

Horizon Blue Cross Blue Shield of New Jersey

Classic Formulary

October 2026

Please talk to your doctor about prescribing medicines from this drug list (formulary). It may help you and your doctor to choose an appropriate medicine and may help reduce your out-of-pocket costs.

This Drug Guide is regularly updated. Please sign Member Online Services at <http://www.HorizonBlue.com>, select “Get Care” and select “Pharmacy Services” to search for medicines according to your pharmacy benefit plan and applicable exclusions.

Contents

Introduction	I
Drug selection	I
Member prescription benefit	I
Generic drugs	II
Affordable Care Act	II
Utilization management (UM)	II
Prior Authorization/Medical Necessity Review and Determination	II
Quantity Limit	III
Specialty	III
How to use this list	IV
Abbreviation key	V

Therapeutic Class Drug List

Anti-Infective Drugs	1
Biologicals	7
Antineoplastic Agents	9
Endocrine and Metabolic Drugs	14
Cardiovascular Agents	22
Respiratory Agents	27
Gastrointestinal Agents	30
Genitourinary Agents	32
Central Nervous System Drugs	33
Analgesics and Anesthetics	41
Neuromuscular Drugs	45
Nutritional Products	48
Hematological Agents	49
Topical Products	51
Miscellaneous Products	56
Index	88

To search for a drug name within this PDF document, use the **Control** and **F** keys on your keyboard, or go to **Edit** in the drop-down menu and select **Find/Search**. Type in the word or phrase you are looking for and click on **Search**.

An Independent Licensee of the
Blue Cross Blue Shield Association.

Introduction

Horizon Blue Cross Blue Shield of New Jersey (“Horizon BCBSNJ”) is pleased to present the **Classic Formulary**. Our goal is to give our members access to safe and effective prescription medicines. Refer to this guide for information, and present it to your doctor if you need a prescription. To note, the guide is updated on a **quarterly** basis. The most recent updates can be accessed [here](#).

The drug list (formulary) is a list of medicines included on the formulary. Coverage of medicines and supplies included on this drug list is subject to your coverage provisions and applicable exclusions, and may differ from that listed. Please refer to the policy and benefit information you received from Horizon BCBSNJ to identify coverage provisions and exclusions. When we refer to “policy and benefit information”, we are referring to one or more of the following: Certificate of Coverage, Contract, or Member Handbook.

Drug selection

Each medicine chosen for the drug list was analyzed for its safety, efficacy and value by Horizon BCBSNJ's Pharmacy and Therapeutics (P&T) Committee. The P&T Committee is made up of local, independent practicing doctors and pharmacists and meets at least quarterly. Decisions to add or remove medicines from the formulary are based on safety, efficacy, uniqueness and cost. *Newly marketed prescription drugs will not be covered until the P&T Committee has had an opportunity to review the drug, to determine whether the drug will be covered and if so, which tier will apply based on safety, efficacy, and the availability of other products within that class of drugs. If your physician feels that a new drug is medically necessary prior to P&T Committee evaluation, a Formulary Exception request for coverage may be submitted.*

Horizon BCBSNJ encourages doctors to prescribe Generic (Tier 1) and Preferred (Tier 2) medicines. While coverage is provided for Non-Preferred medicines (Tier 3), members have a higher copay or cost share for them.

To find recent changes or the most current version of this guide, and to search for medicines according to your benefit design and applicable exclusions, log into Member Online Services at <http://www.HorizonBlue.com>. You can also access the most current version of the Guide at <http://www.horizonblue.com/formulary>.

Member prescription benefit

The drug list is grouped into tiers, and your co-payment or cost share is determined by the tier that the medicine is on: generic (Tier 1), Preferred brand (Tier 2) and Non-Preferred brand (Tier 3).

Tier 1 – Lowest copayment – Generics. Tier 1 includes all generic medicines although not all generics are listed.

Tier 2 – Middle copayment – Preferred brands. Tier 2 medicines are displayed.

Tier 3 – Highest copayment – Non-Preferred brands. Tier 3 medicines are displayed.

All available covered drugs are shown on this list. *Drugs that are not covered will not be listed in the Prescription Drug List. If your physician feels that a non-covered drug is medically necessary, a Formulary Exception request for coverage may be submitted.* Certain drug classes are excluded from coverage (not covered) including investigational and cosmetic (such as Propecia® for hair growth), anti-obesity (such as Wegovy®, Saxenda®, or Zepbound®) and erectile dysfunction (such as Viagra®) drugs. Coverage, copayment, and additional restrictions and exclusions may vary depending on your pharmacy plan design. Please refer to the policy and benefit information you received from Horizon BCBSNJ.

REMINDER: If you disagree with the decision of your initial Formulary Exception request you may submit an appeal. Steps on how to submit will be outlined in your initial denial letter. In the case of a claim for urgent care, an expedited review process is available. Please be sure to refer to your initial Formulary Exception denial letter for your appeals rights.

Generic drugs

Horizon BCBSNJ encourages the use of generics as a way to provide high-quality medicine at a reduced cost. Generics are as safe and effective as their brand counterparts, and are usually less expensive. Generics are manufactured under the same strict requirements of the Food and Drug Administration's (FDA's) current Good Manufacturing Practice regulations required for brand drugs in manufacturing, strength, purity and quality.

An FDA-approved generic medicine may be substituted for the brand counterpart when it:

- Contains the same active ingredient(s) as the brand.
- Is identical in strength, dosage form and route of administration.
- Is therapeutically equivalent and can be expected to have the same clinical effect and safety profile.

To encourage use of generics, Tier 2 Preferred brand medicines typically move to Tier 3 or moved off the formulary after an equivalent generic version becomes available in Tier 1.

If you choose to receive a brand name medicine that has a generic equivalent is available, you may be subject to a reduced benefit and a higher out-of-pocket expense for that brand name medicine.

Affordable Care Act

Some medicines may have limited or \$0 cost-sharing under the Affordable Care Act; examples of categories that may be subject to limited or \$0 cost share include aspirin, breast cancer preventive, fluoride supplements, folic acid supplements, gonorrhea prophylaxis (newborn), HIV pre-exposure prophylaxis, iron supplements, some statin medications, some tobacco cessation products, vitamin D supplements, bowel preparation medications, and some contraceptive drugs and devices. These medicines may also have age restrictions in order to have limited or \$0 cost-sharing.

If you do not find the medicine you are searching for in this Guide, call Pharmacy Member Services at 1-800-370-5088 to find out if the drug is available over-the-counter, or is covered under your medical benefit. You can also log into Member Online Services at <http://www.HorizonBlue.com>.

Keeping Copays Low for Select Asthma, Diabetes and Anaphylaxis Medicines

As of January 1, 2025,* there will be a maximum copay applied to all insulin products and asthma inhalers on the formulary and select epinephrine product on the formulary. Your drug coverage may vary depending on the covered drug list (formulary) that applies to your pharmacy benefit, and your copays may or may not be subject to deductibles based on your plan (deductibles only apply to Consumer-Directed Health Plans for epinephrine; all others do not need to meet a deductible).

The requirements of this law, P.L. 2023 c. 105 applies to fully insured Individual, Small and Large Group Plans. Inquire with your self-insured Plan's benefit package to determine if these benefits apply.

* This benefit is effective beginning on or after January 1, 2025, upon a Plan's issuance or renewal.

Utilization management (UM)

Some medicines have special requirements where your doctor must provide clinical information to Horizon BCBSNJ before the medicine will be approved and covered by the plan. These special requirements are called utilization management. Medicines with utilization management requirements such as Prior Authorization (PA), Medical Necessity Review and Determination (MND) or that are subject to a Quantity Limit (QL) are noted on the drug list.

Prior Authorization/Medical Necessity Review and Determination

Some medicines require Prior Authorization (PA) before coverage is approved. PA encourages medically necessary, safe, cost-effective medicine use by allowing coverage when certain conditions are met. PA makes sure a prescription is being filled that is suitable for the intended use and covered by the pharmacy benefit. Only drugs that are considered medically necessary are covered. If the Drug List shows that you need a PA for a medicine, your doctor must submit a PA request to Horizon BCBSNJ for review.

After your PA is reviewed, you and your doctor will receive an approval letter that indicates how long it's approved. If the PA request is not approved (denied), the denial reason will be stated along with instructions about the appeal process if you or your doctor wish to appeal. You also have the choice to buy the medicine at your own expense.

Some drugs may be reviewed for medical necessity from time to time, even though they are not subject to our PA requirements.

Detailed PA/MND information can be found [here](#).

Quantity Limit

A Quantity Limit (QL) controls the maximum amount of medicine covered per prescription. It can also identify gender or age restrictions and amount of medicine. QL are placed on certain categories and are based upon FDA-approved drug labeling. These limits help encourage safe and proper use. If the drug list shows that there is a QL, your doctor must submit a PA request to Horizon BCBSNJ for review if he/she wants to exceed the QL for your medicine. Clinical information will be required to be submitted with the PA request to explain why you need to exceed the quantity limit. If the PA request is approved, your medicine will be covered by your plan. If the request is not approved, there is an appeals process available or you may choose to buy the medicine at your own expense.

Detailed QL information can be found [here](#).

Specialty

Specialty medicines require special handling, patient monitoring, and unique education prior to use. These specialty medicines also require your doctor to submit a Prior Authorization (PA) request to Horizon BCBSNJ for review.

Horizon BCBSNJ has contracted with certain specialty pharmacies that specialize in providing these medicines and providing these therapies. Members who want to minimize their cost-sharing are required to obtain the specialty medicines from a participating specialty pharmacy. You cannot receive specialty medicine at a retail pharmacy, through home delivery or from a non-participating specialty pharmacy.

To find out more information about our Specialty Rx Program and to see the list and phone numbers of the participating specialty pharmacies, please refer [here](#).

How to use this list

The drug list is organized into broad categories (e.g. ANTINEOPLASTIC AGENTS AND RELATED DRUGS). The graphic below shows the information that is provided in each column of the drug list and is only an example. Please use the drug search function to find current information for drugs on the drug list. The below is an example and may not be reflective of the current formulary.

1	2	3	4	5	6	
Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
SYLATRON - peginterferon alfa-2b for inj kit 200 mcg	2	•	•	•		•
SYLATRON - peginterferon alfa-2b for inj kit 300 mcg	2	•	•	•		•
SYLATRON - peginterferon alfa-2b for inj kit 4 x 200 mcg	2	•	•	•		•
SYLATRON - peginterferon alfa-2b for inj kit 4 x 300 mcg	2	•	•	•		•
SYLATRON - peginterferon alfa-2b for inj kit 600 mcg	2	•	•	•		•
TABLOID - thioguanine tab 40 mg	2					
TAFINLAR - dabrafenib mesylate cap 50 mg (base equivalent)	2	•	•	•		•
TAFINLAR - dabrafenib mesylate cap 75 mg (base equivalent)	2	•	•	•		•
tamoxifen citrate tab 10 mg (base equivalent)	1				•	
tamoxifen citrate tab 20 mg (base equivalent)	1				•	
TARCEVA - erlotinib hcl tab 100 mg (base equivalent)	2	•	•	•		•

- 1 The first column of the chart lists the medicine name. Generic medicines are shown in lower-case **boldface** type. Most generics are followed by a reference brand medicine in (parentheses). Some generics have no reference brand. Brand medicines are shown in capital letters followed by the generic name.
- 2 The second column indicates the tier. 1=Generic, 2=Preferred brand, 3=Non-preferred brand, and A=\$0 if ACA requirements are met
- 3 These columns indicate the Utilization Management program(s) that apply to the medicine, such as Prior Authorization and Quantity Limits). If an indicator is present in the column(s), then the UM program(s) applies.
- 4 The column indicates if the medicine is considered a Specialty drug.
- 5 The column indicates if the medicine is required to be covered under the ACA.
- 6 The column indicates if the medicine is considered Limited Distribution.

Abbreviation key

aer.....aerosol
cap.....capsules
chew.....chewable
conc.....concentrate
cr.....controlled release
dr.....delayed release
ec.....enteric coated
equiv.....equivalent
er.....extended release
gm.....gram
inhal.....inhaler
inj.....injection
liqd.....liquid
mg.....milligram
ml.....milliliter

nebu.....nebulizer
odt.....orally disintegrating tabs
oint.....ointment
ophth.....ophthalmic
osm.....osmotic release
pack.....packets
powd.....powder
pttw.....twice-weekly patch
sl.....sublingual
soln.....solution
suppos.....suppositories
susp.....suspension
tab.....tablets
td.....transdermal
w/.....with

This Drug Guide is regularly updated. Please sign Member Online Services at <http://www.HorizonBlue.com> to search for medicines according to your benefit design and applicable exclusions.

Prime Therapeutics LLC supports Horizon Blue Cross Blue Shield of New Jersey in the administration of prescription drug benefits. Prime Therapeutics LLC is independent from and not affiliated with Horizon Blue Cross Blue Shield of New Jersey.

This page contains references to brand name prescription medicines that are trademarks or registered trademarks of pharmaceutical manufacturers that are not affiliated with Prime Therapeutics LLC, Horizon Blue Cross Blue Shield of New Jersey or the Blue Cross Blue Shield Association.

Notice of Availability

If you speak English, free language assistance services and auxiliary aids are available to provide information in accessible formats. Call the number on the back of your member ID card for help.

Si habla español, hay servicios gratuitos de asistencia lingüística y ayudas auxiliares disponibles para proporcionar información en formatos accesibles. Llame al número que figura en el reverso de su tarjeta de identificación de miembro para obtener ayuda.

如果您說中文，我們提供免費的語言協助服務和輔助工具，以無障礙格式提供資訊。請撥打您的會員 ID 卡背面的電話號碼尋求協助。

한국어를 사용하시는 경우, 무료 언어 지원 서비스 및 보조 기구를 통해 접근 가능한 형식으로 정보를 제공받을 수 있습니다. 도움이 필요하시면 가입자 ID 카드 뒷면에 있는 번호로 전화하시기 바랍니다.

Se fala português, estão disponíveis serviços de assistência linguística e auxiliares gratuitos para fornecer informações em formatos acessíveis. Telefone para o número no verso do seu cartão de identificação de associado para obter ajuda.

જો તમે ગુજરાતી બોલતા હોવ, તો સુલભ ફોમેટમાં માહિતી પૂરી પાડવા માટે નનિ:શુલ્ક ભાષા સહાયતા સેવાઓ અને પૂરક સહાયો ઉપલબ્ધ છે. મદદ માટે તમારા સભ્ય આઈડી કાર્ડની પાછળના નંબર પર કોલ કરો.

Jeśli posługujesz się językiem polski, dostępne są bezpłatne usługi wsparcia językowego i materiały pomocnicze w celu przekazania informacji w przystępnym formacie. Aby uzyskać pomoc, zadzwoń pod numer podany na odwrocie identyfikacyjnej karty członkowskiej.

Se parlate italiano, sono disponibili servizi gratuiti di assistenza linguistica e ausili aggiuntivi per fornire informazioni in formati accessibili. Chiamate il numero sul retro della Vostra tessera identificativa per ricevere assistenza.

إذا كنت تتحدث العربية، تتوفر خدمات المساعدة اللغوية المجانية والمساعدات الإضافية لتوفير المعلومات بصيغ يسهل الوصول إليها. اتصل بالرقم الموجود على ظهر بطاقة هوية العضو للحصول على المساعدة.

Kung nagsasalita ka ng Tagalog, handang magamit ang mga libreng tulong na serbisyo sa wika at mga auxiliary na tulong para magbigay ng impormasyon sa mga naa-access na format. Tawagan ang numero sa likod ng iyong kard ng pagkakakilanlan bilang miyembro para sa tulong.

Если вы говорите на Русский язык, мы готовы бесплатно предоставить услуги переводчика и вспомогательные средства для получения информации в доступных форматах. Для получения помощи позвоните по номеру, указанному на обратной стороне вашей карточки участника.

Si w pale Kreyòl Ayisyen, sèvis asistans lang gratis ak èd oksilyè disponib pou bay enfòmasyon nan fòm ki aksesib. Rele nimewo ki sou do kat manm ou a pou èd.

यदि आप हिंदी बोलते हैं, तो सुलभ प्रारूपों में जानकारी प्रदान करने के ललए ननि:शुल्क भाषा सहायता सेवाएं और सहायक साधन उपलब्ध हैं। मिि के ललए अपने सिस्स आईडी कार्ड के पीछे दिए गए नंबर पर कॉल करें।

Nếu bạn nói tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí và công cụ hỗ trợ để cung cấp thông tin ở các định dạng có thể truy cập. Hãy gọi số điện thoại ở mặt sau thẻ nhận dạng thành viên của bạn để được trợ giúp.

Si vous parlez français, des services d'assistance linguistique gratuits sont à votre disposition, ainsi que des outils auxiliaires fournissant des informations dans des formats accessibles. Pour recevoir de l'aide, appelez le numéro indiqué au dos de votre carte de membre.

اگر آپ اردو بولتے ہي، تو مفت زبان کی مددکی خدمات اور معاون امداد ایک قابل رسائی شکل م نی معلومات کی فراہمی کے ل نی دستیاب ہ نی۔ مدد کے ل نی اپ ےت م م رب آ یح ڈی کارڈ کی پشت پر موجود نم رب پرکال کریں۔

আপনি যদি বাংলায় ভাষায় কথা বললি, তাহলে সহজলভ্য ফর্ম্যালা তথ্য প্রদানির জিহি নব্বিমূললয় ভাষা সহায়তা পনরলয়বা ও সহায়ক উপকরণ উপলব্ধ রলয়লা। সাহায্যর জিহি আপারি সসিহ আইনি কালারি নপলি দিওয়া নম্বর। কল করু।

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
ANTI-INFECTIVE AGENTS							CEFACLOR - cefaclor cap 250 mg, 500 mg	3					
PENICILLINS							CEFADROXIL - cefadroxil tab 1 gm	3					
AMOXICILLIN - amoxicillin (trihydrate) chew tab 125 mg, 250 mg	1						cefadroxil cap 500 mg	1					
amoxicillin (trihydrate) cap 250 mg, 500 mg	1						cefadroxil for susp 250 mg/5ml, 500 mg/5ml	1					
amoxicillin (trihydrate) for susp 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml	1						cefdinir cap 300 mg	1					
amoxicillin (trihydrate) tab 500 mg, 875 mg	1						cefdinir for susp 125 mg/5ml, 250 mg/5ml	1					
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml, 250-62.5 mg/5ml, 400-57 mg/5ml	1						cefixime for susp 200 mg/5ml (Suprax)	1					
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml (Augmentin es-600)	1						CEFPODOXIME PROXETIL - cefpodoxime proxetil for susp 50 mg/5ml, 100 mg/5ml	1					
amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg	1						cefpodoxime proxetil tab 100 mg, 200 mg	1					
amoxicillin & k clavulanate tab 250-125 mg, 875-125 mg	1						cefprozil for susp 125 mg/5ml, 250 mg/5ml	1					
amoxicillin & k clavulanate tab 500-125 mg (Augmentin)	1						cefprozil tab 250 mg, 500 mg	1					
AMOXICILLIN/POTASSIUM CLA - amoxicillin & k clavulanate chew tab 200-28.5 mg	3						cefuroxime axetil tab 250 mg, 500 mg	1					
AMOXICILLIN/POTASSIUM CLA - amoxicillin & k clavulanate chew tab 400-57 mg	1						cephalexin cap 250 mg, 500 mg, 750 mg	1					
ampicillin cap 500 mg	1						cephalexin for susp 125 mg/5ml, 250 mg/5ml	1					
AUGMENTIN - amoxicillin & k clavulanate for susp 125-31.25 mg/5ml	3						MACROLIDES						
dicloxacillin sodium cap 250 mg, 500 mg	1						azithromycin for susp 100 mg/5ml, 200 mg/5ml (Zithromax)	1					
PENICILLIN V POTASSIUM - penicillin v potassium for soln 250 mg/5ml	1						azithromycin tab 250 mg, 500 mg (Zithromax)	1		•			
penicillin v potassium tab 250 mg, 500 mg	1						azithromycin tab 600 mg	1		•			
CEPHALOSPORINS							CLARITHROMYCIN - clarithromycin for susp 125 mg/5ml, 250 mg/5ml	1					
							clarithromycin tab er 24hr 500 mg	1		•			
							clarithromycin tab 250 mg, 500 mg	1		•			
							DIFICID - fidaxomicin for susp 40 mg/ml	3	•	•			

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
erythromycin ethylsuccinate for susp 200 mg/5ml (E.e.s. granules)	1						levofloxacin tab 250 mg, 500 mg, 750 mg	1		•			
erythromycin ethylsuccinate for susp 400 mg/5ml (Eryped 400)	1						moxifloxacin hcl tab 400 mg (base equiv)	1		•			
erythromycin tab delayed release 250 mg, 333 mg, 500 mg	1						OFLOXACIN - ofloxacin tab 400 mg	3					
erythromycin tab 250 mg, 500 mg	1						AMINOGLYCOSIDES						
fidaxomicin tab 200 mg (Difacid)	1		•				ARIKAYCE - amikacin sulfate liposome inhal susp 590 mg/8.4ml (base eq)	3	•	•	•		•
TETRACYCLINES							KITABIS PAK - tobramycin nebu soln 300 mg/5ml	3	•	•	•		•
demeclocycline hcl tab 150 mg, 300 mg	1	•					neomycin sulfate tab 500 mg	1					
doxycycline hyclate cap 50 mg	1						TOBI PODHALER - tobramycin inhal cap 28 mg	2	•	•	•		•
doxycycline hyclate cap 100 mg (Vibramycin)	1		•				TOBRAMYCIN - tobramycin nebu soln 300 mg/5ml	3	•	•	•		•
doxycycline hyclate tab 20 mg, 100 mg	1						tobramycin nebu soln 300 mg/5ml (Tobi)	1	•	•	•		•
doxycycline monohydrate cap 50 mg, 100 mg	1						tobramycin nebu soln 300 mg/4ml (Bethkis)	1	•	•	•		•
doxycycline monohydrate for susp 25 mg/5ml (Vibramycin)	1						SULFONAMIDES						
doxycycline monohydrate tab 50 mg, 75 mg, 100 mg, 150 mg	1		•				sulfadiazine tab 500 mg	1					
minocycline hcl cap 50 mg, 75 mg, 100 mg	1						ANTIMYCOBACTERIAL AGENTS						
NUZYRA - omadacycline tosylate tab 150 mg (base equivalent)	3	•	•			•	CYCLOSERINE - cycloserine cap 250 mg	3					
tetracycline hcl cap 250 mg, 500 mg	1	•					ethambutol hcl tab 100 mg	1					
FLUOROQUINOLONES							ethambutol hcl tab 400 mg (Myambutol)	1					
BAXDELA - delafloxacin meglumine tab 450 mg (base equiv)	3		•				isoniazid syrup 50 mg/5ml	1					
CIPRO - ciprofloxacin for oral susp 250 mg/5ml (5%) (5 gm/100ml), 500 mg/5ml (10%) (10 gm/100ml)	3						isoniazid tab 100 mg, 300 mg	1					
ciprofloxacin hcl tab 250 mg (base equiv), 500 mg (base equiv) (Cipro)	1						PRETOMANID - pretomanid tab 200 mg	2		•			•
ciprofloxacin hcl tab 750 mg (base equiv)	1						PRIFTIN - rifapentine tab 150 mg	3		•			
levofloxacin oral soln 25 mg/ml	1						pyrazinamide tab 500 mg	1					
							rifampin cap 150 mg, 300 mg	1					
							rifapentine tab 150 mg (Priftin)	1		•			
							SIRTURO - bedaquiline fumarate tab 20 mg (base equiv), 100 mg (base equiv)	2		•	•		•

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
ANTIFUNGALS							adefovir dipivoxil tab 10 mg (Hepsera)	1					
CRESEMBA - isavuconazonium sulfate cap 74.5 mg, 186 mg	3	•					APTIVUS - tipranavir cap 250 mg	3		•			
fluconazole for susp 10 mg/ml, 40 mg/ml (Diflucan)	1						atazanavir sulfate cap 150 mg (base equiv)	1		•			
fluconazole tab 50 mg, 100 mg, 150 mg, 200 mg (Diflucan)	1						atazanavir sulfate cap 200 mg (base equiv), 300 mg (base equiv) (Reyataz)	1		•			
flucytosine cap 250 mg, 500 mg (Ancobon)	1						BARACLUDE - entecavir oral soln 0.05 mg/ml	2					
griseofulvin microsize susp 125 mg/5ml	1						BIKTARVY - bicitegravir-emtricitabine-tenofovir af tab 30-120-15 mg, 50-200-25 mg	2		•			
griseofulvin microsize tab 500 mg	1						CIMDUO - lamivudine-tenofovir disoproxil fumarate tab 300-300 mg	2		•			
griseofulvin ultramicrosize tab 125 mg, 250 mg	1						darunavir tab 600 mg, 800 mg (Prezista)	1		•			
itraconazole cap 100 mg (Sporanox)	1	•	•				DELSTRIGO - doravirine-lamivudine-tenofovir df tab 100-300-300 mg	2		•			
itraconazole oral soln 10 mg/ml (Sporanox)	1	•	•				DESCOVY - emtricitabine-tenofovir alafenamide fumarate tab 120-15 mg	2		•			
ketoconazole tab 200 mg	1						DESCOVY - emtricitabine-tenofovir alafenamide fumarate tab 200-25 mg	2		•		•	
nystatin tab 500000 unit	1						DOVATO - dolutegravir sodium-lamivudine tab 50-300 mg (base eq)	2		•			
posaconazole susp 40 mg/ml (Noxafil)	1	•	•				EDURANT PED - rilpivirine hcl tab for oral susp 2.5 mg (base equivalent)	3		•			
posaconazole tab delayed release 100 mg (Noxafil)	1	•	•				efavirenz tab 600 mg (Sustiva)	1		•			
terbinafine hcl tab 250 mg	1		•				efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg (Atripla)	1		•			
voriconazole for susp 40 mg/ml (Vfend)	1	•					efavirenz-lamivudine-tenofovir df tab 600-300-300 mg (Symfi)	1		•			
voriconazole tab 50 mg, 200 mg (Vfend)	1	•					EFAVIRENZ/LAMIVUDINE/TENO - efavirenz-lamivudine-tenofovir df tab 400-300-300 mg	3		•			
ANTIVIRALS													
abacavir sulfate soln 20 mg/ml (base equiv) (Ziagen)	1		•										
abacavir sulfate tab 300 mg (base equiv) (Ziagen)	1		•										
abacavir sulfate-lamivudine tab 600-300 mg (Epzicom)	1		•										
acyclovir cap 200 mg	1												
acyclovir susp 200 mg/5ml (Zovirax)	1												
acyclovir tab 400 mg, 800 mg	1												

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
emtricitabine caps 200 mg (Emtriva)	1		•				ISENTRESS - raltegravir potassium packet for susp 100 mg (base equiv)	2		•			
emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg (Complera)	1	•	•				ISENTRESS - raltegravir potassium tab 400 mg (base equiv)	2		•			
emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg, 133-200 mg, 167-250 mg (Truvada)	1		•				JULUCA - dolutegravir sodium-rilpivirine hcl tab 50-25 mg (base eq)	2		•			
emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg (Truvada)	1		•		•		lamivudine oral soln 10 mg/ml (Epivir)	1		•			
EMTRIVA - emtricitabine soln 10 mg/ml	2		•				lamivudine tab 100 mg (hbv) (Epivir hbv)	1					
entecavir tab 0.5 mg, 1 mg (Baraclude)	1						lamivudine tab 150 mg, 300 mg (Epivir)	1		•			
EPCLUSA - sofosbuvir-velpatasvir pellet pack 150-37.5 mg, 200-50 mg	2	•	•	•		•	lamivudine-zidovudine tab 150-300 mg (Combivir)	1		•			
EPCLUSA - sofosbuvir-velpatasvir tab 200-50 mg	2	•	•	•		•	LEDIPASVIR/SOFOSBUVIR - ledipasvir-sofosbuvir tab 90-400 mg	3	•	•	•		•
etravirine tab 100 mg, 200 mg (Intelence)	1		•				LIVTENCITY - maribavir tab 200 mg	3	•	•	•		•
EVOTAZ - atazanavir sulfate-cobicistat tab 300-150 mg (base equiv)	3		•				lopinavir-ritonavir tab 100-25 mg, 200-50 mg (Kaletra)	1		•			
famciclovir tab 125 mg, 250 mg, 500 mg	1						maraviroc tab 150 mg, 300 mg (Selzentry)	1		•			
fosamprenavir calcium tab 700 mg (base equiv) (Lexiva)	1		•				MAVYRET - glecaprevir-pibrentasvir pellet pack 50-20 mg	2	•	•	•		•
GENVOYA - elvitegrav-cobic-emtricitab-tenofov af tab 150-150-200-10 mg	2		•				MAVYRET - glecaprevir-pibrentasvir tab 100-40 mg	2	•	•	•		•
HARVONI - ledipasvir-sofosbuvir pellet pack 33.75-150 mg, 45-200 mg	2	•	•	•		•	NEVIRAPINE - nevirapine susp 50 mg/5ml	3		•			
HARVONI - ledipasvir-sofosbuvir tab 45-200 mg	2	•	•	•		•	nevirapine tab er 24hr 400 mg	1		•			
ISENTRESS - raltegravir potassium chew tab 25 mg (base equiv), 100 mg (base equiv)	2		•				nevirapine tab 200 mg	1		•			
							ODEFSEY - emtricitabine-rilpivirine-tenofovir af tab 200-25-25 mg	2		•			
							oseltamivir phosphate cap 30 mg (base equiv), 45 mg (base equiv), 75 mg (base equiv) (Tamiflu)	1		•			
							oseltamivir phosphate for susp 6 mg/ml (base equiv) (Tamiflu)	1		•			

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
PAXLOVID - nirmatrelvir tab 6 x 150 mg & ritonavir tab 5 x 100 mg pak	2		•				SUNLENCA - lenacapavir sodium tab therapy pack 5 x 300 mg	3	•	•	•		•
PAXLOVID - nirmatrelvir tab 10 x 150 mg & ritonavir tab 10 x 100 mg pak	2		•				SUNLENCA - lenacapavir sodium tab 300 mg	3	•	•	•		•
PAXLOVID - nirmatrelvir tab 20 x 150 mg & ritonavir tab 10 x 100 mg pak	2		•				SYMTUZA - darunavir-cobic-emtricitab-tenofovir af tab 800-150-200-10 mg	2		•			
PEGASYS - peginterferon alfa-2a inj 180 mcg/ml	2	•	•	•		•	tenofovir disoproxil fumarate tab 300 mg (Viread)	1		•			
PEGASYS - peginterferon alfa-2a soln prefilled syr 180 mcg/0.5ml	2	•	•	•		•	TIVICAY - dolutegravir sodium tab 50 mg (base equiv)	2		•			
PREVYMIS - letermovir pellet pack 20 mg, 120 mg	3		•				TIVICAY PD - dolutegravir sodium tab for oral susp 5 mg (base equiv)	2		•			
PREVYMIS - letermovir tab 240 mg, 480 mg	3		•				TRIUMEQ PD - abacavir-dolutegravir-lamivudine tab for oral sus 60-5-30 mg	2		•			
PREZCOBIX - darunavir-cobicistat tab 675-150 mg, 800-150 mg	2		•				valacyclovir hcl tab 500 mg, 1 gm (Valtrex)	1					
PREZISTA - darunavir oral susp 100 mg/ml	2		•				valganciclovir hcl for soln 50 mg/ml (base equiv) (Valcyte)	1					
RELENZA DISKHALER - zanamivir aerosol powder breath activated 5 mg/act	3		•				valganciclovir hcl tab 450 mg (base equivalent) (Valcyte)	1					
RIBAVIRIN - ribavirin cap 200 mg	2		•	•		•	VEMLIDY - tenofovir alafenamide fumarate tab 25 mg	2					
RIBAVIRIN - ribavirin tab 200 mg	2		•	•		•	VIRACEPT - nelfinavir mesylate tab 250 mg, 625 mg	3		•			
rilpivirine hcl tab 25 mg (base equivalent) (Edurant)	1						VIREAD - tenofovir disoproxil fumarate oral powder 40 mg/gm	2		•			
ritonavir tab 100 mg (Norvir)	1		•				VIREAD - tenofovir disoproxil fumarate tab 150 mg, 200 mg, 250 mg	2		•			
RUKOBIA - fostemsavir tromethamine tab er 12hr 600 mg	3		•				VOSEVI - sofosbuvir-velpatasvir-voxilaprevir tab 400-100-100 mg	2	•	•	•		•
SOFOSBUVIR/VELPATASVIR - sofosbuvir-velpatasvir tab 400-100 mg	3	•	•	•		•	XOFLUZA - baloxavir marboxil tab therapy pack 1 x 40 mg (40 mg dose), 1 x 80 mg (80 mg dose)	3		•			
SOVALDI - sofosbuvir pellet pack 150 mg, 200 mg	2	•	•	•		•	zidovudine cap 100 mg (Retrovir)	1		•			
SOVALDI - sofosbuvir tab 200 mg, 400 mg	2	•	•	•		•	zidovudine syrup 10 mg/ml (Retrovir)	1		•			
STRIBILD - elvitegravir-cobic-emtricitab-tenofovir df tab 150-150-200-300 mg	2		•				zidovudine tab 300 mg	1		•			

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
ANTIMALARIALS							CAYSTON - aztreonam lysine for inhal soln 75 mg (base equivalent)	2	•	•	•		•
ARAKODA - tafenoquine succinate tab 100 mg (base equivalent)	3		•				clindamycin hcl cap 75 mg, 150 mg, 300 mg (Cleocin)	1					
atovaquone-proguanil hcl tab 62.5-25 mg, 250-100 mg (Malarone)	1						clindamycin palmitate hcl for soln 75 mg/5ml (base equiv) (Cleocin pediatric gr)	1					
CHLOROQUINE PHOSPHATE - chloroquine phosphate tab 250 mg	3						dapsone tab 25 mg, 100 mg	1					
chloroquine phosphate tab 500 mg	1						fosfomycin tromethamine powd pack 3 gm (base equivalent) (Monurol)	1					
COARTEM - artemether-lumefantrine tab 20-120 mg	2						IMPAVIDO - miltefosine cap 50 mg	2					
HYDROXYCHLOROQUINE SULFAT - hydroxychloroquine sulfate tab 100 mg, 400 mg	1		•				LAMPIT - nifurtimox tab 30 mg, 120 mg	3		•			•
HYDROXYCHLOROQUINE SULFAT - hydroxychloroquine sulfate tab 300 mg	1	•	•				linezolid tab 600 mg (Zyvox)	1					
hydroxychloroquine sulfate tab 200 mg (Plaquenil)	1		•				methenamine hippurate tab 1 gm (Hiprex)	1					
KRINTAFEL - tafenoquine succinate tab 150 mg (base equivalent)	2		•				metronidazole cap 375 mg (Flagyl)	1	•				
mefloquine hcl tab 250 mg	1						metronidazole tab 250 mg, 500 mg	1					
primaquine phosphate tab 26.3 mg (15 mg base) (Primaquine phosphate)	1						nitazoxanide tab 500 mg	1		•			
pyrimethamine tab 25 mg (Daraprim)	1			•		•	nitrofurantoin macrocrystalline cap 25 mg, 50 mg, 100 mg (Macrochantin)	1					
quinine sulfate cap 324 mg (Qualaquin)	1						nitrofurantoin monohydrate macrocrystalline cap 100 mg (Macrobid)	1					
ANTHELMINTICS							pentamidine isethionate for nebulization soln 300 mg (Nebupent)	1					
albendazole tab 200 mg	1		•				SIVEXTRO - tedizolid phosphate tab 200 mg	3		•			
BENZNIDAZOLE - benznidazole tab 12.5 mg, 100 mg	2		•			•	sulfamethoxazole-trimethoprim susp 200-40 mg/5ml	1					
ivermectin tab 3 mg (Stromectol)	1						sulfamethoxazole-trimethoprim tab 400-80 mg (Bactrim)	1					
praziquantel tab 600 mg (Biltricide)	1						sulfamethoxazole-trimethoprim tab 800-160 mg (Bactrim ds)	1					
ANTI-INFECTIVE AGENTS - MISC.							tinidazole tab 250 mg, 500 mg	1	•	•			
atovaquone susp 750 mg/5ml (Mepron)	1		•				TRIMETHOPRIM - trimethoprim tab 100 mg	3	•				

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
trimethoprim tab 100 mg	1						ENGERIX-B - hepatitis b vaccine (recombinant) susp pref syr 10 mcg/0.5ml, 20 mcg/ml	2					
vancomycin hcl cap 125 mg (base equivalent), 250 mg (base equivalent) (Vancocin)	1						ENGERIX-B - hepatitis b vaccine (recombinant) susp 20 mcg/ml	2					
vancomycin hcl for oral soln 25 mg/ml (base equivalent) (Firvanq)	1		•				ERVEBO - ebola zaire virus vaccine live im susp	3					
vancomycin hcl for oral soln 50 mg/ml (base equivalent) (Vancomycin hydrochlo)	1		•				FLUAD 2026-2027 - influenza vac type a&b surface ant adj susp pref syr 0.5 ml	2					
XIFAXAN - rifaximin tab 200 mg	3	•	•				FLUARIX 2026-2027 - influenza virus vaccine split pf susp pref syringe 0.5 ml	2					
XIFAXAN - rifaximin tab 550 mg	2	•	•				FLUBLOK 2026-2027 - influenza virus vacc recombinant ha pf soln pref syr 0.5 ml	2					
BIOLOGICALS							FLUCELVAX 2026-2027 - influenza virus vac tiss-cult subunit susp pref syr 0.5 ml	2					
VACCINES							FLULAVAL 2026-2027 - influenza virus vaccine split pf susp pref syringe 0.5 ml	2					
ABRYSVO - rsv pre-fusion f a&b vac recomb for im soln 120 mcg/0.5ml	2						FLUMIST NASAL VACCINE 202 - influenza virus vaccine live intranasal liquid	2					
ACAM2000 - smallpox & monkeypox vac, live, rep for percutaneous inj	3						FLUZONE HIGH-DOSE 2026-20 - influenza virus vac split high-dose pf susp pref syr 0.5ml	2					
ACTHIB - haemophilus b polysaccharide conjugate vaccine for inj	2						FLUZONE 2026-2027 - influenza virus vaccine split im susp	2					
AREXVY - rsvpref3 vaccine recomb adjuvanted for im susp 120 mcg/0.5ml	2						FLUZONE 2026-2027 - influenza virus vaccine split pf susp pref syringe 0.5 ml	2					
BCG VACCINE - bcg vaccine for inj soln 50 mg	3						GARDASIL 9 - human papillomavirus (hvp) 9-valent recomb vac im susp	2					
BEXSERO - meningococcal vac b (recomb omv adjuv) inj prefilled syringe	2						GARDASIL 9 - human papillomavirus (hvp) 9-valent recomb vac susp pref syr	2					
CAPVAXIVE - pneumococcal 21-valent conjugate vaccine soln pref syr 0.5ml	3						HAVRIX - hepatitis a vaccine susp prefilled syr 720 el unit/0.5ml, 1440 el unit/ml	2					
COMIRNATY 2026-27 - covid-19 mrna vac tris-pfizer im susp pref syr 30 mcg/0.3ml	2												
COMIRNATY/5-11Y/2026-27 - covid-19 mrna vac tris-s 5-11y-pfizer im susp 10 mcg/0.3ml	2												
DENGIVAXIA - dengue virus vaccine live tetravalent for subcutaneous susp	3												

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
HEPLISAV-B - hepatitis b vaccine recomb adjuvanted pref syr 20 mcg/0.5ml	2						PENMENVY - meningococcal acwy (oligo conj)-mening b (rcmb) vacc for inj	2					
HIBERIX - haemophilus b polysaccharide conjugate vac for inj 10 mcg	2						PNEUMOVAX 23 - pneumococcal vaccine polyvalent soln pref syr 25 mcg/0.5ml	2					
IMOVAX RABIES (H.D.C.V.) - rabies virus vaccine, hdc for inj susp	2						PREVNAR 20 - pneumococcal 20-valent conjugate vaccine sus pref syr 0.5 ml	2					
IPOV INACTIVATED IPV - poliovirus vaccine, ipv inj susp	2						PRIORIX - measles-mumps-rubella virus vaccines for subcutaneous susp	2					
IXIARO - japanese encephalitis vaccine inactivated adsorbed inj	3						PROQUAD - measles-mumps-rubella-varicella virus vaccines for susp	2					
JYNNEOS - smallpox & monkeypox vac, live, non-replicating inj 0.5 ml	3						RABAVER - rabies vaccine, pcec for inj	2					
M-M-R II - measles-mumps-rubella virus vaccines for inj soln	2						RECOMBIVAX HB - hepatitis b vaccine (recombinant) susp pref syr 5 mcg/0.5ml, 10 mcg/ml	2					
MENQUADFI - meningococcal (a, c, y, and w-135) tetanus conjugate vaccine	2						RECOMBIVAX HB - hepatitis b vaccine (recombinant) susp 5 mcg/0.5ml, 10 mcg/ml, 40 mcg/ml	2					
MENVEO - meningococcal (a, c, y, and w-135) oligo conj vac for inj	2						ROTARIX - rotavirus vaccine, live oral susp	2					
MENVEO - meningococcal (a, c, y, and w-135) oligo conj vac im soln	2						ROTATEQ - rotavirus vaccine, live oral pentavalent soln	2					
MFLUSIVA 2026-27 - influenza virus vac type a&b mrna susp pref syr 0.38 ml	3						SHINGRIX - zoster vac recomb adjuvanted im susp pref syr 50 mcg/0.5ml	2					
MNEXSPIKE COVID-19 VACCIN - covid-19 mrna vaccine-moderna im susp pref syr 10 mcg/0.2ml	2						SPIKEVAX COVID-19 VACCINE - covid-19 mrna vac 6mo-11yr-moderna im susp pfs 25 mcg/0.25ml	2					
MRESVIA - rsv mrna pre-f vaccine im susp pref syr 50 mcg/0.5ml	3						SPIKEVAX COVID-19 VACCINE - covid-19 mrna vaccine-moderna im susp pref syr 50 mcg/0.5ml	2					
NUVAXOVID COVID-19 VACCIN - covid-19 subunit vacc-novavax im susp pref syr 5 mcg/0.5ml	2						TICOVAC - tick-borne encephalit vac inact susp pref syr 1.2 mcg/0.25ml, 2.4 mcg/0.5ml	3					
PEDVAXHIB - haemophilus b polysaccharide conj vac im susp 7.5 mcg/0.5 ml	2						TRUMENBA - meningococcal group b vac (recomb) im susp prefilled syr	2					
PENBRAYA - meningococcal acyw (tet conj)-mening b (rcmb) vacc for inj	3												

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
TWINRIX - hep a-hep b vaccine susp pref syr 720-20 elu-mcg/ml	2						TENIVAC - tetanus-diphtheria toxoids (td) inj 5-2 lf/0.5ml	2					
TYPHIM VI - typhoid vi polysaccharide vacc im soln pref syr 25 mcg/0.5ml	3						VAXELIS - diph-tet tox-ac pert ad-polio ipv-hib-hep b rec susp pre syr	2					
VAQTA - hepatitis a vaccine inj susp 25 unit/0.5ml, 50 unit/ml	2						BIOLOGICALS MISC						
VAQTA - hepatitis a vaccine susp prefilled syr 25 unit/0.5ml, 50 unit/ml	2						GRASTEK - timothy grass pollen allergen ext sl tab 2800 bau	3	•	•			
VARIVAX - varicella virus vac live for inj 1350 pfu/0.5ml	2						ODACTRA - dust mite mixed ext sl tab 12 sq-hdm	3	•	•			
VAXCHORA - cholera vaccine live attenuated for oral susp	3						RAGWITEK - short ragweed pollen allergen extract sl tab 12 amb a 1-u	3	•	•			
VAXNEUVANCE - pneumococcal 15-valent conjugate vaccine sus pref syr 0.5 ml	2						ANTINEOPLASTIC AGENTS						
VIVOTIF - typhoid vaccine cap delayed release	3						ANTINEOPLASTICS						
TOXOIDS							abiraterone acetate tab 250 mg, 500 mg (Zytiga)	1	•	•	•		•
ADACEL - tet tox-diph-acell pertuss ad inj 5-2-15.5 lf-lf-mcg/0.5ml	2						ACTIMMUNE - interferon gamma-1b inj 100 mcg/0.5ml (2000000 unit/0.5ml)	2	•	•	•		•
ADACEL - tet-diph-acell pertuss ad pref syr 5-2-15.5 lf-mcg/0.5ml	2						ALECENSA - alectinib hcl cap 150 mg (base equivalent)	2	•	•	•		•
BOOSTRIX - tet-diph-acell pertuss ad pref syr 5-2.5-18.5 lf-mcg/0.5ml	2						ALUNBRIG - brigatinib tab initiation therapy pack 90 mg & 180 mg	2	•	•	•		•
DAPTACEL - diph, acellular pert & tet tox inj 15 lf-23 mcg-5 lf/0.5ml	2						ALUNBRIG - brigatinib tab 30 mg, 90 mg, 180 mg	2	•	•	•		•
INFANRIX - diph, acellular pert & tet tox inj 25 lf-58 mcg-10 lf/0.5ml	2						anastrozole tab 1 mg (Arimidex)	1	•	•		•	
KINRIX - diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml	2						AUGTYRO - repotrectinib cap 40 mg, 160 mg	2	•	•	•		•
PEDIARIX - diph-tet tox-acell pert-hep b-polio ipv vac susp pref syr	2						AYVAKIT - avapritinib tab 25 mg, 50 mg, 100 mg, 200 mg, 300 mg	2	•	•	•		•
PENTACEL - diph-ac per-tet tox ad-poliov-haemoph b poly vac for im susp	2						BALVERSA - erdafitinib tab 3 mg, 4 mg, 5 mg	3	•	•	•		•
QUADRACEL - diph-tetanus tox ad-acell pert & polio virus, ipv vac inj	2						BESREMI - ropeginterferon alfa-2b-njft soln prefilled syr 500 mcg/ml	3	•	•	•		•
QUADRACEL - diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml	2						BESREMI PEN - ropeginterferon alfa-2b-njft soln pen inj 500 mcg/0.5ml	3	•	•	•		•
							bexarotene cap 75 mg (Targretin)	1	•		•		•
							bicalutamide tab 50 mg (Casodex)	1					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
bosutinib tab 100 mg, 400 mg, 500 mg (Bosulif)	1	•	•	•		•	ERLEADA - apalutamide tab 60 mg, 240 mg	2	•	•	•		•
BRAFTOVI - encorafenib cap 75 mg	2	•	•	•		•	erlotinib hcl tab 25 mg (base equivalent), 100 mg (base equivalent), 150 mg (base equivalent) (Tarceva)	1	•	•	•		•
BRUKINSA - zanubrutinib cap 80 mg	2	•	•	•		•	ETOPOSIDE - etoposide cap 50 mg	3	•		•		•
BRUKINSA - zanubrutinib tab 160 mg	2	•	•	•		•	everolimus tab for oral susp 2 mg, 3 mg, 5 mg (Afinitor disperz)	1	•	•	•		•
CABOMETYX - cabozantinib s-malate tab 20 mg (base equivalent), 40 mg (base equivalent), 60 mg (base equivalent)	2	•	•	•		•	everolimus tab 2.5 mg, 5 mg, 7.5 mg, 10 mg (Afinitor)	1	•	•	•		•
CALQUENCE - acalabrutinib maleate tab 100 mg	2	•	•	•		•	exemestane tab 25 mg (Aromasin)	1	•	•			
capecitabine tab 150 mg, 500 mg (Xeloda)	1	•	•	•		•	FOTIVDA - tivozanib hcl cap 0.89 mg (base equivalent), 1.34 mg (base equivalent)	2	•	•	•		•
CAPRELSA - vandetanib tab 100 mg, 300 mg	2	•	•	•		•	GAVRETO - pralsetinib cap 100 mg	2	•	•	•		•
COMETRIQ - cabozantinib s-mal cap 1 x 80 mg & 1 x 20 mg (100 dose) kit	2	•	•	•		•	gefitinib tab 250 mg (Iressa)	1	•	•	•		•
COMETRIQ - cabozantinib s-mal cap 1 x 80 mg & 3 x 20 mg (140 dose) kit	2	•	•	•		•	GILOTTRIF - afatinib dimaleate tab 20 mg (base equivalent), 30 mg (base equivalent), 40 mg (base equivalent)	2	•	•	•		•
COMETRIQ - cabozantinib s-malate cap 3 x 20 mg (60 mg dose) kit	2	•	•	•		•	GOMEKLI - mirdametinib cap 1 mg, 2 mg	3	•	•	•		•
COPIKTRA - duvelisib cap 15 mg, 25 mg	2	•	•	•		•	GOMEKLI - mirdametinib tab for oral susp 1 mg	3	•	•	•		•
COTELLIC - cobimetinib fumarate tab 20 mg (base equivalent)	2	•	•	•		•	HYCANTIN - topotecan hcl cap 0.25 mg (base equiv), 1 mg (base equiv)	2	•		•		•
CYCLOPHOSPHAMIDE - cyclophosphamide tab 50 mg	3						hydroxyurea cap 500 mg (Hydrea)	1					
cyclophosphamide cap 25 mg, 50 mg (Cyclophosphamide)	1						IBRANCE - palbociclib cap 125 mg	2	•	•	•		•
dasatinib tab 20 mg, 50 mg, 70 mg, 80 mg, 100 mg, 140 mg (Sprycel)	1	•	•	•		•	IBRANCE - palbociclib tab 75 mg, 100 mg, 125 mg	2	•	•	•		•
DAURISMO - glasdegib maleate tab 25 mg (base equivalent), 100 mg (base equivalent)	2	•	•	•		•	ICLUSIG - ponatinib hcl tab 10 mg (base equiv), 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv)	2	•	•	•		•
ERIVEDGE - vismodegib cap 150 mg	2	•	•	•		•	IDHIFA - enasidenib mesylate tab 50 mg (base equivalent), 100 mg (base equivalent)	2	•	•	•		•

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
imatinib mesylate tab 100 mg (base equivalent), 400 mg (base equivalent) (Gleevec)	1		•	•		•	LENVIMA 10 MG DAILY DOSE - lenvatinib cap therapy pack 10 mg (10 mg daily dose)	2	•	•	•		•
IMBRUVICA - ibrutinib cap 70 mg, 140 mg	2	•	•	•		•	LENVIMA 12MG DAILY DOSE - lenvatinib cap therapy pack 3 x 4 mg (12 mg daily dose)	2	•	•	•		•
IMBRUVICA - ibrutinib oral susp 70 mg/ml	2	•	•	•		•	LENVIMA 14 MG DAILY DOSE - lenvatinib cap therapy pack 10 & 4 mg (14 mg daily dose)	2	•	•	•		•
IMBRUVICA - ibrutinib tab 140 mg, 280 mg, 420 mg	2	•	•	•		•	LENVIMA 18 MG DAILY DOSE - lenvatinib cap ther pack 10 mg & 2 x 4 mg (18 mg daily dose)	2	•	•	•		•
INLYTA - axitinib tab 1 mg, 5 mg	2	•	•	•		•	LENVIMA 20 MG DAILY DOSE - lenvatinib cap therapy pack 2 x 10 mg (20 mg daily dose)	2	•	•	•		•
INQOVI - decitabine-cedazuridine tab 35-100 mg	3	•	•	•		•	LENVIMA 24 MG DAILY DOSE - lenvatinib cap ther pack 2 x 10 mg & 4 mg (24 mg daily dose)	2	•	•	•		•
INREBIC - fedratinib hcl cap 100 mg	2	•	•	•		•	LENVIMA 4 MG DAILY DOSE - lenvatinib cap therapy pack 4 mg (4 mg daily dose)	2	•	•	•		•
ITOVEBI - inavolisib tab 3 mg, 9 mg	2	•	•	•		•	LENVIMA 8 MG DAILY DOSE - lenvatinib cap therapy pack 2 x 4 mg (8 mg daily dose)	2	•	•	•		•
IWILFIN - eflornithine hcl tab 192 mg	3	•	•	•		•	letrozole tab 2.5 mg (Femara)	1	•	•			
JAKAFI - ruxolitinib phosphate tab 5 mg (base equivalent), 10 mg (base equivalent), 15 mg (base equivalent), 20 mg (base equivalent), 25 mg (base equivalent)	2	•	•	•		•	leucovorin calcium tab 5 mg, 10 mg, 15 mg, 25 mg	1	•	•			
JAKAFI XR - ruxolitinib phosphate tab er 24hr 11 mg (base equivalent), 22 mg (base equivalent), 33 mg (base equivalent), 44 mg (base equivalent), 55 mg (base equivalent)	2	•	•	•		•	LEUKERAN - chlorambucil tab 2 mg	2					
JAYPIRCA - pirtobrutinib tab 50 mg, 100 mg	3	•	•	•		•	leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)	1	•	•	•		•
KISQALI - ribociclib succinate tab pack 200 mg daily dose, 400 mg daily dose (200 mg tab), 600 mg daily dose (200 mg tab)	2	•	•	•		•	lomustine cap 10 mg, 40 mg, 100 mg (Gleostine)	1					
KOMZIFTI - ziftomenib cap 200 mg	3	•	•	•		•	LONSURF - trifluridine-tipiracil tab 15-6.14 mg, 20-8.19 mg	2	•	•	•		•
KOSELUGO - selumetinib sulfate cap 10 mg, 25 mg	3	•	•	•		•	LORBRENA - lorlatinib tab 25 mg, 100 mg	2	•	•	•		•
KRAZATI - adagrasib tab 200 mg	2	•	•	•		•	LUMAKRAS - sotorasib tab 120 mg, 320 mg	2	•	•	•		•
lapatinib ditosylate tab 250 mg (base equiv) (Tykerb)	1	•	•	•		•	LUMAKRAS - sotorasib tab 240 mg	2		•	•		•
LAZCLUZE - lazertinib mesylate tab 80 mg, 240 mg	3	•	•	•		•	LYNPARZA - olaparib tab 100 mg, 150 mg	2	•	•	•		•
							LYSODREN - mitotane tab 500 mg	2	•		•		•

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
LYTGOBI - futibatinib tab therapy pack 4 mg (12 mg daily dose), 4 mg (16 mg daily dose), 4 mg (20 mg daily dose)	3	•	•	•		•	(base equivalent), 4 mg (base equivalent)						
MATULANE - procarbazine hcl cap 50 mg	2	•		•		•	NUBEQA - darolutamide tab 300 mg	2	•	•	•		•
megestrol acetate susp 40 mg/ml	1						ODOMZO - sonidegib phosphate cap 200 mg (base equivalent)	2	•	•	•		•
megestrol acetate tab 20 mg, 40 mg	1						OGSIVEO - nirogacestat hydrobromide tab 100 mg, 150 mg	3	•	•	•		•
MEKINIST - trametinib dimethyl sulfoxide for soln 0.05 mg/ml (base eq)	2	•	•	•		•	ONUREG - azacitidine tab 200 mg, 300 mg	3	•	•	•		•
MEKINIST - trametinib dimethyl sulfoxide tab 0.5 mg (base equivalent), 2 mg (base equivalent)	2	•	•	•		•	ORGOVYX - relugolix tab 120 mg	2	•	•	•		•
MEKTOVI - binimetinib tab 15 mg	2	•	•	•		•	ORSERDU - elacestrant hydrochloride tab 86 mg, 345 mg	3	•	•	•		•
mercaptopurine susp 2000 mg/100ml (20 mg/ml) (Purixan)	1						pazopanib hcl tab 200 mg (base equiv) (Votrient)	1	•	•	•		•
mercaptopurine tab 50 mg	1						PEMAZYRE - pemigatinib tab 4.5 mg, 9 mg, 13.5 mg	3	•	•	•		•
mesna tab 400 mg (Mesnex)	1						pomalidomide cap 1 mg, 2 mg, 3 mg, 4 mg (Pomalyst)	1	•	•	•		•
METHOTREXATE SODIUM - methotrexate sodium inj 250 mg/10ml (25 mg/ml)	3						QINLOCK - ripretinib tab 50 mg	2	•	•	•		•
methotrexate sodium inj pf 50 mg/2ml (25 mg/ml), 250 mg/10ml (25 mg/ml), 1000 mg/40ml (25 mg/ml)	1						RETEVMO - selpercatinib tab 40 mg, 80 mg, 120 mg, 160 mg	2	•	•	•		•
methotrexate sodium tab 2.5 mg (base equiv)	1						REVUFORJ - revumenib citrate tab 25 mg, 110 mg, 160 mg	3	•	•	•		•
MYLERAN - busulfan tab 2 mg	2						REZLIDHIA - olutasidenib cap 150 mg	2	•	•	•		•
NERLYNX - neratinib maleate tab 40 mg (base equivalent)	2	•	•	•		•	ROMVIMZA - vimseltinib cap 14 mg, 20 mg, 30 mg	2	•	•	•		•
NEXAVAR - sorafenib tosylate tab 200 mg (base equivalent)	3	•	•	•		•	ROZLYTREK - entrectinib cap 100 mg, 200 mg	2	•	•	•		•
nilotinib hcl cap 50 mg (base equivalent), 150 mg (base equivalent), 200 mg (base equivalent) (Tasigna)	1	•	•	•		•	RUBRACA - rucaparib camsylate tab 200 mg (base equivalent), 250 mg (base equivalent), 300 mg (base equivalent)	2	•	•	•		•
NINLARO - ixazomib citrate cap 2.3 mg (base equivalent), 3 mg	2	•	•	•		•	RYDAPT - midostaurin cap 25 mg	2	•	•	•		•
							SCEMBLIX - asciminib hcl tab 20 mg, 40 mg, 100 mg	3	•	•	•		•
							SOLTAMOX - tamoxifen citrate oral soln 10 mg/5ml (base equivalent)	3	•				
							sorafenib tosylate tab 200 mg (base equivalent) (Nexavar)	1	•	•	•		•
							STIVARGA - regorafenib tab 40 mg	2	•	•	•		•

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
sunitinib malate cap 12.5 mg (base equivalent), 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent) (Sutent)	1	•	•	•		•	TURALIO - pexidartinib hcl cap 125 mg (base equivalent)	2	•	•	•		•
TABLOID - thioguanine tab 40 mg	2	•					VENCLEXTA - venetoclax tab 10 mg, 50 mg, 100 mg	2	•	•	•		•
TABRECTA - capmatinib hcl tab 150 mg, 200 mg	2	•	•	•		•	VENCLEXTA STARTING PACK - venetoclax tab therapy starter pack 10 & 50 & 100 mg	2	•	•	•		•
TAFINLAR - dabrafenib mesylate cap 50 mg (base equivalent), 75 mg (base equivalent)	2	•	•	•		•	VERZENIO - abemaciclib tab 50 mg, 100 mg, 150 mg, 200 mg	2	•	•	•		•
TAFINLAR - dabrafenib mesylate tab for oral susp 10 mg (base equiv)	2	•	•	•		•	VITRAKVI - larotrectinib sulfate cap 25 mg (base equivalent), 100 mg (base equivalent)	3	•	•	•		•
TAGRISSO - osimertinib mesylate tab 40 mg (base equivalent), 80 mg (base equivalent)	2	•	•	•		•	VITRAKVI - larotrectinib sulfate oral soln 20 mg/ml (base equivalent)	3	•	•	•		•
TALZENNA - talazoparib tosylate cap 0.1 mg (base equivalent), 0.25 mg (base equivalent), 0.35 mg (base equivalent), 0.5 mg (base equivalent), 0.75 mg (base equivalent), 1 mg (base equivalent)	2	•	•	•		•	VONJO - pacritinib citrate cap 100 mg	3	•	•	•		•
tamoxifen citrate tab 10 mg (base equivalent), 20 mg (base equivalent)	1				•		VORANIGO - vorasidenib tab 10 mg, 40 mg	2	•	•	•		•
temozolomide cap 5 mg, 20 mg	1	•	•	•		•	WELIREG - belzutifan tab 40 mg	2	•	•	•		•
temozolomide cap 100 mg, 140 mg, 180 mg, 250 mg (Temodar)	1	•	•	•		•	XOSPATA - gilteritinib fumarate tablet 40 mg (base equivalent)	2	•	•	•		•
TEPMETKO - tepotinib hcl tab 225 mg	2	•	•	•		•	XPOVIO - selinexor tab therapy pack 10 mg (40 mg once weekly), 40 mg (40 mg twice weekly), 40 mg (80 mg once weekly), 50 mg (100 mg once weekly), 60 mg (60 mg once weekly), 80 mg (80 mg once weekly)	2	•	•	•		•
TIBSOVO - ivosidenib tab 250 mg	2	•	•	•		•	XPOVIO 60 MG TWICE WEEKLY - selinexor tab therapy pack 20 mg (60 mg twice weekly)	2	•	•	•		•
toremifene citrate tab 60 mg (base equivalent) (Fareston)	1						XPOVIO 80 MG TWICE WEEKLY - selinexor tab therapy pack 20 mg (80 mg twice weekly)	2	•	•	•		•
tretinoin cap 10 mg	1	•					XTANDI - enzalutamide cap 40 mg	2	•	•	•		•
TRUQAP - capivasertib tab therapy pack 160 mg, 200 mg	2	•	•	•		•	XTANDI - enzalutamide tab 40 mg, 80 mg	2	•	•	•		•
TRUQAP - capivasertib tab 200 mg	2	•	•	•		•	YONSA - abiraterone acetate micronized tab 125 mg	3	•	•	•		•
TUKYSA - tucatinib tab 50 mg, 150 mg	2	•	•	•		•	ZEJULA - niraparib tosylate tab 100 mg (base equivalent), 200 mg	2	•	•	•		•

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
(base equivalent), 300 mg (base equivalent)							prednisone tab therapy pack 5 mg (21), 5 mg (48), 10 mg (21), 10 mg (48)	1					
ZELBORAF - vemurafenib tab 240 mg	2	•	•	•		•	prednisone tab 1 mg, 2.5 mg, 5 mg, 10 mg, 20 mg, 50 mg	1					
ZOLINZA - vorinostat cap 100 mg	2	•	•	•		•	ANDROGEN-ANABOLIC						
ZYDELIG - idelalisib tab 100 mg, 150 mg	2	•	•	•		•	danazol cap 50 mg, 100 mg, 200 mg	1	•				
ZYKADIA - ceritinib tab 150 mg	2	•	•	•		•	METHITEST - methyltestosterone oral tab 10 mg	3	•	•			
ENDOCRINE AND METABOLIC DRUGS							TESTOSTERONE - testosterone td gel 20.25 mg/1.25gm (1.62%)	1	•	•			
CORTICOSTEROIDS							testosterone cypionate im inj in oil 100 mg/ml, 200 mg/ml (Depo-testosterone)	1	•	•			
budesonide delayed release particles cap 3 mg	1						TESTOSTERONE ENANTHATE - testosterone enanthate im inj in oil 200 mg/ml	3	•	•			
DEXAMETHASONE - dexamethasone soln 0.5 mg/5ml	1						testosterone td gel 25 mg/2.5gm (1%), 50 mg/5gm (1%) (Androgel)	1	•	•			
dexamethasone elixir 0.5 mg/5ml	1						testosterone td gel 12.5 mg/act (1%), 40.5 mg/2.5gm (1.62%)	1	•	•			
DEXAMETHASONE INTENSOL - dexamethasone conc 1 mg/ml	1						testosterone td gel 20.25 mg/act (1.62%) (Androgel pump)	1	•	•			
dexamethasone tab 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg	1						testosterone td soln 30 mg/act	1	•	•			
fludrocortisone acetate tab 0.1 mg	1						ESTROGENS						
hydrocortisone tab 5 mg, 10 mg, 20 mg (Cortef)	1						ALORA - estradiol td patch twice weekly 0.025 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr	3	•	•			
MEDROL - methylprednisolone tab 2 mg	3						ANGELIQ - drospirenone-estradiol tab 0.25-0.5 mg, 0.5-1 mg	3					
methylprednisolone tab therapy pack 4 mg (21) (Medrol dosepak)	1						CLIMARA PRO - estradiol-levonorgestrel td patch weekly 0.045-0.015 mg/day	2		•			
methylprednisolone tab 4 mg, 8 mg, 16 mg, 32 mg (Medrol)	1						COMBIPATCH - estradiol-norethindrone ace td pttw 0.05-0.14 mg/day, 0.05-0.25 mg/day	3		•			
prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)	1						DELESTROGEN - estradiol valerate im in oil 10 mg/ml	3	•				
prednisolone sod phosphate oral soln 5 mg/5ml (base equiv) (Pediapred)	1						DEPO-ESTRADIOL - estradiol cypionate im in oil 5 mg/ml	3					
prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)	1												
prednisolone soln 15 mg/5ml	1												
PREDNISONE - prednisone oral soln 5 mg/5ml	1	•	•										

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
DUAVEE - conjugated estrogens-bazedoxifene tab 0.45-20 mg	3						norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg, 1 mg-5 mcg	1					
ELESTRIN - estradiol gel 0.06% (0.52 mg/0.87 gm metered-dose pump)	3		•				ORIAHNN - elagolix-estradiol-noreth 300-1-0.5mg & elagolix 300mg cap pack	2	•	•			
estradiol & norethindrone acetate tab 0.5-0.1 mg	1						PREMPHASE - conj est 0.625(14)/conj est-medroxypro ac tab 0.625-5mg(14)	2					
estradiol & norethindrone acetate tab 1-0.5 mg (Activella)	1						PREMPRO - conjugated estrogen-medroxyprogesterone acetate tab 0.3-1.5 mg, 0.45-1.5 mg, 0.625-2.5 mg, 0.625-5 mg	2					
estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose pump) (EstroGel)	1		•				CONTRACEPTIVES						
estradiol tab 0.5 mg, 1 mg, 2 mg (Estrace)	1						ANNOVERA - sequesterone acetate-ethinyl estradiol va ring 0.15-0.013 mg/24hr	3					
estradiol td gel 0.25 mg/0.25gm (0.1%), 0.5 mg/0.5gm (0.1%), 0.75 mg/0.75gm (0.1%), 1 mg/gm (0.1%), 1.25 mg/1.25gm (0.1%) (Divigel)	1		•				ARANELLE - norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg	1	•			•	
estradiol td patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr (Vivelle-dot)	1		•				DEPO-SUBQ PROVERA 104 - medroxyprogesterone acetate susp pref syr 104 mg/0.65ml	A				•	
estradiol td patch weekly 0.025 mg/24hr, 0.0375 mg/24hr (37.5 mcg/24hr), 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr (Climara)	1		•				desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5) (Mircette)	1				•	
estradiol valerate im in oil 10 mg/ml, 20 mg/ml, 40 mg/ml (Delestrogen)	1						desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1				•	
estrogens, conjugated tab 0.3 mg, 0.45 mg, 0.625 mg, 0.9 mg, 1.25 mg (Premarin)	1						drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg (Beyaz)	1				•	
EVAMIST - estradiol transdermal spray 1.53 mg/spray	3		•				drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg (Safyral)	1				•	
MENOSTAR - estradiol td patch weekly 14 mcg/24hr	3		•				drospirenone-ethinyl estradiol tab 3-0.02 mg (Yaz)	1				•	
MYFEMBREE - relugolix-estradiol-norethindrone acetate tab 40-1-0.5 mg	3	•	•				drospirenone-ethinyl estradiol tab 3-0.03 mg (Yasmin 28)	1				•	
							ELLA - ulipristal acetate tab 30 mg	A				•	
							ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg	1				•	

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr (Nuvaring)	A				•		norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg (Generess fe)	1				•	
levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg (Quartette)	A				•		norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg	1				•	
levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7) (Loseasonique)	A				•		norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg, 1.5 mg-30 mcg	1				•	
levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7) (Seasonique)	A				•		norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg, 1.5 mg-30 mcg	1				•	
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	A				•		norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24) (Minastrin 24 fe)	1				•	
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg, 0.15 mg-30 mcg	1				•		norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)	1				•	
levonorgestrel tab 1.5 mg	A				•		norethindrone tab 0.35 mg	1				•	
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg	1				•		norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg	1				•	
levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg	A				•		norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	1				•	
LO LOESTRIN FE - norethin-eth estradiol-fe tab 1 mg-10 mcg (24)/10 mcg (2)	2				•		norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg, 0.18-35/0.215-35/0.25-35 mg-mcg	1				•	
medroxyprogesterone acetate im susp prefilled syr 150 mg/ml (Depo-provera contrac)	A				•		norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg	1				•	
medroxyprogesterone acetate im susp 150 mg/ml (Depo-provera contrac)	A				•		OPILL - norgestrel tab 0.075 mg	3				•	
NATAZIA - estradiol valerate-dienogest tab 3 mg /2-2 mg/2-3 mg/1 mg	3				•		TYBLUME - levonorgestrel & ethinyl estradiol chew tab 0.1 mg-20 mcg	3				•	
norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr	A				•		VALTYA 1/50 - ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg	1				•	
norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg, 0.5 mg-35 mcg, 1 mg-35 mcg	1				•		VELIVET - desogest-ethin est tab 0.1-0.025/0.125-0.025/0.15-0.025mg	1				•	
norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg	1				•		PROGESTINS						
							medroxyprogesterone acetate tab 2.5 mg, 5 mg, 10 mg (Provera)	1					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
norethindrone acetate tab 5 mg (Aygestin)	1						auto-injector 0.5 mg/0.1ml, 1 mg/0.2ml						
progesterone cap 100 mg, 200 mg (Prometrium)	1						GVOKE HYPOPEN 2-PACK - glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml, 1 mg/0.2ml	2		•			
progesterone im in oil 50 mg/ml	1						GVOKE KIT - glucagon subcutaneous soln 1 mg/0.2ml	2		•			
ANTIDIABETICS							GVOKE PFS - glucagon subcutaneous soln pref syringe 1 mg/0.2ml	2		•			
acarbose tab 25 mg, 50 mg, 100 mg (Precose)	1		•				JARDIANCE - empagliflozin tab 10 mg, 25 mg	2	•	•			
BAQSIMI ONE PACK - glucagon nasal powder 3 mg/dose	2		•				metformin hcl tab er 24hr 500 mg, 750 mg	1		•			
BAQSIMI TWO PACK - glucagon nasal powder 3 mg/dose	2		•				metformin hcl tab 500 mg, 850 mg, 1000 mg	1		•			
dapagliflozin free base-metformin hcl tab er 24hr 5-500 mg, 5-1000 mg, 10-500 mg, 10-1000 mg (Xigduo xr)	1	•	•				metformin hcl tab 625 mg	1	•	•			
dapagliflozin tab 5 mg, 10 mg (Farxiga)	1		•				mifepristone tab 300 mg (Korlym)	1	•	•	•		•
diazoxide susp 50 mg/ml (Proglycem)	1						MOUNJARO - tirzepatide soln auto-injector 2.5 mg/0.5ml, 5 mg/0.5ml, 7.5 mg/0.5ml, 10 mg/0.5ml, 12.5 mg/0.5ml, 15 mg/0.5ml	2	•	•			
glimepiride tab 1 mg, 2 mg, 4 mg (Amaryl)	1		•				nateglinide tab 60 mg, 120 mg	1		•			
glipizide tab er 24hr 2.5 mg, 5 mg, 10 mg (Glucotrol xl)	1		•				OZEMPIC - semaglutide soln pen-inj 0.25 or 0.5 mg/dose (2 mg/3ml), 1 mg/dose (4 mg/3ml), 2 mg/dose (8 mg/3ml)	2	•	•			
glipizide tab 5 mg, 10 mg	1		•				OZEMPIC - semaglutide tab 1.5 mg, 4 mg, 9 mg	2		•			
glipizide-metformin hcl tab 2.5-250 mg, 2.5-500 mg, 5-500 mg	1		•				pioglitazone hcl tab 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv) (Actos)	1		•			
GLUCAGON EMERGENCY KIT FO - glucagon hcl for inj 1 mg	3						pioglitazone hcl-metformin hcl tab 15-500 mg, 15-850 mg (Actoplus met)	1		•			
glucagon for inj 1 mg	1						repaglinide tab 0.5 mg, 1 mg, 2 mg	1		•			
glyburide tab 1.25 mg, 2.5 mg, 5 mg	1		•				RYBELSUS - semaglutide tab 3 mg, 7 mg, 14 mg	2	•	•			
glyburide-metformin tab 1.25-250 mg, 2.5-500 mg, 5-500 mg	1		•				sitagliptin phosphate tab 25 mg (base equiv), 50 mg (base equiv)	1					
GLYXAMBI - empagliflozin-linagliptin tab 10-5 mg, 25-5 mg	2	•	•										
GVOKE HYPOPEN 1-PACK - glucagon subcutaneous solution	2		•										

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
equiv), 100 mg (base equiv) (Januvia)							FIASP PUMPCART - insulin aspart (with niacinamide) soln cartridge 100 unit/ml	2		•			
sitagliptin phosphate-metformin hcl tab er 24hr 50-500 mg, 50-1000 mg, 100-1000 mg (Janumet xr)	1		•				HUMALOG - insulin lispro inj soln 100 unit/ml	2		•			
sitagliptin phosphate-metformin hcl tab 50-500 mg, 50-1000 mg (Janumet)	1		•				HUMALOG - insulin lispro soln cartridge 100 unit/ml	2	•	•			
SOLIQUA 100/33 - insulin glargine- lixisenatide sol pen-inj 100-33 unit-mcg/ml	2	•	•				HUMALOG JUNIOR KWIKPEN - insulin lispro soln pen-injector 100 unit/ml (0.5 unit dial)	2		•			
SYNJARDY - empagliflozin- metformin hcl tab 5-500 mg, 5-1000 mg, 12.5-500 mg, 12.5-1000 mg	2	•	•				HUMALOG KWIKPEN - insulin lispro soln pen-injector 100 unit/ml (1 unit dial), 200 unit/ml	2		•			
SYNJARDY XR - empagliflozin- metformin hcl tab er 24hr 5-1000 mg, 10-1000 mg, 12.5-1000 mg, 25-1000 mg	2	•	•				LYUMJEV - insulin lispro-aabc inj 100 unit/ml	2		•			
TRIARDY XR - empagliflozin- linagliptin-metformin tab er 24hr 12.5-2.5-1000mg	2	•	•				LYUMJEV KWIKPEN - insulin lispro- aabc soln pen-injector 200 unit/ml	2		•			
TRIARDY XR - empagliflozin- linagliptin-metformin tab er 24hr 5-2.5-1000mg, 10-5-1000 mg, 25-5-1000 mg	2	•	•				LYUMJEV KWIKPEN - insulin lispro- aabc soln pen-inj 100 unit/ml (1 unit dial)	2		•			
TRULICITY - dulaglutide soln auto-injector 0.75 mg/0.5ml, 1.5 mg/0.5ml, 3 mg/0.5ml, 4.5 mg/0.5ml	2	•	•				NOVOLOG - insulin aspart inj soln 100 unit/ml	2		•			
XULTOPHY 100/3.6 - insulin degludec-liraglutide sol pen-inj 100-3.6 unit-mg/ml	2	•	•				NOVOLOG FLEXPEN - insulin aspart soln pen-injector 100 unit/ ml	2		•			
Rapid-Acting Insulins							NOVOLOG FLEXPEN RELION - insulin aspart soln pen-injector 100 unit/ml	2		•			
FIASP - insulin aspart (with niacinamide) inj 100 unit/ml	2		•				NOVOLOG PENFILL - insulin aspart soln cartridge 100 unit/ml	2		•			
FIASP FLEXTOUCH - insulin aspart (with niacinamide) sol pen-inj 100 unit/ml	2		•				NOVOLOG RELION - insulin aspart inj soln 100 unit/ml	2		•			
FIASP PENFILL - insulin aspart (with niacinamide) soln cartridge 100 unit/ml	2		•				Short-Acting Insulins						
							HUMULIN R - insulin regular (human) inj 100 unit/ml	2		•			
							HUMULIN R U-500 KWIKPEN - insulin regular (human) soln pen- injector 500 unit/ml	2		•			
							NOVOLIN R - insulin regular (human) inj 100 unit/ml	2		•			

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
NOVOLIN R FLEXPEN - insulin regular (human) soln pen-injector 100 unit/ml	2		•				NOVOLIN 70/30 FLEXPEN - insulin nph & regular susp pen-inj 100 unit/ml (70-30)	2		•			
NOVOLIN R FLEXPEN RELION - insulin regular (human) soln pen-injector 100 unit/ml	2		•				NOVOLIN 70/30 FLEXPEN REL - insulin nph & regular susp pen-inj 100 unit/ml (70-30)	2		•			
NOVOLIN R RELION - insulin regular (human) inj 100 unit/ml	2		•				NOVOLIN 70/30 RELION - insulin nph isophane & regular human inj 100 unit/ml (70-30)	2		•			
Intermediate-Acting Insulins							NOVOLOG MIX 70/30 - insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)	2		•			
HUMALOG MIX 50/50 KWIKPEN - insulin lispro prot & lispro sus pen-inj 100 unit/ml (50-50)	2	•	•				NOVOLOG MIX 70/30 PREFILL - insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)	2		•			
HUMALOG MIX 75/25 - insulin lispro prot & lispro inj 100 unit/ml (75-25)	2	•	•				NOVOLOG MIX 70/30 RELION - insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)	2		•			
HUMALOG MIX 75/25 KWIKPEN - insulin lispro prot & lispro sus pen-inj 100 unit/ml (75-25)	2	•	•				Basal Insulins						
HUMULIN N - insulin nph (human) (isophane) inj 100 unit/ml	2		•				INSULIN GLARGINE-YFGN - insulin glargine-yfgn inj 100 unit/ml	2		•			
HUMULIN N KWIKPEN - insulin nph (human) (isophane) susp pen-injector 100 unit/ml	2		•				INSULIN GLARGINE-YFGN - insulin glargine-yfgn soln pen-injector 100 unit/ml	2		•			
HUMULIN 70/30 - insulin nph isophane & regular human inj 100 unit/ml (70-30)	2		•				SEMGLEE - insulin glargine-yfgn inj 100 unit/ml	2		•			
HUMULIN 70/30 KWIKPEN - insulin nph & regular susp pen-inj 100 unit/ml (70-30)	2		•				SEMGLEE - insulin glargine-yfgn soln pen-injector 100 unit/ml	2		•			
NOVOLIN N - insulin nph (human) (isophane) inj 100 unit/ml	2		•				TOUJEO MAX SOLOSTAR - insulin glargine soln pen-injector 300 unit/ml (2 unit dial)	2		•			
NOVOLIN N FLEXPEN - insulin nph (human) (isophane) susp pen-injector 100 unit/ml	2		•				TOUJEO SOLOSTAR - insulin glargine soln pen-injector 300 unit/ml (1 unit dial)	2		•			
NOVOLIN N FLEXPEN RELION - insulin nph (human) (isophane) susp pen-injector 100 unit/ml	2		•				TRESIBA - insulin degludec inj 100 unit/ml	2		•			
NOVOLIN N RELION - insulin nph (human) (isophane) inj 100 unit/ml	2		•				TRESIBA FLEXTOUCH - insulin degludec soln pen-injector 100 unit/ml, 200 unit/ml	2		•			
NOVOLIN 70/30 - insulin nph isophane & regular human inj 100 unit/ml (70-30)	2		•				THYROID AGENTS						
							ARMOUR THYROID - thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain),	3					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
60 mg (1 grain), 90 mg (1 1/2 grain), 120 mg (2 grain)							alendronate sodium tab 70 mg (Fosamax)	1		•			
ARMOUR THYROID - thyroid tab 180 mg (3 grain), 240 mg (4 grain), 300 mg (5 grain)	2						betaine powder for oral solution (Cystadane)	1			•		•
levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg (Synthroid)	1						cabergoline tab 0.5 mg	1					
liothyronine sodium tab 5 mcg, 25 mcg, 50 mcg (Cytomel)	1						calcitonin (salmon) inj 200 unit/ml (Miacalcin)	1	•				
methimazole tab 5 mg, 10 mg	1						calcitonin (salmon) nasal soln 200 unit/act	1					
propylthiouracil tab 50 mg	1						calcitriol cap 0.25 mcg, 0.5 mcg (Rocaltrol)	1					
SYNTHROID - levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg	3						carglumic acid soluble tab 200 mg (Carbaglu)	1	•		•		•
THYQUIDITY - levothyroxine sodium oral solution 100 mcg/5ml	3	•					cetrorelix acetate for inj kit 0.25 mg (Cetrotide)	1	•	•	•		•
TIROSINT - levothyroxine sodium cap 13 mcg, 25 mcg, 37.5 mcg, 44 mcg, 50 mcg, 62.5 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg	3	•	•				cinacalcet hcl tab 30 mg (base equiv), 60 mg (base equiv), 90 mg (base equiv) (Sensipar)	1	•				
TIROSINT-SOL - levothyroxine sodium oral solution 13 mcg/ml, 25 mcg/ml, 37.5 mcg/ml, 44 mcg/ml, 50 mcg/ml, 62.5 mcg/ml, 75 mcg/ml, 88 mcg/ml, 100 mcg/ml, 112 mcg/ml, 125 mcg/ml, 137 mcg/ml, 150 mcg/ml, 175 mcg/ml, 200 mcg/ml	3	•					clomiphene citrate tab 50 mg	1		•	•		•
OXYTOCICS							desmopressin acetate inj 4 mcg/ml (Ddvp)	1					
methylergonovine maleate tab 0.2 mg	1						desmopressin acetate nasal spray soln 0.01% (refrigerated)	1					
ENDOCRINE and METABOLIC AGENTS - MISC.							desmopressin acetate preservative free (pf) inj 4 mcg/ml (Ddvp)	1					
ACTHAR - corticotropin inj gel 80 unit/ml	3	•				•	desmopressin acetate tab 0.1 mg, 0.2 mg (Ddvp)	1					
alendronate sodium tab 10 mg, 35 mg	1		•				FOLLISTIM AQ - follitropin beta inj 300 unit/0.36ml, 600 unit/0.72ml, 900 unit/1.08ml	2	•	•	•		•
							GALAFOLD - migalastat hcl cap 123 mg (base equivalent)	2	•	•	•		•
							ganirelix acetate soln prefilled syringe 250 mcg/0.5ml (Ganirelix acetate)	1	•	•	•		•
							GENOTROPIN - somatropin for subcutaneous inj cartridge 5 mg, 12 mg (36 unit)	2	•		•		•
							GENOTROPIN MINIQUEL - somatropin for subcutaneous inj prefilled syr 0.2 mg, 0.4 mg, 0.6	2	•		•		•

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
mg, 0.8 mg, 1 mg, 1.2 mg, 1.4 mg, 1.6 mg, 1.8 mg, 2 mg							ORLISSA - elagolix sodium tab 150 mg (base equiv), 200 mg (base equiv)	2	•	•			
ibandronate sodium tab 150 mg (base equivalent) (Boniva)	1		•				OVIDREL - choriogonadotropin alfa soln prefilled syr 250 mcg/0.5ml	2	•	•	•		•
IMCIVREE - setmelanotide acetate subcutaneous soln 10 mg/ml	3	•	•	•		•	PALYNZIQ - pegvaliase-pqpz subcutaneous soln pref syringe 2.5 mg/0.5ml, 10 mg/0.5ml, 20 mg/ml	3	•	•	•		•
INCRELEX - mecasermin inj 40 mg/4ml (10 mg/ml)	3	•		•		•	PHEBURANE - sodium phenylbutyrate oral pellets 483 mg/gm	3	•	•	•		•
ISTURISA - osilodrostat phosphate tab 1 mg, 5 mg	3	•	•	•		•	PREGNYL - chorionic gonadotropin for im inj 10000 unit	2	•	•	•		•
levocarnitine oral soln 1 gm/10ml (10%) (Carnitor)	1						raloxifene hcl tab 60 mg (Evista)	1					
levocarnitine tab 330 mg (Carnitor)	1						REVCovi - elapegedemase-lvr im soln 2.4 mg/1.5ml (1.6 mg/ml)	3	•		•		•
MENOPUR - menotropins for subcutaneous inj 75 unit	2	•	•	•		•	risedronate sodium tab 30 mg	1		•			
MIFEPREX - mifepristone tab 200 mg	3	•					risedronate sodium tab 35 mg, 150 mg (Actonel)	1		•			
mifepristone tab 200 mg (Mifeprex)	1						SAMSCA - tolvaptan (hyponatremia) tab 15 mg	3	•	•	•		•
MYALEPT - metreleptin for subcutaneous inj 11.3 mg	3	•	•	•		•	sapropterin dihydrochloride powder packet 100 mg, 500 mg (Kuvan)	1	•	•	•		•
MYCAPSSA - octreotide acetate cap delayed release 20 mg	3	•	•	•		•	sapropterin dihydrochloride tab 100 mg (Kuvan)	1	•	•	•		•
nitisinone cap 2 mg, 5 mg, 10 mg, 20 mg (Orfadin)	1	•		•		•	SIGNIFOR - pasireotide diaspertate inj 0.3 mg/ml (base equiv), 0.6 mg/ml (base equiv), 0.9 mg/ml (base equiv)	3	•	•	•		•
NORDITROPIN FLEXPOR - somatropin solution pen-injector 5 mg/1.5ml, 10 mg/1.5ml, 15 mg/1.5ml	2	•		•		•	SKYTROFA - lonapegsomatropin-tcgd for subcutaneous inj cartridge 0.7 mg, 1.4 mg, 1.8 mg, 2.1 mg, 2.5 mg, 3 mg, 3.6 mg, 4.3 mg, 5.2 mg, 6.3 mg, 7.6 mg, 9.1 mg, 11 mg	3	•		•		•
OCTREOTIDE ACETATE - octreotide acetate subcutaneous soln pref syr 50 mcg/ml, 100 mcg/ml, 500 mcg/ml	3	•	•	•		•	SKYTROFA - lonapegsomatropin-tcgd for subcutaneous inj cart 13.3 mg	3	•		•		•
octreotide acetate inj 50 mcg/ml (0.05 mg/ml), 100 mcg/ml (0.1 mg/ml), 500 mcg/ml (0.5 mg/ml) (Sandostatin)	1	•	•	•		•	sodium phenylbutyrate oral powder 3 gm/teaspoonful (Buphenyl)	1	•	•	•		•
octreotide acetate inj 200 mcg/ml (0.2 mg/ml), 1000 mcg/ml (1 mg/ml)	1	•	•	•		•							

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
sodium phenylbutyrate tab 500 mg (Buphenyl)	1	•	•	•		•	isosorbide dinitrate tab 5 mg (Isordil titradose)	1					
SOMAVERT - pegvisomant for inj 10 mg (as protein), 15 mg (as protein), 20 mg (as protein), 25 mg (as protein), 30 mg (as protein)	2	•	•	•		•	isosorbide dinitrate tab 10 mg, 20 mg, 30 mg	1					
STRENSIQ - asfotase alfa subcutaneous inj 18 mg/0.45ml, 28 mg/0.7ml, 40 mg/ml, 80 mg/0.8ml	2	•	•	•		•	isosorbide mononitrate tab er 24hr 30 mg, 60 mg, 120 mg	1					
SYNAREL - nafarelin acetate nasal soln 2 mg/ml (200 mcg/act) (base eq)	2						NITRO-DUR - nitroglycerin td patch 24hr 0.3 mg/hr, 0.8 mg/hr	3					
teriparatide soln pen-inj 560 mcg/2.24ml (Forteo)	1	•	•	•		•	nitroglycerin oint 2%	1					
tolvaptan (hyponatremia) tab 15 mg, 30 mg (Samsca)	1	•	•	•		•	nitroglycerin sl tab 0.3 mg, 0.4 mg, 0.6 mg (Nitrostat)	1					
tolvaptan tab therapy pack 15 mg, 30 & 15 mg, 45 & 15 mg, 60 & 30 mg, 90 & 30 mg (Jynarque)	1	•		•		•	nitroglycerin td patch 24hr 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr (Nitro-dur)	1					
tolvaptan tab 15 mg, 30 mg (Jynarque)	1	•	•	•		•	nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray) (Nitrolingual pumpspr)	1					
TYMLOS - abaloparatide subcutaneous soln pen-injector 3120 mcg/1.56ml	2	•	•	•		•	ranolazine tab er 12hr 500 mg, 1000 mg (Ranexa)	1		•			
VOXZOGO - vosoritide for subcutaneous inj 0.4 mg, 0.56 mg, 1.2 mg	3	•	•	•		•	BETA BLOCKERS						
CARDIOVASCULAR AGENTS							acebutolol hcl cap 200 mg, 400 mg	1					
CARDIOTONICS							atenolol tab 25 mg, 50 mg, 100 mg (Tenormin)	1					
digoxin oral soln 0.05 mg/ml (Digoxin)	1						betaxolol hcl tab 10 mg, 20 mg	1					
digoxin tab 62.5 mcg (0.0625 mg) (Lanoxin)	1	•					bisoprolol fumarate tab 5 mg, 10 mg	1					
digoxin tab 125 mcg (0.125 mg), 250 mcg (0.25 mg) (Lanoxin)	1						carvedilol tab 3.125 mg, 6.25 mg, 12.5 mg, 25 mg (Coreg)	1					
LANOXIN - digoxin tab 62.5 mcg (0.0625 mg)	3	•					labetalol hcl tab 100 mg, 200 mg, 300 mg	1					
LANOXIN - digoxin tab 125 mcg (0.125 mg), 250 mcg (0.25 mg)	3						metoprolol succinate tab er 24hr 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv) (Toprol xl)	1					
ANTIANGINAL AGENTS							metoprolol tartrate tab 25 mg, 37.5 mg, 75 mg	1					
							metoprolol tartrate tab 50 mg, 100 mg (Lopressor)	1					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
nadolol tab 20 mg, 40 mg, 80 mg (Corgard)	1						diltiazem hcl tab 30 mg, 60 mg, 120 mg (Cardizem)	1					
nebivolol hcl tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent), 20 mg (base equivalent) (Bystolic)	1		•				diltiazem hcl tab 90 mg	1					
pindolol tab 5 mg, 10 mg	1						felodipine tab er 24hr 2.5 mg, 5 mg, 10 mg	1					
PROPRANOLOL HCL - propranolol hcl oral soln 40 mg/5ml	3	•					nifedipine cap 10 mg, 20 mg	1					
propranolol hcl cap er 24hr 60 mg, 80 mg, 120 mg, 160 mg (Inderal la)	1						nifedipine tab er 24hr 30 mg, 60 mg, 90 mg	1					
propranolol hcl tab 10 mg, 20 mg, 40 mg, 60 mg, 80 mg	1						nifedipine tab er 24hr osmotic release 30 mg, 60 mg, 90 mg (Procardia xl)	1					
sotalol hcl (afib/af) tab 80 mg, 120 mg, 160 mg (Betapace af)	1						NIMODIPINE - nimodipine oral soln 60 mg/20ml (3 mg/ml)	3	•				
sotalol hcl tab 80 mg, 120 mg, 160 mg (Betapace)	1						nimodipine cap 30 mg	1					
sotalol hcl tab 240 mg	1						verapamil hcl tab er 120 mg, 180 mg, 240 mg (Calan sr)	1					
CALCIUM CHANNEL BLOCKERS							verapamil hcl tab 40 mg, 80 mg, 120 mg	1					
amlodipine besylate tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent) (Norvasc)	1						ANTIARRHYTHMICS						
CARDIZEM LA - diltiazem hcl tab er 24hr 120 mg	3	•					amiodarone hcl tab 100 mg	1	•				
diltiazem hcl cap er 12hr 60 mg, 90 mg, 120 mg	1						amiodarone hcl tab 200 mg, 400 mg	1					
diltiazem hcl cap er 24hr 120 mg, 180 mg, 240 mg	1						disopyramide phosphate cap 100 mg, 150 mg (Norpace)	1					
diltiazem hcl coated beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg (Cardizem cd)	1						dofetilide cap 125 mcg (0.125 mg), 250 mcg (0.25 mg), 500 mcg (0.5 mg) (Tikosyn)	1					
diltiazem hcl extended release beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg (Tiazac)	1						flecainide acetate tab 50 mg, 100 mg, 150 mg	1					
diltiazem hcl tab er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg (Cardizem la)	1						mexiletine hcl cap 150 mg, 200 mg, 250 mg	1					
							MULTAQ - dronedarone hcl tab 400 mg (base equivalent)	2					
							NORPACE - disopyramide phosphate cap 100 mg, 150 mg	3					
							propafenone hcl cap er 12hr 225 mg, 325 mg, 425 mg (Rythmol sr)	1					
							propafenone hcl tab 150 mg, 225 mg, 300 mg	1					
							quinidine gluconate tab er 324 mg	1					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
ANTIHYPERTENSIVES							clonidine hcl tab 0.1 mg, 0.2 mg, 0.3 mg	1					
amlodipine besylate-benazepril hcl cap 2.5-10 mg, 5-40 mg	1						clonidine td patch weekly 0.1 mg/24hr (Catapres-tts-1)	1		•			
amlodipine besylate-benazepril hcl cap 5-10 mg, 5-20 mg, 10-20 mg, 10-40 mg (Lotrel)	1						clonidine td patch weekly 0.2 mg/24hr (Catapres-tts-2)	1		•			
amlodipine besylate-olmesartan medoxomil tab 5-20 mg, 5-40 mg, 10-20 mg, 10-40 mg (Azor)	1		•				clonidine td patch weekly 0.3 mg/24hr (Catapres-tts-3)	1		•			
amlodipine besylate-valsartan tab 5-160 mg, 5-320 mg, 10-160 mg, 10-320 mg (Exforge)	1		•				doxazosin mesylate tab 1 mg, 2 mg, 4 mg, 8 mg (Cardura)	1		•			
amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg, 5-160-25 mg, 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg	1		•				enalapril maleate & hydrochlorothiazide tab 5-12.5 mg	1					
atenolol & chlorthalidone tab 50-25 mg (Tenoretic 50)	1						enalapril maleate & hydrochlorothiazide tab 10-25 mg (Vaseretic)	1					
atenolol & chlorthalidone tab 100-25 mg (Tenoretic 100)	1						enalapril maleate tab 2.5 mg, 5 mg, 10 mg, 20 mg (Vasotec)	1					
benazepril & hydrochlorothiazide tab 5-6.25 mg	1						eplerenone tab 25 mg, 50 mg (Inspra)	1					
benazepril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg (Lotensin hct)	1						fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg	1					
benazepril hcl tab 5 mg	1						fosinopril sodium tab 10 mg, 20 mg, 40 mg	1					
benazepril hcl tab 10 mg, 20 mg, 40 mg (Lotensin)	1						guanfacine hcl tab 1 mg, 2 mg	1					
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg, 5-6.25 mg, 10-6.25 mg (Ziac)	1						hydralazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg	1					
candesartan cilexetil tab 4 mg, 8 mg, 16 mg, 32 mg (Atacand)	1		•				irbesartan tab 75 mg, 150 mg, 300 mg (Avapro)	1		•			
candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg, 32-12.5 mg, 32-25 mg (Atacand hct)	1		•				irbesartan-hydrochlorothiazide tab 150-12.5 mg, 300-12.5 mg (Avalide)	1		•			
captopril tab 12.5 mg, 25 mg, 50 mg, 100 mg	1						lisinopril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg (Zestoretic)	1					
							lisinopril tab 2.5 mg, 5 mg, 10 mg, 20 mg, 30 mg, 40 mg (Zestril)	1					
							losartan potassium & hydrochlorothiazide tab 50-12.5 mg, 100-12.5 mg, 100-25 mg (Hyzaar)	1		•			

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
losartan potassium tab 25 mg, 50 mg, 100 mg (Cozaar)	1		•				valsartan tab 40 mg, 80 mg, 160 mg, 320 mg (Diovan)	1		•			
METHYLDOPA - methyldopa tab 500 mg	3						valsartan-hydrochlorothiazide tab 80-12.5 mg, 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg (Diovan hct)	1		•			
methyldopa tab 250 mg	1						VECAMEYL - mecamlamine hcl tab 2.5 mg	3		•	•		•
metoprolol & hydrochlorothiazide tab 50-25 mg, 100-25 mg, 100-50 mg	1						DIURETICS						
minoxidil tab 2.5 mg, 10 mg	1						acetazolamide cap er 12hr 500 mg	1					
moexipril hcl tab 7.5 mg, 15 mg	1						acetazolamide tab 125 mg, 250 mg	1					
olmesartan medoxomil tab 5 mg, 20 mg, 40 mg (Benicar)	1		•				amiloride hcl tab 5 mg	1					
olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg, 40-12.5 mg, 40-25 mg (Benicar hct)	1		•				bumetanide tab 0.5 mg (Bumex)	1					
olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg, 40-5-12.5 mg, 40-5-25 mg, 40-10-12.5 mg, 40-10-25 mg (Tribenzor)	1		•				bumetanide tab 1 mg, 2 mg	1					
perindopril erbumine tab 4 mg	1						chlorthalidone tab 25 mg, 50 mg	1					
phenoxybenzamine hcl cap 10 mg (Dibenzyline)	1						dichlorphenamide tab 50 mg (Keveyis)	1	•	•	•		•
prazosin hcl cap 1 mg, 2 mg, 5 mg (Minipress)	1						FUROSEMIDE - furosemide oral soln 10 mg/ml	1					
quinapril hcl tab 5 mg, 10 mg, 20 mg, 40 mg (Accupril)	1						furosemide tab 20 mg, 40 mg, 80 mg (Lasix)	1					
ramipril cap 1.25 mg, 2.5 mg, 5 mg, 10 mg (Altace)	1						hydrochlorothiazide cap 12.5 mg	1					
telmisartan tab 20 mg, 40 mg, 80 mg (Micardis)	1		•				hydrochlorothiazide tab 12.5 mg, 25 mg, 50 mg	1					
telmisartan-hydrochlorothiazide tab 40-12.5 mg, 80-12.5 mg, 80-25 mg (Micardis hct)	1		•				indapamide tab 1.25 mg, 2.5 mg	1					
terazosin hcl cap 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)	1		•				methazolamide tab 25 mg, 50 mg	1					
trandolapril tab 1 mg, 2 mg, 4 mg	1						metolazone tab 2.5 mg, 5 mg, 10 mg	1					
							spironolactone & hydrochlorothiazide tab 25-25 mg (Aldactazide)	1					
							spironolactone tab 25 mg, 50 mg, 100 mg (Aldactone)	1					
							torsemide tab 5 mg, 10 mg, 20 mg, 100 mg	1					
							triamterene & hydrochlorothiazide cap 37.5-25 mg	1					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
triamterene & hydrochlorothiazide tab 37.5-25 mg (Maxzide-25)	1						colestipol hcl granule packets 5 gm (Colestid flavored)	1					
triamterene & hydrochlorothiazide tab 75-50 mg (Maxzide)	1						colestipol hcl granules 5 gm (Colestid flavored)	1					
triamterene cap 50 mg, 100 mg (Dyrenium)	1						colestipol hcl tab 1 gm (Colestid)	1					
VASOPRESSORS							ezetimibe tab 10 mg (Zetia)	1					
AUVI-Q - epinephrine solution auto-injector 0.1 mg/0.1ml, 0.15 mg/0.15ml (1:1000), 0.3 mg/0.3ml (1:1000)	2		•				ezetimibe-simvastatin tab 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg (Vytorin)	1					
EPINEPHRINE - epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000), 0.3 mg/0.3ml (1:1000)	3		•				fenofibrate micronized cap 67 mg, 134 mg, 200 mg	1		•			
epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000) (Epipen-jr 2-pak)	1		•				fenofibrate tab 48 mg, 145 mg (Tricor)	1					
epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000) (Epipen 2-pak)	1		•				fenofibrate tab 54 mg, 160 mg	1		•			
midodrine hcl tab 2.5 mg, 5 mg, 10 mg	1						gemfibrozil tab 600 mg (Lopid)	1					
ANTIHYPERLIPIDEMICS							icosapent ethyl cap 0.5 gm, 1 gm (Vascepa)	1	•	•			
atorvastatin calcium tab 10 mg (base equivalent), 20 mg (base equivalent), 40 mg (base equivalent), 80 mg (base equivalent) (Lipitor)	1		•				JUXTAPID - lomitapide mesylate cap 2 mg (base equiv), 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv), 30 mg (base equiv)	2	•	•	•		•
cholestyramine light powder packets 4 gm	1						lovastatin tab 10 mg	1		•			
cholestyramine light powder 4 gm/dose (Questran light)	1						lovastatin tab 20 mg, 40 mg	1		•		•	
cholestyramine powder packets 4 gm (Questran)	1						NEXLETOL - bempedoic acid tab 180 mg	3	•	•			
cholestyramine powder 4 gm/dose (Questran)	1						NEXLIZET - bempedoic acid-ezetimibe tab 180-10 mg	3	•	•			
colesevelam hcl tab 625 mg (Welchol)	1						niacin tab er 750 mg (antihyperlipidemic), 1000 mg (antihyperlipidemic) (Niaspan)	1					
							omega-3-acid ethyl esters cap 1 gm (Lovaza)	1		•			
							pravastatin sodium tab 10 mg, 20 mg, 40 mg, 80 mg	1		•		•	
							REPATHA SURECLICK - evolocumab subcutaneous soln auto-injector 140 mg/ml	2	•	•			
							rosuvastatin calcium tab 5 mg, 10 mg, 20 mg, 40 mg (Crestor)	1		•			
							simvastatin tab 5 mg	1					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
simvastatin tab 10 mg, 40 mg (Zocor)	1						UPTRAVI - selexipag tab 100 mcg, 150 mcg, 200 mcg, 400 mcg, 600 mcg, 800 mcg, 1000 mcg, 1200 mcg, 1400 mcg, 1600 mcg	3	•	•	•		•
simvastatin tab 20 mg (Zocor)	1		•				UPTRAVI TITRATION PACK - selexipag tab therapy pack 200 mcg (140) & 800 mcg (60)	3	•	•	•		•
simvastatin tab 80 mg	1		•				VERQUVO - vericiguat tab 2.5 mg, 5 mg, 10 mg	3	•	•			
CARDIOVASCULAR AGENTS - MISC.							VYNDAMAX - tafamidis cap 61 mg	3	•	•	•		•
ADEMPAS - riociguat tab 0.5 mg, 1 mg, 1.5 mg, 2 mg, 2.5 mg	3	•	•	•		•	RESPIRATORY AGENTS						
ambrisentan tab 5 mg, 10 mg (Letairis)	1	•	•	•		•	ANTI-HISTAMINES						
BIDIL - isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg	3	•					carbinoxamine maleate tab 4 mg	1					
bosentan tab for oral susp 32 mg (Tracleer)	1	•	•	•		•	CLEMASTINE FUMARATE - clemastine fumarate tab 2.68 mg	3	•	•			
bosentan tab 62.5 mg, 125 mg (Tracleer)	1	•	•	•		•	cypothepadine hcl syrup 2 mg/5ml	1					
CORLANOR - ivabradine hcl oral soln 5 mg/5ml (base equiv)	3		•			•	cypothepadine hcl tab 4 mg	1					
isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg (Bidil)	1						promethazine hcl oral soln 6.25 mg/5ml	1					
ivabradine hcl tab 5 mg (base equiv), 7.5 mg (base equiv) (Corlanor)	1	•	•				promethazine hcl suppos 12.5 mg, 25 mg	1					
macitentan tab 10 mg (Opsumit)	1	•	•	•		•	promethazine hcl tab 12.5 mg, 25 mg, 50 mg	1					
ORENITRAM - treprostinil diolamine tab er 0.125 mg (base equiv), 0.25 mg (base equiv), 1 mg (base equiv), 2.5 mg (base equiv), 5 mg (base equiv)	3	•	•	•		•	PROMETHEGAN - promethazine hcl suppos 50 mg	1					
ORENITRAM TITRATION KIT M - treprostinil tab er titr pk (mo1) 126 x0.125mg & 42 x0.25mg, titr pk (mo2) 126 x0.125mg & 210 x0.25mg, titr pk(mo3)126x0.125mg&42x0.25mg&	3	•	•	•		•	NASAL AGENTS - SYSTEMIC and TOPICAL						
sacubitril-valsartan tab 24-26 mg, 49-51 mg, 97-103 mg (Entresto)	1		•				azelastine hcl nasal spray 0.1% (137 mcg/spray)	1		•			
sildenafil citrate tab 20 mg (Revatio)	1	•	•	•		•	ipratropium bromide nasal soln 0.03% (21 mcg/spray), 0.06% (42 mcg/spray)	1		•			
tadalafil tab 20 mg (pah) (Adcirca)	1	•	•	•		•	COUGH/COLD/ALLERGY						
tadalafil tab 5 mg (Cialis)	1	•	•				acetylcysteine inhal soln 10%, 20%	1					
							benzonatate cap 100 mg, 200 mg	1					
							HYDROCODONE POLISTIREX/CH - hydrocod polst-chlorphen polst er susp 10-8 mg/5ml	1		•			
							NEBUSAL - sodium chloride soln nebu 3%	3					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
promethazine w/ codeine syrup 6.25-10 mg/5ml	1		•				110 mcg/act (breath activated), 220 mcg/act (breath activated)						
promethazine-dm syrup 6.25-15 mg/5ml	1						ASMANEX TWISTHALER 60 MET - mometasone furoate inhal powd 220 mcg/act (breath activated)	2		•			
pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml	1						BREO ELLIPTA - fluticasone furoate-vilanterol aero powd ba 50-25 mcg/act, 100-25 mcg/act, 200-25 mcg/act	2		•			
PULMOSAL - sodium chloride soln nebu 7%	3						BREZTRI AEROSPHERE - budesonide-glycopyrrolate-formoterol aers 160-9-4.8 mcg/act	2	•	•			
SODIUM CHLORIDE - sodium chloride soln nebu 3%, 7%	3						budesonide inhalation susp 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml (Pulmicort)	1		•			
ANTIASTHMATIC and BRONCHODILATOR AGENTS							budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act, 160-4.5 mcg/act (Symbicort)	1		•			
ADVAIR HFA - fluticasone-salmeterol inhal aerosol 45-21 mcg/act, 115-21 mcg/act, 230-21 mcg/act	2		•				COMBIVENT RESPIMAT - ipratropium-albuterol inhal aerosol soln 20-100 mcg/act	2		•			
albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv) (Proventil hfa)	1		•				cromolyn sodium soln nebu 20 mg/2ml	1		•			
albuterol sulfate soln nebu 0.083% (2.5 mg/3ml), 0.5% (5 mg/ml), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv)	1						DULERA - mometasone furoate-formoterol fumarate aerosol 50-5 mcg/act, 100-5 mcg/act, 200-5 mcg/act	2		•			
albuterol sulfate syrup 2 mg/5ml	1						FASENRA PEN - benralizumab subcutaneous soln auto-injector 30 mg/ml	2	•	•	•		•
albuterol sulfate tab 2 mg, 4 mg	1						FLUTICASONE FUROATE ELLIP - fluticasone furoate aerosol powder breath activ 50 mcg/act, 100 mcg/act, 200 mcg/act	2		•			
ANORO ELLIPTA - umeclidinium-vilanterol aero powd ba 62.5-25 mcg/act	2		•				FLUTICASONE PROPIONATE/SA - fluticasone-salmeterol aer powder ba 55-14 mcg/act, 113-14 mcg/act, 232-14 mcg/act	1	•	•			
arformoterol tartrate soln nebu 15 mcg/2ml (base equiv) (Brovana)	1		•				FLUTICASONE PROPIONATE/SA - fluticasone-salmeterol inhal aerosol 45-21 mcg/act, 115-21 mcg/act, 230-21 mcg/act	1		•			
ARNUITY ELLIPTA - fluticasone furoate aerosol powder breath activ 50 mcg/act, 100 mcg/act, 200 mcg/act	2		•				fluticasone-salmeterol aer powder ba 100-50 mcg/act, 250-50 mcg/	1		•			
ASMANEX HFA - mometasone furoate inhal aerosol suspension 50 mcg/act, 100 mcg/act, 200 mcg/act	2		•										
ASMANEX TWISTHALER 120 ME - mometasone furoate inhal powd 220 mcg/act (breath activated)	2		•										
ASMANEX TWISTHALER 30 MET - mometasone furoate inhal powd	2		•										

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
act, 500-50 mcg/act (Advair diskus)							STIOLTO RESPIMAT - tiotropium br-olodaterol inhal aero soln 2.5-2.5 mcg/act	2		•			
ipratropium bromide hfa inhal aerosol 17 mcg/act (Atrovent hfa)	1	•	•				STRIVERDI RESPIMAT - olodaterol hcl inhal aerosol soln 2.5 mcg/act (base equiv)	3		•			
ipratropium bromide inhal soln 0.02%	1		•				terbutaline sulfate tab 2.5 mg, 5 mg	1					
ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml	1						TEZSPIRE - tezepelumab-ekko subcutaneous soln auto-inj 210 mg/1.91ml	2	•	•	•		•
levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv) (Xopenex concentrate)	1						THEO-24 - theophylline cap er 24hr 100 mg, 200 mg, 300 mg, 400 mg	2					
levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv) (Xopenex)	1						theophylline elixir 80 mg/15ml	1					
LEVALBUTEROL TARTRATE HFA - levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)	3		•				theophylline soln 80 mg/15ml	1					
montelukast sodium chew tab 4 mg (base equiv), 5 mg (base equiv) (Singulair)	1		•				theophylline tab er 12hr 300 mg, 450 mg	1					
montelukast sodium tab 10 mg (base equiv) (Singulair)	1		•				theophylline tab er 24hr 400 mg, 600 mg	1					
NUCALA - mepolizumab subcutaneous solution auto-injector 100 mg/ml	2	•	•	•		•	tiotropium bromide inhal cap 18 mcg (base equiv) (Spiriva handihaler)	1		•			
NUCALA - mepolizumab subcutaneous solution pref syringe 40 mg/0.4ml, 100 mg/ml	2	•	•	•		•	TRELEGY ELLIPTA - fluticasone-umeclidinium-vilanterol aepb 100-62.5-25 mcg/act, 200-62.5-25 mcg/act	2		•			
QVAR REDHALER - beclomethasone diprop hfa breath act inh aer 40 mcg/act, 80 mcg/act	2		•				UMECLIDINIUM ELLIPTA - umeclidinium br aero powd breath act 62.5 mcg/act (base eq)	2		•			
roflumilast tab 250 mcg, 500 mcg (Daliresp)	1		•				XOLAIR - omalizumab subcutaneous soln auto-injector 75 mg/0.5ml, 150 mg/ml, 300 mg/2ml	2	•		•		•
SEREVENT DISKUS - salmeterol xinafoate aer pow ba 50 mcg/act (base equiv)	2		•				XOLAIR - omalizumab subcutaneous soln prefilled syringe 75 mg/0.5ml, 150 mg/ml, 300 mg/2ml	2	•		•		•
SPIRIVA RESPIMAT - tiotropium bromide inhal aerosol 1.25 mcg/act, 2.5 mcg/act	2		•				zafirlukast tab 10 mg, 20 mg (Accolate)	1		•			
							RESPIRATORY AGENTS - MISC.						
							KALYDECO - ivacaftor packet 5.8 mg, 13.4 mg, 25 mg, 50 mg, 75 mg	2	•	•	•		•
							KALYDECO - ivacaftor tab 150 mg	2	•	•	•		•

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
nintedanib esylate cap 100 mg (base equivalent), 150 mg (base equivalent) (Ofev)	1	•	•	•		•	PEG-PREP - bisacodyl tab & peg 3350-kcl-sod bicarb-nacl for soln kit	3					
ORKAMBI - lumacaftor-ivacaftor granules packet 75-94 mg, 100-125 mg, 150-188 mg	2	•	•	•		•	sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml (Suprep bowel prep ki)	1					
ORKAMBI - lumacaftor-ivacaftor tab 100-125 mg, 200-125 mg	2	•	•	•		•	SUTAB - sod sulfate-mg sulfate-pot chloride tab 1479-225-188 mg	3	•				
PIRFENIDONE - pirfenidone tab 534 mg	3	•	•	•		•	ANTIDIARRHEALS						
pirfenidone cap 267 mg (Esbriet)	1	•	•	•		•	diphenoxylate w/ atropine tab 2.5-0.025 mg (Lomotil)	1					
pirfenidone tab 267 mg, 801 mg (Esbriet)	1	•	•	•		•	ULCER DRUGS						
PULMOZYME - dornase alfa inhal soln 2.5 mg/2.5ml	2		•	•		•	dexlansoprazole cap delayed release 60 mg (Dexilant)	1		•			
SYMDEKO - tezacaftor-ivacaftor 50-75 mg & ivacaftor 75 mg tab tbpk	2	•	•	•		•	dicyclomine hcl cap 10 mg	1					
SYMDEKO - tezacaftor-ivacaftor 100-150 mg & ivacaftor 150 mg tab tbpk	2	•	•	•		•	dicyclomine hcl oral soln 10 mg/5ml	1					
TRIKAFTA - elexacaf-tezacaf-ivacaf 80-40-60 mg& ivacaf 59.5mg thpk gran	2	•	•	•		•	dicyclomine hcl tab 20 mg	1					
TRIKAFTA - elexacaf-tezacaf-ivacaf 100-50-75 mg& ivacaf 75mg thpk gran	2	•	•	•		•	esomeprazole magnesium cap delayed release 40 mg (base eq) (Nexium)	1		•			
TRIKAFTA - elexacaf-tezacaf-ivacaf 50-25-37.5 mg & ivacaftor 75 mg tbpk	2	•	•	•		•	esomeprazole magnesium for delayed release susp packet 5 mg, 10 mg, 20 mg, 40 mg (Nexium)	1		•			
TRIKAFTA - elexacaf-tezacaf-ivacaf 100-50-75 mg & ivacaftor 150 mg tbpk	2	•	•	•		•	esomeprazole magnesium for delayed release susp pack 2.5 mg (Nexium)	1		•			
							famotidine tab 40 mg (Pepcid)	1					
GASTROINTESTINAL AGENTS							glycopyrrolate oral soln 1 mg/5ml (Cuvposa)	1	•				
LAXATIVES							glycopyrrolate tab 1 mg (Robinul)	1					
lactulose solution 10 gm/15ml	1						glycopyrrolate tab 2 mg (Robinul forte)	1					
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm (Golytely)	1					•	lansoprazole cap delayed release 30 mg (Prevacid)	1		•			
peg 3350-kcl-sod bicarb-nacl for soln 420 gm (Nulytely)	1					•	methscopolamine bromide tab 2.5 mg, 5 mg	1					
							misoprostol tab 100 mcg, 200 mcg (Cytotec)	1					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
omeprazole cap delayed release 10 mg, 40 mg	1		•				ZENPEP - pancrelipase (lip-prot-amyl) dr cap 3000-10000-14000 unit, 5000-17000-24000 unit, 10000-32000-42000 unit, 15000-47000-63000 unit, 20000-63000-84000 unit, 25000-79000-105000 unit, 40000-126000-168000 unit, 60000-189600-252600 unit	2	•				
pantoprazole sodium ec tab 20 mg (base equiv), 40 mg (base equiv) (Protonix)	1		•										
rabeprazole sodium ec tab 20 mg (Aciphex)	1		•										
sucralfate tab 1 gm (Carafate)	1												
ANTIEMETICS							GASTROINTESTINAL AGENTS- MISC.						
aprepitant capsule therapy pack 80 & 125 mg (Emend tripack)	1		•				balsalazide disodium cap 750 mg (Colazal)	1		•			
aprepitant capsule 40 mg, 125 mg	1		•				BYLVAY - odeixibat cap 400 mcg, 1200 mcg	3	•		•		•
aprepitant capsule 80 mg (Emend)	1		•				BYLVAY (PELLETS) - odeixibat pellets cap sprinkle 200 mcg, 600 mcg	3	•		•		•
dronabinol cap 2.5 mg (Marinol)	1						calcium acetate (phosphate binder) cap 667 mg (169 mg ca)	1					
dronabinol cap 5 mg, 10 mg	1						calcium acetate (phosphate binder) tab 667 mg	1					
EMEND - aprepitant for oral susp 125 mg (125 mg/5ml)	2		•				CIMZIA (1 SYRINGE) - certolizumab pegol prefilled syringe kit 200 mg/ml	3	•		•		•
granisetron hcl tab 1 mg	1		•				CIMZIA (2 SYRINGE) - certolizumab pegol prefilled syringe kit 200 mg/ml	3	•	•	•		•
meclizine hcl tab 25 mg	1						CIMZIA STARTER KIT - certolizumab pegol prefilled syringe kit 200 mg/ml	3	•	•	•		•
ondansetron hcl oral soln 4 mg/5ml	1		•				cromolyn sodium oral conc 100 mg/5ml (Gastrocrom)	1					
ondansetron hcl tab 4 mg, 8 mg	1		•				ENTYVIO PEN - vedolizumab soln auto-injector 108 mg/0.68ml	3	•	•	•		•
ondansetron orally disintegrating tab 4 mg, 8 mg	1		•				ferric citrate tab 1 gm (210 mg ferric iron) (Auryxia)	1	•	•			
scopolamine td patch 72hr 1 mg/3days (Transderm-scop)	1		•				IQIRVO - elafibranor tab 80 mg	2	•	•	•		•
trimethobenzamide hcl cap 300 mg	1						lactulose (encephalopathy) solution 10 gm/15ml	1					
VARUBI - rolapitant hcl tab therapy pack 2 x 90 mg (base equiv)	3		•			•	lanthanum carbonate chew tab 500 mg (elemental), 750 mg (elemental), 1000 mg (elemental) (Fosrenol)	1	•	•			
DIGESTIVE AIDS													
CREON - pancrelipase (lip-prot-amyl) dr cap 3000-9500-15000 unit, 6000-19000-30000 unit, 12000-38000-60000 unit, 24000-76000-120000 unit, 36000-114000-180000 unit	2	•											
SUCRAID - sacrosidase soln 8500 unit/ml	3	•	•	•		•							

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
LIVMARLI - maralixibat chloride oral soln 9.5 mg/ml	3	•		•		•	sulfasalazine tab 500 mg (Azulfidine)	1		•			
LIVMARLI - maralixibat chloride tab 10 mg, 15 mg, 20 mg	3	•		•		•	SYMPROIC - naldemedine tosylate tab 0.2 mg (base equivalent)	2	•	•			
LIVMARLI - maralixibat chloride tab 30 mg	3			•		•	TREMFYA - guselkumab soln auto-injector 200 mg/2ml	2	•	•	•		•
lubiprostone cap 8 mcg, 24 mcg (Amitiza)	1	•	•				TREMFYA - guselkumab soln prefilled syringe 200 mg/2ml	2	•	•	•		•
mesalamine cap er 24hr 0.375 gm (Apriso)	1		•				TREMFYA INDUCTION PACK FO - guselkumab soln auto-injector 200 mg/2ml	2	•	•	•		•
MESALAMINE DR - mesalamine cap dr 400 mg	1	•	•				TRULANCE - plecanatide tab 3 mg	2	•	•			
mesalamine enema 4 gm	1		•				ursodiol cap 300 mg	1					
mesalamine suppos 1000 mg (Canasa)	1		•				ursodiol tab 250 mg (Urso 250)	1					
mesalamine tab delayed release 800 mg	1		•				ursodiol tab 500 mg (Urso forte)	1					
mesalamine tab delayed release 1.2 gm (Lialda)	1		•				VIBERZI - eluxadoline tab 75 mg, 100 mg	3	•	•			
metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)	1						XERMELO - telotristat ethyl tab 250 mg (as telotristat etiprate)	3	•	•	•		•
metoclopramide hcl tab 5 mg (base equivalent), 10 mg (base equivalent) (Reglan)	1						GENITOURINARY AGENTS						
MOVANTIK - naloxegol oxalate tab 12.5 mg (base equivalent), 25 mg (base equivalent)	2	•	•				URINARY ANTISPASMODICS						
sevelamer carbonate packet 0.8 gm, 2.4 gm (Renvela)	1		•				bethanechol chloride tab 5 mg, 10 mg, 25 mg, 50 mg	1					
sevelamer carbonate tab 800 mg (Renvela)	1		•				fesoterodine fumarate tab er 24hr 4 mg, 8 mg (Toviaz)	1		•			
sevelamer hcl tab 400 mg	1		•				mirabegron granules for oral extended release susp 8 mg/ml (Myrbetriq)	1	•	•			
sevelamer hcl tab 800 mg (Renagel)	1		•				mirabegron tab er 24 hr 25 mg, 50 mg (Myrbetriq)	1		•			
SKYRIZI - risankizumab-rzaa subcutaneous soln cartridge 180 mg/1.2ml, 360 mg/2.4ml	2	•	•	•		•	oxybutynin chloride solution 5 mg/5ml	1		•			
sulfasalazine tab delayed release 500 mg (Azulfidine en-tabs)	1		•				oxybutynin chloride tab er 24hr 5 mg, 10 mg (Ditropan xl)	1		•			
							oxybutynin chloride tab er 24hr 15 mg	1		•			
							oxybutynin chloride tab 5 mg	1		•			
							solifenacin succinate tab 5 mg, 10 mg (Vesicare)	1		•			

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
tolterodine tartrate cap er 24hr 2 mg, 4 mg (Detrol la)	1		•				VCF VAGINAL CONTRACEPTIVE - nonoxynol-9 foam 12.5%	A				•	
tolterodine tartrate tab 1 mg, 2 mg (Detrol)	1		•				GENITOURINARY AGENTS - MISC.						
trospium chloride cap er 24hr 60 mg	1		•				alfuzosin hcl tab er 24hr 10 mg (Uroxatral)	1		•			
trospium chloride tab 20 mg	1		•				CYSTAGON - cysteamine bitartrate cap 50 mg, 150 mg	3			•		•
VAGINAL PRODUCTS							dutasteride cap 0.5 mg (Avodart)	1		•			
clindamycin phosphate vaginal cream 2% (Cleocin)	1						dutasteride-tamsulosin hcl cap 0.5-0.4 mg (Jalyn)	1		•			
ENCARE - nonoxynol-9 vaginal suppos 100 mg	A				•		ELMIRON - pentosan polysulfate sodium caps 100 mg	2	•	•			
estradiol vaginal cream 0.01% (Estrace)	1		•				FILSPARI - sparsentan tab 200 mg, 400 mg	3	•	•	•		•
estradiol vaginal tab 10 mcg (Vagifem)	1						finasteride tab 5 mg (Proscar)	1		•			
ESTRING - estradiol vaginal ring 2 mg (7.5 mcg/24hrs)	2		•				K-PHOS NO 2 - potassium & sodium acid phosphates tab 305-700 mg	3					
GYNAZOLE-1 - butoconazole nitrate (one dose) vaginal cream 2%	3						LITHOSTAT - acetohydroxamic acid tab 250 mg	3					
metronidazole vaginal gel 0.75%	1						potassium citrate tab er 5 meq (540 mg) (Urocit-k 5)	1					
OPTIONS GYNOL II VAGINAL - nonoxynol-9 gel 3%	A				•		potassium citrate tab er 10 meq (1080 mg) (Urocit-k 10)	1					
PHEXX - lactic acid-citric acid-potassium bitartrate gel 1.8-1-0.4%	A		•		•		potassium citrate tab er 15 meq (1620 mg) (Urocit-k 15)	1					
PREMARIN - estrogens, conjugated vaginal cream 0.625 mg/gm	2						SODIUM CITRATE AND CITRIC - sodium citrate & citric acid soln 500-334 mg/5ml	3					
progesterone vaginal insert 100 mg (Endometrin)	1	•	•				SODIUM CITRATE/CITRIC ACI - sodium citrate & citric acid soln 500-334 mg/5ml	3					
terconazole vaginal cream 0.4%, 0.8%	1						tamsulosin hcl cap 0.4 mg (Flomax)	1		•			
terconazole vaginal suppos 80 mg	1						tiopronin tab delayed release 100 mg, 300 mg (Thiola ec)	1			•		•
TODAY SPONGE - nonoxynol-9 vaginal sponge 1000 mg	A				•		tiopronin tab 100 mg (Thiola)	1			•		•
VCF VAGINAL CONTRACEPTIVE - nonoxynol-9 gel 4%	A				•		CENTRAL NERVOUS SYSTEM DRUGS						
VCF VAGINAL CONTRACEPTIVE - nonoxynol-9 film 28%	A				•		ANTI-ANXIETY AGENTS						
							alprazolam orally disintegrating tab 0.25 mg, 0.5 mg, 1 mg, 2 mg	1					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
alprazolam tab er 24hr 0.5 mg, 1 mg, 2 mg, 3 mg (Xanax xr)	1						clomipramine hcl cap 25 mg, 50 mg, 75 mg (Anafranil)	1					
alprazolam tab 0.25 mg, 0.5 mg, 1 mg, 2 mg (Xanax)	1						desipramine hcl tab 10 mg, 25 mg (Norpramin)	1					
bupirone hcl tab 5 mg, 7.5 mg, 10 mg, 15 mg, 30 mg	1						desipramine hcl tab 50 mg, 75 mg, 100 mg, 150 mg	1					
chlordiazepoxide hcl cap 5 mg, 10 mg, 25 mg	1						desvenlafaxine succinate tab er 24hr 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv) (Pristiq)	1		•			
clorazepate dipotassium tab 3.75 mg, 15 mg	1						DOXEPIN HCL - doxepin hcl conc 10 mg/ml	3	•	•			
clorazepate dipotassium tab 7.5 mg (Tranxene t)	1						doxepin hcl cap 10 mg, 25 mg, 50 mg, 75 mg, 100 mg	1					
diazepam conc 5 mg/ml	1						DOXEPIN HYDROCHLORIDE - doxepin hcl cap 150 mg	1					
diazepam oral soln 1 mg/ml	1						duloxetine hcl enteric coated pellets cap 20 mg (base eq), 30 mg (base eq), 60 mg (base eq) (Cymbalta)	1		•			
diazepam tab 2 mg, 5 mg, 10 mg (Valium)	1						EMSAM - selegiline td patch 24hr 6 mg/24hr, 9 mg/24hr, 12 mg/24hr	3					
hydroxyzine hcl syrup 10 mg/5ml	1						escitalopram oxalate soln 5 mg/5ml (base equiv)	1					
hydroxyzine hcl tab 10 mg, 25 mg, 50 mg	1						escitalopram oxalate tab 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv) (Lexapro)	1					
hydroxyzine pamoate cap 25 mg, 50 mg (Vistaril)	1						FETZIMA - levomilnacipran hcl cap er 24hr 20 mg (base equivalent), 40 mg (base equivalent), 80 mg (base equivalent), 120 mg (base equivalent)	3	•	•			
lorazepam conc 2 mg/ml	1						FETZIMA TITRATION PACK - levomilnacipran hcl cap er 24hr 20 & 40 mg therapy pack	3	•	•			
lorazepam tab 0.5 mg, 1 mg, 2 mg (Ativan)	1						fluoxetine hcl cap 10 mg, 20 mg, 40 mg (Prozac)	1					
oxazepam cap 10 mg, 15 mg, 30 mg	1						fluoxetine hcl solution 20 mg/5ml	1					
ANTIDEPRESSANTS							fluoxetine hcl tab 10 mg, 20 mg	1					
amitriptyline hcl tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg	1						fluoxetine hcl tab 60 mg (Fluoxetine hydrochlo)	1	•				
bupropion hcl tab er 12hr 100 mg, 150 mg, 200 mg (Wellbutrin sr)	1												
bupropion hcl tab er 24hr 150 mg, 300 mg (Wellbutrin xl)	1												
bupropion hcl tab 75 mg, 100 mg	1												
citalopram hydrobromide oral soln 10 mg/5ml	1												
citalopram hydrobromide tab 10 mg (base equiv), 20 mg (base equiv), 40 mg (base equiv) (Celexa)	1												

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
fluvoxamine maleate tab 25 mg, 50 mg, 100 mg	1						equivalent), 50 mg (base equivalent), 75 mg (base equivalent), 100 mg (base equivalent)						
imipramine hcl tab 10 mg, 25 mg, 50 mg	1						vilazodone hcl tab 10 mg, 20 mg, 40 mg (Viibryd)	1					
MARPLAN - isocarboxazid tab 10 mg	3						ANTIPSYCHOTICS						
mirtazapine orally disintegrating tab 15 mg, 30 mg, 45 mg (Remeron soltab)	1						ABILIFY ASIMTUFII - aripiprazole im er susp prefilled syringe 720 mg/2.4ml, 960 mg/3.2ml	3	•	•			
mirtazapine tab 7.5 mg, 45 mg	1						ABILIFY MAINTENA - aripiprazole im for er susp prefilled syringe 300 mg, 400 mg	3	•	•			
mirtazapine tab 15 mg, 30 mg (Remeron)	1						ABILIFY MAINTENA - aripiprazole im for extended release susp 300 mg, 400 mg	3	•	•			
nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 75 mg (Pamelor)	1						aripiprazole oral solution 1 mg/ml	1		•			
nortriptyline hcl soln 10 mg/5ml	1						aripiprazole orally disintegrating tab 10 mg, 15 mg	1		•			
paroxetine hcl tab 10 mg, 20 mg, 30 mg, 40 mg (Paxil)	1						aripiprazole tab 2 mg, 5 mg, 10 mg, 15 mg, 20 mg, 30 mg (Abilify)	1		•			
PHENELZINE SULFATE - phenelzine sulfate tab 15 mg	1						ARISTADA - aripiprazole lauroxil im er susp prefilled syr 441 mg/1.6ml, 662 mg/2.4ml, 882 mg/3.2ml, 1064 mg/3.9ml	3	•	•			
protriptyline hcl tab 5 mg, 10 mg	1						ARISTADA INITIO - aripiprazole lauroxil im er susp prefilled syr 675 mg/2.4ml	3	•	•			
sertraline hcl oral concentrate for solution 20 mg/ml (Zoloft)	1						asenapine maleate sl tab 2.5 mg (base equiv), 5 mg (base equiv), 10 mg (base equiv) (Saphris)	1		•			
sertraline hcl tab 25 mg, 50 mg, 100 mg (Zoloft)	1						chlorpromazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg, 200 mg	1					
tranylcypromine sulfate tab 10 mg (Parnate)	1						clozapine orally disintegrating tab 12.5 mg, 25 mg, 100 mg, 150 mg, 200 mg	1		•			
trazodone hcl tab 50 mg, 100 mg, 150 mg	1						clozapine tab 25 mg, 50 mg, 100 mg, 200 mg (Clozaril)	1		•			
trimipramine maleate cap 25 mg, 50 mg, 100 mg	1						EQUETRO - carbamazepine (mood) cap er 12hr 100 mg, 200 mg, 300 mg	3					
TRINTELLIX - vortioxetine hbr tab 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv)	3	•	•										
venlafaxine hcl cap er 24hr 37.5 mg (base equivalent), 75 mg (base equivalent), 150 mg (base equivalent) (Effexor xr)	1		•										
venlafaxine hcl tab er 24hr 225 mg (base equivalent)	1		•										
venlafaxine hcl tab 25 mg (base equivalent), 37.5 mg (base	1		•										

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
FANAPT - iloperidone tab 1 mg, 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg	3	•	•				INVEGA TRINZA - paliperidone palmitate er susp pref syr 273 mg/0.88ml, 410 mg/1.32ml, 546 mg/1.75ml, 819 mg/2.63ml	3	•	•			
FANAPT TITRATION PACK A - iloperidone tab 1 mg & 2 mg & 4 mg & 6 mg titration pak	3	•	•				LITHIUM CARBONATE - lithium carbonate cap 300 mg	3					
FANAPT TITRATION PACK B - iloperidone tab 1 mg & 2 mg & 6 mg & 8 mg titration pak	3	•	•				lithium carbonate cap 150 mg, 300 mg, 600 mg (Lithium carbonate)	1					
FANAPT TITRATION PACK C - iloperidone tab 1 mg & 2 mg & 6 mg titration pak	3	•	•				lithium carbonate tab er 300 mg (Lithobid)	1					
fluphenazine decanoate inj 25 mg/ml	1						lithium carbonate tab er 450 mg	1					
FLUPHENAZINE HCL - fluphenazine hcl oral conc 5 mg/ml	3						lithium carbonate tab 300 mg	1					
fluphenazine hcl tab 1 mg, 2.5 mg, 5 mg, 10 mg	1						lithium oral solution 8 meq/5ml	1					
FLUPHENAZINE HYDROCHLORID - fluphenazine hcl elixir 2.5 mg/5ml	3						loxapine succinate cap 5 mg, 10 mg, 25 mg, 50 mg	1					
FLUPHENAZINE HYDROCHLORID - fluphenazine hcl inj 2.5 mg/ml	3						lurasidone hcl tab 20 mg, 40 mg, 60 mg, 80 mg, 120 mg (Latuda)	1		•			
haloperidol decanoate im soln 50 mg/ml (Haldol decanoate 50)	1						MOLINDONE HYDROCHLORIDE - molindone hcl tab 5 mg, 10 mg, 25 mg	3					
haloperidol decanoate im soln 100 mg/ml (Haldol decanoate 100)	1						olanzapine for im inj 10 mg (Zyprexa)	1		•			
haloperidol lactate inj 5 mg/ml	1						olanzapine orally disintegrating tab 5 mg, 10 mg, 15 mg, 20 mg (Zyprexa zydis)	1		•			
haloperidol lactate oral conc 2 mg/ml	1						olanzapine tab 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg (Zyprexa)	1		•			
haloperidol tab 0.5 mg, 1 mg, 2 mg, 5 mg, 10 mg, 20 mg	1						paliperidone tab er 24hr 1.5 mg, 3 mg, 6 mg, 9 mg (Invega)	1		•			
INVEGA HAFYERA - paliperidone palmitate er susp pref syr 1,092 mg/3.5ml, 1,560 mg/5ml	3	•	•				perphenazine tab 2 mg, 4 mg, 8 mg, 16 mg	1					
INVEGA SUSTENNA - paliperidone palmitate er susp pref syr 39 mg/0.25ml, 78 mg/0.5ml, 117 mg/0.75ml, 156 mg/ml, 234 mg/1.5ml	3	•	•				PERSERIS - risperidone subcutaneous for er susp prefilled syr 90 mg, 120 mg	3	•	•			
							prochlorperazine maleate tab 5 mg (base equivalent), 10 mg (base equivalent)	1					
							prochlorperazine suppos 25 mg	1					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
quetiapine fumarate tab er 24hr 50 mg, 150 mg, 200 mg, 300 mg, 400 mg (Seroquel xr)	1		•				VERSACLOZ - clozapine susp 50 mg/ml	3	•	•			
quetiapine fumarate tab 25 mg, 50 mg, 100 mg, 200 mg, 300 mg, 400 mg (Seroquel)	1		•				VRAYLAR - cariprazine hcl cap 0.5 mg (base equivalent), 0.75 mg (base equivalent), 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent)	3	•	•			
REXULTI - brexpiprazole tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	3	•	•				ziprasidone hcl cap 20 mg, 40 mg, 60 mg, 80 mg (Geodon)	1		•			
RISPERDAL CONSTA - risperidone microspheres for im extended rel susp 12.5 mg, 25 mg, 37.5 mg, 50 mg	3	•	•				ZYPREXA - olanzapine for im inj 10 mg	3	•	•			
risperidone microspheres for im extended rel susp 12.5 mg, 25 mg, 37.5 mg, 50 mg (Risperdal consta)	1	•	•				ZYPREXA RELPREVV - olanzapine pamoate for extended rel im susp 210 mg (base eq), 300 mg (base eq), 405 mg (base eq)	3	•	•			
RISPERIDONE ODT - risperidone orally disintegrating tab 0.25 mg	1	•	•				HYPNOTICS						
risperidone orally disintegrating tab 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	1		•				estazolam tab 1 mg, 2 mg	1					
risperidone soln 1 mg/ml (Risperdal)	1		•				eszopiclone tab 1 mg, 2 mg, 3 mg (Lunesta)	1		•			
risperidone tab 0.25 mg	1		•				HETLIOZ - tasimelteon capsule 20 mg	3	•	•	•		•
risperidone tab 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg (Risperdal)	1		•				HETLIOZ LQ - tasimelteon oral susp 4 mg/ml	3	•	•	•		•
SECUADO - asenapine td patch 24 hr 3.8 mg/24hr, 5.7 mg/24hr, 7.6 mg/24hr	3	•	•				PHENOBARBITAL - phenobarbital elixir 20 mg/5ml	3					
thiothixene cap 1 mg, 2 mg, 5 mg, 10 mg	1						PHENOBARBITAL - phenobarbital tab 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg, 100 mg	3					
trifluoperazine hcl tab 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)	1						tasimelteon capsule 20 mg (Hetlioz)	1	•	•	•		•
UZEDY - risperidone subcutaneous er susp pref syr 50 mg/0.14ml, 75 mg/0.21ml, 100 mg/0.28ml, 125 mg/0.35ml, 150 mg/0.42ml, 200 mg/0.56ml, 250 mg/0.7ml	3	•	•				temazepam cap 15 mg, 30 mg (Restoril)	1					
							zaleplon cap 5 mg, 10 mg	1		•			
							zolpidem tartrate tab er 6.25 mg, 12.5 mg (Ambien cr)	1		•			
							zolpidem tartrate tab 5 mg, 10 mg (Ambien)	1		•			

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS							FOUNDAYO - orforglipron calcium (weight management) tab 0.8 mg, 2.5 mg, 5.5 mg, 9 mg, 14.5 mg, 17.2 mg	3	•	•			
Anti-Obesity/Anorexiants - coverage of drugs in this class is based on your benefit							guanfacine hcl tab er 24hr 1 mg (base equiv), 2 mg (base equiv), 3 mg (base equiv), 4 mg (base equiv) (Intuniv)	1		•			
amphetamine-dextroamphetamine cap er 24hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg (Adderall xr)	1		•				liraglutide (weight mngmt) soln pen-inj 18 mg/3ml (6 mg/ml) (Saxenda)	1	•	•			
amphetamine-dextroamphetamine tab 5 mg, 7.5 mg, 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg (Adderall)	1		•				lisdexamphetamine dimesylate cap 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg (Vyvanse)	1		•			
armodafinil tab 50 mg, 150 mg, 200 mg, 250 mg (Nuvigil)	1		•				lisdexamphetamine dimesylate chew tab 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg (Vyvanse)	1		•			
atomoxetine hcl cap 10 mg (base equiv), 18 mg (base equiv), 25 mg (base equiv), 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv), 100 mg (base equiv) (Strattera)	1		•				methylphenidate hcl cap er 10 mg (cd), 20 mg (cd), 30 mg (cd), 40 mg (cd), 50 mg (cd), 60 mg (cd)	1		•			
benzphetamine hcl tab 50 mg	1	•	•				methylphenidate hcl cap er 24hr 10 mg (la), 20 mg (la), 30 mg (la), 40 mg (la) (Ritalin la)	1		•			
caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)	1						methylphenidate hcl chew tab 2.5 mg, 5 mg, 10 mg	1		•			
clonidine hcl tab er 12hr 0.1 mg (Kapvay)	1		•				methylphenidate hcl soln 5 mg/5ml, 10 mg/5ml (Methylin)	1		•			
CONTRACE - naltrexone hcl-bupropion hcl tab er 12hr 8-90 mg	3	•	•				methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 36 mg, 54 mg (Concerta)	1		•			
dexmethylphenidate hcl cap er 24 hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg (Focalin xr)	1		•				methylphenidate hcl tab er 10 mg, 20 mg	1		•			
dexmethylphenidate hcl tab 2.5 mg, 5 mg, 10 mg (Focalin)	1		•				methylphenidate hcl tab 5 mg, 10 mg, 20 mg (Ritalin)	1		•			
dextroamphetamine sulfate cap er 24hr 5 mg	1		•				modafinil tab 100 mg, 200 mg (Provigil)	1		•			
dextroamphetamine sulfate cap er 24hr 10 mg, 15 mg (Dexedrine)	1		•				ORLISTAT - orlistat cap 120 mg	3	•	•			
dextroamphetamine sulfate oral solution 5 mg/5ml	1		•				PHENDIMETRAZINE TARTRATE - phendimetrazine tartrate cap er 24hr 105 mg	3	•	•			
dextroamphetamine sulfate tab 5 mg, 10 mg	1		•				phendimetrazine tartrate tab 35 mg	1	•	•			
diethylpropion hcl tab 25 mg	1	•	•										

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
phentermine hcl cap 15 mg, 30 mg, 37.5 mg	1	•	•				AUSTEDO XR - deutetrabenazine tab er 24hr 6 mg, 12 mg, 18 mg, 24 mg, 30 mg, 36 mg, 42 mg, 48 mg	3	•	•	•		•
phentermine hcl tab 8 mg	1	•	•				AUSTEDO XR PATIENT TITRAT - deutetrabenazine tab er titration pack 12 & 18 & 24 & 30 mg	3	•	•	•		•
phentermine hcl tab 37.5 mg (Adipex-p)	1	•	•				AVONEX - interferon beta-1a im prefilled syringe kit 30 mcg/0.5ml	2	•	•	•		•
phentermine hcl-topiramate cap er 24hr 3.75-23 mg, 7.5-46 mg, 11.25-69 mg, 15-92 mg (Qsymia)	1	•	•				AVONEX PEN - interferon beta-1a im auto-injector kit 30 mcg/0.5ml	2	•	•	•		•
SAXENDA - liraglutide (weight mngmt) soln pen-inj 18 mg/3ml (6 mg/ml)	3	•	•				BETASERON - interferon beta-1b for inj kit 0.3 mg	2	•	•	•		•
SUNOSI - solriamfetol hcl tab 75 mg (base equiv), 150 mg (base equiv)	3	•	•				bupropion hcl (smoking deterrent) tab er 12hr 150 mg	A				•	
VYVANSE - lisdexamfetamine dimesylate cap 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg	3	•	•				cladribine tab therapy pack 10 mg (4 tabs), 10 mg (5 tabs), 10 mg (6 tabs), 10 mg (7 tabs), 10 mg (8 tabs), 10 mg (9 tabs), 10 mg (10 tabs) (Mavenclad)	1	•	•	•		•
VYVANSE - lisdexamfetamine dimesylate chew tab 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg	3	•	•				dalfampridine tab er 12hr 10 mg (Ampyra)	1	•	•	•		•
WEGOVY - semaglutide (weight management) tab 1.5 mg, 4 mg, 9 mg, 25 mg	3	•	•				dimethyl fumarate capsule delayed release 120 mg, 240 mg (Tecfidera)	1		•	•		•
WEGOVY - semaglutide (weight mngmt) soln auto-injector 0.25 mg/0.5ml, 0.5 mg/0.5ml, 1 mg/0.5ml, 1.7 mg/0.75ml, 2.4 mg/0.75ml	3	•	•				dimethyl fumarate capsule dr starter pack 120 mg & 240 mg (Tecfidera starter pa)	1		•	•		•
WEGOVY HD - semaglutide (weight mngmt) soln auto-injector 7.2 mg/0.75ml	3	•	•				disulfiram tab 250 mg, 500 mg	1					
XENICAL - orlistat cap 120 mg	3	•	•				donepezil hydrochloride orally disintegrating tab 5 mg, 10 mg	1		•			
ZEPBOUND - tirzepatide (weight mngmt) soln auto-injector 2.5 mg/0.5ml, 5 mg/0.5ml, 7.5 mg/0.5ml, 10 mg/0.5ml, 12.5 mg/0.5ml, 15 mg/0.5ml	3	•	•				donepezil hydrochloride tab 5 mg, 10 mg, 23 mg (Aricept)	1		•			
PSYCHOTHERAPEUTIC and NEUROLOGICAL AGENTS - MISC.							flingolimod hcl cap 0.5 mg (base equiv) (Gilenya)	1		•	•		•
acamprosate calcium tab delayed release 333 mg	1						FLUOXETINE HYDROCHLORIDE - fluoxetine hcl (pmdd) tab 10 mg, 20 mg	3					
AUSTEDO - deutetrabenazine tab 6 mg, 9 mg, 12 mg	3	•	•	•		•	galantamine hydrobromide cap er 24hr 8 mg, 16 mg, 24 mg (Razadyne er)	1		•			

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
galantamine hydrobromide tab 4 mg, 8 mg, 12 mg	1		•				nicotine polacrilex gum 2 mg, 4 mg	A				•	
GILENYA - fingolimod hcl cap 0.25 mg (base equiv)	3	•	•	•		•	nicotine polacrilex lozenge 2 mg, 4 mg	A				•	
glatiramer acetate soln prefilled syringe 20 mg/ml, 40 mg/ml (Copaxone)	1		•	•		•	nicotine td patch 24hr 7 mg/24hr, 14 mg/24hr, 21 mg/24hr	A				•	
INGREZZA - valbenazine tosylate cap therapy pack 40 mg (7) & 80 mg (21)	3	•	•	•		•	NICOTINE TRANSDERMAL SYST - nicotine td patch 24 hr kit 21-14-7 mg/24hr	A				•	
INGREZZA - valbenazine tosylate cap 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv)	3	•	•	•		•	NICOTROL NS - nicotine nasal spray 10 mg/ml (0.5 mg/spray)	A				•	
INGREZZA - valbenazine tosylate capsule sprinkle 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv)	3	•	•	•		•	paroxetine mesylate cap 7.5 mg (base equiv)	1					
KESIMPTA - ofatumumab soln auto-injector 20 mg/0.4ml	2	•	•	•		•	PERPHENAZINE/AMITRIPTYLIN - perphenazine-amitriptyline tab 2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg	1					
lofexidine hcl tab 0.18 mg (base equivalent) (Lucemyra)	1		•				pimozide tab 1 mg, 2 mg	1					
LUCEMYRA - lofexidine hcl tab 0.18 mg (base equivalent)	3		•				PLEGRIDY - peginterferon beta-1a soln auto-injector 125 mcg/0.5ml	2	•	•	•		•
MAYZENT - siponimod fumarate tab 0.25 mg (base equiv), 1 mg (base equiv), 2 mg (base equiv)	3	•	•	•		•	PLEGRIDY - peginterferon beta-1a soln prefilled syringe 125 mcg/0.5ml	2	•	•	•		•
MAYZENT STARTER PACK - siponimod fumarate tab 0.25 mg (7) starter pack	3	•	•	•		•	PLEGRIDY - peginterferon beta-1a im soln prefilled syr 125 mcg/0.5ml	2	•	•	•		•
MAYZENT STARTER PACK - siponimod fumarate tab 0.25 mg (12) starter pack	3	•	•	•		•	PLEGRIDY STARTER PACK - peginterferon beta-1a soln auto-inj 63 & 94 mcg/0.5ml pack	2	•	•	•		•
memantine hcl tab 5 mg, 10 mg (Namenda)	1		•				PLEGRIDY STARTER PACK - peginterferon beta-1a soln pref syr 63 & 94 mcg/0.5ml pack	2	•	•	•		•
MEMANTINE HCL TITRATION P - memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack	3		•				REBIF - interferon beta-1a soln pref syr 22 mcg/0.5ml, 44 mcg/0.5ml	2	•	•	•		•
milnacipran hcl tab 12.5 mg (5) & 25 mg (8) & 50 mg (42) pak (Savella titration pa)	1	•	•				REBIF REBIDOSE - interferon beta-1a soln auto-inj 22 mcg/0.5ml, 44 mcg/0.5ml	2	•	•	•		•
milnacipran hcl tab 12.5 mg, 25 mg, 50 mg, 100 mg (Savella)	1	•	•				REBIF REBIDOSE TITRATION - interferon beta-1a auto-inj 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	2	•	•	•		•

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
REBIF TITRATION PACK - interferon beta-1a pref syr 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	2	•	•	•		•	diflunisal tab 500 mg	1		•			
rivastigmine tartrate cap 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent)	1		•				ANALGESICS - NARCOTIC						
rivastigmine td patch 24hr 4.6 mg/24hr, 9.5 mg/24hr, 13.3 mg/24hr (Exelon)	1		•				acetaminophen w/ codeine tab 300-15 mg (Tylenol/codeine)	1		•			
sodium oxybate oral solution 500 mg/ml (Xyrem)	1	•	•	•		•	acetaminophen w/ codeine tab 300-30 mg, 300-60 mg	1		•			
teriflunomide tab 7 mg, 14 mg (Aubagio)	1		•	•		•	BELBUCA - buprenorphine hcl buccal film 75 mcg (base equivalent), 150 mcg (base equivalent), 300 mcg (base equivalent), 450 mcg (base equivalent), 600 mcg (base equivalent), 750 mcg (base equivalent), 900 mcg (base equivalent)	3	•	•			
tetrabenazine tab 12.5 mg, 25 mg (Xenazine)	1	•	•	•		•	buprenorphine hcl sl tab 2 mg (base equiv), 8 mg (base equiv)	1		•			
varenicline tartrate tab 0.5 mg (base equiv), 1 mg (base equiv)	A				•		buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv), 4-1 mg (base equiv), 8-2 mg (base equiv), 12-3 mg (base equiv) (Suboxone)	1		•			
varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack	A				•		buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv), 8-2 mg (base equiv)	1		•			
XYWAV - calcium, mag, potassium, & sod oxybates oral soln 500 mg/ml	3	•	•	•		•	buprenorphine td patch weekly 5 mcg/hr, 7.5 mcg/hr, 10 mcg/hr, 15 mcg/hr, 20 mcg/hr (Butrans)	1	•	•			
ZEPOSIA - ozanimod hcl cap 0.92 mg	2	•	•	•		•	butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg	1		•			
ZEPOSIA STARTER KIT - ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg & 21 x 0.92 mg	2	•	•	•		•	butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg	1		•			
ZEPOSIA 7-DAY STARTER PAC - ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg	2	•	•	•		•	butorphanol tartrate nasal soln 10 mg/ml	1		•			
ANALGESICS AND ANESTHETICS							codeine sulfate tab 30 mg (Codeine sulfate)	1		•			
ANALGESICS - NON-NARCOTIC							fenfentanyl td patch 72hr 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr, 100 mcg/hr	1	•	•			
aspirin chew tab 81 mg	A				•		HYDROCODONE BITARTRATE/ AC - hydrocodone-acetaminophen tab 2.5-325 mg	2		•			
aspirin tab delayed release 81 mg	A				•								
butalbital-acetaminophen tab 50-325 mg	1		•										
butalbital-acetaminophen-cafeine tab 50-325-40 mg (Esgic)	1		•										
butalbital-aspirin-cafeine cap 50-325-40 mg	1		•										

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
hydrocodone-acetaminophen soln 7.5-325 mg/15ml	1		•				oxycodone hcl tab 5 mg, 15 mg, 30 mg (Roxicodone)	1		•			
hydrocodone-acetaminophen tab 10-325 mg, 5-300 mg, 7.5-300 mg, 5-325 mg, 7.5-325 mg, 10-300 mg	1		•				oxycodone hcl tab 10 mg, 20 mg	1		•			
hydrocodone-ibuprofen tab 7.5-200 mg	1		•				oxycodone w/ acetaminophen tab 2.5-325 mg, 5-325 mg, 7.5-325 mg, 10-325 mg (Percocet)	1		•			
HYDROCODONE/IBUPROFEN - hydrocodone-ibuprofen tab 5-200 mg, 10-200 mg	3		•				oxymorphone hcl tab 5 mg, 10 mg	1		•			
hydromorphone hcl liqd 1 mg/ml (Dilaudid)	1		•				SUBOXONE - buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv), 4-1 mg (base equiv), 8-2 mg (base equiv), 12-3 mg (base equiv)	3		•			
hydromorphone hcl tab 2 mg, 4 mg, 8 mg (Dilaudid)	1		•				tapentadol hcl tab 50 mg, 75 mg, 100 mg (Nucynta)	1	•	•			
methadone hcl conc 10 mg/ml (Methadose)	1		•				TAPENTADOL HYDROCHLORIDE - tapentadol hcl tab er 12hr 50 mg, 100 mg, 150 mg, 200 mg, 250 mg	3	•	•			
methadone hcl soln 5 mg/5ml, 10 mg/5ml (Methadone hcl)	1		•				tramadol hcl tab er 24hr 100 mg, 200 mg, 300 mg	1	•	•			
methadone hcl tab for oral susp 40 mg	1		•				tramadol hcl tab 50 mg (Ultram)	1		•			
methadone hcl tab 5 mg, 10 mg	1		•				tramadol-acetaminophen tab 37.5-325 mg (Ultracet)	1		•			
METHADOSE - methadone hcl conc 10 mg/ml	3		•				XTAMPZA ER - oxycodone cap er 12hr abuse-deterrent 9 mg, 13.5 mg, 18 mg, 27 mg, 36 mg	2	•	•			
METHADOSE SUGAR-FREE - methadone hcl conc 10 mg/ml	3		•				ZUBSOLV - buprenorphine hcl-naloxone hcl sl tab 0.7-0.18 mg (base eq), 1.4-0.36 mg (base eq), 2.9-0.71 mg (base eq), 5.7-1.4 mg (base eq), 8.6-2.1 mg (base eq), 11.4-2.9 mg (base eq)	3		•			
morphine sulfate oral soln 10 mg/5ml, 100 mg/5ml (20 mg/ml)	1		•				ANALGESICS - ANTI-INFLAMMATORY						
morphine sulfate oral soln 20 mg/5ml (Morphine sulfate)	1		•				ADALIMUMAB-AATY CD/UC/HS - adalimumab-aaty auto-injector kit 80 mg/0.8ml	2	•	•	•		•
morphine sulfate tab er 15 mg, 30 mg, 60 mg, 100 mg, 200 mg (Ms contin)	1	•	•				ADALIMUMAB-AATY 1-PEN KIT - adalimumab-aaty auto-injector kit 40 mg/0.4ml, 80 mg/0.8ml	2	•	•	•		•
morphine sulfate tab 15 mg, 30 mg (Morphine sulfate)	1		•				ADALIMUMAB-AATY 2-PEN KIT - adalimumab-aaty auto-injector kit 40 mg/0.4ml	2	•	•	•		•
oxycodone hcl cap 5 mg	1		•										
oxycodone hcl conc 100 mg/5ml (20 mg/ml)	1		•										
oxycodone hcl soln 5 mg/5ml	1		•										

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
ADALIMUMAB-AATY 2-SYRINGE - adalimumab-aaty prefilled syringe kit 20 mg/0.2ml, 40 mg/0.4ml	2	•	•	•		•	HADLIMA PUSH TOUCH - adalimumab-bwwd soln auto-injector 40 mg/0.4ml, 40 mg/0.8ml	2	•	•	•		•
ARCALYST - rilonacept for inj 220 mg	2	•	•	•		•	ibuprofen tab 400 mg, 600 mg, 800 mg	1					
AVTOZMA - tocilizumab-anoh subcutaneous soln auto-inj 162 mg/0.9ml	2	•	•	•		•	indomethacin cap er 75 mg	1					
AVTOZMA - tocilizumab-anoh subcutaneous soln pref syr 162 mg/0.9ml	2	•	•	•		•	indomethacin cap 25 mg, 50 mg	1					
celecoxib cap 50 mg, 100 mg, 200 mg, 400 mg (Celebrex)	1		•				ketorolac tromethamine tab 10 mg	1		•			
diclofenac potassium tab 50 mg	1						KEVZARA - sarilumab subcutaneous soln prefilled syringe 200 mg/1.14ml	3	•	•	•		•
diclofenac sodium tab delayed release 25 mg, 50 mg, 75 mg	1						KEVZARA - sarilumab subcutaneous solution auto-injector 150 mg/1.14ml, 200 mg/1.14ml	3	•	•	•		•
diclofenac w/ misoprostol tab delayed release 50-0.2 mg (Arthrotec 50)	1						leflunomide tab 10 mg, 20 mg (Arava)	1					
diclofenac w/ misoprostol tab delayed release 75-0.2 mg (Arthrotec 75)	1						meloxicam tab 7.5 mg, 15 mg	1		•			
ENBREL - etanercept subcutaneous inj 25 mg/0.5ml	2	•	•	•		•	nabumetone tab 500 mg, 750 mg	1					
ENBREL - etanercept subcutaneous soln prefilled syringe 25 mg/0.5ml, 50 mg/ml	2	•	•	•		•	naproxen sodium tab 275 mg	1					
ENBREL MINI - etanercept subcutaneous solution cartridge 50 mg/ml	2	•	•	•		•	naproxen sodium tab 550 mg (Anaprox ds)	1					
ENBREL SURECLICK - etanercept subcutaneous solution auto-injector 50 mg/ml	2	•	•	•		•	naproxen tab 250 mg, 375 mg	1					
etodolac cap 200 mg, 300 mg	1						naproxen tab 500 mg (Naprosyn)	1					
etodolac tab er 24hr 400 mg, 500 mg	1						ORENCIA - abatacept subcutaneous soln prefilled syringe 50 mg/0.4ml, 87.5 mg/0.7ml, 125 mg/ml	3	•	•	•		•
etodolac tab er 24hr 600 mg	1	•					ORENCIA CLICKJECT - abatacept subcutaneous soln auto-injector 125 mg/ml	3	•	•	•		•
etodolac tab 400 mg (Lodine)	1	•					OTEZLA - apremilast tab starter therapy pack 4 x 10 mg & 51 x 20 mg, 10 mg & 20 mg & 30 mg	2	•	•	•		•
etodolac tab 500 mg	1						OTEZLA - apremilast tab 20 mg, 30 mg	2	•	•	•		•
HADLIMA - adalimumab-bwwd soln prefilled syringe 40 mg/0.4ml, 40 mg/0.8ml	2	•	•	•		•	OTEZLA XR - apremilast tab er 24hr 75 mg	2	•	•	•		•
							OTEZLA/OTEZLA XR 28 DAY T - apremilast tab start pack 10 mg & 20 mg & 30 mg & (er) 75 mg	2	•	•	•		•
							oxaprozin tab 600 mg (Daypro)	1					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
piroxicam cap 10 mg, 20 mg (Feldene)	1						dihydroergotamine mesylate inj 1 mg/ml (D.h.e. 45)	1	•	•			
RASUVO - methotrexate soln pf auto-injector 7.5 mg/0.15ml, 10 mg/0.2ml, 12.5 mg/0.25ml, 15 mg/0.3ml, 17.5 mg/0.35ml, 20 mg/0.4ml, 22.5 mg/0.45ml, 25 mg/0.5ml, 30 mg/0.6ml	2	•	•				eletriptan hydrobromide tab 20 mg (base equivalent), 40 mg (base equivalent) (Relpax)	1	•	•			
RINVOQ - upadacitinib tab er 24hr 15 mg, 30 mg, 45 mg	2	•	•	•		•	EMGALITY - galcanezumab-gnlm subcutaneous soln auto-injector 120 mg/ml	2	•	•			
RINVOQ LQ - upadacitinib oral soln 1 mg/ml	2	•	•	•		•	EMGALITY - galcanezumab-gnlm subcutaneous soln prefilled syr 100 mg/ml, 120 mg/ml	2	•	•			
SIMPONI - golimumab subcutaneous soln auto-injector 100 mg/ml	2	•	•	•		•	ERGOMAR - ergotamine tartrate sl tab 2 mg	2	•	•			
SIMPONI - golimumab subcutaneous soln prefilled syringe 100 mg/ml	2	•	•	•		•	naratriptan hcl tab 1 mg (base equiv), 2.5 mg (base equiv) (Amerge)	1		•			
sulindac tab 150 mg, 200 mg	1						NURTEC - rimegepant sulfate tab disint 75 mg	2	•	•			
tofacitinib citrate oral soln 1 mg/ ml (base equivalent) (Xeljanz)	1	•	•	•		•	QULIPTA - atogepant tab 10 mg, 30 mg, 60 mg	2	•	•			
tofacitinib citrate tab er 24hr 11 mg (base equivalent), 22 mg (base equivalent) (Xeljanz xr)	1	•	•	•		•	rizatriptan benzoate oral disintegrating tab 5 mg (base eq)	1		•			
tofacitinib citrate tab 5 mg (base equivalent), 10 mg (base equivalent) (Xeljanz)	1	•	•	•		•	rizatriptan benzoate oral disintegrating tab 10 mg (base eq) (Maxalt-mlt)	1		•			
TYENNE - tocilizumab-aazg subcutaneous soln auto-inj 162 mg/0.9ml	2	•	•	•		•	rizatriptan benzoate tab 5 mg (base equivalent)	1		•			
TYENNE - tocilizumab-aazg subcutaneous soln pref syr 162 mg/0.9ml	2	•	•	•		•	rizatriptan benzoate tab 10 mg (base equivalent) (Maxalt)	1		•			
MIGRAINE PRODUCTS							sumatriptan nasal spray 5 mg/act, 20 mg/act (Imitrex)	1		•			
AIMOVIG - erenumab-aooe subcutaneous soln auto-injector 70 mg/ml, 140 mg/ml	2	•	•				sumatriptan succinate inj 6 mg/0.5ml	1		•			
AJOVY - fremanezumab-vfrm subcutaneous soln auto-inj 225 mg/1.5ml	2	•	•				sumatriptan succinate solution auto-injector 6 mg/0.5ml (Imitrex statdose sys)	1		•			
AJOVY - fremanezumab-vfrm subcutaneous soln pref syr 225 mg/1.5ml	2	•	•				sumatriptan succinate tab 25 mg, 50 mg, 100 mg (Imitrex)	1		•			
							UBRELVY - ubrogepant tab 50 mg, 100 mg	2	•	•			

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
zolmitriptan tab 2.5 mg, 5 mg (Zomig)	1	•	•				DIACOMIT - stiripentol cap 250 mg, 500 mg	2			•		•
GOUT AGENTS							DIACOMIT - stiripentol packet 250 mg	2			•		•
allopurinol tab 100 mg, 300 mg (Zyloprim)	1						DIACOMIT - stiripentol packet 500 mg	2		•	•		•
colchicine tab 0.6 mg (Colcrys)	1		•				diazepam rectal gel delivery system 2.5 mg	1					
colchicine w/ probenecid tab 0.5-500 mg	1						diazepam rectal gel delivery system 10 mg, 20 mg (Diastat acudial)	1					
probenecid tab 500 mg	1						DILANTIN - phenytoin sodium extended cap 30 mg, 100 mg	3					
NEUROMUSCULAR DRUGS							DILANTIN INFATABS - phenytoin chew tab 50 mg	3					
ANTICONVULSANTS							DILANTIN-125 - phenytoin susp 125 mg/5ml	3					
brivaracetam oral soln 10 mg/ml (Briviact)	1	•	•				divalproex sodium cap delayed release sprinkle 125 mg (Depakote sprinkles)	1					
brivaracetam tab 10 mg (Briviact)	1						divalproex sodium tab delayed release 125 mg, 250 mg, 500 mg (Depakote)	1					
brivaracetam tab 25 mg, 50 mg, 75 mg, 100 mg (Briviact)	1		•				divalproex sodium tab er 24 hr 250 mg, 500 mg (Depakote er)	1					
carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg (Carbatrol)	1						EPIDIOLEX - cannabidiol soln 100 mg/ml	3	•	•	•		•
carbamazepine chew tab 100 mg	1						eslicarbazepine acetate tab 200 mg, 400 mg, 600 mg, 800 mg (Aptiom)	1	•	•			
carbamazepine susp 100 mg/5ml (Tegretol)	1						ethosuximide cap 250 mg (Zarontin)	1					
carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg (Tegretol-xr)	1						ethosuximide soln 250 mg/5ml (Zarontin)	1					
carbamazepine tab 200 mg (Tegretol)	1						felbamate susp 600 mg/5ml (Felbatol)	1					
CARBATROL - carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg	3	•					felbamate tab 400 mg, 600 mg (Felbatol)	1					
CELONTIN - methsuximide cap 300 mg	3	•					FINTEPLA - fenfluramine hcl oral soln 2.2 mg/ml	3	•	•	•		•
clobazam suspension 2.5 mg/ml (Onfi)	1						gabapentin cap 100 mg, 300 mg, 400 mg (Neurontin)	1		•			
clobazam tab 10 mg, 20 mg (Onfi)	1												
clonazepam orally disintegrating tab 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg	1												
clonazepam tab 0.5 mg, 1 mg, 2 mg (Klonopin)	1												

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
gabapentin oral soln 250 mg/5ml (Neurontin)	1		•				perampanel tab 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg (Fycompa)	1		•			
gabapentin tab 600 mg, 800 mg (Neurontin)	1		•				phenytoin chew tab 50 mg (Dilantin infatabs)	1					
lacosamide oral solution 10 mg/ml (Vimpat)	1	•	•				phenytoin sodium extended cap 100 mg (Dilantin)	1					
lacosamide tab 50 mg, 100 mg, 150 mg, 200 mg (Vimpat)	1		•				phenytoin sodium extended cap 200 mg, 300 mg (Phenytek)	1					
lamotrigine tab chewable dispersible 5 mg, 25 mg (Lamictal chewable di)	1						phenytoin susp 125 mg/5ml (Dilantin-125)	1					
lamotrigine tab er 24hr 25 mg, 50 mg, 100 mg, 200 mg, 250 mg, 300 mg (Lamictal xr)	1						pregabalin cap 25 mg, 50 mg, 75 mg, 100 mg, 150 mg, 200 mg, 225 mg, 300 mg (Lyrica)	1		•			
lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg (Lamictal)	1						primidone tab 50 mg, 250 mg (Mysoline)	1					
lamotrigine tab 35 x 25 mg starter kit (Lamictal starter/tak)	1						rufinamide susp 40 mg/ml (Banzel)	1		•			
lamotrigine tab 25 mg (42) & 100 mg (7) starter kit (Lamictal starter/not)	1						rufinamide tab 200 mg, 400 mg (Banzel)	1		•			
lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit (Lamictal starter/tak)	1						SPRITAM - levetiracetam tab disintegrating soluble 250 mg, 500 mg	3	•	•			
levetiracetam oral soln 100 mg/ml (Keppra)	1						TEGRETOL - carbamazepine susp 100 mg/5ml	3					
levetiracetam tab er 24hr 500 mg, 750 mg (Keppra xr)	1						TEGRETOL - carbamazepine tab 200 mg	3					
levetiracetam tab 250 mg, 500 mg, 750 mg, 1000 mg (Keppra)	1						TEGRETOL-XR - carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg	3					
methsuximide cap 300 mg (Celontin)	1						tiagabine hcl tab 2 mg, 4 mg (Gabitril)	1					
MYSOLINE - primidone tab 50 mg, 250 mg	3	•					topiramate cap er 24hr sprinkle 25 mg, 50 mg, 100 mg, 150 mg, 200 mg (Qudexy xr)	1	•	•			
NAYZILAM - midazolam nasal spray soln 5 mg/0.1 ml	2	•	•				topiramate sprinkle cap 15 mg, 25 mg (Topamax sprinkle)	1					
oxcarbazepine susp 300 mg/5ml (60 mg/ml) (Trileptal)	1						topiramate tab 25 mg, 50 mg, 100 mg, 200 mg (Topamax)	1					
oxcarbazepine tab 150 mg, 300 mg, 600 mg (Trileptal)	1						valproate sodium oral soln 250 mg/5ml (base equiv)	1					
perampanel susp 0.5 mg/ml (Fycompa)	1	•	•				valproic acid cap 250 mg	1					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
VALTOCO 10 MG DOSE - diazepam nasal spray 10 mg/0.1 ml	2	•	•				bromocriptine mesylate tab 2.5 mg (base equivalent) (Parlodel)	1					
VALTOCO 15 MG DOSE - diazepam nasal spray ther pack 2 x 7.5 mg/0.1ml (15 mg dose)	2	•	•				carbidopa & levodopa orally disintegrating tab 10-100 mg, 25-100 mg, 25-250 mg	1					
VALTOCO 20 MG DOSE - diazepam nasal spray ther pack 2 x 10 mg/0.1ml (20 mg dose)	2	•	•				carbidopa & levodopa tab er 25-100 mg, 50-200 mg	1					
VALTOCO 5 MG DOSE - diazepam nasal spray 5 mg/0.1 ml	2	•	•				carbidopa & levodopa tab 10-100 mg (Sinemet)	1					
vigabatrin powd pack 500 mg (Sabril)	1		•	•		•	carbidopa & levodopa tab 25-100 mg (Sinemet)	1		•			
vigabatrin tab 500 mg (Sabril)	1		•	•		•	carbidopa & levodopa tab 25-250 mg	1					
XCOPRI - cenobamate tab pack 100 mg & 150 mg tabs (250 mg daily dose)	3	•	•				carbidopa tab 25 mg (Lodosyn)	1					
XCOPRI - cenobamate tab pack 150 mg & 200 mg tabs (350 mg daily dose)	3		•				carbidopa-levodopa-entacapone tabs 12.5-50-200 mg (Stalevo 50)	1					
XCOPRI - cenobamate tab titration pack 14 x 12.5 mg & 14 x 25 mg, 14 x 50 mg & 14 x 100 mg, 14 x 150 mg & 14 x 200 mg	3		•				carbidopa-levodopa-entacapone tabs 18.75-75-200 mg (Stalevo 75)	1					
XCOPRI - cenobamate tab 25 mg, 50 mg, 100 mg, 150 mg, 200 mg	3		•				carbidopa-levodopa-entacapone tabs 25-100-200 mg (Stalevo 100)	1					
ZARONTIN - ethosuximide cap 250 mg	3						carbidopa-levodopa-entacapone tabs 31.25-125-200 mg (Stalevo 125)	1					
ZARONTIN - ethosuximide soln 250 mg/5ml	3						carbidopa-levodopa-entacapone tabs 37.5-150-200 mg (Stalevo 150)	1					
zonisamide cap 25 mg, 100 mg (Zonegran)	1						carbidopa-levodopa-entacapone tabs 50-200-200 mg (Stalevo 200)	1					
zonisamide cap 50 mg	1												
ANTIPARKINSON AGENTS							CARBIDOPA/LEVODOPA ER - carbidopa & levodopa cap er 23.75-95 mg, 36.25-145 mg, 48.75-195 mg, 61.25-245 mg	3	•				
amantadine hcl cap 100 mg	1						entacapone tab 200 mg (Comtan)	1					
amantadine hcl soln 50 mg/5ml	1						INBRIJA - levodopa inhal powder cap 42 mg	3	•	•	•		•
apomorphine hcl soln cartridge 30 mg/3ml (Apokyn)	1	•	•	•		•	NEUPRO - rotigotine td patch 24hr 1 mg/24hr, 2 mg/24hr, 3 mg/24hr, 4 mg/24hr, 6 mg/24hr, 8 mg/24hr	2					
benztropine mesylate tab 0.5 mg, 1 mg, 2 mg	1												
bromocriptine mesylate cap 5 mg (base equivalent) (Parlodel)	1												

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
pramipexole dihydrochloride tab 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg	1						FIRDAPSE - amifampridine phosphate tab 10 mg (base equivalent)	3	•	•	•		•
rasagiline mesylate tab 0.5 mg (base equiv), 1 mg (base equiv) (Azilect)	1						pyridostigmine bromide oral soln 60 mg/5ml (Mestinon)	1					
ropinirole hydrochloride tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg	1						pyridostigmine bromide tab er 180 mg (Mestinon timespan)	1					
selegiline hcl cap 5 mg	1						pyridostigmine bromide tab 60 mg (Mestinon)	1					
selegiline hcl tab 5 mg	1						NUTRITIONAL PRODUCTS						
tolcapone tab 100 mg (Tasmar)	1						VITAMINS						
trihexyphenidyl hcl tab 2 mg, 5 mg	1						ergocalciferol cap 1.25 mg (50000 unit) (Drisdol)	1					
NEUROMUSCULAR AGENTS							phytonadione tab 5 mg (Mephyton)	1					
EVRYSDI - risdiplam for soln 0.75 mg/ml	3	•	•	•		•	MULTIVITAMINS						
EVRYSDI - risdiplam tab 5 mg	3		•	•		•	PRENATAL 19 - prenatal vit w/ fe fumarate-fa chew tab 29-1 mg	1					
riluzole tab 50 mg (Rilutek)	1			•		•	PRENATAL-U - prenatal w/o a vit w/ fe fumarate-fa cap 106.5-1 mg	3					
MUSCULOSKELETAL THERAPY AGENTS							TRINATE - prenatal vit w/ fe fumarate-fa tab 28-1 mg	1					
baclofen tab 10 mg, 20 mg	1						MINERALS and ELECTROLYTES						
chlorzoxazone tab 500 mg	1		•				FLORIVA - sodium fluoride-vitamin d liqd drops 0.25 mg/ml-400 unit/ml	3				•	
cyclobenzaprine hcl tab 5 mg, 10 mg	1		•				FLUORIDE - sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf), 0.5 mg f (from 1.1 mg naf)	1				•	
dantrolene sodium cap 25 mg (Dantrium)	1						FLUORIDE - sodium fluoride chew tab 1 mg f (from 2.2 mg naf)	3				•	
dantrolene sodium cap 50 mg, 100 mg	1						K-PHOS - potassium phosphate monobasic tab 500 mg	3	•				
metaxalone tab 400 mg, 800 mg	1		•				PHOSPHA 250 NEUTRAL - pot phos monobasic w/sod phos di & monobas tab 155-852-130mg	3	•				
methocarbamol tab 500 mg, 750 mg, 1000 mg	1						PHOSPHO-TRIN K500 - potassium phosphate monobasic tab 500 mg	3	•				
orphenadrine citrate tab er 12hr 100 mg	1						PHOSPHO-TRIN 250 NEUTRAL - pot phos monobasic w/sod phos di & monobas tab 155-852-130mg	3	•				
tizanidine hcl tab 2 mg (base equivalent)	1												
tizanidine hcl tab 4 mg (base equivalent) (Zanaflex)	1												
ANTIMYASTHENIC AGENTS													

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
PHOSPHOROUS - pot phos monobasic w/sod phos di & monobas tab 155-852-130mg	3	•					carbonyl iron susp 15 mg/1.25ml (elemental iron)	A				•	
potassium chloride cap er 8 meq, 10 meq	1						CERDELGA - eliglustat tartrate cap 84 mg (base equivalent)	2	•	•	•		•
potassium chloride microencapsulated crys er tab 10 meq, 15 meq, 20 meq	1						cyanocobalamin inj 1000 mcg/ml	1					
potassium chloride oral soln 10% (20 meq/15ml), 20% (40 meq/15ml)	1						DOPTelet - avatrombopag maleate tab 20 mg (base equiv)	3	•	•	•		•
potassium chloride powder packet 20 meq	1						DOPTelet SPRINKLE - avatrombopag maleate cap sprinkle 10 mg (base equiv)	3	•	•	•		•
potassium chloride tab er 8 meq (600 mg)	1						eltrombopag olamine powder pack for susp 25 mg (base equiv), 12.5 mg (base eq) (Promacta)	1	•	•	•		•
potassium chloride tab er 10 meq, 20 meq (1500 mg) (K-tab)	1						eltrombopag olamine tab 12.5 mg (base equiv), 25 mg (base equiv), 50 mg (base equiv), 75 mg (base equiv) (Promacta)	1	•	•	•		•
SODIUM FLUORIDE - sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf), 0.5 mg f (from 1.1 mg naf)	1				•		ENDARI - glutamine (sickle cell) powd pack 5 gm	3	•	•	•		•
SODIUM FLUORIDE - sodium fluoride chew tab 1 mg f (from 2.2 mg naf)	3				•		EPOGEN - epoetin alfa inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml	2	•	•	•		•
SODIUM FLUORIDE - sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)	A				•		ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe), 220 mg/5ml (44 mg/5ml elemental fe), 300 mg/5ml (60 mg/5ml elemental fe)	A				•	
SODIUM FLUORIDE - sodium fluoride tab 0.5 mg f (from 1.1 mg naf), 1 mg f (from 2.2 mg naf)	3				•		folic acid cap 0.8 mg	A				•	
HEMATOLOGICAL AGENTS							folic acid tab 400 mcg, 800 mcg	A				•	
HEMATOPOIETIC AGENTS							folic acid tab 1 mg	1					
ARANESP ALBUMIN FREE - darbepoetin alfa soln inj 25 mcg/ml, 40 mcg/ml, 60 mcg/ml, 100 mcg/ml, 200 mcg/ml	2	•	•	•		•	FULPHILA - pegfilgrastim-jmdb soln prefilled syringe 6 mg/0.6ml	3	•	•	•		•
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 10 mcg/0.4ml, 25 mcg/0.42ml, 40 mcg/0.4ml, 60 mcg/0.3ml, 100 mcg/0.5ml, 150 mcg/0.3ml, 200 mcg/0.4ml, 300 mcg/0.6ml, 500 mcg/ml	2	•	•	•		•	glutamine (sickle cell) powd pack 5 gm (Endari)	1	•	•	•		•
							GRANIX - tbo-filgrastim soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	2	•	•	•		•
							GRANIX - tbo-filgrastim subcutaneous inj 300 mcg/ml	2	•	•	•		•
							MIRCERA - methoxy peg-epoetin beta soln prefilled syr 30	3	•	•	•		•

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
mcg/0.3ml, 50 mcg/0.3ml, 75 mcg/0.3ml, 100 mcg/0.3ml, 120 mcg/0.3ml, 150 mcg/0.3ml, 200 mcg/0.3ml							enoxaparin sodium inj soln pref syr 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml, 100 mg/ml, 120 mg/0.8ml, 150 mg/ml (Lovenox)	1		•			
NEULASTA - pegfilgrastim soln prefilled syringe 6 mg/0.6ml	3	•	•	•		•	enoxaparin sodium inj 300 mg/3ml (Lovenox)	1		•			
PROCRT - epoetin alfa inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml, 40000 unit/ml	2	•	•	•		•	fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml, 10 mg/0.8ml (Arixtra)	1		•			
RETACRIT - epoetin alfa-epbx inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml, 40000 unit/ml	2	•	•	•		•	FRAGMIN - dalteparin sodium soln prefilled syr 2500 unit/0.2ml, 5000 unit/0.2ml, 7500 unit/0.3ml, 10000 unit/ml, 12500 unit/0.5ml, 15000 unit/0.6ml, 18000 unit/0.72ml	3		•			
SIKLOS - hydroxyurea tab 100 mg, 1000 mg	3			•		•	FRAGMIN - dalteparin sodium subcutaneous soln 10000 unit/4ml, 95000 unit/3.8ml	3		•			
UDENYCA - pegfilgrastim-cbqv soln auto-injector 6 mg/0.6ml	3	•	•	•		•	HEPARIN SODIUM - heparin sodium (porcine) pf inj 5000 unit/ml	3					
UDENYCA - pegfilgrastim-cbqv soln prefilled syringe 6 mg/0.6ml	3	•	•	•		•	heparin sodium (porcine) inj 1000 unit/ml, 5000 unit/ml, 10000 unit/ml, 20000 unit/ml	1					
XROMI - hydroxyurea oral soln 100 mg/ml	3	•		•		•	heparin sodium (porcine) pf inj 1000 unit/ml, 5000 unit/0.5ml	1					
ZARXIO - filgrastim-sndz soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	2	•	•	•		•	PRADAXA - dabigatran etexilate mesylate cap 75 mg (etexilate base eq), 110 mg (etexilate base eq), 150 mg (etexilate base eq)	3	•	•			
ANTICOAGULANTS							PRADAXA - dabigatran etexilate mesylate pellet pack 20 mg, 30 mg, 40 mg, 50 mg, 110 mg, 150 mg	3	•	•			
dabigatran etexilate mesylate cap 75 mg (etexilate base eq), 110 mg (etexilate base eq), 150 mg (etexilate base eq) (Pradaxa)	1		•				rivaroxaban for susp 1 mg/ml (Xarelto)	1		•			
ELIQUIS - apixaban cap sprinkle 0.15 mg	2	•	•				rivaroxaban tab 2.5 mg (Xarelto)	1		•			
ELIQUIS - apixaban tab for oral susp pack 3 x 0.5 mg (1.5 mg), 4 x 0.5 mg (2 mg)	2		•				warfarin sodium tab 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg, 10 mg	1					
ELIQUIS - apixaban tab for oral susp 0.5 mg	2	•	•				XARELTO - rivaroxaban for susp 1 mg/ml	2		•			
ELIQUIS - apixaban tab 2.5 mg, 5 mg	2		•										
ELIQUIS STARTER PACK - apixaban tab starter pack 5 mg	2		•										

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
XARELTO - rivaroxaban tab 2.5 mg, 10 mg, 15 mg, 20 mg	2		•				5 mg, 7 x 20 mg & 7 x 5 mg, 7 x 50 mg & 7 x 20 mg						
XARELTO STARTER PACK - rivaroxaban tab starter therapy pack 15 mg & 20 mg	2		•				RUCONEST - c1 esterase inhibitor (recombinant) for iv inj 2100 unit	3	•	•			•
HEMOSTATICS							TAKHZYRO - lanadelumab-flyo soln pref syringe 150 mg/ml, 300 mg/2ml (150 mg/ml)	2	•	•	•		•
tranexamic acid tab 650 mg (Lysteda)	1						TAVALISSE - fostamatinib disodium tab 100 mg (base equivalent), 150 mg (base equivalent)	3	•	•	•		•
HEMATOLOGICAL AGENTS - MISC.							ticagrelor tab 60 mg, 90 mg (Brilinta)	1		•			
anagrelide hcl cap 0.5 mg (Agraylin)	1		•				ZONTIVITY - vorapaxar sulfate tab 2.08 mg (base equivalent)	3		•			
anagrelide hcl cap 1 mg	1		•				TOPICAL PRODUCTS						
aspirin-dipyridamole cap er 12hr 25-200 mg	1		•				OPHTHALMIC AGENTS						
BERINERT - c1 esterase inhibitor (human) for iv inj kit 500 unit	3	•	•			•	ALREX - loteprednol etabonate ophth susp 0.2%	3	•				
CABLIVI - caplacizumab-yhdp for inj kit 11 mg	3	•	•	•		•	ATROPINE SULFATE - atropine sulfate ophth soln 1%	3					
cilostazol tab 50 mg, 100 mg	1		•				atropine sulfate ophth soln 1% (Atropine sulfate)	1					
clopidogrel bisulfate tab 75 mg (base equiv) (Plavix)	1		•				azelastine hcl ophth soln 0.05%	1		•			
clopidogrel bisulfate tab 300 mg (base equiv)	1		•				BETAXOLOL HCL - betaxolol hcl ophth soln 0.5%	1					
dipyridamole tab 25 mg, 50 mg, 75 mg	1		•				brimonidine tartrate ophth soln 0.2%	1					
EMPAVELI - pegcetacoplan subcutaneous soln 1080 mg/20ml (54 mg/ml)	3	•	•	•		•	bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)	1					
HAEGARDA - c1 esterase inhibitor (human) for subcutaneous inj 2000 unit, 3000 unit	2	•	•	•		•	CARTEOLOL HCL - carteolol hcl ophth soln 1%	1					
icatibant acetate subcutaneous soln pref syr 30 mg/3ml (Firazyr)	1	•	•	•		•	ciprofloxacin hcl ophth soln 0.3% (base equivalent)	1					
pentoxifylline tab er 400 mg	1						CROMOLYN SODIUM - cromolyn sodium ophth soln 4%	1					
prasugrel hcl tab 5 mg (base equiv), 10 mg (base equiv) (Effient)	1		•				cyclosporine (ophth) emulsion 0.05% (pf) (Restasis multidose)	1		•			
PYRUKYND - mitapivat sulfate tab 5 mg, 20 mg, 50 mg	2	•	•	•		•	CYSTADROPS - cysteamine hcl ophth soln 0.37% (base equivalent)	3	•	•	•		•
PYRUKYND TAPER PACK - mitapivat sulfate tab therapy pack	2	•	•	•		•							

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
CYSTARAN - cysteamine hcl ophth soln 0.44% (base equivalent)	3	•	•	•		•	MAXIDEX - dexamethasone ophth susp 0.1%	2					
diclofenac sodium ophth soln 0.1%	1						moxifloxacin hcl ophth soln 0.5% (base equiv) (Vigamox)	1					
dorzolamide hcl ophth soln 2% (Trusopt)	1						NATACYN - natamycin ophth susp 5%	2					
dorzolamide hcl-timolol maleate ophth soln 2-0.5% (Cosopt)	1		•				neomycin-polymyxin-dexamethasone ophth oint 0.1% (Maxitrol)	1					
erythromycin ophth oint 5 mg/gm	1						neomycin-polymyxin-dexamethasone ophth susp 0.1% (Maxitrol)	1					
FLAREX - fluorometholone acetate ophth susp 0.1%	3						ofloxacin ophth soln 0.3% (Ocuflox)	1					
fluorometholone ophth susp 0.1% (Fml liquifilm)	1						OXERVATE - cenegermin-bkbj ophth soln 0.002% (20 mcg/ml)	3	•	•	•		•
gatifloxacin ophth soln 0.5% (Zymaxid)	1						phenylephrine hcl ophth soln 2.5%, 10%	1					
gentamicin sulfate ophth soln 0.3%	1						pilocarpine hcl ophth soln 1% (Isopto carpine)	1					
KETOROLAC TROMETHAMINE - ketorolac tromethamine ophth soln 0.4%	1	•					pilocarpine hcl ophth soln 2%, 4%	1					
ketorolac tromethamine ophth soln 0.5% (Acular)	1						polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1% (Polytrim)	1					
latanoprost ophth soln 0.005% (Xalatan)	1		•				prednisolone acetate ophth susp 1% (Pred forte)	1					
LEVOBUNOLOL HCL - levobunolol hcl ophth soln 0.5%	1						PREDNISOLONE SODIUM PHOSP - prednisolone sodium phosphate ophth soln 1%	3					
LEVOFLOXACIN - levofloxacin ophth soln 1.5%	3						SIMBRINZA - brinzolamide-brimonidine tartrate ophth susp 1-0.2%	2		•			
LOTEMAX - loteprednol etabonate ophth oint 0.5%	2						tafluprost preservative free (pf) ophth soln 0.0015% (Zioptan)	1	•	•			
LOTEMAX SM - loteprednol etabonate ophth gel 0.38%	3						timolol maleate ophth soln 0.25%, 0.5% (Timoptic)	1					
loteprednol etabonate ophth gel 0.5% (Lotemax)	1						timolol maleate preservative free ophth soln 0.25% (Timoptic ocudose)	1					
loteprednol etabonate ophth susp 0.2% (Alrex)	1						tobramycin ophth soln 0.3%	1					
loteprednol etabonate ophth susp 0.5% (Lotemax)	1						tobramycin-dexamethasone ophth susp 0.3-0.1% (Tobradex)	1					
loteprednol etabonate-tobramycin ophth susp 0.5-0.3% (Zylet)	1	•											

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
TRIFLURIDINE - trifluridine ophth soln 1%	1						lidocaine hcl viscous soln 2%	1					
XIIDRA - lifitegrast ophth soln 5%	2	•	•				nystatin susp 100000 unit/ml	1					
OTIC AGENTS							ORAVIG - miconazole buccal tab 50 mg (mouth-throat)	3					
acetic acid otic soln 2%	1						PARODONTAX - stannous fluoride paste 0.454%	A				•	
ciprofloxacin hcl otic soln 0.2% (base equivalent) (Cetraxal)	1						PERIOMED - stannous fluoride conc 0.63%	A				•	
ciprofloxacin-dexamethasone otic susp 0.3-0.1% (Ciprodex)	1						pilocarpine hcl tab 5 mg, 7.5 mg (Salagen)	1					
fluocinolone acetonide (otic) oil 0.01% (Dermotic)	1						SENSODYNE COMPLETE PROTEC - stannous fluoride paste 0.454%	A				•	
hydrocortisone w/ acetic acid otic soln 1-2%	1						SENSODYNE RAPID RELIEF - stannous fluoride paste 0.454%	A				•	
neomycin-polymyxin-hc otic soln 1%	1						SENSODYNE REPAIR & PROTEC - stannous fluoride paste 0.454%	A				•	
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%	1						SENSODYNE SENSITIVITY & G - stannous fluoride paste 0.454%	A				•	
ofloxacin otic soln 0.3%	1						SENSODYNE SENSITIVITY GUM - stannous fluoride paste 0.454%	A				•	
MOUTH/THROAT/DENTAL AGENTS							SF - sodium fluoride gel 1.1% (0.5% f)	3				•	
cevimeline hcl cap 30 mg (Evoxac)	1						SODIUM FLUORIDE - sodium fluoride gel 1.1% (0.5% f)	3				•	
chlorhexidine gluconate soln 0.12% (Peridex)	1						SODIUM FLUORIDE - sodium fluoride rinse 0.2%	1	•			•	
CLINPRO 5000 - sodium fluoride paste 1.1%	1				•		SODIUM FLUORIDE 5000 PPM - sodium fluoride gel 1.1% (0.5% f)	3				•	
clotrimazole troche 10 mg	1						SODIUM FLUORIDE 5000 PPM - sodium fluoride paste 1.1%	1				•	
DENTAGEL - sodium fluoride gel 1.1% (0.5% f)	3				•		SODIUM FLUORIDE 5000 PPM - sodium fluoride-potassium nitrate gel 1.1-5%	1	•			•	
FLUORIDEX DAILY DEFENSE - sodium fluoride paste 1.1%	1				•		SODIUM FLUORIDE/POTASSIUM - sodium fluoride-potassium nitrate gel 1.1-5%	1	•			•	
FLUORIDEX DAILY RENEWAL - stannous fluoride conc 0.63%	3				•		stannous fluoride gel 0.4%	A				•	
FLUORIDEX ENHANCED WHITEN - sodium fluoride paste 1.1%	1				•		triamcinolone acetonide dental paste 0.1%	1					
FLUORIDEX SENSITIVITY REL - sodium fluoride-potassium nitrate gel 1.1-5%	3	•			•		ANORECTAL AGENTS						
FLUORIMAX 5000 - sodium fluoride paste 1.1%	1				•								
JUST RIGHT 5000 - sodium fluoride paste 1.1%	1				•								

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
ANALPRAM HC - hydrocortisone acetate w/ pramoxine perianal cream 2.5-1%	2	•					betamethasone dipropionate augmented oint 0.05% (Diprolene)	1					
ANALPRAM HC - hydrocortisone acetate w/ pramoxine perianal lotn 2.5-1%	2						betamethasone dipropionate cream 0.05%	1					
CORTIFOAM - hydrocortisone acetate perianal foam 10% (90 mg/dose)	2						betamethasone dipropionate lotion 0.05%	1					
HYDROCORTISONE - hydrocortisone perianal cream 1%	1	•					betamethasone dipropionate oint 0.05%	1					
hydrocortisone enema 100 mg/60ml (Cortenema)	1						betamethasone valerate cream 0.1% (base equivalent)	1					
hydrocortisone perianal cream 2.5% (Anusol-hc)	1						betamethasone valerate oint 0.1% (base equivalent)	1					
nitroglycerin oint 0.4% (Rectiv)	1		•				calcipotriene cream 0.005% (Dovonex)	1					
PROCTOCORT - hydrocortisone perianal cream 1%	1	•					ciclopirox gel 0.77%	1					
PROCTOFOAM HC - hydrocortisone acetate w/ pramoxine perianal foam 1-1%	2						ciclopirox olamine cream 0.77% (base equiv) (Loprox)	1					
RECTIV - nitroglycerin oint 0.4%	3	•	•				ciclopirox olamine susp 0.77% (base equiv) (Loprox)	1					
DERMATOLOGICALS							ciclopirox shampoo 1% (Loprox shampoo)	1					
acitretin cap 10 mg, 17.5 mg, 25 mg	1						ciclopirox solution 8% (Penlac Nail Lacquer)	1		•			
acyclovir oint 5% (Zovirax)	1						clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%	1					
ADBRY - tralokinumab-ldrm subcutaneous soln auto-injector 300 mg/2ml	2	•	•	•		•	clindamycin phosphate gel 1% (twice-daily)	1					
ADBRY - tralokinumab-ldrm subcutaneous soln prefilled syr 150 mg/ml	2	•	•	•		•	clindamycin phosphate lotion 1% (Cleocin-t)	1					
alclometasone dipropionate cream 0.05%	1						clindamycin phosphate soln 1%	1					
azelaic acid gel 15% (Finacea)	1						clindamycin phosphate swab 1%	1					
betamethasone dipropionate augmented cream 0.05%	1						clobetasol propionate cream 0.05% (Temovate)	1					
betamethasone dipropionate augmented lotion 0.05%	1						clobetasol propionate emollient base cream 0.05%	1					
							clobetasol propionate gel 0.05%	1					
							clobetasol propionate oint 0.05% (Temovate)	1					
							clobetasol propionate soln 0.05%	1					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
CLOCORTOLONE PIVALATE - clocortolone pivalate cream 0.1%	3	•					fluocinolone acetonide oil 0.01% (body oil) (Derma-smoothe/fs bod)	1					
clotrimazole w/ betamethasone cream 1-0.05%	1						fluocinolone acetonide oil 0.01% (scalp oil) (Derma-smoothe/fs sca)	1					
COSENTYX - secukinumab subcutaneous pref syr 150 mg/ml (300 mg dose)	2	•	•	•		•	fluocinolone acetonide oint 0.025% (Synalar)	1					
COSENTYX - secukinumab subcutaneous soln prefilled syringe 75 mg/0.5ml, 150 mg/ml	2	•	•	•		•	fluocinolone acetonide soln 0.01% (Synalar)	1					
COSENTYX SENSOREADY PEN - secukinumab subcutaneous auto- inj 150 mg/ml (300 mg dose)	2	•	•	•		•	fluocinonide cream 0.05%	1					
COSENTYX SENSOREADY PEN - secukinumab subcutaneous soln auto-injector 150 mg/ml	2	•	•	•		•	fluocinonide cream 0.1% (Vanos)	1					
COSENTYX UNOREADY - secukinumab subcutaneous soln auto-injector 300 mg/2ml	2	•	•	•		•	fluocinonide gel 0.05%	1					
desonide cream 0.05% (Desowen)	1						fluocinonide oint 0.05%	1					
desonide oint 0.05%	1						fluocinonide soln 0.05%	1					
desoximetasone cream 0.25% (Topicort)	1						fluorouracil cream 5% (Efudex)	1	•	•			
desoximetasone oint 0.25% (Topicort)	1						fluorouracil soln 5%	1					
diclofenac sodium soln 1.5%	1		•				fluticasone propionate cream 0.05%	1					
DRYSOL - aluminum chloride soln 20%	3						fluticasone propionate oint 0.005%	1					
DUPIXENT - dupilumab subcutaneous soln auto-injector 200 mg/1.14ml, 300 mg/2ml	2	•	•	•		•	gentamicin sulfate cream 0.1%	1					
DUPIXENT - dupilumab subcutaneous soln prefilled syringe 200 mg/1.14ml, 300 mg/2ml	2	•	•	•		•	halobetasol propionate cream 0.05%	1					
econazole nitrate cream 1%	1						hydrocortisone cream 2.5%	1					
ENSTILAR - calcipotriene- betamethasone dipropionate foam 0.005-0.064%	3	•					hydrocortisone oint 2.5%	1					
erythromycin soln 2%	1						HYFTOR - sirolimus gel 0.2%	3	•	•			•
fluocinolone acetonide cream 0.01%	1						imiquimod cream 5%	1		•			
							isotretinoin cap 10 mg, 20 mg, 30 mg, 40 mg (Absorica)	1	•				
							ivermectin cream 1% (Soolantra)	1	•				
							ketoconazole cream 2%	1					
							ketoconazole shampoo 2%	1					
							lidocaine hcl soln 4%	1	•	•			
							lidocaine patch 5% (Lidoderm)	1	•	•			
							lidocaine-prilocaine cream 2.5-2.5%	1		•			
							malathion lotion 0.5% (Ovide)	1					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
METHOXSALEN - methoxsalen rapid cap 10 mg	3						tazarotene cream 0.05%, 0.1% (Tazorac)	1	•				
metronidazole cream 0.75% (Metrocream)	1						tazarotene gel 0.05%, 0.1% (Tazorac)	1	•				
metronidazole gel 0.75%	1						TAZORAC - tazarotene cream 0.05%	2	•				
metronidazole gel 1% (Metrogel)	1						TAZORAC - tazarotene gel 0.05%, 0.1%	3	•				
metronidazole lotion 0.75% (Metrolotion)	1						TREMFYA - guselkumab soln pen-injector 100 mg/ml	2	•	•	•		•
mometasone furoate cream 0.1%	1						TREMFYA - guselkumab soln prefilled syringe 100 mg/ml	2	•	•	•		•
mometasone furoate oint 0.1%	1						TREMFYA PEN - guselkumab soln auto-injector 100 mg/ml	2	•	•	•		•
mometasone furoate solution 0.1% (lotion)	1						tretinoin cream 0.025%, 0.05%, 0.1% (Retin-a)	1	•				
mupirocin oint 2%	1						tretinoin gel 0.01%, 0.025% (Retin-a)	1	•				
NATROBA - spinosad susp 0.9%	3						triamcinolone acetonide cream 0.025%, 0.1%, 0.5%	1					
nystatin cream 100000 unit/gm	1						triamcinolone acetonide lotion 0.1%	1					
nystatin oint 100000 unit/gm	1						triamcinolone acetonide oint 0.025%, 0.1%, 0.5%	1					
nystatin topical powder 100000 unit/gm	1						USTEKINUMAB-AAUZ - ustekinumab-aausz soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	2	•	•	•		•
penciclovir cream 1% (Denavir)	1						VALCHLOR - mechlorethamine hcl gel 0.016% (base equivalent)	2	•		•		•
permethrin cream 5%	1	•					YESINTEK - ustekinumab-kfce soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	2	•	•	•		•
SANTYL - collagenase oint 250 unit/gm	2						YESINTEK - ustekinumab-kfce subcutaneous soln 45 mg/0.5ml	2	•	•	•		•
silver sulfadiazine cream 1% (Silvadene)	1						MISCELLANEOUS PRODUCTS						
SKYRIZI - risankizumab-rzaa soln prefilled syringe 55 mg/0.37ml, 150 mg/ml	2	•	•	•		•	ANTIDOTES						
SKYRIZI PEN - risankizumab-rzaa soln auto-injector 150 mg/ml	2	•	•	•		•	CHEMET - succimer cap 100 mg	2					
STEQEYMA - ustekinumab-stba soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	2	•	•				deferiprone tab 500 mg, 1000 mg (Ferriprox)	1	•	•	•		•
STEQEYMA - ustekinumab-stba subcutaneous soln 45 mg/0.5ml	2	•	•				FERRIPROX - deferiprone oral soln 100 mg/ml	3	•	•	•		•
sulfacetamide sodium lotion 10% (acne) (Klaron)	1												
SULFAMYLON - mafenide acetate cream 85 mg/gm	3												
tacrolimus oint 0.03%, 0.1% (Protopic)	1	•											

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
KLOXXADO - naloxone hcl nasal spray 8 mg/0.1ml	2		•				ACTI-LANCE UNIVERSAL SAFE - lancets	3					
naloxone hcl inj 4 mg/10ml	1						ADJUSTABLE LANCING DEVICE - lancet devices	3					
NALOXONE HYDROCHLORIDE - naloxone hcl soln cartridge 0.4 mg/ml	3						ADVANCED MOBILE LANCET 30 - lancets	3					
naltrexone hcl tab 50 mg	1						ADVANTAGE SAFETY LANCETS - lancets	3					
REXTOVY - naloxone hcl nasal spray 4 mg/0.25ml	2		•				ADVOCATE INSULIN PEN NEED - insulin pen needle 29 g x 12.7 mm (1/2")	2					
DIAGNOSTIC PRODUCTS							ADVOCATE INSULIN PEN NEED - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2					
CHEMSTRIP-K - acetone (urine) test strip	2						ADVOCATE INSULIN PEN NEED - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
CONTOUR BLOOD GLUCOSE TES - glucose blood test strip	2		•				ADVOCATE INSULIN PEN NEED - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2					
CONTOUR NEXT BLOOD GLUCOS - glucose blood test strip	2		•				ADVOCATE INSULIN SYRINGE/ - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2					
CONTOUR PLUS BLOOD GLUCOS - glucose blood test strip	2		•				ADVOCATE LANCETS - lancets	3					
FREESTYLE INSULINX BLOOD - glucose blood test strip	2		•				ADVOCATE LANCETS 30G - lancets	3					
FREESTYLE LITE TEST STRIP - glucose blood test strip	2		•				ADVOCATE LANCING DEVICE - lancet devices	3					
FREESTYLE PRECISION NEO B - glucose blood test strip	2		•				ADVOCATE RAPID-SAFE LANCI - lancet devices	3					
FREESTYLE TEST STRIPS - glucose blood test strip	2		•				ADVOCATE SAFETY LANCETS - lancets	3					
KETONE - acetone (urine) test strip	2						ADVOCATE SAFETY LANCETS 2 - lancets	3					
KETONE TEST STRIPS - acetone (urine) test strip	2						AGAMATRIX ULTRA-THIN LANC - lancets	3					
KETOSTIX - acetone (urine) test strip	2												
RELION KETONE TEST STRIPS - acetone (urine) test strip	2												
MEDICAL DEVICES													
ACTI-LANCE LANCETS 28G - lancets	3												
ACTI-LANCE LITE SAFETY LA - lancets	3												
ACTI-LANCE SPECIAL SAFETY - lancets	3												

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
AIMSCO TWIST LANCETS 32G - lancets	3						(1/6" or 5/32"), x 5 mm (1/5" or 3/16")						
AIMSCO TWIST LANCETS 33G - lancets	3						AUM MINI INSULIN PEN NEED - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2					
AQ INSULIN SYRINGE/0.5ML/ - insulin syringe/needle u-100 1/2 ml 30 x 5/16"	2						AUM MINI INSULIN PEN NEED - insulin pen needle 33 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2					
AQ INSULIN SYRINGE/1ML/29 - insulin syringe/needle u-100 1 ml 29 x 1/2"	2						AUM PEN NEEDLE/32GX4MM - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
AQ INSULIN SYRINGE/1ML/31 - insulin syringe/needle u-100 1 ml 31 x 5/16"	2						AUM PEN NEEDLE/32GX5MM - insulin pen needle 32 g x 5 mm (1/5" or 3/16")	2					
AQINJECT PEN NEEDLE/31G X - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2						AUM PEN NEEDLE/32GX6MM - insulin pen needle 32 g x 6 mm (1/4" or 15/64")	2					
AQINJECT PEN NEEDLE/32G X - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						AUM PEN NEEDLE/33GX4MM - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2					
AQUALANCE LANCETS UL - lancets	3						AUM PEN NEEDLE/33GX5MM - insulin pen needle 33 g x 5 mm (1/5" or 3/16")	2					
ASSURE COMFORT LANCETS UL - lancets	3						AUM PEN NEEDLE/33GX6MM - insulin pen needle 33 g x 6 mm (1/4" or 15/64")	2					
ASSURE ID DUO PRO SAFETY - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2						AUM READYGARD DUO SAFETY - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
ASSURE ID PRO SAFETY PEN - insulin pen needle 30 g x 5 mm (1/5" or 3/16")	2						AUM SAFETY PEN NEEDLE/31 - insulin pen needle 31 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16")	2					
ASSURE ID SAFETY PEN NEED - insulin pen needle 30 g x 8 mm (1/3" or 5/16")	2						AURORA LANCET SUPER THIN - lancets	3					
ASSURE LANCE LANCETS - lancets	3						AURORA LANCET THIN 23G - lancets	3					
ASSURE LANCE LANCETS 21G - lancets	3						AURORA PEN NEEDLES 29GX12 - insulin pen needle 29 g x 12 mm (1/2")	2					
ASSURE LANCE PLUS SAFETY - lancets	3												
ASSURE LANCE SAFETY LANCE - lancets	3												
AUM INSULIN SAFETY PEN NE - insulin pen needle 31 g x 4 mm	2												

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
AURORA PEN NEEDLES 31G X - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2						BD INSULIN SYRINGE ULTRA - insulin syringe/needle u-100 1 ml 30 x 1/2"	2					
AUTO-LANCET - lancet devices	3						BD INSULIN SYRINGE ULTRA- - insulin syringe/needle u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2					
AUTO-LANCET MINI - lancet devices	3						BD INSULIN SYRINGE ULTRAF - insulin syringe/needle u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 1/2", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2					
AUTOKEEPER/SAFETY PEN NEE - insulin pen needle 30 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2						BD INSULIN SYRINGE/U-100/ - insulin syringe/needle u-100 1 ml 27 x 1/2", u-100 2 ml 27.5 x 5/8"	2					
AUTOLET IMPRESSION LANCIN - lancet devices	3						BD INSULIN SYRINGE/U-500/ - insulin syringe/needle u-500 0.5 ml 31g x 6mm (15/64")	2					
AUTOLET LANCING DEVICE - lancet devices	3						BD INSULIN SYRINGE/0.3ML/ - insulin syringe/needle u-100 0.3 ml 29 x 1/2"	2					
AUTOLET LITE LANCING DEVI - lancet devices	3						BD INSULIN SYRINGE/0.5ML/ - insulin syringe/needle u-100 1/2 ml 29 x 1/2"	2					
AUTOLET MINI - lancet devices	3						BD INSULIN SYRINGE/1ML/27 - insulin syringe/needle u-100 1 ml 27 x 1/2"	2					
AUTOLET PLUS - lancet devices	3						BD INSULIN SYRINGE/1ML/29 - insulin syringe/needle u-100 1 ml 29 x 1/2"	2					
B-D INSULIN SYRINGE MICRO - insulin syringe/needle u-100 1 ml 28 x 1/2"	2						BD MICROTAINER LANCETS - lancets	3					
B-D INSULIN SYRINGE ULTRA - insulin syringe/needle u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 30 x 1/2", u-100 0.3 ml 31 x 5/16"	2						BD PEN NEEDLE/MICRO/ULTRA - insulin pen needle 32 g x 6 mm (1/4" or 15/64")	2					
BD LO-DOSE INSULIN SYRIN - insulin syringe/needle u-100 1/2 ml 28 x 1/2"	2						BD PEN NEEDLE/MINI/ULTRA- - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2					
BD AUTOSHIELD DUO 30G X 5 - insulin pen needle 30 g x 5 mm (1/5" or 3/16")	2												
BD INSULIN SYRINGE LUER-L - insulin syringe (disp) u-100 1 ml	2												
BD INSULIN SYRINGE MICROF - insulin syringe/needle u-100 0.3 ml 28 x 1/2", u-100 1/2 ml 28 x 1/2", u-100 1 ml 27 x 5/8", u-100 1 ml 28 x 1/2"	2												
BD INSULIN SYRINGE SAFETY - insulin syringe/needle u-100 1 ml 29 x 1/2"	2												

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
BD PEN NEEDLE/NANO 2ND GE - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						(1/5" or 3/16"), x 6 mm (1/4" or 15/64")						
BD PEN NEEDLE/NANO/ULTRA - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						CAREONE ADVANCED LANCING - lancet devices	3					
BD PEN NEEDLE/ORIGINAL/UL - insulin pen needle 29 g x 12.7 mm (1/2")	2						CAREONE INSULIN SYRINGES/ - insulin syringe/needle u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2					
BD PEN NEEDLE/SHORT/ULTRA - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2						CAREONE LANCET SUPER THIN - lancets	3					
BD SAFETY-GLIDE INSULIN S - insulin syringe/needle u-100 1/2 ml 29 x 1/2"	2						CAREONE LANCET THIN - lancets	3					
BD SAFETYGLIDE INSULIN SY - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 0.3 ml 31 x 15/64", u-100 0.3 ml 31 x 5/16", u-100 1/2 ml 31 x 15/64", u-100 1 ml 31 x 15/64"	2						CAREONE LANCET ULTRA THIN - lancets	3					
BD VEO INSULIN SYRINGE UL - insulin syringe/needle u-100 0.3 ml 31 x 15/64", u-100 1/2 ml 31 x 15/64", u-100 1 ml 31 x 15/64"	2						CAREONE UNIFINE PENTIPS P - insulin pen needle 29 g x 12 mm (1/2")	2					
CARDIOCOM LANCING DEVICE - lancet devices	3						CAREONE UNIFINE PENTIPS P - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2					
CAREFINE PEN NEEDLE 32GX4 - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						CAREONE UNIFINE PENTIPS P - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
CAREFINE PEN NEEDLES 29GX - insulin pen needle 29 g x 12 mm (1/2")	2						CAREONE UNIFINE PENTIPS P - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2					
CAREFINE PEN NEEDLES 30GX - insulin pen needle 30 g x 8 mm (1/3" or 5/16")	2						CARESENS LANCETS - lancets	3					
CAREFINE PEN NEEDLES 31GX - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2						CARETOUCH INSULIN SYRINGE - insulin syringe/needle u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 30 x 5/16", u-100 1 ml 28 x 5/16", u-100 1 ml 29 x 5/16", u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2					
CAREFINE PEN NEEDLES 32GX - insulin pen needle 32 g x 5 mm	2						CARETOUCH LANCING DEVICE - lancet devices	3					
							CARETOUCH PEN NEEDLE 29GX - insulin pen needle 29 g x 12 mm (1/2")	2					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
CARETOUCH PEN NEEDLE 33GX - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2						(1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")						
CARETOUCH PEN NEEDLES 31 - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2						CLEVER CHOICE COMFORT EZ - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2					
CARETOUCH PEN NEEDLES 31G - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2						CLEVER CHOICE COMFORT EZ - insulin pen needle 33 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2					
CARETOUCH PEN NEEDLES 32G - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16")	2						CLEVER CHOICE COMFORT EZ - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 0.3 ml 31 x 15/64", u-100 1 ml 27 x 1/2", u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16", u-100 1/2 ml 31 x 15/64", u-100 1 ml 31 x 15/64"	2					
CARETOUCH SAFETY LANCETS/ - lancets	3						CLEVER CHOICE COMFORT EZ - lancets	3					
CARETOUCH TWIST LANCETS M - lancets	3						COAGUCHEK LANCETS - lancets	3					
CARETOUCH TWIST LANCETS 2 - lancets	3						COMFORT ASSURED LANCETS M - lancets	3					
CARETOUCH TWIST LANCETS 3 - lancets	3						COMFORT ASSURED LANCETS S - lancets	3					
CAYA - diaphragm arc-spring	A				•		COMFORT EZ INSULIN SYRING - insulin syringe/needle u-100 1/2 ml 31 x 5/16", u-100 1 ml 31 x 5/16"	2					
CEQUR SIMPLICITY INSERTER - injection device for insulin - accessories	3						COMFORT EZ MICRO/32G X 4M - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
CEQUR SIMPLICITY 2U - injection device for insulin	3						COMFORT EZ PRO SAFETY PEN - insulin pen needle 30 g x 8 mm (1/3" or 5/16")	2					
CHOSEN LANCETS 30G - lancets	3												
CHOSEN LANCING DEVICE - lancet devices	3												
CHOSEN SAFETY LANCETS 28G - lancets	3												
CLEANLET LANCETS 28G - lancets	3												
CLEVER CHEK LANCETS ULTRA - lancets	3												
CLEVER CHOICE COMFORT EZ - insulin pen needle 29 g x 12 mm (1/2")	2												
CLEVER CHOICE COMFORT EZ - insulin pen needle 31 g x 5 mm	2												

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
COMFORT EZ PRO SAFETY PEN - insulin pen needle 31 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16")	2						CONTOUR NEXT EZ BLOOD GLU - blood glucose monitoring kit w/ device	2					
COMFORT EZ SHORT/31G X 8M - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2						CONTOUR NEXT GEN BLOOD GL - blood glucose monitoring kit w/ device	2					
COMFORT EZ/31G X 5MM - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2						CONTOUR NEXT LINK BLOOD G - blood glucose monitoring kit w/ device	2					
COMFORT EZ/31G X 6MM - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2						CONTOUR NEXT LINK WIRELES - blood glucose monitoring kit w/ device	2					
COMFORT LANCETS - lancets	3						CONTOUR NEXT ONE BLOOD GL - blood glucose monitoring kit w/ device	2					
COMFORT TOUCH LANCETS ULT - lancets	3						CONTOUR NEXT ONE BLOOD GL - blood glucose monitoring kit	2					
COMFORT TOUCH PEN NEEDLES - insulin pen needle 31 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2						CONTOUR PLUS BLUE BLOOD G - blood glucose monitoring kit w/ device	2					
COMFORT TOUCH PEN NEEDLES - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2						CVS LANCETS ORIGINAL - lancets	3					
COMFORT TOUCH PEN NEEDLES - insulin pen needle 33 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2						CVS LANCETS THIN 26G - lancets	3					
COMFORT TOUCH PLUS SAFETY - lancets	3						CVS LANCING DEVICE - lancet devices	3					
COMFORT TOUCH TWIST LANCE - lancets	3						CVS ULTRA THIN LANCETS - lancets	3					
CONDOMS - MALE - VARIOUS	A				•		DEXCOM G6 RECEIVER - continuous glucose system receiver	2	•	•			
CONTOUR BLOOD GLUCOSE MON - blood glucose monitoring devices	2	•					DEXCOM G6 SENSOR - continuous glucose system sensor	2	•	•			
CONTOUR NEXT BLOOD GLUCOS - blood glucose monitoring kit w/ device	2						DEXCOM G6 TRANSMITTER - continuous glucose system transmitter	2	•	•			
							DEXCOM G7 RECEIVER - continuous glucose system receiver	2	•	•			
							DEXCOM G7 SENSOR - continuous glucose system sensor	2	•	•			
							DEXCOM G7 15 DAY SENSOR - continuous glucose system sensor	2	•	•			
							DIATHRIVE LANCETS - lancets	3					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
DIATHRIVE LANCETS ULTRA T - lancets	3						u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16", u-100 1/2 ml 31 x 15/64", u-100 1 ml 31 x 15/64"						
DIATHRIVE LANCING DEVICE - lancet devices	3												
DIATHRIVE PEN NEEDLE/31 G - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2						DROPLET INSULIN SYRINGE/0 - insulin syringe/needle u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 0.3 ml 31 x 5/16"	2					
DIATHRIVE PEN NEEDLE/31G - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2						DROPLET INSULIN SYRINGE/1 - insulin syringe/needle u-100 1 ml 30 x 1/2"	2					
DIATHRIVE PEN NEEDLE/32G - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						DROPLET LANCETS ULTRA THI - lancets	3					
DROPLET GENTEEL LANCING D - lancet devices	3						DROPLET LANCING DEVICE - lancet devices	3					
DROPLET INSULIN SYRINGE U - insulin syringe/needle u-100 0.3 ml 30 x 5/16", u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 0.3 ml 31 x 15/64", u-100 0.3 ml 30 x 15/64", u-100 0.5 ml 30 x 15/64", u-100 1 ml 30 x 15/64", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16", u-100 1 ml 31 x 15/64"	2						DROPLET MICRON 34G X 9/64 - insulin pen needle 34 g x 3.5 mm (9/64")	2					
DROPLET INSULIN SYRINGE 0 - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 0.3 ml 31 x 15/64", u-100 0.3 ml 31 x 5/16", u-100 1/2 ml 31 x 15/64"	2						DROPLET PEN NEEDLE/MICRON - insulin pen needle 34 g x 3.5 mm (9/64")	2					
DROPLET INSULIN SYRINGE 1 - insulin syringe/needle u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16", u-100 1 ml 31 x 15/64"	2						DROPLET PEN NEEDLES 29G X - insulin pen needle 29 g x 12 mm (1/2")	2					
DROPLET INSULIN SYRINGE/U - insulin syringe/needle u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 0.3 ml 31 x 15/64",	2						DROPLET PEN NEEDLES 29GX1 - insulin pen needle 29 g x 10 mm, x 12 mm (1/2")	2					
							DROPLET PEN NEEDLES 30G X - insulin pen needle 30 g x 8 mm (1/3" or 5/16")	2					
							DROPLET PEN NEEDLES 31G X - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2					
							DROPLET PEN NEEDLES 31GX5 - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2					
							DROPLET PEN NEEDLES 31GX6 - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2					
							DROPLET PEN NEEDLES 31GX8 - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
DROPLET PEN NEEDLES 32G X - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2						DRUG MART UNIFINE PENTIPS - insulin pen needle 29 g x 12 mm (1/2")	2					
DROPLET PEN NEEDLES 32GX4 - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						DRUG MART UNIFINE PENTIPS - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2					
DROPLET PEN NEEDLES 32GX5 - insulin pen needle 32 g x 5 mm (1/5" or 3/16")	2						DRUG MART UNIFINE PENTIPS - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
DROPLET PEN NEEDLES 32GX6 - insulin pen needle 32 g x 6 mm (1/4" or 15/64")	2						DRUG MART UNILET LANCETS - lancets	3					
DROPLET PEN NEEDLES 32GX8 - insulin pen needle 32 g x 8 mm (1/3" or 5/16")	2						DRUG MART UNILET MICRO TH - lancets	3					
DROPLET PERSONAL LANCETS - lancets	3						DUANE READE LANCET ALTERN - lancets	3					
DROPSAFE ACTI-LANCE SAFTE - lancets	3						DUANE READE LANCET SUPER - lancets	3					
DROPSAFE AUTOPROTECT DUO/ - insulin pen needle 31 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2						DUANE READE LANCET ULTRA - lancets	3					
DROPSAFE INSULIN SAFETY S - insulin syringe/needle u-100 1/2 ml 31 x 5/16", u-100 0.3 ml 31 x 15/64", u-100 1 ml 29 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16", u-100 1/2 ml 31 x 15/64", u-100 1 ml 31 x 15/64"	2						DUANE READE UNIFINE PENTI - insulin pen needle 29 g x 12 mm (1/2")	2					
DROPSAFE MEDLANCE PLUS SA - lancets	3						DUANE READE UNIFINE PENTI - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2					
DROPSAFE SAFETY PEN NEEDL - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2						E-Z JECT LANCETS SUPER TH - lancets	3					
DROPSAFE SAFTEY PEN NEEDL - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2						EASY COMFORT INSULIN SYRI - insulin syringe/needle u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 29 x 5/16", u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 0.5 ml 32 x 5/16", u-100 1 ml 32 x 5/16", u-100 1 ml 29 x 5/16", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2					
DRUG MART ON-THE-GO LANCE - lancets	3						EASY COMFORT LANCETS - lancets	3					
							EASY COMFORT LANCETS TWIS - lancets	3					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
EASY COMFORT LANCETS 30G - lancets	3						u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 1 ml 27 x 1/2", u-100 1 ml 27 x 5/8", u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"						
EASY COMFORT LANCETS 30G/ - lancets	3						EASY TOUCH LANCETS 21G/PR - lancets	3					
EASY COMFORT PEN NEEDLES - insulin pen needle 29 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16")	2						EASY TOUCH LANCETS 23G/PR - lancets	3					
EASY COMFORT PEN NEEDLES - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2						EASY TOUCH LANCETS 26G/PR - lancets	3					
EASY COMFORT PEN NEEDLES - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						EASY TOUCH LANCETS 26G/PU - lancets	3					
EASY COMFORT PEN NEEDLES - insulin pen needle 33 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2						EASY TOUCH LANCETS 28G/PR - lancets	3					
EASY COMFORT SAFETY PEN N - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2						EASY TOUCH LANCETS 28G/PU - lancets	3					
EASY COMFORT SAFETY PEN N - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						EASY TOUCH LANCETS 28G/TW - lancets	3					
EASY GLIDE PEN NEEDLES 33 - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2						EASY TOUCH LANCETS 30G/BU - lancets	3					
EASY MINI EJECT LANCING D - lancet devices	3						EASY TOUCH LANCETS 30G/PR - lancets	3					
EASY MINI LANCING DEVICE - lancet devices	3						EASY TOUCH LANCETS 30G/PU - lancets	3					
EASY TOUCH FLIPLOCK SAFET - insulin syringe/needle u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16"	2						EASY TOUCH LANCETS 30G/TW - lancets	3					
EASY TOUCH INSULIN SYRING - insulin syringe/needle u-100 0.3 ml 30 x 5/16", u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 27 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2",	2						EASY TOUCH LANCETS 32G/PR - lancets	3					
							EASY TOUCH LANCETS 32G/PU - lancets	3					
							EASY TOUCH LANCETS 32G/TW - lancets	3					
							EASY TOUCH LANCETS 33G/TW - lancets	3					
							EASY TOUCH LANCING DEVICE - lancet devices	3					
							EASY TOUCH PEN NEEDLE 30 - insulin pen needle 30 g x 8 mm (1/3" or 5/16")	2					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
EASY TOUCH PEN NEEDLE/30 - insulin pen needle 30 g x 5 mm (1/5" or 3/16")	2						5/16", u-100 1/2 ml 30 x 1/2", u-100 1 ml 31 x 5/16"						
EASY TOUCH PEN NEEDLES 29 - insulin pen needle 29 g x 12 mm (1/2")	2						EMBECTA INSULIN SYRINGE U - insulin syringe/needle u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2					
EASY TOUCH PEN NEEDLES 31 - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2						EMBECTA INSULIN SYRINGE/ - insulin syringe/needle u-100 0.3 ml 31 x 5/16"	2					
EASY TOUCH PEN NEEDLES 32 - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2						EMBECTA INSULIN SYRINGE/U - insulin syringe/needle u-100 0.3 ml 31 x 15/64", u-100 1 ml 27 x 5/8", u-100 1 ml 30 x 1/2", u-100 1/2 ml 31 x 15/64", u-100 1 ml 31 x 15/64", u-500 0.5 ml 31g x 6mm (15/64")	2					
EASY TOUCH PEN NEEDLES/31 - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2						EMBECTA INSULIN SYRINGE/0 - insulin syringe/needle u-100 1/2 ml 28 x 1/2"	2					
EASY TOUCH SAFETY LANCETS - lancets	3						EMBECTA INSULIN SYRINGE/1 - insulin syringe/needle u-100 1 ml 28 x 1/2"	2					
EASY TOUCH SAFETY PEN NEE - insulin pen needle 29 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2						EMBECTA INSULIN SYRINGE/2 - insulin syringe/needle u-100 1 ml 28 x 1/2"	2					
EASY TOUCH SAFETY PEN NEE - insulin pen needle 30 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2						EMBECTA PEN NEEDLE/NANO 2 - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
EASY TOUCH SHEATHLOCK SAF - insulin syringe/needle u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16"	2						EMBECTA PEN NEEDLE/NANO/3 - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
EASY TOUCH 32GX5MM - insulin pen needle 32 g x 5 mm (1/5" or 3/16")	2						EMBECTA PEN NEEDLE/ULTRA- - insulin pen needle 29 g x 12.7 mm (1/2")	2					
EASY TOUCH 32GX6MM - insulin pen needle 32 g x 6 mm (1/4" or 15/64")	2						EMBECTA PEN NEEDLE/ULTRA- - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2					
EMBECTA AUTOSHIELD DUO 30 - insulin pen needle 30 g x 5 mm (1/5" or 3/16")	2						EMBECTA PEN NEEDLE/ULTRA- - insulin pen needle 32 g x 6 mm (1/4" or 15/64")	2					
EMBECTA INSULIN SYRINGE - insulin syringe/needle u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 31 x	2												

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
EMBECTA SAFETY INSULIN SY - insulin syringe/needle u-100 1/2 ml 31 x 15/64"	2						FIFTY50 PEN NEEDLES/32GX4 - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
EMBRACE LANCETS ULTRA THI - lancets	3						FIFTY50 PEN NEEDLES/32GX6 - insulin pen needle 32 g x 6 mm (1/4" or 15/64")	2					
EMBRACE LANCING DEVICE WI - lancet devices	3						FIFTY50 SAFETY SEAL LANCE - lancets	3					
EMBRACE PEN NEEDLES/29G X - insulin pen needle 29 g x 12 mm (1/2")	2						FIFTY50 SUPERIOR COMFORT - insulin syringe/needle u-100 1/2 ml 31 x 5/16", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2					
EMBRACE PEN NEEDLES/30G X - insulin pen needle 30 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2						FIFTY50 UNILET LANCETS 33 - lancets	3					
EMBRACE PEN NEEDLES/31G X - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2						FINGERSTIX LANCETS - lancets	2					
EMBRACE PEN NEEDLES/32G X - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						FONDCIRCLE LANCING DEVICE - lancet devices	3					
EMBRACE PRESSURE ACTIVATE - lancets	3						FONDCIRCLE SINGLE USE LAN - lancets	3					
EQL SHORT PEN NEEDLES 31G - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2						FORA LANCETS - lancets	3					
EQL ULTRA SHORT PEN NEEDL - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2						FORA LANCING DEVICE - lancet devices	3					
FC2 FEMALE CONDOM - condoms - female	A					•	FORA LANCING DEVICE/CLEAR - lancet devices	3					
FEMCAP - cervical cap 22 mm, 26 mm, 30 mm	A					•	FREESTYLE FREEDOM LITE - blood glucose monitoring kit w/ device	2					
FIFTY50 PEN NEEDLES 31G X - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2						FREESTYLE LANCETS - lancets	2					
FIFTY50 PEN NEEDLES 31GX5 - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2						FREESTYLE LITE BLOOD GLUC - blood glucose monitoring devices	2	•				
FIFTY50 PEN NEEDLES/31GX8 - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2						FREESTYLE LITE BLOOD GLUC - blood glucose monitoring kit w/ device	2					
							FREESTYLE PRECISION NEO B - blood glucose monitoring kit w/ device	2	•				
							FREESTYLE UNISTICK II LAN - lancets	2					
							GENTEEL BUTTERFLY TOUCH L - lancets	3					
							GENTEEL PLUS LANCING DEVI - lancet devices	3					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
GLOBAL EASE INJECT PEN NE - insulin pen needle 29 g x 12 mm (1/2")	2						GLUCOCOM LANCETS 33G - lancets	3					
GLOBAL EASE INJECT PEN NE - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2						GLUCOPRO INSULIN SYRINGE/ - insulin syringe/needle u-100 0.3 ml 30 x 5/16", u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2					
GLOBAL EASE INJECT PEN NE - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						GNP INSULIN SYRINGE/0.5ML - insulin syringe/needle u-100 1/2 ml 31 x 5/16"	2					
GLOBAL EASY GLIDE INSULIN - insulin syringe/needle u-100 0.3 ml 31 x 15/64", u-100 0.3 ml 31 x 5/16", u-100 1/2 ml 31 x 15/64", u-100 1 ml 31 x 15/64"	2						GNP INSULIN SYRINGE/1ML/3 - insulin syringe/needle u-100 1 ml 31 x 5/16"	2					
GLOBAL EASY GLIDE PEN NEE - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						GNP INSULIN SYRINGES/0.3M - insulin syringe/needle u-100 0.3 ml 30 x 5/16", u-100 0.3 ml 31 x 5/16"	2					
GLOBAL INJECT EASE INSULI - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2						GNP INSULIN SYRINGES/1/2M - insulin syringe/needle u-100 1/2 ml 29 x 1/2"	2					
GLOBAL INJECT EASE LANCET - lancets	3						GNP INSULIN SYRINGES/1ML/ - insulin syringe/needle u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16"	2					
GLOBAL INSULIN SYRINGE/U- - insulin syringe/needle u-100 0.3 ml 30 x 1/2"	2						GNP LANCING SYSTEM DEVICE - lancet devices	3					
GLOBAL INSULIN SYRINGES/U - insulin syringe/needle u-100 0.3 ml 30 x 5/16"	2						GNP PEN NEEDLES 31GX5MM - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2					
GLOBAL LANCING DEVICE - lancet devices	3						GNP PEN NEEDLES 31GX8MM - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2					
GLUCOCOM LANCETS 28G - lancets	3						GNP PEN NEEDLES 32GX4MM - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
GLUCOCOM LANCETS 30G - lancets	3						GNP PEN NEEDLES 32GX6MM - insulin pen needle 32 g x 6 mm (1/4" or 15/64")	2					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
GNP SIMPLI MICRO PEN NEED - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						(1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")						
GNP STERILE LANCETS 28G - lancets	3						H-E-B IN CONTROL UNIFINE - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
GNP STERILE LANCETS 30G - lancets	3						H-E-B IN CONTROL UNIFINE - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2					
GNP STERILE LANCETS 33G - lancets	3						H-E-B INCONTROL ADVANCED - lancet devices	3					
GNP ULTICARE PEN NEEDLES - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2						H-E-B INCONTROL LANCETS M - lancets	3					
GNP ULTICARE PEN NEEDLES/ - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 6 mm (1/4" or 15/64")	2						H-E-B INCONTROL LANCETS S - lancets	3					
GNP ULTIGUARD SAFEPACK/MI - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2						H-E-B INCONTROL LANCETS U - lancets	3					
GNP ULTIGUARD SAFEPACK/MI - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 6 mm (1/4" or 15/64")	2						H-E-B INCONTROL PEN NEEDL - insulin pen needle 29 g x 12 mm (1/2")	2					
GNP ULTIGUARD SAFEPACK/SH - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2						HAEMOLANCE - lancets	3					
GNP ULTRA COMFORT INSULIN - insulin syringe/needle u-100 1 ml 28 x 1/2"	2						HAEMOLANCE LOW FLOW LANCE - lancets	3					
GOJJI LANCING DEVICE/CLEA - lancet devices	3						HAEMOLANCE PLUS - lancets	3					
GOJJI STERILE LANCETS 30G - lancets	3						HAEMOLANCE PLUS HIGH FLOW - lancets	3					
H-E-B IN CONTROL PEN NEED - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2						HAEMOLANCE PLUS LOW FLOW - lancets	3					
H-E-B IN CONTROL PEN NEED - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						HAEMOLANCE PLUS MAX FLOW - lancets	3					
H-E-B IN CONTROL UNIFINE - insulin pen needle 31 g x 5 mm	2						HAEMOLANCE PLUS PEDIATRIC - lancets	3					
							HEALTHWISE INSULIN SYRING - insulin syringe/needle u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 30 x 5/16", u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2					
							HEALTHWISE MICRON PEN NEE - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
HEALTHWISE MINI PEN NEEDL - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2						INSULIN SYRINGE/U-100/0.3 - insulin syringe/needle u-100 0.3 ml 29 x 1/2"	2					
HEALTHWISE SHORT PEN NEED - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2						INSULIN SYRINGE/U-100/0.5 - insulin syringe/needle u-100 1/2 ml 29 x 1/2"	2					
HM ULTICARE INSULIN SYRIN - insulin syringe/needle u-100 1 ml 30 x 1/2", u-100 0.3 ml 31 x 5/16"	2						INSULIN SYRINGE/U-100/1ML - insulin syringe/needle u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16"	2					
HM ULTICARE MINI PEN NEED - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2						INSULIN SYRINGE/0.3ML/30G - insulin syringe/needle u-100 0.3 ml 30 x 5/16"	2					
HM ULTICARE SHORT PEN NEE - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2						INSULIN SYRINGE/0.3ML/31G - insulin syringe/needle u-100 0.3 ml 31 x 5/16"	2					
HY-VEE LANCETS - lancets	3						INSULIN SYRINGE/0.5ML/28G - insulin syringe/needle u-100 1/2 ml 28 x 1/2"	2					
HY-VEE THIN LANCETS - lancets	3						INSULIN SYRINGE/0.5ML/30G - insulin syringe/needle u-100 1/2 ml 30 x 5/16"	2					
IHEALTH LANCING DEVICE - lancet devices	3						INSULIN SYRINGE/0.5ML/31G - insulin syringe/needle u-100 1/2 ml 31 x 5/16"	2					
IN TOUCH LANCING DEVICE - lancet devices	3						INSULIN SYRINGE/1ML/29G X - insulin syringe/needle u-100 1 ml 29 x 1/2"	2					
IN TOUCH STERILE LANCETS - lancets	3						INSULIN SYRINGE/1ML/30G X - insulin syringe/needle u-100 1 ml 30 x 5/16"	2					
INCONTROL ULTICARE MINI P - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2						INSULIN SYRINGES/U-100/0. - insulin syringe/needle u-100 1/2 ml 27 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16"	2					
INCONTROL ULTICARE MINI P - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						INSULIN SYRINGES/U-100/1M - insulin syringe/needle u-100 1 ml 27 x 1/2", u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16"	2					
INSULIN SYRINGE/NEEDLE 0. - insulin syringe/needle u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 0.3 ml 31 x 5/16"	2						INSUPEN 29G X 12MM - insulin pen needle 29 g x 12 mm (1/2")	2					
INSULIN SYRINGE/NEEDLE 1M - insulin syringe/needle u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16"	2												

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
INSUPEN 31G X 5MM - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2						LANCETS SUPER THIN 28G - lancets	3					
INSUPEN 31G X 8MM - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2						LANCETS THIN - lancets	3					
INSUPEN 32G X 4MM - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						LANCETS ULTRA THIN 30G - lancets	3					
INSUPEN 33GX4MM - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2						LANCETS 28G THIN - lancets	3					
INSUPEN32G EXTR3ME/32G X - insulin pen needle 32 g x 6 mm (1/4" or 15/64")	2						LANCETS 30G - lancets	3					
KINNEY LANCETS - lancets	3						LANCETS 30G TWIST TOP - lancets	3					
KINNEY THIN LANCETS - lancets	3						LANCETS 30G/TWIST TOP - lancets	3					
KINRAY INSULIN SYRINGE/0. - insulin syringe/needle u-100 1/2 ml 29 x 1/2"	2						LANCETS 33G EXTRA FINE - lancets	3					
KROGER AUTOLET LANCING DE - lancet devices	3						LANCETS 33G UNIVERSAL DES - lancets	3					
KROGER HEALTHPRO TWIST LA - lancets	3						LANCING DEVICE - lancet devices	3					
KROGER LANCETS - lancets	3						LANZO - lancet devices	3					
KROGER LANCETS SUPER THIN - lancets	3						LEADER ADVANCED LANCING D - lancet devices	3					
KROGER LANCETS THIN - lancets	3						LEADER INSULIN SYRINGE/0. - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16"	2					
KROGER PEN NEEDLES/31G X - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2						LEADER INSULIN SYRINGE/1M - insulin syringe/needle u-100 1 ml 28 x 1/2"	2					
KROGER PEN NEEDLES/32G X - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						LEADER LANCETS COLORED - lancets	3					
KROGER PEN NEEDLES/33G X - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2						LEADER THIN LANCETS - lancets	3					
LANCET DEVICE ADJUSTABLE - lancet devices	3						LEADER UNIFINE PENTIPS PL - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2					
LANCET DEVICE WITH EJECTO - lancet devices	3						LEADER UNIFINE PENTIPS/MI - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2					
LANCETS - lancets	3						LEADER UNIFINE PENTIPS/NA - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
LANCETS MICRO THIN 33G - lancets	3												

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
LEADER UNIFINE PENTIPS/PL - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						LIVE BETTER PEN NEEDLES 2 - insulin pen needle 29 g x 12 mm (1/2")	2					
LIBERTY MEDICAL LANCETS 3 - lancets	3						LIVE BETTER PEN NEEDLES 3 - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2					
LITE TOUCH LANCETS - lancets	3						MAGELLAN INSULIN SAFETY S - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16"	2					
LITE TOUCH LANCING PEN - lancet devices	3						MARATHON MEDICAL PENTIPS - insulin pen needle 29 g x 12 mm (1/2")	2					
LITETOUCH INSULIN PEN NEE - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						MARATHON MEDICAL PENTIPS - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2					
LITETOUCH INSULIN SYRINGE - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2						MARATHON MEDICAL PENTIPS - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
LITETOUCH LANCETS MICRO T - lancets	3						MAXI-COMFORT INSULIN SYRI - insulin syringe/needle u-100 1/2 ml 28 x 1/2", u-100 1 ml 28 x 1/2"	2					
LITETOUCH PEN NEEDLES 29G - insulin pen needle 29 g x 12.7 mm (1/2")	2						MAXI-COMFORT SAFETY PEN N - insulin pen needle 29 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2					
LITETOUCH PEN NEEDLES 31G - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2						MAXICOMFORT II PEN NEEDLE - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2					
LITETOUCH PEN NEEDLES/31 - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2						MAXICOMFORT INSULIN SYRIN - insulin syringe/needle u-100 1/2 ml 27 x 1/2", u-100 1 ml 27 x 1/2"	2					
LITETOUCH PEN NEEDLES/31G - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2						MEDIC INSULIN SYRINGE/0.3 - insulin syringe/needle u-100 0.3 ml 30 x 5/16"	2					
LIVE BETTER ADVANCED LANC - lancet devices	3						MEDIC INSULIN SYRINGE/0.5 - insulin syringe/needle u-100 1/2 ml 30 x 5/16"	2					
LIVE BETTER LANCET SUPER - lancets	3						MEDICHOICE PRE-SET SAFETY - lancets	3					
LIVE BETTER LANCET ULTRA - lancets	3												

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
MEDICHOICE SAFETY LANCET - lancets	3						MICRODOT PEN NEEDLE/31G X - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2					
MEDICINE SHOPPE LANCETS - lancets	3						MICRODOT PEN NEEDLE/32G X - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
MEDICINE SHOPPE LANCETS T - lancets	3						MICRODOT PEN NEEDLE/33G X - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2					
MEDICINE SHOPPE PEN NEEDL - insulin pen needle 29 g x 12 mm (1/2")	2						MICROLET LANCETS - lancets	2					
MEDICINE SHOPPE PEN NEEDL - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2						MICROLET NEXT - lancet devices	2					
MEDLANCE PLUS EXTRA LANCE - lancets	3						MICROLET NEXT LANCETS - lancets	2					
MEDLANCE PLUS LANCETS LIT - lancets	3						MINI LANCING DEVICE - lancet devices	3					
MEDLANCE PLUS LITE LANCET - lancets	3						MM INSULIN SYRINGE/U-100/ - insulin syringe/needle u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 30 x 5/16", u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2					
MEDLANCE PLUS SPECIAL LAN - lancets	3						MM LANCING DEVICE - lancet devices	3					
MEDLANCE PLUS SUPERLITE 3 - lancets	3						MM PEN NEEDLES 31G X 1/4" - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2					
MEDLANCE PLUS UNIVERSAL L - lancets	3						MM PEN NEEDLES 31G X 3/16 - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2					
MEDLANCE PLUS/LITE 25G - lancets	3						MM PEN NEEDLES 31G X 5/16 - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2					
MEIJER COLOR LANCETS UNIV - lancets	3						MM PEN NEEDLES 32G X 5/32 - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
MEIJER LANCETS - lancets	3						MM TWIST LANCETS - lancets	3					
MEIJER LANCETS THIN - lancets	3						MOBI CONNECT BLOOD GLUCOS - lancet devices	3					
MEIJER LANCETS UNIVERSAL - lancets	3						MOBI CONNECT BLOOD GLUCOS - lancets	3					
MEIJER PEN NEEDLES 29G X - insulin pen needle 29 g x 12 mm (1/2")	2						MOBILE LANCETS 30G - lancets	3					
MEIJER PEN NEEDLES 31G X - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2												
MEIJER SUPER THIN LANCETS - lancets	3												

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
MONOJECT INSULIN SYRINGE - insulin syringe (disp) u-100 1 ml	2						NOVA SUREFLEX LANCING DEV - lancet devices	3					
MONOJECT INSULIN SYRINGE/ - insulin syringe (disp) u-100 1 ml	2						NOVOFINE PEN NEEDLE 32G X - insulin pen needle 32 g x 6 mm (1/4" or 15/64")	2					
MONOJECT INSULIN SYRINGE/ - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1 ml 25 x 5/8", u-100 1 ml 27 x 1/2", u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16"	2						NOVOFINE PLUS PEN NEEDLE - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
MONOJECT ULTRA COMFORT IN - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 0.3 ml 31 x 5/16"	2						NOVOPEN ECHO - injection device for insulin	2					
MONOJECT ULTRA COMFORT IN - insulin syringe/needle u-100 1/2 ml 28 x 1/2"	1						OMNIFLEX DIAPHRAGM - diaphragms	A				•	
MONOLET LANCETS - lancets	3						OMNIPOD DASH INTRO KIT (G - insulin infusion disposable pump kit	3	•	•			
MONOLET OPD LANCETS - lancets	3						OMNIPOD DASH PODS (GEN 4) - insulin infusion disposable pump reservoir	3	•	•			
MONOLETTOR SAFETY LANCETS - lancets	3						OMNIPOD 5 DEXCOM G7G6 INT - insulin infusion disposable pump kit	2	•	•			
MULTI-LANCET DEVICE - lancet devices	3						OMNIPOD 5 DEXCOM G7G6 POD - insulin infusion disposable pump reservoir	2	•	•			
MYGLUCOHEALTH MGH SOFTLAN - lancets	3						OMNIPOD 5 LIBRE INTRO KIT - insulin infusion disposable pump kit	2	•	•			
NORDIPEN 5 INJECTION DEVI - injection device - misc	3						OMNIPOD 5 LIBRE PODS - insulin infusion disposable pump reservoir	2	•	•			
NOVA SAFETY LANCETS 23G - lancets	3						PC UNIFINE PENTIPS 29G X - insulin pen needle 29 g x 12 mm (1/2")	2					
NOVA SAFETY LANCETS 28G - lancets	3						PC UNIFINE PENTIPS 31G X - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2					
NOVA SUREFLEX LANCETS - lancets	3						PEN NEEDLE/5-BEVEL TIP/31 - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2					
							PEN NEEDLE/5-BEVEL TIP/32 - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
PEN NEEDLES - insulin pen needle 30 g x 8 mm (1/3" or 5/16")	2						PEN NEEDLES 32G X 6MM - insulin pen needle 32 g x 6 mm (1/4" or 15/64")	2					
PEN NEEDLES 29GX12MM - insulin pen needle 29 g x 12 mm (1/2")	2						PEN NEEDLES 32GX4MM - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
PEN NEEDLES 30GX5MM - insulin pen needle 30 g x 5 mm (1/5" or 3/16")	2						PEN NEEDLES 33G X 5/32" - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2					
PEN NEEDLES 30GX8MM - insulin pen needle 30 g x 8 mm (1/3" or 5/16")	2						PEN NEEDLES/29G X 1/2" - insulin pen needle 29 g x 12 mm (1/2")	2					
PEN NEEDLES 31G X 3/16" - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2						PEN NEEDLES/31G X 1/4" - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2					
PEN NEEDLES 31G X 5MM - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2						PEN NEEDLES/31G X 3/16" - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2					
PEN NEEDLES 31G X 6MM - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2						PEN NEEDLES/31G X 5/16" - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2					
PEN NEEDLES 31G X 8MM - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2						PEN NEEDLES/31G X 6MM - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2					
PEN NEEDLES 31GX5/16" - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2						PEN NEEDLES/32G X 5/32" - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
PEN NEEDLES 31GX5MM - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2						PENTIPS GENERIC PEN NEEDL - insulin pen needle 29 g x 12 mm (1/2")	2					
PEN NEEDLES 31GX6MM (1/4" - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2						PENTIPS GENERIC PEN NEEDL - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2					
PEN NEEDLES 31GX8MM - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2						PENTIPS GENERIC PEN NEEDL - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 6 mm (1/4" or 15/64")	2					
PEN NEEDLES 31GX8MM (5/16 - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2						PENTIPS 29G X 12MM - insulin pen needle 29 g x 12 mm (1/2")	2					
PEN NEEDLES 32G X 4MM - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						PENTIPS 29GX12MM - insulin pen needle 29 g x 12 mm (1/2")	2					
PEN NEEDLES 32G X 5MM - insulin pen needle 32 g x 5 mm (1/5" or 3/16")	2						PENTIPS 31G X 5MM - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
PENTIPS 31G X 8MM - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2						(1/4" or 15/64"), x 8 mm (1/3" or 5/16")						
PENTIPS 31GX5MM - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2						PREVENT SAFETY PEN NEEDLE - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2					
PENTIPS 31GX6MM - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2						PRO COMFORT INSULIN SYRIN - insulin syringe/needle u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16"	2					
PENTIPS 31GX8MM - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2						PRO COMFORT LANCETS 30G - lancets	3					
PENTIPS 32G X 4MM - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						PRO COMFORT LANCETS 31G - lancets	3					
PENTIPS 32GX4MM - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						PRO COMFORT PEN NEEDLE/32 - insulin pen needle 32 g x 8 mm (1/3" or 5/16")	2					
PERFECT LANCETS 30G - lancets	3						PRO COMFORT PEN NEEDLES/ - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2					
PERFECT POINT SAFETY LANC - lancets	3						PRO COMFORT SAFETY LANCET - lancets	3					
PERFECT PRESSURE ACTIVATE - lancets	3						PRODIGY INSULIN SYRINGE/U- - insulin syringe/needle u-100 0.3 ml 31 x 5/16"	2					
PHARMACIST CHOICE SELECT - lancets	3						PRODIGY INSULIN SYRINGE/1 - insulin syringe/needle u-100 1/2 ml 31 x 5/16", u-100 1 ml 28 x 1/2"	2					
PHARMACIST CHOICE ULTRA T - lancets	3						PRODIGY LANCING DEVICE - lancet devices	3					
PIP LANCETS/28G - lancets	3						PRODIGY PRESSURE ACTIVATE - lancets	3					
PIP LANCETS/30G - lancets	3						PRODIGY SAFETY LANCETS - lancets	3					
PIP PEN NEEDLES 31G X 5MM - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2						PRODIGY TWIST TOP LANCETS - lancets	3					
PIP PEN NEEDLES 32G X 4MM - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						PURE COMFORT LANCETS 30G - lancets	3					
PRECISION SURE-DOSE INSUL - insulin syringe/needle u-100 0.3 ml 30 x 5/16"	2						PURE COMFORT PEN NEEDLE 3 - insulin pen needle 32 g x 6 mm	2					
PREFERRED PLUS UNIFINE PE - insulin pen needle 29 g x 12 mm (1/2")	2												
PREFERRED PLUS UNIFINE PE - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2												
PREVENT DROPSAFE SAFETY P - insulin pen needle 31 g x 6 mm	2												

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
(1/4" or 15/64"), x 8 mm (1/3" or 5/16")							QC UNIFINE PENTIPS 32GX4M - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
PURE COMFORT PEN NEEDLE/3 - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16")	2						QC UNILET LANCETS 28G/ULT - lancets	3					
PURE COMFORT PRESSURE ACT - lancets	3						QC UNILET LANCETS 33G/MIC - lancets	3					
PURE COMFORT SAFETY PEN N - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2						QUICK TOUCH INSULIN PEN N - insulin pen needle 29 g x 12.7 mm (1/2")	2					
PURE COMFORT SAFETY PEN N - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						QUICK TOUCH INSULIN PEN N - insulin pen needle 31 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2					
PX ADVANCED LANCING DEVIC - lancet devices	3						QUICK TOUCH INSULIN PEN N - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2					
PX INSULIN SYRINGE/U-100/ - insulin syringe/needle u-100 1/2 ml 30 x 1/2"	2						QUICK TOUCH INSULIN PEN N - insulin pen needle 33 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2					
PX LANCETS MICROTHIN 33G - lancets	3						RAYA SURE PEN NEEDLE 29G - insulin pen needle 29 g x 12 mm (1/2")	2					
PX LANCETS ULTRA THIN - lancets	3						RAYA SURE PEN NEEDLE 31G - insulin pen needle 31 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2					
PX LANCETS ULTRA THIN 28G - lancets	3						READYLANC SAFETY LANCETS - lancets	3					
PX MINI PEN NEEDLES 31GX5 - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2						REALITY INSULIN SYRINGE/U - insulin syringe/needle u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2"	2					
QC ADVANCED LANCING DEVIC - lancet devices	3						REALITY LANCETS - lancets	3					
QC LANCETS SUPER THIN - lancets	3						REALITY TRIGGER LANCETS - lancets	3					
QC LANCETS ULTRA THIN - lancets	3												
QC PEN NEEDLES 29G X 12MM - insulin pen needle 29 g x 12 mm (1/2")	2												
QC PEN NEEDLES 31G X 6MM - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2												
QC PEN NEEDLES 31G X 8MM - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2												

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
RELION INSULIN SYRINGE 0. - insulin syringe/needle u-100 1/2 ml 31 x 15/64"	2						RIGHTEST GL300 LANCETS - lancets	3					
RELION INSULIN SYRINGE 1M - insulin syringe/needle u-100 1 ml 31 x 15/64"	2						SAFETY LANCET 30G/PRESSUR - lancets	3					
RELION INSULIN SYRINGE/U- - insulin syringe/needle u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 29 x 1/2", u-100 0.3 ml 31 x 15/64", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16", u-100 1 ml 31 x 15/64"	2						SAFETY LANCETS - lancets	3					
RELION LANCETS MICRO-THIN - lancets	3						SAFETY LANCETS 21G - lancets	3					
RELION LANCETS THIN 26G - lancets	3						SAFETY LANCETS 23G - lancets	3					
RELION LANCETS ULTRA-THIN - lancets	3						SAFETY LANCETS 28G - lancets	3					
RELION LANCING DEVICE - lancet devices	3						SAFETY LANCETS/PRESSURE A - lancets	3					
RELION PEN NEEDLES 29GX12 - insulin pen needle 29 g x 12 mm (1/2")	2						SAFETY PEN NEEDLES/30G X - insulin pen needle 30 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2					
RELION PEN NEEDLES 31G X - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2						SAPS HEALTH CARE TWIST TO - lancets	3					
RELION PEN NEEDLES 31GX5/ - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2						SAPS HEALTH PLUS TWIST TO - lancets	3					
RELION PEN NEEDLES 32G X - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						SAPS HEALTH TWIST TOP LAN - lancets	3					
RELION ULTRA THIN LANCETS - lancets	3						SAPSCARE TWIST TOP LANCET - lancets	3					
RELION 2-IN-1 LANCET DEV - lancets	3						SB INSULIN SYRINGE/U-100/- insulin syringe/needle u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16"	2					
RELION 2-IN-1 LANCING DEV - lancets	3						SB LANCETS THIN - lancets	3					
RIGHTEST GD500 LANCING DE - lancet devices	3						SB LANCETS ULTRA THIN - lancets	3					
							SECURESAFE DUAL SAFETY PE - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2					
							SECURESAFE SAFETY INSULIN - insulin syringe/needle u-100 1/2 ml 29 x 1/2", u-100 1 ml 29 x 1/2"	2					
							SECURESAFE SAFETY PEN NEE - insulin pen needle 30 g x 8 mm (1/3" or 5/16")	2					
							SELECT-LITE LANCING DEVIC - lancet devices	3					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
SENSILANCE SAFETY LANCETS - lancets	3						SURE COMFORT LANCETS 23G - lancets	3					
SIMPLE DIAGNOSTICS LANCIN - lancet devices	3						SURE COMFORT LANCETS 28G - lancets	3					
SINGLE-LET - lancets	2						SURE COMFORT LANCETS 30G - lancets	3					
SMART DIABETES VANTAGE LA - lancet devices	3						SURE COMFORT LANCING PEN - lancet devices	3					
SMARTEST LANCETS 28G - lancets	3						SURE COMFORT PEN NEEDLES - insulin pen needle 29 g x 12.7 mm (1/2")	2					
SOLUS V2 LANCING DEVICE - lancet devices	3						SURE COMFORT PEN NEEDLES - insulin pen needle 30 g x 8 mm (1/3" or 5/16")	2					
SOLUS V2 PRESSURE ACTIVAT - lancets	3						SURE COMFORT PEN NEEDLES - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2					
SOLUS V2 TWIST LANCETS 30 - lancets	3						SURE COMFORT PEN NEEDLES - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 6 mm (1/4" or 15/64")	2					
STERILANCE TL - lancets	3						SURELITE LANCETS - lancets	3					
SUPER THIN LANCETS - lancets	3						TECHLITE AST LANCETS - lancets	3					
SURE COMFORT AUTOKEEPER S - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2						TECHLITE INSULIN SYRINGE - insulin syringe/needle u-100 1/2 ml 31 x 5/16", u-100 0.3 ml 31 x 15/64", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16", u-100 1/2 ml 31 x 15/64", u-100 1 ml 31 x 15/64"	2					
SURE COMFORT AUTOKEEPER S - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						TECHLITE LANCETS - lancets	3					
SURE COMFORT INSULIN SYRI - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 0.3 ml 31 x 1/4" (6 mm), u-100 0.5 ml 31 x 1/4" (6 mm), u-100 1 ml 31 x 1/4" (6 mm), u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2						TECHLITE LANCETS 26G - lancets	3					
SURE COMFORT LANCETS 18G - lancets	3						TECHLITE PEN NEEDLES 29G - insulin pen needle 29 g x 12 mm (1/2")	2					
SURE COMFORT LANCETS 21G - lancets	3						TECHLITE PEN NEEDLES 31G - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2					
							TECHLITE PEN NEEDLES 32G - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
TECHLITE PEN NEEDLES/31G - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2						TRUE COMFORT PEN NEEDLES - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2					
TECHLITE PEN NEEDLES/32G - insulin pen needle 32 g x 6 mm (1/4" or 15/64")	2						TRUE COMFORT PEN NEEDLES - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
TECHLITE PLUS PEN NEEDLES - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						TRUE COMFORT PRO INSULIN - insulin syringe/needle u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 0.5 ml 32 x 5/16", u-100 1 ml 32 x 5/16", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16"	2					
TGT ADVANCED LANCING DEVI - lancet devices	3						TRUE COMFORT PRO PEN NEED - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2					
TGT LANCET ALTERNATE SITE - lancets	3						TRUE COMFORT PRO PEN NEED - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2					
TGT LANCET SUPER THIN 30G - lancets	3						TRUE COMFORT PRO PEN NEED - insulin pen needle 33 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2					
TGT LANCET THIN 23G - lancets	3						TRUE COMFORT SAFETY INSUL - insulin syringe/needle u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 1 ml 32 x 5/16", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16"	2					
TGT LANCET ULTRA THIN 28G - lancets	3						TRUE COMFORT SAFETY LANCE - lancets	3					
TGT LANCING DEVICE - lancet devices	3						TRUE COMFORT SAFETY PEN N - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2					
TODAYS HEALTH ADVANCED LA - lancet devices	3						TRUE COMFORT SAFETY PEN N - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
TODAYS HEALTH ORIGINAL PE - insulin pen needle 29 g x 12 mm (1/2")	2												
TODAYS HEALTH SHORT PEN N - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2												
TODAYS HEALTH SUPER THIN - lancets	3												
TODAYS HEALTH ULTRA THIN - lancets	3												
TOPFINE/INSULIN PEN NEEDL - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2												
TRAVEL LANCETS ADVANCED 2 - lancets	3												
TRUE COMFORT INSULIN SYRI - insulin syringe/needle u-100 1/2 ml 31 x 5/16", u-100 1 ml 31 x 5/16"	2												

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
TRUE COMFORT TWIST TOP LA - lancets	3						ULTICARE INSULIN SAFETY S - insulin syringe/needle u-100 1/2 ml 29 x 1/2", u-100 1 ml 29 x 1/2"	2					
TRUEDRAW LANCING DEVICE - lancet devices	3						ULTICARE INSULIN SYRINGE - insulin syringe/needle u-100 1/2 ml 31 x 5/16", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2					
TRUEPLUS INSULIN SYRINGE - insulin syringe/needle u-100 1 ml 29 x 1/2"	2						ULTICARE INSULIN SYRINGE/ - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1 ml 28 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2					
TRUEPLUS INSULIN SYRINGE/ - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1 ml 28 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2						ULTICARE MICRO PEN NEEDLE - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2					
TRUEPLUS LANCETS 26G - lancets	3						ULTICARE MICRO PEN NEEDLE - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
TRUEPLUS LANCETS 28G - lancets	3						ULTICARE MINI PEN NEEDLES - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2					
TRUEPLUS LANCETS 28G SUPE - lancets	3						ULTICARE MINI PEN NEEDLES - insulin pen needle 32 g x 6 mm (1/4" or 15/64")	2					
TRUEPLUS LANCETS 30G - lancets	3						ULTICARE MINI SAFETY PEN - insulin pen needle 30 g x 5 mm (1/5" or 3/16")	2					
TRUEPLUS LANCETS 30G ULTR - lancets	3						ULTICARE ORIGINAL PEN NEE - insulin pen needle 29 g x 12.7 mm (1/2")	2					
TRUEPLUS LANCETS 33G - lancets	3						ULTICARE PEN NEEDLES 31G - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2					
TRUEPLUS LANCETS 33G MICR - lancets	3						ULTICARE PEN NEEDLES/29G - insulin pen needle 29 g x 12.7 mm (1/2")	2					
TRUEPLUS SAFETY LANCETS 2 - lancets	3												
TRUEPLUS 5-BEVEL PEN NEED - insulin pen needle 29 g x 12.7 mm (1/2")	2												
TRUEPLUS 5-BEVEL PEN NEED - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2												
TRUEPLUS 5-BEVEL PEN NEED - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2												
TWIST TOP LANCETS 30G - lancets	3												
ULTI-LANCE AUTOMATIC/ CLE - lancet devices	3												

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
ULTICARE SHORT PEN NEEDLE - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2						ULTIGUARD SAFEPAK/TINY P - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 6 mm (1/4" or 15/64")	2					
ULTICARE SHORT SAFETY PEN - insulin pen needle 30 g x 8 mm (1/3" or 5/16")	2						ULTILET CLASSIC LANCETS - lancets	3					
ULTICARE U-100 INSULIN SY - insulin syringe/needle u-100 0.3 ml 31 x 1/4" (6 mm), u-100 0.5 ml 31 x 1/4" (6 mm), u-100 1 ml 31 x 1/4" (6 mm)	2						ULTILET LANCETS - lancets	3					
ULTIGUARD INSULIN SYRINGE - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 29 x 1/2", u-100 1 ml 29 x 1/2"	2						ULTILET LANCETS 33G - lancets	3					
ULTIGUARD SAFEPAK INSULI - insulin syringe/needle u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 30 x 1/2", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2						ULTILET PEN NEEDLE 29GX12 - insulin pen needle 29 g x 12.7 mm (1/2")	2					
ULTIGUARD SAFEPAK MINI P - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2						ULTILET PEN NEEDLE 31GX5M - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2					
ULTIGUARD SAFEPAK PEN NE - insulin pen needle 29 g x 12.7 mm (1/2")	2						ULTILET PEN NEEDLE 31GX8M - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2					
ULTIGUARD SAFEPAK/MICRO - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						ULTILET PEN NEEDLE 32GX4M - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
ULTIGUARD SAFEPAK/MINI P - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2						ULTILET SAFETY LANCETS 21 - lancets	3					
ULTIGUARD SAFEPAK/MINI P - insulin pen needle 32 g x 6 mm (1/4" or 15/64")	2						ULTILET SAFETY LANCETS 23 - lancets	3					
ULTIGUARD SAFEPAK/SHORT - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2						ULTILET SHORT PEN NEEDLES - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2					
ULTIGUARD SAFEPAK/SYRING - insulin syringe/needle u-100 1/2 ml 31 x 5/16"	2						ULTRA FLO INSULIN PEN NEE - insulin pen needle 29 g x 12 mm (1/2")	2					
							ULTRA FLO INSULIN PEN NEE - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2					
							ULTRA FLO INSULIN PEN NEE - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
							ULTRA FLO INSULIN PEN NEE - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2					
							ULTRA FLO INSULIN SYRINGE - insulin syringe/needle u-100 0.3	2					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"							ULTRACARE INSULIN SYRINGE - insulin syringe/needle u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2					
ULTRA THIN LANCETS 28G - lancets	3						ULTRACARE PEN NEEDLES/31G - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2					
ULTRA THIN LANCETS 31G - lancets	3						ULTRACARE PEN NEEDLES/32G - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2					
ULTRA THIN PEN NEEDLES 32 - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						ULTRACARE PEN NEEDLES/33G - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2					
ULTRA-CARE LANCETS 30G - lancets	3						UNIFINE OTC PEN NEEDLE 31 - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2					
ULTRA-CARE SAFETY LANCETS - lancets	3						UNIFINE OTC PEN NEEDLE 32 - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
ULTRA-THIN II AUTO LANCET - lancets	3						UNIFINE PENTIPS PLUS 29GX - insulin pen needle 29 g x 12 mm (1/2")	2					
ULTRA-THIN II INSULIN SYR - insulin syringe/needle u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2						UNIFINE PENTIPS PLUS 31GX - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2					
ULTRA-THIN II LANCETS 28G - lancets	3						UNIFINE PENTIPS PLUS 32GX - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
ULTRA-THIN II LANCETS 30G - lancets	3						UNIFINE PENTIPS PLUS 33G - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2					
ULTRA-THIN II MINI PEN NE - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2						UNIFINE PENTIPS PLUS 33GX - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2					
ULTRA-THIN II PEN NEEDLES - insulin pen needle 29 g x 12.7 mm (1/2")	2						UNIFINE PENTIPS PLUS/30G - insulin pen needle 30 g x 5 mm (1/5" or 3/16")	2					
ULTRA-THIN II PEN NEEDLES - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2												

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
UNIFINE PENTIPS 29GX12MM - insulin pen needle 29 g x 12 mm (1/2")	2						(1/5" or 3/16"), x 8 mm (1/3" or 5/16")						
UNIFINE PENTIPS 31G X 3/1 - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2						UNIFINE SAFECONTROL PEN N - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2					
UNIFINE PENTIPS 31G X 6MM - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2						UNIFINE SAFECONTROL PEN N - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
UNIFINE PENTIPS 31G X 8MM - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2						UNIFINE ULTRA PEN NEEDLE/ - insulin pen needle 29 g x 12 mm (1/2")	2					
UNIFINE PENTIPS 31GX5MM - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2						UNIFINE ULTRA PEN NEEDLE/ - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2					
UNIFINE PENTIPS 31GX6MM - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2						UNIFINE ULTRA PEN NEEDLE/ - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 6 mm (1/4" or 15/64")	2					
UNIFINE PENTIPS 31GX8MM - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2						UNIFINE ULTRA PEN NEEDLE/ - insulin pen needle 34 g x 3.5 mm (9/64")	2					
UNIFINE PENTIPS 32GX4MM - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						UNILET COMFORTOUCH LANCET - lancets	3					
UNIFINE PENTIPS 32GX6MM - insulin pen needle 32 g x 6 mm (1/4" or 15/64")	2						UNILET EXCELITE - lancets	3					
UNIFINE PENTIPS 33GX4MM - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2						UNILET EXCELITE II - lancets	3					
UNIFINE PENTIPS/30G X 3/1 - insulin pen needle 30 g x 5 mm (1/5" or 3/16")	2						UNILET G.P. LANCET - lancets	3					
UNIFINE PROTECT SAFETY PE - insulin pen needle 30 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2						UNILET G.P. SUPERLITE LAN - lancets	3					
UNIFINE PROTECT SAFETY PE - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						UNILET GP 28 ULTRA THIN - lancets	3					
UNIFINE SAFECONTROL PEN N - insulin pen needle 30 g x 5 mm	2						UNILET LANCET - lancets	3					
							UNILET LANCETS MICRO-THIN - lancets	3					
							UNILET LANCETS SUPER-THIN - lancets	3					
							UNILET LANCETS ULTRA-THIN - lancets	3					
							UNILET SUPERLITE LANCET - lancets	3					
							UNISTIK CZT COMFORT - lancets	3					

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
UNISTIK CZT NORMAL - lancets	3						1 ml 29 x 5/16", u-100 1 ml 30 x 5/16"						
UNISTIK NORMAL - lancets	3						VERIFINE INSULIN PEN NEED - insulin pen needle 29 g x 12 mm (1/2")	2					
UNISTIK PRO SAFETY LANCET - lancets	3						VERIFINE INSULIN PEN NEED - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2					
UNISTIK SAFETY LANCETS 28 - lancets	3						VERIFINE INSULIN PEN NEED - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 6 mm (1/4" or 15/64")	2					
UNISTIK SAFETY LANCETS 30 - lancets	3						VERIFINE INSULIN SYRINGE - insulin syringe/needle u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 29 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2					
UNISTIK TOUCH SAFETY LANC - lancets	3						VERIFINE INSULIN SYRINGE/ - insulin syringe/needle u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2					
UNISTIK 1 - lancets	3						VERIFINE PLUS INSULIN PEN - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2					
UNISTIK 2 - lancets	3						VERIFINE PLUS INSULIN PEN - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
UNISTIK 2 COMFORT - lancets	3						VERIFINE PLUS PEN NEEDLE/ - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2					
UNISTIK 2 EXTRA - lancets	3						VERIFINE SAFETY LANCET MI - lancets	3					
UNISTIK 2 NEONATAL - lancets	3						VERIFINE UNIVERSAL LANCET - lancets	3					
UNISTIK 2 NORMAL - lancets	3						VIVAGUARD LANCETS - lancets	3					
UNISTIK 2 SUPER - lancets	3						VIVAGUARD LANCETS 30G - lancets	3					
UNISTIK 3 - lancets	3												
UNISTIK 3 COMFORT - lancets	3												
UNISTIK 3 EXTRA - lancets	3												
UNISTIK 3 GENTLE - lancets	3												
UNISTIK 3 NEONATAL - lancets	3												
UNISTIK 3 NORMAL - lancets	3												
VALUMARK LANCET SUPER THI - lancets	3												
VALUMARK LANCET ULTRA THI - lancets	3												
VALUMARK PEN NEEDLES 29GX - insulin pen needle 29 g x 12 mm (1/2")	2												
VALUMARK PEN NEEDLES 31G - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2												
VANISHPOINT INSULIN SYRIN - insulin syringe/needle u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 1 ml 30 x 3/16" (5 mm), u-100 0.5 ml 30 x 3/16" (5 mm), u-100 1 ml 29 x 1/2", u-100	2												

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
VIVAGUARD LANCING DEVICE - lancet devices	3						1ST TIER UNIFINE PENTIPS - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2					
VIVAGUARD SAFETY LANCETS - lancets	3						1ST TIER UNIFINE PENTIPS - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 6 mm (1/4" or 15/64")	2					
VIVAGUARD SAFETY LANCETS/ - lancets	3						1ST TIER UNIFINE PENTIPS - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2					
WALGREENS LANCETS - lancets	3						ASSORTED CLASSES						
WEGMANS UNIFINE PENTIPS P - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2						ASTAGRAF XL - tacrolimus cap er 24hr 0.5 mg, 1 mg, 5 mg	3					
WEGMANS UNIFINE PENTIPS P - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						azathioprine tab 50 mg (Imuran)	1					
WIDE-SEAL SILICONE DIAPHR - diaphragm wide seal 60 mm, 65 mm, 70 mm, 75 mm, 80 mm, 85 mm, 90 mm, 95 mm	A				•		BENLYSTA - belimumab subcutaneous solution auto-injector 200 mg/ml	2	•	•	•		•
ZEVRX INSULIN SYRINGE/0.5 - insulin syringe/needle u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2"	2						BENLYSTA - belimumab subcutaneous solution prefilled syringe 200 mg/ml	2	•	•	•		•
ZEVRX INSULIN SYRINGE/1ML - insulin syringe/needle u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2"	2						cyclosporine cap 25 mg, 100 mg (Sandimmune)	1					
ZEVRX PEN NEEDLES 31G X 5 - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2						cyclosporine modified cap 25 mg, 100 mg (Neoral)	1					
ZEVRX PEN NEEDLES 31G X 6 - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2						cyclosporine modified cap 50 mg	1					
ZEVRX PEN NEEDLES 31G X 8 - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2						cyclosporine modified oral soln 100 mg/ml (Neoral)	1					
ZEVRX PEN NEEDLES 32G X 4 - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2						ENSPRYNG - satralizumab-mwge subcutaneous soln pref syringe 120 mg/ml	3	•	•	•		•
ZEVRX TWIST TOP LANCETS 3 - lancets	3						ENVARUSUS XR - tacrolimus tab er 24hr 0.75 mg, 1 mg, 4 mg	3					
1ST TIER UNIFINE PENTIPS - insulin pen needle 29 g x 12 mm (1/2")	2						everolimus tab 0.25 mg, 0.5 mg, 0.75 mg, 1 mg (Zortress)	1					
							lenalidomide caps 2.5 mg (Revlimid)	1	•	•	•		•
							lenalidomide cap 5 mg, 10 mg, 15 mg, 20 mg, 25 mg (Revlimid)	1	•	•	•		•
							LOKELMA - sodium zirconium cyclosilicate for susp packet 5 gm, 10 gm	2	•	•			

Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Authorization	Quantity Limits	Specialty	ACA	Limited Distribution
LUPKYNIS - voclosporin cap 7.9 mg	3	•	•	•		•	VIJOICE - alpelisib (pros) oral granules packet 50 mg	3	•	•	•		•
mycophenolate mofetil cap 250 mg (Cellcept)	1						VIJOICE - alpelisib (pros) pak 250 mg daily dose (200 mg & 50 mg tabs)	3	•	•	•		•
mycophenolate mofetil for oral susp 200 mg/ml (Cellcept)	1	•	•				VIJOICE - alpelisib (pros) tab therapy pack 50 mg daily dose, 125 mg daily dose	3	•	•	•		•
mycophenolate mofetil tab 500 mg (Cellcept)	1						VYVGART HYTRULO - efgartigimod alf-hyalur-qvfc pref syr 1000-10000 mg-unit/5ml	3	•	•			•
mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv), 360 mg (mycophenolic acid equiv) (Myfortic)	1						ZOKINVY - lonafarnib cap 50 mg, 75 mg	3	•	•	•		•
NEORAL - cyclosporine modified cap 25 mg, 100 mg	3						ZORTRESS - everolimus tab 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	3					
NEORAL - cyclosporine modified oral soln 100 mg/ml	3												
penicillamine cap 250 mg (Cuprimine)	1												
PROGRAF - tacrolimus cap 0.5 mg, 1 mg, 5 mg	3												
PROGRAF - tacrolimus packet for susp 0.2 mg, 1 mg	3												
SANDIMMUNE - cyclosporine cap 25 mg, 100 mg	3												
sirolimus oral soln 1 mg/ml (Rapamune)	1												
sirolimus tab 0.5 mg, 1 mg, 2 mg (Rapamune)	1												
sodium polystyrene sulfonate powder	1												
sodium polystyrene sulfonate susp 15 gm/60ml	1												
SPS - sodium polystyrene sulfonate rectal susp 30 gm/120ml	1												
tacrolimus cap er 24hr 0.5 mg, 1 mg, 5 mg (Astagraf xl)	1												
tacrolimus cap 0.5 mg, 1 mg, 5 mg (Prograf)	1												
THALOMID - thalidomide cap 50 mg, 100 mg	2	•	•	•		•							
trientine hcl cap 250 mg (Syprine)	1	•	•	•		•							

INDEX

A

abacavir sulfate-lamivudine tab 600-300 mg (Epzicom)	3	ADVOCATE SAFETY LANCETS 2	57
abacavir sulfate soln 20 mg/ml (base equiv) (Ziagen)	3	AGAMATRIX ULTRA-THIN LANC	57
abacavir sulfate tab 300 mg (base equiv) (Ziagen)	3	AIMOVIG	44
ABILIFY ASIMTUFII	35	AIMSCO TWIST LANCETS 32G	58
ABILIFY MAINTENA	35	AIMSCO TWIST LANCETS 33G	58
abiraterone acetate tab 250 mg, 500 mg (Zytiga)	9	AJOVY	44
ABRYSVO	7	albendazole tab 200 mg	6
ACAM2000	7	albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv) (Proventil hfa)	28
acamprosate calcium tab delayed release 333 mg	39	albuterol sulfate soln nebu 0.083% (2.5 mg/3ml), 0.5% (5 mg/ml), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv)	28
acarbose tab 25 mg, 50 mg, 100 mg (Precose)	17	albuterol sulfate syrup 2 mg/5ml	28
acebutolol hcl cap 200 mg, 400 mg	22	albuterol sulfate tab 2 mg, 4 mg	28
acetaminophen w/ codeine tab 300-30 mg, 300-60 mg	41	alclometasone dipropionate cream 0.05%	54
acetaminophen w/ codeine tab 300-15 mg (Tylenol/ codeine)	41	ALECENSA	9
acetazolamide cap er 12hr 500 mg	25	alendronate sodium tab 10 mg, 35 mg	20
acetazolamide tab 125 mg, 250 mg	25	alendronate sodium tab 70 mg (Fosamax)	20
acetic acid otic soln 2%	53	alfuzosin hcl tab er 24hr 10 mg (Uroxatral)	33
acetylcysteine inhal soln 10%, 20%	27	allopurinol tab 100 mg, 300 mg (Zyloprim)	45
acitretin cap 10 mg, 17.5 mg, 25 mg	54	ALORA	14
ACTHAR	20	alprazolam orally disintegrating tab 0.25 mg, 0.5 mg, 1 mg, 2 mg	33
ACTHIB	7	alprazolam tab er 24hr 0.5 mg, 1 mg, 2 mg, 3 mg (Xanax xr)	34
ACTI-LANCE LANCETS 28G	57	alprazolam tab 0.25 mg, 0.5 mg, 1 mg, 2 mg (Xanax)	34
ACTI-LANCE LITE SAFETY LA	57	ALREX	51
ACTI-LANCE SPECIAL SAFETY	57	ALUNBRIG	9
ACTI-LANCE UNIVERSAL SAFE	57	amantadine hcl cap 100 mg	47
ACTIMMUNE	9	amantadine hcl soln 50 mg/5ml	47
acyclovir cap 200 mg	3	ambrisentan tab 5 mg, 10 mg (Letairis)	27
acyclovir oint 5% (Zovirax)	54	amiloride hcl tab 5 mg	25
acyclovir susp 200 mg/5ml (Zovirax)	3	amiodarone hcl tab 100 mg	23
acyclovir tab 400 mg, 800 mg	3	amiodarone hcl tab 200 mg, 400 mg	23
ADACEL	9	amitriptyline hcl tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg	34
ADALIMUMAB-AATY CD/UC/HS	42	amlodipine besylate-benazepril hcl cap 2.5-10 mg, 5-40 mg	24
ADALIMUMAB-AATY 1-PEN KIT	42	amlodipine besylate-benazepril hcl cap 5-10 mg, 5-20 mg, 10-20 mg, 10-40 mg (Lotrel)	24
ADALIMUMAB-AATY 2-PEN KIT	42	amlodipine besylate-olmesartan medoxomil tab 5-20 mg, 5-40 mg, 10-20 mg, 10-40 mg (Azor)	24
ADALIMUMAB-AATY 2-SYRINGE	43	amlodipine besylate tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent) (Norvasc)	23
ADBRY	54	amlodipine besylate-valsartan tab 5-160 mg, 5-320 mg, 10-160 mg, 10-320 mg (Exforge)	24
adefovir dipivoxil tab 10 mg (Hepsera)	3	amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg, 5-160-25 mg, 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg	24
ADEMPAS	27	AMOXICILLIN	1
ADJUSTABLE LANCING DEVICE	57	AMOXICILLIN/POTASSIUM CLA	1
ADVAIR HFA	28	amoxicillin & k clavulanate for susp 200-28.5 mg/5ml, 250-62.5 mg/5ml, 400-57 mg/5ml	1
ADVANCED MOBILE LANCET 30	57	amoxicillin & k clavulanate for susp 600-42.9 mg/5ml (Augmentin es-600)	1
ADVANTAGE SAFETY LANCETS	57		
ADVOCATE INSULIN PEN NEED	57		
ADVOCATE INSULIN SYRINGE/	57		
ADVOCATE LANCETS	57		
ADVOCATE LANCETS 30G	57		
ADVOCATE LANCING DEVICE	57		
ADVOCATE RAPID-SAFE LANCI	57		
ADVOCATE SAFETY LANCETS	57		

amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg.....	1	ASMANEX TWISTHALER 30 MET.....	28
amoxicillin & k clavulanate tab 250-125 mg, 875-125 mg.....	1	ASMANEX TWISTHALER 60 MET.....	28
amoxicillin & k clavulanate tab 500-125 mg (Augmentin).....	1	aspirin chew tab 81 mg.....	41
amoxicillin (trihydrate) cap 250 mg, 500 mg.....	1	aspirin-dipyridamole cap er 12hr 25-200 mg.....	51
amoxicillin (trihydrate) for susp 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml.....	1	aspirin tab delayed release 81 mg.....	41
amoxicillin (trihydrate) tab 500 mg, 875 mg.....	1	ASSURE COMFORT LANCETS UL.....	58
amphetamine-dextroamphetamine cap er 24hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg (Adderall xr).....	38	ASSURE ID DUO PRO SAFETY.....	58
amphetamine-dextroamphetamine tab 5 mg, 7.5 mg, 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg (Adderall).....	38	ASSURE ID PRO SAFETY PEN.....	58
ampicillin cap 500 mg.....	1	ASSURE ID SAFETY PEN NEED.....	58
anagrelide hcl cap 1 mg.....	51	ASSURE LANCE LANCETS.....	58
anagrelide hcl cap 0.5 mg (Agrylin).....	51	ASSURE LANCE LANCETS 21G.....	58
ANALPRAM HC.....	54	ASSURE LANCE PLUS SAFETY.....	58
anastrozole tab 1 mg (Arimidex).....	9	ASSURE LANCE SAFETY LANCE.....	58
ANGELIQ.....	14	ASTAGRAF XL.....	86
ANNOVERA.....	15	atazanavir sulfate cap 150 mg (base equiv).....	3
ANORO ELLIPTA.....	28	atazanavir sulfate cap 200 mg (base equiv), 300 mg (base equiv) (Reyataz).....	3
apomorphine hcl soln cartridge 30 mg/3ml (Apokyn).....	47	atenolol & chlorthalidone tab 50-25 mg (Tenoretic 50).....	24
aprepitant capsule 40 mg, 125 mg.....	31	atenolol & chlorthalidone tab 100-25 mg (Tenoretic 100).....	24
aprepitant capsule 80 mg (Emend).....	31	atenolol tab 25 mg, 50 mg, 100 mg (Tenormin).....	22
aprepitant capsule therapy pack 80 & 125 mg (Emend tripack).....	31	atomoxetine hcl cap 10 mg (base equiv), 18 mg (base equiv), 25 mg (base equiv), 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv), 100 mg (base equiv) (Strattera).....	38
APTIVUS.....	3	atorvastatin calcium tab 10 mg (base equivalent), 20 mg (base equivalent), 40 mg (base equivalent), 80 mg (base equivalent) (Lipitor).....	26
AQINJECT PEN NEEDLE/31G X.....	58	atovaquone-proguanil hcl tab 62.5-25 mg, 250-100 mg (Malarone).....	6
AQINJECT PEN NEEDLE/32G X.....	58	atovaquone susp 750 mg/5ml (Mepron).....	6
AQ INSULIN SYRINGE/0.5ML/.....	58	ATROPINE SULFATE.....	51
AQ INSULIN SYRINGE/1ML/29.....	58	atropine sulfate ophth soln 1% (Atropine sulfate).....	51
AQ INSULIN SYRINGE/1ML/31.....	58	AUGMENTIN.....	1
AQUALANCE LANCETS UL.....	58	AUGTYRO.....	9
ARAKODA.....	6	AUM INSULIN SAFETY PEN NE.....	58
ARANELLE.....	15	AUM MINI INSULIN PEN NEED.....	58
ARANESP ALBUMIN FREE.....	49	AUM PEN NEEDLE/32GX4MM.....	58
ARCALYST.....	43	AUM PEN NEEDLE/32GX5MM.....	58
AREXVY.....	7	AUM PEN NEEDLE/32GX6MM.....	58
arformoterol tartrate soln nebu 15 mcg/2ml (base equiv) (Brovana).....	28	AUM PEN NEEDLE/33GX4MM.....	58
ARIKAYCE.....	2	AUM PEN NEEDLE/33GX5MM.....	58
aripiprazole orally disintegrating tab 10 mg, 15 mg.....	35	AUM PEN NEEDLE/33GX6MM.....	58
aripiprazole oral solution 1 mg/ml.....	35	AUM READYGARD DUO SAFETY.....	58
aripiprazole tab 2 mg, 5 mg, 10 mg, 15 mg, 20 mg, 30 mg (Abilify).....	35	AUM SAFETY PEN NEEDLE/31.....	58
ARISTADA.....	35	AURORA LANCET SUPER THIN.....	58
ARISTADA INITIO.....	35	AURORA LANCET THIN 23G.....	58
armodafinil tab 50 mg, 150 mg, 200 mg, 250 mg (Nuvigil).....	38	AURORA PEN NEEDLES 29GX12.....	58
ARMOUR THYROID.....	19	AURORA PEN NEEDLES 31G X.....	59
ARNUIITY ELLIPTA.....	28	AUSTEDO.....	39
asenapine maleate sl tab 2.5 mg (base equiv), 5 mg (base equiv), 10 mg (base equiv) (Saphris).....	35	AUSTEDO XR.....	39
ASMANEX HFA.....	28	AUSTEDO XR PATIENT TITRAT.....	39
ASMANEX TWISTHALER 120 ME.....	28	AUTOKEEPER/SAFETY PEN NEE.....	59
		AUTO-LANCET.....	59
		AUTO-LANCET MINI.....	59
		AUTOLET IMPRESSION LANCIN.....	59

AUTOLET LANCING DEVICE.....	59	benazepril hcl tab 5 mg.....	24
AUTOLET LITE LANCING DEVI.....	59	benazepril hcl tab 10 mg, 20 mg, 40 mg (Lotensin).....	24
AUTOLET MINI.....	59	BENLYSTA.....	86
AUTOLET PLUS.....	59	BENZNIDAZOLE.....	6
AUVI-Q.....	26	benzonatate cap 100 mg, 200 mg.....	27
AVONEX.....	39	benzphetamine hcl tab 50 mg.....	38
AVONEX PEN.....	39	benztropine mesylate tab 0.5 mg, 1 mg, 2 mg.....	47
AVTOZMA.....	43	BERINERT.....	51
AYVAKIT.....	9	BESREMI.....	9
azathioprine tab 50 mg (Imuran).....	86	BESREMI PEN.....	9
azelaic acid gel 15% (Finacea).....	54	betaine powder for oral solution (Cystadane).....	20
azelastine hcl nasal spray 0.1% (137 mcg/spray).....	27	betamethasone dipropionate augmented cream	
azelastine hcl ophth soln 0.05%.....	51	0.05%.....	54
azithromycin for susp 100 mg/5ml, 200 mg/5ml		betamethasone dipropionate augmented lotion	
(Zithromax).....	1	0.05%.....	54
azithromycin tab 600 mg.....	1	betamethasone dipropionate augmented oint 0.05%	
azithromycin tab 250 mg, 500 mg (Zithromax).....	1	(Diprolene).....	54
B			
baclofen tab 10 mg, 20 mg.....	48	betamethasone dipropionate cream 0.05%.....	54
balsalazide disodium cap 750 mg (Colazal).....	31	betamethasone dipropionate lotion 0.05%.....	54
BALVERSA.....	9	betamethasone dipropionate oint 0.05%.....	54
BAQSIMI ONE PACK.....	17	betamethasone valerate cream 0.1% (base	
BAQSIMI TWO PACK.....	17	equivalent).....	54
BARACLUDE.....	3	betamethasone valerate oint 0.1% (base	
BAXDELA.....	2	equivalent).....	54
BCG VACCINE.....	7	BETASERON.....	39
BD AUTOSHIELD DUO 30G X 5.....	59	BETAXOLOL HCL.....	51
BD INSULIN SYRINGE/0.3ML/.....	59	betaxolol hcl tab 10 mg, 20 mg.....	22
BD INSULIN SYRINGE/0.5ML/.....	59	bethanechol chloride tab 5 mg, 10 mg, 25 mg, 50	
BD INSULIN SYRINGE/1ML/27.....	59	mg.....	32
BD INSULIN SYRINGE/1ML/29.....	59	bexarotene cap 75 mg (Targretin).....	9
BD INSULIN SYRINGE/U-100/.....	59	BEXSERO.....	7
BD INSULIN SYRINGE/U-500/.....	59	bicalutamide tab 50 mg (Casodex).....	9
BD INSULIN SYRINGE LUER-L.....	59	BIDIL.....	27
B-D INSULIN SYRINGE MICRO.....	59	BIKTARVY.....	3
BD INSULIN SYRINGE MICROF.....	59	bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg,	
BD INSULIN SYRINGE SAFETY.....	59	5-6.25 mg, 10-6.25 mg (Ziac).....	24
B-D INSULIN SYRINGE ULTRA.....	59	bisoprolol fumarate tab 5 mg, 10 mg.....	22
BD INSULIN SYRINGE ULTRA.....	59	BOOSTRIX.....	9
BD INSULIN SYRINGE ULTRA.....	59	bosentan tab for oral susp 32 mg (Tracleer).....	27
BD INSULIN SYRINGE ULTRAF.....	59	bosentan tab 62.5 mg, 125 mg (Tracleer).....	27
BD LO-DOSE INSULIN SYRIN.....	59	bosutinib tab 100 mg, 400 mg, 500 mg (Bosulif).....	10
BD MICROTAINER LANCETS.....	59	BRAFTOVI.....	10
BD PEN NEEDLE/MICRO/ULTRA.....	59	BREO ELLIPTA.....	28
BD PEN NEEDLE/MINI/ULTRA.....	59	BREZTRI AEROSPHERE.....	28
BD PEN NEEDLE/NANO/ULTRA.....	60	brimonidine tartrate ophth soln 0.2%.....	51
BD PEN NEEDLE/NANO 2ND GE.....	60	brivaracetam oral soln 10 mg/ml (Briviact).....	45
BD PEN NEEDLE/ORIGINAL/UL.....	60	brivaracetam tab 25 mg, 50 mg, 75 mg, 100 mg	
BD PEN NEEDLE/SHORT/ULTRA.....	60	(Briviact).....	45
BD SAFETY-GLIDE INSULIN S.....	60	brivaracetam tab 10 mg (Briviact).....	45
BD SAFETYGLIDE INSULIN SY.....	60	bromfenac sodium ophth soln 0.09% (base equiv)	
BD VEO INSULIN SYRINGE UL.....	60	(once-daily).....	51
BELBUCA.....	41	bromocriptine mesylate cap 5 mg (base equivalent)	
benazepril & hydrochlorothiazide tab 5-6.25 mg.....	24	(Parlodel).....	47
benazepril & hydrochlorothiazide tab 10-12.5 mg,		bromocriptine mesylate tab 2.5 mg (base equivalent)	
20-12.5 mg, 20-25 mg (Lotensin hct).....	24	(Parlodel).....	47
		BRUKINSA.....	10
		budesonide delayed release particles cap 3 mg.....	14

budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act, 160-4.5 mcg/act (Symbicort).....	28	CAPVAXIVE.....	7
budesonide inhalation susp 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml (Pulmicort).....	28	carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg (Carbatrol).....	45
bumetanide tab 1 mg, 2 mg.....	25	carbamazepine chew tab 100 mg.....	45
bumetanide tab 0.5 mg (Bumex).....	25	carbamazepine susp 100 mg/5ml (Tegretol).....	45
buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv), 4-1 mg (base equiv), 8-2 mg (base equiv), 12-3 mg (base equiv) (Suboxone).....	41	carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg (Tegretol-xr).....	45
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv), 8-2 mg (base equiv).....	41	carbamazepine tab 200 mg (Tegretol).....	45
buprenorphine hcl sl tab 2 mg (base equiv), 8 mg (base equiv).....	41	CARBATROL.....	45
buprenorphine td patch weekly 5 mcg/hr, 7.5 mcg/hr, 10 mcg/hr, 15 mcg/hr, 20 mcg/hr (Butrans).....	41	CARBIDOPA/LEVODOPA ER.....	47
bupropion hcl (smoking deterrent) tab er 12hr 150 mg.....	39	carbidopa & levodopa orally disintegrating tab 10-100 mg, 25-100 mg, 25-250 mg.....	47
bupropion hcl tab er 12hr 100 mg, 150 mg, 200 mg (Wellbutrin sr).....	34	carbidopa & levodopa tab er 25-100 mg, 50-200 mg.....	47
bupropion hcl tab er 24hr 150 mg, 300 mg (Wellbutrin xl).....	34	carbidopa & levodopa tab 25-250 mg.....	47
bupropion hcl tab 75 mg, 100 mg.....	34	carbidopa & levodopa tab 10-100 mg (Sinemet).....	47
bupirone hcl tab 5 mg, 7.5 mg, 10 mg, 15 mg, 30 mg.....	34	carbidopa & levodopa tab 25-100 mg (Sinemet).....	47
butalbital-acetaminophen-caffeine tab 50-325-40 mg (Esgic).....	41	carbidopa-levodopa-entacapone tabs 12.5-50-200 mg (Stalevo 50).....	47
butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg.....	41	carbidopa-levodopa-entacapone tabs 18.75-75-200 mg (Stalevo 75).....	47
butalbital-acetaminophen tab 50-325 mg.....	41	carbidopa-levodopa-entacapone tabs 25-100-200 mg (Stalevo 100).....	47
butalbital-aspirin-caffeine cap 50-325-40 mg.....	41	carbidopa-levodopa-entacapone tabs 31.25-125-200 mg (Stalevo 125).....	47
butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg.....	41	carbidopa-levodopa-entacapone tabs 37.5-150-200 mg (Stalevo 150).....	47
butorphanol tartrate nasal soln 10 mg/ml.....	41	carbidopa-levodopa-entacapone tabs 50-200-200 mg (Stalevo 200).....	47
BYLVAY.....	31	carbidopa tab 25 mg (Lodosyn).....	47
BYLVAY (PELLETS).....	31	carbinoxamine maleate tab 4 mg.....	27
C		carbonyl iron susp 15 mg/1.25ml (elemental iron).....	49
cabergoline tab 0.5 mg.....	20	CARDIOMOM LANCING DEVICE.....	60
CABLIV.....	51	CARDIZEM LA.....	23
CABOMETYX.....	10	CAREFINE PEN NEEDLE 32GX4.....	60
caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv).....	38	CAREFINE PEN NEEDLES 29GX.....	60
calcipotriene cream 0.005% (Dovonex).....	54	CAREFINE PEN NEEDLES 30GX.....	60
calcitonin (salmon) inj 200 unit/ml (Miacalcin).....	20	CAREFINE PEN NEEDLES 31GX.....	60
calcitonin (salmon) nasal soln 200 unit/act.....	20	CAREFINE PEN NEEDLES 32GX.....	60
calcitriol cap 0.25 mcg, 0.5 mcg (Rocaltrol).....	20	CAREONE ADVANCED LANCING.....	60
calcium acetate (phosphate binder) cap 667 mg (169 mg ca).....	31	CAREONE INSULIN SYRINGES/.....	60
calcium acetate (phosphate binder) tab 667 mg.....	31	CAREONE LANCET SUPER THIN.....	60
CALQUENCE.....	10	CAREONE LANCET THIN.....	60
candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg, 32-12.5 mg, 32-25 mg (Atacand hct).....	24	CAREONE LANCET ULTRA THIN.....	60
candesartan cilexetil tab 4 mg, 8 mg, 16 mg, 32 mg (Atacand).....	24	CAREONE UNIFINE PENTIPS P.....	60
capecitabine tab 150 mg, 500 mg (Xeloda).....	10	CARESENS LANCETS.....	60
CAPRELSA.....	10	CARETOUCH INSULIN SYRINGE.....	60
captopril tab 12.5 mg, 25 mg, 50 mg, 100 mg.....	24	CARETOUCH LANCING DEVICE.....	60
		CARETOUCH PEN NEEDLE 29GX.....	60
		CARETOUCH PEN NEEDLE 33GX.....	61
		CARETOUCH PEN NEEDLES 31.....	61
		CARETOUCH PEN NEEDLES 31G.....	61
		CARETOUCH PEN NEEDLES 32G.....	61
		CARETOUCH SAFETY LANCETS/.....	61
		CARETOUCH TWIST LANCETS 2.....	61
		CARETOUCH TWIST LANCETS 3.....	61
		CARETOUCH TWIST LANCETS M.....	61
		carglumic acid soluble tab 200 mg (Carbaglu).....	20

CARTEOLOL HCL.....	51	cinacalcet hcl tab 30 mg (base equiv), 60 mg (base equiv), 90 mg (base equiv) (Sensipar).....	20
carvedilol tab 3.125 mg, 6.25 mg, 12.5 mg, 25 mg (Coreg).....	22	CIPRO.....	2
CAYA.....	61	ciprofloxacin-dexamethasone otic susp 0.3-0.1% (Ciprodex).....	53
CAYSTON.....	6	ciprofloxacin hcl ophth soln 0.3% (base equivalent).....	51
CEFACLOL.....	1	ciprofloxacin hcl otic soln 0.2% (base equivalent) (Cetraxal).....	53
CEFADROXIL.....	1	ciprofloxacin hcl tab 750 mg (base equiv).....	2
cefadroxil cap 500 mg.....	1	ciprofloxacin hcl tab 250 mg (base equiv), 500 mg (base equiv) (Cipro).....	2
cefadroxil for susp 250 mg/5ml, 500 mg/5ml.....	1	citalopram hydrobromide oral soln 10 mg/5ml.....	34
cefdinir cap 300 mg.....	1	citalopram hydrobromide tab 10 mg (base equiv), 20 mg (base equiv), 40 mg (base equiv) (Celexa).....	34
cefdinir for susp 125 mg/5ml, 250 mg/5ml.....	1	cladribine tab therapy pack 10 mg (4 tabs), 10 mg (5 tabs), 10 mg (6 tabs), 10 mg (7 tabs), 10 mg (8 tabs), 10 mg (9 tabs), 10 mg (10 tabs) (Mavenclad).....	39
cefixime for susp 200 mg/5ml (Suprax).....	1	CLARITHROMYCIN.....	1
CEFPODOXIME PROXETIL.....	1	clarithromycin tab er 24hr 500 mg.....	1
cefepodoxime proxetil tab 100 mg, 200 mg.....	1	clarithromycin tab 250 mg, 500 mg.....	1
cefprozil for susp 125 mg/5ml, 250 mg/5ml.....	1	CLEANLET LANCETS 28G.....	61
cefprozil tab 250 mg, 500 mg.....	1	CLEMASTINE FUMARATE.....	27
cefuroxime axetil tab 250 mg, 500 mg.....	1	CLEVER CHEK LANCETS ULTRA.....	61
celecoxib cap 50 mg, 100 mg, 200 mg, 400 mg (Celebrex).....	43	CLEVER CHOICE COMFORT EZ.....	61
CELONTIN.....	45	CLIMARA PRO.....	14
cephalexin cap 250 mg, 500 mg, 750 mg.....	1	clindamycin hcl cap 75 mg, 150 mg, 300 mg (Cleocin).....	6
cephalexin for susp 125 mg/5ml, 250 mg/5ml.....	1	clindamycin palmitate hcl for soln 75 mg/5ml (base equiv) (Cleocin pediatric gr).....	6
CEQUR SIMPLICITY INSERTER.....	61	clindamycin phosphate gel 1% (twice-daily).....	54
CEQUR SIMPLICITY 2U.....	61	clindamycin phosphate lotion 1% (Cleocin-t).....	54
CERDELGA.....	49	clindamycin phosphate soln 1%.....	54
cetrorelix acetate for inj kit 0.25 mg (Cetrotide).....	20	clindamycin phosphate swab 1%.....	54
cevimeline hcl cap 30 mg (Evoxac).....	53	clindamycin phosphate vaginal cream 2% (Cleocin).....	33
CHEMET.....	56	clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%.....	54
CHEMSTRIP-K.....	57	CLINPRO 5000.....	53
chlordiazepoxide hcl cap 5 mg, 10 mg, 25 mg.....	34	clobazam suspension 2.5 mg/ml (Onfi).....	45
chlorhexidine gluconate soln 0.12% (Peridex).....	53	clobazam tab 10 mg, 20 mg (Onfi).....	45
CHLOROQUINE PHOSPHATE.....	6	clobetasol propionate cream 0.05% (Temovate).....	54
chloroquine phosphate tab 500 mg.....	6	clobetasol propionate emollient base cream 0.05%.....	54
chlorpromazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg, 200 mg.....	35	clobetasol propionate gel 0.05%.....	54
chlorthalidone tab 25 mg, 50 mg.....	25	clobetasol propionate oint 0.05% (Temovate).....	54
chlorzoxazone tab 500 mg.....	48	clobetasol propionate soln 0.05%.....	54
cholestyramine light powder 4 gm/dose (Questran light).....	26	CLOCORTOLONE PIVALATE.....	55
cholestyramine light powder packets 4 gm.....	26	clomiphene citrate tab 50 mg.....	20
cholestyramine powder 4 gm/dose (Questran).....	26	clomipramine hcl cap 25 mg, 50 mg, 75 mg (Anafranil).....	34
cholestyramine powder packets 4 gm (Questran).....	26	clonazepam orally disintegrating tab 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg.....	45
CHOSEN LANCETS 30G.....	61	clonazepam tab 0.5 mg, 1 mg, 2 mg (Klonopin).....	45
CHOSEN LANCING DEVICE.....	61	clonidine hcl tab er 12hr 0.1 mg (Kapvay).....	38
CHOSEN SAFETY LANCETS 28G.....	61	clonidine hcl tab 0.1 mg, 0.2 mg, 0.3 mg.....	24
ciclopirox gel 0.77%.....	54	clonidine td patch weekly 0.1 mg/24hr (Catapres-tts-1).....	24
ciclopirox olamine cream 0.77% (base equiv) (Loprox).....	54		
ciclopirox olamine susp 0.77% (base equiv) (Loprox).....	54		
ciclopirox shampoo 1% (Loprox shampoo).....	54		
ciclopirox solution 8% (Penlac Nail Lacquer).....	54		
cilostazol tab 50 mg, 100 mg.....	51		
CIMDUO.....	3		
CIMZIA STARTER KIT.....	31		
CIMZIA (1 SYRINGE).....	31		
CIMZIA (2 SYRINGE).....	31		

clonidine td patch weekly 0.2 mg/24hr (Catapres-tts-2).....	24	CORTIFOAM.....	54
clonidine td patch weekly 0.3 mg/24hr (Catapres-tts-3).....	24	COSENTYX.....	55
clopidogrel bisulfate tab 300 mg (base equiv).....	51	COSENTYX SENSOREADY PEN.....	55
clopidogrel bisulfate tab 75 mg (base equiv) (Plavix).....	51	COSENTYX UNOREADY.....	55
clorazepate dipotassium tab 3.75 mg, 15 mg.....	34	COTELLIC.....	10
clorazepate dipotassium tab 7.5 mg (Tranxene t).....	34	CREON.....	31
clotrimazole troche 10 mg.....	53	CRESEMBA.....	3
clotrimazole w/ betamethasone cream 1-0.05%.....	55	CROMOLYN SODIUM.....	51
clozapine orally disintegrating tab 12.5 mg, 25 mg, 100 mg, 150 mg, 200 mg.....	35	cromolyn sodium oral conc 100 mg/5ml (Gastrocrom).....	31
clozapine tab 25 mg, 50 mg, 100 mg, 200 mg (Clozaril).....	35	cromolyn sodium soln nebu 20 mg/2ml.....	28
COAGUCHEK LANCETS.....	61	CVS LANCETS ORIGINAL.....	62
COARTEM.....	6	CVS LANCETS THIN 26G.....	62
codeine sulfate tab 30 mg (Codeine sulfate).....	41	CVS LANCING DEVICE.....	62
colchicine tab 0.6 mg (Colcrys).....	45	CVS ULTRA THIN LANCETS.....	62
colchicine w/ probenecid tab 0.5-500 mg.....	45	cyanocobalamin inj 1000 mcg/ml.....	49
colesevelam hcl tab 625 mg (Welchol).....	26	cyclobenzaprine hcl tab 5 mg, 10 mg.....	48
colestipol hcl granule packets 5 gm (Colestid flavored).....	26	CYCLOPHOSPHAMIDE.....	10
colestipol hcl granules 5 gm (Colestid flavored).....	26	cyclophosphamide cap 25 mg, 50 mg (Cyclophosphamide).....	10
colestipol hcl tab 1 gm (Colestid).....	26	CYCLOSERINE.....	2
COMBIPATCH.....	14	cyclosporine cap 25 mg, 100 mg (Sandimmune).....	86
COMBIVENT RESPIMAT.....	28	cyclosporine modified cap 50 mg.....	86
COMETRIQ.....	10	cyclosporine modified cap 25 mg, 100 mg (Neoral).....	86
COMFORT ASSURED LANCETS M.....	61	cyclosporine modified oral soln 100 mg/ml (Neoral).....	86
COMFORT ASSURED LANCETS S.....	61	cyclosporine (ophth) emulsion 0.05% (pf) (Restasis multidose).....	51
COMFORT EZ/31G X 5MM.....	62	cyproheptadine hcl syrup 2 mg/5ml.....	27
COMFORT EZ/31G X 6MM.....	62	cyproheptadine hcl tab 4 mg.....	27
COMFORT EZ INSULIN SYRING.....	61	CYSTADROPS.....	51
COMFORT EZ MICRO/32G X 4M.....	61	CYSTAGON.....	33
COMFORT EZ PRO SAFETY PEN.....	61	CYSTARAN.....	52
COMFORT EZ SHORT/31G X 8M.....	62		
COMFORT LANCETS.....	62	D	
COMFORT TOUCH LANCETS ULT.....	62	dabigatran etexilate mesylate cap 75 mg (etexilate base eq), 110 mg (etexilate base eq), 150 mg (etexilate base eq) (Pradaxa).....	50
COMFORT TOUCH PEN NEEDLES.....	62	dalfampridine tab er 12hr 10 mg (Ampyra).....	39
COMFORT TOUCH PLUS SAFETY.....	62	danazol cap 50 mg, 100 mg, 200 mg.....	14
COMFORT TOUCH TWIST LANCE.....	62	dantrolene sodium cap 50 mg, 100 mg.....	48
COMIRNATY 2026-27.....	7	dantrolene sodium cap 25 mg (Dantrium).....	48
COMIRNATY/5-11Y/2026-27.....	7	dapagliflozin free base-metformin hcl tab er 24hr 5-500 mg, 5-1000 mg, 10-500 mg, 10-1000 mg (Xigduo xr).....	17
CONDOMS.....	62	dapagliflozin tab 5 mg, 10 mg (Farxiga).....	17
CONTOUR BLOOD GLUCOSE MON.....	62	dapsone tab 25 mg, 100 mg.....	6
CONTOUR BLOOD GLUCOSE TES.....	57	DAPTACEL.....	9
CONTOUR NEXT BLOOD GLUCOS.....	57	darunavir tab 600 mg, 800 mg (Prezista).....	3
CONTOUR NEXT EZ BLOOD GLU.....	62	dasatinib tab 20 mg, 50 mg, 70 mg, 80 mg, 100 mg, 140 mg (Sprycel).....	10
CONTOUR NEXT GEN BLOOD GL.....	62	DAURISMO.....	10
CONTOUR NEXT LINK BLOOD G.....	62	deferiprone tab 500 mg, 1000 mg (Ferriprox).....	56
CONTOUR NEXT LINK WIRELES.....	62	DELESTROGEN.....	14
CONTOUR NEXT ONE BLOOD GL.....	62	DELSTRIGO.....	3
CONTOUR PLUS BLOOD GLUCOS.....	57	demeclocycline hcl tab 150 mg, 300 mg.....	2
CONTOUR PLUS BLUE BLOOD G.....	62	DENGVAIXA.....	7
CONTRACE.....	38		
COPIKTRA.....	10		
CORLANOR.....	27		

DENTAGEL.....	53	diazepam rectal gel delivery system 10 mg, 20 mg (Diastat acudial).....	45
DEPO-ESTRADIOL.....	14	diazepam tab 2 mg, 5 mg, 10 mg (Valium).....	34
DEPO-SUBQ PROVERA 104.....	15	diazoxide susp 50 mg/ml (Proglycem).....	17
DESCOVY.....	3	dichlorphenamide tab 50 mg (Keveyis).....	25
desipramine hcl tab 50 mg, 75 mg, 100 mg, 150 mg.....	34	diclofenac potassium tab 50 mg.....	43
desipramine hcl tab 10 mg, 25 mg (Norpramin).....	34	diclofenac sodium ophth soln 0.1%.....	52
desmopressin acetate inj 4 mcg/ml (Ddvp).....	20	diclofenac sodium soln 1.5%.....	55
desmopressin acetate nasal spray soln 0.01% (refrigerated).....	20	diclofenac sodium tab delayed release 25 mg, 50 mg, 75 mg.....	43
desmopressin acetate preservative free (pf) inj 4 mcg/ml (Ddvp).....	20	diclofenac w/ misoprostol tab delayed release 50-0.2 mg (Arthrotec 50).....	43
desmopressin acetate tab 0.1 mg, 0.2 mg (Ddvp).....	20	diclofenac w/ misoprostol tab delayed release 75-0.2 mg (Arthrotec 75).....	43
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5) (Mircette).....	15	dicloxacin sodium cap 250 mg, 500 mg.....	1
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg.....	15	dicyclomine hcl cap 10 mg.....	30
desonide cream 0.05% (Desowen).....	55	dicyclomine hcl oral soln 10 mg/5ml.....	30
desonide oint 0.05%.....	55	dicyclomine hcl tab 20 mg.....	30
desoximetasone cream 0.25% (Topicort).....	55	diethylpropion hcl tab 25 mg.....	38
desoximetasone oint 0.25% (Topicort).....	55	DIFICID.....	1
desvenlafaxine succinate tab er 24hr 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv) (Pristiq).....	34	diflunisal tab 500 mg.....	41
DEXAMETHASONE.....	14	digoxin oral soln 0.05 mg/ml (Digoxin).....	22
dexamethasone elixir 0.5 mg/5ml.....	14	digoxin tab 125 mcg (0.125 mg), 250 mcg (0.25 mg) (Lanoxin).....	22
DEXAMETHASONE INTENSOL.....	14	digoxin tab 62.5 mcg (0.0625 mg) (Lanoxin).....	22
dexamethasone tab 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg.....	14	dihydroergotamine mesylate inj 1 mg/ml (D.h.e. 45).....	44
DEXCOM G7 15 DAY SENSOR.....	62	DILANTIN.....	45
DEXCOM G6 RECEIVER.....	62	DILANTIN-125.....	45
DEXCOM G7 RECEIVER.....	62	DILANTIN INFATABS.....	45
DEXCOM G6 SENSOR.....	62	diltiazem hcl cap er 12hr 60 mg, 90 mg, 120 mg.....	23
DEXCOM G7 SENSOR.....	62	diltiazem hcl cap er 24hr 120 mg, 180 mg, 240 mg.....	23
DEXCOM G6 TRANSMITTER.....	62	diltiazem hcl coated beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg (Cardizem cd).....	23
dexlansoprazole cap delayed release 60 mg (Dexilant).....	30	diltiazem hcl extended release beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg (Tiazac).....	23
dexmethylphenidate hcl cap er 24 hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg (Focalin xr).....	38	diltiazem hcl tab er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg (Cardizem la).....	23
dexmethylphenidate hcl tab 2.5 mg, 5 mg, 10 mg (Focalin).....	38	diltiazem hcl tab 90 mg.....	23
dextroamphetamine sulfate cap er 24hr 5 mg.....	38	diltiazem hcl tab 30 mg, 60 mg, 120 mg (Cardizem).....	23
dextroamphetamine sulfate cap er 24hr 10 mg, 15 mg (Dexedrine).....	38	dimethyl fumarate capsule delayed release 120 mg, 240 mg (Tecfidera).....	39
dextroamphetamine sulfate oral solution 5 mg/5ml.....	38	dimethyl fumarate capsule dr starter pack 120 mg & 240 mg (Tecfidera starter pa).....	39
dextroamphetamine sulfate tab 5 mg, 10 mg.....	38	diphenoxylate w/ atropine tab 2.5-0.025 mg (Lomotil).....	30
DIACOMIT.....	45	dipyridamole tab 25 mg, 50 mg, 75 mg.....	51
DIATHRIVE LANCETS.....	62	disopyramide phosphate cap 100 mg, 150 mg (Norpace).....	23
DIATHRIVE LANCETS ULTRA T.....	63	disulfiram tab 250 mg, 500 mg.....	39
DIATHRIVE LANCING DEVICE.....	63	divalproex sodium cap delayed release sprinkle 125 mg (Depakote sprinkles).....	45
DIATHRIVE PEN NEEDLE/31G.....	63	divalproex sodium tab delayed release 125 mg, 250 mg, 500 mg (Depakote).....	45
DIATHRIVE PEN NEEDLE/32G.....	63	divalproex sodium tab er 24 hr 250 mg, 500 mg (Depakote er).....	45
DIATHRIVE PEN NEEDLE/31 G.....	63		
diazepam conc 5 mg/ml.....	34		
diazepam oral soln 1 mg/ml.....	34		
diazepam rectal gel delivery system 2.5 mg.....	45		

dofetilide cap 125 mcg (0.125 mg), 250 mcg (0.25 mg), 500 mcg (0.5 mg) (Tikosyn).....	23	DROPSAFE SAFTEY PEN NEEDL.....	64
donepezil hydrochloride orally disintegrating tab 5 mg, 10 mg.....	39	drosiprenone-ethinyl estradiol tab 3-0.03 mg (Yasmin 28).....	15
donepezil hydrochloride tab 5 mg, 10 mg, 23 mg (Aricept).....	39	drosiprenone-ethinyl estradiol tab 3-0.02 mg (Yaz).....	15
DOPTELET.....	49	drosiprenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg (Beyaz).....	15
DOPTELET SPRINKLE.....	49	drosiprenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg (Safyral).....	15
dorzolamide hcl ophth soln 2% (Trusopt).....	52	DRUG MART ON-THE-GO LANCE.....	64
dorzolamide hcl-timolol maleate ophth soln 2-0.5% (Cosopt).....	52	DRUG MART UNIFINE PENTIPS.....	64
DOVATO.....	3	DRUG MART UNILET LANCETS.....	64
doxazosin mesylate tab 1 mg, 2 mg, 4 mg, 8 mg (Cardura).....	24	DRUG MART UNILET MICRO TH.....	64
DOXEPIN HCL.....	34	DRYSOL.....	55
doxepin hcl cap 10 mg, 25 mg, 50 mg, 75 mg, 100 mg.....	34	DUANE READE LANCET ALTERN.....	64
DOXEPIN HYDROCHLORIDE.....	34	DUANE READE LANCET SUPER.....	64
doxycycline hyclate cap 50 mg.....	2	DUANE READE LANCET ULTRA.....	64
doxycycline hyclate cap 100 mg (Vibramycin).....	2	DUANE READE UNIFINE PENTI.....	64
doxycycline hyclate tab 20 mg, 100 mg.....	2	DUAVEE.....	15
doxycycline monohydrate cap 50 mg, 100 mg.....	2	DULERA.....	28
doxycycline monohydrate for susp 25 mg/5ml (Vibramycin).....	2	duloxetine hcl enteric coated pellets cap 20 mg (base eq), 30 mg (base eq), 60 mg (base eq) (Cymbalta).....	34
doxycycline monohydrate tab 50 mg, 75 mg, 100 mg, 150 mg.....	2	DUPIXENT.....	55
dronabinol cap 5 mg, 10 mg.....	31	dutasteride cap 0.5 mg (Avodart).....	33
dronabinol cap 2.5 mg (Marinol).....	31	dutasteride-tamsulosin hcl cap 0.5-0.4 mg (Jalyn).....	33
DROPLET GENTEEL LANCING D.....	63	E	
DROPLET INSULIN SYRINGE 0.....	63	EASY COMFORT INSULIN SYRI.....	64
DROPLET INSULIN SYRINGE 1.....	63	EASY COMFORT LANCETS.....	64
DROPLET INSULIN SYRINGE/0.....	63	EASY COMFORT LANCETS 30G.....	65
DROPLET INSULIN SYRINGE/1.....	63	EASY COMFORT LANCETS 30G/.....	65
DROPLET INSULIN SYRINGE/U.....	63	EASY COMFORT LANCETS TWIS.....	64
DROPLET INSULIN SYRINGE U.....	63	EASY COMFORT PEN NEEDLES.....	65
DROPLET LANCETS ULTRA THI.....	63	EASY COMFORT SAFETY PEN N.....	65
DROPLET LANCING DEVICE.....	63	EASY GLIDE PEN NEEDLES 33.....	65
DROPLET MICRON 34G X 9/64.....	63	EASY MINI EJECT LANCING D.....	65
DROPLET PEN NEEDLE/MICRON.....	63	EASY MINI LANCING DEVICE.....	65
DROPLET PEN NEEDLES 29GX1.....	63	EASY TOUCH FLIPLOCK SAFET.....	65
DROPLET PEN NEEDLES 31GX5.....	63	EASY TOUCH 32GX5MM.....	66
DROPLET PEN NEEDLES 31GX6.....	63	EASY TOUCH 32GX6MM.....	66
DROPLET PEN NEEDLES 31GX8.....	63	EASY TOUCH INSULIN SYRING.....	65
DROPLET PEN NEEDLES 32GX4.....	64	EASY TOUCH LANCETS 30G/BU.....	65
DROPLET PEN NEEDLES 32GX5.....	64	EASY TOUCH LANCETS 21G/PR.....	65
DROPLET PEN NEEDLES 32GX6.....	64	EASY TOUCH LANCETS 23G/PR.....	65
DROPLET PEN NEEDLES 32GX8.....	64	EASY TOUCH LANCETS 26G/PR.....	65
DROPLET PEN NEEDLES 29G X.....	63	EASY TOUCH LANCETS 28G/PR.....	65
DROPLET PEN NEEDLES 30G X.....	63	EASY TOUCH LANCETS 30G/PR.....	65
DROPLET PEN NEEDLES 31G X.....	63	EASY TOUCH LANCETS 32G/PR.....	65
DROPLET PEN NEEDLES 32G X.....	64	EASY TOUCH LANCETS 26G/PU.....	65
DROPLET PERSONAL LANCETS.....	64	EASY TOUCH LANCETS 28G/PU.....	65
DROPSAFE ACTI-LANCE SAFTE.....	64	EASY TOUCH LANCETS 30G/PU.....	65
DROPSAFE AUTOPROTECT DUO/.....	64	EASY TOUCH LANCETS 32G/PU.....	65
DROPSAFE INSULIN SAFETY S.....	64	EASY TOUCH LANCETS 28G/TW.....	65
DROPSAFE MEDLANCE PLUS SA.....	64	EASY TOUCH LANCETS 30G/TW.....	65
DROPSAFE SAFETY PEN NEEDL.....	64	EASY TOUCH LANCETS 32G/TW.....	65
		EASY TOUCH LANCETS 33G/TW.....	65
		EASY TOUCH LANCING DEVICE.....	65
		EASY TOUCH PEN NEEDLE 30.....	65

EASY TOUCH PEN NEEDLE/30.....	66	emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg (Truvada).....	4
EASY TOUCH PEN NEEDLES 29.....	66	EMTRIVA.....	4
EASY TOUCH PEN NEEDLES 31.....	66	enalapril maleate & hydrochlorothiazide tab 5-12.5 mg.....	24
EASY TOUCH PEN NEEDLES 32.....	66	enalapril maleate & hydrochlorothiazide tab 10-25 mg (Vaseretic).....	24
EASY TOUCH PEN NEEDLES/31.....	66	enalapril maleate tab 2.5 mg, 5 mg, 10 mg, 20 mg (Vasotec).....	24
EASY TOUCH SAFETY LANCETS.....	66	ENBREL.....	43
EASY TOUCH SAFETY PEN NEE.....	66	ENBREL MINI.....	43
EASY TOUCH SHEATHLOCK SAF.....	66	ENBREL SURECLICK.....	43
econazole nitrate cream 1%.....	55	ENCARE.....	33
EDURANT PED.....	3	ENDARI.....	49
EFAVIRENZ/LAMIVUDINE/TENO.....	3	ENERGIX-B.....	7
efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg (Atripla).....	3	enoxaparin sodium inj 300 mg/3ml (Lovenox).....	50
efavirenz-lamivudine-tenofovir df tab 600-300-300 mg (Symfi).....	3	enoxaparin sodium inj soln pref syr 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml, 100 mg/ml, 120 mg/0.8ml, 150 mg/ml (Lovenox).....	50
efavirenz tab 600 mg (Sustiva).....	3	ENSPRYNG.....	86
ELESTRIN.....	15	ENSTILAR.....	55
eletriptan hydrobromide tab 20 mg (base equivalent), 40 mg (base equivalent) (Relpax).....	44	entacapone tab 200 mg (Comtan).....	47
ELIQUIS.....	50	entecavir tab 0.5 mg, 1 mg (Baraclude).....	4
ELIQUIS STARTER PACK.....	50	ENTYVIO PEN.....	31
ELLA.....	15	ENVARUS XR.....	86
ELMIRON.....	33	EPCLUSA.....	4
eltrombopag olamine powder pack for susp 25 mg (base equiv), 12.5 mg (base eq) (Promacta).....	49	EPIDIOLEX.....	45
eltrombopag olamine tab 12.5 mg (base equiv), 25 mg (base equiv), 50 mg (base equiv), 75 mg (base equiv) (Promacta).....	49	EPINEPHRINE.....	26
EMBECTA AUTOSHIELD DUO 30.....	66	epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000) (Epipen-jr 2-pak).....	26
EMBECTA INSULIN SYRINGE.....	66	epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000) (Epipen 2-pak).....	26
EMBECTA INSULIN SYRINGE/.....	66	eplerenone tab 25 mg, 50 mg (Inspra).....	24
EMBECTA INSULIN SYRINGE/0.....	66	EPOGEN.....	49
EMBECTA INSULIN SYRINGE/1.....	66	EQL SHORT PEN NEEDLES 31G.....	67
EMBECTA INSULIN SYRINGE/2.....	66	EQL ULTRA SHORT PEN NEEDL.....	67
EMBECTA INSULIN SYRINGE/U.....	66	EQUETRO.....	35
EMBECTA INSULIN SYRINGE U.....	66	ergocalciferol cap 1.25 mg (50000 unit) (Drisdol).....	48
EMBECTA PEN NEEDLE/NANO 2.....	66	ERGOMAR.....	44
EMBECTA PEN NEEDLE/NANO/3.....	66	ERIVEDGE.....	10
EMBECTA PEN NEEDLE/ULTRA.....	66	ERLEADA.....	10
EMBECTA SAFETY INSULIN SY.....	67	erlotinib hcl tab 25 mg (base equivalent), 100 mg (base equivalent), 150 mg (base equivalent) (Tarceva).....	10
EMBRACE LANCETS ULTRA THI.....	67	ERVEBO.....	7
EMBRACE LANCING DEVICE WI.....	67	erythromycin ethylsuccinate for susp 200 mg/5ml (E.e.s. granules).....	2
EMBRACE PEN NEEDLES/29G X.....	67	erythromycin ethylsuccinate for susp 400 mg/5ml (Eryped 400).....	2
EMBRACE PEN NEEDLES/30G X.....	67	erythromycin ophth oint 5 mg/gm.....	52
EMBRACE PEN NEEDLES/31G X.....	67	erythromycin soln 2%.....	55
EMBRACE PEN NEEDLES/32G X.....	67	erythromycin tab delayed release 250 mg, 333 mg, 500 mg.....	2
EMBRACE PRESSURE ACTIVATE.....	67	erythromycin tab 250 mg, 500 mg.....	2
EMEND.....	31	escitalopram oxalate soln 5 mg/5ml (base equiv).....	34
EMGALITY.....	44	escitalopram oxalate tab 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv) (Lexapro).....	34
EMPAVELI.....	51		
EMSAM.....	34		
emtricitabine caps 200 mg (Emtriva).....	4		
emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg (Complera).....	4		
emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg, 133-200 mg, 167-250 mg (Truvada).....	4		

eslicarbazepine acetate tab 200 mg, 400 mg, 600 mg, 800 mg (Aptiom).....	45	ezetimibe-simvastatin tab 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg (Vytorin).....	26
esomeprazole magnesium cap delayed release 40 mg (base eq) (Nexium).....	30	ezetimibe tab 10 mg (Zetia).....	26
esomeprazole magnesium for delayed release susp packet 5 mg, 10 mg, 20 mg, 40 mg (Nexium).....	30	E-Z JECT LANCETS SUPER TH.....	64
esomeprazole magnesium for delayed release susp pack 2.5 mg (Nexium).....	30	F	
estazolam tab 1 mg, 2 mg.....	37	famciclovir tab 125 mg, 250 mg, 500 mg.....	4
estradiol & norethindrone acetate tab 0.5-0.1 mg.....	15	famotidine tab 40 mg (Pepcid).....	30
estradiol & norethindrone acetate tab 1-0.5 mg (Activella).....	15	FANAPT.....	36
estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose pump) (Estrogel).....	15	FANAPT TITRATION PACK A.....	36
estradiol tab 0.5 mg, 1 mg, 2 mg (Estrace).....	15	FANAPT TITRATION PACK B.....	36
estradiol td gel 0.25 mg/0.25gm (0.1%), 0.5 mg/0.5gm (0.1%), 0.75 mg/0.75gm (0.1%), 1 mg/gm (0.1%), 1.25 mg/1.25gm (0.1%) (Divigel).....	15	FANAPT TITRATION PACK C.....	36
estradiol td patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr (Vivelle-dot).....	15	FASENRA PEN.....	28
estradiol td patch weekly 0.025 mg/24hr, 0.0375 mg/24hr (37.5 mcg/24hr), 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr (Climara).....	15	FC2 FEMALE CONDOM.....	67
estradiol vaginal cream 0.01% (Estrace).....	33	felbamate susp 600 mg/5ml (Felbatol).....	45
estradiol vaginal tab 10 mcg (Vagifem).....	33	felbamate tab 400 mg, 600 mg (Felbatol).....	45
estradiol valerate im in oil 10 mg/ml, 20 mg/ml, 40 mg/ml (Delestrogen).....	15	felodipine tab er 24hr 2.5 mg, 5 mg, 10 mg.....	23
ESTRING.....	33	FEMCAP.....	67
estrogens, conjugated tab 0.3 mg, 0.45 mg, 0.625 mg, 0.9 mg, 1.25 mg (Premarin).....	15	fenofibrate micronized cap 67 mg, 134 mg, 200 mg.....	26
eszopiclone tab 1 mg, 2 mg, 3 mg (Lunesta).....	37	fenofibrate tab 54 mg, 160 mg.....	26
ethambutol hcl tab 100 mg.....	2	fenofibrate tab 48 mg, 145 mg (Tricor).....	26
ethambutol hcl tab 400 mg (Myambutol).....	2	fentanyl td patch 72hr 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr, 100 mcg/hr.....	41
ethosuximide cap 250 mg (Zarontin).....	45	ferric citrate tab 1 gm (210 mg ferric iron) (Auryxia).....	31
ethosuximide soln 250 mg/5ml (Zarontin).....	45	FERRIPROX.....	56
ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg.....	15	ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe), 220 mg/5ml (44 mg/5ml elemental fe), 300 mg/5ml (60 mg/5ml elemental fe).....	49
etodolac cap 200 mg, 300 mg.....	43	fesoterodine fumarate tab er 24hr 4 mg, 8 mg (Toviaz).....	32
etodolac tab er 24hr 600 mg.....	43	FETZIMA.....	34
etodolac tab er 24hr 400 mg, 500 mg.....	43	FETZIMA TITRATION PACK.....	34
etodolac tab 500 mg.....	43	FIASP.....	18
etodolac tab 400 mg (Lodine).....	43	FIASP FLEXTOUCH.....	18
etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr (Nuvaring).....	16	FIASP PENFILL.....	18
ETOPOSIDE.....	10	FIASP PUMPCART.....	18
etravirine tab 100 mg, 200 mg (Intelence).....	4	fidaxomicin tab 200 mg (Dificid).....	2
EVAMIST.....	15	FIFTY50 PEN NEEDLES/31GX8.....	67
everolimus tab for oral susp 2 mg, 3 mg, 5 mg (Afinitor disperz).....	10	FIFTY50 PEN NEEDLES/32GX4.....	67
everolimus tab 2.5 mg, 5 mg, 7.5 mg, 10 mg (Afinitor).....	10	FIFTY50 PEN NEEDLES/32GX6.....	67
everolimus tab 0.25 mg, 0.5 mg, 0.75 mg, 1 mg (Zortress).....	86	FIFTY50 PEN NEEDLES 31GX5.....	67
EVOTAZ.....	4	FIFTY50 PEN NEEDLES 31G X.....	67
EVRYSDI.....	48	FIFTY50 SAFETY SEAL LANCE.....	67
exemestane tab 25 mg (Aromasin).....	10	FIFTY50 SUPERIOR COMFORT.....	67
		FIFTY50 UNILET LANCETS 33.....	67
		FILSPARI.....	33
		finasteride tab 5 mg (Proscar).....	33
		FINGERSTIX LANCETS.....	67
		finolimod hcl cap 0.5 mg (base equiv) (Gilenya).....	39
		FINTEPLA.....	45
		FIRDAPSE.....	48
		FLAREX.....	52
		flecainide acetate tab 50 mg, 100 mg, 150 mg.....	23
		FLORIVA.....	48
		FLUAD 2026-2027.....	7
		FLUARIX 2026-2027.....	7

FLUBLOK 2026-2027.....	7	FORA LANCETS.....	67
FLUCELVAX 2026-2027.....	7	FORA LANCING DEVICE.....	67
fluconazole for susp 10 mg/ml, 40 mg/ml (Diflucan).....	3	FORA LANCING DEVICE/CLEAR.....	67
fluconazole tab 50 mg, 100 mg, 150 mg, 200 mg (Diflucan).....	3	fosamprenavir calcium tab 700 mg (base equiv) (Lexiva).....	4
flucytosine cap 250 mg, 500 mg (Ancobon).....	3	fosfomycin tromethamine powd pack 3 gm (base equivalent) (Monurol).....	6
fludrocortisone acetate tab 0.1 mg.....	14	fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg.....	24
FLULAVAL 2026-2027.....	7	fosinopril sodium tab 10 mg, 20 mg, 40 mg.....	24
FLUMIST NASAL VACCINE 202.....	7	FOTIVDA.....	10
fluocinolone acetonide cream 0.01%.....	55	FOUNDAYO.....	38
fluocinolone acetonide oil 0.01% (body oil) (Derma-smoothe/fs bod).....	55	FRAGMIN.....	50
fluocinolone acetonide oil 0.01% (scalp oil) (Derma-smoothe/fs sca).....	55	FREESTYLE FREEDOM LITE.....	67
fluocinolone acetonide oint 0.025% (Synalar).....	55	FREESTYLE INSULINX BLOOD.....	57
fluocinolone acetonide (otic) oil 0.01% (Dermotic).....	53	FREESTYLE LANCETS.....	67
fluocinolone acetonide soln 0.01% (Synalar).....	55	FREESTYLE LITE BLOOD GLUC.....	67
fluocinonide cream 0.05%.....	55	FREESTYLE LITE TEST STRIP.....	57
fluocinonide cream 0.1% (Vanos).....	55	FREESTYLE PRECISION NEO B.....	57
fluocinonide gel 0.05%.....	55	FREESTYLE TEST STRIPS.....	57
fluocinonide oint 0.05%.....	55	FREESTYLE UNISTICK II LAN.....	67
fluocinonide soln 0.05%.....	55	FULPHILA.....	49
FLUORIDE.....	48	FUROSEMIDE.....	25
FLUORIDEX DAILY DEFENSE.....	53	furosemide tab 20 mg, 40 mg, 80 mg (Lasix).....	25
FLUORIDEX DAILY RENEWAL.....	53		
FLUORIDEX ENHANCED WHITEN.....	53	G	
FLUORIDEX SENSITIVITY REL.....	53	gabapentin cap 100 mg, 300 mg, 400 mg (Neurontin).....	45
FLUORIMAX 5000.....	53	gabapentin oral soln 250 mg/5ml (Neurontin).....	46
fluorometholone ophth susp 0.1% (Fml liquifilm).....	52	gabapentin tab 600 mg, 800 mg (Neurontin).....	46
fluorouracil cream 5% (Efudex).....	55	GALAFOLD.....	20
fluorouracil soln 5%.....	55	galantamine hydrobromide cap er 24hr 8 mg, 16 mg, 24 mg (Razadyne er).....	39
fluoxetine hcl cap 10 mg, 20 mg, 40 mg (Prozac).....	34	galantamine hydrobromide tab 4 mg, 8 mg, 12 mg.....	40
fluoxetine hcl solution 20 mg/5ml.....	34	ganirelix acetate soln prefilled syringe 250 mcg/0.5ml (Ganirelix acetate).....	20
fluoxetine hcl tab 10 mg, 20 mg.....	34	GARDASIL 9.....	7
fluoxetine hcl tab 60 mg (Fluoxetine hydrochlo).....	34	gatifloxacin ophth soln 0.5% (Zymaxid).....	52
FLUOXETINE HYDROCHLORIDE.....	39	GAVRETO.....	10
fluphenazine decanoate inj 25 mg/ml.....	36	gefitinib tab 250 mg (Iressa).....	10
FLUPHENAZINE HCL.....	36	gemfibrozil tab 600 mg (Lopid).....	26
fluphenazine hcl tab 1 mg, 2.5 mg, 5 mg, 10 mg.....	36	GENOTROPIN.....	20
FLUPHENAZINE HYDROCHLORID.....	36	GENOTROPIN MINIQUEL.....	20
FLUTICASONE FUROATE ELLIP.....	28	gentamicin sulfate cream 0.1%.....	55
FLUTICASONE PROPIONATE/SA.....	28	gentamicin sulfate ophth soln 0.3%.....	52
fluticasone propionate cream 0.05%.....	55	GENTEEL BUTTERFLY TOUCH L.....	67
fluticasone propionate oint 0.005%.....	55	GENTEEL PLUS LANCING DEVI.....	67
fluticasone-salmeterol aer powder ba 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act (Advair diskus).....	28	GENVOYA.....	4
fluvoxamine maleate tab 25 mg, 50 mg, 100 mg.....	35	GILENYA.....	40
FLUZONE 2026-2027.....	7	GILOTRIF.....	10
FLUZONE HIGH-DOSE 2026-20.....	7	glatiramer acetate soln prefilled syringe 20 mg/ml, 40 mg/ml (Copaxone).....	40
folic acid cap 0.8 mg.....	49	glimepiride tab 1 mg, 2 mg, 4 mg (Amaryl).....	17
folic acid tab 400 mcg, 800 mcg.....	49	glipizide-metformin hcl tab 2.5-250 mg, 2.5-500 mg, 5-500 mg.....	17
folic acid tab 1 mg.....	49	glipizide tab er 24hr 2.5 mg, 5 mg, 10 mg (Glucotrol xl).....	17
FOLLISTIM AQ.....	20		
fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml, 10 mg/0.8ml (Arixtra).....	50		
FONDCIRCLE LANCING DEVICE.....	67		
FONDCIRCLE SINGLE USE LAN.....	67		

glipizide tab 5 mg, 10 mg	17	GVOKE KIT	17
GLOBAL EASE INJECT PEN NE.....	68	GVOKE PFS	17
GLOBAL EASY GLIDE INSULIN.....	68	GYNAZOLE-1	33
GLOBAL EASY GLIDE PEN NEE.....	68		
GLOBAL INJECT EASE INSULI.....	68	H	
GLOBAL INJECT EASE LANCET.....	68	HADLIMA	43
GLOBAL INSULIN SYRINGE/U.....	68	HADLIMA PUSHTOUCH	43
GLOBAL INSULIN SYRINGES/U.....	68	HAEGARDA	51
GLOBAL LANCING DEVICE.....	68	HAEMOLANCE	69
GLUCAGON EMERGENCY KIT FO.....	17	HAEMOLANCE LOW FLOW LANCE	69
glucagon for inj 1 mg	17	HAEMOLANCE PLUS	69
GLUCOCOM LANCETS 28G.....	68	HAEMOLANCE PLUS HIGH FLOW	69
GLUCOCOM LANCETS 30G.....	68	HAEMOLANCE PLUS LOW FLOW	69
GLUCOCOM LANCETS 33G.....	68	HAEMOLANCE PLUS MAX FLOW	69
GLUCOPRO INSULIN SYRINGE/.....	68	HAEMOLANCE PLUS PEDIATRIC	69
glutamine (sickle cell) powd pack 5 gm (Endari)	49	halobetasol propionate cream 0.05%	55
glyburide-metformin tab 1.25-250 mg, 2.5-500 mg,		haloperidol decanoate im soln 50 mg/ml (Haldol	
5-500 mg	17	decanoate 50)	36
glyburide tab 1.25 mg, 2.5 mg, 5 mg	17	haloperidol decanoate im soln 100 mg/ml (Haldol	
glycopyrrolate oral soln 1 mg/5ml (Cuvposa)	30	decanoate 100)	36
glycopyrrolate tab 1 mg (Robinul)	30	haloperidol lactate inj 5 mg/ml	36
glycopyrrolate tab 2 mg (Robinul forte)	30	haloperidol lactate oral conc 2 mg/ml	36
GLYXAMBI.....	17	haloperidol tab 0.5 mg, 1 mg, 2 mg, 5 mg, 10 mg, 20	
GNP INSULIN SYRINGE/0.5ML.....	68	mg	36
GNP INSULIN SYRINGE/1ML/3.....	68	HARVONI	4
GNP INSULIN SYRINGES/1/2M.....	68	HAVRIX	7
GNP INSULIN SYRINGES/0.3M.....	68	HEALTHWISE INSULIN SYRING	69
GNP INSULIN SYRINGES/1ML/.....	68	HEALTHWISE MICRON PEN NEE	69
GNP LANCING SYSTEM DEVICE.....	68	HEALTHWISE MINI PEN NEEDL	70
GNP PEN NEEDLES 31GX5MM.....	68	HEALTHWISE SHORT PEN NEED	70
GNP PEN NEEDLES 31GX8MM.....	68	H-E-B INCONTROL ADVANCED	69
GNP PEN NEEDLES 32GX4MM.....	68	H-E-B INCONTROL LANCETS M	69
GNP PEN NEEDLES 32GX6MM.....	68	H-E-B INCONTROL LANCETS S	69
GNP SIMPLI MICRO PEN NEED.....	69	H-E-B INCONTROL LANCETS U	69
GNP STERILE LANCETS 28G.....	69	H-E-B IN CONTROL PEN NEED	69
GNP STERILE LANCETS 30G.....	69	H-E-B INCONTROL PEN NEEDL	69
GNP STERILE LANCETS 33G.....	69	H-E-B IN CONTROL UNIFINE	69
GNP ULTICARE PEN NEEDLES.....	69	HEPARIN SODIUM	50
GNP ULTICARE PEN NEEDLES/.....	69	heparin sodium (porcine) inj 1000 unit/ml, 5000 unit/ml,	
GNP ULTIGUARD SAFEPAK/MI.....	69	10000 unit/ml, 20000 unit/ml	50
GNP ULTIGUARD SAFEPAK/SH.....	69	heparin sodium (porcine) pf inj 1000 unit/ml, 5000	
GNP ULTRA COMFORT INSULIN.....	69	unit/0.5ml	50
GOJJI LANCING DEVICE/CLEA.....	69	HEPLISAV-B	8
GOJJI STERILE LANCETS 30G.....	69	HETLIOZ	37
GOMEKLI.....	10	HETLIOZ LQ	37
granisetron hcl tab 1 mg	31	HIBERIX	8
GRANIX.....	49	HM ULTICARE INSULIN SYRIN	70
GRASTEK.....	9	HM ULTICARE MINI PEN NEED	70
griseofulvin microsize susp 125 mg/5ml	3	HM ULTICARE SHORT PEN NEE	70
griseofulvin microsize tab 500 mg	3	HUMALOG	18
griseofulvin ultramicrosize tab 125 mg, 250 mg	3	HUMALOG JUNIOR KWIKPEN	18
guanfacine hcl tab er 24hr 1 mg (base equiv), 2 mg		HUMALOG KWIKPEN	18
(base equiv), 3 mg (base equiv), 4 mg (base equiv)		HUMALOG MIX 75/25	19
(Intuniv)	38	HUMALOG MIX 50/50 KWIKPEN	19
guanfacine hcl tab 1 mg, 2 mg	24	HUMALOG MIX 75/25 KWIKPEN	19
GVOKE HYOPEN 1-PACK	17	HUMULIN 70/30	19
GVOKE HYOPEN 2-PACK	17	HUMULIN 70/30 KWIKPEN	19

HUMULIN N.....	19	INCRELEX.....	21
HUMULIN N KWIKPEN.....	19	indapamide tab 1.25 mg, 2.5 mg.....	25
HUMULIN R.....	18	indomethacin cap er 75 mg.....	43
HUMULIN R U-500 KWIKPEN.....	18	indomethacin cap 25 mg, 50 mg.....	43
HYCANTIN.....	10	INFANRIX.....	9
hydralazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg.....	24	INGREZZA.....	40
hydrochlorothiazide cap 12.5 mg.....	25	INLYTA.....	11
hydrochlorothiazide tab 12.5 mg, 25 mg, 50 mg.....	25	INQOVI.....	11
HYDROCODONE/IBUPROFEN.....	42	INREBIC.....	11
hydrocodone-acetaminophen soln 7.5-325 mg/15ml.....	42	INSULIN GLARGINE-YFGN.....	19
hydrocodone-acetaminophen tab 10-325 mg, 5-300 mg, 7.5-300 mg, 5-325 mg, 7.5-325 mg, 10-300 mg.....	42	INSULIN SYRINGE/0.3ML/30G.....	70
HYDROCODONE BITARTRATE/AC.....	41	INSULIN SYRINGE/0.3ML/31G.....	70
hydrocodone-ibuprofen tab 7.5-200 mg.....	42	INSULIN SYRINGE/0.5ML/28G.....	70
HYDROCODONE POLISTIREX/CH.....	27	INSULIN SYRINGE/0.5ML/30G.....	70
HYDROCORTISONE.....	54	INSULIN SYRINGE/0.5ML/31G.....	70
hydrocortisone cream 2.5%.....	55	INSULIN SYRINGE/1ML/29G X.....	70
hydrocortisone enema 100 mg/60ml (Cortenema).....	54	INSULIN SYRINGE/1ML/30G X.....	70
hydrocortisone oint 2.5%.....	55	INSULIN SYRINGE/NEEDLE 0.....	70
hydrocortisone perianal cream 2.5% (Anusol-hc).....	54	INSULIN SYRINGE/NEEDLE 1M.....	70
hydrocortisone tab 5 mg, 10 mg, 20 mg (Cortef).....	14	INSULIN SYRINGE/U-100/0.3.....	70
hydrocortisone w/ acetic acid otic soln 1-2%.....	53	INSULIN SYRINGE/U-100/0.5.....	70
hydromorphone hcl liqd 1 mg/ml (Dilaudid).....	42	INSULIN SYRINGE/U-100/1ML.....	70
hydromorphone hcl tab 2 mg, 4 mg, 8 mg (Dilaudid).....	42	INSULIN SYRINGES/U-100/0.....	70
HYDROXYCHLOROQUINE SULFAT.....	6	INSULIN SYRINGES/U-100/1M.....	70
hydroxychloroquine sulfate tab 200 mg (Plaquenil).....	6	INSUPEN32G EXTR3ME/32G X.....	71
hydroxyurea cap 500 mg (Hydrea).....	10	INSUPEN 33GX4MM.....	71
hydroxyzine hcl syrup 10 mg/5ml.....	34	INSUPEN 29G X 12MM.....	70
hydroxyzine hcl tab 10 mg, 25 mg, 50 mg.....	34	INSUPEN 31G X 5MM.....	71
hydroxyzine pamoate cap 25 mg, 50 mg (Vistaril).....	34	INSUPEN 31G X 8MM.....	71
HYFTOR.....	55	INSUPEN 32G X 4MM.....	71
HY-VEE LANCETS.....	70	IN TOUCH LANCING DEVICE.....	70
HY-VEE THIN LANCETS.....	70	IN TOUCH STERILE LANCETS.....	70
I		INVEGA HAFYERA.....	36
ibandronate sodium tab 150 mg (base equivalent) (Boniva).....	21	INVEGA SUSTENNA.....	36
IBRANCE.....	10	INVEGA TRINZA.....	36
ibuprofen tab 400 mg, 600 mg, 800 mg.....	43	IPOL INACTIVATED IPV.....	8
icatibant acetate subcutaneous soln pref syr 30 mg/3ml (Firazyr).....	51	ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml.....	29
ICLUSIG.....	10	ipratropium bromide hfa inhal aerosol 17 mcg/act (Atrovent hfa).....	29
icosapent ethyl cap 0.5 gm, 1 gm (Vascepa).....	26	ipratropium bromide inhal soln 0.02%.....	29
IDHIFA.....	10	ipratropium bromide nasal soln 0.03% (21 mcg/spray), 0.06% (42 mcg/spray).....	27
IHEALTH LANCING DEVICE.....	70	IQIRVO.....	31
imatinib mesylate tab 100 mg (base equivalent), 400 mg (base equivalent) (Gleevec).....	11	irbesartan-hydrochlorothiazide tab 150-12.5 mg, 300-12.5 mg (Avalide).....	24
IMBRUVICA.....	11	irbesartan tab 75 mg, 150 mg, 300 mg (Avapro).....	24
IMCIVREE.....	21	ISENTRESS.....	4
imipramine hcl tab 10 mg, 25 mg, 50 mg.....	35	isoniazid syrup 50 mg/5ml.....	2
imiquimod cream 5%.....	55	isoniazid tab 100 mg, 300 mg.....	2
IMOVAX RABIES (H.D.C.V.).....	8	isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg (Bidil).....	27
IMPAVIDO.....	6	isosorbide dinitrate tab 10 mg, 20 mg, 30 mg.....	22
INBRIJA.....	47	isosorbide dinitrate tab 5 mg (Isordil titradose).....	22
INCONTROL ULTICARE MINI P.....	70	isosorbide mononitrate tab er 24hr 30 mg, 60 mg, 120 mg.....	22
		isotretinoin cap 10 mg, 20 mg, 30 mg, 40 mg (Absorica).....	55

ISTURISA.....	21
ITOVEBI.....	11
itraconazole cap 100 mg (Sporanox).....	3
itraconazole oral soln 10 mg/ml (Sporanox).....	3
ivabradine hcl tab 5 mg (base equiv), 7.5 mg (base equiv) (Corlanor).....	27
ivermectin cream 1% (Soolantra).....	55
ivermectin tab 3 mg (Stromectol).....	6
IWILFIN.....	11
IXIARO.....	8

J

JAKAFI.....	11
JAKAFI XR.....	11
JARDIANCE.....	17
JAYPIRCA.....	11
JULUCA.....	4
JUST RIGHT 5000.....	53
JUXTAPID.....	26
JYNNEOS.....	8

K

KALYDECO.....	29
KESIMPTA.....	40
ketoconazole cream 2%.....	55
ketoconazole shampoo 2%.....	55
ketoconazole tab 200 mg.....	3
KETONE.....	57
KETONE TEST STRIPS.....	57
KETOROLAC TROMETHAMINE.....	52
ketorolac tromethamine ophth soln 0.5% (Acular).....	52
ketorolac tromethamine tab 10 mg.....	43
KETOSTIX.....	57
KEVZARA.....	43
KINNEY LANCETS.....	71
KINNEY THIN LANCETS.....	71
KINRAY INSULIN SYRINGE/0.....	71
KINRIX.....	9
KISQALI.....	11
KITABIS PAK.....	2
KLOXXADO.....	57
KOMZIFTI.....	11
KOSELUGO.....	11
K-PHOS.....	48
K-PHOS NO 2.....	33
KRAZATI.....	11
KRINTAFEL.....	6
KROGER AUTOLET LANCING DE.....	71
KROGER HEALTHPRO TWIST LA.....	71
KROGER LANCETS.....	71
KROGER LANCETS SUPER THIN.....	71
KROGER LANCETS THIN.....	71
KROGER PEN NEEDLES/31G X.....	71
KROGER PEN NEEDLES/32G X.....	71
KROGER PEN NEEDLES/33G X.....	71

L

labetalol hcl tab 100 mg, 200 mg, 300 mg.....	22
lacosamide oral solution 10 mg/ml (Vimpat).....	46
lacosamide tab 50 mg, 100 mg, 150 mg, 200 mg (Vimpat).....	46
lactulose (encephalopathy) solution 10 gm/15ml.....	31
lactulose solution 10 gm/15ml.....	30
lamivudine oral soln 10 mg/ml (Epivir).....	4
lamivudine tab 150 mg, 300 mg (Epivir).....	4
lamivudine tab 100 mg (hbv) (Epivir hbv).....	4
lamivudine-zidovudine tab 150-300 mg (Combivir).....	4
lamotrigine tab chewable dispersible 5 mg, 25 mg (Lamictal chewable di).....	46
lamotrigine tab er 24hr 25 mg, 50 mg, 100 mg, 200 mg, 250 mg, 300 mg (Lamictal xr).....	46
lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg (Lamictal).....	46
lamotrigine tab 25 mg (42) & 100 mg (7) starter kit (Lamictal starter/not).....	46
lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit (Lamictal starter/tak).....	46
lamotrigine tab 35 x 25 mg starter kit (Lamictal starter/tak).....	46
LAMPIT.....	6
LANCET DEVICE ADJUSTABLE.....	71
LANCET DEVICE WITH EJECTO.....	71
LANCETS.....	71
LANCETS 30G.....	71
LANCETS 30G/TWIST TOP.....	71
LANCETS 33G EXTRA FINE.....	71
LANCETS 28G THIN.....	71
LANCETS 30G TWIST TOP.....	71
LANCETS 33G UNIVERSAL DES.....	71
LANCETS MICRO THIN 33G.....	71
LANCETS SUPER THIN 28G.....	71
LANCETS THIN.....	71
LANCETS ULTRA THIN 30G.....	71
LANCING DEVICE.....	71
LANOXIN.....	22
lansoprazole cap delayed release 30 mg (Prevacid).....	30
lanthanum carbonate chew tab 500 mg (elemental), 750 mg (elemental), 1000 mg (elemental) (Fosrenol).....	31
LANZO.....	71
lapatinib ditosylate tab 250 mg (base equiv) (Tykerb).....	11
latanoprost ophth soln 0.005% (Xalatan).....	52
LAZCLUZE.....	11
LEADER ADVANCED LANCING D.....	71
LEADER INSULIN SYRINGE/0.....	71
LEADER INSULIN SYRINGE/1M.....	71
LEADER LANCETS COLORED.....	71
LEADER THIN LANCETS.....	71
LEADER UNIFINE PENTIPS/MI.....	71
LEADER UNIFINE PENTIPS/NA.....	71

LEADER UNIFINE PENTIPS/PL.....	72	lidocaine patch 5% (Lidoderm).....	55
LEADER UNIFINE PENTIPS PL.....	71	lidocaine-prilocaine cream 2.5-2.5%.....	55
LEDIPASVIR/SOFOSBUVIR.....	4	linezolid tab 600 mg (Zyvox).....	6
leflunomide tab 10 mg, 20 mg (Arava).....	43	liothyronine sodium tab 5 mcg, 25 mcg, 50 mcg (Cytomel).....	20
lenalidomide cap 5 mg, 10 mg, 15 mg, 20 mg, 25 mg (Revlimid).....	86	liraglutide (weight mngmt) soln pen-inj 18 mg/3ml (6 mg/ml) (Saxenda).....	38
lenalidomide caps 2.5 mg (Revlimid).....	86	lisdexamphetamine dimesylate cap 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg (Vyvanse).....	38
LENVIMA 4 MG DAILY DOSE.....	11	lisdexamphetamine dimesylate chew tab 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg (Vyvanse).....	38
LENVIMA 8 MG DAILY DOSE.....	11	lisinopril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg (Zestoretic).....	24
LENVIMA 10 MG DAILY DOSE.....	11	lisinopril tab 2.5 mg, 5 mg, 10 mg, 20 mg, 30 mg, 40 mg (Zestril).....	24
LENVIMA 12MG DAILY DOSE.....	11	LITETOUCH INSULIN PEN NEE.....	72
LENVIMA 14 MG DAILY DOSE.....	11	LITETOUCH INSULIN SYRINGE.....	72
LENVIMA 18 MG DAILY DOSE.....	11	LITE TOUCH LANCETS.....	72
LENVIMA 20 MG DAILY DOSE.....	11	LITETOUCH LANCETS MICRO T.....	72
LENVIMA 24 MG DAILY DOSE.....	11	LITE TOUCH LANCING PEN.....	72
letrozole tab 2.5 mg (Femara).....	11	LITETOUCH PEN NEEDLES/31.....	72
leucovorin calcium tab 5 mg, 10 mg, 15 mg, 25 mg.....	11	LITETOUCH PEN NEEDLES/31G.....	72
LEUKERAN.....	11	LITETOUCH PEN NEEDLES 29G.....	72
leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml).....	11	LITETOUCH PEN NEEDLES 31G.....	72
levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv) (Xopenex concentrate).....	29	LITHIUM CARBONATE.....	36
levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv) (Xopenex).....	29	lithium carbonate cap 150 mg, 300 mg, 600 mg (Lithium carbonate).....	36
LEVALBUTEROL TARTRATE HFA.....	29	lithium carbonate tab er 450 mg.....	36
levetiracetam oral soln 100 mg/ml (Keppra).....	46	lithium carbonate tab er 300 mg (Lithobid).....	36
levetiracetam tab er 24hr 500 mg, 750 mg (Keppra xr).....	46	lithium carbonate tab 300 mg.....	36
levetiracetam tab 250 mg, 500 mg, 750 mg, 1000 mg (Keppra).....	46	lithium oral solution 8 meq/5ml.....	36
LEVOBUNOLOL HCL.....	52	LITHOSTAT.....	33
levocarnitine oral soln 1 gm/10ml (10%) (Carnitor).....	21	LIVE BETTER ADVANCED LANC.....	72
levocarnitine tab 330 mg (Carnitor).....	21	LIVE BETTER LANCET SUPER.....	72
LEVOFLOXACIN.....	52	LIVE BETTER LANCET ULTRA.....	72
levofloxacin oral soln 25 mg/ml.....	2	LIVE BETTER PEN NEEDLES 2.....	72
levofloxacin tab 250 mg, 500 mg, 750 mg.....	2	LIVE BETTER PEN NEEDLES 3.....	72
levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg (Quartette).....	16	LIVMARLI.....	32
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg.....	16	LIVTENCITY.....	4
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg, 0.15 mg-30 mcg.....	16	lofexidine hcl tab 0.18 mg (base equivalent) (Lucemyra).....	40
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg.....	16	LOKELMA.....	86
levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg.....	16	LO LOESTRIN FE.....	16
levonorgestrel tab 1.5 mg.....	16	lomustine cap 10 mg, 40 mg, 100 mg (Gleostine).....	11
levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7) (Loseasonique).....	16	LONSURF.....	11
levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7) (Seasonique).....	16	lopinavir-ritonavir tab 100-25 mg, 200-50 mg (Kaletra).....	4
levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg (Synthroid).....	20	lorazepam conc 2 mg/ml.....	34
LIBERTY MEDICAL LANCETS 3.....	72	lorazepam tab 0.5 mg, 1 mg, 2 mg (Ativan).....	34
lidocaine hcl soln 4%.....	55	LORBRENA.....	11
lidocaine hcl viscous soln 2%.....	53	losartan potassium & hydrochlorothiazide tab 50-12.5 mg, 100-12.5 mg, 100-25 mg (Hyzaar).....	24
		losartan potassium tab 25 mg, 50 mg, 100 mg (Cozaar).....	25
		LOTEMAX.....	52
		LOTEMAX SM.....	52
		loteprednol etabonate ophth gel 0.5% (Lotemax).....	52

loteprednol etabonate ophth susp 0.2% (Alrex).....	52	mefloquine hcl tab 250 mg.....	6
loteprednol etabonate ophth susp 0.5% (Lotemax).....	52	megestrol acetate susp 40 mg/ml.....	12
loteprednol etabonate-tobramycin ophth susp 0.5-0.3% (Zylet).....	52	megestrol acetate tab 20 mg, 40 mg.....	12
lovastatin tab 10 mg.....	26	MEIJER COLOR LANCETS UNIV.....	73
lovastatin tab 20 mg, 40 mg.....	26	MEIJER LANCETS.....	73
loxapine succinate cap 5 mg, 10 mg, 25 mg, 50 mg.....	36	MEIJER LANCETS THIN.....	73
lubiprostone cap 8 mcg, 24 mcg (Amitiza).....	32	MEIJER LANCETS UNIVERSAL.....	73
LUCEMYRA.....	40	MEIJER PEN NEEDLES 29G X.....	73
LUMAKRAS.....	11	MEIJER PEN NEEDLES 31G X.....	73
LUPKYNIS.....	87	MEIJER SUPER THIN LANCETS.....	73
lurasidone hcl tab 20 mg, 40 mg, 60 mg, 80 mg, 120 mg (Latuda).....	36	MEKINIST.....	12
LYNPARZA.....	11	MEKTOVI.....	12
LYSODREN.....	11	meloxicam tab 7.5 mg, 15 mg.....	43
LYTGOBI.....	12	memantine hcl tab 5 mg, 10 mg (Namenda).....	40
LYUMJEV.....	18	MEMANTINE HCL TITRATION P.....	40
LYUMJEV KWIKPEN.....	18	MENOPUR.....	21
M		MENOSTAR.....	15
macitentan tab 10 mg (Opsumit).....	27	MENQUADFI.....	8
MAGELLAN INSULIN SAFETY S.....	72	MENVEO.....	8
malathion lotion 0.5% (Ovide).....	55	mercaptapurine susp 2000 mg/100ml (20 mg/ml) (Purixan).....	12
MARATHON MEDICAL PENTIPS.....	72	mercaptapurine tab 50 mg.....	12
maraviroc tab 150 mg, 300 mg (Selzentry).....	4	mesalamine cap er 24hr 0.375 gm (Apriso).....	32
MARPLAN.....	35	MESALAMINE DR.....	32
MATULANE.....	12	mesalamine enema 4 gm.....	32
MAVYRET.....	4	mesalamine suppos 1000 mg (Canasa).....	32
MAXICOMFORT II PEN NEEDLE.....	72	mesalamine tab delayed release 1.2 gm (Lialda).....	32
MAXI-COMFORT INSULIN SYRI.....	72	mesalamine tab delayed release 800 mg.....	32
MAXICOMFORT INSULIN SYRIN.....	72	mesna tab 400 mg (Mesnex).....	12
MAXI-COMFORT SAFETY PEN N.....	72	metaxalone tab 400 mg, 800 mg.....	48
MAXIDEX.....	52	metformin hcl tab er 24hr 500 mg, 750 mg.....	17
MAYZENT.....	40	metformin hcl tab 625 mg.....	17
MAYZENT STARTER PACK.....	40	metformin hcl tab 500 mg, 850 mg, 1000 mg.....	17
meclizine hcl tab 25 mg.....	31	methadone hcl conc 10 mg/ml (Methadose).....	42
MEDICHOICE PRE-SET SAFETY.....	72	methadone hcl soln 5 mg/5ml, 10 mg/5ml (Methadone hcl).....	42
MEDICHOICE SAFETY LANCET.....	73	methadone hcl tab for oral susp 40 mg.....	42
MEDICINE SHOPPE LANCETS.....	73	methadone hcl tab 5 mg, 10 mg.....	42
MEDICINE SHOPPE LANCETS T.....	73	METHADOSE.....	42
MEDICINE SHOPPE PEN NEEDL.....	73	METHADOSE SUGAR-FREE.....	42
MEDIC INSULIN SYRINGE/0.3.....	72	methazolamide tab 25 mg, 50 mg.....	25
MEDIC INSULIN SYRINGE/0.5.....	72	methenamine hippurate tab 1 gm (Hiprex).....	6
MEDLANCE PLUS/LITE 25G.....	73	methimazole tab 5 mg, 10 mg.....	20
MEDLANCE PLUS EXTRA LANCE.....	73	METHITEST.....	14
MEDLANCE PLUS LANCETS LIT.....	73	methocarbamol tab 500 mg, 750 mg, 1000 mg.....	48
MEDLANCE PLUS LITE LANCET.....	73	METHOTREXATE SODIUM.....	12
MEDLANCE PLUS SPECIAL LAN.....	73	methotrexate sodium inj pf 50 mg/2ml (25 mg/ml), 250 mg/10ml (25 mg/ml), 1000 mg/40ml (25 mg/ml).....	12
MEDLANCE PLUS SUPERLITE 3.....	73	methotrexate sodium tab 2.5 mg (base equiv).....	12
MEDLANCE PLUS UNIVERSAL L.....	73	METHOXSALEN.....	56
MEDROL.....	14	methscopolamine bromide tab 2.5 mg, 5 mg.....	30
medroxyprogesterone acetate im susp 150 mg/ml (Depo-provera contrac).....	16	methsuximide cap 300 mg (Celontin).....	46
medroxyprogesterone acetate im susp prefilled syr 150 mg/ml (Depo-provera contrac).....	16	METHYLDOPA.....	25
medroxyprogesterone acetate tab 2.5 mg, 5 mg, 10 mg (Provera).....	16	methyldopa tab 250 mg.....	25
		methylergonovine maleate tab 0.2 mg.....	20
		methylphenidate hcl cap er 24hr 10 mg (la), 20 mg (la), 30 mg (la), 40 mg (la) (Ritalin la).....	38

methylphenidate hcl cap er 10 mg (cd), 20 mg (cd), 30 mg (cd), 40 mg (cd), 50 mg (cd), 60 mg (cd).....	38	mirtazapine orally disintegrating tab 15 mg, 30 mg, 45 mg (Remeron soltab).....	35
methylphenidate hcl chew tab 2.5 mg, 5 mg, 10 mg.....	38	mirtazapine tab 7.5 mg, 45 mg.....	35
methylphenidate hcl soln 5 mg/5ml, 10 mg/5ml (Methylin).....	38	mirtazapine tab 15 mg, 30 mg (Remeron).....	35
methylphenidate hcl tab er 10 mg, 20 mg.....	38	misoprostol tab 100 mcg, 200 mcg (Cytotec).....	30
methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 36 mg, 54 mg (Concerta).....	38	MM INSULIN SYRINGE/U-100/.....	73
methylphenidate hcl tab 5 mg, 10 mg, 20 mg (Ritalin).....	38	MM LANCING DEVICE.....	73
methylprednisolone tab 4 mg, 8 mg, 16 mg, 32 mg (Medrol).....	14	MM PEN NEEDLES 31G X 3/16.....	73
methylprednisolone tab therapy pack 4 mg (21) (Medrol dosepak).....	14	MM PEN NEEDLES 31G X 5/16.....	73
metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv).....	32	MM PEN NEEDLES 32G X 5/32.....	73
metoclopramide hcl tab 5 mg (base equivalent), 10 mg (base equivalent) (Reglan).....	32	MM PEN NEEDLES 31G X 1/4".....	73
metolazone tab 2.5 mg, 5 mg, 10 mg.....	25	M-M-R II.....	8
metoprolol & hydrochlorothiazide tab 50-25 mg, 100-25 mg, 100-50 mg.....	25	MM TWIST LANCETS.....	73
metoprolol succinate tab er 24hr 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv), 200 mg (tartrate equiv) (Toprol xl).....	22	MNEXSPIKE COVID-19 VACCIN.....	8
metoprolol tartrate tab 25 mg, 37.5 mg, 75 mg.....	22	MOBI CONNECT BLOOD GLUCOS.....	73
metoprolol tartrate tab 50 mg, 100 mg (Lopressor).....	22	MOBILE LANCETS 30G.....	73
metronidazole cap 375 mg (Flagyl).....	6	modafinil tab 100 mg, 200 mg (Provigil).....	38
metronidazole cream 0.75% (Metrocream).....	56	moexipril hcl tab 7.5 mg, 15 mg.....	25
metronidazole gel 0.75%.....	56	MOLINDONE HYDROCHLORIDE.....	36
metronidazole gel 1% (Metrogel).....	56	mometasone furoate cream 0.1%.....	56
metronidazole lotion 0.75% (Metrolotion).....	56	mometasone furoate oint 0.1%.....	56
metronidazole tab 250 mg, 500 mg.....	6	mometasone furoate solution 0.1% (lotion).....	56
metronidazole vaginal gel 0.75%.....	33	MONOJECT INSULIN SYRINGE.....	74
mexiletine hcl cap 150 mg, 200 mg, 250 mg.....	23	MONOJECT INSULIN SYRINGE/.....	74
MFLUSIVA 2026-27.....	8	MONOJECT ULTRA COMFORT IN.....	74
MICRODOT PEN NEEDLE/31G X.....	73	MONOLET LANCETS.....	74
MICRODOT PEN NEEDLE/32G X.....	73	MONOLET OPD LANCETS.....	74
MICRODOT PEN NEEDLE/33G X.....	73	MONOLETTOR SAFETY LANCETS.....	74
MICROLET LANCETS.....	73	montelukast sodium chew tab 4 mg (base equiv), 5 mg (base equiv) (Singulair).....	29
MICROLET NEXT.....	73	montelukast sodium tab 10 mg (base equiv) (Singulair).....	29
MICROLET NEXT LANCETS.....	73	morphine sulfate oral soln 10 mg/5ml, 100 mg/5ml (20 mg/ml).....	42
midodrine hcl tab 2.5 mg, 5 mg, 10 mg.....	26	morphine sulfate oral soln 20 mg/5ml (Morphine sulfate).....	42
MIFEPREX.....	21	morphine sulfate tab er 15 mg, 30 mg, 60 mg, 100 mg, 200 mg (Ms contin).....	42
mifepristone tab 300 mg (Korlym).....	17	morphine sulfate tab 15 mg, 30 mg (Morphine sulfate).....	42
mifepristone tab 200 mg (Mifeprex).....	21	MOUNJARO.....	17
milnacipran hcl tab 12.5 mg, 25 mg, 50 mg, 100 mg (Savella).....	40	MOVANTIK.....	32
milnacipran hcl tab 12.5 mg (5) & 25 mg (8) & 50 mg (42) pak (Savella titration pa).....	40	moxifloxacin hcl ophth soln 0.5% (base equiv) (Vigamox).....	52
MINI LANCING DEVICE.....	73	moxifloxacin hcl tab 400 mg (base equiv).....	2
minocycline hcl cap 50 mg, 75 mg, 100 mg.....	2	MRESVIA.....	8
minoxidil tab 2.5 mg, 10 mg.....	25	MULTAQ.....	23
mirabegron granules for oral extended release susp 8 mg/ml (Myrbetriq).....	32	MULTI-LANCET DEVICE.....	74
mirabegron tab er 24 hr 25 mg, 50 mg (Myrbetriq).....	32	mupirocin oint 2%.....	56
MIRCERA.....	49	MYALEPT.....	21
		MYCAPSSA.....	21
		mycophenolate mofetil cap 250 mg (Cellcept).....	87
		mycophenolate mofetil for oral susp 200 mg/ml (Cellcept).....	87
		mycophenolate mofetil tab 500 mg (Cellcept).....	87

mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv), 360 mg (mycophenolic acid equiv) (Myfortic).....	87	nifedipine tab er 24hr osmotic release 30 mg, 60 mg, 90 mg (Procardia xl).....	23
MYFEMBREE.....	15	nilotinib hcl cap 50 mg (base equivalent), 150 mg (base equivalent), 200 mg (base equivalent) (Tasigna).....	12
MYGLUCOHEALTH MGH SOFTLAN.....	74	NIMODIPINE.....	23
MYLERAN.....	12	nimodipine cap 30 mg.....	23
MYSOLINE.....	46	NINLARO.....	12
N		nintedanib esylate cap 100 mg (base equivalent), 150 mg (base equivalent) (Ofev).....	30
nabumetone tab 500 mg, 750 mg.....	43	nitazoxanide tab 500 mg.....	6
nadolol tab 20 mg, 40 mg, 80 mg (Corgard).....	23	nitisinone cap 2 mg, 5 mg, 10 mg, 20 mg (Orfadin).....	21
naloxone hcl inj 4 mg/10ml.....	57	NITRO-DUR.....	22
NALOXONE HYDROCHLORIDE.....	57	nitrofurantoin macrocrystalline cap 25 mg, 50 mg, 100 mg (Macrochantin).....	6
naltrexone hcl tab 50 mg.....	57	nitrofurantoin monohydrate macrocrystalline cap 100 mg (Macrobid).....	6
naproxen sodium tab 275 mg.....	43	nitroglycerin oint 2%.....	22
naproxen sodium tab 550 mg (Anaprox ds).....	43	nitroglycerin oint 0.4% (Rectiv).....	54
naproxen tab 250 mg, 375 mg.....	43	nitroglycerin sl tab 0.3 mg, 0.4 mg, 0.6 mg (Nitrostat).....	22
naproxen tab 500 mg (Naprosyn).....	43	nitroglycerin td patch 24hr 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr (Nitro-dur).....	22
naratriptan hcl tab 1 mg (base equiv), 2.5 mg (base equiv) (Amerge).....	44	nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray) (Nitrolingual pumpspr).....	22
NATACYN.....	52	NORDIPEN 5 INJECTION DEVI.....	74
NATAZIA.....	16	NORDITROPIN FLEXPPO.....	21
nateglinide tab 60 mg, 120 mg.....	17	norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr.....	16
NATROBA.....	56	norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg.....	16
NAYZILAM.....	46	norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg (Generess fe).....	16
nebivolol hcl tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent), 20 mg (base equivalent) (Bystolic).....	23	norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg, 0.5 mg-35 mcg, 1 mg-35 mcg.....	16
NEBUSAL.....	27	norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg, 1.5 mg-30 mcg.....	16
neomycin-polymyxin-dexamethasone ophth oint 0.1% (Maxitrol).....	52	norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg, 1.5 mg-30 mcg.....	16
neomycin-polymyxin-dexamethasone ophth susp 0.1% (Maxitrol).....	52	norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24) (Minastrin 24 fe).....	16
neomycin-polymyxin-hc otic soln 1%.....	53	norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24).....	16
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%.....	53	norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg, 1 mg-5 mcg.....	15
neomycin sulfate tab 500 mg.....	2	norethindrone acetate tab 5 mg (Aygestin).....	17
NEORAL.....	87	norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg.....	16
NERLYNX.....	12	norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg.....	16
NEULASTA.....	50	norethindrone tab 0.35 mg.....	16
NEUPRO.....	47	norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg.....	16
NEVIRAPINE.....	4	norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg, 0.18-35/0.215-35/0.25-35 mg-mcg.....	16
nevirapine tab er 24hr 400 mg.....	4	norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg.....	16
nevirapine tab 200 mg.....	4	NORPACE.....	23
NEXAVAR.....	12		
NEXLETOL.....	26		
NEXLIZET.....	26		
niacin tab er 750 mg (antihyperlipidemic), 1000 mg (antihyperlipidemic) (Niaspan).....	26		
nicotine polacrilex gum 2 mg, 4 mg.....	40		
nicotine polacrilex lozenge 2 mg, 4 mg.....	40		
nicotine td patch 24hr 7 mg/24hr, 14 mg/24hr, 21 mg/24hr.....	40		
NICOTINE TRANSDERMAL SYST.....	40		
NICOTROL NS.....	40		
nifedipine cap 10 mg, 20 mg.....	23		
nifedipine tab er 24hr 30 mg, 60 mg, 90 mg.....	23		

nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 75 mg (Pamelor)	35	olanzapine orally disintegrating tab 5 mg, 10 mg, 15 mg, 20 mg (Zyprexa zydis)	36
nortriptyline hcl soln 10 mg/5ml	35	olanzapine tab 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg (Zyprexa)	36
NOVA SAFETY LANCETS 23G.....	74	olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg, 40-5-12.5 mg, 40-5-25 mg, 40-10-12.5 mg, 40-10-25 mg (Tribenzor)	25
NOVA SAFETY LANCETS 28G.....	74	olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg, 40-12.5 mg, 40-25 mg (Benicar hct)	25
NOVA SUREFLEX LANCETS.....	74	olmesartan medoxomil tab 5 mg, 20 mg, 40 mg (Benicar)	25
NOVA SUREFLEX LANCING DEV.....	74	omega-3-acid ethyl esters cap 1 gm (Lovaza)	26
NOVOFINE PEN NEEDLE 32G X.....	74	omeprazole cap delayed release 10 mg, 40 mg	31
NOVOFINE PLUS PEN NEEDLE.....	74	OMNIFLEX DIAPHRAGM.....	74
NOVOLIN 70/30.....	19	OMNIPOD DASH INTRO KIT (G.....	74
NOVOLIN 70/30 FLEXPEN.....	19	OMNIPOD DASH PODS (GEN 4).....	74
NOVOLIN 70/30 FLEXPEN REL.....	19	OMNIPOD 5 DEXCOM G7G6 INT.....	74
NOVOLIN 70/30 RELION.....	19	OMNIPOD 5 DEXCOM G7G6 POD.....	74
NOVOLIN N.....	19	OMNIPOD 5 LIBRE INTRO KIT.....	74
NOVOLIN N FLEXPEN.....	19	OMNIPOD 5 LIBRE PODS.....	74
NOVOLIN N FLEXPEN RELION.....	19	ondansetron hcl oral soln 4 mg/5ml	31
NOVOLIN N RELION.....	19	ondansetron hcl tab 4 mg, 8 mg	31
NOVOLIN R.....	18	ondansetron orally disintegrating tab 4 mg, 8 mg	31
NOVOLIN R FLEXPEN.....	19	ONUREG.....	12
NOVOLIN R FLEXPEN RELION.....	19	OPILL.....	16
NOVOLIN R RELION.....	19	OPTIONS GYNOL II VAGINAL.....	33
NOVOLOG.....	18	ORAVIG.....	53
NOVOLOG FLEXPEN.....	18	ORENCIA.....	43
NOVOLOG FLEXPEN RELION.....	18	ORENCIA CLICKJECT.....	43
NOVOLOG MIX 70/30.....	19	ORENITRAM.....	27
NOVOLOG MIX 70/30 PREFILL.....	19	ORENITRAM TITRATION KIT M.....	27
NOVOLOG MIX 70/30 RELION.....	19	ORGOVYX.....	12
NOVOLOG PENFILL.....	18	ORIAHNN.....	15
NOVOLOG RELION.....	18	ORILISSA.....	21
NOVOPEN ECHO.....	74	ORKAMBI.....	30
NUBEQA.....	12	ORLISTAT.....	38
NUCALA.....	29	orphenadrine citrate tab er 12hr 100 mg	48
NURTEC.....	44	ORSERDU.....	12
NUVAXOVID COVID-19 VACCIN.....	8	oseltamivir phosphate cap 30 mg (base equiv), 45 mg (base equiv), 75 mg (base equiv) (Tamiflu)	4
NUZYRA.....	2	oseltamivir phosphate for susp 6 mg/ml (base equiv) (Tamiflu)	4
nystatin cream 100000 unit/gm	56	OTEZLA.....	43
nystatin oint 100000 unit/gm	56	OTEZLA/OTEZLA XR 28 DAY T.....	43
nystatin susp 100000 unit/ml	53	OTEZLA XR.....	43
nystatin tab 500000 unit	3	OVIDREL.....	21
nystatin topical powder 100000 unit/gm	56	oxaprozin tab 600 mg (Daypro)	43
O		oxazepam cap 10 mg, 15 mg, 30 mg	34
OCTREOTIDE ACETATE.....	21	oxcarbazepine susp 300 mg/5ml (60 mg/ml) (Trileptal)	46
octreotide acetate inj 200 mcg/ml (0.2 mg/ml), 1000 mcg/ml (1 mg/ml)	21	oxcarbazepine tab 150 mg, 300 mg, 600 mg (Trileptal)	46
octreotide acetate inj 50 mcg/ml (0.05 mg/ml), 100 mcg/ml (0.1 mg/ml), 500 mcg/ml (0.5 mg/ml) (Sandostatin)	21	OXERVATE.....	52
ODACTRA.....	9	oxybutynin chloride solution 5 mg/5ml	32
ODEFSEY.....	4	oxybutynin chloride tab er 24hr 15 mg	32
ODOMZO.....	12	oxybutynin chloride tab er 24hr 5 mg, 10 mg (Ditropan xl)	32
OFLOXACIN.....	2		
ofloxacin ophth soln 0.3% (Ocuflox)	52		
ofloxacin otic soln 0.3%	53		
OGSIVEO.....	12		
olanzapine for im inj 10 mg (Zyprexa)	36		

oxybutynin chloride tab 5 mg.....	32	PEN NEEDLES 32GX4MM.....	75
oxycodone hcl cap 5 mg.....	42	PEN NEEDLES 29GX12MM.....	75
oxycodone hcl conc 100 mg/5ml (20 mg/ml).....	42	PEN NEEDLES 31G X 5MM.....	75
oxycodone hcl soln 5 mg/5ml.....	42	PEN NEEDLES 31G X 6MM.....	75
oxycodone hcl tab 10 mg, 20 mg.....	42	PEN NEEDLES 31G X 8MM.....	75
oxycodone hcl tab 5 mg, 15 mg, 30 mg (Roxicodone).....	42	PEN NEEDLES 32G X 4MM.....	75
oxycodone w/ acetaminophen tab 2.5-325 mg, 5-325 mg, 7.5-325 mg, 10-325 mg (Percocet).....	42	PEN NEEDLES 32G X 5MM.....	75
oxymorphone hcl tab 5 mg, 10 mg.....	42	PEN NEEDLES 32G X 6MM.....	75
OZEMPIC.....	17	PEN NEEDLES 31GX8MM (5/16).....	75
P		PEN NEEDLES 31GX6MM (1/4").....	75
paliperidone tab er 24hr 1.5 mg, 3 mg, 6 mg, 9 mg (Invega).....	36	PENTACEL.....	9
PALYNZIQ.....	21	pentamidine isethionate for nebulization soln 300 mg (Nebupent).....	6
pantoprazole sodium ec tab 20 mg (base equiv), 40 mg (base equiv) (Protonix).....	31	PENTIPS GENERIC PEN NEEDL.....	75
PARODONTAX.....	53	PENTIPS 31GX5MM.....	76
paroxetine hcl tab 10 mg, 20 mg, 30 mg, 40 mg (Paxil).....	35	PENTIPS 31GX6MM.....	76
paroxetine mesylate cap 7.5 mg (base equiv).....	40	PENTIPS 31GX8MM.....	76
PAXLOVID.....	5	PENTIPS 32GX4MM.....	76
pazopanib hcl tab 200 mg (base equiv) (Votrient).....	12	PENTIPS 29GX12MM.....	75
PC UNIFINE PENTIPS 29G X.....	74	PENTIPS 29G X 12MM.....	75
PC UNIFINE PENTIPS 31G X.....	74	PENTIPS 31G X 5MM.....	75
PEDIARIX.....	9	PENTIPS 31G X 8MM.....	76
PEDVAXHIB.....	8	PENTIPS 32G X 4MM.....	76
PEGASYS.....	5	pentoxifylline tab er 400 mg.....	51
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm (Golytely).....	30	perampanel susp 0.5 mg/ml (Fycompa).....	46
peg 3350-kcl-sod bicarb-nacl for soln 420 gm (Nulytely).....	30	perampanel tab 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg (Fycompa).....	46
PEG-PREP.....	30	PERFECT LANCETS 30G.....	76
PEMAZYRE.....	12	PERFECT POINT SAFETY LANC.....	76
PENBRAYA.....	8	PERFECT PRESSURE ACTIVATE.....	76
penciclovir cream 1% (Denavir).....	56	perindopril erbumine tab 4 mg.....	25
penicillamine cap 250 mg (Cuprimine).....	87	PERIOMED.....	53
PENICILLIN V POTASSIUM.....	1	permethrin cream 5%.....	56
penicillin v potassium tab 250 mg, 500 mg.....	1	PERPHENAZINE/AMITRIPTYLIN.....	40
PENMENVY.....	8	perphenazine tab 2 mg, 4 mg, 8 mg, 16 mg.....	36
PEN NEEDLE/5-BEVEL TIP/31.....	74	PERSERIS.....	36
PEN NEEDLE/5-BEVEL TIP/32.....	74	PHARMACIST CHOICE SELECT.....	76
PEN NEEDLES.....	75	PHARMACIST CHOICE ULTRA T.....	76
PEN NEEDLES/29G X 1/2".....	75	PHEBURANE.....	21
PEN NEEDLES/31G X 1/4".....	75	PHENDIMETRAZINE TARTRATE.....	38
PEN NEEDLES/31G X 3/16".....	75	phendimetrazine tartrate tab 35 mg.....	38
PEN NEEDLES/31G X 5/16".....	75	PHENELZINE SULFATE.....	35
PEN NEEDLES/32G X 5/32".....	75	PHENOBARBITAL.....	37
PEN NEEDLES/31G X 6MM.....	75	phenoxybenzamine hcl cap 10 mg (Dibenzylamine).....	25
PEN NEEDLES 31GX5/16".....	75	phentermine hcl cap 15 mg, 30 mg, 37.5 mg.....	39
PEN NEEDLES 31G X 3/16".....	75	phentermine hcl tab 8 mg.....	39
PEN NEEDLES 33G X 5/32".....	75	phentermine hcl tab 37.5 mg (Adipex-p).....	39
PEN NEEDLES 30GX5MM.....	75	phentermine hcl-topiramate cap er 24hr 3.75-23 mg, 7.5-46 mg, 11.25-69 mg, 15-92 mg (Qsymia).....	39
PEN NEEDLES 30GX8MM.....	75	phenylephrine hcl ophth soln 2.5%, 10%.....	52
PEN NEEDLES 31GX5MM.....	75	phenytoin chew tab 50 mg (Dilantin infatabs).....	46
PEN NEEDLES 31GX8MM.....	75	phenytoin sodium extended cap 200 mg, 300 mg (Phenytek).....	46
		phenytoin sodium extended cap 100 mg (Dilantin).....	46
		phenytoin susp 125 mg/5ml (Dilantin-125).....	46
		PHEXX.....	33
		PHOSPHA 250 NEUTRAL.....	48

PHOSPHOROUS.....	49	prednisolone sodium phosphate oral soln 25 mg/5ml (base eq).....	14
PHOSPHO-TRIN K500.....	48	prednisolone sod phosphate oral soln 15 mg/5ml (base equiv).....	14
PHOSPHO-TRIN 250 NEUTRAL.....	48	prednisolone sod phosphate oral soln 5 mg/5ml (base equiv) (Pediapred).....	14
phytonadione tab 5 mg (Mephyton).....	48	prednisolone soln 15 mg/5ml.....	14
pilocarpine hcl ophth soln 2%, 4%.....	52	PREDNISONE.....	14
pilocarpine hcl ophth soln 1% (Isopto carpine).....	52	prednisone tab 1 mg, 2.5 mg, 5 mg, 10 mg, 20 mg, 50 mg.....	14
pilocarpine hcl tab 5 mg, 7.5 mg (Salagen).....	53	prednisone tab therapy pack 5 mg (21), 5 mg (48), 10 mg (21), 10 mg (48).....	14
pimozide tab 1 mg, 2 mg.....	40	PREFERRED PLUS UNIFINE PE.....	76
pindolol tab 5 mg, 10 mg.....	23	pregabalin cap 25 mg, 50 mg, 75 mg, 100 mg, 150 mg, 200 mg, 225 mg, 300 mg (Lyrica).....	46
pioglitazone hcl-metformin hcl tab 15-500 mg, 15-850 mg (Actoplus met).....	17	PREGNYL.....	21
pioglitazone hcl tab 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv) (Actos).....	17	PREMARIN.....	33
PIP LANCETS/28G.....	76	PREMPHASE.....	15
PIP LANCETS/30G.....	76	PREMPRO.....	15
PIP PEN NEEDLES 31G X 5MM.....	76	PRENATAL 19.....	48
PIP PEN NEEDLES 32G X 4MM.....	76	PRENATAL-U.....	48
PIRFENIDONE.....	30	PRETOMANID.....	2
pirfenidone cap 267 mg (Esbriet).....	30	PREVENT DROPSAFE SAFETY P.....	76
pirfenidone tab 267 mg, 801 mg (Esbriet).....	30	PREVENT SAFETY PEN NEEDLE.....	76
piroxicam cap 10 mg, 20 mg (Feldene).....	44	PREVNAR 20.....	8
PLEGRIDY.....	40	PREVYMIS.....	5
PLEGRIDY STARTER PACK.....	40	PREZCOBIX.....	5
PNEUMOVAX 23.....	8	PREZISTA.....	5
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1% (Polytrim).....	52	PRIFTIN.....	2
pomalidomide cap 1 mg, 2 mg, 3 mg, 4 mg (Pomalyst).....	12	primaquine phosphate tab 26.3 mg (15 mg base) (Primaquine phosphate).....	6
posaconazole susp 40 mg/ml (Noxafil).....	3	primidone tab 50 mg, 250 mg (Mysoline).....	46
posaconazole tab delayed release 100 mg (Noxafil).....	3	PRIORIX.....	8
potassium chloride cap er 8 meq, 10 meq.....	49	probenecid tab 500 mg.....	45
potassium chloride microencapsulated crys er tab 10 meq, 15 meq, 20 meq.....	49	prochlorperazine maleate tab 5 mg (base equivalent), 10 mg (base equivalent).....	36
potassium chloride oral soln 10% (20 meq/15ml), 20% (40 meq/15ml).....	49	prochlorperazine suppos 25 mg.....	36
potassium chloride powder packet 20 meq.....	49	PRO COMFORT INSULIN SYRIN.....	76
potassium chloride tab er 10 meq, 20 meq (1500 mg) (K-tab).....	49	PRO COMFORT LANCETS 30G.....	76
potassium chloride tab er 8 meq (600 mg).....	49	PRO COMFORT LANCETS 31G.....	76
potassium citrate tab er 5 meq (540 mg) (Urocit-k 5).....	33	PRO COMFORT PEN NEEDLE/32.....	76
potassium citrate tab er 10 meq (1080 mg) (Urocit-k 10).....	33	PRO COMFORT PEN NEEDLES/.....	76
potassium citrate tab er 15 meq (1620 mg) (Urocit-k 15).....	33	PRO COMFORT SAFETY LANCET.....	76
PRADAXA.....	50	PROCRIT.....	50
pramipexole dihydrochloride tab 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg.....	48	PROCTOCORT.....	54
prasugrel hcl tab 5 mg (base equiv), 10 mg (base equiv) (Effient).....	51	PROCTOFOAM HC.....	54
pravastatin sodium tab 10 mg, 20 mg, 40 mg, 80 mg.....	26	PRODIGY INSULIN SYRING/U.....	76
praziquantel tab 600 mg (Biltricide).....	6	PRODIGY INSULIN SYRINGE/1.....	76
prazosin hcl cap 1 mg, 2 mg, 5 mg (Minipress).....	25	PRODIGY LANCING DEVICE.....	76
PRECISION SURE-DOSE INSUL.....	76	PRODIGY PRESSURE ACTIVATE.....	76
prednisolone acetate ophth susp 1% (Pred forte).....	52	PRODIGY SAFETY LANCETS.....	76
PREDNISOLONE SODIUM PHOSP.....	52	PRODIGY TWIST TOP LANCETS.....	76
		progesterone cap 100 mg, 200 mg (Prometrium).....	17
		progesterone im in oil 50 mg/ml.....	17
		progesterone vaginal insert 100 mg (Endometrin).....	33
		PROGRAF.....	87
		promethazine-dm syrup 6.25-15 mg/5ml.....	28

promethazine hcl oral soln 6.25 mg/5ml.....	27	quinapril hcl tab 5 mg, 10 mg, 20 mg, 40 mg (Accupril).....	25
promethazine hcl suppos 12.5 mg, 25 mg.....	27	quinidine gluconate tab er 324 mg.....	23
promethazine hcl tab 12.5 mg, 25 mg, 50 mg.....	27	quinine sulfate cap 324 mg (Qualaquin).....	6
promethazine w/ codeine syrup 6.25-10 mg/5ml.....	28	QULIPTA.....	44
PROMETHEGAN.....	27	QVAR REDIHALER.....	29
propafenone hcl cap er 12hr 225 mg, 325 mg, 425 mg (Rythmol sr).....	23	R	
propafenone hcl tab 150 mg, 225 mg, 300 mg.....	23	RABAVERT.....	8
PROPRANOLOL HCL.....	23	rabeprazole sodium ec tab 20 mg (Aciphex).....	31
propranolol hcl cap er 24hr 60 mg, 80 mg, 120 mg, 160 mg (Inderal la).....	23	RAGWITEK.....	9
propranolol hcl tab 10 mg, 20 mg, 40 mg, 60 mg, 80 mg.....	23	raloxifene hcl tab 60 mg (Evista).....	21
propylthiouracil tab 50 mg.....	20	ramipril cap 1.25 mg, 2.5 mg, 5 mg, 10 mg (Altace).....	25
PROQUAD.....	8	ranolazine tab er 12hr 500 mg, 1000 mg (Ranexa).....	22
protriptyline hcl tab 5 mg, 10 mg.....	35	rasagiline mesylate tab 0.5 mg (base equiv), 1 mg (base equiv) (Azilect).....	48
pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml.....	28	RASUVO.....	44
PULMOSAL.....	28	RAYA SURE PEN NEEDLE 29G.....	77
PULMOZYME.....	30	RAYA SURE PEN NEEDLE 31G.....	77
PURE COMFORT LANCETS 30G.....	76	READYLANCE SAFETY LANCETS.....	77
PURE COMFORT PEN NEEDLE 3.....	76	REALITY INSULIN SYRINGE/U.....	77
PURE COMFORT PEN NEEDLE/3.....	77	REALITY LANCETS.....	77
PURE COMFORT PRESSURE ACT.....	77	REALITY TRIGGER LANCETS.....	77
PURE COMFORT SAFETY PEN N.....	77	REBIF.....	40
PX ADVANCED LANCING DEVIC.....	77	REBIF REBIDOSE.....	40
PX INSULIN SYRINGE/U-100/.....	77	REBIF REBIDOSE TITRATION.....	40
PX LANCETS MICROTHIN 33G.....	77	REBIF TITRATION PACK.....	41
PX LANCETS ULTRA THIN.....	77	RECOMBIVAX HB.....	8
PX LANCETS ULTRA THIN 28G.....	77	RECTIV.....	54
PX MINI PEN NEEDLES 31GX5.....	77	RELENZA DISKHALER.....	5
pyrazinamide tab 500 mg.....	2	RELION 2-IN-1 LANCET DEV.....	78
pyridostigmine bromide oral soln 60 mg/5ml (Mestinon).....	48	RELION 2-IN-1 LANCING DEV.....	78
pyridostigmine bromide tab er 180 mg (Mestinon timespan).....	48	RELION INSULIN SYRINGE 0.....	78
pyridostigmine bromide tab 60 mg (Mestinon).....	48	RELION INSULIN SYRINGE/U.....	78
pyrimethamine tab 25 mg (Daraprim).....	6	RELION INSULIN SYRINGE 1M.....	78
PYRUKYND.....	51	RELION KETONE TEST STRIPS.....	57
PYRUKYND TAPER PACK.....	51	RELION LANCETS MICRO-THIN.....	78
Q		RELION LANCETS THIN 26G.....	78
QC ADVANCED LANCING DEVIC.....	77	RELION LANCETS ULTRA-THIN.....	78
QC LANCETS SUPER THIN.....	77	RELION LANCING DEVICE.....	78
QC LANCETS ULTRA THIN.....	77	RELION PEN NEEDLES 29GX12.....	78
QC PEN NEEDLES 29G X 12MM.....	77	RELION PEN NEEDLES 31G X.....	78
QC PEN NEEDLES 31G X 6MM.....	77	RELION PEN NEEDLES 32G X.....	78
QC PEN NEEDLES 31G X 8MM.....	77	RELION PEN NEEDLES 31GX5/.....	78
QC UNIFINE PENTIPS 32GX4M.....	77	RELION ULTRA THIN LANCETS.....	78
QC UNILET LANCETS 33G/MIC.....	77	repaglinide tab 0.5 mg, 1 mg, 2 mg.....	17
QC UNILET LANCETS 28G/ULT.....	77	REPATHA SURECLICK.....	26
QINLOCK.....	12	RETACRIT.....	50
QUADRACEL.....	9	RETEVMO.....	12
quetiapine fumarate tab er 24hr 50 mg, 150 mg, 200 mg, 300 mg, 400 mg (Seroquel xr).....	37	REVCovi.....	21
quetiapine fumarate tab 25 mg, 50 mg, 100 mg, 200 mg, 300 mg, 400 mg (Seroquel).....	37	REVUFORJ.....	12
QUICK TOUCH INSULIN PEN N.....	77	REXTOVY.....	57
		REXULTI.....	37
		REZLIDHIA.....	12
		RIBAVIRIN.....	5
		rifampin cap 150 mg, 300 mg.....	2
		rifapentine tab 150 mg (Priftin).....	2

RIGHTEST GD500 LANCING DE.....	78	SAFETY LANCETS 21G.....	78
RIGHTEST GL300 LANCETS.....	78	SAFETY LANCETS 23G.....	78
rilpivirine hcl tab 25 mg (base equivalent) (Edurant).....	5	SAFETY LANCETS 28G.....	78
riluzole tab 50 mg (Rilutek).....	48	SAFETY PEN NEEDLES/30G X.....	78
RINVOQ.....	44	SAMSCA.....	21
RINVOQ LQ.....	44	SANDIMMUNE.....	87
risedronate sodium tab 30 mg.....	21	SANTYL.....	56
risedronate sodium tab 35 mg, 150 mg (Actonel).....	21	sapropterin dihydrochloride powder packet 100 mg,	
RISPERDAL CONSTA.....	37	500 mg (Kuvan).....	21
risperidone microspheres for im extended rel susp		sapropterin dihydrochloride tab 100 mg (Kuvan).....	21
12.5 mg, 25 mg, 37.5 mg, 50 mg (Risperdal		SAPSCARE TWIST TOP LANCET.....	78
consta).....	37	SAPS HEALTH CARE TWIST TO.....	78
RISPERIDONE ODT.....	37	SAPS HEALTH PLUS TWIST TO.....	78
risperidone orally disintegrating tab 0.5 mg, 1 mg, 2		SAPS HEALTH TWIST TOP LAN.....	78
mg, 3 mg, 4 mg.....	37	SAXENDA.....	39
risperidone soln 1 mg/ml (Risperdal).....	37	SB INSULIN SYRINGE/U-100/.....	78
risperidone tab 0.25 mg.....	37	SB LANCETS THIN.....	78
risperidone tab 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg		SB LANCETS ULTRA THIN.....	78
(Risperdal).....	37	SCEMBLIX.....	12
ritonavir tab 100 mg (Norvir).....	5	scopolamine td patch 72hr 1 mg/3days (Transderm-	
rivaroxaban for susp 1 mg/ml (Xarelto).....	50	scop).....	31
rivaroxaban tab 2.5 mg (Xarelto).....	50	SECUADO.....	37
rivastigmine tartrate cap 1.5 mg (base equivalent), 3		SECURESAFE DUAL SAFETY PE.....	78
mg (base equivalent), 4.5 mg (base equivalent), 6 mg		SECURESAFE SAFETY INSULIN.....	78
(base equivalent).....	41	SECURESAFE SAFETY PEN NEE.....	78
rivastigmine td patch 24hr 4.6 mg/24hr, 9.5 mg/24hr,		SELECT-LITE LANCING DEVIC.....	78
13.3 mg/24hr (Exelon).....	41	selegiline hcl cap 5 mg.....	48
rizatriptan benzoate oral disintegrating tab 5 mg (base		selegiline hcl tab 5 mg.....	48
eq).....	44	SEMGLEE.....	19
rizatriptan benzoate oral disintegrating tab 10 mg		SENSILANCE SAFETY LANCETS.....	79
(base eq) (Maxalt-mlt).....	44	SENSODYNE COMPLETE PROTEC.....	53
rizatriptan benzoate tab 5 mg (base equivalent).....	44	SENSODYNE RAPID RELIEF.....	53
rizatriptan benzoate tab 10 mg (base equivalent)		SENSODYNE REPAIR & PROTEC.....	53
(Maxalt).....	44	SENSODYNE SENSITIVITY & G.....	53
roflumilast tab 250 mcg, 500 mcg (Daliresp).....	29	SENSODYNE SENSITIVITY GUM.....	53
ROMVIMZA.....	12	SEREVENT DISKUS.....	29
ropinirole hydrochloride tab 0.25 mg, 0.5 mg, 1 mg, 2		sertraline hcl oral concentrate for solution 20 mg/ml	
mg, 3 mg, 4 mg, 5 mg.....	48	(Zoloft).....	35
rosuvastatin calcium tab 5 mg, 10 mg, 20 mg, 40 mg		sertraline hcl tab 25 mg, 50 mg, 100 mg (Zoloft).....	35
(Crestor).....	26	sevelamer carbonate packet 0.8 gm, 2.4 gm	
ROTARIX.....	8	(Renvela).....	32
ROTATEQ.....	8	sevelamer carbonate tab 800 mg (Renvela).....	32
ROZLYTREK.....	12	sevelamer hcl tab 400 mg.....	32
RUBRACA.....	12	sevelamer hcl tab 800 mg (Renagel).....	32
RUCONEST.....	51	SF.....	53
rufinamide susp 40 mg/ml (Banzel).....	46	SHINGRIX.....	8
rufinamide tab 200 mg, 400 mg (Banzel).....	46	SIGNIFOR.....	21
RUKOBIA.....	5	SIKLOS.....	50
RYBELSUS.....	17	sildenafil citrate tab 20 mg (Revatio).....	27
RYDAPT.....	12	silver sulfadiazine cream 1% (Silvadene).....	56
S		SIMBRINZA.....	52
sacubitril-valsartan tab 24-26 mg, 49-51 mg, 97-103 mg		SIMPLE DIAGNOSTICS LANCIN.....	79
(Entresto).....	27	SIMPONI.....	44
SAFETY LANCET 30G/PRESSUR.....	78	simvastatin tab 5 mg.....	26
SAFETY LANCETS.....	78	simvastatin tab 80 mg.....	27
SAFETY LANCETS/PRESSURE A.....	78	simvastatin tab 10 mg, 40 mg (Zocor).....	27
		simvastatin tab 20 mg (Zocor).....	27

SINGLE-LET.....	79	STIVARGA.....	12
sirolimus oral soln 1 mg/ml (Rapamune).....	87	STRENSIQ.....	22
sirolimus tab 0.5 mg, 1 mg, 2 mg (Rapamune).....	87	STRIBILD.....	5
SIRTURO.....	2	STRIVERDI RESPIMAT.....	29
sitagliptin phosphate-metformin hcl tab er 24hr 50-500 mg, 50-1000 mg, 100-1000 mg (Janumet xr).....	18	1ST TIER UNIFINE PENTIPS.....	86
sitagliptin phosphate-metformin hcl tab 50-500 mg, 50-1000 mg (Janumet).....	18	SUBOXONE.....	42
sitagliptin phosphate tab 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv) (Januvia).....	17	SUCRAID.....	31
SIVEXTRO.....	6	sucralfate tab 1 gm (Carafate).....	31
SKYRIZI.....	32	sulfacetamide sodium lotion 10% (acne) (Klaron).....	56
SKYRIZI PEN.....	56	sulfadiazine tab 500 mg.....	2
SKYTROFA.....	21	sulfamethoxazole-trimethoprim susp 200-40 mg/5ml.....	6
SMART DIABETES VANTAGE LA.....	79	sulfamethoxazole-trimethoprim tab 400-80 mg (Bactrim).....	6
SMARTEST LANCETS 28G.....	79	sulfamethoxazole-trimethoprim tab 800-160 mg (Bactrim ds).....	6
SODIUM CHLORIDE.....	28	SULFAMYLLON.....	56
SODIUM CITRATE/CITRIC ACI.....	33	sulfasalazine tab delayed release 500 mg (Azulfidine en-tabs).....	32
SODIUM CITRATE AND CITRIC.....	33	sulfasalazine tab 500 mg (Azulfidine).....	32
SODIUM FLUORIDE.....	49	sulindac tab 150 mg, 200 mg.....	44
SODIUM FLUORIDE/POTASSIUM.....	53	sumatriptan nasal spray 5 mg/act, 20 mg/act (Imitrex).....	44
SODIUM FLUORIDE 5000 PPM.....	53	sumatriptan succinate inj 6 mg/0.5ml.....	44
sodium oxybate oral solution 500 mg/ml (Xyrem).....	41	sumatriptan succinate solution auto-injector 6 mg/0.5ml (Imitrex statdose sys).....	44
sodium phenylbutyrate oral powder 3 gm/teaspoonful (Buphenyl).....	21	sumatriptan succinate tab 25 mg, 50 mg, 100 mg (Imitrex).....	44
sodium phenylbutyrate tab 500 mg (Buphenyl).....	22	sunitinib malate cap 12.5 mg (base equivalent), 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent) (Sutent).....	13
sodium polystyrene sulfonate powder.....	87	SUNLENCA.....	5
sodium polystyrene sulfonate susp 15 gm/60ml.....	87	SUNOSI.....	39
sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml (Suprep bowel prep ki).....	30	SUPER THIN LANCETS.....	79
SOFOSBUVIR/VELPATASVIR.....	5	SURE COMFORT AUTOKEEPER S.....	79
solifenacin succinate tab 5 mg, 10 mg (Vesicare).....	32	SURE COMFORT INSULIN SYRI.....	79
SOLQUA 100/33.....	18	SURE COMFORT LANCETS 18G.....	79
SOLTAMOX.....	12	SURE COMFORT LANCETS 21G.....	79
SOLUS V2 LANCING DEVICE.....	79	SURE COMFORT LANCETS 23G.....	79
SOLUS V2 PRESSURE ACTIVAT.....	79	SURE COMFORT LANCETS 28G.....	79
SOLUS V2 TWIST LANCETS 30.....	79	SURE COMFORT LANCETS 30G.....	79
SOMAVERT.....	22	SURE COMFORT LANCING PEN.....	79
sorafenib tosylate tab 200 mg (base equivalent) (Nexavar).....	12	SURE COMFORT PEN NEEDLES.....	79
sotalol hcl (afib/afll) tab 80 mg, 120 mg, 160 mg (Betapace af).....	23	SURELITE LANCETS.....	79
sotalol hcl tab 240 mg.....	23	SUTAB.....	30
sotalol hcl tab 80 mg, 120 mg, 160 mg (Betapace).....	23	SYMDEKO.....	30
SOVALDI.....	5	SYMPROIC.....	32
SPIKEVAX COVID-19 VACCINE.....	8	SYMTUZA.....	5
SPIRIVA RESPIMAT.....	29	SYNAREL.....	22
spironolactone & hydrochlorothiazide tab 25-25 mg (Aldactazide).....	25	SYNJARDY.....	18
spironolactone tab 25 mg, 50 mg, 100 mg (Aldactone).....	25	SYNJARDY XR.....	18
SPRITAM.....	46	SYNTHROID.....	20
SPS.....	87		
stannous fluoride gel 0.4%.....	53	T	
STEQUEYMA.....	56	TABLOID.....	13
STERILANCE TL.....	79	TABRECTA.....	13
STIOLTO RESPIMAT.....	29		

tacrolimus cap er 24hr 0.5 mg, 1 mg, 5 mg (Astagraf xl).....	87	testosterone td gel 12.5 mg/act (1%), 40.5 mg/2.5gm (1.62%).....	14
tacrolimus cap 0.5 mg, 1 mg, 5 mg (Prograf).....	87	testosterone td gel 20.25 mg/act (1.62%) (Androgel pump).....	14
tacrolimus oint 0.03%, 0.1% (Protopic).....	56	testosterone td gel 25 mg/2.5gm (1%), 50 mg/5gm (1%) (Androgel).....	14
tadalafil tab 5 mg (Cialis).....	27	testosterone td soln 30 mg/act.....	14
tadalafil tab 20 mg (pah) (Adcirca).....	27	tetrabenazine tab 12.5 mg, 25 mg (Xenazine).....	41
TAFINLAR.....	13	tetracycline hcl cap 250 mg, 500 mg.....	2
tafluprost preservative free (pf) ophth soln 0.0015% (Zioptan).....	52	TEZSPIRE.....	29
TAGRISSO.....	13	TGT ADVANCED LANCING DEVI.....	80
TAKHZYRO.....	51	TGT LANCET ALTERNATE SITE.....	80
TALZENNA.....	13	TGT LANCET SUPER THIN 30G.....	80
tamoxifen citrate tab 10 mg (base equivalent), 20 mg (base equivalent).....	13	TGT LANCET THIN 23G.....	80
tamsulosin hcl cap 0.4 mg (Flomax).....	33	TGT LANCET ULTRA THIN 28G.....	80
tapentadol hcl tab 50 mg, 75 mg, 100 mg (Nucynta).....	42	TGT LANCING DEVICE.....	80
TAPENTADOL HYDROCHLORIDE.....	42	THALOMID.....	87
tasimelteon capsule 20 mg (Hetlioz).....	37	THEO-24.....	29
TAVALISSE.....	51	theophylline elixir 80 mg/15ml.....	29
tazarotene cream 0.05%, 0.1% (Tazorac).....	56	theophylline soln 80 mg/15ml.....	29
tazarotene gel 0.05%, 0.1% (Tazorac).....	56	theophylline tab er 12hr 300 mg, 450 mg.....	29
TAZORAC.....	56	theophylline tab er 24hr 400 mg, 600 mg.....	29
TECHLITE AST LANCETS.....	79	thiothixene cap 1 mg, 2 mg, 5 mg, 10 mg.....	37
TECHLITE INSULIN SYRINGE.....	79	THYQUIDITY.....	20
TECHLITE LANCETS.....	79	tiagabine hcl tab 2 mg, 4 mg (Gabitril).....	46
TECHLITE LANCETS 26G.....	79	TIBSOVO.....	13
TECHLITE PEN NEEDLES/31G.....	80	ticagrelor tab 60 mg, 90 mg (Brilinta).....	51
TECHLITE PEN NEEDLES/32G.....	80	TICOVAC.....	8
TECHLITE PEN NEEDLES 29G.....	79	timolol maleate ophth soln 0.25%, 0.5% (Timoptic).....	52
TECHLITE PEN NEEDLES 31G.....	79	timolol maleate preservative free ophth soln 0.25% (Timoptic ocudose).....	52
TECHLITE PEN NEEDLES 32G.....	79	tinidazole tab 250 mg, 500 mg.....	6
TECHLITE PLUS PEN NEEDLES.....	80	tiopronin tab delayed release 100 mg, 300 mg (Thiola ec).....	33
TEGRETOL.....	46	tiopronin tab 100 mg (Thiola).....	33
TEGRETOL-XR.....	46	tiotropium bromide inhal cap 18 mcg (base equiv) (Spiriva handihaler).....	29
telmisartan-hydrochlorothiazide tab 40-12.5 mg, 80-12.5 mg, 80-25 mg (Micardis hct).....	25	TIROSINT.....	20
telmisartan tab 20 mg, 40 mg, 80 mg (Micardis).....	25	TIROSINT-SOL.....	20
temazepam cap 15 mg, 30 mg (Restoril).....	37	TIVICAY.....	5
temozolomide cap 5 mg, 20 mg.....	13	TIVICAY PD.....	5
temozolomide cap 100 mg, 140 mg, 180 mg, 250 mg (Temodar).....	13	tizanidine hcl tab 2 mg (base equivalent).....	48
TENIVAC.....	9	tizanidine hcl tab 4 mg (base equivalent) (Zanaflex).....	48
tenofovir disoproxil fumarate tab 300 mg (Viread).....	5	TOBI PODHALER.....	2
TEPMETKO.....	13	TOBRAMYCIN.....	2
terazosin hcl cap 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent).....	25	tobramycin-dexamethasone ophth susp 0.3-0.1% (Tobradex).....	52
terbinafine hcl tab 250 mg.....	3	tobramycin nebu soln 300 mg/4ml (Bethkis).....	2
terbutaline sulfate tab 2.5 mg, 5 mg.....	29	tobramycin nebu soln 300 mg/5ml (Tobi).....	2
terconazole vaginal cream 0.4%, 0.8%.....	33	tobramycin ophth soln 0.3%.....	52
terconazole vaginal suppos 80 mg.....	33	TODAYS HEALTH ADVANCED LA.....	80
teriflunomide tab 7 mg, 14 mg (Aubagio).....	41	TODAYS HEALTH ORIGINAL PE.....	80
teriparatide soln pen-inj 560 mcg/2.24ml (Forteo).....	22	TODAYS HEALTH SHORT PEN N.....	80
TESTOSTERONE.....	14	TODAYS HEALTH SUPER THIN.....	80
testosterone cypionate im inj in oil 100 mg/ml, 200 mg/ml (Depo-testosterone).....	14	TODAYS HEALTH ULTRA THIN.....	80
TESTOSTERONE ENANTHATE.....	14	TODAY SPONGE.....	33

tofacitinib citrate oral soln 1 mg/ml (base equivalent) (Xeljanz).....	44	trifluoperazine hcl tab 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent).....	37
tofacitinib citrate tab er 24hr 11 mg (base equivalent), 22 mg (base equivalent) (Xeljanz xr).....	44	TRIFLURIDINE.....	53
tofacitinib citrate tab 5 mg (base equivalent), 10 mg (base equivalent) (Xeljanz).....	44	trihexyphenidyl hcl tab 2 mg, 5 mg.....	48
tolcapone tab 100 mg (Tasmar).....	48	TRIJARDY XR.....	18
tolterodine tartrate cap er 24hr 2 mg, 4 mg (Detrol la).....	33	TRIKAFTA.....	30
tolterodine tartrate tab 1 mg, 2 mg (Detrol).....	33	trimethobenzamide hcl cap 300 mg.....	31
tolvaptan (hyponatremia) tab 15 mg, 30 mg (Samsca).....	22	TRIMETHOPRIM.....	6
tolvaptan tab 15 mg, 30 mg (Jynarque).....	22	trimethoprim tab 100 mg.....	7
tolvaptan tab therapy pack 15 mg, 30 & 15 mg, 45 & 15 mg, 60 & 30 mg, 90 & 30 mg (Jynarque).....	22	trimipramine maleate cap 25 mg, 50 mg, 100 mg.....	35
TOPFINE/INSULIN PEN NEEDL.....	80	TRINATE.....	48
topiramate cap er 24hr sprinkle 25 mg, 50 mg, 100 mg, 150 mg, 200 mg (Qudexy xr).....	46	TRINTELLIX.....	35
topiramate sprinkle cap 15 mg, 25 mg (Topamax sprinkle).....	46	TRIUMEQ PD.....	5
topiramate tab 25 mg, 50 mg, 100 mg, 200 mg (Topamax).....	46	tropium chloride cap er 24hr 60 mg.....	33
toremifene citrate tab 60 mg (base equivalent) (Fareston).....	13	tropium chloride tab 20 mg.....	33
torsemide tab 5 mg, 10 mg, 20 mg, 100 mg.....	25	TRUE COMFORT INSULIN SYRI.....	80
TOUJEO MAX SOLOSTAR.....	19	TRUE COMFORT PEN NEEDLES.....	80
TOUJEO SOLOSTAR.....	19	TRUE COMFORT PRO INSULIN.....	80
tramadol-acetaminophen tab 37.5-325 mg (Ultracet).....	42	TRUE COMFORT PRO PEN NEED.....	80
tramadol hcl tab er 24hr 100 mg, 200 mg, 300 mg.....	42	TRUE COMFORT SAFETY INSUL.....	80
tramadol hcl tab 50 mg (Ultram).....	42	TRUE COMFORT SAFETY LANCE.....	80
trandolapril tab 1 mg, 2 mg, 4 mg.....	25	TRUE COMFORT SAFETY PEN N.....	80
tranexamic acid tab 650 mg (Lysteda).....	51	TRUE COMFORT TWIST TOP LA.....	81
tranylcypromine sulfate tab 10 mg (Parnate).....	35	TRUEDRAW LANCING DEVICE.....	81
TRAVEL LANCETS ADVANCED 2.....	80	TRUEPLUS 5-BEVEL PEN NEED.....	81
trazodone hcl tab 50 mg, 100 mg, 150 mg.....	35	TRUEPLUS INSULIN SYRINGE.....	81
TRELEGY ELLIPTA.....	29	TRUEPLUS INSULIN SYRINGE/.....	81
TREMFYA.....	32	TRUEPLUS LANCETS 26G.....	81
TREMFYA INDUCTION PACK FO.....	32	TRUEPLUS LANCETS 28G.....	81
TREMFYA PEN.....	56	TRUEPLUS LANCETS 30G.....	81
TRESIBA.....	19	TRUEPLUS LANCETS 33G.....	81
TRESIBA FLEXTOUCH.....	19	TRUEPLUS LANCETS 33G MICR.....	81
tretinoin cap 10 mg.....	13	TRUEPLUS LANCETS 28G SUPE.....	81
tretinoin cream 0.025%, 0.05%, 0.1% (Retin-a).....	56	TRUEPLUS LANCETS 30G ULTR.....	81
tretinoin gel 0.01%, 0.025% (Retin-a).....	56	TRUEPLUS SAFETY LANCETS 2.....	81
triamcinolone acetonide cream 0.025%, 0.1%, 0.5%.....	56	TRULANCE.....	32
triamcinolone acetonide dental paste 0.1%.....	53	TRULICITY.....	18
triamcinolone acetonide lotion 0.1%.....	56	TRUMENBA.....	8
triamcinolone acetonide oint 0.025%, 0.1%, 0.5%.....	56	TRUQAP.....	13
triamterene & hydrochlorothiazide cap 37.5-25 mg.....	25	TUKYSA.....	13
triamterene & hydrochlorothiazide tab 37.5-25 mg (Maxzide-25).....	26	TURALIO.....	13
triamterene & hydrochlorothiazide tab 75-50 mg (Maxzide).....	26	TWINRIX.....	9
triamterene cap 50 mg, 100 mg (Dyrenium).....	26	TWIST TOP LANCETS 30G.....	81
trientine hcl cap 250 mg (Syprine).....	87	TYBLUME.....	16
		TYENNE.....	44
		TYMLOS.....	22
		TYPHIM VI.....	9
		U	
		UBRELVI.....	44
		UDENYCA.....	50
		ULTICARE INSULIN SAFETY S.....	81
		ULTICARE INSULIN SYRINGE.....	81
		ULTICARE INSULIN SYRINGE/.....	81
		ULTICARE MICRO PEN NEEDLE.....	81
		ULTICARE MINI PEN NEEDLES.....	81

ULTICARE MINI SAFETY PEN.....	81	UNIFINE PENTIPS 31G X 8MM.....	84
ULTICARE ORIGINAL PEN NEE.....	81	UNIFINE PENTIPS PLUS/30G.....	83
ULTICARE PEN NEEDLES/29G.....	81	UNIFINE PENTIPS PLUS 33G.....	83
ULTICARE PEN NEEDLES 31G.....	81	UNIFINE PENTIPS PLUS 29GX.....	83
ULTICARE SHORT PEN NEEDLE.....	82	UNIFINE PENTIPS PLUS 31GX.....	83
ULTICARE SHORT SAFETY PEN.....	82	UNIFINE PENTIPS PLUS 32GX.....	83
ULTICARE U-100 INSULIN SY.....	82	UNIFINE PENTIPS PLUS 33GX.....	83
ULTIGUARD INSULIN SYRINGE.....	82	UNIFINE PROTECT SAFETY PE.....	84
ULTIGUARD SAFEPAK/MICRO.....	82	UNIFINE SAFECONTROL PEN N.....	84
ULTIGUARD SAFEPAK/MINI P.....	82	UNIFINE ULTRA PEN NEEDLE/.....	84
ULTIGUARD SAFEPAK/SHORT.....	82	UNILET COMFORTOUCH LANCET.....	84
ULTIGUARD SAFEPAK/SYRING.....	82	UNILET EXCELITE.....	84
ULTIGUARD SAFEPAK/TINY P.....	82	UNILET EXCELITE II.....	84
ULTIGUARD SAFEPAK INSULI.....	82	UNILET G.P. LANCET.....	84
ULTIGUARD SAFEPAK MINI P.....	82	UNILET G.P. SUPERLITE LAN.....	84
ULTIGUARD SAFEPAK PEN NE.....	82	UNILET GP 28 ULTRA THIN.....	84
ULTI-LANCE AUTOMATIC/ CLE.....	81	UNILET LANCET.....	84
ULTILET CLASSIC LANCETS.....	82	UNILET LANCETS MICRO-THIN.....	84
ULTILET LANCETS.....	82	UNILET LANCETS SUPER-THIN.....	84
ULTILET LANCETS 33G.....	82	UNILET LANCETS ULTRA-THIN.....	84
ULTILET PEN NEEDLE 29GX12.....	82	UNILET SUPERLITE LANCET.....	84
ULTILET PEN NEEDLE 31GX5M.....	82	UNISTIK 1.....	85
ULTILET PEN NEEDLE 31GX8M.....	82	UNISTIK 2.....	85
ULTILET PEN NEEDLE 32GX4M.....	82	UNISTIK 3.....	85
ULTILET SAFETY LANCETS 21.....	82	UNISTIK 2 COMFORT.....	85
ULTILET SAFETY LANCETS 23.....	82	UNISTIK 3 COMFORT.....	85
ULTILET SHORT PEN NEEDLES.....	82	UNISTIK CZT COMFORT.....	84
ULTRACARE INSULIN SYRINGE.....	83	UNISTIK CZT NORMAL.....	85
ULTRA-CARE LANCETS 30G.....	83	UNISTIK 2 EXTRA.....	85
ULTRACARE PEN NEEDLES/31G.....	83	UNISTIK 3 EXTRA.....	85
ULTRACARE PEN NEEDLES/32G.....	83	UNISTIK 3 GENTLE.....	85
ULTRACARE PEN NEEDLES/33G.....	83	UNISTIK 2 NEONATAL.....	85
ULTRA-CARE SAFETY LANCETS.....	83	UNISTIK 3 NEONATAL.....	85
ULTRA FLO INSULIN PEN NEE.....	82	UNISTIK NORMAL.....	85
ULTRA FLO INSULIN SYRINGE.....	82	UNISTIK 2 NORMAL.....	85
ULTRA-THIN II AUTO LANCET.....	83	UNISTIK 3 NORMAL.....	85
ULTRA-THIN II INSULIN SYR.....	83	UNISTIK PRO SAFETY LANCET.....	85
ULTRA-THIN II LANCETS 28G.....	83	UNISTIK SAFETY LANCETS 28.....	85
ULTRA-THIN II LANCETS 30G.....	83	UNISTIK SAFETY LANCETS 30.....	85
ULTRA-THIN II MINI PEN NE.....	83	UNISTIK 2 SUPER.....	85
ULTRA-THIN II PEN NEEDLES.....	83	UNISTIK TOUCH SAFETY LANC.....	85
ULTRA THIN LANCETS 28G.....	83	UPTRAVI.....	27
ULTRA THIN LANCETS 31G.....	83	UPTRAVI TITRATION PACK.....	27
ULTRA THIN PEN NEEDLES 32.....	83	ursodiol cap 300 mg.....	32
UMECLIDINIUM ELLIPTA.....	29	ursodiol tab 250 mg (Urso 250).....	32
UNIFINE OTC PEN NEEDLE 31.....	83	ursodiol tab 500 mg (Urso forte).....	32
UNIFINE OTC PEN NEEDLE 32.....	83	USTEKINUMAB-AAUZ.....	56
UNIFINE PENTIPS/30G X 3/1.....	84	UZEDY.....	37
UNIFINE PENTIPS 31G X 3/1.....	84		
UNIFINE PENTIPS 31GX5MM.....	84	V	
UNIFINE PENTIPS 31GX6MM.....	84	valacyclovir hcl tab 500 mg, 1 gm (Valtrex).....	5
UNIFINE PENTIPS 31GX8MM.....	84	VALCHLOR.....	56
UNIFINE PENTIPS 32GX4MM.....	84	valganciclovir hcl for soln 50 mg/ml (base equiv)	
UNIFINE PENTIPS 32GX6MM.....	84	(Valcyte).....	5
UNIFINE PENTIPS 33GX4MM.....	84	valganciclovir hcl tab 450 mg (base equivalent)	
UNIFINE PENTIPS 29GX12MM.....	84	(Valcyte).....	5
UNIFINE PENTIPS 31G X 6MM.....	84		

valproate sodium oral soln 250 mg/5ml (base equiv).....	46	VERIFINE UNIVERSAL LANCET.....	85
valproic acid cap 250 mg.....	46	VERQUVO.....	27
valsartan-hydrochlorothiazide tab 80-12.5 mg, 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg (Diovan hct).....	25	VERSACLOZ.....	37
valsartan tab 40 mg, 80 mg, 160 mg, 320 mg (Diovan).....	25	VERZENIO.....	13
VALTOCO 5 MG DOSE.....	47	VIBERZI.....	32
VALTOCO 10 MG DOSE.....	47	vigabatrin powd pack 500 mg (Sabril).....	47
VALTOCO 15 MG DOSE.....	47	vigabatrin tab 500 mg (Sabril).....	47
VALTOCO 20 MG DOSE.....	47	VIJOICE.....	87
VALTYA 1/50.....	16	vilazodone hcl tab 10 mg, 20 mg, 40 mg (Viibryd).....	35
VALUMARK LANCET SUPER THI.....	85	VIRACEPT.....	5
VALUMARK LANCET ULTRA THI.....	85	VIREAD.....	5
VALUMARK PEN NEEDLES 31G.....	85	VITRAKVI.....	13
VALUMARK PEN NEEDLES 29GX.....	85	VIVAGUARD LANCETS.....	85
vancomycin hcl cap 125 mg (base equivalent), 250 mg (base equivalent) (Vancocin).....	7	VIVAGUARD LANCETS 30G.....	85
vancomycin hcl for oral soln 25 mg/ml (base equivalent) (Firvanq).....	7	VIVAGUARD LANCING DEVICE.....	86
vancomycin hcl for oral soln 50 mg/ml (base equivalent) (Vancomycin hydrochlo).....	7	VIVAGUARD SAFETY LANCETS.....	86
VANISHPOINT INSULIN SYRIN.....	85	VIVAGUARD SAFETY LANCETS/.....	86
VAQTA.....	9	VIVOTIF.....	9
varenicline tartrate tab 0.5 mg (base equiv), 1 mg (base equiv).....	41	VONJO.....	13
varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack.....	41	VORANIGO.....	13
VARIVAX.....	9	voriconazole for susp 40 mg/ml (Vfend).....	3
VARUBI.....	31	voriconazole tab 50 mg, 200 mg (Vfend).....	3
VAXCHORA.....	9	VOSEVI.....	5
VAXELIS.....	9	VOXZOGO.....	22
VAXNEUVANCE.....	9	VRAYLAR.....	37
VCF VAGINAL CONTRACEPTIVE.....	33	VYNDAMAX.....	27
VECAMYL.....	25	VYVANSE.....	39
VELIVET.....	16	VYVGART HYTRULO.....	87
VEMLIDY.....	5		
VENCLEXTA.....	13	W	
VENCLEXTA STARTING PACK.....	13	WALGREENS LANCETS.....	86
venlafaxine hcl cap er 24hr 37.5 mg (base equivalent), 75 mg (base equivalent), 150 mg (base equivalent) (Effexor xr).....	35	warfarin sodium tab 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg, 10 mg.....	50
venlafaxine hcl tab er 24hr 225 mg (base equivalent).....	35	WEGMANS UNIFINE PENTIPS P.....	86
venlafaxine hcl tab 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent), 75 mg (base equivalent), 100 mg (base equivalent).....	35	WEGOVY.....	39
verapamil hcl tab er 120 mg, 180 mg, 240 mg (Calan sr).....	23	WEGOVY HD.....	39
verapamil hcl tab 40 mg, 80 mg, 120 mg.....	23	WELIREG.....	13
VERIFINE INSULIN PEN NEED.....	85	WIDE-SEAL SILICONE DIAPHR.....	86
VERIFINE INSULIN SYRINGE.....	85		
VERIFINE INSULIN SYRINGE/.....	85	X	
VERIFINE PLUS INSULIN PEN.....	85	XARELTO.....	50
VERIFINE PLUS PEN NEEDLE/.....	85	XARELTO STARTER PACK.....	51
VERIFINE SAFETY LANCET MI.....	85	XCOPRI.....	47
		XENICAL.....	39
		XERMELO.....	32
		XIFAXAN.....	7
		XIIDRA.....	53
		XOFLUZA.....	5
		XOLAIR.....	29
		XOSPATA.....	13
		XPOVIO.....	13
		XPOVIO 60 MG TWICE WEEKLY.....	13
		XPOVIO 80 MG TWICE WEEKLY.....	13
		XROMI.....	50
		XTAMPZA ER.....	42
		XTANDI.....	13
		XULTOPHY 100/3.6.....	18

XYWAV.....	41
Y	
YESINTEK.....	56
YONSA.....	13
Z	
zafirlukast tab 10 mg, 20 mg (Accolate).....	29
zaleplon cap 5 mg, 10 mg.....	37
ZARONTIN.....	47
ZARXIO.....	50
ZEJULA.....	13
ZELBORAF.....	14
ZENPEP.....	31
ZEPBOUND.....	39
ZEPOSIA.....	41
ZEPOSIA 7-DAY STARTER PAC.....	41
ZEPOSIA STARTER KIT.....	41
ZEVRX INSULIN SYRINGE/0.5.....	86
ZEVRX INSULIN SYRINGE/1ML.....	86
ZEVRX PEN NEEDLES 31G X 5.....	86
ZEVRX PEN NEEDLES 31G X 6.....	86
ZEVRX PEN NEEDLES 31G X 8.....	86
ZEVRX PEN NEEDLES 32G X 4.....	86
ZEVRX TWIST TOP LANCETS 3.....	86
zidovudine cap 100 mg (Retrovir).....	5
zidovudine syrup 10 mg/ml (Retrovir).....	5
zidovudine tab 300 mg.....	5
ziprasidone hcl cap 20 mg, 40 mg, 60 mg, 80 mg	
(Geodon).....	37
ZOKINVY.....	87
ZOLINZA.....	14
zolmitriptan tab 2.5 mg, 5 mg (Zomig).....	45
zolpidem tartrate tab er 6.25 mg, 12.5 mg (Ambien	
cr).....	37
zolpidem tartrate tab 5 mg, 10 mg (Ambien).....	37
zonisamide cap 50 mg.....	47
zonisamide cap 25 mg, 100 mg (Zonegran).....	47
ZONTIVITY.....	51
ZORTRESS.....	87
ZUBSOLV.....	42
ZYDELIG.....	14
ZYKADIA.....	14
ZYPREXA.....	37
ZYPREXA RELPREVV.....	37