



HealthSelectSM of Texas

Prescription Drug Program

HealthSelectSM of Texas Prescription Drug Program

Consumer Directed HealthSelectSM Prescription Drug Program

Preferred Drug List

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This list includes information accurate at the time Express Scripts compiled it and may not reflect coverage changes made later. Express Scripts publishes an updated preferred drug list every six months, in January and July. For more information about your HealthSelectSM Prescription Drug Program, visit www.HealthSelectRX.com to review the Master Benefit Plan Document.

Table of Contents

ANTI-INFECTIVES	3
ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS	13
AUTONOMIC & CNS DRUGS, NEUROLOGY & PSYCH.....	22
CARDIOVASCULAR, HYPERTENSION & LIPIDS	46
DERMATOLOGICALS/TOPICAL THERAPY	57
DIAGNOSTICS & MISCELLANEOUS AGENTS	71
EAR, NOSE & THROAT MEDICATIONS.....	74
ENDOCRINE/DIABETES	76
GASTROENTEROLOGY.....	100
IMMUNOLOGY, VACCINES & BIOTECHNOLOGY	108
IMMUNOLOGY	113
MUSCULOSKELETAL & RHEUMATOLOGY	113
OBSTETRICS & GYNECOLOGY.....	116
OPHTHALMOLOGY.....	122
RESPIRATORY, ALLERGY, COUGH & COLD	128
UROLOGICALS.....	133
VITAMINS, HEMATINICS & ELECTROLYTES	135
Index.....	143

List of Abbreviations

ACA: Affordable Care Act

E: Drugs that are not covered by your prescription drug benefit. Lower-cost options are available and covered.

M: Maintenance Medication – Medications used for long periods of time to treat chronic conditions, for example, cholesterol–stabilizing or hypertension medications.

PA: Prior Authorization – Your doctor is required to provide additional information to determine if the drug will be covered by your prescription drug plan.

QL: Quantity Limit – Limits the amount of a medication that will be covered under your prescription drug plan.

SP: Specialty Medication – Drugs that are used in the treatment of rare or complex conditions and are typically injected or infused, are high cost, have special delivery and storage requirements, or require close monitoring or care coordination with your doctor.

ST: Step Therapy – Requires you to first try a cost-effective medication before the more expensive medication will be covered.

Drug Name	Drug Tier	Requirements / Limits
ANTI-INFECTIVES		
ANTIFUNGAL AGENTS		
ABELCET	2	
AMBISOME	3	
<i>amphotericin b</i>	1	
<i>amphotericin b liposome</i>	1	
ANCOBON	3	
BREXAFEMME	3	ST; QL
CANCIDAS	3	
<i>caspofungin</i>	1	
<i>clotrimazole</i>	1	
CRESEMBA	2	ST
DIFLUCAN	3	
ERAXIS (WATER DILUENT)	2	
<i>fluconazole in nacl (iso-osm)</i>	1	ST
<i>fluconazole oral suspension for reconstitution</i>	1	
<i>fluconazole oral tablet 100 mg, 200 mg, 50 mg</i>	1	
<i>fluconazole oral tablet 150 mg</i>	1	QL
<i>flucytosine</i>	1	
<i>griseofulvin microsize</i>	1	
<i>griseofulvin ultramicrosize</i>	1	
<i>itraconazole</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>ketoconazole</i>	1	
<i>micafungin</i>	1	
MYCAMINE	3	
NOXAFIL INTRAVENOUS	2	ST
NOXAFIL ORAL SUSP, DELAYED RELEASE FOR RECON	2	ST
NOXAFIL ORAL SUSPENSION	3	ST
NOXAFIL ORAL TABLET, DELAYED RELEASE (DR/EC)	E	
<i>nystatin</i>	1	
ORAVIG	3	
<i>posaconazole</i>	1	ST
REZZAYO	3	
SPORANOX	3	QL
<i>terbinafine hcl</i>	1	
TOLSURA	E	
VFEND	3	ST
VFEND IV	3	ST
VIVJOA	3	ST; QL
<i>voriconazole</i>	1	ST
ANTIVIRALS		
<i>abacavir</i>	1	
<i>abacavir-lamivudine</i>	1	
<i>acyclovir</i>	1	
<i>acyclovir sodium</i>	1	
<i>adefovir</i>	1	

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
<i>amantadine hcl oral capsule</i>	1	M
<i>amantadine hcl oral solution</i>	1	
<i>amantadine hcl oral tablet</i>	1	M
APRETUDE	3	SP
APTIVUS	2	
<i>atazanavir</i>	1	
ATRIPLA	E	
BARACLUDE ORAL SOLUTION	2	
BARACLUDE ORAL TABLET	E	
BEYFORTUS	0	ACA
BIKTARVY	2	
CABENUVA	E	SP
<i>cidofovir</i>	1	
CIMDUO	2	
COMPLERA	E	
<i>darunavir</i>	1	
DELSTRIGO	E	
DESCOVY	2	
<i>didanosine</i>	1	
DOVATO	2	
EDURANT	2	
<i>efavirenz</i>	1	
<i>efavirenz-emtricitabin-tenofov</i>	1	
<i>efavirenz-lamivu-tenofov disop</i>	1	
<i>emtricitabine</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>emtricitabine-tenofovir (tdf) oral tablet 100-150 mg, 133-200 mg, 167-250 mg</i>	1	
<i>emtricitabine-tenofovir (tdf) oral tablet 200-300 mg</i>	0	ACA
EMTRIVA ORAL CAPSULE	3	
EMTRIVA ORAL SOLUTION	2	
<i>entecavir</i>	1	
EPCLUSA	2	ST; SP; QL
EPIVIR	3	
<i>etravirine</i>	1	
EVOTAZ	3	
<i>famciclovir</i>	1	QL
FLUMADINE	3	
<i>fosamprenavir</i>	1	
<i>foscarnet</i>	1	
FOSCAVIR	3	
FUZEON	2	QL
GANCICLOVIR	3	
<i>ganciclovir sodium</i>	1	
GENVOYA	2	
HARVONI	2	ST; SP; QL
INTELENCE ORAL TABLET 100 MG, 200 MG	3	
INTELENCE ORAL TABLET 25 MG	2	
ISENTRESS	2	

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
ISENTRESS HD	2	
JULUCA	2	
KALETRA	3	
LAGEVRIO (EUA)	2	QL
<i>lamivudine</i>	1	
<i>lamivudine-zidovudine</i>	1	
LEDIPASVIR-SOFOSBUVIR	E	SP
LIVTENCITY	3	PA; ST; QL
<i>lopinavir-ritonavir</i>	1	
<i>maraviroc</i>	1	
MAVYRET	E	SP
<i>nevirapine</i>	1	
NORVIR ORAL POWDER IN PACKET	2	
NORVIR ORAL TABLET	3	
ODEFSEY	2	
<i>oseltamivir</i>	1	QL
PAXLOVID	2	QL
PIFELTRO	E	
PREVYMIS INTRAVENOUS	2	
PREVYMIS ORAL	2	QL
PREZCOBIX	E	
PREZISTA ORAL SUSPENSION	2	
PREZISTA ORAL TABLET 150 MG, 75 MG	2	

Drug Name	Drug Tier	Requirements / Limits
PREZISTA ORAL TABLET 600 MG, 800 MG	3	
RAPIVAB (PF)	2	
RELENZA DISKHALER	3	QL
RETROVIR INTRAVENOUS	2	
RETROVIR ORAL	3	
REYATAZ ORAL CAPSULE	3	
REYATAZ ORAL POWDER IN PACKET	2	
<i>ribavirin</i>	1	ST
<i>rimantadine</i>	1	
<i>ritonavir</i>	1	
RUKOBIA	E	
SELZENTRY ORAL SOLUTION	2	
SELZENTRY ORAL TABLET	3	
SOFOSBUVIR-VELPATASVIR	E	SP
SOVALDI	E	SP
<i>stavudine</i>	1	
STRIBILD	E	
SUNLENCA	3	SP
SYMFI	2	
SYMFI LO	2	
SYMTUZA	2	
SYNAGIS	2	PA; ST; SP
TAMIFLU	3	QL

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Drug Name	Drug Tier	Requirements / Limits
TEMBEXA	3	
<i>tenofovir disoproxil fumarate</i>	1	
TIVICAY	2	
TIVICAY PD	2	
TRIUMEQ	2	
TRIUMEQ PD	2	
TROGARZO	2	ST; SP
TRUVADA	E	
TYBOST	3	
<i>valacyclovir</i>	1	QL
VALCYTE	3	
<i>valganciclovir</i>	1	
VALTREX	E	
VEKLURY	2	ST
VEMLIDY	2	
VIRACEPT	2	
VIRAZOLE	3	ST
VIREAD ORAL POWDER	E	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	2	
VIREAD ORAL TABLET 300 MG	3	
VOSEVI	2	ST; SP; QL
XOFLUZA	3	QL
ZEPATIER	2	ST; SP; QL
ZIAGEN	3	
<i>zidovudine</i>	1	
CEPHALOSPORINS		

Drug Name	Drug Tier	Requirements / Limits
AVYCAZ	2	
<i>cefaclor</i>	1	
<i>cefadroxil</i>	1	
<i>cefazolin in 0.9% sod chloride</i>	1	
<i>cefazolin in dextrose (iso-os) intravenous piggyback 1 gram/50 ml, 2 gram/50 ml</i>	1	
CEFAZOLIN IN DEXTROSE (ISO-OS) INTRAVENOUS PIGGYBACK 2 GRAM/100 ML	3	
<i>cefazolin in dextrose 5 %</i>	1	
CEFAZOLIN IN STERILE WATER	3	
<i>cefazolin injection recon soln 1 gram, 10 gram, 100 gram, 20 gram, 3 gram, 300 gram, 500 mg</i>	1	
CEFAZOLIN INJECTION RECON SOLN 2 GRAM	3	
<i>cefazolin intravenous recon soln 1 gram</i>	1	
CEFAZOLIN INTRAVENOUS RECON SOLN 2 GRAM, 3 GRAM	3	
<i>cefdinir</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
CEFEPIME IN DEXTROSE 5 %	3	
<i>cefepime in dextrose, iso-osm</i>	1	
<i>cefepime injection</i>	1	
CEFEPIME INTRAVENOUS	3	
<i>cefixime</i>	1	
CEFOTAN	3	
<i>cefotaxime</i>	1	
<i>cefotetan</i>	1	
<i>cefoxitin</i>	1	
<i>cefoxitin in dextrose, iso-osm</i>	1	
<i>cefpodoxime</i>	1	
<i>cefprozil</i>	1	
<i>ceftazidime</i>	1	
<i>ceftriaxone in dextrose, iso-os</i>	1	
<i>ceftriaxone injection recon soln 1 gram, 10 gram, 2 gram, 250 mg, 500 mg</i>	1	
CEFTRIAZONE INJECTION RECON SOLN 100 GRAM	3	
<i>ceftriaxone intravenous</i>	1	
<i>cefuroxime axetil</i>	1	
<i>cefuroxime sodium</i>	1	
<i>cephalexin</i>	1	
CLAFORAN	3	

Drug Name	Drug Tier	Requirements / Limits
FETROJA	3	
<i>tazicef</i>	1	
TEFLARO	2	
ZERBAXA	2	
ERYTHROMYCINS & OTHER MACROLIDES		
<i>azithromycin</i>	1	
<i>clarithromycin</i>	1	
DIFICID	3	QL
<i>e.e.s. 400</i>	1	
E.E.S. GRANULES	3	
ERYPED 200	3	
ERYPED 400	3	
<i>ery-tab oral tablet, delayed release (dr/ec) 250 mg, 333 mg</i>	1	
ERY-TAB ORAL TABLET, DELAYED RELEASE (DR/EC) 500 MG	3	
<i>erythrocin (as stearate)</i>	1	
ERYTHROCIN 500 MG ADDVAN VIAL P/F, SUV, OUTER	2	
ERYTHROCIN INTRAVENOUS RECON SOLN 500 MG	3	
<i>erythromycin</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>erythromycin ethylsuccinate</i>	1	
<i>erythromycin lactobionate</i>	1	
ZITHROMAX	3	
ZITHROMAX TRI-PAK	3	
ZITHROMAX Z-PAK	3	
MISCELLANEOUS ANTI-INFECTIVES		
AEMCOLO	3	QL
<i>albendazole</i>	1	QL
ALINIA ORAL SUSPENSION FOR RECONSTITUTION	2	QL
ALINIA ORAL TABLET	E	
<i>amikacin</i>	1	
ARAKODA	3	QL
ARIKAYCE	2	ST; SP
ARTESUNATE	3	
<i>atovaquone</i>	1	
<i>atovaquone-proguanil</i>	1	QL
AZACTAM	3	
<i>aztreonam</i>	1	
<i>bacitracin</i>	1	
BENZNIDAZOLE	2	QL
BETHKIS	3	ST; SP; QL
BILTRICIDE	3	
CAYSTON	2	ST; SP; QL

Drug Name	Drug Tier	Requirements / Limits
<i>chloramphenicol sodium succinate</i>	1	
<i>chloroquine phosphate</i>	1	
CLEOCIN	3	
CLEOCIN HCL	3	
CLEOCIN PEDIATRIC	3	
<i>clindamycin hcl</i>	1	
CLINDAMYCIN IN 0.9 % SOD CHLOR	3	
<i>clindamycin in 5 % dextrose</i>	1	
<i>clindamycin pediatric</i>	1	
<i>clindamycin phosphate</i>	1	
COARTEM	2	QL
<i>colistin (colistimethate sodium)</i>	1	
COLY-MYCIN M PARENTERAL	3	
CUBICIN RF	3	
CYCLOSERINE	3	
DALVANCE	2	
<i>dapsone</i>	1	
DAPTOMYCIN IN 0.9 % SOD CHLOR	3	
DAPTOMYCIN INTRAVENOUS RECON SOLN 350 MG	3	

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Drug Name	Drug Tier	Requirements / Limits
<i>daptomycin intravenous recon soln 500 mg</i>	1	
DARAPRIM	3	ST; SP
EMVERM	2	QL
<i>ertapenem</i>	1	
<i>ethambutol</i>	1	
FLAGYL	3	
<i>gentamicin</i>	1	
<i>gentamicin in nacl (iso-osm) intravenous piggyback 100 mg/100 ml, 60 mg/50 ml, 80 mg/100 ml, 80 mg/50 ml</i>	1	
GENTAMICIN IN NAACL (ISO-OSM) INTRAVENOUS PIGGYBACK 100 MG/50 ML	2	
GENTAMICIN IN NAACL (ISO-OSM) INTRAVENOUS PIGGYBACK 120 MG/100 ML	3	
<i>gentamicin sulfate (ped) (pf)</i>	1	
HUMATIN	3	SP
<i>hydroxychloroquine</i>	1	M
<i>imipenem-cilastatin</i>	1	
IMPAVIDO	2	ST; QL
<i>isoniazid</i>	1	
<i>ivermectin</i>	1	ST; QL
KIMYRSA	3	

Drug Name	Drug Tier	Requirements / Limits
KITABIS PAK	2	ST; SP; QL
KRINTAFEL	3	QL
LAMPIT	E	
LIKMEZ	E	
LINCOCIN	3	
<i>lincomycin</i>	1	
<i>linezolid</i>	1	
<i>linezolid in dextrose 5%</i>	1	
<i>linezolid-0.9% sodium chloride</i>	1	
MALARONE	3	QL
MALARONE PEDIATRIC	3	QL
<i>mefloquine</i>	1	QL
MEPRON	3	
<i>meropenem intravenous recon soln 1 gram, 500 mg</i>	1	
MEROPENEM INTRAVENOUS RECON SOLN 2 GRAM	3	
MEROPENEM-0.9% SODIUM CHLORIDE	2	
<i>metro i.v.</i>	1	
<i>metronidazole</i>	1	
<i>metronidazole in nacl (iso-os)</i>	1	
MYAMBUTOL	3	
MYCOBUTIN	3	
NEBUPENT	3	QL

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Drug Name	Drug Tier	Requirements / Limits
<i>neomycin</i>	1	
<i>nitazoxanide</i>	1	QL
ORBACTIV	2	
<i>paromomycin</i>	1	
PASER	3	
PENTAM	3	
<i>pentamidine inhalation</i>	1	QL
<i>pentamidine injection</i>	1	
PLAQUENIL	E	M
<i>polymyxin b sulfate</i>	1	
<i>praziquantel</i>	1	
PRETOMANID	3	ST
PRIFTIN	2	
<i>primaquine</i>	1	QL
PRIMAXIN IV	3	
<i>pyrazinamide</i>	1	
<i>pyrimethamine</i>	1	ST; SP
QUALAQUIN	3	QL
<i>quinine sulfate</i>	1	QL
RECARBRIO	3	
<i>rifabutin</i>	1	
RIFADIN	3	
<i>rifampin</i>	1	
SIRTURO	2	ST
SIVEXTRO	E	
SOLOSEC	2	QL
SOVUNA	E	M
STREPTOMYCIN	2	
STROMECTOL	3	ST; QL

Drug Name	Drug Tier	Requirements / Limits
<i>tigecycline</i>	1	
<i>tinidazole</i>	1	QL
TOBI	E	SP
TOBI PODHALER	2	ST; SP; QL
<i>tobramycin</i>	1	ST; SP; QL
<i>tobramycin in 0.225 % nacl</i>	1	ST; SP; QL
<i>tobramycin sulfate</i>	1	
TOBRAMYCIN WITH NEBULIZER	3	ST; SP; QL
TRECTOR	3	
TYGACIL	3	
VABOMERE	3	
XACDURO	3	
XENLETA	3	
XIFAXAN	2	ST; QL
ZEMDRI	3	
ZYVOX	3	
PENICILLINS		
<i>amoxicillin</i>	1	
<i>amoxicillin-pot clavulanate</i>	1	
<i>ampicillin</i>	1	
<i>ampicillin sodium</i>	1	
<i>ampicillin-sulbactam</i>	1	
AUGMENTIN	2	
AUGMENTIN ES-600	3	
AUGMENTIN XR	3	
BICILLIN C-R	2	
BICILLIN L-A	2	

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Drug Name	Drug Tier	Requirements / Limits
<i>dicloxacillin</i>	1	
MOXATAG	3	
<i>nafcillin</i>	1	
<i>nafcillin in dextrose iso-osm</i>	1	
<i>oxacillin</i>	1	
<i>oxacillin in dextrose(iso-osm)</i>	1	
PENICILLIN G POT IN DEXTROSE	2	
<i>penicillin g potassium</i>	1	
<i>penicillin g sodium</i>	1	
<i>penicillin v potassium</i>	1	
<i>pfizerpen-g</i>	1	
<i>piperacillin-tazobactam</i>	1	
UNASYN	3	
ZOSYN IN DEXTROSE (ISO-OSM)	2	
QUINOLONES		
AVELOX IN NACL (ISO-OSMOTIC)	3	
BAXDELA INTRAVENOUS	2	
BAXDELA ORAL	2	QL
CIPRO	3	
<i>ciprofloxacin</i>	1	
<i>ciprofloxacin hcl</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>ciprofloxacin in 5 % dextrose</i>	1	
FACTIVE	3	
<i>levofloxacin</i>	1	
<i>levofloxacin in d5w</i>	1	
<i>moxifloxacin</i>	1	
MOXIFLOXACIN-SOD. ACE, SUL-WATER	2	
<i>moxifloxacin-sod.chloride(iso)</i>	1	
<i>ofloxacin</i>	1	
SULFAS & RELATED AGENTS		
BACTRIM	3	
BACTRIM DS	3	
<i>sulfadiazine</i>	1	
<i>sulfamethoxazole-trimethoprim</i>	1	
<i>sulfatrim</i>	1	
TETRACYCLINES		
ACTICLATE	3	ST
<i>avidoxy</i>	1	
AVIDOXY DK	3	ST
BENZODOX 30	E	
BENZODOX 60	E	
<i>demeclocycline</i>	1	
DORYX	E	
DORYX MPC	E	
<i>doxy-100</i>	1	
<i>doxycycline hyclate intravenous</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>doxycycline hyclate oral capsule</i>	1	
<i>doxycycline hyclate oral tablet 100 mg, 20 mg</i>	1	
<i>doxycycline hyclate oral tablet 150 mg, 50 mg, 75 mg</i>	1	ST
<i>doxycycline hyclate oral tablet, delayed release (dr/ec) 100 mg, 150 mg, 200 mg, 50 mg, 75 mg</i>	1	ST
DOXYCYCLINE HYCLATE ORAL TABLET, DELAYED RELEASE (DR/EC) 80 MG	E	
<i>doxycycline monohydrate oral capsule 100 mg, 50 mg, 75 mg</i>	1	
<i>doxycycline monohydrate oral capsule 150 mg</i>	1	ST
<i>doxycycline monohydrate oral capsule, ir - delay rel, biphasic</i>	E	
<i>doxycycline monohydrate oral suspension for reconstitution</i>	1	
<i>doxycycline monohydrate oral tablet</i>	1	
MINOCIN	2	

Drug Name	Drug Tier	Requirements / Limits
<i>minocycline oral capsule</i>	1	
MINOCYCLINE ORAL CAPSULE, EXTENDED RELEASE 24HR	E	
<i>minocycline oral tablet</i>	1	
<i>minocycline oral tablet extended release 24 hr</i>	1	ST
<i>monodoxine nl</i>	1	
MONODOX	3	ST
<i>morgidox</i>	1	
MORGIDOX 1X 50	3	ST
MORGIDOX 1X100	3	ST
NUZYRA INTRAVENOUS	3	
NUZYRA ORAL	3	QL
ORACEA	E	
SEYSARA	3	ST
SOLODYN	3	ST
TARGADOX	3	ST
<i>tetracycline oral capsule</i>	1	
<i>tetracycline oral tablet</i>	1	ST
VIBRAMYCIN	3	ST
XERAVA	3	
XIMINO	E	

URINARY TRACT AGENTS

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Drug Name	Drug Tier	Requirements / Limits
<i>fosfomycin tromethamine</i>	1	
FURADANTIN	3	
HIPREX	3	
MACROBID	3	
MACRODANTIN	3	
<i>methenamine hippurate</i>	1	
<i>methenamine mandelate</i>	1	
<i>nitrofurantoin macrocrystal</i>	1	
<i>nitrofurantoin monohyd/m-cryst</i>	1	
<i>nitrofurantoin oral suspension 25 mg/5 ml</i>	1	
NITROFURANTOIN ORAL SUSPENSION 50 MG/5 ML	E	
PRIMSOL	3	
<i>trimethoprim</i>	1	
VANCOMYCIN		
FIRVANQ	E	
VANCOCIN	3	QL
VANCOMYCIN IN 0.9 % SODIUM CHL INTRAVENOUS PIGGYBACK	2	

Drug Name	Drug Tier	Requirements / Limits
VANCOMYCIN IN 0.9 % SODIUM CHL INTRAVENOUS SOLUTION 1 GRAM/250 ML, 1.25 GRAM/250 ML, 1.5 GRAM/250 ML, 1.75 GRAM/250 ML, 1.75 GRAM/500 ML, 2 GRAM/500 ML, 750 MG/150 ML	2	
<i>vancomycin in 0.9 % sodium chl intravenous solution 1.5 gram/500 ml</i>	1	
VANCOMYCIN IN DEXTROSE 5 %	2	
VANCOMYCIN INJECTION	3	
<i>vancomycin intravenous</i>	1	
<i>vancomycin oral</i>	1	QL
VANCOMYCIN-DILUENT COMBO NO.1	3	
VIBATIV	2	
ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS		
ADJUNCTIVE AGENTS		
<i>dexrazoxane hcl</i>	1	
ELITEK	2	
ETHYOL	3	

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Drug Name	Drug Tier	Requirements / Limits
KEPIVANCE	2	SP
KHAPZORY	3	ST
<i>leucovorin calcium</i>	1	
<i>levoleucovorin calcium</i>	1	ST
<i>mesna</i>	1	
MESNEX INTRAVENOUS	3	
MESNEX ORAL	2	
TOTECT	3	
VISTOGARD	2	ST; SP; QL
VORAXAZE	2	
XGEVA	2	ST; SP; QL
ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS		
ABECMA	3	ST; SP
<i>abiraterone</i>	1	ST; SP; QL
ABRAXANE	3	SP
ADAKVEO	2	ST; SP
ADCETRIS	2	ST; SP
ADRIAMYCIN	3	
<i>adrucil</i>	1	
AFINITOR	E	SP
AFINITOR DISPERZ	E	SP
AKEEGA	E	SP
ALECENSA	2	ST; SP; QL
ALIMTA	3	
ALIQOPA	2	ST; SP
ALKERAN	3	

Drug Name	Drug Tier	Requirements / Limits
ALKERAN (AS HCL)	3	
ALUNBRIG	2	ST; SP; QL
ALYMSYS	E	SP
AMTAGVI	2	ST; SP
<i>anastrozole</i>	0	M
ARIMIDEX	E	M
AROMASIN	3	M
ARRANON	3	SP
<i>arsenic trioxide</i>	1	ST
ASPARLAS	3	ST; SP
ASTAGRAF XL	3	ST
AUGTYRO	E	SP
AVASTIN	E	SP
AYVAKIT	3	ST; SP; QL
<i>azacitidine</i>	1	SP
AZASAN	3	
<i>azathioprine</i>	1	
<i>azathioprine sodium</i>	1	
BALVERSA	2	ST; SP
BAVENCIO	2	ST; SP
BELEODAQ	3	ST; SP
BELRAPZO	3	ST; SP
<i>bendamustine intravenous recon soln</i>	1	ST; SP
BENDAMUSTINE INTRAVENOUS SOLUTION	3	ST
BENDEKA	2	ST; SP
BESPONSA	2	ST; SP
BEVACIZUMAB	3	

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Drug Name	Drug Tier	Requirements / Limits
<i>bexarotene</i>	1	ST; SP
<i>bicalutamide</i>	1	M
BICNU	3	ST
<i>bleomycin</i>	1	
BLINCYTO	2	ST; SP
BORTEZOMIB INJECTION RECON SOLN 1 MG, 2.5 MG	2	ST; SP
<i>bortezomib injection recon soln 3.5 mg</i>	1	ST; SP
BORTEZOMIB INTRAVENOUS	2	ST; SP
BOSULIF	2	ST; SP; QL
BRAFTOVI	E	SP
BREYANZI	3	ST; SP
BRUKINSA	3	ST; SP
<i>busulfan</i>	1	
BUSULFEX	3	
CABOMETYX	2	ST; SP; QL
CALQUENCE (ACALABRUTINIB MAL)	2	ST; SP; QL
CAMCEVI (6 MONTH)	E	SP
CAMPTOSAR	3	
<i>capecitabine</i>	1	ST; SP; QL
CAPRELSA	2	ST; SP; QL
<i>carboplatin</i>	1	
<i>carmustine intravenous recon soln 100 mg</i>	1	ST

Drug Name	Drug Tier	Requirements / Limits
CARMUSTINE INTRAVENOUS RECON SOLN 300 MG	3	ST
CARVYKTI	2	ST; SP
CASODEX	3	M
CELLCEPT	3	
CELLCEPT INTRAVENOUS	3	
CISPLATIN INTRAVENOUS RECON SOLN	3	
<i>cisplatin intravenous solution</i>	1	
<i>cladribine</i>	1	
<i>clofarabine</i>	1	
CLOLAR	3	
COLUMVI	E	SP
COMETRIQ	2	ST; SP; QL
COPIKTRA	3	ST; SP; QL
COSELA	3	PA; ST; SP
COSMEGEN	3	
COTELLIC	2	ST; SP; QL
<i>cyclophosphamide intravenous recon soln</i>	1	
CYCLOPHOSPHAMIDE INTRAVENOUS SOLUTION	3	
<i>cyclophosphamide oral capsule</i>	1	

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
CYCLOPHOSPHAMIDE ORAL TABLET	3	
<i>cyclosporine</i>	1	
<i>cyclosporine modified</i>	1	
CYRAMZA	2	ST; SP
<i>cytarabine</i>	1	
<i>cytarabine (pf)</i>	1	
<i>dacarbazine</i>	1	
<i>dactinomycin</i>	1	
DANYELZA	3	ST; SP
DARZALEX	2	ST; SP
DARZALEX FASPRO	3	ST; SP
<i>daunorubicin</i>	1	
DAURISMO	3	ST; SP; QL
<i>decitabine</i>	1	ST; SP
<i>docetaxel</i>	1	
DOXIL	3	
<i>doxorubicin</i>	1	
<i>doxorubicin, peg-liposomal</i>	1	
DROXIA	2	
ELAHERE	3	ST; SP
ELIGARD	2	PA; SP
ELIGARD (3 MONTH)	2	PA; SP
ELIGARD (4 MONTH)	2	PA; SP
ELIGARD (6 MONTH)	2	PA; SP

Drug Name	Drug Tier	Requirements / Limits
ELLEENCE	3	
ELREXFIO	E	SP
ELZONRIS	2	ST; SP
EMCYT	2	
EMPLICITI	3	ST; SP
ENHERTU	3	ST; SP
ENSPRYNG	2	ST; SP
ENVARBUS XR	E	
<i>epirubicin</i>	1	
EPKINLY	E	SP
ERBITUX	2	PA; ST; SP
ERIVEDGE	2	ST; SP; QL
ERLEADA	2	ST; SP; QL
<i>erlotinib</i>	1	ST; SP; QL
ERWINASE	3	ST; SP
ETOPOPHOS	2	
<i>etoposide</i>	1	
EULEXIN	3	M
<i>everolimus (antineoplastic)</i>	1	ST; SP; QL
<i>everolimus (immunosuppressive)</i>	1	
EVOMELA	3	SP
<i>exemestane</i>	0	M
EXKIVITY	2	ST; SP; QL
FARESTON	3	M
FASLODEX	3	ST; M
FEMARA	3	M
FENSOLVI	3	PA; ST; SP

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Drug Name	Drug Tier	Requirements / Limits
FIRMAGON KIT W DILUENT SYRINGE	2	ST; SP
<i>floxuridine</i>	1	
<i>fludarabine</i>	1	
<i>fluorouracil</i>	1	
FOLOTYN	2	ST; SP
FOTIVDA	E	SP
FRUZAQLA	E	SP
<i>fulvestrant</i>	1	ST
FYARRO	3	ST; SP
GAMIFANT	2	ST; SP
GAVRETO	2	ST; SP; QL
GAZYVA	2	ST; SP
<i>gefitinib</i>	1	ST; SP; QL
<i>gemcitabine intravenous recon soln</i>	1	
<i>gemcitabine intravenous solution 1 gram/26.3 ml (38 mg/ml), 2 gram/52.6 ml (38 mg/ml), 200 mg/5.26 ml (38 mg/ml)</i>	1	
GEMCITABINE INTRAVENOUS SOLUTION 100 MG/ML	3	
<i>gengraf</i>	1	
GILOTRIF	2	ST; SP; QL
GLEEVEC	E	SP
GLEOSTINE	2	
GLIADEL WAFER	3	

Drug Name	Drug Tier	Requirements / Limits
HALAVEN	2	ST; SP
HERCEPTIN	E	SP
HERCEPTIN HYLECTA	E	SP
HERZUMA	E	SP
HYCAMTIN	2	ST; SP
HYDREA	3	
<i>hydroxyurea</i>	1	
IBRANCE	E	SP
ICLUSIG	2	ST; SP; QL
IDAMYCIN PFS	3	
<i>idarubicin</i>	1	
IDHIFA	2	ST; SP; QL
IFEX	3	
<i>ifosfamide</i>	1	
<i>imatinib</i>	1	ST; SP; QL
IMBRUVICA	2	ST; SP; QL
IMFINZI	2	ST; SP
IMJUDO	3	ST; SP
IMLYGIC	3	ST; SP
IMURAN	3	
INFUGEM	3	
INLYTA	2	ST; SP; QL
INQOVI	E	SP
INREBIC	E	SP
IODOPEN	2	
IRESSA	2	ST; SP; QL
<i>irinotecan</i>	1	
ISTODAX	2	ST; SP
IWILFIN	2	ST; SP

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Drug Name	Drug Tier	Requirements / Limits
IXEMPRA	2	ST; SP
JAKAFI	2	ST; SP; QL
JAYPIRCA	E	SP
JELMYTO	3	ST; SP
JEMPERLI	3	ST; SP
JEVTANA	2	ST; SP
JYLAMVO	E	
KADCYLA	2	ST; SP
KANJINTI	2	ST; SP
<i>kemoplat</i>	1	
KEYTRUDA	2	ST; SP
KIMMTRAK	2	ST; SP
KISQALI	2	ST; SP; QL
KISQALI FEMARA CO-PACK	2	ST; SP; QL
KLISYRI	E	
KOSELUGO	3	ST; SP
KRAZATI	E	SP
KYMRIAH	2	ST; SP
KYPROLIS	2	ST; SP
LANREOTIDE	E	SP
<i>lapatinib</i>	1	ST; SP; QL
<i>lenalidomide</i>	1	ST; SP; QL
LENVIMA	2	ST; SP; QL
<i>letrozole</i>	1	M
LEUKERAN	2	
<i>leuprolide</i>	1	ST; SP
LEUPROLIDE (3 MONTH)	E	SP
LIBTAYO	2	ST; SP
LONSURF	2	ST; SP

Drug Name	Drug Tier	Requirements / Limits
LOQTORZI	2	ST; SP
LORBRENA	2	ST; SP; QL
LUMAKRAS	3	ST; SP
LUNSUMIO	2	ST; SP
LUPKYNIS	2	ST; SP; QL
LUPRON DEPOT (3 MONTH) INTRAMUSCULAR SYRINGE KIT 11.25 MG	2	PA; ST; SP
LUPRON DEPOT (3 MONTH) INTRAMUSCULAR SYRINGE KIT 22.5 MG	3	PA; ST; SP
LUPRON DEPOT (4 MONTH)	3	PA; ST; SP
LUPRON DEPOT (6 MONTH)	3	PA; ST; SP
LUPRON DEPOT INTRAMUSCULAR SYRINGE KIT 3.75 MG	2	PA; ST; SP
LUPRON DEPOT INTRAMUSCULAR SYRINGE KIT 7.5 MG	3	PA; ST; SP
LUPRON DEPOT-PED	E	SP
LUPRON DEPOT-PED (3 MONTH)	E	SP
LYNPARZA	2	ST; SP; QL
LYSODREN	2	SP
LYTGOBI	2	ST; SP
MARGENZA	3	ST; SP

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Drug Name	Drug Tier	Requirements / Limits
MATULANE	2	SP
<i>megestrol</i>	1	
MEKINIST	2	ST; SP; QL
MEKTOVI	E	SP
<i>melphalan hcl</i>	1	
<i>mercaptopurine</i>	1	
<i>methotrexate sodium</i>	1	
<i>methotrexate sodium (pf)</i>	1	
<i>mitomycin</i>	1	
<i>mitoxantrone</i>	1	SP
MONJUVI	3	ST; SP
MVASI	3	ST; SP
MYCAPSSA	3	ST; SP; QL
<i>mycophenolate mofetil</i>	1	
<i>mycophenolate mofetil (hcl)</i>	1	
<i>mycophenolate sodium</i>	1	
MYFORTIC	3	
MYLERAN	2	
MYLOTARG	2	ST; SP
<i>nelarabine</i>	1	SP
NEORAL	3	
NERLYNX	2	ST; SP
NEXAVAR	3	ST; SP; QL
NILANDRON	3	ST; M
<i>nilutamide</i>	1	ST; M
NINLARO	2	ST; SP; QL
NIPENT	3	

Drug Name	Drug Tier	Requirements / Limits
NUBEQA	2	ST; SP; QL
NULOJIX	2	
<i>octreotide acetate</i>	1	ST; SP
ODOMZO	2	ST; SP; QL
OGIVRI	E	SP
OGSIVEO	3	ST; SP
OJJAARA	E	SP
ONCASPAR	2	ST
ONIVYDE	2	ST; SP
ONTRUZANT	E	SP
ONUREG	E	SP
OPDIVO	2	ST; SP
OPDUALAG	2	ST; SP
ORGOVYX	3	ST; QL
ORSERDU	2	ST; SP; M; QL
<i>oxaliplatin</i>	1	
<i>paclitaxel</i>	1	
PACLITAXEL PROTEIN-BOUND	2	SP
PADCEV	3	ST; SP
<i>paraplatin</i>	1	
<i>pazopanib</i>	1	ST; SP; QL
PEMAZYRE	2	ST; SP; QL
PEMETREXED	3	
<i>pemetrexed disodium intravenous recon soln</i>	1	
PEMETREXED DISODIUM INTRAVENOUS SOLUTION	3	
PEMFEXY	3	

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
PEMRYDI RTU	3	
PERJETA	2	ST; SP
PHEGO	2	ST; SP
PHOTOFRIN	2	
PIQRAY	2	ST; SP
POLIVY	3	ST; SP
POMALYST	2	ST; SP
PORTRAZZA	3	ST; SP
POTELIGEO	2	ST; SP
PRALATREXATE	2	ST; SP
PROGRAF INTRAVENOUS	2	
PROGRAF ORAL CAPSULE	3	
PROGRAF ORAL GRANULES IN PACKET	2	
PURIXAN	2	SP
QINLOCK	E	SP
RAPAMUNE	3	
RETEVMO	3	ST; SP; QL
REVLIMID	2	ST; SP; QL
REZLIDHIA	E	SP
REZUROCK	3	PA; ST; QL
RIABNI	E	SP
RITUXAN	E	SP
RITUXAN HYCELA	E	SP
<i>romidepsin intravenous recon soln</i>	1	ST; SP

Drug Name	Drug Tier	Requirements / Limits
ROMIDEPSIN INTRAVENOUS SOLUTION	3	ST; SP
ROZLYTREK	2	ST; SP; QL
RUBRACA	2	ST; SP; QL
RUXIENCE	2	ST; SP
RYBREVANT	3	ST; SP
RYDAPT	2	ST; SP; QL
RYLAZE	3	ST; SP
SANDIMMUNE INTRAVENOUS	3	
SANDIMMUNE ORAL CAPSULE	3	
SANDIMMUNE ORAL SOLUTION	2	
SANDOSTATIN	3	ST; SP
SANDOSTATIN LAR DEPOT	E	SP
SAPHNELO	3	ST; SP
SARCLISA	3	ST; SP
SCSEMBLIX	2	ST; SP; QL
SIGNIFOR	2	PA; ST; SP
SIGNIFOR LAR	E	SP
SIKLOS	E	
SIMULECT	2	
<i>sirolimus</i>	1	
SOLTAMOX	0	M
SOMATULINE DEPOT	2	ST; SP; QL
<i>sorafenib</i>	1	ST; SP; QL
SPRYCEL	2	ST; SP; QL
STIVARGA	2	ST; SP; QL

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Drug Name	Drug Tier	Requirements / Limits
<i>sunitinib malate</i>	1	ST; SP; QL
SUPPRELIN LA	E	SP
SUTENT	3	ST; SP; QL
SYLVANT	2	ST; SP
TABLOID	3	
TABRECTA	2	ST; SP
<i>tacrolimus</i>	1	
TAFINLAR	2	ST; SP; QL
TAGRISSE	2	ST; SP; QL
TALVEY	E	SP
TALZENNA ORAL CAPSULE 0.1 MG, 0.35 MG	2	ST; SP
TALZENNA ORAL CAPSULE 0.25 MG, 0.5 MG, 0.75 MG, 1 MG	2	ST; SP; QL
<i>tamoxifen</i>	0	M
TARCEVA	3	ST; SP; QL
TARGRETIN ORAL	E	SP
TARGRETIN TOPICAL	3	ST; SP
TASIGNA	2	ST; SP; QL
TAZVERIK	3	ST; SP
TECARTUS	3	ST; SP
TECENTRIQ	2	ST; SP
TECVAYLI	3	ST; SP
TEMODAR	2	SP
<i>temozolomide</i>	1	PA; ST; SP
<i>temsirolimus</i>	1	ST; SP
TENIPOSIDE	2	

Drug Name	Drug Tier	Requirements / Limits
TEPADINA	3	ST
TEPMETKO	E	SP
THALOMID	2	ST; SP; QL
<i>thiotepa</i>	1	ST
TIBSOVO	2	ST; SP
TIVDAK	3	ST; SP
<i>topotecan</i>	1	ST; SP
<i>toremifene</i>	1	M
TORISEL	3	ST; SP
TRAZIMERA	2	ST; SP
TREANDA	2	ST; SP
TRELSTAR	E	
<i>tretinoin (antineoplastic)</i>	1	
TREXALL	3	
TRIPTODUR	2	PA; ST; SP
TRISENOX	3	ST
TRODELVY	3	ST; SP
TRUQAP	E	SP
TRUXIMA	E	SP
TUKYSA	3	ST; SP; QL
TURALIO	3	ST; SP; QL
TYKERB	3	ST; SP; QL
UNITUXIN	2	ST; SP
UPLIZNA	E	SP
VANFLYTA	E	SP
VECTIBIX	2	PA; ST; SP
VEGZELMA	E	SP
VELCADE	3	ST; SP
VENCLEXTA	2	ST; QL

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Drug Name	Drug Tier	Requirements / Limits
VENCLEXTA STARTING PACK	2	ST; QL
VERZENIO	2	ST; SP; QL
VIDAZA	3	SP
VIJOICE	2	ST; SP; QL
<i>vinblastine</i>	1	
<i>vincasar pfs</i>	1	
<i>vincristine</i>	1	
<i>vinorelbine</i>	1	
VITRAKVI	2	ST; SP; QL
VIVIMUSTA	E	SP
VIZIMPRO	2	ST; SP; QL
VONJO	2	ST; SP; QL
VOTRIENT	2	ST; SP; QL
VYXEOS	2	ST; SP
WELIREG	3	ST; SP
XALKORI ORAL CAPSULE	2	ST; SP; QL
XALKORI ORAL PELLET	2	ST; SP
XATMEP	E	
XELODA	3	ST; SP; QL
XERMELO	2	PA; ST; SP; QL
XOSPATA	2	ST; SP; QL
XPOVIO	E	SP
XTANDI	2	ST; SP; QL
YERVOY	2	ST; SP
YESCARTA	2	ST; SP
YONDELIS	2	SP
YONSA	E	SP

Drug Name	Drug Tier	Requirements / Limits
ZALTRAP	2	ST; SP
ZANOSAR	2	
ZEJULA ORAL TABLET 100 MG	2	ST; SP; QL
ZEJULA ORAL TABLET 200 MG, 300 MG	2	ST; SP
ZELBORAF	2	ST; SP; QL
ZEPZELCA	3	ST; SP
ZEVALIN (Y-90)	2	
ZIRABEV	2	ST; SP
ZOLADEX	2	ST; SP
ZOLINZA	2	ST; SP; QL
ZORTRESS	3	
ZYDELIG	2	ST; SP; QL
ZYKADIA	2	ST; SP; QL
ZYNLONTA	3	ST; SP
ZYNYZ	2	ST; SP
ZYTIGA	E	SP

AUTONOMIC & CNS DRUGS, NEUROLOGY & PSYCH

ANTICONVULSANTS

ACTIVE-PAC	E	
APTIOM	3	M
BANZEL ORAL SUSPENSION	E	M
BANZEL ORAL TABLET 200 MG	E	
BANZEL ORAL TABLET 400 MG	E	M
BRIVIACT INTRAVENOUS	3	

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
BRIVIACT ORAL	3	ST; M
<i>carbamazepine</i>	1	
CARBATROL	3	
CELONTIN	2	M
CEREBYX	3	
<i>clobazam</i>	1	ST
<i>clonazepam</i>	1	M
DEPAKOTE	3	ST; M
DEPAKOTE ER	3	ST; M
DEPAKOTE SPRINKLES	3	ST; M
DIACOMIT	2	ST; SP
<i>diazepam</i>	1	
DILANTIN	2	M
DILANTIN EXTENDED	3	M
DILANTIN INFATABS	3	M
DILANTIN-125	3	M
<i>divalproex</i>	1	M
ELEPSIA XR	3	ST; M
EPIDIOLEX	2	ST; SP
<i>epitol</i>	1	
EPRONTIA	E	
EQUETRO	3	
<i>ethosuximide</i>	1	M
<i>felbamate</i>	1	M
FELBATOL	3	M
FINTEPLA	E	SP
<i>fosphenytoin</i>	1	
FYCOMPA	2	

Drug Name	Drug Tier	Requirements / Limits
<i>gabapentin oral capsule</i>	1	M
<i>gabapentin oral solution 250 mg/5 ml</i>	1	
<i>gabapentin oral solution 300 mg/6 ml (6 ml)</i>	1	M
<i>gabapentin oral tablet</i>	1	M
<i>gabapentin oral tablet extended release 24 hr</i>	1	ST
GRALISE	3	ST; M
KEPPRA INTRAVENOUS	E	
KEPPRA ORAL	E	M
KEPPRA XR	E	M
KLONOPIN ORAL TABLET 0.5 MG, 1 MG	E	
KLONOPIN ORAL TABLET 2 MG	E	M
<i>lacosamide intravenous</i>	1	
<i>lacosamide oral</i>	1	M
LAMICTAL	E	M
LAMICTAL ODT	E	M
LAMICTAL ODT STARTER (BLUE)	E	M
LAMICTAL ODT STARTER (GREEN)	E	M
LAMICTAL ODT STARTER (ORANGE)	E	M

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Drug Name	Drug Tier	Requirements / Limits
LAMICTAL STARTER (BLUE) KIT	E	M
LAMICTAL STARTER (GREEN) KIT	E	M
LAMICTAL STARTER (ORANGE) KIT	E	M
LAMICTAL XR	E	M
LAMICTAL XR STARTER (BLUE)	3	ST; M
LAMICTAL XR STARTER (GREEN)	3	ST; M
LAMICTAL XR STARTER (ORANGE)	3	ST; M
<i>lamotrigine</i>	1	M
<i>levetiracetam in nacl (iso-os) intravenous piggyback 1,000 mg/100 ml, 1,500 mg/100 ml, 500 mg/100 ml</i>	1	
LEVETIRACETAM IN NAACL (ISO-OS) INTRAVENOUS PIGGYBACK 250 MG/50 ML	3	
<i>levetiracetam intravenous</i>	1	
<i>levetiracetam oral solution</i>	1	M
<i>levetiracetam oral tablet</i>	1	M

Drug Name	Drug Tier	Requirements / Limits
<i>levetiracetam oral tablet extended release 24 hr</i>	1	
LYRICA	E	M
LYRICA CR	E	M
<i>methsuximide</i>	1	M
MOTPOLY XR	E	
MYSOLINE	3	M
NAYZILAM	2	ST; QL
NEURONTIN	E	M
ONFI	E	
<i>oxcarbazepine oral suspension</i>	1	
<i>oxcarbazepine oral tablet</i>	1	M
OXTELLAR XR	3	ST
<i>phenobarbital</i>	1	M
PHENYTEK	3	M
<i>phenytoin oral suspension</i>	1	
<i>phenytoin oral tablet, chewable</i>	1	M
<i>phenytoin sodium</i>	1	
<i>phenytoin sodium extended</i>	1	M
<i>pregabalin oral capsule</i>	1	M
<i>pregabalin oral solution</i>	1	M
<i>pregabalin oral tablet extended release 24 hr</i>	1	ST; M

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Drug Name	Drug Tier	Requirements / Limits
PRIMIDONE ORAL TABLET 125 MG	E	M
<i>primidone oral tablet 250 mg, 50 mg</i>	1	M
QUDEXY XR	3	ST; M
<i>roweepira</i>	1	M
<i>rufinamide oral suspension</i>	1	ST; M
<i>rufinamide oral tablet 200 mg</i>	1	ST
<i>rufinamide oral tablet 400 mg</i>	1	ST; M
SABRIL	E	SP; M
SPRITAM	3	ST; M
<i>subvenite</i>	1	M
<i>subvenite starter (blue) kit</i>	1	M
<i>subvenite starter (green) kit</i>	1	M
<i>subvenite starter (orange) kit</i>	1	M
SYMPAZAN	3	ST
TEGRETOL	3	
TEGRETOL XR	3	
<i>tiagabine oral tablet 12 mg, 4 mg</i>	1	M
<i>tiagabine oral tablet 16 mg, 2 mg</i>	1	
TOPAMAX	E	M
<i>topiramate oral capsule, sprinkle</i>	1	M
<i>topiramate oral capsule, extended release 24hr</i>	1	ST; M

Drug Name	Drug Tier	Requirements / Limits
<i>topiramate oral capsule, sprinkle, er 24 hr</i>	1	ST; M
<i>topiramate oral tablet</i>	1	M
TRILEPTAL	E	M
TROKENDI XR	3	ST; M
<i>valproate sodium</i>	1	
<i>valproic acid</i>	1	M
<i>valproic acid (as sodium salt)</i>	1	M
VALTOCO	3	ST; QL
<i>vigabatrin</i>	1	ST; SP; M; QL
<i>vigadrone</i>	1	ST; SP; M; QL
<i>vigpoder</i>	1	ST; SP; M; QL
VIMPAT INTRAVENOUS	E	
VIMPAT ORAL	E	M
XCOPRI	3	M; QL
XCOPRI MAINTENANCE PACK	3	M; QL
XCOPRI TITRATION PACK	3	M; QL
ZARONTIN	3	M
ZONEGRAN	E	M
ZONISADE	E	
<i>zonisamide</i>	1	M
ZTALMY	2	ST; SP
ANTIPARKINSONISM AGENTS		
APOKYN	E	SP
<i>apomorphine</i>	1	ST; SP; QL

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Drug Name	Drug Tier	Requirements / Limits
AZILECT	3	ST; M
<i>benztropine injection</i>	1	
<i>benztropine oral tablet 0.5 mg, 1 mg</i>	1	M
<i>benztropine oral tablet 2 mg</i>	1	
<i>bromocriptine</i>	1	M
<i>carbidopa</i>	1	ST; M
<i>carbidopa-levodopa</i>	1	M
<i>carbidopa-levodopa-entacapone</i>	1	M
DHIVY	E	M
DUOPA	3	ST; SP
<i>entacapone</i>	1	M
GOCOVRI	E	SP; M
INBRIJA	2	ST; SP; M; QL
LODOSYN	3	ST; M
MIRAPEX ER	3	M
NEUPRO	3	M
NOURIANZ	3	ST; SP; M; QL
ONGENTYS	E	M
OSMOLEX ER	E	SP; M
PARLODEL	3	M
<i>pramipexole oral tablet</i>	1	M
<i>pramipexole oral tablet extended release 24 hr 0.375 mg, 0.75 mg, 2.25 mg, 3 mg, 3.75 mg, 4.5 mg</i>	1	M

Drug Name	Drug Tier	Requirements / Limits
<i>pramipexole oral tablet extended release 24 hr 1.5 mg</i>	1	
<i>rasagiline</i>	1	M
<i>ropinirole</i>	1	M
RYTARY	3	M
<i>selegiline hcl</i>	1	M
SINEMET	3	M
TASMAR	3	ST; M
<i>tolcapone</i>	1	ST; M
<i>trihexyphenidyl</i>	1	M
XADAGO	E	M
ZELAPAR	E	M
MIGRAINE & CLUSTER HEADACHE THERAPY		
AIMOVIG AUTOINJECTOR	2	ST; QL
AJOVY AUTOINJECTOR	2	ST; QL
AJOVY SYRINGE	2	ST; QL
<i>almotriptan malate</i>	1	M; QL
<i>dihydroergotamine injection</i>	1	
<i>dihydroergotamine nasal</i>	1	ST; QL
<i>eletriptan</i>	1	QL
ELYXYB	E	
EMGALITY PEN	2	ST; QL
EMGALITY SYRINGE	2	ST; QL
ERGOMAR	3	
<i>ergotamine-caffeine</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
FROVA	3	ST; QL
<i>frovatriptan</i>	1	QL
IMITREX	E	
IMITREX STATDOSE PEN	E	
IMITREX STATDOSE REFILL	E	
MAXALT	E	
MAXALT-MLT	E	
<i>migergot</i>	1	
MIGRANAL	3	ST; QL
MIGRANOW	E	
<i>naratriptan</i>	1	QL
NURTEC ODT	2	ST; QL
ONZETRA XSAIL	E	
QULIPTA	2	ST; M; QL
RELPAK	E	
REYVOW	3	ST; QL
<i>rizatriptan</i>	1	QL
<i>sumatriptan</i>	1	QL
<i>sumatriptan succinate</i>	1	QL
<i>sumatriptan- naproxen</i>	1	ST; QL
TOSYMRA	3	ST; QL
TREXIMET	E	
TRUDHESA	3	ST; QL
UBRELVY	2	ST; QL
VYEPTI	E	SP
ZAVZPRET	E	

Drug Name	Drug Tier	Requirements / Limits
ZEMBRACE	3	ST; QL
SYMTOUCH		
<i>zolmitriptan nasal</i>	1	ST; QL
<i>zolmitriptan oral</i>	1	QL
ZOMIG NASAL	3	ST; QL
ZOMIG ORAL	E	
MISCELLANEOUS NEUROLOGICAL THERAPY		
ADLARITY	3	ST; M
ADUHELM	E	SP
AMONDYS-45	E	SP
AMPYRA	E	SP
AMVUTTRA	E	SP
ARICEPT	3	ST; M
AUSTEDO	2	ST; SP; QL
AUSTEDO XR	2	ST; SP; QL
AUSTEDO XR TITRATION KT(WK1-4)	2	ST; SP; QL
<i>dalfampridine</i>	1	ST; SP; QL
DAYBUE	E	SP
<i>dichlorphenamide</i>	1	ST; SP
<i>donepezil oral tablet 10 mg, 5 mg</i>	1	M
<i>donepezil oral tablet 23 mg</i>	1	ST; M
<i>donepezil oral tablet, disintegrating</i>	1	M
EVRYSDI	3	ST; SP; QL
EXELON PATCH	3	ST; M
EXONDYS-51	E	SP
FIRDAPSE	2	ST; SP

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Drug Name	Drug Tier	Requirements / Limits
<i>galantamine</i>	1	M
HORIZANT	3	ST; M
INGREZZA	3	ST; SP; QL
INGREZZA INITIATION PK(TARDIV)	3	ST; SP; QL
KEVEYIS	E	SP
LEQEMBI	E	SP
<i>memantine oral capsule, sprinkle, er 24 hr</i>	1	M
<i>memantine oral solution</i>	1	M
<i>memantine oral tablet</i>	1	M
MEMANTINE ORAL TABLETS,DOSE PACK	3	M
NAMENDA TITRATION PAK	3	M
NAMENDA XR ORAL CAP,SPRINKLE,ER 24HR DOSE PACK	3	
NAMENDA XR ORAL CAPSULE,SPRINKLE,ER 24HR	E	M
NAMZARIC ORAL CAP,SPRINKLE,ER 24HR DOSE PACK	2	ST
NAMZARIC ORAL CAPSULE,SPRINKLE,ER 24HR	2	ST; M
NUEDEXTA	2	ST

Drug Name	Drug Tier	Requirements / Limits
NULIBRY	3	PA; ST; SP
ONPATTRO	E	SP
<i>ormalvi</i>	1	ST; SP
RADICAVA	2	ST; SP
RADICAVA ORS STARTER KIT SUSP	2	ST; SP
RELYVRIO	E	SP
<i>rivastigmine</i>	1	M
<i>rivastigmine tartrate</i>	1	M
SKYCLARYS	E	SP
SKYSONA	2	PA; ST; SP
SPINRAZA (PF)	2	ST; SP; QL
TEGSEDI	2	ST; SP; QL
<i>tetrabenazine</i>	1	ST; SP; QL
TYSABRI	2	PA; SP; QL
VILTEPSO	E	SP
VYONDYS-53	E	SP
WAINUA	E	SP
XENAZINE	E	SP
ZEPOSIA	2	ST; SP; QL
ZEPOSIA STARTER KIT (28-DAY)	2	ST; SP; QL
ZEPOSIA STARTER PACK (7-DAY)	2	ST; SP; QL
ZOLGENSMA	2	ST; SP
MUSCLE RELAXANTS & ANTISPASMODIC THERAPY		
AMRIX	E	
<i>atracurium</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
BACLOFEN ORAL SOLUTION	E	
<i>baclofen oral suspension</i>	1	
<i>baclofen oral tablet 10 mg, 20 mg, 5 mg</i>	1	
BACLOFEN ORAL TABLET 15 MG	E	
BLOXIVERZ	3	
BRIDION	3	
<i>carisoprodol</i>	1	
<i>carisoprodol-aspirin</i>	1	
<i>carisoprodol-aspirin-codeine</i>	1	
<i>chlorzoxazone</i>	1	
<i>cyclobenzaprine oral capsule, extended release 24hr</i>	1	ST
<i>cyclobenzaprine oral tablet</i>	1	
CYCLOTENS REFILL	E	
CYCLOTENS STARTER	E	
DANTRIUM	3	
<i>dantrolene</i>	1	
FEXMID	3	ST
FLEQSUVY	E	
LORZONE	3	ST
LYVISPAH	E	
<i>meprobamate</i>	1	
MESTINON	E	M

Drug Name	Drug Tier	Requirements / Limits
MESTINON TIMESPAN	E	M
<i>metaxalone</i>	1	
<i>methocarbamol injection</i>	1	
METHOCARBAMOL ORAL TABLET 1,000 MG	E	
<i>methocarbamol oral tablet 500 mg, 750 mg</i>	1	
<i>neostigmine in sterile water</i>	1	
<i>neostigmine methylsulfate intravenous solution</i>	1	
NEOSTIGMINE METHYLSULFATE INTRAVENOUS SYRINGE 2 MG/2 ML (1 MG/ML), 4 MG/4 ML (1 MG/ML)	3	
<i>neostigmine methylsulfate intravenous syringe 3 mg/3 ml (1 mg/ml), 5 mg/5 ml (1 mg/ml)</i>	1	
NIMBEX	3	
NORGESIC	3	
NORGESIC FORTE	3	
<i>orphenadrine citrate</i>	1	
<i>orphenadrine-asa-caffeine</i>	1	
<i>orphengesic forte</i>	1	
OZOBAX	E	

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Drug Name	Drug Tier	Requirements / Limits
OZOBAX DS	E	
PREVDUO	3	
<i>pyridostigmine bromide oral syrup</i>	1	M
PYRIDOSTIGMINE BROMIDE ORAL TABLET 30 MG	3	M
<i>pyridostigmine bromide oral tablet 60 mg</i>	1	M
<i>pyridostigmine bromide oral tablet extended release</i>	1	M
<i>regonol</i>	1	
<i>revonto</i>	1	
ROBAXIN	3	
RYANODEX	3	
RYSTIGGO	E	SP
SOMA	3	
<i>tizanidine</i>	1	
<i>vanadom</i>	1	
VYVGART	3	ST; SP
VYVGART HYTRULO	3	ST; SP
ZANAFLEX	3	
ZILBRYSQ	E	SP
NARCOTIC ANALGESICS		
<i>acetaminophen-caff-dihydrocod</i>	1	
<i>acetaminophen-codeine</i>	1	
<i>ascomp with codeine</i>	1	
BELBUCA	2	ST; QL

Drug Name	Drug Tier	Requirements / Limits
BRIXADI	2	SP
BUPAP	E	
<i>buprenorphine</i>	1	ST
<i>buprenorphine hcl</i>	1	
<i>butalbital-acetaminop-caf-cod</i>	1	
<i>butalbital-acetaminophen</i>	1	
<i>butalbital-acetaminophen-caff</i>	1	
<i>butalbital-aspirin-caffeine</i>	1	
BUTRANS	E	
<i>codeine sulfate</i>	1	
<i>codeine-butalbital-asa-caff</i>	1	
DEMEROL	3	
DEMEROL (PF)	3	
DILAUDID	3	
DILAUDID (PF)	3	
<i>diskets</i>	1	ST
DSUVIA	3	
<i>duramorph (pf)</i>	1	
<i>endocet</i>	1	
ESGIC	3	ST
<i>fentanyl</i>	1	ST; QL
FENTANYL (PF)-BUPIVACAINE-NACL	3	

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Drug Name	Drug Tier	Requirements / Limits
FENTANYL CITRATE (PF) INTRAVENOUS PATIENT CONTROL.ANALGESIA SOLN	3	
<i>fentanyl citrate (pf) intravenous prefilled pump reservoir</i>	1	
<i>fentanyl citrate (pf) intravenous pt controlled analgesia syringe 1,000 mcg/20 ml (50 mcg/ml)</i>	1	
FENTANYL CITRATE (PF) INTRAVENOUS PT CONTROLLED ANALGESIA SYRING 1,250 MCG/25 ML (50 MCG/ML), 1,500 MCG/30 ML (50 MCG/ML), 2,500 MCG/50 ML (50 MCG/ML), 2,750 MCG/55 ML (50 MCG/ML)	3	
<i>fentanyl citrate (pf) intravenous syringe 100 mcg/2 ml (50 mcg/ml)</i>	1	
FENTANYL CITRATE (PF) INTRAVENOUS SYRINGE 250 MCG/5 ML (50 MCG/ML)	3	

Drug Name	Drug Tier	Requirements / Limits
FENTANYL CITRATE (PF)-0.9%NACL INJECTION PREFILLED PUMP RESERVOIR	3	
<i>fentanyl citrate (pf)-0.9%nacl injection pt controlled analgesia syringe 1,250 mcg/25 ml</i>	1	
FENTANYL CITRATE (PF)-0.9%NACL INJECTION PT CONTROLLED ANALGESIA SYRING 550 MCG/55 ML	3	
FENTANYL CITRATE (PF)-0.9%NACL INJECTION SOLUTION	3	
FENTANYL CITRATE (PF)-0.9%NACL INTRAVENOUS PT CONTROLLED ANALGESIA SYRING 1,000 MCG/20 ML (50 MCG/ML), 1,000 MCG/50 ML (20 MCG/ML), 1,500 MCG/30 ML (50 MCG/ML), 500 MCG/50 ML (10 MCG/ML)	3	

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Drug Name	Drug Tier	Requirements / Limits
<i>fentanyl citrate (pf)-0.9%nacl intravenous pt controlled analgesia syring 2,500 mcg/50 ml (50 mcg/ml)</i>	1	
FENTANYL CITRATE (PF)-0.9%NACL INTRAVENOUS SOLUTION 10 MCG/ML, 16 MCG/ML, 20 MCG/ML, 50 MCG/ML	3	
<i>fentanyl citrate (pf)-0.9%nacl intravenous solution 5 mcg/ml</i>	1	
<i>fentanyl citrate (pf)-0.9%nacl intravenous syringe 10 mcg/ml</i>	1	
FENTANYL CITRATE (PF)-0.9%NACL INTRAVENOUS SYRINGE 100 MCG/10 ML (10 MCG/ML), 100 MCG/2 ML (50 MCG/ML), 20 MCG/2 ML (10 MCG/ML), 250 MCG/5 ML (50 MCG/ML), 50 MCG/5 ML (10 MCG/ML)	3	

Drug Name	Drug Tier	Requirements / Limits
<i>fentanyl citrate buccal lozenge on a handle</i>	1	ST; QL
FENTANYL CITRATE BUCCAL TABLET, EFFERVESCENT	E	
FENTANYL-ROPIVACAINE-NACL (PF)	3	
FENTORA	E	
FIORICET	3	ST
FIORICET WITH CODEINE	3	
<i>hydrocodone bitartrate</i>	1	ST; QL
<i>hydrocodone-acetaminophen</i>	1	
<i>hydrocodone-ibuprofen</i>	1	
HYDROMORPHONE (PF) IN WATER	3	
HYDROMORPHONE (PF) INJECTION SOLUTION 1 MG/ML, 4 MG/ML	3	
<i>hydromorphone (pf) injection solution 10 mg/ml, 2 mg/ml</i>	1	
HYDROMORPHONE (PF)-0.9 % NACL INTRAVENOUS PATIENT CONTROL.ANALGESIA SOLN	3	

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Drug Name	Drug Tier	Requirements / Limits
<i>hydromorphone (pf)-0.9 % nacl intravenous prefilled pump reservoir 10 mg/50 ml (0.2 mg/ml)</i>	1	
HYDROMORPHONE (PF)-0.9 % NACL INTRAVENOUS PREFILLED PUMP RESERVOIR 20 MG/100 ML (0.2 MG/ML), 50 MG/50 ML (1 MG/ML)	3	
<i>hydromorphone (pf)-0.9 % nacl intravenous pt controlled analgesia syringe 10 mg/50 ml (0.2 mg/ml), 15 mg/30 ml (0.5 mg/ml), 25 mg/50 ml (0.5 mg/ml)</i>	1	
HYDROMORPHONE (PF)-0.9 % NACL INTRAVENOUS PT CONTROLLED ANALGESIA SYRINGE 25 MG/25 ML (1 MG/ML), 30 MG/30 ML (1 MG/ML), 50 MG/50 ML (1 MG/ML), 55 MG/55 ML (1 MG/ML), 6 MG/30 ML (0.2 MG/ML)	3	

Drug Name	Drug Tier	Requirements / Limits
HYDROMORPHONE (PF)-0.9 % NACL INTRAVENOUS SOLUTION	3	
HYDROMORPHONE (PF)-0.9 % NACL INTRAVENOUS SYRINGE	3	
<i>hydromorphone injection solution</i>	1	
HYDROMORPHONE INJECTION SYRINGE 0.25 MG/0.5 ML, 0.5 MG/0.5 ML	3	
<i>hydromorphone injection syringe 1 mg/ml, 2 mg/ml, 4 mg/ml</i>	1	
<i>hydromorphone oral liquid</i>	1	
<i>hydromorphone oral tablet</i>	1	
<i>hydromorphone oral tablet extended release 24 hr</i>	1	ST; QL
<i>hydromorphone rectal</i>	1	
HYDROMORPHONE (PF)-NACL, ISO-OSM	3	
HYSINGLA ER	2	ST; QL
INFUMORPH P/F	2	
<i>levorphanol tartrate</i>	1	
<i>meperidine</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>meperidine (pf)</i>	1	
<i>methadone</i>	1	ST
METHADONE IN 0.9 % SOD.CHLORID	3	
METHADONE IN SOD CHLOR, ISO-OSM	3	
<i>methadose</i>	1	ST
MITIGO (PF)	3	
MORPHINE (PF) IN 0.9 % SOD CHL INJECTION	3	
MORPHINE (PF) IN 0.9 % SOD CHL INTRAVENOUS PATIENT CONTROL.ANALGESIA SOLN	3	
MORPHINE (PF) IN 0.9 % SOD CHL INTRAVENOUS PREFILLED PUMP RESERVOIR	3	
MORPHINE (PF) IN 0.9 % SOD CHL INTRAVENOUS PT CONTROLLED ANALGESIA SYRING 150 MG/30 ML (5 MG/ML), 25 MG/25 ML (1 MG/ML), 55 MG/55 ML (1 MG/ML)	3	

Drug Name	Drug Tier	Requirements / Limits
<i>morphine (pf) in 0.9 % sod chl intravenous pt controlled analgesia syringe 30 mg/30 ml (1 mg/ml), 50 mg/50 ml (1 mg/ml)</i>	1	
<i>morphine (pf) in 0.9 % sod chl intravenous solution</i>	1	
<i>morphine (pf) in 0.9 % sod chl intravenous syringe 1 mg/ml, 2 mg/2 ml (1 mg/ml), 5 mg/5 ml (1 mg/ml)</i>	1	
MORPHINE (PF) IN 0.9 % SOD CHL INTRAVENOUS SYRINGE 2 MG/ML, 4 MG/ML	3	
<i>morphine (pf) injection</i>	1	
<i>morphine (pf) intravenous patient control. analgesia soln</i>	1	
MORPHINE (PF) INTRAVENOUS SYRINGE	3	
<i>morphine concentrate</i>	1	
MORPHINE IN 0.9 % SODIUM CHLOR INJECTION	3	

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
<i>morphine in 0.9 % sodium chlor intravenous prefilled pump reservoir</i>	1	
<i>morphine in 0.9 % sodium chlor intravenous pt controlled analgesia syringe</i>	1	
MORPHINE IN 0.9 % SODIUM CHLOR INTRAVENOUS SOLUTION	3	
MORPHINE INJECTION SOLUTION	3	
MORPHINE INJECTION SYRINGE 2 MG/ML	3	
<i>morphine injection syringe 4 mg/ml</i>	1	
MORPHINE INTRAMUSCULAR	3	
<i>morphine intravenous solution 10 mg/ml, 4 mg/ml, 50 mg/ml</i>	1	
MORPHINE INTRAVENOUS SOLUTION 8 MG/ML	3	
<i>morphine intravenous syringe 10 mg/ml, 2 mg/ml, 4 mg/ml</i>	1	

Drug Name	Drug Tier	Requirements / Limits
MORPHINE INTRAVENOUS SYRINGE 8 MG/ML	3	
<i>morphine oral capsule, er multiphase 24 hr</i>	1	ST; QL
<i>morphine oral capsule, extend release pellets</i>	1	ST; QL
<i>morphine oral solution</i>	1	
<i>morphine oral tablet</i>	1	
<i>morphine oral tablet extended release</i>	1	ST; QL
<i>morphine rectal</i>	1	
MS CONTIN	3	ST; QL
NALOCET	3	
<i>oxycodone oral capsule</i>	1	
<i>oxycodone oral concentrate</i>	1	
<i>oxycodone oral solution</i>	1	
<i>oxycodone oral tablet</i>	1	
OXYCODONE ORAL TABLET, ORAL ONLY, EXT. REL.12 HR	E	
<i>oxycodone-acetaminophen</i>	1	
OXYCONTIN	2	ST; QL
<i>oxymorphone oral tablet</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>oxymorphone oral tablet extended release 12 hr</i>	1	ST; QL
PERCOCET	E	
PRIMLEV	E	
PROLATE ORAL SOLUTION	E	
<i>prolate oral tablet</i>	1	
ROXICODONE	3	
ROXYBOND	E	
SEGLENTIS	E	
SUBLOCADE	2	SP
<i>tencon</i>	1	
TREZIX	3	
XTAMPZA ER	E	
NON-NARCOTIC ANALGESICS		
<i>adult aspirin regimen</i>	0	ACA
ANAPROX DS	3	ST
ANJESO	3	
ARTHROTEC 50	3	ST
ARTHROTEC 75	3	ST
<i>aspirin childrens</i>	0	ACA
<i>aspirin oral tablet</i>	E	
<i>aspirin oral tablet, chewable</i>	0	ACA
<i>aspirin oral tablet, delayed release (dr/ec) 325 mg</i>	0	
<i>aspirin oral tablet, delayed release (dr/ec) 81 mg</i>	0	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>aspirin, buffd-calcium carb-mag</i>	0	
<i>bayer aspirin oral tablet</i>	E	
<i>bayer aspirin oral tablet, delayed release (dr/ec)</i>	0	
BAYER CHEWABLE ASPIRIN	E	
<i>bayer low dose aspirin</i>	0	ACA
<i>bufferin</i>	0	
<i>buprenorphine-naloxone</i>	1	
<i>butorphanol injection</i>	1	
<i>butorphanol nasal</i>	1	QL
CALDOLOR INTRAVENOUS PIGGYBACK	3	
CALDOLOR INTRAVENOUS RECON SOLN	2	
CAMBIA	3	ST; QL
CAPSFENAC PAK	E	
CAPSINAC	E	
CELEBREX	E	
<i>celecoxib</i>	1	
CONZIP	E	
COXANTO	E	
DAYPRO	3	ST
DERMACINRX LEXITRAL	E	

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
DICLAREAL	E	
DICLOFENAC EPOLAMINE	E	
<i>diclofenac potassium oral capsule</i>	1	
<i>diclofenac potassium oral powder in packet</i>	1	ST; QL
<i>diclofenac potassium oral tablet 25 mg</i>	1	ST
<i>diclofenac potassium oral tablet 50 mg</i>	1	
<i>diclofenac sodium oral</i>	1	
<i>diclofenac sodium topical drops</i>	1	QL
<i>diclofenac sodium topical gel</i>	E	
<i>diclofenac sodium topical solution in metered-dose pump</i>	1	ST; QL
DICLOFENAC SUBMICRONIZED	E	
<i>diclofenac-misoprostol</i>	1	
DICLOFEX DC	E	
DICLOFONO	E	
DICLOHEAL-60	E	
DICLOPR	E	
DICLOSAICIN	E	
DICLOTRAL	E	
DICLOTREX	E	
DICLOTREX II	E	
<i>diflunisal</i>	1	

Drug Name	Drug Tier	Requirements / Limits
DIMENTHO	E	
DISALCID	3	
DITHOL	E	
DUEXIS	3	ST
EC-NAPROSYN	3	ST
<i>ecotrin</i>	0	
<i>ecotrin low strength</i>	0	ACA
<i>etodolac</i>	1	
EUFLEXXA	2	PA
FELDENE	3	ST
FENOPROFEN ORAL CAPSULE 200 MG	E	
<i>fenopropfen oral capsule 400 mg</i>	1	ST
<i>fenopropfen oral tablet</i>	1	ST
FENOVAR	E	
FLECTOR	2	ST; QL
<i>flurbiprofen</i>	1	
FROTEK	E	
<i>ibu</i>	1	
IBUPAK	E	
<i>ibuprofen</i>	1	
<i>ibuprofen-famotidine</i>	1	ST
ICLOFENAC CP	E	
INDOCIN	E	
<i>indomethacin oral capsule</i>	1	
<i>indomethacin oral capsule, extended release</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>indomethacin oral suspension</i>	1	ST
INDOMETHACIN RECTAL SUPPOSITORY 100 MG	E	
<i>indomethacin rectal suppository 50 mg</i>	1	
INFLAMMA-K	E	
<i>ketoprofen oral capsule 25 mg</i>	1	ST
<i>ketoprofen oral capsule 50 mg, 75 mg</i>	1	
<i>ketoprofen oral capsule, ext rel. pellets 24 hr</i>	1	ST
<i>ketorolac injection</i>	1	
<i>ketorolac intramuscular</i>	1	
KETOROLAC NASAL	E	
<i>ketorolac oral</i>	1	QL
<i>kiprofen</i>	1	ST
KLOXXADO	2	QL
LEXITRAL PHARMAPAK II	E	
LEXTOL	E	
LICART	2	ST; QL
LIFEMS NALOXONE	E	
LODINE	3	ST
<i>lofena</i>	1	ST
LOTREXONE	3	

Drug Name	Drug Tier	Requirements / Limits
LUCEMYRA	E	
<i>meclofenamate</i>	1	
<i>mefenamic acid</i>	1	
MELOXICAM ORAL SUSPENSION	E	
<i>meloxicam oral tablet</i>	1	QL
<i>meloxicam submicronized</i>	1	ST; QL
MONOVISC	2	PA
<i>nabumetone</i>	1	
<i>nalbuphine</i>	1	
NALFON ORAL CAPSULE	E	
NALFON ORAL TABLET	3	ST
NALMEFENE	3	
<i>naloxone injection</i>	1	
<i>naloxone nasal</i>	1	QL
NALTREX	3	
<i>naltrexone</i>	1	
NAPRELAN CR	3	ST
NAPROSYN	3	ST
<i>naproxen oral suspension</i>	1	ST
<i>naproxen oral tablet</i>	1	
<i>naproxen oral tablet, delayed release (dr/ec)</i>	1	
<i>naproxen sodium oral tablet</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>naproxen sodium oral tablet, er multiphase 24 hr</i>	1	ST
<i>naproxen-esomeprazole</i>	1	ST
NARCAN	2	QL
NUCYNTA	E	
NUCYNTA ER	E	
OLINVYK	3	
OPVEE	3	
ORTHOVISC	2	PA
OXAPROZIN ORAL CAPSULE	E	
<i>oxaprozin oral tablet</i>	1	
PENNSAID	E	
<i>pentazocine-naloxone</i>	1	
<i>piroxicam</i>	1	
PROFINAC	E	
QDOLO	E	
RELAFEN DS	E	
ROAOXIA	E	
<i>salsalate</i>	1	
SPRIX	3	ST; SP; QL
<i>st joseph aspirin</i>	0	ACA
<i>st. joseph aspirin</i>	0	ACA
SUBOXONE	E	
<i>sulindac</i>	1	
TIVORBEX	E	
TORONOVA II SUIK	E	
TORONOVA SUIK	E	

Drug Name	Drug Tier	Requirements / Limits
TRAMADOL ORAL CAPSULE, ER BIPHASE 24 HR 17-83	E	
TRAMADOL ORAL CAPSULE, ER BIPHASE 24 HR 25-75	E	
TRAMADOL ORAL SOLUTION	E	
TRAMADOL ORAL TABLET 100 MG, 25 MG	E	
<i>tramadol oral tablet 50 mg</i>	1	QL
<i>tramadol oral tablet extended release 24 hr</i>	1	ST; QL
<i>tramadol oral tablet, er multiphase 24 hr</i>	1	ST; QL
<i>tramadol-acetaminophen</i>	1	QL
<i>tri-buffered aspirin</i>	0	
VAROPHEN (DICLOFENAC)	E	
VENNGEL ONE	E	
VIMOVO	E	
VISCO-3	E	
VIVITROL	2	
VIVLODEX	E	
XRYLIX (DICLOFENAC-KINES TAPE)	E	
ZICLOCIN	E	
ZICLOPRO	E	

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
ZIMHI	E	
ZIPSOR	E	
ZORVOLEX	E	
ZUBSOLV	2	
PSYCHOTHERAPEUTIC DRUGS		
ABILIFY	E	
ABILIFY ASIMTUFII	2	
ABILIFY MAINTENA	2	
ABILIFY MYCITE MAINTENANCE KIT	3	QL
ABILIFY MYCITE STARTER KIT	3	QL
ADASUVE	3	
ADDERALL	E	
ADDERALL XR	E	
ADDYI	3	ST
ADZENYS XR-ODT	3	ST
<i>alprazolam</i>	1	
<i>alprazolam intensol</i>	1	
AMBIEN	E	
AMBIEN CR	E	
<i>amitriptyline</i>	1	
<i>amitriptyline-chlordiazepoxide</i>	1	
<i>amoxapine</i>	1	
<i>amphetamine sulfate</i>	1	
ANAFRANIL	3	
APLENZIN	E	M

Drug Name	Drug Tier	Requirements / Limits
APTENSIO XR	E	
<i>aripiprazole oral solution</i>	1	
<i>aripiprazole oral tablet</i>	1	QL
<i>aripiprazole oral tablet, disintegrating</i>	1	QL
ARISTADA	2	
ARISTADA INITIO	2	
<i>armodafinil</i>	1	ST; QL
<i>asenapine maleate</i>	1	QL
ATIVAN	3	
<i>atomoxetine</i>	1	M
AUVELITY	E	M
AZSTARYS	3	ST
BELSOMRA	3	ST; QL
<i>bupropion hcl oral tablet</i>	1	M
<i>bupropion hcl oral tablet extended release 24 hr 150 mg, 300 mg</i>	1	M; QL
BUPROPION HCL ORAL TABLET EXTENDED RELEASE 24 HR 450 MG	E	M
<i>bupropion hcl oral tablet sustained-release 12 hr</i>	1	M; QL
<i>bupirone</i>	1	M
BYFAVO	3	
CAPLYTA	3	QL
CELEXA	E	M

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Drug Name	Drug Tier	Requirements / Limits
<i>chlordiazepoxide hcl</i>	1	
<i>chlorpromazine</i>	1	
CITALOPRAM ORAL CAPSULE	E	M
<i>citalopram oral solution</i>	1	M
<i>citalopram oral tablet</i>	1	M; QL
<i>clomipramine</i>	1	
<i>clonidine hcl</i>	1	M
<i>clorazepate dipotassium</i>	1	
<i>clozapine</i>	1	
CLOZARIL	3	
CONCERTA	E	
COTEMPLA XR- ODT	3	ST
CYMBALTA	E	M
DAYTRANA	2	ST
DAYVIGO	3	ST
<i>desipramine</i>	1	
DESOXYN	3	
DESVENLAFAXIN E	3	ST; M; QL
<i>desvenlafaxine succinate</i>	1	ST; M; QL
DEXEDRINE SPANSULE	3	ST
<i>dexmethylphenidate</i>	1	
<i>dextroamphetamine sulfate</i>	1	
<i>dextroamphetamine-amphetamine</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>diazepam</i>	1	
<i>diazepam intensol</i>	1	
DORAL	E	
<i>doxepin oral capsule</i>	1	
<i>doxepin oral concentrate</i>	1	
<i>doxepin oral tablet</i>	1	ST; QL
DRIZALMA SPRINKLE	E	M
<i>duloxetine oral capsule, delayed release(dr/ec) 20 mg</i>	1	M; QL
<i>duloxetine oral capsule, delayed release(dr/ec) 30 mg, 60 mg</i>	1	QL
<i>duloxetine oral capsule, delayed release(dr/ec) 40 mg</i>	1	ST; M; QL
DULOXICAIN	E	
DYANAVAL XR	E	
EDLUAR	3	ST; QL
EFFEXOR XR	E	M
EMSAM	3	
<i>ergoloid</i>	1	M
<i>escitalopram oxalate oral solution</i>	1	ST; M
<i>escitalopram oxalate oral tablet</i>	1	M; QL
<i>estazolam</i>	1	
<i>eszopiclone</i>	1	QL
EVEKEO	E	
FANAPT	3	QL

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Drug Name	Drug Tier	Requirements / Limits
FETZIMA ORAL CAPSULE,EXT REL 24HR DOSE PACK	2	ST; QL
FETZIMA ORAL CAPSULE,EXTENDED RELEASE 24 HR	2	ST; M; QL
<i>fluoxetine oral capsule 10 mg, 40 mg</i>	1	M; QL
<i>fluoxetine oral capsule 20 mg</i>	1	M
<i>fluoxetine oral capsule,delayed release(dr/ec)</i>	1	ST; M; QL
<i>fluoxetine oral solution</i>	1	M
<i>fluoxetine oral tablet 10 mg</i>	1	ST; M; QL
<i>fluoxetine oral tablet 20 mg, 60 mg</i>	1	ST; M
<i>fluphenazine decanoate</i>	1	
<i>fluphenazine hcl</i>	1	
<i>flurazepam</i>	1	
<i>fluvoxamine oral capsule,extended release 24hr</i>	1	ST; M; QL
<i>fluvoxamine oral tablet</i>	1	M; QL
FOCALIN	E	
FOCALIN XR	E	
FORFIVO XL	E	M

Drug Name	Drug Tier	Requirements / Limits
GEODON INTRAMUSCULAR	3	
GEODON ORAL	3	QL
<i>guanfacine</i>	1	M
HALCION	3	
HALDOL DECANOATE	3	
<i>haloperidol</i>	1	
<i>haloperidol decanoate</i>	1	
<i>haloperidol lactate</i>	1	
HETLIOZ	3	ST; SP; QL
HETLIOZ LQ	3	ST; SP; QL
IGALMI	3	
<i>imipramine hcl</i>	1	
<i>imipramine pamoate</i>	1	
INTUNIV ER	E	M
INVEGA	3	QL
INVEGA HAFYERA	E	
INVEGA SUSTENNA	3	
INVEGA TRINZA	3	
JORNAY PM	3	ST
LATUDA	E	
LEXAPRO	E	M
<i>lisdexamfetamine oral capsule</i>	1	
<i>lisdexamfetamine oral tablet,chewable</i>	1	ST
<i>lithium carbonate</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>lithium citrate</i>	1	
LITHOBID	3	
<i>lorazepam</i>	1	
<i>lorazepam intensol</i>	1	
LOREEV XR	E	
<i>loxapine succinate</i>	1	
LUMRYZ	2	ST; SP; QL
LUNESTA	E	
<i>lurasidone</i>	1	QL
LYBALVI	E	
MARPLAN	3	
METADATE CD	E	
<i>methamphetamine</i>	1	
METHYLIN	3	
<i>methylphenidate</i>	1	ST
<i>methylphenidate hcl oral cap, er sprinkle, biphasic 40-60</i>	1	ST
<i>methylphenidate hcl oral capsule, er biphasic 30-70</i>	1	
<i>methylphenidate hcl oral capsule, er biphasic 50-50</i>	1	
<i>methylphenidate hcl oral solution</i>	1	
<i>methylphenidate hcl oral tablet</i>	1	
<i>methylphenidate hcl oral tablet extended release</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>methylphenidate hcl oral tablet extended release 24hr 18 mg, 27 mg, 36 mg, 54 mg</i>	1	
METHYLPHENIDATE HCL ORAL TABLET EXTENDED RELEASE 24HR 45 MG, 63 MG, 72 MG	E	
<i>methylphenidate hcl oral tablet, chewable</i>	1	
<i>midazolam (pf)</i>	1	
MIDAZOLAM (PF) IN 0.9 % NACL INTRAVENOUS PREFILLED PUMP RESERVOIR	3	
<i>midazolam (pf) in 0.9 % nacl intravenous solution</i>	1	
MIDAZOLAM (PF) IN 0.9 % NACL INTRAVENOUS SYRINGE	3	
MIDAZOLAM IN 0.9 % SOD CHLORID	3	
MIDAZOLAM IN NACL, ISO-OSMOTIC	3	
MIDAZOLAM IN NACL, ISO-OSMO(PF)	3	
<i>midazolam injection</i>	1	
MIDAZOLAM INTRAVENOUS	3	

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Drug Name	Drug Tier	Requirements / Limits
MIDAZOLAM ORAL SYRUP 10 MG/5 ML (2 MG/ML)	3	
<i>midazolam oral syrup 2 mg/ml</i>	1	
<i>mirtazapine</i>	1	M
MKO (MIDAZOLAM-KETAMINE-ONDAN)	3	
<i>modafinil</i>	1	ST; QL
<i>molindone</i>	1	
MYDAYIS	2	ST
NARDIL	3	
<i>nefazodone</i>	1	M
NORPRAMIN	3	
<i>nortriptyline</i>	1	
NUPLAZID	3	ST; SP; QL
NUVIGIL	E	
<i>olanzapine intramuscular</i>	1	
<i>olanzapine oral</i>	1	QL
<i>olanzapine-fluoxetine</i>	1	
<i>oxazepam</i>	1	
<i>paliperidone</i>	1	QL
PAMELOR	3	
PARNATE	3	
<i>paroxetine hcl oral suspension</i>	1	ST; M
<i>paroxetine hcl oral tablet</i>	1	M; QL

Drug Name	Drug Tier	Requirements / Limits
<i>paroxetine hcl oral tablet extended release 24 hr</i>	1	ST; M; QL
<i>paroxetine mesylate(menop. sym)</i>	1	ST; M; QL
PAXIL CR	3	ST; M; QL
PAXIL ORAL SUSPENSION	3	ST; M
PAXIL ORAL TABLET	3	ST; M; QL
<i>perphenazine</i>	1	
<i>perphenazine-amitriptyline</i>	1	
PERSERIS	3	
<i>phenelzine</i>	1	
<i>pimozide</i>	1	
PRISTIQ	E	M
<i>procentra</i>	1	
<i>protriptyline</i>	1	
PROVIGIL	E	
PROZAC	E	M
QELBREE	3	ST; M
QUAZEPAM	E	
<i>quetiapine oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg</i>	1	QL
QUETIAPINE ORAL TABLET 150 MG	E	
<i>quetiapine oral tablet extended release 24 hr</i>	1	QL

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Drug Name	Drug Tier	Requirements / Limits
QUILLICHEW ER	E	
QUILLIVANT XR	E	
QUVIVIQ	3	ST
<i>ramelteon</i>	1	QL
RELEXXII	E	
REMERON	3	M
REMERON SOLTAB	3	M
RESTORIL	3	
REXULTI	3	QL
RISPERDAL CONSTA	2	
RISPERDAL ORAL SOLUTION	3	
RISPERDAL ORAL TABLET	3	QL
<i>risperidone microspheres</i>	1	
<i>risperidone oral solution</i>	1	
<i>risperidone oral tablet</i>	1	QL
<i>risperidone oral tablet, disintegrating</i>	1	QL
RITALIN	E	
RITALIN LA	E	
ROZEREM	E	
RYKINDO	E	
SAPHRIS	E	
SECUADO	3	QL
SEROQUEL	E	
SEROQUEL XR	E	

Drug Name	Drug Tier	Requirements / Limits
SERTRALINE ORAL CAPSULE	E	M
<i>sertraline oral concentrate</i>	1	M
<i>sertraline oral tablet</i>	1	M; QL
SILENOR	3	ST; QL
SODIUM OXYBATE	2	ST; SP; QL
SPRAVATO	E	
STRATTERA	E	M
SUNOSI	2	ST; QL
SYMBYAX	3	
<i>tasimelteon</i>	1	ST; SP; QL
<i>temazepam</i>	1	
<i>thioridazine</i>	1	
<i>thiothixene</i>	1	
<i>tranylcypromine</i>	1	
<i>trazodone</i>	1	M
<i>triazolam</i>	1	
<i>trifluoperazine</i>	1	
<i>trimipramine</i>	1	
TRINTELLIX	3	ST; M; QL
UZEDY	E	
VALIUM	E	
VENLAFAXINE BESYLATE	E	M
<i>venlafaxine oral capsule, extended release 24hr</i>	1	M; QL
<i>venlafaxine oral tablet</i>	1	M; QL

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Drug Name	Drug Tier	Requirements / Limits
<i>venlafaxine oral tablet extended release 24hr</i>	1	ST; M; QL
VERSACLOZ	3	
VIIBRYD	E	M
<i>vilazodone</i>	1	ST; M; QL
VRAYLAR	3	QL
VYLEESI	3	ST; SP; QL
VYVANSE ORAL CAPSULE	3	ST
VYVANSE ORAL TABLET, CHEWABLE	2	ST
WAKIX	3	ST; SP; QL
WELLBUTRIN SR	E	M
WELLBUTRIN XL	E	M
XANAX	E	
XANAX XR	E	
XELSTRYM	E	
XYREM	E	SP
XYWAV	2	ST; SP; QL
<i>zaleplon</i>	1	QL
<i>zenzedi oral tablet 10 mg, 5 mg</i>	1	
ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 30 MG, 7.5 MG	3	
<i>ziprasidone hcl</i>	1	QL
<i>ziprasidone mesylate</i>	1	
ZOLOFT	E	M
ZOLPIDEM ORAL CAPSULE	E	

Drug Name	Drug Tier	Requirements / Limits
<i>zolpidem oral tablet</i>	1	QL
<i>zolpidem oral tablet, ext release multiphase</i>	1	QL
<i>zolpidem sublingual</i>	1	QL
ZULRESSO	2	ST; SP
ZURZUVAE	2	ST; SP; QL
ZYPREXA INTRAMUSCULAR	3	
ZYPREXA ORAL	3	QL
ZYPREXA RELPREVV	3	
ZYPREXA ZYDIS	3	QL

CARDIOVASCULAR, HYPERTENSION & LIPIDS

ANTIARRHYTHMIC AGENTS

<i>adenosine</i>	1	
<i>amiodarone intravenous</i>	1	
<i>amiodarone oral</i>	1	M
BETAPACE	3	M
BETAPACE AF	3	M
<i>bretylum tosylate</i>	1	
<i>disopyramide phosphate</i>	1	M
<i>dofetilide</i>	1	M
<i>flecainide</i>	1	M
<i>lidocaine (pf)</i>	1	
<i>lidocaine in 5 % dextrose (pf)</i>	1	
<i>mexiletine</i>	1	M

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
MULTAQ	3	M
NEXTERONE	3	
NORPACE	E	M
NORPACE CR	E	M
<i>pacerone</i>	1	M
<i>procainamide</i>	1	
<i>propafenone oral capsule, extended release 12 hr</i>	1	M
<i>propafenone oral tablet 150 mg, 225 mg</i>	1	M
<i>propafenone oral tablet 300 mg</i>	1	
<i>quinidine gluconate</i>	1	M
<i>quinidine sulfate</i>	1	M
<i>sotalol af</i>	1	M
SOTALOL INTRAVENOUS	3	
<i>sotalol oral</i>	1	M
SOTYLIZE	2	M
TIKOSYN	E	
ANTIHYPERTENSIVE THERAPY		
ACCUPRIL	3	M
ACCURETIC	3	M
<i>acebutolol</i>	1	M
ALDACTONE	3	M
<i>aliskiren</i>	1	M
ALTACE	3	M
<i>amiloride</i>	1	M
<i>amiloride-hydrochlorothiazide</i>	1	M

Drug Name	Drug Tier	Requirements / Limits
<i>amlodipine oral tablet 10 mg, 5 mg</i>	1	M
<i>amlodipine oral tablet 2.5 mg</i>	1	
<i>amlodipine-benazepril</i>	1	M
<i>amlodipine-olmesartan</i>	1	M
<i>amlodipine-valsartan</i>	1	M
<i>amlodipine-valsartan-hcthiazyd</i>	1	M
ATACAND	E	M
ATACAND HCT	E	M
<i>atenolol</i>	1	M
<i>atenolol-chlorthalidone</i>	1	M
AVALIDE	E	M
AVAPRO	E	M
AZOR	E	M
<i>benazepril</i>	1	M
<i>benazepril-hydrochlorothiazide oral tablet 10-12.5 mg</i>	1	
<i>benazepril-hydrochlorothiazide oral tablet 20-12.5 mg, 20-25 mg, 5-6.25 mg</i>	1	M
BENICAR	E	M
BENICAR HCT	E	M
<i>betaxolol</i>	1	M
BIDIL	E	M

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Drug Name	Drug Tier	Requirements / Limits
<i>bisoprolol fumarate</i>	1	M
<i>bisoprolol-hydrochlorothiazide</i>	1	M
BREVIBLOC	3	
BREVIBLOC IN NACL (ISO-OSM)	3	
<i>bumetanide injection</i>	1	
<i>bumetanide oral</i>	1	M
BYSTOLIC ORAL TABLET 10 MG, 2.5 MG, 5 MG	E	M
BYSTOLIC ORAL TABLET 20 MG	E	
<i>candesartan</i>	1	M
<i>candesartan-hydrochlorothiazid</i>	1	M
<i>captopril</i>	1	M
<i>captopril-hydrochlorothiazide</i>	1	M
CARDIZEM	3	M
CARDIZEM CD	3	M
CARDIZEM LA	3	M
CARDURA ORAL TABLET 1 MG, 4 MG, 8 MG	3	M; QL
CARDURA ORAL TABLET 2 MG	3	QL
CARDURA XL ORAL TABLET EXTENDED RELEASE 24HR 4 MG	3	M; QL

Drug Name	Drug Tier	Requirements / Limits
CARDURA XL ORAL TABLET EXTENDED RELEASE 24HR 8 MG	3	QL
CAROSPIR	E	M
<i>cartia xt</i>	1	M
<i>carvedilol</i>	1	M
<i>carvedilol phosphate</i>	1	M
CATAPRES-TTS-1	3	M; QL
CATAPRES-TTS-2	3	M; QL
CATAPRES-TTS-3	3	M; QL
<i>chlorothiazide sodium</i>	1	
<i>chlorthalidone</i>	1	M
<i>clonidine</i>	1	M; QL
<i>clonidine hcl oral tablet</i>	1	M
CLONIDINE HCL ORAL TABLET EXTENDED RELEASE 24 HR	E	M
CONJUPRI	E	M
CONSENSI	3	
COREG	E	M
COREG CR	3	M
CORGARD	3	M
COZAAR	E	M
DEMSER	3	ST
DIBENZYLINE	3	ST; M
<i>diltiazem</i>	1	M
<i>dilt-xr</i>	1	M
DIOVAN	E	M

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Drug Name	Drug Tier	Requirements / Limits
DIOVAN HCT	E	M
DIURIL	3	M
<i>doxazosin</i>	1	M; QL
DYRENIUM	3	M
EDARBI	E	M
EDARBYCLOR	E	M
EDECIN	3	ST; M
<i>enalapril maleate</i>	1	M
<i>enalaprilat</i>	1	
<i>enalapril-hydrochlorothiazide</i>	1	M
EPANED	E	M
<i>eplerenone</i>	1	
<i>epoprostenol</i>	1	ST; SP
<i>eprosartan</i>	1	M
<i>esmolol</i>	1	
<i>esmolol in nacl (iso-osm)</i>	1	
ESMOLOL IN STERILE WATER	3	
<i>ethacrynate sodium</i>	1	
<i>ethacrynic acid</i>	1	M
EXFORGE	E	M
EXFORGE HCT	E	M
<i>felodipine</i>	1	M
FLOLAN	2	ST; SP
<i>fosinopril</i>	1	M
<i>fosinopril-hydrochlorothiazide</i>	1	M
FUROSCIX	E	
FUROSEMIDE IN 0.9 % NACL	3	

Drug Name	Drug Tier	Requirements / Limits
<i>furosemide injection</i>	1	
<i>furosemide oral</i>	1	M
<i>guanfacine</i>	1	M
HEMANGEOL	E	SP; M
<i>hydralazine injection</i>	1	
<i>hydralazine oral</i>	1	M
<i>hydrochlorothiazide</i>	1	M
HYZAAR	E	M
<i>indapamide</i>	1	M
INDERAL LA	E	M
INDERAL XL	E	M
INNOPRAN XL	E	M
INSPRA	3	M
<i>irbesartan</i>	1	
<i>irbesartan-hydrochlorothiazide</i>	1	M
<i>isosorbide-hydralazine</i>	1	M
<i>isradipine</i>	1	M
KAPSPARGO SPRINKLE	E	M
KATERZIA	E	M
KERENDIA	2	ST; M; QL
LABETALOL IN NACL (ISO-OSMOT)	3	
<i>labetalol intravenous solution</i>	1	
LABETALOL INTRAVENOUS SYRINGE	3	
<i>labetalol oral</i>	1	M

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Drug Name	Drug Tier	Requirements / Limits
LASIX	3	ST; M
LEVAMLODIPINE	E	M
<i>lisinopril</i>	1	M
<i>lisinopril-hydrochlorothiazide</i>	1	M
LOPRESSOR	3	M
<i>losartan</i>	1	M
<i>losartan-hydrochlorothiazide</i>	1	M
LOTENSIN	3	M
LOTENSIN HCT	3	M
LOTREL	E	M
<i>matzim la</i>	1	M
<i>methyl dopa</i>	1	M
<i>methyl dopa-hydrochlorothiazide</i>	1	M
<i>methyl dopate</i>	1	
<i>metolazone</i>	1	M
<i>metoprolol succinate</i>	1	M
<i>metoprolol tartrate hydrochlorothiaz</i>	1	M
<i>metoprolol tartrate intravenous</i>	1	
<i>metoprolol tartrate oral</i>	1	M
<i>metyrosine</i>	1	ST
MICARDIS	E	M
MICARDIS HCT	E	M
<i>minoxidil</i>	1	M
<i>moexipril</i>	1	M
<i>nadolol</i>	1	M
<i>nebivolol</i>	1	M

Drug Name	Drug Tier	Requirements / Limits
NEXICLON XR	E	M
<i>nicardipine</i>	1	M
<i>nifedipine</i>	1	M
<i>nimodipine</i>	1	M
<i>nisoldipine</i>	1	M
NORLIQVA	E	M
NORVASC	E	M
NYMALIZE	3	
<i>olmesartan oral tablet 20 mg</i>	1	
<i>olmesartan oral tablet 40 mg, 5 mg</i>	1	M
<i>olmesartan-amlodipin-hcthiiazid</i>	1	M
<i>olmesartan-hydrochlorothiazide</i>	1	M
ORENITRAM	3	ST; SP; QL
ORENITRAM MONTH 1 TITRATION KT	3	ST; SP; QL
ORENITRAM MONTH 2 TITRATION KT	3	ST; SP; QL
ORENITRAM MONTH 3 TITRATION KT	3	ST; SP; QL
<i>papaverine</i>	1	
<i>perindopril erbumine</i>	1	M
<i>phenoxybenzamine</i>	1	ST; M
<i>pindolol</i>	1	M
<i>prazosin</i>	1	M
PRESTALIA	3	M

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Drug Name	Drug Tier	Requirements / Limits
PROCARDIA XL	3	M
<i>propranolol intravenous</i>	1	
<i>propranolol oral</i>	1	M
<i>propranolol-hydrochlorothiazid</i>	1	M
QBRELIS	E	M
<i>quinapril</i>	1	M
<i>quinapril-hydrochlorothiazide</i>	1	M
<i>ramipril</i>	1	M
REMODULIN	3	ST; SP
SOAANZ	E	M
SODIUM EDECIN	3	
<i>spironolactone</i>	1	M
<i>spironolacton-hydrochlorothiaz</i>	1	M
SULAR	3	M
TEKTURNA	E	M
<i>telmisartan</i>	1	M
<i>telmisartan-amlodipine</i>	1	M
<i>telmisartan-hydrochlorothiazid</i>	1	M
TENORETIC 100	3	M
TENORETIC 50	3	M
TENORMIN	3	M
<i>terazosin</i>	1	M; QL
THALITONE	E	M
<i>tiadylt er</i>	1	M
TIAZAC	3	M

Drug Name	Drug Tier	Requirements / Limits
<i>timolol maleate</i>	1	M
TOPROL XL	E	M
<i>torse mide</i>	1	M
<i>trandolapril</i>	1	M
<i>trandolapril-verapamil</i>	1	M
<i>treprostinil sodium</i>	1	ST; SP
<i>triamterene</i>	1	M
<i>triamterene-hydrochlorothiazid</i>	1	M
TRIBENZOR	E	M
UPTRAVI INTRAVENOUS	3	SP
UPTRAVI ORAL	2	ST; SP; QL
VALSARTAN ORAL SOLUTION	E	M
<i>valsartan oral tablet</i>	1	M
<i>valsartan-hydrochlorothiazide</i>	1	M
VASERETIC	3	M
VASOTEC	3	M
<i>veletri</i>	1	ST; SP
<i>verapamil</i>	1	M
VERELAN PM	3	M
ZESTORETIC	3	M
ZESTRIL	3	M
CARDIAC GLYCOSIDES		
<i>digoxin</i>	1	M
LANOXIN	3	M
COAGULATION THERAPY		
ADVATE	2	ST; SP

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Drug Name	Drug Tier	Requirements / Limits
ADYNOVATE	2	ST; SP
ADZYNMA	3	PA; ST; SP
AFSTYLA	2	ST; SP
AGGRASTAT CONCENTRATE	3	
ALPHANATE	2	ST; SP
ALPHANINE SD	2	ST; SP
ALPROLIX	2	ST; SP
ALTUVIII	2	ST; SP
ALVAIZ	E	SP
AMICAR	3	
<i>aminocaproic acid</i>	1	
ANDEXXA	3	
ANGIOMAX	3	
ARGATROBAN	3	
<i>argatroban in 0.9 % sod chlor</i>	1	
ARIXTRA	3	SP
<i>aspirin-dipyridamole</i>	1	M
ASPIRIN- OMEPRAZOLE	E	
BALFAXAR	3	
BENEFIX	2	ST; SP
<i>bivalirudin intravenous recon soln</i>	1	
BIVALIRUDIN INTRAVENOUS SOLUTION	3	
BRILINTA	2	M
CABLIVI	2	PA; ST; SP

Drug Name	Drug Tier	Requirements / Limits
CEPROTIN (BLUE BAR)	2	ST; SP
CEPROTIN (GREEN BAR)	2	ST; SP
<i>cilostazol</i>	1	M
<i>clopidogrel</i>	1	M
COAGADEX	2	ST; SP
CORIFACT	2	ST; SP
CYKLOKAPRON	3	
<i>dabigatran etexilate oral capsule 110 mg</i>	1	
<i>dabigatran etexilate oral capsule 150 mg, 75 mg</i>	1	M
DEFITELIO	3	
<i>dipyridamole</i>	1	M
DOPTELET (15 TAB PACK)	2	PA; ST; SP; QL
EFFIENT	3	M
ELIQUIS	2	M
ELIQUIS DVT-PE TREAT 30D START	2	M
ELOCTATE	2	ST; SP
<i>enoxaparin</i>	1	SP
ENOXILUV	E	
<i>eptifibatide</i>	1	
ESPEROCT	2	ST; SP
FEIBA NF	2	ST; SP
FIBRYGA	3	ST; SP
<i>fondaparinux</i>	1	SP
FRAGMIN	2	SP
HEMGENIX	2	ST; SP

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Drug Name	Drug Tier	Requirements / Limits
HEMLIBRA	2	ST; SP
HEMOFIL M HIGH	2	ST; SP
HEMOFIL M LOW	2	ST; SP
HEMOFIL M MID	2	ST; SP
HEMOFIL M SUPER HIGH	2	ST; SP
<i>hep flush-10 (pf)</i>	1	
<i>heparin (porcine)</i>	1	
HEPARIN (PORCINE) IN 0.9% NACL	3	
<i>heparin (porcine) in 5 % dex</i>	1	
<i>heparin (porcine) in nacl (pf) intravenous parenteral solution</i>	1	
HEPARIN (PORCINE) IN NACL (PF) INTRAVENOUS SYRINGE	E	
<i>heparin lock flush (porcine)</i>	1	
<i>heparin lockflush (porcine)(pf)</i>	1	
HEPARIN(PORCINE) IN 0.45% NACL INTRAVENOUS PARENTERAL SOLUTION 12,500 UNIT/250 ML	3	

Drug Name	Drug Tier	Requirements / Limits
<i>heparin(porcine) in 0.45% nacl intravenous parenteral solution 25,000 unit/250 ml, 25,000 unit/500 ml</i>	1	
<i>heparin, porcine (pf) injection solution</i>	1	
<i>heparin, porcine (pf) injection syringe 5,000 unit/0.5 ml</i>	1	
HEPARIN, PORCINE (PF) INJECTION SYRINGE 5,000 UNIT/ML	3	
<i>heparin, porcine (pf) intravenous</i>	1	
HEPARIN, PORCINE (PF) SUBCUTANEOUS	3	
HUMATE-P	2	ST; SP
IDELVION	3	ST; SP
IXINITY	E	SP
<i>jantoven</i>	1	
JIVI	2	ST; SP
KCENTRA	3	
KENGREAL	3	
KOATE	3	ST; SP
KOGENATE FS	2	ST; SP
KOVALTRY	2	ST; SP
LOVENOX	E	SP
MULPLETA	E	SP
NOVOEIGHT	2	ST; SP

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Drug Name	Drug Tier	Requirements / Limits
NOVOSEVEN RT	E	SP
NPLATE	2	PA; ST; SP
NUWIQ	E	SP
OBIZUR	2	SP
<i>pentoxifylline</i>	1	M
PHYTONADIONE (VITAMIN K1) INJECTION SOLUTION 1 MG/0.5 ML	2	
<i>phytonadione (vitamin k1) injection solution 10 mg/ml</i>	1	
PHYTONADIONE (VITAMIN K1) INJECTION SYRINGE	2	
PHYTONADIONE (VITAMIN K1) ORAL TABLET 100 MCG	E	
<i>phytonadione (vitamin k1) oral tablet 5 mg</i>	1	QL
PLAVIX	E	M
PRADAXA ORAL CAPSULE	E	M
PRADAXA ORAL PELLETS IN PACKET	E	SP
<i>prasugrel</i>	1	M
PRAXBIND	3	
PROFILNINE	2	ST; SP
PROMACTA	2	PA; ST; SP

Drug Name	Drug Tier	Requirements / Limits
<i>protamine</i>	1	
REBINYN	E	SP
RECOMBINATE	E	SP
RIASTAP	2	ST; SP
RIXUBIS	E	SP
ROCTAVIAN	2	ST; SP
SAVAYSA	E	M
SEVENFACT	2	ST; SP
TAVALISSE	2	PA; ST; SP; QL
<i>tirofiban-0.9% sodium chloride</i>	1	
<i>tranexamic acid</i>	1	
<i>tranexamic acid in nacl,iso-os</i>	1	
TRETTEN	2	ST; SP
<i>vitamin k</i>	1	
<i>vitamin k1</i>	1	
VONVENDI	2	ST; SP
<i>warfarin</i>	1	
WILATE	2	ST; SP
XARELTO	2	M
XARELTO DVT-PE TREAT 30D START	2	
XYNTHA	2	ST; SP
XYNTHA SOLOFUSE	2	ST; SP
YOSPRALA	E	
ZONTIVITY	3	ST; M
LIPID/CHOLESTEROL LOWERING AGENTS		
ALTOPREV	E	M

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Drug Name	Drug Tier	Requirements / Limits
<i>amlodipine-atorvastatin</i>	1	M; QL
ATORVALIQ	E	M
<i>atorvastatin oral tablet 10 mg, 20 mg</i>	0	M; ACA; QL
<i>atorvastatin oral tablet 40 mg, 80 mg</i>	1	M; QL
CADUET ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-80 MG, 5-40 MG, 5-80 MG	3	ST; M; QL
CADUET ORAL TABLET 5-10 MG, 5-20 MG	3	ST; QL
<i>cholestyramine (with sugar)</i>	1	M
<i>cholestyramine light</i>	1	M
<i>colesevelam</i>	1	M
COLESTID	3	M
<i>colestipol</i>	1	M
CRESTOR	E	M
EVKKEEZA	3	ST; SP
EZALLOR SPRINKLE	E	M
<i>ezetimibe</i>	1	M
EZETIMIBE-ROSUVASTATIN	E	M
<i>ezetimibe-simvastatin</i>	1	M; QL
<i>fenofibrate micronized oral capsule 130 mg, 134 mg, 200 mg, 43 mg, 67 mg</i>	1	M

Drug Name	Drug Tier	Requirements / Limits
FENOFIBRATE MICRONIZED ORAL CAPSULE 90 MG	E	M
<i>fenofibrate nanocrystallized</i>	1	M
FENOFIBRATE ORAL CAPSULE	E	M
<i>fenofibrate oral tablet 120 mg, 40 mg</i>	1	ST; M
<i>fenofibrate oral tablet 160 mg, 54 mg</i>	1	M
<i>fenofibric acid</i>	1	M
<i>fenofibric acid (choline)</i>	1	M
FENOGLIDE	3	ST; M
FIBRICOR	3	ST; M
FLOLIPID	3	ST; M; QL
<i>fluvastatin</i>	0	M; QL
<i>gemfibrozil</i>	1	M
<i>icosapent ethyl</i>	1	PA; M
JUXTAPID	2	ST; SP
LEQVIO	E	SP
LESCOL XL	3	ST; M; QL
LIPITOR	E	M
LIPOFEN	E	M
LIVALO	2	ST; M; QL
LOPID	3	M
<i>lovastatin</i>	0	M; ACA; QL
LOVAZA	E	M
NEXLETOL	2	ST; M
NEXLIZET	2	ST; M

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Drug Name	Drug Tier	Requirements / Limits
<i>niacin</i>	1	M
NIACOR	3	M
<i>omega-3 acid ethyl esters</i>	1	PA; M
<i>pitavastatin calcium</i>	0	QL
PRALUENT PEN	E	
<i>pravastatin oral tablet 10 mg, 20 mg, 40 mg</i>	0	M; QL
<i>pravastatin oral tablet 80 mg</i>	0	QL
<i>prevalite</i>	1	M
QUESTRAN	3	M
QUESTRAN LIGHT	3	M
REPATHA PUSHTRONEX	2	ST; QL
REPATHA SURECLICK	2	ST; QL
REPATHA SYRINGE	2	ST; QL
<i>rosuvastatin oral tablet 10 mg, 5 mg</i>	0	M; QL
<i>rosuvastatin oral tablet 20 mg, 40 mg</i>	1	M; QL
ROSZET	3	ST; M; QL
<i>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	0	M; ACA; QL
<i>simvastatin oral tablet 80 mg</i>	1	M; QL
TRICOR	E	M
TRILIPIX	3	ST; M
VASCEPA	2	PA; M

Drug Name	Drug Tier	Requirements / Limits
VYTORIN 10-10	E	M
VYTORIN 10-20	E	M
VYTORIN 10-40	E	M
VYTORIN 10-80	E	M
WELCHOL	E	M
ZETIA	E	M
ZOCOR	E	M
ZYPITAMAG	3	ST; M; QL
MISCELLANEOUS CARDIOVASCULAR AGENTS		
ASPRUZYO SPRINKLE	E	M
CAMZYOS	2	ST; SP; QL
CORLANOR ORAL SOLUTION	E	SP
CORLANOR ORAL TABLET	E	M
ENTRESTO	2	M; QL
FILSPARI	E	SP
GIAPREZA	3	
<i>isoproterenol hcl</i>	1	
LODOCO	E	M
<i>ranolazine</i>	1	M
VERQUVO	2	M; QL
VYNDAMAX	2	ST; SP
VYNDAQEL	2	ST; SP
NITRATES		
GONITRO	3	
ISORDIL	3	M
ISORDIL TITRADOSE	3	M

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Drug Name	Drug Tier	Requirements / Limits
<i>isosorbide dinitrate</i>	1	M
<i>isosorbide mononitrate</i>	1	M
<i>nitro-bid</i>	1	M
NITRO-DUR	3	M
<i>nitroglycerin sublingual</i>	1	
<i>nitroglycerin transdermal</i>	1	M
<i>nitroglycerin translingual</i>	1	M
NITROLINGUAL	3	M
NITROMIST	3	
NITROSTAT	3	
<i>nitro-time oral capsule, extended release 2.5 mg</i>	1	
<i>nitro-time oral capsule, extended release 6.5 mg, 9 mg</i>	1	M

DERMATOLOGICALS/TOPICAL THERAPY

ANTIPSORIATIC / ANTISEBORRHEIC

<i>acitretin</i>	1	
ANALPRAM-HC	3	ST
BIMZELX	E	SP
BIMZELX AUTOINJECTOR	E	SP
<i>calcipotriene scalp</i>	1	QL
<i>calcipotriene topical cream</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
CALCIPOTRIENE TOPICAL FOAM	E	
<i>calcipotriene topical ointment</i>	1	QL
<i>calcipotriene-betamethasone topical ointment</i>	1	ST; QL
<i>calcipotriene-betamethasone topical suspension</i>	1	QL
<i>calcitriol</i>	1	
<i>calsodore</i>	E	
CALSODORE KIT	E	
COSENTYX	E	SP
COSENTYX (2 SYRINGES)	E	SP
COSENTYX PEN	E	SP
COSENTYX PEN (2 PENS)	E	SP
COSENTYX UNOREADY PEN	E	SP
DIOCHLOY	E	
DIOOXIA	E	
<i>drithocrema hp</i>	E	
ENSTILAR	2	ST; QL
EPIFOAM	3	ST
HYDROCORTISON E-PRAMOXINE TOPICAL CREAM 2.35-1 %	E	
<i>hydrocortisone-pramoxine topical cream 2.5-1 %</i>	1	ST
ILUMYA	E	SP

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Drug Name	Drug Tier	Requirements / Limits
OVACE	3	
OVACE PLUS	3	
OVACE PLUS SHAMPOO	3	
OVACE PLUS WASH	3	
PLEXION NS	3	
PRAMOSONE	3	ST
SCYTERA	E	
<i>selenium sulfide</i>	1	
SILIQ	E	SP
SKYRIZI	2	ST; SP; QL
SORILUX	E	
SOTYKTU	E	SP
SPEVIGO INTRAVENOUS	2	PA; ST; SP
SPEVIGO SUBCUTANEOUS	3	PA; ST; SP
STELARA INTRAVENOUS	3	ST; SP
STELARA SUBCUTANEOUS	2	ST; SP; QL
<i>sulfacetamide sodium</i>	1	
TACLONEX	3	QL
TALTZ AUTOINJECTOR	2	ST; SP; QL
TALTZ AUTOINJECTOR (2 PACK)	2	ST; SP; QL
TALTZ AUTOINJECTOR (3 PACK)	2	ST; SP; QL

Drug Name	Drug Tier	Requirements / Limits
TALTZ SYRINGE	2	ST; SP; QL
TERSI FOAM	3	
TREMFYA	2	ST; SP; QL
TRIONEX	E	
VECTICAL	3	
VTAMA	3	ST; QL
WYNZORA	3	ST; QL
ZITHRANOL	E	
ZORYVE TOPICAL CREAM	3	ST; M; QL
ZORYVE TOPICAL FOAM	3	ST; QL
BURN THERAPY		
SILVADENE	3	
<i>silver sulfadiazine</i>	1	
<i>ssd</i>	1	
KERATOLYTICS		
<i>keralyt</i>	E	
KERALYT RX	E	
KERALYT SCALP	E	
KERALYT SCALP COMPLETE	E	
NENDRUX	E	
PODOCON	E	
RAYASAL	E	
SALICATE	E	
<i>salicylic acid</i>	E	
<i>salicylic acid-ceramides no.1</i>	E	
<i>salimez</i>	E	
SALIMEZ FORTE	E	

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
<i>salvax</i>	E	
SALVAX DUO PLUS	E	
<i>salycim</i>	E	
<i>salyntra</i>	E	
ULTRASAL-ER	E	
VIRASAL	E	
XALIX	E	
MISCELLANEOUS DERMATOLOGICALS		
ADBRY	2	ST; SP; QL
AMELUZ	3	
<i>ammonium lactate</i>	E	
ATRAPRO CP	E	
ATRAPRO HYDROGEL	E	
<i>avo cream</i>	E	
BIAFINE EMULSION	E	
CANTHARIDIN IN ACETONE	3	
CARAC	E	
<i>celacyn</i>	E	
<i>cem-urea</i>	E	
CERACADE	E	
CERAMAX	E	
CIBINQO	2	ST; QL
CONDYLOX	E	
CORTANE-B	3	
DEXERYL	E	
<i>diclofenac sodium</i>	1	PA; QL

Drug Name	Drug Tier	Requirements / Limits
<i>doxepin</i>	1	ST; QL
DRYSOL DAB-O-MATIC	E	
DUPIXENT PEN	2	ST; QL
DUPIXENT SYRINGE	2	ST; QL
EFUDEX	3	
ELIDEL	E	
<i>emulsion sb</i>	E	
ENTTY	E	
EPICERAM	E	
EUCRISA	3	ST; QL
FLUOROPLEX	3	
FLUOROURACIL TOPICAL CREAM 0.5 %	E	
<i>fluorouracil topical cream 5 %</i>	1	
<i>fluorouracil topical solution</i>	1	
HALUCORT	E	
HAPRODERM	E	
<i>hpr</i>	E	
<i>hpr plus</i>	E	
<i>hpr plus hydrogel</i>	E	
HPR PLUS-MB HYDROGEL	E	
HYDRO 35	E	
HYDRO 40	E	
HYFTOR	3	ST; SP
HYLATOPICPLUS	E	
IODOFLEX	3	

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
IODOSORB	3	
KERASTAT	E	
LEVICYN ANTIPRURITIC	E	
LEVICYN ANTIPRURITIC SG	E	
LEVULAN	3	
LOUTREX	E	
LOYON	E	
LUXAMEND	E	
<i>mb hydrogel</i>	E	
<i>mb hydrogel (cyclomethicone)</i>	E	
METDRAY	E	
<i>methoxsalen</i>	1	
<i>methyl salicylate</i>	1	
MIMYX	E	
NEOSALUS	E	
NUJO	E	
NUJU	E	
NUTRASEB	E	
OPZELURA	3	ST; QL
OXIANUJO	E	
OXIANUJO (WITH HYALURONATE)	E	
PANRETIN	3	ST
PHEODOYO	E	
<i>pimecrolimus</i>	1	ST; QL
<i>podofilox topical gel</i>	1	ST; QL
<i>podofilox topical solution</i>	1	
PRESERA	E	

Drug Name	Drug Tier	Requirements / Limits
PROMISEB	E	
PRONAL	E	
<i>pruclair</i>	E	
<i>prudoxin</i>	1	ST; QL
<i>prumyx</i>	E	
QBREXZA	E	
QUTENZA	E	SP
REGRANEX	2	QL
RYNODERM	E	
SCENESSE	3	PA; ST; SP
SEBUDERM	E	
<i>silver nitrate</i>	E	
<i>silver nitrate applicators</i>	E	
SOLOX GEL	E	
<i>sonafine</i>	E	
<i>tacrolimus</i>	1	ST; QL
TOLAK	3	
URAMAXIN	E	
<i>urea nail stick</i>	E	
<i>urea topical cream 39 %, 40 %, 41 %, 45 %, 47 %, 50 %</i>	E	
UREA TOPICAL CREAM 39.5 %	E	
<i>urea topical foam</i>	E	
<i>urea topical gel</i>	E	
<i>ure-k</i>	E	
UVADEX	2	
VALCHLOR	2	ST; SP
VEREGEN	E	

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
VYJUVEK	3	PA; ST; SP
<i>wintergreen oil</i>	1	
XCLAIR	E	
XUREA	E	
YCANTH	E	SP
ZONALON	3	ST; QL
THERAPY FOR ACNE		
ABSORICA	3	
ABSORICA LD	E	
ACANYA	E	
<i>acutane</i>	1	
ACIOXIAY	E	
ACZONE	3	ST
ADAINZDE	E	
ADAINZOXIA	E	
<i>adapalene topical cream</i>	1	
<i>adapalene topical gel 0.1 %</i>	E	
<i>adapalene topical gel 0.3 %</i>	1	
<i>adapalene topical gel with pump</i>	1	
ADAPALENE TOPICAL LOTION	3	ST
<i>adapalene topical solution</i>	1	
<i>adapalene topical swab</i>	1	ST
<i>adapalene-benzoyl peroxide</i>	1	
ADEINZDE	E	

Drug Name	Drug Tier	Requirements / Limits
AKLIEF	3	ST
ALTRENO	3	
<i>amnestem</i>	1	
AMZEEQ	3	ST
ARAZLO	3	PA; ST
ATRALIN	E	
<i>avar</i>	1	
AVAR LS	3	ST
AVAR-E GREEN	3	ST
AVAR-E LS	3	ST
AVEIDA	E	
AVEIDAOXIA	E	
<i>azelaic acid</i>	1	
AZELEX	3	ST
BENZAMYCIN	3	ST
<i>benzepro</i>	1	
BENZEPRO (MICROSPHERES)	3	ST
<i>benzoyl peroxide</i>	1	
<i>bp 10-1</i>	1	ST
<i>brimonidine</i>	1	ST
CABTREO	E	
<i>claravis</i>	1	
<i>cleansing wash</i>	E	
CLENIA PLUS	E	
CLEOCIN T	3	ST; QL
<i>clindacin</i>	1	QL
CLINDACIN ETZ TOPICAL KIT	3	ST
<i>clindacin etz topical swab</i>	1	

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
<i>clindacin p</i>	1	
CLINDACIN PAC	3	ST
CLINDAGEL	E	
<i>clindamycin phosphate topical foam</i>	1	QL
<i>clindamycin phosphate topical gel</i>	1	QL
<i>clindamycin phosphate topical gel, once daily</i>	1	ST; QL
<i>clindamycin phosphate topical lotion</i>	1	QL
<i>clindamycin phosphate topical solution</i>	1	QL
<i>clindamycin phosphate topical swab</i>	1	
<i>clindamycin-benzoyl peroxide</i>	1	
<i>clindamycin-tretinoin</i>	1	
<i>dapsone</i>	1	
DAZAVEIDAOXIA	E	
DAZOMON	E	
DEOXIA	E	
DEOXIADEMTAR	E	
DEOXIATAR	E	
DEOXIAVAR	E	
DIADIMAXIA	E	
DIAOXIA	E	

Drug Name	Drug Tier	Requirements / Limits
DIASAXIATAR	E	
DIASDIMAXIA	E	
DIASOXIA	E	
DIFFERIN TOPICAL CREAM	3	ST
DIFFERIN TOPICAL GEL	E	
DIFFERIN TOPICAL GEL WITH PUMP	3	ST
DIFFERIN TOPICAL LOTION	3	ST
DIMOXIA	E	
DRAXACE	E	
DRAXACEY	E	
DRIXECE	E	
ECEOXIA	E	
EPIDUO FORTE	3	ST
EPSOLAY	3	ST
<i>ery pads</i>	1	
<i>erygel</i>	1	
<i>erythromycin with ethanol</i>	1	
<i>erythromycin-benzoyl peroxide</i>	1	
ETHOXIA	E	
EVOCLIN	3	ST; QL
FABIOR	E	
FINACEA	2	ST
IDARAN	E	
IDYYXIATAR	E	
INZDEAXIATAR	E	

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Drug Name	Drug Tier	Requirements / Limits
INZDEAXIAVAR	E	
INZDEOXIA	E	
<i>isotretinoin</i>	1	
ITHOXIA	E	
<i>ivermectin</i>	1	QL
METROCREAM	3	ST
METROGEL	3	ST
<i>metronidazole</i>	1	
MIRVASO	2	ST
<i>neuc</i>	1	
NEUAC KIT	3	ST
NORITATE	E	
ONEXTON	2	ST
ONZDEAXIADEM TAR	E	
ONZDEAXIADEM VAR	E	
ONZDEAXIATAR	E	
ONZDEAXIAVAR	E	
ONZDEAXIAZAR	E	
ONZDEOXIA	E	
OXIAICE	E	
OXIATAR	E	
OXIAVAR	E	
OXIAVARRY	E	
OXIAVARY	E	
OXIAZAR	E	
PACNEX	3	ST
PLEXION	3	ST

Drug Name	Drug Tier	Requirements / Limits
PLEXION	3	ST
CLEANSING CLOTHS		
PR BENZOYL PEROXIDE	3	ST
<i>refissa</i>	E	
RENOVA	E	
RETIN-A	3	
RETIN-A MICRO	E	
RETIN-A MICRO PUMP TOPICAL GEL WITH PUMP 0.04 %, 0.08 %, 0.1 %	E	
RETIN-A MICRO PUMP TOPICAL GEL WITH PUMP 0.06 %	3	
RHOFADE	3	ST
<i>rosadan topical cream</i>	1	
<i>rosadan topical gel</i>	1	
ROSADAN TOPICAL KIT, CLEANSER AND GEL	3	ST
ROSADAN TOPICAL KIT, CLEANSER AND CREAM	3	ST
ROSULA	3	ST
<i>rosula cleansing cloths</i>	1	
SAROXIA	E	
SOOLANTRA	3	ST; QL

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
<i>sss 10-5</i>	1	
<i>sulfacetamide sodium-sulfur topical cleanser 10-2 %, 10-5 % (w/w), 9-4 %, 9-4.5 %, 9.8-4.8 %</i>	1	
SULFACETAMIDE SODIUM-SULFUR TOPICAL CLEANSER 8-4 %	E	
<i>sulfacetamide sodium-sulfur topical cream</i>	1	
<i>sulfacetamide sodium-sulfur topical lotion</i>	1	
<i>sulfacetamide sodium-sulfur topical pads, medicated</i>	1	
<i>sulfacetamide sodium-sulfur topical suspension 10-5 %, 8-4 %</i>	1	
SULFACETAMIDE SODIUM-SULFUR TOPICAL SUSPENSION 9-4.25 %	E	
<i>sulfacetamide sod-sulfur-urea</i>	E	
<i>sulfacleanse 8-4</i>	1	ST
SUMADAN	3	ST
SUMADAN XLT	3	ST
SUMAXIN	3	ST
SUMAXIN CP	3	ST

Drug Name	Drug Tier	Requirements / Limits
SUMAXIN TS	3	ST
TARDEOXIA	E	
TARDIMAXIA	E	
TAROXIA	E	
<i>tazarotene topical cream</i>	1	PA; ST
TAZAROTENE TOPICAL FOAM	E	
<i>tazarotene topical gel</i>	1	PA; ST
TAZORAC	E	
<i>tretinoin</i>	1	
<i>tretinoin (emollient)</i>	E	
<i>tretinoin microspheres</i>	1	
TWYNEO	3	ST
VANOXIDE-HC	3	ST
VARDIMAXIA	E	
VAROXIA	E	
VELTIN	E	
WINLEVI	E	
<i>zenatane</i>	1	
ZIANA	3	ST
ZILXI	E	
ZMA CLEAR	E	
TOPICAL ANESTHETICS		
AGONEAZE	E	
ANASTIA	E	
ANODYNE LPT	E	
APRIZIO PAK	E	
ASTERO	E	

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Drug Name	Drug Tier	Requirements / Limits
<i>bupivacaine (pf)</i>	1	
<i>bupivacaine-epinephrine (pf)</i>	1	
<i>chloroprocaine (pf)</i>	1	
COCAINE	3	
<i>dermacinrx lidocan</i>	1	ST
DERMACINRX LIDOGEL	E	
DERMACINRX LIDOREX	E	
<i>dermacinrx prizopak</i>	E	
DOLOTRANZ	E	
<i>emreal</i>	E	
<i>ethyl chloride</i>	E	
EXPAREL (PF)	3	
GOPRELTO	3	
LDO PLUS	E	
<i>lidocaine (pf)</i>	1	
<i>lidocaine hcl injection</i>	1	
<i>lidocaine hcl laryngotracheal</i>	1	
<i>lidocaine hcl mucous membrane</i>	1	
<i>lidocaine hcl topical</i>	E	
<i>lidocaine hcl-hydrocortison ac</i>	1	
<i>lidocaine topical adhesive patch,medicated</i>	1	ST
<i>lidocaine topical ointment</i>	1	QL
<i>lidocaine viscous</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>lidocaine-epinephrine (pf)</i>	1	
<i>lidocaine-prilocaine topical cream</i>	1	QL
<i>lidocaine-prilocaine topical kit</i>	1	
LIDOCAINE-TETRACAINE	E	
<i>lidocan iii</i>	1	ST
<i>lidocan iv</i>	1	ST
<i>lidocan v</i>	1	ST
<i>lidocort</i>	1	
LIDODERM	E	
<i>lido-k</i>	E	
LIDOLITE	E	
<i>lidopin topical cream 3 %</i>	E	
LIDOPIN TOPICAL CREAM 3.25 %	E	
LIDO-PRILOCAINE PACK	E	
LIDORX	E	
LIDOSOL	E	
<i>lido-sorb</i>	E	
<i>lidotor</i>	E	
LIDOTRAL	E	
<i>lidozion</i>	E	
LIDTOPIC MAX	E	
LIVIXIL PAK	E	
MOXICAINE	E	
NUMBONEX	E	
NYNUTEY	3	

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
PLIAGLIS	E	
<i>polocaine-mpf</i>	1	
PRILO PATCH	E	
<i>priloheal plus 30</i>	E	
PRILOVIX	E	
PRILOVIX LITE PLUS	E	
PRILOVIX ULTRALITE PLUS	E	
REALHEAL-I	E	
<i>ropivacaine (pf)</i>	1	
SKYADERM-LP	E	
TRANZAREL	E	
<i>valladerm-90</i>	E	
XARACOLL	3	
XYLOCAINE-MPF/EPINEPHRIN E	3	
ZILOVAL	E	
<i>zionodil</i>	E	
ZTLIDO	2	ST
TOPICAL ANTIBACTERIALS		
ALCORTIN A	E	
ALTABAX	3	ST; QL
BASADROX	E	
CENTANY	3	ST; QL
CENTANY AT	3	ST; QL
<i>corti-sav</i>	E	
DERMAZENE	E	
<i>gentamicin</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>hydrocortisone-iodoquinl-aloe2</i>	E	
<i>hydrocortisone-iodoquinol</i>	E	
<i>hydrocortisone-iodoquinol-aloe</i>	E	
KLARON	3	ST
<i>lugols</i>	1	
<i>mafenide acetate</i>	1	
<i>mupirocin</i>	1	QL
<i>mupirocin calcium</i>	1	ST; QL
NANRAN	E	
NEO-SYNALAR	3	
NEO-SYNALAR KIT	3	
QUINJA	E	
SILVRSTAT	E	
<i>strong iodine</i>	1	
<i>sulfacetamide sodium (acne)</i>	1	
SULFAMYLON	2	
VYTONE	E	
XEPI	3	ST; QL
TOPICAL ANTIFUNGALS		
CICLODAN KIT TOPICAL COMBO PACK	3	
CICLODAN KIT TOPICAL SOLUTION	3	ST
<i>ciclodan topical cream</i>	1	QL

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Drug Name	Drug Tier	Requirements / Limits
<i>ciclodan topical solution</i>	1	
<i>ciclopirox topical cream</i>	1	QL
<i>ciclopirox topical gel</i>	1	QL
<i>ciclopirox topical shampoo</i>	1	QL
<i>ciclopirox topical solution</i>	1	
<i>ciclopirox topical suspension</i>	1	QL
<i>ciclopirox-ure-camph-menth-euc</i>	1	
<i>clotrimazole</i>	E	
<i>clotrimazole-betamethasone</i>	1	QL
DERMACINRX THERAZOLE PAK	E	
DIFMETIOXRIME	E	
<i>econazole</i>	1	QL
ECOZA	E	
ERTACZO	E	
EXELDERM	3	QL
EXODERM	E	
EXTINA	3	ST; QL
HAXCHLO	E	
HAXCHLODREX	E	
HAXDRAX	E	
HEXIOUNYL	E	
HIXDEFRIMA	E	
IMIOXIA	E	
JUBLIA	3	ST

Drug Name	Drug Tier	Requirements / Limits
<i>ketoconazole topical cream</i>	1	QL
<i>ketoconazole topical foam</i>	1	ST; QL
<i>ketoconazole topical shampoo</i>	1	QL
<i>ketodan</i>	1	ST; QL
<i>ketodan kit</i>	1	ST
<i>klayesta</i>	1	QL
LOPROX (AS OLAMINE)	3	QL
LOPROX KIT	3	QL
LULICONAZOLE	E	
LUZU	E	
MICONAZOLE NITRATE-ZINC OX-PET	E	
<i>naftifine</i>	1	QL
NAFTIN	3	QL
<i>nyamyc</i>	1	QL
<i>nystatin</i>	1	QL
<i>nystatin-triamcinolone</i>	1	QL
<i>nystop</i>	1	QL
<i>oxiconazole</i>	1	QL
OXISTAT	E	
PHEDRAX	E	
PHEOXIA	E	
PHEYO	E	
SULCONAZOLE	E	
<i>tavaborole</i>	1	ST
VUSION	E	

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
XOLEGEL	E	
TOPICAL ANTIVIRALS		
<i>acyclovir</i>	1	ST; QL
DENAVIR	3	
<i>penciclovir</i>	1	
XERESE	E	
ZOVIRAX TOPICAL CREAM	3	ST; QL
ZOVIRAX TOPICAL OINTMENT	E	
TOPICAL CORTICOSTEROIDS		
ACIOXIA	E	
ADVANCED ALLERGY COLLECT KIT	E	
<i>ala-cort</i>	E	
ALA-SCALP	3	ST
<i>alclometasone</i>	1	
<i>amcinonide</i>	1	ST
<i>apexicon e</i>	1	ST
<i>beser</i>	1	ST
BESER KIT	E	
<i>betamethasone dipropionate</i>	1	
<i>betamethasone valerate topical cream</i>	1	
<i>betamethasone valerate topical foam</i>	1	ST

Drug Name	Drug Tier	Requirements / Limits
<i>betamethasone valerate topical lotion</i>	1	
<i>betamethasone valerate topical ointment</i>	1	
<i>betamethasone, augmented</i>	1	
BRYHALI	3	ST
CAPEX	3	ST
CHLOHUX	E	
CHLOOXIA	E	
<i>clobetasol scalp</i>	1	QL
<i>clobetasol topical cream</i>	1	QL
<i>clobetasol topical foam</i>	1	ST; QL
<i>clobetasol topical gel</i>	1	QL
<i>clobetasol topical lotion</i>	1	ST; QL
<i>clobetasol topical ointment</i>	1	QL
<i>clobetasol topical shampoo</i>	1	ST; QL
<i>clobetasol topical spray,non-aerosol</i>	1	ST; QL
<i>clobetasol-emollient topical cream</i>	1	QL
<i>clobetasol-emollient topical foam</i>	1	ST; QL
CLOBEX	3	ST; QL
<i>clocortolone pivalate</i>	1	

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
<i>clodan</i>	1	ST; QL
CLODAN KIT	3	ST; QL
CORDRAN	3	ST; QL
CORDRAN TAPE LARGE ROLL	3	ST
DERMA- SMOOTHE/FS BODY OIL	3	ST
DERMA- SMOOTHE/FS SCALP OIL	3	ST
DERMAWERX SDS	E	
<i>desonide topical cream</i>	1	
<i>desonide topical gel</i>	1	ST
<i>desonide topical lotion</i>	1	ST
<i>desonide topical ointment</i>	1	
<i>desoximetasone</i>	1	ST
<i>diflorasone</i>	1	ST; QL
DIPROLENE (AUGMENTED)	3	ST
DUOBRII	3	ST; QL
ELLZIA PAK	E	
<i>fluocinolone</i>	1	
<i>fluocinolone and shower cap</i>	1	
<i>fluocinonide topical cream 0.05 %</i>	1	QL
<i>fluocinonide topical cream 0.1 %</i>	1	ST; QL

Drug Name	Drug Tier	Requirements / Limits
<i>fluocinonide topical gel</i>	1	QL
<i>fluocinonide topical ointment</i>	1	QL
<i>fluocinonide topical solution</i>	1	QL
<i>fluocinonide-e</i>	1	QL
FLUOPAR	E	
FLUOVIX	E	
FLUOVIX PLUS	E	
FLUOXIA	E	
<i>flurandrenolide</i>	1	ST; QL
<i>fluticasone propionate topical cream</i>	1	
<i>fluticasone propionate topical lotion</i>	1	ST
<i>fluticasone propionate topical ointment</i>	1	
<i>halcinonide</i>	1	ST
<i>halobetasol propionate topical cream</i>	1	
<i>halobetasol propionate topical foam</i>	1	ST
<i>halobetasol propionate topical ointment</i>	1	
HALOG	3	ST
<i>hydrocortisone butyrate topical cream</i>	1	QL

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
<i>hydrocortisone butyrate topical lotion</i>	1	ST; QL
<i>hydrocortisone butyrate topical ointment</i>	1	ST; QL
<i>hydrocortisone butyrate topical solution</i>	1	ST; QL
HYDROCORTISON E LOTION COMPLETE	E	
<i>hydrocortisone topical cream 1 %</i>	E	
<i>hydrocortisone topical cream 2.5 %</i>	1	
<i>hydrocortisone topical lotion</i>	1	
<i>hydrocortisone topical ointment 1 %</i>	E	
<i>hydrocortisone topical ointment 2.5 %</i>	1	
<i>hydrocortisone valerate</i>	1	
HYDROXYM	E	
IMPOYZ	E	
KENALOG	3	ST; QL
LEXETTE	E	
LOCOID	E	
LOCOID LIPOCREAM	E	
MOMETACURE	E	
<i>mometasone</i>	1	
NOXIPAK	E	

Drug Name	Drug Tier	Requirements / Limits
NUCORT	3	ST
OLUX	3	ST; QL
PANDEL	3	ST
<i>prednicarbate</i>	1	
PROCTOCORT	E	
QUINIXIL	E	
<i>scalacort</i>	1	
SCALACORT DK	3	ST
SERNIVO	E	
SURE RESULT TAC PAK	E	
SYNALAR	3	ST
SYNALAR CREAM KIT	3	ST
SYNALAR OINTMENT KIT	3	ST
SYNALAR TS	3	ST
TETOXIA	E	
TEXACORT	3	ST
TOPICORT TOPICAL CREAM	3	ST
TOPICORT TOPICAL GEL	3	ST
TOPICORT TOPICAL OINTMENT	3	ST
TOPICORT TOPICAL SPRAY, NON-AEROSOL	E	
<i>tovet emollient</i>	1	ST; QL
TOVET KIT	E	
TRIADIME	E	
TRIADIME-80	E	

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
<i>triamcinolone acetonide topical aerosol</i>	1	ST; QL
<i>triamcinolone acetonide topical cream</i>	1	
<i>triamcinolone acetonide topical lotion</i>	1	
<i>triamcinolone acetonide topical ointment 0.025 %, 0.1 %, 0.5 %</i>	1	
<i>triamcinolone acetonide topical ointment 0.05 %</i>	1	ST
TRIASIL	E	
<i>triderm topical cream 0.1 %</i>	1	
<i>triderm topical cream 0.5 %</i>	1	ST
TRIHEAL-80	E	
ULTRAVATE	E	
VANOS	E	
VERDESO	E	
WHYTEDERM TDKAK	E	
WHYTEDERM TRILASIL PAK	E	
XILAPAK	E	
TOPICAL ENZYMES		
NEXOBRID	3	
SANTYL	2	QL

Drug Name	Drug Tier	Requirements / Limits
TOPICAL SCABICIDES/ PEDICULICIDES		
<i>crotan</i>	1	
ELIMITE	3	
EURAX	3	
<i>malathion</i>	1	
NATROBA	E	
OVIDE	3	
<i>permethrin</i>	1	
<i>spinosad</i>	1	
ULESFIA	3	
DIAGNOSTICS & MISCELLANEOUS AGENTS		
ANOREXIANTS		
ADIPEX-P	E	
ALLI	E	
<i>benzphetamine</i>	E	
CONTRAVE	E	M
<i>diethylpropion</i>	E	
IMCIVREE	E	SP
LOMAIRA	E	
ORLISTAT	E	M
<i>phendimetrazine tartrate</i>	E	
<i>phentermine</i>	E	
PLENITY (WELCOME KIT)	E	M
QSYMIA	E	
SAXENDA	E	

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
WEGOVY SUBCUTANEOUS PEN INJECTOR 0.25 MG/0.5 ML, 0.5 MG/0.5 ML, 1 MG/0.5 ML, 1.7 MG/0.75 ML	E	
WEGOVY SUBCUTANEOUS PEN INJECTOR 2.4 MG/0.75 ML	E	M
XENICAL	E	M
ZEPBOUND	E	
ANTIDOTES		
PROVAYBLUE	3	
IRRIGATING SOLUTIONS		
<i>lactated ringers</i>	1	
<i>neomycin-polymyxin b gu</i>	1	
PHYSIOLYTE	3	
PHYSIOSOL IRRIGATION	3	
<i>ringer's</i>	1	
SORBITOL	3	
SORBITOL- MANNITOL	3	
<i>tis-u-sol pentalyte</i>	1	
VASHE	E	
MISCELLANEOUS AGENTS		
<i>acamprosate</i>	1	
<i>acetic acid</i>	1	
AGRYLIN	3	M
AMMONUL	3	

Drug Name	Drug Tier	Requirements / Limits
AMPHADASE	3	
<i>anagrelide</i>	1	
ARALAST NP	2	ST; SP
BUPHENYL	3	ST; SP
<i>caffeine citrate</i>	1	
CARBAGLU	2	ST; SP
<i>carglumic acid</i>	1	ST; SP
CARNITOR (SUGAR-FREE)	3	M
CARNITOR INTRAVENOUS	3	
CARNITOR ORAL	3	M
<i>cevimeline</i>	1	M
CHEMET	2	ST
<i>curity sterile water</i>	E	
CUVRIOR	E	SP
DEFENCATH	3	
<i>deferasirox</i>	1	ST; SP
<i>deferiprone</i>	1	ST; SP
<i>disulfiram</i>	1	
<i>droxidopa</i>	1	ST; SP
EMPAVELI	2	PA; ST; SP
ENDARI	3	ST; SP
ENJAYMO	2	PA; ST; SP
EVOXAC	3	M
EXJADE	E	SP
EXSERVAN	3	ST; SP
FABHALTA	2	PA; ST; SP
FERRIPROX (2 TIMES A DAY)	2	ST; SP

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Drug Name	Drug Tier	Requirements / Limits
FERRIPROX ORAL SOLUTION	2	ST; SP
FERRIPROX ORAL TABLET	3	ST; SP
FERRLECIT	3	ST
<i>finasteride</i>	E	
GIVLAARI	3	PA; ST; SP
GLASSIA	2	ST; SP
HYLENEX	3	
INCRELEX	2	PA; SP
JADENU	E	SP
JADENU SPRINKLE	E	SP
JESDUVROQ	E	
JOENJA	3	PA; ST; SP; QL
KORSUVA	3	SP
LAMZEDE	2	PA; ST; SP
<i>levocarnitine (with sugar)</i>	1	
<i>levocarnitine intravenous</i>	1	
<i>levocarnitine oral</i>	1	M
LITFULO	3	PA; ST; SP; QL
LITHOSTAT	3	
METOPIRONE	3	
<i>midodrine</i>	1	
<i>nitisinone</i>	1	ST; SP
NITYR	2	ST; SP
NORTHERA	E	SP
OLPRUVA	3	ST; SP

Drug Name	Drug Tier	Requirements / Limits
ORFADIN	3	ST; SP
OXBRYTA	E	SP
PEDMARK	2	
PHEBURANE	2	ST; SP
<i>pilocarpine hcl</i>	1	M
PROLASTIN-C	2	ST; SP
PROPECIA	E	M
PYRUKYND	3	ST; SP; QL
RADIOGARDASE	3	
RAVICTI	E	SP
RECLAST	3	SP
REVCOVI	2	ST; SP
REZDIFFRA	3	PA; ST; SP
RILUTEK	3	ST; M
<i>riluzole</i>	1	ST; M
<i>risedronate</i>	1	M; QL
SALAGEN (PILOCARPINE)	3	M
<i>sodium benzoate-sodium phenylacet</i>	1	
<i>sodium chlor 0.9% bacteriostat</i>	1	
<i>sodium chloride</i>	1	
<i>sodium chloride 0.9 %</i>	1	
<i>sodium ferric gluconat-sucrose</i>	1	ST
<i>sodium phenylbutyrate</i>	1	ST; M
SOHONOS	3	PA; ST; SP; QL
SOLIRIS	2	ST; SP

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
SYPRINE	3	ST; M
TAVNEOS	E	SP
TEGLUTIK	3	ST; SP
THIOLA	E	SP
THIOLA EC	3	ST; SP
TIGLUTIK	3	ST; SP
<i>tiopronin</i>	1	ST; SP
<i>trientine oral capsule 250 mg</i>	1	ST; M
TRIENTINE ORAL CAPSULE 500 MG	E	
ULTOMIRIS	3	ST; SP
VEOPOZ	3	PA; ST; SP
<i>water for irrigation, sterile</i>	1	
XENPOZYME	2	PA; ST; SP
XURIDEN	2	ST; SP
ZEMAIRA	2	ST; SP
ZOKINVY	3	ST; SP; QL
<i>zoledronic acid-mannitol-water</i>	1	SP
ZYNRELEF	3	
SMOKING DETERRENENTS		
<i>bupropion hcl (smoking deter)</i>	0	ACA
CHANTIX	0	ACA
CHANTIX CONTINUING MONTH BOX	0	ACA
CHANTIX STARTING MONTH BOX	0	ACA
NICODERM CQ	0	ACA

Drug Name	Drug Tier	Requirements / Limits
NICORETTE BUCCAL GUM 2 MG	0	ACA
<i>nicorette buccal gum 4 mg</i>	0	ACA
NICORETTE BUCCAL LOZENGE	0	ACA
NICORETTE BUCCAL MINI LOZENGE	0	ACA
<i>nicotine</i>	0	ACA
<i>nicotine (polacrilex)</i>	0	ACA
NICOTROL NS	0	ACA
<i>quit 2</i>	0	ACA
<i>quit 4</i>	0	ACA
<i>stop smoking aid</i>	0	ACA
<i>varenicline</i>	0	ACA

EAR, NOSE & THROAT MEDICATIONS

MISCELLANEOUS AGENTS

ARESTIN	3	SP
<i>azelastine nasal spray, non-aerosol 137 mcg (0.1 %)</i>	1	QL
<i>azelastine nasal spray, non-aerosol 205.5 mcg (0.15 %)</i>	E	
<i>chlorhexidine gluconate</i>	1	
CLINPRO 5000	E	M
DEBACTEROL	E	
<i>denta 5000 plus</i>	E	M

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Drug Name	Drug Tier	Requirements / Limits
<i>denta 5000 plus sensitive</i>	E	
<i>dentagel</i>	E	M
<i>fluoride (sodium)</i>	E	M
FLUORIDEX DAILY DEFENSE	E	M
FLUORIDEX SENSITIVITY RELIEF	E	M
FLUORIMAX 5000	E	M
FLUORIMAX 5000 SENSITIVE	E	M
FRAICHE 5000 PREVI	E	M
FRAICHE 5000 SENSITIVE	E	M
GELCLAIR	3	
GEL-KAM	E	
GELX	3	
<i>ipratropium bromide nasal spray, non-aerosol 21 mcg (0.03 %)</i>	1	M; QL
<i>ipratropium bromide nasal spray, non-aerosol 42 mcg (0.06 %)</i>	1	QL
JUST RIGHT 5000	E	M
<i>kourzeq</i>	1	
MUGARD	3	SP
<i>olopatadine</i>	1	QL
<i>oralone</i>	1	
ORAMAGICRX	3	
ORAPEUTIC	E	

Drug Name	Drug Tier	Requirements / Limits
<i>paroex oral rinse</i>	1	
PATANASE	3	QL
PERIDEX	3	
<i>periogard</i>	1	
PHOS-FLUR	E	
<i>pilocarpine hcl</i>	1	M
PREVIDENT	E	M
PREVIDENT 5000 BOOSTER PLUS	E	M
PREVIDENT 5000 ENAMEL PROTECT	E	M
PREVIDENT 5000 ORTHO DEFENSE	E	M
PREVIDENT 5000 PLUS	E	M
PREVIDENT 5000 SENSITIVE	E	M
PREVIDENT KIDS	E	
PROTHELIAL	3	SP
Q-CARE RX Q4	E	
SALAGEN (PILOCARPINE)	3	M
<i>sf</i>	E	M
<i>sf 5000 plus</i>	E	M
<i>sodium fluoride 5000 plus</i>	E	M
<i>sodium fluoride-pot nitrate</i>	E	M
<i>triamcinolone acetonide</i>	1	
MISCELLANEOUS OTIC PREPARATIONS		

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Drug Name	Drug Tier	Requirements / Limits
<i>acetic acid</i>	1	
CETRAXAL	E	
<i>ciprofloxacin hcl</i>	1	
DERMOTIC OIL	3	
<i>flac otic oil</i>	1	
<i>fluocinolone acetone oil</i>	1	
<i>hydrocortisone-acetic acid</i>	1	
<i>ofloxacin</i>	1	
OTIC STEROID/ANTIBIOTIC		
CIPRO HC	E	
<i>ciprofloxacin-dexamethasone</i>	1	
CIPROFLOXACIN-FLUOCINOLONE	E	
CORTISPORIN-TC	3	
<i>neomycin-polymyxin-hc</i>	1	
OTOVEL	3	
ENDOCRINE/DIABETES		
ADRENAL HORMONES		
ACTHAR	3	PA; ST; SP
AGAMREE	E	SP
ALKINDI SPRINKLE	E	
<i>betamethasone acet,sod phos</i>	1	
CELESTONE SOLUSPAN	3	
CORTEF	3	
<i>cortisone</i>	1	

Drug Name	Drug Tier	Requirements / Limits
CORTROPHIN GEL	E	SP
CORTROSYN	3	
<i>cosyntropin</i>	1	
<i>deflazacort</i>	1	ST; SP
DEPO-MEDROL	3	
<i>dexabliss</i>	1	ST
<i>dexamethasone intensol</i>	1	
<i>dexamethasone oral elixir</i>	1	
<i>dexamethasone oral solution</i>	1	
<i>dexamethasone oral tablet</i>	1	
<i>dexamethasone oral tablets, dose pack</i>	1	ST
<i>dexamethasone sodium phos (pf)</i>	1	
<i>dexamethasone sodium phosphate</i>	1	
EMFLAZA	E	SP
<i>fludrocortisone</i>	1	M
HEMADY	E	
<i>hydrocortisone</i>	1	
KENALOG	3	
KENALOG-80	3	
MEDROL	3	
MEDROL (PAK)	3	
<i>methylprednisolone</i>	1	
<i>methylprednisolone acetate</i>	1	
<i>millipred</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>millipred dp</i>	1	
ORAPRED ODT	3	
<i>prednisolone</i>	1	
<i>prednisolone sodium phosphate</i>	1	
<i>prednisone</i>	1	
<i>prednisone intensol</i>	1	
RAYOS	3	ST
TAPERDEX	3	ST
TARPEYO	3	PA; ST; SP; QL
<i>triamcinolone acetonide</i>	1	
TRIESENCE (PF)	3	
XIPERE (PF)	3	SP
ZCORT	3	ST
ANTITHYROID AGENTS		
<i>methimazole</i>	1	M
POTASSIUM IODIDE ORAL DROPS	E	
<i>potassium iodide oral solution</i>	1	
<i>propylthiouracil</i>	1	M
SSKI	3	
THYROSAFE	E	
BLOOD GLUCOSE MONITORING DEVICES & SUPPLIES		
ACCU-CHEK AVIVA PLUS TEST STRP	E	M

Drug Name	Drug Tier	Requirements / Limits
ACCU-CHEK GUIDE TEST STRIPS	E	M
ACCU-CHEK SMARTVIEW TEST STRIP	E	M
ACCUTREND GLUCOSE TEST STRIPS	E	M
ADVANCED GLUC METER TEST STRIP	E	M
ADVOCATE REDI-CODE PLUS	E	M
AGAMATRIX AMP TEST STRIPS	E	M
ASSURE 4 STRIPS	E	M
ASSURE PLATINUM TEST STRIP	E	M
ASSURE PRISM MULTI STRIP	E	M
BIONIME RIGHTEST TEST STRIPS	E	M
BLOOD GLUCOSE TEST	E	M
BLULINK GLUCOSE TEST STRIP	E	
CARESENS N TEST STRIPS	E	M
CARETOUCH TEST STRIP	E	M

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Drug Name	Drug Tier	Requirements / Limits
CLEVER CHOICE MICRO TEST STRIP	E	M
CLEVER CHOICE PRO	E	M
CLEVER CHOICE TALK TEST	E	M
CLEVER CHOICE TEST STRIPS	E	M
CLEVER CHOICE VOICE PLUS TEST	E	M
CONTOUR NEXT TEST STRIPS	E	M
CONTOUR TEST STRIPS	E	M
DIATRUE PLUS TEST STRIP	E	M
EASY PLUS II TEST	E	M
EASY STEP	E	M
EASY TALK GLUCOSE TEST	E	M
EASY TALK PLUS II TEST STRIP	E	M
EASY TOUCH BLULINK TEST STRIP	E	M
EASY TOUCH TEST STRIP	E	M
EASY TRAK GLUCOSE TEST	E	M
EASY TRAK II TEST STRIP	E	M
EASYGLUCO TEST	E	M

Drug Name	Drug Tier	Requirements / Limits
EASYMAX	E	M
ELEMENT COMPACT TEST STRIPS	E	M
ELEMENT TEST STRIPS	E	M
EMBRACE BLOOD GLUCOSE SYSTEM	E	M
EMBRACE EVO TEST STRIPS	E	M
EMBRACE PRO TEST STRIPS	E	M
EMBRACE TALK TEST STRIPS	E	M
EVENCARE G2	E	M
EVENCARE G3 TEST	E	M
EVENCARE MINI GLUCOSE TEST STR	E	M
EVENCARE PROVIEW TEST STRIP	E	M
EVOLUTION TEST STRIPS	E	M
EZ SMART PLUS TEST	E	M
EZ SMART TEST	E	M
FORA 6 CONNECT GLUCOSE STRIP	E	M
FORA 6CONN-GTEL-TN'G ADV STRIP	E	

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Drug Name	Drug Tier	Requirements / Limits
FORA D15G STRIPS	E	M
FORA D20	E	M
FORA D40-G31 TEST STRIPS	E	M
FORA G20	E	M
FORA G30-PREMIUM V10 TEST STRP	E	M
FORA GD50 TEST STRIPS	E	M
FORA GTEL GLUCOSE TEST STRIP	E	M
FORA TEST STRIP	E	M
FORA TN'G ADVAN PRO TEST STRIP	E	M
FORA TN'G VOICE TEST STRIPS	E	M
FORA V10	E	M
FORA V10-V12-D10-D20 STRIPS	E	M
FORA V12 GLUCOSE	E	M
FORA V20	E	M
FORACARE GD20	E	M
FORACARE GD40 TEST STRIPS	E	M
FREESTYLE INSULINX	2	M
FREESTYLE INSULINX TEST STRIPS	2	M

Drug Name	Drug Tier	Requirements / Limits
FREESTYLE LITE STRIPS	2	M
FREESTYLE PRECISION NEO STRIPS	E	M
FREESTYLE TEST	2	M
GE100 BLOOD GLUCOSE TEST STRIP	E	M
GE333 BLOOD GLUCOSE TEST STRIP	E	M
GENSTRIP TEST STRIP	E	M
GLUCO NAVII TEST STRIP	E	M
GLUCOCARD 01 SENSOR PLUS	E	M
GLUCOCARD EXPRESSION	E	M
GLUCOCARD SHINE TEST STRIPS	E	M
GLUCOCARD VITAL SENSOR	E	M
GLUCOCARD VITAL TEST STRIPS	E	M
GLUCOCOM GLUCOSE	E	M
GM100	E	M
GOJJI BLOOD GLUCOSE TEST STRIP	E	M

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Drug Name	Drug Tier	Requirements / Limits
HARMONY GLUCOSE TEST STRIP	E	M
HEALTHPRO TEST STRIPS	E	M
IGLUCOSE TEST STRIP	E	M
INFINITY TEST STRIPS	E	M
MICRO BLOOD GLUCOSE	E	M
MICRODOT BLOOD GLUCOSE SYSTEM	E	M
MICRODOT XTRA BLOOD GLUCOSE	E	M
MYGLUCOHEALTH	E	M
NEUTEK 2TEK TEST STRIPS	E	M
NOVA MAX GLUCOSE TEST	E	
ON CALL EXPRESS TEST STRIP	E	M
ON CALL PLUS TEST STRIP	E	M
ON CALL VIVID TEST STRIP	E	M
ONETOUCH ULTRA TEST	2	M
ONETOUCH VERIO TEST STRIPS	2	M
OPTIUM EZ	E	M

Drug Name	Drug Tier	Requirements / Limits
OPTIUM TEST	E	M
OPTUMRX	E	M
PHARMACIST CHOICE	E	M
PIP BLOOD GLUCOSE TEST STRIP	E	M
PRECISION PCX PLUS TEST	E	M
PRECISION PCX TEST	E	M
PRECISION POINT OF CARE TEST	E	M
PRECISION Q-I-D TEST	E	M
PRECISION XTRA TEST	2	M
PREMIER TEST STRIP	E	M
PREMIUM V10	E	M
PRO VOICE V8-V9 TEST STRIP	E	M
PRODIGY NO CODING	E	M
QUINTET AC	E	M
REFUAH PLUS	E	M
RELION CONFIRM-MICRO	E	M
RELION PRIME TEST STRIPS	E	M
RELION ULTIMA	E	M
REVEAL TEST STRIP	E	M

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Drug Name	Drug Tier	Requirements / Limits
RIGHTEST GS550 TEST STRIPS	E	M
RIGHTEST GT333 TEST STRIP	E	M
SMART SENSE TEST STRIPS	E	M
SMARTTEST TEST	E	M
SOLUS V2 TEST STRIPS	E	M
SURE-TEST EASYPLUS MINI	E	M
TELCARE TEST STRIPS	E	M
TEST N'GO TEST	E	M
TRUE METRIX GLUCOSE TEST STRIP	E	M
TRUETEST TEST STRIPS	E	M
TRUETRACK TEST	E	M
ULTRATRAK	E	M
ULTRATRAK ULTIMATE	E	M
UNISTRIP1 TEST STRIP	E	M
VIVAGUARD INO TEST STRIP	E	M
WAVESENSE JAZZ	E	M
WAVESENSE PRESTO	E	M

DIABETES, SUPPLIES, & DURABLE MEDICAL EQUIPMENT

Drug Name	Drug Tier	Requirements / Limits
ACE AEROSOL CLOUD ENHANCER	2	
ADVIN COVID-19 AG HOME TEST	E	
AEROCHAMBER MINI	2	
AEROCHAMBER PLUS FLOW-VU	2	
AEROCHAMBER PLUS Z STAT	2	
AEROTRACH PLUS	2	
AEROVENT PLUS	2	
BD VERITOR AT-HOME COVID19 TST	E	
BD VERITOR SARS-COV-2, FLU A-B	E	
BD VERITOR SYSTEM SARS-COV-2	E	
BINAXNOW COVID AG CARD HOME TST	E	
BINAXNOW COVID-19 AG CARD	E	
BINAXNOW COVID-19 AG SELF TEST	E	
BREATHERITE MDI SPACER	2	

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Drug Name	Drug Tier	Requirements / Limits
CARESTART COVID-19 AG HOME TST	E	
CELLTRION DIATRUST COV-19 HOME	E	
CLINITEST COVID-19 HOME TEST	E	
COMPACT SPACE CHAMBER	2	
CORDX COVID-19 AG HOME TEST	E	
COVID-19 AT-HOME TEST	E	
COVID19 TEST ADM.BY PHARMACIST	E	
CUE COVID-19 CARTRIDGE READER	E	
CUE COVID-19 HOME TEST	E	
EASIVENT HOLDING CHAMBER	2	
ELLUME COVID-19 HOME TEST	E	
EUA PATIENT ASSESSMENT	E	
EVERLYWELL COVID19 HOM COLLECT	E	
FASTEP COVID-19 AG HOME TEST	E	
FLEXICHAMBER	2	

Drug Name	Drug Tier	Requirements / Limits
FLOWFLEX COVID-19 AG HOME TEST	E	
GENABIO COVID-19 RAPID AT-HOME	E	
GLUCAGON HCL	3	
GOTOKNOW COVID-19 AG HOME TEST	E	
ID NOW COVID-19 TEST KIT	E	
IHEALTH COVID-19 AG HOME TEST	E	
INDICAID COVID-19 AG HOME TEST	E	
INSULIN SYRINGE-NEEDLE U-100	E	M
INTELISWAB COVID-19 HOME TEST	E	
LITEAIRE MDI CHAMBER	2	
LUCIRA CHECK-IT COVID HOME TST	E	
MICROCHAMBER	2	
MICROSPACER	2	
ON-GO COVID-19 AG AT HOME TEST	E	
OPTICHAMBER DIAMOND VHC	2	
PILOT COVID-19 AT-HOME TEST	E	

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Drug Name	Drug Tier	Requirements / Limits
PIXEL COVID19 HOME COLLECT KIT	E	
POCKET CHAMBER	2	
PRIMEAIRE	2	
PROCHAMBER	2	
QUICKVUE AT-HOME COVID-19 TEST	E	
QUICKVUE SARS ANTIGEN	E	
RAPID SARS-COV-2 AG HOME TEST	E	
RITEFLO AEROCHAMBER	2	
SOFIA SARS ANTIGEN FIA	E	
SOFIA2 FLU-SARS ANTIGEN FIA	E	
SPACE CHAMBER	2	
SPEEDYSWAB COVID-19 HOME TEST	E	
VORTEX HOLDING CHAMBER	2	
GLUCOSE ELEVATING AGENTS		
BAQSIMI	2	QL
<i>diazoxide</i>	1	M
GLUCAGEN HYPOKIT	E	
GLUCAGON (HCL) EMERGENCY KIT	E	

Drug Name	Drug Tier	Requirements / Limits
<i>glucagon emergency kit (human)</i>	1	QL
GVOKE	2	QL
GVOKE HYPOPEN 2-PACK	2	QL
GVOKE PFS 2-PACK SYRINGE	2	QL
PROGLYCEM	3	M
ZEGALOGUE AUTOINJECTOR	E	
ZEGALOGUE SYRINGE	E	
INSULIN SYRINGES/MISCELLANEOUS DURABLE MEDICAL EQU		
2TEK GLUCOSE/BLOOD PRESSURE	E	
ACCU-CHEK GUIDE GLUCOSE METER	E	M
ACCU-CHEK GUIDE L1-L2 CTRL SOL	3	
ACCU-CHEK GUIDE ME GLUCOSE MTR	E	M
ACCU-CHEK SMARTVIEW CONTRL SOL	3	M
ACCUTREND GLUCOSE CONTROL	3	
ADVANCED GLUCOSE METER	E	M

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Drug Name	Drug Tier	Requirements / Limits
ADVOCATE REDICODE PLUS	E	M
ADVOCATE REDICODE PLUS CTRL L	3	
AGAMATRIX AMP GLUC MONITOR SYS	E	M
AGAMATRIX CONTROL HIGH	3	M
ASSURE 4 CONTROL SOLUTION	3	
ASSURE DOSE NORMAL CONTROL	3	M
ASSURE PLATINUM GLUCOSE METER	E	M
ASSURE PRISM CONTROL 1-2 SOLN	3	
ASSURE PRISM MULTI METER	E	M
AT HOME A1C	3	
AUTOJECT 2 INJECTION DEVICE	2	
AUTOPEN 1 TO 21 UNITS	2	
AUTOSOFT 30	E	
AUTOSOFT 90	E	
AUTOSOFT XC INFUSION SET 23"	E	
BD INTEGRA NEEDLE	2	M

Drug Name	Drug Tier	Requirements / Limits
BD MICROTAINER LANCET	2	M
BD SPECIALTY USE NEEDLES	2	M
BD ULTRA-FINE NANO PEN NEEDLE	2	M
BIGFOOT UNITY	E	
BIONIME RIGHTEST GM300 SYSTEM	E	
BIOTEL CARE BGM-4 METER	E	M
BLOOD GLUCOSE CONTROL, NORMAL	3	M
BLOOD-GLUCOSE METER	E	M
BLULINK DIABETIC TEST BUNDLE	E	
BLULINK GLUCOSE MONITOR SYSTEM	E	
BREEZE 2 CONTROL SOLUTION, HIGH	3	M
CARESENS CONTROL A AND B	3	
CARESENS N	E	M
CARESENS N FELIZ GLUCOSE METER	E	M

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
CARESENS N VOICE	E	M
CARETOUCH CONTROL SOLN L2-L3	3	
CARETOUCH GLUCOSE MONITORING	E	
CEQR SIMPLICITY	2	
CLEVER CHEK BLOOD GLUCOSE	E	M
CLEVER CHOICE GLUCOSE MONITOR	E	M
CLEVER CHOICE LEVEL 2 CONTROL	3	M
CLEVER CHOICE MICRO	E	M
CLEVER CHOICE PRO	E	M
CLEVER CHOICE TALK GLUCOSE SYS	E	M
CONTOUR CONTROL SOLUTION, NML	3	M
CONTOUR NEXT EZ METER	E	M
CONTOUR NEXT GEN METER	E	
CONTOUR NEXT LEV 2 CONTROL SOL	3	M

Drug Name	Drug Tier	Requirements / Limits
CONTOUR NEXT LINK	E	
CONTOUR NEXT LINK 2.4	E	
CONTOUR NEXT METER	E	M
CONTOUR NEXT ONE METER	E	M
DEXCOM G6 RECEIVER	2	QL
DEXCOM G6 SENSOR	2	QL
DEXCOM G6 TRANSMITTER	2	M; QL
DEXCOM G7 RECEIVER	2	QL
DEXCOM G7 SENSOR	2	QL
DIATRUE CONTROL SOLN NORMAL	3	M
DIATRUE PLUS BLOOD GLUCOSE MET	E	M
EASY PLUS II HIGH CONTROL	3	M
EASY STEP BLOOD GLUCOSE METER	E	M
EASY STEP HIGH CONTROL SOLN	3	M
EASY TALK HIGH CONTROL	3	M
EASY TALK PLUS II LOW CONTROL	3	

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
EASY TOUCH BLU CTRL SOLN-L1,L3	3	
EASY TOUCH BLULINK GLUC SYST	E	M
EASY TOUCH GLUCOSE MONITOR	E	M
EASY TRAK II BLOOD GLUCOSE MTR	E	M
EASY TRAK II CTRL SOLN-NORMAL	3	M
EASY TRAK LOW CONTROL	3	
EASYGLUCO MONITORING SYSTEM	E	
EASYMAX 15 LEVEL 2	3	M
EASYMAX NG	E	
EASYMAX NORMAL CONTROL	3	M
EASYMAX V SPEAKING GLUCOSE SYS	E	M
ELEMENT COMPACT GLUCOSE METER	E	M
ELEMENT COMPACT NORMAL CONTROL	3	M

Drug Name	Drug Tier	Requirements / Limits
ELEMENT COMPACT V GLUCOSE MTR	E	M
ELEMENT NORMAL CONTROL	3	M
ELEMENT PLUS BLOOD GLUCOSE KIT	E	
EMBRACE BLOOD GLUCOSE SYSTEM	E	M
EMBRACE EVO LEVEL 1	3	
EMBRACE GLUCOSE CONTROL LOW	3	
EMBRACE PRO GLUCOSE METER	E	M
EMBRACE TALK BLOOD GLUCOSE SYS	E	
EMBRACE TALK CONTROL-LOW (L1)	3	
EMBRACE WAVE PLUS GLUCOSE MTR	E	M
EVENCARE G2	E	M
EVENCARE G3 GLUCOSE METER	E	
EVENCARE MINI MONITOR SYSTEM	E	M
EVERSENSE E3 SENSOR-HOLDER	3	

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
EVERSENSE E3 SMART TRANSMITTER	3	QL
EVOLUTION BLOOD GLUCOSE METER	E	
EVOLUTION NORMAL CONTROL	3	M
EZ SMART PLUS SYSTEM	E	
EZ SMART SYSTEM	E	
FORA 6 CONNECT MULTIFUNCTN MTR	3	
FORA D10	E	
FORA D15 GLUCOSE-BP MONITOR	E	
FORA D20	E	
FORA D40D GLUCOSE-BP MONITOR	E	
FORA G20	E	
FORA G30A	E	M
FORA GD50 BLOOD GLUCOSE SYSTEM	E	M
FORA GTEL MULTI-FUNCTN MONITOR	3	
FORA KETONE CONTROL SOLN-L1	3	

Drug Name	Drug Tier	Requirements / Limits
FORA NORMAL CONTROL	3	M
FORA PREMIUM V10 GLUCOSE METER	E	M
FORA TEST N'GO VOICE METER	E	M
FORA TN'G ADV MOBILE MULTI MTR	3	
FORA TN'G ADVANCE MULTI-FN MTR	3	
FORA TN'G ADVANCE PRO MONITOR	3	
FORA TN'G VOICE METER	E	M
FORA V10	E	
FORA V12 BLOOD GLUCOSE SYSTEM	E	M
FORA V20	E	
FORA V30A	E	
FORACARE GD20 GLUCOSE METER	E	M
FORACARE GD40A GLUCOSE METER	E	M
FORACARE GD40B GLUCOSE METER	E	M
FORACARE GDH LOW CONTROL	3	
FREESTYLE CONTROL	2	M

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
FREESTYLE FLASH SYSTEM	E	
FREESTYLE FREEDOM	2	
FREESTYLE FREEDOM LITE	2	
FREESTYLE INSULINX	2	M
FREESTYLE LIBRE 14 DAY READER	2	
FREESTYLE LIBRE 14 DAY SENSOR	2	QL
FREESTYLE LIBRE 2 READER	2	
FREESTYLE LIBRE 2 SENSOR	2	QL
FREESTYLE LIBRE 3 READER	2	QL
FREESTYLE LIBRE 3 SENSOR	2	QL
FREESTYLE LITE METER	2	
FREESTYLE PRECISION NEO METER	E	M
FREESTYLE SIDEKICK II	E	
FREESTYLE SYSTEM KIT	E	
GE100 BLOOD GLUCOSE SYSTEM	E	

Drug Name	Drug Tier	Requirements / Limits
GE100 CONTROL SOLUTION NORMAL	3	M
GE333 BLOOD GLUCOSE SYSTEM	E	M
GENTEEL VACUUM LANCING DEVICE	3	
GLUCO NAVII GLUCOSE MONITOR	E	
GLUCOCARD 01 METER	E	
GLUCOCARD 01 NORMAL CONTROL	3	M
GLUCOCARD EXPRESSION	E	M
GLUCOCARD SHINE CONNEX METER	E	M
GLUCOCARD SHINE EXPRESS METER	E	M
GLUCOCARD SHINE METER	E	M
GLUCOCARD SHINE XL METER	E	M
GLUCOCARD VITAL	E	
GLUCOCOM BLOOD GLUCOSE	E	
GLUCOCOM CONTROL NORMAL	3	M

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Drug Name	Drug Tier	Requirements / Limits
GLUCOSE CONTROL	3	M
GM100	E	
GOJJI GLUCOSE CNTRL SOL-NORMAL	3	M
GOJJI KETONE CONTROL SOLN-L1	3	
GOJJI MULTI-FUNCTIONAL METER	3	
GUARDIAN 4 GLUCOSE SENSOR	3	QL
GUARDIAN 4 TRANSMITTER	3	M; QL
GUARDIAN CONNECT TRANSMITTER	3	M; QL
GUARDIAN LINK 3 TRANSMITTER	3	M; QL
GUARDIAN SENSOR 3	3	QL
HEALTHPRO GLUCOSE MONITOR	E	M
HEALTHPRO HIGH-LOW CONTROL	3	
IGLUCOSE BLOOD GLUCOSE MONITOR	E	
ILET INFUSION KIT-INSET 23"	E	

Drug Name	Drug Tier	Requirements / Limits
ILET INFUSION-CONTACT DTCH 23"	E	
ILET INSULIN PUMP	E	
INFINITY CONTROL SOLUTION NORM	3	M
INFINITY STARTER KIT	E	
INPEN (FOR HUMALOG) PINK	3	
INPEN (NOVOLOG OR FIASP) PINK	3	
JAZZ WIRELESS 2 METER KIT	E	
LANCETS	2	M
LANCING DEVICE	2	M
MEDISENSE	2	
MEDISENSE GLUCOSE KETONE	2	
MEDTRONIC EXT INFUSION SET 23"	E	
MICRODOT BLOOD GLUCOSE SYSTEM	E	M
MINIMED 770G INSULIN PUMP	E	
MINIMED MIO ADVANCE INF SET23"	E	
MINIMED QUICK SET 43"	E	

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
MINIMED SILHOUETTE 23"	E	
MINIMED SURE T 32"	E	
MYGLUCOHEALTH	E	
MYGLUCOHEALTH CONTROL SOLUTION	3	
NOVA MAX PLUS GLUC-KETON METER	3	
NOVAMAX PLUS GLU-KET	3	
NOVOPEN ECHO	3	
OMNIPOD 5 G6 INTRO KIT (GEN 5)	2	QL
OMNIPOD 5 G6 PODS (GEN 5)	2	QL
OMNIPOD CLASSIC PODS (GEN 3)	2	QL
OMNIPOD DASH INTRO KIT (GEN 4)	2	QL
OMNIPOD DASH PODS (GEN 4)	2	QL
OMNIPOD GO PODS 10 UNITS/DAY	2	QL
ON CALL EXPRESS CONTROL	3	
ON CALL EXPRESS METER	E	

Drug Name	Drug Tier	Requirements / Limits
ON CALL PLUS CONTROL	3	
ON CALL PLUS METER	E	
ON CALL VIVID CONTROL	3	
ON CALL VIVID METER	E	
ON CALL VIVID PAL METER	E	
ONETOUCH ULTRA CONTROL	2	M
ONETOUCH ULTRA2 METER	2	
ONETOUCH VERIO FLEX METER	2	
ONETOUCH VERIO MID CONTROL	2	
ONETOUCH VERIO REFLECT METER	2	M
OPTUMRX	E	
PEN NEEDLE, DIABETIC	E	M
PHARMACIST CHOICE GLUCOSE SYS	E	M
PIP BLOOD GLUCOSE MONITOR	E	M
PIP GLUCOSE CONTROL SOLN L1-L2	3	

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Drug Name	Drug Tier	Requirements / Limits
POGO AUTOMATIC BLOOD GLUC SYS	E	M
PRECISION XTRA KETONE-GLUCOSE	2	
PRECISION XTRA MONITOR	2	M
PREMIER BLU GLUCOSE METER	E	M
PREMIER CLASSIC GLUCOSE METER	E	M
PREMIER COMPACT GLUCOSE METER	E	
PREMIER VOICE GLUCOSE METER	E	M
PREMIUM BLOOD GLUCOSE MONITOR	E	M
PREMIUM V10	E	M
PRESTO PRO BLOOD GLUCOSE METER	E	M
PRO VOICE V8 GLUCOSE MONITOR	E	M
PRO VOICE V9 GLUCOSE MONITOR	E	M
PRODIGY AUTOCODE METER	E	
PRODIGY AUTOCODE MONITOR SYST	E	M

Drug Name	Drug Tier	Requirements / Limits
PRODIGY CONTROL SOLUTION, LOW	3	
PRODIGY CONTROL SOLUTION, HIGH	3	M
PRODIGY POCKET METER	E	
PRODIGY VOICE GLUCOSE METER	E	
QUINTET BLOOD GLUCOSE METER	E	M
REFUAH PLUS GLUCOSE CONTROL	3	M
REFUAH PLUS GLUCOSE MONITOR	E	
RELION ALL-IN-ONE METER	E	
RELION CONFIRM	E	
RELION MICRO GLUCOSE MONITOR	E	
RELION PRIME METER	E	M
REVEAL BLOOD GLUCOSE METER	E	
RIGHTEST CONTROL SOLUTION HIGH	3	M
RIGHTEST GM550 SYSTEM	E	
RIGHTEST GT333 GLUCOSE METER	E	M

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
SMART SENSE MONITORING SYSTEM	E	M
SMARTEST CONTROL	3	M
SMARTEST EJECT	E	
SMARTEST PERSONA STARTER	E	
SMARTEST PRONTO STARTER	E	
SMARTEST PROTEGE	E	
SOLUS V2 AUDIBLE METER	E	M
SOLUS V2 AUDIBLE METER KIT	E	
SOLUS V2 CONTROL SOLUTION, HIGH	3	M
SURE-TEST EASYPLUS MINI METER	E	M
T:FLEX	E	
T:SLIM X2	E	
T:SLIM X2 BASAL-IQ INSULIN PMP	E	
T:SLIM X2 CONTROL-IQ	E	
TELCARE CONTROL	3	
TEMPO SMART BUTTON	E	

Drug Name	Drug Tier	Requirements / Limits
TEMPO WELCOME KIT	E	
TEST N'GO BLOOD GLUCOSE SYSTEM	E	M
TRUE METRIX AIR GLUCOSE METER	E	M
TRUE METRIX GLUCOSE METER	E	M
TRUE METRIX GO GLUCOSE METER	E	M
TRUE METRIX LEVEL 1	3	
TRUERESULT BLOOD GLUCOSE SYSTM	E	
TRUETRACK BLOOD GLUCOSE SYSTEM	E	
TRUETRACK SMART SYSTEM	E	
TRUSTEEL INFUSION SET 23"	E	
ULTIMA MONITOR	E	M
ULTRATRAK GLUCOSE METER	E	M
ULTRATRAK ULTIMATE	E	M
UNISTRIP LOW CONTROL	3	
VARISOFT INFUSION SET 23"	E	
V-GO 20	2	

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Drug Name	Drug Tier	Requirements / Limits
V-GO 30	2	
V-GO 40	2	
VIVAGUARD INO CTRL SOLN-L1,2,3	3	
VIVAGUARD INO GLUCOSE METER	E	M
VIVAGUARD INO SMART GLUC METER	E	M
WAVESENSE AMP	E	
WAVESENSE CONTROL SOLUTION	3	M
WAVESENSE PRESTO	E	M
INSULIN THERAPY		
ADMELOG SOLOSTAR U-100 INSULIN	E	M
ADMELOG U-100 INSULIN LISPRO	E	M
AFREZZA	E	M
APIDRA SOLOSTAR U-100 INSULIN	E	M
APIDRA U-100 INSULIN	E	M
BASAGLAR KWIKPEN U-100 INSULIN	3	M
BASAGLAR TEMPO PEN (U-100) INSLN	3	M

Drug Name	Drug Tier	Requirements / Limits
FIASP	E	M
FLEXTOUCH U-100 INSULIN		
FIASP PENFILL U-100 INSULIN	E	M
FIASP PUMPCART	E	M
FIASP U-100 INSULIN	E	M
HUMALOG JUNIOR KWIKPEN U-100	2	M
HUMALOG KWIKPEN INSULIN	2	M
HUMALOG MIX 50-50 INSULN U-100	2	M
HUMALOG MIX 50-50 KWIKPEN	2	M
HUMALOG MIX 75-25 KWIKPEN	2	M
HUMALOG MIX 75-25(U-100) INSULN	2	M
HUMALOG TEMPO PEN (U-100) INSULN	2	M
HUMALOG U-100 INSULIN	2	M
HUMULIN 70/30 U-100 INSULIN	2	M
HUMULIN 70/30 U-100 KWIKPEN	2	M
HUMULIN N NPH INSULIN KWIKPEN	2	M

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Drug Name	Drug Tier	Requirements / Limits
HUMULIN N NPH U-100 INSULIN	2	M
HUMULIN R REGULAR U-100 INSULIN	2	M
HUMULIN R U-500 (CONC) INSULIN	2	M
HUMULIN R U-500 (CONC) KWIKPEN	2	M
INSULIN ASP PRT-INSULIN ASPART	E	M
INSULIN ASPART U-100	E	M
INSULIN DEGLUDEC	E	M
INSULIN GLARGINE U-300 CONC	E	
INSULIN GLARGINE-YFGN	E	M
INSULIN LISPRO PROTAMIN-LISPRO	3	M
INSULIN LISPRO SUBCUTANEOUS INSULIN PEN	3	M
INSULIN LISPRO SUBCUTANEOUS INSULIN PEN, HALF-UNIT	3	M
INSULIN LISPRO SUBCUTANEOUS SOLUTION	2	M
LANTUS SOLOSTAR U-100 INSULIN	E	M

Drug Name	Drug Tier	Requirements / Limits
LANTUS U-100 INSULIN	E	M
LEVEMIR FLEXPEN	E	M
LEVEMIR U-100 INSULIN	E	M
LYUMJEV KWIKPEN U-100 INSULIN	2	M
LYUMJEV KWIKPEN U-200 INSULIN	2	M
LYUMJEV TEMPO PEN (U-100) INSULIN	2	M
LYUMJEV U-100 INSULIN	2	M
MYXREDLIN	3	
NOVOLIN 70-30 FLEXPEN U-100	E	M
NOVOLIN N FLEXPEN	E	M
NOVOLIN R FLEXPEN	E	M
NOVOLOG FLEXPEN U-100 INSULIN	E	
NOVOLOG MIX 70-30 U-100 INSULIN	E	
NOVOLOG MIX 70-30 FLEXPEN U-100	E	
NOVOLOG PENFILL U-100 INSULIN	E	M

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Drug Name	Drug Tier	Requirements / Limits
NOVOLOG U-100 INSULIN ASPART	E	
RELION NOVOLIN 70/30	E	M
RELION NOVOLIN N	E	M
RELION NOVOLIN R	E	M
REZVOGLAR KWIKPEN	E	M
SEMGLEE (INSULIN GLARGINE-YFGN)	2	M
SEMGLEE (INSULIN GLARG-YFGN) PEN	2	M
SOLIQUA 100/33	2	M; QL
TOUJEO MAX U-300 SOLOSTAR	2	M
TOUJEO SOLOSTAR U-300 INSULIN	2	M
TRESIBA FLEXTOUCH U-100	2	M
TRESIBA FLEXTOUCH U-200	2	M
TRESIBA U-100 INSULIN	2	M
XULTOPHY 100/3.6	E	M
MISCELLANEOUS HORMONES		
ALDURAZYME	2	ST; SP
ANDRODERM	2	ST; M; QL

Drug Name	Drug Tier	Requirements / Limits
ANDROGEL	E	M
AVEED	E	SP
BRINEURA	2	ST; SP
<i>cabergoline</i>	1	M; QL
<i>calcitonin (salmon) injection</i>	1	
<i>calcitonin (salmon) nasal</i>	1	M
<i>calcitriol intravenous</i>	1	
<i>calcitriol oral capsule</i>	1	M
<i>calcitriol oral solution</i>	1	
CERDELGA	2	ST; SP; QL
CEREZYME	2	ST; SP
<i>cetorelix</i>	1	SP
CETROTIDE	2	SP
CHORIONIC GONADOTROPIN, HUMAN INJECTION	3	ST
CHORIONIC GONADOTROPIN, HUMAN INTRAMUSCULAR	E	SP
<i>cinacalcet</i>	1	ST; M
<i>clomid</i>	1	
<i>clomiphene citrate</i>	1	
CRYSVITA	2	ST; SP; QL
<i>danazol</i>	1	
DDAVP	3	M

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Drug Name	Drug Tier	Requirements / Limits
DEPO-TESTOSTERONE	3	ST
<i>desmopressin injection</i>	1	SP
<i>desmopressin nasal spray, non-aerosol 10 mcg/spray (0.1 ml)</i>	1	M
DESMOPRESSIN NASAL SPRAY, NON-AEROSOL 150 MCG/SPRAY (0.1 ML)	2	M
<i>desmopressin oral</i>	1	M
DHEA	E	
<i>doxercalciferol</i>	1	M
ELAPRASE	2	ST; SP
ELELYSO	E	SP
ELFABRIO	E	SP
FABRAZYME	2	ST; SP
FOLLISTIM AQ	E	SP
<i>fyremadel</i>	1	SP
GALAFOLD	3	ST; SP; QL
<i>ganirelix</i>	1	ST; SP
GONAL-F	2	ST; SP
GONAL-F RFF	2	ST; SP
GONAL-F RFF REDI-JECT	2	ST; SP
HECTOROL	3	M
ISTURISA	E	SP
JATENZO	3	ST; M; QL
<i>javygtor</i>	1	PA; ST; SP
JYNARQUE	3	PA; ST; SP; QL

Drug Name	Drug Tier	Requirements / Limits
KANUMA	2	ST; SP
KORLYM	E	SP
KUVAN	E	SP
KYZATREX	E	M
LUMIZYME	2	ST; SP
MENOPUR	2	SP
MEPSEVII	2	ST; SP
METHITEST	2	
<i>methyltestosterone</i>	1	M
MIACALCIN	3	
<i>mifepristone</i>	1	PA; ST; SP
<i>miglustat</i>	1	ST; SP; QL
MYALEPT	2	ST; SP
NAGLAZYME	2	ST; SP
NATESTO	E	M
NEXVIAZYME	3	ST; SP
NOCDURNA (MEN)	3	ST; M; QL
NOCDURNA (WOMEN)	3	ST; M; QL
NOCTIVA	E	M
NOVAREL	2	SP; QL
OPFOLDA	3	PA; ST; SP; QL
ORILISSA ORAL TABLET 150 MG	2	ST; M; QL
ORILISSA ORAL TABLET 200 MG	2	ST; QL
OVIDREL	2	SP
PALYNZIQ	2	PA; ST; SP; QL
<i>pamidronate</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
PARICALCITOL HEMODIALYSIS PORT INJECTION	3	M
<i>paricalcitol intravenous</i>	1	M
<i>paricalcitol oral</i>	1	M
PARSABIV	3	
POMBILITI	3	ST; SP
<i>prasterone (dhea)</i>	E	
PREGNYL	3	ST; SP; QL
RAYALDEE	3	M
RECORLEV	E	SP
ROCALTROL ORAL CAPSULE	3	M
ROCALTROL ORAL SOLUTION	3	
SAMSCA	E	SP
<i>sapropterin</i>	1	PA; ST; SP
SENSIPAR	E	M
SOMAVERT	2	ST; SP
STRENSIQ	2	ST; SP
SYNAREL	2	
TEPEZZA	3	PA; ST; SP
TERLIVAZ	3	SP
TESTIM	E	M
TESTONE CIK	E	
TESTOPEL	3	ST; SP
<i>testosterone cypionate</i>	1	ST
<i>testosterone enanthate</i>	1	ST

Drug Name	Drug Tier	Requirements / Limits
TESTOSTERONE IMPLANT	3	ST
<i>testosterone transdermal gel</i>	1	ST; QL
<i>testosterone transdermal gel in metered-dose pump 10 mg/0.5 gram /actuation</i>	1	ST; QL
<i>testosterone transdermal gel in metered-dose pump 12.5 mg/ 1.25 gram (1 %), 20.25 mg/1.25 gram (1.62 %)</i>	1	ST; M; QL
<i>testosterone transdermal gel in packet</i>	1	ST; M; QL
<i>testosterone transdermal solution in metered pump w/app</i>	1	ST; M; QL
TLANDO	E	M
<i>tolvaptan</i>	1	PA; ST; SP; QL
VAPRISOL IN 5 % DEXTROSE	3	
<i>vasopressin</i>	1	
VASOPRESSIN IN 0.9 % SOD CHLOR	3	
VASOPRESSIN IN DEXTROSE 5 %	3	
VIMIZIM	2	ST; SP
VOGELXO TRANSDERMAL GEL	3	ST; QL

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Drug Name	Drug Tier	Requirements / Limits
VOGELXO TRANSDERMAL GEL IN METERED-DOSE PUMP	3	ST; M; QL
VOGELXO TRANSDERMAL GEL IN PACKET	3	ST; M; QL
VOXZOGO	3	PA; ST; SP
VPRIV	E	SP
XYOSTED	3	ST; QL
ZEMPLAR	3	M
<i>zoledronic acid</i>	1	SP
<i>zoledronic acid-mannitol-water</i>	1	SP
ZOLEDRONIC AC-MANNITOL-0.9NACL	3	SP
NON-INSULIN HYPOGLYCEMIC AGENTS		
<i>acarbose oral tablet 100 mg, 25 mg</i>	1	M
<i>acarbose oral tablet 50 mg</i>	1	
ACTOPLUS MET	3	ST; M; QL
ACTOS	3	ST; M; QL
ALOGLIPTIN	E	M
ALOGLIPTIN-METFORMIN	E	M
ALOGLIPTIN-PIOGLITAZONE	E	M
BRENZAVVY	E	M
BYDUREON BCISE	2	ST; M; QL
BYETTA	2	ST; M; QL

Drug Name	Drug Tier	Requirements / Limits
CYCLOSET	3	M
DAPAGLIFLOZ PROPANED-METFORMIN	E	
DAPAGLIFLOZIN PROPANEDIOL	E	
DM2	E	
DUETACT	3	ST; M; QL
FARXIGA	2	ST; M; QL
<i>glimepiride</i>	1	M
<i>glipizide oral tablet 10 mg, 5 mg</i>	1	M
GLIPIZIDE ORAL TABLET 2.5 MG	E	
<i>glipizide oral tablet extended release 24hr</i>	1	M
<i>glipizide-metformin</i>	1	M
GLUCOTROL XL	3	M
GLUMETZA	E	M
<i>glyburide</i>	1	M
<i>glyburide micronized</i>	1	M
<i>glyburide-metformin</i>	1	M
GLYXAMBI	2	ST; M; QL
INPEFA	E	M
INVOKAMET	E	M
INVOKAMET XR	E	M
INVOKANA	E	M
JANUMET	2	ST; M; QL
JANUMET XR	2	ST; M; QL
JANUVIA	2	ST; M; QL
JARDIANCE	2	ST; M; QL

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
JENTADUETO	E	M
JENTADUETO XR	E	M
KAZANO	E	M
<i>metformin oral solution</i>	1	ST; M
<i>metformin oral tablet 1,000 mg, 500 mg, 850 mg</i>	1	
METFORMIN ORAL TABLET 625 MG	E	M
<i>metformin oral tablet extended release 24 hr</i>	1	M; QL
<i>metformin oral tablet extended release 24hr</i>	1	ST; M; QL
<i>metformin oral tablet, er gast. retention 24 hr</i>	1	ST; QL
<i>miglitol</i>	1	M
MOUNJARO	2	ST; M; QL
<i>nateglinide</i>	1	M
NESINA	E	M
ONGLYZA	E	M
OSENI	3	ST; M; QL
OZEMPIC	2	ST; M; QL
<i>pioglitazone</i>	1	M; QL
<i>pioglitazone-glimepiride</i>	1	M; QL
<i>pioglitazone-metformin</i>	1	M; QL
PRECOSE	3	M
QTERN	E	M

Drug Name	Drug Tier	Requirements / Limits
<i>repaglinide</i>	1	M
RIOMET	3	ST; M
RIOMET ER	3	ST; M
RYBELSUS	2	ST; M; QL
<i>saxagliptin</i>	1	ST; M; QL
<i>saxagliptin-metformin</i>	1	ST; M; QL
SEGLUROMET	2	ST; M; QL
SITAGLIPTIN	E	M
STEGLATRO	2	ST; M; QL
STEGLUJAN	E	M
SYMLINPEN 120	2	ST; M; QL
SYMLINPEN 60	2	ST; M; QL
SYNJARDY	2	ST; M; QL
SYNJARDY XR	2	ST; M; QL
TRADJENTA	E	M
TRIJARDY XR	2	ST; M
TRULICITY	2	ST; M; QL
VICTOZA 2-PAK	E	M
VICTOZA 3-PAK	E	M
XIGDUO XR	2	ST; M; QL
ZITUVIO	E	M
THYROID HORMONES		
<i>adthyza oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg</i>	1	
ADTHYZA ORAL TABLET 130 MG, 16.25 MG, 32.5 MG, 65 MG, 97.5 MG	E	M
ARMOUR THYROID	2	M

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
CYTOMEL	E	M
ERMEZA	3	ST; M
<i>euthyrox</i>	1	M
<i>levo-t</i>	1	M
LEVOTHYROXINE INTRAVENOUS	3	
LEVOTHYROXINE ORAL CAPSULE	E	M
<i>levothyroxine oral tablet</i>	1	M
<i>levoxyl</i>	1	M
<i>liothyronine intravenous</i>	1	
<i>liothyronine oral</i>	1	M
<i>niva thyroid</i>	1	M
<i>np thyroid</i>	1	M
SYNTHROID	E	M
THYQUIDITY	E	M
<i>thyroid (pork)</i>	1	M
TIROSINT	E	M
TIROSINT-SOL	E	M
<i>unithroid</i>	1	M

GASTROENTEROLOGY

ANTIDIARRHEALS & ANTISPASMODICS

<i>anaspaz</i>	1	
<i>anti-diarrheal (loperamide)</i>	E	
<i>atropine</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>atropine in 0.9 % sod chloride intravenous syringe 0.8 mg/2 ml (0.4 mg/ml)</i>	1	
ATROPINE IN 0.9 % SOD CHLORIDE INTRAVENOUS SYRINGE 1 MG/2.5 ML (0.4 MG/ML), 1.2 MG/3 ML (0.4 MG/ML)	3	
BENTYL	3	
<i>chlordiazepoxide-clidinium</i>	1	
CUVPOSA	E	
DARTISLA	E	M
<i>dicyclomine</i>	1	
<i>diphenoxylate-atropine</i>	1	
DONNATAL	3	
<i>ed-spaz</i>	1	
GLYCATE	3	M
<i>glycopyrrolate (pf)</i>	1	
GLYCOPYRROLAT E (PF) IN WATER INJECTION	3	
<i>glycopyrrolate (pf) in water intravenous syringe 0.4 mg/2 ml (0.2 mg/ml), 1 mg/5 ml (0.2 mg/ml)</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
GLYCOPYRROLAT E (PF) IN WATER INTRAVENOUS SYRINGE 0.6 MG/3 ML (0.2 MG/ML)	3	
<i>glycopyrrolate injection</i>	1	
GLYCOPYRROLAT E INTRAVENOUS	3	
<i>glycopyrrolate oral</i>	1	M
GLYRX-PF	3	
HYOSCYAMINE SULFATE INJECTION	3	
<i>hyoscyamine sulfate oral drops</i>	1	
<i>hyoscyamine sulfate oral elixir</i>	1	
<i>hyoscyamine sulfate oral tablet</i>	1	
<i>hyoscyamine sulfate oral tablet extended release 12 hr</i>	1	M
<i>hyoscyamine sulfate oral tablet, disintegrating</i>	1	
<i>hyoscyamine sulfate sublingual</i>	1	
<i>hyosyne</i>	1	
IMODIUM A-D	E	
IMODIUM MULTI- SYMPTOM RELIEF	E	
LEVBID	3	M
LEVSIN	3	

Drug Name	Drug Tier	Requirements / Limits
LEVSIN/SL	3	
LIBRAX (WITH CLIDINIUM)	E	
LOMOTIL	3	
<i>loperamide</i>	E	
<i>methscopolamine</i>	1	
MOTOFEN	3	
MYTESI	E	SP
NULEV	3	
<i>opium tincture</i>	1	
<i>oscimin</i>	1	
<i>oscimin sl</i>	1	
PEPTO-BISMOL	E	
PEPTO-BISMOL MAX ST	E	
<i>phenobarb-hyoscy- atropine-scop</i>	1	
<i>phenohydro</i>	1	
PROMELLA	E	
ROBINUL	3	M
ROBINUL FORTE	3	M
SYMAX DUOTAB	3	
<i>symax fastabs</i>	1	
<i>symax-sl</i>	1	
<i>symax-sr</i>	1	M
MISCELLANEOUS AGENTS		
AURYXIA	3	M
FOSRENOL ORAL POWDER IN PACKET	E	

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Drug Name	Drug Tier	Requirements / Limits
FOSRENOL ORAL TABLET, CHEWABLE	E	M
<i>lanthanum</i>	1	M; QL
LOKELMA	2	QL
REVELA ORAL POWDER IN PACKET	3	M; QL
REVELA ORAL TABLET	3	QL
<i>sevelamer carbonate</i>	1	M; QL
<i>sevelamer hcl</i>	1	M; QL
<i>sodium polystyrene sulfonate</i>	1	
<i>sps (with sorbitol)</i>	1	
VELPHORO	2	M; QL
VELTASSA	2	QL
XPHOZAH	E	
MISCELLANEOUS GASTROINTESTINAL AGENTS		
AKYNZEO (FOSNETUPITANT)	3	
AKYNZEO (NETUPITANT)	E	
<i>alosetron</i>	1	M
<i>alvimopan</i>	1	
AMITIZA	E	M
ANA-LEX KIT	3	
ANALPRAM-HC RECTAL CREAM 1-1 %	3	

Drug Name	Drug Tier	Requirements / Limits
ANALPRAM-HC RECTAL CREAM 2.5-1 %	3	ST
ANTIVERT	E	
<i>anucort-hc</i>	1	
ANUSOL-HC	E	
ANZEMET	E	
APONVIE	3	
<i>aprepitant</i>	1	QL
APRISO	3	M
AVSOLA	E	SP
AZULFIDINE	3	M
AZULFIDINE EN-TABS	3	M
<i>balsalazide</i>	1	M
BARHEMSYS	3	
<i>betaine</i>	1	ST; SP
BONJESTA	E	
<i>budesonide</i>	1	
BYLVAY	3	PA; ST; SP; QL
CANASA	E	M
CHENODAL	2	PA; ST; SP
CHOLBAM ORAL CAPSULE 250 MG	2	ST; SP
CHOLBAM ORAL CAPSULE 50 MG	2	ST; SP; QL
CIMZIA	E	SP
CIMZIA POWDER FOR RECONST	E	SP
CINVANTI	2	
<i>citrate of magnesia</i>	0	ACA

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Drug Name	Drug Tier	Requirements / Limits
<i>citroma</i>	0	ACA
<i>clearlax</i>	0	ACA
CLENPIQ	E	
COLAZAL	3	M
COMPAZINE	3	
<i>compro</i>	1	
<i>constulose</i>	1	
CORTENEMA	3	
CORTIFOAM	E	
CREON ORAL CAPSULE, DELAYED RELEASE (DR/EC) 12,000-38,000 - 60,000 UNIT, 3,000-9,500- 15,000 UNIT, 36,000-114,000- 180,000 UNIT, 6,000-19,000 - 30,000 UNIT	2	M
CREON ORAL CAPSULE, DELAYED RELEASE (DR/EC) 24,000-76,000 - 120,000 UNIT	2	
<i>cromolyn</i>	1	M
CYSTADANE	E	SP
DELZICOL	E	M
DICLEGIS	3	QL
<i>dimenhydrinate</i>	1	
DIPENTUM	E	M
<i>doxylamine-pyridoxine (vit b6)</i>	1	QL
<i>dronabinol</i>	1	ST

Drug Name	Drug Tier	Requirements / Limits
<i>droperidol</i>	1	
<i>dulcolax (magnesium hydroxide)</i>	0	ACA
EMEND	E	
EMEND (FOSAPREPITANT)	3	
ENTYVIO	2	ST; SP
ENTYVIO PEN	E	SP
<i>enulose</i>	1	
EOHILIA	E	
<i>fosaprepitant</i>	1	
GASTROCROM	3	M
GATTEX 30-VIAL	3	ST; SP
<i>gavilax</i>	0	ACA
<i>gavilyte-c</i>	0	ACA
<i>gavilyte-g</i>	0	ACA
<i>gentle laxative (bisacodyl)</i>	0	ACA
<i>gentlelax</i>	0	ACA
GIMOTI	E	SP
GOLYTELY	3	
<i>granisetron (pf)</i>	1	
<i>granisetron hcl intravenous</i>	1	
<i>granisetron hcl oral</i>	1	QL
<i>hemmorex-hc</i>	1	
<i>hydrocortisone</i>	1	
<i>hydrocortisone acetate</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>hydrocortisone-pramoxine rectal cream 1-1 %</i>	1	
<i>hydrocortisone-pramoxine rectal cream 2.5-1 %, 2.5-1 % (4g)</i>	1	ST
HYDROCORTISON E-PRAMOXINE RECTAL SUPPOSITORY	E	
IBSRELA	E	M
INFLECTRA	2	ST; SP
INFLIXIMAB	E	SP
KINEVAC	2	
KRISTALOSE	3	
<i>lactulose</i>	1	
<i>laxative (bisacodyl) oral tablet</i>	E	
<i>laxative (bisacodyl) oral tablet, delayed release (dr/ec)</i>	0	ACA
<i>laxative peg 3350</i>	0	ACA
LIALDA	E	M
<i>lidocaine hcl-hydrocortison ac rectal cream</i>	1	
LIDOCAINE HCL-HYDROCORTISON AC RECTAL GEL	3	
<i>lidocaine hcl-hydrocortison ac rectal kit</i>	1	
<i>lidocaine-hydrocortisone-aloe</i>	1	

Drug Name	Drug Tier	Requirements / Limits
LINZESS	2	M; QL
LIVMARLI	3	PA; ST; SP
LOTRONEX	E	M
<i>lubiprostone</i>	1	M; QL
<i>magnesium citrate</i>	0	ACA
MARINOL	3	ST
<i>meclizine oral tablet 12.5 mg, 25 mg</i>	E	
MECLIZINE ORAL TABLET 50 MG	E	
<i>mesalamine oral capsule (with del rel tablets)</i>	1	M
<i>mesalamine oral capsule, extended release</i>	1	M
<i>mesalamine oral capsule, extended release 24hr</i>	1	
<i>mesalamine oral tablet, delayed release (dr/ec)</i>	1	M
<i>mesalamine rectal</i>	1	M
<i>mesalamine with cleansing wipe</i>	1	M
<i>metoclopramide hcl</i>	1	
<i>milk of magnesia</i>	0	ACA
<i>milk of magnesia concentrated</i>	0	ACA
MOTEGRITY	E	M
MOVANTIK	2	M; QL
MOVIPREP	E	
<i>natura-lax</i>	0	ACA

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Drug Name	Drug Tier	Requirements / Limits
<i>nitroglycerin</i>	1	
NOVACORT	E	
OCALIVA	2	PA; ST; SP; QL
OMVOH	2	ST; SP
OMVOH PEN	2	ST; SP; QL
<i>ondansetron</i>	1	QL
<i>ondansetron hcl (pf)</i>	1	
<i>ondansetron hcl intravenous</i>	1	
<i>ondansetron hcl oral</i>	1	QL
<i>onelax magnesium citrate</i>	0	ACA
<i>oral saline laxative</i>	0	ACA
PALONOSETRON INTRAVENOUS SOLUTION 0.25 MG/2 ML	3	
<i>palonosetron intravenous solution 0.25 mg/5 ml</i>	1	
<i>palonosetron intravenous syringe</i>	1	
PANCREAZE	2	M
<i>peg 3350-electrolytes</i>	0	ACA
<i>peg3350-sod sul-nacl-kcl-asb-c</i>	0	ACA
<i>peg-electrolyte soln</i>	0	ACA
PENTASA ORAL CAPSULE, EXTENDED RELEASE 250 MG	2	M

Drug Name	Drug Tier	Requirements / Limits
PENTASA ORAL CAPSULE, EXTENDED RELEASE 500 MG	3	M
PERTZYE	E	M
<i>phosphate laxative</i>	0	ACA
PLENVU	E	
<i>polyethylene glycol 3350</i>	0	ACA
<i>powderlax</i>	0	ACA
<i>prochlorperazine</i>	1	
<i>prochlorperazine edisylate</i>	1	
<i>prochlorperazine maleate</i>	1	
PROCORT	3	
PROCTOCORT	3	ST
PROCTOFOAM HC	E	
<i>procto-med hc</i>	1	
<i>proctosol hc</i>	1	
<i>proctozone-hc</i>	1	
<i>purelax</i>	0	ACA
REBYOTA	E	SP
RECTIV	2	
REGLAN	3	
RELISTOR ORAL	2	ST; M
RELISTOR SUBCUTANEOUS	2	ST
RELTONE	E	M
REMICADE	E	SP
RENFLEXIS	E	SP
ROWASA	3	

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Drug Name	Drug Tier	Requirements / Limits
SANCUSO	3	QL
<i>scopolamine base</i>	1	
SFROWASA	3	M
SINCALIDE	3	
SKYRIZI INTRAVENOUS	2	ST; SP
SKYRIZI SUBCUTANEOUS	2	ST; SP; QL
<i>smoothlax</i>	0	ACA
<i>sodium, potassium, mag sulfates</i>	0	ACA
SUCRAID	2	ST; SP
SUFLAVE	E	
<i>sulfasalazine oral tablet</i>	1	
<i>sulfasalazine oral tablet, delayed release (dr/ec)</i>	1	M
SUPREP BOWEL PREP KIT	E	
SUSTOL	3	
SUTAB	E	
SYMPROIC	2	M
SYNDROS	3	ST
TIGAN	3	
TRANSDERM- SCOP	E	
<i>trimethobenzamide</i>	1	
TRULANCE	2	M
UCERIS ORAL	3	
UCERIS RECTAL	2	
URSO 250	3	M

Drug Name	Drug Tier	Requirements / Limits
URSO FORTE	3	M
<i>ursodiol</i>	1	M
VARUBI	2	QL
VELSIPITY	E	SP
VIBERZI	2	M
VIOKACE	2	M
VOWST	3	SP
<i>women's gentle laxative(bisac)</i>	0	ACA
ZELNORM	E	
ZENPEP	2	M
ZYMFENTRA	2	ST; SP; QL
ULCER THERAPY		
ACIPHEX	E	M
<i>amoxicil- clarithromy- lansopraz</i>	1	QL
<i>bismuth subcit k- metronidz-tcn</i>	1	
CARAFATE	E	M
<i>cimetidine hcl</i>	1	M
<i>cimetidine oral tablet 200 mg</i>	E	M
<i>cimetidine oral tablet 300 mg, 400 mg, 800 mg</i>	1	M
CYTOTEC	3	PA; M; QL
DEXILANT	E	M
<i>dexlansoprazole oral capsule, biphasic delayed releas 30 mg</i>	1	ST; M; QL

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Drug Name	Drug Tier	Requirements / Limits
<i>dexlansoprazole oral capsule, biphasic delayed release 60 mg</i>	1	ST; M
<i>esomeprazole magnesium oral capsule, delayed release(dr/ec) 20 mg</i>	1	M; QL
<i>esomeprazole magnesium oral capsule, delayed release(dr/ec) 40 mg</i>	1	M
<i>esomeprazole magnesium oral granules dr for susp in packet 10 mg, 20 mg</i>	1	ST; M; QL
<i>esomeprazole magnesium oral granules dr for susp in packet 40 mg</i>	1	ST; M
<i>esomeprazole sodium</i>	1	
<i>famotidine (pf)</i>	1	
<i>famotidine (pf)-nacl (iso-os)</i>	1	
<i>famotidine intravenous</i>	1	
<i>famotidine oral suspension for reconstitution</i>	1	M
<i>famotidine oral tablet 20 mg</i>	E	M
<i>famotidine oral tablet 40 mg</i>	1	M
KONVOMEF	E	M

Drug Name	Drug Tier	Requirements / Limits
<i>lansoprazole oral capsule, delayed release(dr/ec) 15 mg</i>	E	M
<i>lansoprazole oral capsule, delayed release(dr/ec) 30 mg</i>	1	M
<i>lansoprazole oral tablet, disintegrat, delay rel 15 mg</i>	1	ST; M; QL
<i>lansoprazole oral tablet, disintegrat, delay rel 30 mg</i>	1	ST; M
<i>misoprostol</i>	1	PA; M; QL
NEXIUM	E	M
NEXIUM 24HR	E	
NEXIUM PACKET	E	M
<i>nizatidine</i>	1	M
OMECLAMOX-PAK	3	QL
<i>omeprazole magnesium</i>	E	
<i>omeprazole oral capsule, delayed release(dr/ec) 10 mg</i>	1	QL
<i>omeprazole oral capsule, delayed release(dr/ec) 20 mg</i>	1	M; QL
<i>omeprazole oral capsule, delayed release(dr/ec) 40 mg</i>	1	M
<i>omeprazole oral tablet, delayed release (dr/ec)</i>	E	
<i>omeprazole oral tablet, disintegrat, delay rel</i>	E	

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Drug Name	Drug Tier	Requirements / Limits
<i>omeprazole-sodium bicarbonate oral capsule 20-1.1 mg-gram</i>	E	M
<i>omeprazole-sodium bicarbonate oral capsule 40-1.1 mg-gram</i>	1	ST
<i>omeprazole-sodium bicarbonate oral packet 20-1,680 mg</i>	1	ST; QL
<i>omeprazole-sodium bicarbonate oral packet 40-1,680 mg</i>	1	ST
<i>pantoprazole intravenous</i>	1	
<i>pantoprazole oral granules dr for susp in packet</i>	1	ST; M
<i>pantoprazole oral tablet, delayed release (dr/ec) 20 mg</i>	1	M; QL
<i>pantoprazole oral tablet, delayed release (dr/ec) 40 mg</i>	1	M
PEPCID ORAL TABLET 20 MG	E	M
PEPCID ORAL TABLET 40 MG	3	M
PREVACID	E	M
PREVACID 24HR	E	
PREVACID SOLUTAB	E	M
PRILOSEC	E	M

Drug Name	Drug Tier	Requirements / Limits
PRILOSEC OTC	E	
PROTONIX INTRAVENOUS	E	
PROTONIX ORAL	E	M
PYLERA	E	
RABEPRAZOLE ORAL CAPSULE, DELAYED REL SPRINKLE	E	M
<i>rabeprazole oral tablet, delayed release (dr/ec)</i>	1	M
<i>sucralfate</i>	1	M
TALICIA	2	QL
VOQUEZNA	3	ST
VOQUEZNA DUAL PAK	E	
VOQUEZNA TRIPLE PAK	E	
ZEGERID	E	M
ZEGERID OTC	E	

IMMUNOLOGY, VACCINES & BIOTECHNOLOGY

ANTIVIRALS

<i>ribavirin</i>	1	SP
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BIOTECHNOLOGY DRUGS

APHEXDA	E	SP
ARANESP (IN POLYSORBATE)	E	SP
ARCALYST	3	ST; SP; QL
EPOGEN	E	SP
FULPHILA	2	ST; SP; QL

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
FYLNETRA	E	SP
GRANIX	E	SP
ILARIS (PF)	2	PA; ST; SP
LEUKINE	2	ST; SP
MIRCERA	E	SP
MOZOBIL	3	SP
NEULASTA	E	SP
NEULASTA ONPRO	E	SP
NEUPOGEN	E	SP
NIVESTYM	2	ST; SP
NYVEPRIA	E	SP
<i>plerixafor</i>	1	SP
PROCRIT	2	ST; SP
PROLEUKIN	2	ST; SP
REBLOZYL	3	ST; SP
RELEUKO	E	SP
RETACRIT	2	ST; SP
ROLVEDON	E	SP
STIMUFEND	E	SP
UDENYCA	E	SP
UDENYCA AUTOINJECTOR	E	SP
UDENYCA ONBODY	E	SP
ZARXIO	E	SP
ZIEXTENZO	2	ST; SP; QL
ZYNTEGLO	2	ST; SP
GROWTH HORMONES		
EGRIFTA SV	2	PA; SP
GENOTROPIN	2	ST; SP

Drug Name	Drug Tier	Requirements / Limits
GENOTROPIN	2	ST; SP
MINIQUICK		
HUMATROPE	E	SP
NGENLA	E	SP; M
NORDITROPIN FLEXP	E	SP
NUTROPIN AQ NUSPIN	E	SP
OMNITROPE	2	ST; SP
SEROSTIM	2	PA; SP
SKYTROFA	E	SP
SOGROYA	E	SP
ZOMACTON	E	SP
INTERFERONS		
ACTIMMUNE	2	ST; SP
ALFERON N	2	
BESREMI	E	SP
PEGASYS	2	SP; QL
MULTIPLE SCLEROSIS AGENTS		
AUBAGIO	E	SP
AVONEX	2	ST; SP; QL
BAFIERTAM	2	ST; SP; QL
BETASERON	2	ST; SP; QL
BRIUMVI	E	SP
COPAXONE	3	ST; SP; QL
<i>dimethyl fumarate</i>	1	ST; SP; QL
<i> fingolimod</i>	1	ST; SP; QL
GILENYA	E	SP
<i>glatiramer</i>	1	ST; SP; QL
<i>glatopa</i>	1	ST; SP; QL
KESIMPTA PEN	2	ST; SP; QL

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
LEMTRADA	3	ST; SP; QL
MAVENCLAD (10 TABLET PACK)	3	ST; SP; QL
MAVENCLAD (4 TABLET PACK)	3	ST; SP; QL
MAVENCLAD (5 TABLET PACK)	3	ST; SP; QL
MAVENCLAD (6 TABLET PACK)	3	ST; SP; QL
MAVENCLAD (7 TABLET PACK)	3	ST; SP; QL
MAVENCLAD (8 TABLET PACK)	3	ST; SP; QL
MAVENCLAD (9 TABLET PACK)	3	ST; SP; QL
MAYZENT	2	ST; SP; QL
MAYZENT STARTER(FOR 1MG MAINT)	2	ST; SP; QL
MAYZENT STARTER(FOR 2MG MAINT)	2	ST; SP; QL
OCREVUS	2	ST; SP; QL
PLEGRIDY	2	ST; SP; QL
PONVORY	2	ST; SP; QL
PONVORY 14-DAY STARTER PACK	2	ST; SP; QL
REBIF (WITH ALBUMIN)	2	ST; SP; QL
REBIF REBIDOSE	2	ST; SP; QL
REBIF TITRATION PACK	2	ST; SP; QL
TASCENSO ODT	E	SP
TECFIDERA	E	SP

Drug Name	Drug Tier	Requirements / Limits
<i>teriflunomide</i>	1	ST; SP; QL
VUMERITY	2	ST; SP; QL
VACCINES & MISCELLANEOUS IMMUNOLOGICALS		
ABRYSVO (PF)	0	ACA
ACAM2000 (NATIONAL STOCKPILE)	2	
ACTHIB (PF)	0	ACA
ADACEL(TDAP ADOLESN/ADULT)(PF)	0	ACA
AFLURIA QD 2023-24(3YR UP)(PF)	0	ACA
AFLURIA QUAD 2023-2024(6MO UP)	0	ACA
ALYGLO	E	SP
AREXVY (PF)	0	ACA
ASCENIV	3	PA; ST; SP
ATGAM	2	PA; ST
BABYBIG	3	
BCG VACCINE, LIVE (PF)	E	
BEXSERO	0	ACA
BIOTHRAX	E	
BIVIGAM	3	PA; ST; SP
BOOSTRIX TDAP	0	ACA
BOTOX	E	
BOTOX COSMETIC	E	

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Drug Name	Drug Tier	Requirements / Limits
COMIRNATY 2023-24 (12Y UP)(PF)	0	ACA
CUTAQUIG	E	SP
CUVITRU	3	PA; ST; SP
CYTOGAM	2	PA; ST; SP
DAPTACEL (DTAP PEDIATRIC) (PF)	0	ACA
DAXXIFY	E	SP
DENGVAXIA (PF)	0	ACA
DYSPORE	3	ST; SP
ENGERIX-B (PF)	0	ACA
ENGERIX-B PEDIATRIC (PF)	0	ACA
FLEBOGAMMA DIF	3	PA; ST; SP
FLUAD QUAD 2023-24(65Y UP)(PF)	0	ACA
FLUARIX QUAD 2023-2024 (PF)	0	ACA
FLUBLOK QUAD 2023-2024 (PF)	0	ACA
FLUCELVAX QUAD 2023-2024	0	ACA
FLUCELVAX QUAD 2023-2024 (PF)	0	ACA
FLULAVAL QUAD 2023-2024 (PF)	0	ACA
FLUMIST QUAD 2023-2024	0	ACA
FLUZONE HIGHDOSE QUAD 23-24 PF	0	ACA

Drug Name	Drug Tier	Requirements / Limits
FLUZONE QUAD 2023-2024	0	ACA
FLUZONE QUAD 2023-2024 (PF)	0	ACA
GAMASTAN	2	SP
GAMMAGARD LIQUID	2	PA; ST; SP
GAMMAGARD S-D (IGA < 1 MCG/ML)	2	PA; ST; SP
GAMMAKED	E	SP
GAMMAPLEX	3	PA; ST; SP
GAMMAPLEX (WITH SORBITOL)	3	PA; ST; SP
GAMUNEX-C	2	PA; ST; SP
GARDASIL 9 (PF)	0	ACA
GRASTEK	2	ST; M
HAVRIX (PF)	0	ACA
HEPAGAM B	2	
HEPLISAV-B (PF)	0	ACA
HIBERIX (PF)	0	ACA
HIZENTRA	3	PA; ST; SP
HYPERHEP B	2	
HYPERHEP B NEONATAL	2	
HYPERRAB (PF)	2	
HYPERTET (PF)	2	
HYQVIA	3	PA; ST; SP
IMOGAM RABIES-HT (PF)	2	
IMOVAX RABIES VACCINE (PF)	E	

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
INFANRIX (DTAP) (PF)	0	ACA
IPOL	0	ACA
IXCHIQ (PF)	0	
IXIARO (PF)	E	
JEUVEAU	E	
JYNNEOS (PF)	2	
KEDRAB (PF)	3	
KINRIX (PF)	0	ACA
MENQUADFI (PF)	0	ACA
MENVEO A-C-Y-W-135-DIP (PF)	0	ACA
M-M-R II (PF)	0	ACA
MODERNA COVID 23-24(6M-11Y)PF	0	ACA
MYOBLOC	2	ST; SP
NABI-HB	3	
NOVAVAX COVID 2023-24(PF)(EUA)	0	ACA
OCTAGAM	3	PA; ST; SP
ODACTRA	2	ST; M
ORALAIR	2	ST
PALFORZIA (LEVEL 1)	E	SP
PALFORZIA (LEVEL 2)	E	SP
PALFORZIA (LEVEL 3)	E	SP
PALFORZIA (LEVEL 4)	E	SP
PALFORZIA (LEVEL 5)	E	SP

Drug Name	Drug Tier	Requirements / Limits
PALFORZIA (LEVEL 6)	E	SP
PALFORZIA (LEVEL 7)	E	SP
PALFORZIA (LEVEL 8)	E	SP
PALFORZIA (LEVEL 9)	E	SP
PALFORZIA (LEVEL 10)	E	SP
PALFORZIA INITIAL DOSE	E	SP
PALFORZIA LEVEL 11 MAINTENANCE	E	SP
PANZYGA	3	PA; ST; SP
PEDIARIX (PF)	0	ACA
PEDVAX HIB (PF)	0	ACA
PENBRAYA (PF)	0	
PENTACEL (PF)	0	ACA
PFIZER COVID 2023-24(5Y-11Y)PF	0	ACA
PFIZER COVID 2023-24(6MO-4Y)PF	0	ACA
PNEUMOVAX-23	0	ACA
PREHEVBRIO (PF)	0	ACA
PREVNAR 20 (PF)	0	ACA
PRIORIX (PF)	0	ACA
PRIVIGEN	3	PA; ST; SP
PROQUAD (PF)	0	ACA
QUADRACEL (PF)	0	ACA
RABAVERT (PF)	E	

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Drug Name	Drug Tier	Requirements / Limits
RAGWITEK	2	ST; M
RECOMBIVAX HB (PF)	0	ACA
ROTARIX	0	ACA
ROTATEQ VACCINE	0	ACA
SHINGRIX (PF)	0	ACA
SPIKEVAX 2023-2024(12Y UP)(PF)	0	ACA
STAMARIL (PF)	E	
TDVAX	0	ACA
TENIVAC (PF)	0	ACA
THYMOGLOBULIN	2	
TICE BCG	2	
TICOVAC	E	
TRUMENBA	0	ACA
TWINRIX (PF)	0	ACA
TYPHIM VI	E	
VAQTA (PF)	0	ACA
VARIVAX (PF)	0	ACA
VARIZIG	2	
VAXCHORA VACCINE	E	
VAXELIS (PF)	0	ACA
VAXNEUVANCE (PF)	0	ACA
VIVOTIF	E	
XEMBIFY	2	PA; ST; SP
XEOMIN	E	SP
YF-VAX (PF)	E	
ZINPLAVA	3	

Drug Name	Drug Tier	Requirements / Limits
IMMUNOLOGY		
INTERLEUKINS		
<i>imiquimod</i>	1	
QUIDROXZAR	E	
QUIHOXAXIA	E	
QUIHOXVAR	E	
ZYCLARA	E	
MUSCULOSKELETAL & RHEUMATOLOGY		
GOUT THERAPY		
<i>allopurinol oral tablet 100 mg, 300 mg</i>	1	M
ALLOPURINOL ORAL TABLET 200 MG	E	M
<i>allopurinol sodium</i>	1	
<i>aloprim</i>	1	
<i>colchicine oral capsule</i>	E	M
<i>colchicine oral tablet</i>	1	
COLCRYS	E	M
<i>febuxostat</i>	1	ST; M
GLOPERBA	3	
KRYSTEXXA	2	PA; ST; SP
MITIGARE	2	ST; M
<i>probenecid</i>	1	M
<i>probenecid-colchicine</i>	1	
ULORIC	E	M
ZYLOPRIM	3	M

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Drug Name	Drug Tier	Requirements / Limits
OSTEOPOROSIS THERAPY		
ACTONEL	3	ST; M; QL
<i>alendronate</i>	1	M; QL
AELVIA	3	ST; M; QL
BINOSTO	3	ST; M; QL
EVENITY	E	SP
EVISTA	3	M
FORTEO	2	ST; SP; QL
FOSAMAX	3	ST; M; QL
FOSAMAX PLUS D	3	ST; M; QL
<i>ibandronate intravenous</i>	1	SP
<i>ibandronate oral</i>	1	M; QL
PROLIA	E	SP
<i>raloxifene</i>	0	M
<i>risedronate</i>	1	M; QL
<i>teriparatide subcutaneous pen injector 20 mcg/dose (600mcg/2.4ml)</i>	1	ST; SP; QL
TERIPARATIDE SUBCUTANEOUS PEN INJECTOR 20 MCG/DOSE (620MCG/2.48ML)	3	ST; SP; QL
TYMLOS	2	ST; SP; QL
OTHER RHEUMATOLOGICALS		
ABRILADA(CF)	E	SP
ABRILADA(CF) PEN	E	SP
ACTEMRA ACTPEN	2	ST; SP; QL

Drug Name	Drug Tier	Requirements / Limits
ACTEMRA INTRAVENOUS	2	ST; SP
ACTEMRA SUBCUTANEOUS	2	ST; SP; QL
ADALIMUMAB-AACF	E	SP
ADALIMUMAB-AATY	E	SP
ADALIMUMAB-ADAZ	2	ST; SP; QL
ADALIMUMAB-ADB M	E	SP
ADALIMUMAB-ADB M(CF) PEN CROHNS	E	SP
ADALIMUMAB-ADB M(CF) PEN PS-UV	E	SP
ADALIMUMAB-FKJP	E	SP; M
AMJEVITA(CF)	E	SP
AMJEVITA(CF) AUTOINJECTOR	E	SP
ARAVA	3	M; QL
BENLYSTA INTRAVENOUS	2	ST; SP
BENLYSTA SUBCUTANEOUS	2	ST; SP; QL
CUPRIMINE	E	M
CYLTEZO(CF)	2	ST; SP; QL
CYLTEZO(CF) PEN	2	ST; SP; QL
CYLTEZO(CF) PEN CROHN'S-UC-HS	2	ST; SP; QL
CYLTEZO(CF) PEN PSORIASIS-UV	2	ST; SP; QL

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Drug Name	Drug Tier	Requirements / Limits
DEPEN TITRATABS	3	ST; M
ENBREL	2	ST; SP; QL
ENBREL MINI	2	ST; SP; QL
ENBREL SURECLICK	2	ST; SP; QL
HADLIMA	E	SP
HADLIMA PUSH TOUCH	E	SP
HADLIMA(CF)	E	SP
HADLIMA(CF) PUSH TOUCH	E	SP
HULIO(CF)	E	SP; M
HULIO(CF) PEN	E	SP; M
HUMIRA (ONLY NDCS STARTING WITH 00074)	2	ST; SP; QL
HUMIRA PEN (ONLY NDCS STARTING WITH 00074)	2	ST; SP; QL
HUMIRA(CF) (ONLY NDCS STARTING WITH 00074)	2	ST; SP; QL
HUMIRA(CF) PEDI CROHNS STARTER (ONLY NDCS STARTING WITH 00074)	2	ST; SP; QL
HUMIRA(CF) PEN (ONLY NDCS STARTING WITH 00074)	2	ST; SP; QL

Drug Name	Drug Tier	Requirements / Limits
HUMIRA(CF) PEN CROHNS-UC-HS (ONLY NDCS STARTING WITH 00074)	2	ST; SP; QL
HUMIRA(CF) PEN PEDIATRIC UC (ONLY NDCS STARTING WITH 00074)	2	ST; SP; QL
HUMIRA(CF) PEN PSOR-UV-ADOL HS (ONLY NDCS STARTING WITH 00074)	2	ST; SP; QL
HYRIMOZ	E	SP; M
HYRIMOZ PEN	E	SP; M
HYRIMOZ PEN CROHN'S-UC STARTER	2	ST; SP; QL
HYRIMOZ PEN PSORIASIS STARTER	2	ST; SP; QL
HYRIMOZ(CF)	2	ST; SP; QL
HYRIMOZ(CF) PEDI CROHN STARTER	2	ST; SP; QL
HYRIMOZ(CF) PEN	2	ST; SP; QL
IDACIO(CF)	E	SP
IDACIO(CF) PEN	E	SP
IDACIO(CF) PEN CROHN-UC STARTR	E	SP
IDACIO(CF) PEN PSORIASIS START	E	SP

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Drug Name	Drug Tier	Requirements / Limits
KEVZARA	E	SP
KINERET	E	SP
LEFLUNICLO	E	
<i>leflunomide</i>	1	M; QL
OLUMIANT	E	SP
ORENCIA	E	SP
ORENCIA (WITH MALTOSE)	E	SP
ORENCIA CLICKJECT	E	SP
OTEZLA	2	ST; SP; QL
OTEZLA STARTER	2	ST; SP; QL
OTREXUP (PF)	E	M
<i>penicillamine</i>	1	ST; M
RASUVO (PF)	2	ST; M
RIDAURA	2	M
RINVOQ	2	ST; SP; QL
SAVELLA	2	ST; M; QL
SIMLANDI(CF) AUTOINJECTOR	E	SP
SIMPONI ARIA	3	ST; SP
SIMPONI SUBCUTANEOUS PEN INJECTOR 100 MG/ML	2	ST; SP; QL
SIMPONI SUBCUTANEOUS PEN INJECTOR 50 MG/0.5 ML	E	SP
SIMPONI SUBCUTANEOUS SYRINGE 100 MG/ML	2	ST; SP; QL

Drug Name	Drug Tier	Requirements / Limits
SIMPONI SUBCUTANEOUS SYRINGE 50 MG/0.5 ML	E	SP
XELJANZ	2	ST; SP; QL
XELJANZ XR	2	ST; SP; QL
YUFLYMA(CF)	E	SP
YUFLYMA(CF) AI CROHN'S-UC-HS	E	SP
YUFLYMA(CF) AUTOINJECTOR	E	SP
YUSIMRY(CF) PEN	E	SP

OBSTETRICS & GYNECOLOGY

DIAPHRAGMS AND OTHER NON-ORAL CONTRACEPTIVES

CAYA CONTOURED	0	ACA
DUREX AVANTI BARE REAL FEEL	0	ACA
FC2 FEMALE CONDOM	0	ACA
FEMCAP	0	ACA
KYLEENA	0	ACA
LILETTA	0	ACA
MIRENA	0	ACA
PARAGARD T 380A	0	ACA
SKYLA	0	ACA
TRUSTEX LUBRICATED CONDOMS	0	ACA

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Drug Name	Drug Tier	Requirements / Limits
TRUSTEX-RIA NON-LUB CONDOMS	0	ACA
WIDE-SEAL DIAPHRAGM	0	ACA
ESTROGENS & PROGESTINS		
ACTIVELLA	3	ST; M
<i>amabelz</i>	1	ST; M
ANGELIQ	3	M
BIJUVA ORAL CAPSULE 0.5-100 MG	E	
BIJUVA ORAL CAPSULE 1-100 MG	E	M
<i>camila</i>	0	M; ACA
CLIMARA	3	ST; M; QL
CLIMARA PRO	E	M
COMBIPATCH	2	ST; M
<i>covaryx</i>	1	M
<i>covaryx h.s.</i>	1	M
CRINONE VAGINAL GEL 4 %	E	
CRINONE VAGINAL GEL 8 %	2	SP
<i>deblitane</i>	0	M; ACA
DELESTROGEN	3	ST
DEPO-ESTRADIOL	2	ST
DEPO-PROVERA	0	M; QL
DEPO-SUBQ PROVERA 104	0	M; ACA; QL
DIVIGEL	E	M
<i>dotti</i>	1	ST; M; QL

Drug Name	Drug Tier	Requirements / Limits
DUAVEE	2	M
<i>eemt</i>	1	M
<i>eemt hs</i>	1	M
ELESTRIN	E	M
<i>emzahh</i>	0	ACA
ENDOMETRIN	2	
<i>errin</i>	0	M; ACA
ESTRACE ORAL	3	ST; M
ESTRACE VAGINAL	E	M
ESTRADIOL IMPLANT	3	ST; M
<i>estradiol oral</i>	1	ST; M
<i>estradiol transdermal</i>	1	ST; M; QL
<i>estradiol vaginal</i>	1	M
<i>estradiol valerate</i>	1	ST
<i>estradiol- norethindrone acet</i>	1	ST; M
ESTRING	E	M
ESTROGEL	E	M
<i>estrogens- methyltestosterone</i>	1	M
EVAMIST	E	M
FEMRING	E	M
<i>fyavolv</i>	1	ST; M
<i>heather</i>	0	M; ACA
<i>hydroxyprogesterone caproate</i>	1	
IMVEXXY MAINTENANCE PACK	E	M

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Drug Name	Drug Tier	Requirements / Limits
IMVEXXY STARTER PACK	E	M
<i>incassia</i>	0	M; ACA
<i>jencycla</i>	0	M; ACA
<i>jinteli</i>	1	ST; M
<i>lyleq</i>	0	M; ACA
<i>lyllana</i>	1	ST; M; QL
<i>lyza</i>	0	M; ACA
<i>medroxyprogesterone intramuscular</i>	0	M; ACA; QL
<i>medroxyprogesterone oral</i>	1	M
MENEST	E	M
MENOSTAR	3	ST; M; QL
<i>mimvey</i>	1	ST; M
MINIVELLE	E	M
<i>nora-be</i>	0	ACA
<i>norethindrone (contraceptive)</i>	0	M; ACA
<i>norethindrone acetate</i>	1	M
<i>norethindrone ac-eth estradiol</i>	1	ST; M
OPILL	0	
PREMARIN INJECTION	2	ST
PREMARIN ORAL	E	M
PREMARIN VAGINAL	2	M
PREMPHASE	E	M
PREMPRO	E	M
<i>progesterone</i>	1	SP

Drug Name	Drug Tier	Requirements / Limits
<i>progesterone micronized</i>	1	M
PROMETRIUM	3	M
PROVERA	3	M
<i>sharobel</i>	0	M; ACA
<i>tulana</i>	0	M; ACA
VAGIFEM	E	M
VIVELLE-DOT	E	M
<i>yuvafem</i>	1	M
MISCELLANEOUS OB/GYN		
ANNOVERA	0	ACA; QL
CERVIDIL	3	
CLEOCIN	3	
<i>clindamycin phosphate</i>	1	
CLINDESSE	3	
<i>eluryng</i>	0	M; ACA
<i>enilloring</i>	0	M; ACA
<i>etonogestrel-ethinyl estradiol</i>	0	M; ACA
<i>fem ph</i>	1	
GYNAZOLE-1	3	
<i>haloette</i>	0	M; ACA
INTRAROSA	E	M
<i>metronidazole</i>	1	
<i>miconazole-3</i>	1	
MIFEPREX	E	
<i>mifepristone</i>	E	
MYFEMBREE	2	ST; M
NEXPLANON	0	ACA

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Drug Name	Drug Tier	Requirements / Limits
<i>norelgestromin-ethin. estradiol</i>	0	M; ACA
NUVARING	E	M
NUVESSA	3	
ORIAHNN	2	ST; M
OSPHENA	E	M
PHEXXI	E	
PREPIDIL	3	
RELAGARD	3	
<i>terconazole</i>	1	
<i>tranexamic acid</i>	1	
TRIMO-SAN JELLY	2	
TWIRLA	E	M
<i>vandazole</i>	1	
VCF CONTRACEPTIVE FILM	0	ACA
VCF CONTRACEPTIVE GEL	0	ACA
VEOZAH	E	M
XACIATO	2	
<i>xulane</i>	0	M; ACA
<i>zafemy</i>	0	M; ACA
ORAL CONTRACEPTIVES & RELATED AGENTS		
<i>afirmelle</i>	0	M; ACA
<i>after pill</i>	0	M; ACA; QL
AFTERA	0	M; QL
<i>altavera (28)</i>	0	M; ACA
<i>alyacen 1/35 (28)</i>	0	M; ACA

Drug Name	Drug Tier	Requirements / Limits
<i>alyacen 7/7/7 (28)</i>	0	M; ACA
<i>amethia</i>	0	M; ACA
<i>amethyst (28)</i>	0	M; ACA
<i>apri</i>	0	M; ACA
<i>aranelle (28)</i>	0	M; ACA
<i>ashlyna</i>	0	M; ACA
<i>aubra</i>	0	M; ACA
<i>aubra eq</i>	0	M; ACA
<i>aurovela 1.5/30 (21)</i>	0	M; ACA
<i>aurovela 1/20 (21)</i>	0	M; ACA
<i>aurovela 24 fe</i>	0	M; ACA
<i>aurovela fe 1.5/30 (28)</i>	0	M; ACA
<i>aurovela fe 1-20 (28)</i>	0	M; ACA
<i>aviane</i>	0	M; ACA
<i>ayuna</i>	0	M; ACA
<i>azurette (28)</i>	0	M; ACA
BALCOLTRA	E	M
<i>balziva (28)</i>	0	M; ACA
BEYAZ	0	M
<i>blisovi 24 fe</i>	0	M; ACA
<i>blisovi fe 1.5/30 (28)</i>	0	M; ACA
<i>blisovi fe 1/20 (28)</i>	0	M; ACA
<i>briellyn</i>	0	M; ACA
<i>camrese</i>	0	M; ACA
<i>camrese lo</i>	0	M; ACA
<i>caziant (28)</i>	0	M; ACA
<i>charlotte 24 fe</i>	0	M; ACA
<i>chateal (28)</i>	0	M; ACA
<i>chateal eq (28)</i>	0	M; ACA

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Drug Name	Drug Tier	Requirements / Limits
<i>cryselle (28)</i>	0	M; ACA
<i>curae</i>	0	M; ACA; QL
<i>cyred</i>	0	M; ACA
<i>cyred eq</i>	0	M; ACA
<i>dasetta 1/35 (28)</i>	0	M; ACA
<i>dasetta 7/7/7 (28)</i>	0	M; ACA
<i>daysee</i>	0	M; ACA
<i>desog-e.estradiol/e.estradiol</i>	0	M; ACA
<i>dolishale</i>	0	M; ACA
<i>drospirenone-e.estradiol-lm.fa</i>	0	M; ACA
<i>drospirenone-ethinyl estradiol</i>	0	M; ACA
<i>econtra ez</i>	0	M; ACA; QL
<i>econtra one-step</i>	0	M; ACA; QL
<i>elinet</i>	0	M; ACA
ELLA	0	M; ACA; QL
<i>enpresse</i>	0	M; ACA
<i>enskyce</i>	0	M; ACA
<i>estarylla</i>	0	M; ACA
<i>ethynodiol diac-eth estradiol</i>	0	M; ACA
<i>falmina (28)</i>	0	M; ACA
<i>finzala</i>	0	M; ACA
<i>gemmily</i>	0	M; ACA
<i>hailey</i>	0	M; ACA
<i>hailey 24 fe</i>	0	M; ACA
<i>hailey fe 1.5/30 (28)</i>	0	M; ACA
<i>hailey fe 1/20 (28)</i>	0	M; ACA
<i>her style</i>	0	M; ACA; QL

Drug Name	Drug Tier	Requirements / Limits
<i>iclevia</i>	0	M; ACA
<i>isibloom</i>	0	M; ACA
<i>jaimiess</i>	0	M; ACA
<i>jasmiel (28)</i>	0	M; ACA
<i>jolessa</i>	0	M; ACA
<i>joyeaux</i>	0	M; ACA
<i>juleber</i>	0	M; ACA
<i>junel 1.5/30 (21)</i>	0	M; ACA
<i>junel 1/20 (21)</i>	0	M; ACA
<i>junel fe 1.5/30 (28)</i>	0	M; ACA
<i>junel fe 1/20 (28)</i>	0	M; ACA
<i>junel fe 24</i>	0	M; ACA
<i>kaitlib fe</i>	0	M; ACA
<i>kalliga</i>	0	M; ACA
<i>kariva (28)</i>	0	M; ACA
<i>kelnor 1/35 (28)</i>	0	M; ACA
<i>kelnor 1-50 (28)</i>	0	M; ACA
<i>kurvelo (28)</i>	0	M; ACA
<i>l norgest/e.estradiol-e.estradiol</i>	0	M; ACA
<i>larin 1.5/30 (21)</i>	0	M; ACA
<i>larin 1/20 (21)</i>	0	M; ACA
<i>larin 24 fe</i>	0	M; ACA
<i>larin fe 1.5/30 (28)</i>	0	M; ACA
<i>larin fe 1/20 (28)</i>	0	M; ACA
<i>layolis fe</i>	0	M; ACA
<i>leena 28</i>	0	M; ACA
<i>lessina</i>	0	M; ACA
<i>levonest (28)</i>	0	M; ACA
<i>levonorgest-eth.estradiol-iron</i>	0	M; ACA

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Drug Name	Drug Tier	Requirements / Limits
<i>levonorgestrel</i>	0	M; ACA; QL
<i>levonorgestrel-ethinyl estrad</i>	0	M; ACA
<i>levonorg-eth estrad triphasic</i>	0	M; ACA
<i>levora-28</i>	0	M; ACA
LO LOESTRIN FE	E	M
LOESTRIN 1.5/30 (21)	E	M
LOESTRIN 1/20 (21)	E	M
LOESTRIN FE 1.5/30 (28-DAY)	E	M
LOESTRIN FE 1/20 (28-DAY)	E	M
<i>lojaimiess</i>	0	M; ACA
<i>loryna (28)</i>	0	M; ACA
<i>low-ogestrel (28)</i>	0	M; ACA
<i>lo-zumandimine (28)</i>	0	M; ACA
<i>luteru (28)</i>	0	M; ACA
<i>marlissa (28)</i>	0	M; ACA
<i>merzee</i>	0	M; ACA
<i>mibelas 24 fe</i>	0	M; ACA
<i>microgestin 1.5/30 (21)</i>	0	M; ACA
<i>microgestin 1/20 (21)</i>	0	M; ACA
<i>microgestin 24 fe</i>	0	M; ACA
<i>microgestin fe 1.5/30 (28)</i>	0	M; ACA
<i>microgestin fe 1/20 (28)</i>	0	M; ACA
<i>mili</i>	0	M; ACA

Drug Name	Drug Tier	Requirements / Limits
<i>mono-linyah</i>	0	M; ACA
<i>my choice</i>	0	M; ACA; QL
<i>my way</i>	0	M; ACA; QL
NATAZIA	E	M
<i>necon 0.5/35 (28)</i>	0	M; ACA
<i>new day</i>	0	M; ACA; QL
NEXTSTELLIS	E	M
<i>nikki (28)</i>	0	M; ACA
<i>noreth-ethinyl estradiol-iron</i>	0	M; ACA
<i>norethindrone ac-eth estradiol</i>	0	M; ACA
<i>norethindrone-e.estradiol-iron</i>	0	M; ACA
<i>norgestimate-ethinyl estradiol</i>	0	M; ACA
<i>nortrel 0.5/35 (28)</i>	0	M; ACA
<i>nortrel 1/35 (21)</i>	0	M; ACA
<i>nortrel 1/35 (28)</i>	0	M; ACA
<i>nortrel 7/7/7 (28)</i>	0	M; ACA
<i>nylia 1/35 (28)</i>	0	M; ACA
<i>nylia 7/7/7 (28)</i>	0	M; ACA
<i>nymyo</i>	0	M; ACA
<i>ocella</i>	0	M; ACA
<i>opcicon one-step</i>	0	M; ACA; QL
<i>option-2</i>	0	M; ACA; QL
<i>philith</i>	0	M; ACA
<i>pimtrea (28)</i>	0	M; ACA
PLAN B ONE-STEP	0	M; QL
<i>portia 28</i>	0	M; ACA
QUARTETTE	E	M

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
<i>reclipsen (28)</i>	0	M; ACA
<i>rivelsa</i>	0	M; ACA
SAFYRAL	E	M
<i>setlakin</i>	0	M; ACA
<i>simliya (28)</i>	0	M; ACA
<i>simpesse</i>	0	M; ACA
SLYND	E	M
<i>sprintec (28)</i>	0	M; ACA
<i>sronyx</i>	0	M; ACA
<i>syeda</i>	0	M; ACA
TAKE ACTION	0	M; QL
<i>tarina 24 fe</i>	0	M; ACA
<i>tarina fe 1/20 (28)</i>	0	M; ACA
TAYTULLA	E	M
<i>tilia fe</i>	0	M; ACA
<i>tri-estarylla</i>	0	M; ACA
<i>tri-legest fe</i>	0	M; ACA
<i>tri-linyah</i>	0	M; ACA
<i>tri-lo-estarylla</i>	0	M; ACA
<i>tri-lo-marzia</i>	0	M; ACA
<i>tri-lo-mili</i>	0	M; ACA
<i>tri-lo-sprintec</i>	0	M; ACA
<i>tri-mili</i>	0	M; ACA
<i>tri-nymyo</i>	0	M; ACA
<i>tri-sprintec (28)</i>	0	M; ACA
<i>trivora (28)</i>	0	M; ACA
<i>tri-vylibra</i>	0	M; ACA
<i>tri-vylibra lo</i>	0	M; ACA
<i>turqoz (28)</i>	0	ACA
TYBLUME	E	M

Drug Name	Drug Tier	Requirements / Limits
<i>tydemy</i>	0	M; ACA
<i>velivet triphasic regimen (28)</i>	0	M; ACA
<i>vestura (28)</i>	0	M; ACA
<i>vienva</i>	0	M; ACA
<i>viorele (28)</i>	0	M; ACA
<i>volnea (28)</i>	0	M; ACA
<i>vyfemla (28)</i>	0	M; ACA
<i>vylibra</i>	0	M; ACA
<i>wera (28)</i>	0	M; ACA
<i>wymzya fe</i>	0	M; ACA
YASMIN (28)	E	M
YAZ (28)	0	M
<i>zarah</i>	0	M; ACA
<i>zovia 1-35 (28)</i>	0	M; ACA
<i>zumandimine (28)</i>	0	M; ACA
OXYTOCICS		
<i>methylergonovine</i>	1	ST; QL
<i>oxytocin</i>	1	
OPHTHALMOLOGY		
ANTIBIOTICS		
AZASITE	2	
<i>bacitracin</i>	1	
<i>bacitracin-polymyxin b</i>	1	
BESIVANCE	E	
BETADINE OPHTHALMIC PREP	3	
CILOXAN	E	
<i>ciprofloxacin hcl</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>erythromycin</i>	1	
<i>gatifloxacin</i>	1	
<i>gentamicin</i>	1	
<i>levofloxacin</i>	1	
<i>moxifloxacin</i>	1	
MOXIFLOXACIN (PF)-BSS	3	
MOXIFLOXACIN-SOD CHLOR,ISO(PF)	3	
NATACYN	2	
<i>neomycin-bacitracin-polymyxin</i>	1	
<i>neomycin-polymyxin-gramicidin</i>	1	
<i>neo-polycin</i>	1	
OCUFLOX	3	
<i>ofloxacin</i>	1	
<i>polycin</i>	1	
<i>polymyxin b sulf-trimethoprim</i>	1	
<i>tobramycin</i>	1	
TOBRAMYCIN-VANCOMYCIN	3	
TOBREX	3	
VIGAMOX	3	
ANTIVIRALS		
<i>trifluridine</i>	1	
ZIRGAN	3	
BETA-BLOCKERS		

Drug Name	Drug Tier	Requirements / Limits
<i>betaxolol</i>	1	
BETIMOL	E	M
BETOPTIC S	3	M
<i>carteolol</i>	1	M
ISTALOL	E	M
<i>levobunolol</i>	1	M
<i>timolol maleate</i>	1	M
<i>timolol maleate (pf) ophthalmic (eye) dropperette 0.25 %</i>	1	M
<i>timolol maleate (pf) ophthalmic (eye) dropperette 0.5 %</i>	1	
TIMOPTIC OCUDOSE (PF)	E	M
CHOLINESTERASE INHIBITOR MIOTICS		
PHOSPHOLINE IODIDE	2	SP
CYCLOPLEGIC MYDRIATICS		
ATROPINE OPHTHALMIC (EYE) DROPS 0.01 %, 0.025 %, 0.05 %	E	
<i>atropine ophthalmic (eye) drops 1 %</i>	1	
<i>atropine ophthalmic (eye) ointment</i>	1	
ATROPINE SULFATE (PF)	E	
CYCLOGYL	3	
<i>cyclopentolate</i>	1	
<i>cyclopen-tropic-phenyleph-watr</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>homatropaire</i>	1	
MYDRIACYL	3	
PHENYLEPH-TROPICAMIDE IN WATER	3	
<i>tropicamide</i>	1	
DIRECT ACTING MIOTICS		
MIOCHOL-E	3	
<i>pilocarpine hcl</i>	1	M
VUITY	E	M
MISCELLANEOUS OPHTHALMOLOGICS		
<i>acuicyn</i>	E	
AKTEN (PF)	3	
<i>alaway</i>	E	
ALCAINE	3	
<i>allergy eye (ketotifen)</i>	E	
ALOCRIAL	E	
ALOMIDE	E	
<i>altacaine</i>	1	
ALTAFLUOR BENOX	3	
AVENOVA	E	
<i>azelastine</i>	1	
BEOVU	3	ST; SP
<i>bepotastine besilate</i>	1	
BEPREVE	E	
BEVACIZUMAB	3	
<i>bimatoprost</i>	E	
BYOOVIZ	2	ST; SP

Drug Name	Drug Tier	Requirements / Limits
CEQUA	3	PA; ST; M; QL
<i>children's alaway</i>	E	
CIMERLI	2	ST; SP
<i>cromolyn</i>	1	
<i>cyclosporine</i>	1	PA; ST; M; QL
CYCLOSPORINE IN KLARITY	3	
CYSTADROPS	E	SP
CYSTARAN	2	ST; SP
DEXAMET-MOXIFL-KETORONACL(PF)	3	
<i>epinastine</i>	1	
<i>eye allergy itch relief</i>	E	
<i>eye allergy itch-redness rlf</i>	E	
<i>eye itch relief</i>	E	
FLUORESCEIN-BENOXINATE	3	
<i>fluorescein-proparacaine</i>	1	
IHEEZO (PF)	3	
<i>ketotifen fumarate</i>	E	
LACRISERT	3	ST; QL
LASTACAFT ONCE DAILY RELIEF	E	
LATISSE	E	
LUCENTIS	E	SP
LUXTURNA	2	ST; SP

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Drug Name	Drug Tier	Requirements / Limits
MYDRIATIC4(TROP-PROP-PEKTRLC)	3	
<i>olopatadine</i>	E	
OMIDRIA	3	
OXERVATE	2	PA; ST; SP
PATADAY ONCE DAILY RELIEF	E	
PATADAY TWICE DAILY RELIEF	E	
PHOTREXA CROSS-LINKING KIT	3	
PHOTREXA VISCOUS	3	
PREDNISOLN SP-MOXIFLOX-BROMFEN	3	
PREDNISOLONE ACETATE-BROMFENAC	3	
PREDNISOLONE ACETATE-NEPAFENAC	3	
PREDNISOLONE-MOXIFLO-NEPAFENAC	3	
PREDNISOLONE-MOXIFLOX-BROMFEN	3	
<i>proparacaine</i>	1	
RESTASIS	3	PA; ST; M; QL
RESTASIS MULTIDOSE	2	PA; ST; M; QL
SUSVIMO	E	SP

Drug Name	Drug Tier	Requirements / Limits
SUSVIMO (INITIAL FILL)	E	SP
<i>tetracaine hcl</i>	1	
TETRACAINE HCL (PF)	3	
TYRVAYA	3	ST; M
VABYSMO	E	SP
VERKAZIA	E	M
VEVYE	3	PA; ST; M; QL
<i>wal-zyr (ketotifen)</i>	E	
XDEMVIY	3	SP; QL
XIIDRA	2	ST; M; QL
ZADITOR	E	
ZERVIATE	E	
NON-STEROIDAL ANTI-INFLAMMATORY AGENTS		
ACULAR	3	ST
ACULAR LS	3	ST
ACUVAIL (PF)	E	
<i>bromfenac</i>	1	
BROMSITE	E	
<i>diclofenac sodium</i>	1	
<i>flurbiprofen sodium</i>	1	
ILEVRO	3	
<i>ketorolac</i>	1	
NEVANAC	E	
PROLENSA	3	
ORAL DRUGS FOR GLAUCOMA		
<i>acetazolamide oral capsule, extended release</i>	1	M

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Drug Name	Drug Tier	Requirements / Limits
<i>acetazolamide oral tablet 125 mg</i>	1	M
<i>acetazolamide oral tablet 250 mg</i>	1	
<i>acetazolamide sodium</i>	1	
<i>methazolamide</i>	1	M
OTHER GLAUCOMA DRUGS		
AZOPT	E	M
<i>bimatoprost</i>	1	ST; M
BRIMONIDINE-DORZOLAMIDE (PF)	3	
<i>brimonidine-timolol</i>	1	M
<i>brinzolamide</i>	1	M
COMBIGAN	3	M
COSOPT	E	M
COSOPT (PF)	E	M
<i>dorzolamide</i>	1	M
DORZOLAMIDE (PF)	3	
<i>dorzolamide-timolol</i>	1	M
<i>dorzolamide-timolol (pf)</i>	1	M
DURYSTA	E	SP
IDOSE TR	E	SP
IYUZEH (PF)	E	M
<i>latanoprost</i>	1	ST; M
LUMIGAN	3	ST; M
<i>miostat</i>	1	
RHOPRESSA	E	M
ROCKLATAN	E	M

Drug Name	Drug Tier	Requirements / Limits
SIMBRINZA	3	M
<i>tafluprost (pf)</i>	1	ST; M
TRAVATAN Z	E	M
<i>travoprost</i>	1	ST; M
VYZULTA	3	ST; M
XALATAN	E	M
XELPROS	E	M
ZIOPTAN (PF)	E	M
STEROID-ANTIBIOTIC COMBINATIONS		
DEXAMETH-MOXIFLOX(PF)-NACL, ISO	3	
MAXITROL	3	
<i>neomycin-bacitracin-poly-hc</i>	1	
<i>neomycin-polymyxin b-dexameth</i>	1	
<i>neomycin-polymyxin-hc</i>	1	
<i>neo-polycin hc</i>	1	
PREDNISOLONE SOD PH-MOXIFLOX	3	
PREDNISOLONE-MOXIFLOXACIN HCL	3	
TOBRADEX	3	
TOBRADEX ST	E	
<i>tobramycin-dexamethasone</i>	1	
ZYLET	E	
STERIODS		

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Drug Name	Drug Tier	Requirements / Limits
ALREX	E	
<i>dexamethasone sodium phosphate</i>	1	
DEXTENZA	3	
DEXYCU (PF)	3	
<i>difluprednate</i>	1	
DUREZOL	E	
EYSUVIS	3	ST; QL
FLAREX	E	
<i>fluorometholone</i>	1	
FML FORTE	E	
FML LIQUIFILM	3	ST
ILUVIEN	3	SP
INVELTYS	3	ST
LOTEMAX OPTHALMIC (EYE) DROPS, GEL	3	ST
LOTEMAX OPTHALMIC (EYE) DROPS, SUSPENSION	3	
LOTEMAX OPTHALMIC (EYE) OINTMENT	3	ST
LOTEMAX SM	3	ST
<i>loteprednol etabonate ophthalmic (eye) drops, gel</i>	1	
<i>loteprednol etabonate ophthalmic (eye) drops, suspension 0.2 %</i>	1	ST

Drug Name	Drug Tier	Requirements / Limits
<i>loteprednol etabonate ophthalmic (eye) drops, suspension 0.5 %</i>	1	
MAXIDEX	E	
OZURDEX	2	SP
PRED FORTE	3	
PRED MILD	E	
<i>prednisolone acetate</i>	1	
PREDNISOLONE ACETATE (PF)	3	
<i>prednisolone sodium phosphate</i>	1	
RETISERT	3	SP
STEROID-SULFONAMIDE COMBINATIONS		
<i>sulfacetamide-prednisolone</i>	1	
SULFONAMIDES		
<i>sulfacetamide sodium</i>	1	
SYMPATHOMIMETICS		
ALPHAGAN P	3	M
<i>apraclonidine</i>	1	
<i>brimonidine ophthalmic (eye) drops 0.1 %, 0.15 %</i>	1	M
<i>brimonidine ophthalmic (eye) drops 0.2 %</i>	1	
IOPIDINE	3	
VASOCONSTRICTOR DECONGESTANTS		

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Drug Name	Drug Tier	Requirements / Limits
CYCLOMYDRIL	3	
<i>phenylephrine hcl</i>	1	
UPNEEQ (PF)	E	
RESPIRATORY, ALLERGY, COUGH & COLD		
ANTI-HISTAMINE & ANTI-ALLERGENIC AGENTS		
<i>adrenalin</i>	1	
ADYPHREN	E	
ADYPHREN AMP	E	
ADYPHREN AMP II	E	
ADYPHREN II	E	
AUVI-Q	2	QL
<i>carbinoxamine maleate oral liquid</i>	1	
<i>carbinoxamine maleate oral tablet 4 mg</i>	1	
<i>carbinoxamine maleate oral tablet 6 mg</i>	1	ST
<i>cetirizine</i>	E	
CLARINEX	3	QL
<i>clemastine</i>	1	
<i>cyproheptadine</i>	1	
<i>desloratadine</i>	1	QL
<i>dexchlorpheniramine maleate</i>	1	
DIPHEN	E	
<i>diphenhydramine hcl</i>	1	

Drug Name	Drug Tier	Requirements / Limits
EPINEPHRINE HCL (PF)	3	
EPINEPHRINE IN SOD CHL, ISO(PF)	3	
EPINEPHRINE INJECTION AUTO-INJECTOR 0.15 MG/0.15 ML	E	
<i>epinephrine injection auto-injector 0.15 mg/0.3 ml, 0.3 mg/0.3 ml</i>	1	QL
<i>epinephrine injection syringe</i>	1	
EPINEPHRINE PROFESSIONAL	E	
EPINEPHRINESNA P	E	
EPINEPHRINESNA P-EMS	E	
EPINEPHRINESNA P-V	E	
EPIPEN	2	ST; QL
EPIPEN JR	2	ST; QL
<i>hydroxyzine hcl</i>	1	
<i>hydroxyzine pamoate</i>	1	
KARBINAL ER	3	ST
<i>levocetirizine</i>	E	
PHENERGAN	3	
<i>promethazine</i>	1	
<i>promethegan</i>	1	
QUZYTIR	3	
RYCLORA	3	
RYVENT	3	ST

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Drug Name	Drug Tier	Requirements / Limits
SYMJEPI	2	QL
VISTARIL	3	
COUGH & COLD THERAPY		
<i>benzonatate</i>	1	
BROMFED DM	3	
<i>brompheniramine-pseudoeph-dm</i>	1	
CLARINEX-D 12 HOUR	3	QL
<i>codeine-guaifenesin</i>	1	
CODITUSSIN AC	3	
CODITUSSIN DAC	3	
<i>g tussin ac</i>	1	
HISTEX-AC	3	
HYCODAN (WITH HOMATROPINE)	3	
<i>hydrocodone-chlorpheniramine</i>	1	
<i>hydrocodone-homatropine</i>	1	
<i>hydromet</i>	1	
MAR-COF CG	3	
<i>maxi-tuss ac</i>	1	
MAXI-TUSS CD	3	
NINJACOF-XG	3	
POLY-TUSSIN AC	3	
<i>promethazine vc</i>	1	
<i>promethazine-codeine</i>	1	
<i>promethazine-dm</i>	1	
RESPA-AR	3	
TUXARIN ER	3	

Drug Name	Drug Tier	Requirements / Limits
PULMONARY AGENTS		
24 HOUR NASAL ALLERGY	E	
ACCOLATE ORAL TABLET 10 MG	3	M
ACCOLATE ORAL TABLET 20 MG	3	
<i>acetylcysteine</i>	1	
ADCIRCA	E	SP
ADEMPAS	2	ST; SP; QL
ADRENALIN	3	
ADVAIR DISKUS	3	ST; M; QL
ADVAIR HFA	2	ST; M; QL
AIRDUO DIGIHALER	3	ST; M; QL
AIRDUO RESPICLICK	E	M
AIRSUPRA	E	M
<i>albuterol sulfate inhalation hfa aerosol inhaler</i>	1	QL
<i>albuterol sulfate inhalation solution for nebulization</i>	1	
<i>albuterol sulfate oral syrup</i>	1	
<i>albuterol sulfate oral tablet</i>	1	M
<i>albuterol sulfate oral tablet extended release 12 hr</i>	1	M
<i>aller-flo</i>	E	
<i>allergy relief (fluticasone)</i>	E	

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Drug Name	Drug Tier	Requirements / Limits
ALVESCO	E	M
<i>alyq</i>	1	ST; SP; QL
<i>ambrisentan</i>	1	ST; SP; QL
<i>aminophylline</i>	1	
ANORO ELLIPTA	2	M; QL
<i>arformoterol</i>	1	M; QL
ARMONAIR DIGIHALER	E	M
ARNUITY ELLIPTA	2	M; QL
ASMANEX HFA	2	M; QL
ASMANEX TWISTHALER	2	M; QL
ATROVENT HFA	3	M; QL
<i>azelastine-fluticasone</i>	1	ST; QL
BERINERT	E	SP
BEVESPI AEROSPHERE	E	M
<i>bosentan</i>	1	ST; SP; QL
BREO ELLIPTA	2	ST; M; QL
<i>breyna</i>	1	ST; M; QL
BREZTRI AEROSPHERE	2	M; QL
BRONCHITOL	3	ST; SP
BROVANA	3	M; QL
<i>budesonide inhalation</i>	1	M; QL
<i>budesonide nasal</i>	E	
<i>budesonide-formoterol</i>	1	ST; M; QL

Drug Name	Drug Tier	Requirements / Limits
CHILDREN'S FLONASE ALLERGY RLF	E	
CINQAIR	E	SP
CINRYZE	2	ST; SP; QL
COMBIVENT RESPIMAT	2	M; QL
<i>cromolyn</i>	1	M
DALIRESP	E	M
DUAKLIR PRESSAIR	E	M
DULERA	2	ST; M; QL
DYMISTA	3	ST; QL
ELIXOPHYLLIN	3	M
<i>epinephrine hcl</i>	1	
ESBRIET	E	SP
FASENRA	2	ST; QL
FASENRA PEN	2	ST; QL
FIRAZYR	E	SP
FLONASE ALLERGY RELIEF	E	
FLONASE SENSIMIST	E	
<i>flunisolide</i>	1	ST; M; QL
FLUTICASONE FUROATE-VILANTEROL	E	M
FLUTICASONE PROPIONATE INHALATION BLISTER WITH DEVICE	E	

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
FLUTICASONE PROPIONATE INHALATION HFA AEROSOL INHALER	E	M
<i>fluticasone propionate nasal</i>	1	M; QL
FLUTICASONE PROPION- SALMETEROL INHALATION AEROSOL POWDR BREATH ACTIVATED	E	M
<i>fluticasone propion- salmeterol inhalation blister with device</i>	1	ST; M; QL
FLUTICASONE PROPION- SALMETEROL INHALATION HFA AEROSOL INHALER	E	M
<i>formoterol fumarate</i>	1	M; QL
HAEGARDA	3	ST; SP; QL
HYPER-SAL	3	
<i>icatibant</i>	1	ST; SP; QL
INCRUSE ELLIPTA	E	M
<i>ipratropium bromide</i>	1	M
<i>ipratropium- albuterol</i>	1	M; QL
KALBITOR	3	ST; SP; QL
KALYDECO	2	PA; ST; SP; QL
LETAIRIS	E	SP

Drug Name	Drug Tier	Requirements / Limits
<i>levalbuterol hcl</i>	1	
LEVALBUTEROL TARTRATE	E	
LIQREV	E	SP
<i>mometasone</i>	1	ST; M; QL
<i>montelukast</i>	1	M
NASACORT	E	
NASAL ALLERGY	E	
<i>nebusal inhalation solution for nebulization 3 %</i>	1	
NEBUSAL INHALATION SOLUTION FOR NEBULIZATION 6 %	3	
NUCALA	2	ST; QL
OFEV	2	ST; SP; QL
OMNARIS	E	M
OPSUMIT	2	ST; SP; QL
ORKAMBI	2	ST; SP; QL
ORLADEYO	3	ST; SP; QL
PERFOROMIST	E	M
<i>pirfenidone oral capsule</i>	1	ST; SP; QL
<i>pirfenidone oral tablet 267 mg, 801 mg</i>	1	ST; SP; QL
PIRFENIDONE ORAL TABLET 534 MG	E	SP
PROAIR DIGIHALER	E	

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
PROAIR RESPICLICK	E	
PULMICORT	E	M
PULMICORT FLEXHALER	E	M
<i>pulmosal</i>	1	
PULMOZYME	2	ST; SP
QNASL	E	M
QVAR REDIHALER	2	M; QL
REVATIO INTRAVENOUS	3	SP
REVATIO ORAL	3	ST; SP; QL
<i>roflumilast oral tablet 250 mcg</i>	1	ST; M; QL
<i>roflumilast oral tablet 500 mcg</i>	1	ST; M
RUCONEST	2	ST; SP; QL
RYALTRIS	3	ST; QL
<i>sajazir</i>	1	ST; SP; QL
SEREVENT DISKUS	E	M
<i>sildenafil (pulm hypertension) intravenous</i>	1	SP
<i>sildenafil (pulm hypertension) oral suspension for reconstitution</i>	1	ST; SP; QL
<i>sildenafil (pulm hypertension) oral tablet</i>	1	PA; ST; SP; QL
SINGULAIR	E	M
SINUVA	3	SP

Drug Name	Drug Tier	Requirements / Limits
<i>sodium chloride</i>	1	
SPIRIVA RESPIMAT	2	M; QL
SPIRIVA WITH HANDIHALER	2	M; QL
STIOLTO RESPIMAT	2	M; QL
STRIVERDI RESPIMAT	3	M; QL
SYMBICORT	2	ST; M; QL
SYMDEKO	2	ST; SP; QL
<i>tadalafil (pulm. hypertension)</i>	1	ST; SP; QL
TADLIQ	E	SP
TAKHZYRO	2	ST; SP; QL
<i>terbutaline oral</i>	1	M
<i>terbutaline subcutaneous</i>	1	
TEZSPIRE	2	ST; SP; QL
THEO-24	3	M
<i>theophylline</i>	1	M
TICANASE	E	
<i>tiotropium bromide</i>	1	
TRACLEER ORAL TABLET	3	ST; SP; QL
TRACLEER ORAL TABLET FOR SUSPENSION	2	PA; ST; SP; QL
TRELEGY ELLIPTA	2	M; QL
<i>triamcinolone acetone</i>	E	
TRIKAFTA	2	ST; SP; QL

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
TUDORZA PRESSAIR	E	M
TYVASO	2	PA; ST; SP
TYVASO DPI	2	PA; ST; SP
TYVASO REFILL KIT	2	PA; ST; SP
TYVASO STARTER KIT	2	PA; ST; SP
VENTAVIS	3	ST; SP
VENTOLIN HFA	E	
WINREVAIR	3	ST; SP
<i>wixela inhub</i>	1	ST; M; QL
XHANCE	3	ST; M; QL
XOLAIR	2	PA; QL
XOPENEX HFA	E	
YUPELRI	2	M; QL
<i>zafirlukast</i>	1	M
ZETONNA	E	M
<i>zileuton</i>	1	ST; M
ZYFLO	3	ST
UROLOGICALS		
ANTICHOLINERGICS & ANTISPASMODICS		
<i>darifenacin</i>	1	M
DETROL	E	M
DETROL LA	E	
<i>fesoterodine</i>	1	M
<i>flavoxate</i>	1	M
GELNIQUE	2	M; QL
GEMTESA	3	M
<i>mirabegron</i>	1	

Drug Name	Drug Tier	Requirements / Limits
MYRBETRIQ ORAL SUSPENSION, EXTENDED REL RECON	2	
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HR	2	M
<i>oxybutynin chloride oral syrup</i>	1	M
OXYBUTYNIN CHLORIDE ORAL TABLET 2.5 MG	E	M
<i>oxybutynin chloride oral tablet 5 mg</i>	1	M
<i>oxybutynin chloride oral tablet extended release 24hr</i>	1	M
OXYTROL	3	ST; M; QL
OXYTROL FOR WOMEN	E	
<i>solifenacin</i>	1	M
<i>tolterodine</i>	1	M
TOVIAZ	E	M
<i>trospium</i>	1	M
VESICARE	E	M
VESICARE LS	E	M
BENIGN PROSTATIC HYPERPLASIA (BPH) THERAPY		
<i>alfuzosin</i>	1	M
AVODART	E	M
CIALIS	E	M
<i>dutasteride</i>	1	ST; M

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
<i>dutasteride-tamsulosin</i>	1	ST; M
ENTADFI	E	
<i>finasteride</i>	1	M
FLOMAX	3	M
JALYN	3	ST; M
PROSCAR	3	ST; M
RAPAFLO	E	M
<i>silodosin</i>	1	
<i>tadalafil</i>	1	ST; M; QL
<i>tamsulosin</i>	1	M
UROXATRAL	E	M
CHOLINERGIC STIMULANTS		
<i>bethanechol chloride</i>	1	M
MISCELLANEOUS UROLOGICALS		
CAVERJECT	2	PA; ST; M; QL
CAVERJECT IMPULSE	2	PA; ST; M; QL
CIALIS	E	M
CYSTAGON	2	SP
<i>cytra-2</i>	E	
<i>cytra-3</i>	E	
<i>cytra-k</i>	E	
EDEX	3	PA; ST; M; QL
ELMIRON	2	
IFE-BIMIX 30/1	3	
K-PHOS NO 2	3	
K-PHOS ORIGINAL	2	M
<i>methen-sod phos-meth blue-hyos</i>	1	

Drug Name	Drug Tier	Requirements / Limits
ORACIT	3	
OXLUMO	3	ST; SP
<i>potassium citrate</i>	1	M
<i>potassium citrate-citric acid</i>	E	
PROCYSBI	E	SP
PROSTIN VR PEDIATRIC	3	
RENACIDIN	2	
RIVFLOZA	E	SP
<i>sildenafil</i>	1	ST; M; QL
<i>sodium citrate-citric acid oral solution 490-640 mg/5 ml</i>	1	
<i>sodium citrate-citric acid oral solution 500-334 mg/5 ml</i>	E	
STENDRA	3	ST; M; QL
<i>tadalafil</i>	1	ST; QL
<i>tricitrates</i>	E	
TRI-MIX (PAPAVRN-PHNTLMN-PGE1)	3	
URELLE	3	
<i>uretron d-s</i>	1	
URIBEL	3	
URIBEL TABS	3	
URIMAR-T ORAL CAPSULE	E	
<i>urimar-t oral tablet</i>	1	
URNEVA	E	
<i>uro-458</i>	1	
UROCIT-K 10	3	M

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
UROCID-K 15	3	M
UROCID-K 5	3	M
<i>urogesic-blue</i>	1	
<i>uro-mp</i>	1	
UROCID-ACID NO.2	3	
<i>uro-sp</i>	1	
<i>uryl</i>	1	
<i>ildenafil</i>	1	ST; M; QL
VIAGRA	E	M
URINARY ANESTHETICS		
<i>phenazopyridine</i>	1	
PYRIDIUM	E	
VITAMINS, HEMATINICS & ELECTROLYTES		
BLOOD DERIVATIVES		
<i>albumin, human 25 %</i>	1	
ALBUMINEX 5 %	3	
ELECTROLYTES		
CALCIUM ACETATE	E	
<i>calcium acetate(phosphat bind)</i>	1	M; QL
CALCIUM GLUC IN NA CL, ISO-OSM INTRAVENOUS SOLUTION 1 GRAM/100 ML	3	

Drug Name	Drug Tier	Requirements / Limits
<i>calcium gluc in nacl, iso-osm intravenous solution 1 gram/50 ml, 2 gram/100 ml</i>	1	
CALPHRON	E	
EFFER-K ORAL TABLET, EFFERVESCENT 10 MEQ, 20 MEQ	3	M
<i>effer-k oral tablet, effervescent 25 meq</i>	1	M
GALZIN	3	
<i>klor-con</i>	1	M
<i>klor-con 10</i>	1	M
<i>klor-con 8</i>	1	M
<i>klor-con m10</i>	1	M
<i>klor-con m15</i>	1	M
<i>klor-con m20</i>	1	M
<i>klor-con/ef</i>	1	M
<i>k-phos-neutral</i>	E	M
K-TAB	3	M
<i>lugols</i>	1	M
MAGNEBIND 300	E	
<i>magnesium chloride</i>	1	
<i>magnesium sulfate</i>	1	
MAGNESIUM SULFATE IN D5W	2	
<i>magnesium sulfate in water</i>	1	
NORMOSOL-R	3	
<i>phospha 250 neutral</i>	E	M
<i>phosphorous</i>	E	M
POKONZA	E	

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Drug Name	Drug Tier	Requirements / Limits
<i>potassium chloride</i>	1	M
<i>sodium chloride</i>	1	
<i>sodium chloride 0.45 %</i>	1	
<i>sodium chloride 3 % hypertonic</i>	1	
<i>sodium chloride 5 % hypertonic</i>	1	
<i>strong iodine</i>	1	M
MISCELLANEOUS VITAMINS, HEMATINICS, & ELECTROLYTES		
DOJOLVI	3	ST; SP
ISOLYTE S PH 7.4	2	
ISOLYTE-S	2	
NORMOSOL-R PH 7.4	2	
PLASMA-LYTE A	2	
VITAMINS & HEMATINICS		
ACCRUFER	3	
ANIMI-3 WITH VITAMIN D	E	
ASCOR	3	
<i>ascorbic acid (vitamin c)</i>	1	
AZESCO	E	
<i>b complex 1 (with folic acid)</i>	0	ACA
<i>b complex 100</i>	1	
<i>b complex-vitamin c-folic acid</i>	0	ACA
BABY DDROPS	E	
<i>balanced b-100</i>	0	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>bal-care dha</i>	1	M
BAL-CARE DHA ESSENTIAL	3	M
<i>b-complex with vitamin c</i>	0	ACA
<i>biotin oral tablet 1 mg</i>	E	
BIOTIN ORAL TABLET 10 MG, 5 MG	E	
BRAINSTRONG PRENATAL	E	
CADEAU DHA	E	
CALTRATE GUMMY BITES	E	
<i>cholecalciferol (vitamin d3) oral capsule</i>	E	
<i>cholecalciferol (vitamin d3) oral drops</i>	E	
CHOLECALCIFEROL (VITAMIN D3) ORAL LIQUID	E	
<i>cholecalciferol (vitamin d3) oral tablet</i>	E	
CITRANATAL B-CALM (FE GLUC)	E	M
CITRANATAL MEDLEY	E	M
<i>classic prenatal</i>	0	ACA
<i>c-nate dha</i>	1	M
<i>cod liver oil</i>	E	
<i>complete natal dha</i>	1	M

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Drug Name	Drug Tier	Requirements / Limits
<i>completenate</i>	E	
CONCEPT DHA	3	M
CONCEPT OB	3	M
<i>cyanocobalamin (vitamin b-12) injection</i>	1	M
<i>cyanocobalamin (vitamin b-12) nasal</i>	1	ST; QL
<i>decara oral capsule 1,250 mcg (50,000 unit)</i>	E	
DECARA ORAL CAPSULE 625 MCG (25,000 UNIT)	E	
DERMACINRX PRENATRIX	E	M
DERMACINRX PRENATRYL	E	M
DERMACINRX PRETRATE	E	M
DERMACINRX PUREFOLIX	E	
<i>dialyvite 800</i>	0	ACA
DIALYVITE 800 WITH IRON	E	
DIALYVITE 800 WITH ZINC 15	E	
DIALYVITE 800 WITH ZINC 50	E	
DIALYVITE VITAMIN D3 MAX	E	
<i>dodex</i>	1	M
DRISDOL	3	M

Drug Name	Drug Tier	Requirements / Limits
DUET DHA WITH OMEGA-3	3	M
<i>elite-ob</i>	1	M
ENBRACE HR	3	M
<i>ergocalciferol (vitamin d2) oral capsule</i>	1	M
<i>ergocalciferol (vitamin d2) oral drops</i>	E	
<i>ezfe 200</i>	E	
FA-8	E	
FEOSOL	E	
FEOSOL BIFERA	E	
FERAHEME	E	
FERGON	E	
FER-IN-SOL	E	
<i>ferocon</i>	E	
<i>ferosul</i>	E	
<i>ferretts</i>	E	
FERRETTTS IPS	E	
<i>ferrex 150 forte</i>	E	
<i>ferrex 150 forte plus</i>	E	
<i>ferrex 150 plus</i>	E	
FERRIMIN 150	E	
<i>ferrous gluconate</i>	E	
<i>ferrous sulfata</i>	E	
<i>ferumoxytol</i>	1	ST
FLORIVA (FLUORIDE-VITAMIN D3)	E	
<i>fluoride (sodium)</i>	0	ACA

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Drug Name	Drug Tier	Requirements / Limits
<i>folbee</i>	E	
<i>folbic</i>	E	
<i>folic acid injection</i>	1	
FOLIC ACID ORAL CAPSULE	E	
<i>folic acid oral tablet 1 mg</i>	1	M
<i>folic acid oral tablet 400 mcg, 800 mcg</i>	0	ACA
FOLIC ACID-VIT B6-VIT B12	E	
<i>folitab</i>	0	ACA
<i>folivane-f</i>	E	
<i>folivane-ob</i>	1	M
<i>folplex 2.2</i>	E	
<i>foltabs 800</i>	0	ACA
<i>full spectrum b-vitamin c</i>	0	ACA
<i>hematinic/folic acid</i>	E	
<i>hematogen fa</i>	E	
HEMOCYTE	E	
HEMOCYTE-F	E	
<i>hydroxocobalamin</i>	1	
ICAR	E	
ICAR-C	E	
ICAR-C PLUS	E	
<i>iferex 150 forte</i>	E	
INFED	2	ST
INFUVITE PEDIATRIC	2	
INJECTAFER	3	ST
INTEGRA F	E	

Drug Name	Drug Tier	Requirements / Limits
<i>iron 100 plus</i>	E	
<i>iron chews</i>	E	
IROSPAN 24/6	E	
<i>kobee</i>	0	ACA
KOSHER PRENATAL PLUS IRON	3	M
KPN	E	
<i>ludent fluoride</i>	0	ACA
MARNATAL-F	3	M
MAXIMUM D3	E	
MECOBALAMIN (VITAMIN B12)	3	
MERIBIN	E	
MINI PRENATAL	E	
<i>m-natal plus</i>	1	M
MONOFERRIC	E	
<i>multigen</i>	E	
<i>multigen plus</i>	E	
<i>multi-vitamin with fluoride</i>	0	ACA
<i>mvc-fluoride</i>	0	ACA
<i>myferon 150 forte</i>	E	
<i>mynatal</i>	1	M
<i>mynatal plus</i>	1	M
<i>mynatal-z</i>	1	M
NASCOBAL	2	ST; M; QL
NATACHEW (FE BIS-GLYCINATE)	3	M
NATAL PNV	E	M

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
NEEVODHA (WITH ALGAL OIL)	3	M
NEONATAL COMPLETE	3	M
NEONATAL FE	3	
NEONATAL PLUS VITAMIN	3	M
NEONATAL-DHA	3	M
NESTABS	3	M
NESTABS ABC	3	M
NESTABS DHA	3	M
NESTABS ONE	3	M
<i>newgen</i>	1	M
NIVA-FOL	E	
NOVAFERRUM	E	
NOVAFERRUM 50	E	
NOXIFOL-D3	E	
NU-IRON	E	
OB COMPLETE	3	M
OB COMPLETE ONE	3	M
OB COMPLETE PETITE	3	M
OB COMPLETE PREMIER	3	M
OB COMPLETE WITH DHA	3	M
<i>obstetrix dha prenatal duo</i>	E	
OBSTETRIX EC	E	

Drug Name	Drug Tier	Requirements / Limits
ONE A DAY WOMEN'S PRENATAL DHA	E	
<i>one daily prenatal</i>	0	ACA
ONE-A-DAY PRENATAL-1	E	
ORTHO DF	E	
PHYSICIANS EZ USE B-12	E	
PNV TABS 20-1	E	M
<i>pnv-dha</i>	1	M
<i>pnv-omega</i>	1	M
<i>pnv-select</i>	1	M
<i>poly-iron 150 forte</i>	E	
POLY-VI-SOL	E	
<i>pr natal 400</i>	1	M
<i>pr natal 400 ec</i>	1	M
<i>pr natal 430</i>	1	M
<i>pr natal 430 ec</i>	1	M
PREGEN DHA	E	M
PREGENNA	E	M
<i>prenal chew</i>	1	M
<i>prenal pearl</i>	1	M
<i>prenal true</i>	1	M
PRENATA	3	M
<i>prenatabs fa</i>	1	M
<i>prenatabs rx</i>	1	M
<i>prenatal + dha oral combo pack 28 mg iron- 975 mcg-200 mg</i>	E	

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Drug Name	Drug Tier	Requirements / Limits
PRENATAL + DHA ORAL COMBO PACK 28 MG IRON-800 MCG-200 MG	E	
<i>prenatal 19</i>	E	
<i>prenatal complete</i>	0	ACA
PRENATAL ESSENTIALS	E	
PRENATAL FORMULA	E	
PRENATAL FORMULA-DHA	E	
PRENATAL MULTI	E	
<i>prenatal multi-dha (algal oil)</i>	0	ACA
PRENATAL MULTI-DHA(WITH VIT K)	E	
<i>prenatal multivitamins</i>	0	ACA
<i>prenatal one daily</i>	0	ACA
<i>prenatal oral tablet 28 mg iron- 800 mcg</i>	0	ACA
PRENATAL ORAL TABLET 28-800 MG-MCG	E	
<i>prenatal plus</i>	1	M
<i>prenatal plus (calcium carb)</i>	1	M
PRENATAL PLUS DHA	3	M
PRENATAL PLUS VITAMIN-MINERAL	3	M

Drug Name	Drug Tier	Requirements / Limits
<i>prenatal vit no.179-iron-folic</i>	0	ACA
<i>prenatal vitamin oral tablet 27 mg iron- 0.8 mg</i>	0	ACA
PRENATAL VITAMIN ORAL TABLET 27 MG IRON- 800 MCG	E	
<i>prenatal vitamin plus low iron</i>	E	
<i>prenatal vitamin with minerals</i>	0	ACA
PRENATAL WITH DHA-FOLIC ACID	E	
<i>prenatal-u</i>	1	M
PRENATE AM	3	M
PRENATE CHEWABLE	3	M
PRENATE DHA (FERR ASP GLYCIN)	3	M
PRENATE ELITE (IRON ASP GLYC)	3	M
PRENATE ENHANCE	3	M
PRENATE ESSENTIAL(IRON-ASP-GL)	3	M
PRENATE MINI (FERR ASP GLYCIN)	3	M
PRENATE PIXIE	3	M
PRENATE RESTORE	3	M

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
PRENATE STAR	3	M
PRIMACARE	3	M
PRO FE	E	
PROFERRIN ES	E	
PROVIDA OB	3	M
<i>rena-vite</i>	0	ACA
<i>reno caps</i>	E	
REPLESTA NX	E	
R-NATAL OB	3	M
ROXIFOL-D	E	
SELECT-OB	3	M
SELECT-OB (FOLIC ACID)	3	M
SELECT-OB + DHA	3	M
<i>se-natal 19 chewable</i>	1	M
<i>se-natal-19</i>	1	M
SIMILAC PRENATAL	E	
SLOW RELEASE IRON	E	
<i>stress formula with iron</i>	0	ACA
<i>stress formula with iron(sulf)</i>	0	ACA
STUART ONE	E	
<i>super b maxi complex</i>	0	ACA
<i>super b-50 complex</i>	0	ACA
<i>super quints</i>	0	ACA
TANDEM DUAL ACTION	E	

Drug Name	Drug Tier	Requirements / Limits
TANDEM PLUS	E	
<i>taron-c dha</i>	1	M
THERA-D 4000	E	
THERANATAL	E	
THERANATAL COMPLETE	E	
THERANATAL ONE	E	
THERANATAL OVAVITE	E	
THERANATAL PLUS	E	
THRIVITE RX	3	M
TRICARE	3	M
<i>tricon</i>	E	
TRIFERIC	3	
<i>trigels-f forte</i>	E	
<i>trinatal rx 1</i>	1	M
<i>trinate</i>	1	M
TRINAZ	E	M
TRISTART DHA	3	M
<i>tri-vitamin with fluoride</i>	0	ACA
TRONVITE	E	
ULTRA PRENATAL PLUS DHA	E	
VENOFER	2	ST
VITAFOL FE PLUS	3	M
VITAFOL GUMMIES	3	M
VITAFOL ULTRA	3	M
VITAFOL-OB	3	M

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Drug Name	Drug Tier	Requirements / Limits
VITAFOL-OB+DHA	3	M
VITAFOL-ONE	3	M
VITALIPID N INFANT	3	
VITAMEDMD ONE RX	3	M
VITAMEDMD REDICHEW RX	3	M
<i>vitamin b complex-folic acid</i>	0	ACA
<i>vitamin d3</i>	E	
<i>vitamins a,c,d and fluoride</i>	0	ACA
VITAPEARL	E	
VITA-RESPA	E	
VITATRUE	3	M

Drug Name	Drug Tier	Requirements / Limits
VITLIPID N INFANT	3	
<i>wescap-c dha</i>	1	M
<i>wescap-pn dha</i>	1	M
<i>wesnatal dha complete</i>	1	M
<i>wesnate dha</i>	1	M
<i>westab plus</i>	1	M
<i>westgel dha</i>	1	M
WOMEN'S PRENATAL PLUS DHA	E	
ZALVIT	E	
<i>zatean-pn dha</i>	1	M
<i>zatean-pn plus</i>	1	M
<i>zingiber</i>	1	M
ZIPHEX	E	

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

Index

2	ACCOLATE	129	<i>acetic acid</i>	72, 76
24 HOUR NASAL ALLERGY	ACCRUFER.....	136	<i>acetylcysteine</i>	129
2TEK GLUCOSE/BLOOD PRESSURE	ACCU-CHEK AVIVA PLUS TEST STRP	77	ACIOXIA	68
A	ACCU-CHEK GUIDE GLUCOSE METER.....	83	ACIOXIAY	61
<i>abacavir</i>	ACCU-CHEK GUIDE L1-L2 CTRL SOL	83	ACIPHEX.....	106
<i>abacavir-lamivudine</i>	ACCU-CHEK GUIDE ME GLUCOSE MTR.....	83	<i>acitretin</i>	57
ABECMA.....	ACCU-CHEK GUIDE TEST STRIPS.....	77	ACTEMRA.....	114
ABELCET.....	ACCU-CHEK SMARTVIEW CONTRL SOL.....	83	ACTEMRA ACTPEN	114
ABILIFY	ACCU-CHEK SMARTVIEW TEST STRIP.....	77	ACTHAR.....	76
ABILIFY ASIMTUFII	ACCUPRIL	47	ACTHIB (PF)	110
ABILIFY MAINTENA.....	ACCURETIC	47	ACTICLATE	11
ABILIFY MYCITE MAINTENANCE KIT	<i>accutane</i>	61	ACTIMMUNE	109
ABILIFY MYCITE STARTER KIT	ACCUTREND GLUCOSE CONTROL	83	ACTIVELLA.....	117
<i>abiraterone</i>	ACCUTREND GLUCOSE TEST STRIPS	77	ACTIVE-PAC.....	22
ABRAXANE.....	ACE AEROSOL CLOUD ENHANCER	81	ACTONEL	114
ABRILADA(CF).....	<i>acebutolol</i>	47	ACTOPLUS MET	98
ABRILADA(CF) PEN	<i>acetaminophen-caff-</i> <i>dihydrocod</i>	30	ACTOS	98
ABRYSVO (PF).....	<i>acetaminophen-codeine</i>	30	<i>acuicyn</i>	124
ABSORICA.....	<i>acetazolamide</i>	125, 126	ACULAR.....	125
ABSORICA LD	<i>acetazolamide sodium</i>	126	ACULAR LS.....	125
ACAM2000 (NATIONAL STOCKPILE)			ACUVAIL (PF).....	125
<i>acamprosate</i>			<i>acyclovir</i>	3, 68
ACANYA			<i>acyclovir sodium</i>	3
<i>acarbose</i>			ACZONE.....	61
			ADACEL(TDAP ADOLESN/ADULT)(PF)	110
			ADAINZDE	61

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

ADAINZOXIA.....	61	<i>adrenalin</i>	128	AEROCHAMBER MINI	81
ADAKVEO	14	ADRENALIN.....	129	AEROCHAMBER PLUS	
ADALIMUMAB-AACF ...	114	ADRIAMYCIN	14	FLOW-VU.....	81
ADALIMUMAB-AATY	114	<i>adrucil</i>	14	AEROCHAMBER PLUS Z	
ADALIMUMAB-ADAZ ...	114	<i>adthyza</i>	99	STAT	81
ADALIMUMAB-ADBM... 114		ADTHYZA.....	100	AEROTRACH PLUS.....	81
ADALIMUMAB-ADBM(CF)		ADUHELM.....	27	AEROVENT PLUS.....	81
PEN CROHNS	114	<i>adult aspirin regimen</i>	36	AFINITOR	14
ADALIMUMAB-ADBM(CF)		ADVAIR DISKUS	129	AFINITOR DISPERZ	14
PEN PS-UV.....	114	ADVAIR HFA	129	<i>afirmelle</i>	119
ADALIMUMAB-FKJP.....	114	ADVANCED ALLERGY		AFLURIA QD 2023-24(3YR	
<i>adapalene</i>	61	COLLECT KIT	68	UP)(PF).....	110
ADAPALENE	61	ADVANCED GLUC METER		AFLURIA QUAD 2023-	
<i>adapalene-benzoyl peroxide</i> .61		TEST STRIP.....	77	2024(6MO UP).....	110
ADASUVE.....	40	ADVANCED GLUCOSE		AFREZZA	93
ADBRY	59	METER	83	AFSTYLA	52
ADCETRIS	14	ADVATE	52	<i>after pill</i>	119
ADCIRCA.....	129	ADVIN COVID-19 AG		AFTERA.....	119
ADDERALL	40	HOME TEST.....	81	AGAMATRIX AMP GLUC	
ADDERALL XR.....	40	ADVOCATE REDI-CODE		MONITOR SYS	84
ADDYI.....	40	PLUS	77, 84	AGAMATRIX AMP TEST	
<i>adefovir</i>	3	ADVOCATE REDI-CODE		STRIPS	77
ADEINZDE.....	61	PLUS CTRL L.....	84	AGAMATRIX CONTROL	
ADEMPAS	129	ADYNOVATE.....	52	HIGH	84
<i>adenosine</i>	46	ADYPHREN	128	AGAMREE	76
ADIPEX-P.....	71	ADYPHREN AMP.....	128	AGGRASTAT	
ADLARITY	27	ADYPHREN AMP II	128	CONCENTRATE	52
ADMELOG SOLOSTAR U-		ADYPHREN II.....	128	AGONEAZE	64
100 INSULIN.....	93	ADZENYS XR-ODT	40	AGRYLIN	72
ADMELOG U-100 INSULIN		ADZYNMA.....	52	AIMOVIG AUTOINJECTOR	
LISPRO	93	AEMCOLO	8	.....	26
				AIRDUO DIGIHALER.....	129

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

AIRDUO RESPICLICK	129	<i>aliskiren</i>	47	ALTACE	47
AIRSUPRA	129	ALKERAN	14	ALTAFLUOR BENOX	124
AJOVY AUTOINJECTOR ..	26	ALKERAN (AS HCL)	14	<i>altavera (28)</i>	119
AJOVY SYRINGE.....	26	ALKINDI SPRINKLE	76	ALTOPREV.....	55
AKEEGA	14	<i>aller-flo</i>	129	ALTRENO.....	61
AKLIEF.....	61	<i>allergy eye (ketotifen)</i>	124	ALTUVIIIIO	52
AKTEN (PF)	124	<i>allergy relief (fluticasone)</i> ..	129	ALUNBRIG	14
AKYNZEO (FOSNETUPITANT)	102	ALLI.....	71	ALVAIZ	52
AKYNZEO (NETUPITANT)	102	<i>allopurinol</i>	113	ALVESCO	130
<i>ala-cort</i>	68	ALLOPURINOL	113	<i>alvimopan</i>	102
ALA-SCALP.....	68	<i>allopurinol sodium</i>	113	<i>alyacen 1/35 (28)</i>	119
<i>alaway</i>	124	<i>almotriptan malate</i>	26	<i>alyacen 7/7/7 (28)</i>	119
<i>albendazole</i>	8	ALOCRI.....	124	ALYGLO	110
<i>albumin, human 25 %</i>	135	ALOGLIPTIN	98	ALYMSYS	14
ALBUMINEX 5 %.....	135	ALOGLIPTIN-METFORMIN	98	<i>alyq</i>	130
<i>albuterol sulfate</i>	129	ALOGLIPTIN- PIOGLITAZONE	98	<i>amabelz</i>	117
ALCAINE	124	ALOMIDE.....	124	<i>amantadine hcl</i>	4
<i>alclometasone</i>	68	<i>aloprim</i>	113	AMBIEN	40
ALCORTIN A	66	<i>alose tron</i>	102	AMBIEN CR.....	40
ALDACTONE	47	ALPHAGAN P.....	127	AMBISOME.....	3
ALDURAZYME.....	95	ALPHANATE	52	<i>ambrisentan</i>	130
ALECENSA	14	ALPHANINE SD.....	52	<i>amcinonide</i>	68
<i>alendronate</i>	114	<i>alprazolam</i>	40	AMELUZ	59
ALFERON N.....	109	<i>alprazolam intensol</i>	40	<i>amethia</i>	119
<i>alfuzosin</i>	133	ALPROLIX	52	<i>amethyst (28)</i>	119
ALIMTA.....	14	ALREX.....	127	AMICAR	52
ALINIA	8	ALTABAX.....	66	<i>amikacin</i>	8
ALIQOPA.....	14	<i>altacaine</i>	124	<i>amiloride</i>	47
				<i>amiloride-hydrochlorothiazide</i>	47

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

<i>aminocaproic acid</i>	52	<i>ampicillin sodium</i>	10	ANUSOL-HC	102
<i>aminophylline</i>	130	<i>ampicillin-sulbactam</i>	10	ANZEMET	102
<i>amiodarone</i>	46	AMPYRA	27	<i>apexicon e</i>	68
AMITIZA	102	AMRIX.....	28	APHEXDA	108
<i>amitriptyline</i>	40	AMTAGVI	14	APIDRA SOLOSTAR U-100 INSULIN	93
<i>amitriptyline-chlordiazepoxide</i>	40	AMVUTTRA	27	APIDRA U-100 INSULIN ..	93
AMJEVITA(CF).....	114	AMZEEQ	61	APLENZIN.....	40
AMJEVITA(CF) AUTOINJECTOR.....	114	ANAFRANIL.....	40	APOKYN	25
<i>amlodipine</i>	47	<i>anagrelide</i>	72	<i>apomorphine</i>	25
<i>amlodipine-atorvastatin</i>	55	ANA-LEX KIT.....	102	APONVIE.....	102
<i>amlodipine-benazepril</i>	47	ANALPRAM-HC.....	57, 102	<i>apraclonidine</i>	127
<i>amlodipine-olmesartan</i>	47	ANAPROX DS.....	36	<i>aprepitant</i>	102
<i>amlodipine-valsartan</i>	47	<i>anaspaz</i>	100	APRETUDE	4
<i>amlodipine-valsartan-hcthiamid</i>	47	ANASTIA	65	<i>apri</i>	119
<i>ammonium lactate</i>	59	<i>anastrozole</i>	14	APRISO	102
AMMONUL.....	72	ANCOBON	3	APRIZIO PAK.....	65
<i>amnesteem</i>	61	ANDEXXA	52	APTENSIO XR	40
AMONDYS-45	27	ANDRODERM	95	APTIOM.....	22
<i>amoxapine</i>	40	ANDROGEL	95	APTIVUS	4
<i>amoxicil-clarithromy-</i> <i>lansopraz</i>	106	ANGELIQ	117	ARAKODA	8
<i>amoxicillin</i>	10	ANGIOMAX.....	52	ARALAST NP.....	72
<i>amoxicillin-pot clavulanate</i> ..	10	ANIMI-3 WITH VITAMIN D	136	<i>aranelle (28)</i>	119
AMPHADASE	72	ANJESO	36	ARANESP (IN POLYSORBATE).....	108
<i>amphetamine sulfate</i>	40	ANNOVERA.....	118	ARAVA	114
<i>amphotericin b</i>	3	ANODYNE LPT	65	ARAZLO	61
<i>amphotericin b liposome</i>	3	ANORO ELLIPTA.....	130	ARCALYST	108
<i>ampicillin</i>	10	<i>anti-diarrheal (loperamide)</i>	100	ARESTIN	74
		ANTIVERT	102	AREXVY (PF)	110
		<i>anucort-hc</i>	102		

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

<i>arformoterol</i>	130	ASPARLAS	14	ATGAM.....	110
ARGATROBAN.....	52	<i>aspirin</i>	36	ATIVAN.....	40
<i>argatroban in 0.9 % sod chlor</i>	52	<i>aspirin childrens</i>	36	<i>atomoxetine</i>	40
ARICEPT	27	<i>aspirin, buffd-calcium carb-</i> <i>mag</i>	36	ATORVALIQ	55
ARIKAYCE.....	8	<i>aspirin-dipyridamole</i>	52	<i>atorvastatin</i>	55
ARIMIDEX.....	14	ASPIRIN-OMEPRAZOLE ..	52	<i>atovaquone</i>	8
<i>aripiprazole</i>	40	ASPRUZYO SPRINKLE.....	56	<i>atovaquone-proguanil</i>	8
ARISTADA.....	40	ASSURE 4 CONTROL SOLUTION	84	<i>atracurium</i>	28
ARISTADA INITIO	40	ASSURE 4 STRIPS.....	77	ATRALIN	61
ARIXTRA	52	ASSURE DOSE NORMAL CONTROL	84	ATRAPRO CP.....	59
<i>armodafinil</i>	40	ASSURE PLATINUM GLUCOSE METER.....	84	ATRAPRO HYDROGEL	59
ARMONAIR DIGIHALER	130	ASSURE PLATINUM TEST STRIP	77	ATRIPLA.....	4
ARMOUR THYROID	100	ASSURE PRISM CONTROL 1-2 SOLN	84	<i>atropine</i>	100, 123
ARNUITY ELLIPTA	130	ASSURE PRISM MULTI METER	84	ATROPINE.....	123
AROMASIN.....	14	ASSURE PRISM MULTI STRIP	77	<i>atropine in 0.9 % sod chloride</i>	100
ARRANON	14	ASTAGRAF XL.....	14	ATROPINE IN 0.9 % SOD CHLORIDE.....	100
<i>arsenic trioxide</i>	14	ASTERO	65	ATROPINE SULFATE (PF)	123
ARTESUNATE	8	AT HOME A1C	84	ATROVENT HFA	130
ARTHROTEC 50	36	ATACAND	47	AUBAGIO.....	109
ARTHROTEC 75	36	ATACAND HCT	47	<i>aubra</i>	119
ASCENIV	110	<i>atazanavir</i>	4	<i>aubra eq</i>	119
<i>ascomp with codeine</i>	30	ATELVIA	114	AUGMENTIN.....	10
ASCOR	136	<i>atenolol</i>	47	AUGMENTIN ES-600.....	10
<i>ascorbic acid (vitamin c)</i>	136	<i>atenolol-chlorthalidone</i>	47	AUGMENTIN XR	10
<i>asenapine maleate</i>	40			AUGTYRO.....	14
<i>ashlyna</i>	119			<i>aurovela 1.5/30 (21)</i>	119
ASMANEX HFA	130			<i>aurovela 1/20 (21)</i>	119
ASMANEX TWISTHALER	130				

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

<i>aurovela 24 fe</i>	119	<i>avidoxy</i>	11	B
<i>aurovela fe 1.5/30 (28)</i>	119	AVIDOXY DK	11	<i>b complex 1 (with folic acid)</i>
<i>aurovela fe 1-20 (28)</i>	119	<i>avo cream</i>	59	.....136
AURYXIA.....	101	AVODART	133	<i>b complex 100</i>
AUSTEDO	27	AVONEX.....	109	136
AUSTEDO XR.....	27	AVSOLA	102	<i>b complex-vitamin c-folic acid</i>
AUSTEDO XR TITRATION		AVYCAZ.....	6	.....136
KT(WK1-4).....	27	<i>ayuna</i>	119	BABY DDROPS
AUTOJECT 2 INJECTION		AYVAKIT.....	14	136
DEVICE	84	<i>azacitidine</i>	14	BABYBIG
AUTOPEN 1 TO 21 UNITS	84	AZACTAM.....	8	110
AUTOSOFT 30	84	AZASAN.....	14	<i>bacitracin</i>
AUTOSOFT 90	84	AZASITE	122	8, 122
AUTOSOFT XC INFUSION		<i>azathioprine</i>	14	<i>bacitracin-polymyxin b</i>
SET 23.....	84	<i>azathioprine sodium</i>	14	122
AUVELITY.....	40	<i>azelaic acid</i>	61	<i>baclofen</i>
AUVI-Q.....	128	<i>azelastine</i>	74, 124	29
AVALIDE	47	<i>azelastine-fluticasone</i>	130	BACLOFEN
AVAPRO	47	AZELEX	61	29
<i>avar</i>	61	AZESCO	136	BACTRIM.....
AVAR LS.....	61	AZILECT	26	11
AVAR-E GREEN	61	<i>azithromycin</i>	7	BACTRIM DS.....
AVAR-E LS	61	AZOPT	126	11
AVASTIN	14	AZOR	47	BAFIERTAM.....
AVEED.....	95	AZSTARYS.....	40	109
AVEIDA.....	61	<i>aztreonam</i>	8	<i>balanced b-100</i>
AVEIDAOXIA	61	AZULFIDINE	102	136
AVELOX IN NA CL (ISO-		AZULFIDINE EN-TABS... 102		<i>bal-care dha</i>
OSMOTIC)	11	<i>azurette (28)</i>	119	136
AVENOVA	124			BAL-CARE DHA
<i>aviane</i>	119			ESSENTIAL.....
				136
				BALCOLTRA
				119
				BALFAXAR.....
				52
				<i>balsalazide</i>
				102
				BALVERSA
				14
				<i>balziva (28)</i>
				119
				BANZEL
				22
				BAQSIMI
				83
				BARACLUDGE.....
				4
				BARHEMSYS.....
				102
				BASADROX
				66
				BASAGLAR KWIKPEN U-
				100 INSULIN
				93

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

BASAGLAR TEMPO PEN(U-100)INSLN.....	36	BENDEKA.....	14	<i>betamethasone dipropionate</i>	68
BAVENCIO.....	14	BENEFIX.....	52	<i>betamethasone valerate</i>	68
BAXDELA.....	11	BENICAR.....	48	<i>betamethasone, augmented</i>	68
<i>bayer aspirin</i>	36	BENICAR HCT.....	48	BETAPACE.....	46
BAYER CHEWABLE ASPIRIN.....	36	BENLYSTA.....	114	BETAPACE AF.....	46
<i>bayer low dose aspirin</i>	36	BENTYL.....	100	BETASERON.....	109
BCG VACCINE, LIVE (PF).....	110	BENZAMYCIN.....	61	<i>betaxolol</i>	48, 123
<i>b-complex with vitamin c</i>	136	<i>benzepro</i>	61	<i>bethanechol chloride</i>	134
BD INTEGRA NEEDLE.....	84	BENZEPRO (MICROSPHERES).....	61	BETHKIS.....	8
BD MICROTAINER LANCET.....	84	BENZNIDAZOLE.....	8	BETIMOL.....	123
BD SPECIALTY USE NEEDLES.....	84	BENZODOX 30.....	11	BETOPTIC S.....	123
BD ULTRA-FINE NANO PEN NEEDLE.....	84	BENZODOX 60.....	11	BEVACIZUMAB.....	14, 124
BD VERITOR AT-HOME COVID19 TST.....	81	<i>benzonatate</i>	129	BEVESPI AEROSPHERE.....	130
BD VERITOR SARS-COV-2, FLU A-B.....	81	<i>benzoyl peroxide</i>	61	<i>bexarotene</i>	15
BD VERITOR SYSTEM SARS-COV-2.....	81	<i>benzphetamine</i>	71	BEXSERO.....	110
BELBUCA.....	30	<i>benztropine</i>	26	BEYAZ.....	119
BELEODAQ.....	14	BEOVU.....	124	BEYFORTUS.....	4
BELRAPZO.....	14	<i>bepotastine besilate</i>	124	BIAFINE EMULSION.....	59
BELSOMRA.....	40	BEPREVE.....	124	<i>bicalutamide</i>	15
<i>benazepril</i>	47	BERINERT.....	130	BICILLIN C-R.....	10
<i>benazepril-hydrochlorothiazide</i>	47, 48	<i>baser</i>	68	BICILLIN L-A.....	10
<i>bendamustine</i>	14	BESER KIT.....	68	BICNU.....	15
BENDAMUSTINE.....	14	BESIVANCE.....	122	BIDIL.....	48
		BESPONSA.....	14	BIGFOOT UNITY.....	84
		BESREMI.....	109	BIJUVA.....	117
		BETADINE OPHTHALMIC PREP.....	122	BIKTARVY.....	4
		<i>betaine</i>	102	BILTRICIDE.....	8
		<i>betamethasone acet,sod phos</i>	76	<i>bimatoprost</i>	124, 126
				BIMZELX.....	57

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

BIMZELX AUTOINJECTOR	57	BLOOD GLUCOSE TEST ..	77	BREXAFEMME	3
BINAXNOW COVID AG CARD HOME TST	81	BLOOD-GLUCOSE METER	84	BREYANZI	15
BINAXNOW COVID-19 AG CARD.....	81	BLOXIVERZ	29	<i>breyana</i>	130
BINAXNOW COVID-19 AG SELF TEST	81	BLULINK DIABETIC TEST BUNDLE.....	84	BREZTRI AEROSPHERE .	130
BINOSTO.....	114	BLULINK GLUCOSE MONITOR SYSTEM.....	84	BRIDION	29
BIONIME RIGHTEST GM300 SYSTEM	84	BLULINK GLUCOSE TEST STRIP	77	<i>brillyn</i>	119
BIONIME RIGHTEST TEST STRIPS.....	77	BONJESTA	102	BRILINTA.....	52
BIOTEL CARE BGM-4 METER	84	BOOSTRIX TDAP.....	110	<i>brimonidine</i>	61, 127
BIOTHRAX	110	<i>bortezomib</i>	15	BRIMONIDINE- DORZOLAMIDE (PF)...	126
<i>biotin</i>	136	BORTEZOMIB	15	<i>brimonidine-timolol</i>	126
BIOTIN	136	<i>bosentan</i>	130	BRINEURA.....	95
<i>bismuth subcit k-metronidz-ten</i>	106	BOSULIF	15	<i>brinzolamide</i>	126
<i>bisoprolol fumarate</i>	48	BOTOX	110	BRIUMVI.....	109
<i>bisoprolol-hydrochlorothiazide</i>	48	BOTOX COSMETIC	110	BRIVIACT	22, 23
<i>bivalirudin</i>	52	<i>bp 10-1</i>	61	BRIXADI	30
BIVALIRUDIN	52	BRAFTOVI	15	BROMFED DM	129
BIVIGAM	110	BRAINSTRONG PRENATAL	136	<i>bromfenac</i>	125
<i>bleomycin</i>	15	BREATHERITE MDI SPACER	81	<i>bromocriptine</i>	26
BLINCYTO.....	15	BREEZE 2 CONTROL SOLUTION,HIGH.....	84	<i>brompheniramine-pseudoeph- dm</i>	129
<i>blisovi 24 fe</i>	119	BRENZAVVY	98	BROMSITE.....	125
<i>blisovi fe 1.5/30 (28)</i>	119	BREO ELLIPTA	130	BRONCHITOL	130
<i>blisovi fe 1/20 (28)</i>	119	<i>bretylum tosylate</i>	46	BROVANA	130
BLOOD GLUCOSE CONTROL, NORMAL....	84	BREVIBLOC	48	BRUKINSA.....	15
		BREVIBLOC IN NAACL (ISO- OSM)	48	BRYHALI.....	68
				<i>budesonide</i>	102, 130
				<i>budesonide-formoterol</i>	130
				<i>bufferin</i>	36
				<i>bumetanide</i>	48

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

BUPAP	30	<i>cabergoline</i>	95	CAMPTOSAR.....	15
BUPHENYL.....	72	CABLIVI.....	52	<i>camrese</i>	119
<i>bupivacaine (pf)</i>	65	CABOMETYX.....	15	<i>camrese lo</i>	119
<i>bupivacaine-epinephrine (pf)</i>	65	CABTREO	61	CAMZYOS.....	56
<i>buprenorphine</i>	30	CADEAU DHA.....	136	CANASA.....	102
<i>buprenorphine hcl</i>	30	CADUET	55	CANCIDAS.....	3
<i>buprenorphine-naloxone</i>	36	<i>caffeine citrate</i>	72	<i>candesartan</i>	48
<i>bupropion hcl</i>	40	<i>calcipotriene</i>	57	<i>candesartan-</i> <i>hydrochlorothiazid</i>	48
BUPROPION HCL	40	CALCIPOTRIENE.....	57	CANTHARIDIN IN ACETONE	59
<i>bupropion hcl (smoking deter)</i>	74	<i>calcipotriene-betamethasone</i>	57	<i>capecitabine</i>	15
<i>bupirone</i>	41	<i>calcitonin (salmon)</i>	95	CAPEX	68
<i>busulfan</i>	15	<i>calcitriol</i>	57, 95	CAPLYTA	41
BUSULFEX	15	CALCIUM ACETATE	135	CAPRELSA.....	15
<i>butalbital-acetaminop-caf-cod</i>	30	<i>calcium acetate(phosphat bind)</i>	135	CAPSFENAC PAK	36
<i>butalbital-acetaminophen</i>	30	<i>calcium gluc in nacl, iso-osm</i>	135	CAPSINAC	36
<i>butalbital-acetaminophen-caff</i>	30	CALCIUM GLUC IN NAACL, ISO-OSM.....	135	<i>captopril</i>	48
<i>butalbital-aspirin-caffeine</i>	30	CALDOLOR	36	<i>captopril-hydrochlorothiazide</i>	48
<i>butorphanol</i>	36	CALPHRON	135	CARAC	59
BUTRANS	30	CALQUENCE (ACALABRUTINIB MAL)	15	CARAFATE.....	106
BYDUREON BCISE	98	<i>calsodore</i>	57	CARBAGLU	72
BYETTA	98	CALSODORE KIT	57	<i>carbamazepine</i>	23
BYFAVO	41	CALTRATE GUMMY BITES	136	CARBATROL	23
BYLVAY	102	CAMBIA	36	<i>carbidopa</i>	26
BYOOVIZ.....	124	CAMCEVI (6 MONTH)	15	<i>carbidopa-levodopa</i>	26
BYSTOLIC	48	<i>camila</i>	117	<i>carbidopa-levodopa-</i> <i>entacapone</i>	26
C				<i>carbinoxamine maleate</i>	128
CABENUVA	4			<i>carboplatin</i>	15

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

CARDIZEM.....	48	<i>cartia xt</i>	48	<i>cefepime in dextrose,iso-osm</i> ..	7
CARDIZEM CD	48	<i>carvedilol</i>	48	<i>cefixime</i>	7
CARDIZEM LA.....	48	<i>carvedilol phosphate</i>	48	CEFOTAN	7
CARDURA	48	CARVYKTI.....	15	<i>cefotaxime</i>	7
CARDURA XL	48	CASODEX.....	15	<i>cefotetan</i>	7
CARESENS CONTROL A AND B	84	<i>caspofungin</i>	3	<i>cefoxitin</i>	7
CARESENS N.....	84	CATAPRES-TTS-1.....	48	<i>cefoxitin in dextrose, iso-osm</i> .	7
CARESENS N FELIZ GLUCOSE METER.....	84	CATAPRES-TTS-2.....	48	<i>cefpodoxime</i>	7
CARESENS N TEST STRIPS	77	CATAPRES-TTS-3.....	48	<i>cefprozil</i>	7
CARESENS N VOICE	85	CAVERJECT.....	134	<i>ceftazidime</i>	7
CARESTART COVID-19 AG HOME TST	82	CAVERJECT IMPULSE....	134	<i>ceftriaxone</i>	7
CARETOUCH CONTROL SOLN L2-L3	85	CAYA CONTOURED	116	CEFTRIAZONE	7
CARETOUCH GLUCOSE MONITORING	85	CAYSTON.....	8	<i>ceftriaxone in dextrose,iso-os</i> .	7
CARETOUCH TEST STRIP	77	<i>caziant (28)</i>	119	<i>cefuroxime axetil</i>	7
<i>carglumic acid</i>	72	<i>cefaclor</i>	6	<i>cefuroxime sodium</i>	7
<i>carisoprodol</i>	29	<i>cefadroxil</i>	6	<i>celacyn</i>	59
<i>carisoprodol-aspirin</i>	29	<i>cefazolin</i>	6	CELEBREX	36
<i>carisoprodol-aspirin-codeine</i>	29	CEFAZOLIN	6	<i>celecoxib</i>	36
<i>carmustine</i>	15	<i>cefazolin in 0.9% sod chloride</i>	6	CELESTONE SOLUSPAN ..	76
CARMUSTINE.....	15	<i>cefazolin in dextrose (iso-os)</i> ..	6	CELEXA	41
CARNITOR	72	CEFAZOLIN IN DEXTROSE (ISO-OS)	6	CELLCEPT	15
CARNITOR (SUGAR-FREE)	72	<i>cefazolin in dextrose 5 %</i>	6	CELLCEPT INTRAVENOUS	15
CAROSPIR	48	CEFAZOLIN IN STERILE WATER.....	6	CELLTRION DIATRUST COV-19 HOME.....	82
<i>carteolol</i>	123	<i>cefdinir</i>	6	CELONTIN	23
		<i>cefepime</i>	7	<i>cem-urea</i>	59
		CEFEPIME.....	7	CENTANY	66
		CEFEPIME IN DEXTROSE 5 %.....	7	CENTANY AT.....	66
				<i>cephalexin</i>	7

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

CEPROTIN (BLUE BAR) ...	52	<i>chloramphenicol sod succinate</i>	8	CIMERLI.....	124
CEPROTIN (GREEN BAR)	52	.....	8	<i>cimetidine</i>	106
CEQUA	124	<i>chlordiazepoxide hcl</i>	41	<i>cimetidine hcl</i>	106
CEQUR SIMPLICITY	85	<i>chlordiazepoxide-clidinium</i>	100	CIMZIA.....	102
CERACADE	59	<i>chlorhexidine gluconate</i>	74	CIMZIA POWDER FOR	
CERAMAX.....	59	<i>chloroprocaine (pf)</i>	65	RECONST	102
CERDELGA.....	95	<i>chloroquine phosphate</i>	8	<i>cinacalcet</i>	95
CEREBYX	23	<i>chlorothiazide sodium</i>	48	CINQAIR	130
CEREZYME	95	<i>chlorpromazine</i>	41	CINRYZE	130
CERVIDIL	118	<i>chlorthalidone</i>	48	CINVANTI	102
<i>cetirizine</i>	128	<i>chlorzoxazone</i>	29	CIPRO	11
CETRAXAL.....	76	CHOLBAM	102	CIPRO HC.....	76
<i>cetorelix</i>	95	<i>cholecalciferol (vitamin d3)</i>	136	<i>ciprofloxacin</i>	11
CETROTIDE.....	95	CHOLECALCIFEROL		<i>ciprofloxacin hcl</i>	11, 76, 122
<i>cevimeline</i>	72	(VITAMIN D3)	136	<i>ciprofloxacin in 5 % dextrose</i>	
CHANTIX.....	74	<i>cholestyramine (with sugar)</i>	55	.....	11
CHANTIX CONTINUING		<i>cholestyramine light</i>	55	<i>ciprofloxacin-dexamethasone</i>	
MONTH BOX.....	74	CHORIONIC		.....	76
CHANTIX STARTING		GONADOTROPIN,		CIPROFLOXACIN-	
MONTH BOX.....	74	HUMAN.....	95	FLUOCINOLONE	76
<i>charlotte 24 fe</i>	119	CIALIS	133, 134	<i>cisplatin</i>	15
<i>chateal (28)</i>	119	CIBINQO	59	CISPLATIN	15
<i>chateal eq (28)</i>	119	<i>ciclodan</i>	67	<i>citalopram</i>	41
CHEMET	72	CICLODAN KIT.....	66, 67	CITALOPRAM	41
CHENODAL.....	102	<i>ciclopirox</i>	67	CITRANATAL B-CALM (FE	
<i>children's alaway</i>	124	<i>ciclopirox-ure-camph-menth-</i>		GLUC).....	136
CHILDREN'S FLONASE		<i>euc</i>	67	CITRANATAL MEDLEY ..	136
ALLERGY RLF	130	<i>cidofovir</i>	4	<i>citrate of magnesia</i>	102
CHLOHUX	68	<i>cilostazol</i>	52	<i>citroma</i>	103
CHLOOXIA	68	CILOXAN	122	<i>cladribine</i>	15
		CIMDUO.....	4	CLAFORAN.....	7

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

<i>claravis</i>	61	CLIMARA.....	117	<i>clomid</i>	95
CLARINEX.....	128	CLIMARA PRO	117	<i>clomiphene citrate</i>	95
CLARINEX-D 12 HOUR ..	129	<i>clindacin</i>	62	<i>clomipramine</i>	41
<i>clarithromycin</i>	7	<i>clindacin etz</i>	62	<i>clonazepam</i>	23
<i>classic prenatal</i>	136	CLINDACIN ETZ.....	62	<i>clonidine</i>	48
<i>cleansing wash</i>	61	<i>clindacin p</i>	62	<i>clonidine hcl</i>	41, 48
<i>clearlax</i>	103	CLINDACIN PAC.....	62	CLONIDINE HCL	48
<i>clemastine</i>	128	CLINDAGEL	62	<i>clopidogrel</i>	52
CLENIA PLUS.....	62	<i>clindamycin hcl</i>	8	<i>clorazepate dipotassium</i>	41
CLENPIQ	103	CLINDAMYCIN IN 0.9 % SOD CHLOR	8	<i>clotrimazole</i>	3, 67
CLEOCIN	8, 118	<i>clindamycin in 5 % dextrose</i> ...8		<i>clotrimazole-betamethasone</i>	67
CLEOCIN HCL	8	<i>clindamycin pediatric</i>	8	<i>clozapine</i>	41
CLEOCIN PEDIATRIC	8	<i>clindamycin phosphate</i> ....8, 62, 118		CLOZARIL	41
CLEOCIN T	62	<i>clindamycin-benzoyl peroxide</i>	62	<i>c-nate dha</i>	136
CLEVER CHEK BLOOD GLUCOSE	85	<i>clindamycin-tretinoin</i>	62	COAGADEX.....	52
CLEVER CHOICE GLUCOSE MONITOR....	85	CLINDESSE	118	COARTEM.....	8
CLEVER CHOICE LEVEL 2 CONTROL	85	CLINITEST COVID-19 HOME TEST	82	COCAINE	65
CLEVER CHOICE MICRO	85	CLINPRO 5000	74	<i>cod liver oil</i>	136
CLEVER CHOICE MICRO TEST STRIP	78	<i>clobazam</i>	23	<i>codeine sulfate</i>	30
CLEVER CHOICE PRO 78, 85		<i>clobetasol</i>	68	<i>codeine-butalbital-asa-caff</i> ...30	
CLEVER CHOICE TALK GLUCOSE SYS	85	<i>clobetasol-emollient</i>	68	<i>codeine-guaiifenesin</i>	129
CLEVER CHOICE TALK TEST	78	CLOBEX	68	CODITUSSIN AC	129
CLEVER CHOICE TEST STRIPS.....	78	<i>clocortolone pivalate</i>	69	CODITUSSIN DAC	129
CLEVER CHOICE VOICE PLUS TEST.....	78	<i>clodan</i>	69	COLAZAL	103
		CLODAN KIT.....	69	<i>colchicine</i>	113
		<i>clofarabine</i>	15	COLCRYS.....	113
		CLOLAR	15	<i>colesevelam</i>	55

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

<i>colistin (colistimethate na)</i> 8	CONTOUR NEXT LINK..... 85	CORTROSYN 76
COLUMVI 15	CONTOUR NEXT LINK 2.4 85	COSELA..... 15
COLY-MYCIN M PARENTERAL 8	CONTOUR NEXT METER. 85	COSENTYX..... 57
COMBIGAN 126	CONTOUR NEXT ONE METER 85	COSENTYX (2 SYRINGES) 57
COMBIPATCH 117	CONTOUR NEXT TEST STRIPS 78	COSENTYX PEN 57
COMBIVENT RESPIMAT 130	CONTOUR TEST STRIPS .. 78	COSENTYX PEN (2 PENS) 57
COMETRIQ 15	CONTRAVE..... 71	COSENTYX UNOREADY PEN..... 57
COMIRNATY 2023-24 (12Y UP)(PF) 111	CONZIP..... 36	COSMEGEN 15
COMPACT SPACE CHAMBER 82	COPAXONE..... 109	COSOPT 126
COMPAZINE 103	COPIKTRA 15	COSOPT (PF)..... 126
COMPLERA 4	CORDRAN 69	<i>cosyntropin</i> 76
<i>complete natal dha</i> 136	CORDRAN TAPE LARGE ROLL..... 69	COTELLIC..... 15
<i>completenate</i> 137	CORDX COVID-19 AG HOME TEST 82	COTEMPLA XR-ODT 41
<i>compro</i> 103	COREG 48	<i>covaryx</i> 117
CONCEPT DHA 137	COREG CR 48	<i>covaryx h.s.</i> 117
CONCEPT OB 137	CORGARD 48	COVID-19 AT-HOME TEST 82
CONCERTA 41	CORIFACT 52	COVID19 TEST ADM.BY PHARMACIST 82
CONDYLOX 59	CORLANOR 56	COXANTO..... 36
CONJUPRI..... 48	CORTANE-B..... 59	COZAAR..... 49
CONSENSI 48	CORTEF 76	CREON..... 103
<i>constulose</i> 103	CORTENEMA 103	CRESEMBA..... 3
CONTOUR CONTROL SOLUTION, NML 85	CORTIFOAM..... 103	CRESTOR 55
CONTOUR NEXT EZ METER 85	<i>corti-sav</i> 66	CRINONE 117
CONTOUR NEXT GEN METER 85	<i>cortisone</i> 76	<i>cromolyn</i> 103, 124, 130
CONTOUR NEXT LEV 2 CONTROL SOL..... 85	CORTISPORIN-TC..... 76	<i>crotan</i> 71
	CORTROPHIN GEL 76	<i>cryselle (28)</i> 120
		CRYSVITA..... 95

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

CUBICIN RF	8	CYKLOKAPRON.....	52	DALVANCE	8
CUE COVID-19 CARTRIDGE READER.....	82	CYLTEZO(CF).....	114	<i>danazol</i>	95
CUE COVID-19 HOME TEST	82	CYLTEZO(CF) PEN	114	DANTRIUM.....	29
CUPRIMINE.....	114	CYLTEZO(CF) PEN CROHN'S-UC-HS.....	114	<i>dantrolene</i>	29
<i>curae</i>	120	CYLTEZO(CF) PEN PSORIASIS-UV.....	114	DANYELZA	16
<i>curity sterile water</i>	72	CYMBALTA	41	DAPAGLIFLOZ PROPANED- METFORMIN	98
CUTAQUIG	111	<i>cyproheptadine</i>	128	DAPAGLIFLOZIN PROPANEDIOL.....	98
CUVITRU	111	CYRAMZA	16	<i>dapsone</i>	8, 62
CUVPOSA	100	<i>cyred</i>	120	DAPTACEL (DTAP PEDIATRIC) (PF)	111
CUVRIOR.....	72	<i>cyred eq</i>	120	<i>daptomycin</i>	8
<i>cyanocobalamin (vitamin b-12)</i>	137	CYSTADANE	103	DAPTOMYCIN.....	8
<i>cyclobenzaprine</i>	29	CYSTADROPS	124	DAPTOMYCIN IN 0.9 % SOD CHLOR.....	8
CYCLOGYL	123	CYSTAGON.....	134	DARAPRIM	8
CYCLOMYDRIL	128	CYSTARAN.....	124	<i>darifenacin</i>	133
<i>cyclopentolate</i>	123	<i>cytarabine</i>	16	DARTISLA.....	100
<i>cyclopen-tropic-phenyleph- watr</i>	123	<i>cytarabine (pf)</i>	16	<i>darunavir</i>	4
<i>cyclophosphamide</i>	15	CYTOGAM.....	111	DARZALEX.....	16
CYCLOPHOSPHAMIDE... 15, 16		CYTOMEL.....	100	DARZALEX FASPRO.....	16
CYCLOSERINE	8	CYTOTEC.....	106	<i>dasetta 1/35 (28)</i>	120
CYCLOSET	98	<i>cytra-2</i>	134	<i>dasetta 7/7/7 (28)</i>	120
<i>cyclosporine</i>	16, 124	<i>cytra-3</i>	134	<i>daunorubicin</i>	16
CYCLOSPORINE IN KLARITY	124	<i>cytra-k</i>	134	D	
<i>cyclosporine modified</i>	16	<i>dabigatran etexilate</i>	52	<i>dacarbazine</i>	16
CYCLOTENS REFILL.....	29	<i>dactinomycin</i>	16	<i>dalfampridine</i>	27
CYCLOTENS STARTER....	29	<i>daliresp</i>	130		

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

DAYVIGO.....	41	DEOXIAVAR	62	DERMAZENE	66
DAZAVEIDAOXIA.....	62	DEPAKOTE	23	DERMOTIC OIL.....	76
DAZOMON	62	DEPAKOTE ER	23	DESCOVY	4
DDAVP.....	95	DEPAKOTE SPRINKLES...23		<i>desipramine</i>	41
DEBACTEROL	74	DEPEN TITRATABS.....	115	<i>desloratadine</i>	128
<i>deblitane</i>	117	DEPO-ESTRADIOL	117	<i>desmopressin</i>	96
<i>decara</i>	137	DEPO-MEDROL	76	DESMOPRESSIN	96
DECARA	137	DEPO-PROVERA.....	117	<i>desog-e.estradiol/e.estradiol</i>	120
<i>decitabine</i>	16	DEPO-SUBQ PROVERA 104	117	<i>desonide</i>	69
DEFENCATH.....	72	DEPO-TESTOSTERONE....96		<i>desoximetasone</i>	69
<i>deferasirox</i>	72	DERMACINRX LEXITRAL	37	DESOXYN	41
<i>deferiprone</i>	72	<i>dermacinrx lidocan</i>	65	DESVENLAFAXINE.....	41
DEFITELIO	52	DERMACINRX LIDOGEL.65		<i>desvenlafaxine succinate</i>	41
<i>deflazacort</i>	76	DERMACINRX LIDOREX.65		DETROL	133
DELESTROGEN	117	DERMACINRX LIDOREX.65		DETROL LA	133
DELSTRIGO.....	4	DERMACINRX PRENATRIX	137	<i>dexabliss</i>	76
DELZICOL	103	DERMACINRX PRENATRYL	137	<i>dexamethasone</i>	76
<i>demeclocycline</i>	11	DERMACINRX PRETRATE	137	<i>dexamethasone intensol</i>	76
DEMEROL	30	DERMACINRX PRIZOPAK.....	65	<i>dexamethasone sodium phos</i> (<i>pf</i>)	76
DEMEROL (PF).....	30	DERMACINRX PUREFOLIX	137	<i>dexamethasone sodium</i> <i>phosphate</i>	76, 127
DEMSER.....	49	DERMACINRX THERAZOLE PAK.....	67	DEXAMETH- MOXIFLOX(PF)- NACL,ISO.....	126
DENAVIR	68	DERMA-SMOOTH/FS BODY OIL	69	DEXAMET-MOXIFL- KETORO-NACL(PF).....	124
DENGVAXIA (PF)	111	DERMA-SMOOTH/FS SCALP OIL	69	<i>dexchlorpheniramine maleate</i>	128
<i>denta 5000 plus</i>	74	DERMAWERX SDS.....	69	DEXCOM G6 RECEIVER ..	85
<i>denta 5000 plus sensitive</i>	75			DEXCOM G6 SENSOR.....	85
<i>dentagel</i>	75				
DEOXIA.....	62				
DEOXIADEMTAR.....	62				
DEOXIATAR	62				

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

DEXCOM G6 TRANSMITTER.....	85	DIASOXIA.....	62	<i>didanosine</i>	4
DEXCOM G7 RECEIVER..	85	DIATRUE CONTROL SOLN NORMAL.....	85	<i>diethylpropion</i>	71
DEXCOM G7 SENSOR	85	DIATRUE PLUS BLOOD GLUCOSE MET	85	DIFFERIN	62
DEXEDRINE SPANSULE ..	41	DIATRUE PLUS TEST STRIP	78	DIFICID	7
DEXERYL	59	<i>diazepam</i>	23, 41	<i>diflorasone</i>	69
DEXILANT.....	106	<i>diazepam intensol</i>	41	DIFLUCAN.....	3
<i>dexlansoprazole</i>	106, 107	<i>diazoxide</i>	83	<i>diflunisal</i>	37
<i>dexmethylphenidate</i>	41	DIBENZYLINE	49	<i>difluprednate</i>	127
<i>dexrazoxane hcl</i>	13	<i>dichlorphenamide</i>	27	DIFMETIOXRIME	67
DEXTENZA.....	127	DICLAREAL	37	<i>digoxin</i>	52
<i>dextroamphetamine sulfate</i> ...	41	DICLEGIS.....	103	<i>dihydroergotamine</i>	26
<i>dextroamphetamine- amphetamine</i>	41	DICLOFENAC EPOLAMINE	37	DILANTIN	23
DEXYCU (PF)	127	<i>diclofenac potassium</i>	37	DILANTIN EXTENDED.....	23
DHEA.....	96	<i>diclofenac sodium</i> ...37, 59, 125		DILANTIN INFATABS	23
DHIVY	26	DICLOFENAC SUBMICRONIZED	37	DILANTIN-125.....	23
DIACOMIT.....	23	<i>diclofenac-misoprostol</i>	37	DILAUDID.....	30
DIADIMAXIA	62	DICLOFENAC DC.....	37	DILAUDID (PF)	30
<i>dialyvite 800</i>	137	DICLOFONO.....	37	<i>diltiazem</i>	49
DIALYVITE 800 WITH IRON	137	DICLOHEAL-60.....	37	<i>dilt-xr</i>	49
DIALYVITE 800 WITH ZINC 15.....	137	DICLOPR.....	37	<i>dimenhydrinate</i>	103
DIALYVITE 800 WITH ZINC 50.....	137	DICLOSAICIN	37	DIMENTHO.....	37
DIALYVITE VITAMIN D3 MAX	137	DICLOTAL	37	<i>dimethyl fumarate</i>	109
DIAOXIA.....	62	DICLOTREX	37	DIMOXIA	62
DIASAXIATAR	62	DICLOTREX II.....	37	DIOCHLOY	57
DIASDIMAXIA.....	62	<i>dicloxacillin</i>	10	DIOOXIA	57
		<i>dicyclomine</i>	100	DIOVAN.....	49
				DIOVAN HCT.....	49
				DIPENTUM	103
				DIPHEN	128

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

<i>diphenhydramine hcl</i>	128	<i>doxolamide-timolol (pf)</i>	126	DSUVIA	30
<i>diphenoxylate-atropine</i>	100	<i>dotti</i>	117	DUAKLIR PRESSAIR	130
DIPROLENE (AUGMENTED).....	69	DOVATO	4	DUAVEE	117
<i>dipyridamole</i>	52	<i>doxazosin</i>	49	DUET DHA WITH OMEGA-3	137
DISALCID	37	<i>doxepin</i>	41, 59	DUETACT	98
<i>diskets</i>	30	<i>doxercalciferol</i>	96	DUEXIS	37
<i>disopyramide phosphate</i>	46	DOXIL.....	16	<i>dulcolax (magnesium hydroxide)</i>	103
<i>disulfiram</i>	72	<i>doxorubicin</i>	16	DULERA.....	130
DITHOL	37	<i>doxorubicin, peg-liposomal</i> ..	16	<i>duloxetine</i>	41
DIURIL	49	<i>doxy-100</i>	11	DULOXICAIN.....	41
<i>divalproex</i>	23	<i>doxycycline hyclate</i>	11, 12	DUOBRII	69
DIVIGEL.....	117	DOXYCYCLINE HYCLATE	12	DUOPA.....	26
DM2	98	<i>doxycycline monohydrate</i>	12	DUPIXENT PEN.....	59
<i>docetaxel</i>	16	<i>doxylamine-pyridoxine (vit b6)</i>	103	DUPIXENT SYRINGE.....	59
<i>dodex</i>	137	DRAXACE.....	62	<i>duramorph (pf)</i>	30
<i>dofetilide</i>	46	DRAXACEY	62	DUREX AVANTI BARE REAL FEEL	116
DOJOLVI	136	DRISDOL.....	137	DUREZOL	127
<i>dolishale</i>	120	<i>drithocrema hp</i>	57	DURYSTA.....	126
DOLOTRANZ	65	DRIXECE.....	62	<i>dutasteride</i>	133
<i>donepezil</i>	27	DRIZALMA SPRINKLE.....	41	<i>dutasteride-tamsulosin</i>	134
DONNATAL	100	<i>dronabinol</i>	103	DYANAVEL XR	41
DOPTELET (15 TAB PACK)	52	<i>droperidol</i>	103	DYMISTA	130
DORAL	41	<i>drospirenone-e.estradiol-lm,fa</i>	120	DYRENIUM.....	49
DORYX.....	11	<i>drospirenone-ethinyl estradiol</i>	120	DYSPORT	111
DORYX MPC	11	DROXIA	16	E	
<i>doxolamide</i>	126	<i>droxidopa</i>	72	<i>e.e.s. 400</i>	7
DORZOLAMIDE (PF)	126	DRYSOL DAB-O-MATIC...59		E.E.S. GRANULES.....	7
<i>doxolamide-timolol</i>	126				

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

EASIVENT HOLDING CHAMBER.....	82	EASY TRAK II TEST STRIP	78	<i>efavirenz</i>	4
EASY PLUS II HIGH CONTROL.....	85	EASY TRAK LOW CONTROL.....	86	<i>efavirenz-emtricitabin-tenofov</i>	4
EASY PLUS II TEST.....	78	EASYGLUCO MONITORING SYSTEM	86	<i>efavirenz-lamivu-tenofov disop</i>	4
EASY STEP.....	78	EASYGLUCO TEST.....	78	<i>effer-k</i>	135
EASY STEP BLOOD GLUCOSE METER.....	85	EASYMAX.....	78	EFFER-K.....	135
EASY STEP HIGH CONTROL SOLN.....	85	EASYMAX 15 LEVEL 2.....	86	EFFEXOR XR.....	41
EASY TALK GLUCOSE TEST.....	78	EASYMAX NG.....	86	EFFIENT.....	52
EASY TALK HIGH CONTROL.....	85	EASYMAX NORMAL CONTROL.....	86	EFUDEX.....	59
EASY TALK PLUS II LOW CONTROL.....	85	EASYMAX V SPEAKING GLUCOSE SYS.....	86	EGRIFTA SV.....	109
EASY TALK PLUS II TEST STRIP.....	78	ECEOXIA.....	62	ELAHERE.....	16
EASY TOUCH BLU CTRL SOLN-L1,L3.....	86	EC-NAPROSYN.....	37	ELAPRASE.....	96
EASY TOUCH BLULINK GLUC SYST.....	86	<i>econazole</i>	67	ELELYSO.....	96
EASY TOUCH BLULINK TEST STRIP.....	78	<i>econtra ez</i>	120	ELEMENT COMPACT GLUCOSE METER.....	86
EASY TOUCH GLUCOSE MONITOR.....	86	<i>econtra one-step</i>	120	ELEMENT COMPACT NORMAL CONTROL.....	86
EASY TOUCH TEST STRIP	78	<i>ecotrin</i>	37	ELEMENT COMPACT TEST STRIPS.....	78
EASY TRAK GLUCOSE TEST.....	78	<i>ecotrin low strength</i>	37	ELEMENT COMPACT V GLUCOSE MTR.....	86
EASY TRAK II BLOOD GLUCOSE MTR.....	86	ECOZA.....	67	ELEMENT NORMAL CONTROL.....	86
EASY TRAK II CTRL SOLN- NORMAL.....	86	EDARBI.....	49	ELEMENT PLUS BLOOD GLUCOSE KIT.....	86
		EDARBYCLOR.....	49	ELEMENT TEST STRIPS...	78
		EDECIN.....	49	ELEPSIA XR.....	23
		EDEX.....	134	ELESTRIN.....	117
		EDLUAR.....	41	<i>eletriptan</i>	26
		<i>ed-spaz</i>	100	ELFABRIO.....	96
		EDURANT.....	4	ELIDEL.....	59
		<i>eemt</i>	117	ELIGARD.....	16
		<i>eemt hs</i>	117		

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

ELIGARD (3 MONTH).....	16	EMBRACE PRO TEST STRIPS.....	78	ENBREL.....	115
ELIGARD (4 MONTH).....	16	EMBRACE TALK BLOOD GLUCOSE SYS	86	ENBREL MINI.....	115
ELIGARD (6 MONTH).....	16	EMBRACE TALK CONTROL-LOW (L1).....	86	ENBREL SURECLICK	115
ELIMITE.....	71	EMBRACE TALK TEST STRIPS.....	78	ENDARI.....	72
<i>elimest</i>	120	EMBRACE WAVE PLUS GLUCOSE MTR.....	86	<i>endocet</i>	30
ELIQUIS	52	EMCYT	16	ENDOMETRIN.....	117
ELIQUIS DVT-PE TREAT 30D START.....	52	EMEND.....	103	ENGERIX-B (PF)	111
ELITEK.....	13	EMEND (FOSAPREPITANT)	103	ENGERIX-B PEDIATRIC (PF).....	111
<i>elite-ob</i>	137	EMFLAZA	76	ENHERTU.....	16
ELIXOPHYLLIN.....	130	EMGALITY PEN.....	26	<i>enilloring</i>	118
ELLA.....	120	EMGALITY SYRINGE.....	26	ENJAYMO	72
ELLENCE	16	EMPAVELI.....	72	<i>enoxaparin</i>	52
ELLUME COVID-19 HOME TEST	82	EMPLICITI	16	ENOXILUV	52
ELLZIA PAK	69	<i>emreal</i>	65	<i>enpresse</i>	120
ELMIRON.....	134	EMSAM	41	<i>enskyce</i>	120
ELOCTATE.....	52	<i>emtricitabine</i>	4	ENSPRYNG	16
ELREXFIO	16	<i>emtricitabine-tenofovir (tdf)</i> ...4		ENSTILAR.....	57
<i>eluryng</i>	118	EMTRIVA	4	<i>entacapone</i>	26
ELYXYB	26	<i>emulsion sb</i>	59	ENTADFI	134
ELZONRIS	16	EMVERM	9	<i>entecavir</i>	4
EMBRACE BLOOD GLUCOSE SYSTEM. 78, 86		<i>emzahh</i>	117	ENTRESTO.....	56
EMBRACE EVO LEVEL 1. 86		<i>enalapril maleate</i>	49	ENTTY	59
EMBRACE EVO TEST STRIPS.....	78	<i>enalaprilat</i>	49	ENTYVIO	103
EMBRACE GLUCOSE CONTROL LOW	86	<i>enalapril-hydrochlorothiazide</i>	49	ENTYVIO PEN.....	103
EMBRACE PRO GLUCOSE METER	86	ENBRACE HR.....	137	<i>enulose</i>	103
				ENVARBUS XR.....	16
				EOHILIA.....	103
				EPANED.....	49
				EPCLUSA	4

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

EPICERAM.....	59	EQUETRO	23	<i>escitalopram oxalate</i>	41
EPIDIOLEX	23	ERAXIS(WATER DILUENT)3		ESGIC.....	30
EPIDUO FORTE.....	62	ERBITUX.....	16	<i>esmolol</i>	49
EPIFOAM	57	<i>ergocalciferol (vitamin d2)</i> .	137	<i>esmolol in nacl (iso-osm)</i>	49
<i>epinastine</i>	124	<i>ergoloid</i>	41	ESMOLOL IN STERILE	
<i>epinephrine</i>	128	ERGOMAR	26	WATER.....	49
EPINEPHRINE	128	<i>ergotamine-caffeine</i>	26	<i>esomeprazole magnesium</i> ...	107
<i>epinephrine hcl</i>	130	ERIVEDGE	16	<i>esomeprazole sodium</i>	107
EPINEPHRINE HCL (PF) .	128	ERLEADA	16	ESPEROCT	53
EPINEPHRINE IN SOD		<i>erlotinib</i>	16	<i>estarylla</i>	120
CHL,ISO(PF)	128	ERMEZA.....	100	<i>estazolam</i>	42
EPINEPHRINE		<i>errin</i>	117	ESTRACE	117
PROFESSIONAL.....	128	ERTACZO	67	<i>estradiol</i>	117
EPINEPHRINESNAP	128	<i>ertapenem</i>	9	ESTRADIOL.....	117
EPINEPHRINESNAP-EMS		ERWINASE.....	16	<i>estradiol valerate</i>	117
.....	128	<i>ery pads</i>	62	<i>estradiol-norethindrone acet</i>	
EPINEPHRINESNAP-V....	128	<i>erygel</i>	62	.....	117
EPIPEN	128	ERYPED 200.....	7	ESTRING	117
EPIPEN JR	128	ERYPED 400.....	7	ESTROGEL.....	117
<i>epirubicin</i>	16	<i>ery-tab</i>	7	<i>estrogens-methyltestosterone</i>	
<i>epitol</i>	23	ERY-TAB.....	7	.....	117
EPIVIR	4	ERYTHROCIN	7	<i>eszopiclone</i>	42
EPKINLY	16	<i>erythrocine (as stearate)</i>	7	<i>ethacrynate sodium</i>	49
<i>eplerenone</i>	49	<i>erythromycin</i>	7, 123	<i>ethacrynic acid</i>	49
EPOGEN	108	<i>erythromycin ethylsuccinate</i> ...	7	<i>ethambutol</i>	9
<i>epoprostenol</i>	49	<i>erythromycin lactobionate</i>	8	<i>ethosuximide</i>	23
EPRONTIA	23	<i>erythromycin with ethanol</i>	62	ETHOXIA	62
<i>eprosartan</i>	49	<i>erythromycin-benzoyl peroxide</i>		<i>ethyl chloride</i>	65
EPSOLAY	62	.....	62	<i>ethynodiol diac-eth estradiol</i>	
<i>eptifibatide</i>	53	ESBRIET.....	130	.....	120
				ETHYOL	13

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

<i>etodolac</i>	37	EVERSENSE E3 SENSOR- HOLDER.....	86	<i>eye itch relief</i>	124
<i>etonogestrel-ethinyl estradiol</i>	118	EVERSENSE E3 SMART TRANSMITTER	87	EYSUVIS	127
ETOPOPHOS.....	16	EVISTA	114	EZ SMART PLUS SYSTEM	87
<i>etoposide</i>	16	EVKEEZA.....	55	EZ SMART PLUS TEST	78
<i>etravirine</i>	4	EVOCLIN	63	EZ SMART SYSTEM.....	87
EUA PATIENT ASSESSMENT	82	EVOLUTION BLOOD GLUCOSE METER.....	87	EZ SMART TEST	78
EUCRISA.....	59	EVOLUTION NORMAL CONTROL	87	EZALLOR SPRINKLE.....	55
EUFLEXXA.....	37	EVOLUTION TEST STRIPS	78	<i>ezetimibe</i>	55
EULEXIN.....	16	EVOMELA	16	EZETIMIBE- ROSUVASTATIN.....	55
EURAX.....	71	EVOTAZ	4	<i>ezetimibe-simvastatin</i>	55
<i>euthyrox</i>	100	EVOXAC	72	<i>ezfe 200</i>	137
EVAMIST.....	117	EVRYSDI.....	27	F	
EVEKEO.....	42	EXELDERM	67	FA-8.....	137
EVENCARE G2.....	78, 86	EXELON PATCH.....	27	FABHALTA.....	72
EVENCARE G3 GLUCOSE METER	86	<i>exemestane</i>	16	FABIOR.....	63
EVENCARE G3 TEST	78	EXFORGE.....	49	FABRAZYME.....	96
EVENCARE MINI GLUCOSE TEST STR.....	78	EXFORGE HCT.....	49	FACTIVE	11
EVENCARE MINI MONITOR SYSTEM	86	EXJADE.....	72	<i>falmina (28)</i>	120
EVENCARE PROVIEW TEST STRIP	78	EXKIVITY.....	16	<i>famciclovir</i>	4
EVENITY.....	114	EXODERM	67	<i>famotidine</i>	107
EVERLYWELL COVID19 HOM COLLECT	82	EXONDYS-51.....	27	<i>famotidine (pf)</i>	107
<i>everolimus (antineoplastic)</i> ..	16	EXPAREL (PF)	65	<i>famotidine (pf)-nacl (iso-os)</i>	107
<i>everolimus</i> (immunosuppressive).....	16	EXSERVAN	72	FANAPT	42
		EXTINA	67	FARESTON.....	16
		<i>eye allergy itch relief</i>	124	FARXIGA.....	98
		<i>eye allergy itch-redness rlf</i>	124	FASENRA	130
				FASENRA PEN.....	130

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

FASLODEX	16	<i>fentanyl citrate</i>	32	<i>fesoterodine</i>	133
FASTEP COVID-19 AG HOME TEST.....	82	FENTANYL CITRATE	32	FETROJA	7
FC2 FEMALE CONDOM .	116	<i>fentanyl citrate (pf)</i>	31	FETZIMA.....	42
<i>febuxostat</i>	113	FENTANYL CITRATE (PF) 31		FEXMID.....	29
FEIBA NF	53	<i>fentanyl citrate (pf)-0.9%nacl</i>	31, 32	FIASP FLEXTOUCH U-100 INSULIN	93
<i>felbamate</i>	23	FENTANYL CITRATE (PF)- 0.9%NACL.....	31, 32	FIASP PENFILL U-100 INSULIN	93
FELBATOL.....	23	FENTANYL-ROPIVACAINE- NACL (PF)	32	FIASP PUMPCART	93
FELDENE	37	FENTORA.....	32	FIASP U-100 INSULIN	93
<i>felodipine</i>	49	FEOSOL.....	137	FIBRICOR.....	55
<i>fem ph</i>	118	FEOSOL BIFERA	137	FIBRYGA.....	53
FEMARA	16	FERAHEME	137	FILSPARI	56
FEMCAP	116	FERGON	137	FINACEA.....	63
FEMRING.....	117	FER-IN-SOL	137	<i>finasteride</i>	73, 134
<i>fenofibrate</i>	55	<i>ferocon</i>	137	<i>ingolimod</i>	109
FENOFIBRATE	55	<i>ferosul</i>	137	FINTEPLA	23
<i>fenofibrate micronized</i>	55	<i>ferretts</i>	137	<i>finzala</i>	120
FENOFIBRATE MICRONIZED.....	55	FERRETTS IPS.....	137	FIORICET	32
<i>fenofibrate nanocrystallized</i>	55	<i>ferrex 150 forte</i>	137	FIORICET WITH CODEINE	32
<i>fenofibric acid</i>	55	<i>ferrex 150 forte plus</i>	137	FIRAZYR	130
<i>fenofibric acid (choline)</i>	55	<i>ferrex 150 plus</i>	137	FIRDAPSE	27
FENOGLIDE	55	FERRIMIN 150.....	137	FIRMAGON KIT W DILUENT SYRINGE	17
<i>fenoprofen</i>	37	FERRIPROX.....	73	FIRVANQ	13
FENOPROFEN	37	FERRIPROX (2 TIMES A DAY)	72	<i>flac otic oil</i>	76
FENOVAR	37	FERRLECIT.....	73	FLAGYL	9
FENSOLVI.....	16	<i>ferrous gluconate</i>	137	FLAREX.....	127
<i>fentanyl</i>	30	<i>ferrous sulfate</i>	137	<i>flavoxate</i>	133
FENTANYL (PF)- BUPIVACAINE-NACL ...	30	<i>ferumoxytol</i>	137	FLEBOGAMMA DIF	111

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

<i>flecainide</i>	47	FLUMADINE	4	<i>flurandrenolide</i>	69
FLECTOR	37	FLUMIST QUAD 2023-2024		<i>flurazepam</i>	42
FLEQSUVY	29	.....	111	<i>flurbiprofen</i>	37
FLEXICHAMBER.....	82	<i>flunisolide</i>	130	<i>flurbiprofen sodium</i>	125
FLOLAN.....	49	<i>fluocinolone</i>	69	FLUTICASONE FUROATE-	
FLOLIPID	55	<i>fluocinolone acetonide oil</i>	76	VILANTEROL.....	130
FLOMAX	134	<i>fluocinolone and shower cap</i>	69	<i>fluticasone propionate</i> ..	69, 131
FLONASE ALLERGY		<i>fluocinonide</i>	69	FLUTICASONE	
RELIEF	130	<i>fluocinonide-e</i>	69	PROPIONATE.....	130, 131
FLONASE SENSIMIST	130	FLUOPAR	69	<i>fluticasone propion-salmeterol</i>	
FLORIVA (FLUORIDE-		FLUORESCEIN-		.....	131
VITAMIN D3).....	137	BENOXINATE.....	124	FLUTICASONE PROPION-	
FLOWFLEX COVID-19 AG		<i>fluorescein-proparacaine</i> ...	124	SALMETEROL.....	131
HOME TEST.....	82	<i>fluoride (sodium)</i>	75, 137	<i>fluvastatin</i>	55
<i>floxuridine</i>	17	FLUORIDEX DAILY		<i>fluvoxamine</i>	42
FLUAD QUAD 2023-24(65Y		DEFENSE	75	FLUZONE HIGHDOSE	
UP)(PF)	111	FLUORIDEX SENSITIVITY		QUAD 23-24 PF	111
FLUARIX QUAD 2023-2024		RELIEF	75	FLUZONE QUAD 2023-2024	
(PF).....	111	FLUORIMAX 5000	75	.....	111
FLUBLOK QUAD 2023-2024		FLUORIMAX 5000		FLUZONE QUAD 2023-2024	
(PF).....	111	SENSITIVE.....	75	(PF).....	111
FLUCELVAX QUAD 2023-		<i>fluorometholone</i>	127	FML FORTE.....	127
2024.....	111	FLUOROPLEX	59	FML LIQUIFILM.....	127
FLUCELVAX QUAD 2023-		<i>fluorouracil</i>	17, 59	FOCALIN.....	42
2024 (PF).....	111	FLUOROURACIL	59	FOCALIN XR	42
<i>fluconazole</i>	3	FLUOVIX	69	<i>folbee</i>	138
<i>fluconazole in nacl (iso-osm)</i> .	3	FLUOVIX PLUS.....	69	<i>folbic</i>	138
<i>flucytosine</i>	3	<i>fluoxetine</i>	42	<i>folic acid</i>	138
<i>fludarabine</i>	17	FLUOXIA	69	FOLIC ACID	138
<i>fludrocortisone</i>	76	<i>fluphenazine decanoate</i>	42	FOLIC ACID-VIT B6-VIT	
FLULAVAL QUAD 2023-2024		<i>fluphenazine hcl</i>	42	B12	138
(PF).....	111			<i>folitab</i>	138

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

<i>folivane-f</i>	138	FORA KETONE CONTROL SOLN-L1	87	FORACARE GD40A GLUCOSE METER	87
<i>folivane-ob</i>	138	FORA NORMAL CONTROL	87	FORACARE GD40B GLUCOSE METER	87
FOLLISTIM AQ	96	FORA PREMIUM V10 GLUCOSE METER.....	87	FORACARE GDH LOW CONTROL	87
FOLOTYN	17	FORA TEST N'GO VOICE METER	87	FORFIVO XL.....	42
<i>folplex 2.2</i>	138	FORA TEST STRIP	79	<i>formoterol fumarate</i>	131
<i>foltabs 800</i>	138	FORA TN'G ADV MOBILE MULTI MTR.....	87	FORTEO.....	114
<i>fondaparinux</i>	53	FORA TN'G ADVAN PRO TEST STRIP.....	79	FOSAMAX.....	114
FORA 6 CONNECT GLUCOSE STRIP	78	FORA TN'G ADVANCE MULTI-FN MTR.....	87	FOSAMAX PLUS D.....	114
FORA 6 CONNECT MULTIFUNCTN MTR....	87	FORA TN'G ADVANCE PRO MONITOR	87	<i>fosamprenavir</i>	4
FORA 6CONN-GTEL-TN'G ADV STRIP	78	FORA TN'G VOICE METER	87	<i>fosaprepitant</i>	103
FORA D10	87	FORA TN'G VOICE TEST STRIPS.....	79	<i>foscarnet</i>	4
FORA D15 GLUCOSE-BP MONITOR	87	FORA V10.....	79, 87	FOSCAVIR.....	4
FORA D15G STRIPS	79	FORA V10-V12-D10-D20 STRIPS.....	79	<i>fosfomycin tromethamine</i>	12
FORA D20	79, 87	FORA V12 BLOOD GLUCOSE SYSTEM.....	87	<i>fosinopril</i>	49
FORA D40D GLUCOSE-BP MONITOR	87	FORA V12 GLUCOSE	79	<i>fosinopril-hydrochlorothiazide</i>	49
FORA D40-G31 TEST STRIPS.....	79	FORA V20.....	79, 87	<i>fosphenytoin</i>	23
FORA G20	79, 87	FORA V30A.....	87	FOSRENOL	101, 102
FORA G30A.....	87	FORACARE GD20	79	FOTIVDA.....	17
FORA G30-PREMIUM V10 TEST STRP.....	79	FORACARE GD20 GLUCOSE METER.....	87	FRAGMIN.....	53
FORA GD50 BLOOD GLUCOSE SYSTEM.....	87	FORACARE GD40 TEST STRIPS.....	79	FRAICHE 5000 PREVI	75
FORA GD50 TEST STRIPS	79			FRAICHE 5000 SENSITIVE	75
FORA GTEL GLUCOSE TEST STRIP	79			FREESTYLE CONTROL	87
FORA GTEL MULTI- FUNCTN MONITOR	87			FREESTYLE FLASH SYSTEM	88
				FREESTYLE FREEDOM....	88
				FREESTYLE FREEDOM LITE	88

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

FREESTYLE INSULINX... 79, 88	FUROSCIX .....49	GASTROCROM .....103
FREESTYLE INSULINX TEST STRIPS .....79	<i>furosemide</i> .....49	<i>gatifloxacin</i> .....123
FREESTYLE LIBRE 14 DAY READER.....88	FUROSEMIDE IN 0.9 % NACL .....49	GATTEX 30-VIAL.....103
FREESTYLE LIBRE 14 DAY SENSOR .....88	FUZEON .....4	<i>gavilax</i> .....103
FREESTYLE LIBRE 2 READER.....88	FYARRO .....17	<i>gavilyte-c</i> .....103
FREESTYLE LIBRE 2 SENSOR .....88	<i>fyavolv</i> .....117	<i>gavilyte-g</i> .....103
FREESTYLE LIBRE 3 READER.....88	FYCOMPA.....23	GAVRETO.....17
FREESTYLE LIBRE 3 SENSOR .....88	FYLNTRA .....109	GAZYVA.....17
FREESTYLE LITE METER88	<i>fyremadel</i> .....96	GE100 BLOOD GLUCOSE SYSTEM .....88
FREESTYLE LITE STRIPS 79	G	GE100 BLOOD GLUCOSE TEST STRIP.....79
FREESTYLE PRECISION NEO METER .....88	<i>g tussin ac</i> .....129	GE100 CONTROL SOLUTION NORMAL....88
FREESTYLE PRECISION NEO STRIPS .....79	<i>gabapentin</i> .....23	GE333 BLOOD GLUCOSE SYSTEM .....88
FREESTYLE SIDEKICK II 88	GALAFOLD .....96	GE333 BLOOD GLUCOSE TEST STRIP .....79
FREESTYLE SYSTEM KIT88	<i>galantamine</i> .....28	<i>gefitinib</i>.....17
FREESTYLE TEST .....79	GALZIN .....135	GELCLAIR .....75
FROTEK .....37	GAMASTAN.....111	GEL-KAM.....75
FROVA.....27	GAMIFANT .....17	GELNIQUE.....133
<i>frovatriptan</i>.....27	GAMMAGARD LIQUID ..111	GELX .....75
FRUZAQLA.....17	GAMMAGARD S-D (IGA < 1 MCG/ML) .....111	<i>gemcitabine</i>.....17
<i>full spectrum b-vitamin c</i>....138	GAMMAKED .....111	GEMCITABINE.....17
FULPHILA .....108	GAMMAPLEX .....111	<i>gemfibrozil</i> .....55
<i>fulvestrant</i>.....17	GAMMAPLEX (WITH SORBITOL) .....111	<i>gemmily</i>.....120
FURADANTIN.....12	GAMUNEX-C.....111	GEMTESA .....133
	GANCICLOVIR .....4	GENABIO COVID-19 RAPID AT-HOME .....82
	<i>ganciclovir sodium</i> .....4	<i>gengraf</i>.....17
	<i>ganirelix</i>.....96	
	GARDASIL 9 (PF).....111	

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

GENOTROPIN	109	GLOPERBA.....	113	GLUCOCOM BLOOD GLUCOSE.....	88
GENOTROPIN MINIQUICK	109	GLUCAGEN HYPOKIT	83	GLUCOCOM CONTROL NORMAL.....	88
GENSTRIP TEST STRIP.....	79	GLUCAGON (HCL) EMERGENCY KIT.....	83	GLUCOCOM GLUCOSE....	79
<i>gentamicin</i>	9, 66, 123	<i>glucagon emergency kit (human)</i>	83	GLUCOSE CONTROL.....	89
<i>gentamicin in nacl (iso-osm)</i> ..	9	GLUCAGON HCL.....	82	GLUCOTROL XL.....	98
GENTAMICIN IN NAACL (ISO-OSM).....	9	GLUCO NAVII GLUCOSE MONITOR	88	GLUMETZA	98
<i>gentamicin sulfate (ped) (pf)</i> ..	9	GLUCO NAVII TEST STRIP	79	<i>glyburide</i>	98
GENTEEL VACUUM LANCING DEVICE	88	GLUCOCARD 01 METER..	88	<i>glyburide micronized</i>	98
<i>gentle laxative (bisacodyl)</i> .	103	GLUCOCARD 01 NORMAL CONTROL	88	<i>glyburide-metformin</i>	98
<i>gentlelax</i>	103	GLUCOCARD 01 SENSOR PLUS	79	GLYCATE	100
GENVOYA	4	GLUCOCARD EXPRESSION	79, 88	<i>glycopyrrolate</i>	101
GEODON.....	42	GLUCOCARD SHINE CONNEX METER.....	88	GLYCOPYRROLATE.....	101
GIAPREZA	56	GLUCOCARD SHINE EXPRESS METER	88	<i>glycopyrrolate (pf)</i>	100
GILENYA.....	109	GLUCOCARD SHINE METER	88	<i>glycopyrrolate (pf) in water</i> 100	
GILOTRIF.....	17	GLUCOCARD SHINE TEST STRIPS.....	79	GLYCOPYRROLATE (PF) IN WATER.....	100, 101
GIMOTI	103	GLUCOCARD SHINE XL METER	88	GLYRX-PF	101
GIVLAARI.....	73	GLUCOCARD VITAL	88	GLYXAMBI.....	98
GLASSIA	73	GLUCOCARD VITAL SENSOR.....	79	GM100.....	79, 89
<i>glatiramer</i>	109	GLUCOCARD VITAL TEST STRIPS.....	79	GOCOVRI.....	26
<i>glatopa</i>	109	GLUCOCARD VITAL TEST STRIPS.....	79	GOJJI BLOOD GLUCOSE TEST STRIP.....	79
GLEEVEC.....	17			GOJJI GLUCOSE CNTRL SOL-NORMAL.....	89
GLEOSTINE.....	17			GOJJI KETONE CONTROL SOLN-L1	89
GLIADEL WAFER	17			GOJJI MULTI-FUNCTIONAL METER.....	89
<i>glimepiride</i>	98			GOLYTELY.....	103
<i>glipizide</i>	98			GONAL-F.....	96
GLIPIZIDE.....	98				
<i>glipizide-metformin</i>	98				

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

GONAL-F RFF	96	HADLIMA(CF).....	115	HEALTHPRO TEST STRIPS	
GONAL-F RFF REDI-JECT	96	HADLIMA(CF)		.....	80
GONITRO	57	PUSHTOUCH	115	<i>heather</i>	117
GOPRELTO	65	HAEGARDA.....	131	HECTOROL	96
GOTOKNOW COVID-19 AG		<i>hailey</i>	120	HEMADY	76
HOME TEST	82	<i>hailey 24 fe</i>	120	HEMANGEOL.....	49
GRALISE	23	<i>hailey fe 1.5/30 (28)</i>	120	<i>hematinic/folic acid</i>	138
<i>granisetron (pf)</i>	103	<i>hailey fe 1/20 (28)</i>	120	<i>hematogen fa</i>	138
<i>granisetron hcl</i>	103	HALAVEN	17	HEMGENIX.....	53
GRANIX	109	<i>halcinonide</i>	69	HEMLIBRA	53
GRASTEK	111	HALCION	42	<i>hemmorex-hc</i>	103
<i>griseofulvin microsize</i>	3	HALDOL DECANOATE....	42	HEMOCYTE.....	138
<i>griseofulvin ultramicrosize</i>	3	<i>halobetasol propionate</i>	69	HEMOCYTE-F	138
<i>guanfacine</i>	42, 49	<i>haloette</i>	118	HEMOFIL M HIGH.....	53
GUARDIAN 4 GLUCOSE		HALOG	69	HEMOFIL M LOW.....	53
SENSOR	89	<i>haloperidol</i>	42	HEMOFIL M MID	53
GUARDIAN 4		<i>haloperidol decanoate</i>	42	HEMOFIL M SUPER HIGH	53
TRANSMITTER.....	89	<i>haloperidol lactate</i>	42	<i>hep flush-10 (pf)</i>	53
GUARDIAN CONNECT		HALUCORT	59	HEPAGAM B.....	111
TRANSMITTER.....	89	HAPRODERM.....	59	<i>heparin (porcine)</i>	53
GUARDIAN LINK 3		HARMONY GLUCOSE TEST		HEPARIN (PORCINE) IN	
TRANSMITTER.....	89	STRIP	80	0.9% NACL.....	53
GUARDIAN SENSOR 3	89	HARVONI.....	4	<i>heparin (porcine) in 5 % dex</i>	53
GVOKE.....	83	HAVRIX (PF).....	111	<i>heparin (porcine) in nacl (pf)</i>	
GVOKE HYOPEN 2-PACK		HAXCHLO	67	.....	53
.....	83	HAXCHLODREX.....	67	HEPARIN (PORCINE) IN	
GVOKE PFS 2-PACK		HAXDRAX.....	67	NACL (PF)	53
SYRINGE	83	HEALTHPRO GLUCOSE		<i>heparin lock flush (porcine)</i>	.53
GYNAZOLE-1	118	MONITOR	89	<i>heparin lockflush(porcine)(pf)</i>	
H		HEALTHPRO HIGH-LOW		.....	53
HADLIMA	115	CONTROL	89		
HADLIMA PUSHTOUCH	115				

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

<i>heparin(porcine) in 0.45% nacl</i>	53	HUMALOG KWIKPEN INSULIN	93	HUMIRA(CF) PEN PEDIATRIC UC (ONLY NDCS STARTING WITH 00074).....	115
HEPARIN(PORCINE) IN 0.45% NACL.....	53	HUMALOG MIX 50-50 INSULN U-100	93	HUMIRA(CF) PEN PSOR- UV-ADOL HS (ONLY NDCS STARTING WITH 00074).....	115
<i>heparin, porcine (pf)</i>	53	HUMALOG MIX 50-50 KWIKPEN.....	93	HUMULIN 70/30 U-100 INSULIN	93
HEPARIN, PORCINE (PF)..	53	HUMALOG MIX 75-25 KWIKPEN.....	93	HUMULIN 70/30 U-100 KWIKPEN.....	93
HEPLISAV-B (PF)	111	HUMALOG MIX 75-25(U- 100)INSULN	93	HUMULIN N NPH INSULIN KWIKPEN.....	93
<i>her style</i>	120	HUMALOG TEMPO PEN(U- 100)INSULN	93	HUMULIN N NPH U-100 INSULIN	94
HERCEPTIN.....	17	HUMALOG U-100 INSULIN	93	HUMULIN R REGULAR U- 100 INSULN	94
HERCEPTIN HYLECTA	17	HUMATE-P	53	HUMULIN R U-500 (CONC) INSULIN	94
HERZUMA	17	HUMATIN.....	9	HUMULIN R U-500 (CONC) KWIKPEN.....	94
HETLIOZ	42	HUMATROPE.....	109	HUMULIN R U-500 (CONC) KWIKPEN.....	94
HETLIOZ LQ.....	42	HUMIRA (ONLY NDCS STARTING WITH 00074)	115	HUMULIN R U-500 (CONC) KWIKPEN.....	94
HEXIOUNYL	67	HUMIRA PEN (ONLY NDCS STARTING WITH 00074)	115	HUMULIN R U-500 (CONC) KWIKPEN.....	94
HIBERIX (PF)	111	HUMIRA(CF) (ONLY NDCS STARTING WITH 00074)	115	HUMULIN R U-500 (CONC) KWIKPEN.....	94
HIPREX	13	HUMIRA(CF) PEDI CROHNS STARTER (ONLY NDCS STARTING WITH 00074)	115	HUMULIN R U-500 (CONC) KWIKPEN.....	94
HISTEX-AC.....	129	HUMIRA(CF) PEN (ONLY NDCS STARTING WITH 00074).....	115	HUMULIN R U-500 (CONC) KWIKPEN.....	94
HIXDEFRIMA.....	67	HUMIRA(CF) PEN (ONLY NDCS STARTING WITH 00074).....	115	HUMULIN R U-500 (CONC) KWIKPEN.....	94
HIZENTRA.....	111	HUMIRA(CF) PEN CROHNS-UC-HS (ONLY NDCS STARTING WITH 00074).....	115	HUMULIN R U-500 (CONC) KWIKPEN.....	94
<i>homatropaire</i>	124	HUMIRA(CF) PEN CROHNS-UC-HS (ONLY NDCS STARTING WITH 00074).....	115	HUMULIN R U-500 (CONC) KWIKPEN.....	94
HORIZANT	28	HUMIRA(CF) PEN CROHNS-UC-HS (ONLY NDCS STARTING WITH 00074).....	115	HUMULIN R U-500 (CONC) KWIKPEN.....	94
<i>hpr</i>	59	HUMIRA(CF) PEN CROHNS-UC-HS (ONLY NDCS STARTING WITH 00074).....	115	HUMULIN R U-500 (CONC) KWIKPEN.....	94
<i>hpr plus</i>	59	HUMIRA(CF) PEN CROHNS-UC-HS (ONLY NDCS STARTING WITH 00074).....	115	HUMULIN R U-500 (CONC) KWIKPEN.....	94
<i>hpr plus hydrogel</i>	59	HUMIRA(CF) PEN CROHNS-UC-HS (ONLY NDCS STARTING WITH 00074).....	115	HUMULIN R U-500 (CONC) KWIKPEN.....	94
HPR PLUS-MB HYDROGEL	60	HUMIRA(CF) PEN CROHNS-UC-HS (ONLY NDCS STARTING WITH 00074).....	115	HUMULIN R U-500 (CONC) KWIKPEN.....	94
HULIO(CF).....	115	HUMIRA(CF) PEN CROHNS-UC-HS (ONLY NDCS STARTING WITH 00074).....	115	HUMULIN R U-500 (CONC) KWIKPEN.....	94
HULIO(CF) PEN	115	HUMIRA(CF) PEN CROHNS-UC-HS (ONLY NDCS STARTING WITH 00074).....	115	HUMULIN R U-500 (CONC) KWIKPEN.....	94
HUMALOG JUNIOR KWIKPEN U-100	93	HUMIRA(CF) PEN CROHNS-UC-HS (ONLY NDCS STARTING WITH 00074).....	115	HUMULIN R U-500 (CONC) KWIKPEN.....	94

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

<i>hydrocodone-homatropine</i> .129	<i>hydroxychloroquine</i> .....9	HYSINGLA ER.....33
<i>hydrocodone-ibuprofen</i> .....32	HYDROXYM .....70	HYZAAR .....49
<i>hydrocortisone</i>.....70, 76, 103	<i>hydroxyprogesterone caproate</i>.....117	I
<i>hydrocortisone acetate</i> .....103	<i>hydroxyurea</i> .....17	<i>ibandronate</i>.....114
<i>hydrocortisone butyrate</i> .....70	<i>hydroxyzine hcl</i>.....128	IBRANCE.....17
HYDROCORTISONE	<i>hydroxyzine pamoate</i> .....128	IBSRELA .....104
LOTION COMPLETE.....70	HYFTOR .....60	<i>ibu</i>.....37
<i>hydrocortisone valerate</i>.....70	HYLATOPICPLUS .....60	IBUPAK.....37
<i>hydrocortisone-acetic acid</i> ...76	HYLENEX .....73	<i>ibuprofen</i>.....37
<i>hydrocortisone-iodoquinol- aloe2</i> .....66	<i>hyoscyamine sulfate</i>.....101	<i>ibuprofen-famotidine</i> .....37
<i>hydrocortisone-iodoquinol</i> ...66	HYOSCYAMINE SULFATE.....101	ICAR.....138
<i>hydrocortisone-iodoquinol- aloe</i> .....66	<i>hyosyne</i> .....101	ICAR-C.....138
<i>hydrocortisone-pramoxine</i> ..58, 104	HYPERHEP B.....111	ICAR-C PLUS.....138
HYDROCORTISONE- PRAMOXINE .....58, 104	HYPERHEP B NEONATAL.....111	<i>icatibant</i>.....131
<i>hydromet</i>.....129	HYPERRAB (PF).....111	<i>iclevia</i> .....120
<i>hydromorphone</i> .....33	HYPER-SAL .....131	ICLOFENAC CP.....37
HYDROMORPHONE .....33	HYPERTET (PF).....111	ICLUSIG .....17
<i>hydromorphone (pf)</i>.....32	HYQVIA .....111	<i>icosapent ethyl</i>.....55
HYDROMORPHONE (PF).32	HYRIMOZ .....115	ID NOW COVID-19 TEST KIT .....82
HYDROMORPHONE (PF) IN WATER .....32	HYRIMOZ PEN.....115	IDACIO(CF).....115
<i>hydromorphone (pf)-0.9 % nacl</i>.....33	HYRIMOZ PEN CROHN'S- UC STARTER .....115	IDACIO(CF) PEN .....115
HYDROMORPHONE (PF)- 0.9 % NACL.....32, 33	HYRIMOZ PEN PSORIASIS STARTER.....115	IDACIO(CF) PEN CROHN- UC STARTR.....115
HYDROMORPHONE(PF)- NACL,ISO-OSM.....33	HYRIMOZ(CF).....115	IDACIO(CF) PEN PSORIASIS START .....115
<i>hydroxocobalamin</i> .....138	HYRIMOZ(CF) PEDI CROHN STARTER.....115	IDAMYCIN PFS .....17
	HYRIMOZ(CF) PEN .....115	IDARAN.....63
		<i>idarubicin</i> .....17
		IDELVION .....53

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

IDHIFA.....	17	<i>imiquimod</i>	113	INDOMETHACIN	38
IDOSE TR	126	IMITREX	27	INFANRIX (DTAP) (PF) ...	112
IDYYXIATAR	63	IMITREX STATDOSE PEN	27	INFED	138
IFE-BIMIX 30/1.....	134	IMITREX STATDOSE		INFINITY CONTROL	
<i>iferex 150 forte</i>	138	REFILL	27	SOLUTION NORM	89
IFEX	17	IMJUDO	17	INFINITY STARTER KIT ...	89
<i>ifosfamide</i>	17	IMLYGIC	17	INFINITY TEST STRIPS	80
IGALMI	42	IMODIUM A-D.....	101	INFLAMMA-K.....	38
IGLUCOSE BLOOD		IMODIUM MULTI-		INFLECTRA	104
GLUCOSE MONITOR....	89	SYMPTOM RELIEF	101	INFLIXIMAB.....	104
IGLUCOSE TEST STRIP	80	IMOGAM RABIES-HT (PF)		INFUGEM.....	17
IHEALTH COVID-19 AG		.....	111	INFUMORPH P/F	33
HOME TEST.....	82	IMOVAX RABIES VACCINE		INFUVITE PEDIATRIC	138
IHEEZO (PF)	124	(PF).....	111	INGREZZA	28
ILARIS (PF).....	109	IMPAVIDO.....	9	INGREZZA INITIATION	
ILET INFUSION KIT-INSET		IMPOYZ.....	70	PK(TARDIV).....	28
23.....	89	IMURAN.....	17	INJECTAFER.....	138
ILET INFUSION-CONTACT		IMVEXXY MAINTENANCE		INLYTA.....	17
DTCH 23	89	PACK.....	117	INNOPRAN XL	49
ILET INSULIN PUMP	89	IMVEXXY STARTER PACK		INPEFA	98
ILEVRO	125	.....	118	INPEN (FOR HUMALOG)	
ILUMYA	58	INBRIJA.....	26	PINK.....	89
ILUVIEN.....	127	<i>incassia</i>	118	INPEN (NOVOLOG OR	
<i>imatinib</i>	17	INCRELEX	73	FIASP) PINK.....	89
IMBRUVICA	17	INCRUSE ELLIPTA	131	INQOVI.....	17
IMCIVREE	71	<i>indapamide</i>	49	INREBIC	17
IMFINZI.....	17	INDERAL LA	49	INSPRA.....	49
IMIOXIA.....	67	INDERAL XL	49	INSULIN ASP PRT-INSULIN	
<i>imipenem-cilastatin</i>	9	INDICAID COVID-19 AG		ASPART	94
<i>imipramine hcl</i>	42	HOME TEST	82	INSULIN ASPART U-100 ...	94
<i>imipramine pamoate</i>	42	INDOCIN	37	INSULIN DEGLUDEC.....	94
		<i>indomethacin</i>	37, 38		

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

INSULIN GLARGINE U-300 CONC.....	94	<i>ipratropium bromide</i>	75, 131	IWILFIN.....	17
INSULIN GLARGINE-YFGN	94	<i>ipratropium-albuterol</i>	131	IXCHIQ (PF).....	112
INSULIN LISPRO	94	<i>irbesartan</i>	49	IXEMPRA	18
INSULIN LISPRO PROTAMIN-LISPRO	94	<i>irbesartan-hydrochlorothiazide</i>	49	IXIARO (PF).....	112
INSULIN SYRINGE- NEEDLE U-100	82	IRESSA	17	IXINITY	53
INTEGRA F	138	<i>irinotecan</i>	17	IYUZEH (PF).....	126
INTELENCE.....	4	<i>iron 100 plus</i>	138	J	
INTELISWAB COVID-19 HOME TEST.....	82	<i>iron chews</i>	138	JADENU.....	73
INTRAROSA	118	IROSPAN 24/6	138	JADENU SPRINKLE	73
INTUNIV ER	42	ISENTRESS	4	<i>jaimiess</i>	120
INVEGA.....	42	ISENTRESS HD	5	JAKAFI	18
INVEGA HAFYERA.....	42	<i>isibloom</i>	120	JALYN.....	134
INVEGA SUSTENNA	42	ISOLYTE S PH 7.4	136	<i>jantoven</i>	53
INVEGA TRINZA	42	ISOLYTE-S	136	JANUMET	98
INVELTYS.....	127	<i>isoniazid</i>	9	JANUMET XR.....	99
INVOKAMET.....	98	<i>isoproterenol hcl</i>	56	JANUVIA.....	99
INVOKAMET XR	98	ISORDIL	57	JARDIANCE.....	99
INVOKANA	98	ISORDIL TITRADOSE	57	<i>jasmiel (28)</i>	120
INZDEAXIATAR.....	63	<i>isosorbide dinitrate</i>	57	JATENZO	96
INZDEAXIAVAR	63	<i>isosorbide mononitrate</i>	57	<i>javygtor</i>	96
INZDEOXIA.....	63	<i>isosorbide-hydralazine</i>	49	JAYPIRCA	18
IODOFLEX.....	60	<i>isotretinoin</i>	63	JAZZ WIRELESS 2 METER KIT	89
IODOPEN	17	<i>isradipine</i>	49	JELMYTO	18
IODOSORB	60	ISTALOL.....	123	JEMPERLI	18
IOPIDINE.....	127	ISTODAX	17	<i>jencycla</i>	118
IPOL	112	ISTURISA	96	JENTADUETO.....	99
		ITHOXIA	63	JENTADUETO XR	99
		<i>itraconazole</i>	3	JESDUVROQ.....	73
		<i>ivermectin</i>	9, 63	JEUVEAU	112

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

JEVTANA	18	KAPSPARGO SPRINKLE ..	49	<i>ketotifen fumarate</i>	124
<i>jinteli</i>	118	KARBINAL ER	128	KEVEYIS	28
JIVI.....	53	<i>kariva (28)</i>	120	KEVZARA	116
JOENJA.....	73	KATERZIA	49	KEYTRUDA	18
<i>jolessa</i>	120	KAZANO	99	KHAPZORY.....	14
JORNAY PM.....	42	KCENTRA	53	KIMMTRAK.....	18
<i>joyeaux</i>	120	KEDRAB (PF)	112	KIMYRSA.....	9
JUBLIA	67	<i>kelnor 1/35 (28)</i>	120	KINERET	116
<i>juleber</i>	120	<i>kelnor 1-50 (28)</i>	120	KINEVAC.....	104
JULUCA	5	<i>kemoplat</i>	18	KINRIX (PF).....	112
<i>junel 1.5/30 (21)</i>	120	KENALOG.....	70, 76	<i>kiprofen</i>	38
<i>junel 1/20 (21)</i>	120	KENALOG-80	76	KISQALI	18
<i>junel fe 1.5/30 (28)</i>	120	KENGREAL	53	KISQALI FEMARA CO- PACK.....	18
<i>junel fe 1/20 (28)</i>	120	KEPIVANCE.....	14	KITABIS PAK.....	9
<i>junel fe 24</i>	120	KEPPRA.....	23	KLARON	66
JUST RIGHT 5000.....	75	KEPPRA XR	23	<i>klayesta</i>	67
JUXTAPID	55	<i>keralyt</i>	58	KLISYRI	18
JYLAMVO.....	18	KERALYT RX	58	KLONOPIN.....	23
JYNARQUE.....	96	KERALYT SCALP	58	<i>klor-con</i>	135
JYNNEOS (PF).....	112	KERALYT SCALP COMPLETE.....	58	<i>klor-con 10</i>	135
K		KERASTAT	60	<i>klor-con 8</i>	135
KADCYLA	18	KERENDIA.....	49	<i>klor-con m10</i>	135
<i>kaitlib fe</i>	120	KESIMPTA PEN	109	<i>klor-con m15</i>	135
KALBITOR.....	131	<i>ketoconazole</i>	3, 67	<i>klor-con m20</i>	135
KALETRA	5	<i>ketodan</i>	67	<i>klor-con/ef</i>	135
<i>kalliga</i>	120	<i>ketodan kit</i>	67	KLOXXADO	38
KALYDECO	131	<i>ketoprofen</i>	38	KOATE	53
KANJINTI.....	18	<i>ketorolac</i>	38, 125	<i>kobee</i>	138
KANUMA.....	96	KETOROLAC.....	38	KOGENATE FS	53

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

KONVOMEPI	107	<i>lacosamide</i>	23	LANCING DEVICE	89
KORLYM.....	96	LACRISERT	124	LANOXIN.....	52
KORSUVA	73	<i>lactated ringers</i>	72	LANREOTIDE.....	18
KOSELUGO	18	<i>lactulose</i>	104	<i>lansoprazole</i>	107
KOSHER PRENATAL PLUS IRON	138	LAGEVRIO (EUA).....	5	<i>lanthanum</i>	102
<i>kourzeq</i>	75	LAMICTAL.....	23	LANTUS SOLOSTAR U-100 INSULIN	94
KOVALTRY	54	LAMICTAL ODT.....	23	LANTUS U-100 INSULIN ..	94
K-PHOS NO 2.....	134	LAMICTAL ODT STARTER (BLUE).....	23	<i>lapatinib</i>	18
K-PHOS ORIGINAL	134	LAMICTAL ODT STARTER (GREEN).....	23	<i>larin 1.5/30 (21)</i>	120
<i>k-phos-neutral</i>	135	LAMICTAL ODT STARTER (ORANGE).....	23	<i>larin 1/20 (21)</i>	120
KPN.....	138	LAMICTAL STARTER (BLUE) KIT	24	<i>larin 24 fe</i>	120
KRAZATI.....	18	LAMICTAL STARTER (GREEN) KIT	24	<i>larin fe 1.5/30 (28)</i>	120
KRINTAFEL.....	9	LAMICTAL STARTER (ORANGE) KIT	24	<i>larin fe 1/20 (28)</i>	120
KRISTALOSE.....	104	LAMICTAL XR	24	LASIX	50
KRYSTEXXA.....	113	LAMICTAL XR STARTER (BLUE).....	24	LASTACRAFT ONCE DAILY RELIEF.....	124
K-TAB.....	135	LAMICTAL XR STARTER (GREEN).....	24	<i>latanoprost</i>	126
<i>kurvelo (28)</i>	120	LAMICTAL XR STARTER (ORANGE).....	24	LATISSE.....	124
KUVAN.....	96	<i>lamivudine</i>	5	LATUDA	42
KYLEENA	116	<i>lamivudine-zidovudine</i>	5	<i>laxative (bisacodyl)</i>	104
KYMRIAH.....	18	<i>lamotrigine</i>	24	<i>laxative peg 3350</i>	104
KYPROLIS	18	LAMPIT	9	<i>layolis fe</i>	120
KYZATREX.....	96	LAMZEDE.....	73	LDO PLUS	65
L		LANCETS.....	89	LEDIPASVIR-SOFOSBUVIR	5
<i>l norgest/e.estradiol-e.estradiol</i>	120			<i>leena 28</i>	120
<i>labetalol</i>	50			LEFLUNICLO	116
LABETALOL.....	50			<i>leflunomide</i>	116
LABETALOL IN NAACL (ISO- OSMOT)	50			LEMTRADA.....	110

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

<i>lenalidomide</i>	18	<i>levocetirizine</i>	128	<i>lidocaine</i>	65
LENVIMA	18	<i>levofloxacin</i>	11, 123	<i>lidocaine (pf)</i>	47, 65
LEQEMBI	28	<i>levofloxacin in d5w</i>	11	<i>lidocaine hcl</i>	65
LEQVIO	55	<i>levoleucovorin calcium</i>	14	<i>lidocaine hcl-hydrocortison ac</i>	65, 104
LESCOL XL.....	55	<i>levonest (28)</i>	120	LIDOCAINE HCL- HYDROCORTISON AC	104
<i>lessina</i>	120	<i>levonorgest-eth.estradiol-iron</i>	120	<i>lidocaine in 5 % dextrose (pf)</i>	47
LETAIRIS	131	<i>levonorgestrel</i>	121	<i>lidocaine viscous</i>	65
<i>letrozole</i>	18	<i>levonorgestrel-ethinyl estrad</i>	121	<i>lidocaine-epinephrine (pf)</i>	65
<i>leucovorin calcium</i>	14	<i>levonorg-eth estrad triphasic</i>	121	<i>lidocaine-hydrocortison-alo</i>	104
LEUKERAN	18	<i>levora-28</i>	121	<i>lidocaine-prilocaine</i>	65
LEUKINE.....	109	<i>levorphanol tartrate</i>	33	LIDOCAINE-TETRACAINE	65
<i>leuprolide</i>	18	<i>levo-t</i>	100	<i>lidocan iii</i>	65
LEUPROLIDE (3 MONTH) 18		<i>levothyroxine</i>	100	<i>lidocan iv</i>	65
<i>levalbuterol hcl</i>	131	LEVOTHYROXINE	100	<i>lidocan v</i>	65
LEVALBUTEROL TARTRATE	131	<i>levoxyl</i>	100	<i>lidocort</i>	65
LEVAMLODIPINE.....	50	LEVSIN	101	LIDODERM	65
LEVBID	101	LEVSIN/SL	101	<i>lido-k</i>	65
LEVEMIR FLEXPEN	94	LEVULAN	60	LIDOLITE	65
LEVEMIR U-100 INSULIN 94		LEXAPRO.....	42	<i>lidopin</i>	65
<i>levetiracetam</i>	24	LEXETTE	70	LIDOPIN	65
<i>levetiracetam in nacl (iso-os)</i>	24	LEXITRAL PHARMAPAK II	38	LIDO-PRILO CAINE PACK	65
LEVETIRACETAM IN NACL (ISO-OS)	24	LEXTOL	38	LIDORX	65
LEVICYN ANTIPRURITIC 60		LIALDA	104	LIDOSOL	65
LEVICYN ANTIPRURITIC SG.....	60	LIBRAX (WITH CLIDINIUM)	101	<i>lido-sorb</i>	65
<i>levobunolol</i>	123	LIBTAYO	18	<i>lidotor</i>	65
<i>levocarnitine</i>	73	LICART	38		
<i>levocarnitine (with sugar)</i>	73				

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

LIDOTRAL.....	65	LIVMARLI	104	LOREEV XR.....	43
<i>lidozion</i>	65	LIVTENCITY	5	<i>loryna (28)</i>	121
LIDTOPIC MAX	66	LO LOESTRIN FE.....	121	LORZONE	29
LIFEMS NALOXONE	38	LOCOID.....	70	<i>losartan</i>	50
LIKMEZ.....	9	LOCOID LIPOCREAM.....	70	<i>losartan-hydrochlorothiazide</i>	50
LILETTA.....	116	LODINE	38	LOTEMAX.....	127
LINCOCIN.....	9	LODOCO	56	LOTEMAX SM.....	127
<i>lincomycin</i>	9	LODOSYN.....	26	LOTENSIN.....	50
<i>linezolid</i>	9	LOESTRIN 1.5/30 (21).....	121	LOTENSIN HCT.....	50
<i>linezolid in dextrose 5%</i>	9	LOESTRIN 1/20 (21).....	121	<i>loteprednol etabonate</i>	127
<i>linezolid-0.9% sodium chloride</i>	9	LOESTRIN FE 1.5/30 (28- DAY)	121	LOTREL.....	50
LINZESS.....	104	LOESTRIN FE 1/20 (28-DAY)	121	LOTREXONE	38
<i>liothyronine</i>	100	<i>lofena</i>	38	LOTRONEX.....	104
LIPITOR.....	55	<i>lojaimiess</i>	121	LOUTREX	60
LIPOFEN	55	LOKELMA	102	<i>lovastatin</i>	56
LIQREV	131	LOMAIRA	71	LOVAZA	56
<i>lisdexamfetamine</i>	42, 43	LOMOTIL	101	LOVENOX.....	54
<i>lisinopril</i>	50	LONSURF	18	<i>low-ogestrel (28)</i>	121
<i>lisinopril-hydrochlorothiazide</i>	50	<i>loperamide</i>	101	<i>loxapine succinate</i>	43
LITEAIRE MDI CHAMBER	82	LOPID	55	LOYON	60
LITFULO	73	<i>lopinavir-ritonavir</i>	5	<i>lo-zumandimine (28)</i>	121
<i>lithium carbonate</i>	43	LOPRESSOR	50	<i>lubiprostone</i>	104
<i>lithium citrate</i>	43	LOPROX (AS OLAMINE)..	67	LUCEMYRA.....	38
LITHOBID	43	LOPROX KIT	67	LUCENTIS.....	124
LITHOSTAT.....	73	LOQTORZI	18	LUCIRA CHECK-IT COVID HOME TST	82
LIVALO	55	<i>lorazepam</i>	43	<i>ludent fluoride</i>	138
LIVIXIL PAK.....	66	<i>lorazepam intensol</i>	43	<i>lugols</i>	66, 135
		LORBRENA	18	LULICONAZOLE	67
				LUMAKRAS.....	18

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

LUMIGAN	126	LYUMJEV KWIKPEN U-200 INSULIN	94	MAVENCLAD (10 TABLET PACK)	110
LUMIZYME	96	LYUMJEV TEMPO PEN(U- 100)INSULN	94	MAVENCLAD (4 TABLET PACK)	110
LUMRYZ	43	LYUMJEV U-100 INSULIN	94	MAVENCLAD (5 TABLET PACK)	110
LUNESTA	43	LYVISPAH	29	MAVENCLAD (6 TABLET PACK)	110
LUNSUMIO.....	18	<i>lyza</i>	118	MAVENCLAD (7 TABLET PACK)	110
LUPKYNIS	18	M		MAVENCLAD (8 TABLET PACK)	110
LUPRON DEPOT	18	MACROBID	13	MAVENCLAD (9 TABLET PACK)	110
LUPRON DEPOT (3 MONTH).....	18	MACRODANTIN	13	MAVYRET	5
LUPRON DEPOT (4 MONTH).....	18	<i>mafenide acetate</i>	66	MAXALT	27
LUPRON DEPOT (6 MONTH).....	18	MAGNEBIND 300.....	135	MAXALT-MLT	27
LUPRON DEPOT-PED	18	<i>magnesium chloride</i>	135	MAXIDEX	127
LUPRON DEPOT-PED (3 MONTH).....	18	<i>magnesium citrate</i>	104	MAXIMUM D3.....	138
<i>lurasidone</i>	43	<i>magnesium sulfate</i>	135	MAXITROL	126
<i>lutera (28)</i>	121	MAGNESIUM SULFATE IN D5W	135	<i>maxi-tuss ac</i>	129
LUXAMEND	60	<i>magnesium sulfate in water</i>	135	MAXI-TUSS CD.....	129
LUXTURNA.....	124	MALARONE	9	MAYZENT	110
LUZU	67	MALARONE PEDIATRIC	9	MAYZENT STARTER(FOR 1MG MAINT).....	110
LYBALVI.....	43	<i>malathion</i>	71	MAYZENT STARTER(FOR 2MG MAINT).....	110
<i>lyleg</i>	118	<i>maraviroc</i>	5	<i>mb hydrogel</i>	60
<i>lyllana</i>	118	MAR-COF CG	129	<i>mb hydrogel (cyclomethicone)</i>	60
LYNPARZA	18	MARGENZA	18	<i>meclizine</i>	104
LYRICA	24	MARINOL	104	MECLIZINE.....	104
LYRICA CR	24	<i>marlissa (28)</i>	121	<i>meclofenamate</i>	38
LYSODREN	18	MARNATAL-F.....	138		
LYTGOBI.....	18	MARPLAN	43		
LYUMJEV KWIKPEN U-100 INSULIN.....	94	MATULANE	19		
		<i>matzim la</i>	50		

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

MECOBALAMIN (VITAMIN B12).....	138	MEPSEVII.....	96	<i>methen-sod phos-meth blue-hyos</i>	134
MEDISENSE	89	<i>mercaptopurine</i>	19	<i>methimazole</i>	77
MEDISENSE GLUCOSE KETONE.....	89	MERIBIN	138	METHITEST.....	96
MEDROL	76	<i>meropenem</i>	9	<i>methocarbamol</i>	29
MEDROL (PAK).....	76	MEROPENEM.....	9	METHOCARBAMOL	29
<i>medroxyprogesterone</i>	118	MEROPENEM-0.9% SODIUM CHLORIDE	9	<i>methotrexate sodium</i>	19
MEDTRONIC EXT INFUSION SET 23	89	<i>merzee</i>	121	<i>methotrexate sodium (pf)</i>	19
<i>mefenamic acid</i>	38	<i>mesalamine</i>	104	<i>methoxsalen</i>	60
<i>mefloquine</i>	9	<i>mesalamine with cleansing wipe</i>	104	<i>methscopolamine</i>	101
<i>megestrol</i>	19	<i>mesna</i>	14	<i>methsuximide</i>	24
MEKINIST.....	19	MESNEX.....	14	<i>methyl salicylate</i>	60
MEKTOVI	19	MESTINON	29	<i>methyldopa</i>	50
<i>meloxicam</i>	38	MESTINON TIMESPAN.....	29	<i>methyldopa-hydrochlorothiazide</i>	50
MELOXICAM	38	METADATE CD	43	<i>methyldopate</i>	50
<i>meloxicam submicronized</i>	38	<i>metaxalone</i>	29	<i>methylergonovine</i>	122
<i>melphalan hcl</i>	19	METDRAY.....	60	METHYLIN	43
<i>memantine</i>	28	<i>metformin</i>	99	<i>methylphenidate</i>	43
MEMANTINE	28	METFORMIN	99	<i>methylphenidate hcl</i>	43
MENEST.....	118	<i>methadone</i>	34	METHYLPHENIDATE HCL	43
MENOPUR	96	METHADONE IN 0.9 % SOD.CHLORID	34	<i>methylprednisolone</i>	76
MENOSTAR	118	METHADONE IN SOD CHLOR,ISO-OSM.....	34	<i>methylprednisolone acetate</i> ..	76
MENQUADFI (PF).....	112	<i>methadose</i>	34	<i>methyltestosterone</i>	96
MENVEO A-C-Y-W-135-DIP (PF).....	112	<i>methamphetamine</i>	43	<i>metoclopramide hcl</i>	104
<i>meperidine</i>	33	<i>methazolamide</i>	126	<i>metolazone</i>	50
<i>meperidine (pf)</i>	34	<i>methenamine hippurate</i>	13	METOPIRONONE	73
<i>meprobamate</i>	29	<i>methenamine mandelate</i>	13	<i>metoprolol succinate</i>	50
MEPRON	9			<i>metoprolol ta-hydrochlorothiaz</i>	50

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

<i>metoprolol tartrate</i>	50	<i>midazolam (pf)</i>	43	MINIMED SILHOUETTE 23	90
<i>metro i.v.</i>	9	<i>midazolam (pf) in 0.9 % nacl</i>	43	MINIMED SURE T 32.....	90
METROCREAM.....	63	MIDAZOLAM (PF) IN 0.9 %		MINIVELLE	118
METROGEL	63	NACL	43	MINOCIN.....	12
<i>metronidazole</i>	9, 63, 118	MIDAZOLAM IN 0.9 % SOD		<i>minocycline</i>	12
<i>metronidazole in nacl (iso-os)</i>	9	CHLORID	43	MINOCYCLINE	12
<i>metirosine</i>	50	MIDAZOLAM IN NACL,		<i>minoxidil</i>	50
<i>mexiletine</i>	47	ISO-OSMOTIC	43	MIOCHOL-E.....	124
MIACALCIN	96	MIDAZOLAM IN NACL,ISO-		<i>miostat</i>	126
<i>mibelas 24 fe</i>	121	OSMO(PF)	43	<i>mirabegron</i>	133
<i>micafungin</i>	3	<i>midodrine</i>	73	MIRAPEX ER.....	26
MICARDIS	50	MIFEPREX	118	MIRCERA.....	109
MICARDIS HCT	50	<i>mifepristone</i>	96, 118	MIRENA	116
MICONAZOLE NITRATE-		<i>migergot</i>	27	<i>mirtazapine</i>	44
ZINC OX-PET	67	<i>miglitol</i>	99	MIRVASO	63
<i>miconazole-3</i>	118	<i>miglustat</i>	96	<i>misoprostol</i>	107
MICRO BLOOD GLUCOSE		MIGRANAL	27	MITIGARE.....	113
.....	80	MIGRANOW	27	MITIGO (PF).....	34
MICROCHAMBER	82	<i>mili</i>	121	<i>mitomycin</i>	19
MICRODOT BLOOD		<i>milk of magnesia</i>	104	<i>mitoxantrone</i>	19
GLUCOSE SYSTEM. 80, 89		<i>milk of magnesia concentrated</i>		MKO (MIDAZOLAM-	
MICRODOT XTRA BLOOD		.....	104	KETAMINE-ONDAN)	44
GLUCOSE	80	<i>millipred</i>	76	M-M-R II (PF).....	112
<i>microgestin 1.5/30 (21)</i>	121	<i>millipred dp</i>	77	<i>m-natal plus</i>	138
<i>microgestin 1/20 (21)</i>	121	<i>mimvey</i>	118	<i>modafinil</i>	44
<i>microgestin 24 fe</i>	121	MIMYX.....	60	MODERNA COVID 23-	
<i>microgestin fe 1.5/30 (28)</i> ..	121	MINI PRENATAL.....	138	24(6M-11Y)PF	112
<i>microgestin fe 1/20 (28)</i>	121	MINIMED 770G INSULIN		<i>moexipril</i>	50
MICROSPACER.....	82	PUMP	89	<i>molindone</i>	44
<i>midazolam</i>	44	MINIMED MIO ADVANCE			
MIDAZOLAM.....	44	INF SET23	89		
		MINIMED QUICK SET 43			

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

MOMETACURE.....	70	MOXATAG	10	<i>mycophenolate mofetil (hcl)</i> .	19
<i>mometasone</i>	70, 131	MOXICAINE	66	<i>mycophenolate sodium</i>	19
<i>mondoxyne nl</i>	12	<i>moxifloxacin</i>	11, 123	MYDAYIS.....	44
MONJUVI.....	19	MOXIFLOXACIN (PF)-BSS	123	MYDRIACYL.....	124
MONODOX	12	MOXIFLOXACIN-SOD CHLOR,ISO(PF).....	123	MYDRIATIC4(TROP-PROP- PE-KTRLC).....	125
MONOFERRIC.....	138	MOXIFLOXACIN- SOD.ACE,SUL-WATER..	11	MYFEMBREE	118
<i>mono-linyah</i>	121	<i>moxifloxacin-sod.chloride(iso)</i>	11	<i>myferon 150 forte</i>	138
MONOVISC.....	38	MOZOBIL.....	109	MYFORTIC.....	19
<i>montelukast</i>	131	MS CONTIN	35	MYGLUCOHEALTH	80, 90
<i>morgidox</i>	12	MUGARD	75	MYGLUCOHEALTH CONTROL SOLUTION ..	90
MORGIDOX 1X 50.....	12	MULPLETA.....	54	MYLERAN	19
MORGIDOX 1X100.....	12	MULTAQ.....	47	MYLOTARG.....	19
<i>morphine</i>	35	<i>multigen</i>	138	<i>mynatal</i>	138
MORPHINE	35	<i>multigen plus</i>	138	<i>mynatal plus</i>	138
<i>morphine (pf)</i>	34	<i>multi-vitamin with fluoride</i> .	138	<i>mynatal-z</i>	138
MORPHINE (PF).....	34	<i>mupirocin</i>	66	MYOBLOC	112
<i>morphine (pf) in 0.9 % sod chl</i>	34	<i>mupirocin calcium</i>	66	MYRBETRIQ.....	133
MORPHINE (PF) IN 0.9 % SOD CHL.....	34	MVASI.....	19	MYSOLINE	24
<i>morphine concentrate</i>	34	<i>mvc-fluoride</i>	138	MYTESI	101
<i>morphine in 0.9 % sodium chlor</i>	35	<i>my choice</i>	121	MYXREDLIN	94
MORPHINE IN 0.9 % SODIUM CHLOR.....	34, 35	<i>my way</i>	121	N	
MOTEGRITY	104	MYALEPT.....	96	NABI-HB	112
MOTOFEN.....	101	MYAMBUTOL	9	<i>nabumetone</i>	38
MOTPOLY XR	24	MYCAMINE.....	3	<i>nadolol</i>	50
MOUNJARO.....	99	MYCAPSSA	19	<i>nafcillin</i>	10
MOVANTIK.....	104	MYCOBUTIN.....	9	<i>nafcillin in dextrose iso-osm</i> .	11
MOVIPREP.....	104	<i>mycophenolate mofetil</i>	19	<i>naftifine</i>	67

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

NAGLAZYME.....	96	NATESTO	96	<i>neo-polycin hc</i>	126
<i>nalbuphine</i>	38	NATROBA	71	NEORAL.....	19
NALFON.....	38	<i>natura-lax</i>	104	NEOSALUS	60
NALMEFENE.....	38	NAYZILAM.....	24	<i>neostigmine in sterile water</i> ..	29
NALOCET	35	<i>nebivolol</i>	50	<i>neostigmine methylsulfate</i>	29
<i>naloxone</i>	38	NEBUPENT	9	NEOSTIGMINE	
NALTREX.....	38	<i>nebusal</i>	131	METHYLSULFATE.....	29
<i>naltrexone</i>	38	NEBUSAL.....	131	NEO-SYNALAR.....	66
NAMENDA TITRATION PAK		<i>necon 0.5/35 (28)</i>	121	NEO-SYNALAR KIT	66
.....	28	NEEVODHA (WITH ALGAL		NERLYNX	19
NAMENDA XR	28	OIL).....	139	NESINA	99
NAMZARIC.....	28	<i>nefazodone</i>	44	NESTABS.....	139
NANRAN.....	66	<i>nelarabine</i>	19	NESTABS ABC.....	139
NAPRELAN CR	38	NENDRUX	58	NESTABS DHA	139
NAPROSYN	38	<i>neomycin</i>	9	NESTABS ONE	139
<i>naproxen</i>	38	<i>neomycin-bacitracin-poly-hc</i>		<i>neuac</i>	63
<i>naproxen sodium</i>	39	.....	126	NEUAC KIT.....	63
<i>naproxen-esomeprazole</i>	39	<i>neomycin-bacitracin-</i>		NEULASTA	109
<i>naratriptan</i>	27	<i>polymyxin</i>	123	NEULASTA ONPRO	109
NARCAN	39	<i>neomycin-polymyxin b gu</i>	72	NEUPOGEN.....	109
NARDIL.....	44	<i>neomycin-polymyxin b-</i>		NEUPRO	26
NASACORT.....	131	<i>dexameth</i>	126	NEURONTIN.....	24
NASAL ALLERGY	131	<i>neomycin-polymyxin-</i>		NEUTEK 2TEK TEST	
NASCOBAL	138	<i>gramicidin</i>	123	STRIPS	80
NATACHEW (FE BIS-		<i>neomycin-polymyxin-hc</i> 76, 126		NEVANAC	125
GLYCINATE)	138	NEONATAL COMPLETE .	139	<i>nevirapine</i>	5
NATACYN	123	NEONATAL FE	139	<i>new day</i>	121
NATAL PNV	138	NEONATAL PLUS VITAMIN		<i>newgen</i>	139
NATAZIA	121	.....	139	NEXAVAR.....	19
<i>nateglinide</i>	99	NEONATAL-DHA	139	NEXICLON XR	50
		<i>neo-polycin</i>	123		

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

NEXIUM.....	107	<i>nisoldipine</i>	50	<i>norethindrone (contraceptive)</i>	118
NEXIUM 24HR	107	<i>nitazoxanide</i>	9	<i>norethindrone acetate</i>	118
NEXIUM PACKET.....	107	<i>nitisinone</i>	73	<i>norethindrone ac-eth estradiol</i>	118, 121
NEXLETOL	56	<i>nitro-bid</i>	57	<i>norethindrone-e.estradiol-iron</i>	121
NEXLIZET.....	56	NITRO-DUR.....	57	NORGESIC	29
NEXOBRID	71	<i>nitrofurantoin</i>	13	NORGESIC FORTE.....	29
NEXPLANON	118	NITROFURANTOIN.....	13	<i>norgestimate-ethinyl estradiol</i>	121
NEXTERONE.....	47	<i>nitrofurantoin macrocrystal</i> .	13	NORITATE.....	63
NEXTSTELLIS.....	121	<i>nitrofurantoin monohyd/m-</i> <i>cryst</i>	13	NORLIQVA.....	50
NEXVIAZYME	96	<i>nitroglycerin</i>	57, 105	NORMOSOL-R.....	135
NGENLA	109	NITROLINGUAL	57	NORMOSOL-R PH 7.4.....	136
<i>niacin</i>	56	NITROMIST	57	NORPACE.....	47
NIACOR	56	NITROSTAT.....	57	NORPACE CR	47
<i>nicardipine</i>	50	<i>nitro-time</i>	57	NORPRAMIN	44
NICODERM CQ.....	74	NITYR.....	73	NORTHERA.....	73
<i>nicorette</i>	74	<i>niva thyroid</i>	100	<i>nortrel 0.5/35 (28)</i>	121
NICORETTE.....	74	NIVA-FOL.....	139	<i>nortrel 1/35 (21)</i>	121
<i>nicotine</i>	74	NIVESTYM	109	<i>nortrel 1/35 (28)</i>	121
<i>nicotine (polacrilex)</i>	74	<i>nizatidine</i>	107	<i>nortrel 7/7/7 (28)</i>	121
NICOTROL NS.....	74	NOCDURNA (MEN).....	96	<i>nortriptyline</i>	44
<i>nifedipine</i>	50	NOCDURNA (WOMEN)	96	NORVASC.....	50
<i>nikki (28)</i>	121	NOCTIVA	96	NORVIR	5
NILANDRON.....	19	<i>nora-be</i>	118	NOURIANZ	26
<i>nilutamide</i>	19	NORDITROPIN FLEXPPO	109	NOVA MAX GLUCOSE TEST.....	80
NIMBEX	29	<i>norelgestromin-ethin.estradiol</i>	119	NOVA MAX PLUS GLUC- KETON METER.....	90
<i>nimodipine</i>	50	<i>noreth-ethinyl estradiol-iron</i>	121		
NINJACOF-XG	129				
NINLARO.....	19				
NIPENT.....	19				

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

NOVACORT	105	NUCORT	70	NYVEPRIA.....	109
NOVAFERRUM	139	NUCYNTA.....	39	O	
NOVAFERRUM 50	139	NUCYNTA ER.....	39	OB COMPLETE	139
NOVAMAX PLUS GLU-KET	90	NUEDEXTA.....	28	OB COMPLETE ONE	139
NOVAREL	96	NU-IRON	139	OB COMPLETE PETITE ..	139
NOVAVAX COVID 2023- 24(PF)(EUA).....	112	NUJO.....	60	OB COMPLETE PREMIER	139
NOVOEIGHT	54	NUJU.....	60	OB COMPLETE WITH DHA	139
NOVOLIN 70-30 FLEXPEN U-100.....	94	NULEV	101	OBIZUR	54
NOVOLIN N FLEXPEN	94	NULIBRY	28	<i>obstetrix dha prenatal duo</i> ..	139
NOVOLIN R FLEXPEN	94	NULOJIX.....	19	OBSTETRIX EC	139
NOVOLOG FLEXPEN U-100 INSULIN.....	94	NUPLAZID	44	OICALIVA.....	105
NOVOLOG MIX 70-30 U-100 INSULN	94	NURTEC ODT	27	<i>ocella</i>	121
NOVOLOG MIX 70- 30FLEXPEN U-100	94	NUTRASEB.....	60	OCREVUS	110
NOVOLOG PENFILL U-100 INSULIN.....	94	NUTROPIN AQ NUSPIN..	109	OCTAGAM	112
NOVOLOG U-100 INSULIN ASPART	95	NUVARING	119	<i>octreotide acetate</i>	19
NOVOPEN ECHO.....	90	NUVESSA.....	119	OCUFLOX	123
NOVOSEVEN RT.....	54	NUVIGIL	44	ODACTRA.....	112
NOXAFIL	3	NUWIQ	54	ODEFSEY	5
NOXIFOL-D3	139	NUZYRA	12	ODOMZO.....	19
NOXIPAK	70	<i>nyamyc</i>	67	OFEV.....	131
<i>np thyroid</i>	100	<i>nylia 1/35 (28)</i>	121	<i>ofloxacin</i>	11, 76, 123
NPLATE	54	<i>nylia 7/7/7 (28)</i>	121	OGIVRI	19
NUBEQA	19	NYMALIZE	50	OGSIVEO.....	19
NUCALA	131	<i>nymyo</i>	121	OJJAARA.....	19
		NYNUTEY.....	66	<i>olanzapine</i>	44
		<i>nystatin</i>	3, 67	<i>olanzapine-fluoxetine</i>	44
		<i>nystatin-triamcinolone</i>	67	OLINVYK.....	39
		<i>nystop</i>	67	<i>olmesartan</i>	50

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

<i>olmesartan-amlodipin-hcthiiazid</i>	50	ON CALL EXPRESS METER	90	ONETOUCH VERIO MID CONTROL	90
<i>olmesartan-hydrochlorothiazide</i>	50	ON CALL EXPRESS TEST STRIP	80	ONETOUCH VERIO REFLECT METER	90
<i>olopatadine</i>	75, 125	ON CALL PLUS CONTROL	90	ONETOUCH VERIO TEST STRIPS	80
OLPRUVA	73	ON CALL PLUS METER....	90	ONEXTON	63
OLUMIANT.....	116	ON CALL PLUS TEST STRIP	80	ONFI.....	24
OLUX.....	70	ON CALL VIVID CONTROL	90	ONGENTYS.....	26
OMECLAMOX-PAK.....	107	ON CALL VIVID METER ..	90	ONGLYZA	99
<i>omega-3 acid ethyl esters</i>	56	ON CALL VIVID PAL METER	90	ON-GO COVID-19 AG AT HOME TEST	82
<i>omeprazole</i>	107	ON CALL VIVID TEST STRIP	80	ONIVYDE.....	19
<i>omeprazole magnesium</i>	107	ONCASPAR	19	ONPATTRO.....	28
<i>omeprazole-sodium bicarbonate</i>	108	<i>ondansetron</i>	105	ONTRUZANT.....	19
OMIDRIA	125	<i>ondansetron hcl</i>	105	ONUREG	19
OMNARIS	131	<i>ondansetron hcl (pf)</i>	105	ONZDEAXIADEMTAR	63
OMNIPOD 5 G6 INTRO KIT (GEN 5).....	90	ONE A DAY WOMEN'S PRENATAL DHA	139	ONZDEAXIADEMVAR.....	63
OMNIPOD 5 G6 PODS (GEN 5)	90	<i>one daily prenatal</i>	139	ONZDEAXIATAR	63
OMNIPOD CLASSIC PODS (GEN 3).....	90	ONE-A-DAY PRENATAL-1	139	ONZDEAXIAVAR	63
OMNIPOD DASH INTRO KIT (GEN 4)	90	<i>onelax magnesium citrate</i> ...	105	ONZDEAXIAZAR.....	63
OMNIPOD DASH PODS (GEN 4).....	90	ONETOUCH ULTRA CONTROL	90	ONZDEOXIA.....	63
OMNIPOD GO PODS 10 UNITS/DAY	90	ONETOUCH ULTRA TEST 80	80	ONZETRA XSAIL	27
OMNITROPE.....	109	ONETOUCH ULTRA2 METER	90	<i>opcicon one-step</i>	121
OMVOH.....	105	ONETOUCH VERIO FLEX METER	90	OPDIVO	19
OMVOH PEN	105			OPDUALAG	19
ON CALL EXPRESS CONTROL	90			OPFOLDA.....	96
				OPILL.....	118
				<i>opium tincture</i>	101
				OPSUMIT.....	131

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

OPTICHAMBER DIAMOND VHC	82	ORIAHNN.....	119	<i>oxacillin in dextrose(iso-osm)</i>	11
<i>option-2</i>	121	ORLISSA	96	<i>oxaliplatin</i>	19
OPTIUM EZ.....	80	ORKAMBI.....	131	<i>oxaprozin</i>	39
OPTIUM TEST	80	ORLADEYO	131	OXAPROZIN	39
OPTUMRX	80, 90	ORLISTAT	71	<i>oxazepam</i>	44
OPVEE	39	<i>ormalvi</i>	28	OXBRYTA	73
OPZELURA	60	<i>orphenadrine citrate</i>	29	<i>oxcarbazepine</i>	24
ORACEA	12	<i>orphenadrine-asa-caffeine</i> ...	29	OXERVATE.....	125
ORACIT	134	<i>orphengesic forte</i>	29	OXIAICE.....	63
<i>oral saline laxative</i>	105	ORSERDU	19	OXIANUJO.....	60
ORALAIR.....	112	ORTHO DF	139	OXIANUJO (WITH HYALURONATE)	60
<i>oralone</i>	75	ORTHOVISC	39	OXIATAR.....	63
ORAMAGICRX	75	<i>oscimin</i>	101	OXIAVAR.....	63
ORAPEUTIC	75	<i>oscimin sl</i>	101	OXIAVARRY	63
ORAPRED ODT	77	<i>oseltamivir</i>	5	OXIAVARY	63
ORAVIG.....	3	OSENI	99	OXIAZAR	63
ORBACTIV	9	OSMOLEX ER.....	26	<i>oxiconazole</i>	67
ORENCIA.....	116	OSPHENA.....	119	OXISTAT.....	67
ORENCIA (WITH MALTOSE).....	116	OTEZLA	116	OXLUMO.....	134
ORENCIA CLICKJECT	116	OTEZLA STARTER	116	OXTELLAR XR	24
ORENITRAM.....	50	OTOVEL	76	<i>oxybutynin chloride</i>	133
ORENITRAM MONTH 1 TITRATION KT.....	50	OTREXUP (PF).....	116	OXYBUTYNIN CHLORIDE	133
ORENITRAM MONTH 2 TITRATION KT.....	50	OVACE.....	58	<i>oxycodone</i>	35
ORENITRAM MONTH 3 TITRATION KT.....	51	OVACE PLUS	58	OXYCODONE.....	35
ORFADIN	73	OVACE PLUS SHAMPOO .	58	<i>oxycodone-acetaminophen</i> ...	35
ORGOVYX.....	19	OVACE PLUS WASH.....	58	OXYCONTIN	35
		OVIDE.....	71	<i>oxymorphone</i>	36
		OVIDREL	96		
		<i>oxacillin</i>	11		

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

<i>oxytocin</i>	122	PALONOSETRON.....	105	PAXLOVID.....	5
OXYTROL.....	133	PALYNZIQ.....	97	<i>pazopanib</i>	19
OXYTROL FOR WOMEN	133	PAMELOR	44	PEDIARIX (PF)	112
OZEMPIC	99	<i>pamidronate</i>	97	PEDMARK.....	73
OZOBAX	29	PANCREAZE.....	105	PEDVAX HIB (PF)	112
OZOBAX DS	30	PANDEL.....	70	<i>peg 3350-electrolytes</i>	105
OZURDEX.....	127	PANRETIN.....	60	<i>peg3350-sod sul-nacl-kcl-asb-c</i>	105
P		<i>pantoprazole</i>	108	PEGASYS	109
<i>pacerone</i>	47	PANZYGA	112	<i>peg-electrolyte soln</i>	105
<i>paclitaxel</i>	19	<i>papaverine</i>	51	PEMAZYRE.....	19
PACLITAXEL PROTEIN- BOUND.....	19	PARAGARD T 380A	116	PEMETREXED.....	19
PACNEX	63	<i>paraplatin</i>	19	<i>pemetrexed disodium</i>	19
PADCEV	19	<i>paricalcitol</i>	97	PEMETREXED DISODIUM	19
PALFORZIA (LEVEL 1) ..	112	PARICALCITOL.....	97	PEMFEXY	19
PALFORZIA (LEVEL 2) ..	112	PARLODEL	26	PEMRYDI RTU.....	20
PALFORZIA (LEVEL 3) ..	112	PARNATE	44	PEN NEEDLE, DIABETIC .	90
PALFORZIA (LEVEL 4) ..	112	<i>paroex oral rinse</i>	75	PENBRAYA (PF)	112
PALFORZIA (LEVEL 5) ..	112	<i>paromomycin</i>	10	<i>penciclovir</i>	68
PALFORZIA (LEVEL 6) ..	112	<i>paroxetine hcl</i>	44	<i>penicillamine</i>	116
PALFORZIA (LEVEL 7) ..	112	<i>paroxetine</i> <i>mesylate(menop.sym)</i>	44	PENICILLIN G POT IN DEXTROSE	11
PALFORZIA (LEVEL 8) ..	112	PARSABIV.....	97	<i>penicillin g potassium</i>	11
PALFORZIA (LEVEL 9) ..	112	PASER.....	10	<i>penicillin g sodium</i>	11
PALFORZIA (LEVEL 10) .	112	PATADAY ONCE DAILY RELIEF	125	<i>penicillin v potassium</i>	11
PALFORZIA INITIAL DOSE	112	PATADAY TWICE DAILY RELIEF	125	PENNSAID	39
PALFORZIA LEVEL 11 MAINTENANCE.....	112	PATANASE	75	PENTACEL (PF).....	112
<i>paliperidone</i>	44	PAXIL.....	44	PENTAM.....	10
<i>palonosetron</i>	105	PAXIL CR	44	<i>pentamidine</i>	10

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

PENTASA	105	PHENERGAN.....	128	PHYSICIANS EZ USE B-12	139
<i>pentazocine-naloxone</i>	39	<i>phenobarb-hyoscy-atropine- scop</i>	101	PHYSIOLYTE.....	72
<i>pentoxifylline</i>	54	<i>phenobarbital</i>	24	PHYSIOSOL IRRIGATION	72
PEPCID	108	<i>phenohydro</i>	101	<i>phytonadione (vitamin k1)</i>	54
PEPTO-BISMOL	101	<i>phenoxybenzamine</i>	51	PHYTONADIONE (VITAMIN K1).....	54
PEPTO-BISMOL MAX ST	101	<i>phentermine</i>	71	PIFELTRO.....	5
PERCOCET	36	<i>phenylephrine hcl</i>	128	<i>pilocarpine hcl</i>	73, 75, 124
PERFOROMIST	131	PHENYLEPH- TROPICAMIDE IN WATER	124	PILOT COVID-19 AT-HOME TEST.....	82
PERIDEX	75	PHENYTEK.....	24	<i>pimecrolimus</i>	60
<i>perindopril erbumine</i>	51	<i>phenytoin</i>	24	<i>pimozide</i>	44
<i>periogard</i>	75	<i>phenytoin sodium</i>	24	<i>pimtree (28)</i>	121
PERJETA	20	<i>phenytoin sodium extended</i> ..	24	<i>pindolol</i>	51
<i>permethrin</i>	71	PHEODOYO	60	<i>pioglitazone</i>	99
<i>perphenazine</i>	44	PHEOXIA	67	<i>pioglitazone-glimepiride</i>	99
<i>perphenazine-amitriptyline</i> ..	44	PHESGO	20	<i>pioglitazone-metformin</i>	99
PERSERIS.....	44	PHEXXI	119	PIP BLOOD GLUCOSE MONITOR	90
PERTZYE.....	105	PHEYO.....	68	PIP BLOOD GLUCOSE TEST STRIP	80
PFIZER COVID 2023-24(5Y- 11Y)PF	112	<i>philith</i>	121	PIP GLUCOSE CONTROL SOLN L1-L2	90
PFIZER COVID 2023- 24(6MO-4Y)PF	112	PHOS-FLUR	75	<i>piperacillin-tazobactam</i>	11
<i>pfizerpen-g</i>	11	<i>phospha 250 neutral</i>	135	PIQRAY.....	20
PHARMACIST CHOICE	80	<i>phosphate laxative</i>	105	<i>pirfenidone</i>	131
PHARMACIST CHOICE GLUCOSE SYS	90	PHOSPHOLINE IODIDE..	123	PIRFENIDONE.....	131
PHEBURANE.....	73	<i>phosphorous</i>	135	<i>piroxicam</i>	39
PHEDRAX	67	PHOTOFRIN.....	20	<i>pitavastatin calcium</i>	56
<i>phenazopyridine</i>	135	PHOTREXA CROSS- LINKING KIT.....	125	PIXEL COVID19 HOME COLLECT KIT.....	83
<i>phendimetrazine tartrate</i>	71	PHOTREXA VISCOUS.....	125		
<i>phenelzine</i>	44				

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

PLAN B ONE-STEP.....	121	<i>polymyxin b sulfate</i>	10	PRAMOSONE	58
PLAQUENIL	10	<i>polymyxin b sulf-trimethoprim</i>		<i>prasterone (dhea)</i>	97
PLASMA-LYTE A.....	136	.....	123	<i>prasugrel</i>	54
PLAVIX.....	54	POLY-TUSSIN AC.....	129	<i>pravastatin</i>	56
PLEGRIDY	110	POLY-VI-SOL	139	PRAXBIND.....	54
PLENITY (WELCOME KIT)		POMALYST	20	<i>praziquantel</i>	10
.....	71	POMBILITI.....	97	<i>prazosin</i>	51
PLENVU	105	PONVORY.....	110	PRECISION PCX PLUS TEST	
<i>plerixafor</i>	109	PONVORY 14-DAY		.....	80
PLEXION.....	63	STARTER PACK	110	PRECISION PCX TEST	80
PLEXION CLEANSING		<i>portia 28</i>	121	PRECISION POINT OF	
CLOTHS	63	PORTRAZZA.....	20	CARE TEST	80
PLEXION NS.....	58	<i>posaconazole</i>	3	PRECISION Q-I-D TEST ...	80
PLIAGLIS	66	<i>potassium chloride</i>	136	PRECISION XTRA KETONE-	
PNEUMOVAX-23	112	<i>potassium citrate</i>	134	GLUCOSE.....	91
PNV TABS 20-1	139	<i>potassium citrate-citric acid</i>		PRECISION XTRA	
<i>pnv-dha</i>	139	.....	134	MONITOR	91
<i>pnv-omega</i>	139	<i>potassium iodide</i>	77	PRECISION XTRA TEST ...	80
<i>pnv-select</i>	139	POTASSIUM IODIDE.....	77	PRECOSE.....	99
POCKET CHAMBER.....	83	POTELIGEO	20	PRED FORTE	127
PODOCON	58	<i>powderlax</i>	105	PRED MILD.....	127
<i>podofilox</i>	60	PR BENZOYL PEROXIDE.....	63	<i>prednicarbate</i>	70
POGO AUTOMATIC BLOOD		<i>pr natal 400</i>	139	PREDNISOLN SP-	
GLUC SYS.....	91	<i>pr natal 400 ec</i>	139	MOXIFLOX-BROMFEN	
POKONZA.....	135	<i>pr natal 430</i>	139	.....	125
POLIVY	20	<i>pr natal 430 ec</i>	139	<i>prednisolone</i>	77
<i>polocaine-mpf</i>	66	PRADAXA.....	54	<i>prednisolone acetate</i>	127
<i>polycin</i>	123	PRALATREXATE.....	20	PRECEDNISOLONE ACETATE	
<i>polyethylene glycol 3350</i>	105	PRALUENT PEN.....	56	(PF).....	127
<i>poly-iron 150 forte</i>	139	<i>pramipexole</i>	26	PRECEDNISOLONE ACETATE-	
				BROMFENAC	125

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

PREDNISOLONE ACETATE-NEPAFENAC.....	125	PREMPHASE	118	<i>prenatal vit no.179-iron-folic</i>	140
PREDNISOLONE SOD PH-MOXIFLOX.....	126	PREMPRO	118	.....	140
<i>prednisolone sodium phosphate</i>	77, 127	<i>prenal chew</i>	139	<i>prenatal vitamin</i>	140
PREDNISOLONE-MOXIFLO-NEPAFENAC	125	<i>prenal pearl</i>	139	PRENATAL VITAMIN	140
PREDNISOLONE-MOXIFLOXACIN HCL	126	<i>prenal true</i>	139	<i>prenatal vitamin plus low iron</i>	140
PREDNISOLONE-MOXIFLO-NEPAFENAC	125	PRENATA	139	.....	140
PREDNISOLONE-MOXIFLOXACIN HCL	126	<i>prenatabs fa</i>	139	<i>prenatal vitamin with minerals</i>	140
PREDNISOLONE-MOXIFLOXACIN HCL	126	<i>prenatabs rx</i>	139	.....	140
PREDNISOLONE-MOXIFLOXACIN HCL	126	<i>prenatal</i>	140	PRENATAL WITH DHA-FOLIC ACID.....	140
PREDNISOLONE-MOXIFLOXACIN HCL	126	PRENATAL	140	<i>prenatal-u</i>	140
PREDNISOLONE-MOXIFLOXACIN HCL	126	<i>prenatal + dha</i>	139	PRENATE AM	140
PREDNISOLONE-MOXIFLOXACIN HCL	126	PRENATAL + DHA	140	PRENATE CHEWABLE....	140
PREDNISOLONE-MOXIFLOXACIN HCL	126	<i>prenatal 19</i>	140	PRENATE DHA (FERR ASP GLYCIN).....	140
PREDNISOLONE-MOXIFLOXACIN HCL	126	<i>prenatal complete</i>	140	PRENATE ELITE (IRON ASP GLYC)	140
PREDNISOLONE-MOXIFLOXACIN HCL	126	PRENATAL ESSENTIALS	140	PRENATE ENHANCE	140
PREDNISOLONE-MOXIFLOXACIN HCL	126	PRENATAL FORMULA ...	140	PRENATE	
PREDNISOLONE-MOXIFLOXACIN HCL	126	PRENATAL FORMULA-DHA	140	ESSENTIAL(IRON-ASP-GL)	140
PREDNISOLONE-MOXIFLOXACIN HCL	126	PRENATAL MULTI.....	140	PRENATE MINI (FERR ASP GLYCIN).....	140
PREDNISOLONE-MOXIFLOXACIN HCL	126	<i>prenatal multi-dha (algal oil)</i>	140	PRENATE PIXIE	140
PREDNISOLONE-MOXIFLOXACIN HCL	126	PRENATAL MULTI-DHA(WITH VIT K).....	140	PRENATE RESTORE.....	140
PREDNISOLONE-MOXIFLOXACIN HCL	126	<i>prenatal multivitamins</i>	140	PRENATE STAR.....	141
PREDNISOLONE-MOXIFLOXACIN HCL	126	<i>prenatal one daily</i>	140	PREPIDIL.....	119
PREDNISOLONE-MOXIFLOXACIN HCL	126	<i>prenatal plus</i>	140	PRESERA.....	60
PREDNISOLONE-MOXIFLOXACIN HCL	126	<i>prenatal plus (calcium carb)</i>	140	PRESTALIA	51
PREDNISOLONE-MOXIFLOXACIN HCL	126	.....	140	PRESTO PRO BLOOD GLUCOSE METER	91
PREDNISOLONE-MOXIFLOXACIN HCL	126	PRENATAL PLUS DHA....	140	PRETOMANID.....	10
PREDNISOLONE-MOXIFLOXACIN HCL	126	PRENATAL PLUS VITAMIN-MINERAL.....	140	PREVACID.....	108

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

PREVACID 24HR.....	108	PRIMEAIRE	83	<i>procto-med hc</i>	105
PREVACID SOLUTAB	108	<i>primidone</i>	25	<i>proctosol hc</i>	105
<i>prevalite</i>	56	PRIMIDONE.....	25	<i>proctozone-hc</i>	105
PREVDUO	30	PRIMLEV	36	PROCYSBI.....	134
PREVIDENT.....	75	PRIMSOL.....	13	PRODIGY AUTOCODE METER.....	91
PREVIDENT 5000 BOOSTER PLUS	75	PRIORIX (PF).....	112	PRODIGY AUTOCODE MONITOR SYST	91
PREVIDENT 5000 ENAMEL PROTECT	75	PRISTIQ.....	44	PRODIGY CONTROL SOLUTION, LOW	91
PREVIDENT 5000 ORTHO DEFENSE	75	PRIVIGEN	112	PRODIGY CONTROL SOLUTION,HIGH	91
PREVIDENT 5000 PLUS.....	75	PRO FE.....	141	PRODIGY NO CODING	80
PREVIDENT 5000 SENSITIVE.....	75	PRO VOICE V8 GLUCOSE MONITOR	91	PRODIGY POCKET METER	91
PREVIDENT KIDS	75	PRO VOICE V8-V9 TEST STRIP	80	PRODIGY VOICE GLUCOSE METER.....	91
PREVNAR 20 (PF).....	112	PRO VOICE V9 GLUCOSE MONITOR	91	PROFERRIN ES	141
PREVYMIS.....	5	PROAIR DIGIHALER.....	131	PROFILNINE.....	54
PREZCOBIX.....	5	PROAIR RESPICLICK	132	PROFINAC	39
PREZISTA	5	<i>probenecid</i>	113	<i>progesterone</i>	118
PRIFTIN.....	10	<i>probenecid-colchicine</i>	113	<i>progesterone micronized</i>	118
PRILO PATCH	66	<i>procainamide</i>	47	PROGLYCEM.....	83
<i>priloheal plus 30</i>	66	PROCARDIA XL.....	51	PROGRAF.....	20
PRILOSEC	108	<i>procentra</i>	44	PROLASTIN-C	73
PRILOSEC OTC.....	108	PROCHAMBER	83	<i>prolate</i>	36
PRILOVIX	66	<i>prochlorperazine</i>	105	PROLATE.....	36
PRILOVIX LITE PLUS.....	66	<i>prochlorperazine edisylate</i> .	105	PROLENSA	125
PRILOVIX ULTRALITE PLUS	66	<i>prochlorperazine maleate</i> ...	105	PROLEUKIN	109
PRIMACARE	141	PROCORT	105	PROLIA.....	114
<i>primaquine</i>	10	PROCRIT	109	PROMACTA	54
PRIMAXIN IV	10	PROCTOCORT	70, 105		
		PROCTOFOAM HC	105		

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

PROMELLA	101	<i>prumyx</i>	60	QUDEXY XR.....	25
<i>promethazine</i>	128	PULMICORT	132	QUESTRAN.....	56
<i>promethazine vc</i>	129	PULMICORT FLEXHALER		QUESTRAN LIGHT.....	56
<i>promethazine-codeine</i>	129	.....	132	<i>quetiapine</i>	44, 45
<i>promethazine-dm</i>	129	<i>pulmosal</i>	132	QUETIAPINE	45
<i>promethegan</i>	128	PULMOZYME.....	132	QUICKVUE AT-HOME	
PROMETRIUM	118	<i>purelax</i>	105	COVID-19 TEST.....	83
PROMISEB.....	60	PURIXAN	20	QUICKVUE SARS ANTIGEN	
PRONAL.....	60	PYLERA	108	.....	83
<i>propafenone</i>	47	<i>pyrazinamide</i>	10	QUIDROXZAR.....	113
<i>proparacaine</i>	125	PYRIDIDIUM	135	QUIHOXAXIA	113
PROPECIA	73	<i>pyridostigmine bromide</i>	30	QUIHOXVAR	113
<i>propranolol</i>	51	PYRIDOSTIGMINE		QUILLICHEW ER.....	45
<i>propranolol-</i>		BROMIDE.....	30	QUILLIVANT XR.....	45
<i>hydrochlorothiazid</i>	51	<i>pyrimethamine</i>	10	<i>quinapril</i>	51
<i>propylthiouracil</i>	77	PYRUKYND.....	73	<i>quinapril-hydrochlorothiazide</i>	
PROQUAD (PF)	112	Q		.....	51
PROSCAR.....	134	QBRELIS	51	<i>quinidine gluconate</i>	47
PROSTIN VR PEDIATRIC	134	QBREXZA	60	<i>quinidine sulfate</i>	47
<i>protamine</i>	54	Q-CARE RX Q4.....	75	<i>quinine sulfate</i>	10
PROTHELIAL	75	QDOLO	39	QUINIXIL	70
PROTONIX.....	108	QELBREE	44	QUINJA.....	66
<i>protriptyline</i>	44	QINLOCK	20	QUINTET AC	80
PROVAYBLUE.....	72	QNASL.....	132	QUINTET BLOOD	
PROVERA	118	QSYMIA	71	GLUCOSE METER	91
PROVIDA OB.....	141	QTERN.....	99	<i>quit 2</i>	74
PROVIGIL	44	QUADRACEL (PF)	112	<i>quit 4</i>	74
PROZAC	44	QUALAQUIN.....	10	QULIPTA	27
<i>pruclair</i>	60	QUARTETTE.....	121	QUTENZA	60
<i>prudoxin</i>	60	QUAZEPAM	44	QUVIVIQ.....	45

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

QVAR REDIHALER	132	REBLOZYL	109	RELION NOVOLIN N	95
R		REBYOTA	105	RELION NOVOLIN R.....	95
RABAVERT (PF)	112	RECARBRIO	10	RELION PRIME METER...	91
<i>rabeprazole</i>	108	RECLAST	73	RELION PRIME TEST	
RABEPRAZOLE	108	<i>reclipsen (28)</i>	122	STRIPS	80
RADICAVA.....	28	RECOMBINATE.....	54	RELION ULTIMA	80
RADICAVA ORS STARTER		RECOMBIVAX HB (PF)...	113	RELISTOR	105
KIT SUSP.....	28	RECORLEV	97	RELPAK	27
RADIOGARDASE	73	RECTIV.....	105	RELTONE	105
RAGWITEK.....	113	<i>refissa</i>	63	RELYVRIO	28
<i>raloxifene</i>	114	REFUAH PLUS	80	REMERON.....	45
<i>ramelteon</i>	45	REFUAH PLUS GLUCOSE		REMERON SOLTAB.....	45
<i>ramipril</i>	51	CONTROL	91	REMICADE	105
<i>ranolazine</i>	56	REFUAH PLUS GLUCOSE		REMODULIN.....	51
RAPAFLO	134	MONITOR	91	RENACIDIN	134
RAPAMUNE.....	20	REGLAN.....	105	<i>rena-vite</i>	141
RAPID SARS-COV-2 AG		<i>regonol</i>	30	RENFLEXIS.....	105
HOME TEST.....	83	REGRANEX	60	<i>reno caps</i>	141
RAPIVAB (PF).....	5	RELAFEN DS.....	39	RENOVA.....	63
<i>rasagiline</i>	26	RELAGARD	119	REVELA	102
RASUVO (PF)	116	RELENZA DISKHALER	5	<i>repaglinide</i>	99
RAVICTI	73	RELEUKO	109	REPATHA PUSHTRONEX .	56
RAYALDEE	97	RELEXXII.....	45	REPATHA SURECLICK	56
RAYASAL.....	59	RELION ALL-IN-ONE		REPATHA SYRINGE	56
RAYOS.....	77	METER	91	REPLESTA NX.....	141
REALHEAL-I.....	66	RELION CONFIRM	91	RESPA-AR	129
REBIF (WITH ALBUMIN)110		RELION CONFIRM-MICRO		RESTASIS	125
REBIF REBIDOSE.....	110	.....	80	RESTASIS MULTIDOSE ..	125
REBIF TITRATION PACK 110		RELION MICRO GLUCOSE		RESTORIL	45
REBINYN.....	54	MONITOR	91	RETACRIT	109
		RELION NOVOLIN 70/30 ..	95		

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

RETEVMO	20	RIGHTEST CONTROL SOLUTION HIGH	91	<i>rivelsa</i>	122
RETIN-A	63	RIGHTEST GM550 SYSTEM	91	RIVFLOZA	134
RETIN-A MICRO	63	RIGHTEST GS550 TEST STRIPS	81	RIXUBIS	54
RETIN-A MICRO PUMP	63	RIGHTEST GT333 GLUCOSE METER	91	<i>rizatriptan</i>	27
RETISERT	127	RIGHTEST GT333 TEST STRIP	81	R-NATAL OB	141
RETROVIR	5	RILUTEK	73	ROAOXIA	39
REVATIO	132	<i>riluzole</i>	73	ROBAXIN	30
REVCIVI	73	<i>rimantadine</i>	5	ROBINUL	101
REVEAL BLOOD GLUCOSE METER	91	<i>ringer's</i>	72	ROBINUL FORTE	101
REVEAL TEST STRIP	80	RINVOQ	116	ROCALTROL	97
REVLIMID	20	RIOMET	99	ROCKLATAN	126
<i>revonto</i>	30	RIOMET ER	99	ROCTAVIAN	54
REXULTI	45	<i>risedronate</i>	73, 114	<i>roflumilast</i>	132
REYATAZ	5	RISPERDAL	45	ROLVEDON	109
REYVOW	27	RISPERDAL CONSTA	45	<i>romidepsin</i>	20
REZDIFFRA	73	<i>risperidone</i>	45	ROMIDEPSIN	20
REZLIDHIA	20	<i>risperidone microspheres</i>	45	<i>ropinirole</i>	26
REZUROCK	20	RITALIN	45	<i>ropivacaine (pf)</i>	66
REZVOGLAR KWIKPEN ..	95	RITALIN LA	45	<i>rosadan</i>	63
REZZAYO	3	RITEFLO AEROCHAMBER	83	ROSADAN	63
RHOFADE	63	<i>ritonavir</i>	5	ROSULA	63
RHOPRESSA	126	RITUXAN	20	<i>rosula cleansing cloths</i>	64
RIABNI	20	RITUXAN HYCELA	20	<i>rosuvastatin</i>	56
RIASTAP	54	<i>rivastigmine</i>	28	ROSZET	56
<i>ribavirin</i>	5, 108	<i>rivastigmine tartrate</i>	28	ROTARIX	113
RIDAURA	116			ROTATEQ VACCINE	113
<i>rifabutin</i>	10			ROWASA	105
RIFADIN	10			<i>roweepra</i>	25
<i>rifampin</i>	10			ROXICODONE	36

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

ROXIFOL-D	141	<i>salicylic acid-ceramides no.1</i>	59	<i>scopolamine base</i>	106
ROXYBOND	36	<i>salimez</i>	59	SCYTERA	58
ROZEREM.....	45	SALIMEZ FORTE	59	SEBUDERM	60
ROZLYTREK	20	<i>salsalate</i>	39	SECUADO	45
RUBRACA	20	<i>salvax</i>	59	SEGLENTIS.....	36
RUCONEST.....	132	SALVAX DUO PLUS	59	SEGLUROMET	99
<i>rufinamide</i>	25	<i>salycim</i>	59	SELECT-OB.....	141
RUKOBIA.....	5	<i>salynta</i>	59	SELECT-OB (FOLIC ACID)	141
RUXIENCE.....	20	SAMSCA.....	97	SELECT-OB + DHA.....	141
RYALTRIS	132	SANCUSO	106	<i>selegiline hcl</i>	26
RYANODEX.....	30	SANDIMMUNE	20	<i>selenium sulfide</i>	58
RYBELSUS.....	99	SANDOSTATIN.....	20	SELZENTRY	5
RYBREVANT	20	SANDOSTATIN LAR DEPOT	20	SEMGLEE(INSULIN GLARGINE-YFGN).....	95
RYCLORA	128	SANTYL	71	SEMGLEE(INSULIN GLARG-YFGN)PEN	95
RYDAPT	20	SAPHNELO	20	<i>se-natal 19 chewable</i>	141
RYKINDO.....	45	SAPHRIS.....	45	<i>se-natal-19</i>	141
RYLAZE	20	<i>sapropterin</i>	97	SENSIPAR.....	97
RYNODERM	60	SARCLISA.....	20	SEREVENT DISKUS	132
RYSTIGGO.....	30	SAROXIA	64	SERNIVO.....	70
RYTARY	26	SAVAYSA	54	SEROQUEL	45
RYVENT.....	128	SAVELLA	116	SEROQUEL XR.....	45
S		<i>saxagliptin</i>	99	SEROSTIM	109
SABRIL.....	25	<i>saxagliptin-metformin</i>	99	<i>sertraline</i>	45
SAFYRAL.....	122	SAXENDA.....	72	SERTRALINE.....	45
<i>sajazir</i>	132	<i>scalacort</i>	70	<i>setlakin</i>	122
SALAGEN (PILOCARPINE)	73, 75	SCALACORT DK.....	70	<i>sevelamer carbonate</i>	102
SALICATE	59	SCEMBLIX.....	20	<i>sevelamer hcl</i>	102
<i>salicylic acid</i>	59	SCENESSE	60		

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

SEVENFACT	54	<i>simvastatin</i>	56	<i>sodium benzoate-sod</i>	
SEYSARA	12	SINCALIDE	106	<i>phenylacet</i>	73
<i>sf 75</i>		SINEMET	26	<i>sodium chlor 0.9% bacteriostat</i>	
<i>sf 5000 plus</i>	75	SINGULAIR	132	.....	73
SFROWASA	106	SINUVA	132	<i>sodium chloride</i>	73, 132, 136
<i>sharobel</i>	118	<i>sirolimus</i>	20	<i>sodium chloride 0.45 %</i>	136
SHINGRIX (PF).....	113	SIRTURO	10	<i>sodium chloride 0.9 %</i>	73
SIGNIFOR	20	SITAGLIPTIN	99	<i>sodium chloride 3 %</i>	
SIGNIFOR LAR	20	SIVEXTRO	10	<i>hypertonic</i>	136
SIKLOS.....	20	SKYADERM-LP	66	<i>sodium chloride 5 %</i>	
<i>sildenafil</i>	134	SKYCLARYS	28	<i>hypertonic</i>	136
<i>sildenafil (pulm.hypertension)</i>		SKYLA.....	116	<i>sodium citrate-citric acid</i> ...	134
.....	132	SKYRIZI	58, 106	SODIUM EDECIN	51
SILENOR.....	45	SKYSONA	28	<i>sodium ferric gluconat-sucrose</i>	
SILIQ.....	58	SKYTROFA	109	.....	73
<i>silodosin</i>	134	SLOW RELEASE IRON ...	141	<i>sodium fluoride 5000 plus</i>	75
SILVADENE	58	SLYND	122	<i>sodium fluoride-pot nitrate</i> ...75	
<i>silver nitrate</i>	60	SMART SENSE		SODIUM OXYBATE.....	45
<i>silver nitrate applicators</i>	60	MONITORING SYSTEM	92	<i>sodium phenylbutyrate</i>	73
<i>silver sulfadiazine</i>	58	SMART SENSE TEST		<i>sodium polystyrene sulfonate</i>	
SILVRSTAT	66	STRIPS	81	.....	102
SIMBRINZA.....	126	SMARTEST CONTROL.....	92	<i>sodium,potassium,mag sulfates</i>	
SIMILAC PRENATAL	141	SMARTEST EJECT.....	92	.....	106
SIMLANDI(CF)		SMARTEST PERSONA		SOFIA SARS ANTIGEN FIA	
AUTOINJECTOR.....	116	STARTER.....	92	.....	83
<i>simliya (28)</i>	122	SMARTEST PRONTO		SOFIA2 FLU-SARS	
<i>simpesse</i>	122	STARTER.....	92	ANTIGEN FIA	83
SIMPONI	116	SMARTEST PROTEGE	92	SOFOSBUVIR-	
SIMPONI ARIA	116	SMARTEST TEST	81	VELPATASVIR.....	5
SIMULECT.....	20	<i>smoothlax</i>	106	SOGROYA	109
		SOAANZ.....	51	SOHONOS	73
				<i>solifenacin</i>	133
				SOLIQUA 100/33.....	95

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

SOLIRIS.....	73	SPIKEVAX 2023-2024(12Y UP)(PF)	113	STIOLTO RESPIMAT.....	132
SOLODYN.....	12	<i>spinosad</i>	71	STIVARGA	20
SOLOSEC	10	SPINRAZA (PF).....	28	<i>stop smoking aid</i>	74
SOLOX GEL.....	60	SPIRIVA RESPIMAT	132	STRATTERA	45
SOLTAMOX	20	SPIRIVA WITH HANDIHALER.....	132	STRENSIQ	97
SOLUS V2 AUDIBLE METER	92	<i>spironolactone</i>	51	STREPTOMYCIN	10
SOLUS V2 CONTROL SOLUTION,HIGH.....	92	<i>spironolacton-hydrochlorothiaz</i>	51	<i>stress formula with iron</i>	141
SOLUS V2 TEST STRIPS...	81	SPORANOX	3	<i>stress formula with iron(sulf)</i>	141
SOMA	30	SPRAVATO	45	STRIBILD	5
SOMATULINE DEPOT	20	<i>sprintec (28)</i>	122	STRIVERDI RESPIMAT ...	132
SOMAVERT.....	97	SPRITAM.....	25	STROMECTOL	10
<i>sonafine</i>	60	SPRIX.....	39	<i>strong iodine</i>	66, 136
SOOLANTRA.....	64	SPRYCEL.....	20	STUART ONE.....	141
<i>sorafenib</i>	20	<i>sps (with sorbitol)</i>	102	SUBLOCADE	36
SORBITOL	72	<i>sronyx</i>	122	SUBOXONE	39
SORBITOL-MANNITOL....	72	<i>ssd</i>	58	<i>subvenite</i>	25
SORILUX	58	SSKI	77	<i>subvenite starter (blue) kit</i>	25
<i>sotalol</i>	47	<i>sss 10-5</i>	64	<i>subvenite starter (green) kit</i> ..	25
SOTALOL	47	<i>st joseph aspirin</i>	39	<i>subvenite starter (orange) kit</i> 25	
<i>sotalol af</i>	47	STAMARIL (PF).....	113	SUCRAID.....	106
SOTYKTU	58	<i>stavudine</i>	5	<i>sucralfate</i>	108
SOTYLIZE.....	47	STEGLATRO	99	SUFLAVE.....	106
SOVALDI.....	5	STEGLUJAN	99	SULAR	51
SOVUNA	10	STELARA	58	SULCONAZOLE	68
SPACE CHAMBER.....	83	STENDRA.....	134	<i>sulfacetamide sodium</i> ...	58, 127
SPEEDYSWAB COVID-19 HOME TEST.....	83	STIMUFEND	109	<i>sulfacetamide sodium (acne)</i>	66
SPEVIGO	58			<i>sulfacetamide sodium-sulfur</i> .	64
				SULFACETAMIDE SODIUM- SULFUR.....	64

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

<i>sulfacetamide sod-sulfur-urea</i>	SURE-TEST EASYPLUS	SYNALAR TS.....	70
.....	MINI METER	SYNAREL.....	97
64	SUSTOL.....	SYNDROS	106
<i>sulfacetamide-prednisolone</i>	127	SYNJARDY	99
<i>sulfacleanse 8-4</i>	64	SYNJARDY XR.....	99
<i>sulfadiazine</i>	11	SYNTHROID	100
<i>sulfamethoxazole-trimethoprim</i>	SUSVIMO (INITIAL FILL)	SYPRINE	74
.....	.....	T	
SULFAMYLON.....	SUTAB	T	
66	SUTENT.....	FLEX	92
<i>sulfasalazine</i>	21	SLIM X2	92
106	<i>syeda</i>	SLIM X2 BASAL-IQ	
<i>sulfatrim</i>	122	INSULIN PMP.....	92
11	SYLVANT	SLIM X2 CONTROL-IQ....	92
<i>sulindac</i>	21	TABLOID.....	21
39	SYMAX DUOTAB	TABRECTA.....	21
SUMADAN.....	101	TACLONEX.....	58
SUMADAN XLT	<i>symax fastabs</i>	<i>tacrolimus</i>	21, 60
64	<i>symax-sl</i>	<i>tadalafil</i>	134
<i>sumatriptan</i>	101	<i>tadalafil (pulm. hypertension)</i>	
<i>sumatriptan succinate</i>	<i>symax-sr</i>.....	.....	132
27	SYMBICORT.....	TADLIQ.....	132
<i>sumatriptan-naproxen</i>	132	TAFINLAR.....	21
27	SYMBYAX	<i>tafluprost (pf)</i>	126
SUMAXIN	45	TAGRISSO	21
SUMAXIN CP	132	TAKE ACTION.....	122
64	SYMFI.....	TAKHZYRO	132
SUMAXIN TS.....	5	TALICIA	108
64	SYMFI LO	TALTZ AUTOINJECTOR ...	58
<i>sunitinib malate</i>	129	TALTZ AUTOINJECTOR (2	
SUNLENCA.....	SYMLINPEN 120	PACK)	58
5	99		
SUNOSI	SYMLINPEN 60		
45	99		
<i>super b maxi complex</i>	25		
141	SYMPAZAN		
<i>super b-50 complex</i>	106		
141	SYMPROIC.....		
<i>super quints</i>	5		
141	SYMTUZA.....		
SUPPRELIN LA	5		
21	SYNAGIS.....		
SUPREP BOWEL PREP KIT	SYNALAR.....		
.....	70		
106	SYNALAR CREAM KIT		
SURE RESULT TAC PAK... 70	70		
SURE-TEST EASYPLUS	SYNALAR OINTMENT KIT		
MINI.....	.....	
81	70		

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

TALTZ AUTOINJECTOR (3 PACK).....	58	TAZAROTENE.....	64	TENIVAC (PF).....	113
TALTZ SYRINGE.....	58	<i>tazicef</i>	7	<i>tenofovir disoproxil fumarate</i> .6	
TALVEY.....	21	TAZORAC.....	64	TENORETIC 100.....	51
TALZENNA.....	21	TAZVERIK.....	21	TENORETIC 50.....	51
TAMIFLU.....	5	TDVAX.....	113	TENORMIN.....	51
<i>tamoxifen</i>	21	TECARTUS.....	21	TEPADINA.....	21
<i>tamsulosin</i>	134	TECENTRIQ.....	21	TEPEZZA.....	97
TANDEM DUAL ACTION.....	141	TECFIDERA.....	110	TEPMETKO.....	21
TANDEM PLUS.....	141	TECVAYLI.....	21	<i>terazosin</i>	51
TAPERDEX.....	77	TEFLARO.....	7	<i>terbinafine hcl</i>	3
TARCEVA.....	21	TEGLUTIK.....	74	<i>terbutaline</i>	132
TARDEOXIA.....	64	TEGRETOL.....	25	<i>terconazole</i>	119
TARDIMAXIA.....	64	TEGRETOL XR.....	25	<i>teriflunomide</i>	110
TARGADOX.....	12	TEGSEDI.....	28	<i>teriparatide</i>	114
TARGRETIN.....	21	TEKTURNA.....	51	TERIPARATIDE.....	114
<i>tarina 24 fe</i>	122	TELCARE CONTROL.....	92	TERLIVAZ.....	97
<i>tarina fe 1/20 (28)</i>	122	TELCARE TEST STRIPS ...	81	TERSI FOAM.....	58
<i>taron-c dha</i>	141	<i>telmisartan</i>	51	TEST N'GO BLOOD GLUCOSE SYSTEM.....	92
TAROXIA.....	64	<i>telmisartan-amlodipine</i>	51	TEST N'GO TEST.....	81
TARPEYO.....	77	<i>telmisartan-hydrochlorothiazid</i>	51	TESTIM.....	97
TASCENSO ODT.....	110	<i>temazepam</i>	45	TESTONE CIK.....	97
TASIGNA.....	21	TEMBEXA.....	6	TESTOPEL.....	97
<i>tasimelteon</i>	45	TEMODAR.....	21	<i>testosterone</i>	97
TASMAR.....	26	<i>temozolomide</i>	21	TESTOSTERONE.....	97
<i>tavaborole</i>	68	TEMPO SMART BUTTON.....	92	<i>testosterone cypionate</i>	97
TAVALISSE.....	54	TEMPO WELCOME KIT....	92	<i>testosterone enanthate</i>	97
TAVNEOS.....	74	<i>temsirolimus</i>	21	TETOXIA.....	70
TAYTULLA.....	122	<i>tencon</i>	36	<i>tetrabenazine</i>	28
<i>tazarotene</i>	64	TENIPOSIDE.....	21	<i>tetracaine hcl</i>	125

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

TETRACAINE HCL (PF)..	125	TICE BCG.....	113	<i>tobramycin in 0.225 % nacl.</i>	10
<i>tetracycline</i>	12	TICOVAC.....	113	<i>tobramycin sulfate</i>	10
TEXACORT	70	TIGAN.....	106	TOBRAMYCIN WITH	
TEZSPIRE.....	132	<i>tigecycline</i>	10	NEBULIZER.....	10
THALITONE	51	TIGLUTIK	74	<i>tobramycin-dexamethasone</i>	126
THALOMID.....	21	TIKOSYN	47	TOBRAMYCIN-	
THEO-24.....	132	<i>tilia fe</i>	122	VANCOMYCIN	123
<i>theophylline</i>	132	<i>timolol maleate</i>	51, 123	TOBREX	123
THERA-D 4000	141	<i>timolol maleate (pf)</i>	123	TOLAK.....	60
THERANATAL.....	141	TIMOPTIC OCUDOSE (PF)		<i>tolcapone</i>	26
THERANATAL COMPLETE		.....	123	TOLSURA.....	3
.....	141	<i>tinidazole</i>	10	<i>tolterodine</i>	133
THERANATAL ONE.....	141	<i>tiopronin</i>	74	<i>tolvaptan</i>	97
THERANATAL OVAVITE	141	<i>tiotropium bromide</i>	132	TOPAMAX.....	25
THERANATAL PLUS	141	<i>tirofiban-0.9% sodium chloride</i>		TOPICORT	70
THIOLA	74	.....	54	<i>topiramate</i>	25
THIOLA EC	74	TIROSINT.....	100	<i>topotecan</i>	21
<i>thioridazine</i>	45	TIROSINT-SOL	100	TOPROL XL	51
<i>thiotepa</i>	21	<i>tis-u-sol pentalyte</i>	72	<i>toremifene</i>	21
<i>thiothixene</i>	45	TIVDAK.....	21	TORISEL.....	21
THRIVITE RX.....	141	TIVICAY	6	TORONOVA II SUIK	39
THYMOGLOBULIN.....	113	TIVICAY PD	6	TORONOVA SUIK	39
THYQUIDITY	100	TIVORBEX.....	39	<i>torse mide</i>	51
<i>thyroid (pork)</i>	100	<i>tizanidine</i>	30	TOSYMRA.....	27
THYROSAFE	77	TLANDO.....	97	TOTECT	14
<i>tiadylt er</i>	51	TOBI.....	10	TOUJEO MAX U-300	
<i>tiagabine</i>	25	TOBI PODHALER	10	SOLOSTAR.....	95
TIAZAC	51	TOBRADEX	126	TOUJEO SOLOSTAR U-300	
TIBSOVO	21	TOBRADEX ST.....	126	INSULIN	95
TICANASE.....	132	<i>tobramycin</i>	10, 123	<i>tovet emollient</i>	71

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

TOVIAZ	133	<i>tretinoin (antineoplastic)</i>	21	<i>trigels-f forte</i>	141
TRACLEER	132	<i>tretinoin (emollient)</i>	64	TRIHEAL-80	71
TRADJENTA	99	<i>tretinoin microspheres</i>	64	<i>trihexyphenidyl</i>	26
<i>tramadol</i>	39	TRETTEN	54	TRIJARDY XR	99
TRAMADOL	39	TREXALL	21	TRIKAFTA.....	132
<i>tramadol-acetaminophen</i>	39	TREXIMET	27	<i>tri-legest fe</i>	122
<i>trandolapril</i>	51	TREZIX.....	36	TRILEPTAL	25
<i>trandolapril-verapamil</i>	51	TRIADIME	71	<i>tri-linyah</i>	122
<i>tranexamic acid</i>	54, 119	TRIADIME-80	71	TRILIPIX	56
<i>tranexamic acid in nacl,iso-os</i>	54	<i>triamcinolone acetonide</i> 71, 75, 77, 132		<i>tri-lo-estarylla</i>	122
TRANSDERM-SCOP	106	<i>triamterene</i>	51	<i>tri-lo-marzia</i>	122
<i>tranylcypromine</i>	45	<i>triamterene-hydrochlorothiazid</i>	51	<i>tri-lo-mili</i>	122
TRANZAREL	66	TRIASIL.....	71	<i>tri-lo-sprintec</i>	122
TRAVATAN Z	126	<i>triazolam</i>	45	<i>trimethobenzamide</i>	106
<i>travoprost</i>	126	TRIBENZOR.....	51	<i>trimethoprim</i>	13
TRAZIMERA.....	21	<i>tri-buffered aspirin</i>	39	<i>tri-mili</i>	122
<i>trazodone</i>	45	TRICARE.....	141	<i>trimipramine</i>	45
TREANDA.....	21	<i>tricitrates</i>	134	TRI-MIX (PAPAVRN- PHNTLMN-PGE1).....	134
TRECTOR	10	<i>tricon</i>	141	TRIMO-SAN JELLY	119
TRELEGY ELLIPTA	132	TRICOR	56	<i>trinatal rx 1</i>	141
TRELSTAR.....	21	<i>triderm</i>	71	<i>trinate</i>	141
TREMFYA	58	<i>trientine</i>	74	TRINAZ	141
<i>treprostinil sodium</i>	51	TRIENTINE	74	TRINTELLIX.....	45
TRESIBA FLEXTOUCH U- 100.....	95	TRIESENCE (PF)	77	<i>tri-nymyo</i>	122
TRESIBA FLEXTOUCH U- 200.....	95	<i>tri-estarylla</i>	122	TRIONEX.....	58
TRESIBA U-100 INSULIN .	95	TRIFERIC	141	TRIPTODUR.....	21
<i>tretinoin</i>	64	<i>trifluoperazine</i>	45	TRISENOX	21
		<i>trifluridine</i>	123	<i>tri-sprintec (28)</i>	122
				TRISTART DHA.....	141

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

TRIUMEQ.....	6	TRUMENBA.....	113	TYVASO REFILL KIT	133
TRIUMEQ PD	6	TRUQAP	21	TYVASO STARTER KIT ..	133
<i>tri-vitamin with fluoride</i>	141	TRUSTEEL INFUSION SET		U	
<i>trivora (28)</i>	122	23	92	UBRELVY.....	27
<i>tri-vylibra</i>	122	TRUSTEX LUBRICATED		UCERIS.....	106
<i>tri-vylibra lo</i>	122	CONDOMS	116	UDENYCA.....	109
TRODELVY.....	21	TRUSTEX-RIA NON-LUB		UDENYCA AUTOINJECTOR	
TROGARZO	6	CONDOMS	117	.....	109
TROKENDI XR.....	25	TRUVADA.....	6	UDENYCA ONBODY	109
TRONVITE.....	141	TRUXIMA	21	ULESFIA.....	71
<i>tropicamide</i>	124	TUDORZA PRESSAIR	133	ULORIC	113
<i>tropium</i>	133	TUKYSA.....	21	ULTIMA MONITOR.....	92
TRUDHESA.....	27	<i>tulana</i>	118	ULTOMIRIS.....	74
TRUE METRIX AIR		TURALIO	21	ULTRA PRENATAL PLUS	
GLUCOSE METER.....	92	<i>turqoz (28)</i>	122	DHA	141
TRUE METRIX GLUCOSE		TUXARIN ER.....	129	ULTRASAL-ER	59
METER	92	TWINRIX (PF).....	113	ULTRATRAK.....	81
TRUE METRIX GLUCOSE		TWIRLA	119	ULTRATRAK GLUCOSE	
TEST STRIP	81	TWYNEO.....	64	METER.....	92
TRUE METRIX GO		TYBLUME.....	122	ULTRATRAK ULTIMATE .81,	
GLUCOSE METER.....	92	TYBOST	6	92	
TRUE METRIX LEVEL 1...92		<i>tydemy</i>	122	ULTRAVATE	71
TRUERESULT BLOOD		TYGACIL	10	UNASYN	11
GLUCOSE SYSTM	92	TYKERB	21	UNISTRIP LOW CONTROL	
TRUETEST TEST STRIPS .81		TYMLOS.....	114	.....	92
TRUETRACK BLOOD		TYPHIM VI	113	UNISTRIP1 TEST STRIP...81	
GLUCOSE SYSTEM.....	92	TYRVAYA	125	<i>unitroid</i>	100
TRUETRACK SMART		TYSABRI.....	28	UNITUXIN.....	21
SYSTEM.....	92	TYVASO	133	UPLIZNA	21
TRUETRACK TEST	81	TYVASO DPI.....	133	UPNEEQ (PF).....	128
TRULANCE.....	106			UPTRAVI	51
TRULICITY.....	99				

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

URAMAXIN.....	60	VABYSMO	125	VANFLYTA.....	21
<i>urea</i>	60, 61	VAGIFEM	118	VANOS.....	71
UREA	60	<i>valacyclovir</i>	6	VANOXIDE-HC.....	64
<i>urea nail stick</i>	60	VALCHLOR.....	61	VAPRISOL IN 5 % DEXTROSE	97
<i>ure-k</i>	61	VALCYTE.....	6	VAQTA (PF)	113
URELLE.....	134	<i>valganciclovir</i>	6	<i>vardenafil</i>	135
<i>uretron d-s</i>	134	VALIUM	45	VARDIMAXIA	64
URIBEL	134	<i>valladerm-90</i>	66	<i>varenicline</i>	74
URIBEL TABS.....	134	<i>valproate sodium</i>	25	VARISOFT INFUSION SET 23	92
<i>urimar-t</i>	134	<i>valproic acid</i>	25	VARIVAX (PF).....	113
URIMAR-T	134	<i>valproic acid (as sodium salt)</i>	25	VARIZIG	113
URNEVA.....	134	<i>valsartan</i>	51	VAROPHEN (DICLOFENAC)	39
<i>uro-458</i>	134	VALSARTAN.....	51	VAROXIA	64
UROCIT-K 10	134	<i>valsartan-hydrochlorothiazide</i>	51	VARUBI	106
UROCIT-K 15	135	VALTOCO.....	25	VASCEPA.....	56
UROCIT-K 5	135	VALTRESX	6	VASERETIC.....	51
<i>urogesic-blue</i>	135	<i>vanadom</i>	30	VASHE	72
<i>uro-mp</i>	135	VANCOCIN	13	<i>vasopressin</i>	97
UROQID-ACID NO.2	135	<i>vancomycin</i>	13	VASOPRESSIN IN 0.9 % SOD CHLOR.....	97
<i>uro-sp</i>	135	VANCOMYCIN.....	13	VASOPRESSIN IN DEXTROSE 5 %.....	97
UROXATRAL.....	134	<i>vancomycin in 0.9 % sodium chl</i>	13	VASOTEC	51
URSO 250	106	VANCOMYCIN IN 0.9 % SODIUM CHL	13	VAXCHORA VACCINE....	113
URSO FORTE.....	106	VANCOMYCIN IN DEXTROSE 5 %.....	13	VAXELIS (PF)	113
<i>ursodiol</i>	106	VANCOMYCIN-DILUENT COMBO NO.1.....	13	VAXNEUVANCE (PF)	113
<i>uryl</i>	135	<i>vandazole</i>	119	VCF CONTRACEPTIVE FILM.....	119
UVADEX	61				
UZEDY	45				
V					
VABOMERE	10				

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

VCF CONTRACEPTIVE GEL	119	VERKAZIA.....	125	VIMIZIM.....	97
VECTIBIX	21	VERQUOVO	56	VIMOVO.....	39
VECTICAL	58	VERSACLOZ	46	VIMPAT.....	25
VEGZELMA.....	21	VERZENIO	22	<i>vinblastine</i>	22
VEKLURY	6	VESICARE	133	<i>vincasar pfs</i>	22
VELCADE	21	VESICARE LS.....	133	<i>vincristine</i>	22
<i>veletri</i>	51	<i>vestura (28)</i>	122	<i>vinorelbine</i>	22
<i>velivet triphasic regimen (28)</i>	122	VEVYE	125	VIOKACE	106
VELPHORO.....	102	VFEND.....	3	<i>viorele (28)</i>	122
VELSIPITY.....	106	VFEND IV	3	VIRACEPT.....	6
VELTASSA	102	V-GO 20	92	VIRASAL.....	59
VELTIN.....	64	V-GO 30	93	VIRAZOLE	6
VEMLIDY	6	V-GO 40	93	VIREAD	6
VENCLEXTA	21	VIAGRA	135	VISCO-3.....	39
VENCLEXTA STARTING PACK.....	22	VIBATIV	13	VISTARIL	129
<i>venlafaxine</i>	46	VIBERZI	106	VISTOGARD	14
VENLAFAXINE BESYLATE	45	VIBRAMYCIN	12	VITAFOL FE PLUS	141
VENNGEL ONE.....	39	VICTOZA 2-PAK.....	99	VITAFOL GUMMIES.....	141
VENOFER	141	VICTOZA 3-PAK.....	99	VITAFOL ULTRA	141
VENTAVIS.....	133	VIDAZA.....	22	VITAFOL-OB	141
VENTOLIN HFA	133	<i>vienna</i>	122	VITAFOL-OB+DHA	142
VEOPOZ	74	<i>vigabatin</i>	25	VITAFOL-ONE.....	142
VEOZAH	119	<i>vigadrone</i>	25	VITALIPID N INFANT	142
<i>verapamil</i>	51	VIGAMOX.....	123	VITAMEDMD ONE RX....	142
VERDESO	71	<i>vigpoder</i>	25	VITAMEDMD REDICHEW RX.....	142
VEREGEN	61	VIIBRYD.....	46	<i>vitamin b complex-folic acid</i>	142
VERELAN PM	52	VIJOICE.....	22	<i>vitamin d3</i>	142
		<i>vilazodone</i>	46	<i>vitamin k</i>	54
		VILTEPSO	28		

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

<i>vitamin k1</i>	54	<i>voriconazole</i>	3	VYZULTA.....	126
<i>vitamins a,c,d and fluoride</i> .	142	VORTEX HOLDING CHAMBER	83	W	
VITAPEARL	142	VOSEVI	6	WAINUA.....	28
VITA-RESPA	142	VOTRIENT	22	WAKIX.....	46
VITATRUE.....	142	VOWST	106	<i>wal-zyr (ketotifen)</i>	125
VITLIPID N INFANT.....	142	VOXZOGO	98	<i>warfarin</i>	54
VITRAKVI.....	22	VPRIV	98	<i>water for irrigation, sterile</i> ...74	
VIVAGUARD INO CTRL SOLN-L1,2,3.....	93	VRAYLAR.....	46	WAVESENSE AMP	93
VIVAGUARD INO GLUCOSE METER.....	93	VTAMA.....	58	WAVESENSE CONTROL SOLUTION	93
VIVAGUARD INO SMART GLUC METER	93	VUITY.....	124	WAVESENSE JAZZ	81
VIVAGUARD INO TEST STRIP	81	VUMERITY	110	WAVESENSE PRESTO .81, 93	
VIVELLE-DOT	118	VUSION.....	68	WEGOVY	72
VIVIMUSTA.....	22	VYEPTI.....	27	WELCHOL.....	56
VIVITROL	39	<i>vyfemla (28)</i>	122	WELIREG	22
VIVJOA	3	VYJUVEK.....	61	WELLBUTRIN SR	46
VIVLODEX	39	VYLEESI	46	WELLBUTRIN XL.....	46
VIVOTIF	113	<i>vylibra</i>	122	<i>wera (28)</i>	122
VIZIMPRO	22	VYNDAMAX	56	<i>wescap-c dha</i>	142
VOGELXO.....	98	VYNDAMAX	56	<i>wescap-pn dha</i>	142
<i>volnea (28)</i>	122	VYONDAQEL.....	56	<i>wesnata dha complete</i>	142
VONJO.....	22	VYONDYS-53	28	<i>wesnate dha</i>	142
VONVENDI.....	54	VYTORIN.....	66	<i>westab plus</i>	142
VOQUEZNA.....	108	VYTORIN 10-10.....	56	<i>westgel dha</i>	142
VOQUEZNA DUAL PAK .	108	VYTORIN 10-20.....	56	WHYTEDERM TDDPAK	71
VOQUEZNA TRIPLE PAK	108	VYTORIN 10-40.....	56	WHYTEDERM TRILASIL PAK	71
VORAXAZE.....	14	VYTORIN 10-80.....	56	WIDE-SEAL DIAPHRAGM	117
		VYVANSE	46	WILATE	54
		VYVGART.....	30		
		VYVGART HYTRULO.....	30		
		VYXEOS.....	22		

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

WINLEVI.....	64	XELJANZ	116	XPOVIO	22
WINREVAIR	133	XELJANZ XR.....	116	XRYLIX (DICLOFENAC- KINES TAPE)	40
<i>wintergreen oil</i>	61	XELODA.....	22	XTAMPZA ER	36
<i>wixela inhub</i>	133	XELPROS	126	XTANDI	22
<i>women's gentle laxative(bisac)</i>	106	XELSTRYM.....	46	<i>xulane</i>	119
WOMEN'S PRENATAL PLUS DHA	142	XEMBIFY	113	XULTOPHY 100/3.6.....	95
<i>wymzya fe</i>	122	XENAZINE.....	28	XUREA	61
WYNZORA	58	XENICAL	72	XURIDEN	74
X		XENLETA.....	10	XYLOCAINE- MPF/EPINEPHRINE	66
XACDURO	10	XENPOZYME	74	XYNTHA	54
XACIATO	119	XEOMIN	113	XYNTHA SOLOFUSE	54
XADAGO	26	XEPI.....	66	XYOSTED	98
XALATAN	126	XERAVA	12	XYREM.....	46
XALIX	59	XERESE.....	68	XYWAV.....	46
XALKORI.....	22	XERMELO.....	22	Y	
XANAX	46	XGEVA	14	YASMIN (28).....	122
XANAX XR.....	46	XHANCE	133	YAZ (28).....	122
XARACOLL.....	66	XIFAXAN	10	YCANTH	61
XARELTO.....	54	XIGDUO XR.....	99	YERVOY.....	22
XARELTO DVT-PE TREAT 30D START.....	54	XIIDRA	125	YESCARTA.....	22
XATMEP	22	XILAPAK.....	71	YF-VAX (PF)	113
XCLAIR.....	61	XIMINO	12	YONDELIS	22
XCOPRI	25	XIPERE (PF).....	77	YONSA	22
XCOPRI MAINTENANCE PACK.....	25	XOFLUZA	6	YOSPRALA	54
XCOPRI TITRATION PACK	25	XOLAIR.....	133	YUFLYMA(CF)	116
XDEMVY	125	XOLEGEL.....	68	YUFLYMA(CF) AI CROHN'S-UC-HS.....	116
		XOPENEX HFA.....	133	YUFLYMA(CF) AUTOINJECTOR	116
		XOSPATA.....	22		
		XPHOZAH.....	102		

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

YUPELRI.....	133	ZEMDRI.....	10	ZILXI.....	64
YUSIMRY(CF) PEN	116	ZEMPLAR	98	ZIMHI.....	40
<i>yuvafem</i>	118	<i>zenatane</i>	64	<i>zingiber</i>	142
Z		ZENPEP	106	ZINPLAVA	113
ZADITOR	125	<i>zenzedi</i>	46	<i>zionodil</i>	66
<i>zafemy</i>	119	ZENZEDI.....	46	ZIOPTAN (PF)	126
<i>zafirlukast</i>	133	ZEPATIER.....	6	ZIPHEX.....	142
<i>zaleplon</i>	46	ZEPBOUND.....	72	<i>ziprasidone hcl</i>	46
ZALTRAP	22	ZEPOSIA.....	28	<i>ziprasidone mesylate</i>	46
ZALVIT.....	142	ZEPOSIA STARTER KIT (28- DAY)	28	ZIPSOR	40
ZANAFLEX.....	30	ZEPOSIA STARTER PACK (7-DAY).....	28	ZIRABEV	22
ZANOSAR.....	22	ZEPZELCA	22	ZIRGAN	123
<i>zarah</i>	122	ZERBAXA	7	ZITHRANOL	58
ZARONTIN	25	ZERVIATE	125	ZITHROMAX	8
ZARXIO.....	109	ZESTORETIC	52	ZITHROMAX TRI-PAK.....	8
<i>zatean-pn dha</i>	142	ZESTRIL	52	ZITHROMAX Z-PAK.....	8
<i>zatean-pn plus</i>	142	ZETIA	56	ZITUVIO.....	99
ZAVZPRET	27	ZETONNA	133	ZMA CLEAR	64
ZCORT	77	ZEVALIN (Y-90).....	22	ZOCOR.....	56
ZEGALOGUE AUTOINJECTOR.....	83	ZIAGEN	6	ZOKINVY	74
ZEGALOGUE SYRINGE ...	83	ZIANA.....	64	ZOLADEX	22
ZEGERID.....	108	ZICLOCIN	40	<i>zoledronic acid</i>	98
ZEGERID OTC.....	108	ZICLOPRO	40	<i>zoledronic acid-mannitol-water</i>	74, 98
ZEJULA	22	<i>zidovudine</i>	6	ZOLEDRONIC AC- MANNITOL-0.9NACL...98	
ZELAPAR	26	ZIEXTENZO.....	109	ZOLGENSMA	28
ZELBORAF	22	ZILBRYSQ.....	30	ZOLINZA.....	22
ZELNORM	106	<i>zileuton</i>	133	<i>zolmitriptan</i>	27
ZEMAIRA.....	74	ZILOVAL	66	ZOLOFT	46
ZEMBRACE SYMTOUCH.27					

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.

<i>zolpidem</i>	46	<i>zovia 1-35 (28)</i>	122	ZYMFENTRA.....	106
ZOLPIDEM.....	46	ZOVIRAX	68	ZYNLONTA.....	22
ZOMACTON	109	ZTALMY	25	ZYNRELEF.....	74
ZOMIG.....	27	ZTLIDO.....	66	ZYNTEGLO.....	109
ZONALON.....	61	ZUBSOLV	40	ZYNYZ.....	22
ZONEGRAN.....	25	ZULRESSO.....	46	ZYPITAMAG.....	56
ZONISADE.....	25	<i>zumandimine (28)</i>	122	ZYPREXA.....	46
<i>zonisamide</i>	25	ZURZUVAE	46	ZYPREXA RELPREVV	46
ZONTIVITY	55	ZYCLARA	113	ZYPREXA ZYDIS	46
ZORTRESS	22	ZYDELIG.....	22	ZYTIGA	22
ZORVOLEX.....	40	ZYFLO	133	ZYVOX	10
ZORYVE.....	58	ZYKADIA.....	22		
ZOSYN IN DEXTROSE (ISO- OSM).....	11	ZYLET	126		
		ZYLOPRIM.....	113		

You can find information on what the abbreviations in this document mean by going to the Abbreviations section on page 2, immediately after the Table of Contents.