silversummit healthplan

Preferred Drug List

The **Preferred Drug List (PDL)** includes a list of drugs covered by your prescription benefit. The PDL is updated regularly and may change. To get the most up-to-date information, visit **SilverSummitHealthplan.com**. You can also call us at **1-844-366-2880** (TTY: 1-844-804-6086 or Relay: 711) Monday–Friday 8:00 a.m.–6:00 p.m.

This Preferred Drug List is searchable. Here is how to search for a drug:

1. **Press Control F to open the search tool**
2. **Type the drug name into the text box**
3. **Press Enter**

Need help understanding this document? Language assistance services, auxiliary aids, and other alternative formats are available to you free of charge. Call Member Services at 1-844-366-2880 (TTY: 1-844-804-6086 or Relay: 711). SilverSummit Healthplan has a telephone language line available 24 hours a day, 7 days a week.

Pharmacy Program

SilverSummit Healthplan pays for prescription drugs and some over-the-counter medicines. Your doctor must write a prescription. Not all drugs are covered. Some drugs need prior authorization. Some drugs have limits on age, dose, or quantity.

You can get help by:

- Calling SilverSummit Healthplan Member Services at 1-844-366-2880
- Using the Drug Lookup Tool

Pharmacy Benefit Manager

SilverSummit Healthplan works with Express Scripts, Inc. to process pharmacy claims. Express Scripts is our Pharmacy Benefit Manager.

Prior Authorizations (PA)

Some drugs on the Preferred Drug List need prior authorization (PA). Your doctor can send the PA request through Cover My Meds (www.covermymeds.com) or by fax to 1-833-645-2736.

SilverSummit Healthplan will cover the medicine if:

- You need the drug for medical reasons
- Other drugs on the PDL didn't work
- The drug is not a benefit exclusion

PA requests are reviewed by a licensed pharmacist within 24 hours. If approved, your doctor is sent a fax. If the PA is denied, a fax will be sent to your doctor. You will receive a letter from us with the list of medicines that are covered. The letter will also tell you about the appeal process.

Transition Period

New members can get most prescription drugs without PA for 2 fills (up to 68 days) in the first 90 days. Controlled drugs have a 30-day limit. This will give you and your doctor time to switch to drugs on the Preferred Drug List or request a prior authorization.

96-Hour Emergency Supply Policy

State and Federal Law allows a pharmacy to give up to 4 days of medicine if you are waiting for a PA. Pharmacies will be paid for the 4 day supply even if the PA is not approved. Controlled drugs are not included. The pharmacy must call 1-866-399-0928 for approval.

Step Therapy

In Step Therapy, for some drugs to be covered, you may need to try another drug first. If you have already tried it, the drug will be covered. If not, your doctor must send a PA. If the PA is not approved, a fax will be sent to your doctor. You will receive a letter from us with the list of medicines that are covered. The letter will also tell you about the appeal process.

Dispensing Limits

The pharmacy can give you:

- Up to 34 days per new prescription or refill
- Up to 100 days per maintenance medicine
- 80% of the medicine supply or 25 days must pass before the medicine can be refilled
- 90% for controlled drugs, and you may need a new prescription for some controlled medicines

Quantity Limits

Some drugs have limits on how much medicine you can get at one time. Your doctor can request PA if needed. If not, your doctor must send a PA. If the PA is not approved, a fax will be sent to your doctor. You will receive a letter from us with the list of medicines that are covered. The letter will also tell you about the appeal process.

Age Limit

Some medicines on the Preferred Drug List have age limits. These limits are based on Food and Drug Administration rules to keep you safe. If your doctor decides you still need the medicine, they can send a PA request to Pharmacy Services. If the PA is not approved, a fax will be sent to your doctor. You will receive a letter from us with the list of medicines that are covered. The letter will also tell you about the appeal process.

Medical Necessity Requests

If a drug is not on the Preferred Drug List (PDL), your doctor can make a medical necessity PA with notes showing:

- You tried 2 PDL drugs in the same class and used for the same diagnosis
- You can't take PDL drugs due to allergy or other reasons
- You can't take any of the PDL agents for your diagnosis

All requests are checked by a licensed clinical pharmacist. Most reviews are finished within 24 hours unless more information is needed. The pharmacist follows rules from the Pharmacy & Therapeutics Committee. If your request is approved, a fax will be sent to your doctor. If the PA is not approved, a fax will be sent to your doctor. You will receive a letter from us with the list of medicines that are covered. The letter will also tell you about the appeal process.

Appropriate Use and Safety Edits

Your safety is very important to us. One way we help keep you safe is by using point-of-sale edits when the pharmacy sends your medicine claim. These edits follow Food and Drug Administration rules. For example, you can only get one drug from the same therapy group each month.

Generic Drugs

Generic drugs have the same active ingredient and work the same as brand-name drugs. If you or your doctor decide you need a brand-name drug that is not preferred, your doctor can request a PA. We will cover the brand-name drug if there is a medical reason you need it. If the PA is not approved, a fax will be sent to your doctor. And you will get a letter with a list of generic medicines that are covered. The letter will tell you about the appeal process.

Over-the-Counter Medicines

Some over-the-counter drugs are covered if your doctor writes a prescription. These drugs are listed in the Preferred Drug List.

Filling a Prescription

You can get your medicine at an in-network pharmacy. To find one, call SilverSummit Healthplan Member Services or use the Provider Lookup tool on our website. Bring your prescription and your SilverSummit ID card to the pharmacy. The pharmacy may also ask for another ID, like a driver's license or state ID.

Maintenance Medications

Some drugs are called maintenance medications because they treat long-term health problems. If your medicine is part of the Maintenance Drug List, you can get up to a 100-day supply at certain retail pharmacies.

Exclusions

Below you will find a list of things that are not part of the PDL. The 96-hour emergency supply policy does not cover these drugs either.

- Drugs that are experimental drugs without federal rebates
- Drug Efficacy Study and Implementation (DESI) drugs
- Drugs prescribed for anorexia, weight loss or weight gain
- Drugs prescribed for infertility
- Drugs prescribed for erectile dysfunction
- Drugs prescribed for cosmetic purposes or hair growth
- Bulk powders

Drug Efficacy Study and Implementation Drugs

Drug Efficacy Study and Implementation (DESI) drugs are said to be less effective by the Food and Drug Administration. DESI products are not covered by SilverSummit Healthplan.

Medical Benefits

Some drugs and medical services are part of SilverSummit Healthplan's medical benefit and are not covered at retail pharmacies:

- Injectable drugs given at a doctor's office or outpatient clinic
- Home health products and home infusion therapy, like:
    - Durable medical equipment
    - Nebulizers and tubing
    - Blood pressure monitors
    - Enteral and parenteral nutrition
    - Injectable antibiotic therapy
    - Chemotherapy
    - Other medical supplies

If a prescriber asks Pharmacy Services for a medical prior authorization, they will be told to contact SilverSummit Healthplan directly.

Newly Approved Products

New drugs are reviewed before they are added to the Preferred Drug List. These medicines will need a PA until they are added to the Preferred Drug List. If it is not approved, Pharmacy Services will send a letter to you and a fax to your doctor. The letter will have a list of other similar medicines that are covered. It will also tell you about the appeal process.

Contact Information

SilverSummit Healthplan Member Services: **1-844-366-2880** (TTY: 1-844-804-6086 or Relay: 711)

Pharmacy Services Prior Authorizations: **1-855-565-9520**

Pharmacy Services ESI Pharmacy Help Desk: **1-833-750-4490**

AcariaHealth: **1-855-535-1815**

PREFERRED DRUG LIST TIER ABBREVIATIONS	
Tier	**Tier Definitions**
P	**Preferred**: This drug is covered on the drug list.
NP	**Non-Preferred**: This drug needs prior authorization.
PA	**Preferred with Prior Authorization**: This drug needs prior authorization.
NF	**Non-Formulary**: This drug needs prior authorization. Use preferred drug.
REQUIREMENT or LIMITS	
Requirement/Limits	**Requirement/Limit Description**
AL	**Age Limit**: Drug is limited to a specific age.
MP	**Maintenance Program**: Drug can be filled for up to 100 days' supply (3 months' supply) per fill.
PA	**Prior Authorization**: Review required before prescription can be filled
QL	**Quantity Limit**: There is a limit on the amount covered per prescription or within a set time frame.
Rx/OTC	Product has both **prescription and over the counter** coverage
SP	**Specialty Drug**: High-cost drugs used to treat complex conditions, such as multiple sclerosis, rheumatoid arthritis, hepatitis C, and hemophilia and may be limited to a specific pharmacy.
ST	**Step Therapy**: Requires trial and failure of one or more preferred products prior to coverage.
Opioid	Opioid medicines can only be filled for 7 days at a time without Prior Authorization. This limit is extended to 30-day fills when a member has a medical history of cancer or palliative care in their records. Opioid fills are limited to 13 fills within 12 month rolling period without Prior Authorization. Additional restrictions may apply for members under the age of 18 years. Limits: • Daily Dose Max = 60 MME** • Day Supply Max = 7 days • Must use Short-acting opioids before Long-acting opioids **MME = Morphine Milligram Equivalent
Test Strips	Insulin users are limited to 200 strips per month.

STANDARD ABBREVIATIONS			
Dose Form	**Dose Form Description**	**Dose Form**	**Dose Form Description**
AEPB	Aerosol Powder Breath Activated	***CSDR***	Capsule Delayed Release Sprinkle
AERB	Aerosol, breath activated	***DEVI***	Device
AERO	Aerosol	***ELIX***	Elixir
AJKT	Auto-injector Kit	***EMUL***	Emulsion
AUIJ	Auto-injector	***ENEM***	Enema
CAPS	Capsule	***GRAN***	Granules
CHEW	Tablet Chewable	***IJ***	Injection
CONC	Concentrate	***IMPL***	Implant
CP12	Capsule ER 12 HR	***INHA***	Inhaler
CP24	Capsule ER 24 HR	***INJ***	Injectable
CPCR	Capsule ER	***IUD***	Intrauterine Device
CPDR	Capsule Delayed Release	***IV***	Intravenous
CPEP	Capsule Enteric Coated Particles	***LIQD***	Liquid
CPSP	Capsule Sprinkle	***LOTN***	Lotion
CREA	Cream	***SOPN***	Solution Pen-injector
LOZG	Lozenge	***SOSY***	Solution Prefilled Syringe
MISC	Miscellaneous	***SRER***	Suspension Reconstituted ER
NEBU	Nebulization solution	***STRP***	Strip
OINT	Ointment	***SUBL***	Tablet Sublingual
OPHT	Ophthalmic	***SUER***	Suspension Extended Release
OR	Oral	***SUPN***	Suspension Pen-injector
PACK	Packet	***SUPP***	Suppository
PEN	Pen-injector	***SUSP***	Suspension
PNKT	Pen-injector Kit	***SUSR***	Suspension Reconstituted
POT	Potassium	***SUSY***	Suspension Prefilled Syringe
POWD	Powder	***SYRP***	Syrup
PRSY	Prefilled Syringe	***TABS***	Tablets
PSKT	Prefilled Syringe Kit	***TB12***	Tablet ER 12 Hour
PSTE	Paste	***TB24***	Tablet ER 24 Hour
PT24	Patch 24 Hour	***TBCR***	Tablet ER
PT72	Patch 72 Hour	***TBDP***	Tablet Dispersible
PTCH	Patch	***TBEC***	Tablet Enteric Coated
PTTW	Patch Biweekly	***TBEF***	Tablet Effervescent
PTWK	Patch Weekly	***TBPK***	Tablet Therapy Pack
S.O.P.	Sterile Ophthalmic Preparation	***TBSO***	Tablet Soluble
SHAM	Shampoo	***TEST***	Diagnostic Test
SOAJ	Solution Auto-injector	***WAFR***	Wafer
SOCT	Solution Cartridge	***XR***	Extended Release
SOLN	Solution		
SOLR	Solution Reconstituted		

Drug Name	Drug Tier	Requirements/ Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders		
Amphetamines		
ADDERALL XR CP24 *(Use amphetamine-dextroamphetamine)*	NP	QL(1 EA daily); AL(At least 6 yrs old)
ADDERALL TABS *(Use amphetamine-dextroamphetamine)*	NP	AL(At least 3 yrs old)
ADZENYS XR-ODT TBED 3.1 MG, 6.3 MG, 9.4 MG, 12.5 MG, 15.7 MG, 18.8 MG *(Use amphetamine)*	NP	QL(1 EA daily); AL(At least 6 yrs old)
amphetamine sulfate TABS	NP	AL(At least 3 yrs old)
amphetamine-dextroamphetamine CP24 12.5 MG, 25 MG, 37.5 MG, 50 MG	NP	QL(1 EA daily); AL(At least 6 yrs old)
amphetamine-dextroamphetamine CP24 5 MG, 10 MG, 15 MG, 20 MG, 25 MG, 30 MG	PA	QL(1 EA daily); AL(At least 6 yrs old); PA
amphetamine-dextroamphetamine TABS	PA	AL(At least 3 yrs old); PA
amphetamine TBED 3.1 MG, 6.3 MG, 9.4 MG, 12.5 MG, 15.7 MG, 18.8 MG	NP	QL(1 EA daily); AL(At least 6 yrs old)
ARYNTA SOLN PO 10 MG/ML	NP	QL(1 ML daily); AL(At least 6 yrs old)
DEXEDRINE CP24 10 MG, 15 MG *(Use dextroamphetamine sulfate)*	NP	QL(2 EA daily); AL(At least 6 yrs old)
dextroamphetamine sulfate CP24	PA	QL(2 EA daily); AL(At least 6 yrs old); PA
dextroamphetamine sulfate SOLN	NP	AL(At least 3 yrs old)
dextroamphetamine sulfate TABS	NP	AL(At least 3 yrs old)
dextroamphetamine sulfate TABS	PA	AL(At least 3 yrs old); PA
DYANAVEL XR SUER	NP	QL(8 ML daily); AL(At least 6 yrs old)
DYANAVEL XR TBCR	NP	QL(1 EA daily); AL(At least 6 yrs old)
EVEKEO TABS *(Use amphetamine sulfate)*	NP	AL(At least 3 yrs old)
lisdexamfetamine dimesylate CAPS	PA	QL(1 EA daily); AL(At least 6 yrs old); PA
lisdexamfetamine dimesylate CHEW	PA	QL(1 EA daily); AL(At least 6 yrs old); PA
methamphetamine hcl	NP	AL(At least 3 yrs old)
MYDAYIS CP24 *(Use amphetamine-dextroamphetamine)*	NP	QL(1 EA daily); AL(At least 6 yrs old)
VYVANSE CAPS *(Use lisdexamfetamine dimesylate)*	PA	QL(1 EA daily); AL(At least 6 yrs old); PA
VYVANSE CHEW *(Use lisdexamfetamine dimesylate)*	NP	QL(1 EA daily); AL(At least 6 yrs old)
XELSTRYM	NP	AL(At least 6 yrs old)
Analeptics		
caffeine citrate SOLN PO 60 MG/3ML	P	QL(45 ML per fill retail; 45 per fill mail)
Anti-Obesity Agents		
WEGOVY 0.25 MG/0.5ML, 0.5 MG/0.5ML, 1 MG/0.5ML	PA	QL(0.072 ML daily; 2 ML per 28 day(s) retail; 2 ML per 28 days mail); AL(At least 18 yrs old); PA

Drug Name	Drug Tier	Requirements/ Limits
WEGOVY PO 1.5 MG, 4 MG, 9 MG, 25 MG	PA	QL(1 EA daily; 30 EA per 30 day(s) retail; 30 EA per 30 days mail); AL(At least 18 yrs old); PA
WEGOVY 1.7 MG/0.75ML, 2.4 MG/0.75ML	PA	QL(0.108 ML daily; 3 ML per 28 day(s) retail; 3 ML per 28 days mail); AL(At least 18 yrs old); PA
ZEPBOUND KWIKPEN SOPN SC 2.5 MG/0.6ML, 5 MG/0.6ML, 7.5 MG/0.6ML, 10 MG/0.6ML, 12.5 MG/0.6ML, 15 MG/0.6ML	PA	QL(0.072 ML daily; 2.4 ML per 30 day(s) retail; 2 ML per 30 days mail); AL(At least 18 yrs old); PA
ZEPBOUND SOAJ	PA	QL(0.072 ML daily; 2 ML per 28 day(s) retail; 2 ML per 28 days mail); AL(At least 18 yrs old); PA
ZEPBOUND SOLN	PA	QL(0.072 ML daily; 2 ML per 28 day(s) retail; 2 ML per 28 days mail); AL(At least 18 yrs old); PA
Attention-Deficit/Hyperactivity Disorder (ADHD) Agents		
atomoxetine hcl PO 4 MG/ML	NP	QL(2 ML daily); AL(At least 6 yrs old)
atomoxetine hcl	PA	QL(2 EA daily); AL(At least 6 yrs old); PA
ATONCY PO 4 MG/ML *(Use atomoxetine hcl)*	NP	QL(2 ML daily); AL(At least 6 yrs old)
clonidine hcl (adhd) TB12	PA	QL(4 EA daily); AL(At least 6 yrs old); PA
guanfacine hcl (adhd)	PA	QL(1 EA daily); AL(At least 6 yrs old); PA
INTUNIV *(Use guanfacine hcl (adhd))*	NP	QL(1 EA daily); AL(At least 6 yrs old)
ONYDA XR SUER	NP	QL(4 ML daily); AL(At least 6 yrs old)
QELBREE	PA	AL(At least 6 yrs old); PA
STRATTERA *(Use atomoxetine hcl)*	NP	QL(2 EA daily); AL(At least 6 yrs old)
Dopamine and Norepinephrine Reuptake Inhibitors (DNRIs)		
SUNOSI	NP	
Histamine H3-Receptor Antagonist/Inverse Agonists		
WAKIX	PA	SP; PA
Stimulants - Misc.		
APTENSIO XR CP24 *(Use methylphenidate hcl)*	NP	QL(1 EA daily); AL(At least 6 yrs old)
armodafinil	PA	QL(1 EA daily); PA
AZSTARYS	NP	AL(At least 6 yrs old)
CONCERTA TBCR *(Use methylphenidate hcl)*	PA	QL(1 EA daily); AL(At least 6 yrs old); PA
COTEMPLA XR-ODT TBED	NP	QL(1 EA daily); AL(At least 6 yrs old)
dexmethylphenidate hcl CP24	PA	QL(1 EA daily); AL(At least 6 yrs old); PA
dexmethylphenidate hcl TABS	PA	AL(At least 3 yrs old); PA
FOCALIN XR CP24 *(Use dexmethylphenidate hcl)*	NP	QL(1 EA daily); AL(At least 6 yrs old)
FOCALIN TABS *(Use dexmethylphenidate hcl)*	NP	AL(At least 3 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
JORNAY PM CP24	PA	AL(At least 6 yrs old); PA
METHYLIN SOLN *(Use methylphenidate hcl)*	NP	AL(At least 3 yrs old)
METHYLPHENIDATE ER TBED 8.6 MG, 17.3 MG, 25.9 MG	NP	QL(1 EA daily); AL(At least 6 yrs old)
methylphenidate hcl CHEW	NP	AL(At least 3 yrs old)
methylphenidate hcl CP24 10 MG, 20 MG, 30 MG, 40 MG, 60 MG	PA	QL(1 EA daily); AL(At least 6 yrs old); PA
methylphenidate hcl CP24	NP	QL(1 EA daily); AL(At least 6 yrs old)
methylphenidate hcl CPCR	PA	QL(1 EA daily); AL(At least 6 yrs old); PA
methylphenidate hcl SOLN	PA	AL(At least 3 yrs old); PA
methylphenidate hcl TABS	PA	AL(At least 3 yrs old); PA
methylphenidate hcl TB24	PA	QL(1 EA daily); AL(At least 6 yrs old); PA
methylphenidate hcl TBCR 45 MG, 63 MG, 72 MG	NP	QL(1 EA daily); AL(At least 6 yrs old)
methylphenidate hcl TBCR 18 MG, 27 MG, 36 MG, 54 MG	PA	QL(1 EA daily); AL(At least 6 yrs old); PA
methylphenidate hcl TBCR 10 MG, 20 MG	PA	QL(2 EA daily); AL(At least 6 yrs old); PA
methylphenidate PTCH	NP	QL(1 EA daily); AL(At least 6 yrs old)
modafinil	NP	QL(1 EA daily)
NUVIGIL *(Use armodafinil)*	NP	QL(1 EA daily)
PROVIGIL *(Use modafinil)*	PA	QL(1 EA daily); PA
QUILLICHEW ER CHER	NP	QL(1 EA daily); AL(At least 6 yrs old)
QUILLIVANT XR SRER	NP	QL(12 ML daily); AL(At least 6 yrs old)
RELEXXII TBCR	NP	QL(1 EA daily); AL(At least 6 yrs old)
RELEXXII TBCR *(Use methylphenidate hcl)*	NP	QL(1 EA daily); AL(At least 6 yrs old)
RITALIN LA CP24 20 MG, 40 MG *(Use methylphenidate hcl)*	PA	QL(1 EA daily); AL(At least 6 yrs old); PA
RITALIN TABS *(Use methylphenidate hcl)*	NP	AL(At least 3 yrs old)
ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
Allergenic Extracts		
GRASTEK SUBL	P	QL(1 EA daily); AL(At least 5 yrs old - Up to 65 yrs old)
ORALAIR SUBL	P	QL(1 EA daily); AL(At least 10 yrs old - Up to 65 yrs old)
RAGWITEK SUBL	P	QL(1 EA daily); AL(At least 18 yrs old - Up to 65 yrs old)
ALTERNATIVE MEDICINES		
Alternative Medicine - M's		
melatonin TABS 3 MG, 5 MG	P	QL(1 EA daily)
AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections		
Aminoglycosides		
ARIKAYCE	P	SP; PA
BETHKIS NEBU *(Use tobramycin)*	P	SP
KITABIS PAK (W/ NEBULIZER) NEBU 300 MG/5ML *(Use tobramycin)*	P	SP
neomycin sulfate TABS	P	

Drug Name	Drug Tier	Requirements/ Limits
TOBI PODHALER CAPS	NP	SP
TOBI NEBU *(Use tobramycin)*	NP	SP
tobramycin sulfate SOLN IJ 1.2 GM/30ML, 2 GM/50ML, 10 MG/ML, 80 MG/2ML	P	
tobramycin sulfate SOLR	P	
tobramycin NEBU	NP	SP
tobramycin NEBU	P	SP
ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions		
Anti-TNF-alpha - Monoclonal Antibodies		
ABRILADA (1 PEN) AJKT	NP	SP
ABRILADA (2 PEN) AJKT	NP	SP
ABRILADA (2 SYRINGE) PSKT	NP	SP
ADALIMUMAB-AACF (2 PEN) AJKT	NP	SP
ADALIMUMAB-AACF (2 SYRINGE) PSKT	NP	SP
ADALIMUMAB-AACF(CD/UC/HS STRT) AJKT	NP	SP
ADALIMUMAB-AACF(PS/UV STARTER) AJKT	NP	SP
ADALIMUMAB-AATY (1 PEN) AJKT	NP	SP
ADALIMUMAB-AATY (2 PEN) AJKT	NP	SP
ADALIMUMAB-AATY (2 SYRINGE) PSKT	NP	SP
ADALIMUMAB-AATY CD/UC/HS START AJKT 80 MG/0.8ML	NP	SP
ADALIMUMAB-ADAZ SOAJ	PA	SP; PA
ADALIMUMAB-ADAZ SOSY	PA	SP; PA
ADALIMUMAB-ADBM (2 PEN) AJKT	NP	SP
ADALIMUMAB-ADBM (2 SYRINGE) PSKT	NP	SP
ADALIMUMAB-FKJP (2 PEN) AJKT	NP	SP
ADALIMUMAB-FKJP (2 SYRINGE) PSKT	NP	SP
ADALIMUMAB-RYVK (1 PEN) AJKT 80 MG/0.8ML	NP	SP
ADALIMUMAB-RYVK (2 PEN) AJKT	NP	SP
ADALIMUMAB-RYVK (2 SYRINGE) PSKT	NP	SP
AMJEVITA-PED 10KG TO <15KG SOSY	NP	QL(0.058 ML daily); SP
AMJEVITA-PED 15KG TO <30KG SOSY	NP	QL(0.015 ML daily); SP
AMJEVITA SOAJ 40 MG/0.4ML	NP	QL(0.029 ML daily); SP
AMJEVITA SOAJ	NP	QL(0.058 ML daily); SP
AMJEVITA SOSY	NP	QL(0.029 ML daily); SP
CYLTEZO (2 PEN) AJKT	NP	SP
CYLTEZO (2 SYRINGE) PSKT	NP	SP
HADLIMA PUSHTOUCH SOAJ	PA	SP; PA
HADLIMA SOSY	PA	SP; PA
HULIO (2 PEN) AJKT	NP	SP
HULIO (2 SYRINGE) PSKT	NP	SP
HUMIRA (2 PEN) AJKT	PA	QL(0.072 EA daily); SP; PA
HUMIRA (2 SYRINGE) PSKT	PA	QL(0.072 EA daily); SP; PA
HUMIRA-CD/UC/HS STARTER AJKT 80 MG/0.8ML	PA	QL(0.108 EA daily); SP; PA
HUMIRA-PSORIASIS/UVEIT STARTER AJKT	PA	QL(0.108 EA daily); SP; PA

Drug Name	Drug Tier	Requirements/ Limits
HYRIMOZ-CROHNS/UC STARTER SOAJ	NP	SP
HYRIMOZ-PED>/=40KG CROHN START SOSY	NP	SP
HYRIMOZ-PLAQ PSOR/UVEIT START SOAJ	NP	SP
HYRIMOZ SOAJ 40 MG/0.4ML	NP	SP
HYRIMOZ SOSY	NP	SP
SIMLANDI (1 PEN) AJKT	NP	SP
SIMLANDI (1 SYRINGE) PSKT	NP	SP
SIMLANDI (2 PEN) AJKT	NP	SP
SIMLANDI (2 SYRINGE) PSKT	NP	SP
SIMPONI ARIA SOLN	PA	SP; PA
SIMPONI SOAJ	PA	SP; PA
SIMPONI SOSY	PA	SP; PA
YUFLYMA (1 PEN) AJKT	NP	SP
YUFLYMA (2 PEN) AJKT	NP	SP
YUFLYMA (2 SYRINGE) PSKT	NP	SP
YUFLYMA-CD/UC/HS STARTER AJKT	NP	SP
YUSIMRY	NP	SP
Antirheumatic - Enzyme Inhibitors		
OLUMIANT	PA	QL(1 EA daily); SP; PA
RINVOQ LQ SOLN	PA	QL(1 ML daily); SP; PA
RINVOQ TB24	PA	QL(1 EA daily); SP; PA
tofacitinib citrate SOLN 1 MG/ML	NP	QL(20 ML daily); SP
tofacitinib citrate TABS 5 MG, 10 MG	PA	QL(2 EA daily); SP; PA
tofacitinib citrate TB24 11 MG, 22 MG	PA	QL(1 EA daily); SP; PA
XELJANZ XR TB24 11 MG, 22 MG *(Use tofacitinib citrate)*	NP	QL(1 EA daily); SP
XELJANZ SOLN 1 MG/ML *(Use tofacitinib citrate)*	NP	QL(20 ML daily); SP
XELJANZ TABS 5 MG, 10 MG *(Use tofacitinib citrate)*	NP	QL(2 EA daily); SP
Antirheumatic Antimetabolites		
OTREXUP SOAJ 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 20 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML	P	SP
RASUVO SOAJ 7.5 MG/0.15ML, 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML	P	SP
Interleukin-1 Blockers		
ARCALYST	NP	SP
Interleukin-1 Receptor Antagonist (IL-1Ra)		
KINERET SOSY	PA	SP; PA
Interleukin-1beta Blockers		
ILARIS SOLN	NP	SP
Interleukin-6 Receptor Inhibitors		
ACTEMRA ACTPEN SOAJ	PA	SP; PA
ACTEMRA SOLN	PA	SP; PA
ACTEMRA SOSY	PA	SP; PA
AVTOZMA SOAJ SC 162 MG/0.9ML	NP	SP
AVTOZMA SOLN IV 80 MG/4ML, 200 MG/10ML, 400 MG/20ML	NP	SP
AVTOZMA SOSY SC 162 MG/0.9ML	NP	SP
KEVZARA SOAJ	NP	SP

Drug Name	Drug Tier	Requirements/ Limits
KEVZARA SOSY	NP	SP
TOFIDENCE	NP	SP
TYENNE SOAJ	NP	SP
TYENNE SOLN	NP	SP
TYENNE SOSY	NP	SP
Nonsteroidal Anti-inflammatory Agents (NSAIDs)		
ARTHROTEC TBEC *(Use diclofenac w/ misoprostol)*	NP	
CELEBREX 100 MG *(Use celecoxib)*	NP	QL(4 EA daily)
CELEBREX 50 MG *(Use celecoxib)*	NP	QL(8 EA daily)
CELEBREX 400 MG *(Use celecoxib)*	NP	QL(1 EA daily)
CELEBREX 200 MG *(Use celecoxib)*	NP	QL(2 EA daily)
celecoxib 400 MG	P	QL(1 EA daily)
celecoxib 200 MG	P	QL(2 EA daily)
celecoxib 100 MG	P	QL(4 EA daily)
celecoxib 50 MG	P	QL(8 EA daily)
COXANTO CAPS *(Use oxaprozin)*	NP	
diclofenac potassium TABS 50 MG	NP	
diclofenac sodium TB24	P	
diclofenac sodium TBEC	P	
diclofenac w/ misoprostol TBEC	NP	
etodolac CAPS	NP	
etodolac TABS	NP	
etodolac TB24	NP	
flurbiprofen TABS 100 MG	NP	
flurbiprofen TABS 50 MG	P	
ibuprofen-acetaminophen TABS	P	
ibuprofen-famotidine	NP	QL(3 EA daily)
ibuprofen CAPS	P	
ibuprofen CHEW	P	
ibuprofen SUSP 50 MG/1.25ML, 100 MG/5ML, 200 MG/10ML	P	RX/OTC
ibuprofen TABS 800 MG	P	QL(4 EA daily)
ibuprofen TABS 200 MG, 300 MG, 400 MG, 600 MG	P	
ibuprofen TABS 200 MG, 300 MG, 400 MG, 600 MG	P	
indomethacin CAPS 25 MG, 50 MG	P	
indomethacin CPCR	NP	
indomethacin SUPP	NP	
indomethacin SUSP	NP	
ketoprofen CAPS 50 MG, 75 MG	NP	
ketoprofen CP24	NP	
ketorolac tromethamine TABS	PA	QL(4 EA daily; 20 EA per 180 day(s) retail; 20 EA per 180 days mail); PA
LURBIRO TABS 100 MG *(Use flurbiprofen)*	NP	
meclofenamate sodium CAPS	NP	
mefenamic acid CAPS	NP	MP
meloxicam TABS	P	
nabumetone	P	
NAPRELAN TB24 375 MG, 500 MG *(Use naproxen sodium)*	NP	
naproxen sodium CAPS	P	
naproxen sodium TABS 220 MG	P	
naproxen sodium TABS	NP	
naproxen sodium TB24	NP	
naproxen-esomeprazole magnesium	NP	

Drug Name	Drug Tier	Requirements/ Limits
naproxen SUSP	NP	QL(200 ML per fill retail; 200 per fill mail)
naproxen TABS	P	
naproxen TBEC	P	
ORUDIS CAPS 75 MG	NP	
oxaprozin CAPS	NP	
oxaprozin TABS	NP	
piroxicam CAPS	P	
sulindac TABS	P	
TOLECTIN DS CAPS 400 MG *(Use tolmetin sodium)*	NP	
tolmetin sodium CAPS	NP	
tolmetin sodium TABS	NP	
VYSCOXA PO 10 MG/ML	NP	QL(8 ML daily)
ZYBIC SUSP 7.5 MG/5ML *(Use meloxicam)*	NP	
Phosphodiesterase 4 (PDE4) Inhibitors		
OTEZLA XR TB24 PO 75 MG	NP	QL(1 EA daily); SP
OTEZLA/OTEZLA XR INITIATION PK TBPK	NP	QL(2 EA daily); SP
OTEZLA TABS	PA	QL(2 EA daily); SP; PA
OTEZLA TBPK	PA	QL(2 EA daily); SP; PA
Selective Costimulation Modulators		
ORENCIA CLICKJECT SOAJ	PA	QL(0.143 ML daily); SP; PA
ORENCIA SOLR	PA	SP; PA
ORENCIA SOSY 125 MG/ML	PA	QL(0.143 ML daily); SP; PA
ORENCIA SOSY 50 MG/0.4ML	PA	QL(0.058 ML daily); SP; PA
ORENCIA SOSY 87.5 MG/0.7ML	PA	QL(0.1 ML daily); SP; PA
Soluble Tumor Necrosis Factor Receptor Agents		
ENBREL MINI SOCT	PA	QL(0.143 ML daily); SP; PA
ENBREL MINI SOCT	PA	QL(0.143 ML daily); PA
ENBREL SURECLICK SOAJ	PA	QL(0.143 ML daily); SP; PA
ENBREL SOLN	PA	QL(0.143 ML daily); SP; PA
ENBREL SOSY	PA	QL(0.143 ML daily); SP; PA
ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions		
Analgesic Combinations		
butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG	P	QL(4 EA daily)
butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG	P	QL(4 EA daily)
butalbital-acetaminophen TABS 50 MG-325 MG	P	
butalbital-aspirin-caffeine CAPS	P	QL(4 EA daily)
Analgesics - Sodium Channel Pain Signal Inhibitors		
JOURNAVX	P	QL(3 EA daily; 29 EA per fill retail; 29 per fill mail ; 29 EA per 60 day(s) retail; 29 EA per 60 days mail); AL(At least 18 yrs old)
Analgesics Other		
acetaminophen CAPS 500 MG	P	
acetaminophen CHEW	P	
acetaminophen LIQD 160 MG/5ML	P	
acetaminophen SOLN PO 160 MG/5ML, 325 MG/10.15ML, 650 MG/20.3ML	P	

Drug Name	Drug Tier	Requirements/ Limits
acetaminophen SUPP 120 MG, 650 MG	P	QL(12 EA per fill retail; 12 per fill mail)
acetaminophen SUSP 160 MG/5ML, 325 MG/10.15ML, 650 MG/20.3ML	P	
acetaminophen TABS 325 MG, 500 MG	P	
FEVERALL INFANTS SUPP	P	
FEVERALL JUNIOR STRENGTH SUPP	P	QL(12 EA per fill retail; 12 per fill mail)
Salicylates		
aspirin buffered (cal carb-mag carb-mag oxide)	P	
aspirin CHEW	P	
ASPIRIN SUPP 300 MG	P	
aspirin TABS 325 MG	P	
aspirin TBEC 81 MG, 325 MG	P	
diflunisal TABS	NP	
DOLOBID TABS	P	
salsalate	NP	
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions		
Opioid Agonists		
codeine sulfate TABS 30 MG	P	QL(2 EA daily); AL(At least 12 yrs old)
CODEINE SULFATE TABS	P	QL(2 EA daily); AL(At least 12 yrs old)
CONZIP CP24 *(Use tramadol hcl)*	NP	AL(At least 18 yrs old)
DISKETS TBSO 40 MG *(Use methadone hcl)*	NP	
fentanyl PT72 12 MCG/HR, 25 MCG/HR, 37.5 MCG/HR, 50 MCG/HR, 62.5 MCG/HR, 75 MCG/HR, 87.5 MCG/HR, 100 MCG/HR	PA	QL(0.34 EA daily); PA
hydrocodone bitartrate CP12	NP	QL(2 EA daily)
hydrocodone bitartrate T24A	NP	QL(1 EA daily)
HYDROMORPHONE HCL SUPP	P	QL(12 EA per fill retail; 12 per fill mail)
hydromorphone hcl TABS	P	QL(8 EA daily)
hydromorphone hcl TB24	NP	QL(1 EA daily)
HYSINGLA ER T24A 20 MG, 30 MG, 40 MG, 60 MG, 80 MG, 100 MG	NP	QL(1 EA daily)
meperidine hcl SOLN PO 50 MG/5ML	P	QL(500 ML per fill retail; 500 per fill mail)
meperidine hcl TABS 50 MG	P	QL(6 EA daily)
methadone hcl CONC	NP	
methadone hcl SOLN PO	NP	
methadone hcl TABS	NP	
methadone hcl TBSO	NP	
METHADOSE SUGAR-FREE CONC *(Use methadone hcl)*	NP	
METHADOSE CONC *(Use methadone hcl)*	NP	
morphine sulfate beads	P	QL(1 EA daily)
morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG	P	QL(2 EA daily)
morphine sulfate SOLN PO 20 MG/ML, 100 MG/5ML	P	QL(240 ML per fill retail; 240 per fill mail)
morphine sulfate SOLN PO 10 MG/5ML, 20 MG/5ML	P	QL(16.67 ML daily)

Drug Name	Drug Tier	Requirements/ Limits
morphine sulfate SUPP	P	QL(24 EA per fill retail; 24 per fill mail)
morphine sulfate TABS 15 MG	P	QL(6 EA daily)
morphine sulfate TABS 30 MG	P	
morphine sulfate TBCR	P	QL(3 EA daily)
MS CONTIN TBCR 15 MG, 30 MG, 60 MG, 200 MG *(Use morphine sulfate)*	NP	QL(3 EA daily)
oxycodone hcl CAPS	P	QL(6 EA daily)
oxycodone hcl CONC 100 MG/5ML	P	QL(6 ML daily)
oxycodone hcl SOLN	P	
oxycodone hcl TABS	P	QL(6 EA daily)
OXYCONTIN T12A	P	QL(3 EA daily)
oxymorphone hcl TB12	NP	QL(2 EA daily)
TAPENTADOL HCL ER TB12 50 MG, 100 MG, 150 MG, 200 MG, 250 MG	NP	
TAPENTADOL HCL SOLN PO 20 MG/ML	NP	
tapentadol hcl TABS 50 MG, 75 MG, 100 MG	NP	
tramadol hcl CP24 100 MG, 200 MG, 300 MG	NP	AL(At least 18 yrs old)
tramadol hcl SOLN	NP	AL(At least 18 yrs old)
TRAMADOL HCL SOLN *(Use tramadol hcl)*	NP	AL(At least 18 yrs old)
tramadol hcl TABS 50 MG	P	AL(At least 18 yrs old)
tramadol hcl TABS 25 MG, 75 MG, 100 MG	NP	AL(At least 18 yrs old)
tramadol hcl TB24	NP	AL(At least 18 yrs old)
Opioid Combinations		
acetaminophen w/ codeine SOLN	P	QL(30 ML daily); AL(At least 12 yrs old)
acetaminophen w/ codeine TABS 15 MG-300 MG, 30 MG-300 MG, 60 MG-300 MG	P	QL(6 EA daily); AL(At least 12 yrs old)
butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG	P	QL(4 EA daily); AL(At least 12 yrs old)
butalbital-aspirin-caffeine w/cod	P	QL(4 EA daily); AL(At least 12 yrs old)
hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML	P	QL(135 ML daily)
hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML	P	QL(180 ML daily)
hydrocodone-acetaminophen TABS 325 MG-10 MG	P	QL(6 EA daily)
hydrocodone-acetaminophen TABS 325 MG-5 MG	P	QL(12 EA daily)
hydrocodone-acetaminophen TABS 325 MG-7.5 MG	P	QL(8 EA daily)
oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	P	QL(6 EA daily)
PROLATE SOLN	PA	QL(20 ML daily); PA
PROLATE TABS	PA	QL(13 EA daily); PA
tramadol-acetaminophen	P	QL(12 EA daily); AL(At least 18 yrs old)
Opioid Partial Agonists		
BELBUCA FILM	NP	

Drug Name	Drug Tier	Requirements/ Limits
BRIXADI (MONTHLY) SOSY 64 MG/0.18ML, 96 MG/0.27ML, 128 MG/0.36ML	P	SP
BRIXADI (WEEKLY) SOSY	P	SP
buprenorphine hcl-naloxone hcl dihydrate FILM SL 1 MG-4 MG, 3 MG-12 MG	NP	QL(2 EA daily)
buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 2 MG-8 MG	NP	QL(3 EA daily)
buprenorphine hcl-naloxone hcl dihydrate SUBL	P	QL(3 EA daily)
buprenorphine hcl SUBL	P	QL(3 EA daily)
buprenorphine PTWK	NP	
BUTRANS PTWK *(Use buprenorphine)*	P	
SUBLOCADE SOSY	P	SP
SUBOXONE FILM SL 1 MG-4 MG, 3 MG-12 MG *(Use buprenorphine hcl-naloxone hcl dihydrate)*	P	QL(2 EA daily)
SUBOXONE FILM SL 0.5 MG-2 MG, 2 MG-8 MG *(Use buprenorphine hcl-naloxone hcl dihydrate)*	P	QL(3 EA daily)
ZUBSOLV SUBL 0.18 MG-0.7 MG, 0.36 MG-1.4 MG, 0.71 MG-2.9 MG, 1.4 MG-5.7 MG	NP	QL(3 EA daily)
ZUBSOLV SUBL 2.1 MG-8.6 MG	NP	QL(2 EA daily)
ZUBSOLV SUBL 2.9 MG-11.4 MG	NP	QL(1 EA daily)
ANDROGENS-ANABOLIC - Drugs to Regulate Hormones		
Androgens		
ANDROGEL PUMP GEL TD *(Use testosterone)*	NP	
JATENZO CAPS	PA	PA
methyltestosterone TABS	P	
NATESTO GEL NA	NP	
TESTIM GEL TD *(Use testosterone)*	NP	
testosterone cypionate SOLN IM 200 MG/ML	P	QL(0.1429 ML daily)
testosterone cypionate SOLN IM 100 MG/ML	P	QL(0.2858 ML daily)
TESTOSTERONE CYPIONATE SOLN IM 200 MG/ML	P	QL(0.1429 ML daily)
testosterone enanthate SOLN IM	P	QL(0.1429 ML daily)
testosterone GEL TD 1 %, 10 MG/ACT, 20.25 MG/1.25GM, 25 MG/2.5GM, 40.5 MG/2.5GM, 50 MG/5GM	NP	
testosterone GEL TD 1 %, 1.62 %	PA	PA
testosterone SOLN	NP	
TLANDO CAPS	PA	PA
VOGELXO PUMP GEL TD *(Use testosterone)*	NP	
VOGELXO GEL TD *(Use testosterone)*	NP	
XYOSTED SOAJ	PA	PA
ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching		
Intrarectal Steroids		
budesonide (intrarectal)	NP	
hydrocortisone (intrarectal)	P	QL(420 ML per fill retail; 420 per fill mail)
Rectal Combinations		
HEMORRHOIDAL 0.25 %-85.5 %-3 %	P	QL(12 EA per fill retail; 12 per fill mail)
lidocaine-hydrocortisone acetate (rectal) CREA EX	NP	

Drug Name	Drug Tier	Requirements/ Limits
SB HEMORRHOID 0.25 %-71.9 %-14 %-3 %	P	QL(30 GM per fill retail; 30 per fill mail)
Rectal Local Anesthetics		
pramoxine hcl (rectal) FOAM EX	P	QL(15 GM per fill retail; 15 per fill mail)
PROCTOFOAM FOAM EX 1 %	P	QL(15 GM per fill retail; 15 per fill mail)
Rectal Steroids		
hydrocortisone (rectal) EX	P	
ANTACIDS		
Antacid Combinations		
alum & mag hydrox-simethicone CHEW	P	
alum & mag hydrox-simethicone LIQD	P	QL(24 ML daily)
alum & mag hydrox-simethicone LIQD 400 MG/5ML-40 MG/5ML-400 MG/5ML	P	
alum & mag hydrox-simethicone SUSP 2400 MG/30ML-240 MG/30ML-2400 MG/30ML, 400 MG/5ML-40 MG/5ML-400 MG/5ML, 400 MG/5ML-400 MG/5ML-40 MG/5ML, 800 MG/10ML-80 MG/10ML-800 MG/10ML	P	
Antacids - Aluminum Salts		
ALUMINUM HYDROXIDE GEL SUSP	P	
Antacids - Bicarbonate		
sodium bicarbonate (antacid) TABS 325 MG, 650 MG	P	QL(16.54 EA daily)
Antacids - Calcium Salts		
calcium carbonate (antacid) CHEW 500 MG, 750 MG, 1000 MG	P	
Antacids - Magnesium Salts		
magnesium oxide TABS 400 MG	P	
ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		
Anti-infective Agents - Misc.		
metronidazole TABS	P	
trimethoprim TABS	P	
Anti-infective Misc. - Combinations		
methenamine-hyosc-methylene blue-sod phos-phenyl sal TABS 81.6 MG	P	
sulfamethoxazole-trimethoprim SUSP	P	
sulfamethoxazole-trimethoprim TABS	P	
URETRON D/S TABS 81.6 MG	P	
Glycopeptides		
vancomycin hcl CAPS 250 MG	P	QL(8 EA daily)
vancomycin hcl CAPS 125 MG	P	QL(4 EA daily)
vancomycin hcl SOLR PO 25 MG/ML, 50 MG/ML, 250 MG/5ML	P	QL(300 ML per fill retail; 300 per fill mail)
vancomycin hcl SOLR IV 500 MG	P	QL(0.467 EA daily)
vancomycin hcl SOLR IV 1 GM	P	QL(14 EA per fill retail; 14 per fill mail)
VANCOMYCIN HCL SOLR IV 1 GM	P	QL(14 EA per fill retail; 14 per fill mail)
VANCOMYCIN HCL SOLR IV 500 MG	P	QL(0.467 EA daily)
Leprostatics		

Drug Name	Drug Tier	Requirements/ Limits
dapsone	P	
Lincosamides		
clindamycin hcl 150 MG, 300 MG	P	
clindamycin palmitate hydrochloride	P	QL(100 ML per fill retail; 100 per fill mail)
Monobactams		
CAYSTON	PA	AL(At least 7 yrs old); SP; PA
Oxazolidinones		
linezolid SOLN	PA	PA
linezolid SUSR	PA	PA
linezolid TABS	PA	PA
SIVEXTRO SOLR	PA	PA
SIVEXTRO TABS	PA	PA
ZYVOX SUSR *(Use linezolid)*	PA	PA
ZYVOX TABS *(Use linezolid)*	PA	PA
Urinary Anti-infectives		
methenamine mandelate	P	
nitrofurantoin 25 MG/5ML	PA	PA
nitrofurantoin macrocrystal 50 MG, 100 MG	P	
nitrofurantoin monohyd macro	P	
ANTIANGINAL AGENTS - Drugs to Treat Chest Pain		
Nitrates		
isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG	P	
isosorbide mononitrate TABS	P	QL(2 EA daily)
isosorbide mononitrate TB24	P	QL(1 EA daily)
NITRO-TIME CPCR 2.5 MG, 6.5 MG, 9 MG	P	
nitroglycerin OINT	P	
nitroglycerin PT24	P	
nitroglycerin SUBL	P	
ANTIANXIETY AGENTS - Drugs to Treat Anxiety		
Antianxiety Agents - Misc.		
buspirone hcl 5 MG, 10 MG	P	QL(6 EA daily)
buspirone hcl 7.5 MG, 30 MG	P	QL(3 EA daily)
buspirone hcl 15 MG	P	QL(4 EA daily)
droperidol SOLN 2.5 MG/ML	P	
hydroxyzine hcl SOLN 25 MG/ML, 50 MG/ML	P	
hydroxyzine hcl SYRP	P	
hydroxyzine hcl TABS	P	
hydroxyzine pamoate CAPS	P	
meprobamate	P	
Benzodiazepines		
alprazolam TABS	P	QL(4 EA daily)
chlordiazepoxide hcl CAPS	P	QL(4 EA daily)
clorazepate dipotassium TABS	P	
diazepam CONC	P	
diazepam SOLN IJ 5 MG/ML, 10 MG/2ML	P	
diazepam SOLN PO 5 MG/5ML	P	
DIAZEPAM SOLN IJ 5 MG/ML	P	
diazepam TABS	P	AL(At least 18 yrs old)
lorazepam CONC	P	
lorazepam SOLN	P	

Drug Name	Drug Tier	Requirements/ Limits
LORAZEPAM SOLN 2 MG/ML	P	
lorazepam TABS 0.5 MG, 2 MG	P	QL(3 EA daily)
lorazepam TABS 1 MG	P	QL(4 EA daily)
oxazepam CAPS 10 MG, 30 MG	P	QL(4 EA daily)
ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
Antiarrhythmics Type I-A		
disopyramide phosphate CAPS	P	
NORPACE CR CP12 150 MG	P	
quinidine gluconate TBCR	P	
quinidine sulfate TABS	P	
Antiarrhythmics Type I-B		
mexiletine hcl	P	
Antiarrhythmics Type I-C		
flecainide acetate	P	
propafenone hcl TABS	P	
Antiarrhythmics Type III		
amiodarone hcl TABS 200 MG	P	
dofetilide	P	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions		
Anti-Inflammatory Agents		
cromolyn sodium NEBU	P	QL(8 ML daily)
Antiasthmatic - Monoclonal Antibodies		
CINQAIR	NP	AL(At least 18 yrs old); SP
EXDENSUR SOSY SC 100 MG/ML	NP	Maximum 180 day supply allowed; QL(1 ML per 180 day(s) retail; 1 ML per 180 days mail); AL(At least 12 yrs old); SP
FASENRA PEN SOAJ	PA	SP; PA
FASENRA SOSY	PA	SP; PA
NUCALA SOAJ	PA	AL(At least 6 yrs old); SP; PA
NUCALA SOLR	PA	AL(At least 6 yrs old); SP; PA
NUCALA SOSY	PA	AL(At least 6 yrs old); SP; PA
OMLYCLO SOSY SC 75 MG/0.5ML, 150 MG/ML, 300 MG/2ML	NP	QL(0.215 ML daily); AL(At least 6 yrs old)
TEZSPIRE SOAJ	NP	QL(0.07 ML daily); AL(At least 12 yrs old); SP
TEZSPIRE SOSY	NP	QL(0.07 ML daily); AL(At least 12 yrs old); SP
XOLAIR SOAJ 150 MG/ML	PA	QL(0.215 ML daily); AL(At least 6 yrs old); SP; PA
XOLAIR SOAJ 75 MG/0.5ML, 300 MG/2ML	PA	QL(0.215 ML daily); SP; PA
XOLAIR SOLR	NP	QL(0.215 EA daily); AL(At least 6 yrs old); SP
XOLAIR SOSY	PA	QL(0.215 ML daily); AL(At least 6 yrs old); SP; PA
Bronchodilators - Anticholinergics		

Drug Name	Drug Tier	Requirements/ Limits
ATROVENT HFA 17 MCG/ACT *(Use ipratropium bromide hfa)*	P	
INCRUSE ELLIPTA 62.5 MCG/ACT *(Use umeclidinium bromide)*	P	MP
ipratropium bromide hfa 17 MCG/ACT	NP	
ipratropium bromide SOLN 0.02 %	P	
SPIRIVA HANDIHALER CAPS IN *(Use tiotropium bromide)*	P	MP
SPIRIVA RESPIMAT AERS IN	P	MP
tiotropium bromide CAPS IN 18 MCG	NP	MP
TUDORZA PRESSAIR	NP	MP
umeclidinium bromide 62.5 MCG/INH	NP	
YUPELRI IN 175 MCG/3ML	NP	MP
Leukotriene Modulators		
montelukast sodium CHEW	P	
montelukast sodium PACK	P	
montelukast sodium TABS	P	
SINGULAIR CHEW 5 MG *(Use montelukast sodium)*	NP	
SINGULAIR TABS *(Use montelukast sodium)*	NP	
zafirlukast	P	
zileuton TB12	NP	
ZYFLO TABS	NP	
Phosphodiesterase 3 & 4 (PDE3 & PDE4) Inhibitors		
OHTUVAYRE	NP	QL(5 ML daily); AL(At least 18 yrs old); SP
Selective Phosphodiesterase 4 (PDE4) Inhibitors		
DALIRESP *(Use roflumilast)*	NP	QL(1 EA daily)
roflumilast	PA	QL(1 EA daily); PA
Steroid Inhalants		
ALVESCO	NP	MP
ARNUITY ELLIPTA 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT *(Use fluticasone furoate (inhalation))*	P	MP
ASMANEX (120 METERED DOSES) AEPB	P	MP
ASMANEX (14 METERED DOSES) AEPB	P	MP
ASMANEX (30 METERED DOSES) AEPB	P	MP
ASMANEX (60 METERED DOSES) AEPB	P	MP
ASMANEX HFA AERO	P	MP
beclomethasone dipropionate 40 MCG/ACT, 80 MCG/ACT	NP	MP
budesonide (inhalation) SUSP	P	AL(At least 1 yrs old - Up to 8 yrs old); MP
fluticasone furoate (inhalation) 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT	NP	MP
fluticasone propionate (inhalation) AEPB	P	QL(2 EA daily); MP
fluticasone propionate hfa 110 MCG/ACT, 220 MCG/ACT	P	QL(0.4 GM daily); MP
fluticasone propionate hfa 44 MCG/ACT	P	QL(0.36 GM daily); MP
PULMICORT FLEXHALER AEPB	P	MP
PULMICORT FLEXHALER AEPB	P	MP

Drug Name	Drug Tier	Requirements/ Limits
PULMICORT SUSP *(Use budesonide (inhalation))*	NP	AL(At least 1 yrs old - Up to 8 yrs old); MP
QVAR REDIHALER	NP	MP
Sympathomimetics		
ADVAIR DISKUS AEPB *(Use fluticasone-salmeterol)*	P	MP
ADVAIR HFA AERO *(Use fluticasone-salmeterol)*	P	MP
AIRSUPRA	NP	QL(1.07 GM daily)
albuterol sulfate AERS	P	QL(1.2 GM daily)
albuterol sulfate AERS	NP	QL(1.2 GM daily)
albuterol sulfate AERS	P	QL(0.447 GM daily)
albuterol sulfate AERS	P	QL(0.567 GM daily)
albuterol sulfate NEBU	P	QL(12 ML daily)
albuterol sulfate NEBU 2.5 MG/0.5ML	P	QL(2 EA daily)
albuterol sulfate SYRP	P	
albuterol sulfate TABS	P	
ANORO ELLIPTA 25 MCG/ACT-62.5 MCG/ACT *(Use umeclidinium-vilanterol)*	P	MP
arformoterol tartrate	NP	MP
BEVESPI AEROSPHERE	NP	MP
BREO ELLIPTA *(Use fluticasone furoate-vilanterol)*	P	MP
BREO ELLIPTA	P	MP
BREZTRI AEROSPHERE	NP	MP
BROVANA *(Use arformoterol tartrate)*	NP	MP
budesonide-formoterol fumarate dihydrate	NP	MP
COMBIVENT RESPIMAT AERS	P	

Drug Name	Drug Tier	Requirements/ Limits
DUAKLIR PRESSAIR	NP	MP
DULERA	P	MP
fluticasone furoate-vilanterol	NP	MP
fluticasone-salmeterol AEPB	NP	MP
fluticasone-salmeterol AERO	NP	MP
formoterol fumarate NEBU	NP	MP
ipratropium-albuterol SOLN	P	QL(12 ML daily)
levalbuterol hcl 1.25 MG/0.5ML	NP	QL(3 EA daily)
levalbuterol hcl	PA	QL(9.6 ML daily); PA
levalbuterol tartrate	PA	QL(1 GM daily); PA
PERFOROMIST NEBU *(Use formoterol fumarate)*	NP	MP
PROAIR RESPICLICK AEPB	NP	QL(0.067 EA daily)
SEREVENT DISKUS	P	QL(2 EA daily); MP
STIOLTO RESPIMAT	P	MP
STRIVERDI RESPIMAT	P	MP
SYMBICORT *(Use budesonide-formoterol fumarate dihydrate)*	P	MP
terbutaline sulfate TABS	P	
TRELEGY ELLIPTA	NP	MP
umeclidinium-vilanterol	NP	MP
VENTOLIN HFA AERS *(Use albuterol sulfate)*	NP	QL(0.534 GM daily)
VENTOLIN HFA AERS *(Use albuterol sulfate)*	NP	QL(1.2 GM daily)
XOPENEX HFA *(Use levalbuterol tartrate)*	NP	QL(1 GM daily)
Xanthines		
THEO-24 CP24	P	
theophylline ELIX	P	

Drug Name	Drug Tier	Requirements/ Limits
theophylline SOLN	P	QL(475 ML per fill retail; 475 per fill mail)
theophylline TB12	P	
theophylline TB24	P	
ANTICOAGULANTS - Blood Thinners		
Coumarin Anticoagulants		
warfarin sodium TABS	P	
Direct Factor Xa Inhibitors		
ELIQUIS (1.5 MG PACK) TBSO PO	NP	
ELIQUIS (2 MG PACK) TBSO PO	NP	
ELIQUIS DVT/PE STARTER PACK TBPK	P	
ELIQUIS CPSP PO 0.15 MG	NP	
ELIQUIS TABS	P	
ELIQUIS TBSO PO 0.5 MG	NP	
rivaroxaban SUSR 1 MG/ML	NP	
rivaroxaban TABS 2.5 MG	NP	
SAVAYSA	NP	AL(At least 18 yrs old)
XARELTO STARTER PACK TBPK	P	
XARELTO SUSR 1 MG/ML *(Use rivaroxaban)*	NP	
XARELTO TABS	P	
XARELTO TABS 2.5 MG, 10 MG, 15 MG, 20 MG *(Use rivaroxaban)*	P	
Heparins And Heparinoid-Like Agents		
ARIXTRA *(Use fondaparinux sodium)*	NP	SP
enoxaparin sodium SOLN IJ 300 MG/3ML	P	SP
enoxaparin sodium SOSY 30 MG/0.3ML	P	QL(18 ML per fill retail; 18 per fill mail); SP
enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML	P	QL(48 ML per fill retail; 48 per fill mail); SP
enoxaparin sodium SOSY 40 MG/0.4ML	P	QL(24 ML per fill retail; 24 per fill mail); SP
enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML	P	QL(60 ML per fill retail; 60 per fill mail); SP
enoxaparin sodium SOSY 60 MG/0.6ML	P	QL(36 ML per fill retail; 36 per fill mail); SP
fondaparinux sodium	P	SP
FRAGMIN SOLN 10000 UNIT/4ML, 95000 UNIT/3.8ML	P	SP
FRAGMIN SOSY	P	SP
heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/0.5ML, 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	P	
LOVENOX SOLN IJ 300 MG/3ML *(Use enoxaparin sodium)*	NP	SP
LOVENOX SOSY 100 MG/ML, 150 MG/ML *(Use enoxaparin sodium)*	NP	QL(60 ML per fill retail; 60 per fill mail); SP
LOVENOX SOSY 60 MG/0.6ML *(Use enoxaparin sodium)*	NP	QL(36 ML per fill retail; 36 per fill mail); SP
LOVENOX SOSY 40 MG/0.4ML *(Use enoxaparin sodium)*	NP	QL(24 ML per fill retail; 24 per fill mail); SP
LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML *(Use enoxaparin sodium)*	NP	QL(48 ML per fill retail; 48 per fill mail); SP
LOVENOX SOSY 30 MG/0.3ML *(Use enoxaparin sodium)*	NP	QL(18 ML per fill retail; 18 per fill mail); SP
Thrombin Inhibitors		
dabigatran etexilate mesylate CAPS	NP	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
PRADAXA CAPS *(Use dabigatran etexilate mesylate)*	P	QL(2 EA daily)
PRADAXA PACK	NP	QL(2 EA daily); SP
ANTICONVULSANTS - Drugs to Treat Seizures		
AMPA Glutamate Receptor Antagonists		
FYCOMPA SUSP 0.5 MG/ML *(Use perampanel)*	NP	
FYCOMPA TABS 2 MG, 4 MG, 6 MG, 8 MG, 10 MG, 12 MG *(Use perampanel)*	NP	
perampanel SUSP 0.5 MG/ML	NP	
perampanel TABS 2 MG, 4 MG, 6 MG, 8 MG, 10 MG, 12 MG	P	
Anticonvulsants - Benzodiazepines		
clobazam SUSP	P	
clobazam TABS	P	
clonazepam TABS	P	AL(At least 18 yrs old)
CLONAZEPAM TABS 0.25 MG	NP	
clonazepam TBDP	P	
diazepam (anticonvulsant) GEL	P	
KLONOPIN TABS *(Use clonazepam)*	NP	AL(At least 18 yrs old)
LIBERVANT FILM	NP	AL(At least 2 yrs old - Up to 5 yrs old)
NAYZILAM	PA	PA
ONFI SUSP *(Use clobazam)*	NP	
ONFI TABS *(Use clobazam)*	NP	
SYMPAZAN FILM	NP	
VALTOCO 10 MG DOSE LIQD	PA	PA
VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML	PA	PA
VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML	PA	PA
VALTOCO 5 MG DOSE LIQD	PA	PA
Anticonvulsants - Misc.		
APTIOM 200 MG, 400 MG, 600 MG, 800 MG *(Use eslicarbazepine acetate)*	NP	
BANZEL SUSP *(Use rufinamide)*	NP	SP
BANZEL TABS *(Use rufinamide)*	NP	SP
brivaracetam SOLN PO 10 MG/ML	NP	SP
brivaracetam TABS 10 MG, 25 MG, 50 MG, 75 MG, 100 MG	NP	SP
BRIVIACT SOLN PO 10 MG/ML *(Use brivaracetam)*	NP	SP
BRIVIACT TABS 10 MG, 25 MG, 50 MG, 75 MG, 100 MG *(Use brivaracetam)*	NP	SP
carbamazepine CHEW	P	
carbamazepine CP12	P	
carbamazepine SUSP	P	
carbamazepine TABS	P	
carbamazepine TB12	P	
CARBATROL CP12 *(Use carbamazepine)*	NP	
DIACOMIT CAPS	NP	SP
DIACOMIT PACK	NP	SP
ELEPSIA XR TB24	NP	
EPIDIOLEX	PA	SP; PA
EPRONTIA SOLN 25 MG/ML *(Use topiramate)*	NP	
eslicarbazepine acetate 200 MG, 400 MG, 600 MG, 800 MG	NP	

Drug Name	Drug Tier	Requirements/ Limits
FINTEPLA	NP	SP
gabapentin CAPS	P	
gabapentin SOLN	P	
gabapentin TABS 600 MG, 800 MG	P	
KEPPRA XR TB24 *(Use levetiracetam)*	NP	
KEPPRA SOLN PO 100 MG/ML *(Use levetiracetam)*	NP	
KEPPRA TABS *(Use levetiracetam)*	NP	
lacosamide SOLN IV 200 MG/20ML	P	
lacosamide TABS	P	
LAMICTAL ODT KIT *(Use lamotrigine)*	NP	
LAMICTAL ODT TBDP *(Use lamotrigine)*	NP	
LAMICTAL STARTER KIT 25 MG *(Use lamotrigine)*	NP	
LAMICTAL XR KIT	NP	
LAMICTAL XR TB24 *(Use lamotrigine)*	NP	
LAMICTAL CHEW *(Use lamotrigine)*	NP	
LAMICTAL TABS *(Use lamotrigine)*	NP	
lamotrigine CHEW	P	
lamotrigine KIT 25 MG	P	
lamotrigine TABS	P	
lamotrigine TB24	P	
lamotrigine TBDP	P	
levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML	P	
levetiracetam SOLN IV 500 MG/5ML	P	
levetiracetam TABS	P	
levetiracetam TB24	P	
levetiracetam TB3D 250 MG, 500 MG	NP	

Drug Name	Drug Tier	Requirements/ Limits
LYRICA CAPS *(Use pregabalin)*	P	
LYRICA SOLN *(Use pregabalin)*	P	
MOTPOLY XR CP24	NP	
NEURONTIN CAPS *(Use gabapentin)*	P	
NEURONTIN SOLN *(Use gabapentin)*	P	
NEURONTIN TABS *(Use gabapentin)*	P	
oxcarbazepine SUSP	P	
oxcarbazepine TABS	P	
oxcarbazepine TB24	NP	
OXTELLAR XR TB24 *(Use oxcarbazepine)*	NP	
pregabalin CAPS	NP	
pregabalin SOLN	NP	
primidone	P	
rufinamide SUSP	P	SP
rufinamide TABS	P	SP
SPRITAM TB3D 250 MG, 500 MG, 750 MG, 1000 MG *(Use levetiracetam)*	NP	
SPRITAM TB3D	NP	
SUBVENITE SUSP PO 10 MG/ML	NP	
TEGRETOL-XR TB12 *(Use carbamazepine)*	NP	
TEGRETOL SUSP *(Use carbamazepine)*	NP	
TEGRETOL TABS *(Use carbamazepine)*	NP	
TOPAMAX SPRINKLE CPSP *(Use topiramate)*	NP	
TOPAMAX TABS 25 MG, 50 MG, 200 MG *(Use topiramate)*	NP	
TOPAMAX TABS 100 MG *(Use topiramate)*	NP	QL(300 EA per fill retail; 300 per fill mail)

Drug Name	Drug Tier	Requirements/ Limits
topiramate CP24	NP	
topiramate CPSP 50 MG	NP	
topiramate CPSP 15 MG, 25 MG	P	
topiramate CS24	NP	
topiramate SOLN 25 MG/ML	NP	
topiramate TABS 100 MG	P	QL(300 EA per fill retail; 300 per fill mail)
topiramate TABS 25 MG, 50 MG, 200 MG	P	
TRILEPTAL SUSP *(Use oxcarbazepine)*	NP	
TRILEPTAL TABS *(Use oxcarbazepine)*	NP	
TROKENDI XR CP24 *(Use topiramate)*	NP	
VIMPAT SOLN PO 10 MG/ML *(Use lacosamide)*	NP	
VIMPAT TABS *(Use lacosamide)*	NP	
ZONISADE SUSP	NP	
zonisamide CAPS	P	
ZTALMY	PA	QL(36 ML daily); AL(At least 2 yrs old); PA
Carbamates		
felbamate SUSP	NP	
felbamate TABS	NP	
FELBATOL TABS *(Use felbamate)*	P	
XCOPRI (250 MG DAILY DOSE) TBPK	NP	
XCOPRI (350 MG DAILY DOSE) TBPK	NP	
XCOPRI TABS	NP	
XCOPRI TBPK	NP	
GABA Modulators		

Drug Name	Drug Tier	Requirements/ Limits
SABRIL PACK *(Use vigabatrin)*	NP	SP
SABRIL TABS *(Use vigabatrin)*	NP	SP
tiagabine hcl	NP	
vigabatrin PACK	NP	SP
vigabatrin TABS	NP	SP
VIGAFYDE SOLN	NP	SP
Hydantoins		
CEREBYX 500 MG PE/10ML *(Use fosphenytoin sodium)*	P	QL(100 ML per fill retail; 100 per fill mail)
CEREBYX 100 MG PE/2ML *(Use fosphenytoin sodium)*	P	
DILANTIN	P	
DILANTIN *(Use phenytoin sodium extended)*	P	
DILANTIN INFATABS CHEW *(Use phenytoin)*	P	
DILANTIN-125 SUSP *(Use phenytoin)*	P	
fosphenytoin sodium 500 MG PE/10ML	P	QL(100 ML per fill retail; 100 per fill mail)
fosphenytoin sodium 100 MG PE/2ML	P	
phenytoin sodium extended 200 MG, 300 MG	NP	
phenytoin sodium extended 100 MG, 200 MG, 300 MG	P	
phenytoin sodium SOLN	P	
phenytoin CHEW	P	
phenytoin SUSP 125 MG/5ML	P	
Succinimides		
CELONTIN *(Use methsuximide)*	P	

Drug Name	Drug Tier	Requirements/ Limits
ethosuximide CAPS	P	
ethosuximide SOLN	P	
methsuximide	NP	
ZARONTIN CAPS *(Use ethosuximide)*	NP	
ZARONTIN SOLN *(Use ethosuximide)*	NP	
Valproic Acid		
DEPAKOTE ER TB24 *(Use divalproex sodium)*	NP	
DEPAKOTE SPRINKLES CSDR *(Use divalproex sodium)*	NP	
DEPAKOTE TBEC *(Use divalproex sodium)*	NP	
divalproex sodium CSDR	P	
divalproex sodium TB24	P	
divalproex sodium TBEC	P	
valproate sodium SOLN PO 250 MG/5ML, 500 MG/10ML	P	
valproic acid CAPS	P	
ANTIDEPRESSANTS - Drugs to Treat Depression		
Alpha-2 Receptor Antagonists (Tetracyclics)		
mirtazapine TABS	P	AL(At least 18 yrs old)
mirtazapine TBDP	P	AL(At least 18 yrs old)
REMERON SOLTAB TBDP *(Use mirtazapine)*	NP	AL(At least 18 yrs old)
REMERON TABS 15 MG, 30 MG *(Use mirtazapine)*	NP	AL(At least 18 yrs old)
Antidepressant Combinations		
AUVELITY	NP	AL(At least 18 yrs old)
AUVELITY TITRATION PACK PO	NP	AL(At least 18 yrs old)
Antidepressants - Misc.		
bupropion hcl TABS	P	AL(At least 18 yrs old)
bupropion hcl TB12	P	AL(At least 18 yrs old)
bupropion hcl TB24 150 MG, 300 MG	P	AL(At least 18 yrs old)
bupropion hcl TB24 300 MG, 450 MG	NP	AL(At least 18 yrs old)
WELLBUTRIN SR TB12 *(Use bupropion hcl)*	NP	AL(At least 18 yrs old)
GABA Receptor Modulator - Neuroactive Steroid		
ZURZUVAE	P	AL(At least 18 yrs old); SP
Monoamine Oxidase Inhibitors (MAOIs)		
EMSAM	P	
MARPLAN	P	
phenelzine sulfate	P	
tranylcypromine sulfate	P	
N-Methyl-D-aspartic acid (NMDA) Receptor Antagonists		
SPRAVATO (56 MG DOSE)	PA	AL(At least 18 yrs old); SP; PA
SPRAVATO (84 MG DOSE)	PA	AL(At least 18 yrs old); SP; PA
Selective Serotonin Reuptake Inhibitors (SSRIs)		
CELEXA TABS *(Use citalopram hydrobromide)*	NP	AL(At least 18 yrs old)
citalopram hydrobromide CAPS 30 MG	P	AL(At least 18 yrs old)
CITALOPRAM HYDROBROMIDE CAPS 30 MG *(Use citalopram hydrobromide)*	P	AL(At least 18 yrs old)
citalopram hydrobromide SOLN	P	AL(At least 18 yrs old)
citalopram hydrobromide TABS	P	AL(At least 18 yrs old)
ESCITALOPRAM OXALATE CAPS PO 15 MG	NP	AL(At least 18 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
escitalopram oxalate SOLN	P	AL(At least 18 yrs old)
escitalopram oxalate TABS	P	AL(At least 18 yrs old)
fluoxetine hcl CAPS	P	AL(At least 18 yrs old)
fluoxetine hcl CPDR	P	AL(At least 18 yrs old)
fluoxetine hcl SOLN	P	AL(At least 18 yrs old)
fluoxetine hcl TABS	P	AL(At least 18 yrs old)
fluvoxamine maleate CP24	NP	AL(At least 18 yrs old)
fluvoxamine maleate TABS	P	AL(At least 18 yrs old)
LEXAPRO TABS *(Use escitalopram oxalate)*	NP	AL(At least 18 yrs old)
paroxetine hcl SUSP	P	AL(At least 18 yrs old)
paroxetine hcl TABS	P	AL(At least 18 yrs old)
paroxetine hcl TB24	NP	AL(At least 18 yrs old)
PAXIL CR TB24 *(Use paroxetine hcl)*	NP	AL(At least 18 yrs old)
PAXIL TABS *(Use paroxetine hcl)*	NP	AL(At least 18 yrs old)
PROZAC CAPS *(Use fluoxetine hcl)*	NP	AL(At least 18 yrs old)
sertraline hcl CAPS 150 MG, 200 MG	P	AL(At least 18 yrs old)
SERTRALINE HCL CAPS 150 MG, 200 MG *(Use sertraline hcl)*	P	AL(At least 18 yrs old)
sertraline hcl CONC	P	AL(At least 18 yrs old)
sertraline hcl TABS	P	AL(At least 18 yrs old)
ZOLOFT CONC *(Use sertraline hcl)*	NP	AL(At least 18 yrs old)
ZOLOFT TABS *(Use sertraline hcl)*	NP	AL(At least 18 yrs old)
Serotonin Modulators		
EXXUA TITRATION PACK TB24 PO 18.2 MG	NP	AL(At least 18 yrs old)
EXXUA TB24 PO 18.2 MG, 36.3 MG, 54.5 MG, 72.6 MG	NP	AL(At least 18 yrs old)
nefazodone hcl	NP	AL(At least 18 yrs old)
RALDESY SOLN PO 10 MG/ML	NP	AL(At least 18 yrs old)
trazodone hcl TABS	P	AL(At least 18 yrs old)
TRAZODONE HCL TABS 25 MG, 75 MG	NP	AL(At least 18 yrs old)
TRINTELLIX	NP	AL(At least 18 yrs old)
VIIBRYD TABS *(Use vilazodone hcl)*	NP	AL(At least 18 yrs old)
vilazodone hcl TABS	P	AL(At least 18 yrs old)
Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)		
DESVENLAFAXINE ER	NP	AL(At least 18 yrs old)
desvenlafaxine succinate	P	AL(At least 18 yrs old)
DRIZALMA SPRINKLE CSDR	NP	AL(At least 18 yrs old)
duloxetine hcl CPEP	P	AL(At least 18 yrs old)
DULOXETINE HCL CPEP 80 MG, 90 MG, 120 MG	NP	AL(At least 18 yrs old)
EFFEXOR XR CP24 *(Use venlafaxine hcl)*	NP	AL(At least 18 yrs old)
FETZIMA TITRATION C4PK	NP	AL(At least 18 yrs old)
FETZIMA CP24	NP	AL(At least 18 yrs old)
PRISTIQ *(Use desvenlafaxine succinate)*	NP	AL(At least 18 yrs old)
VENLAFAXINE BESYLATE ER	NP	AL(At least 18 yrs old)
venlafaxine hcl CP24	P	AL(At least 18 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
venlafaxine hcl TABS	P	AL(At least 18 yrs old)
venlafaxine hcl TB24	P	AL(At least 18 yrs old)
Tricyclic Agents		
amitriptyline hcl TABS	P	
amoxapine	P	
clomipramine hcl	P	
desipramine hcl TABS 10 MG, 50 MG, 75 MG, 100 MG, 150 MG	P	
desipramine hcl TABS 25 MG	P	QL(2 EA daily)
doxepin hcl CAPS	P	
doxepin hcl CONC	P	
imipramine hcl TABS	P	
imipramine pamoate	P	
nortriptyline hcl CAPS	P	
nortriptyline hcl SOLN	P	QL(20 ML daily)
protriptyline hcl	P	
trimipramine maleate CAPS	P	
ANTIDIABETICS - Drugs to Regulate Blood Sugar		
Alpha-Glucosidase Inhibitors		
acarbose	P	MP
miglitol	P	MP
Antidiabetic - Amylin Analogs		
SYMLINPEN 120 SOPN	PA	MP; PA
SYMLINPEN 60 SOPN	PA	MP; PA
Antidiabetic Combinations		
ACTOPLUS MET TABS 850 MG-15 MG *(Use pioglitazone hcl-metformin hcl)*	NP	MP
alogliptin-metformin hcl	NP	MP
alogliptin-pioglitazone 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG	NP	MP
dapagliflozin-metformin hcl TB24 PO 1000 MG-10 MG, 1000 MG-5 MG	NP	MP
dapagliflozin-saxagliptin	NP	MP
DUETACT *(Use pioglitazone hcl-glimepiride)*	NP	MP
glipizide-metformin hcl	NP	MP
glyburide-metformin	NP	MP
GLYXAMBI	P	MP
INVOKAMET XR TB24	NP	MP
INVOKAMET TABS	NP	MP
JANUMET XR TB24 1000 MG-100 MG, 1000 MG-50 MG, 500 MG-50 MG *(Use sitagliptin phosphate-metformin hcl)*	NP	MP
JANUMET TABS 1000 MG-50 MG, 500 MG-50 MG *(Use sitagliptin phosphate-metformin hcl)*	NP	MP
JENTADUETO XR TB24	P	MP
JENTADUETO TABS	P	MP
pioglitazone hcl-glimepiride	NP	MP
pioglitazone hcl-metformin hcl TABS	NP	MP
saxagliptin-metformin hcl	NP	MP
SEGLUROMET	NP	MP
sitagliptin free base-metformin hcl TABS 1000 MG-50 MG, 500 MG-50 MG	NP	MP
sitagliptin free base-metformin hcl TB24	NP	MP
sitagliptin phosphate-metformin hcl TABS	NP	MP
sitagliptin phosphate-metformin hcl TB24	NP	MP

Drug Name	Drug Tier	Requirements/ Limits
SOLIQUA	NP	QL(0.6 ML daily); AL(At least 18 yrs old); MP
STEGLUJAN	NP	MP
SYNJARDY XR TB24	P	MP
SYNJARDY TABS	P	MP
TRIJARDY XR	NP	MP
XIGDUO XR TB24 PO	P	MP
XIGDUO XR TB24 PO *(Use dapagliflozin-metformin hcl)*	P	MP
XULTOPHY	NP	QL(0.5 ML daily); AL(At least 18 yrs old); MP
ZITUVIMET XR TB24	P	MP
ZITUVIMET TABS 1000 MG-50 MG, 500 MG-50 MG *(Use sitagliptin free base-metformin hcl)*	P	MP
Antidiabetic-Antibodies		
TZIELD	PA	QL(48 ML per 14 day(s) retail; 48 ML per 14 days mail); AL(At least 8 yrs old); SP; PA
Biguanides		
metformin hcl SOLN	PA	MP; PA
metformin hcl TABS 500 MG, 850 MG, 1000 MG	P	MP
metformin hcl TB24	P	MP
metformin hcl TB24 500 MG, 1000 MG	NP	MP
RIOMET SOLN *(Use metformin hcl)*	NP	MP
Diabetic Other		
BAQSIMI ONE PACK POWD	P	
BAQSIMI TWO PACK POWD	P	
dextrose (diabetic use) CHEW 4 GM	P	QL(1.67 EA daily)
dextrose (diabetic use) GEL	P	
diazoxide	P	
GLUCAGON EMERGENCY	P	
glucagon SOLR IJ 1 MG	P	
GVOKE HYPOPEN 1-PACK SOAJ	P	
GVOKE HYPOPEN 2-PACK SOAJ	P	
GVOKE KIT SOLN	P	
GVOKE PFS SOSY 1 MG/0.2ML	P	
TRUEPLUS GLUCOSE ON THE GO CHEW	P	QL(1.67 EA daily)
TRUEPLUS GLUCOSE CHEW	P	QL(1.67 EA daily)
ZEGALOGUE SOAJ	P	
ZEGALOGUE SOSY	P	
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
alogliptin benzoate	NP	MP
BRYNOVIN SOLN PO 25 MG/ML	NP	
JANUVIA 25 MG, 50 MG, 100 MG *(Use sitagliptin phosphate)*	NP	MP
saxagliptin hcl	NP	MP
sitagliptin 25 MG, 50 MG, 100 MG	P	MP
sitagliptin phosphate 25 MG, 50 MG, 100 MG	NP	MP
TRADJENTA	P	MP
ZITUVIO 25 MG, 50 MG, 100 MG *(Use sitagliptin)*	NP	MP
Dopamine Receptor Agonists - Antidiabetic		
CYCLOSET	NP	MP

Drug Name	Drug Tier	Requirements/ Limits
Incretin Mimetic Agents		
BYETTA 10 MCG PEN SOPN 10 MCG/0.04ML *(Use exenatide)*	PA	QL(0.08 ML daily; 7.2 ML per 90 day(s) retail; 7 ML per 90 days mail); AL(At least 18 yrs old); MP; PA
BYETTA 5 MCG PEN SOPN 5 MCG/0.02ML *(Use exenatide)*	PA	QL(0.04 ML daily; 3.6 ML per 90 day(s) retail; 4 ML per 90 days mail); AL(At least 18 yrs old); MP; PA
exenatide SOPN 10 MCG/0.04ML	NP	QL(0.08 ML daily; 7.2 ML per 90 day(s) retail; 7 ML per 90 days mail); AL(At least 18 yrs old); MP
exenatide SOPN 5 MCG/0.02ML	NP	QL(0.04 ML daily; 3.6 ML per 90 day(s) retail; 4 ML per 90 days mail); AL(At least 18 yrs old); MP
liraglutide	NP	QL(0.3 ML daily; 27 ML per 90 day(s) retail; 27 ML per 90 days mail); AL(At least 10 yrs old)
MOUNJARO 12.5 MG/0.5ML, 15 MG/0.5ML	PA	QL(0.072 ML daily; 6 ML per 84 day(s) retail; 6 ML per 84 days mail); AL(At least 18 yrs old); MP; PA
MOUNJARO 2.5 MG/0.5ML, 5 MG/0.5ML, 7.5 MG/0.5ML, 10 MG/0.5ML	PA	QL(0.072 ML daily; 6 ML per 84 day(s) retail; 6 ML per 84 days mail); AL(At least 10 yrs old); MP; PA
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	PA	QL(0.108 ML daily; 9 ML per 84 day(s) retail; 9 ML per 84 days mail); AL(At least 18 yrs old); MP; PA
OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML	PA	QL(0.108 ML daily; 9 ML per 84 day(s) retail; 9 ML per 84 days mail); AL(At least 18 yrs old); MP; PA
OZEMPIC (2 MG/DOSE) SOPN	PA	QL(0.108 ML daily; 9 ML per 84 day(s) retail; 9 ML per 84 days mail); AL(At least 18 yrs old); MP; PA
OZEMPIC TABS 1.5 MG, 4 MG, 9 MG	PA	QL(1 EA daily; 90 EA per 90 day(s) retail; 90 EA per 90 days mail); AL(At least 18 yrs old); MP; PA
RYBELSUS TABS	PA	QL(1 EA daily; 90 EA per 90 day(s) retail; 90 EA per 90 days mail); AL(At least 18 yrs old); MP; PA

Drug Name	Drug Tier	Requirements/ Limits
TRULICITY	PA	QL(0.072 ML daily; 6 ML per 84 day(s) retail; 6 ML per 84 days mail); AL(At least 10 yrs old); MP; PA
VICTOZA *(Use liraglutide)*	PA	QL(0.3 ML daily; 27 ML per 90 day(s) retail; 27 ML per 90 days mail); AL(At least 10 yrs old); MP; PA
Insulin		
ADMELOG SOLOSTAR SOPN	NP	MP
ADMELOG SOLN IJ	NP	MP
AFREZZA POWD 4 UNIT, 8 UNIT, 12 UNIT	NP	
APIDRA SOLOSTAR SOPN	NP	MP
APIDRA SOLN	NP	MP
AWIQLI FLEXTOUCH SOPN SC 700 UNIT/ML	NP	MP
BASAGLAR KWIKPEN SOPN	NP	MP
FIASP FLEXTOUCH SOPN	NP	MP
FIASP PENFILL SOCT	NP	MP
FIASP PUMPCART SOCT	NP	
FIASP SOLN	NP	MP
HUMALOG JUNIOR KWIKPEN SOPN	P	MP
HUMALOG KWIKPEN SOPN 100 UNIT/ML	P	MP
HUMALOG KWIKPEN SOPN 200 UNIT/ML	NP	MP
HUMALOG MIX 50/50 KWIKPEN SUPN	P	MP
HUMALOG MIX 75/25 KWIKPEN SUPN	NP	MP
HUMALOG MIX 75/25 SUSP	P	MP
HUMALOG TEMPO PEN SOPN	NP	MP
HUMALOG SOCT	P	MP
HUMALOG SOLN IJ	P	MP
HUMULIN 70/30 KWIKPEN SUPN	P	MP
HUMULIN 70/30 SUSP	P	MP
HUMULIN N KWIKPEN SUPN	P	MP
HUMULIN N SUSP	P	MP
HUMULIN R U-500 KWIKPEN SOPN SC	P	MP
HUMULIN R SOLN IJ	P	MP
INSULIN ASPART FLEXPEN SOPN	P	MP
INSULIN ASPART SOLN IJ	P	MP
INSULIN DEGLUDEC FLEXTOUCH SOPN	NP	MP
INSULIN DEGLUDEC SOLN	NP	MP
INSULIN GLARGINE MAX SOLOSTAR SOPN	NP	MP
INSULIN GLARGINE SOLOSTAR SOPN 300 UNIT/ML	NP	MP
INSULIN GLARGINE-YFGN SOLN	NP	MP
INSULIN GLARGINE-YFGN SOPN	P	MP
INSULIN LISPRO (1 UNIT DIAL) SOPN	P	MP
INSULIN LISPRO JUNIOR KWIKPEN SOPN	P	MP
INSULIN LISPRO PROT & LISPRO SUPN	P	MP
INSULIN LISPRO SOLN IJ	P	MP

Drug Name	Drug Tier	Requirements/ Limits
KIRSTY SOLN IJ 100 UNIT/ML	NP	MP
KIRSTY SOPN SC 100 UNIT/ML	NP	MP
LANTUS SOLOSTAR SOPN	P	MP
LANTUS SOLN	P	MP
LEVEMIR SOLN	NP	MP
LYUMJEV KWIKPEN SOPN	NP	MP
LYUMJEV TEMPO PEN SOPN	NP	MP
LYUMJEV SOLN	NP	MP
MERILOG SOLOSTAR SOPN SC 100 UNIT/ML	NP	MP
MERILOG SOLN SC 100 UNIT/ML	NP	MP
MYXREDLIN	P	
NOVOLIN 70/30 FLEXPEN RELION SUPN	P	MP
NOVOLIN 70/30 FLEXPEN SUPN	P	MP
NOVOLIN 70/30 RELION SUSP	P	MP
NOVOLIN 70/30 SUSP	P	MP
NOVOLIN N FLEXPEN RELION SUPN	P	MP
NOVOLIN N FLEXPEN SUPN	P	MP
NOVOLIN N RELION SUSP	P	MP
NOVOLIN N SUSP	P	MP
NOVOLIN R FLEXPEN RELION SOPN IJ	P	MP
NOVOLIN R FLEXPEN SOPN IJ	P	MP
NOVOLIN R RELION SOLN IJ	P	MP
NOVOLIN R SOLN IJ	P	MP
NOVOLOG 70/30 FLEXPEN RELION SUPN	P	MP
NOVOLOG FLEXPEN RELION SOPN	NP	MP
NOVOLOG FLEXPEN SOPN	NP	MP
NOVOLOG MIX 70/30 FLEXPEN SUPN	P	MP
NOVOLOG MIX 70/30 RELION SUSP	P	MP
NOVOLOG MIX 70/30 SUSP	P	MP
NOVOLOG PENFILL SOCT	NP	MP
NOVOLOG RELION SOLN IJ	NP	MP
NOVOLOG SOLN IJ	NP	MP
REZVOGLAR KWIKPEN	NP	
SEMGLEE (YFGN) SOLN	NP	MP
SEMGLEE (YFGN) SOPN	NP	MP
TOUJEO MAX SOLOSTAR SOPN	P	MP
TOUJEO SOLOSTAR SOPN	P	MP
TRESIBA FLEXTOUCH SOPN	P	MP
TRESIBA SOLN	P	MP
Insulin Sensitizing Agents		
ACTOS *(Use pioglitazone hcl)*	NP	MP
pioglitazone hcl	P	MP
Meglitinide Analogues		
nateglinide	NP	MP
repaglinide	P	MP
Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors		
dapagliflozin TABS PO 5 MG, 10 MG	NP	MP
FARXIGA TABS PO *(Use dapagliflozin)*	P	MP
INVOKANA	NP	MP

Drug Name	Drug Tier	Requirements/ Limits
JARDIANCE	P	MP
STEGLATRO	NP	MP
Sulfonylureas		
glimepiride 1 MG, 2 MG, 4 MG	P	MP
glipizide TABS	P	MP
glipizide TB24	P	MP
GLUCOTROL XL TB24 5 MG *(Use glipizide)*	NP	MP
glyburide micronized 3 MG, 6 MG	P	MP
glyburide TABS	P	MP
ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea		
Antidiarrheal/Probiotic Agents - Misc.		
bismuth subsalicylate CHEW 262 MG	P	
bismuth subsalicylate SUSP 262 MG/15ML, 525 MG/15ML, 525 MG/30ML, 527 MG/30ML, 1050 MG/30ML	P	
bismuth subsalicylate TABS	P	
Antiperistaltic Agents		
diphenoxylate w/ atropine LIQD	P	
diphenoxylate w/ atropine TABS	P	
loperamide hcl CAPS	P	QL(8 EA daily); RX/OTC
loperamide hcl TABS	P	QL(8 EA daily)
ANTIDOTES AND SPECIFIC ANTAGONISTS		
Antidotes - Chelating Agents		
CHEMET	P	
deferasirox TABS	P	SP; PA
Antidotes and Specific Antagonists		
SM IPECAC SYRUP	P	

Drug Name	Drug Tier	Requirements/ Limits
Opioid Antagonists		
KLOXXADO LIQD	P	
naloxone hcl LIQD	P	RX/OTC
naloxone hcl SOCT	P	QL(5 ML per fill retail; 5 per fill mail)
naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML	P	QL(5 ML per fill retail; 5 per fill mail)
naloxone hcl SOSY 2 MG/2ML	P	
naloxone hcl SOSY 0.4 MG/ML	P	QL(5 ML per fill retail; 5 per fill mail)
naltrexone hcl	P	
OPVEE NA	NP	
REXTOVY LIQD	NP	
REZENOPY LIQD 10 MG/0.11ML	NP	
VIVITROL	PA	SP; PA
ZURNAI IJ 1.5 MG/0.5ML	NP	
ANTIEMETICS - Drugs to Treat Nausea and Vomiting		
5-HT3 Receptor Antagonists		
granisetron hcl TABS	P	QL(2 EA per fill retail; 2 per fill mail)
GRANISOL SOLN PO	NP	QL(30 ML per fill retail; 30 per fill mail)
ondansetron hcl SOLN PO 4 MG/5ML	P	QL(50 ML per fill retail; 50 per fill mail)
ondansetron hcl SOLN IJ 4 MG/2ML	P	QL(8 ML per fill retail; 8 per fill mail)
ondansetron hcl SOLN IJ 40 MG/20ML	P	QL(20 ML per fill retail; 20 per fill mail)
ondansetron hcl SOSY	P	QL(8 ML per fill retail; 8 per fill mail)

Drug Name	Drug Tier	Requirements/ Limits
ondansetron hcl TABS 4 MG	P	QL(12 EA per fill retail; 12 per fill mail)
ondansetron hcl TABS 24 MG	P	QL(1 EA per 14 day(s) retail; 1 EA per 14 days mail)
ondansetron hcl TABS 8 MG	P	QL(6 EA per fill retail; 6 per fill mail)
ondansetron TBDP 16 MG	NP	QL(3 EA per fill retail; 3 per fill mail)
ondansetron TBDP 8 MG	P	QL(6 EA per fill retail; 6 per fill mail)
ondansetron TBDP 4 MG	P	QL(12 EA per fill retail; 12 per fill mail)
SANCUSO PTCH	NP	QL(1 EA per fill retail; 1 per fill mail)
Antiemetics - Anticholinergic		
dimenhydrinate TABS	P	
meclizine hcl CHEW	P	RX/OTC
meclizine hcl TABS 12.5 MG, 25 MG	P	RX/OTC
Antiemetics - Miscellaneous		
AKYNZEO	NP	
BONJESTA TBCR	P	
DICLEGIS TBEC *(Use doxylamine-pyridoxine)*	P	
doxylamine-pyridoxine TBEC	NP	
dronabinol CAPS	PA	PA
DRONABINOL SOLN 5 MG/ML	PA	PA
MARINOL CAPS 2.5 MG *(Use dronabinol)*	PA	PA
Substance P/Neurokinin 1 (NK1) Receptor Antagonists		
APONVIE EMUL	NP	QL(1 ML per fill retail; 1 per fill mail)
aprepitant CAPS 125 MG	P	QL(1 EA per fill retail; 1 per fill mail)
aprepitant CAPS 40 MG, 80 MG	P	QL(2 EA per fill retail; 2 per fill mail)
aprepitant CPPK PO	NP	QL(3 EA per fill retail; 3 per fill mail)
CINVANTI EMUL	NP	QL(1 ML per fill retail; 1 per fill mail)
EMEND BIPACK CAPS 80 MG *(Use aprepitant)*	NP	QL(2 EA per fill retail; 2 per fill mail)
EMEND TRIPACK CPPK PO *(Use aprepitant)*	NP	QL(3 EA per fill retail; 3 per fill mail)
EMEND SOLR *(Use fosaprepitant dimeglumine)*	NP	QL(1 EA per fill retail; 1 per fill mail)
EMEND SUSR	NP	QL(1 EA per fill retail; 1 per fill mail)
FOCINVEZ SOLN	NP	QL(1 ML per fill retail; 1 per fill mail)
fosaprepitant dimeglumine SOLR	P	QL(1 EA per fill retail; 1 per fill mail)
NAVITRUX SOLR 150 MG	NP	QL(1 EA per fill retail; 1 per fill mail)
ANTIFUNGALS - Drugs to Treat Fungal Infections		
Antifungals		
griseofulvin microsize SUSP	P	
griseofulvin microsize TABS	P	
griseofulvin ultramicrosize	P	
GRISEOFULVIN ULTRAMICROSIZE 165 MG	P	

Drug Name	Drug Tier	Requirements/ Limits
nystatin TABS	P	QL(6 EA daily)
Imidazole-Related Antifungals		
fluconazole SUSR	P	QL(70 ML per fill retail; 70 per fill mail)
fluconazole TABS 200 MG	P	QL(2 EA daily)
fluconazole TABS 150 MG	P	QL(2 EA per fill retail; 2 per fill mail)
fluconazole TABS 100 MG	P	QL(1 EA daily)
fluconazole TABS 50 MG	P	QL(7 EA per fill retail; 7 per fill mail)
VIVJOA	PA	QL(18 EA per fill retail; 18 per fill mail); PA
ANTIHISTAMINES - Drugs to Treat Allergies		
Antihistamines - Alkylamines		
chlorpheniramine maleate SYRP	P	QL(60 ML daily)
chlorpheniramine maleate TABS	P	QL(120 EA per fill retail; 120 per fill mail)
Antihistamines - Ethanolamines		
DAYHIST ALLERGY 12 HOUR RELIEF TABS	P	QL(2 EA daily)
diphenhydramine hcl CAPS	P	QL(4 EA daily)
diphenhydramine hcl ELIX 12.5 MG/5ML	P	QL(240 ML per fill retail; 240 per fill mail)
diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML	P	QL(240 ML per fill retail; 240 per fill mail)
Antihistamines - Non-Sedating		
cetirizine hcl CAPS	NP	
cetirizine hcl CHEW 10 MG	P	
cetirizine hcl SOLN PO	P	RX/OTC
cetirizine hcl TABS	P	

Drug Name	Drug Tier	Requirements/ Limits
CLARINEX TABS *(Use desloratadine)*	NP	
DESLORATADINE SOLN PO 0.5 MG/ML	NP	
desloratadine TABS	NP	
desloratadine TBDP	NP	
fexofenadine hcl SUSP	NP	
fexofenadine hcl TABS 60 MG, 180 MG	NP	
levocetirizine dihydrochloride SOLN	P	RX/OTC
levocetirizine dihydrochloride TABS	P	RX/OTC
loratadine CHEW	P	
loratadine SOLN	P	
loratadine TABS	P	
loratadine TBDP 10 MG	P	
Antihistamines - Phenothiazines		
promethazine hcl SOLN PO 6.25 MG/5ML, 12.5 MG/10ML	P	QL(240 ML per fill retail; 240 per fill mail); AL(At least 2 yrs old)
promethazine hcl SUPP	P	QL(12 EA per fill retail; 12 per fill mail); AL(At least 2 yrs old)
promethazine hcl TABS	P	AL(At least 2 yrs old)
Antihistamines - Piperidines		
cyproheptadine hcl SYRP	P	
cyproheptadine hcl TABS	P	
ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol		
Adenosine Triphosphate-Citrate Lyase (ACL) Inhibitors		
NEXLETOL	NP	
Angiopoietin-like Protein Inhibitors		

Drug Name	Drug Tier	Requirements/ Limits
EVKEEZA 345 MG/2.3ML	PA	QL(4.6 ML per fill retail; 4.6 per fill mail); AL(At least 5 yrs old); SP; PA
EVKEEZA 1200 MG/8ML	PA	QL(8 ML per fill retail; 8 per fill mail); AL(At least 5 yrs old); SP; PA
Antihyperlipidemics - Combinations		
ezetimibe-simvastatin	P	MP
NEXLIZET	NP	
VYTORIN *(Use ezetimibe-simvastatin)*	NP	MP
Antihyperlipidemics - Misc.		
icosapent ethyl	NP	
omega-3-acid ethyl esters	P	
Bile Acid Sequestrants		
cholestyramine light PACK	NP	
cholestyramine light PACK	P	
cholestyramine light POWD	P	
cholestyramine light POWD	NP	
cholestyramine PACK	P	
cholestyramine POWD	P	
colesevelam hcl PACK	P	
colesevelam hcl TABS	P	
COLESTID GRAN *(Use colestipol hcl)*	NP	
COLESTID TABS *(Use colestipol hcl)*	NP	
colestipol hcl GRAN	P	
colestipol hcl PACK	P	
colestipol hcl TABS	P	

Drug Name	Drug Tier	Requirements/ Limits
QUESTRAN LIGHT POWD *(Use cholestyramine light)*	NP	
QUESTRAN PACK *(Use cholestyramine)*	NP	
QUESTRAN POWD *(Use cholestyramine)*	NP	
WELCHOL PACK *(Use colesevelam hcl)*	NP	
WELCHOL TABS *(Use colesevelam hcl)*	NP	
Fibric Acid Derivatives		
choline fenofibrate	P	
fenofibrate micronized 43 MG, 67 MG, 130 MG, 134 MG, 200 MG	P	
fenofibrate CAPS	NP	
fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG	P	
fenofibrate TABS 40 MG, 120 MG	NP	
fenofibric acid	NP	
FIBRICOR 105 MG *(Use fenofibric acid)*	NP	
gemfibrozil TABS	P	
LIPOFEN CAPS *(Use fenofibrate)*	P	
LOPID TABS *(Use gemfibrozil)*	NP	
HMG CoA Reductase Inhibitors		
ALTOPREV TB24 20 MG, 40 MG, 60 MG	NP	MP
ATORVALIQ SUSP	NP	MP
atorvastatin calcium TABS	P	MP
CRESTOR TABS 10 MG *(Use rosuvastatin calcium)*	NP	QL(2 EA daily); MP
CRESTOR TABS 5 MG *(Use rosuvastatin calcium)*	NP	MP

Drug Name	Drug Tier	Requirements/ Limits
CRESTOR TABS 20 MG, 40 MG *(Use rosuvastatin calcium)*	NP	QL(1 EA daily); MP
fluvastatin sodium CAPS	NP	MP
fluvastatin sodium TB24	NP	MP
LESCOL XL TB24 *(Use fluvastatin sodium)*	NP	MP
LIPITOR TABS *(Use atorvastatin calcium)*	NP	MP
LIVALO *(Use pitavastatin calcium)*	NP	MP
lovastatin TABS	P	MP
pitavastatin calcium	NP	MP
pravastatin sodium	P	MP
rosuvastatin calcium TABS 20 MG, 40 MG	P	QL(1 EA daily); MP
rosuvastatin calcium TABS 10 MG	P	QL(2 EA daily); MP
rosuvastatin calcium TABS 5 MG	P	MP
simvastatin TABS	P	MP
ZOCOR TABS 10 MG, 20 MG, 40 MG *(Use simvastatin)*	NP	MP
Intestinal Cholesterol Absorption Inhibitors		
ezetimibe	P	
ZETIA *(Use ezetimibe)*	NP	
Microsomal Triglyceride Transfer Protein (MTP) Inhibitors		
JUXTAPID 2 MG, 5 MG, 10 MG, 20 MG, 30 MG	PA	QL(1 EA daily); AL(At least 18 yrs old); SP; PA
Nicotinic Acid Derivatives		
niacin (antihyperlipidemic) TABS	P	
niacin (antihyperlipidemic) TBCR	P	
Proprotein Convertase Subtilisin/Kexin Type 9 Inhibitors		
LEQVIO	NP	SP
LIPFENDRA TABS PO 20 MG	NP	QL(1 EA daily; 30 EA per 30 day(s) retail; 30 EA per 30 days mail)
PRALUENT SOAJ	PA	QL(2 ML per 28 day(s) retail; 2 ML per 28 days mail); SP; PA
REPATHA SURECLICK SOAJ	PA	QL(3 ML per 28 day(s) retail; 3 ML per 28 days mail); SP; PA
REPATHA SOSY	PA	QL(3 ML per 28 day(s) retail; 3 ML per 28 days mail); SP; PA
ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure		
ACE Inhibitors		
ACCUPRIL *(Use quinapril hcl)*	NP	MP
ALTACE CAPS 1.25 MG, 5 MG *(Use ramipril)*	NP	MP
benazepril hcl	P	MP
captopril	P	MP
enalapril maleate SOLN	P	AL(Up to 10 yrs old); MP
enalapril maleate TABS	P	MP
EPANED SOLN *(Use enalapril maleate)*	NP	AL(Up to 10 yrs old); MP
fosinopril sodium	NP	MP
lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG	P	MP
LOTENSIN 10 MG, 20 MG, 40 MG *(Use benazepril hcl)*	NP	MP
moexipril hcl	NP	MP
perindopril erbumine	NP	MP
QBRELIS SOLN	NP	MP

Drug Name	Drug Tier	Requirements/ Limits
quinapril hcl	NP	MP
ramipril CAPS	P	MP
trandolapril	NP	MP
ZESTRIL TABS *(Use lisinopril)*	NP	MP
Angiotensin II Receptor Antagonists		
ARBLI PO 10 MG/ML	NP	MP
ATACAND *(Use candesartan cilexetil)*	NP	MP
AVAPRO 150 MG, 300 MG *(Use irbesartan)*	NP	MP
azilsartan medoxomil 40 MG, 80 MG	NP	MP
BENICAR *(Use olmesartan medoxomil)*	NP	MP
candesartan cilexetil	NP	MP
COZAAR *(Use losartan potassium)*	NP	MP
DIOVAN TABS *(Use valsartan)*	NP	MP
EDARBI 40 MG, 80 MG *(Use azilsartan medoxomil)*	NP	MP
irbesartan	NP	MP
losartan potassium	P	MP
olmesartan medoxomil	P	MP
telmisartan	NP	MP
valsartan SOLN	P	MP
valsartan TABS	P	MP
Antiadrenergic Antihypertensives		
CARDURA *(Use doxazosin mesylate)*	NP	MP
clonidine hcl TABS	P	
clonidine PTWK	P	
doxazosin mesylate	P	MP
guanfacine hcl	P	
methyldopa TABS	P	
prazosin hcl CAPS	NP	MP
terazosin hcl	P	MP

Drug Name	Drug Tier	Requirements/ Limits
TEZRULY PO 1 MG/ML	NP	MP
Antihypertensive Combinations		
ACCURETIC 12.5 MG-10 MG, 12.5 MG-20 MG *(Use quinapril-hydrochlorothiazide)*	NP	MP
amlodipine besylate-benazepril hcl	P	MP
amlodipine besylate-olmesartan medoxomil	P	MP
amlodipine besylate-valsartan	P	MP
amlodipine-valsartan-hydrochlorothiazide	NP	MP
ATACAND HCT *(Use candesartan cilexetil-hydrochlorothiazide)*	NP	MP
atenolol & chlorthalidone	P	MP
AVALIDE *(Use irbesartan-hydrochlorothiazide)*	NP	MP
AZOR *(Use amlodipine besylate-olmesartan medoxomil)*	NP	MP
benazepril & hydrochlorothiazide	P	MP
BENICAR HCT *(Use olmesartan medoxomil-hydrochlorothiazide)*	NP	MP
bisoprolol & hydrochlorothiazide	P	MP
candesartan cilexetil-hydrochlorothiazide	NP	MP
captopril & hydrochlorothiazide	P	MP
DIOVAN HCT *(Use valsartan-hydrochlorothiazide)*	NP	MP
EDARBYCLOR	NP	MP
enalapril maleate & hydrochlorothiazide	P	MP

Drug Name	Drug Tier	Requirements/ Limits
EXFORGE *(Use amlodipine besylate-valsartan)*	NP	MP
EXFORGE HCT *(Use amlodipine-valsartan-hydrochlorothiazide)*	NP	MP
fosinopril sodium & hydrochlorothiazide	NP	MP
HYZAAR *(Use losartan potassium & hydrochlorothiazide)*	NP	MP
irbesartan-hydrochlorothiazide	NP	MP
lisinopril & hydrochlorothiazide	P	MP
losartan potassium & hydrochlorothiazide	P	MP
LOTENSIN HCT 12.5 MG-10 MG, 12.5 MG-20 MG, 25 MG-20 MG *(Use benazepril & hydrochlorothiazide)*	NP	MP
metoprolol & hydrochlorothiazide TABS	NP	MP
MICARDIS HCT *(Use telmisartan-hydrochlorothiazide)*	NP	MP
olmesartan medoxomil-amlodipine-hydrochlorothiazide	NP	MP
olmesartan medoxomil-hydrochlorothiazide	P	MP
quinapril-hydrochlorothiazide	NP	MP
telmisartan-amlodipine	NP	MP
telmisartan-hydrochlorothiazide	NP	MP
TENORETIC 100 *(Use atenolol & chlorthalidone)*	NP	MP
TENORETIC 50 *(Use atenolol & chlorthalidone)*	NP	MP
trandolapril-verapamil hcl	NP	MP
TRIBENZOR *(Use olmesartan medoxomil-amlodipine-hydrochlorothiazide)*	NP	MP
valsartan-hydrochlorothiazide	P	MP
ZESTORETIC *(Use lisinopril & hydrochlorothiazide)*	NP	MP
Direct Renin Inhibitors		
aliskiren fumarate	P	
Endothelin Receptor Antagonists		
TRYVIO	PA	QL(1 EA daily); AL(At least 18 yrs old); MP; PA
Vasodilators		
hydralazine hcl TABS	P	
minoxidil 2.5 MG, 10 MG	P	
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)		
Antimalarial Combinations		
COARTEM	P	QL(24 EA per fill retail; 24 per fill mail)
Antimalarials		
chloroquine phosphate TABS 250 MG	P	QL(2 EA daily)
chloroquine phosphate TABS 500 MG	P	QL(8 EA per 56 day(s) retail; 8 EA per 56 days mail)
hydroxychloroquine sulfate 200 MG	P	
KRINTAFEL	P	QL(2 EA per 30 day(s) retail; 2 EA per 30 days mail)
mefloquine hcl	P	
primaquine phosphate TABS	P	

Drug Name	Drug Tier	Requirements/ Limits
SOVUNA 200 MG	P	
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
Antimyasthenic/Cholinergic Agents		
pyridostigmine bromide TABS 60 MG	P	
pyridostigmine bromide TBCR	P	
ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)		
Antimycobacterial Agents		
ethambutol hcl TABS	P	
isoniazid SYRP	P	
isoniazid TABS	P	
pyrazinamide	P	
rifabutin	P	
rifampin CAPS	P	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer		
Alkylating Agents		
cyclophosphamide CAPS	PA	PA
CYCLOPHOSPHAMIDE TABS 50 MG	PA	PA
GLEOSTINE 10 MG, 100 MG *(Use lomustine)*	PA	PA
LEUKERAN	P	
lomustine	PA	PA
MYLERAN TABS	P	
TEMODAR SOLR	P	SP; PA
temozolomide CAPS 100 MG, 140 MG, 180 MG, 250 MG	PA	PA
temozolomide CAPS	PA	SP; PA
Antimetabolites		
capecitabine	PA	SP; PA
JYLAMVO SOLN PO	PA	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
mercaptopurine SUSP 2000 MG/100ML	PA	PA
mercaptopurine TABS	PA	PA
methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML	P	
methotrexate sodium TABS 2.5 MG	PA	PA
ONUREG TABS	PA	SP; PA
PURIXAN SUSP 2000 MG/100ML *(Use mercaptopurine)*	PA	PA
TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	PA	PA
XATMEP SOLN PO	PA	PA
Antineoplastic - Angiogenesis Inhibitors		
FRUZAQLA	PA	SP; PA
INLYTA	PA	SP; PA
LENVIMA (10 MG DAILY DOSE)	PA	SP; PA
LENVIMA (12 MG DAILY DOSE)	PA	SP; PA
LENVIMA (14 MG DAILY DOSE)	PA	SP; PA
LENVIMA (18 MG DAILY DOSE)	PA	SP; PA
LENVIMA (20 MG DAILY DOSE)	PA	SP; PA
LENVIMA (24 MG DAILY DOSE)	PA	SP; PA
LENVIMA (4 MG DAILY DOSE)	PA	SP; PA
LENVIMA (8 MG DAILY DOSE)	PA	SP; PA
Antineoplastic - Anti-HER2 Agents		
HERNEXEOS TABS PO 60 MG	PA	SP; PA
TUKYSA	PA	SP; PA
Antineoplastic - Antibodies		

Drug Name	Drug Tier	Requirements/ Limits
LOQTORZI	P	SP; PA
Antineoplastic - BCL-2 Inhibitors		
BEQALZI STARTER PACK TBPK PO	PA	PA
BEQALZI TABS PO 1 MG, 5 MG, 20 MG, 80 MG	PA	PA
VENCLEXTA STARTING PACK TBPK	PA	SP; PA
VENCLEXTA TABS	PA	SP; PA
Antineoplastic - EGFR Inhibitors		
erlotinib hcl	PA	SP; PA
gefitinib	PA	SP; PA
GILOTRIF	PA	SP; PA
IRESSA *(Use gefitinib)*	PA	SP; PA
LAZCLUZE	PA	SP; PA
TAGRISSO	PA	SP; PA
VIZIMPRO	PA	SP; PA
Antineoplastic - Hedgehog Pathway Inhibitors		
DAURISMO	PA	SP; PA
ERIVEDGE	PA	SP; PA
ODOMZO	PA	SP; PA
Antineoplastic - Hormonal and Related Agents		
abiraterone acetate	PA	SP; PA
AKEEGA	PA	SP; PA
anastrozole	PA	PA
ARIMIDEX *(Use anastrozole)*	PA	PA
AROMASIN *(Use exemestane)*	PA	PA
bicalutamide	PA	PA
CAMCEVI	PA	Maximum 180 day supply allowed; QL(1 EA per 180 day(s) retail; 1 EA per 180 days mail); SP; PA
CASODEX *(Use bicalutamide)*	PA	PA
ELIGARD SC 45 MG	PA	Maximum 180 day supply allowed; QL(1 EA per 180 day(s) retail; 1 EA per 180 days mail); SP; PA
ELIGARD SC 30 MG	PA	Maximum 180 day supply allowed; QL(1 EA per 120 day(s) retail; 1 EA per 120 days mail); SP; PA
ELIGARD KIT SC 7.5 MG	PA	Maximum 180 day supply allowed; QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail); SP; PA
ELIGARD KIT SC 22.5 MG	PA	Maximum 180 day supply allowed; QL(1 EA per 90 day(s) retail; 1 EA per 90 days mail); SP; PA
ERLEADA	PA	SP; PA
ETCAMAH TABS PO 75 MG	PA	PA
EULEXIN	P	
exemestane	PA	PA
FARESTON *(Use toremifene citrate)*	PA	MP; PA
FEMARA *(Use letrozole)*	PA	PA
INLURIYO TABS PO 200 MG	PA	SP; PA
letrozole	PA	PA

Drug Name	Drug Tier	Requirements/ Limits
leuprolide acetate (3 month) INJ 22.5 MG	PA	Maximum 180 day supply allowed; QL(1 EA per 90 day(s) retail; 1 EA per 90 days mail); PA
leuprolide acetate KIT IJ 1 MG/0.2ML	PA	Maximum 180 day supply allowed; QL(2 EA per 30 day(s) retail; 2 EA per 30 days mail); SP; PA
LIFYORLI (125 MG DOSE) CPPK PO	PA	SP; PA
LIFYORLI (150 MG DOSE) CPPK PO	PA	SP; PA
LUPRON DEPOT (1-MONTH) KIT IM	PA	Maximum 180 day supply allowed; QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail); SP; PA
LUPRON DEPOT (3-MONTH) KIT IM	PA	Maximum 180 day supply allowed; QL(1 EA per 90 day(s) retail; 1 EA per 90 days mail); SP; PA
LUPRON DEPOT (4-MONTH) IM	PA	Maximum 180 day supply allowed; QL(1 EA per 120 day(s) retail; 1 EA per 120 days mail); SP; PA
LUPRON DEPOT (6-MONTH) IM	PA	Maximum 180 day supply allowed; QL(1 EA per 180 day(s) retail; 1 EA per 180 days mail); SP; PA
LUTRATE DEPOT INJ 22.5 MG	PA	Maximum 180 day supply allowed; QL(1 EA per 90 day(s) retail; 1 EA per 90 days mail); PA
LYSODREN	PA	SP; PA
megestrol acetate SUSP	P	
megestrol acetate TABS	PA	PA
nilutamide	PA	PA
NUBEQA	PA	SP; PA
ORGOVYX	PA	SP; PA
ORSERDU	PA	SP; PA
SOLTAMOX SOLN	PA	MP; PA
tamoxifen citrate TABS	PA	MP; PA
toremifene citrate	PA	MP; PA
TRELSTAR MIXJECT 3.75 MG	PA	SP; PA
TRELSTAR MIXJECT 11.25 MG, 22.5 MG	PA	SP; PA
VEPPANU TABS PO 100 MG, 200 MG	PA	PA
XTANDI CAPS	PA	SP; PA
XTANDI TABS	PA	SP; PA
YONSA	PA	SP; PA
ZOLADEX	P	SP; PA
ZYTIGA *(Use abiraterone acetate)*	PA	SP; PA
Antineoplastic - Hypoxia-Inducible Factor Inhibitors		
WELIREG	PA	SP; PA
Antineoplastic - Immunomodulators		
pomalidomide 1 MG, 2 MG, 3 MG, 4 MG	PA	PA
POMALYST 1 MG, 2 MG, 3 MG, 4 MG *(Use pomalidomide)*	PA	SP; PA
ZENBEXUS CAPS PO 0.75 MG, 1 MG	PA	PA

Drug Name	Drug Tier	Requirements/ Limits
Antineoplastic - Menin Inhibitors		
KOMZIFTI CAPS PO 200 MG	PA	SP; PA
REVUFORJ	PA	SP; PA
REVUFORJ 25 MG	PA	PA
Antineoplastic - PDGFR-alpha Inhibitors		
AYVAKIT	PA	SP; PA
Antineoplastic - Protease Activators		
MODEYSO CAPS PO 125 MG	PA	SP; PA
Antineoplastic - XPO1 Inhibitors		
XPOVIO (100 MG ONCE WEEKLY) 50 MG	PA	SP; PA
XPOVIO (40 MG ONCE WEEKLY)	PA	SP; PA
XPOVIO (40 MG TWICE WEEKLY) 40 MG	PA	SP; PA
XPOVIO (60 MG ONCE WEEKLY) 60 MG	PA	SP; PA
XPOVIO (60 MG TWICE WEEKLY)	PA	SP; PA
XPOVIO (80 MG ONCE WEEKLY)	PA	SP; PA
XPOVIO (80 MG TWICE WEEKLY)	PA	SP; PA
Antineoplastic Combinations		
AVMAPKI FAKZYNJA CO-PACK THPK PO	PA	SP; PA
INQOVI	PA	SP; PA
LONSURF	PA	SP; PA
Antineoplastic Enzyme Inhibitors		
AFINITOR DISPERZ TBSO *(Use everolimus)*	PA	SP; PA
AFINITOR TABS *(Use everolimus)*	PA	SP; PA
ALECENSA	PA	SP; PA
ALUNBRIG TABS	PA	SP; PA
ALUNBRIG TBPK	PA	SP; PA
AUGTYRO	PA	SP; PA
BALVERSA	PA	SP; PA
BOSULIF CAPS	PA	SP; PA
BOSULIF TABS 100 MG, 400 MG, 500 MG *(Use bosutinib)*	PA	SP; PA
bosutinib TABS 100 MG, 400 MG, 500 MG	PA	SP; PA
BRAFTOVI 75 MG	PA	SP; PA
BRUKINSA	PA	SP; PA
BRUKINSA PO 160 MG	PA	SP; PA
CABOMETYX TABS	PA	SP; PA
CALQUENCE	PA	SP; PA
CAPRELSA	PA	SP; PA
CAVHANZA TBDP PO 60 MG, 80 MG	PA	SP; PA
COMETRIQ (100 MG DAILY DOSE) KIT	PA	SP; PA
COMETRIQ (140 MG DAILY DOSE) KIT	PA	SP; PA
COMETRIQ (60 MG DAILY DOSE) KIT	PA	SP; PA
COPIKTRA	PA	SP; PA
COTELLIC	PA	SP; PA
DANZITEN	PA	SP; PA
dasatinib	PA	SP; PA
dasatinib	PA	PA
ENSACOVE CAPS PO 25 MG, 100 MG	PA	SP; PA
everolimus TABS	PA	SP; PA
everolimus TBSO	PA	SP; PA
FOTIVDA	PA	SP; PA
GAVRETO	PA	SP; PA
GAVRETO	PA	SP; PA
GLEEVEC TABS *(Use imatinib mesylate)*	PA	SP; PA
GLEEVEC TABS 400 MG *(Use imatinib mesylate)*	PA	PA
GOMEKLI CAPS PO 1 MG, 2 MG	PA	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
GOMEKLI TBSO PO 1 MG	PA	SP; PA
HYRNUO TABS PO 10 MG	PA	SP; PA
IBRANCE CAPS 100 MG, 125 MG	PA	SP; PA
IBRANCE TABS	PA	SP; PA
IBTROZI CAPS PO 200 MG	PA	SP; PA
ICLUSIG	PA	SP; PA
IDHIFA	PA	SP; PA
imatinib mesylate TABS	PA	SP; PA
IMBRUVICA CAPS	PA	SP; PA
IMBRUVICA SUSP	PA	SP; PA
IMBRUVICA TABS 140 MG, 280 MG, 420 MG	PA	SP; PA
IMKELDI SOLN	PA	SP; PA
INREBIC	PA	SP; PA
ITOVEBI	PA	SP; PA
JAKAFI	PA	SP; PA
JAKAFI XR PO 11 MG, 22 MG, 33 MG, 44 MG, 55 MG	PA	SP; PA
JAYPIRCA	PA	SP; PA
JIDEYTRO TABS PO 25 MG, 100 MG	PA	SP; PA
KISQALI (200 MG DOSE)	PA	SP; PA
KISQALI (400 MG DOSE)	PA	SP; PA
KISQALI (600 MG DOSE)	PA	SP; PA
KOSELUGO PO 5 MG, 7.5 MG	PA	SP; PA
KOSELUGO	PA	SP; PA
KRAZATI	PA	SP; PA
lapatinib ditosylate	PA	SP; PA
LORBRENA	PA	SP; PA
LUMAKRAS	PA	SP; PA
LYNPARZA TABS	PA	SP; PA
LYTGOBI (12 MG DAILY DOSE)	PA	SP; PA
LYTGOBI (16 MG DAILY DOSE)	PA	SP; PA
LYTGOBI (20 MG DAILY DOSE)	PA	SP; PA
MEKINIST SOLR	PA	SP; PA
MEKINIST TABS	PA	SP; PA
MEKTOVI	PA	SP; PA
NERLYNX	PA	SP; PA
NEXAVAR *(Use sorafenib tosylate)*	PA	SP; PA
NILOTINIB D-TARTRATE CAPS PO 50 MG, 150 MG, 200 MG	PA	SP; PA
NILOTINIB D-TARTRATE CAPS PO 50 MG, 150 MG, 200 MG	PA	SP; PA
nilotinib hcl 50 MG, 150 MG, 200 MG	PA	SP; PA
NINLARO	PA	SP; PA
OGSIVEO 100 MG, 150 MG	PA	SP; PA
OJEMDA SUSR	PA	SP; PA
OJEMDA TABS	PA	SP; PA
OJJAARA	PA	SP; PA
pazopanib hcl	PA	SP; PA
PEMAZYRE	PA	SP; PA
PHYRAGO 20 MG, 50 MG, 70 MG, 80 MG, 100 MG, 140 MG	PA	SP; PA
PIQRAY (200 MG DAILY DOSE)	PA	SP; PA
PIQRAY (250 MG DAILY DOSE)	PA	SP; PA
PIQRAY (300 MG DAILY DOSE)	PA	SP; PA
QINLOCK	PA	SP; PA
RASONQUE TABS PO 100 MG, 150 MG	PA	PA
RETEVMO CAPS	PA	SP; PA
RETEVMO TABS	PA	SP; PA
REZLIDHIA	PA	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
romidepsin SOLR	P	SP; PA
ROMVIMZA CAPS PO 14 MG, 20 MG, 30 MG	PA	SP; PA
ROZLYTREK CAPS	PA	SP; PA
ROZLYTREK PACK	PA	SP; PA
RUBRACA	PA	SP; PA
RYDAPT	PA	SP; PA
SCEMBLIX	PA	SP; PA
sorafenib tosylate	PA	SP; PA
SPRYCEL *(Use dasatinib)*	PA	SP; PA
STIVARGA	PA	SP; PA
sunitinib malate	PA	SP; PA
SUTENT *(Use sunitinib malate)*	PA	SP; PA
TABRECTA	PA	SP; PA
TAFINLAR CAPS	PA	SP; PA
TAFINLAR TBSO	PA	SP; PA
TALZENNA	PA	SP; PA
TASIGNA 50 MG, 150 MG, 200 MG *(Use nilotinib hcl)*	PA	SP; PA
TEPMETKO	PA	SP; PA
TIBSOVO	PA	SP; PA
TRUQAP TABS	PA	SP; PA
TRUQAP TBPK	PA	SP; PA
TURALIO 125 MG	PA	SP; PA
TYKERB *(Use lapatinib ditosylate)*	PA	SP; PA
VANFLYTA	PA	SP; PA
VERZENIO	PA	SP; PA
VITRAKVI CAPS	PA	SP; PA
VITRAKVI SOLN	PA	SP; PA
VONJO	PA	SP; PA
VORANIGO	PA	SP; PA
VOTRIENT *(Use pazopanib hcl)*	PA	SP; PA
XALKORI CAPS	PA	SP; PA
XALKORI CPSP	PA	SP; PA
XOSPATA	PA	SP; PA
ZEJULA TABS	PA	SP; PA
ZELBORAF	PA	SP; PA
ZOLINZA	PA	SP; PA
ZYDELIG	PA	SP; PA
ZYKADIA TABS	PA	SP; PA
Antineoplastics Misc.		
bexarotene	PA	SP; PA
HYDREA *(Use hydroxyurea)*	PA	PA
hydroxyurea	PA	PA
MATULANE	PA	SP; PA
tretinoin (chemotherapy)	PA	SP; PA
Chemotherapy Rescue/Antidote/Protective Agents		
IWILFIN	PA	SP; PA
leucovorin calcium TABS	P	
mesna TABS	P	SP
MESNEX TABS	P	SP
Mitotic Inhibitors		
etoposide CAPS	PA	SP; PA
VEPESID CAPS *(Use etoposide)*	PA	PA
Topoisomerase I Inhibitors		
HYCAMTIN CAPS	PA	SP; PA
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease		
Antiparkinson Adjunctive Therapy		
carbidopa	NP	
NOURIANZ	NP	
Antiparkinson Anticholinergics		
benztropine mesylate SOLN	P	
benztropine mesylate TABS	P	

Drug Name	Drug Tier	Requirements/ Limits
trihexyphenidyl hcl SOLN	NP	
trihexyphenidyl hcl TABS	P	
Antiparkinson COMT Inhibitors		
entacapone	P	
ONGENTYS	NP	
Antiparkinson Dopaminergics		
amantadine hcl CAPS	P	
amantadine hcl SOLN	P	
amantadine hcl TABS	P	
APOKYN SOCT	NP	SP
apomorphine hydrochloride SOCT	NP	SP
bromocriptine mesylate CAPS	NP	
bromocriptine mesylate TABS 2.5 MG	NP	
carbidopa-levodopa-entacapone	P	
carbidopa-levodopa CPCR	NP	
carbidopa-levodopa TABS	P	
carbidopa-levodopa TBCR	P	
carbidopa-levodopa TBDP	P	
CREXONT CPCR	NP	
DHIVY TABS	NP	
DUOPA SUSP	NP	
GOCOVRI CP24	NP	SP
INBRIJA CAPS	NP	
JUVMO TITRATION PACK TBPK PO	NP	
JUVMO TABS PO 5 MG, 10 MG, 15 MG	NP	
NEUPRO	NP	
ONAPGO SOCT 98 MG/20ML	NP	AL(At least 18 yrs old); SP
pramipexole dihydrochloride TABS	P	

Drug Name	Drug Tier	Requirements/ Limits
pramipexole dihydrochloride TB24	NP	
ropinirole hydrochloride TABS	P	
ropinirole hydrochloride TB24	NP	
RYTARY CPCR 145 MG-36.25 MG, 195 MG-48.75 MG, 245 MG-61.25 MG, 95 MG-23.75 MG *(Use carbidopa-levodopa)*	NP	
SINEMET TABS 100 MG-10 MG *(Use carbidopa-levodopa)*	NP	
VYALEV SOLN SC	NP	SP
Antiparkinson Monoamine Oxidase Inhibitors		
AZILECT *(Use rasagiline mesylate)*	NP	
rasagiline mesylate	NP	
selegiline hcl CAPS	NP	
selegiline hcl TABS	NP	
XADAGO	NP	
ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
Antimanic Agents		
lithium	P	
lithium carbonate CAPS	P	
lithium carbonate TABS	P	
lithium carbonate TBCR	P	
Antipsychotics - Misc.		
CAPLYTA	NP	AL(At least 18 yrs old)
EQUETRO	NP	
GEODON *(Use ziprasidone hcl)*	NP	AL(At least 18 yrs old)
LATUDA *(Use lurasidone hcl)*	NP	AL(At least 18 yrs old)
lurasidone hcl	P	AL(At least 18 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
NUPLAZID CAPS	PA	AL(At least 18 yrs old); PA
NUPLAZID TABS 10 MG	PA	AL(At least 18 yrs old); PA
VRAYLAR CAPS	P	AL(At least 18 yrs old)
ziprasidone hcl	P	AL(At least 18 yrs old)
Benzisoxazoles		
BYSANTI TITRATION PACK A TBPK PO	NP	AL(At least 18 yrs old)
BYSANTI TITRATION PACK B TBPK PO	NP	AL(At least 18 yrs old)
BYSANTI TITRATION PACK C TBPK PO	NP	AL(At least 18 yrs old)
BYSANTI TABS PO 1 MG, 2 MG, 4 MG, 6 MG, 8 MG, 10 MG, 12 MG	NP	AL(At least 18 yrs old)
ERZOFRI	PA	AL(At least 18 yrs old); SP; PA
FANAPT	NP	AL(At least 18 yrs old)
FANAPT TITRATION PACK A	NP	AL(At least 18 yrs old)
FANAPT TITRATION PACK B	NP	AL(At least 18 yrs old)
FANAPT TITRATION PACK C	NP	AL(At least 18 yrs old)
INVEGA 3 MG, 6 MG, 9 MG *(Use paliperidone)*	NP	AL(At least 18 yrs old)
INVEGA HAFYERA 1560 MG/5ML	PA	QL(0.03 ML daily); AL(At least 18 yrs old); SP; PA
INVEGA HAFYERA 1092 MG/3.5ML	PA	QL(0.021 ML daily); AL(At least 18 yrs old); SP; PA
INVEGA SUSTENNA	PA	AL(At least 18 yrs old); SP; PA
INVEGA TRINZA 273 MG/0.88ML	PA	QL(0.011 ML daily); AL(At least 18 yrs old); SP; PA
INVEGA TRINZA 410 MG/1.32ML	PA	QL(0.016 ML daily); AL(At least 18 yrs old); SP; PA
INVEGA TRINZA 819 MG/2.63ML	PA	QL(0.032 ML daily); AL(At least 18 yrs old); SP; PA
INVEGA TRINZA 546 MG/1.75ML	PA	QL(0.021 ML daily); AL(At least 18 yrs old); SP; PA
paliperidone	P	AL(At least 18 yrs old)
PERSERIS PRSY	PA	AL(At least 18 yrs old); SP; PA
RISPERDAL CONSTA *(Use risperidone microspheres)*	PA	AL(At least 18 yrs old); SP; PA
RISPERDAL SOLN *(Use risperidone)*	NP	AL(At least 18 yrs old)
RISPERDAL TABS 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG *(Use risperidone)*	NP	AL(At least 18 yrs old)
risperidone microspheres	NP	AL(At least 18 yrs old); SP
risperidone SOLN	P	AL(At least 18 yrs old)
risperidone TABS	P	AL(At least 18 yrs old)
risperidone TBDP	P	AL(At least 18 yrs old)
RYKINDO SRER	NP	AL(At least 18 yrs old); SP
UZEDY SUSY	PA	AL(At least 18 yrs old); SP; PA
Butyrophenones		
haloperidol decanoate	P	
haloperidol lactate CONC	P	
haloperidol lactate SOLN	P	
haloperidol TABS 0.5 MG, 1 MG, 10 MG	P	QL(3 EA daily)
haloperidol TABS 2 MG, 5 MG, 20 MG	P	

Drug Name	Drug Tier	Requirements/ Limits
Dibenzapines		
asenapine maleate	P	AL(At least 18 yrs old)
clozapine TABS	P	AL(At least 18 yrs old)
clozapine TBDP	P	AL(At least 18 yrs old)
CLOZARIL TABS 25 MG, 100 MG *(Use clozapine)*	NP	AL(At least 18 yrs old)
loxapine succinate	P	QL(4 EA daily)
olanzapine TABS	P	AL(At least 18 yrs old)
olanzapine TBDP	P	AL(At least 18 yrs old)
quetiapine fumarate TABS	P	AL(At least 18 yrs old)
quetiapine fumarate TB24	P	AL(At least 18 yrs old)
SAPHRIS *(Use asenapine maleate)*	NP	AL(At least 18 yrs old)
SECUADO	NP	AL(At least 18 yrs old)
SEROQUEL XR TB24 *(Use quetiapine fumarate)*	NP	AL(At least 18 yrs old)
SEROQUEL TABS *(Use quetiapine fumarate)*	NP	AL(At least 18 yrs old)
VERSACLOZ SUSP	NP	AL(At least 18 yrs old)
ZYPREXA RELPREVV	PA	AL(At least 18 yrs old); SP; PA
ZYPREXA ZYDIS TBDP *(Use olanzapine)*	NP	AL(At least 18 yrs old)
ZYPREXA TABS *(Use olanzapine)*	NP	AL(At least 18 yrs old)
Dihydroindolones		
molindone hcl	P	
Muscarinic Agents		
COBENFY STARTER PACK CPPK	P	AL(At least 18 yrs old)
COBENFY CAPS	P	AL(At least 18 yrs old)
Phenothiazines		
chlorpromazine hcl SOLN 25 MG/ML	P	
chlorpromazine hcl TABS 25 MG, 50 MG, 100 MG, 200 MG	P	QL(3 EA daily)
chlorpromazine hcl TABS 10 MG	P	QL(10 EA daily)
fluphenazine decanoate	P	
fluphenazine hcl CONC	P	
fluphenazine hcl ELIX	P	
fluphenazine hcl SOLN	P	
fluphenazine hcl TABS	P	
perphenazine TABS	P	QL(4 EA daily)
prochlorperazine	P	
prochlorperazine edisylate 10 MG/2ML	P	
prochlorperazine maleate TABS	P	
thioridazine hcl	P	QL(3 EA daily)
trifluoperazine hcl TABS	P	QL(3 EA daily)
Quinolinone Derivatives		
ABILIFY ASIMTUFII PRSY	PA	AL(At least 18 yrs old); SP; PA
ABILIFY MAINTENA PRSY	PA	AL(At least 18 yrs old); SP; PA
ABILIFY MAINTENA SRER	PA	AL(At least 18 yrs old); SP; PA
ABILIFY MYCITE MAINTENANCE KIT	NP	AL(At least 18 yrs old); SP
ABILIFY MYCITE STARTER KIT 2 MG, 10 MG, 15 MG, 20 MG, 30 MG	NP	AL(At least 18 yrs old); SP
ABILIFY TABS *(Use aripiprazole)*	NP	AL(At least 18 yrs old)
aripiprazole SOLN PO	P	AL(At least 18 yrs old)
aripiprazole TABS	P	AL(At least 18 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
aripiprazole TBDP	P	AL(At least 18 yrs old)
ARISTADA 441 MG/1.6ML, 662 MG/2.4ML	PA	AL(At least 18 yrs old); SP; PA
ARISTADA 882 MG/3.2ML, 1064 MG/3.9ML	PA	AL(At least 18 yrs old); SP; PA
ARISTADA INITIO	PA	AL(At least 18 yrs old); SP; PA
OPIPZA FILM	NP	AL(At least 18 yrs old)
REXULTI	P	AL(At least 18 yrs old)
Thioxanthenes		
thiothixene	P	QL(3 EA daily)
ANTISEPTICS & DISINFECTANTS		
Antiseptics & Disinfectants		
FORMALDEHYDE SOLN	P	QL(90 ML per fill retail; 90 per fill mail)
Chlorine Antiseptics		
chlorhexidine gluconate SOLN EX 4 %	P	
sodium hypochlorite SOLN EX	P	
Iodine Antiseptics		
povidone-iodine SOLN 10 %	P	
ANTIVIRALS - Drugs to Treat Viral Infections		
Antiretrovirals		
abacavir sulfate-lamivudine	P	QL(1 EA daily)
abacavir sulfate SOLN	P	QL(30 ML daily)
abacavir sulfate TABS	P	QL(2 EA daily)
APRETUDE	P	
APTIVUS CAPS	P	QL(4 EA daily)
atazanavir sulfate CAPS	P	QL(2 EA daily)
BIKTARVY	P	QL(1 EA daily)
BIXLENVO SUNLENCA STARTER PACK TBPK PO	P	
BIXLENVO TABS PO	P	
CABENUVA 600 MG/2ML-400 MG/2ML	PA	PA
CABENUVA 900 MG/3ML-600 MG/3ML	PA	PA
CIMDUO	P	QL(1 EA daily)
darunavir TABS 800 MG	P	QL(1 EA daily)
darunavir TABS 600 MG	P	QL(2 EA daily)
DELSTRIGO	P	QL(1 EA daily)
DESCOVY	P	QL(1 EA daily)
DOVATO	P	
EDURANT PED PO 2.5 MG	P	
efavirenz-emtricitabine-tenofovir disoproxil fumarate	P	QL(1 EA daily)
efavirenz-lamivudine-tenofovir disoproxil fumarate	P	QL(1 EA daily)
efavirenz CAPS 50 MG	P	QL(2 EA daily)
efavirenz CAPS 200 MG	P	QL(1 EA daily)
efavirenz TABS	P	QL(1 EA daily)
emtricitabine-rilpivirine-tenofovir disoproxil fumarate	P	QL(1 EA daily)
emtricitabine-tenofovir disoproxil fumarate	P	QL(1 EA daily)
emtricitabine CAPS	P	QL(1 EA daily)
EMTRIVA SOLN	P	QL(24 ML daily)
etravirine 100 MG	P	QL(4 EA daily)
etravirine 200 MG	P	QL(2 EA daily)
EVOTAZ	P	QL(1 EA daily)
fosamprenavir calcium TABS	P	QL(4 EA daily)
FUZEON SOLR	P	SP
GENVOYA	P	QL(1 EA daily)
IDVYNSO TABS PO	P	

Drug Name	Drug Tier	Requirements/ Limits
INTELENCE 25 MG	P	QL(4 EA daily)
ISENTRESS HD TABS	P	QL(2 EA daily)
ISENTRESS CHEW 100 MG	P	QL(6 EA daily)
ISENTRESS CHEW 25 MG	P	QL(12 EA daily)
ISENTRESS PACK	P	QL(2 EA daily)
ISENTRESS TABS	P	QL(2 EA daily)
JULUCA	P	
KALETRA SOLN	P	QL(160 ML per fill retail; 160 per fill mail)
lamivudine-zidovudine	P	QL(2 EA daily)
lamivudine SOLN	P	QL(30 ML daily)
lamivudine TABS 150 MG	P	QL(2 EA daily)
lamivudine TABS 300 MG	P	QL(1 EA daily)
lopinavir-ritonavir SOLN	P	QL(160 ML per fill retail; 160 per fill mail)
lopinavir-ritonavir TABS 50 MG-200 MG	P	QL(6 EA daily)
lopinavir-ritonavir TABS 25 MG-100 MG	P	QL(4 EA daily)
maraviroc TABS 300 MG	P	QL(4 EA daily)
maraviroc TABS 150 MG	P	QL(2 EA daily)
nevirapine SUSP	P	QL(40 ML daily)
nevirapine TABS	P	QL(2 EA daily)
nevirapine TB24 400 MG	P	QL(1 EA daily)
NORVIR PACK	P	QL(12 EA daily)
ODEFSEY	P	QL(1 EA daily)
PIFELTRO	P	QL(1 EA daily)
PREZCOBIX	P	
PREZISTA SUSP	P	QL(12 ML daily)
PREZISTA TABS 150 MG	P	QL(3 EA daily)
PREZISTA TABS 75 MG	P	QL(2 EA daily)
RETROVIR SOLN	P	
REYATAZ PACK	P	QL(6 EA daily)
rilpivirine hcl 25 MG	P	QL(1 EA daily)
ritonavir TABS	P	QL(12 EA daily)
RUKOBIA	P	
SELZENTRY SOLN	P	
STRIBILD	P	QL(1 EA daily)
SUNLENCA SOLN	P	SP
SUNLENCA TABS PO 300 MG	P	SP
SUNLENCA TBPK 300 MG	P	SP
SYMTUZA	P	QL(1 EA daily)
tenofovir disoproxil fumarate TABS	P	QL(1 EA daily)
TIVICAY PD TBSO	P	
TIVICAY TABS 50 MG	P	
TRIUMEQ PD TBSO	P	
TRIUMEQ TABS	P	QL(1 EA daily)
TROGARZO	P	SP
TYBOST	P	QL(1 EA daily)
VIRACEPT TABS 625 MG	P	QL(4 EA daily)
VIRACEPT TABS 250 MG	P	QL(9 EA daily)
VIREAD POWD	P	QL(8 GM daily)
VIREAD TABS 150 MG, 200 MG, 250 MG	P	QL(1 EA daily)
YEZTUGO SOLN 463.5 MG/1.5ML	P	SP
YEZTUGO TABS PO 300 MG	P	SP
zidovudine CAPS	P	QL(6 EA daily)
zidovudine SYRP	P	QL(60 ML daily)
zidovudine TABS	P	QL(2 EA daily)
Antiviral Combinations		
PAXLOVID (150/100)	P	QL(20 EA per fill retail; 20 per fill mail); AL(At least 12 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
PAXLOVID (300/100 & 150/100)	P	QL(11 EA per fill retail; 11 per fill mail); AL(At least 12 yrs old)
PAXLOVID (300/100)	P	QL(30 EA per fill retail; 30 per fill mail); AL(At least 12 yrs old)
CMV Agents		
LIVTENCITY	PA	AL(At least 12 yrs old); SP; PA
valganciclovir hcl TABS	P	QL(2 EA daily)
Hepatitis Agents		
adefovir dipivoxil	P	
entecavir TABS	P	
EPCLUSA PACK	NP	SP
EPCLUSA TABS	NP	SP
EPCLUSA TABS	NP	SP
HARVONI PACK	NP	QL(28 EA per 25 day(s) retail; 28 EA per 25 days mail); SP
HARVONI TABS	NP	QL(28 EA per 25 day(s) retail; 28 EA per 25 days mail); SP
HARVONI TABS	NP	QL(28 EA per 25 day(s) retail; 28 EA per 25 days mail); SP
LEDIPASVIR-SOFOSBUVIR TABS	NP	QL(28 EA per 25 day(s) retail; 28 EA per 25 days mail); SP
MAVYRET PACK	PA	SP; PA
MAVYRET TABS	PA	SP; PA
PEGASYS SOLN	P	SP
PEGASYS SOSY	P	SP
ribavirin (hepatitis c) CAPS	P	SP
ribavirin (hepatitis c) TABS 200 MG	P	SP
SOFOSBUVIR-VELPATASVIR TABS	PA	SP; PA
SOVALDI PACK	NP	QL(28 EA per 25 day(s) retail; 28 EA per 25 days mail); SP
SOVALDI TABS	NP	QL(28 EA per fill retail; 28 per fill mail ; 28 EA per 25 day(s) retail; 28 EA per 25 days mail); SP
VOSEVI	NP	SP
ZEPATIER	NP	SP
Herpes Agents		
acyclovir CAPS	P	
acyclovir SUSP	P	
acyclovir TABS PO	P	
famciclovir	P	
valacyclovir hcl	P	
VALTREX *(Use valacyclovir hcl)*	NP	
Influenza Agents		
oseltamivir phosphate CAPS	P	
oseltamivir phosphate SUSR	P	
RAPIVAB	NP	
RELENZA DISKHALER	P	
rimantadine hydrochloride TABS	P	
TAMIFLU CAPS 75 MG *(Use oseltamivir phosphate)*	NP	
TAMIFLU SUSR *(Use oseltamivir phosphate)*	NP	
XOFLUZA (40 MG DOSE) 40 MG	NP	

Drug Name	Drug Tier	Requirements/ Limits
XOFLUZA (80 MG DOSE) 80 MG	NP	
BETA BLOCKERS - Drugs to Treat High Blood Pressure		
Alpha-Beta Blockers		
carvedilol	P	MP
carvedilol phosphate	NP	MP
labetalol hcl TABS	P	MP
Beta Blockers Cardio-Selective		
acebutolol hcl CAPS	P	MP
atenolol TABS	P	MP
betaxolol hcl	NP	MP
bisoprolol fumarate	P	MP
BYSTOLIC *(Use nebivolol hcl)*	NP	MP
KAPSPARGO SPRINKLE CS24	NP	MP
LOPRESSOR SOLN PO 10 MG/ML	NP	MP
LOPRESSOR TABS *(Use metoprolol tartrate)*	NP	MP
metoprolol succinate TB24	P	MP
metoprolol tartrate SOLN IV 5 MG/5ML	P	MP
metoprolol tartrate TABS	P	MP
nebivolol hcl	P	MP
TENORMIN TABS *(Use atenolol)*	NP	MP
TOPROL XL TB24 *(Use metoprolol succinate)*	NP	MP
Beta Blockers Non-Selective		
BETAPACE AF *(Use sotalol hcl (afib/afl))*	NP	MP
BETAPACE TABS 80 MG, 120 MG, 160 MG *(Use sotalol hcl)*	NP	MP
HEMANGEOL SOLN PO	PA	SP; MP; PA
HEMANGEOL SOLN PO	PA	SP; MP; PA
INDERAL LA CP24 *(Use propranolol hcl)*	NP	MP
INDERAL XL	NP	MP
INNOPRAN XL	NP	MP
nadolol TABS 20 MG, 40 MG, 80 MG	P	MP
pindolol TABS	NP	MP
propranolol hcl CP24	P	MP
propranolol hcl SOLN PO 20 MG/5ML, 40 MG/5ML	P	MP
propranolol hcl TABS	P	MP
sotalol hcl (afib/afl)	P	MP
sotalol hcl TABS	P	MP
SOTYLIZE SOLN PO	NP	MP
timolol maleate TABS	NP	MP
CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure		
Calcium Channel Blockers		
amlodipine besylate TABS	P	MP
diltiazem hcl coated beads CP24	P	MP
diltiazem hcl extended release beads	P	MP
diltiazem hcl CP12	P	MP
diltiazem hcl CP24	P	MP
diltiazem hcl TABS	P	MP
diltiazem hcl TB24	P	MP
diltiazem hcl TB24 180 MG, 240 MG, 300 MG, 360 MG, 420 MG	NP	MP
felodipine	P	MP
isradipine CAPS	NP	MP
KATERZIA	NP	MP
nicardipine hcl CAPS	P	MP
nifedipine CAPS	P	MP
nifedipine TB24	P	MP
nisoldipine 8.5 MG, 17 MG, 34 MG	NP	MP

Drug Name	Drug Tier	Requirements/ Limits
NORLIQVA SOLN	NP	MP
NORVASC TABS *(Use amlodipine besylate)*	NP	MP
NYMALIZE SOLN 6 MG/ML	NP	MP
PROCARDIA XL TB24 30 MG, 60 MG *(Use nifedipine)*	NP	MP
SDAMLO SOLR PO 2.5 MG, 5 MG, 10 MG	NP	MP
SULAR 8.5 MG, 17 MG, 34 MG *(Use nisoldipine)*	NP	MP
VERAPAMIL HCL ER CP24 *(Use verapamil hcl)*	P	MP
verapamil hcl CP24	P	MP
verapamil hcl SOLN 2.5 MG/ML	P	MP
verapamil hcl TABS	P	MP
verapamil hcl TBCR	P	MP
VERELAN PM CP24 *(Use verapamil hcl)*	NP	MP
CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm		
Cardiac Glycosides		
digoxin SOLN PO 0.05 MG/ML	P	
digoxin TABS 125 MCG, 250 MCG	P	
CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions		
Cardiovascular Agents Misc. - Combinations		
amlodipine besylate-atorvastatin calcium	NP	MP
CADUET 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG *(Use amlodipine besylate-atorvastatin calcium)*	NP	MP

Drug Name	Drug Tier	Requirements/ Limits
ENTRESTO CPSP	NP	QL(2 EA daily); AL(At least 1 yrs old); MP
ENTRESTO TABS 103 MG-97 MG, 26 MG-24 MG, 51 MG-49 MG *(Use sacubitril-valsartan)*	NP	QL(2 EA daily); AL(At least 1 yrs old); MP
OPSYNVI	NP	SP
sacubitril-valsartan TABS	PA	QL(2 EA daily); AL(At least 1 yrs old); MP; PA
Cardiovascular Sodium-Glucose Co-Transporter 2 Inhibitors		
INPEFA	NP	MP
Impotence Agents		
CIALIS 5 MG *(Use tadalafil)*	PA	PA
tadalafil 5 MG	PA	PA
Prostaglandin Vasodilators		
ORENITRAM MONTH 1 TEPK	PA	SP; PA
ORENITRAM MONTH 2 TEPK	PA	SP; PA
ORENITRAM MONTH 3 TEPK	PA	SP; PA
ORENITRAM TBCR	PA	SP; PA
TYVASO DPI INSTITUTIONAL KIT POWD	NP	SP
TYVASO DPI MAINTENANCE KIT POWD	NP	SP
TYVASO DPI TITRATION KIT POWD	NP	SP
TYVASO REFILL KIT SOLN IN	NP	SP
TYVASO STARTER KIT SOLN IN	NP	SP
TYVASO SOLN IN	NP	SP

Drug Name	Drug Tier	Requirements/ Limits
YUTREPIA CAPS IN 26.5 MCG, 53 MCG, 79.5 MCG, 106 MCG	PA	AL(At least 18 yrs old); SP; PA
Pulmonary Hypertension - Activin Signaling Inhibitor		
WINREVAIR	PA	AL(At least 18 yrs old); SP; PA
Pulmonary Hypertension - Endothelin Receptor Antagonists		
ambrisentan	PA	SP; PA
bosentan TABS	PA	SP; PA
bosentan TBSO 32 MG	NP	SP
LETAIRIS *(Use ambrisentan)*	NP	SP
macitentan 10 MG	NP	
macitentan 10 MG	PA	SP; PA
OPSUMIT 10 MG *(Use macitentan)*	NP	SP
TRACLEER TABS *(Use bosentan)*	NP	SP
TRACLEER TBSO 32 MG *(Use bosentan)*	NP	SP
Pulmonary Hypertension - Phosphodiesterase Inhibitors		
ADCIRCA TABS *(Use tadalafil (pulmonary hypertension))*	NP	SP
REVATIO TABS *(Use sildenafil citrate (pulmonary hypertension))*	NP	SP
sildenafil citrate (pulmonary hypertension) SOLN	P	SP
sildenafil citrate (pulmonary hypertension) SUSR	PA	SP; PA
sildenafil citrate (pulmonary hypertension) TABS	PA	SP; PA
tadalafil (pulmonary hypertension) TABS	NP	SP
tadalafil (pulmonary hypertension) TABS	PA	SP; PA
TADLIQ SUSP	NP	SP
Pulmonary Hypertension - Prostacyclin Receptor Agonist		
UPTRAVI TITRATION TBPK	NP	SP
UPTRAVI SOLR	NP	SP
UPTRAVI TABS	NP	SP
Pulmonary Hypertension - Sol Guanylate Cyclase Stimulator		
ADEMPAS	NP	SP
riociguat 0.5 MG, 1 MG, 1.5 MG, 2 MG, 2.5 MG	NP	
Sinus Node Inhibitors		
CORLANOR SOLN	NP	QL(15 ML daily); AL(At least 1 yrs old); SP; MP
CORLANOR TABS *(Use ivabradine hcl)*	NP	QL(2 EA daily); AL(At least 18 yrs old); MP
ivabradine hcl TABS	PA	QL(2 EA daily); AL(At least 18 yrs old); MP; PA
Transthyretin Stabilizers		
ATTRUBY	PA	QL(4 EA daily); AL(At least 18 yrs old); SP; PA
VYNDAMAX	PA	QL(1 EA daily); AL(At least 18 yrs old); SP; PA
VYNDAQEL	P	QL(4 EA daily); SP; PA
Vasoactive Soluble Guanylate Cyclase Stimulator (sGC)		

Drug Name	Drug Tier	Requirements/ Limits
VERQUVO	NP	MP
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporins - 1st Generation		
cefadroxil CAPS	P	
cefadroxil SUSR	P	
cefadroxil TABS	P	
cephalexin CAPS 250 MG, 500 MG	P	
cephalexin SUSR	P	
Cephalosporins - 2nd Generation		
CEFACLOR ER TB12	NP	
cefaclor CAPS	P	
cefprozil SUSR	P	
cefprozil TABS	P	
cefuroxime axetil TABS	P	
Cephalosporins - 3rd Generation		
cefdinir CAPS	PA	PA
cefdinir SUSR	PA	PA
cefixime CAPS	NP	
cefixime SUSR	NP	
cefixime TABS	NP	
cefpodoxime proxetil SUSR	PA	PA
cefpodoxime proxetil TABS	PA	PA
ceftriaxone sodium IJ 1 GM, 2 GM, 250 MG, 500 MG	PA	PA
CONTRACEPTIVES - Drugs to Prevent Pregnancy		
Combination Contraceptives - Oral		
AVERI TABS PO	P	
desogestrel & ethinyl estradiol	P	QL(1 EA daily)
desogestrel-ethinyl estradiol (biphasic)	P	QL(1 EA daily)
desogestrel-ethinyl estradiol (triphasic)	P	QL(1 EA daily)
drospirenone-ethinyl estradiol	P	QL(1 EA daily)
drospirenone-ethinyl estradiol-levomefolate calcium	P	QL(1 EA daily)
ethynodiol diacet & eth estrad	P	QL(1 EA daily)
FEMLYV TBDP	P	
levonorgestrel & eth estradiol TABS	P	QL(1 EA daily)
levonorgestrel-eth estradiol (triphasic)	P	QL(1 EA daily)
levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG	P	QL(1 EA daily)
levonorgestrel-ethinyl estradiol (continuous)	P	QL(1 EA daily)
levonorgestrel-ethinyl estradiol-iron	P	QL(1 EA daily)
LO LOESTRIN FE TABS	P	QL(1 EA daily)
NATAZIA	P	QL(1 EA daily)
NEXTSTELLIS	P	QL(1 EA daily)
norethin acet & estrad-fe CAPS	P	QL(1 EA daily)
norethin acet & estrad-fe CHEW	P	QL(1 EA daily)
norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG	P	QL(1 EA daily)
norethindrone & eth estradiol	P	QL(1 EA daily)
norethindrone & ethinyl estradiol-fe	P	
norethindrone acet & eth estra TABS	P	QL(1 EA daily)
norethindrone acetate-ethinyl estradiol-fe	P	
norethindrone-eth estradiol (triphasic)	P	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
norgestimate-ethinyl estradiol	P	QL(1 EA daily)
norgestimate-ethinyl estradiol (triphasic)	P	QL(1 EA daily)
norgestrel & ethinyl estradiol 30 MCG-0.3 MG	P	QL(1 EA daily)
TYBLUME CHEW	P	QL(1 EA daily)
Combination Contraceptives - Transdermal		
norelgestromin-ethinyl estradiol	P	QL(0.11 EA daily)
TWIRLA	P	QL(1 EA daily)
Combination Contraceptives - Vaginal		
ANNOVERA	P	QL(1 EA daily)
etonogestrel-ethinyl estradiol	P	13 max fill(s) per 365 day(s) retail
Copper Contraceptives - IUD		
MIUDELLA	P	SP
PARAGARD INTRAUTERINE COPPER	P	SP
Emergency Contraceptives		
ELLA	P	QL(6 EA per 365 day(s) retail; 6 EA per 365 days mail)
levonorgestrel (emergency oc) 1.5 MG	P	QL(6 EA per 365 day(s) retail; 6 EA per 365 days mail)
Progestin Contraceptives - Implants		
NEXPLANON	P	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); SP
Progestin Contraceptives - Injectable		
DEPO-SUBQ PROVERA 104 SUSY SC	P	QL(1 ML per fill retail; 1 per fill mail)
medroxyprogesterone acetate (contraceptive) SUSP IM	P	QL(1 ML per fill retail; 1 per fill mail)
medroxyprogesterone acetate (contraceptive) SUSY IM	P	QL(1 ML per fill retail; 1 per fill mail)
Progestin Contraceptives - IUD		
KYLEENA	P	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); SP
LILETTA (52 MG)	P	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); SP
MIRENA (52 MG)	P	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); SP
SKYLA	P	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); SP
Progestin Contraceptives - Oral		
norethindrone (contraceptive)	P	QL(1 EA daily)
OPILL	P	
SLYND	P	QL(1 EA daily)
CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions		
Glucocorticosteroids		
AGAMREE	PA	AL(At least 2 yrs old); SP; PA
budesonide CPEP	NP	
budesonide TB24	NP	
CORTISONE ACETATE TABS	P	
deflazacort SUSP	NP	

Drug Name	Drug Tier	Requirements/ Limits
deflazacort SUSP	NP	SP
deflazacort TABS	NP	SP
deflazacort TABS	NP	
DEXAMETHASONE INTENSOL CONC	P	
dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML	P	QL(5 ML daily)
DEXAMETHASONE SODIUM PHOSPHATE SOLN IJ 4 MG/ML	P	QL(5 ML daily)
dexamethasone sodium phosphate SOSY IJ 4 MG/ML	P	QL(5 ML daily)
dexamethasone ELIX	P	
dexamethasone SOLN	P	
dexamethasone TABS	P	
EMFLAZA SUSP *(Use deflazacort)*	NP	SP
EMFLAZA TABS *(Use deflazacort)*	PA	SP; PA
EOHILIA SUSP	PA	QL(20 ML daily); AL(At least 11 yrs old); PA
hydrocortisone TABS	P	
methylprednisolone TABS 4 MG, 8 MG	P	
methylprednisolone TBPK	P	
prednisolone sodium phosphate SOLN 20 MG/5ML	P	QL(150 ML per fill retail; 150 per fill mail)
prednisolone sodium phosphate SOLN 5 MG/5ML	P	
prednisolone sodium phosphate SOLN 15 MG/5ML	P	QL(240 ML per fill retail; 240 per fill mail)
prednisolone SOLN	P	
prednisolone TABS	P	
PREDNISONE INTENSOL CONC	P	
prednisone SOLN	P	
prednisone TABS	P	
prednisone TBEC 1 MG, 2 MG, 5 MG	PA	PA
prednisone TBPK	P	
Mineralocorticoids		
fludrocortisone acetate TABS	P	
COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms		
Antitussives		
benzonatate 100 MG	P	AL(At least 10 yrs old)
benzonatate 200 MG	P	QL(1 EA daily); AL(At least 10 yrs old)
dextromethorphan polistirex SUER	P	
hydrocodone bitartrate-homatropine methylbromide SOLN	P	AL(At least 18 yrs old)
Cough/Cold/Allergy Combinations		
brompheniramine & phenyleph ELIX	P	QL(120 ML per fill retail; 120 per fill mail)
brompheniramine & pseudoeph ELIX	P	QL(120 ML per fill retail; 120 per fill mail)
brompheniramine & pseudoeph LIQD 15 MG/5ML-1 MG/5ML	P	QL(120 ML per fill retail; 120 per fill mail)
cetirizine-pseudoephedrine	NP	
CLARINEX-D 12 HOUR TB12	NP	
dextromethorphan-doxylamine-acetaminophen LIQD	P	

Drug Name	Drug Tier	Requirements/ Limits
dextromethorphan-guaifenesin LIQD 100 MG/5ML-10 MG/5ML, 100 MG/5ML-5 MG/5ML, 150 MG/7.5ML-15 MG/7.5ML, 200 MG/10ML-20 MG/10ML, 200 MG/5ML-10 MG/5ML, 400 MG/20ML-20 MG/20ML	P	
dextromethorphan-guaifenesin SYRP 100 MG/5ML-10 MG/5ML, 200 MG/10ML-20 MG/10ML	P	
dextromethorphan-guaifenesin TABS 400 MG-20 MG	P	
dextromethorphan-guaifenesin TB12 600 MG-30 MG	P	
dextromethorphan-phenylephrine-acetaminophen CAPS	P	
fexofenadine-pseudoephedrine TB12	NP	
fexofenadine-pseudoephedrine TB24	NP	
guaifenesin-codeine SOLN	P	QL(240 ML per fill retail; 240 per fill mail)
LOHIST-D LIQD	P	
loratadine & pseudoephedrine TB12	P	
loratadine & pseudoephedrine TB24	P	
MAXI-TUSS PE ELIX 5 MG/5ML-2 MG/5ML	P	QL(120 ML per fill retail; 120 per fill mail)
phenylephrine-chlorphen-dm LIQD 10 MG/5ML-4 MG/5ML-15 MG/5ML	P	
phenylephrine-dm LIQD 2.5 MG/5ML-5 MG/5ML	P	QL(240 ML per fill retail; 240 per fill mail)
phenylephrine-dm SOLN	P	QL(240 ML per fill retail; 240 per fill mail)
phenylephrine-guaifenesin LIQD 5 MG/5ML-100 MG/5ML	P	
promethazine & phenylephrine SYRP	P	
promethazine w/codeine SOLN	P	QL(240 ML per fill retail; 240 per fill mail); AL(At least 18 yrs old)
promethazine w/codeine SYRP	P	QL(240 ML per fill retail; 240 per fill mail); AL(At least 18 yrs old)
promethazine-dm SYRP	P	
pseudoephed-bromphen-dm SYRP 10 MG/5ML-30 MG/5ML-2 MG/5ML	P	
pseudoephedrine-guaifenesin TB12 1200 MG-120 MG, 600 MG-60 MG	P	
pseudoephedrine-ibuprofen TABS	P	
Expectorants		
GERI-TUSSIN SYRP	P	
guaifenesin LIQD	P	
guaifenesin TB12	P	
Misc. Respiratory Inhalants		
sodium chloride (inhalant) NEBU 0.9 %, 3 %, 10 %	P	
Mucolytics		
acetylcysteine SOLN	P	
DERMATOLOGICALS - Drugs to Treat Skin Conditions		
Acne Products		
adapalene-benzoyl peroxide GEL	NP	AL(Up to 20 yrs old)
adapalene CREA	NP	AL(Up to 20 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
adapalene GEL	NP	AL(Up to 20 yrs old)
adapalene GEL	P	AL(Up to 20 yrs old); RX/OTC
AKLIEF	NP	AL(Up to 20 yrs old)
benzoyl peroxide-erythromycin GEL	P	AL(Up to 20 yrs old)
benzoyl peroxide BAR	P	
benzoyl peroxide CREA 10 %	P	
benzoyl peroxide GEL 2.5 %, 5 %, 10 %	P	AL(Up to 20 yrs old)
benzoyl peroxide LIQD 5 %, 10 %	P	AL(Up to 20 yrs old)
benzoyl peroxide LIQD 4 %	P	
benzoyl peroxide LOTN 10 %	P	AL(Up to 20 yrs old)
BPO FOAMING CLOTHS MISC 6 %	NP	RX/OTC
CLEOCIN-T LOTN *(Use clindamycin phosphate (topical))*	NP	AL(Up to 20 yrs old)
clindamycin phosphate (topical) FOAM	NP	AL(Up to 20 yrs old)
clindamycin phosphate (topical) GEL	P	AL(Up to 20 yrs old)
clindamycin phosphate (topical) LOTN	P	AL(Up to 20 yrs old)
clindamycin phosphate (topical) SOLN	P	AL(Up to 20 yrs old)
clindamycin phosphate (topical) SWAB	P	AL(Up to 20 yrs old)
clindamycin phosphate-benzoyl peroxide (refrigerate)	P	AL(Up to 20 yrs old)
clindamycin phosphate-benzoyl peroxide GEL	NP	AL(Up to 20 yrs old)
clindamycin phosphate-tretinoin	NP	AL(Up to 20 yrs old)
dapsone (topical)	NP	AL(Up to 20 yrs old)
EPIDUO FORTE GEL *(Use adapalene-benzoyl peroxide)*	NP	AL(Up to 20 yrs old)
EPSOLAY CREA	NP	AL(Up to 20 yrs old)
erythromycin (acne aid) GEL	NP	AL(Up to 20 yrs old)
erythromycin (acne aid) PADS	NP	AL(Up to 20 yrs old)
erythromycin (acne aid) SOLN	NP	AL(Up to 20 yrs old)
isotretinoin 10 MG, 20 MG, 40 MG	P	QL(2 EA daily); AL(At least 12 yrs old - Up to 22 yrs old); PA
SSS 10-5 CREA 10 %-5 % *(Use sulfacetamide sodium w/ sulfur)*	NP	AL(Up to 20 yrs old)
sulfacetamide sodium (acne)	NP	AL(Up to 20 yrs old)
sulfacetamide sodium w/ sulfur CREA 10 %-2 %, 10 %-5 %	NP	AL(Up to 20 yrs old)
sulfacetamide sodium w/ sulfur EMUL 10 %-1 %	NP	AL(Up to 20 yrs old)
sulfacetamide sodium w/ sulfur LIQD	NP	AL(Up to 20 yrs old)
sulfacetamide sodium w/ sulfur LOTN 9.8 %-4.8 %	NP	AL(Up to 20 yrs old)
sulfacetamide sodium w/ sulfur LOTN 10 %-5 %	P	QL(60 GM per fill retail; 60 per fill mail)
sulfacetamide sodium w/ sulfur SUSP 8 %-4 %	NP	AL(Up to 20 yrs old)
sulfacetamide sodium w/ sulfur SUSP 10 %-5 %	P	QL(30 GM per fill retail; 30 per fill mail)
SULFACETAMIDE SODIUM-SULFUR SUSP	NP	AL(Up to 20 yrs old)
SUMADAN	NP	AL(Up to 20 yrs old)
SUMADAN WASH LIQD *(Use sulfacetamide sodium w/ sulfur)*	NP	AL(Up to 20 yrs old)
SUMAXIN CP	NP	

Drug Name	Drug Tier	Requirements/ Limits
SUMAXIN PADS	NP	AL(Up to 20 yrs old)
TAZAROTENE FOAM	NP	
tretinoin microsphere 0.06 %, 0.08 %	NP	AL(Up to 20 yrs old)
tretinoin CREA 0.025 %, 0.05 %, 0.1 %	P	AL(Up to 20 yrs old)
tretinoin GEL 0.01 %, 0.025 %	P	AL(Up to 20 yrs old)
tretinoin GEL 0.05 %	NP	AL(Up to 20 yrs old)
TWYNEO	NP	AL(Up to 20 yrs old)
WINLEVI	NP	AL(Up to 20 yrs old)
Anti-inflammatory Agents - Topical		
diclofenac epolamine PTCH EX	NP	
diclofenac sodium (topical) GEL EX	NP	RX/OTC
diclofenac sodium (topical) GEL EX	P	RX/OTC
diclofenac sodium (topical) SOLN EX 1.5 %	NP	
diclofenac sodium (topical) SOLN EX 2 %	NP	QL(112 GM per fill retail; 112 per fill mail)
Antibiotics - Topical		
bacitracin (topical) OINT	P	QL(30 EA per fill retail; 30 per fill mail)
bacitracin zinc OINT	P	QL(30 EA per fill retail; 30 per fill mail)
bacitracin-polymyxin b OINT	P	
gentamicin sulfate (topical) CREA	P	QL(30 GM per fill retail; 30 per fill mail)
gentamicin sulfate (topical) OINT	P	QL(30 GM per fill retail; 30 per fill mail)
mupirocin calcium (topical)	NP	
mupirocin OINT	P	
neomycin-bacitracin-polymyxin OINT	P	QL(30 EA per fill retail; 30 per fill mail)
neomycin-polymyxin w/ pramoxine	P	QL(30 GM per fill retail; 30 per fill mail)
XEPI	NP	
Antifungals - Topical		
clotrimazole (topical) CREA	P	QL(30 GM per fill retail; 30 per fill mail); RX/OTC
clotrimazole (topical) SOLN	P	QL(30 ML per fill retail; 30 per fill mail); RX/OTC
clotrimazole w/ betamethasone CREA	P	QL(45 GM per fill retail; 45 per fill mail)
clotrimazole w/ betamethasone LOTN	P	QL(30 ML per fill retail; 30 per fill mail)
econazole nitrate CREA	P	QL(30 GM per fill retail; 30 per fill mail)
ketoconazole (topical) CREA	P	QL(60 GM per fill retail; 60 per fill mail)
ketoconazole (topical) SHAM 2 %	P	QL(120 ML per fill retail; 120 per fill mail)
miconazole nitrate (topical) CREA	P	QL(45 GM per fill retail; 45 per fill mail)
nystatin (topical) CREA	P	QL(30 GM per fill retail; 30 per fill mail)
nystatin (topical) OINT	P	QL(30 GM per fill retail; 30 per fill mail)
nystatin (topical) POWD EX	P	QL(60 GM per fill retail; 60 per fill mail)
nystatin-triamcinolone CREA	P	QL(30 GM per fill retail; 30 per fill mail)

Drug Name	Drug Tier	Requirements/ Limits
nystatin-triamcinolone OINT	P	QL(30 GM per fill retail; 30 per fill mail)
terbinafine hcl (topical) CREA	P	QL(30 GM per fill retail; 30 per fill mail)
tolnaftate CREA	P	QL(30 GM per fill retail; 30 per fill mail)
Antihistamines-Topical		
ITCH RELIEF CREA	P	
Antineoplastic or Premalignant Lesion Agents - Topical		
diclofenac sodium (actinic keratoses) EX	P	
fluorouracil (topical) CREA 5 %	P	QL(40 GM per fill retail; 40 per fill mail)
fluorouracil (topical) CREA 0.5 %	P	
fluorouracil (topical) SOLN	P	QL(10 ML per fill retail; 10 per fill mail)
VALCHLOR	P	SP; PA
Antipruritics - Topical		
camphor & menthol LOTN	P	QL(222 ML per fill retail; 222 per fill mail)
doxepin hcl (antipruritic)	PA	QL(45 GM per fill retail; 45 per fill mail); AL(At least 18 yrs old); PA
PRUDOXIN *(Use doxepin hcl (antipruritic))*	PA	QL(45 GM per fill retail; 45 per fill mail); AL(At least 18 yrs old); PA
ZONALON *(Use doxepin hcl (antipruritic))*	PA	QL(45 GM per fill retail; 45 per fill mail); AL(At least 18 yrs old); PA
Antipsoriatics		
BIMZELX SOAJ	NP	SP
BIMZELX SOSY	NP	SP
calcipotriene CREA	P	QL(120 GM per fill retail; 120 per fill mail)
calcipotriene CREA	P	QL(60 GM per fill retail; 60 per fill mail)
CALCIPOTRIENE FOAM	P	
calcipotriene OINT	P	
calcipotriene SOLN	P	
calcitriol (topical)	NP	
COSENTYX (300 MG DOSE) SOSY	NP	QL(0.072 ML daily); SP
COSENTYX SENSOREADY (300 MG) SOAJ	NP	QL(0.072 ML daily); SP
COSENTYX SENSOREADY PEN SOAJ	NP	QL(0.072 ML daily); SP
COSENTYX UNOREADY SOAJ	NP	QL(0.072 ML daily); SP
COSENTYX SOLN	NP	SP
COSENTYX SOSY 150 MG/ML	NP	QL(0.072 ML daily); SP
COSENTYX SOSY 75 MG/0.5ML	NP	QL(0.036 ML daily); SP
ICOTYDE TABS PO 200 MG	NP	SP
ILUMYA	NP	SP
IMULDOSA SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	SP
OTULFI SOLN SC 45 MG/0.5ML	NP	SP
OTULFI SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	SP
PYZCHIVA SC 45 MG/0.5ML	NP	SP
PYZCHIVA 45 MG/0.5ML, 90 MG/ML	NP	SP
SELARSDI SOLN SC 45 MG/0.5ML	PA	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
SELARSDI SOSY SC 45 MG/0.5ML, 90 MG/ML	PA	SP; PA
SKYRIZI PEN SOAJ	NP	SP
SKYRIZI SOSY	NP	SP
SORILUX FOAM	NP	
SOTYKTU	NP	SP
SPEVIGO SOLN	NP	QL(30 ML per fill retail; 30 per fill mail); AL(At least 12 yrs old); SP
SPEVIGO SOSY	NP	QL(4 ML per fill retail; 4 per fill mail); AL(At least 12 yrs old)
SPEVIGO SOSY	NP	QL(4 ML per fill retail; 4 per fill mail); AL(At least 12 yrs old); SP
STARJEMZA SOSY SC 45 MG/0.5ML, 90 MG/ML	PA	SP; PA
STELARA SOSY	NP	QL(0.018 ML daily); SP
STEQEYMA SC	NP	SP
STEQEYMA	NP	SP
TALTZ SOAJ	PA	SP; PA
TALTZ SOSY	PA	SP; PA
tazarotene CREA	NP	AL(Up to 20 yrs old)
tazarotene GEL	NP	AL(Up to 20 yrs old)
TREMFYA ONE-PRESS SOPN SC 100 MG/ML	NP	SP
TREMFYA PEN SOAJ 100 MG/ML, 200 MG/2ML	NP	SP
USTEKINUMAB-AAUZ SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	SP
USTEKINUMAB-AEKN SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	SP
USTEKINUMAB-TTWE	NP	SP
USTEKINUMAB-TTWE SC	NP	SP
USTEKINUMAB SOSY 45 MG/0.5ML, 90 MG/ML	NP	QL(0.018 ML daily); SP
VTAMA	NP	
YESINTEK SOLN 45 MG/0.5ML	NP	SP
YESINTEK SOSY	NP	SP
Antiseborrheic Products		
selenium sulfide LOTN 2.5 %	P	QL(120 ML per fill retail; 120 per fill mail)
selenium sulfide LOTN 1 %	P	QL(240 ML per fill retail; 240 per fill mail)
selenium sulfide SHAM 1 %	P	QL(240 ML per fill retail; 240 per fill mail)
sulfacetamide sodium GEL	NP	
sulfacetamide sodium LIQD	NP	AL(Up to 20 yrs old)
Antivirals - Topical		
acyclovir topical CREA	NP	
acyclovir topical OINT	P	
docosanol	P	
penciclovir	NP	
Burn Products		
silver sulfadiazine	P	QL(50 GM per fill retail; 50 per fill mail)
Corticosteroids - Topical		
alclometasone dipropionate CREA	NP	
alclometasone dipropionate OINT	NP	
APEXICON E CREA	NP	
betamethasone dipropionate (topical) CREA	P	

Drug Name	Drug Tier	Requirements/ Limits
betamethasone dipropionate (topical) LOTN	P	
betamethasone dipropionate (topical) OINT	P	
betamethasone dipropionate augmented CREA	P	
betamethasone dipropionate augmented GEL 0.05 %	NP	
betamethasone dipropionate augmented LOTN	NP	
betamethasone dipropionate augmented OINT	NP	
betamethasone valerate CREA	NP	
betamethasone valerate FOAM	NP	
betamethasone valerate LOTN	NP	
betamethasone valerate OINT	NP	
calcipotriene-betamethasone dipropionate OINT	NP	
calcipotriene-betamethasone dipropionate SUSP	NP	
clobetasol propionate emollient base 0.05 %	NP	
clobetasol propionate emulsion	NP	
clobetasol propionate CREA 0.05 %	P	
clobetasol propionate FOAM	NP	
clobetasol propionate GEL 0.05 %	P	
clobetasol propionate LIQD	NP	
clobetasol propionate LOTN	NP	
clobetasol propionate OINT 0.05 %	P	
clobetasol propionate SHAM	NP	
clobetasol propionate SOLN 0.05 %	P	
clocortolone pivalate	NP	
DERMA-SMOOTHE/FS BODY OIL *(Use fluocinolone acetonide)*	NP	
DERMA-SMOOTHE/FS SCALP OIL *(Use fluocinolone acetonide)*	NP	
desonide CREA	NP	
desonide LOTN	NP	
desonide OINT	NP	
desoximetasone CREA	NP	
desoximetasone GEL	NP	
desoximetasone LIQD	NP	
desoximetasone OINT	NP	
diflorasone diacetate CREA	NP	QL(60 GM per fill retail; 60 per fill mail)
diflorasone diacetate CREA	NP	QL(30 GM per fill retail; 30 per fill mail)
diflorasone diacetate OINT	NP	
DIPROLENE OINT *(Use betamethasone dipropionate augmented)*	NP	
ENSTILAR FOAM	NP	
EPIFOAM FOAM	P	
fluocinolone acetonide CREA	NP	
fluocinolone acetonide OIL	NP	
fluocinolone acetonide OINT	NP	

Drug Name	Drug Tier	Requirements/ Limits
fluocinolone acetonide SOLN	P	
fluocinonide emulsified base	NP	
fluocinonide CREA	P	
fluocinonide GEL	NP	
fluocinonide OINT	P	
fluocinonide SOLN	P	
flurandrenolide LOTN	NP	
fluticasone propionate CREA 0.05 %	P	
fluticasone propionate LOTN	NP	
fluticasone propionate OINT	P	
halcinonide CREA	NP	
halcinonide SOLN 0.1 %	NP	
halobetasol propionate CREA	P	
halobetasol propionate FOAM	NP	
HALOBETASOL PROPIONATE LOTN 0.05 %	NP	
halobetasol propionate OINT	P	
HALOG CREA *(Use halcinonide)*	NP	
HALOG SOLN 0.1 % *(Use halcinonide)*	NP	
hydrocortisone (topical) CREA	P	
hydrocortisone (topical) LOTN 2.5 %	NP	
hydrocortisone (topical) LOTN 1 %	P	QL(60 GM per fill retail; 60 per fill mail)
hydrocortisone (topical) OINT	P	RX/OTC
hydrocortisone (topical) OINT	P	

Drug Name	Drug Tier	Requirements/ Limits
hydrocortisone acetate (topical) OINT	P	
HYDROCORTISONE ACETATE CREA	P	
hydrocortisone butyrate CREA	NP	
hydrocortisone butyrate OINT	NP	
hydrocortisone butyrate SOLN	NP	
HYDROCORTISONE COMPLETE KIT THPK	NP	
hydrocortisone valerate CREA	P	
hydrocortisone valerate OINT	NP	
HYDROCORTISONE GEL 2 %	NP	
LEXETTE FOAM *(Use halobetasol propionate)*	NP	
mometasone furoate CREA	P	
mometasone furoate OINT	P	
mometasone furoate SOLN	P	
PANDEL	NP	
SYNALAR CREA *(Use fluocinolone acetonide)*	NP	
SYNALAR OINT *(Use fluocinolone acetonide)*	NP	
TACLONEX SUSP *(Use calcipotriene-betamethasone dipropionate)*	P	
TOPICORT SPRAY LIQD *(Use desoximetasone)*	NP	
TOPICORT CREA *(Use desoximetasone)*	NP	
TOPICORT GEL *(Use desoximetasone)*	NP	
TOPICORT OINT *(Use desoximetasone)*	NP	

Drug Name	Drug Tier	Requirements/ Limits
triamcinolone acetonide (topical) CREA	P	
triamcinolone acetonide (topical) LOTN	P	
triamcinolone acetonide (topical) OINT	P	
ULTRAVATE LOTN	NP	
ULTRAVATE LOTN	NP	
Diaper Rash Products		
diaper rash products OINT	P	
Eczema Agents		
ADBRY SOAJ	PA	AL(At least 18 yrs old); SP; PA
ADBRY SOSY	PA	AL(At least 12 yrs old); SP; PA
ANZUPGO CREA EX 20 MG/GM	PA	QL(60 GM per 30 day(s) retail; 60 GM per 30 days mail); AL(At least 18 yrs old); PA
CIBINQO	NP	SP
DUPIXENT SOAJ	PA	SP; PA
DUPIXENT SOSY 200 MG/1.14ML, 300 MG/2ML	PA	SP; PA
EBGLYSS SOAJ	PA	AL(At least 12 yrs old); SP; PA
EBGLYSS SOSY	PA	AL(At least 12 yrs old); SP; PA
OPZELURA	NP	
Emollient/Keratolytic Agents		
GORDONS UREA CREA 40 %	P	QL(210 GM per fill retail; 210 per fill mail); RX/OTC
urea CREA 40 %	P	QL(210 GM per fill retail; 210 per fill mail); RX/OTC
urea LOTN 40 %	P	QL(240 GM per fill retail; 240 per fill mail)
Emollients		
emollient OINT	P	
EUCERIN INTENSIVE REPAIR OINT	P	
GOLD BOND ULTIMATE HEALING OINT	P	
lactic acid (ammonium lactate) CREA	P	QL(140 GM per fill retail; 140 per fill mail); RX/OTC
lactic acid (ammonium lactate) LOTN 12 %	P	QL(13.34 GM daily); RX/OTC
Immunomodulating Agents - Systemic		
NEMLUVIO	PA	AL(At least 18 yrs old); SP; PA
Immunomodulating Agents - Topical		
imiquimod 5 %	P	QL(48 EA per 180 day(s) retail; 48 EA per 180 days mail)
Immunosuppressive Agents - Topical		
pimecrolimus	PA	QL(30 GM per 30 day(s) retail; 30 GM per 30 days mail); AL(At least 2 yrs old); PA
tacrolimus (topical) OINT 0.03 %	PA	QL(30 GM per 30 day(s) retail; 30 GM per 30 days mail); AL(At least 2 yrs old); PA
tacrolimus (topical) OINT 0.1 %	PA	QL(30 GM per 30 day(s) retail; 30 GM per 30 days mail); AL(At least 16 yrs old); PA
Keratolytic/Antimitotic/Vesicant Agents		

Drug Name	Drug Tier	Requirements/ Limits
podofilox SOLN	P	QL(4 ML per fill retail; 4 per fill mail)
RAYASAL CREA	NP	
Liniments		
camphor-menthol-methyl salicylate CREA	P	QL(1017 GM per fill retail; 1017 per fill mail)
camphor-menthol-methyl salicylate CREA	P	QL(1020.6 GM per fill retail; 1020.6 per fill mail)
camphor-menthol-methyl salicylate GEL	NP	QL(56.7 GM per fill retail; 56.7 per fill mail)
camphor-menthol-methyl salicylate PTCH EX 3.1 %-10 %-6 %	NP	QL(4 EA daily)
trolamine salicylate CREA	NP	QL(85 GM per fill retail; 85 per fill mail)
Local Anesthetics - Topical		
BURN RELIEF GEL	P	QL(226 GM per fill retail; 226 per fill mail)
capsaicin CREA 0.025 %	P	QL(60 GM per fill retail; 60 per fill mail)
capsaicin CREA 0.075 %	P	QL(57 GM per fill retail; 57 per fill mail)
capsaicin CREA 0.1 %	P	QL(127.5 GM per fill retail; 127.5 per fill mail)
capsaicin PTCH	NP	QL(30 EA per fill retail; 30 per fill mail)
capsaicin PTCH	P	QL(30 EA per fill retail; 30 per fill mail)
COLLAVERA GEL 2 %	P	QL(30 GM per fill retail; 30 per fill mail); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
dibucaine	P	QL(30 GM per fill retail; 30 per fill mail)
LIDAFLEX PTCH	NP	QL(30 EA per fill retail; 30 per fill mail)
lidocaine hcl CREA 3 %	P	QL(28.35 GM per fill retail; 28.35 per fill mail); RX/OTC
lidocaine hcl CREA 4 %	P	QL(76.5 GM per fill retail; 76.5 per fill mail)
lidocaine hcl CREA 3 %	P	QL(85 GM per fill retail; 85 per fill mail); RX/OTC
lidocaine hcl CREA 4 %	NP	QL(30 GM per fill retail; 30 per fill mail)
lidocaine hcl GEL 2 %	P	QL(30 ML per fill retail; 30 per fill mail)
lidocaine hcl LIQD	NP	QL(30 ML per fill retail; 30 per fill mail)
lidocaine hcl PRSY	P	QL(30 ML per fill retail; 30 per fill mail)
lidocaine hcl SOLN	P	QL(50 ML per fill retail; 50 per fill mail)
lidocaine-menthol PTCH 4 %-4 %	NP	QL(60 EA per 30 day(s) retail; 60 EA per 30 days mail)
lidocaine-prilocaine CREA	P	
lidocaine-prilocaine KIT	P	
lidocaine CREA 4 %	P	QL(30 GM per fill retail; 30 per fill mail)
lidocaine CREA 4 %	P	QL(58.5 GM per fill retail; 58.5 per fill mail)
lidocaine CREA 4 %	NP	QL(2 GM per fill retail; 2 per fill mail)

Drug Name	Drug Tier	Requirements/ Limits
lidocaine CREA 4 %	P	QL(119 GM per fill retail; 119 per fill mail)
lidocaine CREA 4 %	P	QL(28 GM per fill retail; 28 per fill mail)
lidocaine CREA 4 %	P	QL(60 GM per fill retail; 60 per fill mail)
lidocaine CREA 4 %	P	QL(5 GM per fill retail; 5 per fill mail)
lidocaine CREA 4 %	P	QL(15 GM per fill retail; 15 per fill mail)
lidocaine OINT 5 %	P	QL(30 GM per fill retail; 30 per fill mail)
lidocaine OINT 5 %	P	QL(35.44 GM per fill retail; 35.44 per fill mail)
lidocaine OINT 5 %	P	QL(50 GM per fill retail; 50 per fill mail)
lidocaine PTCH 5 %	PA	QL(90 EA per 30 day(s) retail; 90 EA per 30 days mail); PA
lidocaine PTCH 4 %	NP	QL(60 EA per fill retail; 60 per fill mail ; 90 EA per 30 day(s) retail; 90 EA per 30 days mail)
LIDODERM PTCH *(Use lidocaine)*	NP	QL(90 EA per 30 day(s) retail; 90 EA per 30 days mail)
LIDOMAX GEL 2 %	P	QL(30 GM per fill retail; 30 per fill mail); RX/OTC
PLIAGLIS CREA	NP	
PROXIVOL GEL 2 %	P	QL(30 GM per fill retail; 30 per fill mail); RX/OTC
QUTENZA	NP	Maximum 91 day supply allowed; QL(4 EA per 84 day(s) retail; 4 EA per 84 days mail)
QUTENZA (2 PATCH)	NP	Maximum 91 day supply allowed; QL(2 EA per 90 day(s) retail; 2 EA per 90 days mail)
QUTENZA (4 PATCH)	NP	Maximum 91 day supply allowed; QL(1 EA per 90 day(s) retail; 1 EA per 90 days mail)
SYNOFLEX PTCH	NP	QL(60 EA per fill retail; 60 per fill mail); RX/OTC
ZTLIDO PTCH	NP	QL(90 EA per 30 day(s) retail; 90 EA per 30 days mail)
Misc. Topical		
CERAVE THERAPEUTIC HAND CREAM CREA	P	
dimethicone (topical) CREA 1 %	P	
zinc oxide (topical) OINT 20 %	P	QL(60 GM per fill retail; 60 per fill mail)
Phosphodiesterase 4 (PDE4) Inhibitors - Topical		
ADQUEY OINT EX 1 %	NP	AL(At least 2 yrs old)
EUCRISA	PA	PA
ZORYVE CREA EX 0.05 %	NP	AL(At least 2 yrs old - Up to 5 yrs old)
ZORYVE CREA EX 0.3 %	NP	

Drug Name	Drug Tier	Requirements/ Limits
ZORYVE CREA EX 0.15 %	NP	AL(At least 6 yrs old)
ZORYVE FOAM EX	NP	
Protectives Against UV Radiation		
AVEENO PROTECT+HYDRATE SPF60 LOTN	P	
CETAPHIL DAILY FACIAL SPF 50 LOTN	P	
COPPERTONE BABY PURE & SIMPLE LOTN	P	
COPPERTONE COMPLETE SPF30 LOTN	P	
COPPERTONE GLOW PROTECT & TAN LOTN	P	
COPPERTONE GLOW SHIMMER SPF15 LOTN	P	
COPPERTONE GLOW SHIMMER SPF30 LOTN	P	
COPPERTONE GLOW SHIMMER SPF50 LOTN	P	
COPPERTONE KIDS PURE & SIMPLE LOTN	P	
COPPERTONE LIMITED EDITION LOTN	P	
COPPERTONE OIL FREE FACE SPF30 LOTN	P	
COPPERTONE OIL FREE FACE SPF50 LOTN	P	
COPPERTONE PURE & SIMPLE FACE LOTN	P	
COPPERTONE SPORT 4-IN-1 SPF15 LOTN	P	
COPPERTONE SPORT CLEAR LOTN	P	
COPPERTONE TANNING SPF 8 LOTN	P	
COPPERTONE TANNING SPF15 LOTN	P	
COPPERTONE ULTRAGUARD SPF70+ LOTN	P	
COPPERTONE WATERBABIES SPF50 LOTN	P	
EUCERIN REDNESS RELIEF DAY LOTN	P	
SPORT SUNSCREEN SPF50 LOTN	P	
sunscreens LOTN	P	
Rosacea Agents		
metronidazole (topical) CREA	P	QL(45 GM per fill retail; 45 per fill mail)
metronidazole (topical) GEL 0.75 %	P	QL(45 GM per fill retail; 45 per fill mail)
metronidazole (topical) LOTN	P	
Scabicides & Pediculicides		
crotamiton LOTN	NP	AL(At least 18 yrs old)
ivermectin (pediculicide)	NP	
malathion	NP	
NATROBA *(Use spinosad)*	P	
OVIDE *(Use malathion)*	NP	
permethrin CREA	P	
PERMETHRIN CREA 5 % *(Use permethrin)*	P	
permethrin LIQD EX	P	
pyrethrins-piperonyl butoxide-permethrin-nit remover 4 %-0.33 %-0.5 %	P	
pyrethrins-piperonyl butoxide SHAM 4 %-0.33 %	P	QL(60 ML per fill retail; 60 per fill mail)
pyrethrins-piperonyl butoxide SHAM 4 %-0.33 %	P	
spinosad	P	

Drug Name	Drug Tier	Requirements/ Limits
STOP LICE MAXIMUM STRENGTH LIQD 4 %-0.33 %	P	QL(60 ML per fill retail; 60 per fill mail)
VANALICE GEL	NP	
Tar Products		
coal tar extract SHAM 0.5 %	P	
Wound Care Products		
FILSUVEZ	PA	QL(23.4 GM daily); PA
VYJUVEK	PA	QL(2.5 ML per 7 day(s) retail; 2 ML per 7 days mail); PA
DIAGNOSTIC PRODUCTS		
Diagnostic Tests		
ACCU-CHEK AVIVA PLUS STRP	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ACCU-CHEK GUIDE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ACCU-CHEK GUIDE TEST STRP	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ACCU-CHEK SMARTVIEW STRP	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
ACCUTREND GLUCOSE STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ADVOCATE REDI-CODE+ TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ADVOCATE REDI-CODE STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
AGAMATRIX AMP TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
AGAMATRIX JAZZ TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
AGAMATRIX PRESTO TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ASSURE 4 TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
ASSURE PLATINUM STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ASSURE PRISM MULTI TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ASSURE TITANIUM STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
BIOTEL CARE TEST STRIPS STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
BLOOD GLUCOSE TEST STRIPS 333 STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
BLOOD GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
BLULINK GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CARESENS S GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CARETOUCH TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CLEVER CHEK AUTO-CODE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CLEVER CHEK AUTO-CODE VOICE STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CLEVER CHEK TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CLEVER CHOICE AUTO-CODE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CLEVER CHOICE MICRO TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
CLEVER CHOICE NO CODING STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CLEVER CHOICE TALK SYSTEM STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CONTOUR NEXT TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CONTOUR PLUS TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CONTOUR TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CVS ADVANCED GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CVS GLUCOSE METER TEST STRIPS STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CVS KETONE CARE	P	QL(3.34 EA daily; 100 EA per 30 day(s) retail; 100 EA per 30 days mail)
CVS TRUE METRIX GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
DIATRUE PLUS TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EASY PLUS II GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EASY STEP TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EASY TALK BLOOD GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EASY TALK PLUS II TEST STRIPS STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
EASY TOUCH TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EASY TRAK BLOOD GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EASY TRAK II GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EASYGLUCO STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EASYMAX 15 TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EASYMAX TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ELEMENT COMPACT TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ELEMENT TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EMBRACE BLOOD GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EMBRACE EVO BLOOD GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EMBRACE PRO GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EMBRACE TALK GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EQ BLOOD GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EVOLUTION AUTOCODE STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
FONDCIRCLE BLOOD GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FORA 6 CONNECT/GTEL TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FORA 6 CONNECT STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FORA BLOOD GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FORA D15G BLOOD GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FORA D20 BLOOD GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FORA D40/G31 BLOOD GLUCOSE STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FORA G20 BLOOD GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FORA G30/PREM V10 GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FORA GD20 TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FORA GD50 BLOOD GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FORA GTEL BLOOD GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FORA GTEL BLOOD KETONE TEST	P	QL(3.34 EA daily; 100 EA per 30 day(s) retail; 100 EA per 30 days mail)
FORA TEST N'GO ADV-VOICE-6 CON	P	QL(3.34 EA daily; 100 EA per 30 day(s) retail; 100 EA per 30 days mail)

Drug Name	Drug Tier	Requirements/ Limits
FORA TN'G ADVANCE PRO STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FORA TN'G/TN'G VOICE STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FORA V10 BLOOD GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FORA V12 BLOOD GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FORA V20 BLOOD GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FORA V30A BLOOD GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FORACARE GD40 TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FORACARE PREMIUM V10 TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FORACARE TEST N GO TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FREESTYLE INSULINX TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FREESTYLE LITE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FREESTYLE PRECISION NEO TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FREESTYLE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
GE100 BLOOD GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
GHT TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
GLUCOCARD 01 SENSOR PLUS STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
GLUCOCARD EXPRESSION TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
GLUCOCARD SHINE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
GLUCOCARD VITAL TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
GLUCOCOM TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
GLUCONAVII BLOOD GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
GLUCOSE METER TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
GNP EASY TOUCH GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
GNP TRUE METRIX GLUCOSE STRIPS STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
GNP TRUETRACK TEST STRIPS STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
GOJJI BLOOD GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
GOJJI BLOOD KETONE TEST	P	QL(3.34 EA daily; 100 EA per 30 day(s) retail; 100 EA per 30 days mail)
GOJJI BLOOD TEST STRIP/LANCETS STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
HW EMBRACE PRO GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
HW EMBRACE TALK GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
IHEALTH BLOOD GLUCOSE TEST STR STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
INFINITY BLOOD GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
KETONE TEST STRP	P	QL(3.34 EA daily; 100 EA per 30 day(s) retail; 100 EA per 30 days mail)
KETOSTIX STRP	P	QL(3.34 EA daily; 100 EA per 30 day(s) retail; 100 EA per 30 days mail)
KROGER HEALTHPRO GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
MICRODOT TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
MM EASY TOUCH GLUCOSE STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
MOBI CONNECT TEST STRIPS STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
MYGLUCOHEALTH TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
NEUTEK 2TEK TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
NOVA MAX GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
NOVA MAX PLUS KETONE TEST	P	QL(3.34 EA daily; 100 EA per 30 day(s) retail; 100 EA per 30 days mail)

Drug Name	Drug Tier	Requirements/ Limits
ON CALL EXPRESS BLOOD GLUCOSE STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ONETOUCH ULTRA BLUE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ONETOUCH ULTRA TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ONETOUCH ULTRA STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ONETOUCH VERIO STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
OPTIUMEZ TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
PHARMACIST CHOICE AUTOCODE STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
PHARMACIST CHOICE NO CODING STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
PIP BLOOD GLUCOSE TEST STRIP STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
PRECISION XTRA BLOOD GLUCOSE STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
PRECISION XTRA KETONE	P	QL(3.34 EA daily; 100 EA per 30 day(s) retail; 100 EA per 30 days mail)
PRO VOICE V8/V9 GLUCOSE STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
PRODIGY NO CODING BLOOD GLUC STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
QUINTET AC BLOOD GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
QUINTET BLOOD GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
REFUAH PLUS BLOOD GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
RELION BLOOD GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
RELION CONFIRM/MICRO TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
RELION KETONE TEST STRP	P	QL(3.34 EA daily; 100 EA per 30 day(s) retail; 100 EA per 30 days mail)
RELION PREMIER TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
RELION PRIME TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
RELION TRUE METRIX TEST STRIPS STRP	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
RELION ULTIMA TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
RIGHTEST GS100 BLOOD GLUCOSE STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
RIGHTEST GS300 BLOOD GLUCOSE STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
RIGHTEST GS550 BLOOD GLUCOSE STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
RIGHTEST GT333 BLOOD GLUCOSE STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
RIGHTEST GT333 GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
SMARTEST BLOOD GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
SOLUS V2 TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
TRUE METRIX BLOOD GLUCOSE TEST STRP	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
TRUE METRIX BLOOD GLUCOSE TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
TRUE METRIX PRO BLOOD GLUCOSE STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
TRUENESS BLOOD GLUCOSE STRIPS STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
TRUETEST TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
TRUETRACK TEST STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
UNISTRIP1 GENERIC STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
VIVAGUARD INO TEST STRIPS STRP	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS		
Dietary Management Products		
ELFOLATE TABS	P	
l-methylfolate TABS 7.5 MG, 15 MG	P	
DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes		
Digestive Enzymes		
CREON CPEP	P	
PERTZYE CPEP	NP	
VIOKACE TABS	NP	

Drug Name	Drug Tier	Requirements/ Limits
ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 252600 UNIT-189600 UNIT-60000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	P	
DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure		
Carbonic Anhydrase Inhibitors		
acetazolamide CP12	P	
acetazolamide TABS	P	
methazolamide TABS	P	
Diuretic Combinations		
amiloride & hydrochlorothiazide	P	QL(1 EA daily)
spironolactone & hydrochlorothiazide	P	
triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG	P	QL(1 EA daily)
triamterene & hydrochlorothiazide TABS	P	QL(1 EA daily)
Loop Diuretics		
bumetanide TABS	P	
furosemide SOLN IJ 10 MG/ML	P	
FUROSEMIDE SOLN IJ	P	
furosemide TABS	P	
SOAANZ TABS 20 MG	P	QL(1 EA daily)
torsemide TABS	P	QL(1 EA daily)
Potassium Sparing Diuretics		
amiloride hcl TABS	P	QL(4 EA daily)
spironolactone TABS	P	

Drug Name	Drug Tier	Requirements/ Limits
Thiazides and Thiazide-Like Diuretics		
chlorthalidone 25 MG, 50 MG	P	
hydrochlorothiazide CAPS	P	
hydrochlorothiazide TABS	P	
indapamide TABS 1.25 MG, 2.5 MG	P	
metolazone	P	
ENDOCRINE AND METABOLIC AGENTS - MISC. - Drugs to Treat Bone Disease and Regulate Hormones		
Bone Density Regulators		
ACTONEL TABS 35 MG, 150 MG *(Use risedronate sodium)*	NP	
alendronate sodium SOLN	NP	
alendronate sodium TABS 10 MG, 35 MG, 70 MG	P	
ATELVIA TBEC *(Use risedronate sodium)*	NP	
AUKELSO SOLN SC 120 MG/1.7ML	NP	SP
BILDYOS SOSY SC 60 MG/ML	NP	SP
BILPREVDA SOLN SC 120 MG/1.7ML	NP	SP
BINOSTO TBEF	NP	
BOMYNTRA SOLN SC 120 MG/1.7ML	NP	SP
BOMYNTRA SOSY SC 120 MG/1.7ML	NP	SP
BONSITY SOPN 560 MCG/2.24ML	PA	PA
BOSAYA SOSY SC 60 MG/ML	NP	SP
calcitonin (salmon) NA	P	
calcitonin (salmon) IJ	NP	
CONEXXENCE SOSY SC 60 MG/ML	NP	SP

Drug Name	Drug Tier	Requirements/ Limits
ENOBY SOSY SC 60 MG/ML	PA	SP; PA
EVENITY	PA	SP; PA
FORTEO SOPN *(Use teriparatide)*	PA	PA
FOSAMAX PLUS D	NP	
FOSAMAX TABS 70 MG *(Use alendronate sodium)*	NP	
ibandronate sodium SOLN	NP	SP
ibandronate sodium TABS	P	
JUBBONTI SOSY SC 60 MG/ML	NP	SP
JUBEREQ SOLN SC 120 MG/1.7ML	NP	SP
MIACALCIN IJ *(Use calcitonin (salmon))*	NP	
OSENVELT SOLN SC 120 MG/1.7ML	NP	SP
OSVYRTI SOSY SC 60 MG/ML	NP	SP
PROLIA SOSY	NP	SP
risedronate sodium TABS	P	
risedronate sodium TBEC	NP	
STOBOCLO SOSY SC 60 MG/ML	NP	SP
teriparatide SOPN	PA	PA
TERIPARATIDE SOPN	PA	PA
TYMLOS	PA	SP; PA
WYOST SOLN SC 120 MG/1.7ML	NP	SP
XGEVA SOLN	NP	SP
XTRENBO SOLN SC 120 MG/1.7ML	PA	SP; PA
GnRH/LHRH Antagonists		
ORILISSA	PA	SP; PA
Growth Hormone Receptor Antagonists		
SOMAVERT	NP	AL(At least 18 yrs old); SP
Growth Hormones		
GENOTROPIN MINIQUICK PRSY	PA	SP; PA
GENOTROPIN CART SC	PA	SP; PA
HUMATROPE CART IJ	NP	SP
NGENLA	NP	AL(At least 3 yrs old); SP
NORDITROPIN FLEXPRO SOPN	PA	SP; PA
NUTROPIN AQ NUSPIN 20 SOPN	PA	SP; PA
NUTROPIN AQ NUSPIN 5 SOPN	PA	SP; PA
OMNITROPE SOCT	NP	SP
OMNITROPE SOLR SC	NP	SP
SEROSTIM SC 4 MG, 5 MG, 6 MG	NP	SP
SKYTROFA	NP	SP
SOGROYA	NP	SP
ZOMACTON SOLR SC	NP	SP
Hormone Receptor Modulators		
raloxifene hcl	P	QL(1 EA daily)
LHRH/GnRH Agonist Analog Pituitary Suppressants		
FENSOLVI (6 MONTH) SC	PA	Maximum 180 day supply allowed; QL(1 EA per 180 day(s) retail; 1 EA per 180 days mail); SP; PA
LUPRON DEPOT-PED (1-MONTH)	PA	Maximum 180 day supply allowed; QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail); SP; PA

Drug Name	Drug Tier	Requirements/ Limits
LUPRON DEPOT-PED (3-MONTH)	PA	Maximum 180 day supply allowed; QL(1 EA per 90 day(s) retail; 1 EA per 90 days mail); SP; PA
LUPRON DEPOT-PED (6-MONTH) IM	PA	Maximum 180 day supply allowed; QL(1 EA per 180 day(s) retail; 1 EA per 180 days mail); SP; PA
SUPPRELIN LA	PA	SP; PA
SYNAREL	PA	SP; PA
TRIPTODUR	PA	SP; PA
Menopausal Symptoms Suppressants		
LYNKUET CAPS PO 60 MG	PA	QL(2 EA daily); PA
VEOZAH	PA	QL(1 EA daily); PA
Metabolic Modifiers		
BRINEURA	PA	AL(At least 3 yrs old); SP; PA
calcitriol CAPS	P	
ELFABRIO	PA	AL(At least 18 yrs old); SP; PA
GALAFOLD	P	QL(0.5 EA daily); SP; PA
levocarnitine (metabolic modifiers) SOLN PO 1 GM/10ML	P	QL(30 ML daily)
levocarnitine (metabolic modifiers) TABS	P	QL(3 EA daily)
RAYALDEE	PA	AL(At least 18 yrs old); PA
STRENSIQ	PA	SP; PA
TRYNGOLZA	PA	QL(0.027 ML daily); AL(At least 18 yrs old); SP; PA
XPHOZAH	NP	SP
YORVIPATH 420 MCG/1.4ML	PA	QL(0.1 ML daily); AL(At least 18 yrs old); SP; PA
YORVIPATH 168 MCG/0.56ML	PA	QL(0.04 ML daily); AL(At least 18 yrs old); SP; PA
YORVIPATH 294 MCG/0.98ML	PA	QL(0.07 ML daily); AL(At least 18 yrs old); SP; PA
Natriuretic Peptides		
VOXZOGO	PA	AL(Up to 17 yrs old); SP; PA
Posterior Pituitary Hormones		
desmopressin acetate spray	P	QL(5 ML per fill retail; 5 per fill mail); PA
desmopressin acetate spray refrigerated 0.01 %	P	QL(5 ML per fill retail; 5 per fill mail)
desmopressin acetate SOLN IJ	P	SP; PA
desmopressin acetate TABS	P	QL(3 EA daily)
Somatostatic Agents		
octreotide acetate KIT	P	SP; PA
Vasopressin Receptor Antagonists		
tolvaptan TBPK 15 MG	P	SP; PA
ESTROGENS - Hormone Replacement/Modifying Drugs		
Estrogen Combinations		
COMBIPATCH PTTW	P	QL(0.29 EA daily)
estradiol & norethindrone acetate TABS	P	QL(1 EA daily)
MYFEMBREE	PA	PA
norethindrone acetate-ethinyl estradiol	P	

Drug Name	Drug Tier	Requirements/ Limits
ORIAHNN	PA	MP; PA
PREMPHASE	P	QL(1 EA daily)
PREMPRO	P	QL(1 EA daily)
Estrogens		
ALORA PTTW 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR	P	QL(0.29 EA daily)
estradiol PTTW	P	QL(0.29 EA daily)
estradiol PTWK	P	QL(0.143 EA daily)
estradiol TABS	P	
estrogens, conjugated TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG	P	QL(1 EA daily)
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections		
Fluoroquinolones		
BAXDELA SOLR	PA	PA
BAXDELA TABS	PA	PA
ciprofloxacin hcl TABS 250 MG, 500 MG, 750 MG	PA	PA
CIPRO SUSR	PA	PA
CIPRO TABS 250 MG, 500 MG *(Use ciprofloxacin hcl)*	NP	
levofloxacin SOLN PO	PA	PA
levofloxacin TABS	PA	PA
moxifloxacin hcl TABS	PA	PA
ofloxacin 300 MG, 400 MG	NP	
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs		
5-HT4 Receptor Agonists		
MOTEGRITY *(Use prucalopride succinate)*	NP	
prucalopride succinate	NP	

Drug Name	Drug Tier	Requirements/ Limits
Antiflatulents		
simethicone CHEW 80 MG	P	
simethicone SUSP	P	QL(30 ML per fill retail; 30 per fill mail)
Bile Acid Synthesis Disorder Agents		
CHOLBAM	PA	SP; PA
CTEXLI TABS PO 250 MG	PA	QL(3 EA daily); AL(At least 18 yrs old); SP; PA
Gallstone Solubilizing Agents		
chenodiol	PA	AL(At least 18 yrs old); SP; PA
ursodiol CAPS	P	QL(3 EA daily)
ursodiol TABS 250 MG	P	QL(7 EA daily)
Gastrointestinal Chloride Channel Activators		
AMITIZA *(Use lubiprostone)*	NP	QL(2 EA daily)
lubiprostone	PA	QL(2 EA daily); PA
Gastrointestinal Stimulants		
GIMOTI SOLN NA	PA	AL(At least 18 yrs old); SP; PA
metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML	P	
metoclopramide hcl TABS	P	
Hepatotropics		
REZDIFFRA	PA	QL(1 EA daily); AL(At least 18 yrs old); SP; PA
Ileal Bile Acid Transporter (IBAT) Inhibitors		
BYLVAY (PELLETS) CPSP	PA	SP; PA
BYLVAY CAPS	PA	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
LIVMARLI	PA	SP; PA
LIVMARLI PO 10 MG, 15 MG, 20 MG, 30 MG	PA	SP; PA
Inflammatory Bowel Agents		
AVSOLA	PA	SP; PA
AZULFIDINE EN-TABS TBEC *(Use sulfasalazine)*	NP	
AZULFIDINE TABS *(Use sulfasalazine)*	NP	
balsalazide disodium CAPS	NP	
CANASA SUPP *(Use mesalamine)*	NP	
CIMZIA (1 SYRINGE) PSKT 200 MG/ML	PA	SP; PA
CIMZIA (2 SYRINGE) PSKT	PA	SP; PA
CIMZIA-STARTER PSKT	PA	SP; PA
CIMZIA KIT	PA	SP; PA
DIPENTUM	NP	
ENTYVIO PEN SOAJ	NP	SP
ENTYVIO SOLR	NP	SP
IMULDOSA SOLN IV 130 MG/26ML	NP	SP
INFLECTRA SOLR	PA	SP; PA
INFLIXIMAB	PA	SP; PA
LIALDA TBEC *(Use mesalamine)*	NP	
mesalamine w/ cleanser	NP	
mesalamine CP24	P	
mesalamine CPCR	NP	
mesalamine CPDR	NP	
mesalamine ENEM	NP	
mesalamine SUPP	P	
mesalamine TBEC 800 MG	NP	
mesalamine TBEC 1.2 GM	P	

Drug Name	Drug Tier	Requirements/ Limits
OMVOH (300 MG DOSE) SOAJ	NP	SP
OMVOH (300 MG DOSE) SOSY	NP	SP
OMVOH SOAJ	NP	SP
OMVOH SOLN	NP	SP
OMVOH SOSY	NP	SP
PENTASA CPCR *(Use mesalamine)*	NP	
REMICADE	NP	SP
RENFLEXIS	PA	SP; PA
ROWASA *(Use mesalamine w/ cleanser)*	NP	
SFROWASA ENEM	NP	
SKYRIZI SOCT	NP	SP
SKYRIZI SOLN	NP	SP
STARJEMZA SOLN IV 130 MG/26ML	PA	SP; PA
STELARA 130 MG/26ML	NP	SP
sulfasalazine TABS	P	
sulfasalazine TBEC	P	
TREMFYA-CD/UC INDUCTION SOAJ SC 200 MG/2ML	NP	SP
TREMFYA SOLN IV	NP	SP
TREMFYA SOSY SC	NP	SP
USTEKINUMAB 130 MG/26ML	NP	SP
VELSIPITY	NP	SP
ZYMFENTRA (1 PEN) AJKT	NP	AL(At least 18 yrs old); SP
ZYMFENTRA (2 PEN) AJKT	NP	AL(At least 18 yrs old); SP
ZYMFENTRA (2 SYRINGE) PSKT	NP	AL(At least 18 yrs old); SP
Intestinal Acidifiers		
lactulose (encephalopathy)	P	
Irritable Bowel Syndrome (IBS) Agents		

Drug Name	Drug Tier	Requirements/ Limits
alosetron hcl	NP	QL(2 EA daily)
alosetron hcl	PA	QL(2 EA daily); PA
IBSRELA	NP	
LINZESS	PA	QL(1 EA daily); PA
LOTRONEX *(Use alosetron hcl)*	PA	QL(2 EA daily); PA
VIBERZI	PA	QL(2 EA daily); PA
Peripheral Opioid Receptor Antagonists		
MOVANTIK	NP	QL(1 EA daily)
SYMPROIC	NP	
Peroxisome Proliferator-Activated Receptor(PPAR) Agonists		
IQIRVO	PA	QL(1 EA daily); AL(At least 18 yrs old); SP; PA
LIVDELZI	PA	QL(1 EA daily); AL(At least 18 yrs old); SP; PA
Phosphate Binder Agents		
AURYXIA 210 MG *(Use ferric citrate)*	NP	
calcium acetate (phosphate binder) CAPS	P	
calcium acetate (phosphate binder) TABS	P	RX/OTC
calcium acetate (phosphate binder) TABS	NP	RX/OTC
ferric citrate	NP	
FOSRENOL CHEW *(Use lanthanum carbonate)*	NP	
FOSRENOL PACK	NP	
lanthanum carbonate CHEW	NP	
RENVELA PACK *(Use sevelamer carbonate)*	NP	
RENVELA TABS *(Use sevelamer carbonate)*	NP	
sevelamer carbonate PACK	P	
sevelamer carbonate TABS	P	
sevelamer hcl	NP	
VELPHORO	NP	
GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System		
Alkalinizers		
CYTRA K CRYSTALS PACK 1002 MG-3300 MG	P	
potassium citrate (alkalinizer) TBCR	P	
sodium citrate & citric acid	P	RX/OTC
Genitourinary Irrigants		
sodium chloride (gu irrigant) 0.9 %	P	
Hyperoxaluria Agents		
OXLUMO	PA	SP; PA
RIVFLOZA SOLN	PA	AL(At least 9 yrs old); SP; PA
RIVFLOZA SOSY	PA	AL(At least 9 yrs old); SP; PA
IgA Nephropathy (IgAN) Agents		
FILSPARI	NP	SP; MP
Prostatic Hypertrophy Agents		
alfuzosin hcl	P	
CARDURA XL	NP	MP
dutasteride	P	
dutasteride-tamsulosin hcl	NP	
finasteride	P	
PROSCAR *(Use finasteride)*	NP	

Drug Name	Drug Tier	Requirements/ Limits
silodosin	NP	
tamsulosin hcl	P	
Urinary Analgesics		
phenazopyridine hcl TABS 95 MG, 100 MG, 200 MG	P	
GOUT AGENTS - Drugs to Treat Gout		
Gout Agent Combinations		
colchicine w/ probenecid	P	
Gout Agents		
allopurinol 100 MG, 300 MG	P	
allopurinol 200 MG	NP	
colchicine CAPS	NP	QL(2 EA daily); AL(At least 18 yrs old)
colchicine TABS	PA	PA
febuxostat	P	
GLOPERBA SOLN PO	NP	
MITIGARE CAPS *(Use colchicine)*	NP	QL(2 EA daily); AL(At least 18 yrs old)
ULORIC *(Use febuxostat)*	NP	
Uricosurics		
probenecid	P	
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders		
Antihemophilic Products		
ADVATE	PA	SP; PA
ADYNOVATE	PA	SP; PA
AFSTYLA 250 UNIT, 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 2500 UNIT	PA	SP; PA
ALHEMO	PA	AL(At least 12 yrs old); SP; PA
ALPHANATE SOLR	PA	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
ALPHANINE SD 500 UNIT, 1000 UNIT, 1500 UNIT	PA	SP; PA
ALPROLIX	PA	SP; PA
ALTUVIIIO 250 UNIT, 500 UNIT, 1000 UNIT, 2000 UNIT, 3000 UNIT, 4000 UNIT	PA	SP; PA
BENEFIX KIT	PA	SP; PA
BEQVEZ	PA	AL(At least 18 yrs old); SP; PA
COAGADEX	PA	SP; PA
CORIFACT	PA	SP; PA
ELOCTATE	PA	SP; PA
ESPEROCT	PA	SP; PA
FEIBA	PA	SP; PA
HEMGENIX	PA	AL(At least 18 yrs old); SP; PA
HEMLIBRA	PA	SP; PA
HEMOFIL M SOLR 250 UNIT, 500 UNIT, 1000 UNIT, 1700 UNIT	PA	SP; PA
HUMATE-P SOLR	PA	SP; PA
HYMPAVZI	PA	SP; PA
IDELVION	PA	SP; PA
IXINITY SOLR 500 UNIT, 1000 UNIT, 1500 UNIT, 3000 UNIT	PA	SP; PA
JIVI	PA	SP; PA
KCENTRA	PA	SP; PA
KOATE-DVI SOLR 1000 UNIT	PA	SP; PA
KOATE SOLR	PA	SP; PA
KOGENATE FS KIT 250 UNIT, 500 UNIT, 3000 UNIT	PA	SP; PA
KOVALTRY	PA	SP; PA
NOVOEIGHT	PA	SP; PA
NOVOSEVEN RT 5 MG	PA	QL(120000 EA daily); SP; PA

Drug Name	Drug Tier	Requirements/ Limits
NOVOSEVEN RT 1 MG, 2 MG, 8 MG	PA	SP; PA
NUWIQ KIT	PA	SP; PA
NUWIQ SOLR	PA	SP; PA
OBIZUR	PA	SP; PA
PROFILNINE	PA	SP; PA
QFITLIA SOAJ SC 50 MG/0.5ML	PA	AL(At least 12 yrs old); SP; PA
QFITLIA SOLN SC 20 MG/0.2ML	PA	AL(At least 12 yrs old); SP; PA
REBINYN	PA	SP; PA
RECOMBINATE SOLR	PA	SP; PA
RIXUBIS SOLR	PA	SP; PA
ROCTAVIAN	PA	AL(At least 18 yrs old); PA
SEVENFACT	PA	SP; PA
TRETTEN	PA	SP; PA
VONVENDI	PA	SP; PA
WILATE KIT	PA	SP; PA
XYNTHA	PA	SP; PA
XYNTHA SOLOFUSE	PA	SP; PA
Bradykinin B2 Receptor Antagonists		
FIRAZYR SOSY *(Use icatibant acetate)*	NP	SP
icatibant acetate SOSY	PA	SP; PA
Complement Inhibitors		
BERINERT KIT	PA	SP; PA
CINRYZE SOLR IV	NP	SP
HAEGARDA SOLR SC	PA	SP; PA
RUCONEST	NP	SP
TAVNEOS	PA	QL(6 EA daily); AL(At least 18 yrs old); SP; PA
VOYDEYA TABS	PA	QL(6 EA daily); AL(At least 18 yrs old); SP; PA
VOYDEYA TBPK	PA	QL(6 EA daily); AL(At least 18 yrs old); SP; PA
Hematorheologic Agents		
pentoxifylline	P	
Plasma Factor XIIa Inhibitors		
ANDEMBRY SOAJ SC 200 MG/1.2ML	NP	SP
Plasma Kallikrein Inhibitors		
EKTERLY TABS PO 300 MG	NP	SP
KALBITOR	NP	SP
ORLADEYO	NP	SP
ORLADEYO PO 72 MG, 96 MG, 108 MG, 132 MG	NP	SP
TAKHZYRO SOSY	PA	SP; PA
Plasma Proteins		
RYPLAZIM	PA	SP; PA
Platelet Aggregation Inhibitors		
AGRYLIN 0.5 MG *(Use anagrelide hcl)*	NP	
anagrelide hcl	NP	
aspirin-dipyridamole	P	
BRILINTA 60 MG, 90 MG *(Use ticagrelor)*	NP	QL(2 EA daily)
cilostazol	P	
clopidogrel bisulfate	P	
dipyridamole	P	
EFFIENT *(Use prasugrel hcl)*	NP	QL(1 EA daily)
PLAVIX 75 MG *(Use clopidogrel bisulfate)*	NP	
prasugrel hcl	PA	QL(1 EA daily); PA
ticagrelor 60 MG, 90 MG	PA	QL(2 EA daily); PA
Prekallikrein-Directed Antisense Oligonucleotides		

Drug Name	Drug Tier	Requirements/ Limits
(ASO)		
DAWNZERA SOAJ SC 80 MG/0.8ML	NP	SP
Pyruvate Kinase Activators		
AQVESME TABS 100 MG	PA	QL(2 EA daily); AL(At least 18 yrs old); SP; PA
PYRUKYND TAPER PACK TBPK	PA	QL(2 EA daily); AL(At least 18 yrs old); SP; PA
PYRUKYND TABS	PA	QL(2 EA daily); AL(At least 18 yrs old); SP; PA
HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders		
Agents for Gaucher Disease		
CERDELGA	P	SP; PA
CEREZYME 400 UNIT	P	SP; PA
miglustat	P	SP; PA
VPRIV	P	SP; PA
Agents for Sickle Cell Disease		
CASGEVY	PA	AL(At least 2 yrs old); SP; PA
DROXIA CAPS	P	
LYFGENIA	PA	AL(At least 12 yrs old); SP; PA
Cobalamins		
cyanocobalamin SOLN IJ 1000 MCG/ML	P	
Folic Acid/Folates		
folic acid TABS 400 MCG, 800 MCG	P	QL(1 EA daily)
folic acid TABS 1 MG	P	RX/OTC
Hematopoietic Gene Therapy		
ZYNTEGLO	PA	AL(At least 4 yrs old); SP; PA
Hematopoietic Growth Factors		
ARANESP (ALBUMIN FREE) SOLN 100 MCG/ML	PA	QL(15 ML per 30 day(s) retail; 15 ML per 30 days mail); SP; PA
ARANESP (ALBUMIN FREE) SOLN 200 MCG/ML	PA	QL(7.5 ML per 30 day(s) retail; 8 ML per 30 days mail); SP; PA
ARANESP (ALBUMIN FREE) SOLN 40 MCG/ML	PA	QL(37.5 ML per 30 day(s) retail; 38 ML per 30 days mail); SP; PA
ARANESP (ALBUMIN FREE) SOLN 25 MCG/ML	PA	QL(60 ML per 30 day(s) retail; 60 ML per 30 days mail); SP; PA
ARANESP (ALBUMIN FREE) SOLN 60 MCG/ML	PA	QL(25 ML per 30 day(s) retail; 25 ML per 30 days mail); SP; PA
ARANESP (ALBUMIN FREE) SOSY 40 MCG/0.4ML	PA	QL(15 ML per 30 day(s) retail; 15 ML per 30 days mail); SP; PA
ARANESP (ALBUMIN FREE) SOSY 25 MCG/0.42ML	PA	QL(25.2 ML per 30 day(s) retail; 25 ML per 30 days mail); SP; PA
ARANESP (ALBUMIN FREE) SOSY 150 MCG/0.3ML, 200 MCG/0.4ML, 300 MCG/0.6ML, 500 MCG/ML	PA	QL(3 ML per 30 day(s) retail; 3 ML per 30 days mail); SP; PA
ARANESP (ALBUMIN FREE) SOSY 60 MCG/0.3ML, 100 MCG/0.5ML	PA	QL(7.5 ML per 30 day(s) retail; 8 ML per 30 days mail); SP; PA

Drug Name	Drug Tier	Requirements/ Limits
ARANESP (ALBUMIN FREE) SOSY 10 MCG/0.4ML	PA	QL(60 ML per 30 day(s) retail; 60 ML per 30 days mail); SP; PA
ARMLUPEG SOSY SC 6 MG/0.6ML	NP	SP
EPOGEN 3000 UNIT/ML	NP	QL(166.66 ML per 30 day(s) retail; 167 ML per 30 days mail); SP
EPOGEN 20000 UNIT/ML	NP	QL(25 ML per 30 day(s) retail; 25 ML per 30 days mail); SP
EPOGEN 4000 UNIT/ML	NP	QL(125 ML per 30 day(s) retail; 125 ML per 30 days mail)
EPOGEN 4000 UNIT/ML	NP	QL(125 ML per 30 day(s) retail; 125 ML per 30 days mail); SP
EPOGEN 2000 UNIT/ML	NP	QL(250 ML per 30 day(s) retail; 250 ML per 30 days mail); SP
EPOGEN 10000 UNIT/ML	NP	QL(50 ML per 30 day(s) retail; 50 ML per 30 days mail); SP
FILKRI SOSY IJ 300 MCG/0.5ML, 480 MCG/0.8ML	NP	QL(8.5 ML daily); SP
FULPHILA	PA	SP; PA
FYLNETRA	NP	SP
GRANIX SOLN 300 MCG/ML	NP	QL(0.8 ML daily); SP
GRANIX SOSY	NP	QL(0.8 ML daily); SP
LEUKINE SOLR IJ	NP	SP
MIRCERA	NP	SP
NEULASTA ONPRO SOSY 6 MG/0.6ML	NP	SP
NEULASTA SOLN SC 4 MG/0.4ML	NP	SP
NEULASTA SOSY	NP	SP
NEUPOGEN SOLN	PA	QL(8.5 ML daily); SP; PA
NEUPOGEN SOSY	PA	QL(8.5 ML daily); SP; PA
NIVESTYM SOLN	NP	QL(8.5 ML daily); SP
NIVESTYM SOSY	NP	QL(8.5 ML daily); SP
NYPOZI	NP	QL(8.5 ML daily); SP
NYVEPRIA	PA	SP; PA
PROCRIT 40000 UNIT/ML	NP	QL(12.5 ML per 30 day(s) retail; 12 ML per 30 days mail); SP
PROCRIT 3000 UNIT/ML	NP	QL(166.66 ML per 30 day(s) retail; 167 ML per 30 days mail); SP
PROCRIT 10000 UNIT/ML	NP	QL(50 ML per 30 day(s) retail; 50 ML per 30 days mail); SP
PROCRIT 20000 UNIT/ML	NP	QL(25 ML per 30 day(s) retail; 25 ML per 30 days mail); SP
PROCRIT 2000 UNIT/ML	NP	QL(250 ML per 30 day(s) retail; 250 ML per 30 days mail); SP
PROCRIT 10000 UNIT/ML	NP	QL(50 ML per 30 day(s) retail; 50 ML per 30 days mail); SP
PROCRIT 4000 UNIT/ML	NP	QL(125 ML per 30 day(s) retail; 125 ML per 30 days mail); SP
REBLOZYL	NP	AL(At least 18 yrs old); SP
RELEUKO SOSY	NP	QL(8.5 ML daily); SP
RETACRIT	PA	SP; PA
ROLVEDON	NP	SP

Drug Name	Drug Tier	Requirements/ Limits
RYZNEUTA SOSY SC 20 MG/ML	NP	SP
STIMUFEND	NP	SP
UDENYCA ONBODY SOSY	NP	SP
UDENYCA SOAJ	NP	SP
UDENYCA SOSY	NP	SP
VAFSEO 300 MG	NP	QL(2 EA daily); SP
VAFSEO 150 MG	NP	QL(4 EA daily); SP
ZARXIO	NP	QL(8.5 ML daily); SP
ZIEXTENZO	NP	SP
Hematopoietic Mixtures		
HEMATINIC PLUS VIT/MINERALS TABS	P	QL(1 EA daily)
Iron		
FERRETTS TABS	P	QL(2 EA daily)
ferrous fumarate TABS	P	
ferrous gluconate TABS	P	
ferrous gluconate TABS 324 MG	P	AL(Up to 50 yrs old)
ferrous sulfate dried TBCR	P	
ferrous sulfate SOLN 220 MG/5ML, 300 MG/6.8ML	P	QL(16 ML daily)
ferrous sulfate SOLN 15 MG/ML, 15 MG/ML	P	QL(3.4 ML daily)
ferrous sulfate TABS	P	
ferrous sulfate TBEC	P	
IRON CHEWS PEDIATRIC CHEW	P	
iron sucrose 20 MG/ML	P	
polysaccharide iron complex CAPS	P	QL(1 EA daily)
Stem Cell Mobilizers		
plerixafor	P	SP; PA
XOLREMDI	PA	QL(4 EA daily); AL(At least 12 yrs old); SP; PA
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
Hemostatics - Systemic		
aminocaproic acid TABS 500 MG	P	QL(24 EA per fill retail; 24 per fill mail); SP
tranexamic acid TABS	P	QL(30 EA per 5 day(s) retail; 30 EA per 5 days mail); AL(At least 12 yrs old - Up to 49 yrs old)
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
Antihistamine Hypnotics		
diphenhydramine hcl (sleep) CAPS	P	
diphenhydramine hcl (sleep) LIQD	P	
diphenhydramine hcl (sleep) TABS 25 MG	P	QL(1 EA daily)
diphenhydramine hcl (sleep) TABS 50 MG	P	
doxylamine succinate (sleep)	P	
Barbiturate Hypnotics		
phenobarbital sodium SOLN	P	
phenobarbital ELIX	P	
phenobarbital TABS	P	
PHENOBARBITAL TABS	P	
Hypnotics - Tricyclic Agents		
doxepin hcl (sleep)	NP	QL(1 EA daily); AL(At least 18 yrs old)
Non-Barbiturate Hypnotics		

Drug Name	Drug Tier	Requirements/ Limits
AMBIEN CR TBCR *(Use zolpidem tartrate)*	NP	QL(1 EA daily); AL(At least 18 yrs old)
AMBIEN TABS *(Use zolpidem tartrate)*	NP	QL(1 EA daily); AL(At least 18 yrs old)
EDLUAR SUBL	NP	QL(1 EA daily); AL(At least 18 yrs old)
estazolam	P	QL(1 EA daily); AL(At least 18 yrs old)
eszopiclone	P	QL(1 EA daily); AL(At least 18 yrs old)
flurazepam hcl	NP	QL(1 EA daily); AL(At least 18 yrs old)
midazolam hcl SOLN IJ	P	
MIDAZOLAM HCL SOLN IJ	P	
midazolam hcl SYRP	P	
quazepam	NP	QL(1 EA daily); AL(At least 18 yrs old)
RESTORIL *(Use temazepam)*	NP	QL(1 EA daily); AL(At least 18 yrs old)
temazepam 22.5 MG	NP	QL(1 EA daily); AL(At least 18 yrs old)
temazepam 7.5 MG, 15 MG, 30 MG	P	QL(1 EA daily); AL(At least 18 yrs old)
triazolam	P	QL(1 EA daily); AL(At least 18 yrs old)
zaleplon	P	QL(1 EA daily); AL(At least 18 yrs old)
ZOLPIDEM TARTRATE CAPS	NP	QL(1 EA daily); AL(At least 18 yrs old)
zolpidem tartrate SUBL	NP	QL(1 EA daily); AL(At least 18 yrs old)
zolpidem tartrate TABS	P	QL(1 EA daily); AL(At least 18 yrs old)
zolpidem tartrate TBCR	P	QL(1 EA daily); AL(At least 18 yrs old)
Orexin Receptor Antagonists		
BELSOMRA	NP	QL(1 EA daily); AL(At least 18 yrs old)
DAYVIGO	NP	AL(At least 18 yrs old)
QUVIVIQ	NP	AL(At least 18 yrs old)
Selective Melatonin Receptor Agonists		
HETLIOZ LQ SUSP	NP	QL(1 ML daily); AL(At least 18 yrs old); SP
HETLIOZ CAPS *(Use tasimelteon)*	NP	QL(1 EA daily); AL(At least 18 yrs old); SP
ramelteon	P	QL(1 EA daily); AL(At least 18 yrs old)
ROZEREM *(Use ramelteon)*	NP	QL(1 EA daily); AL(At least 18 yrs old)
tasimelteon CAPS	NP	QL(1 EA daily); AL(At least 18 yrs old); SP
LAXATIVES - Bowel Treatment Drugs		
Bulk Laxatives		
calcium polycarbophil TABS	P	QL(10 EA daily)
KONSYL DAILY FIBER PACK 100 %	P	
psyllium CAPS 0.52 GM	P	
psyllium POWD 28.3 %, 30 %, 43 %, 58.6 %, 100 %	P	
SB FIB LAX ORANGE POWD 30 %, 33 %	P	
Electrolyte-based Osmotic Laxatives		
magnesium citrate 1.745 GM/30ML	P	

Drug Name	Drug Tier	Requirements/ Limits
magnesium hydroxide SUSP 7.75 %, 400 MG/5ML, 1200 MG/15ML, 2400 MG/30ML	P	QL(33 ML daily)
MILK OF MAGNESIA CONCENTRATE SUSP	P	
sodium phosphate monobasic-sodium phosphate dibasic PR 19 GM/118ML-7 GM/118ML, 19 GM/197ML-7 GM/197ML, 6 GM/133ML-16 GM/133ML, 7 GM/118ML-19 GM/118ML, 9.5 GM/59ML-3.5 GM/59ML	P	
Laxative Combinations		
peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR	P	QL(4000 ML per fill retail; 4000 per fill mail)
peg 3350-potassium chloride-sod bicarbonate-sod chloride	P	QL(4000 ML per fill retail; 4000 per fill mail)
sennosides-docusate sodium TABS	P	QL(4 EA daily)
sodium sulfate-potassium sulfate-magnesium sulfate	P	
Laxatives - Miscellaneous		
glycerin (laxative) SUPP 1.2 GM, 2 GM, 2.1 GM	P	
lactulose SOLN	P	
PEDIA-LAX SUPP	P	
polyethylene glycol 3350 PACK	P	
polyethylene glycol 3350 POWD	P	QL(34 GM daily)
SORBITOL PO 70 %	P	
Stimulant Laxatives		
bisacodyl SUPP	P	QL(12 EA per fill retail; 12 per fill mail)
bisacodyl TBEC	P	QL(1 EA daily)
senna SYRP 176 MG/5ML	P	
sennosides LIQD	P	
sennosides SYRP	P	
sennosides TABS 8.6 MG, 15 MG, 17.2 MG	P	
Surfactant Laxatives		
docusate calcium	P	
docusate sodium CAPS 100 MG, 250 MG	P	QL(3 EA daily)
docusate sodium LIQD 50 MG/5ML, 100 MG/10ML	P	
DOCUSATE SODIUM SYRP	P	
docusate sodium TABS	P	
MACROLIDES - Drugs to Treat Bacterial Infections		
Azithromycin		
azithromycin SUSR	P	
azithromycin TABS	P	
ZITHROMAX TRI-PAK TABS *(Use azithromycin)*	NP	
ZITHROMAX Z-PAK TABS *(Use azithromycin)*	NP	
ZITHROMAX SUSR *(Use azithromycin)*	NP	
ZITHROMAX TABS 250 MG, 500 MG *(Use azithromycin)*	NP	
Clarithromycin		
clarithromycin SUSR	P	
clarithromycin TABS	P	
clarithromycin TB24	P	
Erythromycins		
E.E.S. GRANULES SUSR *(Use erythromycin ethylsuccinate)*	NP	

Drug Name	Drug Tier	Requirements/ Limits
ERYPED 200 SUSR *(Use erythromycin ethylsuccinate)*	NP	
ERYPED 400 SUSR *(Use erythromycin ethylsuccinate)*	NP	
erythromycin base CPEP	P	
erythromycin base TABS	P	
erythromycin base TBEC	NP	
erythromycin base TBEC	P	
erythromycin ethylsuccinate SUSR	P	
erythromycin ethylsuccinate TABS	P	
erythromycin ethylsuccinate TABS	NP	
Fidaxomicin		
DIFICID SUSR	NP	
DIFICID TABS 200 MG *(Use fidaxomicin)*	NP	
fidaxomicin TABS 200 MG	NP	
MEDICAL DEVICES AND SUPPLIES		
Bandages-Dressings-Tape		
ADHESIVE/LARGE/3"X4" PADS	P	
ADHESIVE/MEDIUM/2"X3" PADS	P	
AMD FOAM DRESSING TOPSHEET PADS	P	RX/OTC
AMD FOAM DRESSING PADS	P	RX/OTC
BAND-AID ALL-IN-ONE GAUZE LG PADS	P	
BAND-AID GAUZE LARGE PADS	P	RX/OTC
BAND-AID GAUZE MEDIUM PADS	P	
BAND-AID GAUZE SMALL PADS	P	

Drug Name	Drug Tier	Requirements/ Limits
BAND-AID HURT-FREE NON-STICK PADS	P	
BAND-AID TRU-ABSORB GAUZE PADS	P	RX/OTC
COPA ISLAND BORDERED FOAM PADS	P	RX/OTC
COPA PLUS HYDROPHILIC FOAM PADS	P	RX/OTC
COVRSITE COVER DRESSING PADS	P	RX/OTC
COVRSITE PLUS COMPOSITE DRESS PADS	P	RX/OTC
CURITY ALL PURPOSE SPONGES PADS	P	
CURITY AMD ANTIMICROBIAL SPNGE PADS	P	
CURITY COVER SPONGE PADS	P	
CURITY DRESSING SPONGES PADS	P	RX/OTC
CURITY GAUZE SPONGE PADS	P	RX/OTC
CURITY GAUZE PADS	P	
CURITY NON-ADHERENT STRIPS PADS	P	
CURITY SPONGES PADS	P	
CVS ADHESIVE PAD 4"X4" PADS	P	
CVS ADHESIVE PAD 6"X6" PADS	P	
CVS ADHESIVE PADS 2.25"X3" PADS	P	
CVS ANTIBACTERIAL GAUZE PADS	P	
CVS GAUZE PAD STERILE PADS	P	RX/OTC
CVS GAUZE STERILE PADS	P	RX/OTC
CVS GAUZE PADS	P	

Drug Name	Drug Tier	Requirements/ Limits
DERMACEA DRAIN SPONGES PADS	P	RX/OTC
DERMACEA GAUZE SPONGE PADS	P	
DERMACEA IV DRAIN SPONGES PADS	P	
DERMACEA IV SPONGES PADS	P	
DERMACEA NON-WOVEN SPONGES PADS	P	
DERMACEA TYPE VII GAUZE PADS	P	
DERMACEA X-RAY SPONGES PADS	P	RX/OTC
DRYMAX EXTRA PADS	P	RX/OTC
EQ GAUZE PADS	P	RX/OTC
EQL GAUZE STERILE PADS	P	
EQL GAUZE PADS	P	
EXCILON AMD DRAIN SPONGES PADS	P	RX/OTC
EXCILON AMD NON-WOVEN SPONGES PADS	P	RX/OTC
EXCILON DRAIN SPONGES PADS	P	RX/OTC
EXCILON IV SPONGES PADS	P	
FT ADHESIVE PADS/SHEER PADS	P	
GAUZE DRESSING PADS	P	RX/OTC
GAUZE PADS PADS	P	
GAUZE TYPE VII MEDI-PAK PADS	P	
GNP SHEER ADHESIVE PADS	P	
GNP STERILE GAUZE PADS	P	
GNP WATERPROOF ADHESIVE 4"X4" PADS	P	
HM ADHESIVE ANTIBACTERIAL PADS	P	
HM STERILE PADS PADS	P	
J & J ADHESIVE LARGE PADS	P	
J & J GAUZE SPONGES 12-PLY MISC	P	RX/OTC
J & J GAUZE SPONGES 16-PLY MISC	P	RX/OTC
J & J GAUZE SPONGES 8-PLY MISC	P	RX/OTC
J & J GAUZE PADS	P	
J & J NON-STICK LARGE PADS	P	
KENDALL HYDROPHILIC FOAM DRESS PADS	P	
KENDALL HYDROPHILIC FOAM PLUS PADS	P	
KERLIX SPONGES PADS	P	RX/OTC
MIRASORB SPONGES MISC	P	
MOLESKIN FOAM PADS	P	
NEXCARE ABSOLUTE WATERPROOF PADS	P	
NU GAUZE 4PLY PADS	P	RX/OTC
NU GAUZE GENERAL-USE SPONGES MISC	P	RX/OTC
OIL EMULSIONS DRESSING/NON-ADH PADS	P	
POLYMEM FILM DOT PADS	P	
POLYMEM NON-ADHESIVE PADS	P	RX/OTC
QC ALL PURPOSE DRESSINGS PADS	P	RX/OTC
QC BORDER ISLAND GAUZE PADS	P	
QC STERILE PADS PADS	P	

Drug Name	Drug Tier	Requirements/ Limits
RAY-TEC X-RAY DETECTABLE SPNGE MISC	P	RX/OTC
RESTORE CONTACT LAYER PADS	P	
RESTORE FOAM DRESSING PADS	P	RX/OTC
RESTORE ODOR ABSORBING DRESS PADS	P	RX/OTC
RESTORE TRIO ABSORBENT DRESS PADS	P	
SILIGENTLE FOAM DRESSING PADS	P	
SM ADHESIVE PADS 2"X3" PADS	P	
SM STERILE PADS	P	RX/OTC
SOF-WICK PADS	P	RX/OTC
STERILE GAUZE PADS	P	
STERILE PADS	P	
SURGICAL GAUZE SPONGE PADS	P	
THERAGAUZE PADS	P	
TOPPER DRESSING SPONGES MISC	P	RX/OTC
Contraceptives		
AIMSCO LUBRICATED MISC	P	
CAYA DPRH	P	
DUREX EXTRA SENSITIVE THIN DEVI	P	
DUREX EXTRA SENSITIVE THIN MISC	P	
DUREX TROPICAL MISC	P	
FANTASY LUBRICATED/SPERMICIDE MISC	P	
FANTASY LUBRICATED MISC	P	
FC2 FEMALE CONDOM	P	

Drug Name	Drug Tier	Requirements/ Limits
FEMCAP DEVI	P	
KAMELEON LUBRICATED MISC	P	
KIMONO COLORS DEVI	P	
KIMONO MAXX-LARGE FLARE MISC	P	
KIMONO MICRO THIN PLUS MISC	P	
KIMONO PLUS MISC	P	
KIMONO PS PLUS MISC	P	
KIMONO PS MISC	P	
KIMONO SENSATION PLUS MISC	P	
KIMONO SENSATION MISC	P	
KIMONO SPECIAL DEVI	P	
KIMONO MISC	P	
MAXX PLUS MISC	P	
MAXX MISC	P	
OMNIFLEX DIAPHRAGM	P	
REALITY LATEX CONDOMS MISC	P	
REALITY LATEX/ULTRA TEXTURED DEVI	P	
REALITY LATEX/ULTRA THIN DEVI	P	
TROJAN BARESKIN DEVI	P	
TROJAN MAGNUM MISC	P	
TROJAN ULTRA THIN/SPERMICIDAL MISC	P	
TROJAN ULTRA THIN DEVI	P	
TROJAN ULTRA THIN MISC	P	
TROJAN-ENZ LUBRICATED MISC	P	
TROJAN-ENZ/SPERMICIDAL MISC	P	
TRUE COVER DEVI	P	

Drug Name	Drug Tier	Requirements/ Limits
TRUSTEX COLOR CONDOMS + LUBE MISC	P	
TRUSTEX LUB/RIBBED/STUDDED MISC	P	
TRUSTEX LUB/SPERMICIDE EX ST MISC	P	
TRUSTEX LUB/SPERMICIDE XL MISC	P	
TRUSTEX LUBRICATED EX LARGE MISC	P	
TRUSTEX LUBRICATED EXTRA ST MISC	P	
TRUSTEX LUBRICATED/SPERMICIDE MISC	P	
TRUSTEX LUBRICATED MISC	P	
TRUSTEX NATURAL CONDOMS + LUBE MISC	P	
TRUSTEX RIA LUB/SPERMICIDE MISC	P	
TRUSTEX RIA LUBRICATED MISC	P	
TRUSTEX-NONOXYNOL-9/RIB/STUD MISC	P	
WIDE-SEAL DIAPHRAGM 60	P	
WIDE-SEAL DIAPHRAGM 65	P	
WIDE-SEAL DIAPHRAGM 70	P	
WIDE-SEAL DIAPHRAGM 75	P	
WIDE-SEAL DIAPHRAGM 80	P	
WIDE-SEAL DIAPHRAGM 85	P	
WIDE-SEAL DIAPHRAGM 90	P	
WIDE-SEAL DIAPHRAGM 95	P	
Diabetic Supplies		
ACCU-CHEK AVIVA SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
ACCU-CHEK FASTCLIX LANCET KIT	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
ACCU-CHEK FASTCLIX LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ACCU-CHEK GUIDE CONTROL LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
ACCU-CHEK GUIDE ME KIT	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
ACCU-CHEK GUIDE KIT	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
ACCU-CHEK SAFE-T PRO LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ACCU-CHEK SMARTVIEW CONTROL LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
ACCU-CHEK SOFTCLIX LANCET DEV KIT	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP

Drug Name	Drug Tier	Requirements/ Limits
ACCU-CHEK SOFTCLIX LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ACCUTREND GLUCOSE CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
ACTI-LANCE 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ACTI-LANCE LITE LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ACTI-LANCE SPECIAL LANCETS 17G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ACTI-LANCE UNIVERSAL 23G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ADVANCED MOBILE LANCET	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ADVANTAGE SAFETY LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ADVOCATE LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ADVOCATE LANCING DEVICE MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
ADVOCATE REDI-CODE+ CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
ADVOCATE REDI-CODE+ DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
ADVOCATE SAFETY LANCETS 21G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ADVOCATE SAFETY LANCETS 23G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ADVOCATE SAFETY LANCETS 26G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
ADVOCATE SAFETY LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
AGAMATRIX CONTROL NORMAL/HIGH SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
AGAMATRIX CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
AGAMATRIX JAZZ WIRELESS 2 KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
AGAMATRIX PRESTO KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
AGAMATRIX ULTRA-THIN LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
AQUALANCE LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ASSURE 4 CONTROL LEVEL 1 & 2 LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
ASSURE COMFORT LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ASSURE DOSE CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
ASSURE DOSE NORM/HIGH CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
ASSURE LANCE LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ASSURE LANCE LANCETS 21G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ASSURE LANCE PLUS SAFETY 25G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ASSURE LANCE PLUS SAFETY 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ASSURE LANCE SAFETY LANCET 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ASSURE PLATINUM METER DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
ASSURE PRISM CONTROL LEVEL 1&2 SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
ASSURE PRISM MULTI METER DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
ASSURE TITANIUM BLOOD GLUCOSE DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
AUTO-LANCET MINI MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
AUTOLET LANCING DEVICE MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
AUTOLET LITE LANCING DEVICE MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
BD MICROTAINER LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
BIOTEL CARE BLOOD GLUCOSE KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
BLOOD GLUCOSE MONITOR SYSTEM KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
BLOOD GLUCOSE MONITORING 333 DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
BLULINK CONTROL HIGH & LOW LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
BLULINK GLUCOSE MONITORING SYS DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
CAREONE ADVANCED LANCING DEV MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
CAREONE LANCET SUPER THIN 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CARESENS CONTROL SOLUTION A/B SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
CARESENS LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CARESENS N FELIZ BT DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
CARESENS N FELIZ DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
CARESENS S CONTROL SOLN A/B LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
CARESENS S FIT BLOOD GLUC MON DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
CARESENS S FIT BT BLOOD GLUC DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
CARETOUCH CONTROL SOL LEVEL 2 LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
CARETOUCH LANCING/EJECTOR MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
CARETOUCH MONITOR SYSTEM KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
CARETOUCH SAFETY LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CARETOUCH SAFETY LANCETS 26G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CARETOUCH TWIST LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CARETOUCH TWIST LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CARETOUCH TWIST LANCETS 33G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CARETOUCH TWIST MC LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CHOSEN LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CHOSEN LANCING DEVICE MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
CHOSEN SAFETY LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CLEVER CHEK AUTO-CODE SYSTEM DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
CLEVER CHEK AUTO-CODE VOICE DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
CLEVER CHEK AUTO-CODE DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
CLEVER CHEK LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CLEVER CHEK SYSTEM KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
CLEVER CHOICE AUTO-CODE SYSTEM DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
CLEVER CHOICE COMFORT EZ	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CLEVER CHOICE GLUCOSE CONTROL LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
CLEVER CHOICE LANCETS 23G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CLEVER CHOICE LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CLEVER CHOICE MICRO SYSTEM KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
CLEVER CHOICE MINI SYSTEM DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
CLEVER CHOICE TALK SYSTEM DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
COAGUCHEK LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
COMFORT ASSURED LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
COMFORT ASSURED LANCETS 33G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
COMFORT TOUCH LANCETS 31G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
COMFORT TOUCH PLUS LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
CONTOUR CONTROL LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
CONTOUR MONITOR DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
CONTOUR NEXT CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
CONTOUR NEXT EZ KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
CONTOUR NEXT GEN MONITOR KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
CONTOUR NEXT LINK KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
CONTOUR NEXT MONITOR KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
CONTOUR NEXT ONE KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
CONTOUR NEXT ONE KIT	NP	QL(6.7 EA daily; 1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
CONTOUR PLUS BLUE KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
CONTOUR PLUS CONTROL SOLUTION LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
CVS BLOOD GLUCOSE METER DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
CVS BLOOD GLUCOSE METER KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); RX/OTC
CVS LANCETS THIN 26G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
DEXCOM G6 RECEIVER	PA	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; PA
DEXCOM G6 SENSOR	PA	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; PA
DEXCOM G6 TRANSMITTER	PA	MP; PA
DEXCOM G7 15 DAY SENSOR	PA	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; PA
DEXCOM G7 RECEIVER	PA	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; PA

Drug Name	Drug Tier	Requirements/ Limits
DEXCOM G7 SENSOR	PA	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; PA
DIATRUE CONTROL LEVEL 1 SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
DIATRUE CONTROL LEVEL 2 SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
DIATRUE CONTROL LEVEL 3 SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
DIATRUE PLUS BLOOD GLUCOSE DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
DROPLET GENTEEL LANCING DEVICE MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
DROPLET LANCETS ULTRA THIN 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
DROPLET LANCING DEVICE MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
DROPLET MEDLANCE LANCET 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
DROPLET PERSONAL LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
DROPSAFE ACTI-LANCE 23G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
DROPSAFE ACTI-LANCE LANCET 17G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
DROPSAFE ACTI-LANCE LANCET 23G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
DROPSAFE ACTI-LANCE LANCET 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
DROPSAFE ERGOLANCE LANCET 21G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
DROPSAFE ERGOLANCE LANCET 25G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
DROPSAFE ERGOLANCE LANCET 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
DROPSAFE HAEMOLANCE LANCET 1.5	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
DROPSAFE HAEMOLANCE LANCET 18G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
DROPSAFE HAEMOLANCE LANCET 21G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
DROPSAFE HAEMOLANCE LANCET 25G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
DROPSAFE HAEMOLANCE LANCET 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
DROPSAFE MEDISAFE LANCET 23G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
DROPSAFE MEDISAFE LANCET 29G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
DROPSAFE MEDLANCE LANCET 0.8MM	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
DROPSAFE MEDLANCE LANCET 21G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
DROPSAFE MEDLANCE LANCET 25G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
DROPSAFE MEDLANCE LANCET 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
DRUG MART ON-THE-GO LANCET 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
DRUG MART UNILET LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
DRUG MART UNILET LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
DRUG MART UNILET LANCETS 33G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EASY COMFORT LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EASY COMFORT LANCETS TWIST TOP	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EASY MINI EJECT LANCING DEVICE MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
EASY PLUS II CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
EASY PLUS II GLUCOSE SYSTEM DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
EASY STEP CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
EASY STEP GLUCOSE MONITOR DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
EASY TALK BLOOD GLUCOSE SYSTEM DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
EASY TALK CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
EASY TALK PLUS II CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
EASY TOUCH CONTROL HIGH & LOW SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
EASY TOUCH GLUCOSE SYSTEM KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
EASY TOUCH HEALTHPRO GLUCOSE KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
EASY TOUCH HEALTHPRO HIGH/LOW LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
EASY TOUCH LANCETS 21G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EASY TOUCH LANCETS 23G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
EASY TOUCH LANCETS 26G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EASY TOUCH LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EASY TOUCH LANCETS 28G/TWIST	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EASY TOUCH LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EASY TOUCH LANCETS 30G/TWIST	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EASY TOUCH LANCETS 32G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EASY TOUCH LANCETS 32G/TWIST	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EASY TOUCH LANCETS 33G/TWIST	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EASY TOUCH LANCING DEVICE MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
EASY TOUCH SAFETY LANCETS 21G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EASY TOUCH SAFETY LANCETS 23G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EASY TOUCH SAFETY LANCETS 26G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EASY TOUCH SAFETY LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EASY TRAK BLOOD GLUCOSE SYSTEM DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
EASY TRAK CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)

Drug Name	Drug Tier	Requirements/ Limits
EASY TRAK II BLOOD GLUCOSE SYS DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
EASY TRAK II CONTROL LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
EASYGLUCO KIT	NP	QL(6.7 EA daily; 1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
EASYMAX 15 LEVEL 2 CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
EASYMAX CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
EASYMAX NG BLOOD GLUCOSE DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
EASYMAX NG BLOOD GLUCOSE KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
EASYMAX V BLOOD GLUCOSE DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
ELEMENT COMPACT CONTROL 2 SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
ELEMENT COMPACT CONTROL 3 SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
ELEMENT COMPACT GLUCOSE SYSTEM DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
ELEMENT COMPACT V GLUCOSE SYS DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
ELEMENT CONTROL LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
ELEMENT PLUS DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
EMBRACE BLOOD GLUCOSE MONITOR DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
EMBRACE CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
EMBRACE EVO CONTROL LEVEL 1 LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
EMBRACE EVO GLUCOSE MONITOR DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
EMBRACE EVO GLUCOSE MONITORING KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
EMBRACE GLUCOSE CONTROL LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)

Drug Name	Drug Tier	Requirements/ Limits
EMBRACE LANCETS ULTRA THIN 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EMBRACE LANCING DEVICE/EJECTOR MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
EMBRACE PRESSURE ACTIVATED 21G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EMBRACE PRESSURE ACTIVATED 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
EMBRACE PRO GLUCOSE CONTROL LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
EMBRACE PRO GLUCOSE METER DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
EMBRACE TALK BLOOD GLUCOSE DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
EMBRACE TALK GLUCOSE CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
EMBRACE TALK MONITORING SYSTEM KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
EMBRACE WAVE GLUCOSE CONTROL LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
EMBRACE WAVE GLUCOSE METER DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
EVERSENSE 365 SENSOR/HOLDER	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
EVERSENSE 365 SMART TRANSMIT	NP	MP
EVERSENSE E3 SENSOR/HOLDER	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
EVERSENSE E3 SMART TRANSMITTER	NP	MP
EVOLUTION AUTOCODE DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
EVOLUTION CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
EXTENDED INFUSION SET 23"/6MM MISC	NP	MP
EXTENDED INFUSION SET 23"/9MM MISC	NP	MP
EXTENDED INFUSION SET 32"/6MM MISC	NP	MP
EXTENDED INFUSION SET 32"/9MM MISC	NP	MP
EXTENDED INFUSION SET 43"/6MM MISC	NP	MP
EXTENDED INFUSION SET 43"/9MM MISC	NP	MP
EXTENDED RESERVOIR 3ML MISC	NP	MP

Drug Name	Drug Tier	Requirements/ Limits
FINGERSTIX LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FONDCIRCLE BLOOD GLUCOSE MONIT KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
FONDCIRCLE CONTROL SOLUTION LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
FONDCIRCLE LANCING DEVICE MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
FONDCIRCLE SINGLE USE LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FORA CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
FORA D20 2-IN-1 MONITOR DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
FORA G20 BLOOD GLUCOSE SYSTEM KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
FORA G30A BLOOD GLUCOSE SYSTEM DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
FORA GD20 BLOOD GLUCOSE SYSTEM DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
FORA GD50 BLOOD GLUCOSE SYSTEM DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
FORA LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FORA LANCING DEVICE MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
FORA PREMIUM V10 BLE SYSTEM DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
FORA TEST N' GO MONITOR DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
FORA TN'G VOICE KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
FORA V10 BLOOD GLUCOSE SYSTEM DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
FORA V10/V12/D10/D20 TEST KIT	NP	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP

Drug Name	Drug Tier	Requirements/ Limits
FORA V12 BLOOD GLUCOSE SYSTEM DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
FORA V20 BLOOD GLUCOSE SYSTEM DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
FORA V30A BLOOD GLUCOSE SYSTEM DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
FORA V30A BLOOD GLUCOSE SYSTEM KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
FORACARE GD40 MONITOR DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
FORACARE GDH CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
FORACARE PREMIUM V10 DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
FORACARE TEST N GO MONITOR DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
FREESTYLE CONTROL SOLUTION LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
FREESTYLE FREEDOM LITE KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
FREESTYLE LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
FREESTYLE LIBRE 14 DAY READER	PA	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; PA
FREESTYLE LIBRE 14 DAY SENSOR	PA	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; PA
FREESTYLE LIBRE 2 PLUS SENSOR	PA	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; PA
FREESTYLE LIBRE 2 READER	PA	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; PA
FREESTYLE LIBRE 2 SENSOR	PA	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; PA
FREESTYLE LIBRE 3 PLUS SENSOR	PA	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; PA
FREESTYLE LIBRE 3 READER	PA	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; PA
FREESTYLE LIBRE 3 SENSOR	PA	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; PA

Drug Name	Drug Tier	Requirements/ Limits
FREESTYLE LITE DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
FREESTYLE LITE KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
FREESTYLE PRECISION NEO SYSTEM KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
FREESTYLE UNISTICK II LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
GE100 BLOOD GLUCOSE SYSTEM DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
GE100 BLOOD GLUCOSE SYSTEM KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
GE100 CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
GENTEEL BUTTERFLY TOUCH LANCET	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
GENTEEL LANCING KIT (BLUE) KIT	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
GENTEEL PLUS LANCING (PURPLE) MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
GENTEEL PLUS LANCING (WHITE) MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
GENTEEL PLUS LANCING DEV(BLUE) MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
GENTEEL PLUS LANCING DEV(PINK) MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
GHT BLOOD GLUCOSE MONITOR KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
GLOBAL INJECT EASE LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
GLOBAL INJECT EASE LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
GLOBAL LANCING DEVICE MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
GLUCOCARD 01 BLOOD GLUCOSE KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
GLUCOCARD 01 CONTROL LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
GLUCOCARD 01 CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
GLUCOCARD EXPRESSION CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
GLUCOCARD EXPRESSION MONITOR KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
GLUCOCARD SHINE CONNEX KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
GLUCOCARD SHINE CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
GLUCOCARD SHINE EXPRESS KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
GLUCOCARD SHINE XL DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
GLUCOCARD SHINE DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
GLUCOCARD SHINE KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
GLUCOCARD VITAL MONITOR KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
GLUCOCOM BLOOD GLUCOSE MONITOR DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
GLUCOCOM CONTROL LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
GLUCOCOM LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
GLUCOCOM LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
GLUCOCOM LANCETS 33G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
GLUCOCOM MONITOR KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
GLUCOSE CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
GNP EASY TOUCH CONT HIGH/LOW SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)

Drug Name	Drug Tier	Requirements/ Limits
GNP EASY TOUCH GLUCOSE METER DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
GNP LANCING SYSTEM DEVICE MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
GNP STERILE LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
GNP STERILE LANCETS 33G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
GNP TRUE METRIX AIR METER KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
GNP TRUE METRIX GLUCOSE METER KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
GOJJI CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
GOJJI LANCING DEVICE/CLEAR CAP MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
GOJJI STERILE LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
GUARDIAN 4 GLUCOSE SENSOR	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
GUARDIAN 4 TRANSMITTER	NP	MP
GUARDIAN CONNECT TRANSMITTER	NP	MP
GUARDIAN LINK 3 TRANSMITTER	NP	MP
GUARDIAN SENSOR (3)	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
GUARDIAN SENSOR 3	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
H-E-B INCONTROL ADV LANCING MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
H-E-B INCONTROL LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
H-E-B INCONTROL LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
H-E-B INCONTROL LANCETS 33G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
HEALTHPRO BLOOD GLUCOSE MONITO KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
HM EMBRACE TALK SYSTEM KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
HW EMBRACE PRO GLUCOSE METER DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
HW EMBRACE TALK BLOOD GLUCOSE DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
HYPOLANCE AST LANCING KIT	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
IHEALTH CONTROL SOLUTION LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
IHEALTH GLUCO+ KIT 10 KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
ILET CONTACT DETACH 23" 6MM MISC	NP	MP; RX/OTC
ILET INFUSION-FLEX 23" 6MM MISC	NP	MP; RX/OTC
ILET INFUSION-INSET 23" 6MM MISC	NP	MP; RX/OTC
ILET INFUSION-INSET 32" 6MM MISC	NP	MP; RX/OTC
ILET INSULIN PUMP DEVI	NP	MP
ILET STARTER - CONTACT DETACH MISC	NP	MP; RX/OTC
ILET STARTER KIT - INSET 23" MISC	NP	MP; RX/OTC
ILET STARTER KIT - INSET 32" MISC	NP	MP; RX/OTC
INFINITY BLOOD GLUCOSE SYSTEM KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
INFINITY CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
KROGER AUTOLET LANCING DEVICE MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
KROGER HEALTHPRO CONTROL HI/LO LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
KROGER HEALTHPRO LANCET 26G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
LANCET DEVICE WITH EJECTOR MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
LANCETS 28G THIN	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
LANCETS 33G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
LANCETS MICRO THIN 33G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
LANCETS SUPER THIN 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
LANCETS ULTRA THIN	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
LANCETS ULTRA THIN 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
LANCING DEVICE MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
LANZO MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
LEADER ADVANCED LANCING DEVICE MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
LIBERTY GLUCOSE CONTROL LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
MEDISENSE GLUCOSE KETONE CONTR LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
MEDLANCE PLUS EXTRA 21G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
MEDLANCE PLUS LITE 25G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
MEDLANCE PLUS SPECIAL 0.8MM	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
MEDLANCE PLUS SUPERLITE 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
MEDLANCE PLUS UNIVERSAL 21G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
MICRODOT BLOOD GLUCOSE SYSTEM KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
MICRODOT CONTROL HIGH/LOW SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
MICROLET LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
MICROLET NEXT LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
MICROLET NEXT LANCING DEVICE MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
MINI LANCING DEVICE MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
MINIMED 630G INSULIN PUMP KIT	NP	MP
MINIMED 780G INSULIN PUMP KIT	NP	MP
MINIMED APP MANAGER DEVI XX	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
MINIMED EXTENDED SUPPLY KIT MISC	NP	MP; RX/OTC
MINIMED FLEX STARTER KIT KIT	NP	MP
MINIMED INSTINCT GLUC SENSOR	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
MINIMED RESERVOIR 3ML MISC	NP	MP
MINT REFILL KIT MISC	NP	MP
MINT STARTER KIT KIT	NP	MP
MM EASY TOUCH GLUCOSE METER KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
MM LANCING DEVICE MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
MM TWIST LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
MOBI 2ML CARTRIDGE MISC	NP	MP
MOBI CONNECT GLUCOSE MONITOR DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
MOBI CONNECT GLUCOSE MONITOR KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); RX/OTC
MOBI CONNECT LANCING DEVICE MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP

Drug Name	Drug Tier	Requirements/ Limits
MOBI CONNECT TWIST LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
MODD1 PATIENT WELCOME KIT KIT	NP	MP
MODD1 SUPPLY KIT KIT	NP	
MONOLET LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
MULTI-LANCET DEVICE 2 KIT	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
MYGLUCOHEALTH BLOOD GLUCOSE KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
MYGLUCOHEALTH CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
MYGLUCOHEALTH LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
NEUTEK 2TEK CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
NOVA SAFETY LANCETS 23G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
NOVA SAFETY LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
NOVA SUREFLEX LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
NOVA SUREFLEX LANCING DEVICE MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
OMNIPOD 5 DEXG7G6 INTRO GEN 5 KIT	PA	MP; PA
OMNIPOD 5 DEXG7G6 PODS GEN 5 MISC	NP	MP
OMNIPOD 5 DEXG7G6 PODS GEN 5 MISC	PA	MP; PA
OMNIPOD 5 LIBRE INTRO KIT	PA	MP; PA
OMNIPOD 5 LIBRE PODS MISC	PA	MP; PA
OMNIPOD CLASSIC PODS (GEN 3) MISC	NP	MP
OMNIPOD DASH INTRO (GEN 4) KIT	PA	MP; PA
OMNIPOD DASH PDM (GEN 4) KIT	NP	MP
OMNIPOD DASH PODS (GEN 4) MISC	PA	MP; PA
OMNIPOD GO KIT	NP	MP
ON CALL EXPRESS MONITORING SYS KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
ONETOUCH DELICA PLUS LANCET30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ONETOUCH DELICA PLUS LANCET33G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ONETOUCH DELICA PLUS LANCING MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
ONETOUCH DELICA SAFETY LANCING	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ONETOUCH ULTRA 2 KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
ONETOUCH ULTRA CONTROL LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
ONETOUCH ULTRASOFT 2 LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ONETOUCH VERIO FLEX SYSTEM KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
ONETOUCH VERIO REFLECT KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
ONETOUCH VERIO LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
PERFECT POINT SAFETY LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
PHARMACIST CHOICE AUTOCODE SYS KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
PHARMACIST CHOICE LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
PHARMACIST CHOICE MINI SYSTEM DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
PIP BLOOD GLUCOSE MONITORING DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
PIP GLUCOSE CONTROL SOLUTION LIQD	P	QL(0.034 EA daily; 1 EA per 30 day(s) retail; 1 EA per 30 days mail)
PIP LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
PIP LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
PIVOT INSULIN PUMP STARTER KIT KIT	NP	MP
PIVOT SUPPLY KIT KIT	NP	
PRECISION GLUCOSE KETONE CONTR LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
PRECISION XTRA-GLUCOSE/KETONE DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
PRO COMFORT LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
PRO COMFORT LANCETS 31G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
PRO COMFORT SAFETY LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
PRO VOICE V8 GLUCOSE SYSTEM DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
PRO VOICE V9 GLUCOSE SYSTEM DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
PRODIGY AUTOCODE BLOOD GLUCOSE DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
PRODIGY AUTOCODE BLOOD GLUCOSE KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
PRODIGY CONTROL SOLUTION SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
PRODIGY LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
PRODIGY LANCING DEVICE MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
PRODIGY POCKET BLOOD GLUCOSE KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
PRODIGY SAFETY LANCETS 26G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
PRODIGY TWIST TOP LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
PRODIGY VOICE BLOOD GLUCOSE KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
PURE COMFORT LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
PURE COMFORT SAFETY LANCET 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
PX ADVANCED LANCING DEVICE MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
PX LANCETS MICROTHIN 33G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
PX LANCETS ULTRA THIN 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
QC ADVANCED LANCING DEVICE MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
QC LANCETS SUPER THIN 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
QC UNILET LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
QC UNILET LANCETS MICRO THIN	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
QUINTET AC BLOOD GLUCOSE DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
QUINTET BLOOD GLUCOSE SYSTEM DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
QUINTET CONTROL HIGH/NORMAL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
REFUAH PLUS GLUCOSE CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
REFUAH PLUS MONITORING SYSTEM KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
RELION ALL-IN-ONE	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
RELION CONFIRM GLUCOSE MONITOR KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
RELION LANCET DEVICES 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
RELION LANCETS MICRO-THIN 33G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
RELION LANCETS THIN 26G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
RELION LANCETS ULTRA-THIN 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
RELION MICRO KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
RELION PREMIER BLU MONITOR DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
RELION PREMIER CLASSIC DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
RELION PREMIER COMPACT SYSTEM KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
RELION PREMIER VOICE MONITOR DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
RELION PRIME MONITOR DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
RELION TRUE MET AIR GLUC METER KIT	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
RELION ULTIMA GLUCOSE SYSTEM KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
RELION ULTRA THIN LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
RIGHTEST GC300 CONTROL LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
RIGHTEST GD500 LANCING DEVICE MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
RIGHTEST GL300 LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
RIGHTEST GM100 BLOOD GLUCOSE KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
RIGHTEST GM300 BLOOD GLUCOSE KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
RIGHTEST GM550 BLOOD GLUCOSE KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
RIGHTEST GT333 BLOOD GLUCOSE DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
SAFETY LANCET 30G/PRESSURE ACT	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
SAFETY LANCETS 21G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
SAFETY LANCETS 23G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
SAFETY LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
SAPS HEALTH PLUS LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
SAPS HEALTH TWIST TOP LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
SAPS TWIST TOP LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
SENSILANCE SAFETY LANCETS 21G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
SENSILANCE SAFETY LANCETS 26G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
SENSILANCE SAFETY LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
SIMPLE DIAGNOSTICS LANCING DEV MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
SIMPLERA SENSOR	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
SIMPLERA SYNC SENSOR	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP

Drug Name	Drug Tier	Requirements/ Limits
SIMPLERA SYSTEM	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
SMART DIABETES VANTAGE LANCING MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
SMARTEST CONTROL MEDIUM SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
SMARTEST EJECT STARTER KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
SMARTEST EJECT DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
SMARTEST LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
SMARTEST PERSONA STARTER KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
SMARTEST PRONTO STARTER KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
SMARTEST PROTEGE STARTER KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
SMARTEST PROTEGE DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
SOLUS V2 BLOOD GLUCOSE SYSTEM DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
SOLUS V2 BLOOD GLUCOSE SYSTEM KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
SOLUS V2 CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
SOLUS V2 LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
SOLUS V2 LANCING DEVICE MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
SOLUS V2 TWIST LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
STERILANCE TL	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
SURE COMFORT LANCETS 18G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
SURE COMFORT LANCETS 21G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
SURE COMFORT LANCETS 23G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
SURE COMFORT LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
SURE COMFORT LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
SURE COMFORT LANCING PEN MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
T:FLEX T:LOCK CARTRIDGE 4.8ML MISC	NP	MP
T:SLIM X2 3ML CARTRIDGE MISC	NP	MP
T:SLIM X2 BASAL-IQ PUMP DEVI	NP	MP
T:SLIM X2 CONTROL-IQ 7.7 PUMP DEVI	NP	MP
T:SLIM X2 CONTROL-IQ 7.8 PUMP DEVI	NP	MP
T:SLIM X2 INSULIN PMP BASAL6.4 DEVI	NP	MP
T:SLIM X2 INSULIN PUMP DEVI	NP	MP
T:SLIM X2 STARTER 7.10 KIT	NP	MP
TAI DOC CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
TANDEM MOBI AUTOSOFT XC KIT MISC	NP	MP
TANDEM MOBI AUTOSOFT30 10PK23" MISC	NP	MP
TANDEM MOBI AUTOSOFT30 14PK23" MISC	NP	MP
TANDEM MOBI AUTOSOFTXC 10PK23" MISC	NP	MP
TANDEM MOBI AUTOSOFTXC 10PK5" MISC	NP	MP
TANDEM MOBI AUTOSOFTXC 14PK23" MISC	NP	MP
TANDEM MOBI AUTOSOFTXC 14PK5" MISC	NP	MP
TANDEM MOBI SYSTEM STARTER KIT	NP	MP
TANDEM MOBI TRUSTEEL 10PK23" MISC	NP	MP
TANDEM T:SLIM ASFT 30 PK10 23" MISC	NP	MP
TANDEM T:SLIM ASFT 30 PK14 23" MISC	NP	MP
TANDEM T:SLIM ASFT XC PK10 23" MISC	NP	MP

Drug Name	Drug Tier	Requirements/ Limits
TANDEM T:SLIM ASFT XC PK14 23" MISC	NP	MP
TANDEM T:SLIM TRUSTL PK10 23" MISC	NP	MP
TECHLITE LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
TECHLITE LANCETS 26G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
TEMPO SMART BUTTON MISC	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); RX/OTC
TEMPO WELCOME KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); RX/OTC
TRAVEL LANCETS ADVANCED 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
TRUE COMFORT SAFETY LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
TRUE COMFORT TWIST TOP LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
TRUE METRIX AIR GLUCOSE METER KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
TRUE METRIX AIR GLUCOSE METER KIT	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
TRUE METRIX GO GLUCOSE METER KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
TRUE METRIX LEVEL 1 SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
TRUE METRIX LEVEL 2 SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
TRUE METRIX LEVEL 3 SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
TRUE METRIX METER DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
TRUE METRIX METER KIT	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
TRUEDRAW LANCING DEVICE MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
TRUENESS BLOOD GLUCOSE MONITOR DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
TRUEPLUS LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
TRUEPLUS LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
TRUEPLUS LANCETS 33G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
TRUEPLUS SAFETY LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
TRUERESULT BLOOD GLUCOSE KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
TRUETRACK BLOOD GLUCOSE KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
TRUETRACK SMART SYSTEM KIT	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
TWIIST REFILL KIT/INFUSION SET KIT	NP	MP
TWIIST REFILL KIT KIT	NP	MP
TWIIST STARTER KIT KIT	NP	MP
TWIST TOP LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ULTI-LANCE AUTOMATIC MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
ULTILET CLASSIC LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ULTILET LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ULTILET SAFETY LANCETS 23G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ULTRA THIN LANCETS 31G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ULTRA-CARE LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
ULTRA-THIN II LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
UNILET COMFORTOUCH LANCET	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
UNILET G.P. SUPERLITE LANCET	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
UNILET GP 28 ULTRA THIN	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
UNILET LANCET	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
UNILET MICRO-THIN 33G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
UNILET SUPER-THIN 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
UNILET ULTRA-THIN 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
UNISTIK 2	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
UNISTIK 2 COMFORT	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
UNISTIK 2 EXTRA	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
UNISTIK 2 NORMAL	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
UNISTIK 2 SUPER	P	QL(6.7 EA daily; 1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
UNISTIK 3 COMFORT	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
UNISTIK 3 EXTRA	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
UNISTIK 3 GENTLE	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
UNISTIK 3 NEONATAL	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
UNISTIK 3 NORMAL	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
UNISTIK CZT COMFORT	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
UNISTIK CZT NORMAL	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
UNISTIK NORMAL	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
UNISTIK PRO SAFETY LANCET	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
UNISTIK SAFETY LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
UNISTIK SAFETY LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
UNISTIK TOUCH SAFETY LANC 21G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
UNISTIK TOUCH SAFETY LANC 23G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
UNISTIK TOUCH SAFETY LANC 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
UNISTIK TOUCH SAFETY LANC 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
UNISTRIP CONTROL SOLN	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
V-GO 20 KIT	NP	MP
V-GO 30 KIT	NP	MP
V-GO 40 KIT	NP	MP
VERIFINE SAFE LANCET MINI 21G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
VERIFINE SAFE LANCET MINI 23G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
VERIFINE SAFE LANCET MINI 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
VERIFINE SAFE LANCET MINI 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
VERIFINE UNIVERSAL LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
VERIFINE UNIVERSAL LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
VERIFINE UNIVERSAL LANCETS 33G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
VIVAGUARD INO CONTROL SOLUTION LIQD	P	QL(1 EA per 30 day(s) retail; 1 EA per 30 days mail)
VIVAGUARD INO CONTROL SOLUTION LIQD	P	QL(0.034 EA daily; 1 EA per 30 day(s) retail; 1 EA per 30 days mail)
VIVAGUARD INO GLUCOSE METER DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
VIVAGUARD INO GLUCOSE METER KIT	NP	QL(6.7 EA daily; 1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
VIVAGUARD INO SMART GLUC METER DEVI	NP	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP; RX/OTC
VIVAGUARD LANCETS	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
VIVAGUARD LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
VIVAGUARD LANCING DEVICE MISC	P	QL(1 EA per 730 day(s) retail; 1 EA per 730 days mail); MP
VIVAGUARD SAFETY LANCETS 28G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
ZEVRX TWIST TOP LANCETS 30G	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
Parenteral Therapy Supplies		
ADVOCATE INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
AQ INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
BD AUTOSHIELD DUO	P	MP; RX/OTC
BD INS SYR ULTRAFINE 1/2UNIT	P	QL(5 EA daily); RX/OTC
BD INSULIN SYR ULTRAFINE II	P	QL(5 EA daily); RX/OTC
BD INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
BD INSULIN SYRINGE HALF-UNIT	P	QL(5 EA daily); RX/OTC
BD INSULIN SYRINGE MICROFINE	P	QL(5 EA daily); RX/OTC
BD INSULIN SYRINGE U/F	P	QL(5 EA daily); RX/OTC
BD INSULIN SYRINGE ULTRAFINE	P	QL(5 EA daily)
BD PEN NEEDLE MICRO ULTRAFINE	P	MP
BD PEN NEEDLE MINI ULTRAFINE	P	MP; RX/OTC
BD PEN NEEDLE NANO 2ND GEN	P	MP; RX/OTC
BD PEN NEEDLE NANO ULTRAFINE	P	MP; RX/OTC
BD PEN NEEDLE ORIG ULTRAFINE	P	MP
BD PEN NEEDLE SHORT ULTRAFINE	P	MP; RX/OTC
BD SAFETYGLIDE INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
BD VEO INSULIN SYR ULTRAFINE	P	QL(5 EA daily); RX/OTC
CAREONE INSULIN SYRINGE	P	QL(5 EA daily)
CARETOUCH HYPODERMIC NEEDLE	P	QL(6.7 EA daily; 670 EA per 100 day(s) retail; 670 EA per 100 days mail); MP; RX/OTC
CARETOUCH INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
CEQUR SIMPL EXT WEAR INSERTER MISC	P	MP
CEQUR SIMPLICITY 1U EXTND WEAR DEVI	NP	MP; RX/OTC
CEQUR SIMPLICITY 2U EXTND WEAR DEVI	NP	MP; RX/OTC
CEQUR SIMPLICITY 2U DEVI	NP	MP; RX/OTC
CEQUR SIMPLICITY 2U DEVI	PA	MP; PA; RX/OTC
CEQUR SIMPLICITY INSERTER MISC	P	MP
COMFORT EZ INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
DROPLET INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
DROPSAFE SAFETY SYRINGE/NEEDLE	P	QL(5 EA daily); RX/OTC
EASY COMFORT INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
EASY TOUCH FLIPLOCK INSULIN SY	P	QL(5 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
EASY TOUCH INSULIN SAFETY SYR	P	QL(5 EA daily); RX/OTC
EASY TOUCH INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
EASY TOUCH SHEATHLOCK SYRINGE	P	QL(5 EA daily); RX/OTC
EMBECTA AUTOSHIELD DUO	P	MP; RX/OTC
EMBECTA INS SYR U/F 1/2 UNIT	P	QL(5 EA daily); RX/OTC
EMBECTA INSULIN SYR ULTRAFINE	P	QL(5 EA daily); RX/OTC
EMBECTA INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
EMBECTA INSULIN SYRINGE U-100	P	QL(5 EA daily); RX/OTC
EMBECTA PEN NEEDLE NANO	P	MP; RX/OTC
EMBECTA PEN NEEDLE NANO 2 GEN	P	MP; RX/OTC
EMBECTA PEN NEEDLE ULTRAFINE	P	MP
FIFTY50 SUPERIOR COMFORT SYR	P	QL(5 EA daily); RX/OTC
GLOBAL EASY GLIDE INSULIN SYR	P	QL(5 EA daily); RX/OTC
GLOBAL INJECT EASE INSULIN SYR	P	QL(5 EA daily); RX/OTC
GLOBAL INSULIN SYRINGES	P	QL(5 EA daily); RX/OTC
GLUCOPRO INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
GNP INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
GNP INSULIN SYRINGES	P	QL(5 EA daily); RX/OTC
GNP INSULIN SYRINGES 28GX1/2"	P	QL(5 EA daily); RX/OTC
GNP INSULIN SYRINGES 29GX1/2"	P	QL(5 EA daily); RX/OTC
GNP INSULIN SYRINGES 30GX5/16"	P	QL(5 EA daily); RX/OTC
GNP INSULIN SYRINGES 31GX5/16"	P	QL(5 EA daily); RX/OTC
GNP ULTRA COM INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
HEALTHWISE INSULIN SYR/NEEDLE	P	QL(5 EA daily); RX/OTC
HM ULTICARE INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
INSULIN SYRINGE-NEEDLE U-100	P	QL(5 EA daily); RX/OTC
KINRAY INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
LITETOUCH INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
MAGELLAN INSULIN SAFETY SYR	P	QL(5 EA daily); RX/OTC
MAXI-COMFORT INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
MAXICOMFORT SYR 27G X 1/2"	P	QL(5 EA daily); RX/OTC
MEDIC INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
MM INSULIN SYRINGE/NEEDLE	P	QL(5 EA daily); RX/OTC
MONOJECT INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
MONOJECT ULTRA COMFORT SYRINGE	P	QL(5 EA daily); RX/OTC
PRECISION SURE-DOSE SYRINGE	P	QL(5 EA daily); RX/OTC
PRO COMFORT INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
PRODIGY INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
PX INSULIN SYRINGE	P	QL(5 EA daily)
REALITY INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
RELION INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
SB INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
SECURESAFE INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
SURE COMFORT INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
TECHLITE INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
TRUE COMFORT INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
TRUE COMFORT PRO INSULIN SYR	P	QL(5 EA daily); RX/OTC
TRUEPLUS INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
ULTICARE INSULIN SAFETY SYR	P	QL(5 EA daily); RX/OTC
ULTICARE INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
ULTIGUARD SAFEPACK SYR/NEEDLE	P	QL(5 EA daily)
ULTRA FLO INSULIN SYR 1/2 UNIT	P	QL(5 EA daily); RX/OTC
ULTRA FLO INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
ULTRA-THIN II INS SYR SHORT	P	QL(5 EA daily); RX/OTC
ULTRA-THIN II INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
ULTRACARE INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
VANISHPOINT INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
VERIFINE INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
VERISAFE SAFETY INSULIN SYR	P	QL(5 EA daily); RX/OTC
ZEVRX INSULIN SYRINGE	P	QL(5 EA daily); RX/OTC
Respiratory Therapy Supplies		
ADULT MASK DEVI	P	RX/OTC
AEROBIKA DEVI	P	RX/OTC
AEROCHAMBER HOLDING CHAMBER DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
AEROCHAMBER MINI CHAMBER DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
AEROCHAMBER MV MISC	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
AEROCHAMBER PLS FLOVU MTHPIECE DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
AEROCHAMBER PLUS FLO-VU INTERM DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
AEROCHAMBER PLUS FLO-VU LARGE DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
AEROCHAMBER PLUS FLO-VU LARGE MISC	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
AEROCHAMBER PLUS FLO-VU MEDIUM DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
AEROCHAMBER PLUS FLO-VU MEDIUM MISC	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
AEROCHAMBER PLUS FLO-VU SMALL DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
AEROCHAMBER PLUS FLO-VU SMALL MISC	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
AEROCHAMBER PLUS FLOW VU MISC	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
AEROCHAMBER W/FLOWSIGNAL MISC	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
AEROCHAMBER Z-STAT PLUS CHAMBR MISC	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
AEROCHAMBER Z-STAT PLUS/LARGE MISC	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
AEROCHAMBER Z-STAT PLUS/MEDIUM MISC	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
AEROCHAMBER Z-STAT PLUS/SMALL MISC	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
AEROCHAMBER Z-STAT PLUS MISC	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
AEROCHAMBER2GO ANTI-STATIC DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
AEROVENT PLUS DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
ALL FLOW 1000 PFT FILTER DEVI	P	RX/OTC
ALL FLOW 2000 PFT FILTER DEVI	P	RX/OTC
ALL FLOW 3000 PFT FILTER DEVI	P	RX/OTC
ALL FLOW 4000 PFT FILTER DEVI	P	RX/OTC
ALL FLOW 5000 PFT FILTER DEVI	P	RX/OTC
ALL FLOW 6000 PFT FILTER DEVI	P	RX/OTC
ALL FLOW 7000 PFT FILTER DEVI	P	RX/OTC
BREATHE COMFORT CHAMBER/ADULT DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
BREATHE COMFORT CHAMBER/CHILD DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
BREATHE EASE LARGE DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
BREATHE EASE MEDIUM DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
BREATHE EASE SMALL DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
BREATHERITE VALVED MDI CHAMBER DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
CLEVER CHOICE HOLDING CHAMBER DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
CO MONITOR DEVI	P	RX/OTC
COMPACT SPACE CHAMBER/LG MASK DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
COMPACT SPACE CHAMBER/MED MASK DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
COMPACT SPACE CHAMBER/SM MASK DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
COMPACT SPACE CHAMBER DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
EASIVENT MASK LARGE MISC	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
EASIVENT MASK MEDIUM MISC	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
EASIVENT MASK SMALL MISC	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
EASIVENT MISC	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
EASY FLOW BLACK/BLUE DEVI	P	RX/OTC
EASY FLOW BLACK/ORANGE DEVI	P	RX/OTC
EASY FLOW BLACK/RED DEVI	P	RX/OTC
EASY FLOW BLACK/WHITE DEVI	P	RX/OTC
EASY FLOW BLACK/YELLOW DEVI	P	RX/OTC
EASY FLOW WHITE/BLUE DEVI	P	RX/OTC
EASY FLOW WHITE/GREEN DEVI	P	RX/OTC
EASY FLOW WHITE/PINK DEVI	P	RX/OTC
EASY FLOW WHITE/WHITE DEVI	P	RX/OTC
EASY FLOW WHITE/YELLOW DEVI	P	RX/OTC
EQ SPACE CHAMBER ANTI-STATIC L DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
EQ SPACE CHAMBER ANTI-STATIC M DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
EQ SPACE CHAMBER ANTI-STATIC S DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
EQ SPACE CHAMBER ANTI-STATIC DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
FLEXICHAMBER DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
IN-CHECK DIAL FLOW TRAINER DEVI	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
IN-CHECK INSPIRATORY FLOW MTR DEVI	P	RX/OTC
INSPIREASE RESERVOIR BAGS	P	QL(3 EA per 180 day(s) retail; 3 EA per 180 days mail)
INSPIREASE MISC	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
MICROCHAMBER DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
MICROCHAMBER MISC	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
MICROSPACER MISC	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
NAVAGE NASAL ASPIRATOR BABY DEVI	P	RX/OTC
NEBULIZER CUP/TUBING DEVI	P	RX/OTC
OMBRA TABLE TOP COMPRESSOR DEVI	P	RX/OTC
ONE FLOW SPIROMETER DEVI	P	RX/OTC
OPTICHAMBER DIAMOND-LG MASK DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
OPTICHAMBER DIAMOND-MD MASK MISC	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
OPTICHAMBER DIAMOND-SM MASK MISC	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
OPTICHAMBER DIAMOND DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
OPTICHAMBER DIAMOND MISC	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
PARI MANUAL INTERRUPTER DEVI	P	RX/OTC
PARI TREK S COMBO PACK DEVI	P	RX/OTC
POCKET CHAMBER DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
POCKET SPACER DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
PRO COMFORT SPACER ADULT MISC	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
PRO COMFORT SPACER CHILD MISC	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
PRO COMFORT SPACER INFANT DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
PROCARE SPACER/ADULT MASK DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
PROCARE SPACER/CHILD MASK DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
PROCHAMBER VHC DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
PURE COMFORT 3-BALL BREATHE EX DEVI	P	RX/OTC
PURE COMFORT SPACER CHAMBER DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
QUAKE DEVI	P	RX/OTC
RITEFLO DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
SPIRO PD DEVI	P	RX/OTC
THRESHOLD PEP DEVI	P	RX/OTC
VERSAPAP W/UNIVERSAL TUBING DEVI	P	RX/OTC
VERSAPAP DEVI	P	RX/OTC
VORTEX HOLD CHMBR/MASK/CHILD DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
VORTEX HOLD CHMBR/MASK/TODDLER DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
VORTEX VALVE CHAMBER-PEDI MASK DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
VORTEX VALVED HOLDING CHAMBER DEVI	P	QL(2 EA per 360 day(s) retail; 2 EA per 360 days mail); RX/OTC
MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches		
Calcitonin Gene-Related Peptide (CGRP) Receptor Antag		
AIMOVIG	PA	SP; PA
AJOVY SOAJ	PA	SP; PA
AJOVY SOSY	PA	SP; PA
EMGALITY (300 MG DOSE) SOSY	NP	SP
EMGALITY SOAJ	PA	SP; PA
EMGALITY SOSY	PA	SP; PA
NURTEC	PA	QL(0.54 EA daily); PA
QULIPTA	PA	QL(1 EA daily); PA
UBRELVY	PA	QL(0.534 EA daily); PA
VYEPTI	NP	SP
ZAVZPRET	NP	
Migraine Combinations		
sumatriptan-naproxen sodium	NP	QL(9 EA per 30 day(s) retail; 9 EA per 30 days mail)
SYMBRAVO TABS PO	NP	QL(9 EA per 30 day(s) retail; 9 EA per 30 days mail)
Migraine Products		
BREKIYA SOAJ SC 1 MG/ML	PA	SP; PA
dihydroergotamine mesylate SOLN IJ 1 MG/ML	PA	AL(At least 18 yrs old); PA
dihydroergotamine mesylate SOLN NA 4 MG/ML	PA	PA

Drug Name	Drug Tier	Requirements/ Limits
Migraine Products - NSAIDs		
ELYXYB	NP	
Serotonin Agonists		
almotriptan malate	NP	QL(6 EA per 30 day(s) retail; 6 EA per 30 days mail)
eletriptan hydrobromide	NP	QL(6 EA per 30 day(s) retail; 6 EA per 30 days mail)
FROVA *(Use frovatriptan succinate)*	P	QL(9 EA per 30 day(s) retail; 9 EA per 30 days mail)
frovatriptan succinate	NP	QL(9 EA per 30 day(s) retail; 9 EA per 30 days mail)
IMITREX STATDOSE REFILL SOCT 4 MG/0.5ML	NP	QL(4 ML per 30 day(s) retail; 4 ML per 30 days mail)
IMITREX STATDOSE REFILL SOCT 6 MG/0.5ML	NP	QL(2 ML per 30 day(s) retail; 2 ML per 30 days mail)
IMITREX STATDOSE SYSTEM SOAJ 6 MG/0.5ML *(Use sumatriptan succinate)*	NP	QL(2 ML per 30 day(s) retail; 2 ML per 30 days mail)
IMITREX STATDOSE SYSTEM SOAJ 4 MG/0.5ML	NP	QL(4 ML per 30 day(s) retail; 4 ML per 30 days mail)
IMITREX TABS 50 MG, 100 MG *(Use sumatriptan succinate)*	NP	QL(9 EA per 30 day(s) retail; 9 EA per 30 days mail)
IMITREX TABS 25 MG *(Use sumatriptan succinate)*	NP	QL(18 EA per 30 day(s) retail; 18 EA per 30 days mail)
MAXALT-MLT TBDP 10 MG *(Use rizatriptan benzoate)*	NP	QL(12 EA per 30 day(s) retail; 12 EA per 30 days mail)
MAXALT TABS 10 MG *(Use rizatriptan benzoate)*	NP	QL(12 EA per 30 day(s) retail; 12 EA per 30 days mail)
naratriptan hcl	NP	QL(9 EA per 30 day(s) retail; 9 EA per 30 days mail)
RELPAX *(Use eletriptan hydrobromide)*	P	QL(6 EA per 30 day(s) retail; 6 EA per 30 days mail)
REYVOW	NP	QL(4 EA per 30 day(s) retail; 4 EA per 30 days mail)
rizatriptan benzoate TABS	P	QL(12 EA per 30 day(s) retail; 12 EA per 30 days mail)
rizatriptan benzoate TBDP	P	QL(12 EA per 30 day(s) retail; 12 EA per 30 days mail)
sumatriptan 20 MG/ACT	P	QL(6 EA per 30 day(s) retail; 6 EA per 30 days mail)
sumatriptan 5 MG/ACT	P	QL(12 EA per 30 day(s) retail; 12 EA per 30 days mail)
sumatriptan succinate SOAJ 6 MG/0.5ML	NP	QL(2 ML per 30 day(s) retail; 2 ML per 30 days mail)
sumatriptan succinate SOLN 6 MG/0.5ML	NP	QL(2 ML per 30 day(s) retail; 2 ML per 30 days mail)
sumatriptan succinate TABS 25 MG	P	QL(18 EA per 30 day(s) retail; 18 EA per 30 days mail)
sumatriptan succinate TABS 50 MG, 100 MG	P	QL(9 EA per 30 day(s) retail; 9 EA per 30 days mail)

Drug Name	Drug Tier	Requirements/ Limits
TOSYMRA	NP	QL(12 EA per 30 day(s) retail; 12 EA per 30 days mail)
ZEMBRACE SYMTOUCH SOAJ	NP	QL(4 ML per 30 day(s) retail; 4 ML per 30 days mail)
zolmitriptan SOLN	NP	QL(12 EA per 30 day(s) retail; 12 EA per 30 days mail)
zolmitriptan TABS 2.5 MG	NP	QL(12 EA per 30 day(s) retail; 12 EA per 30 days mail)
zolmitriptan TABS 5 MG	NP	QL(6 EA per 30 day(s) retail; 6 EA per 30 days mail)
zolmitriptan TBDP	NP	QL(12 EA per 30 day(s) retail; 12 EA per 30 days mail)
ZOMIG SOLN *(Use zolmitriptan)*	NP	QL(12 EA per 30 day(s) retail; 12 EA per 30 days mail)
ZOMIG SOLN	NP	QL(12 EA per 30 day(s) retail; 12 EA per 30 days mail)
MINERALS & ELECTROLYTES		
Calcium		
CALCIUM 600 +D HIGH POTENCY TABS	P	QL(2 EA daily)
CALCIUM CARB-CHOLECALCIFEROL CHEW	P	
calcium carbonate-cholecalciferol TABS	P	
calcium carbonate-vitamin d TABS 125 UNIT-250 MG, 250 MG-125 UNIT	P	
calcium carbonate-vitamin d TABS 600 MG-200 UNIT	P	QL(2 EA daily)
CALCIUM CARBONATE CHEW	P	
calcium carbonate TABS 1250 MG, 500 MG	P	
calcium citrate TABS	P	
CALCIUM CHEW	P	
oyster shell	P	
OYSTER SHELL CALCIUM/D TABS 500 MG-200 UNIT	P	
PARVA-CAL 200 UNIT-500 MG	P	
Electrolyte Mixtures		
oral electrolytes SOLN	P	
Fluoride		
sodium fluoride CHEW	P	AL(Up to 15 yrs old)
sodium fluoride SOLN 0.5 MG/ML	P	AL(Up to 15 yrs old); RX/OTC
SODIUM FLUORIDE SOLN 0.5 MG/ML	P	AL(Up to 15 yrs old); RX/OTC
Magnesium		
magnesium oxide (mg supplement) TABS	P	
Phosphate		
PHOSPHA 250 NEUTRAL	P	QL(8 EA daily); RX/OTC
pot phosphate monobasic w/ sod phosphate dibasic & monobasic	P	QL(8 EA daily); RX/OTC
WES-PHOS 250 NEUTRAL 852 MG-155 MG-130 MG	P	QL(8 EA daily); RX/OTC
Potassium		
EFFER-K TBEF 25 MEQ	P	
potassium bicarbonate TBEF	P	
potassium chloride microencapsulated crystals er	P	

Drug Name	Drug Tier	Requirements/ Limits
potassium chloride CPCR 10 MEQ	P	
potassium chloride CPCR 8 MEQ	P	QL(1 EA daily)
potassium chloride PACK PO 20 MEQ	P	
potassium chloride SOLN PO 10 %, 20 %, 10 %	P	
potassium chloride TBCR 8 MEQ, 10 MEQ, 20 MEQ	P	
Sodium		
sodium chloride SOLN IV 0.9 %	P	
SODIUM CHLORIDE SOLN IJ 0.9 %	P	
Zinc		
zinc sulfate CAPS	P	
MISCELLANEOUS THERAPEUTIC CLASSES		
Chelating Agents		
CUVRIOR	PA	SP; PA
DEPEN TITRATABS TABS *(Use penicillamine)*	PA	SP; PA
penicillamine CAPS	PA	SP; PA
penicillamine TABS	PA	SP; PA
Enzymes		
XIAFLEX	PA	QL(2 EA per fill retail; 2 per fill mail); AL(At least 18 yrs old); SP; PA
Immunomodulators		
JOENJA	PA	QL(2 EA daily); AL(At least 4 yrs old); SP; PA
JOENJA	PA	QL(2 EA daily); AL(At least 4 yrs old - Up to 11 yrs old); PA
lenalidomide	PA	SP; PA
REVLIMID *(Use lenalidomide)*	PA	SP; PA
RHAPSIDO TABS PO 25 MG	PA	AL(At least 18 yrs old); SP; PA
RYSTIGGO	NP	SP
THALOMID 50 MG, 100 MG	PA	SP; PA
VYVGART	NP	SP
VYVGART HYTRULO	NP	SP
VYVGART HYTRULO SC	NP	SP
Immunosuppressive Agents		
azathioprine TABS 50 MG	P	
azathioprine TABS 75 MG, 100 MG	P	QL(3 EA daily)
cyclosporine modified (for microemulsion) CAPS	P	QL(4 EA daily)
cyclosporine modified (for microemulsion) SOLN	P	QL(8 ML daily)
cyclosporine CAPS	P	QL(4 EA daily)
ENSPRYNG	NP	SP
everolimus (immunosuppressant)	P	
mycophenolate mofetil hcl	P	
mycophenolate mofetil CAPS	P	QL(2 EA daily)
mycophenolate mofetil SUSR	P	QL(15 ML daily)
mycophenolate mofetil TABS	P	QL(4 EA daily)
mycophenolate sodium 360 MG	P	QL(4 EA daily)
mycophenolate sodium 180 MG	P	QL(2 EA daily)
PROGRAF PACK	P	
SANDIMMUNE SOLN IV 50 MG/ML	P	
sirolimus SOLN	P	
sirolimus TABS	P	
tacrolimus CAPS	P	QL(3 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
tacrolimus SOLN 5 MG/ML	P	
UPLIZNA	NP	QL(30 ML per fill retail; 30 per fill mail); AL(At least 18 yrs old); SP
PIK3CA-Related Overgrowth Spectrum (PROS) Agents		
VIJOICE TBPK	PA	SP; PA
Potassium Removing Agents		
LOKELMA	P	
sodium polystyrene sulfonate POWD	P	
sodium polystyrene sulfonate SUSP CO 15 GM/60ML	NP	
sodium polystyrene sulfonate SUSP CO 15 GM/60ML	P	
VELTASSA 1 GM, 8.4 GM, 16.8 GM	NP	
Sclerosing Agents		
sodium tetradecyl sulfate	PA	PA
Systemic Lupus Erythematosus Agents		
BENLYSTA SOAJ	PA	AL(At least 5 yrs old); SP; PA
BENLYSTA SOLR	PA	AL(At least 5 yrs old); SP; PA
BENLYSTA SOSY	PA	AL(At least 18 yrs old); SP; PA
SAPHNELO	PA	QL(2 ML per 28 day(s) retail; 2 ML per 28 days mail); AL(At least 18 yrs old); SP; PA
SAPHNELO SC 120 MG/0.8ML	PA	QL(2 ML per 28 day(s) retail; 2 ML per 28 days mail); AL(At least 18 yrs old); SP; PA
SAPHNELO PEN SC 120 MG/0.8ML	PA	QL(2 ML per 28 day(s) retail; 2 ML per 28 days mail); AL(At least 18 yrs old); SP; PA
MOUTH/THROAT/DENTAL AGENTS		
Anesthetics Topical Oral		
lidocaine hcl (mouth-throat) 2 %	P	QL(100 ML per fill retail; 100 per fill mail)
lidocaine hcl (mouth-throat) 2 %	P	QL(15 ML per fill retail; 15 per fill mail)
lidocaine hcl (mouth-throat) 4 %	P	QL(4 ML per fill retail; 4 per fill mail)
Anti-infectives - Throat		
nystatin (mouth-throat)	P	QL(120 ML per fill retail; 120 per fill mail)
Antiseptics - Mouth/Throat		
chlorhexidine gluconate (mouth-throat)	P	
Dental Products		
sodium fluoride (dental) CREA	P	QL(60 GM per fill retail; 60 per fill mail)
sodium fluoride (dental) GEL	P	QL(60 GM per fill retail; 60 per fill mail)
sodium fluoride (dental) SOLN 0.2 %	P	
Steroids - Mouth/Throat/Dental		
triamcinolone acetonide (mouth)	P	
Throat Products - Misc.		

Drug Name	Drug Tier	Requirements/ Limits
AQUORAL SOLN	P	QL(900 ML per fill retail; 900 per fill mail); RX/OTC
artificial saliva SOLN	P	QL(900 ML per fill retail; 900 per fill mail); RX/OTC
CAPHOSOL SOLN	P	QL(900 ML per fill retail; 900 per fill mail); RX/OTC
NUMOISYN LIQD	P	QL(900 ML per fill retail; 900 per fill mail); RX/OTC
pilocarpine hcl (oral) 5 MG	P	QL(6 EA daily)
MULTIVITAMINS		
B-Complex Vitamins		
b-complex vitamins CAPS	P	QL(1 EA daily)
b-complex vitamins TABS	P	QL(1 EA daily)
B-Complex w/ Folic Acid		
b-complex w/ c & folic acid CAPS	P	QL(1 EA daily); RX/OTC
MYNEPHRON CAPS 1 MG	P	QL(1 EA daily); RX/OTC
NUTRIBOOST CAPS 1 MG	P	QL(1 EA daily); RX/OTC
NUTRIVIO CAPS 1 MG	P	QL(1 EA daily); RX/OTC
RENAL CAPS 1 MG	P	QL(1 EA daily); RX/OTC
RENO CAPS CAPS 1 MG	P	QL(1 EA daily); RX/OTC
TRIPHROCAPS CAPS 1 MG	P	QL(1 EA daily); RX/OTC
Multiple Vitamins w/ Iron		
DAILY VITE MULTIVITAMIN/IRON TABS 50 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-15 MG-1.5 MG	P	QL(1 EA daily); RX/OTC
DERMACINRX BOOSTERVITE TABS	P	QL(1 EA daily); RX/OTC
DESTRESS-IRON TABS	P	QL(1 EA daily); RX/OTC
DUOVANCE TABS	P	QL(1 EA daily); RX/OTC
FLORAVITA MINI TABS	P	QL(1 EA daily); RX/OTC
MINI MULTI VITAMINS/IRON TABS 60 MG-400 MCG-1.5 MG-20 MG-2 MG-10 MG-1.7 MG-10 MCG-13.5 MG-18 MG-25 MG-900 MCG-6 MCG	P	QL(1 EA daily); RX/OTC
MIREXA TABS	P	QL(1 EA daily); RX/OTC
MULTI-VITAMIN/IRON TABS 400 UNIT-60 MG-2 MG-400 MCG-6 MCG-5000 UNIT-1.7 MG-20 MG-10 MG-18 MG-1.5 MG-30 UNIT, 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-18 MG-1.5 MG-30 UNIT	P	QL(1 EA daily); RX/OTC
multiple vitamins w/ iron TABS	P	QL(1 EA daily); RX/OTC
MULTIPLE VITAMINS/IRON TABS 60 MG-2 MG-400 MCG-1.5 MG-20 MG-6 MCG-10 MG-1.7 MG-400 UNIT-30 UNIT-18 MG-5000 UNIT, 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-18 MG-1.5 MG-30 UNIT, 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-10 MG-1.7 MG-20 MG-5000 UNIT-18 MG-1.5 MG-30 UNIT	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
MULTIVITAMIN PLUS IRON ADULT TABS 60 MG-2 MG-13.5 MG-400 MCG-10 MCG-6 MCG-1.7 MG-20 MG-1500 MCG-10 MG-18 MG-75 MG-1.5 MG	P	QL(1 EA daily); RX/OTC
NAT-RUL DAILY-VITE+IRON TABS 60 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-18 MG-1.5 MG-2 MG-30 UNIT	P	QL(1 EA daily); RX/OTC
ONE DAILY MULTIVITAMIN/IRON TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-18 MG-1.5 MG-30 UNIT	P	QL(1 EA daily); RX/OTC
ONE-DAILY MULTI-VITAMIN/IRON TABS 50 MG-1 MG-20 MG-2 MG-10 MCG-1 MCG-2.5 MG-1500 MCG-1 MG-18 MG	P	QL(1 EA daily); RX/OTC
ONE-DAILY/IRON TABS 50 MG-2 MG-20 MG-1 MG-400 UNIT-1 MCG-1 MG-2.5 MG-18 MG-5000 UNIT	P	QL(1 EA daily); RX/OTC
QC DAILY MULTIVITAMINS/IRON TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-18 MG-1.5 MG-30 UNIT	P	QL(1 EA daily); RX/OTC
STRESS B COMPLEX/IRON TABS 600 MG-5 MG-45 MCG-400 MCG-12 MCG-15 MG-100 MG-20 MG-27 MG-15 MG-30 UNIT	P	QL(1 EA daily); RX/OTC
STRESS FORMULA/IRON/ENERGY TABS	P	QL(1 EA daily); RX/OTC
STRESS FORMULA/IRON TABS	P	QL(1 EA daily); RX/OTC
TAB-A-VITE/IRON/BETA CAROTENE TABS	P	QL(1 EA daily); RX/OTC
TAB-A-VITE/IRON TABS 50 MG-1 MG-400 MCG-20 MG-2 MG-10 MCG-1 MCG-2.5 MG-1500 MCG-1 MG-15 MG	P	QL(1 EA daily); RX/OTC
Multiple Vitamins w/ Minerals		
50+ ADULT EYE HEALTH CAPS 150 MG-30 UNIT-5 MG-1 MG-1 MG-9 MG-90 MG-160 MG-250 MG	P	RX/OTC
A THRU Z ADVANCED ADULT TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-3500 UNIT-10 MG-18 MG-1.5 MG-11 MG-75 MCG-50 MG-2 MG-200 MG-80 MG-45 MCG-150 MCG-30 UNIT-20 MG-0.5 MG-5 MCG-10 MCG-2.3 MG-55 MCG-10 MCG-35 MCG-72 MG	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
A THRU Z ADVANCED TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-3500 UNIT-10 MG-18 MG-1.5 MG-11 MG-75 MCG-50 MG-2 MG-200 MG-80 MG-45 MCG-150 MCG-30 UNIT-20 MG-0.5 MG-5 MCG-10 MCG-2.3 MG-55 MCG-10 MCG-35 MCG-72 MG, 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-3500 UNIT-10 MG-18 MG-1.5 MG-50 MG-11 MG-75 MCG-2 MG-80 MG-200 MG-45 MCG-150 MCG-30 UNIT-20 MG-0.5 MG-5 MCG-10 MCG-2.3 MG-55 MCG-10 MCG-35 MCG-72 MG, 90 MG-2 MG-30 MCG-500 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-250 MCG-3500 UNIT-10 MG-18 MG-200 MG-300 MCG-1.5 MG-100 MG-11 MG-0.9 MG-80 MG-150 MCG-150 MCG-45 MCG-30 UNIT-109 MG-5 MCG-10 MCG-2.3 MG-35 MCG-25 MCG-55 MCG-10 MCG-72 MG-2 MG, 90 MG-2 MG-30 MCG-500 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-250 MCG-3500 UNIT-10 MG-18 MG-300 MCG-1.5 MG-100 MG-11 MG-150 MCG-2 MG-80 MG-200 MG-45 MCG-150 MCG-30 UNIT-109 MG-0.9 MG-5 MCG-10 MCG-2.3 MG-55 MCG-10 MCG-35 MCG-72 MG	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
A THRU Z HIGH POTENCY TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-250 MCG-3500 UNIT-10 MG-18 MG-162 MG-300 MCG-1.5 MG-100 MG-15 MG-2 MG-80 MG-150 MCG-150 MCG-75 MCG-30 UNIT-109 MG-5 MCG-10 MCG-2 MG-120 MCG-25 MCG-20 MCG-10 MCG-72 MG-2 MG	P	QL(1 EA daily); RX/OTC
A THRU Z SELECT 50+ ADVANCED TABS 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-11 MG-150 MCG-50 MG-2 MG-220 MG-80 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG	P	QL(1 EA daily); RX/OTC
A THRU Z SELECT 50+ MENS TABS 120 MG-6 MG-30 MCG-300 MCG-600 UNIT-100 MCG-1.7 MG-60 MCG-20 MG-300 MCG-3500 UNIT-10 MG-600 MCG-1.5 MG-15 MG-150 MCG-50 MG-2 MG-250 MG-80 MG-50 MCG-150 MCG-60 UNIT-20 MG-0.7 MG-5 MCG-4 MG-100 MCG-10 MCG-60 MCG-72 MG	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
A THRU Z SELECT ADVANCED TABS 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-11 MG-150 MCG-50 MG-220 MG-80 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG, 90 MG-3 MG-30 MCG-500 MCG-1.5 MG-500 UNIT-25 MCG-10 MG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-300 MCG-50 MG-2.3 MG-45 MCG-5 MCG-80 MG-2 MG-150 MCG-45 MCG-0.9 MG-10 MCG-11 MG-220 MG-150 MCG-110 MG-55 MCG-50 UNIT-72 MG, 90 MG-3 MG-30 MCG-500 MCG-500 UNIT-25 MCG-10 MG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-300 MCG-1.5 MG-11 MG-150 MCG-2 MG-50 MG-45 MCG-80 MG-220 MG-150 MCG-50 UNIT-110 MG-0.9 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG	P	QL(1 EA daily); RX/OTC
A THRU Z SELECT ULTIMATE WOMEN TABS 100 MG-5 MG-30 MCG-400 MCG-800 UNIT-50 MCG-1.1 MG-50 MCG-14 MG-300 MCG-3500 UNIT-5 MG-8 MG-1.1 MG-15 MG-150 MCG-50 MG-80 MG-500 MG-50 MCG-150 MCG-35 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-50 MCG-72 MG-2 MG	P	QL(1 EA daily); RX/OTC
A THRU Z SELECT TABS 60 MG-3 MG-30 MCG-400 MCG-400 UNIT-25 MCG-1.7 MG-20 MG-250 MCG-3500 UNIT-10 MG-200 MG-300 MCG-1.5 MG-100 MG-15 MG-2 MG-80 MG-150 MCG-150 MCG-75 MCG-45 UNIT-48 MG-5 MCG-2 MG-150 MCG-10 MCG-20 MCG-10 MCG-72 MG-2 MG, 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-220 MG-300 MCG-1.5 MG-50 MG-11 MG-150 MCG-2 MG-80 MG-100 MCG-45 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG, 90 MG-3 MG-30 MCG-500 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-50 MG-11 MG-150 MCG-2 MG-80 MG-220 MG-150 MCG-45 MCG-50 UNIT-0.9 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG	P	QL(1 EA daily); RX/OTC
A THRU Z ULTIMATE MENS TABS 90 MG-2 MG-40 MCG-200 MCG-600 UNIT-6 MCG-1.3 MG-60 MCG-16 MG-3500 UNIT-15 MG-8 MG-600 MCG-1.2 MG-11 MG-150 MCG-100 MG-2 MG-210 MG-80 MG-50 MCG-150 MCG-45 UNIT-20 MG-0.9 MG-5 MCG-10 MCG-2.3 MG-100 MCG-10 MCG-35 MCG-72 MG	P	QL(1 EA daily); RX/OTC
ABC COMPLETE ADULT TABS	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
ABC COMPLETE MENS TABS	P	QL(1 EA daily); RX/OTC
ABC COMPLETE SENIOR 50+ TABS	P	QL(1 EA daily); RX/OTC
ABC COMPLETE SENIOR MENS 50+ TABS	P	QL(1 EA daily); RX/OTC
ABC COMPLETE SENIOR WOMENS 50+ TABS	P	QL(1 EA daily); RX/OTC
ABC COMPLETE WOMENS TABS	P	QL(1 EA daily); RX/OTC
ACTICAL CAPS	P	RX/OTC
ACTIVNUTRIENTS PERFORMANCE CAPS	P	RX/OTC
ACTIVNUTRIENTS W/O IRON CAPS	P	RX/OTC
ACTIVNUTRIENTS CAPS	P	RX/OTC
ADVANCED EYE HEALTH CAPS	P	RX/OTC
AFLORA TABS	P	QL(1 EA daily); RX/OTC
ALIVE CALCIUM BONE SUPPORT TABS	P	QL(1 EA daily); RX/OTC
ALIVE DAILY ENERGY TABS	P	QL(1 EA daily); RX/OTC
ALIVE DIABETIC MULTIVITAMIN TABS	P	QL(1 EA daily); RX/OTC
ALIVE ENERGY 50+ TABS	P	QL(1 EA daily); RX/OTC
ALIVE EVERYDAY IMMUNE HEALTH CAPS	P	RX/OTC
ALIVE GARDEN GOODNESS TABS	P	QL(1 EA daily); RX/OTC
ALIVE HAIR, SKIN & NAILS CAPS	P	RX/OTC
ALIVE MAX 6 POTENCY CAPS	P	RX/OTC
ALIVE MENS 50+ ULTRA TABS	P	QL(1 EA daily); RX/OTC
ALIVE MENS 50+ TABS	P	QL(1 EA daily); RX/OTC
ALIVE MENS COMPLETE MULTI TABS	P	QL(1 EA daily); RX/OTC
ALIVE MENS ULTRA TABS	P	QL(1 EA daily); RX/OTC
ALIVE MULTI-VITAMIN LIQD	P	RX/OTC
ALIVE ONCE DAILY WOMENS TABS	P	QL(1 EA daily); RX/OTC
ALIVE ULTRA POTENCY ADULT TABS	P	QL(1 EA daily); RX/OTC
ALIVE ULTRA POTENCY WOMENS 50+ TABS	P	QL(1 EA daily); RX/OTC
ALIVE WOMENS 50+ COMPLETE MV TABS	P	QL(1 EA daily); RX/OTC
ALIVE WOMENS ENERGY TABS	P	QL(1 EA daily); RX/OTC
ALPHA BETIC TABS	P	QL(1 EA daily); RX/OTC
AMORYN MOOD BOOSTER CAPS 10 MG-25 MG-20 MG-300 MCG-400 UNIT-15 MG-70 MCG-30 MCG-90 MG-18 MG	P	RX/OTC
ANTIOXIDANT A/C/E/SELENIUM TABS 200 MG-200 UNIT-25 MCG-10000 UNIT	P	QL(1 EA daily); RX/OTC
ANTIOXIDANT FORMULA/MINERALS CAPS 250 MG-7.5 MG-1 MG-10000 UNIT-200 UNIT-1.5 MG-15 MCG	P	RX/OTC
ANTIOXIDANT FORMULA TABS	P	QL(1 EA daily); RX/OTC
ANTIOXIDANT VITAMINS TABS 60 MG-30 UNIT-2 MG-40 MG-40 MCG-5000 UNIT	P	QL(1 EA daily); RX/OTC
APETIBEX CAPS	P	RX/OTC
APPE-CURB CAPS	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
B-PLEX PLUS TABS 500 MG-25 MG-0.15 MG-0.8 MG-50 MCG-25 MG-20 MG-100 MG-5000 UNIT-27 MG-20 MG-50 MG-22.5 MG-3 MG-5 MG-0.1 MG-30 UNIT	P	QL(1 EA daily); RX/OTC
BACMIN TABS	P	QL(1 EA daily); RX/OTC
BARIATRIC MULTIVITAMINS/IRON CAPS	P	RX/OTC
BARIATRIC MULTIVITAMINS CAPS	P	RX/OTC
BARIATRIC MULTIVITAMINS TABS	P	QL(1 EA daily); RX/OTC
BASIC AM TABS	P	QL(1 EA daily); RX/OTC
BASIC PM TABS	P	QL(1 EA daily); RX/OTC
BIO-35 GLUTEN-FREE CAPS	P	RX/OTC
BIO-35 IRON FREE CAPS	P	RX/OTC
BIOCAL CAPS	P	RX/OTC
BIOCEL TABS 500 MG-25 MG-300 MCG-1 MG-200 UNIT-25 MG-25 MG-50 MG-5000 UNIT-25 MG-33 MG-125 MG-100 UNIT-60 MG-10 MG-50 MCG	P	QL(1 EA daily); RX/OTC
BIOTECT PLUS CAPS	P	RX/OTC
BLOOD SUGAR MANAGER TABS	P	QL(1 EA daily); RX/OTC
BODY/HAIR/SKIN/NAILS CAPS 20 MG-0.667 MG-200 MCG-133.333 MCG-6.667 MG-0.5 MG-2 MCG-0.567 MG-166.667 MG-33.333 MG-5 MG-20 MG-3 MG-0.667 MG-33.333 MG-1.667 MG-3.333 MG-2000 UNIT-133.333 MG-66.667 MG-50 MCG-83.333 MG-10 UNIT	P	RX/OTC
BONEUP 3 PER DAY CAPS	P	RX/OTC
BONEUP VEGETARIAN TABS	P	QL(1 EA daily); RX/OTC
BONEUP CAPS	P	RX/OTC
BOOSTNOW IMMUNE SUPPORT CAPS	P	RX/OTC
BPROTECTED MULTI-VITE LIQD 60 MG/15ML-2 MG/15ML-300 MCG/15ML-1.5 MG/15ML-6 MCG/15ML-20 MG/15ML-10 MG/15ML-9 MG/15ML-3 MG/15ML-25 MCG/15ML-150 MCG/15ML-30 UNIT/15ML-25 MCG/15ML-2 MG/15ML-1.7 MG/15ML	P	RX/OTC
BURIED TREASURE ACTIVE 55 PLUS LIQD	P	RX/OTC
CELEBRATE MULTI-COMPLETE 18 CAPS	P	RX/OTC
CELEBRATE MULTI-COMPLETE 36 CAPS	P	RX/OTC
CELEBRATE MULTI-COMPLETE 45 CAPS	P	RX/OTC
CELEBRATE MULTI-COMPLETE 60 CAPS	P	RX/OTC
CENTAVITE A-Z COMPLETE-MINERAL TABS 90 MG-3 MG-35 MCG-0.4 MG-3 MG-9 MCG-10 MG-3.4 MG-30 MG-5000 UNIT-400 UNIT-30 UNIT-1250 UNIT-27 MG-100 MG-5 MG-15 MCG-7.5 MG-15 MCG-2 MG-15 MG-40 MG-150 MCG-31 MG-10 MCG-7.5 MG	P	QL(1 EA daily); RX/OTC
CENTRAVITES 50 PLUS TABS	P	QL(1 EA daily); RX/OTC
CENTRAVITES ADULTS TABS	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
CENTRAVITES TABS 60 MG-2 MG-30 MCG-400 MCG-6 MCG-10 MG-1.7 MG-20 MG-1.5 MG-400 UNIT-18 MG-100 MG-3.5 MG-160 MCG-5 MCG-80 MG-2 MG-150 MCG-65 MCG-2 MG-10 MCG-15 MG-162 MG-150 MCG-30 UNIT-109 MG-20 MCG-10 MCG-5000 UNIT-25 MCG-72 MG	P	QL(1 EA daily); RX/OTC
CENTRUM ADULT LIQD 60 MG/15ML-300 MCG/15ML-1.1 MG/15ML-20 MG/15ML-2 MG/15ML-10 MG/15ML-1.7 MG/15ML-10 MCG/15ML-13.5 MG/15ML-9 MG/15ML-2 MG/15ML-25 MCG/15ML-25 MCG/15ML-3 MG/15ML-150 MCG/15ML-390 MCG/15ML-6 MCG/15ML	P	RX/OTC
CENTRUM ADULTS TABS 60 MG-2 MG-30 MCG-400 MCG-25 MCG-6 MCG-10 MG-1.7 MG-25 MCG-20 MG-1050 MCG-18 MG-1.5 MG-11 MG-50 MG-80 MG-200 MG-150 MCG-45 MCG-13.5 MG-20 MG-0.5 MG-2.3 MG-55 MCG-35 MCG-72 MG, 60 MG-30 MCG-400 MCG-1.5 MG-20 MG-2 MG-10 MG-1.7 MG-25 MCG-13.5 MG-18 MG-50 MG-2.3 MG-45 MCG-80 MG-35 MCG-0.5 MG-11 MG-200 MG-150 MCG-20 MG-55 MCG-1050 MCG-25 MCG-6 MCG-72 MG	P	QL(1 EA daily); RX/OTC
CENTRUM CARDIO TABS	P	QL(1 EA daily); RX/OTC
CENTRUM MENOPAUSE HOT FLASH TABS	P	QL(1 EA daily); RX/OTC
CENTRUM MEN TABS	P	QL(1 EA daily); RX/OTC
CENTRUM MINIS ADULTS 50+ TABS	P	QL(1 EA daily); RX/OTC
CENTRUM MINIS MEN 50+ TABS	P	QL(1 EA daily); RX/OTC
CENTRUM MINIS WOMEN 50+ TABS	P	QL(1 EA daily); RX/OTC
CENTRUM MINIS WOMEN IMMUNE SUP TABS	P	QL(1 EA daily); RX/OTC
CENTRUM SILVER 50+MEN TABS 120 MG-6 MG-30 MCG-300 MCG-1000 UNIT-100 MCG-1.7 MG-60 MCG-20 MG-30 MCG-3500 UNIT-10 MG-210 MG-600 MCG-1.5 MG-15 MG-75 MG-80 MG-72 MG-50 MCG-150 MCG-60 UNIT-20 MG-0.5 MG-5 MCG-4 MG-21 MCG-10 MCG-60 MCG-72 MG-2 MG, 120 MG-6 MG-30 MCG-300 MCG-1000 UNIT-100 MCG-1.7 MG-60 MCG-20 MG-300 MCG-1050 MCG-10 MG-600 MCG-1.5 MG-15 MG-75 MG-80 MG-210 MG-50 MCG-150 MCG-27 MG-20 MG-0.5 MG-4 MG-21 MCG-60 MCG-72 MG	P	QL(1 EA daily); RX/OTC
CENTRUM SILVER 50+WOMEN TABS 100 MG-5 MG-30 MCG-400 MCG-1000 UNIT-50 MCG-1.1 MG-50 MCG-14 MG-300 MCG-3500 UNIT-5 MG-8 MG-300 MG-1.1 MG-15 MG-100 MG-80 MG-50 MCG-150 MCG-35 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-22 MCG-10 MCG-52 MCG-72 MG-2 MG	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
CENTRUM SILVER ADULT 50+ TABS 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-220 MG-300 MCG-1.5 MG-11 MG-50 UNIT-50 MG-150 MCG-80 MG-45 MCG-150 MCG-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG, 60 MG-30 MCG-400 MCG-1.5 MG-20 MG-3 MG-10 MG-1.7 MG-250 MCG-300 MCG-25 MCG-22.5 MG-50 MG-2.3 MG-45 MCG-80 MG-50 MCG-0.5 MG-11 MG-220 MG-150 MCG-20 MG-19 MCG-750 MCG-30 MCG-25 MCG-72 MG	P	QL(1 EA daily); RX/OTC
CENTRUM SILVER MEN 50+ TABS 120 MG-30 MCG-300 MCG-1.5 MG-20 MG-6 MG-100 MCG-10 MG-1.7 MG-300 MCG-600 MCG-1000 UNIT-27 MG-75 MG-4 MG-50 MCG-80 MG-60 MCG-0.5 MG-15 MG-210 MG-150 MCG-20 MG-21 MCG-1050 MCG-60 MCG-72 MG	P	QL(1 EA daily); RX/OTC
CENTRUM SILVER ULTRA WOMENS TABS	P	QL(1 EA daily); RX/OTC
CENTRUM SILVER WOMEN 50+ TABS 100 MG-30 MCG-400 MCG-1.1 MG-14 MG-5 MG-5 MG-1.1 MG-300 MCG-25 MCG-15.8 MG-8 MG-100 MG-2.3 MG-50 MCG-80 MG-52 MCG-0.5 MG-15 MG-300 MG-150 MCG-20 MG-22 MCG-1050 MCG-50 MCG-50 MCG-72 MG	P	QL(1 EA daily); RX/OTC
CENTRUM SILVER TABS 400 UNIT-60 MG-3 MG-30 MCG-400 MCG-25 MCG-1.7 MG-10 MCG-20 MG-250 MCG-3500 UNIT-10 MG-300 MCG-1.5 MG-15 MG-2 MG-45 UNIT-100 MG-80 MG-150 MCG-200 MG-75 MCG-150 MCG-48 MG-5 MCG-2 MG-150 MCG-20 MCG-10 MCG-72 MG-2 MG, 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-2500 UNIT-10 MG-1.5 MG-11 MG-150 MCG-50 MG-80 MG-220 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG	P	QL(1 EA daily); RX/OTC
CENTRUM SPECIALIST HEART TABS	P	QL(1 EA daily); RX/OTC
CENTRUM SPECIALIST IMMUNE TABS	P	QL(1 EA daily); RX/OTC
CENTRUM SPECIALIST VISION TABS	P	QL(1 EA daily); RX/OTC
CENTRUM ULTRA WOMENS TABS	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
CENTRUM WOMEN TABS 75 MG-2 MG-40 MCG-400 MCG-1000 UNIT-6 MCG-1.1 MG-50 MCG-14 MG-3500 UNIT-15 MG-18 MG-200 MG-1.1 MG-8 MG-100 MG-80 MG-50 MCG-150 MCG-35 UNIT-20 MG-0.5 MG-5 MCG-10 MCG-1.8 MG-18 MCG-10 MCG-32 MCG-72 MG-2 MG, 75 MG-40 MCG-400 MCG-1.1 MG-14 MG-2 MG-15 MG-1.1 MG-25 MCG-15.8 MG-18 MG-100 MG-1.8 MG-50 MCG-80 MG-32 MCG-0.5 MG-8 MG-200 MG-150 MCG-20 MG-18 MCG-1050 MCG-50 MCG-6 MCG-72 MG	P	QL(1 EA daily); RX/OTC
CENTRUM LIQD 60 MG/15ML-2 MG/15ML-300 MCG/15ML-1.5 MG/15ML-6 MCG/15ML-10 MG/15ML-1.7 MG/15ML-20 MG/15ML-400 UNIT/15ML-30 UNIT/15ML-9 MG/15ML-2.5 MG/15ML-25 MCG/15ML-25 MCG/15ML-3 MG/15ML-150 MCG/15ML-2500 UNIT/15ML, 60 MG/15ML-2 MG/15ML-300 MCG/15ML-30 UNIT/15ML-1.1 MG/15ML-400 UNIT/15ML-6 MCG/15ML-1300 UNIT/15ML-10 MG/15ML-1.7 MG/15ML-20 MG/15ML-9 MG/15ML-2 MG/15ML-25 MCG/15ML-25 MCG/15ML-3 MG/15ML-150 MCG/15ML	P	RX/OTC
CENTURY MATURE TABS 90 MG-3 MG-30 MCG-500 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-11 MG-150 MCG-50 MG-80 MG-2 MG-220 MG-45 MCG-150 MCG-50 UNIT-110 MG-0.9 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG	P	QL(1 EA daily); RX/OTC
CENTURY TABS 90 MG-2 MG-30 MCG-500 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-250 MCG-3500 UNIT-10 MG-18 MG-300 MCG-1.5 MG-11 MG-150 MCG-100 MG-2 MG-200 MG-80 MG-45 MCG-150 MCG-30 UNIT-109 MG-0.9 MG-5 MCG-10 MCG-2.3 MG-55 MCG-10 MCG-35 MCG-72 MG	P	QL(1 EA daily); RX/OTC
CENVITE LIQD	P	RX/OTC
CEROVITE SENIOR TABS 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-50 MG-11 MG-150 MCG-80 MG-220 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG	P	QL(1 EA daily); RX/OTC
CERTAVITE SENIOR/ANTIOXIDANT TABS	P	QL(1 EA daily); RX/OTC
CERTAVITE SENIOR TABS	P	QL(1 EA daily); RX/OTC
CERTAVITE/ANTIOXIDANTS TABS	P	QL(1 EA daily); RX/OTC
CHOICEFUL MULTIVITAMIN CAPS	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
CITRACAL +D3 TABS	P	QL(1 EA daily); RX/OTC
COMPANION TABS 100 MG-5 MG-30 MCG-30 UNIT-400 MCG-30 MCG-3500 UNIT-5 MG-100 MG-20 MG-10 MG-100 MG-5 MG-100 MG-15 MG-2 MG-250 MCG-2 MG-10 MCG-75 MCG-150 MCG-120 MCG-20 MCG	P	QL(1 EA daily); RX/OTC
COMPETE TABS 90 MG-20.6 MG-0.4 MG-9 MCG-2.6 MG-30 MG-5000 UNIT-2 MG-400 UNIT-45 UNIT-27 MG-22.5 MG	P	QL(1 EA daily); RX/OTC
COMPLETE MULTIVITAMIN/MINERAL LIQD 60 MG/15ML-300 MCG/15ML-1.5 MG/15ML-2 MG/15ML-1000 UNIT/15ML-6 MCG/15ML-1300 UNIT/15ML-10 MG/15ML-1.7 MG/15ML-20 MG/15ML-9 MG/15ML-3 MG/15ML-25 MCG/15ML-150 MCG/15ML-30 UNIT/15ML-2 MG/15ML-25 MCG/15ML	P	RX/OTC
COMPLETIA DIABETIC MULTIVIT TABS	P	QL(1 EA daily); RX/OTC
CORAL CALCIUM PLUS CAPS	P	RX/OTC
COREVIA TABS	P	QL(1 EA daily); RX/OTC
CULTURELLE PROBIOTIC MEN DAILY CAPS	P	RX/OTC
CVS ADULT 50+ EYE HEALTH CAPS	P	RX/OTC
CVS DAILY MULTIPLE FOR MEN TABS 60 MG-3 MG-75 MCG-400 MCG-700 UNIT-18 MCG-1.7 MG-20 MCG-18 MG-3500 UNIT-16 MG-300 MCG-1.35 MG-140 MG-15 MG-2 MG-210 MG-22.5 UNIT-2 MG-120 MCG-110 MCG	P	QL(1 EA daily); RX/OTC
CVS DAILY MULTIPLE WOMEN 50+ TABS 120 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-15 MG-500 MG-4.5 MG-50 MG-24 MG-90 MCG-150 MCG-30 UNIT-2.2 MG-4.2 MG-180 MCG-3500 UNIT-27 MCG	P	QL(1 EA daily); RX/OTC
CVS DAILY MULTIV/MINERAL MENS TABS	P	QL(1 EA daily); RX/OTC
CVS DAILY MULTIVITAMIN MENS TABS	P	QL(1 EA daily); RX/OTC
CVS DAILY MULTIVITAMIN WOMENS TABS	P	QL(1 EA daily); RX/OTC
CVS EYE HEALTH & LUTEIN TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG	P	QL(1 EA daily); RX/OTC
CVS EYE HEALTH ADULT 50+ CAPS	P	RX/OTC
CVS IMMUNE SUPPORT CAPS	P	RX/OTC
CVS ONE DAILY ESSENTIAL TABS 60 MG-2 MG-0.4 MG-1.5 MG-400 UNIT-6 MCG-1.7 MG-20 MG-3000 UNIT-10 MG-45 MG-30 UNIT	P	QL(1 EA daily); RX/OTC
CVS ONE DAILY MENS 50+ ADV TABS	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
CVS ONE DAILY MENS FORMULA TABS 60 MG-3 MG-75 MCG-400 MCG-700 UNIT-18 MCG-1.7 MG-20 MCG-18 MG-16 MG-300 MCG-1.35 MG-15 MG-2 MG-140 MG-210 MG-22.5 UNIT-2 MG-3500 UNIT-110 MCG-120 MCG	P	QL(1 EA daily); RX/OTC
CVS ONE DAILY WOMENS 50+ ADV TABS	P	QL(1 EA daily); RX/OTC
CVS ONE DAILY WOMENS FORMULA TABS 75 MG-1.7 MG-1000 MCG-400 MCG-25 MCG-6 MCG-1.3 MG-25 MCG-16 MG-700 MCG-5 MG-18 MG-380 MG-1.2 MG-8 MG-0.9 MG-150 MCG-7.5 MG-1.8 MG-25 MCG-27.5 MCG, 75 MG-1.7 MG-1000 MCG-400 MCG-25 MCG-6 MCG-1.3 MG-25 MCG-16 MG-700 MCG-5 MG-18 MG-380 MG-1.2 MG-8 MG-0.9 MG-7.5 MG-150 MCG-1.8 MG-25 MCG-27.5 MCG	P	QL(1 EA daily); RX/OTC
CVS SPECTRAVITE ADULT 50+ TABS	P	QL(1 EA daily); RX/OTC
CVS SPECTRAVITE ADULTS TABS	P	QL(1 EA daily); RX/OTC
CVS SPECTRAVITE ADVANCED TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-3500 UNIT-10 MG-18 MG-1.5 MG-50 MG-11 MG-200 MG-80 MG-45 MCG-150 MCG-30 UNIT-20 MG-0.5 MG-5 MCG-10 MCG-2.3 MG-75 MCG-55 MCG-10 MCG-35 MCG-72 MG-2 MG, 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-3500 UNIT-10 MG-18 MG-1.5 MG-50 MG-11 MG-80 MG-200 MG-45 MCG-150 MCG-30 UNIT-20 MG-0.5 MG-5 MCG-10 MCG-2.3 MG-75 MCG-55 MCG-10 MCG-35 MCG-72 MG-2 MG	P	QL(1 EA daily); RX/OTC
CVS SPECTRAVITE MEN 50+ TABS 120 MG-30 MCG-300 MCG-1.5 MG-20 MG-6 MG-10 MG-1.7 MG-300 MCG-600 MCG-25 MCG-27 MG-75 MG-4 MG-50 MCG-5 MCG-80 MG-2 MG-60 MCG-0.5 MG-10 MCG-15 MG-210 MG-150 MCG-20 MG-21 MCG-1050 MCG-60 MCG-100 MCG-72 MG, 120 MG-6 MG-30 MCG-27 MG-300 MCG-25 MCG-100 MCG-1.7 MG-60 MCG-20 MG-300 MCG-1050 MCG-10 MG-600 MCG-1.5 MG-75 MG-15 MG-210 MG-80 MG-50 MCG-150 MCG-20 MG-0.5 MG-5 MCG-4 MG-21 MCG-10 MCG-60 MCG-72 MG-2 MG	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
CVS SPECTRAVITE MEN TABS 90 MG-2 MG-40 MCG-200 MCG-25 MCG-6 MCG-1.3 MG-60 MCG-16 MG-900 MCG-15 MG-8 MG-600 MCG-1.2 MG-100 MG-11 MG-210 MG-80 MG-50 MCG-150 MCG-45 MG-20 MG-0.9 MG-5 MCG-10 MCG-2.3 MG-100 MCG-10 MCG-35 MCG-72 MG-2 MG	P	QL(1 EA daily); RX/OTC
CVS SPECTRAVITE SENIOR TABS 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-50 MG-11 MG-80 MG-150 MCG-220 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG	P	QL(1 EA daily); RX/OTC
CVS SPECTRAVITE ULTRA MEN 50+ TABS	P	QL(1 EA daily); RX/OTC
CVS SPECTRAVITE ULTRA MENS TABS	P	QL(1 EA daily); RX/OTC
CVS SPECTRAVITE ULTRA WOMEN TABS	P	QL(1 EA daily); RX/OTC
CVS SPECTRAVITE WOMEN 50+ TABS 100 MG-30 MCG-400 MCG-1.1 MG-14 MG-5 MG-5 MG-1.1 MG-300 MCG-25 MCG-17.5 MG-8 MG-100 MG-2.3 MG-50 MCG-5 MCG-80 MG-2 MG-52 MCG-0.5 MG-10 MCG-15 MG-300 MG-150 MCG-20 MG-22 MCG-1052 MCG-50 MCG-50 MCG-72 MG, 100 MG-5 MG-30 MCG-400 MCG-25 MCG-50 MCG-1.1 MG-50 MCG-14 MG-300 MCG-1052 MCG-5 MG-8 MG-1.1 MG-100 MG-15 MG-300 MG-80 MG-50 MCG-150 MCG-17.5 MG-20 MG-0.5 MG-5 MCG-2.3 MG-22 MCG-10 MCG-52 MCG-72 MG-2 MG	P	QL(1 EA daily); RX/OTC
CVS SPECTRAVITE WOMENS SENIOR TABS 100 MG-5 MG-30 MCG-400 MCG-800 UNIT-50 MCG-1.1 MG-50 MCG-14 MG-300 MCG-3500 UNIT-5 MG-8 MG-1.1 MG-50 MG-15 MG-80 MG-150 MCG-500 MG-50 MCG-150 MCG-35 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-50 MCG-72 MG-2 MG	P	QL(1 EA daily); RX/OTC
CVS SPECTRAVITE WOMEN TABS 75 MG-40 MCG-400 MCG-1.1 MG-14 MG-2 MG-15 MG-1.1 MG-25 MCG-15.8 MG-18 MG-100 MG-1.8 MG-50 MCG-80 MG-32 MCG-0.5 MG-8 MG-200 MG-150 MCG-20 MG-18 MCG-1050 MCG-50 MCG-6 MCG-72 MG	P	QL(1 EA daily); RX/OTC
CVS VISION HEALTH CAPS	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
CVS WOMENS ACTIVE DAILY TABS 60 MG-3.2 MG-30 MCG-400 MCG-800 UNIT-9.5 MCG-2.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-2.4 MG-50 MG-15 MG-2 MG-300 MG-30 UNIT-2 MG-120 MCG-20 MCG-180 MG	P	QL(1 EA daily); RX/OTC
DAILY BETIC TABS 60 MG-2.5 MG-75 MCG-200 MCG-50 MG-200 UNIT-5 MCG-2500 UNIT-1.7 MG-20 MG-250 MCG-10 MG-100 MG-1.5 MG-100 MG-30 UNIT-50 MG-75 MCG-7.5 MG-2.5 MG-25 MCG-50 MCG-100 MCG	P	QL(1 EA daily); RX/OTC
DAILY COMBO MULTI VITAMINS TABS 400 UNIT-60 MG-2 MG-0.4 MG-20 MG-6 MCG-10 MG-1.7 MG-1.5 MG-30 UNIT-27 MG-15 MG-450 MG-5000 UNIT	P	QL(1 EA daily); RX/OTC
DAILY MULTIPLE VITAMINS/MIN TABS 400 UNIT-60 MG-2 MG-30 MCG-400 MCG-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-1.5 MG-100 MG-10 MCG-130 MG-40 MG-150 MCG-30 UNIT-100 MG-15 MG-2 MG-2.5 MG-10 MCG-10 MCG	P	QL(1 EA daily); RX/OTC
DAILY MULTIVITAMIN CAPS 2 MG-30 MCG-30 UNIT-200 MCG-2000 UNIT-6 MCG-10 MG-1.7 MG-100 MCG-20 MG-2 MG-30 MG-500 MCG-1 MG-1.5 MG-15 MG-40 MG-120 MG-2 MG-5000 UNIT-75 MCG-150 MCG-120 MCG-70 MCG	P	RX/OTC
DAYAVITE TABS	P	QL(1 EA daily); RX/OTC
DECUBI-VITE CAPS	P	RX/OTC
DEKAS PLUS OCEAN CAPS	P	RX/OTC
DEKAS PLUS CAPS	P	RX/OTC
DEPLIN MA CAPS	P	RX/OTC
DEPLINPRO MOOD HEALTH CAPS	P	RX/OTC
DERMACINRX MULTITAM TABS	P	QL(1 EA daily); RX/OTC
DERMACINRX RIBOTIN-E TABS	P	QL(1 EA daily); RX/OTC
DERMACINRX ZINTREXYL-C TABS	P	QL(1 EA daily); RX/OTC
DERMAVITE TABS	P	QL(1 EA daily); RX/OTC
DEXATRAN CAPS	P	RX/OTC
DIABETES HEALTH FORMULA TABS 90 MG-3 MG-300 MCG-500 MCG-600 UNIT-30 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-1.5 MG-1.5 MG-50 MG-150 MCG-220 MG-80 MG-2 MG-45 MCG-150 MCG-50 UNIT-110 MG-5 MCG-2.3 MG-35 MCG-10 MCG-600 MCG-72 MG-12 MG, 90 MG-3 MG-300 MCG-500 MCG-600 UNIT-30 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-1.5 MG-1.5 MG-50 MG-45 MCG-5 MCG-150 MCG-10 MCG-220 MG-80 MG-2 MG-150 MCG-50 UNIT-110 MG-35 MCG-2.3 MG-200 MCG-72 MG-12 MG	P	QL(1 EA daily); RX/OTC
DIALYVITE 800/ULTRA D TABS 80 MG-10 MG-300 MCG-800 MCG-2000 UNIT-6 MCG-10 MG-1.7 MG-20 MG-1.5 MG-15 MG-30 UNIT-70 MCG	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
DIALYVITE SUPREME D TABS	P	QL(1 EA daily); RX/OTC
DIATROL TABS	P	QL(1 EA daily); RX/OTC
DRY EYE FORMULA CAPS 33.333 MG-3.333 MG-16.667 UNIT-6.667 MG-133.333 MG-166.667 MG	P	RX/OTC
EQ COMPLETE MULTIVIT ADULT 50+ TABS 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-220 MG-300 MCG-1.5 MG-11 MG-150 MCG-50 UNIT-50 MG-80 MG-45 MCG-150 MCG-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG, 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-220 MG-300 MCG-1.5 MG-11 MG-150 MCG-50 UNIT-50 MG-80 MG-45 MCG-150 MCG-20 MG-20 MG-0.5 MG-5 MCG-2.3 MG-45 MCG-55 MCG-10 MCG-72 MG-2 MG	P	QL(1 EA daily); RX/OTC
EQ COMPLETE MULTIVITAMIN-ADULT TABS	P	QL(1 EA daily); RX/OTC
EQ ONE DAILY MENS 50+ TABS	P	QL(1 EA daily); RX/OTC
EQ ONE DAILY MENS HEALTH TABS	P	QL(1 EA daily); RX/OTC
EQ ONE DAILY WOMENS 50+ TABS	P	QL(1 EA daily); RX/OTC
EQ ONE DAILY WOMENS HEALTH TABS	P	QL(1 EA daily); RX/OTC
EQ VISION FORMULA 50+ CAPS 150 MG-30 UNIT-5 MG-1 MG-1 MG-9 MG-90 MG-160 MG-250 MG	P	RX/OTC
EQL CENTURY MATURE ADULTS 50+ TABS	P	QL(1 EA daily); RX/OTC
EQL CENTURY MATURE MEN 50+ TABS 120 MG-6 MG-30 MCG-300 MCG-600 UNIT-100 MCG-10 MG-1.7 MG-60 MCG-20 MG-300 MCG-3500 UNIT-600 MCG-1.5 MG-15 MG-0.7 MG-50 MG-5 MCG-250 MG-80 MG-15 MG-50 MCG-150 MCG-20 MG-4 MG-60 UNIT-100 MCG-72 MG-10 MCG-60 MCG-150 MCG	P	QL(1 EA daily); RX/OTC
EQL CENTURY MATURE WOMEN 50+ TABS 100 MG-5 MG-30 MCG-400 MCG-800 UNIT-50 MCG-5 MG-1.1 MG-50 MCG-14 MG-300 MCG-3500 UNIT-8 MG-1.1 MG-15 MG-0.5 MG-50 MG-5 MCG-500 MG-80 MG-15 MG-50 MCG-150 MCG-20 MG-2.3 MG-35 UNIT-55 MCG-72 MG-10 MCG-50 MCG-150 MCG	P	QL(1 EA daily); RX/OTC
EQL CENTURY MATURE TABS 90 MG-3 MG-30 MCG-500 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-11 MG-150 MCG-50 MG-2 MG-220 MG-80 MG-45 MCG-150 MCG-50 UNIT-110 MG-0.9 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG	P	QL(1 EA daily); RX/OTC
EQL CENTURY MENS TABS	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
EQL CENTURY WOMENS TABS	P	QL(1 EA daily); RX/OTC
EQL CENTURY TABS 90 MG-2 MG-30 MCG-500 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-250 MCG-3500 UNIT-10 MG-18 MG-300 MCG-1.5 MG-11 MG-150 MCG-100 MG-80 MG-200 MG-45 MCG-150 MCG-30 UNIT-109 MG-0.9 MG-5 MCG-10 MCG-2.3 MG-55 MCG-10 MCG-35 MCG-72 MG-2 MG	P	QL(1 EA daily); RX/OTC
EQL ONE DAILY MENS 50+ ADVANCE TABS 120 MG-6 MG-30 MCG-400 MCG-700 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-3500 UNIT-15 MG-120 MG-370 MCG-4.5 MG-24 MG-2.2 MG-110 MG-90 MCG-150 MCG-25.5 UNIT-4.2 MG-180 MCG-117 MCG	P	QL(1 EA daily); RX/OTC
EQL ONE DAILY MENS HEALTH TABS 400 UNIT-90 MG-3 MG-30 MCG-400 MCG-18 MCG-1.7 MG-20 MCG-16 MG-3500 UNIT-5 MG-210 MG-0.6 MG-1.2 MG-15 MG-2 MG-120 MG-100 MG-45 UNIT-2 MG-120 MCG-105 MCG	P	QL(1 EA daily); RX/OTC
EQL ONE DAILY MENS TABS	P	QL(1 EA daily); RX/OTC
EQL ONE DAILY WOMENS 50+ ADV TABS 120 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-3500 UNIT-15 MG-500 MG-4.5 MG-24 MG-2.2 MG-50 MG-90 MCG-150 MCG-30 UNIT-4.2 MG-180 MCG-27 MCG	P	QL(1 EA daily); RX/OTC
EQL VISION FORMULA TABS 200 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG	P	QL(1 EA daily); RX/OTC
ESSENTIAL BALANCE TABS 120 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-250 MCG-3000 UNIT-10 MG-9 MG-1.5 MG-15 MG-2 MG-150 MCG-20 MG-100 MG-40 MG-2 MG-100 MG-25 MCG-150 MCG-50 UNIT-77 MG-5 MCG-10 MCG-2 MG-120 MCG-25 MCG-25 MCG-10 MCG-36 MG	P	QL(1 EA daily); RX/OTC
ESSENTIA TABS 100 MG-6 MG-30 MCG-400 MCG-2000 UNIT-25 MCG-3000 UNIT-10 MG-100 MCG-100 MG-25 MG-10 MG-18 MG-100 MG-10 MG-100 MG-15 MG-2 MG-250 MCG-60 UNIT-2 MG-10 MCG-75 MCG-150 MCG-70 MCG-100 MCG	P	QL(1 EA daily); RX/OTC
EVERCORE TABS	P	QL(1 EA daily); RX/OTC
EVERVITA TABS	P	QL(1 EA daily); RX/OTC
EYE HEALTH + LUTEIN TABS	P	QL(1 EA daily); RX/OTC
EYE HEALTH AREDS 2 CAPS	P	RX/OTC
EYE HEALTH CAPS	P	RX/OTC
EYE MULTIVITAMIN/SODIUM TABS	P	QL(1 EA daily); RX/OTC
EYE VITAMINS CAPS 60 MG-6 MG-15 MG-2 MG-30 UNIT-22 MG	P	RX/OTC
EYE-VITES TABS 60 MG-40 MG-2 MG-5000 UNIT-30 UNIT-40 MCG	P	QL(1 EA daily); RX/OTC
FINAZOL TABS	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
FITNESS TABS FOR MEN AM/PM TABS	P	QL(1 EA daily); RX/OTC
FITNESS TABS FOR WOMEN AM/PM TABS	P	QL(1 EA daily); RX/OTC
FLORRAVITE TABS	P	QL(1 EA daily); RX/OTC
FLORRAXYL TABS	P	QL(1 EA daily); RX/OTC
FOLAGENT DHA CAPS	P	RX/OTC
FOLAMAX TABS	P	QL(1 EA daily); RX/OTC
FOLAMED DHA CAPS	P	RX/OTC
FOLAPRIME TABS	P	QL(1 EA daily); RX/OTC
FOLAREX TABS	P	QL(1 EA daily); RX/OTC
FOLASYNC DHA CAPS	P	RX/OTC
FOLATEN TABS	P	QL(1 EA daily); RX/OTC
FOLIFLEX TABS	P	QL(1 EA daily); RX/OTC
FOLITIN-Z TABS	P	QL(1 EA daily); RX/OTC
FOLIVRA TABS	P	QL(1 EA daily); RX/OTC
FOLIXIA TABS	P	QL(1 EA daily); RX/OTC
FOLYRA TABS	P	QL(1 EA daily); RX/OTC
FREEDAVITE TABS	P	QL(1 EA daily); RX/OTC
FT CENTURY 50+ TABS	P	QL(1 EA daily); RX/OTC
FT CENTURY ADULTS TABS	P	QL(1 EA daily); RX/OTC
FT CENTURY MEN 50+ TABS	P	QL(1 EA daily); RX/OTC
FT CENTURY MEN TABS	P	QL(1 EA daily); RX/OTC
FT CENTURY WOMEN 50+ TABS	P	QL(1 EA daily); RX/OTC
FT CENTURY WOMEN TABS	P	QL(1 EA daily); RX/OTC
FT EYE HEALTH CAPS	P	RX/OTC
FT EYE HEALTH TABS	P	QL(1 EA daily); RX/OTC
FT HAIR SKIN & NAILS EXTRA STR TABS	P	QL(1 EA daily); RX/OTC
FT ONE DAILY MENS 50+ TABS	P	QL(1 EA daily); RX/OTC
FT ONE DAILY MENS TABS	P	QL(1 EA daily); RX/OTC
FT ONE DAILY WOMENS 50+ TABS	P	QL(1 EA daily); RX/OTC
FT ONE DAILY WOMENS TABS	P	QL(1 EA daily); RX/OTC
GERI-FREEDA SENIOR FORMULA TABS	P	QL(1 EA daily); RX/OTC
GERITOL NUTRITION SUPPORT TABS 57 MG-2 MG-44 MCG-0.38 MG-400 UNIT-6.7 MCG-1.7 MG-24 MCG-13 MG-1.5 MG-13.5 MG-1.8 MG-20 MG-6100 UNIT-86 MG-36 MG-1 MCG-120 MCG-30 UNIT-118 MG-148 MG-2.4 MG-12 MCG-1 MCG-16 MG-20 MG	P	QL(1 EA daily); RX/OTC
GERIVITE COMPLETE TABS 60 MG-2 MG-45 MCG-400 MCG-20 MG-1.5 MG-6 MCG-10 MG-1.7 MG-400 UNIT-30 UNIT-18 MG-100 MG-2.5 MG-15 MCG-5 MCG-37.5 MG-80 MCG-15 MCG-2 MG-10 MCG-15 MG-162 MG-150 MCG-125 MG-15 MCG-10 MCG-6000 UNIT-25 MCG-34 MG	P	QL(1 EA daily); RX/OTC
GNP CENTURY ADULT FORMULA TABS 60 MG-30 MCG-400 MCG-1.5 MG-20 MG-2 MG-10 MG-1.7 MG-25 MCG-13.5 MG-18 MG-50 MG-2.3 MG-45 MCG-80 MG-35 MCG-0.5 MG-11 MG-200 MG-150 MCG-20 MG-55 MCG-1050 MCG-25 MCG-6 MCG-72 MG	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
GNP CENTURY ADULTS MEN TABS	P	QL(1 EA daily); RX/OTC
GNP CENTURY ADULTS WOMEN TABS	P	QL(1 EA daily); RX/OTC
GNP CENTURY ADULT TABS	P	QL(1 EA daily); RX/OTC
GNP CENTURY MATURE ADULTS 50+ TABS	P	QL(1 EA daily); RX/OTC
GNP CENTURY MATURE MEN'S 50+ TABS	P	QL(1 EA daily); RX/OTC
GNP CENTURY MATURE WOMEN'S 50+ TABS 100 MG-5 MG-30 MCG-400 MCG-25 MCG-50 MCG-1.1 MG-50 MCG-14 MG-300 MCG-5 MG-8 MG-1.1 MG-100 MG-15 MG-80 MG-300 MG-50 MCG-150 MCG-15.8 MG-20 MG-0.5 MG-2.3 MG-1050 MCG-22 MCG-52 MCG-72 MG	P	QL(1 EA daily); RX/OTC
GNP HAIR SKIN & NAILS EXTRA ST TABS	P	QL(1 EA daily); RX/OTC
GNP HAIR/SKIN/NAILS TABS 50 MG-3.5 MG-6.5 MG-25 MCG-25 MCG-7.5 MG-7.2 MG-50 UNIT-25 MCG-2500 UNIT-5 MG-25 MG-10 MG-10 MG-15 MG-3.3 MG-10 MG-5 MG-20 MG-0.5 MG-150 MCG-25 UNIT-54 MG-73 MG-897 MCG-10 MG-50 MG-0.6 MG-10 MG	P	QL(1 EA daily); RX/OTC
GNP HEALTHY EYES SUPERVISION 2 CAPS 250 MG-5 MG-1 MG-40 MG-1 MG-200 UNIT	P	RX/OTC
GNP HEALTHY EYES TABS 200 MG-2 MG-27 MG-2 MG-40 MG-185 MG-55 MCG-300 MCG, 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG	P	QL(1 EA daily); RX/OTC
GNP MEGA MULTI FOR MEN TABS 150 MG-125 MCG-200 MCG-15 MG-15 MG-2.5 MG-5 MG-5 MG-15 MG-15 MG-15 MG-5 MG-250 MCG-5 MG-175 MCG-2.5 MCG-33.5 MG-25 MG-50 MG-2.5 MG-25 MCG-1 MG-12.5 MG-105 MG-75 MCG-50 MCG-25 MG-1500 MCG-37.5 MCG-12.5 MG-15 MCG-5 MCG-35 MG-15 MG-35 MG-35 MG-15 MG-25 MG-25 MG, 150 MG-25 MG-15 MG-125 MCG-50 UNIT-200 MCG-2.5 MG-5 MG-100 UNIT-15 MCG-15 MG-37.5 MCG-5 MG-5 MG-15 MG-250 MCG-15 MG-5 MG-175 MCG-15 MG-50 MG-12.5 MG-1 MG-100 MG-2.5 MG-5000 UNIT-75 MCG-25 MG-12.5 MG-25 MCG-5 MCG-15 MG-15 MG-35 MG-35 MG-50 MCG-35 MG-25 MG-25 MG	P	QL(1 EA daily); RX/OTC
GNP MEGA MULTI FOR WOMEN TABS 100 MG-40 MG-40 MCG-50 UNIT-200 MCG-200 UNIT-40 MCG-5000 UNIT-40 MG-37.5 MCG-5 MG-10 MCG-40 MG-250 MCG-40 MG-5 MG-250 MG-40 MG-100 MG-7.5 MG-12.5 MG-13.5 MG-2.5 MG-25 MCG-1 MG-50 MCG-1 MG-50 MCG-75 MCG-12.5 MG-1 MG-1 MG-25 MG	P	QL(1 EA daily); RX/OTC
GNP ONE DAILY MAXIMUM TABS	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
GNP ONE DAILY MENS HEALTH 50+ TABS 120 MG-6 MG-30 MCG-400 MCG-400 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-2500 UNIT-15 MG-120 MG-600 MCG-4.5 MG-100 MG-22.5 MG-40 MG-90 MCG-150 MCG-33 UNIT-2 MG-180 MCG-4 MG-105 MCG-120 MG	P	QL(1 EA daily); RX/OTC
GNP ONE DAILY MENS HEALTH TABS	P	QL(1 EA daily); RX/OTC
GNP ONE DAILY MENS/LYCOPENE TABS 90 MG-3 MG-30 MCG-400 MCG-400 UNIT-18 MCG-1.7 MG-20 MCG-16 MG-3500 UNIT-5 MG-210 MG-600 MCG-1.2 MG-120 MG-15 MG-2 MG-100 MG-45 UNIT-2 MG-120 MCG-105 MCG	P	QL(1 EA daily); RX/OTC
GNP ONE DAILY WOMENS 50+ TABS 60 MG-6 MG-30 MCG-400 MCG-800 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-15 MG-405 MG-4.5 MG-50 MG-22.5 MG-90 MCG-150 MCG-33 UNIT-2 MG-180 MCG-4 MG-2500 UNIT-20 MCG-120 MG	P	QL(1 EA daily); RX/OTC
GNP ONE DAILY WOMENS TABS 60 MG-120 MG-3.2 MG-30 MCG-400 MCG-800 UNIT-9.5 MCG-2.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-300 MG-2.4 MG-50 MG-15 MG-22.5 UNIT-2 MG-2 MG-120 MCG-20 MCG-50 MG	P	QL(1 EA daily); RX/OTC
GNP THERAPEUTIC-M TABS	P	QL(1 EA daily); RX/OTC
HAIR SKIN & NAILS ADVANCED TABS	P	QL(1 EA daily); RX/OTC
HAIR SKIN & NAILS TABS	P	QL(1 EA daily); RX/OTC
HAIR SKIN AND NAILS FORMULA TABS 30 MG-2.5 MG-2500 MCG-100 MCG-5 MG-2.5 MG-500 UNIT-4 MCG-2500 UNIT-2.5 MG-5 MG-15 MG-12.5 MG-7.5 MG-5 MG-4 MG-130 MG-3.75 MG-1 MG-25 MG-7.5 UNIT-64 MG-15 MG-5 MG-50 MG-1.5 MG-25 MG	P	QL(1 EA daily); RX/OTC
HAIR SKIN NAILS CAPS 30 MG-1.667 MG-1666.667 MCG-10 UNIT-133.333 MCG-666.667 UNIT-2.667 MCG-1666.667 UNIT-1.667 MG-8.333 MG-5 MG-3.333 MG-1.667 MG-2.5 MG-10 MG-0.333 MG-10 MG-1 MG-20 MG-8.333 MG-4.167 MCG	P	RX/OTC
HAIR/SKIN/NAILS CAPS	P	RX/OTC
HAIR/SKIN/NAILS TABS	P	QL(1 EA daily); RX/OTC
HEAD CARE PROACTIVE HEALTH TABS	P	QL(1 EA daily); RX/OTC
HEALTHY EYES SUPERVISION 2 CAPS	P	RX/OTC
HEALTHY EYES/LUTEIN-ZEAXANTHIN CAPS 60 MG-13.5 MG-6 MG-15 MG	P	RX/OTC
HEALTHY EYES TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
HI-KOVITE 2-PART FORMULA TABS 400 UNIT-200 MG-10 MG-30 MCG-400 MCG-10 MG-10 MCG-5000 UNIT-10 MG-10 MG-100 MG-10 MG-9 MG-0.5 MG-7.5 MG-35 MG-60 MG-30 UNIT-1 MG-120 MG-75 MCG-17.5 MCG-10 MG-10 MG	P	QL(1 EA daily); RX/OTC
HIGH POTENCY MULTIVIT/FA TABS	P	QL(1 EA daily); RX/OTC
HM COMPLETE MEN TABS	P	QL(1 EA daily); RX/OTC
HYLAZINC TABS	P	QL(1 EA daily); RX/OTC
HYVITE TABS	P	QL(1 EA daily); RX/OTC
I-VITE W/LUTEIN TABS	P	QL(1 EA daily); RX/OTC
I-VITE TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG	P	QL(1 EA daily); RX/OTC
ICAPS AREDS FORMULA TABS	P	QL(1 EA daily); RX/OTC
ICAPS LUTEIN & OMEGA-3 CAPS 240 MCG-1.2 MG-16 MG-1.3 MG-2.4 MCG-1.3 MG-10 MG-600 MCG-45 MG-2 MG-10 UNIT-2.3 MG-0.9 MG-7 MG-1 MG-34 MCG-280 MG	P	RX/OTC
ICAPS MV TABS 128 MG-7.5 MCG-100 MCG-0.5 MG-100 UNIT-1.5 MCG-2.5 MG-6.25 MCG-2.5 MG-1.67 MG-2.5 MG-0.83 MG-83.25 MG-0.075 MG-0.38 MG-25 MG-21.15 MG-0.9 MG-18.75 MCG-30 MCG-37.5 MCG-107.5 UNIT-35 MG-0.5 MG-10 MCG	P	QL(1 EA daily); RX/OTC
ICAPS CAPS 226 MG-34.8 MG-0.8 MG-14320 UNIT-200 MG	P	RX/OTC
IMMUNE 24 HOUR+ CAPS	P	RX/OTC
IMMUNE ESSENTIALS DAILY CAPS	P	RX/OTC
INCREVACORE TABS	P	QL(1 EA daily); RX/OTC
JOINT HEALTH & BONE STRENGTH TABS	P	QL(1 EA daily); RX/OTC
K-PAX IMMUNE PROFESSIONAL ST TABS	P	QL(1 EA daily); RX/OTC
KEYFOLIC TABS	P	QL(1 EA daily); RX/OTC
KEYLOSA TABS	P	QL(1 EA daily); RX/OTC
KP ADULTS 50+ DAILY FORMULA TABS 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-50 MG-11 MG-80 MG-150 MCG-220 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG, 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-50 MG-11 MG-80 MG-150 MCG-220 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MG-72 MG-2 MG	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
KP ADULTS DAILY FORMULA TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-3500 UNIT-10 MG-18 MG-1.5 MG-50 MG-11 MG-80 MG-75 MCG-200 MG-45 MCG-150 MCG-30 UNIT-20 MG-0.5 MG-5 MCG-10 MCG-2.3 MG-55 MCG-10 MCG-35 MCG-72 MG-2 MG, 60 MG-2 MG-30 MCG-400 UNIT-1.7 MG-25 MCG-20 MG-3500 UNIT-10 MG-18 MG-1.5 MG-50 MG-11 MG-80 MG-200 MG-45 MCG-150 MCG-30 UNIT-20 MG-0.5 MG-5 MCG-10 MCG-2.3 MG-75 MCG-55 MCG-10 MCG-35 MG-72 MG-2 MG	P	QL(1 EA daily); RX/OTC
KP MENS 50+ DAILY FORMULA TABS 120 MG-6 MG-30 MCG-400 MCG-700 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-3500 UNIT-15 MG-120 MG-370 MCG-4.5 MG-110 MG-24 MG-90 MCG-150 MCG-30 UNIT-2.2 MG-4.2 MG-180 MCG-117 MCG, 60 MG-6 MG-30 MCG-400 MCG-700 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-2500 UNIT-15 MG-300 MG-4.5 MG-100 MG-22.5 MG-120 MG-90 MCG-150 MCG-22.5 UNIT-2 MG-4 MG-180 MCG-110 MCG-120 MG	P	QL(1 EA daily); RX/OTC
KP MENS DAILY FORMULA TABS 60 MG-3 MG-30 MCG-400 MCG-700 UNIT-18 MCG-1.7 MG-20 MCG-16 MG-3500 UNIT-5 MG-300 MCG-1.2 MG-120 MG-15 MG-2 MG-100 MG-210 MG-22.5 UNIT-2 MG-120 MCG-110 MCG, 60 MG-3 MG-75 MCG-400 MCG-700 UNIT-18 MCG-1.7 MG-20 MCG-18 MG-3500 UNIT-16 MG-210 MG-300 MCG-1.35 MG-140 MG-15 MG-2 MG-22.5 UNIT-2 MG-120 MCG-110 MCG	P	QL(1 EA daily); RX/OTC
KP VISION FORMULA/LUTEIN TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG	P	QL(1 EA daily); RX/OTC
KP VISION FORMULA TABS 60 MG-40 MG-1000 UNIT-30 UNIT-2 MG-40 MCG	P	QL(1 EA daily); RX/OTC
KP WOMENS 50+ DAILY FORMULA TABS 120 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-3500 UNIT-10 MG-500 MG-4.5 MG-50 MG-24 MG-2.2 MG-90 MCG-150 MCG-30 UNIT-4.2 MG-180 MCG-27 MCG, 60 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-2500 UNIT-15 MG-4.5 MG-50 MG-22.5 MG-500 MG-90 MCG-150 MCG-22.5 UNIT-2 MG-4 MG-180 MCG-20 MCG-120 MG	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
KP WOMENS DAILY FORMULA TABS 60 MG-2 MG-30 MCG-400 MCG-1000 UNIT-6 MCG-1.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-1.5 MG-50 MG-15 MG-500 MG-22.5 UNIT-2 MG-2 MG-120 MCG-20 MCG, 60 MG-2 MG-30 MCG-400 MCG-1000 UNIT-6 MCG-1.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-500 MG-1.6 MG-50 MG-15 MG-22.5 UNIT-2 MG-2 MG-120 MCG-20 MCG	P	QL(1 EA daily); RX/OTC
LIVER DETOX TABS	P	QL(1 EA daily); RX/OTC
LIVITA ADULTS LIQD	P	RX/OTC
LUMIVANCE CAPS	P	RX/OTC
LUTEIN-ZEAXANTHIN TABS 60 MG-5 MG-1 MG-15 MG-1 MG-750 MCG-20 MG	P	QL(1 EA daily); RX/OTC
LYSIPLEX PLUS LIQD	P	RX/OTC
LYSIPLEX PLUS TABS 166.667 MG-333.333 MG-16.667 MG-50 MCG-333.333 MCG-16.667 MG-133.333 MG-16.667 MG-133.333 UNIT-16.667 MCG-133.333 MG-66.667 MG-16.667 MG-5 MG-1666.667 UNIT-66.667 MG-5 MG-66.667 UNIT-5 MCG-26.667 MG-3.333 MG-1.667 MG-0.667 MG-33.333 MCG	P	QL(1 EA daily); RX/OTC
MACULAR HEALTH FORMULA CAPS 250 MG-10 MG-100 MCG-10 MG-500 UNIT-5 MG-5 MG-1 MG-1 MG-20 MG-25 MCG-200 UNIT-7.5 MG-10 MG	P	RX/OTC
MACUVITE EYE CARE TABS 113 MG-17.4 MG-0.4 MG-100 UNIT-7160 UNIT	P	QL(1 EA daily); RX/OTC
MACUVITE TABS 60 MG-40 MG-2 MG-40 MCG-30 UNIT-5000 UNIT	P	QL(1 EA daily); RX/OTC
MAXIMUM DAILY GREEN TABS 333.333 MG-8.333 MG-16.666 MCG-133.333 MCG-8.333 MG-8.333 MG-133.333 UNIT-8.333 MCG-8.333 MG-8.333 MG-8.333 MG-8.333 MG-8.333 MG-8.333 MG-6.666 MG-8.333 MG-1.333 MG-333.333 MG-83.333 UNIT-33.333 MG-5000 UNIT-5 MG-33.333 MG-1.333 MG-16.666 MCG-20 MG-0.333 MG-33.333 MCG-0.333 MG-5 MG-83.333 MG-50 MCG-10 MG-25 MCG-3.333 MG-33.333 MG-8.333 MG-1.666 MG-6.666 MG-6.666 MG-1.666 MG-0.833 MG-11.666 MG-3.333 MG-1.666 MG-33.333 MG-3.333 MG-3.333 MG-3.333 MG-16.666 MG-33.333 MG-33.333 MG-3.333 MG-3.333 MG-3.333 MG-8.333 MG	P	QL(1 EA daily); RX/OTC
MEDI TAB TABS	P	QL(1 EA daily); RX/OTC
MEGA MULTI FOR WOMEN TABS	P	QL(1 EA daily); RX/OTC
MEGA MULTI MEN TABS	P	QL(1 EA daily); RX/OTC
MEGAVITE FRUITS & VEGGIES TABS	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
MEIJER ADVANCED FORMULA TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-250 MCG-3500 UNIT-10 MG-150 MCG-300 MCG-1.5 MG-15 MG-150 MCG-100 MG-162 MG-80 MG-75 MCG-30 UNIT-10 MCG-2 MG-120 MCG-20 MCG-10 MCG-72 MG-2 MG, 60 MG-3 MG-30 MCG-400 MCG-400 UNIT-25 MCG-1.7 MG-10 MCG-20 MG-250 MCG-3500 UNIT-10 MG-300 MCG-1.5 MG-15 MG-2 MG-150 MCG-100 MG-200 MG-80 MG-75 MCG-150 MCG-45 UNIT-48 MG-5 MCG-2 MG-150 MCG-20 MCG-10 MCG-72 MG-2 MG	P	QL(1 EA daily); RX/OTC
MENATROL CAPS	P	RX/OTC
MENS 50+ ADVANCED CAPS	P	RX/OTC
MENS 50+ MULTIVITAMIN TABS	P	QL(1 EA daily); RX/OTC
MENS LIFE PACK TABS 300 MCG-200 UNIT-10 MG-10 MG-9 MG-10 MG-2.5 MG-15 MG-1 MG-50 MG-11.25 MG-1 MG-2500 UNIT-15 UNIT-75 MG-37.5 MCG-2.5 MG-2.5 MG-12.5 MCG, 400 UNIT-10 MG-10 MG-5000 UNIT-18 MG-10 MG-5 MG-30 MG-2 MG-100 MG-22.5 MG-2 MG-150 MG-30 UNIT-150 MG-75 MCG-5 MG-5 MG-25 MCG	P	QL(1 EA daily); RX/OTC
MENS MULTI HEALTH FORMULA TABS	P	QL(1 EA daily); RX/OTC
MENS MULTIVITAMIN TABS	P	QL(1 EA daily); RX/OTC
MOOD FOOD ES CAPS	P	RX/OTC
MOOD FOOD CAPS	P	RX/OTC
MULTI COMPLETE/IRON TABS 180 MG-2 MG-30 MG-400 MCG-1000 UNIT-6 MCG-1.7 MG-80 MCG-20 MG-2500 UNIT-10 MG-18 MG-162 MG-1.5 MG-15 MG-100 MG-75 MCG-150 MCG-50 UNIT-2 MG-4 MG-120 MCG-70 MCG	P	QL(1 EA daily); RX/OTC
MULTI COMPLETE CAPS 60 MG-2 MG-30 MCG-400 MCG-1000 UNIT-6 MCG-1.7 MG-40 MCG-20 MG-10 MG-18 MG-1.5 MG-40 MG-15 MG-2 MG-2500 UNIT-100 MG-45 MCG-150 MCG-50 UNIT-4 MG-120 MCG-20 MCG	P	RX/OTC
MULTI FOR HER 50+ CAPS 60 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-1.7 MG-80 MCG-20 MG-10 MG-1.5 MG-100 MG-15 MG-2 MG-2500 UNIT-200 MG-75 MCG-150 MCG-60 UNIT-4 MG-120 MCG-70 MCG, 60 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-1.7 MG-80 MCG-20 MG-10 MG-200 MG-1.5 MG-100 MG-15 MG-2 MG-2500 UNIT-75 MCG-150 MCG-60 UNIT-4 MG-120 MCG-70 MCG, 60 MG-6 MG-30 MCG-60 UNIT-400 MCG-1000 UNIT-25 MCG-1.7 MG-80 MCG-20 MG-10 MG-1.5 MG-100 MG-15 MG-2 MG-2500 UNIT-200 MG-75 MCG-150 MCG-4 MG-120 MCG-70 MCG	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
MULTI FOR HER 50+ TABS 180 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-10 MG-1.7 MG-80 MCG-1.5 MG-15 MG-20 MG-100 MG-120 MCG-2 MG-200 MG-150 MCG-75 MCG-4 MG-60 UNIT-2500 UNIT-70 MCG	P	QL(1 EA daily); RX/OTC
MULTI FOR HER CAPS 60 MG-2 MG-30 MCG-600 MCG-1000 UNIT-6 MCG-1.7 MG-40 MCG-20 MG-10 MG-18 MG-1.5 MG-40 MG-15 MG-2 MG-2500 UNIT-100 MG-45 MCG-150 MCG-50 UNIT-4 MG-120 MCG-20 MCG, 60 MG-2 MG-30 MCG-600 MCG-1000 UNIT-6 MCG-1.7 MG-40 MCG-20 MG-10 MG-18 MG-100 MG-1.5 MG-40 MG-15 MG-2 MG-2500 UNIT-45 MCG-150 MCG-50 UNIT-4 MG-120 MCG-20 MCG	P	RX/OTC
MULTI FOR HER TABS 120 MG-2 MG-30 MCG-400 MCG-6 MCG-10 MG-1.7 MG-100 MCG-250 MCG-3000 UNIT-1.5 MG-100 MG-15 MG-150 MCG-400 UNIT-20 MG-18 MG-40 MG-10 MCG-120 MCG-2 MG-10 MCG-150 MCG-25 MCG-77 MG-5 MCG-2 MG-50 UNIT-25 MCG-250 MG-36 MG-2 MG	P	QL(1 EA daily); RX/OTC
MULTI FOR HIM 50+ TABS 180 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-10 MG-1.7 MG-80 MCG-1.5 MG-15 MG-20 MG-100 MG-120 MCG-2 MG-162 MG-150 MCG-75 MCG-4 MG-60 UNIT-2500 UNIT-105 MCG	P	QL(1 EA daily); RX/OTC
MULTI FOR HIM CAPS 60 MG-4 MG-30 MCG-400 MCG-1000 UNIT-18 MCG-1.7 MG-40 MCG-20 MG-10 MG-1.5 MG-40 MG-15 MG-2 MG-2500 UNIT-100 MG-45 MCG-150 MCG-50 UNIT-4 MG-120 MCG-40 MCG, 60 MG-4 MG-30 MCG-400 MCG-25 MCG-18 MCG-1.7 MG-40 MCG-20 MG-10 MG-100 MG-1.5 MG-40 MG-15 MG-2 MG-750 MCG-45 MCG-150 MCG-22.5 MG-4 MG-120 MCG-40 MCG	P	RX/OTC
MULTI FOR HIM TABS 180 MG-4 MG-30 MCG-400 MCG-1000 UNIT-18 MCG-10 MG-1.7 MG-80 MCG-1.5 MG-100 MG-15 MG-20 MG-120 MCG-2 MG-162 MG-150 MCG-75 MCG-4 MG-50 UNIT-2500 UNIT-70 MCG	P	QL(1 EA daily); RX/OTC
MULTI VITAMIN/MINERALS TABS 60 MG-1 MG-400 MCG-400 UNIT-1 MCG-2.5 MG-15 MG-5000 UNIT-5 MG-7.5 MG-2.5 MG-100 MG-75 MCG-15 UNIT-80 MG-1.5 MG-0.375 MG-0.5 MG, 90 MG-3 MG-45 MCG-400 MCG-400 UNIT-9 MCG-2.6 MG-25 MCG-20 MG-10 MG-27 MG-2.25 MG-100 MG-15 MG-5000 UNIT-30 MG-162 MG-150 MCG-34 UNIT-125 MG-2 MG-5 MG-27 MG-25 MCG-25 MCG-300 MCG-25 MCG	P	QL(1 EA daily); RX/OTC
MULTI-VITAMIN MONOCAPS TABS	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
MULTI-VITAMIN/MINERALS TABS 60 MG-2 MG-0.4 MG-20 MG-1.2 MG-6 MCG-1.7 MG-400 UNIT-15 MG-100 MG-160 MG-150 MCG-18 MG-125 MG-5000 UNIT	P	QL(1 EA daily); RX/OTC
MULTI-VITE LIQD	P	RX/OTC
MULTIA CAPS	P	RX/OTC
MULTIPLE VIT/MINERALS/NO IRON TABS 60 MG-1 MG-400 MCG-400 UNIT-1 MCG-5 MG-2.5 MG-15 MG-5000 UNIT-2.5 MG-2.5 MG-100 MG-75 MCG-15 UNIT-80 MG-1.5 MG-0.37 MG-0.5 MG	P	QL(1 EA daily); RX/OTC
multiple vitamins w/ minerals CAPS	P	RX/OTC
multiple vitamins w/ minerals LIQD	P	RX/OTC
multiple vitamins w/ minerals TABS	P	QL(1 EA daily); RX/OTC
MULTIPLE VITAMINS-MINERALS LIQD 60 MG/15ML-300 MCG/15ML-1.1 MG/15ML-20 MG/15ML-2 MG/15ML-10 MG/15ML-1.7 MG/15ML-10 MCG/15ML-14 MG/15ML-9 MG/15ML-2 MG/15ML-25 MCG/15ML-13 MG/15ML-25 MCG/15ML-3 MG/15ML-150 MCG/15ML-390 MCG/15ML-6 MCG/15ML	P	RX/OTC
MULTIPLE VITAMINS/WOMENS TABS 60 MG-2 MG-400 MCG-1.5 MG-20 MG-6 MCG-10 MG-1.7 MG-400 UNIT-30 UNIT-27 MG-15 MG-450 MG-5000 UNIT	P	QL(1 EA daily); RX/OTC
MULTIPRO CAPS 25 MG-300 MCG-1000 MCG-10 MCG-10 MCG-3 MG-2 MG-5 MG-32 MG-2 MG-7 MG-6 MG-30 MG-315 MG-1 MG-30 MG	P	RX/OTC
MULTITOL-M TABS	P	QL(1 EA daily); RX/OTC
MULTIVITAMIN ADULT (MINERALS) TABS	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
MULTIVITAMIN ADULTS 50+ TABS 60 MG-3 MG-30 MCG-400 MCG-12.5 MCG-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-750 MCG-10 MG-300 MCG-1.5 MG-50 MG-11 MG-150 MCG-80 MG-220 MG-45 MCG-150 MCG-22.75 MG-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG, 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-220 MG-300 MCG-1.5 MG-11 MG-150 MCG-50 MG-80 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-45 MCG-55 MCG-10 MCG-72 MG-2 MG, 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-220 MG-300 MCG-1.5 MG-11 MG-150 MCG-50 UNIT-50 MG-80 MG-45 MCG-150 MCG-20 MG-0.5 MG-5 MCG-2.3 MG-45 MCG-55 MCG-10 MCG-72 MG-2 MG, 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-50 MG-11 MG-150 MCG-80 MG-220 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG, 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-250 MCG-2500 UNIT-10 MG-220 MG-300 MCG-1.5 MG-11 MG-20 MG-50 MG-80 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-19 MCG-10 MCG-50 MCG-72 MG-2 MG	P	QL(1 EA daily); RX/OTC
MULTIVITAMIN ADULTS TABS 60 MG-2 MG-30 MCG-400 MCG-10 MCG-6 MCG-1.7 MG-25 MCG-20 MG-10 MG-18 MG-1.5 MG-50 MG-11 MG-80 MG-200 MG-45 MCG-150 MCG-13.5 MG-20 MG-0.5 MG-5 MCG-10 MCG-2.3 MG-75 MCG-1050 MCG-55 MCG-10 MCG-35 MCG-72 MG-2 MG, 60 MG-30 MCG-400 MCG-1.5 MG-20 MG-2 MG-10 MG-1.7 MG-25 MCG-13.5 MG-18 MG-50 MG-2.3 MG-45 MCG-80 MG-2 MG-10 MCG-35 MCG-0.5 MG-10 MCG-11 MG-200 MG-150 MCG-20 MG-55 MCG-1050 MCG-25 MCG-6 MCG-72 MG	P	QL(1 EA daily); RX/OTC
MULTIVITAMIN HEALTH FORM/CA/FE TABS	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
MULTIVITAMIN MEN 50+ TABS 120 MG-30 MCG-300 MCG-1.5 MG-20 MG-6 MG-10 MG-1.7 MG-300 MCG-600 MCG-25 MCG-27 MG-75 MG-4 MG-50 MCG-80 MG-60 MCG-0.5 MG-15 MG-210 MG-150 MCG-20 MG-21 MCG-1050 MCG-60 MCG-100 MCG-72 MG, 120 MG-30 MCG-400 MCG-4.5 MG-20 MG-6 MG-15 MG-3.4 MG-370 MCG-17.5 MCG-11.4 MG-110 MG-4.2 MG-90 MCG-180 MCG-2.2 MG-24 MG-120 MG-150 MCG-117 MCG-940 MCG-20 MCG-25 MCG, 120 MG-6 MG-30 MCG-27 MG-300 MCG-25 MCG-100 MCG-1.7 MG-60 MCG-20 MG-300 MCG-10 MG-600 MCG-1.5 MG-75 MG-15 MG-80 MG-210 MG-50 MCG-150 MCG-20 MG-0.5 MG-5 MCG-4 MG-1050 MCG-21 MCG-10 MCG-60 MCG-72 MG-2 MG, 120 MG-6 MG-30 MCG-300 MCG-600 UNIT-100 MCG-1.7 MG-60 MCG-20 MG-300 MCG-3500 UNIT-10 MG-600 MCG-1.5 MG-75 MG-15 MG-210 MG-80 MG-50 MCG-150 MCG-60 UNIT-20 MG-0.5 MG-4 MG-21 MCG-60 MCG-72 MG	P	QL(1 EA daily); RX/OTC
MULTIVITAMIN MEN TABS	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
MULTIVITAMIN WOMEN 50+ TABS 100 MG-30 MCG-400 MCG-1.1 MG-14 MG-5 MG-5 MG-1.1 MG-300 MCG-25 MCG-15.8 MG-8 MG-100 MG-2.3 MG-50 MCG-80 MG-52 MCG-0.5 MG-15 MG-300 MG-150 MCG-20 MG-22 MCG-1050 MCG-50 MCG-50 MCG-72 MG, 100 MG-5 MG-30 MCG-400 MCG-14 MG-25 MCG-50 MCG-1.1 MG-50 MCG-300 MCG-1050 MCG-5 MG-8 MG-1.1 MG-15 MG-100 MG-2 MG-300 MG-80 MG-50 MCG-150 MCG-15.7 MG-20 MG-2.3 MG-22 MCG-0.5 MG-10 MCG-52 MCG-72 MG, 100 MG-5 MG-30 MCG-400 MCG-800 UNIT-50 MCG-1.1 MG-50 MCG-14 MG-300 MCG-3500 UNIT-5 MG-8 MG-1.1 MG-15 MG-35 UNIT-50 MG-500 MG-80 MG-150 MG-20 MG-0.5 MG-5 MCG-2.3 MG-150 MCG-55 MCG-50 MCG-10 MCG-50 MCG-72 MG-2 MG, 100 MG-5 MG-30 MCG-400 MCG-800 UNIT-50 MCG-1.1 MG-50 MCG-14 MG-300 MCG-3500 UNIT-5 MG-8 MG-300 MG-1.1 MG-15 MG-35 UNIT-100 MG-80 MG-150 MCG-20 MG-0.5 MG-5 MCG-2.3 MG-22 MCG-50 MCG-10 MCG-52 MCG-72 MG-2 MG	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
MULTIVITAMIN WOMENS 50+ ADV TABS 120 MG-30 MCG-400 MCG-4.5 MG-20 MG-6 MG-15 MG-3.4 MG-25 MCG-13.5 MG-50 MG-4.2 MG-90 MCG-180 MCG-2.2 MG-24 MG-300 MG-150 MCG-27 MCG-940 MCG-20 MCG-25 MCG	P	QL(1 EA daily); RX/OTC
MULTIVITAMIN WOMEN TABS	P	QL(1 EA daily); RX/OTC
MULTIVITAMIN-MINERALS TABS	P	QL(1 EA daily); RX/OTC
MULTIVITAMIN/ZINC STRESS TABS	P	QL(1 EA daily); RX/OTC
MULTIVITAMIN LIQD 60 MG/15ML-300 MCG/15ML-30 UNIT/15ML-1.5 MG/15ML-2 MG/15ML-400 UNIT/15ML-6 MCG/15ML-1300 UNIT/15ML-10 MG/15ML-1.7 MG/15ML-20 MG/15ML-9 MG/15ML-3 MG/15ML-25 MCG/15ML-150 MCG/15ML-2 MG/15ML-25 MCG/15ML	P	RX/OTC
MVW COMPLETE FORMULATION D3000 CAPS	P	RX/OTC
MVW COMPLETE FORMULATION D5000 CAPS	P	RX/OTC
MVW COMPLETE FORMULATION MINIS CAPS	P	RX/OTC
MVW COMPLETE FORMULATION CAPS	P	RX/OTC
MVW MODULATOR FORMULATION MINI CAPS	P	RX/OTC
MVW MODULATOR FORMULATION CAPS	P	RX/OTC
MYAMULTI TABS 60 MG-3 MG-30 MCG-400 MCG-1.7 MG-6 MCG-10 MG-2 MG-20 MG-5000 UNIT-400 UNIT-30 UNIT-18 MG-100 MG-2.5 MG-25 MCG-5 MCG-40 MG-10 MCG-150 MCG-25 MCG-2 MG-10 MCG-15 MG-162 MG-150 MCG-125 MG-25 MCG-10 MCG-25 MCG-36.3 MG	P	QL(1 EA daily); RX/OTC
NAT-RUL THERAVITE-M TABS	P	QL(1 EA daily); RX/OTC
NATRUL-VITES TABS	P	QL(1 EA daily); RX/OTC
NEOVITE TABS	P	QL(1 EA daily); RX/OTC
NICADAN TABS	P	QL(1 EA daily); RX/OTC
NICAZEL FORTE TABS	P	QL(1 EA daily); RX/OTC
NICAZEL TABS	P	QL(1 EA daily); RX/OTC
NO IRON MULT VITAMIN-MINERALS TABS	P	QL(1 EA daily); RX/OTC
NORIXA TABS	P	QL(1 EA daily); RX/OTC
NORVEXA TABS	P	QL(1 EA daily); RX/OTC
NOVENTRA TABS	P	QL(1 EA daily); RX/OTC
NUTRALYN TABS	P	QL(1 EA daily); RX/OTC
NUTRAVANCE TABS	P	QL(1 EA daily); RX/OTC
NUTRICAP TABS	P	QL(1 EA daily); RX/OTC
NUTRIFAC ZX TABS 500 MG-25 MG-200 MCG-1000 MCG-50 MCG-25 MG-20 MG-100 MG-5000 UNIT-20 MG-50 MG-20 MG-400 UNIT-50 UNIT-2.5 MG-66 MG-50 MCG-5 MG-200 MCG	P	QL(1 EA daily); RX/OTC
OCULAR VITAMINS TABS	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
OCULYRA TABS	P	QL(1 EA daily); RX/OTC
OCUTABS-LUTEIN TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG	P	QL(1 EA daily); RX/OTC
OCUTABS TABS 113 MG-17.4 MG-0.4 MG-100 UNIT-7160 UNIT, 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG	P	QL(1 EA daily); RX/OTC
OCUVEL CAPS 250 MG-0.5 MG-5 MG-1 MG-40 MG-1 MG-200 UNIT	P	RX/OTC
OCUVITE ADULT 50+ CAPS	P	RX/OTC
OCUVITE ADULT FORMULA CAPS	P	RX/OTC
OCUVITE EXTRA TABS 200 MG-5 MG-3 MG-40 MG-40 MG-2 MG-5 MG-50 UNIT-6000 UNIT-40 MCG	P	QL(1 EA daily); RX/OTC
OCUVITE EYE + MULTI TABS 75 MG-1 MG-15 MCG-200 MCG-200 UNIT-3 MCG-0.85 MG-15 MCG-10 MG-5 MG-5 MG-1 MG-150 MCG-1 MG-0.75 MG-11.5 MG-500 UNIT-50 MG-100 MG-37.5 MCG-75 MCG-25 UNIT-7 MG-60 MCG-1 MG-35 MCG	P	QL(1 EA daily); RX/OTC
OCUVITE EYE HEALTH FORMULA CAPS 150 MG-30 UNIT-5 MG-1 MG-1 MG-9 MG-90 MG-160 MG-250 MG	P	RX/OTC
OCUVITE EYE PERFORMANCE CAPS	P	RX/OTC
OCUVITE-LUTEIN CAPS	P	RX/OTC
OCUVITE-LUTEIN TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG	P	QL(1 EA daily); RX/OTC
ONCOVITE TABS	P	QL(1 EA daily); RX/OTC
ONE A DAY ENERGY TABS	P	QL(1 EA daily); RX/OTC
ONE A DAY MEN 50 PLUS TABS	P	QL(1 EA daily); RX/OTC
ONE A DAY POSTNATAL CAPS	P	RX/OTC
ONE A DAY TRIPLE IMMUNE SUPPRT TABS	P	QL(1 EA daily); RX/OTC
ONE A DAY WOMEN 50 PLUS TABS	P	QL(1 EA daily); RX/OTC
ONE A DAY WOMENS MULTI TABS	P	QL(1 EA daily); RX/OTC
ONE DAILY 50 PLUS TABS 120 MG-6 MG-30 MCG-400 MCG-400 UNIT-30 MCG-3.4 MG-20 MCG-20 MG-5000 UNIT-15 MG-120 MG-4.5 MG-22.5 MG-2 MG-100 MG-37.5 MG-90 MCG-150 MCG-60 UNIT-4 MG-180 MCG-105 MCG-34 MG	P	QL(1 EA daily); RX/OTC
ONE DAILY CALCIUM/IRON TABS 400 UNIT-60 MG-2 MG-400 MCG-1.5 MG-6 MCG-10 MG-1.7 MG-20 MG-2500 UNIT-2500 UNIT-27 MG-15 MG-450 MG-30 UNIT	P	QL(1 EA daily); RX/OTC
ONE DAILY COMPLETE FOR MEN TABS 60 MG-3 MG-75 MCG-400 MCG-700 UNIT-18 MCG-1.7 MG-20 MCG-18 MG-3500 UNIT-16 MG-210 MG-300 MCG-1.35 MG-140 MG-15 MG-2 MG-22.5 UNIT-2 MG-120 MCG-110 MCG	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
ONE DAILY COMPLETE TABS 60 MG-2 MG-30 MCG-400 MCG-20 MG-1.5 MG-6 MCG-10 MG-1.7 MG-5000 UNIT-400 UNIT-30 UNIT-18 MG-100 MG-2.5 MG-10 MCG-37.5 MG-10 MCG-2 MG-15 MG-130 MG-150 MCG-100 MG-10 MCG-34 MG	P	QL(1 EA daily); RX/OTC
ONE DAILY FOR MEN 50+ ADVANCED TABS 120 MG-6 MG-30 MCG-400 MCG-400 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-2500 UNIT-15 MG-120 MG-600 MCG-4.5 MG-100 MG-22.5 MG-40 MG-90 MCG-150 MCG-33 UNIT-2 MG-4 MG-180 MCG-105 MCG-120 MG	P	QL(1 EA daily); RX/OTC
ONE DAILY FOR MEN/LYCOPENE TABS 90 MG-3 MG-30 MCG-400 MCG-400 UNIT-18 MCG-1.7 MG-20 MCG-16 MG-3500 UNIT-5 MG-210 MG-600 MCG-1.2 MG-120 MG-15 MG-2 MG-100 MG-45 UNIT-2 MG-120 MCG-105 MCG	P	QL(1 EA daily); RX/OTC
ONE DAILY FOR WOMEN 50+ ADV TABS 60 MG-6 MG-30 MCG-400 MCG-800 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-2500 UNIT-15 MG-405 MG-4.5 MG-50 MG-22.5 MG-90 MCG-150 MCG-33 UNIT-2 MG-4 MG-180 MCG-20 MCG-120 MG	P	QL(1 EA daily); RX/OTC
ONE DAILY FOR WOMEN TABS 60 MG-2 MG-30 MCG-400 MCG-1000 UNIT-6 MCG-1.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-450 MG-1.5 MG-15 MG-50 MG-30 UNIT-2 MG-2 MG-120 MCG-20 MCG, 60 MG-2 MG-30 MCG-400 MCG-1000 UNIT-6 MCG-1.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-450 MG-1.5 MG-50 MG-15 MG-30 UNIT-2 MG-2 MG-120 MCG-20 MCG	P	QL(1 EA daily); RX/OTC
ONE DAILY HEALTHY WEIGHT ADV TABS 60 MG-10 MG-2.5 MG-400 MCG-400 UNIT-7.5 MCG-2.1 MG-80 MCG-25 MG-2500 UNIT-12.5 MG-18 MG-200 MG-1.9 MG-15 MG-50 MG-30 UNIT-2 MG-2 MG-200 MCG-70 MCG	P	QL(1 EA daily); RX/OTC
ONE DAILY HEALTHY WEIGHT TABS 60 MG-2.5 MG-400 MCG-400 UNIT-7.5 MCG-2.125 MG-25 MG-12.5 MG-18 MG-300 MG-1.9 MG-50 MG-15 MG-2500 UNIT-30 UNIT-2 MG-2 MG-200 MCG-80 MCG-70 MCG-32 MG, 60 MG-3 MG-30 MCG-400 MCG-400 UNIT-25 MCG-1.7 MG-20 MG-250 MCG-3500 UNIT-10 MG-200 MG-300 MCG-1.5 MG-100 MG-15 MG-2 MG-80 MG-150 MCG-150 MCG-75 MCG-45 UNIT-48 MG-5 MCG-2 MG-150 MCG-10 MCG-20 MCG-10 MCG-72 MG-2 MG	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
ONE DAILY MAXIMUM TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-2500 UNIT-10 MG-18 MG-1.5 MG-100 MG-15 MG-150 MCG-162 MG-80 MG-160 MCG-150 MCG-30 UNIT-109 MG-2 MG-5 MCG-10 MCG-65 MCG-3.5 MG-20 MCG-10 MCG-72 MG-2 MG	P	QL(1 EA daily); RX/OTC
ONE DAILY MEN FORMULA W/O IRON TABS	P	QL(1 EA daily); RX/OTC
ONE DAILY MENS 50+ MULTIVIT TABS	P	QL(1 EA daily); RX/OTC
ONE DAILY MENS 50+/LYCOPENE TABS 120 MG-6 MG-30 MCG-25.5 UNIT-400 MCG-700 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-3500 UNIT-15 MG-120 MG-370 MCG-4.5 MG-24 MG-110 MG-90 MCG-150 MCG-2.2 MG-4.2 MG-180 MCG-117 MCG	P	QL(1 EA daily); RX/OTC
ONE DAILY MENS HEALTH TABS 60 MG-3 MG-30 MCG-400 MCG-700 UNIT-18 MCG-1.7 MG-20 MCG-16 MG-3500 UNIT-5 MG-210 MG-300 MCG-1.2 MG-120 MG-15 MG-2 MG-22.5 UNIT-2 MG-120 MCG-110 MCG	P	QL(1 EA daily); RX/OTC
ONE DAILY MENS TABS 90 MG-3 MG-30 MCG-400 MCG-400 UNIT-18 MCG-1.7 MG-16 MG-3500 UNIT-5 MG-210 MG-600 MCG-1.2 MG-120 MG-15 MG-2 MG-100 MG-45 UNIT-2 MG-120 MCG-20 MCG-105 MCG, 99 MG-43 MCG-240 MCG-1.32 MG-17.6 MG-2.17 MG-15.5 MG-1.43 MG-210 MG-300 MCG-25 MCG-15 MG-120 MG-2.3 MG-35 MCG-0.9 MG-11 MG-150 MCG-55 MCG-900 MCG-30 MCG-6.24 MCG-408 MCG	P	QL(1 EA daily); RX/OTC
ONE DAILY MULTIVIT/IRON-FREE TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-3000 UNIT-10 MG-1.5 MG-45 MG-30 UNIT	P	QL(1 EA daily); RX/OTC
ONE DAILY MULTIVITAMIN MEN TABS 60 MG-3 MG-75 MCG-400 MCG-700 UNIT-18 MCG-1.7 MG-20 MCG-18 MG-3500 UNIT-16 MG-300 MCG-1.35 MG-15 MG-2 MG-22.5 UNIT-140 MG-210 MG-2 MG-120 MCG-110 MCG	P	QL(1 EA daily); RX/OTC
ONE DAILY MULTIVITAMIN WOMEN TABS	P	QL(1 EA daily); RX/OTC
ONE DAILY WOMENS 50 PLUS TABS 75 MG-3 MG-30 MCG-400 MCG-400 UNIT-18 MCG-1.7 MG-14 MG-3000 UNIT-5 MG-240 MG-1.1 MG-120 MG-15 MG-2 MG-100 MG-33 UNIT-2 MG-120 MCG-20 MCG-70 MCG-10 MG	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
ONE DAILY WOMENS 50+ TABS 60 MG-6 MG-30 MCG-400 MCG-800 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-15 MG-405 MG-4.5 MG-50 MG-22.5 MG-90 MCG-150 MCG-33 UNIT-2 MG-180 MCG-4 MG-2500 UNIT-20 MCG-120 MG	P	QL(1 EA daily); RX/OTC
ONE DAILY WOMENS TABS	P	QL(1 EA daily); RX/OTC
ONE DAILY/MINERALS TABS 50 MG-1 MG-100 MCG-1.5 MG-3 MCG-1.7 MG-20 MG-5000 UNIT-400 UNIT-5 MG-1 MG-125 MG-150 MCG-10 UNIT	P	QL(1 EA daily); RX/OTC
ONE VITE M HIGH POTENCY TABS	P	QL(1 EA daily); RX/OTC
ONE-A-DAY ENERGY TABS	P	QL(1 EA daily); RX/OTC
ONE-A-DAY MENOPAUSE FORMULA TABS	P	QL(1 EA daily); RX/OTC
ONE-A-DAY MENS (MINERALS) TABS	P	QL(1 EA daily); RX/OTC
ONE-A-DAY MENS 50+ ADVANTAGE TABS	P	QL(1 EA daily); RX/OTC
ONE-A-DAY MENS 50+ TABS	P	QL(1 EA daily); RX/OTC
ONE-A-DAY MENS HEALTH FORMULA TABS	P	QL(1 EA daily); RX/OTC
ONE-A-DAY MENS PRO EDGE TABS	P	QL(1 EA daily); RX/OTC
ONE-A-DAY PROACTIVE 65+ TABS	P	QL(1 EA daily); RX/OTC
ONE-A-DAY TEEN ADVANTAGE/HIM TABS	P	QL(1 EA daily); RX/OTC
ONE-A-DAY WOMENS 50+ ADVANTAGE TABS 120 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-3500 UNIT-15 MG-4.5 MG-50 MG-24 MG-2.2 MG-500 MG-90 MCG-150 MCG-30 UNIT-4.2 MG-180 MCG-27 MCG	P	QL(1 EA daily); RX/OTC
ONE-A-DAY WOMENS 50+ TABS	P	QL(1 EA daily); RX/OTC
ONE-A-DAY WOMENS PETITES TABS 30 MG-1 MG-15 MCG-200 MCG-500 UNIT-3 MCG-0.85 MG-12.5 MCG-5 MG-1250 UNIT-2.5 MG-9 MG-250 MG-0.75 MG-25 MG-7.5 MG-1 MG-11.25 UNIT-1 MG-60 MCG-10 MCG	P	QL(1 EA daily); RX/OTC
ONE-A-DAY WOMENS TABS	P	QL(1 EA daily); RX/OTC
ONE-DAILY MULTI CAPS CAPS	P	RX/OTC
ONE-DAILY MULTI-VIT/MINERAL TABS 50 MG-2 MG-20 MG-1 MG-1 MG-2.5 MG-10 MCG-4.5 MG-10 MG-1 MG-5 MCG-3.75 MG-150 MCG-5 MCG-1500 MCG-1 MCG	P	QL(1 EA daily); RX/OTC
ONEVITE TABS	P	QL(1 EA daily); RX/OTC
OPTIC-VITES WITH LUTEIN TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG	P	QL(1 EA daily); RX/OTC
OPTIC-VITES TABS 60 MG-40 MG-2 MG-30 UNIT-5000 UNIT-40 MCG	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
OPTIMUM PMS TABS 250 MG-4.16 MG-33.3 MCG-4.16 MG-10.4 MCG-2083.3 UNIT-4.16 MG-52.08 MG-4.16 MG-4.16 MG-16.7 UNIT-2.5 MG-41.7 MG-1.67 MG-7.9 MG-16.7 MCG-0.08 MG-4.16 MG-12.5 MCG-16.7 MCG-16.7 UNIT	P	QL(1 EA daily); RX/OTC
OPTIVITE P.M.T. TABS 250 MG-50 MG-10 MCG-33.33 MCG-52.17 MG-16.67 UNIT-2083.33 UNIT-4.17 MG-4.17 MG-4 MG-4.17 MG-4.17 MG-4.17 MG-4.17 MG-16.67 MG-16.67 UNIT-2.5 MG-41.67 MG-1.67 MG-8 MG-16.67 MCG-4.17 MG-20.83 MG-12.5 MCG-16.67 MCG-41.67 MG-15.5 MG-10 MCG	P	QL(1 EA daily); RX/OTC
OPURITY TABS	P	QL(1 EA daily); RX/OTC
OSTEOPRIME PLUS TABS	P	QL(1 EA daily); RX/OTC
OSTEOPRIME ULTRA TABS 30 MG-6.25 MG-200 MCG-5 MG-200 UNIT-12.5 MCG-5 MG-75 MCG-12.5 MG-5 MG-0.5 MG-5 MG-11.25 MCG-1.25 MG-75 MG-3.75 MG-0.75 MG-200 MG-12.5 MCG-32 MG-25 MCG-1.5 MG-5 MG-1.75 MG-50 MCG	P	QL(1 EA daily); RX/OTC
PARVLEX TABS	P	QL(1 EA daily); RX/OTC
PHYTOMULTI TABS	P	QL(1 EA daily); RX/OTC
PRESCRIPTION SUPPORT MULTIVIT CAPS	P	RX/OTC
PRESERVISION AREDS 2+COQ10 CAPS	P	RX/OTC
PRESERVISION AREDS 2+MULTI VIT CAPS	P	RX/OTC
PRESERVISION AREDS 2 CAPS	P	RX/OTC
PRESERVISION AREDS 3 CAPS	P	RX/OTC
PRESERVISION AREDS CAPS	P	RX/OTC
PRESERVISION AREDS TABS	P	QL(1 EA daily); RX/OTC
PRESERVISION/LUTEIN CAPS	P	RX/OTC
PREV-RX TABS	P	QL(1 EA daily); RX/OTC
PREVENT CAPS	P	RX/OTC
PRO-CAL TABS	P	QL(1 EA daily); RX/OTC
PROBIOTICS + BARIATRIC MULTI CAPS	P	RX/OTC
PROCERV HP TABS	P	QL(1 EA daily); RX/OTC
PROFOLA TABS	P	QL(1 EA daily); RX/OTC
PRORENAL + D W/ OMEGA-3 CAPS	P	RX/OTC
PRORENAL + D TABS	P	QL(1 EA daily); RX/OTC
PROSIGHT TABS 60 MG-40 MG-2 MG-30 MG-5000 UNIT-40 MCG	P	QL(1 EA daily); RX/OTC
PROTECT CARDIO AF CAPS	P	RX/OTC
PROTECT PLUS SO CAPS	P	RX/OTC
PROTEGRA CAPS	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
QC DAILY MULTIVIT/MULTIMINERAL TABS 50 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-2500 UNIT-1.7 MG-25 MCG-20 MG-10 MG-18 MG-1.5 MG-100 MG-15 MG-150 MCG-80 MG-2 MG-162 MG-160 MCG-150 MCG-30 UNIT-109 MG-2 MG-5 MCG-10 MCG-3.5 MG-65 MCG-20 MCG-10 MCG-72 MG	P	QL(1 EA daily); RX/OTC
QC HAIR SKIN & NAILS TABS 50 MG-50 MG-3.5 MG-6.5 MG-25 MCG-25 UNIT-25 MCG-7.5 MG-7.2 MG-50 UNIT-25 MCG-2500 UNIT-15 MG-5 MG-25 MG-10 MG-3.3 MG-10 MG-5 MG-10 MG-20 MG-0.6 MG-150 MCG-54 MG-70 MG-897 MCG-0.6 MG	P	QL(1 EA daily); RX/OTC
QC MENS DAILY MULTIVITAMIN TABS 90 MG-3 MG-30 MCG-400 MCG-400 UNIT-18 MCG-1.7 MG-20 MCG-16 MG-3500 UNIT-5 MG-210 MG-600 MCG-1.2 MG-120 MG-15 MG-2 MG-100 MG-45 UNIT-2 MG-120 MCG-105 MCG	P	QL(1 EA daily); RX/OTC
QC MULTI-VITE 50 & OVER TABS 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-50 MG-11 MG-80 MG-150 MCG-220 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG	P	QL(1 EA daily); RX/OTC
QC MULTI-VITE TABS	P	QL(1 EA daily); RX/OTC
QC OCUHEALTH VISION SUPPORT 2 CAPS	P	RX/OTC
QC THERIN-M TABS 90 MG-6 MG-30 MCG-400 MCG-400 UNIT-12 MCG-3.4 MG-28 MCG-20 MG-5000 UNIT-10 MG-9 MG-3 MG-100 MG-15 MG-150 MCG-7.5 MG-2 MG-40 MG-75 MCG-150 MCG-60 UNIT-31 MG-2 MG-5 MCG-10 MCG-2 MG-50 MCG-70 MCG-10 MCG-7.5 MG	P	QL(1 EA daily); RX/OTC
QC WOMENS DAILY MULTIVITAMIN TABS 60 MG-2 MG-30 MCG-400 MCG-500 UNIT-5 MCG-2500 UNIT-1.7 MG-25 MCG-10 MG-5 MG-15 MG-450 MG-5 MG-50 MG-15 MG-30 UNIT-2 MG-2 MG-120 MCG-20 MCG	P	QL(1 EA daily); RX/OTC
QUIN B STRONG TABS	P	QL(1 EA daily); RX/OTC
QUINTABS-M TABS	P	QL(1 EA daily); RX/OTC
RAYAVIT TABS	P	QL(1 EA daily); RX/OTC
REMEDIENT CAPS	P	RX/OTC
RENAL MULTIVITAMIN TABS	P	QL(1 EA daily); RX/OTC
RENAPLEX-D TABS	P	QL(1 EA daily); RX/OTC
RENAPLEX TABS 60 MG-10 MG-300 MCG-800 MCG-6 MCG-1.7 MG-20 MG-10 MG-1.5 MG-12.5 MG	P	QL(1 EA daily); RX/OTC
REVYRA TABS	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
SENIOR TABS TABS 60 MG-3 MG-30 MCG-400 MCG-1.5 MG-20 MG-25 MCG-10 MG-1.7 MG-250 MCG-300 MCG-400 UNIT-45 UNIT-100 MG-2 MG-75 MCG-5 MCG-80 MG-2 MG-150 MCG-150 MCG-2 MG-10 MCG-15 MG-200 MG-150 MCG-48 MG-20 MCG-3500 UNIT-10 MCG-72 MG	P	QL(1 EA daily); RX/OTC
SENTRY SENIOR MENS 50+ TABS	P	QL(1 EA daily); RX/OTC
SENTRY SENIOR/LUTEIN TABS	P	QL(1 EA daily); RX/OTC
SENTRY SENIOR TABS	P	QL(1 EA daily); RX/OTC
SENTRY TABS	P	QL(1 EA daily); RX/OTC
SIDEROL TABS	P	QL(1 EA daily); RX/OTC
SKIN HAIR & NAILS ADVANCED CAPS	P	RX/OTC
SOLO TABS	P	QL(1 EA daily); RX/OTC
SPECTRAVITE TABS	P	QL(1 EA daily); RX/OTC
STRESS B COMPLEX/ANTIOXID/ZINC TABS 500 MG-45 MCG-400 MCG-10 MG-100 MG-5 MG-20 MG-10 MG-13.5 MG-3 MG-24 MG-77 MG-12 MCG	P	QL(1 EA daily); RX/OTC
STRESSTABS ADVANCED TABS 30 MG-5 MG-400 MCG-400 UNIT-50 MCG-2500 UNIT-1.5 MG-20 MG-1.5 MG-30 MG-20 MG-15 UNIT	P	QL(1 EA daily); RX/OTC
STROVITE ONE TABS	P	QL(1 EA daily); RX/OTC
SUPER ANTIOXIDANT CAPS	P	RX/OTC
SUPER ANTIOXIDANTS PROTECTOR CAPS 500 MG-400 UNIT-25000 UNIT-50 MCG	P	RX/OTC
SUPER AYTINAL 50 PLUS TABS 120 MG-2 MG-30 MCG-400 MCG-1.5 MG-400 UNIT-12 MCG-10 MG-1.7 MG-20 MG-275 MCG-9 MG-225 MG-100 MG-15 MG-2 MG-150 MCG-75 MCG-150 MCG-50 UNIT-2 MG-5000 UNIT-80 MCG-70 MCG-120 MCG-25 MG-25 MG	P	QL(1 EA daily); RX/OTC
SUPER AYTINAL TABS 90 MG-5 MG-40 MCG-400 MCG-400 UNIT-12 MCG-10 MG-5 MG-30 MG-275 MCG-3500 UNIT-25 MG-300 MCG-5 MG-100 MG-15 MG-3 MG-7.7 MG-150 MCG-50 MCG-162 MG-150 MCG-2 MG-50 MCG-30 UNIT-125 MG-5 MCG-10 MCG-7.5 MG-25 MCG-50 MCG-10 MCG-7 MG	P	QL(1 EA daily); RX/OTC
SUPER D-ZINC-SELENIUM-COPPER TABS	P	QL(1 EA daily); RX/OTC
SUPER THERA VITE M TABS 90 MG-3 MG-35 MCG-0.4 MG-3 MG-9 MCG-10 MG-3.4 MG-30 MG-5000 UNIT-400 UNIT-30 UNIT-1250 UNIT-27 MG-100 MG-5 MG-15 MCG-7.5 MG-15 MCG-2 MG-15 MG-40 MG-150 MCG-31 MG-10 MCG-7.5 MG	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
SUPER VITA-MINS TABS 250 MG-5 MG-0.4 MG-10 MG-6 MCG-20 MG-10 MG-100 MG-400 UNIT-30 UNIT-24 MG-100 MG-1.25 MG-2 MG-15 MG-0.161 MG-150 MCG-0.125 MG-10000 UNIT	P	QL(1 EA daily); RX/OTC
SUPERIOR MENS MULTI TABS	P	QL(1 EA daily); RX/OTC
SUPERIOR WOMENS MULTI TABS	P	QL(1 EA daily); RX/OTC
SUPPORT-500 CAPS	P	RX/OTC
SUPPORT LIQD	P	RX/OTC
SYSTANE ICAPS AREDS2 CAPS 250 MG-5 MG-1 MG-1 MG-12.5 MG-200 UNIT	P	RX/OTC
SYSTANE ICAPS AREDS2 TABS	P	QL(1 EA daily); RX/OTC
T-VITES TABS	P	QL(1 EA daily); RX/OTC
THERA VITAL M TABS 90 MG-3 MG-30 MCG-0.4 MG-3 MG-9 MCG-10 MG-3.4 MG-20 MG-2500 UNIT-400 UNIT-30 UNIT-2500 UNIT-27 MG-100 MG-5 MG-15 MCG-7.5 MG-15 MCG-2 MG-15 MG-40 MG-150 MCG-31 MG-10 MCG-7.5 MG	P	QL(1 EA daily); RX/OTC
THERA VITAL-M TABS 120 MG-3 MG-15 MCG-400 MCG-400 UNIT-9 MCG-3.4 MG-30 MG-5500 UNIT-10 MG-18 MG-3 MG-100 MG-15 MG-2 MG-40 MG-7.5 MG-15 MCG-150 MCG-30 UNIT-31 MG-5 MG-15 MCG-10 MCG	P	QL(1 EA daily); RX/OTC
THERA-M PLUS MV W/BETA-CAROT TABS	P	QL(1 EA daily); RX/OTC
THERA-TABS M TABS	P	QL(1 EA daily); RX/OTC
THERA-VITE MAX-M TABS	P	QL(1 EA daily); RX/OTC
THERABASIC-M TABS 400 UNIT-90 MG-3 MG-35 MCG-0.4 MG-9 MCG-10 MG-3.4 MG-30 MG-5000 UNIT-27 MG-3 MG-100 MG-1250 UNIT-15 MCG-7.5 MG-15 MCG-40 MG-15 MG-150 MCG-30 UNIT-31 MG-2 MG-10 MCG-5 MG-7.5 MG	P	QL(1 EA daily); RX/OTC
THERAGRAN-M ADVANCED 50 PLUS TABS	P	QL(1 EA daily); RX/OTC
THERAGRAN-M ADVANCED TABS	P	QL(1 EA daily); RX/OTC
THERAGRAN-M PREMIER 50 PLUS TABS	P	QL(1 EA daily); RX/OTC
THERAGRAN-M PREMIER TABS	P	QL(1 EA daily); RX/OTC
THERAGRAN-M TABS	P	QL(1 EA daily); RX/OTC
THERAMILL FORTE CAPS	P	RX/OTC
THERANATAL LACTATION ONE CAPS	P	RX/OTC
THERAPEUTIC FORMULA/HEMATINICS TABS 3.3 MG-0.33 MG-50 MCG-3.3 MG-33.3 MG-100 MG-11.7 MG-66.7 MG-3.3 MG-41.7 MG-140 UNIT-5 UNIT-0.67 MG-1400 UNIT	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
THERAPEUTIC-M TABS 90 MG-2 MG-30 MCG-400 MCG-1.5 MG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-9 MG-60 MG-2 MG-15 MCG-8 MG-15 MCG-2 MG-15 MG-40 MG-150 MCG-10 MCG-30 UNIT-8 MG, 90 MG-30 MCG-400 MCG-3 MG-20 MG-6 MG-10 MG-3.4 MG-10 MCG-27 MG-9 MG-100 MG-2 MG-75 MCG-11 MG-2 MG-10 MCG-150 MCG-50 MCG-2 MG-10 MCG-15 MG-145 MG-150 MCG-35 MG-70 MCG-1500 MCG-28 MCG-12 MCG-8 MG	P	QL(1 EA daily); RX/OTC
THERATRUM COMPLETE 50 PLUS TABS 60 MG-3 MG-30 MCG-400 MCG-400 UNIT-25 MCG-1.7 MG-10 MCG-20 MG-250 MCG-3500 UNIT-10 MG-300 MCG-1.5 MG-100 MG-15 MG-150 MCG-200 MG-80 MG-75 MCG-150 MCG-48 MG-2 MG-5 MCG-2 MG-150 MCG-45 UNIT-20 MCG-10 MCG-72 MG-2 MG	P	QL(1 EA daily); RX/OTC
THERATRUM COMPLETE TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-250 MCG-5000 UNIT-10 MG-18 MG-1.5 MG-100 MG-15 MG-80 MG-2 MG-150 MCG-162 MG-150 MCG-75 MCG-30 UNIT-108 MG-2 MG-72 MG-5 MCG-10 MCG-2 MG-120 MCG-25 MCG-20 MCG-10 MCG, 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-250 MCG-3500 UNIT-10 MG-18 MG-300 MCG-1.5 MG-100 MG-15 MG-80 MG-150 MCG-162 MG-72 MG-75 MCG-150 MCG-30 UNIT-109 MG-2 MG-5 MCG-10 MCG-2 MG-120 MCG-20 MCG-10 MCG-2 MG	P	QL(1 EA daily); RX/OTC
THRIVE FOR LIFE WOMENS TABS 60 MG-6 MG-300 MCG-400 MCG-1000 UNIT-18 MCG-5.1 MG-60 MCG-20 MG-100 MCG-3500 UNIT-15 MG-18 MG-500 MG-700 MCG-4.5 MG-50 MG-15 MG-75 MCG-150 MCG-30 UNIT-2 MG-2 MG-70 MCG-120 MCG-150 MCG	P	QL(1 EA daily); RX/OTC
TREXION CAPS	P	RX/OTC
TREXVIA CAPS	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
TROPICAL LIQUID NUTRITION LIQD 90 MG/15ML-3 MG/15ML-150 MCG/15ML-45 UNIT/15ML-300 MCG/15ML-2.25 MG/15ML-600 UNIT/15ML-18 MCG/15ML-5250 UNIT/15ML-2.55 MG/15ML-45 MG/15ML-15 MG/15ML-15 MG/15ML-75 MG/15ML-112.5 MCG/15ML-37 MG/15ML	P	RX/OTC
TRUEVITE TABS	P	QL(1 EA daily); RX/OTC
UDAMIN SP TABS 12.5 MG-1000 MCG-250 MCG-2.5 MG-17 MG-7.5 MG-100 MCG-75 UNIT-320 MG	P	QL(1 EA daily); RX/OTC
ULTRA BONEUP TABS	P	QL(1 EA daily); RX/OTC
ULTRA FREEDA/IRON TABS 133.333 UNIT-1666.667 UNIT-16.667 MG-100 MCG-66.667 UNIT-266.667 MCG-16.667 MG-33.333 MCG-16.667 MG-33.333 MG-33.333 MG-6 MG-333.333 MG-3.333 MG-33.333 MG-4.167 MCG-11.667 MG-66.667 MCG-7.5 MG-83.333 MG-50 MCG-33.333 MCG-33.333 MG	P	QL(1 EA daily); RX/OTC
ULTRA FREEDA TABS 133.333 UNIT-16.667 MG-100 MCG-266.667 MCG-16.667 MG-33.333 MCG-1666.667 UNIT-16.667 MG-33.333 MG-33.333 MG-333.333 MG-3.333 MG-33.333 MG-11.667 MG-7.5 MG-83.333 MG-50 MCG-33.333 MCG-33.333 MG-66.667 UNIT-4.167 MCG-66.667 MCG	P	QL(1 EA daily); RX/OTC
ULTRA MULTI FORMULA/IRON CAPS 40 MG-1.333 MG-200 MCG-266.667 MCG-4 MG-1000 UNIT-33.333 MCG-1.133 MG-3.333 MG-3.333 MG-16.667 MG-3333.333 UNIT-6.667 MG-15 MG-33.333 MG-10 MG-10 UNIT-133.333 MG-50 MCG-0.667 MG-40 MCG-10 MG-25 MCG-5 MG-10 MG-1 MG-23.333 MCG-10 MG	P	RX/OTC
ULTRACHOICE ADV FORMULA MATURE TABS 120 MG-6 MG-60 MCG-400 MCG-4.5 MG-400 UNIT-24 MCG-10 MG-5.1 MG-40 MG-275 MCG-18 MG-300 MCG-100 MG-15 MG-3.5 MG-0.5 MG-100 MG-2 MG-13 MCG-1 MG-200 MCG-165 MG-150 MCG-200 MCG-60 UNIT-80 MG-6.5 MCG-10 MG-2 MG-7.5 MG-5000 UNIT-80 MCG-200 MCG-90 MG-13 MCG-2 MG-5 MG-25 MG-10 MG-1 MG-0.5 MG-1 MG-25 MG-1 MG-1 MG	P	QL(1 EA daily); RX/OTC
ULTRACHOICE ADVANCED FORMULA TABS 120 MG-6 MG-60 MCG-400 MCG-4.5 MG-400 UNIT-18 MCG-10 MG-5.1 MG-40 MG-275 MCG-18 MG-300 MCG-100 MG-15 MG-3.5 MG-80 MG-2 MG-13 MCG-200 MCG-200 MCG-165 MG-150 MCG-200 MCG-60 UNIT-80 MG-6.5 MCG-10 MG-5 MG-7.5 MG-5000 UNIT-80 MCG-200 MCG-72 MG-13 MCG-10 MG-25 MG-5 MG-10 MG-25 MG-5 MG-1 MG	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
VENEXA FE TABS	P	QL(1 EA daily); RX/OTC
VENEXA TABS	P	QL(1 EA daily); RX/OTC
VENTRIXYL FE TABS	P	QL(1 EA daily); RX/OTC
VENTRIXYL TABS	P	QL(1 EA daily); RX/OTC
VIC-FORTE CAPS 150 MG-2 MG-1 MG-10 MCG-8000 UNIT-5 MG-25 MG-10 MG-10 MG-50 UNIT-80 MG-70 MG-4 MG	P	RX/OTC
VISION FORMULA 2 CAPS 250 MG-5 MG-1 MG-10 MG-1 MG-90 MG	P	RX/OTC
VISION FORMULA/LUTEIN TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG	P	QL(1 EA daily); RX/OTC
VISION HEALTH CAPS	P	RX/OTC
VISION OPTIMIZER CAPS	P	RX/OTC
VISION VITAMINS TABS 60 MG-40 MG-2 MG-30 UNIT-5000 UNIT-40 MCG	P	QL(1 EA daily); RX/OTC
VISTA ADVANCED AREDS2 FORMULA CAPS	P	RX/OTC
VISTA ADVANCED DRY EYE FORMULA CAPS	P	RX/OTC
VITA HAIR TABS 300 MCG-400 MCG-35 MG-6 MCG-100 MG-125 MG-65 MG-30 MG-18 MG-5 MG-2 MG-15 MG-150 MCG	P	QL(1 EA daily); RX/OTC
VITA S FORTE TABS 400 UNIT-500 MG-25 MG-0.15 MG-1 MG-50 MCG-25 MG-20 MG-100 MG-10 MG-20 MG-50 MG-15 MG-3 MG-20 MCG-60 UNIT-50 MCG-0.05 MG	P	QL(1 EA daily); RX/OTC
VITA-MIN CAPS 85 MG-1.7 MG-42.3 MCG-8.3 UNIT-255 MCG-106.3 UNIT-3.3 MCG-5.7 MG-1 MG-11.3 MG-1 MG-42.3 MG-56.7 MG-2.7 MG-4.3 MCG-56.7 MG-14 MCG-4.3 MG-42.3 MCG-14 MCG-2973 UNIT	P	RX/OTC
VITABASIC COMPLETE TABS	P	QL(1 EA daily); RX/OTC
VITABASIC SENIOR TABS	P	QL(1 EA daily); RX/OTC
VITABEX PLUS CAPS	P	RX/OTC
VITABEX CAPS	P	RX/OTC
VITACEL TABS 500 MG-300 MCG-100 UNIT-1 MG-25 MG-25 MG-25 MG-50 MG-5000 UNIT-25 MG-33 MG-200 UNIT-125 MG-80 MG-10 MG-50 MCG	P	QL(1 EA daily); RX/OTC
VITACORE TABS	P	QL(1 EA daily); RX/OTC
VITALUX TABS	P	QL(1 EA daily); RX/OTC
VITAMINS A-D-E/SELENIUM TABS 400 UNIT-10000 UNIT-100 UNIT-50 MCG	P	QL(1 EA daily); RX/OTC
VITAROCA PLUS TABS 500 MG-25 MG-0.15 MG-0.8 MG-50 MCG-20 MG-100 MG-5000 UNIT-25 MG-27 MG-20 MG-50 MG-5 MG-22.5 MG-3 MG-30 UNIT-0.1 MG	P	QL(1 EA daily); RX/OTC
VITASANA TABS	P	QL(1 EA daily); RX/OTC
VITASCRIPT TABS	P	QL(1 EA daily); RX/OTC
VITEYES AREDS 2 FORMULA +COQ10 CAPS	P	RX/OTC
VITEYES AREDS 2 FORMULA +MULTI CAPS	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
VITEYES AREDS 2 FORMULA MINI CAPS	P	RX/OTC
VITEYES AREDS 2 FORMULA CAPS	P	RX/OTC
VITEYES CLASSIC ADVANCED CAPS	P	RX/OTC
VITEYES CLASSIC MACULAR SUPPOR CAPS	P	RX/OTC
VITEYES CLASSIC MULTIVITAMIN TABS	P	QL(1 EA daily); RX/OTC
VITEYES CLASSIC+OMEGA-3 CAPS	P	RX/OTC
VITEYES COMPLETE CAPS 83.3 MG-16.7 MG-50 MCG-133.3 MCG-3.3 MG-25 MG-66.7 UNIT-833.3 UNIT-1.67 MG-16.7 MCG-41.7 MG-83.3 MG-1.67 MG-8.3 MG-0.67 MG-3.3 MG-0.5 MG-0.33 MG-4 MG-33.3 MG-33.3 MCG-66.7 UNIT-0.83 MG-33.3 MG-20.8 MCG-1.67 MCG-16.5 MG-0.33 MG-33.3 MCG-33.3 MG-16.7 MCG-6.7 MG-83.3 MG-166.7 MCG-33.3 MCG-20 MG-6.7 MG-20 MG-33.3 MG	P	RX/OTC
VITEYES OPTIC NERVE SUPPORT TABS	P	QL(1 EA daily); RX/OTC
VITRAMYN TABS	P	QL(1 EA daily); RX/OTC
VITRANOL FE TABS	P	QL(1 EA daily); RX/OTC
VITRANOL TABS	P	QL(1 EA daily); RX/OTC
VITREXATE FE TABS	P	QL(1 EA daily); RX/OTC
VITREXATE TABS	P	QL(1 EA daily); RX/OTC
VITREXYL + IRON TABS	P	QL(1 EA daily); RX/OTC
VITREXYL TABS	P	QL(1 EA daily); RX/OTC
VIVARA MVC CAPS	P	RX/OTC
VIVARA MVD CAPS	P	RX/OTC
VIVARA MVM CAPS	P	RX/OTC
WELLFOLA TABS	P	QL(1 EA daily); RX/OTC
WOMENS 50+ ADVANCED CAPS 72 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-9.5 MG-2500 UNIT-20 MG-21 MG-10 MG-100 MCG-234 MCG-4.5 MG-4 MG-22.5 MG-2 MG-16 MG-150 MCG-150 MCG-33 UNIT-5 MCG-10 MCG-180 MCG-105 MCG-552 MCG-6 MG-10 MCG-2 MG-4 MG-90 MCG	P	RX/OTC
WOMENS 50+ MULTI VITAMIN TABS	P	QL(1 EA daily); RX/OTC
WOMENS DAILY FORMULA TABS 60 MG-2 MG-30 MCG-400 MCG-1000 UNIT-6 MCG-1.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-500 MG-1.5 MG-50 MG-15 MG-22.5 UNIT-2 MG-2 MG-120 MCG-20 MCG	P	QL(1 EA daily); RX/OTC
WOMENS LIFE PACK TABS 400 MCG-400 UNIT-25 MCG-10 MG-10 MG-250 MCG-3500 UNIT-18 MG-10 MG-300 MCG-2 MG-80 MG-150 MCG-0.75 MCG-150 MCG-30 UNIT-109 MG-2 MG-5 MCG-10 MCG-120 MCG-20 MCG-10 MCG-72 MG-2 MG-30 MG, 400 UNIT-25 MCG-10 MG-10 MG-250 MCG-3500 UNIT-18 MG-10 MG-300 MCG-2 MG-150 MCG-75 MCG-150 MCG-30 UNIT-109 MG-2 MG-5 MCG-10 MCG-2 MG-120 MCG-20 MCG-10 MCG	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
WOMENS MULTI CAPS 72 MG-4 MG-30 MCG-600 MCG-1000 UNIT-15 MCG-1.7 MG-20 MCG-20 MG-9.5 MG-2500 UNIT-20 MG-18 MG-21 MG-10 MG-100 MCG-234 MCG-3 MG-4 MG-15 MG-2 MG-16 MG-150 MCG-150 MCG-33 UNIT-5 MCG-10 MCG-120 MCG-70 MCG-552 MCG-6 MG-10 MCG-2 MG-2 MG-75 MCG	P	RX/OTC
WOMENS MULTIVITAMIN TABS 75 MG-1.7 MG-1000 MCG-400 MCG-25 MCG-6 MCG-1.3 MG-25 MCG-16 MG-665 MCG-5 MG-18 MG-380 MG-1.2 MG-8 MG-0.9 MG-150 MCG-3.4 MG-1.8 MG-25 MCG-27.5 MCG	P	QL(1 EA daily); RX/OTC
YELETS TEENAGE FORMULA TABS	P	QL(1 EA daily); RX/OTC
Multiple Vitamins w/ Minerals & Fluoride-Iron-Folic Acid		
QUFLORA FE	P	AL(Up to 20 yrs old)
Multivitamins		
ALTRIXA TABS	P	QL(1 EA daily); RX/OTC
AMLADEX TABS	P	QL(1 EA daily); RX/OTC
ANTI-OXIDANT TABS 250 MG-200 UNIT-10000 UNIT	P	QL(1 EA daily); RX/OTC
AVOWISE TABS	P	QL(1 EA daily); RX/OTC
CENTRUM MENOPAUSE MIND/MOOD TABS	P	QL(1 EA daily); RX/OTC
DAILY MULTIPLE VITAMINS TABS	P	QL(1 EA daily); RX/OTC
DAILY VALUE MULTIVITAMIN TABS 400 UNIT-60 MG-2 MG-300 MCG-30 UNIT-400 MCG-1.5 MG-6 MCG-5000 UNIT-1.7 MG-20 MG-10 MG, 400 UNIT-60 MG-2 MG-300 MCG-400 MCG-1.5 MG-6 MCG-5000 UNIT-1.7 MG-20 MG-10 MG-30 UNIT	P	QL(1 EA daily); RX/OTC
DAILY VITAMINS TABS 60 MG-2 MG-0.4 MG-1.5 MG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT	P	QL(1 EA daily); RX/OTC
DAILY VITES TABS 60 MG-2 MG-0.4 MG-1.5 MG-6 MCG-5000 UNIT-10 MG-1.7 MG-20 MG-400 UNIT-30 UNIT	P	QL(1 EA daily); RX/OTC
DAILY VITE TABS 400 UNIT-60 MG-2 MG-30 UNIT-400 MCG-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-1.5 MG, 60 MG-2 MG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-1.5 MG-30 UNIT	P	QL(1 EA daily); RX/OTC
DAILY-VITE MULTIVITAMIN TABS 60 MG-2 MG-400 MCG-20 MG-1.5 MG-10 MCG-6 MCG-1.7 MG-1500 MCG	P	QL(1 EA daily); RX/OTC
DAILY-VITE TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-3000 UNIT-10 MG-1.5 MG-45 MG-30 UNIT	P	QL(1 EA daily); RX/OTC
ESTROFACTORS TABS	P	QL(1 EA daily); RX/OTC
FOLAWISE TABS	P	QL(1 EA daily); RX/OTC
FOLCYTEINE TABS	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
GNP ESSENTIAL ONE DAILY TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-75 MG-1.5 MG-30 UNIT	P	QL(1 EA daily); RX/OTC
HEALTHY HAIR/SKIN/NAILS TABS 2 MG-2000 MCG-400 MCG-25 MG-100 MG-25 MCG-1.7 MG-10 MG-40 MG-1.5 MG-50 MG-2500 UNIT-50 MG-50 MG	P	QL(1 EA daily); RX/OTC
HIGH POTENCY MULTIVITAMIN TABS	P	QL(1 EA daily); RX/OTC
MINCORA TABS	P	QL(1 EA daily); RX/OTC
MINOVIA TABS	P	QL(1 EA daily); RX/OTC
MULTI VITAMIN W/D-3 TABS	P	QL(1 EA daily); RX/OTC
MULTI VITAMIN TABS	P	QL(1 EA daily); RX/OTC
MULTI-VITAMIN TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-1.5 MG-30 UNIT	P	QL(1 EA daily); RX/OTC
MULTIPLE VITAMIN-FOLIC ACID TABS 60 MG-2 MG-400 MCG-1.5 MG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 UNIT	P	QL(1 EA daily); RX/OTC
MULTIPLE VITAMINS ESSENTIAL TABS 60 MG-2 MG-0.4 MG-20 MG-1.5 MG-6 MCG-10 MG-1.7 MG-400 UNIT-30 UNIT-5000 UNIT	P	QL(1 EA daily); RX/OTC
MULTIPLE VITAMINS TABS 60 MG-2 MG-400 MCG-1.5 MG-400 UNIT-6 MCG-10 MG-1.7 MG-20 MG-5000 UNIT-30 UNIT, 60 MG-2 MG-400 MCG-400 UNIT-1.7 MG-20 MG-10 MG-1.5 MG-30 UNIT-5000 UNIT, 60 MG-400 MCG-2 MG-6 MCG-10 MG-1.7 MG-20 MG-5000 UNIT-1.5 MG-400 UNIT-30 UNIT	P	QL(1 EA daily); RX/OTC
multiple vitamin TABS	P	QL(1 EA daily); RX/OTC
MULTIVITAMIN ADULT TABS	P	QL(1 EA daily); RX/OTC
MULTIVITAMIN IRON-FREE TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-3000 UNIT-10 MG-45 MG-1.5 MG-30 UNIT	P	QL(1 EA daily); RX/OTC
MULTIVITAMIN TABS	P	QL(1 EA daily); RX/OTC
NEOMULTIVITE TABS	P	QL(1 EA daily); RX/OTC
NEWVITE TABS	P	QL(1 EA daily); RX/OTC
OMNICAP TABS	P	QL(1 EA daily); RX/OTC
ONCE DAILY TABS 400 UNIT-50 MG-1 MG-2 MG-1 MCG-5000 UNIT-1 MG-2.5 MG-20 MG	P	QL(1 EA daily); RX/OTC
ONE DAILY ESSENTIALS TABS	P	QL(1 EA daily); RX/OTC
ONE DAILY ESSENTIAL TABS	P	QL(1 EA daily); RX/OTC
ONE DAILY MULTIVITAMIN ADULT TABS 60 MG-2 MG-0.4 MG-1.5 MG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
ONE DAILY TABS 60 MG-2 MG-1.5 MG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT	P	QL(1 EA daily); RX/OTC
ONE VITE DAILY MULTIVITAMIN TABS	P	QL(1 EA daily); RX/OTC
ONE-DAILY MULTI VITAMINS TABS 50 MG-20 MG-1 MG-1.5 MG-400 UNIT-3 MCG-1 MG-1.7 MG-4000 UNIT-60 MG	P	QL(1 EA daily); RX/OTC
ONE-DAILY MULTI-VITAMIN TABS 50 MG-1 MG-1.5 MG-10 MCG-3 MCG-1.7 MG-20 MG-1200 MCG-1 MG-60 MG	P	QL(1 EA daily); RX/OTC
QC ESSENTIALS TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-1.5 MG-30 UNIT	P	QL(1 EA daily); RX/OTC
QUINTABS TABS	P	QL(1 EA daily); RX/OTC
RELCARE TABS	P	QL(1 EA daily); RX/OTC
STRESS FORMULA/ZINC/ENERGY TABS	P	QL(1 EA daily); RX/OTC
STRESS FORMULA TABS 500 MG-3 MG-45 MCG-400 MCG-12 MCG-20 MG-10 MG-100 MG-10 MG-30 UNIT, 500 MG-5 MG-45 MCG-400 MCG-12 MCG-10 MG-100 MG-20 MG-10 MG-30 UNIT, 500 MG-5 MG-45 MCG-400 MCG-15 MG-12 MCG-20 MG-10 MG-100 MG-30 UNIT	P	QL(1 EA daily); RX/OTC
STRESSTABS ENERGY TABS	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
TAB-A-VITE/BETA CAROTENE TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-3000 UNIT-10 MG-1.5 MG-45 MG-30 UNIT	P	QL(1 EA daily); RX/OTC
TAB-A-VITE TABS 60 MG-2 MG-400 MCG-20 MG-1.5 MG-10 MCG-6 MCG-1.7 MG-1500 MCG	P	QL(1 EA daily); RX/OTC
THERA-TABS TABS 90 MG-3 MG-30 MCG-400 MCG-3 MG-20 MG-400 UNIT-9 MCG-5000 UNIT-10 MG-3.4 MG-30 UNIT	P	QL(1 EA daily); RX/OTC
THERA TABS	P	QL(1 EA daily); RX/OTC
THEREMS TABS	P	QL(1 EA daily); RX/OTC
TM-DAILY VITE TABS	P	QL(1 EA daily); RX/OTC
TRUE DAILY VITE TABS 60 MG-400 MCG-1.5 MG-20 MG-2 MG-1.7 MG-10 MCG-1500 MCG-6 MCG	P	QL(1 EA daily); RX/OTC
TRUE MULTIVITAMIN TABS	P	QL(1 EA daily); RX/OTC
TRUEONE TABS	P	QL(1 EA daily); RX/OTC
VALENTRA TABS	P	QL(1 EA daily); RX/OTC
VANTREX TABS	P	QL(1 EA daily); RX/OTC
VIRELIX TABS	P	QL(1 EA daily); RX/OTC
VIREXA TABS	P	QL(1 EA daily); RX/OTC
VIT E-VIT C-BETA CAROTENE TABS 250 MG-5000 UNIT-200 UNIT	P	QL(1 EA daily); RX/OTC
VITALEE TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-3000 UNIT-10 MG-1.5 MG-30 UNIT	P	QL(1 EA daily); RX/OTC
VITRAX TABS	P	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
VITRION TABS	P	QL(1 EA daily); RX/OTC
Ped Multi Vitamins w/Fl & FE		
FLORAFOL FE PEDIATRIC SOLN	P	AL(Up to 20 yrs old)
ped multivitamins w/fl & iron SOLN 35 MG/ML-0.4 MG/ML-0.5 MG/ML-400 UNIT/ML-1500 UNIT/ML-0.6 MG/ML-8 MG/ML-0.25 MG/ML-10 MG/ML-5 UNIT/ML	P	AL(Up to 20 yrs old); RX/OTC
POLY-VI-FLOR/IRON CHEW	P	AL(Up to 20 yrs old)
QUFLORA FE PEDIATRIC LIQD	P	AL(Up to 20 yrs old)
Ped Multiple Vitamins w/ Minerals		
LIVITA CHILDREN LIQD	P	AL(Up to 20 yrs old); RX/OTC
Ped MV w/ Fluoride		
DAVIMET-FLUORIDE CHEW	P	AL(Up to 20 yrs old)
FLOTREX CHEW 0.5 MG	P	AL(Up to 20 yrs old); RX/OTC
MULTIVITAMIN/FLUORIDE CHEW 0.5 MG	P	AL(Up to 20 yrs old); RX/OTC
MULTIVITAMIN/FLUORIDE SUSP 0.25 MG/ML	P	AL(Up to 20 yrs old); RX/OTC
pediatric multivitamins w/fl CHEW	P	AL(Up to 20 yrs old); RX/OTC
pediatric multivitamins w/fl SUSP 0.25 MG/ML, 0.5 MG/ML	P	AL(Up to 20 yrs old); RX/OTC
pediatric vitamins acd w/ fluoride SOLN	P	AL(Up to 20 yrs old); RX/OTC
POLY-VI-FLOR CHEW	P	AL(Up to 20 yrs old); RX/OTC
POLY-VI-FLOR SUSP	P	AL(Up to 20 yrs old); RX/OTC
QUFLORA PEDIATRIC CHEW	P	AL(Up to 20 yrs old); RX/OTC
QUFLORA PEDIATRIC SUSP 0.25 MG/ML, 0.5 MG/ML	P	AL(Up to 20 yrs old); RX/OTC
TRI-VI-FLOR SUSP 0.25 MG/ML	P	AL(Up to 20 yrs old); RX/OTC
TRI-VITAMIN WITH FLUORIDE SUSP 0.25 MG/ML	P	AL(Up to 20 yrs old); RX/OTC
Ped MV w/ Iron		
FRUITY CHEWS/IRON CHEW 60 MG-1.05 MG-300 MCG-1.05 MG-4.5 MCG-1.2 MG-13.5 MG-400 UNIT-15 UNIT-15 MG-2500 UNIT	P	
GNP CHILDRENS CHEWABLES/IRON CHEW 15 MG	P	
LAND BEFORE TIME MULTIVITAMIN CHEW 15 MG	P	
MULTIVITAMIN INFANTS/TODDLERS SOLN 11 MG/ML	P	AL(Up to 20 yrs old)
NOVAFERRUM PED MULTI VIT-IRON SOLN 10 MG/ML	P	QL(50 ML per fill retail; 50 per fill mail)
PC PEDIATRIC POLY-VITA/FE DROP SOLN	P	QL(50 ML per fill retail; 50 per fill mail)
POLY-VITA/IRON SOLN	P	QL(50 ML per fill retail; 50 per fill mail)
QC CHILDRENS VITAMINS/IRON CHEW 15 MG	P	
Pediatric Multiple Vitamins		
NOVAMV PEDIATRIC MULTI-VITAMIN LIQD	P	
Prenatal Vitamins		
CITRANATAL B-CALM 120 MG-25 MG-1 MG-400 UNIT-120 MG-20 MG	P	

Drug Name	Drug Tier	Requirements/ Limits
CLASSIC PRENATAL TABS	P	QL(1 EA daily)
COMPLETE NATAL DHA	P	
COMPLETENATE CHEW	P	
CONCEPT DHA	P	
CONCEPT OB	P	
CVS PRENATAL GUMMY 15 MG-1.25 MG-400 MCG-200 UNIT-4 MCG-5 MG-1800 UNIT-25 MG-10 MG-7.5 UNIT-1.9 MG-113.5 MG-5 MG-35 MG	P	
CVS PRENATAL TABS 100 MG-2.6 MG-800 MCG-400 UNIT-4 MCG-1.7 MG-18 MG-27 MG-1.5 MG-25 MG-263 MG-11 UNIT-4000 UNIT	P	QL(1 EA daily)
ENBRACE HR	P	
EQL PRENATAL FORMULA TABS	P	QL(1 EA daily)
FOLIVANE-OB	P	
FT PRENATAL TABS	P	QL(1 EA daily)
GNP PRENATAL/FOLIC ACID TABS	P	QL(1 EA daily)
GNP PRENATAL TABS	P	QL(1 EA daily)
JENLIVA PRENATAL/POSTNATAL CAPS	P	QL(1 EA daily)
KP PRENATAL MULTIVITAMINS TABS	P	QL(1 EA daily)
KPN PRENATAL TABS	P	QL(1 EA daily)
M-NATAL PLUS TABS	P	RX/OTC
MASONATAL TABS	P	QL(1 EA daily)
MULTI PRENATAL TABS	P	QL(1 EA daily)
NEO-VITAL RX TABS	P	
NEONATAL PRENATAL TABS	P	QL(1 EA daily)
NEONATAL VITAMIN TABS	P	QL(1 EA daily)
NESTABS	P	
NESTABS DHA	P	
NESTABS ONE	P	
OB COMPLETE ONE	P	
OB COMPLETE PETITE	P	
OB COMPLETE PREMIER	P	
OB COMPLETE/DHA	P	
OB COMPLETE TABS	P	
ONE VITE WOMENS TABS	P	QL(1 EA daily)
PNV-OMEGA	P	
PRENATAL (W/IRON & FA) TABS	P	QL(1 EA daily); RX/OTC
PRENATAL FORMULA CAPS	P	
PRENATAL FORTE TABS	P	QL(1 EA daily); RX/OTC
PRENATAL MULTIVIT PLUS FOLATE TABS 0.8 MG	P	QL(1 EA daily); RX/OTC
PRENATAL ONE DAILY TABS	P	QL(1 EA daily)
prenatal vit w/ ferrous fumarate-l methylfolate-folic acid	P	
prenatal vit w/ iron carbonyl-folic acid TABS 120 MG-10 MG-1.25 MG-315 UNIT-15 MCG-3.4 MG-10 MG-1 MG-2 MG-15 MG-10 MG-20 UNIT-2100 UNIT-50 MG	P	
PRENATAL VITAMIN AND MINERAL TABS	P	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
PRENATAL VITAMINS TABS 100 MG-800 MCG-1.84 MG-18 MG-2.6 MG-1.7 MG-27 MG-10 MCG-4.95 MG-25 MG-200 MG-160 MG-1200 MCG-4 MCG, 120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT-30 UNIT	P	QL(1 EA daily)
prenatal without a w/ fe fumarate-l methylfolate-fa-dha	P	
PRENATAL/IRON TABS 4 MG-800 MCG-1.7 MG-400 UNIT-2 MG-20 MG-8000 UNIT-60 MG-45 MG-100 MG-100 MG-7.5 MG-150 MCG-30 UNIT-1 MG	P	QL(1 EA daily); RX/OTC
PRENATAL TABS	P	QL(1 EA daily)
PRENATAL TABS 120 MG-10 MG-1 MG-10 MCG-12 MCG-3 MG-20 MG-1200 MCG-27 MG-200 MG-1.84 MG-25 MG-2 MG-10 MG	P	RX/OTC
PRENATE	P	
PRENATE AM	P	
PRENATE DHA 90 MG-26 MG-400 MCG-400 UNIT-25 MCG-155 MG-50 MG-300 MG-40 UNIT-600 MCG-18 MG	P	
PRENATE ELITE 75 MG-21 MG-330 MCG-400 MCG-600 UNIT-13 MCG-3.5 MG-21 MG-3 MG-155 MG-25 MG-15 MG-1.5 MG-2600 UNIT-150 MCG-40 UNIT-600 MCG-20 MG	P	
PRENATE ENHANCE	P	
PRENATE ESSENTIAL 90 MG-26 MG-280 MCG-400 MCG-220 UNIT-13 MCG-155 MG-50 MG-300 MG-150 MCG-10 UNIT-40 MG-600 MCG-18 MG	P	
PRENATE MINI 60 MG-26 MG-280 MCG-400 MCG-1000 UNIT-13 MCG-80 MG-25 MG-350 MG-18 MG-150 MCG-10 UNIT-600 MCG-25 MG	P	
PRENATE PIXIE	P	
PRENATE RESTORE	P	
PRENOVA TABS 0.8 MG	P	QL(1 EA daily); RX/OTC
PRIMACARE	P	
PROVIDA OB	P	
QC PRENATAL TABS	P	QL(1 EA daily)
SELECT-OB+DHA MISC	P	
SELECT-OB CHEW	P	
SM PRENATAL VITAMINS TABS	P	QL(1 EA daily)
TARON-C DHA	P	
THRIVITE RX TABS	P	RX/OTC
TRICARE TABS	P	RX/OTC
TRINATAL RX 1 TABS	P	
TRISTART DHA	P	
VITAFOL FE+	P	
VITAFOL GUMMIES	P	
VITAFOL ULTRA	P	
VITAFOL-OB+DHA MISC	P	
VITAFOL-OB TABS	P	
VITAFOL-ONE CAPS	P	
WESCAP-C DHA	P	
WESCAP-PN DHA	P	
WESNATAL DHA COMPLETE	P	
WESNATE DHA CAPS	P	
WESTAB PLUS TABS	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
WESTGEL DHA	P	
Vitamins w/ Lipotropics		
vitamins w/ lipotropics CAPS	P	QL(1 EA daily)
MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms		
Central Muscle Relaxants		
AMRIX CP24 *(Use cyclobenzaprine hcl)*	NP	
ATMEKSI SUSP PO 750 MG/5ML	NP	AL(At least 16 yrs old)
BACLOFEN REFILL KIT-SYNCHROMED KIT IT 40 MG/20ML	NP	
baclofen SOLN PO 5 MG/5ML, 10 MG/5ML	NP	
baclofen SUSP	NP	
baclofen TABS	P	
carisoprodol TABS 350 MG	P	
carisoprodol TABS 250 MG	NP	
chlorzoxazone TABS 500 MG	P	
chlorzoxazone TABS 250 MG, 375 MG, 750 MG	NP	
cyclobenzaprine hcl CP24	P	
cyclobenzaprine hcl TABS 7.5 MG	NP	
cyclobenzaprine hcl TABS	P	
FLEQSUVY SUSP *(Use baclofen)*	NP	
LYVISPAH PACK 5 MG, 10 MG	NP	
metaxalone	NP	
methocarbamol TABS 500 MG, 750 MG	P	
ONTRALFY SOLN PO 2 MG/5ML	NP	
orphenadrine citrate TB12	P	

Drug Name	Drug Tier	Requirements/ Limits
OZOBAX DS SOLN PO *(Use baclofen)*	NP	
SOMA TABS *(Use carisoprodol)*	NP	
tizanidine hcl CAPS	P	
tizanidine hcl TABS	P	
ZANAFLEX CAPS *(Use tizanidine hcl)*	NP	
ZANAFLEX TABS 4 MG *(Use tizanidine hcl)*	NP	
Direct Muscle Relaxants		
DANTRIUM CAPS 25 MG *(Use dantrolene sodium)*	NP	
dantrolene sodium CAPS	P	
NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus		
Nasal Agent Combinations		
azelastine hcl-fluticasone propionate SUSP	P	
DYMISTA SUSP *(Use azelastine hcl-fluticasone propionate)*	P	
RYALTRIS	NP	
Nasal Agents - Misc.		
saline SOLN 0.65 %	P	QL(90 ML per fill retail; 90 per fill mail)
Nasal Antiallergy		
azelastine hcl 0.1 %, 137 MCG/SPRAY	P	
cromolyn sodium (nasal) 5.2 MG/ACT	P	QL(26 ML per fill retail; 26 per fill mail)
olopatadine hcl (nasal)	P	
Nasal Steroids		
budesonide (nasal)	NP	
flunisolide (nasal)	NP	
fluticasone propionate (nasal) SUSP	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
fluticasone propionate (nasal) SUSP	NP	RX/OTC
mometasone furoate (nasal) SUSP	NP	RX/OTC
OMNARIS SUSP	NP	
QNASL	NP	
QNASL CHILDRENS	NP	
triamcinolone acetonide (nasal) AERO	P	
XHANCE EXHU	NP	
Sympathomimetic Decongestants		
ADRENALIN 0.1 %	P	
epinephrine hcl (nasal)	P	
phenylephrine hcl (oral) TABS	P	QL(24 EA per fill retail; 24 per fill mail)
pseudoephedrine hcl TABS	P	
pseudoephedrine hcl TB12	P	QL(2 EA daily)
SUDAFED CHILDRENS LIQD	P	
NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles		
ALS Agents		
QALSODY	PA	AL(At least 18 yrs old); SP; PA
Friedrich's Ataxia Agents		
SKYCLARYS	PA	QL(3 EA daily); AL(At least 16 yrs old); SP; PA
Muscular Dystrophy Agents		
AMONDYS 45	PA	SP; PA
DUVYZAT	PA	AL(At least 6 yrs old); SP; PA
ELEVIDYS 10.0-10.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 10.5-11.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 11.5-12.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 12.5-13.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 13.5-14.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 14.5-15.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 15.5-16.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 16.5-17.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 17.5-18.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 18.5-19.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 19.5-20.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 20.5-21.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 21.5-22.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 22.5-23.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 23.5-24.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 24.5-25.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 25.5-26.4 KG	PA	AL(At least 4 yrs old); SP; PA

Drug Name	Drug Tier	Requirements/ Limits
ELEVIDYS 26.5-27.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 27.5-28.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 28.5-29.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 29.5-30.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 30.5-31.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 31.5-32.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 32.5-33.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 33.5-34.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 34.5-35.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 35.5-36.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 36.5-37.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 37.5-38.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 38.5-39.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 39.5-40.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 40.5-41.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 41.5-42.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 42.5-43.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 43.5-44.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 44.5-45.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 45.5-46.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 46.5-47.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 47.5-48.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 48.5-49.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 49.5-50.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 50.5-51.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 51.5-52.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 52.5-53.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 53.5-54.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 54.5-55.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 55.5-56.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 56.5-57.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 57.5-58.4 KG	PA	AL(At least 4 yrs old); SP; PA

Drug Name	Drug Tier	Requirements/ Limits
ELEVIDYS 58.5-59.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 59.5-60.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 60.5-61.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 61.5-62.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 62.5-63.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 63.5-64.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 64.5-65.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 65.5-66.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 66.5-67.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 67.5-68.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 68.5-69.4 KG	PA	AL(At least 4 yrs old); SP; PA
ELEVIDYS 69.5 KG PLUS	PA	AL(At least 4 yrs old); SP; PA
EXONDYS 51	PA	SP; PA
VILTEPSO	PA	SP; PA
VYONDYS 53	PA	SP; PA
Neuromuscular Blocking Agent - Neurotoxins		
BOTOX IJ	PA	Maximum 180 day supply allowed; QL(4 EA per 84 day(s) retail; 4 EA per 84 days mail); SP; PA
DYSPORT	PA	Maximum 180 day supply allowed; QL(4 EA per 84 day(s) retail; 4 EA per 84 days mail); SP; PA
MYOBLOC	PA	Maximum 180 day supply allowed; QL(4 ML per 84 day(s) retail; 4 ML per 84 days mail); SP; PA
XEOMIN	PA	Maximum 180 day supply allowed; QL(4 EA per 84 day(s) retail; 4 EA per 84 days mail); SP; PA
Rett Syndrome Agents		
DAYBUE	PA	QL(120 ML daily); AL(At least 2 yrs old); SP; PA
DAYBUE STIX PO 5000 MG, 6000 MG, 8000 MG	PA	AL(At least 2 yrs old); SP; PA
Spinal Muscular Atrophy Agents (SMA)		
EVRYSDI	PA	SP; PA
EVRYSDI PO 5 MG	PA	SP; PA
ITVISMA SUSP IT	PA	QL(1 EA per 999 day(s) retail; 1 EA per 999 days mail); AL(At least 2 yrs old); SP; PA
SPINRAZA	PA	SP; PA
ZOLGENSMA 20.6-21.0 KG	CO	
ZOLGENSMA 10.1-10.5 KG	CO	
ZOLGENSMA 10.6-11.0 KG	CO	

Drug Name	Drug Tier	Requirements/ Limits
ZOLGENSMA 11.1-11.5 KG	CO	
ZOLGENSMA 11.6-12.0 KG	CO	
ZOLGENSMA 12.1-12.5 KG	CO	
ZOLGENSMA 12.6-13.0 KG	CO	
ZOLGENSMA 13.1-13.5 KG	CO	
ZOLGENSMA 13.6-14.0 KG	CO	
ZOLGENSMA 14.1-14.5 KG	CO	
ZOLGENSMA 14.6-15.0 KG	CO	
ZOLGENSMA 15.1-15.5 KG	CO	
ZOLGENSMA 15.6-16.0 KG	CO	
ZOLGENSMA 16.1-16.5 KG	CO	
ZOLGENSMA 16.6-17.0 KG	CO	
ZOLGENSMA 17.1-17.5 KG	CO	
ZOLGENSMA 17.6-18.0 KG	CO	
ZOLGENSMA 18.1-18.5 KG	CO	
ZOLGENSMA 18.6-19.0 KG	CO	
ZOLGENSMA 19.1-19.5 KG	CO	
ZOLGENSMA 19.6-20.0 KG	CO	
ZOLGENSMA 2.6-3.0 KG	CO	
ZOLGENSMA 20.1-20.5 KG	CO	
ZOLGENSMA 3.1-3.5 KG	CO	
ZOLGENSMA 3.6-4.0 KG	CO	
ZOLGENSMA 4.1-4.5 KG	CO	
ZOLGENSMA 4.6-5.0 KG	CO	
ZOLGENSMA 5.1-5.5 KG	CO	
ZOLGENSMA 5.6-6.0 KG	CO	
ZOLGENSMA 6.1-6.5 KG	CO	
ZOLGENSMA 6.6-7.0 KG	CO	
ZOLGENSMA 7.1-7.5 KG	CO	
ZOLGENSMA 7.6-8.0 KG	CO	
ZOLGENSMA 8.1-8.5 KG	CO	
ZOLGENSMA 8.6-9.0 KG	CO	
ZOLGENSMA 9.1-9.5 KG	CO	
ZOLGENSMA 9.6-10.0 KG	CO	
NUTRIENTS		
Misc. Nutritional Substances		
omega-3 fatty acids CAPS 1000 MG, 1200 MG	P	QL(6 EA daily)
Proteins		
ARGININE TABS	P	
L-TRYPTOPHAN TABS	P	
OPHTHALMIC AGENTS - Drugs to Treat the Eye		
Artificial Tears and Lubricants		
ALCON TEARS SOLN	P	
artificial tear solution	P	
carboxymethylcellulose sodium (ophth) GEL	P	
carboxymethylcellulose sodium (ophth) SOLN 0.5 %	P	
dextran 70-hypromellose 0.3 %-0.1 %	NP	
dextran 70-hypromellose 0.3 %-0.1 %	P	
polyethylene glycol-propylene glycol (ophth) SOLN 0.3 %-0.4 %	NP	
polyethylene glycol-propylene glycol (ophth) SOLN 0.3 %-0.4 %	P	
polyvinyl alcohol 1.4 %	P	

Drug Name	Drug Tier	Requirements/ Limits
polyvinyl alcohol-povidone (ophth) 0.5 %-0.6 %	P	
polyvinyl alcohol-povidone (ophth)	NP	
REFRESH	P	
white petrolatum-mineral oil	P	
Beta-blockers - Ophthalmic		
betaxolol hcl (ophth) SOLN	P	
BETIMOL	NP	
BETIMOL *(Use timolol)*	NP	
BETOPTIC-S SUSP	P	
brimonidine tartrate-timolol maleate	NP	
carteolol hcl (ophth)	P	
COMBIGAN *(Use brimonidine tartrate-timolol maleate)*	P	
COSOPT *(Use dorzolamide hcl-timolol maleate)*	NP	
COSOPT PF *(Use dorzolamide hcl-timolol maleate)*	NP	
dorzolamide hcl-timolol maleate	NP	
dorzolamide hcl-timolol maleate	P	
ISTALOL SOLN *(Use timolol maleate (ophth))*	NP	
levobunolol hcl 0.5 %	P	
timolol	NP	
timolol maleate (ophth) SOLG	P	
timolol maleate (ophth) SOLN	NP	
timolol maleate (ophth) SOLN	P	

Drug Name	Drug Tier	Requirements/ Limits
TIMOPTIC OCUDOSE SOLN *(Use timolol maleate (ophth))*	NP	
Cholinergic Agonists		
TYRVAYA	NP	
Cycloplegic Mydriatics		
atropine sulfate (ophthalmic) OINT	P	QL(4 GM per fill retail; 4 per fill mail)
atropine sulfate (ophthalmic) SOLN	P	QL(15 ML per fill retail; 15 per fill mail)
ATROPINE SULFATE SOLN 1 %	P	QL(15 EA per fill retail; 15 per fill mail)
CYCLOGYL 0.5 %	P	QL(15 ML per fill retail; 15 per fill mail)
CYCLOGYL 2 %	P	
cyclopentolate hcl 1 %	P	QL(15 ML per fill retail; 15 per fill mail)
phenylephrine hcl (mydriatic) SOLN 2.5 %	P	QL(15 ML per fill retail; 15 per fill mail)
tropicamide SOLN	P	QL(15 ML per fill retail; 15 per fill mail)
Miotics		
pilocarpine hcl SOLN 1.25 %	PA	PA
pilocarpine hcl SOLN 1 %, 2 %, 4 %	P	
VUITY SOLN 1.25 % *(Use pilocarpine hcl)*	PA	PA
Ophthalmic Adrenergic Agents		
ALPHAGAN P *(Use brimonidine tartrate)*	P	
apraclonidine hcl	NP	
brimonidine tartrate	NP	
IOPIDINE	NP	
SIMBRINZA	P	

Drug Name	Drug Tier	Requirements/ Limits
Ophthalmic Anti-infectives		
AZASITE	NP	
bacitracin-polymyxin b (ophth)	P	QL(4 GM per fill retail; 4 per fill mail)
besifloxacin hcl 0.6 %	NP	
BESIVANCE 0.6 % *(Use besifloxacin hcl)*	P	
CILOXAN OINT	NP	
ciprofloxacin hcl (ophth) SOLN	P	
erythromycin (ophth)	P	
gatifloxacin (ophth)	NP	
gentamicin sulfate (ophth) SOLN	P	QL(15 ML per fill retail; 15 per fill mail)
levofloxacin (ophth) 0.5 %	NP	
moxifloxacin hcl (ophth) SOLN OP	NP	
moxifloxacin hcl (ophth) SOLN OP	P	QL(15 ML per fill retail; 15 per fill mail)
neomycin-bacitracin zn-polymyxin	P	QL(4 GM per fill retail; 4 per fill mail)
neomycin-polymyxin-gramicidin	P	QL(10 ML per fill retail; 10 per fill mail)
OCUFLOX *(Use ofloxacin (ophth))*	NP	
ofloxacin (ophth)	P	
polymyxin b-trimethoprim	P	QL(10 ML per fill retail; 10 per fill mail)
sulfacetamide sodium (ophth) OINT	P	
sulfacetamide sodium (ophth) SOLN	P	QL(15 ML per fill retail; 15 per fill mail)
tobramycin (ophth) SOLN	P	QL(5 ML per fill retail; 5 per fill mail)
TOBREX OINT	P	QL(4 GM per fill retail; 4 per fill mail)
trifluridine	P	QL(8 ML per fill retail; 8 per fill mail)
VIGAMOX SOLN OP *(Use moxifloxacin hcl (ophth))*	NP	QL(15 ML per fill retail; 15 per fill mail)
Ophthalmic Decongestants		
tetrahydrozoline hcl (ophth) 0.05 %	P	QL(0.5 ML daily)
Ophthalmic Immunomodulators		
CEQUA SOLN	NP	
cyclosporine (ophth) EMUL	NP	
RESTASIS MULTIDOSE EMUL	NP	
RESTASIS EMUL *(Use cyclosporine (ophth))*	P	
VERKAZIA EMUL	PA	QL(4 EA daily); AL(At least 4 yrs old); PA
VEVYE SOLN	NP	
Ophthalmic Integrin Antagonists		
XIIDRA	P	
Ophthalmic Kinase Inhibitors		
RHOPRESSA	P	
ROCKLATAN	P	
Ophthalmic Local Anesthetics		
TETRACAINE HCL 0.5 %	P	
tetracaine hcl (ophth)	P	
Ophthalmic Nerve Growth Factors		

Drug Name	Drug Tier	Requirements/ Limits
OXERVATE	PA	Maximum 56 day supply allowed; QL(1 ML daily; 112 ML per 999 day(s) retail; 112 ML per 999 days mail); AL(At least 2 yrs old); SP; PA
Ophthalmic Steroids		
ALREX SUSP *(Use loteprednol etabonate)*	P	
bacitracin-poly-neomycin-hc	NP	
BYQLOVI 0.05 %	NP	
dexamethasone sodium phosphate (ophth)	NP	
DEXTENZA INST	NP	SP
difluprednate	P	
DUREZOL *(Use difluprednate)*	NP	
EYSUVIS SUSP	P	QL(8.3 ML per fill retail; 8.3 per fill mail)
FLAREX	P	
fluorometholone (ophth) SUSP	NP	
FML FORTE SUSP	P	
FML LIQUIFILM SUSP *(Use fluorometholone (ophth))*	P	
ILUVIEN	NP	SP
LOTEMAX SM GEL	NP	
LOTEMAX GEL *(Use loteprednol etabonate)*	NP	
LOTEMAX OINT	NP	
LOTEMAX SUSP *(Use loteprednol etabonate)*	NP	
loteprednol etabonate-tobramycin	NP	

Drug Name	Drug Tier	Requirements/ Limits
loteprednol etabonate GEL	NP	
loteprednol etabonate SUSP	NP	
MAXIDEX SUSP OP	P	
MAXITROL OINT *(Use neomycin-polymy-dexameth)*	NP	QL(17.5 GM per fill retail; 17.5 per fill mail)
MAXITROL SUSP *(Use neomycin-polymy-dexameth)*	NP	
neomycin-polymy-dexameth OINT	P	QL(17.5 GM per fill retail; 17.5 per fill mail)
neomycin-polymy-dexameth SUSP 0.1 %-3.5 MG/ML-10000 UNIT/ML, 0.1 %	P	
neomycin-polymyxin-hc (ophth)	NP	
PRED FORTE *(Use prednisolone acetate (ophth))*	P	
PRED MILD	NP	
prednisolone acetate (ophth)	P	
PREDNISOLONE SODIUM PHOSPHATE	NP	
RETISERT	NP	SP
sulfacetamide sod-prednisolone SOLN	P	
TOBRADEX ST SUSP	NP	
TOBRADEX OINT	P	
tobramycin-dexamethasone SUSP	P	
TRIESENCE	NP	SP
XIPERE	NP	SP
ZYLET 0.3 %-0.5 % *(Use loteprednol etabonate-tobramycin)*	NP	
Ophthalmics - Misc.		

Drug Name	Drug Tier	Requirements/ Limits
ACULAR *(Use ketorolac tromethamine (ophth))*	NP	
ACULAR LS *(Use ketorolac tromethamine (ophth))*	NP	
ACUVAIL	NP	
ALOCRIL	P	QL(5 ML per fill retail; 5 per fill mail)
azelastine hcl (ophth)	P	
AZOPT *(Use brinzolamide)*	P	
bepotastine besilate	NP	
BEPREVE *(Use bepotastine besilate)*	P	
brinzolamide	NP	
bromfenac sodium (ophth)	NP	
BROMSITE *(Use bromfenac sodium (ophth))*	NP	
cromolyn sodium (ophth)	NP	
diclofenac sodium (ophth)	P	
dorzolamide hcl	P	
epinastine hcl (ophth)	NP	
flurbiprofen sodium	P	
ILEVRO	P	
ketorolac tromethamine (ophth)	P	
ketotifen fumarate (ophth) 0.035 %	P	
ketotifen fumarate (ophth) 0.035 %	NP	
LASTACAFT	NP	
MIEBO	NP	
NEVANAC	P	
olopatadine hcl	P	RX/OTC
olopatadine hcl	NP	
PROLENSA *(Use bromfenac sodium (ophth))*	NP	

Drug Name	Drug Tier	Requirements/ Limits
TRYPTYR SOLN OP 0.003 %	NP	AL(At least 18 yrs old)
ZERVIATE	NP	
Prostaglandins - Ophthalmic		
bimatoprost SOLN	NP	
DURYSTA IMPL	NP	
IDOSE TR IMPL	NP	
IYUZEH SOLN	NP	
latanoprost SOLN	P	
LUMIGAN SOLN 0.01 % *(Use bimatoprost)*	P	
tafluprost	NP	
TRAVATAN Z SOLN *(Use travoprost)*	P	
travoprost SOLN	NP	
VYZULTA	NP	
XALATAN SOLN *(Use latanoprost)*	NP	
ZIOPTAN *(Use tafluprost)*	NP	
ZOLYMBUS GEL OP 0.01 %	NP	
OTIC AGENTS - Drugs to Treat the Ear		
Otic Agents - Miscellaneous		
acetic acid (otic)	P	QL(15 ML per fill retail; 15 per fill mail)
carbamide peroxide (otic) 6.5 %	P	QL(0.5 ML daily)
Otic Anti-infectives		
ciprofloxacin hcl (otic)	NP	
ofloxacin (otic)	P	
Otic Combinations		
CIPRO HC 1 %-0.2 % *(Use ciprofloxacin-hydrocortisone)*	P	
ciprofloxacin-dexamethasone	P	

Drug Name	Drug Tier	Requirements/ Limits
ciprofloxacin-hydrocortisone	NP	
neomycin-polymyxin-hc (otic) SOLN	P	QL(10 ML per fill retail; 10 per fill mail)
neomycin-polymyxin-hc (otic) SUSP	P	QL(10 ML per fill retail; 10 per fill mail)
PRAMOTIC	P	
Otic Steroids		
fluocinolone acetonide (otic)	P	QL(0.67 ML daily)
hydrocortisone w/acetic acid	P	QL(10 ML per fill retail; 10 per fill mail)
OXYTOCICS - Drugs to Prevent/Control Uterine Bleeding		
Oxytocics		
methylergonovine maleate TABS	P	
PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System		
Immune Serums		
ALYGLO	NP	SP
ASCENIV	NP	
BIVIGAM SOLN	NP	SP
CUTAQUIG	NP	SP
CUVITRU SOLN	NP	SP
CYTOGAM SOLN	NP	SP
GAMASTAN IM	NP	SP
GAMMAGARD 5 GM/50ML	P	QL(250 ML per fill retail; 250 per fill mail); SP
GAMMAGARD 1 GM/10ML, 2.5 GM/25ML, 10 GM/100ML, 20 GM/200ML, 30 GM/300ML	P	SP
GAMMAGARD ERC 10 GM/100ML	NP	SP
GAMMAGARD ERC 5 GM/50ML	NP	QL(250 ML per fill retail; 250 per fill mail); SP
GAMMAGARD S/D LESS IGA SOLR	NP	SP
GAMMAKED 1 GM/10ML, 10 GM/100ML, 20 GM/200ML	NP	SP
GAMMAKED 5 GM/50ML	NP	QL(250 ML per fill retail; 250 per fill mail); SP
GAMMAPLEX SOLN	NP	SP
GAMUNEX-C 5 GM/50ML	P	QL(250 ML per fill retail; 250 per fill mail); SP
GAMUNEX-C 1 GM/10ML, 2.5 GM/25ML, 10 GM/100ML, 20 GM/200ML, 40 GM/400ML	P	SP
HEPAGAM B SOLN IJ	NP	SP
HIZENTRA SOLN	P	SP
HIZENTRA SOSY	P	SP
HYPERHEP B SOLN IM	NP	SP
HYPERHEP B SOSY 110 UNIT/0.5ML	NP	SP
HYPERRAB SOLN	NP	
KEDRAB SOLN	NP	
NABI-HB SOLN IM	NP	SP
OCTAGAM SOLN	NP	SP
PANZYGA	NP	SP
PRIVIGEN SOLN	P	SP
QIVIGY SOLN IV 5 GM/50ML, 10 GM/100ML	NP	SP
VARIZIG SOLN	NP	
XEMBIFY	NP	SP
Passive Immunizing Agents - Combinations		
HYQVIA	NP	SP
PENICILLINS - Drugs to Treat Bacterial Infections		
Amidinopenicillins		

Drug Name	Drug Tier	Requirements/ Limits
PIVYA TABS PO 185 MG	PA	QL(3 EA daily); AL(At least 18 yrs old); PA
Aminopenicillins		
amoxicillin CAPS	P	
amoxicillin CHEW 125 MG, 250 MG	P	
amoxicillin SUSR	P	
amoxicillin TABS 875 MG	P	
ampicillin CAPS 500 MG	P	
Natural Penicillins		
penicillin v potassium SOLR	P	
penicillin v potassium TABS	P	
Penicillin Combinations		
amoxicillin & pot clavulanate CHEW 57 MG-400 MG	P	QL(20 EA per fill retail; 20 per fill mail)
amoxicillin & pot clavulanate SUSR 28.5 MG/5ML-200 MG/5ML	P	QL(100 ML per fill retail; 100 per fill mail)
amoxicillin & pot clavulanate SUSR 42.9 MG/5ML-600 MG/5ML	P	QL(400 ML per fill retail; 400 per fill mail)
amoxicillin & pot clavulanate SUSR 62.5 MG/5ML-250 MG/5ML	P	QL(150 ML per fill retail; 150 per fill mail)
amoxicillin & pot clavulanate SUSR 57 MG/5ML-400 MG/5ML	P	
amoxicillin & pot clavulanate TABS 125 MG-250 MG	P	QL(30 EA per fill retail; 30 per fill mail)
amoxicillin & pot clavulanate TABS 125 MG-500 MG, 125 MG-875 MG	P	QL(20 EA per fill retail; 20 per fill mail)
amoxicillin & pot clavulanate TB12	P	QL(1.34 EA daily)
AMOXICILLIN-POT CLAVULANATE CHEW	P	QL(20 EA per fill retail; 20 per fill mail)
AUGMENTIN SUSR 31.25 MG/5ML-125 MG/5ML	P	
Penicillinase-Resistant Penicillins		
dicloxacillin sodium	P	
PROGESTINS - Hormone Replacement/Modifying Drugs		
Progestins		
medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG	P	
megestrol acetate (appetite)	NP	
norethindrone acetate TABS	P	
progesterone CAPS	P	QL(1 EA daily)
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions		
Agents for Chemical Dependency		
disulfiram 250 MG	P	
lofexidine hcl	NP	QL(16 EA daily)
LUCEMYRA *(Use lofexidine hcl)*	NP	QL(16 EA daily)
Anti-Cataplectic Agents		
sodium oxybate SOLN	NP	QL(18 ML daily); AL(At least 7 yrs old); SP
XYREM SOLN *(Use sodium oxybate)*	NP	QL(18 ML daily); AL(At least 7 yrs old); SP
XYWAV	NP	AL(At least 7 yrs old); SP
Antidementia Agents		

Drug Name	Drug Tier	Requirements/ Limits
ARICEPT TABS *(Use donepezil hydrochloride)*	NP	
donepezil hydrochloride TABS	P	
donepezil hydrochloride TBDP	P	
EXELON *(Use rivastigmine)*	NP	
galantamine hydrobromide CP24	NP	
galantamine hydrobromide SOLN	NP	
galantamine hydrobromide TABS	NP	
KISUNLA	PA	SP; PA
LEQEMBI	PA	SP; PA
LEQEMBI IQLIK SC 360 MG/1.8ML	PA	SP; PA
LEQEMBI IQLIK (500 MG DOSE) SC	PA	SP; PA
memantine hcl-donepezil hcl CP24	NP	
memantine hcl CP24	NP	
memantine hcl SOLN	NP	
memantine hcl TABS	P	
NAMZARIC CP24 *(Use memantine hcl-donepezil hcl)*	NP	
NAMZARIC CP24	NP	
rivastigmine	P	
rivastigmine tartrate CAPS	P	
ZUNVEYL TBEC PO 5 MG, 10 MG, 15 MG	NP	
Combination Psychotherapeutics		
LYBALVI	NP	QL(1 EA daily; 30 EA per 30 day(s) retail; 30 EA per 30 days mail); AL(At least 18 yrs old)
olanzapine-fluoxetine hcl	NP	AL(At least 18 yrs old)
perphenazine-amitriptyline	P	QL(4 EA daily)
Fibromyalgia Agents		
milnacipran hcl MISC	NP	
milnacipran hcl TABS 12.5 MG, 25 MG, 50 MG, 100 MG	NP	
SAVELLA TITRATION PACK MISC *(Use milnacipran hcl)*	PA	PA
SAVELLA TABS 12.5 MG, 25 MG, 50 MG, 100 MG *(Use milnacipran hcl)*	PA	PA
TONMYA SUBL SL 2.8 MG	PA	QL(2 EA daily); AL(At least 18 yrs old); PA
Movement Disorder Drug Therapy		
AUSTEDO XR PATIENT TITRATION TEPK	PA	AL(At least 18 yrs old); SP; PA
AUSTEDO XR TB24	PA	AL(At least 18 yrs old); SP; PA
AUSTEDO TABS	PA	AL(At least 18 yrs old); SP; PA
INGREZZA CAPS	PA	AL(At least 18 yrs old); SP; PA
INGREZZA CPPK	PA	AL(At least 18 yrs old); SP; PA
INGREZZA CPSP	PA	AL(At least 18 yrs old); SP; PA
tetrabenazine	P	SP
XENAZINE *(Use tetrabenazine)*	NP	SP
Multiple Sclerosis Agents		
AMPYRA *(Use dalfampridine)*	NP	QL(2 EA daily); SP
AUBAGIO *(Use teriflunomide)*	NP	SP

Drug Name	Drug Tier	Requirements/ Limits
AVONEX PEN AJKT	PA	QL(6 EA per fill retail; 6 per fill mail); SP; PA
AVONEX PREFILLED PSKT	PA	QL(6 EA per fill retail; 6 per fill mail); SP; PA
BAFIERTAM	NP	SP
BETASERON KIT	PA	QL(14 EA per fill retail; 14 per fill mail); SP; PA
BETASERON KIT	PA	QL(6 EA per fill retail; 6 per fill mail); SP; PA
BRIUMVI	NP	SP
cladribine (multiple sclerosis) 10 MG	NP	SP
COPAXONE SOSY 20 MG/ML *(Use glatiramer acetate)*	PA	QL(1 ML daily); SP; PA
COPAXONE SOSY 40 MG/ML *(Use glatiramer acetate)*	NP	QL(0.4 ML daily; 12 ML per fill retail; 12 per fill mail); SP
dalfampridine	PA	QL(2 EA daily); SP; PA
dimethyl fumarate CDPK	PA	SP; PA
dimethyl fumarate CPDR	PA	SP; PA
fingolimod hcl	PA	SP; PA
fingolimod hcl	PA	PA
GILENYA	NP	SP
GILENYA *(Use fingolimod hcl)*	NP	SP
glatiramer acetate SOSY 40 MG/ML	PA	QL(0.4 ML daily; 12 ML per fill retail; 12 per fill mail); SP; PA
glatiramer acetate SOSY 20 MG/ML	NP	QL(1 ML daily); SP
glatiramer acetate SOSY 40 MG/ML	NP	QL(0.4 ML daily; 12 ML per fill retail; 12 per fill mail); SP
KESIMPTA	NP	SP
LEMTRADA	NP	SP
MAVENCLAD (10 TABS) 10 MG *(Use cladribine (multiple sclerosis))*	NP	SP
MAVENCLAD (4 TABS) 10 MG *(Use cladribine (multiple sclerosis))*	NP	SP
MAVENCLAD (5 TABS) 10 MG *(Use cladribine (multiple sclerosis))*	NP	SP
MAVENCLAD (6 TABS) 10 MG *(Use cladribine (multiple sclerosis))*	NP	SP
MAVENCLAD (7 TABS) 10 MG *(Use cladribine (multiple sclerosis))*	NP	SP
MAVENCLAD (8 TABS) 10 MG *(Use cladribine (multiple sclerosis))*	NP	SP
MAVENCLAD (9 TABS) 10 MG *(Use cladribine (multiple sclerosis))*	NP	SP
MAYZENT STARTER PACK TBPK 0.25 MG	NP	SP
MAYZENT TABS	NP	SP
OCREVUS	NP	SP
OCREVUS ZUNOVO	NP	AL(At least 18 yrs old); SP
PLEGRIDY STARTER PACK SOAJ	NP	SP
PLEGRIDY STARTER PACK SOSY SC	NP	SP
PLEGRIDY SOAJ	NP	SP
PLEGRIDY SOSY IM	NP	SP
PONVORY STARTER PACK TBPK	NP	SP
PONVORY TABS	NP	SP
REBIF REBIDOSE TITRATION PACK SOAJ	NP	QL(25.2 ML per fill retail; 25.2 per fill mail); SP
REBIF REBIDOSE SOAJ	NP	QL(6 ML per fill retail; 6 per fill mail); SP

Drug Name	Drug Tier	Requirements/ Limits
REBIF TITRATION PACK SOSY	NP	QL(25.2 ML per fill retail; 25.2 per fill mail); SP
REBIF SOSY	NP	QL(6 ML per fill retail; 6 per fill mail); SP
TASCENSO ODT	NP	SP
TECFIDERA CDPK *(Use dimethyl fumarate)*	NP	SP
TECFIDERA CPDR *(Use dimethyl fumarate)*	NP	SP
teriflunomide	PA	SP; PA
TYRUKO CONC IV 300 MG/15ML	NP	SP
TYSABRI	PA	SP; PA
VUMERITY	NP	SP
ZEPOSIA 7-DAY STARTER PACK CPPK	NP	SP
ZEPOSIA STARTER KIT CPPK	NP	SP
ZEPOSIA CAPS	NP	SP
Postherpetic Neuralgia (PHN)/Neuropathic Pain Agents		
gabapentin (once-daily) TABS	NP	
GRALISE TABS *(Use gabapentin (once-daily))*	NP	
LYRICA CR *(Use pregabalin (once-daily))*	NP	
pregabalin (once-daily)	NP	
Premenstrual Dysphoric Disorder (PMDD) Agents		
fluoxetine hcl (pmdd) TABS	P	AL(At least 18 yrs old)
Psychotherapeutic and Neurological Agents - Misc.		
AQNEURSA	PA	QL(4 EA daily); SP; PA
ergoloid mesylates TABS	P	

Drug Name	Drug Tier	Requirements/ Limits
MIPLYFFA	PA	QL(3 EA daily); AL(At least 2 yrs old); SP; PA
Restless Leg Syndrome (RLS) Agents		
HORIZANT	NP	
Smoking Deterrents		
bupropion hcl (smoking deterrent)	P	QL(2 EA daily)
nicotine polacrilex GUM	P	
nicotine polacrilex LOZG	P	
NICOTINE KIT	P	
nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR	P	
NICOTROL NS SOLN	P	
NICOTROL INHA	P	
varenicline tartrate TABS	P	QL(2 EA daily)
varenicline tartrate TBPK	P	
Transthyretin Amyloidosis Agents		
AMVUTTRA	PA	QL(0.5 ML per 90 day(s) retail); AL(At least 18 yrs old); SP; PA
ONPATTRO	PA	AL(At least 18 yrs old); SP; PA
WAINUA	PA	QL(0.8 ML per 30 day(s) retail; 1 ML per 30 days mail); AL(At least 18 yrs old); SP; PA
WAINUA SC 45 MG/0.8ML	PA	QL(0.8 ML per 30 day(s) retail; 1 ML per 30 days mail); AL(At least 18 yrs old); SP; PA
Vasomotor Symptom Agents		

Drug Name	Drug Tier	Requirements/ Limits
paroxetine mesylate (vasomotor)	P	AL(At least 18 yrs old)
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions		
Cystic Fibrosis Agents		
ALYFTREK	PA	AL(At least 6 yrs old); SP; PA
KALYDECO PACK	PA	QL(2 EA daily); SP; PA
KALYDECO TABS	PA	QL(2 EA daily); SP; PA
ORKAMBI PACK 125 MG-100 MG, 188 MG-150 MG	PA	QL(2 EA daily); AL(At least 1 yrs old - Up to 5 yrs old); SP; PA
ORKAMBI PACK 94 MG-75 MG	PA	QL(2 EA daily); AL(At least 1 yrs old - Up to 2 yrs old); SP; PA
ORKAMBI TABS	PA	QL(4 EA daily); AL(At least 6 yrs old); SP; PA
PULMOZYME	P	SP; PA
SYMDEKO	PA	AL(At least 6 yrs old); SP; PA
TRIKAFTA TBPK	PA	AL(At least 2 yrs old); SP; PA
TRIKAFTA THPK	PA	AL(At least 2 yrs old); SP; PA
Pulmonary Fibrosis Agents		
pirfenidone CAPS	P	SP; PA
pirfenidone TABS	P	SP; PA
TETRACYCLINES - Drugs to Treat Bacterial Infections		
Tetracyclines		
doxycycline (monohydrate) CAPS 50 MG, 100 MG	P	
doxycycline (monohydrate) TABS 50 MG, 100 MG	P	
doxycycline hyclate CAPS	P	
doxycycline hyclate TABS 100 MG	P	
minocycline hcl CAPS	P	
tetracycline hcl CAPS 500 MG	P	
THYROID AGENTS - Drugs to Regulate Thyroid Hormones		
Antithyroid Agents		
methimazole TABS	P	
propylthiouracil	P	
Thyroid Hormones		
ADTHYZA TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	P	
AMERITHROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG, 180 MG, 240 MG, 300 MG	P	
ARMOUR THYROID TABS	P	
EVEXITHROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG, 180 MG	P	
levothyroxine sodium TABS	P	
liothyronine sodium TABS	P	
NIVA THYROID TABS	P	
NP THYROID TABS	P	
RENTHYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	P	
THYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	P	

Drug Name	Drug Tier	Requirements/ Limits
TOXOIDS		
Toxoid Combinations		
ADACEL SUSP	P	
BOOSTRIX SUSP	P	
BOOSTRIX SUSY	P	
DAPTACEL	P	
INFANRIX	P	
KINRIX SUSY	P	
PEDIARIX SUSY	P	
PENTACEL	P	
QUADRACEL SUSP	P	
QUADRACEL SUSY	P	
TDVAX SUSP	P	
TETANUS-DIPHTHERIA TOXOIDS TD SUSP	P	
VAXELIS SUSP	P	
VAXELIS SUSY	P	
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions		
Antispasmodics		
dicyclomine hcl CAPS	P	
dicyclomine hcl SOLN PO	P	QL(40 ML daily)
dicyclomine hcl TABS	P	
glycopyrrolate TABS 1 MG, 2 MG	P	QL(4 EA daily)
hyoscyamine sulfate ELIX	P	
hyoscyamine sulfate SOLN PO 0.125 MG/ML	P	
hyoscyamine sulfate TB12 0.375 MG	P	QL(4 EA daily)
hyoscyamine sulfate TBDP 0.125 MG	P	
H-2 Antagonists		
cimetidine hcl PO 300 MG/5ML	NP	
cimetidine TABS	NP	RX/OTC
famotidine SOLN 20 MG/2ML	P	
FAMOTIDINE SOLN	P	
famotidine SUSR	P	
famotidine TABS 10 MG, 20 MG	NP	
famotidine TABS	P	RX/OTC
nizatidine CAPS	NP	
Misc. Anti-Ulcer		
sucralfate SUSP	P	QL(420 ML per fill retail; 420 per fill mail); AL(Up to 6 yrs old)
sucralfate TABS	P	QL(4 EA daily)
Proton Pump Inhibitors		
DEXILANT *(Use dexlansoprazole)*	NP	QL(1 EA daily)
dexlansoprazole	NP	QL(1 EA daily)
esomeprazole magnesium CPDR	NP	QL(1 EA daily); RX/OTC
esomeprazole magnesium PACK	NP	QL(1 EA daily)
lansoprazole CPDR	NP	QL(1 EA daily); RX/OTC
lansoprazole TBDD	NP	QL(1 EA daily); RX/OTC
NEXIUM CPDR *(Use esomeprazole magnesium)*	NP	QL(1 EA daily); RX/OTC
NEXIUM PACK *(Use esomeprazole magnesium)*	NP	QL(1 EA daily)
omeprazole magnesium CPDR	P	
omeprazole magnesium CPDR	P	QL(1 EA daily)
omeprazole magnesium TBEC	P	
omeprazole magnesium TBEC	P	QL(1 EA daily)
omeprazole CPDR	P	

Drug Name	Drug Tier	Requirements/ Limits
omeprazole CPDR	P	QL(1 EA daily)
omeprazole TBDD	P	
omeprazole TBEC	P	QL(1 EA daily)
omeprazole TBEC	P	
pantoprazole sodium PACK	NP	
pantoprazole sodium SOLR	P	
pantoprazole sodium SOLR	P	QL(1 EA daily)
PANTOPRAZOLE SODIUM SOLR 40 MG *(Use pantoprazole sodium)*	P	
pantoprazole sodium TBEC	P	
pantoprazole sodium TBEC 40 MG	P	QL(1 EA daily)
PREVACID 24HR CPDR *(Use lansoprazole)*	NP	QL(1 EA daily); RX/OTC
PREVACID SOLUTAB TBDD *(Use lansoprazole)*	NP	QL(1 EA daily); RX/OTC
PREVACID CPDR 30 MG *(Use lansoprazole)*	NP	QL(1 EA daily)
PRILOSEC PACK	NP	
PROTONIX PACK *(Use pantoprazole sodium)*	P	
PROTONIX SOLR *(Use pantoprazole sodium)*	NP	
PROTONIX TBEC *(Use pantoprazole sodium)*	NP	
rabeprazole sodium TBEC	NP	QL(1 EA daily)
Ulcer Drugs - Prostaglandins		
misoprostol	P	
Ulcer Therapy Combinations		
amoxicillin-clarithromycin w/ lansoprazole THPK	P	14 day(s) max supply per 365 day(s) retail
famotidine-calcium carbonate-magnesium hydroxide	NP	

Drug Name	Drug Tier	Requirements/ Limits
KONVOMEP SUSR	NP	
VOQUEZNA DUAL PAK	PA	QL(112 EA per fill retail; 112 per fill mail); AL(At least 18 yrs old); PA
VOQUEZNA TRIPLE PAK	PA	QL(112 EA per fill retail; 112 per fill mail); AL(At least 18 yrs old); PA
URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms		
Urinary Antispasmodic - Antimuscarinics (Anticholinergic)		
darifenacin hydrobromide	NP	
DETROL TABS *(Use tolterodine tartrate)*	P	
fesoterodine fumarate	P	
oxybutynin chloride SOLN	P	
oxybutynin chloride TABS 5 MG	P	
oxybutynin chloride TABS 2.5 MG	NP	
oxybutynin chloride TB24	P	
OXYTROL FOR WOMEN PTTW	NP	RX/OTC
OXYTROL PTTW	NP	RX/OTC
solifenacin succinate TABS	P	
tolterodine tartrate CP24	P	
tolterodine tartrate TABS	P	
TOVIAZ *(Use fesoterodine fumarate)*	NP	
trospium chloride CP24	NP	
trospium chloride TABS	NP	
Urinary Antispasmodics - Beta-3 Adrenergic Agonists		
GEMTESA	NP	

Drug Name	Drug Tier	Requirements/ Limits
mirabegron SRER 8 MG/ML	NP	
mirabegron TB24	NP	
MYRBETRIQ SRER 8 MG/ML *(Use mirabegron)*	NP	
MYRBETRIQ TB24 *(Use mirabegron)*	P	
Urinary Antispasmodics - Cholinergic Agonists		
bethanechol chloride	P	
Urinary Antispasmodics - Direct Muscle Relaxants		
flavoxate hcl	NP	
VACCINES		
Bacterial Vaccines		
ACTHIB SOLR IM	P	
BEXSERO 0.5 ML	P	
CAPVAXIVE	P	
HIBERIX SOLR IJ	P	
MENQUADFI 0.5 ML	P	
MENVEO SOLN	P	
MENVEO SOLR	P	
PEDVAXHIB SUSP 7.5 MCG/0.5ML	P	
PENBRAYA	P	
PENMENVY SUSR IM	P	AL(Up to 25 yrs old)
PNEUMOVAX 23 SOSY	P	
PREVNAR 20	P	
TRUMENBA 0.5 ML	P	
VAXNEUVANCE	P	
Viral Vaccines		
ABRYSVO	P	AL(At least 60 yrs old)
ACAM2000 SOLR IJ	P	
AFLURIA PRESERVATIVE FREE SUSY	P	

Drug Name	Drug Tier	Requirements/ Limits
AFLURIA QUADRIVALENT SUSY 0.5 ML	P	
AFLURIA SUSP	P	
AREXVY	P	AL(At least 60 yrs old)
AUDENZ EMUL	P	
AUDENZ PRSY	P	
COMIRNATY SUSY	P	
DENGVAXIA	P	
ENGERIX-B SUSP 20 MCG/ML	P	
ENGERIX-B SUSY	P	
FLUAD	P	
FLUAD QUADRIVALENT	P	
FLUARIX QUADRIVALENT SUSY	P	
FLUARIX SUSY	P	
FLUBLOK SOSY	P	
FLUCELVAX QUADRIVALENT SUSY	P	
FLUCELVAX SUSP	P	
FLUCELVAX SUSY	P	
FLULAVAL SUSY	P	
FLUMIST	P	
FLUZONE HIGH-DOSE QUADRIVALENT	P	
FLUZONE HIGH-DOSE SUSY	P	
FLUZONE QUADRIVALENT SUSY	P	
FLUZONE SUSP	P	
FLUZONE SUSY	P	
GARDASIL 9 SUSP 0.5 ML	P	AL(Up to 45 yrs old)
GARDASIL 9 SUSY 0.5 ML	P	AL(Up to 45 yrs old)
HAVRIX IM 720 EL U/0.5ML	P	
HEPLISAV-B SOSY	P	

Drug Name	Drug Tier	Requirements/ Limits
JYNNEOS	P	
M-M-R II SOLR	P	
MFLUSIVA SUSY IM 0.38 ML	P	
MNEXSPIKE SUSY 10 MCG/0.2ML	P	
MRESVIA	P	AL(At least 60 yrs old)
NOVAVAX COVID-19 VACCINE SUSY	P	
NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML	P	
PREHEVBRIO	P	
PRIORIX SUSR	P	
PROQUAD SUSR	P	
RECOMBIVAX HB SUSP	P	
RECOMBIVAX HB SUSY	P	
ROTARIX SUSP	P	
ROTATEQ SOLN	P	
SHINGRIX IM 50 MCG/0.5ML	P	AL(At least 50 yrs old)
SHINGRIX	P	AL(At least 50 yrs old)
SPIKEVAX SUSY	P	
TWINRIX SUSY	P	
VAQTA	P	
VARIVAX SUSR	P	
VAGINAL AND RELATED PRODUCTS		
Vaginal Anti-infectives		
CLEOCIN CREA *(Use clindamycin phosphate vaginal)*	P	
CLEOCIN SUPP	P	
clindamycin phosphate vaginal CREA	NP	
CLINDESSE	NP	
clotrimazole vaginal CREA 1 %	P	QL(45 GM per fill retail; 45 per fill mail)
clotrimazole vaginal CREA 2 %	P	QL(21 GM per fill retail; 21 per fill mail)
GYNAZOLE-1	P	
metronidazole vaginal	P	
MICONAZOLE 7 SUPP 100 MG	P	QL(7 EA per fill retail; 7 per fill mail)
miconazole nitrate vaginal CREA 2 %	P	QL(45 GM per fill retail; 45 per fill mail)
miconazole nitrate vaginal CREA 4 %	P	QL(1.5 GM daily)
miconazole nitrate vaginal KIT	P	QL(1 EA per fill retail; 1 per fill mail)
miconazole nitrate vaginal SUPP 100 MG	P	QL(7 EA per fill retail; 7 per fill mail)
miconazole nitrate vaginal SUPP 200 MG	P	QL(3 EA per fill retail; 3 per fill mail)
NUVESSA	P	
terconazole vaginal CREA 0.8 %	P	QL(20 GM per fill retail; 20 per fill mail)
terconazole vaginal CREA 0.4 %	P	QL(45 GM per fill retail; 45 per fill mail)
terconazole vaginal SUPP	P	QL(3 EA per fill retail; 3 per fill mail)
tioconazole vaginal 6.5 %	P	QL(5 GM per fill retail; 5 per fill mail)
VANDAZOLE	NP	
XACIATO GEL	NP	
Vaginal Anti-inflammatory Agents		
hydrocortisone vaginal	P	QL(60 GM per fill retail; 60 per fill mail)
MONISTAT CARE INSTANT ITCH RLF 1 %	P	QL(60 GM per fill retail; 60 per fill mail)
Vaginal Contraceptive - pH Modulators		
PHEXX	P	

Drug Name	Drug Tier	Requirements/ Limits
PHEXXI	P	
Vaginal Estrogens		
estradiol vaginal CREA	P	QL(1.5 GM daily)
estradiol vaginal TABS	P	
PREMARIN	P	QL(1.5 GM daily)
VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions		
Anaphylaxis Therapy Agents		
AUVI-Q SOAJ	NP	
epinephrine (anaphylaxis) SOAJ	P	
EPIPEN 2-PAK SOAJ *(Use epinephrine (anaphylaxis))*	P	
EPIPEN JR 2-PAK SOAJ *(Use epinephrine (anaphylaxis))*	P	
NEFFY SOLN NA	NP	
Vasopressors		
midodrine hcl	P	
VITAMINS		
Oil Soluble Vitamins		
cholecalciferol CAPS 125 MCG, 5000 UNIT, 125 MCG	P	QL(2 EA daily)
cholecalciferol CHEW 400 UNIT	P	
cholecalciferol LIQD PO	P	
cholecalciferol TABS 10 MCG, 1000 UNIT, 25 MCG, 400 UNIT, 25 MCG	P	
ergocalciferol CAPS	P	
ergocalciferol SOLN PO 200 MCG/ML	P	
phytonadione TABS 5 MG	P	
vitamin a CAPS 10000 UNIT, 3 MG, 3000 MCG, 10000 UNIT	P	
vitamin a TABS 10000 UNIT	P	
VITAMIN D3 LIQD PO 125 MCG/ML	P	
VITAMIN E/D-ALPHA CAPS 200 UNIT	P	QL(2 EA daily)
vitamin e CAPS	P	QL(2 EA daily)
VITAMIN E CAPS	P	QL(2 EA daily)
vitamin e SOLN 15 MG/0.67ML	P	
VITAMIN E SOLN 15 MG/0.67ML	P	
Water Soluble Vitamins		
ascorbic acid CHEW 500 MG	P	
ascorbic acid POWD PO 500 MG/GM	P	
ASCORBIC ACID POWD PO	P	
ascorbic acid TABS	P	QL(100 EA per 34 day(s) retail; 100 EA per 34 days mail)
biotin CAPS 5 MG, 5000 MCG	P	
NIACIN ER TBCR	P	
niacin TABS 50 MG, 100 MG, 500 MG	P	
pyridoxine hcl TABS 25 MG, 50 MG, 100 MG, 250 MG	P	
riboflavin TABS 50 MG, 100 MG	P	QL(100 EA per 34 day(s) retail; 100 EA per 34 days mail)
thiamine hcl TABS	P	QL(100 EA per 34 day(s) retail; 100 EA per 34 days mail)

Drug Name	Drug Tier	Requirements/ Limits
thiamine mononitrate TABS 100 MG	P	QL(100 EA per 34 day(s) retail; 100 EA per 34 days mail)

INDEX

50+ ADULT EYE HEALTH CAPS 150 MG-30 UNIT-5 MG-1 MG-1 MG-9 MG-90 MG-160 MG-250 MG 136

A THRU Z ADVANCED ADULT TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-3500 UNIT-10 MG-18 MG-1.5 MG-11 MG-75 MCG-50 MG-2 MG-200 MG-80 MG-45 MCG-150 MCG-30 UNIT-20 MG-0.5 MG-5 MCG-10 MCG-2.3 MG-55 MCG-10 MCG-35 MCG-72 MG 136

A THRU Z ADVANCED TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-3500 UNIT-10 MG-18 MG-1.5 MG-11 MG-75 MCG-50 MG-2 MG-200 MG-80 MG-45 MCG-150 MCG-30 UNIT-20 MG-0.5 MG-5 MCG-10 MCG-2.3 MG-55 MCG-10 MCG-35 MCG-72 MG, 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-3500 UNIT-10 MG-18 MG-1.5 MG-50 MG-11 MG-75 MCG-2 MG-80 MG-200 MG-45 MCG-150 MCG-30 UNIT-20 MG-0.5 MG-5 MCG-10 MCG-2.3 MG-55 MCG-10 MCG-35 MCG-72 MG, 90 MG-2 MG-30 MCG-500 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-250 MCG-3500 UNIT-10 MG-18 MG-200 MG-300 MCG-1.5 MG-100 MG-11 MG-0.9 MG-80 MG-150 MCG-150 MCG-45 MCG-30 UNIT-109 MG-5 MCG-10 MCG-2.3 MG-35 MCG-25 MCG-55 MCG-10 MCG-72 MG-2 MG, 90 MG-2 MG-30 MCG-500 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-250 MCG-3500 UNIT-10 MG-18 MG-300 MCG-1.5 MG-100 MG-11 MG-150 MCG-2 MG-80 MG-200 MG-45 MCG-150 MCG-30 UNIT-109 MG-0.9 MG-5 MCG-10 MCG-2.3 MG-55 MCG-10 MCG-35 MCG-72 MG 137

A THRU Z HIGH POTENCY TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-250 MCG-3500 UNIT-10 MG-18 MG-162 MG-300 MCG-1.5 MG-100 MG-15 MG-2 MG-80 MG-150 MCG-150 MCG-75 MCG-30 UNIT-109 MG-5 MCG-10 MCG-2 MG-120 MCG-25 MCG-20 MCG-10 MCG-72 MG-2 MG 137

A THRU Z SELECT 50+ ADVANCED TABS 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-11 MG-150 MCG-50 MG-2 MG-220 MG-80 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG 137

A THRU Z SELECT 50+ MENS TABS 120 MG-6 MG-30 MCG-300 MCG-600 UNIT-100 MCG-1.7 MG-60 MCG-20 MG-300 MCG-3500 UNIT-10 MG-600 MCG-1.5 MG-15 MG-150 MCG-50 MG-2 MG-250 MG-80 MG-50 MCG-150 MCG-60 UNIT-20 MG-0.7 MG-5 MCG-4 MG-100 MCG-10 MCG-60 MCG-72 MG 137

A THRU Z SELECT ADVANCED TABS 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-11 MG-150 MCG-50 MG-220 MG-80 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG, 90 MG-3 MG-30 MCG-500 MCG-1.5 MG-500 UNIT-25 MCG-10 MG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-300 MCG-50 MG-2.3 MG-45 MCG-5 MCG-80 MG-2 MG-150 MCG-45 MCG-0.9 MG-10 MCG-11 MG-220 MG-150 MCG-110 MG-55 MCG-50 UNIT-72 MG, 90 MG-3 MG-30 MCG-500 MCG-500 UNIT-25 MCG-10 MG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-300 MCG-1.5 MG-11 MG-150 MCG-2 MG-50 MG-45 MCG-80 MG-220 MG-150 MCG-50 UNIT-110 MG-0.9 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG 138

A THRU Z SELECT TABS 60 MG-3 MG-30 MCG-400 MCG-400 UNIT-25 MCG-1.7 MG-20 MG-250 MCG-3500 UNIT-10 MG-200 MG-300 MCG-1.5 MG-100 MG-15 MG-2 MG-80 MG-150 MCG-150 MCG-75 MCG-45 UNIT-48 MG-5 MCG-2 MG-150 MCG-10 MCG-20 MCG-10 MCG-72 MG-2 MG, 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-220 MG-300 MCG-1.5 MG-50 MG-11 MG-150 MCG-2 MG-80 MG-100 MCG-45 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG, 90 MG-3 MG-30 MCG-500 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-50 MG-11 MG-150 MCG-2 MG-80 MG-220 MG-150 MCG-45 MCG-50 UNIT-0.9 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG 138

A THRU Z SELECT ULTIMATE WOMEN TABS 100 MG-5 MG-30 MCG-400 MCG-800 UNIT-50 MCG-1.1 MG-50 MCG-14 MG-300 MCG-3500 UNIT-5 MG-8 MG-1.1 MG-15 MG-150 MCG-50 MG-80 MG-500 MG-50 MCG-150 MCG-35 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-50 MCG-72 MG-2 MG

.....138

A THRU Z ULTIMATE MENS TABS 90 MG-2 MG-40 MCG-200 MCG-600 UNIT-6 MCG-1.3 MG-60 MCG-16 MG-3500 UNIT-15 MG-8 MG-600 MCG-1.2 MG-11 MG-150 MCG-100 MG-2 MG-210 MG-80 MG-50 MCG-150 MCG-45 UNIT-20 MG-0.9 MG-5 MCG-10 MCG-2.3 MG-100 MCG-10 MCG-35 MCG-72 MG 138

abacavir sulfate SOLN 43

abacavir sulfate TABS 43

abacavir sulfate-lamivudine 43

ABC COMPLETE ADULT TABS . 138

ABC COMPLETE MENS TABS .. 139

ABC COMPLETE SENIOR 50+ TABS 139

ABC COMPLETE SENIOR MENS 50+ TABS 139

ABC COMPLETE SENIOR WOMENS 50+ TABS 139

ABC COMPLETE WOMENS TABS 139

ABILIFY ASIMTUFII PRSY 42

ABILIFY MAINTENA PRSY 42

ABILIFY MAINTENA SRER 42

ABILIFY MYCITE MAINTENANCE KIT 42

ABILIFY MYCITE STARTER KIT 2 MG, 10 MG, 15 MG, 20 MG, 30 MG 42

ABILIFY TABS (Use aripiprazole) . 42

abiraterone acetate 35

ABRILADA (1 PEN) AJKT 4

ABRILADA (2 PEN) AJKT 4

ABRILADA (2 SYRINGE) PSKT 4

ABRYSVO 197

ACAM2000 SOLR IJ 197

acarbose 22

ACCU-CHEK AVIVA PLUS STRP .63

ACCU-CHEK AVIVA SOLN 90

ACCU-CHEK FASTCLIX LANCET KIT 90

ACCU-CHEK FASTCLIX LANCETS . 90

ACCU-CHEK GUIDE CONTROL LIQD 90

ACCU-CHEK GUIDE KIT 90

ACCU-CHEK GUIDE ME KIT 90

ACCU-CHEK GUIDE TEST STRP 63

ACCU-CHEK SAFE-T PRO LANCETS 90

ACCU-CHEK SMARTVIEW CONTROL LIQD 90

ACCU-CHEK SMARTVIEW STRP 63

ACCU-CHEK SOFTCLIX LANCET DEV KIT 90

ACCU-CHEK SOFTCLIX LANCETS 91

ACCUPRIL (Use quinapril hcl) 31

ACCURETIC 12.5 MG-10 MG, 12.5 MG-20 MG (Use quinapril-hydrochlorothiazide) 32

ACCUTREND GLUCOSE CONTROL SOLN 91

ACCUTREND GLUCOSE STRP .. 63

acebutolol hcl CAPS 46

acetaminophen CAPS 500 MG 7

acetaminophen CHEW 7

acetaminophen LIQD 160 MG/5ML .7

acetaminophen SOLN PO 160 MG/5ML, 325 MG/10.15ML, 650 MG/20.3ML 7

acetaminophen SUPP 120 MG, 650 MG 8

acetaminophen SUSP 160 MG/5ML, 325 MG/10.15ML, 650 MG/20.3ML .8

acetaminophen TABS 325 MG, 500 MG 8

acetaminophen w/ codeine SOLN .. 9

acetaminophen w/ codeine TABS 15 MG-300 MG, 30 MG-300 MG, 60 MG-300 MG 9

acetazolamide CP12 74

acetazolamide TABS 74

acetic acid (otic) 188

acetylcysteine SOLN 52

ACTEMRA ACTPEN SOAJ 5

ACTEMRA SOLN 5

ACTEMRA SOSY 5

ACTHIB SOLR IM 197

ACTI-LANCE 28G 91

ACTI-LANCE LITE LANCETS 28G 91

ACTI-LANCE SPECIAL LANCETS 17G 91

ACTI-LANCE UNIVERSAL 23G .. 91

ACTICAL CAPS 139

ACTIVNUTRIENTS CAPS 139

ACTIVNUTRIENTS PERFORMANCE CAPS 139

ACTIVNUTRIENTS W/O IRON CAPS 139

ACTONEL TABS 35 MG, 150 MG (Use risedronate sodium) 74

ACTOPLUS MET TABS 850 MG-15 MG (Use pioglitazone hcl-metformin hcl) 22

ACTOS (Use pioglitazone hcl) 26

ACULAR (Use ketorolac tromethamine (ophth)) 188

ACULAR LS (Use ketorolac tromethamine (ophth)) 188

ACUVAIL 188

acyclovir CAPS 45

acyclovir SUSP 45

acyclovir TABS PO 45

acyclovir topical CREA 56

acyclovir topical OINT 56

ADACEL SUSP 195

ADALIMUMAB-AACF (2 PEN) AJKT 4

ADALIMUMAB-AACF (2 SYRINGE) PSKT 4

ADALIMUMAB-AACF(CD/UC/HS STRT) AJKT 4

ADALIMUMAB-AACF(PS/UV STARTER) AJKT 4

ADALIMUMAB-AATY (1 PEN) AJKT 4

ADALIMUMAB-AATY (2 PEN) AJKT 4

ADALIMUMAB-AATY (2 SYRINGE) PSKT 4

ADALIMUMAB-AATY CD/UC/HS START AJKT 80 MG/0.8ML 4

ADALIMUMAB-ADAZ SOAJ 4

ADALIMUMAB-ADAZ SOSY 4

ADALIMUMAB-ADBM (2 PEN) AJKT 4

ADALIMUMAB-ADBM (2 SYRINGE) PSKT 4

ADALIMUMAB-FKJP (2 PEN) AJKT 4

ADALIMUMAB-FKJP (2 SYRINGE) PSKT 4

ADALIMUMAB-RYVK (1 PEN) AJKT 80 MG/0.8ML 4

ADALIMUMAB-RYVK (2 PEN) AJKT 4

ADALIMUMAB-RYVK (2 SYRINGE) PSKT 4

adapalene CREA 52

adapalene GEL 53

adapalene-benzoyl peroxide GEL 52

ADBRY SOAJ 59

ADBRY SOSY 59

ADCIRCA TABS (Use tadalafil (pulmonary hypertension)) 48

ADDERALL TABS (Use amphetamine-dextroamphetamine) 1

ADDERALL XR CP24 (Use amphetamine-dextroamphetamine) 1

adefovir dipivoxil 45

ADEMPAS 48

ADHESIVE/LARGE/3"X4" PADS 87

ADHESIVE/MEDIUM/2"X3" PADS 87

ADMELOG SOLN IJ 25

ADMELOG SOLOSTAR SOPN 25

ADQUEY OINT EX 1 % 61

ADRENALIN 0.1 % 181

ADTHYZA TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG 194

ADULT MASK DEVI 126

ADVAIR DISKUS AEPB (Use fluticasone-salmeterol) 15

ADVAIR HFA AERO (Use fluticasone-salmeterol) 15

ADVANCED EYE HEALTH CAPS 139

ADVANCED MOBILE LANCET 91

ADVANTAGE SAFETY LANCETS 28G 91

ADVATE 80

ADVOCATE INSULIN SYRINGE 124

ADVOCATE LANCETS 91

ADVOCATE LANCING DEVICE MISC 91

ADVOCATE REDI-CODE STRP 63

ADVOCATE REDI-CODE+ CONTROL SOLN 91

ADVOCATE REDI-CODE+ DEVI 91

ADVOCATE REDI-CODE+ TEST STRP 63

ADVOCATE SAFETY LANCETS 21G 91

ADVOCATE SAFETY LANCETS 23G 91

ADVOCATE SAFETY LANCETS 26G 91

ADVOCATE SAFETY LANCETS 28G 92

ADYNOVATE 80

ADZENYS XR-ODT TBED 3.1 MG, 6.3 MG, 9.4 MG, 12.5 MG, 15.7 MG, 18.8 MG (Use amphetamine) 1

AEROBIKA DEVI 126

AEROCHAMBER HOLDING CHAMBER DEVI 126

AEROCHAMBER MINI CHAMBER DEVI 126

AEROCHAMBER MV MISC 126

AEROCHAMBER PLS FLOVU MTHPIECE DEVI 126

AEROCHAMBER PLUS FLO-VU INTERM DEVI 126

AEROCHAMBER PLUS FLO-VU LARGE DEVI 126

AEROCHAMBER PLUS FLO-VU LARGE MISC 126

AEROCHAMBER PLUS FLO-VU MEDIUM DEVI 126

AEROCHAMBER PLUS FLO-VU MEDIUM MISC 126

AEROCHAMBER PLUS FLO-VU SMALL DEVI 126

AEROCHAMBER PLUS FLO-VU SMALL MISC 127

AEROCHAMBER PLUS FLOW VU MISC 127

AEROCHAMBER W/FLOWSIGNAL MISC 127

AEROCHAMBER Z-STAT PLUS CHAMBR MISC 127

AEROCHAMBER Z-STAT PLUS MISC 127

AEROCHAMBER Z-STAT PLUS/LARGE MISC 127

AEROCHAMBER Z-STAT PLUS/MEDIUM MISC 127

AEROCHAMBER Z-STAT PLUS/SMALL MISC 127

AEROCHAMBER2GO ANTI-STATIC DEVI 127

AEROVENT PLUS DEVI 127

AFINITOR DISPERZ TBSO (Use everolimus) 37

AFINITOR TABS (Use everolimus) 37

AFLORA TABS 139

AFLURIA PRESERVATIVE FREE SUSY 197

AFLURIA QUADRIVALENT SUSY 0.5 ML 197

AFLURIA SUSP 197

AFREZZA POWD 4 UNIT, 8 UNIT, 12 UNIT 25

AFSTYLA 250 UNIT, 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 2500 UNIT 80

AGAMATRIX AMP TEST STRP ...63

AGAMATRIX CONTROL NORMAL/HIGH SOLN 92

AGAMATRIX CONTROL SOLN ...92

AGAMATRIX JAZZ TEST STRP ..63

AGAMATRIX JAZZ WIRELESS 2 KIT 92

AGAMATRIX PRESTO KIT 92

AGAMATRIX PRESTO TEST STRP .63

AGAMATRIX ULTRA-THIN LANCETS 92

AGAMREE 50

AGRYLIN 0.5 MG (Use anagrelide hcl) 81

AIMOVIG 130

AIMSCO LUBRICATED MISC 89

AIRSUPRA 15

AJOVY SOAJ 130

AJOVY SOSY 130

AKEEGA 35

AKLIEF 53

AKYNZEO 28

albuterol sulfate AERS 15

albuterol sulfate NEBU 2.5 MG/0.5ML 15

albuterol sulfate NEBU 15

albuterol sulfate SYRP 15

albuterol sulfate TABS 15

alclometasone dipropionate CREA 56

alclometasone dipropionate OINT .56

ALCON TEARS SOLN 184

ALECENSA 37

alendronate sodium SOLN 74

alendronate sodium TABS 10 MG, 35 MG, 70 MG 74

alfuzosin hcl 79

ALHEMO 80

aliskiren fumarate 33

ALIVE CALCIUM BONE SUPPORT TABS 139

ALIVE DAILY ENERGY TABS ... 139

ALIVE DIABETIC MULTIVITAMIN TABS 139

ALIVE ENERGY 50+ TABS 139

ALIVE EVERYDAY IMMUNE HEALTH CAPS 139
ALIVE GARDEN GOODNESS TABS 139
ALIVE HAIR, SKIN & NAILS CAPS 139
ALIVE MAX 6 POTENCY CAPS . 139
ALIVE MENS 50+ TABS 139
ALIVE MENS 50+ ULTRA TABS .139
ALIVE MENS COMPLETE MULTI TABS 139
ALIVE MENS ULTRA TABS 139
ALIVE MULTI-VITAMIN LIQD 139
ALIVE ONCE DAILY WOMENS TABS 139
ALIVE ULTRA POTENCY ADULT TABS 139
ALIVE ULTRA POTENCY WOMENS 50+ TABS 139
ALIVE WOMENS 50+ COMPLETE MV TABS 139
ALIVE WOMENS ENERGY TABS 139
ALL FLOW 1000 PFT FILTER DEVI . 127
ALL FLOW 2000 PFT FILTER DEVI . 127
ALL FLOW 3000 PFT FILTER DEVI . 127
ALL FLOW 4000 PFT FILTER DEVI . 127
ALL FLOW 5000 PFT FILTER DEVI . 127
ALL FLOW 6000 PFT FILTER DEVI . 127
ALL FLOW 7000 PFT FILTER DEVI . 127
allopurinol 100 MG, 300 MG 80
allopurinol 200 MG 80
almotriptan malate 131
ALOCRIL 188
alogliptin benzoate 23
alogliptin-metformin hcl 22
alogliptin-pioglitazone 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG 22
ALORA PTTW 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR ... 77
alosetron hcl 79
ALPHA BETIC TABS 139
ALPHAGAN P (Use brimonidine tartrate) 185
ALPHANATE SOLR 80
ALPHANINE SD 500 UNIT, 1000 UNIT, 1500 UNIT 80
alprazolam TABS 12
ALPROLIX 80
ALREX SUSP (Use loteprednol etabonate) 187
ALTACE CAPS 1.25 MG, 5 MG (Use ramipril) 31
ALTOPREV TB24 20 MG, 40 MG, 60 MG 30
ALTRIXA TABS 174
ALTUVIIIO 250 UNIT, 500 UNIT, 1000 UNIT, 2000 UNIT, 3000 UNIT, 4000 UNIT 80
alum & mag hydrox-simethicone CHEW 11
alum & mag hydrox-simethicone LIQD 400 MG/5ML-40 MG/5ML-400 MG/5ML 11
alum & mag hydrox-simethicone LIQD 11
alum & mag hydrox-simethicone SUSP 2400 MG/30ML-240 MG/30ML-2400 MG/30ML, 400 MG/5ML-40 MG/5ML-400 MG/5ML, 400 MG/5ML-400 MG/5ML-40 MG/5ML, 800 MG/10ML-80 MG/10ML-800 MG/10ML 11
ALUMINUM HYDROXIDE GEL SUSP 11
ALUNBRIG TABS 37
ALUNBRIG TBPK 37
ALVESCO 14
ALYFTREK 194
ALYGLO 189
amantadine hcl CAPS 40
amantadine hcl SOLN 40
amantadine hcl TABS 40
AMBIEN CR TBCR (Use zolpidem tartrate) 85
AMBIEN TABS (Use zolpidem tartrate) 85
ambrisentan 48
AMD FOAM DRESSING PADS ... 87
AMD FOAM DRESSING TOPSHEET PADS 87
AMERITHROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG, 180 MG, 240 MG, 300 MG 194
amiloride & hydrochlorothiazide ...74
amiloride hcl TABS 74

aminocaproic acid TABS 500 MG . 84
amiodarone hcl TABS 200 MG 13
AMITIZA (Use lubiprostone) 77
amitriptyline hcl TABS 22
AMJEVITA SOAJ 40 MG/0.4ML 4
AMJEVITA SOAJ 4
AMJEVITA SOSY 4
AMJEVITA-PED 10KG TO <15KG SOSY 4
AMJEVITA-PED 15KG TO <30KG SOSY 4
AMLADEX TABS 174
amlodipine besylate TABS 46
amlodipine besylate-atorvastatin calcium 47
amlodipine besylate-benazepril hcl 32
amlodipine besylate-olmesartan medoxomil 32
amlodipine besylate-valsartan 32
amlodipine-valsartan-hydrochlorothiazide 32
AMONDYS 45 181
AMORYN MOOD BOOSTER CAPS 10 MG-25 MG-20 MG-300 MCG-400 UNIT-15 MG-70 MCG-30 MCG-90 MG-18 MG 139
amoxapine 22
amoxicillin & pot clavulanate CHEW 57 MG-400 MG 190
amoxicillin & pot clavulanate SUSR 28.5 MG/5ML-200 MG/5ML 190
amoxicillin & pot clavulanate SUSR 42.9 MG/5ML-600 MG/5ML 190
amoxicillin & pot clavulanate SUSR 57 MG/5ML-400 MG/5ML 190
amoxicillin & pot clavulanate SUSR 62.5 MG/5ML-250 MG/5ML 190
amoxicillin & pot clavulanate TABS 125 MG-250 MG 190
amoxicillin & pot clavulanate TABS 125 MG-500 MG, 125 MG-875 MG 190
amoxicillin & pot clavulanate TB12 190
amoxicillin CAPS 190
amoxicillin CHEW 125 MG, 250 MG . 190
amoxicillin SUSR 190
amoxicillin TABS 875 MG 190
amoxicillin-clarithromycin w/ lansoprazole THPK 196
AMOXICILLIN-POT CLAVULANATE CHEW 190
amphetamine sulfate TABS 1
amphetamine TBED 3.1 MG, 6.3 MG, 9.4 MG, 12.5 MG, 15.7 MG, 18.8 MG 1
amphetamine-dextroamphetamine CP24 12.5 MG, 25 MG, 37.5 MG, 50 MG 1
amphetamine-dextroamphetamine CP24 5 MG, 10 MG, 15 MG, 20 MG, 25 MG, 30 MG 1
amphetamine-dextroamphetamine TABS 1
ampicillin CAPS 500 MG 190
AMPYRA (Use dalfampridine) ...191
AMRIX CP24 (Use cyclobenzaprine hcl) 180
AMVUTTRA 193
anagrelide hcl 81
anastrozole 35
ANDEMBRY SOAJ SC 200 MG/1.2ML 81
ANDROGEL PUMP GEL TD (Use testosterone) 10
ANNOVERA 50
ANORO ELLIPTA 25 MCG/ACT-62.5 MCG/ACT (Use umeclidinium-vilanterol) 15
ANTI-OXIDANT TABS 250 MG-200 UNIT-10000 UNIT 174
ANTIOXIDANT A/C/E/SELENIUM TABS 200 MG-200 UNIT-25 MCG-10000 UNIT 139
ANTIOXIDANT FORMULA TABS 139
ANTIOXIDANT FORMULA/MINERALS CAPS 250 MG-7.5 MG-1 MG-10000 UNIT-200 UNIT-1.5 MG-15 MCG 139
ANTIOXIDANT VITAMINS TABS 60 MG-30 UNIT-2 MG-40 MG-40 MCG-5000 UNIT 139
ANZUPGO CREA EX 20 MG/GM . 59
APETIBEX CAPS 139
APEXICON E CREA 56
APIDRA SOLN 25
APIDRA SOLOSTAR SOPN 25
APOKYN SOCT 40
apomorphine hydrochloride SOCT 40
APONVIE EMUL 28
APPE-CURB CAPS 139

apraclonidine hcl 185
aprepitant CAPS 125 MG 28
aprepitant CAPS 40 MG, 80 MG ..28
aprepitant CPPK PO 28
APRETUDE 43
APTENSIO XR CP24 (Use methylphenidate hcl) 2
APTIOM 200 MG, 400 MG, 600 MG, 800 MG (Use eslicarbazepine acetate) 17
APTIVUS CAPS 43
AQ INSULIN SYRINGE 124
AQNEURSA 193
AQUALANCE LANCETS 30G 92
AQUORAL SOLN 135
AQVESME TABS 100 MG 82
ARANESP (ALBUMIN FREE) SOLN 100 MCG/ML 82
ARANESP (ALBUMIN FREE) SOLN 200 MCG/ML 82
ARANESP (ALBUMIN FREE) SOLN 25 MCG/ML 82
ARANESP (ALBUMIN FREE) SOLN 40 MCG/ML 82
ARANESP (ALBUMIN FREE) SOLN 60 MCG/ML 82
ARANESP (ALBUMIN FREE) SOSY 10 MCG/0.4ML 83
ARANESP (ALBUMIN FREE) SOSY 150 MCG/0.3ML, 200 MCG/0.4ML, 300 MCG/0.6ML, 500 MCG/ML 82
ARANESP (ALBUMIN FREE) SOSY 25 MCG/0.42ML 82
ARANESP (ALBUMIN FREE) SOSY 40 MCG/0.4ML 82
ARANESP (ALBUMIN FREE) SOSY 60 MCG/0.3ML, 100 MCG/0.5ML ..82
ARBLI PO 10 MG/ML 32
ARCALYST 5
AREXVY 197
arformoterol tartrate 15
ARGININE TABS 184
ARICEPT TABS (Use donepezil hydrochloride) 191
ARIKAYCE 3
ARIMIDEX (Use anastrozole) 35
aripiprazole SOLN PO 42
aripiprazole TABS 42
aripiprazole TBDP 43
ARISTADA 441 MG/1.6ML, 662 MG/2.4ML 43
ARISTADA 882 MG/3.2ML, 1064 MG/3.9ML 43
ARISTADA INITIO 43
ARIXTRA (Use fondaparinux sodium) 16
ARMLUPEG SOSY SC 6 MG/0.6ML . 83
armodafinil 2
ARMOUR THYROID TABS 194
ARNUITY ELLIPTA 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT (Use fluticasone furoate (inhalation)) 14
AROMASIN (Use exemestane) ...35
ARTHROTEC TBEC (Use diclofenac w/ misoprostol) 6
artificial saliva SOLN 135
artificial tear solution 184
ARYNTA SOLN PO 10 MG/ML 1
ASCENIV 189
ascorbic acid CHEW 500 MG 199
ascorbic acid POWD PO 500 MG/GM 199
ASCORBIC ACID POWD PO 199
ascorbic acid TABS 199
asenapine maleate 42
ASMANEX (120 METERED DOSES) AEPB 14
ASMANEX (14 METERED DOSES) AEPB 14
ASMANEX (30 METERED DOSES) AEPB 14
ASMANEX (60 METERED DOSES) AEPB 14
ASMANEX HFA AERO 14
aspirin buffered (cal carb-mag carb-mag oxide) 8
aspirin CHEW 8
ASPIRIN SUPP 300 MG 8
aspirin TABS 325 MG 8
aspirin TBEC 81 MG, 325 MG 8
aspirin-dipyridamole 81
ASSURE 4 CONTROL LEVEL 1 & 2 LIQD 92
ASSURE 4 TEST STRP 63
ASSURE COMFORT LANCETS 28G 92
ASSURE DOSE CONTROL SOLN 92
ASSURE DOSE NORM/HIGH

CONTROL SOLN 92
ASSURE LANCE LANCETS 92
ASSURE LANCE LANCETS 21G 92
ASSURE LANCE PLUS SAFETY 25G 92
ASSURE LANCE PLUS SAFETY 30G 92
ASSURE LANCE SAFETY LANCET 28G 92
ASSURE PLATINUM METER DEVI 92
ASSURE PLATINUM STRP 64
ASSURE PRISM CONTROL LEVEL 1&2 SOLN 93
ASSURE PRISM MULTI METER DEVI 93
ASSURE PRISM MULTI TEST STRP 64
ASSURE TITANIUM BLOOD GLUCOSE DEVI 93
ASSURE TITANIUM STRP 64
ATACAND (Use candesartan cilexetil) 32
ATACAND HCT (Use candesartan cilexetil-hydrochlorothiazide) 32
atazanavir sulfate CAPS 43
ATELVIA TBEC (Use risedronate sodium) 74
atenolol & chlorthalidone 32
atenolol TABS 46
ATMEKSI SUSP PO 750 MG/5ML 180
atomoxetine hcl 2
atomoxetine hcl PO 4 MG/ML 2
ATONCY PO 4 MG/ML (Use atomoxetine hcl) 2
ATORVALIQ SUSP 30
atorvastatin calcium TABS 30
atropine sulfate (ophthalmic) OINT 185
atropine sulfate (ophthalmic) SOLN 185
ATROPINE SULFATE SOLN 1 % 185
ATROVENT HFA 17 MCG/ACT (Use ipratropium bromide hfa) 14
ATTRUBY 48
AUBAGIO (Use teriflunomide) ... 191
AUDENZ EMUL 197
AUDENZ PRSY 197
AUGMENTIN SUSR 31.25 MG/5ML-125 MG/5ML 190
AUGTYRO 37
AUKELSO SOLN SC 120 MG/1.7ML 74
AURYXIA 210 MG (Use ferric citrate) 79
AUSTEDO TABS 191
AUSTEDO XR PATIENT TITRATION TEPK 191
AUSTEDO XR TB24 191
AUTO-LANCET MINI MISC 93
AUTOLET LANCING DEVICE MISC . 93
AUTOLET LITE LANCING DEVICE MISC 93
AUVELITY 20
AUVELITY TITRATION PACK PO 20
AUVI-Q SOAJ 199
AVALIDE (Use irbesartan-hydrochlorothiazide) 32
AVAPRO 150 MG, 300 MG (Use irbesartan) 32
AVEENO PROTECT+HYDRATE SPF60 LOTN 62
AVERI TABS PO 49
AVMAPKI FAKZYNJA CO-PACK THPK PO 37
AVONEX PEN AJKT 192
AVONEX PREFILLED PSKT 192
AVOWISE TABS 174
AVSOLA 78
AVTOZMA SOAJ SC 162 MG/0.9ML 5
AVTOZMA SOLN IV 80 MG/4ML, 200 MG/10ML, 400 MG/20ML 5
AVTOZMA SOSY SC 162 MG/0.9ML 5
AWIQLI FLEXTOUCH SOPN SC 700 UNIT/ML 25
AYVAKIT 37
AZASITE 186
azathioprine TABS 50 MG 133
azathioprine TABS 75 MG, 100 MG 133
azelastine hcl (ophth) 188
azelastine hcl 0.1 %, 137 MCG/SPRAY 180
azelastine hcl-fluticasone propionate SUSP 180
AZILECT (Use rasagiline mesylate) . 40

azilsartan medoxomil 40 MG, 80 MG 32

azithromycin SUSR 86

azithromycin TABS 86

AZOPT (Use brinzolamide) 188

AZOR (Use amlodipine besylate-olmesartan medoxomil) 32

AZSTARYS 2

AZULFIDINE EN-TABS TBEC (Use sulfasalazine) 78

AZULFIDINE TABS (Use sulfasalazine) 78

b-complex vitamins CAPS 135

b-complex vitamins TABS 135

b-complex w/ c & folic acid CAPS 135

B-PLEX PLUS TABS 500 MG-25 MG-0.15 MG-0.8 MG-50 MCG-25 MG-20 MG-100 MG-5000 UNIT-27 MG-20 MG-50 MG-22.5 MG-3 MG-5 MG-0.1 MG-30 UNIT 140

bacitracin (topical) OINT 54

bacitracin zinc OINT 54

bacitracin-poly-neomycin-hc 187

bacitracin-polymyxin b (ophth) ... 186

bacitracin-polymyxin b OINT 54

BACLOFEN REFILL KIT-SYNCHROMED KIT IT 40 MG/20ML 180

baclofen SOLN PO 5 MG/5ML, 10 MG/5ML 180

baclofen SUSP 180

baclofen TABS 180

BACMIN TABS 140

BAFIERTAM 192

balsalazide disodium CAPS 78

BALVERSA 37

BAND-AID ALL-IN-ONE GAUZE LG PADS 87

BAND-AID GAUZE LARGE PADS 87

BAND-AID GAUZE MEDIUM PADS 87

BAND-AID GAUZE SMALL PADS 87

BAND-AID HURT-FREE NON-STICK PADS 87

BAND-AID TRU-ABSORB GAUZE PADS 87

BANZEL SUSP (Use rufinamide) .. 17

BANZEL TABS (Use rufinamide) .. 17

BAQSIMI ONE PACK POWD 23

BAQSIMI TWO PACK POWD 23

BARIATRIC MULTIVITAMINS CAPS 140

BARIATRIC MULTIVITAMINS TABS 140

BARIATRIC MULTIVITAMINS/IRON CAPS 140

BASAGLAR KWIKPEN SOPN 25

BASIC AM TABS 140

BASIC PM TABS 140

BAXDELA SOLR 77

BAXDELA TABS 77

BD AUTOSHIELD DUO 124

BD INS SYR ULTRAFINE 1/2UNIT 124

BD INSULIN SYR ULTRAFINE II 124

BD INSULIN SYRINGE 124

BD INSULIN SYRINGE HALF-UNIT 124

BD INSULIN SYRINGE MICROFINE 124

BD INSULIN SYRINGE U/F 124

BD INSULIN SYRINGE ULTRAFINE 124

BD MICROTAINER LANCETS 93

BD PEN NEEDLE MICRO ULTRAFINE 124

BD PEN NEEDLE MINI ULTRAFINE 124

BD PEN NEEDLE NANO 2ND GEN 124

BD PEN NEEDLE NANO ULTRAFINE 124

BD PEN NEEDLE ORIG ULTRAFINE 124

BD PEN NEEDLE SHORT ULTRAFINE 124

BD SAFETYGLIDE INSULIN SYRINGE 124

BD VEO INSULIN SYR ULTRAFINE 124

beclomethasone dipropionate 40 MCG/ACT, 80 MCG/ACT 14

BELBUCA FILM 9

BELSOMRA 85

benazepril & hydrochlorothiazide 32

benazepril hcl 31

BENEFIX KIT 80

BENICAR (Use olmesartan medoxomil) 32

BENICAR HCT (Use olmesartan medoxomil-hydrochlorothiazide) ... 32
BENLYSTA SOAJ ... 134
BENLYSTA SOLR ... 134
BENLYSTA SOSY ... 134
benzonatate 100 MG ... 51
benzonatate 200 MG ... 51
benzoyl peroxide BAR ... 53
benzoyl peroxide CREA 10 % ... 53
benzoyl peroxide GEL 2.5 %, 5 %, 10 % ... 53
benzoyl peroxide LIQD 4 % ... 53
benzoyl peroxide LIQD 5 %, 10 % ... 53
benzoyl peroxide LOTN 10 % ... 53
benzoyl peroxide-erythromycin GEL ... 53
benztropine mesylate SOLN ... 39
benztropine mesylate TABS ... 39
bepotastine besilate ... 188
BEPREVE (Use bepotastine besilate) ... 188
BEQALZI STARTER PACK TBPK PO ... 35
BEQALZI TABS PO 1 MG, 5 MG, 20 MG, 80 MG ... 35
BEQVEZ ... 80
BERINERT KIT ... 81
besifloxacin hcl 0.6 % ... 186
BESIVANCE 0.6 % (Use besifloxacin hcl) ... 186
betamethasone dipropionate (topical) CREA ... 56
betamethasone dipropionate (topical) LOTN ... 57
betamethasone dipropionate (topical) OINT ... 57
betamethasone dipropionate augmented CREA ... 57
betamethasone dipropionate augmented GEL 0.05 % ... 57
betamethasone dipropionate augmented LOTN ... 57
betamethasone dipropionate augmented OINT ... 57
betamethasone valerate CREA ... 57
betamethasone valerate FOAM ... 57
betamethasone valerate LOTN ... 57
betamethasone valerate OINT ... 57
BETAPACE AF (Use sotalol hcl (afib/afl)) ... 46
BETAPACE TABS 80 MG, 120 MG, 160 MG (Use sotalol hcl) ... 46
BETASERON KIT ... 192
betaxolol hcl (ophth) SOLN ... 185
betaxolol hcl ... 46
bethanechol chloride ... 197
BETHKIS NEBU (Use tobramycin) ... 3
BETIMOL (Use timolol) ... 185
BETIMOL ... 185
BETOPTIC-S SUSP ... 185
BEVESPI AEROSPHERE ... 15
bexarotene ... 39
BEXSERO 0.5 ML ... 197
bicalutamide ... 35
BIKTARVY ... 43
BILDYOS SOSY SC 60 MG/ML ... 74
BILPREVDA SOLN SC 120 MG/1.7ML ... 74
bimatoprost SOLN ... 188
BIMZELX SOAJ ... 55
BIMZELX SOSY ... 55
BINOSTO TBEF ... 74
BIO-35 GLUTEN-FREE CAPS ... 140
BIO-35 IRON FREE CAPS ... 140
BIOCAL CAPS ... 140
BIOCEL TABS 500 MG-25 MG-300 MCG-1 MG-200 UNIT-25 MG-25 MG-50 MG-5000 UNIT-25 MG-33 MG-125 MG-100 UNIT-60 MG-10 MG-50 MCG ... 140
BIOTECT PLUS CAPS ... 140
BIOTEL CARE BLOOD GLUCOSE KIT ... 93
BIOTEL CARE TEST STRIPS STRP 64
biotin CAPS 5 MG, 5000 MCG ... 199
bisacodyl SUPP ... 86
bisacodyl TBEC ... 86
bismuth subsalicylate CHEW 262 MG ... 27
bismuth subsalicylate SUSP 262 MG/15ML, 525 MG/15ML, 525 MG/30ML, 527 MG/30ML, 1050 MG/30ML ... 27
bismuth subsalicylate TABS ... 27
bisoprolol & hydrochlorothiazide ... 32
bisoprolol fumarate ... 46
BIVIGAM SOLN ... 189
BIXLENVO SUNLENCA STARTER

PACK TBPK PO 43
BIXLENVO TABS PO 43
BLOOD GLUCOSE MONITOR SYSTEM KIT 93
BLOOD GLUCOSE MONITORING 333 DEVI 93
BLOOD GLUCOSE TEST STRIPS 333 STRP 64
BLOOD GLUCOSE TEST STRP 64
BLOOD SUGAR MANAGER TABS 140
BLULINK CONTROL HIGH & LOW LIQD 93
BLULINK GLUCOSE MONITORING SYS DEVI 93
BLULINK GLUCOSE TEST STRP 64
BODY/HAIR/SKIN/NAILS CAPS 20 MG-0.667 MG-200 MCG-133.333 MCG-6.667 MG-0.5 MG-2 MCG-0.567 MG-166.667 MG-33.333 MG-5 MG-20 MG-3 MG-0.667 MG-33.333 MG-1.667 MG-3.333 MG-2000 UNIT-133.333 MG-66.667 MG-50 MCG-83.333 MG-10 UNIT 140
BOMYNTRA SOLN SC 120 MG/1.7ML 74
BOMYNTRA SOSY SC 120 MG/1.7ML 74
BONEUP 3 PER DAY CAPS 140
BONEUP CAPS 140
BONEUP VEGETARIAN TABS 140
BONJESTA TBCR 28
BONSITY SOPN 560 MCG/2.24ML 74
BOOSTNOW IMMUNE SUPPORT CAPS 140
BOOSTRIX SUSP 195
BOOSTRIX SUSY 195
BOSAYA SOSY SC 60 MG/ML 74
bosentan TABS 48
bosentan TBSO 32 MG 48
BOSULIF CAPS 37
BOSULIF TABS 100 MG, 400 MG, 500 MG (Use bosutinib) 37
bosutinib TABS 100 MG, 400 MG, 500 MG 37
BOTOX IJ 183
BPO FOAMING CLOTHS MISC 6 % 53
BPROTECTED MULTI-VITE LIQD 60 MG/15ML-2 MG/15ML-300 MCG/15ML-1.5 MG/15ML-6 MCG/15ML-20 MG/15ML-10 MG/15ML-9 MG/15ML-3 MG/15ML-25 MCG/15ML-150 MCG/15ML-30 UNIT/15ML-25 MCG/15ML-2 MG/15ML-1.7 MG/15ML 140
BRAFTOVI 75 MG 37
BREATHE COMFORT CHAMBER/ADULT DEVI 127
BREATHE COMFORT CHAMBER/CHILD DEVI 127
BREATHE EASE LARGE DEVI 127
BREATHE EASE MEDIUM DEVI 127
BREATHE EASE SMALL DEVI 127
BREATHERITE VALVED MDI CHAMBER DEVI 127
BREKIYA SOAJ SC 1 MG/ML 130
BREO ELLIPTA (Use fluticasone furoate-vilanterol) 15
BREO ELLIPTA 15
BREZTRI AEROSPHERE 15
BRILINTA 60 MG, 90 MG (Use ticagrelor) 81
brimonidine tartrate 185
brimonidine tartrate-timolol maleate 185
BRINEURA 76
brinzolamide 188
BRIUMVI 192
brivaracetam SOLN PO 10 MG/ML 17
brivaracetam TABS 10 MG, 25 MG, 50 MG, 75 MG, 100 MG 17
BRIVIACT SOLN PO 10 MG/ML (Use brivaracetam) 17
BRIVIACT TABS 10 MG, 25 MG, 50 MG, 75 MG, 100 MG (Use brivaracetam) 17
BRIXADI (MONTHLY) SOSY 64 MG/0.18ML, 96 MG/0.27ML, 128 MG/0.36ML 10
BRIXADI (WEEKLY) SOSY 10
bromfenac sodium (ophth) 188
bromocriptine mesylate CAPS 40
bromocriptine mesylate TABS 2.5 MG 40
brompheniramine & phenyleph ELIX 51
brompheniramine & pseudoeph ELIX 51
brompheniramine & pseudoeph LIQD 15 MG/5ML-1 MG/5ML 51
BROMSITE (Use bromfenac sodium (ophth)) 188
BROVANA (Use arformoterol

tartrate) 15
BRUKINSA 37
BRUKINSA PO 160 MG 37
BRYNOVIN SOLN PO 25 MG/ML 23
budesonide (inhalation) SUSP 14
budesonide (intrarectal) 10
budesonide (nasal) 180
budesonide CPEP 50
budesonide TB24 50
budesonide-formoterol fumarate dihydrate 15
bumetanide TABS 74
buprenorphine hcl SUBL 10
buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 2 MG-8 MG 10
buprenorphine hcl-naloxone hcl dihydrate FILM SL 1 MG-4 MG, 3 MG-12 MG 10
buprenorphine hcl-naloxone hcl dihydrate SUBL 10
buprenorphine PTWK 10
bupropion hcl (smoking deterrent) 193
bupropion hcl TABS 20
bupropion hcl TB12 20
bupropion hcl TB24 150 MG, 300 MG 20
bupropion hcl TB24 300 MG, 450 MG 20
BURIED TREASURE ACTIVE 55 PLUS LIQD 140
BURN RELIEF GEL 60
buspirone hcl 15 MG 12
buspirone hcl 5 MG, 10 MG 12
buspirone hcl 7.5 MG, 30 MG 12
butalbital-acetaminophen TABS 50 MG-325 MG 7
butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG 7
butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG 7
butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG 9
butalbital-aspirin-caffeine CAPS 7
butalbital-aspirin-caffeine w/cod 9
BUTRANS PTWK (Use buprenorphine) 10
BYETTA 10 MCG PEN SOPN 10 MCG/0.04ML (Use exenatide) 24
BYETTA 5 MCG PEN SOPN 5 MCG/0.02ML (Use exenatide) 24
BYLVAY (PELLETS) CPSP 77
BYLVAY CAPS 77
BYQLOVI 0.05 % 187
BYSANTI TABS PO 1 MG, 2 MG, 4 MG, 6 MG, 8 MG, 10 MG, 12 MG 41
BYSANTI TITRATION PACK A TBPK PO 41
BYSANTI TITRATION PACK B TBPK PO 41
BYSANTI TITRATION PACK C TBPK PO 41
BYSTOLIC (Use nebivolol hcl) 46
CABENUVA 600 MG/2ML-400 MG/2ML 43
CABENUVA 900 MG/3ML-600 MG/3ML 43
CABOMETYX TABS 37
CADUET 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG (Use amlodipine besylate-atorvastatin calcium) 47
caffeine citrate SOLN PO 60 MG/3ML 1
calcipotriene CREA 55
CALCIPOTRIENE FOAM 55
calcipotriene OINT 55
calcipotriene SOLN 55
calcipotriene-betamethasone dipropionate OINT 57
calcipotriene-betamethasone dipropionate SUSP 57
calcitonin (salmon) IJ 74
calcitonin (salmon) NA 74
calcitriol (topical) 55
calcitriol CAPS 76
CALCIUM 600 +D HIGH POTENCY TABS 132
calcium acetate (phosphate binder) CAPS 79
calcium acetate (phosphate binder) TABS 79
CALCIUM CARB-CHOLECALCIFEROL CHEW 132
calcium carbonate (antacid) CHEW 500 MG, 750 MG, 1000 MG 11
CALCIUM CARBONATE CHEW 132
calcium carbonate TABS 1250 MG, 500 MG 132

calcium carbonate-cholecalciferol TABS 132
calcium carbonate-vitamin d TABS 125 UNIT-250 MG, 250 MG-125 UNIT 132
calcium carbonate-vitamin d TABS 600 MG-200 UNIT 132
CALCIUM CHEW 132
calcium citrate TABS 132
calcium polycarbophil TABS 85
CALQUENCE 37
CAMCEVI 35
camphor & menthol LOTN 55
camphor-menthol-methyl salicylate CREA 60
camphor-menthol-methyl salicylate GEL 60
camphor-menthol-methyl salicylate PTCH EX 3.1 %-10 %-6 % 60
CANASA SUPP (Use mesalamine) 78
candesartan cilexetil 32
candesartan cilexetil-hydrochlorothiazide 32
capecitabine 34
CAPHOSOL SOLN 135
CAPLYTA 40
CAPRELSA 37
capsaicin CREA 0.025 % 60
capsaicin CREA 0.075 % 60
capsaicin CREA 0.1 % 60
capsaicin PTCH 60
captopril & hydrochlorothiazide ... 32
captopril 31
CAPVAXIVE 197
carbamazepine CHEW 17
carbamazepine CP12 17
carbamazepine SUSP 17
carbamazepine TABS 17
carbamazepine TB12 17
carbamide peroxide (otic) 6.5 % .. 188
CARBATROL CP12 (Use carbamazepine) 17
carbidopa 39
carbidopa-levodopa CPCR 40
carbidopa-levodopa TABS 40
carbidopa-levodopa TBCR 40
carbidopa-levodopa TBDP 40
carbidopa-levodopa-entacapone .. 40
carboxymethylcellulose sodium (ophth) GEL 184
carboxymethylcellulose sodium (ophth) SOLN 0.5 % 184
CARDURA (Use doxazosin mesylate) 32
CARDURA XL 79
CAREONE ADVANCED LANCING DEV MISC 93
CAREONE INSULIN SYRINGE . 124
CAREONE LANCET SUPER THIN 30G 93
CARESENS CONTROL SOLUTION A/B SOLN 93
CARESENS LANCETS 30G 93
CARESENS N FELIZ BT DEVI 93
CARESENS N FELIZ DEVI 93
CARESENS S CONTROL SOLN A/B LIQD 94
CARESENS S FIT BLOOD GLUC MON DEVI 94
CARESENS S FIT BT BLOOD GLUC DEVI 94
CARESENS S GLUCOSE TEST STRP 64
CARETOUCH CONTROL SOL LEVEL 2 LIQD 94
CARETOUCH HYPODERMIC NEEDLE 124
CARETOUCH INSULIN SYRINGE 124
CARETOUCH LANCING/EJECTOR MISC 94
CARETOUCH MONITOR SYSTEM KIT 94
CARETOUCH SAFETY LANCETS 94
CARETOUCH SAFETY LANCETS 26G 94
CARETOUCH TEST STRP 64
CARETOUCH TWIST LANCETS 28G 94
CARETOUCH TWIST LANCETS 30G 94
CARETOUCH TWIST LANCETS 33G 94
CARETOUCH TWIST MC LANCETS 30G 94
carisoprodol TABS 250 MG 180
carisoprodol TABS 350 MG 180
carteolol hcl (ophth) 185

carvedilol 46
carvedilol phosphate 46
CASGEVY 82
CASODEX (Use bicalutamide) 35
CAVHANZA TBDP PO 60 MG, 80 MG 37
CAYA DPRH 89
CAYSTON 12
cefaclor CAPS 49
CEFACLOR ER TB12 49
cefadroxil CAPS 49
cefadroxil SUSR 49
cefadroxil TABS 49
cefdinir CAPS 49
cefdinir SUSR 49
cefixime CAPS 49
cefixime SUSR 49
cefixime TABS 49
cefpodoxime proxetil SUSR 49
cefpodoxime proxetil TABS 49
cefprozil SUSR 49
cefprozil TABS 49
ceftriaxone sodium IJ 1 GM, 2 GM, 250 MG, 500 MG 49
cefuroxime axetil TABS 49
CELEBRATE MULTI-COMPLETE 18 CAPS 140
CELEBRATE MULTI-COMPLETE 36 CAPS 140
CELEBRATE MULTI-COMPLETE 45 CAPS 140
CELEBRATE MULTI-COMPLETE 60 CAPS 140
CELEBREX 100 MG (Use celecoxib) 6
CELEBREX 200 MG (Use celecoxib) 6
CELEBREX 400 MG (Use celecoxib) 6
CELEBREX 50 MG (Use celecoxib) 6
celecoxib 100 MG 6
celecoxib 200 MG 6
celecoxib 400 MG 6
celecoxib 50 MG 6
CELEXA TABS (Use citalopram hydrobromide) 20
CELONTIN (Use methsuximide) ..19
CENTAVITE A-Z COMPLETE-MINERAL TABS 90 MG-3 MG-35 MCG-0.4 MG-3 MG-9 MCG-10 MG-3.4 MG-30 MG-5000 UNIT-400 UNIT-30 UNIT-1250 UNIT-27 MG-100 MG-5 MG-15 MCG-7.5 MG-15 MCG-2 MG-15 MG-40 MG-150 MCG-31 MG-10 MCG-7.5 MG ... 140
CENTRAVITES 50 PLUS TABS . 140
CENTRAVITES ADULTS TABS ..140
CENTRAVITES TABS 60 MG-2 MG-30 MCG-400 MCG-6 MCG-10 MG-1.7 MG-20 MG-1.5 MG-400 UNIT-18 MG-100 MG-3.5 MG-160 MCG-5 MCG-80 MG-2 MG-150 MCG-65 MCG-2 MG-10 MCG-15 MG-162 MG-150 MCG-30 UNIT-109 MG-20 MCG-10 MCG-5000 UNIT-25 MCG-72 MG 141
CENTRUM ADULT LIQD 60 MG/15ML-300 MCG/15ML-1.1 MG/15ML-20 MG/15ML-2 MG/15ML-10 MG/15ML-1.7 MG/15ML-10 MCG/15ML-13.5 MG/15ML-9 MG/15ML-2 MG/15ML-25 MCG/15ML-25 MCG/15ML-3 MG/15ML-150 MCG/15ML-390 MCG/15ML-6 MCG/15ML 141
CENTRUM ADULTS TABS 60 MG-2 MG-30 MCG-400 MCG-25 MCG-6 MCG-10 MG-1.7 MG-25 MCG-20 MG-1050 MCG-18 MG-1.5 MG-11 MG-50 MG-80 MG-200 MG-150 MCG-45 MCG-13.5 MG-20 MG-0.5 MG-2.3 MG-55 MCG-35 MCG-72 MG, 60 MG-30 MCG-400 MCG-1.5 MG-20 MG-2 MG-10 MG-1.7 MG-25 MCG-13.5 MG-18 MG-50 MG-2.3 MG-45 MCG-80 MG-35 MCG-0.5 MG-11 MG-200 MG-150 MCG-20 MG-55 MCG-1050 MCG-25 MCG-6 MCG-72 MG 141
CENTRUM CARDIO TABS 141
CENTRUM LIQD 60 MG/15ML-2 MG/15ML-300 MCG/15ML-1.5 MG/15ML-6 MCG/15ML-10 MG/15ML-1.7 MG/15ML-20 MG/15ML-400 UNIT/15ML-30 UNIT/15ML-9 MG/15ML-2.5 MG/15ML-25 MCG/15ML-25 MCG/15ML-3 MG/15ML-150 MCG/15ML-2500 UNIT/15ML, 60 MG/15ML-2 MG/15ML-300 MCG/15ML-30 UNIT/15ML-1.1 MG/15ML-400 UNIT/15ML-6 MCG/15ML-1300 UNIT/15ML-10 MG/15ML-1.7 MG/15ML-20 MG/15ML-9 MG/15ML-2 MG/15ML-25 MCG/15ML-25 MCG/15ML-3 MG/15ML-150 MCG/15ML 143
CENTRUM MEN TABS 141
CENTRUM MENOPAUSE HOT FLASH TABS 141
CENTRUM MENOPAUSE MIND/MOOD TABS 174

CENTRUM MINIS ADULTS 50+ TABS 141

CENTRUM MINIS MEN 50+ TABS 141

CENTRUM MINIS WOMEN 50+ TABS 141

CENTRUM MINIS WOMEN IMMUNE SUP TABS 141

CENTRUM SILVER 50+MEN TABS 120 MG-6 MG-30 MCG-300 MCG-1000 UNIT-100 MCG-1.7 MG-60 MCG-20 MG-30 MCG-3500 UNIT-10 MG-210 MG-600 MCG-1.5 MG-15 MG-75 MG-80 MG-72 MG-50 MCG-150 MCG-60 UNIT-20 MG-0.5 MG-5 MCG-4 MG-21 MCG-10 MCG-60 MCG-72 MG-2 MG, 120 MG-6 MG-30 MCG-300 MCG-1000 UNIT-100 MCG-1.7 MG-60 MCG-20 MG-300 MCG-1050 MCG-10 MG-600 MCG-1.5 MG-15 MG-75 MG-80 MG-210 MG-50 MCG-150 MCG-27 MG-20 MG-0.5 MG-4 MG-21 MCG-60 MCG-72 MG 141

CENTRUM SILVER 50+WOMEN TABS 100 MG-5 MG-30 MCG-400 MCG-1000 UNIT-50 MCG-1.1 MG-50 MCG-14 MG-300 MCG-3500 UNIT-5 MG-8 MG-300 MG-1.1 MG-15 MG-100 MG-80 MG-50 MCG-150 MCG-35 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-22 MCG-10 MCG-52 MCG-72 MG-2 MG 141

CENTRUM SILVER ADULT 50+ TABS 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-220 MG-300 MCG-1.5 MG-11 MG-50 UNIT-50 MG-150 MCG-80 MG-45 MCG-150 MCG-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG, 60 MG-30 MCG-400 MCG-1.5 MG-20 MG-3 MG-10 MG-1.7 MG-250 MCG-300 MCG-25 MCG-22.5 MG-50 MG-2.3 MG-45 MCG-80 MG-50 MCG-0.5 MG-11 MG-220 MG-150 MCG-20 MG-19 MCG-750 MCG-30 MCG-25 MCG-72 MG 142

CENTRUM SILVER MEN 50+ TABS 120 MG-30 MCG-300 MCG-1.5 MG-20 MG-6 MG-100 MCG-10 MG-1.7 MG-300 MCG-600 MCG-1000 UNIT-27 MG-75 MG-4 MG-50 MCG-80 MG-60 MCG-0.5 MG-15 MG-210 MG-150 MCG-20 MG-21 MCG-1050 MCG-60 MCG-72 MG 142

CENTRUM SILVER TABS 400 UNIT-60 MG-3 MG-30 MCG-400 MCG-25 MCG-1.7 MG-10 MCG-20 MG-250 MCG-3500 UNIT-10 MG-300 MCG-1.5 MG-15 MG-2 MG-45 UNIT-100 MG-80 MG-150 MCG-200 MG-75 MCG-150 MCG-48 MG-5 MCG-2 MG-150 MCG-20 MCG-10 MCG-72 MG-2 MG, 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-2500 UNIT-10 MG-1.5 MG-11 MG-150 MCG-50 MG-80 MG-220 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG 142

CENTRUM SILVER ULTRA WOMENS TABS 142

CENTRUM SILVER WOMEN 50+ TABS 100 MG-30 MCG-400 MCG-1.1 MG-14 MG-5 MG-5 MG-1.1 MG-300 MCG-25 MCG-15.8 MG-8 MG-100 MG-2.3 MG-50 MCG-80 MG-52 MCG-0.5 MG-15 MG-300 MG-150 MCG-20 MG-22 MCG-1050 MCG-50 MCG-50 MCG-72 MG 142

CENTRUM SPECIALIST HEART TABS 142

CENTRUM SPECIALIST IMMUNE TABS 142

CENTRUM SPECIALIST VISION TABS 142

CENTRUM ULTRA WOMENS TABS 142

CENTRUM WOMEN TABS 75 MG-2 MG-40 MCG-400 MCG-1000 UNIT-6 MCG-1.1 MG-50 MCG-14 MG-3500 UNIT-15 MG-18 MG-200 MG-1.1 MG-8 MG-100 MG-80 MG-50 MCG-150 MCG-35 UNIT-20 MG-0.5 MG-5 MCG-10 MCG-1.8 MG-18 MCG-10 MCG-32 MCG-72 MG-2 MG, 75 MG-40 MCG-400 MCG-1.1 MG-14 MG-2 MG-15 MG-1.1 MG-25 MCG-15.8 MG-18 MG-100 MG-1.8 MG-50 MCG-80 MG-32 MCG-0.5 MG-8 MG-200 MG-150 MCG-20 MG-18 MCG-1050 MCG-50 MCG-6 MCG-72 MG 143

CENTURY MATURE TABS 90 MG-3 MG-30 MCG-500 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-11 MG-150 MCG-50 MG-80 MG-2 MG-220 MG-45 MCG-150 MCG-50 UNIT-110 MG-0.9 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG 143

CENTURY TABS 90 MG-2 MG-30 MCG-500 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-250 MCG-3500 UNIT-10 MG-18 MG-300 MCG-1.5 MG-11 MG-150 MCG-100 MG-2 MG-200 MG-80 MG-45 MCG-150 MCG-30 UNIT-109 MG-0.9 MG-5 MCG-10 MCG-2.3 MG-55 MCG-10 MCG-35 MCG-72 MG 143

CENVITE LIQD 143

cephalexin CAPS 250 MG, 500 MG 49

cephalexin SUSR 49

CEQUA SOLN 186

CEQUR SIMPL EXT WEAR INSERTER MISC 124

CEQUR SIMPLICITY 1U EXTND WEAR DEVI 124

CEQUR SIMPLICITY 2U DEVI ... 124

CEQUR SIMPLICITY 2U EXTND WEAR DEVI 124

CEQUR SIMPLICITY INSERTER MISC 124

CERAVE THERAPEUTIC HAND CREAM CREA 61

CERDELGA 82

CEREBYX 100 MG PE/2ML (Use fosphenytoin sodium) 19

CEREBYX 500 MG PE/10ML (Use fosphenytoin sodium) 19

CEREZYME 400 UNIT 82

CEROVITE SENIOR TABS 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-50 MG-11 MG-150 MCG-80 MG-220 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG 143

CERTAVITE SENIOR TABS 143

CERTAVITE SENIOR/ANTIOXIDANT TABS ... 143

CERTAVITE/ANTIOXIDANTS TABS . 143

CETAPHIL DAILY FACIAL SPF 50 LOTN 62

cetirizine hcl CAPS 29

cetirizine hcl CHEW 10 MG 29

cetirizine hcl SOLN PO 29

cetirizine hcl TABS 29

cetirizine-pseudoephedrine 51

CHEMET 27

chenodiol 77

chlordiazepoxide hcl CAPS 12

chlorhexidine gluconate (mouth-throat) 134

chlorhexidine gluconate SOLN EX 4 % 43

chloroquine phosphate TABS 250 MG 33

chloroquine phosphate TABS 500 MG 33

chlorpheniramine maleate SYRP .. 29

chlorpheniramine maleate TABS .. 29

chlorpromazine hcl SOLN 25 MG/ML 42

chlorpromazine hcl TABS 10 MG .. 42

chlorpromazine hcl TABS 25 MG, 50 MG, 100 MG, 200 MG 42

chlorthalidone 25 MG, 50 MG 74

chlorzoxazone TABS 250 MG, 375 MG, 750 MG 180

chlorzoxazone TABS 500 MG 180

CHOICEFUL MULTIVITAMIN CAPS . 143

CHOLBAM 77

cholecalciferol CAPS 125 MCG, 5000 UNIT, 125 MCG 199

cholecalciferol CHEW 400 UNIT . 199

cholecalciferol LIQD PO 199

cholecalciferol TABS 10 MCG, 1000 UNIT, 25 MCG, 400 UNIT, 25 MCG 199

cholestyramine light PACK 30

cholestyramine light POWD 30

cholestyramine PACK 30

cholestyramine POWD 30

choline fenofibrate 30

CHOSEN LANCETS 30G 94

CHOSEN LANCING DEVICE MISC 94

CHOSEN SAFETY LANCETS 28G 94

CIALIS 5 MG (Use tadalafil) 47

CIBINQO 59

cilostazol 81

CILOXAN OINT 186

CIMDUO 43

cimetidine hcl PO 300 MG/5ML .. 195

cimetidine TABS 195

CIMZIA (1 SYRINGE) PSKT 200 MG/ML 78

CIMZIA (2 SYRINGE) PSKT 78

CIMZIA KIT 78

CIMZIA-STARTER PSKT 78

CINQAIR 13

CINRYZE SOLR IV 81

CINVANTI EMUL 28

CIPRO HC 1 %-0.2 % (Use ciprofloxacin-hydrocortisone) 188

CIPRO SUSR 77

CIPRO TABS 250 MG, 500 MG (Use

ciprofloxacin hcl) 77

ciprofloxacin hcl (ophth) SOLN ... 186

ciprofloxacin hcl (otic) 188

ciprofloxacin hcl TABS 250 MG, 500 MG, 750 MG 77

ciprofloxacin-dexamethasone 188

ciprofloxacin-hydrocortisone 189

CITALOPRAM HYDROBROMIDE CAPS 30 MG (Use citalopram hydrobromide) 20

citalopram hydrobromide CAPS 30 MG 20

citalopram hydrobromide SOLN ... 20

citalopram hydrobromide TABS ... 20

CITRACAL +D3 TABS 144

CITRANATAL B-CALM 120 MG-25 MG-1 MG-400 UNIT-120 MG-20 MG 177

cladribine (multiple sclerosis) 10 MG . 192

CLARINEX TABS (Use desloratadine) 29

CLARINEX-D 12 HOUR TB12 51

clarithromycin SUSR 86

clarithromycin TABS 86

clarithromycin TB24 86

CLASSIC PRENATAL TABS 178

CLEOCIN CREA (Use clindamycin phosphate vaginal) 198

CLEOCIN SUPP 198

CLEOCIN-T LOTN (Use clindamycin phosphate (topical)) 53

CLEVER CHEK AUTO-CODE DEVI . 95

CLEVER CHEK AUTO-CODE SYSTEM DEVI 94

CLEVER CHEK AUTO-CODE TEST STRP 64

CLEVER CHEK AUTO-CODE VOICE DEVI 94

CLEVER CHEK AUTO-CODE VOICE STRP 64

CLEVER CHEK LANCETS 95

CLEVER CHEK SYSTEM KIT 95

CLEVER CHEK TEST STRP 64

CLEVER CHOICE AUTO-CODE SYSTEM DEVI 95

CLEVER CHOICE AUTO-CODE TEST STRP 64

CLEVER CHOICE COMFORT EZ 95

CLEVER CHOICE GLUCOSE CONTROL LIQD 95

CLEVER CHOICE HOLDING CHAMBER DEVI 128

CLEVER CHOICE LANCETS 23G 95

CLEVER CHOICE LANCETS 28G 95

CLEVER CHOICE MICRO SYSTEM KIT 95

CLEVER CHOICE MICRO TEST STRP 64

CLEVER CHOICE MINI SYSTEM DEVI 95

CLEVER CHOICE NO CODING STRP 65

CLEVER CHOICE TALK SYSTEM DEVI 95

CLEVER CHOICE TALK SYSTEM STRP 65

clindamycin hcl 150 MG, 300 MG . 12

clindamycin palmitate hydrochloride . 12

clindamycin phosphate (topical) FOAM 53

clindamycin phosphate (topical) GEL 53

clindamycin phosphate (topical) LOTN 53

clindamycin phosphate (topical) SOLN 53

clindamycin phosphate (topical) SWAB 53

clindamycin phosphate vaginal CREA 198

clindamycin phosphate-benzoyl peroxide (refrigerate) 53

clindamycin phosphate-benzoyl peroxide GEL 53

clindamycin phosphate-tretinoin .. 53

CLINDESSE 198

clobazam SUSP 17

clobazam TABS 17

clobetasol propionate CREA 0.05 % . 57

clobetasol propionate emollient base 0.05 % 57

clobetasol propionate emulsion ... 57

clobetasol propionate FOAM 57

clobetasol propionate GEL 0.05 % 57

clobetasol propionate LIQD 57

clobetasol propionate LOTN 57

clobetasol propionate OINT 0.05 % 57

clobetasol propionate SHAM 57

clobetasol propionate SOLN 0.05 % . 57

clocortolone pivalate 57

clomipramine hcl 22

CLONAZEPAM TABS 0.25 MG ... 17

clonazepam TABS 17

clonazepam TBDP 17

clonidine hcl (adhd) TB12 2

clonidine hcl TABS 32

clonidine PTWK 32

clopidogrel bisulfate 81

clorazepate dipotassium TABS 12

clotrimazole (topical) CREA 54

clotrimazole (topical) SOLN 54

clotrimazole vaginal CREA 1 % .. 198

clotrimazole vaginal CREA 2 % .. 198

clotrimazole w/ betamethasone CREA 54

clotrimazole w/ betamethasone LOTN 54

clozapine TABS 42

clozapine TBDP 42

CLOZARIL TABS 25 MG, 100 MG (Use clozapine) 42

CO MONITOR DEVI 128

COAGADEX 80

COAGUCHEK LANCETS 95

coal tar extract SHAM 0.5 % 63

COARTEM 33

COBENFY CAPS 42

COBENFY STARTER PACK CPPK 42

codeine sulfate TABS 30 MG 8

CODEINE SULFATE TABS 8

colchicine CAPS 80

colchicine TABS 80

colchicine w/ probenecid 80

colesevelam hcl PACK 30

colesevelam hcl TABS 30

COLESTID GRAN (Use colestipol hcl) 30

COLESTID TABS (Use colestipol hcl) 30

colestipol hcl GRAN 30

colestipol hcl PACK 30

colestipol hcl TABS 30

COLLAVERA GEL 2 % 60

COMBIGAN (Use brimonidine tartrate-timolol maleate) 185

COMBIPATCH PTTW 76

COMBIVENT RESPIMAT AERS .. 15

COMETRIQ (100 MG DAILY DOSE) KIT 37

COMETRIQ (140 MG DAILY DOSE) KIT 37

COMETRIQ (60 MG DAILY DOSE) KIT 37

COMFORT ASSURED LANCETS 28G 95

COMFORT ASSURED LANCETS 33G 95

COMFORT EZ INSULIN SYRINGE . 124

COMFORT TOUCH LANCETS 31G . 95

COMFORT TOUCH PLUS LANCETS 30G 95

COMIRNATY SUSY 197

COMPACT SPACE CHAMBER DEVI 128

COMPACT SPACE CHAMBER/LG MASK DEVI 128

COMPACT SPACE CHAMBER/MED MASK DEVI 128

COMPACT SPACE CHAMBER/SM MASK DEVI 128

COMPANION TABS 100 MG-5 MG-30 MCG-30 UNIT-400 MCG-30 MCG-3500 UNIT-5 MG-100 MG-20 MG-10 MG-100 MG-5 MG-100 MG-15 MG-2 MG-250 MCG-2 MG-10 MCG-75 MCG-150 MCG-120 MCG-20 MCG 144

COMPETE TABS 90 MG-20.6 MG-0.4 MG-9 MCG-2.6 MG-30 MG-5000 UNIT-2 MG-400 UNIT-45 UNIT-27 MG-22.5 MG 144

COMPLETE MULTIVITAMIN/MINERAL LIQD 60 MG/15ML-300 MCG/15ML-1.5 MG/15ML-2 MG/15ML-1000 UNIT/15ML-6 MCG/15ML-1300 UNIT/15ML-10 MG/15ML-1.7 MG/15ML-20 MG/15ML-9 MG/15ML-3 MG/15ML-25 MCG/15ML-150 MCG/15ML-30 UNIT/15ML-2 MG/15ML-25 MCG/15ML 144

COMPLETE NATAL DHA 178

COMPLETENATE CHEW 178

COMPLETIA DIABETIC MULTIVIT TABS 144

CONCEPT DHA 178
CONCEPT OB 178
CONCERTA TBCR (Use methylphenidate hcl) 2
CONEXXENCE SOSY SC 60 MG/ML 74
CONTOUR CONTROL LIQD 96
CONTOUR MONITOR DEVI 96
CONTOUR NEXT CONTROL SOLN . 96
CONTOUR NEXT EZ KIT 96
CONTOUR NEXT GEN MONITOR KIT 96
CONTOUR NEXT LINK KIT 96
CONTOUR NEXT MONITOR KIT . 96
CONTOUR NEXT ONE KIT 96
CONTOUR NEXT TEST STRP 65
CONTOUR PLUS BLUE KIT 96
CONTOUR PLUS CONTROL SOLUTION LIQD 96
CONTOUR PLUS TEST STRP 65
CONTOUR TEST STRP 65
CONTROL SOLN 96
CONZIP CP24 (Use tramadol hcl) .. 8
COPA ISLAND BORDERED FOAM PADS 87
COPA PLUS HYDROPHILIC FOAM PADS 87
COPAXONE SOSY 20 MG/ML (Use glatiramer acetate) 192
COPAXONE SOSY 40 MG/ML (Use glatiramer acetate) 192
COPIKTRA 37
COPPERTONE BABY PURE & SIMPLE LOTN 62
COPPERTONE COMPLETE SPF30 LOTN 62
COPPERTONE GLOW PROTECT & TAN LOTN 62
COPPERTONE GLOW SHIMMER SPF15 LOTN 62
COPPERTONE GLOW SHIMMER SPF30 LOTN 62
COPPERTONE GLOW SHIMMER SPF50 LOTN 62
COPPERTONE KIDS PURE & SIMPLE LOTN 62
COPPERTONE LIMITED EDITION LOTN 62
COPPERTONE OIL FREE FACE SPF30 LOTN 62
COPPERTONE OIL FREE FACE SPF50 LOTN 62
COPPERTONE PURE & SIMPLE FACE LOTN 62
COPPERTONE SPORT 4-IN-1 SPF15 LOTN 62
COPPERTONE SPORT CLEAR LOTN 62
COPPERTONE TANNING SPF 8 LOTN 62
COPPERTONE TANNING SPF15 LOTN 62
COPPERTONE ULTRAGUARD SPF70+ LOTN 62
COPPERTONE WATERBABIES SPF50 LOTN 62
CORAL CALCIUM PLUS CAPS .. 144
COREVIA TABS 144
CORIFACT 80
CORLANOR SOLN 48
CORLANOR TABS (Use ivabradine hcl) 48
CORTISONE ACETATE TABS 50
COSENTYX (300 MG DOSE) SOSY . 55
COSENTYX SENSOREADY (300 MG) SOAJ 55
COSENTYX SENSOREADY PEN SOAJ 55
COSENTYX SOLN 55
COSENTYX SOSY 150 MG/ML ... 55
COSENTYX SOSY 75 MG/0.5ML . 55
COSENTYX UNOREADY SOAJ .. 55
COSOPT (Use dorzolamide hcl-timolol maleate) 185
COSOPT PF (Use dorzolamide hcl-timolol maleate) 185
COTELLIC 37
COTEMPLA XR-ODT TBED 2
COVRSITE COVER DRESSING PADS 87
COVRSITE PLUS COMPOSITE DRESS PADS 87
COXANTO CAPS (Use oxaprozin) . 6
COZAAR (Use losartan potassium) 32
CREON CPEP 73
CRESTOR TABS 10 MG (Use rosuvastatin calcium) 30
CRESTOR TABS 20 MG, 40 MG (Use rosuvastatin calcium) 31
CRESTOR TABS 5 MG (Use

rosuvastatin calcium) 30

CREXONT CPCR 40

cromolyn sodium (nasal) 5.2 MG/ACT 180

cromolyn sodium (ophth) 188

cromolyn sodium NEBU 13

crotamiton LOTN 62

CTEXLI TABS PO 250 MG 77

CULTURELLE PROBIOTIC MEN DAILY CAPS 144

CURITY ALL PURPOSE SPONGES PADS 87

CURITY AMD ANTIMICROBIAL SPNGE PADS 87

CURITY COVER SPONGE PADS .87

CURITY DRESSING SPONGES PADS 87

CURITY GAUZE PADS 87

CURITY GAUZE SPONGE PADS .87

CURITY NON-ADHERENT STRIPS PADS 87

CURITY SPONGES PADS 87

CUTAQUIG 189

CUVITRU SOLN 189

CUVRIOR 133

CVS ADHESIVE PAD 4"X4" PADS 87

CVS ADHESIVE PAD 6"X6" PADS 87

CVS ADHESIVE PADS 2.25"X3" PADS 87

CVS ADULT 50+ EYE HEALTH CAPS 144

CVS ADVANCED GLUCOSE TEST STRP 65

CVS ANTIBACTERIAL GAUZE PADS 87

CVS BLOOD GLUCOSE METER DEVI 96

CVS BLOOD GLUCOSE METER KIT 96

CVS DAILY MULTIPLE FOR MEN TABS 60 MG-3 MG-75 MCG-400 MCG-700 UNIT-18 MCG-1.7 MG-20 MCG-18 MG-3500 UNIT-16 MG-300 MCG-1.35 MG-140 MG-15 MG-2 MG-210 MG-22.5 UNIT-2 MG-120 MCG-110 MCG 144

CVS DAILY MULTIPLE WOMEN 50+ TABS 120 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-15 MG-500 MG-4.5 MG-50 MG-24 MG-90 MCG-150 MCG-30 UNIT-2.2 MG-4.2 MG-180 MCG-3500 UNIT-27 MCG 144

CVS DAILY MULTIV/MINERAL MENS TABS 144

CVS DAILY MULTIVITAMIN MENS TABS 144

CVS DAILY MULTIVITAMIN WOMENS TABS 144

CVS EYE HEALTH & LUTEIN TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG 144

CVS EYE HEALTH ADULT 50+ CAPS 144

CVS GAUZE PAD STERILE PADS 87

CVS GAUZE PADS 87

CVS GAUZE STERILE PADS 87

CVS GLUCOSE METER TEST STRIPS STRP 65

CVS IMMUNE SUPPORT CAPS .144

CVS KETONE CARE 65

CVS LANCETS THIN 26G 96

CVS ONE DAILY ESSENTIAL TABS 60 MG-2 MG-0.4 MG-1.5 MG-400 UNIT-6 MCG-1.7 MG-20 MG-3000 UNIT-10 MG-45 MG-30 UNIT 144

CVS ONE DAILY MENS 50+ ADV TABS 144

CVS ONE DAILY MENS FORMULA TABS 60 MG-3 MG-75 MCG-400 MCG-700 UNIT-18 MCG-1.7 MG-20 MCG-18 MG-16 MG-300 MCG-1.35 MG-15 MG-2 MG-140 MG-210 MG-22.5 UNIT-2 MG-3500 UNIT-110 MCG-120 MCG 145

CVS ONE DAILY WOMENS 50+ ADV TABS 145

CVS ONE DAILY WOMENS FORMULA TABS 75 MG-1.7 MG-1000 MCG-400 MCG-25 MCG-6 MCG-1.3 MG-25 MCG-16 MG-700 MCG-5 MG-18 MG-380 MG-1.2 MG-8 MG-0.9 MG-150 MCG-7.5 MG-1.8 MG-25 MCG-27.5 MCG, 75 MG-1.7 MG-1000 MCG-400 MCG-25 MCG-6 MCG-1.3 MG-25 MCG-16 MG-700 MCG-5 MG-18 MG-380 MG-1.2 MG-8 MG-0.9 MG-7.5 MG-150 MCG-1.8 MG-25 MCG-27.5 MCG 145

CVS PRENATAL GUMMY 15 MG-1.25 MG-400 MCG-200 UNIT-4 MCG-5 MG-1800 UNIT-25 MG-10 MG-7.5 UNIT-1.9 MG-113.5 MG-5 MG-35 MG 178

CVS PRENATAL TABS 100 MG-2.6 MG-800 MCG-400 UNIT-4 MCG-1.7 MG-18 MG-27 MG-1.5 MG-25 MG-263 MG-11 UNIT-4000 UNIT 178

CVS SPECTRAVITE ADULT 50+ TABS 145

CVS SPECTRAVITE ADULTS TABS 145

CVS SPECTRAVITE ADVANCED TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-3500 UNIT-10 MG-18 MG-1.5 MG-50 MG-11 MG-200 MG-80 MG-45 MCG-150 MCG-30 UNIT-20 MG-0.5 MG-5 MCG-10 MCG-2.3 MG-75 MCG-55 MCG-10 MCG-35 MCG-72 MG-2 MG, 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-3500 UNIT-10 MG-18 MG-1.5 MG-50 MG-11 MG-80 MG-200 MG-45 MCG-150 MCG-30 UNIT-20 MG-0.5 MG-5 MCG-10 MCG-2.3 MG-75 MCG-55 MCG-10 MCG-35 MCG-72 MG-2 MG 145

CVS SPECTRAVITE MEN 50+ TABS 120 MG-30 MCG-300 MCG-1.5 MG-20 MG-6 MG-10 MG-1.7 MG-300 MCG-600 MCG-25 MCG-27 MG-75 MG-4 MG-50 MCG-5 MCG-80 MG-2 MG-60 MCG-0.5 MG-10 MCG-15 MG-210 MG-150 MCG-20 MG-21 MCG-1050 MCG-60 MCG-100 MCG-72 MG, 120 MG-6 MG-30 MCG-27 MG-300 MCG-25 MCG-100 MCG-1.7 MG-60 MCG-20 MG-300 MCG-1050 MCG-10 MG-600 MCG-1.5 MG-75 MG-15 MG-210 MG-80 MG-50 MCG-150 MCG-20 MG-0.5 MG-5 MCG-4 MG-21 MCG-10 MCG-60 MCG-72 MG-2 MG 145

CVS SPECTRAVITE MEN TABS 90 MG-2 MG-40 MCG-200 MCG-25 MCG-6 MCG-1.3 MG-60 MCG-16 MG-900 MCG-15 MG-8 MG-600 MCG-1.2 MG-100 MG-11 MG-210 MG-80 MG-50 MCG-150 MCG-45 MG-20 MG-0.9 MG-5 MCG-10 MCG-2.3 MG-100 MCG-10 MCG-35 MCG-72 MG-2 MG 146

CVS SPECTRAVITE SENIOR TABS 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-50 MG-11 MG-80 MG-150 MCG-220 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG 146

CVS SPECTRAVITE ULTRA MEN 50+ TABS 146

CVS SPECTRAVITE ULTRA MENS TABS 146

CVS SPECTRAVITE ULTRA WOMEN TABS 146

CVS SPECTRAVITE WOMEN 50+ TABS 100 MG-30 MCG-400 MCG-1.1 MG-14 MG-5 MG-5 MG-1.1 MG-300 MCG-25 MCG-17.5 MG-8 MG-100 MG-2.3 MG-50 MCG-5 MCG-80 MG-2 MG-52 MCG-0.5 MG-10 MCG-15 MG-300 MG-150 MCG-20 MG-22 MCG-1052 MCG-50 MCG-50 MCG-72 MG, 100 MG-5 MG-30 MCG-400 MCG-25 MCG-50 MCG-1.1 MG-50 MCG-14 MG-300 MCG-1052 MCG-5 MG-8 MG-1.1 MG-100 MG-15 MG-300 MG-80 MG-50 MCG-150 MCG-17.5 MG-20 MG-0.5 MG-5 MCG-2.3 MG-22 MCG-10 MCG-52 MCG-72 MG-2 MG 146

CVS SPECTRAVITE WOMEN TABS 75 MG-40 MCG-400 MCG-1.1 MG-14 MG-2 MG-15 MG-1.1 MG-25 MCG-15.8 MG-18 MG-100 MG-1.8 MG-50 MCG-80 MG-32 MCG-0.5 MG-8 MG-200 MG-150 MCG-20 MG-18 MCG-1050 MCG-50 MCG-6 MCG-72 MG 146

CVS SPECTRAVITE WOMENS SENIOR TABS 100 MG-5 MG-30 MCG-400 MCG-800 UNIT-50 MCG-1.1 MG-50 MCG-14 MG-300 MCG-3500 UNIT-5 MG-8 MG-1.1 MG-50 MG-15 MG-80 MG-150 MCG-500 MG-50 MCG-150 MCG-35 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-50 MCG-72 MG-2 MG 146

CVS TRUE METRIX GLUCOSE TEST STRP 65

CVS VISION HEALTH CAPS 146

CVS WOMENS ACTIVE DAILY TABS 60 MG-3.2 MG-30 MCG-400 MCG-800 UNIT-9.5 MCG-2.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-2.4 MG-50 MG-15 MG-2 MG-300 MG-30 UNIT-2 MG-120 MCG-20 MCG-180 MG 147

cyanocobalamin SOLN IJ 1000 MCG/ML 82

cyclobenzaprine hcl CP24 180

cyclobenzaprine hcl TABS 7.5 MG 180

cyclobenzaprine hcl TABS 180

CYCLOGYL 0.5 % 185

CYCLOGYL 2 % 185

cyclopentolate hcl 1 % 185

cyclophosphamide CAPS 34

CYCLOPHOSPHAMIDE TABS 50 MG 34

CYCLOSET 23

cyclosporine (ophth) EMUL 186

cyclosporine CAPS 133

cyclosporine modified (for microemulsion) CAPS 133

cyclosporine modified (for microemulsion) SOLN 133

CYLTEZO (2 PEN) AJKT 4

CYLTEZO (2 SYRINGE) PSKT 4

cyproheptadine hcl SYRP 29

cyproheptadine hcl TABS 29

CYTOGAM SOLN 189

CYTRA K CRYSTALS PACK 1002 MG-3300 MG 79

dabigatran etexilate mesylate CAPS . 16

DAILY BETIC TABS 60 MG-2.5 MG-75 MCG-200 MCG-50 MG-200 UNIT-5 MCG-2500 UNIT-1.7 MG-20 MG-250 MCG-10 MG-100 MG-1.5 MG-100 MG-30 UNIT-50 MG-75 MCG-7.5 MG-2.5 MG-25 MCG-50 MCG-100 MCG 147

DAILY COMBO MULTI VITAMINS TABS 400 UNIT-60 MG-2 MG-0.4 MG-20 MG-6 MCG-10 MG-1.7 MG-1.5 MG-30 UNIT-27 MG-15 MG-450 MG-5000 UNIT 147

DAILY MULTIPLE VITAMINS TABS . 174

DAILY MULTIPLE VITAMINS/MIN TABS 400 UNIT-60 MG-2 MG-30 MCG-400 MCG-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-1.5 MG-100 MG-10 MCG-130 MG-40 MG-150 MCG-30 UNIT-100 MG-15 MG-2 MG-2.5 MG-10 MCG-10 MCG ... 147

DAILY MULTIVITAMIN CAPS 2 MG-30 MCG-30 UNIT-200 MCG-2000 UNIT-6 MCG-10 MG-1.7 MG-100 MCG-20 MG-2 MG-30 MG-500 MCG-1 MG-1.5 MG-15 MG-40 MG-120 MG-2 MG-5000 UNIT-75 MCG-150 MCG-120 MCG-70 MCG 147

DAILY VALUE MULTIVITAMIN TABS 400 UNIT-60 MG-2 MG-300 MCG-30 UNIT-400 MCG-1.5 MG-6 MCG-5000 UNIT-1.7 MG-20 MG-10 MG, 400 UNIT-60 MG-2 MG-300 MCG-400 MCG-1.5 MG-6 MCG-5000 UNIT-1.7 MG-20 MG-10 MG-30 UNIT 174

DAILY VITAMINS TABS 60 MG-2 MG-0.4 MG-1.5 MG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT . 174

DAILY VITE MULTIVITAMIN/IRON TABS 50 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-15 MG-1.5 MG 135

DAILY VITE TABS 400 UNIT-60 MG-2 MG-30 UNIT-400 MCG-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-1.5 MG, 60 MG-2 MG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-1.5 MG-30 UNIT 174

DAILY VITES TABS 60 MG-2 MG-0.4 MG-1.5 MG-6 MCG-5000 UNIT-10 MG-1.7 MG-20 MG-400 UNIT-30 UNIT 174

DAILY-VITE MULTIVITAMIN TABS 60 MG-2 MG-400 MCG-20 MG-1.5 MG-10 MCG-6 MCG-1.7 MG-1500 MCG 174

DAILY-VITE TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-3000 UNIT-10 MG-1.5 MG-45 MG-30 UNIT 174

dalfampridine 192

DALIRESP (Use roflumilast) 14

DANTRIUM CAPS 25 MG (Use dantrolene sodium) 180

dantrolene sodium CAPS 180

DANZITEN 37

dapagliflozin TABS PO 5 MG, 10 MG . 26

dapagliflozin-metformin hcl TB24 PO 1000 MG-10 MG, 1000 MG-5 MG . 22

dapagliflozin-saxagliptin 22

dapsone (topical) 53

dapsone 12

DAPTACEL 195

darifenacin hydrobromide 196

darunavir TABS 600 MG 43

darunavir TABS 800 MG 43

dasatinib 37

DAURISMO 35

DAVIMET-FLUORIDE CHEW 177

DAWNZERA SOAJ SC 80 MG/0.8ML 82

DAYAVITE TABS 147

DAYBUE 183

DAYBUE STIX PO 5000 MG, 6000 MG, 8000 MG 183

DAYHIST ALLERGY 12 HOUR RELIEF TABS 29

DAYVIGO 85

DECUBI-VITE CAPS 147

deferasirox TABS 27

deflazacort SUSP 50

deflazacort SUSP 51

deflazacort TABS 51

DEKAS PLUS CAPS 147

DEKAS PLUS OCEAN CAPS 147

DELSTRIGO 43

DENGVAXIA 197

DEPAKOTE ER TB24 (Use divalproex sodium) 20
DEPAKOTE SPRINKLES CSDR (Use divalproex sodium) 20
DEPAKOTE TBEC (Use divalproex sodium) 20
DEPEN TITRATABS TABS (Use penicillamine) 133
DEPLIN MA CAPS 147
DEPLINPRO MOOD HEALTH CAPS 147
DEPO-SUBQ PROVERA 104 SUSY SC 50
DERMA-SMOOTHE/FS BODY OIL (Use fluocinolone acetonide) 57
DERMA-SMOOTHE/FS SCALP OIL (Use fluocinolone acetonide) 57
DERMACEA DRAIN SPONGES PADS 88
DERMACEA GAUZE SPONGE PADS 88
DERMACEA IV DRAIN SPONGES PADS 88
DERMACEA IV SPONGES PADS 88
DERMACEA NON-WOVEN SPONGES PADS 88
DERMACEA TYPE VII GAUZE PADS 88
DERMACEA X-RAY SPONGES PADS 88
DERMACINRX BOOSTERVITE TABS 135
DERMACINRX MULTITAM TABS 147
DERMACINRX RIBOTIN-E TABS 147
DERMACINRX ZINTREXYL-C TABS 147
DERMAVITE TABS 147
DESCOVY 43
desipramine hcl TABS 10 MG, 50 MG, 75 MG, 100 MG, 150 MG 22
desipramine hcl TABS 25 MG 22
DESLORATADINE SOLN PO 0.5 MG/ML 29
desloratadine TABS 29
desloratadine TBDP 29
desmopressin acetate SOLN IJ 76
desmopressin acetate spray 76
desmopressin acetate spray refrigerated 0.01 % 76
desmopressin acetate TABS 76
desogestrel & ethinyl estradiol 49
desogestrel-ethinyl estradiol (biphasic) 49
desogestrel-ethinyl estradiol (triphasic) 49
desonide CREA 57
desonide LOTN 57
desonide OINT 57
desoximetasone CREA 57
desoximetasone GEL 57
desoximetasone LIQD 57
desoximetasone OINT 57
DESTRESS-IRON TABS 135
DESVENLAFAXINE ER 21
desvenlafaxine succinate 21
DETROL TABS (Use tolterodine tartrate) 196
dexamethasone ELIX 51
DEXAMETHASONE INTENSOL CONC 51
dexamethasone sodium phosphate (ophth) 187
dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML 51
DEXAMETHASONE SODIUM PHOSPHATE SOLN IJ 4 MG/ML 51
dexamethasone sodium phosphate SOSY IJ 4 MG/ML 51
dexamethasone SOLN 51
dexamethasone TABS 51
DEXATRAN CAPS 147
DEXCOM G6 RECEIVER 96
DEXCOM G6 SENSOR 96
DEXCOM G6 TRANSMITTER 96
DEXCOM G7 15 DAY SENSOR 96
DEXCOM G7 RECEIVER 96
DEXCOM G7 SENSOR 97
DEXEDRINE CP24 10 MG, 15 MG (Use dextroamphetamine sulfate) 1
DEXILANT (Use dexlansoprazole) 195
dexlansoprazole 195
dexmethylphenidate hcl CP24 2
dexmethylphenidate hcl TABS 2
DEXTENZA INST 187
dextran 70-hypromellose 0.3 %-0.1 % 184
dextroamphetamine sulfate CP24 1

dextroamphetamine sulfate SOLN . . 1

dextroamphetamine sulfate TABS . . 1

dextromethorphan polistirex SUER 51

dextromethorphan-doxylamine-acetaminophen LIQD 51

dextromethorphan-guaifenesin LIQD 100 MG/5ML-10 MG/5ML, 100 MG/5ML-5 MG/5ML, 150 MG/7.5ML-15 MG/7.5ML, 200 MG/10ML-20 MG/10ML, 200 MG/5ML-10 MG/5ML, 400 MG/20ML-20 MG/20ML 52

dextromethorphan-guaifenesin SYRP 100 MG/5ML-10 MG/5ML, 200 MG/10ML-20 MG/10ML 52

dextromethorphan-guaifenesin TABS 400 MG-20 MG 52

dextromethorphan-guaifenesin TB12 600 MG-30 MG 52

dextromethorphan-phenylephrine-acetaminophen CAPS 52

dextrose (diabetic use) CHEW 4 GM . 23

dextrose (diabetic use) GEL 23

DHIVY TABS 40

DIABETES HEALTH FORMULA TABS 90 MG-3 MG-300 MCG-500 MCG-600 UNIT-30 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-1.5 MG-1.5 MG-50 MG-150 MCG-220 MG-80 MG-2 MG-45 MCG-150 MCG-50 UNIT-110 MG-5 MCG-2.3 MG-35 MCG-10 MCG-600 MCG-72 MG-12 MG, 90 MG-3 MG-300 MCG-500 MCG-600 UNIT-30 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-1.5 MG-1.5 MG-50 MG-45 MCG-5 MCG-150 MCG-10 MCG-220 MG-80 MG-2 MG-150 MCG-50 UNIT-110 MG-35 MCG-2.3 MG-200 MCG-72 MG-12 MG 147

DIACOMIT CAPS 17

DIACOMIT PACK 17

DIALYVITE 800/ULTRA D TABS 80 MG-10 MG-300 MCG-800 MCG-2000 UNIT-6 MCG-10 MG-1.7 MG-20 MG-1.5 MG-15 MG-30 UNIT-70 MCG 147

DIALYVITE SUPREME D TABS . 148

diaper rash products OINT 59

DIATROL TABS 148

DIATRUE CONTROL LEVEL 1 SOLN 97

DIATRUE CONTROL LEVEL 2 SOLN 97

DIATRUE CONTROL LEVEL 3 SOLN 97

DIATRUE PLUS BLOOD GLUCOSE DEVI 97

DIATRUE PLUS TEST STRP 65

diazepam (anticonvulsant) GEL . . . 17

diazepam CONC 12

diazepam SOLN IJ 5 MG/ML, 10 MG/2ML 12

DIAZEPAM SOLN IJ 5 MG/ML 12

diazepam SOLN PO 5 MG/5ML . . . 12

diazepam TABS 12

diazoxide 23

dibucaine 60

DICLEGIS TBEC (Use doxylamine-pyridoxine) 28

diclofenac epolamine PTCH EX . . . 54

diclofenac potassium TABS 50 MG . 6

diclofenac sodium (actinic keratoses) EX 55

diclofenac sodium (ophth) 188

diclofenac sodium (topical) GEL EX 54

diclofenac sodium (topical) SOLN EX 1.5 % 54

diclofenac sodium (topical) SOLN EX 2 % 54

diclofenac sodium TB24 6

diclofenac sodium TBEC 6

diclofenac w/ misoprostol TBEC 6

dicloxacillin sodium 190

dicyclomine hcl CAPS 195

dicyclomine hcl SOLN PO 195

dicyclomine hcl TABS 195

DIFICID SUSR 87

DIFICID TABS 200 MG (Use fidaxomicin) 87

diflorasone diacetate CREA 57

diflorasone diacetate OINT 57

diflunisal TABS 8

difluprednate 187

digoxin SOLN PO 0.05 MG/ML 47

digoxin TABS 125 MCG, 250 MCG 47

dihydroergotamine mesylate SOLN IJ 1 MG/ML 130

dihydroergotamine mesylate SOLN NA 4 MG/ML 130

DILANTIN (Use phenytoin sodium extended) 19

DILANTIN 19
DILANTIN INFATABS CHEW (Use phenytoin) 19
DILANTIN-125 SUSP (Use phenytoin) 19
diltiazem hcl coated beads CP24 ..46
diltiazem hcl CP12 46
diltiazem hcl CP24 46
diltiazem hcl extended release beads 46
diltiazem hcl TABS 46
diltiazem hcl TB24 180 MG, 240 MG, 300 MG, 360 MG, 420 MG 46
diltiazem hcl TB24 46
dimenhydrinate TABS 28
dimethicone (topical) CREA 1 % ..61
dimethyl fumarate CDPK 192
dimethyl fumarate CPDR 192
DIOVAN HCT (Use valsartan-hydrochlorothiazide) 32
DIOVAN TABS (Use valsartan) 32
DIPENTUM 78
diphenhydramine hcl (sleep) CAPS 84
diphenhydramine hcl (sleep) LIQD 84
diphenhydramine hcl (sleep) TABS 25 MG 84
diphenhydramine hcl (sleep) TABS 50 MG 84
diphenhydramine hcl CAPS 29
diphenhydramine hcl ELIX 12.5 MG/5ML 29
diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML 29
diphenoxylate w/ atropine LIQD ... 27
diphenoxylate w/ atropine TABS ...27
DIPROLENE OINT (Use betamethasone dipropionate augmented) 57
dipyridamole 81
DISKETS TBSO 40 MG (Use methadone hcl) 8
disopyramide phosphate CAPS ... 13
disulfiram 250 MG 190
divalproex sodium CSDR 20
divalproex sodium TB24 20
divalproex sodium TBEC 20
docosanol 56
docusate calcium 86
docusate sodium CAPS 100 MG, 250 MG 86
docusate sodium LIQD 50 MG/5ML, 100 MG/10ML 86
DOCUSATE SODIUM SYRP 86
docusate sodium TABS 86
dofetilide 13
DOLOBID TABS 8
donepezil hydrochloride TABS ... 191
donepezil hydrochloride TBDP ... 191
dorzolamide hcl 188
dorzolamide hcl-timolol maleate .185
DOVATO 43
doxazosin mesylate 32
doxepin hcl (antipruritic) 55
doxepin hcl (sleep) 84
doxepin hcl CAPS 22
doxepin hcl CONC 22
doxycycline (monohydrate) CAPS 50 MG, 100 MG 194
doxycycline (monohydrate) TABS 50 MG, 100 MG 194
doxycycline hyclate CAPS 194
doxycycline hyclate TABS 100 MG 194
doxylamine succinate (sleep) 84
doxylamine-pyridoxine TBEC 28
DRIZALMA SPRINKLE CSDR 21
dronabinol CAPS 28
DRONABINOL SOLN 5 MG/ML ... 28
droperidol SOLN 2.5 MG/ML 12
DROPLET GENTEEL LANCING DEVICE MISC 97
DROPLET INSULIN SYRINGE ..124
DROPLET LANCETS ULTRA THIN 30G 97
DROPLET LANCING DEVICE MISC . 97
DROPLET MEDLANCE LANCET 30G 97
DROPLET PERSONAL LANCETS 30G 97
DROPSAFE ACTI-LANCE 23G ...97
DROPSAFE ACTI-LANCE LANCET 17G 97
DROPSAFE ACTI-LANCE LANCET 23G 97
DROPSAFE ACTI-LANCE LANCET 28G 97

DROPSAFE ERGOLANCE LANCET 21G 97
DROPSAFE ERGOLANCE LANCET 25G 97
DROPSAFE ERGOLANCE LANCET 30G 98
DROPSAFE HAEMOLANCE LANCET 1.5 98
DROPSAFE HAEMOLANCE LANCET 18G 98
DROPSAFE HAEMOLANCE LANCET 21G 98
DROPSAFE HAEMOLANCE LANCET 25G 98
DROPSAFE HAEMOLANCE LANCET 28G 98
DROPSAFE MEDISAFE LANCET 23G 98
DROPSAFE MEDISAFE LANCET 29G 98
DROPSAFE MEDLANCE LANCET 0.8MM 98
DROPSAFE MEDLANCE LANCET 21G 98
DROPSAFE MEDLANCE LANCET 25G 98
DROPSAFE MEDLANCE LANCET 30G 98
DROPSAFE SAFETY SYRINGE/NEEDLE 124
drospirenone-ethinyl estradiol 49
drospirenone-ethinyl estradiol-levomefolate calcium 49
DROXIA CAPS 82
DRUG MART ON-THE-GO LANCET 30G 98
DRUG MART UNILET LANCETS 28G 98
DRUG MART UNILET LANCETS 30G 99
DRUG MART UNILET LANCETS 33G 99
DRY EYE FORMULA CAPS 33.333 MG-3.333 MG-16.667 UNIT-6.667 MG-133.333 MG-166.667 MG 148
DRYMAX EXTRA PADS 88
DUAKLIR PRESSAIR 15
DUETACT (Use pioglitazone hcl-glimepiride) 22
DULERA 15
DULOXETINE HCL CPEP 80 MG, 90 MG, 120 MG 21
duloxetine hcl CPEP 21
DUOPA SUSP 40
DUOVANCE TABS 135
DUPIXENT SOAJ 59
DUPIXENT SOSY 200 MG/1.14ML, 300 MG/2ML 59
DUREX EXTRA SENSITIVE THIN DEVI 89
DUREX EXTRA SENSITIVE THIN MISC 89
DUREX TROPICAL MISC 89
DUREZOL (Use difluprednate) 187
DURYSTA IMPL 188
dutasteride 79
dutasteride-tamsulosin hcl 79
DUVYZAT 181
DYANAVEL XR SUER 1
DYANAVEL XR TBCR 1
DYMISTA SUSP (Use azelastine hcl-fluticasone propionate) 180
DYSPORT 183
E.E.S. GRANULES SUSR (Use erythromycin ethylsuccinate) 86
EASIVENT MASK LARGE MISC 128
EASIVENT MASK MEDIUM MISC 128
EASIVENT MASK SMALL MISC 128
EASIVENT MISC 128
EASY COMFORT INSULIN SYRINGE 124
EASY COMFORT LANCETS 99
EASY COMFORT LANCETS TWIST TOP 99
EASY FLOW BLACK/BLUE DEVI 128
EASY FLOW BLACK/ORANGE DEVI 128
EASY FLOW BLACK/RED DEVI 128
EASY FLOW BLACK/WHITE DEVI 128
EASY FLOW BLACK/YELLOW DEVI 128
EASY FLOW WHITE/BLUE DEVI 128
EASY FLOW WHITE/GREEN DEVI 128
EASY FLOW WHITE/PINK DEVI 128
EASY FLOW WHITE/WHITE DEVI 128
EASY FLOW WHITE/YELLOW DEVI 128

EASY MINI EJECT LANCING DEVICE MISC 99
EASY PLUS II CONTROL SOLN ..99
EASY PLUS II GLUCOSE SYSTEM DEVI 99
EASY PLUS II GLUCOSE TEST STRP 65
EASY STEP CONTROL SOLN 99
EASY STEP GLUCOSE MONITOR DEVI 99
EASY STEP TEST STRP 65
EASY TALK BLOOD GLUCOSE SYSTEM DEVI 99
EASY TALK BLOOD GLUCOSE TEST STRP 65
EASY TALK CONTROL SOLN 99
EASY TALK PLUS II CONTROL SOLN 99
EASY TALK PLUS II TEST STRIPS STRP 65
EASY TOUCH CONTROL HIGH & LOW SOLN 99
EASY TOUCH FLIPLOCK INSULIN SY 124
EASY TOUCH GLUCOSE SYSTEM KIT 99
EASY TOUCH HEALTHPRO GLUCOSE KIT 99
EASY TOUCH HEALTHPRO HIGH/LOW LIQD 99
EASY TOUCH INSULIN SAFETY SYR 125
EASY TOUCH INSULIN SYRINGE 125
EASY TOUCH LANCETS 21G 99
EASY TOUCH LANCETS 23G 99
EASY TOUCH LANCETS 26G ..100
EASY TOUCH LANCETS 28G ..100
EASY TOUCH LANCETS 28G/TWIST 100
EASY TOUCH LANCETS 30G ..100
EASY TOUCH LANCETS 30G/TWIST 100
EASY TOUCH LANCETS 32G ..100
EASY TOUCH LANCETS 32G/TWIST 100
EASY TOUCH LANCETS 33G/TWIST 100
EASY TOUCH LANCING DEVICE MISC 100
EASY TOUCH SAFETY LANCETS 21G 100
EASY TOUCH SAFETY LANCETS 23G 100
EASY TOUCH SAFETY LANCETS 26G 100
EASY TOUCH SAFETY LANCETS 28G 100
EASY TOUCH SHEATHLOCK SYRINGE 125
EASY TOUCH TEST STRP 66
EASY TRAK BLOOD GLUCOSE SYSTEM DEVI 100
EASY TRAK BLOOD GLUCOSE TEST STRP 66
EASY TRAK CONTROL SOLN ..100
EASY TRAK II BLOOD GLUCOSE SYS DEVI 101
EASY TRAK II CONTROL LIQD .101
EASY TRAK II GLUCOSE TEST STRP 66
EASYGLUCO KIT 101
EASYGLUCO STRP 66
EASYMAX 15 LEVEL 2 CONTROL SOLN 101
EASYMAX 15 TEST STRP 66
EASYMAX CONTROL SOLN 101
EASYMAX NG BLOOD GLUCOSE DEVI 101
EASYMAX NG BLOOD GLUCOSE KIT 101
EASYMAX TEST STRP 66
EASYMAX V BLOOD GLUCOSE DEVI 101
EBGLYSS SOAJ 59
EBGLYSS SOSY 59
econazole nitrate CREA 54
EDARBI 40 MG, 80 MG (Use azilsartan medoxomil) 32
EDARBYCLOR 32
EDLUAR SUBL 85
EDURANT PED PO 2.5 MG 43
efavirenz CAPS 200 MG 43
efavirenz CAPS 50 MG 43
efavirenz TABS 43
efavirenz-emtricitabine-tenofovir disoproxil fumarate 43
efavirenz-lamivudine-tenofovir disoproxil fumarate 43
EFFER-K TBEF 25 MEQ 132
EFFEXOR XR CP24 (Use venlafaxine hcl) 21

EFFIENT (Use prasugrel hcl) 81
EKTERLY TABS PO 300 MG 81
ELEMENT COMPACT CONTROL 2 SOLN 101
ELEMENT COMPACT CONTROL 3 SOLN 101
ELEMENT COMPACT GLUCOSE SYSTEM DEVI 101
ELEMENT COMPACT TEST STRP 66
ELEMENT COMPACT V GLUCOSE SYS DEVI 101
ELEMENT CONTROL LIQD 101
ELEMENT PLUS DEVI 101
ELEMENT TEST STRP 66
ELEPSIA XR TB24 17
eletriptan hydrobromide 131
ELEVIDYS 10.0-10.4 KG 181
ELEVIDYS 10.5-11.4 KG 181
ELEVIDYS 11.5-12.4 KG 181
ELEVIDYS 12.5-13.4 KG 181
ELEVIDYS 13.5-14.4 KG 181
ELEVIDYS 14.5-15.4 KG 181
ELEVIDYS 15.5-16.4 KG 181
ELEVIDYS 16.5-17.4 KG 181
ELEVIDYS 17.5-18.4 KG 181
ELEVIDYS 18.5-19.4 KG 181
ELEVIDYS 19.5-20.4 KG 181
ELEVIDYS 20.5-21.4 KG 181
ELEVIDYS 21.5-22.4 KG 181
ELEVIDYS 22.5-23.4 KG 181
ELEVIDYS 23.5-24.4 KG 181
ELEVIDYS 24.5-25.4 KG 181
ELEVIDYS 25.5-26.4 KG 181
ELEVIDYS 26.5-27.4 KG 182
ELEVIDYS 27.5-28.4 KG 182
ELEVIDYS 28.5-29.4 KG 182
ELEVIDYS 29.5-30.4 KG 182
ELEVIDYS 30.5-31.4 KG 182
ELEVIDYS 31.5-32.4 KG 182
ELEVIDYS 32.5-33.4 KG 182
ELEVIDYS 33.5-34.4 KG 182
ELEVIDYS 34.5-35.4 KG 182
ELEVIDYS 35.5-36.4 KG 182
ELEVIDYS 36.5-37.4 KG 182
ELEVIDYS 37.5-38.4 KG 182
ELEVIDYS 38.5-39.4 KG 182
ELEVIDYS 39.5-40.4 KG 182
ELEVIDYS 40.5-41.4 KG 182
ELEVIDYS 41.5-42.4 KG 182
ELEVIDYS 42.5-43.4 KG 182
ELEVIDYS 43.5-44.4 KG 182
ELEVIDYS 44.5-45.4 KG 182
ELEVIDYS 45.5-46.4 KG 182
ELEVIDYS 46.5-47.4 KG 182
ELEVIDYS 47.5-48.4 KG 182
ELEVIDYS 48.5-49.4 KG 182
ELEVIDYS 49.5-50.4 KG 182
ELEVIDYS 50.5-51.4 KG 182
ELEVIDYS 51.5-52.4 KG 182
ELEVIDYS 52.5-53.4 KG 182
ELEVIDYS 53.5-54.4 KG 182
ELEVIDYS 54.5-55.4 KG 182
ELEVIDYS 55.5-56.4 KG 182
ELEVIDYS 56.5-57.4 KG 182
ELEVIDYS 57.5-58.4 KG 182
ELEVIDYS 58.5-59.4 KG 183
ELEVIDYS 59.5-60.4 KG 183
ELEVIDYS 60.5-61.4 KG 183
ELEVIDYS 61.5-62.4 KG 183
ELEVIDYS 62.5-63.4 KG 183
ELEVIDYS 63.5-64.4 KG 183
ELEVIDYS 64.5-65.4 KG 183
ELEVIDYS 65.5-66.4 KG 183
ELEVIDYS 66.5-67.4 KG 183
ELEVIDYS 67.5-68.4 KG 183
ELEVIDYS 68.5-69.4 KG 183
ELEVIDYS 69.5 KG PLUS 183
ELFABRIO 76
ELFOLATE TABS 73
ELIGARD KIT SC 22.5 MG 35
ELIGARD KIT SC 7.5 MG 35
ELIGARD SC 30 MG 35
ELIGARD SC 45 MG 35
ELIQUIS (1.5 MG PACK) TBSO PO 16
ELIQUIS (2 MG PACK) TBSO PO 16
ELIQUIS CPSP PO 0.15 MG 16
ELIQUIS DVT/PE STARTER PACK TBPK 16
ELIQUIS TABS 16
ELIQUIS TBSO PO 0.5 MG 16
ELLA 50

ELOCTATE 80
ELYXYB 131
EMBECTA AUTOSHIELD DUO .125
EMBECTA INS SYR U/F 1/2 UNIT 125
EMBECTA INSULIN SYR ULTRAFINE 125
EMBECTA INSULIN SYRINGE ..125
EMBECTA INSULIN SYRINGE U-100 125
EMBECTA PEN NEEDLE NANO 125
EMBECTA PEN NEEDLE NANO 2 GEN 125
EMBECTA PEN NEEDLE ULTRAFINE 125
EMBRACE BLOOD GLUCOSE MONITOR DEVI 101
EMBRACE BLOOD GLUCOSE TEST STRP 66
EMBRACE CONTROL SOLN 101
EMBRACE EVO BLOOD GLUCOSE TEST STRP 66
EMBRACE EVO CONTROL LEVEL 1 LIQD 101
EMBRACE EVO GLUCOSE MONITOR DEVI 101
EMBRACE EVO GLUCOSE MONITORING KIT 101
EMBRACE GLUCOSE CONTROL LIQD 101
EMBRACE LANCETS ULTRA THIN 30G 102
EMBRACE LANCING DEVICE/EJECTOR MISC 102
EMBRACE PRESSURE ACTIVATED 21G 102
EMBRACE PRESSURE ACTIVATED 28G 102
EMBRACE PRO GLUCOSE CONTROL LIQD 102
EMBRACE PRO GLUCOSE METER DEVI 102
EMBRACE PRO GLUCOSE TEST STRP 66
EMBRACE TALK BLOOD GLUCOSE DEVI 102
EMBRACE TALK GLUCOSE CONTROL SOLN 102
EMBRACE TALK GLUCOSE TEST STRP 66
EMBRACE TALK MONITORING SYSTEM KIT 102
EMBRACE WAVE GLUCOSE CONTROL LIQD 102
EMBRACE WAVE GLUCOSE METER DEVI 102
EMEND BIPACK CAPS 80 MG (Use aprepitant) 28
EMEND SOLR (Use fosaprepitant dimeglumine) 28
EMEND SUSR 28
EMEND TRIPACK CPPK PO (Use aprepitant) 28
EMFLAZA SUSP (Use deflazacort) 51
EMFLAZA TABS (Use deflazacort) 51
EMGALITY (300 MG DOSE) SOSY 130
EMGALITY SOAJ 130
EMGALITY SOSY 130
emollient OINT 59
EMSAM 20
emtricitabine CAPS 43
emtricitabine-rilpivirine-tenofovir disoproxil fumarate 43
emtricitabine-tenofovir disoproxil fumarate 43
EMTRIVA SOLN 43
enalapril maleate & hydrochlorothiazide 32
enalapril maleate SOLN 31
enalapril maleate TABS 31
ENBRACE HR 178
ENBREL MINI SOCT 7
ENBREL SOLN 7
ENBREL SOSY 7
ENBREL SURECLICK SOAJ 7
ENGERIX-B SUSP 20 MCG/ML . 197
ENGERIX-B SUSY 197
ENOBY SOSY SC 60 MG/ML 75
enoxaparin sodium SOLN IJ 300 MG/3ML 16
enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML 16
enoxaparin sodium SOSY 30 MG/0.3ML 16
enoxaparin sodium SOSY 40 MG/0.4ML 16
enoxaparin sodium SOSY 60 MG/0.6ML 16
enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML 16

ENSACOVE CAPS PO 25 MG, 100 MG 37
ENSPRYNG 133
ENSTILAR FOAM 57
entacapone 40
entecavir TABS 45
ENTRESTO CPSP 47
ENTRESTO TABS 103 MG-97 MG, 26 MG-24 MG, 51 MG-49 MG (Use sacubitril-valsartan) 47
ENTYVIO PEN SOAJ 78
ENTYVIO SOLR 78
EOHILIA SUSP 51
EPANED SOLN (Use enalapril maleate) 31
EPCLUSA PACK 45
EPCLUSA TABS 45
EPIDIOLEX 17
EPIDUO FORTE GEL (Use adapalene-benzoyl peroxide) 53
EPIFOAM FOAM 57
epinastine hcl (ophth) 188
epinephrine (anaphylaxis) SOAJ 199
epinephrine hcl (nasal) 181
EPIPEN 2-PAK SOAJ (Use epinephrine (anaphylaxis)) 199
EPIPEN JR 2-PAK SOAJ (Use epinephrine (anaphylaxis)) 199
EPOGEN 10000 UNIT/ML 83
EPOGEN 2000 UNIT/ML 83
EPOGEN 20000 UNIT/ML 83
EPOGEN 3000 UNIT/ML 83
EPOGEN 4000 UNIT/ML 83
EPRONTIA SOLN 25 MG/ML (Use topiramate) 17
EPSOLAY CREA 53
EQ BLOOD GLUCOSE TEST STRP 66
EQ COMPLETE MULTIVIT ADULT 50+ TABS 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-220 MG-300 MCG-1.5 MG-11 MG-150 MCG-50 UNIT-50 MG-80 MG-45 MCG-150 MCG-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG, 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-220 MG-300 MCG-1.5 MG-11 MG-150 MCG-50 UNIT-50 MG-80 MG-45 MCG-150 MCG-20 MG-20 MG-0.5 MG-5 MCG-2.3 MG-45 MCG-55 MCG-10 MCG-72 MG-2 MG 148
EQ COMPLETE MULTIVITAMIN-ADULT TABS 148
EQ GAUZE PADS 88
EQ ONE DAILY MENS 50+ TABS 148
EQ ONE DAILY MENS HEALTH TABS 148
EQ ONE DAILY WOMENS 50+ TABS 148
EQ ONE DAILY WOMENS HEALTH TABS 148
EQ SPACE CHAMBER ANTI-STATIC DEVI 128
EQ SPACE CHAMBER ANTI-STATIC L DEVI 128
EQ SPACE CHAMBER ANTI-STATIC M DEVI 128
EQ SPACE CHAMBER ANTI-STATIC S DEVI 128
EQ VISION FORMULA 50+ CAPS 150 MG-30 UNIT-5 MG-1 MG-1 MG-9 MG-90 MG-160 MG-250 MG 148
EQL CENTURY MATURE ADULTS 50+ TABS 148
EQL CENTURY MATURE MEN 50+ TABS 120 MG-6 MG-30 MCG-300 MCG-600 UNIT-100 MCG-10 MG-1.7 MG-60 MCG-20 MG-300 MCG-3500 UNIT-600 MCG-1.5 MG-15 MG-0.7 MG-50 MG-5 MCG-250 MG-80 MG-15 MG-50 MCG-150 MCG-20 MG-4 MG-60 UNIT-100 MCG-72 MG-10 MCG-60 MCG-150 MCG 148
EQL CENTURY MATURE TABS 90 MG-3 MG-30 MCG-500 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-11 MG-150 MCG-50 MG-2 MG-220 MG-80 MG-45 MCG-150 MCG-50 UNIT-110 MG-0.9 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG 148
EQL CENTURY MATURE WOMEN 50+ TABS 100 MG-5 MG-30 MCG-400 MCG-800 UNIT-50 MCG-5 MG-1.1 MG-50 MCG-14 MG-300 MCG-3500 UNIT-8 MG-1.1 MG-15 MG-0.5 MG-50 MG-5 MCG-500 MG-80 MG-15 MG-50 MCG-150 MCG-20 MG-2.3 MG-35 UNIT-55 MCG-72 MG-10 MCG-50 MCG-150 MCG 148
EQL CENTURY MENS TABS 148
EQL CENTURY TABS 90 MG-2 MG-30 MCG-500 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-250 MCG-3500 UNIT-10 MG-18 MG-300 MCG-1.5 MG-11 MG-150 MCG-100

MG-80 MG-200 MG-45 MCG-150 MCG-30 UNIT-109 MG-0.9 MG-5 MCG-10 MCG-2.3 MG-55 MCG-10 MCG-35 MCG-72 MG-2 MG 149

EQL CENTURY WOMENS TABS 149

EQL GAUZE PADS 88

EQL GAUZE STERILE PADS 88

EQL ONE DAILY MENS 50+ ADVANCE TABS 120 MG-6 MG-30 MCG-400 MCG-700 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-3500 UNIT-15 MG-120 MG-370 MCG-4.5 MG-24 MG-2.2 MG-110 MG-90 MCG-150 MCG-25.5 UNIT-4.2 MG-180 MCG-117 MCG 149

EQL ONE DAILY MENS HEALTH TABS 400 UNIT-90 MG-3 MG-30 MCG-400 MCG-18 MCG-1.7 MG-20 MCG-16 MG-3500 UNIT-5 MG-210 MG-0.6 MG-1.2 MG-15 MG-2 MG-120 MG-100 MG-45 UNIT-2 MG-120 MCG-105 MCG 149

EQL ONE DAILY MENS TABS ... 149

EQL ONE DAILY WOMENS 50+ ADV TABS 120 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-3500 UNIT-15 MG-500 MG-4.5 MG-24 MG-2.2 MG-50 MG-90 MCG-150 MCG-30 UNIT-4.2 MG-180 MCG-27 MCG 149

EQL PRENATAL FORMULA TABS 178

EQL VISION FORMULA TABS 200 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG 149

EQUETRO 40

ergocalciferol CAPS 199

ergocalciferol SOLN PO 200 MCG/ML 199

ergoloid mesylates TABS 193

ERIVEDGE 35

ERLEADA 35

erlotinib hcl 35

ERYPED 200 SUSR (Use erythromycin ethylsuccinate) 87

ERYPED 400 SUSR (Use erythromycin ethylsuccinate) 87

erythromycin (acne aid) GEL 53

erythromycin (acne aid) PADS 53

erythromycin (acne aid) SOLN 53

erythromycin (ophth) 186

erythromycin base CPEP 87

erythromycin base TABS 87

erythromycin base TBEC 87

erythromycin ethylsuccinate SUSR 87

erythromycin ethylsuccinate TABS 87

ERZOFRI 41

ESCITALOPRAM OXALATE CAPS PO 15 MG 20

escitalopram oxalate SOLN 21

escitalopram oxalate TABS 21

eslicarbazepine acetate 200 MG, 400 MG, 600 MG, 800 MG 17

esomeprazole magnesium CPDR 195

esomeprazole magnesium PACK 195

ESPEROCT 80

ESSENTIA TABS 100 MG-6 MG-30 MCG-400 MCG-2000 UNIT-25 MCG-3000 UNIT-10 MG-100 MCG-100 MG-25 MG-10 MG-18 MG-100 MG-10 MG-100 MG-15 MG-2 MG-250 MCG-60 UNIT-2 MG-10 MCG-75 MCG-150 MCG-70 MCG-100 MCG 149

ESSENTIAL BALANCE TABS 120 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-250 MCG-3000 UNIT-10 MG-9 MG-1.5 MG-15 MG-2 MG-150 MCG-20 MG-100 MG-40 MG-2 MG-100 MG-25 MCG-150 MCG-50 UNIT-77 MG-5 MCG-10 MCG-2 MG-120 MCG-25 MCG-25 MCG-10 MCG-36 MG 149

estazolam 85

estradiol & norethindrone acetate TABS 76

estradiol PTTW 77

estradiol PTWK 77

estradiol TABS 77

estradiol vaginal CREA 199

estradiol vaginal TABS 199

ESTROFACTORS TABS 174

estrogens, conjugated TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG 77

eszopiclone 85

ETCAMAH TABS PO 75 MG 35

ethambutol hcl TABS 34

ethosuximide CAPS 20

ethosuximide SOLN 20

ethynodiol diacet & eth estrad 49

etodolac CAPS 6

etodolac TABS 6

etodolac TB24 6

etonogestrel-ethinyl estradiol 50
etoposide CAPS 39
etravirine 100 MG 43
etravirine 200 MG 43
EUCERIN INTENSIVE REPAIR OINT 59
EUCERIN REDNESS RELIEF DAY LOTN 62
EUCRISA 61
EULEXIN 35
EVEKEO TABS (Use amphetamine sulfate) 1
EVENITY 75
EVERCORE TABS 149
everolimus (immunosuppressant) 133
everolimus TABS 37
everolimus TBSO 37
EVERSENSE 365 SENSOR/HOLDER 102
EVERSENSE 365 SMART TRANSMIT 102
EVERSENSE E3 SENSOR/HOLDER 102
EVERSENSE E3 SMART TRANSMITTER 102
EVERVITA TABS 149
EVEXITHROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG, 180 MG 194
EVKEEZA 1200 MG/8ML 30
EVKEEZA 345 MG/2.3ML 30
EVOLUTION AUTOCODE DEVI .102
EVOLUTION AUTOCODE STRP ..66
EVOLUTION CONTROL SOLN ..102
EVOTAZ 43
EVRYSDI 183
EVRYSDI PO 5 MG 183
EXCILON AMD DRAIN SPONGES PADS 88
EXCILON AMD NON-WOVEN SPONGES PADS 88
EXCILON DRAIN SPONGES PADS . 88
EXCILON IV SPONGES PADS 88
EXDENSUR SOSY SC 100 MG/ML 13
EXELON (Use rivastigmine) 191
exemestane 35
exenatide SOPN 10 MCG/0.04ML .24
exenatide SOPN 5 MCG/0.02ML ..24
EXFORGE (Use amlodipine besylate-valsartan) 33
EXFORGE HCT (Use amlodipine-valsartan-hydrochlorothiazide) 33
EXONDYS 51 183
EXTENDED INFUSION SET 23"/6MM MISC 102
EXTENDED INFUSION SET 23"/9MM MISC 102
EXTENDED INFUSION SET 32"/6MM MISC 102
EXTENDED INFUSION SET 32"/9MM MISC 102
EXTENDED INFUSION SET 43"/6MM MISC 102
EXTENDED INFUSION SET 43"/9MM MISC 102
EXTENDED RESERVOIR 3ML MISC 102
EXXUA TB24 PO 18.2 MG, 36.3 MG, 54.5 MG, 72.6 MG 21
EXXUA TITRATION PACK TB24 PO 18.2 MG 21
EYE HEALTH + LUTEIN TABS ..149
EYE HEALTH AREDS 2 CAPS ..149
EYE HEALTH CAPS 149
EYE MULTIVITAMIN/SODIUM TABS 149
EYE VITAMINS CAPS 60 MG-6 MG-15 MG-2 MG-30 UNIT-22 MG 149
EYE-VITES TABS 60 MG-40 MG-2 MG-5000 UNIT-30 UNIT-40 MCG 149
EYSUVIS SUSP 187
ezetimibe 31
ezetimibe-simvastatin 30
famciclovir 45
famotidine SOLN 20 MG/2ML 195
FAMOTIDINE SOLN 195
famotidine SUSR 195
famotidine TABS 10 MG, 20 MG .195
famotidine TABS 195
famotidine-calcium carbonate-magnesium hydroxide 196
FANAPT 41
FANAPT TITRATION PACK A 41
FANAPT TITRATION PACK B 41
FANAPT TITRATION PACK C 41
FANTASY LUBRICATED MISC ...89

FANTASY LUBRICATED/SPERMICIDE MISC 89

FARESTON (Use toremifene citrate) 35

FARXIGA TABS PO (Use dapagliflozin) 26

FASENRA PEN SOAJ 13

FASENRA SOSY 13

FC2 FEMALE CONDOM 89

febuxostat 80

FEIBA 80

felbamate SUSP 19

felbamate TABS 19

FELBATOL TABS (Use felbamate) 19

felodipine 46

FEMARA (Use letrozole) 35

FEMCAP DEVI 89

FEMLYV TBDP 49

fenofibrate CAPS 30

fenofibrate micronized 43 MG, 67 MG, 130 MG, 134 MG, 200 MG ... 30

fenofibrate TABS 40 MG, 120 MG .30

fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG 30

fenofibric acid 30

FENSOLVI (6 MONTH) SC 75

fentanyl PT72 12 MCG/HR, 25 MCG/HR, 37.5 MCG/HR, 50 MCG/HR, 62.5 MCG/HR, 75 MCG/HR, 87.5 MCG/HR, 100 MCG/HR 8

FERRETTS TABS 84

ferric citrate 79

ferrous fumarate TABS 84

ferrous gluconate TABS 324 MG ..84

ferrous gluconate TABS 84

ferrous sulfate dried TBCR 84

ferrous sulfate SOLN 15 MG/ML, 15 MG/ML 84

ferrous sulfate SOLN 220 MG/5ML, 300 MG/6.8ML 84

ferrous sulfate TABS 84

ferrous sulfate TBEC 84

fesoterodine fumarate 196

FETZIMA CP24 21

FETZIMA TITRATION C4PK 21

FEVERALL INFANTS SUPP 8

FEVERALL JUNIOR STRENGTH SUPP 8

fexofenadine hcl SUSP 29

fexofenadine hcl TABS 60 MG, 180 MG 29

fexofenadine-pseudoephedrine TB12 52

fexofenadine-pseudoephedrine TB24 52

FIASP FLEXTOUCH SOPN 25

FIASP PENFILL SOCT 25

FIASP PUMPCART SOCT 25

FIASP SOLN 25

FIBRICOR 105 MG (Use fenofibric acid) 30

fidaxomicin TABS 200 MG 87

FIFTY50 SUPERIOR COMFORT SYR 125

FILKRI SOSY IJ 300 MCG/0.5ML, 480 MCG/0.8ML 83

FILSPARI 79

FILSUVEZ 63

finasteride 79

FINAZOL TABS 149

FINGERSTIX LANCETS 103

fingolimod hcl 192

FINTEPLA 18

FIRAZYR SOSY (Use icatibant acetate) 81

FITNESS TABS FOR MEN AM/PM TABS 150

FITNESS TABS FOR WOMEN AM/PM TABS 150

FLAREX 187

flavoxate hcl 197

flecainide acetate 13

FLEQSUVY SUSP (Use baclofen) 180

FLEXICHAMBER DEVI 128

FLORAFOL FE PEDIATRIC SOLN 177

FLORAVITA MINI TABS 135

FLORRAVITE TABS 150

FLORRAXYL TABS 150

FLOTREX CHEW 0.5 MG 177

FLUAD 197

FLUAD QUADRIVALENT 197

FLUARIX QUADRIVALENT SUSY 197

FLUARIX SUSY 197

FLUBLOK SOSY 197
FLUCELVAX QUADRIVALENT SUSY 197
FLUCELVAX SUSP 197
FLUCELVAX SUSY 197
fluconazole SUSR 29
fluconazole TABS 100 MG 29
fluconazole TABS 150 MG 29
fluconazole TABS 200 MG 29
fluconazole TABS 50 MG 29
fludrocortisone acetate TABS 51
FLULAVAL SUSY 197
FLUMIST 197
flunisolide (nasal) 180
fluocinolone acetonide (otic) 189
fluocinolone acetonide CREA 57
fluocinolone acetonide OIL 57
fluocinolone acetonide OINT 57
fluocinolone acetonide SOLN 58
fluocinonide CREA 58
fluocinonide emulsified base 58
fluocinonide GEL 58
fluocinonide OINT 58
fluocinonide SOLN 58
fluorometholone (ophth) SUSP ... 187
fluorouracil (topical) CREA 0.5 % ... 55
fluorouracil (topical) CREA 5 % 55
fluorouracil (topical) SOLN 55
fluoxetine hcl (pmdd) TABS 193
fluoxetine hcl CAPS 21
fluoxetine hcl CPDR 21
fluoxetine hcl SOLN 21
fluoxetine hcl TABS 21
fluphenazine decanoate 42
fluphenazine hcl CONC 42
fluphenazine hcl ELIX 42
fluphenazine hcl SOLN 42
fluphenazine hcl TABS 42
flurandrenolide LOTN 58
flurazepam hcl 85
flurbiprofen sodium 188
flurbiprofen TABS 100 MG 6
flurbiprofen TABS 50 MG 6
fluticasone furoate (inhalation) 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT 14
fluticasone furoate-vilanterol 15
fluticasone propionate (inhalation) AEPB 14
fluticasone propionate (nasal) SUSP . 180
fluticasone propionate (nasal) SUSP . 181
fluticasone propionate CREA 0.05 % 58
fluticasone propionate hfa 110 MCG/ACT, 220 MCG/ACT 14
fluticasone propionate hfa 44 MCG/ACT 14
fluticasone propionate LOTN 58
fluticasone propionate OINT 58
fluticasone-salmeterol AEPB 15
fluticasone-salmeterol AERO 15
fluvastatin sodium CAPS 31
fluvastatin sodium TB24 31
fluvoxamine maleate CP24 21
fluvoxamine maleate TABS 21
FLUZONE HIGH-DOSE QUADRIVALENT 197
FLUZONE HIGH-DOSE SUSY ... 197
FLUZONE QUADRIVALENT SUSY 197
FLUZONE SUSP 197
FLUZONE SUSY 197
FML FORTE SUSP 187
FML LIQUIFILM SUSP (Use fluorometholone (ophth)) 187
FOCALIN TABS (Use dexmethylphenidate hcl) 2
FOCALIN XR CP24 (Use dexmethylphenidate hcl) 2
FOCINVEZ SOLN 28
FOLAGENT DHA CAPS 150
FOLAMAX TABS 150
FOLAMED DHA CAPS 150
FOLAPRIME TABS 150
FOLAREX TABS 150
FOLASYNC DHA CAPS 150
FOLATEN TABS 150
FOLAWISE TABS 174
FOLCYTEINE TABS 174
folic acid TABS 1 MG 82
folic acid TABS 400 MCG, 800 MCG . 82
FOLIFLEX TABS 150

FOLITIN-Z TABS 150
FOLIVANE-OB 178
FOLIVRA TABS 150
FOLIXIA TABS 150
FOLYRA TABS 150
fondaparinux sodium 16
FONDCIRCLE BLOOD GLUCOSE MONIT KIT 103
FONDCIRCLE BLOOD GLUCOSE TEST STRP 67
FONDCIRCLE CONTROL SOLUTION LIQD 103
FONDCIRCLE LANCING DEVICE MISC 103
FONDCIRCLE SINGLE USE LANCETS 103
FORA 6 CONNECT STRP 67
FORA 6 CONNECT/GTEL TEST STRP 67
FORA BLOOD GLUCOSE TEST STRP 67
FORA CONTROL SOLN 103
FORA D15G BLOOD GLUCOSE TEST STRP 67
FORA D20 2-IN-1 MONITOR DEVI 103
FORA D20 BLOOD GLUCOSE TEST STRP 67
FORA D40/G31 BLOOD GLUCOSE STRP 67
FORA G20 BLOOD GLUCOSE SYSTEM KIT 103
FORA G20 BLOOD GLUCOSE TEST STRP 67
FORA G30/PREM V10 GLUCOSE TEST STRP 67
FORA G30A BLOOD GLUCOSE SYSTEM DEVI 103
FORA GD20 BLOOD GLUCOSE SYSTEM DEVI 103
FORA GD20 TEST STRP 67
FORA GD50 BLOOD GLUCOSE SYSTEM DEVI 103
FORA GD50 BLOOD GLUCOSE TEST STRP 67
FORA GTEL BLOOD GLUCOSE TEST STRP 67
FORA GTEL BLOOD KETONE TEST 67
FORA LANCETS 103
FORA LANCING DEVICE MISC . 103
FORA PREMIUM V10 BLE SYSTEM DEVI 103
FORA TEST N' GO MONITOR DEVI 103
FORA TEST N'GO ADV-VOICE-6 CON 67
FORA TN'G ADVANCE PRO STRP 68
FORA TN'G VOICE KIT 103
FORA TN'G/TN'G VOICE STRP 68
FORA V10 BLOOD GLUCOSE SYSTEM DEVI 103
FORA V10 BLOOD GLUCOSE TEST STRP 68
FORA V10/V12/D10/D20 TEST KIT 103
FORA V12 BLOOD GLUCOSE SYSTEM DEVI 104
FORA V12 BLOOD GLUCOSE TEST STRP 68
FORA V20 BLOOD GLUCOSE SYSTEM DEVI 104
FORA V20 BLOOD GLUCOSE TEST STRP 68
FORA V30A BLOOD GLUCOSE SYSTEM DEVI 104
FORA V30A BLOOD GLUCOSE SYSTEM KIT 104
FORA V30A BLOOD GLUCOSE TEST STRP 68
FORACARE GD40 MONITOR DEVI . 104
FORACARE GD40 TEST STRP 68
FORACARE GDH CONTROL SOLN . 104
FORACARE PREMIUM V10 DEVI 104
FORACARE PREMIUM V10 TEST STRP 68
FORACARE TEST N GO MONITOR DEVI 104
FORACARE TEST N GO TEST STRP 68
FORMALDEHYDE SOLN 43
formoterol fumarate NEBU 15
FORTEO SOPN (Use teriparatide) 75
FOSAMAX PLUS D 75
FOSAMAX TABS 70 MG (Use alendronate sodium) 75
fosamprenavir calcium TABS 43
fosaprepitant dimeglumine SOLR . 28
fosinopril sodium & hydrochlorothiazide 33

fosinopril sodium 31
fosphenytoin sodium 100 MG PE/2ML 19
fosphenytoin sodium 500 MG PE/10ML 19
FOSRENOL CHEW (Use lanthanum carbonate) 79
FOSRENOL PACK 79
FOTIVDA 37
FRAGMIN SOLN 10000 UNIT/4ML, 95000 UNIT/3.8ML 16
FRAGMIN SOSY 16
FREEDAVITE TABS 150
FREESTYLE CONTROL SOLUTION LIQD 104
FREESTYLE FREEDOM LITE KIT 104
FREESTYLE INSULINX TEST STRP 68
FREESTYLE LANCETS 104
FREESTYLE LIBRE 14 DAY READER 104
FREESTYLE LIBRE 14 DAY SENSOR 104
FREESTYLE LIBRE 2 PLUS SENSOR 104
FREESTYLE LIBRE 2 READER .104
FREESTYLE LIBRE 2 SENSOR 104
FREESTYLE LIBRE 3 PLUS SENSOR 104
FREESTYLE LIBRE 3 READER .104
FREESTYLE LIBRE 3 SENSOR 104
FREESTYLE LITE DEVI 105
FREESTYLE LITE KIT 105
FREESTYLE LITE TEST STRP ... 68
FREESTYLE PRECISION NEO SYSTEM KIT 105
FREESTYLE PRECISION NEO TEST STRP 68
FREESTYLE TEST STRP 68
FREESTYLE UNISTICK II LANCETS 105
FROVA (Use frovatriptan succinate) 131
frovatriptan succinate 131
FRUITY CHEWS/IRON CHEW 60 MG-1.05 MG-300 MCG-1.05 MG-4.5 MCG-1.2 MG-13.5 MG-400 UNIT-15 UNIT-15 MG-2500 UNIT 177
FRUZAQLA 34
FT ADHESIVE PADS/SHEER PADS 88
FT CENTURY 50+ TABS 150
FT CENTURY ADULTS TABS ... 150
FT CENTURY MEN 50+ TABS ...150
FT CENTURY MEN TABS 150
FT CENTURY WOMEN 50+ TABS 150
FT CENTURY WOMEN TABS ... 150
FT EYE HEALTH CAPS 150
FT EYE HEALTH TABS 150
FT HAIR SKIN & NAILS EXTRA STR TABS 150
FT ONE DAILY MENS 50+ TABS 150
FT ONE DAILY MENS TABS 150
FT ONE DAILY WOMENS 50+ TABS 150
FT ONE DAILY WOMENS TABS 150
FT PRENATAL TABS 178
FULPHILA 83
furosemide SOLN IJ 10 MG/ML ... 74
FUROSEMIDE SOLN IJ 74
furosemide TABS 74
FUZEON SOLR 43
FYCOMPA SUSP 0.5 MG/ML (Use perampanel) 17
FYCOMPA TABS 2 MG, 4 MG, 6 MG, 8 MG, 10 MG, 12 MG (Use perampanel) 17
FYLNETRA 83
gabapentin (once-daily) TABS ... 193
gabapentin CAPS 18
gabapentin SOLN 18
gabapentin TABS 600 MG, 800 MG 18
GALAFOLD 76
galantamine hydrobromide CP24 191
galantamine hydrobromide SOLN 191
galantamine hydrobromide TABS 191
GAMASTAN IM 189
GAMMAGARD 1 GM/10ML, 2.5 GM/25ML, 10 GM/100ML, 20 GM/200ML, 30 GM/300ML 189
GAMMAGARD 5 GM/50ML 189
GAMMAGARD ERC 10 GM/100ML 189
GAMMAGARD ERC 5 GM/50ML 189
GAMMAGARD S/D LESS IGA SOLR 189

GAMMAKED 1 GM/10ML, 10 GM/100ML, 20 GM/200ML 189

GAMMAKED 5 GM/50ML 189

GAMMAPLEX SOLN 189

GAMUNEX-C 1 GM/10ML, 2.5 GM/25ML, 10 GM/100ML, 20 GM/200ML, 40 GM/400ML 189

GAMUNEX-C 5 GM/50ML 189

GARDASIL 9 SUSP 0.5 ML 197

GARDASIL 9 SUSY 0.5 ML 197

gatifloxacin (ophth) 186

GAUZE DRESSING PADS 88

GAUZE PADS PADS 88

GAUZE TYPE VII MEDI-PAK PADS . 88

GAVRETO 37

GE100 BLOOD GLUCOSE SYSTEM DEVI 105

GE100 BLOOD GLUCOSE SYSTEM KIT 105

GE100 BLOOD GLUCOSE TEST STRP 68

GE100 CONTROL SOLN 105

gefitinib 35

gemfibrozil TABS 30

GEMTESA 196

GENOTROPIN CART SC 75

GENOTROPIN MINIQUICK PRSY 75

gentamicin sulfate (ophth) SOLN . 186

gentamicin sulfate (topical) CREA . 54

gentamicin sulfate (topical) OINT .. 54

GENTEEL BUTTERFLY TOUCH LANCET 105

GENTEEL LANCING KIT (BLUE) KIT 105

GENTEEL PLUS LANCING (PURPLE) MISC 105

GENTEEL PLUS LANCING (WHITE) MISC 105

GENTEEL PLUS LANCING DEV(BLUE) MISC 105

GENTEEL PLUS LANCING DEV(PINK) MISC 105

GENVOYA 43

GEODON (Use ziprasidone hcl) .. 40

GERI-FREEDA SENIOR FORMULA TABS 150

GERI-TUSSIN SYRP 52

GERITOL NUTRITION SUPPORT TABS 57 MG-2 MG-44 MCG-0.38 MG-400 UNIT-6.7 MCG-1.7 MG-24 MCG-13 MG-1.5 MG-13.5 MG-1.8 MG-20 MG-6100 UNIT-86 MG-36 MG-1 MCG-120 MCG-30 UNIT-118 MG-148 MG-2.4 MG-12 MCG-1 MCG-16 MG-20 MG 150

GERIVITE COMPLETE TABS 60 MG-2 MG-45 MCG-400 MCG-20 MG-1.5 MG-6 MCG-10 MG-1.7 MG-400 UNIT-30 UNIT-18 MG-100 MG-2.5 MG-15 MCG-5 MCG-37.5 MG-80 MCG-15 MCG-2 MG-10 MCG-15 MG-162 MG-150 MCG-125 MG-15 MCG-10 MCG-6000 UNIT-25 MCG-34 MG 150

GHT BLOOD GLUCOSE MONITOR KIT 105

GHT TEST STRP 69

GILENYA (Use fingolimod hcl) ... 192

GILENYA 192

GILOTRIF 35

GIMOTI SOLN NA 77

glatiramer acetate SOSY 20 MG/ML . 192

glatiramer acetate SOSY 40 MG/ML . 192

GLEEVEC TABS (Use imatinib mesylate) 37

GLEEVEC TABS 400 MG (Use imatinib mesylate) 37

GLEOSTINE 10 MG, 100 MG (Use lomustine) 34

glimepiride 1 MG, 2 MG, 4 MG 27

glipizide TABS 27

glipizide TB24 27

glipizide-metformin hcl 22

GLOBAL EASY GLIDE INSULIN SYR 125

GLOBAL INJECT EASE INSULIN SYR 125

GLOBAL INJECT EASE LANCETS 28G 105

GLOBAL INJECT EASE LANCETS 30G 105

GLOBAL INSULIN SYRINGES .. 125

GLOBAL LANCING DEVICE MISC 105

GLOPERBA SOLN PO 80

GLUCAGON EMERGENCY 23

glucagon SOLR IJ 1 MG 23

GLUCOCARD 01 BLOOD GLUCOSE KIT 105

GLUCOCARD 01 CONTROL LIQD 106

GLUCOCARD 01 CONTROL SOLN .

106

GLUCOCARD 01 SENSOR PLUS STRP 69

GLUCOCARD EXPRESSION CONTROL SOLN 106

GLUCOCARD EXPRESSION MONITOR KIT 106

GLUCOCARD EXPRESSION TEST STRP 69

GLUCOCARD SHINE CONNEX KIT . 106

GLUCOCARD SHINE CONTROL SOLN 106

GLUCOCARD SHINE DEVI 106

GLUCOCARD SHINE EXPRESS KIT 106

GLUCOCARD SHINE KIT 106

GLUCOCARD SHINE TEST STRP 69

GLUCOCARD SHINE XL DEVI ..106

GLUCOCARD VITAL MONITOR KIT 106

GLUCOCARD VITAL TEST STRP 69

GLUCOCOM BLOOD GLUCOSE MONITOR DEVI 106

GLUCOCOM CONTROL LIQD ...106

GLUCOCOM LANCETS 28G 106

GLUCOCOM LANCETS 30G 106

GLUCOCOM LANCETS 33G 106

GLUCOCOM MONITOR KIT 106

GLUCOCOM TEST STRP 69

GLUCONAVII BLOOD GLUCOSE TEST STRP 69

GLUCOPRO INSULIN SYRINGE 125

GLUCOSE CONTROL SOLN 106

GLUCOSE METER TEST STRP ..69

GLUCOTROL XL TB24 5 MG (Use glipizide) 27

glyburide micronized 3 MG, 6 MG .27

glyburide TABS 27

glyburide-metformin 22

glycerin (laxative) SUPP 1.2 GM, 2 GM, 2.1 GM 86

glycopyrrolate TABS 1 MG, 2 MG 195

GLYXAMBI 22

GNP CENTURY ADULT FORMULA TABS 60 MG-30 MCG-400 MCG-1.5 MG-20 MG-2 MG-10 MG-1.7 MG-25 MCG-13.5 MG-18 MG-50 MG-2.3 MG-45 MCG-80 MG-35 MCG-0.5 MG-11 MG-200 MG-150 MCG-20 MG-55 MCG-1050 MCG-25 MCG-6 MCG-72 MG 150

GNP CENTURY ADULT TABS ...151

GNP CENTURY ADULTS MEN TABS 151

GNP CENTURY ADULTS WOMEN TABS 151

GNP CENTURY MATURE ADULTS 50+ TABS 151

GNP CENTURY MATURE MEN'S 50+ TABS 151

GNP CENTURY MATURE WOMEN'S 50+ TABS 100 MG-5 MG-30 MCG-400 MCG-25 MCG-50 MCG-1.1 MG-50 MCG-14 MG-300 MCG-5 MG-8 MG-1.1 MG-100 MG-15 MG-80 MG-300 MG-50 MCG-150 MCG-15.8 MG-20 MG-0.5 MG-2.3 MG-1050 MCG-22 MCG-52 MCG-72 MG 151

GNP CHILDRENS CHEWABLES/IRON CHEW 15 MG 177

GNP EASY TOUCH CONT HIGH/LOW SOLN 106

GNP EASY TOUCH GLUCOSE METER DEVI 107

GNP EASY TOUCH GLUCOSE TEST STRP 69

GNP ESSENTIAL ONE DAILY TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-75 MG-1.5 MG-30 UNIT 175

GNP HAIR SKIN & NAILS EXTRA ST TABS 151

GNP HAIR/SKIN/NAILS TABS 50 MG-3.5 MG-6.5 MG-25 MCG-25 MCG-7.5 MG-7.2 MG-50 UNIT-25 MCG-2500 UNIT-5 MG-25 MG-10 MG-10 MG-15 MG-3.3 MG-10 MG-5 MG-20 MG-0.5 MG-150 MCG-25 UNIT-54 MG-73 MG-897 MCG-10 MG-50 MG-0.6 MG-10 MG 151

GNP HEALTHY EYES SUPERVISION 2 CAPS 250 MG-5 MG-1 MG-40 MG-1 MG-200 UNIT 151

GNP HEALTHY EYES TABS 200 MG-2 MG-27 MG-2 MG-40 MG-185 MG-55 MCG-300 MCG, 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG 151

GNP INSULIN SYRINGE 125

GNP INSULIN SYRINGES 125

GNP INSULIN SYRINGES 28GX1/2" 125

GNP INSULIN SYRINGES 29GX1/2"

125

GNP INSULIN SYRINGES 30GX5/16" 125

GNP INSULIN SYRINGES 31GX5/16" 125

GNP LANCING SYSTEM DEVICE MISC 107

GNP MEGA MULTI FOR MEN TABS 150 MG-125 MCG-200 MCG-15 MG-15 MG-2.5 MG-5 MG-5 MG-15 MG-15 MG-15 MG-5 MG-250 MCG-5 MG-175 MCG-2.5 MCG-33.5 MG-25 MG-50 MG-2.5 MG-25 MCG-1 MG-12.5 MG-105 MG-75 MCG-50 MCG-25 MG-1500 MCG-37.5 MCG-12.5 MG-15 MCG-5 MCG-35 MG-15 MG-35 MG-35 MG-15 MG-25 MG-25 MG, 150 MG-25 MG-15 MG-125 MCG-50 UNIT-200 MCG-2.5 MG-5 MG-100 UNIT-15 MCG-15 MG-37.5 MCG-5 MG-5 MG-15 MG-250 MCG-15 MG-5 MG-175 MCG-15 MG-50 MG-12.5 MG-1 MG-100 MG-2.5 MG-5000 UNIT-75 MCG-25 MG-12.5 MG-25 MCG-5 MCG-15 MG-15 MG-35 MG-35 MG-50 MCG-35 MG-25 MG-25 MG 151

GNP MEGA MULTI FOR WOMEN TABS 100 MG-40 MG-40 MCG-50 UNIT-200 MCG-200 UNIT-40 MCG-5000 UNIT-40 MG-37.5 MCG-5 MG-10 MCG-40 MG-250 MCG-40 MG-5 MG-250 MG-40 MG-100 MG-7.5 MG-12.5 MG-13.5 MG-2.5 MG-25 MCG-1 MG-50 MCG-1 MG-50 MCG-75 MCG-12.5 MG-1 MG-1 MG-25 MG 151

GNP ONE DAILY MAXIMUM TABS 151

GNP ONE DAILY MENS HEALTH 50+ TABS 120 MG-6 MG-30 MCG-400 MCG-400 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-2500 UNIT-15 MG-120 MG-600 MCG-4.5 MG-100 MG-22.5 MG-40 MG-90 MCG-150 MCG-33 UNIT-2 MG-180 MCG-4 MG-105 MCG-120 MG 152

GNP ONE DAILY MENS HEALTH TABS 152

GNP ONE DAILY MENS/LYCOPENE TABS 90 MG-3 MG-30 MCG-400 MCG-400 UNIT-18 MCG-1.7 MG-20 MCG-16 MG-3500 UNIT-5 MG-210 MG-600 MCG-1.2 MG-120 MG-15 MG-2 MG-100 MG-45 UNIT-2 MG-120 MCG-105 MCG 152

GNP ONE DAILY WOMENS 50+ TABS 60 MG-6 MG-30 MCG-400 MCG-800 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-15 MG-405 MG-4.5 MG-50 MG-22.5 MG-90 MCG-150 MCG-33 UNIT-2 MG-180 MCG-4 MG-2500 UNIT-20 MCG-120 MG 152

GNP ONE DAILY WOMENS TABS 60 MG-120 MG-3.2 MG-30 MCG-400 MCG-800 UNIT-9.5 MCG-2.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-300 MG-2.4 MG-50 MG-15 MG-22.5 UNIT-2 MG-2 MG-120 MCG-20 MCG-50 MG 152

GNP PRENATAL TABS 178

GNP PRENATAL/FOLIC ACID TABS 178

GNP SHEER ADHESIVE PADS ...88

GNP STERILE GAUZE PADS 88

GNP STERILE LANCETS 30G ..107

GNP STERILE LANCETS 33G ..107

GNP THERAPEUTIC-M TABS ...152

GNP TRUE METRIX AIR METER KIT 107

GNP TRUE METRIX GLUCOSE METER KIT 107

GNP TRUE METRIX GLUCOSE STRIPS STRP 69

GNP TRUETRACK TEST STRIPS STRP 69

GNP ULTRA COM INSULIN SYRINGE 125

GNP WATERPROOF ADHESIVE 4"X4" PADS 88

GOCOVRI CP24 40

GOJJI BLOOD GLUCOSE TEST STRP 69

GOJJI BLOOD KETONE TEST ...69

GOJJI BLOOD TEST STRIP/LANCETS STRP 69

GOJJI CONTROL SOLN 107

GOJJI LANCING DEVICE/CLEAR CAP MISC 107

GOJJI STERILE LANCETS 107

GOLD BOND ULTIMATE HEALING OINT 59

GOMEKLI CAPS PO 1 MG, 2 MG .37

GOMEKLI TBSO PO 1 MG 38

GORDONS UREA CREA 40 % 59

GRALISE TABS (Use gabapentin (once-daily)) 193

granisetron hcl TABS 27

GRANISOL SOLN PO 27

GRANIX SOLN 300 MCG/ML 83

GRANIX SOSY 83

GRASTEK SUBL 3

griseofulvin microsize SUSP 28

griseofulvin microsize TABS 28

griseofulvin ultramicrosize 28

GRISEOFULVIN ULTRAMICROSIZE 165 MG 28

guaifenesin LIQD 52

guaifenesin TB12 52

guaifenesin-codeine SOLN 52

guanfacine hcl (adhd) 2

guanfacine hcl 32

GUARDIAN 4 GLUCOSE SENSOR . 107

GUARDIAN 4 TRANSMITTER .. 107

GUARDIAN CONNECT TRANSMITTER 107

GUARDIAN LINK 3 TRANSMITTER 107

GUARDIAN SENSOR (3) 107

GUARDIAN SENSOR 3 107

GVOKE HYPOPEN 1-PACK SOAJ 23

GVOKE HYPOPEN 2-PACK SOAJ 23

GVOKE KIT SOLN 23

GVOKE PFS SOSY 1 MG/0.2ML .. 23

GYNAZOLE-1 198

H-E-B INCONTROL ADV LANCING MISC 107

H-E-B INCONTROL LANCETS 28G . 107

H-E-B INCONTROL LANCETS 30G . 107

H-E-B INCONTROL LANCETS 33G . 107

HADLIMA PUSHTOUCH SOAJ 4

HADLIMA SOSY 4

HAEGARDA SOLR SC 81

HAIR SKIN & NAILS ADVANCED TABS 152

HAIR SKIN & NAILS TABS 152

HAIR SKIN AND NAILS FORMULA TABS 30 MG-2.5 MG-2500 MCG-100 MCG-5 MG-2.5 MG-500 UNIT-4 MCG-2500 UNIT-2.5 MG-5 MG-15 MG-12.5 MG-7.5 MG-5 MG-4 MG-130 MG-3.75 MG-1 MG-25 MG-7.5 UNIT-64 MG-15 MG-5 MG-50 MG-1.5 MG-25 MG 152

HAIR SKIN NAILS CAPS 30 MG-1.667 MG-1666.667 MCG-10 UNIT-133.333 MCG-666.667 UNIT-2.667 MCG-1666.667 UNIT-1.667 MG-8.333 MG-5 MG-3.333 MG-1.667 MG-2.5 MG-10 MG-0.333 MG-10 MG-1 MG-20 MG-8.333 MG-4.167 MCG 152

HAIR/SKIN/NAILS CAPS 152

HAIR/SKIN/NAILS TABS 152

halcinonide CREA 58

halcinonide SOLN 0.1 % 58

halobetasol propionate CREA 58

halobetasol propionate FOAM 58

HALOBETASOL PROPIONATE LOTN 0.05 % 58

halobetasol propionate OINT 58

HALOG CREA (Use halcinonide) .. 58

HALOG SOLN 0.1 % (Use halcinonide) 58

haloperidol decanoate 41

haloperidol lactate CONC 41

haloperidol lactate SOLN 41

haloperidol TABS 0.5 MG, 1 MG, 10 MG 41

haloperidol TABS 2 MG, 5 MG, 20 MG 41

HARVONI PACK 45

HARVONI TABS 45

HAVRIX IM 720 EL U/0.5ML 197

HEAD CARE PROACTIVE HEALTH TABS 152

HEALTHPRO BLOOD GLUCOSE MONITO KIT 108

HEALTHWISE INSULIN SYR/NEEDLE 125

HEALTHY EYES SUPERVISION 2 CAPS 152

HEALTHY EYES TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG 152

HEALTHY EYES/LUTEIN-ZEAXANTHIN CAPS 60 MG-13.5 MG-6 MG-15 MG 152

HEALTHY HAIR/SKIN/NAILS TABS 2 MG-2000 MCG-400 MCG-25 MG-100 MG-25 MCG-1.7 MG-10 MG-40 MG-1.5 MG-50 MG-2500 UNIT-50 MG-50 MG 175

HEMANGEOL SOLN PO 46

HEMATINIC PLUS VIT/MINERALS TABS 84

HEMGENIX 80

HEMLIBRA 80

HEMOFIL M SOLR 250 UNIT, 500 UNIT, 1000 UNIT, 1700 UNIT 80

HEMORRHOIDAL 0.25 %-85.5 %-3 % 10

HEPAGAM B SOLN IJ 189

heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/0.5ML, 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML 16

HEPLISAV-B SOSY 197

HERNEXEOS TABS PO 60 MG ... 34

HETLIOZ CAPS (Use tasimelteon) 85

HETLIOZ LQ SUSP 85

HI-KOVITE 2-PART FORMULA TABS 400 UNIT-200 MG-10 MG-30 MCG-400 MCG-10 MG-10 MCG-5000 UNIT-10 MG-10 MG-100 MG-10 MG-9 MG-0.5 MG-7.5 MG-35 MG-60 MG-30 UNIT-1 MG-120 MG-75 MCG-17.5 MCG-10 MG-10 MG .. 153

HIBERIX SOLR IJ 197

HIGH POTENCY MULTIVIT/FA TABS 153

HIGH POTENCY MULTIVITAMIN TABS 175

HIZENTRA SOLN 189

HIZENTRA SOSY 189

HM ADHESIVE ANTIBACTERIAL PADS 88

HM COMPLETE MEN TABS 153

HM EMBRACE TALK SYSTEM KIT 108

HM STERILE PADS PADS 88

HM ULTICARE INSULIN SYRINGE . 125

HORIZANT 193

HULIO (2 PEN) AJKT 4

HULIO (2 SYRINGE) PSKT 4

HUMALOG JUNIOR KWIKPEN SOPN 25

HUMALOG KWIKPEN SOPN 100 UNIT/ML 25

HUMALOG KWIKPEN SOPN 200 UNIT/ML 25

HUMALOG MIX 50/50 KWIKPEN SUPN 25

HUMALOG MIX 75/25 KWIKPEN SUPN 25

HUMALOG MIX 75/25 SUSP 25

HUMALOG SOCT 25

HUMALOG SOLN IJ 25

HUMALOG TEMPO PEN SOPN .. 25

HUMATE-P SOLR 80

HUMATROPE CART IJ 75

HUMIRA (2 PEN) AJKT 4

HUMIRA (2 SYRINGE) PSKT 4

HUMIRA-CD/UC/HS STARTER AJKT 80 MG/0.8ML 4

HUMIRA-PSORIASIS/UVEIT STARTER AJKT 4

HUMULIN 70/30 KWIKPEN SUPN 25

HUMULIN 70/30 SUSP 25

HUMULIN N KWIKPEN SUPN 25

HUMULIN N SUSP 25

HUMULIN R SOLN IJ 25

HUMULIN R U-500 KWIKPEN SOPN SC 25

HW EMBRACE PRO GLUCOSE METER DEVI 108

HW EMBRACE PRO GLUCOSE TEST STRP 70

HW EMBRACE TALK BLOOD GLUCOSE DEVI 108

HW EMBRACE TALK GLUCOSE TEST STRP 70

HYCAMTIN CAPS 39

hydralazine hcl TABS 33

HYDREA (Use hydroxyurea) 39

hydrochlorothiazide CAPS 74

hydrochlorothiazide TABS 74

hydrocodone bitartrate CP12 8

hydrocodone bitartrate T24A 8

hydrocodone bitartrate-homatropine methylbromide SOLN 51

hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML 9

hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML 9

hydrocodone-acetaminophen TABS 325 MG-10 MG 9

hydrocodone-acetaminophen TABS 325 MG-5 MG 9

hydrocodone-acetaminophen TABS 325 MG-7.5 MG 9

hydrocortisone (intrarectal) 10

hydrocortisone (rectal) EX 11

hydrocortisone (topical) CREA 58

hydrocortisone (topical) LOTN 1 % 58

hydrocortisone (topical) LOTN 2.5 % . 58

hydrocortisone (topical) OINT 58

hydrocortisone acetate (topical) OINT 58

HYDROCORTISONE ACETATE CREA 58
hydrocortisone butyrate CREA 58
hydrocortisone butyrate OINT 58
hydrocortisone butyrate SOLN 58
HYDROCORTISONE COMPLETE KIT THPK 58
HYDROCORTISONE GEL 2 % 58
hydrocortisone TABS 51
hydrocortisone vaginal 198
hydrocortisone valerate CREA 58
hydrocortisone valerate OINT 58
hydrocortisone w/acetic acid 189
HYDROMORPHONE HCL SUPP 8
hydromorphone hcl TABS 8
hydromorphone hcl TB24 8
hydroxychloroquine sulfate 200 MG 33
hydroxyurea 39
hydroxyzine hcl SOLN 25 MG/ML, 50 MG/ML 12
hydroxyzine hcl SYRP 12
hydroxyzine hcl TABS 12
hydroxyzine pamoate CAPS 12
HYLAZINC TABS 153
HYMPAVZI 80
hyoscyamine sulfate ELIX 195
hyoscyamine sulfate SOLN PO 0.125 MG/ML 195
hyoscyamine sulfate TB12 0.375 MG 195
hyoscyamine sulfate TBDP 0.125 MG 195
HYPERHEP B SOLN IM 189
HYPERHEP B SOSY 110 UNIT/0.5ML 189
HYPERRAB SOLN 189
HYPOLANCE AST LANCING KIT 108
HYQVIA 189
HYRIMOZ SOAJ 40 MG/0.4ML 5
HYRIMOZ SOSY 5
HYRIMOZ-CROHNS/UC STARTER SOAJ 5
HYRIMOZ-PED>/=40KG CROHN START SOSY 5
HYRIMOZ-PLAQ PSOR/UVEIT START SOAJ 5
HYRNUO TABS PO 10 MG 38
HYSINGLA ER T24A 20 MG, 30 MG, 40 MG, 60 MG, 80 MG, 100 MG 8
HYVITE TABS 153
HYZAAR (Use losartan potassium & hydrochlorothiazide) 33
I-VITE TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG 153
I-VITE W/LUTEIN TABS 153
ibandronate sodium SOLN 75
ibandronate sodium TABS 75
IBRANCE CAPS 100 MG, 125 MG 38
IBRANCE TABS 38
IBSRELA 79
IBTROZI CAPS PO 200 MG 38
ibuprofen CAPS 6
ibuprofen CHEW 6
ibuprofen SUSP 50 MG/1.25ML, 100 MG/5ML, 200 MG/10ML 6
ibuprofen TABS 200 MG, 300 MG, 400 MG, 600 MG 6
ibuprofen TABS 800 MG 6
ibuprofen-acetaminophen TABS 6
ibuprofen-famotidine 6
ICAPS AREDS FORMULA TABS 153
ICAPS CAPS 226 MG-34.8 MG-0.8 MG-14320 UNIT-200 MG 153
ICAPS LUTEIN & OMEGA-3 CAPS 240 MCG-1.2 MG-16 MG-1.3 MG-2.4 MCG-1.3 MG-10 MG-600 MCG-45 MG-2 MG-10 UNIT-2.3 MG-0.9 MG-7 MG-1 MG-34 MCG-280 MG 153
ICAPS MV TABS 128 MG-7.5 MCG-100 MCG-0.5 MG-100 UNIT-1.5 MCG-2.5 MG-6.25 MCG-2.5 MG-1.67 MG-2.5 MG-0.83 MG-83.25 MG-0.075 MG-0.38 MG-25 MG-21.15 MG-0.9 MG-18.75 MCG-30 MCG-37.5 MCG-107.5 UNIT-35 MG-0.5 MG-10 MCG 153
icatibant acetate SOSY 81
ICLUSIG 38
icosapent ethyl 30
ICOTYDE TABS PO 200 MG 55
IDELVION 80
IDHIFA 38
IDOSE TR IMPL 188
IDVYNSO TABS PO 43
IHEALTH BLOOD GLUCOSE TEST

STR STRP 70
IHEALTH CONTROL SOLUTION LIQD 108
IHEALTH GLUCO+ KIT 10 KIT 108
ILARIS SOLN 5
ILET CONTACT DETACH 23" 6MM MISC 108
ILET INFUSION-FLEX 23" 6MM MISC 108
ILET INFUSION-INSET 23" 6MM MISC 108
ILET INFUSION-INSET 32" 6MM MISC 108
ILET INSULIN PUMP DEVI 108
ILET STARTER - CONTACT DETACH MISC 108
ILET STARTER KIT - INSET 23" MISC 108
ILET STARTER KIT - INSET 32" MISC 108
ILEVRO 188
ILUMYA 55
ILUVIEN 187
imatinib mesylate TABS 38
IMBRUVICA CAPS 38
IMBRUVICA SUSP 38
IMBRUVICA TABS 140 MG, 280 MG, 420 MG 38
imipramine hcl TABS 22
imipramine pamoate 22
imiquimod 5 % 59
IMITREX STATDOSE REFILL SOCT 4 MG/0.5ML 131
IMITREX STATDOSE REFILL SOCT 6 MG/0.5ML 131
IMITREX STATDOSE SYSTEM SOAJ 4 MG/0.5ML 131
IMITREX STATDOSE SYSTEM SOAJ 6 MG/0.5ML (Use sumatriptan succinate) 131
IMITREX TABS 25 MG (Use sumatriptan succinate) 131
IMITREX TABS 50 MG, 100 MG (Use sumatriptan succinate) 131
IMKELDI SOLN 38
IMMUNE 24 HOUR+ CAPS 153
IMMUNE ESSENTIALS DAILY CAPS 153
IMULDOSA SOLN IV 130 MG/26ML . 78
IMULDOSA SOSY SC 45 MG/0.5ML, 90 MG/ML 55
IN-CHECK DIAL FLOW TRAINER DEVI 128
IN-CHECK INSPIRATORY FLOW MTR DEVI 129
INBRIJA CAPS 40
INCREVACORE TABS 153
INCRUSE ELLIPTA 62.5 MCG/ACT (Use umeclidinium bromide) 14
indapamide TABS 1.25 MG, 2.5 MG . 74
INDERAL LA CP24 (Use propranolol hcl) 46
INDERAL XL 46
indomethacin CAPS 25 MG, 50 MG 6
indomethacin CPCR 6
indomethacin SUPP 6
indomethacin SUSP 6
INFANRIX 195
INFINITY BLOOD GLUCOSE SYSTEM KIT 108
INFINITY BLOOD GLUCOSE TEST STRP 70
INFINITY CONTROL SOLN 108
INFLECTRA SOLR 78
INFLIXIMAB 78
INGREZZA CAPS 191
INGREZZA CPPK 191
INGREZZA CPSP 191
INLURIYO TABS PO 200 MG 35
INLYTA 34
INNOPRAN XL 46
INPEFA 47
INQOVI 37
INREBIC 38
INSPIREASE MISC 129
INSPIREASE RESERVOIR BAGS 129
INSULIN ASPART FLEXPEN SOPN . 25
INSULIN ASPART SOLN IJ 25
INSULIN DEGLUDEC FLEXTOUCH SOPN 25
INSULIN DEGLUDEC SOLN 25
INSULIN GLARGINE MAX SOLOSTAR SOPN 25
INSULIN GLARGINE SOLOSTAR SOPN 300 UNIT/ML 25
INSULIN GLARGINE-YFGN SOLN 25

INSULIN GLARGINE-YFGN SOPN 25
INSULIN LISPRO (1 UNIT DIAL) SOPN 25
INSULIN LISPRO JUNIOR KWIKPEN SOPN 25
INSULIN LISPRO PROT & LISPRO SUPN 25
INSULIN LISPRO SOLN IJ 25
INSULIN SYRINGE 125
INSULIN SYRINGE-NEEDLE U-100 125
INTELENCE 25 MG 44
INTUNIV (Use guanfacine hcl (adhd)) 2
INVEGA 3 MG, 6 MG, 9 MG (Use paliperidone) 41
INVEGA HAFYERA 1092 MG/3.5ML 41
INVEGA HAFYERA 1560 MG/5ML 41
INVEGA SUSTENNA 41
INVEGA TRINZA 273 MG/0.88ML 41
INVEGA TRINZA 410 MG/1.32ML 41
INVEGA TRINZA 546 MG/1.75ML 41
INVEGA TRINZA 819 MG/2.63ML 41
INVOKAMET TABS 22
INVOKAMET XR TB24 22
INVOKANA 26
IOPIDINE 185
ipratropium bromide hfa 17 MCG/ACT 14
ipratropium bromide SOLN 0.02 % 14
ipratropium-albuterol SOLN 15
IQIRVO 79
irbesartan 32
irbesartan-hydrochlorothiazide 33
IRESSA (Use gefitinib) 35
IRON CHEWS PEDIATRIC CHEW 84
iron sucrose 20 MG/ML 84
ISENTRESS CHEW 100 MG 44
ISENTRESS CHEW 25 MG 44
ISENTRESS HD TABS 44
ISENTRESS PACK 44
ISENTRESS TABS 44
isoniazid SYRP 34
isoniazid TABS 34
isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG 12
isosorbide mononitrate TABS 12
isosorbide mononitrate TB24 12
isotretinoin 10 MG, 20 MG, 40 MG 53
isradipine CAPS 46
ISTALOL SOLN (Use timolol maleate (ophth)) 185
ITCH RELIEF CREA 55
ITOVEBI 38
ITVISMA SUSP IT 183
ivabradine hcl TABS 48
ivermectin (pediculicide) 62
IWILFIN 39
IXINITY SOLR 500 UNIT, 1000 UNIT, 1500 UNIT, 3000 UNIT 80
IYUZEH SOLN 188
J & J ADHESIVE LARGE PADS 88
J & J GAUZE PADS 88
J & J GAUZE SPONGES 12-PLY MISC 88
J & J GAUZE SPONGES 16-PLY MISC 88
J & J GAUZE SPONGES 8-PLY MISC 88
J & J NON-STICK LARGE PADS 88
JAKAFI 38
JAKAFI XR PO 11 MG, 22 MG, 33 MG, 44 MG, 55 MG 38
JANUMET TABS 1000 MG-50 MG, 500 MG-50 MG (Use sitagliptin phosphate-metformin hcl) 22
JANUMET XR TB24 1000 MG-100 MG, 1000 MG-50 MG, 500 MG-50 MG (Use sitagliptin phosphate-metformin hcl) 22
JANUVIA 25 MG, 50 MG, 100 MG (Use sitagliptin phosphate) 23
JARDIANCE 27
JATENZO CAPS 10
JAYPIRCA 38
JENLIVA PRENATAL/POSTNATAL CAPS 178
JENTADUETO TABS 22
JENTADUETO XR TB24 22
JIDEYTRO TABS PO 25 MG, 100 MG 38
JIVI 80
JOENJA 133
JOINT HEALTH & BONE

STRENGTH TABS 153
JORNAY PM CP24 3
JOURNAVX 7
JUBBONTI SOSY SC 60 MG/ML ..75
JUBEREQ SOLN SC 120 MG/1.7ML 75
JULUCA 44
JUVMO TABS PO 5 MG, 10 MG, 15 MG 40
JUVMO TITRATION PACK TBPK PO 40
JUXTAPID 2 MG, 5 MG, 10 MG, 20 MG, 30 MG 31
JYLAMVO SOLN PO 34
JYNNEOS 198
K-PAX IMMUNE PROFESSIONAL ST TABS 153
KALBITOR 81
KALETRA SOLN 44
KALYDECO PACK 194
KALYDECO TABS 194
KAMELEON LUBRICATED MISC .89
KAPSPARGO SPRINKLE CS24 ..46
KATERZIA 46
KCENTRA 80
KEDRAB SOLN 189
KENDALL HYDROPHILIC FOAM DRESS PADS 88
KENDALL HYDROPHILIC FOAM PLUS PADS 88
KEPPRA SOLN PO 100 MG/ML (Use levetiracetam) 18
KEPPRA TABS (Use levetiracetam) . 18
KEPPRA XR TB24 (Use levetiracetam) 18
KERLIX SPONGES PADS 88
KESIMPTA 192
ketoconazole (topical) CREA 54
ketoconazole (topical) SHAM 2 % .54
KETONE TEST STRP 70
ketoprofen CAPS 50 MG, 75 MG ...6
ketoprofen CP24 6
ketorolac tromethamine (ophth) . 188
ketorolac tromethamine TABS 6
KETOSTIX STRP 70
ketotifen fumarate (ophth) 0.035 % 188
KEVZARA SOAJ 5
KEVZARA SOSY 6
KEYFOLIC TABS 153
KEYLOSA TABS 153
KIMONO COLORS DEVI 89
KIMONO MAXX-LARGE FLARE MISC 89
KIMONO MICRO THIN PLUS MISC . 89
KIMONO MISC 89
KIMONO PLUS MISC 89
KIMONO PS MISC 89
KIMONO PS PLUS MISC 89
KIMONO SENSATION MISC 89
KIMONO SENSATION PLUS MISC 89
KIMONO SPECIAL DEVI 89
KINERET SOSY 5
KINRAY INSULIN SYRINGE 125
KINRIX SUSY 195
KIRSTY SOLN IJ 100 UNIT/ML ... 26
KIRSTY SOPN SC 100 UNIT/ML ..26
KISQALI (200 MG DOSE) 38
KISQALI (400 MG DOSE) 38
KISQALI (600 MG DOSE) 38
KISUNLA 191
KITABIS PAK (W/ NEBULIZER) NEBU 300 MG/5ML (Use tobramycin) 3
KLONOPIN TABS (Use clonazepam) 17
KLOXXADO LIQD 27
KOATE SOLR 80
KOATE-DVI SOLR 1000 UNIT 80
KOGENATE FS KIT 250 UNIT, 500 UNIT, 3000 UNIT 80
KOMZIFTI CAPS PO 200 MG 37
KONSYL DAILY FIBER PACK 100 % 85
KONVOMEP SUSR 196
KOSELUGO 38
KOSELUGO PO 5 MG, 7.5 MG ... 38
KOVALTRY 80
KP ADULTS 50+ DAILY FORMULA TABS 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-50 MG-11 MG-80 MG-150 MCG-220 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10

MCG-45 MCG-72 MG-2 MG, 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-50 MG-11 MG-80 MG-150 MCG-220 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MG-72 MG-2 MG 153

KP ADULTS DAILY FORMULA TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-3500 UNIT-10 MG-18 MG-1.5 MG-50 MG-11 MG-80 MG-75 MCG-200 MG-45 MCG-150 MCG-30 UNIT-20 MG-0.5 MG-5 MCG-10 MCG-2.3 MG-55 MCG-10 MCG-35 MCG-72 MG-2 MG, 60 MG-2 MG-30 MCG-400 UNIT-1.7 MG-25 MCG-20 MG-3500 UNIT-10 MG-18 MG-1.5 MG-50 MG-11 MG-80 MG-200 MG-45 MCG-150 MCG-30 UNIT-20 MG-0.5 MG-5 MCG-10 MCG-2.3 MG-75 MCG-55 MCG-10 MCG-35 MG-72 MG-2 MG 154

KP MENS 50+ DAILY FORMULA TABS 120 MG-6 MG-30 MCG-400 MCG-700 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-3500 UNIT-15 MG-120 MG-370 MCG-4.5 MG-110 MG-24 MG-90 MCG-150 MCG-30 UNIT-2.2 MG-4.2 MG-180 MCG-117 MCG, 60 MG-6 MG-30 MCG-400 MCG-700 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-2500 UNIT-15 MG-300 MG-4.5 MG-100 MG-22.5 MG-120 MG-90 MCG-150 MCG-22.5 UNIT-2 MG-4 MG-180 MCG-110 MCG-120 MG 154

KP MENS DAILY FORMULA TABS 60 MG-3 MG-30 MCG-400 MCG-700 UNIT-18 MCG-1.7 MG-20 MCG-16 MG-3500 UNIT-5 MG-300 MCG-1.2 MG-120 MG-15 MG-2 MG-100 MG-210 MG-22.5 UNIT-2 MG-120 MCG-110 MCG, 60 MG-3 MG-75 MCG-400 MCG-700 UNIT-18 MCG-1.7 MG-20 MCG-18 MG-3500 UNIT-16 MG-210 MG-300 MCG-1.35 MG-140 MG-15 MG-2 MG-22.5 UNIT-2 MG-120 MCG-110 MCG 154

KP PRENATAL MULTIVITAMINS TABS 178

KP VISION FORMULA TABS 60 MG-40 MG-1000 UNIT-30 UNIT-2 MG-40 MCG 154

KP VISION FORMULA/LUTEIN TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG 154

KP WOMENS 50+ DAILY FORMULA TABS 120 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-3500 UNIT-10 MG-500 MG-4.5 MG-50 MG-24 MG-2.2 MG-90 MCG-150 MCG-30 UNIT-4.2 MG-180 MCG-27 MCG, 60 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-2500 UNIT-15 MG-4.5 MG-50 MG-22.5 MG-500 MG-90 MCG-150 MCG-22.5 UNIT-2 MG-4 MG-180 MCG-20 MCG-120 MG 154

KP WOMENS DAILY FORMULA TABS 60 MG-2 MG-30 MCG-400 MCG-1000 UNIT-6 MCG-1.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-1.5 MG-50 MG-15 MG-500 MG-22.5 UNIT-2 MG-2 MG-120 MCG-20 MCG, 60 MG-2 MG-30 MCG-400 MCG-1000 UNIT-6 MCG-1.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-500 MG-1.6 MG-50 MG-15 MG-22.5 UNIT-2 MG-2 MG-120 MCG-20 MCG 155

KPN PRENATAL TABS 178

KRAZATI 38

KRINTAFEL 33

KROGER AUTOLET LANCING DEVICE MISC 108

KROGER HEALTHPRO CONTROL HI/LO LIQD 108

KROGER HEALTHPRO GLUCOSE TEST STRP 70

KROGER HEALTHPRO LANCET 26G 108

KYLEENA 50

l-methylfolate TABS 7.5 MG, 15 MG . 73

L-TRYPTOPHAN TABS 184

labetalol hcl TABS 46

lacosamide SOLN IV 200 MG/20ML . 18

lacosamide TABS 18

lactic acid (ammonium lactate) CREA 59

lactic acid (ammonium lactate) LOTN 12 % 59

lactulose (encephalopathy) 78

lactulose SOLN 86

LAMICTAL CHEW (Use lamotrigine) . 18

LAMICTAL ODT KIT (Use lamotrigine) 18

LAMICTAL ODT TBDP (Use lamotrigine) 18

LAMICTAL STARTER KIT 25 MG (Use lamotrigine) 18

LAMICTAL TABS (Use lamotrigine) 18

LAMICTAL XR KIT 18

LAMICTAL XR TB24 (Use lamotrigine) 18
lamivudine SOLN 44
lamivudine TABS 150 MG 44
lamivudine TABS 300 MG 44
lamivudine-zidovudine 44
lamotrigine CHEW 18
lamotrigine KIT 25 MG 18
lamotrigine TABS 18
lamotrigine TB24 18
lamotrigine TBDP 18
LANCET DEVICE WITH EJECTOR MISC 108
LANCETS 108
LANCETS 28G THIN 108
LANCETS 30G 109
LANCETS 33G 109
LANCETS MICRO THIN 33G 109
LANCETS SUPER THIN 28G 109
LANCETS ULTRA THIN 109
LANCETS ULTRA THIN 30G 109
LANCING DEVICE MISC 109
LAND BEFORE TIME MULTIVITAMIN CHEW 15 MG 177
lansoprazole CPDR 195
lansoprazole TBDD 195
lanthanum carbonate CHEW 79
LANTUS SOLN 26
LANTUS SOLOSTAR SOPN 26
LANZO MISC 109
lapatinib ditosylate 38
LASTACAFT 188
latanoprost SOLN 188
LATUDA (Use lurasidone hcl) 40
LAZCLUZE 35
LEADER ADVANCED LANCING DEVICE MISC 109
LEDIPASVIR-SOFOSBUVIR TABS 45
LEMTRADA 192
lenalidomide 133
LENVIMA (10 MG DAILY DOSE) 34
LENVIMA (12 MG DAILY DOSE) 34
LENVIMA (14 MG DAILY DOSE) 34
LENVIMA (18 MG DAILY DOSE) 34
LENVIMA (20 MG DAILY DOSE) 34
LENVIMA (24 MG DAILY DOSE) 34
LENVIMA (4 MG DAILY DOSE) 34
LENVIMA (8 MG DAILY DOSE) 34
LEQEMBI 191
LEQEMBI IQLIK (500 MG DOSE) SC 191
LEQEMBI IQLIK SC 360 MG/1.8ML 191
LEQVIO 31
LESCOL XL TB24 (Use fluvastatin sodium) 31
LETAIRIS (Use ambrisentan) 48
letrozole 35
leucovorin calcium TABS 39
LEUKERAN 34
LEUKINE SOLR IJ 83
leuprolide acetate (3 month) INJ 22.5 MG 36
leuprolide acetate KIT IJ 1 MG/0.2ML 36
levalbuterol hcl 15
levalbuterol hcl 1.25 MG/0.5ML 15
levalbuterol tartrate 15
LEVEMIR SOLN 26
levetiracetam SOLN IV 500 MG/5ML 18
levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML 18
levetiracetam TABS 18
levetiracetam TB24 18
levetiracetam TB3D 250 MG, 500 MG 18
levobunolol hcl 0.5 % 185
levocarnitine (metabolic modifiers) SOLN PO 1 GM/10ML 76
levocarnitine (metabolic modifiers) TABS 76
levocetirizine dihydrochloride SOLN 29
levocetirizine dihydrochloride TABS 29
levofloxacin (ophth) 0.5 % 186
levofloxacin SOLN PO 77
levofloxacin TABS 77
levonorgestrel (emergency oc) 1.5 MG 50
levonorgestrel & eth estradiol TABS 49
levonorgestrel-eth estradiol (triphasic) 49
levonorgestrel-ethinyl estradiol (91-

day) 0.03 MG-0.15 MG 49

levonorgestrel-ethinyl estradiol (continuous) 49

levonorgestrel-ethinyl estradiol-iron 49

levothyroxine sodium TABS 194

LEXAPRO TABS (Use escitalopram oxalate) 21

LEXETTE FOAM (Use halobetasol propionate) 58

LIALDA TBEC (Use mesalamine) . 78

LIBERTY GLUCOSE CONTROL LIQD 109

LIBERVANT FILM 17

LIDAFLEX PTCH 60

lidocaine CREA 4 % 60

lidocaine CREA 4 % 61

lidocaine hcl (mouth-throat) 2 % .. 134

lidocaine hcl (mouth-throat) 4 % .. 134

lidocaine hcl CREA 3 % 60

lidocaine hcl CREA 4 % 60

lidocaine hcl GEL 2 % 60

lidocaine hcl LIQD 60

lidocaine hcl PRSY 60

lidocaine hcl SOLN 60

lidocaine OINT 5 % 61

lidocaine PTCH 4 % 61

lidocaine PTCH 5 % 61

lidocaine-hydrocortisone acetate (rectal) CREA EX 10

lidocaine-menthol PTCH 4 %-4 % . 60

lidocaine-prilocaine CREA 60

lidocaine-prilocaine KIT 60

LIDODERM PTCH (Use lidocaine) 61

LIDOMAX GEL 2 % 61

LIFYORLI (125 MG DOSE) CPPK PO 36

LIFYORLI (150 MG DOSE) CPPK PO 36

LILETTA (52 MG) 50

linezolid SOLN 12

linezolid SUSR 12

linezolid TABS 12

LINZESS 79

liothyronine sodium TABS 194

LIPFENDRA TABS PO 20 MG 31

LIPITOR TABS (Use atorvastatin calcium) 31

LIPOFEN CAPS (Use fenofibrate) . 30

liraglutide 24

lisdexamfetamine dimesylate CAPS 1

lisdexamfetamine dimesylate CHEW . 1

lisinopril & hydrochlorothiazide 33

lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG 31

LITETOUCH INSULIN SYRINGE 125

lithium 40

lithium carbonate CAPS 40

lithium carbonate TABS 40

lithium carbonate TBCR 40

LIVALO (Use pitavastatin calcium) 31

LIVDELZI 79

LIVER DETOX TABS 155

LIVITA ADULTS LIQD 155

LIVITA CHILDREN LIQD 177

LIVMARLI 78

LIVMARLI PO 10 MG, 15 MG, 20 MG, 30 MG 78

LIVTENCITY 45

LO LOESTRIN FE TABS 49

lofexidine hcl 190

LOHIST-D LIQD 52

LOKELMA 134

lomustine 34

LONSURF 37

loperamide hcl CAPS 27

loperamide hcl TABS 27

LOPID TABS (Use gemfibrozil) 30

lopinavir-ritonavir SOLN 44

lopinavir-ritonavir TABS 25 MG-100 MG 44

lopinavir-ritonavir TABS 50 MG-200 MG 44

LOPRESSOR SOLN PO 10 MG/ML . 46

LOPRESSOR TABS (Use metoprolol tartrate) 46

LOQTORZI 35

loratadine & pseudoephedrine TB12 . 52

loratadine & pseudoephedrine TB24 . 52

loratadine CHEW 29

loratadine SOLN 29
loratadine TABS 29
loratadine TBDP 10 MG 29
lorazepam CONC 12
LORAZEPAM SOLN 2 MG/ML 13
lorazepam SOLN 12
lorazepam TABS 0.5 MG, 2 MG ... 13
lorazepam TABS 1 MG 13
LORBRENA 38
losartan potassium & hydrochlorothiazide 33
losartan potassium 32
LOTEMAX GEL (Use loteprednol etabonate) 187
LOTEMAX OINT 187
LOTEMAX SM GEL 187
LOTEMAX SUSP (Use loteprednol etabonate) 187
LOTENSIN 10 MG, 20 MG, 40 MG (Use benazepril hcl) 31
LOTENSIN HCT 12.5 MG-10 MG, 12.5 MG-20 MG, 25 MG-20 MG (Use benazepril & hydrochlorothiazide) . 33
loteprednol etabonate GEL 187
loteprednol etabonate SUSP 187
loteprednol etabonate-tobramycin 187
LOTRONEX (Use alosetron hcl) .. 79
lovastatin TABS 31
LOVENOX SOLN IJ 300 MG/3ML (Use enoxaparin sodium) 16
LOVENOX SOSY 100 MG/ML, 150 MG/ML (Use enoxaparin sodium) . 16
LOVENOX SOSY 30 MG/0.3ML (Use enoxaparin sodium) 16
LOVENOX SOSY 40 MG/0.4ML (Use enoxaparin sodium) 16
LOVENOX SOSY 60 MG/0.6ML (Use enoxaparin sodium) 16
LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (Use enoxaparin sodium) . 16
loxapine succinate 42
lubiprostone 77
LUCEMYRA (Use lofexidine hcl) 190
LUMAKRAS 38
LUMIGAN SOLN 0.01 % (Use bimatoprost) 188
LUMIVANCE CAPS 155
LUPRON DEPOT (1-MONTH) KIT IM 36
LUPRON DEPOT (3-MONTH) KIT IM 36
LUPRON DEPOT (4-MONTH) IM . 36
LUPRON DEPOT (6-MONTH) IM . 36
LUPRON DEPOT-PED (1-MONTH) . 75
LUPRON DEPOT-PED (3-MONTH) . 76
LUPRON DEPOT-PED (6-MONTH) IM 76
lurasidone hcl 40
LURBIRO TABS 100 MG (Use flurbiprofen) 6
LUTEIN-ZEAXANTHIN TABS 60 MG-5 MG-1 MG-15 MG-1 MG-750 MCG-20 MG 155
LUTRATE DEPOT INJ 22.5 MG ... 36
LYBALVI 191
LYFGENIA 82
LYNKUET CAPS PO 60 MG 76
LYNPARZA TABS 38
LYRICA CAPS (Use pregabalin) ... 18
LYRICA CR (Use pregabalin (once-daily)) 193
LYRICA SOLN (Use pregabalin) ... 18
LYSIPLEX PLUS LIQD 155
LYSIPLEX PLUS TABS 166.667 MG-333.333 MG-16.667 MG-50 MCG-333.333 MCG-16.667 MG-133.333 MG-16.667 MG-133.333 UNIT-16.667 MCG-133.333 MG-66.667 MG-16.667 MG-5 MG-1666.667 UNIT-66.667 MG-5 MG-66.667 UNIT-5 MCG-26.667 MG-3.333 MG-1.667 MG-0.667 MG-33.333 MCG 155
LYSODREN 36
LYTGOBI (12 MG DAILY DOSE) . 38
LYTGOBI (16 MG DAILY DOSE) . 38
LYTGOBI (20 MG DAILY DOSE) . 38
LYUMJEV KWIKPEN SOPN 26
LYUMJEV SOLN 26
LYUMJEV TEMPO PEN SOPN ... 26
LYVISPAH PACK 5 MG, 10 MG . 180
M-M-R II SOLR 198
M-NATAL PLUS TABS 178
macitentan 10 MG 48
MACULAR HEALTH FORMULA CAPS 250 MG-10 MG-100 MCG-10 MG-500 UNIT-5 MG-5 MG-1 MG-1 MG-20 MG-25 MCG-200 UNIT-7.5 MG-10 MG 155

MACUVITE EYE CARE TABS 113 MG-17.4 MG-0.4 MG-100 UNIT-7160 UNIT 155

MACUVITE TABS 60 MG-40 MG-2 MG-40 MCG-30 UNIT-5000 UNIT 155

MAGELLAN INSULIN SAFETY SYR 125

magnesium citrate 1.745 GM/30ML 85

magnesium hydroxide SUSP 7.75 %, 400 MG/5ML, 1200 MG/15ML, 2400 MG/30ML 86

magnesium oxide (mg supplement) TABS 132

magnesium oxide TABS 400 MG ..11

malathion 62

maraviroc TABS 150 MG 44

maraviroc TABS 300 MG 44

MARINOL CAPS 2.5 MG (Use dronabinol) 28

MARPLAN 20

MASONATAL TABS 178

MATULANE 39

MAVENCLAD (10 TABS) 10 MG (Use cladribine (multiple sclerosis)) 192

MAVENCLAD (4 TABS) 10 MG (Use cladribine (multiple sclerosis)) 192

MAVENCLAD (5 TABS) 10 MG (Use cladribine (multiple sclerosis)) 192

MAVENCLAD (6 TABS) 10 MG (Use cladribine (multiple sclerosis)) 192

MAVENCLAD (7 TABS) 10 MG (Use cladribine (multiple sclerosis)) 192

MAVENCLAD (8 TABS) 10 MG (Use cladribine (multiple sclerosis)) 192

MAVENCLAD (9 TABS) 10 MG (Use cladribine (multiple sclerosis)) 192

MAVYRET PACK 45

MAVYRET TABS 45

MAXALT TABS 10 MG (Use rizatriptan benzoate) 131

MAXALT-MLT TBDP 10 MG (Use rizatriptan benzoate) 131

MAXI-COMFORT INSULIN SYRINGE 125

MAXI-TUSS PE ELIX 5 MG/5ML-2 MG/5ML 52

MAXICOMFORT SYR 27G X 1/2" 125

MAXIDEX SUSP OP 187

MAXIMUM DAILY GREEN TABS 333.333 MG-8.333 MG-16.666 MCG-133.333 MCG-8.333 MG-8.333 MG-133.333 UNIT-8.333 MCG-8.333 MG-8.333 MG-8.333 MG-8.333 MG-8.333 MG-8.333 MG-8.333 MG-6.666 MG-8.333 MG-1.333 MG-333.333 MG-83.333 UNIT-33.333 MG-5000 UNIT-5 MG-33.333 MG-1.333 MG-16.666 MCG-20 MG-0.333 MG-33.333 MCG-0.333 MG-5 MG-83.333 MG-50 MCG-10 MG-25 MCG-3.333 MG-33.333 MG-8.333 MG-1.666 MG-6.666 MG-6.666 MG-1.666 MG-0.833 MG-11.666 MG-3.333 MG-1.666 MG-33.333 MG-3.333 MG-3.333 MG-3.333 MG-16.666 MG-33.333 MG-33.333 MG-3.333 MG-3.333 MG-3.333 MG-8.333 MG 155

MAXITROL OINT (Use neomycin-polymy-dexameth) 187

MAXITROL SUSP (Use neomycin-polymy-dexameth) 187

MAXX MISC 89

MAXX PLUS MISC 89

MAYZENT STARTER PACK TBPK 0.25 MG 192

MAYZENT TABS 192

meclizine hcl CHEW 28

meclizine hcl TABS 12.5 MG, 25 MG 28

meclofenamate sodium CAPS 6

MEDI TAB TABS 155

MEDIC INSULIN SYRINGE 125

MEDISENSE GLUCOSE KETONE CONTR LIQD 109

MEDLANCE PLUS EXTRA 21G .109

MEDLANCE PLUS LITE 25G 109

MEDLANCE PLUS SPECIAL 0.8MM 109

MEDLANCE PLUS SUPERLITE 30G 109

MEDLANCE PLUS UNIVERSAL 21G 110

medroxyprogesterone acetate (contraceptive) SUSP IM 50

medroxyprogesterone acetate (contraceptive) SUSY IM 50

medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG 190

mefenamic acid CAPS 6

mefloquine hcl 33

MEGA MULTI FOR WOMEN TABS 155

MEGA MULTI MEN TABS 155

MEGAVITE FRUITS & VEGGIES TABS 155

megestrol acetate (appetite) 190

megestrol acetate SUSP 36

megestrol acetate TABS 36

MEIJER ADVANCED FORMULA TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-250 MCG-3500 UNIT-10 MG-150 MCG-300 MCG-1.5 MG-15 MG-150 MCG-100 MG-162 MG-80 MG-75 MCG-30 UNIT-10 MCG-2 MG-120 MCG-20 MCG-10 MCG-72 MG-2 MG, 60 MG-3 MG-30 MCG-400 MCG-400 UNIT-25 MCG-1.7 MG-10 MCG-20 MG-250 MCG-3500 UNIT-10 MG-300 MCG-1.5 MG-15 MG-2 MG-150 MCG-100 MG-200 MG-80 MG-75 MCG-150 MCG-45 UNIT-48 MG-5 MCG-2 MG-150 MCG-20 MCG-10 MCG-72 MG-2 MG 156

MEKINIST SOLR 38

MEKINIST TABS 38

MEKTOVI 38

melatonin TABS 3 MG, 5 MG 3

meloxicam TABS 6

memantine hcl CP24 191

memantine hcl SOLN 191

memantine hcl TABS 191

memantine hcl-donepezil hcl CP24 191

MENATROL CAPS 156

MENQUADFI 0.5 ML 197

MENS 50+ ADVANCED CAPS ...156

MENS 50+ MULTIVITAMIN TABS 156

MENS LIFE PACK TABS 300 MCG-200 UNIT-10 MG-10 MG-9 MG-10 MG-2.5 MG-15 MG-1 MG-50 MG-11.25 MG-1 MG-2500 UNIT-15 UNIT-75 MG-37.5 MCG-2.5 MG-2.5 MG-12.5 MCG, 400 UNIT-10 MG-10 MG-5000 UNIT-18 MG-10 MG-5 MG-30 MG-2 MG-100 MG-22.5 MG-2 MG-150 MG-30 UNIT-150 MG-75 MCG-5 MG-5 MG-25 MCG 156

MENS MULTI HEALTH FORMULA TABS 156

MENS MULTIVITAMIN TABS 156

MENVEO SOLN 197

MENVEO SOLR 197

meperidine hcl SOLN PO 50 MG/5ML 8

meperidine hcl TABS 50 MG 8

meprobamate 12

mercaptopurine SUSP 2000 MG/100ML 34

mercaptopurine TABS 34

MERILOG SOLN SC 100 UNIT/ML 26

MERILOG SOLOSTAR SOPN SC 100 UNIT/ML 26

mesalamine CP24 78

mesalamine CPCR 78

mesalamine CPDR 78

mesalamine ENEM 78

mesalamine SUPP 78

mesalamine TBEC 1.2 GM 78

mesalamine TBEC 800 MG 78

mesalamine w/ cleanser 78

mesna TABS 39

MESNEX TABS 39

metaxalone 180

metformin hcl SOLN 23

metformin hcl TABS 500 MG, 850 MG, 1000 MG 23

metformin hcl TB24 500 MG, 1000 MG 23

metformin hcl TB24 23

methadone hcl CONC 8

methadone hcl SOLN PO 8

methadone hcl TABS 8

methadone hcl TBSO 8

METHADOSE CONC (Use methadone hcl) 8

METHADOSE SUGAR-FREE CONC (Use methadone hcl) 8

methamphetamine hcl 1

methazolamide TABS 74

methenamine mandelate 12

methenamine-hyosc-methylene blue-sod phos-phenyl sal TABS 81.6 MG . 11

methimazole TABS 194

methocarbamol TABS 500 MG, 750 MG 180

methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML 34

methotrexate sodium TABS 2.5 MG 34

methsuximide 20

methyldopa TABS 32

methylergonovine maleate TABS 189

METHYLIN SOLN (Use methylphenidate hcl) 3
METHYLPHENIDATE ER TBED 8.6 MG, 17.3 MG, 25.9 MG 3
methylphenidate hcl CHEW 3
methylphenidate hcl CP24 10 MG, 20 MG, 30 MG, 40 MG, 60 MG 3
methylphenidate hcl CP24 3
methylphenidate hcl CPCR 3
methylphenidate hcl SOLN 3
methylphenidate hcl TABS 3
methylphenidate hcl TB24 3
methylphenidate hcl TBCR 10 MG, 20 MG 3
methylphenidate hcl TBCR 18 MG, 27 MG, 36 MG, 54 MG 3
methylphenidate hcl TBCR 45 MG, 63 MG, 72 MG 3
methylphenidate PTCH 3
methylprednisolone TABS 4 MG, 8 MG 51
methylprednisolone TBPK 51
methyltestosterone TABS 10
metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML 77
metoclopramide hcl TABS 77
metolazone 74
metoprolol & hydrochlorothiazide TABS 33
metoprolol succinate TB24 46
metoprolol tartrate SOLN IV 5 MG/5ML 46
metoprolol tartrate TABS 46
metronidazole (topical) CREA 62
metronidazole (topical) GEL 0.75 % 62
metronidazole (topical) LOTN 62
metronidazole TABS 11
metronidazole vaginal 198
mexiletine hcl 13
MFLUSIVA SUSY IM 0.38 ML 198
MIACALCIN IJ (Use calcitonin (salmon)) 75
MICARDIS HCT (Use telmisartan-hydrochlorothiazide) 33
MICONAZOLE 7 SUPP 100 MG 198
miconazole nitrate (topical) CREA 54
miconazole nitrate vaginal CREA 2 % 198
miconazole nitrate vaginal CREA 4 % 198
miconazole nitrate vaginal KIT 198
miconazole nitrate vaginal SUPP 100 MG 198
miconazole nitrate vaginal SUPP 200 MG 198
MICROCHAMBER DEVI 129
MICROCHAMBER MISC 129
MICRODOT BLOOD GLUCOSE SYSTEM KIT 110
MICRODOT CONTROL HIGH/LOW SOLN 110
MICRODOT TEST STRP 70
MICROLET LANCETS 110
MICROLET NEXT LANCETS 110
MICROLET NEXT LANCING DEVICE MISC 110
MICROSPACER MISC 129
midazolam hcl SOLN IJ 85
MIDAZOLAM HCL SOLN IJ 85
midazolam hcl SYRP 85
midodrine hcl 199
MIEBO 188
miglitol 22
miglustat 82
MILK OF MAGNESIA CONCENTRATE SUSP 86
milnacipran hcl MISC 191
milnacipran hcl TABS 12.5 MG, 25 MG, 50 MG, 100 MG 191
MINCORA TABS 175
MINI LANCING DEVICE MISC 110
MINI MULTI VITAMINS/IRON TABS 60 MG-400 MCG-1.5 MG-20 MG-2 MG-10 MG-1.7 MG-10 MCG-13.5 MG-18 MG-25 MG-900 MCG-6 MCG 135
MINIMED 630G INSULIN PUMP KIT 110
MINIMED 780G INSULIN PUMP KIT 110
MINIMED APP MANAGER DEVI XX 110
MINIMED EXTENDED SUPPLY KIT MISC 110
MINIMED FLEX STARTER KIT KIT 110
MINIMED INSTINCT GLUC SENSOR 110
MINIMED RESERVOIR 3ML MISC

110

minocycline hcl CAPS 194

MINOVIA TABS 175

minoxidil 2.5 MG, 10 MG 33

MINT REFILL KIT MISC 110

MINT STARTER KIT KIT 110

MIPLYFFA 193

mirabegron SRER 8 MG/ML 197

mirabegron TB24 197

MIRASORB SPONGES MISC 88

MIRCERA 83

MIRENA (52 MG) 50

MIREXA TABS 135

mirtazapine TABS 20

mirtazapine TBDP 20

misoprostol 196

MITIGARE CAPS (Use colchicine) 80

MIUDELLA 50

MM EASY TOUCH GLUCOSE METER KIT 110

MM EASY TOUCH GLUCOSE STRP 70

MM INSULIN SYRINGE/NEEDLE 125

MM LANCING DEVICE MISC 110

MM TWIST LANCETS 110

MNEXSPIKE SUSY 10 MCG/0.2ML . 198

MOBI 2ML CARTRIDGE MISC 110

MOBI CONNECT GLUCOSE MONITOR DEVI 110

MOBI CONNECT GLUCOSE MONITOR KIT 110

MOBI CONNECT LANCING DEVICE MISC 110

MOBI CONNECT TEST STRIPS STRP 70

MOBI CONNECT TWIST LANCETS 111

modafinil 3

MODD1 PATIENT WELCOME KIT KIT 111

MODD1 SUPPLY KIT KIT 111

MODEYSO CAPS PO 125 MG 37

moexipril hcl 31

MOLESKIN FOAM PADS 88

molindone hcl 42

mometasone furoate (nasal) SUSP 181

mometasone furoate CREA 58

mometasone furoate OINT 58

mometasone furoate SOLN 58

MONISTAT CARE INSTANT ITCH RLF 1 % 198

MONOJECT INSULIN SYRINGE 125

MONOJECT ULTRA COMFORT SYRINGE 125

MONOLET LANCETS 111

montelukast sodium CHEW 14

montelukast sodium PACK 14

montelukast sodium TABS 14

MOOD FOOD CAPS 156

MOOD FOOD ES CAPS 156

morphine sulfate beads 8

morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG 8

morphine sulfate SOLN PO 10 MG/5ML, 20 MG/5ML 8

morphine sulfate SOLN PO 20 MG/ML, 100 MG/5ML 8

morphine sulfate SUPP 9

morphine sulfate TABS 15 MG 9

morphine sulfate TABS 30 MG 9

morphine sulfate TBCR 9

MOTEGRITY (Use prucalopride succinate) 77

MOTPOLY XR CP24 18

MOUNJARO 12.5 MG/0.5ML, 15 MG/0.5ML 24

MOUNJARO 2.5 MG/0.5ML, 5 MG/0.5ML, 7.5 MG/0.5ML, 10 MG/0.5ML 24

MOVANTIK 79

moxifloxacin hcl (ophth) SOLN OP 186

moxifloxacin hcl TABS 77

MRESVIA 198

MS CONTIN TBCR 15 MG, 30 MG, 60 MG, 200 MG (Use morphine sulfate) 9

MULTI COMPLETE CAPS 60 MG-2 MG-30 MCG-400 MCG-1000 UNIT-6 MCG-1.7 MG-40 MCG-20 MG-10 MG-18 MG-1.5 MG-40 MG-15 MG-2 MG-2500 UNIT-100 MG-45 MCG-150 MCG-50 UNIT-4 MG-120 MCG-20 MCG 156

MULTI COMPLETE/IRON TABS 180 MG-2 MG-30 MG-400 MCG-1000 UNIT-6 MCG-1.7 MG-80 MCG-20

MG-2500 UNIT-10 MG-18 MG-162 MG-1.5 MG-15 MG-100 MG-75 MCG-150 MCG-50 UNIT-2 MG-4 MG-120 MCG-70 MCG 156

MULTI FOR HER 50+ CAPS 60 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-1.7 MG-80 MCG-20 MG-10 MG-1.5 MG-100 MG-15 MG-2 MG-2500 UNIT-200 MG-75 MCG-150 MCG-60 UNIT-4 MG-120 MCG-70 MCG, 60 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-1.7 MG-80 MCG-20 MG-10 MG-200 MG-1.5 MG-100 MG-15 MG-2 MG-2500 UNIT-75 MCG-150 MCG-60 UNIT-4 MG-120 MCG-70 MCG, 60 MG-6 MG-30 MCG-60 UNIT-400 MCG-1000 UNIT-25 MCG-1.7 MG-80 MCG-20 MG-10 MG-1.5 MG-100 MG-15 MG-2 MG-2500 UNIT-200 MG-75 MCG-150 MCG-4 MG-120 MCG-70 MCG 156

MULTI FOR HER 50+ TABS 180 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-10 MG-1.7 MG-80 MCG-1.5 MG-15 MG-20 MG-100 MG-120 MCG-2 MG-200 MG-150 MCG-75 MCG-4 MG-60 UNIT-2500 UNIT-70 MCG 157

MULTI FOR HER CAPS 60 MG-2 MG-30 MCG-600 MCG-1000 UNIT-6 MCG-1.7 MG-40 MCG-20 MG-10 MG-18 MG-1.5 MG-40 MG-15 MG-2 MG-2500 UNIT-100 MG-45 MCG-150 MCG-50 UNIT-4 MG-120 MCG-20 MCG, 60 MG-2 MG-30 MCG-600 MCG-1000 UNIT-6 MCG-1.7 MG-40 MCG-20 MG-10 MG-18 MG-100 MG-1.5 MG-40 MG-15 MG-2 MG-2500 UNIT-45 MCG-150 MCG-50 UNIT-4 MG-120 MCG-20 MCG 157

MULTI FOR HER TABS 120 MG-2 MG-30 MCG-400 MCG-6 MCG-10 MG-1.7 MG-100 MCG-250 MCG-3000 UNIT-1.5 MG-100 MG-15 MG-150 MCG-400 UNIT-20 MG-18 MG-40 MG-10 MCG-120 MCG-2 MG-10 MCG-150 MCG-25 MCG-77 MG-5 MCG-2 MG-50 UNIT-25 MCG-250 MG-36 MG-2 MG 157

MULTI FOR HIM 50+ TABS 180 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-10 MG-1.7 MG-80 MCG-1.5 MG-15 MG-20 MG-100 MG-120 MCG-2 MG-162 MG-150 MCG-75 MCG-4 MG-60 UNIT-2500 UNIT-105 MCG 157

MULTI FOR HIM CAPS 60 MG-4 MG-30 MCG-400 MCG-1000 UNIT-18 MCG-1.7 MG-40 MCG-20 MG-10 MG-1.5 MG-40 MG-15 MG-2 MG-2500 UNIT-100 MG-45 MCG-150 MCG-50 UNIT-4 MG-120 MCG-40 MCG, 60 MG-4 MG-30 MCG-400 MCG-25 MCG-18 MCG-1.7 MG-40 MCG-20 MG-10 MG-100 MG-1.5 MG-40 MG-15 MG-2 MG-750 MCG-45 MCG-150 MCG-22.5 MG-4 MG-120 MCG-40 MCG 157

MULTI FOR HIM TABS 180 MG-4 MG-30 MCG-400 MCG-1000 UNIT-18 MCG-10 MG-1.7 MG-80 MCG-1.5 MG-100 MG-15 MG-20 MG-120 MCG-2 MG-162 MG-150 MCG-75 MCG-4 MG-50 UNIT-2500 UNIT-70 MCG 157

MULTI PRENATAL TABS 178

MULTI VITAMIN TABS 175

MULTI VITAMIN W/D-3 TABS ... 175

MULTI VITAMIN/MINERALS TABS 60 MG-1 MG-400 MCG-400 UNIT-1 MCG-2.5 MG-15 MG-5000 UNIT-5 MG-7.5 MG-2.5 MG-100 MG-75 MCG-15 UNIT-80 MG-1.5 MG-0.375 MG-0.5 MG, 90 MG-3 MG-45 MCG-400 MCG-400 UNIT-9 MCG-2.6 MG-25 MCG-20 MG-10 MG-27 MG-2.25 MG-100 MG-15 MG-5000 UNIT-30 MG-162 MG-150 MCG-34 UNIT-125 MG-2 MG-5 MG-27 MG-25 MCG-25 MCG-300 MCG-25 MCG 157

MULTI-LANCET DEVICE 2 KIT ..111

MULTI-VITAMIN MONOCAPS TABS 157

MULTI-VITAMIN TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-1.5 MG-30 UNIT 175

MULTI-VITAMIN/IRON TABS 400 UNIT-60 MG-2 MG-400 MCG-6 MCG-5000 UNIT-1.7 MG-20 MG-10 MG-18 MG-1.5 MG-30 UNIT, 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-18 MG-1.5 MG-30 UNIT 135

MULTI-VITAMIN/MINERALS TABS 60 MG-2 MG-0.4 MG-20 MG-1.2 MG-6 MCG-1.7 MG-400 UNIT-15 MG-100 MG-160 MG-150 MCG-18 MG-125 MG-5000 UNIT 158

MULTI-VITE LIQD 158

MULTIA CAPS 158

MULTIPLE VIT/MINERALS/NO IRON TABS 60 MG-1 MG-400 MCG-400 UNIT-1 MCG-5 MG-2.5 MG-15 MG-5000 UNIT-2.5 MG-2.5 MG-100 MG-75 MCG-15 UNIT-80 MG-1.5 MG-0.37 MG-0.5 MG 158

multiple vitamin TABS 175

MULTIPLE VITAMIN-FOLIC ACID TABS 60 MG-2 MG-400 MCG-1.5 MG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 UNIT 175

MULTIPLE VITAMINS ESSENTIAL TABS 60 MG-2 MG-0.4 MG-20 MG-

1.5 MG-6 MCG-10 MG-1.7 MG-400 UNIT-30 UNIT-5000 UNIT 175

MULTIPLE VITAMINS TABS 60 MG-2 MG-400 MCG-1.5 MG-400 UNIT-6 MCG-10 MG-1.7 MG-20 MG-5000 UNIT-30 UNIT, 60 MG-2 MG-400 MCG-400 UNIT-1.7 MG-20 MG-10 MG-1.5 MG-30 UNIT-5000 UNIT, 60 MG-400 MCG-2 MG-6 MCG-10 MG-1.7 MG-20 MG-5000 UNIT-1.5 MG-400 UNIT-30 UNIT 175

multiple vitamins w/ iron TABS ...135

multiple vitamins w/ minerals CAPS 158

multiple vitamins w/ minerals LIQD 158

multiple vitamins w/ minerals TABS 158

MULTIPLE VITAMINS-MINERALS LIQD 60 MG/15ML-300 MCG/15ML-1.1 MG/15ML-20 MG/15ML-2 MG/15ML-10 MG/15ML-1.7 MG/15ML-10 MCG/15ML-14 MG/15ML-9 MG/15ML-2 MG/15ML-25 MCG/15ML-13 MG/15ML-25 MCG/15ML-3 MG/15ML-150 MCG/15ML-390 MCG/15ML-6 MCG/15ML 158

MULTIPLE VITAMINS/IRON TABS 60 MG-2 MG-400 MCG-1.5 MG-20 MG-6 MCG-10 MG-1.7 MG-400 UNIT-30 UNIT-18 MG-5000 UNIT, 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-18 MG-1.5 MG-30 UNIT, 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-10 MG-1.7 MG-20 MG-5000 UNIT-18 MG-1.5 MG-30 UNIT 135

MULTIPLE VITAMINS/WOMENS TABS 60 MG-2 MG-400 MCG-1.5 MG-20 MG-6 MCG-10 MG-1.7 MG-400 UNIT-30 UNIT-27 MG-15 MG-450 MG-5000 UNIT 158

MULTIPRO CAPS 25 MG-300 MCG-1000 MCG-10 MCG-10 MCG-3 MG-2 MG-5 MG-32 MG-2 MG-7 MG-6 MG-30 MG-315 MG-1 MG-30 MG 158

MULTITOL-M TABS 158

MULTIVITAMIN ADULT (MINERALS) TABS 158

MULTIVITAMIN ADULT TABS ...175

MULTIVITAMIN ADULTS 50+ TABS 60 MG-3 MG-30 MCG-400 MCG-12.5 MCG-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-750 MCG-10 MG-300 MCG-1.5 MG-50 MG-11 MG-150 MCG-80 MG-220 MG-45 MCG-150 MCG-22.75 MG-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG, 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-220 MG-300 MCG-1.5 MG-11 MG-150 MCG-50 MG-80 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-45 MCG-55 MCG-10 MCG-72 MG-2 MG, 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-220 MG-300 MCG-1.5 MG-11 MG-150 MCG-50 UNIT-50 MG-80 MG-45 MCG-150 MCG-20 MG-0.5 MG-5 MCG-2.3 MG-45 MCG-55 MCG-10 MCG-72 MG-2 MG, 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-50 MG-11 MG-150 MCG-80 MG-220 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG, 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-250 MCG-2500 UNIT-10 MG-220 MG-300 MCG-1.5 MG-11 MG-20 MG-50 MG-80 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-19 MCG-10 MCG-50 MCG-72 MG-2 MG 159

MULTIVITAMIN ADULTS TABS 60 MG-2 MG-30 MCG-400 MCG-10 MCG-6 MCG-1.7 MG-25 MCG-20 MG-10 MG-18 MG-1.5 MG-50 MG-11 MG-80 MG-200 MG-45 MCG-150 MCG-13.5 MG-20 MG-0.5 MG-5 MCG-10 MCG-2.3 MG-75 MCG-1050 MCG-55 MCG-10 MCG-35 MCG-72 MG-2 MG, 60 MG-30 MCG-400 MCG-1.5 MG-20 MG-2 MG-10 MG-1.7 MG-25 MCG-13.5 MG-18 MG-50 MG-2.3 MG-45 MCG-80 MG-2 MG-10 MCG-35 MCG-0.5 MG-10 MCG-11 MG-200 MG-150 MCG-20 MG-55 MCG-1050 MCG-25 MCG-6 MCG-72 MG 159

MULTIVITAMIN HEALTH FORM/CA/FE TABS 159

MULTIVITAMIN INFANTS/TODDLERS SOLN 11 MG/ML 177

MULTIVITAMIN IRON-FREE TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-3000 UNIT-10 MG-45 MG-1.5 MG-30 UNIT 175

MULTIVITAMIN LIQD 60 MG/15ML-300 MCG/15ML-30 UNIT/15ML-1.5 MG/15ML-2 MG/15ML-400 UNIT/15ML-6 MCG/15ML-1300 UNIT/15ML-10 MG/15ML-1.7 MG/15ML-20 MG/15ML-9 MG/15ML-3 MG/15ML-25 MCG/15ML-150 MCG/15ML-2 MG/15ML-25 MCG/15ML 161

MULTIVITAMIN MEN 50+ TABS 120

MG-30 MCG-300 MCG-1.5 MG-20 MG-6 MG-10 MG-1.7 MG-300 MCG-600 MCG-25 MCG-27 MG-75 MG-4 MG-50 MCG-80 MG-60 MCG-0.5 MG-15 MG-210 MG-150 MCG-20 MG-21 MCG-1050 MCG-60 MCG-100 MCG-72 MG, 120 MG-30 MCG-400 MCG-4.5 MG-20 MG-6 MG-15 MG-3.4 MG-370 MCG-17.5 MCG-11.4 MG-110 MG-4.2 MG-90 MCG-180 MCG-2.2 MG-24 MG-120 MG-150 MCG-117 MCG-940 MCG-20 MCG-25 MCG, 120 MG-6 MG-30 MCG-27 MG-300 MCG-25 MCG-100 MCG-1.7 MG-60 MCG-20 MG-300 MCG-10 MG-600 MCG-1.5 MG-75 MG-15 MG-80 MG-210 MG-50 MCG-150 MCG-20 MG-0.5 MG-5 MCG-4 MG-1050 MCG-21 MCG-10 MCG-60 MCG-72 MG-2 MG, 120 MG-6 MG-30 MCG-300 MCG-600 UNIT-100 MCG-1.7 MG-60 MCG-20 MG-300 MCG-3500 UNIT-10 MG-600 MCG-1.5 MG-75 MG-15 MG-210 MG-80 MG-50 MCG-150 MCG-60 UNIT-20 MG-0.5 MG-4 MG-21 MCG-60 MCG-72 MG 160

MULTIVITAMIN MEN TABS 160

MULTIVITAMIN PLUS IRON ADULT TABS 60 MG-2 MG-13.5 MG-400 MCG-10 MCG-6 MCG-1.7 MG-20 MG-1500 MCG-10 MG-18 MG-75 MG-1.5 MG 136

MULTIVITAMIN TABS 175

MULTIVITAMIN WOMEN 50+ TABS 100 MG-30 MCG-400 MCG-1.1 MG-14 MG-5 MG-5 MG-1.1 MG-300 MCG-25 MCG-15.8 MG-8 MG-100 MG-2.3 MG-50 MCG-80 MG-52 MCG-0.5 MG-15 MG-300 MG-150 MCG-20 MG-22 MCG-1050 MCG-50 MCG-50 MCG-72 MG, 100 MG-5 MG-30 MCG-400 MCG-14 MG-25 MCG-50 MCG-1.1 MG-50 MCG-300 MCG-1050 MCG-5 MG-8 MG-1.1 MG-15 MG-100 MG-2 MG-300 MG-80 MG-50 MCG-150 MCG-15.7 MG-20 MG-2.3 MG-22 MCG-0.5 MG-10 MCG-52 MCG-72 MG, 100 MG-5 MG-30 MCG-400 MCG-800 UNIT-50 MCG-1.1 MG-50 MCG-14 MG-300 MCG-3500 UNIT-5 MG-8 MG-1.1 MG-15 MG-35 UNIT-50 MG-500 MG-80 MG-150 MG-20 MG-0.5 MG-5 MCG-2.3 MG-150 MCG-55 MCG-50 MCG-10 MCG-50 MCG-72 MG-2 MG, 100 MG-5 MG-30 MCG-400 MCG-800 UNIT-50 MCG-1.1 MG-50 MCG-14 MG-300 MCG-3500 UNIT-5 MG-8 MG-300 MG-1.1 MG-15 MG-35 UNIT-100 MG-80 MG-150 MCG-20 MG-0.5 MG-5 MCG-2.3 MG-22 MCG-50 MCG-10 MCG-52 MCG-72 MG-2 MG 160

MULTIVITAMIN WOMEN TABS . 161

MULTIVITAMIN WOMENS 50+ ADV TABS 120 MG-30 MCG-400 MCG-4.5 MG-20 MG-6 MG-15 MG-3.4 MG-25 MCG-13.5 MG-50 MG-4.2 MG-90 MCG-180 MCG-2.2 MG-24 MG-300 MG-150 MCG-27 MCG-940 MCG-20 MCG-25 MCG 161

MULTIVITAMIN-MINERALS TABS 161

MULTIVITAMIN/FLUORIDE CHEW 0.5 MG 177

MULTIVITAMIN/FLUORIDE SUSP 0.25 MG/ML 177

MULTIVITAMIN/ZINC STRESS TABS 161

mupirocin calcium (topical) 54

mupirocin OINT 54

MVW COMPLETE FORMULATION CAPS 161

MVW COMPLETE FORMULATION D3000 CAPS 161

MVW COMPLETE FORMULATION D5000 CAPS 161

MVW COMPLETE FORMULATION MINIS CAPS 161

MVW MODULATOR FORMULATION CAPS 161

MVW MODULATOR FORMULATION MINI CAPS 161

MYAMULTI TABS 60 MG-3 MG-30 MCG-400 MCG-1.7 MG-6 MCG-10 MG-2 MG-20 MG-5000 UNIT-400 UNIT-30 UNIT-18 MG-100 MG-2.5 MG-25 MCG-5 MCG-40 MG-10 MCG-150 MCG-25 MCG-2 MG-10 MCG-15 MG-162 MG-150 MCG-125 MG-25 MCG-10 MCG-25 MCG-36.3 MG 161

mycophenolate mofetil CAPS 133

mycophenolate mofetil hcl 133

mycophenolate mofetil SUSR 133

mycophenolate mofetil TABS 133

mycophenolate sodium 180 MG .. 133

mycophenolate sodium 360 MG .. 133

MYDAYIS CP24 (Use amphetamine-dextroamphetamine) 1

MYFEMBREE 76

MYGLUCOHEALTH BLOOD GLUCOSE KIT 111

MYGLUCOHEALTH CONTROL SOLN 111

MYGLUCOHEALTH LANCETS 30G 111

MYGLUCOHEALTH TEST STRP . 70

MYLERAN TABS 34

MYNEPHRON CAPS 1 MG 135
MYOBLOC 183
MYRBETRIQ SRER 8 MG/ML (Use mirabegron) 197
MYRBETRIQ TB24 (Use mirabegron) 197
MYXREDLIN 26
NABI-HB SOLN IM 189
nabumetone 6
nadolol TABS 20 MG, 40 MG, 80 MG 46
naloxone hcl LIQD 27
naloxone hcl SOCT 27
naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML 27
naloxone hcl SOSY 0.4 MG/ML ... 27
naloxone hcl SOSY 2 MG/2ML 27
naltrexone hcl 27
NAMZARIC CP24 (Use memantine hcl-donepezil hcl) 191
NAMZARIC CP24 191
NAPRELAN TB24 375 MG, 500 MG (Use naproxen sodium) 6
naproxen sodium CAPS 6
naproxen sodium TABS 220 MG 6
naproxen sodium TABS 6
naproxen sodium TB24 6
naproxen SUSP 7
naproxen TABS 7
naproxen TBEC 7
naproxen-esomeprazole magnesium 6
naratriptan hcl 131
NAT-RUL DAILY-VITE+IRON TABS 60 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-18 MG-1.5 MG-2 MG-30 UNIT 136
NAT-RUL THERAVITE-M TABS . 161
NATAZIA 49
nateglinide 26
NATESTO GEL NA 10
NATROBA (Use spinosad) 62
NATRUL-VITES TABS 161
NAVAGE NASAL ASPIRATOR BABY DEVI 129
NAVITRUX SOLR 150 MG 28
NAYZILAM 17
nebivolol hcl 46
NEBULIZER CUP/TUBING DEVI 129
nefazodone hcl 21
NEFFY SOLN NA 199
NEMLUVIO 59
NEO-VITAL RX TABS 178
NEOMULTIVITE TABS 175
neomycin sulfate TABS 3
neomycin-bacitracin zn-polymyxin 186
neomycin-bacitracin-polymyxin OINT 54
neomycin-polymy-dexameth OINT 187
neomycin-polymy-dexameth SUSP 0.1 %-3.5 MG/ML-10000 UNIT/ML, 0.1 % 187
neomycin-polymyxin w/ pramoxine 54
neomycin-polymyxin-gramicidin . 186
neomycin-polymyxin-hc (ophth) . 187
neomycin-polymyxin-hc (otic) SOLN . 189
neomycin-polymyxin-hc (otic) SUSP . 189
NEONATAL PRENATAL TABS .. 178
NEONATAL VITAMIN TABS 178
NEOVITE TABS 161
NERLYNX 38
NESTABS 178
NESTABS DHA 178
NESTABS ONE 178
NEULASTA ONPRO SOSY 6 MG/0.6ML 83
NEULASTA SOLN SC 4 MG/0.4ML 83
NEULASTA SOSY 83
NEUPOGEN SOLN 83
NEUPOGEN SOSY 83
NEUPRO 40
NEURONTIN CAPS (Use gabapentin) 18
NEURONTIN SOLN (Use gabapentin) 18
NEURONTIN TABS (Use gabapentin) 18
NEUTEK 2TEK CONTROL SOLN 111
NEUTEK 2TEK TEST STRP 70
NEVANAC 188
nevirapine SUSP 44

nevirapine TABS 44
nevirapine TB24 400 MG 44
NEWVITE TABS 175
NEXAVAR (Use sorafenib tosylate) . 38
NEXCARE ABSOLUTE WATERPROOF PADS 88
NEXIUM CPDR (Use esomeprazole magnesium) 195
NEXIUM PACK (Use esomeprazole magnesium) 195
NEXLETOL 29
NEXLIZET 30
NEXPLANON 50
NEXTSTELLIS 49
NGENLA 75
niacin (antihyperlipidemic) TABS .. 31
niacin (antihyperlipidemic) TBCR .. 31
NIACIN ER TBCR 199
niacin TABS 50 MG, 100 MG, 500 MG 199
NICADAN TABS 161
nicardipine hcl CAPS 46
NICAZEL FORTE TABS 161
NICAZEL TABS 161
NICOTINE KIT 193
nicotine polacrilex GUM 193
nicotine polacrilex LOZG 193
nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR 193
NICOTROL INHA 193
NICOTROL NS SOLN 193
nifedipine CAPS 46
nifedipine TB24 46
NILOTINIB D-TARTRATE CAPS PO 50 MG, 150 MG, 200 MG 38
nilotinib hcl 50 MG, 150 MG, 200 MG 38
nilutamide 36
NINLARO 38
nisoldipine 8.5 MG, 17 MG, 34 MG 46
NITRO-TIME CPCR 2.5 MG, 6.5 MG, 9 MG 12
nitrofurantoin 25 MG/5ML 12
nitrofurantoin macrocrystal 50 MG, 100 MG 12
nitrofurantoin monohyd macro 12
nitroglycerin OINT 12
nitroglycerin PT24 12
nitroglycerin SUBL 12
NIVA THYROID TABS 194
NIVESTYM SOLN 83
NIVESTYM SOSY 83
nizatidine CAPS 195
NO IRON MULT VITAMIN-MINERALS TABS 161
NORDITROPIN FLEXPRO SOPN .75
norelgestromin-ethinyl estradiol ...50
norethin acet & estrad-fe CAPS ... 49
norethin acet & estrad-fe CHEW .. 49
norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG 49
norethindrone (contraceptive) 50
norethindrone & eth estradiol 49
norethindrone & ethinyl estradiol-fe 49
norethindrone acet & eth estra TABS 49
norethindrone acetate TABS 190
norethindrone acetate-ethinyl estradiol 76
norethindrone acetate-ethinyl estradiol-fe 49
norethindrone-eth estradiol (triphasic) 49
norgestimate-ethinyl estradiol (triphasic) 50
norgestimate-ethinyl estradiol 50
norgestrel & ethinyl estradiol 30 MCG-0.3 MG 50
NORIXA TABS 161
NORLIQVA SOLN 47
NORPACE CR CP12 150 MG 13
nortriptyline hcl CAPS 22
nortriptyline hcl SOLN 22
NORVASC TABS (Use amlodipine besylate) 47
NORVEXA TABS 161
NORVIR PACK 44
NOURIANZ 39
NOVA MAX GLUCOSE TEST STRP . 70
NOVA MAX PLUS KETONE TEST 70
NOVA SAFETY LANCETS 23G .111
NOVA SAFETY LANCETS 28G .111

NOVA SUREFLEX LANCETS ...111
NOVA SUREFLEX LANCING DEVICE MISC ...111
NOVAFERRUM PED MULTI VIT-IRON SOLN 10 MG/ML ...177
NOVAMV PEDIATRIC MULTI-VITAMIN LIQD ...177
NOVAVAX COVID-19 VACCINE SUSY ...198
NOVENTRA TABS ...161
NOVOEIGHT ...80
NOVOLIN 70/30 FLEXPEN RELION SUPN ...26
NOVOLIN 70/30 FLEXPEN SUPN 26
NOVOLIN 70/30 RELION SUSP ...26
NOVOLIN 70/30 SUSP ...26
NOVOLIN N FLEXPEN RELION SUPN ...26
NOVOLIN N FLEXPEN SUPN ...26
NOVOLIN N RELION SUSP ...26
NOVOLIN N SUSP ...26
NOVOLIN R FLEXPEN RELION SOPN IJ ...26
NOVOLIN R FLEXPEN SOPN IJ ...26
NOVOLIN R RELION SOLN IJ ...26
NOVOLIN R SOLN IJ ...26
NOVOLOG 70/30 FLEXPEN RELION SUPN ...26
NOVOLOG FLEXPEN RELION SOPN ...26
NOVOLOG FLEXPEN SOPN ...26
NOVOLOG MIX 70/30 FLEXPEN SUPN ...26
NOVOLOG MIX 70/30 RELION SUSP ...26
NOVOLOG MIX 70/30 SUSP ...26
NOVOLOG PENFILL SOCT ...26
NOVOLOG RELION SOLN IJ ...26
NOVOLOG SOLN IJ ...26
NOVOSEVEN RT 1 MG, 2 MG, 8 MG ...81
NOVOSEVEN RT 5 MG ...80
NP THYROID TABS ...194
NU GAUZE 4PLY PADS ...88
NU GAUZE GENERAL-USE SPONGES MISC ...88
NUBEQA ...36
NUCALA SOAJ ...13
NUCALA SOLR ...13
NUCALA SOSY ...13
NUMOISYN LIQD ...135
NUPLAZID CAPS ...41
NUPLAZID TABS 10 MG ...41
NURTEC ...130
NUTRALYN TABS ...161
NUTRAVANCE TABS ...161
NUTRIBOOST CAPS 1 MG ...135
NUTRICAP TABS ...161
NUTRIFAC ZX TABS 500 MG-25 MG-200 MCG-1000 MCG-50 MCG-25 MG-20 MG-100 MG-5000 UNIT-20 MG-50 MG-20 MG-400 UNIT-50 UNIT-2.5 MG-66 MG-50 MCG-5 MG-200 MCG ...161
NUTRIVIO CAPS 1 MG ...135
NUTROPIN AQ NUSPIN 20 SOPN 75
NUTROPIN AQ NUSPIN 5 SOPN .75
NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML ...198
NUVESSA ...198
NUVIGIL (Use armodafinil) ...3
NUWIQ KIT ...81
NUWIQ SOLR ...81
NYMALIZE SOLN 6 MG/ML ...47
NYPOZI ...83
nystatin (mouth-throat) ...134
nystatin (topical) CREA ...54
nystatin (topical) OINT ...54
nystatin (topical) POWD EX ...54
nystatin TABS ...29
nystatin-triamcinolone CREA ...54
nystatin-triamcinolone OINT ...55
NYVEPRIA ...83
OB COMPLETE ONE ...178
OB COMPLETE PETITE ...178
OB COMPLETE PREMIER ...178
OB COMPLETE TABS ...178
OB COMPLETE/DHA ...178
OBIZUR ...81
OCREVUS ...192
OCREVUS ZUNOVO ...192
OCTAGAM SOLN ...189
octreotide acetate KIT ...76
OCUFLOX (Use ofloxacin (ophth)) 186
OCULAR VITAMINS TABS ...161

OCULYRA TABS 162

OCUTABS TABS 113 MG-17.4 MG-0.4 MG-100 UNIT-7160 UNIT, 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG 162

OCUTABS-LUTEIN TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG 162

OCUVEL CAPS 250 MG-0.5 MG-5 MG-1 MG-40 MG-1 MG-200 UNIT 162

OCUVITE ADULT 50+ CAPS 162

OCUVITE ADULT FORMULA CAPS . 162

OCUVITE EXTRA TABS 200 MG-5 MG-3 MG-40 MG-40 MG-2 MG-5 MG-50 UNIT-6000 UNIT-40 MCG 162

OCUVITE EYE + MULTI TABS 75 MG-1 MG-15 MCG-200 MCG-200 UNIT-3 MCG-0.85 MG-15 MCG-10 MG-5 MG-5 MG-1 MG-150 MCG-1 MG-0.75 MG-11.5 MG-500 UNIT-50 MG-100 MG-37.5 MCG-75 MCG-25 UNIT-7 MG-60 MCG-1 MG-35 MCG . 162

OCUVITE EYE HEALTH FORMULA CAPS 150 MG-30 UNIT-5 MG-1 MG-1 MG-9 MG-90 MG-160 MG-250 MG 162

OCUVITE EYE PERFORMANCE CAPS 162

OCUVITE-LUTEIN CAPS 162

OCUVITE-LUTEIN TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG 162

ODEFSEY 44

ODOMZO 35

ofloxacin (ophth) 186

ofloxacin (otic) 188

ofloxacin 300 MG, 400 MG 77

OGSIVEO 100 MG, 150 MG 38

OHTUVAYRE 14

OIL EMULSIONS DRESSING/NON-ADH PADS 88

OJEMDA SUSR 38

OJEMDA TABS 38

OJJAARA 38

olanzapine TABS 42

olanzapine TBDP 42

olanzapine-fluoxetine hcl 191

olmesartan medoxomil 32

olmesartan medoxomil-amlodipine-hydrochlorothiazide 33

olmesartan medoxomil-hydrochlorothiazide 33

olopatadine hcl (nasal) 180

olopatadine hcl 188

OLUMIANT 5

OMBRA TABLE TOP COMPRESSOR DEVI 129

omega-3 fatty acids CAPS 1000 MG, 1200 MG 184

omega-3-acid ethyl esters 30

omeprazole CPDR 195

omeprazole CPDR 196

omeprazole magnesium CPDR .. 195

omeprazole magnesium TBEC ... 195

omeprazole TBDD 196

omeprazole TBEC 196

OMLYCLO SOSY SC 75 MG/0.5ML, 150 MG/ML, 300 MG/2ML 13

OMNARIS SUSP 181

OMNICAP TABS 175

OMNIFLEX DIAPHRAGM 89

OMNIPOD 5 DEXG7G6 INTRO GEN 5 KIT 111

OMNIPOD 5 DEXG7G6 PODS GEN 5 MISC 111

OMNIPOD 5 LIBRE INTRO KIT .. 111

OMNIPOD 5 LIBRE PODS MISC 111

OMNIPOD CLASSIC PODS (GEN 3) MISC 111

OMNIPOD DASH INTRO (GEN 4) KIT 111

OMNIPOD DASH PDM (GEN 4) KIT . 111

OMNIPOD DASH PODS (GEN 4) MISC 111

OMNIPOD GO KIT 111

OMNITROPE SOCT 75

OMNITROPE SOLR SC 75

OMVOH (300 MG DOSE) SOAJ ... 78

OMVOH (300 MG DOSE) SOSY .. 78

OMVOH SOAJ 78

OMVOH SOLN 78

OMVOH SOSY 78

ON CALL EXPRESS BLOOD GLUCOSE STRP 71

ON CALL EXPRESS MONITORING SYS KIT 111

ONAPGO SOCT 98 MG/20ML 40

ONCE DAILY TABS 400 UNIT-50

MG-1 MG-2 MG-1 MCG-5000 UNIT-1 MG-2.5 MG-20 MG 175

ONCOVITE TABS 162

ondansetron hcl SOLN IJ 4 MG/2ML . 27

ondansetron hcl SOLN IJ 40 MG/20ML 27

ondansetron hcl SOLN PO 4 MG/5ML 27

ondansetron hcl SOSY 27

ondansetron hcl TABS 24 MG 28

ondansetron hcl TABS 4 MG 28

ondansetron hcl TABS 8 MG 28

ondansetron TBDP 16 MG 28

ondansetron TBDP 4 MG 28

ondansetron TBDP 8 MG 28

ONE A DAY ENERGY TABS 162

ONE A DAY MEN 50 PLUS TABS 162

ONE A DAY POSTNATAL CAPS 162

ONE A DAY TRIPLE IMMUNE SUPPRT TABS 162

ONE A DAY WOMEN 50 PLUS TABS 162

ONE A DAY WOMENS MULTI TABS 162

ONE DAILY 50 PLUS TABS 120 MG-6 MG-30 MCG-400 MCG-400 UNIT-30 MCG-3.4 MG-20 MCG-20 MG-5000 UNIT-15 MG-120 MG-4.5 MG-22.5 MG-2 MG-100 MG-37.5 MG-90 MCG-150 MCG-60 UNIT-4 MG-180 MCG-105 MCG-34 MG 162

ONE DAILY CALCIUM/IRON TABS 400 UNIT-60 MG-2 MG-400 MCG-1.5 MG-6 MCG-10 MG-1.7 MG-20 MG-2500 UNIT-2500 UNIT-27 MG-15 MG-450 MG-30 UNIT 162

ONE DAILY COMPLETE FOR MEN TABS 60 MG-3 MG-75 MCG-400 MCG-700 UNIT-18 MCG-1.7 MG-20 MCG-18 MG-3500 UNIT-16 MG-210 MG-300 MCG-1.35 MG-140 MG-15 MG-2 MG-22.5 UNIT-2 MG-120 MCG-110 MCG 162

ONE DAILY COMPLETE TABS 60 MG-2 MG-30 MCG-400 MCG-20 MG-1.5 MG-6 MCG-10 MG-1.7 MG-5000 UNIT-400 UNIT-30 UNIT-18 MG-100 MG-2.5 MG-10 MCG-37.5 MG-10 MCG-2 MG-15 MG-130 MG-150 MCG-100 MG-10 MCG-34 MG 163

ONE DAILY ESSENTIAL TABS .. 175

ONE DAILY ESSENTIALS TABS 175

ONE DAILY FOR MEN 50+ ADVANCED TABS 120 MG-6 MG-30 MCG-400 MCG-400 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-2500 UNIT-15 MG-120 MG-600 MCG-4.5 MG-100 MG-22.5 MG-40 MG-90 MCG-150 MCG-33 UNIT-2 MG-4 MG-180 MCG-105 MCG-120 MG 163

ONE DAILY FOR MEN/LYCOPENE TABS 90 MG-3 MG-30 MCG-400 MCG-400 UNIT-18 MCG-1.7 MG-20 MCG-16 MG-3500 UNIT-5 MG-210 MG-600 MCG-1.2 MG-120 MG-15 MG-2 MG-100 MG-45 UNIT-2 MG-120 MCG-105 MCG 163

ONE DAILY FOR WOMEN 50+ ADV TABS 60 MG-6 MG-30 MCG-400 MCG-800 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-2500 UNIT-15 MG-405 MG-4.5 MG-50 MG-22.5 MG-90 MCG-150 MCG-33 UNIT-2 MG-4 MG-180 MCG-20 MCG-120 MG . 163

ONE DAILY FOR WOMEN TABS 60 MG-2 MG-30 MCG-400 MCG-1000 UNIT-6 MCG-1.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-450 MG-1.5 MG-15 MG-50 MG-30 UNIT-2 MG-2 MG-120 MCG-20 MCG, 60 MG-2 MG-30 MCG-400 MCG-1000 UNIT-6 MCG-1.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-450 MG-1.5 MG-50 MG-15 MG-30 UNIT-2 MG-2 MG-120 MCG-20 MCG .. 163

ONE DAILY HEALTHY WEIGHT ADV TABS 60 MG-10 MG-2.5 MG-400 MCG-400 UNIT-7.5 MCG-2.1 MG-80 MCG-25 MG-2500 UNIT-12.5 MG-18 MG-200 MG-1.9 MG-15 MG-50 MG-30 UNIT-2 MG-2 MG-200 MCG-70 MCG 163

ONE DAILY HEALTHY WEIGHT TABS 60 MG-2.5 MG-400 MCG-400 UNIT-7.5 MCG-2.125 MG-25 MG-12.5 MG-18 MG-300 MG-1.9 MG-50 MG-15 MG-2500 UNIT-30 UNIT-2 MG-2 MG-200 MCG-80 MCG-70 MCG-32 MG, 60 MG-3 MG-30 MCG-400 MCG-400 UNIT-25 MCG-1.7 MG-20 MG-250 MCG-3500 UNIT-10 MG-200 MG-300 MCG-1.5 MG-100 MG-15 MG-2 MG-80 MG-150 MCG-150 MCG-75 MCG-45 UNIT-48 MG-5 MCG-2 MG-150 MCG-10 MCG-20 MCG-10 MCG-72 MG-2 MG 163

ONE DAILY MAXIMUM TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-2500 UNIT-10 MG-18 MG-1.5 MG-100 MG-15 MG-150 MCG-162 MG-80 MG-160 MCG-150 MCG-30 UNIT-109 MG-2 MG-5 MCG-10 MCG-65 MCG-3.5 MG-20 MCG-10 MCG-72 MG-2 MG 164

ONE DAILY MEN FORMULA W/O IRON TABS 164

ONE DAILY MENS 50+ MULTIVIT TABS 164

ONE DAILY MENS 50+/LYCOPENE TABS 120 MG-6 MG-30 MCG-25.5 UNIT-400 MCG-700 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-3500 UNIT-15 MG-120 MG-370 MCG-4.5 MG-24 MG-110 MG-90 MCG-150 MCG-2.2 MG-4.2 MG-180 MCG-117 MCG .164

ONE DAILY MENS HEALTH TABS 60 MG-3 MG-30 MCG-400 MCG-700 UNIT-18 MCG-1.7 MG-20 MCG-16 MG-3500 UNIT-5 MG-210 MG-300 MCG-1.2 MG-120 MG-15 MG-2 MG-22.5 UNIT-2 MG-120 MCG-110 MCG 164

ONE DAILY MENS TABS 90 MG-3 MG-30 MCG-400 MCG-400 UNIT-18 MCG-1.7 MG-16 MG-3500 UNIT-5 MG-210 MG-600 MCG-1.2 MG-120 MG-15 MG-2 MG-100 MG-45 UNIT-2 MG-120 MCG-20 MCG-105 MCG, 99 MG-43 MCG-240 MCG-1.32 MG-17.6 MG-2.17 MG-15.5 MG-1.43 MG-210 MG-300 MCG-25 MCG-15 MG-120 MG-2.3 MG-35 MCG-0.9 MG-11 MG-150 MCG-55 MCG-900 MCG-30 MCG-6.24 MCG-408 MCG 164

ONE DAILY MULTIVIT/IRON-FREE TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-3000 UNIT-10 MG-1.5 MG-45 MG-30 UNIT 164

ONE DAILY MULTIVITAMIN ADULT TABS 60 MG-2 MG-0.4 MG-1.5 MG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT 175

ONE DAILY MULTIVITAMIN MEN TABS 60 MG-3 MG-75 MCG-400 MCG-700 UNIT-18 MCG-1.7 MG-20 MCG-18 MG-3500 UNIT-16 MG-300 MCG-1.35 MG-15 MG-2 MG-22.5 UNIT-140 MG-210 MG-2 MG-120 MCG-110 MCG 164

ONE DAILY MULTIVITAMIN WOMEN TABS 164

ONE DAILY MULTIVITAMIN/IRON TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-18 MG-1.5 MG-30 UNIT 136

ONE DAILY TABS 60 MG-2 MG-1.5 MG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT 176

ONE DAILY WOMENS 50 PLUS TABS 75 MG-3 MG-30 MCG-400 MCG-400 UNIT-18 MCG-1.7 MG-14 MG-3000 UNIT-5 MG-240 MG-1.1 MG-120 MG-15 MG-2 MG-100 MG-33 UNIT-2 MG-120 MCG-20 MCG-70 MCG-10 MG 164

ONE DAILY WOMENS 50+ TABS 60 MG-6 MG-30 MCG-400 MCG-800 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-15 MG-405 MG-4.5 MG-50 MG-22.5 MG-90 MCG-150 MCG-33 UNIT-2 MG-180 MCG-4 MG-2500 UNIT-20 MCG-120 MG 165

ONE DAILY WOMENS TABS 165

ONE DAILY/MINERALS TABS 50 MG-1 MG-100 MCG-1.5 MG-3 MCG-1.7 MG-20 MG-5000 UNIT-400 UNIT-5 MG-1 MG-125 MG-150 MCG-10 UNIT 165

ONE FLOW SPIROMETER DEVI 129

ONE VITE DAILY MULTIVITAMIN TABS 176

ONE VITE M HIGH POTENCY TABS 165

ONE VITE WOMENS TABS 178

ONE-A-DAY ENERGY TABS 165

ONE-A-DAY MENOPAUSE FORMULA TABS 165

ONE-A-DAY MENS (MINERALS) TABS 165

ONE-A-DAY MENS 50+ ADVANTAGE TABS 165

ONE-A-DAY MENS 50+ TABS ...165

ONE-A-DAY MENS HEALTH FORMULA TABS 165

ONE-A-DAY MENS PRO EDGE TABS 165

ONE-A-DAY PROACTIVE 65+ TABS 165

ONE-A-DAY TEEN ADVANTAGE/HIM TABS 165

ONE-A-DAY WOMENS 50+ ADVANTAGE TABS 120 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-3500 UNIT-15 MG-4.5 MG-50 MG-24 MG-2.2 MG-500 MG-90 MCG-150 MCG-30 UNIT-4.2 MG-180 MCG-27 MCG . 165

ONE-A-DAY WOMENS 50+ TABS 165

ONE-A-DAY WOMENS PETITES TABS 30 MG-1 MG-15 MCG-200 MCG-500 UNIT-3 MCG-0.85 MG-12.5 MCG-5 MG-1250 UNIT-2.5 MG-9 MG-250 MG-0.75 MG-25 MG-7.5 MG-1 MG-11.25 UNIT-1 MG-60 MCG-10 MCG 165

ONE-A-DAY WOMENS TABS ... 165

ONE-DAILY MULTI CAPS CAPS 165

ONE-DAILY MULTI VITAMINS TABS 50 MG-20 MG-1 MG-1.5 MG-400 UNIT-3 MCG-1 MG-1.7 MG-4000

UNIT-60 MG 176

ONE-DAILY MULTI-VIT/MINERAL TABS 50 MG-2 MG-20 MG-1 MG-1 MG-2.5 MG-10 MCG-4.5 MG-10 MG-1 MG-5 MCG-3.75 MG-150 MCG-5 MCG-1500 MCG-1 MCG 165

ONE-DAILY MULTI-VITAMIN TABS 50 MG-1 MG-1.5 MG-10 MCG-3 MCG-1.7 MG-20 MG-1200 MCG-1 MG-60 MG 176

ONE-DAILY MULTI-VITAMIN/IRON TABS 50 MG-1 MG-20 MG-2 MG-10 MCG-1 MCG-2.5 MG-1500 MCG-1 MG-18 MG 136

ONE-DAILY/IRON TABS 50 MG-2 MG-20 MG-1 MG-400 UNIT-1 MCG-1 MG-2.5 MG-18 MG-5000 UNIT 136

ONETOUCH DELICA PLUS LANCET30G 112

ONETOUCH DELICA PLUS LANCET33G 112

ONETOUCH DELICA PLUS LANCING MISC 112

ONETOUCH DELICA SAFETY LANCING 112

ONETOUCH ULTRA 2 KIT 112

ONETOUCH ULTRA BLUE TEST STRP 71

ONETOUCH ULTRA CONTROL LIQD 112

ONETOUCH ULTRA STRP 71

ONETOUCH ULTRA TEST STRP 71

ONETOUCH ULTRASOFT 2 LANCETS 112

ONETOUCH VERIO FLEX SYSTEM KIT 112

ONETOUCH VERIO LIQD 112

ONETOUCH VERIO REFLECT KIT 112

ONETOUCH VERIO STRP 71

ONEVITE TABS 165

ONFI SUSP (Use clobazam) 17

ONFI TABS (Use clobazam) 17

ONGENTYS 40

ONPATTRO 193

ONTRALFY SOLN PO 2 MG/5ML 180

ONUREG TABS 34

ONYDA XR SUER 2

OPILL 50

OPIPZA FILM 43

OPSUMIT 10 MG (Use macitentan) 48

OPSYNVI 47

OPTIC-VITES TABS 60 MG-40 MG-2 MG-30 UNIT-5000 UNIT-40 MCG 165

OPTIC-VITES WITH LUTEIN TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG 165

OPTICHAMBER DIAMOND DEVI 129

OPTICHAMBER DIAMOND MISC 129

OPTICHAMBER DIAMOND-LG MASK DEVI 129

OPTICHAMBER DIAMOND-MD MASK MISC 129

OPTICHAMBER DIAMOND-SM MASK MISC 129

OPTIMUM PMS TABS 250 MG-4.16 MG-33.3 MCG-4.16 MG-10.4 MCG-2083.3 UNIT-4.16 MG-52.08 MG-4.16 MG-4.16 MG-16.7 UNIT-2.5 MG-41.7 MG-1.67 MG-7.9 MG-16.7 MCG-0.08 MG-4.16 MG-12.5 MCG-16.7 MCG-16.7 UNIT 166

OPTIUMEZ TEST STRP 71

OPTIVITE P.M.T. TABS 250 MG-50 MG-10 MCG-33.33 MCG-52.17 MG-16.67 UNIT-2083.33 UNIT-4.17 MG-4.17 MG-4 MG-4.17 MG-4.17 MG-4.17 MG-4.17 MG-16.67 MG-16.67 UNIT-2.5 MG-41.67 MG-1.67 MG-8 MG-16.67 MCG-4.17 MG-20.83 MG-12.5 MCG-16.67 MCG-41.67 MG-15.5 MG-10 MCG 166

OPURITY TABS 166

OPVEE NA 27

OPZELURA 59

oral electrolytes SOLN 132

ORALAIR SUBL 3

ORENCIA CLICKJECT SOAJ 7

ORENCIA SOLR 7

ORENCIA SOSY 125 MG/ML 7

ORENCIA SOSY 50 MG/0.4ML 7

ORENCIA SOSY 87.5 MG/0.7ML ... 7

ORENITRAM MONTH 1 TEPK 47

ORENITRAM MONTH 2 TEPK 47

ORENITRAM MONTH 3 TEPK 47

ORENITRAM TBCR 47

ORGOVYX 36

ORIAHNN 77

ORILISSA 75

ORKAMBI PACK 125 MG-100 MG, 188 MG-150 MG 194

ORKAMBI PACK 94 MG-75 MG . 194
ORKAMBI TABS 194
ORLADEYO 81
ORLADEYO PO 72 MG, 96 MG, 108 MG, 132 MG 81
orphenadrine citrate TB12 180
ORSERDU 36
ORUDIS CAPS 75 MG 7
oseltamivir phosphate CAPS 45
oseltamivir phosphate SUSR 45
OSENVELT SOLN SC 120 MG/1.7ML 75
OSTEOPRIME PLUS TABS 166
OSTEOPRIME ULTRA TABS 30 MG-6.25 MG-200 MCG-5 MG-200 UNIT-12.5 MCG-5 MG-75 MCG-12.5 MG-5 MG-0.5 MG-5 MG-11.25 MCG-1.25 MG-75 MG-3.75 MG-0.75 MG-200 MG-12.5 MCG-32 MG-25 MCG-1.5 MG-5 MG-1.75 MG-50 MCG . 166
OSVYRTI SOSY SC 60 MG/ML ...75
OTEZLA TABS 7
OTEZLA TBPK 7
OTEZLA XR TB24 PO 75 MG 7
OTEZLA/OTEZLA XR INITIATION PK TBPK 7
OTREXUP SOAJ 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 20 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML 5
OTULFI SOLN SC 45 MG/0.5ML ..55
OTULFI SOSY SC 45 MG/0.5ML, 90 MG/ML 55
OVIDE (Use malathion) 62
oxaprozin CAPS 7
oxaprozin TABS 7
oxazepam CAPS 10 MG, 30 MG ..13
oxcarbazepine SUSP 18
oxcarbazepine TABS 18
oxcarbazepine TB24 18
OXERVATE 187
OXLUMO 79
OXTELLAR XR TB24 (Use oxcarbazepine) 18
oxybutynin chloride SOLN 196
oxybutynin chloride TABS 2.5 MG 196
oxybutynin chloride TABS 5 MG . 196
oxybutynin chloride TB24 196
oxycodone hcl CAPS 9
oxycodone hcl CONC 100 MG/5ML 9
oxycodone hcl SOLN 9
oxycodone hcl TABS 9
oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG 9
OXYCONTIN T12A 9
oxymorphone hcl TB12 9
OXYTROL FOR WOMEN PTTW .196
OXYTROL PTTW 196
oyster shell 132
OYSTER SHELL CALCIUM/D TABS 500 MG-200 UNIT 132
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN 24
OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML 24
OZEMPIC (2 MG/DOSE) SOPN ...24
OZEMPIC TABS 1.5 MG, 4 MG, 9 MG 24
OZOBAX DS SOLN PO (Use baclofen) 180
paliperidone 41
PANDEL 58
pantoprazole sodium PACK 196
PANTOPRAZOLE SODIUM SOLR 40 MG (Use pantoprazole sodium) 196
pantoprazole sodium SOLR 196
pantoprazole sodium TBEC 40 MG 196
pantoprazole sodium TBEC 196
PANZYGA 189
PARAGARD INTRAUTERINE COPPER 50
PARI MANUAL INTERRUPTER DEVI 129
PARI TREK S COMBO PACK DEVI . 129
paroxetine hcl SUSP 21
paroxetine hcl TABS 21
paroxetine hcl TB24 21
paroxetine mesylate (vasomotor) 194
PARVA-CAL 200 UNIT-500 MG ..132
PARVLEX TABS 166
PAXIL CR TB24 (Use paroxetine hcl) 21
PAXIL TABS (Use paroxetine hcl) .21

PAXLOVID (150/100) 44
PAXLOVID (300/100 & 150/100) ..45
PAXLOVID (300/100) 45
pazopanib hcl 38
PC PEDIATRIC POLY-VITA/FE DROP SOLN 177
ped multivitamins w/fl & iron SOLN 35 MG/ML-0.4 MG/ML-0.5 MG/ML-400 UNIT/ML-1500 UNIT/ML-0.6 MG/ML-8 MG/ML-0.25 MG/ML-10 MG/ML-5 UNIT/ML 177
PEDIA-LAX SUPP 86
PEDIARIX SUSY 195
pediatric multivitamins w/fl CHEW 177
pediatric multivitamins w/fl SUSP 0.25 MG/ML, 0.5 MG/ML 177
pediatric vitamins acd w/ fluoride SOLN 177
PEDVAXHIB SUSP 7.5 MCG/0.5ML . 197
peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR 86
peg 3350-potassium chloride-sod bicarbonate-sod chloride 86
PEGASYS SOLN 45
PEGASYS SOSY 45
PEMAZYRE 38
PENBRAYA 197
penciclovir 56
penicillamine CAPS 133
penicillamine TABS 133
penicillin v potassium SOLR 190
penicillin v potassium TABS 190
PENMENVY SUSR IM 197
PENTACEL 195
PENTASA CPCR (Use mesalamine) . 78
pentoxifylline 81
perampanel SUSP 0.5 MG/ML 17
perampanel TABS 2 MG, 4 MG, 6 MG, 8 MG, 10 MG, 12 MG 17
PERFECT POINT SAFETY LANCETS 112
PERFOROMIST NEBU (Use formoterol fumarate) 15
perindopril erbumine 31
PERMETHRIN CREA 5 % (Use permethrin) 62
permethrin CREA 62
permethrin LIQD EX 62
perphenazine TABS 42
perphenazine-amitriptyline 191
PERSERIS PRSY 41
PERTZYE CPEP 73
PHARMACIST CHOICE AUTOCODE STRP 71
PHARMACIST CHOICE AUTOCODE SYS KIT 112
PHARMACIST CHOICE LANCETS . 112
PHARMACIST CHOICE MINI SYSTEM DEVI 112
PHARMACIST CHOICE NO CODING STRP 71
phenazopyridine hcl TABS 95 MG, 100 MG, 200 MG 80
phenelzine sulfate 20
phenobarbital ELIX 84
phenobarbital sodium SOLN 84
phenobarbital TABS 84
PHENOBARBITAL TABS 84
phenylephrine hcl (mydriatic) SOLN 2.5 % 185
phenylephrine hcl (oral) TABS ... 181
phenylephrine-chlorphen-dm LIQD 10 MG/5ML-4 MG/5ML-15 MG/5ML 52
phenylephrine-dm LIQD 2.5 MG/5ML-5 MG/5ML 52
phenylephrine-dm SOLN 52
phenylephrine-guaifenesin LIQD 5 MG/5ML-100 MG/5ML 52
phenytoin CHEW 19
phenytoin sodium extended 100 MG, 200 MG, 300 MG 19
phenytoin sodium extended 200 MG, 300 MG 19
phenytoin sodium SOLN 19
phenytoin SUSP 125 MG/5ML 19
PHEXX 198
PHEXXI 199
PHOSPHA 250 NEUTRAL 132
PHYRAGO 20 MG, 50 MG, 70 MG, 80 MG, 100 MG, 140 MG 38
PHYTOMULTI TABS 166
phytonadione TABS 5 MG 199
PIFELTRO 44
pilocarpine hcl (oral) 5 MG 135
pilocarpine hcl SOLN 1 %, 2 %, 4 % . 185

pilocarpine hcl SOLN 1.25 % 185
pimecrolimus 59
pindolol TABS 46
pioglitazone hcl 26
pioglitazone hcl-glimepiride 22
pioglitazone hcl-metformin hcl TABS . 22
PIP BLOOD GLUCOSE MONITORING DEVI 112
PIP BLOOD GLUCOSE TEST STRIP STRP 71
PIP GLUCOSE CONTROL SOLUTION LIQD 112
PIP LANCETS 28G 112
PIP LANCETS 30G 113
PIQRAY (200 MG DAILY DOSE) . 38
PIQRAY (250 MG DAILY DOSE) . 38
PIQRAY (300 MG DAILY DOSE) . 38
pirfenidone CAPS 194
pirfenidone TABS 194
piroxicam CAPS 7
pitavastatin calcium 31
PIVOT INSULIN PUMP STARTER KIT KIT 113
PIVOT SUPPLY KIT KIT 113
PIVYA TABS PO 185 MG 190
PLAVIX 75 MG (Use clopidogrel bisulfate) 81
PLEGRIDY SOAJ 192
PLEGRIDY SOSY IM 192
PLEGRIDY STARTER PACK SOAJ . 192
PLEGRIDY STARTER PACK SOSY SC 192
plerixafor 84
PLIAGLIS CREA 61
PNEUMOVAX 23 SOSY 197
PNV-OMEGA 178
POCKET CHAMBER DEVI 129
POCKET SPACER DEVI 129
podofilox SOLN 60
POLY-VI-FLOR CHEW 177
POLY-VI-FLOR SUSP 177
POLY-VI-FLOR/IRON CHEW 177
POLY-VITA/IRON SOLN 177
polyethylene glycol 3350 PACK ... 86
polyethylene glycol 3350 POWD .. 86
polyethylene glycol-propylene glycol (ophth) SOLN 0.3 %-0.4 % 184
POLYMEM FILM DOT PADS 88
POLYMEM NON-ADHESIVE PADS . 88
polymyxin b-trimethoprim 186
polysaccharide iron complex CAPS 84
polyvinyl alcohol 1.4 % 184
polyvinyl alcohol-povidone (ophth) 185
polyvinyl alcohol-povidone (ophth) 0.5 %-0.6 % 185
pomalidomide 1 MG, 2 MG, 3 MG, 4 MG 36
POMALYST 1 MG, 2 MG, 3 MG, 4 MG (Use pomalidomide) 36
PONVORY STARTER PACK TBPK 192
PONVORY TABS 192
pot phosphate monobasic w/ sod phosphate dibasic & monobasic .132
potassium bicarbonate TBEF 132
potassium chloride CPCR 10 MEQ 133
potassium chloride CPCR 8 MEQ 133
potassium chloride microencapsulated crystals er ...132
potassium chloride PACK PO 20 MEQ 133
potassium chloride SOLN PO 10 %, 20 %, 10 % 133
potassium chloride TBCR 8 MEQ, 10 MEQ, 20 MEQ 133
potassium citrate (alkalinizer) TBCR . 79
povidone-iodine SOLN 10 % 43
PRADAXA CAPS (Use dabigatran etexilate mesylate) 17
PRADAXA PACK 17
PRALUENT SOAJ 31
pramipexole dihydrochloride TABS 40
pramipexole dihydrochloride TB24 40
PRAMOTIC 189
pramoxine hcl (rectal) FOAM EX .. 11
prasugrel hcl 81
pravastatin sodium 31
prazosin hcl CAPS 32
PRECISION GLUCOSE KETONE CONTR LIQD 113

PRECISION SURE-DOSE SYRINGE 125

PRECISION XTRA BLOOD GLUCOSE STRP 71

PRECISION XTRA KETONE 71

PRECISION XTRA-GLUCOSE/KETONE DEVI 113

PRED FORTE (Use prednisolone acetate (ophth)) 187

PRED MILD 187

prednisolone acetate (ophth) 187

PREDNISOLONE SODIUM PHOSPHATE 187

prednisolone sodium phosphate SOLN 15 MG/5ML 51

prednisolone sodium phosphate SOLN 20 MG/5ML 51

prednisolone sodium phosphate SOLN 5 MG/5ML 51

prednisolone SOLN 51

prednisolone TABS 51

PREDNISONE INTENSOL CONC .51

prednisone SOLN 51

prednisone TABS 51

prednisone TBEC 1 MG, 2 MG, 5 MG 51

prednisone TBPK 51

pregabalin (once-daily) 193

pregabalin CAPS 18

pregabalin SOLN 18

PREHEVBRIO 198

PREMARIN 199

PREMPHASE 77

PREMPRO 77

PRENATAL (W/IRON & FA) TABS 178

PRENATAL FORMULA CAPS ...178

PRENATAL FORTE TABS 178

PRENATAL MULTIVIT PLUS FOLATE TABS 0.8 MG 178

PRENATAL ONE DAILY TABS ..178

PRENATAL TABS 120 MG-10 MG-1 MG-10 MCG-12 MCG-3 MG-20 MG-1200 MCG-27 MG-200 MG-1.84 MG-25 MG-2 MG-10 MG 179

PRENATAL TABS 179

prenatal vit w/ ferrous fumarate-l methylfolate-folic acid 178

prenatal vit w/ iron carbonyl-folic acid TABS 120 MG-10 MG-1.25 MG-315 UNIT-15 MCG-3.4 MG-10 MG-1 MG-2 MG-15 MG-10 MG-20 UNIT-2100 UNIT-50 MG 178

PRENATAL VITAMIN AND MINERAL TABS 178

PRENATAL VITAMINS TABS 100 MG-800 MCG-1.84 MG-18 MG-2.6 MG-1.7 MG-27 MG-10 MCG-4.95 MG-25 MG-200 MG-160 MG-1200 MCG-4 MCG, 120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT-30 UNIT 179

prenatal without a w/ fe fumarate-l methylfolate-fa-dha 179

PRENATAL/IRON TABS 4 MG-800 MCG-1.7 MG-400 UNIT-2 MG-20 MG-8000 UNIT-60 MG-45 MG-100 MG-100 MG-7.5 MG-150 MCG-30 UNIT-1 MG 179

PRENATE 179

PRENATE AM 179

PRENATE DHA 90 MG-26 MG-400 MCG-400 UNIT-25 MCG-155 MG-50 MG-300 MG-40 UNIT-600 MCG-18 MG 179

PRENATE ELITE 75 MG-21 MG-330 MCG-400 MCG-600 UNIT-13 MCG-3.5 MG-21 MG-3 MG-155 MG-25 MG-15 MG-1.5 MG-2600 UNIT-150 MCG-40 UNIT-600 MCG-20 MG .179

PRENATE ENHANCE 179

PRENATE ESSENTIAL 90 MG-26 MG-280 MCG-400 MCG-220 UNIT-13 MCG-155 MG-50 MG-300 MG-150 MCG-10 UNIT-40 MG-600 MCG-18 MG 179

PRENATE MINI 60 MG-26 MG-280 MCG-400 MCG-1000 UNIT-13 MCG-80 MG-25 MG-350 MG-18 MG-150 MCG-10 UNIT-600 MCG-25 MG .179

PRENATE PIXIE 179

PRENATE RESTORE 179

PRENOVA TABS 0.8 MG 179

PRESCRIPTION SUPPORT MULTIVIT CAPS 166

PRESERVISION AREDS 2 CAPS 166

PRESERVISION AREDS 2+COQ10 CAPS 166

PRESERVISION AREDS 2+MULTI VIT CAPS 166

PRESERVISION AREDS 3 CAPS 166

PRESERVISION AREDS CAPS .166

PRESERVISION AREDS TABS ..166

PRESERVISION/LUTEIN CAPS .166

PREV-RX TABS 166

PREVACID 24HR CPDR (Use lansoprazole) 196
PREVACID CPDR 30 MG (Use lansoprazole) 196
PREVACID SOLUTAB TBDD (Use lansoprazole) 196
PREVENT CAPS 166
PREVNAR 20 197
PREZCOBIX 44
PREZISTA SUSP 44
PREZISTA TABS 150 MG 44
PREZISTA TABS 75 MG 44
PRILOSEC PACK 196
PRIMACARE 179
primaquine phosphate TABS 33
primidone 18
PRIORIX SUSR 198
PRISTIQ (Use desvenlafaxine succinate) 21
PRIVIGEN SOLN 189
PRO COMFORT INSULIN SYRINGE 125
PRO COMFORT LANCETS 30G 113
PRO COMFORT LANCETS 31G 113
PRO COMFORT SAFETY LANCETS 30G 113
PRO COMFORT SPACER ADULT MISC 129
PRO COMFORT SPACER CHILD MISC 129
PRO COMFORT SPACER INFANT DEVI 129
PRO VOICE V8 GLUCOSE SYSTEM DEVI 113
PRO VOICE V8/V9 GLUCOSE STRP 71
PRO VOICE V9 GLUCOSE SYSTEM DEVI 113
PRO-CAL TABS 166
PROAIR RESPICLICK AEPB 15
probenecid 80
PROBIOTICS + BARIATRIC MULTI CAPS 166
PROCARDIA XL TB24 30 MG, 60 MG (Use nifedipine) 47
PROCARE SPACER/ADULT MASK DEVI 129
PROCARE SPACER/CHILD MASK DEVI 130
PROCERV HP TABS 166
PROCHAMBER VHC DEVI 130
prochlorperazine 42
prochlorperazine edisylate 10 MG/2ML 42
prochlorperazine maleate TABS ... 42
PROCRIT 10000 UNIT/ML 83
PROCRIT 2000 UNIT/ML 83
PROCRIT 20000 UNIT/ML 83
PROCRIT 3000 UNIT/ML 83
PROCRIT 4000 UNIT/ML 83
PROCRIT 40000 UNIT/ML 83
PROCTOFOAM FOAM EX 1 % ... 11
PRODIGY AUTOCODE BLOOD GLUCOSE DEVI 113
PRODIGY AUTOCODE BLOOD GLUCOSE KIT 113
PRODIGY CONTROL SOLUTION SOLN 113
PRODIGY INSULIN SYRINGE .. 125
PRODIGY LANCETS 28G 113
PRODIGY LANCING DEVICE MISC . 113
PRODIGY NO CODING BLOOD GLUC STRP 71
PRODIGY POCKET BLOOD GLUCOSE KIT 113
PRODIGY SAFETY LANCETS 26G . 113
PRODIGY TWIST TOP LANCETS 28G 113
PRODIGY VOICE BLOOD GLUCOSE KIT 114
PROFILNINE 81
PROFOLA TABS 166
progesterone CAPS 190
PROGRAF PACK 133
PROLATE SOLN 9
PROLATE TABS 9
PROLENSA (Use bromfenac sodium (ophth)) 188
PROLIA SOSY 75
promethazine & phenylephrine SYRP 52
promethazine hcl SOLN PO 6.25 MG/5ML, 12.5 MG/10ML 29
promethazine hcl SUPP 29
promethazine hcl TABS 29
promethazine w/codeine SOLN ... 52

promethazine w/codeine SYRP 52
promethazine-dm SYRP 52
propafenone hcl TABS 13
propranolol hcl CP24 46
propranolol hcl SOLN PO 20 MG/5ML, 40 MG/5ML 46
propranolol hcl TABS 46
propylthiouracil 194
PROQUAD SUSR 198
PRORENAL + D TABS 166
PRORENAL + D W/ OMEGA-3 CAPS 166
PROSCAR (Use finasteride) 79
PROSIGHT TABS 60 MG-40 MG-2 MG-30 MG-5000 UNIT-40 MCG 166
PROTECT CARDIO AF CAPS ...166
PROTECT PLUS SO CAPS 166
PROTEGRA CAPS 166
PROTONIX PACK (Use pantoprazole sodium) 196
PROTONIX SOLR (Use pantoprazole sodium) 196
PROTONIX TBEC (Use pantoprazole sodium) 196
protriptyline hcl 22
PROVIDA OB 179
PROVIGIL (Use modafinil) 3
PROXIVOL GEL 2 % 61
PROZAC CAPS (Use fluoxetine hcl) 21
prucalopride succinate 77
PRUDOXIN (Use doxepin hcl (antipruritic)) 55
pseudoephed-bromphen-dm SYRP 10 MG/5ML-30 MG/5ML-2 MG/5ML 52
pseudoephedrine hcl TABS 181
pseudoephedrine hcl TB12 181
pseudoephedrine-guaifenesin TB12 1200 MG-120 MG, 600 MG-60 MG 52
pseudoephedrine-ibuprofen TABS 52
psyllium CAPS 0.52 GM 85
psyllium POWD 28.3 %, 30 %, 43 %, 58.6 %, 100 % 85
PULMICORT FLEXHALER AEPB 14
PULMICORT SUSP (Use budesonide (inhalation)) 15
PULMOZYME 194
PURE COMFORT 3-BALL BREATHE EX DEVI 130
PURE COMFORT LANCETS 30G 114
PURE COMFORT SAFETY LANCET 30G 114
PURE COMFORT SPACER CHAMBER DEVI 130
PURIXAN SUSP 2000 MG/100ML (Use mercaptopurine) 34
PX ADVANCED LANCING DEVICE MISC 114
PX INSULIN SYRINGE 125
PX LANCETS MICROTHIN 33G 114
PX LANCETS ULTRA THIN 28G 114
pyrazinamide 34
pyrethrins-piperonyl butoxide SHAM 4 %-0.33 % 62
pyrethrins-piperonyl butoxide-permethrin-nit remover 4 %-0.33 %-0.5 % 62
pyridostigmine bromide TABS 60 MG 34
pyridostigmine bromide TBCR 34
pyridoxine hcl TABS 25 MG, 50 MG, 100 MG, 250 MG 199
PYRUKYND TABS 82
PYRUKYND TAPER PACK TBPK 82
PYZCHIVA 45 MG/0.5ML, 90 MG/ML 55
PYZCHIVA SC 45 MG/0.5ML 55
QALSODY 181
QBRELIS SOLN 31
QC ADVANCED LANCING DEVICE MISC 114
QC ALL PURPOSE DRESSINGS PADS 88
QC BORDER ISLAND GAUZE PADS 88
QC CHILDRENS VITAMINS/IRON CHEW 15 MG 177
QC DAILY MULTIVIT/MULTIMINERAL TABS 50 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-2500 UNIT-1.7 MG-25 MCG-20 MG-10 MG-18 MG-1.5 MG-100 MG-15 MG-150 MCG-80 MG-2 MG-162 MG-160 MCG-150 MCG-30 UNIT-109 MG-2 MG-5 MCG-10 MCG-3.5 MG-65 MCG-20 MCG-10 MCG-72 MG 167
QC DAILY MULTIVITAMINS/IRON TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-18 MG-1.5 MG-30 UNIT 136

QC ESSENTIALS TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-1.5 MG-30 UNIT 176

QC HAIR SKIN & NAILS TABS 50 MG-50 MG-3.5 MG-6.5 MG-25 MCG-25 UNIT-25 MCG-7.5 MG-7.2 MG-50 UNIT-25 MCG-2500 UNIT-15 MG-5 MG-25 MG-10 MG-3.3 MG-10 MG-5 MG-10 MG-20 MG-0.6 MG-150 MCG-54 MG-70 MG-897 MCG-0.6 MG 167

QC LANCETS SUPER THIN 30G 114

QC MENS DAILY MULTIVITAMIN TABS 90 MG-3 MG-30 MCG-400 MCG-400 UNIT-18 MCG-1.7 MG-20 MCG-16 MG-3500 UNIT-5 MG-210 MG-600 MCG-1.2 MG-120 MG-15 MG-2 MG-100 MG-45 UNIT-2 MG-120 MCG-105 MCG 167

QC MULTI-VITE 50 & OVER TABS 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-50 MG-11 MG-80 MG-150 MCG-220 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG 167

QC MULTI-VITE TABS 167

QC OCUHEALTH VISION SUPPORT 2 CAPS 167

QC PRENATAL TABS 179

QC STERILE PADS PADS 88

QC THERIN-M TABS 90 MG-6 MG-30 MCG-400 MCG-400 UNIT-12 MCG-3.4 MG-28 MCG-20 MG-5000 UNIT-10 MG-9 MG-3 MG-100 MG-15 MG-150 MCG-7.5 MG-2 MG-40 MG-75 MCG-150 MCG-60 UNIT-31 MG-2 MG-5 MCG-10 MCG-2 MG-50 MCG-70 MCG-10 MCG-7.5 MG 167

QC UNILET LANCETS 28G 114

QC UNILET LANCETS MICRO THIN 114

QC WOMENS DAILY MULTIVITAMIN TABS 60 MG-2 MG-30 MCG-400 MCG-500 UNIT-5 MCG-2500 UNIT-1.7 MG-25 MCG-10 MG-5 MG-15 MG-450 MG-5 MG-50 MG-15 MG-30 UNIT-2 MG-2 MG-120 MCG-20 MCG 167

QELBREE 2

QFITLIA SOAJ SC 50 MG/0.5ML .. 81

QFITLIA SOLN SC 20 MG/0.2ML . 81

QINLOCK 38

QIVIGY SOLN IV 5 GM/50ML, 10 GM/100ML 189

QNASL 181

QNASL CHILDRENS 181

QUADRACEL SUSP 195

QUADRACEL SUSY 195

QUAKE DEVI 130

quazepam 85

QUESTRAN LIGHT POWD (Use cholestyramine light) 30

QUESTRAN PACK (Use cholestyramine) 30

QUESTRAN POWD (Use cholestyramine) 30

quetiapine fumarate TABS 42

quetiapine fumarate TB24 42

QUFLORA FE 174

QUFLORA FE PEDIATRIC LIQD 177

QUFLORA PEDIATRIC CHEW .. 177

QUFLORA PEDIATRIC SUSP 0.25 MG/ML, 0.5 MG/ML 177

QUILLICHEW ER CHER 3

QUILLIVANT XR SRER 3

QUIN B STRONG TABS 167

quinapril hcl 32

quinapril-hydrochlorothiazide 33

quinidine gluconate TBCR 13

quinidine sulfate TABS 13

QUINTABS TABS 176

QUINTABS-M TABS 167

QUINTET AC BLOOD GLUCOSE DEVI 114

QUINTET AC BLOOD GLUCOSE TEST STRP 71

QUINTET BLOOD GLUCOSE SYSTEM DEVI 114

QUINTET BLOOD GLUCOSE TEST STRP 72

QUINTET CONTROL HIGH/NORMAL SOLN 114

QULIPTA 130

QUTENZA (2 PATCH) 61

QUTENZA (4 PATCH) 61

QUTENZA 61

QUVIVIQ 85

QVAR REDIHALER 15

rabeprazole sodium TBEC 196

RAGWITEK SUBL 3

RALDESY SOLN PO 10 MG/ML .. 21

raloxifene hcl 75

ramelteon 85
ramipril CAPS 32
RAPIVAB 45
rasagiline mesylate 40
RASONQUE TABS PO 100 MG, 150 MG 38
RASUVO SOAJ 7.5 MG/0.15ML, 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML 5
RAY-TEC X-RAY DETECTABLE SPNGE MISC 89
RAYALDEE 76
RAYASAL CREA 60
RAYAVIT TABS 167
REALITY INSULIN SYRINGE ... 125
REALITY LATEX CONDOMS MISC . 89
REALITY LATEX/ULTRA TEXTURED DEVI 89
REALITY LATEX/ULTRA THIN DEVI 89
REBIF REBIDOSE SOAJ 192
REBIF REBIDOSE TITRATION PACK SOAJ 192
REBIF SOSY 193
REBIF TITRATION PACK SOSY .193
REBINYN 81
REBLOZYL 83
RECOMBINATE SOLR 81
RECOMBIVAX HB SUSP 198
RECOMBIVAX HB SUSY 198
REFRESH 185
REFUAH PLUS BLOOD GLUCOSE TEST STRP 72
REFUAH PLUS GLUCOSE CONTROL SOLN 114
REFUAH PLUS MONITORING SYSTEM KIT 114
RELCARE TABS 176
RELENZA DISKHALER 45
RELEUKO SOSY 83
RELEXXII TBCR (Use methylphenidate hcl) 3
RELEXXII TBCR 3
RELION ALL-IN-ONE 114
RELION BLOOD GLUCOSE TEST STRP 72
RELION CONFIRM GLUCOSE MONITOR KIT 114
RELION CONFIRM/MICRO TEST STRP 72
RELION INSULIN SYRINGE 125
RELION KETONE TEST STRP ... 72
RELION LANCET DEVICES 30G 115
RELION LANCETS MICRO-THIN 33G 115
RELION LANCETS THIN 26G ...115
RELION LANCETS ULTRA-THIN 30G 115
RELION MICRO KIT 115
RELION PREMIER BLU MONITOR DEVI 115
RELION PREMIER CLASSIC DEVI 115
RELION PREMIER COMPACT SYSTEM KIT 115
RELION PREMIER TEST STRP .. 72
RELION PREMIER VOICE MONITOR DEVI 115
RELION PRIME MONITOR DEVI 115
RELION PRIME TEST STRP 72
RELION TRUE MET AIR GLUC METER KIT 115
RELION TRUE METRIX TEST STRIPS STRP 72
RELION ULTIMA GLUCOSE SYSTEM KIT 115
RELION ULTIMA TEST STRP 72
RELION ULTRA THIN LANCETS 30G 115
RELPAX (Use eletriptan hydrobromide) 131
REMEDIENT CAPS 167
REMERON SOLTAB TBDP (Use mirtazapine) 20
REMERON TABS 15 MG, 30 MG (Use mirtazapine) 20
REMICADE 78
RENAL CAPS 1 MG 135
RENAL MULTIVITAMIN TABS ...167
RENAPLEX TABS 60 MG-10 MG-300 MCG-800 MCG-6 MCG-1.7 MG-20 MG-10 MG-1.5 MG-12.5 MG ..167
RENAPLEX-D TABS 167
RENFLEXIS 78
RENO CAPS CAPS 1 MG 135
RENTHYROID TABS 15 MG, 30 MG,

60 MG, 90 MG, 120 MG 194
RENVELA PACK (Use sevelamer carbonate) 79
RENVELA TABS (Use sevelamer carbonate) 79
repaglinide 26
REPATHA SOSY 31
REPATHA SURECLICK SOAJ 31
RESTASIS EMUL (Use cyclosporine (ophth)) 186
RESTASIS MULTIDOSE EMUL 186
RESTORE CONTACT LAYER PADS 89
RESTORE FOAM DRESSING PADS 89
RESTORE ODOR ABSORBING DRESS PADS 89
RESTORE TRIO ABSORBENT DRESS PADS 89
RESTORIL (Use temazepam) 85
RETACRIT 83
RETEVMO CAPS 38
RETEVMO TABS 38
RETISERT 187
RETROVIR SOLN 44
REVATIO TABS (Use sildenafil citrate (pulmonary hypertension)) 48
REVLIMID (Use lenalidomide) 133
REVUFORJ 37
REVUFORJ 25 MG 37
REVYRA TABS 167
REXTOVY LIQD 27
REXULTI 43
REYATAZ PACK 44
REYVOW 131
REZDIFFRA 77
REZENOPY LIQD 10 MG/0.11ML 27
REZLIDHIA 38
REZVOGLAR KWIKPEN 26
RHAPSIDO TABS PO 25 MG 133
RHOPRESSA 186
ribavirin (hepatitis c) CAPS 45
ribavirin (hepatitis c) TABS 200 MG 45
riboflavin TABS 50 MG, 100 MG 199
rifabutin 34
rifampin CAPS 34
RIGHTEST GC300 CONTROL LIQD 115
RIGHTEST GD500 LANCING DEVICE MISC 115
RIGHTEST GL300 LANCETS 115
RIGHTEST GM100 BLOOD GLUCOSE KIT 115
RIGHTEST GM300 BLOOD GLUCOSE KIT 116
RIGHTEST GM550 BLOOD GLUCOSE KIT 116
RIGHTEST GS100 BLOOD GLUCOSE STRP 72
RIGHTEST GS300 BLOOD GLUCOSE STRP 72
RIGHTEST GS550 BLOOD GLUCOSE STRP 72
RIGHTEST GT333 BLOOD GLUCOSE DEVI 116
RIGHTEST GT333 BLOOD GLUCOSE STRP 72
RIGHTEST GT333 GLUCOSE TEST STRP 72
rilpivirine hcl 25 MG 44
rimantadine hydrochloride TABS 45
RINVOQ LQ SOLN 5
RINVOQ TB24 5
riociguat 0.5 MG, 1 MG, 1.5 MG, 2 MG, 2.5 MG 48
RIOMET SOLN (Use metformin hcl) 23
risedronate sodium TABS 75
risedronate sodium TBEC 75
RISPERDAL CONSTA (Use risperidone microspheres) 41
RISPERDAL SOLN (Use risperidone) 41
RISPERDAL TABS 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG (Use risperidone) 41
risperidone microspheres 41
risperidone SOLN 41
risperidone TABS 41
risperidone TBDP 41
RITALIN LA CP24 20 MG, 40 MG (Use methylphenidate hcl) 3
RITALIN TABS (Use methylphenidate hcl) 3
RITEFLO DEVI 130
ritonavir TABS 44
rivaroxaban SUSR 1 MG/ML 16
rivaroxaban TABS 2.5 MG 16

rivastigmine 191
rivastigmine tartrate CAPS 191
RIVFLOZA SOLN 79
RIVFLOZA SOSY 79
RIXUBIS SOLR 81
rizatriptan benzoate TABS 131
rizatriptan benzoate TBDP 131
ROCKLATAN 186
ROCTAVIAN 81
roflumilast 14
ROLVEDON 83
romidepsin SOLR 39
ROMVIMZA CAPS PO 14 MG, 20 MG, 30 MG 39
ropinirole hydrochloride TABS 40
ropinirole hydrochloride TB24 40
rosuvastatin calcium TABS 10 MG 31
rosuvastatin calcium TABS 20 MG, 40 MG 31
rosuvastatin calcium TABS 5 MG ..31
ROTARIX SUSP 198
ROTATEQ SOLN 198
ROWASA (Use mesalamine w/ cleanser) 78
ROZEREM (Use ramelteon) 85
ROZLYTREK CAPS 39
ROZLYTREK PACK 39
RUBRACA 39
RUCONEST 81
rufinamide SUSP 18
rufinamide TABS 18
RUKOBIA 44
RYALTRIS 180
RYBELSUS TABS 24
RYDAPT 39
RYKINDO SRER 41
RYPLAZIM 81
RYSTIGGO 133
RYTARY CPCR 145 MG-36.25 MG, 195 MG-48.75 MG, 245 MG-61.25 MG, 95 MG-23.75 MG (Use carbidopa-levodopa) 40
RYZNEUTA SOSY SC 20 MG/ML .84
SABRIL PACK (Use vigabatrin) ... 19
SABRIL TABS (Use vigabatrin) 19
sacubitril-valsartan TABS 47
SAFETY LANCET 30G/PRESSURE ACT 116
SAFETY LANCETS 21G 116
SAFETY LANCETS 23G 116
SAFETY LANCETS 28G 116
saline SOLN 0.65 % 180
salsalate 8
SANCUSO PTCH 28
SANDIMMUNE SOLN IV 50 MG/ML . 133
SAPHNELO 134
SAPHNELO PEN SC 120 MG/0.8ML 134
SAPHNELO SC 120 MG/0.8ML ..134
SAPHRIS (Use asenapine maleate) . 42
SAPS HEALTH PLUS LANCETS 116
SAPS HEALTH TWIST TOP LANCETS 116
SAPS TWIST TOP LANCETS ...116
SAVAYSA 16
SAVELLA TABS 12.5 MG, 25 MG, 50 MG, 100 MG (Use milnacipran hcl) 191
SAVELLA TITRATION PACK MISC (Use milnacipran hcl) 191
saxagliptin hcl 23
saxagliptin-metformin hcl 22
SB FIB LAX ORANGE POWD 30 %, 33 % 85
SB HEMORRHOID 0.25 %-71.9 %-14 %-3 % 11
SB INSULIN SYRINGE 125
SCEMBLIX 39
SDAMLO SOLR PO 2.5 MG, 5 MG, 10 MG 47
SECUADO 42
SECURESAFE INSULIN SYRINGE . 126
SEGLUROMET 22
SELARSDI SOLN SC 45 MG/0.5ML . 55
SELARSDI SOSY SC 45 MG/0.5ML, 90 MG/ML 56
SELECT-OB CHEW 179
SELECT-OB+DHA MISC 179
selegiline hcl CAPS 40
selegiline hcl TABS 40
selenium sulfide LOTN 1 % 56
selenium sulfide LOTN 2.5 % 56

selenium sulfide SHAM 1 % 56
SELZENTRY SOLN 44
SEMGLEE (YFGN) SOLN 26
SEMGLEE (YFGN) SOPN 26
SENIOR TABS TABS 60 MG-3 MG-30 MCG-400 MCG-1.5 MG-20 MG-25 MCG-10 MG-1.7 MG-250 MCG-300 MCG-400 UNIT-45 UNIT-100 MG-2 MG-75 MCG-5 MCG-80 MG-2 MG-150 MCG-150 MCG-2 MG-10 MCG-15 MG-200 MG-150 MCG-48 MG-20 MCG-3500 UNIT-10 MCG-72 MG 168
senna SYRP 176 MG/5ML 86
sennosides LIQD 86
sennosides SYRP 86
sennosides TABS 8.6 MG, 15 MG, 17.2 MG 86
sennosides-docusate sodium TABS 86
SENSILANCE SAFETY LANCETS 21G 116
SENSILANCE SAFETY LANCETS 26G 116
SENSILANCE SAFETY LANCETS 28G 116
SENTRY SENIOR MENS 50+ TABS . 168
SENTRY SENIOR TABS 168
SENTRY SENIOR/LUTEIN TABS 168
SENTRY TABS 168
SEREVENT DISKUS 15
SEROQUEL TABS (Use quetiapine fumarate) 42
SEROQUEL XR TB24 (Use quetiapine fumarate) 42
SEROSTIM SC 4 MG, 5 MG, 6 MG 75
SERTRALINE HCL CAPS 150 MG, 200 MG (Use sertraline hcl) 21
sertraline hcl CAPS 150 MG, 200 MG 21
sertraline hcl CONC 21
sertraline hcl TABS 21
sevelamer carbonate PACK 79
sevelamer carbonate TABS 79
sevelamer hcl 79
SEVENFACT 81
SFROWASA ENEM 78
SHINGRIX 198
SHINGRIX IM 50 MCG/0.5ML 198
SIDEROL TABS 168
sildenafil citrate (pulmonary hypertension) SOLN 48
sildenafil citrate (pulmonary hypertension) SUSR 48
sildenafil citrate (pulmonary hypertension) TABS 48
SILIGENTLE FOAM DRESSING PADS 89
silodosin 80
silver sulfadiazine 56
SIMBRINZA 185
simethicone CHEW 80 MG 77
simethicone SUSP 77
SIMLANDI (1 PEN) AJKT 5
SIMLANDI (1 SYRINGE) PSKT 5
SIMLANDI (2 PEN) AJKT 5
SIMLANDI (2 SYRINGE) PSKT 5
SIMPLE DIAGNOSTICS LANCING DEV MISC 116
SIMPLERA SENSOR 116
SIMPLERA SYNC SENSOR 116
SIMPLERA SYSTEM 117
SIMPONI ARIA SOLN 5
SIMPONI SOAJ 5
SIMPONI SOSY 5
simvastatin TABS 31
SINEMET TABS 100 MG-10 MG (Use carbidopa-levodopa) 40
SINGULAIR CHEW 5 MG (Use montelukast sodium) 14
SINGULAIR TABS (Use montelukast sodium) 14
sirolimus SOLN 133
sirolimus TABS 133
sitagliptin 25 MG, 50 MG, 100 MG 23
sitagliptin free base-metformin hcl TABS 1000 MG-50 MG, 500 MG-50 MG 22
sitagliptin free base-metformin hcl TB24 22
sitagliptin phosphate 25 MG, 50 MG, 100 MG 23
sitagliptin phosphate-metformin hcl TABS 22
sitagliptin phosphate-metformin hcl TB24 22
SIVEXTRO SOLR 12
SIVEXTRO TABS 12

SKIN HAIR & NAILS ADVANCED CAPS 168
SKYCLARYS 181
SKYLA 50
SKYRIZI PEN SOAJ 56
SKYRIZI SOCT 78
SKYRIZI SOLN 78
SKYRIZI SOSY 56
SKYTROFA 75
SLYND 50
SM ADHESIVE PADS 2"X3" PADS 89
SM IPECAC SYRUP 27
SM PRENATAL VITAMINS TABS 179
SM STERILE PADS 89
SMART DIABETES VANTAGE LANCING MISC 117
SMARTEST BLOOD GLUCOSE TEST STRP 73
SMARTEST CONTROL MEDIUM SOLN 117
SMARTEST EJECT DEVI 117
SMARTEST EJECT STARTER KIT 117
SMARTEST LANCETS 28G 117
SMARTEST PERSONA STARTER KIT 117
SMARTEST PRONTO STARTER KIT 117
SMARTEST PROTEGE DEVI 117
SMARTEST PROTEGE STARTER KIT 117
SOAANZ TABS 20 MG 74
sodium bicarbonate (antacid) TABS 325 MG, 650 MG 11
sodium chloride (gu irrigant) 0.9 % 79
sodium chloride (inhalant) NEBU 0.9 %, 3 %, 10 % 52
SODIUM CHLORIDE SOLN IJ 0.9 % 133
sodium chloride SOLN IV 0.9 % ..133
sodium citrate & citric acid 79
sodium fluoride (dental) CREA 134
sodium fluoride (dental) GEL 134
sodium fluoride (dental) SOLN 0.2 % 134
sodium fluoride CHEW 132
sodium fluoride SOLN 0.5 MG/ML 132
SODIUM FLUORIDE SOLN 0.5 MG/ML 132
sodium hypochlorite SOLN EX 43
sodium oxybate SOLN 190
sodium phosphate monobasic-sodium phosphate dibasic PR 19 GM/118ML-7 GM/118ML, 19 GM/197ML-7 GM/197ML, 6 GM/133ML-16 GM/133ML, 7 GM/118ML-19 GM/118ML, 9.5 GM/59ML-3.5 GM/59ML 86
sodium polystyrene sulfonate POWD 134
sodium polystyrene sulfonate SUSP CO 15 GM/60ML 134
sodium sulfate-potassium sulfate-magnesium sulfate 86
sodium tetradecyl sulfate 134
SOF-WICK PADS 89
SOFOSBUVIR-VELPATASVIR TABS 45
SOGROYA 75
solifenacin succinate TABS 196
SOLIQUA 23
SOLO TABS 168
SOLTAMOX SOLN 36
SOLUS V2 BLOOD GLUCOSE SYSTEM DEVI 117
SOLUS V2 BLOOD GLUCOSE SYSTEM KIT 117
SOLUS V2 CONTROL SOLN 117
SOLUS V2 LANCETS 28G 117
SOLUS V2 LANCING DEVICE MISC 117
SOLUS V2 TEST STRP 73
SOLUS V2 TWIST LANCETS 30G 117
SOMA TABS (Use carisoprodol) . 180
SOMAVERT 75
sorafenib tosylate 39
SORBITOL PO 70 % 86
SORILUX FOAM 56
sotalol hcl (afib/afl) 46
sotalol hcl TABS 46
SOTYKTU 56
SOTYLIZE SOLN PO 46
SOVALDI PACK 45
SOVALDI TABS 45
SOVUNA 200 MG 34
SPECTRAVITE TABS 168

SPEVIGO SOLN 56
SPEVIGO SOSY 56
SPIKEVAX SUSY 198
spinosad 62
SPINRAZA 183
SPIRIVA HANDIHALER CAPS IN (Use tiotropium bromide) 14
SPIRIVA RESPIMAT AERS IN 14
SPIRO PD DEVI 130
spironolactone & hydrochlorothiazide 74
spironolactone TABS 74
SPORT SUNSCREEN SPF50 LOTN 62
SPRAVATO (56 MG DOSE) 20
SPRAVATO (84 MG DOSE) 20
SPRITAM TB3D 250 MG, 500 MG, 750 MG, 1000 MG (Use levetiracetam) 18
SPRITAM TB3D 18
SPRYCEL (Use dasatinib) 39
SSS 10-5 CREA 10 %-5 % (Use sulfacetamide sodium w/ sulfur) ... 53
STARJEMZA SOLN IV 130 MG/26ML 78
STARJEMZA SOSY SC 45 MG/0.5ML, 90 MG/ML 56
STEGLATRO 27
STEGLUJAN 23
STELARA 130 MG/26ML 78
STELARA SOSY 56
STEQEYMA 56
STEQEYMA SC 56
STERILANCE TL 117
STERILE GAUZE PADS 89
STERILE PADS 89
STIMUFEND 84
STIOLTO RESPIMAT 15
STIVARGA 39
STOBOCLO SOSY SC 60 MG/ML 75
STOP LICE MAXIMUM STRENGTH LIQD 4 %-0.33 % 63
STRATTERA (Use atomoxetine hcl) . 2
STRENSIQ 76
STRESS B COMPLEX/ANTIOXID/ZINC TABS 500 MG-45 MCG-400 MCG-10 MG-100 MG-5 MG-20 MG-10 MG-13.5 MG-3 MG-24 MG-77 MG-12 MCG 168
STRESS B COMPLEX/IRON TABS 600 MG-5 MG-45 MCG-400 MCG-12 MCG-15 MG-100 MG-20 MG-27 MG-15 MG-30 UNIT 136
STRESS FORMULA TABS 500 MG-3 MG-45 MCG-400 MCG-12 MCG-20 MG-10 MG-100 MG-10 MG-30 UNIT, 500 MG-5 MG-45 MCG-400 MCG-12 MCG-10 MG-100 MG-20 MG-10 MG-30 UNIT, 500 MG-5 MG-45 MCG-400 MCG-15 MG-12 MCG-20 MG-10 MG-100 MG-30 UNIT 176
STRESS FORMULA/IRON TABS 136
STRESS FORMULA/IRON/ENERGY TABS 136
STRESS FORMULA/ZINC/ENERGY TABS 176
STRESSTABS ADVANCED TABS 30 MG-5 MG-400 MCG-400 UNIT-50 MCG-2500 UNIT-1.5 MG-20 MG-1.5 MG-30 MG-20 MG-15 UNIT 168
STRESSTABS ENERGY TABS .. 176
STRIBILD 44
STRIVERDI RESPIMAT 15
STROVITE ONE TABS 168
SUBLOCADE SOSY 10
SUBOXONE FILM SL 0.5 MG-2 MG, 2 MG-8 MG (Use buprenorphine hcl-naloxone hcl dihydrate) 10
SUBOXONE FILM SL 1 MG-4 MG, 3 MG-12 MG (Use buprenorphine hcl-naloxone hcl dihydrate) 10
SUBVENITE SUSP PO 10 MG/ML 18
sucralfate SUSP 195
sucralfate TABS 195
SUDAFED CHILDRENS LIQD ... 181
SULAR 8.5 MG, 17 MG, 34 MG (Use nisoldipine) 47
sulfacetamide sod-prednisolone SOLN 187
sulfacetamide sodium (acne) 53
sulfacetamide sodium (ophth) OINT 186
sulfacetamide sodium (ophth) SOLN . 186
sulfacetamide sodium GEL 56
sulfacetamide sodium LIQD 56
sulfacetamide sodium w/ sulfur CREA 10 %-2 %, 10 %-5 % 53
sulfacetamide sodium w/ sulfur EMUL 10 %-1 % 53

sulfacetamide sodium w/ sulfur LIQD 53

sulfacetamide sodium w/ sulfur LOTN 10 %-5 % 53

sulfacetamide sodium w/ sulfur LOTN 9.8 %-4.8 % 53

sulfacetamide sodium w/ sulfur SUSP 10 %-5 % 53

sulfacetamide sodium w/ sulfur SUSP 8 %-4 % 53

SULFACETAMIDE SODIUM-SULFUR SUSP 53

sulfamethoxazole-trimethoprim SUSP 11

sulfamethoxazole-trimethoprim TABS 11

sulfasalazine TABS 78

sulfasalazine TBEC 78

sulindac TABS 7

SUMADAN 53

SUMADAN WASH LIQD (Use sulfacetamide sodium w/ sulfur) ...53

sumatriptan 20 MG/ACT 131

sumatriptan 5 MG/ACT 131

sumatriptan succinate SOAJ 6 MG/0.5ML 131

sumatriptan succinate SOLN 6 MG/0.5ML 131

sumatriptan succinate TABS 25 MG . 131

sumatriptan succinate TABS 50 MG, 100 MG 131

sumatriptan-naproxen sodium ...130

SUMAXIN CP 53

SUMAXIN PADS 54

sunitinib malate 39

SUNLENCA SOLN 44

SUNLENCA TABS PO 300 MG ... 44

SUNLENCA TBPK 300 MG 44

SUNOSI 2

sunscreens LOTN 62

SUPER ANTIOXIDANT CAPS ...168

SUPER ANTIOXIDANTS PROTECTOR CAPS 500 MG-400 UNIT-25000 UNIT-50 MCG 168

SUPER AYTINAL 50 PLUS TABS 120 MG-2 MG-30 MCG-400 MCG-1.5 MG-400 UNIT-12 MCG-10 MG-1.7 MG-20 MG-275 MCG-9 MG-225 MG-100 MG-15 MG-2 MG-150 MCG-75 MCG-150 MCG-50 UNIT-2 MG-5000 UNIT-80 MCG-70 MCG-120 MCG-25 MG-25 MG 168

SUPER AYTINAL TABS 90 MG-5 MG-40 MCG-400 MCG-400 UNIT-12 MCG-10 MG-5 MG-30 MG-275 MCG-3500 UNIT-25 MG-300 MCG-5 MG-100 MG-15 MG-3 MG-7.7 MG-150 MCG-50 MCG-162 MG-150 MCG-2 MG-50 MCG-30 UNIT-125 MG-5 MCG-10 MCG-7.5 MG-25 MCG-50 MCG-10 MCG-7 MG 168

SUPER D-ZINC-SELENIUM-COPPER TABS 168

SUPER THERA VITE M TABS 90 MG-3 MG-35 MCG-0.4 MG-3 MG-9 MCG-10 MG-3.4 MG-30 MG-5000 UNIT-400 UNIT-30 UNIT-1250 UNIT-27 MG-100 MG-5 MG-15 MCG-7.5 MG-15 MCG-2 MG-15 MG-40 MG-150 MCG-31 MG-10 MCG-7.5 MG 168

SUPER VITA-MINS TABS 250 MG-5 MG-0.4 MG-10 MG-6 MCG-20 MG-10 MG-100 MG-400 UNIT-30 UNIT-24 MG-100 MG-1.25 MG-2 MG-15 MG-0.161 MG-150 MCG-0.125 MG-10000 UNIT 169

SUPERIOR MENS MULTI TABS .169

SUPERIOR WOMENS MULTI TABS 169

SUPPORT LIQD 169

SUPPORT-500 CAPS 169

SUPPRELIN LA 76

SURE COMFORT INSULIN SYRINGE 126

SURE COMFORT LANCETS 18G 118

SURE COMFORT LANCETS 21G 118

SURE COMFORT LANCETS 23G 118

SURE COMFORT LANCETS 28G 118

SURE COMFORT LANCETS 30G 118

SURE COMFORT LANCING PEN MISC 118

SURGICAL GAUZE SPONGE PADS 89

SUTENT (Use sunitinib malate) ...39

SYMBICORT (Use budesonide-formoterol fumarate dihydrate) 15

SYMBRAVO TABS PO 130

SYMDEKO 194

SYMLINPEN 120 SOPN 22

SYMLINPEN 60 SOPN 22

SYMPAZAN FILM 17

SYMPROIC 79
SYMTUZA 44
SYNALAR CREA (Use fluocinolone acetonide) 58
SYNALAR OINT (Use fluocinolone acetonide) 58
SYNAREL 76
SYNJARDY TABS 23
SYNJARDY XR TB24 23
SYNOFLEX PTCH 61
SYSTANE ICAPS AREDS2 CAPS 250 MG-5 MG-1 MG-1 MG-12.5 MG-200 UNIT 169
SYSTANE ICAPS AREDS2 TABS 169
T-VITES TABS 169
T:FLEX T:LOCK CARTRIDGE 4.8ML MISC 118
T:SLIM X2 3ML CARTRIDGE MISC . 118
T:SLIM X2 BASAL-IQ PUMP DEVI 118
T:SLIM X2 CONTROL-IQ 7.7 PUMP DEVI 118
T:SLIM X2 CONTROL-IQ 7.8 PUMP DEVI 118
T:SLIM X2 INSULIN PMP BASAL6.4 DEVI 118
T:SLIM X2 INSULIN PUMP DEVI 118
T:SLIM X2 STARTER 7.10 KIT ...118
TAB-A-VITE TABS 60 MG-2 MG-400 MCG-20 MG-1.5 MG-10 MCG-6 MCG-1.7 MG-1500 MCG 176
TAB-A-VITE/BETA CAROTENE TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-3000 UNIT-10 MG-1.5 MG-45 MG-30 UNIT 176
TAB-A-VITE/IRON TABS 50 MG-1 MG-400 MCG-20 MG-2 MG-10 MCG-1 MCG-2.5 MG-1500 MCG-1 MG-15 MG 136
TAB-A-VITE/IRON/BETA CAROTENE TABS 136
TABRECTA 39
TACLONEX SUSP (Use calcipotriene-betamethasone dipropionate) 58
tacrolimus (topical) OINT 0.03 % ..59
tacrolimus (topical) OINT 0.1 % ... 59
tacrolimus CAPS 133
tacrolimus SOLN 5 MG/ML 134
tadalafil (pulmonary hypertension) TABS 48
tadalafil 5 MG 47
TADLIQ SUSP 48
TAFINLAR CAPS 39
TAFINLAR TBSO 39
tafluprost 188
TAGRISSO 35
TAI DOC CONTROL SOLN 118
TAKHZYRO SOSY 81
TALTZ SOAJ 56
TALTZ SOSY 56
TALZENNA 39
TAMIFLU CAPS 75 MG (Use oseltamivir phosphate) 45
TAMIFLU SUSR (Use oseltamivir phosphate) 45
tamoxifen citrate TABS 36
tamsulosin hcl 80
TANDEM MOBI AUTOSOFT XC KIT MISC 118
TANDEM MOBI AUTOSOFT30 10PK23" MISC 118
TANDEM MOBI AUTOSOFT30 14PK23" MISC 118
TANDEM MOBI AUTOSOFTXC 10PK23" MISC 118
TANDEM MOBI AUTOSOFTXC 10PK5" MISC 118
TANDEM MOBI AUTOSOFTXC 14PK23" MISC 118
TANDEM MOBI AUTOSOFTXC 14PK5" MISC 118
TANDEM MOBI SYSTEM STARTER KIT 118
TANDEM MOBI TRUSTEEL 10PK23" MISC 118
TANDEM T:SLIM ASFT 30 PK10 23" MISC 118
TANDEM T:SLIM ASFT 30 PK14 23" MISC 118
TANDEM T:SLIM ASFT XC PK10 23" MISC 118
TANDEM T:SLIM ASFT XC PK14 23" MISC 119
TANDEM T:SLIM TRUSTL PK10 23" MISC 119
TAPENTADOL HCL ER TB12 50 MG, 100 MG, 150 MG, 200 MG, 250 MG 9
TAPENTADOL HCL SOLN PO 20 MG/ML 9
tapentadol hcl TABS 50 MG, 75 MG,

100 MG 9
TARON-C DHA 179
TASCENSO ODT 193
TASIGNA 50 MG, 150 MG, 200 MG (Use nilotinib hcl) 39
tasimelteon CAPS 85
TAVNEOS 81
tazarotene CREA 56
TAZAROTENE FOAM 54
tazarotene GEL 56
TDVAX SUSP 195
TECFIDERA CDPK (Use dimethyl fumarate) 193
TECFIDERA CPDR (Use dimethyl fumarate) 193
TECHLITE INSULIN SYRINGE 126
TECHLITE LANCETS 119
TECHLITE LANCETS 26G 119
TEGRETOL SUSP (Use carbamazepine) 18
TEGRETOL TABS (Use carbamazepine) 18
TEGRETOL-XR TB12 (Use carbamazepine) 18
telmisartan 32
telmisartan-amlodipine 33
telmisartan-hydrochlorothiazide 33
temazepam 22.5 MG 85
temazepam 7.5 MG, 15 MG, 30 MG 85
TEMODAR SOLR 34
temozolomide CAPS 100 MG, 140 MG, 180 MG, 250 MG 34
temozolomide CAPS 34
TEMPO SMART BUTTON MISC 119
TEMPO WELCOME KIT 119
tenofovir disoproxil fumarate TABS 44
TENORETIC 100 (Use atenolol & chlorthalidone) 33
TENORETIC 50 (Use atenolol & chlorthalidone) 33
TENORMIN TABS (Use atenolol) 46
TEPMETKO 39
terazosin hcl 32
terbinafine hcl (topical) CREA 55
terbutaline sulfate TABS 15
terconazole vaginal CREA 0.4 % 198
terconazole vaginal CREA 0.8 % 198
terconazole vaginal SUPP 198
teriflunomide 193
teriparatide SOPN 75
TERIPARATIDE SOPN 75
TESTIM GEL TD (Use testosterone) 10
testosterone cypionate SOLN IM 100 MG/ML 10
testosterone cypionate SOLN IM 200 MG/ML 10
TESTOSTERONE CYPIONATE SOLN IM 200 MG/ML 10
testosterone enanthate SOLN IM 10
testosterone GEL TD 1 %, 1.62 % 10
testosterone GEL TD 1 %, 10 MG/ACT, 20.25 MG/1.25GM, 25 MG/2.5GM, 40.5 MG/2.5GM, 50 MG/5GM 10
testosterone SOLN 10
TETANUS-DIPHTHERIA TOXOIDS TD SUSP 195
tetrabenazine 191
tetracaine hcl (ophth) 186
TETRACAINE HCL 0.5 % 186
tetracycline hcl CAPS 500 MG 194
tetrahydrozoline hcl (ophth) 0.05 % 186
TEZRULY PO 1 MG/ML 32
TEZSPIRE SOAJ 13
TEZSPIRE SOSY 13
THALOMID 50 MG, 100 MG 133
THEO-24 CP24 15
theophylline ELIX 15
theophylline SOLN 16
theophylline TB12 16
theophylline TB24 16
THERA TABS 176
THERA VITAL M TABS 90 MG-3 MG-30 MCG-0.4 MG-3 MG-9 MCG-10 MG-3.4 MG-20 MG-2500 UNIT-400 UNIT-30 UNIT-2500 UNIT-27 MG-100 MG-5 MG-15 MCG-7.5 MG-15 MCG-2 MG-15 MG-40 MG-150 MCG-31 MG-10 MCG-7.5 MG 169
THERA VITAL-M TABS 120 MG-3 MG-15 MCG-400 MCG-400 UNIT-9 MCG-3.4 MG-30 MG-5500 UNIT-10 MG-18 MG-3 MG-100 MG-15 MG-2 MG-40 MG-7.5 MG-15 MCG-150 MCG-30 UNIT-31 MG-5 MG-15 MCG-10 MCG 169
THERA-M PLUS MV W/BETA-

CAROT TABS 169

THERA-TABS M TABS 169

THERA-TABS TABS 90 MG-3 MG-30 MCG-400 MCG-3 MG-20 MG-400 UNIT-9 MCG-5000 UNIT-10 MG-3.4 MG-30 UNIT 176

THERA-VITE MAX-M TABS 169

THERABASIC-M TABS 400 UNIT-90 MG-3 MG-35 MCG-0.4 MG-9 MCG-10 MG-3.4 MG-30 MG-5000 UNIT-27 MG-3 MG-100 MG-1250 UNIT-15 MCG-7.5 MG-15 MCG-40 MG-15 MG-150 MCG-30 UNIT-31 MG-2 MG-10 MCG-5 MG-7.5 MG 169

THERAGAUZE PADS 89

THERAGRAN-M ADVANCED 50 PLUS TABS 169

THERAGRAN-M ADVANCED TABS . 169

THERAGRAN-M PREMIER 50 PLUS TABS 169

THERAGRAN-M PREMIER TABS 169

THERAGRAN-M TABS 169

THERAMILL FORTE CAPS 169

THERANATAL LACTATION ONE CAPS 169

THERAPEUTIC FORMULA/HEMATINICS TABS 3.3 MG-0.33 MG-50 MCG-3.3 MG-33.3 MG-100 MG-11.7 MG-66.7 MG-3.3 MG-41.7 MG-140 UNIT-5 UNIT-0.67 MG-1400 UNIT 169

THERAPEUTIC-M TABS 90 MG-2 MG-30 MCG-400 MCG-1.5 MG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-9 MG-60 MG-2 MG-15 MCG-8 MG-15 MCG-2 MG-15 MG-40 MG-150 MCG-10 MCG-30 UNIT-8 MG, 90 MG-30 MCG-400 MCG-3 MG-20 MG-6 MG-10 MG-3.4 MG-10 MCG-27 MG-9 MG-100 MG-2 MG-75 MCG-11 MG-2 MG-10 MCG-150 MCG-50 MCG-2 MG-10 MCG-15 MG-145 MG-150 MCG-35 MG-70 MCG-1500 MCG-28 MCG-12 MCG-8 MG 170

THERATRUM COMPLETE 50 PLUS TABS 60 MG-3 MG-30 MCG-400 MCG-400 UNIT-25 MCG-1.7 MG-10 MCG-20 MG-250 MCG-3500 UNIT-10 MG-300 MCG-1.5 MG-100 MG-15 MG-150 MCG-200 MG-80 MG-75 MCG-150 MCG-48 MG-2 MG-5 MCG-2 MG-150 MCG-45 UNIT-20 MCG-10 MCG-72 MG-2 MG 170

THERATRUM COMPLETE TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-250 MCG-5000 UNIT-10 MG-18 MG-1.5 MG-100 MG-15 MG-80 MG-2 MG-150 MCG-162 MG-150 MCG-75 MCG-30 UNIT-108 MG-2 MG-72 MG-5 MCG-10 MCG-2 MG-120 MCG-25 MCG-20 MCG-10 MCG, 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-250 MCG-3500 UNIT-10 MG-18 MG-300 MCG-1.5 MG-100 MG-15 MG-80 MG-150 MCG-162 MG-72 MG-75 MCG-150 MCG-30 UNIT-109 MG-2 MG-5 MCG-10 MCG-2 MG-120 MCG-20 MCG-10 MCG-2 MG 170

THEREMS TABS 176

thiamine hcl TABS 199

thiamine mononitrate TABS 100 MG . 200

thioridazine hcl 42

thiothixene 43

THRESHOLD PEP DEVI 130

THRIVE FOR LIFE WOMENS TABS 60 MG-6 MG-300 MCG-400 MCG-1000 UNIT-18 MCG-5.1 MG-60 MCG-20 MG-100 MCG-3500 UNIT-15 MG-18 MG-500 MG-700 MCG-4.5 MG-50 MG-15 MG-75 MCG-150 MCG-30 UNIT-2 MG-2 MG-70 MCG-120 MCG-150 MCG 170

THRIVITE RX TABS 179

THYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG 194

tiagabine hcl 19

TIBSOVO 39

ticagrelor 60 MG, 90 MG 81

timolol 185

timolol maleate (ophth) SOLG 185

timolol maleate (ophth) SOLN 185

timolol maleate TABS 46

TIMOPTIC OCUDOSE SOLN (Use timolol maleate (ophth)) 185

tioconazole vaginal 6.5 % 198

tiotropium bromide CAPS IN 18 MCG 14

TIVICAY PD TBSO 44

TIVICAY TABS 50 MG 44

tizanidine hcl CAPS 180

tizanidine hcl TABS 180

TLANDO CAPS 10

TM-DAILY VITE TABS 176

TOBI NEBU (Use tobramycin) 4

TOBI PODHALER CAPS 4

TOBRADEX OINT 187

TOBRADEX ST SUSP 187
tobramycin (ophth) SOLN 186
tobramycin NEBU 4
tobramycin sulfate SOLN IJ 1.2 GM/30ML, 2 GM/50ML, 10 MG/ML, 80 MG/2ML 4
tobramycin sulfate SOLR 4
tobramycin-dexamethasone SUSP 187
TOBREX OINT 186
tofacitinib citrate SOLN 1 MG/ML ... 5
tofacitinib citrate TABS 5 MG, 10 MG 5
tofacitinib citrate TB24 11 MG, 22 MG 5
TOFIDENCE 6
TOLECTIN DS CAPS 400 MG (Use tolmetin sodium) 7
tolmetin sodium CAPS 7
tolmetin sodium TABS 7
tolnaftate CREA 55
tolterodine tartrate CP24 196
tolterodine tartrate TABS 196
tolvaptan TBPK 15 MG 76
TONMYA SUBL SL 2.8 MG 191
TOPAMAX SPRINKLE CPSP (Use topiramate) 18
TOPAMAX TABS 100 MG (Use topiramate) 18
TOPAMAX TABS 25 MG, 50 MG, 200 MG (Use topiramate) 18
TOPICORT CREA (Use desoximetasone) 58
TOPICORT GEL (Use desoximetasone) 58
TOPICORT OINT (Use desoximetasone) 58
TOPICORT SPRAY LIQD (Use desoximetasone) 58
topiramate CP24 19
topiramate CPSP 15 MG, 25 MG .. 19
topiramate CPSP 50 MG 19
topiramate CS24 19
topiramate SOLN 25 MG/ML 19
topiramate TABS 100 MG 19
topiramate TABS 25 MG, 50 MG, 200 MG 19
TOPPER DRESSING SPONGES MISC 89
TOPROL XL TB24 (Use metoprolol succinate) 46
toremifene citrate 36
torsemide TABS 74
TOSYMRA 132
TOUJEO MAX SOLOSTAR SOPN 26
TOUJEO SOLOSTAR SOPN 26
TOVIAZ (Use fesoterodine fumarate) 196
TRACLEER TABS (Use bosentan) 48
TRACLEER TBSO 32 MG (Use bosentan) 48
TRADJENTA 23
tramadol hcl CP24 100 MG, 200 MG, 300 MG 9
TRAMADOL HCL SOLN (Use tramadol hcl) 9
tramadol hcl SOLN 9
tramadol hcl TABS 25 MG, 75 MG, 100 MG 9
tramadol hcl TABS 50 MG 9
tramadol hcl TB24 9
tramadol-acetaminophen 9
trandolapril 32
trandolapril-verapamil hcl 33
tranexamic acid TABS 84
tranylcypromine sulfate 20
TRAVATAN Z SOLN (Use travoprost) 188
TRAVEL LANCETS ADVANCED 28G 119
travoprost SOLN 188
TRAZODONE HCL TABS 25 MG, 75 MG 21
trazodone hcl TABS 21
TRELEGY ELLIPTA 15
TRELSTAR MIXJECT 11.25 MG, 22.5 MG 36
TRELSTAR MIXJECT 3.75 MG ... 36
TREMFYA ONE-PRESS SOPN SC 100 MG/ML 56
TREMFYA PEN SOAJ 100 MG/ML, 200 MG/2ML 56
TREMFYA SOLN IV 78
TREMFYA SOSY SC 78
TREMFYA-CD/UC INDUCTION SOAJ SC 200 MG/2ML 78
TRESIBA FLEXTOUCH SOPN 26
TRESIBA SOLN 26

tretinoin (chemotherapy) 39

tretinoin CREA 0.025 %, 0.05 %, 0.1 % 54

tretinoin GEL 0.01 %, 0.025 % 54

tretinoin GEL 0.05 % 54

tretinoin microsphere 0.06 %, 0.08 % 54

TRETTEN 81

TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG 34

TREXION CAPS 170

TREXVIA CAPS 170

TRI-VI-FLOR SUSP 0.25 MG/ML 177

TRI-VITAMIN WITH FLUORIDE SUSP 0.25 MG/ML 177

triamcinolone acetonide (mouth) 134

triamcinolone acetonide (nasal) AERO 181

triamcinolone acetonide (topical) CREA 59

triamcinolone acetonide (topical) LOTN 59

triamcinolone acetonide (topical) OINT 59

triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG 74

triamterene & hydrochlorothiazide TABS 74

triazolam 85

TRIBENZOR (Use olmesartan medoxomil-amlodipine-hydrochlorothiazide) 33

TRICARE TABS 179

TRIESENCE 187

trifluoperazine hcl TABS 42

trifluridine 186

trihexyphenidyl hcl SOLN 40

trihexyphenidyl hcl TABS 40

TRIJARDY XR 23

TRIKAFTA TBPK 194

TRIKAFTA THPK 194

TRILEPTAL SUSP (Use oxcarbazepine) 19

TRILEPTAL TABS (Use oxcarbazepine) 19

trimethoprim TABS 11

trimipramine maleate CAPS 22

TRINATAL RX 1 TABS 179

TRINTELLIX 21

TRIPHROCAPS CAPS 1 MG 135

TRIPTODUR 76

TRISTART DHA 179

TRIUMEQ PD TBSO 44

TRIUMEQ TABS 44

TROGARZO 44

TROJAN BARESKIN DEVI 89

TROJAN MAGNUM MISC 89

TROJAN ULTRA THIN DEVI 89

TROJAN ULTRA THIN MISC 89

TROJAN ULTRA THIN/SPERMICIDAL MISC 89

TROJAN-ENZ LUBRICATED MISC 89

TROJAN-ENZ/SPERMICIDAL MISC . 89

TROKENDI XR CP24 (Use topiramate) 19

trolamine salicylate CREA 60

TROPICAL LIQUID NUTRITION LIQD 90 MG/15ML-3 MG/15ML-150 MCG/15ML-45 UNIT/15ML-300 MCG/15ML-2.25 MG/15ML-600 UNIT/15ML-18 MCG/15ML-5250 UNIT/15ML-2.55 MG/15ML-45 MG/15ML-15 MG/15ML-15 MG/15ML-75 MG/15ML-112.5 MCG/15ML-37 MG/15ML 171

tropicamide SOLN 185

trospium chloride CP24 196

trospium chloride TABS 196

TRUE COMFORT INSULIN SYRINGE 126

TRUE COMFORT PRO INSULIN SYR 126

TRUE COMFORT SAFETY LANCETS 119

TRUE COMFORT TWIST TOP LANCETS 119

TRUE COVER DEVI 89

TRUE DAILY VITE TABS 60 MG-400 MCG-1.5 MG-20 MG-2 MG-1.7 MG-10 MCG-1500 MCG-6 MCG 176

TRUE METRIX AIR GLUCOSE METER KIT 119

TRUE METRIX BLOOD GLUCOSE TEST STRP 73

TRUE METRIX GO GLUCOSE METER KIT 119

TRUE METRIX LEVEL 1 SOLN .. 119

TRUE METRIX LEVEL 2 SOLN .. 119

TRUE METRIX LEVEL 3 SOLN .. 119

TRUE METRIX METER DEVI 119

TRUE METRIX METER KIT 119
TRUE METRIX PRO BLOOD GLUCOSE STRP 73
TRUE MULTIVITAMIN TABS 176
TRUEDRAW LANCING DEVICE MISC 119
TRUENESS BLOOD GLUCOSE MONITOR DEVI 119
TRUENESS BLOOD GLUCOSE STRIPS STRP 73
TRUEONE TABS 176
TRUEPLUS GLUCOSE CHEW 23
TRUEPLUS GLUCOSE ON THE GO CHEW 23
TRUEPLUS INSULIN SYRINGE 126
TRUEPLUS LANCETS 28G 120
TRUEPLUS LANCETS 30G 120
TRUEPLUS LANCETS 33G 120
TRUEPLUS SAFETY LANCETS 28G 120
TRUERESULT BLOOD GLUCOSE KIT 120
TRUETEST TEST STRP 73
TRUETRACK BLOOD GLUCOSE KIT 120
TRUETRACK SMART SYSTEM KIT . 120
TRUETRACK TEST STRP 73
TRUEVITE TABS 171
TRULICITY 25
TRUMENBA 0.5 ML 197
TRUQAP TABS 39
TRUQAP TBPK 39
TRUSTEX COLOR CONDOMS + LUBE MISC 90
TRUSTEX LUB/RIBBED/STUDDED MISC 90
TRUSTEX LUB/SPERMICIDE EX ST MISC 90
TRUSTEX LUB/SPERMICIDE XL MISC 90
TRUSTEX LUBRICATED EX LARGE MISC 90
TRUSTEX LUBRICATED EXTRA ST MISC 90
TRUSTEX LUBRICATED MISC ...90
TRUSTEX LUBRICATED/SPERMICIDE MISC 90
TRUSTEX NATURAL CONDOMS + LUBE MISC 90
TRUSTEX RIA LUB/SPERMICIDE MISC 90
TRUSTEX RIA LUBRICATED MISC . 90
TRUSTEX-NONOXYNOL-9/RIB/STUD MISC 90
TRYNGOLZA 76
TRYPTYR SOLN OP 0.003 % ... 188
TRYVIO 33
TUDORZA PRESSAIR 14
TUKYSA 34
TURALIO 125 MG 39
TWIIST REFILL KIT KIT 120
TWIIST REFILL KIT/INFUSION SET KIT 120
TWIIST STARTER KIT KIT 120
TWINRIX SUSY 198
TWIRLA 50
TWIST TOP LANCETS 30G 120
TWYNEO 54
TYBLUME CHEW 50
TYBOST 44
TYENNE SOAJ 6
TYENNE SOLN 6
TYENNE SOSY 6
TYKERB (Use lapatinib ditosylate) 39
TYMLOS 75
TYRUKO CONC IV 300 MG/15ML 193
TYRVAYA 185
TYSABRI 193
TYVASO DPI INSTITUTIONAL KIT POWD 47
TYVASO DPI MAINTENANCE KIT POWD 47
TYVASO DPI TITRATION KIT POWD 47
TYVASO REFILL KIT SOLN IN ...47
TYVASO SOLN IN 47
TYVASO STARTER KIT SOLN IN .47
TZIELD 23
UBRELVY 130
UDAMIN SP TABS 12.5 MG-1000 MCG-250 MCG-2.5 MG-17 MG-7.5 MG-100 MCG-75 UNIT-320 MG . 171
UDENYCA ONBODY SOSY 84
UDENYCA SOAJ 84

UDENYCA SOSY 84
ULORIC (Use febuxostat) 80
ULTI-LANCE AUTOMATIC MISC 120
ULTICARE INSULIN SAFETY SYR . 126
ULTICARE INSULIN SYRINGE . 126
ULTIGUARD SAFEPACK SYR/NEEDLE 126
ULTILET CLASSIC LANCETS ...120
ULTILET LANCETS 120
ULTILET SAFETY LANCETS 23G 120
ULTRA BONEUP TABS 171
ULTRA FLO INSULIN SYR 1/2 UNIT 126
ULTRA FLO INSULIN SYRINGE 126
ULTRA FREEDA TABS 133.333 UNIT-16.667 MG-100 MCG-266.667 MCG-16.667 MG-33.333 MCG-1666.667 UNIT-16.667 MG-33.333 MG-33.333 MG-333.333 MG-3.333 MG-33.333 MG-11.667 MG-7.5 MG-83.333 MG-50 MCG-33.333 MCG-33.333 MG-66.667 UNIT-4.167 MCG-66.667 MCG 171
ULTRA FREEDA/IRON TABS 133.333 UNIT-1666.667 UNIT-16.667 MG-100 MCG-66.667 UNIT-266.667 MCG-16.667 MG-33.333 MCG-16.667 MG-33.333 MG-33.333 MG-6 MG-333.333 MG-3.333 MG-33.333 MG-4.167 MCG-11.667 MG-66.667 MCG-7.5 MG-83.333 MG-50 MCG-33.333 MCG-33.333 MG ...171
ULTRA MULTI FORMULA/IRON CAPS 40 MG-1.333 MG-200 MCG-266.667 MCG-4 MG-1000 UNIT-33.333 MCG-1.133 MG-3.333 MG-3.333 MG-16.667 MG-3333.333 UNIT-6.667 MG-15 MG-33.333 MG-10 MG-10 UNIT-133.333 MG-50 MCG-0.667 MG-40 MCG-10 MG-25 MCG-5 MG-10 MG-1 MG-23.333 MCG-10 MG 171
ULTRA THIN LANCETS 31G 120
ULTRA-CARE LANCETS 30G ...120
ULTRA-THIN II INS SYR SHORT 126
ULTRA-THIN II INSULIN SYRINGE . 126
ULTRA-THIN II LANCETS 121
ULTRACARE INSULIN SYRINGE 126
ULTRACHOICE ADV FORMULA MATURE TABS 120 MG-6 MG-60 MCG-400 MCG-4.5 MG-400 UNIT-24 MCG-10 MG-5.1 MG-40 MG-275 MCG-18 MG-300 MCG-100 MG-15 MG-3.5 MG-0.5 MG-100 MG-2 MG-13 MCG-1 MG-200 MCG-165 MG-150 MCG-200 MCG-60 UNIT-80 MG-6.5 MCG-10 MG-2 MG-7.5 MG-5000 UNIT-80 MCG-200 MCG-90 MG-13 MCG-2 MG-5 MG-25 MG-10 MG-1 MG-0.5 MG-1 MG-25 MG-1 MG-1 MG 171
ULTRACHOICE ADVANCED FORMULA TABS 120 MG-6 MG-60 MCG-400 MCG-4.5 MG-400 UNIT-18 MCG-10 MG-5.1 MG-40 MG-275 MCG-18 MG-300 MCG-100 MG-15 MG-3.5 MG-80 MG-2 MG-13 MCG-200 MCG-200 MCG-165 MG-150 MCG-200 MCG-60 UNIT-80 MG-6.5 MCG-10 MG-5 MG-7.5 MG-5000 UNIT-80 MCG-200 MCG-72 MG-13 MCG-10 MG-25 MG-5 MG-10 MG-25 MG-5 MG-1 MG 171
ULTRAVATE LOTN 59
umeclidinium bromide 62.5 MCG/INH 14
umeclidinium-vilanterol 15
UNILET COMFORTOUCH LANCET 121
UNILET G.P. SUPERLITE LANCET . 121
UNILET GP 28 ULTRA THIN 121
UNILET LANCET 121
UNILET MICRO-THIN 33G 121
UNILET SUPER-THIN 30G 121
UNILET ULTRA-THIN 28G 121
UNISTIK 2 121
UNISTIK 2 COMFORT 121
UNISTIK 2 EXTRA 121
UNISTIK 2 NORMAL 121
UNISTIK 2 SUPER 121
UNISTIK 3 COMFORT 121
UNISTIK 3 EXTRA 122
UNISTIK 3 GENTLE 122
UNISTIK 3 NEONATAL 122
UNISTIK 3 NORMAL 122
UNISTIK CZT COMFORT 122
UNISTIK CZT NORMAL 122
UNISTIK NORMAL 122
UNISTIK PRO SAFETY LANCET 122
UNISTIK SAFETY LANCETS 28G 122
UNISTIK SAFETY LANCETS 30G

122

UNISTIK TOUCH SAFETY LANC 21G 122

UNISTIK TOUCH SAFETY LANC 23G 122

UNISTIK TOUCH SAFETY LANC 28G 122

UNISTIK TOUCH SAFETY LANC 30G 122

UNISTRIP CONTROL SOLN 123

UNISTRIP1 GENERIC STRP 73

UPLIZNA 134

UPTRAVI SOLR 48

UPTRAVI TABS 48

UPTRAVI TITRATION TBPK 48

urea CREA 40 % 59

urea LOTN 40 % 59

URETRON D/S TABS 81.6 MG ... 11

ursodiol CAPS 77

ursodiol TABS 250 MG 77

USTEKINUMAB 130 MG/26ML 78

USTEKINUMAB SOSY 45 MG/0.5ML, 90 MG/ML 56

USTEKINUMAB-AAUZ SOSY SC 45 MG/0.5ML, 90 MG/ML 56

USTEKINUMAB-AEKN SOSY SC 45 MG/0.5ML, 90 MG/ML 56

USTEKINUMAB-TTWE 56

USTEKINUMAB-TTWE SC 56

UZEDY SUSY 41

V-GO 20 KIT 123

V-GO 30 KIT 123

V-GO 40 KIT 123

VAFSEO 150 MG 84

VAFSEO 300 MG 84

valacyclovir hcl 45

VALCHLOR 55

VALENTRA TABS 176

valganciclovir hcl TABS 45

valproate sodium SOLN PO 250 MG/5ML, 500 MG/10ML 20

valproic acid CAPS 20

valsartan SOLN 32

valsartan TABS 32

valsartan-hydrochlorothiazide 33

VALTOCO 10 MG DOSE LIQD 17

VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML 17

VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML 17

VALTOCO 5 MG DOSE LIQD 17

VALTREX (Use valacyclovir hcl) ..45

VANALICE GEL 63

vancomycin hcl CAPS 125 MG 11

vancomycin hcl CAPS 250 MG 11

vancomycin hcl SOLR IV 1 GM 11

VANCOMYCIN HCL SOLR IV 1 GM . 11

vancomycin hcl SOLR IV 500 MG .11

VANCOMYCIN HCL SOLR IV 500 MG 11

vancomycin hcl SOLR PO 25 MG/ML, 50 MG/ML, 250 MG/5ML .11

VANDAZOLE 198

VANFLYTA 39

VANISHPOINT INSULIN SYRINGE . 126

VANTREX TABS 176

VAQTA 198

varenicline tartrate TABS 193

varenicline tartrate TBPK 193

VARIVAX SUSR 198

VARIZIG SOLN 189

VAXELIS SUSP 195

VAXELIS SUSY 195

VAXNEUVANCE 197

VELPHORO 79

VELSIPITY 78

VELTASSA 1 GM, 8.4 GM, 16.8 GM . 134

VENCLEXTA STARTING PACK TBPK 35

VENCLEXTA TABS 35

VENEXA FE TABS 172

VENEXA TABS 172

VENLAFAXINE BESYLATE ER ..21

venlafaxine hcl CP24 21

venlafaxine hcl TABS 22

venlafaxine hcl TB24 22

VENTOLIN HFA AERS (Use albuterol sulfate) 15

VENTRIXYL FE TABS 172

VENTRIXYL TABS 172

VEOZAH 76

VEPESID CAPS (Use etoposide) ..39

VEPPANU TABS PO 100 MG, 200 MG 36
verapamil hcl CP24 47
VERAPAMIL HCL ER CP24 (Use verapamil hcl) 47
verapamil hcl SOLN 2.5 MG/ML ...47
verapamil hcl TABS 47
verapamil hcl TBCR 47
VERELAN PM CP24 (Use verapamil hcl) 47
VERIFINE INSULIN SYRINGE ..126
VERIFINE SAFE LANCET MINI 21G 123
VERIFINE SAFE LANCET MINI 23G 123
VERIFINE SAFE LANCET MINI 28G 123
VERIFINE SAFE LANCET MINI 30G 123
VERIFINE UNIVERSAL LANCETS 28G 123
VERIFINE UNIVERSAL LANCETS 30G 123
VERIFINE UNIVERSAL LANCETS 33G 123
VERISAFE SAFETY INSULIN SYR . 126
VERKAZIA EMUL 186
VERQUVO 49
VERSACLOZ SUSP 42
VERSAPAP DEVI 130
VERSAPAP W/UNIVERSAL TUBING DEVI 130
VERZENIO 39
VEVYE SOLN 186
VIBERZI 79
VIC-FORTE CAPS 150 MG-2 MG-1 MG-10 MCG-8000 UNIT-5 MG-25 MG-10 MG-10 MG-50 UNIT-80 MG-70 MG-4 MG 172
VICTOZA (Use liraglutide) 25
vigabatrin PACK 19
vigabatrin TABS 19
VIGAFYDE SOLN 19
VIGAMOX SOLN OP (Use moxifloxacin hcl (ophth)) 186
VIIBRYD TABS (Use vilazodone hcl) 21
VIJOICE TBPK 134
vilazodone hcl TABS 21
VILTEPSO 183
VIMPAT SOLN PO 10 MG/ML (Use lacosamide) 19
VIMPAT TABS (Use lacosamide) ..19
VIOKACE TABS 73
VIRACEPT TABS 250 MG 44
VIRACEPT TABS 625 MG 44
VIREAD POWD 44
VIREAD TABS 150 MG, 200 MG, 250 MG 44
VIRELIX TABS 176
VIREXA TABS 176
VISION FORMULA 2 CAPS 250 MG-5 MG-1 MG-10 MG-1 MG-90 MG 172
VISION FORMULA/LUTEIN TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG 172
VISION HEALTH CAPS 172
VISION OPTIMIZER CAPS 172
VISION VITAMINS TABS 60 MG-40 MG-2 MG-30 UNIT-5000 UNIT-40 MCG 172
VISTA ADVANCED AREDS2 FORMULA CAPS 172
VISTA ADVANCED DRY EYE FORMULA CAPS 172
VIT E-VIT C-BETA CAROTENE TABS 250 MG-5000 UNIT-200 UNIT 176
VITA HAIR TABS 300 MCG-400 MCG-35 MG-6 MCG-100 MG-125 MG-65 MG-30 MG-18 MG-5 MG-2 MG-15 MG-150 MCG 172
VITA S FORTE TABS 400 UNIT-500 MG-25 MG-0.15 MG-1 MG-50 MCG-25 MG-20 MG-100 MG-10 MG-20 MG-50 MG-15 MG-3 MG-20 MCG-60 UNIT-50 MCG-0.05 MG 172
VITA-MIN CAPS 85 MG-1.7 MG-42.3 MCG-8.3 UNIT-255 MCG-106.3 UNIT-3.3 MCG-5.7 MG-1 MG-11.3 MG-1 MG-42.3 MG-56.7 MG-2.7 MG-4.3 MCG-56.7 MG-14 MCG-4.3 MG-42.3 MCG-14 MCG-2973 UNIT ..172
VITABASIC COMPLETE TABS ..172
VITABASIC SENIOR TABS 172
VITABEX CAPS 172
VITABEX PLUS CAPS 172
VITACEL TABS 500 MG-300 MCG-100 UNIT-1 MG-25 MG-25 MG-25 MG-50 MG-5000 UNIT-25 MG-33 MG-200 UNIT-125 MG-80 MG-10 MG-50 MCG 172
VITACORE TABS 172
VITAFOL FE+ 179

VITAFOL GUMMIES 179
VITAFOL ULTRA 179
VITAFOL-OB TABS 179
VITAFOL-OB+DHA MISC 179
VITAFOL-ONE CAPS 179
VITALEE TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-3000 UNIT-10 MG-1.5 MG-30 UNIT 176
VITALUX TABS 172
vitamin a CAPS 10000 UNIT, 3 MG, 3000 MCG, 10000 UNIT 199
vitamin a TABS 10000 UNIT 199
VITAMIN D3 LIQD PO 125 MCG/ML .199
vitamin e CAPS 199
VITAMIN E CAPS 199
vitamin e SOLN 15 MG/0.67ML ..199
VITAMIN E SOLN 15 MG/0.67ML 199
VITAMIN E/D-ALPHA CAPS 200 UNIT 199
VITAMINS A-D-E/SELENIUM TABS 400 UNIT-10000 UNIT-100 UNIT-50 MCG 172
vitamins w/ lipotropics CAPS 180
VITAROCA PLUS TABS 500 MG-25 MG-0.15 MG-0.8 MG-50 MCG-20 MG-100 MG-5000 UNIT-25 MG-27 MG-20 MG-50 MG-5 MG-22.5 MG-3 MG-30 UNIT-0.1 MG 172
VITASANA TABS 172
VITASCRIPT TABS 172
VITEYES AREDS 2 FORMULA +COQ10 CAPS 172
VITEYES AREDS 2 FORMULA +MULTI CAPS 172
VITEYES AREDS 2 FORMULA CAPS 173
VITEYES AREDS 2 FORMULA MINI CAPS 173
VITEYES CLASSIC ADVANCED CAPS 173
VITEYES CLASSIC MACULAR SUPPOR CAPS 173
VITEYES CLASSIC MULTIVITAMIN TABS 173
VITEYES CLASSIC+OMEGA-3 CAPS 173
VITEYES COMPLETE CAPS 83.3 MG-16.7 MG-50 MCG-133.3 MCG-3.3 MG-25 MG-66.7 UNIT-833.3 UNIT-1.67 MG-16.7 MCG-41.7 MG-83.3 MG-1.67 MG-8.3 MG-0.67 MG-3.3 MG-0.5 MG-0.33 MG-4 MG-33.3 MG-33.3 MCG-66.7 UNIT-0.83 MG-33.3 MG-20.8 MCG-1.67 MCG-16.5 MG-0.33 MG-33.3 MCG-33.3 MG-16.7 MCG-6.7 MG-83.3 MG-166.7 MCG-33.3 MCG-20 MG-6.7 MG-20 MG-33.3 MG 173
VITEYES OPTIC NERVE SUPPORT TABS 173
VITRAKVI CAPS 39
VITRAKVI SOLN 39
VITRAMYN TABS 173
VITRANOL FE TABS 173
VITRANOL TABS 173
VITRAX TABS 176
VITREXATE FE TABS 173
VITREXATE TABS 173
VITREXYL + IRON TABS 173
VITREXYL TABS 173
VITRION TABS 177
VIVAGUARD INO CONTROL SOLUTION LIQD 123
VIVAGUARD INO GLUCOSE METER DEVI 123
VIVAGUARD INO GLUCOSE METER KIT 123
VIVAGUARD INO SMART GLUC METER DEVI 123
VIVAGUARD INO TEST STRIPS STRP 73
VIVAGUARD LANCETS 123
VIVAGUARD LANCETS 30G 123
VIVAGUARD LANCING DEVICE MISC 124
VIVAGUARD SAFETY LANCETS 28G 124
VIVARA MVC CAPS 173
VIVARA MVD CAPS 173
VIVARA MVM CAPS 173
VIVITROL 27
VIVJOA 29
VIZIMPRO 35
VOGELXO GEL TD (Use testosterone) 10
VOGELXO PUMP GEL TD (Use testosterone) 10
VONJO 39
VONVENDI 81
VOQUEZNA DUAL PAK 196
VOQUEZNA TRIPLE PAK 196
VORANIGO 39

VORTEX HOLD CHMBR/MASK/CHILD DEVI 130
VORTEX HOLD CHMBR/MASK/TODDLER DEVI . 130
VORTEX VALVE CHAMBER-PEDI MASK DEVI 130
VORTEX VALVED HOLDING CHAMBER DEVI 130
VOSEVI 45
VOTRIENT (Use pazopanib hcl) .. 39
VOXZOGO 76
VOYDEYA TABS 81
VOYDEYA TBPK 81
VPRIV 82
VRAYLAR CAPS 41
VTAMA 56
VUITY SOLN 1.25 % (Use pilocarpine hcl) 185
VUMERITY 193
VYALEV SOLN SC 40
VYEPTI 130
VYJUVEK 63
VYNDAMAX 48
VYNDAQEL 48
VYONDYS 53 183
VYSCOXA PO 10 MG/ML 7
VYTORIN (Use ezetimibe-simvastatin) 30
VYVANSE CAPS (Use lisdexamfetamine dimesylate) 1
VYVANSE CHEW (Use lisdexamfetamine dimesylate) 1
VYVGART 133
VYVGART HYTRULO 133
VYVGART HYTRULO SC 133
VYZULTA 188
WAINUA 193
WAINUA SC 45 MG/0.8ML 193
WAKIX 2
warfarin sodium TABS 16
WEGOVY 0.25 MG/0.5ML, 0.5 MG/0.5ML, 1 MG/0.5ML 1
WEGOVY 1.7 MG/0.75ML, 2.4 MG/0.75ML 2
WEGOVY PO 1.5 MG, 4 MG, 9 MG, 25 MG 2
WELCHOL PACK (Use colesevelam hcl) 30
WELCHOL TABS (Use colesevelam hcl) 30
WELIREG 36
WELLBUTRIN SR TB12 (Use bupropion hcl) 20
WELLFOLA TABS 173
WES-PHOS 250 NEUTRAL 852 MG-155 MG-130 MG 132
WESCAP-C DHA 179
WESCAP-PN DHA 179
WESNATAL DHA COMPLETE .. 179
WESNATE DHA CAPS 179
WESTAB PLUS TABS 179
WESTGEL DHA 180
white petrolatum-mineral oil 185
WIDE-SEAL DIAPHRAGM 60 90
WIDE-SEAL DIAPHRAGM 65 90
WIDE-SEAL DIAPHRAGM 70 90
WIDE-SEAL DIAPHRAGM 75 90
WIDE-SEAL DIAPHRAGM 80 90
WIDE-SEAL DIAPHRAGM 85 90
WIDE-SEAL DIAPHRAGM 90 90
WIDE-SEAL DIAPHRAGM 95 90
WILATE KIT 81
WINLEVI 54
WINREVAIR 48
WOMENS 50+ ADVANCED CAPS 72 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-9.5 MG-2500 UNIT-20 MG-21 MG-10 MG-100 MCG-234 MCG-4.5 MG-4 MG-22.5 MG-2 MG-16 MG-150 MCG-150 MCG-33 UNIT-5 MCG-10 MCG-180 MCG-105 MCG-552 MCG-6 MG-10 MCG-2 MG-4 MG-90 MCG 173
WOMENS 50+ MULTI VITAMIN TABS 173
WOMENS DAILY FORMULA TABS 60 MG-2 MG-30 MCG-400 MCG-1000 UNIT-6 MCG-1.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-500 MG-1.5 MG-50 MG-15 MG-22.5 UNIT-2 MG-2 MG-120 MCG-20 MCG 173
WOMENS LIFE PACK TABS 400 MCG-400 UNIT-25 MCG-10 MG-10 MG-250 MCG-3500 UNIT-18 MG-10 MG-300 MCG-2 MG-80 MG-150 MCG-0.75 MCG-150 MCG-30 UNIT-109 MG-2 MG-5 MCG-10 MCG-120 MCG-20 MCG-10 MCG-72 MG-2 MG-30 MG, 400 UNIT-25 MCG-10 MG-10 MG-250 MCG-3500 UNIT-18 MG-10 MG-300 MCG-2 MG-150 MCG-75 MCG-150 MCG-30 UNIT-

109 MG-2 MG-5 MCG-10 MCG-2 MG-120 MCG-20 MCG-10 MCG . 173

WOMENS MULTI CAPS 72 MG-4 MG-30 MCG-600 MCG-1000 UNIT-15 MCG-1.7 MG-20 MCG-20 MG-9.5 MG-2500 UNIT-20 MG-18 MG-21 MG-10 MG-100 MCG-234 MCG-3 MG-4 MG-15 MG-2 MG-16 MG-150 MCG-150 MCG-33 UNIT-5 MCG-10 MCG-120 MCG-70 MCG-552 MCG-6 MG-10 MCG-2 MG-2 MG-75 MCG 174

WOMENS MULTIVITAMIN TABS 75 MG-1.7 MG-1000 MCG-400 MCG-25 MCG-6 MCG-1.3 MG-25 MCG-16 MG-665 MCG-5 MG-18 MG-380 MG-1.2 MG-8 MG-0.9 MG-150 MCG-3.4 MG-1.8 MG-25 MCG-27.5 MCG . 174

WYOST SOLN SC 120 MG/1.7ML 75

XACIATO GEL 198

XADAGO 40

XALATAN SOLN (Use latanoprost) 188

XALKORI CAPS 39

XALKORI CPSP 39

XARELTO STARTER PACK TBPK 16

XARELTO SUSR 1 MG/ML (Use rivaroxaban) 16

XARELTO TABS 2.5 MG, 10 MG, 15 MG, 20 MG (Use rivaroxaban) 16

XARELTO TABS 16

XATMEP SOLN PO 34

XCOPRI (250 MG DAILY DOSE) TBPK 19

XCOPRI (350 MG DAILY DOSE) TBPK 19

XCOPRI TABS 19

XCOPRI TBPK 19

XELJANZ SOLN 1 MG/ML (Use tofacitinib citrate) 5

XELJANZ TABS 5 MG, 10 MG (Use tofacitinib citrate) 5

XELJANZ XR TB24 11 MG, 22 MG (Use tofacitinib citrate) 5

XELSTRYM 1

XEMBIFY 189

XENAZINE (Use tetrabenazine) .191

XEOMIN 183

XEPI 54

XGEVA SOLN 75

XHANCE EXHU 181

XIAFLEX 133

XIGDUO XR TB24 PO (Use dapagliflozin-metformin hcl) 23

XIGDUO XR TB24 PO 23

XIIDRA 186

XIPERE 187

XOFLUZA (40 MG DOSE) 40 MG .45

XOFLUZA (80 MG DOSE) 80 MG .46

XOLAIR SOAJ 150 MG/ML 13

XOLAIR SOAJ 75 MG/0.5ML, 300 MG/2ML 13

XOLAIR SOLR 13

XOLAIR SOSY 13

XOLREMDI 84

XOPENEX HFA (Use levalbuterol tartrate) 15

XOSPATA 39

XPHOZAH 76

XPOVIO (100 MG ONCE WEEKLY) 50 MG 37

XPOVIO (40 MG ONCE WEEKLY) 37

XPOVIO (40 MG TWICE WEEKLY) 40 MG 37

XPOVIO (60 MG ONCE WEEKLY) 60 MG 37

XPOVIO (60 MG TWICE WEEKLY) . 37

XPOVIO (80 MG ONCE WEEKLY) 37

XPOVIO (80 MG TWICE WEEKLY) . 37

XTANDI CAPS 36

XTANDI TABS 36

XTRENBO SOLN SC 120 MG/1.7ML 75

XULTOPHY 23

XYNTHA 81

XYNTHA SOLOFUSE 81

XYOSTED SOAJ 10

XYREM SOLN (Use sodium oxybate) 190

XYWAV 190

YELETS TEENAGE FORMULA TABS 174

YESINTEK SOLN 45 MG/0.5ML ..56

YESINTEK SOSY 56

YEZTUGO SOLN 463.5 MG/1.5ML 44

YEZTUGO TABS PO 300 MG 44

YONSA 36

YORVIPATH 168 MCG/0.56ML ... 76
YORVIPATH 294 MCG/0.98ML ... 76
YORVIPATH 420 MCG/1.4ML 76
YUFLYMA (1 PEN) AJKT 5
YUFLYMA (2 PEN) AJKT 5
YUFLYMA (2 SYRINGE) PSKT 5
YUFLYMA-CD/UC/HS STARTER AJKT 5
YUPELRI IN 175 MCG/3ML 14
YUSIMRY 5
YUTREPIA CAPS IN 26.5 MCG, 53 MCG, 79.5 MCG, 106 MCG 48
zafirlukast 14
zaleplon 85
ZANAFLEX CAPS (Use tizanidine hcl) 180
ZANAFLEX TABS 4 MG (Use tizanidine hcl) 180
ZARONTIN CAPS (Use ethosuximide) 20
ZARONTIN SOLN (Use ethosuximide) 20
ZARXIO 84
ZAVZPRET 130
ZEGALOGUE SOAJ 23
ZEGALOGUE SOSY 23
ZEJULA TABS 39
ZELBORAF 39
ZEMBRACE SYMTOUCH SOAJ .132
ZENBEXUS CAPS PO 0.75 MG, 1 MG 36
ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 252600 UNIT-189600 UNIT-60000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT 74
ZEPATIER 45
ZEPBOUND KWIKPEN SOPN SC 2.5 MG/0.6ML, 5 MG/0.6ML, 7.5 MG/0.6ML, 10 MG/0.6ML, 12.5 MG/0.6ML, 15 MG/0.6ML 2
ZEPBOUND SOAJ 2
ZEPBOUND SOLN 2
ZEPOSIA 7-DAY STARTER PACK CPPK 193
ZEPOSIA CAPS 193
ZEPOSIA STARTER KIT CPPK ..193
ZERVIATE 188
ZESTORETIC (Use lisinopril & hydrochlorothiazide) 33
ZESTRIL TABS (Use lisinopril) 32
ZETIA (Use ezetimibe) 31
ZEVRX INSULIN SYRINGE 126
ZEVRX TWIST TOP LANCETS 30G 124
zidovudine CAPS 44
zidovudine SYRP 44
zidovudine TABS 44
ZIEXTENZO 84
zileuton TB12 14
zinc oxide (topical) OINT 20 % 61
zinc sulfate CAPS 133
ZIOPTAN (Use tafluprost) 188
ziprasidone hcl 41
ZITHROMAX SUSR (Use azithromycin) 86
ZITHROMAX TABS 250 MG, 500 MG (Use azithromycin) 86
ZITHROMAX TRI-PAK TABS (Use azithromycin) 86
ZITHROMAX Z-PAK TABS (Use azithromycin) 86
ZITUVIMET TABS 1000 MG-50 MG, 500 MG-50 MG (Use sitagliptin free base-metformin hcl) 23
ZITUVIMET XR TB24 23
ZITUVIO 25 MG, 50 MG, 100 MG (Use sitagliptin) 23
ZOCOR TABS 10 MG, 20 MG, 40 MG (Use simvastatin) 31
ZOLADEX 36
ZOLGENSMA 20.6-21.0 KG 183
ZOLGENSMA 10.1-10.5 KG 183
ZOLGENSMA 10.6-11.0 KG 183
ZOLGENSMA 11.1-11.5 KG 184
ZOLGENSMA 11.6-12.0 KG 184
ZOLGENSMA 12.1-12.5 KG 184
ZOLGENSMA 12.6-13.0 KG 184
ZOLGENSMA 13.1-13.5 KG 184
ZOLGENSMA 13.6-14.0 KG 184
ZOLGENSMA 14.1-14.5 KG 184
ZOLGENSMA 14.6-15.0 KG 184
ZOLGENSMA 15.1-15.5 KG 184
ZOLGENSMA 15.6-16.0 KG 184
ZOLGENSMA 16.1-16.5 KG 184

ZOLGENSMA 16.6-17.0 KG 184
ZOLGENSMA 17.1-17.5 KG 184
ZOLGENSMA 17.6-18.0 KG 184
ZOLGENSMA 18.1-18.5 KG 184
ZOLGENSMA 18.6-19.0 KG 184
ZOLGENSMA 19.1-19.5 KG 184
ZOLGENSMA 19.6-20.0 KG 184
ZOLGENSMA 2.6-3.0 KG 184
ZOLGENSMA 20.1-20.5 KG 184
ZOLGENSMA 3.1-3.5 KG 184
ZOLGENSMA 3.6-4.0 KG 184
ZOLGENSMA 4.1-4.5 KG 184
ZOLGENSMA 4.6-5.0 KG 184
ZOLGENSMA 5.1-5.5 KG 184
ZOLGENSMA 5.6-6.0 KG 184
ZOLGENSMA 6.1-6.5 KG 184
ZOLGENSMA 6.6-7.0 KG 184
ZOLGENSMA 7.1-7.5 KG 184
ZOLGENSMA 7.6-8.0 KG 184
ZOLGENSMA 8.1-8.5 KG 184
ZOLGENSMA 8.6-9.0 KG 184
ZOLGENSMA 9.1-9.5 KG 184
ZOLGENSMA 9.6-10.0 KG 184
ZOLINZA 39
zolmitriptan SOLN 132
zolmitriptan TABS 2.5 MG 132
zolmitriptan TABS 5 MG 132
zolmitriptan TBDP 132
ZOLOFT CONC (Use sertraline hcl) 21
ZOLOFT TABS (Use sertraline hcl) 21
ZOLPIDEM TARTRATE CAPS 85
zolpidem tartrate SUBL 85
zolpidem tartrate TABS 85
zolpidem tartrate TBCR 85
ZOLYMBUS GEL OP 0.01 % 188
ZOMACTON SOLR SC 75
ZOMIG SOLN (Use zolmitriptan) .132
ZOMIG SOLN 132
ZONALON (Use doxepin hcl (antipruritic)) 55
ZONISADE SUSP 19
zonisamide CAPS 19
ZORYVE CREA EX 0.05 % 61
ZORYVE CREA EX 0.15 % 62
ZORYVE CREA EX 0.3 % 61
ZORYVE FOAM EX 62
ZTALMY 19
ZTLIDO PTCH 61
ZUBSOLV SUBL 0.18 MG-0.7 MG, 0.36 MG-1.4 MG, 0.71 MG-2.9 MG, 1.4 MG-5.7 MG 10
ZUBSOLV SUBL 2.1 MG-8.6 MG . 10
ZUBSOLV SUBL 2.9 MG-11.4 MG 10
ZUNVEYL TBEC PO 5 MG, 10 MG, 15 MG 191
ZURNAI IJ 1.5 MG/0.5ML 27
ZURZUVAE 20
ZYBIC SUSP 7.5 MG/5ML (Use meloxicam) 7
ZYDELIG 39
ZYFLO TABS 14
ZYKADIA TABS 39
ZYLET 0.3 %-0.5 % (Use loteprednol etabonate-tobramycin) 187
ZYMFENTRA (1 PEN) AJKT 78
ZYMFENTRA (2 PEN) AJKT 78
ZYMFENTRA (2 SYRINGE) PSKT 78
ZYNTEGLO 82
ZYPREXA RELPREVV 42
ZYPREXA TABS (Use olanzapine) 42
ZYPREXA ZYDIS TBDP (Use olanzapine) 42
ZYTIGA (Use abiraterone acetate) 36
ZYVOX SUSR (Use linezolid) 12
ZYVOX TABS (Use linezolid) 12