

Multi-Tier Basic Drug List

July 2021

Please consider talking to your doctor about prescribing preferred medications, which may help reduce your out-of-pocket costs. This list may help guide you and your doctor in selecting an appropriate medication for you.

The drug list is regularly updated. You can view the most up-to-date list, or the specialty drug list, at **MyPrime.com**.

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Introduction

Blue Cross and Blue Shield is pleased to present the 2021 Drug List. This is a list of preferred drugs which includes brand drugs and a partial listing of generic drugs. **Members are encouraged to show this list to their physicians and pharmacists. Physicians are encouraged to prescribe drugs on this list, when right for the member. However, decisions regarding therapy and treatment are always between members and their physician.**

Drug List updates – This list is regularly updated as generic drugs become available and changes take place in the pharmaceuticals market. For the most up-to-date information, visit **MyPrime.com** and log in or call the number on your ID card.

How drugs are selected

Drugs on this list are selected based on the recommendations of a committee made up of physicians and pharmacists from throughout the country. The committee, which includes at least one representative from your health plan, reviews drugs regulated by the U.S. Food and Drug Administration (FDA).

Both drugs that are newly approved by the FDA as well as those that have been on the market for some time are considered. Drugs are selected based on safety, efficacy, cost and how they compare to other drugs currently on the list.

How member payment is determined

Generally, each drug is placed into one of up to six member payment tiers: Preferred Generic (Tier 1), Non-Preferred Generic (Tier 2), Preferred Brand (Tier 3), Non-Preferred Brand (Tier 4), Preferred Specialty (Tier 5) and Non-Preferred Specialty (Tier 6). Non-Preferred Generic, Non-Preferred Brand and Non-Preferred Specialty drugs are not listed in this document. Based on your benefit design, drugs can either be in these tiers or you may have fewer tiers, e.g., all generics in one tier. Some brands may be in a generic tier and some generics may be in a brand tier. Note: Covered substance use disorder drugs (those FDA-approved for treatment of opioid drug abuse, alcohol abuse and to quit tobacco use) may be in the lowest tiers. Substance use disorder brand drugs may be in the lowest brand tier and generic drugs in the lowest generic tier, based on your benefit plan. To verify your payment amount for a drug, visit **MyPrime.com** and log in or call the number on your ID card.

Your pharmacy benefit includes coverage for many prescription drugs, although some exclusions may apply. For example, drugs indicated for cosmetic purposes, e.g., Propecia, for hair growth, may not be covered. Drugs that have not received FDA approval may not be covered. Prescription products that have over-the-counter (OTC) equivalents may not be covered. Drugs that are not FDA-approved for self-administration may be available through your medical benefit. Check your plan materials for details.

How to use this list

Generic drugs are shown in lower-case **boldface** type. Most generic drugs are followed by a reference brand drug in (parentheses). The reference brand drug is usually a non-preferred (NP) brand and is only included as a reference to the brand. Some generic products have no reference brand.

Example: **atorvastatin** (Lipitor)

Brand prescription drugs are shown in all CAPITAL letters followed by the generic name.

Example: NOVOLOG – Insulin aspart inj 100 unit/ml

Drugs used to treat multiple conditions

Some drugs in the same dosage form may be used to treat more than one medical condition. In these instances, each medication is classified according to its first FDA-approved use. Please check the index if you do not find your particular medication in the class/condition section that corresponds to your use.

Please note: Drugs that need a health care provider to administer them and are often given to you in a hospital, doctor's office or other health care setting may be covered under your medical benefit. Some types of these drugs are contraceptive implants and chemo infusions. If you are taking or are prescribed a drug that is not on this drug list, call the number on your ID card to see if the drug may be covered.

Generic drugs

Using generic drugs, when right for you, can help you save on your out-of-pocket medication costs. Generic drugs must be approved by the FDA just as brand drugs are, and must meet the same standards.

There are two types of generic drugs:

- A **generic equivalent** is made with the same active ingredient(s) at the same dosage as the reference drug.
- A **generic alternative** is a drug typically used to treat the same condition, but the active ingredient(s) differs from the brand drug.

According to the FDA, compared to its brand counterpart, an FDA-approved generic drug:

- Is chemically the same
- Works just as well in the body
- Is as safe and effective
- Meets the same standards set by the FDA

The main difference between the reference brand drug and the generic equivalent is that the generic often costs much less.

Preferred brand drugs typically move to a non-preferred brand tier after a generic equivalent becomes available.

You may be responsible for your member cost-share payment amount (copay or coinsurance) *plus* the difference in cost between the brand and generic equivalent if you or your doctor requests the reference brand rather than the generic. Generic drugs generally have the lowest member payment amount.

Consider talking to your doctor about generic drugs

If your doctor writes a prescription for a brand drug that does not have a generic equivalent, consider asking if an appropriate generic alternative is available.

You can also let your pharmacist know that you would like a generic equivalent for a brand drug, whenever one is available. Your pharmacist can usually substitute a generic equivalent for its brand counterpart without a new prescription from your doctor.

Only your doctor can determine whether a generic alternative is right for you and must prescribe the medication.

Coverage considerations

Most prescription drug benefit plans provide coverage for up to a 30-day supply of medication, with some exceptions. Your plan may also provide coverage for up to a 90-day supply of maintenance medications. Maintenance medications are those drugs you may take on an ongoing basis for conditions such as high blood pressure, diabetes or high cholesterol. Some plans may exclude coverage for certain agents or drug categories, like those used for erectile dysfunction or weight loss. Also, some drugs may only be covered for members within a certain age range due to the drug being used for cosmetic purposes or for safety concerns. Drug coverage may be limited to recommendations based on FDA-approved labeling and recognized evidence-based or clinical practice guidelines.

Over-the-counter exclusions: Your benefit plan may not provide coverage for prescription medications that have an over-the-counter version. You should refer to your benefit plan material for details about your particular benefits.

Compounded medications: Your benefit plan may not provide coverage for compounded medications. Please see your plan materials or call the number on your ID card to determine whether compounded medications are covered and/or verify your payment amount.

Repackaged medications: Repackaged versions of medications already available on the market are not covered.

Non FDA-approved drugs: Drugs that have not received FDA approval are not covered.

Prior Authorization (PA): Your benefit plan may require prior authorization for certain drugs. This means that your doctor will need to submit a prior authorization request for coverage of these medications, and the request will need to be approved, before the medication may be covered under your plan. For the medications listed in this document, if a prior authorization is commonly required, it will generally be noted next to the medication with a dot under the prior authorization column. Some plans may have prior authorization on additional medications beyond those noted in this document. Refer to your benefit plan materials for details about your particular benefits.

Step Therapy (ST): Your benefit plan may include a step therapy program. This means you may need to try another proven, cost-effective medication before coverage may be available for the drug included in the program. Many brand drugs have less-expensive generic or brand alternatives that might be an option for you. For the medications listed in this document, if a step therapy is commonly required, it will generally be noted next to the medication with a dot under the step therapy column. Some plans may have step therapy programs on additional medications beyond those noted in this document. Refer to your benefit plan materials for details about your particular benefits.

Dispensing Limits (DL): Drug dispensing limits help encourage medication use as intended by the FDA. Dispensing limits are placed on medications in certain drug categories. For the medications listed in this document, if a dispensing limit applies, it will generally be noted next to the medication with a dot under the dispensing limits column. Limits may include: quantity of covered medication per prescription or quantity of covered medication in a given time period. If your doctor prescribes a greater quantity of medication than what the dispensing limit allows, you can still get the medication. However, you may be responsible for the full cost of the prescription beyond what your coverage allows.* Some plans may have a dispensing limit on additional medications beyond those noted in this document. For a list of medications and their dispensing limits, visit [MyPrime.com](https://www.mypriime.com).

*Please note: For certain controlled substance medications, some state laws may not allow coverage by a health benefit plan of such medication if dispensed in a quantity beyond what the dispensing limit allows. You will be responsible for the full cost of the prescription with no benefits applied if the dispensed quantity exceeds the dispensing limit.

ACA Preventive (ACA): Medicines marked in the ACA column are under the Affordable Care Act coverage of preventive services. These products may have limited or \$0 member cost-sharing (copay or co-insurance), when meeting the conditions as outlined under the regulation. Coverage may vary based on benefit plan. These are also indicated with an "A" in the drug tier column.

Remember, medication decisions are between you and your doctor. Only you and your doctor can determine which medication is right for you. Discuss any questions or concerns you have about medications you are taking or are prescribed with your doctor. Blue Cross and Blue Shield does not provide health care services and, therefore, cannot guarantee any results or outcomes.

Specialty drugs

Specialty drugs are used in the treatment of medical conditions such as hepatitis, hemophilia, multiple sclerosis and rheumatoid arthritis. Specialty drugs may be oral, topical or injectable medications that can either be self-administered or administered by a health care professional. Medications administered by a health care professional are not covered under the pharmacy benefit. For a current list of specialty medications, visit **MyPrime.com**.

Note that some drug classes may be excluded by some plans and therefore may not be covered under your pharmacy benefit. Your plan may have a different coverage level for self-administered specialty drugs. If you have questions about your coverage for specialty medications or your prescription drug benefit, call the number on your ID card.

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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 tablets
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

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
ANTI-INFECTIVE AGENTS					
PENICILLINS					
amoxicillin (trihydrate) cap 250 mg					
amoxicillin (trihydrate) cap 500 mg					
amoxicillin (trihydrate) for susp 125 mg/5ml					
amoxicillin (trihydrate) for susp 200 mg/5ml					
amoxicillin (trihydrate) for susp 250 mg/5ml					
amoxicillin (trihydrate) for susp 400 mg/5ml					
amoxicillin (trihydrate) tab 500 mg					
amoxicillin (trihydrate) tab 875 mg					
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml					
amoxicillin & k clavulanate tab 500-125 mg (Augmentin)					
amoxicillin & k clavulanate tab 875-125 mg (Augmentin)					
penicillin v potassium tab 250 mg					
penicillin v potassium tab 500 mg					
CEPHALOSPORINS					
cefadroxil cap 500 mg					
cefdinir cap 300 mg					
cephalexin cap 250 mg (Keflex)					
cephalexin cap 500 mg (Keflex)					
MACROLIDES					
AZITHROMYCIN - azithromycin powd pack for susp 1 gm					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
azithromycin tab 250 mg (Zithromax)			•		
azithromycin tab 500 mg (Zithromax)			•		
TETRACYCLINES					
doxycycline hyclate cap 100 mg (Vibramycin)					
doxycycline hyclate tab 100 mg					
doxycycline monohydrate cap 50 mg					
doxycycline monohydrate cap 100 mg (Monodox)					
minocycline hcl cap 50 mg (Minocin)					
FLUOROQUINOLONES					
ciprofloxacin hcl tab 250 mg (base equiv) (Cipro)					
ciprofloxacin hcl tab 500 mg (base equiv) (Cipro)					
ciprofloxacin hcl tab 750 mg (base equiv)					
levofloxacin tab 250 mg (Levaquin)					
levofloxacin tab 500 mg (Levaquin)					
levofloxacin tab 750 mg (Levaquin)					
AMINOGLYCOSIDES					
neomycin sulfate tab 500 mg					
PAROMOMYCIN SULFATE - paromomycin sulfate cap 250 mg					
SULFONAMIDES					
SULFADIAZINE - sulfadiazine tab 500 mg					
ANTIMYCOBACTERIAL AGENTS					
isoniazid tab 300 mg					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
PRIFTIN - rifapentine tab 150 mg					
ANTIFUNGALS					
fluconazole tab 50 mg (Diflucan)					
fluconazole tab 100 mg (Diflucan)					
fluconazole tab 150 mg (Diflucan)					
fluconazole tab 200 mg (Diflucan)					
NOXAFIL - posaconazole susp 40 mg/ml		•			
terbinafine hcl tab 250 mg (Lamisil)					
ANTIVIRALS					
acyclovir cap 200 mg (Zovirax)					
acyclovir tab 400 mg (Zovirax)					
acyclovir tab 800 mg (Zovirax)					
BARACLUDE - entecavir oral soln 0.05 mg/ml					
BIKTARVY - bicitgravir-emtricitabine-tenofovir af tab 50-200-25 mg			•		
CIMDUO - lamivudine-tenofovir disoproxil fumarate tab 300-300 mg			•		
DELSTRIGO - doravirine-lamivudine-tenofovir df tab 100-300-300 mg			•		
DESCOVY - emtricitabine-tenofovir alafenamide fumarate tab 200-25 mg			•		
DOVATO - dolutegravir sodium-lamivudine tab 50-300 mg (base eq)			•		
EPCLUSA - sofosbuvir-velpatasvir tab 200-50 mg	•	•	•		
EPCLUSA - sofosbuvir-velpatasvir tab 400-100 mg	•	•	•		
famciclovir tab 125 mg (Famvir)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
GENVOYA - elvitegrav-cobic-emtricitab-tenofov af tab 150-150-200-10 mg			•		
HARVONI - ledipasvir-sofosbuvir tab 45-200 mg	•	•	•		
HARVONI - ledipasvir-sofosbuvir tab 90-400 mg	•	•	•		
HARVONI - ledipasvir-sofosbuvir pellet pack 33.75-150 mg	•	•	•		
HARVONI - ledipasvir-sofosbuvir pellet pack 45-200 mg	•	•	•		
INTELENCE - etravirine tab 25 mg			•		
INTELENCE - etravirine tab 100 mg			•		
INTELENCE - etravirine tab 200 mg			•		
ISENTRESS - raltegravir potassium packet for susp 100 mg (base equiv)			•		
ISENTRESS - raltegravir potassium tab 400 mg (base equiv)			•		
ISENTRESS - raltegravir potassium chew tab 25 mg (base equiv)			•		
ISENTRESS - raltegravir potassium chew tab 100 mg (base equiv)			•		
ISENTRESS HD - raltegravir potassium tab 600 mg (base equiv)			•		
JULUCA - dolutegravir sodium-rilpivirine hcl tab 50-25 mg (base eq)			•		
KALETRA - lopinavir-ritonavir tab 100-25 mg			•		
KALETRA - lopinavir-ritonavir tab 200-50 mg			•		
MAVYRET - glecaprevir-pibrentasvir tab 100-40 mg	•	•	•		
nevirapine tab 200 mg (Viramune)			•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
NORVIR - ritonavir oral soln 80 mg/ml			•		
NORVIR - ritonavir powder packet 100 mg			•		
ODEFSEY - emtricitabine- rilpivirine-tenofovir af tab 200-25-25 mg			•		
PEGASYS - peginterferon alfa-2a inj 180 mcg/ml	•	•			
PEGASYS - peginterferon alfa-2a inj 180 mcg/0.5ml	•	•			
PREZISTA - darunavir ethanolate susp 100 mg/ml (base equiv)			•		
PREZISTA - darunavir ethanolate tab 75 mg (base equiv)			•		
PREZISTA - darunavir ethanolate tab 150 mg (base equiv)			•		
PREZISTA - darunavir ethanolate tab 600 mg (base equiv)			•		
PREZISTA - darunavir ethanolate tab 800 mg (base equiv)			•		
SOVALDI - sofosbuvir tab 200 mg	•	•	•		
SOVALDI - sofosbuvir tab 400 mg	•	•	•		
SOVALDI - sofosbuvir pellet pack 150 mg	•	•	•		
SOVALDI - sofosbuvir pellet pack 200 mg	•	•	•		
SYMTUZA - darunavir-cobic-emtricitab-tenofov af tab 800-150-200-10 mg			•		
TEMIXYS - lamivudine-tenofovir disoproxil fumarate tab 300-300 mg			•		
TIVICAY - dolutegravir sodium tab 10 mg (base equiv)			•		
TIVICAY - dolutegravir sodium tab 25 mg (base equiv)			•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
TIVICAY - dolutegravir sodium tab 50 mg (base equiv)			•		
TIVICAY PD - dolutegravir sodium tab for oral susp 5 mg (base equiv)			•		
TRIUMEQ - abacavir-dolutegravir-lamivudine tab 600-50-300 mg			•		
valacyclovir hcl tab 500 mg (Valtrex)					
valacyclovir hcl tab 1 gm (Valtrex)					
VIREAD - tenofovir disoproxil fumarate oral powder 40 mg/gm			•		
VIREAD - tenofovir disoproxil fumarate tab 150 mg			•		
VIREAD - tenofovir disoproxil fumarate tab 200 mg			•		
VIREAD - tenofovir disoproxil fumarate tab 250 mg			•		
VOSEVI - sofosbuvir-velpatasvir-voxilaprevir tab 400-100-100 mg	•	•	•		
ANTIMALARIALS					
MEFLOQUINE HCL - mefloquine hcl tab 250 mg					
ANTHELMINTICS					
BENZNIDAZOLE - benznidazole tab 12.5 mg					
BENZNIDAZOLE - benznidazole tab 100 mg					
ANTI-INFECTIVE AGENTS - MISC.					
ALINIA - nitazoxanide tab 500 mg			•		
ALINIA - nitazoxanide for susp 100 mg/5ml			•		
clindamycin hcl cap 150 mg (Cleocin)					
clindamycin hcl cap 300 mg (Cleocin)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
IMPAVIDO - miltefosine cap 50 mg					
metronidazole tab 250 mg (Flagyl)					
metronidazole tab 500 mg (Flagyl)					
nitrofurantoin monohydrate macrocrystalline cap 100 mg (Macrobid)					
SIVEXTRO - tedizolid phosphate tab 200 mg			•		
sulfamethoxazole-trimethoprim tab 400-80 mg (Bactrim)					
sulfamethoxazole-trimethoprim tab 800-160 mg (Bactrim ds)					
trimethoprim tab 100 mg					
XIFAXAN - rifaximin tab 550 mg			•		
ANTINEOPLASTIC AGENTS					
ANTINEOPLASTICS					
ACTIMMUNE - interferon gamma-1b inj 100 mcg/0.5ml (2000000 unit/0.5ml)	•				
AFINITOR - everolimus tab 10 mg	•	•	•		
anastrozole tab 1 mg (Arimidex)					•
AYVAKIT - avapritinib tab 100 mg	•	•	•		
AYVAKIT - avapritinib tab 200 mg	•	•	•		
AYVAKIT - avapritinib tab 300 mg	•	•	•		
bicalutamide tab 50 mg (Casodex)	•				
CABOMETRYX - cabozantinib s-malate tab 20 mg (base equivalent)	•	•	•		
CABOMETRYX - cabozantinib s-malate tab 40 mg (base equivalent)	•	•	•		
CABOMETRYX - cabozantinib s-malate tab 60 mg (base equivalent)	•	•	•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
COTELLIC - cobimetinib fumarate tab 20 mg (base equivalent)	•	•	•		
EMCYT - estramustine phosphate sodium cap 140 mg	•				
ERIVEDGE - vismodegib cap 150 mg	•	•	•		
ERLEADA - apalutamide tab 60 mg	•	•	•		
IBRANCE - palbociclib cap 75 mg	•	•	•		
IBRANCE - palbociclib cap 100 mg	•	•	•		
IBRANCE - palbociclib cap 125 mg	•	•	•		
IBRANCE - palbociclib tab 75 mg	•	•	•		
IBRANCE - palbociclib tab 100 mg	•	•	•		
IBRANCE - palbociclib tab 125 mg	•	•	•		
INTRON A - interferon alfa-2b inj 6000000 unit/ml	•				
INTRON A - interferon alfa-2b inj 10000000 unit/ml	•				
INTRON A - interferon alfa-2b for inj 10000000 unit	•				
INTRON A - interferon alfa-2b for inj 18000000 unit	•				
INTRON A - interferon alfa-2b for inj 50000000 unit	•				
KISQALI - ribociclib succinate tab pack 200 mg daily dose	•	•	•		
KISQALI - ribociclib succinate tab pack 400 mg daily dose (200 mg tab)	•	•	•		
KISQALI - ribociclib succinate tab pack 600 mg daily dose (200 mg tab)	•	•	•		
KISQALI FEMARA 200 DOSE - ribociclib 200 mg dose (200 mg tab) & letrozole 2.5 mg tbpk	•	•	•		
KISQALI FEMARA 400 DOSE - ribociclib 400 mg dose (200 mg tab) & letrozole 2.5 mg tbpk	•	•	•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
KISQALI FEMARA 600 DOSE - ribociclib 600 mg dose (200 mg tab) & letrozole 2.5 mg tbpk	•	•	•			PURIXAN - mercaptopurine susp 2000 mg/100ml (20 mg/ml)	•				
letrozole tab 2.5 mg (Femara)						RETEVMO - selpercatinib cap 40 mg	•	•	•		
LEUKERAN - chlorambucil tab 2 mg	•					RETEVMO - selpercatinib cap 80 mg	•	•	•		
LYNPARZA - olaparib tab 100 mg	•	•	•			ROZLYTREK - entrectinib cap 100 mg	•	•	•		
LYNPARZA - olaparib tab 150 mg	•	•	•			ROZLYTREK - entrectinib cap 200 mg	•	•	•		
megestrol acetate tab 20 mg						RUBRACA - rucaparib camsylate tab 200 mg (base equivalent)	•	•	•		
megestrol acetate tab 40 mg						RUBRACA - rucaparib camsylate tab 250 mg (base equivalent)	•	•	•		
MEKINIST - trametinib dimethyl sulfoxide tab 0.5 mg (base equivalent)	•	•	•			RUBRACA - rucaparib camsylate tab 300 mg (base equivalent)	•	•	•		
MEKINIST - trametinib dimethyl sulfoxide tab 2 mg (base equivalent)	•	•	•			RYDAPT - midostaurin cap 25 mg	•	•	•		
MESNEX - mesna tab 400 mg						SPRYCEL - dasatinib tab 20 mg	•	•	•		
methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)						SPRYCEL - dasatinib tab 50 mg	•	•	•		
methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)						SPRYCEL - dasatinib tab 70 mg	•	•	•		
methotrexate sodium inj 50 mg/2ml (25 mg/ml)						SPRYCEL - dasatinib tab 80 mg	•	•	•		
MYLERAN - busulfan tab 2 mg	•					SPRYCEL - dasatinib tab 100 mg	•	•	•		
NEXAVAR - sorafenib tosylate tab 200 mg (base equivalent)	•	•	•			SPRYCEL - dasatinib tab 140 mg	•	•	•		
NUBEQA - darolutamide tab 300 mg	•	•	•			SUTENT - sunitinib malate cap 12.5 mg (base equivalent)	•	•	•		
PIQRAY 200MG DAILY DOSE - alpelisib tab therapy pack 200 mg daily dose	•	•	•			SUTENT - sunitinib malate cap 25 mg (base equivalent)	•	•	•		
PIQRAY 250MG DAILY DOSE - alpelisib tab pack 250 mg daily dose (200 mg & 50 mg tabs)	•	•	•			SUTENT - sunitinib malate cap 37.5 mg (base equivalent)	•	•	•		
PIQRAY 300MG DAILY DOSE - alpelisib tab pack 300 mg daily dose (2x150 mg tab)	•	•	•			SUTENT - sunitinib malate cap 50 mg (base equivalent)	•	•	•		
						TABLOID - thioguanine tab 40 mg	•				
						TABRECTA - capmatinib hcl tab 150 mg	•	•	•		
						TABRECTA - capmatinib hcl tab 200 mg	•	•	•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
TAFINLAR - dabrafenib mesylate cap 50 mg (base equivalent)	•	•	•		
TAFINLAR - dabrafenib mesylate cap 75 mg (base equivalent)	•	•	•		
TALZENNA - talazoparib tosylate cap 0.25 mg (base equivalent)	•	•	•		
TALZENNA - talazoparib tosylate cap 1 mg (base equivalent)	•	•	•		
tamoxifen citrate tab 10 mg (base equivalent)					•
TASIGNA - nilotinib hcl cap 50 mg (base equivalent)	•	•	•		
TASIGNA - nilotinib hcl cap 150 mg (base equivalent)	•	•	•		
TASIGNA - nilotinib hcl cap 200 mg (base equivalent)	•	•	•		
TREXALL - methotrexate sodium tab 5 mg (base equiv)					
TREXALL - methotrexate sodium tab 7.5 mg (base equiv)					
TREXALL - methotrexate sodium tab 10 mg (base equiv)					
TREXALL - methotrexate sodium tab 15 mg (base equiv)					
VENCLEXTA - venetoclax tab 10 mg	•	•	•		
VENCLEXTA - venetoclax tab 50 mg	•	•	•		
VENCLEXTA - venetoclax tab 100 mg	•	•	•		
VENCLEXTA STARTING PACK - venetoclax tab therapy starter pack 10 & 50 & 100 mg	•	•	•		
VERZENIO - abemaciclib tab 50 mg	•	•	•		
VERZENIO - abemaciclib tab 100 mg	•	•	•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
VERZENIO - abemaciclib tab 150 mg	•	•	•		
VERZENIO - abemaciclib tab 200 mg	•	•	•		
VITRAKVI - larotrectinib sulfate oral soln 20 mg/ml (base equivalent)	•	•	•		
VITRAKVI - larotrectinib sulfate cap 25 mg (base equivalent)	•	•	•		
VITRAKVI - larotrectinib sulfate cap 100 mg (base equivalent)	•	•	•		
VOTRIENT - pazopanib hcl tab 200 mg (base equiv)	•	•	•		
XALKORI - crizotinib cap 200 mg	•	•	•		
XALKORI - crizotinib cap 250 mg	•	•	•		
XTANDI - enzalutamide cap 40 mg	•	•	•		
XTANDI - enzalutamide tab 40 mg	•	•	•		
XTANDI - enzalutamide tab 80 mg	•	•	•		
YONSA - abiraterone acetate tab 125 mg	•	•	•		
ZELBORAF - vemurafenib tab 240 mg	•	•	•		
ZYTIGA - abiraterone acetate tab 500 mg	•	•	•		
ENDOCRINE AND METABOLIC DRUGS					
CORTICOSTEROIDS					
DEXAMETHASONE - dexamethasone soln 0.5 mg/5ml					
dexamethasone tab 0.5 mg					
dexamethasone tab 0.75 mg					
dexamethasone tab 1.5 mg					
dexamethasone tab 4 mg					
dexamethasone tab 6 mg					
fludrocortisone acetate tab 0.1 mg					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
methylprednisolone tab therapy pack 4 mg (21) (Medrol dosepak)					
methylprednisolone tab 4 mg (Medrol)					
methylprednisolone tab 16 mg (Medrol)					
methylprednisolone tab 32 mg (Medrol)					
prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)					
PREDNISONE - prednisone oral soln 5 mg/5ml					
PREDNISONE INTENSOL - prednisone conc 5 mg/ml					
prednisone tab therapy pack 5 mg (21)					
prednisone tab therapy pack 5 mg (48)					
prednisone tab 1 mg					
prednisone tab 2.5 mg					
prednisone tab 5 mg					
prednisone tab 10 mg					
prednisone tab 20 mg					
prednisone tab 50 mg					
ESTROGENS					
COMBIPATCH - estradiol-norethindrone ace td pttw 0.05-0.14 mg/day					
COMBIPATCH - estradiol-norethindrone ace td pttw 0.05-0.25 mg/day					
DIVIGEL - estradiol td gel 0.25 mg/0.25gm (0.1%)					
DIVIGEL - estradiol td gel 0.5 mg/0.5gm (0.1%)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
DIVIGEL - estradiol td gel 0.75 mg/0.75gm (0.1%)					
DIVIGEL - estradiol td gel 1 mg/gm (0.1%)					
DIVIGEL - estradiol td gel 1.25 mg/1.25gm (0.1%)					
DUAVEE - conjugated estrogens-bazedoxifene tab 0.45-20 mg					
estradiol tab 0.5 mg (Estrace)					
estradiol tab 1 mg (Estrace)					
estradiol tab 2 mg (Estrace)					
ORIAHNN - elagolix-estradiol-noreth 300-1-0.5mg & elagolix 300mg cap pack		•	•		
PREMARIN - estrogens, conjugated tab 0.3 mg					
PREMARIN - estrogens, conjugated tab 0.45 mg					
PREMARIN - estrogens, conjugated tab 0.625 mg					
PREMARIN - estrogens, conjugated tab 0.9 mg					
PREMARIN - estrogens, conjugated tab 1.25 mg					
PREMPHASE - conj est 0.625(14)/ conj est-medroxypro ac tab 0.625-5mg(14)					
PREMPRO - conjugated estrogen-medroxyprogesterone acetate tab 0.3-1.5 mg					
PREMPRO - conjugated estrogen-medroxyprogesterone acetate tab 0.45-1.5 mg					
PREMPRO - conjugated estrogen-medroxyprogesterone acetate tab 0.625-2.5 mg					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
PREMPRO - conjugated estrogen-medroxyprogesterone acetate tab 0.625-5 mg					
CONTRACEPTIVES					
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg (Desogen)			•		
ELLA - ulipristal acetate tab 30 mg			•		•
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg			•		
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg			•		
levonorgestrel-eth estradiol tab 0.05-30/0.075-40/0.125-30mcg			•		
norethindrone & ethinyl estradiol tab 1 mg-35 mcg (Norinyl 1+35)			•		
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg (Loestrin 1/20-21)			•		
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg (Loestrin fe 1/20)			•		•
norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg (Loestrin fe 1.5/30)			•		
norethindrone tab 0.35 mg (Nor-qd)			•		•
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg (Ortho-cyclen)			•		
norgestimate-eth estradiol tab 0.18-25/0.215-25/0.25-25 mg-mcg (Ortho tri-cyclen lo)			•		
norgestimate-eth estradiol tab 0.18-35/0.215-35/0.25-35 mg-mcg (Ortho tri-cyclen)			•		•
NUVARING - etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr			•		•

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
PROGESTINS					
medroxyprogesterone acetate tab 2.5 mg (Provera)					
medroxyprogesterone acetate tab 5 mg (Provera)					
medroxyprogesterone acetate tab 10 mg (Provera)					
ANTIDIABETICS					
BAQSIMI ONE PACK - glucagon nasal powder 3 mg/dose					
BAQSIMI TWO PACK - glucagon nasal powder 3 mg/dose					
FARXIGA - dapagliflozin propanediol tab 5 mg (base equivalent)			•		
FARXIGA - dapagliflozin propanediol tab 10 mg (base equivalent)			•		
glimepiride tab 1 mg (Amaryl)					
glimepiride tab 2 mg (Amaryl)					
glimepiride tab 4 mg (Amaryl)					
glipizide tab er 24hr 2.5 mg (Glucotrol xl)					
glipizide tab er 24hr 5 mg (Glucotrol xl)					
glipizide tab er 24hr 10 mg (Glucotrol xl)					
glipizide tab 5 mg (Glucotrol)					
glipizide tab 10 mg (Glucotrol)					
GLUCAGON EMERGENCY KIT - glucagon (rdna) for inj kit 1 mg					
GLUCAGON EMERGENCY KIT FO - glucagon hcl for inj 1 mg					
glyburide micronized tab 1.5 mg (Glynase)					
glyburide micronized tab 3 mg (Glynase)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
glyburide micronized tab 6 mg (Glynase)						INVOKAMET - canagliflozin- metformin hcl tab 150-500 mg			•		
glyburide tab 1.25 mg						INVOKAMET - canagliflozin- metformin hcl tab 150-1000 mg			•		
glyburide tab 2.5 mg						INVOKAMET XR - canagliflozin- metformin hcl tab er 24hr 50-500 mg			•		
glyburide tab 5 mg						INVOKAMET XR - canagliflozin- metformin hcl tab er 24hr 50-1000 mg			•		
glyburide-metformin tab 1.25-250 mg (Glucovance)						INVOKAMET XR - canagliflozin- metformin hcl tab er 24hr 150-500 mg			•		
glyburide-metformin tab 2.5-500 mg (Glucovance)						INVOKAMET XR - canagliflozin- metformin hcl tab er 24hr 150-1000 mg			•		
glyburide-metformin tab 5-500 mg (Glucovance)						INVOKANA - canagliflozin tab 100 mg			•		
GLYXAMBI - empagliflozin- linagliptin tab 10-5 mg			•			INVOKANA - canagliflozin tab 300 mg			•		
GLYXAMBI - empagliflozin- linagliptin tab 25-5 mg			•			JANUMET - sitagliptin-metformin hcl tab 50-500 mg			•		
GVOKE HYOPEN 1-PACK - glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml						JANUMET - sitagliptin-metformin hcl tab 50-1000 mg			•		
GVOKE HYOPEN 1-PACK - glucagon subcutaneous solution auto-injector 1 mg/0.2ml						JANUMET XR - sitagliptin- metformin hcl tab er 24hr 50-500 mg			•		
GVOKE HYOPEN 2-PACK - glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml						JANUMET XR - sitagliptin- metformin hcl tab er 24hr 50-1000 mg			•		
GVOKE HYOPEN 2-PACK - glucagon subcutaneous solution auto-injector 1 mg/0.2ml						JANUVIA - sitagliptin phosphate tab 25 mg (base equiv)			•		
GVOKE PFS - glucagon subcutaneous soln pref syringe 0.5 mg/0.1ml						JANUVIA - sitagliptin phosphate tab 50 mg (base equiv)			•		
GVOKE PFS - glucagon subcutaneous soln pref syringe 1 mg/0.2ml						JANUVIA - sitagliptin phosphate tab 100 mg (base equiv)			•		
INVOKAMET - canagliflozin- metformin hcl tab 50-500 mg			•								
INVOKAMET - canagliflozin- metformin hcl tab 50-1000 mg			•								

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
JARDIANCE - empagliflozin tab 10 mg			•		
JARDIANCE - empagliflozin tab 25 mg			•		
metformin hcl tab er 24hr 500 mg (Glucophage xr)					
metformin hcl tab er 24hr 750 mg (Glucophage xr)					
metformin hcl tab 500 mg (Glucophage)					
metformin hcl tab 850 mg (Glucophage)					
metformin hcl tab 1000 mg (Glucophage)					
OZEMPIC - semaglutide soln pen-inj 0.25 or 0.5 mg/dose (2 mg/1.5ml)			•	•	
OZEMPIC - semaglutide soln pen-inj 1 mg/dose (2 mg/1.5ml)			•	•	
OZEMPIC - semaglutide soln pen-inj 1 mg/dose (4 mg/3ml)			•	•	
pioglitazone hcl tab 15 mg (base equiv) (Actos)					
pioglitazone hcl tab 30 mg (base equiv) (Actos)					
pioglitazone hcl tab 45 mg (base equiv) (Actos)					
RYBELSUS - semaglutide tab 3 mg			•	•	
RYBELSUS - semaglutide tab 7 mg			•	•	
RYBELSUS - semaglutide tab 14 mg			•	•	
SOLIQUA 100/33 - insulin glargine-lixisenatide sol pen-inj 100-33 unit-mcg/ml			•	•	
SYNJARDY - empagliflozin-metformin hcl tab 5-500 mg			•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
SYNJARDY - empagliflozin-metformin hcl tab 5-1000 mg			•		
SYNJARDY - empagliflozin-metformin hcl tab 12.5-500 mg			•		
SYNJARDY - empagliflozin-metformin hcl tab 12.5-1000 mg			•		
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 5-1000 mg			•		
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 10-1000 mg			•		
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 12.5-1000 mg			•		
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 25-1000 mg			•		
TRIJARDY XR - empagliflozin-linagliptin-metformin tab er 24hr 5-2.5-1000mg			•		
TRIJARDY XR - empagliflozin-linagliptin-metformin tab er 24hr 10-5-1000 mg			•		
TRIJARDY XR - empagliflozin-linaglip-metformin tab er 24hr 12.5-2.5-1000mg			•		
TRIJARDY XR - empagliflozin-linagliptin-metformin tab er 24hr 25-5-1000 mg			•		
TRULICITY - dulaglutide soln pen-injector 0.75 mg/0.5ml			•	•	
TRULICITY - dulaglutide soln pen-injector 1.5 mg/0.5ml			•	•	
TRULICITY - dulaglutide soln pen-injector 3 mg/0.5ml			•	•	
TRULICITY - dulaglutide soln pen-injector 4.5 mg/0.5ml			•	•	

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
VICTOZA - liraglutide soln pen-injector 18 mg/3ml (6 mg/ml)			•	•	
XIGDUO XR - dapagliflozin-metformin hcl tab er 24hr 2.5-1000 mg			•		
XIGDUO XR - dapagliflozin-metformin hcl tab er 24hr 5-500 mg			•		
XIGDUO XR - dapagliflozin-metformin hcl tab er 24hr 5-1000 mg			•		
XIGDUO XR - dapagliflozin-metformin hcl tab er 24hr 10-500 mg			•		
XIGDUO XR - dapagliflozin-metformin hcl tab er 24hr 10-1000 mg			•		
XULTOPHY 100/3.6 - insulin degludec-liraglutide sol pen-inj 100-3.6 unit-mg/ml			•	•	
Rapid-Acting Insulins					
FIASP - insulin aspart (with niacinamide) inj 100 unit/ml			•		
FIASP FLEXTOUCH - insulin aspart (with niacinamide) sol pen-inj 100 unit/ml			•		
FIASP PENFILL - insulin aspart (with niacinamide) soln cartridge 100 unit/ml			•		
INSULIN ASPART - insulin aspart inj 100 unit/ml			•		
INSULIN ASPART FLEXPEN - insulin aspart soln pen-injector 100 unit/ml			•		
INSULIN ASPART PENFILL - insulin aspart soln cartridge 100 unit/ml			•		
NOVOLOG - insulin aspart inj 100 unit/ml			•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
NOVOLOG FLEXPEN - insulin aspart soln pen-injector 100 unit/ml			•		
NOVOLOG PENFILL - insulin aspart soln cartridge 100 unit/ml			•		
Short-Acting Insulins					
HUMULIN R U-500 (CONCENTR - insulin regular (human) inj 500 unit/ml			•		
HUMULIN R U-500 KWIKPEN - insulin regular (human) soln pen-injector 500 unit/ml			•		
NOVOLIN R - insulin regular (human) inj 100 unit/ml			•		
NOVOLIN R FLEXPEN - insulin regular (human) soln pen-injector 100 unit/ml			•		
Intermediate-Acting Insulins					
INSULIN ASPART PROTAMINE/ - insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)			•		
INSULIN ASPART PROTAMINE/ - insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)			•		
NOVOLIN N - insulin nph (human) (isophane) inj 100 unit/ml			•		
NOVOLIN N FLEXPEN - insulin nph (human) (isophane) susp pen-injector 100 unit/ml			•		
NOVOLIN 70/30 - insulin nph isophane & regular human inj 100 unit/ml (70-30)			•		
NOVOLIN 70/30 FLEXPEN - insulin nph & regular susp pen-inj 100 unit/ml (70-30)			•		
NOVOLOG MIX 70/30 - insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)			•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
NOVOLOG MIX 70/30 PREFILL - insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)			•		
Basal Insulins					
LANTUS - insulin glargine inj 100 unit/ml			•		
LANTUS SOLOSTAR - insulin glargine soln pen-injector 100 unit/ml			•		
LEVEMIR - insulin detemir inj 100 unit/ml			•		
LEVEMIR FLEXTOUCH - insulin detemir soln pen-injector 100 unit/ml			•		
TOUJEO MAX SOLOSTAR - insulin glargine soln pen-injector 300 unit/ml (2 unit dial)			•		
TOUJEO SOLOSTAR - insulin glargine soln pen-injector 300 unit/ml (1 unit dial)			•		
TRESIBA - insulin degludec inj 100 unit/ml			•		
TRESIBA FLEXTOUCH - insulin degludec soln pen-injector 100 unit/ml			•		
TRESIBA FLEXTOUCH - insulin degludec soln pen-injector 200 unit/ml			•		
THYROID AGENTS					
levothyroxine sodium tab 25 mcg (Synthroid)					
levothyroxine sodium tab 50 mcg (Synthroid)					
levothyroxine sodium tab 75 mcg (Synthroid)					
levothyroxine sodium tab 88 mcg (Synthroid)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
levothyroxine sodium tab 100 mcg (Synthroid)					
levothyroxine sodium tab 112 mcg (Synthroid)					
levothyroxine sodium tab 125 mcg (Synthroid)					
levothyroxine sodium tab 137 mcg (Synthroid)					
levothyroxine sodium tab 150 mcg (Synthroid)					
levothyroxine sodium tab 175 mcg (Synthroid)					
levothyroxine sodium tab 200 mcg (Synthroid)					
levothyroxine sodium tab 300 mcg (Synthroid)					
methimazole tab 5 mg (Tapazole)					
methimazole tab 10 mg (Tapazole)					
thyroid tab 15 mg (1/4 grain) (Armour thyroid)					
thyroid tab 30 mg (1/2 grain) (Armour thyroid)					
ENDOCRINE and METABOLIC AGENTS - MISC.					
alendronate sodium tab 10 mg			•		
alendronate sodium tab 35 mg			•		
alendronate sodium tab 70 mg (Fosamax)			•		
calcitriol cap 0.25 mcg (Rocaltrol)					
CARBAGLU - carglumic acid tab 200 mg	•				
CLOMIPHENE CITRATE - clomiphene citrate tab 50 mg					
CYSTADANE - betaine powder for oral solution					
FOLLISTIM AQ - follitropin beta inj 300 unit/0.36ml	•		•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
FOLLISTIM AQ - follitropin beta inj 600 unit/0.72ml	•		•		
FOLLISTIM AQ - follitropin beta inj 900 unit/1.08ml	•		•		
ibandronate sodium tab 150 mg (base equivalent) (Boniva)			•		
INCRELEX - mecasemin inj 40 mg/4ml (10 mg/ml)	•				
NITYR - nitisinone tab 2 mg	•				
NITYR - nitisinone tab 5 mg	•				
NITYR - nitisinone tab 10 mg	•				
NORDITROPIN FLEXPRO - somatropin solution pen-injector 5 mg/1.5ml	•	•			
NORDITROPIN FLEXPRO - somatropin solution pen-injector 10 mg/1.5ml	•	•			
NORDITROPIN FLEXPRO - somatropin solution pen-injector 15 mg/1.5ml	•	•			
NORDITROPIN FLEXPRO - somatropin solution pen-injector 30 mg/3ml	•	•			
ORFADIN - nitisinone cap 20 mg	•				
ORFADIN - nitisinone susp 4 mg/ml	•				
ORLISSA - elagolix sodium tab 150 mg (base equiv)		•	•		
ORLISSA - elagolix sodium tab 200 mg (base equiv)		•	•		
REVCOVI - elapegedemase-lvlr im soln 2.4 mg/1.5ml (1.6 mg/ml)					
STIMATE - desmopressin acetate nasal soln 1.5 mg/ml					
STRENSIQ - asfotase alfa subcutaneous inj 18 mg/0.45ml	•	•			
STRENSIQ - asfotase alfa subcutaneous inj 28 mg/0.7ml	•	•			

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
STRENSIQ - asfotase alfa subcutaneous inj 40 mg/ml	•	•			
STRENSIQ - asfotase alfa subcutaneous inj 80 mg/0.8ml	•	•			
TYMLOS - abaloparatide subcutaneous soln pen-injector 3120 mcg/1.56ml	•	•	•		
CARDIOVASCULAR AGENTS					
CARDIOTONICS					
digoxin tab 125 mcg (0.125 mg) (Lanoxin)					
digoxin tab 250 mcg (0.25 mg) (Lanoxin)					
ANTIANGINAL AGENTS					
isosorbide mononitrate tab er 24hr 30 mg					
isosorbide mononitrate tab er 24hr 60 mg					
isosorbide mononitrate tab 10 mg					
isosorbide mononitrate tab 20 mg					
nitroglycerin td patch 24hr 0.2 mg/hr (Nitro-dur)					
BETA BLOCKERS					
atenolol tab 25 mg (Tenormin)					
atenolol tab 50 mg (Tenormin)					
atenolol tab 100 mg (Tenormin)					
carvedilol tab 3.125 mg (Coreg)					
carvedilol tab 6.25 mg (Coreg)					
carvedilol tab 12.5 mg (Coreg)					
carvedilol tab 25 mg (Coreg)					
INNOPRAN XL - propranolol hcl sustained-release beads cap er 24hr 80 mg		•			

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
INNOPRAN XL - propranolol hcl sustained-release beads cap er 24hr 120 mg		•			
labetalol hcl tab 100 mg (Trandate)					
metoprolol succinate tab er 24hr 25 mg (tartrate equiv) (Toprol xl)					
metoprolol succinate tab er 24hr 50 mg (tartrate equiv) (Toprol xl)					
metoprolol succinate tab er 24hr 100 mg (tartrate equiv) (Toprol xl)					
metoprolol tartrate tab 25 mg					
metoprolol tartrate tab 50 mg (Lopressor)					
metoprolol tartrate tab 100 mg (Lopressor)					
PROPRANOLOL HCL - propranolol hcl oral soln 20 mg/5ml					
PROPRANOLOL HCL - propranolol hcl oral soln 40 mg/5ml					
propranolol hcl tab 10 mg					
propranolol hcl tab 20 mg					
propranolol hcl tab 40 mg					
sotalol hcl (afib/af) tab 80 mg (Betapace af)					
sotalol hcl (afib/af) tab 120 mg (Betapace af)					
sotalol hcl (afib/af) tab 160 mg (Betapace af)					
sotalol hcl tab 80 mg (Betapace)					
sotalol hcl tab 120 mg (Betapace)					
sotalol hcl tab 160 mg (Betapace)					
sotalol hcl tab 240 mg					
CALCIUM CHANNEL BLOCKERS					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
amlodipine besylate tab 2.5 mg (base equivalent) (Norvasc)					
amlodipine besylate tab 5 mg (base equivalent) (Norvasc)					
amlodipine besylate tab 10 mg (base equivalent) (Norvasc)					
diltiazem hcl coated beads cap er 24hr 120 mg (Cardizem cd)					
diltiazem hcl coated beads cap er 24hr 180 mg (Cardizem cd)					
diltiazem hcl coated beads cap er 24hr 240 mg (Cardizem cd)					
diltiazem hcl extended release beads cap er 24hr 120 mg (Tiazac)					
diltiazem hcl tab 30 mg (Cardizem)					
diltiazem hcl tab 60 mg (Cardizem)					
felodipine tab er 24hr 2.5 mg					
felodipine tab er 24hr 5 mg					
felodipine tab er 24hr 10 mg					
nifedipine tab er 24hr 30 mg (Adalat cc)					
nifedipine tab er 24hr osmotic release 30 mg (Procardia xl)					
nifedipine tab er 24hr osmotic release 60 mg (Procardia xl)					
verapamil hcl tab er 120 mg (Calan sr)					
verapamil hcl tab er 180 mg (Calan sr)					
verapamil hcl tab er 240 mg (Calan sr)					
verapamil hcl tab 40 mg					
verapamil hcl tab 80 mg (Calan)					
verapamil hcl tab 120 mg (Calan)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
ANTIARRHYTHMICS						bisoprolol & hydrochlorothiazide tab 5-6.25 mg (Ziac)					
amiodarone hcl tab 200 mg (Cordarone)						bisoprolol & hydrochlorothiazide tab 10-6.25 mg (Ziac)					
MULTAQ - dronedarone hcl tab 400 mg (base equivalent)						clonidine hcl tab 0.1 mg (Catapres)					
propafenone hcl tab 150 mg						clonidine hcl tab 0.2 mg (Catapres)					
ANTIHYPERTENSIVES						clonidine hcl tab 0.3 mg (Catapres)					
amlodipine besylate-benazepril hcl cap 2.5-10 mg (Lotrel)						doxazosin mesylate tab 1 mg (Cardura)					
amlodipine besylate-benazepril hcl cap 5-10 mg (Lotrel)						doxazosin mesylate tab 2 mg (Cardura)					
amlodipine besylate-benazepril hcl cap 5-20 mg (Lotrel)						doxazosin mesylate tab 4 mg (Cardura)					
amlodipine besylate-benazepril hcl cap 5-40 mg (Lotrel)						doxazosin mesylate tab 8 mg (Cardura)					
amlodipine besylate-benazepril hcl cap 10-20 mg (Lotrel)						enalapril maleate & hydrochlorothiazide tab 5-12.5 mg					
amlodipine besylate-benazepril hcl cap 10-40 mg (Lotrel)						enalapril maleate & hydrochlorothiazide tab 10-25 mg (Vaseretic)					
amlodipine besylate-valsartan tab 5-160 mg (Exforge)						enalapril maleate tab 2.5 mg (Vasotec)					
amlodipine besylate-valsartan tab 5-320 mg (Exforge)						enalapril maleate tab 5 mg (Vasotec)					
amlodipine besylate-valsartan tab 10-160 mg (Exforge)						enalapril maleate tab 10 mg (Vasotec)					
atenolol & chlorthalidone tab 50-25 mg (Tenoretic 50)						enalapril maleate tab 20 mg (Vasotec)					
benazepril hcl tab 5 mg						fosinopril sodium tab 10 mg					
benazepril hcl tab 10 mg (Lotensin)						fosinopril sodium tab 20 mg					
benazepril hcl tab 20 mg (Lotensin)						fosinopril sodium tab 40 mg					
benazepril hcl tab 40 mg (Lotensin)						hydralazine hcl tab 10 mg					
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg (Ziac)						hydralazine hcl tab 25 mg					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
hydralazine hcl tab 50 mg					
hydralazine hcl tab 100 mg					
irbesartan tab 75 mg (Avapro)					
irbesartan tab 150 mg (Avapro)					
irbesartan tab 300 mg (Avapro)					
irbesartan-hydrochlorothiazide tab 150-12.5 mg (Avalide)					
irbesartan-hydrochlorothiazide tab 300-12.5 mg (Avalide)					
lisinopril & hydrochlorothiazide tab 10-12.5 mg (Zestoretic)					
lisinopril & hydrochlorothiazide tab 20-12.5 mg (Zestoretic)					
lisinopril & hydrochlorothiazide tab 20-25 mg (Zestoretic)					
lisinopril tab 2.5 mg (Zestril)					
lisinopril tab 5 mg (Prinivil)					
lisinopril tab 10 mg (Prinivil)					
lisinopril tab 20 mg (Prinivil)					
lisinopril tab 30 mg (Zestril)					
lisinopril tab 40 mg (Zestril)					
losartan potassium & hydrochlorothiazide tab 50-12.5 mg (Hyzaar)					
losartan potassium & hydrochlorothiazide tab 100-12.5 mg (Hyzaar)					
losartan potassium & hydrochlorothiazide tab 100-25 mg (Hyzaar)					
losartan potassium tab 25 mg (Cozaar)					
losartan potassium tab 50 mg (Cozaar)					
losartan potassium tab 100 mg (Cozaar)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
methyldopa tab 250 mg					
minoxidil tab 2.5 mg					
minoxidil tab 10 mg					
olmesartan medoxomil tab 5 mg (Benicar)					
olmesartan medoxomil tab 20 mg (Benicar)					
olmesartan medoxomil tab 40 mg (Benicar)					
olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg (Benicar hct)					
olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg (Benicar hct)					
olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg (Benicar hct)					
perindopril erbumine tab 2 mg					
perindopril erbumine tab 4 mg (Aceon)					
quinapril hcl tab 5 mg (Accupril)					
quinapril hcl tab 10 mg (Accupril)					
quinapril hcl tab 20 mg (Accupril)					
quinapril hcl tab 40 mg (Accupril)					
ramipril cap 1.25 mg (Altace)					
ramipril cap 2.5 mg (Altace)					
ramipril cap 5 mg (Altace)					
ramipril cap 10 mg (Altace)					
telmisartan tab 80 mg (Micardis)					
terazosin hcl cap 1 mg (base equivalent)					
terazosin hcl cap 2 mg (base equivalent)					
terazosin hcl cap 5 mg (base equivalent)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
terazosin hcl cap 10 mg (base equivalent)					
trandolapril tab 1 mg (Mavik)					
trandolapril tab 2 mg (Mavik)					
trandolapril tab 4 mg (Mavik)					
valsartan tab 40 mg (Diovan)					
valsartan tab 80 mg (Diovan)					
valsartan tab 160 mg (Diovan)					
valsartan tab 320 mg (Diovan)					
valsartan-hydrochlorothiazide tab 80-12.5 mg (Diovan hct)					
valsartan-hydrochlorothiazide tab 160-12.5 mg (Diovan hct)					
valsartan-hydrochlorothiazide tab 160-25 mg (Diovan hct)					
valsartan-hydrochlorothiazide tab 320-12.5 mg (Diovan hct)					
valsartan-hydrochlorothiazide tab 320-25 mg (Diovan hct)					
DIURETICS					
amiloride & hydrochlorothiazide tab 5-50 mg					
amiloride hcl tab 5 mg					
chlorthalidone tab 25 mg					
furosemide oral soln 10 mg/ml					
furosemide tab 20 mg (Lasix)					
furosemide tab 40 mg (Lasix)					
furosemide tab 80 mg (Lasix)					
hydrochlorothiazide cap 12.5 mg (Microzide)					
hydrochlorothiazide tab 12.5 mg					
hydrochlorothiazide tab 25 mg					
hydrochlorothiazide tab 50 mg					
indapamide tab 1.25 mg					
indapamide tab 2.5 mg					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
spironolactone tab 25 mg (Aldactone)					
spironolactone tab 50 mg (Aldactone)					
spironolactone tab 100 mg (Aldactone)					
toremide tab 5 mg (Demadex)					
toremide tab 10 mg (Demadex)					
toremide tab 20 mg (Demadex)					
toremide tab 100 mg (Demadex)					
triamterene & hydrochlorothiazide cap 37.5-25 mg (Dyazide)					
triamterene & hydrochlorothiazide tab 37.5-25 mg (Maxzide-25)					
triamterene & hydrochlorothiazide tab 75-50 mg (Maxzide)					
VASOPRESSORS					
SYMJEPI - epinephrine soln prefilled syringe 0.15 mg/0.3ml (1:2000)					
SYMJEPI - epinephrine solution prefilled syringe 0.3 mg/0.3ml (1:1000)					
ANTIHYPERTENSIVES					
atorvastatin calcium tab 10 mg (base equivalent) (Lipitor)					•
atorvastatin calcium tab 20 mg (base equivalent) (Lipitor)					•
atorvastatin calcium tab 40 mg (base equivalent) (Lipitor)					
atorvastatin calcium tab 80 mg (base equivalent) (Lipitor)					
fenofibrate tab 48 mg (Tricor)					•
fenofibrate tab 54 mg (Lofibra)					•

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
fenofibrate tab 145 mg (Tricor)			•		
fenofibrate tab 160 mg (Lofibra)			•		
gemfibrozil tab 600 mg (Lopid)			•		
lovastatin tab 10 mg					
lovastatin tab 20 mg					•
lovastatin tab 40 mg (Mevacor)					•
NEXLETOL - bempedoic acid tab 180 mg		•	•		
NEXLIZET - bempedoic acid-ezetimibe tab 180-10 mg		•	•		
pravastatin sodium tab 10 mg					•
pravastatin sodium tab 20 mg (Pravachol)					•
pravastatin sodium tab 40 mg (Pravachol)					•
pravastatin sodium tab 80 mg (Pravachol)					•
REPATHA - evolocumab subcutaneous soln prefilled syringe 140 mg/ml		•	•		
REPATHA PUSHTRONEX SYSTEM - evolocumab subcutaneous soln cartridge/infusor 420 mg/3.5ml		•	•		
REPATHA SURECLICK - evolocumab subcutaneous soln auto-injector 140 mg/ml		•	•		
rosuvastatin calcium tab 5 mg (Crestor)					
rosuvastatin calcium tab 10 mg (Crestor)					
rosuvastatin calcium tab 20 mg (Crestor)					
rosuvastatin calcium tab 40 mg (Crestor)					
simvastatin tab 5 mg (Zocor)					
simvastatin tab 10 mg (Zocor)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
simvastatin tab 20 mg (Zocor)					
simvastatin tab 40 mg (Zocor)					
simvastatin tab 80 mg (Zocor)					
CARDIOVASCULAR AGENTS - MISC.					
CORLANOR - ivabradine hcl oral soln 5 mg/5ml (base equiv)		•	•		
CORLANOR - ivabradine hcl tab 5 mg (base equiv)		•	•		
CORLANOR - ivabradine hcl tab 7.5 mg (base equiv)		•	•		
ENTRESTO - sacubitril-valsartan tab 24-26 mg					
ENTRESTO - sacubitril-valsartan tab 49-51 mg					
ENTRESTO - sacubitril-valsartan tab 97-103 mg					
OPSUMIT - macitentan tab 10 mg	•	•	•		
TRACLEER - bosentan tab for oral susp 32 mg	•	•	•		
UPTRAVI - selexipag tab therapy pack 200 mcg (140) & 800 mcg (60)	•	•	•		
UPTRAVI - selexipag tab 200 mcg	•	•	•		
UPTRAVI - selexipag tab 400 mcg	•	•	•		
UPTRAVI - selexipag tab 600 mcg	•	•	•		
UPTRAVI - selexipag tab 800 mcg	•	•	•		
UPTRAVI - selexipag tab 1000 mcg	•	•	•		
UPTRAVI - selexipag tab 1200 mcg	•	•	•		
UPTRAVI - selexipag tab 1400 mcg	•	•	•		
UPTRAVI - selexipag tab 1600 mcg	•	•	•		
VYNDAMAX - tafamidis cap 61 mg	•	•	•		
VYNDALAM - tafamidis meglumine (cardiac) cap 20 mg	•	•	•		
RESPIRATORY AGENTS					
ANTIHISTAMINES					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)					
cyproheptadine hcl tab 4 mg					
levocetirizine dihydrochloride tab 5 mg					
promethazine hcl syrup 6.25 mg/5ml					
promethazine hcl tab 12.5 mg					
promethazine hcl tab 25 mg					
promethazine hcl tab 50 mg					
NASAL AGENTS - SYSTEMIC and TOPICAL					
azelastine hcl nasal spray 0.1% (137 mcg/spray)			•		
fluticasone propionate nasal susp 50 mcg/act			•		
COUGH/COLD/ALLERGY					
benzonatate cap 100 mg (Tessalon perles)					
benzonatate cap 200 mg					
HYCODAN - hydrocodone w/ homatropine syrup 5-1.5 mg/5ml					
hydrocodone w/ homatropine syrup 5-1.5 mg/5ml		•			
promethazine w/ codeine syrup 6.25-10 mg/5ml		•			
promethazine-dm syrup 6.25-15 mg/5ml					
sodium chloride soln nebu 3%					
ANTIASTHMATIC and BRONCHODILATOR AGENTS					
ADVAIR DISKUS - fluticasone-salmeterol aer powder ba 100-50 mcg/dose			•		
ADVAIR DISKUS - fluticasone-salmeterol aer powder ba 250-50 mcg/dose			•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
ADVAIR DISKUS - fluticasone-salmeterol aer powder ba 500-50 mcg/dose			•		
ADVAIR HFA - fluticasone-salmeterol inhal aerosol 45-21 mcg/act			•		
ADVAIR HFA - fluticasone-salmeterol inhal aerosol 115-21 mcg/act			•		
ADVAIR HFA - fluticasone-salmeterol inhal aerosol 230-21 mcg/act			•		
albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)			•		
albuterol sulfate syrup 2 mg/5ml			•		
ANORO ELLIPTA - umeclidinium-vilanterol aero powd ba 62.5-25 mcg/inh			•		
ARNUITY ELLIPTA - fluticasone furoate aerosol powder breath activ 50 mcg/act			•		
ARNUITY ELLIPTA - fluticasone furoate aerosol powder breath activ 100 mcg/act			•		
ARNUITY ELLIPTA - fluticasone furoate aerosol powder breath activ 200 mcg/act			•		
ASMANEX HFA - mometasone furoate inhal aerosol suspension 50 mcg/act			•		
ASMANEX HFA - mometasone furoate inhal aerosol suspension 100 mcg/act			•		
ASMANEX HFA - mometasone furoate inhal aerosol suspension 200 mcg/act			•		
ASMANEX TWISTHALER 120 ME - mometasone furoate inhal powd 220 mcg/inh (breath activated)			•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
ASMANEX TWISTHALER 30 MET - mometasone furoate inhal powd 110 mcg/inh (breath activated)			•			FLOVENT HFA - fluticasone propionate hfa inhal aero 44 mcg/act (50/valve)			•		
ASMANEX TWISTHALER 30 MET - mometasone furoate inhal powd 220 mcg/inh (breath activated)			•			FLOVENT HFA - fluticasone propionate hfa inhal aer 110 mcg/act (125/valve)			•		
ASMANEX TWISTHALER 60 MET - mometasone furoate inhal powd 220 mcg/inh (breath activated)			•			FLOVENT HFA - fluticasone propionate hfa inhal aer 220 mcg/act (250/valve)			•		
BREO ELLIPTA - fluticasone furoate-vilanterol aero powd ba 100-25 mcg/inh			•			FLUTICASONE PROPIONATE/ SA - fluticasone-salmeterol aer powder ba 55-14 mcg/act			•		
BREO ELLIPTA - fluticasone furoate-vilanterol aero powd ba 200-25 mcg/inh			•			FLUTICASONE PROPIONATE/ SA - fluticasone-salmeterol aer powder ba 113-14 mcg/act			•		
BREZTRI AEROSPHERE - budesonide-glycopyrrolate-formoterol aers 160-9-4.8 mcg/act			•			FLUTICASONE PROPIONATE/ SA - fluticasone-salmeterol aer powder ba 232-14 mcg/act			•		
COMBIVENT RESPIMAT - ipratropium-albuterol inhal aerosol soln 20-100 mcg/act			•			INCRUSE ELLIPTA - umeclidinium br aero powd breath act 62.5 mcg/inh (base eq)			•		
DULERA - mometasone furoate-formoterol fumarate aerosol 50-5 mcg/act			•			ipratropium bromide inhal soln 0.02%			•		
DULERA - mometasone furoate-formoterol fumarate aerosol 100-5 mcg/act			•			montelukast sodium chew tab 4 mg (base equiv) (Singulair)					
DULERA - mometasone furoate-formoterol fumarate aerosol 200-5 mcg/act			•			montelukast sodium chew tab 5 mg (base equiv) (Singulair)					
FLOVENT DISKUS - fluticasone propionate aer pow ba 50 mcg/blister			•			montelukast sodium tab 10 mg (base equiv) (Singulair)					
FLOVENT DISKUS - fluticasone propionate aer pow ba 100 mcg/blister			•			QVAR REDIMALER - beclomethasone diprop hfa breath act inh aer 40 mcg/act			•		
FLOVENT DISKUS - fluticasone propionate aer pow ba 250 mcg/blister			•			QVAR REDIMALER - beclomethasone diprop hfa breath act inh aer 80 mcg/act			•		
						SEREVENT DISKUS - salmeterol xinafoate aer pow ba 50 mcg/dose (base equiv)			•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
SPIRIVA HANDIHALER - tiotropium bromide monohydrate inhal cap 18 mcg (base equiv)			•		
SPIRIVA RESPIMAT - tiotropium bromide monohydrate inhal aerosol 1.25 mcg/act			•		
SPIRIVA RESPIMAT - tiotropium bromide monohydrate inhal aerosol 2.5 mcg/act			•		
STIOLTO RESPIMAT - tiotropium br-olodaterol inhal aero soln 2.5-2.5 mcg/act			•		
STRIVERDI RESPIMAT - olodaterol hcl inhal aerosol soln 2.5 mcg/act (base equiv)			•		
SYMBICORT - budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act			•		
SYMBICORT - budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act			•		
TRELEGY ELLIPTA - fluticasone-umeclidinium-vilanterol aepb 100-62.5-25 mcg/inh			•		
TRELEGY ELLIPTA - fluticasone-umeclidinium-vilanterol aepb 200-62.5-25 mcg/inh			•		
VENTOLIN HFA - albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)			•		
RESPIRATORY AGENTS - MISC.					
KALYDECO - ivacaftor tab 150 mg	•	•	•		
KALYDECO - ivacaftor packet 25 mg	•	•	•		
KALYDECO - ivacaftor packet 50 mg	•	•	•		
KALYDECO - ivacaftor packet 75 mg	•	•	•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
PULMOZYME - dornase alfa inhal soln 1 mg/ml	•				
SYMDEKO - tezacaftor-ivacaftor 50-75 mg & ivacaftor 75 mg tab tbpk	•	•	•		
SYMDEKO - tezacaftor-ivacaftor 100-150 mg & ivacaftor 150 mg tab tbpk	•	•	•		
TRIKAFTA - elexacaf-tezacaf-ivacaf 100-50-75 mg & ivacaftor 150 mg tbpk	•	•	•		
GASTROINTESTINAL AGENTS					
LAXATIVES					
peg 3350-kcl-sod bicarb-nacl for soln 420 gm (Nulytely/flavor pack)					•
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm (Golytely)					•
ULCER DRUGS					
dicyclomine hcl cap 10 mg (Bentyl)					
dicyclomine hcl tab 20 mg (Bentyl)					
famotidine tab 20 mg (Pepcid)					
famotidine tab 40 mg (Pepcid)					
lansoprazole cap delayed release 30 mg (Prevacid)			•		
misoprostol tab 100 mcg (Cytotec)					
misoprostol tab 200 mcg (Cytotec)					
NEXIUM - esomeprazole magnesium for delayed release susp pack 2.5 mg			•		
NEXIUM - esomeprazole magnesium for delayed release susp packet 5 mg			•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
omeprazole cap delayed release 10 mg (Prilosec)			•		
omeprazole cap delayed release 20 mg (Prilosec)			•		
omeprazole cap delayed release 40 mg (Prilosec)			•		
pantoprazole sodium ec tab 20 mg (base equiv) (Protonix)			•		
pantoprazole sodium ec tab 40 mg (base equiv) (Protonix)			•		
ANTIEMETICS					
EMEND - aprepitant for oral susp 125 mg (125 mg/5ml)			•		
meclizine hcl tab 12.5 mg					
meclizine hcl tab 25 mg					
ondansetron hcl tab 4 mg (Zofran)			•		
ondansetron hcl tab 8 mg (Zofran)			•		
ondansetron orally disintegrating tab 4 mg (Zofran odt)			•		
ondansetron orally disintegrating tab 8 mg (Zofran odt)			•		
DIGESTIVE AIDS					
CREON - pancrelipase (lip-prot-amyl) dr cap 3000-9500-15000 unit					
CREON - pancrelipase (lip-prot-amyl) dr cap 6000-19000-30000 unit					
CREON - pancrelipase (lip-prot-amyl) dr cap 12000-38000-60000 unit					
CREON - pancrelipase (lip-prot-amyl) dr cap 24000-76000-120000 unit					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
CREON - pancrelipase (lip-prot-amyl) dr cap 36000-114000-180000 unit					
ZENPEP - pancrelipase (lip-prot-amyl) dr cap 3000-10000-14000 unit					
ZENPEP - pancrelipase (lip-prot-amyl) dr cap 5000-17000-24000 unit					
ZENPEP - pancrelipase (lip-prot-amyl) dr cap 10000-32000-42000 unit					
ZENPEP - pancrelipase (lip-prot-amyl) dr cap 15000-47000-63000 unit					
ZENPEP - pancrelipase (lip-prot-amyl) dr cap 20000-63000-84000 unit					
ZENPEP - pancrelipase (lip-prot-amyl) dr cap 25000-79000-105000 unit					
ZENPEP - pancrelipase (lip-prot-amyl) dr cap 40000-126000-168000 unit					
GASTROINTESTINAL AGENTS- MISC.					
CHENODAL - chenodiol tab 250 mg	•				
metoclopramide hcl tab 5 mg (base equivalent) (Reglan)					
metoclopramide hcl tab 10 mg (base equivalent) (Reglan)					
SYMPROIC - naldemedine tosylate tab 0.2 mg (base equivalent)		•	•		
TRULANCE - plecanatide tab 3 mg		•	•		
VELPHORO - sucroferric oxyhydroxide chew tab 500 mg				•	
VIBERZI - eluxadoline tab 75 mg			•		
VIBERZI - eluxadoline tab 100 mg			•		
GENITOURINARY AGENTS					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
URINARY ANTISPASMODICS					
oxybutynin chloride syrup 5 mg/5ml					
oxybutynin chloride tab er 24hr 5 mg (Ditropan xl)					
oxybutynin chloride tab er 24hr 10 mg (Ditropan xl)					
oxybutynin chloride tab er 24hr 15 mg					
oxybutynin chloride tab 5 mg					
VAGINAL PRODUCTS					
CRINONE - progesterone vaginal gel 4%			•		
CRINONE - progesterone vaginal gel 8%			•		
ESTRING - estradiol vaginal ring 2 mg (7.5 mcg/24hrs)					
GENITOURINARY AGENTS - MISC.					
alfuzosin hcl tab er 24hr 10 mg (Uroxatral)					
CYSTAGON - cysteamine bitartrate cap 50 mg	•				
CYSTAGON - cysteamine bitartrate cap 150 mg	•				
dutasteride cap 0.5 mg (Avodart)					
finasteride tab 5 mg (Proscar)					
tamsulosin hcl cap 0.4 mg (Flomax)					
CENTRAL NERVOUS SYSTEM DRUGS					
ANTI-ANXIETY AGENTS					
alprazolam tab er 24hr 0.5 mg (Xanax xr)					
alprazolam tab er 24hr 1 mg (Xanax xr)					
alprazolam tab 0.25 mg (Xanax)					
alprazolam tab 0.5 mg (Xanax)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
alprazolam tab 1 mg (Xanax)					
alprazolam tab 2 mg (Xanax)					
bupropion hcl tab 5 mg					
bupropion hcl tab 10 mg					
bupropion hcl tab 15 mg					
chlordiazepoxide hcl cap 5 mg					
chlordiazepoxide hcl cap 10 mg					
chlordiazepoxide hcl cap 25 mg					
diazepam tab 2 mg (Valium)					
diazepam tab 5 mg (Valium)					
diazepam tab 10 mg (Valium)					
hydroxyzine hcl syrup 10 mg/5ml					
hydroxyzine hcl tab 10 mg					
hydroxyzine hcl tab 25 mg					
hydroxyzine hcl tab 50 mg					
hydroxyzine pamoate cap 25 mg (Vistaril)					
hydroxyzine pamoate cap 50 mg (Vistaril)					
lorazepam tab 0.5 mg (Ativan)			•		
lorazepam tab 1 mg (Ativan)			•		
lorazepam tab 2 mg (Ativan)			•		
ANTIDEPRESSANTS					
amitriptyline hcl tab 10 mg					
amitriptyline hcl tab 25 mg					
amitriptyline hcl tab 50 mg					
bupropion hcl tab er 12hr 100 mg (Wellbutrin sr)					
bupropion hcl tab er 12hr 150 mg (Wellbutrin sr)					
bupropion hcl tab er 12hr 200 mg (Wellbutrin sr)					
bupropion hcl tab er 24hr 150 mg (Wellbutrin xl)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
bupropion hcl tab er 24hr 300 mg (Wellbutrin xl)					
citalopram hydrobromide tab 10 mg (base equiv) (Celexa)					
citalopram hydrobromide tab 20 mg (base equiv) (Celexa)					
citalopram hydrobromide tab 40 mg (base equiv) (Celexa)					
doxepin hcl cap 10 mg					
doxepin hcl conc 10 mg/ml					
duloxetine hcl enteric coated pellets cap 20 mg (base eq) (Cymbalta)			•		
duloxetine hcl enteric coated pellets cap 30 mg (base eq) (Cymbalta)			•		
duloxetine hcl enteric coated pellets cap 60 mg (base eq) (Cymbalta)			•		
escitalopram oxalate tab 5 mg (base equiv) (Lexapro)					
escitalopram oxalate tab 10 mg (base equiv) (Lexapro)					
escitalopram oxalate tab 20 mg (base equiv) (Lexapro)					
fluoxetine hcl cap 10 mg (Prozac)					
fluoxetine hcl cap 20 mg (Prozac)					
fluoxetine hcl cap 40 mg (Prozac)					
imipramine hcl tab 10 mg (Tofranil)					
imipramine hcl tab 25 mg (Tofranil)					
imipramine hcl tab 50 mg (Tofranil)					
mirtazapine tab 15 mg (Remeron)					
mirtazapine tab 30 mg (Remeron)					
mirtazapine tab 45 mg (Remeron)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
nortriptyline hcl cap 10 mg (Pamelor)					
nortriptyline hcl cap 25 mg (Pamelor)					
nortriptyline hcl cap 50 mg (Pamelor)					
nortriptyline hcl cap 75 mg (Pamelor)					
paroxetine hcl tab 10 mg (Paxil)					
paroxetine hcl tab 20 mg (Paxil)					
paroxetine hcl tab 30 mg (Paxil)					
paroxetine hcl tab 40 mg (Paxil)					
sertraline hcl tab 25 mg (Zoloft)					
sertraline hcl tab 50 mg (Zoloft)					
sertraline hcl tab 100 mg (Zoloft)					
trazodone hcl tab 50 mg					
trazodone hcl tab 100 mg					
trazodone hcl tab 150 mg					
venlafaxine hcl cap er 24hr 37.5 mg (base equivalent) (Effexor xr)					
venlafaxine hcl cap er 24hr 75 mg (base equivalent) (Effexor xr)					
venlafaxine hcl cap er 24hr 150 mg (base equivalent) (Effexor xr)					
venlafaxine hcl tab 25 mg (base equivalent)					
venlafaxine hcl tab 37.5 mg (base equivalent)					
venlafaxine hcl tab 50 mg (base equivalent)					
venlafaxine hcl tab 75 mg (base equivalent)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
venlafaxine hcl tab 100 mg (base equivalent)					
ANTIPSYCHOTICS					
FLUPHENAZINE HCL - fluphenazine hcl oral conc 5 mg/ml					
FLUPHENAZINE HYDROCHLORID - fluphenazine hcl elixir 2.5 mg/5ml					
haloperidol lactate oral conc 2 mg/ml					
haloperidol tab 0.5 mg					
haloperidol tab 1 mg					
haloperidol tab 2 mg					
LATUDA - lurasidone hcl tab 20 mg			•		
LATUDA - lurasidone hcl tab 40 mg			•		
LATUDA - lurasidone hcl tab 60 mg			•		
LATUDA - lurasidone hcl tab 80 mg			•		
LATUDA - lurasidone hcl tab 120 mg			•		
lithium carbonate cap 150 mg (Lithium carbonate)					
lithium carbonate cap 300 mg					
lithium carbonate cap 600 mg (Lithium carbonate)					
lithium carbonate tab er 300 mg (Lithobid)					
lithium carbonate tab er 450 mg					
lithium carbonate tab 300 mg					
olanzapine tab 2.5 mg (Zyprexa)			•		
olanzapine tab 5 mg (Zyprexa)			•		
olanzapine tab 7.5 mg (Zyprexa)			•		
olanzapine tab 10 mg (Zyprexa)			•		
olanzapine tab 15 mg (Zyprexa)			•		
olanzapine tab 20 mg (Zyprexa)			•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
prochlorperazine maleate tab 5 mg (base equivalent) (Compazine)					
prochlorperazine maleate tab 10 mg (base equivalent) (Compazine)					
quetiapine fumarate tab 25 mg (Seroquel)			•		
quetiapine fumarate tab 50 mg (Seroquel)			•		
quetiapine fumarate tab 100 mg (Seroquel)			•		
quetiapine fumarate tab 200 mg (Seroquel)			•		
quetiapine fumarate tab 300 mg (Seroquel)			•		
quetiapine fumarate tab 400 mg (Seroquel)			•		
risperidone tab 0.25 mg (Risperdal)			•		
risperidone tab 0.5 mg (Risperdal)			•		
risperidone tab 1 mg (Risperdal)			•		
risperidone tab 2 mg (Risperdal)			•		
risperidone tab 3 mg (Risperdal)			•		
risperidone tab 4 mg (Risperdal)			•		
HYPNOTICS					
BELSOMRA - suvorexant tab 5 mg			•	•	
BELSOMRA - suvorexant tab 10 mg			•	•	
BELSOMRA - suvorexant tab 15 mg			•	•	
BELSOMRA - suvorexant tab 20 mg			•	•	
eszopiclone tab 1 mg (Lunesta)			•		
eszopiclone tab 2 mg (Lunesta)			•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
eszopiclone tab 3 mg (Lunesta)			•		
phenobarbital tab 15 mg					
phenobarbital tab 30 mg					
phenobarbital tab 60 mg					
phenobarbital tab 100 mg					
temazepam cap 15 mg (Restoril)					
temazepam cap 30 mg (Restoril)					
zaleplon cap 5 mg (Sonata)			•		
zaleplon cap 10 mg (Sonata)			•		
zolpidem tartrate tab 5 mg (Ambien)			•		
zolpidem tartrate tab 10 mg (Ambien)			•		
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ ANOREXIANTS					
dexmethylphenidate hcl tab 2.5 mg (Focalin)			•		
diethylpropion hcl tab 25 mg					
methylphenidate hcl tab 5 mg (Ritalin)			•		
phendimetrazine tartrate tab 35 mg					
phentermine hcl cap 15 mg					
phentermine hcl cap 30 mg					
phentermine hcl cap 37.5 mg (Adipex-p)					
phentermine hcl tab 37.5 mg (Adipex-p)					
SUNOSI - solriamfetol hcl tab 75 mg (base equiv)		•	•		
SUNOSI - solriamfetol hcl tab 150 mg (base equiv)		•	•		
VYVANSE - lisdexamfetamine dimesylate cap 10 mg			•		
VYVANSE - lisdexamfetamine dimesylate cap 20 mg			•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
VYVANSE - lisdexamfetamine dimesylate cap 30 mg			•		
VYVANSE - lisdexamfetamine dimesylate cap 40 mg			•		
VYVANSE - lisdexamfetamine dimesylate cap 50 mg			•		
VYVANSE - lisdexamfetamine dimesylate cap 60 mg			•		
VYVANSE - lisdexamfetamine dimesylate cap 70 mg			•		
VYVANSE - lisdexamfetamine dimesylate chew tab 10 mg			•		
VYVANSE - lisdexamfetamine dimesylate chew tab 20 mg			•		
VYVANSE - lisdexamfetamine dimesylate chew tab 30 mg			•		
VYVANSE - lisdexamfetamine dimesylate chew tab 40 mg			•		
VYVANSE - lisdexamfetamine dimesylate chew tab 50 mg			•		
VYVANSE - lisdexamfetamine dimesylate chew tab 60 mg			•		
PSYCHOTHERAPEUTIC and NEUROLOGICAL AGENTS - MISC.					
AUBAGIO - teriflunomide tab 7 mg	•	•	•		
AUBAGIO - teriflunomide tab 14 mg	•	•	•		
AVONEX - interferon beta-1a im prefilled syringe kit 30 mcg/0.5ml	•	•	•		
AVONEX PEN - interferon beta-1a im auto-injector kit 30 mcg/0.5ml	•	•	•		
BETASERON - interferon beta-1b for inj kit 0.3 mg	•	•	•		
CHANTIX - varenicline tartrate tab 0.5 mg (base equiv)					•
CHANTIX - varenicline tartrate tab 1 mg (base equiv)					•

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
CHANTIX CONTINUING MONTH - varenicline tartrate tab 1 mg (base equiv)					•	MAYZENT STARTER PACK - siponimod fumarate tab 0.25 mg (12) starter pack	•	•	•		
CHANTIX STARTING MONTH PA - varenicline tartrate tab 0.5 mg x 11 & tab 1 mg x 42 pack					•	memantine hcl tab 5 mg (Namenda)					
donepezil hydrochloride orally disintegrating tab 5 mg						memantine hcl tab 10 mg (Namenda)					
donepezil hydrochloride orally disintegrating tab 10 mg						NICOTROL INHALER - nicotine inhaler system 10 mg (4 mg delivered)					•
donepezil hydrochloride tab 5 mg (Aricept)						NICOTROL NS - nicotine nasal spray 10 mg/ml (0.5 mg/spray)					•
donepezil hydrochloride tab 10 mg (Aricept)						PLEGRIDY - peginterferon beta-1a soln pen-injector 125 mcg/0.5ml	•	•	•		
GILENYA - fingolimod hcl cap 0.5 mg (base equiv)	•	•	•			PLEGRIDY - peginterferon beta-1a soln prefilled syringe 125 mcg/0.5ml	•	•	•		
KESIMPTA - ofatumumab soln auto-injector 20 mg/0.4ml	•	•	•			PLEGRIDY - peginterferon beta-1a im soln prefilled syr 125 mcg/0.5ml	•	•	•		
MAVENCLAD - cladribine tab therapy pack 10 mg (4 tabs)	•	•	•			PLEGRIDY STARTER PACK - peginterferon beta-1a soln pen-inj 63 & 94 mcg/0.5ml pack	•	•	•		
MAVENCLAD - cladribine tab therapy pack 10 mg (5 tabs)	•	•	•			PLEGRIDY STARTER PACK - peginterferon beta-1a soln pref syr 63 & 94 mcg/0.5ml pack	•	•	•		
MAVENCLAD - cladribine tab therapy pack 10 mg (6 tabs)	•	•	•			REBIF - interferon beta-1a soln pref syr 22 mcg/0.5ml (12mu/ml)	•	•	•		
MAVENCLAD - cladribine tab therapy pack 10 mg (7 tabs)	•	•	•			REBIF - interferon beta-1a soln pref syr 44 mcg/0.5ml (24mu/ml)	•	•	•		
MAVENCLAD - cladribine tab therapy pack 10 mg (8 tabs)	•	•	•			REBIF REBIDOSE - interferon beta-1a soln auto-inj 22 mcg/0.5ml (12mu/ml)	•	•	•		
MAVENCLAD - cladribine tab therapy pack 10 mg (9 tabs)	•	•	•			REBIF REBIDOSE - interferon beta-1a soln auto-inj 44 mcg/0.5ml (24mu/ml)	•	•	•		
MAVENCLAD - cladribine tab therapy pack 10 mg (10 tabs)	•	•	•			REBIF REBIDOSE TITRATION - interferon beta-1a auto-inj 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	•	•	•		
MAYZENT - siponimod fumarate tab 0.25 mg (base equiv)	•	•	•								
MAYZENT - siponimod fumarate tab 2 mg (base equiv)	•	•	•								

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
REBIF TITRATION PACK - interferon beta-1a pref syr 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	•	•	•		
ZEPOSIA - ozanimod hcl cap 0.92 mg	•	•	•		
ZEPOSIA STARTER KIT - ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg & 30 x 0.92 mg	•	•	•		
ZEPOSIA 7-DAY STARTER PAC - ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg	•	•	•		
ANALGESICS AND ANESTHETICS					
ANALGESICS - NON-NARCOTIC					
aspirin chew tab 81 mg					•
aspirin tab delayed release 81 mg					•
ANALGESICS - NARCOTIC					
acetaminophen w/ codeine soln 120-12 mg/5ml		•			
acetaminophen w/ codeine tab 300-15 mg (Tylenol/codeine)		•			
acetaminophen w/ codeine tab 300-30 mg (Tylenol/codeine #3)		•			
BELBUCA - buprenorphine hcl buccal film 75 mcg (base equivalent)			•		
BELBUCA - buprenorphine hcl buccal film 150 mcg (base equivalent)			•		
BELBUCA - buprenorphine hcl buccal film 300 mcg (base equivalent)			•		
BELBUCA - buprenorphine hcl buccal film 450 mcg (base equivalent)			•		
BELBUCA - buprenorphine hcl buccal film 600 mcg (base equivalent)			•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
BELBUCA - buprenorphine hcl buccal film 750 mcg (base equivalent)			•		
BELBUCA - buprenorphine hcl buccal film 900 mcg (base equivalent)			•		
hydrocodone-acetaminophen tab 10-325 mg (Norco)		•			
hydrocodone-acetaminophen tab 5-325 mg (Norco)		•			
hydrocodone-acetaminophen tab 7.5-325 mg (Norco)		•			
hydromorphone hcl tab 2 mg (Dilaudid)		•			
hydromorphone hcl tab 4 mg (Dilaudid)		•			
methadone hcl tab 5 mg (Dolophine hcl)		•			
methadone hcl tab 10 mg (Dolophine)		•			
morphine sulfate oral soln 10 mg/5ml		•			
morphine sulfate tab er 15 mg (Ms contin)		•	•		
oxycodone hcl tab 5 mg (Roxicodone)		•			
oxycodone hcl tab 10 mg		•			
oxycodone w/ acetaminophen tab 5-325 mg (Percocet)		•			
tramadol hcl tab 50 mg (Ultram)		•	•		
tramadol-acetaminophen tab 37.5-325 mg (Ultracet)		•			
XTAMPZA ER - oxycodone cap er 12hr abuse-deterrent 9 mg		•	•		
XTAMPZA ER - oxycodone cap er 12hr abuse-deterrent 13.5 mg		•	•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
XTAMPZA ER - oxycodone cap er 12hr abuse-deterrent 18 mg		•	•		
XTAMPZA ER - oxycodone cap er 12hr abuse-deterrent 27 mg		•	•		
XTAMPZA ER - oxycodone cap er 12hr abuse-deterrent 36 mg		•	•		
ANALGESICS - ANTI-INFLAMMATORY					
ACTEMRA - tocilizumab subcutaneous soln prefilled syringe 162 mg/0.9ml	•	•	•		
ACTEMRA ACTPEN - tocilizumab subcutaneous soln auto-injector 162 mg/0.9ml	•	•	•		
celecoxib cap 50 mg (Celebrex)			•		
celecoxib cap 100 mg (Celebrex)			•		
celecoxib cap 200 mg (Celebrex)			•		
diclofenac sodium tab delayed release 50 mg					
diclofenac sodium tab delayed release 75 mg					
ENBREL - etanercept subcutaneous inj 25 mg/0.5ml	•	•	•		
ENBREL - etanercept for subcutaneous inj 25 mg	•	•	•		
ENBREL - etanercept subcutaneous soln prefilled syringe 25 mg/0.5ml	•	•	•		
ENBREL - etanercept subcutaneous soln prefilled syringe 50 mg/ml	•	•	•		
ENBREL MINI - etanercept subcutaneous solution cartridge 50 mg/ml	•	•	•		
ENBREL SURECLICK - etanercept subcutaneous solution auto-injector 50 mg/ml	•	•	•		
HUMIRA - adalimumab prefilled syringe kit 10 mg/0.1ml	•	•	•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
HUMIRA - adalimumab prefilled syringe kit 20 mg/0.2ml	•	•	•		
HUMIRA - adalimumab prefilled syringe kit 40 mg/0.8ml	•	•			
HUMIRA - adalimumab prefilled syringe kit 40 mg/0.4ml	•	•	•		
HUMIRA PEDIATRIC CROHNS D - adalimumab prefilled syringe kit 80 mg/0.8ml	•	•	•		
HUMIRA PEDIATRIC CROHNS D - adalimumab prefilled syringe kit 80 mg/0.8ml & 40 mg/0.4ml	•	•	•		
HUMIRA PEN - adalimumab pen-injector kit 40 mg/0.8ml	•	•	•		
HUMIRA PEN - adalimumab pen-injector kit 40 mg/0.4ml	•	•	•		
HUMIRA PEN - adalimumab pen-injector kit 80 mg/0.8ml	•	•	•		
HUMIRA PEN-CD/UC/HS START - adalimumab pen-injector kit 40 mg/0.8ml	•	•	•		
HUMIRA PEN-CD/UC/HS START - adalimumab pen-injector kit 80 mg/0.8ml	•	•	•		
HUMIRA PEN-PEDIATRIC UC S - adalimumab pen-injector kit 80 mg/0.8ml	•	•	•		
HUMIRA PEN-PS/UV STARTER - adalimumab pen-injector kit 40 mg/0.8ml	•	•	•		
HUMIRA PEN-PS/UV STARTER - adalimumab pen-injector kit 80 mg/0.8ml & 40 mg/0.4ml	•	•	•		
ibuprofen susp 100 mg/5ml					
ibuprofen tab 400 mg					
ibuprofen tab 600 mg					
ibuprofen tab 800 mg					
indomethacin cap 25 mg					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
indomethacin cap 50 mg					
meloxicam tab 7.5 mg (Mobic)					
meloxicam tab 15 mg (Mobic)					
nabumetone tab 500 mg					
nabumetone tab 750 mg					
naproxen tab ec 375 mg (Ecnaprosyn)					
naproxen tab ec 500 mg (Ecnaprosyn)					
naproxen tab 250 mg (Naprosyn)					
naproxen tab 375 mg (Naprosyn)					
naproxen tab 500 mg (Naprosyn)					
OTEZLA - apremilast tab starter therapy pack 10 mg & 20 mg & 30 mg	•	•	•		
OTEZLA - apremilast tab 30 mg	•	•	•		
REDITREX - methotrexate soln prefilled syringe 7.5 mg/0.3ml				•	
REDITREX - methotrexate soln prefilled syringe 10 mg/0.4ml				•	
REDITREX - methotrexate soln prefilled syringe 12.5 mg/0.5ml				•	
REDITREX - methotrexate soln prefilled syringe 15 mg/0.6ml				•	
REDITREX - methotrexate soln prefilled syringe 17.5 mg/0.7ml				•	
REDITREX - methotrexate soln prefilled syringe 20 mg/0.8ml				•	
REDITREX - methotrexate soln prefilled syringe 22.5 mg/0.9ml				•	
REDITREX - methotrexate soln prefilled syringe 25 mg/ml				•	
RINVOQ - upadacitinib tab er 24hr 15 mg	•	•	•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
SIMPONI - golimumab subcutaneous soln auto-injector 100 mg/ml	•	•	•		
SIMPONI - golimumab subcutaneous soln prefilled syringe 100 mg/ml	•	•	•		
sulindac tab 150 mg					
sulindac tab 200 mg					
XELJANZ - tofacitinib citrate oral soln 1 mg/ml (base equivalent)	•	•	•		
XELJANZ - tofacitinib citrate tab 5 mg (base equivalent)	•	•	•		
XELJANZ - tofacitinib citrate tab 10 mg (base equivalent)	•	•	•		
XELJANZ XR - tofacitinib citrate tab er 24hr 11 mg (base equivalent)	•	•	•		
XELJANZ XR - tofacitinib citrate tab er 24hr 22 mg (base equivalent)	•	•	•		
MIGRAINE PRODUCTS					
AIMOVIG - erenumab-aooe subcutaneous soln auto-injector 70 mg/ml		•	•		
AIMOVIG - erenumab-aooe subcutaneous soln auto-injector 140 mg/ml		•	•		
EMGALITY - galcanezumab-gnlm subcutaneous soln auto-injector 120 mg/ml		•	•		
EMGALITY - galcanezumab-gnlm subcutaneous soln prefilled syr 100 mg/ml		•	•		
EMGALITY - galcanezumab-gnlm subcutaneous soln prefilled syr 120 mg/ml		•	•		
rizatriptan benzoate oral disintegrating tab 5 mg (base eq) (Maxalt-mlt)			•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
rizatriptan benzoate oral disintegrating tab 10 mg (base eq) (Maxalt-mlt)			•		
rizatriptan benzoate tab 5 mg (base equivalent) (Maxalt)			•		
rizatriptan benzoate tab 10 mg (base equivalent) (Maxalt)			•		
sumatriptan succinate tab 25 mg (Imitrex)			•		
sumatriptan succinate tab 50 mg (Imitrex)			•		
sumatriptan succinate tab 100 mg (Imitrex)			•		
GOUT AGENTS					
allopurinol tab 100 mg (Zyloprim)					
allopurinol tab 300 mg (Zyloprim)					
MITIGARE - colchicine cap 0.6 mg					
NEUROMUSCULAR DRUGS					
ANTICONVULSANTS					
CELONTIN - methsuximide cap 300 mg					
clonazepam tab 0.5 mg (Klonopin)					
clonazepam tab 1 mg (Klonopin)					
clonazepam tab 2 mg (Klonopin)					
DIASTAT ACUDIAL - diazepam rectal gel delivery system 10 mg					
DIASTAT ACUDIAL - diazepam rectal gel delivery system 20 mg					
DIASTAT PEDIATRIC - diazepam rectal gel delivery system 2.5 mg					
DILANTIN - phenytoin sodium extended cap 30 mg					
divalproex sodium tab delayed release 125 mg (Depakote)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
divalproex sodium tab delayed release 250 mg (Depakote)					
divalproex sodium tab delayed release 500 mg (Depakote)					
EPIDIOLEX - cannabidiol soln 100 mg/ml		•			
gabapentin cap 100 mg (Neurontin)					
gabapentin cap 300 mg (Neurontin)					
gabapentin cap 400 mg (Neurontin)					
gabapentin tab 600 mg (Neurontin)					
gabapentin tab 800 mg (Neurontin)					
lamotrigine tab 25 mg (Lamictal)					
lamotrigine tab 100 mg (Lamictal)					
lamotrigine tab 150 mg (Lamictal)					
lamotrigine tab 200 mg (Lamictal)					
levetiracetam tab 250 mg (Keppra)					
levetiracetam tab 500 mg (Keppra)					
oxcarbazepine tab 150 mg (Trileptal)					
primidone tab 50 mg (Mysoline)					
primidone tab 250 mg (Mysoline)					
topiramate tab 25 mg (Topamax)					
topiramate tab 50 mg (Topamax)					
topiramate tab 100 mg (Topamax)					
topiramate tab 200 mg (Topamax)					
VIMPAT - lacosamide oral solution 10 mg/ml					
VIMPAT - lacosamide tab 50 mg					
VIMPAT - lacosamide tab 100 mg					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
VIMPAT - lacosamide tab 150 mg					
VIMPAT - lacosamide tab 200 mg					
zonisamide cap 25 mg (Zonegran)					
zonisamide cap 50 mg					
ANTIPARKINSON AGENTS					
amantadine hcl syrup 50 mg/5ml					
benztropine mesylate tab 0.5 mg					
benztropine mesylate tab 1 mg					
benztropine mesylate tab 2 mg					
carbidopa & levodopa tab 10-100 mg (Sinemet)					
carbidopa & levodopa tab 25-100 mg (Sinemet)					
INBRIJA - levodopa inhal powder cap 42 mg	•				
KYNMOBI - apomorphine hydrochloride film 10 mg					
KYNMOBI - apomorphine hydrochloride film 15 mg					
KYNMOBI - apomorphine hydrochloride film 20 mg					
KYNMOBI - apomorphine hydrochloride film 25 mg					
KYNMOBI - apomorphine hydrochloride film 30 mg					
pramipexole dihydrochloride tab 0.125 mg (Mirapex)					
pramipexole dihydrochloride tab 0.25 mg (Mirapex)					
pramipexole dihydrochloride tab 0.5 mg (Mirapex)					
pramipexole dihydrochloride tab 0.75 mg (Mirapex)					
pramipexole dihydrochloride tab 1 mg (Mirapex)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
pramipexole dihydrochloride tab 1.5 mg (Mirapex)					
ropinirole hydrochloride tab 0.25 mg (Requip)					
ropinirole hydrochloride tab 0.5 mg (Requip)					
ropinirole hydrochloride tab 1 mg (Requip)					
ropinirole hydrochloride tab 2 mg (Requip)					
ropinirole hydrochloride tab 3 mg (Requip)					
ropinirole hydrochloride tab 4 mg (Requip)					
ropinirole hydrochloride tab 5 mg (Requip)					
trihexyphenidyl hcl tab 2 mg					
trihexyphenidyl hcl tab 5 mg					
MUSCULOSKELETAL THERAPY AGENTS					
baclofen tab 10 mg					
carisoprodol tab 350 mg (Soma)					
cyclobenzaprine hcl tab 5 mg					
cyclobenzaprine hcl tab 10 mg					
methocarbamol tab 500 mg (Robaxin)					
methocarbamol tab 750 mg (Robaxin-750)					
orphenadrine citrate tab er 12hr 100 mg					
tizanidine hcl tab 2 mg (base equivalent)			•		
tizanidine hcl tab 4 mg (base equivalent) (Zanaflex)			•		
NUTRITIONAL PRODUCTS					
VITAMINS					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
ergocalciferol cap 1.25 mg (50000 unit) (Drisdol)					
MULTIVITAMINS					
KOSHER PRENATAL PLUS IRON - prenatal vit w/ iron carbonyl-fa tab 30-1 mg					
PRENATAL VITAMINS PLUS LO - prenatal vit w/ fe fumarate-fa tab 27-1 mg					
PRENATAL 19 - prenatal vit w/ fe fumarate-fa chew tab 29-1 mg					
PRENATAL 19 - prenatal vit w/ dss-fe fumarate-fa tab 29-1 mg					
SE-NATAL 19 - prenatal vit w/ fe fumarate-fa chew tab 29-1 mg					
SE-NATAL 19 - prenatal vit w/ dss-fe fumarate-fa tab 29-1 mg					
MINERALS and ELECTROLYTES					
potassium chloride microencapsulated crys er tab 10 meq					
potassium chloride microencapsulated crys er tab 20 meq					
potassium chloride tab er 8 meq (600 mg)					
potassium chloride tab er 10 meq (K-tab)					
HEMATOLOGICAL AGENTS					
HEMATOPOIETIC AGENTS					
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 10 mcg/0.4ml	•	•			
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 25 mcg/0.42ml	•	•			

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 40 mcg/0.4ml	•	•			
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 60 mcg/0.3ml	•	•			
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 100 mcg/0.5ml	•	•			
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 150 mcg/0.3ml	•	•			
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 200 mcg/0.4ml	•	•			
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 300 mcg/0.6ml	•	•			
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 500 mcg/ml	•	•			
ARANESP ALBUMIN FREE - darbepoetin alfa soln inj 25 mcg/ml	•	•			
ARANESP ALBUMIN FREE - darbepoetin alfa soln inj 40 mcg/ml	•	•			
ARANESP ALBUMIN FREE - darbepoetin alfa soln inj 60 mcg/ml	•	•			
ARANESP ALBUMIN FREE - darbepoetin alfa soln inj 100 mcg/ml	•	•			
ARANESP ALBUMIN FREE - darbepoetin alfa soln inj 200 mcg/ml	•	•			
ARANESP ALBUMIN FREE - darbepoetin alfa soln inj 300 mcg/ml	•	•			

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
carbonyl iron susp 15 mg/1.25ml (elemental iron)					•
CERDELGA - eliglustat tartrate cap 84 mg (base equivalent)	•	•	•		
cyanocobalamin inj 1000 mcg/ml					
DROXIA - hydroxyurea cap 200 mg					
DROXIA - hydroxyurea cap 300 mg					
DROXIA - hydroxyurea cap 400 mg					
EPOGEN - epoetin alfa inj 2000 unit/ml	•	•			
EPOGEN - epoetin alfa inj 3000 unit/ml	•	•			
EPOGEN - epoetin alfa inj 4000 unit/ml	•	•			
EPOGEN - epoetin alfa inj 10000 unit/ml	•	•			
EPOGEN - epoetin alfa inj 20000 unit/ml	•	•			
ferrous sulfate elixir 220 mg/5ml (44 mg/5ml elemental fe)					•
ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe)					•
folic acid cap 0.8 mg					•
folic acid tab 400 mcg					•
folic acid tab 800 mcg					•
folic acid tab 1 mg					
FULPHILA - pegfilgrastim-jmdb soln prefilled syringe 6 mg/0.6ml	•				
GRANIX - tbo-filgrastim soln prefilled syringe 300 mcg/0.5ml	•				
GRANIX - tbo-filgrastim soln prefilled syringe 480 mcg/0.8ml	•				
GRANIX - tbo-filgrastim subcutaneous inj 300 mcg/ml	•				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
GRANIX - tbo-filgrastim subcutaneous inj 480 mcg/1.6ml (300 mcg/ml)	•				
NEULASTA - pegfilgrastim soln prefilled syringe 6 mg/0.6ml	•				
NEULASTA ONPRO KIT - pegfilgrastim soln prefilled syringe kit 6 mg/0.6ml	•				
NEUPOGEN - filgrastim soln prefilled syringe 300 mcg/0.5ml	•				
NEUPOGEN - filgrastim soln prefilled syringe 480 mcg/0.8ml (600 mcg/ml)	•				
NEUPOGEN - filgrastim inj 300 mcg/ml	•				
NEUPOGEN - filgrastim inj 480 mcg/1.6ml (300 mcg/ml)	•				
NIVESTYM - filgrastim-aafi soln prefilled syringe 300 mcg/0.5ml	•				
NIVESTYM - filgrastim-aafi soln prefilled syringe 480 mcg/0.8ml	•				
NIVESTYM - filgrastim-aafi inj 300 mcg/ml	•				
NIVESTYM - filgrastim-aafi inj 480 mcg/1.6ml (300 mcg/ml)	•				
NYVEPRIA - pegfilgrastim-apgf soln prefilled syringe 6 mg/0.6ml	•				
PROCRIT - epoetin alfa inj 2000 unit/ml	•	•			
PROCRIT - epoetin alfa inj 3000 unit/ml	•	•			
PROCRIT - epoetin alfa inj 4000 unit/ml	•	•			
PROCRIT - epoetin alfa inj 10000 unit/ml	•	•			
PROCRIT - epoetin alfa inj 20000 unit/ml	•	•			

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
PROCRIT - epoetin alfa inj 40000 unit/ml	•	•			
RETACRIT - epoetin alfa-epbx inj 2000 unit/ml	•	•			
RETACRIT - epoetin alfa-epbx inj 3000 unit/ml	•	•			
RETACRIT - epoetin alfa-epbx inj 4000 unit/ml	•	•			
RETACRIT - epoetin alfa-epbx inj 10000 unit/ml	•	•			
RETACRIT - epoetin alfa-epbx inj 20000 unit/ml	•	•			
RETACRIT - epoetin alfa-epbx inj 40000 unit/ml	•	•			
UDENYCA - pegfilgrastim-cbqv soln prefilled syringe 6 mg/0.6ml	•				
ZARXIO - filgrastim-sndz soln prefilled syringe 300 mcg/0.5ml	•				
ZARXIO - filgrastim-sndz soln prefilled syringe 480 mcg/0.8ml	•				
ZIEXTENZO - pegfilgrastim-bmez soln prefilled syringe 6 mg/0.6ml	•				
ANTICOAGULANTS					
ELIQUIS - apixaban tab 2.5 mg			•		
ELIQUIS - apixaban tab 5 mg			•		
ELIQUIS STARTER PACK - apixaban tab starter pack 5 mg			•		
warfarin sodium tab 1 mg (Coumadin)					
warfarin sodium tab 2 mg (Coumadin)					
warfarin sodium tab 2.5 mg (Coumadin)					
warfarin sodium tab 3 mg (Coumadin)					
warfarin sodium tab 4 mg (Coumadin)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
warfarin sodium tab 5 mg (Coumadin)					
warfarin sodium tab 6 mg (Coumadin)					
warfarin sodium tab 7.5 mg (Coumadin)					
warfarin sodium tab 10 mg (Coumadin)					
XARELTO - rivaroxaban tab 2.5 mg			•		
XARELTO - rivaroxaban tab 10 mg			•		
XARELTO - rivaroxaban tab 15 mg			•		
XARELTO - rivaroxaban tab 20 mg			•		
XARELTO STARTER PACK - rivaroxaban tab starter therapy pack 15 mg & 20 mg			•		
HEMATOLOGICAL AGENTS - MISC.					
ADVATE - antihemophilic factor recomb (rahf-pfm) for inj 250 unit	•	•	•		
ADVATE - antihemophilic factor recomb (rahf-pfm) for inj 500 unit	•	•	•		
ADVATE - antihemophilic factor recomb (rahf-pfm) for inj 1000 unit	•	•	•		
ADVATE - antihemophilic factor recomb (rahf-pfm) for inj 1500 unit	•	•	•		
ADVATE - antihemophilic factor recomb (rahf-pfm) for inj 2000 unit	•	•	•		
ADVATE - antihemophilic factor recomb (rahf-pfm) for inj 3000 unit	•	•	•		
ADVATE - antihemophilic factor recomb (rahf-pfm) for inj 4000 unit	•	•	•		
ADYNOVATE - antihemophilic factor recomb pegylated for inj 250 unit	•	•	•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
ADYNOVATE - antihemophilic factor recomb pegylated for inj 500 unit	•	•	•		
ADYNOVATE - antihemophilic factor recomb pegylated for inj 750 unit	•	•	•		
ADYNOVATE - antihemophilic factor recomb pegylated for inj 1000 unit	•	•	•		
ADYNOVATE - antihemophilic factor recomb pegylated for inj 1500 unit	•	•	•		
ADYNOVATE - antihemophilic factor recomb pegylated for inj 2000 unit	•	•	•		
ADYNOVATE - antihemophilic factor recomb pegylated for inj 3000 unit	•	•	•		
AFSTYLA - antihemophilic fact rcmb single chain for inj kit 250 unit	•	•	•		
AFSTYLA - antihemophilic fact rcmb single chain for inj kit 500 unit	•	•	•		
AFSTYLA - antihemophilic fact rcmb single chain for inj kit 1000 unit	•	•	•		
AFSTYLA - antihemophilic fact rcmb single chain for inj kit 1500 unit	•	•	•		
AFSTYLA - antihemophilic fact rcmb single chain for inj kit 2000 unit	•	•	•		
AFSTYLA - antihemophilic fact rcmb single chain for inj kit 2500 unit	•	•	•		
AFSTYLA - antihemophilic fact rcmb single chain for inj kit 3000 unit	•	•	•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
ALPHANATE - antihemophilic factor/vwf (human) for inj 250 unit	•				
ALPHANATE - antihemophilic factor/vwf (human) for inj 500 unit	•				
ALPHANATE - antihemophilic factor/vwf (human) for inj 1000 unit	•				
ALPHANATE - antihemophilic factor/vwf (human) for inj 1500 unit	•				
ALPHANATE - antihemophilic factor/vwf (human) for inj 2000 unit	•				
ALPHANINE SD - coagulation factor ix for inj 500 unit	•	•	•		
ALPHANINE SD - coagulation factor ix for inj 1000 unit	•	•	•		
ALPHANINE SD - coagulation factor ix for inj 1500 unit	•	•	•		
ALPROLIX - coagulation factor ix (recomb) (rfixfc) for inj 250 unit	•	•	•		
ALPROLIX - coagulation factor ix (recomb) (rfixfc) for inj 500 unit	•	•	•		
ALPROLIX - coagulation factor ix (recomb) (rfixfc) for inj 1000 unit	•	•	•		
ALPROLIX - coagulation factor ix (recomb) (rfixfc) for inj 2000 unit	•	•	•		
ALPROLIX - coagulation factor ix (recomb) (rfixfc) for inj 3000 unit	•	•	•		
ALPROLIX - coagulation factor ix (recomb) (rfixfc) for inj 4000 unit	•	•	•		
BENEFIX - coagulation factor ix (recombinant) for inj kit 250 unit	•	•	•		
BENEFIX - coagulation factor ix (recombinant) for inj kit 500 unit	•	•	•		
BENEFIX - coagulation factor ix (recombinant) for inj kit 1000 unit	•	•	•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
BENEFIX - coagulation factor ix (recombinant) for inj kit 2000 unit	•	•	•			ESPEROCT - antihemophilic factor recomb glycopeg-exei for inj 500 unit	•	•	•		
BENEFIX - coagulation factor ix (recombinant) for inj kit 3000 unit	•	•	•			ESPEROCT - antihemophilic factor recomb glycopeg-exei for inj 1000 unit	•	•	•		
BRILINTA - ticagrelor tab 60 mg						ESPEROCT - antihemophilic factor recomb glycopeg-exei for inj 1500 unit	•	•	•		
BRILINTA - ticagrelor tab 90 mg						ESPEROCT - antihemophilic factor recomb glycopeg-exei for inj 2000 unit	•	•	•		
cilostazol tab 50 mg (Pletal)						ESPEROCT - antihemophilic factor recomb glycopeg-exei for inj 3000 unit	•	•	•		
cilostazol tab 100 mg (Pletal)						FEIBA - antiinhibitor coagulant complex for iv soln 500 unit	•				
clopidogrel bisulfate tab 75 mg (base equiv) (Plavix)						FEIBA - antiinhibitor coagulant complex for iv soln 1000 unit	•				
COAGADEX - coagulation factor x (human) for inj 250 unit	•					FEIBA - antiinhibitor coagulant complex for iv soln 2500 unit	•				
COAGADEX - coagulation factor x (human) for inj 500 unit	•					HEMLIBRA - emicizumab-kxwh subcutaneous soln 30 mg/ml	•	•	•		
CORIFACT - factor xiii concentrate (human) for inj kit 1000-1600 unit	•					HEMLIBRA - emicizumab-kxwh subcutaneous soln 60 mg/0.4ml (150 mg/ml)	•	•	•		
ELOCTATE - antihemophilic factor rcmb (bdd-rfviiiifc) for inj 250 unit	•	•	•			HEMLIBRA - emicizumab-kxwh subcutaneous soln 105 mg/0.7ml (150 mg/ml)	•	•	•		
ELOCTATE - antihemophilic factor rcmb (bdd-rfviiiifc) for inj 500 unit	•	•	•			HEMLIBRA - emicizumab-kxwh subcutaneous soln 150 mg/ml	•	•	•		
ELOCTATE - antihemophilic factor rcmb (bdd-rfviiiifc) for inj 750 unit	•	•	•			HEMOFIL M - antihemophilic factor (human) for inj 250 unit	•	•	•		
ELOCTATE - antihemophilic factor rcmb (bdd-rfviiiifc) for inj 1000 unit	•	•	•			HEMOFIL M - antihemophilic factor (human) for inj 500 unit	•	•	•		
ELOCTATE - antihemophilic factor rcmb (bdd-rfviiiifc) for inj 1500 unit	•	•	•			HEMOFIL M - antihemophilic factor (human) for inj 1000 unit	•	•	•		
ELOCTATE - antihemophilic factor rcmb (bdd-rfviiiifc) for inj 2000 unit	•	•	•			HEMOFIL M - antihemophilic factor (human) for inj 1700 unit	•	•	•		
ELOCTATE - antihemophilic factor rcmb (bdd-rfviiiifc) for inj 3000 unit	•	•	•								
ELOCTATE - antihemophilic factor rcmb (bdd-rfviiiifc) for inj 4000 unit	•	•	•								
ELOCTATE - antihemophilic factor rcmb (bdd-rfviiiifc) for inj 5000 unit	•	•	•								
ELOCTATE - antihemophilic factor rcmb (bdd-rfviiiifc) for inj 6000 unit	•	•	•								

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
HUMATE-P - antihemophilic factor/vwf (human) for inj 250-600 unit	•				
HUMATE-P - antihemophilic factor/vwf (human) for inj 500-1200 unit	•				
HUMATE-P - antihemophilic factor/vwf (human) for inj 1000-2400 unit	•				
IDELVION - coagulation factor ix (recomb) (rix-fp) for inj 250 unit	•	•	•		
IDELVION - coagulation factor ix (recomb) (rix-fp) for inj 500 unit	•	•	•		
IDELVION - coagulation factor ix (recomb) (rix-fp) for inj 1000 unit	•	•	•		
IDELVION - coagulation factor ix (recomb) (rix-fp) for inj 2000 unit	•	•	•		
IDELVION - coagulation factor ix (recomb) (rix-fp) for inj 3500 unit	•	•	•		
IXINITY - coagulation factor ix (recombinant) for inj 250 unit	•	•	•		
IXINITY - coagulation factor ix (recombinant) for inj 500 unit	•	•	•		
IXINITY - coagulation factor ix (recombinant) for inj 1000 unit	•	•	•		
IXINITY - coagulation factor ix (recombinant) for inj 1500 unit	•	•	•		
IXINITY - coagulation factor ix (recombinant) for inj 2000 unit	•	•	•		
IXINITY - coagulation factor ix (recombinant) for inj 3000 unit	•	•	•		
JIVI - antihemophilic factor recomb(bdd-rfviii peg-aucl) for inj 500 unit	•	•	•		
JIVI - antihemophilic factor recomb(bdd-rfviii peg-aucl)for inj 1000 unit	•	•	•		
JIVI - antihemophilic factor recomb(bdd-rfviii peg-aucl)for inj 2000 unit	•	•	•		
JIVI - antihemophilic factor recomb(bdd-rfviii peg-aucl)for inj 3000 unit	•	•	•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
KOATE - antihemophilic factor (human) for inj 250 unit	•	•	•		
KOATE - antihemophilic factor (human) for inj 500 unit	•	•	•		
KOATE - antihemophilic factor (human) for inj 1000 unit	•	•	•		
KOATE-DVI - antihemophilic factor (human) for inj 250 unit	•	•	•		
KOATE-DVI - antihemophilic factor (human) for inj 500 unit	•	•	•		
KOATE-DVI - antihemophilic factor (human) for inj 1000 unit	•	•	•		
KOGENATE FS - antihemophilic factor recomb (rfviii) for inj kit 250 unit	•	•	•		
KOGENATE FS - antihemophilic factor recomb (rfviii) for inj kit 500 unit	•	•	•		
KOGENATE FS - antihemophilic factor recomb (rfviii) for inj kit 1000 unit	•	•	•		
KOGENATE FS - antihemophilic factor recomb (rfviii) for inj kit 2000 unit	•	•	•		
KOGENATE FS - antihemophilic factor recomb (rfviii) for inj kit 3000 unit	•	•	•		
KOVALTRY - antihemophilic factor recomb (rahf-pfm) for inj 250 unit	•	•	•		
KOVALTRY - antihemophilic factor recomb (rahf-pfm) for inj 500 unit	•	•	•		
KOVALTRY - antihemophilic factor recomb (rahf-pfm) for inj 1000 unit	•	•	•		
KOVALTRY - antihemophilic factor recomb (rahf-pfm) for inj 2000 unit	•	•	•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
KOVALTRY - antihemophilic factor recomb (rahf-pfm) for inj 3000 unit	•	•	•		
MONONINE - coagulation factor ix for inj 1000 unit	•	•	•		
NOVOEIGHT - antihemophilic fact rcmb (bd trunc-rfviii) for inj 250 unit	•	•	•		
NOVOEIGHT - antihemophilic fact rcmb (bd trunc-rfviii) for inj 500 unit	•	•	•		
NOVOEIGHT - antihemophilic fact rcmb (bd trunc-rfviii) for inj 1000 unit	•	•	•		
NOVOEIGHT - antihemophilic fact rcmb (bd trunc-rfviii) for inj 1500 unit	•	•	•		
NOVOEIGHT - antihemophilic fact rcmb (bd trunc-rfviii) for inj 2000 unit	•	•	•		
NOVOEIGHT - antihemophilic fact rcmb (bd trunc-rfviii) for inj 3000 unit	•	•	•		
NOVOSEVEN RT - coagulation factor viia (recomb) for inj 1 mg (1000 mcg)	•				
NOVOSEVEN RT - coagulation factor viia (recomb) for inj 2 mg (2000 mcg)	•				
NOVOSEVEN RT - coagulation factor viia (recomb) for inj 5 mg (5000 mcg)	•				
NOVOSEVEN RT - coagulation factor viia (recomb) for inj 8 mg (8000 mcg)	•				
NUWIQ - antihemophilic factor rcmb (bdd-rfviii,sim) for inj 250 unit	•	•	•		
NUWIQ - antihemophilic factor rcmb (bdd-rfviii,sim) for inj 500 unit	•	•	•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
NUWIQ - antihemophilic fact rcmb (bdd-rfviii,sim) for inj 1000 unit	•	•	•		
NUWIQ - antihemophilic fact rcmb (bdd-rfviii,sim) for inj 2000 unit	•	•	•		
NUWIQ - antihemophilic fact rcmb (bdd-rfviii,sim) for inj 2500 unit	•	•	•		
NUWIQ - antihemophilic fact rcmb (bdd-rfviii,sim) for inj 3000 unit	•	•	•		
NUWIQ - antihemophilic fact rcmb (bdd-rfviii,sim) for inj 4000 unit	•	•	•		
NUWIQ - antihemophil fact rcmb (bdd-rfviii,sim) for inj kit 250 unit	•	•	•		
NUWIQ - antihemophil fact rcmb (bdd-rfviii,sim) for inj kit 500 unit	•	•	•		
NUWIQ - antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 1000 unit	•	•	•		
NUWIQ - antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 2000 unit	•	•	•		
NUWIQ - antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 2500 unit	•	•	•		
NUWIQ - antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 3000 unit	•	•	•		
NUWIQ - antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 4000 unit	•	•	•		
OBIZUR - antihemophilic factor (recomb porc) rpfviii for inj 500 unit	•				
PROFILNINE - factor ix complex for inj 500 unit	•	•	•		
PROFILNINE - factor ix complex for inj 1000 unit	•	•	•		
PROFILNINE - factor ix complex for inj 1500 unit	•	•	•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
REBINYN - coagulation factor ix recomb glycopegylated for inj 500 unit	•	•	•		
REBINYN - coagulation factor ix recomb glycopegylated for inj 1000 unit	•	•	•		
REBINYN - coagulation factor ix recomb glycopegylated for inj 2000 unit	•	•	•		
RECOMBINATE - antihemophilic factor recomb (rfviii) for inj 220-400 unit	•	•	•		
RECOMBINATE - antihemophilic factor recomb (rfviii) for inj 401-800 unit	•	•	•		
RECOMBINATE - antihemophilic factor recomb (rfviii) for inj 801-1240 unit	•	•	•		
RECOMBINATE - antihemophilic factor recomb (rfviii) for inj 1241-1800 unit	•	•	•		
RECOMBINATE - antihemophilic factor recomb (rfviii) for inj 1801-2400 unit	•	•	•		
RIXUBIS - coagulation factor ix (recombinant) for inj 250 unit	•	•	•		
RIXUBIS - coagulation factor ix (recombinant) for inj 500 unit	•	•	•		
RIXUBIS - coagulation factor ix (recombinant) for inj 1000 unit	•	•	•		
RIXUBIS - coagulation factor ix (recombinant) for inj 2000 unit	•	•	•		
RIXUBIS - coagulation factor ix (recombinant) for inj 3000 unit	•	•	•		
TAKHZYRO - lanadelumab-flyo inj 300 mg/2ml (150 mg/ml)	•	•	•		
TRETTEN - coagulation factor xiii a-subunit for inj 2000-3125 unit	•				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
VONVENDI - von willebrand factor (recombinant) for inj 650 unit	•				
VONVENDI - von willebrand factor (recombinant) for inj 1300 unit	•				
WILATE - antihemophilic factor/vwf (human) for inj 500-500 unit kit	•				
WILATE - antihemophilic factor/vwf (human) for inj 1000-1000 unit kit	•				
XYNTHA - antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 250 unit	•	•	•		
XYNTHA - antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 500 unit	•	•	•		
XYNTHA - antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 1000 unit	•	•	•		
XYNTHA - antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 2000 unit	•	•	•		
XYNTHA SOLOFUSE - antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 250 unit	•	•	•		
XYNTHA SOLOFUSE - antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 500 unit	•	•	•		
XYNTHA SOLOFUSE - antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 1000 unit	•	•	•		
XYNTHA SOLOFUSE - antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 2000 unit	•	•	•		
XYNTHA SOLOFUSE - antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 3000 unit	•	•	•		
TOPICAL PRODUCTS					
OPHTHALMIC AGENTS					
ALPHAGAN P - brimonidine tartrate ophth soln 0.1%					
azelastine hcl ophth soln 0.05%					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
AZOPT - brinzolamide ophth susp 1%					
BACITRACIN - bacitracin ophth oint 500 unit/gm					
bacitracin-polymyxin b ophth oint					
brimonidine tartrate ophth soln 0.2%					
ciprofloxacin hcl ophth soln 0.3% (base equivalent) (Ciloxan)					
cromolyn sodium ophth soln 4%					
cyclopentolate hcl ophth soln 1% (Cyclogyl)					
diclofenac sodium ophth soln 0.1%					
dorzolamide hcl ophth soln 2% (Trusopt)					
dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml (Cosopt)					
erythromycin ophth oint 5 mg/gm					
gentamicin sulfate ophth soln 0.3% (Garamycin)					
ketorolac tromethamine ophth soln 0.5% (Acular)					
latanoprost ophth soln 0.005% (Xalatan)			•		
LOTEMAX - loteprednol etabonate ophth oint 0.5%					
LOTEMAX - loteprednol etabonate ophth gel 0.5%					
LOTEMAX SM - loteprednol etabonate ophth gel 0.38%					
LUMIGAN - bimatoprost ophth soln 0.01%			•	•	

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
NATACYN - natamycin ophth susp 5%					
neomycin-polymyxin-dexamethasone ophth oint 0.1% (Maxitrol)					
neomycin-polymyxin-dexamethasone ophth susp 0.1% (Maxitrol)					
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1% (Polytrim)					
PREDNISOLONE ACETATE - prednisolone acetate ophth susp 1%					
PREDNISOLONE SODIUM PHOSP - prednisolone sodium phosphate ophth soln 1%					
SIMBRINZA - brinzolamide-brimonidine tartrate ophth susp 1-0.2%					
tetracaine hcl ophth soln 0.5%					
timolol maleate ophth soln 0.25% (Timoptic)					
timolol maleate ophth soln 0.5% (Timoptic)					
tobramycin ophth soln 0.3% (Tobrex)			•		
TRIFLURIDINE - trifluridine ophth soln 1%					
ZYLET - loteprednol etabonate-tobramycin ophth susp 0.5-0.3%					
MOUTH/THROAT/DENTAL AGENTS					
chlorhexidine gluconate soln 0.12% (Peridex)					
lidocaine hcl viscous soln 2%					
stannous fluoride conc 0.63%					•
DERMATOLOGICALS					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
betamethasone dipropionate augmented cream 0.05% (Diprolene af)			•		
CARAC - fluorouracil cream 0.5%		•	•		
clotrimazole cream 1%					
COSENTYX - secukinumab subcutaneous soln prefilled syringe 150 mg/ml	•	•	•		
COSENTYX - secukinumab subcutaneous pref syr 150 mg/ml (300 mg dose)	•	•	•		
COSENTYX SENSOREADY PEN - secukinumab subcutaneous soln auto-injector 150 mg/ml	•	•	•		
COSENTYX SENSOREADY PEN - secukinumab subcutaneous auto-inj 150 mg/ml (300 mg dose)	•	•	•		
FINACEA - azelaic acid foam 15%					
FLUOROPLEX - fluorouracil cream 1%		•	•		
hydrocortisone cream 1%					
hydrocortisone cream 2.5%					
hydrocortisone oint 1%					
hydrocortisone oint 2.5%					
ketoconazole shampoo 2% (Nizoral)					
mometasone furoate oint 0.1% (Elocon)			•		
mupirocin oint 2% (Bactroban)					
nystatin cream 100000 unit/gm					
nystatin oint 100000 unit/gm					
selenium sulfide lotion 2.5%					
silver sulfadiazine cream 1% (Silvadene)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
SKYRIZI - risankizumab-rzaa sol prefilled syringe 2 x 75 mg/0.83ml kit	•	•	•		
SOOLANTRA - ivermectin cream 1%					
STELARA - ustekinumab inj 45 mg/0.5ml	•	•	•		
STELARA - ustekinumab soln prefilled syringe 45 mg/0.5ml	•	•	•		
STELARA - ustekinumab soln prefilled syringe 90 mg/ml	•	•	•		
TAZORAC - tazarotene cream 0.05%					
TAZORAC - tazarotene gel 0.05%					
TAZORAC - tazarotene gel 0.1%					
TREMFYA - guselkumab soln pen-injector 100 mg/ml	•	•	•		
TREMFYA - guselkumab soln prefilled syringe 100 mg/ml	•	•	•		
triamcinolone acetonide cream 0.025%					
triamcinolone acetonide cream 0.1%					
triamcinolone acetonide cream 0.5%					
triamcinolone acetonide oint 0.025%					
triamcinolone acetonide oint 0.1%					
triamcinolone acetonide oint 0.5%					
VALCHLOR - mechlorethamine hcl gel 0.016% (base equivalent)	•				
ZYCLARA - imiquimod cream 3.75%		•	•		
ZYCLARA PUMP - imiquimod cream 2.5%		•	•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
ZYCLARA PUMP - imiquimod cream 3.75%		•	•		
MISCELLANEOUS PRODUCTS					
ANTIDOTES					
CHEMET - succimer cap 100 mg					
NARCAN - naloxone hcl nasal spray 4 mg/0.1ml					
DIAGNOSTIC PRODUCTS					
INSULIN PEN NEEDLES – VARIOUS			•		
INSULIN SYRINGES – VARIOUS			•		
LANCETS – VARIOUS					
TEST STRIPS – CONTOUR, CONTOUR NEXT			•	•	
MEDICAL DEVICES					
BREATHERITE - spacer/aerosol-holding chambers - device					
ASSORTED CLASSES					
CELLCEPT - mycophenolate mofetil cap 250 mg					
CELLCEPT - mycophenolate mofetil tab 500 mg					
LOKELMA - sodium zirconium cyclosilicate for susp packet 5 gm					
LOKELMA - sodium zirconium cyclosilicate for susp packet 10 gm					
PROGRAF - tacrolimus cap 0.5 mg					
PROGRAF - tacrolimus cap 1 mg					
PROGRAF - tacrolimus cap 5 mg					
PROGRAF - tacrolimus packet for susp 0.2 mg					
PROGRAF - tacrolimus packet for susp 1 mg					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
RAPAMUNE - sirolimus oral soln 1 mg/ml					
REVLIMID - lenalidomide caps 2.5 mg	•	•	•		
REVLIMID - lenalidomide cap 5 mg	•	•	•		
REVLIMID - lenalidomide cap 10 mg	•	•	•		
REVLIMID - lenalidomide cap 15 mg	•	•	•		
REVLIMID - lenalidomide cap 20 mg	•	•	•		
REVLIMID - lenalidomide cap 25 mg	•	•	•		
THALOMID - thalidomide cap 50 mg	•	•	•		
THALOMID - thalidomide cap 100 mg	•	•	•		
THALOMID - thalidomide cap 150 mg	•	•	•		
THALOMID - thalidomide cap 200 mg	•	•	•		
VELTASSA - patiomer sorbitex calcium for susp packet 8.4 gm (base eq)					
VELTASSA - patiomer sorbitex calcium for susp packet 16.8 gm (base eq)					
VELTASSA - patiomer sorbitex calcium for susp packet 25.2 gm (base eq)					
ZOKINVY - lonafarnib cap 50 mg	•				
ZOKINVY - lonafarnib cap 75 mg	•				
ZORTRESS - everolimus tab 0.25 mg					
ZORTRESS - everolimus tab 0.5 mg					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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ELIQUIS STARTER PACK- apixaban tab starter pack 5 mg.....	35	ENTRESTO- sacubitril-valsartan tab 24-26 mg.....	18
ELLA- ulipristal acetate tab 30 mg.....	8	ENTRESTO- sacubitril-valsartan tab 49-51 mg.....	18
ELOCTATE- antihemophilic factor rcmb (bdd-rfviiiifc) for inj 250 unit.....	37	ENTRESTO- sacubitril-valsartan tab 97-103 mg.....	18
ELOCTATE- antihemophilic factor rcmb (bdd-rfviiiifc) for inj 500 unit.....	37	EPCLUSA- sofosbuvir-velpatasvir tab 200-50 mg.....	2
ELOCTATE- antihemophilic factor rcmb (bdd-rfviiiifc) for inj 750 unit.....	37	EPCLUSA- sofosbuvir-velpatasvir tab 400-100 mg.....	2
ELOCTATE- antihemophilic factor rcmb (bdd-rfviiiifc) for inj 1000 unit.....	37	EPIDIOLEX- cannabidiol soln 100 mg/ml.....	31
ELOCTATE- antihemophilic factor rcmb (bdd-rfviiiifc) for inj 1500 unit.....	37	EPOGEN- epoetin alfa inj 2000 unit/ml.....	34
ELOCTATE- antihemophilic factor rcmb (bdd-rfviiiifc) for inj 2000 unit.....	37	EPOGEN- epoetin alfa inj 3000 unit/ml.....	34
ELOCTATE- antihemophilic factor rcmb (bdd-rfviiiifc) for inj 3000 unit.....	37	EPOGEN- epoetin alfa inj 4000 unit/ml.....	34
ELOCTATE- antihemophilic factor rcmb (bdd-rfviiiifc) for inj 4000 unit.....	37	EPOGEN- epoetin alfa inj 10000 unit/ml.....	34
ELOCTATE- antihemophilic factor rcmb (bdd-rfviiiifc) for inj 5000 unit.....	37	EPOGEN- epoetin alfa inj 20000 unit/ml.....	34
ELOCTATE- antihemophilic factor rcmb (bdd-rfviiiifc) for inj 6000 unit.....	37	ergocalciferol cap 1.25 mg (50000 unit) (Drisdol).....	33
EMCYT- estramustine phosphate sodium cap 140 mg.....	4	ERIVEDGE- vismodegib cap 150 mg.....	4
EMEND- aprepitant for oral susp 125 mg (125 mg/5ml).....	22	ERLEADA- apalutamide tab 60 mg.....	4
EMGALITY- galcanezumab-gnlm subcutaneous soln auto-injector 120 mg/ml.....	30	erythromycin ophth oint 5 mg/gm.....	41
EMGALITY- galcanezumab-gnlm subcutaneous soln prefilled syr 100 mg/ml.....	30	escitalopram oxalate tab 5 mg (base equiv) (Lexapro).....	24
EMGALITY- galcanezumab-gnlm subcutaneous soln prefilled syr 120 mg/ml.....	30	escitalopram oxalate tab 10 mg (base equiv) (Lexapro).....	24
enalapril maleate & hydrochlorothiazide tab 5-12.5 mg.....	15	escitalopram oxalate tab 20 mg (base equiv) (Lexapro).....	24
		ESPEROCT- antihemophilic factor recomb glycopeg-exei for inj 500 unit.....	37
		ESPEROCT- antihemophilic factor recomb glycopeg-exei for inj 1000 unit.....	37
		ESPEROCT- antihemophilic factor recomb glycopeg-exei for inj 1500 unit.....	37
		ESPEROCT- antihemophilic factor recomb glycopeg-exei for inj 2000 unit.....	37
		ESPEROCT- antihemophilic factor recomb glycopeg-exei for inj 3000 unit.....	37
		estradiol tab 0.5 mg (Estrace).....	7
		estradiol tab 1 mg (Estrace).....	7
		estradiol tab 2 mg (Estrace).....	7
		ESTRING- estradiol vaginal ring 2 mg (7.5 mcg/24hrs).....	23
		eszopiclone tab 1 mg (Lunesta).....	25

eszopiclone tab 2 mg (Lunesta)	25	FLUOROPLEX- fluorouracil cream 1%.....	42
eszopiclone tab 3 mg (Lunesta)	26	fluoxetine hcl cap 10 mg (Prozac)	24
F		fluoxetine hcl cap 20 mg (Prozac)	24
famciclovir tab 125 mg (Famvir)	2	fluoxetine hcl cap 40 mg (Prozac)	24
famotidine tab 20 mg (Pepcid)	21	FLUPHENAZINE HCL- fluphenazine hcl oral conc 5 mg/ ml.....	25
famotidine tab 40 mg (Pepcid)	21	FLUPHENAZINE HYDROCHLORID- fluphenazine hcl elixir 2.5 mg/5ml.....	25
FARXIGA- dapagliflozin propanediol tab 5 mg (base equivalent).....	8	FLUTICASONE PROPIONATE/SA- fluticasone-salmeterol aer powder ba 55-14 mcg/act.....	20
FARXIGA- dapagliflozin propanediol tab 10 mg (base equivalent).....	8	FLUTICASONE PROPIONATE/SA- fluticasone-salmeterol aer powder ba 113-14 mcg/act.....	20
FEIBA- antiinhibitor coagulant complex for iv soln 500 unit.....	37	FLUTICASONE PROPIONATE/SA- fluticasone-salmeterol aer powder ba 232-14 mcg/act.....	20
FEIBA- antiinhibitor coagulant complex for iv soln 1000 unit.....	37	fluticasone propionate nasal susp 50 mcg/act	19
FEIBA- antiinhibitor coagulant complex for iv soln 2500 unit.....	37	folic acid cap 0.8 mg	34
felodipine tab er 24hr 2.5 mg	14	folic acid tab 400 mcg	34
felodipine tab er 24hr 5 mg	14	folic acid tab 800 mcg	34
felodipine tab er 24hr 10 mg	14	folic acid tab 1 mg	34
fenofibrate tab 54 mg (Lofibra)	17	FOLLISTIM AQ- follitropin beta inj 300 unit/0.36ml.....	12
fenofibrate tab 160 mg (Lofibra)	18	FOLLISTIM AQ- follitropin beta inj 600 unit/0.72ml.....	13
fenofibrate tab 48 mg (Tricor)	17	FOLLISTIM AQ- follitropin beta inj 900 unit/1.08ml.....	13
fenofibrate tab 145 mg (Tricor)	18	fosinopril sodium tab 10 mg	15
ferrous sulfate elixir 220 mg/5ml (44 mg/5ml elemental fe)	34	fosinopril sodium tab 20 mg	15
ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe)	34	fosinopril sodium tab 40 mg	15
FIASP FLEXTOUCH- insulin aspart (with niacinamide) sol pen-inj 100 unit/ml.....	11	FULPHILA- pegfilgrastim-jmdb soln prefilled syringe 6 mg/0.6ml.....	34
FIASP- insulin aspart (with niacinamide) inj 100 unit/ ml.....	11	furosemide oral soln 10 mg/ml	17
FIASP PENFILL- insulin aspart (with niacinamide) soln cartridge 100 unit/ml.....	11	furosemide tab 20 mg (Lasix)	17
FINACEA- azelaic acid foam 15%.....	42	furosemide tab 40 mg (Lasix)	17
finasteride tab 5 mg (Proscar)	23	furosemide tab 80 mg (Lasix)	17
FLOVENT DISKUS- fluticasone propionate aer pow ba 50 mcg/blister.....	20	G	
FLOVENT DISKUS- fluticasone propionate aer pow ba 100 mcg/blister.....	20	gabapentin cap 100 mg (Neurontin)	31
FLOVENT DISKUS- fluticasone propionate aer pow ba 250 mcg/blister.....	20	gabapentin cap 300 mg (Neurontin)	31
FLOVENT HFA- fluticasone propionate hfa inhal aer 110 mcg/act (125/valve).....	20	gabapentin cap 400 mg (Neurontin)	31
FLOVENT HFA- fluticasone propionate hfa inhal aer 220 mcg/act (250/valve).....	20	gabapentin tab 600 mg (Neurontin)	31
FLOVENT HFA- fluticasone propionate hfa inhal aero 44 mcg/act (50/valve).....	20	gabapentin tab 800 mg (Neurontin)	31
fluconazole tab 50 mg (Diflucan)	2	gemfibrozil tab 600 mg (Lopid)	18
fluconazole tab 100 mg (Diflucan)	2	gentamicin sulfate ophth soln 0.3% (Garamycin)	41
fluconazole tab 150 mg (Diflucan)	2	GENVOYA- elvitegrav-cobic-emtricitab-tenofov af tab 150-150-200-10 mg.....	2
fluconazole tab 200 mg (Diflucan)	2	GILENYA- fingolimod hcl cap 0.5 mg (base equiv).....	27
fludrocortisone acetate tab 0.1 mg	6	glimepiride tab 1 mg (Amaryl)	8
		glimepiride tab 2 mg (Amaryl)	8
		glimepiride tab 4 mg (Amaryl)	8
		glipizide tab er 24hr 2.5 mg (Glucotrol xl)	8
		glipizide tab er 24hr 5 mg (Glucotrol xl)	8
		glipizide tab er 24hr 10 mg (Glucotrol xl)	8
		glipizide tab 5 mg (Glucotrol)	8
		glipizide tab 10 mg (Glucotrol)	8
		GLUCAGON EMERGENCY KIT FO- glucagon hcl for inj 1 mg.....	8

GLUCAGON EMERGENCY KIT- glucagon (rdna) for inj kit 1 mg.....	8	HEMOFIL M- antihemophilic factor (human) for inj 500 unit.....	37
glyburide-metformin tab 1.25-250 mg (Glucovance).....	9	HEMOFIL M- antihemophilic factor (human) for inj 1000 unit.....	37
glyburide-metformin tab 2.5-500 mg (Glucovance).....	9	HEMOFIL M- antihemophilic factor (human) for inj 1700 unit.....	37
glyburide-metformin tab 5-500 mg (Glucovance).....	9	HUMATE-P- antihemophilic factor/vwf (human) for inj 250-600 unit.....	38
glyburide micronized tab 1.5 mg (Glynase).....	8	HUMATE-P- antihemophilic factor/vwf (human) for inj 500-1200 unit.....	38
glyburide micronized tab 3 mg (Glynase).....	8	HUMATE-P- antihemophilic factor/vwf (human) for inj 1000-2400 unit.....	38
glyburide micronized tab 6 mg (Glynase).....	9	HUMIRA- adalimumab prefilled syringe kit 10 mg/0.1ml.....	29
glyburide tab 1.25 mg.....	9	HUMIRA- adalimumab prefilled syringe kit 20 mg/0.2ml.....	29
glyburide tab 2.5 mg.....	9	HUMIRA- adalimumab prefilled syringe kit 40 mg/0.8ml.....	29
glyburide tab 5 mg.....	9	HUMIRA- adalimumab prefilled syringe kit 40 mg/0.4ml.....	29
GLYXAMBI- empagliflozin-linagliptin tab 10-5 mg.....	9	HUMIRA PEDIATRIC CROHNS D- adalimumab prefilled syringe kit 80 mg/0.8ml.....	29
GLYXAMBI- empagliflozin-linagliptin tab 25-5 mg.....	9	HUMIRA PEDIATRIC CROHNS D- adalimumab prefilled syringe kit 80 mg/0.8ml & 40 mg/0.4ml.....	29
GRANIX- tbo-filgrastim soln prefilled syringe 300 mcg/0.5ml.....	34	HUMIRA PEN- adalimumab pen-injector kit 40 mg/0.8ml.....	29
GRANIX- tbo-filgrastim soln prefilled syringe 480 mcg/0.8ml.....	34	HUMIRA PEN- adalimumab pen-injector kit 40 mg/0.4ml.....	29
GRANIX- tbo-filgrastim subcutaneous inj 300 mcg/ml.....	34	HUMIRA PEN- adalimumab pen-injector kit 80 mg/0.8ml.....	29
GRANIX- tbo-filgrastim subcutaneous inj 480 mcg/1.6ml (300 mcg/ml).....	34	HUMIRA PEN-CD/UC/HS START- adalimumab pen-injector kit 40 mg/0.8ml.....	29
GVOKE HYPOPEN 1-PACK- glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml.....	9	HUMIRA PEN-CD/UC/HS START- adalimumab pen-injector kit 80 mg/0.8ml.....	29
GVOKE HYPOPEN 1-PACK- glucagon subcutaneous solution auto-injector 1 mg/0.2ml.....	9	HUMIRA PEN-PEDIATRIC UC S- adalimumab pen-injector kit 80 mg/0.8ml.....	29
GVOKE HYPOPEN 2-PACK- glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml.....	9	HUMIRA PEN-PS/UV STARTER- adalimumab pen-injector kit 40 mg/0.8ml.....	29
GVOKE HYPOPEN 2-PACK- glucagon subcutaneous solution auto-injector 1 mg/0.2ml.....	9	HUMIRA PEN-PS/UV STARTER- adalimumab pen-injector kit 80 mg/0.8ml & 40 mg/0.4ml.....	29
GVOKE PFS- glucagon subcutaneous soln pref syringe 0.5 mg/0.1ml.....	9	HUMULIN R U-500 (CONCENTR- insulin regular (human) inj 500 unit/ml.....	11
GVOKE PFS- glucagon subcutaneous soln pref syringe 1 mg/0.2ml.....	9	HUMULIN R U-500 KWIKPEN- insulin regular (human) soln pen-injector 500 unit/ml.....	11
H		HYCODAN- hydrocodone w/ homatropine syrup 5-1.5 mg/5ml.....	19
haloperidol lactate oral conc 2 mg/ml.....	25	hydralazine hcl tab 10 mg.....	15
haloperidol tab 0.5 mg.....	25	hydralazine hcl tab 25 mg.....	15
haloperidol tab 1 mg.....	25	hydralazine hcl tab 50 mg.....	16
haloperidol tab 2 mg.....	25	hydralazine hcl tab 100 mg.....	16
HARVONI- ledipasvir-sofosbuvir pellet pack 33.75-150 mg.....	2	hydrochlorothiazide cap 12.5 mg (Microzide).....	17
HARVONI- ledipasvir-sofosbuvir pellet pack 45-200 mg.....	2	hydrochlorothiazide tab 12.5 mg.....	17
HARVONI- ledipasvir-sofosbuvir tab 45-200 mg.....	2	hydrochlorothiazide tab 25 mg.....	17
HARVONI- ledipasvir-sofosbuvir tab 90-400 mg.....	2		
HEMLIBRA- emicizumab-kxwh subcutaneous soln 30 mg/ml.....	37		
HEMLIBRA- emicizumab-kxwh subcutaneous soln 150 mg/ml.....	37		
HEMLIBRA- emicizumab-kxwh subcutaneous soln 60 mg/0.4ml (150 mg/ml).....	37		
HEMLIBRA- emicizumab-kxwh subcutaneous soln 105 mg/0.7ml (150 mg/ml).....	37		
HEMOFIL M- antihemophilic factor (human) for inj 250 unit.....	37		

hydrochlorothiazide tab 50 mg.....	17	indapamide tab 2.5 mg.....	17
hydrocodone-acetaminophen tab 7.5-325 mg (Norco).....	28	indomethacin cap 25 mg.....	29
hydrocodone-acetaminophen tab 5-325 mg (Norco).....	28	indomethacin cap 50 mg.....	30
hydrocodone-acetaminophen tab 10-325 mg (Norco).....	28	INNOPRAN XL- propranolol hcl sustained-release beads cap er 24hr 80 mg.....	13
hydrocodone w/ homatropine syrup 5-1.5 mg/5ml.....	19	INNOPRAN XL- propranolol hcl sustained-release beads cap er 24hr 120 mg.....	14
hydrocortisone cream 1%.....	42	INSULIN ASPART FLEXPEN- insulin aspart soln pen- injector 100 unit/ml.....	11
hydrocortisone cream 2.5%.....	42	INSULIN ASPART- insulin aspart inj 100 unit/ml.....	11
hydrocortisone oint 1%.....	42	INSULIN ASPART PENFILL- insulin aspart soln cartridge 100 unit/ml.....	11
hydrocortisone oint 2.5%.....	42	INSULIN ASPART PROTAMINE/- insulin aspart prot & aspart (human) inj 100 unit/ml (70-30).....	11
hydromorphone hcl tab 2 mg (Dilaudid).....	28	INSULIN ASPART PROTAMINE/- insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30).....	11
hydromorphone hcl tab 4 mg (Dilaudid).....	28	INSULIN PEN NEEDLES – VARIOUS.....	43
hydroxyzine hcl syrup 10 mg/5ml.....	23	INSULIN SYRINGES – VARIOUS.....	43
hydroxyzine hcl tab 10 mg.....	23	INTELENCE- etravirine tab 25 mg.....	2
hydroxyzine hcl tab 25 mg.....	23	INTELENCE- etravirine tab 100 mg.....	2
hydroxyzine hcl tab 50 mg.....	23	INTELENCE- etravirine tab 200 mg.....	2
hydroxyzine pamoate cap 25 mg (Vistaril).....	23	INTRON A- interferon alfa-2b for inj 10000000 unit.....	4
hydroxyzine pamoate cap 50 mg (Vistaril).....	23	INTRON A- interferon alfa-2b for inj 18000000 unit.....	4
I		INTRON A- interferon alfa-2b for inj 50000000 unit.....	4
ibandronate sodium tab 150 mg (base equivalent) (Boniva).....	13	INTRON A- interferon alfa-2b inj 6000000 unit/ml.....	4
IBRANCE- palbociclib cap 75 mg.....	4	INTRON A- interferon alfa-2b inj 10000000 unit/ml.....	4
IBRANCE- palbociclib cap 100 mg.....	4	INVOKAMET- canagliflozin-metformin hcl tab 50-500 mg.....	9
IBRANCE- palbociclib cap 125 mg.....	4	INVOKAMET- canagliflozin-metformin hcl tab 150-500 mg.....	9
IBRANCE- palbociclib tab 75 mg.....	4	INVOKAMET- canagliflozin-metformin hcl tab 50-1000 mg.....	9
IBRANCE- palbociclib tab 100 mg.....	4	INVOKAMET- canagliflozin-metformin hcl tab 150-1000 mg.....	9
IBRANCE- palbociclib tab 125 mg.....	4	INVOKAMET XR- canagliflozin-metformin hcl tab er 24hr 50-500 mg.....	9
ibuprofen susp 100 mg/5ml.....	29	INVOKAMET XR- canagliflozin-metformin hcl tab er 24hr 50-1000 mg.....	9
ibuprofen tab 400 mg.....	29	INVOKAMET XR- canagliflozin-metformin hcl tab er 24hr 150-500 mg.....	9
ibuprofen tab 600 mg.....	29	INVOKAMET XR- canagliflozin-metformin hcl tab er 24hr 150-1000 mg.....	9
ibuprofen tab 800 mg.....	29	INVOKANA- canagliflozin tab 100 mg.....	9
IDELVION- coagulation factor ix (recomb) (rix-fp) for inj 250 unit.....	38	INVOKANA- canagliflozin tab 300 mg.....	9
IDELVION- coagulation factor ix (recomb) (rix-fp) for inj 500 unit.....	38	ipratropium bromide inhal soln 0.02%.....	20
IDELVION- coagulation factor ix (recomb) (rix-fp) for inj 1000 unit.....	38	irbesartan-hydrochlorothiazide tab 150-12.5 mg (Avalide).....	16
IDELVION- coagulation factor ix (recomb) (rix-fp) for inj 2000 unit.....	38	irbesartan-hydrochlorothiazide tab 300-12.5 mg (Avalide).....	16
IDELVION- coagulation factor ix (recomb) (rix-fp) for inj 3500 unit.....	38	irbesartan tab 75 mg (Avapro).....	16
imipramine hcl tab 10 mg (Tofranil).....	24	irbesartan tab 150 mg (Avapro).....	16
imipramine hcl tab 25 mg (Tofranil).....	24	irbesartan tab 300 mg (Avapro).....	16
imipramine hcl tab 50 mg (Tofranil).....	24		
IMPAVIDO- miltefosine cap 50 mg.....	4		
INBRIJA- levodopa inhal powder cap 42 mg.....	32		
INCRELEX- mecasermin inj 40 mg/4ml (10 mg/ml).....	13		
INCRUSE ELLIPTA- umeclidinium br aero powd breath act 62.5 mcg/inh (base eq).....	20		
indapamide tab 1.25 mg.....	17		

ISENTRESS HD- raltegravir potassium tab 600 mg (base equiv).....	2
ISENTRESS- raltegravir potassium chew tab 25 mg (base equiv).....	2
ISENTRESS- raltegravir potassium chew tab 100 mg (base equiv).....	2
ISENTRESS- raltegravir potassium packet for susp 100 mg (base equiv).....	2
ISENTRESS- raltegravir potassium tab 400 mg (base equiv).....	2
isoniazid tab 300 mg.....	1
isosorbide mononitrate tab er 24hr 30 mg.....	13
isosorbide mononitrate tab er 24hr 60 mg.....	13
isosorbide mononitrate tab 10 mg.....	13
isosorbide mononitrate tab 20 mg.....	13
IXINITY- coagulation factor ix (recombinant) for inj 250 unit.....	38
IXINITY- coagulation factor ix (recombinant) for inj 500 unit.....	38
IXINITY- coagulation factor ix (recombinant) for inj 1000 unit.....	38
IXINITY- coagulation factor ix (recombinant) for inj 1500 unit.....	38
IXINITY- coagulation factor ix (recombinant) for inj 2000 unit.....	38
IXINITY- coagulation factor ix (recombinant) for inj 3000 unit.....	38
J	
JANUMET- sitagliptin-metformin hcl tab 50-500 mg.....	9
JANUMET- sitagliptin-metformin hcl tab 50-1000 mg.....	9
JANUMET XR- sitagliptin-metformin hcl tab er 24hr 50-500 mg.....	9
JANUMET XR- sitagliptin-metformin hcl tab er 24hr 50-1000 mg.....	9
JANUMET XR- sitagliptin-metformin hcl tab er 24hr 100-1000 mg.....	9
JANUVIA- sitagliptin phosphate tab 25 mg (base equiv).....	9
JANUVIA- sitagliptin phosphate tab 50 mg (base equiv).....	9
JANUVIA- sitagliptin phosphate tab 100 mg (base equiv).....	9
JARDIANCE- empagliflozin tab 10 mg.....	10
JARDIANCE- empagliflozin tab 25 mg.....	10
JIVI- antihemophil fact rcmb(bdd-rfviii peg-aucl)for inj 1000 unit.....	38
JIVI- antihemophil fact rcmb(bdd-rfviii peg-aucl)for inj 2000 unit.....	38
JIVI- antihemophil fact rcmb(bdd-rfviii peg-aucl)for inj 3000 unit.....	38
JIVI- antihemophil fact rcmb(bdd-rfviii peg-aucl) for inj 500 unit.....	38
JULUCA- dolutegravir sodium-rilpivirine hcl tab 50-25 mg (base eq).....	2

K

KALETRA- lopinavir-ritonavir tab 100-25 mg.....	2
KALETRA- lopinavir-ritonavir tab 200-50 mg.....	2
KALYDECO- ivacaftor packet 25 mg.....	21
KALYDECO- ivacaftor packet 50 mg.....	21
KALYDECO- ivacaftor packet 75 mg.....	21
KALYDECO- ivacaftor tab 150 mg.....	21
KESIMPTA- ofatumumab soln auto-injector 20 mg/0.4ml.....	27
ketoconazole shampoo 2% (Nizoral).....	42
ketorolac tromethamine ophth soln 0.5% (Acular).....	41
KISQALI FEMARA 200 DOSE- ribociclib 200 mg dose (200 mg tab) & letrozole 2.5 mg tbpk.....	4
KISQALI FEMARA 400 DOSE- ribociclib 400 mg dose (200 mg tab) & letrozole 2.5 mg tbpk.....	4
KISQALI FEMARA 600 DOSE- ribociclib 600 mg dose (200 mg tab) & letrozole 2.5 mg tbpk.....	5
KISQALI- ribociclib succinate tab pack 200 mg daily dose.....	4
KISQALI- ribociclib succinate tab pack 400 mg daily dose (200 mg tab).....	4
KISQALI- ribociclib succinate tab pack 600 mg daily dose (200 mg tab).....	4
KOATE- antihemophilic factor (human) for inj 250 unit.....	38
KOATE- antihemophilic factor (human) for inj 500 unit.....	38
KOATE- antihemophilic factor (human) for inj 1000 unit.....	38
KOATE-DVI- antihemophilic factor (human) for inj 250 unit.....	38
KOATE-DVI- antihemophilic factor (human) for inj 500 unit.....	38
KOATE-DVI- antihemophilic factor (human) for inj 1000 unit.....	38
KOGENATE FS- antihemophilic factor recomb (rfviii) for inj kit 250 unit.....	38
KOGENATE FS- antihemophilic factor recomb (rfviii) for inj kit 500 unit.....	38
KOGENATE FS- antihemophilic factor recomb (rfviii) for inj kit 1000 unit.....	38
KOGENATE FS- antihemophilic factor recomb (rfviii) for inj kit 2000 unit.....	38
KOGENATE FS- antihemophilic factor recomb (rfviii) for inj kit 3000 unit.....	38
KOSHER PRENATAL PLUS IRON- prenatal vit w/ iron carbonyl-fa tab 30-1 mg.....	33
KOVALTRY- antihemophilic factor recomb (rahf-pfm) for inj 250 unit.....	38
KOVALTRY- antihemophilic factor recomb (rahf-pfm) for inj 500 unit.....	38
KOVALTRY- antihemophilic factor recomb (rahf-pfm) for inj 1000 unit.....	38

KOVALTRY- antihemophilic factor recomb (rahf-pfm) for inj 2000 unit.....	38	levothyroxine sodium tab 150 mcg (Synthroid).....	12
KOVALTRY- antihemophilic factor recomb (rahf-pfm) for inj 3000 unit.....	39	levothyroxine sodium tab 175 mcg (Synthroid).....	12
KYNMOBI- apomorphine hydrochloride film 10 mg.....	32	levothyroxine sodium tab 200 mcg (Synthroid).....	12
KYNMOBI- apomorphine hydrochloride film 15 mg.....	32	levothyroxine sodium tab 300 mcg (Synthroid).....	12
KYNMOBI- apomorphine hydrochloride film 20 mg.....	32	lidocaine hcl viscous soln 2%.....	41
KYNMOBI- apomorphine hydrochloride film 25 mg.....	32	lisinopril & hydrochlorothiazide tab 10-12.5 mg (Zestoretic).....	16
KYNMOBI- apomorphine hydrochloride film 30 mg.....	32	lisinopril & hydrochlorothiazide tab 20-12.5 mg (Zestoretic).....	16
L		lisinopril & hydrochlorothiazide tab 20-25 mg (Zestoretic).....	16
labetalol hcl tab 100 mg (Trandate).....	14	lisinopril tab 5 mg (Prinivil).....	16
lamotrigine tab 25 mg (Lamictal).....	31	lisinopril tab 10 mg (Prinivil).....	16
lamotrigine tab 100 mg (Lamictal).....	31	lisinopril tab 20 mg (Prinivil).....	16
lamotrigine tab 150 mg (Lamictal).....	31	lisinopril tab 2.5 mg (Zestril).....	16
lamotrigine tab 200 mg (Lamictal).....	31	lisinopril tab 30 mg (Zestril).....	16
LANCETS – VARIOUS.....	43	lisinopril tab 40 mg (Zestril).....	16
lansoprazole cap delayed release 30 mg (Prevacid).....	21	lithium carbonate cap 300 mg.....	25
LANTUS- insulin glargine inj 100 unit/ml.....	12	lithium carbonate cap 150 mg (Lithium carbonate).....	25
LANTUS SOLOSTAR- insulin glargine soln pen-injector 100 unit/ml.....	12	lithium carbonate cap 600 mg (Lithium carbonate).....	25
latanoprost ophth soln 0.005% (Xalatan).....	41	lithium carbonate tab er 450 mg.....	25
LATUDA- lurasidone hcl tab 20 mg.....	25	lithium carbonate tab er 300 mg (Lithobid).....	25
LATUDA- lurasidone hcl tab 40 mg.....	25	lithium carbonate tab 300 mg.....	25
LATUDA- lurasidone hcl tab 60 mg.....	25	LOKELMA- sodium zirconium cyclosilicate for susp packet 5 gm.....	43
LATUDA- lurasidone hcl tab 80 mg.....	25	LOKELMA- sodium zirconium cyclosilicate for susp packet 10 gm.....	43
LATUDA- lurasidone hcl tab 120 mg.....	25	lorazepam tab 0.5 mg (Ativan).....	23
letrozole tab 2.5 mg (Femara).....	5	lorazepam tab 1 mg (Ativan).....	23
LEUKERAN- chlorambucil tab 2 mg.....	5	lorazepam tab 2 mg (Ativan).....	23
LEVEMIR FLEXTOUCH- insulin detemir soln pen-injector 100 unit/ml.....	12	losartan potassium & hydrochlorothiazide tab 50-12.5 mg (Hyzaar).....	16
LEVEMIR- insulin detemir inj 100 unit/ml.....	12	losartan potassium & hydrochlorothiazide tab 100-12.5 mg (Hyzaar).....	16
levetiracetam tab 250 mg (Keppra).....	31	losartan potassium & hydrochlorothiazide tab 100-25 mg (Hyzaar).....	16
levetiracetam tab 500 mg (Keppra).....	31	losartan potassium tab 25 mg (Cozaar).....	16
levocetirizine dihydrochloride tab 5 mg.....	19	losartan potassium tab 50 mg (Cozaar).....	16
levofloxacin tab 250 mg (Levaquin).....	1	losartan potassium tab 100 mg (Cozaar).....	16
levofloxacin tab 500 mg (Levaquin).....	1	LOTEMAX- loteprednol etabonate ophth gel 0.5%.....	41
levofloxacin tab 750 mg (Levaquin).....	1	LOTEMAX- loteprednol etabonate ophth oint 0.5%.....	41
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg.....	8	LOTEMAX SM- loteprednol etabonate ophth gel 0.38%.....	41
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg.....	8	lovastatin tab 10 mg.....	18
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg.....	8	lovastatin tab 20 mg.....	18
levothyroxine sodium tab 25 mcg (Synthroid).....	12	lovastatin tab 40 mg (Mevacor).....	18
levothyroxine sodium tab 50 mcg (Synthroid).....	12	LUMIGAN- bimatoprost ophth soln 0.01%.....	41
levothyroxine sodium tab 75 mcg (Synthroid).....	12	LYNPARZA- olaparib tab 100 mg.....	5
levothyroxine sodium tab 88 mcg (Synthroid).....	12	LYNPARZA- olaparib tab 150 mg.....	5
levothyroxine sodium tab 100 mcg (Synthroid).....	12	M	
levothyroxine sodium tab 112 mcg (Synthroid).....	12	MAVENCLAD- cladribine tab therapy pack 10 mg (4 tabs).....	27
levothyroxine sodium tab 125 mcg (Synthroid).....	12		
levothyroxine sodium tab 137 mcg (Synthroid).....	12		

MAVENCLAD- cladribine tab therapy pack 10 mg (5 tabs).....	27	methylprednisolone tab 16 mg (Medrol).....	7
MAVENCLAD- cladribine tab therapy pack 10 mg (6 tabs).....	27	methylprednisolone tab 32 mg (Medrol).....	7
MAVENCLAD- cladribine tab therapy pack 10 mg (7 tabs).....	27	methylprednisolone tab therapy pack 4 mg (21) (Medrol dosepak).....	7
MAVENCLAD- cladribine tab therapy pack 10 mg (8 tabs).....	27	metoclopramide hcl tab 5 mg (base equivalent) (Reglan).....	22
MAVENCLAD- cladribine tab therapy pack 10 mg (9 tabs).....	27	metoclopramide hcl tab 10 mg (base equivalent) (Reglan).....	22
MAVENCLAD- cladribine tab therapy pack 10 mg (10 tabs).....	27	metoprolol succinate tab er 24hr 25 mg (tartrate equiv) (Toprol xl).....	14
MAVYRET- glecaprevir-pibrentasvir tab 100-40 mg.....	2	metoprolol succinate tab er 24hr 50 mg (tartrate equiv) (Toprol xl).....	14
MAYZENT- siponimod fumarate tab 0.25 mg (base equiv).....	27	metoprolol succinate tab er 24hr 100 mg (tartrate equiv) (Toprol xl).....	14
MAYZENT- siponimod fumarate tab 2 mg (base equiv).....	27	metoprolol tartrate tab 25 mg.....	14
MAYZENT STARTER PACK- siponimod fumarate tab 0.25 mg (12) starter pack.....	27	metoprolol tartrate tab 50 mg (Lopressor).....	14
meclizine hcl tab 12.5 mg.....	22	metoprolol tartrate tab 100 mg (Lopressor).....	14
meclizine hcl tab 25 mg.....	22	metronidazole tab 250 mg (Flagyl).....	4
medroxyprogesterone acetate tab 2.5 mg (Provera).....	8	metronidazole tab 500 mg (Flagyl).....	4
medroxyprogesterone acetate tab 5 mg (Provera).....	8	minocycline hcl cap 50 mg (Minocin).....	1
medroxyprogesterone acetate tab 10 mg (Provera).....	8	minoxidil tab 2.5 mg.....	16
MEFLOQUINE HCL- mefloquine hcl tab 250 mg.....	3	minoxidil tab 10 mg.....	16
megestrol acetate tab 20 mg.....	5	mirtazapine tab 15 mg (Remeron).....	24
megestrol acetate tab 40 mg.....	5	mirtazapine tab 30 mg (Remeron).....	24
MEKINIST- trametinib dimethyl sulfoxide tab 0.5 mg (base equivalent).....	5	mirtazapine tab 45 mg (Remeron).....	24
MEKINIST- trametinib dimethyl sulfoxide tab 2 mg (base equivalent).....	5	misoprostol tab 100 mcg (Cytotec).....	21
meloxicam tab 7.5 mg (Mobic).....	30	misoprostol tab 200 mcg (Cytotec).....	21
meloxicam tab 15 mg (Mobic).....	30	MITIGARE- colchicine cap 0.6 mg.....	31
memantine hcl tab 5 mg (Namenda).....	27	mometasone furoate oint 0.1% (Elocon).....	42
memantine hcl tab 10 mg (Namenda).....	27	MONONINE- coagulation factor ix for inj 1000 unit.....	39
MESNEX- mesna tab 400 mg.....	5	montelukast sodium chew tab 4 mg (base equiv) (Singulair).....	20
metformin hcl tab er 24hr 500 mg (Glucophage xr).....	10	montelukast sodium chew tab 5 mg (base equiv) (Singulair).....	20
metformin hcl tab er 24hr 750 mg (Glucophage xr).....	10	montelukast sodium tab 10 mg (base equiv) (Singulair).....	20
metformin hcl tab 500 mg (Glucophage).....	10	morphine sulfate oral soln 10 mg/5ml.....	28
metformin hcl tab 850 mg (Glucophage).....	10	morphine sulfate tab er 15 mg (Ms contin).....	28
metformin hcl tab 1000 mg (Glucophage).....	10	MULTAQ- dronedarone hcl tab 400 mg (base equivalent).....	15
methadone hcl tab 10 mg (Dolophine).....	28	mupirocin oint 2% (Bactroban).....	42
methadone hcl tab 5 mg (Dolophine hcl).....	28	MYLERAN- busulfan tab 2 mg.....	5
methimazole tab 5 mg (Tapazole).....	12		
methimazole tab 10 mg (Tapazole).....	12	N	
methocarbamol tab 750 mg (Robaxin-750).....	32	nabumetone tab 500 mg.....	30
methocarbamol tab 500 mg (Robaxin).....	32	nabumetone tab 750 mg.....	30
methotrexate sodium inj 50 mg/2ml (25 mg/ml).....	5	naproxen tab ec 375 mg (Ec-naprosyn).....	30
methotrexate sodium inj pf 50 mg/2ml (25 mg/ml).....	5	naproxen tab ec 500 mg (Ec-naprosyn).....	30
methotrexate sodium inj pf 250 mg/10ml (25 mg/ml).....	5	naproxen tab 250 mg (Naprosyn).....	30
methyl dopa tab 250 mg.....	16	naproxen tab 375 mg (Naprosyn).....	30
methylphenidate hcl tab 5 mg (Ritalin).....	26	naproxen tab 500 mg (Naprosyn).....	30
methylprednisolone tab 4 mg (Medrol).....	7	NARCAN- naloxone hcl nasal spray 4 mg/0.1ml.....	43
		NATACYN- natamycin ophth susp 5%.....	41

neomycin-polymyxin-dexamethasone ophth oint 0.1% (Maxitrol)	41	NORDITROPIN FLEXPEN- somatropin solution pen-injector 30 mg/3ml.....	13
neomycin-polymyxin-dexamethasone ophth susp 0.1% (Maxitrol)	41	norethindrone & ethinyl estradiol tab 1 mg-35 mcg (Norinyl 1+35)	8
neomycin sulfate tab 500 mg	1	norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg (Loestrin fe 1/20)	8
NEULASTA ONPRO KIT- pegfilgrastim soln prefilled syringe kit 6 mg/0.6ml.....	34	norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg (Loestrin fe 1.5/30)	8
NEULASTA- pegfilgrastim soln prefilled syringe 6 mg/0.6ml.....	34	norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg (Loestrin 1/20-21)	8
NEUPOGEN- filgrastim inj 300 mcg/ml.....	34	norethindrone tab 0.35 mg (Nor-qd)	8
NEUPOGEN- filgrastim inj 480 mcg/1.6ml (300 mcg/ml).....	34	norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg (Ortho-cyclen)	8
NEUPOGEN- filgrastim soln prefilled syringe 300 mcg/0.5ml.....	34	norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg (Ortho tri-cyclen)	8
NEUPOGEN- filgrastim soln prefilled syringe 480 mcg/0.8ml (600 mcg/ml).....	34	norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg (Ortho tri-cyclen lo)	8
nevirapine tab 200 mg (Viramune)	2	nortriptyline hcl cap 10 mg (Pamelor)	24
NEXAVAR- sorafenib tosylate tab 200 mg (base equivalent).....	5	nortriptyline hcl cap 25 mg (Pamelor)	24
NEXIUM- esomeprazole magnesium for delayed release susp packet 5 mg.....	21	nortriptyline hcl cap 50 mg (Pamelor)	24
NEXIUM- esomeprazole magnesium for delayed release susp pack 2.5 mg.....	21	nortriptyline hcl cap 75 mg (Pamelor)	24
NEXLETOL- bempedoic acid tab 180 mg.....	18	NORVIR- ritonavir oral soln 80 mg/ml.....	3
NEXLIZET- bempedoic acid-ezetimibe tab 180-10 mg.....	18	NORVIR- ritonavir powder packet 100 mg.....	3
NICOTROL INHALER- nicotine inhaler system 10 mg (4 mg delivered).....	27	NOVOEIGHT- antihemophilic fact rcmb (bd trunc-rfviii) for inj 250 unit.....	39
NICOTROL NS- nicotine nasal spray 10 mg/ml (0.5 mg/spray).....	27	NOVOEIGHT- antihemophilic fact rcmb (bd trunc-rfviii) for inj 500 unit.....	39
nifedipine tab er 24hr 30 mg (Adalat cc)	14	NOVOEIGHT- antihemophilic fact rcmb (bd trunc-rfviii) for inj 1000 unit.....	39
nifedipine tab er 24hr osmotic release 30 mg (Procardia xl)	14	NOVOEIGHT- antihemophilic fact rcmb (bd trunc-rfviii) for inj 1500 unit.....	39
nifedipine tab er 24hr osmotic release 60 mg (Procardia xl)	14	NOVOEIGHT- antihemophilic fact rcmb (bd trunc-rfviii) for inj 2000 unit.....	39
nitrofurantoin monohydrate macrocrystalline cap 100 mg (Macrobid)	4	NOVOEIGHT- antihemophilic fact rcmb (bd trunc-rfviii) for inj 3000 unit.....	39
nitroglycerin td patch 24hr 0.2 mg/hr (Nitro-dur)	13	NOVOLIN 70/30 FLEXPEN- insulin nph & regular susp pen-inj 100 unit/ml (70-30).....	11
NITYR- nitisinone tab 2 mg.....	13	NOVOLIN 70/30- insulin nph isophane & regular human inj 100 unit/ml (70-30).....	11
NITYR- nitisinone tab 5 mg.....	13	NOVOLIN N FLEXPEN- insulin nph (human) (isophane) susp pen-injector 100 unit/ml.....	11
NITYR- nitisinone tab 10 mg.....	13	NOVOLIN N- insulin nph (human) (isophane) inj 100 unit/ml.....	11
NIVESTYM- filgrastim-aafi inj 300 mcg/ml.....	34	NOVOLIN R FLEXPEN- insulin regular (human) soln pen-injector 100 unit/ml.....	11
NIVESTYM- filgrastim-aafi inj 480 mcg/1.6ml (300 mcg/ml).....	34	NOVOLIN R- insulin regular (human) inj 100 unit/ml.....	11
NIVESTYM- filgrastim-aafi soln prefilled syringe 300 mcg/0.5ml.....	34	NOVOLOG FLEXPEN- insulin aspart soln pen-injector 100 unit/ml.....	11
NIVESTYM- filgrastim-aafi soln prefilled syringe 480 mcg/0.8ml.....	34	NOVOLOG- insulin aspart inj 100 unit/ml.....	11
NORDITROPIN FLEXPEN- somatropin solution pen-injector 5 mg/1.5ml.....	13	NOVOLOG MIX 70/30- insulin aspart prot & aspart (human) inj 100 unit/ml (70-30).....	11
NORDITROPIN FLEXPEN- somatropin solution pen-injector 10 mg/1.5ml.....	13	NOVOLOG MIX 70/30 PREFILL- insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30).....	12
NORDITROPIN FLEXPEN- somatropin solution pen-injector 15 mg/1.5ml.....	13		

NOVOLOG PENFILL- insulin aspart soln cartridge 100 unit/ml.....	11	olanzapine tab 5 mg (Zyprexa).....	25
NOVOSEVEN RT- coagulation factor viia (recomb) for inj 1 mg (1000 mcg).....	39	olanzapine tab 7.5 mg (Zyprexa).....	25
NOVOSEVEN RT- coagulation factor viia (recomb) for inj 2 mg (2000 mcg).....	39	olanzapine tab 10 mg (Zyprexa).....	25
NOVOSEVEN RT- coagulation factor viia (recomb) for inj 5 mg (5000 mcg).....	39	olanzapine tab 15 mg (Zyprexa).....	25
NOVOSEVEN RT- coagulation factor viia (recomb) for inj 8 mg (8000 mcg).....	39	olanzapine tab 20 mg (Zyprexa).....	25
NOXAFIL- posaconazole susp 40 mg/ml.....	2	olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg (Benicar hct).....	16
NUBEQA- darolutamide tab 300 mg.....	5	olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg (Benicar hct).....	16
NUVARING- etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr.....	8	olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg (Benicar hct).....	16
NUWIQ- antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 1000 unit.....	39	olmesartan medoxomil tab 5 mg (Benicar).....	16
NUWIQ- antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 2000 unit.....	39	olmesartan medoxomil tab 20 mg (Benicar).....	16
NUWIQ- antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 2500 unit.....	39	olmesartan medoxomil tab 40 mg (Benicar).....	16
NUWIQ- antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 3000 unit.....	39	omeprazole cap delayed release 10 mg (Prilosec).....	22
NUWIQ- antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 4000 unit.....	39	omeprazole cap delayed release 20 mg (Prilosec).....	22
NUWIQ- antihemophil fact rcmb (bdd-rfviii,sim) for inj kit 250 unit.....	39	omeprazole cap delayed release 40 mg (Prilosec).....	22
NUWIQ- antihemophil fact rcmb (bdd-rfviii,sim) for inj kit 500 unit.....	39	ondansetron hcl tab 4 mg (Zofran).....	22
NUWIQ- antihemophilic factor rcmb (bdd-rfviii,sim) for inj 250 unit.....	39	ondansetron hcl tab 8 mg (Zofran).....	22
NUWIQ- antihemophilic factor rcmb (bdd-rfviii,sim) for inj 500 unit.....	39	ondansetron orally disintegrating tab 4 mg (Zofran odt).....	22
NUWIQ- antihemophilic fact rcmb (bdd-rfviii,sim) for inj 1000 unit.....	39	ondansetron orally disintegrating tab 8 mg (Zofran odt).....	22
NUWIQ- antihemophilic fact rcmb (bdd-rfviii,sim) for inj 2000 unit.....	39	OPSUMIT- macitentan tab 10 mg.....	18
NUWIQ- antihemophilic fact rcmb (bdd-rfviii,sim) for inj 2500 unit.....	39	ORFADIN- nitisinone cap 20 mg.....	13
NUWIQ- antihemophilic fact rcmb (bdd-rfviii,sim) for inj 3000 unit.....	39	ORFADIN- nitisinone susp 4 mg/ml.....	13
NUWIQ- antihemophilic fact rcmb (bdd-rfviii,sim) for inj 4000 unit.....	39	ORIAHNN- elagolix-estradiol-noreth 300-1-0.5mg & elagolix 300mg cap pack.....	7
nystatin cream 100000 unit/gm.....	42	ORILISSA- elagolix sodium tab 150 mg (base equiv).....	13
nystatin oint 100000 unit/gm.....	42	ORILISSA- elagolix sodium tab 200 mg (base equiv).....	13
NYVEPRIA- pegfilgrastim-apgf soln prefilled syringe 6 mg/0.6ml.....	34	orphenadrine citrate tab er 12hr 100 mg.....	32
O		OTEZLA- apremilast tab 30 mg.....	30
OBIZUR- antihemophilic factor (recomb porc) rpfviii for inj 500 unit.....	39	OTEZLA- apremilast tab starter therapy pack 10 mg & 20 mg & 30 mg.....	30
ODEFSEY- emtricitabine-rilpivirine-tenofovir af tab 200-25-25 mg.....	3	oxcarbazepine tab 150 mg (Trileptal).....	31
olanzapine tab 2.5 mg (Zyprexa).....	25	oxybutynin chloride syrup 5 mg/5ml.....	23
		oxybutynin chloride tab er 24hr 15 mg.....	23
		oxybutynin chloride tab er 24hr 5 mg (Ditropan xl).....	23
		oxybutynin chloride tab er 24hr 10 mg (Ditropan xl).....	23
		oxybutynin chloride tab 5 mg.....	23
		oxycodone hcl tab 10 mg.....	28
		oxycodone hcl tab 5 mg (Roxicodone).....	28
		oxycodone w/ acetaminophen tab 5-325 mg (Percocet).....	28
		OZEMPIC- semaglutide soln pen-inj 1 mg/dose (2 mg/1.5ml).....	10
		OZEMPIC- semaglutide soln pen-inj 1 mg/dose (4 mg/3ml).....	10
		OZEMPIC- semaglutide soln pen-inj 0.25 or 0.5 mg/dose (2 mg/1.5ml).....	10

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pantoprazole sodium ec tab 20 mg (base equiv) (Protonix).....	22	potassium chloride microencapsulated crys er tab 10 meq.....	33
pantoprazole sodium ec tab 40 mg (base equiv) (Protonix).....	22	potassium chloride microencapsulated crys er tab 20 meq.....	33
PAROMOMYCIN SULFATE- paromomycin sulfate cap 250 mg.....	1	potassium chloride tab er 10 meq (K-tab).....	33
paroxetine hcl tab 10 mg (Paxil).....	24	potassium chloride tab er 8 meq (600 mg).....	33
paroxetine hcl tab 20 mg (Paxil).....	24	pramipexole dihydrochloride tab 0.125 mg (Mirapex).....	32
paroxetine hcl tab 30 mg (Paxil).....	24	pramipexole dihydrochloride tab 0.25 mg (Mirapex).....	32
paroxetine hcl tab 40 mg (Paxil).....	24	pramipexole dihydrochloride tab 0.5 mg (Mirapex).....	32
PEGASYS- peginterferon alfa-2a inj 180 mcg/ml.....	3	pramipexole dihydrochloride tab 0.75 mg (Mirapex).....	32
PEGASYS- peginterferon alfa-2a inj 180 mcg/0.5ml.....	3	pramipexole dihydrochloride tab 1 mg (Mirapex).....	32
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm (Golytely).....	21	pramipexole dihydrochloride tab 1.5 mg (Mirapex).....	32
peg 3350-kcl-sod bicarb-nacl for soln 420 gm (Nulytely/flavor pack).....	21	pravastatin sodium tab 10 mg.....	18
penicillin v potassium tab 250 mg.....	1	pravastatin sodium tab 20 mg (Pravachol).....	18
penicillin v potassium tab 500 mg.....	1	pravastatin sodium tab 40 mg (Pravachol).....	18
perindopril erbumine tab 2 mg.....	16	pravastatin sodium tab 80 mg (Pravachol).....	18
perindopril erbumine tab 4 mg (Aceon).....	16	PREDNISOLONE ACETATE- prednisolone acetate ophth susp 1%.....	41
phendimetrazine tartrate tab 35 mg.....	26	PREDNISOLONE SODIUM PHOSP- prednisolone sodium phosphate ophth soln 1%.....	41
phenobarbital tab 15 mg.....	26	prednisolone sod phosphate oral soln 15 mg/5ml (base equiv).....	7
phenobarbital tab 30 mg.....	26	PREDNISON INTENSOL- prednisone conc 5 mg/ml.....	7
phenobarbital tab 60 mg.....	26	PREDNISON- prednisone oral soln 5 mg/5ml.....	7
phenobarbital tab 100 mg.....	26	prednisone tab 1 mg.....	7
phentermine hcl cap 15 mg.....	26	prednisone tab 2.5 mg.....	7
phentermine hcl cap 30 mg.....	26	prednisone tab 5 mg.....	7
phentermine hcl cap 37.5 mg (Adipex-p).....	26	prednisone tab 10 mg.....	7
phentermine hcl tab 37.5 mg (Adipex-p).....	26	prednisone tab 20 mg.....	7
pioglitazone hcl tab 15 mg (base equiv) (Actos).....	10	prednisone tab 50 mg.....	7
pioglitazone hcl tab 30 mg (base equiv) (Actos).....	10	prednisone tab therapy pack 5 mg (21).....	7
pioglitazone hcl tab 45 mg (base equiv) (Actos).....	10	prednisone tab therapy pack 5 mg (48).....	7
PIQRAY 250MG DAILY DOSE- alpelisib tab pack 250 mg daily dose (200 mg & 50 mg tabs).....	5	PREMARIN- estrogens, conjugated tab 0.3 mg.....	7
PIQRAY 300MG DAILY DOSE- alpelisib tab pack 300 mg daily dose (2x150 mg tab).....	5	PREMARIN- estrogens, conjugated tab 0.45 mg.....	7
PIQRAY 200MG DAILY DOSE- alpelisib tab therapy pack 200 mg daily dose.....	5	PREMARIN- estrogens, conjugated tab 0.625 mg.....	7
PLEGRIDY- peginterferon beta-1a im soln prefilled syr 125 mcg/0.5ml.....	27	PREMARIN- estrogens, conjugated tab 0.9 mg.....	7
PLEGRIDY- peginterferon beta-1a soln pen-injector 125 mcg/0.5ml.....	27	PREMARIN- estrogens, conjugated tab 1.25 mg.....	7
PLEGRIDY- peginterferon beta-1a soln prefilled syringe 125 mcg/0.5ml.....	27	PREMPHASE- conj est 0.625(14)/conj est-medroxypro ac tab 0.625-5mg(14).....	7
PLEGRIDY STARTER PACK- peginterferon beta-1a soln pen-inj 63 & 94 mcg/0.5ml pack.....	27	PREMPRO- conjugated estrogen-medroxyprogesterone acetate tab 0.3-1.5 mg.....	7
PLEGRIDY STARTER PACK- peginterferon beta-1a soln pref syr 63 & 94 mcg/0.5ml pack.....	27	PREMPRO- conjugated estrogen-medroxyprogesterone acetate tab 0.45-1.5 mg.....	7
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1% (Polytrim).....	41	PREMPRO- conjugated estrogen-medroxyprogesterone acetate tab 0.625-2.5 mg.....	7
		PREMPRO- conjugated estrogen-medroxyprogesterone acetate tab 0.625-5 mg.....	8
		PRENATAL 19- prenatal vit w/ dss-fe fumarate-fa tab 29-1 mg.....	33

PRENATAL 19- prenatal vit w/ fe fumarate-fa chew tab 29-1 mg.....	33		
PRENATAL VITAMINS PLUS LO- prenatal vit w/ fe fumarate-fa tab 27-1 mg.....	33		
PREZISTA- darunavir ethanolate susp 100 mg/ml (base equiv).....	3		
PREZISTA- darunavir ethanolate tab 75 mg (base equiv).....	3		
PREZISTA- darunavir ethanolate tab 150 mg (base equiv).....	3		
PREZISTA- darunavir ethanolate tab 600 mg (base equiv).....	3		
PREZISTA- darunavir ethanolate tab 800 mg (base equiv).....	3		
PRIFTIN- rifapentine tab 150 mg.....	2		
primidone tab 50 mg (Mysoline).....	31		
primidone tab 250 mg (Mysoline).....	31		
prochlorperazine maleate tab 5 mg (base equivalent) (Compazine).....	25		
prochlorperazine maleate tab 10 mg (base equivalent) (Compazine).....	25		
PROCRIT- epoetin alfa inj 2000 unit/ml.....	34		
PROCRIT- epoetin alfa inj 3000 unit/ml.....	34		
PROCRIT- epoetin alfa inj 4000 unit/ml.....	34		
PROCRIT- epoetin alfa inj 10000 unit/ml.....	34		
PROCRIT- epoetin alfa inj 20000 unit/ml.....	34		
PROCRIT- epoetin alfa inj 40000 unit/ml.....	35		
PROFILNINE- factor ix complex for inj 500 unit.....	39		
PROFILNINE- factor ix complex for inj 1000 unit.....	39		
PROFILNINE- factor ix complex for inj 1500 unit.....	39		
PROGRAF- tacrolimus cap 0.5 mg.....	43		
PROGRAF- tacrolimus cap 1 mg.....	43		
PROGRAF- tacrolimus cap 5 mg.....	43		
PROGRAF- tacrolimus packet for susp 0.2 mg.....	43		
PROGRAF- tacrolimus packet for susp 1 mg.....	43		
promethazine-dm syrup 6.25-15 mg/5ml.....	19		
promethazine hcl syrup 6.25 mg/5ml.....	19		
promethazine hcl tab 12.5 mg.....	19		
promethazine hcl tab 25 mg.....	19		
promethazine hcl tab 50 mg.....	19		
promethazine w/ codeine syrup 6.25-10 mg/5ml.....	19		
propafenone hcl tab 150 mg.....	15		
PROPRANOLOL HCL- propranolol hcl oral soln 20 mg/5ml.....	14		
PROPRANOLOL HCL- propranolol hcl oral soln 40 mg/5ml.....	14		
propranolol hcl tab 10 mg.....	14		
propranolol hcl tab 20 mg.....	14		
propranolol hcl tab 40 mg.....	14		
PULMOZYME- dornase alfa inhal soln 1 mg/ml.....	21		
PURIXAN- mercaptopurine susp 2000 mg/100ml (20 mg/ ml).....	5		
		Q	
		quetiapine fumarate tab 25 mg (Seroquel).....	25
		quetiapine fumarate tab 50 mg (Seroquel).....	25
		quetiapine fumarate tab 100 mg (Seroquel).....	25
		quetiapine fumarate tab 200 mg (Seroquel).....	25
		quetiapine fumarate tab 300 mg (Seroquel).....	25
		quetiapine fumarate tab 400 mg (Seroquel).....	25
		quinapril hcl tab 5 mg (Accupril).....	16
		quinapril hcl tab 10 mg (Accupril).....	16
		quinapril hcl tab 20 mg (Accupril).....	16
		quinapril hcl tab 40 mg (Accupril).....	16
		QVAR REDIHALER- beclomethasone diprop hfa breath act inh aer 40 mcg/act.....	20
		QVAR REDIHALER- beclomethasone diprop hfa breath act inh aer 80 mcg/act.....	20
		R	
		ramipril cap 1.25 mg (Altace).....	16
		ramipril cap 2.5 mg (Altace).....	16
		ramipril cap 5 mg (Altace).....	16
		ramipril cap 10 mg (Altace).....	16
		RAPAMUNE- sirolimus oral soln 1 mg/ml.....	43
		REBIF- interferon beta-1a soln pref syr 22 mcg/0.5ml (12mu/ml).....	27
		REBIF- interferon beta-1a soln pref syr 44 mcg/0.5ml (24mu/ml).....	27
		REBIF REBIDOSE- interferon beta-1a soln auto-inj 22 mcg/0.5ml (12mu/ml).....	27
		REBIF REBIDOSE- interferon beta-1a soln auto-inj 44 mcg/0.5ml (24mu/ml).....	27
		REBIF REBIDOSE TITRATION- interferon beta-1a auto-inj 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml.....	27
		REBIF TITRATION PACK- interferon beta-1a pref syr 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml.....	28
		REBINYN- coagulation factor ix recomb glycopegylated for inj 500 unt.....	40
		REBINYN- coagulation factor ix recomb glycopegylated for inj 1000 unt.....	40
		REBINYN- coagulation factor ix recomb glycopegylated for inj 2000 unt.....	40
		RECOMBINATE- antihemophilic factor recomb (rfviii) for inj 220-400 unit.....	40
		RECOMBINATE- antihemophilic factor recomb (rfviii) for inj 401-800 unit.....	40
		RECOMBINATE- antihemophilic factor recomb (rfviii) for inj 801-1240 unit.....	40
		RECOMBINATE- antihemophilic factor recomb (rfviii) for inj 1241-1800 unit.....	40
		RECOMBINATE- antihemophilic factor recomb (rfviii) for inj 1801-2400 unit.....	40
		REDITREX- methotrexate soln prefilled syringe 7.5 mg/0.3ml.....	30

REDITREX- methotrexate soln prefilled syringe 10 mg/0.4ml.....	30	rizatriptan benzoate oral disintegrating tab 5 mg (base eq) (Maxalt-mlt).....	30
REDITREX- methotrexate soln prefilled syringe 12.5 mg/0.5ml.....	30	rizatriptan benzoate oral disintegrating tab 10 mg (base eq) (Maxalt-mlt).....	31
REDITREX- methotrexate soln prefilled syringe 15 mg/0.6ml.....	30	rizatriptan benzoate tab 5 mg (base equivalent) (Maxalt).....	31
REDITREX- methotrexate soln prefilled syringe 17.5 mg/0.7ml.....	30	rizatriptan benzoate tab 10 mg (base equivalent) (Maxalt).....	31
REDITREX- methotrexate soln prefilled syringe 20 mg/0.8ml.....	30	ropinirole hydrochloride tab 0.25 mg (Requip).....	32
REDITREX- methotrexate soln prefilled syringe 22.5 mg/0.9ml.....	30	ropinirole hydrochloride tab 0.5 mg (Requip).....	32
REDITREX- methotrexate soln prefilled syringe 25 mg/ml.....	30	ropinirole hydrochloride tab 1 mg (Requip).....	32
REPATHA- evolocumab subcutaneous soln prefilled syringe 140 mg/ml.....	18	ropinirole hydrochloride tab 2 mg (Requip).....	32
REPATHA PUSHTRONEX SYSTEM- evolocumab subcutaneous soln cartridge/infusor 420 mg/3.5ml.....	18	ropinirole hydrochloride tab 3 mg (Requip).....	32
REPATHA SURECLICK- evolocumab subcutaneous soln auto-injector 140 mg/ml.....	18	ropinirole hydrochloride tab 4 mg (Requip).....	32
RETACRIT- epoetin alfa-epbx inj 2000 unit/ml.....	35	ropinirole hydrochloride tab 5 mg (Requip).....	32
RETACRIT- epoetin alfa-epbx inj 3000 unit/ml.....	35	rosuvastatin calcium tab 5 mg (Crestor).....	18
RETACRIT- epoetin alfa-epbx inj 4000 unit/ml.....	35	rosuvastatin calcium tab 10 mg (Crestor).....	18
RETACRIT- epoetin alfa-epbx inj 10000 unit/ml.....	35	rosuvastatin calcium tab 20 mg (Crestor).....	18
RETACRIT- epoetin alfa-epbx inj 20000 unit/ml.....	35	rosuvastatin calcium tab 40 mg (Crestor).....	18
RETACRIT- epoetin alfa-epbx inj 40000 unit/ml.....	35	ROZLYTREK- entrectinib cap 100 mg.....	5
RETEVMO- selpercatinib cap 40 mg.....	5	ROZLYTREK- entrectinib cap 200 mg.....	5
RETEVMO- selpercatinib cap 80 mg.....	5	RUBRACA- rucaparib camsylate tab 200 mg (base equivalent).....	5
REVCovi- elapegedemase-lvlr im soln 2.4 mg/1.5ml (1.6 mg/ml).....	13	RUBRACA- rucaparib camsylate tab 250 mg (base equivalent).....	5
REVLIMID- lenalidomide cap 5 mg.....	43	RUBRACA- rucaparib camsylate tab 300 mg (base equivalent).....	5
REVLIMID- lenalidomide cap 10 mg.....	43	RYBELSUS- semaglutide tab 3 mg.....	10
REVLIMID- lenalidomide cap 15 mg.....	43	RYBELSUS- semaglutide tab 7 mg.....	10
REVLIMID- lenalidomide cap 20 mg.....	43	RYBELSUS- semaglutide tab 14 mg.....	10
REVLIMID- lenalidomide cap 25 mg.....	43	RYDAPT- midostaurin cap 25 mg.....	5
REVLIMID- lenalidomide caps 2.5 mg.....	43		
RINVOQ- upadacitinib tab er 24hr 15 mg.....	30	S	
risperidone tab 0.25 mg (Risperdal).....	25	selenium sulfide lotion 2.5%.....	42
risperidone tab 0.5 mg (Risperdal).....	25	SE-NATAL 19- prenatal vit w/ dss-fe fumarate-fa tab 29-1 mg.....	33
risperidone tab 1 mg (Risperdal).....	25	SE-NATAL 19- prenatal vit w/ fe fumarate-fa chew tab 29-1 mg.....	33
risperidone tab 2 mg (Risperdal).....	25	SEREVENT DISKUS- salmeterol xinafoate aer pow ba 50 mcg/dose (base equiv).....	20
risperidone tab 3 mg (Risperdal).....	25	sertraline hcl tab 25 mg (Zoloft).....	24
risperidone tab 4 mg (Risperdal).....	25	sertraline hcl tab 50 mg (Zoloft).....	24
RIXUBIS- coagulation factor ix (recombinant) for inj 250 unit.....	40	sertraline hcl tab 100 mg (Zoloft).....	24
RIXUBIS- coagulation factor ix (recombinant) for inj 500 unit.....	40	silver sulfadiazine cream 1% (Silvadene).....	42
RIXUBIS- coagulation factor ix (recombinant) for inj 1000 unit.....	40	SIMBRINZA- brinzolamide-brimonidine tartrate ophth susp 1-0.2%.....	41
RIXUBIS- coagulation factor ix (recombinant) for inj 2000 unit.....	40	SIMPONI- golimumab subcutaneous soln auto-injector 100 mg/ml.....	30
RIXUBIS- coagulation factor ix (recombinant) for inj 3000 unit.....	40	SIMPONI- golimumab subcutaneous soln prefilled syringe 100 mg/ml.....	30
		simvastatin tab 5 mg (Zocor).....	18
		simvastatin tab 10 mg (Zocor).....	18
		simvastatin tab 20 mg (Zocor).....	18

simvastatin tab 40 mg (Zocor)	18	STRIVERDI RESPIMAT- olodaterol hcl inhal aerosol soln	
simvastatin tab 80 mg (Zocor)	18	2.5 mcg/act (base equiv).....	21
SIVEXTRO- tedizolid phosphate tab 200 mg.....	4	SULFADIAZINE- sulfadiazine tab 500 mg.....	1
SKYRIZI- risankizumab-rzaa sol prefilled syringe 2 x 75		sulfamethoxazole-trimethoprim tab 400-80 mg	
mg/0.83ml kit.....	42	(Bactrim)	4
sodium chloride soln nebu 3%	19	sulfamethoxazole-trimethoprim tab 800-160 mg	
SOLIQUA 100/33- insulin glargine-lixisenatide sol pen-inj		(Bactrim ds)	4
100-33 unit-mcg/ml.....	10	sulindac tab 150 mg	30
SOOLANTRA- ivermectin cream 1%.....	42	sulindac tab 200 mg	30
sotalol hcl (afib/af) tab 80 mg (Betapace af)	14	sumatriptan succinate tab 25 mg (Imitrex)	31
sotalol hcl (afib/af) tab 120 mg (Betapace af)	14	sumatriptan succinate tab 50 mg (Imitrex)	31
sotalol hcl (afib/af) tab 160 mg (Betapace af)	14	sumatriptan succinate tab 100 mg (Imitrex)	31
sotalol hcl tab 240 mg	14	SUNOSI- solriamfetol hcl tab 75 mg (base equiv).....	26
sotalol hcl tab 80 mg (Betapace)	14	SUNOSI- solriamfetol hcl tab 150 mg (base equiv).....	26
sotalol hcl tab 120 mg (Betapace)	14	SUTENT- sunitinib malate cap 12.5 mg (base	
sotalol hcl tab 160 mg (Betapace)	14	equivalent).....	5
SOVALDI- sofosbuvir pellet pack 150 mg.....	3	SUTENT- sunitinib malate cap 25 mg (base equivalent)....	5
SOVALDI- sofosbuvir pellet pack 200 mg.....	3	SUTENT- sunitinib malate cap 37.5 mg (base	
SOVALDI- sofosbuvir tab 200 mg.....	3	equivalent).....	5
SOVALDI- sofosbuvir tab 400 mg.....	3	SUTENT- sunitinib malate cap 50 mg (base equivalent)....	5
SPIRIVA HANDIHALER- tiotropium bromide monohydrate		SYMBICORT- budesonide-formoterol fumarate dihyd	
inhal cap 18 mcg (base equiv).....	21	aerosol 80-4.5 mcg/act.....	21
SPIRIVA RESPIMAT- tiotropium bromide monohydrate		SYMBICORT- budesonide-formoterol fumarate dihyd	
inhal aerosol 1.25 mcg/act.....	21	aerosol 160-4.5 mcg/act.....	21
SPIRIVA RESPIMAT- tiotropium bromide monohydrate		SYMDEKO- tezacaftor-ivacaftor 50-75 mg & ivacaftor 75	
inhal aerosol 2.5 mcg/act.....	21	mg tab tbpk.....	21
spironolactone tab 25 mg (Aldactone)	17	SYMDEKO- tezacaftor-ivacaftor 100-150 mg & ivacaftor	
spironolactone tab 50 mg (Aldactone)	17	150 mg tab tbpk.....	21
spironolactone tab 100 mg (Aldactone)	17	SYMJEPI- epinephrine soln prefilled syringe 0.15	
SPRYCEL- dasatinib tab 20 mg.....	5	mg/0.3ml (1:2000).....	17
SPRYCEL- dasatinib tab 50 mg.....	5	SYMJEPI- epinephrine solution prefilled syringe 0.3	
SPRYCEL- dasatinib tab 70 mg.....	5	mg/0.3ml (1:1000).....	17
SPRYCEL- dasatinib tab 80 mg.....	5	SYMPROIC- naldemedine tosylate tab 0.2 mg (base	
SPRYCEL- dasatinib tab 100 mg.....	5	equivalent).....	22
SPRYCEL- dasatinib tab 140 mg.....	5	SYMTUZA- darunavir-cobic-emtricitab-tenofov af tab	
stannous fluoride conc 0.63%	41	800-150-200-10 mg.....	3
STELARA- ustekinumab inj 45 mg/0.5ml.....	42	SYNJARDY- empagliflozin-metformin hcl tab 12.5-1000	
STELARA- ustekinumab soln prefilled syringe 45		mg.....	10
mg/0.5ml.....	42	SYNJARDY- empagliflozin-metformin hcl tab 12.5-500	
STELARA- ustekinumab soln prefilled syringe 90 mg/		mg.....	10
ml.....	42	SYNJARDY- empagliflozin-metformin hcl tab 5-500	
STIMATE- desmopressin acetate nasal soln 1.5 mg/		mg.....	10
ml.....	13	SYNJARDY- empagliflozin-metformin hcl tab 5-1000	
STIOLTO RESPIMAT- tiotropium br-olodaterol inhal aero		mg.....	10
soln 2.5-2.5 mcg/act.....	21	SYNJARDY XR- empagliflozin-metformin hcl tab er 24hr	
STRENSIQ- asfotase alfa subcutaneous inj 18		5-1000 mg.....	10
mg/0.45ml.....	13	SYNJARDY XR- empagliflozin-metformin hcl tab er 24hr	
STRENSIQ- asfotase alfa subcutaneous inj 28		10-1000 mg.....	10
mg/0.7ml.....	13	SYNJARDY XR- empagliflozin-metformin hcl tab er 24hr	
STRENSIQ- asfotase alfa subcutaneous inj 40 mg/ml.....	13	12.5-1000 mg.....	10
STRENSIQ- asfotase alfa subcutaneous inj 80		SYNJARDY XR- empagliflozin-metformin hcl tab er 24hr	
mg/0.8ml.....	13	25-1000 mg.....	10

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TABLOID- thioguanine tab 40 mg.....	5	topiramate tab 50 mg (Topamax).....	31
TABRECTA- capmatinib hcl tab 150 mg.....	5	topiramate tab 100 mg (Topamax).....	31
TABRECTA- capmatinib hcl tab 200 mg.....	5	topiramate tab 200 mg (Topamax).....	31
TAFINLAR- dabrafenib mesylate cap 50 mg (base equivalent).....	6	torsemide tab 5 mg (Demadex).....	17
TAFINLAR- dabrafenib mesylate cap 75 mg (base equivalent).....	6	torsemide tab 10 mg (Demadex).....	17
TAKHZYRO- lanadelumab-flyo inj 300 mg/2ml (150 mg/ml).....	40	torsemide tab 20 mg (Demadex).....	17
TALZENNA- talazoparib tosylate cap 0.25 mg (base equivalent).....	6	torsemide tab 100 mg (Demadex).....	17
TALZENNA- talazoparib tosylate cap 1 mg (base equivalent).....	6	TOUJEO MAX SOLOSTAR- insulin glargine soln pen-injector 300 unit/ml (2 unit dial).....	12
tamoxifen citrate tab 10 mg (base equivalent).....	6	TOUJEO SOLOSTAR- insulin glargine soln pen-injector 300 unit/ml (1 unit dial).....	12
tamsulosin hcl cap 0.4 mg (Flomax).....	23	TRACLEER- bosentan tab for oral susp 32 mg.....	18
TASIGNA- nilotinib hcl cap 50 mg (base equivalent).....	6	tramadol-acetaminophen tab 37.5-325 mg (Ultracet).....	28
TASIGNA- nilotinib hcl cap 150 mg (base equivalent).....	6	tramadol hcl tab 50 mg (Ultram).....	28
TASIGNA- nilotinib hcl cap 200 mg (base equivalent).....	6	trandolapril tab 1 mg (Mavik).....	17
TAZORAC- tazarotene cream 0.05%.....	42	trandolapril tab 2 mg (Mavik).....	17
TAZORAC- tazarotene gel 0.05%.....	42	trandolapril tab 4 mg (Mavik).....	17
TAZORAC- tazarotene gel 0.1%.....	42	trazodone hcl tab 50 mg.....	24
telmisartan tab 80 mg (Micardis).....	16	trazodone hcl tab 100 mg.....	24
temazepam cap 15 mg (Restoril).....	26	trazodone hcl tab 150 mg.....	24
temazepam cap 30 mg (Restoril).....	26	TRELEGY ELLIPTA- fluticasone-umeclidinium-vilanterol aepb 100-62.5-25 mcg/inh.....	21
TEMIXYS- lamivudine-tenofovir disoproxil fumarate tab 300-300 mg.....	3	TRELEGY ELLIPTA- fluticasone-umeclidinium-vilanterol aepb 200-62.5-25 mcg/inh.....	21
terazosin hcl cap 1 mg (base equivalent).....	16	TREMFYA- guselkumab soln pen-injector 100 mg/ml.....	42
terazosin hcl cap 2 mg (base equivalent).....	16	TREMFYA- guselkumab soln prefilled syringe 100 mg/ml.....	42
terazosin hcl cap 5 mg (base equivalent).....	16	TRESIBA FLEXTOUCH- insulin degludec soln pen-injector 100 unit/ml.....	12
terazosin hcl cap 10 mg (base equivalent).....	17	TRESIBA FLEXTOUCH- insulin degludec soln pen-injector 200 unit/ml.....	12
terbinafine hcl tab 250 mg (Lamisil).....	2	TRESIBA- insulin degludec inj 100 unit/ml.....	12
TEST STRIPS – CONTOUR, CONTOUR NEXT.....	43	TRETTEN- coagulation factor xiii a-subunit for inj 2000-3125 unit.....	40
tetracaine hcl ophth soln 0.5%.....	41	TREXALL- methotrexate sodium tab 5 mg (base equiv).....	6
THALOMID- thalidomide cap 50 mg.....	43	TREXALL- methotrexate sodium tab 7.5 mg (base equiv).....	6
THALOMID- thalidomide cap 100 mg.....	43	TREXALL- methotrexate sodium tab 10 mg (base equiv).....	6
THALOMID- thalidomide cap 150 mg.....	43	TREXALL- methotrexate sodium tab 15 mg (base equiv).....	6
THALOMID- thalidomide cap 200 mg.....	43	triamcinolone acetonide cream 0.025%.....	42
thyroid tab 15 mg (1/4 grain) (Armour thyroid).....	12	triamcinolone acetonide cream 0.1%.....	42
thyroid tab 30 mg (1/2 grain) (Armour thyroid).....	12	triamcinolone acetonide cream 0.5%.....	42
timolol maleate ophth soln 0.25% (Timoptic).....	41	triamcinolone acetonide oint 0.025%.....	42
timolol maleate ophth soln 0.5% (Timoptic).....	41	triamcinolone acetonide oint 0.1%.....	42
TIVICAY- dolutegravir sodium tab 10 mg (base equiv).....	3	triamcinolone acetonide oint 0.5%.....	42
TIVICAY- dolutegravir sodium tab 25 mg (base equiv).....	3	triamterene & hydrochlorothiazide cap 37.5-25 mg (Dyazide).....	17
TIVICAY- dolutegravir sodium tab 50 mg (base equiv).....	3	triamterene & hydrochlorothiazide tab 37.5-25 mg (Maxzide-25).....	17
TIVICAY PD- dolutegravir sodium tab for oral susp 5 mg (base equiv).....	3		
tizanidine hcl tab 2 mg (base equivalent).....	32		
tizanidine hcl tab 4 mg (base equivalent) (Zanaflex).....	32		
tobramycin ophth soln 0.3% (Tobrex).....	41		
topiramate tab 25 mg (Topamax).....	31		

triamterene & hydrochlorothiazide tab 75-50 mg (Maxzide)	17	valsartan-hydrochlorothiazide tab 160-25 mg (Diovan hct)	17
TRIFLURIDINE- trifluridine ophth soln 1%.....	41	valsartan-hydrochlorothiazide tab 320-12.5 mg (Diovan hct)	17
trihexyphenidyl hcl tab 2 mg	32	valsartan-hydrochlorothiazide tab 320-25 mg (Diovan hct)	17
trihexyphenidyl hcl tab 5 mg	32	valsartan tab 40 mg (Diovan)	17
TRIJARDY XR- empagliflozin-linagliptin-metformin tab er 24hr 12.5-2.5-1000mg.....	10	valsartan tab 80 mg (Diovan)	17
TRIJARDY XR- empagliflozin-linagliptin-metformin tab er 24hr 5-2.5-1000mg.....	10	valsartan tab 160 mg (Diovan)	17
TRIJARDY XR- empagliflozin-linagliptin-metformin tab er 24hr 10-5-1000 mg.....	10	valsartan tab 320 mg (Diovan)	17
TRIJARDY XR- empagliflozin-linagliptin-metformin tab er 24hr 25-5-1000 mg.....	10	VELPHORO- sucroferric oxyhydroxide chew tab 500 mg.....	22
TRIKAFTA- elexacaf-tezacaf-ivacaf 100-50-75 mg & ivacaftor 150 mg tbpk.....	21	VELTASSA- patiomer sorbitex calcium for susp packet 8.4 gm (base eq).....	43
trimethoprim tab 100 mg	4	VELTASSA- patiomer sorbitex calcium for susp packet 16.8 gm (base eq).....	43
TRIUMEQ- abacavir-dolutegravir-lamivudine tab 600-50-300 mg.....	3	VELTASSA- patiomer sorbitex calcium for susp packet 25.2 gm (base eq).....	43
TRULANCE- plecanatide tab 3 mg.....	22	VENCLEXTA STARTING PACK- venetoclax tab therapy starter pack 10 & 50 & 100 mg.....	6
TRULICITY- dulaglutide soln pen-injector 0.75 mg/0.5ml.....	10	VENCLEXTA- venetoclax tab 10 mg.....	6
TRULICITY- dulaglutide soln pen-injector 1.5 mg/0.5ml.....	10	VENCLEXTA- venetoclax tab 50 mg.....	6
TRULICITY- dulaglutide soln pen-injector 3 mg/0.5ml.....	10	VENCLEXTA- venetoclax tab 100 mg.....	6
TRULICITY- dulaglutide soln pen-injector 4.5 mg/0.5ml.....	10	venlafaxine hcl cap er 24hr 37.5 mg (base equivalent) (Effexor xr)	24
TYMLOS- abaloparatide subcutaneous soln pen-injector 3120 mcg/1.56ml.....	13	venlafaxine hcl cap er 24hr 75 mg (base equivalent) (Effexor xr)	24
U		venlafaxine hcl cap er 24hr 150 mg (base equivalent) (Effexor xr)	24
UDENYCA- pegfilgrastim-cbqv soln prefilled syringe 6 mg/0.6ml.....	35	venlafaxine hcl tab 25 mg (base equivalent)	24
UPTRAVI- selezipag tab 200 mcg.....	18	venlafaxine hcl tab 37.5 mg (base equivalent)	24
UPTRAVI- selezipag tab 400 mcg.....	18	venlafaxine hcl tab 50 mg (base equivalent)	24
UPTRAVI- selezipag tab 600 mcg.....	18	venlafaxine hcl tab 75 mg (base equivalent)	24
UPTRAVI- selezipag tab 800 mcg.....	18	venlafaxine hcl tab 100 mg (base equivalent)	25
UPTRAVI- selezipag tab 1000 mcg.....	18	VENTOLIN HFA- albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv).....	21
UPTRAVI- selezipag tab 1200 mcg.....	18	verapamil hcl tab er 120 mg (Calan sr)	14
UPTRAVI- selezipag tab 1400 mcg.....	18	verapamil hcl tab er 180 mg (Calan sr)	14
UPTRAVI- selezipag tab 1600 mcg.....	18	verapamil hcl tab er 240 mg (Calan sr)	14
UPTRAVI- selezipag tab therapy pack 200 mcg (140) & 800 mcg (60).....	18	verapamil hcl tab 40 mg	14
V		verapamil hcl tab 80 mg (Calan)	14
valacyclovir hcl tab 1 gm (Valtrex)	3	verapamil hcl tab 120 mg (Calan)	14
valacyclovir hcl tab 500 mg (Valtrex)	3	VERZENIO- abemaciclib tab 50 mg.....	6
VALCHLOR- mechlorethamine hcl gel 0.016% (base equivalent).....	42	VERZENIO- abemaciclib tab 100 mg.....	6
valsartan-hydrochlorothiazide tab 80-12.5 mg (Diovan hct)	17	VERZENIO- abemaciclib tab 150 mg.....	6
valsartan-hydrochlorothiazide tab 160-12.5 mg (Diovan hct)	17	VERZENIO- abemaciclib tab 200 mg.....	6
		VIBERZI- eluxadoline tab 75 mg.....	22
		VIBERZI- eluxadoline tab 100 mg.....	22
		VICTOZA- liraglutide soln pen-injector 18 mg/3ml (6 mg/ml).....	11
		VIMPAT- lacosamide oral solution 10 mg/ml.....	31
		VIMPAT- lacosamide tab 50 mg.....	31
		VIMPAT- lacosamide tab 100 mg.....	31

VIMPAT- lacosamide tab 150 mg.....	32	WILATE- antihemophilic factor/vwf (human) for inj 500-500 unit kit.....	40
VIMPAT- lacosamide tab 200 mg.....	32	WILATE- antihemophilic factor/vwf (human) for inj 1000-1000 unit kit.....	40
VIREAD- tenofovir disoproxil fumarate oral powder 40 mg/gm.....	3	X	
VIREAD- tenofovir disoproxil fumarate tab 150 mg.....	3	XALKORI- crizotinib cap 200 mg.....	6
VIREAD- tenofovir disoproxil fumarate tab 200 mg.....	3	XALKORI- crizotinib cap 250 mg.....	6
VIREAD- tenofovir disoproxil fumarate tab 250 mg.....	3	XARELTO- rivaroxaban tab 2.5 mg.....	35
VITRAKVI- larotrectinib sulfate cap 25 mg (base equivalent).....	6	XARELTO- rivaroxaban tab 10 mg.....	35
VITRAKVI- larotrectinib sulfate cap 100 mg (base equivalent).....	6	XARELTO- rivaroxaban tab 15 mg.....	35
VITRAKVI- larotrectinib sulfate oral soln 20 mg/ml (base equivalent).....	6	XARELTO- rivaroxaban tab 20 mg.....	35
VONVENDI- von willebrand factor (recombinant) for inj 650 unit.....	40	XARELTO STARTER PACK- rivaroxaban tab starter therapy pack 15 mg & 20 mg.....	35
VONVENDI- von willebrand factor (recombinant) for inj 1300 unit.....	40	XELJANZ- tofacitinib citrate oral soln 1 mg/ml (base equivalent).....	30
VOSEVI- sofosbuvir-velpatasvir-voxilaprevir tab 400-100-100 mg.....	3	XELJANZ- tofacitinib citrate tab 5 mg (base equivalent).....	30
VOTRIENT- pazopanib hcl tab 200 mg (base equiv).....	6	XELJANZ- tofacitinib citrate tab 10 mg (base equivalent).....	30
VYNDAMAX- tafamidis cap 61 mg.....	18	XELJANZ XR- tofacitinib citrate tab er 24hr 11 mg (base equivalent).....	30
VYNDAQEL- tafamidis meglumine (cardiac) cap 20 mg.....	18	XELJANZ XR- tofacitinib citrate tab er 24hr 22 mg (base equivalent).....	30
VYVANSE- lisdexamfetamine dimesylate cap 10 mg.....	26	XIFAXAN- rifaximin tab 550 mg.....	4
VYVANSE- lisdexamfetamine dimesylate cap 20 mg.....	26	XIGDUO XR- dapagliflozin-metformin hcl tab er 24hr 2.5-1000 mg.....	11
VYVANSE- lisdexamfetamine dimesylate cap 30 mg.....	26	XIGDUO XR- dapagliflozin-metformin hcl tab er 24hr 5-500 mg.....	11
VYVANSE- lisdexamfetamine dimesylate cap 40 mg.....	26	XIGDUO XR- dapagliflozin-metformin hcl tab er 24hr 5-1000 mg.....	11
VYVANSE- lisdexamfetamine dimesylate cap 50 mg.....	26	XIGDUO XR- dapagliflozin-metformin hcl tab er 24hr 10-500 mg.....	11
VYVANSE- lisdexamfetamine dimesylate cap 60 mg.....	26	XIGDUO XR- dapagliflozin-metformin hcl tab er 24hr 10-1000 mg.....	11
VYVANSE- lisdexamfetamine dimesylate cap 70 mg.....	26	XTAMPZA ER- oxycodone cap er 12hr abuse-deterrent 9 mg.....	28
VYVANSE- lisdexamfetamine dimesylate chew tab 10 mg.....	26	XTAMPZA ER- oxycodone cap er 12hr abuse-deterrent 13.5 mg.....	28
VYVANSE- lisdexamfetamine dimesylate chew tab 20 mg.....	26	XTAMPZA ER- oxycodone cap er 12hr abuse-deterrent 18 mg.....	29
VYVANSE- lisdexamfetamine dimesylate chew tab 30 mg.....	26	XTAMPZA ER- oxycodone cap er 12hr abuse-deterrent 27 mg.....	29
VYVANSE- lisdexamfetamine dimesylate chew tab 40 mg.....	26	XTAMPZA ER- oxycodone cap er 12hr abuse-deterrent 36 mg.....	29
VYVANSE- lisdexamfetamine dimesylate chew tab 50 mg.....	26	XTANDI- enzalutamide cap 40 mg.....	6
VYVANSE- lisdexamfetamine dimesylate chew tab 60 mg.....	26	XTANDI- enzalutamide tab 40 mg.....	6
W		XTANDI- enzalutamide tab 80 mg.....	6
warfarin sodium tab 1 mg (Coumadin).....	35	XULTOPHY 100/3.6- insulin degludec-liraglutide sol pen- inj 100-3.6 unit-mg/ml.....	11
warfarin sodium tab 2 mg (Coumadin).....	35	XYNTHA- antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 1000 unit.....	40
warfarin sodium tab 2.5 mg (Coumadin).....	35		
warfarin sodium tab 3 mg (Coumadin).....	35		
warfarin sodium tab 4 mg (Coumadin).....	35		
warfarin sodium tab 5 mg (Coumadin).....	35		
warfarin sodium tab 6 mg (Coumadin).....	35		
warfarin sodium tab 7.5 mg (Coumadin).....	35		
warfarin sodium tab 10 mg (Coumadin).....	35		

XYNTHA- antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 2000 unit.....	40	zonisamide cap 50 mg	32
XYNTHA- antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 250 unit.....	40	zonisamide cap 25 mg (Zonegran)	32
XYNTHA- antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 500 unit.....	40	ZORTRESS- everolimus tab 0.25 mg.....	43
XYNTHA SOLOFUSE- antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 1000 unit.....	40	ZORTRESS- everolimus tab 0.5 mg.....	43
XYNTHA SOLOFUSE- antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 2000 unit.....	40	ZORTRESS- everolimus tab 0.75 mg.....	44
XYNTHA SOLOFUSE- antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 3000 unit.....	40	ZORTRESS- everolimus tab 1 mg.....	44
XYNTHA SOLOFUSE- antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 250 unit.....	40	ZYCLARA- imiquimod cream 3.75%.....	42
XYNTHA SOLOFUSE- antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 500 unit.....	40	ZYCLARA PUMP- imiquimod cream 2.5%.....	42
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Y		ZYLET- loteprednol etabonate-tobramycin ophth susp 0.5-0.3%.....	41
YONSA- abiraterone acetate tab 125 mg.....	6	ZYTIGA- abiraterone acetate tab 500 mg.....	6
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zaleplon cap 5 mg (Sonata)	26		
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ZARXIO- filgrastim-sndz soln prefilled syringe 300 mcg/0.5ml.....	35		
ZARXIO- filgrastim-sndz soln prefilled syringe 480 mcg/0.8ml.....	35		
ZELBORAF- vemurafenib tab 240 mg.....	6		
ZENPEP- pancrelipase (lip-prot-amyl) dr cap 3000-10000-14000 unit.....	22		
ZENPEP- pancrelipase (lip-prot-amyl) dr cap 5000-17000-24000 unit.....	22		
ZENPEP- pancrelipase (lip-prot-amyl) dr cap 10000-32000-42000 unit.....	22		
ZENPEP- pancrelipase (lip-prot-amyl) dr cap 15000-47000-63000 unit.....	22		
ZENPEP- pancrelipase (lip-prot-amyl) dr cap 20000-63000-84000 unit.....	22		
ZENPEP- pancrelipase (lip-prot-amyl) dr cap 25000-79000-105000 unit.....	22		
ZENPEP- pancrelipase (lip-prot-amyl) dr cap 40000-126000-168000 unit.....	22		
ZEPOSIA 7-DAY STARTER PAC- ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg.....	28		
ZEPOSIA- ozanimod hcl cap 0.92 mg.....	28		
ZEPOSIA STARTER KIT- ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg & 30 x 0.92 mg.....	28		
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