

## **Vermont State Colleges System – Non-Faculty**

**Cigna-HealthSpring Rx (PDP)**

# **2018 Cigna-HealthSpring Rx (PDP) DRUG LIST (Formulary)**

**Please read: This document contains information about the drugs we cover in this plan.**



This drug list was updated September 2017. For more recent information or other questions, please contact Cigna-HealthSpring Customer Service, at 1-800-558-9562 or, for TTY users, 711, 8a.m. – 8 p.m., local time, 7 days a week. Our automated phone system may answer your call during weekends from Feb 15 – Sept 30, or visit [www.mycigna.com](http://www.mycigna.com). The formulary, pharmacy network, and/or provider network may change at any time. You will receive notice when necessary. Cigna-HealthSpring is contracted with Medicare for PDP plans, HMO and PPO plans in select states, and with select State Medicaid programs. Enrollment in Cigna-HealthSpring depends on contract renewal.

**Note to existing customers:** This drug list has changed since last year. Please review this document to make sure that it still contains the drugs you take.

When this drug list (formulary) refers to "we," "us", or "our," it means Cigna-HealthSpring. When it refers to "plan" or "our plan," it means Cigna-HealthSpring Rx (PDP).

This document includes a list of the drugs (formulary) for our plans, which is current as of September 2017. If you have any questions, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You must generally use network pharmacies to use your prescription drug benefit. Benefits, formulary, pharmacy network, and/or copayments/coinsurance may change on January 1, 2019, and from time to time during the year.

## **What is the Cigna-HealthSpring RX PDP Comprehensive Drug List?**

A drug list is a list of covered drugs selected by Cigna-HealthSpring Rx (PDP) in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program. Cigna-HealthSpring Rx (PDP) will generally cover the drugs listed in our drug list as long as the drug is medically necessary, the prescription is filled at a Cigna-HealthSpring Rx (PDP) network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your Evidence of Coverage.

## **Can the Drug List (formulary) change?**

Generally, if you are taking a drug on our 2018 drug list that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2018 coverage year except when a new, less expensive generic drug becomes available or when new adverse information about the safety or effectiveness of a drug is released. Other types of drug list changes, such as removing a drug from our drug list, will not affect customers who are currently taking the drug. It will remain available at the same cost-sharing for those customers taking it for the remainder of the coverage year. We feel it is important that you have continued access for the remainder of the coverage year to the drugs that were available when you chose our plan, except for cases in which you can save additional money or we can ensure your safety.

If we remove drugs from our drug list, add prior authorization, quantity limits and/or step therapy restrictions on a drug or move a drug to a higher cost-sharing tier, we must notify affected customers of the change at least 60 days before the change becomes effective, or at the time the customer requests a refill of the drug, at which time the customer will receive a 60-day supply of the drug. If the Food and Drug Administration deems a drug in our drug list to be unsafe or the drug's manufacturer removes the drug from the market, we will immediately remove the drug from our drug list and provide notice to customers who take the drug. The enclosed drug list is current as of September 2017. To get updated information about the drugs covered by Cigna-HealthSpring Rx (PDP), please contact us. Our contact information appears on the front and back cover pages. If there are significant changes made to the printed drug list within the covered year, you may be notified by mail identifying the changes.

## **How do I use the Drug List?**

There are two ways to find your drug within the drug list:

### **Medical Condition**

The drug list begins on page 7. The drugs in this drug list are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, "CARDIOVASCULAR AGENTS". If you know what your drug is used for, look for the category name in the list that begins on page 7. Then look under the category name for your drug.

### **Covered Drug Index**

If you are not sure what category to look under, you should look for your drug in the Covered Drug Index that begins on page 91. The Covered Drug Index provides a list of all of the drugs included in this document. Both brand name drugs and generic drugs are in the Drug List. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Covered Drug Index and find the name of your drug in the drug name column of the list.

## **What are generic drugs?**

Cigna-HealthSpring Rx (PDP) covers both brand name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs cost less than brand name drugs.

## **Are there any restrictions on my coverage?**

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

- **Prior Authorization:** The plan requires you or your doctor to get prior authorization for certain drugs. This means that you will need to get approval from the plan before you fill your prescriptions. If you don't get approval, Cigna-HealthSpring Rx (PDP) may not cover the drug.
- **Quantity Limits:** For certain drugs, the plan limits the amount of the drug that Cigna-HealthSpring Rx (PDP) will cover. For example, the plan allows for 1 tablet per day for BYSTOLIC 10MG. This applies to a standard one-month supply (for total quantity of 30 per 30 days) or three-month supply (for total quantity of 90 per 90 days).
- **Step Therapy:** In some cases, the plan requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, Cigna-HealthSpring Rx (PDP) may not cover Drug B unless you try Drug A first. If Drug A does not work for you, the plan will then cover Drug B.

You can find out if your drug has any additional requirements or limits by looking in the drug list that begins on page 7. You can also get more information about the restrictions applied to specific covered drugs by visiting our Web site. We have posted online documents that explain our prior authorization and step therapy restrictions. You may also ask us to send you a copy. Our contact information, along with the date we last updated the drug list, appears on the front and back cover pages.

You can ask Cigna-HealthSpring Rx (PDP) to make an exception to these restrictions or limits or for a list of other, similar drugs that may treat your health condition. See the section, "How do I request an exception to the plan drug list?" on the next page for information about how to request an exception.

## **Options for Maintenance Medications**

Taking the medications prescribed by your doctor is important to your health.

We are committed to helping you achieve control of chronic conditions by making it easy for you to receive your maintenance medications. As part of our commitment to coordinating your healthcare needs, we have set a goal of helping you take your medications at least 80% of the time. There are several ways we can work together to accomplish this goal:

- Talk with your doctor about whether a 90-day supply of your ongoing, stable medications may be appropriate. Taking these medications every day as prescribed is important for your overall health, and getting 90-day prescriptions of these medications can ensure that you don't miss a dose.
- You can receive a 90-day supply at most retail pharmacies or through one of our mail-order pharmacies.
- Talk to your pharmacist if you are experiencing any new challenges with your maintenance medications.

## **How can I use my prescription drug coverage to save money on my medications?**

There may be opportunities for you to save money on your medications using your plan coverage.

- Ask your doctor if there are any lower-cost generic alternatives available for any of your current medications.
- Explore whether the 'Medicare Extra Help' program may offer additional financial support for your medications.
- If your medication is not covered on the plan drug list, talk with your doctor about alternative medications which are covered in the drug list.

## **What if my drug is not in the Drug List?**

If your drug is not included in this drug list, you should first contact Customer Service and ask if your drug is covered. If you learn that the plan does not cover your drug, you have two options:

- You can ask Customer Service for a list of similar drugs that are covered by the plan. When you receive the list, show it to your doctor and ask him or her to prescribe a similar drug that is covered by the plan.
- You can ask the plan to make an exception to cover your drug. See below for information about how to request an exception.

### **How do I request an exception to the plan Drug List?**

You can ask us to make an exception to our coverage rules. There are several types of exceptions that you can ask us to make.

- You can ask us to cover a drug even if it is not in our drug list. If approved, this drug will be covered at a pre-determined cost-sharing level, and you would not be able to ask us to provide the drug at a lower cost-sharing level.
- You can ask us to waive coverage restrictions or limits on your drug. For example, for certain drugs, the plan limits the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount.
- You can ask us to provide a tiering exception for a higher cost-sharing drug to be covered at a lower cost-sharing tier. If your drug is contained in our Non-Preferred Brand tier or the Non-Preferred Generic tier, you can ask us to cover it at the cost-sharing amount that applies to drugs in the respective Preferred Brand or Preferred Generic tier instead. This would lower the amount you must pay for your drug. Please note, if we grant your request to cover a drug that is not in our drug list, you may not ask us to provide a higher level of coverage for the drug. Also, you may not ask us to provide a higher level of coverage for drugs that are in the Specialty tier.

Generally, we will only approve your request for an exception if the alternative drug is included on the plan's drug list, the lower cost-sharing drug or additional utilization restrictions would not be as effective in treating your condition and/or would cause you to have adverse medical effects.

You should contact us to ask us for an initial coverage decision for a drug list, tiering or utilization restriction exception. **When you request a drug list, tiering or utilization restriction exception, you should submit a statement from your prescriber or doctor supporting your request.** Generally, we must make our decision within 72 hours of getting your prescriber's supporting statement. You can request an expedited (fast) exception if you or your doctor believe that your health could be seriously harmed by waiting up to 72 hours for a decision. If your request to expedite is granted, we must give you a decision no later than 24 hours after we get a supporting statement from your doctor or other prescriber.

### **What do I do before I can talk to my doctor about changing my drugs or requesting an exception?**

As a new or continuing customer in our plan, you may be taking drugs that are not in our drug list. Or, you may be taking a drug that is in our drug list but your ability to get it is limited. For example, you may need a prior authorization from us before you can fill your prescription. You should talk to your doctor to decide if you should switch to an appropriate drug that we cover or request a drug list exception so that we will cover the drug you take. While you talk to your doctor to determine the right course of action for you, we may cover your drug in certain cases during the first 90 days you are a customer of our plan.

For each of your drugs that is not in our drug list or if your ability to get your drugs is limited, we will cover a temporary 30-day supply (unless you have a prescription written for fewer days) when you go to a network pharmacy. After your first 30-day supply, we will not pay for these drugs, even if you have been a customer of the plan less than 90 days.

If you are a resident of a long-term care facility, we will allow you to refill your prescription until we have provided you with a 91-98 day transition supply, consistent with dispensing increment, (unless you have a prescription written for fewer days). We will cover more than one refill of these drugs for the first 90 days you are a customer of our plan. If you need a drug that is not on our drug list or if your ability to get your drugs is limited, but you are past the first 90 days of membership in our plan, we will cover a 31-day emergency supply of that drug (unless you have a prescription for fewer days) while you pursue a drug list exception.

In order to accommodate unexpected transitions of our customers that do not leave time for advanced planning, such as level-of-care changes due to discharge from a hospital to a nursing facility or to a home, we will allow a one-time 31-day supply (unless the prescription is written for fewer days).

## **Cigna-HealthSpring Rx (PDP) Drug List**

The comprehensive drug list provides coverage information about all of the drugs covered by Cigna-HealthSpring Rx (PDP). If you have trouble finding your drug in the list, turn to the Covered Drug Index that begins on page 91.

The first column of the chart lists the drug name. Brand name drugs are capitalized (e.g., BYSTOLIC) and generic drugs are listed in lower-case italics (e.g., *simvastatin*).

The information in the Requirements/Limits column tells you if we have any special requirements for coverage of your drug.

We provide quantity limits on certain drugs which, are indicated with a QL in the drug list that begins on page 7, along with the amount dispensed per the days supplied. (For example: BYSTOLIC 10MG QL 30/30; this means the drug BYSTOLIC 10MG is limited to 30 tablets per 30 days. For 90-day supplies, this quantity limit would be expanded to 90 tablets per 90 days).

### **For more information**

For more detailed information about your Cigna-HealthSpring Rx (PDP) coverage, please review your Evidence of Coverage and other plan materials.

If you have questions about Cigna-HealthSpring Rx (PDP), please contact us. Our contact information, along with the date we last updated the drug list, appears on the front and back cover pages.

If you have general questions about Medicare prescription drug coverage, please call Medicare at **1-800-MEDICARE (1-800-633-4227)**, 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048. Or, visit <http://www.medicare.gov>.

**2018 Drug Tier and Cost Share Table**  
**Cigna-HealthSpring Rx (PDP)**

	30-day supply Retail	30-day supply Mail Order	90-day supply Retail	90-day supply Mail Order	30-day supply Out of Network*
<b>Vermont State Colleges System</b>					
Tier 1: Preferred Generic Drugs	\$10	\$10	\$10	\$10	40%
Tier 2: Preferred Brand Drugs	\$20	\$20	\$20	\$20	40%
Tier 3: Non-Preferred Brand and Generic Drugs	\$20	\$20	\$20	\$20	40%
Tier 4: Specialty** Drugs	\$20	\$20	N/A	N/A	40%

\* You may get drugs at an out-of-network pharmacy. You will pay the cost share above, plus the amount that the out-of-network pharmacy billed charges are higher than our typical standard retail pharmacy billed charges.

\*\* Specialty generic and brand drugs are limited to a 30-day supply.

This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments, and restrictions may apply. Benefits, premiums and/or copayments/coinsurance may change on January 1 of each year.

**Note for customers receiving Extra Help:** Your LIS copay level will be based on how the Food and Drug Administration (FDA) classifies certain drugs. Due to this, a generic drug may receive a preferred drug copay, or a preferred brand drug may receive a generic drug copay. Please see your LIS Rider for additional information on these copay levels. Or call Customer Service for further clarification regarding a specific drug. You may also refer to your Evidence of Coverage document for additional details.

# 2018 Comprehensive Formulary

## Cost-Sharing Tier Description

Tier 1: Preferred Generic Drugs

Tier 2: Preferred Brand Drugs

Tier 3: Non-Preferred Generic and Brand Drugs

Tier 4: Specialty Drugs

## Symbol Key - Utilization Management Requirements/ Limits

<b>B/D</b>	This prescription drug has a Part B versus D administrative prior authorization requirement. This drug may be covered under Medicare Part B or D depending on circumstances.
<b>BP</b>	Supplemental Brand Package drugs. These Part D drugs are not offered on the standard Medicare Part D formulary.
<b>D/E</b>	This prescription drug has a Part D versus Exclusion administrative prior authorization requirement. This drug may be covered under Medicare Part D depending on circumstances.
<b>EC</b>	Supplemental Expanded Coverage drugs. These Part D drugs are not offered or offered at a higher tier on the standard Medicare Part D formulary.
<b>PA</b>	This drug requires prior authorization.
<b>PA</b>	This High Risk Medication (HRM) requires prior authorization.
<b>HRM</b>	
<b>QL</b>	This drug has quantity limits.
<b>ST</b>	This drug has step therapy requirements.
<b>+</b>	This prescription drug is not normally covered in a Medicare Prescription Drug Plan. The amount you pay when you fill a prescription for this drug does not count towards your total drug costs (that is, the amount you pay does not help you qualify for catastrophic coverage). In addition, if you are receiving extra help to pay for your prescriptions, you will not get any extra help to pay for this drug.

Generally all medications in the drug list are available through mail order, except when special circumstances or situations prohibit mailing a particular medication to your home.

## 2018 Comprehensive Formulary

Drug Name	Drug Tier	Requirements / Limits
<b>1st Generation/Typical</b>		
<b>chlorpromazine 10 mg tablet</b>	1	
<b>chlorpromazine 100 mg tablet</b>	1	
<b>chlorpromazine 200 mg tablet</b>	1	
<b>chlorpromazine 25 mg tablet</b>	1	
<b>chlorpromazine 25 mg/ml amp</b>	1	
<b>chlorpromazine 50 mg tablet</b>	1	
COMPRO 25 MG	1	
SUPPOSITORY		
<b>fluphenazine 1 mg tablet</b>	1	
<b>fluphenazine 10 mg tablet</b>	1	
<b>fluphenazine 2.5 mg tablet</b>	1	
<b>fluphenazine 2.5 mg/5 ml elix</b>	1	
<b>fluphenazine 2.5 mg/ml vial</b>	1	
<b>fluphenazine 5 mg tablet</b>	1	
<b>fluphenazine 5 mg/ml conc</b>	1	

Drug Name	Drug Tier	Requirements / Limits
<b>fluphenazine dec 125 mg/5 ml</b>	1	
<b>haloperidol 0.5 mg tablet</b>	1	
<b>haloperidol 1 mg tablet</b>	1	
<b>haloperidol 10 mg tablet</b>	1	
<b>haloperidol 2 mg tablet</b>	1	
<b>haloperidol 20 mg tablet</b>	1	
<b>haloperidol 5 mg tablet</b>	1	
<b>haloperidol dec 100 mg/ml vial</b>	1	
<b>haloperidol dec 50 mg/ml vial</b>	1	
<b>haloperidol lac 2 mg/ml conc</b>	1	
<b>haloperidol lac 5 mg/ml vial</b>	1	
<b>loxapine 10 mg capsule</b>	1	QL 120/30
<b>loxapine 25 mg capsule</b>	1	
<b>loxapine 5 mg capsule</b>	1	QL 120/30
<b>loxapine 50 mg capsule</b>	1	
<b>molindone hcl 10 mg tablet</b>	1	

# 2018 Comprehensive Formulary

Drug Name	Drug Tier	Requirements / Limits
<b>molindone hcl 25 mg tablet</b>	1	
<b>molindone hcl 5 mg tablet</b>	1	
<b>perphenazine 16 mg tablet</b>	1	
<b>perphenazine 2 mg tablet</b>	1	
<b>perphenazine 4 mg tablet</b>	1	
<b>perphenazine 8 mg tablet</b>	1	
<b>pimozide 1 mg tablet</b>	1	
<b>pimozide 2 mg tablet</b>	1	
<b>prochlorperazine 10 mg tab</b>	1	
<b>prochlorperazine 10 mg/2 ml vl</b>	1	
<b>prochlorperazine 25 mg supp</b>	1	
<b>prochlorperazine 5 mg tablet</b>	1	
<b>thioridazine 10 mg tablet</b>	1	
<b>thioridazine 100 mg tablet</b>	1	
<b>thioridazine 25 mg tablet</b>	1	
<b>thioridazine 50 mg tablet</b>	1	
<b>thiothixene 1 mg capsule</b>	1	
<b>thiothixene 10 mg capsule</b>	1	
<b>thiothixene 2 mg capsule</b>	1	
<b>thiothixene 5 mg capsule</b>	1	
<b>trifluoperazine 1 mg tablet</b>	1	
<b>trifluoperazine 10 mg tablet</b>	1	
<b>trifluoperazine 2 mg tablet</b>	1	
<b>trifluoperazine 5 mg tablet</b>	1	
<b>2nd Generation/Atypical</b>		
ABILIFY MAINTENA ER 300 MG	4	QL 1/30
SYR		
ABILIFY MAINTENA ER 300 MG	4	QL 1/30
VL		
ABILIFY MAINTENA ER 400 MG	4	QL 1/30
SYR		
<b>ariPIPRAZOLE 1 mg/ml solution</b>	1	QL 900/30
<b>ariPIPRAZOLE 10 mg tablet</b>	1	QL 30/30
<b>ariPIPRAZOLE 15 mg tablet</b>	1	QL 30/30
<b>ariPIPRAZOLE 2 mg tablet</b>	1	QL 30/30
<b>ariPIPRAZOLE 20 mg tablet</b>	1	QL 30/30
<b>ariPIPRAZOLE 30 mg tablet</b>	1	QL 30/30
<b>ariPIPRAZOLE 5 mg tablet</b>	1	QL 30/30
<b>ariPIPRAZOLE odt 10 mg tablet</b>	4	QL 60/30
<b>ariPIPRAZOLE odt 15 mg tablet</b>	4	QL 60/30

Drug Name	Drug Tier	Requirements / Limits
ARISTADA ER 1064 MG/3.9 ML	4	QL 3.9/60
SYR		
ARISTADA ER 441 MG/1.6 ML	4	QL 1.6/30
SYRN		
ARISTADA ER 662 MG/2.4 ML	4	QL 2.4/30
SYRN		
ARISTADA ER 882 MG/3.2 ML	4	QL 3.2/30
SYRN		
FANAPT 1 MG TABLET	3	QL 60/30,ST
FANAPT 10 MG TABLET	4	QL 60/30,ST
FANAPT 12 MG TABLET	4	QL 60/30,ST
FANAPT 2 MG TABLET	3	QL 60/30,ST
FANAPT 4 MG TABLET	3	QL 60/30,ST
FANAPT 6 MG TABLET	4	QL 60/30,ST
FANAPT 8 MG TABLET	4	QL 60/30,ST
FANAPT TITRATION PACK	3	QL 16/30,ST
GEODON 20 MG/ML VIAL	3	QL 6/30
INVEGA SUSTENNA 117 MG/0.75	4	QL 0.75/28
ML		
INVEGA SUSTENNA 156 MG/ML	4	QL 1/28
SYRG		
INVEGA SUSTENNA 234 MG/1.5	4	QL 1.5/28
ML		
INVEGA SUSTENNA 39 MG/0.25	3	QL 0.25/28
ML		
INVEGA SUSTENNA 78 MG/0.5	4	QL 0.5/28
ML		
INVEGA TRINZA 273 MG/0.875	4	QL 0.88/90
ML		
INVEGA TRINZA 410 MG/1.315	4	QL 1.32/90
ML		
INVEGA TRINZA 546 MG/1.75	4	QL 1.75/90
ML		
INVEGA TRINZA 819 MG/2.625	4	QL 2.63/90
ML		

# 2018 Comprehensive Formulary

Drug Name	Drug Tier	Requirements / Limits
LATUDA 120 MG TABLET	4	QL 30/30,ST
LATUDA 20 MG TABLET	4	QL 30/30,ST
LATUDA 40 MG TABLET	4	QL 30/30,ST
LATUDA 60 MG TABLET	4	QL 30/30,ST
LATUDA 80 MG TABLET	4	QL 60/30,ST
NUPLAZID 17 MG TABLET	4	PA,QL 60/30
<i>olanzapine 10 mg tablet</i>	1	QL 30/30
<i>olanzapine 10 mg vial</i>	1	QL 30/30
<i>olanzapine 15 mg tablet</i>	1	QL 30/30
<i>olanzapine 2.5 mg tablet</i>	1	QL 30/30
<i>olanzapine 20 mg tablet</i>	1	QL 30/30
<i>olanzapine 5 mg tablet</i>	1	QL 30/30
<i>olanzapine 7.5 mg tablet</i>	1	QL 30/30
<i>olanzapine odt 10 mg tablet</i>	1	QL 30/30
<i>olanzapine odt 15 mg tablet</i>	1	QL 30/30
<i>olanzapine odt 20 mg tablet</i>	1	QL 30/30
<i>olanzapine odt 5 mg tablet</i>	1	QL 30/30
<i>paliperidone er 1.5 mg tablet</i>	1	QL 30/30
<i>paliperidone er 3 mg tablet</i>	1	QL 30/30
<i>paliperidone er 6 mg tablet</i>	1	QL 60/30
<i>paliperidone er 9 mg tablet</i>	4	QL 30/30
<i>quetiapine er 150 mg tablet</i>	1	QL 30/30
<i>quetiapine er 200 mg tablet</i>	1	QL 30/30
<i>quetiapine er 300 mg tablet</i>	1	QL 60/30
<i>quetiapine er 400 mg tablet</i>	1	QL 60/30
<i>quetiapine er 50 mg tablet</i>	1	QL 60/30
<i>quetiapine fumarate 100 mg tab</i>	1	QL 60/30
<i>quetiapine fumarate 200 mg tab</i>	1	QL 60/30
<i>quetiapine fumarate 25 mg tab</i>	1	QL 60/30
<i>quetiapine fumarate 300 mg tab</i>	1	QL 60/30
<i>quetiapine fumarate 400 mg tab</i>	1	QL 60/30
<i>quetiapine fumarate 50 mg tab</i>	1	QL 60/30
REXULTI 0.25 MG TABLET	4	QL 30/30,ST

Drug Name	Drug Tier	Requirements / Limits
REXULTI 0.5 MG TABLET	4	QL 30/30,ST
REXULTI 1 MG TABLET	4	QL 30/30,ST
REXULTI 2 MG TABLET	4	QL 30/30,ST
REXULTI 3 MG TABLET	4	QL 30/30,ST
REXULTI 4 MG TABLET	4	QL 30/30,ST
RISPERDAL CONSTA 12.5 MG SYR	3	QL 2/28
RISPERDAL CONSTA 25 MG SYR	3	QL 2/28
RISPERDAL CONSTA 37.5 MG SYR	3	QL 2/28
RISPERDAL CONSTA 50 MG SYR	4	QL 2/28
<i>risperidone 0.25 mg odt</i>	1	QL 60/30
<i>risperidone 0.25 mg tablet</i>	1	QL 60/30
<i>risperidone 0.5 mg odt</i>	1	QL 60/30
<i>risperidone 0.5 mg tablet</i>	1	QL 60/30
<i>risperidone 1 mg odt</i>	1	QL 60/30
<i>risperidone 1 mg tablet</i>	1	QL 60/30
<i>risperidone 1 mg/ml solution</i>	1	QL 360/30
<i>risperidone 2 mg odt</i>	1	QL 60/30
<i>risperidone 2 mg tablet</i>	1	QL 60/30
<i>risperidone 3 mg odt</i>	1	QL 60/30
<i>risperidone 3 mg tablet</i>	1	QL 60/30
<i>risperidone 4 mg odt</i>	1	QL 120/30
<i>risperidone 4 mg tablet</i>	1	QL 120/30
SAPHRIS 10 MG TAB SL BLK CHERRY	2	QL 60/30,ST
SAPHRIS 2.5 MG TAB SL BLK CHRY	2	QL 60/30,ST
SAPHRIS 5 MG TAB SL BLK CHERRY	2	QL 60/30,ST
VRAYLAR 1.5 MG CAPSULE	4	QL 30/30,ST
VRAYLAR 1.5 MG-3 MG PACK	3	QL 14/365,ST

# 2018 Comprehensive Formulary

Drug Name	Drug Tier	Requirements / Limits
VRAYLAR 3 MG CAPSULE	4	QL 30/30,ST
VRAYLAR 4.5 MG CAPSULE	4	QL 30/30,ST
VRAYLAR 6 MG CAPSULE	4	QL 30/30,ST
<b>ziprasidone hcl 20 mg capsule</b>	1	QL 60/30
<b>ziprasidone hcl 40 mg capsule</b>	1	QL 60/30
<b>ziprasidone hcl 60 mg capsule</b>	1	QL 60/30
<b>ziprasidone hcl 80 mg capsule</b>	1	QL 60/30
ZYPREXA RELPREVV 210 MG VL KIT	3	QL 2/28
ZYPREXA RELPREVV 300 MG VL KIT	4	QL 2/28
ZYPREXA RELPREVV 405 MG VL KIT	4	QL 1/28
<b>Alcohol Deterrents/Anti-craving</b>		
<b>acamprosate calc dr 333 mg tab</b>	1	
<b>disulfiram 250 mg tablet</b>	1	
<b>disulfiram 500 mg tablet</b>	1	
VIVITROL 380 MG VIAL + DILUENT	4	PA
<b>Alkylating Agents</b>		
BENDEKA 100 MG/4 ML VIAL	4	PA,QL 8/21,B/D
BICNU 100 MG VIAL	3	PA,B/D
<b>busulfan 60 mg/10 ml vial</b>	4	PA,B/D
BUSULFEX 60 MG/10 ML VIAL	4	PA,B/D
<b>cyclophosphamide 1 gm vial</b>	1	PA,B/D
<b>cyclophosphamide 2 gm vial</b>	4	PA,B/D
<b>cyclophosphamide 25 mg capsule</b>	1	PA,B/D
<b>cyclophosphamide 50 mg capsule</b>	1	PA,B/D
<b>cyclophosphamide 500 mg vial</b>	1	PA,B/D
<b>dacarbazine 100 mg vial</b>	1	PA,B/D
<b>dacarbazine 200 mg vial</b>	1	PA,B/D
EVOMELA 50 MG VIAL	4	PA,B/D
GLEOSTINE 10 MG CAPSULE	2	
GLEOSTINE 100 MG CAPSULE	2	

Drug Name	Drug Tier	Requirements / Limits
GLEOSTINE 40 MG CAPSULE	2	
GLEOSTINE 5 MG CAPSULE	2	
HEXALEN 50 MG CAPSULE	4	
<b>ifosfamide 1 gm vial</b>	1	PA,B/D
<b>ifosfamide 1 gm/20 ml vial</b>	1	PA,B/D
<b>ifosfamide 3 gm vial</b>	1	PA,B/D
<b>ifosfamide 3 gm/ 60 ml vial</b>	1	PA,B/D
KISQALI FEMARA 200 MG CO-PACK	4	QL 49/28
KISQALI FEMARA 400 MG CO-PACK	4	QL 70/28
KISQALI FEMARA 600 MG CO-PACK	4	QL 91/28
LEUKERAN 2 MG TABLET	2	
MATULANE 50 MG	4	
<b>melphalan 50 mg vial w-diluent</b>	4	PA,B/D
MUSTARGEN 10 MG VIAL	3	PA,B/D
TEPADINA 100 MG VIAL	3	PA,B/D
TEPADINA 15 MG VIAL	3	PA,B/D
<b>thiotepa 15 mg vial</b>	1	PA,B/D
TREANDA 100 MG VIAL	4	PA,B/D
TREANDA 180 MG/2 ML VIAL	4	PA,QL 4/21,B/D
TREANDA 25 MG VIAL	4	PA,QL 8/21,B/D
TREANDA 45 MG/0.5 ML VIAL	4	PA,QL 6/21,B/D
VALCHLOR 0.016% GEL	4	QL 60/30
YONDELIS 1 MG VIAL	4	PA,B/D
ZANOSAR 1 GM POWDER VIAL	3	PA,B/D
<b>Alpha-adrenergic Agonists</b>		
<b>clonidine 0.1 mg/day patch</b>	1	QL 4/28
<b>clonidine 0.2 mg/day patch</b>	1	QL 4/28
<b>clonidine 0.3 mg/day patch</b>	1	QL 8/28
<b>clonidine hcl 0.1 mg tablet</b>	1	
<b>clonidine hcl 0.2 mg tablet</b>	1	
<b>clonidine hcl 0.3 mg tablet</b>	1	
CLORPRES 0.1-15 TABLET	1	
CLORPRES 0.2-15 TABLET	1	

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Drug Name	Drug Tier	Requirements / Limits
CLORPRES 0.3-15 TABLET	1	
<i>guanfacine 1 mg tablet</i>	1	
<i>guanfacine 2 mg tablet</i>	1	
<i>methyldopa 250 mg tablet</i>	1	PA HRM
<i>methyldopa 500 mg tablet</i>	1	PA HRM
<i>methyldopa-hctz 250-15 mg tab</i>	1	PA HRM
<i>methyldopa-hctz 250-25 mg tab</i>	1	PA HRM
<i>methyldopate 250 mg/5 ml vial</i>	1	PA HRM
<i>midodrine hcl 10 mg tablet</i>	1	
<i>midodrine hcl 2.5 mg tablet</i>	1	
<i>midodrine hcl 5 mg tablet</i>	1	
<b>Alpha-adrenergic Blocking Agents</b>		
<i>phenoxybenzamine hcl 10 mg cap</i>	4	
<i>prazosin 1 mg capsule</i>	1	
<i>prazosin 2 mg capsule</i>	1	
<i>prazosin 5 mg capsule</i>	1	
<b>Aminoglycosides</b>		
<i>amikacin sulf 1 gram/4 ml vial</i>	1	
<i>amikacin sulf 500 mg/2 ml vial</i>	1	
GENTAK 0.3 % EYE OINTMENT	1	
<i>gentamicin 0.1% cream</i>	1	
<i>gentamicin 0.1% ointment</i>	1	
<i>gentamicin 0.3% eye drops</i>	1	
<i>gentamicin 0.3% eye ointment</i>	1	
<i>gentamicin 10 mg/ml vial</i>	1	
<i>gentamicin 20 mg/2 ml vial</i>	1	
<i>gentamicin 70 mg/ns 50 ml pb</i>	1	
<i>gentamicin 80 mg/2 ml vial</i>	1	
<i>gentamicin 80 mg/ns 100 ml pb</i>	1	
<i>gentamicin 90 mg/ns 100 ml pb</i>	1	
<i>gentamicin ped 20 mg/2 ml vial</i>	1	
<i>iso gentamicin 100 mg/100 ml</i>	1	
<i>isoton gentamicin 100 mg/50 ml</i>	1	
<i>isoton gentamicin 60 mg/50 ml</i>	1	
<i>isoton gentamicin 80 mg/100 ml</i>	1	
<i>isoton gentamicin 80 mg/50 ml</i>	1	
<i>neomycin 500 mg tablet</i>	1	
<i>neomy-polymyxin b 40 mg/ml amp</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>paromomycin 250 mg capsule</i>	1	
<i>streptomycin sulf 1 gm vial</i>	1	
<i>tobramycin 0.3% eye drops</i>	1	
<i>tobramycin 1.2 gm vial</i>	1	
<i>tobramycin 1.2 gram/30 ml vial</i>	1	
<i>tobramycin 10 mg/ml vial</i>	1	
<i>tobramycin 40 mg/ml vial</i>	1	
<i>tobramycin 80 mg/100 ml ns</i>	1	
TOBREX 0.3% EYE OINTMENT	2	
ZYLET EYE DROPS	2	ST
<b>Aminosalicylates</b>		
APRISO ER 0.375 GRAM CAPSULE	2	QL 120/30
ASACOL HD DR 800 MG TABLET	3	ST
<i>balsalazide disodium 750 mg cp</i>	1	
CANASA 1,000 MG SUPPOSITORY	3	
DELZICOL DR 400 MG CAPSULE	3	
DIPENTUM 250 MG CAPSULE	3	
LIALDA DR 1.2 GM TABLET	2	QL 120/30
<i>mesalamine 4 gm/60 ml enema</i>	1	
<i>mesalamine 4 gm/60 ml kit</i>	1	
<i>mesalamine 800 mg dr tablet</i>	1	
PENTASA 250 MG CAPSULE	3	
PENTASA 500 MG CAPSULE	3	
<b>Anabolic Steroids</b>		
ANADROL-50 TABLET	4	PA
<i>oxandrolone 10 mg tablet</i>	4	PA,QL 60/30
<i>oxandrolone 2.5 mg tablet</i>	1	PA,QL 120/30
<b>Analgesics</b>		
BUPAP 50 MG-300 MG TABLET	1	PA HRM,QL 180/30
<i>butalb-acetamin-caff 50-300-40</i>	1	PA HRM,QL 180/30

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Drug Name	Drug Tier	Requirements / Limits
<b>butilb-acetamin-caff 50-325-40</b>	1	PA HRM,QL 180/30
<b>butilbit-acetaminophen-caff cp</b>	1	PA HRM,QL 180/30
<b>butilbital-acetaminophn 50-300</b>	1	PA HRM,QL 180/30
<b>butilbital-acetaminophn 50-325</b>	1	PA HRM,QL 180/30
<b>butilbital-asa-caffeine cap</b>	1	PA HRM,QL 180/30
CAPACET CAPSULE	1	PA HRM,QL 180/30
ESGIC CAPSULE	1	PA HRM,QL 180/30
FIORINAL 50-325-40 MG CAPSULE	3	
MARGESIC CAPSULE	1	PA HRM,QL 180/30
MARTEN-TAB 325-50 TABLET	1	PA HRM,QL 180/30
TENCON 50-325 MG TABLET	1	PA HRM,QL 180/30
ZEBUTAL 50-325-40 MG CAPSULE	1	PA HRM,QL 180/30
<b>Androgens</b>		
ANDRODERM 2 MG/24HR PATCH	3	QL 90/30
ANDRODERM 4 MG/24HR PATCH	3	QL 30/30
ANDROGEL 1.62% GEL PUMP	2	QL 150/30
ANDROGEL 1.62%(1.25G) GEL PKT	2	QL 112.5/30

Drug Name	Drug Tier	Requirements / Limits
ANDROGEL 1.62%(2.5G) GEL PKT	2	QL 150/30
ANDROXY 10 MG TABLET	2	
<i>danazol 100 mg capsule</i>	1	
<i>danazol 200 mg capsule</i>	1	
<i>danazol 50 mg capsule</i>	1	
METHITEST 10 MG TABLET	1	
STRIANT 30 MG MUCOADHESIVE	3	QL 60/30
<i>testosteron cyp 1,000 mg/10 ml</i>	1	
<i>testosterone 12.5 mg/1.25 gram</i>	1	QL 300/30
<i>testosterone 25 mg/2.5 gm pkt</i>	1	QL 300/30
<i>testosterone 50 mg/5 gram pkt</i>	1	QL 300/30
<i>testosterone cyp 200 mg/ml</i>	1	
<i>testosterone enan 200 mg/ml</i>	1	QL 5/30
<b>Angioedema Agents</b>		
BERINERT 500 UNIT KIT	4	PA
CINRYZE 500 UNIT VIAL	4	PA,QL 100/30,B/D
FIRAZYR 30 MG/3 ML SYRINGE	4	PA,QL 18/30
KALBITOR 10 MG/ML VIAL	4	PA,B/D
<b>Angiotensin II Receptor Antagonists</b>		
BENICAR 20 MG TABLET	3	QL 30/30,ST
BENICAR 40 MG TABLET	3	QL 30/30,ST
BENICAR 5 MG TABLET	3	QL 30/30,ST
BENICAR HCT 20-12.5 MG TABLET	3	QL 30/30,ST
BENICAR HCT 40-12.5 MG TABLET	3	QL 30/30,ST
BENICAR HCT 40-25 MG TABLET	3	QL 30/30,ST
<i>candesartan cilexetil 16 mg tb</i>	1	QL 30/30
<i>candesartan cilexetil 32 mg tb</i>	1	QL 30/30
<i>candesartan cilexetil 4 mg tab</i>	1	QL 30/30
<i>candesartan cilexetil 8 mg tab</i>	1	QL 30/30
<i>candesartan-hctz 16-12.5 mg tb</i>	1	QL 30/30
<i>candesartan-hctz 32-12.5 mg tb</i>	1	QL 30/30
<i>candesartan-hctz 32-25 mg tab</i>	1	QL 30/30

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Drug Name	Drug Tier	Requirements / Limits
EDARBI 40 MG TABLET	3	ST
EDARBI 80 MG TABLET	3	ST
EDARBYCLOL 40-12.5 MG TABLET	3	ST
EDARBYCLOL 40-25 MG TABLET	3	ST
ENTRESTO 24 MG-26 MG TABLET	2	QL 60/30
ENTRESTO 49 MG-51 MG TABLET	2	QL 60/30
ENTRESTO 97 MG-103 MG TABLET	2	QL 60/30
<b>eprosartan mesylate 600 mg tab</b>	1	QL 30/30
<b>irbesartan 150 mg tablet</b>	1	QL 30/30
<b>irbesartan 300 mg tablet</b>	1	QL 30/30
<b>irbesartan 75 mg tablet</b>	1	QL 30/30
<b>irbesartan-hctz 150-12.5 mg tb</b>	1	QL 30/30
<b>irbesartan-hctz 300-12.5 mg tb</b>	1	QL 30/30
<b>losartan potassium 100 mg tab</b>	1	QL 30/30
<b>losartan potassium 25 mg tab</b>	1	QL 30/30
<b>losartan potassium 50 mg tab</b>	1	QL 60/30
<b>losartan-hctz 100-12.5 mg tab</b>	1	QL 30/30
<b>losartan-hctz 100-25 mg tab</b>	1	QL 30/30
<b>losartan-hctz 50-12.5 mg tab</b>	1	QL 30/30
<b>olmesartan medoxomil 20 mg tab</b>	1	QL 30/30
<b>olmesartan medoxomil 40 mg tab</b>	1	QL 30/30
<b>olmesartan medoxomil 5 mg tab</b>	1	QL 30/30
<b>olmesartan-hctz 20-12.5 mg tab</b>	1	QL 30/30
<b>olmesartan-hctz 40-12.5 mg tab</b>	1	QL 30/30
<b>olmesartan-hctz 40-25 mg tab</b>	1	QL 30/30
<b>telmisartan 20 mg tablet</b>	1	QL 30/30
<b>telmisartan 40 mg tablet</b>	1	QL 30/30
<b>telmisartan 80 mg tablet</b>	1	QL 30/30
<b>telmisartanamlodipine 40-10</b>	1	QL 30/30
<b>telmisartanamlodipine 40-5 mg</b>	1	QL 30/30
<b>telmisartanamlodipine 80-10</b>	1	QL 30/30
<b>telmisartanamlodipine 80-5 mg</b>	1	QL 30/30
<b>telmisartan-hctz 40-12.5 mg tb</b>	1	QL 30/30
<b>telmisartan-hctz 80-12.5 mg tb</b>	1	QL 30/30
<b>telmisartan-hctz 80-25 mg tab</b>	1	QL 30/30
<b>valsartan 160 mg tablet</b>	1	QL 30/30

Drug Name	Drug Tier	Requirements / Limits
<b>valsartan 320 mg tablet</b>	1	QL 30/30
<b>valsartan 40 mg tablet</b>	1	QL 30/30
<b>valsartan 80 mg tablet</b>	1	QL 30/30
<b>valsartan-hctz 160-12.5 mg tab</b>	1	QL 30/30
<b>valsartan-hctz 160-25 mg tab</b>	1	QL 30/30
<b>valsartan-hctz 320-12.5 mg tab</b>	1	QL 30/30
<b>valsartan-hctz 320-25 mg tab</b>	1	QL 30/30
<b>valsartan-hctz 80-12.5 mg tab</b>	1	QL 30/30
<b>Angiotensin-converting Enzyme (ACE) Inhibitors</b>		
<b>benazepril hcl 10 mg tablet</b>	1	QL 30/30
<b>benazepril hcl 20 mg tablet</b>	1	QL 30/30
<b>benazepril hcl 40 mg tablet</b>	1	QL 60/30
<b>benazepril hcl 5 mg tablet</b>	1	QL 30/30
<b>benazepril-hctz 10-12.5 mg tab</b>	1	QL 30/30
<b>benazepril-hctz 20-12.5 mg tab</b>	1	QL 30/30
<b>benazepril-hctz 20-25 mg tab</b>	1	QL 30/30
<b>benazepril-hctz 5-6.25 mg tab</b>	1	QL 30/30
<b>captopril 100 mg tablet</b>	1	
<b>captopril 12.5 mg tablet</b>	1	QL 90/30
<b>captopril 25 mg tablet</b>	1	QL 90/30
<b>captopril 50 mg tablet</b>	1	
<b>captopril-hctz 25-15 mg tablet</b>	1	
<b>captopril-hctz 25-25 mg tablet</b>	1	
<b>captopril-hctz 50-15 mg tablet</b>	1	
<b>captopril-hctz 50-25 mg tablet</b>	1	
<b>enalapril maleate 10 mg tab</b>	1	QL 60/30
<b>enalapril maleate 2.5 mg tab</b>	1	QL 60/30
<b>enalapril maleate 20 mg tab</b>	1	QL 60/30
<b>enalapril maleate 5 mg tablet</b>	1	QL 60/30
<b>enalaprilat 2.5 mg/2 ml vial</b>	1	
<b>enalapril-hctz 10-25 mg tablet</b>	1	QL 60/30
<b>enalapril-hctz 5-12.5 mg tab</b>	1	QL 30/30
<b>fosinopril sodium 10 mg tab</b>	1	QL 60/30
<b>fosinopril sodium 20 mg tab</b>	1	QL 60/30
<b>fosinopril sodium 40 mg tab</b>	1	QL 60/30
<b>fosinopril-hctz 10-12.5 mg tab</b>	1	QL 120/30
<b>fosinopril-hctz 20-12.5 mg tab</b>	1	QL 120/30
<b>lisinopril 10 mg tablet</b>	1	QL 60/30
<b>lisinopril 2.5 mg tablet</b>	1	QL 60/30
<b>lisinopril 20 mg tablet</b>	1	QL 60/30

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Drug Name	Drug Tier	Requirements / Limits
<b>lisinopril 30 mg tablet</b>	1	QL 60/30
<b>lisinopril 40 mg tablet</b>	1	QL 60/30
<b>lisinopril 5 mg tablet</b>	1	QL 60/30
<b>lisinopril-hctz 10-12.5 mg tab</b>	1	QL 30/30
<b>lisinopril-hctz 20-12.5 mg tab</b>	1	QL 120/30
<b>lisinopril-hctz 20-25 mg tab</b>	1	QL 60/30
<b>moexipril hcl 15 mg tablet</b>	1	
<b>moexipril hcl 7.5 mg tablet</b>	1	
<b>moexipril-hctz 15-12.5 mg tab</b>	1	QL 60/30
<b>moexipril-hctz 15-25 mg tablet</b>	1	QL 60/30
<b>moexipril-hctz 7.5-12.5 mg tab</b>	1	QL 30/30
<b>perindopril erbumine 2 mg tab</b>	1	QL 30/30
<b>perindopril erbumine 4 mg tab</b>	1	QL 30/30
<b>perindopril erbumine 8 mg tab</b>	1	QL 60/30
<b>quinapril 10 mg tablet</b>	1	QL 60/30
<b>quinapril 20 mg tablet</b>	1	QL 60/30
<b>quinapril 40 mg tablet</b>	1	QL 60/30
<b>quinapril 5 mg tablet</b>	1	QL 60/30
<b>quinapril-hctz 10-12.5 mg tab</b>	1	QL 30/30
<b>quinapril-hctz 20-12.5 mg tab</b>	1	QL 60/30
<b>quinapril-hctz 20-25 mg tab</b>	1	QL 60/30
<b>ramipril 1.25 mg capsule</b>	1	QL 60/30
<b>ramipril 10 mg capsule</b>	1	QL 60/30
<b>ramipril 2.5 mg capsule</b>	1	QL 60/30
<b>ramipril 5 mg capsule</b>	1	QL 60/30
<b>trandolapril 1 mg tablet</b>	1	QL 30/30
<b>trandolapril 2 mg tablet</b>	1	QL 30/30
<b>trandolapril 4 mg tablet</b>	1	QL 60/30
<b>trandolapr-verapam er 1-240 mg</b>	1	QL 30/30
<b>trandolapr-verapam er 2-180 mg</b>	1	QL 30/30
<b>trandolapr-verapam er 2-240 mg</b>	1	QL 30/30
<b>trandolapr-verapam er 4-240 mg</b>	1	QL 60/30
<b>Anthelmintics</b>		
ALBENZA 200 MG TABLET	3	
BILTRICIDE 600 MG TABLET	3	
<b>ivermectin 3 mg tablet</b>	1	
<b>Antiandrogens</b>		
<b>bicalutamide 50 mg tablet</b>	1	QL 30/30
<b>flutamide 125 mg capsule</b>	1	
<b>nilutamide 150 mg tablet</b>	4	QL 60/30

Drug Name	Drug Tier	Requirements / Limits
XTANDI 40 MG CAPSULE	4	QL 120/30
ZYTIGA 250 MG TABLET	4	QL 120/30
ZYTIGA 500 MG TABLET	4	QL 60/30
<b>Antiangiogenic Agents</b>		
POMALYST 1 MG CAPSULE	4	QL 21/28
POMALYST 2 MG CAPSULE	4	QL 21/28
POMALYST 3 MG CAPSULE	4	QL 21/28
REVLIMID 10 MG CAPSULE	4	QL 28/28
REVLIMID 15 MG CAPSULE	4	QL 21/28
REVLIMID 2.5 MG CAPSULE	4	QL 28/28
REVLIMID 20 MG CAPSULE	4	QL 21/28
REVLIMID 25 MG CAPSULE	4	QL 21/28
REVLIMID 5 MG CAPSULE	4	QL 28/28
THALOMID 100 MG	4	QL 30/30
THALOMID 150 MG	4	QL 30/30
THALOMID 200 MG	4	QL 60/30
THALOMID 50 MG CAPSULE	4	QL 30/30
<b>Antiarrhythmics</b>		
amiodarone 150 mg/3 ml vial	1	
amiodarone 450 mg/9 ml vial	1	
amiodarone 900 mg/18 ml vial	1	
amiodarone hcl 100 mg tablet	1	
amiodarone hcl 200 mg tablet	1	
amiodarone hcl 400 mg tablet	1	
disopyramide 100 mg capsule	1	
disopyramide 150 mg capsule	1	
dofetilide 125 mcg capsule	1	QL 60/30
dofetilide 250 mcg capsule	1	QL 60/30
dofetilide 500 mcg capsule	1	QL 60/30
flecainide acetate 100 mg tab	1	
flecainide acetate 150 mg tab	1	
flecainide acetate 50 mg tab	1	
lidocaine hcl 1% abboject	1	
lidocaine hcl 2% luer-jet	1	
mexiletine 150 mg capsule	1	
mexiletine 200 mg capsule	1	
mexiletine 250 mg capsule	1	
MULTAQ 400 MG TABLET	2	QL 60/30
NORPACE CR 100 MG CAPSULE	3	

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Drug Name	Drug Tier	Requirements / Limits
NORPACE CR 150 MG CAPSULE	3	
PACERONE 100 MG TABLET	1	
PACERONE 200 MG TABLET	1	
PACERONE 400 MG TABLET	1	
<i>procainamide 100 mg/ml vial</i>	1	
<i>procainamide 500 mg/ml vial</i>	1	
<i>propafenone hcl 150 mg tablet</i>	1	
<i>propafenone hcl 225 mg tab</i>	1	
<i>propafenone hcl 300 mg tab</i>	1	
<i>propafenone hcl er 225 mg cap</i>	1	
<i>propafenone hcl er 325 mg cap</i>	1	
<i>propafenone hcl er 425 mg cap</i>	1	
<i>quinidine gluc 80 mg/ml vial</i>	1	
<i>quinidine gluc er 324 mg tab</i>	1	
<i>quinidine sulfate 200 mg tab</i>	1	
<i>quinidine sulfate 300 mg tab</i>	1	
SORINE 120 MG TABLET	1	
SORINE 160 MG TABLET	1	
SORINE 240 MG TABLET	1	
SORINE 80 MG TABLET	1	
<i>sotalol 120 mg tablet</i>	1	
<i>sotalol 160 mg tablet</i>	1	
<i>sotalol 240 mg tablet</i>	1	
<i>sotalol 80 mg tablet</i>	1	
<i>sotalol af 120 mg tablet</i>	1	
<i>sotalol af 160 mg tablet</i>	1	
<i>sotalol af 80 mg tablet</i>	1	
TIKOSYN 125 MCG CAPSULE	3	QL 60/30,ST
TIKOSYN 250 MCG CAPSULE	3	QL 60/30,ST
TIKOSYN 500 MCG CAPSULE	3	QL 60/30,ST
<b>Antibacterials, Other</b>		
AK-POLY-BAC EYE OINTMENT	1	
<i>alcohol 70% prep pads</i>	1	
ALTABAX 1% OINTMENT	3	
BACIIM 50,000 UNIT VIAL	1	
<i>bacitracin 50,000 unit vial</i>	1	
<i>bacitracin 500 unit/gm ophth</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>bacitracin-polymyxin eye oint</i>	1	
BACTROBAN NASAL 2% OINTMENT	2	
<i>chloramphen na succ 1 gm vl</i>	1	
CLEOCIN 100 MG VAGINAL OVULE	3	
CLINDACIN ETZ 1% PLEDGET	1	
CLINDACIN P 1% PLEDGETS	1	
CLINDAMAX 1% GEL	1	
<i>clindamycin 150 mg/ml addvan</i>	1	
<i>clindamycin 2% vaginal cream</i>	1	
<i>clindamycin 300 mg/2 ml addvan</i>	1	
<i>clindamycin 300 mg/50 ml-ns</i>	1	
<i>clindamycin 600 mg/50 ml-ns</i>	1	
<i>clindamycin 900 mg/50 ml-ns</i>	1	
<i>clindamycin 900 mg/6 ml addvan</i>	1	
<i>clindamycin hcl 150 mg capsule</i>	1	
<i>clindamycin hcl 300 mg capsule</i>	1	
<i>clindamycin hcl 75 mg capsule</i>	1	
<i>clindamycin pediatr 75 mg/5 ml</i>	1	
<i>clindamycin ph 1% gel</i>	1	
<i>clindamycin ph 1% solution</i>	1	
<i>clindamycin ph 300 mg/2 ml vl</i>	1	
<i>clindamycin ph 600 mg/4 ml vl</i>	1	
<i>clindamycin ph 9 g/60 ml vial</i>	1	
<i>clindamycin ph 900 mg/6 ml vl</i>	1	
<i>clindamycin phos 1% pledge</i>	1	
<i>clindamycin phosp 1% lotion</i>	1	
<i>clindamycin phosphate 1% foam</i>	1	
<i>clindamycin-d5w 300 mg/50 ml</i>	1	
<i>clindamycin-d5w 600 mg/50 ml</i>	1	
<i>clindamycin-d5w 900 mg/50 ml</i>	1	
CLINDESSE 2% VAGINAL CREAM	3	
<i>colistimethate 150 mg vial</i>	1	
<i>daptomycin 500 mg vial</i>	4	PA,B/D
FEM PH VAGINAL JELLY	2	
<i>lincomycin hcl 600 mg/2 ml vl</i>	1	
<i>linezolid 100 mg/5 ml susp</i>	4	QL 1800/30
<i>linezolid 600 mg tablet</i>	4	QL 60/30
<i>linezolid 600 mg/300 ml iv sol</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<b>linezolid iv soln</b>	1	
<b>linezolid-0.9% nacl 600 mg/300</b>	1	
<b>methenamine hipp 1 gm tablet</b>	1	
<b>methenamine md 1 gm tablet</b>	1	
<b>methenamine md 500 mg tablet</b>	1	
<b>metronidazole 0.75% cream</b>	1	
<b>metronidazole 0.75% lotion</b>	1	
<b>metronidazole 250 mg tablet</b>	1	
<b>metronidazole 375 mg capsule</b>	1	
<b>metronidazole 500 mg tablet</b>	1	
<b>metronidazole 500 mg/100 ml</b>	1	
<b>metronidazole topical 0.75% gl</b>	1	
<b>metronidazole topical 1% gel</b>	1	
<b>metronidazole vaginal 0.75% gl</b>	1	
MONUROL 3 GM SACHET	3	
<b>mupirocin 2% cream</b>	1	
<b>mupirocin 2% ointment</b>	1	
<b>neo-bacit-poly-hc eye ointment</b>	1	
<b>neomyc-bacit-polymix eye oint</b>	1	
<b>neomycin-poly-hc eye drops</b>	1	
<b>neomyc-polym-gramicid eye drop</b>	1	
NEO-POLYCIN EYE OINTMENT	1	
NEO-POLYCIN HC EYE OINTMENT	1	
<b>nitrofurantoin 25 mg/5 ml susp</b>	1	
<b>nitrofurantoin mcr 100 mg cap</b>	1	
<b>nitrofurantoin mcr 25 mg cap</b>	1	
<b>nitrofurantoin mcr 50 mg cap</b>	1	
<b>nitrofurantoin mono-mcr 100 mg</b>	1	
<b>noritate 1% cream</b>	4	
POLYCIN EYE OINTMENT	1	
<b>polymyxin b sulfate vial</b>	1	
<b>polymyxin b-tmp eye drops</b>	1	
PRIMSOL 50 MG/5 ML ORAL SOLN	2	
ROSADAN 0.75% CREAM	1	
ROSADAN 0.75% GEL	1	
<b>silver nitrate 0.5% soln</b>	2	
<b>silver nitrate 10% solution</b>	2	

Drug Name	Drug Tier	Requirements / Limits
<b>silver nitrate 25% solution</b>	2	
<b>silver nitrate 50% solution</b>	2	
<b>silver sulfadiazine 1% cream</b>	1	
SSD 1% CREAM	2	
SYNERCID 500 MG VIAL	4	
<b>tigecycline 50 mg vial</b>	4	
<b>trimethoprim 100 mg tablet</b>	1	
TYGACIL 50 MG VIAL	4	
<b>vanco 500 mg/100 ml-0.9% nacl</b>	1	
<b>vanco 750 mg/150 ml-0.9% nacl</b>	1	
<b>vancomycin 1 g/200ml-0.9% nacl</b>	1	
<b>vancomycin 1 gm vial</b>	1	
<b>vancomycin 500 mg vial</b>	1	
<b>vancomycin 750 mg/150 ml bag</b>	1	
<b>vancomycin hcl 10 gm vial</b>	1	
<b>vancomycin hcl 125 mg capsule</b>	3	QL 40/10
<b>vancomycin hcl 1g/200 ml bag</b>	1	
<b>vancomycin hcl 250 mg capsule</b>	3	QL 80/10
<b>vancomycin hcl 5 gm vial</b>	1	
<b>vancomycin hcl 750 mg vial</b>	1	
<b>vancomycin-d5w 500 mg/100 ml</b>	1	
VANDAZOLE VAGINAL 0.75% GEL	1	
XIFAXAN 200 MG TABLET	3	PA,QL 9/30
XIFAXAN 550 MG TABLET	4	PA,QL 90/30
<b>Anticholinergics</b>		
<b>benztropine 2 mg/2 ml ampule</b>	1	
<b>benztropine mes 0.5 mg tab</b>	1	PA HRM
<b>benztropine mes 1 mg tablet</b>	1	PA HRM
<b>benztropine mes 2 mg tablet</b>	1	PA HRM
<b>trihexyphenidyl 2 mg tablet</b>	1	PA HRM
<b>trihexyphenidyl 2 mg/5 ml elx</b>	1	PA HRM
<b>trihexyphenidyl 5 mg tablet</b>	1	PA HRM
<b>Anticoagulants</b>		
COUMADIN 1 MG TABLET	3	
COUMADIN 10 MG TABLET	3	
COUMADIN 2 MG TABLET	3	
COUMADIN 2.5 MG TABLET	3	
COUMADIN 3 MG TABLET	3	

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Drug Name	Drug Tier	Requirements / Limits
COUMADIN 4 MG TABLET	3	
COUMADIN 5 MG TABLET	3	
COUMADIN 6 MG TABLET	3	
COUMADIN 7.5 MG TABLET	3	
ELIQUIS 2.5 MG TABLET	3	QL 60/30
ELIQUIS 5 MG TABLET	3	QL 74/30
<b>enoxaparin 100 mg/ml syringe</b>	1	QL 30/90
<b>enoxaparin 120 mg/0.8 ml syr</b>	1	QL 24/90
<b>enoxaparin 150 mg/ml syringe</b>	3	QL 30/90
<b>enoxaparin 30 mg/0.3 ml syr</b>	1	QL 9/90
<b>enoxaparin 300 mg/3 ml vial</b>	1	QL 30/90
<b>enoxaparin 40 mg/0.4 ml syr</b>	1	QL 12/90
<b>enoxaparin 60 mg/0.6 ml syr</b>	1	QL 18/90
<b>enoxaparin 80 mg/0.8 ml syr</b>	1	QL 24/90
<b>fondaparinux 10 mg/0.8 ml syr</b>	4	QL 24/30
<b>fondaparinux 2.5 mg/0.5 ml syr</b>	1	QL 15/30
<b>fondaparinux 5 mg/0.4 ml syr</b>	4	QL 12/30
<b>fondaparinux 7.5 mg/0.6 ml syr</b>	4	QL 18/30
FRAGMIN 10,000 UNITS/ML SYRINGE	4	QL 30/30,ST
FRAGMIN 12,500 UNITS/0.5 ML	4	QL 15/30,ST
FRAGMIN 15,000 UNITS/0.6 ML	4	QL 18/30,ST
FRAGMIN 18,000 UNITS/0.72 ML	4	QL 21.6/30,ST
FRAGMIN 2,500 UNITS/0.2 ML SYR	3	QL 6/30,ST
FRAGMIN 5,000 UNITS/0.2 ML SYR	3	QL 6/30,ST
FRAGMIN 7,500 UNITS/0.3 ML SYR	4	QL 9/30,ST
FRAGMIN 95,000 UNITS/3.8 ML VL	4	QL 22.8/30,ST
<b>heparin 10,000 unit/10 ml vial</b>	1	
<b>heparin 10,000 units/5 ml vl</b>	1	
<b>heparin 20,000 unit/500 ml-d5w</b>	1	
<b>heparin 25,000 unit/250-1/2 ns</b>	1	
<b>heparin 25,000 units/10 ml vl</b>	1	
<b>heparin 50,000 unit/10 ml vial</b>	1	
<b>heparin sod 10,000 unit/ml vl</b>	1	

Drug Name	Drug Tier	Requirements / Limits
<b>heparin sod 20,000 unit/ml vl</b>	1	
<b>heparin sod 5,000 unit/0.5 ml</b>	1	
<b>heparin-1/2ns 25,000 units/500</b>	1	
<b>heparin-d5w 25,000 unit/250 ml</b>	1	
<b>heparin-d5w 25,000 unit/500 ml</b>	1	
<b>heparin-ns 1,000 units/500 ml</b>	1	
<b>heparin-ns 2,000 unit/1,000 ml</b>	1	
JANTOVEN 1 MG TABLET	1	
JANTOVEN 10 MG TABLET	1	
JANTOVEN 2 MG TABLET	1	
JANTOVEN 2.5 MG TABLET	1	
JANTOVEN 3 MG TABLET	1	
JANTOVEN 4 MG TABLET	1	
JANTOVEN 5 MG TABLET	1	
JANTOVEN 6 MG TABLET	1	
JANTOVEN 7.5 MG TABLET	1	
PRADAXA 110 MG CAPSULE	2	QL 60/30
PRADAXA 150 MG CAPSULE	2	QL 60/30
PRADAXA 75 MG CAPSULE	2	QL 60/30
SAVAYSA 15 MG TABLET	3	QL 30/30
SAVAYSA 30 MG TABLET	3	QL 30/30
SAVAYSA 60 MG TABLET	3	QL 30/30
<b>warfarin sodium 1 mg tablet</b>	1	
<b>warfarin sodium 10 mg tablet</b>	1	
<b>warfarin sodium 2 mg tablet</b>	1	
<b>warfarin sodium 2.5 mg tablet</b>	1	
<b>warfarin sodium 3 mg tablet</b>	1	
<b>warfarin sodium 4 mg tablet</b>	1	
<b>warfarin sodium 5 mg tablet</b>	1	
<b>warfarin sodium 6 mg tablet</b>	1	
<b>warfarin sodium 7.5 mg tablet</b>	1	
XARELTO 10 MG TABLET	2	QL 30/30
XARELTO 15 MG TABLET	2	QL 60/30
XARELTO 20 MG TABLET	2	QL 30/30
XARELTO STARTER PACK	2	QL 102/365
<b>Anticonvulsants, Other</b>		
APTIOM 200 MG TABLET	4	QL 30/30
APTIOM 400 MG TABLET	4	QL 30/30
APTIOM 600 MG TABLET	4	QL 60/30
APTIOM 800 MG TABLET	4	QL 30/30

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Drug Name	Drug Tier	Requirements / Limits
BRIVIACT 10 MG TABLET	4	QL 60/30
BRIVIACT 10 MG/ML ORAL SOLN	4	QL 1200/30
BRIVIACT 100 MG TABLET	4	QL 120/30
BRIVIACT 25 MG TABLET	4	QL 60/30
BRIVIACT 50 MG TABLET	4	QL 60/30
BRIVIACT 50 MG/5 ML VIAL	4	QL 600/30
BRIVIACT 75 MG TABLET	4	QL 60/30
FYCOMPA 0.5 MG/ML ORAL SUSP	3	QL 720/30
FYCOMPA 10 MG TABLET	3	QL 30/30
FYCOMPA 12 MG TABLET	3	QL 30/30
FYCOMPA 2 MG TABLET	3	QL 30/30
FYCOMPA 4 MG TABLET	3	QL 30/30
FYCOMPA 6 MG TABLET	3	QL 30/30
FYCOMPA 8 MG TABLET	3	QL 30/30
<i>levetiracetam 1,000 mg tablet</i>	1	
<i>levetiracetam 100 mg/ml soln</i>	1	
<i>levetiracetam 250 mg tablet</i>	1	
<i>levetiracetam 500 mg tablet</i>	1	
<i>levetiracetam 500 mg/5 ml vial</i>	1	
<i>levetiracetam 750 mg tablet</i>	1	
<i>levetiracetam er 500 mg tablet</i>	1	QL 180/30
<i>levetiracetam er 750 mg tablet</i>	1	QL 120/30
<i>levetiracetam-nacl 1,000mg/100</i>	1	
<i>levetiracetam-nacl 1,500mg/100</i>	1	
<i>levetiracetam-nacl 500 mg/100</i>	1	
<i>magnesium sulf 1 g/100 ml-d5w</i>	1	PA,B/D
POTIGA 200 MG TABLET	4	QL 90/30
POTIGA 300 MG TABLET	4	QL 90/30
POTIGA 400 MG TABLET	4	QL 90/30
POTIGA 50 MG TABLET	4	QL 90/30
ROWEEPRA 1,000 MG TABLET	1	
ROWEEPRA 500 MG TABLET	1	
ROWEEPRA 750 MG TABLET	1	
SPRITAM 1,000 MG TABLET	3	QL 60/30
SPRITAM 250 MG TABLET	3	QL 60/30
SPRITAM 500 MG TABLET	3	QL 60/30

Drug Name	Drug Tier	Requirements / Limits
SPRITAM 750 MG TABLET	3	QL 120/30
<b>Anti-cytomegalovirus (CMV) Agents</b>		
<i>cidofovir 375 mg/5 ml vial</i>	4	
FOSCAVIR 6,000 MG/250 ML BTTL	3	
<i>ganciclovir 500 mg vial</i>	1	PA,B/D
<i>valganciclovir 450 mg tablet</i>	4	
<i>valganciclovir hcl 50 mg/ml</i>	4	
ZIRGAN 0.15% OPHTHALMIC GEL	2	
<b>Antidementia Agents, Other</b>		
<i>ergoloid mesylates 1 mg tab</i>	1	PA HRM
NAMZARIC 14 MG-10 MG CAPSULE	2	QL 30/30
NAMZARIC 21 MG-10 MG CAPSULE	2	QL 30/30
NAMZARIC 28 MG-10 MG CAPSULE	2	QL 30/30
NAMZARIC 7 MG-10 MG CAPSULE	2	QL 30/30
NAMZARIC TITRATION PACK	2	QL 56/365
<b>Antidepressants, Other</b>		
<i>bupropion hcl 100 mg tablet</i>	1	QL 120/30
<i>bupropion hcl 75 mg tablet</i>	1	QL 60/30
<i>bupropion hcl sr 100 mg tablet</i>	1	QL 60/30
<i>bupropion hcl sr 200 mg tablet</i>	1	QL 60/30
<i>bupropion hcl xl 150 mg tablet</i>	1	QL 90/30
<i>bupropion hcl xl 300 mg tablet</i>	1	QL 30/30
<i>maprotiline 25 mg tablet</i>	1	QL 90/30
<i>maprotiline 50 mg tablet</i>	1	QL 90/30
<i>maprotiline 75 mg tablet</i>	1	QL 90/30
<i>mirtazapine 15 mg odt</i>	1	QL 30/30
<i>mirtazapine 15 mg tablet</i>	1	QL 30/30
<i>mirtazapine 30 mg odt</i>	1	QL 30/30
<i>mirtazapine 30 mg tablet</i>	1	QL 30/30
<i>mirtazapine 45 mg odt</i>	1	QL 30/30
<i>mirtazapine 45 mg tablet</i>	1	QL 30/30
<i>mirtazapine 7.5 mg tablet</i>	1	QL 30/30
<i>nefazodone hcl 100 mg tablet</i>	1	QL 60/30
<i>nefazodone hcl 150 mg tablet</i>	1	QL 60/30
<i>nefazodone hcl 200 mg tablet</i>	1	QL 60/30

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Drug Name	Drug Tier	Requirements / Limits
<b>nefazodone hcl 250 mg tablet</b>	1	QL 60/30
<b>nefazodone hcl 50 mg tablet</b>	1	QL 60/30
<b>trazodone 100 mg tablet</b>	1	
<b>trazodone 150 mg tablet</b>	1	
<b>trazodone 300 mg tablet</b>	1	
<b>trazodone 50 mg tablet</b>	1	
TRINTELLIX 10 MG TABLET	3	QL 30/30,ST
TRINTELLIX 20 MG TABLET	3	QL 30/30,ST
TRINTELLIX 5 MG TABLET	3	QL 30/30,ST
<b>Antidiabetic Agents</b>		
<b>acarbose 100 mg tablet</b>	1	QL 90/30
<b>acarbose 25 mg tablet</b>	1	QL 90/30
<b>acarbose 50 mg tablet</b>	1	QL 90/30
AVANDIA 2 MG TABLET	3	QL 60/30
AVANDIA 4 MG TABLET	3	QL 60/30
BYDUREON 2 MG PEN INJECT	2	QL 4/28
BYDUREON 2 MG VIAL	2	QL 4/28
BYETTA 10 MCG DOSE PEN INJ	2	QL 2.4/30
BYETTA 5 MCG DOSE PEN INJ	2	QL 1.2/30
<b>chlorpropamide 100 mg tablet</b>	1	
<b>chlorpropamide 250 mg tablet</b>	1	
FARXIGA 10 MG TABLET	2	QL 30/30
FARXIGA 5 MG TABLET	2	QL 30/30
<b>glimepiride 1 mg tablet</b>	1	QL 60/30
<b>glimepiride 2 mg tablet</b>	1	QL 60/30
<b>glimepiride 4 mg tablet</b>	1	QL 60/30
<b>glipizide 10 mg tablet</b>	1	QL 120/30
<b>glipizide 5 mg tablet</b>	1	QL 60/30
<b>glipizide er 10 mg tablet</b>	1	QL 60/30
<b>glipizide er 2.5 mg tablet</b>	1	QL 30/30
<b>glipizide er 5 mg tablet</b>	1	QL 30/30
<b>glipizide xl 10 mg tablet</b>	1	QL 60/30
<b>glipizide xl 2.5 mg tablet</b>	1	QL 30/30
<b>glipizide xl 5 mg tablet</b>	1	QL 30/30
<b>glipizide-metformin 2.5-250 mg</b>	1	QL 240/30

Drug Name	Drug Tier	Requirements / Limits
<b>glipizide-metformin 2.5-500 mg</b>	1	QL 120/30
<b>glipizide-metformin 5-500 mg</b>	1	QL 120/30
GLUMETZA ER 1,000 MG TABLET	3	QL 60/30,ST
GLUMETZA ER 500 MG TABLET	3	QL 120/30,ST
<b>glyburide 1.25 mg tablet</b>	1	PA HRM
<b>glyburide 2.5 mg tablet</b>	1	PA HRM
<b>glyburide 5 mg tablet</b>	1	PA HRM
<b>glyburide micro 1.5 mg tab</b>	1	PA HRM
<b>glyburide micro 3 mg tablet</b>	1	PA HRM
<b>glyburide micro 6 mg tablet</b>	1	PA HRM
<b>glyburide-metformin 2.5-500 mg</b>	1	PA HRM
<b>glyburide-metformin 5-500 mg</b>	1	PA HRM
<b>glyburid-metformin 1.25-250 mg</b>	1	PA HRM
INVOKAMET 150-1,000 MG TABLET	2	QL 60/30
INVOKAMET 150-500 MG TABLET	2	QL 60/30
INVOKAMET 50-1,000 MG TABLET	2	QL 60/30
INVOKAMET 50-500 MG TABLET	2	QL 60/30
INVOKAMET XR 150-1,000 MG TAB	2	QL 60/30
INVOKAMET XR 150-500 MG TABLET	2	QL 60/30
INVOKAMET XR 50-1,000 MG TAB	2	QL 60/30
INVOKAMET XR 50-500 MG TABLET	2	QL 60/30
INVOKANA 100 MG TABLET	2	QL 30/30
INVOKANA 300 MG TABLET	2	QL 30/30
JANUMET 50-1,000 MG TABLET	2	QL 60/30
JANUMET 50-500 MG TABLET	2	QL 60/30
JANUMET XR 100-1,000 MG TABLET	2	QL 30/30
JANUMET XR 50-1,000 MG TABLET	2	QL 60/30
JANUMET XR 50-500 MG TABLET	2	QL 30/30

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Drug Name	Drug Tier	Requirements / Limits
JANUVIA 100 MG TABLET	2	QL 30/30
JANUVIA 25 MG TABLET	2	QL 30/30
JANUVIA 50 MG TABLET	2	QL 30/30
JARDIANCE 10 MG TABLET	3	QL 30/30
JARDIANCE 25 MG TABLET	3	QL 30/30
JENTADUETO 2.5 MG-1000 MG TAB	2	QL 60/30
JENTADUETO 2.5 MG-500 MG TAB	2	QL 60/30
JENTADUETO 2.5 MG-850 MG TAB	2	QL 60/30
JENTADUETO XR 2.5 MG-1,000 MG	2	QL 60/30
JENTADUETO XR 5 MG-1,000 MG TB	2	QL 30/30
KOMBIGLYZE XR 2.5-1,000 MG TAB	3	QL 60/30,ST
KOMBIGLYZE XR 5-1,000 MG TAB	3	QL 30/30,ST
KOMBIGLYZE XR 5-500 MG TABLET	3	QL 30/30,ST
<b>metformin er 1,000 mg osm-tab</b>	1	QL 60/30
<b>metformin hcl 1,000 mg tablet</b>	1	QL 60/30
<b>metformin hcl 500 mg tablet</b>	1	QL 150/30
<b>metformin hcl 850 mg tablet</b>	1	QL 90/30
<b>metformin hcl er 1,000 mg tab (generic for glumetza)</b>	1	QL 60/30,ST
<b>metformin hcl er 500 mg osm-tb</b>	1	QL 150/30
<b>metformin hcl er 500 mg tab (generic for glumetza)</b>	1	QL 120/30,ST
<b>metformin hcl er 500 mg tablet</b>	1	QL 120/30
<b>metformin hcl er 750 mg tablet</b>	1	QL 60/30
<b>miglitol 100 mg tablet</b>	1	QL 90/30
<b>miglitol 25 mg tablet</b>	1	QL 90/30
<b>miglitol 50 mg tablet</b>	1	QL 90/30
<b>nateglinide 120 mg tablet</b>	1	QL 90/30
<b>nateglinide 60 mg tablet</b>	1	QL 90/30
ONGLYZA 2.5 MG TABLET	3	QL 30/30,ST
ONGLYZA 5 MG TABLET	3	QL 30/30,ST
<b>pioglitazone hcl 15 mg tablet</b>	1	QL 30/30

Drug Name	Drug Tier	Requirements / Limits
<b>pioglitazone hcl 30 mg tablet</b>	1	QL 30/30
<b>pioglitazone hcl 45 mg tablet</b>	1	QL 30/30
<b>pioglitazone-glimepiride 30-2</b>	1	QL 30/30
<b>pioglitazone-glimepiride 30-4</b>	1	QL 30/30
<b>pioglitazone-metformin 15-500</b>	1	QL 90/30
<b>pioglitazone-metformin 15-850</b>	1	QL 90/30
<b>repaglinide 0.5 mg tablet</b>	1	QL 120/30
<b>repaglinide 1 mg tablet</b>	1	QL 120/30
<b>repaglinide 2 mg tablet</b>	1	QL 240/30
RIOMET 500 MG/5 ML SOLUTION	2	QL 750/30
SYMLINPEN 120 PEN INJECTOR	3	PA,QL 10.8/28
SYMLINPEN 60 PEN INJECTOR	3	PA,QL 6/30
SYNJARDY 12.5-1,000 MG TABLET	3	QL 60/30
SYNJARDY 12.5-500 MG TABLET	3	QL 60/30
SYNJARDY 5-1,000 MG TABLET	3	QL 60/30
SYNJARDY 5-500 MG TABLET	3	QL 60/30
SYNJARDY XR 10-1,000 MG TABLET	3	QL 30/30
SYNJARDY XR 12.5-1,000 MG TAB	3	QL 60/30
SYNJARDY XR 25-1,000 MG TABLET	3	QL 30/30
SYNJARDY XR 5-1,000 MG TABLET	3	QL 60/30
<b>tolazamide 250 mg tablet</b>	1	
<b>tolazamide 500 mg tablet</b>	1	
<b>tolbutamide 500 mg tablet</b>	1	
TRADJENTA 5 MG TABLET	2	QL 30/30
TRULICITY 0.75 MG/0.5 ML PEN	2	QL 2/28
TRULICITY 1.5 MG/0.5 ML PEN	2	QL 2/28
VICTOZA 3-PAK 18 MG/3 ML PEN	2	QL 9/30
XIGDUO XR 10 MG-1,000 MG TAB	2	QL 30/30
XIGDUO XR 10 MG-500 MG TABLET	2	QL 30/30

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Drug Name	Drug Tier	Requirements / Limits
XIGDUO XR 5 MG-1,000 MG TABLET	2	QL 60/30
XIGDUO XR 5 MG-500 MG TABLET	2	QL 30/30
<b>Antiemetics, Other</b>		
<i>dimenhydrinate 50 mg/ml vial</i>	1	
<i>droperidol 2.5 mg/ml ampul</i>	1	
<i>hydroxyzine 10 mg/5 ml soln</i>	1	
<i>hydroxyzine hcl 10 mg tablet</i>	1	
<i>hydroxyzine hcl 25 mg tablet</i>	1	
<i>meclizine 12.5 mg tablet</i>	1	
<i>meclizine 25 mg tablet</i>	1	
PHENADOZ 12.5 MG SUPPOSITORY	1	
PHENADOZ 25 MG SUPPOSITORY	1	
PHENERGAN 12.5 MG SUPPOSITORY	1	
PHENERGAN 25 MG SUPPOSITORY	1	
PHENERGAN 50 MG SUPPOSITORY	1	
<i>promethazine 12.5 mg suppos</i>	1	
<i>promethazine 25 mg suppository</i>	1	
<i>promethazine 50 mg suppository</i>	1	
PROMETHEGAN 12.5 MG SUPPOS	1	
PROMETHEGAN 25 MG SUPPOSITORY	1	
PROMETHEGAN 50 MG SUPPOSITORY	1	
TIGAN 100 MG/ML VIAL	3	
TRANSDERM-SCOP 1.5 MG/3 DAY	3	QL 10/30
<i>trimethobenzamide 300 mg cap</i>	1	
<b>Antiestrogens/Modifiers</b>		
EMCYT 140 MG CAPSULE	2	
FARESTON 60 MG TABLET	4	QL 30/30
FASLODEX 250 MG/5 ML SYRINGE	4	PA,QL 30/30,B/D
SOLTAMOX 10 MG/5 ML SOLN	4	

Drug Name	Drug Tier	Requirements / Limits
<i>tamoxifen 10 mg tablet</i>	1	
<i>tamoxifen 20 mg tablet</i>	1	
<b>Antifungals</b>		
ABELCET 100 MG/20 ML VIAL	4	PA,B/D
AMBISOME 50 MG VIAL	4	PA,B/D
<i>amphotericin b 50 mg vial</i>	1	PA,B/D
BENSAL HP 3% OINTMENT	3	
CANCIDAS IV 50 MG VIAL	4	PA
CANCIDAS IV 70 MG VIAL	4	PA
CICLODAN 0.77% CREAM	1	
CICLODAN 0.77% CREAM KIT	2	+
CICLODAN 8% SOLUTION	1	
<i>ciclopirox 0.77% cream</i>	1	
<i>ciclopirox 0.77% gel</i>	1	
<i>ciclopirox 0.77% topical susp</i>	1	
<i>ciclopirox 1% shampoo</i>	1	
<i>ciclopirox 8% solution</i>	1	
<i>clotrimazole 1% cream</i>	1	
<i>clotrimazole 1% solution</i>	1	
<i>clotrimazole 10 mg troche</i>	1	
<i>clotrimazole-betamethasone crm</i>	1	
<i>clotrimazole-betamethasone lot</i>	1	
<i>econazole nitrate 1% cream</i>	1	
<i>fluconazole 10 mg/ml susp</i>	1	
<i>fluconazole 100 mg tablet</i>	1	
<i>fluconazole 150 mg tablet</i>	1	
<i>fluconazole 200 mg tablet</i>	1	
<i>fluconazole 40 mg/ml susp</i>	1	
<i>fluconazole 50 mg tablet</i>	1	
<i>fluconazole-dext 200 mg/100 ml</i>	1	
<i>fluconazole-dext 400 mg/200 ml</i>	1	
<i>fluconazole-nacl 100 mg/50 ml</i>	1	
<i>fluconazole-nacl 200 mg/100 ml</i>	1	
<i>fluconazole-nacl 400 mg/200 ml</i>	1	
<i>flucytosine 250 mg capsule</i>	4	
<i>flucytosine 500 mg capsule</i>	4	
<i>griseofulvin 125 mg/5 ml susp</i>	1	
<i>griseofulvin micro 500 mg tab</i>	1	
<i>griseofulvin ultra 125 mg tab</i>	1	
<i>griseofulvin ultra 250 mg tab</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
GYNAZOLE 1 2% CREAM	3	
<i>itraconazole 100 mg capsule</i>	1	PA,QL 120/30
<i>ketoconazole 2% cream</i>	1	
<i>ketoconazole 2% shampoo</i>	1	
<i>ketoconazole 200 mg tablet</i>	1	
MICONAZOLE 3 200 MG VAG SUPP	1	
MYCAMINE 100 MG VIAL	4	
MYCAMINE 50 MG VIAL	4	
<i>naftifine hcl 1% cream</i>	1	
<i>naftifine hcl 2% cream</i>	1	
NAFTIN 1% GEL	2	
NAFTIN 2% CREAM	3	
NAFTIN 2% GEL	2	
NATACYN EYE DROPS	2	
NOXAFIL 40 MG/ML SUSPENSION	4	PA,QL 600/30
NOXAFIL DR 100 MG TABLET	4	PA,QL 96/30
NYAMYC 100,000 UNITS/GM POWDER	1	
<i>nystatin 100,000 unit/gm cream</i>	1	
<i>nystatin 100,000 unit/gm powd</i>	1	
<i>nystatin 100,000 unit/ml susp</i>	1	
<i>nystatin 100,000 units/gm oint</i>	1	
<i>nystatin 500,000 unit oral tab</i>	1	
<i>nystatin-triamcinolone cream</i>	1	
<i>nystatin-triamcinolone ointm</i>	1	
NYSTOP 100,000 UNITS/GM POWDER	1	
<i>oxiconazole nitrate 1% cream</i>	1	
OXISTAT 1% LOTION	3	
SPORANOX 10 MG/ML SOLUTION	4	PA
<i>terbinafine hcl 250 mg tablet</i>	1	QL 90/365
<i>terconazole 0.4% cream</i>	1	
<i>terconazole 0.8% cream</i>	1	
<i>terconazole 80 mg suppository</i>	1	
<i>voriconazole 200 mg tablet</i>	3	PA,QL 90/30

Drug Name	Drug Tier	Requirements / Limits
<i>voriconazole 200 mg vial</i>	4	PA
<i>voriconazole 40 mg/ml susp</i>	4	PA,QL 300/30
<i>voriconazole 50 mg tablet</i>	3	PA,QL 90/30
ZAZOLE 0.8% VAGINAL CREAM	1	
ZAZOLE 80 MG VAGINAL SUPP	1	
ZAZOLE VAGINAL 0.4% CREAM	1	
<b>Antigout Agents</b>		
<i>allopurinol 100 mg tablet</i>	1	
<i>allopurinol 300 mg tablet</i>	1	
<i>allopurinol sodium 500 mg vial</i>	1	
<i>colchicine 0.6 mg capsule</i>	1	QL 60/30
<i>colchicine 0.6 mg tablet</i>	1	QL 120/30
MITIGARE 0.6 MG CAPSULE	2	QL 60/30
<i>probenecid 500 mg tablet</i>	1	
<i>probenecid-colchicine tabs</i>	1	
ULORIC 40 MG TABLET	2	QL 30/30,ST
ULORIC 80 MG TABLET	2	QL 30/30,ST
<b>Anti-hepatitis B (HBV) Agents</b>		
<i>adefovir dipivoxil 10 mg tab</i>	4	QL 30/30
BARACLUDE 0.05 MG/ML SOLUTION	2	QL 630/30
<i>entecavir 0.5 mg tablet</i>	1	QL 30/30
<i>entecavir 1 mg tablet</i>	1	QL 30/30
EPIVIR HBV 25 MG/5 ML SOLN	2	
INTRON A 10 MILLION UNITS VIAL	4	
INTRON A 18 MILLION UNIT/3 ML	3	
INTRON A 18 MILLION UNITS VIAL	3	
INTRON A 25 MILLION UNIT/2.5ML	4	
INTRON A 50 MILLION UNITS VIAL	4	
<i>lamivudine hbv 100 mg tablet</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
TYZEKA 600 MG TABLET	4	PA,QL 30/30
<b>Anti-hepatitis C (HCV) Agents, Direct Acting Agents</b>		
EPCLUSA 400 MG-100 MG TABLET	4	PA,QL 28/28
HARVONI 90-400 MG TABLET	4	PA,QL 28/28
SOVALDI 400 MG TABLET	4	PA,QL 28/28
<b>Anti-hepatitis C (HCV) Agents, Other</b>		
PEGASYS 180 MCG/0.5 ML SYRINGE	4	PA,QL 2/28
PEGASYS 180 MCG/ML VIAL	4	PA,QL 4/28
PEGASYS PROCLICK 135 MCG/0.5	4	PA,QL 2/28
PEGASYS PROCLICK 180 MCG/0.5	4	PA,QL 2/28
<i>ribavirin 200 mg capsule</i>	1	QL 168/28
<i>ribavirin 200 mg tablet</i>	1	QL 168/28
<b>Antiherpetic Agents</b>		
<i>acyclovir 200 mg capsule</i>	1	
<i>acyclovir 200 mg/5 ml susp</i>	1	
<i>acyclovir 400 mg tablet</i>	1	
<i>acyclovir 5% ointment</i>	1	QL 30/30
<i>acyclovir 500 mg/10 ml vial</i>	1	PA,B/D
<i>acyclovir 800 mg tablet</i>	1	
<i>acyclovir sodium 500 mg vial</i>	1	PA,B/D
DENAVIR 1% CREAM	2	
<i>famciclovir 125 mg tablet</i>	1	QL 60/30
<i>famciclovir 250 mg tablet</i>	1	QL 60/30
<i>famciclovir 500 mg tablet</i>	1	QL 60/30
<i>trifluridine 1% eye drops</i>	1	
<i>valacyclovir hcl 1 gram tablet</i>	1	QL 30/30
<i>valacyclovir hcl 500 mg tablet</i>	1	QL 30/30
ZOVIRAX 5% CREAM	3	
<b>Antihistamines</b>		
ARBINOXA 4 MG TABLET	1	
<i>azelastine 0.1% (137 mcg) spry</i>	1	QL 30/25
<i>azelastine 0.15% nasal spray</i>	1	QL 30/25
<i>carbinoxamine 4 mg/5 ml liquid</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>carbinoxamine maleate 4 mg tab</i>	1	
CLARINEX-D 12 HOUR TABLET	3	QL 60/30
<i>clemastine fum 2.68 mg tab</i>	1	
<i>ciproheptadine 2 mg/5 ml syrup</i>	1	
<i>ciproheptadine 4 mg tablet</i>	1	
<i>desloratadine 2.5 mg odt</i>	1	QL 30/30
<i>desloratadine 5 mg odt</i>	1	QL 30/30
<i>desloratadine 5 mg tablet</i>	1	QL 30/30
<i>diphenhydramine 50 mg/ml vial</i>	1	
DYMISTA NASAL SPRAY	2	
<i>hydroxyzine 25 mg/ml vial</i>	1	
<i>hydroxyzine 50 mg/ml vial</i>	1	
<i>hydroxyzine hcl 50 mg tablet</i>	1	
<i>hydroxyzine pam 100 mg cap</i>	1	
<i>hydroxyzine pam 25 mg cap</i>	1	
<i>hydroxyzine pam 50 mg cap</i>	1	
<i>levocetirizine 2.5 mg/5 ml sol</i>	1	QL 300/30
<i>levocetirizine 5 mg tablet</i>	1	QL 30/30
<i>promethazine 12.5 mg tablet</i>	1	PA HRM
<i>promethazine 25 mg tablet</i>	1	PA HRM
<i>promethazine 25 mg/ml vial</i>	1	PA HRM
<i>promethazine 50 mg tablet</i>	1	PA HRM
<i>promethazine 50 mg/ml vial</i>	1	PA HRM
<i>promethazine 6.25 mg/5 ml syrup</i>	1	PA HRM
SEMPREX-D 8 MG-60 MG CAPSULE	3	
<b>Anti-HIV Agents, Integrase Inhibitors (INSTI)</b>		
GENVOYA TABLET	4	QL 30/30
ISENTRESS 100 MG POWDER PACKET	4	QL 180/30
ISENTRESS 100 MG TABLET CHEW	4	QL 180/30
ISENTRESS 25 MG TABLET CHEW	2	QL 180/30
ISENTRESS 400 MG TABLET	4	QL 60/30
TIVICAY 10 MG TABLET	3	QL 60/30
TIVICAY 25 MG TABLET	3	QL 60/30
TIVICAY 50 MG TABLET	4	QL 60/30
VITEKTA 150 MG TABLET	4	QL 30/30
VITEKTA 85 MG TABLET	4	QL 30/30

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Drug Name	Drug Tier	Requirements / Limits
<b>Anti-HIV Agents, Non-nucleoside Reverse Transcriptase Inhibitors (NNRTI)</b>		
COMPLERA TABLET	4	QL 30/30
EDURANT 25 MG TABLET	4	QL 30/30
INTELENCE 100 MG TABLET	4	QL 60/30
INTELENCE 200 MG TABLET	4	QL 60/30
INTELENCE 25 MG TABLET	3	QL 120/30
<b>nevirapine 200 mg tablet</b>	1	QL 60/30
<b>nevirapine 50 mg/5 ml susp</b>	1	QL 1200/30
<b>nevirapine er 100 mg tablet</b>	1	QL 90/30
<b>nevirapine er 400 mg tablet</b>	1	QL 30/30
ODEFSEY TABLET	4	QL 30/30
RESCRIPTOR 100 MG TABLET	2	QL 270/30
RESCRIPTOR 200 MG TABLET	2	QL 180/30
STRIBILD TABLET	4	QL 30/30
SUSTIVA 200 MG CAPSULE	4	QL 60/30
SUSTIVA 50 MG CAPSULE	2	QL 90/30
SUSTIVA 600 MG TABLET	4	QL 30/30
<b>Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI)</b>		
<b>abacavir 300 mg tablet</b>	1	QL 60/30
<b>abacavir-lamivudine 600-300 mg</b>	4	QL 30/30
<b>abacavir-lamivudine-zidov tab</b>	4	QL 60/30
DESCOVI 200-25 MG TABLET	4	QL 30/30
<b>didanosine dr 125 mg capsule</b>	1	QL 30/30
<b>didanosine dr 200 mg capsule</b>	1	QL 30/30
<b>didanosine dr 250 mg capsule</b>	1	QL 30/30
<b>didanosine dr 400 mg capsule</b>	1	QL 30/30
EMTRIVA 10 MG/ML SOLUTION	2	QL 680/28
EMTRIVA 200 MG CAPSULE	2	QL 30/30
<b>lamivudine 10 mg/ml oral soln</b>	1	QL 900/30
<b>lamivudine 150 mg tablet</b>	1	QL 60/30
<b>lamivudine 300 mg tablet</b>	1	QL 30/30
<b>lamivudine-zidovudine tablet</b>	1	QL 60/30
RETROVIR 200 MG/20 ML VIAL	3	
<b>stavudine 1 mg/ml solution</b>	1	QL 2400/30
<b>stavudine 15 mg capsule</b>	1	QL 60/30

Drug Name	Drug Tier	Requirements / Limits
<b>stavudine 20 mg capsule</b>	1	QL 60/30
<b>stavudine 30 mg capsule</b>	1	QL 60/30
<b>stavudine 40 mg capsule</b>	1	QL 60/30
TRUVADA 100 MG-150 MG TABLET	4	QL 30/30
TRUVADA 133 MG-200 MG TABLET	4	QL 30/30
TRUVADA 167 MG-250 MG TABLET	4	QL 30/30
TRUVADA 200 MG-300 MG TABLET	4	QL 30/30
VIDEX 2 GM PEDIATRIC SOLN	2	QL 900/30
VIDEX 4 GM PEDIATRIC SOLN	2	QL 1200/30
VIREAD 150 MG TABLET	4	QL 30/30
VIREAD 200 MG TABLET	4	QL 30/30
VIREAD 250 MG TABLET	4	QL 30/30
VIREAD 300 MG TABLET	4	QL 30/30
VIREAD POWDER	4	QL 240/30
ZERIT 1 MG/ML SOLUTION	2	QL 2400/30
ZIAGEN 20 MG/ML SOLUTION	2	QL 960/30
<b>zidovudine 100 mg capsule</b>	1	QL 180/30
<b>zidovudine 300 mg tablet</b>	1	QL 60/30
<b>zidovudine 50 mg/5 ml syrup</b>	1	QL 1680/28
<b>Anti-HIV Agents, Other</b>		
ATRIPLA TABLET	4	QL 30/30
FUZEON 90 MG VIAL	4	QL 60/30
ISENTRESS HD 600 MG TABLET	4	QL 60/30
SELZENTRY 150 MG TABLET	4	QL 60/30
SELZENTRY 20 MG/ML ORAL SOLN	4	QL 1610/26
SELZENTRY 25 MG TABLET	3	QL 240/30
SELZENTRY 300 MG TABLET	4	QL 120/30
SELZENTRY 75 MG TABLET	4	QL 60/30
TRIUMEQ TABLET	4	QL 30/30
TYBOST 150 MG TABLET	2	QL 30/30
<b>Anti-HIV Agents, Protease Inhibitors</b>		
APTIVUS 100 MG/ML SOLUTION	4	QL 285/28
APTIVUS 250 MG CAPSULE	4	QL 120/30
CRIXIVAN 200 MG CAPSULE	2	QL 270/30

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Drug Name	Drug Tier	Requirements / Limits
CRIXIVAN 400 MG CAPSULE	2	QL 180/30
EVOTAZ 300 MG-150 MG TABLET	4	QL 30/30
INVIRASE 200 MG CAPSULE	4	QL 300/30
INVIRASE 500 MG TABLET	4	QL 120/30
KALETRA 100-25 MG TABLET	3	QL 300/30
KALETRA 200-50 MG TABLET	4	QL 120/30
KALETRA 80 MG-20 MG/ML SOLN	3	QL 480/30
LEXIVA 50 MG/ML SUSPENSION	3	QL 1575/28
LEXIVA 700 MG TABLET	4	QL 120/30
<i>lopinavir-ritonavir 80-20mg/ml</i>	1	QL 480/30
NORVIR 100 MG SOFTGEL CAP	3	QL 360/30
NORVIR 100 MG TABLET	3	QL 360/30
NORVIR 80 MG/ML SOLUTION	3	QL 480/30
PREZCOBIX 800 MG-150 MG TABLET	4	QL 30/30
PREZISTA 100 MG/ML SUSPENSION	4	QL 400/30
PREZISTA 150 MG TABLET	3	QL 180/30
PREZISTA 600 MG TABLET	4	QL 60/30
PREZISTA 75 MG TABLET	3	QL 210/30
PREZISTA 800 MG TABLET	4	QL 30/30
REYATAZ 150 MG CAPSULE	4	QL 30/30
REYATAZ 200 MG CAPSULE	4	QL 60/30
REYATAZ 300 MG CAPSULE	4	QL 30/30
REYATAZ 50 MG POWDER PACKET	4	QL 180/30
VIRACEPT 250 MG TABLET	4	QL 270/30
VIRACEPT 625 MG TABLET	4	QL 120/30
<b>Anti-inflammatories, Inhaled Corticosteroids</b>		
ADVAIR 100-50 DISKUS	2	QL 60/30
ADVAIR 250-50 DISKUS	2	QL 60/30
ADVAIR 500-50 DISKUS	2	QL 60/30
ADVAIR HFA 115-21 MCG INHALER	2	QL 12/30
ADVAIR HFA 230-21 MCG INHALER	2	QL 12/30
ADVAIR HFA 45-21 MCG INHALER	2	QL 12/30

Drug Name	Drug Tier	Requirements / Limits
ALVESCO 160 MCG INHALER	3	ST
ALVESCO 80 MCG INHALER	3	ST
ARNUITY ELLIPTA 100 MCG INH	2	QL 30/30
ARNUITY ELLIPTA 200 MCG INH	2	QL 30/30
ASMANEX HFA 100 MCG INHALER	3	ST
ASMANEX HFA 200 MCG INHALER	3	ST
ASMANEX TWISTHALER 110 MCG #30	3	ST
ASMANEX TWISTHALER 110 MCG #7	3	ST
ASMANEX TWISTHALER 220 MCG #14	3	ST
ASMANEX TWISTHALER 220 MCG #30	3	ST
ASMANEX TWISTHALER 220 MCG #60	3	ST
ASMANEX TWISTHALR 220 MCG #120	3	ST
BREO ELLIPTA 100-25 MCG INH	2	QL 60/30
BREO ELLIPTA 200-25 MCG INH	2	QL 60/30
<i>budesonide 0.25 mg/2 ml susp</i>	1	PA,QL 120/30,B/D
<i>budesonide 0.5 mg/2 ml susp</i>	1	PA,QL 120/30,B/D
<i>budesonide 1 mg/2 ml inh susp</i>	1	PA,QL 120/30,B/D
<i>budesonide 32 mcg nasal spray</i>	1	QL 17.2/30
DULERA 100 MCG/5 MCG INHALER	3	
DULERA 200 MCG/5 MCG INHALER	3	
FLOVENT 100 MCG DISKUS	2	QL 60/30
FLOVENT 250 MCG DISKUS	2	QL 240/30
FLOVENT 50 MCG DISKUS	2	QL 60/30
FLOVENT HFA 110 MCG INHALER	2	QL 12/30

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Drug Name	Drug Tier	Requirements / Limits
FLOVENT HFA 220 MCG INHALER	2	QL 24/30
FLOVENT HFA 44 MCG INHALER	2	QL 10.6/30
<b>flunisolide 0.025% spray</b>	1	QL 50/30
<b>fluticasone prop 50 mcg spray</b>	1	QL 16/30
<b>mometasone furoate 50 mcg spry</b>	1	QL 34/30
NASONEX 50 MCG NASAL SPRAY	3	QL 34/30,ST
OMNARIS 50 MCG NASAL SPRAY	3	QL 12.5/30,ST
PULMICORT 180 MCG FLEXHALER	3	QL 2/30,ST
PULMICORT 90 MCG FLEXHALER	3	QL 1/30,ST
QVAR 40 MCG ORAL INHALER	3	ST
QVAR 80 MCG ORAL INHALER	3	ST
SYMBICORT 160-4.5 MCG INHALER	3	
SYMBICORT 80-4.5 MCG INHALER	3	
<b>triamcinolone 55 mcg nasal spr</b>	1	
VERAMYST 27.5 MCG NASAL SPRAY	3	QL 10/30,ST
ZETONNA 37 MCG NASAL SPRAY	3	QL 6.1/30,ST
<b>Anti-influenza Agents</b>		
<b>amantadine 100 mg tablet</b>	1	
<b>amantadine 50 mg/5 ml solution</b>	1	
<b>oseltamivir phos 30 mg capsule</b>	1	QL 112/365
<b>oseltamivir phos 45 mg capsule</b>	1	QL 56/365
<b>oseltamivir phos 75 mg capsule</b>	1	QL 56/365
RELENZA 5 MG DISKHALER	3	QL 120/365
<b>rimantadine hcl 100 mg tablet</b>	1	
TAMIFLU 6 MG/ML SUSPENSION	3	QL 700/365
<b>Antileukotrienes</b>		
<b>montelukast sod 10 mg tablet</b>	1	QL 30/30
<b>montelukast sod 4 mg granules</b>	1	QL 30/30

Drug Name	Drug Tier	Requirements / Limits
<b>montelukast sod 4 mg tab chew</b>	1	QL 30/30
<b>montelukast sod 5 mg tab chew</b>	1	QL 30/30
<b>zafirlukast 10 mg tablet</b>	1	QL 60/30
<b>zafirlukast 20 mg tablet</b>	1	QL 60/30
ZYFLO CR 600 MG TABLET	3	
<b>Antimetabolites</b>		
ADRUCIL 2,500 MG/50 ML VIAL	1	PA,B/D
ADRUCIL 5 GRAM/100 ML VIAL	1	PA,B/D
ADRUCIL 500 MG/10 ML VIAL	1	PA,B/D
ALIMTA 100 MG VIAL	4	PA,B/D
ALIMTA 500 MG VIAL	4	PA,B/D
ARRANON 250 MG/50 ML VIAL	3	
<b>cladribine 10 mg/10 ml vial</b>	3	PA,B/D
<b>clofarabine 20 mg/20 ml vial</b>	3	PA,B/D
CLOLAR 20 MG/20 ML VIAL	3	PA,B/D
<b>cytarabine 100 mg/5 ml vial</b>	1	PA,B/D
<b>cytarabine 1000 mg/50 ml vial</b>	1	PA,B/D
<b>cytarabine 2 g/20 ml vial</b>	1	PA,B/D
<b>cytarabine 20 mg/ml vial</b>	1	PA,B/D
DROXIA 200 MG CAPSULE	2	
DROXIA 300 MG CAPSULE	2	
DROXIA 400 MG CAPSULE	2	
ELITEK 1.5 MG VIAL	4	PA,B/D
ELITEK 7.5 MG VIAL	4	PA,B/D
<b>floxuridine 500 mg vial</b>	1	PA,B/D
<b>fluorouracil 1,000 mg/20 ml v</b>	1	PA,B/D
<b>fluorouracil 2,500 mg/50 ml v</b>	1	PA,B/D
<b>fluorouracil 5,000 mg/100 ml</b>	1	PA,B/D
<b>fluorouracil 500 mg/10 ml vial</b>	1	PA,B/D
FOLOTYN 20 MG/ML VIAL	4	PA,B/D
FOLOTYN 40 MG/2 ML VIAL	4	PA,B/D
<b>gemcitabine 1 gram/26.3 ml v</b>	1	PA,B/D
<b>gemcitabine 2 gram/52.6 ml v</b>	1	PA,B/D
<b>gemcitabine 200 mg/5.26 ml v</b>	1	PA,B/D
<b>gemcitabine hcl 1 gram vial</b>	4	PA,B/D
<b>gemcitabine hcl 2 gram vial</b>	1	PA,B/D
<b>gemcitabine hcl 200 mg vial</b>	1	PA,B/D
<b>hydroxyurea 500 mg capsule</b>	1	
LONSURF 15 MG-6.14 MG TABLET	4	QL 100/28

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Drug Name	Drug Tier	Requirements / Limits
LONSURF 20 MG-8.19 MG TABLET	4	QL 80/28
<b>mercaptopurine 50 mg tablet</b>	1	
NIPENT 10 MG VIAL	4	PA,B/D
PURIXAN 20 MG/ML ORAL SUSP	4	QL 300/30
TABLOID 40 MG TABLET	2	
<b>Antimigraine Agents</b>		
<i>isomethept-caff-acetaminophen</i>	1	+
<i>isomethept-dichloralp-acetamin</i>	1	+
MIGRAGESIC IDA CAPSULE	2	+
NODOLOR CAPSULE	2	+
PRODRIN CAPLET	2	+
<b>Antimyasthenic Agents</b>		
PROSTIGMIN 15 MG TABLET	3	
<b>Antimycobacterials, Other</b>		
<i>dapsone 100 mg tablet</i>	1	
<i>dapsone 25 mg tablet</i>	1	
<i>rifabutin 150 mg capsule</i>	1	
<b>Antineoplastics</b>		
FARYDAK 10 MG CAPSULE	4	QL 6/21
FARYDAK 15 MG CAPSULE	4	QL 6/21
FARYDAK 20 MG CAPSULE	4	QL 6/21
<b>Antineoplastics, Other</b>		
ABRAXANE 100 MG VIAL	4	PA,B/D
ADRIAMYCIN 20 MG/10 ML VIAL	1	PA,B/D
<i>amifostine 500 mg vial</i>	4	PA,B/D
<i>azacitidine 100 mg vial</i>	4	PA,B/D
BCG (TICE STRAIN) VIAL	2	PA,B/D
BELEODAQ 500 MG VIAL	4	PA,B/D
<i>bleomycin sulfate 15 unit vial</i>	1	PA,B/D
<i>bleomycin sulfate 30 unit vial</i>	1	PA,B/D
CAMPTOSAR 300 MG/15 ML VIAL	3	PA,B/D
<i>carboplatin 150 mg/15 ml vial</i>	1	PA,B/D
<i>carboplatin 450 mg/45 ml vial</i>	1	PA,B/D
<i>carboplatin 50 mg/5 ml vial</i>	1	PA,B/D
<i>carboplatin 600 mg/60 ml vial</i>	1	PA,B/D
<i>cisplatin 100 mg/100 ml vial</i>	1	PA,B/D
<i>cisplatin 200 mg/200 ml vial</i>	1	PA,B/D

Drug Name	Drug Tier	Requirements / Limits
<i>cisplatin 50 mg/50 ml vial</i>	1	PA,B/D
COSMEGEN 0.5 MG VIAL	4	PA,B/D
<i>daunorubicin 20 mg/4 ml vial</i>	1	PA,B/D
<i>decitabine 50 mg vial</i>	4	
<i>dexrazoxane 250 mg vial</i>	1	PA,B/D
<i>dexrazoxane 500 mg vial</i>	1	PA,B/D
DOCEFREZ 20 MG VIAL	4	PA,B/D
<i>docetaxel 140 mg/7 ml vial</i>	4	PA,B/D
<i>docetaxel 160 mg/16 ml vial</i>	4	PA,B/D
<i>docetaxel 160 mg/8 ml vial</i>	4	PA,B/D
<i>docetaxel 20 mg/0.5 ml vial</i>	4	PA,B/D
<i>docetaxel 20 mg/2 ml vial</i>	4	PA,B/D
<i>docetaxel 20 mg/ml vial</i>	4	PA,B/D
<i>docetaxel 200 mg/10 ml vial</i>	4	PA,B/D
<i>docetaxel 200 mg/20 ml vial</i>	4	PA,B/D
<i>docetaxel 80 mg/2 ml vial</i>	4	PA,B/D
<i>docetaxel 80 mg/4 ml vial</i>	4	PA,B/D
<i>docetaxel 80 mg/8 ml vial</i>	4	PA,B/D
<i>doxorubicin 10 mg vial</i>	1	PA,B/D
<i>doxorubicin 50 mg vial</i>	1	PA,B/D
<i>doxorubicin 50 mg/25 ml vial</i>	1	PA,B/D
<i>doxorubicin liposome 20mg/10ml</i>	4	PA,B/D
<i>epirubicin 200 mg/100 ml vial</i>	3	PA,B/D
<i>epirubicin 50 mg/25 ml vial</i>	1	PA,B/D
ERWINAZE 10,000 UNITS VIAL	4	PA,QL 60/28,B/D
ETHYOL 500 MG VIAL	4	PA,B/D
<i>fludarabine 50 mg vial</i>	1	PA,B/D
<i>fludarabine 50 mg/2 ml vial</i>	1	PA,B/D
FUSILEV I.V. 50 MG VIAL	4	
HALAVEN 1 MG/2 ML VIAL	4	
<i>idarubicin hcl 10 mg/10 ml v</i>	4	PA,B/D
<i>idarubicin hcl 20 mg/20 ml v</i>	4	PA,B/D
<i>idarubicin hcl 5 mg/5 ml vial</i>	4	PA,B/D
<i>irinotecan hcl 100 mg/5 ml v</i>	1	PA,B/D
<i>irinotecan hcl 40 mg/2 ml vial</i>	1	PA,B/D
<i>irinotecan hcl 500 mg/25 ml v</i>	1	PA,B/D
ISTODAX 10 MG KIT	4	PA,B/D
IXEMPRA 15 MG KIT	4	PA,B/D
IXEMPRA 45 MG KIT	4	PA,B/D

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Drug Name	Drug Tier	Requirements / Limits
JEVTANA 60 MG/1.5 ML KIT	4	PA,B/D
KISQALI 200 MG DAILY DOSE	4	QL 63/28
KISQALI 400 MG DAILY DOSE	4	QL 63/28
KISQALI 600 MG DAILY DOSE	4	QL 63/28
LARTRUVO 190 MG/19 ML	4	PA,B/D
LARTRUVO 500 MG/50 ML	4	PA,B/D
<i>leucovorin calcium 10 mg tab</i>	1	
<i>leucovorin calcium 100 mg vial</i>	1	
<i>leucovorin calcium 15 mg tab</i>	1	
<i>leucovorin calcium 200 mg vial</i>	1	
<i>leucovorin calcium 25 mg tab</i>	1	
<i>leucovorin calcium 350 mg vial</i>	1	
<i>leucovorin calcium 5 mg tab</i>	1	
<i>leucovorin calcium 50 mg vial</i>	1	
<i>leucovorin calcium 500 mg vial</i>	1	
<i>levoleucovorin 175 mg/17.5 ml</i>	4	
<i>levoleucovorin 250 mg/25 ml vial</i>	4	
<i>levoleucovorin 50 mg vial</i>	4	
LIPODOX 2 MG/ML VIAL	4	PA,B/D
LIPODOX 50 2 MG/ML VIAL	4	PA,B/D
MARQIBO KIT	4	PA,B/D
MESNA 1 GRAM/10 ML VIAL	1	PA,B/D
MESNEX 400 MG TABLET	4	
<i>mitomycin 20 mg vial</i>	3	PA,B/D
<i>mitomycin 40 mg vial</i>	4	PA,B/D
<i>mitomycin 5 mg vial</i>	3	PA,B/D
<i>mitoxantrone 20 mg/10 ml vial</i>	1	PA,B/D
<i>mitoxantrone 25 mg/12.5 ml vial</i>	1	PA,B/D
<i>mitoxantrone 30 mg/15 ml vial</i>	1	PA,B/D
NERLYNX 40 MG TABLET	4	QL 180/30
NINLARO 2.3 MG CAPSULE	4	QL 3/28
NINLARO 3 MG CAPSULE	4	QL 3/28
NINLARO 4 MG CAPSULE	4	QL 3/28
ODOMZO 200 MG CAPSULE	4	QL 30/30
ONCASPAR 750 UNIT/ML VIAL	4	PA,B/D
ONIVYDE 43 MG/10 ML VIAL	4	PA,B/D
<i>oxaliplatin 100 mg vial</i>	4	PA,B/D
<i>oxaliplatin 100 mg/20 ml vial</i>	3	PA,B/D
<i>oxaliplatin 50 mg vial</i>	4	PA,B/D
<i>oxaliplatin 50 mg/10 ml vial</i>	3	PA,B/D

Drug Name	Drug Tier	Requirements / Limits
<i>paclitaxel 100 mg/16.7 ml vial</i>	1	PA,B/D
<i>paclitaxel 150 mg/25 ml vial</i>	1	PA,B/D
<i>paclitaxel 30 mg/5 ml vial</i>	1	PA,B/D
<i>paclitaxel 300 mg/50 ml vial</i>	1	PA,B/D
PHOTOFRIN 75 MG VIAL	4	PA,B/D
POMALYST 4 MG CAPSULE	4	QL 21/28
PROLEUKIN 22 MILLION UNIT VIAL	4	PA,B/D
RUBRACA 200 MG TABLET	4	QL 120/30
RUBRACA 250 MG TABLET	4	QL 120/30
RUBRACA 300 MG TABLET	4	QL 120/30
RYDAPT 25 MG CAPSULE	4	QL 224/28
SYLATRON 200 MCG KIT	4	PA,QL 4/28
SYLATRON 300 MCG KIT	4	PA,QL 4/28
SYLATRON 600 MCG KIT	4	PA,QL 4/28
SYLATRON 888 MCG 4-PACK	4	PA,QL 4/28
SYNRIBO 3.5 MG/ML VIAL	4	QL 28/28
<i>teniposide 50 mg/5 ml ampule</i>	1	PA,B/D
TRISENOX 10 MG/10 ML AMPULE	3	PA,B/D
VELCADE 3.5 MG VIAL	4	PA,QL 14/21,B/D
VENCLEXTA 10 MG TABLET	3	QL 60/30
VENCLEXTA 100 MG TABLET	4	QL 120/30
VENCLEXTA 50 MG TABLET	3	QL 30/30
VENCLEXTA STARTING PACK	4	QL 84/365
<i>vinblastine 1 mg/ml vial</i>	1	PA,B/D
VINCASAR PFS 1 MG/ML VIAL	1	PA,B/D
<i>vincristine 1 mg/ml vial</i>	1	PA,B/D
<i>vinorelbine 10 mg/ml vial</i>	1	PA,B/D
<i>vinorelbine 50 mg/5 ml vial</i>	1	PA,B/D
ZALTRAP 200 MG/8 ML VIAL	4	PA,QL 40/28,B/D
ZEJULA 100 MG CAPSULE	4	QL 90/30
ZOLINZA 100 MG CAPSULE	4	QL 120/30
<b>Antiparkinson Agents, Other</b>		
<i>amantadine 100 mg capsule</i>	1	
<i>entacapone 200 mg tablet</i>	1	QL 240/30
<i>tolcapone 100 mg tablet</i>	4	

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Drug Name	Drug Tier	Requirements / Limits
<b>Antiprotozoals</b>		
ALINIA 100 MG/5 ML SUSPENSION	2	QL 150/30
ALINIA 500 MG TABLET	4	QL 20/30
<i>atovaquone 750 mg/5 ml susp</i>	3	
<i>atovaquone-proguanil 250-100</i>	1	
<i>atovaquone-proguanil 62.5-25</i>	1	
<i>chloroquine ph 250 mg tablet</i>	1	
<i>chloroquine ph 500 mg tablet</i>	1	
COARTEM TABLETS	2	QL 24/30
DARAPRIM 25 MG TABLET	4	QL 90/30
<i>hydroxychloroquine 200 mg tab</i>	1	
<i>mefloquine hcl 250 mg tablet</i>	1	
NEBUPENT 300 MG INHAL POWDER	2	PA,QL 6/28,B/D
PENTAM 300 VIAL	2	
<i>primaquine 26.3 mg tablet</i>	2	
<i>quinine sulfate 324 mg capsule</i>	1	QL 42/7
<i>tinidazole 250 mg tablet</i>	1	
<i>tinidazole 500 mg tablet</i>	1	
<b>Antispasmodics, Gastrointestinal</b>		
ANASPAZ 0.125 MG TABLET ODT	1	
<i>atropine 0.05 mg/ml syringe</i>	1	
<i>atropine 0.1 mg/ml syringe</i>	1	
<i>atropine 0.4 mg/0.5 ml ampul</i>	1	
<i>atropine 1 mg/ml vial</i>	1	
<i>atropine 8 mg/20 ml vial</i>	1	
<i>belladonna-opium 16.2-30 supp</i>	1	
<i>belladonna-opium 16.2-60 supp</i>	1	
<i>dicyclomine 10 mg capsule</i>	1	
<i>dicyclomine 10 mg/5 ml soln</i>	1	
<i>dicyclomine 20 mg tablet</i>	1	
ED-SPAZ 0.125 MG ODT	1	
<i>glycopyrrolate 0.2 mg/ml vial</i>	1	
<i>glycopyrrolate 1 mg tablet</i>	1	
<i>glycopyrrolate 2 mg tablet</i>	1	
<i>glycopyrrolate 4 mg/20 ml vial</i>	1	
<i>hyoscyamine 0.125 mg odt</i>	1	
<i>hyoscyamine 0.125 mg tab sl</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>hyoscyamine 0.125 mg/5 ml elix</i>	1	
<i>hyoscyamine 0.125 mg/ml drop</i>	1	
<i>hyoscyamine sr 0.375 mg tab</i>	1	
<i>hyoscyamine sulf 0.125 mg tab</i>	1	
<i>methscopolamine brom 2.5 mg tb</i>	1	
<i>methscopolamine brom 5 mg tab</i>	1	
NULEV 0.125 MG CHEWABLE MELT	1	
OSCIMIN 0.125 MG ODT	1	
OSCIMIN 0.125 MG TABLET	1	
OSCIMIN SL 0.125 MG TABLET	1	
OSCIMIN SR 0.375 MG TABLET	1	
<i>propantheline 15 mg tablet</i>	1	
SYMAX-SL 0.125 MG TABLET SL	1	
SYMAX-SR 0.375 MG TABLET	1	
<b>Antispasmodics, Urinary</b>		
AZUPHEN MB CAPSULE	1	
<i>darifenacin er 15 mg tablet</i>	1	QL 30/30
<i>darifenacin er 7.5 mg tablet</i>	1	QL 30/30
ENABLEX 15 MG TABLET	3	QL 30/30,ST
ENABLEX 7.5 MG TABLET	3	QL 30/30,ST
<i>flavoxate hcl 100 mg tablet</i>	1	
GELNIQUE 10% GEL SACHETS	3	QL 30/30
HYOLEV MB TABLET	3	
MYRBETRIQ ER 25 MG TABLET	2	QL 30/30
MYRBETRIQ ER 50 MG TABLET	2	QL 30/30
<i>oxybutynin 5 mg tablet</i>	1	QL 120/30
<i>oxybutynin 5 mg/5 ml syrup</i>	1	QL 600/30
<i>oxybutynin cl er 10 mg tablet</i>	1	QL 30/30
<i>oxybutynin cl er 15 mg tablet</i>	1	QL 60/30
<i>oxybutynin cl er 5 mg tablet</i>	1	QL 30/30
PHOSPHASAL TABLET	1	
<i>tolterodine tart er 2 mg cap</i>	1	QL 30/30
<i>tolterodine tart er 4 mg cap</i>	1	QL 30/30

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Drug Name	Drug Tier	Requirements / Limits
<b>tolterodine tartrate 1 mg tab</b>	1	QL 60/30
<b>tolterodine tartrate 2 mg tab</b>	1	QL 60/30
TOVIAZ ER 4 MG TABLET	3	QL 30/30,ST
TOVIAZ ER 8 MG TABLET	3	QL 30/30,ST
<b>trospium chloride 20 mg tablet</b>	1	QL 60/30
<b>trospium chloride er 60 mg cap</b>	1	QL 30/30
UR N-C TABLET	1	
URIN D.S. TABLET	1	
URO-458 TABLET	3	
UROAV-81 TABLET	3	
USTELL CAPSULE	1	
VESICARE 10 MG TABLET	2	QL 30/30,ST
VESICARE 5 MG TABLET	2	QL 30/30,ST
<b>Antispasticity Agents</b>		
<b>baclofen 10 mg tablet</b>	1	
<b>baclofen 20 mg tablet</b>	1	
B-DONNA TABLET	2	+
<b>belladonna-phenobarbital tab</b>	1	+
<b>chlordiazepoxide-clidinium cap</b>	1	+
<b>dantrolene sodium 100 mg cap</b>	1	
<b>dantrolene sodium 25 mg cap</b>	1	
<b>dantrolene sodium 50 mg cap</b>	1	
DONNATAL ELIXIR	2	+
DONNATAL TABLET	2	+
LIBRAX CAPSULE	2	+
PHENOHYTRO TABLET	2	+
<b>tizanidine hcl 2 mg capsule</b>	1	
<b>tizanidine hcl 2 mg tablet</b>	1	
<b>tizanidine hcl 4 mg capsule</b>	1	
<b>tizanidine hcl 4 mg tablet</b>	1	
<b>tizanidine hcl 6 mg capsule</b>	1	
<b>Antithyroid Agents</b>		
<b>methimazole 10 mg tablet</b>	1	
<b>methimazole 5 mg tablet</b>	1	
<b>propylthiouracil 50 mg tablet</b>	1	

Drug Name	Drug Tier	Requirements / Limits
<b>Antituberculars</b>		
CAPASTAT SULFATE 1 GM VIAL		3
<b>Anxiolytics, Other</b>		
<b>buspirone hcl 10 mg tablet</b>	1	
<b>buspirone hcl 15 mg tablet</b>	1	
<b>buspirone hcl 30 mg tablet</b>	1	
<b>buspirone hcl 5 mg tablet</b>	1	
<b>buspirone hcl 7.5 mg tablet</b>	1	
<b>doxepin 10 mg capsule</b>	1	PA HRM
<b>doxepin 10 mg/ml oral conc</b>	1	PA HRM
<b>doxepin 100 mg capsule</b>	1	PA HRM
<b>doxepin 25 mg capsule</b>	1	PA HRM
<b>doxepin 75 mg capsule</b>	1	PA HRM
<b>meprobamate 200 mg tablet</b>	1	
<b>meprobamate 400 mg tablet</b>	1	
<b>Aromatase Inhibitors, 3rd Generation</b>		
<b>anastrozole 1 mg tablet</b>	1	QL 30/30
<b>exemestane 25 mg tablet</b>	1	QL 60/30
<b>letrozole 2.5 mg tablet</b>	1	QL 30/30

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Drug Name	Drug Tier	Requirements / Limits
Attention Deficit Hyperactivity Disorder Agents, Amphetamines		
<b>d-amphetamine er 10 mg capsule</b>	1	QL 90/30
<b>d-amphetamine er 15 mg capsule</b>	1	QL 120/30
<b>d-amphetamine er 5 mg capsule</b>	1	QL 60/30
<b>dextroamp-amphet er 10 mg cap</b>	1	QL 30/30
<b>dextroamp-amphet er 15 mg cap</b>	1	QL 30/30
<b>dextroamp-amphet er 20 mg cap</b>	1	QL 30/30
<b>dextroamp-amphet er 25 mg cap</b>	1	QL 30/30
<b>dextroamp-amphet er 30 mg cap</b>	1	QL 30/30
<b>dextroamp-amphet er 5 mg cap</b>	1	QL 30/30
<b>dextroamp-amphetam 12.5 mg tab</b>	1	QL 60/30
<b>dextroamp-amphetam 7.5 mg tab</b>	1	QL 60/30
<b>dextroamp-amphetamin 10 mg tab</b>	1	QL 60/30
<b>dextroamp-amphetamin 15 mg tab</b>	1	QL 60/30
<b>dextroamp-amphetamin 20 mg tab</b>	1	QL 60/30
<b>dextroamp-amphetamin 30 mg tab</b>	1	QL 60/30
<b>dextroamp-amphetamine 5 mg tab</b>	1	QL 60/30
<b>dextroamphetamine 10 mg tab</b>	1	QL 180/30
<b>dextroamphetamine 5 mg tab</b>	1	QL 60/30
<b>dextroamphetamine 5 mg/5 ml</b>	1	QL 1800/30
<b>methamphetamine 5 mg tablet</b>	1	PA,D/E
PROCENTRA 5 MG/5 ML SOLUTION	1	
Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines		
<b>atomoxetine hcl 10 mg capsule</b>	1	QL 60/30
<b>atomoxetine hcl 100 mg capsule</b>	1	QL 30/30
<b>atomoxetine hcl 18 mg capsule</b>	1	QL 60/30
<b>atomoxetine hcl 25 mg capsule</b>	1	QL 60/30
<b>atomoxetine hcl 40 mg capsule</b>	1	QL 60/30
<b>atomoxetine hcl 60 mg capsule</b>	1	QL 30/30
<b>atomoxetine hcl 80 mg capsule</b>	1	QL 30/30
<b>clonidine hcl er 0.1 mg tablet</b>	1	QL 120/30
<b>dexamethylphenidate 10 mg tab</b>	1	QL 60/30

Drug Name	Drug Tier	Requirements / Limits
<b>dexamethylphenidate 2.5 mg tab</b>	1	QL 60/30
<b>dexamethylphenidate 5 mg tab</b>	1	QL 60/30
<b>guanfacine hcl er 1 mg tablet</b>	1	QL 30/30
<b>guanfacine hcl er 2 mg tablet</b>	1	QL 30/30
<b>guanfacine hcl er 3 mg tablet</b>	1	QL 30/30
<b>guanfacine hcl er 4 mg tablet</b>	1	QL 30/30
METADATE ER 20 MG TABLET	1	QL 90/30
<b>methylphenidate 10 mg chew tab</b>	1	
<b>methylphenidate 10 mg tablet</b>	1	QL 60/30
<b>methylphenidate 10 mg/5 ml sol</b>	1	
<b>methylphenidate 2.5 mg chew tb</b>	1	
<b>methylphenidate 20 mg tablet</b>	1	QL 90/30
<b>methylphenidate 5 mg chew tab</b>	1	
<b>methylphenidate 5 mg tablet</b>	1	QL 60/30
<b>methylphenidate 5 mg/5 ml soln</b>	1	
<b>methylphenidate cd 10 mg cap</b>	1	QL 30/30
<b>methylphenidate cd 20 mg cap</b>	1	QL 30/30
<b>methylphenidate cd 30 mg cap</b>	1	QL 30/30
<b>methylphenidate cd 40 mg cap</b>	1	QL 30/30
<b>methylphenidate cd 50 mg cap</b>	1	QL 30/30
<b>methylphenidate cd 60 mg cap</b>	1	QL 30/30
<b>methylphenidate er 10 mg tab</b>	1	QL 30/30
<b>methylphenidate er 18 mg tab</b>	1	QL 120/30
<b>methylphenidate er 20 mg cap</b>	1	QL 30/30
<b>methylphenidate er 20 mg tab</b>	1	QL 90/30
<b>methylphenidate er 27 mg tab</b>	1	QL 30/30
<b>methylphenidate er 30 mg cap</b>	1	QL 30/30
<b>methylphenidate er 36 mg tab</b>	1	QL 60/30
<b>methylphenidate er 40 mg cap</b>	1	QL 30/30
<b>methylphenidate er 54 mg tab</b>	1	QL 30/30
<b>methylphenidate la 20 mg cap</b>	1	QL 30/30
<b>methylphenidate la 40 mg cap</b>	1	QL 30/30
<b>methylphenidate sr 20 mg tab</b>	1	QL 90/30
STRATTERA 10 MG CAPSULE	3	QL 60/30
STRATTERA 100 MG CAPSULE	3	QL 30/30
STRATTERA 18 MG CAPSULE	3	QL 60/30

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Drug Name	Drug Tier	Requirements / Limits
STRATTERA 25 MG CAPSULE	3	QL 60/30
STRATTERA 40 MG CAPSULE	3	QL 60/30
STRATTERA 60 MG CAPSULE	3	QL 30/30
STRATTERA 80 MG CAPSULE	3	QL 30/30
<b>Benign Prostatic Hypertrophy Agents</b>		
<i>alfuzosin hcl er 10 mg tablet</i>	1	QL 30/30
CIALIS 2.5 MG TABLET	2	PA,QL 30/30,D/E
CIALIS 5 MG TABLET	2	PA,QL 30/30,D/E
<i>doxazosin mesylate 1 mg tab</i>	1	QL 30/30
<i>doxazosin mesylate 2 mg tab</i>	1	QL 30/30
<i>doxazosin mesylate 4 mg tab</i>	1	QL 30/30
<i>doxazosin mesylate 8 mg tab</i>	1	QL 60/30
<i>dutasteride 0.5 mg capsule</i>	1	QL 30/30
<i>dutasteride-tamsulosin 0.5-0.4</i>	1	QL 30/30
<i>finasteride 5 mg tablet</i>	1	QL 30/30
RAPAFLO 4 MG CAPSULE	2	QL 30/30
RAPAFLO 8 MG CAPSULE	2	QL 30/30
<i>tamsulosin hcl 0.4 mg capsule</i>	1	QL 60/30
<i>terazosin 1 mg capsule</i>	1	QL 30/30
<i>terazosin 10 mg capsule</i>	1	QL 60/30
<i>terazosin 2 mg capsule</i>	1	QL 30/30
<i>terazosin 5 mg capsule</i>	1	QL 30/30
<b>Benzodiazepines</b>		
<i>alprazolam 0.25 mg tablet</i>	1	QL 120/30
<i>alprazolam 0.5 mg tablet</i>	1	QL 120/30
<i>alprazolam 1 mg tablet</i>	1	QL 120/30
<i>alprazolam 1 mg/ml oral conc</i>	1	QL 300/30
<i>alprazolam 2 mg tablet</i>	1	QL 150/30
<i>alprazolam er 0.5 mg tablet</i>	1	QL 90/30
<i>alprazolam er 1 mg tablet</i>	1	QL 90/30
<i>alprazolam er 2 mg tablet</i>	1	QL 90/30
<i>alprazolam er 3 mg tablet</i>	1	QL 90/30
<i>alprazolam odt 0.25 mg tab</i>	1	QL 120/30
<i>alprazolam odt 0.5 mg tab</i>	1	QL 120/30
<i>alprazolam odt 1 mg tab</i>	1	QL 120/30

Drug Name	Drug Tier	Requirements / Limits
<i>alprazolam odt 2 mg tab</i>	1	QL 150/30
<i>alprazolam xr 0.5 mg tablet</i>	1	QL 90/30
<i>alprazolam xr 1 mg tablet</i>	1	QL 90/30
<i>alprazolam xr 2 mg tablet</i>	1	QL 90/30
<i>alprazolam xr 3 mg tablet</i>	1	QL 90/30
<i>chlordiazepoxide 10 mg capsule</i>	1	QL 120/30
<i>chlordiazepoxide 25 mg capsule</i>	1	QL 360/30
<i>chlordiazepoxide 5 mg capsule</i>	1	QL 120/30
<i>clorazepate 15 mg tablet</i>	1	QL 180/30
<i>clorazepate 3.75 mg tablet</i>	1	QL 90/30
<i>clorazepate 7.5 mg tablet</i>	1	QL 90/30
<i>diazepam 10 mg tablet</i>	1	QL 120/30
<i>diazepam 10 mg/2 ml carpuject</i>	1	
<i>diazepam 10 mg/2 ml syringe</i>	1	
<i>diazepam 2 mg tablet</i>	1	QL 120/30
<i>diazepam 5 mg tablet</i>	1	QL 120/30
<i>diazepam 5 mg/5 ml solution</i>	1	QL 1200/30
<i>diazepam 5 mg/ml oral conc</i>	1	QL 240/30
<i>diazepam 5 mg/ml vial</i>	1	
<i>estazolam 1 mg tablet</i>	1	QL 30/30
<i>estazolam 2 mg tablet</i>	1	QL 30/30
<i>flurazepam 15 mg capsule</i>	1	
<i>flurazepam 30 mg capsule</i>	1	
<i>lorazepam 0.5 mg tablet</i>	1	QL 90/30
<i>lorazepam 1 mg tablet</i>	1	QL 120/30
<i>lorazepam 2 mg tablet</i>	1	QL 150/30
<i>lorazepam 2 mg/ml carpuject</i>	1	
<i>lorazepam 2 mg/ml oral conc</i>	1	QL 150/30
<i>lorazepam 2 mg/ml vial</i>	1	
<i>lorazepam 4 mg/ml carpuject</i>	1	
<i>lorazepam 4 mg/ml vial</i>	1	
LORAZEPAM INTENSOL 2 MG/ML	1	QL 150/30
<i>midazolam hcl 2 mg/ml syrup</i>	1	
<i>oxazepam 10 mg capsule</i>	1	QL 120/30
<i>oxazepam 15 mg capsule</i>	1	QL 120/30
<i>oxazepam 30 mg capsule</i>	1	QL 120/30
<i>triazolam 0.125 mg tablet</i>	1	
<i>triazolam 0.25 mg tablet</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<b>Beta-adrenergic Blocking Agents</b>		
<i>acebutolol 200 mg capsule</i>	1	
<i>acebutolol 400 mg capsule</i>	1	
<i>atenolol 100 mg tablet</i>	1	
<i>atenolol 25 mg tablet</i>	1	
<i>atenolol 50 mg tablet</i>	1	
<i>atenolol-chlorthalidone 100-25</i>	1	
<i>atenolol-chlorthalidone 50-25</i>	1	
<i>betaxolol 10 mg tablet</i>	1	
<i>betaxolol 20 mg tablet</i>	1	
<i>bisoprolol fumarate 10 mg tab</i>	1	
<i>bisoprolol fumarate 5 mg tab</i>	1	
<i>bisoprolol-hctz 10-6.25 mg tab</i>	1	
<i>bisoprolol-hctz 2.5-6.25 mg tb</i>	1	
<i>bisoprolol-hctz 5-6.25 mg tab</i>	1	
<i>BYSTOLIC 10 MG TABLET</i>	2	QL 30/30
<i>BYSTOLIC 2.5 MG TABLET</i>	2	QL 30/30
<i>BYSTOLIC 20 MG TABLET</i>	2	QL 60/30
<i>BYSTOLIC 5 MG TABLET</i>	2	QL 30/30
<i>BYVALSON 5 MG-80 MG TABLET</i>	2	QL 30/30
<i>carvedilol 12.5 mg tablet</i>	1	
<i>carvedilol 25 mg tablet</i>	1	
<i>carvedilol 3.125 mg tablet</i>	1	
<i>carvedilol 6.25 mg tablet</i>	1	
<i>COREG CR 10 MG CAPSULE</i>	2	QL 30/30
<i>COREG CR 20 MG CAPSULE</i>	2	QL 30/30
<i>COREG CR 40 MG CAPSULE</i>	2	QL 30/30
<i>COREG CR 80 MG CAPSULE</i>	2	QL 30/30
<i>esmolol hcl 100 mg/10 ml vial</i>	1	
<i>labetalol hcl 100 mg tablet</i>	1	
<i>labetalol hcl 100 mg/20 ml v</i>	1	
<i>labetalol hcl 200 mg tablet</i>	1	
<i>labetalol hcl 300 mg tablet</i>	1	
<i>metoprolol 1 mg/ml carpuject</i>	1	
<i>metoprolol succ er 100 mg tab</i>	1	QL 60/30
<i>metoprolol succ er 200 mg tab</i>	1	QL 60/30
<i>metoprolol succ er 25 mg tab</i>	1	QL 60/30
<i>metoprolol succ er 50 mg tab</i>	1	QL 60/30
<i>metoprolol tart 5 mg/5 ml vial</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>metoprolol tartrate 100 mg tab</i>	1	
<i>metoprolol tartrate 25 mg tab</i>	1	
<i>metoprolol tartrate 37.5 mg tb</i>	1	
<i>metoprolol tartrate 50 mg tab</i>	1	
<i>metoprolol tartrate 75 mg tab</i>	1	
<i>metoprolol-hctz 100-25 mg tab</i>	1	
<i>metoprolol-hctz 100-50 mg tab</i>	1	
<i>metoprolol-hctz 50-25 mg tab</i>	1	
<i>nadolol 20 mg tablet</i>	1	
<i>nadolol 40 mg tablet</i>	1	
<i>nadolol 80 mg tablet</i>	1	
<i>nadolol-bendroflu 40-5 mg tab</i>	1	QL 30/30
<i>nadolol-bendroflu 80-5 mg tab</i>	1	QL 30/30
<i>pindolol 10 mg tablet</i>	1	
<i>pindolol 5 mg tablet</i>	1	
<i>propranolol 1 mg/ml vial</i>	1	
<i>propranolol 10 mg tablet</i>	1	
<i>propranolol 20 mg tablet</i>	1	
<i>propranolol 20 mg/5 ml soln</i>	1	
<i>propranolol 40 mg tablet</i>	1	
<i>propranolol 40 mg/5 ml soln</i>	1	
<i>propranolol 60 mg tablet</i>	1	
<i>propranolol 80 mg tablet</i>	1	
<i>propranolol er 120 mg capsule</i>	1	
<i>propranolol er 160 mg capsule</i>	1	
<i>propranolol er 60 mg capsule</i>	1	
<i>propranolol er 80 mg capsule</i>	1	
<i>propranolol-hctz 40-25 mg tab</i>	1	
<i>propranolol-hctz 80-25 mg tab</i>	1	
<i>timolol maleate 10 mg tablet</i>	1	
<i>timolol maleate 20 mg tablet</i>	1	
<i>timolol maleate 5 mg tablet</i>	1	
<b>Beta-lactam, Cephalosporins</b>		
<i>cefaclor 125 mg/5 ml susp</i>	1	
<i>cefaclor 250 mg capsule</i>	1	
<i>cefaclor 250 mg/5 ml susp</i>	1	
<i>cefaclor 375 mg/5 ml suspen</i>	1	
<i>cefaclor 500 mg capsule</i>	1	
<i>cefaclor er 500 mg tablet</i>	1	
<i>cefadroxil 1 gm tablet</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<b>cefadroxil 250 mg/5 ml susp</b>	1	
<b>cefadroxil 500 mg capsule</b>	1	
<b>cefadroxil 500 mg/5 ml susp</b>	1	
<b>cefaZolin 1 g/50 ml-dextrose</b>	1	
<b>cefaZolin 1 gm add-van vial</b>	1	
<b>cefaZolin 1 gm vial</b>	1	
<b>cefaZolin 10 gm vial</b>	1	
<b>cefaZolin 2 g/100 ml-dextrose</b>	1	
<b>cefaZolin 2 g/50 ml-dextrose</b>	1	
<b>cefaZolin 500 mg vial</b>	1	
<b>cefaZolin sod 100 gm bulk bag</b>	1	
<b>cefaZolin sod 300 gm bulk bag</b>	1	
<b>cefdinir 125 mg/5 ml susp</b>	1	
<b>cefdinir 250 mg/5 ml susp</b>	1	
<b>cefdinir 300 mg capsule</b>	1	
<b>cefditoren pivoxil 200 mg tab</b>	1	
<b>cefepime 1 gm injection</b>	1	
<b>cefepime 2 gm injection</b>	1	
<b>cefepime hcl 1 gm vial</b>	1	
<b>cefepime hcl 2 gram vial</b>	1	
<b>cefepime-dextrose 1 gm/50 ml</b>	1	
<b>cefepime-dextrose 2 gm/50 ml</b>	1	
<b>cefixime 100 mg/5 ml susp</b>	1	
<b>cefixime 200 mg/5 ml susp</b>	1	
<b>cefotaxime sodium 1 gm vial</b>	1	
<b>cefotaxime sodium 10 gm vial</b>	1	
<b>cefotaxime sodium 2 gm vial</b>	1	
<b>cefotaxime sodium 500 mg vial</b>	1	
<b>cefotetan-dextr 1 g duplex bag</b>	1	
<b>cefotetan-dextr 2 g duplex bag</b>	1	
<b>cefoxitin 1 gm piggyback bag</b>	1	
<b>cefoxitin 1 gm vial</b>	1	
<b>cefoxitin 10 gm vial</b>	1	
<b>cefoxitin 2 gm piggyback bag</b>	1	
<b>cefoxitin 2 gm vial</b>	1	
<b>cefpodoxime 100 mg tablet</b>	1	
<b>cefpodoxime 100 mg/5 ml susp</b>	1	
<b>cefpodoxime 200 mg tablet</b>	1	
<b>cefpodoxime 50 mg/5 ml susp</b>	1	
<b>ceprozil 125 mg/5 ml susp</b>	1	

Drug Name	Drug Tier	Requirements / Limits
<b>ceprozil 250 mg tablet</b>	1	
<b>ceprozil 250 mg/5 ml susp</b>	1	
<b>ceprozil 500 mg tablet</b>	1	
<b>ceftazidime 1 gm piggyback</b>	1	
<b>ceftazidime 1 gm vial</b>	1	
<b>ceftazidime 2 gm piggyback</b>	1	
<b>ceftazidime 2 gm vial</b>	1	
<b>ceftazidime 6 gm vial</b>	1	
<b>ceftibuten 180 mg/5 ml susp</b>	1	
<b>ceftibuten 400 mg capsule</b>	1	
<b>ceftriaxone 1 gm piggyback</b>	1	
<b>ceftriaxone 1 gm vial</b>	1	
<b>ceftriaxone 1 gm-d5w bag</b>	1	
<b>ceftriaxone 10 gm vial</b>	1	
<b>ceftriaxone 2 gm add vial</b>	1	
<b>ceftriaxone 2 gm piggyback</b>	1	
<b>ceftriaxone 2 gm vial</b>	1	
<b>ceftriaxone 2 gm-d5w bag</b>	1	
<b>ceftriaxone 250 mg vial</b>	1	
<b>ceftriaxone 500 mg vial</b>	1	
<b>cefuroxime 750 mg/50 ml bag</b>	1	
<b>cefuroxime axetil 250 mg tab</b>	1	
<b>cefuroxime axetil 500 mg tab</b>	1	
<b>cefuroxime sod 1.5 gm vial</b>	1	
<b>cefuroxime sod 7.5 gm vial</b>	1	
<b>cefuroxime sod 75 gm bulk bag</b>	1	
<b>cefuroxime sod 750 mg vial</b>	1	
<b>cephalexin 125 mg/5 ml susp</b>	1	
<b>cephalexin 250 mg capsule</b>	1	
<b>cephalexin 250 mg tablet</b>	1	
<b>cephalexin 250 mg/5 ml susp</b>	1	
<b>cephalexin 500 mg capsule</b>	1	
<b>cephalexin 500 mg tablet</b>	1	
<b>cephalexin 750 mg capsule</b>	1	
SUPRAX 500 MG/5 ML SUSPENSION	2	
TAZICEF 1 GM ADD-VANTAGE VIAL	1	
TAZICEF 1 GM/50 ML BAG	1	
TAZICEF 1 GRAM VIAL	1	

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Drug Name	Drug Tier	Requirements / Limits
TAZICEF 2 GM ADD-VANTAGE	1	
TAZICEF 2 GRAM VIAL	1	
TAZICEF 6 GRAM VIAL	1	
TEFLARO 400 MG VIAL	4	
TEFLARO 600 MG VIAL	4	
ZINACEF 1.5 GRAM/50 ML	3	
<b>Beta-lactam, Other</b>		
AZACTAM-ISO-OSMOT 1 GM/50 ML	3	
AZACTAM-ISO-OSMOT 2 GM/50 ML	3	
<i>aztreonam 1 gm vial</i>	1	
<i>aztreonam 2 gm vial</i>	4	
<i>cefotetan 1 gm vial</i>	1	
<i>cefotetan 10 gm vial</i>	1	
<i>cefotetan 2 gm vial</i>	1	
<i>imipenem-cilastatin 250 mg v</i>	1	
<i>imipenem-cilastatin 500 mg v</i>	1	
INVANZ 1 GM ADD-VANTAGE VIAL	3	
INVANZ 1 GM VIAL	3	
<i>meropenem iv 1 gm vial</i>	1	
<i>meropenem iv 500 mg vial</i>	1	
<i>meropenem-0.9% nacl 1 gram/50</i>	1	
<i>meropenem-0.9% nacl 500 mg/50</i>	1	
<b>Beta-lactam, Penicillins</b>		
<i>amox tr-k clv 200-28.5/5 susp</i>	1	
<i>amox-clav 200-28.5 mg tab chew</i>	1	
<i>amox-clav 200-28.5 mg/5 ml sus</i>	1	
<i>amox-clav 250-125 mg tablet</i>	1	
<i>amox-clav 250-62.5 mg/5 ml sus</i>	1	
<i>amox-clav 400-57 mg tab chew</i>	1	
<i>amox-clav 400-57 mg/5 ml susp</i>	1	
<i>amox-clav 500-125 mg tablet</i>	1	
<i>amox-clav 600-42.9 mg/5 ml sus</i>	1	
<i>amox-clav 875-125 mg tablet</i>	1	
<i>amox-clav er 1,000-62.5 mg tab</i>	1	
<i>amoxicillin 125 mg tab chew</i>	1	
<i>amoxicillin 125 mg/5 ml susp</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>amoxicillin 200 mg/5 ml susp</i>	1	
<i>amoxicillin 250 mg capsule</i>	1	
<i>amoxicillin 250 mg tab chew</i>	1	
<i>amoxicillin 250 mg/5 ml susp</i>	1	
<i>amoxicillin 400 mg/5 ml susp</i>	1	
<i>amoxicillin 500 mg capsule</i>	1	
<i>amoxicillin 500 mg tablet</i>	1	
<i>amoxicillin 875 mg tablet</i>	1	
<i>ampicillin 1 gm a-v vial</i>	1	
<i>ampicillin 1 gm vial</i>	1	
<i>ampicillin 10 gm vial</i>	1	
<i>ampicillin 125 mg vial</i>	1	
<i>ampicillin 125 mg/5 ml susp</i>	1	
<i>ampicillin 2 gm a-v vial</i>	1	
<i>ampicillin 2 gm vial</i>	1	
<i>ampicillin 250 mg capsule</i>	1	
<i>ampicillin 250 mg vial</i>	1	
<i>ampicillin 250 mg/5 ml susp</i>	1	
<i>ampicillin 500 mg capsule</i>	1	
<i>ampicillin 500 mg vial</i>	1	
<i>ampicillin-sulbactam 1.5 gm v</i>	1	
<i>ampicillin-sulbactam 15 gm v</i>	1	
<i>ampicillin-sulbactam 3 gm vial</i>	1	
AUGMENTIN 125-31.25 MG/5 ML	2	
BICILLIN C-R 1.2 MILLION UNIT	3	
BICILLIN C-R 900-300 SYRINGE	3	
BICILLIN L-A 1,200,000 UNITS	3	
BICILLIN L-A 2,400,000 UNITS	3	
BICILLIN L-A 600,000 UNIT/ML	3	
<i>dicloxacillin 250 mg capsule</i>	1	
<i>dicloxacillin 500 mg capsule</i>	1	
<i>nafcillin 1 gm add-van vial</i>	1	
<i>nafcillin 1 gm vial</i>	1	
<i>nafcillin 1 gm/ 50 ml inj</i>	2	
<i>nafcillin 10 gm vial</i>	1	
<i>nafcillin 2 gm add-vant vial</i>	4	
<i>nafcillin 2 gm vial</i>	1	
<i>nafcillin 2 gm/ 100 ml inj</i>	2	
<i>oxacillin 1 gm add-vantage vi</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<b>oxacillin 1 gm/ 50 ml inj</b>	1	
<b>oxacillin 10 gm vial</b>	1	
<b>oxacillin 2 gm vial</b>	1	
<b>oxacillin 2 gm/ 50 ml inj</b>	1	
<b>pen g 1.2 million unit/2 ml</b>	1	
<b>pen g k 1 million unit/50 ml</b>	1	
<b>pen g k 2 million unit/50 ml</b>	1	
<b>pen g k 3 million unit/50 ml</b>	1	
<b>penicillin g k 5 million unit</b>	1	
<b>penicillin g na 5 million unit</b>	1	
<b>penicillin gk 20 million unit</b>	1	
<b>penicillin vk 125 mg/5 ml soln</b>	1	
<b>penicillin vk 250 mg/tablet</b>	1	
<b>penicillin vk 250 mg/5 ml soln</b>	1	
<b>penicillin vk 500 mg/tablet</b>	1	
<b>PFIZERPEN 20 MILLION UNIT VIAL</b>	1	
<b>PFIZERPEN 5 MILLION UNIT VIAL</b>	1	
<b>piperacil-tazobact 13.5 gm vl</b>	1	
<b>piperacil-tazobact 2.25 gm vl</b>	1	
<b>piperacil-tazobact 3.375 gm vl</b>	1	
<b>piperacil-tazobact 4.5 gm vial</b>	1	
<b>piperacil-tazobact 40.5 gram</b>	1	
<b>ZOSYN 2.25 GM/50 ML GALAXY BAG</b>	3	
<b>ZOSYN 3.375 GM/50 ML GALAXY</b>	3	
<b>ZOSYN 4.5 GM/100 ML GALAXY BAG</b>	3	
<b>Blood Formation Modifiers</b>		
<b>anagrelide hcl 0.5 mg capsule</b>	1	
<b>anagrelide hcl 1 mg capsule</b>	1	
<b>ARANESP 10 MCG/0.4 ML SYRINGE</b>	3	PA,QL 1.6/28,B/D
<b>ARANESP 100 MCG/0.5 ML SYRINGE</b>	4	PA,QL 2/28,B/D
<b>ARANESP 100 MCG/ML VIAL</b>	4	PA,QL 4/28,B/D
<b>ARANESP 150 MCG/0.3 ML SYRINGE</b>	4	PA,QL 1.2/28,B/D

Drug Name	Drug Tier	Requirements / Limits
<b>ARANESP 200 MCG/0.4 ML SYRINGE</b>	4	PA,QL 1.6/28,B/D
<b>ARANESP 200 MCG/ML VIAL</b>	4	PA,QL 4/28,B/D
<b>ARANESP 25 MCG/0.42 ML SYRINGE</b>	3	PA,QL 1.68/28,B/D
<b>ARANESP 25 MCG/ML VIAL</b>	3	PA,QL 4/28,B/D
<b>ARANESP 300 MCG/0.6 ML SYRINGE</b>	4	PA,QL 2.4/28,B/D
<b>ARANESP 300 MCG/ML VIAL</b>	4	PA,QL 4/28,B/D
<b>ARANESP 40 MCG/0.4 ML SYRINGE</b>	3	PA,QL 1.6/28,B/D
<b>ARANESP 40 MCG/ML VIAL</b>	3	PA,QL 4/28,B/D
<b>ARANESP 500 MCG/1 ML SYRINGE</b>	4	PA,QL 1/21,B/D
<b>ARANESP 60 MCG/0.3 ML SYRINGE</b>	3	PA,QL 1.2/28,B/D
<b>ARANESP 60 MCG/ML VIAL</b>	3	PA,QL 4/28,B/D
<b>EPOGEN 2,000 UNITS/ML VIAL</b>	3	PA,B/D
<b>EPOGEN 20,000 UNITS/2 ML VIAL</b>	3	PA,B/D
<b>EPOGEN 20,000 UNITS/ML VIAL</b>	3	PA,B/D
<b>EPOGEN 3,000 UNITS/ML VIAL</b>	3	PA,B/D
<b>EPOGEN 4,000 UNITS/ML VIAL</b>	3	PA,B/D
<b>LEUKINE 250 MCG VIAL</b>	4	
<b>NEUMEGA 5 MG VIAL</b>	4	PA,B/D
<b>PROCRIT 10,000 UNITS/ML VIAL</b>	3	PA,QL 12/28,B/D
<b>PROCRIT 2,000 UNITS/ML VIAL</b>	3	PA,QL 12/28,B/D
<b>PROCRIT 20,000 UNITS/ML VIAL</b>	4	PA,QL 12/28,B/D
<b>PROCRIT 3,000 UNITS/ML VIAL</b>	3	PA,QL 12/28,B/D
<b>PROCRIT 4,000 UNITS/ML VIAL</b>	3	PA,QL 12/28,B/D
<b>PROCRIT 40,000 UNITS/ML VIAL</b>	4	PA,QL 6/28,B/D

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Drug Name	Drug Tier	Requirements / Limits
PROMACTA 12.5 MG TABLET	4	PA,QL 30/30
PROMACTA 25 MG TABLET	4	PA,QL 30/30
PROMACTA 50 MG TABLET	4	PA,QL 30/30
PROMACTA 75 MG TABLET	4	PA,QL 30/30
ZARXIO 300 MCG/0.5 ML SYRINGE	4	
ZARXIO 480 MCG/0.8 ML SYRINGE	4	
<b>Bronchodilators, Anticholinergic</b>		
ATROVENT HFA INHALER	3	QL 25.8/30
COMBIVENT RESPIMAT INHAL SPRAY	2	QL 8/30
INCRUSE ELLIPTA 62.5 MCG INH	2	QL 30/30
<i>iprat-albut 0.5-3(2.5) mg/3 ml</i>	1	PA,QL 540/30,B/D
<i>ipratropium 0.03% spray</i>	1	QL 30/30
<i>ipratropium 0.06% spray</i>	1	QL 30/30
<i>ipratropium br 0.02% soln</i>	1	PA,QL 300/30,B/D
SPIRIVA 18 MCG CP-HANDIHALER	3	
SPIRIVA RESPIMAT 1.25 MCG INH	3	
SPIRIVA RESPIMAT 2.5 MCG INH	3	
TUDORZA PRESSAIR 400 MCG INH	3	QL 1/30
<b>Bronchodilators, Sympathomimetic</b>		
ADRENALIN 1 MG/ML VIAL	2	
<i>albuterol 5 mg/ml solution</i>	1	PA,QL 180/30,B/D
<i>albuterol sul 0.63 mg/3 ml sol</i>	1	PA,QL 360/30,B/D
<i>albuterol sul 1.25 mg/3 ml sol</i>	1	PA,QL 360/30,B/D
<i>albuterol sul 2.5 mg/3 ml soln</i>	1	PA,QL 360/30,B/D
<i>albuterol sulf 2 mg/5 ml syrup</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>albuterol sulfate 2 mg tab</i>	1	
<i>albuterol sulfate 4 mg tab</i>	1	
<i>albuterol sulfate er 4 mg tab</i>	1	
<i>albuterol sulfate er 8 mg tab</i>	1	
ANORO ELLIPTA 62.5-25 MCG INH	2	QL 60/30
ARCAPTA NEOHALER 75 MCG CAP	3	
BROVANA 15 MCG/2 ML SOLUTION	3	PA,B/D
<i>epinephrine 0.1 mg/ml syringe</i>	1	
<i>epinephrine 0.15 mg auto-inject</i>	1	QL 2/30
<i>epinephrine 0.3 mg auto-inject</i>	1	QL 2/30
<i>epinephrine 1 mg/ml ampul</i>	1	
EPIPEN 2-PAK 0.3 MG AUTO-INJECT	2	QL 2/30
EPIPEN JR 2-PAK 0.15 MG INJCTR	2	QL 2/30
<i>levalbuterol 0.31 mg/3 ml sol</i>	1	PA,B/D
<i>levalbuterol 0.63 mg/3 ml sol</i>	1	PA,B/D
<i>levalbuterol 1.25 mg/3 ml sol</i>	1	PA,B/D
<i>levalbuterol conc 1.25 mg/0.5</i>	1	PA,B/D
<i>levalbuterol tar hfa 45mcg inh</i>	1	QL 30/30
<i>metaproterenol 10 mg tablet</i>	1	
<i>metaproterenol 10 mg/5 ml syr</i>	1	
<i>metaproterenol 20 mg tablet</i>	1	
PERFOROMIST 20 MCG/2 ML SOLN	3	PA,QL 120/30,B/D
PROAIR HFA 90 MCG INHALER	2	QL 17/30
PROAIR RESPICLICK INHAL POWDER	2	QL 2/30
PROVENTIL HFA 90 MCG INHALER	3	
SEREVENT DISKUS 50 MCG	2	QL 60/30
STRIVERDI RESPIMAT INHAL SPRAY	3	
<i>terbutaline sulf 1 mg/ml vial</i>	1	
<i>terbutaline sulfate 2.5 mg tab</i>	1	
<i>terbutaline sulfate 5 mg tab</i>	1	
VENTOLIN HFA 90 MCG INHALER	3	QL 36/30

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Drug Name	Drug Tier	Requirements / Limits
<b>Calcium Channel Blocking Agents</b>		
AFEDITAB CR 30 MG TABLET	1	QL 30/30
AFEDITAB CR 60 MG TABLET	1	QL 60/30
<i>amlodipine besylate 10 mg tab</i>	1	QL 30/30
<i>amlodipine besylate 2.5 mg tab</i>	1	QL 30/30
<i>amlodipine besylate 5 mg tab</i>	1	QL 45/30
<i>amlodipine-atorvast 10-10 mg</i>	1	QL 30/30
<i>amlodipine-atorvast 10-20 mg</i>	1	QL 30/30
<i>amlodipine-atorvast 10-40 mg</i>	1	QL 30/30
<i>amlodipine-atorvast 10-80 mg</i>	1	QL 30/30
<i>amlodipine-atorvast 2.5-10 mg</i>	1	QL 30/30
<i>amlodipine-atorvast 2.5-20 mg</i>	1	QL 30/30
<i>amlodipine-atorvast 2.5-40 mg</i>	1	QL 30/30
<i>amlodipine-atorvast 5-10 mg</i>	1	QL 30/30
<i>amlodipine-atorvast 5-20 mg</i>	1	QL 30/30
<i>amlodipine-atorvast 5-40 mg</i>	1	QL 30/30
<i>amlodipine-atorvast 5-80 mg</i>	1	QL 30/30
<i>amlodipine-benazepril 10-20 mg</i>	1	QL 30/30
<i>amlodipine-benazepril 10-40 mg</i>	1	QL 30/30
<i>amlodipine-benazepril 2.5-10</i>	1	QL 30/30
<i>amlodipine-benazepril 5-10 mg</i>	1	QL 30/30
<i>amlodipine-benazepril 5-20 mg</i>	1	QL 30/30
<i>amlodipine-benazepril 5-40 mg</i>	1	QL 30/30
<i>amlodipine-olmesartan 10-20 mg</i>	1	QL 30/30
<i>amlodipine-olmesartan 10-40 mg</i>	1	QL 30/30
<i>amlodipine-olmesartan 5-20 mg</i>	1	QL 30/30
<i>amlodipine-olmesartan 5-40 mg</i>	1	QL 30/30
<i>amlodipine-valsartan 10-160 mg</i>	1	QL 30/30
<i>amlodipine-valsartan 10-320 mg</i>	1	QL 30/30
<i>amlodipine-valsartan 5-160 mg</i>	1	QL 30/30
<i>amlodipine-valsartan 5-320 mg</i>	1	QL 30/30
<i>amlod-vals-a-hctz 10-160-12.5mg</i>	1	QL 30/30
<i>amlod-vals-a-hctz 10-160-25 mg</i>	1	QL 30/30
<i>amlod-vals-a-hctz 10-320-25 mg</i>	1	QL 30/30
<i>amlod-vals-a-hctz 5-160-12.5 mg</i>	1	QL 30/30
<i>amlod-vals-a-hctz 5-160-25 mg</i>	1	QL 30/30
CARTIA XT 120 MG CAPSULE	1	QL 30/30
CARTIA XT 180 MG CAPSULE	1	QL 60/30
CARTIA XT 240 MG CAPSULE	1	QL 60/30
CARTIA XT 300 MG CAPSULE	1	QL 30/30

Drug Name	Drug Tier	Requirements / Limits
DILT XR 120 MG CAPSULE	1	QL 30/30
DILT XR 180 MG CAPSULE	1	QL 60/30
DILT XR 240 MG CAPSULE	1	QL 60/30
DILT-CD 180 MG CAPSULE	1	QL 60/30
DILT-CD 240 MG CAPSULE	1	
<i>diltiazem 120 mg tablet</i>	1	
<i>diltiazem 125 mg/25 ml vial</i>	1	
<i>diltiazem 12hr er 120 mg cap</i>	1	
<i>diltiazem 12hr er 60 mg cap</i>	1	
<i>diltiazem 12hr er 90 mg cap</i>	1	
<i>diltiazem 24hr cd 120 mg cap</i>	1	QL 30/30
<i>diltiazem 24hr cd 180 mg cap</i>	1	QL 60/30
<i>diltiazem 24hr cd 240 mg cap</i>	1	QL 60/30
<i>diltiazem 24hr cd 300 mg cap</i>	1	QL 30/30
<i>diltiazem 24hr cd 360 mg cap</i>	1	QL 30/30
<i>diltiazem 24hr er 120 mg cap</i>	1	QL 30/30
<i>diltiazem 24hr er 180 mg cap</i>	1	QL 60/30
<i>diltiazem 24hr er 180 mg tab</i>	1	QL 60/30
<i>diltiazem 24hr er 240 mg cap</i>	1	QL 60/30
<i>diltiazem 24hr er 240 mg tab</i>	1	QL 60/30
<i>diltiazem 24hr er 300 mg cap</i>	1	QL 30/30
<i>diltiazem 24hr er 300 mg tab</i>	1	QL 30/30
<i>diltiazem 24hr er 360 mg cap</i>	1	QL 30/30
<i>diltiazem 24hr er 360 mg tab</i>	1	QL 30/30
<i>diltiazem 24hr er 420 mg cap</i>	1	QL 30/30
<i>diltiazem 24hr er 420 mg tab</i>	1	QL 30/30
<i>diltiazem 25 mg/5 ml vial</i>	1	
<i>diltiazem 30 mg tablet</i>	1	
<i>diltiazem 50 mg/10 ml vial</i>	1	
<i>diltiazem 60 mg tablet</i>	1	
<i>diltiazem 90 mg tablet</i>	1	
<i>diltiazem er 120 mg capsule</i>	1	QL 30/30
<i>diltiazem er 180 mg capsule</i>	1	QL 60/30
<i>diltiazem er 240 mg capsule</i>	1	QL 60/30
<i>diltiazem hcl 100 mg vial</i>	1	
<i>felodipine er 10 mg tablet</i>	1	QL 30/30
<i>felodipine er 2.5 mg tablet</i>	1	QL 30/30
<i>felodipine er 5 mg tablet</i>	1	QL 30/30
<i>isradipine 2.5 mg capsule</i>	1	
<i>isradipine 5 mg capsule</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
MATZIM LA 180 MG TABLET	1	QL 60/30
MATZIM LA 240 MG TABLET	1	QL 60/30
MATZIM LA 300 MG TABLET	1	QL 30/30
MATZIM LA 360 MG TABLET	1	QL 30/30
MATZIM LA 420 MG TABLET	1	QL 30/30
<b>nicardipine 20 mg capsule</b>	1	
<b>nicardipine 25 mg/10 ml vial</b>	1	
<b>nicardipine 30 mg capsule</b>	1	
NIFEDICAL XL 30 MG TABLET	1	QL 30/30
NIFEDICAL XL 60 MG TABLET	1	QL 60/30
<b>nifedipine 10 mg capsule</b>	1	
<b>nifedipine 20 mg capsule</b>	1	
<b>nifedipine er 30 mg tablet</b>	1	QL 30/30
<b>nifedipine er 60 mg tablet</b>	1	QL 60/30
<b>nifedipine er 90 mg tablet</b>	1	QL 30/30
<b>nimodipine 30 mg capsule</b>	1	
<b>nisoldipine er 17 mg tablet</b>	1	
<b>nisoldipine er 20 mg tablet</b>	1	
<b>nisoldipine er 25.5 mg tablet</b>	1	
<b>nisoldipine er 30 mg tablet</b>	1	
<b>nisoldipine er 34 mg tablet</b>	1	
<b>nisoldipine er 40 mg tablet</b>	1	
<b>nisoldipine er 8.5 mg tablet</b>	1	
NYMALIZE 60 MG/20 ML SOLUTION	4	
<b>olmsrtn-amldpn-hctz 20-5-12.5</b>	1	QL 30/30
<b>olmsrtn-amldpn-hctz 40-10-12.5</b>	1	QL 30/30
<b>olmsrtn-amldpn-hctz 40-10-25mg</b>	1	QL 30/30
<b>olmsrtn-amldpn-hctz 40-5-12.5</b>	1	QL 30/30
<b>olmsrtn-amldpn-hctz 40-5-25 mg</b>	1	QL 30/30
TAZTIA XT 120 MG CAPSULE	1	QL 30/30
TAZTIA XT 180 MG CAPSULE	1	QL 60/30
TAZTIA XT 240 MG CAPSULE	1	QL 60/30
TAZTIA XT 300 MG CAPSULE	1	QL 30/30
TAZTIA XT 360 MG CAPSULE	1	QL 30/30
<b>verapamil 120 mg tablet</b>	1	
<b>verapamil 2.5 mg/ml vial</b>	1	
<b>verapamil 360 mg cap pellet</b>	1	QL 30/30
<b>verapamil 40 mg tablet</b>	1	
<b>verapamil 80 mg tablet</b>	1	

Drug Name	Drug Tier	Requirements / Limits
<b>verapamil er 120 mg capsule</b>	1	QL 30/30
<b>verapamil er 120 mg tablet</b>	1	
<b>verapamil er 180 mg capsule</b>	1	QL 30/30
<b>verapamil er 180 mg tablet</b>	1	
<b>verapamil er 240 mg capsule</b>	1	QL 30/30
<b>verapamil er 240 mg tablet</b>	1	
<b>verapamil er pm 100 mg capsule</b>	1	QL 30/30
<b>verapamil er pm 200 mg capsule</b>	1	QL 60/30
<b>verapamil er pm 300 mg capsule</b>	1	QL 30/30
<b>verapamil sr 120 mg capsule</b>	1	
<b>verapamil sr 180 mg capsule</b>	1	
<b>verapamil sr 240 mg capsule</b>	1	
<b>Calcium Channel Modifying Agents</b>		
CELONTIN 300 MG KAPSEAL	2	
<b>ethosuximide 250 mg capsule</b>	1	
<b>ethosuximide 250 mg/5 ml soln</b>	1	
LYRICA 100 MG CAPSULE	2	QL 90/30
LYRICA 150 MG CAPSULE	2	QL 90/30
LYRICA 20 MG/ML ORAL SOLUTION	2	QL 900/30
LYRICA 200 MG CAPSULE	2	
LYRICA 225 MG CAPSULE	2	QL 60/30
LYRICA 25 MG CAPSULE	2	QL 90/30
LYRICA 300 MG CAPSULE	2	QL 60/30
LYRICA 50 MG CAPSULE	2	QL 90/30
LYRICA 75 MG CAPSULE	2	QL 90/30
<b>zonisamide 100 mg capsule</b>	1	
<b>zonisamide 25 mg capsule</b>	1	
<b>zonisamide 50 mg capsule</b>	1	
<b>Cardiovascular Agents</b>		
<b>isoxsuprine 10 mg tablet</b>	1	+
<b>isoxsuprine 20 mg tablet</b>	1	+
<b>nitroglycerin er 2.5 mg cap</b>	1	+
<b>nitroglycerin er 6.5 mg cap</b>	1	+
<b>nitroglycerin er 9 mg capsule</b>	1	+
NITRO-TIME ER 2.5 MG CAPSULE	2	+
NITRO-TIME ER 6.5 MG CAPSULE	2	+
NITRO-TIME ER 9 MG CAPSULE	2	+

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Drug Name	Drug Tier	Requirements / Limits
<b>Cardiovascular Agents, Other</b>		
<i>atropine 0.1 mg/ml abject</i>	1	
CORLANOR 5 MG TABLET	3	PA,QL 60/30
CORLANOR 7.5 MG TABLET	3	PA,QL 60/30
DEMSER 250 MG CAPSULE	4	
DIGITEK 125 MCG TABLET	1	QL 30/30
DIGITEK 250 MCG TABLET	1	PA HRM
DIGOX 125 MCG TABLET	1	QL 30/30
DIGOX 250 MCG TABLET	1	PA HRM
<i>digoxin 0.05 mg/ml solution</i>	1	
<i>digoxin 125 mcg tablet</i>	1	QL 30/30
<i>digoxin 250 mcg tablet</i>	1	PA HRM
<i>digoxin 500 mcg/2 ml ampule</i>	1	PA HRM
LANOXIN 125 MCG TABLET	3	QL 30/30
LANOXIN 187.5 MCG TABLET	3	PA HRM
LANOXIN 250 MCG TABLET	3	PA HRM
LANOXIN 62.5 MCG TABLET	3	
LANOXIN PED 100 MCG/ML AMPUL	3	PA HRM
NORTHERA 100 MG CAPSULE	4	PA,QL 90/30
NORTHERA 200 MG CAPSULE	4	PA,QL 180/30
NORTHERA 300 MG CAPSULE	4	PA,QL 180/30
<i>pentoxifylline er 400 mg tab</i>	1	
PRALUENT 150 MG/ML PEN	4	PA
PRALUENT 150 MG/ML SYRINGE	4	PA
PRALUENT 75 MG/ML PEN	4	PA
PRALUENT 75 MG/ML SYRINGE	4	PA
RANEXA ER 1,000 MG TABLET	2	QL 60/30
RANEXA ER 500 MG TABLET	2	QL 60/30
TEKTURNNA 150 MG TABLET	2	QL 30/30
TEKTURNNA 300 MG TABLET	2	QL 30/30
TEKTURNNA HCT 150-12.5 MG TAB	2	QL 30/30
TEKTURNNA HCT 150-25 MG TABLET	2	QL 30/30

Drug Name	Drug Tier	Requirements / Limits
<b>Central Nervous System, Other</b>		
TEKTURNNA HCT 300-12.5 MG TAB	2	QL 30/30
TEKTURNNA HCT 300-25 MG TABLET	2	QL 30/30
<b>Cholinesterase Inhibitors</b>		
<i>donepezil hcl 10 mg tablet</i>	1	QL 60/30
<i>donepezil hcl 23 mg tablet</i>	1	QL 30/30
<i>donepezil hcl 5 mg tablet</i>	1	QL 30/30
<i>donepezil hcl odt 10 mg tablet</i>	1	QL 60/30
<i>donepezil hcl odt 5 mg tablet</i>	1	QL 30/30
<i>galantamine 4 mg/ml oral soln</i>	1	QL 200/30
<i>galantamine er 16 mg capsule</i>	1	QL 30/30
<i>galantamine er 24 mg capsule</i>	1	QL 30/30
<i>galantamine er 8 mg capsule</i>	1	QL 30/30
<i>galantamine hbr 12 mg tablet</i>	1	QL 60/30
<i>galantamine hbr 4 mg tablet</i>	1	QL 60/30
<i>galantamine hbr 8 mg tablet</i>	1	QL 60/30
<i>rivastigmine 1.5 mg capsule</i>	1	QL 60/30
<i>rivastigmine 13.3 mg/24hr ptch</i>	1	QL 30/30
<i>rivastigmine 3 mg capsule</i>	1	QL 60/30
<i>rivastigmine 4.5 mg capsule</i>	1	QL 60/30
<i>rivastigmine 4.6 mg/24hr patch</i>	1	QL 30/30
<i>rivastigmine 6 mg capsule</i>	1	QL 60/30
<i>rivastigmine 9.5 mg/24hr patch</i>	1	QL 30/30
<b>Cough &amp; Cold Supplemental</b>		
<i>benzonatate capsules</i>	1	+
<i>bromfed dm cough syrup</i>	1	+

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Drug Name	Drug Tier	Requirements / Limits
<b>bromphenir-pseudoephed-dm syr</b>	1	+
<b>cheratussin ac syrup</b>	1	+
<b>cheratussin dac syrup</b>	1	+
<b>codeine-guaifen 10-100 mg/5 ml</b>	1	+
<b>guaifen-codeine 100-10 mg/5 ml</b>	1	+
<b>guaifenesin ac cough syrup</b>	1	+
<b>guaifenesin dac oral solution</b>	1	+
<b>guaifenesin-codeine syrup</b>	1	+
<b>hydrocodone-chlorphen er susp</b>	1	+
<b>hydrocodone-homatropine syrup</b>	1	+
<b>hydromet syrup</b>	1	+
<b>iophen-c nr liquid</b>	1	+
MAXIFED CDX TABLET	2	+
MAXIPHEN CD TABLET	2	+
MAXIPHEN CDX TABLET	2	+
<b>m-clear wc liquid</b>	1	+
M-END MAX D LIQUID	2	+
M-END PE LIQUID	2	+
<b>promethazine vc-codeine syrup</b>	1	+
<b>promethazine-codeine syrup</b>	1	+
<b>promethazine-dm syrup</b>	1	+
<b>promethazine-pe-codeine syrup</b>	1	+
TESSALON PERLE 100 MG CAP	2	+
TUSSIONEX PENNKinetic SUSP	2	+
<b>virtussin ac liquid</b>	1	+
<b>Cystic Fibrosis Agents</b>		
BETHKIS 300 MG/4 ML AMPULE	4	PA,B/D
CAYSTON 75 MG INHAL SOLUTION	4	PA,QL 84/56
KALYDECO 150 MG TABLET	4	PA,QL 60/30
KALYDECO 50 MG GRANULES PACKET	4	PA,QL 60/30
KALYDECO 75 MG GRANULES PACKET	4	PA,QL 60/30
ORKAMBI 100 MG-125 MG TABLET	4	PA,QL 120/30

Drug Name	Drug Tier	Requirements / Limits
ORKAMBI 200 MG-125 MG TABLET	4	PA,QL 120/30
PULMOZYME 1 MG/ML AMPUL	4	PA,QL 150/30,B/D
TOBI PODHALER 28 MG INHALE CAP	4	QL 1568/365
<b>tobramycin 300 mg/5 ml ampule</b>	4	PA,QL 280/56,B/D
<b>Dental and Oral Agents</b>		
ARESTIN 1 MG MICROSPHERE	3	
BUCALSEP SOLUTION	2	+
BUCALSEP SPRAY	2	+
<b>cevimeline hcl 30 mg capsule</b>	1	
<b>chlorhexidine 0.12% rinse</b>	1	
KEPIVANCE 6.25 MG VIAL	4	
ORALONE 0.1% PASTE	1	
PAROEX 0.12% ORAL RINSE	1	
PERIOGARD 0.12% ORAL RINSE	1	
<b>pilocarpine hcl 5 mg tablet</b>	1	
<b>pilocarpine hcl 7.5 mg tablet</b>	1	
PREVIDENT 0.2% RINSE	2	
PREVIDENT 1.1% GEL	2	
<b>triamcinolone 0.1% paste</b>	1	
<b>Dermatological Agents</b>		
<b>acitretin 10 mg capsule</b>	3	
<b>acitretin 17.5 mg capsule</b>	3	
<b>acitretin 25 mg capsule</b>	3	
<b>adapalene 0.1% cream</b>	1	
<b>adapalene 0.1% gel</b>	1	
<b>adapalene 0.1% lotion</b>	1	
<b>adapalene 0.3% gel</b>	1	
ALA-QUIN 3-0.5% CREAM	2	+
ALCORTIN A GEL	2	+
ALOQUIN 1.25%-1% GEL	2	+
ALUVEA 39% CREAM	2	+
<b>ammonium lactate 12% cream</b>	1	
<b>ammonium lactate 12% lotion</b>	1	
AMNESTEEM 10 MG CAPSULE	1	

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Drug Name	Drug Tier	Requirements / Limits
AMNESTEEM 20 MG CAPSULE	1	
AMNESTEEM 40 MG CAPSULE	1	
ANALPRAM ADVANCED 1 OZ KIT	2	+
ANALPRAM ADVANCED 30 X 4G KIT	2	+
ANALPRAM E 2.5% CREAM KIT	2	+
ANALPRAM HC 1% CREAM	2	+
ANALPRAM HC 2.5% CREAM	2	+
ANALPRAM HC 2.5% CRM SINGLES	2	+
ANALPRAM HC 2.5% LOTION	2	+
ANALPRAM HC 2.5%-1% CREAM	2	+
ANALPRAM HC 2.5%-1% CRM SINGLE	2	+
ANALPRAM HC 2.5%-1% LOTION	2	+
<b><i>anucort-hc 25 mg suppository</i></b>	1	+
ANUSOL-HC 25 MG SUPPOSITORY	2	+
AQUA GLYCOLIC HC 2% KIT	2	+
AQUORAL SPRAY	2	+
ATOPICLAIR CREAM	2	+
AURSTAT ANTI-ITCH HYDROGEL	2	+
AVITA 0.025% CREAM	1	PA,QL 45/30
AVITA 0.025% GEL	1	PA,QL 45/30
AZELEX 20% CREAM	3	
BENZEFOAM 5.3% EMOLLIENT FOAM	2	+
BENZEFOAM ULTRA 9.8% FOAM	2	+
BENZEPRO 5.3% EMOLLIENT FOAM	2	+
BENZEPRO 7% CREAMY WASH	2	+
BENZEPRO 9.8% FOAM	2	+
<b><i>benzoyl peroxide 5.3% foam</i></b>	1	+
<b><i>benzoyl peroxide 9.8% foam</i></b>	1	+
BIONECT 0.2% GEL	2	+
BP 5.3% FOAM	2	+
BP 9.8% FOAM	2	+
BP CLEANSING WASH	1	

Drug Name	Drug Tier	Requirements / Limits
BP WASH 7% LIQUID	2	+
BP WASH ACNE 4% TREATMENT PACK	2	+
BP WASH ACNE 8% TREATMENT PACK	2	+
<b><i>bp-50% urea emulsion</i></b>	1	+
BPO 4% CREAMY WASH PACK	2	+
BPO 8% CREAMY WASH PACK	2	+
<b><i>calcipotriene 0.005% cream</i></b>	1	QL 120/30
<b><i>calcipotriene 0.005% ointment</i></b>	1	QL 120/30
<b><i>calcipotriene 0.005% solution</i></b>	1	QL 60/30
CALCITRENE 0.005% OINTMENT	1	QL 120/30
<b><i>calcitriol 3 mcg/g ointment</i></b>	1	QL 800/30
CAPHOSOL SOLUTION	2	+
CEM-UREA 45% PRE-FILLED APPL	2	+
CIDALEAZE 3% CREAM	2	+
CLARAVIS 10 MG CAPSULE	1	
CLARAVIS 20 MG CAPSULE	1	
CLARAVIS 30 MG CAPSULE	1	
CLARAVIS 40 MG CAPSULE	1	
<b><i>clind ph-benzoyl perox 1.2-5%</i></b>	1	
<b><i>clindamycin-benzoyl perox 1-5%</i></b>	1	
<b><i>clinda-tretinoin 1.2%-0.025%</i></b>	1	
CONDYLOX 0.5% GEL	3	
CORTANE-B LOTION	2	+
CURAD GAUZE PADS 2" X 2"	1	
DERMASORB HC 2% COMPLETE KIT	2	+
DERMASORB TA 0.1% COMPLETE KIT	2	+
DERMAZENE CREAM	2	+
<b><i>diclofenac 1.5% topical soln</i></b>	3	QL 1050/30
<b><i>diclofenac sodium 1% gel</i></b>	1	QL 1000/30
<b><i>diclofenac sodium 3% gel</i></b>	1	
<b><i>doxepin 5% cream</i></b>	1	
<b><i>doxycycline ir-dr 40 mg cap</i></b>	1	
ELETONE CREAM	2	+
ELETONE CREAM TWIN PACK	2	+
ELIDEL 1% CREAM	2	QL 100/90

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Drug Name	Drug Tier	Requirements / Limits
EPIFOAM FOAM	2	+
<i>erythromycin-benzoyl gel</i>	1	
<i>ethyl chloride spray</i>	1	+
FINACEA 15% FOAM	3	
FINACEA 15% GEL	3	
<i>fluorouracil 0.5% cream</i>	4	
<i>fluorouracil 2% topical soln</i>	1	
<i>fluorouracil 5% cream</i>	1	
<i>fluorouracil 5% top solution</i>	1	
<i>flurandrenolide 0.05% ointment</i>	1	
GRAFCO SILVER NIT	2	+
APPLICATOR		
GRANULEX SPRAY	2	+
GRX HICORT 25 MG SUPPOSITORY	2	+
HEMMOREX-HC 25 MG SUPPOSITORY	2	+
HEMMOREX-HC 30 MG SUPPOSITORY	2	+
HPR EMOLLIENT FOAM	2	+
HPR PLUS CREAM	2	+
HPR PLUS EMOLLIENT FOAM	2	+
HYDRO 35 FOAM	2	+
<i>hydrocort-iodoquinol-aloe sach</i>	1	+
<i>hydrocortisone ac 25 mg supp</i>	1	+
<i>hydrocortisone ac 30 mg supp</i>	1	+
<i>hydrocortisone-iodoquinol crm</i>	1	+
<i>hydrocortisone-pramoxine cream</i>	1	+
<i>hydrocort-pram 2.5%-1% crm kit</i>	1	+
<i>hydrocort-pramoxine 1%-1% crm</i>	1	+
<i>hydrocort-pramoxine 2.5%-1% cm</i>	1	+
<i>hydrocort-pramoxine 2.5-1% crm</i>	1	+
HYLATOPIC EMOLLIENT FOAM	2	+
HYLATOPICPLUS CREAM	2	+
HYLATOPICPLUS EMOLLIENT FOAM	2	+
<i>imiquimod 5% cream packet</i>	1	QL 12/30
<i>lactic acid 10% e cream</i>	1	+
<i>lidocaine 3% cream</i>	1	+
LIDOPIN 3% CREAM	2	+

Drug Name	Drug Tier	Requirements / Limits
LOPROX 0.77% CREAM KIT	2	+
<i>methoxsalen 10 mg softgel</i>	4	
MYORISAN 10 MG CAPSULE	1	
MYORISAN 20 MG CAPSULE	1	
MYORISAN 30 MG CAPSULE	1	
MYORISAN 40 MG CAPSULE	1	
NEOSALUS CP CREAM	2	+
NEOSALUS CREAM	2	+
NEOSALUS FOAM	2	+
NEO-SYNALAR 0.5-0.025% CRM KIT	2	+
NEUAC GEL		1
NUMOISYN LIQUID	2	+
PACNEX 7% WASH	2	+
PEDIADERM AF KIT	2	+
PEDIADERM HC 2% KIT	2	+
PEDIADERM TA 0.1% KIT	2	+
PENNSAID 2% PUMP	3	QL 224/28, ST
PICATO 0.015% GEL	3	QL 3/56
PICATO 0.05% GEL	3	QL 2/56
PODOCON-25 LIQUID		1
<i>podofilox 0.5% topical soln</i>	1	
PR BENZOYL PEROXIDE 7% WASH	2	+
PRAMCORT 1% CREAM	2	+
PRAMOSONE 1% CREAM	2	+
PRAMOSONE 1% LOTION	2	+
PRAMOSONE 1% OINTMENT	2	+
PRAMOSONE 1%-1% CREAM	2	+
PRAMOSONE 1%-1% OINTMENT	2	+
PRAMOSONE 2.5% LOTION	2	+
PRAMOSONE 2.5% OINTMENT	2	+
PRAMOSONE 2.5%-1% CREAM	2	+
PRAMOSONE 2.5%-1% LOTION	2	+
PRAMOSONE 2.5%-1% OINTMENT	2	+
PRESERA FOAM	2	+
PRUCLAIR NONSTEROIDAL CREAM	2	+
PRUMYX CREAM	2	+

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Drug Name	Drug Tier	Requirements / Limits
REA LO 39 CREAM	2	+
REGRANEX 0.01% GEL	4	PA,QL 15/30
RIAX 5.5% FOAM	2	+
RIAX 9.5% FOAM	2	+
ROSADAN 0.75% GEL KIT	2	+
SALACYN 6% CREAM	1	
<b>salicylic acid 6% cream</b>	1	
<b>salicylic acid 6% gel</b>	1	
<b>salicylic acid 6% shampoo</b>	1	
SANTYL OINTMENT	2	
SCALACORT DK 2% KIT	2	+
SEBUDERM GEL	2	+
<b>selenium sulfide 2.5% lotion</b>	1	
<b>sod surface-sulfur 9-4.5% kit</b>	1	+
<b>sod surface-sulfur 9-4.5% wash</b>	1	+
<b>sodium sulf-sulfur cleanser</b>	1	
SUMADAN KIT	2	+
SUMADAN XLT KIT	2	+
SUMAXIN CP KIT	2	+
<b>tacrolimus 0.03% ointment</b>	1	QL 100/90
<b>tacrolimus 0.1% ointment</b>	1	QL 100/90
<b>tazarotene 0.1% cream</b>	1	QL 120/30
TAZORAC 0.05% CREAM	3	QL 120/30
TAZORAC 0.05% GEL	3	QL 100/30
TAZORAC 0.1% CREAM	3	QL 120/30
TAZORAC 0.1% GEL	3	QL 100/30
<b>tretinoin 0.01% gel</b>	1	PA,QL 45/30
<b>tretinoin 0.025% cream</b>	1	PA,QL 45/30
<b>tretinoin 0.025% gel</b>	1	PA,QL 45/30
<b>tretinoin 0.05% cream</b>	1	PA,QL 45/30
<b>tretinoin 0.05% gel</b>	1	PA,QL 45/30
<b>tretinoin 0.1% cream</b>	1	PA,QL 45/30
<b>tretinoin gel micro 0.04% pump</b>	1	PA
<b>tretinoin gel micro 0.04% tube</b>	1	PA

Drug Name	Drug Tier	Requirements / Limits
<b>tretinoin gel micro 0.1% pump</b>	1	PA
<b>tretinoin gel micro 0.1% tube</b>	1	PA
ULTRAVATE X CRM COMBO PACK	2	+
ULTRAVATE X OINT COMBO PAC	2	+
UMECTA 40% NAIL FILM PEN	2	+
UMECTA 40% NAIL FILM SUSP	2	+
URAMAXIN 20% FOAM	3	
URAMAXIN 45% LOTION	2	+
URAMAXIN 45% NAIL GEL	2	+
URAMAXIN 45% UREA CREAM	2	+
URAMAXIN GT 45% PRE-FILLED APP	2	+
<b>urea 35% foam</b>	1	+
<b>urea 39% cream</b>	1	+
<b>urea 40% gel</b>	1	
<b>urea 40% nail kit</b>	1	+
<b>urea 45% cream</b>	1	+
<b>urea 45% lotion</b>	1	+
<b>urea 45% nail gel</b>	1	+
UVADEX 20 MCG/ML VIAL	3	PA,B/D
VEREGEN 15% OINTMENT	3	
VYTONE CREAM PACKET	2	+
XERAC AC 6.25% SOLUTION	3	
ZENATANE 10 MG CAPSULE	1	
ZENATANE 20 MG CAPSULE	1	
ZENATANE 30 MG CAPSULE	1	
ZENATANE 40 MG CAPSULE	1	
ZYCLARA 2.5% CREAM PUMP	4	QL 15/30
ZYCLARA 3.75% CREAM	4	
ZYCLARA 3.75% CREAM PUMP	2	
<b>Diuretics, Carbonic Anhydrase Inhibitors</b>		
<b>acetazolamide 125 mg tablet</b>	1	
<b>acetazolamide 250 mg tablet</b>	1	
<b>acetazolamide sod 500 mg vial</b>	1	
<b>methazolamide 50 mg tablet</b>	1	
<b>Diuretics, Loop</b>		
<b>bumetanide 0.25 mg/ml vial</b>	1	
<b>bumetanide 0.5 mg tablet</b>	1	

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Drug Name	Drug Tier	Requirements / Limits
<b>bumetanide 1 mg tablet</b>	1	
<b>bumetanide 2 mg tablet</b>	1	
<b>ethacrynat sodium 50 mg vial</b>	1	
<b>ethacrynic acid 25 mg tablet</b>	1	
<b>furosemide 10 mg/ml solution</b>	1	
<b>furosemide 100 mg/10 ml vial</b>	1	
<b>furosemide 20 mg tablet</b>	1	
<b>furosemide 40 mg tablet</b>	1	
<b>furosemide 40 mg/4 ml syringe</b>	1	
<b>furosemide 40 mg/5 ml soln</b>	1	
<b>furosemide 80 mg tablet</b>	1	
<b>torsemide 10 mg tablet</b>	1	
<b>torsemide 100 mg tablet</b>	1	
<b>torsemide 20 mg tablet</b>	1	
<b>torsemide 5 mg tablet</b>	1	
<b>Diuretics, Potassium-sparing</b>		
<b>amiloride hcl 5 mg tablet</b>	1	
<b>amiloride hcl-hctz 5-50 mg tab</b>	1	
DYRENIUM 100 MG CAPSULE	3	
DYRENIUM 50 MG CAPSULE	3	
<b>eplerenone 25 mg tablet</b>	1	
<b>eplerenone 50 mg tablet</b>	1	
<b>spironolactone 100 mg tablet</b>	1	
<b>spironolactone 25 mg tablet</b>	1	
<b>spironolactone 50 mg tablet</b>	1	
<b>spironolactone-hctz 25-25 tab</b>	1	
<b>triamterene-hctz 37.5-25 mg cp</b>	1	
<b>triamterene-hctz 37.5-25 mg tb</b>	1	
<b>triamterene-hctz 50-25 mg cap</b>	1	
<b>triamterene-hctz 75-50 mg tab</b>	1	
<b>Diuretics, Thiazide</b>		
<b>chlorothiazide 250 mg tablet</b>	1	
<b>chlorothiazide 500 mg tablet</b>	1	
<b>chlorothiazide sod 500 mg vial</b>	1	
<b>chlorthalidone 25 mg tablet</b>	1	
<b>chlorthalidone 50 mg tablet</b>	1	
DIURIL 250 MG/5 ML ORAL SUSP	3	
<b>hydrochlorothiazide 12.5 mg cp</b>	1	

Drug Name	Drug Tier	Requirements / Limits
<b>hydrochlorothiazide 12.5 mg tb</b>	1	
<b>hydrochlorothiazide 25 mg tab</b>	1	
<b>hydrochlorothiazide 50 mg tab</b>	1	
<b>indapamide 1.25 mg tablet</b>	1	
<b>indapamide 2.5 mg tablet</b>	1	
<b>methyclothiazide 5 mg tablet</b>	1	
<b>metolazone 10 mg tablet</b>	1	
<b>metolazone 2.5 mg tablet</b>	1	
<b>metolazone 5 mg tablet</b>	1	
<b>Dopamine Agonists</b>		
APOKYN 30 MG/3 ML CARTRIDGE	4	PA,QL 60/30
<b>bromocriptine 2.5 mg tablet</b>	1	
<b>bromocriptine 5 mg capsule</b>	1	
NEUPRO 1 MG/24 HR PATCH	3	QL 30/30
NEUPRO 2 MG/24 HR PATCH	3	QL 30/30
NEUPRO 3 MG/24 HR PATCH	3	QL 30/30
NEUPRO 4 MG/24 HR PATCH	3	QL 30/30
NEUPRO 6 MG/24 HR PATCH	3	QL 30/30
NEUPRO 8 MG/24 HR PATCH	3	QL 30/30
<b>pramipexole 0.125 mg tablet</b>	1	QL 90/30
<b>pramipexole 0.25 mg tablet</b>	1	QL 90/30
<b>pramipexole 0.5 mg tablet</b>	1	QL 90/30
<b>pramipexole 0.75 mg tablet</b>	1	QL 90/30
<b>pramipexole 1 mg tablet</b>	1	QL 90/30
<b>pramipexole 1.5 mg tablet</b>	1	QL 90/30
<b>pramipexole er 0.375 mg tablet</b>	1	QL 90/30
<b>pramipexole er 0.75 mg tablet</b>	1	QL 90/30
<b>pramipexole er 1.5 mg tablet</b>	1	QL 90/30
<b>pramipexole er 2.25 mg tablet</b>	1	QL 30/30
<b>pramipexole er 3 mg tablet</b>	1	QL 30/30
<b>pramipexole er 3.75 mg tablet</b>	1	QL 30/30
<b>pramipexole er 4.5 mg tablet</b>	1	QL 30/30
<b>ropinirole hcl 0.25 mg tablet</b>	1	
<b>ropinirole hcl 0.5 mg tablet</b>	1	
<b>ropinirole hcl 1 mg tablet</b>	1	
<b>ropinirole hcl 2 mg tablet</b>	1	
<b>ropinirole hcl 3 mg tablet</b>	1	
<b>ropinirole hcl 4 mg tablet</b>	1	
<b>ropinirole hcl 5 mg tablet</b>	1	

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Drug Name	Drug Tier	Requirements / Limits
<b>ropinirole hcl er 12 mg tablet</b>	1	
<b>ropinirole hcl er 2 mg tablet</b>	1	
<b>ropinirole hcl er 4 mg tablet</b>	1	
<b>ropinirole hcl er 6 mg tablet</b>	1	
<b>ropinirole hcl er 8 mg tablet</b>	1	
<b>Dopamine Precursors/L- Amino Acid Decarboxylase Inhibitors</b>		
<b>carbidopa 25 mg tablet</b>	1	
<b>carbidopa-levo 10-100 mg odt</b>	1	
<b>carbidopa-levo 25-100 mg odt</b>	1	
<b>carbidopa-levo 25-250 mg odt</b>	1	
<b>carbidopa-levo er 25-100 tab</b>	1	
<b>carbidopa-levo er 50-200 tab</b>	1	
<b>carbidopa-levodopa 10-100 tab</b>	1	
<b>carbidopa-levodopa 25-100 tab</b>	1	
<b>carbidopa-levodopa 25-250 tab</b>	1	
<b>carbidopa-levodopa-enta 100 mg</b>	1	
<b>carbidopa-levodopa-enta 125 mg</b>	1	
<b>carbidopa-levodopa-enta 150 mg</b>	1	
<b>carbidopa-levodopa-enta 200 mg</b>	1	
<b>carbidopa-levodopa-enta 50 mg</b>	1	
<b>carbidopa-levodopa-enta 75 mg</b>	1	
RYTARY ER 23.75 MG-95 MG CAP	3	ST
RYTARY ER 36.25 MG-145 MG CAP	3	ST
RYTARY ER 48.75 MG-195 MG CAP	3	ST
RYTARY ER 61.25 MG-245 MG CAP	3	ST
<b>Dyslipidemics, Fibric Acid Derivatives</b>		
<b>fenofibrate 120 mg tablet</b>	1	QL 30/30
<b>fenofibrate 130 mg capsule</b>	1	QL 30/30
<b>fenofibrate 134 mg capsule</b>	1	QL 30/30
<b>fenofibrate 145 mg tablet</b>	1	QL 30/30
<b>fenofibrate 150 mg capsule</b>	1	QL 30/30
<b>fenofibrate 160 mg tablet</b>	1	QL 30/30
<b>fenofibrate 200 mg capsule</b>	1	QL 30/30
<b>fenofibrate 40 mg tablet</b>	1	QL 60/30
<b>fenofibrate 43 mg capsule</b>	1	QL 60/30
<b>fenofibrate 48 mg tablet</b>	1	QL 60/30

Drug Name	Drug Tier	Requirements / Limits
<b>fenofibrate 50 mg capsule</b>	1	QL 60/30
<b>fenofibrate 54 mg tablet</b>	1	QL 60/30
<b>fenofibrate 67 mg capsule</b>	1	QL 60/30
<b>fenofibric acid 105 mg tablet</b>	1	QL 30/30
<b>fenofibric acid 35 mg tablet</b>	1	QL 60/30
<b>fenofibric acid dr 135 mg cap</b>	1	QL 30/30
<b>fenofibric acid dr 45 mg cap</b>	1	QL 60/30
<b>gemfibrozil 600 mg tablet</b>	1	QL 60/30
<b>Dyslipidemics, HMG CoA Reductase Inhibitors</b>		
<b>atorvastatin 10 mg tablet</b>	1	QL 30/30
<b>atorvastatin 20 mg tablet</b>	1	QL 30/30
<b>atorvastatin 40 mg tablet</b>	1	QL 30/30
<b>atorvastatin 80 mg tablet</b>	1	QL 30/30
CRESTOR 10 MG TABLET	3	QL 30/30,ST
CRESTOR 20 MG TABLET	3	QL 30/30,ST
CRESTOR 40 MG TABLET	3	QL 30/30,ST
CRESTOR 5 MG TABLET	3	QL 30/30,ST
<b>fluvastatin er 80 mg tablet</b>	1	QL 30/30
<b>fluvastatin sodium 20 mg cap</b>	1	QL 30/30
<b>fluvastatin sodium 40 mg cap</b>	1	QL 60/30
LIVALO 1 MG TABLET	2	QL 30/30,ST
LIVALO 2 MG TABLET	2	QL 30/30,ST
LIVALO 4 MG TABLET	2	QL 30/30,ST
<b>lovastatin 10 mg tablet</b>	1	QL 30/30
<b>lovastatin 20 mg tablet</b>	1	QL 30/30
<b>lovastatin 40 mg tablet</b>	1	QL 60/30
<b>pravastatin sodium 10 mg tab</b>	1	QL 30/30
<b>pravastatin sodium 20 mg tab</b>	1	QL 30/30
<b>pravastatin sodium 40 mg tab</b>	1	QL 30/30
<b>pravastatin sodium 80 mg tab</b>	1	QL 30/30
<b>rosuvastatin calcium 10 mg tab</b>	1	QL 30/30
<b>rosuvastatin calcium 20 mg tab</b>	1	QL 30/30
<b>rosuvastatin calcium 40 mg tab</b>	1	QL 30/30
<b>rosuvastatin calcium 5 mg tab</b>	1	QL 30/30

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Drug Name	Drug Tier	Requirements / Limits
<b>simvastatin 10 mg tablet</b>	1	QL 30/30
<b>simvastatin 20 mg tablet</b>	1	QL 30/30
<b>simvastatin 40 mg tablet</b>	1	QL 30/30
<b>simvastatin 5 mg tablet</b>	1	QL 30/30
<b>simvastatin 80 mg tablet</b>	1	QL 30/30
<b>Dyslipidemics, Other</b>		
<b>cholestyramine light packet</b>	1	
<b>cholestyramine light powder</b>	1	
<b>cholestyramine packet</b>	1	
<b>cholestyramine powder</b>	1	
<b>colestipol hcl 1 gm tablet</b>	1	
<b>colestipol hcl granules</b>	1	
COLESTIOL HCL GRANULES PACKET	1	
<b>ezetimibe 10 mg tablet</b>	1	QL 30/30
<b>ezetimibe-simvastatin 10-10 mg</b>	1	QL 30/30
<b>ezetimibe-simvastatin 10-20 mg</b>	1	QL 30/30
<b>ezetimibe-simvastatin 10-40 mg</b>	1	QL 30/30
<b>ezetimibe-simvastatin 10-80 mg</b>	1	QL 30/30
JUXTAPIID 10 MG CAPSULE	4	PA,D/E
JUXTAPIID 20 MG CAPSULE	4	PA,D/E
JUXTAPIID 30 MG CAPSULE	4	PA,D/E
JUXTAPIID 40 MG CAPSULE	4	PA,D/E
JUXTAPIID 5 MG CAPSULE	4	PA,D/E
JUXTAPIID 60 MG CAPSULE	4	PA,D/E
KYNAMRO 200 MG/ML SYRINGE	4	PA,QL 4/28,D/E
<b>niacin er 1,000 mg tablet</b>	1	QL 60/30
<b>niacin er 500 mg tablet</b>	1	QL 30/30
<b>niacin er 750 mg tablet</b>	1	QL 60/30
NIACOR 500 MG TABLET	1	
NIASPAN ER 1,000 MG TABLET	3	QL 60/30,ST
NIASPAN ER 500 MG TABLET	3	QL 30/30,ST
NIASPAN ER 750 MG TABLET	3	QL 60/30,ST
<b>omega-3 ethyl esters 1 gm cap</b>	1	QL 120/30
PREVALITE PACKET	1	
PREVALITE POWDER	1	

Drug Name	Drug Tier	Requirements / Limits
REPATHA 140 MG/ML	4	PA,QL 3/30
SURECLICK		
REPATHA 140 MG/ML SYRINGE	4	PA,QL 3/30
REPATHA 420 MG/3.5ML PUSHTRONX	4	PA,QL 3.5/30
VASCEPA 0.5 GM CAPSULE	3	QL 240/30
VASCEPA 1 GM CAPSULE	3	QL 120/30
VYTORIN 10-10 MG TABLET	3	QL 30/30,ST
VYTORIN 10-20 MG TABLET	3	QL 30/30,ST
VYTORIN 10-40 MG TABLET	3	QL 30/30,ST
VYTORIN 10-80 MG TABLET	3	QL 30/30,ST
WELCHOL 3.75G PACKET	2	
WELCHOL 625 MG TABLET	2	
ZETIA 10 MG TABLET	2	QL 30/30,ST
<b>Electrolyte/Mineral Replacement</b>		
<b>amino acids 15% solution</b>	3	PA,B/D
AMINOSYN 10% IV SOLUTION	3	PA,B/D
AMINOSYN 7%-ELECTROLYTE SOL	3	PA,B/D
AMINOSYN 8.5% IV SOLUTION	3	PA,B/D
AMINOSYN 8.5%- ELECTROLYTES SOL	3	PA,B/D
AMINOSYN II 10% IV SOLUTION	3	PA,B/D
AMINOSYN II 15% IV SOLUTION	3	PA,B/D
AMINOSYN II 7% IV SOLUTION	3	PA,B/D
AMINOSYN II 8.5% IV SOLUTION	3	PA,B/D
AMINOSYN II 8.5%- ELECTROLYTES	3	PA,B/D
AMINOSYN M 3.5% IV SOLUTION	3	PA,B/D
AMINOSYN-HBC 7% IV SOLUTION	3	PA,B/D
AMINOSYN-PF 10% IV SOLUTION	3	PA,B/D
AMINOSYN-PF 7% IV SOLUTION	3	PA,B/D

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Drug Name	Drug Tier	Requirements / Limits
AMINOSYN-RF 5.2% IV SOLUTION	2	PA,B/D
<b>bacteriostatic saline vial</b>	1	
CARBAGLU 200 MG DISPER TABLET	4	PA
CLINIMIX 2.75%-5% SOLUTION	3	PA,B/D
CLINIMIX 4.25%-10% SOLUTION	3	PA,B/D
CLINIMIX 4.25%-20% SOLUTION	3	PA,B/D
CLINIMIX 4.25%-25% SOLUTION	3	PA,B/D
CLINIMIX 4.25%-5% SOLUTION	3	PA,B/D
CLINIMIX 5%-15% SOLUTION	3	PA,B/D
CLINIMIX 5%-20% SOLUTION	3	PA,B/D
CLINIMIX 5%-25% SOLUTION	3	PA,B/D
CLINIMIX E 2.75%-10% SOLUTION	3	PA,B/D
CLINIMIX E 2.75%-5% SOLUTION	3	PA,B/D
CLINIMIX E 4.25%-10% SOLUTION	3	PA,B/D
CLINIMIX E 4.25%-25% SOLUTION	3	PA,B/D
CLINIMIX E 4.25%-5% SOLUTION	3	PA,B/D
CLINIMIX E 5%-15% SOLUTION	3	PA,B/D
CLINIMIX E 5%-20% SOLUTION	3	PA,B/D
CLINIMIX E 5%-25% SOLUTION	3	PA,B/D
CLINISOL 15% SOLUTION	3	PA,B/D
CYTRA-2 ORAL SOLUTION	1	
CYTRA-3 SYRUP	1	
CYTRA-K CRYSTALS PACKET	1	
CYTRA-K ORAL SOLUTION	1	
<i>d5%-1/2ns-kcl 10 meq/l iv sol</i>	3	PA,B/D
<i>d5%-1/2ns-kcl 30 meq/l iv sol</i>	3	PA,B/D
<i>d5%-1/2ns-kcl 40 meq/l iv sol</i>	3	PA,B/D
DENTA 5000 PLUS CREAM	1	
DENTAGEL 1.1% GEL	1	
<i>dextrose 10%-0.2% nacl iv soln</i>	3	PA,B/D
<i>dextrose 10%-0.45% nacl iv sol</i>	3	PA,B/D

Drug Name	Drug Tier	Requirements / Limits
<i>dextrose 10%-water iv solution</i>	1	PA,B/D
<i>dextrose 2.5%-0.45% nacl iv</i>	3	PA,B/D
<i>dextrose 20%-water iv soln</i>	1	PA,B/D
<i>dextrose 25%-water syringe</i>	1	PA,B/D
<i>dextrose 30%-water iv soln</i>	1	PA,B/D
<i>dextrose 40%-water iv soln</i>	1	PA,B/D
<i>dextrose 5%-0.2% nacl iv soln</i>	3	
<i>dextrose 5%-0.225% nacl iv sol</i>	3	
<i>dextrose 5%-0.3% nacl iv soln</i>	3	
<i>dextrose 5%-0.33% nacl iv soln</i>	3	
<i>dextrose 5%-0.45% nacl iv soln</i>	3	
<i>dextrose 5%-0.9% nacl iv soln</i>	3	
<i>dextrose 5%-electrolyte 48</i>	3	PA,B/D
<i>dextrose 5%-lr iv solution</i>	3	PA,B/D
<i>dextrose 5%-water iv soln</i>	1	
<i>dextrose 50%-water iv soln</i>	1	PA,B/D
<i>dextrose 70%-water iv soln</i>	1	
EFFER-K 25 MEQ TABLET EFF	1	
FLUOR-A-DAY 0.25 MG TAB CHEW	1	
FLUOR-A-DAY 1 MG TABLET CHEW	1	
FLUOR-A-DAY 2.5 MG/ML DROPS	1	
<i>fluoride 0.25 mg tablet chew</i>	1	
<i>fluoride 0.5 mg tablet chew</i>	1	
<i>fluoride 1 mg tablet chewable</i>	1	
FLUORIDEX DEFENSE 1.1% GEL	1	
FLUORITAB 0.125 MG/DRP DROPS	1	
FLUORITAB 0.5 MG TABLET CHEW	1	
FLUORITAB 1 MG TABLET CHEW	1	
FREAMINE HBC 6.9% IV SOLN	3	PA,B/D
FREAMINE III 10% IV SOLN.	3	PA,B/D
HEPATAMINE 8% IV SOLUTION	3	PA,B/D
HYPERTONIC CR VIAL	1	PA,B/D
INTRALIPID 30% IV FAT EMUL	3	PA,B/D

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Drug Name	Drug Tier	Requirements / Limits
IONOSOL B-D5W IV SOLUTION	3	PA,B/D
IONOSOL MB-D5W IV SOLUTION	3	PA,B/D
ISOLYTE P-DEXTROSE 5% SOLN	3	PA,B/D
ISOLYTE S IV SOLN PH7.4	3	PA,B/D
ISOLYTE S IV SOLUTION- EXCEL	3	PA,B/D
K EFFERVESCENT 25 MEQ TABLET	1	
KABIVEN IV EMULSION	3	PA,B/D
<i>kcl 20 meq in d5w solution</i>	3	PA,B/D
<i>kcl 20 meq in d5w-0.2% nacl</i>	3	PA,B/D
<i>kcl 20 meq in d5w-0.225% nacl</i>	3	PA,B/D
<i>kcl 20 meq in d5w-0.33% nacl</i>	3	PA,B/D
<i>kcl 20 meq in d5w-0.45% nacl</i>	3	PA,B/D
<i>kcl 20 meq in d5w-lact ringer</i>	3	PA,B/D
<i>kcl 20 meq in d5w-ns</i>	3	PA,B/D
<i>kcl 20 meq-ns 1,000 ml iv soln</i>	3	PA,B/D
<i>kcl 40 meq in d5w solution</i>	3	PA,B/D
<i>kcl 40 meq in d5w-lact ringer</i>	3	PA,B/D
<i>kcl 40 meq in d5w-nacl 0.9%</i>	3	PA,B/D
<i>kcl 40 meq-ns 1,000 ml iv soln</i>	3	PA,B/D
KLOR-CON 10 MEQ TABLET	1	
KLOR-CON 20 MEQ PACKET	1	
KLOR-CON 25 MEQ PACKET	1	
KLOR-CON 8 MEQ TABLET	1	
KLOR-CON M10 TABLET	1	
KLOR-CON M15 TABLET	1	
KLOR-CON M20 TABLET	1	
KLOR-CON SPRINKLE ER 10 MEQ CP	1	
KLOR-CON SPRINKLE ER 8 MEQ CAP	1	
K-PHOS #2 TABLET	2	
K-PHOS NEUTRAL TABLET	2	
K-PHOS ORIGINAL TABLET	2	
K-SOL 10% (20 MEQ/15 ML) LIQ	1	
<i>lactated ringers injection</i>	3	PA,B/D
LIPOSYN III 30% IV FAT EMULSN	3	PA,B/D

Drug Name	Drug Tier	Requirements / Limits
LUDENT FLUORIDE 0.25 MG TB CHW	1	
LUDENT FLUORIDE 0.5 MG TB CHEW	1	
LUDENT FLUORIDE 1 MG TAB CHEW	1	
<i>magnesium sulf 2 g/50 ml bag</i>	1	PA,B/D
<i>magnesium sulf 20 g/500 ml bag</i>	1	PA,B/D
<i>magnesium sulf 4 g/100 ml bag</i>	1	PA,B/D
<i>magnesium sulf 4 g/50 ml bag</i>	1	PA,B/D
<i>magnesium sulf 40 g/1,000 ml</i>	1	PA,B/D
<i>magnesium sulfate 50% syringe</i>	1	PA,B/D
<i>magnesium sulfate 50% vial</i>	1	PA,B/D
MOZOBIL 24 MG/1.2 ML VIAL	4	QL 9.6/30
NEPHRAMINE 5.4% IV SOLUTION	3	PA,B/D
NORMOSOL-M AND DEXTROSE 5%	3	PA,B/D
NORMOSOL-R IV SOLUTION	3	PA,B/D
NORMOSOL-R PH 7.4 IV SOLUTION	3	PA,B/D
NORMOSOL-R-DEXTROSE 5% IV SOLN	3	PA,B/D
NUTRILIPID 20% IV FAT EMULSION	3	PA,B/D
NUTRILYTE II VIAL	3	PA,B/D
NUTRILYTE VIAL	3	PA,B/D
PERIKABIVEN IV EMULSION	3	PA,B/D
PLASMA-LYTE 148 IV SOLUTION	3	PA,B/D
PLASMA-LYTE 56-DEXTROSE 5%	3	PA,B/D
PLASMA-LYTE A PH 7.4 SOLN.	3	PA,B/D
<i>pot citrate-citric acid packet</i>	1	
<i>potassium 25 meq tablet eff</i>	1	
<i>potassium chloride /sodchloride</i>	3	PA,B/D
<i>potassium cit-citric acid soln</i>	1	
<i>potassium citrate er 10 meq tb</i>	1	
<i>potassium citrate er 15 meq tb</i>	1	
<i>potassium citrate er 5 meq tab</i>	1	
<i>potassium cl 10 meq/100 ml sol</i>	1	PA,B/D
<i>potassium cl 10% (20 meq/15 ml</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<b>potassium cl 20 meq packet</b>	1	
<b>potassium cl 20 meq/100 ml sol</b>	1	PA,B/D
<b>potassium cl 20 meq-0.45% nacl</b>	3	PA,B/D
<b>potassium cl 20% (40 meq/15 ml</b>	1	
<b>potassium cl 25 meq tab eff</b>	1	
<b>potassium cl 40 meq/100 ml sol</b>	1	PA,B/D
<b>potassium cl 40 meq/20 ml conc</b>	1	PA,B/D
<b>potassium cl er 10 meq capsule</b>	1	
<b>potassium cl er 10 meq tablet</b>	1	
<b>potassium cl er 20 meq tablet</b>	1	
<b>potassium cl er 8 meq capsule</b>	1	
<b>potassium cl er 8 meq tablet</b>	1	
PREMASOL 10% IV SOLUTION	3	PA,B/D
PREMASOL 6% IV SOLUTION	3	PA,B/D
PREVENTID 5000 1.1% DRY MOUTH	2	
PREVENTID 5000 PLUS CREAM	2	
PREVENTID DENTAL RINSE	2	
PROCALAMINE IV SOLUTION	3	PA,B/D
PROSOL 20% INJECTION	3	PA,B/D
<b>ringer's iv solution</b>	3	PA,B/D
SF 1.1% GEL	1	
SF 5000 PLUS CREAM	1	
<b>sod citrate-citric acid soln</b>	1	
<b>sodium bicarb 4.2% abbject</b>	1	
<b>sodium bicarb 4.2% vial</b>	1	
<b>sodium bicarb 7.5% abject</b>	1	
<b>sodium bicarb 8.4% abject</b>	1	
<b>sodium chloride 0.45% soln</b>	1	
<b>sodium chloride 0.9% solution</b>	1	
<b>sodium chloride 0.9% vial</b>	1	
<b>sodium chloride 3% iv soln</b>	1	
<b>sodium chloride 4 meq/ml vl</b>	1	
<b>sodium chloride 5% iv soln</b>	1	
<b>sodium chloride 50 meq/20 ml</b>	1	
<b>sodium fluoride 0.5 mg(1.1 mg)</b>	1	
<b>sodium fluoride 0.5 mg/ml drop</b>	1	
<b>sodium fluoride 1 mg (2.2 mg)</b>	1	
<b>sodium lactate 5 meq/ml vial</b>	3	PA,B/D

Drug Name	Drug Tier	Requirements / Limits
SPS 15 GM/60 ML SUSPENSION	1	
<b>tpp electrolytes vial</b>	3	PA,B/D
TRAVASOL 10% SOLN VIAFLEX	3	PA,B/D
TROPHAMINE 10% IV SOLUTION	3	PA,B/D
TROPHAMINE 6% IV SOLUTION	3	PA,B/D
VIRTRATE-2 SOLUTION	1	
<b>Electrolyte/Mineral/Metal Modifiers</b>		
CHEMET 100 MG CAPSULE	4	
CUPRIMINE 250 MG CAPSULE	4	
DEPEN 250 MG TITRATAB	4	
EXJADE 125 MG TABLET	4	ST
EXJADE 250 MG TABLET	4	ST
EXJADE 500 MG TABLET	4	ST
JADENU 180 MG TABLET	4	
JADENU 360 MG TABLET	4	
JADENU 90 MG TABLET	4	
JADENU SPRINKLE 180 MG GRANULE	4	
JADENU SPRINKLE 360 MG GRANULE	4	
JADENU SPRINKLE 90 MG GRANULE	4	
KIONEX 15 GM/60 ML SUSPENSION	1	
KIONEX POWDER	1	
SAMSCA 15 MG TABLET	4	PA,QL 30/30
SAMSCA 30 MG TABLET	4	PA,QL 60/30
<b>sod polystyren sulf 15 g/60 ml</b>	1	
<b>sodium polystyrene sulf powder</b>	1	
SPS 30 GM/120 ML ENEMA	1	
SYPRINE 250 MG CAPSULE	4	
VELTASSA 16.8 GM POWDER PACKET	2	
VELTASSA 25.2 GM POWDER PACKET	2	

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Drug Name	Drug Tier	Requirements / Limits
VELTASSA 8.4 GM POWDER PACKET	2	
<b>Emetogenic Therapy Adjuncts</b>		
ALOXI 0.25 MG/5 ML VIAL	3	PA,B/D
ANZEMET 100 MG TABLET	3	PA,QL 5/30,B/D
ANZEMET 50 MG TABLET	3	PA,QL 5/30,B/D
<b>aprepitant 125 mg capsule</b>	1	PA,QL 2/28,B/D
<b>aprepitant 125-80-80 mg pack</b>	1	PA,QL 6/28,B/D
<b>aprepitant 40 mg capsule</b>	1	PA,QL 1/30,B/D
<b>aprepitant 80 mg capsule</b>	1	PA,QL 4/28,B/D
<b>dronabinol 10 mg capsule</b>	1	PA,QL 60/30,B/D
<b>dronabinol 2.5 mg capsule</b>	1	PA,QL 60/30,B/D
<b>dronabinol 5 mg capsule</b>	1	PA,QL 60/30,B/D
EMEND 125 MG POWDER PACKET	2	PA,QL 6/28,B/D
<b>gransetron hcl 0.1 mg/ml vial</b>	1	PA,B/D
<b>gransetron hcl 1 mg tablet</b>	1	PA,QL 60/30,B/D
<b>gransetron hcl 1 mg/ml vial</b>	1	PA,B/D
<b>gransetron hcl 4 mg/4 ml vial</b>	1	PA,B/D
<b>ondansetron 4 mg/2 ml isecure</b>	1	
<b>ondansetron 4 mg/5 ml solution</b>	1	PA,QL 450/30,B/D
<b>ondansetron 40 mg/20 ml vial</b>	1	
<b>ondansetron hcl 24 mg tablet</b>	1	PA,QL 15/30,B/D
<b>ondansetron hcl 4 mg tablet</b>	1	PA,QL 90/30,B/D
<b>ondansetron hcl 4 mg/2 ml vial</b>	1	
<b>ondansetron hcl 8 mg tablet</b>	1	PA,QL 90/30,B/D
<b>ondansetron odt 4 mg tablet</b>	1	PA,QL 90/30,B/D

Drug Name	Drug Tier	Requirements / Limits
<b>ondansetron odt 8 mg tablet</b>	1	PA,QL 90/30,B/D
SANCUSO 3.1 MG/24 HR PATCH	3	PA,QL 4/30
<b>Enzyme Inhibitors</b>		
<b>etoposide 1,000 mg/50 ml vial</b>	1	PA,B/D
<b>etoposide 100 mg/5 ml vial</b>	1	PA,B/D
<b>etoposide 500 mg/25 ml vial</b>	1	PA,B/D
KYPROLIS 30 MG VIAL	4	PA,B/D
KYPROLIS 60 MG VIAL	4	PA,B/D
TOPOSAR 1,000 MG/50 ML VIAL	1	PA,B/D
TOPOSAR 100 MG/5 ML VIAL	1	PA,B/D
TOPOSAR 500 MG/25 ML VIAL	1	PA,B/D
<b>topotecan hcl 4 mg vial</b>	4	
<b>topotecan hcl 4 mg/4 ml vial</b>	4	
ZYDELIG 100 MG TABLET	4	QL 60/30
ZYDELIG 150 MG TABLET	4	QL 60/30
<b>Ergot Alkaloids</b>		
<b>dihydroergotamine 1 mg/ml am</b>	1	QL 30/28
<b>dihydroergotamine 4 mg/ml spry</b>	1	QL 8/30
<b>ergotamine-caffeine 1-100mg tb</b>	1	QL 40/28
MIGERGOT SUPPOSITORY	4	QL 20/28
<b>Estrogens</b>		
ALORA 0.025 MG PATCH	2	PA HRM,QL 8/28
ALORA 0.05 MG PATCH	2	PA HRM,QL 8/28
ALORA 0.075 MG PATCH	2	PA HRM,QL 8/28
ALORA 0.1 MG PATCH	2	PA HRM,QL 8/28
ALTAVERA-28 TABLET	1	
ALYACEN 1-35-28 TABLET	1	
ALYACEN 7-7-7-28 TABLET	1	
AMABELZ 0.5 MG-0.1 MG TABLET	1	PA HRM

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Drug Name	Drug Tier	Requirements / Limits
AMABELZ 1 MG-0.5 MG TABLET	1	PA HRM
AMETHIA 0.15-0.03-0.01 MG TAB	1	QL 91/91
AMETHIA LO TABLET	1	QL 91/91
AMETHYST 90-20 MCG TABLET	1	
ANGELIQ 0.25 MG-0.5 MG TABLET	3	
ANGELIQ 0.5 MG-1 MG TABLET	3	
APRI 28 DAY TABLET	1	
ARANELLE 28 TABLET	1	
ASHLYNA 0.15-0.03-0.01 MG TAB	1	QL 91/91
AUBRA-28 TABLET	1	
AVIANE-28 TABLET	1	
AZURETTE 28 DAY TABLET	1	
BALZIVA 28 TABLET	1	
BEKYREE 28 DAY TABLET	1	
BLISOVI 24 FE TABLET	1	
BLISOVI FE 1.5-30 TABLET	1	
BLISOVI FE 1-20 TABLET	1	
BRIELLYN TABLET	1	
CAMRESE 0.15-0.03-0.01 MG TAB	1	QL 91/91
CAMRESE LO TABLET	1	QL 91/91
CAZIANT 28 DAY TABLET	1	
CESIA 28 DAY TABLET	1	
CHATEAL-28 TABLET	1	
CLIMARA PRO PATCH	3	PA HRM,QL 4/28
COMBIPATCH 0.05-0.14 MG PTCH	3	PA HRM
COMBIPATCH 0.05-0.25 MG PTCH	3	PA HRM
CRYSELLE-28 TABLET	1	
CYCLAFEM 1-35-28 TABLET	1	
CYCLAFEM 7-7-7-28 TABLET	1	
CYRED 28 DAY TABLET	1	
DASETTA 1-35-28 TABLET	1	
DASETTA 7/7-7-28 TABLET	1	

Drug Name	Drug Tier	Requirements / Limits
DAYSEE 0.15-0.03-0.01 MG TAB	1	QL 91/91
DELESTROGEN 10 MG/ML VIAL	3	
DELYLA-28 TABLET	1	
DEPO-ESTRADIOL 5 MG/ML VIAL	3	
<i>desogestrel-ethinyl estrad tab</i>	1	
<i>desogestr-eth estrad eth estra</i>	1	
DIVIGEL 0.25 MG GEL PACKET	3	
DIVIGEL 0.5 MG GEL PACKET	3	
DIVIGEL 1 MG GEL PACKET	3	
<i>drosp-ee-levomef 3-0.02-0.451</i>	1	
<i>drospirenone-ee 3-0.02 mg tab</i>	1	
<i>drospirenone-ee 3-0.03 mg tab</i>	1	
ELINEST-28 TABLET	1	
EMOQUETTE 28 DAY TABLET	1	
ENPRESSE-28 TABLET	1	
ENSKYCE 28 TABLET	1	
ESTARYLLA 0.25-0.035 MG TABLET	1	
ESTRACE 0.01% CREAM	3	
<b>estradiol 0.025 mg patch</b>	1	PA HRM,QL 8/28
<b>estradiol 0.0375 mg patch</b>	1	PA HRM,QL 8/28
<b>estradiol 0.05 mg patch</b>	1	PA HRM,QL 8/28
<b>estradiol 0.075 mg patch</b>	1	PA HRM,QL 8/28
<b>estradiol 0.1 mg patch</b>	1	PA HRM,QL 8/28
<b>estradiol 0.5 mg tablet</b>	1	PA HRM
<b>estradiol 1 mg tablet</b>	1	PA HRM
<b>estradiol 2 mg tablet</b>	1	PA HRM
<b>estradiol tds 0.025 mg/day</b>	1	PA HRM,QL 4/28

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Drug Name	Drug Tier	Requirements / Limits
<b>estradiol tds 0.0375 mg/day</b>	1	PA HRM,QL 4/28
<b>estradiol tds 0.05 mg/day</b>	1	PA HRM,QL 4/28
<b>estradiol tds 0.06 mg/day</b>	1	PA HRM,QL 4/28
<b>estradiol tds 0.075 mg/day</b>	1	PA HRM,QL 4/28
<b>estradiol tds 0.1 mg/day</b>	1	PA HRM,QL 4/28
<b>estradiol valerate 10 mg/ml vl</b>	1	
<b>estradiol valerate 20 mg/ml vl</b>	1	
<b>estradiol valerate 40 mg/ml vl</b>	1	
<b>estradiol-noreth 0.5-0.1 mg tb</b>	1	PA HRM
<b>estradiol-noreth 1-0.5 mg tab</b>	1	PA HRM
ESTRING 2 MG VAGINAL RING	2	QL 1/90
ESTROGEL 0.06% GEL	3	
<b>estropipate 0.625(0.75 mg) tab</b>	1	
<b>estropipate 1.25(1.5 mg) tab</b>	1	
<b>estropipate 2.5(3 mg) tab</b>	1	
<b>ethynodiol-eth estra 1mg-50mcg</b>	1	
FALMINA-28 TABLET	1	
FEMRING 0.05 MG VAGINAL RING	2	QL 1/90
FEMRING 0.10 MG VAGINAL RING	2	QL 1/90
FEMYNOR 28 TABLET	1	
FYAVOLV 0.5 MG-2.5 MCG TABLET	1	PA HRM
FYAVOLV 1 MG-5 MCG TABLET	1	PA HRM
GIANVI 3 MG-0.02 MG TABLET	1	
GILDAGIA 0.4 MG-0.035 MG TAB	1	
GILDESS 1 MG-20 MCG TABLET	1	
GILDESS 1.5 MG-30 MCG TABLET	1	
GILDESS FE 1.5-30 TABLET	1	

Drug Name	Drug Tier	Requirements / Limits
GILDESS FE 1-20 TABLET	1	
INTROVALE 0.15-0.03 MG TABLET	1	QL 91/91
JEVANTIQUE LO 0.5 MG-2.5 MCG	1	PA HRM
JINTELI 1 MG-5 MCG TABLET	1	PA HRM
JOLESSA 0.15 MG-0.03 MG TABLET	1	QL 91/91
JULEBER 28 DAY TABLET	1	
JUNEL 1 MG-20 MCG TABLET	1	
JUNEL 1.5 MG-30 MCG TABLET	1	
JUNEL FE 1 MG-20 MCG TABLET	1	
JUNEL FE 1.5 MG-30 MCG TABLET	1	
JUNEL FE 24 TABLET	1	
KAITLIB FE CHEWABLE TABLET	1	
KARIVA 28 DAY TABLET	1	
KELNOR 1-35 28 TABLET	1	
KIMIDESS 28 DAY TABLET	1	
KURVELO TABLET	1	
LARIN 1.5 MG-30 MCG TABLET	1	
LARIN 21 1-20 TABLET	1	
LARIN 24 FE 1 MG-20 MCG TABLET	1	
LARIN FE 1.5-30 TABLET	1	
LARIN FE 1-20 TABLET	1	
LARISSIA-28 TABLET	1	
LAYOLIS FE CHEWABLE TABLET	1	
LEENA 28 TABLET	1	
LESSINA-28 TABLET	1	
LEVONEST-28 TABLET	1	
<b>levono-e estrad 0.10-0.02-0.01 91d</b>	1	QL 91/91
<b>levono-e estrad 0.15-0.03-0.01 91d</b>	1	QL 91/91
<b>levonor-eth estra 0.09-0.02 mg</b>	1	
<b>levonor-eth estrad 0.1-0.02 mg</b>	1	
<b>levonor-eth estrad 0.15-0.03</b>	1	

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Drug Name	Drug Tier	Requirements / Limits
<b>levonor-eth estrad 0.15-0.03 91d</b>	1	QL 91/91
<b>levonor-eth estrad triphasic</b>	1	
LEVORA-28 TABLET	1	
LOMEDIA 24 FE 1 MG-20 MCG TAB	1	
LOPREEZA 0.5 MG-0.1 MG TABLET	1	PA HRM
LOPREEZA 1 MG-0.5 MG TABLET	1	PA HRM
LORYNA 3 MG-0.02 MG TABLET	1	
LOW-OGESTREL-28 TABLET	1	
LUTERA-28 TABLET	1	
MARLISSA-28 TABLET	1	
MENEST 0.3 MG TABLET	2	PA HRM
MENEST 0.625 MG TABLET	2	PA HRM
MENEST 1.25 MG TABLET	2	PA HRM
MENEST 2.5 MG TABLET	2	PA HRM
MENOSTAR 14 MCG/DAY PATCH	2	PA HRM,QL 4/28
MICROGESTIN 21 1.5-30 TAB	1	
MICROGESTIN 21 1-20	1	
MICROGESTIN 24 FE 1 MG-20 MCG	1	
MICROGESTIN FE 1.5-30 TAB	1	
MICROGESTIN FE 1-20 TABLET	1	
MIMVEY 1-0.5 MG TABLET	1	PA HRM
MIMVEY LO 0.5-0.1 MG TABLET	1	PA HRM
MINIVELLE 0.025 MG PATCH	2	PA HRM,QL 8/28
MINIVELLE 0.0375 MG PATCH	2	PA HRM,QL 8/28
MINIVELLE 0.05 MG PATCH	2	PA HRM,QL 8/28
MINIVELLE 0.075 MG PATCH	2	PA HRM,QL 8/28

Drug Name	Drug Tier	Requirements / Limits
MINIVELLE 0.1 MG PATCH	2	PA HRM,QL 8/28
MONO-LINYAH 28 TABLET	1	
MONONESSA 28 TABLET	1	
MYZILRA-28 TABLET	1	
NECON 0.5-35-28 TABLET	1	
NECON 10-11-28 TABLET	1	
NECON 1-35-28 TABLET	1	
NECON 1-50-28 TABLET	1	
NECON 7-7-7-28 TABLET	1	
NIKKI 3 MG-0.02 MG TABLET	1	
<b>noret-estr-fe 0.4-0.035(21)-75</b>	1	
<b>noreth-estradiol-1-0.02(21)-75</b>	1	
<b>noreth-estradiol-1-0.02(24)-75</b>	1	
<b>norethindroestrol 0.5-2.5</b>	1	PA HRM
<b>norethindroestrol 1-0.02 mg</b>	1	
<b>norethynodrel 0.8-0.025 mg</b>	1	
<b>norethynodrel 1 mg-5 mcg</b>	1	PA HRM
<b>norg-ee 0.18-0.215-0.25/0.025</b>	1	
<b>norg-ee 0.18-0.215-0.25/0.035</b>	1	
<b>norg-ethinodrel 0.25-0.035 mg</b>	1	
NORTREL 0.5-35-28 TABLET	1	
NORTREL 1-35 21 TABLET	1	
NORTREL 1-35 28 TABLET	1	
NORTREL 7-7-7-28 TABLET	1	
NUVARING VAGINAL RING	3	
OCELLA 3 MG-0.03 MG TABLET	1	
OGESTREL TABLET	1	
ORSYTHIA-28 TABLET	1	
PHILITH 0.4-0.035 MG TABLET	1	
PIMTREA 28 DAY TABLET	1	
PIRMELLA 1-35-28 TABLET	1	
PIRMELLA 7-7-7-28 TABLET	1	
PORTIA-28 TABLET	1	
PREFEST TABLET	3	PA HRM
PREMARIN 0.3 MG TABLET	3	PA HRM,QL 30/30

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Drug Name	Drug Tier	Requirements / Limits
PREMARIN 0.45 MG TABLET	3	PA HRM,QL 30/30
PREMARIN 0.625 MG TABLET	3	PA HRM,QL 30/30
PREMARIN 0.9 MG TABLET	3	PA HRM,QL 30/30
PREMARIN 1.25 MG TABLET	3	PA HRM,QL 30/30
PREMARIN 25 MG VIAL	3	
PREMARIN VAGINAL CREAM-APPL	2	
PREMPHASE 0.625-5 MG TABLET	3	
PREMPRO 0.3 MG-1.5 MG TABLET	3	PA HRM
PREMPRO 0.45-1.5 MG TABLET	3	PA HRM
PREMPRO 0.625-2.5 MG TABLET	3	PA HRM
PREMPRO 0.625-5 MG TABLET	3	PA HRM
PREVIFEM TABLET	1	
QUASENSE 0.15-0.03 MG TABLET	1	QL 91/91
RECLIPSEN 28 DAY TABLET	1	
SETLAKIN 0.15 MG-0.03 MG	1	QL 91/91
SOLIA 0.15-0.03 MG TABLET	1	
SPRINTEC 28 DAY TABLET	1	
SRONYX 0.10-0.02 MG TABLET	1	
SYEDA 28 TABLET	1	
TARINA FE 1-20 TABLET	1	
TILIA FE 28 TABLET	1	
TRI-ESTARYLLA TABLET	1	
TRI-LEGEST FE-28 DAY TABLET	1	
TRI-LINYAH TABLET	1	
TRI-LO-ESTARYLLA TABLET	1	
TRI-LO-MARZIA TABLET	1	
TRINESSA LO TABLET	1	

Drug Name	Drug Tier	Requirements / Limits
TRINESSA TABLET	1	
TRI-PREVIFEM TABLET	1	
TRI-SPRINTEC TABLET	1	
TRIVORA-28 TABLET	1	
VELIVET 28 DAY TABLET	1	
VESTURA 3 MG-0.02 MG TABLET	1	
VIENVA-28 TABLET	1	
VIORELE 28 DAY TABLET	1	
VYFEMLA 28 TABLET	1	
WERA 0.5/0.035 MG 28 TABLET	1	
WYMZYA FE CHEWABLE TABLET	1	
XULANE PATCH	1	
YUVAFEM 10 MCG VAGINAL INSERT	1	QL 18/28
ZARAH TABLET	1	
ZENCHENT 0.4 MG-35 MCG TABLET	1	
ZENCHENT FE TABLET CHEWABLE	1	
ZEOSA CHEWABLE TABLET	1	
ZOVIA 1-35E TABLET	1	
ZOVIA 1-50E TABLET	1	
<b>Fibromyalgia Agents</b>		
SAVELLA 100 MG TABLET	2	QL 60/30
SAVELLA 12.5 MG TABLET	2	QL 60/30
SAVELLA 25 MG TABLET	2	QL 60/30
SAVELLA 50 MG TABLET	2	QL 60/30
SAVELLA TITRATION PACK	2	QL 55/30
<b>GABA Receptor Modulators</b>		
<b><i>eszopiclone 1 mg tablet</i></b>	<b>1</b>	<b>PA HRM</b>
<b><i>eszopiclone 2 mg tablet</i></b>	<b>1</b>	<b>PA HRM</b>
<b><i>eszopiclone 3 mg tablet</i></b>	<b>1</b>	<b>PA HRM</b>
<b><i>temazepam 15 mg capsule</i></b>	<b>1</b>	
<b><i>temazepam 22.5 mg capsule</i></b>	<b>1</b>	
<b><i>temazepam 30 mg capsule</i></b>	<b>1</b>	
<b><i>temazepam 7.5 mg capsule</i></b>	<b>1</b>	
<b><i>zaleplon 10 mg capsule</i></b>	<b>1</b>	
<b><i>zaleplon 5 mg capsule</i></b>	<b>1</b>	
<b><i>zolpidem tart er 12.5 mg tab</i></b>	<b>1</b>	

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Drug Name	Drug Tier	Requirements / Limits
<b>zolpidem tart er 6.25 mg tab</b>	1	
<b>zolpidem tartrate 10 mg tablet</b>	1	
<b>zolpidem tartrate 5 mg tablet</b>	1	
<b>Gamma-aminobutyric Acid (GABA) Augmenting Agents</b>		
<b>clonazepam 0.125 mg dis tab</b>	1	QL 150/30
<b>clonazepam 0.25 mg odt</b>	1	QL 150/30
<b>clonazepam 0.5 mg dis tablet</b>	1	QL 150/30
<b>clonazepam 0.5 mg tablet</b>	1	QL 150/30
<b>clonazepam 1 mg dis tablet</b>	1	QL 150/30
<b>clonazepam 1 mg tablet</b>	1	QL 150/30
<b>clonazepam 2 mg odt</b>	1	QL 300/30
<b>clonazepam 2 mg tablet</b>	1	QL 300/30
<b>DIASTAT 2.5 MG PEDI</b>	2	QL 5/30
<b>DIASTAT ACUDIAL 12.5-15-20 MG</b>	2	QL 40/30
<b>DIASTAT ACUDIAL 5-7.5-10 MG KT</b>	2	QL 20/30
<b>diazepam 10 mg rectal gel syst</b>	1	QL 20/30
<b>diazepam 2.5 mg rectal gel sys</b>	1	QL 5/30
<b>diazepam 20 mg rectal gel syst</b>	1	QL 40/30
<b>divalproex dr 125 mg cap sprnk</b>	1	
<b>divalproex sod dr 125 mg tab</b>	1	
<b>divalproex sod dr 250 mg tab</b>	1	
<b>divalproex sod dr 500 mg tab</b>	1	
<b>divalproex sod er 250 mg tab</b>	1	
<b>divalproex sod er 500 mg tab</b>	1	
<b>gabapentin 100 mg capsule</b>	1	QL 180/30
<b>gabapentin 250 mg/5 ml soln</b>	1	QL 2160/30
<b>gabapentin 300 mg capsule</b>	1	QL 270/30
<b>gabapentin 400 mg capsule</b>	1	QL 270/30
<b>gabapentin 600 mg tablet</b>	1	QL 180/30
<b>gabapentin 800 mg tablet</b>	1	QL 90/30
<b>GABITRIL 12 MG TABLET</b>	3	QL 120/30
<b>GABITRIL 16 MG TABLET</b>	3	QL 90/30
<b>ONFI 10 MG TABLET</b>	2	QL 30/30
<b>ONFI 2.5 MG/ML SUSPENSION</b>	4	QL 480/30
<b>ONFI 20 MG TABLET</b>	4	QL 60/30
<b>phenobarbital 100 mg tablet</b>	1	QL 90/30
<b>phenobarbital 15 mg tablet</b>	1	QL 90/30

Drug Name	Drug Tier	Requirements / Limits
<b>phenobarbital 16.2 mg tablet</b>	1	QL 90/30
<b>phenobarbital 20 mg/5 ml elix</b>	1	QL 1500/30
<b>phenobarbital 30 mg tablet</b>	1	QL 90/30
<b>phenobarbital 32.4 mg tablet</b>	1	QL 90/30
<b>phenobarbital 60 mg tablet</b>	1	QL 90/30
<b>phenobarbital 64.8 mg tablet</b>	1	QL 90/30
<b>phenobarbital 97.2 mg tablet</b>	1	QL 90/30
<b>primidone 250 mg tablet</b>	1	
<b>primidone 50 mg tablet</b>	1	
SABRIL 500 MG POWDER PACKET	4	QL 200/30
SABRIL 500 MG TABLET	4	QL 180/30
<b>tiagabine hcl 2 mg tablet</b>	1	QL 240/30
<b>tiagabine hcl 4 mg tablet</b>	1	
<b>valproate sod 500 mg/5 ml vl</b>	1	
<b>valproic acid 250 mg capsule</b>	1	
<b>valproic acid 250 mg/5 ml soln</b>	1	
<b>Gastrointestinal Agents, Other</b>		
<b>chenodal 250 mg tablet</b>	4	
<b>cromolyn 100 mg/5 ml oral conc</b>	1	
<b>diphenoxylat-atrop 2.5-0.025/5</b>	1	
<b>diphenoxylate-atrop 2.5-0.025</b>	1	
GATTEX 5 MG 30-VIAL KIT	4	PA,QL 30/30
<b>lansoprazol-amoxicil-clarithro</b>	1	
<b>loperamide 2 mg capsule</b>	1	
<b>metoclopramide 10 mg tablet</b>	1	
<b>metoclopramide 10 mg/2 ml vial</b>	1	
<b>metoclopramide 5 mg tablet</b>	1	
<b>metoclopramide 5 mg/5 ml soln</b>	1	
OSMOPREP TABLET	3	
<b>paregoric liquid</b>	2	
RELISTOR 12 MG/0.6 ML SYRINGE	4	QL 18/30
RELISTOR 12 MG/0.6 ML VIAL	4	QL 18/30
RELISTOR 8 MG/0.4 ML SYRINGE	4	QL 12/30
<b>ursodiol 250 mg tablet</b>	1	
<b>ursodiol 300 mg capsule</b>	1	
<b>ursodiol 500 mg tablet</b>	1	

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Drug Name	Drug Tier	Requirements / Limits
<b>Genetic or Enzyme Disorder: Replacement, Modifiers, Treatment</b>		
ADAGEN 250 UNITS/ML VIAL	4	PA
ALDURAZYME 2.9 MG/5 ML VIAL	4	PA
BUPHENYL 500 MG TABLET	4	PA
CEREZYME 400 UNITS VIAL	4	PA,B/D
CREON DR 12,000 UNITS CAPSULE	2	
CREON DR 24,000 UNITS CAPSULE	2	
CREON DR 3,000 UNITS CAPSULE	2	
CREON DR 36,000 UNITS CAPSULE	2	
CREON DR 6,000 UNITS CAPSULE	2	
CYSTADANE 1 GRAM/1.7 ML POWDER	4	
CYSTAGON 150 MG CAPSULE	2	
CYSTAGON 50 MG CAPSULE	2	
ELAPRASE 6 MG/3 ML VIAL	4	PA
ELELYSO 200 UNITS VIAL	4	
FABRAZYME 35 MG VIAL	4	PA,B/D
FABRAZYME 5 MG VIAL	4	PA,B/D
KUVAN 100 MG POWDER PACKET	4	PA
KUVAN 100 MG TABLET	4	PA
KUVAN 500 MG POWDER PACKET	4	PA
LUMIZYME 50 MG VIAL	4	PA,B/D
NAGLAZYME 5 MG/5 ML VIAL	4	PA
ORFADIN 10 MG CAPSULE	4	
ORFADIN 2 MG CAPSULE	4	
ORFADIN 20 MG CAPSULE	4	
ORFADIN 4 MG/ML SUSPENSION	4	
ORFADIN 5 MG CAPSULE	4	
RAVICTI 1.1 GRAM/ML LIQUID	4	
<b>sodium phenylbutyrate powder</b>	4	PA

Drug Name	Drug Tier	Requirements / Limits
SUCRAID 8,500 UNITS/ML SOLN	4	
VPRIV 400 UNITS VIAL	4	PA,B/D
XIAFLEX 0.9 MG VIAL	4	PA,B/D
ZAVESCA 100 MG CAPSULE	4	QL 90/30
ZENPEP DR 10,000 UNITS CAPSULE	2	
ZENPEP DR 15,000 UNITS CAPSULE	2	
ZENPEP DR 20,000 UNITS CAPSULE	2	
ZENPEP DR 25,000 UNITS CAPSULE	2	
ZENPEP DR 3,000 UNITS CAPSULE	2	
ZENPEP DR 40,000 UNITS CAPSULE	2	
ZENPEP DR 5,000 UNITS CAPSULE	2	
<b>Genitourinary Agents, Other</b>		
<i>acetic acid 0.25% irrig soln</i>	1	
<i>bethanechol 10 mg tablet</i>	1	
<i>bethanechol 25 mg tablet</i>	1	
<i>bethanechol 5 mg tablet</i>	1	
<i>bethanechol 50 mg tablet</i>	1	
ELMIRON 100 MG CAPSULE	3	
LITHOSTAT 250 MG TABLET	2	
<i>phenazopyridine 100 mg tab</i>	1	
<i>phenazopyridine 200 mg tab</i>	1	
<b>Glucocorticoids</b>		
<i>budesonide ec 3 mg capsule</i>	1	
COLOCORT 100 MG ENEMA	1	
<i>hydrocortisone 100 mg/60 ml</i>	1	
<b>Glutamate Reducing Agents</b>		
<i>felbamate 400 mg tablet</i>	1	
<i>felbamate 600 mg tablet</i>	1	
<i>felbamate 600 mg/5 ml susp</i>	4	
<i>lamotrigine 100 mg tablet</i>	1	
<i>lamotrigine 150 mg tablet</i>	1	
<i>lamotrigine 200 mg tablet</i>	1	
<i>lamotrigine 25 mg disper tab</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>lamotrigine 25 mg tablet</i>	1	
<i>lamotrigine 5 mg disper tablet</i>	1	
<i>lamotrigine er 100 mg tablet</i>	1	
<i>lamotrigine er 200 mg tablet</i>	1	
<i>lamotrigine er 25 mg tablet</i>	1	
<i>lamotrigine er 250 mg tablet</i>	1	
<i>lamotrigine er 300 mg tablet</i>	1	
<i>lamotrigine er 50 mg tablet</i>	1	
<i>lamotrigine odt 100 mg tablet</i>	1	
<i>lamotrigine odt 200 mg tablet</i>	1	
<i>lamotrigine odt 25 mg tablet</i>	1	
<i>lamotrigine odt 50 mg tablet</i>	1	
<i>lamotrigine odt kit (blue)</i>	1	
<i>lamotrigine odt kit (green)</i>	1	
<i>lamotrigine odt kit (orange)</i>	1	
<i>topiramate 100 mg tablet</i>	1	QL 90/30
<i>topiramate 15 mg sprinkle cap</i>	1	
<i>topiramate 200 mg tablet</i>	1	QL 60/30
<i>topiramate 25 mg sprinkle cap</i>	1	
<i>topiramate 25 mg tablet</i>	1	QL 90/30
<i>topiramate 50 mg tablet</i>	1	QL 90/30
<b>Glycemic Agents</b>		
<i>GLUCAGEN 1 MG HYPOKIT</i>	2	QL 4/30
<i>GLUCAGON 1 MG EMERGENCY KIT</i>	2	QL 4/30
<i>PROGLYCEM 50 MG/ML ORAL SUSP</i>	3	
<b>Hemostasis Agents</b>		
<i>aminocaproic acid 5 g/20 ml vl</i>	1	
<i>tranexamic acid 1,000 mg/10 ml</i>	1	PA
<i>tranexamic acid 650 mg tablet</i>	1	QL 30/28
<b>Histamine2 (H2) Receptor Antagonists</b>		
<i>cimetidine 200 mg tablet</i>	1	
<i>cimetidine 300 mg tablet</i>	1	
<i>cimetidine 300 mg/5 ml soln</i>	1	
<i>cimetidine 400 mg tablet</i>	1	
<i>cimetidine 800 mg tablet</i>	1	
<i>famotidine 20 mg piggyback</i>	1	
<i>famotidine 20 mg tablet</i>	1	
<i>famotidine 20 mg/2 ml vial</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>famotidine 200 mg/20 ml vial</i>	1	
<i>famotidine 40 mg tablet</i>	1	
<i>famotidine 40 mg/4 ml vial</i>	1	
<i>famotidine 40 mg/5 ml susp</i>	1	
<i>famotidine 500 mg/50 ml vial</i>	1	
<i>nizatidine 150 mg capsule</i>	1	
<i>nizatidine 300 mg capsule</i>	1	
<i>ranitidine 15 mg/ml syrup</i>	1	
<i>ranitidine 150 mg capsule</i>	1	
<i>ranitidine 150 mg tablet</i>	1	
<i>ranitidine 300 mg capsule</i>	1	
<i>ranitidine 300 mg tablet</i>	1	
<i>ranitidine hcl 150 mg/6 ml vl</i>	1	
<i>ranitidine hcl 50 mg/2 ml vial</i>	1	
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)</b>		
<i>A-HYDROCORT 100 MG VIAL</i>	1	
<i>ALA-CORT 1% CREAM</i>	1	
<i>alclometasone diph 0.05% oint</i>	1	
<i>alclometasone dipro 0.05% crm</i>	1	
<i>A-METHAPRED 40 MG UNIVIAL</i>	1	
<i>APEXICON E 0.05% CREAM</i>	1	
<i>betamethasone ac-sp 6 mg/ml vl</i>	1	
<i>betamethasone dp 0.05% crm</i>	1	
<i>betamethasone dp 0.05% lot</i>	1	
<i>betamethasone dp 0.05% oint</i>	1	
<i>betamethasone dp aug 0.05% crm</i>	1	
<i>betamethasone dp aug 0.05% gel</i>	1	
<i>betamethasone dp aug 0.05% lot</i>	1	
<i>betamethasone dp aug 0.05% oint</i>	1	
<i>betamethasone va 0.1% cream</i>	1	
<i>betamethasone va 0.1% lotion</i>	1	
<i>betamethasone valer 0.1% ointm</i>	1	
<i>betamethasone valer 0.12% foam</i>	1	
<i>clobetasol 0.05% cream</i>	1	
<i>clobetasol 0.05% gel</i>	1	
<i>clobetasol 0.05% ointment</i>	1	
<i>clobetasol 0.05% shampoo</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
clobetasol 0.05% solution	1	
clobetasol 0.05% topical lotion	1	
clobetasol emollient 0.05% cream	1	
clobetasol emollient 0.05% foam	1	
clobetasol emulsion 0.05% foam	1	
clobetasol prop 0.05% foam	1	
clobetasol prop 0.05% spray	1	
clocortolone 0.1% cream pump	1	
clocortolone pivalate 0.1% cream	1	
CLODAN 0.05% SHAMPOO	1	
CORMAX 0.05% SOLUTION	1	
cortisone 25 mg tablet	1	
DEPO-MEDROL 20 MG/ML VIAL	3	
desonide 0.05% cream	1	
desonide 0.05% lotion	1	
desonide 0.05% ointment	1	
desoximetasone 0.05% cream	1	
desoximetasone 0.05% gel	1	
desoximetasone 0.05% ointment	1	
desoximetasone 0.25% cream	1	
desoximetasone 0.25% ointment	1	
dexamethasone 0.5 mg tablet	1	
dexamethasone 0.5 mg/5 ml elix	1	
dexamethasone 0.5 mg/5 ml liq	1	
dexamethasone 0.75 mg tablet	1	
dexamethasone 1 mg tablet	1	
dexamethasone 1.5 mg tablet	1	
dexamethasone 10 mg/ml vial	1	
dexamethasone 100 mg/10 ml vial	1	
dexamethasone 120 mg/30 ml vial	1	
dexamethasone 2 mg tablet	1	
dexamethasone 20 mg/5 ml vial	1	
dexamethasone 4 mg tablet	1	
dexamethasone 4 mg/ml vial	1	
dexamethasone 6 mg tablet	1	
DEXAMETHASONE INTENSOL 1MG/1ML	1	
fludrocortisone 0.1 mg tablet	1	
fluocinolone 0.01% body oil	1	

Drug Name	Drug Tier	Requirements / Limits
fluocinolone 0.01% cream	1	
fluocinolone 0.01% scalp oil	1	
fluocinolone 0.01% solution	1	
fluocinolone 0.025% cream	1	
fluocinolone 0.025% ointment	1	
fluocinonide 0.05% cream	1	
fluocinonide 0.05% gel	1	
fluocinonide 0.05% ointment	1	
fluocinonide 0.05% solution	1	
fluocinonide 0.1% cream	1	
fluocinonide-e 0.05% cream	1	
flurandrenolide 0.05% cream	1	
flurandrenolide 0.05% lotion	1	
fluticasone prop 0.005% oint	1	
fluticasone prop 0.05% cream	1	
fluticasone prop 0.05% lotion	1	
halobetasol prop 0.05% cream	1	
halobetasol prop 0.05% ointmnt	1	
hydrocort buty 0.1% lipid cream	1	
hydrocort buty 0.1% lipo cream	1	
hydrocortisone 1% absorbbase	1	
hydrocortisone 1% cream	1	
hydrocortisone 1% ointment	1	
hydrocortisone 10 mg tablet	1	
hydrocortisone 2.5% cream	1	
hydrocortisone 2.5% lotion	1	
hydrocortisone 2.5% ointment	1	
hydrocortisone 20 mg tablet	1	
hydrocortisone 5 mg tablet	1	
hydrocortisone buty 0.1% cream	1	
hydrocortisone butyr 0.1% oint	1	
hydrocortisone butyr 0.1% soln	1	
hydrocortisone val 0.2% cream	1	
hydrocortisone val 0.2% ointmt	1	
KENALOG-10 10 MG/ML VIAL	3	
KENALOG-40 40 MG/ML VIAL	3	
lidocaine-hc 2-2% cream kit	1	
lidocaine-hc 3-0.5% cream kit	1	
lidocaine-hc 3-1% cream kit	1	
lidocaine-hc 3-2.5% gel kit	1	+

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Drug Name	Drug Tier	Requirements / Limits
<b><i>lidocaine-hydrocort 3-2.5% gel</i></b>	1	+
LOKARA 0.05% LOTION	1	
MEDROL 2 MG TABLET	2	
<b><i>methylprednisolone 16 mg tab</i></b>	1	
<b><i>methylprednisolone 32 mg tab</i></b>	1	
<b><i>methylprednisolone 4 mg dosepk</i></b>	1	
<b><i>methylprednisolone 4 mg tablet</i></b>	1	
<b><i>methylprednisolone 40 mg/ml vl</i></b>	1	
<b><i>methylprednisolone 8 mg tab</i></b>	1	
<b><i>methylprednisolone 80 mg/ml vl</i></b>	1	
<b><i>methylprednisolone ss 125 mg</i></b>	1	
<b><i>methylprednisolone ss 40 mg vl</i></b>	1	
<b><i>mometasone furoate 0.1% cream</i></b>	1	
<b><i>mometasone furoate 0.1% oint</i></b>	1	
<b><i>mometasone furoate 0.1% soln</i></b>	1	
PANDEL 0.1% CREAM	3	
<b><i>prednicarbate 0.1% cream</i></b>	1	
<b><i>prednicarbate 0.1% ointment</i></b>	1	
<b><i>prednisolone 15 mg/5 ml soln</i></b>	1	
<b><i>prednisolone 5 mg/5 ml soln</i></b>	1	
<b><i>prednisolone odt 10 mg tablet</i></b>	1	
<b><i>prednisolone odt 15 mg tablet</i></b>	1	
<b><i>prednisolone odt 30 mg tablet</i></b>	1	
<b><i>prednisolone sod ph 25 mg/5 ml</i></b>	1	
<b><i>prednisone 1 mg tablet</i></b>	1	
<b><i>prednisone 10 mg tab dose pack</i></b>	1	
<b><i>prednisone 10 mg tablet</i></b>	1	
<b><i>prednisone 2.5 mg tablet</i></b>	1	
<b><i>prednisone 20 mg tablet</i></b>	1	
<b><i>prednisone 5 mg tablet</i></b>	1	
<b><i>prednisone 5 mg/5 ml solution</i></b>	1	
<b><i>prednisone 5 mg/ml solution</i></b>	1	
<b><i>prednisone 50 mg tablet</i></b>	1	
PROCORT 1.85%-1.15% CREAM	2	+
PROCTOCORT 30 MG SUPPOSITORY	2	+
PROCTOFOAM-HC 1%-1% FOAM	2	+
PROCTO-MED HC 2.5% CREAM	1	
PROCTO-PAK 1% CREAM	1	

Drug Name	Drug Tier	Requirements / Limits
PROCTOSOL-HC 2.5% CREAM	1	
PROCTOZONE-HC 2.5% CREAM	1	
SOLU-CORTEF 1,000 MG VIAL	3	
SOLU-CORTEF 100 MG VIAL	3	
SOLU-CORTEF 250 MG VIAL	3	
SOLU-CORTEF 500 MG VIAL	3	
SOLU-MEDROL 2,000 MG VIAL	3	
SOLU-MEDROL 500 MG VIAL	3	
TEXACORT 2.5% SOLUTION	2	
<b><i>triamcinolone 0.025% cream</i></b>	1	
<b><i>triamcinolone 0.025% lotion</i></b>	1	
<b><i>triamcinolone 0.025% oint</i></b>	1	
<b><i>triamcinolone 0.1% cream</i></b>	1	
<b><i>triamcinolone 0.1% lotion</i></b>	1	
<b><i>triamcinolone 0.1% ointment</i></b>	1	
<b><i>triamcinolone 0.147 mg/g spray</i></b>	1	
<b><i>triamcinolone 0.5% cream</i></b>	1	
<b><i>triamcinolone 0.5% ointment</i></b>	1	
TRIANEX 0.05% OINTMENT	4	
TRIDERM 0.1% CREAM	1	
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)</b>		
<b><i>chorionic gonad 10,000 unit vl</i></b>	1	PA,D/E
<b><i>desmopressin 0.01% solution</i></b>	1	QL 15/30
<b><i>desmopressin 0.1 mg/ml sol</i></b>	1	QL 15/30
<b><i>desmopressin 10 mcg/0.1 ml spr</i></b>	1	QL 15/30
<b><i>desmopressin 40 mcg/10 ml vial</i></b>	1	
<b><i>desmopressin acetate 0.1 mg tb</i></b>	1	
<b><i>desmopressin acetate 0.2 mg tb</i></b>	1	
EGRIFTA 1 MG VIAL	4	PA,QL 60/30
EGRIFTA 2 MG VIAL	4	PA,QL 30/30
GENOTROPIN 12 MG CARTRIDGE	4	PA
GENOTROPIN 5 MG CARTRIDGE	4	PA
GENOTROPIN MINIQUICK 0.2 MG	3	PA

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Drug Name	Drug Tier	Requirements / Limits
GENOTROPIN MINIQUICK 0.4 MG	4	PA
GENOTROPIN MINIQUICK 0.6 MG	4	PA
GENOTROPIN MINIQUICK 0.8 MG	4	PA
GENOTROPIN MINIQUICK 1 MG	4	PA
GENOTROPIN MINIQUICK 1.2 MG	4	PA
GENOTROPIN MINIQUICK 1.4 MG	4	PA
GENOTROPIN MINIQUICK 1.6 MG	4	PA
GENOTROPIN MINIQUICK 1.8 MG	4	PA
GENOTROPIN MINIQUICK 2 MG	4	PA
HP ACTHAR GEL 80 UNIT/ML VIAL	4	PA
INCRELEX 40 MG/4 ML VIAL	3	PA
NOVAREL 10,000 UNITS VIAL	2	PA,D/E
PREGNYL 10,000 UNITS VIAL	2	PA,D/E
STIMATE 1.5 MG/ML NASAL SPRAY	2	
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)</b>		
COVARYX H.S. TABLET	2	+
COVARYX TABLET	2	+
EEMT DS 1.25-2.5 MG TABLET	2	+
EEMT HS 0.625-1.25 MG TABLET	2	+
<i>estrogen-methyltestos f.s. tab</i>	1	+
<i>estrogen-methyltestos h.s. tab</i>	1	+
<i>estrogen-methyltestosterone tb</i>	1	+
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)</b>		
ARMOUR THYROID 120 MG TABLET	2	
ARMOUR THYROID 15 MG TABLET	2	

Drug Name	Drug Tier	Requirements / Limits
ARMOUR THYROID 180 MG TABLET	2	
ARMOUR THYROID 240 MG TABLET	2	
ARMOUR THYROID 30 MG TABLET	2	
ARMOUR THYROID 300 MG TABLET	2	
ARMOUR THYROID 60 MG TABLET	2	
ARMOUR THYROID 90 MG TABLET	2	
<i>levothyroxine 100 mcg tablet</i>	1	
<i>levothyroxine 100 mcg vial</i>	1	
<i>levothyroxine 112 mcg tablet</i>	1	
<i>levothyroxine 125 mcg tablet</i>	1	
<i>levothyroxine 137 mcg tablet</i>	1	
<i>levothyroxine 150 mcg tablet</i>	1	
<i>levothyroxine 175 mcg tablet</i>	1	
<i>levothyroxine 200 mcg tablet</i>	1	
<i>levothyroxine 200 mcg vial</i>	1	
<i>levothyroxine 25 mcg tablet</i>	1	
<i>levothyroxine 300 mcg tablet</i>	1	
<i>levothyroxine 50 mcg tablet</i>	1	
<i>levothyroxine 500 mcg vial</i>	1	
<i>levothyroxine 75 mcg tablet</i>	1	
<i>levothyroxine 88 mcg tablet</i>	1	
LEVOXYL 100 MCG TABLET	2	
LEVOXYL 112 MCG TABLET	2	
LEVOXYL 125 MCG TABLET	2	
LEVOXYL 137 MCG TABLET	2	
LEVOXYL 150 MCG TABLET	2	
LEVOXYL 175 MCG TABLET	2	
LEVOXYL 200 MCG TABLET	2	
LEVOXYL 25 MCG TABLET	2	
LEVOXYL 50 MCG TABLET	2	
LEVOXYL 75 MCG TABLET	2	
LEVOXYL 88 MCG TABLET	2	
<i>liothyronine sod 10 mcg/ml v1</i>	1	
<i>liothyronine sod 25 mcg tab</i>	1	
<i>liothyronine sod 5 mcg tab</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<b><i>liothyronine sod 50 mcg tab</i></b>	1	
NP THYROID 120 MG TABLET	1	
NP THYROID 15 MG TABLET	1	
NP THYROID 30 MG TABLET	1	
NP THYROID 60 MG TABLET	1	
NP THYROID 90 MG TABLET	1	
SYNTHROID 100 MCG TABLET	3	
SYNTHROID 112 MCG TABLET	3	
SYNTHROID 125 MCG TABLET	3	
SYNTHROID 137 MCG TABLET	3	
SYNTHROID 150 MCG TABLET	3	
SYNTHROID 175 MCG TABLET	3	
SYNTHROID 200 MCG TABLET	3	
SYNTHROID 25 MCG TABLET	3	
SYNTHROID 300 MCG TABLET	3	
SYNTHROID 50 MCG TABLET	3	
SYNTHROID 75 MCG TABLET	3	
SYNTHROID 88 MCG TABLET	3	
THYROLAR-1 STRENGTH TABLET	2	
THYROLAR-1/2 STRENGTH TAB	2	
THYROLAR-1/4 STRENGTH TAB	2	
THYROLAR-2 STRENGTH TABLET	2	
THYROLAR-3 STRENGTH TABLET	2	
UNITHROID 100 MCG TABLET	2	
UNITHROID 112 MCG TABLET	2	
UNITHROID 125 MCG TABLET	2	
UNITHROID 137 MCG TABLET	2	
UNITHROID 150 MCG TABLET	2	
UNITHROID 175 MCG TABLET	2	

Drug Name	Drug Tier	Requirements / Limits
UNITHROID 200 MCG TABLET	2	
UNITHROID 25 MCG TABLET	2	
UNITHROID 300 MCG TABLET	2	
UNITHROID 50 MCG TABLET	2	
UNITHROID 75 MCG TABLET	2	
UNITHROID 88 MCG TABLET	2	
<b>Hormonal Agents, Suppressant (Adrenal)</b>		
LYSODREN 500 MG TABLET	4	
<b>Hormonal Agents, Suppressant (Pituitary)</b>		
<b><i>cabergoline 0.5 mg tablet</i></b>	1	QL 16/30
ELIGARD 22.5 MG SYRINGE KIT	3	PA,QL 1/90
ELIGARD 30 MG SYRINGE KIT	3	PA,QL 1/120
ELIGARD 45 MG SYRINGE KIT	3	PA,QL 1/180
ELIGARD 7.5 MG SYRINGE KIT	3	PA,QL 1/30
FIRMAGON 2 X 120 MG KIT	4	PA,QL 4/365,B/D
FIRMAGON 80 MG KIT	3	PA,QL 1/28,B/D
<b><i>leuprolide 2wk 14 mg/2.8 ml kt</i></b>	1	PA
LUPRON DEPOT 11.25 MG 3MO KIT	4	PA,QL 1/84
LUPRON DEPOT 22.5 MG 3MO KIT	4	PA,QL 1/84
LUPRON DEPOT 3.75 MG KIT	4	PA,QL 1/30
LUPRON DEPOT 45 MG 6MO KIT	4	PA,QL 1/168
LUPRON DEPOT 7.5 MG KIT	4	PA,QL 1/30
LUPRON DEPOT-4 MONTH KIT	4	PA,QL 1/112
LUPRON DEPOT-PED 11.25 MG 3MO	4	PA,QL 1/84
LUPRON DEPOT-PED 11.25 MG KIT	4	PA,QL 1/30
LUPRON DEPOT-PED 15 MG KIT	4	PA,QL 1/30
LUPRON DEPOT-PED 30 MG 3MO KIT	4	PA,QL 1/84
LUPRON DEPOT-PED 7.5 MG KIT	4	PA,QL 1/30

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Drug Name	Drug Tier	Requirements / Limits
<b>octreotide 1,000 mcg/ml vial</b>	1	PA
<b>octreotide acet 0.05 mg/ml vl</b>	1	PA
<b>octreotide acet 100 mcg/ml vl</b>	1	PA
<b>octreotide acet 200 mcg/ml vl</b>	1	PA
<b>octreotide acet 500 mcg/ml vl</b>	4	PA
SANDOSTATIN LAR DEPOT 10 MG KT	4	
SANDOSTATIN LAR DEPOT 20 MG KT	4	
SANDOSTATIN LAR DEPOT 30 MG KT	4	
SIGNIFOR 0.3 MG/ML AMPULE	4	PA,QL 60/30
SIGNIFOR 0.6 MG/ML AMPULE	4	PA,QL 60/30
SIGNIFOR 0.9 MG/ML AMPULE	4	PA,QL 60/30
SOMATULINE DEPOT 120 MG/0.5 ML	4	PA,QL 0.5/28
SOMATULINE DEPOT 60 MG/0.2 ML	4	PA,QL 0.2/28
SOMATULINE DEPOT 90 MG/0.3 ML	4	PA,QL 0.3/28
SOMAVERT 10 MG VIAL	4	PA,QL 30/30
SOMAVERT 15 MG VIAL	4	PA,QL 30/30
SOMAVERT 20 MG VIAL	4	PA,QL 30/30
SOMAVERT 25 MG VIAL	4	PA,QL 30/30
SOMAVERT 30 MG VIAL	4	PA,QL 30/30
SYNAREL 2 MG/ML NASAL SPRAY	4	PA
TRELSTAR 11.25 MG SYRINGE	4	PA,QL 1/84
TRELSTAR 11.25 MG VIAL	4	PA,QL 1/84
TRELSTAR 22.5 MG SYRINGE	4	PA,QL 1/168
TRELSTAR 3.75 MG SYRINGE	4	PA,QL 1/28
TRELSTAR 3.75 MG VIAL	4	PA,QL 1/28

Drug Name	Drug Tier	Requirements / Limits
<b>Immune Suppressants</b>		
ASTAGRAF XL 0.5 MG CAPSULE	3	PA,B/D
ASTAGRAF XL 1 MG CAPSULE	3	PA,B/D
ASTAGRAF XL 5 MG CAPSULE	4	PA,B/D
AZASAN 100 MG TABLET	2	PA,B/D
AZASAN 75 MG TABLET	2	PA,B/D
<b>azathioprine 50 mg tablet</b>	1	PA,B/D
<b>azathioprine sod 100 mg vial</b>	3	PA,B/D
BENLYSTA 120 MG VIAL	4	PA,QL 30/28,B/D
BENLYSTA 400 MG VIAL	4	PA,QL 9/28,B/D
CELLCEPT 200 MG/ML ORAL SUSP	4	PA,B/D
CELLCEPT 250 MG CAPSULE	3	PA,B/D
CELLCEPT 500 MG TABLET	4	PA,B/D
<b>cyclosporine 100 mg capsule</b>	1	PA,B/D
<b>cyclosporine 100 mg/ml soln</b>	1	PA,B/D
<b>cyclosporine 25 mg capsule</b>	1	PA,B/D
<b>cyclosporine 50 mg/ml ampul</b>	1	PA,B/D
<b>cyclosporine modified 100 mg</b>	1	PA,B/D
<b>cyclosporine modified 25 mg</b>	1	PA,B/D
<b>cyclosporine modified 50 mg</b>	1	PA,B/D
ENBREL 25 MG KIT	4	PA,QL 8/28
ENBREL 25 MG/0.5 ML SYRINGE	4	PA,QL 4.08/28
ENBREL 50 MG/ML SURECLICK SYR	4	PA,QL 8/28
ENBREL 50 MG/ML SYRINGE	4	PA,QL 8/28
ENVARSUS XR 0.75 MG TABLET	3	PA,B/D
ENVARSUS XR 1 MG	3	PA,B/D
ENVARSUS XR 4 MG	4	PA,B/D
GENGRAF 100 MG CAPSULE	1	PA,B/D
GENGRAF 100 MG/ML SOLUTION	1	PA,B/D
GENGRAF 25 MG CAPSULE	1	PA,B/D

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Drug Name	Drug Tier	Requirements / Limits
GENGRAF 50 MG CAPSULE	1	PA,B/D
HECORIA 0.5 MG CAPSULE	1	PA,B/D
HECORIA 1 MG CAPSULE	1	PA,B/D
HECORIA 5 MG CAPSULE	1	PA,B/D
HUMIRA 10 MG/0.2 ML SYRINGE	4	PA,QL 2/28
HUMIRA 20 MG/0.4 ML SYRINGE	4	PA,QL 2/28
HUMIRA 40 MG/0.8 ML PEN	4	PA,QL 4/28
HUMIRA 40 MG/0.8 ML SYRINGE	4	PA,QL 4/28
HUMIRA PEDIATRIC CROHN'S START	4	PA,QL 6/365
HUMIRA PEN CROHN-UC-HS STARTER	4	PA,QL 12/365
HUMIRA PEN PSORIASIS-UVEITIS	4	PA,QL 8/365
KINERET 100 MG/0.67 ML SYRINGE	4	PA,QL 20.1/30
<i>methotrexate 1 gm vial</i>	1	
<i>methotrexate 1 gram/40 ml vial</i>	1	
<i>methotrexate 100 mg/4 ml vial</i>	1	
<i>methotrexate 2.5 mg tablet</i>	1	
<i>methotrexate 200 mg/8 ml vial</i>	1	
<i>methotrexate 250 mg/10 ml vial</i>	1	
<i>methotrexate 50 mg/2 ml vial</i>	1	
<i>mycophenolate 200 mg/ml susp</i>	4	PA,B/D
<i>mycophenolate 250 mg capsule</i>	1	PA,B/D
<i>mycophenolate 500 mg tablet</i>	1	PA,B/D
<i>mycophenolate 500 mg vial</i>	1	PA,B/D
<i>mycophenolic acid dr 180 mg tb</i>	1	PA,B/D
<i>mycophenolic acid dr 360 mg tb</i>	1	PA,B/D
MYFORTIC 180 MG TABLET	3	PA,B/D
MYFORTIC 360 MG TABLET	3	PA,B/D
NEORAL 100 MG GELATIN CAPSULE	3	PA,B/D
NEORAL 100 MG/ML SOLUTION	3	PA,B/D
NEORAL 25 MG GELATIN CAPSULE	3	PA,B/D
NULOJIX 250 MG VIAL	4	PA,QL 150/30,B/D

Drug Name	Drug Tier	Requirements / Limits
ORENCIA 250 MG VIAL	4	PA
PROGRAF 0.5 MG CAPSULE	3	PA,B/D
PROGRAF 1 MG CAPSULE	3	PA,B/D
PROGRAF 5 MG CAPSULE	3	PA,B/D
PROGRAF 5 MG/ML AMPULE	3	PA,B/D
RAPAMUNE 0.5 MG TABLET	3	PA,B/D
RAPAMUNE 1 MG TABLET	4	PA,B/D
RAPAMUNE 1 MG/ML ORAL SOLN	4	PA,B/D
RAPAMUNE 2 MG TABLET	4	PA,B/D
REMICADE 100 MG VIAL	4	PA,B/D
SANDIMMUNE 100 MG/ML SOLN	3	PA,B/D
<i>sirolimus 0.5 mg tablet</i>	1	PA,B/D
<i>sirolimus 1 mg tablet</i>	1	PA,B/D
<i>sirolimus 2 mg tablet</i>	1	PA,B/D
<i>tacrolimus 0.5 mg capsule</i>	1	PA,B/D
<i>tacrolimus 1 mg capsule</i>	1	PA,B/D
<i>tacrolimus 5 mg capsule</i>	1	PA,B/D
TORISEL 25 MG KIT	4	PA,QL 4/28,B/D
TREXALL 10 MG TABLET	3	
TREXALL 15 MG TABLET	3	
TREXALL 5 MG TABLET	3	
TREXALL 7.5 MG TABLET	3	
XATMEP 2.5 MG/ML ORAL SOLUTION	3	PA
ZORTRESS 0.25 MG TABLET	4	PA,QL 60/30,B/D
ZORTRESS 0.5 MG TABLET	4	PA,QL 120/30,B/D
ZORTRESS 0.75 MG TABLET	4	PA,QL 60/30,B/D
<b>Immunizing Agents, Passive</b>		
ATGAM 50 MG/ML AMPUL	3	PA,B/D
BIVIGAM LIQUID 10% VIAL	4	PA,B/D
CARIMUNE NF 12 GM VIAL	4	PA,B/D
CARIMUNE NF 6 GM VIAL	4	PA,B/D
CUVITRU 2 GRAM/10 ML VIAL	4	PA,B/D
CUVITRU 4 GRAM/20 ML VIAL	4	PA,B/D

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Drug Name	Drug Tier	Requirements / Limits
FLEBOGAMMA DIF 10% VIAL	4	PA,B/D
FLEBOGAMMA DIF 5% VIAL	4	PA,B/D
GAMASTAN S-D VIAL	3	PA,B/D
GAMMAGARD LIQUID 10% VIAL 1GM/10ML	3	PA,B/D
GAMMAGARD LIQUID 10% VIAL 2.5 G/25 ML	4	PA,B/D
GAMMAGARD S-D 10 G (IGA<1) SOL	4	PA,B/D
GAMMAGARD S-D 5 G (IGA<1) SOLN	4	PA,B/D
GAMMAKED 1 GM/10 ML VIAL	3	PA,B/D
GAMMAKED 10 GRAM/100 ML VIAL	4	PA,B/D
GAMMAKED 2.5 GRAM/25 ML VIAL	4	PA,B/D
GAMMAKED 20 GRAM/200 ML VIAL	4	PA,B/D
GAMMAKED 5 GRAM/50 ML VIAL	4	PA,B/D
GAMMAPLEX 10 GRAM/200 ML VIAL	4	PA,B/D
GAMMAPLEX 5 GRAM/100 ML VIAL	4	PA,B/D
GAMUNEX-C 1 GM/10 ML VIAL	3	PA,B/D
GAMUNEX-C 10 GRAM/100 ML VIAL	4	PA,B/D
GAMUNEX-C 2.5 GRAM/25 ML VIAL	4	PA,B/D
GAMUNEX-C 20 GRAM/200 ML VIAL	4	PA,B/D
GAMUNEX-C 40 GRAM/400 ML VIAL	4	PA,B/D
GAMUNEX-C 5 GRAM/50 ML VIAL	4	PA,B/D
HIZENTRA 1 GRAM/5 ML VIAL	4	PA,B/D
HIZENTRA 10 GRAM/50 ML VIAL	4	PA,B/D
HIZENTRA 2 GRAM/10 ML VIAL	4	PA,B/D
HIZENTRA 4 GRAM/20 ML VIAL	4	PA,B/D
OCTAGAM 10% VIAL	4	PA,B/D
OCTAGAM 5% VIAL	4	PA,B/D
PRIVIGEN 10% VIAL	4	PA,B/D

Drug Name	Drug Tier	Requirements / Limits
THYMOGLOBULIN 25 MG VIAL	2	PA,B/D
VARIZIG 125 UNIT VIAL	3	QL 12/30
<b>Immunomodulators</b>		
ACTEMRA 162 MG/0.9 ML SYRINGE	4	PA,QL 3.6/28
ACTEMRA 200 MG/10 ML VIAL	4	PA,QL 40/28,B/D
ACTEMRA 400 MG/20 ML VIAL	4	PA,QL 40/28,B/D
ACTEMRA 80 MG/4 ML VIAL	4	PA,QL 40/28,B/D
ACTIMMUNE 100 MCG/0.5 ML VIAL	4	
ARCALYST 220 MG INJECTION	4	PA,B/D
ILARIS 150 MG/ML VIAL	4	PA,QL 2/28,B/D
ILARIS 180 MG VIAL	4	PA,QL 2/28,B/D
<i>leflunomide 10 mg tablet</i>	1	QL 30/30
<i>leflunomide 20 mg tablet</i>	1	QL 30/30
RIDAURA 3 MG CAPSULE	3	
SIMULECT 10 MG VIAL	4	PA,B/D
SIMULECT 20 MG VIAL	4	PA,B/D
SYNAGIS 100 MG/1 ML VIAL	4	PA
SYNAGIS 50 MG/0.5 ML VIAL	4	PA
<b>Insulins</b>		
APIDRA 100 UNITS/ML VIAL	3	QL 40/30,ST
APIDRA SOLOSTAR 100 UNITS/ML	3	QL 40/30,ST
HUMALOG 100 UNITS/ML CARTRIDGE	2	
HUMALOG 100 UNITS/ML KWIKPEN	2	
HUMALOG 100 UNITS/ML VIAL	2	
HUMALOG 200 UNITS/ML KWIKPEN	2	
HUMALOG MIX 50-50 KWIKPEN	2	
HUMALOG MIX 50-50 VIAL	2	

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Drug Name	Drug Tier	Requirements / Limits
HUMALOG MIX 75-25	2	
KWIKPEN		
HUMALOG MIX 75-25 VIAL	2	
HUMULIN 70/30 KWIKPEN	2	
HUMULIN 70-30 VIAL	2	
HUMULIN N 100 UNITS/ML	2	
KWIKPEN		
HUMULIN N 100 UNITS/ML VIAL	2	
HUMULIN R 100 UNITS/ML VIAL	2	
HUMULIN R 500 UNITS/ML	2	
KWIKPEN		
HUMULIN R 500 UNITS/ML VIAL	2	
LANTUS 100 UNIT/ML VIAL	2	
LANTUS SOLOSTAR 100 UNIT/ML	2	
LEVEMIR 100 UNITS/ML VIAL	2	
LEVEMIR FLEXTOUCH 100 UNITS/ML	2	
NOVOLIN 70-30 100 UNIT/ML VIAL	3	ST
NOVOLIN N 100 UNITS/ML VIAL	3	ST
NOVOLIN R 100 UNITS/ML VIAL	3	ST
NOVOLOG 100 UNIT/ML CARTRIDGE	3	ST
NOVOLOG 100 UNIT/ML VIAL	3	ST
NOVOLOG 100 UNITS/ML FLEXPEN	3	ST
NOVOLOG MIX 70-30 FLEXPEN SYRN	3	ST
NOVOLOG MIX 70-30 VIAL	3	ST
RELION NOVOLIN 70-30 VIAL	3	ST
RELION NOVOLIN N 100 UNIT/ML	3	ST
RELION NOVOLIN R 100 UNIT/ML	3	ST
TOUJEO SOLOSTAR 300 UNITS/ML	2	QL 9/30
TRESIBA FLEXTOUCH 100 UNITS/ML	2	
TRESIBA FLEXTOUCH 200 UNITS/ML	2	

Drug Name	Drug Tier	Requirements / Limits
<b>Irritable Bowel Syndrome Agents</b>		
<i>alosetron hcl 0.5 mg tablet</i>	3	PA,QL 60/30
<b>Laxatives</b>		
CONSTULOSE 10 GM/15 ML SOLN	1	
ENULOSE 10 GM/15 ML SOLUTION	1	
GAVILYTE-C SOLUTION	1	
GAVILYTE-G SOLUTION	1	
GAVILYTE-N SOLUTION	1	
GENERLAC 10 GM/15 ML SOLUTION	1	
GOLYTELY PACKET	2	
KRISTALOSE 10 GM PACKET	3	
KRISTALOSE 20 GM PACKET	3	
<i>lactulose 10 gm/15 ml solution</i>	1	
MOVIPREP POWDER PACKET	3	
<i>peg 3350 electrolyte soln</i>	1	
<i>peg 3350-electrolyte solution</i>	1	
<i>peg-3350 and electrolytes soln</i>	1	
<i>polyethylene glycol 3350 powd</i>	1	
SUPREP BOWEL PREP KIT	3	
TRILYTE WITH FLAVOR PACKETS	1	
<b>Local Anesthetics</b>		
GLYDO 2% JELLY SYRINGE	1	
<i>lidocaine 2% viscous soln</i>	1	
<i>lidocaine 5% ointment</i>	1	QL 120/30

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Drug Name	Drug Tier	Requirements / Limits
<i>lidocaine 5% patch</i>	1	QL 90/30
<i>lidocaine hcl 0.5% vial</i>	1	
<i>lidocaine hcl 1% ampul</i>	1	
<i>lidocaine hcl 1% vial</i>	1	
<i>lidocaine hcl 1.5% ampul</i>	1	
<i>lidocaine hcl 2% 40 mg/2 ml vl</i>	1	
<i>lidocaine hcl 2% jelly</i>	1	
<i>lidocaine hcl 2% vial</i>	1	
<i>lidocaine hcl 4% ampul</i>	1	
<i>lidocaine hcl 4% solution</i>	1	
<i>lidocaine-prilocaine cream</i>	1	
<b>Macrolides</b>		
AZASITE 1% EYE DROPS	2	
<i>azithromycin 1 gm pwd packet</i>	1	
<i>azithromycin 100 mg/5 ml susp</i>	1	QL 150/30
<i>azithromycin 200 mg/5 ml susp</i>	1	QL 75/30
<i>azithromycin 250 mg tablet</i>	1	QL 12/28
<i>azithromycin 500 mg tablet</i>	1	QL 12/28
<i>azithromycin 600 mg tablet</i>	1	QL 60/30
<i>azithromycin i.v. 500 mg vial</i>	1	
<i>clarithromycin 125 mg/5 ml sus</i>	1	
<i>clarithromycin 250 mg tablet</i>	1	QL 42/14
<i>clarithromycin 250 mg/5 ml sus</i>	1	
<i>clarithromycin 500 mg tablet</i>	1	QL 42/14
<i>clarithromycin er 500 mg tab</i>	1	QL 60/30
DIFICID 200 MG TABLET	2	PA,QL 20/30
E.E.S. 400 FILMTAB	1	
ERY 2% PADS	1	
ERYPED 400 MG/5 ML SUSPENSION	4	
ERY-TAB EC 250 MG TABLET	2	
ERY-TAB EC 333 MG TABLET	2	
ERY-TAB EC 500 MG TABLET	2	
ERYTHROCIN 250 MG FILMTAB	1	
ERYTHROCIN 500 MG ADDVNT VL	3	
<i>erythromycin 0.5% eye ointment</i>	1	
<i>erythromycin 2% gel</i>	1	
<i>erythromycin 2% pledges</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>erythromycin 2% solution</i>	1	
<i>erythromycin 200 mg/5 ml gran</i>	1	
<i>erythromycin 250 mg filmtab</i>	1	
<i>erythromycin 500 mg filmtab</i>	1	
<i>erythromycin ec 250 mg cap</i>	1	
<i>erythromycin es 400 mg tab</i>	1	
ILOTYCIN 0.5% EYE OINTMENT	1	
KETEK 300 MG TABLET	2	QL 20/30
KETEK 400 MG TABLET	2	QL 20/30
PCE 333 MG TABLET	3	
PCE 500 MG TABLET	3	
ZMAX 2 G/60 ML ORAL SUSPENSION	3	QL 60/30
<b>Mast Cell Stabilizers</b>		
<i>cromolyn 20 mg/2 ml neb soln</i>	1	PA,QL 240/30,B/D
<b>Metabolic Bone Disease Agents</b>		
<i>alendronate sod 70 mg/75 ml</i>	1	
<i>alendronate sodium 10 mg tab</i>	1	QL 30/30
<i>alendronate sodium 35 mg tab</i>	1	QL 4/28
<i>alendronate sodium 40 mg tab</i>	1	QL 30/30
<i>alendronate sodium 5 mg tablet</i>	1	QL 30/30
<i>alendronate sodium 70 mg tab</i>	1	QL 4/28
BINOSTO 70 MG TABLET EFF	3	
<i>calcitonin-salmon 200 units sp</i>	1	QL 3.7/30
<i>calcitriol 0.25 mcg capsule</i>	1	
<i>calcitriol 0.5 mcg capsule</i>	1	
<i>calcitriol 1 mcg/ml ampul</i>	1	
<i>calcitriol 1 mcg/ml solution</i>	1	
<i>doxercalciferol 0.5 mcg cap</i>	1	QL 90/30
<i>doxercalciferol 1 mcg capsule</i>	1	QL 240/30
<i>doxercalciferol 2.5 mcg cap</i>	4	QL 120/30
<i>doxercalciferol 4 mcg/2 ml amp</i>	1	
<i>etidronate disodium 200 mg tab</i>	1	
<i>etidronate disodium 400 mg tab</i>	1	
FORTEO 600 MCG/2.4 ML PEN INJ	4	PA,QL 2.4/28
FOSAMAX PLUS D 70 MG-2,800 IU	3	QL 4/28,ST
FOSAMAX PLUS D 70 MG-5,600 IU	3	QL 4/28,ST

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Drug Name	Drug Tier	Requirements / Limits
<b>ibandronate 3 mg/3 ml vial</b>	1	
<b>ibandronate sodium 150 mg tab</b>	1	QL 1/28
MIACALCIN 400 UNIT/2 ML VIAL	4	
<b>pamidronate 30 mg/10 ml vial</b>	1	PA,B/D
<b>pamidronate 60 mg/10 ml vial</b>	1	PA,B/D
<b>pamidronate 90 mg/10 ml vial</b>	1	PA,B/D
<b>pamidronate disod 30 mg vial</b>	1	PA,B/D
<b>pamidronate disod 90 mg vial</b>	1	PA,B/D
<b>paricalcitol 1 mcg capsule</b>	1	QL 90/30
<b>paricalcitol 10 mcg/2 ml vial</b>	1	PA,B/D
<b>paricalcitol 2 mcg capsule</b>	1	QL 90/30
<b>paricalcitol 2 mcg/ml vial</b>	1	PA,B/D
<b>paricalcitol 4 mcg capsule</b>	1	QL 60/30
PROLIA 60 MG/ML SYRINGE	3	QL 1/180
<b>risedronate sod dr 35 mg tab</b>	1	
<b>risedronate sodium 150 mg tab</b>	1	QL 1/30
<b>risedronate sodium 30 mg tab</b>	1	QL 30/30
<b>risedronate sodium 35 mg tab</b>	1	QL 4/28
<b>risedronate sodium 5 mg tablet</b>	1	QL 30/30
SENSIPAR 30 MG TABLET	2	QL 60/30
SENSIPAR 60 MG TABLET	4	QL 60/30
SENSIPAR 90 MG TABLET	4	QL 120/30
XGEVA 120 MG/1.7 ML VIAL	4	PA,QL 1.7/28
<b>zoledronic acid 4 mg vial</b>	1	PA,QL 3/21,B/D
<b>zoledronic acid 4 mg/100 ml</b>	1	PA,B/D
<b>zoledronic acid 4 mg/5 ml vial</b>	1	PA,QL 15/21,B/D
<b>zoledronic acid 5 mg/100 ml</b>	1	PA,QL 100/365,B/ D

## Miscellaneous Therapeutic Agents

BD ECLIPSE 30GX1/2"	1	QL 200/30
SYRINGE		
BD INSULIN SYR 0.3 ML	1	QL 200/30
8MMX31G		
BD INSULIN SYR 0.5 ML 30GX1/2"	1	QL 200/30
BD INSULIN SYR 1 ML 29GX1/2"	1	QL 200/30
BD INSULIN SYR 1 ML 31GX5/16"	1	QL 200/30

Drug Name	Drug Tier	Requirements / Limits
BD SAFETYGLIDE SYRINGE	1	QL 200/30
27GX5/8		
BD ULTRA-FINE NDL	1	QL 200/30
12.7MMX29G		
BD ULTRA-FINE PEN NDL	1	QL 200/30
4MMX32G		
BD ULTRA-FINE PEN NDL	1	QL 200/30
5MMX31G		
BOTOX 100 UNITS VIAL	3	PA,D/E
BOTOX 200 UNITS VIAL	3	PA,D/E
CARNITOR 1 GM/5 ML VIAL	3	PA,B/D
E-Z DISK 700 MG TABLET	2	+
FERRIPROX 100 MG/ML	4	PA
SOLUTION		
FERRIPROX 500 MG TABLET	4	PA
<b>fomepizole 1.5 gm/1.5 ml vial</b>	4	
INTRALIPID 20% IV FAT EMUL	3	PA,B/D
KORLYM 300 MG TABLET	4	PA,QL 120/30
<i>lactated ringers irrigation</i>	3	
<i>levocarnitine 1 g/10 ml soln</i>	1	
<i>levocarnitine 200 mg/ml vial</i>	1	
<i>levocarnitine 330 mg tablet</i>	1	
LIPOSYN III 10% IV FAT EMULSN	3	PA,B/D
LIPOSYN III 20% IV FAT EMULSN	3	PA,B/D
LIQUID E-Z PAQUE 60% SUSP	2	+
<b>methylergonovine 0.2 mg/ml v</b>	1	
NATPARA 100 MCG DOSE	4	PA,QL 2/28
CARTRIDGE		
NATPARA 25 MCG DOSE	4	PA,QL 2/28
CARTRIDGE		
NATPARA 50 MCG DOSE	4	PA,QL 2/28
CARTRIDGE		
NATPARA 75 MCG DOSE	4	PA,QL 2/28
CARTRIDGE		
NOVOFINE 30G X 1/3"	1	QL 200/30
NEEDLES		
NOVOFINE 31G X 1/4"	1	QL 200/30
NEEDLES		
NOVOFINE 32G NEEDLES	1	QL 200/30
NOVOFINE AUTOCOVER 30G	1	QL 200/30
NEEDLE		

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Drug Name	Drug Tier	Requirements / Limits
NOVOTWIST NEEDLE 30G 8MM	1	QL 200/30
NOVOTWIST NEEDLE 32G 5MM	1	QL 200/30
PHYSIOLYTE IRRIGATION SOLN	3	
PHYSIOSOL IRRIGATION SOLN	3	
POLIBAR ACB 96% ENEMA BAG	2	+
RADIGEL ACEMANNAN HYDROGEL	2	+
READI-CAT 2 2% SUSPENSION	2	+
<i>ringers irrigation solution</i>	3	
SILVER NITRATE APPLICATOR	2	+
<b>sodium chloride 0.9% irrig.</b>	1	
<b>sterile water for irrigation</b>	1	
TAGITOL V 40% SUSP	2	+
TECHLITE PEN NEEDLE 31GX1/4"	1	QL 200/30
TECHLITE PEN NEEDLE 31GX5/16"	1	QL 200/30
TECHLITE PEN NEEDLE 32GX1/4"	1	QL 200/30
TECHLITE PEN NEEDLE 32GX5/16"	1	QL 200/30
TECHLITE PEN NEEDLE 32GX5/32"	1	QL 200/30
TIS-U-SOL PENTALYTE IRRIG SOLN	3	
VARIBAR HONEY SUSPENS	2	+
VARIBAR NECTAR 40% SUSP	2	+
VARIBAR PUDDING 40% PASTE	2	+
VARIBAR THIN HONEY SUSP	2	+
VARIBAR THIN LIQUID 40% SUSP	2	+
VGO 20 DISPOSABLE DEVICE	3	
VGO 30 DISPOSABLE DEVICE	3	
VGO 40 DISPOSABLE DEVICE	3	
<b>Molecular Target Inhibitors</b>		
AFINITOR 10 MG TABLET	4	QL 56/28
AFINITOR 2.5 MG TABLET	4	QL 28/28

Drug Name	Drug Tier	Requirements / Limits
AFINITOR 5 MG TABLET	4	QL 28/28
AFINITOR 7.5 MG TABLET	4	QL 28/28
AFINITOR DISPERZ 2 MG TABLET	4	QL 56/28
AFINITOR DISPERZ 3 MG TABLET	4	QL 56/28
AFINITOR DISPERZ 5 MG TABLET	4	QL 112/28
ALECensa 150 MG CAPSULE	4	QL 240/30
ALUNBRIG 30 MG TABLET	4	QL 180/30
BOSULIF 100 MG TABLET	4	QL 120/30
BOSULIF 500 MG TABLET	4	QL 30/30
CABOMETYX 20 MG TABLET	4	QL 30/30
CABOMETYX 40 MG TABLET	4	QL 60/30
CABOMETYX 60 MG TABLET	4	QL 30/30
CAPRELSA 100 MG TABLET	4	QL 60/30
CAPRELSA 300 MG TABLET	4	QL 30/30
COMETRIQ 100 MG DAILY-DOSE PK	4	QL 56/28
COMETRIQ 140 MG DAILY-DOSE PK	4	QL 112/28
COMETRIQ 60 MG DAILY-DOSE PACK	4	QL 84/28
COTELLIC 20 MG TABLET	4	QL 63/28
ERIVEDGE 150 MG CAPSULE	4	QL 28/28
GILOTrif 20 MG TABLET	4	QL 30/30
GILOTrif 30 MG TABLET	4	QL 30/30
GILOTrif 40 MG TABLET	4	QL 30/30
IBRANCE 100 MG CAPSULE	4	QL 21/28
IBRANCE 125 MG CAPSULE	4	QL 21/28
IBRANCE 75 MG CAPSULE	4	QL 21/28
ICLUSIG 15 MG TABLET	4	QL 60/30
ICLUSIG 45 MG TABLET	4	QL 30/30
<i>imatinib mesylate 100 mg tab</i>	4	QL 60/30
<i>imatinib mesylate 400 mg tab</i>	4	QL 60/30
IMBRUVICA 140 MG CAPSULE	4	QL 120/30
INLYTA 1 MG TABLET	4	QL 120/30
INLYTA 5 MG TABLET	4	QL 120/30

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Drug Name	Drug Tier	Requirements / Limits
IRESSA 250 MG TABLET	4	QL 30/30
JAKAFI 10 MG TABLET	4	QL 60/30
JAKAFI 15 MG TABLET	4	QL 60/30
JAKAFI 20 MG TABLET	4	QL 60/30
JAKAFI 25 MG TABLET	4	QL 60/30
JAKAFI 5 MG TABLET	4	QL 60/30
LENVIMA 10 MG DAILY DOSE	4	QL 30/30
LENVIMA 14 MG DAILY DOSE	4	QL 60/30
LENVIMA 18 MG DAILY DOSE	4	QL 90/30
LENVIMA 20 MG DAILY DOSE	4	QL 60/30
LENVIMA 24 MG DAILY DOSE	4	QL 90/30
LENVIMA 8 MG DAILY DOSE	4	QL 60/30
LYNPARZA 50 MG CAPSULE	4	QL 448/28
MEKINIST 0.5 MG TABLET	4	QL 90/30
MEKINIST 2 MG TABLET	4	QL 30/30
NEXAVAR 200 MG TABLET	4	QL 120/30
SPRYCEL 100 MG TABLET	4	QL 30/30
SPRYCEL 140 MG TABLET	4	QL 30/30
SPRYCEL 20 MG TABLET	4	QL 30/30
SPRYCEL 50 MG TABLET	4	QL 30/30
SPRYCEL 70 MG TABLET	4	QL 30/30
SPRYCEL 80 MG TABLET	4	QL 30/30
STIVARGA 40 MG TABLET	4	QL 84/28
SUTENT 12.5 MG CAPSULE	4	QL 28/28
SUTENT 25 MG CAPSULE	4	QL 28/28
SUTENT 37.5 MG CAPSULE	4	QL 28/28
SUTENT 50 MG CAPSULE	4	QL 28/28
TAFINLAR 50 MG CAPSULE	4	QL 120/30
TAFINLAR 75 MG CAPSULE	4	QL 120/30
TAGRISSO 40 MG TABLET	4	QL 30/30
TAGRISSO 80 MG TABLET	4	QL 30/30
TARCEVA 100 MG TABLET	4	QL 30/30
TARCEVA 150 MG TABLET	4	QL 30/30
TARCEVA 25 MG TABLET	4	QL 60/30
TASIGNA 150 MG CAPSULE	4	QL 112/28
TASIGNA 200 MG CAPSULE	4	QL 120/30
TYKERB 250 MG TABLET	4	QL 180/30
VOTRIENT 200 MG TABLET	4	QL 120/30
XALKORI 200 MG CAPSULE	4	QL 60/30
XALKORI 250 MG CAPSULE	4	QL 60/30

Drug Name	Drug Tier	Requirements / Limits
ZELBORAF 240 MG TABLET	4	QL 240/30
ZYKADIA 150 MG CAPSULE	4	QL 140/28
<b>Monoamine Oxidase B (MAO-B) Inhibitors</b>		
AZILECT 0.5 MG TABLET	2	QL 30/30
AZILECT 1 MG TABLET	2	QL 30/30
<i>rasagiline mesylate 0.5 mg tab</i>	1	QL 30/30
<i>rasagiline mesylate 1 mg tab</i>	1	QL 30/30
<i>selegiline hcl 5 mg capsule</i>	1	
<i>selegiline hcl 5 mg tablet</i>	1	
ZELAPAR 1.25 MG ODT TABLET	3	
<b>Monoamine Oxidase Inhibitors</b>		
EMSAM 12 MG/24 HOURS PATCH	4	QL 30/30
EMSAM 6 MG/24 HOURS PATCH	4	QL 30/30
EMSAM 9 MG/24 HOURS PATCH	4	QL 30/30
MARPLAN 10 MG TABLET	3	QL 180/30
<i>phenelzine sulfate 15 mg tab</i>	1	
<i>tranylcypromine sulf 10 mg tab</i>	1	
<b>Monoclonal Antibody/Antibody-Drug Conjugate</b>		
ARZERRA 1,000 MG/50 ML VIAL	4	PA,B/D
ARZERRA 100 MG/5 ML VIAL	4	PA,B/D
AVASTIN 100 MG/4 ML VIAL	4	PA,B/D
AVASTIN 400 MG/16 ML VIAL	4	PA,B/D
BAVENCIO 200 MG/10 ML VIAL	4	PA,B/D
CYRAMZA 100 MG/10 ML VIAL	4	PA,B/D
CYRAMZA 500 MG/50 ML VIAL	4	PA,B/D
DARZALEX 100 MG/5 ML VIAL	4	PA,B/D
DARZALEX 400 MG/20 ML VIAL	4	PA,B/D
EMPLICITI 300 MG VIAL	4	PA,B/D
EMPLICITI 400 MG VIAL	4	PA,B/D
ERBITUX 100 MG/50 ML VIAL	4	PA,B/D
ERBITUX 200 MG/100 ML VIAL	4	PA,B/D
GAZYVA 1,000 MG/40 ML VIAL	4	PA,B/D
HERCEPTIN 150 MG VIAL	4	PA,B/D
HERCEPTIN 440 MG VIAL	4	PA,B/D
IMFINZI 120 MG/2.4 ML VIAL	4	PA,B/D
IMFINZI 500 MG/10 ML VIAL	4	PA,B/D
KADCYLA 100 MG VIAL	4	PA,B/D

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Drug Name	Drug Tier	Requirements / Limits
KADCYLA 160 MG VIAL	4	PA,B/D
KEYTRUDA 100 MG/4 ML VIAL	4	PA,B/D
KEYTRUDA 50 MG VIAL	4	PA,B/D
OPDIVO 100 MG/10 ML VIAL	4	PA,QL 80/28,B/D
OPDIVO 40 MG/4 ML VIAL	4	PA,QL 80/28,B/D
PERJETA 420 MG/14 ML VIAL	4	PA,B/D
PORTRAZZA 800 MG/50 ML VIAL	4	PA,QL 100/21,B/D
RITUXAN 10 MG/ML VIAL	4	PA,B/D
RITUXAN HYCELA 1,400 MG-23,400	4	PA,B/D
RITUXAN HYCELA 1,600 MG-26,800	4	PA,B/D
TECENTRIQ 1,200 MG/20 ML VIAL	4	PA,QL 20/21,B/D
UNITUXIN 17.5 MG/ 5 ML VIAL	4	PA,B/D
VECTIBIX 100 MG/5 ML VIAL	4	PA,B/D
VECTIBIX 400 MG/20 ML VIAL	4	PA,B/D
YERVOY 200 MG/40 ML VIAL	4	PA,QL 80/21,B/D
YERVOY 50 MG/10 ML VIAL	4	PA,B/D
ZALTRAP 100 MG/4 ML VIAL	4	PA,QL 40/28,B/D
<b>Mood Stabilizers</b>		
<i>lithium 8 meq/5 ml solution</i>	1	
<i>lithium carbonate 150 mg cap</i>	1	
<i>lithium carbonate 300 mg cap</i>	1	
<i>lithium carbonate 300 mg tab</i>	1	
<i>lithium carbonate 600 mg cap</i>	1	
<i>lithium carbonate er 300 mg tb</i>	1	
<i>lithium carbonate er 450 mg tb</i>	1	
<b>Multiple Sclerosis Agents</b>		
AMPYRA ER 10 MG TABLET	4	PA,QL 60/30
AUBAGIO 14 MG TABLET	4	PA,QL 28/28
AUBAGIO 7 MG TABLET	4	PA,QL 28/28
AVONEX 30 MCG VIAL KIT	4	PA,QL 4/28

Drug Name	Drug Tier	Requirements / Limits
AVONEX PEN 30 MCG/0.5 ML KIT	4	PA,QL 4/28
AVONEX PREFILLED SYR 30 MCG KT	4	PA,QL 4/28
BETASERON 0.3 MG KIT	4	PA,QL 14/28
COPAXONE 20 MG/ML SYRINGE	4	QL 30/30
COPAXONE 40 MG/ML SYRINGE	4	QL 12/28
EXTAVIA 0.3 MG KIT	4	PA
GILENYA 0.5 MG CAPSULE	4	PA,QL 30/30
REBIF 22 MCG/0.5 ML	4	PA,QL 6/28
REBIF 44 MCG/0.5 ML	4	PA,QL 6/28
REBIF REBIDOSE 22 MCG/0.5 ML	4	PA,QL 6/28
REBIF REBIDOSE 44 MCG/0.5 ML	4	PA,QL 6/28
REBIF REBIDOSE TITRATION PACK	4	PA,QL 4.2/28
REBIF TITRATION PACK	4	PA,QL 4.2/28
TECFIDERA DR 120 MG CAPSULE	4	PA,QL 14/30
TECFIDERA DR 240 MG CAPSULE	4	PA,QL 60/30
TECFIDERA STARTER PACK	4	PA,QL 120/365
TYSABRI 300 MG/15 ML VIAL	4	PA,QL 15/28
<b>N-methyl-D-aspartate (NMDA) Receptor Antagonist</b>		
<i>memantine 5-10 mg titration pk</i>	1	PA if Younger than 27,QL 49/28
<i>memantine hcl 10 mg tablet</i>	1	PA if Younger than 27,QL 60/30

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Drug Name	Drug Tier	Requirements / Limits
<b>memantine hcl 2 mg/ml solution</b>	1	PA if Younger than 27,QL 300/30
<b>memantine hcl 5 mg tablet</b>	1	PA if Younger than 27,QL 90/30
NAMENDA XR 14 MG CAPSULE	2	PA if Younger than 27,QL 30/30
NAMENDA XR 21 MG CAPSULE	2	PA if Younger than 27,QL 30/30
NAMENDA XR 28 MG CAPSULE	2	PA if Younger than 27,QL 30/30
NAMENDA XR 7 MG CAPSULE	2	PA if Younger than 27,QL 30/30
NAMENDA XR TITRATION PACK	2	PA if Younger than 27,QL 56/365
<b>Nonsteroidal Anti-inflammatory Drugs</b>		
<b>celecoxib 100 mg capsule</b>	1	QL 60/30
<b>celecoxib 200 mg capsule</b>	1	QL 60/30
<b>celecoxib 400 mg capsule</b>	1	QL 60/30
<b>celecoxib 50 mg capsule</b>	1	QL 60/30
<b>choline mag trisal liquid</b>	1	
<b>diclofenac pot 50 mg tablet</b>	1	
<b>diclofenac sod ec 25 mg tab</b>	1	
<b>diclofenac sod ec 50 mg tab</b>	1	
<b>diclofenac sod ec 75 mg tab</b>	1	
<b>diclofenac sod er 100 mg tab</b>	1	
<b>diclofenac-misoprost 50-0.2 tb</b>	1	
<b>diclofenac-misoprost 75-0.2 tb</b>	1	
<b>diflunisal 500 mg tablet</b>	1	
<b>etodolac 200 mg capsule</b>	1	

Drug Name	Drug Tier	Requirements / Limits
<b>etodolac 300 mg capsule</b>	1	
<b>etodolac 400 mg tablet</b>	1	
<b>etodolac 500 mg tablet</b>	1	
<b>etodolac er 400 mg tablet</b>	1	
<b>etodolac er 500 mg tablet</b>	1	
<b>etodolac er 600 mg tablet</b>	1	
<b>fenoprofen 200 mg capsule</b>	1	
<b>fenoprofen 400 mg capsule</b>	1	
<b>fenoprofen 600 mg tablet</b>	1	
<b>flurbiprofen 100 mg tablet</b>	1	
<b>flurbiprofen 50 mg tablet</b>	1	
<b>ibuprofen 100 mg/5 ml susp</b>	1	
<b>ibuprofen 400 mg tablet</b>	1	
<b>ibuprofen 600 mg tablet</b>	1	
<b>ibuprofen 800 mg tablet</b>	1	
<b>indomethacin 25 mg capsule</b>	1	
<b>indomethacin 50 mg capsule</b>	1	
<b>indomethacin er 75 mg capsule</b>	1	
<b>ketoprofen 50 mg capsule</b>	1	
<b>ketoprofen 75 mg capsule</b>	1	
<b>ketorolac 10 mg tablet</b>	1	QL 20/30
<b>ketorolac 15 mg/ml vial</b>	1	
<b>ketorolac 30 mg/ml vial</b>	1	
<b>ketorolac 300 mg/10 ml vial</b>	1	
<b>ketorolac 60 mg/2 ml carpject</b>	1	
<b>ketorolac 60 mg/2 ml vial</b>	1	
<b>meclofenamate 100 mg capsule</b>	1	
<b>meclofenamate 50 mg capsule</b>	1	
<b>meloxicam 15 mg tablet</b>	1	QL 30/30
<b>meloxicam 7.5 mg tablet</b>	1	QL 30/30
<b>meloxicam 7.5 mg/5 ml susp</b>	1	
<b>MOBIC 15 MG TABLET</b>	3	QL 30/30,ST
<b>MOBIC 7.5 MG TABLET</b>	3	QL 30/30,ST
<b>nabumetone 500 mg tablet</b>	1	
<b>nabumetone 750 mg tablet</b>	1	
<b>naproxen 125 mg/5 ml suspen</b>	1	
<b>naproxen 250 mg tablet</b>	1	
<b>naproxen 375 mg tablet</b>	1	

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Drug Name	Drug Tier	Requirements / Limits
<b>naproxen 500 mg tablet</b>	1	
<b>naproxen dr 375 mg tablet</b>	1	
<b>naproxen dr 500 mg tablet</b>	1	
<b>naproxen sodium 275 mg tab</b>	1	
<b>naproxen sodium 550 mg tab</b>	1	
<b>oxaprozin 600 mg tablet</b>	1	
<b>piroxicam 10 mg capsule</b>	1	
<b>piroxicam 20 mg capsule</b>	1	
<b>salsalate 500 mg tablet</b>	1	
<b>salsalate 750 mg tablet</b>	1	
<b>sulindac 150 mg tablet</b>	1	
<b>sulindac 200 mg tablet</b>	1	
<b>tolmetin sodium 200 mg tab</b>	1	
<b>tolmetin sodium 400 mg cap</b>	1	
<b>tolmetin sodium 600 mg tab</b>	1	
VIMOVO DR 375-20 MG TABLET	3	QL 60/30
VIMOVO DR 500-20 MG TABLET	3	QL 60/30
<b>Ophthalmic Prostaglandin and Prostamide Analogs</b>		
<b>bimatoprost 0.03% eye drops</b>	1	QL 5/30
COMBIGAN 0.2%-0.5% EYE DROPS	2	
<b>latanoprost 0.005% eye drops</b>	1	QL 5/30
LUMIGAN 0.01% EYE DROPS	2	QL 5/30
TRAVATAN Z 0.004% EYE DROP	2	QL 5/30
ZIOPTAN 0.0015% EYE DROPS	3	QL 30/30
<b>Ophthalmic Agents, Other</b>		
<b>atropine 1% eye drops</b>	1	
<b>atropine 1% eye ointment</b>	1	
<b>cyclopentolate 0.5% eye drops</b>	1	
<b>cyclopentolate 1% eye drops</b>	1	
<b>cyclopentolate hcl 2% drops</b>	1	
CYSTARAN 0.44% EYE DROPS	4	PA,QL 60/28
LACRISERT 5 MG EYE INSERT	2	
<b>naphazoline 0.1% eye drops</b>	1	

Drug Name	Drug Tier	Requirements / Limits
<b>phenylephrine 10% eye drops</b>	1	
<b>phenylephrine 2.5% eye drop</b>	1	
PROCYSB1 DR 25 MG CAPSULE	4	
PROCYSB1 DR 75 MG CAPSULE	4	
<b>proparacaine 0.5% eye drops</b>	1	
RESTASIS 0.05% EYE EMULSION	2	QL 60/30
<b>tetracaine hcl 0.5% eye soln</b>	1	
TETRAVISC 0.5% EYE DROPS	1	
TETRAVISC FORTE 0.5% EYE DROPS	1	
<b>tropicamide 0.5% eye drops</b>	1	
<b>tropicamide 1% eye drops</b>	1	
<b>Ophthalmic Anti-allergy Agents</b>		
ALOCRIL 2% EYE DROPS	2	
ALOMIDE 0.1% EYE DROPS	3	
<b>azelastine hcl 0.05% drops</b>	1	
<b>cromolyn 4% eye drops</b>	1	
CYCLOMYDRIL EYE DROPS	2	
<b>epinastine hcl 0.05% eye drops</b>	1	
<b>olopatadine hcl 0.1% eye drops</b>	1	QL 5/30
<b>olopatadine hcl 0.2% eye drop</b>	1	QL 2.5/30
PATADAY 0.2% EYE DROPS	2	QL 2.5/30
PAZEO 0.7% EYE DROPS	2	QL 2.5/30
<b>Ophthalmic Antiglaucoma Agents</b>		
<b>acetazolamide er 500 mg cap</b>	1	
ALPHAGAN P 0.1% DROPS	2	
<b>apraclonidine hcl 0.5% drops</b>	1	
AZOPT 1% EYE DROPS	2	
<b>betaxolol hcl 0.5% eye drop</b>	1	
BETIMOL 0.25% EYE DROPS	3	
BETIMOL 0.5% EYE DROPS	3	
BETOPTIC S 0.25% EYE DROPS	3	
<b>brimonidine 0.2% eye drop</b>	1	
<b>brimonidine tartrate 0.15% drp</b>	1	
<b>carteolol hcl 1% eye drops</b>	1	
COSOPT PF EYE DROPS	3	QL 60/30

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Drug Name	Drug Tier	Requirements / Limits
<b>dorzolamide hcl 2% eye drops</b>	1	QL 10/30
<b>dorzolamide-timolol eye drops</b>	1	QL 10/30
IOPIDINE 1% EYE DROPS	3	
ISTALOL 0.5% EYE DROPS	3	
<b>levobunolol 0.5% eye drops</b>	1	
<b>methazolamide 25 mg tablet</b>	1	
<b>metipranolol 0.3% eye drops</b>	1	
PHOSPHOLINE IODIDE 0.125%	3	
<b>pilocarpine 1% eye drops</b>	1	
<b>pilocarpine 2% eye drops</b>	1	
<b>pilocarpine 4% eye drops</b>	1	
SIMBRINZA 1%-0.2% EYE DROPS	3	
<b>timolol 0.25% eye drops</b>	1	
<b>timolol 0.25% gfs gel-solution</b>	1	
<b>timolol 0.5% eye drops</b>	1	
<b>timolol 0.5% gel-solution</b>	1	
<b>Ophthalmic Anti-inflammatories</b>		
<b>bromfenac sodium 0.09% eye drp</b>	1	
<b>dexamethasone 0.1% eye drop</b>	1	
<b>diclofenac 0.1% eye drops</b>	1	
DUREZOL 0.05% EYE DROPS	2	
FLAREX 0.1% EYE DROPS	3	
<b>fluorometholone 0.1% drops</b>	1	
<b>flurbiprofen 0.03% eye drop</b>	1	
FML FORTE 0.25% EYE DROPS	3	
FML S.O.P. 0.1% OINTMENT	3	
ILEVRO 0.3% OPHTH DROPS	2	
<b>ketorolac 0.4% ophth solution</b>	1	
<b>ketorolac 0.5% ophth solution</b>	1	
LOTEMAX 0.5% EYE DROPS	3	
LOTEMAX 0.5% EYE OINTMENT	3	
LOTEMAX 0.5% OPHTHALMIC GEL	3	
MAXIDEX 0.1% EYE DROPS	3	
<b>neomyc-polym-dexamet eye ointm</b>	1	

Drug Name	Drug Tier	Requirements / Limits
<b>neomyc-polym-dexameth eye drop</b>	1	
NEVANAC 0.1% DROPTAINER	3	
PRED MILD 0.12% EYE DROPS	2	
PRED-G 1% EYE DROPS	2	
PRED-G S.O.P. EYE OINTMENT	2	
<b>prednisolone ac 1% eye drop</b>	1	
<b>prednisolone sod 1% eye drop</b>	1	
PROLENSA 0.07% EYE DROPS	2	
TOBRADEX EYE OINTMENT	2	
TOBRADEX ST EYE DROPS	3	
<b>tobramycin-dexameth ophth susp</b>	1	
<b>Opioid Analgesics, Long-acting</b>		
<b>buprenorphine 0.3 mg/ml syring</b>	1	QL 150/30
<b>buprenorphine 0.3 mg/ml vial</b>	1	QL 150/30
<b>buprenorphine 10 mcg/hr patch</b>	1	QL 4/28
<b>buprenorphine 15 mcg/hr patch</b>	1	QL 4/28
<b>buprenorphine 20 mcg/hr patch</b>	1	QL 4/28
<b>buprenorphine 5 mcg/hr patch</b>	1	QL 4/28
<b>buprenorphine 7.5 mcg/hr patch</b>	1	QL 4/28
BUTRANS 10 MCG/HR PATCH	2	QL 4/28
BUTRANS 15 MCG/HR PATCH	2	QL 4/28
BUTRANS 20 MCG/HR PATCH	2	QL 4/28
BUTRANS 5 MCG/HR PATCH	2	QL 4/28
BUTRANS 7.5 MCG/HR PATCH	2	QL 4/28
<b>diskets 40 mg tablet dispr</b>	1	QL 90/30
DURAMORPH 10 MG/10 ML AMPUL	3	QL 180/30
DURAMORPH 5 MG/10 ML AMPUL	3	QL 180/30
EMBEDA ER 100-4 MG CAPSULE	2	QL 60/30

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Drug Name	Drug Tier	Requirements / Limits
EMBEDA ER 20-0.8 MG CAPSULE	2	QL 60/30
EMBEDA ER 30-1.2 MG CAPSULE	2	QL 60/30
EMBEDA ER 50-2 MG CAPSULE	2	QL 60/30
EMBEDA ER 60-2.4 MG CAPSULE	2	QL 60/30
EMBEDA ER 80-3.2 MG CAPSULE	2	QL 60/30
<b>fentanyl 100 mcg/hr patch</b>	1	QL 20/30
<b>fentanyl 12 mcg/hr patch</b>	1	QL 20/30
<b>fentanyl 25 mcg/hr patch</b>	1	QL 20/30
<b>fentanyl 37.5 mcg/hr patch</b>	1	QL 20/30
<b>fentanyl 50 mcg/hr patch</b>	1	QL 20/30
<b>fentanyl 62.5 mcg/hr patch</b>	1	QL 20/30
<b>fentanyl 75 mcg/hr patch</b>	1	QL 20/30
<b>fentanyl 87.5 mcg/hr patch</b>	1	QL 20/30
HYSINGLA ER 100 MG TABLET	2	QL 30/30
HYSINGLA ER 120 MG TABLET	2	QL 30/30
HYSINGLA ER 20 MG TABLET	2	QL 30/30
HYSINGLA ER 30 MG TABLET	2	QL 30/30
HYSINGLA ER 40 MG TABLET	2	QL 30/30
HYSINGLA ER 60 MG TABLET	2	QL 30/30
HYSINGLA ER 80 MG TABLET	2	QL 30/30
INFUMORPH 200 MG/20 ML AMPUL	3	QL 200/30
INFUMORPH 500 MG/20 ML AMPUL	3	QL 200/30
<b>levorphanol 2 mg tablet</b>	4	QL 180/30
<b>methadone 10 mg/5 ml solution</b>	1	QL 900/30
<b>methadone 10 mg/ml oral conc</b>	1	QL 500/30
<b>methadone 5 mg/5 ml solution</b>	1	QL 1800/30
<b>methadone hcl 10 mg tablet</b>	1	QL 180/30
<b>methadone hcl 10 mg/ml vial</b>	1	QL 150/30
<b>methadone hcl 5 mg tablet</b>	1	QL 180/30
METHADONE INTENSOL 10 MG/ML	1	QL 500/30
METHADOSE 10 MG/ML ORAL CONC	1	QL 500/30

Drug Name	Drug Tier	Requirements / Limits
METHADOSE 40 MG TABLET DISPR	1	QL 90/30
<b>morphine 0.5 mg/ml vial</b>	1	QL 180/30
<b>morphine 1 mg/ml vial p-f</b>	1	QL 180/30
<b>morphine sulf 10 mg suppos</b>	1	
<b>morphine sulf 20 mg suppos</b>	1	
<b>morphine sulf 30 mg suppos</b>	1	
<b>morphine sulf 5 mg suppos</b>	1	
<b>morphine sulf er 100 mg tablet</b>	1	QL 120/30
<b>morphine sulf er 15 mg tablet</b>	1	QL 180/30
<b>morphine sulf er 200 mg tablet</b>	1	QL 120/30
<b>morphine sulf er 30 mg tablet</b>	1	QL 180/30
<b>morphine sulf er 60 mg tablet</b>	1	QL 120/30
<b>morphine sulfate er 10 mg cap</b>	1	QL 60/30
<b>morphine sulfate er 100 mg cap</b>	1	QL 60/30
<b>morphine sulfate er 120 mg cap</b>	1	QL 60/30
<b>morphine sulfate er 20 mg cap</b>	1	QL 60/30
<b>morphine sulfate er 30 mg cap</b>	1	QL 60/30
<b>morphine sulfate er 45 mg cap</b>	1	QL 60/30
<b>morphine sulfate er 50 mg cap</b>	1	QL 60/30
<b>morphine sulfate er 60 mg cap</b>	1	QL 60/30
<b>morphine sulfate er 75 mg cap</b>	1	QL 60/30
<b>morphine sulfate er 80 mg cap</b>	1	QL 60/30
<b>morphine sulfate er 90 mg cap</b>	1	QL 60/30
<b>morphine sulfate ir 15 mg tab</b>	1	QL 180/30
<b>morphine sulfate ir 30 mg tab</b>	1	QL 180/30
<b>oxycodone hcl er 10 mg tablet</b>	1	QL 90/30
<b>oxycodone hcl er 15 mg tablet</b>	1	QL 90/30
<b>oxycodone hcl er 20 mg tablet</b>	1	QL 90/30
<b>oxycodone hcl er 30 mg tablet</b>	1	QL 90/30
<b>oxycodone hcl er 40 mg tablet</b>	1	QL 90/30
<b>oxycodone hcl er 60 mg tablet</b>	1	QL 90/30
<b>oxycodone hcl er 80 mg tablet</b>	1	QL 120/30
<b>oxymorphone hcl er 10 mg tab</b>	1	QL 60/30
<b>oxymorphone hcl er 15 mg tab</b>	1	QL 60/30
<b>oxymorphone hcl er 20 mg tab</b>	1	QL 60/30
<b>oxymorphone hcl er 30 mg tab</b>	1	QL 60/30
<b>oxymorphone hcl er 40 mg tab</b>	1	QL 120/30
<b>oxymorphone hcl er 5 mg tablet</b>	1	QL 60/30
<b>oxymorphone hcl er 7.5 mg tab</b>	1	QL 60/30

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Drug Name	Drug Tier	Requirements / Limits
<i>tramadol er 100 mg tablet</i>	1	QL 30/30
<i>tramadol er 200 mg tablet</i>	1	QL 30/30
<i>tramadol er 300 mg tablet</i>	1	QL 30/30
<i>tramadol hcl er 100 mg tablet</i>	1	QL 30/30
<i>tramadol hcl er 200 mg tablet</i>	1	QL 30/30
<i>tramadol hcl er 300 mg tablet</i>	1	QL 30/30
XTAMPZA ER 13.5 MG CAPSULE	2	QL 60/30
XTAMPZA ER 18 MG CAPSULE	2	QL 60/30
XTAMPZA ER 27 MG CAPSULE	2	QL 60/30
XTAMPZA ER 36 MG CAPSULE	2	QL 60/30
XTAMPZA ER 9 MG CAPSULE	2	QL 60/30
<b>Opioid Analgesics, Short-acting</b>		
<i>acetamin-caff-dihydrocod 320.5</i>	1	QL 300/30
<i>acetaminop-codeine 120-12 mg/5</i>	1	QL 2700/30
<i>acetaminophen-cod #2 tablet</i>	1	QL 360/30
<i>acetaminophen-cod #3 tablet</i>	1	QL 360/30
<i>acetaminophen-cod #4 tablet</i>	1	QL 180/30
ASCOMP WITH CODEINE CAPSULE	1	PA HRM,QL 180/30
<i>aspirin-caff-dihydrocodein cap</i>	1	QL 330/30
<i>butalb-acetaminoph-caff-codein</i>	1	PA HRM,QL 180/30
<i>butalb-caff-acetaminoph-codein</i>	1	PA HRM,QL 180/30
<i>butalbital comp-codeine #3 cap</i>	1	PA HRM,QL 180/30
<i>butorphanol 1 mg/ml vial</i>	1	QL 480/30
<i>butorphanol 10 mg/ml spray</i>	1	QL 5/30
<i>butorphanol 2 mg/ml vial</i>	1	QL 240/30
CAPITAL WITH CODEINE SUSP	3	QL 2700/30
<i>carisoprodol-aspirin-codein tb</i>	1	PA HRM,D/E

Drug Name	Drug Tier	Requirements / Limits
<i>codeine sulfate 15 mg tablet</i>	1	QL 720/30
<i>codeine sulfate 30 mg tablet</i>	1	QL 360/30
<i>codeine sulfate 60 mg tablet</i>	1	QL 180/30
ENDOCET 10-325 MG	1	QL 360/30
ENDOCET 2.5-325 MG	1	QL 360/30
ENDOCET 5-325 TABLET	1	QL 360/30
ENDOCET 7.5-325 MG	1	QL 360/30
<i>fentanyl 0.05 mg/ml syringe</i>	1	PA,B/D
<i>fentanyl 1,000 mcg/20 ml ampul</i>	1	PA,B/D
<i>fentanyl 2,500 mcg/50 ml vial</i>	1	PA,B/D
<i>fentanyl 250 mcg/5 ml vial</i>	1	PA,B/D
<i>fentanyl cit otfc 1,200 mcg</i>	4	PA,QL 120/30,D/E
<i>fentanyl cit otfc 1,600 mcg</i>	4	PA,QL 120/30,D/E
<i>fentanyl citrate otfc 200 mcg</i>	1	PA,QL 120/30,D/E
<i>fentanyl citrate otfc 400 mcg</i>	3	PA,QL 120/30,D/E
<i>fentanyl citrate otfc 600 mcg</i>	3	PA,QL 120/30,D/E
<i>fentanyl citrate otfc 800 mcg</i>	4	PA,QL 120/30,D/E
<i>hydrocodon-acetamin 7.5-325/15</i>	1	QL 2700/30
<i>hydrocodon-acetaminoph 2.5-325</i>	1	QL 360/30
<i>hydrocodon-acetaminoph 7.5-300</i>	1	QL 180/30
<i>hydrocodon-acetaminoph 7.5-325</i>	1	QL 180/30
<i>hydrocodon-acetaminophen 5-300</i>	1	QL 360/30
<i>hydrocodon-acetaminophen 5-325</i>	1	QL 360/30
<i>hydrocodon-acetaminophn 10-300</i>	1	QL 180/30
<i>hydrocodon-acetaminophn 10-325</i>	1	QL 180/30
<i>hydrocodone-acetamin 10-325/15</i>	1	QL 2700/30
<i>hydrocodone-ibuprofen 10-200</i>	1	QL 180/30
<i>hydrocodone-ibuprofen 2.5-200</i>	1	QL 180/30
<i>hydrocodone-ibuprofen 5-200 mg</i>	1	QL 180/30

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Drug Name	Drug Tier	Requirements / Limits
<b>hydrocodone-ibuprofen 7.5-200</b>	1	QL 180/30
<b>hydromorphone 1 mg/ml solution</b>	1	QL 1200/30
<b>hydromorphone 1 mg/ml syringe</b>	1	
<b>hydromorphone 10 mg/ml vial</b>	1	
<b>hydromorphone 2 mg tablet</b>	1	QL 180/30
<b>hydromorphone 2 mg/ml isecure</b>	1	
<b>hydromorphone 2 mg/ml vial</b>	1	
<b>hydromorphone 3 mg suppos</b>	1	
<b>hydromorphone 4 mg tablet</b>	1	QL 180/30
<b>hydromorphone 4 mg/ml carpuject</b>	1	
<b>hydromorphone 50 mg/5 ml vial</b>	1	
<b>hydromorphone 8 mg tablet</b>	1	QL 240/30
IBUDONE 5-200 MG TABLET	1	QL 180/30
LORCET 5-325 MG TABLET	1	QL 360/30
LORCET HD 10-325 MG TABLET	1	QL 180/30
LORCET PLUS 7.5-325 MG TABLET	1	QL 180/30
LORTAB 10-325 MG TABLET	1	QL 180/30
LORTAB 5-325 MG TABLET	1	QL 360/30
LORTAB 7.5-325 MG TABLET	1	QL 180/30
<b>meperidine 10 mg/ml cartrdge</b>	1	
<b>meperidine 100 mg tablet</b>	1	QL 180/30
<b>meperidine 100 mg/ml vial</b>	1	
<b>meperidine 25 mg/ml vial</b>	1	
<b>meperidine 50 mg tablet</b>	1	QL 180/30
<b>meperidine 50 mg/5 ml solution</b>	1	QL 900/30
<b>meperidine 50 mg/ml vial</b>	1	
<b>morpheine 10 mg/ml isecure syrg</b>	1	QL 200/30
<b>morpheine 10 mg/ml syringe</b>	1	QL 200/30
<b>morpheine 15 mg/ml carpuject</b>	1	
<b>morpheine 15 mg/ml vial</b>	1	
<b>morpheine 2 mg/ml isecure syr</b>	1	QL 1260/30
<b>morpheine 2 mg/ml syringe</b>	1	
<b>morpheine 4 mg/ml isecure syr</b>	1	QL 630/30
<b>morpheine 4 mg/ml syringe</b>	1	
<b>morpheine 5 mg/ml syringe</b>	1	
<b>morpheine 5 mg/ml vial</b>	1	
<b>morpheine 8 mg/ml isecure syrng</b>	1	QL 250/30
<b>morpheine 8 mg/ml syringe</b>	1	QL 250/30

Drug Name	Drug Tier	Requirements / Limits
<b>morpheine sulf 10 mg/5 ml soln</b>	1	QL 2700/30
<b>morpheine sulf 100 mg/5 ml soln</b>	1	QL 270/30
<b>morpheine sulf 20 mg/5 ml soln</b>	1	QL 1350/30
<b>morpheine sulfate 1 mg/ml vial</b>	1	QL 180/30
<b>morpheine sulfate 25 mg/ml v</b>	1	
<b>morpheine sulfate 50 mg/ml vial</b>	1	
<b>morpheine sulfate add-vantage 2</b>	1	
<b>nalbuphine 100 mg/10 ml vial</b>	1	QL 180/30
<b>nalbuphine 200 mg/10 ml vial</b>	1	QL 90/30
<b>opium tincture 10 mg/ml</b>	1	
<b>oxycodon-acetaminophen 2.5-325</b>	1	QL 360/30
<b>oxycodon-acetaminophen 7.5-325</b>	1	QL 360/30
<b>oxycodone hcl 10 mg tablet</b>	1	QL 300/30
<b>oxycodone hcl 100 mg/5 ml soln</b>	1	QL 270/30
<b>oxycodone hcl 15 mg tablet</b>	1	QL 300/30
<b>oxycodone hcl 20 mg tablet</b>	1	QL 270/30
<b>oxycodone hcl 30 mg tablet</b>	1	QL 180/30
<b>oxycodone hcl 5 mg capsule</b>	1	QL 300/30
<b>oxycodone hcl 5 mg tablet</b>	1	QL 300/30
<b>oxycodone hcl 5 mg/5 ml soln</b>	1	QL 1200/30
<b>oxycodone-acetaminophen 10-325</b>	1	QL 360/30
<b>oxycodone-acetaminophen 5-325</b>	1	QL 360/30
<b>oxycodone-acetaminophn 5-325/5</b>	1	QL 1800/30
<b>oxycodone-aspirin 4.8355-325</b>	1	QL 180/30
<b>oxycodone-ibuprofen 5-400 tab</b>	1	QL 120/30
<b>oxymorphone hcl 10 mg tablet</b>	1	QL 180/30
<b>oxymorphone hcl 5 mg tablet</b>	1	QL 180/30
<b>pentazocine-naloxone tablet</b>	1	QL 360/30
REPREXAIN 10-200 MG TABLET	1	QL 180/30
REPREXAIN 5-200 MG TABLET	1	QL 180/30
TALWIN 30 MG/ML VIAL	3	
<b>tramadol hcl 50 mg tablet</b>	1	QL 240/30
<b>tramadol-acetaminophn 37.5-325</b>	1	QL 240/30
VICODIN 5-300 MG TABLET	1	QL 360/30

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Drug Name	Drug Tier	Requirements / Limits
VICODIN ES 7.5-300 MG TABLET	1	QL 180/30
VICODIN HP 10-300 MG TABLET	1	QL 180/30
XYLON 10-200 MG TABLET	1	QL 180/30
ZAMICET 10-325 MG/15 ML SOLN	2	QL 2700/30
<b>Opioid Dependence Treatments</b>		
<i>buprenorphine 2 mg tablet sl</i>	1	QL 90/30
<i>buprenorphine 8 mg tablet sl</i>	1	QL 90/30
<i>buprenorphin-naloxon 8-2 mg sl</i>	1	PA,QL 90/30
<i>buprenorphn-naloxn 2-0.5 mg sl</i>	1	PA,QL 90/30
<i>naltrexone 50 mg tablet</i>	1	
SUBOXONE 12 MG-3 MG SL FILM	2	PA,QL 90/30
SUBOXONE 2 MG-0.5 MG SL FILM	2	PA,QL 90/30
SUBOXONE 4 MG-1 MG SL FILM	2	PA,QL 90/30
SUBOXONE 8 MG-2 MG SL FILM	2	PA,QL 90/30
ZUBSOLV 0.7-0.18 MG TABLET SL	2	PA,QL 30/30
ZUBSOLV 1.4-0.36 MG TABLET SL	2	PA,QL 90/30
ZUBSOLV 11.4-2.9 MG TABLET SL	2	PA,QL 90/30
ZUBSOLV 2.9-0.71 MG TABLET SL	2	PA,QL 90/30
ZUBSOLV 5.7-1.4 MG TABLET SL	2	PA,QL 90/30
ZUBSOLV 8.6-2.1 MG TABLET SL	2	PA,QL 90/30
<b>Opioid Reversal Agents</b>		
<i>naloxone 0.4 mg/ml vial</i>	1	
<i>naloxone 2 mg/2 ml syringe</i>	1	
NARCAN 4 MG NASAL SPRAY	2	QL 4/30
<b>Otic Agents</b>		
ACETASOL HC EAR DROPS	1	
<i>acetic acid 2% ear solution</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>acetic acid-aluminum drops</i>	1	
COLY-MYCIN S OTIC SUSP DROP	2	
CORTISPORIN-TC EAR SUSPENSION	2	
<i>fluocinolone oil 0.01% ear drp</i>	1	
<i>hydrocortison-acetic acid soln</i>	1	
<i>neomycin-polymyxin-hc ear soln</i>	1	
<i>neomycin-polymyxin-hc ear susp</i>	1	
OTICIN HC DROPS	2	+
OTO-END 10 EAR DROPS	2	+
<b>Parasympathomimetics</b>		
<i>guanidine hcl 125 mg tablet</i>	2	
MESTINON 60 MG/5 ML SYRUP	2	
<i>pyridostigmine br 60 mg tablet</i>	1	
<i>pyridostigmine er 180 mg tab</i>	1	
REGONOL 10 MG/2 ML AMPUL	3	
<b>Pediculicides/Scabicides</b>		
EURAX 10% CREAM	3	
EURAX 10% LOTION	3	
<i>lindane 1% lotion</i>	1	
<i>lindane 1% shampoo</i>	1	
<i>malathion 0.5% lotion</i>	1	
<i>permethrin 5% cream</i>	1	
SKLICE 0.5% LOTION	3	
SPINOSAD 0.9% TOPICAL SUSP	3	
<b>Phosphate Binders</b>		
AURYXIA 210 MG TABLET	3	QL 360/30
<i>calcium acetate 667 mg capsule</i>	1	
<i>calcium acetate 667 mg tablet</i>	1	
FOSRENOL 1,000 MG POWDER PACK	4	
FOSRENOL 1,000 MG TABLET CHEW	4	
FOSRENOL 500 MG TABLET CHEW	4	
FOSRENOL 750 MG POWDER PACKET	4	

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Drug Name	Drug Tier	Requirements / Limits
FOSRENOL 750 MG TABLET CHEW	4	
MAGNEBIND 400 RX TABLET	3	
PHOSLYRA 667 MG/5 ML SOLUTION	3	
RENELA 0.8 GM POWDER PACKET	2	QL 180/30
RENELA 2.4 GM POWDER PACKET	2	QL 180/30
RENELA 800 MG TABLET	2	QL 540/30
<b><i>sevelamer 0.8 gm powder packet</i></b>	1	QL 180/30
<b><i>sevelamer 2.4 gm powder packet</i></b>	1	QL 180/30
VELPHORO 500 MG CHEWABLE TAB	3	QL 180/30
<b>Phosphodiesterase Inhibitors, Airways Disease</b>		
<b><i>aminophylline 250 mg/10 ml vl</i></b>	1	
DALIRESP 500 MCG TABLET	3	QL 30/30
ELIXOPHYLLIN 80 MG/15 ML ELIX	3	
THEO-24 ER 100 MG CAPSULE	2	
THEO-24 ER 200 MG CAPSULE	2	
THEO-24 ER 300 MG CAPSULE	2	
THEO-24 ER 400 MG CAPSULE	2	
THEOCHRON ER 100 MG TABLET	1	
THEOCHRON ER 200 MG TABLET	1	
THEOCHRON ER 300 MG TABLET	1	
<b><i>theophylline 400 mg/500 ml d5w</i></b>	1	
<b><i>theophylline 80 mg/15 ml soln</i></b>	1	
<b><i>theophylline er 100 mg tablet</i></b>	1	
<b><i>theophylline er 200 mg tablet</i></b>	1	
<b><i>theophylline er 300 mg tab</i></b>	1	
<b><i>theophylline er 400 mg tablet</i></b>	1	
<b><i>theophylline er 450 mg tab</i></b>	1	
<b><i>theophylline er 600 mg tablet</i></b>	1	

Drug Name	Drug Tier	Requirements / Limits
<b>Platelet Modifying Agents</b>		
AGGRENOX 25 MG-200 MG CAPSULE	3	QL 60/30,ST
<b><i>aspirin-dipyridam er 25-200 mg</i></b>	1	QL 60/30
BRILINTA 60 MG TABLET	2	QL 60/30
BRILINTA 90 MG TABLET	2	QL 60/30
<b><i>cilostazol 100 mg tablet</i></b>	1	
<b><i>cilostazol 50 mg tablet</i></b>	1	
<b><i>clopidogrel 300 mg tablet</i></b>	1	QL 2/365
<b><i>clopidogrel 75 mg tablet</i></b>	1	QL 30/30
<b><i>dipyridamole 25 mg tablet</i></b>	1	
<b><i>dipyridamole 50 mg tablet</i></b>	1	
<b><i>dipyridamole 75 mg tablet</i></b>	1	
EFFIENT 10 MG TABLET	3	QL 30/30
EFFIENT 5 MG TABLET	3	QL 30/30
<b><i>prasugrel 10 mg tablet</i></b>	1	QL 30/30
<b><i>prasugrel 5 mg tablet</i></b>	1	QL 30/30
<b>Prescription Vitamins</b>		
ABANEU-SL TABLET SL	2	+
ACTIVE FE TABLET	2	+
ANIMI-3 CAPSULE	2	+
B-12 COMPLIANCE INJ KIT	2	+
BACMIN CAPLET	2	+
BIFERA RX TABLET	2	+
BIOCEL TABLET	2	+
BP VIT 3 CAPSULE	2	+
B-PLEX PLUS TABLET	2	+
<b><i>calcitriol 1 mcg/ml ampul</i></b>	1	+
<b><i>calcitriol capsule, soln</i></b>	1	+
CENTRATEX CAPSULE	2	+
CIFEREX 3,775 UNIT-1 MG CAP	2	+
CORVITA 150 TABLET	2	+
CORVITE 150 TABLET	2	+
CORVITE FE TABLET	2	+
CORVITE FREE TABLET	2	+
<b><i>cyanocobalamin 1,000 mcg/ml</i></b>	1	+
<b><i>deplin-algal oil 7.5 mg, 15 mg cap</i></b>	1	+
DERMACINRX PUREFOLIX TABLET	2	+

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Drug Name	Drug Tier	Requirements / Limits
DRISDOL 50,000 UNITS CAPSULE	2	+
DURACHOL 3,775 UNIT-1 MG CAP	2	+
ELFOLATE TABLETS	2	+
ENLYTE SOFTGEL	2	+
FE C PLUS TABLET	2	+
FERAHEME 510 MG/17 ML VIAL	2	+
FERIVA 21-7 TABLET	2	+
FERIVA FA CAPSULE	2	+
FERIVA MULTIPHASE CAPSULE	2	+
FEROCON CAPSULE	2	+
FEROTRINSIC CAPSULE	2	+
FERRALET 90 TABLET	2	+
FERRAPLUS 90 TABLET	2	+
FERREX 150 FORTE CAPSULE	2	+
FERREX 150 FORTE PLUS CAPSULE	2	+
FERREX 28 TABLET	2	+
FERRLECIT 62.5 MG/5 ML VIAL	2	+
<b>ferrlecit 62.5 mg/5 ml vial</b>	1	+
FERROCITE PLUS TABLET	2	+
FERROGELS FORTE SOFTGEL	2	+
FOCALGIN DSS TABLET	2	+
<b>folic acid 1 mg tablet</b>	1	+
<b>folic acid 5 mg/ml vial</b>	1	+
FOLIVANE-F CAPSULE	2	+
FOLIVANE-PLUS CAPSULE	2	+
FOLIXAPURE TABLET	2	+
FOLTRATE TABLET	2	+
FORTAVIT SOFTGEL	2	+
FUSION PLUS CAPSULE	2	+
HEMATINIC-FOLIC ACID TABLET	2	+
HEMATINIC-VITAMIN-MINERAL TAB	2	+
HEMATOGEN FORTE SOFTGEL	2	+
HEMATOGEN SOFTGEL	2	+
HEMATRON-AF SR CAPLET	2	+
HEMETAB IRON SUPPLEMENT TABLET	2	+
HEMOCYTE PLUS CAPSULE	2	+

Drug Name	Drug Tier	Requirements / Limits
HEMOCYTE-F ELIXIR, TAB	2	+
<b>hydroxocobalamin 1,000 mcg/ml</b>	1	+
ICAR-C PLUS TABLET	2	+
IFEREX 150 FORTE CAPSULE	2	+
INFED 100 MG/2 ML VIAL	2	+
INFUVITE ADULT VIAL	2	+
INJECTAFER 750 MG/15 ML VIAL	2	+
INTEGRA F CAPSULE	2	+
INTEGRA PLUS CAPSULE	2	+
IROSPAN 24/6 TABLET	2	+
<b>levomefolate-algal cap</b>	1	+
<b>l-methylfolate calcium</b>	1	+
L-METHYLFOLATE FORTE	2	+
<b>l-methylfolate tab, caplet</b>	1	+
M.V.I. ADULT VIAL	2	+
MAXARON FORTE TABLET	2	+
MAXFE CAPLET	2	+
MEPHYTON 5 MG TABLET	2	+
MULTIGEN CAPLET	2	+
MULTIGEN FOLIC CAPLET	2	+
MULTIGEN PLUS CAPLET	2	+
MYFERON-150 FORTE CAPSULE	2	+
NASCOBAL 500 MCG NASAL SPRAY	2	+
NEPHRON FA TABLET	2	+
NEURIN-SL TABLET SL	2	+
NOXIFOL-D3 2,500 UNIT-1 MG TAB	2	+
NUFERA TABLET	2	+
NUTRICAP CAPLET	2	+
NUTRIVIT LIQUID	2	+
ORTHO D 3,775 UNIT-1 MG CAP	2	+
<b>physicians ez use b-12 kit</b>	1	+
PHYSICIANS EZ USE B-12 KIT	2	+
<b>phytonadione 1 mg/0.5 ml syr</b>	1	+
POLY-IRON 150 FORTE CAPSULE	2	+
PROFERRIN-FORTE TABLET	2	+
PURALOR CI TABLET	2	+
PUREVIT DUALFE PLUS CAPSULE	2	+

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Drug Name	Drug Tier	Requirements / Limits
REVESTA 5,750 UNIT-1 MG CAP	2	+
ROCALTROL CAPSULE	2	+
ROCALTROL 1 MCG/ML ORAL SOLN	2	+
SE-TAN PLUS CAPSULE	2	+
SIDEROL TABLET	2	+
STROVITE FORTE CAPLET	2	+
STROVITE ONE CAPLET	2	+
SUPERVITE EC CAPLET	2	+
TANDEM PLUS CAPSULE	2	+
TARON FORTE CAPSULE	2	+
TL ICON CAPSULE	2	+
TL-HEM 150 CAPLET	2	+
TRICON CAPSULE	2	+
TRIFERIC 272 MG/50 ML AMPULE	2	+
TRIGELS-F FORTE SOFTGEL	2	+
UDAMIN SP CAPLET	2	+
UROSEX TABLET	2	+
V-C FORTE CAPSULE	2	+
VENOFER VIAL	2	+
VIC-FORTE CAPSULE	2	+
<b>vit d2 1.25 mg (50,000 unit)</b>	1	+
VITACEL TABLET	2	+
VITAFOL CAPLET	2	+
VITAJECT INJECTION	2	+
<b>vitamin k ampul</b>	1	+
XAQUIL XR TABLET	2	+
ZAVARA 5,750 UNIT-1 MG CAP	2	+
<b>Progesterone Agonists/Antagonists</b>		
ELLA 30 MG TABLET	2	
<b>Progestins</b>		
CAMILA 0.35 MG TABLET	1	
DEBLITANE 0.35 MG TABLET	1	
DEPO-PROVERA 400 MG/ML VIAL	3	QL 10/28
DEPO-SUBQ PROVERA 104 SYRINGE	2	
ERRIN 0.35 MG TABLET	1	
HEATHER TABLET	1	
<b>hydroxyprogesterone 1.25 g/5ml</b>	4	

Drug Name	Drug Tier	Requirements / Limits
JENCYCLA 0.35 MG TABLET	1	
JOLIVETTE TABLET	1	
LYZA 0.35 MG TABLET	1	
MAKENA 250 MG/ML VIAL	4	PA,B/D
<b>medroxyprogesterone 10 mg tab</b>	1	
<b>medroxyprogesterone 150 mg/ml</b>	1	QL 1/90
<b>medroxyprogesterone 2.5 mg tab</b>	1	
<b>medroxyprogesterone 5 mg tab</b>	1	
<b>megestrol 20 mg tablet</b>	1	PA HRM
<b>megestrol 40 mg tablet</b>	1	PA HRM
<b>megestrol 625 mg/5 ml susp</b>	1	PA HRM
<b>megestrol acet 40 mg/ml susp</b>	1	PA HRM
NORA-BE TABLET	1	
<b>norethindrone 0.35 mg tablet</b>	1	
<b>norethindrone 5 mg tablet</b>	1	
NORLYROC 0.35 MG TABLET	1	
<b>progesterone 100 mg capsule</b>	1	
<b>progesterone 200 mg capsule</b>	1	
<b>progesterone oil 50 mg/ml v1</b>	1	
SHAROBEL 0.35 MG TABLET	1	
<b>Protectants</b>		
CARAFATE 1 GM/10 ML SUSP	3	
<b>misoprostol 100 mcg tablet</b>	1	
<b>misoprostol 200 mcg tablet</b>	1	
<b>sucralfate 1 gm tablet</b>	1	
<b>Proton Pump Inhibitors</b>		
DEXILANT DR 30 MG CAPSULE	3	QL 60/30,ST
DEXILANT DR 60 MG CAPSULE	3	QL 60/30,ST
<b>esomeprazole mag dr 20 mg cap</b>	1	QL 60/30
<b>esomeprazole mag dr 40 mg cap</b>	1	QL 60/30
<b>esomeprazole sodium 20 mg vial</b>	1	
<b>esomeprazole sodium 40 mg vial</b>	1	
<b>lansoprazole dr 15 mg capsule</b>	1	QL 60/30
<b>lansoprazole dr 30 mg capsule</b>	1	QL 60/30
<b>omeprazole dr 10 mg capsule</b>	1	QL 60/30
<b>omeprazole dr 20 mg capsule</b>	1	QL 60/30
<b>omeprazole dr 40 mg capsule</b>	1	QL 60/30
<b>omeprazole-bicarb 20-1,100 cap</b>	3	QL 60/30

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Drug Name	Drug Tier	Requirements / Limits
<b>omeprazole-bicarb 20-1,680 pkt</b>	3	QL 60/30
<b>omeprazole-bicarb 40-1,100 cap</b>	3	QL 60/30
<b>omeprazole-bicarb 40-1,680 pkt</b>	3	QL 60/30
<b>pantoprazole sod dr 20 mg tab</b>	1	QL 60/30
<b>pantoprazole sod dr 40 mg tab</b>	1	QL 60/30
<b>rabeprazole sod dr 20 mg tab</b>	1	QL 60/30
<b>Pulmonary Antihypertensives</b>		
ADCIRCA 20 MG TABLET	4	PA,QL 60/30,D/E
ADEMPAS 0.5 MG TABLET	4	PA,QL 90/30
ADEMPAS 1 MG TABLET	4	PA,QL 90/30
ADEMPAS 1.5 MG TABLET	4	PA,QL 90/30
ADEMPAS 2 MG TABLET	4	PA,QL 90/30
ADEMPAS 2.5 MG TABLET	4	PA,QL 90/30
LETAIRIS 10 MG TABLET	4	PA,QL 30/30
LETAIRIS 5 MG TABLET	4	PA,QL 30/30
OPSUMIT 10 MG TABLET	4	PA,QL 30/30
REMODULIN 1 MG/ML VIAL	4	PA,B/D
REMODULIN 10 MG/ML VIAL	4	PA,B/D
REMODULIN 2.5 MG/ML VIAL	4	PA,B/D
REMODULIN 5 MG/ML VIAL	4	PA,B/D
<b>sildenafil 20 mg tablet</b>	1	PA,QL 90/30,D/E
TRACLEER 125 MG TABLET	4	PA,QL 60/30
TRACLEER 62.5 MG TABLET	4	PA,QL 60/30
TYVASO 1.74 MG/2.9 ML SOLUTION	4	PA,B/D
TYVASO INHALATION REFILL KIT	4	PA,B/D
TYVASO INHALATION STARTER KIT	4	PA,B/D
VENTAVIS 10 MCG/1 ML SOLUTION	4	PA,QL 270/30,B/D

Drug Name	Drug Tier	Requirements / Limits
VENTAVIS 20 MCG/1 ML SOLUTION	4	PA,QL 270/30,B/D
<b>Pulmonary Fibrosis Agents</b>		
ESBRIET 267 MG TABLET	4	PA,QL 270/30
ESBRIET 801 MG TABLET	4	PA,QL 90/30
OFEV 100 MG CAPSULE	4	PA,QL 60/30
OFEV 150 MG CAPSULE	4	PA,QL 60/30
<b>Quinolones</b>		
AVELOX IV 400 MG/250 ML	3	
BESIVANCE 0.6% SUSP	3	
CILOXAN 0.3% OINTMENT	2	
CIPRO HC OTIC SUSPENSION	2	
CIPRODEX OTIC SUSPENSION	2	
<b>ciprofloxacin 0.3% eye drop</b>	1	
<b>ciprofloxacin 200 mg/20 ml vial</b>	1	
<b>ciprofloxacin 250 mg/5 ml susp</b>	1	
<b>ciprofloxacin 400 mg/40 ml vial</b>	1	
<b>ciprofloxacin 500 mg/5 ml susp</b>	1	
<b>ciprofloxacin er 1,000 mg tab</b>	1	QL 14/14
<b>ciprofloxacin er 500 mg tablet</b>	1	QL 3/3
<b>ciprofloxacin hcl 100 mg tab</b>	1	
<b>ciprofloxacin hcl 250 mg tab</b>	1	
<b>ciprofloxacin hcl 500 mg tab</b>	1	
<b>ciprofloxacin hcl 750 mg tab</b>	1	
<b>ciprofloxacin-d5w 200 mg/100 ml</b>	1	
<b>ciprofloxacin-d5w 400 mg/200 ml</b>	1	
<b>gatifloxacin 0.5% eye drops</b>	1	
<b>levofloxacin 0.5% eye drops</b>	1	
<b>levofloxacin 25 mg/ml solution</b>	1	
<b>levofloxacin 250 mg tablet</b>	1	QL 30/30
<b>levofloxacin 250 mg/50 ml-d5w</b>	1	
<b>levofloxacin 500 mg tablet</b>	1	QL 30/30
<b>levofloxacin 500 mg/100 ml-d5w</b>	1	
<b>levofloxacin 500 mg/20 ml vial</b>	1	
<b>levofloxacin 750 mg tablet</b>	1	QL 30/30

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Drug Name	Drug Tier	Requirements / Limits
<b>levofloxacin 750 mg/150 ml-d5w</b>	1	
MOXEZA 0.5% EYE DROPS	3	
<b>moxifloxacin 0.5% eye drops</b>	1	
<b>moxifloxacin 400 mg/250 ml bag</b>	1	
<b>moxifloxacin hcl 400 mg tablet</b>	1	QL 30/30
<b>ofloxacin 0.3% ear drops</b>	1	
<b>ofloxacin 0.3% eye drops</b>	1	
<b>ofloxacin 300 mg tablet</b>	1	
<b>ofloxacin 400 mg tablet</b>	1	
VIGAMOX 0.5% EYE DROPS	2	
<b>Respiratory Tract Agents</b>		
HYPER-SAL 7% VIAL	2	+
NEBUSAL 3% VIAL	2	+
NEBUSAL 6% VIAL	2	+
PULMOSAL 7% VIAL	2	+
<b>sodium chloride 10% vial</b>	1	+
<b>sodium chloride 3% vial</b>	1	+
<b>sodium chloride 7% vial</b>	1	+
<b>Respiratory Tract Agents, Other</b>		
<b>acetylcysteine 10% vial</b>	1	PA,B/D
<b>acetylcysteine 20% vial</b>	1	PA,B/D
ARALAST NP 1,000 MG VIAL	4	PA,B/D
ARALAST NP 500 MG VIAL	3	PA,B/D
ESBRIET 267 MG CAPSULE	4	PA,QL 270/30
GLASSIA 1 GM/50 ML VIAL	4	PA,B/D
PROLASTIN C 1,000 MG VIAL	4	PA,B/D
<b>promethazine vc syrup</b>	1	PA HRM
<b>promethazine-phenylephrine syr</b>	1	PA HRM
<b>ribavirin 6 gm inhalation vial</b>	4	PA,B/D
STIOLTO RESPIMAT INHAL SPRAY	3	
XOLAIR 150 MG VIAL	4	PA,QL 6/28
ZEMAIRA 1,000 MG VIAL	4	PA,B/D
<b>Retinoids</b>		
<b>bexarotene 75 mg capsule</b>	4	
PANRETIN 0.1% GEL	4	
TARGRETIN 1% GEL	4	QL 60/30
<b>tretinoin 10 mg capsule</b>	4	

Drug Name	Drug Tier	Requirements / Limits
<b>Selective Estrogen Receptor Modifying Agents</b>		
<b>raloxifene hcl 60 mg tablet</b>	1	QL 30/30
<b>Serotonin (5-HT) 1b/1d Receptor Agonists</b>		
<b>almotriptan malate 12.5 mg tab</b>	1	QL 12/30,ST
<b>almotriptan malate 6.25 mg tab</b>	1	QL 18/30,ST
<b>frovatriptan succ 2.5 mg tab</b>	1	QL 18/30,ST
<b>naratriptan hcl 1 mg tablet</b>	1	QL 9/30
<b>naratriptan hcl 2.5 mg tablet</b>	1	QL 9/30
RELPAX 20 MG TABLET	3	QL 12/30,ST
RELPAX 40 MG TABLET	3	QL 6/30,ST
<b>rizatriptan 10 mg odt</b>	1	QL 12/30
<b>rizatriptan 10 mg tablet</b>	1	QL 12/30
<b>rizatriptan 5 mg odt</b>	1	QL 12/30
<b>rizatriptan 5 mg tablet</b>	1	QL 12/30
<b>sumatriptan 20 mg nasal spray</b>	1	QL 12/30
<b>sumatriptan 4 mg/0.5 ml cart</b>	1	QL 8/30
<b>sumatriptan 4 mg/0.5 ml inject</b>	1	QL 8/30
<b>sumatriptan 5 mg nasal spray</b>	1	QL 12/30
<b>sumatriptan 6 mg/0.5 ml inject</b>	1	QL 4/30
<b>sumatriptan 6 mg/0.5 ml refill</b>	1	QL 4/30
<b>sumatriptan 6 mg/0.5 ml syrng</b>	1	QL 4/30
<b>sumatriptan 6 mg/0.5 ml vial</b>	1	QL 4/30
<b>sumatriptan succ 100 mg tablet</b>	1	QL 9/30
<b>sumatriptan succ 25 mg tablet</b>	1	QL 9/30
<b>sumatriptan succ 50 mg tablet</b>	1	QL 9/30
<b>zolmitriptan 2.5 mg odt</b>	1	QL 12/30
<b>zolmitriptan 2.5 mg tablet</b>	1	QL 12/30
<b>zolmitriptan 5 mg odt</b>	1	QL 6/30
<b>zolmitriptan 5 mg tablet</b>	1	QL 6/30
<b>Sexual Dysfunction</b>		
ADDYI	2	QL30/30,+
CAVERJECT	2	QL 6/30,+
CIALIS 10 MG	2	QL 8/30,+
CIALIS 2.5 MG	2	PA,D/EQL 8/30,+
CIALIS 20 MG	2	QL 8/30,+

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Drug Name	Drug Tier	Requirements / Limits
CIALIS 5 MG	2	PA,D/EQL 8/30,+
EDEX	2	QL 6/30,+
INTRAROSA	2	QL30/30,+
LEVITRA	2	QL 8/30,+
MUSE	2	QL 6/30,+
OSPHENA	2	QL30/30,+
STAXYN	2	QL 8/30,+
STENDRA	2	QL 8/30,+
VIAGRA	2	QL 8/30,+
<b>Skeletal Muscle Relaxants</b>		
<i>carisoprodol-aspirin 200-325 mg</i>	1	PA HRM,D/E
<i>carisoprodol 250 mg tablet</i>	1	PA HRM,D/E
<i>carisoprodol 350 mg tablet</i>	1	PA HRM,D/E
<i>chlorzoxazone 500 mg tablet</i>	1	PA HRM
<i>cyclobenzaprine 10 mg tablet</i>	1	PA HRM,QL 90/30
<i>cyclobenzaprine 5 mg tablet</i>	1	PA HRM,QL 90/30
<i>cyclobenzaprine 7.5 mg tablet</i>	1	PA HRM,QL 90/30
METAXALL 800 MG TABLET	1	PA HRM
<i>metaxalone 400 mg tablet</i>	1	PA HRM
<i>metaxalone 800 mg tablet</i>	1	PA HRM
<i>methocarbamol 500 mg tablet</i>	1	PA HRM
<i>methocarbamol 750 mg tablet</i>	1	PA HRM
<i>orphenadrine 30 mg/ml vial</i>	1	PA HRM
<i>orphenadrine er 100 mg tablet</i>	1	PA HRM,QL 60/30
<b>Sleep Disorders, Other</b>		
<i>armodafinil 150 mg tablet</i>	1	PA,QL 30/30,D/E
<i>armodafinil 200 mg tablet</i>	1	PA,QL 30/30,D/E

Drug Name	Drug Tier	Requirements / Limits
<i>armodafinil 250 mg tablet</i>	1	PA,QL 30/30,D/E
<i>armodafinil 50 mg tablet</i>	1	PA,QL 30/30,D/E
BUTISOL SODIUM 30 MG TABLET	3	
<i>modafinil 100 mg tablet</i>	1	PA,QL 30/30,D/E
<i>modafinil 200 mg tablet</i>	1	PA,QL 60/30,D/E
NUVIGIL 150 MG TABLET	3	PA,QL 30/30,D/E
NUVIGIL 200 MG TABLET	3	PA,QL 30/30,D/E
NUVIGIL 250 MG TABLET	3	PA,QL 30/30,D/E
NUVIGIL 50 MG TABLET	3	PA,QL 30/30,D/E
ROZEREM 8 MG TABLET	2	QL 30/30
SILENOR 3 MG TABLET	2	QL 30/30
SILENOR 6 MG TABLET	2	QL 30/30
XYREM 500 MG/ML ORAL SOLUTION	4	PA,QL 540/30
<b>Smoking Cessation Agents</b>		
BUPROBAN 150 MG TABLET	1	QL 60/30
<i>bupropion hcl sr 150 mg tablet</i>	1	QL 60/30
CHANTIX 0.5 MG TABLET	2	QL 336/365
CHANTIX 1 MG CONT MONTH BOX	2	QL 336/365
CHANTIX 1 MG TABLET	2	QL 336/365
CHANTIX STARTING MONTH BOX	2	QL 336/365
NICOTROL CARTRIDGE INHALER	3	QL 1008/90
NICOTROL NS 10 MG/ML SPRAY	3	QL 30/30
<b>Sodium Channel Agents</b>		
BANZEL 200 MG TABLET	4	QL 60/30
BANZEL 40 MG/ML SUSPENSION	4	QL 2400/30
BANZEL 400 MG TABLET	4	QL 240/30
<i>carbamazepine 100 mg tab chew</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<b>carbamazepine 100 mg/5 ml susp</b>	1	
<b>carbamazepine 200 mg tablet</b>	1	
<b>carbamazepine er 100 mg cap</b>	1	
<b>carbamazepine er 100 mg tablet</b>	1	
<b>carbamazepine er 200 mg cap</b>	1	
<b>carbamazepine er 200 mg tablet</b>	1	
<b>carbamazepine er 300 mg cap</b>	1	
<b>carbamazepine er 400 mg tablet</b>	1	
DILANTIN 100 MG CAPSULE	3	
DILANTIN 30 MG CAPSULE	3	
DILANTIN 50 MG INFATAB	3	
EPITOL 200 MG TABLET	1	
EQUETRO 100 MG CAPSULE	3	
EQUETRO 200 MG CAPSULE	3	
EQUETRO 300 MG CAPSULE	3	
<b>fosphenytoin 100 mg pe/2 ml vl</b>	1	
<b>fosphenytoin 500 mg pe/10 ml</b>	1	
<b>oxcarbazepine 150 mg tablet</b>	1	
<b>oxcarbazepine 300 mg tablet</b>	1	
<b>oxcarbazepine 300 mg/5 ml susp</b>	1	
<b>oxcarbazepine 600 mg tablet</b>	1	
OXTELLAR XR 150 MG TABLET	3	
OXTELLAR XR 300 MG TABLET	3	
OXTELLAR XR 600 MG TABLET	3	
PEGANONE 250 MG TABLET	2	
PHENYTEK 200 MG CAPSULE	3	
PHENYTEK 300 MG CAPSULE	3	
<b>phenytoin 125 mg/5 ml susp</b>	1	
<b>phenytoin 50 mg infatab</b>	1	
<b>phenytoin 50 mg tablet chew</b>	1	
<b>phenytoin 50 mg/ml vial</b>	1	
<b>phenytoin sod ext 100 mg cap</b>	1	
<b>phenytoin sod ext 200 mg cap</b>	1	

Drug Name	Drug Tier	Requirements / Limits
<b>phenytoin sod ext 300 mg cap</b>	1	
VIMPAT 10 MG/ML SOLUTION	2	QL 1200/30
VIMPAT 100 MG TABLET	2	QL 60/30
VIMPAT 150 MG TABLET	2	QL 60/30
VIMPAT 200 MG TABLET	2	QL 60/30
VIMPAT 200 MG/20 ML VIAL	2	QL 1200/30
VIMPAT 50 MG TABLET	2	QL 60/30
<b>SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/Serotonin and Norepinephrine Reuptake Inhibitor)</b>		
<b>citalopram hbr 10 mg tablet</b>	1	
<b>citalopram hbr 10 mg/5 ml soln</b>	1	QL 600/30
<b>citalopram hbr 20 mg tablet</b>	1	QL 30/30
<b>citalopram hbr 40 mg tablet</b>	1	QL 30/30
<b>desvenlafaxine er 100 mg tab</b>	1	QL 30/30
<b>desvenlafaxine er 50 mg tab</b>	1	QL 30/30
<b>desvenlafaxine suc er 100 mg</b>	1	QL 30/30
<b>desvenlafaxine suc er 25 mg tb</b>	1	QL 30/30
<b>desvenlafaxine suc er 50 mg tb</b>	1	QL 30/30
<b>duloxetine hcl dr 20 mg cap</b>	1	QL 60/30
<b>duloxetine hcl dr 30 mg cap</b>	1	QL 90/30
<b>duloxetine hcl dr 40 mg cap</b>	1	QL 90/30
<b>duloxetine hcl dr 60 mg cap</b>	1	QL 60/30
<b>escitalopram 10 mg tablet</b>	1	QL 60/30
<b>escitalopram 20 mg tablet</b>	1	QL 30/30
<b>escitalopram 5 mg tablet</b>	1	QL 30/30
<b>escitalopram oxalate 5 mg/5 ml</b>	1	QL 600/30
FETZIMA 20-40 MG TITRATION PAK	3	QL 56/365,ST
FETZIMA ER 120 MG CAPSULE	3	QL 30/30,ST
FETZIMA ER 20 MG CAPSULE	3	QL 30/30,ST
FETZIMA ER 40 MG CAPSULE	3	QL 30/30,ST
FETZIMA ER 80 MG CAPSULE	3	QL 30/30,ST
<b>fluoxetine 20 mg/5 ml solution</b>	1	QL 600/30
<b>fluoxetine dr 90 mg capsule</b>	1	QL 4/28
<b>fluoxetine hcl 10 mg capsule</b>	1	QL 30/30
<b>fluoxetine hcl 10 mg tablet</b>	1	QL 30/30

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Drug Name	Drug Tier	Requirements / Limits
<b>fluoxetine hcl 20 mg capsule</b>	1	QL 120/30
<b>fluoxetine hcl 20 mg tablet</b>	1	QL 120/30
<b>fluoxetine hcl 40 mg capsule</b>	1	QL 60/30
<b>fluoxetine hcl 60 mg tablet</b>	1	
<b>fluvoxamine er 100 mg capsule</b>	1	QL 90/30
<b>fluvoxamine er 150 mg capsule</b>	1	QL 60/30
<b>fluvoxamine maleate 100 mg tab</b>	1	QL 90/30
<b>fluvoxamine maleate 25 mg tab</b>	1	QL 30/30
<b>fluvoxamine maleate 50 mg tab</b>	1	QL 30/30
<b>olanzapine-fluoxetine 12-25 mg</b>	1	QL 30/30
<b>olanzapine-fluoxetine 12-50 mg</b>	1	QL 30/30
<b>olanzapine-fluoxetine 3-25 mg</b>	1	QL 30/30
<b>olanzapine-fluoxetine 6-25 mg</b>	1	QL 30/30
<b>olanzapine-fluoxetine 6-50 mg</b>	1	QL 30/30
<b>paroxetine er 12.5 mg tablet</b>	1	QL 30/30
<b>paroxetine er 25 mg tablet</b>	1	QL 90/30
<b>paroxetine er 37.5 mg tablet</b>	1	QL 60/30
<b>paroxetine hcl 10 mg tablet</b>	1	QL 30/30
<b>paroxetine hcl 20 mg tablet</b>	1	QL 30/30
<b>paroxetine hcl 30 mg tablet</b>	1	QL 60/30
<b>paroxetine hcl 40 mg tablet</b>	1	QL 30/30
PAXIL 10 MG/5 ML SUSPENSION	2	QL 900/30,ST
PRISTIQ ER 100 MG TABLET	3	QL 30/30
PRISTIQ ER 25 MG TABLET	3	QL 30/30
PRISTIQ ER 50 MG TABLET	3	QL 30/30
<b>sertraline 20 mg/ml oral conc</b>	1	QL 300/30
<b>sertraline hcl 100 mg tablet</b>	1	QL 60/30
<b>sertraline hcl 25 mg tablet</b>	1	QL 30/30
<b>sertraline hcl 50 mg tablet</b>	1	QL 90/30
<b>venlafaxine hcl 100 mg tablet</b>	1	QL 90/30
<b>venlafaxine hcl 25 mg tablet</b>	1	QL 90/30
<b>venlafaxine hcl 37.5 mg tablet</b>	1	QL 90/30
<b>venlafaxine hcl 50 mg tablet</b>	1	QL 90/30
<b>venlafaxine hcl 75 mg tablet</b>	1	QL 90/30
<b>venlafaxine hcl er 150 mg cap</b>	1	QL 60/30
<b>venlafaxine hcl er 150 mg tab</b>	1	QL 60/30
<b>venlafaxine hcl er 225 mg tab</b>	1	QL 30/30
<b>venlafaxine hcl er 37.5 mg cap</b>	1	QL 30/30
<b>venlafaxine hcl er 37.5 mg tab</b>	1	QL 30/30

Drug Name	Drug Tier	Requirements / Limits
<b>venlafaxine hcl er 75 mg cap</b>	1	QL 30/30
<b>venlafaxine hcl er 75 mg tab</b>	1	QL 30/30
VIIBRYD 10 MG TABLET	2	QL 30/30,ST
VIIBRYD 10-20 MG STARTER PACK	3	QL 30/30,ST
VIIBRYD 10-20-40 MG STARTER PACK	2	QL 30/30,ST
VIIBRYD 20 MG TABLET	2	QL 30/30,ST
VIIBRYD 40 MG TABLET	2	QL 30/30,ST
<b>Sulfonamides</b>		
AVC 15% CREAM	3	
BLEPHAMIDE EYE DROPS	2	
BLEPHAMIDE EYE OINTMENT	2	
<b>sulfacetamide 10% eye drops</b>	1	
<b>sulfacetamide 10% eye ointment</b>	1	
<b>sulfacetamide sod 10% top susp</b>	1	
<b>sulfadiazine 500 mg tablet</b>	1	
<b>sulfamethoxazole-tmp ds tablet</b>	1	
<b>sulfamethoxazole-tmp inj vial</b>	1	
<b>sulfamethoxazole-tmp ss tablet</b>	1	
<b>sulfamethoxazole-tmp susp</b>	1	
<b>sulfasalazine 500 mg tablet</b>	1	
<b>sulfasalazine dr 500 mg tab</b>	1	
SULFATRIM PEDIATRIC SUSPENSION	1	
<b>sulf-pred 10-0.23% eye drops</b>	1	
<b>Tetracyclines</b>		
<b>demeclocycline 150 mg tablet</b>	1	
<b>demeclocycline 300 mg tablet</b>	1	
DOXY 100 VIAL	1	
<b>doxycycline 25 mg/5 ml susp</b>	1	
<b>doxycycline hyc 100 mg vial</b>	1	
<b>doxycycline hyc dr 100 mg tab</b>	1	
<b>doxycycline hyc dr 150 mg tab</b>	1	
<b>doxycycline hyc dr 75 mg tab</b>	1	
<b>doxycycline hyclate 100 mg cap</b>	1	
<b>doxycycline hyclate 100 mg tab</b>	1	

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Drug Name	Drug Tier	Requirements / Limits
<b>doxycycline hyclate 20 mg tab</b>	1	
<b>doxycycline hyclate 50 mg cap</b>	1	
<b>doxycycline mono 100 mg cap</b>	1	QL 60/30
<b>doxycycline mono 100 mg tablet</b>	1	
<b>doxycycline mono 150 mg cap</b>	1	
<b>doxycycline mono 150 mg tablet</b>	1	
<b>doxycycline mono 50 mg cap</b>	1	QL 60/30
<b>doxycycline mono 50 mg tablet</b>	1	
<b>doxycycline mono 75 mg capsule</b>	1	QL 60/30
<b>doxycycline mono 75 mg tablet</b>	1	
<b>minocycline 100 mg capsule</b>	1	
<b>minocycline 50 mg capsule</b>	1	
<b>minocycline 75 mg capsule</b>	1	
<b>minocycline hcl 100 mg tablet</b>	1	
<b>minocycline hcl 50 mg tablet</b>	1	
<b>minocycline hcl 75 mg tablet</b>	1	
<b>MONDOXYNE NL 100 MG CAPSULE</b>	1	QL 60/30
<b>MONDOXYNE NL 50 MG CAPSULE</b>	1	QL 60/30
<b>MONDOXYNE NL 75 MG CAPSULE</b>	1	QL 60/30
<b>MORGIDOX 100 MG CAPSULE</b>	1	
<b>MORGIDOX 1X100 MG KIT</b>	2	+
<b>MORGIDOX 2X100 MG KIT</b>	2	+
<b>MORGIDOX 50 MG CAPSULE</b>	1	
<b>tetracycline 250 mg capsule</b>	1	
<b>tetracycline 500 mg capsule</b>	1	
<b>Treatment-Resistant</b>		
<b>clozapine 100 mg tablet</b>	1	QL 270/30
<b>clozapine 200 mg tablet</b>	1	QL 120/30
<b>clozapine 25 mg tablet</b>	1	
<b>clozapine 50 mg tablet</b>	1	
<b>clozapine odt 100 mg tablet</b>	1	QL 270/30
<b>clozapine odt 12.5 mg tablet</b>	1	
<b>clozapine odt 150 mg tablet</b>	1	QL 180/30
<b>clozapine odt 200 mg tablet</b>	4	QL 120/30
<b>clozapine odt 25 mg tablet</b>	1	

Drug Name	Drug Tier	Requirements / Limits
<b>VERSACLOZ 50 MG/ML SUSPENSION</b>	3	QL 540/30
<b>Tricyclics</b>		
<b>amitriptyline hcl 10 mg tab</b>	1	PA HRM
<b>amitriptyline hcl 100 mg tab</b>	1	PA HRM
<b>amitriptyline hcl 150 mg tab</b>	1	PA HRM
<b>amitriptyline hcl 25 mg tab</b>	1	PA HRM
<b>amitriptyline hcl 50 mg tab</b>	1	PA HRM
<b>amitriptyline hcl 75 mg tab</b>	1	PA HRM
<b>amoxapine 100 mg tablet</b>	1	
<b>amoxapine 150 mg tablet</b>	1	
<b>amoxapine 25 mg tablet</b>	1	
<b>amoxapine 50 mg tablet</b>	1	
<b>chlordiazepo-amitriptyl 5-12.5</b>	1	PA HRM
<b>chlordiazepox-amitriptyl 10-25</b>	1	PA HRM
<b>clomipramine 25 mg capsule</b>	1	PA HRM
<b>clomipramine 50 mg capsule</b>	1	PA HRM
<b>clomipramine 75 mg capsule</b>	1	PA HRM
<b>desipramine 10 mg tablet</b>	1	
<b>desipramine 100 mg tablet</b>	1	
<b>desipramine 150 mg tablet</b>	1	
<b>desipramine 25 mg tablet</b>	1	
<b>desipramine 50 mg tablet</b>	1	
<b>desipramine 75 mg tablet</b>	1	
<b>doxepin 150 mg capsule</b>	1	PA HRM
<b>doxepin 50 mg capsule</b>	1	PA HRM
<b>imipramine hcl 10 mg tablet</b>	1	PA HRM
<b>imipramine hcl 25 mg tablet</b>	1	PA HRM
<b>imipramine hcl 50 mg tablet</b>	1	PA HRM
<b>imipramine pamoate 100 mg cap</b>	1	PA HRM
<b>imipramine pamoate 125 mg cap</b>	1	PA HRM
<b>imipramine pamoate 150 mg cap</b>	1	PA HRM
<b>imipramine pamoate 75 mg cap</b>	1	PA HRM
<b>nortriptyline 10 mg/5 ml sol</b>	1	
<b>nortriptyline hcl 10 mg cap</b>	1	
<b>nortriptyline hcl 25 mg cap</b>	1	
<b>nortriptyline hcl 50 mg cap</b>	1	
<b>nortriptyline hcl 75 mg cap</b>	1	
<b>perphen-amitrip 2 mg-10 mg tab</b>	1	PA HRM
<b>perphen-amitrip 2 mg-25 mg tab</b>	1	PA HRM

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Drug Name	Drug Tier	Requirements / Limits
<b>perphen-amiltrip 4 mg-10 mg tab</b>	1	PA HRM
<b>perphen-amiltrip 4 mg-25 mg tab</b>	1	PA HRM
<b>perphen-amiltrip 4 mg-50 mg tab</b>	1	PA HRM
<b>protriptyline hcl 10 mg tablet</b>	1	
<b>protriptyline hcl 5 mg tablet</b>	1	
<b>trimipramine maleate 100 mg cp</b>	1	PA HRM
<b>trimipramine maleate 25 mg cap</b>	1	PA HRM
<b>trimipramine maleate 50 mg cap</b>	1	PA HRM
<b>Vaccines</b>		
ACTHIB VACCINE WITH DILUENT		2
ADACEL TDAP VIAL	2	QL 0.5/365
BCG VACCINE (TICE STRAIN) VIAL	2	
BEXSERO PREFILLED SYRINGE	2	
BOOSTRIX TDAP VACCINE SYRINGE	2	QL 0.5/365
BOOSTRIX TDAP VACCINE VIAL	2	QL 0.5/365
CERVARIX VACCINE SYRINGE	2	
COMVAX VACCINE VIAL	2	
DAPTACEL DTAP VACCINE	2	
<b>diphtheria-tetanus toxoids-ped</b>	2	
ENGERIX-B 10 MCG/0.5 ML PED VL	2	PA,QL 3/365,B/D
ENGERIX-B 20 MCG/ML SYRN	2	PA,QL 8/365,B/D
ENGERIX-B PEDI 10 MCG/0.5 SYRN	2	PA,QL 3/365,B/D
GARDASIL 9 SYRINGE	2	QL 1.5/365
GARDASIL 9 VIAL	2	QL 1.5/365
GARDASIL SYRINGE	2	QL 1.5/365
GARDASIL VIAL	2	QL 1.5/365
HAVRIX 1,440 UNITS/ML VIAL	2	
HAVRIX 720 UNIT/0.5 ML SYRINGE	2	
HIBERIX VACCINE WITH DILUENT	2	
IMOVAX RABIES VACCINE+DILUENT	2	PA,B/D
INFANRIX DTAP VIAL	2	

Drug Name	Drug Tier	Requirements / Limits
IPOV VIAL	2	
IXIARO 6 MCG/0.5 ML SYRINGE	2	
KINRIX TIP-LOK SYRINGE	2	
KINRIX VIAL	2	
MENACTRA VIAL	2	
MENHIBRIX VACCINE VIAL	2	
MENOMUNE-A-C-Y-W-135 W-DILUENT	2	
MENVEO A-C-Y-W-135-DIP VIAL KT	2	
M-M-R II VACCINE WITH DILUENT	2	QL 2/365
PEDIARIX 0.5 ML SYRINGE	2	
PEDVAXHIB VACCINE VIAL	2	
PENTACEL VIAL KIT	2	
PROQUAD VIAL	2	QL 2/365
QUADRACEL DTAP-IPV VIAL	2	
RABAVERT RABIES VACC W-DILUENT	2	
RECOMBIVAX HB 10 MCG/ML SYR	2	PA,QL 3/365,B/D
RECOMBIVAX HB 10 MCG/ML VIAL	2	PA,QL 3/365,B/D
RECOMBIVAX HB 40 MCG/ML VIAL	2	PA,QL 3/365,B/D
RECOMBIVAX HB 5 MCG/0.5 ML SYR	2	PA,QL 3/365,B/D
ROTARIX VACCINE SUSPENSION	2	
ROTAVERSE VACCINE	2	
STAMARIL VIAL	2	QL 1/999
TENIVAC SYRINGE	2	QL 0.5/28
<b>tetanus diphtheria toxoids</b>	2	
THERACYS 81 MG VIAL	2	PA,B/D
TRUMENBA 120 MCG/0.5 ML VACCIN	2	
TWINRIX VACCINE VIAL	2	
TYPHIM VI 25 MCG/0.5 ML SYRNG	2	
TYPHIM VI 25 MCG/0.5 ML VIAL	2	
VAQTA 25 UNITS/0.5 ML SYRINGE	2	

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Drug Name	Drug Tier	Requirements / Limits
VAQTA 50 UNITS/ML	2	
VARIVAX VACCINE WITH DILUENT	2	QL 1/365
VARIZIG 125 UNIT/1.2 ML VIAL	3	QL 12/30
VAXCHORA VACCINE	2	
YF-VAX 1 DOSE VIAL	2	
ZOSTAVAX VIAL	2	QL 1/999
<b>Vasodilators, Direct-acting Arterial</b>		
<i>hydralazine 10 mg tablet</i>	1	
<i>hydralazine 100 mg tablet</i>	1	
<i>hydralazine 20 mg/ml vial</i>	1	
<i>hydralazine 25 mg tablet</i>	1	
<i>hydralazine 50 mg tablet</i>	1	
<i>minoxidil 10 mg tablet</i>	1	
<i>minoxidil 2.5 mg tablet</i>	1	
<b>Vasodilators, Direct-acting Arterial/Venous</b>		
BIDIL TABLET	2	QL 180/30
<i>isosorbide dn 10 mg tablet</i>	1	
<i>isosorbide dn 20 mg tablet</i>	1	
<i>isosorbide dn 30 mg tablet</i>	1	
<i>isosorbide dn 5 mg tablet</i>	1	
<i>isosorbide dn er 40 mg tablet</i>	1	
<i>isosorbide mn 10 mg tablet</i>	1	
<i>isosorbide mn 20 mg tablet</i>	1	
<i>isosorbide mn er 120 mg tab</i>	1	
<i>isosorbide mn er 30 mg tablet</i>	1	
<i>isosorbide mn er 60 mg tablet</i>	1	
MINITRAN 0.1 MG/HR PATCH	1	QL 30/30
MINITRAN 0.2 MG/HR PATCH	1	QL 30/30
MINITRAN 0.4 MG/HR PATCH	1	QL 30/30
MINITRAN 0.6 MG/HR PATCH	1	QL 30/30
NITRO-BID 2% OINTMENT	3	
NITRO-DUR 0.3 MG/HR PATCH	3	
NITRO-DUR 0.8 MG/HR PATCH	3	
<i>nitroglycerin 0.1 mg/hr patch</i>	1	QL 30/30
<i>nitroglycerin 0.2 mg/hr patch</i>	1	QL 30/30
<i>nitroglycerin 0.3 mg tablet sl</i>	1	
<i>nitroglycerin 0.4 mg tablet sl</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>nitroglycerin 0.4 mg/hr patch</i>	1	QL 30/30
<i>nitroglycerin 0.6 mg tablet sl</i>	1	
<i>nitroglycerin 0.6 mg/hr patch</i>	1	QL 30/30
<i>nitroglycerin 5 mg/ml vial</i>	1	
<i>nitroglycerin lingual 0.4 mg</i>	1	
NITROSTAT 0.3 MG TABLET	2	
NITROSTAT 0.4 MG TABLET	2	
NITROSTAT 0.6 MG TABLET	2	
RECTIV 0.4% OINTMENT	3	
<b>Vitamins</b>		
ACTIVE FE TABLET	2	+
BIFERA RX TABLET	2	+
CENTRATEX CAPSULE	2	+
CHROMAGEN SOFTGEL	2	+
CORVITA 150 TABLET	2	+
CORVITE 150 TABLET	2	+
CORVITE FE TABLET	2	+
FE C PLUS TABLET	2	+
FERIVA FA CAPSULE	2	+
FEROCON CAPSULE	2	+
FEROTRINSIC CAPSULE	2	+
FERRALET 90 TABLET	2	+
FERRAPLUS 90 TABLET	2	+
FERREX 150 FORTE CAPSULE	2	+
FERREX 150 FORTE PLUS CAPSULE	2	+
FERREX 28 TABLET	2	+
FERRLECIT 62.5 MG/5 ML VIAL	2	+
FERROCITE PLUS TABLET	2	+
FERROGELS FORTE SOFTGEL	2	+
FLORIVA PLUS 0.25 MG/ML DROPS	1	
FOCALGIN DSS TABLET	2	+
FOLIVANE-F CAPSULE	2	+
FOLIVANE-PLUS CAPSULE	2	+
HEMATINIC-FOLIC ACID TABLET	2	+
HEMATINIC-VITAMIN-MINERAL TAB	2	+
HEMATOGEN FA SOFTGEL	2	+
HEMATOGEN FORTE SOFTGEL	2	+

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Drug Name	Drug Tier	Requirements / Limits
HEMATOGEN SOFTGEL	2	+
HEMATRON-AF SR CAPLET	2	+
HEMAX CAPLET	2	+
HEMETAB IRON SUPPLEMENT TABLET	2	+
HEMOCYTE PLUS CAPSULE	2	+
HEMOCYTE-F ELIXIR	2	+
HEMOCYTE-F TABLET	2	+
ICAR-C PLUS TABLET	2	+
IFEREX 150 FORTE CAPSULE	2	+
INFED 100 MG/2 ML VIAL	2	+
INTEGRA F CAPSULE	2	+
INTEGRA PLUS CAPSULE	2	+
IROSPAN 24/6 TABLET	2	+
MAXARON FORTE TABLET	2	+
MAXFE CAPLET	2	+
MULTIGEN CAPLET	2	+
MULTIGEN FOLIC CAPLET	2	+
MULTIGEN PLUS CAPLET	2	+
<i>multi-vit w-fluor 0.25 mg/ml</i>	1	
<i>multi-vit w-fluor 0.5 mg/ml</i>	1	
<i>multivitamins/fluoride</i>	1	
<i>multivit-fluor 0.25 mg tab chw</i>	1	
<i>multivit-fluor 0.25 mg/ml drop</i>	1	
<i>multivit-fluor 0.5 mg tab chew</i>	1	
<i>multivit-fluor 0.5 mg/ml drop</i>	1	
<i>multivit-fluoride 1 mg tab chw</i>	1	
<i>multivit-iron-fl 0.25 mg/ml</i>	1	
MVC-FLUORIDE 0.25 MG TAB CHEW	1	
MVC-FLUORIDE 0.5 MG TAB CHEW	1	
MVC-FLUORIDE 1 MG TAB CHEW	1	
MYFERON-150 FORTE CAPSULE	2	+
NEPHRON FA TABLET	2	+
NIFEREX TABLET	2	+
NUFERA TABLET	2	+
POLY-IRON 150 FORTE CAPSULE	2	+
<i>polysaccharide iron forte</i>	1	+

Drug Name	Drug Tier	Requirements / Limits
POTABA 500 MG CAPSULE	2	+
PROFERRIN-FORTE TABLET	2	+
PROTECT IRON TABLET	2	+
PUREFE PLUS CAPSULE	2	+
PUREVIT DUALFE PLUS CAPSULE	2	+
QUFLORA PED 0.25 MG/ML DROP	1	
SE-TAN PLUS CAPSULE	2	+
<i>sod fer gluc cplx 62.5 mg/5 ml</i>	1	+
TANDEM PLUS CAPS	2	+
TARON FORTE CAPS	2	+
TL HEM 150 CAPLETS	2	+
TL ICON CAPS	2	+
TL-FLUORIVITE CHEWABLE TABLET	1	
TRICON CAPS	2	+
TRIGELS F FORTE SOFTGEL	2	+
<i>triple-vit w-fluor 0.25 mg/ml</i>	1	
TRI-VIT-FLUOR 0.25 MG/ML DROP	1	
TRI-VIT-FLUOR 0.5 MG/ML DROP	1	
TRI-VIT-FLUOR-IRON 0.25 MG/ML	1	
VENOFER 100 MG/5 ML VIAL	2	+
VENOFER 200 MG/10 ML VIAL	2	+
VENOFER 50 MG/2.5 ML VIAL	2	+
VITAFOL CAPLETS	2	+
VP-PNV-DHA CAPSULE	2	

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abacavir 300 mg tablet	24	ACETASOL HC EAR DROPS	78	acyclovir 200 mg capsule	23
abacavir-lamivudine 600-300 mg	24	acetazolamide 125 mg tablet	44	acyclovir 200 mg/5 ml susp	23
abacavir-lamivudine-zidov tab	24	acetazolamide 250 mg tablet	44	acyclovir 400 mg tablet	23
ABANEU-SL TABLET SL	79	acetazolamide er 500 mg cap	73	acyclovir 5% ointment	23
ABELCET 100 MG/20 ML VIAL	21	acetazolamide sod 500 mg vial	44	acyclovir 500 mg/10 ml vial	23
ABILITY MAINTENA ER 300 MG SYR	8	acetic acid 0.25% irrig soln	57	acyclovir 800 mg tablet	23
ABILITY MAINTENA ER 300 MG VL	8	acetic acid 2% ear solution	78	acyclovir sodium 500 mg vial	23
ABILITY MAINTENA ER 400 MG SYR	8	acetic acid-aluminum drops	78	ADACEL TDAP VIAL	88
ABRAXANE 100 MG VIAL	27	acetylcysteine 10% vial	83	ADAGEN 250 UNITS/ML VIAL	57
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acarbose 25 mg tablet	19	acitretin 17.5 mg capsule	41	adapalene 0.1% lotion	41
acarbose 50 mg tablet	19	acitretin 25 mg capsule	41	adapalene 0.3% gel	41
acebutolol 200 mg capsule	33	ACTEMRA 162 MG/0.9 ML SYRINGE	65	ADCIRCA 20 MG TABLET	82
acebutolol 400 mg capsule	33	ACTEMRA 200 MG/10 ML VIAL	65	ADDYI	83
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acetaminophen-cod #3 tablet	76	ACTIMMUNE 100 MCG/0.5 ML VIAL	65	ADEMPAS 1.5 MG TABLET	82
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		ACTIVE FE TABLET	89	ADEMPAS 2.5 MG TABLET	82

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ADRIAMYCIN 20 MG/10 ML VIAL	27	AK-POLY-BAC EYE OINTMENT	15	alendronate sodium 40 mg tab	67
ADRUCIL 2,500 MG/50 ML VIAL	26	ALA-CORT 1% CREAM	58	alendronate sodium 5 mg tablet	67
ADRUCIL 5 GRAM/100 ML VIAL	26	ALA-QUIN 3-0.5% CREAM	41	alendronate sodium 70 mg tab	67
ADRUCIL 500 MG/10 ML VIAL	26	ALBENZA 200 MG TABLET	14	alfuzosin hcl er 10 mg tablet	32
ADVAIR 100-50 DISKUS	25	albuterol 5 mg/ml solution	37	ALIMTA 100 MG VIAL	26
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ADVAIR HFA 45-21 MCG INHALER	25	albuterol sulfate 2 mg tab	37	allopurinol 300 mg tablet	22
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		alendronate sodium 10 mg tab	67		

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alosetron hcl 1 mg tablet	66	ALTAVERA-28 TABLET	51	amino acids 15% solution	47
ALOXI 0.25 MG/5 ML VIAL	51	ALUNBRIG 30 MG TABLET	69	aminocaproic acid 5 g/20 ml vl	58
ALPHAGAN P 0.1% DROPS	73	ALUVEA 39% CREAM	41	aminophylline 250 mg/10 ml vl	79
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alprazolam 1 mg tablet	32	ALYACEN 1-35-28 TABLET	51	AMINOSYN 8.5% IV SOLUTION	47
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alprazolam er 1 mg tablet	32	amantadine 100 mg capsule	28	AMINOSYN II 7% IV SOLUTION	47
alprazolam er 2 mg tablet	32	amantadine 100 mg tablet	26	AMINOSYN II 8.5% IV SOLUTION	47
alprazolam er 3 mg tablet	32	amantadine 50 mg/5 ml solution	26	AMINOSYN II 8.5%- ELECTROLYTES	47
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alprazolam odt 0.5 mg tab	32	A-METHAPRED 40 MG UNIVIAL	58	AMINOSYN-HBC 7% IV SOLUTION	47
alprazolam odt 1 mg tab	32	AMETHIA 0.15-0.03- 0.01 MG TAB	52	AMINOSYN-PF 10% IV SOLUTION	47
alprazolam odt 2 mg tab	32	AMETHIA LO TABLET	52	AMINOSYN-PF 7% IV SOLUTION	47
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alprazolam xr 1 mg tablet	32	amifostine 500 mg vial	27	amiodarone 150 mg/3 ml vial	14
alprazolam xr 2 mg tablet	32	amikacin sulf 1 gram/4 ml vial	11	amiodarone 450 mg/9 ml vial	14
alprazolam xr 3 mg tablet	32	amikacin sulf 500 mg/2 ml vial	11	amiodarone 900 mg/18 ml vial	14
		amiloride hcl 5 mg tablet	45		

amiodarone hcl 100 mg tablet	14	amlodipine-atorvast 5-10 mg	38	amlod-valsa-hctz 5-160-12.5 mg	38
amiodarone hcl 200 mg tablet	14	amlodipine-atorvast 5-20 mg	38	amlod-valsa-hctz 5-160-25 mg	38
amiodarone hcl 400 mg tablet	14	amlodipine-atorvast 5-40 mg	38	ammonium lactate 12% cream	41
AMITIZA 24 MCG CAPSULES	66	amlodipine-atorvast 5-80 mg	38	ammonium lactate 12% lotion	41
AMITIZA 8 MCG CAPSULE	66	amlodipine-benazepril 10-20 mg	38	AMNESTEEM 10 MG CAPSULE	41
amitriptyline hcl 10 mg tab	87	amlodipine-benazepril 10-40 mg	38	AMNESTEEM 20 MG CAPSULE	42
amitriptyline hcl 100 mg tab	87	amlodipine-benazepril 2.5-10	38	AMNESTEEM 40 MG CAPSULE	42
amitriptyline hcl 150 mg tab	87	amlodipine-benazepril 5-10 mg	38	amox tr-k clv 200-28.5/5 susp	35
amitriptyline hcl 25 mg tab	87	amlodipine-benazepril 5-20 mg	38	amoxapine 100 mg tablet	87
amitriptyline hcl 50 mg tab	87	amlodipine-benazepril 5-40 mg	38	amoxapine 150 mg tablet	87
amitriptyline hcl 75 mg tab	87	amlodipine-olmesartan 10-20 mg	38	amoxapine 25 mg tablet	87
amlodipine besylate 10 mg tab	38	amlodipine-olmesartan 10-40 mg	38	amoxapine 50 mg tablet	87
amlodipine besylate 2.5 mg tab	38	amlodipine-olmesartan 5-20 mg	38	amox-clav 200-28.5 mg tab chew	35
amlodipine besylate 5 mg tab	38	amlodipine-olmesartan 5-40 mg	38	amox-clav 200-28.5 mg/5 ml sus	35
amlodipine-atorvast 10-10 mg	38	amlodipine-valsartan 10-160 mg	38	amox-clav 250-125 mg tablet	35
amlodipine-atorvast 10-20 mg	38	amlodipine-valsartan 10-320 mg	38	amox-clav 250-62.5 mg/5 ml sus	35
amlodipine-atorvast 10-40 mg	38	amlodipine-valsartan 5-160 mg	38	amox-clav 400-57 mg tab chew	35
amlodipine-atorvast 10-80 mg	38	amlodipine-valsartan 5-320 mg	38	amox-clav 400-57 mg/5 ml susp	35
amlodipine-atorvast 2.5-10 mg	38	amlod-valsa-hctz 10-160-12.5mg	38	amox-clav 500-125 mg tablet	35
amlodipine-atorvast 2.5-20 mg	38	amlod-valsa-hctz 10-160-25 mg	38	amox-clav 600-42.9 mg/5 ml sus	35
amlodipine-atorvast 2.5-40 mg	38	amlod-valsa-hctz 10-320-25 mg	38	amox-clav 875-125 mg tablet	35

amox-clav er 1,000-62.5 mg tab	35	ampicillin 250 mg/5 ml susp	35	anastrozole 1 mg tablet	30
amoxicillin 125 mg tab chew	35	ampicillin 500 mg capsule	35	ANDRODERM 2 MG/24HR PATCH	12
amoxicillin 125 mg/5 ml susp	35	ampicillin 500 mg vial	35	ANDRODERM 4 MG/24HR PATCH	12
amoxicillin 200 mg/5 ml susp	35	ampicillin-sulbactam 1.5 gm vl	35	ANDROGEL 1.62% GEL PUMP	12
amoxicillin 250 mg capsule	35	ampicillin-sulbactam 15 gm vl	35	ANDROGEL 1.62%(1.25G) GEL PCKT	12
amoxicillin 250 mg tab chew	35	ampicillin-sulbactam 3 gm vial	35	ANDROGEL 1.62%(2.5G) GEL PCKT	12
amoxicillin 250 mg/5 ml susp	35	AMPYRA ER 10 MG TABLET	71	ANDROXY 10 MG TABLET	12
amoxicillin 400 mg/5 ml susp	35	ANADROL-50 TABLET	11	ANGELIQ 0.25 MG-0.5 MG TABLET	52
amoxicillin 500 mg capsule	35	anagrelide hcl 0.5 mg capsule	36	ANGELIQ 0.5 MG-1 MG TABLET	52
amoxicillin 500 mg tablet	35	anagrelide hcl 1 mg capsule	36	ANIMI-3 CAPSULE	79
amoxicillin 875 mg tablet	35	ANALPRAM ADVANCED 1 OZ KIT	42	ANORO ELLIPTA 62.5-25 MCG INH	37
amphotericin b 50 mg vial	21	ANALPRAM ADVANCED 30 X 4G KIT	42	anucort-hc 25 mg suppository	42
ampicillin 1 gm a-v vial	35	ANALPRAM E 2.5% CREAM KIT	42	ANUSOL-HC 25 MG SUPPOSITORY	42
ampicillin 1 gm vial	35	ANALPRAM HC 1% CREAM	42	ANZEMET 100 MG TABLET	51
ampicillin 10 gm vial	35	ANALPRAM HC 2.5% CREAM	42	ANZEMET 50 MG TABLET	51
ampicillin 125 mg vial	35	ANALPRAM HC 2.5% CRM SINGLES	42	APEXICON E 0.05% CREAM	58
ampicillin 125 mg/5 ml susp	35	ANALPRAM HC 2.5% LOTION	42	APIDRA 100 UNITS/ML VIAL	65
ampicillin 2 gm a-v vial	35	ANALPRAM HC 2.5%-1% CREAM	42	APIDRA SOLOSTAR 100 UNITS/ML	65
ampicillin 2 gm vial	35	ANALPRAM HC 2.5%-1% CRM SINGLE	42	APOKYN 30 MG/3 ML CARTRIDGE	45
ampicillin 250 mg capsule	35	ANALPRAM HC 2.5%-1% LOTION	42	apraclonidine hcl 0.5% drops	73
ampicillin 250 mg vial	35	ANASPAZ 0.125 MG TABLET ODT	29	aprepitant 125 mg capsule	51

aprepitant 125-80-80 mg pack	51	ARANESP 25 MCG/0.42 ML SYRINGE	36	ariPIPRAZOLE odt 15 mg tablet	8
aprepitant 40 mg capsule	51	ARANESP 25 MCG/ML VIAL	36	ARISTADA ER 1064 MG/3.9 ML SYR	8
aprepitant 80 mg capsule	51	ARANESP 300 MCG/0.6 ML SYRINGE	36	ARISTADA ER 441 MG/1.6 ML SYRN	8
APRI 28 DAY TABLET	52	ARANESP 300 MCG/ML VIAL	36	ARISTADA ER 662 MG/2.4 ML SYRN	8
APRISO ER 0.375 GRAM CAPSULE	11	ARANESP 40 MCG/0.4 ML SYRINGE	36	ARISTADA ER 882 MG/3.2 ML SYRN	8
APTIOM 200 MG TABLET	17	ARANESP 40 MCG/ML VIAL	36	armodafinil 150 mg tablet	84
APTIOM 400 MG TABLET	17	ARANESP 500 MCG/1 ML SYRINGE	36	armodafinil 200 mg tablet	84
APTIOM 600 MG TABLET	17	ARANESP 60 MCG/0.3 ML SYRINGE	36	armodafinil 250 mg tablet	84
APTIOM 800 MG TABLET	17	ARANESP 60 MCG/ML VIAL	36	armodafinil 50 mg tablet	84
APTIVUS 100 MG/ML SOLUTION	24	ARBINOXA 4 MG TABLET	23	ARMOUR THYROID 120 MG TABLET	61
APTIVUS 250 MG CAPSULE	24	ARCALYST 220 MG INJECTION	65	ARMOUR THYROID 15 MG TABLET	61
AQUA GLYCOLIC HC 2% KIT	42	ARCAPTA NEOHALER 75 MCG CAP	37	ARMOUR THYROID 180 MG TABLET	61
AQUORAL SPRAY	42	ARESTIN 1 MG MICROSPHERE	41	ARMOUR THYROID 240 MG TABLET	61
ARALAST NP 1,000 MG VIAL	83	ariPIPRAZOLE 1 mg/ml solution	8	ARMOUR THYROID 30 MG TABLET	61
ARALAST NP 500 MG VIAL	83	ariPIPRAZOLE 10 mg tablet	8	ARMOUR THYROID 300 MG TABLET	61
ARANELLE 28 TABLET	52	ariPIPRAZOLE 15 mg tablet	8	ARMOUR THYROID 60 MG TABLET	61
ARANESP 10 MCG/0.4 ML SYRINGE	36	ariPIPRAZOLE 2 mg tablet	8	ARMOUR THYROID 90 MG TABLET	61
ARANESP 100 MCG/0.5 ML SYRINGE	36	ariPIPRAZOLE 20 mg tablet	8	ARNUITY ELLIPTA 100 MCG INH	25
ARANESP 100 MCG/ML VIAL	36	ariPIPRAZOLE 30 mg tablet	8	ARNUITY ELLIPTA 200 MCG INH	25
ARANESP 150 MCG/0.3 ML SYRINGE	36	ariPIPRAZOLE 5 mg tablet	8	ARRANON 250 MG/50 ML VIAL	26
ARANESP 200 MCG/0.4 ML SYRINGE	36	ariPIPRAZOLE odt 10 mg tablet	8	ARZERRA 1,000 MG/50 ML VIAL	70
ARANESP 200 MCG/ML VIAL	36				

ARZERRA 100 MG/5 ML VIAL	70	atenolol 50 mg tablet	33	atropine 0.1 mg/ml syringe	29
ASACOL HD DR 800 MG TABLET	11	atenolol-chlorthalidone 100-25	33	atropine 0.4 mg/0.5 ml ampul	29
ASCOMP WITH CODEINE CAPSULE	76	atenolol-chlorthalidone 50-25	33	atropine 1 mg/ml vial	29
ASHLYNA 0.15-0.03-0.01 MG TAB	52	ATGAM 50 MG/ML AMPUL	64	atropine 1% eye drops	73
ASMANEX HFA 100 MCG INHALER	25	atomoxetine hcl 10 mg capsule	31	atropine 1% eye ointment	73
ASMANEX HFA 200 MCG INHALER	25	atomoxetine hcl 100 mg capsule	31	atropine 8 mg/20 ml vial	29
ASMANEX TWISTHALER 110 MCG #30	25	atomoxetine hcl 18 mg capsule	31	ATROVENT HFA INHALER	37
ASMANEX TWISTHALER 110 MCG #7	25	atomoxetine hcl 25 mg capsule	31	AUBAGIO 14 MG TABLET	71
ASMANEX TWISTHALER 220 MCG #14	25	atomoxetine hcl 40 mg capsule	31	AUBAGIO 7 MG TABLET	71
ASMANEX TWISTHALER 220 MCG #30	25	atomoxetine hcl 60 mg capsule	31	AUBRA-28 TABLET	52
ASMANEX TWISTHALER 220 MCG #60	25	atomoxetine hcl 80 mg capsule	31	AUGMENTIN 125-31.25 MG/5 ML	35
ASMANEX TWISTHALR 220 MCG #120	25	ATOPICLAIR CREAM	42	AURSTAT ANTI-ITCH HYDROGEL	42
aspirin-caff-dihydrocodein cap	76	atorvastatin 10 mg tablet	46	AURYXIA 210 MG TABLET	78
aspirin-dipyridam er 25-200 mg	79	atorvastatin 20 mg tablet	46	AVANDIA 2 MG TABLET	19
ASTAGRAF XL 0.5 MG CAPSULE	63	atorvastatin 40 mg tablet	46	AVANDIA 4 MG TABLET	19
ASTAGRAF XL 1 MG CAPSULE	63	atorvastatin 80 mg tablet	46	AVASTIN 100 MG/4 ML VIAL	70
ASTAGRAF XL 5 MG CAPSULE	63	atovaquone 750 mg/5 ml susp	29	AVASTIN 400 MG/16 ML VIAL	70
atenolol 100 mg tablet	33	atovaquone-proguanil 250-100	29	AVC 15% CREAM	86
atenolol 25 mg tablet	33	atovaquone-proguanil 62.5-25	29	AVELOX IV 400 MG/250 ML	82
		ATRIPLA TABLET	24	AVIANE-28 TABLET	52
		atropine 0.05 mg/ml syringe	29	AVITA 0.025% CREAM	42
		atropine 0.1 mg/ml abboject	40		

AVITA 0.025% GEL	42	azithromycin 250 mg tablet	67	BANZEL 40 MG/ML SUSPENSION	84
AVONEX 30 MCG VIAL KIT	71	azithromycin 500 mg tablet	67	BANZEL 400 MG TABLET	84
AVONEX PEN 30 MCG/0.5 ML KIT	71	azithromycin 600 mg tablet	67	BARACLUDE 0.05 MG/ML SOLUTION	22
AVONEX PREFILLED SYR 30 MCG KT	71	azithromycin i.v. 500 mg vial	67	BAVENCIO 200 MG/10 ML VIAL	70
azacitidine 100 mg vial	27	AZOPT 1% EYE DROPS	73	BCG (TICE STRAIN) VIAL	27
AZACTAM-ISO-OSMOT 1 GM/50 ML	35	aztreonam 1 gm vial	35	BCG VACCINE (TICE STRAIN) VIAL	88
AZACTAM-ISO-OSMOT 2 GM/50 ML	35	aztreonam 2 gm vial	35	BD ECLIPSE 30GX1/2" SYRINGE	68
AZASAN 100 MG TABLET	63	AZUPHEN MB CAPSULE	29	BD INSULIN SYR 0.3 ML 8MMX31G	68
AZASAN 75 MG TABLET	63	AZURETTE 28 DAY TABLET	52	BD INSULIN SYR 0.5 ML 30GX1/2"	68
AZASITE 1% EYE DROPS	67	B-12 COMPLIANCE INJ KIT	79	BD INSULIN SYR 1 ML 29GX1/2"	68
azathioprine 50 mg tablet	63	BACIIM 50,000 UNIT VIAL	15	BD INSULIN SYR 1 ML 31GX5/16"	68
azathioprine sod 100 mg vial	63	bacitracin 50,000 unit vial	15	BD SAFETYGLIDE SYRINGE 27GX5/8	68
azelastine 0.1% (137 mcg) spry	23	bacitracin 500 unit/gm ophth	15	BD ULTRA-FINE NDL 12.7MMX29G	68
azelastine 0.15% nasal spray	23	bacitracin-polymyxin eye oint	15	BD ULTRA-FINE PEN NDL 4MMX32G	68
azelastine hcl 0.05% drops	73	baclofen 10 mg tablet	30	BD ULTRA-FINE PEN NDL 5MMX31G	68
AZELEX 20% CREAM	42	baclofen 20 mg tablet	30	B-DONNA TABLET	30
AZILECT 0.5 MG TABLET	70	BACMIN CAPLET	79	BEKYREE 28 DAY TABLET	52
AZILECT 1 MG TABLET	70	bacteriostatic saline vial	48	BELEODAQ 500 MG VIAL	27
azithromycin 1 gm pwd packet	67	BACTROBAN NASAL 2% OINTMENT	15	belladonna-opium 16.2-30 supp	29
azithromycin 100 mg/5 ml susp	67	balsalazide disodium 750 mg cp	11	belladonna-opium 16.2-60 supp	29
azithromycin 200 mg/5 ml susp	67	BALZIVA 28 TABLET	52	belladonna-phenobarbital tab	30
		BANZEL 200 MG TABLET	84	benazepril hcl 10 mg tablet	13

benazepril hcl 20 mg tablet	13	BENZEPRO 9.8% FOAM	42	BETASERON 0.3 MG KIT	71
benazepril hcl 40 mg tablet	13	benzonatate capsules	40	betaxolol 10 mg tablet	33
benazepril hcl 5 mg tablet	13	benzoyl peroxide 5.3% foam	42	betaxolol 20 mg tablet	33
benazepril-hctz 10-12.5 mg tab	13	benzoyl peroxide 9.8% foam	42	betaxolol hcl 0.5% eye drop	73
benazepril-hctz 20-12.5 mg tab	13	benztropine 2 mg/2 ml ampule	16	bethanechol 10 mg tablet	57
benazepril-hctz 20-25 mg tab	13	benztropine mes 0.5 mg tab	16	bethanechol 25 mg tablet	57
benazepril-hctz 5-6.25 mg tab	13	benztropine mes 1 mg tablet	16	bethanechol 5 mg tablet	57
BENDEKA 100 MG/4 ML VIAL	10	benztropine mes 2 mg tablet	16	bethanechol 50 mg tablet	57
BENICAR 20 MG TABLET	12	BERINERT 500 UNIT KIT	12	BETHKIS 300 MG/4 ML AMPULE	41
BENICAR 40 MG TABLET	12	BESIVANCE 0.6% SUSP	82	BETIMOL 0.25% EYE DROPS	73
BENICAR 5 MG TABLET	12	betamethasone ac-sp 6 mg/ml vl	58	BETIMOL 0.5% EYE DROPS	73
BENICAR HCT 20-12.5 MG TABLET	12	betamethasone dp 0.05% crm	58	BETOPTIC S 0.25% EYE DROPS	73
BENICAR HCT 40-12.5 MG TABLET	12	betamethasone dp 0.05% lot	58	bexarotene 75 mg capsule	83
BENICAR HCT 40-25 MG TABLET	12	betamethasone dp aug 0.05% oint	58	BEXSERO PREFILLED SYRINGE	88
BENLYSTA 120 MG VIAL	63	betamethasone dp aug 0.05% crm	58	bicalutamide 50 mg tablet	14
BENLYSTA 400 MG VIAL	63	betamethasone dp aug 0.05% gel	58	BICILLIN C-R 1.2 MILLION UNIT	35
BENSAL HP 3% OINTMENT	21	betamethasone dp aug 0.05% lot	58	BICILLIN C-R 900-300 SYRINGE	35
BENZEFOAM 5.3% EMOLlient FOAM	42	betamethasone dp aug 0.05% oin	58	BICILLIN L-A 1,200,000 UNITS	35
BENZEFOAM ULTRA 9.8% FOAM	42	betamethasone va 0.1% cream	58	BICILLIN L-A 2,400,000 UNITS	35
BENZEPRO 5.3% EMOLlient FOAM	42	betamethasone va 0.1% lotion	58	BICILLIN L-A 600,000 UNIT/ML	35
BENZEPRO 7% CREAMY WASH	42	betamethasone valer 0.1% ointm	58	BICNU 100 MG VIAL	10
		betamethasone valer 0.12% foam	58		

BIDIL TABLET	89	BOSULIF 100 MG TABLET	69	BRIVIACT 100 MG TABLET	18
BIFERA RX TABLET	79	BOSULIF 500 MG TABLET	69	BRIVIACT 25 MG TABLET	18
BIFERA RX TABLET	89	BOTOX 100 UNITS VIAL	68	BRIVIACT 50 MG TABLET	18
BILTRICIDE 600 MG TABLET	14	BOTOX 200 UNITS VIAL	68	BRIVIACT 50 MG/5 ML VIAL	18
bimatoprost 0.03% eye drops	73	BP 5.3% FOAM	42	BRIVIACT 75 MG TABLET	18
BINOSTO 70 MG TABLET EFF	67	BP 9.8% FOAM	42	bromfed dm cough syrup	40
BIOCEL TABLET	79	BP CLEANSING WASH	42	bromfenac sodium 0.09% eye drp	74
BIONECT 0.2% GEL	42	BP VIT 3 CAPSULE	79	bromocriptine 2.5 mg tablet	45
bisoprolol fumarate 10 mg tab	33	BP WASH 7% LIQUID	42	bromocriptine 5 mg capsule	45
bisoprolol fumarate 5 mg tab	33	BP WASH ACNE 4% TREATMENT PACK	42	bromphenir-pseudoephed-dm syr	41
bisoprolol-hctz 10-6.25 mg tab	33	BP WASH ACNE 8% TREATMENT PACK	42	BROVANA 15 MCG/2 ML SOLUTION	37
bisoprolol-hctz 2.5-6.25 mg tb	33	bp-50% urea emulsion	42	BUCALSEP SOLUTION	41
bisoprolol-hctz 5-6.25 mg tab	33	B-PLEX PLUS TABLET	79	BUCALSEP SPRAY	41
BIVIGAM LIQUID 10% VIAL	64	BPO 4% CREAMY WASH PACK	42	budesonide 0.25 mg/2 ml susp	25
bleomycin sulfate 15 unit vial	27	BPO 8% CREAMY WASH PACK	42	budesonide 0.5 mg/2 ml susp	25
bleomycin sulfate 30 unit vial	27	BREO ELLIPTA 100-25 MCG INH	25	budesonide 1 mg/2 ml inh susp	25
BLEPHAMIDE EYE DROPS	86	BREO ELLIPTA 200-25 MCG INH	25	budesonide 32 mcg nasal spray	25
BLEPHAMIDE EYE OINTMENT	86	BRIELLYN TABLET	52	budesonide ec 3 mg capsule	57
BLISOVI 24 FE TABLET	52	BRILINTA 60 MG TABLET	79	bumetanide 0.25 mg/ml vial	44
BLISOVI FE 1.5-30 TABLET	52	BRILINTA 90 MG TABLET	79	bumetanide 0.5 mg tablet	44
BLISOVI FE 1-20 TABLET	52	brimonidine 0.2% eye drop	73	bumetanide 1 mg tablet	45
BOOSTRIX TDAP VACCINE SYRINGE	88	brimonidine tartrate 0.15% drp	73	bumetanide 2 mg tablet	45
BOOSTRIX TDAP VACCINE VIAL	88	BRIVIACT 10 MG TABLET	18		
		BRIVIACT 10 MG/ML ORAL SOLN	18		

BUPAP 50 MG-300 MG TABLET	11	buspirone hcl 10 mg tablet	30	BUTRANS 15 MCG/HR PATCH	74
BUPHENYL 500 MG TABLET	57	buspirone hcl 15 mg tablet	30	BUTRANS 20 MCG/HR PATCH	74
buprenorphine 0.3 mg/ml syring	74	buspirone hcl 30 mg tablet	30	BUTRANS 5 MCG/HR PATCH	74
buprenorphine 0.3 mg/ml vial	74	buspirone hcl 5 mg tablet	30	BUTRANS 7.5 MCG/HR PATCH	74
buprenorphine 10 mcg/hr patch	74	buspirone hcl 7.5 mg tablet	30	BYDUREON 2 MG PEN INJECT	19
buprenorphine 15 mcg/hr patch	74	busulfan 60 mg/10 ml vial	10	BYDUREON 2 MG VIAL	19
buprenorphine 2 mg tablet sl	78	BUSULFEX 60 MG/10 ML VIAL	10	BYETTA 10 MCG DOSE PEN INJ	19
buprenorphine 20 mcg/hr patch	74	butalb-acetamin-caff 50-300-40	11	BYETTA 5 MCG DOSE PEN INJ	19
buprenorphine 5 mcg/hr patch	74	butalb-acetamin-caff 50-325-40	12	BYSTOLIC 10 MG TABLET	33
buprenorphine 7.5 mcg/hr patch	74	butalb-acetaminoph-caff-codein	76	BYSTOLIC 2.5 MG TABLET	33
buprenorphine 8 mg tablet sl	78	butalb-caff-acetaminoph-codein	76	BYSTOLIC 20 MG TABLET	33
buprenorphin-naloxon 8-2 mg sl	78	butalbit-acetaminophen-caff cp	12	BYSTOLIC 5 MG TABLET	33
buprenorphan-naloxn 2-0.5 mg sl	78	butalbital comp-codeine #3 cap	76	BYVALSON 5 MG-80 MG TABLET	33
BUPROBAN 150 MG TABLET	84	butalbital-acetaminophn 50-300	12	cabergoline 0.5 mg tablet	62
bupropion hcl 100 mg tablet	18	butalbital-acetaminophn 50-325	12	CABOMETYX 20 MG TABLET	69
bupropion hcl 75 mg tablet	18	butalbital-asa-caffeine cap	12	CABOMETYX 40 MG TABLET	69
bupropion hcl sr 100 mg tablet	18	BUTISOL SODIUM 30 MG TABLET	84	CABOMETYX 60 MG TABLET	69
bupropion hcl sr 150 mg tablet	84	butorphanol 1 mg/ml vial	76	calcipotriene 0.005% cream	42
bupropion hcl sr 200 mg tablet	18	butorphanol 10 mg/ml spray	76	calcipotriene 0.005% ointment	42
bupropion hcl xl 150 mg tablet	18	butorphanol 2 mg/ml vial	76	calcipotriene 0.005% solution	42
bupropion hcl xl 300 mg tablet	18	BUTRANS 10 MCG/HR PATCH	74	calcitonin-salmon 200 units sp	67

CALCITRENE 0.005% OINTMENT	42	candesartan-hctz 32-12.5 mg tb	12	carbamazepine er 100 mg tablet	85
calcitriol 0.25 mcg capsule	67	candesartan-hctz 32-25 mg tab	12	carbamazepine er 200 mg cap	85
calcitriol 0.5 mcg capsule	67	CAPACET CAPSULE	12	carbamazepine er 200 mg tablet	85
calcitriol 1 mcg/ml ampul	67	CAPASTAT SULFATE 1 GM VIAL	30	carbamazepine er 300 mg cap	85
calcitriol 1 mcg/ml ampul	79	CAPHOSOL SOLUTION	42	carbamazepine er 400 mg tablet	85
calcitriol 1 mcg/ml solution	67	CAPITAL WITH CODEINE SUSP	76	carbidopa 25 mg tablet	46
calcitriol 3 mcg/g ointment	42	CAPRELSA 100 MG TABLET	69	carbidopa-levo 10-100 mg odt	46
calcitriol capsule, soln	79	CAPRELSA 300 MG TABLET	69	carbidopa-levo 25-100 mg odt	46
calcium acetate 667 mg capsule	78	captopril 100 mg tablet	13	carbidopa-levo 25-250 mg odt	46
calcium acetate 667 mg tablet	78	captopril 12.5 mg tablet	13	carbidopa-levo er 25-100 tab	46
CAMILA 0.35 MG TABLET	81	captopril 25 mg tablet	13	carbidopa-levo er 50-200 tab	46
CAMPTOSAR 300 MG/15 ML VIAL	27	captopril 50 mg tablet	13	carbidopa-levodopa 10-100 tab	46
CAMRESE 0.15-0.03-0.01 MG TAB	52	captopril-hctz 25-15 mg tablet	13	carbidopa-levodopa 25-100 tab	46
CAMRESE LO TABLET	52	captopril-hctz 25-25 mg tablet	13	carbidopa-levodopa 25-250 tab	46
CANASA 1,000 MG SUPPOSITORY	11	captopril-hctz 50-15 mg tablet	13	carbidopa-levodopa-enta 100 mg	46
CANCIDAS IV 50 MG VIAL	21	captopril-hctz 50-25 mg tablet	13	carbidopa-levodopa-enta 125 mg	46
CANCIDAS IV 70 MG VIAL	21	CARAFATE 1 GM/10 ML SUSP	81	carbidopa-levodopa-enta 150 mg	46
candesartan cilexetil 16 mg tb	12	CARBAGLU 200 MG DISPER TABLET	48	carbidopa-levodopa-enta 200 mg	46
candesartan cilexetil 32 mg tb	12	carbamazepine 100 mg tab chew	84	carbidopa-levodopa-enta 50 mg	46
candesartan cilexetil 4 mg tab	12	carbamazepine 100 mg/5 ml susp	85	carbidopa-levodopa-enta 75 mg	46
candesartan cilexetil 8 mg tab	12	carbamazepine 200 mg tablet	85	carbinoxamine 4 mg/5 ml liquid	23
candesartan-hctz 16-12.5 mg tb	12	carbamazepine er 100 mg cap	85		

carbinoxamine maleate 4 mg tab	23	CAYSTON 75 MG INHAL SOLUTION	41	cefdinir 125 mg/5 ml susp	34
carboplatin 150 mg/15 ml vial	27	CAZIANT 28 DAY TABLET	52	cefdinir 250 mg/5 ml susp	34
carboplatin 450 mg/45 ml vial	27	cefaclor 125 mg/5 ml susp	33	cefdinir 300 mg capsule	34
carboplatin 50 mg/5 ml vial	27	cefaclor 250 mg capsule	33	cefditoren pivoxil 200 mg tab	34
carboplatin 600 mg/60 ml vial	27	cefaclor 250 mg/5 ml susp	33	cefepime 1 gm injection	34
CARIMUNE NF 12 GM VIAL	64	cefaclor 375 mg/5 ml suspen	33	cefepime 2 gm injection	34
CARIMUNE NF 6 GM VIAL	64	cefaclor 500 mg capsule	33	cefepime hcl 1 gm vial	34
carisoprodol-aspirin 200- 325 mg	84	cefaclor er 500 mg tablet	33	cefepime hcl 2 gram vial	34
carisoprodol 250 mg tablet	84	cefadroxil 1 gm tablet	33	cefepime-dextrose 1 gm/50 ml	34
carisoprodol 350 mg tablet	84	cefadroxil 250 mg/5 ml susp	34	cefepime-dextrose 2 gm/50 ml	34
carisoprodol-aspirin- codein tb	76	cefadroxil 500 mg capsule	34	cefixime 100 mg/5 ml susp	34
CARNITOR 1 GM/5 ML VIAL	68	cefadroxil 500 mg/5 ml susp	34	cefixime 200 mg/5 ml susp	34
carteolol hcl 1% eye drops	73	cefazolin 1 g/50 ml- dextrose	34	cefotaxime sodium 1 gm vial	34
CARTIA XT 120 MG CAPSULE	38	cefazolin 1 gm add-van vial	34	cefotaxime sodium 10 gm vial	34
CARTIA XT 180 MG CAPSULE	38	cefazolin 1 gm vial	34	cefotaxime sodium 2 gm vial	34
CARTIA XT 240 MG CAPSULE	38	cefazolin 10 gm vial	34	cefotaxime sodium 500 mg vial	34
CARTIA XT 300 MG CAPSULE	38	cefazolin 2 g/100 ml- dextrose	34	cefotetan 1 gm vial	35
carvedilol 12.5 mg tablet	33	cefazolin 2 g/50 ml- dextrose	34	cefotetan 10 gm vial	35
carvedilol 25 mg tablet	33	cefazolin 500 mg vial	34	cefotetan 2 gm vial	35
carvedilol 3.125 mg tablet	33	cefazolin sod 100 gm bulk bag	34	cefotetan-dextr 1 g duplex bag	34
carvedilol 6.25 mg tablet	33	cefazolin sod 300 gm bulk bag	34	cefotetan-dextr 2 g duplex bag	34
CAVERJECT	83				

cefoxitin 1 gm piggyback bag	34	ceftriaxone 1 gm-d5w bag	34	CELLCEPT 500 MG TABLET	63
cefoxitin 1 gm vial	34	ceftriaxone 10 gm vial	34	CELONTIN 300 MG KAPSEAL	39
cefoxitin 10 gm vial	34	ceftriaxone 2 gm add vial	34	CEM-UREA 45% PRE- FILLED APPL	42
cefoxitin 2 gm piggyback bag	34	ceftriaxone 2 gm piggyback	34	CENTRATEX CAPSULE	79
cefoxitin 2 gm vial	34	ceftriaxone 2 gm vial	34	CENTRATEX CAPSULE	89
cefpodoxime 100 mg tablet	34	ceftriaxone 2 gm-d5w bag	34	cephalexin 125 mg/5 ml susp	34
cefpodoxime 100 mg/5 ml susp	34	ceftriaxone 250 mg vial	34	cephalexin 250 mg capsule	34
cefpodoxime 200 mg tablet	34	ceftriaxone 500 mg vial	34	cephalexin 250 mg tablet	34
cefpodoxime 50 mg/5 ml susp	34	cefuroxime 750 mg/50 ml bag	34	cephalexin 250 mg/5 ml susp	34
cefprozil 125 mg/5 ml susp	34	cefuroxime axetil 250 mg tab	34	cephalexin 500 mg capsule	34
cefprozil 250 mg tablet	34	cefuroxime axetil 500 mg tab	34	cephalexin 500 mg tablet	34
cefprozil 250 mg/5 ml susp	34	cefuroxime sod 1.5 gm vial	34	cephalexin 750 mg capsule	34
cefprozil 500 mg tablet	34	cefuroxime sod 7.5 gm vial	34	CEREZYME 400 UNITS VIAL	57
ceftazidime 1 gm piggyback	34	cefuroxime sod 75 gm bulk bag	34	CERVARIX VACCINE SYRINGE	88
ceftazidime 1 gm vial	34	cefuroxime sod 750 mg vial	34	CESIA 28 DAY TABLET	52
ceftazidime 2 gm piggyback	34	celecoxib 100 mg capsule	72	cevimeline hcl 30 mg capsule	41
ceftazidime 2 gm vial	34	celecoxib 200 mg capsule	72	CHANTIX 0.5 MG TABLET	84
ceftazidime 6 gm vial	34	celecoxib 400 mg capsule	72	CHANTIX 1 MG CONT MONTH BOX	84
ceftibuten 180 mg/5 ml susp	34	celecoxib 50 mg capsule	72	CHANTIX 1 MG TABLET	84
ceftibuten 400 mg capsule	34	CELLCEPT 200 MG/ML ORAL SUSP	63	CHANTIX STARTING MONTH BOX	84
ceftriaxone 1 gm piggyback	34	CELLCEPT 250 MG CAPSULE	63	CHATEAL-28 TABLET	52
ceftriaxone 1 gm vial	34			CHEMET 100 MG CAPSULE	50

chenodal 250 mg tablet	56	chlorpromazine 50 mg tablet	7	ciclopirox 0.77% gel	21
cheratussin ac syrup	41	chlorpropamide 100 mg tablet	19	ciclopirox 0.77% topical susp	21
cheratussin dac syrup	41	chlorpropamide 250 mg tablet	19	ciclopirox 1% shampoo	21
chloramphen na succ 1 gm vl	15	chlorthalidone 25 mg tablet	45	ciclopirox 8% solution	21
chlordiazepo-amitriptyl 5-12.5	87	chlorthalidone 50 mg tablet	45	CIDALEAZE 3% CREAM	42
chlordiazepox-amitriptyl 10-25	87	chlorzoxazone 500 mg tablet	84	cidofovir 375 mg/5 ml vial	18
chlordiazepoxide 10 mg capsule	32	cholestyramine light packet	47	CIFEREX 3,775 UNIT-1 MG CAP	79
chlordiazepoxide 25 mg capsule	32	cholestyramine light powder	47	cilostazol 100 mg tablet	79
chlordiazepoxide 5 mg capsule	32	cholestyramine packet	47	cilostazol 50 mg tablet	79
chlordiazepoxide-clidinium cap	30	cholestyramine powder	47	CILOXAN 0.3% OINTMENT	82
chlorhexidine 0.12% rinse	41	choline mag trisal liquid	72	cimetidine 200 mg tablet	58
chloroquine ph 250 mg tablet	29	chorionic gonad 10,000 unit vl	60	cimetidine 300 mg tablet	58
chloroquine ph 500 mg tablet	29	CHROMAGEN SOFTGEL	89	cimetidine 300 mg/5 ml soln	58
chlorothiazide 250 mg tablet	45	CIALIS 10 MG	83	cimetidine 400 mg tablet	58
chlorothiazide 500 mg tablet	45	CIALIS 2.5 MG	83	cimetidine 800 mg tablet	58
chlorothiazide sod 500 mg vial	45	CIALIS 2.5 MG TABLET	32	CINRYZE 500 UNIT VIAL	12
chlorpromazine 10 mg tablet	7	CIALIS 20 MG	83	CIPRO HC OTIC SUSPENSION	82
chlorpromazine 100 mg tablet	7	CIALIS 5 MG	84	CIPRODEX OTIC SUSPENSION	82
chlorpromazine 200 mg tablet	7	CIALIS 5 MG TABLET	32	ciprofloxacin 0.3% eye drop	82
chlorpromazine 25 mg tablet	7	CICLODAN 0.77% CREAM	21	ciprofloxacin 200 mg/20 ml vl	82
chlorpromazine 25 mg/ml amp	7	CICLODAN 0.77% CREAM KIT	21	ciprofloxacin 250 mg/5 ml susp	82
		CICLODAN 8% SOLUTION	21		
		ciclopirox 0.77% cream	21		

ciprofloxacin 400 mg/40 ml vl	82	CLARAVIS 40 MG CAPSULE	42	clindamycin hcl 150 mg capsule	15
ciprofloxacin 500 mg/5 ml susp	82	CLARINEX-D 12 HOUR TABLET	23	clindamycin hcl 300 mg capsule	15
ciprofloxacin er 1,000 mg tab	82	clarithromycin 125 mg/5 ml sus	67	clindamycin hcl 75 mg capsule	15
ciprofloxacin er 500 mg tablet	82	clarithromycin 250 mg tablet	67	clindamycin pediatr 75 mg/5 ml	15
ciprofloxacin hcl 100 mg tab	82	clarithromycin 250 mg/5 ml sus	67	clindamycin ph 1% gel	15
ciprofloxacin hcl 250 mg tab	82	clarithromycin 500 mg tablet	67	clindamycin ph 1% solution	15
ciprofloxacin hcl 500 mg tab	82	clarithromycin er 500 mg tab	67	clindamycin ph 300 mg/2 ml vl	15
ciprofloxacin hcl 750 mg tab	82	clemastine fum 2.68 mg tab	23	clindamycin ph 600 mg/4 ml vl	15
ciprofloxacn-d5w 200 mg/100 ml	82	CLEOCIN 100 MG VAGINAL OVULE	15	clindamycin ph 9 g/60 ml vial	15
ciprofloxacn-d5w 400 mg/200 ml	82	CLIMARA PRO PATCH	52	clindamycin ph 900 mg/6 ml vl	15
cisplatin 100 mg/100 ml vial	27	clind ph-benzoyl perox 1.2-5%	42	clindamycin phos 1% ppledget	15
cisplatin 200 mg/200 ml vial	27	CLINDACIN ETZ 1% PLEDGET	15	clindamycin phosp 1% lotion	15
cisplatin 50 mg/50 ml vial	27	CLINDACIN P 1% PLEDGETS	15	clindamycin phosphate 1% foam	15
citalopram hbr 10 mg tablet	85	CLINDAMAX 1% GEL	15	clindamycin-benzoyl peroxy 1-5%	42
citalopram hbr 10 mg/5 ml soln	85	clindamycin 150 mg/ml addvan	15	clindamycin-d5w 300 mg/50 ml	15
citalopram hbr 20 mg tablet	85	clindamycin 2% vaginal cream	15	clindamycin-d5w 600 mg/50 ml	15
citalopram hbr 40 mg tablet	85	clindamycin 300 mg/2 ml addvan	15	clindamycin-d5w 900 mg/50 ml	15
cladribine 10 mg/10 ml vial	26	clindamycin 300 mg/50 ml-ns	15	clinda-tretinoin 1.2%-0.025%	42
CLARAVIS 10 MG CAPSULE	42	clindamycin 600 mg/50 ml-ns	15	CLINDESSE 2% VAGINAL CREAM	15
CLARAVIS 20 MG CAPSULE	42	clindamycin 900 mg/50 ml-ns	15	CLINIMIX 2.75%-5% SOLUTION	48
CLARAVIS 30 MG CAPSULE	42	clindamycin 900 mg/6 ml addvan	15	CLINIMIX 4.25%-10% SOLUTION	48

CLINIMIX 4.25%-20% SOLUTION	48	clobetasol emollient 0.05% crm	59	clonidine 0.1 mg/day patch	10
CLINIMIX 4.25%-25% SOLUTION	48	clobetasol emolnt 0.05% foam	59	clonidine 0.2 mg/day patch	10
CLINIMIX 4.25%-5% SOLUTION	48	clobetasol emulsion 0.05% foam	59	clonidine 0.3 mg/day patch	10
CLINIMIX 5%-15% SOLUTION	48	clobetasol prop 0.05% foam	59	clonidine hcl 0.1 mg tablet	10
CLINIMIX 5%-20% SOLUTION	48	clobetasol prop 0.05% spray	59	clonidine hcl 0.2 mg tablet	10
CLINIMIX 5%-25% SOLUTION	48	clocortolone 0.1% cream pump	59	clonidine hcl 0.3 mg tablet	10
CLINIMIX E 2.75%-10% SOLUTION	48	clocortolone pivalate 0.1% crm	59	clonidine hcl er 0.1 mg tablet	31
CLINIMIX E 2.75%-5% SOLUTION	48	CLODAN 0.05% SHAMPOO	59	clopidogrel 300 mg tablet	79
CLINIMIX E 4.25%-10% SOLUTION	48	clofarabine 20 mg/20 ml vial	26	clopidogrel 75 mg tablet	79
CLINIMIX E 4.25%-25% SOLUTION	48	CLOLAR 20 MG/20 ML VIAL	26	clorazepate 15 mg tablet	32
CLINIMIX E 4.25%-5% SOLUTION	48	clomipramine 25 mg capsule	87	clorazepate 3.75 mg tablet	32
CLINIMIX E 5%-15% SOLUTION	48	clomipramine 50 mg capsule	87	clorazepate 7.5 mg tablet	32
CLINIMIX E 5%-20% SOLUTION	48	clomipramine 75 mg capsule	87	CLORPRES 0.1-15 TABLET	10
CLINIMIX E 5%-25% SOLUTION	48	clonazepam 0.125 mg dis tab	56	CLORPRES 0.2-15 TABLET	10
CLINISOL 15% SOLUTION	48	clonazepam 0.25 mg odt	56	CLORPRES 0.3-15 TABLET	11
clobetasol 0.05% cream	58	clonazepam 0.5 mg dis tablet	56	clotrimazole 1% cream	21
clobetasol 0.05% gel	58	clonazepam 0.5 mg tablet	56	clotrimazole 1% solution	21
clobetasol 0.05% ointment	58	clonazepam 1 mg dis tablet	56	clotrimazole 10 mg troche	21
clobetasol 0.05% shampoo	58	clonazepam 1 mg tablet	56	clotrimazole- betamethasone crm	21
clobetasol 0.05% solution	59	clonazepam 2 mg odt	56	clotrimazole- betamethasone lot	21
clobetasol 0.05% topical lotion	59	clonazepam 2 mg tablet	56	clozapine 100 mg tablet	87

clozapine 200 mg tablet	87	COMBIGAN 0.2%-0.5% EYE DROPS	73	CORTANE-B LOTION	42
clozapine 25 mg tablet	87	COMBIPATCH 0.05-0.14 MG PTCH	52	cortisone 25 mg tablet	59
clozapine 50 mg tablet	87	COMBIPATCH 0.05-0.25 MG PTCH	52	CORTISPORIN-TC EAR SUSPENSION	78
clozapine odt 100 mg tablet	87	COMBIVENT RESPIMAT INHAL SPRAY	37	CORVITA 150 TABLET	79
clozapine odt 12.5 mg tablet	87	COMETRIQ 100 MG DAILY-DOSE PK	69	CORVITA 150 TABLET	89
clozapine odt 150 mg tablet	87	COMETRIQ 140 MG DAILY-DOSE PK	69	CORVITE 150 TABLET	79
clozapine odt 200 mg tablet	87	COMETRIQ 60 MG DAILY-DOSE PACK	69	CORVITE 150 TABLET	89
clozapine odt 25 mg tablet	87	COMPLERA TABLET	24	CORVITE FE TABLET	79
COARTEM TABLETS	29	COMPRO 25 MG SUPPOSITORY	7	CORVITE FREE TABLET	79
codeine sulfate 15 mg tablet	76	COMVAX VACCINE VIAL	88	COSMEGEN 0.5 MG VIAL	27
codeine sulfate 30 mg tablet	76	CONDYLOX 0.5% GEL	42	COSOPT PF EYE DROPS	73
codeine sulfate 60 mg tablet	76	CONSTULOSE 10 GM/15 ML SOLN	66	COTELLIC 20 MG TABLET	69
codeine-guaifen 10-100 mg/5 ml	41	COPAXONE 20 MG/ML SYRINGE	71	COUMADIN 1 MG TABLET	16
colchicine 0.6 mg capsule	22	COPAXONE 40 MG/ML SYRINGE	71	COUMADIN 10 MG TABLET	16
colchicine 0.6 mg tablet	22	COREG CR 10 MG CAPSULE	33	COUMADIN 2 MG TABLET	16
colestipol hcl 1 gm tablet	47	COREG CR 20 MG CAPSULE	33	COUMADIN 2.5 MG TABLET	16
colestipol hcl granules	47	COREG CR 40 MG CAPSULE	33	COUMADIN 3 MG TABLET	16
COLESTIPIOL HCL GRANULES PACKET	47	COREG CR 80 MG CAPSULE	33	COUMADIN 4 MG TABLET	17
colistimethate 150 mg vial	15	CORLANOR 5 MG TABLET	40	COUMADIN 5 MG TABLET	17
COLOCORT 100 MG ENEMA	57	CORLANOR 7.5 MG TABLET	40	COUMADIN 6 MG TABLET	17
COLY-MYCIN S OTIC SUSP DROP	78	CORMAX 0.05% SOLUTION	59	COUMADIN 7.5 MG TABLET	17
				COVARYX H.S. TABLET	61
				COVARYX TABLET	61

CREON DR 12,000 UNITS CAPSULE	57	CYCLAFEM 7-7-7-28 TABLET	52	cyproheptadine 2 mg/5 ml syrup	23
CREON DR 24,000 UNITS CAPSULE	57	cyclobenzaprine 10 mg tablet	84	cyproheptadine 4 mg tablet	23
CREON DR 3,000 UNITS CAPSULE	57	cyclobenzaprine 5 mg tablet	84	CYRAMZA 100 MG/10 ML VIAL	70
CREON DR 36,000 UNITS CAPSULE	57	cyclobenzaprine 7.5 mg tablet	84	CYRAMZA 500 MG/50 ML VIAL	70
CREON DR 6,000 UNITS CAPSULE	57	CYCLOMYDRIL EYE DROPS	73	CYRED 28 DAY TABLET	52
CRESTOR 10 MG TABLET	46	cyclopentolate 0.5% eye drops	73	CYSTADANE 1 GRAM/1.7 ML POWDER	57
CRESTOR 20 MG TABLET	46	cyclopentolate 1% eye drops	73	CYSTAGON 150 MG CAPSULE	57
CRESTOR 40 MG TABLET	46	cyclopentolate hcl 2% drops	73	CYSTAGON 50 MG CAPSULE	57
CRESTOR 5 MG TABLET	46	cyclophosphamide 1 gm vial	10	CYSTARAN 0.44% EYE DROPS	73
CRIXIVAN 200 MG CAPSULE	24	cyclophosphamide 2 gm vial	10	cytarabine 100 mg/5 ml vial	26
CRIXIVAN 400 MG CAPSULE	25	cyclophosphamide 25 mg capsule	10	cytarabine 1000 mg/50 ml vial	26
cromolyn 100 mg/5 ml oral conc	56	cyclophosphamide 50 mg capsule	10	cytarabine 2 g/20 ml vial	26
cromolyn 20 mg/2 ml neb soln	67	cyclophosphamide 500 mg vial	10	cytarabine 20 mg/ml vial	26
cromolyn 4% eye drops	73	cycloserine 250 mg capsule	30	CYTRA-2 ORAL SOLUTION	48
CRYSELLE-28 TABLET	52	cyclosporine 100 mg capsule	63	CYTRA-3 SYRUP	48
CUPRIMINE 250 MG CAPSULE	50	cyclosporine 100 mg/ml soln	63	CYTRA-K CRYSTALS PACKET	48
CURAD GAUZE PADS 2" X 2"	42	cyclosporine 25 mg capsule	63	CYTRA-K ORAL SOLUTION	48
CUVITRU 2 GRAM/10 ML VIAL	64	cyclosporine 50 mg/ml ampul	63	d5%-1/2ns-kcl 10 meq/l iv sol	48
CUVITRU 4 GRAM/20 ML VIAL	64	cyclosporine modified 100 mg	63	d5%-1/2ns-kcl 30 meq/l iv sol	48
cyanocobalamin 1,000 mcg/ml	79	cyclosporine modified 25 mg	63	d5%-1/2ns-kcl 40 meq/l iv sol	48
CYCLAFEM 1-35-28 TABLET	52	cyclosporine modified 50 mg	63	dacarbazine 100 mg vial	10

dacarbazine 200 mg vial	10	DASETTA 7/7/7-28 TABLET	52	DERMASORB HC 2% COMPLETE KIT	42
DALIRESP 500 MCG TABLET	79	daunorubicin 20 mg/4 ml vial	27	DERMASORB TA 0.1% COMPLETE KIT	42
d-amphetamine er 10 mg capsule	31	DAYSEE 0.15-0.03-0.01 MG TAB	52	DERMAZENE CREAM	42
d-amphetamine er 15 mg capsule	31	DEBLITANE 0.35 MG TABLET	81	DESCOZY 200-25 MG TABLET	24
d-amphetamine er 5 mg capsule	31	decitabine 50 mg vial	27	desipramine 10 mg tablet	87
danazol 100 mg capsule	12	DELESTROGEN 10 MG/ML VIAL	52	desipramine 100 mg tablet	87
danazol 200 mg capsule	12	DELYLA-28 TABLET	52	desipramine 150 mg tablet	87
danazol 50 mg capsule	12	DELZICOL DR 400 MG CAPSULE	11	desipramine 25 mg tablet	87
dantrolene sodium 100 mg cap	30	demecclocycline 150 mg tablet	86	desipramine 50 mg tablet	87
dantrolene sodium 25 mg cap	30	demecclocycline 300 mg tablet	86	desipramine 75 mg tablet	87
dantrolene sodium 50 mg cap	30	DEMSER 250 MG CAPSULE	40	desloratadine 2.5 mg odt	23
dapsone 100 mg tablet	27	DENAVIR 1% CREAM	23	desloratadine 5 mg odt	23
dapsone 25 mg tablet	27	DENTA 5000 PLUS CREAM	48	desloratadine 5 mg tablet	23
DAPTACEL DTAP VACCINE	88	DENTAGEL 1.1% GEL	48	desmopressin 0.01% solution	60
daptomycin 500 mg vial	15	DEPEN 250 MG TITRATAB	50	desmopressin 0.1 mg/ml sol	60
DARAPRIM 25 MG TABLET	29	deplin-algal oil 7.5 mg, 15 mg cap	79	desmopressin 10 mcg/0.1 ml spr	60
darifenacin er 15 mg tablet	29	DEPO-ESTRADIOL 5 MG/ML VIAL	52	desmopressin 40 mcg/10 ml vial	60
darifenacin er 7.5 mg tablet	29	DEPO-MEDROL 20 MG/ML VIAL	59	desmopressin acetate 0.1 mg tb	60
DARZALEX 100 MG/5 ML VIAL	70	DEPO-PROVERA 400 MG/ML VIAL	81	desmopressin acetate 0.2 mg tb	60
DARZALEX 400 MG/20 ML VIAL	70	DEPO-SUBQ PROVERA 104 SYRINGE	81	desogestrel-ethinyl estrad tab	52
DASETTA 1-35-28 TABLET	52	DERMACINRX PUREFOLIX TABLET	79	desogestr-eth estrad eth estra	52
				desonide 0.05% cream	59

desonide 0.05% lotion	59	dexamethasone 120 mg/30 ml vl	59	dextroamp-amphetam 7.5 mg tab	31
desonide 0.05% ointment	59	dexamethasone 2 mg tablet	59	dextroamp-amphetamin 10 mg tab	31
desoximetasone 0.05% cream	59	dexamethasone 20 mg/5 ml vial	59	dextroamp-amphetamin 15 mg tab	31
desoximetasone 0.05% gel	59	dexamethasone 4 mg tablet	59	dextroamp-amphetamin 20 mg tab	31
desoximetasone 0.05% ointment	59	dexamethasone 4 mg/ml vial	59	dextroamp-amphetamin 30 mg tab	31
desoximetasone 0.25% cream	59	dexamethasone 6 mg tablet	59	dextroamp-amphetamine 5 mg tab	31
desoximetasone 0.25% ointment	59	DEXAMETHASONE INTENSOL 1MG/1ML	59	dextroamphetamine 10 mg tab	31
desvenlafaxine er 100 mg tab	85	DEXILANT DR 30 MG CAPSULE	81	dextroamphetamine 5 mg tab	31
desvenlafaxine er 50 mg tab	85	DEXILANT DR 60 MG CAPSULE	81	dextroamphetamine 5 mg/5 ml	31
desvenlafaxine suc er 100 mg	85	dexmethylphenidate 10 mg tab	31	dextrose 10%-0.2% nacl iv soln	48
desvenlafaxine suc er 25 mg tb	85	dexmethylphenidate 2.5 mg tab	31	dextrose 10%-0.45% nacl iv sol	48
desvenlafaxine suc er 50 mg tb	85	dexmethylphenidate 5 mg tab	31	dextrose 10%-water iv solution	48
dexamethasone 0.1% eye drop	74	drazoxane 250 mg vial	27	dextrose 2.5%-0.45% nacl iv	48
dexamethasone 0.5 mg tablet	59	drazoxane 500 mg vial	27	dextrose 20%-water iv soln	48
dexamethasone 0.5 mg/5 ml elx	59	dextroamp-amphet er 10 mg cap	31	dextrose 25%-water syringe	48
dexamethasone 0.5 mg/5 ml liq	59	dextroamp-amphet er 15 mg cap	31	dextrose 30%-water iv soln	48
dexamethasone 0.75 mg tablet	59	dextroamp-amphet er 20 mg cap	31	dextrose 40%-water iv soln	48
dexamethasone 1 mg tablet	59	dextroamp-amphet er 25 mg cap	31	dextrose 5%-0.2% nacl iv soln	48
dexamethasone 1.5 mg tablet	59	dextroamp-amphet er 30 mg cap	31	dextrose 5%-0.225% nacl iv sol	48
dexamethasone 10 mg/ml vial	59	dextroamp-amphet er 5 mg cap	31	dextrose 5%-0.3% nacl iv soln	48
dexamethasone 100 mg/10 ml vl	59	dextroamp-amphetam 12.5 mg tab	31	dextrose 5%-0.33% nacl iv soln	48

dextrose 5%-0.45% nacl iv soln	48	diclofenac 0.1% eye drops	74	diflunisal 500 mg tablet	72
dextrose 5%-0.9% nacl iv soln	48	diclofenac 1.5% topical soln	42	DIGITEK 125 MCG TABLET	40
dextrose 5%-electrolyte	48	diclofenac pot 50 mg tablet	72	DIGITEK 250 MCG TABLET	40
dextrose 5%-lr iv solution	48	diclofenac sod ec 25 mg tab	72	DIGOX 125 MCG TABLET	40
dextrose 5%-water iv soln	48	diclofenac sod ec 50 mg tab	72	DIGOX 250 MCG TABLET	40
dextrose 50%-water iv soln	48	diclofenac sod ec 75 mg tab	72	digoxin 0.05 mg/ml solution	40
dextrose 70%-water iv soln	48	diclofenac sod er 100 mg tab	72	digoxin 125 mcg tablet	40
DIASTAT 2.5 MG PEDI SYSTEM	56	diclofenac sodium 1% gel	42	digoxin 250 mcg tablet	40
DIASTAT ACUDIAL 12.5-15-20 MG	56	diclofenac sodium 3% gel	42	digoxin 500 mcg/2 ml ampule	40
DIASSTAT ACUDIAL 5-7.5-10 MG KT	56	diclofenac-misoprost 50-0.2 tb	72	dihydroergotamine 1 mg/ml am	51
diazepam 10 mg rectal gel syst	56	diclofenac-misoprost 75-0.2 tb	72	dihydroergotamine 4 mg/ml spry	51
diazepam 10 mg tablet	32	dicloxacillin 250 mg capsule	35	DILANTIN 100 MG CAPSULE	85
diazepam 10 mg/2 ml carpuject	32	dicloxacillin 500 mg capsule	35	DILANTIN 30 MG CAPSULE	85
diazepam 10 mg/2 ml syringe	32	dicyclomine 10 mg capsule	29	DILANTIN 50 MG INFATAB	85
diazepam 2 mg tablet	32	dicyclomine 10 mg/5 ml soln	29	DILT XR 120 MG CAPSULE	38
diazepam 2.5 mg rectal gel sys	56	dicyclomine 20 mg tablet	29	DILT XR 180 MG CAPSULE	38
diazepam 20 mg rectal gel syst	56	didanosine dr 125 mg capsule	24	DILT XR 240 MG CAPSULE	38
diazepam 5 mg tablet	32	didanosine dr 200 mg capsule	24	DILT-CD 180 MG CAPSULE	38
diazepam 5 mg/5 ml solution	32	didanosine dr 250 mg capsule	24	DILT-CD 240 MG CAPSULE	38
diazepam 5 mg/ml oral conc	32	didanosine dr 400 mg capsule	24	diltiazem 120 mg tablet	38
diazepam 5 mg/ml vial	32	DIFICID 200 MG TABLET	67	diltiazem 125 mg/25 ml vial	38

diltiazem 12hr er 120 mg cap	38	diltiazem 50 mg/10 ml vial	38	DIURIL 250 MG/5 ML ORAL SUSP	45
diltiazem 12hr er 60 mg cap	38	diltiazem 60 mg tablet	38	divalproex dr 125 mg cap sprnk	56
diltiazem 12hr er 90 mg cap	38	diltiazem 90 mg tablet	38	divalproex sod dr 125 mg tab	56
diltiazem 24hr cd 120 mg cap	38	diltiazem er 120 mg capsule	38	divalproex sod dr 250 mg tab	56
diltiazem 24hr cd 180 mg cap	38	diltiazem er 180 mg capsule	38	divalproex sod dr 500 mg tab	56
diltiazem 24hr cd 240 mg cap	38	diltiazem er 240 mg capsule	38	divalproex sod er 250 mg tab	56
diltiazem 24hr cd 300 mg cap	38	diltiazem hcl 100 mg vial	38	divalproex sod er 500 mg tab	56
diltiazem 24hr cd 360 mg cap	38	dimenhydrinate 50 mg/ml vial	21	DIVIGEL 0.25 MG GEL PACKET	52
diltiazem 24hr er 120 mg cap	38	DIPENTUM 250 MG CAPSULE	11	DIVIGEL 0.5 MG GEL PACKET	52
diltiazem 24hr er 180 mg cap	38	diphenhydramine 50 mg/ml vial	23	DIVIGEL 1 MG GEL PACKET	52
diltiazem 24hr er 180 mg tab	38	diphenoxylat-atrop 2.5-0.025/5	56	DOCEFREZ 20 MG VIAL	27
diltiazem 24hr er 240 mg cap	38	diphenoxylate-atrop 2.5-0.025	56	docetaxel 140 mg/7 ml vial	27
diltiazem 24hr er 240 mg tab	38	diphtheria-tetanus toxoids-ped	88	docetaxel 160 mg/16 ml vial	27
diltiazem 24hr er 300 mg cap	38	dipyridamole 25 mg tablet	79	docetaxel 160 mg/8 ml vial	27
diltiazem 24hr er 300 mg tab	38	dipyridamole 50 mg tablet	79	docetaxel 20 mg/0.5 ml vial	27
diltiazem 24hr er 360 mg cap	38	dipyridamole 75 mg tablet	79	docetaxel 20 mg/2 ml vial	27
diltiazem 24hr er 360 mg tab	38	diskets 40 mg tablet	74	docetaxel 20 mg/ml vial	27
diltiazem 24hr er 420 mg cap	38	disopyramide 100 mg capsule	14	docetaxel 200 mg/10 ml vial	27
diltiazem 24hr er 420 mg tab	38	disopyramide 150 mg capsule	14	docetaxel 200 mg/20 ml vial	27
diltiazem 25 mg/5 ml vial	38	disulfiram 250 mg tablet	10	docetaxel 80 mg/2 ml vial	27
diltiazem 30 mg tablet	38	disulfiram 500 mg tablet	10	docetaxel 80 mg/4 ml vial	27

docetaxel 80 mg/8 ml vial	27	doxepin 5% cream	42	doxycycline ir-dr 40 mg cap	42
dofetilide 125 mcg capsule	14	doxepin 50 mg capsule	87	doxycycline mono 100 mg cap	87
dofetilide 250 mcg capsule	14	doxepin 75 mg capsule	30	doxycycline mono 100 mg tablet	87
dofetilide 500 mcg capsule	14	doxercalciferol 0.5 mcg cap	67	doxycycline mono 150 mg cap	87
donepezil hcl 10 mg tablet	40	doxercalciferol 1 mcg capsule	67	doxycycline mono 150 mg tablet	87
donepezil hcl 23 mg tablet	40	doxercalciferol 2.5 mcg cap	67	doxycycline mono 50 mg cap	87
donepezil hcl 5 mg tablet	40	doxercalciferol 4 mcg/2 ml amp	67	doxycycline mono 50 mg tablet	87
donepezil hcl odt 10 mg tablet	40	doxorubicin 10 mg vial	27	doxycycline mono 75 mg capsule	87
donepezil hcl odt 5 mg tablet	40	doxorubicin 50 mg vial	27	doxycycline mono 75 mg tablet	87
DONNATAL ELIXIR	30	doxorubicin 50 mg/25 ml vial	27	DRISDOL 50,000 UNITS CAPSULE	80
DONNATAL TABLET	30	doxorubicin liposome 20mg/10ml	27	dronabinol 10 mg capsule	51
dorzolamide hcl 2% eye drops	74	DOXY 100 VIAL	86	dronabinol 2.5 mg capsule	51
dorzolamide-timolol eye drops	74	doxycycline 25 mg/5 ml susp	86	dronabinol 5 mg capsule	51
doxazosin mesylate 1 mg tab	32	doxycycline hyc 100 mg vial	86	droperidol 2.5 mg/ml ampul	21
doxazosin mesylate 2 mg tab	32	doxycycline hyc dr 100 mg tab	86	drosp-ee-levomef 3-0.02-0.451	52
doxazosin mesylate 4 mg tab	32	doxycycline hyc dr 150 mg tab	86	drospirenone-ee 3-0.02 mg tab	52
doxazosin mesylate 8 mg tab	32	doxycycline hyc dr 75 mg tab	86	drospirenone-ee 3-0.03 mg tab	52
doxepin 10 mg capsule	30	doxycycline hyclate 100 mg cap	86	DROXIA 200 MG CAPSULE	26
doxepin 10 mg/ml oral conc	30	doxycycline hyclate 100 mg tab	86	DROXIA 300 MG CAPSULE	26
doxepin 100 mg capsule	30	doxycycline hyclate 20 mg tab	87	DROXIA 400 MG CAPSULE	26
doxepin 150 mg capsule	87	doxycycline hyclate 50 mg cap	87	DULERA 100 MCG/5 MCG INHALER	25
doxepin 25 mg capsule	30				

DULERA 200 MCG/5 MCG INHALER	25	EDURANT 25 MG TABLET	24	ELITEK 7.5 MG VIAL	26
duloxetine hcl dr 20 mg cap	85	EEMT DS 1.25-2.5 MG TABLET	61	ELIXOPHYLLIN 80 MG/15 ML ELIX	79
duloxetine hcl dr 30 mg cap	85	EEMT HS 0.625-1.25 MG TABLET	61	ELLA 30 MG TABLET	81
duloxetine hcl dr 40 mg cap	85	EFFER-K 25 MEQ TABLET EFF	48	ELMIRON 100 MG CAPSULE	57
duloxetine hcl dr 60 mg cap	85	EFFIENT 10 MG TABLET	79	EMBEDA ER 100-4 MG CAPSULE	74
DURACHOL 3,775 UNIT-1 MG CAP	80	EFFIENT 5 MG TABLET	79	EMBEDA ER 20-0.8 MG CAPSULE	75
DURAMORPH 10 MG/10 ML AMPUL	74	EGRIFTA 1 MG VIAL	60	EMBEDA ER 30-1.2 MG CAPSULE	75
DURAMORPH 5 MG/10 ML AMPUL	74	EGRIFTA 2 MG VIAL	60	EMBEDA ER 50-2 MG CAPSULE	75
DUREZOL 0.05% EYE DROPS	74	ELAPRASE 6 MG/3 ML VIAL	57	EMBEDA ER 60-2.4 MG CAPSULE	75
dutasteride 0.5 mg capsule	32	ELELYSO 200 UNITS VIAL	57	EMBEDA ER 80-3.2 MG CAPSULE	75
dutasteride-tamsulosin 0.5-0.4	32	ELETONE CREAM	42	EMCYT 140 MG CAPSULE	21
DYMISTA NASAL SPRAY	23	ELETONE CREAM TWIN PACK	42	EMEND 125 MG POWDER PACKET	51
DYRENIUM 100 MG CAPSULE	45	ELFOLATE TABLETS	80	EMOQUETTE 28 DAY TABLET	52
DYRENIUM 50 MG CAPSULE	45	ELIDEL 1% CREAM	42	EMPLICITI 300 MG VIAL	70
E.E.S. 400 FILMTAB	67	ELIGARD 22.5 MG SYRINGE KIT	62	EMPLICITI 400 MG VIAL	70
econazole nitrate 1% cream	21	ELIGARD 30 MG SYRINGE KIT	62	EMSAM 12 MG/24 HOURS PATCH	70
EDARBI 40 MG TABLET	13	ELIGARD 45 MG SYRINGE KIT	62	EMSAM 6 MG/24 HOURS PATCH	70
EDARBI 80 MG TABLET	13	ELIGARD 7.5 MG SYRINGE KIT	62	EMSAM 9 MG/24 HOURS PATCH	70
EDARBYCLOR 40-12.5 MG TABLET	13	ELINEST-28 TABLET	52	EMTRIVA 10 MG/ML SOLUTION	24
EDARBYCLOR 40-25 MG TABLET	13	ELIQUIS 2.5 MG TABLET	17	EMTRIVA 200 MG CAPSULE	24
EDEX	84	ELIQUIS 5 MG TABLET	17	ENABLEX 15 MG TABLET	29
ED-SPAZ 0.125 MG ODT	29	ELITEK 1.5 MG VIAL	26		

ENABLEX 7.5 MG TABLET	29	enoxaparin 150 mg/ml syringe	17	epinephrine 0.15 mg auto-injct	37
enalapril maleate 10 mg tab	13	enoxaparin 30 mg/0.3 ml syr	17	epinephrine 0.3 mg auto-inject	37
enalapril maleate 2.5 mg tab	13	enoxaparin 300 mg/3 ml vial	17	epinephrine 1 mg/ml ampul	37
enalapril maleate 20 mg tab	13	enoxaparin 40 mg/0.4 ml syr	17	EPIPEN 2-PAK 0.3 MG AUTO-INJCT	37
enalapril maleate 5 mg tablet	13	enoxaparin 60 mg/0.6 ml syr	17	EPIPEN JR 2-PAK 0.15 MG INJCTR	37
enalaprilat 2.5 mg/2 ml vial	13	enoxaparin 80 mg/0.8 ml syr	17	epirubicin 200 mg/100 ml vial	27
enalapril-hctz 10-25 mg tablet	13	ENPRESSE-28 TABLET	52	epirubicin 50 mg/25 ml vial	27
enalapril-hctz 5-12.5 mg tab	13	ENSKYCE 28 TABLET	52	EPITOL 200 MG TABLET	85
ENBREL 25 MG KIT	63	entacapone 200 mg tablet	28	EPIVIR HBV 25 MG/5 ML SOLN	22
ENBREL 25 MG/0.5 ML SYRINGE	63	entecavir 0.5 mg tablet	22	eplerenone 25 mg tablet	45
ENBREL 50 MG/ML SURECLICK SYR	63	entecavir 1 mg tablet	22	eplerenone 50 mg tablet	45
ENBREL 50 MG/ML SYRINGE	63	ENTRESTO 24 MG-26 MG TABLET	13	EPOGEN 2,000 UNITS/ML VIAL	36
ENDOCET 10-325 MG TABLET	76	ENTRESTO 49 MG-51 MG TABLET	13	EPOGEN 20,000 UNITS/2 ML VIAL	36
ENDOCET 2.5-325 MG TABLET	76	ENTRESTO 97 MG-103 MG TABLET	13	EPOGEN 20,000 UNITS/ML VIAL	36
ENDOCET 5-325 TABLET	76	ENULOSE 10 GM/15 ML SOLUTION	66	EPOGEN 3,000 UNITS/ML VIAL	36
ENDOCET 7.5-325 MG TABLET	76	ENVARSUS XR 0.75 MG TABLET	63	EPOGEN 4,000 UNITS/ML VIAL	36
ENGERIX-B 10 MCG/0.5 ML PED VL	88	ENVARSUS XR 1 MG TABLET	63	eprosartan mesylate 600 mg tab	13
ENGERIX-B 20 MCG/ML SYRN	88	ENVARSUS XR 4 MG TABLET	63	EQUETRO 100 MG CAPSULE	85
ENGERIX-B PEDI 10 MCG/0.5 SYRN	88	EPCLUSA 400 MG-100 MG TABLET	23	EQUETRO 200 MG CAPSULE	85
ENLYTE SOFTGEL	80	EPIFOAM FOAM	43	EQUETRO 300 MG CAPSULE	85
enoxaparin 100 mg/ml syringe	17	epinastine hcl 0.05% eye drops	73	ERBITUX 100 MG/50 ML VIAL	70
enoxaparin 120 mg/0.8 ml syr	17	epinephrine 0.1 mg/ml syringe	37		

ERBITUX 200 MG/100 ML VIAL	70	erythromycin es 400 mg tab	67	estradiol 0.05 mg patch	52
ergoloid mesylates 1 mg tab	18	erythromycin-benzoyl gel	43	estradiol 0.075 mg patch	52
ergotamine-caffeine 1-100mg tb	51	ESBRIET 267 MG CAPSULE	83	estradiol 0.1 mg patch	52
ERIVEDGE 150 MG CAPSULE	69	ESBRIET 267 MG TABLET	82	estradiol 0.5 mg tablet	52
ERRIN 0.35 MG TABLET	81	ESBRIET 801 MG TABLET	82	estradiol 1 mg tablet	52
ERWINAZE 10,000 UNITS VIAL	27	escitalopram 10 mg tablet	85	estradiol 2 mg tablet	52
ERY 2% PADS	67	escitalopram 20 mg tablet	85	estradiol tds 0.025 mg/day	52
ERYPED 400 MG/5 ML SUSPENSION	67	escitalopram 5 mg tablet	85	estradiol tds 0.0375 mg/day	53
ERY-TAB EC 250 MG TABLET	67	escitalopram oxalate 5 mg/5 ml	85	estradiol tds 0.05 mg/day	53
ERY-TAB EC 333 MG TABLET	67	ESGIC CAPSULE	12	estradiol tds 0.06 mg/day	53
ERY-TAB EC 500 MG TABLET	67	esmolol hcl 100 mg/10 ml vial	33	estradiol tds 0.075 mg/day	53
ERYTHROCIN 250 MG FILMTAB	67	esomeprazole mag dr 20 mg cap	81	estradiol tds 0.1 mg/day	53
ERYTHROCIN 500 MG ADDVNT VL	67	esomeprazole mag dr 40 mg cap	81	estradiol valerate 10 mg/ml vl	53
erythromycin 0.5% eye ointment	67	esomeprazole sodium 20 mg vial	81	estradiol valerate 20 mg/ml vl	53
erythromycin 2% gel	67	esomeprazole sodium 40 mg vial	81	estradiol valerate 40 mg/ml vl	53
erythromycin 2% pledges	67	ESTARYLLA 0.25-0.035 MG TABLET	52	estradiol-noreth 0.5-0.1 mg tb	53
erythromycin 2% solution	67	estazolam 1 mg tablet	32	estradiol-noreth 1-0.5 mg tab	53
erythromycin 200 mg/5 ml gran	67	estazolam 2 mg tablet	32	ESTRING 2 MG VAGINAL RING	53
erythromycin 250 mg filmtab	67	ESTRACE 0.01% CREAM	52	ESTROGEL 0.06% GEL	53
erythromycin 500 mg filmtab	67	estradiol 0.025 mg patch	52	estrogen-methyltestos f.s. tab	61
erythromycin ec 250 mg cap	67	estradiol 0.0375 mg patch	52	estrogen-methyltestos h.s. tab	61

estrogen-methyltestosterone tb	61	etodolac er 400 mg tablet	72	FABRAZYME 35 MG VIAL	57
estropipate 0.625(0.75 mg) tab	53	etodolac er 500 mg tablet	72	FABRAZYME 5 MG VIAL	57
estropipate 1.25(1.5 mg) tab	53	etodolac er 600 mg tablet	72	FALMINA-28 TABLET	53
estropipate 2.5(3 mg) tab	53	etoposide 1,000 mg/50 ml vial	51	famciclovir 125 mg tablet	23
eszopiclone 1 mg tablet	55	etoposide 100 mg/5 ml vial	51	famciclovir 250 mg tablet	23
eszopiclone 2 mg tablet	55	etoposide 500 mg/25 ml vial	51	famciclovir 500 mg tablet	23
eszopiclone 3 mg tablet	55	EURAX 10% CREAM	78	famotidine 20 mg piggyback	58
ethacrynone sodium 50 mg vial	45	EURAX 10% LOTION	78	famotidine 20 mg tablet	58
ethacrynic acid 25 mg tablet	45	EVOMELA 50 MG VIAL	10	famotidine 20 mg/2 ml vial	58
ethambutol hcl 100 mg tablet	30	EVOTAZ 300 MG-150 MG TABLET	25	famotidine 200 mg/20 ml vial	58
ethambutol hcl 400 mg tablet	30	exemestane 25 mg tablet	30	famotidine 40 mg tablet	58
ethosuximide 250 mg capsule	39	EXJADE 125 MG TABLET	50	famotidine 40 mg/4 ml vial	58
ethosuximide 250 mg/5 ml soln	39	EXJADE 250 MG TABLET	50	famotidine 40 mg/5 ml susp	58
ethyl chloride spray	43	EXJADE 500 MG TABLET	50	famotidine 500 mg/50 ml vial	58
ethynodiol-eth estra 1mg-50mcg	53	EXTAVIA 0.3 MG KIT	71	FANAPT 1 MG TABLET	8
ETHYOL 500 MG VIAL	27	E-Z DISK 700 MG TABLET	68	FANAPT 10 MG TABLET	8
etidronate disodium 200 mg tab	67	ezetimibe 10 mg tablet	47	FANAPT 12 MG TABLET	8
etidronate disodium 400 mg tab	67	ezetimibe-simvastatin 10-10 mg	47	FANAPT 2 MG TABLET	8
etodolac 200 mg capsule	72	ezetimibe-simvastatin 10-20 mg	47	FANAPT 4 MG TABLET	8
etodolac 300 mg capsule	72	ezetimibe-simvastatin 10-40 mg	47	FANAPT 6 MG TABLET	8
etodolac 400 mg tablet	72	ezetimibe-simvastatin 10-80 mg	47	FANAPT 8 MG TABLET	8
etodolac 500 mg tablet	72				

FANAPT TITRATION PACK	8	fenofibrate 134 mg capsule	46	fentanyl 12 mcg/hr patch	75
FARESTON 60 MG TABLET	21	fenofibrate 145 mg tablet	46	fentanyl 2,500 mcg/50 ml vial	76
FARXIGA 10 MG TABLET	19	fenofibrate 150 mg capsule	46	fentanyl 25 mcg/hr patch	75
FARXIGA 5 MG TABLET	19	fenofibrate 160 mg tablet	46	fentanyl 250 mcg/5 ml vial	76
FARYDAK 10 MG CAPSULE	27	fenofibrate 200 mg capsule	46	fentanyl 37.5 mcg/hr patch	75
FARYDAK 15 MG CAPSULE	27	fenofibrate 40 mg tablet	46	fentanyl 50 mcg/hr patch	75
FARYDAK 20 MG CAPSULE	27	fenofibrate 43 mg capsule	46	fentanyl 62.5 mcg/hr patch	75
FASLODEX 250 MG/5 ML SYRINGE	21	fenofibrate 48 mg tablet	46	fentanyl 75 mcg/hr patch	75
FE C PLUS TABLET	80	fenofibrate 50 mg capsule	46	fentanyl 87.5 mcg/hr patch	75
FE C PLUS TABLET	89	fenofibrate 54 mg tablet	46	fentanyl cit otfc 1,200 mcg	76
felbamate 400 mg tablet	57	fenofibrate 67 mg capsule	46	fentanyl cit otfc 1,600 mcg	76
felbamate 600 mg tablet	57	fenofibric acid 105 mg tablet	46	fentanyl citrate otfc 200 mcg	76
felbamate 600 mg/5 ml susp	57	fenofibric acid 35 mg tablet	46	fentanyl citrate otfc 400 mcg	76
felodipine er 10 mg tablet	38	fenofibric acid dr 135 mg cap	46	fentanyl citrate otfc 600 mcg	76
felodipine er 2.5 mg tablet	38	fenofibric acid dr 45 mg cap	46	fentanyl citrate otfc 800 mcg	76
felodipine er 5 mg tablet	38	fenoprofen 200 mg capsule	72	FERAHEME 510 MG/17 ML VIAL	80
FEM PH VAGINAL JELLY	15	fenoprofen 400 mg capsule	72	FERIVA 21-7 TABLET	80
FEMRING 0.05 MG VAGINAL RING	53	fenoprofen 600 mg tablet	72	FERIVA FA CAPSULE	80
FEMRING 0.10 MG VAGINAL RING	53	fentanyl 0.05 mg/ml syringe	76	FERIVA FA CAPSULE	89
FEMYNOR 28 TABLET	53	fentanyl 1,000 mcg/20 ml ampul	76	FERIVA MULTIPHASE CAPSULE	80
fenofibrate 120 mg tablet	46	fentanyl 100 mcg/hr patch	75	FEROCON CAPSULE	80
fenofibrate 130 mg capsule	46			FEROCON CAPSULE	89
				FEROTRINSIC CAPSULE	80

FEROTRINSIC CAPSULE	89	FETZIMA ER 40 MG CAPSULE	85	FLOVENT HFA 220 MCG INHALER	26
FERRALET 90 TABLET	80	FETZIMA ER 80 MG CAPSULE	85	FLOVENT HFA 44 MCG INHALER	26
FERRALET 90 TABLET	89	FINACEA 15% FOAM	43	flouxuridine 500 mg vial	26
FERRAPLUS 90 TABLET	80	FINACEA 15% GEL	43	fluconazole 10 mg/ml susp	21
FERRAPLUS 90 TABLET	89	finasteride 5 mg tablet	32	fluconazole 100 mg tablet	21
FERREX 150 FORTE CAPSULE	80	FIORINAL 50-325-40 MG CAPSULE	12	fluconazole 150 mg tablet	21
FERREX 150 FORTE CAPSULE	89	FIRAZYR 30 MG/3 ML SYRINGE	12	fluconazole 200 mg tablet	21
FERREX 150 FORTE PLUS CAPSULE	80	FIRMAGON 2 X 120 MG KIT	62	fluconazole 40 mg/ml susp	21
FERREX 150 FORTE PLUS CAPSULE	89	FIRMAGON 80 MG KIT	62	fluconazole 50 mg tablet	21
FERREX 28 TABLET	80	FLAREX 0.1% EYE DROPS	74	fluconazole-dext 200 mg/100 ml	21
FERREX 28 TABLET	89	flavoxate hcl 100 mg tablet	29	fluconazole-dext 400 mg/200 ml	21
FERRIPROX 100 MG/ML SOLUTION	68	FLEBOGAMMA DIF 10% VIAL	65	fluconazole-nacl 100 mg/50 ml	21
FERRIPROX 500 MG TABLET	68	FLEBOGAMMA DIF 5% VIAL	65	fluconazole-nacl 200 mg/100 ml	21
FERRLECIT 62.5 MG/5 ML VIAL	80	flecainide acetate 100 mg tab	14	fluconazole-nacl 400 mg/200 ml	21
ferrlecit 62.5 mg/5 ml vial	80	flecainide acetate 150 mg tab	14	flucytosine 250 mg capsule	21
FERRLECIT 62.5 MG/5 ML VIAL	89	flecainide acetate 50 mg tab	14	flucytosine 500 mg capsule	21
FERROCITE PLUS TABLET	80	FLORIVA PLUS 0.25 MG/ML DROPS	89	fludarabine 50 mg vial	27
FERROCITE PLUS TABLET	89	FLOVENT 100 MCG DISKUS	25	fludarabine 50 mg/2 ml vial	27
FERROGELS FORTE SOFTGEL	80	FLOVENT 250 MCG DISKUS	25	fludrocortisone 0.1 mg tablet	59
FERROGELS FORTE SOFTGEL	89	FLOVENT 50 MCG DISKUS	25	flunisolide 0.025% spray	26
FETZIMA 20-40 MG TITRATION PAK	85	FLOVENT HFA 110 MCG INHALER	25	fluocinolone 0.01% body oil	59
FETZIMA ER 120 MG CAPSULE	85				
FETZIMA ER 20 MG CAPSULE	85				

fluocinolone 0.01% cream	59	FLUORITAB 1 MG TABLET CHEW	48	fluphenazine 2.5 mg/5 ml elix	7
fluocinolone 0.01% scalp oil	59	fluorometholone 0.1% drops	74	fluphenazine 2.5 mg/ml vial	7
fluocinolone 0.01% solution	59	fluorouracil 0.5% cream	43	fluphenazine 5 mg tablet	7
fluocinolone 0.025% cream	59	fluorouracil 1,000 mg/20 ml vl	26	fluphenazine 5 mg/ml conc	7
fluocinolone 0.025% ointment	59	fluorouracil 2% topical soln	43	fluphenazine dec 125 mg/5 ml	7
fluocinolone oil 0.01% ear drp	78	fluorouracil 2,500 mg/50 ml vl	26	flurandrenolide 0.05% cream	59
fluocinonide 0.05% cream	59	fluorouracil 5% cream	43	flurandrenolide 0.05% lotion	59
fluocinonide 0.05% gel	59	fluorouracil 5% top solution	43	flurandrenolide 0.05% ointment	43
fluocinonide 0.05% ointment	59	fluorouracil 5,000 mg/100 ml	26	flurazepam 15 mg capsule	32
fluocinonide 0.05% solution	59	fluorouracil 500 mg/10 ml vial	26	flurazepam 30 mg capsule	32
fluocinonide 0.1% cream	59	fluoxetine 20 mg/5 ml solution	85	flurbiprofen 0.03% eye drop	74
fluocinonide-e 0.05% cream	59	fluoxetine dr 90 mg capsule	85	flurbiprofen 100 mg tablet	72
FLUOR-A-DAY 0.25 MG TAB CHEW	48	fluoxetine hcl 10 mg capsule	85	flurbiprofen 50 mg tablet	72
FLUOR-A-DAY 1 MG TABLET CHEW	48	fluoxetine hcl 10 mg tablet	85	flutamide 125 mg capsule	14
FLUOR-A-DAY 2.5 MG/ML DROPS	48	fluoxetine hcl 20 mg capsule	86	fluticasone prop 0.005% oint	59
fluoride 0.25 mg tablet chew	48	fluoxetine hcl 20 mg tablet	86	fluticasone prop 0.05% cream	59
fluoride 0.5 mg tablet chew	48	fluoxetine hcl 40 mg capsule	86	fluticasone prop 0.05% lotion	59
fluoride 1 mg tablet chewable	48	fluoxetine hcl 60 mg tablet	86	fluticasone prop 50 mcg spray	26
FLUORIDEX DEFENSE 1.1% GEL	48	fluphenazine 1 mg tablet	7	fluvastatin er 80 mg tablet	46
FLUORITAB 0.125 MG/DRP DROPS	48	fluphenazine 10 mg tablet	7	fluvastatin sodium 20 mg cap	46
FLUORITAB 0.5 MG TABLET CHEW	48	fluphenazine 2.5 mg tablet	7	fluvastatin sodium 40 mg cap	46

fluvoxamine er 100 mg capsule	86	FORTAVIT SOFTGEL	80	FRAGMIN 5,000 UNITS/0.2 ML SYR	17
fluvoxamine er 150 mg capsule	86	FORTEO 600 MCG/2.4 ML PEN INJ	67	FRAGMIN 7,500 UNITS/0.3 ML SYR	17
fluvoxamine maleate 100 mg tab	86	FOSAMAX PLUS D 70 MG-2,800 IU	67	FRAGMIN 95,000 UNITS/3.8 ML VL	17
fluvoxamine maleate 25 mg tab	86	FOSAMAX PLUS D 70 MG-5,600 IU	67	FREAMINE HBC 6.9% IV SOLN	48
fluvoxamine maleate 50 mg tab	86	FOSCAVIR 6,000 MG/250 ML BTTL	18	FREAMINE III 10% IV SOLN.	48
FML FORTE 0.25% EYE DROPS	74	fosinopril sodium 10 mg tab	13	frovatriptan succ 2.5 mg tab	83
FML S.O.P. 0.1% OINTMENT	74	fosinopril sodium 20 mg tab	13	furosemide 10 mg/ml solution	45
FOCALGIN DSS TABLET	80	fosinopril sodium 40 mg tab	13	furosemide 100 mg/10 ml vial	45
FOCALGIN DSS TABLET	89	fosinopril-hctz 10-12.5 mg tab	13	furosemide 20 mg tablet	45
folic acid 1 mg tablet	80	fosinopril-hctz 20-12.5 mg tab	13	furosemide 40 mg tablet	45
folic acid 5 mg/ml vial	80	fosphenytoin 100 mg pe/2 ml vl	85	furosemide 40 mg/4 ml syringe	45
FOLIVANE-F CAPSULE	80	fosphenytoin 500 mg pe/10 ml	85	furosemide 40 mg/5 ml soln	45
FOLIVANE-F CAPSULE	89	FOSRENOL 1,000 MG POWDER PACK	78	furosemide 80 mg tablet	45
FOLIVANE-PLUS CAPSULE	80	FOSRENOL 1,000 MG TABLET CHEW	78	FUSILEV I.V. 50 MG VIAL	27
FOLIVANE-PLUS CAPSULE	89	FOSRENOL 500 MG TABLET CHEW	78	FUSION PLUS CAPSULE	80
FOLIXAPURE TABLET	80	FOSRENOL 750 MG POWDER PACKET	78	FUZEON 90 MG VIAL	24
FOLOTYN 20 MG/ML VIAL	26	FOSRENOL 750 MG TABLET CHEW	79	FYAVOLV 0.5 MG-2.5 MCG TABLET	53
FOLOTYN 40 MG/2 ML VIAL	26	FRAGMIN 10,000 UNITS/ML SYRING	17	FYAVOLV 1 MG-5 MCG TABLET	53
FOLTRATE TABLET	80	FRAGMIN 12,500 UNITS/0.5 ML	17	FYCOMPA 0.5 MG/ML ORAL SUSP	18
fomepizole 1.5 gm/1.5 ml vial	68	FRAGMIN 15,000 UNITS/0.6 ML	17	FYCOMPA 10 MG TABLET	18
fondaparinux 10 mg/0.8 ml syr	17	FRAGMIN 18,000 UNITS/0.72 ML	17	FYCOMPA 12 MG TABLET	18
fondaparinux 2.5 mg/0.5 ml syr	17	FRAGMIN 2,500 UNITS/0.2 ML SYR	17		
fondaparinux 5 mg/0.4 ml syr	17				
fondaparinux 7.5 mg/0.6 ml syr	17				

FYCOMPA 2 MG TABLET	18	GAMMAGARD LIQUID 10% VIAL 2.5 G/25 ML	65	gatifloxacin 0.5% eye drops	82
FYCOMPA 4 MG TABLET	18	GAMMAGARD S-D 10 G (IGA<1) SOL	65	GATTEX 5 MG 30-VIAL KIT	56
FYCOMPA 6 MG TABLET	18	GAMMAGARD S-D 5 G (IGA<1) SOLN	65	GAVILYTE-C SOLUTION	66
FYCOMPA 8 MG TABLET	18	GAMMAKED 1 GM/10 ML VIAL	65	GAVILYTE-G SOLUTION	66
gabapentin 100 mg capsule	56	GAMMAKED 10 GRAM/100 ML VIAL	65	GAVILYTE-N SOLUTION	66
gabapentin 250 mg/5 ml soln	56	GAMMAKED 2.5 GRAM/25 ML VIAL	65	GAZYVA 1,000 MG/40 ML VIAL	70
gabapentin 300 mg capsule	56	GAMMAKED 20 GRAM/200 ML VIAL	65	GELNIQUE 10% GEL SACHETS	29
gabapentin 400 mg capsule	56	GAMMAKED 5 GRAM/50 ML VIAL	65	gemcitabine 1 gram/26.3 ml vial	26
gabapentin 600 mg tablet	56	GAMMAPLEX 10 GRAM/200 ML VIAL	65	gemcitabine 2 gram/52.6 ml vial	26
gabapentin 800 mg tablet	56	GAMMAPLEX 5 GRAM/100 ML VIAL	65	gemcitabine 200 mg/5.26 ml vial	26
GABITRIL 12 MG TABLET	56	GAMUNEX-C 1 GM/10 ML VIAL	65	gemcitabine hcl 1 gram vial	26
GABITRIL 16 MG TABLET	56	GAMUNEX-C 10 GRAM/100 ML VIAL	65	gemcitabine hcl 2 gram vial	26
galantamine 4 mg/ml oral soln	40	GAMUNEX-C 2.5 GRAM/25 ML VIAL	65	gemcitabine hcl 200 mg vial	26
galantamine er 16 mg capsule	40	GAMUNEX-C 20 GRAM/200 ML VIAL	65	gemfibrozil 600 mg tablet	46
galantamine er 24 mg capsule	40	GAMUNEX-C 40 GRAM/400 ML VIAL	65	GENERLAC 10 GM/15 ML SOLUTION	66
galantamine er 8 mg capsule	40	GAMUNEX-C 5 GRAM/50 ML VIAL	65	GENGRAF 100 MG CAPSULE	63
galantamine hbr 12 mg tablet	40	ganciclovir 500 mg vial	18	GENGRAF 100 MG/ML SOLUTION	63
galantamine hbr 4 mg tablet	40	GARDASIL 9 SYRINGE	88	GENGRAF 25 MG CAPSULE	63
galantamine hbr 8 mg tablet	40	GARDASIL 9 VIAL	88	GENGRAF 50 MG CAPSULE	64
GAMASTAN S-D VIAL	65	GARDASIL SYRINGE	88	GENOTROPIN 12 MG CARTRIDGE	60
GAMMAGARD LIQUID 10% VIAL 1GM/10ML	65	GARDASIL VIAL	88	GENOTROPIN 5 MG CARTRIDGE	60

GENOTROPIN MINIQUICK 0.2 MG	60	gentamicin ped 20 mg/2 ml vial	11	glipizide 10 mg tablet	19
GENOTROPIN MINIQUICK 0.4 MG	61	GENVOYA TABLET	23	glipizide 5 mg tablet	19
GENOTROPIN MINIQUICK 0.6 MG	61	GEODON 20 MG/ML VIAL	8	glipizide er 10 mg tablet	19
GENOTROPIN MINIQUICK 0.8 MG	61	GIANVI 3 MG-0.02 MG TABLET	53	glipizide er 2.5 mg tablet	19
GENOTROPIN MINIQUICK 1 MG	61	GILDAGIA 0.4 MG-0.035 MG TAB	53	glipizide er 5 mg tablet	19
GENOTROPIN MINIQUICK 1.2 MG	61	GILDESS 1 MG-20 MCG TABLET	53	glipizide xl 10 mg tablet	19
GENOTROPIN MINIQUICK 1.4 MG	61	GILDESS 1.5 MG-30 MCG TABLET	53	glipizide xl 2.5 mg tablet	19
GENOTROPIN MINIQUICK 1.6 MG	61	GILDESS FE 1.5-30 TABLET	53	glipizide xl 5 mg tablet	19
GENOTROPIN MINIQUICK 1.8 MG	61	GILDESS FE 1-20 TABLET	53	glipizide-metformin 2.5-250 mg	19
GENOTROPIN MINIQUICK 2 MG	61	GILENYA 0.5 MG CAPSULE	71	glipizide-metformin 2.5-500 mg	19
GENTAK 0.3 % EYE OINTMENT	11	GILOTTRIF 20 MG TABLET	69	glipizide-metformin 5-500 mg	19
gentamicin 0.1% cream	11	GILOTTRIF 30 MG TABLET	69	GLUCAGEN 1 MG HYPOKIT	58
gentamicin 0.1% ointment	11	GILOTTRIF 40 MG TABLET	69	GLUCAGON 1 MG EMERGENCY KIT	58
gentamicin 0.3% eye drops	11	GLASSIA 1 GM/50 ML VIAL	83	GLUMETZA ER 1,000 MG TABLET	19
gentamicin 0.3% eye ointment	11	GLEOSTINE 10 MG CAPSULE	10	GLUMETZA ER 500 MG TABLET	19
gentamicin 10 mg/ml vial	11	GLEOSTINE 100 MG CAPSULE	10	glyburide 1.25 mg tablet	19
gentamicin 20 mg/2 ml vial	11	GLEOSTINE 40 MG CAPSULE	10	glyburide 2.5 mg tablet	19
gentamicin 70 mg/ns 50 ml pb	11	GLEOSTINE 5 MG CAPSULE	10	glyburide 5 mg tablet	19
gentamicin 80 mg/2 ml vial	11	glimepiride 1 mg tablet	19	glyburide micro 1.5 mg tab	19
gentamicin 80 mg/ns 100 ml pb	11	glimepiride 2 mg tablet	19	glyburide micro 3 mg tablet	19
gentamicin 90 mg/ns 100 ml pb	11	glimepiride 4 mg tablet	19	glyburide micro 6 mg tablet	19

glyburide-metformin 2.5- 500 mg	19	guaifenesin dac oral solution	41	haloperidol lac 2 mg/ml conc	7
glyburide-metformin 5- 500 mg	19	guaifenesin-codeine syrup	41	haloperidol lac 5 mg/ml vial	7
glyburid-metformin 1.25- 250 mg	19	guanfacine 1 mg tablet	11	HARVONI 90-400 MG TABLET	23
glycopyrrolate 0.2 mg/ml vial	29	guanfacine 2 mg tablet	11	HAVRIX 1,440 UNITS/ML VIAL	88
glycopyrrolate 1 mg tablet	29	guanfacine hcl er 1 mg tablet	31	HAVRIX 720 UNIT/0.5 ML SYRINGE	88
glycopyrrolate 2 mg tablet	29	guanfacine hcl er 2 mg tablet	31	HEATHER TABLET	81
glycopyrrolate 4 mg/20 ml vial	29	guanfacine hcl er 3 mg tablet	31	HECORIA 0.5 MG CAPSULE	64
GLYDO 2% JELLY SYRINGE	66	guanfacine hcl er 4 mg tablet	31	HECORIA 1 MG CAPSULE	64
GOLYTELY PACKET	66	guanidine hcl 125 mg tablet	78	HECORIA 5 MG CAPSULE	64
GRAFCO SILVER NIT APPLICATOR	43	GYNAZOLE 1 2% CREAM	22	HEMATINIC-FOLIC ACID TABLET	80
gransetron hcl 0.1 mg/ml vial	51	HALAVEN 1 MG/2 ML VIAL	27	HEMATINIC-FOLIC ACID TABLET	89
gransetron hcl 1 mg tablet	51	halobetasol prop 0.05% cream	59	HEMATINIC-VITAMIN- MINERAL TAB	80
gransetron hcl 1 mg/ml vial	51	halobetasol prop 0.05% ointment	59	HEMATINIC-VITAMIN- MINERAL TAB	89
gransetron hcl 4 mg/4 ml vial	51	haloperidol 0.5 mg tablet	7	HEMATOGEN FA SOFTGEL	89
GRANULEX SPRAY	43	haloperidol 1 mg tablet	7	HEMATOGEN FORTE SOFTGEL	80
griseofulvin 125 mg/5 ml susp	21	haloperidol 10 mg tablet	7	HEMATOGEN FORTE SOFTGEL	89
griseofulvin micro 500 mg tab	21	haloperidol 2 mg tablet	7	HEMATOGEN SOFTGEL	80
griseofulvin ultra 125 mg tab	21	haloperidol 20 mg tablet	7	HEMATOGEN SOFTGEL	90
griseofulvin ultra 250 mg tab	21	haloperidol 5 mg tablet	7	HEMATRON-AF SR CAPLET	80
GRX HICORT 25 MG SUPPOSITORY	43	haloperidol dec 100 mg/ml vial	7	HEMATRON-AF SR CAPLET	90
guaifen-codeine 100-10 mg/5 ml	41	haloperidol dec 50 mg/ml vial	7	HEMAX CAPLET	90
guaifenesin ac cough syrup	41			HEMETAB IRON SUPPLEMENT TABLET	80

HEMETAB IRON SUPPLEMENT TABLET	90	HEPATAMINE 8% IV SOLUTION	48	HUMALOG MIX 75-25 KWIKPEN	66
HEMOREX-HC 25 MG SUPPOSITORY	43	HERCEPTIN 150 MG VIAL	70	HUMALOG MIX 75-25 VIAL	66
HEMOREX-HC 30 MG SUPPOSITORY	43	HERCEPTIN 440 MG VIAL	70	HUMIRA 10 MG/0.2 ML SYRINGE	64
HEMOCYTE PLUS CAPSULE	80	HETLIOZ 20 MG CAPSULE	40	HUMIRA 20 MG/0.4 ML SYRINGE	64
HEMOCYTE PLUS CAPSULE	90	HEXALEN 50 MG CAPSULE	10	HUMIRA 40 MG/0.8 ML PEN	64
HEMOCYTE-F ELIXIR	90	HIBERIX VACCINE WITH DILUENT	88	HUMIRA 40 MG/0.8 ML SYRINGE	64
HEMOCYTE-F ELIXIR, TAB	80	HIZENTRA 1 GRAM/5 ML VIAL	65	HUMIRA PEDIATRIC CROHN'S START	64
HEMOCYTE-F TABLET	90	HIZENTRA 10 GRAM/50 ML VIAL	65	HUMIRA PEN CROHN-UC-HS STARTER	64
heparin 10,000 unit/10 ml vial	17	HIZENTRA 2 GRAM/10 ML VIAL	65	HUMIRA PEN PSORIASIS-UVEITIS	64
heparin 10,000 units/5 ml vial	17	HIZENTRA 4 GRAM/20 ML VIAL	65	HUMULIN 70/30 KWIKPEN	66
heparin 20,000 unit/500 ml-d5w	17	HORIZANT ER 300 MG TABLET	40	HUMULIN 70-30 VIAL	66
heparin 25,000 unit/250-1/2 ns	17	HORIZANT ER 600 MG TABLET	40	HUMULIN N 100 UNITS/ML KWIKPEN	66
heparin 25,000 units/10 ml vial	17	HP ACTHAR GEL 80 UNIT/ML VIAL	61	HUMULIN N 100 UNITS/ML VIAL	66
heparin 50,000 unit/10 ml vial	17	HPR EMOLLIENT FOAM	43	HUMULIN R 100 UNITS/ML VIAL	66
heparin sod 10,000 unit/ml vl	17	HPR PLUS CREAM	43	HUMULIN R 500 UNITS/ML KWIKPEN	66
heparin sod 20,000 unit/ml vl	17	HPR PLUS EMOLLIENT FOAM	43	HUMULIN R 500 UNITS/ML VIAL	66
heparin sod 5,000 unit/0.5 ml	17	HUMALOG 100 UNITS/ML CARTRIDGE	65	hydralazine 10 mg tablet	89
heparin-1/2ns 25,000 units/500	17	HUMALOG 100 UNITS/ML KWIKPEN	65	hydralazine 100 mg tablet	89
heparin-d5w 25,000 unit/250 ml	17	HUMALOG 100 UNITS/ML VIAL	65	hydralazine 20 mg/ml vial	89
heparin-d5w 25,000 unit/500 ml	17	HUMALOG 200 UNITS/ML KWIKPEN	65	hydralazine 25 mg tablet	89
heparin-ns 1,000 units/500 ml	17	HUMALOG MIX 50-50 KWIKPEN	65	hydralazine 50 mg tablet	89
heparin-ns 2,000 unit/1,000 ml	17	HUMALOG MIX 50-50 VIAL	65	HYDRO 35 FOAM	43

hydrochlorothiazide 12.5 mg cp	45	hydrocort-iodoquinol- aloe sach	43	hydrocort-pram 2.5%- 1% crm kit	43
hydrochlorothiazide 12.5 mg tb	45	hydrocortison-acetic acid soln	78	hydrocort-pramoxine 1%-1% crm	43
hydrochlorothiazide 25 mg tab	45	hydrocortisone 1% absorbase	59	hydrocort-pramoxine 2.5%-1% cm	43
hydrochlorothiazide 50 mg tab	45	hydrocortisone 1% cream	59	hydrocort-pramoxine 2.5-1% crm	43
hydrocodon-acetamin 7.5-325/15	76	hydrocortisone 1% ointment	59	hydromet syrup	41
hydrocodon- acetaminoph 2.5-325	76	hydrocortisone 10 mg tablet	59	hydromorphone 1 mg/ml solution	77
hydrocodon- acetaminoph 7.5-300	76	hydrocortisone 100 mg/60 ml	57	hydromorphone 1 mg/ml syringe	77
hydrocodon- acetaminoph 7.5-325	76	hydrocortisone 2.5% cream	59	hydromorphone 10 mg/ml vial	77
hydrocodon- acetaminophen 5-300	76	hydrocortisone 2.5% lotion	59	hydromorphone 2 mg tablet	77
hydrocodon- acetaminophen 5-325	76	hydrocortisone 2.5% ointment	59	hydromorphone 2 mg/ml isecure	77
hydrocodon- acetaminophn 10-300	76	hydrocortisone 20 mg tablet	59	hydromorphone 2 mg/ml vial	77
hydrocodon- acetaminophn 10-325	76	hydrocortisone 5 mg tablet	59	hydromorphone 3 mg suppos	77
hydrocodone-acetamin 10-325/15	76	hydrocortisone ac 25 mg supp	43	hydromorphone 4 mg tablet	77
hydrocodone-chlorphen er susp	41	hydrocortisone ac 30 mg supp	43	hydromorphone 4 mg/ml carpujct	77
hydrocodone- homatropine syrup	41	hydrocortisone buty 0.1% cream	59	hydromorphone 50 mg/5 ml vial	77
hydrocodone-ibuprofen 10-200	76	hydrocortisone butyr 0.1% oint	59	hydromorphone 8 mg tablet	77
hydrocodone-ibuprofen 2.5-200	76	hydrocortisone butyr 0.1% soln	59	hydroxocobalamin 1,000 mcg/ml	80
hydrocodone-ibuprofen 5-200 mg	76	hydrocortisone val 0.2% cream	59	hydroxychloroquine 200 mg tab	29
hydrocodone-ibuprofen 7.5-200	77	hydrocortisone val 0.2% ointmt	59	hydroxyprogesterone 1.25 g/5ml	81
hydrocort buty 0.1% lipid crm	59	hydrocortisone- iodoquinol crm	43	hydroxyurea 500 mg capsule	26
hydrocort buty 0.1% lipo cream	59	hydrocortisone- pramoxine cream	43	hydroxyzine 10 mg/5 ml soln	21

hydroxyzine 25 mg/ml vial	23	HYSINGLA ER 20 MG TABLET	75	IFEREX 150 FORTE CAPSULE	80
hydroxyzine 50 mg/ml vial	23	HYSINGLA ER 30 MG TABLET	75	IFEREX 150 FORTE CAPSULE	90
hydroxyzine hcl 10 mg tablet	21	HYSINGLA ER 40 MG TABLET	75	ifosfamide 1 gm vial	10
hydroxyzine hcl 25 mg tablet	21	HYSINGLA ER 60 MG TABLET	75	ifosfamide 1 gm/20 ml vial	10
hydroxyzine hcl 50 mg tablet	23	HYSINGLA ER 80 MG TABLET	75	ifosfamide 3 gm vial	10
hydroxyzine pam 100 mg cap	23	ibandronate 3 mg/3 ml vial	68	ifosfamide 3 gm/ 60 ml vial	10
hydroxyzine pam 25 mg cap	23	ibandronate sodium 150 mg tab	68	ILARIS 150 MG/ML VIAL	65
hydroxyzine pam 50 mg cap	23	IBRANCE 100 MG CAPSULE	69	ILARIS 180 MG VIAL	65
HYLATOPIC EMOLlient FOAM	43	IBRANCE 125 MG CAPSULE	69	ILEVRO 0.3% OPHTH DROPS	74
HYLATOPICPLUS CREAM	43	IBRANCE 75 MG CAPSULE	69	ILOTYCIN 0.5% EYE OINTMENT	67
HYLATOPICPLUS EMOLlient FOAM	43	IBUDONE 5-200 MG TABLET	77	imatinib mesylate 100 mg tab	69
HYOLEV MB TABLET	29	ibuprofen 100 mg/5 ml susp	72	imatinib mesylate 400 mg tab	69
hyoscyamine 0.125 mg odt	29	ibuprofen 400 mg tablet	72	IMBRUVICA 140 MG CAPSULE	69
hyoscyamine 0.125 mg tab sl	29	ibuprofen 600 mg tablet	72	IMFINZI 120 MG/2.4 ML VIAL	70
hyoscyamine 0.125 mg/5 ml elix	29	ibuprofen 800 mg tablet	72	IMFINZI 500 MG/10 ML VIAL	70
hyoscyamine 0.125 mg/ml drop	29	ICAR-C PLUS TABLET	80	imipenem-cilastatin 250 mg vl	35
hyoscyamine sr 0.375 mg tab	29	ICAR-C PLUS TABLET	90	imipenem-cilastatin 500 mg vl	35
hyoscyamine sulf 0.125 mg tab	29	ICLUSIG 15 MG TABLET	69	imipramine hcl 10 mg tablet	87
HYPERTYTE CR VIAL	48	ICLUSIG 45 MG TABLET	69	imipramine hcl 25 mg tablet	87
HYPER-SAL 7% VIAL	83	idarubicin hcl 10 mg/10 ml vl	27	imipramine hcl 50 mg tablet	87
HYSINGLA ER 100 MG TABLET	75	idarubicin hcl 20 mg/20 ml vl	27	imipramine pamoate 100 mg cap	87
HYSINGLA ER 120 MG TABLET	75	idarubicin hcl 5 mg/5 ml vial	27		

imipramine pamoate 125 mg cap	87	INTEGRA F CAPSULE	90	INVEGA TRINZA 273 MG/0.875 ML	8
imipramine pamoate 150 mg cap	87	INTEGRA PLUS CAPSULE	80	INVEGA TRINZA 410 MG/1.315 ML	8
imipramine pamoate 75 mg cap	87	INTEGRA PLUS CAPSULE	90	INVEGA TRINZA 546 MG/1.75 ML	8
imiquimod 5% cream packet	43	INTELENCE 100 MG TABLET	24	INVEGA TRINZA 819 MG/2.625 ML	8
IMOVAX RABIES VACCINE+DILUENT	88	INTELENCE 200 MG TABLET	24	INVIRASE 200 MG CAPSULE	25
INCRELEX 40 MG/4 ML VIAL	61	INTELENCE 25 MG TABLET	24	INVIRASE 500 MG TABLET	25
INCRUSE ELLIPTA 62.5 MCG INH	37	INTRALIPID 20% IV FAT EMUL	68	INVOKAMET 150-1,000 MG TABLET	19
indapamide 1.25 mg tablet	45	INTRALIPID 30% IV FAT EMUL	48	INVOKAMET 150-500 MG TABLET	19
indapamide 2.5 mg tablet	45	INTRAROSA	84	INVOKAMET 50-1,000 MG TABLET	19
indomethacin 25 mg capsule	72	INTRON A 10 MILLION UNITS VIAL	22	INVOKAMET 50-500 MG TABLET	19
indomethacin 50 mg capsule	72	INTRON A 18 MILLION UNIT/3 ML	22	INVOKAMET XR 150- 1,000 MG TAB	19
indomethacin er 75 mg capsule	72	INTRON A 18 MILLION UNITS VIAL	22	INVOKAMET XR 150- 500 MG TABLET	19
INFANRIX DTAP VIAL	88	INTRON A 25 MILLION UNIT/2.5ML	22	INVOKAMET XR 50- 1,000 MG TAB	19
INFED 100 MG/2 ML VIAL	80	INTRON A 50 MILLION UNITS VIAL	22	INVOKAMET XR 50- 500 MG TABLET	19
INFED 100 MG/2 ML VIAL	90	INTROVALE 0.15-0.03 MG TABLET	53	INVOKANA 100 MG TABLET	19
INFUMORPH 200 MG/20 ML AMPUL	75	INVANZ 1 GM ADD- VANTAGE VIAL	35	INVOKANA 300 MG TABLET	19
INFUMORPH 500 MG/20 ML AMPUL	75	INVANZ 1 GM	35	IONOSOL B-D5W IV SOLUTION	49
INFUVITE ADULT VIAL	80	INVEGA SUSTENNA 117 MG/0.75 ML	8	IONOSOL MB-D5W IV SOLUTION	49
INJECTAFER 750 MG/15 ML VIAL	80	INVEGA SUSTENNA 156 MG/ML SYRG	8	iophen-c nr liquid	41
INLYTA 1 MG TABLET	69	INVEGA SUSTENNA 234 MG/1.5 ML	8	IOPIDINE 1% EYE DROPS	74
INLYTA 5 MG TABLET	69	INVEGA SUSTENNA 39 MG/0.25 ML	8	IPOL VIAL	88
INTEGRA F CAPSULE	80	INVEGA SUSTENNA 78 MG/0.5 ML	8	iprat-albut 0.5-3(2.5) mg/3 ml	37

ipratropium 0.03% spray	37	ISOLYTE S IV SOLUTION-EXCEL	49	isoxyprine 20 mg tablet	39
ipratropium 0.06% spray	37	isomethopt-caff-acetaminophen	27	isradipine 2.5 mg capsule	38
ipratropium br 0.02% soln	37	isomethopt-dichloralp-acetamin	27	isradipine 5 mg capsule	38
irbesartan 150 mg tablet	13	isoniazid 100 mg tablet	30	ISTALOL 0.5% EYE DROPS	74
irbesartan 300 mg tablet	13	isoniazid 100 mg/ml vial	30	ISTODAX 10 MG KIT	27
irbesartan 75 mg tablet	13	isoniazid 300 mg tablet	30	itraconazole 100 mg capsule	22
irbesartan-hctz 150-12.5 mg tb	13	isoniazid 50 mg/5 ml solution	30	ivermectin 3 mg tablet	14
irbesartan-hctz 300-12.5 mg tb	13	isosorbide dn 10 mg tablet	89	IXEMPRA 15 MG KIT	27
IRESSA 250 MG TABLET	70	isosorbide dn 20 mg tablet	89	IXEMPRA 45 MG KIT	27
irinotecan hcl 100 mg/5 ml vl	27	isosorbide dn 30 mg tablet	89	IXIARO 6 MCG/0.5 ML SYRINGE	88
irinotecan hcl 40 mg/2 ml vial	27	isosorbide dn 5 mg tablet	89	JADENU 180 MG TABLET	50
irinotecan hcl 500 mg/25 ml vl	27	isosorbide dn er 40 mg tablet	89	JADENU 360 MG TABLET	50
IROSPAN 24/6 TABLET	80	isosorbide mn 10 mg tablet	89	JADENU 90 MG TABLET	50
IROSPAN 24/6 TABLET	90	isosorbide mn 20 mg tablet	89	JADENU SPRINKLE 180 MG GRANULE	50
ISENTRESS 100 MG POWDER PACKET	23	isosorbide mn er 120 mg tab	89	JADENU SPRINKLE 360 MG GRANULE	50
ISENTRESS 100 MG TABLET CHEW	23	isosorbide mn er 30 mg tablet	89	JADENU SPRINKLE 90 MG GRANULE	50
ISENTRESS 25 MG TABLET CHEW	23	isosorbide mn er 60 mg tablet	89	JAKAFI 10 MG TABLET	70
ISENTRESS 400 MG TABLET	23	isoton gentamicin 100 mg/50 ml	11	JAKAFI 15 MG TABLET	70
ISENTRESS HD 600 MG TABLET	24	isoton gentamicin 60 mg/50 ml	11	JAKAFI 20 MG TABLET	70
iso gentamicin 100 mg/100 ml	11	isoton gentamicin 80 mg/100 ml	11	JAKAFI 25 MG TABLET	70
ISOLYTE P-DEXTROSE 5% SOLN	49	isoton gentamicin 80 mg/50 ml	11	JAKAFI 5 MG TABLET	70
ISOLYTE S IV SOLN PH7.4	49	isoxyprine 10 mg tablet	39	JANTOVEN 1 MG TABLET	17

JANTOVEN 10 MG TABLET	17	JENTADUETO 2.5 MG-850 MG TAB	20	KABIVEN IV EMULSION	49
JANTOVEN 2 MG TABLET	17	JENTADUETO XR 2.5 MG-1,000 MG	20	KADCYLA 100 MG VIAL	70
JANTOVEN 2.5 MG TABLET	17	JENTADUETO XR 5 MG-1,000 MG TB	20	KADCYLA 160 MG VIAL	71
JANTOVEN 3 MG TABLET	17	JEVANTIQUE LO 0.5 MG-2.5 MCG	53	KAITLIB FE CHEWABLE TABLET	53
JANTOVEN 4 MG TABLET	17	JEVTANA 60 MG/1.5 ML KIT	28	KALBITOR 10 MG/ML VIAL	12
JANTOVEN 5 MG TABLET	17	JINTELI 1 MG-5 MCG TABLET	53	KALETRA 100-25 MG TABLET	25
JANTOVEN 6 MG TABLET	17	JOLESSA 0.15 MG-0.03 MG TABLET	53	KALETRA 200-50 MG TABLET	25
JANTOVEN 7.5 MG TABLET	17	JOLIVETTE TABLET	81	KALETRA 80 MG-20 MG/ML SOLN	25
JANUMET 50-1,000 MG TABLET	19	JULEBER 28 DAY TABLET	53	KALYDECO 150 MG TABLET	41
JANUMET 50-500 MG TABLET	19	JUNEL 1 MG-20 MCG TABLET	53	KALYDECO 50 MG GRANULES PACKET	41
JANUMET XR 100-1,000 MG TABLET	19	JUNEL 1.5 MG-30 MCG TABLET	53	KALYDECO 75 MG GRANULES PACKET	41
JANUMET XR 50-1,000 MG TABLET	19	JUNEL FE 1 MG-20 MCG TABLET	53	KARIVA 28 DAY TABLET	53
JANUMET XR 50-500 MG TABLET	19	JUNEL FE 1.5 MG-30 MCG TABLET	53	kcl 20 meq in d5w solution	49
JANUVIA 100 MG TABLET	20	JUNEL FE 24 TABLET	53	kcl 20 meq in d5w-0.2% nacl	49
JANUVIA 25 MG TABLET	20	JUXTAPID 10 MG CAPSULE	47	kcl 20 meq in d5w-0.225% nacl	49
JANUVIA 50 MG TABLET	20	JUXTAPID 20 MG CAPSULE	47	kcl 20 meq in d5w-0.33% nacl	49
JARDIANCE 10 MG TABLET	20	JUXTAPID 30 MG CAPSULE	47	kcl 20 meq in d5w-0.45% nacl	49
JARDIANCE 25 MG TABLET	20	JUXTAPID 40 MG CAPSULE	47	kcl 20 meq in d5w-lact ringer	49
JENCYCLLA 0.35 MG TABLET	81	JUXTAPID 5 MG CAPSULE	47	kcl 20 meq in d5w-ns	49
JENTADUETO 2.5 MG-1000 MG TAB	20	JUXTAPID 60 MG CAPSULE	47	kcl 20 meq-ns 1,000 ml iv soln	49
JENTADUETO 2.5 MG-500 MG TAB	20	K EFFERVESCENT 25 MEQ TABLET	49	kcl 40 meq in d5w solution	49

kcl 40 meq in d5w-lact ringer	49	ketorolac 60 mg/2 ml vial	72	KLOR-CON M20 TABLET	49
kcl 40 meq in d5w-nacl 0.9%	49	KEYTRUDA 100 MG/4 ML VIAL	71	KLOR-CON SPRINKLE ER 10 MEQ CP	49
kcl 40 meq-ns 1,000 ml iv soln	49	KEYTRUDA 50 MG VIAL	71	KLOR-CON SPRINKLE ER 8 MEQ CAP	49
KELNOR 1-35 28 TABLET	53	KIMIDESS 28 DAY TABLET	53	KOMBIGLYZE XR 2.5- 1,000 MG TAB	20
KENALOG-10 10 MG/ML VIAL	59	KINERET 100 MG/0.67 ML SYRINGE	64	KOMBIGLYZE XR 5- 1,000 MG TAB	20
KENALOG-40 40 MG/ML VIAL	59	KINRIX TIP-LOK SYRINGE	88	KOMBIGLYZE XR 5- 500 MG TABLET	20
KEPIVANCE 6.25 MG VIAL	41	KINRIX	88	KORLYM 300 MG TABLET	68
KETEK 300 MG TABLET	67	KIONEX 15 GM/60 ML SUSPENSION	50	K-PHOS #2 TABLET	49
KETEK 400 MG TABLET	67	KIONEX POWDER	50	K-PHOS NEUTRAL TABLET	49
ketoconazole 2% cream	22	KISQALI 200 MG DAILY DOSE	28	K-PHOS ORIGINAL TABLET	49
ketoconazole 2% shampoo	22	KISQALI 400 MG DAILY DOSE	28	KRISTALOSE 10 GM PACKET	66
ketoconazole 200 mg tablet	22	KISQALI 600 MG DAILY DOSE	28	KRISTALOSE 20 GM PACKET	66
ketoprofen 50 mg capsule	72	KISQALI FEMARA 200 MG CO-PACK	10	K-SOL 10% (20 MEQ/15 ML) LIQ	49
ketoprofen 75 mg capsule	72	KISQALI FEMARA 400 MG CO-PACK	10	KURVELO TABLET	53
ketorolac 0.4% ophth solution	74	KISQALI FEMARA 600 MG CO-PACK	10	KUVAN 100 MG POWDER PACKET	57
ketorolac 0.5% ophth solution	74	KLOR-CON 10 MEQ TABLET	49	KUVAN 100 MG TABLET	57
ketorolac 10 mg tablet	72	KLOR-CON 20 MEQ PACKET	49	KUVAN 500 MG POWDER PACKET	57
ketorolac 15 mg/ml vial	72	KLOR-CON 25 MEQ PACKET	49	KYNAMRO 200 MG/ML SYRINGE	47
ketorolac 30 mg/ml vial	72	KLOR-CON 8 MEQ TABLET	49	KYPROLIS 30 MG VIAL	51
ketorolac 300 mg/10 ml vial	72	KLOR-CON M10 TABLET	49	KYPROLIS 60 MG VIAL	51
ketorolac 60 mg/2 ml carpuject	72	KLOR-CON M15 TABLET	49	labetalol hcl 100 mg tablet	33

labetalol hcl 100 mg/20 ml vl	33	lamotrigine er 250 mg tablet	58	LARIN 21 1-20 TABLET	53
labetalol hcl 200 mg tablet	33	lamotrigine er 300 mg tablet	58	LARIN 24 FE 1 MG-20 MCG TABLET	53
labetalol hcl 300 mg tablet	33	lamotrigine er 50 mg tablet	58	LARIN FE 1.5-30 TABLET	53
LACRISERT 5 MG EYE INSERT	73	lamotrigine odt 100 mg tablet	58	LARIN FE 1-20 TABLET	53
lactated ringers injection	49	lamotrigine odt 200 mg tablet	58	LARISSIA-28 TABLET	53
lactated ringers irrigation	68	lamotrigine odt 25 mg tablet	58	LARTRUVO 190 MG/19 ML VIAL	28
lactic acid 10% e cream	43	lamotrigine odt 50 mg tablet	58	LARTRUVO 500 MG/50 ML VIAL	28
lactulose 10 gm/15 ml solution	66	lamotrigine odt kit (blue)	58	latanoprost 0.005% eye drops	73
lamivudine 10 mg/ml oral soln	24	lamotrigine odt kit (green)	58	LATUDA 120 MG TABLET	9
lamivudine 150 mg tablet	24	lamotrigine odt kit (orange)	58	LATUDA 20 MG TABLET	9
lamivudine 300 mg tablet	24	LANOXIN 125 MCG TABLET	40	LATUDA 40 MG TABLET	9
lamivudine hbv 100 mg tablet	22	LANOXIN 187.5 MCG TABLET	40	LATUDA 60 MG TABLET	9
lamivudine-zidovudine tablet	24	LANOXIN 250 MCG TABLET	40	LATUDA 80 MG TABLET	9
lamotrigine 100 mg tablet	57	LANOXIN 62.5 MCG TABLET	40	LAYOLIS FE CHEWABLE TABLET	53
lamotrigine 150 mg tablet	57	LANOXIN PED 100 MCG/ML AMPUL	40	LEENA 28 TABLET	53
lamotrigine 200 mg tablet	57	lansoprazol-amoxicil-clarithro	56	leflunomide 10 mg tablet	65
lamotrigine 25 mg disper tab	57	lansoprazole dr 15 mg capsule	81	leflunomide 20 mg tablet	65
lamotrigine 25 mg tablet	58	lansoprazole dr 30 mg capsule	81	LENVIMA 10 MG DAILY DOSE	70
lamotrigine 5 mg disper tablet	58	LANTUS 100 UNIT/ML VIAL	66	LENVIMA 14 MG DAILY DOSE	70
lamotrigine er 100 mg tablet	58	LANTUS SOLOSTAR 100 UNIT/ML	66	LENVIMA 18 MG DAILY DOSE	70
lamotrigine er 200 mg tablet	58	LARIN 1.5 MG-30 MCG TABLET	53	LENVIMA 20 MG DAILY DOSE	70
lamotrigine er 25 mg tablet	58				

LENVIMA 24 MG DAILY DOSE	70	levalbuterol conc 1.25 mg/0.5	37	levofloxacin 0.5% eye drops	82
LENVIMA 8 MG DAILY DOSE	70	levalbuterol tar hfa 45mcg inh	37	levofloxacin 25 mg/ml solution	82
LESSINA-28 TABLET	53	LEVEMIR 100 UNITS/ML VIAL	66	levofloxacin 250 mg tablet	82
LETAIRIS 10 MG TABLET	82	LEVEMIR FLEXTOUCH 100 UNITS/ML	66	levofloxacin 250 mg/50 ml-d5w	82
LETAIRIS 5 MG TABLET	82	levetiracetam 1,000 mg tablet	18	levofloxacin 500 mg tablet	82
letrozole 2.5 mg tablet	30	levetiracetam 100 mg/ml soln	18	levofloxacin 500 mg/100 ml-d5w	82
leucovorin calcium 10 mg tab	28	levetiracetam 250 mg tablet	18	levofloxacin 500 mg/20 ml vial	82
leucovorin calcium 100 mg vial	28	levetiracetam 500 mg tablet	18	levofloxacin 750 mg tablet	82
leucovorin calcium 15 mg tab	28	levetiracetam 500 mg/5 ml vial	18	levofloxacin 750 mg/150 ml-d5w	83
leucovorin calcium 200 mg vial	28	levetiracetam 750 mg tablet	18	levoleucovorin 175 mg/17.5 ml	28
leucovorin calcium 25 mg tab	28	levetiracetam er 500 mg tablet	18	levoleucovorin 250 mg/25 ml vl	28
leucovorin calcium 350 mg vial	28	levetiracetam er 750 mg tablet	18	levoleucovorin 50 mg vial	28
leucovorin calcium 5 mg tab	28	levetiracetam-nacl 1,000mg/100	18	levomefolate-algal cap	80
leucovorin calcium 50 mg vial	28	levetiracetam-nacl 1,500mg/100	18	LEVONEST-28 TABLET	53
leucovorin calcium 500 mg vl	28	levetiracetam-nacl 500 mg/100	18	levono-e estrad 0.10-0.02-0.01 91d	53
LEUKERAN 2 MG TABLET	10	LEVITRA	84	levono-e estrad 0.15-0.03-0.01 91d	53
LEUKINE 250 MCG VIAL	36	levobunolol 0.5% eye drops	74	levonor-eth estra 0.09-0.02 mg	53
leuprolide 2wk 14 mg/2.8 ml kt	62	levocarnitine 1 g/10 ml soln	68	levonor-eth estrad 0.1-0.02 mg	53
levalbuterol 0.31 mg/3 ml sol	37	levocarnitine 200 mg/ml vial	68	levonor-eth estrad 0.15-0.03	53
levalbuterol 0.63 mg/3 ml sol	37	levocarnitine 330 mg tablet	68	levonor-eth estrad 0.15-0.03 91d	54
levalbuterol 1.25 mg/3 ml sol	37	levocetirizine 2.5 mg/5 ml sol	23	levonor-eth estrad triphasic	54
		levocetirizine 5 mg tablet	23	LEVORA-28 TABLET	54

levorphanol 2 mg tablet	75	LEVOXYL 175 MCG TABLET	61	lidocaine hcl 2% vial	67
levothyroxine 100 mcg tablet	61	LEVOXYL 200 MCG TABLET	61	lidocaine hcl 4% ampul	67
levothyroxine 100 mcg vial	61	LEVOXYL 25 MCG TABLET	61	lidocaine hcl 4% solution	67
levothyroxine 112 mcg tablet	61	LEVOXYL 50 MCG TABLET	61	lidocaine-hc 2-2% cream kit	59
levothyroxine 125 mcg tablet	61	LEVOXYL 75 MCG TABLET	61	lidocaine-hc 3-0.5% cream kit	59
levothyroxine 137 mcg tablet	61	LEVOXYL 88 MCG TABLET	61	lidocaine-hc 3-1% cream kit	59
levothyroxine 150 mcg tablet	61	LEXIVA 50 MG/ML SUSPENSION	25	lidocaine-hc 3-2.5% gel kit	59
levothyroxine 175 mcg tablet	61	LEXIVA 700 MG TABLET	25	lidocaine-hydrocort 3-2.5% gel	60
levothyroxine 200 mcg tablet	61	LIALDA DR 1.2 GM TABLET	11	lidocaine-prilocaine cream	67
levothyroxine 200 mcg vial	61	LIBRAX CAPSULE	30	LIDOPIN 3% CREAM	43
levothyroxine 25 mcg tablet	61	lidocaine 2% viscous soln	66	lincomycin hcl 600 mg/2 ml vl	15
levothyroxine 300 mcg tablet	61	lidocaine 3% cream	43	lindane 1% lotion	78
levothyroxine 50 mcg tablet	61	lidocaine 5% ointment	66	lindane 1% shampoo	78
levothyroxine 500 mcg vial	61	lidocaine 5% patch	67	linezolid 100 mg/5 ml susp	15
levothyroxine 75 mcg tablet	61	lidocaine hcl 0.5% vial	67	linezolid 600 mg tablet	15
levothyroxine 88 mcg tablet	61	lidocaine hcl 1% abboject	14	linezolid 600 mg/300 ml iv sol	15
LEVOXYL 100 MCG TABLET	61	lidocaine hcl 1% ampul	67	linezolid iv soln	16
LEVOXYL 112 MCG TABLET	61	lidocaine hcl 1% vial	67	linezolid-0.9% nacl 600 mg/300	16
LEVOXYL 125 MCG TABLET	61	lidocaine hcl 1.5% ampul	67	LINZESS 145 MCG CAPSULE	66
LEVOXYL 137 MCG TABLET	61	lidocaine hcl 2% 40 mg/2 ml vl	67	LINZESS 290 MCG CAPSULE	66
LEVOXYL 150 MCG TABLET	61	lidocaine hcl 2% jelly	67	LINZESS 72 MCG CAPSULE	66
		lidocaine hcl 2% luer-jet	14	liothyronine sod 10 mcg/ml vl	61

liothyronine sod 25 mcg tab	61	lithium carbonate 300 mg tab	71	lorazepam 2 mg tablet	32
liothyronine sod 5 mcg tab	61	lithium carbonate 600 mg cap	71	lorazepam 2 mg/ml carpject	32
liothyronine sod 50 mcg tab	62	lithium carbonate er 300 mg tb	71	lorazepam 2 mg/ml oral concent	32
LIPODOX 2 MG/ML VIAL	28	lithium carbonate er 450 mg tb	71	lorazepam 2 mg/ml vial	32
LIPODOX 50 2 MG/ML VIAL	28	LITHOSTAT 250 MG TABLET	57	lorazepam 4 mg/ml carpject	32
LIPOSYN III 10% IV FAT EMULSN	68	LIVALO 1 MG TABLET	46	lorazepam 4 mg/ml vial	32
LIPOSYN III 20% IV FAT EMULSN	68	LIVALO 2 MG TABLET	46	LORAZEPAM INTENSOL 2 MG/ML	32
LIPOSYN III 30% IV FAT EMULSN	49	LIVALO 4 MG TABLET	46	LORCET 5-325 MG TABLET	77
LIQUID E-Z PAQUE 60% SUSP	68	I-methylfolate calcium	80	LORCET HD 10-325 MG TABLET	77
lisinopril 10 mg tablet	13	L-METHYLFOLATE FORTE	80	LORCET PLUS 7.5-325 MG TABLET	77
lisinopril 2.5 mg tablet	13	I-methylfolate tab, caplet	80	LORTAB 10-325 MG TABLET	77
lisinopril 20 mg tablet	13	LOKARA 0.05% LOTION	60	LORTAB 5-325 MG TABLET	77
lisinopril 30 mg tablet	14	LOMEDIA 24 FE 1 MG-20 MCG TAB	54	LORTAB 7.5-325 MG TABLET	77
lisinopril 40 mg tablet	14	LONSURF 15 MG-6.14 MG TABLET	26	LORYNA 3 MG-0.02 MG TABLET	54
lisinopril 5 mg tablet	14	LONSURF 20 MG-8.19 MG TABLET	27	losartan potassium 100 mg tab	13
lisinopril-hctz 10-12.5 mg tab	14	loperamide 2 mg capsule	56	losartan potassium 25 mg tab	13
lisinopril-hctz 20-12.5 mg tab	14	lopinavir-ritonavir 80-20mg/ml	25	losartan potassium 50 mg tab	13
lisinopril-hctz 20-25 mg tab	14	LOPREEZA 0.5 MG-0.1 MG TABLET	54	losartan-hctz 100-12.5 mg tab	13
lithium 8 meq/5 ml solution	71	LOPREEZA 1 MG-0.5 MG TABLET	54	losartan-hctz 100-25 mg tab	13
lithium carbonate 150 mg cap	71	LOPROX 0.77% CREAM KIT	43	losartan-hctz 50-12.5 mg tab	13
lithium carbonate 300 mg cap	71	lorazepam 0.5 mg tablet	32	LOTEMAX 0.5% EYE DROPS	74

LOTEMAX 0.5% EYE OINTMENT	74	LUPRON DEPOT-PED 11.25 MG 3MO	62	magnesium sulf 20 g/500 ml bag	49
LOTEMAX 0.5% OPHTHALMIC GEL	74	LUPRON DEPOT-PED 11.25 MG KIT	62	magnesium sulf 4 g/100 ml bag	49
lovastatin 10 mg tablet	46	LUPRON DEPOT-PED 15 MG KIT	62	magnesium sulf 4 g/50 ml bag	49
lovastatin 20 mg tablet	46	LUPRON DEPOT-PED 30 MG 3MO KIT	62	magnesium sulf 40 g/1,000 ml	49
lovastatin 40 mg tablet	46	LUPRON DEPOT-PED 7.5 MG KIT	62	magnesium sulfate 50% syringe	49
LOW-OGESTREL-28 TABLET	54	LUTERA-28 TABLET	54	magnesium sulfate 50% vial	49
loxapine 10 mg capsule	7	LYNPARZA 50 MG CAPSULE	70	MAKENA 250 MG/ML VIAL	81
loxapine 25 mg capsule	7	LYRICA 100 MG CAPSULE	39	malathion 0.5% lotion	78
loxapine 5 mg capsule	7	LYRICA 150 MG CAPSULE	39	maprotiline 25 mg tablet	18
loxapine 50 mg capsule	7	LYRICA 20 MG/ML ORAL SOLUTION	39	maprotiline 50 mg tablet	18
LUDENT FLUORIDE 0.25 MG TB CHW	49	LYRICA 200 MG CAPSULE	39	maprotiline 75 mg tablet	18
LUDENT FLUORIDE 0.5 MG TB CHEW	49	LYRICA 225 MG CAPSULE	39	MARGESIC CAPSULE	12
LUDENT FLUORIDE 1 MG TAB CHEW	49	LYRICA 25 MG CAPSULE	39	MARLISSA-28 TABLET	54
LUMIGAN 0.01% EYE DROPS	73	LYRICA 300 MG CAPSULE	39	MARPLAN 10 MG TABLET	70
LUMIZYME 50 MG VIAL	57	LYRICA 50 MG CAPSULE	39	MARQIBO KIT	28
LUPRON DEPOT 11.25 MG 3MO KIT	62	LYRICA 75 MG CAPSULE	39	MARTEN-TAB 325-50 TABLET	12
LUPRON DEPOT 22.5 MG 3MO KIT	62	LYSODREN 500 MG TABLET	62	MATULANE 50 MG CAPSULE	10
LUPRON DEPOT 3.75 MG KIT	62	LYZA 0.35 MG TABLET	81	MATZIM LA 180 MG TABLET	39
LUPRON DEPOT 45 MG 6MO KIT	62	M.V.I. ADULT VIAL	80	MATZIM LA 240 MG TABLET	39
LUPRON DEPOT 7.5 MG KIT	62	MAGNEBIND 400 RX TABLET	79	MATZIM LA 300 MG TABLET	39
LUPRON DEPOT-4 MONTH KIT	62	magnesium sulf 1 g/100 ml-d5w	18	MATZIM LA 360 MG TABLET	39
		magnesium sulf 2 g/50 ml bag	49	MATZIM LA 420 MG TABLET	39

MAXARON FORTE TABLET	80	megestrol acet 40 mg/ml susp	81	MENVEO A-C-Y-W-135- DIP VIAL KT	88
MAXARON FORTE TABLET	90	MEKINIST 0.5 MG TABLET	70	meperidine 10 mg/ml cartrdge	77
MAXFE CAPLET	80	MEKINIST 2 MG TABLET	70	meperidine 100 mg tablet	77
MAXFE CAPLET	90	meloxicam 15 mg tablet	72	meperidine 100 mg/ml vial	77
MAXIDEX 0.1% EYE DROPS	74	meloxicam 7.5 mg tablet	72	meperidine 25 mg/ml vial	77
MAXIFED CDX TABLET	41	meloxicam 7.5 mg/5 ml susp	72	meperidine 50 mg tablet	77
MAXIPHEN CD TABLET	41	melphalan 50 mg vial w- diluent	10	meperidine 50 mg/5 ml solution	77
MAXIPHEN CDX TABLET	41	memantine 5-10 mg titration pk	71	meperidine 50 mg/ml vial	77
m-clear wc liquid	41	memantine hcl 10 mg tablet	71	MEPHYTON 5 MG TABLET	80
meclizine 12.5 mg tablet	21	memantine hcl 2 mg/ml solution	72	meprobamate 200 mg tablet	30
meclizine 25 mg tablet	21	memantine hcl 5 mg tablet	72	meprobamate 400 mg tablet	30
meclofenamate 100 mg capsule	72	MENACTRA VIAL	88	mercaptopurine 50 mg tablet	27
meclofenamate 50 mg capsule	72	M-END MAX D LIQUID	41	meropenem iv 1 gm vial	35
MEDROL 2 MG TABLET	60	M-END PE LIQUID	41	meropenem iv 500 mg vial	35
medroxyprogesterone 10 mg tab	81	MENEST 0.3 MG TABLET	54	meropenem-0.9% nacl 1 gram/50	35
medroxyprogesterone 150 mg/ml	81	MENEST 0.625 MG TABLET	54	meropenem-0.9% nacl 500 mg/50	35
medroxyprogesterone 2.5 mg tab	81	MENEST 1.25 MG TABLET	54	mesalamine 4 gm/60 ml enema	11
medroxyprogesterone 5 mg tab	81	MENEST 2.5 MG TABLET	54	mesalamine 4 gm/60 ml kit	11
mefloquine hcl 250 mg tablet	29	MENHIBRIX VACCINE VIAL	88	mesalamine 800 mg dr tablet	11
megestrol 20 mg tablet	81	MENOMUNE-A-C-Y-W- 135 W-DILUENT	88	MESNA 1 GRAM/10 ML VIAL	28
megestrol 40 mg tablet	81	MENOSTAR 14 MCG/DAY PATCH	54	MESNEX 400 MG TABLET	28
megestrol 625 mg/5 ml susp	81				

MESTINON 60 MG/5 ML SYRUP	78	methadone hcl 10 mg tablet	75	methotrexate 200 mg/8 ml vial	64
METADATE ER 20 MG TABLET	31	methadone hcl 10 mg/ml vial	75	methotrexate 250 mg/10 ml vial	64
metaproterenol 10 mg tablet	37	methadone hcl 5 mg tablet	75	methotrexate 50 mg/2 ml vial	64
metaproterenol 10 mg/5 ml syr	37	METHADONE INTENSOL 10 MG/ML	75	methoxsalen 10 mg softgel	43
metaproterenol 20 mg tablet	37	METHADOSE 10 MG/ML ORAL CONC	75	methscopolamine brom 2.5 mg tb	29
METAXALL 800 MG TABLET	84	METHADOSE 40 MG TABLET DISPR	75	methscopolamine brom 5 mg tab	29
metaxalone 400 mg tablet	84	methamphetamine 5 mg tablet	31	methyclothiazide 5 mg tablet	45
metaxalone 800 mg tablet	84	methazolamide 25 mg tablet	74	methyldopa 250 mg tablet	11
metformin er 1,000 mg osm-tab	20	methazolamide 50 mg tablet	44	methyldopa 500 mg tablet	11
metformin hcl 1,000 mg tablet	20	methenamine hipp 1 gm tablet	16	methyldopa-hctz 250-15 mg tab	11
metformin hcl 500 mg tablet	20	methenamine md 1 gm tablet	16	methyldopa-hctz 250-25 mg tab	11
metformin hcl 850 mg tablet	20	methenamine md 500 mg tablet	16	methyldopate 250 mg/5 ml vial	11
metformin hcl er 1,000 mg tab (generic for glumetza)	20	methimazole 10 mg tablet	30	methylergonovine 0.2 mg/ml vl	68
metformin hcl er 500 mg osm-tb	20	methimazole 5 mg tablet	30	methylphenidate 10 mg chew tab	31
metformin hcl er 500 mg tab (generic for glumetza)	20	METHITEST 10 MG TABLET	12	methylphenidate 10 mg tablet	31
metformin hcl er 500 mg tablet	20	methocarbamol 500 mg tablet	84	methylphenidate 10 mg/5 ml sol	31
metformin hcl er 750 mg tablet	20	methocarbamol 750 mg tablet	84	methylphenidate 2.5 mg chew tb	31
methadone 10 mg/5 ml solution	75	methotrexate 1 gm vial	64	methylphenidate 20 mg tablet	31
methadone 10 mg/ml oral conc	75	methotrexate 1 gram/40 ml vial	64	methylphenidate 5 mg chew tab	31
methadone 5 mg/5 ml solution	75	methotrexate 100 mg/4 ml vial	64	methylphenidate 5 mg tablet	31
		methotrexate 2.5 mg tablet	64	methylphenidate 5 mg/5 ml soln	31

methylphenidate cd 10	31	methylprednisolone 4	60	metoprolol tartrate 25	33
mg cap		mg tablet		mg tab	
methylphenidate cd 20	31	methylprednisolone 40	60	metoprolol tartrate 37.5	33
mg cap		mg/ml vl		mg tb	
methylphenidate cd 30	31	methylprednisolone 8	60	metoprolol tartrate 50	33
mg cap		mg tab		mg tab	
methylphenidate cd 40	31	methylprednisolone 80	60	metoprolol tartrate 75	33
mg cap		mg/ml vl		mg tab	
methylphenidate cd 50	31	methylprednisolone ss	60	metoprolol-hctz 100-25	33
mg cap		125 mg		mg tab	
methylphenidate cd 60	31	methylprednisolone ss	60	metoprolol-hctz 100-50	33
mg cap		40 mg vl		mg tab	
methylphenidate er 10	31	metipranolol 0.3% eye	74	metoprolol-hctz 50-25	33
mg tab		drops		mg tab	
methylphenidate er 18	31	metoclopramide 10 mg	56	metronidazole 0.75%	16
mg tab		tablet		cream	
methylphenidate er 20	31	metoclopramide 10	56	metronidazole 0.75%	16
mg cap		mg/2 ml vial		lotion	
methylphenidate er 20	31	metoclopramide 5 mg	56	metronidazole 250 mg	16
mg tab		tablet		tablet	
methylphenidate er 27	31	metoclopramide 5 mg/5	56	metronidazole 375 mg	16
mg tab		ml soln		capsule	
methylphenidate er 30	31	metolazone 10 mg	45	metronidazole 500 mg	16
mg cap		tablet		tablet	
methylphenidate er 36	31	metolazone 2.5 mg	45	metronidazole 500	16
mg tab		tablet		mg/100 ml	
methylphenidate er 40	31	metolazone 5 mg	45	metronidazole topical	16
mg cap		tablet		0.75% gl	
methylphenidate er 54	31	metoprolol 1 mg/ml	33	metronidazole topical	16
mg tab		carpuject		1% gel	
methylphenidate la 20	31	metoprolol succ er 100	33	metronidazole vaginal	16
mg cap		mg tab		0.75% gl	
methylphenidate la 40	31	metoprolol succ er 200	33	mexiletine 150 mg	14
mg cap		mg tab		capsule	
methylphenidate sr 20	31	metoprolol succ er 25	33	mexiletine 200 mg	14
mg tab		mg tab		capsule	
methylprednisolone 16	60	metoprolol succ er 50	33	mexiletine 250 mg	14
mg tab		mg tab		capsule	
methylprednisolone 32	60	metoprolol tart 5 mg/5	33	MIACALCIN 400	68
mg tab		ml vial		UNIT/2 ML VIAL	
methylprednisolone 4	60	metoprolol tartrate 100	33	MICONAZOLE 3 200	22
mg dosepk		mg tab		MG VAG SUPP	

MICROGESTIN 21 1.5-30 TAB	54	MINIVELLE 0.0375 MG PATCH	54	MITIGARE 0.6 MG CAPSULE	22
MICROGESTIN 21 1-20 TABLET	54	MINIVELLE 0.05 MG PATCH	54	mitomycin 20 mg vial	28
MICROGESTIN 24 FE 1 MG-20 MCG	54	MINIVELLE 0.075 MG PATCH	54	mitomycin 40 mg vial	28
MICROGESTIN FE 1.5-30 TAB	54	MINIVELLE 0.1 MG PATCH	54	mitomycin 5 mg vial	28
MICROGESTIN FE 1-20 TABLET	54	minocycline 100 mg capsule	87	mitoxantrone 20 mg/10 ml vial	28
midazolam hcl 2 mg/ml syrup	32	minocycline 50 mg capsule	87	mitoxantrone 25 mg/12.5 ml vl	28
midodrine hcl 10 mg tablet	11	minocycline 75 mg capsule	87	mitoxantrone 30 mg/15 ml vial	28
midodrine hcl 2.5 mg tablet	11	minocycline hcl 100 mg tablet	87	M-M-R II VACCINE WITH DILUENT	88
midodrine hcl 5 mg tablet	11	minocycline hcl 50 mg tablet	87	MOBIC 15 MG TABLET	72
MIGERGOT SUPPOSITORY	51	minocycline hcl 75 mg tablet	87	MOBIC 7.5 MG TABLET	72
miglitol 100 mg tablet	20	minoxidil 10 mg tablet	89	modafinil 100 mg tablet	84
miglitol 25 mg tablet	20	minoxidil 2.5 mg tablet	89	modafinil 200 mg tablet	84
miglitol 50 mg tablet	20	mirtazapine 15 mg odt	18	moexipril hcl 15 mg tablet	14
MIGRAGESIC IDA CAPSULE	27	mirtazapine 15 mg tablet	18	moexipril hcl 7.5 mg tablet	14
MIMVEY 1-0.5 MG TABLET	54	mirtazapine 30 mg odt	18	moexipril-hctz 15-12.5 mg tab	14
MIMVEY LO 0.5-0.1 MG TABLET	54	mirtazapine 30 mg tablet	18	moexipril-hctz 15-25 mg tablet	14
MINITRAN 0.1 MG/HR PATCH	89	mirtazapine 45 mg odt	18	moexipril-hctz 7.5-12.5 mg tab	14
MINITRAN 0.2 MG/HR PATCH	89	mirtazapine 45 mg tablet	18	molindone hcl 10 mg tablet	7
MINITRAN 0.4 MG/HR PATCH	89	mirtazapine 7.5 mg tablet	18	molindone hcl 25 mg tablet	8
MINITRAN 0.6 MG/HR PATCH	89	misoprostol 100 mcg tablet	81	molindone hcl 5 mg tablet	8
MINIVELLE 0.025 MG PATCH	54	misoprostol 200 mcg tablet	81	mometasone furoate 0.1% cream	60

mometasone furoate 0.1% oint	60	morphine 15 mg/ml carpuject	77	morphine sulf er 60 mg tablet	75
mometasone furoate 0.1% soln	60	morphine 15 mg/ml vial	77	morphine sulfate 1 mg/ml vial	77
mometasone furoate 50 mcg spry	26	morphine 2 mg/ml isecure syr	77	morphine sulfate 25 mg/ml vl	77
MONDOXYNE NL 100 MG CAPSULE	87	morphine 2 mg/ml syringe	77	morphine sulfate 50 mg/ml vial	77
MONDOXYNE NL 50 MG CAPSULE	87	morphine 4 mg/ml isecure syr	77	morphine sulfate add- vantage 2	77
MONDOXYNE NL 75 MG CAPSULE	87	morphine 4 mg/ml syringe	77	morphine sulfate er 10 mg cap	75
MONO-LINYAH 28 TABLET	54	morphine 5 mg/ml syringe	77	morphine sulfate er 100 mg cap	75
MONONESSA 28 TABLET	54	morphine 5 mg/ml vial	77	morphine sulfate er 120 mg cap	75
montelukast sod 10 mg tablet	26	morphine 8 mg/ml isecure syrng	77	morphine sulfate er 20 mg cap	75
montelukast sod 4 mg granules	26	morphine 8 mg/ml syringe	77	morphine sulfate er 30 mg cap	75
montelukast sod 4 mg tab chew	26	morphine sulf 10 mg suppos	75	morphine sulfate er 45 mg cap	75
montelukast sod 5 mg tab chew	26	morphine sulf 10 mg/5 ml soln	77	morphine sulfate er 50 mg cap	75
MONUROL 3 GM SACHET	16	morphine sulf 100 mg/5 ml soln	77	morphine sulfate er 60 mg cap	75
MORGIDOX 100 MG CAPSULE	87	morphine sulf 20 mg suppos	75	morphine sulfate er 75 mg cap	75
MORGIDOX 1X100 MG KIT	87	morphine sulf 20 mg/5 ml soln	77	morphine sulfate er 80 mg cap	75
MORGIDOX 2X100 MG KIT	87	morphine sulf 30 mg suppos	75	morphine sulfate er 90 mg cap	75
MORGIDOX 50 MG CAPSULE	87	morphine sulf 5 mg suppos	75	morphine sulfate ir 15 mg tab	75
morphine 0.5 mg/ml vial	75	morphine sulf er 100 mg tablet	75	morphine sulfate ir 30 mg tab	75
morphine 1 mg/ml vial p- f	75	morphine sulf er 15 mg tablet	75	MOVIPREP POWDER PACKET	66
morphine 10 mg/ml isecure syrg	77	morphine sulf er 200 mg tablet	75	MOXEZA 0.5% EYE DROPS	83
morphine 10 mg/ml syringe	77	morphine sulf er 30 mg tablet	75	moxifloxacin 0.5% eye drops	83

moxifloxacin 400 mg/250 ml bag	83	MVC-FLUORIDE 0.25 MG TAB CHEW	90	MYZILRA-28 TABLET	54
moxifloxacin hcl 400 mg tablet	83	MVC-FLUORIDE 0.5 MG TAB CHEW	90	nabumetone 500 mg tablet	72
MOZOBIL 24 MG/1.2 ML VIAL	49	MVC-FLUORIDE 1 MG TAB CHEW	90	nabumetone 750 mg tablet	72
MULTAQ 400 MG TABLET	14	MYCAMINE 100 MG VIAL	22	nadolol 20 mg tablet	33
MULTIGEN CAPLET	80	MYCAMINE 50 MG VIAL	22	nadolol 40 mg tablet	33
MULTIGEN CAPLET	90	mycophenolate 200 mg/ml susp	64	nadolol 80 mg tablet	33
MULTIGEN FOLIC CAPLET	80	mycophenolate 250 mg capsule	64	nadolol-bendroflu 40-5 mg tab	33
MULTIGEN FOLIC CAPLET	90	mycophenolate 500 mg tablet	64	nadolol-bendroflu 80-5 mg tab	33
MULTIGEN PLUS CAPLET	80	mycophenolate 500 mg vial	64	nafcillin 1 gm add-van vial	35
MULTIGEN PLUS CAPLET	90	mycophenolic acid dr 180 mg tb	64	nafcillin 1 gm vial	35
multi-vit w-fluor 0.25 mg/ml	90	mycophenolic acid dr 360 mg tb	64	nafcillin 1 gm/ 50 ml inj	35
multi-vit w-fluor 0.5 mg/ml	90	MYFERON-150 FORTE CAPSULE	80	nafcillin 10 gm vial	35
multivitamins/fluoride	90	MYFERON-150 FORTE CAPSULE	90	nafcillin 2 gm add-vant vial	35
multivit-fluor 0.25 mg tab chw	90	MYFORTIC 180 MG TABLET	64	nafcillin 2 gm vial	35
multivit-fluor 0.25 mg/ml drop	90	MYFORTIC 360 MG TABLET	64	nafcillin 2 gm/ 100 ml inj	35
multivit-fluor 0.5 mg tab chew	90	MYORISAN 10 MG CAPSULE	43	naftifine hcl 1% cream	22
multivit-fluor 0.5 mg/ml drop	90	MYORISAN 20 MG CAPSULE	43	naftifine hcl 2% cream	22
multivit-fluoride 1 mg tab chw	90	MYORISAN 30 MG CAPSULE	43	NAFTIN 1% GEL	22
multivit-iron-fl 0.25 mg/ml	90	MYORISAN 40 MG CAPSULE	43	NAFTIN 2% CREAM	22
mupirocin 2% cream	16	MYRBETRIQ ER 25 MG TABLET	29	NAFTIN 2% GEL	22
mupirocin 2% ointment	16	MYRBETRIQ ER 50 MG TABLET	29	NAGLAZYME 5 MG/5 ML VIAL	57
MUSE	84			nalbuphine 100 mg/10 ml vial	77
MUSTARGEN 10 MG VIAL	10				

nalbuphine 200 mg/10 ml vial	77	naproxen sodium 275 mg tab	73	nefazodone hcl 100 mg tablet	18
naloxone 0.4 mg/ml vial	78	naproxen sodium 550 mg tab	73	nefazodone hcl 150 mg tablet	18
naloxone 2 mg/2 ml syringe	78	naratriptan hcl 1 mg tablet	83	nefazodone hcl 200 mg tablet	18
naltrexone 50 mg tablet	78	naratriptan hcl 2.5 mg tablet	83	nefazodone hcl 250 mg tablet	19
NAMENDA XR 14 MG CAPSULE	72	NARCAN 4 MG NASAL SPRAY	78	nefazodone hcl 50 mg tablet	19
NAMENDA XR 21 MG CAPSULE	72	NASCOBAL 500 MCG NASAL SPRAY	80	neo-bacit-poly-hc eye ointment	16
NAMENDA XR 28 MG CAPSULE	72	NASONEX 50 MCG NASAL SPRAY	26	neomyc-bacit-polymix eye oint	16
NAMENDA XR 7 MG CAPSULE	72	NATACYN EYE DROPS	22	neomycin 500 mg tablet	11
NAMENDA XR TITRATION PACK	72	nateglinide 120 mg tablet	20	neomycin-poly-hc eye drops	16
NAMZARIC 14 MG-10 MG CAPSULE	18	nateglinide 60 mg tablet	20	neomycin-polymyxin-hc ear soln	78
NAMZARIC 21 MG-10 MG CAPSULE	18	NATPARA 100 MCG DOSE CARTRIDGE	68	neomycin-polymyxin-hc ear susp	78
NAMZARIC 28 MG-10 MG CAPSULE	18	NATPARA 25 MCG DOSE CARTRIDGE	68	neomyc-polym-dexamet eye ointm	74
NAMZARIC 7 MG-10 MG CAPSULE	18	NATPARA 50 MCG DOSE CARTRIDGE	68	neomyc-polym-dexameth eye drop	74
NAMZARIC TITRATION PACK	18	NATPARA 75 MCG DOSE CARTRIDGE	68	neomyc-polym-gramicid eye drop	16
naphazoline 0.1% eye drops	73	NEBUPENT 300 MG INHAL POWDER	29	neomy-polymyxin b 40 mg/ml amp	11
naproxen 125 mg/5 ml suspen	72	NEBUSAL 3% VIAL	83	NEO-POLYCIN EYE OINTMENT	16
naproxen 250 mg tablet	72	NEBUSAL 6% VIAL	83	NEO-POLYCIN HC EYE OINTMENT	16
naproxen 375 mg tablet	72	NECON 0.5-35-28 TABLET	54	NEORAL 100 MG GELATIN CAPSULE	64
naproxen 500 mg tablet	73	NECON 10-11-28 TABLET	54	NEORAL 100 MG/ML SOLUTION	64
naproxen dr 375 mg tablet	73	NECON 1-35-28 TABLET	54	NEORAL 25 MG GELATIN CAPSULE	64
naproxen dr 500 mg tablet	73	NECON 1-50-28 TABLET	54	NEOSALUS CP CREAM	43
		NECON 7-7-7-28 TABLET	54	NEOSALUS CREAM	43

NEOSALUS FOAM	43	niacin er 750 mg tablet	47	NINLARO 2.3 MG CAPSULE	28
NEO-SYNALAR 0.5-0.025% CRM KIT	43	NIACOR 500 MG TABLET	47	NINLARO 3 MG CAPSULE	28
NEPHRAMINE 5.4% IV SOLUTION	49	NIASPAN ER 1,000 MG TABLET	47	NINLARO 4 MG CAPSULE	28
NEPHRON FA TABLET	80	NIASPAN ER 500 MG TABLET	47	NIPENT 10 MG VIAL	27
NEPHRON FA TABLET	90	NIASPAN ER 750 MG TABLET	47	nisoldipine er 17 mg tablet	39
NERLYNX 40 MG TABLET	28	nicardipine 20 mg capsule	39	nisoldipine er 20 mg tablet	39
NEUAC GEL	43	nicardipine 25 mg/10 ml vial	39	nisoldipine er 25.5 mg tablet	39
NEUMEGA 5 MG VIAL	36	nicardipine 30 mg capsule	39	nisoldipine er 30 mg tablet	39
NEUPRO 1 MG/24 HR PATCH	45	NICOTROL CARTRIDGE INHALER	84	nisoldipine er 34 mg tablet	39
NEUPRO 2 MG/24 HR PATCH	45	NICOTROL NS 10 MG/ML SPRAY	84	nisoldipine er 40 mg tablet	39
NEUPRO 3 MG/24 HR PATCH	45	NIFEDICAL XL 30 MG TABLET	39	nisoldipine er 8.5 mg tablet	39
NEUPRO 4 MG/24 HR PATCH	45	NIFEDICAL XL 60 MG TABLET	39	NITRO-BID 2% OINTMENT	89
NEUPRO 6 MG/24 HR PATCH	45	nifedipine 10 mg capsule	39	NITRO-DUR 0.3 MG/HR PATCH	89
NEUPRO 8 MG/24 HR PATCH	45	nifedipine 20 mg capsule	39	NITRO-DUR 0.8 MG/HR PATCH	89
NEURIN-SL TABLET SL	80	nifedipine er 30 mg tablet	39	nitrofurantoin 25 mg/5 ml susp	16
NEVANAC 0.1% DROPTAINER	74	nifedipine er 60 mg tablet	39	nitrofurantoin mcr 100 mg cap	16
nevirapine 200 mg tablet	24	nifedipine er 90 mg tablet	39	nitrofurantoin mcr 25 mg cap	16
nevirapine 50 mg/5 ml susp	24	NIFEREX TABLET	90	nitrofurantoin mcr 50 mg cap	16
nevirapine er 100 mg tablet	24	NIKKI 3 MG-0.02 MG TABLET	54	nitrofurantoin mono-mcr 100 mg	16
nevirapine er 400 mg tablet	24	nilutamide 150 mg tablet	14	nitroglycerin 0.1 mg/hr patch	89
NEXAVAR 200 MG TABLET	70	nimodipine 30 mg capsule	39	nitroglycerin 0.2 mg/hr patch	89
niacin er 1,000 mg tablet	47				
niacin er 500 mg tablet	47				

nitroglycerin 0.3 mg tablet sl	89	noreth-estradiol 1-0.02(24)-75	54	NORTREL 0.5-35-28 TABLET	54
nitroglycerin 0.4 mg tablet sl	89	norethindrel estradiol 0.5-2.5	54	NORTREL 1-35 21 TABLET	54
nitroglycerin 0.4 mg/hr patch	89	norethindrel estradiol 1-0.02 mg	54	NORTREL 1-35 28 TABLET	54
nitroglycerin 0.6 mg tablet sl	89	norethindrone 0.35 mg tablet	81	NORTREL 7-7-7-28 TABLET	54
nitroglycerin 0.6 mg/hr patch	89	norethindrone 5 mg tablet	81	nortriptyline 10 mg/5 ml sol	87
nitroglycerin 5 mg/ml vial	89	norethynodiol 0.025 mg	54	nortriptyline hcl 10 mg cap	87
nitroglycerin er 2.5 mg cap	39	norethynodiol estradiol 1 mg-5 mcg	54	nortriptyline hcl 25 mg cap	87
nitroglycerin er 6.5 mg cap	39	norg-ee 0.18-0.215-0.25/0.025	54	nortriptyline hcl 50 mg cap	87
nitroglycerin er 9 mg capsule	39	norg-ee 0.18-0.215-0.25/0.035	54	nortriptyline hcl 75 mg cap	87
nitroglycerin lingual 0.4 mg	89	norgestimate 0.25-0.035 mg	54	NORVIR 100 MG SOFTGEL CAP	25
NITROSTAT 0.3 MG TABLET SL	89	noritate 1% cream	16	NORVIR 100 MG TABLET	25
NITROSTAT 0.4 MG TABLET SL	89	NORLYROC 0.35 MG TABLET	81	NORVIR 80 MG/ML SOLUTION	25
NITROSTAT 0.6 MG TABLET SL	89	NORMOSOL-M AND DEXTROSE 5%	49	NOVAREL 10,000 UNITS VIAL	61
NITRO-TIME ER 2.5 MG CAPSULE	39	NORMOSOL-R IV SOLUTION	49	NOVOFINE 30G X 1/3" NEEDLES	68
NITRO-TIME ER 6.5 MG CAPSULE	39	NORMOSOL-R PH 7.4 IV SOLUTION	49	NOVOFINE 31G X 1/4" NEEDLES	68
NITRO-TIME ER 9 MG CAPSULE	39	NORMOSOL-R-DEXTROSE 5% IV SOLN	49	NOVOFINE 32G NEEDLES	68
nizatidine 150 mg capsule	58	NORPACE CR 100 MG CAPSULE	14	NOVOFINE AUTOCOVER 30G NEEDLE	68
nizatidine 300 mg capsule	58	NORPACE CR 150 MG CAPSULE	15	NOVOLIN 70-30 100 UNIT/ML VIAL	66
NODOLOR CAPSULE	27	NORTHERA 100 MG CAPSULE	40	NOVOLIN N 100 UNITS/ML VIAL	66
NORA-BE TABLET	81	NORTHERA 200 MG CAPSULE	40	NOVOLIN R 100 UNITS/ML VIAL	66
noret-estradiol 0.4-0.035(21)-75	54	NORTHERA 300 MG CAPSULE	40	NOVOLOG 100 UNIT/ML CARTRIDGE	66
noreth-estradiol 1-0.02(21)-75	54				

NOVOLOG 100 UNIT/ML VIAL	66	NUTRILYTE II VIAL	49	octreotide acet 0.05 mg/ml vl	63
NOVOLOG 100 UNITS/ML FLEXPEN	66	NUTRILYTE VIAL	49	octreotide acet 100 mcg/ml vl	63
NOVOLOG MIX 70-30 FLEXPEN SYRN	66	NUTRIVIT LIQUID	80	octreotide acet 200 mcg/ml vl	63
NOVOLOG MIX 70-30 VIAL	66	NUVARING VAGINAL RING	54	octreotide acet 500 mcg/ml vl	63
NOVOTWIST NEEDLE 30G 8MM	69	NUVIGIL 150 MG TABLET	84	ODEFSEY TABLET	24
NOVOTWIST NEEDLE 32G 5MM	69	NUVIGIL 200 MG TABLET	84	ODOMZO 200 MG CAPSULE	28
NOXAFIL 40 MG/ML SUSPENSION	22	NUVIGIL 250 MG TABLET	84	OFEV 100 MG CAPSULE	82
NOXAFIL DR 100 MG TABLET	22	NUVIGIL 50 MG TABLET	84	OFEV 150 MG CAPSULE	82
NOXIFOL-D3 2,500 UNIT-1 MG TAB	80	NYAMYC 100,000 UNITS/GM POWDER	22	ofloxacin 0.3% ear drops	83
NP THYROID 120 MG TABLET	62	NYMALIZE 60 MG/20 ML SOLUTION	39	ofloxacin 0.3% eye drops	83
NP THYROID 15 MG TABLET	62	nystatin 100,000 unit/gm cream	22	ofloxacin 300 mg tablet	83
NP THYROID 30 MG TABLET	62	nystatin 100,000 unit/gm powd	22	ofloxacin 400 mg tablet	83
NP THYROID 60 MG TABLET	62	nystatin 100,000 unit/ml susp	22	OGESTREL TABLET	54
NP THYROID 90 MG TABLET	62	nystatin 100,000 units/gm oint	22	olanzapine 10 mg tablet	9
NUEDEXTA 20-10 MG CAPSULE	40	nystatin 500,000 unit oral tab	22	olanzapine 10 mg vial	9
NUFERA TABLET	80	nystatin-triamcinolone cream	22	olanzapine 15 mg tablet	9
NUFERA TABLET	90	nystatin-triamcinolone ointm	22	olanzapine 2.5 mg tablet	9
NULEV 0.125 MG CHEWABLE MELT	29	NYSTOP 100,000 UNITS/GM POWDER	22	olanzapine 20 mg tablet	9
NULOJIX 250 MG VIAL	64	OCELLA 3 MG-0.03 MG TABLET	54	olanzapine 5 mg tablet	9
NUMOISYN LIQUID	43	OCTAGAM 10% VIAL	65	olanzapine 7.5 mg tablet	9
NUPLAZID 17 MG TABLET	9	OCTAGAM 5% VIAL	65	olanzapine odt 10 mg tablet	9
NUTRICAP CAPLET	80	octreotide 1,000 mcg/ml vial	63		
NUTRILIPID 20% IV FAT EMULSION	49				

olanzapine odt 15 mg tablet	9	omega-3 ethyl esters 1 gm cap	47	ONFI 20 MG TABLET	56
olanzapine odt 20 mg tablet	9	omeprazole dr 10 mg capsule	81	ONGLYZA 2.5 MG TABLET	20
olanzapine odt 5 mg tablet	9	omeprazole dr 20 mg capsule	81	ONGLYZA 5 MG TABLET	20
olanzapine-fluoxetine 12-25 mg	86	omeprazole dr 40 mg capsule	81	ONIVYDE 43 MG/10 ML VIAL	28
olanzapine-fluoxetine 12-50 mg	86	omeprazole-bicarb 20-1,100 cap	81	OPDIVO 100 MG/10 ML VIAL	71
olanzapine-fluoxetine 3-25 mg	86	omeprazole-bicarb 20-1,680 pkt	82	OPDIVO 40 MG/4 ML VIAL	71
olanzapine-fluoxetine 6-25 mg	86	omeprazole-bicarb 40-1,100 cap	82	opium tincture 10 mg/ml	77
olanzapine-fluoxetine 6-50 mg	86	omeprazole-bicarb 40-1,680 pkt	82	OPSUMIT 10 MG TABLET	82
olmesartan medoxomil 20 mg tab	13	OMNARIS 50 MCG NASAL SPRAY	26	ORALONE 0.1% PASTE	41
olmesartan medoxomil 40 mg tab	13	ONCASPAR 750 UNIT/ML VIAL	28	ORENCIA 250 MG VIAL	64
olmesartan medoxomil 5 mg tab	13	ondansetron 4 mg/2 ml isecure	51	ORFADIN 10 MG CAPSULE	57
olmesartan-hctz 20-12.5 mg tab	13	ondansetron 4 mg/5 ml solution	51	ORFADIN 2 MG CAPSULE	57
olmesartan-hctz 40-12.5 mg tab	13	ondansetron 40 mg/20 ml vial	51	ORFADIN 20 MG CAPSULE	57
olmesartan-hctz 40-25 mg tab	13	ondansetron hcl 24 mg tablet	51	ORFADIN 4 MG/ML SUSPENSION	57
olmsrtn-amldpn-hctz 20-5-12.5	39	ondansetron hcl 4 mg tablet	51	ORFADIN 5 MG CAPSULE	57
olmsrtn-amldpn-hctz 40-10-12.5	39	ondansetron hcl 4 mg/2 ml vial	51	ORKAMBI 100 MG-125 MG TABLET	41
olmsrtn-amldpn-hctz 40-10-25mg	39	ondansetron hcl 8 mg tablet	51	ORKAMBI 200 MG-125 MG TABLET	41
olmsrtn-amldpn-hctz 40-5-12.5	39	ondansetron odt 4 mg tablet	51	orphenadrine 30 mg/ml vial	84
olmsrtn-amldpn-hctz 40-5-25 mg	39	ondansetron odt 8 mg tablet	51	orphenadrine er 100 mg tablet	84
olopatadine hcl 0.1% eye drops	73	ONFI 10 MG TABLET	56	ORSYTHIA-28 TABLET	54
olopatadine hcl 0.2% eye drop	73	ONFI 2.5 MG/ML SUSPENSION	56	ORTHO D 3,775 UNIT-1 MG CAP	80

OSCIMIN 0.125 MG ODT	29	oxazepam 10 mg capsule	32	oxycodone hcl 15 mg tablet	77
OSCIMIN 0.125 MG TABLET	29	oxazepam 15 mg capsule	32	oxycodone hcl 20 mg tablet	77
OSCIMIN SL 0.125 MG TABLET	29	oxazepam 30 mg capsule	32	oxycodone hcl 30 mg tablet	77
OSCIMIN SR 0.375 MG TABLET	29	oxcarbazepine 150 mg tablet	85	oxycodone hcl 5 mg capsule	77
oseltamivir phos 30 mg capsule	26	oxcarbazepine 300 mg tablet	85	oxycodone hcl 5 mg tablet	77
oseltamivir phos 45 mg capsule	26	oxcarbazepine 300 mg/5 ml susp	85	oxycodone hcl 5 mg/5 ml soln	77
oseltamivir phos 75 mg capsule	26	oxcarbazepine 600 mg tablet	85	oxycodone hcl er 10 mg tablet	75
OSMOPREP TABLET	56	oxiconazole nitrate 1% cream	22	oxycodone hcl er 15 mg tablet	75
OSPHENA	84	OXISTAT 1% LOTION	22	oxycodone hcl er 20 mg tablet	75
OTICIN HC DROPS	78	OXTELLAR XR 150 MG TABLET	85	oxycodone hcl er 30 mg tablet	75
OTO-END 10 EAR DROPS	78	OXTELLAR XR 300 MG TABLET	85	oxycodone hcl er 40 mg tablet	75
oxacillin 1 gm add-vantage vl	35	OXTELLAR XR 600 MG TABLET	85	oxycodone hcl er 60 mg tablet	75
oxacillin 1 gm/ 50 ml inj	36	oxybutynin 5 mg tablet	29	oxycodone hcl er 80 mg tablet	75
oxacillin 10 gm vial	36	oxybutynin 5 mg/5 ml syrup	29	oxycodone-acetaminophen 10-325	77
oxacillin 2 gm vial	36	oxybutynin cl er 10 mg tablet	29	oxycodone-acetaminophen 5-325	77
oxacillin 2 gm/ 50 ml inj	36	oxybutynin cl er 15 mg tablet	29	oxycodone-acetaminophn 5-325/5	77
oxaliplatin 100 mg vial	28	oxybutynin cl er 5 mg tablet	29	oxycodone-aspirin 4.8355-325	77
oxaliplatin 100 mg/20 ml vial	28	oxycodon-acetaminophen 2.5-325	77	oxycodone-ibuprofen 5-400 tab	77
oxaliplatin 50 mg vial	28	oxycodon-acetaminophen 7.5-325	77	oxymorphone hcl 10 mg tablet	77
oxaliplatin 50 mg/10 ml vial	28	oxycodone hcl 10 mg tablet	77	oxymorphone hcl 5 mg tablet	77
oxandrolone 10 mg tablet	11	oxycodone hcl 100 mg/5 ml soln	77	oxymorphone hcl er 10 mg tab	75
oxandrolone 2.5 mg tablet	11				
oxaprozin 600 mg tablet	73				

oxymorphone hcl er 15 mg tab	75	pamidronate disod 90 mg vial	68	PAXIL 10 MG/5 ML SUSPENSION	86
oxymorphone hcl er 20 mg tab	75	PANDEL 0.1% CREAM	60	PAZEO 0.7% EYE DROPS	73
oxymorphone hcl er 30 mg tab	75	PANRETIN 0.1% GEL	83	PCE 333 MG TABLET	67
oxymorphone hcl er 40 mg tab	75	pantoprazole sod dr 20 mg tab	82	PCE 500 MG TABLET	67
oxymorphone hcl er 5 mg tablet	75	pantoprazole sod dr 40 mg tab	82	PEDIADERM AF KIT	43
oxymorphone hcl er 7.5 mg tab	75	paregoric liquid	56	PEDIADERM HC 2% KIT	43
PACERONE 100 MG TABLET	15	paricalcitol 1 mcg capsule	68	PEDIADERM TA 0.1% KIT	43
PACERONE 200 MG TABLET	15	paricalcitol 10 mcg/2 ml vial	68	PEDIARIX 0.5 ML SYRINGE	88
PACERONE 400 MG TABLET	15	paricalcitol 2 mcg capsule	68	PEDVAXHIB VACCINE VIAL	88
paclitaxel 100 mg/16.7 ml vial	28	paricalcitol 2 mcg/ml vial	68	peg 3350 electrolyte soln	66
paclitaxel 150 mg/25 ml vial	28	paricalcitol 4 mcg capsule	68	peg 3350-electrolyte solution	66
paclitaxel 30 mg/5 ml vial	28	PAROEX 0.12% ORAL RINSE	41	peg-3350 and electrolytes soln	66
paclitaxel 300 mg/50 ml vial	28	paramomycin 250 mg capsule	11	PEGANONE 250 MG TABLET	85
PACNEX 7% WASH	43	paroxetine er 12.5 mg tablet	86	PEGASYS 180 MCG/0.5 ML SYRINGE	23
paliperidone er 1.5 mg tablet	9	paroxetine er 25 mg tablet	86	PEGASYS 180 MCG/ML VIAL	23
paliperidone er 3 mg tablet	9	paroxetine er 37.5 mg tablet	86	PEGASYS PROCLICK 135 MCG/0.5	23
paliperidone er 6 mg tablet	9	paroxetine hcl 10 mg tablet	86	PEGASYS PROCLICK 180 MCG/0.5	23
paliperidone er 9 mg tablet	9	paroxetine hcl 20 mg tablet	86	pen g 1.2 million unit/2 ml	36
pamidronate 30 mg/10 ml vial	68	paroxetine hcl 30 mg tablet	86	pen g k 1 million unit/50 ml	36
pamidronate 60 mg/10 ml vial	68	paroxetine hcl 40 mg tablet	86	pen g k 2 million unit/50 ml	36
pamidronate 90 mg/10 ml vial	68	PASER GRANULES 4 GM PACKET	30	pen g k 3 million unit/50 ml	36
pamidronate disod 30 mg vial	68	PATADAY 0.2% EYE DROPS	73	penicillin g k 5 million unit	36

penicillin g na 5 million unit	36	perphen-amitrip 2 mg-10 mg tab	87	phenobarbital 16.2 mg tablet	56
penicillin gk 20 million unit	36	perphen-amitrip 2 mg-25 mg tab	87	phenobarbital 20 mg/5 ml elix	56
penicillin vk 125 mg/5 ml soln	36	perphen-amitrip 4 mg-10 mg tab	88	phenobarbital 30 mg tablet	56
penicillin vk 250 mg tablet	36	perphen-amitrip 4 mg-25 mg tab	88	phenobarbital 32.4 mg tablet	56
penicillin vk 250 mg/5 ml soln	36	perphen-amitrip 4 mg-50 mg tab	88	phenobarbital 60 mg tablet	56
penicillin vk 500 mg tablet	36	perphenazine 16 mg tablet	8	phenobarbital 64.8 mg tablet	56
PENNSAID 2% PUMP	43	perphenazine 2 mg tablet	8	phenobarbital 97.2 mg tablet	56
PENTACEL VIAL KIT	88	perphenazine 4 mg tablet	8	PHENOHYTRO TABLET	30
PENTAM 300 VIAL	29	perphenazine 8 mg tablet	8	phenoxybenzamine hcl 10 mg cap	11
PENTASA 250 MG CAPSULE	11	PFIZERPEN 20 MILLION UNIT VIAL	36	phenylephrine 10% eye drops	73
PENTASA 500 MG CAPSULE	11	PFIZERPEN 5 MILLION UNIT VIAL	36	phenylephrine 2.5% eye drop	73
pentazocine-naloxone tablet	77	PHENADOZ 12.5 MG SUPPOSITORY	21	PHENYTEK 200 MG CAPSULE	85
pentoxifylline er 400 mg tab	40	PHENADOZ 25 MG SUPPOSITORY	21	PHENYTEK 300 MG CAPSULE	85
PERFOROMIST 20 MCG/2 ML SOLN	37	phenazopyridine 100 mg tab	57	phenytoin 125 mg/5 ml susp	85
PERIKABIVEN IV EMULSION	49	phenazopyridine 200 mg tab	57	phenytoin 50 mg infatab	85
perindopril erbumine 2 mg tab	14	phenelzine sulfate 15 mg tab	70	phenytoin 50 mg tablet chew	85
perindopril erbumine 4 mg tab	14	PHENERGAN 12.5 MG SUPPOSITORY	21	phenytoin 50 mg/ml vial	85
perindopril erbumine 8 mg tab	14	PHENERGAN 25 MG SUPPOSITORY	21	phenytoin sod ext 100 mg cap	85
PERIOGARD 0.12% ORAL RINSE	41	PHENERGAN 50 MG SUPPOSITORY	21	phenytoin sod ext 200 mg cap	85
PERJETA 420 MG/14 ML VIAL	71	phenobarbital 100 mg tablet	56	phenytoin sod ext 300 mg cap	85
permethrin 5% cream	78	phenobarbital 15 mg tablet	56	PHILITH 0.4-0.035 MG TABLET	54

PHOSLYRA 667 MG/5 ML SOLUTION	79	pioglitazone hcl 15 mg tablet	20	POLIBAR ACB 96% ENEMA BAG	69
PHOSPHASAL TABLET	29	pioglitazone hcl 30 mg tablet	20	POLYCIN EYE OINTMENT	16
PHOSPHOLINE IODIDE 0.125%	74	pioglitazone hcl 45 mg tablet	20	polyethylene glycol 3350 powd	66
PHOTOFRIN 75 MG VIAL	28	pioglitazone-glimepiride 30-2	20	POLY-IRON 150 FORTE CAPSULE	80
physicians ez use b-12 kit	80	pioglitazone-glimepiride 30-4	20	POLY-IRON 150 FORTE CAPSULE	90
PHYSICIANS EZ USE B-12 KIT	80	pioglitazone-metformin 15-500	20	polymyxin b sulfate vial	16
PHYSIOLYTE IRRIGATION SOLN	69	pioglitazone-metformin 15-850	20	polymyxin b-tmp eye drops	16
PHYSIOSOL IRRIGATION SOLN	69	piperacil-tazobact 13.5 gm vl	36	polysaccharide iron forte	90
phytonadione 1 mg/0.5 ml syr	80	piperacil-tazobact 2.25 gm vl	36	POMALYST 1 MG CAPSULE	14
PICATO 0.015% GEL	43	piperacil-tazobact 3.375 gm vl	36	POMALYST 2 MG CAPSULE	14
PICATO 0.05% GEL	43	piperacil-tazobact 4.5 gm vial	36	POMALYST 3 MG CAPSULE	14
pilocarpine 1% eye drops	74	piperacil-tazobact 40.5 gram	36	POMALYST 4 MG CAPSULE	28
pilocarpine 2% eye drops	74	PIRMELLA 1-35-28 TABLET	54	PORTIA-28 TABLET	54
pilocarpine 4% eye drops	74	PIRMELLA 7-7-7-28 TABLET	54	PORTRAZZA 800 MG/50 ML VIAL	71
pilocarpine hcl 5 mg tablet	41	piroxicam 10 mg capsule	73	pot citrate-citric acid packet	49
pilocarpine hcl 7.5 mg tablet	41	piroxicam 20 mg capsule	73	POTABA 500 MG CAPSULE	90
pimozide 1 mg tablet	8	PLASMA-LYTE 148 IV SOLUTION	49	potassium 25 meq tablet eff	49
pimozide 2 mg tablet	8	PLASMA-LYTE 56- DEXTROSE 5%	49	potassium chloride /sodchloride	49
PIMTREA 28 DAY TABLET	54	PLASMA-LYTE A PH 7.4 SOLN.	49	potassium cit-citric acid soln	49
pindolol 10 mg tablet	33	PODOCON-25 LIQUID	43	potassium citrate er 10 meq tb	49
pindolol 5 mg tablet	33	podofilox 0.5% topical soln	43	potassium citrate er 15 meq tb	49
				potassium citrate er 5 meq tab	49

potassium cl 10 meq/100 ml sol	49	PRADAXA 75 MG CAPSULE	17	PRAMOSONE 1% OINTMENT	43
potassium cl 10% (20 meq/15 ml)	49	PRALUENT 150 MG/ML PEN	40	PRAMOSONE 1%-1% CREAM	43
potassium cl 20 meq packet	50	PRALUENT 150 MG/ML SYRINGE	40	PRAMOSONE 1%-1% OINTMENT	43
potassium cl 20 meq/100 ml sol	50	PRALUENT 75 MG/ML PEN	40	PRAMOSONE 2.5% LOTION	43
potassium cl 20 meq-0.45% nacl	50	PRALUENT 75 MG/ML SYRINGE	40	PRAMOSONE 2.5% OINTMENT	43
potassium cl 20% (40 meq/15 ml)	50	PRAMCORT 1% CREAM	43	PRAMOSONE 2.5%-1% CREAM	43
potassium cl 25 meq tab eff	50	pramipexole 0.125 mg tablet	45	PRAMOSONE 2.5%-1% LOTION	43
potassium cl 40 meq/100 ml sol	50	pramipexole 0.25 mg tablet	45	PRAMOSONE 2.5%-1% OINTMENT	43
potassium cl 40 meq/20 ml conc	50	pramipexole 0.5 mg tablet	45	prasugrel 10 mg tablet	79
potassium cl er 10 meq capsule	50	pramipexole 0.75 mg tablet	45	prasugrel 5 mg tablet	79
potassium cl er 10 meq tablet	50	pramipexole 1 mg tablet	45	pravastatin sodium 10 mg tab	46
potassium cl er 20 meq tablet	50	pramipexole 1.5 mg tablet	45	pravastatin sodium 20 mg tab	46
potassium cl er 8 meq capsule	50	pramipexole er 0.375 mg tablet	45	pravastatin sodium 40 mg tab	46
potassium cl er 8 meq tablet	50	pramipexole er 0.75 mg tablet	45	pravastatin sodium 80 mg tab	46
POTIGA 200 MG TABLET	18	pramipexole er 1.5 mg tablet	45	prazosin 1 mg capsule	11
POTIGA 300 MG TABLET	18	pramipexole er 2.25 mg tablet	45	prazosin 2 mg capsule	11
POTIGA 400 MG TABLET	18	pramipexole er 3 mg tablet	45	prazosin 5 mg capsule	11
POTIGA 50 MG TABLET	18	pramipexole er 3.75 mg tablet	45	PRED MILD 0.12% EYE DROPS	74
PR BENZOYL PEROXIDE 7% WASH	43	pramipexole er 4.5 mg tablet	45	PRED-G 1% EYE DROPS	74
PRADAXA 110 MG CAPSULE	17	PRAMOSONE 1% CREAM	43	PRED-G S.O.P. EYE OINTMENT	74
PRADAXA 150 MG CAPSULE	17	PRAMOSONE 1% LOTION	43	prednicarbate 0.1% cream	60
				prednicarbate 0.1% ointment	60

prednisolone 15 mg/5 ml soln	60	PREMARIN 0.625 MG TABLET	55	PREZISTA 100 MG/ML SUSPENSION	25
prednisolone 5 mg/5 ml soln	60	PREMARIN 0.9 MG TABLET	55	PREZISTA 150 MG TABLET	25
prednisolone ac 1% eye drop	74	PREMARIN 1.25 MG TABLET	55	PREZISTA 600 MG TABLET	25
prednisolone odt 10 mg tablet	60	PREMARIN 25 MG VIAL	55	PREZISTA 75 MG TABLET	25
prednisolone odt 15 mg tablet	60	PREMARIN VAGINAL CREAM-APPL	55	PREZISTA 800 MG TABLET	25
prednisolone odt 30 mg tablet	60	PREMASOL 10% IV SOLUTION	50	PRIFTIN 150 MG TABLET	30
prednisolone sod 1% eye drop	74	PREMASOL 6% IV SOLUTION	50	primaquine 26.3 mg tablet	29
prednisolone sod ph 25 mg/5 ml	60	PREMPHASE 0.625-5 MG TABLET	55	primidone 250 mg tablet	56
prednisone 1 mg tablet	60	PREMPRO 0.3 MG-1.5 MG TABLET	55	primidone 50 mg tablet	56
prednisone 10 mg tab dose pack	60	PREMPRO 0.45-1.5 MG TABLET	55	PRIMSOL 50 MG/5 ML ORAL SOLN	16
prednisone 10 mg tablet	60	PREMPRO 0.625-2.5 MG TABLET	55	PRISTIQ ER 100 MG TABLET	86
prednisone 2.5 mg tablet	60	PREMPRO 0.625-5 MG TABLET	55	PRISTIQ ER 25 MG TABLET	86
prednisone 20 mg tablet	60	PRESERA FOAM	43	PRISTIQ ER 50 MG TABLET	86
prednisone 5 mg tablet	60	PREVALITE PACKET	47	PRIVIGEN 10% VIAL	65
prednisone 5 mg/5 ml solution	60	PREVALITE POWDER	47	PROAIR HFA 90 MCG INHALER	37
prednisone 5 mg/ml solution	60	PREVIDENT 0.2% RINSE	41	PROAIR RESPICLICK INHAL POWDER	37
prednisone 50 mg tablet	60	PREVIDENT 1.1% GEL	41	probenecid 500 mg tablet	22
PREFEST TABLET	54	PREVIDENT 5000 1.1% DRY MOUTH	50	probenecid-colchicine tabs	22
PREGNYL 10,000 UNITS VIAL	61	PREVIDENT 5000 PLUS CREAM	50	procainamide 100 mg/ml vial	15
PREMARIN 0.3 MG TABLET	54	PREVIDENT DENTAL RINSE	50	procainamide 500 mg/ml vial	15
PREMARIN 0.45 MG TABLET	55	PREVIFEM TABLET	55	PROCALAMINE IV SOLUTION	50
		PREZCOBIX 800 MG-150 MG TABLET	25		

PROCENTRA 5 MG/5 ML SOLUTION	31	PROFERRIN-FORTE TABLET	90	promethazine 25 mg/ml vial	23
prochlorperazine 10 mg tab	8	progesterone 100 mg capsule	81	promethazine 50 mg suppository	21
prochlorperazine 10 mg/2 ml vl	8	progesterone 200 mg capsule	81	promethazine 50 mg tablet	23
prochlorperazine 25 mg supp	8	progesterone oil 50 mg/ml vl	81	promethazine 50 mg/ml vial	23
prochlorperazine 5 mg tablet	8	PROGLYCEM 50 MG/ML ORAL SUSP	58	promethazine 6.25 mg/5 ml syrup	23
PROCORT 1.85%- 1.15% CREAM	60	PROGRAF 0.5 MG CAPSULE	64	promethazine vc syrup	83
PROCRIT 10,000 UNITS/ML VIAL	36	PROGRAF 1 MG CAPSULE	64	promethazine vc- codeine syrup	41
PROCRIT 2,000 UNITS/ML VIAL	36	PROGRAF 5 MG CAPSULE	64	promethazine-codeine syrup	41
PROCRIT 20,000 UNITS/ML VIAL	36	PROGRAF 5 MG/ML AMPULE	64	promethazine-dm syrup	41
PROCRIT 3,000 UNITS/ML VIAL	36	PROLASTIN C 1,000 MG VIAL	83	promethazine-pe- codeine syrup	41
PROCRIT 4,000 UNITS/ML VIAL	36	PROLENSA 0.07% EYE DROPS	74	promethazine- phenylephrine syr	83
PROCRIT 40,000 UNITS/ML VIAL	36	PROLEUKIN 22 MILLION UNIT VIAL	28	PROMETHEGAN 12.5 MG SUPPOS	21
PROCTOCORT 30 MG SUPPOSITORY	60	PROLIA 60 MG/ML SYRINGE	68	PROMETHEGAN 25 MG SUPPOSITORY	21
PROCTOFOAM-HC 1%- 1% FOAM	60	PROMACTA 12.5 MG TABLET	37	PROMETHEGAN 50 MG SUPPOSITORY	21
PROCTO-MED HC 2.5% CREAM	60	PROMACTA 25 MG TABLET	37	propafenone hcl 150 mg tablet	15
PROCTO-PAK 1% CREAM	60	PROMACTA 50 MG TABLET	37	propafenone hcl 225 mg tab	15
PROCTOSOL-HC 2.5% CREAM	60	PROMACTA 75 MG TABLET	37	propafenone hcl 300 mg tab	15
PROCTOZONE-HC 2.5% CREAM	60	promethazine 12.5 mg suppos	21	propafenone hcl er 225 mg cap	15
PROCYSB1 DR 25 MG CAPSULE	73	promethazine 12.5 mg tablet	23	propafenone hcl er 325 mg cap	15
PROCYSB1 DR 75 MG CAPSULE	73	promethazine 25 mg suppository	21	propafenone hcl er 425 mg cap	15
PRODRIN CAPLET	27	promethazine 25 mg tablet	23	propantheline 15 mg tablet	29
PROFERRIN-FORTE TABLET	80				

proparacaine 0.5% eye drops	73	protriptyline hcl 5 mg tablet	88	quetiapine er 50 mg tablet	9
propranolol 1 mg/ml vial	33	PROVENTIL HFA 90 MCG INHALER	37	quetiapine fumarate 100 mg tab	9
propranolol 10 mg tablet	33	PRUCLAIR NONSTEROIDAL CREAM	43	quetiapine fumarate 200 mg tab	9
propranolol 20 mg tablet	33	PRUMYX CREAM	43	quetiapine fumarate 25 mg tab	9
propranolol 20 mg/5 ml soln	33	PULMICORT 180 MCG FLEXHALER	26	quetiapine fumarate 300 mg tab	9
propranolol 40 mg tablet	33	PULMICORT 90 MCG FLEXHALER	26	quetiapine fumarate 400 mg tab	9
propranolol 40 mg/5 ml soln	33	PULMOSAL 7% VIAL	83	quetiapine fumarate 50 mg tab	9
propranolol 60 mg tablet	33	PULMOZYME 1 MG/ML AMPUL	41	QUFLORA PED 0.25 MG/ML DROP	90
propranolol 80 mg tablet	33	PURALOR CI TABLET	80	quinapril 10 mg tablet	14
propranolol er 120 mg capsule	33	PUREFE PLUS CAPSULE	90	quinapril 20 mg tablet	14
propranolol er 160 mg capsule	33	PUREVIT DUALFE PLUS CAPSULE	80	quinapril 40 mg tablet	14
propranolol er 60 mg capsule	33	PUREVIT DUALFE PLUS CAPSULE	90	quinapril 5 mg tablet	14
propranolol er 80 mg capsule	33	PURIXAN 20 MG/ML ORAL SUSP	27	quinapril-hctz 10-12.5 mg tab	14
propranolol-hctz 40-25 mg tab	33	pyrazinamide 500 mg tablet	30	quinapril-hctz 20-12.5 mg tab	14
propranolol-hctz 80-25 mg tab	33	pyridostigmine br 60 mg tablet	78	quinapril-hctz 20-25 mg tab	14
propylthiouracil 50 mg tablet	30	pyridostigmine er 180 mg tab	78	quinidine gluc 80 mg/ml vial	15
PROQUAD VIAL	88	QUADRACEL DTAP-IPV VIAL	88	quinidine gluc er 324 mg tab	15
PROSOL 20% INJECTION	50	QUASENSE 0.15-0.03 MG TABLET	55	quinidine sulfate 200 mg tab	15
PROSTIGMIN 15 MG TABLET	27	quetiapine er 150 mg tablet	9	quinidine sulfate 300 mg tab	15
PROTECT IRON TABLET	90	quetiapine er 200 mg tablet	9	quinine sulfate 324 mg capsule	29
protriptyline hcl 10 mg tablet	88	quetiapine er 300 mg tablet	9	QVAR 40 MCG ORAL INHALER	26
		quetiapine er 400 mg tablet	9		

QVAR 80 MCG ORAL INHALER	26	RAPAMUNE 1 MG TABLET	64	RELENZA 5 MG DISKHALER	26
RABAVERT RABIES VACC W-DILUENT	88	RAPAMUNE 1 MG/ML ORAL SOLN	64	RELION NOVOLIN 70-30 VIAL	66
rabeprazole sod dr 20 mg tab	82	RAPAMUNE 2 MG TABLET	64	RELION NOVOLIN N 100 UNIT/ML	66
RADIGEL ACEMANNAN HYDROGEL	69	rasagiline mesylate 0.5 mg tab	70	RELION NOVOLIN R 100 UNIT/ML	66
raloxifene hcl 60 mg tablet	83	rasagiline mesylate 1 mg tab	70	RELISTOR 12 MG/0.6 ML SYRINGE	56
ramipril 1.25 mg capsule	14	RAVICTI 1.1 GRAM/ML LIQUID	57	RELISTOR 12 MG/0.6 ML VIAL	56
ramipril 10 mg capsule	14	REA LO 39 CREAM	44	RELISTOR 8 MG/0.4 ML SYRINGE	56
ramipril 2.5 mg capsule	14	READI-CAT 2 2% SUSPENSION	69	RELPAX 20 MG TABLET	83
ramipril 5 mg capsule	14	REBIF 22 MCG/0.5 ML SYRINGE	71	RELPAX 40 MG TABLET	83
RANEXA ER 1,000 MG TABLET	40	REBIF 44 MCG/0.5 ML SYRINGE	71	REMICADE 100 MG VIAL	64
RANEXA ER 500 MG TABLET	40	REBIF REBIDOSE 22 MCG/0.5 ML	71	REMODULIN 1 MG/ML VIAL	82
ranitidine 15 mg/ml syrup	58	REBIF REBIDOSE 44 MCG/0.5 ML	71	REMODULIN 10 MG/ML VIAL	82
ranitidine 150 mg capsule	58	REBIF REBIDOSE TITRATION PACK	71	REMODULIN 2.5 MG/ML VIAL	82
ranitidine 150 mg tablet	58	RECLIPSEN 28 DAY TABLET	55	REMODULIN 5 MG/ML VIAL	82
ranitidine 300 mg capsule	58	RECOMBIVAX HB 10 MCG/ML SYR	88	RENELA 0.8 GM POWDER PACKET	79
ranitidine 300 mg tablet	58	RECOMBIVAX HB 10 MCG/ML VIAL	88	RENELA 2.4 GM POWDER PACKET	79
ranitidine hcl 150 mg/6 ml vl	58	RECOMBIVAX HB 40 MCG/ML VIAL	88	RENELA 800 MG TABLET	79
ranitidine hcl 50 mg/2 ml vial	58	RECOMBIVAX HB 5 MCG/0.5 ML SYR	88	repaglinide 0.5 mg tablet	20
RAPAFLO 4 MG CAPSULE	32	RECTIV 0.4% OINTMENT	89	repaglinide 1 mg tablet	20
RAPAFLO 8 MG CAPSULE	32	REGONOL 10 MG/2 ML AMPUL	78	repaglinide 2 mg tablet	20
RAPAMUNE 0.5 MG TABLET	64	REGRANEX 0.01% GEL	44	REPATHA 140 MG/ML SURECLICK	47

REPATHA 140 MG/ML SYRINGE	47	REYATAZ 150 MG CAPSULE	25	risedronate sodium 30 mg tab	68
REPATHA 420 MG/3.5ML PUSHTRONX	47	REYATAZ 200 MG CAPSULE	25	risedronate sodium 35 mg tab	68
REPREXAIN 10-200 MG TABLET	77	REYATAZ 300 MG CAPSULE	25	risedronate sodium 5 mg tablet	68
REPREXAIN 5-200 MG TABLET	77	REYATAZ 50 MG POWDER PACKET	25	RISPERDAL CONSTA 12.5 MG SYR	9
SCRIPTOR 100 MG TABLET	24	RIAX 5.5% FOAM	44	RISPERDAL CONSTA 25 MG SYR	9
SCRIPTOR 200 MG TABLET	24	RIAX 9.5% FOAM	44	RISPERDAL CONSTA 37.5 MG SYR	9
RESTASIS 0.05% EYE EMULSION	73	ribavirin 200 mg capsule	23	RISPERDAL CONSTA 50 MG SYR	9
RETROVIR 200 MG/20 ML VIAL	24	ribavirin 200 mg tablet	23	risperidone 0.25 mg odt	9
REVESTA 5,750 UNIT- 1 MG CAP	81	ribavirin 6 gm inhalation vial	83	risperidone 0.25 mg tablet	9
REVLIMID 10 MG CAPSULE	14	RIDAURA 3 MG CAPSULE	65	risperidone 0.5 mg odt	9
REVLIMID 15 MG CAPSULE	14	rifabutin 150 mg capsule	27	risperidone 0.5 mg tablet	9
REVLIMID 2.5 MG CAPSULE	14	rifampin 150 mg capsule	30	risperidone 1 mg odt	9
REVLIMID 20 MG CAPSULE	14	rifampin 300 mg capsule	30	risperidone 1 mg tablet	9
REVLIMID 25 MG CAPSULE	14	rifampin iv 600 mg vial	30	risperidone 1 mg/ml solution	9
REVLIMID 5 MG CAPSULE	14	RIFATER TABLET	30	risperidone 2 mg odt	9
REXULTI 0.25 MG TABLET	9	riluzole 50 mg tablet	40	risperidone 2 mg tablet	9
REXULTI 0.5 MG TABLET	9	rimantadine hcl 100 mg tablet	26	risperidone 3 mg odt	9
REXULTI 1 MG TABLET	9	ringers irrigation solution	69	risperidone 3 mg tablet	9
REXULTI 2 MG TABLET	9	ringer's iv solution	50	risperidone 4 mg odt	9
REXULTI 3 MG TABLET	9	RIOMET 500 MG/5 ML SOLUTION	20	risperidone 4 mg tablet	9
REXULTI 4 MG TABLET	9	risedronate sod dr 35 mg tab	68	RITUXAN 10 MG/ML VIAL	71
		risedronate sodium 150 mg tab	68		

RITUXAN HYCELA 1,400 MG-23,400	71	ropinirole hcl 5 mg tablet	45	RUBRACA 300 MG TABLET	28
RITUXAN HYCELA 1,600 MG-26,800	71	ropinirole hcl er 12 mg tablet	46	RYDAPT 25 MG CAPSULE	28
rivastigmine 1.5 mg capsule	40	ropinirole hcl er 2 mg tablet	46	RYTARY ER 23.75 MG- 95 MG CAP	46
rivastigmine 13.3 mg/24hr ptch	40	ropinirole hcl er 4 mg tablet	46	RYTARY ER 36.25 MG- 145 MG CAP	46
rivastigmine 3 mg capsule	40	ropinirole hcl er 6 mg tablet	46	RYTARY ER 48.75 MG- 195 MG CAP	46
rivastigmine 4.5 mg capsule	40	ropinirole hcl er 8 mg tablet	46	RYTARY ER 61.25 MG- 245 MG CAP	46
rivastigmine 4.6 mg/24hr patch	40	ROSADAN 0.75% CREAM	16	SABRIL 500 MG POWDER PACKET	56
rivastigmine 6 mg capsule	40	ROSADAN 0.75% GEL	16	SABRIL 500 MG TABLET	56
rivastigmine 9.5 mg/24hr patch	40	ROSADAN 0.75% GEL KIT	44	SALACYN 6% CREAM	44
rizatriptan 10 mg odt	83	rosuvastatin calcium 10 mg tab	46	salicylic acid 6% cream	44
rizatriptan 10 mg tablet	83	rosuvastatin calcium 20 mg tab	46	salicylic acid 6% gel	44
rizatriptan 5 mg odt	83	rosuvastatin calcium 40 mg tab	46	salicylic acid 6% shampoo	44
rizatriptan 5 mg tablet	83	rosuvastatin calcium 5 mg tab	46	salsalate 500 mg tablet	73
ROCALTROL CAPSULE	81	ROTARIX VACCINE SUSPENSION	88	salsalate 750 mg tablet	73
ROCALTROL 1 MCG/ML ORAL SOLN	81	ROTATEQ VACCINE	88	SAMSCA 15 MG TABLET	50
ropinirole hcl 0.25 mg tablet	45	ROWEEPRA 1,000 MG TABLET	18	SAMSCA 30 MG TABLET	50
ropinirole hcl 0.5 mg tablet	45	ROWEEPRA 500 MG TABLET	18	SANCUSO 3.1 MG/24 HR PATCH	51
ropinirole hcl 1 mg tablet	45	ROWEEPRA 750 MG TABLET	18	SANDIMMUNE 100 MG/ML SOLN	64
ropinirole hcl 2 mg tablet	45	ROZEREM 8 MG TABLET	84	SANDOSTATIN LAR DEPOT 10 MG KT	63
ropinirole hcl 3 mg tablet	45	RUBRACA 200 MG TABLET	28	SANDOSTATIN LAR DEPOT 20 MG KT	63
ropinirole hcl 4 mg tablet	45	RUBRACA 250 MG TABLET	28	SANDOSTATIN LAR DEPOT 30 MG KT	63

SANTYL OINTMENT	44	SEMPREX-D 8 MG-60 MG CAPSULE	23	SILENOR 3 MG TABLET	84
SAPHRIS 10 MG TAB SL BLK CHERY	9	SENSIPAR 30 MG TABLET	68	SILENOR 6 MG TABLET	84
SAPHRIS 2.5 MG TAB SL BLK CHRY	9	SENSIPAR 60 MG TABLET	68	silver nitrate 0.5% soln	16
SAPHRIS 5 MG TAB SL BLK CHERRY	9	SENSIPAR 90 MG TABLET	68	silver nitrate 10% solution	16
SAVAYSA 15 MG TABLET	17	SEREVENT DISKUS 50 MCG	37	silver nitrate 25% solution	16
SAVAYSA 30 MG TABLET	17	sertraline 20 mg/ml oral conc	86	silver nitrate 50% solution	16
SAVAYSA 60 MG TABLET	17	sertraline hcl 100 mg tablet	86	SILVER NITRATE APPLICATOR	69
SAVELLA 100 MG TABLET	55	sertraline hcl 25 mg tablet	86	silver sulfadiazine 1% cream	16
SAVELLA 12.5 MG TABLET	55	sertraline hcl 50 mg tablet	86	SIMBRINZA 1%-0.2% EYE DROPS	74
SAVELLA 25 MG TABLET	55	SE-TAN PLUS CAPSULE	81	SIMULECT 10 MG VIAL	65
SAVELLA 50 MG TABLET	55	SE-TAN PLUS CAPSULE	90	SIMULECT 20 MG VIAL	65
SAVELLA TITRATION PACK	55	SETLAKIN 0.15 MG- 0.03 MG TAB	55	simvastatin 10 mg tablet	47
SCALACORT DK 2% KIT	44	sevelamer 0.8 gm powder packet	79	simvastatin 20 mg tablet	47
SEBUDERM GEL	44	sevelamer 2.4 gm powder packet	79	simvastatin 40 mg tablet	47
selegiline hcl 5 mg capsule	70	SF 1.1% GEL	50	simvastatin 5 mg tablet	47
selegiline hcl 5 mg tablet	70	SF 5000 PLUS CREAM	50	simvastatin 80 mg tablet	47
selenium sulfide 2.5% lotion	44	SHAROBEL 0.35 MG TABLET	81	sirolimus 0.5 mg tablet	64
SELZENTRY 150 MG TABLET	24	SIDEROL TABLET	81	sirolimus 1 mg tablet	64
SELZENTRY 20 MG/ML ORAL SOLN	24	SIGNIFOR 0.3 MG/ML AMPULE	63	sirolimus 2 mg tablet	64
SELZENTRY 25 MG TABLET	24	SIGNIFOR 0.6 MG/ML AMPULE	63	SIRTURO 100 MG TABLET	30
SELZENTRY 300 MG TABLET	24	SIGNIFOR 0.9 MG/ML AMPULE	63	SKLICE 0.5% LOTION	78
SELZENTRY 75 MG TABLET	24	sildenafil 20 mg tablet	82		

sod citrate-citric acid soln	50	sodium fluoride 1 mg (2.2 mg)	50	SORINE 120 MG TABLET	15
sod fer gluc cplx 62.5 mg/5 ml	90	sodium lactate 5 meq/ml vial	50	SORINE 160 MG TABLET	15
sod polystyren sulf 15 g/60 ml	50	sodium phenylbutyrate powder	57	SORINE 240 MG TABLET	15
sod sulfase-sulfur 9-4.5% kit	44	sodium polystyrene sulf powder	50	SORINE 80 MG TABLET	15
sod sulfase-sulfur 9-4.5% wash	44	sodium sulf-sulfur cleanser	44	sotalol 120 mg tablet	15
sodium bicarb 4.2% abbjct	50	SOLIA 0.15-0.03 MG TABLET	55	sotalol 160 mg tablet	15
sodium bicarb 4.2% vial	50	SOLTAMOX 10 MG/5 ML SOLN	21	sotalol 240 mg tablet	15
sodium bicarb 7.5% abboject	50	SOLU-CORTEF 1,000 MG VIAL	60	sotalol 80 mg tablet	15
sodium bicarb 8.4% abboject	50	SOLU-CORTEF 100 MG VIAL	60	sotalol af 120 mg tablet	15
sodium chloride 0.45% soln	50	SOLU-CORTEF 250 MG VIAL	60	sotalol af 160 mg tablet	15
sodium chloride 0.9% irrig.	69	SOLU-CORTEF 500 MG VIAL	60	sotalol af 80 mg tablet	15
sodium chloride 0.9% solution	50	SOLU-MEDROL 2,000 MG VIAL	60	SOVALDI 400 MG TABLET	23
sodium chloride 0.9% vial	50	SOLU-MEDROL 500 MG VIAL	60	SPINOSAD 0.9% TOPICAL SUSP	78
sodium chloride 10% vial	83	SOMATULINE DEPOT 120 MG/0.5 ML	63	SPIRIVA 18 MCG CP-HANDIHALER	37
sodium chloride 3% iv soln	50	SOMATULINE DEPOT 60 MG/0.2 ML	63	SPIRIVA RESPIMAT 1.25 MCG INH	37
sodium chloride 3% vial	83	SOMATULINE DEPOT 90 MG/0.3 ML	63	SPIRIVA RESPIMAT 2.5 MCG INH	37
sodium chloride 4 meq/ml vl	50	SOMAVERT 10 MG VIAL	63	spironolactone 100 mg tablet	45
sodium chloride 5% iv soln	50	SOMAVERT 15 MG VIAL	63	spironolactone 25 mg tablet	45
sodium chloride 50 meq/20 ml	50	SOMAVERT 20 MG VIAL	63	spironolactone 50 mg tablet	45
sodium chloride 7% vial	83	SOMAVERT 25 MG VIAL	63	spironolactone-hctz 25-25 tab	45
sodium fluoride 0.5 mg(1.1 mg)	50	SOMAVERT 30 MG VIAL	63	SPORANOX 10 MG/ML SOLUTION	22
sodium fluoride 0.5 mg/ml drop	50				

SPRINTEC 28 DAY TABLET	55	STENDRA	84	SUCRAID 8,500 UNITS/ML SOLN	57
SPRITAM 1,000 MG TABLET	18	sterile water for irrigation	69	sucralfate 1 gm tablet	81
SPRITAM 250 MG TABLET	18	STIMATE 1.5 MG/ML NASAL SPRAY	61	sulfacetamide 10% eye drops	86
SPRITAM 500 MG TABLET	18	STIOLTO RESPIMAT INHAL SPRAY	83	sulfacetamide 10% eye ointment	86
SPRITAM 750 MG TABLET	18	STIVARGA 40 MG TABLET	70	sulfacetamide sod 10% top susp	86
SPRYCEL 100 MG TABLET	70	STRATTERA 10 MG CAPSULE	31	sulfadiazine 500 mg tablet	86
SPRYCEL 140 MG TABLET	70	STRATTERA 100 MG CAPSULE	31	sulfamethoxazole-tmp ds tablet	86
SPRYCEL 20 MG TABLET	70	STRATTERA 18 MG CAPSULE	31	sulfamethoxazole-tmp inj vial	86
SPRYCEL 50 MG TABLET	70	STRATTERA 25 MG CAPSULE	32	sulfamethoxazole-tmp ss tablet	86
SPRYCEL 70 MG TABLET	70	STRATTERA 40 MG CAPSULE	32	sulfamethoxazole-tmp susp	86
SPRYCEL 80 MG TABLET	70	STRATTERA 60 MG CAPSULE	32	sulfasalazine 500 mg tablet	86
SPS 15 GM/60 ML SUSPENSION	50	STRATTERA 80 MG CAPSULE	32	sulfasalazine dr 500 mg tab	86
SPS 30 GM/120 ML ENEMA	50	streptomycin sulf 1 gm vial	11	SULFATRIM PEDIATRIC SUSPENSION	86
SRONYX 0.10-0.02 MG TABLET	55	STRIANT 30 MG MUCOADHESIVE	12	sulf-pred 10-0.23% eye drops	86
SSD 1% CREAM	16	STRIBILD TABLET	24	sulindac 150 mg tablet	73
STAMARIL VIAL	88	STRIVERDI RESPIMAT INHAL	37	sulindac 200 mg tablet	73
stavudine 1 mg/ml solution	24	STROVITE FORTE CAPLET	81	SUMADAN KIT	44
stavudine 15 mg capsule	24	STROVITE ONE CAPLET	81	SUMADAN XLT KIT	44
stavudine 20 mg capsule	24	SUBOXONE 12 MG-3 MG SL FILM	78	sumatriptan 20 mg nasal spray	83
stavudine 30 mg capsule	24	SUBOXONE 2 MG-0.5 MG SL FILM	78	sumatriptan 4 mg/0.5 ml cart	83
stavudine 40 mg capsule	24	SUBOXONE 4 MG-1 MG SL FILM	78	sumatriptan 4 mg/0.5 ml inject	83
STAXYN	84	SUBOXONE 8 MG-2 MG SL FILM	78	sumatriptan 5 mg nasal spray	83

sumatriptan 6 mg/0.5 ml inject	83	SYLATRON 888 MCG 4-PACK	28	SYNTHROID 112 MCG TABLET	62
sumatriptan 6 mg/0.5 ml refill	83	SYMAX-SL 0.125 MG TABLET SL	29	SYNTHROID 125 MCG TABLET	62
sumatriptan 6 mg/0.5 ml syrng	83	SYMAX-SR 0.375 MG TABLET	29	SYNTHROID 137 MCG TABLET	62
sumatriptan 6 mg/0.5 ml vial	83	SYMBICORT 160-4.5 MCG INHALER	26	SYNTHROID 150 MCG TABLET	62
sumatriptan succ 100 mg tablet	83	SYMBICORT 80-4.5 MCG INHALER	26	SYNTHROID 175 MCG TABLET	62
sumatriptan succ 25 mg tablet	83	SYMLINPEN 120 PEN INJECTOR	20	SYNTHROID 200 MCG TABLET	62
sumatriptan succ 50 mg tablet	83	SYMLINPEN 60 PEN INJECTOR	20	SYNTHROID 25 MCG TABLET	62
SUMAXIN CP KIT	44	SYNAGIS 100 MG/1 ML VIAL	65	SYNTHROID 300 MCG TABLET	62
SUPERVITE EC CAPLET	81	SYNAGIS 50 MG/0.5 ML VIAL	65	SYNTHROID 50 MCG TABLET	62
SUPRAX 500 MG/5 ML SUSPENSION	34	SYNAREL 2 MG/ML NASAL SPRAY	63	SYNTHROID 75 MCG TABLET	62
SUPREP BOWEL PREP KIT	66	SYNERCID 500 MG VIAL	16	SYNTHROID 88 MCG TABLET	62
SUSTIVA 200 MG CAPSULE	24	SYNJARDY 12.5-1,000 MG TABLET	20	SYPRINE 250 MG CAPSULE	50
SUSTIVA 50 MG CAPSULE	24	SYNJARDY 12.5-500 MG TABLET	20	TABLOID 40 MG TABLET	27
SUSTIVA 600 MG TABLET	24	SYNJARDY 5-1,000 MG TABLET	20	tacrolimus 0.03% ointment	44
SUTENT 12.5 MG CAPSULE	70	SYNJARDY 5-500 MG TABLET	20	tacrolimus 0.1% ointment	44
SUTENT 25 MG CAPSULE	70	SYNJARDY XR 10-1,000 MG TABLET	20	tacrolimus 0.5 mg capsule	64
SUTENT 37.5 MG CAPSULE	70	SYNJARDY XR 12.5-1,000 MG TAB	20	tacrolimus 1 mg capsule	64
SUTENT 50 MG CAPSULE	70	SYNJARDY XR 25-1,000 MG TABLET	20	tacrolimus 5 mg capsule	64
SYEDA 28 TABLET	55	SYNJARDY XR 5-1,000 MG TABLET	20	TAFINLAR 50 MG CAPSULE	70
SYLATRON 200 MCG KIT	28	SYNRIBO 3.5 MG/ML VIAL	28	TAFINLAR 75 MG CAPSULE	70
SYLATRON 300 MCG KIT	28	SYNTHROID 100 MCG TABLET	62	TAGITOL V 40% SUSP	69
SYLATRON 600 MCG KIT	28			TAGRISSO 40 MG TABLET	70

TAGRISSO 80 MG TABLET	70	TAZICEF 2 GRAM VIAL	35	TEFLARO 600 MG VIAL	35
TALWIN 30 MG/ML VIAL	77	TAZICEF 6 GRAM VIAL	35	TEKTURNA 150 MG TABLET	40
TAMIFLU 6 MG/ML SUSPENSION	26	TAZORAC 0.05% CREAM	44	TEKTURNA 300 MG TABLET	40
tamoxifen 10 mg tablet	21	TAZORAC 0.05% GEL	44	TEKTURNA HCT 150-12.5 MG TAB	40
tamoxifen 20 mg tablet	21	TAZORAC 0.1% CREAM	44	TEKTURNA HCT 150-25 MG TABLET	40
tamsulosin hcl 0.4 mg capsule	32	TAZORAC 0.1% GEL	44	TEKTURNA HCT 300-12.5 MG TAB	40
TANDEM PLUS CAPS	90	TAZTIA XT 120 MG CAPSULE	39	TEKTURNA HCT 300-25 MG TABLET	40
TANDEM PLUS CAPSULE	81	TAZTIA XT 180 MG CAPSULE	39	telmisartan 20 mg tablet	13
TARCEVA 100 MG TABLET	70	TAZTIA XT 240 MG CAPSULE	39	telmisartan 40 mg tablet	13
TARCEVA 150 MG TABLET	70	TAZTIA XT 300 MG CAPSULE	39	telmisartan 80 mg tablet	13
TARCEVA 25 MG TABLET	70	TAZTIA XT 360 MG CAPSULE	39	telmisartan-amlodipine 40-10	13
TARGETIN 1% GEL	83	TECENTRIQ 1,200 MG/20 ML VIAL	71	telmisartan-amlodipine 40-5 mg	13
TARINA FE 1-20 TABLET	55	TECFIDERA DR 120 MG CAPSULE	71	telmisartan-amlodipine 80-10	13
TARON FORTE CAPS	90	TECFIDERA DR 240 MG CAPSULE	71	telmisartan-amlodipine 80-5 mg	13
TARON FORTE CAPSULE	81	TECFIDERA STARTER PACK	71	telmisartan-hctz 40-12.5 mg tb	13
TASIGNA 150 MG CAPSULE	70	TECHLITE PEN NEEDLE 31GX1/4"	69	telmisartan-hctz 80-12.5 mg tb	13
TASIGNA 200 MG CAPSULE	70	TECHLITE PEN NEEDLE 31GX5/16"	69	telmisartan-hctz 80-25 mg tab	13
tazarotene 0.1% cream	44	TECHLITE PEN NEEDLE 32GX1/4"	69	temazepam 15 mg capsule	55
TAZICEF 1 GM ADD-VANTAGE VIAL	34	TECHLITE PEN NEEDLE 32GX5/16"	69	temazepam 22.5 mg capsule	55
TAZICEF 1 GM/50 ML BAG	34	TECHLITE PEN NEEDLE 32GX5/32"	69	temazepam 30 mg capsule	55
TAZICEF 1 GRAM VIAL	34	TEFLARO 400 MG VIAL	35	temazepam 7.5 mg capsule	55
TAZICEF 2 GM ADD-VANTAGE	35				

TENCON 50-325 MG TABLET	12	testosterone cyp 200 mg/ml	12	THEOCHRON ER 300 MG TABLET	79
teniposide 50 mg/5 ml ampule	28	testosterone enan 200 mg/ml	12	theophylline 400 mg/500 ml d5w	79
TENIVAC SYRINGE	88	tetanus diphtheria toxoids	88	theophylline 80 mg/15 ml soln	79
TEPADINA 100 MG VIAL	10	tetrabenazine 12.5 mg tablet	40	theophylline er 100 mg tablet	79
TEPADINA 15 MG VIAL	10	tetrabenazine 25 mg tablet	40	theophylline er 200 mg tablet	79
terazosin 1 mg capsule	32	tetracaine hcl 0.5% eye soln	73	theophylline er 300 mg tab	79
terazosin 10 mg capsule	32	tetracycline 250 mg capsule	87	theophylline er 400 mg tablet	79
terazosin 2 mg capsule	32	tetracycline 500 mg capsule	87	theophylline er 450 mg tab	79
terazosin 5 mg capsule	32	TETRAVISC 0.5% EYE DROPS	73	theophylline er 600 mg tablet	79
terbinafine hcl 250 mg tablet	22	TETRAVISC FORTE 0.5% EYE DROPS	73	THERACYS 81 MG VIAL	88
terbutaline sulf 1 mg/ml vial	37	TEXACORT 2.5% SOLUTION	60	thioridazine 10 mg tablet	8
terbutaline sulfate 2.5 mg tab	37	THALOMID 100 MG CAPSULE	14	thioridazine 100 mg tablet	8
terbutaline sulfate 5 mg tab	37	THALOMID 150 MG CAPSULE	14	thioridazine 25 mg tablet	8
terconazole 0.4% cream	22	THALOMID 200 MG CAPSULE	14	thioridazine 50 mg tablet	8
terconazole 0.8% cream	22	THALOMID 50 MG CAPSULE	14	thiotepa 15 mg vial	10
terconazole 80 mg suppository	22	THEO-24 ER 100 MG CAPSULE	79	thiothixene 1 mg capsule	8
TESSALON PERLE 100 MG CAP	41	THEO-24 ER 200 MG CAPSULE	79	thiothixene 10 mg capsule	8
testosteron cyp 1,000 mg/10 ml	12	THEO-24 ER 300 MG CAPSULE	79	thiothixene 2 mg capsule	8
testosterone 12.5 mg/1.25 gram	12	THEO-24 ER 400 MG CAPSULE	79	thiothixene 5 mg capsule	8
testosterone 25 mg/2.5 gm pkt	12	THEOCHRON ER 100 MG TABLET	79	THYMOGLOBULIN 25 MG VIAL	65
testosterone 50 mg/5 gram pkt	12	THEOCHRON ER 200 MG TABLET	79	THYROLAR-1 STRENGTH TABLET	62

THYROLAR-1/2 STRENGTH TAB	62	TIS-U-SOL PENTALYTE IRRIG SOLN	69	tobramycin 40 mg/ml vial	11
THYROLAR-1/4 STRENGTH TAB	62	TIVICAY 10 MG TABLET	23	tobramycin 80 mg/100 ml ns	11
THYROLAR-2 STRENGTH TABLET	62	TIVICAY 25 MG TABLET	23	tobramycin-dexameth ophth susp	74
THYROLAR-3 STRENGTH TABLET	62	TIVICAY 50 MG TABLET	23	TOBREX 0.3% EYE OINTMENT	11
tiagabine hcl 2 mg tablet	56	tizanidine hcl 2 mg capsule	30	tolazamide 250 mg tablet	20
tiagabine hcl 4 mg tablet	56	tizanidine hcl 2 mg tablet	30	tolazamide 500 mg tablet	20
TIGAN 100 MG/ML VIAL	21	tizanidine hcl 4 mg capsule	30	tolbutamide 500 mg tablet	20
tigecycline 50 mg vial	16	tizanidine hcl 4 mg tablet	30	tolcapone 100 mg tablet	28
TIKOSYN 125 MCG CAPSULE	15	TL HEM 150 CAPLETS	90	tolmetin sodium 200 mg tab	73
TIKOSYN 250 MCG CAPSULE	15	TL ICON CAPS	90	tolmetin sodium 400 mg cap	73
TIKOSYN 500 MCG CAPSULE	15	TL ICON CAPSULE	81	tolmetin sodium 600 mg tab	73
TILIA FE 28 TABLET	55	TL-FLUORIVITE CHEWABLE TABLET	90	tolterodine tart er 2 mg cap	29
timolol 0.25% eye drops	74	TL-HEM 150 CAPLET	81	tolterodine tart er 4 mg cap	29
timolol 0.25% gfs gel-solution	74	TOBI PODHALER 28 MG INHALE CAP	41	tolterodine tartrate 1 mg tab	30
timolol 0.5% eye drops	74	TOBRADEX EYE OINTMENT	74	tolterodine tartrate 2 mg tab	30
timolol 0.5% gel-solution	74	TOBRADEX ST EYE DROPS	74	topiramate 100 mg tablet	58
timolol maleate 10 mg tablet	33	tobramycin 0.3% eye drops	11	topiramate 15 mg sprinkle cap	58
timolol maleate 20 mg tablet	33	tobramycin 1.2 gm vial	11	topiramate 200 mg tablet	58
timolol maleate 5 mg tablet	33	tobramycin 1.2 gram/30 ml vial	11	topiramate 25 mg sprinkle cap	58
tinidazole 250 mg tablet	29	tobramycin 10 mg/ml vial	11	topiramate 25 mg tablet	58
tinidazole 500 mg tablet	29	tobramycin 300 mg/5 ml ampule	41	topiramate 50 mg tablet	58

TOPOSAR 1,000 MG/50 ML VIAL	51	tramadol hcl er 200 mg tablet	76	TREANDA 180 MG/2 ML VIAL	10
TOPOSAR 100 MG/5 ML VIAL	51	tramadol hcl er 300 mg tablet	76	TREANDA 25 MG VIAL	10
TOPOSAR 500 MG/25 ML VIAL	51	tramadol-acetaminophn 37.5-325	77	TREANDA 45 MG/0.5 ML VIAL	10
topotecan hcl 4 mg vial	51	trandolapril 1 mg tablet	14	TRECATOR 250 MG TABLET	30
topotecan hcl 4 mg/4 ml vial	51	trandolapril 2 mg tablet	14	TRELSTAR 11.25 MG SYRINGE	63
TORISEL 25 MG KIT	64	trandolapril 4 mg tablet	14	TRELSTAR 11.25 MG VIAL	63
torsemide 10 mg tablet	45	trandolapr-verapam er 1-240 mg	14	TRELSTAR 22.5 MG SYRINGE	63
torsemide 100 mg tablet	45	trandolapr-verapam er 2-180 mg	14	TRELSTAR 3.75 MG SYRINGE	63
torsemide 20 mg tablet	45	trandolapr-verapam er 2-240 mg	14	TRELSTAR 3.75 MG VIAL	63
torsemide 5 mg tablet	45	trandolapr-verapam er 4-240 mg	14	TRESIBA FLEXTOUCH 100 UNITS/ML	66
TOUJEO SOLOSTAR 300 UNITS/ML	66	tranexamic acid 1,000 mg/10 ml	58	TRESIBA FLEXTOUCH 200 UNITS/ML	66
TOVIAZ ER 4 MG TABLET	30	tranexamic acid 650 mg tablet	58	tretinoin 0.01% gel	44
TOVIAZ ER 8 MG TABLET	30	TRANSDERM-SCOP 1.5 MG/3 DAY	21	tretinoin 0.025% cream	44
tpn electrolytes vial	50	tranylcypromine sulf 10 mg tab	70	tretinoin 0.025% gel	44
TRACLEER 125 MG TABLET	82	TRAVASOL 10% SOLN VIAFLEX	50	tretinoin 0.05% cream	44
TRACLEER 62.5 MG TABLET	82	TRAVATAN Z 0.004% EYE DROP	73	tretinoin 0.05% gel	44
TRADJENTA 5 MG TABLET	20	trazodone 100 mg tablet	19	tretinoin 0.1% cream	44
tramadol er 100 mg tablet	76	trazodone 150 mg tablet	19	tretinoin 10 mg capsule	83
tramadol er 200 mg tablet	76	trazodone 300 mg tablet	19	tretinoin gel micro 0.04% pump	44
tramadol er 300 mg tablet	76	trazodone 50 mg tablet	19	tretinoin gel micro 0.04% tube	44
tramadol hcl 50 mg tablet	77	TREANDA 100 MG VIAL	10	tretinoin gel micro 0.1% pump	44
tramadol hcl er 100 mg tablet	76				

tretinoin gel micro 0.1% tube	44	triazolam 0.125 mg tablet	32	trimethobenzamide 300 mg cap	21
TREXALL 10 MG TABLET	64	triazolam 0.25 mg tablet	32	trimethoprim 100 mg tablet	16
TREXALL 15 MG TABLET	64	TRICON CAPS	90	trimipramine maleate 100 mg cp	88
TREXALL 5 MG TABLET	64	TRICON CAPSULE	81	trimipramine maleate 25 mg cap	88
TREXALL 7.5 MG TABLET	64	TRIDERM 0.1% CREAM	60	trimipramine maleate 50 mg cap	88
triamcinolone 0.025% cream	60	TRI-ESTARYLLA TABLET	55	TRINESSA LO TABLET	55
triamcinolone 0.025% lotion	60	TRIFERIC 272 MG/50 ML AMPULE	81	TRINESSA TABLET	55
triamcinolone 0.025% oint	60	trifluoperazine 1 mg tablet	8	TRINELLIX 10 MG TABLET	19
triamcinolone 0.1% cream	60	trifluoperazine 10 mg tablet	8	TRINELLIX 20 MG TABLET	19
triamcinolone 0.1% lotion	60	trifluoperazine 2 mg tablet	8	TRINELLIX 5 MG TABLET	19
triamcinolone 0.1% ointment	60	trifluoperazine 5 mg tablet	8	triple-vit w-fluor 0.25 mg/ml	90
triamcinolone 0.1% paste	41	trifluridine 1% eye drops	23	TRI-PREVIFEM TABLET	55
triamcinolone 0.147 mg/g spray	60	TRIGELS F FORTE SOFTGEL	90	TRISENOX 10 MG/10 ML AMPULE	28
triamcinolone 0.5% cream	60	TRIGELS-F FORTE SOFTGEL	81	TRI-SPRINTEC TABLET	55
triamcinolone 0.5% ointment	60	trihexyphenidyl 2 mg tablet	16	TRIUMEQ TABLET	24
triamcinolone 55 mcg nasal spr	26	trihexyphenidyl 2 mg/5 ml elx	16	TRI-VIT-FLUOR 0.25 MG/ML DROP	90
triamterene-hctz 37.5-25 mg cp	45	trihexyphenidyl 5 mg tablet	16	TRI-VIT-FLUOR 0.5 MG/ML DROP	90
triamterene-hctz 37.5-25 mg tb	45	TRI-LEGEST FE-28 DAY TABLET	55	TRI-VIT-FLUOR-IRON 0.25 MG/ML	90
triamterene-hctz 50-25 mg cap	45	TRI-LINYAH TABLET	55	TRIVORA-28 TABLET	55
triamterene-hctz 75-50 mg tab	45	TRI-LO-ESTARYLLA TABLET	55	TROPHAMINE 10% IV SOLUTION	50
TRIANEX 0.05% OINTMENT	60	TRI-LO-MARZIA TABLET	55	TROPHAMINE 6% IV SOLUTION	50
		TRILYTE WITH FLAVOR PACKETS	66		

tropicamide 0.5% eye drops	73	TYVASO INHALATION REFILL KIT	82	UNITUXIN 17.5 MG/ 5 ML VIAL	71
tropicamide 1% eye drops	73	TYVASO INHALATION STARTER KIT	82	UR N-C TABLET	30
trospium chloride 20 mg tablet	30	TYZEKA 600 MG TABLET	23	URAMAXIN 20% FOAM	44
trospium chloride er 60 mg cap	30	UDAMIN SP CAPLET	81	URAMAXIN 45% LOTION	44
TRULICITY 0.75 MG/0.5 ML PEN	20	ULORIC 40 MG TABLET	22	URAMAXIN 45% NAIL GEL	44
TRULICITY 1.5 MG/0.5 ML PEN	20	ULORIC 80 MG TABLET	22	URAMAXIN 45% UREA CREAM	44
TRUMENBA 120 MCG/0.5 ML VACCIN	88	ULTRAVATE X CRM COMBO PACK	44	URAMAXIN GT 45% PRE-FILLED APP	44
TRUVADA 100 MG-150 MG TABLET	24	ULTRAVATE X OINT COMBO PAC	44	urea 35% foam	44
TRUVADA 133 MG-200 MG TABLET	24	UMECTA 40% NAIL FILM PEN	44	urea 39% cream	44
TRUVADA 167 MG-250 MG TABLET	24	UMECTA 40% NAIL FILM SUSP	44	urea 40% gel	44
TRUVADA 200 MG-300 MG TABLET	24	UNITHROID 100 MCG TABLET	62	urea 40% nail kit	44
TUDORZA PRESSAIR 400 MCG INH	37	UNITHROID 112 MCG TABLET	62	urea 45% cream	44
TUSSIONEX 41 PENNKinetic SUSP	41	UNITHROID 125 MCG TABLET	62	urea 45% lotion	44
TWINRIX VACCINE VIAL	88	UNITHROID 137 MCG TABLET	62	urea 45% nail gel	44
TYBOST 150 MG TABLET	24	UNITHROID 150 MCG TABLET	62	URIN D.S. TABLET	30
TYGACIL 50 MG VIAL	16	UNITHROID 175 MCG TABLET	62	URO-458 TABLET	30
TYKERB 250 MG TABLET	70	UNITHROID 200 MCG TABLET	62	UROAV-81 TABLET	30
TYPHIM VI 25 MCG/0.5 ML SYRNG	88	UNITHROID 25 MCG TABLET	62	UROSEX TABLET	81
TYPHIM VI 25 MCG/0.5 ML VIAL	88	UNITHROID 300 MCG TABLET	62	ursodiol 250 mg tablet	56
TYSABRI 300 MG/15 ML VIAL	71	UNITHROID 50 MCG TABLET	62	ursodiol 300 mg capsule	56
TYVASO 1.74 MG/2.9 ML SOLUTION	82	UNITHROID 75 MCG TABLET	62	ursodiol 500 mg tablet	56
		UNITHROID 88 MCG TABLET	62	USTELL CAPSULE	30
				UVADEX 20 MCG/ML VIAL	44
				valacyclovir hcl 1 gram tablet	23

valacyclovir hcl 500 mg tablet	23	vancomycin 750 mg/150 ml bag	16	V-C FORTE CAPSULE	81
VALCHLOR 0.016% GEL	10	vancomycin hcl 10 gm vial	16	VECTIBIX 100 MG/5 ML VIAL	71
valganciclovir 450 mg tablet	18	vancomycin hcl 125 mg capsule	16	VECTIBIX 400 MG/20 ML VIAL	71
valganciclovir hcl 50 mg/ml	18	vancomycin hcl 1g/200 ml bag	16	VELCADE 3.5 MG VIAL	28
valproate sod 500 mg/5 ml vl	56	vancomycin hcl 250 mg capsule	16	VELIVET 28 DAY TABLET	55
valproic acid 250 mg capsule	56	vancomycin hcl 5 gm vial	16	VELPHORO 500 MG CHEWABLE TAB	79
valproic acid 250 mg/5 ml soln	56	vancomycin hcl 750 mg vial	16	VELTASSA 16.8 GM POWDER PACKET	50
valsartan 160 mg tablet	13	vancomycin-d5w 500 mg/100 ml	16	VELTASSA 25.2 GM POWDER PACKET	50
valsartan 320 mg tablet	13	VANDAZOLE VAGINAL 0.75% GEL	16	VELTASSA 8.4 GM POWDER PACKET	51
valsartan 40 mg tablet	13	VAQTA 25 UNITS/0.5 ML SYRINGE	88	VENCLEXTA 10 MG TABLET	28
valsartan 80 mg tablet	13	VAQTA 50 UNITS/ML SYRINGE	89	VENCLEXTA 100 MG TABLET	28
valsartan-hctz 160-12.5 mg tab	13	VARIBAR HONEY SUSPENS	69	VENCLEXTA 50 MG TABLET	28
valsartan-hctz 160-25 mg tab	13	VARIBAR NECTAR 40% SUSP	69	VENCLEXTA STARTING PACK	28
valsartan-hctz 320-12.5 mg tab	13	VARIBAR PUDDING 40% PASTE	69	venlafaxine hcl 100 mg tablet	86
valsartan-hctz 320-25 mg tab	13	VARIBAR THIN HONEY SUSP	69	venlafaxine hcl 25 mg tablet	86
valsartan-hctz 80-12.5 mg tab	13	VARIBAR THIN LIQUID 40% SUSP	69	venlafaxine hcl 37.5 mg tablet	86
vanco 500 mg/100 ml- 0.9% nacl	16	VARIVAX VACCINE WITH DILUENT	89	venlafaxine hcl 50 mg tablet	86
vanco 750 mg/150 ml- 0.9% nacl	16	VARIZIG 125 UNIT VIAL	65	venlafaxine hcl 75 mg tablet	86
vancomycin 1 g/200ml- 0.9% nacl	16	VARIZIG 125 UNIT/1.2 ML VIAL	89	venlafaxine hcl er 150 mg cap	86
vancomycin 1 gm vial	16	VASCEPA 0.5 GM CAPSULE	47	venlafaxine hcl er 150 mg tab	86
vancomycin 500 mg vial	16	VASCEPA 1 GM CAPSULE	47	venlafaxine hcl er 225 mg tab	86
		VAXCHORA VACCINE	89	venlafaxine hcl er 37.5 mg cap	86

venlafaxine hcl er 37.5 mg tab	86	verapamil er pm 100 mg capsule	39	VIDEX 2 GM PEDIATRIC SOLN	24
venlafaxine hcl er 75 mg cap	86	verapamil er pm 200 mg capsule	39	VIDEX 4 GM PEDIATRIC SOLN	24
venlafaxine hcl er 75 mg tab	86	verapamil er pm 300 mg capsule	39	VIENVA-28 TABLET	55
VENOFER 100 MG/5 ML VIAL	90	verapamil sr 120 mg capsule	39	VIGAMOX 0.5% EYE DROPS	83
VENOFER 200 MG/10 ML VIAL	90	verapamil sr 180 mg capsule	39	VIIBRYD 10 MG TABLET	86
VENOFER 50 MG/2.5 ML VIAL	90	verapamil sr 240 mg capsule	39	VIIBRYD 10-20 MG STARTER PACK	86
VENOFER VIAL	81	VEREGEN 15% OINTMENT	44	VIIBRYD 10-20-40 MG STARTER PACK	86
VENTAVIS 10 MCG/1 ML SOLUTION	82	VERSACLOZ 50 MG/ML SUSPENSION	87	VIIBRYD 20 MG TABLET	86
VENTAVIS 20 MCG/1 ML SOLUTION	82	VESICARE 10 MG TABLET	30	VIIBRYD 40 MG TABLET	86
VENTOLIN HFA 90 MCG INHALER	37	VESICARE 5 MG TABLET	30	VIMOVO DR 375-20 MG TABLET	73
VERAMYST 27.5 MCG NASAL SPRAY	26	VESTURA 3 MG-0.02 MG TABLET	55	VIMOVO DR 500-20 MG TABLET	73
verapamil 120 mg tablet	39	VGO 20 DISPOSABLE DEVICE	69	VIMPAT 10 MG/ML SOLUTION	85
verapamil 2.5 mg/ml vial	39	VGO 30 DISPOSABLE DEVICE	69	VIMPAT 100 MG TABLET	85
verapamil 360 mg cap pellet	39	VGO 40 DISPOSABLE DEVICE	69	VIMPAT 150 MG TABLET	85
verapamil 40 mg tablet	39	VIAGRA	84	VIMPAT 200 MG TABLET	85
verapamil 80 mg tablet	39	VIBERZI 100 MG TABLET	66	VIMPAT 200 MG/20 ML VIAL	85
verapamil er 120 mg capsule	39	VIBERZI 75 MG TABLET	66	VIMPAT 50 MG TABLET	85
verapamil er 120 mg tablet	39	VIC-FORTE CAPSULE	81	vinblastine 1 mg/ml vial	28
verapamil er 180 mg capsule	39	VICODIN 5-300 MG TABLET	77	VINCASAR PFS 1 MG/ML VIAL	28
verapamil er 180 mg tablet	39	VICODIN ES 7.5-300 MG TABLET	78	vincristine 1 mg/ml vial	28
verapamil er 240 mg capsule	39	VICODIN HP 10-300 MG TABLET	78	vinorelbine 10 mg/ml vial	28
verapamil er 240 mg tablet	39	VICTOZA 3-PAK 18 MG/3 ML PEN	20		

vinorelbine 50 mg/5 ml vial	28	VOTRIENT 200 MG TABLET	70	warfarin sodium 6 mg tablet	17
VIORELE 28 DAY TABLET	55	VP-PNV-DHA CAPSULE	90	warfarin sodium 7.5 mg tablet	17
VIRACEPT 250 MG TABLET	25	VPRIV 400 UNITS VIAL	57	WELCHOL 3.75G PACKET	47
VIRACEPT 625 MG TABLET	25	VRAYLAR 1.5 MG CAPSULE	9	WELCHOL 625 MG TABLET	47
VIREAD 150 MG TABLET	24	VRAYLAR 1.5 MG-3 MG PACK	9	WERA 0.5/0.035 MG 28 TABLET	55
VIREAD 200 MG TABLET	24	VRAYLAR 3 MG CAPSULE	10	WYMZYA FE CHEWABLE TABLET	55
VIREAD 250 MG TABLET	24	VRAYLAR 4.5 MG CAPSULE	10	XALKORI 200 MG CAPSULE	70
VIREAD 300 MG TABLET	24	VRAYLAR 6 MG CAPSULE	10	XALKORI 250 MG CAPSULE	70
VIREAD POWDER	24	VYFEMLA 28 TABLET	55	XAQUIL XR TABLET	81
VIRTRATE-2 SOLUTION	50	VYTONE CREAM PACKET	44	XARELTO 10 MG TABLET	17
virtussin ac liquid	41	VYTORIN 10-10 MG TABLET	47	XARELTO 15 MG TABLET	17
vit d2 1.25 mg (50,000 unit)	81	VYTORIN 10-20 MG TABLET	47	XARELTO 20 MG TABLET	17
VITACEL TABLET	81	VYTORIN 10-40 MG TABLET	47	XARELTO STARTER PACK	17
VITAFOL CAPLET	81	VYTORIN 10-80 MG TABLET	47	XATMEP 2.5 MG/ML ORAL SOLUTION	64
VITAFOL CAPLETS	90	warfarin sodium 1 mg tablet	17	XERAC AC 6.25% SOLUTION	44
VITAJECT INJECTION	81	warfarin sodium 10 mg tablet	17	XGEVA 120 MG/1.7 ML VIAL	68
vitamin k ampul	81	warfarin sodium 2 mg tablet	17	XIAFLEX 0.9 MG VIAL	57
VITEKTA 150 MG TABLET	23	warfarin sodium 2.5 mg tablet	17	XIFAXAN 200 MG TABLET	16
VITEKTA 85 MG TABLET	23	warfarin sodium 3 mg tablet	17	XIFAXAN 550 MG TABLET	16
VIVITROL 380 MG VIAL + DILUENT	10	warfarin sodium 4 mg tablet	17	XIGDUO XR 10 MG-1,000 MG TAB	20
voriconazole 200 mg tablet	22	warfarin sodium 5 mg tablet	17	XIGDUO XR 10 MG-500 MG TABLET	20
voriconazole 200 mg vial	22				
voriconazole 40 mg/ml susp	22				
voriconazole 50 mg tablet	22				

XIGDUO XR 5 MG-1,000 MG TABLET	21	ZALTRAP 100 MG/4 ML VIAL	71	ZENCHENT 0.4 MG-35 MCG TABLET	55
XIGDUO XR 5 MG-500 MG TABLET	21	ZALTRAP 200 MG/8 ML VIAL	28	ZENCHENT FE TABLET CHEWABLE	55
XOLAIR 150 MG VIAL	83	ZAMICET 10-325 MG/15 ML SOLN	78	ZENPEP DR 10,000 UNITS CAPSULE	57
XTAMPZA ER 13.5 MG CAPSULE	76	ZANOSAR 1 GM POWDER VIAL	10	ZENPEP DR 15,000 UNITS CAPSULE	57
XTAMPZA ER 18 MG CAPSULE	76	ZARAH TABLET	55	ZENPEP DR 20,000 UNITS CAPSULE	57
XTAMPZA ER 27 MG CAPSULE	76	ZARXIO 300 MCG/0.5 ML SYRINGE	37	ZENPEP DR 25,000 UNITS CAPSULE	57
XTAMPZA ER 36 MG CAPSULE	76	ZARXIO 480 MCG/0.8 ML SYRINGE	37	ZENPEP DR 3,000 UNITS CAPSULE	57
XTAMPZA ER 9 MG CAPSULE	76	ZAVARA 5,750 UNIT-1 MG CAP	81	ZENPEP DR 40,000 UNITS CAPSULE	57
XTANDI 40 MG CAPSULE	14	ZAVESCA 100 MG CAPSULE	57	ZENPEP DR 5,000 UNITS CAPSULE	57
XULANE PATCH	55	ZAZOLE 0.8% VAGINAL CREAM	22	ZEOSA CHEWABLE TABLET	55
XYLON 10-200 MG TABLET	78	ZAZOLE 80 MG VAGINAL SUPP	22	ZERIT 1 MG/ML SOLUTION	24
XYREM 500 MG/ML ORAL SOLUTION	84	ZAZOLE VAGINAL 0.4% CREAM	22	ZETIA 10 MG TABLET	47
YERVOY 200 MG/40 ML VIAL	71	ZEBUTAL 50-325-40 MG CAPSULE	12	ZETONNA 37 MCG NASAL SPRAY	26
YERVOY 50 MG/10 ML VIAL	71	ZEJULA 100 MG CAPSULE	28	ZIAGEN 20 MG/ML SOLUTION	24
YF-VAX 1 DOSE VIAL	89	ZELAPAR 1.25 MG ODT TABLET	70	zidovudine 100 mg capsule	24
YONDELIS 1 MG VIAL	10	ZELBORAF 240 MG TABLET	70	zidovudine 300 mg tablet	24
YUVAFEM 10 MCG VAGINAL INSERT	55	ZEMAIRA 1,000 MG VIAL	83	zidovudine 50 mg/5 ml syrup	24
zafirlukast 10 mg tablet	26	ZENATANE 10 MG CAPSULE	44	ZINACEF 1.5 GRAM/50 ML	35
zafirlukast 20 mg tablet	26	ZENATANE 20 MG CAPSULE	44	ZIOPTAN 0.0015% EYE DROPS	73
zaleplon 10 mg capsule	55	ZENATANE 30 MG CAPSULE	44	ziprasidone hcl 20 mg capsule	10
zaleplon 5 mg capsule	55	ZENATANE 40 MG CAPSULE	44	ziprasidone hcl 40 mg capsule	10

ziprasidone hcl 60 mg capsule	10	ZORTRESS 0.5 MG TABLET	64	ZYKADIA 150 MG CAPSULE	70
ziprasidone hcl 80 mg capsule	10	ZORTRESS 0.75 MG TABLET	64	ZYLET EYE DROPS	11
ZIRGAN 0.15% OPHTHALMIC GEL	18	ZOSTAVAX VIAL	89	ZYPREXA RELPREVV 210 MG VL KIT	10
ZMAX 2 G/60 ML ORAL SUSPENSION	67	ZOSYN 2.25 GM/50 ML GALAXY BAG	36	ZYPREXA RELPREVV 300 MG VL KIT	10
zoledronic acid 4 mg vial	68	ZOSYN 3.375 GM/50 ML GALAXY	36	ZYPREXA RELPREVV 405 MG VL KIT	10
zoledronic acid 4 mg/100 ml	68	ZOSYN 4.5 GM/100 ML GALAXY BAG	36	ZYTIGA 250 MG TABLET	14
zoledronic acid 4 mg/5 ml vial	68	ZOVIA 1-35E TABLET	55	ZYTIGA 500 MG TABLET	14
zoledronic acid 5 mg/100 ml	68	ZOVIA 1-50E TABLET	55		
ZOLINZA 100 MG CAPSULE	28	ZOVIRAX 5% CREAM	23		
zolmitriptan 2.5 mg odt	83	ZUBSOLV 0.7-0.18 MG TABLET SL	78		
zolmitriptan 2.5 mg tablet	83	ZUBSOLV 1.4-0.36 MG TABLET SL	78		
zolmitriptan 5 mg odt	83	ZUBSOLV 11.4-2.9 MG TABLET SL	78		
zolmitriptan 5 mg tablet	83	ZUBSOLV 2.9-0.71 MG TABLET SL	78		
zolpidem tart er 12.5 mg tab	55	ZUBSOLV 5.7-1.4 MG TABLET SL	78		
zolpidem tart er 6.25 mg tab	56	ZUBSOLV 8.6-2.1 MG TABLET SL	78		
zolpidem tartrate 10 mg tablet	56	ZYCLARA 2.5% CREAM PUMP	44		
zolpidem tartrate 5 mg tablet	56	ZYCLARA 3.75% CREAM	44		
zonisamide 100 mg capsule	39	ZYCLARA 3.75% CREAM PUMP	44		
zonisamide 25 mg capsule	39	ZYDELIG 100 MG TABLET	51		
zonisamide 50 mg capsule	39	ZYDELIG 150 MG TABLET	51		
ZORTRESS 0.25 MG TABLET	64	ZYFLO CR 600 MG TABLET	26		

## NOTES

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**1-800-558-9562 (TTY711)**  
8AM-8PM, local time, Monday through Friday



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This drug list was updated on September 21, 2017. For more recent information or other questions, please contact Cigna-HealthSpring Rx (PDP) Customer Service, at 1-800-558-9562 or, for TTY users, 711, 8AM-8PM, local time, Monday through Friday. Between October 1 and February 14, we are also open Saturday and Sunday, or visit [www.mycigna.com](http://www.mycigna.com). All Cigna products and services are provided exclusively by or through operating subsidiaries of Cigna Corporation, including Cigna Health and Life Insurance Company. The Cigna name, logos, and other Cigna marks are owned by Cigna Intellectual Property, Inc. Cigna-HealthSpring Rx (PDP) is a Medicare Prescription Drug Plan (PDP) with a Medicare contract. Enrollment in Cigna-HealthSpring depends on contract renewal.