 5/16"	190	mometasone furoate SOLN	109	191
MM LANCING DEVICE MISC	152	MONJUVI	68	MONOJECT INSULIN SYRINGE/U- 100/0.5ML/30G X 5/16"
MM PEN NEEDLES 31G X 1/4" .	190	MONOFERRIC	136	191
MM PEN NEEDLES 31G X 3/16" 190		MONOJECT INSULIN SYRINGE/1ML	190	MONOJECT INSULIN SYRINGE/U- 100/1ML/28G X 1/2"
MM PEN NEEDLES 31G X 5/16" 190		MONOJECT INSULIN SYRINGE/1ML/31G X 5/16"	190	191
MM PEN NEEDLES 32G X 5/32" 190		MONOJECT INSULIN SYRINGE/DETACH NEEDLE/1ML/25G X 5/8"	190	MONOJECT INSULIN SYRINGE/U- 100/1ML/30G X 5/16"
MM TWIST LANCETS	152	MONOJECT INSULIN SYRINGE/DETACH NEEDLE/1ML/27G X 1/2"	190	191
M-M-R II SOLR	262			
M-NATAL PLUS TABS	225	MONOJECT INSULIN SYRINGE/PERM NEEDLE/1ML/28G X 1/2"	190	MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.3ML/29G X 1/2"
modafinil	4			191
MODERNA COVID-19 VACCINE SUSP	262	MONOJECT INSULIN SYRINGE/PERM NEEDLE/U-		MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.3ML/31G X

5/16"	191	morphine sulfate SOLN OR 10 MG/5ML, 20 MG/5ML, 20 MG/ML, 100 MG/5ML	16	MS CONTIN TBCR 200 MG (morphine sulfate)	16
MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.5ML/28G X 1/2"	191	morphine sulfate SUPP	16	MS INSULIN SYRINGE/0.3ML/31G X 5/16"	192
MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.5ML/29G X 1/2"	191	morphine sulfate TABS	16	MS INSULIN SYRINGE/0.5ML/31G X 5/16"	192
MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.5ML/30G X 5/16"	191	morphine sulfate TBCR 15 MG, 30 MG, 60 MG, 100 MG	16	MS INSULIN SYRINGE/1ML/31G X 5/16"	192
MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.5ML/31G X 5/16"	191	morphine sulfate TBCR 200 MG ...	16	MULPLETA	135
MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.5ML/29G X 1/2" 191		MORPHINE SULFATE/SODIUM CHLORIDE SOLN IV	16	MULTAQ	24
MONOJECT ULTRA COMFORT INSULIN SYRINGE/1ML/28G X 1/2" 191		MOTTEGRITY	125	MULTI-LANCET DEVICE 2 KIT ..	152
MONOJECT ULTRA COMFORT INSULIN SYRINGE/1ML/29G X 1/2" 192		MOTOFEN	50	MULTI-LANCET DEVICE MISC ..	152
MONOLET LANCETS	152	MOTPOLY XR CP24 100 MG	37	MUPIROCIN	96
montelukast sodium CHEW	26	MOTPOLY XR CP24 150 MG, 200 MG	37	mupirocin calcium (topical)	102
montelukast sodium PACK	26	MOUNJARO SC 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	45	mupirocin OINT	102
montelukast sodium TABS	26	MOVANTIK	128	MURO 128 SOLN (sodium chloride hypertonic)	243
MONUROL (fosfomycin tromethamine)	64	MOVIPREP (peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid) 138		MVASI	68
morphine sulfate beads	16	moxifloxacin hcl (ophth) SOLN OP 239		MVW COMPLETE FORMULATION CAPS	225
morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG	16	moxifloxacin hcl in sodium chloride 125		MVW COMPLETE FORMULATION CHEW	225
morphine sulfate for continuous microinfusion	16	moxifloxacin hcl TABS	125	MVW COMPLETE FORMULATIOND3000 CAPS ...	225
MORPHINE SULFATE POWD	16	MOXIFLOXACIN HYDROCHLORIDE SOLN 400 MG/250ML	125	MVW COMPLETE FORMULATIOND3000 CHEW ...	225
MORPHINE SULFATE SOLN IV 2 MG/ML, 4 MG/ML, 8 MG/ML, 10 MG/ML, 50 MG/ML	16	MOZOBIL (plerixafor)	136	MVW COMPLETE FORMULATIOND500 CAPS	225
morphine sulfate SOLN IV 4 MG/ML, 8 MG/ML, 10 MG/ML, 50 MG/ML ..	16	MRESVIA	263	MVW COMPLETE FORMULATIOND5000 CHEW ...	225
MS CONTIN TBCR 15 MG, 30 MG, 60 MG, 100 MG (morphine sulfate)	16	MYALEPT	121	MYAMBUTOL TABS 400 MG	

(ethambutol hcl) .....66	nadolol TABS 40 MG, 80 MG .....89	NAMENDA TITRATION PAK TABS (memantine hcl) 249
MYCAMINE (micafungin sodium) .53	NAFCILLIN .....247	NAMENDA XR CP24 14 MG, 21 MG, 28 MG (memantine hcl) 249
MYCAPSSA CPDR .....123	nafcillin sodium IJ 1 GM, 2 GM ...247	NAMENDA XR CP24 7 MG, 14 MG, 28 MG (memantine hcl) 249
MYCOBUTIN (rifabutin) .....66	naftifine hcl CREA 103	NAMZARIC C4PK .....249
mycophenolate mofetil CAPS 222	naftifine hcl GEL 2 % 103	NAMZARIC CP24 249
mycophenolate mofetil hcl 222	NAFTIN GEL (naftifine hcl) .....103	NAPRELAN TB24 (naproxen sodium) .....12
mycophenolate mofetil SUSR 222	NAFTIN GEL .....103	NAPRELAN TB24 500 MG (naproxen sodium) .....12
mycophenolate mofetil TABS 222	NAGLAZYME 121	NAPROSYN SUSP (naproxen) ....12
mycophenolate sodium 222	nalbuphine hcl .....19	NAPROSYN TABS 500 MG (naproxen) .....12
MYDAYIS CP24 (amphetamine- dextroamphetamine) 2	NALFON CAPS (fenoprofen calcium) .....12	naproxen sodium TABS 275 MG, 550 MG 12
MYDRIACYL SOLN (tropicamide) 237	NALFON TABS (fenoprofen calcium) 12	naproxen sodium TB24 12
MYFEMBREE .....124	NALMEFENE HYDROCHLORIDE IJ . 51	naproxen SUSP .....12
MYFORTIC (mycophenolate sodium) 222	NALOCET TABS .....18	naproxen TABS 12
MYGLUCOHEALTH MGH SOFTLANCE LANCETS 30G ... 152	naloxone hcl LIQD 51	naproxen TBEC .....12
MYHIBBIN SUSP .....222	naloxone hcl SOCT 51	naproxen-esomeprazole magnesium.....12
MYLERAN TABS .....67	naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML .....51	naratriptan hcl 1 MG .....217
MYLOTARG .....68	naloxone hcl SOSY 0.4 MG/ML ... 51	naratriptan hcl 2.5 MG .....217
MYOBLOC .....234	naloxone hcl SOSY 2 MG/2ML 51	NARCAN LIQD (naloxone hcl) 51
MYRBETRIQ SRER 259	naltrexone hcl 51	NARDIL (phenelzine sulfate) 40
MYRBETRIQ TB24 (mirabegron) 259	NALTREXONE HCL .....96	NAROPIN SOLN IJ (ropivacaine hcl) 140
MYSOLINE 250 MG (primidone) .. 37	NALTREXONE HYDROCHLORIDE . 96	NASONEX 24HR SUSP (mometasone furoate (nasal)) ....230
MYSOLINE 50 MG (primidone) ....37	NALTREXONE HYDROCHLORIDEANHYDROUS 96	NATAACYN 239
MYTESI .....50	NAMENDA TABS 10 MG (memantine hcl) 249	NATAZIA 98
MYXREDLIN 48	NAMENDA TABS 5 MG (memantine hcl) .....249	
NABI-HB SOLN IM 246		
nabumetone 12		
nadolol TABS 20 MG 89		

nateglinide	49	NEORAL SOLN (cyclosporine modified (for microemulsion))	222	(gabapentin)	37
NATESTO GEL NA	20	neostigmine methylsulfate SOLN IV 5 MG/10ML, 10 MG/10ML	65	NEURONTIN CAPS 300 MG (gabapentin)	37
NATROBA (spinosad)	112	NEOSTIGMINE METHYLSULFATE SOLN IV 5 MG/10ML, 10 MG/10ML	65	NEURONTIN CAPS 400 MG (gabapentin)	37
NAYZILAM	34	NEOSTIGMINE METHYLSULFATE SOLN IV 5 MG/10ML, 10 MG/10ML	65	NEURONTIN SOLN (gabapentin) .	37
nebivolol hcl	89	NEOSTIGMINE METHYLSULFATE SOSY (neostigmine methylsulfate)	65	NEURONTIN TABS (gabapentin) .	37
NEBUPENT IN (pentamidine isethionate)	62	NEOSTIGMINE METHYLSULFATE SOSY (neostigmine methylsulfate)	66	NEVANAC	243
nefazodone hcl	41	NEOSTIGMINE METHYLSULFATE SOSY (neostigmine methylsulfate)	65	nevirapine SUSP	84
nelarabine	67	NEO-SYNALAR	102	nevirapine TABS	84
NEMBUTAL SODIUM SOLN (pentobarbital sodium)	137	NERLYNX	74	nevirapine TB24 400 MG	84
neomycin sulfate TABS	6	NESACAINE IJ	140	NEXAVAR (sorafenib tosylate) ...	74
neomycin/polymyxin b gu	129	NESACAINE-MPF IJ (chloroprocaine hcl)	140	NEXICLON XR OR (clonidine)	59
neomycin-bacitracin zn-polymyxin	239	NESINA (alogliptin benzoate)	44	NEXIUM 24HR CLEAR MINIS CPDR (esomeprazole magnesium)	257
neomycin-polymy-dexameth OINT	241	NESTABS	226	NEXIUM 24HR CPDR (esomeprazole magnesium)	257
neomycin-polymy-dexameth SUSP	241	NESTABS DHA	226	NEXIUM CPDR (esomeprazole magnesium)	257
neomycin-polymyxin-gramicidin .	239	NESTABS ONE	226	NEXIUM I.V. 40 MG (esomeprazole sodium)	257
neomycin-polymyxin-hc (ophth) .	241	NEULASTA ONPRO KIT PSKT ..	135	NEXIUM PACK (esomeprazole magnesium)	257
neomycin-polymyxin-hc (otic) SOLN .	244	NEULASTA SOSY	135	NEXIUM PACK	257
neomycin-polymyxin-hc (otic) SUSP .	244	NEUPOGEN SOLN 300 MCG/ML	135	NEXLETOL	55
NEOPHE POWD	114	NEUPOGEN SOLN 480 MCG/1.6ML	135	NEXLIZET	55
NEOPHE TABS	115	NEUPOGEN SOSY 300 MCG/0.5ML	135	NEXPLANON	99
NEOPROFEN (ibuprofen lysine) ..	12	NEUPOGEN SOSY 480 MCG/0.8ML	135	NEXTERONE	24
NEORAL CAPS 100 MG (cyclosporine modified (for microemulsion))	222	NEUPRO	78	NEXTSTELLIS	98
NEORAL CAPS 25 MG (cyclosporine modified (for microemulsion))	222	NEUROLITE	113	NEXVIAZYME	121
		NEURONTIN CAPS 100 MG		NGENLA	119
				niacin (antihyperlipidemic) TBCR 500 MG	57

niacin (antihyperlipidemic) TBCR 750 MG, 1000 MG	57	NINLARO	74	NITROSTAT SUBL 0.3 MG, 0.4 MG (nitroglycerin)	22
NIASPAN TBCR 1000 MG (niacin (antihyperlipidemic))	57	NIPENT	76	NITROSTAT SUBL 0.4 MG (nitroglycerin)	22
nicardipine hcl CAPS	90	NIPRIDE RTU (nitroprusside sodium-sodium chloride)	61	NITROSTAT SUBL 0.6 MG (nitroglycerin)	22
nicardipine hcl SOLN	90	nisoldipine	91	NITYR TABS	121
NICARDIPINE HYDROCHLORIDE SOLN	90	nitazoxanide TABS	62	NIVA THYROID TABS	255
NICODERM CQ PT24 TD (nicotine) . 252		nitisinone CAPS	121	NIVA-PLUS TABS	226
NICORETTE GUM (nicotine polacrilex)	252	NITRO-BID OINT	22	NIVESTYM SOLN 300 MCG/ML . 135	
NICORETTE LOZG (nicotine polacrilex)	252	NITRO-DUR PT24 0.1 MG/HR, 0.2 MG/HR, 0.4 MG/HR (nitroglycerin) 22		NIVESTYM SOLN 480 MCG/1.6ML 135	
NICORETTE MINI LOZG (nicotine polacrilex)	252	NITRO-DUR PT24 0.3 MG/HR, 0.6 MG/HR, 0.8 MG/HR (nitroglycerin) 22		NIVESTYM SOSY 300 MCG/0.5ML 135	
NICORETTE STARTER KIT GUM (nicotine polacrilex)	252	NITRO-DUR PT24	22	NIVESTYM SOSY 480 MCG/0.8ML 135	
nicotine polacrilex GUM	252	nitrofurantoin	64	NIX CREME RINSE LIQD EX (permethrin)	112
nicotine polacrilex LOZG	252	NITROFURANTOIN	65	nizatidine CAPS 150 MG	256
nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR	252	nitrofurantoin macrocrystal	65	nizatidine CAPS 300 MG	256
NICOTINE TRANSDERMAL SYSTEM KIT	252	nitrofurantoin monohyd macro	65	NOC DURNA SUBL	122
NICOTROL INHALER INHA	252	nitroglycerin (intra-anal)	21	NORDITROPIN FLEXPPO SOPN 119	
NICOTROL NS SOLN	252	nitroglycerin in d5w	22	norelgestromin-ethinyl estradiol ... 98	
NIFEDIPINE	96	nitroglycerin PT24 0.1 MG/HR, 0.2 MG/HR, 0.4 MG/HR	22	norepinephrine bitartrate IV	265
nifedipine CAPS	91	nitroglycerin PT24 0.6 MG/HR	22	NOREPINEPHRINE BITARTRATE/DEXTROSE SOLN 5 %-16 MG/250ML, 5 %-4 MG/250ML, 5 %-8 MG/250ML	265
nifedipine TB24	91	NITROGLYCERIN SOLN IV	22	NOREPINEPHRINE BITARTRATE/SODIUM CHLORIDE SOLN 0.9 %-16 MG/250ML, 0.9 %-4 MG/250ML, 0.9 %-8 MG/250ML . 265	
NILANDRON (nilutamide)	70	nitroglycerin SOLN TL 0.4 MG/SPRAY	22	NOREPINEPHRINE/SODIUM CHLORIDE SOLN 0.9 %-16	
nilutamide	70	nitroglycerin SUBL 0.3 MG, 0.4 MG 22			
NIMBEX SOLN (cisatracurium besylate)	234	nitroglycerin SUBL 0.6 MG	22		
nimodipine CAPS	91	NITROLINGUAL SOLN TL (nitroglycerin)	22		
		nitroprusside sodium	61		
		nitroprusside sodium-sodium chloride	61		

MG/250ML, 0.9 %-4 MG/250ML, 0.9 %-8 MG/250ML	265	NORPACE CR CP12	24	6MM	192
norethin acet & estrad-fe CAPS ...	98	NORPRAMIN TABS 10 MG, 25 MG (desipramine hcl)	42	NOVOFINE PLUS PEN NEEDLE32G X 4MM	192
norethin acet & estrad-fe CHEW ..	98	NORTHERA 100 MG, 200 MG (droxidopa)	265	NOVOLIN 70/30 FLEXPEN RELION SUPN	48
norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG	98	NORTHERA 300 MG (droxidopa) 265		NOVOLIN 70/30 FLEXPEN SUPN	48
norethindrone & eth estradiol	98	nortriptyline hcl CAPS	42	NOVOLIN 70/30 RELION SUSP ..	48
norethindrone & ethinyl estradiol-fe 98		nortriptyline hcl SOLN	42	NOVOLIN 70/30 SUSP	48
norethindrone (contraceptive)	99	NORVASC TABS 10 MG (amlodipine besylate)	91	NOVOLIN N FLEXPEN RELION SUPN	48
norethindrone acet & eth estra TABS 98		NORVASC TABS 2.5 MG (amlodipine besylate)	91	NOVOLIN N FLEXPEN SUPN	48
norethindrone acetate TABS	248	NORVASC TABS 5 MG (amlodipine besylate)	91	NOVOLIN N RELION SUSP	48
norethindrone acetate-ethinyl estradiol	124	NORVIR PACK	84	NOVOLIN N SUSP	48
norethindrone acetate-ethinyl estradiol-fe	98	NORVIR TABS (ritonavir)	84	NOVOLIN R FLEXPEN RELION SOPN IJ	48
norethindrone-eth estradiol (triphasic)	98	NOURIANZ	77	NOVOLIN R FLEXPEN SOPN IJ ..	48
NORGESIC FORTE (orphenadrine w/ aspirin & caff)	229	NOVA SAFETY LANCETS 23G .	152	NOVOLIN R RELION SOLN IJ	48
norgestimate-ethinyl estradiol (triphasic)	98	NOVA SAFETY LANCETS 28G .	152	NOVOLIN R SOLN IJ	48
norgestimate-ethinyl estradiol	98	NOVA SUREFLEX LANCETS ...	153	NOVOLOG FLEXPEN RELION SOPN	48
norgestrel & ethinyl estradiol 30 MCG-0.3 MG	98	NOVA SUREFLEX LANCING DEVICE MISC	153	NOVOLOG FLEXPEN SOPN	48
NORITATE CREA	112	NOVAREL IM 5000 UNIT	119	NOVOLOG MIX 70/30 PREFILLED FLEXPEN RELION SUPN	48
NORLIQVA SOLN	91	NOVAVAX COVID-19 VACCINE SUSP	263	NOVOLOG MIX 70/30 PREFILLED FLEXPEN SUPN	48
NORMOSOL -R	219	NOVAVAX COVID-19 VACCINE/2023-24 SUSP	263	NOVOLOG MIX 70/30 RELION SUSP	48
NORMOSOL-M/D5W	219	NOVAVAX COVID-19 VACCINE/2024-25 SUSY	263	NOVOLOG MIX 70/30 SUSP	49
NORMOSOL-R	219	NOVOEIGHT	131	NOVOLOG PENFILL SOCT	49
NORPACE CAPS (disopyramide phosphate)	24	NOVOFINE AUTOCOVER PEN NEEDLE 30G X 8MM	192	NOVOLOG RELION SOLN IJ	49
		NOVOFINE PEN NEEDLE 32G X		NOVOLOG SOLN IJ	49
				NOVOSEVEN RT	131
				NOXAFIL PACK	54

NOXAFIL SOLN (posaconazole) .. 54	NUZYRA TABS .....254	OCUFLOX (ofloxacin (ophth)) ...239
NOXAFIL SUSP (posaconazole) .. 54	NYMALIZE SOLN 6 MG/ML 91	ODACTRA SUBL .....5
NOXAFIL TBEC (posaconazole) .. 54	NYSTATIN (nystatin (mouth-throat)) . 224	ODEFSEY .....84
NPLATE .....135	nystatin (mouth-throat) .....224	ODOMZO .....69
NUBEQA .....70	nystatin (topical) CREA .....103	OFEV .....253
NUCALA SOAJ .....25	nystatin (topical) OINT .....103	ofloxacin (ophth) .....239
NUCALA SOLR .....25	nystatin (topical) POWD EX .....103	ofloxacin (otic) .....244
NUCALA SOSY 100 MG/ML .....25	nystatin TABS .....53	ofloxacin 300 MG, 400 MG .....125
NUCALA SOSY 40 MG/0.4ML .....25	nystatin-triamcinolone CREA .....103	OGIVRI .....69
NUCYNTA ER TB12 100 MG, 150 MG, 200 MG, 250 MG .....16	nystatin-triamcinolone OINT .....103	OGSIVEO 100 MG, 150 MG .....74
NUCYNTA ER TB12 50 MG .....16	NYVEPRIA .....135	OGSIVEO 50 MG .....74
NUCYNTA TABS .....16	OB COMPLETE ONE .....226	OHTUVAYRE .....26
NUEDEXTA .....252	OB COMPLETE PETITE .....226	OJEMDA SUSR .....74
NULIBRY .....121	OB COMPLETE PREMIER .....226	OJEMDA TABS .....74
NULOJIX .....222	OB COMPLETE TABS .....226	OJJAARA .....74
NUMBRINO .....229	OB COMPLETE/DHA .....226	olanzapine SOLR .....81
NUPLAZID CAPS .....79	OBIZUR .....131	olanzapine TABS .....81
NUPLAZID TABS 10 MG .....79	OCALIVA .....125	olanzapine TBDP .....81
NURTEC .....216	OCREVUS .....251	olanzapine-fluoxetine hcl .....249
NUTROPIN AQ NUSPIN 10 SOPN 120	OCREVUS ZUNOVO SOLN SC .251	OLINVYK .....16
NUTROPIN AQ NUSPIN 20 SOPN 120	OCTAGAM SOLN .....246	olmesartan medoxomil 20 MG .....59
NUTROPIN AQ NUSPIN 5 SOPN 120	OCTAPLAS BLOOD GROUP A .132	olmesartan medoxomil 40 MG .....59
NUVARING (etonogestrel-ethinyl estradiol) .....98	OCTAPLAS BLOOD GROUP AB 132	olmesartan medoxomil 5 MG .....59
NUVESSA .....264	OCTAPLAS BLOOD GROUP B .132	olmesartan medoxomil-amlodipine- hydrochlorothiazide .....61
NUVIGIL (armodafinil) .....4	OCTAPLAS BLOOD GROUP O .132	olmesartan medoxomil- hydrochlorothiazide .....61
NUWIQ KIT .....131	octreotide acetate KIT 20 MG ....123	olopatadine hcl (nasal) .....229
NUZYRA SOLR .....254	octreotide acetate KIT 30 MG ....123	olopatadine hcl 0.1 %243
	octreotide acetate SOLN .....123	olopatadine hcl 0.2 %243
	octreotide acetate SOSY .....123	OLPRUVA THPK 3 GM, 4 GM, 5

GM, 6 GM, 6.67 GM	121	ondansetron hcl TABS 4 MG, 8 MG 52	ONETOUCH VERIO TEST STRIPS STRP	114	
OLUMIANT 1 MG, 2 MG	6	ondansetron TBDP 16 MG	52	ONFI SUSP (clobazam)	34
OLUX FOAM (clobetasol propionate) 109		ondansetron TBDP 4 MG, 8 MG ..	52	ONFI TABS (clobazam)	34
OLUX-E (clobetasol propionate emulsion)	109	ONETOUCH DELICA PLUS LANCETS EXTRA FINE 33G	153	ONGENTYS	77
omega-3-acid ethyl esters	55	ONETOUCH DELICA PLUS LANCETS FINE 30G	153	ONGLYZA 2.5 MG (saxagliptin hcl) 45	
OMEGAVEN	235	ONETOUCH DELICA PLUS LANCING DEVICE MISC	153	ONGLYZA 5 MG (saxagliptin hcl) .	45
OMEPRAZOLE	96	ONETOUCH DELICA SAFETY LANCING DEVICE	153	ONIVYDE	77
omeprazole CPDR 10 MG	257	ONETOUCH DELICA SAFETY LANCING DEVICE	153	ONPATTRO	252
omeprazole CPDR 20 MG	257	ONETOUCH DELICA SAFETY LANCING DEVICE 30G	153	ONTRUZANT	69
omeprazole CPDR 40 MG	257	ONETOUCH ULTRA 2 KIT	153	ONUREG TABS	67
omeprazole-sodium bicarbonate CAPS	258	ONETOUCH ULTRA BLUE TESTSTRIP STRP	114	ONYDA XR SUER	3
omeprazole-sodium bicarbonate PACK	258	ONETOUCH ULTRA CONTROL LIQD	153	OPDIVO	68
OMIDRIA	242	ONETOUCH ULTRA CONTROL SOLUTION LIQD	153	OPDUALAG	72
OMISIRGE	69	ONETOUCH ULTRA STRP	114	OPFOLDA	121
OMNARIS SUSP	230	ONETOUCH ULTRASOFT 2 LANCETS FINE 30G	153	OPILL	99
OMNIPAQUE SOLN CO 350 MG/ML 114		ONETOUCH ULTRASOFT LANCETS	153	opium tincture	50
OMNISCAN SOLN IV	114	ONETOUCH VERIO FLEX BLOOD GLUCOSE MONITORING SYSTEM DEVI	153	OPSUMIT	93
OMNITROPE SOCT	120	ONETOUCH VERIO FLEX BLOOD GLUCOSE MONITORING SYSTEM KIT	153	OPSYNVI	92
OMNITROPE SOLR SC	120	ONETOUCH VERIO LEVEL 3 CONTROL SOLUTION LIQD	153	OPTICHAMBER DIAMOND MISC 215	
OMVOH SOAJ	127	ONETOUCH VERIO LEVEL 4 CONTROL SOLUTION LIQD	153	OPTICHAMBER DIAMOND/LARFACE MASK DEVI	215
OMVOH SOLN	127			OPTICHAMBER DIAMOND/MEDIUM FACE MASK MISC	215
OMVOH SOSY	127			OPTICHAMBER DIAMOND/SMALLFACE MASK MISC	215
ONCASPAR	76			OPVEE NA	51
ondansetron hcl SOLN IJ	52			OPZELURA	110
ondansetron hcl SOLN OR 4 MG/5ML	52			ORA-BLEND SF SUSP	247
ondansetron hcl SOSY	52				

ORA-BLEND SUSP	247	ORILISSA 200 MG	119	oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML .....	.67
ORACEA (doxycycline (rosacea)) 112		ORKAMBI PACK 125 MG-100 MG, 188 MG-150 MG .....	.253	oxandrolone 2.5 MG	20
ORACIT	129	ORKAMBI PACK 94 MG-75 MG .	.253	oxaprozin TABS	12
ORAL CITRATE	129	ORKAMBI TABS .....	.253	oxazepam CAPS	23
ORAL SUSPEND LIQD	247	ORLADEYO .....	.132	oxcarbazepine SUSP	37
ORAL SYRUP SF SYRP	247	orphenadrine citrate SOLN 30 MG/ML .....	.228	oxcarbazepine TABS 150 MG, 300 MG	37
ORALAIR SUBL	5	orphenadrine citrate TB12 .....	.228	oxcarbazepine TABS 600 MG	37
ORA-PLUS LIQD	247	orphenadrine w/ aspirin & caff ...	.229	oxcarbazepine TB24 150 MG, 300 MG	37
ORAPRED ODT TBDP (prednisolone sodium phosphate)	100	ORSERDU 345 MG .....	.70	oxcarbazepine TB24 600 MG	37
ORA-SWEET SF SYRP 10 %-9 % 247		ORSERDU 86 MG .....	.70	OXERVATE	240
ORA-SWEET SYRP	247	oseltamivir phosphate CAPS 30 MG, 45 MG .....	.87	oxiconazole nitrate CREA	103
ORBACTIV	63	oseltamivir phosphate CAPS 75 MG .	87	OXISTAT CREA (oxiconazole nitrate)	103
ORENCIA CLICKJECT SOAJ	13	oseltamivir phosphate SUSR .....	.87	OXISTAT LOTN	103
ORENCIA SOLR	13	OSENI 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG (alogliptin-pioglitazone) .....	.43	OXLUMO	129
ORENCIA SOSY 125 MG/ML	13	OSMOLEX ER TB24 129 MG .....	.78	OXTELLAR XR TB24 150 MG, 300 MG (oxcarbazepine)	37
ORENCIA SOSY 50 MG/0.4ML ...	13	OTEZLA TABS 20 MG .....	.12	OXTELLAR XR TB24 600 MG (oxcarbazepine)	37
ORENCIA SOSY 87.5 MG/0.7ML .	13	OTEZLA TABS 30 MG .....	.12	oxybutynin chloride SOLN	259
ORENITRAM TBCR	93	OTEZLA TBPB .....	.12	oxybutynin chloride TABS 2.5 MG 259	
ORENITRAM TITRATION KIT MONTH 1 TEPK	93	OTOVEL (ciprofloxacin-fluocinolone acetone) .....	.245	oxybutynin chloride TABS 5 MG .	259
ORENITRAM TITRATION KIT MONTH 2 TEPK	93	OTREXUP SOAJ 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 .....	.7	oxybutynin chloride TB24 10 MG .	259
ORENITRAM TITRATION KIT MONTH 3 TEPK	93	OVIDE (malathion) .....	.112	oxybutynin chloride TB24 15 MG .	259
ORFADIN CAPS (nitisinone)	121	OXACILLIN SODIUM 2 GM/50ML- 300 MG/50ML .....	.247	oxybutynin chloride TB24 5 MG ..	259
ORFADIN SUSP	121	OXACILLIN SODIUM IJ 1 GM, 2 GM ..	.247	oxycodone hcl CAPS	16
ORGOVYX	70	oxacillin sodium IJ 1 GM, 2 GM ..	.247	oxycodone hcl CONC 100 MG/5ML 16	
ORIAHNN	124			OXYCODONE HCL POWD	16
ORILISSA 150 MG	119				

oxycodone hcl SOLN	16	PADCEV	68	PANCREAZE CPEP 83900 UNIT-54700 UNIT-21000 UNIT	116
oxycodone hcl T12A 10 MG, 20 MG, 40 MG	16	PALFORZIA INITIAL DOSE ESCALATION CSPK	5	PANDEL	109
oxycodone hcl T12A 80 MG	16	PALFORZIA LEVEL 1 CSPK	5	PANHEMATIN 350 MG	132
oxycodone hcl TABS	17	PALFORZIA LEVEL 10 CSPK	5	pantoprazole sodium PACK	257
oxycodone w/ acetaminophen SOLN 18		PALFORZIA LEVEL 11 (MAINTENANCE) PACK	5	pantoprazole sodium SOLR	257
oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-2.5 MG, 325 MG-5 MG, 325 MG-7.5 MG ...	18	PALFORZIA LEVEL 11 (TITRATION) PACK	5	pantoprazole sodium TBEC	257
OXYCONTIN T12A 10 MG, 15 MG, 20 MG	17	PALFORZIA LEVEL 2 CSPK	5	PANTOPRAZOLE SODIUM/SODIUM CHLORIDE	257
OXYCONTIN T12A 30 MG, 40 MG, 60 MG	17	PALFORZIA LEVEL 3 CSPK	5	PANZYGA	246
OXYCONTIN T12A 80 MG	17	PALFORZIA LEVEL 4 CSPK	5	papaverine hcl SOLN	92
oxymorphone hcl TABS	17	PALFORZIA LEVEL 5 CSPK	5	PARAGARD INTRAUTERINE COPPER CONTRACEPTIVE T380A	99
oxymorphone hcl TB12 40 MG	17	PALFORZIA LEVEL 6 CSPK	5	paricalcitol CAPS	121
oxymorphone hcl TB12 5 MG, 7.5 MG, 10 MG, 15 MG, 20 MG, 30 MG	17	PALFORZIA LEVEL 7 CSPK	5	paricalcitol SOLN	121
oxytocin	245	PALFORZIA LEVEL 8 CSPK	5	PARLODEL CAPS (bromocriptine mesylate)	78
OXYTROL PTTW	259	PALFORZIA LEVEL 9 CSPK	5	PARLODEL TABS (bromocriptine mesylate)	78
OYSTER SHELL CALCIUM/D TABS .	219	paliperidone 1.5 MG, 3 MG, 9 MG	80	PARNATE (tranylcypromine sulfate) 40	
OZEMPIC SOPN 2 MG/1.5ML	45	paliperidone 6 MG	80	paroxetine hcl SUSP	41
OZEMPIC SOPN	45	palonosetron hcl SOLN	52	paroxetine hcl TABS 10 MG, 40 MG .	41
OZOBAX DS SOLN OR (baclofen)	228	palonosetron hcl SOSY	52	paroxetine hcl TABS 20 MG	41
OZOBAX SOLN OR (baclofen) ..	228	PALONOSETRON HYDROCHLORIDE SOLN	52	paroxetine hcl TABS 30 MG	41
OZURDEX IMPL	241	PALYNZIQ 10 MG/0.5ML	121	paroxetine hcl TB24 12.5 MG, 37.5 MG	41
paclitaxel	77	PALYNZIQ 2.5 MG/0.5ML	121	paroxetine hcl TB24 25 MG	41
paclitaxel protein-bound particles .	77	PALYNZIQ 20 MG/ML	121	paroxetine mesylate (vasomotor)	252
PACLITAXEL PROTEIN-BOUND PARTICLES	77	PAMELOR CAPS (nortriptyline hcl)	42	PARSABIV 2.5 MG/0.5ML, 10 MG/2ML	121
		pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML	119		
		PAMIDRONATE DISODIUM SOLN	119		

PARSABIV 5 MG/ML	121	PEDVAX HIB SUSP	260	193
PATADAY 0.1 % (olopatadine hcl) 243		peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid	138	PEN NEEDLES 31GX8MM (5/16") 193
PATADAY 0.2 % (olopatadine hcl) 243		peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR 6.72 GM- 2.98 GM-5.84 GM-22.72 GM-240 GM	138	PEN NEEDLES 31GX8MM .....193 PEN NEEDLES 32G X 4MM .....193 PEN NEEDLES 32G X 5MM .....193
PATADAY EXTRA STRENGTH .243		peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR 6.74 GM- 2.97 GM-5.86 GM-22.74 GM-236 GM	138	PEN NEEDLES 32G X 6MM .....193 PEN NEEDLES 32GX4MM .....193 PEN NEEDLES 33G X 5/32" 193
PATANASE (olopatadine hcl (nasal))	229	peg 3350-potassium chloride-sod bicarbonate-sod chloride	138	PEN NEEDLES/29G X 1/2" .....193 PEN NEEDLES/31G X 1/4" .....193 PEN NEEDLES/31G X 3/16" 193 PEN NEEDLES/31G X 5/16" 193 PEN NEEDLES/31G X 6MM .....193 PEN NEEDLES/32G X 5/32" 193
PAXIL CR TB24 12.5 MG, 37.5 MG (paroxetine hcl)	41	PEGASYS SOLN	86	PENBRAYA .....260
PAXIL CR TB24 25 MG (paroxetine hcl)	41	PEGASYS SOSY	86	penciclovir .....106
PAXIL SUSP (paroxetine hcl)	41	PEMAZYRE	74	penicillamine CAPS 221 penicillamine TABS 221
PAXIL TABS 10 MG, 40 MG (paroxetine hcl)	41	PEMETREXED	67	penicillin g potassium .....246
PAXIL TABS 20 MG (paroxetine hcl) . 41		pemetrexed disodium SOLR	67	PENICILLIN G POTASSIUM IN ISO- OSMOTIC DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML 246
PAXIL TABS 30 MG (paroxetine hcl) . 41		PEMETREXED SOLN 100 MG/4ML, 500 MG/20ML	67	penicillin g sodium 246
PAXLOVID 100 MG-150 MG	85	PEMETREXED SOLN	67	penicillin v potassium SOLR 246 penicillin v potassium TABS .....246
pazopanib hcl	74	PEMFEXY	67	PENNSAID SOLN EX 2 % (diclofenac sodium (topical)) 104
PC LANCETS SUPER THIN 30G 153		PEMRYDI RTU SOLN	67	PENTAM 300 IJ (pentamidine isethionate)
PC UNIFINE PENTIPS 29G X1/2" 192		PEN NEEDLES	192	isethionate) 62 pentamidine isethionate IJ .....62
PC UNIFINE PENTIPS 31G X5MM MINI	192	PEN NEEDLES 29GX12MM	192	PENTASA CPCR (mesalamine) ..127
PC UNIFINE PENTIPS 31G X6MM ULTRA SHORT	192	PEN NEEDLES 30GX5MM .....192 PEN NEEDLES 30GX8MM .....192 PEN NEEDLES 31G X 3/16" 192 PEN NEEDLES 31G X 5MM ....192 PEN NEEDLES 31G X 6MM ....192 PEN NEEDLES 31G X 8MM ....192 PEN NEEDLES 31GX5/16" .....193 PEN NEEDLES 31GX6MM (1/4")		
PC UNIFINE PENTIPS 31G X8MM SHORT	192			
PEDIAPRED SOLN (prednisolone sodium phosphate)	100			
PEDIARIX SUSY	255			
PEDMARK	76			

PENTASA CPCR 250 MG	127	PERIFLEX ADVANCE POWD ...	115	PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/6M-4Y ..	263
pentazocine w/ naloxone hcl	19	PERIFLEX INFANT POWD	115	PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/BA.4/BA.5	263
PENTIPS 29G X 12MM	193	PERIFLEX JUNIOR POWD	115	PHARMACIST CHOICE SELECTLANCETS/ULTRA THIN	153
PENTIPS 29GX12MM	193	PERIFLEX LQ PKU LIQD	236	PHARMACIST CHOICE ULTRA THIN LANCETS	153
PENTIPS 31G X 5MM	193	perindopril erbumine	58	PHARMACIST CHOICE ULTRA THIN LANCETS 28G	154
PENTIPS 31G X 8MM	193	PERJETA	69	PHARMACIST CHOICE ULTRA THIN LANCETS 30G	154
PENTIPS 31GX5MM	194	permethrin CREA	112	PHARMACIST CHOICE ULTRA THIN LANCETS 31G	154
PENTIPS 31GX6MM	194	permethrin LIQD EX	113	PHARMACIST CHOICE ULTRA THIN LANCETS 33G	154
PENTIPS 31GX8MM	194	perphenazine TABS	82	PHEBURANE PLLT	121
PENTIPS 32G X 4MM	194	perphenazine-amitriptyline	249	phenelzine sulfate	40
PENTIPS 32GX4MM	194	PERSERIS PRSY	80	PHENERGAN SOLN IJ (promethazine hcl)	55
PENTIPS 32GX6MM	194	PERTZYE CPEP	116	PHENEX-1 POWD	115
pentobarbital sodium SOLN	137	PFIZER-BIONTECH COVID-19VACCINE SUSP	263	PHENEX-2 POWD	115
pentoxifylline	132	PFIZER-BIONTECH COVID-19VACCINE/5-11Y SUSP	263	phenobarbital ELIX	137
PEPCID AC MAXIMUM STRENGTH TABS (famotidine)	256	PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2023-24 SUSP	263	phenobarbital sodium SOLN	137
PEPCID AC TABS 20 MG (famotidine)	256	PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2024-25 SUSP	263	phenobarbital TABS	137
PEPCID TABS 20 MG (famotidine)	257	PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y SUSP	263	phenoxybenzamine hcl	58
PEPCID TABS 40 MG (famotidine)	256	PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2023-24 SUSP	263	phentolamine mesylate SOLR	58
PERCOCET TABS 325 MG-10 MG, 325 MG-2.5 MG, 325 MG-5 MG, 325 MG-7.5 MG (oxycodone w/ acetaminophen)	18	PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2024-25 SUSP	263	PHENYLADE AMINO ACID BAR	236
PERFECT POINT SAFETY LANCETS/28G	153	PFIZER-BIONTECH COVID-19VACCINE/ADULT RTU SUSP	263	PHENYLADE AMINO ACID BLEND PACK	236
PERFECT POINT SAFETY LANCETS/30G	153	PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/5-11Y	263	PHENYLADE DRINK MIX POWD	115
PERFOROMIST NEBU (formoterol fumarate)	30				
PERIDEX (chlorhexidine gluconate (mouth-throat))	224				

PHENYLADE ESSENTIAL DRINK MIX PACK 115	phenylephrine hcl (mydriatic) SOLN 237	265	phytonadione SOLN 10 MG/ML ..265
PHENYLADE ESSENTIAL DRINK MIX POWD 115	phenylephrine hcl (pressors) SOLN IV .....265		phytonadione TABS 5 MG 265
PHENYLADE ESSENTIAL DRINK MIX/FLAX/FIBER PACK .....115	PHENYLEPHRINE HYDROCHLORIDE SOLN IV (phenylephrine hcl (pressors)) ... 265		PIASKY .....131
PHENYLADE ESSENTIAL DRINK MIX/FLAX/FIBER POWD .....115	PHENYL-FREE 1 POWD .....115		PIFELTRO .....84
PHENYLADE GMP DRINK MIX/DHA/FIBER POWD .....115	PHENYL-FREE 2 POWD .....116		pilocarpine hcl (oral) 224
PHENYLADE GMP MIX-IN PACK 115	PHENYL-FREE 2HP POWD 116		PILOCARPINE HCL POWD .....97
PHENYLADE GMP MIX-IN POWD 115	phenytoin CHEW .....39		pilocarpine hcl SOLN 1 %, 2 %, 4 % . 238
PHENYLADE GMP PACK .....115	phenytoin sodium extended 100 MG . 39		pimecrolimus .....111
PHENYLADE GMP POWD .....116	phenytoin sodium extended 200 MG . 39		pimozide 252
PHENYLADE GMP READY LIQD OR 115	phenytoin sodium extended 300 MG . 39		pindolol TABS .....89
PHENYLADE GMP ULTRA PACK 115	phenytoin sodium SOLN .....39		pioglitazone hcl 15 MG 49
PHENYLADE MTE AMINO ACIDBLEND PACK .....236	phenytoin SUSP 39		pioglitazone hcl 30 MG, 45 MG ...49
PHENYLADE MTE POWD OR ...236	PHESGO 40 MG/ML-80 MG/ML-2000 UNIT/ML 72		pioglitazone hcl-glimepiride 43
PHENYLADE PHEBLOC POWD OR 236	PHESGO 60 MG/ML-60 MG/ML-2000 UNIT/ML 72		pioglitazone hcl-metformin hcl TABS . 43
PHENYLADE PHEBLOC TABS ..236	PHEXXI .....264		PIP LANCETS/30G 154
PHENYLADE POWD OR 236	PHLEXY-10 PACK .....116		PIP PEN NEEDLES 31G X 5MM 194
PHENYLADE RTD PKU 10 LIQD OR .....116	PHLEXY-VITS POWD .....225		PIP PEN NEEDLES 32G X 4MM 194
PHENYLADE40 DRINK MIX PACK 236	PHOS-NAK POWDER CONCENTRATE PACK (potassium & sodium phosphates) .....220		piperacillin sodium-tazobactam sodium 247
PHENYLADE60 DRINK MIX PACK 116	PHOSPHOLINE IODIDE .....238		PIQRAY 200MG DAILY DOSE ... 74
PHENYLADE60 DRINK MIX POWD . 116	PHOTREXA/PHOTREXA VISCOUS KIT 240		PIQRAY 250MG DAILY DOSE ... 74
	PHYTONADIONE LIQD 96		PIQRAY 300MG DAILY DOSE ... 74
	phytonadione SOLN 1 MG/0.5ML		pirfenidone CAPS 254
			pirfenidone TABS 267 MG 254
			pirfenidone TABS 534 MG, 801 MG 254
			piroxicam CAPS .....12

pitavastatin calcium	57	PKU SPHERE 15 PACK	116	podofilox GEL	111
PITOCIN (oxytocin)	245	PKU SPHERE 20 LIQD OR	116	podofilox SOLN	111
PKU 2 POWD	116	PKU SPHERE 20 PACK	116	POKONZA PACK OR	220
PKU 3 POWD	116	PKU START POWD	116	POLIVY	68
PKU AIR20 GOLD LIQD OR	116	PKU TRIO POWD	116	polyethylene glycol 3350 PACK ..	139
PKU AIR20 GREEN LIQD OR ...	116	PLAN B ONE-STEP (levonorgestrel (emergency oc))	99	polyethylene glycol 3350 POWD .	139
PKU AIR20 YELLOW LIQD OR ..	116	PLAQUENIL (hydroxychloroquine sulfate)	65	polymyxin b sulfate SOLR	64
PKU COOLER 10 LIQD OR	116	PLASMA-LYTE A (electrolyte-a)	219	polymyxin b-trimethoprim	239
PKU COOLER 15 LIQD OR	116	PLASMA-LYTE-148 (electrolyte-148)	219	POMALYST	71
PKU COOLER 20 LIQD OR	116	PLAVIX 75 MG (clopidogrel bisulfate)	133	POMBILITI	121
PKU EASY MICROTABS PLUS TBEC	116	PLEGISOL (cardioplegic soln) ...	92	PONVORY 14-DAY STARTER PACK TBPK	251
PKU EASY MICROTABS TBEC .	116	PLEGRIDY SOAJ SC 125 MCG/0.5ML	251	PONVORY TABS	251
PKU EASY SHAKE & GO POWD 116		PLEGRIDY SOSY IM	251	PORTRAZZA	69
PKU EASY TABS	116	PLEGRIDY STARTER PACK SOAJ SC	251	posaconazole SOLN	54
PKU EXPLORE10 PACK	116	PLEGRIDY STARTER PACK SOSY SC	251	posaconazole SUSP	54
PKU EXPLORE5 PACK	116	PLENVU	139	posaconazole TBEC	54
PKU EXPRESS 15 PLUS+ PACK 116		plerixafor	136	POSFREA SOLN	52
PKU EXPRESS 20 PLUS+ PACK 116		PLUVICTO	76	POSLUMA	113
PKU GEL PACK	116	PNEUMOVAX 23 IJ 25 MCG/0.5ML .	260	pot phosphate monobasic w/ sod phosphate dibasic & monobasic .	220
PKU GO PACK	116	PNEUMOVAX 23/1 DOSE IJ 25 MCG/0.5ML	260	potassium acetate SOLN 2 MEQ/ML .	220
PKU GOLIKE 10G P.E. BAR	236	PNV-DHA+DOCUSATE	226	POTASSIUM ACETATE SOLN 2 MEQ/ML	220
PKU GOLIKE 10G PE BAR	236	PNV-OMEGA	226	potassium bicarbonate TBEF	220
PKU GOLIKE PLUS 16+ PACK ..	236	POCKET CHAMBER DEVI	215	potassium chloride CPCR	220
PKU GOLIKE PLUS 4-16 PACK .	236	PODOCON-25 SOLN	111	potassium chloride in dextrose & sodium chloride 5 %-0.075 %-0.45 %, 5 %-0.15 %-0.225 %, 5 %-0.15 %- 0.9 %, 5 %-10 MEQ/L-0.45 %, 5 %- 20 MEQ/L-0.2 %, 5 %-20 MEQ/L- 0.225 %, 5 %-20 MEQ/L-0.45 %, 5	
PKU LOPHLEX LQ 20 LIQD OR .	116				
PKU MAXAMUM POWD OR	236				
PKU PERIFLEX JUNIOR PLUS POWD	116				

%-20 MEQ/L-0.9 %, 5 %-30 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.9 %	PRADAXA CAPS (dabigatran etexilate mesylate)	PRECEDEX SOLN	137
potassium chloride in dextrose 5 %-10 MEQ/L, 5 %-20 MEQ/L	PRADAXA CAPS 75 MG (dabigatran etexilate mesylate)	PRECISION XTRA	114
potassium chloride in nacl 20 MEQ/L-0.45 %, 20 MEQ/L-0.9 %, 40 MEQ/L-0.9 %	PRADAXA PACK 20 MG, 150 MG	PRED FORTE (prednisolone acetate (ophth))	241
potassium chloride microencapsulated crystals er	PRADAXA PACK 30 MG, 40 MG, 50 MG, 110 MG	PRED MILD	241
potassium chloride PACK OR 20 MEQ	pralatrexate	prednicarbate OINT	109
POTASSIUM CHLORIDE SOLN IV (potassium chloride)	PRALUENT SOAJ	prednisolone acetate (ophth)	241
potassium chloride SOLN OR 10 %, 20 %	pramipexole dihydrochloride TABS 0.125 MG	PREDNISOLONE SODIUM PHOSPHATE	241
potassium chloride TBCR	pramipexole dihydrochloride TABS 0.25 MG	PREDNISOLONE SODIUM PHOSPHATE POWD	100
POTASSIUM CHLORIDE/DEXTROSE/LACTATED RINGERS	pramipexole dihydrochloride TABS 0.5 MG	prednisolone sodium phosphate SOLN 10 MG/5ML, 20 MG/5ML	100
POTASSIUM CHLORIDE/SODIUM CHLORIDE (potassium chloride in nacl)	pramipexole dihydrochloride TABS 0.75 MG	prednisolone sodium phosphate SOLN 5 MG/5ML, 6.7 MG/5ML, 15 MG/5ML, 25 MG/5ML	100
potassium citrate (alkalinizer) TBCR 15 MEQ, 540 MG, 1080 MG, 1620 MG	pramipexole dihydrochloride TABS 1 MG	prednisolone sodium phosphate TBDP	100
potassium citrate-citric acid SOLN 129	pramipexole dihydrochloride TABS 1.5 MG	prednisolone SOLN	100
POTASSIUM PHOSPHATE/SODIUM CHLORIDE 0.9 %-1180 MG/250ML-1120 MG/250ML	pramipexole dihydrochloride TB24	prednisolone TABS	100
POTASSIUM PHOSPHATES 236 MG/ML-224 MG/ML, 71 MEQ/15ML-45 MMOLE/15ML (potassium phosphates)	prasugrel hcl	PREDNISONE INTENSOL CONC 100	
potassium phosphates 236 MG/ML-224 MG/ML	pravastatin sodium 10 MG	PREDNISONE POWD	100
POTELIGEO	pravastatin sodium 20 MG, 40 MG	prednisone SOLN	100
	pravastatin sodium 80 MG	prednisone TABS	100
	PRAXBIND	prednisone TBPK	100
	praziquantel	PREFERRED PLUS INSULIN SYRINGE/U-100/0.3ML/29G X 1/2"	194
	prazosin hcl CAPS 1 MG	PREFERRED PLUS INSULIN SYRINGE/U-100/0.3ML/30G X 5/16"	194
	prazosin hcl CAPS 2 MG	PREFERRED PLUS INSULIN SYRINGE/U-100/0.5ML/28G X 1/2"	194
	prazosin hcl CAPS 5 MG		
	PRECEDEX SOLN (dexmedetomidine hcl in sodium chloride)		

PREFERRED PLUS INSULIN SYRINGE/U-100/0.5ML/29G X 1/2" . 194	pregabalin SOLN 37	PRENATE ELITE 75 MG-21 MG-330 MCG-400 MCG-600 UNIT-13 MCG- 3.5 MG-21 MG-3 MG-155 MG-25 MG-15 MG-1.5 MG-2600 UNIT-150 MCG-40 UNIT-600 MCG-20 MG .226
PREFERRED PLUS INSULIN SYRINGE/U-100/0.5ML/30G X 5/16" .....194	PREGNENOLONE 97	
	PREGNENOLONE MICRONIZED 97	
	PREGNYL IM 119	PRENATE ENHANCE 226
PREFERRED PLUS INSULIN SYRINGE/U-100/1ML/28G X 1/2" 194	PREGNYL W/DILUENT	PRENATE ESSENTIAL 90 MG-26 MG-280 MCG-400 MCG-220 UNIT- 13 MCG-155 MG-50 MG-300 MG- 150 MCG-10 UNIT-40 MG-600 MCG- 18 MG 226
PREFERRED PLUS INSULIN SYRINGE/U-100/1ML/29G X 1/2" 194	BENZYLALCOHOL/NACL IM 119	
	PREHEVBRIO 263	
PREFERRED PLUS INSULIN SYRINGE/U-100/1ML/30G X 5/16" 194	PREMARIN 264	PRENATE MINI 60 MG-26 MG-280 MCG-400 MCG-1000 UNIT-13 MCG- 80 MG-25 MG-350 MG-18 MG-150 MCG-10 UNIT-600 MCG-25 MG .227
	PREMARIN SOLR 124	PRENATE PIXIE 227
	PREMARIN TABS 125	PRENATE RESTORE 227
	PREMPHASE 124	
PREFERRED PLUS LANCETS COLORED 21G 154	PREMPRO 124	
	PRENAISSANCE PLUS CAPS .. 226	
PREFERRED PLUS LANCETS SUPER THIN 30G 154	PRENATAL PLUS VITAMIN ANDMINERAL TABS 226	PREPIDIL GEL 245
PREFERRED PLUS LANCETS THIN 26G 154	PRENATAL TABS 120 MG-10 MG-1 MG-10 MCG-12 MCG-3 MG-20 MG- 1200 MCG-27 MG-200 MG-1.84 MG- 25 MG-2 MG-10 MG 226	PREVACID 24HR CPDR (lansoprazole) 257
PREFERRED PLUS UNIFINE PENTIPS 29G X 12MM 194	prenatal vit w/ ferrous fumarate-l methylfolate-folic acid 226	PREVACID CPDR 30 MG (lansoprazole) 258
PREFERRED PLUS UNIFINE PENTIPS 31G X 6MM ULTRA SHORT 194	prenatal vit w/ iron carbonyl-folic acid TABs 120 MG-10 MG-1.25 MG-315 UNIT-15 MCG-3.4 MG-10 MG-1 MG- 2 MG-15 MG-10 MG-20 UNIT-2100 UNIT-50 MG 226	PREVACID SOLUTAB TBDD (lansoprazole) 258
PREFERRED PLUS UNIFINE PENTIPS 31G X 8MM SHORT .. 194		PREVACID SOLUTAB TBDD 15 MG (lansoprazole) 257
PREFERRED PLUS UNIFINE PENTIPS 32GX4MM 194	PRENATAL without a w/ fe fumarate-l methylfolate-fa-dha 226	PREVDUO 50
PREFERRED PLUS UNIFINE PENTIPS/MINI/31GX5MM 195		PREVENT DROPSAFE SAFETY PEN NEEDLES 31GX1/4" 195
pregabalin (once-daily) 252	PRENATE 226	PREVENT DROPSAFE SAFETY PEN NEEDLES 31GX5/16" 195
pregabalin CAPS 225 MG 37	PRENATE AM 226	PREVIDENT 5000 BOOSTER PLUS PSTE DT (sodium fluoride (dental)) 224
pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG, 300 MG 37	PRENATE DHA 90 MG-26 MG-400 MCG-400 UNIT-25 MCG-155 MG-50 MG-300 MG-40 UNIT-600 MCG-18 MG 226	PREVIDENT 5000 DRY MOUTH GEL (sodium fluoride (dental)) ... 224
		PREVIDENT 5000 KIDS PSTE DT

(sodium fluoride (dental))	224	PRIORIX SUSR	263	PRO COMFORT SAFETY LANCETS	
PREVIDENT 5000 ORTHO		PRISTIQ (desvenlafaxine succinate)		30G PRESSURE ACTIVATED	154
DEFENSE PSTE DT (sodium fluoride (dental))	224	42		PROAIR DIGIHALER	30
PREVIDENT 5000 PLUS CREA (sodium fluoride (dental))	224	PRISTIQ 50 MG (desvenlafaxine succinate)	42	PROAIR RESPICLICK AEPB	30
PREVIDENT FLUORIDE GEL (sodium fluoride (dental))	224	PRIVIGEN SOLN	246	probenecid	130
PREVIDENT RINSE SOLN (sodium fluoride (dental))	224	PRO COMFORT INHALER SPACER CHAMBER ADULT MISC	215	procainamide hcl SOLN 100 MG/ML	24
PREVNAR 13	260	PRO COMFORT INHALER SPACER CHAMBER CHILD MISC	215	PROCARDIA XL TB24 (nifedipine)	91
PREVNAR 20	260	PRO COMFORT INHALER SPACER CHAMBER INFANT DEVI	215	PROCARE SPACER CHAMBER W/ADULT MASK DEVI	215
PREVYMIS SOLN 240 MG/12ML	85	PRO COMFORT INSULIN SYRINGES/0.5ML/30G X 1/2"	195	PROCARE SPACER CHAMBER W/CHILD MASK DEVI	215
PREVYMIS SOLN 480 MG/24ML	85	PRO COMFORT INSULIN SYRINGES/0.5ML/30G X 5/16"	195	PROCHAMBER VALVED HOLDINGCHAMBER DEVI	215
PREVYMIS TABS	85	PRO COMFORT INSULIN SYRINGES/0.5ML/31G X 5/16"	195	prochlorperazine	82
PREZCOBIX	84	PRO COMFORT INSULIN SYRINGES/1ML/30G X 1/2"	195	prochlorperazine edisylate 10 MG/2ML	82
PREZISTA SUSP	84	PRO COMFORT INSULIN SYRINGES/1ML/30G X 5/16"	195	PROCHLORPERAZINE MALEATE POWD	82
PREZISTA TABS 600 MG (darunavir)	84	PRO COMFORT INSULIN SYRINGES/1ML/31G X 5/16"	195	prochlorperazine maleate TABS	82
PREZISTA TABS 75 MG, 150 MG	84	PRO COMFORT LANCETS 30G	154	PROCRIT	135
PREZISTA TABS 800 MG (darunavir)	84	PRO COMFORT LANCETS 31G	154	PROCTOFOAM HC FOAM EX	21
PRIFTIN	66	PRO COMFORT PEN NEEDLES/31G X 8MM	195	PROCYSBI CPDR	129
PRILOSEC PACK	258	PRO COMFORT PEN NEEDLES/32G X 4MM	195	PROCYSBI PACK	129
PRIMACARE	227	PRO COMFORT PEN NEEDLES/32G X 5MM	195	PRODIGY AUTOCODE BLOOD GLUCOSE MONITORING SYSTEM KIT	154
PRIMAQUINE PHOSPHATE TABS (primaquine phosphate)	65	PRO COMFORT PEN NEEDLES/32G X 6MM	195	PRODIGY INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	195
primaquine phosphate TABS	65			PRODIGY INSULIN SYRINGE/1/2ML/31G X 5/16"	195
PRIMAXIN IV IV 500 MG-500 MG (imipenem-cilastatin)	62			PRODIGY INSULIN SYRINGE/1ML/28G X 1/2"	195
primidone 125 MG	37				
primidone 250 MG	37				
primidone 50 MG	37				

PRODIGY LANCING DEVICE MISC . 154	PROGRAF PACK 0.2 MG .....222	propylthiouracil .....255
PRODIGY NO CODING BLOOD GLUCOSE TEST STRIPS STRP .114	PROGRAF PACK 1 MG .....222	PROQUAD SUSR .....263
PRODIGY PRESSURE ACTIVATED SAFETY LANCETS .....154	PROGRAF SOLN .....222	PROSCAR (finasteride) .....130
PRODIGY TWIST TOP LANCETS 154	PROLASTIN-C SOLN .....252	PROSOL SOLN .....236
PROFILNINE .....131	PROLATE SOLN .....18	PROSTIN VR PEDIATRIC .....223
progesterone CAPS .....248	PROLATE TABS .....18	protamine sulfate .....133
PROGESTERONE MICRONIZED (SOY) .....96	PROLENSA (bromfenac sodium (ophth)) .....243	PROTONIX PACK (pantoprazole sodium) .....258
PROGESTERONE MICRONIZED (YAM) .....96	PROLIA SOSY .....119	PROTONIX SOLR (pantoprazole sodium) .....258
PROGESTERONE MICRONIZED 96	PROMACTA PACK .....135	PROTONIX TBEC (pantoprazole sodium) .....258
PROGESTERONE MILLED POWD 96	PROMACTA TABS .....135	protriptyline hcl .....42
progesterone OIL .....248	PROMETHAZINE HCL POWD ....97	PROVAYBLUE SOLN IV (methylene blue (antidote)) .....51
PROGESTERONE POWD .....97	promethazine hcl SOLN OR 6.25 MG/5ML .....55	PROVENGE .....69
PROGESTERONE ULTRA MICRONIZED .....96	promethazine hcl SUPP .....55	PROVENTIL HFA AERS (albuterol sulfate) .....30
PROGESTERONE WETTABLE (SOY) POWD .....97	promethazine hcl TABS .....55	PROVERA (medroxyprogesterone acetate) .....248
PROGESTERONE WETTABLE (YAM) POWD .....97	PROMETRIUM CAPS (progesterone) .....248	PROVIGIL (modafinil) .....4
PROGESTERONE WETTABLE POWD .....97	propafenone hcl CP12 .....24	PROZAC CAPS 10 MG (fluoxetine hcl) .....41
PROGLYCEM (diazoxide) .....44	propafenone hcl TABS .....24	PROZAC CAPS 20 MG (fluoxetine hcl) .....41
PROGRAF CAPS 0.5 MG (tacrolimus) .....222	proparacaine hcl .....240	PROZAC CAPS 40 MG (fluoxetine hcl) .....41
PROGRAF CAPS 1 MG (tacrolimus) . 222	propofol EMUL 200 MG/20ML, 500 MG/50ML, 1000 MG/100ML .....128	PRUDOXIN (doxepin hcl (antipruritic)) .....104
PROGRAF CAPS 5 MG (tacrolimus) . 222	propranolol hcl CP24 120 MG ....89	pseudoephedrine hcl TB12 .....230
	propranolol hcl CP24 60 MG, 80 MG, 160 MG .....89	PULMICORT FLEXHALER AEPB .27
	propranolol hcl SOLN OR 20 MG/5ML, 40 MG/5ML .....89	PULMICORT SUSP 0.25 MG/2ML, 0.5 MG/2ML (budesonide (inhalation)) .....27
	propranolol hcl TABS 10 MG, 20 MG 89	
	propranolol hcl TABS 40 MG .....89	
	propranolol hcl TABS 60 MG, 80 MG 89	

PULMICORT SUSP 1 MG/2ML (budesonide (inhalation))	27	PX PEN NEEDLE 29GX12MM ..	196	QNASL	230
PULMOZYME	253	PX PEN NEEDLE 31GX8MM	196	QNASL CHILDRENS	230
PURE COMFORT INHALER SPACER CHAMBER ADULT DEVI 215		PYLARIFY	113	QTERN	43
PURE COMFORT LANCETS 30G 154		PYLERA (bismuth subcitrate potassium-metronidazole- tetracycline)	258	QUADRACEL SUSP	255
PURE COMFORT PEN NEEDLE 32G X6MM	195	pyrazinamide	66	QUADRACEL SUSY	255
PURE COMFORT PEN NEEDLE 32G X8MM	196	pyridostigmine bromide SOLN OR	66	QUALAQUIN CAPS (quinine sulfate) 65	
PURE COMFORT PEN NEEDLE/32G X 5MM	196	pyridostigmine bromide TABS 30 MG	66	QUARTETTE (levonorgestrel-ethinyl estradiol (91-day))	98
PURE COMFORT PEN NEEDLE/32G X4MM	196	pyridostigmine bromide TABS 60 MG	66	quazepam	138
PURE COMFORT SAFETY PEN NEEDLE 31G X 5MM	196	pyridostigmine bromide TBCR	66	QUDEXY XR CS24 150 MG, 200 MG (topiramate)	37
PURE COMFORT SAFETY PEN NEEDLE 31G X 6MM	196	pyrimethamine	65	QUDEXY XR CS24 25 MG, 50 MG, 100 MG (topiramate)	37
PURE COMFORT SAFETY PEN NEEDLE 32G X 4MM	196	PYRUKYND TABS	133	QUELICIN SOLN (succinylcholine chloride)	230
PURIXAN SUSP	68	PYRUKYND TAPER PACK TBP 133		QUESTRAN LIGHT POWD (cholestyramine light)	56
PX ADVANCED LANCING DEVICE MISC	154	QALSODY	230	QUESTRAN PACK (cholestyramine) 56	
PX EXTRA SHORT PEN NEEDLES 31GX6MM	196	QBRELIS SOLN	58	QUESTRAN POWD (cholestyramine)	56
PX INSULIN SYRINGE/U- 100/0.5ML/30G X 1/2"	196	QC ADVANCED LANCING DEVICE MISC	154	quetiapine fumarate TABS 150 MG 81	
PX LANCETS MICROTHIN 33G	154	QC LANCETS SUPER THIN	155	quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG, 300 MG, 400 MG	81
PX LANCETS ULTRA THIN	154	QC UNIFINE PENTIPS 32GX4MM 196		quetiapine fumarate TB24 150 MG, 200 MG	81
PX LANCETS ULTRA THIN 28G 154		QC UNILET LANCETS 28G/ULTRA THIN	155	quetiapine fumarate TB24 50 MG, 300 MG, 400 MG	81
PX MINI PEN NEEDLES 31GX5MM 196		QC UNILET LANCETS 33G/MICRO THIN	155	QUILLICHEW ER CHER	4
		QDOLO SOLN (tramadol hcl)	17	QUILLIVANT XR SRER	4
		QELBREE 100 MG	3	QUILLIVANT XR SRER	5
		QELBREE 150 MG	3		
		QELBREE 200 MG	3		
		QINLOCK	74		

quinapril hcl	58	RADICAVA ORS SUSP	230	RASUVO SOAJ 7.5 MG/0.15ML	7
quinapril-hydrochlorothiazide	61	RADICAVA SOLN (edaravone) ..	230	RAVICTI	121
quinidine gluconate TBCR	24	RAGWITEK SUBL	6	RAYA SURE PEN NEEDLE 29GX 12MM	196
quinidine sulfate TABS	24	raloxifene hcl	120	RAYA SURE PEN NEEDLE 31GX 4MM	196
quinine sulfate CAPS 324 MG	65	ramelteon	138	RAYA SURE PEN NEEDLE 31GX 5MM	197
QULIPTA	216	ramipril CAPS 1.25 MG, 2.5 MG ..	58	RAYA SURE PEN NEEDLE 31GX 6MM	197
QUTENZA	111	ramipril CAPS 5 MG, 10 MG	58	RAYA SURE PEN NEEDLE 31GX 8MM	197
QUVIVIQ	138	RANEXA TB12 1000 MG (ranolazine)	22	RAYALDEE	121
QVAR REDIHALER 40 MCG/ACT 27		RANEXA TB12 500 MG (ranolazine) .	22	RAYOS TBEC	100
QVAR REDIHALER 80 MCG/ACT 27		ranolazine TB12 1000 MG	22	RAZADYNE ER CP24 (galantamine hydrobromide)	249
RA E-ZJECT LANCETS 28G	155	ranolazine TB12 500 MG	22	READYLANCE SAFETY LANCETS/23G/1.8MM	155
RA E-ZJECT LANCETS THIN 26G 155		RAPAFLO (silodosin)	130	READYLANCE SAFETY LANCETS/26G/1.8MM	155
RA E-ZJECT LANCETS THIN 28G 155		RAPAFLO 8 MG (silodosin)	130	READYLANCE SAFETY LANCETS/28G/1.8MM	155
RA E-ZJECT LANCETS ULTRATHIN 30G	155	RAPAMUNE SOLN (sirolimus) ..	222	READYLANCE SAFETY LANCETS/30G/1.6MM	155
RA INSULIN SYRINGE/0.5ML/29G X 1/2"	196	RAPAMUNE TABS 0.5 MG (sirolimus)	222	REBIF REBIDOSE SOAJ	251
RA INSULIN SYRINGE/1ML/29G X 1/2"	196	RAPAMUNE TABS 1 MG (sirolimus) .	222	REBIF REBIDOSE TITRATIONPACK SOAJ	251
RA INSULIN SYRINGE/U- 100/0.5ML/30G X 5/16"	196	RAPAMUNE TABS 2 MG (sirolimus) .	223	REBIF SOSY	251
RA INSULIN SYRINGE/U-100/1 ML/30G X 5/16"	196	RAPIVAB	87	REBIF TITRATION PACK SOSY	251
RA PEN NEEDLES 31G X 5MM3/16"	196	rasagiline mesylate	79	REBINYN	131
RA PEN NEEDLES 31G X 8MM5/16"	196	RASUVO SOAJ 10 MG/0.2ML	7	REBLOZYL	135
RABAVERT	263	RASUVO SOAJ 12.5 MG/0.25ML ..	7	REBYOTA	127
rabeprazole sodium TBEC	258	RASUVO SOAJ 15 MG/0.3ML	7	RECARBRIO	62
RADICAVA ORS STARTER KIT SUSP	230	RASUVO SOAJ 17.5 MG/0.35ML ..	7	RECLAST SOLN (zoledronic acid)	
		RASUVO SOAJ 20 MG/0.4ML	7		
		RASUVO SOAJ 22.5 MG/0.45ML ..	7		
		RASUVO SOAJ 25 MG/0.5ML	7		
		RASUVO SOAJ 30 MG/0.6ML	7		

119	RELION INSULIN SYRINGE	RELION PEN NEEDLES 32G X4MM
RECOMBINATE SOLR .....131	1ML/31GX15/64" .....197	.....197
RECOMBIVAX HB SUSP 263	RELION INSULIN SYRINGE/U-	RELION PEN NEEDLES 32G X5/32"
RECOMBIVAX HB SUSY 263	100/0.3ML/31G X 15/64" .....197	.....197
RECORLEV .....118	RELION INSULIN SYRINGE/U-	RELION PEN NEEDLES 32GX4MM
RECOTHROM 136	100/0.3ML/31G X 5/16" .....197	197
RECOTHROM/SPRAY	RELION INSULIN SYRINGE/U-	RELION PEN NEEDLES/31G X1/4" .
APPLICATOR KIT 136	100/0.5ML/29G X 1/2" 197	198
RECTIV (nitroglycerin (intra-anal))	RELION INSULIN SYRINGE/U-	RELION SHORT PEN
21	100/0.5ML/31G X 5/16" .....197	NEEDLES31GX8MM 198
regadenoson 113	RELION INSULIN SYRINGE/U-	RELION TRUE METRIX AIR BLOOD
REGLAN TABS (metoclopramide hcl)	100/1ML/31G X 15/64" .....197	GLUCOSE METER/BLUETOOTH
.....126	RELION INSULIN SYRINGE/U-	KIT 155
REGONOL SOLN IV .....66	100/1ML/31G X 5/16" .....197	RELION TRUE METRIX
RELAFEN DS 12	RELION KETONE TEST STRIPS	BLOODGLUCOSE TEST STRIPS
RELENZA DISKHALER .....87	STRP 114	STRP 114
RELEUKO SOLN 300 MCG/ML ..135	RELION LANCETS MICRO-	RELION ULTRA THIN
RELEUKO SOLN 480 MCG/1.6ML	THIN33G .....155	LANCETS/30G .....155
135	RELION LANCETS THIN 26G ...155	RELION ULTRA THIN LANCETS30G
RELEUKO SOSY 300 MCG/0.5ML	RELION LANCETS ULTRA-	.....155
135	THIN30G .....155	RELION ULTRA THIN PLUS
RELEUKO SOSY 480 MCG/0.8ML	RELION LANCING DEVICE KIT .155	LANCETS 32G .....155
135	RELION LANCING DEVICE MISC	RELION ULTRA THIN PLUS
RELEXXII TBCR 18 MG, 27 MG, 45	155	LANCETS 33G .....156
MG, 54 MG, 63 MG, 72 MG	RELION MINI PEN NEEDLES	RELISTOR SOLN 12 MG/0.6ML .128
(methylphenidate hcl) 5	31GX6MM .....197	RELISTOR SOLN 8 MG/0.4ML .. 128
RELEXXII TBCR 18 MG, 27 MG, 54	RELION PEN NEEDLES 29GX12MM	RELISTOR TABS .....128
MG .....5	.....197	RELIPAX (eletriptan hydrobromide)
RELEXXII TBCR 36 MG 5	RELION PEN NEEDLES 31G X6MM	217
RELEXXII TBCR 5	.....197	RELTONE CAPS 125
RELION 2-IN-1 LANCET DEVICES	RELION PEN NEEDLES 31G X8MM	REMERON SOLTAB TBDP
30G .....155	.....197	(mirtazapine) .....39
RELION INSULIN SYRINGE	RELION PEN NEEDLES 31GX6MM	REMERON TABS 15 MG, 30 MG
0.5ML/31G X 15/64" 197	197	(mirtazapine) .....40
	RELION PEN NEEDLES 31GX8MM	REMICADE 127
	197	

remifentanil hcl	17	MASK/MEDIUM/AEROECLIPSE	87
REMODULIN SOLN IJ	93	MISC	215
RENAGEL (sevelamer hcl)	128	REUSABLE COMFORTSEAL	
RENFLEXIS	127	MASK/SMALL/AEROECLIPSE MISC	215
RENVELA PACK (sevelamer		REVATIO SOLN (sildenafil citrate	
carbonate)	128	(pulmonary hypertension))	93
RENVELA TABS (sevelamer		REVATIO SUSR (sildenafil citrate	
carbonate)	128	(pulmonary hypertension))	93
repaglinide	49	REVATIO TABS (sildenafil citrate	
REPATHA PUSHTRONEX SYSTEM		(pulmonary hypertension))	93
SOCT	57	REVCIVI	121
REPATHA SOSY	57	REVLIMID	221
REPATHA SURECLICK SOAJ	57	REXTOVY LIQD	51
RESTASIS EMUL (cyclosporine		REXULTI	83
(ophth))	239	REYATAZ CAPS 200 MG, 300 MG	
RESTASIS MULTIDOSE EMUL ..	239	(atazanavir sulfate)	84
RESTORIL 15 MG, 30 MG		REYATAZ PACK	84
(temazepam)	138	REYVOW	217
RESTORIL 7.5 MG, 22.5 MG		REZDIFFRA	126
(temazepam)	138	REZLIDHIA	74
RETACRIT	135	REZUROCK	221
RETAVASE 10 UNIT	133	REZVOGLAR KWIKPEN	49
RETEVMO CAPS 40 MG	74	REZZAYO	53
RETEVMO CAPS 80 MG	74	R-GENE 10	113
RETEVMO TABS	74	RHOGAM ULTRA-FILTERED PLUS	
RETISERT	241	SOSY IM	246
RETROVIR CAPS (zidovudine) ...	84	RHOPHYLAC SOSY IJ	246
RETROVIR IV INFUSION SOLN ..	84	RHOPRESSA	240
RETROVIR SYRP (zidovudine) ...	84	RIABNI	68
REUSABLE COMFORTSEAL		RIASTAP	131
MASK/LARGE/AEROECLIPSE MISC		ribavirin (hepatitis c) CAPS	86
.....	215	ribavirin (hepatitis c) TABS 200 MG	
REUSABLE COMFORTSEAL			

risperidone microspheres	80	ROCALTRON SOLN OR (calcitriol) 122	RUBRACA	75
risperidone SOLN	80	ROCKLATAN	RUCONEST	131
risperidone TABS	80	ROCTAVIAN	rufinamide SUSP	37
risperidone TBDP 0.25 MG, 0.5 MG, 1 MG, 2 MG, 4 MG	80	rocuronium bromide SOLN	rufinamide TABS	37
risperidone TBDP 3 MG	81	roflumilast 250 MCG	RUKOBIA	84
RITALIN LA CP24 10 MG, 20 MG, 40 MG (methylphenidate hcl)	5	roflumilast 500 MCG	RUXIENCE	68
RITALIN LA CP24 30 MG (methylphenidate hcl)	5	ROLVEDON	RYALTRIS	229
RITALIN TABS (methylphenidate hcl)	5	romidepsin SOLR	RYANODEX SUSR	229
RITEFLO DEVI	215	ropinirole hydrochloride TABS 0.25 MG, 1 MG, 2 MG	RYBELSUS TABS	45
ritonavir TABS	84	ropinirole hydrochloride TABS 0.5 MG	RYBREVANT	68
RITUXAN	68	ropinirole hydrochloride TABS 3 MG 78	RYDAPT	75
RITUXAN HYCELA	72	ropinirole hydrochloride TABS 4 MG, 5 MG	RYKINDO SRER	81
rivastigmine	249	ropinirole hydrochloride TB24	RYLAZE	76
rivastigmine tartrate CAPS 1.5 MG, 4.5 MG, 6 MG	249	ropivacaine hcl SOLN IJ	RYPLAZIM	132
rivastigmine tartrate CAPS 3 MG	249	rosuvastatin calcium TABS	RYSTIGGO	221
RIVFLOZA SOLN	129	ROTARIX SUSP	RYTARY CPCR	78
RIVFLOZA SOSY 128 MG/0.8ML 129		ROTARIX SUSR	RYTELO	75
RIVFLOZA SOSY 160 MG/ML	129	ROTATEQ SOLN	RYTHMOL SR CP12 (propafenone hcl)	24
RIXUBIS SOLR	131	ROWASA (mesalamine w/ cleanser) 127	S2 (racepinephrine hcl)	30
rizatriptan benzoate TABS	217	ROXICODONE TABS 15 MG, 30 MG (oxycodone hcl)	SABRIL PACK (vigabatrin)	38
rizatriptan benzoate TBDP	217	ROXYBOND TABA	SABRIL TABS (vigabatrin)	38
ROBAXIN SOLN (methocarbamol) 228		ROZEREM (ramelteon)	SAFE-T-LANCE LOW FLOW 25G 156	
ROBINUL FORTE TABS (glycopyrrolate)	256	ROZLYTREK CAPS 100 MG	SAFE-T-LANCE NORMAL FLOW21G	156
ROBINUL TABS (glycopyrrolate)	256	ROZLYTREK CAPS 200 MG	SAFE-T-LANCE PLUS	
ROCALTRON CAPS (calcitriol)	122	ROZLYTREK PACK	SAFETYLANCET HIGH FLOW	156

156	MG (octreotide acetate)	123	SCSEMBLIX 20 MG	75
SAFETY LANCET 30G/PRESSURE ACTIVATED	SANDOSTATIN SOLN 50 MCG/ML, 100 MCG/ML, 500 MCG/ML (octreotide acetate)	156	SCSEMBLIX 40 MG	75
SAFETY LANCETS		156	SCENESSE	112
SAFETY LANCETS 21G	SANOVI COVID-19 VACCINE/ANTIGEN COMPONENT .	156	scopolamine	52
SAFETY LANCETS 23G	263	156	SEASONIQUE (levonorgestrel- ethinyl estradiol (91-day))	98
SAFETY LANCETS 28G	SANTYL OINT	156	SECUADO	82
SAFETY PEN NEEDLES/30G X3/16"	SAPHNELO	198	SECURESAFE SAFETY INSULIN SYRINGES/U-100/0.5ML/29GX1/2" .	198
SAFETY PEN NEEDLES/30G X5/16"	SAPHRIS (asenapine maleate) ..	198	SECURESAFE SAFETY INSULIN SYRINGES/U-100/1ML/29GX1/2"	198
SAFYRAL (drospirenone-ethinyl estradiol-levomefolate calcium)	sapropterin dihydrochloride PACK 122	98	SECURESAFE SAFETY PEN NEEDLES/30G X 5/16"	198
SAIZEN IJ 5 MG	sapropterin dihydrochloride TABS 122	120	SEGLENTIS	18
SALAGEN (pilocarpine hcl (oral)) 224	SAPS HEALTH CARE TWIST TOP LANCETS	224	SEGLUROMET	43
SALICYLIC ACID OINT	SAPS HEALTH PLUS TWIST TOP LANCETS 30G	111	SELECT-LITE LANCING DEVICE MISC	156
salsalate	SAPS HEALTH TWIST TOP LANCETS 30G	14	SELECT-OB CHEW	227
SALYCIM CREA	SAPSCARE TWIST TOP LANCETS 30G	111	SELECT-OB+DHA MISC	227
SAMSCA TABS (tolvaptan)	SARCLISA	123	selegiline hcl CAPS	79
SANCUSO PTCH	SAVAYSA	52	selegiline hcl TABS	79
SANDIMMUNE CAPS 100 MG (cyclosporine)	SAVELLA TABS	223	selenium sulfide LOTN 2.5 %	106
SANDIMMUNE CAPS 25 MG (cyclosporine)	SAVELLA TITRATION PACK MISC 249	223	SELZENTRY SOLN	84
SANDIMMUNE SOLN IV 50 MG/ML . 223	saxagliptin hcl 2.5 MG	223	SELZENTRY TABS (maraviroc) ...	85
SANDIMMUNE SOLN OR 100 MG/ML	saxagliptin hcl 5 MG	223	SELZENTRY TABS 150 MG (maraviroc)	84
SANDOSTATIN LAR DEPOT KIT 10 MG, 30 MG (octreotide acetate) ..	saxagliptin-metformin hcl 1000 MG- 2.5 MG	123	SELZENTRY TABS 25 MG, 75 MG, 300 MG	85
SANDOSTATIN LAR DEPOT KIT 10 MG, 30 MG	saxagliptin-metformin hcl 1000 MG-5 MG, 500 MG-5 MG	123	SEMGLEE SOLN	49
SANDOSTATIN LAR DEPOT KIT 20	SCSEMBLIX 100 MG	123	SEMGLEE SOPN	49

SE-NATAL 19 TABS	227	NEEDLES/MICRO/32GX4MM ...	198	SILENOR (doxepin hcl (sleep)) ..	137
SENSIPAR 30 MG, 90 MG (cinacalcet hcl)	122	SHOPKO UNIFINE PENTIPS PEN NEEDLES/MINI/31GX5MM	198	SILIQ	105
SENSIPAR 60 MG (cinacalcet hcl) 122		SHOPKO UNIFINE PENTIPS PEN NEEDLES/ORIGINAL/29GX12MM 198		silodosin	130
SENSORCAINE- MPF/EPINEPHRINE SOLN	139	SHOPKO UNIFINE PENTIPS PEN NEEDLES/SHORT/31GX8MM ..	198	SILVADENE (silver sulfadiazine) 106	
SEREVENT DISKUS	30	SHOPKO UNIFINE PENTIPS PLUS PEN		SILVER NITRATE SOLN 0.5 % ..	106
SEROQUEL TABS (quetiapine fumarate)	82	NEEDLES/MICRO/REMOVR/32GX4 MM	198	silver sulfadiazine	106
SEROQUEL XR TB24 150 MG, 200 MG (quetiapine fumarate)	82	SHOPKO UNIFINE PENTIPS PLUS PEN		SIMBRINZA	238
SEROQUEL XR TB24 50 MG, 300 MG, 400 MG (quetiapine fumarate) 82		NEEDLES/MINI/REMOVER/31GX5M M	198	SIMLANDI 1-PEN KIT AJKT	10
SEROSTIM SC 4 MG, 5 MG, 6 MG 120		SHOPKO UNIFINE PENTIPS PLUS PEN		SIMLANDI 2-PEN KIT AJKT	10
sertraline hcl CONC	41	NEEDLES/REMOVER/29GX12MM . 198		SIMPLE DIAGNOSTICS LANCING DEVICE MISC	157
sertraline hcl TABS	41	SHOPKO UNIFINE PENTIPS PLUS PEN		SIMPLE SYRUP	247
SERTRALINE HYDROCHLORIDE CAPS	41	NEEDLES/SHORT/REMOVR/31GX8 MM	198	SIMPONI ARIA SOLN	10
sevelamer carbonate PACK	128	SHOPKO UNIFINE PENTIPS PLUS PEN		SIMPONI SOAJ 100 MG/ML	10
sevelamer carbonate TABS	128	SUPER THIN 30G	156	SIMPONI SOAJ 50 MG/0.5ML	10
sevelamer hcl	128	SHOPKO UNILET LANCETS ULTRA		SIMPONI SOSY 100 MG/ML	10
SEVENFACT	131	THIN 28G	157	SIMPONI SOSY 50 MG/0.5ML	10
sevoflurane	129	SIGNIFOR	123	SIMULECT	223
SEZABY SOLR	137	SIGNIFOR LAR	123	simvastatin TABS 10 MG, 20 MG .	57
SFROWASA ENEM	127	SIKLOS TABS	134	simvastatin TABS 40 MG	57
SHINGRIX	263	sildenafil citrate (pulmonary hypertension) SOLN	93	simvastatin TABS 5 MG, 80 MG ...	57
SHOPKO AUTOLET LANCING DEVICE MISC	156	sildenafil citrate (pulmonary hypertension) SUSR	94	SINCALIDE	113
SHOPKO ON-THE-GO COMFORTLANCETS 30G	156	sildenafil citrate (pulmonary hypertension) TABS	94	SINEMET TABS 100 MG-10 MG, 100 MG-25 MG (carbidopa-levodopa)	79
SHOPKO UNIFINE PENTIPS PEN				SINGULAIR CHEW (montelukast sodium)	26
				SINGULAIR PACK (montelukast sodium)	26
				SINGULAIR TABS (montelukast sodium)	26
				SINUVA IMPL	230

sirolimus SOLN	223	sodium acetate SOLN	218	sodium phenylbutyrate TABS	122
sirolimus TABS 0.5 MG	223	SODIUM BENZOATE	247	sodium phosphates (sodium phosphate dibasic & monobasic) 142 MG/ML-276 MG/ML	220
sirolimus TABS 1 MG	223	sodium bicarbonate IV 4.2 %, 7.5 %, 8.4 %	218	sodium polystyrene sulfonate POWD	223
sirolimus TABS 2 MG	223	sodium chloride (gu irrigant) 0.9 %	129	sodium polystyrene sulfonate SUSP CO 15 GM/60ML	223
SIRTURO 100 MG	66	sodium chloride (inhalant) NEBU 0.9 %	101	sodium sulfate-potassium sulfate-magnesium sulfate	139
SIRTURO 20 MG	66	sodium chloride (inhalant) NEBU 7 %	101	SOFOSBUVIR/VELPATASVIR TABS	87
SITAGLIPTIN	45	SODIUM CHLORIDE GRAN	221	SOGROYA	120
SITAGLIPTIN/METFORMIN HYDROCHLORIDE	43	sodium chloride SOLN IJ 0.9 %, 2.5 MEQ/ML	221	SOHONOS 1 MG, 1.5 MG, 5 MG	229
SIVEXTRO SOLR	64	sodium citrate & citric acid	129	SOHONOS 10 MG	229
SIVEXTRO TABS	64	SODIUM DIURIL (chlorothiazide sodium)	118	SOHONOS 2.5 MG	229
SKLICE (ivermectin (pediculicide)) 113		SODIUM EDECRIN (ethacrynate sodium)	117	solifenacin succinate TABS 10 MG	259
SKYCLARYS	230	sodium ferric gluconate complex in sucrose	136	solifenacin succinate TABS 5 MG	259
SKYLA	99	sodium fluoride (dental) CREA	224	SOLIQUA 100/33	43
SKYRIZI PEN SOAJ	105	sodium fluoride (dental) GEL	224	SOLIRIS	131
SKYRIZI SOCT 180 MG/1.2ML	127	sodium fluoride (dental) PSTE DT	224	SOLODYN TB24 115 MG (minocycline hcl)	254
SKYRIZI SOCT 360 MG/2.4ML	127	sodium fluoride (dental) SOLN 0.2 %	224	SOLODYN TB24 55 MG, 65 MG, 80 MG, 105 MG (minocycline hcl)	254
SKYRIZI SOLN	127	sodium fluoride CHEW 0.25 MG, 0.5 MG, 1 MG	220	SOLOSEC	6
SKYRIZI SOSY	105	sodium fluoride SOLN 0.5 MG/ML	220	SOLTAMOX SOLN	70
SKYSONA	249	sodium fluoride-potassium nitrate GEL	224	SOLU-CORTEF	101
SKYTROFA	120	SODIUM OXYBATE SOLN	248	SOLU-MEDROL (methylprednisolone sod succ)	101
SLYND	99	sodium phenylbutyrate POWD	122	SOLU-MEDROL	101
SM MICRO THIN LANCETS 33G 157				SOLUS V2 LANCING DEVICE MISC	157
SMART DIABETES VANTAGE LANCING DEVICE MISC	157				
SMARTEST LANCETS 28G	157				
sod benzoate & sod phenylacetate	122				
SODIUM ACETATE SOLN (sodium acetate)	218				

SOLUS V2 PRESSURE ACTIVATED SAFETY LANCETS 28G	157	SOVUNA	65	SSKI SOLN (potassium iodide (expectorant))	101
SOLUS V2 TWIST LANCETS 30G 157		SPEVIGO SOLN	105	STALEVO 100 (carbidopa-levodopa-entacapone)	79
SOLUVITA SOLN	220	SPEVIGO SOSY	105	STALEVO 125 (carbidopa-levodopa-entacapone)	79
SOMA TABS 250 MG (carisoprodol) .	228	SPIKEVAX COVID-19 VACCINE SUSP	263	STALEVO 150 (carbidopa-levodopa-entacapone)	79
SOMA TABS 350 MG (carisoprodol) .	228	SPIKEVAX COVID-19 VACCINE/2023-24 SUSP	263	STALEVO 200 (carbidopa-levodopa-entacapone)	79
SOMATULINE DEPOT 120 MG/0.5ML	123	SPIKEVAX COVID-19 VACCINE/2024-25 SUSY	263	STALEVO 50 (carbidopa-levodopa-entacapone)	79
SOMATULINE DEPOT 60 MG/0.2ML	123	spinosad	113	STALEVO 75 (carbidopa-levodopa-entacapone)	79
SOMATULINE DEPOT 90 MG/0.3ML	123	SPINRAZA	234	STAMARIL SUSR	263
SOMAVERT	119	SPIRIVA HANDIHALER CAPS (tiotropium bromide monohydrate) .	25	STEGLATRO	49
sorafenib tosylate	75	SPIRIVA RESPIMAT AERS 1.25 MCG/ACT	25	STEGLUJAN	43
SORBITOL 3 %	129	SPIRIVA RESPIMAT AERS 2.5 MCG/ACT	25	STELARA 130 MG/26ML	127
SORBITOL/MANNITOL IRRIGATION	129	spironolactone & hydrochlorothiazide	117	STELARA SOLN 45 MG/0.5ML ..	105
SORILUX FOAM	105	SPIRONOLACTONE POWD	117	STELARA SOSY 45 MG/0.5ML ..	105
sotalol hcl (afib/af) 120 MG	89	spironolactone SUSP	117	STELARA SOSY 90 MG/ML	105
sotalol hcl (afib/af) 160 MG	89	spironolactone TABS	117	STERILANCE TL	157
sotalol hcl (afib/af) 80 MG	89	SPORANOX CAPS (itraconazole) .	54	STERILE DILUENT FOR REMODULIN (glycine diluent) ...	247
sotalol hcl TABS 120 MG	89	SPORANOX SOLN (itraconazole) .	54	STIMUFEND	135
sotalol hcl TABS 160 MG	89	SPRAVATO 56MG DOSE	40	STIOLTO RESPIMAT	30
sotalol hcl TABS 240 MG	89	SPRAVATO 84MG DOSE	40	STIVARGA	75
sotalol hcl TABS 80 MG	89	SPRITAM TB3D	37	STRATTERA 10 MG, 18 MG, 25 MG, 40 MG, 60 MG (atomoxetine hcl) ...	3
SOTYKTU	105	SPRYCEL 20 MG, 50 MG (dasatinib)	75	STRATTERA 80 MG, 100 MG (atomoxetine hcl)	3
SOTYLIZE SOLN OR	89	SPRYCEL 70 MG, 80 MG, 100 MG, 140 MG (dasatinib)	75	STRENSIQ	122
SOVALDI PACK 150 MG	87			streptomycin sulfate SOLR	6
SOVALDI PACK 200 MG	87				
SOVALDI TABS	87				

STRIBILD	85	sulfacetamide sodium (ophth) SOLN .	SUNLENCA SOLN	85
STRIVERDI RESPIMAT	30	239	SUNLENCA TBPK	85
STROMEKTOL (ivermectin)	21	sulfacetamide sodium w/ sulfur	SUNOSI	3
STRONTIUM CHLORIDE SR-89 .	76	CREA 10 %-5 %	SUPPRELIN LA	120
SUBLOCADE SOSY 100 MG/0.5ML .	19	10 %-2 %, 9 %-4 %, 9 %-4.5 % ..	SUPRANE (desflurane)	129
SUBLOCADE SOSY 300 MG/1.5ML .	19	sulfacetamide sodium w/ sulfur LIQD	SUPREP BOWEL PREP KIT	
SUBOXONE FILM SL 0.5 MG-2 MG,		10 %-2 %, 9 %-4 %, 9 %-4.5 % ..	(sodium sulfate-potassium sulfate-	
1 MG-4 MG (buprenorphine hcl-		sulfacetamide sodium w/ sulfur SUSP	magnesium sulfate)	139
naloxone hcl dihydrate)	19	8 %-4 %	SURE COMFORT AUTOKEEPER	
SUBOXONE FILM SL 2 MG-8 MG		sulfacetamide sod-prednisolone	SAFETY PEN NEEDLES 31GX1/4" .	198
(buprenorphine hcl-naloxone hcl		SOLN	SURE COMFORT AUTOKEEPER	
dihydrate)	19	sulfadiazine TABS	SAFETY PEN NEEDLES 32GX5/32"	198
SUBOXONE FILM SL 3 MG-12 MG		sulfamethoxazole-trimethoprim SOLN	.....	198
(buprenorphine hcl-naloxone hcl		.....	SURE COMFORT INSULIN	
dihydrate)	19	sulfamethoxazole-trimethoprim SUSP	SYRINGE/U-100/0.3ML/29G X 1/2" .	198
succinylcholine chloride SOLN ...	230	.....	SURE COMFORT INSULIN	
SUCCINYLCHOLINE CHLORIDE		sulfamethoxazole-trimethoprim TABS	SYRINGE/U-100/0.3ML/29G X 1/2" .	198
SOSY IJ 100 MG/5ML	230	.....	SURE COMFORT INSULIN	
SUCRAID	116	SULFAMYLON CREA	SYRINGE/U-100/0.3ML/30G X 1/2" .	198
SUCRALFATE POWD	257	106	SURE COMFORT INSULIN	
sucralfate SUSP	257	SULFASALAZINE POWD	SYRINGE/U-100/0.3ML/30G X 5/16"	198
sucralfate TABS	257	127	SURE COMFORT INSULIN	
SUFENTANIL CITRATE SOLN IV		sulfasalazine TABS	SYRINGE/U-100/0.3ML/30G X 5/16"	198
(sufentanil citrate)	17	127	SURE COMFORT INSULIN	
sufentanil citrate SOLN IV 50		sulfasalazine TBEC	SYRINGE/U-100/0.3ML/31G X 5/16 .	199
MCG/ML	17	127	SURE COMFORT INSULIN	
SUFLAVE	139	sulindac TABS	SYRINGE/U-100/0.3ML/31GX1/4"	199
SULAR 8.5 MG, 17 MG, 34 MG		12	SURE COMFORT INSULIN	
(nisoldipine)	91	SUMADAN KIT	SYRINGE/U-100/0.5ML/28G X 1/2" .	199
sulfacetamide sodium (acne)	102	102	SURE COMFORT INSULIN	
sulfacetamide sodium (ophth) OINT		SUMADAN WASH LIQD	SYRINGE/U-100/0.5ML/29G X 1/2" .	199
239		(sulfacetamide sodium w/ sulfur) .		
		sumatriptan		
		218		
		sumatriptan succinate SOAJ		
		218		
		sumatriptan succinate SOCT		
		218		
		sumatriptan succinate SOLN 6		
		MG/0.5ML		
		218		
		sumatriptan succinate TABS		
		218		
		sumatriptan-naproxen sodium ...		
		216		
		sunitinib malate		
		75		

SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/30G X 1/2" 199	157 SURE COMFORT LANCING PEN MISC .....157	SYMFI LO (efavirenz-lamivudine- tenofovir disoproxil fumarate) .....85
SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/30G X 5/16" .....199	SURE COMFORT PEN NEEDLES29GX1/2" 12.7MM ....199	SYMLINPEN 120 SOPN .....42 SYMLINPEN 60 SOPN 42 SYMPAZAN FILM 34
SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/31G X 5/16 199	SURE COMFORT PEN NEEDLES30GX5/16" SHORT ...199	SYMPROIC 128 SYMTUZA .....85
SURE COMFORT INSULIN SYRINGE/U-100/1ML/28G X 1/2" 199	SURE COMFORT PEN NEEDLES31GX3/16" (5MM) 199	SYNAGIS SOLN 100 MG/ML 246 SYNAGIS SOLN 50 MG/0.5ML .. 246
SURE COMFORT INSULIN SYRINGE/U-100/1ML/29G X 1/2" 199	SURE COMFORT PEN NEEDLES32GX5/32" (4MM) 200	SYNALAR CREA (fluocinolone acetone) .....109 SYNALAR CREAM KIT .....109
SURE COMFORT INSULIN SYRINGE/U-100/1ML/30G X 1/2" 199	SURE COMFORT PEN NEEDLES32GX5/32" 199	SYNALAR OINT (fluocinolone acetone) .....109
SURE COMFORT INSULIN SYRINGE/U-100/1ML/30G X 5/16" 199	SURE COMFORT PEN NEEDLES32GX6MM 200	SYNALAR OINTMENT KIT .....109 SYNALAR SOLN (fluocinolone acetone) .....109
SURE COMFORT INSULIN SYRINGE/U-100/1ML/31G X 5/16" 199	SUSTIVA CAPS (efavirenz) 85	SYNALAR TS 109
SURE COMFORT INSULIN SYRINGE/U-100/1ML/31G X 5/16" 199	SUSTOL PRSY .....52	SYNAREL .....120
SURE COMFORT INSULIN SYRINGES/0.5ML/31G X 6MM ..199	SUSVIMO SOLN 238	SYNDROS SOLN .....52
SURE COMFORT INSULIN SYRINGES/U-100/1ML/31GX6MM 199	SUTAB .....139	SYNJARDY TABS 43
SURE COMFORT LANCETS 18G 157	SUTENT (sunitinib malate) .....75	SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG 43
SURE COMFORT LANCETS 21G 157	SYFOVRE .....239	SYNJARDY XR TB24 1000 MG-25 MG 43
SURE COMFORT LANCETS 23G 157	SYLVANT .....223	SYNTHROID TABS (levothyroxine sodium) .....255
SURE COMFORT LANCETS 28G 157	SYMBICORT (budesonide- formoterol fumarate dihydrate) ....30	SYPRINE (trientine hcl) .....221
SURE COMFORT LANCETS 30G	SYMBYAX 25 MG-3 MG (olanzapine- fluoxetine hcl) .....249	SYRPALTA SYRP .....247
	SYMBYAX 25 MG-6 MG (olanzapine- fluoxetine hcl) .....249	SYRUP VEHICLE SYRP .....247
	SYMDEKO 150 MG-100 MG ....253	TABRECTA .....75
	SYMDEKO 75 MG-50 MG .....253	TACHOSIL .....136
	SYMFI (efavirenz-lamivudine- tenofovir disoproxil fumarate) .....85	

TACLONEX OINT (calcipotriene- betamethasone dipropionate)	109	TALZENNA 0.25 MG	75	TAZORAC GEL (tazarotene)	105
TACLONEX SUSP (calcipotriene- betamethasone dipropionate)	109	TAMIFLU CAPS 30 MG, 45 MG (oseltamivir phosphate)	87	TAZVERIK	75
tacrolimus (topical) OINT 0.03 % .	111	TAMIFLU CAPS 75 MG (oseltamivir phosphate)	87	TDVAX SUSP	255
tacrolimus (topical) OINT 0.1 % .	111	TAMIFLU SUSR (oseltamivir phosphate)	87	TECARTUS	69
tacrolimus CAPS 0.5 MG	223	tamoxifen citrate TABS	70	TECELRA	69
tacrolimus CAPS 1 MG	223	tamsulosin hcl	130	TECENTRIQ	68
tacrolimus CAPS 5 MG	223	TARCEVA 100 MG, 150 MG (erlotinib hcl)	69	TECENTRIQ HYBREZA	72
tadalafil (pulmonary hypertension) TABS	94	TARGRETIN (bexarotene (topical)) 104	76	TECFIDERA CPDR 120 MG (dimethyl fumarate)	251
tadalafil 5 MG	92	TARGRETIN (bexarotene)	76	TECFIDERA CPDR 240 MG (dimethyl fumarate)	251
TADLIQ SUSP	94	TARON-C DHA	227	TECFIDERA STARTER PACK CDPK (dimethyl fumarate)	251
TAFINLAR CAPS	75	TARPEYO CPDR	101	TECHLITE INSULIN SYRINGEU- 100/0.3ML/30G X 5/16"	200
TAFINLAR TBSO	75	TASCENSO ODT	251	TECHLITE INSULIN SYRINGEU- 100/0.3ML/31G X 15/64"	200
tafluprost	244	TASIGNA	75	TECHLITE INSULIN SYRINGEU- 100/0.3ML/31G X 5/16"	200
TAGAMET HB 200 TABS (cimetidine)	257	tasimelteon CAPS	138	TECHLITE INSULIN SYRINGEU- 100/0.5ML/30G X 1/2"	200
TAGAMET HB TABS (cimetidine) 257	257	TASMAR (tolcapone)	77	TECHLITE INSULIN SYRINGEU- 100/0.5ML/30G X 5/16"	200
TAGRISSE	69	TAUVID	113	TECHLITE INSULIN SYRINGEU- 100/0.5ML/30G X 5/16"	200
TAKHZYRO SOLN	132	tavaborole	103	TECHLITE INSULIN SYRINGEU- 100/0.5ML/31G X 15/64"	200
TAKHZYRO SOSY 150 MG/ML .	132	TAVALISSE	132	TECHLITE INSULIN SYRINGEU- 100/0.5ML/31G X 15/64"	200
TAKHZYRO SOSY 300 MG/2ML	132	TAVNEOS	131	TECHLITE INSULIN SYRINGEU- 100/0.5ML/31G X 5/16"	200
TALICIA	258	TAYTULLA CAPS (norethin acet & estradiol-fe)	98	TECHLITE INSULIN SYRINGEU- 100/1ML/29G X 1/2"	200
TALTZ SOAJ	105	tazarotene CREA 0.05 %	105	TECHLITE INSULIN SYRINGEU- 100/1ML/30G X 1/2"	200
TALTZ SOSY 20 MG/0.25ML, 40 MG/0.5ML	105	tazarotene CREA 0.1 %	105	TECHLITE INSULIN SYRINGEU- 100/1ML/30G X 1/2"	200
TALTZ SOSY 80 MG/ML	105	tazarotene GEL	105	TECHLITE INSULIN SYRINGEU- 100/1ML/31G X 15/64"	200
TALVEY	68	TAZORAC CREA 0.05 % (tazarotene)	105	TECHLITE INSULIN SYRINGEU- 100/1ML/31G X 5/16"	200
TALZENNA 0.1 MG, 0.35 MG, 0.5 MG, 0.75 MG, 1 MG	75	TAZORAC CREA 0.1 % (tazarotene) 105	105	TECHLITE INSULIN SYRINGEU- 100/1ML/31G X 5/16"	200

TECHLITE LANCETS	157	TEMODAR SOLR	67	TESTIM GEL TD (testosterone) ...	20
TECHLITE PEN NEEDLES 29GX 12 MM	200	temozolomide CAPS	67	TESTOPEL PLLT	20
TECHLITE PEN NEEDLES 31GX 5MM	200	temsirolimus	75	testosterone cypionate SOLN IM ..	20
TECHLITE PEN NEEDLES/31GX 8MM	200	TENIVAC INJ	255	testosterone enanthate SOLN IM ..	20
TECHLITE PEN NEEDLES/32GX 6MM	200	tenofovir disoproxil fumarate TABS 85		testosterone GEL TD 1 %, 50 MG/5GM	20
TECHLITE PLUS PEN NEEDLES32G X 4MM	200	TENORETIC 100 (atenolol & chlorthalidone)	61	testosterone GEL TD 1.62 %, 25 MG/2.5GM, 40.5 MG/2.5GM	20
TECVAYLI	68	TENORETIC 50 (atenolol & chlorthalidone)	61	testosterone GEL TD 10 MG/ACT ..	20
TEFLARO	95	TENORMIN TABS 100 MG (atenolol)	89	testosterone GEL TD 20.25 MG/1.25GM	20
TEGRETOL SUSP (carbamazepine) . 37		TENORMIN TABS 25 MG (atenolol) . 89		TESTOSTERONE MICRONIZED (SOY) POWD	97
TEGRETOL TABS (carbamazepine) . 37		TENORMIN TABS 50 MG (atenolol) . 89		TESTOSTERONE MICRONIZED POWD	97
TEGRETOL-XR TB12 100 MG, 200 MG (carbamazepine)	37	TEPADINA (thiotepa)	67	TESTOSTERONE MICRONIZED SOY POWD	97
TEGRETOL-XR TB12 400 MG (carbamazepine)	37	TEPEZZA	120	TESTOSTERONE MICRONIZED YAM CRYST	97
TEGSEDI	252	TEPMETKO	75	TESTOSTERONE POWD	97
TEKTURNA (aliskiren fumarate) ..	61	terazosin hcl 1 MG	60	TESTOSTERONE POWD	97
TEKTURNA HCT 12.5 MG-300 MG, 25 MG-300 MG	61	terazosin hcl 10 MG	60	TESTOSTERONE PROPIONATE ..	97
telmisartan 20 MG	59	terazosin hcl 2 MG	60	testosterone SOLN	20
telmisartan 40 MG	59	terazosin hcl 5 MG	60	TETANUS/DIPHTHERIA TOXOIDS- ADSORBED ADULT SUSP	255
telmisartan 80 MG	59	terbinafine hcl (topical) CREA	103	tetrabenazine	250
telmisartan-amlodipine	61	terbinafine hcl TABS	53	tetracaine hcl (ophth)	240
telmisartan-hydrochlorothiazide ...	61	terbutaline sulfate SOLN	30	TETRACYCLINE HCL	102
temazepam 15 MG, 30 MG	138	terbutaline sulfate TABS	30	tetracycline hcl CAPS	254
temazepam 7.5 MG, 22.5 MG	138	terconazole vaginal CREA	264	TETRACYCLINE HYDROCHLORID TABS	254
TEMODAR CAPS 250 MG (temozolomide)	67	terconazole vaginal SUPP	264	TETRACYCLINE HYDROCHLORIDE TABS	254
		teriflunomide	251	TETVIMBRA	69
		teriparatide SOPN	119		
		TERIPARATIDE SOPN	119		

TEXACORT SOLN 2.5 %	109	TIAZAC 120 MG (diltiazem hcl extended release beads)	91	tiotropium bromide monohydrate CAPS	25
TEZSPIRE SOAJ	25	TIAZAC 180 MG (diltiazem hcl extended release beads)	91	tirofiban hcl in sodium chloride ...	133
TEZSPIRE SOSY	25	TIAZAC 240 MG (diltiazem hcl extended release beads)	91	TIROSINT CAPS (levothyroxine sodium)	255
THALITONE	118	TIAZAC 300 MG, 360 MG, 420 MG (diltiazem hcl extended release beads)	91	TISSEEL KIT	136
THALOMID 50 MG, 100 MG, 200 MG	221	TIBSOVO	75	TISSEEL SOLN	136
THAM	218	TICE BCG	76	TIVDAK	69
THEO-24 CP24	31	TICOVAC	263	TIVICAY PD TBSO	85
theophylline ELIX	31	TIGAN SOLN	52	TIVICAY TABS	85
theophylline SOLN	31	tigecycline	254	TIVORBEX CAPS (indomethacin) .	12
theophylline TB12	31	TIGECYCLINE	254	tizanidine hcl CAPS	228
theophylline TB24	31	TIGLUTIK SUSP	230	tizanidine hcl TABS	228
THIAMINE HCL POWD	266	TIKOSYN (dofetilide)	24	TLANDO CAPS	20
THICK-IT #2 POWD	247	TIKOSYN 500 MCG (dofetilide) ...	24	TNKASE	133
THIOLA EC TBEC (tiopronin)	130	timolol maleate (ophth) SOLG ...	237	TOBI NEBU (tobramycin)	6
THIOLA TABS (tiopronin)	130	timolol maleate (ophth) SOLN 0.5 % .	237	TOBI PODHALER CAPS	6
thioridazine hcl	82	timolol maleate (ophth) SOLN ...	237	TOBRADEX OINT	241
thiotepa	67	timolol maleate TABS	89	TOBRADEX ST SUSP	241
thiothixene	83	TIMOPTIC OCUDOSE SOLN (timolol maleate (ophth))	237	TOBRADEX SUSP (tobramycin- dexamethasone)	241
THROMBATE III	132	TIMOPTIC SOLN (timolol maleate (ophth))	237	tobramycin (ophth) SOLN	239
THROMBIN-JMI DILUENT SOLR 136		TIMOPTIC-XE SOLG (timolol maleate (ophth))	237	tobramycin NEBU	6
THROMBIN-JMI EPISTAXIS KIT .	136	TINACTIN CREA (tolnaftate)	103	TOBRAMYCIN SULFATE POWD ...	6
THROMBIN-JMI SYRINGE SPRAY KIT KIT	136	tinidazole	62	tobramycin sulfate SOLN IJ	6
THROMBIN-JMI W/DIL SPRAYPUMP ACTUATOR KIT ..	136	tiopronin TABS	130	tobramycin sulfate SOLR	6
THYMOGLOBULIN	223	tiopronin TBEC	130	tobramycin-dexamethasone SUSP 241	
THYQUIDITY SOLN OR	255			TOBREX OINT	239
THYROGEN 0.9 MG	113			TODAYS HEALTH ADVANCED LANCING DEVICE MISC	157
tiagabine hcl	39			TODAYS HEALTH MINI PEN	

NEEDLES 31G X 1/4"	200	TOPCARE ULTRA COMFORT INSULIN SYRINGE/0.3ML/31G X 5/16"	201	topiramate CPSP	38
TODAYS HEALTH ORIGINAL PEN NEEDLES 29G X 1/2"	200	TOPCARE ULTRA COMFORT INSULIN SYRINGE/0.5ML/30G X 5/16"	201	topiramate CS24 150 MG, 200 MG 38	
TODAYS HEALTH SHORT PEN NEEDLES 31G X 5/16"	201	TOPCARE ULTRA COMFORT INSULIN SYRINGE/0.5ML/31G X 5/16"	201	topiramate CS24 25 MG, 50 MG, 100 MG	38
TODAYS HEALTH SUPER THINLANCETS 30G	157	TOPCARE ULTRA COMFORT INSULIN SYRINGE/1ML/30G X 5/16"	201	topiramate TABS 200 MG	38
TODAYS HEALTH ULTRA THINLANCETS 28G	157	TOPCARE ULTRA COMFORT INSULIN SYRINGE/1ML/31G X 5/16"	201	topiramate TABS 25 MG, 50 MG, 100 MG	38
TOFIDENCE	11	TOPCARE ULTRA COMFORT INSULIN SYRINGE/1ML/30G X 5/16"	201	TOPOTECAN HCL SOLN (topotecan hcl)	77
tolcapone	77	TOPCARE ULTRA COMFORT INSULIN SYRINGE/1ML/31G X 5/16"	201	topotecan hcl SOLN	77
TOLECTIN 600 TABS	12	TOPCARE ULTRA COMFORT INSULIN SYRINGE/U- 100/0.3ML/29G X 1/2"	201	topotecan hcl SOLR	77
tolmetin sodium CAPS	12	TOPCARE ULTRA COMFORT INSULIN SYRINGE/U-100/1ML/29G X 1/2"	201	TOPROL XL TB24 100 MG, 200 MG (metoprolol succinate)	89
tolmetin sodium TABS 600 MG	12	TOPCARE ULTRA COMFORT INSULIN SYRINGE/U- 100/0.5ML/29G X 1/2"	201	TOPROL XL TB24 25 MG, 50 MG (metoprolol succinate)	89
tolnaftate CREA	103	TOPCARE ULTRA COMFORT INSULIN SYRINGE/U-100/1ML/29G X 1/2"	201	toremifene citrate	70
TOLSURA CAPS	54	TOPICORT CREA 0.05 % (desoximetasone)	109	TORISEL (temsirolimus)	75
tolterodine tartrate CP24	259	TOPICORT CREA 0.25 % (desoximetasone)	109	torsemide TABS 100 MG	117
tolterodine tartrate TABS	259	TOPICORT GEL (desoximetasone) 109		torsemide TABS 5 MG, 10 MG, 20 MG	117
tolvaptan TABS	123	TOPICORT LIQD (desoximetasone) . 109		TOSYMRA	218
TOPAMAX SPRINKLE CPSP (topiramate)	37	TOPICORT OINT (desoximetasone) . 109		TOUJEO MAX SOLOSTAR SOPN 49	
TOPAMAX TABS 200 MG (topiramate)	37	TOPIRAMATE	97	TOUJEO SOLOSTAR SOPN	49
TOPAMAX TABS 25 MG, 50 MG, 100 MG (topiramate)	37	topiramate CP24 200 MG	38	TOVIAZ 4 MG (fesoterodine fumarate)	259
TOPCARE CLICKFINE UNIVERSAL PEN EEDLES 31GX1/4"	201	topiramate CP24 25 MG, 50 MG, 100 MG	37	TOVIAZ 8 MG (fesoterodine fumarate)	259
TOPCARE CLICKFINE UNIVERSAL PEN EEDLES 31GX5/16"	201			TPN ELECTROLYTES CONC ...	220
TOPCARE LANCETS MICRO-THIN 33G	157			TRACLEER TABS (bosentan)	93
TOPCARE ULTRA COMFORT INSULIN SYRINGE/0.3ML/30G X 5/16"	201			TRACLEER TBSO	93

tramadol hcl CP24 100 MG, 200 MG, 300 MG	17	TRECATOR	66	OINT 0.05 %	110
tramadol hcl SOLN	17	TRELEGY ELLIPTA	30	TRIAMCINOLONE ACETONIDE POWD	110
tramadol hcl TABS 25 MG, 100 MG 17		TRELEGY ELLIPTA 100 MCG/ACT-25 MCG/ACT-62.5 MCG/ACT	30	triamcinolone acetone SUSP 40 MG/ML, 400 MG/10ML	101
tramadol hcl TABS 50 MG	17	TRELSTAR MIXJECT	70	TRIAMCINOLONE ACETONIDEUSP, MICRONIZED POWD	110
tramadol hcl TB24	17	TREMFYA SOAJ	105	TRIAMCINOLONEUSP, MICRONIZED	97
TRAMADOL HYDROCHLORIDE SOLN (tramadol hcl)	17	TREMFYA SOLN	105	triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG	117
tramadol-acetaminophen	18	TREMFYA SOSY 100 MG/ML ...	106	triamterene & hydrochlorothiazide TABS	117
trandolapril	58	TREMFYA SOSY 200 MG/2ML ..	106	triamterene CAPS	117
trandolapril-verapamil hcl	61	treprostinil SOLN IJ	93	triazolam	138
tranexamic acid SOLN 1000 MG/10ML	136	TRESIBA FLEXTOUCH SOPN 100 UNIT/ML	49	TRIBENZOR (olmesartan medoxomil-amlodipine-hydrochlorothiazide)	61
tranexamic acid TABS	136	TRESIBA FLEXTOUCH SOPN 200 UNIT/ML	49	TRICARE TABS	227
TRANEXAMIC ACID/SODIUM CHLORIDE (tranexamic acid-sodium chloride)	136	TRESIBA SOLN	49	TRICHLOROACETIC ACID CRYSTALS 97	
tranexamic acid-sodium chloride	136	tretinoin (chemotherapy)	76	TRICOR TABS (fenofibrate)	56
TRANSDERM-SCOP (scopolamine) 52		tretinoin CREA 0.025 %, 0.05 %	102	TRIDESILON CREA 0.05 % (desonide)	110
TRANXENE T TABS 7.5 MG (clorazepate dipotassium)	24	TRETEN	131	trientine hcl 250 MG	221
tranylcypromine sulfate	40	TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	68	trientine hcl 500 MG	221
TRAVATAN Z SOLN (travoprost) 244		TREXIMET (sumatriptan-naproxen sodium)	216	TRIESENCE	241
TRAVEL LANCETS 30G	157	TRIAMCINOLONE	97	trifluoperazine hcl TABS	82
travoprost SOLN	244	triamcinolone acetone (mouth) 224		trifluridine	239
TRAZIMERA	69	triamcinolone acetone (topical) AERS	109	trihexyphenidyl hcl SOLN	77
trazodone hcl TABS 300 MG	41	triamcinolone acetone (topical) CREA	110	trihexyphenidyl hcl TABS	77
trazodone hcl TABS 50 MG, 100 MG, 150 MG	41	triamcinolone acetone (topical) LOTN	110	TRIJARDY XR 1000 MG-2.5 MG-12.5 MG, 1000 MG-2.5 MG-5 MG	.44
TREANDA SOLR (bendamustine hcl)	67	triamcinolone acetone (topical) OINT 0.025 %, 0.1 %, 0.5 %	110	TRIJARDY XR 1000 MG-5 MG-10	

MG, 1000 MG-5 MG-25 MG .....44	MISC .....142	TRUE COMFORT PRO INSULINSYRINGE/1ML/31G X 5/16" .....202
TRIKAFTA TBPK 100 MG-50 MG 253	TROJAN-ENZ LUBRICATED MISC 142	TRUE COMFORT PRO INSULINSYRINGE/U-100/0.5ML/30G X 1/2" .....202
TRIKAFTA TBPK 50 MG-25 MG .253	TROJAN-ENZ W/SPERMICIDAL MISC .....142	TRUE COMFORT PRO INSULINSYRINGE/U-100/1ML/30G X 1/2" .....202
TRIKAFTA THPK .....253	TROKENDI XR CP24 200 MG (topiramate) .....38	TRUE COMFORT PRO INSULINSYRINGE/U-100/1ML/30G X 1/2" .....202
TRILEPTAL SUSP (oxcarbazepine) 38	TROKENDI XR CP24 25 MG, 50 MG, 100 MG (topiramate) .....38	TRUE COMFORT PRO PEN NEEDLES 31G X 5MM .....202
TRILEPTAL TABS 150 MG, 300 MG (oxcarbazepine) .....38	tropicamide SOLN .....237	TRUE COMFORT PRO PEN NEEDLES 31G X 6MM .....202
TRILEPTAL TABS 600 MG (oxcarbazepine) .....38	trospium chloride CP24 .....259	TRUE COMFORT PRO PEN NEEDLES 31G X 8MM .....202
TRILIPIX 135 MG (choline fenofibrate) .....56	trospium chloride TABS .....259	TRUE COMFORT PRO PEN NEEDLES 32G X 4MM .....202
TRILIPIX 45 MG (choline fenofibrate) .....56	TRUE COMFORT INSULIN SYRINGE/0.5ML/31G X 5/16" ...201	TRUE COMFORT PRO PEN NEEDLES 32G X 5MM .....202
trimethobenzamide hcl CAPS .....52	TRUE COMFORT INSULIN SYRINGE/1ML/31G X 5/16" ....201	TRUE COMFORT PRO PEN NEEDLES 32G X 6MM .....202
trimethoprim TABS .....62	TRUE COMFORT PEN NEEDLES31G X 5MM .....201	TRUE COMFORT PRO PEN NEEDLES 33G X 4MM .....202
trimipramine maleate CAPS .....42	TRUE COMFORT PEN NEEDLES31G X 6MM .....201	TRUE COMFORT PRO PEN NEEDLES 33G X 5MM .....202
TRINATAL RX 1 TABS .....227	TRUE COMFORT PEN NEEDLES32G X 4MM .....201	TRUE COMFORT PRO PEN NEEDLES 33G X 6MM .....202
TRINTELLIX .....41	TRUE COMFORT PRO INSULIN SYRINGE/1ML/32GX5/16" .....201	TRUE COMFORT PRO PEN NEEDLES 33G X 5MM .....202
TRIOSTAT SOLN (liothyronine sodium) .....255	TRUE COMFORT PRO INSULINSYRINGE/0.5ML/30G X 5/16" .....201	TRUE COMFORT SAFETY INSULIN SYRINGE/0.5ML/30G X 5/16" ...202
TRIPTODUR .....120	TRUE COMFORT PRO INSULINSYRINGE/0.5ML/31G X 5/16" .....201	TRUE COMFORT SAFETY INSULIN SYRINGE/0.5ML/31G X 5/16" ...202
TRISENOX (arsenic trioxide) .....76	TRUE COMFORT PRO INSULINSYRINGE/0.5ML/32G X 5/16" .....202	TRUE COMFORT SAFETY INSULIN SYRINGE/1ML/30G X 5/16" .....202
TRISTART DHA .....227	TRUE COMFORT PRO INSULINSYRINGE/1ML/30G X 5/16" .....202	TRUE COMFORT SAFETY INSULIN SYRINGE/1ML/32GX5/16" .....202
TRIUMEQ PD TBSO .....85	TRUE COMFORT PRO INSULINSYRINGE/1ML/30G X 5/16" .....202	TRUE COMFORT SAFETY INSULIN SYRINGE/1ML/32GX5/16" .....202
TRIUMEQ TABS .....85	TRUE COMFORT PRO INSULINSYRINGE/1ML/30G X 5/16" .....202	TRUE COMFORT SAFETY INSULIN SYRINGE/1ML/32GX5/16" .....202
TRIZIVIR .....85	TRUE COMFORT PRO INSULINSYRINGE/1ML/30G X 5/16" .....202	TRUE COMFORT SAFETY INSULIN SYRINGE/1ML/32GX5/16" .....202
TRODELVY .....77	TRUE COMFORT PRO INSULINSYRINGE/1ML/30G X 5/16" .....202	TRUE COMFORT SAFETY INSULIN SYRINGE/1ML/32GX5/16" .....202
TROGARZO .....85	TRUE COMFORT PRO INSULINSYRINGE/1ML/30G X 5/16" .....202	TRUE COMFORT SAFETY INSULIN SYRINGE/1ML/32GX5/16" .....202
TROJAN MAGNUM MISC .....142	TRUE COMFORT PRO INSULINSYRINGE/1ML/30G X 5/16" .....202	TRUE COMFORT SAFETY INSULIN SYRINGE/1ML/32GX5/16" .....202
TROJAN ULTRA THIN/SPERMICIDAL LUBRICANT	TRUE COMFORT PRO INSULINSYRINGE/1ML/30G X 5/16" .....202	TRUE COMFORT SAFETY INSULIN SYRINGE/1ML/32GX5/16" .....202

TRUE COMFORT SAFETY INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	NEEDLES 31GX8MM	203	TRUEPLUS PEN NEEDLES 29GX12MM	204
202	TRUEPLUS 5-BEVEL PEN NEEDLES 32GX4MM	203	TRUEPLUS PEN NEEDLES 31GX5MM	204
TRUE COMFORT SAFETY INSULIN SYRINGE/U-100/1ML/30G X 1/2"	TRUEPLUS INSULIN SYRINGE/U-100/0.3ML/29G X 1/2"	203	TRUEPLUS PEN NEEDLES 31GX6MM	204
203	TRUEPLUS INSULIN SYRINGE/U-100/0.3ML/30G X 5/16"	203	TRUEPLUS PEN NEEDLES 31GX8MM	204
TRUE COMFORT SAFETY LANCETS/30G	TRUEPLUS INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	203	TRUEPLUS PEN NEEDLES 32GX4MM	204
158	TRUEPLUS INSULIN SYRINGE/U-100/0.5ML/28G X 1/2"	203	TRUEPLUS SAFETY LANCETS 28G	158
TRUE COMFORT SAFETY PEN NEEDLES 31G X 5MM	TRUEPLUS INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	203	TRULANCE	125
203	TRUEPLUS INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	203	TRULICITY SC 0.75 MG/0.5ML, 3 MG/0.5ML, 4.5 MG/0.5ML	45
TRUE COMFORT SAFETY PEN NEEDLES 31G X 6MM	TRUEPLUS INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	203	TRULICITY SC 1.5 MG/0.5ML	45
203	TRUEPLUS INSULIN SYRINGE/U-100/1ML/28G X 1/2"	203	TRUMENBA	260
TRUE COMFORT SAFETY PEN NEEDLES 32G X 4MM	TRUEPLUS INSULIN SYRINGE/U-100/1ML/29G X 1/2"	204	TRUQAP	75
203	TRUEPLUS INSULIN SYRINGE/U-100/1ML/30G X 5/16"	204	TRUQAP OR 160 MG, 200 MG	75
TRUE COMFORT TWIST TOP LANCETS 30G	TRUEPLUS LANCETS 26G	158	TRUSOPT (dorzolamide hcl)	243
158	TRUEPLUS LANCETS 28G	158	TRUSTEX LUBRICATED EXTRALARGE MISC	142
TRUE COVER DEVI	TRUEPLUS LANCETS 28G SUPER THIN	158	TRUSTEX LUBRICATED EXTRASTRENGTH MISC	142
142	TRUEPLUS LANCETS 30G	158	TRUSTEX LUBRICATED MISC	142
TRUE METRIX AIR BLOOD GLUCOSE METER/BLUETOOTH SMART KIT	TRUEPLUS LANCETS 30G ULTRA THIN	158	TRUSTEX LUBRICATED/SPERMICIDE EXTRA LARGE MISC	142
158	TRUEPLUS LANCETS 33G	158	TRUSTEX LUBRICATED/SPERMICIDE EXTRA STRENGTH MISC	142
TRUE METRIX BLOOD GLUCOSEMETER KIT	TRUEPLUS LANCETS 33G MICRO THIN	158	TRUSTEX	
158				
TRUE METRIX BLOOD GLUCOSETEST STRIPS STRP				
114				
TRUE METRIX CONTROL SOLUTION LEVEL 1 SOLN				
158				
TRUE METRIX CONTROL SOLUTION LEVEL 2 SOLN				
158				
TRUE METRIX CONTROL SOLUTION LEVEL 3 SOLN				
158				
TRUEPLUS 5-BEVEL PEN NEEDLES 29GX12.7MM				
203				
TRUEPLUS 5-BEVEL PEN NEEDLES 31GX5MM				
203				
TRUEPLUS 5-BEVEL PEN NEEDLES 31GX6MM				
203				
TRUEPLUS 5-BEVEL PEN				

LUBRICATED/SPERMICIDE MISC 142	TYLENOL CHILDRENS PAIN +FEVER SUSP (acetaminophen) .13	ULTICARE INSULIN SAFETY SYRINGE/0.5ML/29G X 1/2" 204
TRUSTEX NON-LUBRICATED MISC.....142	TYLENOL CHILDRENS SUSP (acetaminophen) 13	ULTICARE INSULIN SAFETY SYRINGE/1ML/29G X 1/2" 204
TRUSTEX WITH NONOXYNOL- 9/RIBBED/STUDED MISC .....142	TYLENOL FOR CHILDREN/ADULTS SUSP (acetaminophen) .....14	ULTICARE INSULIN SYRINGE/0.3ML/29G X 1/2" 204
TRUSTEX/RIA LUBRICATED MISC . 142	TYLENOL INFANTS PAIN+FEVER SUSP (acetaminophen) .....14	ULTICARE INSULIN SYRINGE/0.3ML/30G X 1/2" 204
TRUSTEX/RIA LUBRICATED SPERMICIDE MISC .....142	TYMLOS 119	ULTICARE INSULIN SYRINGE/0.3ML/30G X 5/16" ...204
TRUSTEX/RIA LUBRICATED/SPERMICIDE MISC 142	TYPHIM VI SOLN 260	ULTICARE INSULIN SYRINGE/0.5ML/28G X 1/2" 204
TRUSTEX/RIA NON-LUBRICATED MISC .....142	TYPHIM VI SOSY 260	ULTICARE INSULIN SYRINGE/0.5ML/29G X 1/2" 204
TRUVADA (emtricitabine-tenofovir disoproxil fumarate) .....85	TYR EASY TABS .....116	ULTICARE INSULIN SYRINGE/0.5ML/29G X 1/2" 204
TRUXIMA .....69	TYRVAYA .....237	ULTICARE INSULIN SYRINGE/0.5ML/30G X 1/2" 204
TRYVIO .....61	TYSABRI .....251	ULTICARE INSULIN SYRINGE/0.5ML/30G X 1/2" 204
TUDORZA PRESSAIR .....25	TYVASO DPI INSTITUTIONALKIT POWD .....93	ULTICARE INSULIN SYRINGE/0.5ML/30G X 5/16" ...204
TUKYSA 150 MG .....69	TYVASO DPI MAINTENANCE KIT POWD .....93	ULTICARE INSULIN SYRINGE/1ML/28G X 1/2" 204
TUKYSA 50 MG .....69	TYVASO DPI TITRATION KIT POWD .....93	ULTICARE INSULIN SYRINGE/1ML/29G X 1/2" 204
TURALIO 125 MG .....75	TYVASO REFILL KIT SOLN IN ...93	ULTICARE INSULIN SYRINGE/1ML/30G X 1/2" 204
TWINRIX SUSY .....263	TYVASO SOLN IN .....93	ULTICARE INSULIN SYRINGE/1ML/30G X 5/16" .....205
TWIRLA .....98	TYVASO STARTER KIT SOLN IN 93	ULTICARE INSULIN SYRINGE/SHORT/0.3ML/30G X 5/16" 205
TWIST TOP LANCETS 30G .....158	TZIELD .....44	ULTICARE INSULIN SYRINGE/SHORT/0.3ML/31G X 5/16" 205
TYBLUME CHEW .....98	UBRELVY .....216	ULTICARE INSULIN SYRINGE/SHORT/0.5ML/30G X 5/16" 205
TYBOST .....85	UCERIS (budesonide (intrarectal)) 21	ULTICARE INSULIN SYRINGE/SHORT/0.5ML/30G X 5/16" 205
TYENNE SOAJ .....11	UCERIS TB24 (budesonide) 101	ULTICARE INSULIN SYRINGE/SHORT/0.5ML/30G X 5/16" 205
TYENNE SOLN .....11	UDENYCA ONBODY SOSY 135	ULTICARE INSULIN SYRINGE/SHORT/0.5ML/30G X 5/16" 205
TYENNE SOSY .....11	UDENYCA SOAJ .....135	ULTICARE INSULIN SYRINGE/SHORT/0.5ML/31G X 5/16" 205
TYGACIL (tigecycline) .....254	UDENYCA SOSY .....135	ULTICARE INSULIN SYRINGE/SHORT/0.5ML/31G X
TYKERB (lapatinib ditosylate) .....75	ULORIC (febuxostat) .....130	ULTICARE INSULIN SYRINGE/SHORT/0.5ML/31G X
	ULTANE (sevoflurane) .....129	

5/16"	205	NEEDLES/32G X 4MM	206	SYRINGES/0.5ML/31G X 1/4" ...	206
ULTICARE INSULIN SYRINGE/SHORT/1ML/30G X 5/16"	205	ULTICARE MICRO PEN NEEDLES/32G X 5/32"	206	ULTICARE U-100 INSULIN SYRINGES/1ML/31G X 1/4"	206
ULTICARE INSULIN SYRINGE/SHORT/1ML/31G X 5/16"	205	ULTICARE MINI PEN NEEDLES 31GX6MM	206	ULTIGUARD SAFEPAK INSULIN SYRINGE 0.3ML/30G X 1/2"/SHARPS C	206
ULTICARE INSULIN SYRINGE/U- 100/0.3ML/30G X 1/2"	205	ULTICARE MINI PEN NEEDLES ULTI-FINE IV	206	ULTIGUARD SAFEPAK INSULIN SYRINGE 1/2ML 30G X 1/2"/SHARPS C	207
ULTICARE INSULIN SYRINGE/U- 100/0.3ML/31G X 5/16"	205	ULTICARE MINI PEN NEEDLES/31G X 6MM	206	ULTIGUARD SAFEPAK INSULIN SYRINGE 1ML 30G X 1/2"/SHARPS CON	207
ULTICARE INSULIN SYRINGE/U- 100/0.5ML/30G X 1/2"	205	ULTICARE MINI PEN NEEDLES31GX6MM	206	ULTIGUARD SAFEPAK INSULIN SYRINGE 1ML 31G X 5/16"/SHARPS CO	207
ULTICARE INSULIN SYRINGE/U- 100/0.5ML/31G X 5/16"	205	ULTICARE MINI SAFETY PENNEEDLES 30G X 3/16"	206	ULTIGUARD SAFEPAK INSULIN SYRINGE/0.3ML/31G X 5/16"/SHARPS	207
ULTICARE INSULIN SYRINGE/U- 100/1ML/30G X 1/2"	205	ULTICARE ORIGINAL PEN NEEDLES ULTI-FINE	206	ULTIGUARD SAFEPAK INSULIN SYRINGE/0.3ML/31G X 5/16"/SHARPS	207
ULTICARE INSULIN SYRINGE/U- 100/1ML/31G X 5/16"	205	ULTICARE PEN NEEDLES 31GX 5MM/MINI	206	ULTIGUARD SAFEPAK MINI PEN NEEDLE/31G X 3/16"/SHARPS CONTAI	207
ULTICARE INSULIN SYRINGEULTRAFINE U- 100/0.3ML/31G X 5/16"	205	ULTICARE PEN NEEDLES/29GX 12.7MM	206	ULTIGUARD SAFEPAK PEN NEEDLE/29G X 1/2"/SHARPS CONTAINER	207
ULTICARE INSULIN SYRINGEULTRAFINE U- 100/0.5ML/31G X 5/16"	205	ULTICARE SHORT PEN NEEDLES 31GX8MM	206	ULTIGUARD SAFEPAK/MICROPEN NEEDLE/32G X 4 MM	207
ULTICARE INSULIN SYRINGEULTRAFINE U- 100/1ML/31G X 5/16"	205	ULTICARE SHORT PEN NEEDLES ULTI-FINE IV	206	ULTIGUARD SAFEPAK/MICROPEN NEEDLE/32G X 4MM/SHARPS CONTAIN	207
ULTICARE MICRO PEN NEEDLES 31G X 8MM	205	ULTICARE SHORT PEN NEEDLES/31G X 8MM	206	ULTIGUARD SAFEPAK/MICROPEN NEEDLE/32G X 4MM/SHARPS CONTAIN	207
ULTICARE MICRO PEN NEEDLES 32G X 4MM	205	ULTICARE SHORT SAFETY PEN NEEDLES 30G X 5/16"	206	ULTIGUARD SAFEPAK/MICROPEN NEEDLE/32G X 5/32"	207
ULTICARE MICRO PEN NEEDLES/31G X 1/4"	205	ULTICARE TUBERCULIN SAFETY SYRINGE/1ML/25G X 1" MISC ..	206	ULTIGUARD SAFEPAK/MINI PEN NEEDLE/31G X 6MM/SHARPS CONTAIN	207
ULTICARE MICRO PEN NEEDLES/31G X 5/16"	205	ULTICARE U-100 INSULIN SYRINGES/0.3ML/31G X 1/4" ...	206	ULTIGUARD SAFEPAK/MINI PEN NEEDLE/31G X 6MM/SHARPS CONTAIN	207
ULTICARE MICRO PEN		ULTICARE U-100 INSULIN SYRINGES/0.3ML/31G X1/4" ...	206	ULTIGUARD SAFEPAK/MINI PEN NEEDLE/32G X 1/4"/SHARPS	

CONTAIN	207	ULTRA FLO INSULIN PEN NEELE 31GX8MM	208	ULTRACARE PEN NEEDLES/31G X 1/4"	208
ULTIGUARD SAFEPACK/SHORTPEN NEEDLE/31G X 5/16"/SHARPS CONTA	207	ULTRA FLO INSULIN SYRINGE 0.3ML/29G X 1/2"	208	ULTRACARE PEN NEEDLES/31G X 3/16"	208
ULTIGUARD SAFEPACK/SHORTPEN NEEDLE/31G X 8MM/SHARPS CONTAIN	207	ULTRA FLO INSULIN SYRINGE 0.3ML/30GX5/16"	208	ULTRACARE PEN NEEDLES/31G X 5/16"	209
ULTIGUARD SAFEPACK/TINY PEN NEEDLE/32G X 4MM/SHARPS CONTAIN	207	ULTRA FLO INSULIN SYRINGE 0.3ML/31GX5/16"	208	ULTRACARE PEN NEEDLES/32G X 1/14"	209
ULTIGUARD SAFEPACK/TINY PEN NEEDLE/32G X 4MM/SHARPS CONTAIN	207	ULTRA FLO INSULIN SYRINGE 0.5ML/29GX1/2"	208	ULTRACARE PEN NEEDLES/32G X 3/16"	209
ULTIGUARD SAFEPACK/TINY PEN NEEDLE/32G X 6MM/SHARPS CONTAIN	207	ULTRA FLO INSULIN SYRINGE 1/2 UNIT/0.3ML/30GX1/2"	208	ULTRACARE PEN NEEDLES/32G X 5/32"	209
ULTIGUARD SAFEPACK/TINY PEN NEEDLE/32G X 6MM/SHARPS CONTAIN	207	ULTRA FLO INSULIN SYRINGE 1/2 UNIT/0.3ML/30GX5/16"	208	ULTRACARE PEN NEEDLES/33G X 5/32"	209
ULTI-LANCE AUTOMATIC/ CLEAR TIP MISC	158	ULTRA FLO INSULIN SYRINGE 1/2 UNIT/0.3ML/31GX5/16"	208	ULTRACET (tramadol- acetaminophen)	18
ULTILET CLASSIC LANCETS ...	158	ULTRA THIN LANCETS 31G ...	159	ULTRA-THIN II INSULIN SYRINGE SHORT/U-100/0.3ML/30GX5/16"	209
ULTILET LANCETS	158	ULTRA THIN PEN NEEDLES 32G X 4MM	208	ULTRA-THIN II INSULIN SYRINGE SHORT/U-100/0.3ML/31GX5/16"	209
ULTILET LANCETS 33G	158	ULTRACARE INSULIN SYRINGE/U- 100/0.3ML/30G X 5/16"	208	ULTRA-THIN II INSULIN SYRINGE SHORT/U-100/0.5ML/30GX5/16"	209
ULTILET PEN NEEDLE 32GX4MM/SHORT	207	ULTRACARE INSULIN SYRINGE/U- 100/0.3ML/31G X 5/16"	208	ULTRA-THIN II INSULIN SYRINGE SHORT/U-100/0.5ML/31GX5/16"	209
ULTILET SAFETY LANCETS 23G 159		ULTRACARE INSULIN SYRINGE/U- 100/0.5ML/30G X 1/2"	208	ULTRA-THIN II INSULIN SYRINGE SHORT/U-100/0.5ML/31GX5/16"	209
ULTIVA (remifentanil hcl)	17	ULTRACARE INSULIN SYRINGE/U- 100/0.5ML/30G X 5/16"	208	ULTRA-THIN II INSULIN SYRINGE SHORT/U-100/1ML/30GX5/16"	209
ULTOMIRIS	131	ULTRACARE INSULIN SYRINGE/U- 100/0.5ML/31G X 5/16"	208	ULTRA-THIN II INSULIN SYRINGE SHORT/U-100/1ML/31GX5/16"	209
ULTRA COMFORT INSULIN SYRINGE/U-100/0.3ML/30G X 5/16"	207	ULTRACARE INSULIN SYRINGE/U- 100/1ML/30G X 1/2"	208	ULTRA-THIN II INSULIN SYRINGE/U-100/0.5ML/29GX1/2"	209
ULTRA FLO INSULIN PEN NEEDLE 31GX5MM	207	ULTRACARE INSULIN SYRINGE/U- 100/1ML/31G X 5/16"	208	ULTRA-THIN II INSULIN SYRINGE/U-100/1ML/29GX1/2"	209
ULTRA FLO INSULIN PEN NEEDLE 32GX4MM	207	ULTRACARE INSULIN SYRINGE/U- 100/1ML/30G X 5/16"	208	ULTRA-CARE LANCETS 30G ...	159
ULTRA FLO INSULIN PEN NEEDLE 33GX4MM	207	ULTRACARE INSULIN SYRINGE/U- 100/1ML/31G X 5/16"	208		
ULTRA FLO INSULIN PEN NEEDLES	208				

ULTRA-THIN II LANCETS 28G ..159	UNIFINE PENTIPS PLUS 33GX 5/32" .....210	UNILET EXCELITE II 159
ULTRA-THIN II LANCETS 30G ..159	UNIFINE PENTIPS PLUS 33GX4MM.....210	UNILET G.P. SUPERLITE LANCET . 159
ULTRA-THIN II MINI PEN NEEDLES/31GX3/16" .....209	UNIFINE PENTIPS PLUS/30GX 3/16" .....210	UNILET GP 28 ULTRA THIN ....159
ULTRA-THIN II PEN NEEDLES 29GX1/2" .....209	UNIFINE PENTIPS/30G X 3/16" 210	UNILET LANCETS MICRO-THIN33G.....159
ULTRA-THIN II PEN NEEDLES/SHORT/31GX5/16" ..209	UNIFINE PROTECT SAFETY PEN NEEDLE 30G X 5MM .....210	UNILET LANCETS SUPER- THIN30G .....159
ULTRAVATE LOTN 110	UNIFINE PROTECT SAFETY PEN NEEDLE 30G X 8MM .....210	UNILET LANCETS ULTRA-THIN 28G .....159
UNASYN BULK PACK IV (ampicillin & sulbactam sodium) .....247	UNIFINE PROTECT SAFETY PEN NEEDLE 32G X 4MM .....210	UNISTIK 2 NORMAL .....159
UNASYN IJ 1 GM-0.5 GM, 2 GM-1 GM (ampicillin & sulbactam sodium) . 247	UNIFINE SAFECONTROL PEN NEEDLE 31GX5MM .....210	UNISTIK 3 COMFORT .....159
UNIFINE PEN NEEDLE/32G X4MM . 209	UNIFINE SAFECONTROL PEN NEEDLE 31GX6MM .....210	UNISTIK 3 EXTRA .....159
UNIFINE PENTIPS 29GX12MM ..209	UNIFINE SAFECONTROL PEN NEEDLE 31GX8MM .....210	UNISTIK 3 GENTLE 159
UNIFINE PENTIPS 31G X 3/16" 209	UNIFINE SAFECONTROL PEN NEEDLE/30G X 3/16" .....211	UNISTIK 3 NORMAL .....159
UNIFINE PENTIPS 31GX5MM ..209	UNIFINE SAFECONTROL PEN NEEDLE/30G X 5/16" .....211	UNISTIK CZT COMFORT 160
UNIFINE PENTIPS 31GX6MM ..210	UNIFINE ULTRA PEN NEEDLE/31GX5MM .....211	UNISTIK CZT NORMAL 160
UNIFINE PENTIPS 31GX8MM ..210	UNIFINE ULTRA PEN NEEDLE/31GX6MM .....211	UNISTIK NORMAL .....160
UNIFINE PENTIPS 32GX4MM ..210	UNIFINE ULTRA PEN NEEDLE/31GX8MM .....211	UNISTIK PRO SAFETY LANCET 21G .....160
UNIFINE PENTIPS 32GX6MM ..210	UNIFINE ULTRA PEN NEEDLE/32GX4MM .....211	UNISTIK PRO SAFETY LANCET 25G .....160
UNIFINE PENTIPS 33GX4MM ..210	UNILET COMFORTOUCH LANCET 159	UNISTIK PRO SAFETY LANCET 28G .....160
UNIFINE PENTIPS PLUS 29GX12MM .....210	UNILET EXCELITE 159	UNISTIK SAFETY LANCETS 28G 160
UNIFINE PENTIPS PLUS 31GX5MM.....210		UNISTIK SAFETY LANCETS 30G 160
UNIFINE PENTIPS PLUS 31GX6MM.....210		UNISTIK TOUCH SAFETY LANCETS 21G .....160
UNIFINE PENTIPS PLUS 31GX8MM.....210		UNISTIK TOUCH SAFETY LANCETS 23G .....160
UNIFINE PENTIPS PLUS 32GX4MM.....210		UNISTIK TOUCH SAFETY LANCETS 28G .....160

UNISTIK TOUCH SAFETY	UZEDY SUSY 75 MG/0.21ML .....81	STANDARD 21G .....160
LANCETS 30G .....160	VABOMERE .....62	VALUE PLUS LANCING DEVICE
UNITUXIN .....69	VABYSMO SOLN .....238	MISC .....160
UNIVERSAL 1 LANCETS THIN26G . 160	VABYSMO SOSY .....238	VALUMARK LANCET SUPER THIN 30G .....160
UNIVERSAL 1 LANCETS ULTRA	VAFSEO .....135	VALUMARK LANCET ULTRA THIN 28G .....160
THIN 30G .....160	VAGIFEM TABS (estradiol vaginal) 264	VALUMARK PEN NEEDLES
UPLIZNA .....223	valacyclovir hcl .....87	29GX12MM .....211
UPTRAVI SOLR .....94	VALCHLOR .....104	VALUMARK PEN NEEDLES 31GX 6MM .....211
UPTRAVI TABS .....94	VALCYTE SOLR (valganciclovir hcl) . 86	VALUMARK PEN NEEDLES 31GX 8MM .....211
UPTRAVI TITRATION PACK TBPK 94	VALCYTE TABS (valganciclovir hcl) . 86	VANALICE GEL .....113
urea CREA 39 %, 40 %110	valganciclovir hcl SOLR .....86	VANCOGIN CAPS (vancomycin hcl) . 63
URE-NA .....115	valganciclovir hcl TABS .....86	vancomycin hcl CAPS .....63
UROKIT-K 10 TBCR (potassium citrate (alkalinizer)) .....129	VALIUM TABS (diazepam) .....24	VANCOMYCIN HCL SOLN .....63
UROKIT-K 15 TBCR (potassium citrate (alkalinizer)) .....129	valproate sodium SOLN IV 100 MG/ML, 500 MG/5ML .....39	vancomycin hcl SOLR IV 1 GM, 1.25 GM, 1.5 GM, 5 GM, 10 GM, 500 MG, 750 MG, 1000 MG .....63
UROKIT-K 5 TBCR (potassium citrate (alkalinizer)) .....129	valproate sodium SOLN OR 250 MG/5ML, 500 MG/10ML .....39	VANCOMYCIN HYDROCHLORIDE SOLN IV 500 MG/100ML, 750 MG/150ML, 1000 MG/200ML, 1250 MG/250ML, 1500 MG/300ML, 1750 MG/350ML .....63
UROXATRAL (alfuzosin hcl) .....130	valproic acid CAPS .....39	VANCOMYCIN HYDROCHLORIDE SOLR IV (vancomycin hcl) .....63
URSO 250 TABS (ursodiol) .....125	valrubicin .....71	VANCOMYCIN HYDROCHLORIDE SOLR IV .....63
URSO FORTE TABS (ursodiol) ..125	valsartan SOLN .....59	VANCOMYCIN
URSODIOL .....97	valsartan TABS .....59	HYDROCHLORIDE/DEXTROSE 1 GM/200ML-5 %, 1.25 GM/250ML-5 %, 1.5 GM/300ML-5 %, 500 MG/100ML-5 %, 750 MG/150ML-5 %63
ursodiol CAPS .....125	valsartan-hydrochlorothiazide ....61	VANCOMYCIN SOLN IV .....63
ursodiol TABS .....125	VALSTAR (valrubicin) .....71	
UZEDY SUSY 100 MG/0.28ML ...81	VALTOCO 10 MG DOSE LIQD ...34	
UZEDY SUSY 125 MG/0.35ML ...81	VALTOCO 15 MG DOSE LQPK ...34	
UZEDY SUSY 150 MG/0.42ML ...81	VALTOCO 20 MG DOSE LQPK ...34	
UZEDY SUSY 200 MG/0.56ML ...81	VALTOCO 5 MG DOSE LIQD .....34	
UZEDY SUSY 250 MG/0.7ML .....81	VALTrex (valacyclovir hcl) .....87	
UZEDY SUSY 50 MG/0.14ML .....81	VALUE PLUS LANCETS	

VANFLYTA	75	VAXELIS SUSP	255	venlafaxine hcl TB24 37.5 MG, 75 MG	42
VANISHPOINT INSULIN SYRINGE/1ML/29G X 1/2"	211	VAXELIS SUSY	255	VENOFER	136
VANISHPOINT INSULIN SYRINGE/1ML/30G X 3/16"	211	VAXNEUVANCE	260	VENTAVIS	93
VANOS CREA (fluocinonide)	110	VAZCULEP SOLN IV (phenylephrine hcl (pressors))	265	VENTOLIN HFA AERS (albuterol sulfate)	30
VAPRISOL	123	VCF VAGINAL CONTRACEPTIVE FILM FILM	264	VEOPOZ	131
VAQTA	263	VECTIBIX 100 MG/5ML, 400 MG/20ML	69	VEOZAH	120
varenicline tartrate TABS	252	VECTICAL (calcitriol (topical))	106	verapamil hcl CP24	91
varenicline tartrate TBPK	252	vecuronium bromide SOLR	234	verapamil hcl SOLN 2.5 MG/ML	91
VARIVAX SUSR IJ 1350 PFU/0.5ML 263		VEGZELMA	68	verapamil hcl TABS 40 MG	91
VARIZIG SOLN	246	VEKLURY SOLR	87	verapamil hcl TABS 80 MG, 120 MG	91
VASCEPA 0.5 GM (icosapent ethyl)	55	VELCADE SOLR IJ (bortezomib)	75	verapamil hcl TBCR 120 MG, 180 MG	91
VASCEPA 1 GM (icosapent ethyl)	56	VELETRI (epoprostenol sodium)	93	verapamil hcl TBCR 240 MG	91
VASERETIC 25 MG-10 MG (enalapril maleate & hydrochlorothiazide)	61	VELPHORO	128	VERAPAMIL HYDROCHLORIDE ER CP24 (verapamil hcl)	91
VASHE WOUND THERAPY SOLN	113	VELSIPITY	127	VEREGEN	102
vasopressin SOLN IV	122	VELTASSA 16.8 GM, 25.2 GM	223	VERELAN CP24 (verapamil hcl)	91
VASOPRESSIN/SODIUM CHLORIDE SOLN 0.9 %-20 UNIT/100ML, 0.9 %-40 UNIT/100ML	122	VELTASSA 8.4 GM	223	VERELAN PM CP24 (verapamil hcl)	91
VASOSTRICT SOLN IV (vasopressin)	122	VEMLIDY	87	VERIFINE INSULIN PEN NEEDLE 29G X 12MM	211
VASOSTRICT SOLN	122	VENCLEXTA STARTING PACK TBPK	69	VERIFINE INSULIN PEN NEEDLE 31G X 5MM	211
VASOTEC TABS 10 MG, 20 MG (enalapril maleate)	58	VENCLEXTA TABS 10 MG	69	VERIFINE INSULIN PEN NEEDLE 31G X 8MM	211
VASOTEC TABS 2.5 MG, 5 MG (enalapril maleate)	58	VENCLEXTA TABS 100 MG	69	VERIFINE INSULIN PEN NEEDLE 32G X 4MM	211
VAXCHORA	260	VENCLEXTA TABS 50 MG	69	VERIFINE INSULIN PEN NEEDLE 32G X 6MM	211
		VENLAFAXINE BESYLATE ER	42	VERIFINE INSULIN SYRINGE/0.3ML/31G X 8MM	211
		venlafaxine hcl CP24 150 MG	42		
		venlafaxine hcl CP24 37.5 MG, 75 MG	42		
		venlafaxine hcl TABS	42		
		venlafaxine hcl TB24 150 MG	42		
		venlafaxine hcl TB24 225 MG	42		

VERIFINE INSULIN SYRINGE/0.5ML/29G X 12MM ..211	VERIFINE UNIVERSAL LANCETS 30G .....161	212	VIDA MIA UNILET LANCETS SUPER THIN 30G 161
VERIFINE INSULIN SYRINGE/0.5ML/31G X 8MM ...211	VERIFINE UNIVERSAL LANCETS 33G .....161		VIDA MIA UNILET LANCETS ULTRA THIN 28G 161
VERIFINE INSULIN SYRINGE/1ML/29G X 12MM ....212	VERKAZIA EMUL 239		VIDA MIA UNIPFINE PENTIPSSHORT 31GX8MM ....212
VERIFINE INSULIN SYRINGE/1ML/31G X 8MM .....212	VERQUVO 94		VIDAZA SUSR (azacitidine) 68
VERIFINE INSULIN SYRINGE0.3ML/31G X 8MM ....212	VERSACLOZ SUSP 82		vigabatrin PACK 39
VERIFINE INSULIN SYRINGE0.5ML/29G X 12MM ..212	VERZENIO 100 MG .....75		vigabatrin TABS 39
VERIFINE INSULIN SYRINGE0.5ML/31G X 8MM ....212	VERZENIO 50 MG, 150 MG, 200 MG.....75		VIGAFYDE SOLN 39
VERIFINE INSULIN SYRINGE1ML/29G X 12MM ....212	VESICARE LS SUSP .....259		VIGAMOX SOLN OP (moxifloxacin hcl (ophth)) 239
VERIFINE INSULIN SYRINGE1ML/31G X 8MM .....212	VESICARE TABS 10 MG (solifenacin succinate) .....259		VIIBRYD TABS (vilazodone hcl) ..41
VERIFINE PLUS INSULIN PEN NEEDLE 31G X 5MM .....212	VESICARE TABS 5 MG (solifenacin succinate) .....259		VIJOICE PACK .....223
VERIFINE PLUS INSULIN PEN NEEDLE 31G X 8MM .....212	VEVYE SOLN 239		VIJOICE TBPK 223
VERIFINE PLUS INSULIN PEN NEEDLES 32G X 4MM .....212	VFEND IV SOLR (voriconazole) ..54		vilazodone hcl TABS 41
VERIFINE PLUS PEN NEEDLE/32G X 4MM .....212	VFEND SUSR (voriconazole) .....54		VILTEPSO 234
VERIFINE SAFETY LANCET MINI 21G X 2.4MM 160	VFEND TABS (voriconazole) .....54		VIMIZIM .....122
VERIFINE SAFETY LANCET MINI 23G X 1.8MM 160	VIBATIV 750 MG .....63		VIMOVO (naproxen-esomeprazole magnesium) .....12
VERIFINE SAFETY LANCET MINI 28G X 1.8MM 161	VIBERZI .....127		VIMPAT SOLN IV 200 MG/20ML (lacosamide) 38
VERIFINE SAFETY LANCET MINI 30G X 1.8MM 161	VIBRAMYCIN CAPS (doxycycline hyclate) 255		VIMPAT SOLN OR 10 MG/ML (lacosamide) 38
VERIFINE UNIVERSAL LANCETS 28G .....161	VIBRAMYCIN SUSR (doxycycline (monohydrate)) 255		VIMPAT TABS (lacosamide) 38
	VICTOZA (liraglutide) 45		vinblastine sulfate SOLN .....77
	VIDA MIA AUTOLET LANCINGDEVICE MISC 161		vincristine sulfate .....77
	VIDA MIA UNIFINE PENTIPS32GX4MM .....212		vinorelbine tartrate 77
	VIDA MIA UNIFINE PENTIPSMINI 31GX6MM .....212		VIOKACE TABS .....116
	VIDA MIA UNIFINE PENTIPSORIGINAL 29GX12MM		VIRACEPT TABS .....85
			VIRAZOLE (ribavirin) .....87

VIREAD POWD	85	VIVITROL	51	VOYDEYA TABS	131
VIREAD TABS (tenofovir disoproxil fumarate)	85	VIVJOA	54	VOYDEYA TBPK	131
VIREAD TABS	85	VIVOTIF	260	VPRIV	133
VISTARIL CAPS 25 MG (hydroxyzine pamoate)	23	VIZIMPRO	69	VRAYLAR CAPS	79
VISTARIL CAPS 50 MG (hydroxyzine pamoate)	23	VOGELXO GEL TD (testosterone) 20		VTAMA	106
VISUDYNE	240	VOGELXO GEL TD (testosterone) 21		VUITY SOLN	238
VITAFOL FE+	227	VOGELXO PUMP GEL TD (testosterone)	20	VUMERITY	251
VITAFOL GUMMIES	227	VOLTAREN ARTHRITIS PAIN GEL EX (diclofenac sodium (topical)) ..	104	VUSION (miconazole-zinc oxide-white petrolatum)	103
VITAFOL ULTRA	227	VONJO	75	VYEPTI	216
VITAFOL-OB TABS	227	VONVENDI	131	VYJUVEK	113
VITAFOL-OB+DHA MISC	227	VOQUEZNA	258	VYNDAMAX	94
VITAFOL-ONE CAPS	227	VOQUEZNA DUAL PAK	258	VYNDAQEL	94
VITAMIN D3 LIQD OR 5000 UNIT/ML	265	VOQUEZNA TRIPLE PAK	258	VYONDYS 53	234
vitamin e SOLN 15 MG/0.67ML ..	266	VORANIGO	75	VYTORIN (ezetimibe-simvastatin) 55	
VITRAKVI CAPS	75	VORICONAZOLE SOLR (voriconazole)	54	VYVANSE CAPS	2
VITRAKVI SOLN	75	voriconazole SOLR	54	VYVANSE CHEW	2
VITRASE SOLN	221	voriconazole SUSR	54	VYVGART	221
VIVAGUARD LANCETS	161	voriconazole TABS	54	VYVGART HYTRULO	221
VIVAGUARD LANCETS 30G	161	VORTEX HOLDING CHAMBER/MASK/CHILDS/FROG DEVI	216	VYXEOS	72
VIVAGUARD LANCING DEVICE MISC	161	VORTEX HOLDING CHAMBER/MASK/TODDLER/LADY BUG DEVI	216	VYZULTA	244
VIVAGUARD SAFETY LANCETS28G	161	VORTEX VALVED HOLDING CHAMBER DEVI	216	WAINUA	252
VIVELLE-DOT PTTW (estradiol) .	125	VOSEVI	87	WAKIX	3
VIVELLE-DOT PTTW 0.025 MG/24HR, 0.0375 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (estradiol) 125		VOTRIENT (pazopanib hcl)	75	WALGREENS ADVANCED TRAVELLANCETS 28G	161
VIVIMUSTA SOLN	67	VOWST	128	WALGREENS COMFORT ASSUREDLANCETS MICRO THIN/33G	161
		VOXZOGO	122	WALGREENS COMFORT ASSUREDLANCETS SUPER THIN/28G	161
				WALGREENS LANCETS	161

WALGREENS THIN LANCETS . 161	WILZIN .....221	XCOPRI TABS 25 MG .....38
WALGREENS ULTRA THIN LANCETS .....161	WINLEVI 102	XCOPRI TABS 50 MG, 100 MG ...38
warfarin sodium TABS .....31	WINREVAIR .....93	XCOPRI TBPK .....38
water for injection, sterile IJ 247	WINRHO SDF SOLN 1500 UNIT/1.3ML .....246	XDEMVY .....239
water for irrigation, sterile .....223	WINRHO SDF SOLN 15000 UNIT/13ML 246	XELJANZ SOLN .....6
WEGMANS UNIFINE PENTIPS PLUS 32GX4MM 212	WINRHO SDF SOLN 2500 UNIT/2.2ML .....246	XELJANZ TABS .....7
WEGMANS UNIFINE PENTIPS PLUS/MINI/31GX5MM .....212	WINRHO SDF SOLN 5000 UNIT/4.4ML .....246	XELJANZ XR TB24 6
WEGMANS UNIFINE PENTIPS PLUS/SHORT/31GX8MM 212	XACIATO GEL .....264	XELODA (capecitabine) .....68
WEGMANS UNIFINE PENTIPS PLUS/ULTRA SHORT/31GX6MM 212	XADAGO 79	XELPROS EMUL .....244
WEGOVIY .....2	XALATAN SOLN (latanoprost) ...244	XELSTRYM .....2
WELCHOL PACK (colesevelam hcl) . 56	XALKORI CAPS 75	XEMBIFY 246
WELCHOL TABS (colesevelam hcl) . 56	XALKORI CPSP 150 MG .....76	XENAZINE (tetrabenazine) .....250
WELIREG 71	XALKORI CPSP 20 MG, 50 MG ...76	XENON XE 133 .....113
WELLBUTRIN SR TB12 (bupropion hcl) 40	XANAX TABS 0.25 MG, 0.5 MG, 1 MG (alprazolam) .....24	XENPOZYME .....122
WELLBUTRIN XL TB24 (bupropion hcl) 40	XANAX TABS 2 MG (alprazolam) .24	XEOMIN .....234
WESCAP-C DHA 227	XANAX XR TB24 0.5 MG, 1 MG, 3 MG (alprazolam) .....24	XEPI .....102
WESCAP-PN DHA .....227	XANAX XR TB24 2 MG (alprazolam) 24	XERAC AC .....112
WESNATAL DHA COMPLETE ..227	XARELTO STARTER PACK TBPK 31	XERAVA 254
WESNATE DHA CAPS .....227	XARELTO SUSR .....31	XERESE 106
WESTAB PLUS TABS .....227	XARELTO TABS 10 MG .....31	XGEVA SOLN 119
WESTGEL DHA .....227	XARELTO TABS 15 MG .....31	XHANCE EXHU .....230
white petrolatum-mineral oil .....236	XARELTO TABS 2.5 MG 31	XIAFLEX .....221
WILATE KIT 131	XARELTO TABS 20 MG .....31	XIFAXAN 200 MG .....62
	XATMEP SOLN .....68	XIFAXAN 550 MG .....62
	XCOPRI TABS 150 MG, 200 MG .38	XIGDUO XR (dapagliflozin propanediol-metformin hcl) 44
		XIGDUO XR 1000 MG-10 MG, 500 MG-10 MG, 500 MG-5 MG 44
		XIGDUO XR 1000 MG-2.5 MG, 1000 MG-5 MG 44
		XIIDRA .....240

XIPERE	242	XTANDI TABS 80 MG	70	YONSA	70
XOFIGO	76	XULTOPHY 100/3.6	44	YORVIPATH	122
XOFLUZA 40 MG	87	XYLOCAINE SOLN 1 %, 2 % (lidocaine hcl (local anesth.))	140	YUFLYMA 1-PEN KIT AJKT 40 MG/0.4ML	10
XOFLUZA 80 MG	87	XYLOCAINE/EPINEPHRINE SOLN (lidocaine w/ epinephrine)	139	YUFLYMA 1-PEN KIT AJKT 80 MG/0.8ML	10
XOLAIR SOAJ	25	XYLOCAINE/EPINEPHRINE SOLN (lidocaine w/ epinephrine)	140	YUFLYMA 2-PEN KIT AJKT	10
XOLAIR SOLR	25	XYLOCAINE-MPF SOLN 0.5 %, 1 %, 1.5 %, 2 % (lidocaine hcl (local anesth.))	140	YUFLYMA 2-SYRINGE KIT PSKT 20 MG/0.2ML	10
XOLAIR SOSY 300 MG/2ML	25	XYLOCAINE-MPF/EPINEPHRINE SOLN (lidocaine w/ epinephrine)	140	YUFLYMA 2-SYRINGE KIT PSKT 40 MG/0.4ML	10
XOLAIR SOSY 75 MG/0.5ML, 150 MG/ML	25	XYLOCAINE-MPF/EPINEPHRINE SOLN	140	YUFLYMA CD/UC/HS STARTER AJKT	10
XOLREMDI	136	XYNTHA	131	YUPELRI	26
XOPENEX 0.31 MG/3ML (levalbuterol hcl)	30	XYNTHA SOLOFUSE	131	YUSIMRY SC 40 MG/0.8ML	10
XOPENEX 0.63 MG/3ML, 1.25 MG/3ML (levalbuterol hcl)	30	XYOSTED SOAJ	21	YUTIQ	242
XOPENEX CONCENTRATE (levalbuterol hcl)	31	XYREM SOLN	248	ZADITOR 0.035 % (ketotifen fumarate (ophth))	243
XOPENEX HFA (levalbuterol tartrate)	31	XYWAV	248	zafirlukast	26
XOSPATA	76	XYZAL ALLERGY 24HR CHILDRENS SOLN (levocetirizine dihydrochloride)	55	zaleplon	138
XPHE MAXAMAID POWD	116	XYZAL ALLERGY 24HR TABS (levocetirizine dihydrochloride)	55	ZALTRAP	68
XPHE MAXAMUM PACK	236	YASMIN 28 (drospirenone-ethinyl estradiol)	98	ZANAFLEX CAPS (tizanidine hcl) 228	
XPHE-XTYR MAXAMAID POWD	116	YAZ (drospirenone-ethinyl estradiol) 98		ZANAFLEX TABS 4 MG (tizanidine hcl)	228
XPHOZAH	122	YCANATH SOLN	111	ZANOSAR	67
XPOVIO 40 MG, 50 MG	71	YERVOY	69	ZARONTIN CAPS (ethosuximide)	39
XPOVIO 40 MG, 60 MG	71	YESCARTA	69	ZARONTIN SOLN (ethosuximide)	39
XPOVIO 60 MG TWICE WEEKLY 71		YF-VAX INJ	264	ZARXIO 300 MCG/0.5ML	136
XPOVIO 80 MG TWICE WEEKLY 71		YONDELIS	67	ZARXIO 480 MCG/0.8ML	135
XTAMPZA ER	17			ZATEAN-PN DHA	227
XTANDI CAPS	70			ZAVESCA (miglustat)	133
XTANDI TABS 40 MG	70			ZAVZPRET	216

ZEGALOGUE SOAJ	44	ZEPOSIA CAPS	251	ZIAC (bisoprolol & hydrochlorothiazide)	61
ZEGALOGUE SOSY	44	ZEPOSIA STARTER KIT CPPK ..	251	ZIAGEN SOLN (abacavir sulfate) ..	85
ZEGERID CAPS (omeprazole- sodium bicarbonate)	258	ZEPZELCA	67	ZIAGEN TABS (abacavir sulfate) ..	85
ZEGERID PACK (omeprazole- sodium bicarbonate)	258	ZERBAXA	94	zidovudine CAPS	85
ZEGERID PACK 1680 MG-40 MG (omeprazole-sodium bicarbonate) 258		ZERVIATE	243	zidovudine SYRP	85
		ZESTORETIC (lisinopril & hydrochlorothiazide)	61	zidovudine TABS	85
		ZESTRIL TABS 10 MG (lisinopril) ..	58	ZIEXTENZO	136
ZEJULA TABS	76	ZESTRIL TABS 2.5 MG, 5 MG (lisinopril)	58	ZILBRYSQ 16.6 MG/0.416ML	131
ZELAPAR TBDP	79	ZESTRIL TABS 20 MG (lisinopril) ..	58	ZILBRYSQ 23 MG/0.574ML, 32.4 MG/0.81ML	132
ZELBORAF	76	ZESTRIL TABS 30 MG, 40 MG (lisinopril)	58	zileuton TB12	26
ZEMAIRA SOLR	252	ZETIA (ezetimibe)	57	ZILRETTA SRER	101
ZEMBRACE SYMTOUCH SOAJ ..	218	ZETONNA AERS	230	ZIMHI SOSY	51
ZEMDRI	6	ZEVALIN Y-90	69	ZINPLAVA	246
ZEMPLAR CAPS 1 MCG, 2 MCG (paricalcitol)	122	ZEV RX INSULIN SYRINGE/0.5ML/30G X 1/2"	212	ZIOPTAN (tafluprost)	244
ZEMPLAR SOLN 2 MCG/ML (paricalcitol)	122	ZEV RX INSULIN SYRINGE/0.5ML/30G X 5/16" ...	213	ziprasidone hcl	79
ZEMPLAR SOLN 5 MCG/ML (paricalcitol)	122	ZEV RX INSULIN SYRINGE/1ML/30G X 1/2"	213	ziprasidone mesylate	79
ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT- 10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 252600 UNIT-189600 UNIT-60000 UNIT, 42000 UNIT-32000 UNIT- 10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT- 63000 UNIT-20000 UNIT	116	ZEV RX INSULIN SYRINGE/1ML/30G X 5/16"	213	ZIPSOR CAPS (diclofenac potassium)	12
ZEPATIER	87	ZEV RX INSULIN SYRINGE/1ML/30G X 1/2"	213	ZIRABEV	68
ZE-PLUS CAPS (multiple vitamin) 225		ZEV RX PEN NEEDLES 31G X 5MM	213	ZIRGAN GEL	239
ZEPOSIA 7-DAY STARTER PACK CPPK	251	ZEV RX PEN NEEDLES 31G X 6MM	213	ZITHROMAX PACK (azithromycin) 140	
		ZEV RX PEN NEEDLES 31G X 8MM	213	ZITHROMAX SOLR (azithromycin) 140	
		ZEV RX PEN NEEDLES 31G X 8MM	213	ZITHROMAX SUSR 100 MG/5ML (azithromycin)	141
		ZEV RX PEN NEEDLES 32G X 4MM	213	ZITHROMAX SUSR 200 MG/5ML (azithromycin)	140
		ZEV RX TWIST TOP LANCETS 30G 161		ZITHROMAX TABS 250 MG, 500 MG (azithromycin)	141
				ZITHROMAX TABS 500 MG	

(azithromycin)	141	ZOLGENSMA 17.6-18.0 KG	234	zolpidem tartrate TABS	138
ZITHROMAX TRI-PAK TABS (azithromycin)	140	ZOLGENSMA 18.1-18.5 KG	235	zolpidem tartrate TBCR	138
ZITHROMAX Z-PAK TABS (azithromycin)	140	ZOLGENSMA 18.6-19.0 KG	235	ZOMACTON SOLR SC	120
ZITUVIO	45	ZOLGENSMA 19.1-19.5 KG	235	ZOMIG SOLN (zolmitriptan)	218
ZOCOR TABS 10 MG, 20 MG (simvastatin)	57	ZOLGENSMA 19.6-20.0 KG	235	ZOMIG SOLN	218
ZOCOR TABS 40 MG (simvastatin) 57		ZOLGENSMA 2.6-3.0 KG	235	ZOMIG TABS 2.5 MG, 5 MG (zolmitriptan)	218
ZOKINVY	223	ZOLGENSMA 20.1-20.5 KG	235	ZONALON (doxepin hcl (antipruritic))	104
zoledronic acid CONC	119	ZOLGENSMA 20.6-21.0 KG	235	ZONEGRAN CAPS 100 MG (zonisamide)	38
zoledronic acid SOLN 4 MG/100ML 119		ZOLGENSMA 3.1-3.5 KG	235	ZONEGRAN CAPS 25 MG (zonisamide)	38
zoledronic acid SOLN 5 MG/100ML 119		ZOLGENSMA 3.6-4.0 KG	235	ZONISADE SUSP	38
ZOLEDRONIC ACID SOLN	119	ZOLGENSMA 4.1-4.5 KG	235	zonisamide CAPS 100 MG	38
ZOLGENSMA 10.1-10.5 KG	234	ZOLGENSMA 4.6-5.0 KG	235	zonisamide CAPS 25 MG, 50 MG .	38
ZOLGENSMA 10.6-11.0 KG	234	ZOLGENSMA 5.1-5.5 KG	235	ZORTRESS (everolimus (immunosuppressant))	223
ZOLGENSMA 11.1-11.5 KG	234	ZOLGENSMA 5.6-6.0 KG	235	ZORYVE	106
ZOLGENSMA 11.6-12.0 KG	234	ZOLGENSMA 6.1-6.5 KG	235	ZORYVE 0.15 %	112
ZOLGENSMA 12.1-12.5 KG	234	ZOLGENSMA 6.6-7.0 KG	235	ZORYVE 0.3 %	106
ZOLGENSMA 12.6-13.0 KG	234	ZOLGENSMA 7.1-7.5 KG	235	ZOSYN	247
ZOLGENSMA 13.1-13.5 KG	234	ZOLGENSMA 7.6-8.0 KG	235	ZOVIRAX CREA (acyclovir topical) 106	
ZOLGENSMA 13.6-14.0 KG	234	ZOLGENSMA 8.1-8.5 KG	235	ZOVIRAX OINT (acyclovir topical) 106	
ZOLGENSMA 14.1-14.5 KG	234	ZOLGENSMA 8.6-9.0 KG	235	ZOVIRAX SUSP (acyclovir)	87
ZOLGENSMA 14.6-15.0 KG	234	ZOLGENSMA 9.1-9.5 KG	235	ZTALMY	38
ZOLGENSMA 15.1-15.5 KG	234	ZOLGENSMA 9.6-10.0 KG	235	ZTLIDO PTCH	111
ZOLGENSMA 15.6-16.0 KG	234	ZOLINZA	76	ZUBSOLV SUBL 0.18 MG-0.7 MG, 0.36 MG-1.4 MG, 0.71 MG-2.9 MG, 1.4 MG-5.7 MG	20
ZOLGENSMA 16.1-16.5 KG	234	zolmitriptan SOLN	218	ZUBSOLV SUBL 2.1 MG-8.6 MG .	20
ZOLGENSMA 16.6-17.0 KG	234	zolmitriptan TABS	218		
ZOLGENSMA 17.1-17.5 KG	234	zolmitriptan TBCR	218		
		zolmitriptan TBCR	218		
		ZOLOFT CONC (sertraline hcl) ...	41		
		ZOLOFT TABS (sertraline hcl) ...	41		
		ZOLPIDEM TARTRATE CAPS ...	138		
		zolpidem tartrate SUBL	138		

ZUBSOLV SUBL 2.9 MG-11.4 MG 20	acetate)	70
ZULRESSO	ZYTIGA 500 MG (abiraterone acetate)	40 70
ZURZUVAE 25 MG	ZYVOX SOLN (linezolid)	40 64
ZURZUVAE 30 MG	ZYVOX SOLN	40 64
ZYCLARA (imiquimod)	ZYVOX SUSR (linezolid)	111 64
ZYCLARA PUMP (imiquimod) ...	ZYVOX TABS (linezolid)	111 64
ZYCLARA PUMP		111
ZYDELIG		76
ZYFLO TABS		26
ZYKADIA TABS		76
ZYLET		242
ZYLOPRIM (allopurinol)		130
ZYMAXID (gatifloxacin (ophth)) .		239
ZYMFENTRA 1-PEN AJKT		127
ZYMFENTRA 2-PEN AJKT		127
ZYMFENTRA 2-SYRINGE PSKT		127
ZYNLONTA		69
ZYNRELEF		12
ZYNTEGLO		134
ZYNYZ		69
ZYPITAMAG 2 MG, 4 MG		57
ZYPREXA RELPREVV		82
ZYPREXA SOLR (olanzapine)		82
ZYPREXA TABS (olanzapine)		82
ZYPREXA ZYDIS TBDP (olanzapine)		82 82
ZYRTEC ALLERGY TABS (cetirizine hcl)		55
ZYRTEC CHILDRENS ALLERGY SOLN OR (cetirizine hcl)		55
ZYTIGA 250 MG (abiraterone		