

Multi-Tier Basic Drug List

July 2022

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 2022 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)			•		
DIFICID - fidaxomicin tab 200 mg					
DIFICID - fidaxomicin for susp 40 mg/ml					
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					
ANTIMYCOBACTERIAL AGENTS					
isoniazid tab 300 mg					
PRIFTIN - rifapentine tab 150 mg					
ANTIFUNGALS					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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 - bicitegravir-emtricitabine-tenofovir af tab 30-120-15 mg			•		
BIKTARVY - bicitegravir-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	•	•	•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
EPCLUSA - sofosbuvir-velpatasvir pellet pack 150-37.5 mg	•	•	•		
EPCLUSA - sofosbuvir-velpatasvir pellet pack 200-50 mg	•	•	•		
GENVOYA - elvitegrav-cobic-emtricitab-tenofovir 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			•		
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)			•		
MAVYRET - glecaprevir-pibrentasvir tab 100-40 mg	•	•	•		
MAVYRET - glecaprevir-pibrentasvir pellet pack 50-20 mg	•	•	•		
nevirapine tab 200 mg (Viramune)			•		
NORVIR - ritonavir oral soln 80 mg/ml			•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
NORVIR - ritonavir powder packet 100 mg			•		
ODEFSEY - emtricitabine-rilpivirine-tenofovir af tab 200-25-25 mg			•		
PEGASYS - peginterferon alfa-2a soln prefilled syr 180 mcg/0.5ml	•	•			
PEGASYS - peginterferon alfa-2a inj 180 mcg/ml	•	•			
PREZISTA - darunavir oral susp 100 mg/ml			•		
PREZISTA - darunavir tab 75 mg			•		
PREZISTA - darunavir tab 150 mg			•		
PREZISTA - darunavir tab 600 mg			•		
PREZISTA - darunavir tab 800 mg			•		
SOVALDI - sofosbuvir tab 200 mg	•	•	•		
SOVALDI - sofosbuvir tab 400 mg	•	•	•		
SOVALDI - sofosbuvir pellet pack 150 mg	•	•	•		
SOVALDI - sofosbuvir pellet pack 200 mg	•	•	•		
SYM TUZA - 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)			•		
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			•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
valacyclovir hcl tab 500 mg (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	•	•	•		
ANTHELMINTICS					
BENZNIDAZOLE - benznidazole tab 12.5 mg					
BENZNIDAZOLE - benznidazole tab 100 mg					
ANTI-INFECTIVE AGENTS - MISC.					
ALINIA - nitazoxanide for susp 100 mg/5ml			•		
clindamycin hcl cap 75 mg (Cleocin)					
clindamycin hcl cap 150 mg (Cleocin)					
clindamycin hcl cap 300 mg (Cleocin)					
IMPAVIDO - miltefosine cap 50 mg					
metronidazole tab 250 mg (Flagyl)					
metronidazole tab 500 mg (Flagyl)					
sulfamethoxazole-trimethoprim tab 400-80 mg (Bactrim)					
sulfamethoxazole-trimethoprim tab 800-160 mg (Bactrim ds)					
XIFAXAN - rifaximin tab 550 mg			•		

ANTINEOPLASTIC AGENTS

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
ANTINEOPLASTICS											
ACTIMMUNE - interferon gamma-1b inj 100 mcg/0.5ml (2000000 unit/0.5ml)	•					INTRON A - interferon alfa-2b for inj 18000000 unit	•				
anastrozole tab 1 mg (Arimidex)					•	INTRON A - interferon alfa-2b for inj 50000000 unit	•				
AYVAKIT - avapritinib tab 25 mg	•	•	•			KISQALI - ribociclib succinate tab pack 200 mg daily dose	•	•	•		
AYVAKIT - avapritinib tab 50 mg	•	•	•			KISQALI - ribociclib succinate tab pack 400 mg daily dose (200 mg tab)	•	•	•		
AYVAKIT - avapritinib tab 100 mg	•	•	•			KISQALI - ribociclib succinate tab pack 600 mg daily dose (200 mg tab)	•	•	•		
AYVAKIT - avapritinib tab 200 mg	•	•	•			KISQALI FEMARA 200 DOSE - ribociclib 200 mg dose (200 mg tab) & letrozole 2.5 mg tbpk	•	•	•		
AYVAKIT - avapritinib tab 300 mg	•	•	•			KISQALI FEMARA 400 DOSE - ribociclib 400 mg dose (200 mg tab) & letrozole 2.5 mg tbpk	•	•	•		
bicalutamide tab 50 mg (Casodex)						KISQALI FEMARA 600 DOSE - ribociclib 600 mg dose (200 mg tab) & letrozole 2.5 mg tbpk	•	•	•		
CABOMETYX - cabozantinib s-malate tab 20 mg (base equivalent)	•	•	•			LENVIMA 10 MG DAILY DOSE - lenvatinib cap therapy pack 10 mg (10 mg daily dose)	•	•	•		
CABOMETYX - cabozantinib s-malate tab 40 mg (base equivalent)	•	•	•			LENVIMA 12MG DAILY DOSE - lenvatinib cap therapy pack 3 x 4 mg (12 mg daily dose)	•	•	•		
CABOMETYX - cabozantinib s-malate tab 60 mg (base equivalent)	•	•	•			LENVIMA 14 MG DAILY DOSE - lenvatinib cap therapy pack 10 & 4 mg (14 mg daily dose)	•	•	•		
COTELLIC - cobimetinib fumarate tab 20 mg (base equivalent)	•	•	•			LENVIMA 18 MG DAILY DOSE - lenvatinib cap ther pack 10 mg & 2 x 4 mg (18 mg daily dose)	•	•	•		
EMCYT - estramustine phosphate sodium cap 140 mg	•					LENVIMA 20 MG DAILY DOSE - lenvatinib cap therapy pack 2 x 10 mg (20 mg daily dose)	•	•	•		
ERIVEDGE - vismodegib cap 150 mg	•	•	•			LENVIMA 24 MG DAILY DOSE - lenvatinib cap ther pack 2 x 10 mg & 4 mg (24 mg daily dose)	•	•	•		
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 for inj 10000000 unit	•										

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
LENVIMA 4 MG DAILY DOSE - lenvatinib cap therapy pack 4 mg (4 mg daily dose)	•	•	•			PIQRAY 300MG DAILY DOSE - alpelisib tab pack 300 mg daily dose (2x150 mg tab)	•	•	•		
LENVIMA 8 MG DAILY DOSE - lenvatinib cap therapy pack 2 x 4 mg (8 mg daily dose)	•	•	•			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	•	•	•			TABLOID - thioguanine tab 40 mg	•				
PIQRAY 200MG DAILY DOSE - alpelisib tab therapy pack 200 mg daily dose	•	•	•			TABRECTA - capmatinib hcl tab 150 mg	•	•	•		
PIQRAY 250MG DAILY DOSE - alpelisib tab pack 250 mg daily dose (200 mg & 50 mg tabs)	•	•	•			TABRECTA - capmatinib hcl tab 200 mg	•	•	•		
						TAFINLAR - dabrafenib mesylate cap 50 mg (base equivalent)	•	•	•		
						TAFINLAR - dabrafenib mesylate cap 75 mg (base equivalent)	•	•	•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
TALZENNA - talazoparib tosylate cap 0.25 mg (base equivalent)	•	•	•		
TALZENNA - talazoparib tosylate cap 0.5 mg (base equivalent)	•	•	•		
TALZENNA - talazoparib tosylate cap 0.75 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)	•	•	•		
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	•	•	•		
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)	•	•	•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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	•	•	•		
ZEJULA - niraparib tosylate cap 100 mg (base equivalent)	•	•	•		
ZELBORAF - vemurafenib tab 240 mg	•	•	•		
ENDOCRINE AND METABOLIC DRUGS					
CORTICOSTEROIDS					
dexamethasone tab 1.5 mg					
dexamethasone tab 4 mg					
dexamethasone tab 6 mg					
fludrocortisone acetate tab 0.1 mg					
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					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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%)					
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)					
MYFEMBREE - relugolix-estradiol-norethindrone acetate tab 40-1-0.5 mg		•	•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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					
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			•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg			•			BAQSIMI TWO PACK - glucagon nasal powder 3 mg/dose					
norethindrone & ethinyl estradiol tab 1 mg-35 mcg (Norinyl 1+35)			•			FARXIGA - dapagliflozin propanediol tab 5 mg (base equivalent)			•		
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg (Loestrin 1/20-21)			•			FARXIGA - dapagliflozin propanediol tab 10 mg (base equivalent)			•		
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg (Loestrin fe 1/20)			•		•	glimepiride tab 1 mg (Amaryl)					
norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg (Loestrin fe 1.5/30)			•			glimepiride tab 2 mg (Amaryl)					
norethindrone tab 0.35 mg (Nor-qd)			•		•	glimepiride tab 4 mg (Amaryl)					
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg (Ortho-cyclen)			•			glipizide tab er 24hr 2.5 mg (Glucotrol xl)					
norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg (Ortho tri-cyclen lo)			•			glipizide tab er 24hr 5 mg (Glucotrol xl)					
norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg (Ortho tri-cyclen)			•		•	glipizide tab er 24hr 10 mg (Glucotrol xl)					
NUVARING - etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr			•		•	glipizide tab 5 mg (Glucotrol)					
PROGESTINS						glipizide tab 10 mg (Glucotrol)					
medroxyprogesterone acetate tab 2.5 mg (Provera)						GLUCAGON EMERGENCY KIT FO - glucagon hcl for inj 1 mg					
medroxyprogesterone acetate tab 5 mg (Provera)						glyburide micronized tab 1.5 mg (Glynase)					
medroxyprogesterone acetate tab 10 mg (Provera)						glyburide micronized tab 3 mg (Glynase)					
ANTIDIABETICS						glyburide micronized tab 6 mg (Glynase)					
BAQSIMI ONE PACK - glucagon nasal powder 3 mg/dose						glyburide tab 1.25 mg					
						glyburide tab 2.5 mg					
						glyburide tab 5 mg					
						glyburide-metformin tab 1.25-250 mg (Glucoavance)					
						glyburide-metformin tab 2.5-500 mg (Glucoavance)					
						glyburide-metformin tab 5-500 mg (Glucoavance)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
GLYXAMBI - empagliflozin-linagliptin tab 10-5 mg			•		
GLYXAMBI - empagliflozin-linagliptin tab 25-5 mg			•		
GVOKE HYPOPEN 1-PACK - glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml					
GVOKE HYPOPEN 1-PACK - glucagon subcutaneous solution auto-injector 1 mg/0.2ml					
GVOKE HYPOPEN 2-PACK - glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml					
GVOKE HYPOPEN 2-PACK - glucagon subcutaneous solution auto-injector 1 mg/0.2ml					
GVOKE KIT - glucagon subcutaneous soln 1 mg/0.2ml					
GVOKE PFS - glucagon subcutaneous soln pref syringe 0.5 mg/0.1ml					
GVOKE PFS - glucagon subcutaneous soln pref syringe 1 mg/0.2ml					
JANUMET - sitagliptin-metformin hcl tab 50-500 mg			•		
JANUMET - sitagliptin-metformin hcl tab 50-1000 mg			•		
JANUMET XR - sitagliptin-metformin hcl tab er 24hr 50-500 mg			•		
JANUMET XR - sitagliptin-metformin hcl tab er 24hr 50-1000 mg			•		
JANUMET XR - sitagliptin-metformin hcl tab er 24hr 100-1000 mg			•		
JANUVIA - sitagliptin phosphate tab 25 mg (base equiv)			•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
JANUVIA - sitagliptin phosphate tab 50 mg (base equiv)			•		
JANUVIA - sitagliptin phosphate tab 100 mg (base equiv)			•		
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 (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			•	•	

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
SYNJARDY - empagliflozin-metformin hcl tab 5-500 mg			•			TRULICITY - dulaglutide soln pen-injector 4.5 mg/0.5ml			•	•	
SYNJARDY - empagliflozin-metformin hcl tab 5-1000 mg			•			VICTOZA - liraglutide soln pen-injector 18 mg/3ml (6 mg/ml)			•	•	
SYNJARDY - empagliflozin-metformin hcl tab 12.5-500 mg			•			XIGDUO XR - dapagliflozin-metformin hcl tab er 24hr 2.5-1000 mg			•		
SYNJARDY - empagliflozin-metformin hcl tab 12.5-1000 mg			•			XIGDUO XR - dapagliflozin-metformin hcl tab er 24hr 5-500 mg			•		
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 5-1000 mg			•			XIGDUO XR - dapagliflozin-metformin hcl tab er 24hr 5-1000 mg			•		
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 10-1000 mg			•			XIGDUO XR - dapagliflozin-metformin hcl tab er 24hr 10-500 mg			•		
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 12.5-1000 mg			•			XIGDUO XR - dapagliflozin-metformin hcl tab er 24hr 10-1000 mg			•		
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 25-1000 mg			•			XULTOPHY 100/3.6 - insulin degludec-liraglutide sol pen-inj 100-3.6 unit-mg/ml			•	•	
TRIJARDY XR - empagliflozin-linagliptin-metformin tab er 24hr 5-2.5-1000mg			•			ZEGALOGUE - dasiglucagon hcl subcutaneous soln auto-inj 0.6 mg/0.6ml					
TRIJARDY XR - empagliflozin-linagliptin-metformin tab er 24hr 10-5-1000 mg			•			ZEGALOGUE - dasiglucagon hcl subcutaneous soln pref syringe 0.6 mg/0.6ml					
TRIJARDY XR - empagliflozin-linaglip-metformin tab er 24hr 12.5-2.5-1000mg			•			Rapid-Acting Insulins					
TRIJARDY XR - empagliflozin-linagliptin-metformin tab er 24hr 25-5-1000 mg			•			FIASP - insulin aspart (with niacinamide) inj 100 unit/ml			•		
TRULICITY - dulaglutide soln pen-injector 0.75 mg/0.5ml			•	•		FIASP FLEXTOUCH - insulin aspart (with niacinamide) sol pen-inj 100 unit/ml			•		
TRULICITY - dulaglutide soln pen-injector 1.5 mg/0.5ml			•	•		FIASP PENFILL - insulin aspart (with niacinamide) soln cartridge 100 unit/ml			•		
TRULICITY - dulaglutide soln pen-injector 3 mg/0.5ml			•	•		INSULIN ASPART - insulin aspart inj soln 100 unit/ml			•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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 soln 100 unit/ml			•		
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			•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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)			•		
NOVOLOG MIX 70/30 PREFILL - insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)			•		
Basal Insulins					
INSULIN GLARGINE - insulin glargine-yfgn soln pen-injector 100 unit/ml			•		
INSULIN GLARGINE - insulin glargine-yfgn inj 100 unit/ml			•		
LEVEMIR - insulin detemir inj 100 unit/ml			•		
LEVEMIR FLEXTOUCH - insulin detemir soln pen-injector 100 unit/ml			•		
SEMGLEE - insulin glargine-yfgn soln pen-injector 100 unit/ml			•		
SEMGLEE - insulin glargine-yfgn inj 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			•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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)					
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			•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
alendronate sodium tab 35 mg			•		
alendronate sodium tab 70 mg (Fosamax)			•		
calcitriol cap 0.25 mcg (Rocaltrol)					
CLOMIPHENE CITRATE - clomiphene citrate tab 50 mg					
CYSTADANE - betaine powder for oral solution	•				
FOLLISTIM AQ - follitropin beta inj 300 unit/0.36ml	•		•		
FOLLISTIM AQ - follitropin beta inj 600 unit/0.72ml	•		•		
FOLLISTIM AQ - follitropin beta inj 900 unit/1.08ml	•		•		
FORTEO - teriparatide (recombinant) soln pen-inj 600 mcg/2.4ml	•	•	•		
ibandronate sodium tab 150 mg (base equivalent) (Boniva)			•		
INCRELEX - mecaseimerin 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	•				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
ORFADIN - nitisinone susp 4 mg/ml	•				
ORLISSA - elagolix sodium tab 150 mg (base equiv)		•	•		
ORLISSA - elagolix sodium tab 200 mg (base equiv)		•	•		
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	•	•			
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 er 24hr 120 mg					
isosorbide mononitrate tab 10 mg					
isosorbide mononitrate tab 20 mg					
nitroglycerin sl tab 0.4 mg (Nitrostat)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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)					
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 37.5 mg					
metoprolol tartrate tab 50 mg (Lopressor)					
metoprolol tartrate tab 75 mg					
metoprolol tartrate tab 100 mg (Lopressor)					
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 tab 80 mg (Betapace)					
sotalol hcl tab 120 mg (Betapace)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
CALCIUM CHANNEL BLOCKERS					
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 extended release beads cap er 24hr 180 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)					
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					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
verapamil hcl tab 80 mg (Calan)					
verapamil hcl tab 120 mg (Calan)					
ANTIARRHYTHMICS					
amiodarone hcl tab 200 mg (Cordarone)					
MULTAQ - dronedarone hcl tab 400 mg (base equivalent)					
propafenone hcl tab 150 mg					
ANTIHYPERTENSIVES					
amlodipine besylate-benazepril hcl cap 2.5-10 mg (Lotrel)					
amlodipine besylate-benazepril hcl cap 5-10 mg (Lotrel)					
amlodipine besylate-benazepril hcl cap 5-20 mg (Lotrel)					
amlodipine besylate-benazepril hcl cap 5-40 mg (Lotrel)					
amlodipine besylate-benazepril hcl cap 10-20 mg (Lotrel)					
amlodipine besylate-benazepril hcl cap 10-40 mg (Lotrel)					
atenolol & chlorthalidone tab 50-25 mg (Tenoretic 50)					
benazepril hcl tab 5 mg					
benazepril hcl tab 10 mg (Lotensin)					
benazepril hcl tab 20 mg (Lotensin)					
benazepril hcl tab 40 mg (Lotensin)					
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg (Ziac)					
bisoprolol & hydrochlorothiazide tab 5-6.25 mg (Ziac)					
bisoprolol & hydrochlorothiazide tab 10-6.25 mg (Ziac)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
clonidine hcl tab 0.1 mg (Catapres)					
clonidine hcl tab 0.2 mg (Catapres)					
clonidine hcl tab 0.3 mg (Catapres)					
doxazosin mesylate tab 1 mg (Cardura)					
doxazosin mesylate tab 2 mg (Cardura)					
doxazosin mesylate tab 4 mg (Cardura)					
doxazosin mesylate tab 8 mg (Cardura)					
enalapril maleate & hydrochlorothiazide tab 5-12.5 mg					
enalapril maleate & hydrochlorothiazide tab 10-25 mg (Vaseretic)					
enalapril maleate tab 2.5 mg (Vasotec)					
enalapril maleate tab 5 mg (Vasotec)					
enalapril maleate tab 10 mg (Vasotec)					
enalapril maleate tab 20 mg (Vasotec)					
fosinopril sodium tab 10 mg					
fosinopril sodium tab 20 mg					
fosinopril sodium tab 40 mg					
hydralazine hcl tab 10 mg					
hydralazine hcl tab 25 mg					
hydralazine hcl tab 50 mg					
hydralazine hcl tab 100 mg					
irbesartan tab 75 mg (Avapro)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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)					
minoxidil tab 2.5 mg					
minoxidil tab 10 mg					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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)					
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)					
terazosin hcl cap 1 mg (base equivalent)					
terazosin hcl cap 2 mg (base equivalent)					
terazosin hcl cap 5 mg (base equivalent)					
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)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
valsartan-hydrochlorothiazide tab 80-12.5 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					
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)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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)					
ANTHYPERLIPIDEMICS					
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 micronized cap 67 mg			•		
fenofibrate tab 48 mg (Tricor)			•		
fenofibrate tab 54 mg (Lofibra)			•		
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-etetimibe tab 180-10 mg		•	•		
pravastatin sodium tab 10 mg					•
pravastatin sodium tab 20 mg (Pravachol)					•

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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)					
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					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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	•	•	•		
VERQUVO - vericiguat tab 2.5 mg		•	•		
VERQUVO - vericiguat tab 5 mg		•	•		
VERQUVO - vericiguat tab 10 mg		•	•		
VYNDAMAX - tafamidis cap 61 mg	•	•	•		
VYNDAQEL - tafamidis meglumine (cardiac) cap 20 mg	•	•	•		
ERECTILE DYSFUNCTION					
sildenafil citrate tab 25 mg (Viagra)		•	•		
sildenafil citrate tab 50 mg (Viagra)		•	•		
sildenafil citrate tab 100 mg (Viagra)		•	•		
RESPIRATORY AGENTS					
ANTI-HISTAMINES					
cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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					
promethazine w/ codeine syrup 6.25-10 mg/5ml		•			
promethazine-dm syrup 6.25-15 mg/5ml					
sodium chloride soln nebu 3%					
sodium chloride soln nebu 7% (Hypersal)					
ANTI-ASTHMATIC and BRONCHODILATOR AGENTS					
ADVAIR DISKUS - fluticasone-salmeterol aer powder ba 100-50 mcg/act			•		
ADVAIR DISKUS - fluticasone-salmeterol aer powder ba 250-50 mcg/act			•		
ADVAIR DISKUS - fluticasone-salmeterol aer powder ba 500-50 mcg/act			•		
ADVAIR HFA - fluticasone-salmeterol inhal aerosol 45-21 mcg/act			•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
ADVAIR HFA - fluticasone-salmeterol inhal aerosol 115-21 mcg/act			•			ASMANEX TWISTHALER 60 MET - mometasone furoate inhal powd 220 mcg/inh (breath activated)			•		
ADVAIR HFA - fluticasone-salmeterol inhal aerosol 230-21 mcg/act			•			BREO ELLIPTA - fluticasone furoate-vilanterol aero powd ba 100-25 mcg/inh			•		
albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)			•			BREO ELLIPTA - fluticasone furoate-vilanterol aero powd ba 200-25 mcg/inh			•		
albuterol sulfate syrup 2 mg/5ml			•			BREZTRI AEROSPHERE - budesonide-glycopyrrolate-formoterol aers 160-9-4.8 mcg/act			•		
ANORO ELLIPTA - umeclidinium-vilanterol aero powd ba 62.5-25 mcg/inh			•			COMBIVENT RESPIMAT - ipratropium-albuterol inhal aerosol soln 20-100 mcg/act			•		
ARNUITY ELLIPTA - fluticasone furoate aerosol powder breath activ 50 mcg/act			•			DULERA - mometasone furoate-formoterol fumarate aerosol 50-5 mcg/act			•		
ARNUITY ELLIPTA - fluticasone furoate aerosol powder breath activ 100 mcg/act			•			DULERA - mometasone furoate-formoterol fumarate aerosol 100-5 mcg/act			•		
ARNUITY ELLIPTA - fluticasone furoate aerosol powder breath activ 200 mcg/act			•			DULERA - mometasone furoate-formoterol fumarate aerosol 200-5 mcg/act			•		
ASMANEX HFA - mometasone furoate inhal aerosol suspension 50 mcg/act			•			FASENRA PEN - benralizumab subcutaneous soln auto-injector 30 mg/ml	•	•	•		
ASMANEX HFA - mometasone furoate inhal aerosol suspension 100 mcg/act			•			FLOVENT DISKUS - fluticasone propionate aer pow ba 50 mcg/blister			•		
ASMANEX HFA - mometasone furoate inhal aerosol suspension 200 mcg/act			•			FLOVENT DISKUS - fluticasone propionate aer pow ba 100 mcg/blister			•		
ASMANEX TWISTHALER 120 ME - mometasone furoate inhal powd 220 mcg/inh (breath activated)			•			FLOVENT DISKUS - fluticasone propionate aer pow ba 250 mcg/blister			•		
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)			•								

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
FLOVENT HFA - fluticasone propionate hfa inhal aer 110 mcg/act (125/valve)			•			SEREVENT DISKUS - salmeterol xinafoate aer pow ba 50 mcg/dose (base equiv)			•		
FLOVENT HFA - fluticasone propionate hfa inhal aer 220 mcg/act (250/valve)			•			SPIRIVA HANDIHALER - tiotropium bromide monohydrate inhal cap 18 mcg (base equiv)			•		
FLUTICASONE PROPIONATE/SA - fluticasone-salmeterol aer powder ba 55-14 mcg/act						SPIRIVA RESPIMAT - tiotropium bromide monohydrate inhal aerosol 1.25 mcg/act			•		
FLUTICASONE PROPIONATE/SA - fluticasone-salmeterol aer powder ba 113-14 mcg/act						SPIRIVA RESPIMAT - tiotropium bromide monohydrate inhal aerosol 2.5 mcg/act			•		
FLUTICASONE PROPIONATE/SA - fluticasone-salmeterol aer powder ba 232-14 mcg/act			•			STIOLTO RESPIMAT - tiotropium br-olodaterol inhal aero soln 2.5-2.5 mcg/act			•		
INCRUSE ELLIPTA - umeclidinium br aero powd breath act 62.5 mcg/inh (base eq)			•			STRIVERDI RESPIMAT - olodaterol hcl inhal aerosol soln 2.5 mcg/act (base equiv)			•		
ipratropium bromide inhal soln 0.02%			•			SYMBICORT - budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act			•		
montelukast sodium chew tab 4 mg (base equiv) (Singulair)						SYMBICORT - budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act			•		
montelukast sodium chew tab 5 mg (base equiv) (Singulair)						TRELEGY ELLIPTA - fluticasone-umeclidinium-vilanterol aepb 100-62.5-25 mcg/inh			•		
montelukast sodium tab 10 mg (base equiv) (Singulair)						TRELEGY ELLIPTA - fluticasone-umeclidinium-vilanterol aepb 200-62.5-25 mcg/inh			•		
NUCALA - mepolizumab subcutaneous solution auto-injector 100 mg/ml	•	•	•			VENTOLIN HFA - albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)			•		
NUCALA - mepolizumab subcutaneous solution pref syringe 100 mg/ml	•	•	•			XOLAIR - omalizumab subcutaneous soln prefilled syringe 75 mg/0.5ml	•	•			
QVAR REDHALER - beclomethasone diprop hfa breath act inh aer 40 mcg/act			•			XOLAIR - omalizumab subcutaneous soln prefilled syringe 150 mg/ml	•	•			
QVAR REDHALER - beclomethasone diprop hfa breath act inh aer 80 mcg/act			•								

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
RESPIRATORY AGENTS - MISC.					
KALYDECO - ivacaftor tab 150 mg	•	•	•		
KALYDECO - ivacaftor packet 25 mg	•	•	•		
KALYDECO - ivacaftor packet 50 mg	•	•	•		
KALYDECO - ivacaftor packet 75 mg	•	•	•		
PULMOZYME - dornase alfa inhal soln 2.5 mg/2.5ml	•				
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 50-25-37.5 mg & ivacaftor 75 mg tbpk	•	•	•		
TRIKAFTA - elexacaf-tezacaf-ivacaf 100-50-75 mg & ivacaftor 150 mg tbpk	•	•	•		
GASTROINTESTINAL AGENTS					
LAXATIVES					
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm (Golytely)					•
peg 3350-kcl-sod bicarb-nacl for soln 420 gm (Nulytely/flavor pack)					•
SUPREP BOWEL PREP KIT - sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml					
ULCER DRUGS					
dicyclomine hcl cap 10 mg (Bentyl)					
dicyclomine hcl tab 20 mg (Bentyl)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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		•	•		
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)			•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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					
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					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
ZENPEP - pancrelipase (lip-prot-amyl) dr cap 40000-126000-168000 unit					
GASTROINTESTINAL AGENTS- MISC.					
CHENODAL - chenodiol tab 250 mg	•				
LINZESS - linaclotide cap 72 mcg			•		
LINZESS - linaclotide cap 145 mcg			•		
LINZESS - linaclotide cap 290 mcg			•		
metoclopramide hcl tab 5 mg (base equivalent) (Reglan)					
metoclopramide hcl tab 10 mg (base equivalent) (Reglan)					
MOVANTIK - naloxegol oxalate tab 12.5 mg (base equivalent)			•		
MOVANTIK - naloxegol oxalate tab 25 mg (base equivalent)			•		
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					
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					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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 er 24hr 2 mg (Xanax xr)					
alprazolam tab er 24hr 3 mg (Xanax xr)					
alprazolam tab 0.25 mg (Xanax)					
alprazolam tab 0.5 mg (Xanax)					
alprazolam tab 1 mg (Xanax)					
alprazolam tab 2 mg (Xanax)					
bupirone hcl tab 5 mg					
bupirone hcl tab 10 mg					
bupirone hcl tab 15 mg					
chlordiazepoxide hcl cap 5 mg					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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)					
bupropion hcl tab er 24hr 300 mg (Wellbutrin xl)					
bupropion hcl tab 75 mg					
citalopram hydrobromide tab 10 mg (base equiv) (Celexa)					
citalopram hydrobromide tab 20 mg (base equiv) (Celexa)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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)					
nortriptyline hcl cap 10 mg (Pamelor)					
nortriptyline hcl cap 25 mg (Pamelor)					
nortriptyline hcl cap 50 mg (Pamelor)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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)					
venlafaxine hcl tab 100 mg (base equivalent)					
ANTIPSYCHOTICS					
aripiprazole tab 2 mg (Abilify)			•		
aripiprazole tab 5 mg (Abilify)			•		
aripiprazole tab 10 mg (Abilify)			•		
aripiprazole tab 15 mg (Abilify)			•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
FLUPHENAZINE HCL - fluphenazine hcl oral conc 5 mg/ ml					
FLUPHENAZINE HYDROCHLORID - fluphenazine hcl elixir 2.5 mg/5ml					
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)			•		
prochlorperazine maleate tab 5 mg (base equivalent) (Compazine)					
quetiapine fumarate tab 25 mg (Seroquel)			•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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)			•		
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)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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			•		
VYVANSE - lisdexamfetamine dimesylate cap 30 mg			•		
VYVANSE - lisdexamfetamine dimesylate cap 40 mg			•		
VYVANSE - lisdexamfetamine dimesylate cap 50 mg			•		
VYVANSE - lisdexamfetamine dimesylate cap 60 mg			•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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	•	•	•		
donepezil hydrochloride orally disintegrating tab 5 mg					
donepezil hydrochloride orally disintegrating tab 10 mg					
donepezil hydrochloride tab 5 mg (Aricept)					
donepezil hydrochloride tab 10 mg (Aricept)					
GILENYA - fingolimod hcl cap 0.5 mg (base equiv)	•	•	•		
KESIMPTA - ofatumumab soln auto-injector 20 mg/0.4ml	•	•	•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
MAVENCLAD - cladribine tab therapy pack 10 mg (4 tabs)	•	•	•			PLEGRIDY - peginterferon beta-1a soln prefilled syringe 125 mcg/0.5ml	•	•	•		
MAVENCLAD - cladribine tab therapy pack 10 mg (5 tabs)	•	•	•			PLEGRIDY - peginterferon beta-1a im soln prefilled syr 125 mcg/0.5ml	•	•	•		
MAVENCLAD - cladribine tab therapy pack 10 mg (6 tabs)	•	•	•			PLEGRIDY STARTER PACK - peginterferon beta-1a soln pen-inj 63 & 94 mcg/0.5ml pack	•	•	•		
MAVENCLAD - cladribine tab therapy pack 10 mg (7 tabs)	•	•	•			PLEGRIDY STARTER PACK - peginterferon beta-1a soln pref syr 63 & 94 mcg/0.5ml pack	•	•	•		
MAVENCLAD - cladribine tab therapy pack 10 mg (8 tabs)	•	•	•			REBIF - interferon beta-1a soln pref syr 22 mcg/0.5ml	•	•	•		
MAVENCLAD - cladribine tab therapy pack 10 mg (9 tabs)	•	•	•			REBIF - interferon beta-1a soln pref syr 44 mcg/0.5ml	•	•	•		
MAVENCLAD - cladribine tab therapy pack 10 mg (10 tabs)	•	•	•			REBIF REBIDOSE - interferon beta-1a soln auto-inj 22 mcg/0.5ml	•	•	•		
MAYZENT - siponimod fumarate tab 0.25 mg (base equiv)	•	•	•			REBIF REBIDOSE - interferon beta-1a soln auto-inj 44 mcg/0.5ml	•	•	•		
MAYZENT - siponimod fumarate tab 1 mg (base equiv)	•	•	•			REBIF REBIDOSE TITRATION - interferon beta-1a auto-inj 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	•	•	•		
MAYZENT - siponimod fumarate tab 2 mg (base equiv)	•	•	•			REBIF TITRATION PACK - interferon beta-1a pref syr 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	•	•	•		
MAYZENT STARTER PACK - siponimod fumarate tab 0.25 mg (7) starter pack	•	•	•			SAVELLA - milnacipran hcl tab 12.5 mg			•		
MAYZENT STARTER PACK - siponimod fumarate tab 0.25 mg (12) starter pack	•	•	•			SAVELLA - milnacipran hcl tab 25 mg			•		
memantine hcl tab 5 mg (Namenda)						SAVELLA - milnacipran hcl tab 50 mg			•		
memantine hcl tab 10 mg (Namenda)						SAVELLA - milnacipran hcl tab 100 mg			•		
NICOTROL INHALER - nicotine inhaler system 10 mg (4 mg delivered)					•	SAVELLA TITRATION PACK - milnacipran hcl tab 12.5 mg (5) & 25 mg (8) & 50 mg (42) pak			•		
NICOTROL NS - nicotine nasal spray 10 mg/ml (0.5 mg/spray)					•						
PLEGRIDY - peginterferon beta-1a soln pen-injector 125 mcg/0.5ml	•	•	•								

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
VARENICLINE TARTRATE - varenicline tartrate tab 0.5 mg (base equiv)					•
VARENICLINE TARTRATE - varenicline tartrate tab 1 mg (base equiv)					•
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)			•		
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 5-300 mg		•			
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)		•			

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
XTAMPZA ER - oxycodone cap er 12hr abuse-deterrent 9 mg		•	•			ENBREL SURECLICK - etanercept subcutaneous solution auto-injector 50 mg/ml	•	•	•		
XTAMPZA ER - oxycodone cap er 12hr abuse-deterrent 13.5 mg		•	•			HUMIRA - adalimumab prefilled syringe kit 10 mg/0.1ml	•	•	•		
XTAMPZA ER - oxycodone cap er 12hr abuse-deterrent 18 mg		•	•			HUMIRA - adalimumab prefilled syringe kit 20 mg/0.2ml	•	•	•		
XTAMPZA ER - oxycodone cap er 12hr abuse-deterrent 27 mg		•	•			HUMIRA - adalimumab prefilled syringe kit 40 mg/0.8ml	•	•			
XTAMPZA ER - oxycodone cap er 12hr abuse-deterrent 36 mg		•	•			HUMIRA - adalimumab prefilled syringe kit 40 mg/0.4ml	•	•	•		
ANALGESICS - ANTI-INFLAMMATORY						HUMIRA PEDIATRIC CROHNS D - adalimumab prefilled syringe kit 80 mg/0.8ml	•	•	•		
ACTEMRA - tocilizumab subcutaneous soln prefilled syringe 162 mg/0.9ml	•	•	•			HUMIRA PEDIATRIC CROHNS D - adalimumab prefilled syringe kit 80 mg/0.8ml & 40 mg/0.4ml	•	•	•		
ACTEMRA ACTPEN - tocilizumab subcutaneous soln auto-injector 162 mg/0.9ml	•	•	•			HUMIRA PEN - adalimumab pen-injector kit 40 mg/0.8ml	•	•	•		
celecoxib cap 50 mg (Celebrex)			•			HUMIRA PEN - adalimumab pen-injector kit 40 mg/0.4ml	•	•	•		
celecoxib cap 100 mg (Celebrex)			•			HUMIRA PEN - adalimumab pen-injector kit 80 mg/0.8ml	•	•	•		
celecoxib cap 200 mg (Celebrex)			•			HUMIRA PEN-CD/UC/HS START - adalimumab pen-injector kit 40 mg/0.8ml	•	•	•		
diclofenac sodium tab delayed release 50 mg						HUMIRA PEN-CD/UC/HS START - adalimumab pen-injector kit 80 mg/0.8ml	•	•	•		
diclofenac sodium tab delayed release 75 mg						HUMIRA PEN-PEDIATRIC UC S - adalimumab pen-injector kit 80 mg/0.8ml	•	•	•		
ENBREL - etanercept subcutaneous inj 25 mg/0.5ml	•	•	•			HUMIRA PEN-PS/UV STARTER - adalimumab pen-injector kit 40 mg/0.8ml	•	•	•		
ENBREL - etanercept for subcutaneous inj 25 mg	•	•	•			HUMIRA PEN-PS/UV STARTER - adalimumab pen-injector kit 80 mg/0.8ml & 40 mg/0.4ml	•	•	•		
ENBREL - etanercept subcutaneous soln prefilled syringe 25 mg/0.5ml	•	•	•			ibuprofen susp 100 mg/5ml					
ENBREL - etanercept subcutaneous soln prefilled syringe 50 mg/ml	•	•	•								
ENBREL MINI - etanercept subcutaneous solution cartridge 50 mg/ml	•	•	•								

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
ibuprofen tab 400 mg					
ibuprofen tab 600 mg					
ibuprofen tab 800 mg					
indomethacin cap 25 mg					
indomethacin cap 50 mg					
meloxicam tab 7.5 mg (Mobic)					
meloxicam tab 15 mg (Mobic)					
nabumetone tab 500 mg					
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	•	•	•		
RINVOQ - upadacitinib tab er 24hr 30 mg	•	•	•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
RINVOQ - upadacitinib tab er 24hr 45 mg	•	•	•		
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		•	•		
AJOVY - fremanezumab-vfrm subcutaneous soln auto-inj 225 mg/1.5ml		•	•		
AJOVY - fremanezumab-vfrm subcutaneous soln pref syr 225 mg/1.5ml		•	•		
EMGALITY - galcanezumab-gnlm subcutaneous soln auto-injector 120 mg/ml		•	•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
EMGALITY - galcanezumab-gnlm subcutaneous soln prefilled syr 100 mg/ml		•	•		
EMGALITY - galcanezumab-gnlm subcutaneous soln prefilled syr 120 mg/ml		•	•		
NURTEC - rimegepant sulfate tab disint 75 mg		•	•		
REYVOW - lasmiditan succinate tab 50 mg		•	•		
REYVOW - lasmiditan succinate tab 100 mg		•	•		
rizatriptan benzoate oral disintegrating tab 5 mg (base eq) (Maxalt-mlt)			•		
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)			•		
UBRELVY - ubrogepant tab 50 mg		•	•		
UBRELVY - ubrogepant tab 100 mg		•	•		
GOUT AGENTS					
allopurinol tab 100 mg (Zyloprim)					
allopurinol tab 300 mg (Zyloprim)					
NEUROMUSCULAR DRUGS					
ANTICONSULSANTS					
APTIOM - eslicarbazepine acetate tab 200 mg					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
APTIOM - eslicarbazepine acetate tab 400 mg					
APTIOM - eslicarbazepine acetate tab 600 mg					
APTIOM - eslicarbazepine acetate tab 800 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)					
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)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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)					
pregabalin cap 25 mg (Lyrica)			•		
pregabalin cap 50 mg (Lyrica)			•		
pregabalin cap 75 mg (Lyrica)			•		
pregabalin cap 100 mg (Lyrica)			•		
pregabalin cap 150 mg (Lyrica)			•		
pregabalin cap 200 mg (Lyrica)			•		
pregabalin cap 225 mg (Lyrica)			•		
pregabalin cap 300 mg (Lyrica)			•		
primidone tab 50 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					
VIMPAT - lacosamide tab 150 mg					
VIMPAT - lacosamide tab 200 mg					
zonisamide cap 25 mg (Zonegran)					
zonisamide cap 50 mg					
ANTIPARKINSON AGENTS					
amantadine hcl soln 50 mg/5ml					
benztropine mesylate tab 0.5 mg					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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)					
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)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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)					
tizanidine hcl tab 2 mg (base equivalent)			•		
tizanidine hcl tab 4 mg (base equivalent) (Zanaflex)			•		
NUTRITIONAL PRODUCTS					
VITAMINS					
cholecalciferol cap 1.25 mg (50000 unit)					
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					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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)					
potassium chloride tab er 20 meq (1500 mg) (K-tab)					
sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf) (Luride)					•
sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf) (Luride)					•
sodium fluoride chew tab 1 mg f (from 2.2 mg naf) (Luride)					•
sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf) (Luride)					•
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	•	•			
CERDELGA - eliglustat tartrate cap 84 mg (base equivalent)	•	•	•		
cyanocobalamin inj 1000 mcg/ml					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
DOPTELET - avatrombopag maleate tab 20 mg (base equiv)	•	•	•		
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	•				
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)	•				
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	•	•			
PROCRIT - epoetin alfa inj 40000 unit/ml	•	•			
RETACRIT - epoetin alfa-epbx inj 2000 unit/ml	•	•			
RETACRIT - epoetin alfa-epbx inj 3000 unit/ml	•	•			

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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	•	•			
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)					
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)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
XARELTO - rivaroxaban for susp 1 mg/ml			•		
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	•	•	•		
ADYNOVATE - antihemophilic factor recomb pegylated for inj 500 unit	•	•	•		
ADYNOVATE - antihemophilic factor recomb pegylated for inj 750 unit	•	•	•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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	•	•	•		
ALPHANATE - antihemophilic factor/vwf (human) for inj 250 unit	•				
ALPHANATE - antihemophilic factor/vwf (human) for inj 500 unit	•				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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	•	•	•		
BENEFIX - coagulation factor ix (recombinant) for inj kit 2000 unit	•	•	•		
BENEFIX - coagulation factor ix (recombinant) for inj kit 3000 unit	•	•	•		
BRILINTA - ticagrelor tab 60 mg					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
BRILINTA - ticagrelor tab 90 mg						ESPEROCT - antihemophilic factor recomb glycopeg-exei for inj 1000 unit	•	•	•		
cilostazol tab 50 mg (Pletal)						ESPEROCT - antihemophilic factor recomb glycopeg-exei for inj 1500 unit	•	•	•		
cilostazol tab 100 mg (Pletal)						ESPEROCT - antihemophilic factor recomb glycopeg-exei for inj 2000 unit	•	•	•		
clopidogrel bisulfate tab 75 mg (base equiv) (Plavix)						ESPEROCT - antihemophilic factor recomb glycopeg-exei for inj 3000 unit	•	•	•		
COAGADEX - coagulation factor x (human) for inj 250 unit	•					FEIBA - antiinhibitor coagulant complex for iv soln 500 unit	•				
COAGADEX - coagulation factor x (human) for inj 500 unit	•					FEIBA - antiinhibitor coagulant complex for iv soln 1000 unit	•				
CORIFACT - factor xiii concentrate (human) for inj kit 1000-1600 unit	•					FEIBA - antiinhibitor coagulant complex for iv soln 2500 unit	•				
ELOCTATE - antihemophilic factor rcmb (bdd-rfviiiifc) for inj 250 unit	•	•	•			HEMLIBRA - emicizumab-kxwh subcutaneous soln 30 mg/ml	•	•	•		
ELOCTATE - antihemophilic factor rcmb (bdd-rfviiiifc) for inj 500 unit	•	•	•			HEMLIBRA - emicizumab-kxwh subcutaneous soln 60 mg/0.4ml (150 mg/ml)	•	•	•		
ELOCTATE - antihemophilic factor rcmb (bdd-rfviiiifc) for inj 750 unit	•	•	•			HEMLIBRA - emicizumab-kxwh subcutaneous soln 105 mg/0.7ml (150 mg/ml)	•	•	•		
ELOCTATE - antihemophilic factor rcmb (bdd-rfviiiifc) for inj 1000 unit	•	•	•			HEMLIBRA - emicizumab-kxwh subcutaneous soln 150 mg/ml	•	•	•		
ELOCTATE - antihemophilic factor rcmb (bdd-rfviiiifc) for inj 1500 unit	•	•	•			HEMOFIL M - antihemophilic factor (human) for inj 250 unit	•	•	•		
ELOCTATE - antihemophilic factor rcmb (bdd-rfviiiifc) for inj 2000 unit	•	•	•			HEMOFIL M - antihemophilic factor (human) for inj 500 unit	•	•	•		
ELOCTATE - antihemophilic factor rcmb (bdd-rfviiiifc) for inj 3000 unit	•	•	•			HEMOFIL M - antihemophilic factor (human) for inj 1000 unit	•	•	•		
ELOCTATE - antihemophilic factor rcmb (bdd-rfviiiifc) for inj 4000 unit	•	•	•			HEMOFIL M - antihemophilic factor (human) for inj 1700 unit	•	•	•		
ELOCTATE - antihemophilic factor rcmb (bdd-rfviiiifc) for inj 5000 unit	•	•	•			HUMATE-P - antihemophilic factor/vwf (human) for inj 250-600 unit	•				
ELOCTATE - antihemophilic factor rcmb (bdd-rfviiiifc) for inj 6000 unit	•	•	•								
EMPAVELI - pegcetacoplan subcutaneous soln 1080 mg/20ml (54 mg/ml)	•	•	•								
ESPEROCT - antihemophilic factor recomb glycopeg-exei for inj 500 unit	•	•	•								

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
HUMATE-P - antihemophilic factor/vwf (human) for inj 500-1200 unit	•					KOATE - antihemophilic factor (human) for inj 500 unit	•	•	•		
HUMATE-P - antihemophilic factor/vwf (human) for inj 1000-2400 unit	•					KOATE - antihemophilic factor (human) for inj 1000 unit	•	•	•		
IDELVION - coagulation factor ix (recomb) (rix-fp) for inj 250 unit	•	•	•			KOATE-DVI - antihemophilic factor (human) for inj 500 unit	•	•	•		
IDELVION - coagulation factor ix (recomb) (rix-fp) for inj 500 unit	•	•	•			KOATE-DVI - antihemophilic factor (human) for inj 1000 unit	•	•	•		
IDELVION - coagulation factor ix (recomb) (rix-fp) for inj 1000 unit	•	•	•			KOGENATE FS - antihemophilic factor recomb (rfviii) for inj kit 250 unit	•	•	•		
IDELVION - coagulation factor ix (recomb) (rix-fp) for inj 2000 unit	•	•	•			KOGENATE FS - antihemophilic factor recomb (rfviii) for inj kit 500 unit	•	•	•		
IDELVION - coagulation factor ix (recomb) (rix-fp) for inj 3500 unit	•	•	•			KOGENATE FS - antihemophilic factor recomb (rfviii) for inj kit 1000 unit	•	•	•		
IXINITY - coagulation factor ix (recombinant) for inj 250 unit	•	•	•			KOGENATE FS - antihemophilic factor recomb (rfviii) for inj kit 2000 unit	•	•	•		
IXINITY - coagulation factor ix (recombinant) for inj 500 unit	•	•	•			KOGENATE FS - antihemophilic factor recomb (rfviii) for inj kit 3000 unit	•	•	•		
IXINITY - coagulation factor ix (recombinant) for inj 1000 unit	•	•	•			KOVALTRY - antihemophilic factor recomb (rahf-pfm) for inj 250 unit	•	•	•		
IXINITY - coagulation factor ix (recombinant) for inj 1500 unit	•	•	•			KOVALTRY - antihemophilic factor recomb (rahf-pfm) for inj 500 unit	•	•	•		
IXINITY - coagulation factor ix (recombinant) for inj 2000 unit	•	•	•			KOVALTRY - antihemophilic factor recomb (rahf-pfm) for inj 1000 unit	•	•	•		
IXINITY - coagulation factor ix (recombinant) for inj 3000 unit	•	•	•			KOVALTRY - antihemophilic factor recomb (rahf-pfm) for inj 2000 unit	•	•	•		
JIVI - antihemophil fact rcmb(bdd-rfviii peg-aucl) for inj 500 unit	•	•	•			KOVALTRY - antihemophilic factor recomb (rahf-pfm) for inj 3000 unit	•	•	•		
JIVI - antihemophil fact rcmb(bdd-rfviii peg-aucl)for inj 1000 unit	•	•	•			NOVOEIGHT - antihemophilic fact rcmb (bd trunc-rfviii) for inj 250 unit	•	•	•		
JIVI - antihemophil fact rcmb(bdd-rfviii peg-aucl)for inj 2000 unit	•	•	•								
JIVI - antihemophil fact rcmb(bdd-rfviii peg-aucl)for inj 3000 unit	•	•	•								
KOATE - antihemophilic factor (human) for inj 250 unit	•	•	•								

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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	•	•	•		
NUWIQ - antihemophilic fact rcmb (bdd-rfviii,sim) for inj 1000 unit	•	•	•		
NUWIQ - antihemophilic fact rcmb (bdd-rfviii,sim) for inj 1500 unit	•	•	•		
NUWIQ - antihemophilic fact rcmb (bdd-rfviii,sim) for inj 2000 unit	•	•	•		
NUWIQ - antihemophilic fact rcmb (bdd-rfviii,sim) for inj 2500 unit	•	•	•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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 1500 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	•	•	•		
REBINYN - coagulation factor ix recomb glycopegylated for inj 500 unt	•	•	•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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 soln pref syringe 300 mg/2ml (150 mg/ml)	•	•	•		
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					
azelastine hcl ophth soln 0.05%					
BACITRACIN - bacitracin ophth oint 500 unit/gm					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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 SM - loteprednol etabonate ophth gel 0.38%					
LUMIGAN - bimatoprost ophth soln 0.01%			•	•	
NATACYN - natamycin ophth susp 5%					
neomycin-polymyxin-dexamethasone ophth oint 0.1% (Maxitrol)					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
neomycin-polymyxin-dexamethasone ophth susp 0.1% (Maxitrol)					
ofloxacin ophth soln 0.3% (Ocuflox)					
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%					
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%					
sodium fluoride cream 1.1% (Prevident 5000 plus)					•
sodium fluoride gel 1.1% (0.5% f) (Prevident fluoride)					•
sodium fluoride paste 1.1% (Prevident 5000 boost)					•

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
sodium fluoride-potassium nitrate gel 1.1-5% (Preventid 5000 sensi)					•
stannous fluoride conc 0.63%					•
DERMATOLOGICALS					
betamethasone dipropionate augmented cream 0.05% (Diprolene af)			•		
clotrimazole cream 1%					
COSENTYX - secukinumab subcutaneous soln prefilled syringe 75 mg/0.5ml	•	•	•		
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)	•	•	•		
DUPIXENT - dupilumab subcutaneous soln pen-injector 200 mg/1.14ml	•	•	•		
DUPIXENT - dupilumab subcutaneous soln pen-injector 300 mg/2ml	•	•	•		
DUPIXENT - dupilumab subcutaneous soln prefilled syringe 100 mg/0.67ml	•	•	•		
DUPIXENT - dupilumab subcutaneous soln prefilled syringe 200 mg/1.14ml	•	•	•		

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
DUPIXENT - dupilumab subcutaneous soln prefilled syringe 300 mg/2ml	•	•	•		
FINACEA - azelaic acid foam 15%					
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)					
SKYRIZI - risankizumab-rzaa soln prefilled syringe 150 mg/ml	•	•	•		
SKYRIZI - risankizumab-rzaa sol prefilled syringe 2 x 75 mg/0.83ml kit	•	•	•		
SKYRIZI PEN - risankizumab-rzaa soln auto-injector 150 mg/ml	•	•	•		
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%					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
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 - mechllorethamine hcl gel 0.016% (base equivalent)	•				
MISCELLANEOUS PRODUCTS					
ANTIDOTES					
CHEMET - succimer cap 100 mg					
KLOXXADO - naloxone hcl nasal spray 8 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					

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	ACA
LOKELMA - sodium zirconium cyclosilicate for susp packet 5 gm					
LOKELMA - sodium zirconium cyclosilicate for susp packet 10 gm					
RAPAMUNE - sirolimus oral soln 1 mg/ml					
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DULERA- mometasone furoate-formoterol fumarate aerosol 200-5 mcg/act.....	19	EMGALITY- galcanezumab-gnlm subcutaneous soln prefilled syr 120 mg/ml.....	31
duloxetine hcl enteric coated pellets cap 20 mg (base eq) (Cymbalta).....	24	EMPAVELI- pegcetacoplan subcutaneous soln 1080 mg/20ml (54 mg/ml).....	37
duloxetine hcl enteric coated pellets cap 30 mg (base eq) (Cymbalta).....	24	enalapril maleate & hydrochlorothiazide tab 5-12.5 mg.....	15
duloxetine hcl enteric coated pellets cap 60 mg (base eq) (Cymbalta).....	24	enalapril maleate & hydrochlorothiazide tab 10-25 mg (Vaseretic).....	15
DUPIXENT- dupilumab subcutaneous soln pen-injector 200 mg/1.14ml.....	42	enalapril maleate tab 2.5 mg (Vasotec).....	15
DUPIXENT- dupilumab subcutaneous soln pen-injector 300 mg/2ml.....	42	enalapril maleate tab 5 mg (Vasotec).....	15
DUPIXENT- dupilumab subcutaneous soln prefilled syringe 100 mg/0.67ml.....	42	enalapril maleate tab 10 mg (Vasotec).....	15
DUPIXENT- dupilumab subcutaneous soln prefilled syringe 200 mg/1.14ml.....	42	enalapril maleate tab 20 mg (Vasotec).....	15
DUPIXENT- dupilumab subcutaneous soln prefilled syringe 300 mg/2ml.....	42	ENBREL- etanercept for subcutaneous inj 25 mg.....	29
dutasteride cap 0.5 mg (Avodart).....	23	ENBREL- etanercept subcutaneous inj 25 mg/0.5ml.....	29
E		ENBREL- etanercept subcutaneous soln prefilled syringe 25 mg/0.5ml.....	29
ELIQUIS- apixaban tab 2.5 mg.....	35	ENBREL- etanercept subcutaneous soln prefilled syringe 50 mg/ml.....	29
ELIQUIS- apixaban tab 5 mg.....	35	ENBREL MINI- etanercept subcutaneous solution cartridge 50 mg/ml.....	29
ELIQUIS STARTER PACK- apixaban tab starter pack 5 mg.....	35	ENBREL SURECLICK- etanercept subcutaneous solution auto-injector 50 mg/ml.....	29
ELLA- ulipristal acetate tab 30 mg.....	7	ENTRESTO- sacubitril-valsartan tab 24-26 mg.....	17
ELOCTATE- antihemophilic factor rcmb (bdd-rfviiiifc) for inj 250 unit.....	37	ENTRESTO- sacubitril-valsartan tab 49-51 mg.....	18
ELOCTATE- antihemophilic factor rcmb (bdd-rfviiiifc) for inj 500 unit.....	37	ENTRESTO- sacubitril-valsartan tab 97-103 mg.....	18
ELOCTATE- antihemophilic factor rcmb (bdd-rfviiiifc) for inj 750 unit.....	37	EPCLUSA- sofosbuvir-velpatasvir pellet pack 150-37.5 mg.....	2
ELOCTATE- antihemophilic factor rcmb (bdd-rfviiiifc) for inj 1000 unit.....	37	EPCLUSA- sofosbuvir-velpatasvir pellet pack 200-50 mg.....	2
ELOCTATE- antihemophilic factor rcmb (bdd-rfviiiifc) for inj 1500 unit.....	37	EPCLUSA- sofosbuvir-velpatasvir tab 200-50 mg.....	2
ELOCTATE- antihemophilic factor rcmb (bdd-rfviiiifc) for inj 2000 unit.....	37	EPCLUSA- sofosbuvir-velpatasvir tab 400-100 mg.....	2
ELOCTATE- antihemophilic factor rcmb (bdd-rfviiiifc) for inj 3000 unit.....	37	EPIDIOLEX- cannabidiol soln 100 mg/ml.....	31
ELOCTATE- antihemophilic factor rcmb (bdd-rfviiiifc) for inj 4000 unit.....	37	ergocalciferol cap 1.25 mg (50000 unit) (Drisdol).....	33
ELOCTATE- antihemophilic factor rcmb (bdd-rfviiiifc) for inj 5000 unit.....	37	ERIVEDGE- vismodegib cap 150 mg.....	4
ELOCTATE- antihemophilic factor rcmb (bdd-rfviiiifc) for inj 6000 unit.....	37	ERLEADA- apalutamide tab 60 mg.....	4
EMCYT- estramustine phosphate sodium cap 140 mg.....	4	erythromycin ophth oint 5 mg/gm.....	41
		escitalopram oxalate tab 5 mg (base equiv) (Lexapro).....	24
		escitalopram oxalate tab 10 mg (base equiv) (Lexapro).....	24
		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	FLOVENT DISKUS- fluticasone propionate aer pow ba 100 mcg/blister.....	19
ESPEROCT- antihemophilic factor recomb glycopeg-exei for inj 2000 unit.....	37	FLOVENT DISKUS- fluticasone propionate aer pow ba 250 mcg/blister.....	19
ESPEROCT- antihemophilic factor recomb glycopeg-exei for inj 3000 unit.....	37	FLOVENT HFA- fluticasone propionate hfa inhal aer 110 mcg/act (125/valve).....	20
estradiol tab 0.5 mg (Estrace).....	7	FLOVENT HFA- fluticasone propionate hfa inhal aer 220 mcg/act (250/valve).....	20
estradiol tab 1 mg (Estrace).....	7	FLOVENT HFA- fluticasone propionate hfa inhal aero 44 mcg/act (50/valve).....	19
estradiol tab 2 mg (Estrace).....	7	fluconazole tab 50 mg (Diflucan).....	2
ESTRING- estradiol vaginal ring 2 mg (7.5 mcg/24hrs).....	23	fluconazole tab 100 mg (Diflucan).....	2
eszopiclone tab 1 mg (Lunesta).....	25	fluconazole tab 150 mg (Diflucan).....	2
eszopiclone tab 2 mg (Lunesta).....	25	fluconazole tab 200 mg (Diflucan).....	2
eszopiclone tab 3 mg (Lunesta).....	25	fludrocortisone acetate tab 0.1 mg.....	6
F		fluoxetine hcl cap 10 mg (Prozac).....	24
famotidine tab 20 mg (Pepcid).....	21	fluoxetine hcl cap 20 mg (Prozac).....	24
famotidine tab 40 mg (Pepcid).....	21	fluoxetine hcl cap 40 mg (Prozac).....	24
FARXIGA- dapagliflozin propanediol tab 5 mg (base equivalent).....	8	FLUPHENAZINE HCL- fluphenazine hcl oral conc 5 mg/ ml.....	25
FARXIGA- dapagliflozin propanediol tab 10 mg (base equivalent).....	8	FLUPHENAZINE HYDROCHLORID- fluphenazine hcl elixir 2.5 mg/5ml.....	25
FASENRA PEN- benralizumab subcutaneous soln auto- injector 30 mg/ml.....	19	FLUTICASONE PROPIONATE/SA- fluticasone-salmeterol aer powder ba 55-14 mcg/act.....	20
FEIBA- antiinhibitor coagulant complex for iv soln 500 unit.....	37	FLUTICASONE PROPIONATE/SA- fluticasone-salmeterol aer powder ba 113-14 mcg/act.....	20
FEIBA- antiinhibitor coagulant complex for iv soln 1000 unit.....	37	FLUTICASONE PROPIONATE/SA- fluticasone-salmeterol aer powder ba 232-14 mcg/act.....	20
FEIBA- antiinhibitor coagulant complex for iv soln 2500 unit.....	37	fluticasone propionate nasal susp 50 mcg/act.....	18
felodipine tab er 24hr 2.5 mg.....	14	folic acid cap 0.8 mg.....	34
felodipine tab er 24hr 5 mg.....	14	folic acid tab 400 mcg.....	34
felodipine tab er 24hr 10 mg.....	14	folic acid tab 800 mcg.....	34
fenofibrate micronized cap 67 mg.....	17	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).....	17	FOLLISTIM AQ- follitropin beta inj 600 unit/0.72ml.....	12
fenofibrate tab 48 mg (Tricor).....	17	FOLLISTIM AQ- follitropin beta inj 900 unit/1.08ml.....	12
fenofibrate tab 145 mg (Tricor).....	17	FORTEO- teriparatide (recombinant) soln pen-inj 600 mcg/2.4ml.....	12
ferrous sulfate elixir 220 mg/5ml (44 mg/5ml elemental fe).....	34	fosinopril sodium tab 10 mg.....	15
ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe).....	34	fosinopril sodium tab 20 mg.....	15
FIASP FLEXTOUCH- insulin aspart (with niacinamide) sol pen-inj 100 unit/ml.....	10	fosinopril sodium tab 40 mg.....	15
FIASP- insulin aspart (with niacinamide) inj 100 unit/ ml.....	10	FULPHILA- pegfilgrastim-jmdb soln prefilled syringe 6 mg/0.6ml.....	34
FIASP PENFILL- insulin aspart (with niacinamide) soln cartridge 100 unit/ml.....	10	furosemide oral soln 10 mg/ml.....	16
FINACEA- azelaic acid foam 15%.....	42	furosemide tab 20 mg (Lasix).....	16
finasteride tab 5 mg (Proscar).....	23	furosemide tab 40 mg (Lasix).....	16
FLOVENT DISKUS- fluticasone propionate aer pow ba 50 mcg/blister.....	19	furosemide tab 80 mg (Lasix).....	16
		G	
		gabapentin cap 100 mg (Neurontin).....	31
		gabapentin cap 300 mg (Neurontin).....	31
		gabapentin cap 400 mg (Neurontin).....	31
		gabapentin tab 600 mg (Neurontin).....	31

gabapentin tab 800 mg (Neurontin).....	31	HEMLIBRA- emicizumab-kxwh subcutaneous soln 150 mg/ml.....	37
gemfibrozil tab 600 mg (Lopid).....	17	HEMLIBRA- emicizumab-kxwh subcutaneous soln 60 mg/0.4ml (150 mg/ml).....	37
gentamicin sulfate ophth soln 0.3% (Garamycin).....	41	HEMLIBRA- emicizumab-kxwh subcutaneous soln 105 mg/0.7ml (150 mg/ml).....	37
GENVOYA- elvitegrav-cobic-emtricitab-tenofof af tab 150-150-200-10 mg.....	2	HEMOFIL M- antihemophilic factor (human) for inj 250 unit.....	37
GILENYA- fingolimod hcl cap 0.5 mg (base equiv).....	26	HEMOFIL M- antihemophilic factor (human) for inj 500 unit.....	37
glimepiride tab 1 mg (Amaryl).....	8	HEMOFIL M- antihemophilic factor (human) for inj 1000 unit.....	37
glimepiride tab 2 mg (Amaryl).....	8	HEMOFIL M- antihemophilic factor (human) for inj 1700 unit.....	37
glimepiride tab 4 mg (Amaryl).....	8	HUMATE-P- antihemophilic factor/vwf (human) for inj 250-600 unit.....	37
glipizide tab er 24hr 2.5 mg (Glucotrol xl).....	8	HUMATE-P- antihemophilic factor/vwf (human) for inj 500-1200 unit.....	38
glipizide tab er 24hr 5 mg (Glucotrol xl).....	8	HUMATE-P- antihemophilic factor/vwf (human) for inj 1000-2400 unit.....	38
glipizide tab er 24hr 10 mg (Glucotrol xl).....	8	HUMIRA- adalimumab prefilled syringe kit 10 mg/0.1ml.....	29
glipizide tab 5 mg (Glucotrol).....	8	HUMIRA- adalimumab prefilled syringe kit 20 mg/0.2ml.....	29
glipizide tab 10 mg (Glucotrol).....	8	HUMIRA- adalimumab prefilled syringe kit 40 mg/0.8ml.....	29
GLUCAGON EMERGENCY KIT FO- glucagon hcl for inj 1 mg.....	8	HUMIRA- adalimumab prefilled syringe kit 40 mg/0.4ml.....	29
glyburide-metformin tab 1.25-250 mg (Glucovance).....	8	HUMIRA PEDIATRIC CROHNS D- adalimumab prefilled syringe kit 80 mg/0.8ml.....	29
glyburide-metformin tab 2.5-500 mg (Glucovance).....	8	HUMIRA PEDIATRIC CROHNS D- adalimumab prefilled syringe kit 80 mg/0.8ml & 40 mg/0.4ml.....	29
glyburide-metformin tab 5-500 mg (Glucovance).....	8	HUMIRA PEN- adalimumab pen-injector kit 40 mg/0.8ml.....	29
glyburide micronized tab 1.5 mg (Glynase).....	8	HUMIRA PEN- adalimumab pen-injector kit 40 mg/0.4ml.....	29
glyburide micronized tab 3 mg (Glynase).....	8	HUMIRA PEN- adalimumab pen-injector kit 80 mg/0.8ml.....	29
glyburide micronized tab 6 mg (Glynase).....	8	HUMIRA PEN-CD/UC/HS START- adalimumab pen-injector kit 40 mg/0.8ml.....	29
glyburide tab 1.25 mg.....	8	HUMIRA PEN-CD/UC/HS START- adalimumab pen-injector kit 80 mg/0.8ml.....	29
glyburide tab 2.5 mg.....	8	HUMIRA PEN-PEDIATRIC UC S- adalimumab pen-injector kit 80 mg/0.8ml.....	29
glyburide tab 5 mg.....	8	HUMIRA PEN-PS/UV STARTER- adalimumab pen-injector kit 40 mg/0.8ml.....	29
GLYXAMBI- empagliflozin-linagliptin tab 10-5 mg.....	9	HUMIRA PEN-PS/UV STARTER- adalimumab pen-injector kit 80 mg/0.8ml & 40 mg/0.4ml.....	29
GLYXAMBI- empagliflozin-linagliptin tab 25-5 mg.....	9	HUMULIN R U-500 (CONCENTR- insulin regular (human) inj 500 unit/ml.....	11
GVOKE HYPOPEN 1-PACK- glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml.....	9	HUMULIN R U-500 KWIKPEN- insulin regular (human) soln pen-injector 500 unit/ml.....	11
GVOKE HYPOPEN 1-PACK- glucagon subcutaneous solution auto-injector 1 mg/0.2ml.....	9	hydralazine hcl tab 10 mg.....	15
GVOKE HYPOPEN 2-PACK- glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml.....	9		
GVOKE HYPOPEN 2-PACK- glucagon subcutaneous solution auto-injector 1 mg/0.2ml.....	9		
GVOKE KIT- glucagon subcutaneous soln 1 mg/0.2ml.....	9		
GVOKE PFS- glucagon subcutaneous soln pref syringe 0.5 mg/0.1ml.....	9		
GVOKE PFS- glucagon subcutaneous soln pref syringe 1 mg/0.2ml.....	9		
H			
haloperidol tab 0.5 mg.....	25		
haloperidol tab 1 mg.....	25		
haloperidol tab 2 mg.....	25		
HARVONI- ledipasvir-sofosbuvir pellet pack 33.75-150 mg.....	2		
HARVONI- ledipasvir-sofosbuvir pellet pack 45-200 mg.....	2		
HARVONI- ledipasvir-sofosbuvir tab 45-200 mg.....	2		
HARVONI- ledipasvir-sofosbuvir tab 90-400 mg.....	2		
HEMLIBRA- emicizumab-kxwh subcutaneous soln 30 mg/ml.....	37		

hydralazine hcl tab 25 mg.....	15	IMPAVIDO- miltefosine cap 50 mg.....	3
hydralazine hcl tab 50 mg.....	15	INBRIJA- levodopa inhal powder cap 42 mg.....	32
hydralazine hcl tab 100 mg.....	15	INCRELEX- mecasermin inj 40 mg/4ml (10 mg/ml).....	12
hydrochlorothiazide cap 12.5 mg (Microzide).....	16	INCRUSE ELLIPTA- umeclidinium br aero powd breath act	
hydrochlorothiazide tab 12.5 mg.....	16	62.5 mcg/inh (base eq).....	20
hydrochlorothiazide tab 25 mg.....	16	indapamide tab 1.25 mg.....	16
hydrochlorothiazide tab 50 mg.....	16	indapamide tab 2.5 mg.....	16
hydrocodone-acetaminophen tab 5-300 mg.....	28	indomethacin cap 25 mg.....	30
hydrocodone-acetaminophen tab 7.5-325 mg		indomethacin cap 50 mg.....	30
(Norco).....	28	INSULIN ASPART FLEXPEN- insulin aspart soln pen-	
hydrocodone-acetaminophen tab 5-325 mg		injector 100 unit/ml.....	11
(Norco).....	28	INSULIN ASPART- insulin aspart inj soln 100 unit/ml.....	10
hydrocodone-acetaminophen tab 10-325 mg		INSULIN ASPART PENFILL- insulin aspart soln cartridge	
(Norco).....	28	100 unit/ml.....	11
hydrocortisone cream 1%.....	42	INSULIN ASPART PROTAMINE/- insulin aspart prot &	
hydrocortisone cream 2.5%.....	42	aspart (human) inj 100 unit/ml (70-30).....	11
hydrocortisone oint 1%.....	42	INSULIN ASPART PROTAMINE/- insulin aspart prot &	
hydrocortisone oint 2.5%.....	42	aspart sus pen-inj 100 unit/ml (70-30).....	11
hydromorphone hcl tab 2 mg (Dilaudid).....	28	INSULIN GLARGINE- insulin glargine-yfgn inj 100 unit/	
hydromorphone hcl tab 4 mg (Dilaudid).....	28	ml.....	11
hydroxyzine hcl syrup 10 mg/5ml.....	23	INSULIN GLARGINE- insulin glargine-yfgn soln pen-	
hydroxyzine hcl tab 10 mg.....	23	injector 100 unit/ml.....	11
hydroxyzine hcl tab 25 mg.....	23	INSULIN PEN NEEDLES – VARIOUS.....	43
hydroxyzine hcl tab 50 mg.....	23	INSULIN SYRINGES – VARIOUS.....	43
hydroxyzine pamoate cap 25 mg (Vistaril).....	23	INTELENCE- etravirine tab 25 mg.....	2
hydroxyzine pamoate cap 50 mg (Vistaril).....	23	INTRON A- interferon alfa-2b for inj 10000000 unit.....	4
I		INTRON A- interferon alfa-2b for inj 18000000 unit.....	4
ibandronate sodium tab 150 mg (base equivalent)		INTRON A- interferon alfa-2b for inj 50000000 unit.....	4
(Boniva).....	12	ipratropium bromide inhal soln 0.02%.....	20
IBRANCE- palbociclib cap 75 mg.....	4	irbesartan-hydrochlorothiazide tab 150-12.5 mg	
IBRANCE- palbociclib cap 100 mg.....	4	(Avalide).....	15
IBRANCE- palbociclib cap 125 mg.....	4	irbesartan-hydrochlorothiazide tab 300-12.5 mg	
IBRANCE- palbociclib tab 75 mg.....	4	(Avalide).....	15
IBRANCE- palbociclib tab 100 mg.....	4	irbesartan tab 75 mg (Avapro).....	15
IBRANCE- palbociclib tab 125 mg.....	4	irbesartan tab 150 mg (Avapro).....	15
ibuprofen susp 100 mg/5ml.....	29	irbesartan tab 300 mg (Avapro).....	15
ibuprofen tab 400 mg.....	30	ISENTRESS HD- raltegravir potassium tab 600 mg (base	
ibuprofen tab 600 mg.....	30	equiv).....	2
ibuprofen tab 800 mg.....	30	ISENTRESS- raltegravir potassium chew tab 25 mg (base	
IDELVION- coagulation factor ix (recomb) (rix-fp) for inj		equiv).....	2
250 unit.....	38	ISENTRESS- raltegravir potassium chew tab 100 mg	
IDELVION- coagulation factor ix (recomb) (rix-fp) for inj		(base equiv).....	2
500 unit.....	38	ISENTRESS- raltegravir potassium packet for susp 100	
IDELVION- coagulation factor ix (recomb) (rix-fp) for inj		mg (base equiv).....	2
1000 unit.....	38	ISENTRESS- raltegravir potassium tab 400 mg (base	
IDELVION- coagulation factor ix (recomb) (rix-fp) for inj		equiv).....	2
2000 unit.....	38	isoniazid tab 300 mg.....	1
IDELVION- coagulation factor ix (recomb) (rix-fp) for inj		isosorbide mononitrate tab er 24hr 30 mg.....	13
3500 unit.....	38	isosorbide mononitrate tab er 24hr 60 mg.....	13
imipramine hcl tab 10 mg (Tofranil).....	24	isosorbide mononitrate tab er 24hr 120 mg.....	13
imipramine hcl tab 25 mg (Tofranil).....	24	isosorbide mononitrate tab 10 mg.....	13
imipramine hcl tab 50 mg (Tofranil).....	24	isosorbide mononitrate tab 20 mg.....	13

IXINITY- coagulation factor ix (recombinant) for inj 250 unit.....	38	KISQALI FEMARA 600 DOSE- ribociclib 600 mg dose (200 mg tab) & letrozole 2.5 mg tbpk.....	4
IXINITY- coagulation factor ix (recombinant) for inj 500 unit.....	38	KISQALI- ribociclib succinate tab pack 200 mg daily dose.....	4
IXINITY- coagulation factor ix (recombinant) for inj 1000 unit.....	38	KISQALI- ribociclib succinate tab pack 400 mg daily dose (200 mg tab).....	4
IXINITY- coagulation factor ix (recombinant) for inj 1500 unit.....	38	KISQALI- ribociclib succinate tab pack 600 mg daily dose (200 mg tab).....	4
IXINITY- coagulation factor ix (recombinant) for inj 2000 unit.....	38	KLOXXADO- naloxone hcl nasal spray 8 mg/0.1ml.....	43
IXINITY- coagulation factor ix (recombinant) for inj 3000 unit.....	38	KOATE- antihemophilic factor (human) for inj 250 unit.....	38
J		KOATE- antihemophilic factor (human) for inj 500 unit.....	38
JANUMET- sitagliptin-metformin hcl tab 50-500 mg.....	9	KOATE-DVI- antihemophilic factor (human) for inj 500 unit.....	38
JANUMET- sitagliptin-metformin hcl tab 50-1000 mg.....	9	KOATE-DVI- antihemophilic factor (human) for inj 1000 unit.....	38
JANUMET XR- sitagliptin-metformin hcl tab er 24hr 50-500 mg.....	9	KOGENATE FS- antihemophilic factor recomb (rfviii) for inj kit 250 unit.....	38
JANUMET XR- sitagliptin-metformin hcl tab er 24hr 50-1000 mg.....	9	KOGENATE FS- antihemophilic factor recomb (rfviii) for inj kit 500 unit.....	38
JANUMET XR- sitagliptin-metformin hcl tab er 24hr 100-1000 mg.....	9	KOGENATE FS- antihemophilic factor recomb (rfviii) for inj kit 1000 unit.....	38
JANUVIA- sitagliptin phosphate tab 25 mg (base equiv).....	9	KOGENATE FS- antihemophilic factor recomb (rfviii) for inj kit 2000 unit.....	38
JANUVIA- sitagliptin phosphate tab 50 mg (base equiv).....	9	KOGENATE FS- antihemophilic factor recomb (rfviii) for inj kit 3000 unit.....	38
JANUVIA- sitagliptin phosphate tab 100 mg (base equiv).....	9	KOSHER PRENATAL PLUS IRON- prenatal vit w/ iron carbonyl-fa tab 30-1 mg.....	33
JARDIANCE- empagliflozin tab 10 mg.....	9	KOVALTRY- antihemophilic factor recomb (rahf-pfm) for inj 250 unit.....	38
JARDIANCE- empagliflozin tab 25 mg.....	9	KOVALTRY- antihemophilic factor recomb (rahf-pfm) for inj 500 unit.....	38
JIVI- antihemophil fact rcmb(bdd-rfviii peg-aucl)for inj 1000 unit.....	38	KOVALTRY- antihemophilic factor recomb (rahf-pfm) for inj 1000 unit.....	38
JIVI- antihemophil fact rcmb(bdd-rfviii peg-aucl)for inj 2000 unit.....	38	KOVALTRY- antihemophilic factor recomb (rahf-pfm) for inj 2000 unit.....	38
JIVI- antihemophil fact rcmb(bdd-rfviii peg-aucl)for inj 3000 unit.....	38	KOVALTRY- antihemophilic factor recomb (rahf-pfm) for inj 3000 unit.....	38
JIVI- antihemophil fact rcmb(bdd-rfviii peg-aucl) for inj 500 unit.....	38	KYNMOBI- apomorphine hydrochloride film 10 mg.....	32
JULUCA- dolutegravir sodium-rilpivirine hcl tab 50-25 mg (base eq).....	2	KYNMOBI- apomorphine hydrochloride film 15 mg.....	32
K		KYNMOBI- apomorphine hydrochloride film 20 mg.....	32
KALYDECO- ivacaftor packet 25 mg.....	21	KYNMOBI- apomorphine hydrochloride film 25 mg.....	32
KALYDECO- ivacaftor packet 50 mg.....	21	KYNMOBI- apomorphine hydrochloride film 30 mg.....	32
KALYDECO- ivacaftor packet 75 mg.....	21	L	
KALYDECO- ivacaftor tab 150 mg.....	21	labetalol hcl tab 100 mg (Trandate).....	13
KESIMPTA- ofatumumab soln auto-injector 20 mg/0.4ml.....	26	lamotrigine tab 25 mg (Lamictal).....	31
ketoconazole shampoo 2% (Nizoral).....	42	lamotrigine tab 100 mg (Lamictal).....	32
ketorolac tromethamine ophth soln 0.5% (Acular).....	41	lamotrigine tab 150 mg (Lamictal).....	32
KISQALI FEMARA 200 DOSE- ribociclib 200 mg dose (200 mg tab) & letrozole 2.5 mg tbpk.....	4	lamotrigine tab 200 mg (Lamictal).....	32
KISQALI FEMARA 400 DOSE- ribociclib 400 mg dose (200 mg tab) & letrozole 2.5 mg tbpk.....	4	LANCETS – VARIOUS.....	43

lansoprazole cap delayed release 30 mg (Prevacid).....	21	lidocaine hcl viscous soln 2%.....	41
latanoprost ophth soln 0.005% (Xalatan).....	41	LINZESS- linaclotide cap 72 mcg.....	22
LATUDA- lurasidone hcl tab 20 mg.....	25	LINZESS- linaclotide cap 145 mcg.....	22
LATUDA- lurasidone hcl tab 40 mg.....	25	LINZESS- linaclotide cap 290 mcg.....	22
LATUDA- lurasidone hcl tab 60 mg.....	25	lisinopril & hydrochlorothiazide tab 10-12.5 mg (Zestoretic).....	15
LATUDA- lurasidone hcl tab 80 mg.....	25	lisinopril & hydrochlorothiazide tab 20-12.5 mg (Zestoretic).....	15
LATUDA- lurasidone hcl tab 120 mg.....	25	lisinopril & hydrochlorothiazide tab 20-25 mg (Zestoretic).....	15
LENVIMA 14 MG DAILY DOSE- lenvatinib cap therapy pack 10 & 4 mg (14 mg daily dose).....	4	lisinopril tab 5 mg (Prinivil).....	15
LENVIMA 10 MG DAILY DOSE- lenvatinib cap therapy pack 10 mg (10 mg daily dose).....	4	lisinopril tab 10 mg (Prinivil).....	15
LENVIMA 4 MG DAILY DOSE- lenvatinib cap therapy pack 4 mg (4 mg daily dose).....	5	lisinopril tab 20 mg (Prinivil).....	15
LENVIMA 12MG DAILY DOSE- lenvatinib cap therapy pack 3 x 4 mg (12 mg daily dose).....	4	lisinopril tab 2.5 mg (Zestril).....	15
LENVIMA 20 MG DAILY DOSE- lenvatinib cap therapy pack 2 x 10 mg (20 mg daily dose).....	4	lisinopril tab 30 mg (Zestril).....	15
LENVIMA 8 MG DAILY DOSE- lenvatinib cap therapy pack 2 x 4 mg (8 mg daily dose).....	5	lisinopril tab 40 mg (Zestril).....	15
LENVIMA 18 MG DAILY DOSE- lenvatinib cap ther pack 10 mg & 2 x 4 mg (18 mg daily dose).....	4	lithium carbonate cap 300 mg.....	25
LENVIMA 24 MG DAILY DOSE- lenvatinib cap ther pack 2 x 10 mg & 4 mg (24 mg daily dose).....	4	lithium carbonate cap 150 mg (Lithium carbonate).....	25
letrozole tab 2.5 mg (Femara).....	5	lithium carbonate cap 600 mg (Lithium carbonate).....	25
LEUKERAN- chlorambucil tab 2 mg.....	5	lithium carbonate tab er 450 mg.....	25
LEVEMIR FLEXTOUCH- insulin detemir soln pen-injector 100 unit/ml.....	11	lithium carbonate tab er 300 mg (Lithobid).....	25
LEVEMIR- insulin detemir inj 100 unit/ml.....	11	lithium carbonate tab 300 mg.....	25
levetiracetam tab 250 mg (Keppra).....	32	LOKELMA- sodium zirconium cyclosilicate for susp packet 5 gm.....	43
levetiracetam tab 500 mg (Keppra).....	32	LOKELMA- sodium zirconium cyclosilicate for susp packet 10 gm.....	43
levocetirizine dihydrochloride tab 5 mg.....	18	lorazepam tab 0.5 mg (Ativan).....	23
levofloxacin tab 250 mg (Levaquin).....	1	lorazepam tab 1 mg (Ativan).....	23
levofloxacin tab 500 mg (Levaquin).....	1	lorazepam tab 2 mg (Ativan).....	23
levofloxacin tab 750 mg (Levaquin).....	1	losartan potassium & hydrochlorothiazide tab 50-12.5 mg (Hyzaar).....	15
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg.....	7	losartan potassium & hydrochlorothiazide tab 100-12.5 mg (Hyzaar).....	15
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg.....	7	losartan potassium & hydrochlorothiazide tab 100-25 mg (Hyzaar).....	15
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg.....	8	losartan potassium tab 25 mg (Cozaar).....	15
levothyroxine sodium tab 25 mcg (Synthroid).....	12	losartan potassium tab 50 mg (Cozaar).....	15
levothyroxine sodium tab 50 mcg (Synthroid).....	12	losartan potassium tab 100 mg (Cozaar).....	15
levothyroxine sodium tab 75 mcg (Synthroid).....	12	LOTEMAX- loteprednol etabonate ophth oint 0.5%.....	41
levothyroxine sodium tab 88 mcg (Synthroid).....	12	LOTEMAX SM- loteprednol etabonate ophth gel 0.38%.....	41
levothyroxine sodium tab 100 mcg (Synthroid).....	12	lovastatin tab 10 mg.....	17
levothyroxine sodium tab 112 mcg (Synthroid).....	12	lovastatin tab 20 mg.....	17
levothyroxine sodium tab 125 mcg (Synthroid).....	12	lovastatin tab 40 mg (Mevacor).....	17
levothyroxine sodium tab 137 mcg (Synthroid).....	12	LUMIGAN- bimatoprost ophth soln 0.01%.....	41
levothyroxine sodium tab 150 mcg (Synthroid).....	12	LYNPARZA- olaparib tab 100 mg.....	5
levothyroxine sodium tab 175 mcg (Synthroid).....	12	LYNPARZA- olaparib tab 150 mg.....	5
levothyroxine sodium tab 200 mcg (Synthroid).....	12	M	
levothyroxine sodium tab 300 mcg (Synthroid).....	12	MAVENCLAD- cladribine tab therapy pack 10 mg (4 tabs).....	27
		MAVENCLAD- cladribine tab therapy pack 10 mg (5 tabs).....	27

MAVENCLAD- cladribine tab therapy pack 10 mg (6 tabs).....	27	methylphenidate hcl tab 5 mg (Ritalin).....	26
MAVENCLAD- cladribine tab therapy pack 10 mg (7 tabs).....	27	methylprednisolone tab 4 mg (Medrol).....	6
MAVENCLAD- cladribine tab therapy pack 10 mg (8 tabs).....	27	methylprednisolone tab 16 mg (Medrol).....	6
MAVENCLAD- cladribine tab therapy pack 10 mg (9 tabs).....	27	methylprednisolone tab 32 mg (Medrol).....	6
MAVENCLAD- cladribine tab therapy pack 10 mg (10 tabs).....	27	methylprednisolone tab therapy pack 4 mg (21) (Medrol dosepak).....	6
MAYRET- glecaprevir-pibrentasvir pellet pack 50-20 mg.....	2	metoclopramide hcl tab 5 mg (base equivalent) (Reglan).....	22
MAYRET- glecaprevir-pibrentasvir tab 100-40 mg.....	2	metoclopramide hcl tab 10 mg (base equivalent) (Reglan).....	22
MAYZENT- siponimod fumarate tab 0.25 mg (base equiv).....	27	metoprolol succinate tab er 24hr 25 mg (tartrate equiv) (Toprol xl).....	13
MAYZENT- siponimod fumarate tab 1 mg (base equiv).....	27	metoprolol succinate tab er 24hr 50 mg (tartrate equiv) (Toprol xl).....	13
MAYZENT- siponimod fumarate tab 2 mg (base equiv).....	27	metoprolol succinate tab er 24hr 100 mg (tartrate equiv) (Toprol xl).....	13
MAYZENT STARTER PACK- siponimod fumarate tab 0.25 mg (7) starter pack.....	27	metoprolol tartrate tab 25 mg.....	13
MAYZENT STARTER PACK- siponimod fumarate tab 0.25 mg (12) starter pack.....	27	metoprolol tartrate tab 37.5 mg.....	13
meclizine hcl tab 12.5 mg.....	21	metoprolol tartrate tab 75 mg.....	13
meclizine hcl tab 25 mg.....	21	metoprolol tartrate tab 50 mg (Lopressor).....	13
medroxyprogesterone acetate tab 2.5 mg (Provera).....	8	metoprolol tartrate tab 100 mg (Lopressor).....	13
medroxyprogesterone acetate tab 5 mg (Provera).....	8	metronidazole tab 250 mg (Flagyl).....	3
medroxyprogesterone acetate tab 10 mg (Provera).....	8	metronidazole tab 500 mg (Flagyl).....	3
megestrol acetate tab 20 mg.....	5	minocycline hcl cap 50 mg (Minocin).....	1
megestrol acetate tab 40 mg.....	5	minoxidil tab 2.5 mg.....	15
MEKINIST- trametinib dimethyl sulfoxide tab 0.5 mg (base equivalent).....	5	minoxidil tab 10 mg.....	15
MEKINIST- trametinib dimethyl sulfoxide tab 2 mg (base equivalent).....	5	mirtazapine tab 15 mg (Remeron).....	24
meloxicam tab 7.5 mg (Mobic).....	30	mirtazapine tab 30 mg (Remeron).....	24
meloxicam tab 15 mg (Mobic).....	30	mirtazapine tab 45 mg (Remeron).....	24
memantine hcl tab 5 mg (Namenda).....	27	misoprostol tab 100 mcg (Cytotec).....	21
memantine hcl tab 10 mg (Namenda).....	27	misoprostol tab 200 mcg (Cytotec).....	21
MESNEX- mesna tab 400 mg.....	5	mometasone furoate oint 0.1% (Elocon).....	42
metformin hcl tab er 24hr 500 mg (Glucophage xr).....	9	montelukast sodium chew tab 4 mg (base equiv) (Singulair).....	20
metformin hcl tab er 24hr 750 mg (Glucophage xr).....	9	montelukast sodium chew tab 5 mg (base equiv) (Singulair).....	20
metformin hcl tab 500 mg (Glucophage).....	9	montelukast sodium tab 10 mg (base equiv) (Singulair).....	20
metformin hcl tab 850 mg (Glucophage).....	9	morphine sulfate oral soln 10 mg/5ml.....	28
metformin hcl tab 1000 mg (Glucophage).....	9	morphine sulfate tab er 15 mg (Ms contin).....	28
methadone hcl tab 10 mg (Dolophine).....	28	MOVANTIK- naloxegol oxalate tab 12.5 mg (base equivalent).....	22
methadone hcl tab 5 mg (Dolophine hcl).....	28	MOVANTIK- naloxegol oxalate tab 25 mg (base equivalent).....	22
methimazole tab 5 mg (Tapazole).....	12	MULTAQ- dronedarone hcl tab 400 mg (base equivalent).....	14
methimazole tab 10 mg (Tapazole).....	12	mupirocin oint 2% (Bactroban).....	42
methocarbamol tab 750 mg (Robaxin-750).....	33	MYFEMBREE- relugolix-estradiol-norethindrone acetate tab 40-1-0.5 mg.....	7
methocarbamol tab 500 mg (Robaxin).....	33	MYLERAN- busulfan tab 2 mg.....	5
methotrexate sodium inj 50 mg/2ml (25 mg/ml).....	5		
methotrexate sodium inj pf 50 mg/2ml (25 mg/ml).....	5	N	
methotrexate sodium inj pf 250 mg/10ml (25 mg/ml).....	5	nabumetone tab 500 mg.....	30

naproxen tab 250 mg (Naprosyn).....	30	norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg (Ortho-cyclen).....	8
naproxen tab 375 mg (Naprosyn).....	30	norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg (Ortho tri-cyclen).....	8
naproxen tab 500 mg (Naprosyn).....	30	norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg (Ortho tri-cyclen lo).....	8
NATACYN- natamycin ophth susp 5%.....	41	nortriptyline hcl cap 10 mg (Pamelor).....	24
neomycin-polymyxin-dexamethasone ophth oint 0.1% (Maxitrol).....	41	nortriptyline hcl cap 25 mg (Pamelor).....	24
neomycin-polymyxin-dexamethasone ophth susp 0.1% (Maxitrol).....	41	nortriptyline hcl cap 50 mg (Pamelor).....	24
neomycin sulfate tab 500 mg.....	1	nortriptyline hcl cap 75 mg (Pamelor).....	24
nevirapine tab 200 mg (Viramune).....	2	NORVIR- ritonavir oral soln 80 mg/ml.....	2
NEXAVAR- sorafenib tosylate tab 200 mg (base equivalent).....	5	NORVIR- ritonavir powder packet 100 mg.....	3
NEXIUM- esomeprazole magnesium for delayed release susp packet 5 mg.....	21	NOVOEIGHT- antihemophilic fact rcmb (bd trunc-rviii) for inj 250 unit.....	38
NEXIUM- esomeprazole magnesium for delayed release susp pack 2.5 mg.....	21	NOVOEIGHT- antihemophilic fact rcmb (bd trunc-rviii) for inj 500 unit.....	39
NEXLETOL- bempedoic acid tab 180 mg.....	17	NOVOEIGHT- antihemophilic fact rcmb (bd trunc-rviii) for inj 1000 unit.....	39
NEXLIZET- bempedoic acid-ezetimibe tab 180-10 mg.....	17	NOVOEIGHT- antihemophilic fact rcmb (bd trunc-rviii) for inj 1500 unit.....	39
NICOTROL INHALER- nicotine inhaler system 10 mg (4 mg delivered).....	27	NOVOEIGHT- antihemophilic fact rcmb (bd trunc-rviii) for inj 2000 unit.....	39
NICOTROL NS- nicotine nasal spray 10 mg/ml (0.5 mg/ spray).....	27	NOVOEIGHT- antihemophilic fact rcmb (bd trunc-rviii) for inj 3000 unit.....	39
nifedipine tab er 24hr 30 mg (Adalat cc).....	14	NOVOLIN 70/30 FLEXPEN- insulin nph & regular susp pen-inj 100 unit/ml (70-30).....	11
nifedipine tab er 24hr osmotic release 30 mg (Procardia xl).....	14	NOVOLIN 70/30- insulin nph isophane & regular human inj 100 unit/ml (70-30).....	11
nitroglycerin sl tab 0.4 mg (Nitrostat).....	13	NOVOLIN N FLEXPEN- insulin nph (human) (isophane) susp pen-injector 100 unit/ml.....	11
NITYR- nitisinone tab 2 mg.....	12	NOVOLIN N- insulin nph (human) (isophane) inj 100 unit/ml.....	11
NITYR- nitisinone tab 5 mg.....	12	NOVOLIN R FLEXPEN- insulin regular (human) soln pen-injector 100 unit/ml.....	11
NITYR- nitisinone tab 10 mg.....	12	NOVOLIN R- insulin regular (human) inj 100 unit/ml.....	11
NIVESTYM- filgrastim-aafi inj 300 mcg/ml.....	34	NOVOLOG FLEXPEN- insulin aspart soln pen-injector 100 unit/ml.....	11
NIVESTYM- filgrastim-aafi inj 480 mcg/1.6ml (300 mcg/ml).....	34	NOVOLOG- insulin aspart inj soln 100 unit/ml.....	11
NIVESTYM- filgrastim-aafi soln prefilled syringe 300 mcg/0.5ml.....	34	NOVOLOG MIX 70/30- insulin aspart prot & aspart (human) inj 100 unit/ml (70-30).....	11
NIVESTYM- filgrastim-aafi soln prefilled syringe 480 mcg/0.8ml.....	34	NOVOLOG MIX 70/30 PREFILL- insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30).....	11
NORDITROPIN FLEXPEN- somatropin solution pen-injector 5 mg/1.5ml.....	12	NOVOLOG PENFILL- insulin aspart soln cartridge 100 unit/ml.....	11
NORDITROPIN FLEXPEN- somatropin solution pen-injector 10 mg/1.5ml.....	12	NOVOSEVEN RT- coagulation factor viia (recomb) for inj 1 mg (1000 mcg).....	39
NORDITROPIN FLEXPEN- somatropin solution pen-injector 15 mg/1.5ml.....	12	NOVOSEVEN RT- coagulation factor viia (recomb) for inj 2 mg (2000 mcg).....	39
NORDITROPIN FLEXPEN- somatropin solution pen-injector 30 mg/3ml.....	12	NOVOSEVEN RT- coagulation factor viia (recomb) for inj 5 mg (5000 mcg).....	39
norethindrone & ethinyl estradiol tab 1 mg-35 mcg (Norinyl 1+35).....	8	NOVOSEVEN RT- coagulation factor viia (recomb) for inj 8 mg (8000 mcg).....	39
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg (Loestrin fe 1/20).....	8	NOXAFIL- posaconazole susp 40 mg/ml.....	2
norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg (Loestrin fe 1.5/30).....	8		
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg (Loestrin 1/20-21).....	8		
norethindrone tab 0.35 mg (Nor-qd).....	8		

NUBEQA- darolutamide tab 300 mg.....	5	olanzapine tab 15 mg (Zyprexa).....	25
NUCALA- mepolizumab subcutaneous solution auto-injector 100 mg/ml.....	20	olanzapine tab 20 mg (Zyprexa).....	25
NUCALA- mepolizumab subcutaneous solution pref syringe 100 mg/ml.....	20	olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg (Benicar hct).....	16
NURTEC- rimegepant sulfate tab disint 75 mg.....	31	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 1500 unit.....	39	olmesartan medoxomil tab 20 mg (Benicar).....	16
NUWIQ- antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 2000 unit.....	39	olmesartan medoxomil tab 40 mg (Benicar).....	16
NUWIQ- antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 2500 unit.....	39	omeprazole cap delayed release 10 mg (Prilosec).....	21
NUWIQ- antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 3000 unit.....	39	omeprazole cap delayed release 20 mg (Prilosec).....	21
NUWIQ- antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 4000 unit.....	39	omeprazole cap delayed release 40 mg (Prilosec).....	21
NUWIQ- antihemophil fact rcmb (bdd-rfviii,sim) for inj kit 250 unit.....	39	ondansetron hcl tab 4 mg (Zofran).....	21
NUWIQ- antihemophil fact rcmb (bdd-rfviii,sim) for inj kit 500 unit.....	39	ondansetron hcl tab 8 mg (Zofran).....	21
NUWIQ- antihemophilic factor rcmb (bdd-rfviii,sim) for inj 250 unit.....	39	ondansetron orally disintegrating tab 4 mg (Zofran odt).....	21
NUWIQ- antihemophilic factor rcmb (bdd-rfviii,sim) for inj 500 unit.....	39	ondansetron orally disintegrating tab 8 mg (Zofran odt).....	22
NUWIQ- antihemophilic factor rcmb (bdd-rfviii,sim) for inj 1000 unit.....	39	OPSUMIT- macitentan tab 10 mg.....	18
NUWIQ- antihemophilic factor rcmb (bdd-rfviii,sim) for inj 1500 unit.....	39	ORFADIN- nitisinone cap 20 mg.....	12
NUWIQ- antihemophilic factor rcmb (bdd-rfviii,sim) for inj 2000 unit.....	39	ORFADIN- nitisinone susp 4 mg/ml.....	13
NUWIQ- antihemophilic factor rcmb (bdd-rfviii,sim) for inj 2500 unit.....	39	ORIAHNN- elagolix-estradiol-noreth 300-1-0.5mg & elagolix 300mg cap pack.....	7
NUWIQ- antihemophilic factor rcmb (bdd-rfviii,sim) for inj 3000 unit.....	39	ORILISSA- elagolix sodium tab 150 mg (base equiv).....	13
NUWIQ- antihemophilic factor rcmb (bdd-rfviii,sim) for inj 4000 unit.....	39	ORILISSA- elagolix sodium tab 200 mg (base equiv).....	13
nystatin cream 100000 unit/gm.....	42	OTEZLA- apremilast tab 30 mg.....	30
nystatin oint 100000 unit/gm.....	42	OTEZLA- apremilast tab starter therapy pack 10 mg & 20 mg & 30 mg.....	30
O		oxcarbazepine tab 150 mg (Trileptal).....	32
OBIZUR- antihemophilic factor (recomb porc) rpfviii for inj 500 unit.....	39	oxybutynin chloride syrup 5 mg/5ml.....	22
ODEFSEY- emtricitabine- rilpivirine-tenofovir af tab 200-25-25 mg.....	3	oxybutynin chloride tab er 24hr 15 mg.....	22
ofloxacin ophth soln 0.3% (Ocuflox).....	41	oxybutynin chloride tab er 24hr 5 mg (Ditropan xl).....	22
olanzapine tab 2.5 mg (Zyprexa).....	25	oxybutynin chloride tab er 24hr 10 mg (Ditropan xl).....	22
olanzapine tab 5 mg (Zyprexa).....	25	oxybutynin chloride tab 5 mg.....	22
olanzapine tab 7.5 mg (Zyprexa).....	25	oxycodone hcl tab 10 mg.....	28
olanzapine tab 10 mg (Zyprexa).....	25	oxycodone hcl tab 5 mg (Roxicodone).....	28
		oxycodone w/ acetaminophen tab 5-325 mg (Percocet).....	28
		OZEMPIC- semaglutide soln pen-inj 1 mg/dose (4 mg/3ml).....	9
		OZEMPIC- semaglutide soln pen-inj 0.25 or 0.5 mg/dose (2 mg/1.5ml).....	9
		P	
		pantoprazole sodium ec tab 20 mg (base equiv) (Protonix).....	21
		pantoprazole sodium ec tab 40 mg (base equiv) (Protonix).....	21
		paroxetine hcl tab 10 mg (Paxil).....	24
		paroxetine hcl tab 20 mg (Paxil).....	24

paroxetine hcl tab 30 mg (Paxil).....	24	pramipexole dihydrochloride tab 0.5 mg (Mirapex).....	32
paroxetine hcl tab 40 mg (Paxil).....	24	pramipexole dihydrochloride tab 0.75 mg (Mirapex).....	32
PEGASYS- peginterferon alfa-2a inj 180 mcg/ml.....	3	pramipexole dihydrochloride tab 1 mg (Mirapex).....	32
PEGASYS- peginterferon alfa-2a soln prefilled syr 180 mcg/0.5ml.....	3	pramipexole dihydrochloride tab 1.5 mg (Mirapex).....	32
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm (Golytely).....	21	pravastatin sodium tab 10 mg.....	17
peg 3350-kcl-sod bicarb-nacl for soln 420 gm (Nulytely/flavor pack).....	21	pravastatin sodium tab 20 mg (Pravachol).....	17
penicillin v potassium tab 250 mg.....	1	pravastatin sodium tab 40 mg (Pravachol).....	17
penicillin v potassium tab 500 mg.....	1	pravastatin sodium tab 80 mg (Pravachol).....	17
phendimetrazine tartrate tab 35 mg.....	26	PREDNISOLONE ACETATE- prednisolone acetate ophth susp 1%.....	41
phenobarbital tab 15 mg.....	25	PREDNISOLONE SODIUM PHOSP- prednisolone sodium phosphate ophth soln 1%.....	41
phenobarbital tab 30 mg.....	25	prednisolone sod phosphate oral soln 15 mg/5ml (base equiv).....	6
phenobarbital tab 60 mg.....	25	PREDNISONONE- prednisone oral soln 5 mg/5ml.....	6
phenobarbital tab 100 mg.....	25	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).....	9	prednisone tab 50 mg.....	7
pioglitazone hcl tab 30 mg (base equiv) (Actos).....	9	prednisone tab therapy pack 5 mg (21).....	7
pioglitazone hcl tab 45 mg (base equiv) (Actos).....	9	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	pregabalin cap 25 mg (Lyrica).....	32
PIQRAY 300MG DAILY DOSE- alpelisib tab pack 300 mg daily dose (2x150 mg tab).....	5	pregabalin cap 50 mg (Lyrica).....	32
PIQRAY 200MG DAILY DOSE- alpelisib tab therapy pack 200 mg daily dose.....	5	pregabalin cap 75 mg (Lyrica).....	32
PLEGRIDY- peginterferon beta-1a im soln prefilled syr 125 mcg/0.5ml.....	27	pregabalin cap 100 mg (Lyrica).....	32
PLEGRIDY- peginterferon beta-1a soln pen-injector 125 mcg/0.5ml.....	27	pregabalin cap 150 mg (Lyrica).....	32
PLEGRIDY- peginterferon beta-1a soln prefilled syringe 125 mcg/0.5ml.....	27	pregabalin cap 200 mg (Lyrica).....	32
PLEGRIDY STARTER PACK- peginterferon beta-1a soln pen-inj 63 & 94 mcg/0.5ml pack.....	27	pregabalin cap 225 mg (Lyrica).....	32
PLEGRIDY STARTER PACK- peginterferon beta-1a soln pref syr 63 & 94 mcg/0.5ml pack.....	27	pregabalin cap 300 mg (Lyrica).....	32
polymyxin b-trimethoprim ophth soln 10000 unit/ ml-0.1% (Polytrim).....	41	PREMARIN- estrogens, conjugated tab 0.3 mg.....	7
potassium chloride microencapsulated crys er tab 10 meq.....	33	PREMARIN- estrogens, conjugated tab 0.45 mg.....	7
potassium chloride microencapsulated crys er tab 20 meq.....	33	PREMARIN- estrogens, conjugated tab 0.625 mg.....	7
potassium chloride tab er 10 meq (K-tab).....	33	PREMARIN- estrogens, conjugated tab 0.9 mg.....	7
potassium chloride tab er 8 meq (600 mg).....	33	PREMARIN- estrogens, conjugated tab 1.25 mg.....	7
potassium chloride tab er 20 meq (1500 mg) (K- tab).....	33	PREMPHASE- conj est 0.625(14)/conj est-medroxypro ac tab 0.625-5mg(14).....	7
pramipexole dihydrochloride tab 0.125 mg (Mirapex).....	32	PREMPRO- conjugated estrogen-medroxyprogest acetate tab 0.3-1.5 mg.....	7
pramipexole dihydrochloride tab 0.25 mg (Mirapex).....	32	PREMPRO- conjugated estrogen-medroxyprogest acetate tab 0.45-1.5 mg.....	7
		PREMPRO- conjugated estrogen-medroxyprogest acetate tab 0.625-2.5 mg.....	7
		PREMPRO- conjugated estrogen-medroxyprogest acetate tab 0.625-5 mg.....	7
		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 oral susp 100 mg/ml.....	3	ramipril cap 5 mg (Altace).....	16
PREZISTA- darunavir tab 75 mg.....	3	ramipril cap 10 mg (Altace).....	16
PREZISTA- darunavir tab 150 mg.....	3	RAPAMUNE- sirolimus oral soln 1 mg/ml.....	43
PREZISTA- darunavir tab 600 mg.....	3	REBIF- interferon beta-1a soln pref syr 22 mcg/0.5ml.....	27
PREZISTA- darunavir tab 800 mg.....	3	REBIF- interferon beta-1a soln pref syr 44 mcg/0.5ml.....	27
PRIFTIN- rifapentine tab 150 mg.....	1	REBIF REBIDOSE- interferon beta-1a soln auto-inj 22 mcg/0.5ml.....	27
primidone tab 50 mg (Mysoline).....	32	REBIF REBIDOSE- interferon beta-1a soln auto-inj 44 mcg/0.5ml.....	27
prochlorperazine maleate tab 5 mg (base equivalent) (Compazine).....	25	REBIF REBIDOSE TITRATION- interferon beta-1a auto-inj 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml.....	27
PROCRIT- epoetin alfa inj 2000 unit/ml.....	34	REBIF TITRATION PACK- interferon beta-1a pref syr 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml.....	27
PROCRIT- epoetin alfa inj 3000 unit/ml.....	34	REBINYN- coagulation factor ix recomb glycopegylated for inj 500 unt.....	39
PROCRIT- epoetin alfa inj 4000 unit/ml.....	34	REBINYN- coagulation factor ix recomb glycopegylated for inj 1000 unt.....	40
PROCRIT- epoetin alfa inj 10000 unit/ml.....	34	REBINYN- coagulation factor ix recomb glycopegylated for inj 2000 unt.....	40
PROCRIT- epoetin alfa inj 20000 unit/ml.....	34	RECOMBINATE- antihemophilic factor recomb (rfviii) for inj 220-400 unit.....	40
PROCRIT- epoetin alfa inj 40000 unit/ml.....	34	RECOMBINATE- antihemophilic factor recomb (rfviii) for inj 401-800 unit.....	40
PROFILNINE- factor ix complex for inj 500 unit.....	39	RECOMBINATE- antihemophilic factor recomb (rfviii) for inj 801-1240 unit.....	40
PROFILNINE- factor ix complex for inj 1000 unit.....	39	RECOMBINATE- antihemophilic factor recomb (rfviii) for inj 1241-1800 unit.....	40
PROFILNINE- factor ix complex for inj 1500 unit.....	39	RECOMBINATE- antihemophilic factor recomb (rfviii) for inj 1801-2400 unit.....	40
promethazine-dm syrup 6.25-15 mg/5ml.....	18	REDITREX- methotrexate soln prefilled syringe 7.5 mg/0.3ml.....	30
promethazine hcl syrup 6.25 mg/5ml.....	18	REDITREX- methotrexate soln prefilled syringe 10 mg/0.4ml.....	30
promethazine hcl tab 12.5 mg.....	18	REDITREX- methotrexate soln prefilled syringe 12.5 mg/0.5ml.....	30
promethazine hcl tab 25 mg.....	18	REDITREX- methotrexate soln prefilled syringe 15 mg/0.6ml.....	30
promethazine hcl tab 50 mg.....	18	REDITREX- methotrexate soln prefilled syringe 17.5 mg/0.7ml.....	30
promethazine w/ codeine syrup 6.25-10 mg/5ml.....	18	REDITREX- methotrexate soln prefilled syringe 20 mg/0.8ml.....	30
propafenone hcl tab 150 mg.....	14	REDITREX- methotrexate soln prefilled syringe 22.5 mg/0.9ml.....	30
PROPRANOLOL HCL- propranolol hcl oral soln 40 mg/5ml.....	13	REDITREX- methotrexate soln prefilled syringe 25 mg/ ml.....	30
propranolol hcl tab 10 mg.....	13	REPATHA- evolocumab subcutaneous soln prefilled syringe 140 mg/ml.....	17
propranolol hcl tab 20 mg.....	13	REPATHA PUSHTRONEX SYSTEM- evolocumab subcutaneous soln cartridge/infusor 420 mg/3.5ml.....	17
propranolol hcl tab 40 mg.....	13	REPATHA SURECLICK- evolocumab subcutaneous soln auto-injector 140 mg/ml.....	17
PULMOZYME- dornase alfa inhal soln 2.5 mg/2.5ml.....	21	RETACRIT- epoetin alfa-epbx inj 2000 unit/ml.....	34
PURIXAN- mercaptopurine susp 2000 mg/100ml (20 mg/ ml).....	5	RETACRIT- epoetin alfa-epbx inj 3000 unit/ml.....	34
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		

RETACRIT- epoetin alfa-epbx inj 4000 unit/ml.....	35	ROZLYTREK- entrectinib cap 200 mg.....	5
RETACRIT- epoetin alfa-epbx inj 10000 unit/ml.....	35	RUBRACA- rucaparib camsylate tab 200 mg (base equivalent).....	5
RETACRIT- epoetin alfa-epbx inj 20000 unit/ml.....	35	RUBRACA- rucaparib camsylate tab 250 mg (base equivalent).....	5
RETACRIT- epoetin alfa-epbx inj 40000 unit/ml.....	35	RUBRACA- rucaparib camsylate tab 300 mg (base equivalent).....	5
RETEVMO- selpercatinib cap 40 mg.....	5	RYBELSUS- semaglutide tab 3 mg.....	9
RETEVMO- selpercatinib cap 80 mg.....	5	RYBELSUS- semaglutide tab 7 mg.....	9
REVLIMID- lenalidomide cap 5 mg.....	43	RYBELSUS- semaglutide tab 14 mg.....	9
REVLIMID- lenalidomide cap 10 mg.....	43	RYDAPT- midostaurin cap 25 mg.....	5
REVLIMID- lenalidomide cap 15 mg.....	43		
REVLIMID- lenalidomide cap 20 mg.....	43	S	
REVLIMID- lenalidomide cap 25 mg.....	43	SAVELLA- milnacipran hcl tab 12.5 mg.....	27
REVLIMID- lenalidomide caps 2.5 mg.....	43	SAVELLA- milnacipran hcl tab 25 mg.....	27
REYVOW- lasmiditan succinate tab 50 mg.....	31	SAVELLA- milnacipran hcl tab 50 mg.....	27
REYVOW- lasmiditan succinate tab 100 mg.....	31	SAVELLA- milnacipran hcl tab 100 mg.....	27
RINVOQ- upadacitinib tab er 24hr 15 mg.....	30	SAVELLA TITRATION PACK- milnacipran hcl tab 12.5 mg (5) & 25 mg (8) & 50 mg (42) pak.....	27
RINVOQ- upadacitinib tab er 24hr 30 mg.....	30	selenium sulfide lotion 2.5%.....	42
RINVOQ- upadacitinib tab er 24hr 45 mg.....	30	SEMGLEE- insulin glargine-yfgn inj 100 unit/ml.....	11
risperidone tab 0.25 mg (Risperdal).....	25	SEMGLEE- insulin glargine-yfgn soln pen-injector 100 unit/ml.....	11
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	sildenafil citrate tab 25 mg (Viagra).....	18
RIXUBIS- coagulation factor ix (recombinant) for inj 1000 unit.....	40	sildenafil citrate tab 50 mg (Viagra).....	18
RIXUBIS- coagulation factor ix (recombinant) for inj 2000 unit.....	40	sildenafil citrate tab 100 mg (Viagra).....	18
RIXUBIS- coagulation factor ix (recombinant) for inj 3000 unit.....	40	silver sulfadiazine cream 1% (Silvadene).....	42
rizatriptan benzoate oral disintegrating tab 5 mg (base eq) (Maxalt-mlt).....	31	SIMBRINZA- brinzolamide-brimonidine tartrate ophth susp 1-0.2%.....	41
rizatriptan benzoate oral disintegrating tab 10 mg (base eq) (Maxalt-mlt).....	31	SIMPONI- golimumab subcutaneous soln auto-injector 100 mg/ml.....	30
rizatriptan benzoate tab 5 mg (base equivalent) (Maxalt).....	31	SIMPONI- golimumab subcutaneous soln prefilled syringe 100 mg/ml.....	30
rizatriptan benzoate tab 10 mg (base equivalent) (Maxalt).....	31	simvastatin tab 5 mg (Zocor).....	17
ropinirole hydrochloride tab 0.25 mg (Requip).....	32	simvastatin tab 10 mg (Zocor).....	17
ropinirole hydrochloride tab 0.5 mg (Requip).....	32	simvastatin tab 20 mg (Zocor).....	17
ropinirole hydrochloride tab 1 mg (Requip).....	32	simvastatin tab 40 mg (Zocor).....	17
ropinirole hydrochloride tab 2 mg (Requip).....	33	simvastatin tab 80 mg (Zocor).....	17
ropinirole hydrochloride tab 3 mg (Requip).....	33	SKYRIZI PEN- risankizumab-rzaa soln auto-injector 150 mg/ml.....	42
ropinirole hydrochloride tab 4 mg (Requip).....	33	SKYRIZI- risankizumab-rzaa soln prefilled syringe 150 mg/ ml.....	42
ropinirole hydrochloride tab 5 mg (Requip).....	33	SKYRIZI- risankizumab-rzaa sol prefilled syringe 2 x 75 mg/0.83ml kit.....	42
rosuvastatin calcium tab 5 mg (Crestor).....	17		
rosuvastatin calcium tab 10 mg (Crestor).....	17		
rosuvastatin calcium tab 20 mg (Crestor).....	17		
rosuvastatin calcium tab 40 mg (Crestor).....	17		
ROZLYTREK- entrectinib cap 100 mg.....	5		

sodium chloride soln nebu 3%	18	STRENSIQ- asfotase alfa subcutaneous inj 18	
sodium chloride soln nebu 7% (Hypersal)	18	mg/0.45ml.....	13
sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf)		STRENSIQ- asfotase alfa subcutaneous inj 28	
(Luride)	33	mg/0.7ml.....	13
sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf)		STRENSIQ- asfotase alfa subcutaneous inj 40 mg/ml.....	13
(Luride)	33	STRENSIQ- asfotase alfa subcutaneous inj 80	
sodium fluoride chew tab 1 mg f (from 2.2 mg naf)		mg/0.8ml.....	13
(Luride)	33	STRIVERDI RESPIMAT- olodaterol hcl inhal aerosol soln	
sodium fluoride cream 1.1% (Prevident 5000 plus)	41	2.5 mcg/act (base equiv).....	20
sodium fluoride gel 1.1% (0.5% f) (Prevident		sulfamethoxazole-trimethoprim tab 400-80 mg	
fluoride)	41	(Bactrim)	3
sodium fluoride paste 1.1% (Prevident 5000 boost)	41	sulfamethoxazole-trimethoprim tab 800-160 mg	
sodium fluoride-potassium nitrate gel 1.1-5%		(Bactrim ds)	3
(Prevident 5000 sensi)	42	sulindac tab 150 mg	30
sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)		sulindac tab 200 mg	30
(Luride)	33	sumatriptan succinate tab 25 mg (Imitrex)	31
SOLIQUA 100/33- insulin glargine-lixisenatide sol pen-inj		sumatriptan succinate tab 50 mg (Imitrex)	31
100-33 unit-mcg/ml.....	9	sumatriptan succinate tab 100 mg (Imitrex)	31
SOOLANTRA- ivermectin cream 1%.....	42	SUNOSI- solriamfetol hcl tab 75 mg (base equiv).....	26
sotalol hcl (afib/af) tab 80 mg (Betapace af)	13	SUNOSI- solriamfetol hcl tab 150 mg (base equiv).....	26
sotalol hcl (afib/af) tab 120 mg (Betapace af)	13	SUPREP BOWEL PREP KIT- sod sulfate-pot sulf-mg sulf	
sotalol hcl tab 80 mg (Betapace)	13	oral sol 17.5-3.13-1.6 gm/177ml.....	21
sotalol hcl tab 120 mg (Betapace)	13	SYMBICORT- budesonide-formoterol fumarate dihyd	
SOVALDI- sofosbuvir pellet pack 150 mg.....	3	aerosol 80-4.5 mcg/act.....	20
SOVALDI- sofosbuvir pellet pack 200 mg.....	3	SYMBICORT- budesonide-formoterol fumarate dihyd	
SOVALDI- sofosbuvir tab 200 mg.....	3	aerosol 160-4.5 mcg/act.....	20
SOVALDI- sofosbuvir tab 400 mg.....	3	SYMDEKO- tezacaftor-ivacaftor 50-75 mg & ivacaftor 75	
SPIRIVA HANDIHALER- tiotropium bromide monohydrate		mg tab tbpk.....	21
inhal cap 18 mcg (base equiv).....	20	SYMDEKO- tezacaftor-ivacaftor 100-150 mg & ivacaftor	
SPIRIVA RESPIMAT- tiotropium bromide monohydrate		150 mg tab tbpk.....	21
inhal aerosol 1.25 mcg/act.....	20	SYMJEPI- epinephrine soln prefilled syringe 0.15	
SPIRIVA RESPIMAT- tiotropium bromide monohydrate		mg/0.3ml (1:2000).....	17
inhal aerosol 2.5 mcg/act.....	20	SYMJEPI- epinephrine solution prefilled syringe 0.3	
spironolactone tab 25 mg (Aldactone)	16	mg/0.3ml (1:1000).....	17
spironolactone tab 50 mg (Aldactone)	16	SYMPROIC- naldemedine tosylate tab 0.2 mg (base	
spironolactone tab 100 mg (Aldactone)	16	equivalent).....	22
SPRYCEL- dasatinib tab 20 mg.....	5	SYMTUZA- darunavir-cobic-emtricitab-tenofov af tab	
SPRYCEL- dasatinib tab 50 mg.....	5	800-150-200-10 mg.....	3
SPRYCEL- dasatinib tab 70 mg.....	5	SYNJARDY- empagliflozin-metformin hcl tab 12.5-1000	
SPRYCEL- dasatinib tab 80 mg.....	5	mg.....	10
SPRYCEL- dasatinib tab 100 mg.....	5	SYNJARDY- empagliflozin-metformin hcl tab 12.5-500	
SPRYCEL- dasatinib tab 140 mg.....	5	mg.....	10
stannous fluoride conc 0.63%	42	SYNJARDY- empagliflozin-metformin hcl tab 5-500	
STELARA- ustekinumab inj 45 mg/0.5ml.....	42	mg.....	10
STELARA- ustekinumab soln prefilled syringe 45		SYNJARDY- empagliflozin-metformin hcl tab 5-1000	
mg/0.5ml.....	42	mg.....	10
STELARA- ustekinumab soln prefilled syringe 90 mg/		SYNJARDY XR- empagliflozin-metformin hcl tab er 24hr	
ml.....	42	5-1000 mg.....	10
STIMATE- desmopressin acetate nasal soln 1.5 mg/		SYNJARDY XR- empagliflozin-metformin hcl tab er 24hr	
ml.....	13	10-1000 mg.....	10
STIOLTO RESPIMAT- tiotropium br-olodaterol inhal aero		SYNJARDY XR- empagliflozin-metformin hcl tab er 24hr	
soln 2.5-2.5 mcg/act.....	20	12.5-1000 mg.....	10

SYNJARDY XR- empagliflozin-metformin hcl tab er 24hr 25-1000 mg.....	10	TIVICAY PD- dolutegravir sodium tab for oral susp 5 mg (base equiv).....	3
T		tizanidine hcl tab 2 mg (base equivalent).....	33
TABLOID- thioguanine tab 40 mg.....	5	tizanidine hcl tab 4 mg (base equivalent) (Zanaflex).....	33
TABRECTA- capmatinib hcl tab 150 mg.....	5	tobramycin ophth soln 0.3% (Tobrex).....	41
TABRECTA- capmatinib hcl tab 200 mg.....	5	topiramate tab 25 mg (Topamax).....	32
TAFINLAR- dabrafenib mesylate cap 50 mg (base equivalent).....	5	topiramate tab 50 mg (Topamax).....	32
TAFINLAR- dabrafenib mesylate cap 75 mg (base equivalent).....	5	topiramate tab 100 mg (Topamax).....	32
TAKHZYRO- lanadelumab-flyo inj 300 mg/2ml (150 mg/ ml).....	40	topiramate tab 200 mg (Topamax).....	32
TAKHZYRO- lanadelumab-flyo soln pref syringe 300 mg/2ml (150 mg/ml).....	40	torseamide tab 5 mg (Demadex).....	16
TALZENNA- talazoparib tosylate cap 0.25 mg (base equivalent).....	6	torseamide tab 10 mg (Demadex).....	16
TALZENNA- talazoparib tosylate cap 0.5 mg (base equivalent).....	6	torseamide tab 20 mg (Demadex).....	16
TALZENNA- talazoparib tosylate cap 0.75 mg (base equivalent).....	6	torseamide tab 100 mg (Demadex).....	16
TALZENNA- talazoparib tosylate cap 1 mg (base equivalent).....	6	TOUJEO MAX SOLOSTAR- insulin glargine soln pen- injector 300 unit/ml (2 unit dial).....	11
tamoxifen citrate tab 10 mg (base equivalent).....	6	TOUJEO SOLOSTAR- insulin glargine soln pen-injector 300 unit/ml (1 unit dial).....	11
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).....	16
TAZORAC- tazarotene cream 0.05%.....	42	trandolapril tab 2 mg (Mavik).....	16
TAZORAC- tazarotene gel 0.05%.....	42	trandolapril tab 4 mg (Mavik).....	16
TAZORAC- tazarotene gel 0.1%.....	43	trazodone hcl tab 50 mg.....	24
temazepam cap 15 mg (Restoril).....	25	trazodone hcl tab 100 mg.....	24
temazepam cap 30 mg (Restoril).....	25	trazodone hcl tab 150 mg.....	24
TEMIXYS- lamivudine-tenofovir disoproxil fumarate tab 300-300 mg.....	3	TRELEGY ELLIPTA- fluticasone-umeclidinium-vilanterol aepb 100-62.5-25 mcg/inh.....	20
terazosin hcl cap 1 mg (base equivalent).....	16	TRELEGY ELLIPTA- fluticasone-umeclidinium-vilanterol aepb 200-62.5-25 mcg/inh.....	20
terazosin hcl cap 2 mg (base equivalent).....	16	TREMFYA- guselkumab soln pen-injector 100 mg/ml.....	43
terazosin hcl cap 5 mg (base equivalent).....	16	TREMFYA- guselkumab soln prefilled syringe 100 mg/ ml.....	43
terazosin hcl cap 10 mg (base equivalent).....	16	TRESIBA FLEXTOUCH- insulin degludec soln pen-injector 100 unit/ml.....	11
terbinafine hcl tab 250 mg (Lamisil).....	2	TRESIBA FLEXTOUCH- insulin degludec soln pen-injector 200 unit/ml.....	12
TEST STRIPS – CONTOUR, CONTOUR NEXT.....	43	TRESIBA- insulin degludec inj 100 unit/ml.....	11
THALOMID- thalidomide cap 50 mg.....	43	TRETTEN- coagulation factor xiii a-subunit for inj 2000-3125 unit.....	40
THALOMID- thalidomide cap 100 mg.....	43	triamcinolone acetonide cream 0.025%.....	43
THALOMID- thalidomide cap 150 mg.....	43	triamcinolone acetonide cream 0.1%.....	43
THALOMID- thalidomide cap 200 mg.....	43	triamcinolone acetonide cream 0.5%.....	43
thyroid tab 15 mg (1/4 grain) (Armour thyroid).....	12	triamcinolone acetonide oint 0.025%.....	43
thyroid tab 30 mg (1/2 grain) (Armour thyroid).....	12	triamcinolone acetonide oint 0.1%.....	43
timolol maleate ophth soln 0.25% (Timoptic).....	41	triamcinolone acetonide oint 0.5%.....	43
timolol maleate ophth soln 0.5% (Timoptic).....	41	triamterene & hydrochlorothiazide cap 37.5-25 mg (Dyazide).....	16
TIVICAY- dolutegravir sodium tab 10 mg (base equiv).....	3	triamterene & hydrochlorothiazide tab 37.5-25 mg (Maxzide-25).....	16
TIVICAY- dolutegravir sodium tab 25 mg (base equiv).....	3		
TIVICAY- dolutegravir sodium tab 50 mg (base equiv).....	3		

triamterene & hydrochlorothiazide tab 75-50 mg (Maxzide)	17	VARENICLINE TARTRATE- varenicline tartrate tab 0.5 mg (base equiv).....	28
TRIFLURIDINE- trifluridine ophth soln 1%.....	41	VARENICLINE TARTRATE- varenicline tartrate tab 1 mg (base equiv).....	28
trihexyphenidyl hcl tab 2 mg	33	VELPHORO- sucroferric oxyhydroxide chew tab 500 mg.....	22
trihexyphenidyl hcl tab 5 mg	33	VELTASSA- patiomer sorbitex calcium for susp packet 8.4 gm (base eq).....	43
TRIJARDY XR- empagliflozin-linagliptin-metformin tab er 24hr 12.5-2.5-1000mg.....	10	VELTASSA- patiomer sorbitex calcium for susp packet 16.8 gm (base eq).....	43
TRIJARDY XR- empagliflozin-linagliptin-metformin tab er 24hr 5-2.5-1000mg.....	10	VELTASSA- patiomer sorbitex calcium for susp packet 25.2 gm (base eq).....	43
TRIJARDY XR- empagliflozin-linagliptin-metformin tab er 24hr 10-5-1000 mg.....	10	VENCLEXTA STARTING PACK- venetoclax tab therapy starter pack 10 & 50 & 100 mg.....	6
TRIJARDY XR- empagliflozin-linagliptin-metformin tab er 24hr 25-5-1000 mg.....	10	VENCLEXTA- venetoclax tab 10 mg.....	6
TRIKAFTA- elexacaf-tezacaf-ivacaf 100-50-75 mg & ivacaftor 150 mg tbpk.....	21	VENCLEXTA- venetoclax tab 50 mg.....	6
TRIKAFTA- elexacaf-tezacaf-ivacaf 50-25-37.5 mg & ivacaftor 75 mg tbpk.....	21	VENCLEXTA- venetoclax tab 100 mg.....	6
TRIUMEQ- abacavir-dolutegravir-lamivudine tab 600-50-300 mg.....	3	venlafaxine hcl cap er 24hr 37.5 mg (base equivalent) (Effexor xr)	24
TRULANCE- plecanatide tab 3 mg.....	22	venlafaxine hcl cap er 24hr 75 mg (base equivalent) (Effexor xr)	24
TRULICITY- dulaglutide soln pen-injector 0.75 mg/0.5ml.....	10	venlafaxine hcl cap er 24hr 150 mg (base equivalent) (Effexor xr)	24
TRULICITY- dulaglutide soln pen-injector 1.5 mg/0.5ml.....	10	venlafaxine hcl tab 25 mg (base equivalent)	24
TRULICITY- dulaglutide soln pen-injector 3 mg/0.5ml.....	10	venlafaxine hcl tab 37.5 mg (base equivalent)	24
TRULICITY- dulaglutide soln pen-injector 4.5 mg/0.5ml.....	10	venlafaxine hcl tab 50 mg (base equivalent)	24
TYMLOS- abaloparatide subcutaneous soln pen-injector 3120 mcg/1.56ml.....	13	venlafaxine hcl tab 75 mg (base equivalent)	24
		venlafaxine hcl tab 100 mg (base equivalent)	24
U		VENTOLIN HFA- albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv).....	20
UBRELVY- ubrogepant tab 50 mg.....	31	verapamil hcl tab er 120 mg (Calan sr)	14
UBRELVY- ubrogepant tab 100 mg.....	31	verapamil hcl tab er 180 mg (Calan sr)	14
UPTRAVI- selexipag tab 200 mcg.....	18	verapamil hcl tab er 240 mg (Calan sr)	14
UPTRAVI- selexipag tab 400 mcg.....	18	verapamil hcl tab 40 mg	14
UPTRAVI- selexipag tab 600 mcg.....	18	verapamil hcl tab 80 mg (Calan)	14
UPTRAVI- selexipag tab 800 mcg.....	18	verapamil hcl tab 120 mg (Calan)	14
UPTRAVI- selexipag tab 1000 mcg.....	18	VERQUVO- vericiguat tab 2.5 mg.....	18
UPTRAVI- selexipag tab 1200 mcg.....	18	VERQUVO- vericiguat tab 5 mg.....	18
UPTRAVI- selexipag tab 1400 mcg.....	18	VERQUVO- vericiguat tab 10 mg.....	18
UPTRAVI- selexipag tab 1600 mcg.....	18	VERZENIO- abemaciclib tab 50 mg.....	6
UPTRAVI- selexipag tab therapy pack 200 mcg (140) & 800 mcg (60).....	18	VERZENIO- abemaciclib tab 100 mg.....	6
		VERZENIO- abemaciclib tab 150 mg.....	6
V		VERZENIO- abemaciclib tab 200 mg.....	6
valacyclovir hcl tab 500 mg (Valtrex)	3	VIBERZI- eluxadoline tab 75 mg.....	22
VALCHLOR- mechlorethamine hcl gel 0.016% (base equivalent).....	43	VIBERZI- eluxadoline tab 100 mg.....	22
valsartan-hydrochlorothiazide tab 80-12.5 mg (Diovan hct)	16	VICTOZA- liraglutide soln pen-injector 18 mg/3ml (6 mg/ml).....	10
valsartan tab 40 mg (Diovan)	16	VIMPAT- lacosamide oral solution 10 mg/ml.....	32
valsartan tab 80 mg (Diovan)	16	VIMPAT- lacosamide tab 50 mg.....	32
		VIMPAT- lacosamide tab 100 mg.....	32
		VIMPAT- lacosamide tab 150 mg.....	32
		VIMPAT- lacosamide tab 200 mg.....	32

VIREAD- tenofovir disoproxil fumarate oral powder 40 mg/ gm.....	3	WILATE- antihemophilic factor/vwf (human) for inj 1000-1000 unit kit.....	40
VIREAD- tenofovir disoproxil fumarate tab 150 mg.....	3	X	
VIREAD- tenofovir disoproxil fumarate tab 200 mg.....	3	XALKORI- crizotinib cap 200 mg.....	6
VIREAD- tenofovir disoproxil fumarate tab 250 mg.....	3	XALKORI- crizotinib cap 250 mg.....	6
VITRAKVI- larotrectinib sulfate cap 25 mg (base equivalent).....	6	XARELTO- rivaroxaban for susp 1 mg/ml.....	35
VITRAKVI- larotrectinib sulfate cap 100 mg (base equivalent).....	6	XARELTO- rivaroxaban tab 2.5 mg.....	35
VITRAKVI- larotrectinib sulfate oral soln 20 mg/ml (base equivalent).....	6	XARELTO- rivaroxaban tab 10 mg.....	35
VONVENDI- von willebrand factor (recombinant) for inj 650 unit.....	40	XARELTO- rivaroxaban tab 15 mg.....	35
VONVENDI- von willebrand factor (recombinant) for inj 1300 unit.....	40	XARELTO- rivaroxaban tab 20 mg.....	35
VOSEVI- sofosbuvir-velpatasvir-voxilaprevir tab 400-100-100 mg.....	3	XARELTO STARTER PACK- rivaroxaban tab starter therapy pack 15 mg & 20 mg.....	35
VOTRIENT- pazopanib hcl tab 200 mg (base equiv).....	6	XELJANZ- tofacitinib citrate oral soln 1 mg/ml (base equivalent).....	30
VYNDAMAX- tafamidis cap 61 mg.....	18	XELJANZ- tofacitinib citrate tab 5 mg (base equivalent).....	30
VYNDAQEL- tafamidis meglumine (cardiac) cap 20 mg.....	18	XELJANZ- tofacitinib citrate tab 10 mg (base equivalent).....	30
VYVANSE- lisdexamfetamine dimesylate cap 10 mg.....	26	XELJANZ XR- tofacitinib citrate tab er 24hr 11 mg (base equivalent).....	30
VYVANSE- lisdexamfetamine dimesylate cap 20 mg.....	26	XELJANZ XR- tofacitinib citrate tab er 24hr 22 mg (base equivalent).....	30
VYVANSE- lisdexamfetamine dimesylate cap 30 mg.....	26	XIFAXAN- rifaximin tab 550 mg.....	3
VYVANSE- lisdexamfetamine dimesylate cap 40 mg.....	26	XIGDUO XR- dapagliflozin-metformin hcl tab er 24hr 2.5-1000 mg.....	10
VYVANSE- lisdexamfetamine dimesylate cap 50 mg.....	26	XIGDUO XR- dapagliflozin-metformin hcl tab er 24hr 5-500 mg.....	10
VYVANSE- lisdexamfetamine dimesylate cap 60 mg.....	26	XIGDUO XR- dapagliflozin-metformin hcl tab er 24hr 5-1000 mg.....	10
VYVANSE- lisdexamfetamine dimesylate cap 70 mg.....	26	XIGDUO XR- dapagliflozin-metformin hcl tab er 24hr 10-500 mg.....	10
VYVANSE- lisdexamfetamine dimesylate chew tab 10 mg.....	26	XIGDUO XR- dapagliflozin-metformin hcl tab er 24hr 10-1000 mg.....	10
VYVANSE- lisdexamfetamine dimesylate chew tab 20 mg.....	26	XOLAIR- omalizumab subcutaneous soln prefilled syringe 75 mg/0.5ml.....	20
VYVANSE- lisdexamfetamine dimesylate chew tab 30 mg.....	26	XOLAIR- omalizumab subcutaneous soln prefilled syringe 150 mg/ml.....	20
VYVANSE- lisdexamfetamine dimesylate chew tab 40 mg.....	26	XTAMPZA ER- oxycodone cap er 12hr abuse-deterrent 9 mg.....	29
VYVANSE- lisdexamfetamine dimesylate chew tab 50 mg.....	26	XTAMPZA ER- oxycodone cap er 12hr abuse-deterrent 13.5 mg.....	29
VYVANSE- lisdexamfetamine dimesylate chew tab 60 mg.....	26	XTAMPZA ER- oxycodone cap er 12hr abuse-deterrent 18 mg.....	29
W		XTAMPZA ER- oxycodone cap er 12hr abuse-deterrent 27 mg.....	29
warfarin sodium tab 1 mg (Coumadin).....	35	XTAMPZA ER- oxycodone cap er 12hr abuse-deterrent 36 mg.....	29
warfarin sodium tab 2 mg (Coumadin).....	35	XTANDI- enzalutamide cap 40 mg.....	6
warfarin sodium tab 2.5 mg (Coumadin).....	35	XTANDI- enzalutamide tab 40 mg.....	6
warfarin sodium tab 3 mg (Coumadin).....	35	XTANDI- enzalutamide tab 80 mg.....	6
warfarin sodium tab 4 mg (Coumadin).....	35	XULTOPHY 100/3.6- insulin degludec-liraglutide sol pen- inj 100-3.6 unit-mg/ml.....	10
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		
WILATE- antihemophilic factor/vwf (human) for inj 500-500 unit kit.....	40		

XYNTHA- antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 1000 unit.....	40	ZEPOSIA STARTER KIT- ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg & 30 x 0.92 mg.....	28
XYNTHA- antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 2000 unit.....	40	ZIEXTENZO- pegfilgrastim-bmez soln prefilled syringe 6 mg/0.6ml.....	35
XYNTHA- antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 250 unit.....	40	ZOKINVY- lonafarnib cap 50 mg.....	43
XYNTHA- antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 500 unit.....	40	ZOKINVY- lonafarnib cap 75 mg.....	43
XYNTHA SOLOFUSE- antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 1000 unit.....	40	zolpidem tartrate tab 5 mg (Ambien).....	26
XYNTHA SOLOFUSE- antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 2000 unit.....	40	zolpidem tartrate tab 10 mg (Ambien).....	26
XYNTHA SOLOFUSE- antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 3000 unit.....	40	zonisamide cap 50 mg.....	32
XYNTHA SOLOFUSE- antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 250 unit.....	40	zonisamide cap 25 mg (Zonegran).....	32
XYNTHA SOLOFUSE- antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 500 unit.....	40	ZYLET- loteprednol etabonate-tobramycin ophth susp 0.5-0.3%.....	41
Y			
YONSA- abiraterone acetate tab 125 mg.....	6		
Z			
zaleplon cap 5 mg (Sonata).....	26		
zaleplon cap 10 mg (Sonata).....	26		
ZARXIO- filgrastim-sndz soln prefilled syringe 300 mcg/0.5ml.....	35		
ZARXIO- filgrastim-sndz soln prefilled syringe 480 mcg/0.8ml.....	35		
ZEGALOGUE- dasiglucagon hcl subcutaneous soln auto-inj 0.6 mg/0.6ml.....	10		
ZEGALOGUE- dasiglucagon hcl subcutaneous soln pref syringe 0.6 mg/0.6ml.....	10		
ZEJULA- niraparib tosylate cap 100 mg (base equivalent).....	6		
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		